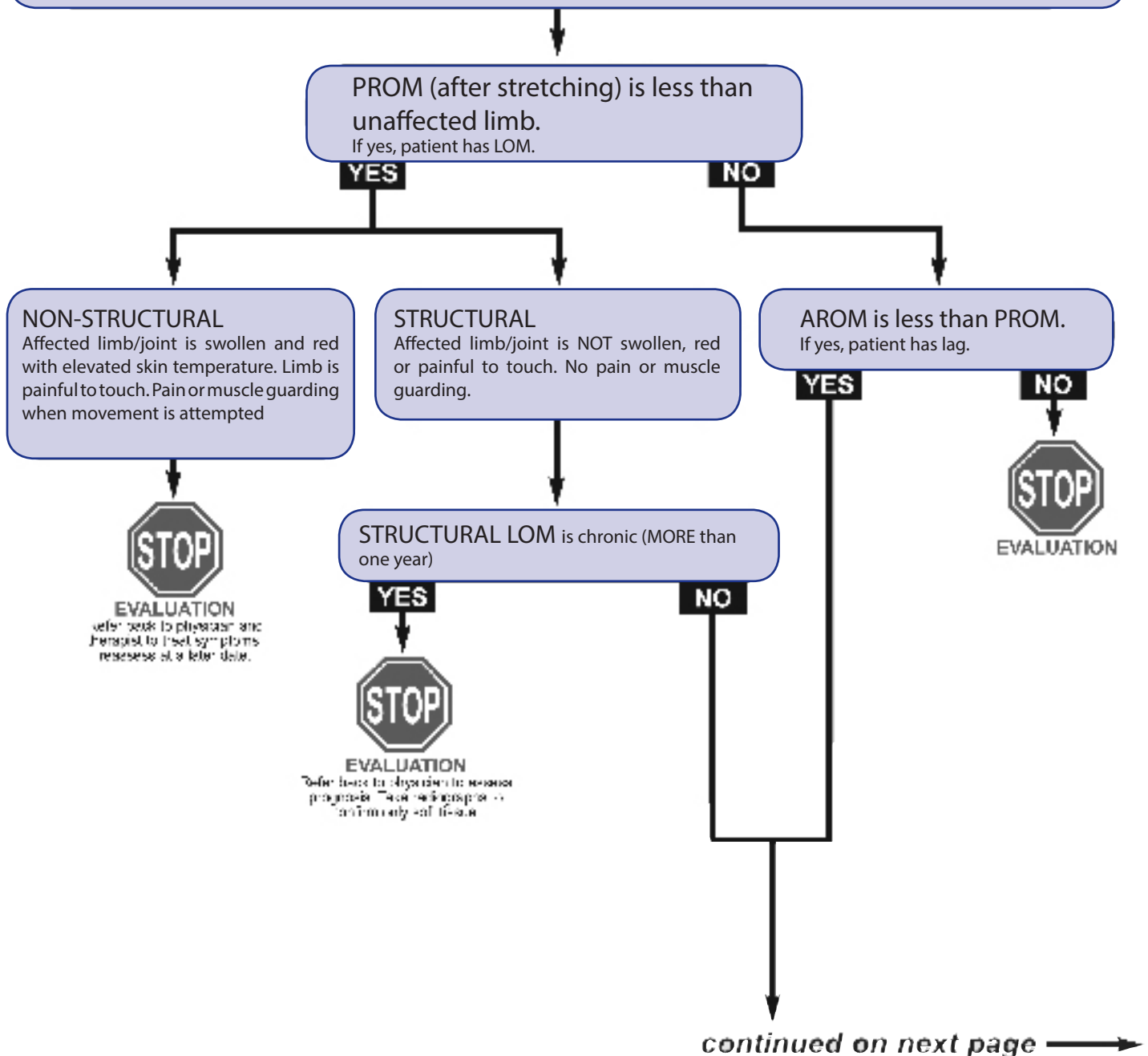


1) Patient Evaluation

Continue with each step, unless you come to STOP EVALUATION - indicating that the patient is unlikely to be a bracing candidate

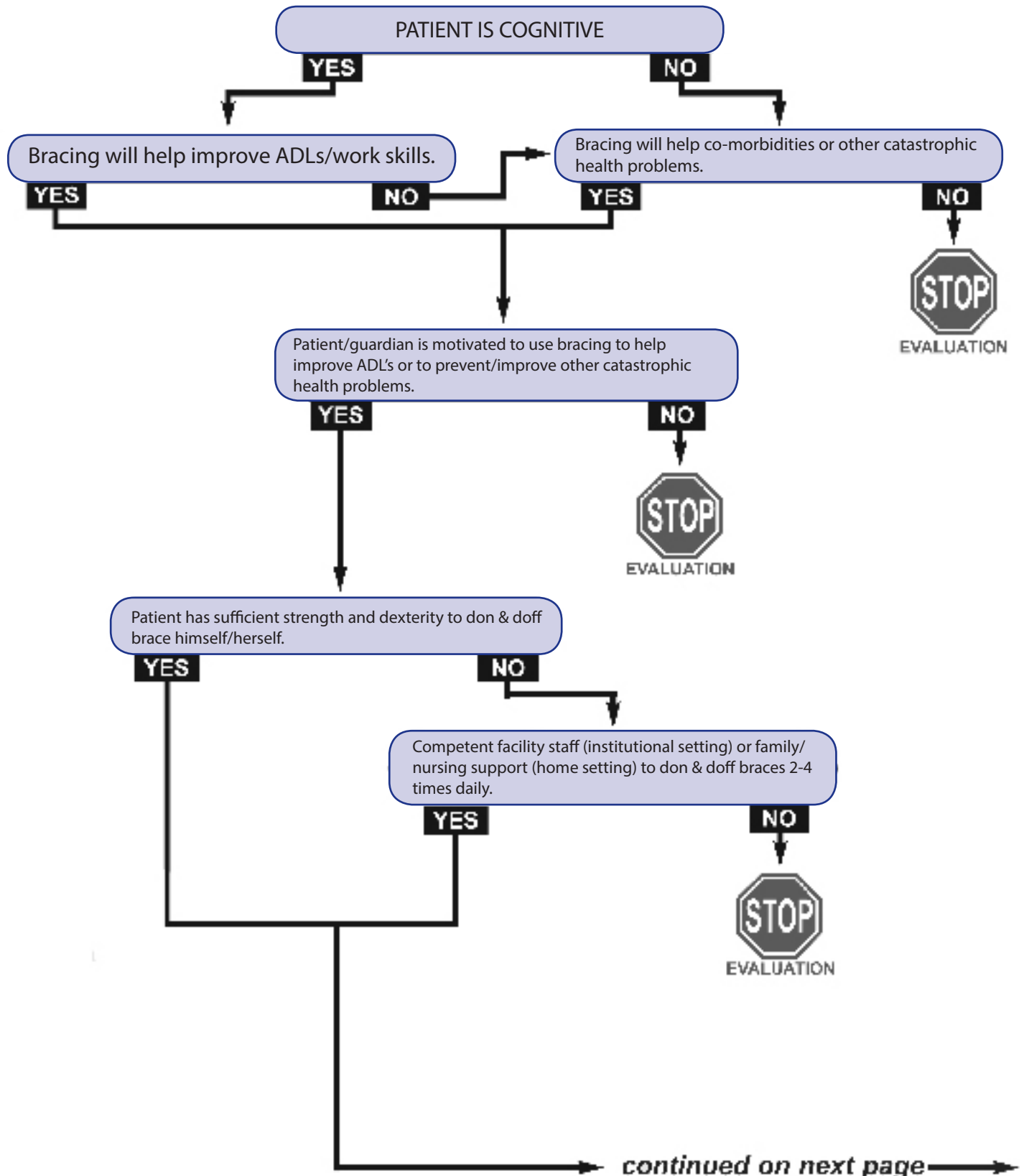
- Determine height, weight, age, primary etiology of orthotic dysfunction (disease, injury, surgery) and co-morbidities (poor skin integrity, circulation, sensation, neuropathies, osteoporosis, etc.)
- Record time of onset, including primary etiology and treatments to date. This discussion pertains to assessing peri-articular dense connective tissue restrictions, including concomitant lags. For patients with CNS lesions or pattern deformities crossing two or more joints, see the Neurological Dysfunction section.
- Measure ROM after initial stretching, both active and passive to establish baseline values.
- Measure unaffected limb to approximate normal range for that patient.



ORTHOPEDIC DYSFUNCTION

2) Compliance Assessment

Continue with each step, unless you come to STOP EVALUATION - indicating that the patient is unlikely to be a bracing candidate

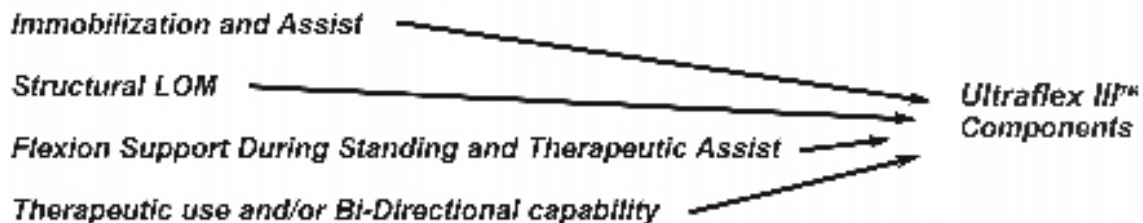


ORTHOPEDIC DYSFUNCTION

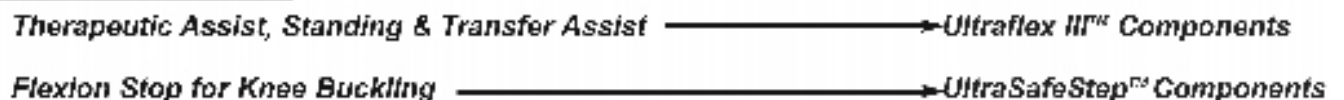
3) Determine Brace Design

COMPONENTS- Structural LOM/LAG, Functional...

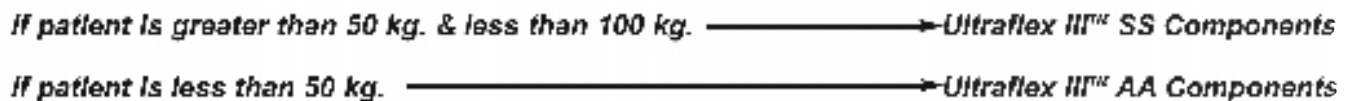
LOWER & UPPER EXTREMITIES



LOWER EXTREMITY



JOINT MATERIAL



BODY INTERFACE...

CUSTOM MOLDED

- Recommended for patients who have excessive adipose tissue, unusual anthropometric proportions or severe osteoporosis
- Use when poor sensation, poor circulation or poor skin integrity is present
- Easiest to don/doff for patient/caregiver

4) Treatment and Use

Therapeutic Bracing For Structural LOM & LAG:

At initial fitting, patient/caregiver should demonstrate:

- 1) How to don/doff the brace
- 2) How to wear during prescribed exercise regimens (e.g heel-to-toe gait training, active assisted exercise) to improve active strength
- 3) How to posture at rest in a gravity-neutral or assisted position

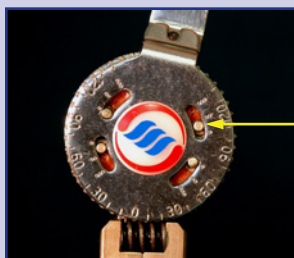
Therapeutic Bracing: Initial Treatment - 1 to 14 days

For best results, it is important to PRECONDITION THE JOINT with the orthosis by applying Ultraflex stress therapy gradually. Please utilize the following procedure:

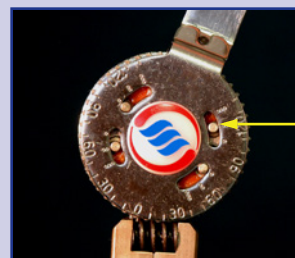
- 1) At the initial fitting, the patient should wear the orthosis for 25 minutes at tension setting "1/2" and be monitored to make sure that it fits properly and there is no discomfort. If any pressure (as indicated by redness) to any skin area is noticed, adjust Ultraflex orthosis (re-contour struts, adjust cuffs/straps) to insure maximum compliance.
- 2) 1st DAY - tension set at "1/2" and wear for 2 hours
- 3) 2nd DAY - tension set at "1/2" and wear for 4 hours
- 4) 3rd DAY - tension set at "1/2" and wear for 8 hours
- 5) Continue tension setting "1/2" for 8 hours/day and assess ROM gains (1-3 degrees is desired) after 1 week. If 8 hours per day cannot be attained for tolerance reasons, back tension by one setting (see picture #1)
- 6) If ROM plateaus, progress one setting and repeat steps 2 through 5



#1 - "0" setting



#2 - "1-2" setting



#3 - "2" setting



#4 - "3" setting

Functional Bracing (using USS knee & ankle components)

At initial fitting, patient/caregiver should demonstrate:

- 1) How to don/doff the brace
- 2) How to wear and perform ADLs (e.g. gait, feeding, transfers, etc)

If brace is being used for gait assist or training to prevent unwanted movement, support instability or control alignment, practitioner must set controls and assist until function is optimized.