

INFORMATION & FITTING INSTRUCTIONS FOR MEDICAL PROFESSIONALS



- Aluminum uprights are fixed at 90 degrees and can be contoured to the leg.
- Minimum dorsal flexion of metatarsals.
- Stabilizing rocker bottom allows patient to ambulate naturally and comfortably.

TD WALKER



CLINICAL INDICATIONS

The TD Walker, introduced in 2005 as part of the Townsend Stability Boot Series, is prescribed for a variety of foot, toe and ankle injuries and surgeries. Clinical indications include grade 1, 2 and 3 ankle sprains and stable or internally fixed fractures of the foot or ankle. **CONTRAINDICATIONS:** Not intended for unstable fractures or for fractures of the proximal tibia or fibula.


AVAILABLE MODELS AND OPTIONS

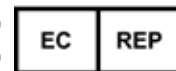
The Townsend Stability Boot Series includes the original TSB and TSB-MC (mid calf height) that include Townsend's StableLock technology and other exclusive features. Townsend also offers the TD ROM Walker, with hinges that can be set to provide limited range-of-motion, and the TD Air Walker and TD AIR ROM Walker that feature a pneumatic bootie for added compression and patient comfort.

WARRANTY & DISCLAIMER

Products sold as part of the Townsend Stability Boot Series are designed for short-term use, and should be worn for less than 180 days by a single user. TSB products are not intended for reuse on a second patient. Townsend provides a limited 90 day warranty that offers repair or replacement of the boot or components including the foam wraps, inner sole pad and straps. Under normal use and conditions, it is unlikely that these components will wear out. Misuse, abuse or neglect including the placement of boots in the trunk of a car in temperatures that exceed 140 degrees can potentially void the warranty. This device is not guaranteed to prevent injuries or reduce or eliminate the risk of re-injury. Townsend Stability Boots are not designed or intended to be worn by patients who weigh more than 250 lbs.

SEE REVERSE SIDE FOR FITTING INSTRUCTIONS

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REV A 02/10

Townsend Design TD WALKER

Fitting Instructions



The Townsend Design TD Walker comes packaged in a protective plastic wrap that includes a product code and sizing label. The TD Walker is comprised of these components:

- Foam padding (bootie) that surrounds the foot and lower leg
- 2 forefoot straps and 3 calf straps
- Fitting guide and product information sheet

Please follow these simple application instructions:

1. Remove the TD Walker from the large protective plastic bag and detach the foam bootie. **DO NOT** remove the plastic sleeves that are over the uprights. **These plastic sleeves must remain over the uprights during the initial phases of the fitting procedure.**

2. (See Picture, Right) Open the leg and foot sections of the foam bootie by releasing the Velcro hook from the foam. Have the patient slide their foot and lower leg into the bootie.

3. (See Picture, Right) Close the bootie, making sure that the foam is wrapped snugly around the patient's limb. The pre-sized bootie is designed with sewn edges, and you should not have to trim it to size (it can be cut, however, if needed).

4. Make sure that the plastic sleeves over the uprights are still completely covering the Velcro hook that is attached to the inside of the uprights. Have the patient place his or her foot in the aluminum shell between the two uprights. The foot should be positioned so the uprights are centered at midline on the side of the leg.

5. To optimize stabilization, the uprights can be contoured to ensure an intimate alignment with the sides of the calf. There are also foam comfort pads mounted on the inside of the uprights (near the ankles) that can be moved to enhance comfort, or that can be removed to increase the medial-lateral width between the uprights.

6. (See Picture, Right) When you are sure the uprights are properly contoured and in the proper alignment (centered at midline on the sides of the leg), remove the plastic sleeves from the uprights. The Velcro hook on the inside of the uprights will lock onto the foam bootie.

7. (See Picture, Right) Tighten the two forefoot straps that secure the patient's foot in the boot. The forefoot straps should fit snugly. These straps can be adjusted by simply loosening or tightening the Velcro hook tabs. Any excessive material can also be trimmed off for a cleaner look.

8. (See Picture, Right) Tighten the three straps that secure the lower limb between the uprights, starting with the strap closest to the ankle. These straps are in alternating directions to prevent rotation. The three straps should be tightened firmly.

9. Have the patient ambulate in the boot to ensure the walker is fitting and functioning properly.

REMOVING THE BOOT — If the patient is allowed to remove the boot during their recovery, or when the boot is removed during a progress check-up, the straps should be released and the Velcro hook that closes the bootie should be opened to allow the patient to step out of the boot **WITH THE BOOTIE STILL LOCKED IN POSITION IN THE TD WALKER SHELL**. This will enable the patient to easily reapply the bootie and boot with the proper leg alignment.

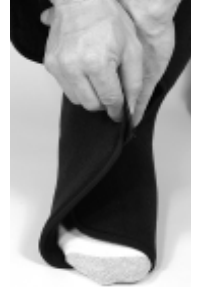
If you have questions about the boot you receive, or the application instructions, please call 800.432.3466.



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INFORMATION & FITTING INSTRUCTIONS FOR MEDICAL PROFESSIONALS



- Aluminum uprights are fixed at 90 degrees and can be contoured to the leg.
- Minimum dorsal flexion of metatarsals.
- Stabilizing rocker bottom allows patient to ambulate naturally and comfortably.

TD AIR WALKER



CLINICAL INDICATIONS

The TD AIR Walker, introduced in 2005 as part of the Townsend Stability Boot Series, is prescribed for a variety of foot, toe and ankle injuries and surgeries. Clinical indications include grade 1, 2 and 3 ankle sprains and stable or internally fixed fractures of the foot or ankle. **CONTRAINDICATIONS:** Not intended for unstable fractures or for fractures of the proximal tibia or fibula.


AVAILABLE MODELS AND OPTIONS

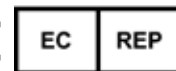
The Townsend Stability Boot Series includes the original TSB and TSB-MC (mid calf height) that include Townsend's StableLock technology and other exclusive features. Townsend also offers the standard TD Walker, TD ROM Walker, with hinges that can be set to provide limited range-of-motion, and the TD AIR ROM Walker that features a pneumatic bootie for added compression and patient comfort.

WARRANTY & DISCLAIMER

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REV A 02/10

Townsend Design TD AIR WALKER

Fitting Instructions



The Townsend Design TD AIR Walker comes packaged in a protective plastic wrap that includes a product code and sizing label. The TD Air Walker is comprised of these components:

- Foam bootie that surrounds the foot and lower leg -- with built-in pneumatic bladder
- 2 forefoot straps and 2 calf straps (third calf strap is attached to the bootie with pump-up ball)
- Fitting guide and product information sheet

Please follow these simple application instructions:

1. Remove the TD AIR Walker from the large protective plastic bag and detach the foam bootie. DO NOT remove the plastic sleeves that are over the uprights. These plastic sleeves must remain over the uprights during the initial phases of the fitting procedure.

2. (See Picture, Right) Open the leg and foot sections of the foam bootie by releasing the Velcro hook from the foam. Have the patient slide their foot and lower leg into the bootie.

3. (See Picture, Right) Close the bootie, making sure that the foam is wrapped snugly around the patient's limb. The pre-sized bootie is designed with sewn edges, and you should not have to trim it to size (it can be cut, however, if needed).

4. Make sure that the plastic sleeves over the uprights are still completely covering the Velcro hook that is attached to the inside of the uprights. Have the patient place his or her foot in the aluminum shell between the two uprights. The foot should be positioned so the uprights are centered at midline on the side of the leg.

5. To optimize stabilization, the uprights can be contoured to ensure an intimate alignment with the sides of the calf. There are also foam comfort pads mounted on the inside of the uprights (near the ankles) that can be moved to enhance comfort, or that can be removed to increase the medial-lateral width between the uprights.

6. (See Picture, Right) When you are sure the uprights are properly contoured and in the proper alignment (centered at midline on the sides of the leg), remove the plastic sleeves from the uprights. The Velcro hook on the inside of the uprights will lock onto the foam bootie.

7. (See Picture, Right) Tighten the two forefoot straps that secure the patient's foot in the boot. The forefoot straps should fit snugly. These straps can be adjusted by simply loosening or tightening the Velcro hook tabs. Any excessive material can also be trimmed off for a cleaner look.

8. (See Picture, Right) Then tighten the two straps that secure the lower limb between the uprights, starting with the strap closest to the ankle. The last strap (attached to the pneumatic bootie) should be secured snugly around the uprights to ensure intimate contact and proper limb alignment.

9. (See Picture, Right) To increase compression, the pneumatic bladder can be inflated by compressing the blue ball pump on the anterior aspect of the bootie. To deflate the pneumatic bladder (to reduce compression), **PUSH IN** and hold the black valve located directly below the blue ball pump.

10. Have the patient ambulate in the boot to ensure the walker is fitting and functioning properly.

REMOVING THE BOOT — If the patient is allowed to remove the boot during their recovery, or when the boot is removed during a progress check-up, the straps should be released and the Velcro hook that closes the bootie should be opened to allow the patient to step out of the boot **WITH THE BOOTIE STILL LOCKED IN POSITION IN THE TD AIR WALKER SHELL**. This will enable the patient to easily reapply the bootie and boot with the proper leg alignment.

If you have questions about the boot you receive, or the application instructions, please call 800.432.3466.



INFORMATION & FITTING INSTRUCTIONS FOR MEDICAL PROFESSIONALS



TD ROM WALKER



- Aluminum uprights that can be contoured to the leg, with adjustable ROM Hinges.
- Minimum dorsal flexion of metatarsals.
- Stabilizing rocker bottom allows patient to ambulate naturally and comfortably.

CLINICAL INDICATIONS

The TD ROM Walker, introduced in 2005 as part of the Townsend Stability Boot Series, is prescribed for a variety of foot, toe and ankle injuries and surgeries. Clinical indications include grade 1, 2 and 3 ankle sprains and stable or internally fixed fractures of the foot or ankle. **CONTRAINDICATIONS:** Not intended for unstable fractures or for fractures of the proximal tibia or fibula.


AVAILABLE MODELS AND OPTIONS

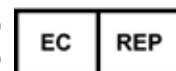
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REV A 02/10

Townsend Design TD ROM WALKER

Fitting Instructions



The Townsend Design TD ROM Walker comes packaged in a protective plastic wrap that includes a product code and sizing label. The TD ROM Walker is comprised of these components:

- Foam bootie that surrounds the foot and lower leg
- 2 forefoot straps and 3 calf straps
- Fitting guide and product information sheet
- ¼" Allen key for ROM Hinge adjustment

Please follow these simple application instructions:

1. Remove the TD ROM Walker from the large protective plastic bag and detach the foam bootie. **DO NOT** remove the plastic sleeves that are over the uprights. **These plastic sleeves must remain over the uprights during the initial phases of the fitting procedure.**

2. (See Picture, Right) Open the leg and foot sections of the foam bootie by releasing the Velcro hook from the foam. Have the patient slide their foot and lower leg into the bootie.

3. (See Picture, Right) Close the bootie, making sure that the foam is wrapped snugly around the patient's limb. The pre-sized bootie is designed with sewn edges, and you should not have to trim it to size (it can be cut, however, if needed).

4. (See Picture, Right) To adjust the ROM stops, use the 1/4" Allen key provided with the walker and remove the Allen bolt. Rotate the acrylic cap to the position where the flexion/extension lock pins are set. Reposition the pins in the desired holes, rotate the cap to its original position, reinsert the Allen bolt and tighten it securely with the Allen key.

5. Make sure that the plastic sleeves over the uprights are still completely covering the Velcro hook that is attached to the inside of the uprights. Have the patient place his or her foot in the aluminum shell between the two uprights. The foot should be positioned so the uprights are centered at midline on the side of the leg.

6. To optimize stabilization, the uprights can be contoured to ensure an intimate alignment with the sides of the calf. There are also foam comfort pads mounted on the inside of the uprights (near the ankles) that can be moved to enhance comfort, or that can be removed to increase the medial-lateral width between the uprights.

7. (See Picture, Right) When you are sure the uprights are properly contoured and in the proper alignment (centered at midline on the sides of the leg), remove the plastic sleeves from the uprights. The Velcro hook on the inside of the uprights will lock onto the foam bootie.

8. (See Picture, Right) Tighten the two forefoot straps that secure the patient's foot in the boot. The forefoot straps should fit snugly. These straps can be adjusted by simply loosening or tightening the Velcro hook tabs. Any excessive material can also be trimmed off for a cleaner look.

9. (See Picture, Right) Tighten the three straps that secure the lower limb between the uprights, starting with the strap closest to the ankle. These straps are in alternating directions to prevent rotation. The three straps should be tightened firmly.

10. Have the patient ambulate in the boot to ensure the walker is fitting and functioning properly.

REMOVING THE BOOT — If the patient is allowed to remove the boot during their recovery, or when the boot is removed during a progress check-up, the straps should be released and the Velcro hook that closes the bootie should be opened to allow the patient to step out of the boot **WITH THE BOOTIE STILL LOCKED IN POSITION IN THE TD ROM WALKER SHELL**. This will enable the patient to easily reapply the bootie and boot with the proper leg alignment.

If you have questions about the boot you receive, or the application instructions, please call 800.432.3466.



INFORMATION & FITTING INSTRUCTIONS FOR MEDICAL PROFESSIONALS



Townsend Stability Boots

- Aluminum uprights that can be contoured to the leg, with adjustable ROM Hinges.
- Minimum dorsal flexion of metatarsals.
- Stabilizing rocker bottom allows patient to ambulate naturally and comfortably.

TD AIR ROM WALKER



CLINICAL INDICATIONS

The TD AIR ROM Walker, introduced in 2005 as part of the Townsend Stability Boot Series, is prescribed for a variety of foot, toe and ankle injuries and surgeries. Clinical indications include grade 1, 2 and 3 ankle sprains and stable or internally fixed fractures of the foot or ankle. **CONTRAINDICATIONS:** Not intended for unstable fractures or for fractures of the proximal tibia or fibula.


AVAILABLE MODELS AND OPTIONS

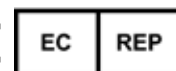
The Townsend Stability Boot Series includes the original TSB and TSB-MC (mid calf height) that include Townsend's StableLock technology and other exclusive features. Townsend also offers the standard TD Walker, the TD-MC (mid calf) Walker, and the ROM Walker with adjustable range of motion.

WARRANTY & DISCLAIMER

Products sold as part of the Townsend Stability Boot Series are designed for short-term use, and should be worn for less than 180 days by a single user. TSB products are not intended for reuse on a second patient. Townsend provides a limited 90 day warranty that offers repair or replacement of the boot or components including the foam wraps, inner sole pad and straps. Under normal use and conditions, it is unlikely that these components will wear out. Misuse, abuse or neglect including the placement of boots in the trunk of a car in temperatures that exceed 140 degrees can potentially void the warranty. This device is not guaranteed to prevent injuries or reduce or eliminate the risk of re-injury. Townsend Stability Boots are not designed or intended to be worn by patients who weigh more than 250 lbs.

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REV A 02/10

Townsend TD AIR ROM WALKER

Fitting Instructions



The Townsend Design TD AIR ROM Walker comes packaged in a protective plastic wrap that includes a product code and sizing label. The TD AIR ROM Walker includes these components:

- Foam bootie that surrounds the foot and lower leg -- with built-in pneumatic bladder
- 2 forefoot straps and 2 calf straps (upper calf strap is attached to the bootie)
- Fitting guide and product information sheet
- ¼" Allen key for ROM Hinge adjustment

Please follow these simple application instructions:

1. Remove the TD AIR ROM Walker from the large protective plastic bag and detach the foam bootie. **DO NOT** remove the plastic sleeves that are over the uprights. **These plastic sleeves must remain over the uprights during the initial phases of the fitting procedure.**

2. Open the leg and foot sections of the foam bootie by releasing the Velcro hook from the foam. Have the patient slide their foot and lower leg into the bootie.

3. (See Picture, Right) Close the bootie, making sure that the foam is wrapped snugly around the patient's limb. The pre-sized bootie has sewn edges, and you should not have to trim it.

4. (See Picture, Right) To adjust the ROM stops, use the 1/4" Allen key provided with the walker and remove the Allen bolt. Rotate the acrylic cap to the position where the flexion/extension lock pins are set. Reposition the pins in the desired holes, rotate the cap to its original position, reinsert the Allen bolt and tighten it securely with the Allen key.

5. Make sure that the plastic sleeves over the uprights are still completely covering the Velcro hook that is attached to the inside of the uprights. Have the patient place his or her foot in the aluminum shell between the two uprights. The foot should be positioned so the uprights are centered at midline on the side of the leg.

6. To optimize stabilization, the uprights can be contoured to ensure an intimate fit. There are also foam comfort pads mounted on the inside of the uprights (near the ankles) that can be moved to enhance comfort, or that can be removed to increase the medial-lateral width between the uprights.

7. (See Picture, Right) When you are sure the uprights are properly contoured and in the proper alignment (centered at midline on the sides of the leg), remove the plastic sleeves from the uprights. The Velcro hook on the inside of the uprights will lock onto the foam bootie.

8. (See Picture, Right) Tighten the two forefoot straps that secure the patient's foot in the boot. The forefoot straps should fit snugly. These straps can be adjusted by simply loosening or tightening the Velcro hook tabs. Any excessive material can also be trimmed off for a cleaner look.

9. (See Picture, Right) Then tighten the two straps that secure the lower limb between the uprights, starting with the strap closest to the ankle. The last strap (attached to the pneumatic bootie) should be secured snugly around the uprights to ensure intimate contact and proper limb alignment.

10. (See Picture, Right) To increase compression, the pneumatic bladder can be inflated by compressing the blue ball pump on the anterior aspect of the bootie. To deflate the pneumatic bladder (to reduce compression), **PUSH IN** and hold the black valve located directly below the blue ball pump.

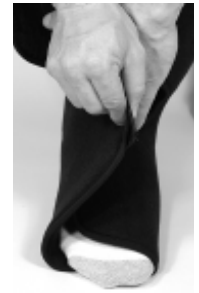
REMOVING THE BOOT — If the patient is allowed to remove the boot during their recovery, or when the boot is removed during a progress check-up, the straps should be released and the Velcro hook that closes the bootie should be opened to allow the patient to step out of the boot **WITH THE BOOTIE STILL LOCKED IN POSITION IN THE TD AIR ROM WALKER SHELL**. This will enable the patient to easily reapply the bootie and boot with the proper leg alignment.

If you have questions about the boot you receive, or the application instructions, please call 800.432.3466.

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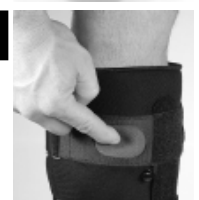
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INFORMATION & FITTING INSTRUCTIONS FOR MEDICAL PROFESSIONALS



TD-MC AIR WALKER



- Aluminum uprights are fixed at 90 degrees and can be contoured to the leg.
- Minimum dorsal flexion of metatarsals.
- Stabilizing rocker bottom allows patient to ambulate naturally and comfortably.

CLINICAL INDICATIONS

The TD-MC (mid calf) Air Walker is prescribed for a variety of foot, toe and ankle injuries and surgeries. Clinical indications include grade 1, 2 and 3 ankle sprains and stable or internally fixed fractures of the foot or ankle. **CONTRAINDICATIONS:** Not intended for unstable fractures or for fractures of the proximal tibia or fibula.


AVAILABLE MODELS AND OPTIONS

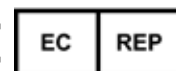
The Townsend Stability Boot Series includes the original TSB and TSB-MC (mid calf height) that include Townsend's StableLock technology and other exclusive features. Townsend also offers the standard height TD Walker, shorter TD-MC Walker, TD ROM Walker with hinges that can be set to provide limited range-of-motion, and the TD Air Walker and TD AIR ROM Walker that feature a pneumatic bootie for added compression and patient comfort.

WARRANTY & DISCLAIMER

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REV A 02/10

Townsend Design TD-MC AIR WALKER

Fitting Instructions



The Townsend Design TD-MC AIR Walker comes packaged in a protective plastic wrap that includes a product code and sizing label. The TD-MC Air Walker is comprised of these components:

- Foam bootie that surrounds the foot and lower leg -- with built-in pneumatic bladder
- 2 forefoot straps and 2 calf straps (third calf strap is attached to the bootie with pump-up ball)
- Fitting guide and product information sheet

Please follow these simple application instructions:

1. Remove the TD-MC AIR Walker from the large protective plastic bag and detach the foam bootie. **DO NOT** remove the plastic sleeves that are over the uprights. **These plastic sleeves must remain over the uprights during the initial phases of the fitting procedure.**

2. (See Picture, Right) Open the leg and foot sections of the foam bootie by releasing the Velcro hook from the foam. Have the patient slide their foot and lower leg into the bootie.

3. (See Picture, Right) Close the bootie, making sure that the foam is wrapped snugly around the patient's limb. The pre-sized bootie is designed with sewn edges, and you should not have to trim it to size (it can be cut, however, if needed).

4. Make sure that the plastic sleeves over the uprights are still completely covering the Velcro hook that is attached to the inside of the uprights. Have the patient place his or her foot in the aluminum shell between the two uprights. The foot should be positioned so the uprights are centered at midline on the side of the leg.

5. To optimize stabilization, the uprights can be contoured to ensure an intimate alignment with the sides of the calf. There are also foam comfort pads mounted on the inside of the uprights (near the ankles) that can be moved to enhance comfort, or that can be removed to increase the medial-lateral width between the uprights.

6. (See Picture, Right) When you are sure the uprights are properly contoured and in the proper alignment (centered at midline on the sides of the leg), remove the plastic sleeves from the uprights. The Velcro hook on the inside of the uprights will lock onto the foam bootie.

7. (See Picture, Right) Tighten the two forefoot straps that secure the patient's foot in the boot. The forefoot straps should fit snugly. These straps can be adjusted by simply loosening or tightening the Velcro hook tabs. Any excessive material can also be trimmed off for a cleaner look.

8. (See Picture, Right) Then tighten the two straps that secure the lower limb between the uprights, starting with the strap closest to the ankle. The last strap (attached to the pneumatic bootie) should be secured snugly around the uprights to ensure intimate contact and proper limb alignment.

9. (See Picture, Right) To increase compression, the pneumatic bladder can be inflated by compressing the blue ball pump on the anterior aspect of the bootie. To deflate the pneumatic bladder (to reduce compression), **PUSH IN** and hold the black valve located directly below the blue ball pump.

10. Have the patient ambulate in the boot to ensure the walker is fitting and functioning properly.

REMOVING THE BOOT — If the patient is allowed to remove the boot during their recovery, or when the boot is removed during a progress check-up, the straps should be released and the Velcro hook that closes the bootie should be opened to allow the patient to step out of the boot **WITH THE BOOTIE STILL LOCKED IN POSITION IN THE TD-MC AIR WALKER SHELL**. This will enable the patient to easily reapply the bootie and boot with the proper leg alignment.

If you have questions about the boot you receive, or the application instructions, please call 800.432.3466.



INFORMATION & FITTING INSTRUCTIONS FOR MEDICAL PROFESSIONALS



- Aluminum uprights are fixed at 90 degrees and can be contoured to the leg.
- Minimum dorsal flexion of metatarsals.
- Stabilizing rocker bottom allows patient to ambulate naturally and comfortably.

TD-MC WALKER



CLINICAL INDICATIONS

The TD-MC (mid calf) Walker, introduced in 2005 as part of the Townsend Stability Boot Series, is prescribed for a variety of foot, toe and ankle injuries and surgeries. Clinical indications include grade 1, 2 and 3 ankle sprains and stable or internally fixed fractures of the foot or ankle. **CONTRAINDICATIONS:** Not intended for unstable fractures or for fractures of the proximal tibia or fibula.


AVAILABLE MODELS AND OPTIONS

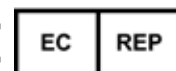
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REV A 02/10

Townsend Design TD-MC WALKER

Fitting Instructions



The Townsend Design TD-MC (Mid Calf) Walker comes packaged in a protective plastic wrap that includes a product code and sizing label. The TD-MC Walker is comprised of these components:

- Foam padding (bootie) that surrounds the foot and lower leg
- 2 forefoot straps and 2 calf straps
- Fitting guide and product information sheet



Please follow these simple application instructions:

1. Remove the TD-MC Walker from the large protective plastic bag and detach the foam bootie. **DO NOT** remove the plastic sleeves that are over the uprights. **These plastic sleeves must remain over the uprights during the initial phases of the fitting procedure.**



2. **(See Picture, Right)** Open the leg and foot sections of the foam bootie by releasing the Velcro hook from the foam. Have the patient slide their foot and lower leg into the bootie.

3. **(See Picture, Right)** Close the bootie, making sure that the foam is wrapped snugly around the patient's limb. The pre-sized bootie is designed with sewn edges, and you should not have to trim it to size (it can be cut, however, if needed).



4. Make sure that the plastic sleeves over the uprights are still completely covering the Velcro hook that is attached to the inside of the uprights. Have the patient place his or her foot in the aluminum shell between the two uprights. The foot should be positioned so the uprights are centered at midline on the side of the leg.

5. To optimize stabilization, the uprights can be contoured to ensure an intimate alignment with the sides of the calf. There are also foam comfort pads mounted on the inside of the uprights (near the ankles) that can be moved to enhance comfort, or that can be removed to increase the medial-lateral width between the uprights.



6. **(See Picture, Right)** When you are sure the uprights are properly contoured and in the proper alignment (centered at midline on the sides of the leg), remove the plastic sleeves from the uprights. The Velcro hook on the inside of the uprights will lock onto the foam bootie.

7. **(See Picture, Right)** Tighten the two forefoot straps that secure the patient's foot in the boot. The forefoot straps should fit snugly. These straps can be adjusted by simply loosening or tightening the Velcro hook tabs. Any excessive material can also be trimmed off for a cleaner look.



8. **(See Picture, Right)** Tighten the two calf straps that secure the lower limb between the uprights, starting with the strap closest to the ankle. These straps are in alternating directions to prevent rotation. The two straps should be tightened firmly.



9. Have the patient ambulate in the boot to ensure the walker is fitting and functioning properly.

REMOVING THE BOOT — If the patient is allowed to remove the boot during their recovery, or when the boot is removed during a progress check-up, the straps should be released and the Velcro hook that closes the bootie should be opened to allow the patient to step out of the boot **WITH THE BOOTIE STILL LOCKED IN POSITION IN THE TD-MC WALKER SHELL**. This will enable the patient to easily reapply the bootie and boot with the proper leg alignment.

If you have questions about the boot you receive, or the application instructions, please call 800.432.3466.