

Aspira[®]
DRAINAGE SYSTEM

Tunneled Drainage Catheter

Patient Implant Card - to be filled out by the healthcare institution/provider

English



PLACE THE REMOVABLE STICKER FROM THE PRODUCT LABEL HERE



Scan or go to URL www.myaspira.com to access Patient Guide.
Alternately, a hard copy may be requested from Merit Customer Service:
1-800-356-3748.



Merit Medical Systems, Inc.
1600 West Merit Parkway
South Jordan, Utah 84095

EC REP

Merit Medical Ireland Ltd
Parkmore Business Park West
Galway, Ireland

Refer to the product Instructions For Use for additional information. www.merit.com

Patient Name: _____

Implant Date: _____

Hospital Name: _____

Hospital Address: _____

Implanting Physician: _____

Implantable Device Materials Table

Material	Duration of Exposure	Level of Patient Exposure (cm ²)
Silicone	≥30 days	~ 108
Barium Sulfate	≥30 days	~ 9.5
Polyester Felt	≥30 days	~ 1.75