Leada Rest WHFO

INDICATIONS FOR USE:

- Mild to moderate contracture of the wrist, hand, and fingers
- Increase / maintain and support position of wrist, hand and fingers

FITTING INSTRUCTIONS:

1. Open all hook and loop closures.
2. By hand, "Bend to Fit" the orthosis to accommodate degree of contracture of wrist and hand.
3. If an optional finger attachment was ordered (finger separator or ulnar drift strap) attach the strap to the desired position on finger pan of the brace.
4. Position the forearm, wrist and hand on the orthosis. While holding the wrist in place, secure the wrist strap first (red hook and loop)
5. Secure the forearm strap (blue hook and loop), then finger strap and thumb strap
6. Check that the straps are snug but not too tight.
7. Determine wearing schedule based on patient tolerance, therapy evaluation and/or physician's order
8. The orthosis can me re shaped as range of motion increases and contracture(s) degrease to maintain position.

IMPORTANT:

- Do not apply the device if there is significant skin redness that would come in contact with the device.
- Upon removal of the device, closely inspect skin integrity. If any redness is present, discontinue device use until skin integrity issues are resolved and the device is adjusted and/or wearing schedules adjusted accordingly

CONTRA-INDICATIONS:

- Open wounds that would be in contact with the orthosis
- Grade three plus edema of the wrist, hand and/or fingers
- Severe spasticity of the wrist, hand and/or fingers

LAUNDRY INSTRUCTIONS:

1. Always remove soft cover from the frame before washing. Wipe frame with damp cloth or antibacterial wipe.
2. Close all hook and loop attachments on soft cover.
3. Hand or machine wash, gentle
4. Air or tumble dry low heat
5. No bleach or fabric softener
6. **DO NOT USE COMERCIAL WASHER OR DRYER**

WARNING: The product should be fit by trained personnel. The product is designed for single patient use only in order to avoid cross contamination. Any substitution or removal of the product's parts voids the manufacturer's warranty. OCSI Inc. will assume no liability if the above instructions are not followed.

REPORT A SERIOUS INCIDENT: The user and/or patient must report any serious incident that has occurred in relation to the device to the manufacture/distributor and the competent authority of the Member State in which the user and /or patient is established.

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EC REP

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