

SpryStep® AFO Prescription Guide

The SpryStep® AFO range is designed for patients who have foot and ankle deficits. It is not suitable for patients who have active ulceration or fluctuating edema.

Does the patient have tri-planar instability and/or limited range of motion in the ankle joint, subtalar joint or 1st MTP joint or partial foot amputation?

NO

Do you have the ability to:
-modify the AFO on-site?
-fit and trial different sizes of AFOs?

YES

YES



Custom SpryStep® range recommended;
refer to your sales representatives

How would you best describe the knee instability present?

Knee Hyperextension Instability (1° to 5°)

Knee Flexion Instability (1° to 10°)
Quads ≥ MRC*

Level of Knee Deficit

Level of Knee Deficit

Mild

Moderate

Mild

Moderate

Patient Activity Level (high to low)

Plantar flexor Muscle Strength MRC* (high to low)

5

4

≤3

≤3



SpryStep® Flex

- Posterior-lateral, spiral strut with posterior calf cuff.
- Used for augmenting remaining dorsiflexor muscle powers and proprioception in more able or active users.**



SpryStep® Original

- Posterior-lateral, hemi-spiral strut with a posterior calf cuff
- For aiding more flaccid dorsiflexor muscle powers and proprioception in a wide range of users.**



SpryStep® Plus

- Posterior-lateral strut, with anterior shell.
- For aiding remaining plantarflexor, knee stability muscle power and proprioception in a wide range of users.**



SpryStep® Max

- Lateral strut with anterior shell.
- For aiding weakened plantarflexors, knee stability muscle power and proprioception in less dynamic users.**

SpryStep® One

Three trimmable areas to optimize fit and comfort***.

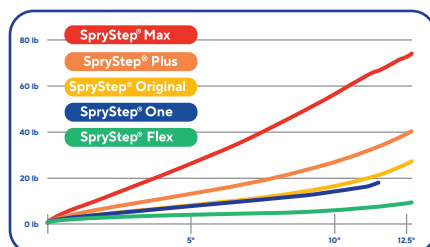


Universal size

- Posterior-lateral, hemi-spiral strut with posterior calf cuff.
- For aiding more flaccid dorsiflexor muscle powers and proprioception in a wide range of users.**

UNIVERSALITY

Resistance of AFO in Dorsiflexion



*Medical Research Council (MRC) scale for muscle strength.

**CE internal marking data + Aruin AS, and all. "Ankle-Foot Orthoses: Proprioceptive Inputs and Balance Implications". J Prosthet Orthot. 2010;22(4 Suppl):34-37. doi: 10.1097/jpo.0b013e3181f25071. PMID: 25774078; PMCID: PMC4357018.

***Trimming allows to adapt the brace to the anatomy of the patient and to position it well in order to avoid anatomical areas.