

Wearing In Schedule

Precautions

Initial wearing schedule should be followed to allow lower leg to become accustomed to the pressures being applied and to prevent soreness. The break-in schedule will also allow the wearer to adapt to ambulation in the device.

Wearing Schedule		
Day	Morning	Afternoon
1	1 hr	1 hr
2	2 hrs	1 hr
3	2 hrs	2 hrs
4	3 hrs	2 hrs
5	3 hrs	3 hrs
6	4 hrs	3 hrs
7	4 hrs	4 hrs



1. Follow break-in schedule for the first week to desensitize the lower leg and increase comfort.
2. Do not exceed break-in wear times.
3. Do not use lotions, creams, or powders under liner.
4. Inspect skin before and after wearing to observe changes. Report any abrasions or red areas that do not resolve within 30 minutes.
5. Observe and use caution while ambulating on all surfaces. Use additional caution when transitioning between different walking surfaces, or ambulating over wet ground. Be aware of obstacles like throw rugs, stairs, ramps, and curbs.
6. Not recommended for ambulation on unfinished or uneven outdoor surfaces (i.e. unpaved ground, gravel, grass).



Finally a brace that provides 100% offloading and ambulation of the foot and ankle with full circulation!



Important Information

BEFORE USING THE TAG BRACE, PLEASE READ THE FOLLOWING INSTRUCTIONS COMPLETELY AND CAREFULLY. CORRECT APPLICATION AND ADHERENCE TO WEARING SCHEDULE IS VITAL FOR PROPER FUNCTION OF THE DEVICE.

INTENDED USE/INDICATIONS

The purpose of the TAG Brace is to unload the foot and ankle complex for plantar surface wound healing, or foot/ ankle fracture healing. The TAG Brace is designed to unload the foot and ankle while allowing the patient to ambulate without significant reliance on assistive devices. Allowing un-weighted ambulation increases compliance with non-weight-bearing and maintains muscle and bone health of the remainder of the skeletal system.

CONTRAINDICATIONS

Open wounds in the area covered by brace. Fracture of proximal tibia and/or fibula.

WARNINGS AND PRECAUTIONS

If you experience any pain, swelling, sensation changes, or any unusual reaction while using this brace, consult your medical professional.

For further information, please see the Toad Medical website at www.toadmedical.com or visit www.tagbrace.com.au.



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Instructions

1. Remove the brace and liner from the packaging. Cut off the very distal end of the liner to open it as a tube keeping the liner as long as possible.
2. Roll the liner onto patient's leg, positioning over calf and maximizing coverage of lower leg to just above malleoli.
3. Open the shell and place the brace on the leg. Position the heel at least 3" (7.5 cm) above the bottom of the brace. This is important as the leg will settle down a minimum of 2" (5 cm). If the brace is donned to low, the heel and foot will sink down and contact the strut. Note that the Patella tendon bar will be at least 2" below the anatomical patella tendon of the patients knee at initial fitting and will properly position when weighted.
4. Ensure foot is aligned properly over strut and foot plate. If not, reposition leg so patient's foot mirrors strut alignment. Check to make sure that the footplate is not putting any pressure on the area in which needs to be un-weighted.
5. Close the shell over shin. It is important to make sure that the silicone liner extends to the top and bottom of the shell.
6. Wrap the three velcro straps around the posterior of the leg, through the chafes, and apply mild to moderate pressure before affixing the loop and pile together. We recommend tightening the straps from the bottom up.
7. Assist patient to stand and have them shift weight from side to side to ensure leg sinks/settles fully into brace. In standing, check position of leg and ensure proper offloading of desired area has been achieved.
8. If foot is not adequately suspended, refit the brace with the calcaneus suspended higher initially to allow for more settling.
9. If necessary, a varus/valgus adjustment can be made by loosening the two bolts (two full turns) on the posterior strut/shell attachment which will enable the top and bottom of the shell to be shifted to accommodate genu varum or valgum. This increases stability and comfort.
10. Discuss wear, care and break-in schedule with the patient and hand them the wear schedule chart.

DONNING TIP

Upon initial ambulation, ask the patient to hold the involved foot in dorsiflexion during their first short walk in the brace. After ambulating, ask that the patient lightly rest their foot onto the footpad. This will reduce the desire for the patient to plantarflex at push-off as part of normal gait.

Application of the TAG Brace

Before first use of the TAG Brace, remove the silicone liner from the box and trim just above bottom seam to create a tube.

