

Dear SpineWEDW Operator:

Telephone:

SpineMED® Serial #:

QMF 77

v1.2 Jan. 7, 2021

As part of our ongoing effort to continually improve the SpineMED® System, we are collecting clinical performance data from all users of the device.

Please complete this survey and fax it to 250-563-3177 or email a copy to info@spinemed.com.

Thank you for your support.

Best regards,

Tim Emsky

CLINIC INFORMATION

Physician Name: Dr. Cw8 ton Doring

Clinic Name:

Street Address: Beython - John - Suttney of Street Address: Beython - John - Suttney of Street Address: Postal Code/Zip: +1654

**CLINICAL PERFORMANCE SURVEY** 

Email:

Plea	se rate your over Less than 40%	41% to 55%	Section 2 Control of the Control of	Representative and the second	86% or more
Plea	se rate your over Less than 40%	The state of the s	- Security -	Disc Degenerations. 71% to 85%	(choose one) 86% or more
Plea	se rate your over Less than 40%	The second secon	Becaused	Sciatica Radiculopat	thy. (choose one) 86% or more
Plea	se rate overall pa	tient satisfaction v	vith SpineMED® tre	atment (choose one)	
Additio	Extremely Unsa				Extremely Satisfied
L					Extremely Satisfied
L					Extremely Satisfied

1648 Ogilvie St. South, Prince George, B.C. Canada V2N 1W9 Tel: 866.990.4444 Fax: 866.990.4445 www.spinemed.com

SpineMED® Clinical Performance Survey

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## Clinical Performance Survey

Name: Germany - Dr. Carsten Doring

	Overall outcomes* for :				
	Disc Herniation	Disc Degenerations	Sciatica Radiculopathy	Overall	
86% or More					
71% to 85%					
56% to 70%					
41% to 55%					
Less than 40%					

**Comments:** 

<sup>\*</sup> The above data is not peer reviewed. It is the subjective response from a Physician grading their clinical results with the SpineMED® System.