

Moximed, Inc.  
MISHA® Knee System  
MISHA™ Randomized Study  
Pre-Screening Script

---

1. If you qualify and choose to join the study, would you be able to return to this location for the MISHA Knee System procedure and regular follow-up visits?
  - ☐ Yes
  - ☐ No

*(If no: disqualify)*
2. What is your age?
  - ☐ < 25
  - ☐ 26 – 35
  - ☐ 36 – 45
  - ☐ 46 – 55
  - ☐ 56 – 65
  - ☐ > 65
3. Have you previously seen an orthopedic doctor for your knee pain?
  - ☐ Yes
  - ☐ No
4. Where is your knee pain mostly concentrated?
  - ☐ Inner side of knee
  - ☐ Outer side of knee
  - ☐ On front of knee (knee cap)

*(If not inner side of knee: disqualify)*
5. Is your pain mostly in one knee? Or do you have significant pain in both knees?
  - ☐ One knee
  - ☐ Both knees
  - ☐ Not sure

*(If both knees: disqualify)*
6. Please use the Body Mass Index (BMI) calculator below to find your current BMI
  - ☐ BMI less than 25.0
  - ☐ 25.0 – 29.9
  - ☐ 30.0 – 34.9
  - ☐ 35.0 – 39.9
  - ☐ BMI 40.0 or higher
7. Below are some common treatments for knee pain. Have you tried any of these treatments? (Please select all that apply)
  - ☐ Lifestyle modifications (such as avoiding certain activities)
  - ☐ Weight loss
  - ☐ Pain relievers (either over-the-counter or prescription)
  - ☐ Physical therapy
  - ☐ Orthotics (splints, braces)
  - ☐ Steroid injections
  - ☐ None of these

*(If none: disqualify)*

8. The knee device being offered in this study (the MISHA Knee System) is implanted through a surgical procedure that takes about one hour. Are you willing to consider a surgical procedure to treat your knee osteoarthritis?
- ☐ Yes
  - ☐ No
  - ☐ Not sure
- (If no: disqualify)*
9. Are you currently on worker's compensation for your knee pain, or involved in any litigation for your knee pain?
- ☐ Yes
  - ☐ No
- (If yes: disqualify)*

***If Patient Passes All Criteria:***

Thank you. Your responses have met the basic criteria for the study.

Your information has been sent to an appropriate research personnel. You can expect to hear from them within the next few days. Thank you again for your interest.

---

***If Patient Does NOT Pass Criteria:***

Thank you for answering our questions. Unfortunately, you do not qualify for the study. Your information will be deleted. Thank you again for your interest.