The FLO-TECH-TOR[™]-TF

For peace of mind,
send your patients home safely –
Send them home
with a
FLO-TECH-TORTM_TF



Minimizes the effects of potential injury during the early stages of rehabilitation

Patients are sent home as soon as possible following an amputation. Many times patients either forget they have an amputation or are caught off guard while stumbling, causing the patient to land dangerously on the sutured or stapled wound. Even with heavy bandages, patients experience wound deprivation. These types of incidents are minimized through regular use of a FLO-TECH-TORTM-TF.

Easy access to bandages and dressings for attentive wound care

Sending patients home in a fiberglass or plaster cast makes wound care impossible, and leaves the patient in a heavy, awkward and uncomfortable device. The FLO-TECH-TORTM-TF is light and easy to remove and reapply, to allow the patient (or their attending aide) to provide diligent care to the amputation site.

Controlled early weight bearing, when the time is right

Controlled weight bearing can begin right away because the flat bottom of the FLO-TECH-TORTM-TF provides increased stability. The patient, supervised by a Physical Therapist, can be gradually introduced to weight bearing using a bathroom scale on a chair 24 to 72 hours post amputation. Controlled ambulation, under the supervision of a Physical Therapist, can begin right away as well, when used with the UFOSTM-TF.

Control of swelling and edema

There will come a time when the Physician wants some compression on the amputation. The FLO-TECH-TOR $^{\text{TM}}$ -TF is ideal for this application and is removable to allow continued monitoring of elastic or non-elastic bandages and shrinker socks.

Volume control as it prepares the residual limb for a definitive prosthesis

The FLO-TECH-TORTM-TF is fabricated of a semi-rigid plastic, which can be reduced in volume by adjusting the circumference dimensions of the socket as the healing progresses. This is accomplished by the socket's anatomic, overlapping design and one-piece construction; coupled with the use of a compressive outer band, use of shrinker socks or bandages inside the FLO-TECH-TORTM-TF to maintain total surface bearing and regular ambulation when used with the UFOSTM-TF.



Phone: 1-800-FLO-TECH (356-8324) Phone: (607) 387-3070 Fax: (607) 387-3176

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The FLO-TECH-TORTM Provides:

For peace of mind,
send your patients
home safely –
Send them home
with a
FLO-TECH-TORTM



Minimizes the effects of potential injury during the early stages of rehabilitation

Patients are sent home as soon as possible following an amputation. Many times patients either forget they have an amputation or are caught off guard while stumbling, causing the patient to land dangerously on the sutured or stapled wound. Even with heavy bandages, patients experience wound deprivation. These types of incidents are minimized through regular use of a FLO-TECH-TOR $^{\text{TM}}$.

Easy access to bandages and dressings for attentive wound care

Sending patients home in a fiberglass or plaster cast makes wound care impossible, and leaves the patient in a heavy, awkward and uncomfortable device. The FLO-TECH-TOR $^{\text{TM}}$ is light and easy to remove and reapply, to allow the patient (or their attending aide) to provide diligent care to the amputation site.

Controlled early weight bearing, when the time is right

Controlled weight bearing can begin right away because the flat bottom of the FLO-TECH-TORTM provides increased stability. The patient, supervised by a Physical Therapist, can be gradually introduced to weight bearing using a bathroom scale on a chair 24 to 72 hours post amputation. Controlled ambulation, under the supervision of a Physical Therapist, can begin right away as well, when used with the UFOSTM.

Control of swelling and edema

There will come a time when the Physician wants some compression on the amputation. The FLO-TECH-TORTM is ideal for this application and is removable to allow continued monitoring of elastic or non-elastic bandages and shrinker socks.

Maintenance of knee flexion and extension alignment

Maintenance of good alignment of the knee is crucial to a successful rehabilitation program. The FLO-TECH-TOR $^{\text{TM}}$ is specifically designed to resist knee flexion contracture.

Volume control as it prepares the residual limb for a definitive prosthesis

The FLO-TECH-TORTM is fabricated of a semi-rigid plastic, which can be reduced in volume by adjusting the medial, lateral, anterior, posterior and circumference dimensions of the socket in the upper third, middle third or distal third of the socket as the healing progresses. This is accomplished by the socket's anatomic, overlapping design and one-piece construction; coupled with the use of a compressive outer band, use of shrinker socks or bandages inside the FLO-TECH-TORTM to maintain total surface bearing and regular ambulation when used with the UFOSTM.



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SOFTIE[™] for Trans-Femoral Amputees

A new level of post-operative trans-femoral amputee prosthetic rehabilitation

The trans-femoral SOFTIE[™]-TF addresses two concerns:

Vascular Surgeons who fear the application of any prosthetic socket for their dysvascular patients. The sockets are soft, non-constricting (when protocol is followed), and easy to remove at any time to address wound concerns. It will guard the incision area from micro tears that occur as the patients reposition themselves in bed.

Prosthetists who see maintaining an inventory of pre-fabricated post-operative sockets too costly recognize that cost of the SOFTIE[™]−TF is very reasonable! In many cases where hospitals are unwilling or unable to pay for expensive immediate post-operative casts or pre-fabricated prosthetic sockets or systems, the SOFTIE[™]−TF is an economical alternative.

The SOFTIE [™]-TF is constructed of firm but flexible Pelite, Velcro[®] compatible neoprene bands and a set of distal pads.

The SOFTIE[™]—TF is available in two trans-femoral sizes, regular and extra large, and fits virtually any size.

Once a patient has been fitted with a SOFTIE[™]-TF the Prosthetist is able to measure the appropriate size APOPPS -TF to use when the patient is physically, and financially ready to progress to an ambulatory pre-fabricated socket or system.







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FLO-TECH® SOFTIE[™]-TF Protocol

Use in cases where minimizing the effects of injury at bed rest holds a higher priority than early or immediate post-surgical ambulation.

This protocol will help the healing and rehabilitation qualities of the SOFTIE™-TF and should be applied as early as possible after amputation.

- 1. Apply a thin soft dressing as thick as the Surgeon deems appropriate for the patient's condition and prognosis.
- 2. *Apply a 2-ply to 3-ply soft amputation sock.
 - a. Gently roll the sock to make application less stressful to the surgical site and less painful to the patient.
 - b. Apply non allergenic skin glue (Hollister Medical Adhesive [Hollister also makes a solvent for removal]), if desired.
- 3. An optional reticulated pad is available from *FLO-TECH*® and should be applied at this point.
- 4. *Apply an outer 2-ply to 3-ply soft amputation sock to wick away moisture.
 - a. Gently roll the sock to make application less stressful to the surgical site and less painful to the patient.
 - b. This sock should be changed 1 to 2 times a day.
- 5. Apply the *FLO-TECH*® SOFTIE[™]–TF without the neoprene socket bands to determine the proper interior allowance for the length of the residuum.
 - a. Apply the distal neoprene cap.
 - b. Insert a 1", 2" or both pads (equaling 3") to prevent edema.
 - i. Fill the space between the distal end of the amputated limb and the neoprene cap at the distal portion of the socket.
- 6. Apply the neoprene socket bands snug NOT tight.
 - a. Apply the neoprene socket band.
 - i. Be sure all exposed tissue is covered.
- 7. Remove the *FLO-TECH*[®] SOFTIE[™]–TF 2 times per day.
 - a. Once in the AM and once in the PM.
 - i. Range the hip per Doctor's orders and instructions from the Physical Therapist.
 - ii. Change outer sock if damp.
 - * FLO-TECH® carries pre-rolled Royal Knit® Cool Max® 2-ply amputation socks.

SOFTIE[™] for Trans-Tibial Amputees

A new level of post-operative trans-tibial amputee prosthetic rehabilitation

The trans-tibial SOFTIE[™] addresses two concerns:

Vascular Surgeons who fear the application of any prosthetic socket for their dysvascular patients. The sockets are soft, non-constricting (when protocol is followed), and easy to remove at any time to address wound concerns. It will guard the incision area from micro tears that occur as the patients reposition themselves in bed.

Prosthetists who see maintaining an inventory of pre-fabricated post-operative sockets too costly recognize that cost of the SOFTIE[™] is very reasonable! In many cases where hospitals are unwilling or unable to pay for expensive immediate post-operative casts or pre-fabricated prosthetic sockets or systems, the SOFTIE[™] is an economical alternative.

The SOFTIE^{$^{\infty}$} is constructed of firm but flexible pelite, and comes an anatomically-correct posterior extension strut, Velcro^{$^{\infty}$} Compatible neoprene bands and a set of distal pads. The SOFTIE^{$^{\infty}$} is available in two trans-tibial sizes, regular and extra large, and fits virtually any size.

Once a patient has been fitted with a SOFTIE[™] the Prosthetist is able to measure for the appropriate size APOPPS[®] to use when the patient is physically, and financially ready to progress to an ambulatory pre-fabricated socket or system.







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FLO-TECH® SOFTIE[™] Protocol

Use in cases where minimizing the effects of injury at bed rest holds a higher priority than early or immediate post-surgical ambulation.

This protocol will help the healing and rehabilitation qualities of the SOFTIE $^{\text{m}}$ and should be applied as early as possible after amputation.

- 1. Attach the OPTIONAL posterior strut (if ordered) at this time.
- 2. Apply a thin, soft dressing as thick as the surgeon deems appropriate for the patient's condition and prognosis.
- 3. *Apply a 2-ply to 3-ply soft amputation sock.
 - a. Gently roll the sock to make application less stressful to the surgical site and less painful to the patient.
 - b. Apply non-allergenic skin glue (Hollister Medical Adhesive [Hollister also makes a solvent for removal]), if desired.
- 4. An optional reticulated pad is available from *FLO-TECH*® and should be applied at this point.
- 5. *Apply an outer 2-ply to 3-ply soft amputation sock to wick away moisture
 - a. Gently roll the sock to make application less stressful to the surgical site and less painful to the patient.
 - b. This sock should be changed 1 to 2 times a day.
- 6. Apply the *FLO-TECH*® SOFTIE™ without the neoprene socket bands to determine the proper interior allowance for the length of the residuum.
 - a. Apply the distal neoprene cap.
 - b. Insert the 1" or 2" distal pad, or both pads (equaling 3") to prevent edema.
 - i. Fill the space between the distal end of the amputated limb and the neoprene cap at the distal portion of the socket.
- 7. Apply the neoprene socket bands snug NOT tight:
 - a. Apply the distal neoprene socket band.
 - b. Apply the neoprene band at the knee area.
 - c. Apply the neoprene thigh band.
 - i. Be sure all exposed tissue is covered.
- 8. Remove the FLO-TECH[®] SOFTIE^{\top} 2 times per day.
 - a. Once in the AM and once in the PM.
 - i. Range the knee per Doctor's orders and instructions from the Physical Therapist.
 - ii. Change outer sock if damp.

*RoyalKnit® CoolMax® socks are available

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