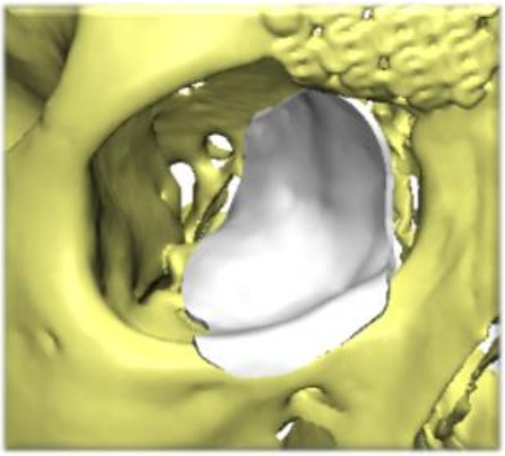
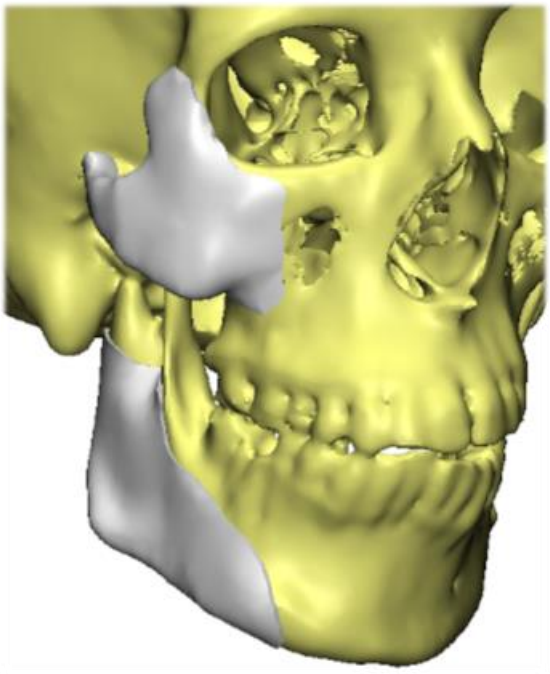
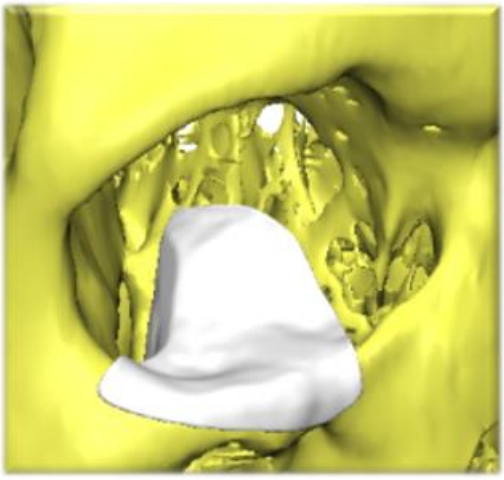
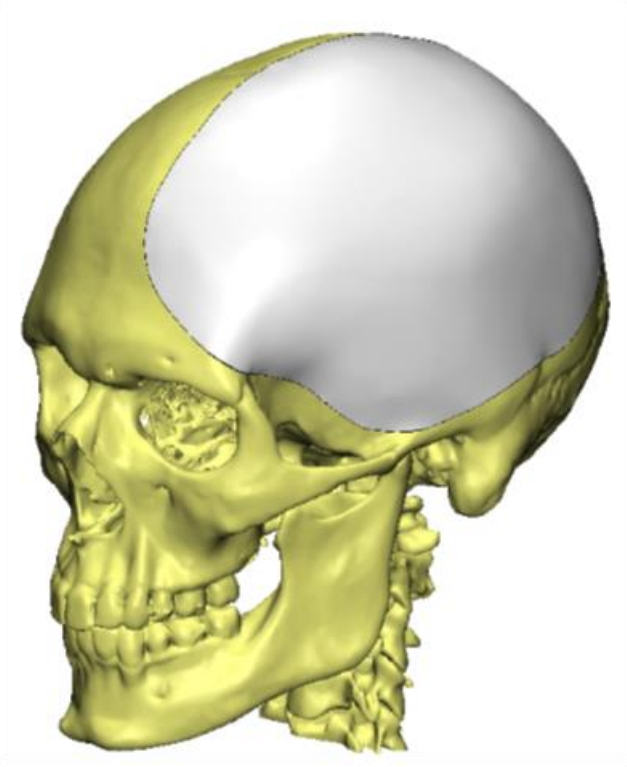
PORIFEROUS Patient-Specific Implants featuring SU-POR® Biomaterial









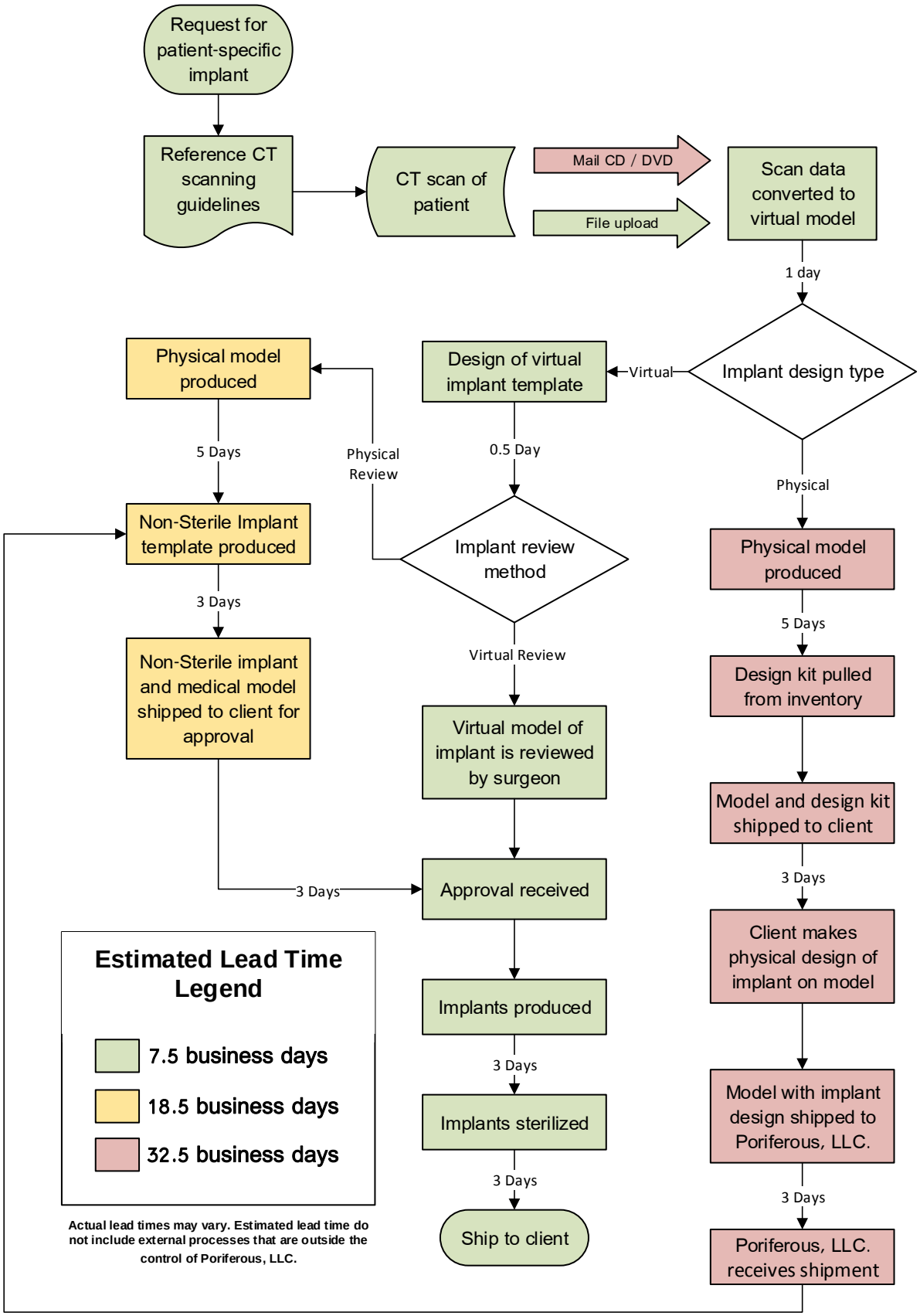
LEADER IN QUALITY

LEADER IN VALUE

Features and Benefits

Precise Fit	Each device is individually crafted to your patient's specific needs.
Proven Material	Poriferous polyethylene, a biocompatible material with over 30 years of proven clinical performance.
Variable Thickness	Variable thickness to match native bone.
Modification	Malleable, and allows for easy modification with a scalpel blade or burring instrument.
Direct Fixation	Screws may be inserted directly through the implant margins into the bone, and may eliminate the need for plate fixation.
Sterile Non-pyrogenic	Implant kit contains two (2) identical sterile, non-pyrogenic, implants limiting processing risk for the hospital.
Virtual Approval Process	Detailed electronic document allows for approval prior to manufacturing (optional)
Application	To meet the need of individual patients in applications of craniofacial reconstructive / cosmetic surgery and repair of craniofacial trauma.
MR Safe	This designation by the US FDA provides assurance of no image artifact or distortion of diagnostic MRI imaging.
Tissue In-Growth	The interconnecting poriferous structure may allow for fibrovascular in-growth and tissue integration.
Suture/Drainage	Sutures may be passed through any part of the implant. Open pores may allow drainage.
Fast Turnaround	Order shipment within 8 business days following design approval.

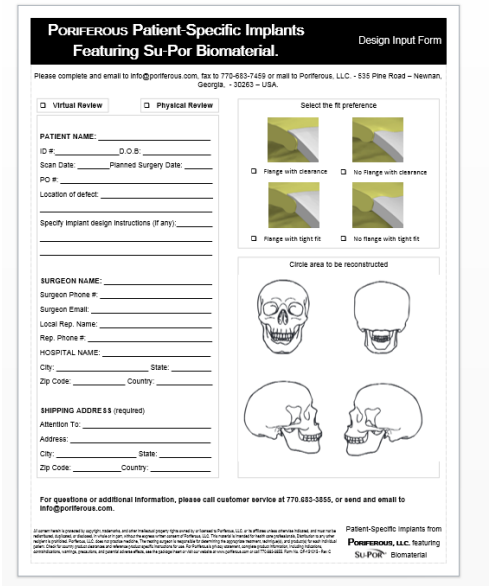
Process Flow Chart



LEADER IN QUALITY. LEADER IN VALUE

Poriferous, LLC. is owned and operated by professionals who were a part of the original team that introduced porous HDPE as an alloplastic material in 1985. Poriferous knows porous polyethylene and can deliver the results our surgeons demand.

All processes of design, manufacturing, and sterilization are performed in our ISO 13485 Certified facility located in Newnan, Georgia.


PORIFEROUS Patient-Specific Implants Featuring Su-Por Biomaterial.

Design Input Form

Please complete and email to info@poriferous.com, fax to 770-683-7459 or mail to Poriferous, LLC. - 535 Pine Road – Newnan, Georgia, - 30263 – USA.

☐ Virtual Review ☐ Physical Review

PATIENT NAME: _____

ID #:_____D.O.B: _____

Scan Date: _____Planned Surgery Date: _____

PO #: _____

Location of defect: _____

_____

Specify implant design instructions (if any):_____

_____

_____

SURGEON NAME: _____

Surgeon Phone #: _____

Surgeon Email: _____

Local Rep. Name: _____

Rep. Phone #: _____

HOSPITAL NAME: _____

City: _____ State: _____

Zip Code: _____ Country: _____

SHIPPING ADDRESS (required)

Attention To: _____

Address: _____

City: _____ State: _____

Zip Code: _____Country: _____

Select the fit preference

☐ Flange with clearance ☐ No flange with clearance

☐ Flange with tight fit ☐ No flange with tight fit

Circle area to be reconstructed

For questions or additional information, please call customer service at 770.683-3855, or send and email to info@poriferous.com.

Patient-Specific implants from PORIFEROUS, LLC. featuring SU-POR Biomaterial

Ordering Process

1. Complete Design Input Form.

2. Utilize preferred CT scanning protocol.

3. Submit form and CT data via:

Fax: 770-683-7459

Email: sales@poriferous.com

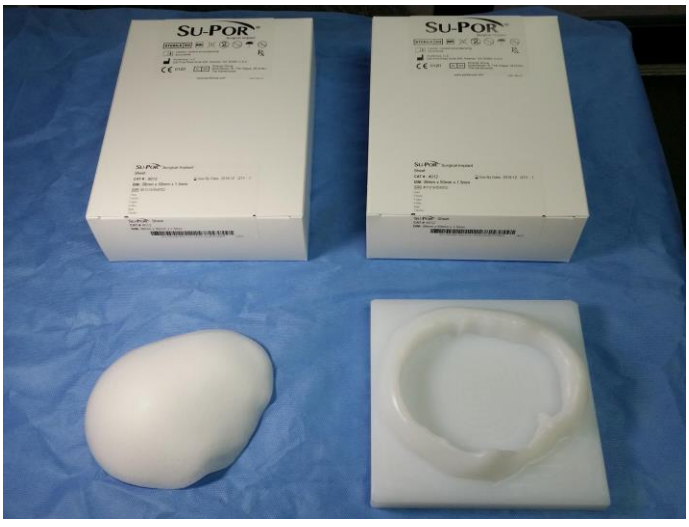
Mail: Attn: Poriferous, LLC.
Patient Specific Implants
535 Pine Road, Suite 206
Newnan, GA 30263

4 **For upload of CT data;** please contact Customer Care at (877) 631-1954, or e-mail for a secure upload request link.

5. Once your CT data has been received we will design a patient specific implant, and a graphic design proposal will be emailed for approval prior to making the actual implants.

Ordering Information

Cat#	Description
4350	Cranial (Small, Medium, Large, X-Large)
4351	Cranial Implant Template (non-implantable)
4353	Facial (Orbital, Midface, Mandible angle, Chin)
4355	Medical Model of defect area
4356	Facial Implant Template (non-implantable)



Scanning Protocol

The quality of the CT data is essential to the design and manufacture of Poriferous Patient-Specific Implants featuring Su-Por Biomaterial. Provided below is the protocol to follow:

CT Scanning Guidelines

- The patient must be stabilized and remain completely still throughout the entire scan. If patient movement occurs, the scan must be restarted to achieve the best implant fit.
- The scan should include 2cm beyond the defect area or area of interest.
- Please provide the original DICOM slice data.
- Do not reformat or include viewer software with data.
- Important position or details should be noted as well as any asymmetrical element of the patient to indicate left and/or right.
- The use of a bite jib during the scanning process for the mandible or the maxilla is recommended, otherwise they will be fused in the model.

SCANNING PARAMETERS:

Cranial Defects

- Acquisition: Axial/Helical
- F.O.V.: Include all areas of interest. Additional 20-25 cm above and below is preferred
- Gantry Tilt: 0
- Spacing: Overlapping
- Slice Thickness: 1-1.25mm (preferred)
- (3mm Max)
- Algorithm: Standard
- MA: 170ma/280kvp or lower
- Time: 2 seconds or less

Facial Defects

- Acquisition: Axial/Helical
- F.O.V.: Include all areas of interest
- Gantry Tilt: 0
- Spacing: Overlapping
- Slice Thickness: 1-1.25mm (preferred)
- (1.5mm Max)
- Algorithm: Standard
- MA: 120-180ma/120kvp or lower
- Time: 2 Seconds or less

This document is in no way intended to be a comprehensive manual of surgical techniques. Surgeons should utilize their surgical training, clinical experience, and applicable surgical techniques to determine appropriate surgical procedures. Experienced surgical judgment should be utilized in the selection and use of SU-POR implants.

Poriferous, LLC. 535 Pine Road, Suite 206 – Newnan, Georgia 30263 U.S.A
T +1 770.683.3855 – F +1 770.683.7459 – info@poriferous.com – **www.poriferous.com**

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