



bracemasters

INTERNATIONAL, LLC

DRAFO

Casting instructions:

5075 South Emmer Drive
New Berlin, WI 53151
P 888-790-6880 F 888-790-6881



CASTING INTRODUCTION:

Taking a quality impression is fundamental to obtaining the best outcomes for your patients. With the introduction of the DRAFO we have developed a casting technique which simplifies the process. Utilization of this process will yield a higher quality of impression and your patients, (especially children) will tolerate the process much better.

Please note the following:

- Utilize 2 layers of nylon hosiery with the cut strip between the layers.
- Use either soft cast (at least 3 layers thick) or a good conformable casting tape (at least 1.5 layers thick) and make sure to rub both types in to prevent delaminating.
- Impressions must be firm and well aligned in the Coronal and Transverse planes. Concentrate on Forefoot –hindfoot alignment getting the heel vertical. Sagittal plan adjustment (Dorsiflexion/Plantarflexion) is much easier to adjust without distortion.

Pre-Cast Assessment: Step 1.

1. Evaluate the patient's sagittal (to locate First catch / R1) and coronal plane range of motion (flexibility of hindfoot / forefoot to achieve vertical heel) and alignment at the hip knee and ankle. We strongly recommend that you document your findings for use in evaluating your cast.
2. Observe the patient in the position that they will be using the device: standing, walking, ect.
3. Determine the optimal alignment of the finished DRAFO, document it on the orthometry form, and utilize this position during the casting procedure. Again during casting focus on sagittal and coronal align-

Determine first Catch / R1



Determine Forefoot alignment to attain vertical heel



1. Apply nylon hosiery on the patients leg, making sure to extend it distal past the toes and at least 2 “ above your desired trimline. Apply a second layer half way up the leg and insert the cut strip between the two layers. Pull second layer up as high as first.



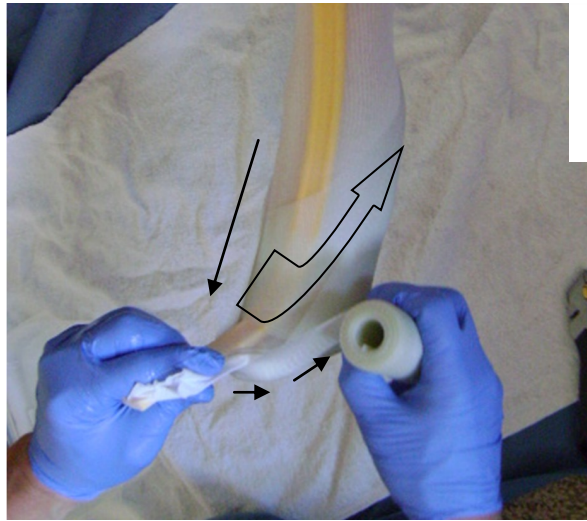
2. smooth both layers of nylon hosiery from the end of the toes to at least 2” proximal to the finished trimline. Also make sure cut strip extends at least an 1” past the toes



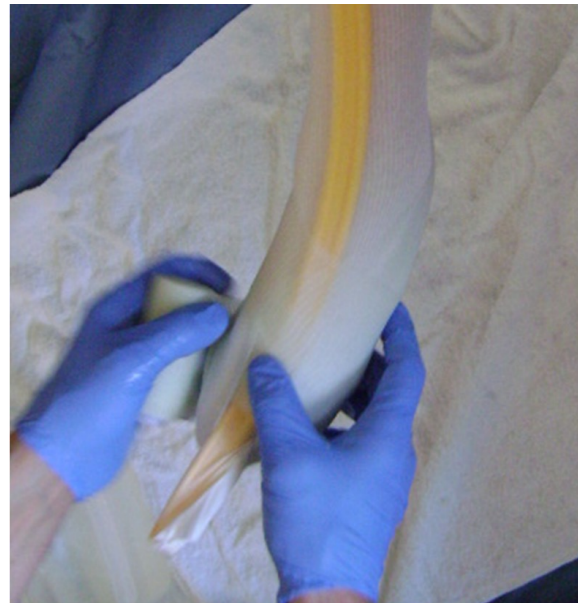
3. Begin your wrap at the meta-tarsal heads, wrap at least twice circumferentially



4. after second revolution around metatarsal heads, bring cast wrap around back of heel and around the toes, for soft cast go twice, for rigid only once



5. now, re-wrap metatarsal heads locking in toe wrap and continue up the foot and then up the leg. Add second roll if not thick enough, impression must have structure. Once the leg is wrapped, rub in real well to assure integrity of cast and to prevent delaminating



6. “Concentrate” on getting a **vertical heel** with appropriate forefoot alignment, do not force dorsiflexion but attain as much as you can





7. When cast has almost cured and before it becomes extremely rigid, remove the impression by cutting along the cut strip or flexible tube with a cast cutter, scissors, or other safe cutting device. Using a scissor cut through the fiberglass and outside layer of nylon hosiery.

Gently spread open the impression and remove it from the patient's leg. Remove the layer of nylon hosiery against the patient's leg.



8. Check the impression to ensure that it is firm and completely laminated. Evaluate and compare the alignment measured and observed vs the impression. Please note discrepancies and explain on the orthometry form

