

BEFORE USING THE DEVICE, PLEASE READ THE **INSTRUCTIONS FOR USE** COMPLETELY AND CAREFULLY. CORRECT APPLICATION IS VITAL TO THE PROPER FUNCTIONING OF THE DEVICE.

APPLICATION INFORMATION:

For first time application, loosen all straps and remove liner from boot.

- 1) Place foot in liner and secure with contact closure. Make sure the heel fits snugly into the posterior portion of the liner. Secure the forefoot flap on the liner first followed by the lower leg portion. Make sure liner fits snug top to bottom.
- 2) Both uprights may be shortened by 2" to accommodate various patient heights. Note: Remove soft Velcro® strips at top of liner if bars are not broken down. To Breakdown Uprights: Secure uprights on edge of table or hard surface. Firmly push down on breakdown portion of bar. Soft Velcro strips are included at top of each liner. Following breakdown of bars, the strips should be applied to top of uprights.
- 3) Spread the uprights using both hands and step into boot, aligning uprights with midline of the ankle. Remove plastic sheaths on uprights and secure liner. The uprights may be bent to accommodate any leg contour.
- 4) The two straps at the ankle joint may be adapted to accommodate individual patient needs. Prior to securing bootstraps, determine desired ankle strapping method. Ankle Cross Strap Conversion: 4a) Strap 3 is removable and may be secured by feeding through d-ring on opposing upright. 4b) If Cross Strapping is desired, feed Strap 3 through opposing forefoot d-ring. Cross Strap 2 over Strap 3, feed through d-ring on opposing upright and secure. Secure all other bootstraps, starting at the toes and working up the leg. Note: The ankle version has only one strap around the lower leg.
- 5) To inflate air liner press and release the air bulb several times until liner is providing comfortable cushion and support. **DO NOT OVER INFLATE.**
- 6) To release air from the walker liner, turn the inflation/deflation knob several times counter-clockwise. When re-inflating, turn knob clockwise until snug. Release air if liner feels too tight. **Caution:** If liner feels too tight while wearing product, deflate the liner by turning inflation/deflation knob counter clockwise. Consult your medical professional immediately.

INSTRUCTIONS FOR RANGE-OF-MOTION HINGE ADJUSTMENT:

Slide open cap cover. Turn hinge cap cover to expose pins. Release pins, select correct settings and reinsert pins. Close cap cover. To lock uprights in fixed 90° angle, set both pin settings at 0°. To lock in 7.5°, 15°, 22.5° or 30° of plantar or dorsiflexion, set one pin at desired setting in location marked "lock" and second pin in corresponding (same number) setting in the open opposing position. Only tighten cinch screw (with allen wrench), when locked in fixed position of 0°, 7.5°, 15°, 22.5° or 30° of plantar or dorsiflexion. Repeat the procedure for the hinge on opposite side of Walker to match the new settings.

INTENDED USE/INDICATIONS:

Support and management of edema for acute ankle sprains, soft tissue injuries of the lower leg, stress fractures of the lower leg, stable fractures of the foot and ankle, stable delayed union or non-union fractures of the distal tibia and fibula, Achilles tendon repairs, Bunionectomies, Metatarsal Fracture, Forefoot, midfoot and hindfoot injury.

CONTRAINDICATIONS:

Not for use on patients with compromised sensation in the foot and ankle region. Application of this device is recommended only when the fracture is demonstrably stable and there are acceptable limits of angular and rotational deformity. The determination of when to apply the brace rests strictly at the discretion of the treating physician.

PRESCRIBING INFORMATION:

Inflate and deflate bladder once before use to ensure integrity of the air chamber. This product was designed to complement the variety of medical treatments common to the above afflictions. Your prescribing Healthcare professional should determine the frequency and duration of use. Note: Due to the molded outer sole, the orthopedic walker may be slightly higher than a normal street shoe, therefore an athletic shoe or a street shoe with a ½" heel, may be worn if necessary for patient comfort. A heel lift also may be used in the shoe worn on the non-affected foot.

WARNINGS AND PRECAUTIONS:

Always consult with your physician or therapist before making changes to the brace. This product is to be used under the supervision of a medical professional. This device is not intended for unsupervised public use. If you experience any pain, swelling, sensation changes, any unusual reaction while using this product, consult your medical professional.

CLEANING INSTRUCTIONS:

To clean liner, hand wash in cold water using mild soap. Air dry.
Note: If not rinsed thoroughly, residual soap may cause irritation and deteriorate material.

WARRANTY:

DJO, LLC will repair or replace all or part of the unit and its accessories for material or workmanship defects for a period of six months from the date of sale.

For single patient use only

RX product

NOT MADE WITH NATURAL RUBBER LATEX



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