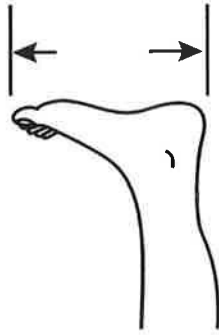


MEASURING INSTRUCTIONS

1. Place patient's leg in a horizontal position on a flat surface.
2. Using a tape measure or ruler, measure the length of the patient's foot from the bottom of the heel to the top of the great toe.

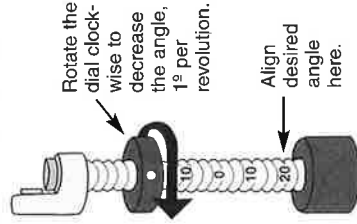


3. Choose appropriate size from the chart below.

Size	Measure	Model #	Breathable Foam Model #	Burn Unit Model #
Pediatric	4 1/2 - 6"	20MP-A-P	21MPO-A-P	19MP-A-P
Youth	6 - 7"	20MP-A-Y	21MPO-A-Y	19MP-A-Y
Small	7 - 8"	20MP-A-S	21MPO-A-S	19MP-A-S
Average	8 - 9 1/2"	20MP-A-A	21MPO-A-A	19MP-A-A
Large	9 1/2 - 11"	20MP-A-L	21MPO-A-L	19MP-A-L
Ex. Large	11 - 12 3/4" 27.9 - 32.4 cm	20MP-A-XL	21MPO-A-XL	19MP-A-XL

DEGREE OF ANGLE ADJUSTMENT

1. Simultaneously, rotate adjustment dial of both positioning bars to increase or decrease angle of orthosis. Rotating the dial clockwise will decrease the angle.
2. Align angle of degree desired with end of plastic rod on adjustment bar. Each revolution of the adjustment dial increases or decreases the angle by one degree. (1°)



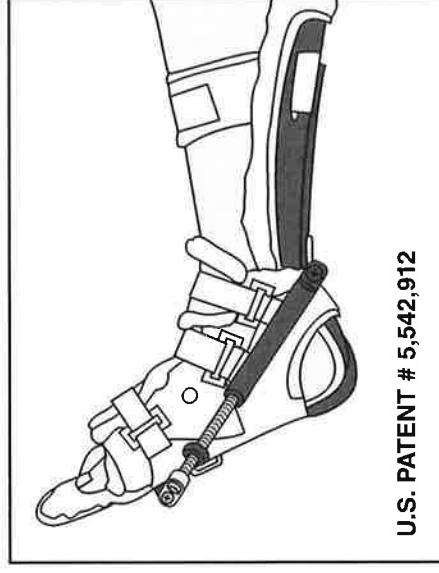
WASHING INSTRUCTIONS

Hand wash and air dry liner. Clean shell with mild soap and water.



Restorative Care of America
INCORPORATED

Application of the Multi Podus® System Phase II



U.S. PATENT # 5,542,912

MANUFACTURERS' WARNING

1. THE MPS PHASE II CAN BE USED ONLY WITH A PHYSICIAN'S ORDER.
2. THE PHASE II SHOULD BE APPLIED ONLY BY PERSONNEL INSTRUCTED IN PROPER APPLICATION. EDUCATION INFORMATION CAN BE OBTAINED THROUGH YOUR LOCAL CONSULTANT OR FROM RESTORATIVE CARE OF AMERICA, INC.
3. USE OF THE SYSTEM CAN RESULT IN CROSS-CONTAMINATION WHEN USED BY **MORE THAN ONE PATIENT.**
4. ALTERATION OF THE PHASE II - **REMOVAL- OR SUBSTITUTION OF PARTS VOIDS THE MANUFACTURERS' WARRANTY.**
5. REPEATED MACHINE WASHING OF THE ANKLET REDUCES THE THERAPEUTIC EFFECTS OF THE SYSTEM.
6. AMBU ASSIST **MUST ALWAYS BE WORN WHEN PATIENT IS AMBULATING WITH THE PHASE II TO INSURE PATIENT STABILITY & SAFETY.**

RESTORATIVE CARE OF AMERICA, INC. WILL ASSUME NO LIABILITY IF THE ABOVE INSTRUCTIONS ARE NOT ADHERED TO!

The MPS PHASE II is designed for single patient use only. Manufacturers' Warranty will be void if used by more than one patient.

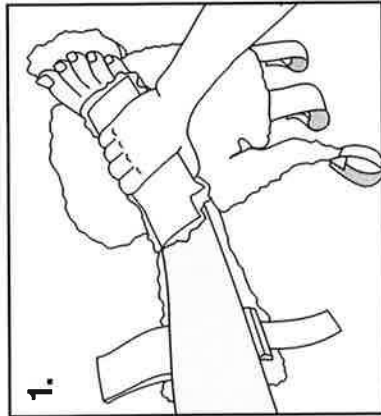
Limited Warranty Coverage: Any defect in material or workmanship solely limited to the Kydex® plastic frame or metal portion or hinge mechanisms for 1 (one) year from date of purchase.

Phone: (727) 573-1595 or (800) 627-1595
Fax: (727) 573-1886 or (800) 545-7938
12221 33rd Street N, St Petersburg, FL 33716
www.rcal.com



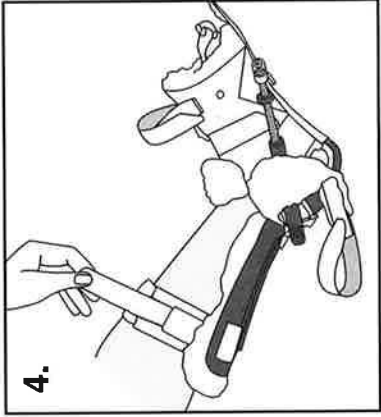
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Literature may not reflect current manufacturer specifications.

Application of the Multi-Podus™ System Phase II



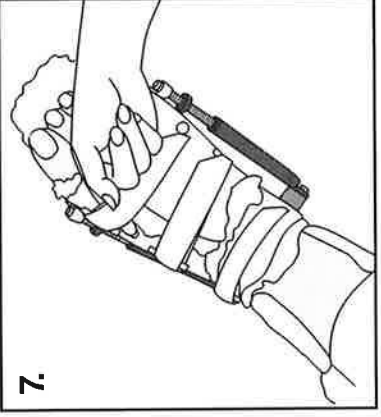
1. Bend knee and seat foot firmly in orthosis. Press with palm over instep. Place extra KodeL® tongue piece on instep.

Doble la rodilla y sienta el pie firmemente sobre el entablillado apriete con la palma de la mano sobre el empiepe. Poner un pedaso de KodeL® encima del Empeine.



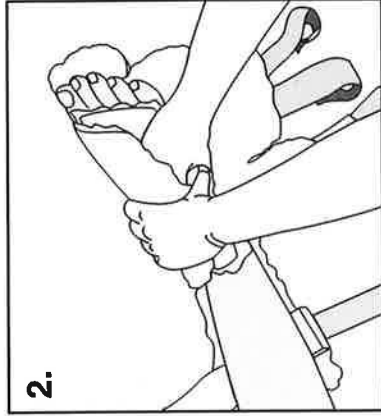
4. Secure calf strap.

Asegure la correa de la pantorrilla.



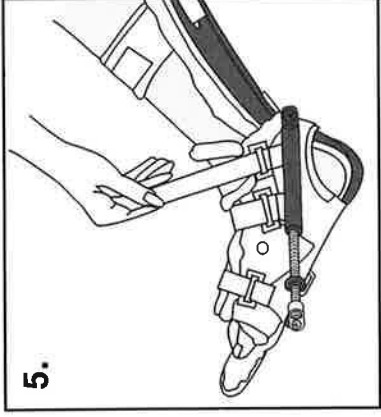
7. Check tightness by inserting one or two fingers deeply under straps. (If necessary, repeat step # 4)

Chequee la tension colocando dos dedos hondo debajo de la correa. (Si es necesario repita el paso #4).



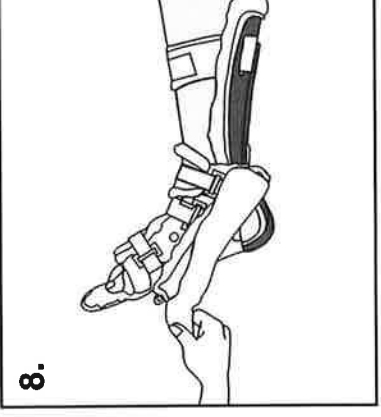
2. Smoothly fold ankle over instep.

Suavemente doble el vendaje sobre el empiepe.



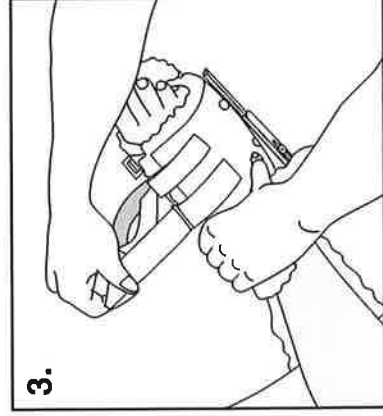
5. Secure remaining ankle straps.

Asegure el resto de las correas del vendaje.



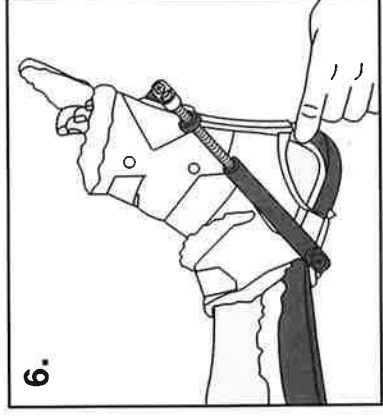
8. Apply KodeL® cover around adjustment bracket.

Aplique el forro de KodeL® ajustable alrededor a la prencilla.



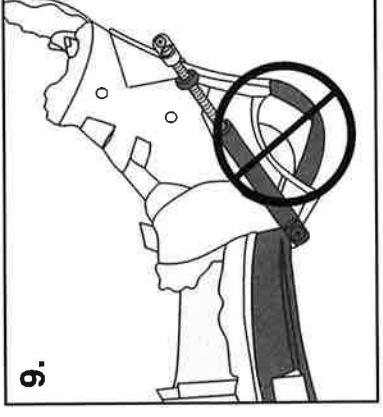
3. Secure middle strap first.

Asegure la correa del medio primero.



6. Check clearance below heel. Check that sole of foot makes contact with the orthosis. (If necessary repeat steps #1-4).

Chequee el espacio debajo del talon. Chequee que la planta del pie haga contacto con el entablillado, si es necesario repita los pasos #1-4.



9. Avoid this position. (Repeat steps #1-6).

Evite esta posición. (Repita los pasos #1-6).