MaxTrax™ Diabetic Walker

PATIENT APPLICATION



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

INTENDED USER PROFILE:

THE USER SHOULD BE ABLE TO:

- READ AND UNDERSTAND THE DIRECTIONS, WARNINGS AND CAUTIONS.

INTENDED USE/INDICATIONS:

Intended to replace total contact casting for treatment of ulcerative or pre-ulcerative conditions on the plantar surface of the foot. Moderate to severe plantar fasciitis. Postoperative Charcot foot. Foot conditions that may require and would benefit from even distribution of body weight on the plantar surface of the foot. Other conditions recommended by a licensed practitioner.

CONTRAINDICATIONS:

Pregnancy and Circulation, Pulmonary, Cardiovascular or Skeletal conditions which have risk to be made worse as a result of compression and/or pressure. If bony foot deformities exist, such as non-operative Charcot or other abnormalities, that cause the shape of the foot to deviate excessively from its natural shape. Foot pathology requiring support of the boney structures.

WARNINGS AND PRECAUTIONS:

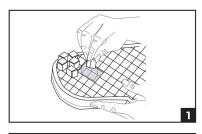
For single patient use only. Not intended for patients in excess of 300 lbs. Not intended to prevent injuries or reduce or eliminate the risk of re-injury. Never allow the bare foot to directly contact the innersole. Wear a sock so the foot can breathe. Patient, family member or medical personnel should inspect your feet before and after each use. If you develop any red inflamed areas, ulcers, sores or draining areas on your foot, contact your physician immediately. This product was designed for diabetic ulcer healing. Wounds located at the beginning or the end of the gait path should be monitored closely to ensure that pressure relief is maintained. The insole should NOT be used in conjunction with any other walker other than the DJO® MaxTrax™ Diabetic platform walker. Do not remove the walker unless instructed by your physician. If you experience any pain, swelling, sensation changes, or any unusual reactions while using this product, consult your medical professional immediately.

CLEANING INSTRUCTIONS:

To clean liners, blue foam pad and walker boot – hand wash in cold water using mild soap, or wipe with a damp cloth and air dry.

Note: If not rinsed thoroughly, residual soap may case irritation and deterioration of materials

INTENDED FOR SINGLE PATIENT USE.
NOT MADE WITH NATURAL RUBBER LATEX.















Application Information

PREPARATION:

- A) Be sure to treat and dress the plantar ulcer/s appropriately.
- B) Wear a sock over the foot and dressing/s.

WALKER BOOT APPLICATION:

- Remove the blue foam pad from the walker boot. Place the blue side against the patient's plantar surface, locate and remove the pre-cut foam cubes from the bottom of the blue foam pad around the wound site/s. Replace the blue foam pad back into its original location under the walker liner.
- 2 Remove the walker liner from the walker boot. Place the foot into the liner and ensuring that the heel fits snugly into the posterior portion of the liner. Secure the forefoot flap first followed by the tibial closure. Ensure that the liner fits snug top to bottom and that there are no sharp edges or creases against the skin.
 - a) Two optional upright pads are included with each walker to provide additional padding in area of metal uprights. Once liner is applied to lower leg, place one pad on either side of the liner with hook portion of the pad against the liner. Make sure the pads are aligned with midline of leg. Top of pads should be aligned with top of liner.
- 3 Both aluminum uprights on the walker can be shortened by 2" to accommodate various patients heights. (fig 3)
 - a) To breakdown Uprights: Secure uprights on edge of table or hard surface. Firmly push down on breakdown portion of bar. Soft hook and loop strips are included with each brace. Liner may be folded over uprights if necessary for added comfort and fit. (fig 3)
- 4 A Toe Wrap is included with each Walker. Attach the Toe Wrap by lifting the end of the innersole and laying the Toe Wrap on the hook and loop strip. Replace the inner sole to it's original position.
- 5 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.
- 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: (fig 6a) Strap 3 is removable and may be secured by feeding through d-ring on opposing upright. (fig 6b) 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.

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.

NOTICE: WHILE EVERY EFFORT HAS BEEN MADE IN STATE-OF-THE-ART TECHNIQUES TO OBTAIN THE MAXIMUM COMPATIBILITY OF FUNCTION, STRENGTH, DURABILITY AND COMFORT, THERE IS NO GUARANTEE THAT INJURY WILL BE PREVENTED THROUGH THE USE OF THIS PRODUCT.



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