



PURIST Level 3 Certification Form

The IOT Level 3 certification allows the recipient named below to certify Level 2 trainers.

Recipient Info:

Name: _____ Title: _____

Company: _____ City: _____ State: _____ Country: _____

The recipient listed above must meet the following requirements:

1. I have met all Level 2 certification requirements for the systems below:

PURIST

MP XRAYCER

2. I scored a 100% on both the PURIST and MP XRAYCER online tests.

IOT Product Manager Signature: _____ Date: _____

5. I have been in QTY 5 anterior hip arthroplasty cases using the PURIST, with info on each case below.

	Date	Facility	Surgeon	Participant Initials
Case 1				
Case 2				
Case 3				
Case 4				
Case 5				

Notes regarding this Level 3 Recipient (previous experience with IOT equipment, etc.):

Recipient Notes:

IOT Product Manager Notes:

Level 3 Trainer Notes:

IOT Managing Director Notes:

Recipient Signature: _____ Date: _____

Level 3 Trainer: _____

Level 3 Trainer Signature: _____ Date: _____

IOT Managing Director: _____

IOT Managing Director Signature: _____ Date*: _____

**Certification can be revoked by a Level 3 trainer or IOT at anytime*