

# Drive Case Management System (DCMS) Registration Form

ROSA® Robotics & ONE Planner™ Hip

**To ensure setup accuracy, please fill out one form per scan site.  
 Fill out form electronically, do not print and submit handwritten form.**

PS Product: ROSA Knee - X-Atlas™ ROSA Partial Knee ROSA MRI Knee ROSA Hip ONE Planner Hip Only

Sales Representative Information and Association *REQUIRED*			
First Name	Last Name	Phone Number	Email
Sales Team		Distributor	
<b>Distributor/Country (Shipping Address)</b>			
Street Address		City	State/Province
Zip Code	Country	Surgeon(s) to Associate	

Surgeon Information and Association *REQUIRED*			
First Name	Last Name	Email	
Is this a ROSA Knee certified surgeon?	Yes	No	Is this a ROSA Hip certified surgeon? Yes No
<b>Account/Hospital (Where surgery is performed)</b>			
Street Address		City	State/Province
Zip Code	Country	Phone Number	Sales Team/Rep
Procedure			
Modality		Scan Center	

Patient Care Coordinator (Surgery Scheduler)			
First Name	Last Name	Phone Number	
Street Address		City	State/Province
Zip Code	Country	Email	

**Scan Center Information \*REQUIRED\***

Scan Center Name			
Street Address		City	State/Province
Zip Code	Country	Phone Number	Modality
Scanner Manufacturer (MRI)		Model Name (MRI)	

**Scan Center Imaging Contact(s)**

First Name	Last Name	Modality	Email	Phone Number
First Name	Last Name	Modality	Email	Phone Number

**IT Contact**

First Name	Last Name	Email	Phone Number

Is the scan site currently sending images to Zimmer Biomet?    Yes    No

**ONE Planner Hip / ROSA Hip (when applicable)**

<b>Spherical marker size facility will be using</b>	<i>Provided by facility, is not provided by Zimmer Biomet.</i>
<i>Lateral imaging required to assess pelvic tilt. Surgeon must indicate on imaging order if lateral imaging is to be performed.</i>	

Submit the completed registration form to [personalizedsolutions@zimmerbiomet.com](mailto:personalizedsolutions@zimmerbiomet.com)

CONFIDENTIAL. The patient's surgeon is solely responsible for determining the appropriate treatment, technique(s), sizing, and products for each individual patient.

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