LEEDerGroup.com KYDEX-PRO Orthosis

8508 NW 66th Street Miami, FL 33166 T: 305.436.5030

Single Patient Use Only

RX Only—Custom Fit

Before using this device, PLEASE READ THE FOLLOW-ING INSTRUCTIONS COMPLETELY AND CARE-FULLY. Correct application is vital to the proper functioning of the device.

INTENDED USE:

Plantar Flexion Contracture Foot Drop, Heel Decubitus Ulcers Plantar Fasciitis

CONTRAINDICATIONS:

Fixed Plantar Flexion Contracture Severe Spasticity of the Lower Leg

WARNINGS & PRECAUTIONS:

Application by trained medical personnel only. Should be removed AT LEAST once every shift for assessment. Should be REMOVED and the physician notified if:

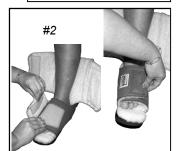
- A. persistent redness and irritation of skin occur
- B. excessive pain and / or swelling occur.

FITTING INSTRUCTIONS:

- 1. Remove the Orthosis from the package. Open all hook and loop closures.
- 2. With the patient lying down, bend the knee to 45 degrees or as close to 45 degrees as comfort will allow.
- 3. Place the patient's foot in the Orthosis so that the sole of the foot rests on the base of the splint. (see Picture # 1)
- 4. Holding the foot in place, bring the loop side of the foot liner over the top of the foot. Bring the opposite side of the foot liner over the top of the foot and secure the Velcro closure.

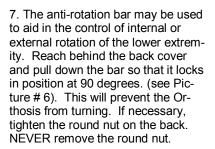
 (see Picture # 2)
- 5. Bring the loop side of the top leg liner over the leg. Bring the opposite side of the top leg liner over the leg and secure the Velcro closure. (see Picture # 3)

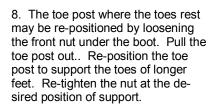






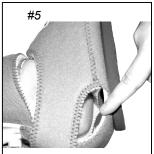
6. Observe the completely applied Orthosis. (see Picture # 4). If required, carefully check the heel area to see that the heel is floating free. (see Picture # 5). Look carefully at the heel opening on the Orthosis. Re-adjust foot position if necessary and check again.





Ambulation Pad Note: pop out rubber donuts and unscrew round nuts to remove; reverse process to reattach; never leave bolt threads exposed.







CLEANING INSTRUCTIONS:

Clean as necessary to maintain good hygiene. Remove soft goods from KYDEX shell; wipe down shell with alcohol. Fasten Velcro on soft goods; hand wash only. No bleach. Rinse well. Hang dry only.

WARRANTY:

Product warranty ninety (90) days from date of shipment as to product quality and workmanship. Manufacturer's written warranty is given in lieu of any implied warranty, including warranty of merchantability or fitness for a particular purpose.

CAUTION:

This Orthosis device provided by or on the order of a licensed Health Care Professional.

LATEX FREE

Part No.

LBMR, LBML (add "NF" for No-Fleece option)
LBMR-NF, LBML-NF
LBR and LBL = Bed boot (no ambulation pad)
(LBR-NF, LBL-NF)
Pediatric Bed and Ambulation Available

V.1.19GS

Email: info@LEEDerGroup.com