

crow walker

Charcot Restraint Orthotic

Features & Benefits:

- Completely restricts foot and ankle movement
- Clamshell design that covers the entire foot
- Custom fabricated to meet the individual needs of the patient
- Padded for patient comfort

Indications:

- Management and prevention of foot ulcers
- Diabetes Mellitus
- Charcot foot



**LIFE,
YOU**
**CAN MAKE IT
GREAT!™**
...FOR YOUR PATIENTS

 **OrtoPed**
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APPLICATION

Application:

- Apply a cotton stockinette or a long, thin, cotton sock to leg (See Figure 1).
- Slide the CROW into position, ensuring that the heel is fully seated within the CROW (See Figure 2). The heel needs to be back all the way and in contact with the bottom of the footplate. Check by looking along the sides and the back where it is separated above the heel.
- Apply the front section of the device, making sure it's sides overlap the back section (See Figure 3).
- Apply the instep strap on the front of the ankle (See Figure 4).
- Fasten all remaining straps (See Figures 5 and 6).
- Skin should be checked for redness that does not go away after approximately 15 minutes. Slight redness is common over the instep and under the ball of the foot.



Figure 1



Figure 2



Figure 3



Figure 4



Figure 5



Figure 6

Cleaning and Maintenance:

The best way to clean a CROW is to spray the inside with rubbing alcohol and wipe dry to remove body oils and residue. It can also be cleaned by wiping it out with a damp towel and anti-bacterial soap, or anti-bacterial moist towelettes.

Do not immerse the CROW in water, as this will harm the straps and fasteners. Keep the CROW away from excessive heat to prevent damage to the plastic.



TELEPHONE

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Wearing Schedule:

On the first day you receive the brace, begin by wearing for only 1 hour. After 1 hour, remove the brace and check your skin for red marks. Some small, light red marks may be noticed on the skin that should go away in 20 to 30 minutes after removing the brace. Slight redness is common over the instep and under the ball of the foot. If the red marks do not go away in 20 to 30 minutes or if you notice any scratching, bruising, or blistering, **do not put the brace back on.** Call immediately to schedule an appointment with your orthotist.

If the skin is ok, wait at least 1 hour and then put the brace back on for 1 hour at a time for the rest of the first day, checking the skin after each hour.

On the second day, put the brace on for 2 hours. After 2 hours, remove the brace and check the skin. If the skin is ok, put the brace back on for 2 hours at a time for the rest of the day, checking the skin after every 2 hours. If your skin is ok, gradually increase wearing time by 1 hour each day, checking the skin after each wearing time.

Tips and Troubleshooting :

- Proper footwear should be worn at all times on the opposite foot.
- If you notice red marks, bruises, or blisters on your skin, discontinue wearing the brace and call your orthotist to schedule an appointment.
- If there are any problems or questions, please contact the orthotist.



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Patient Name / Reference Number: _____

Account Number: _____ Telephone: _____ Fax: _____

Age: _____ Sex: _____ Height: _____ Weight: _____

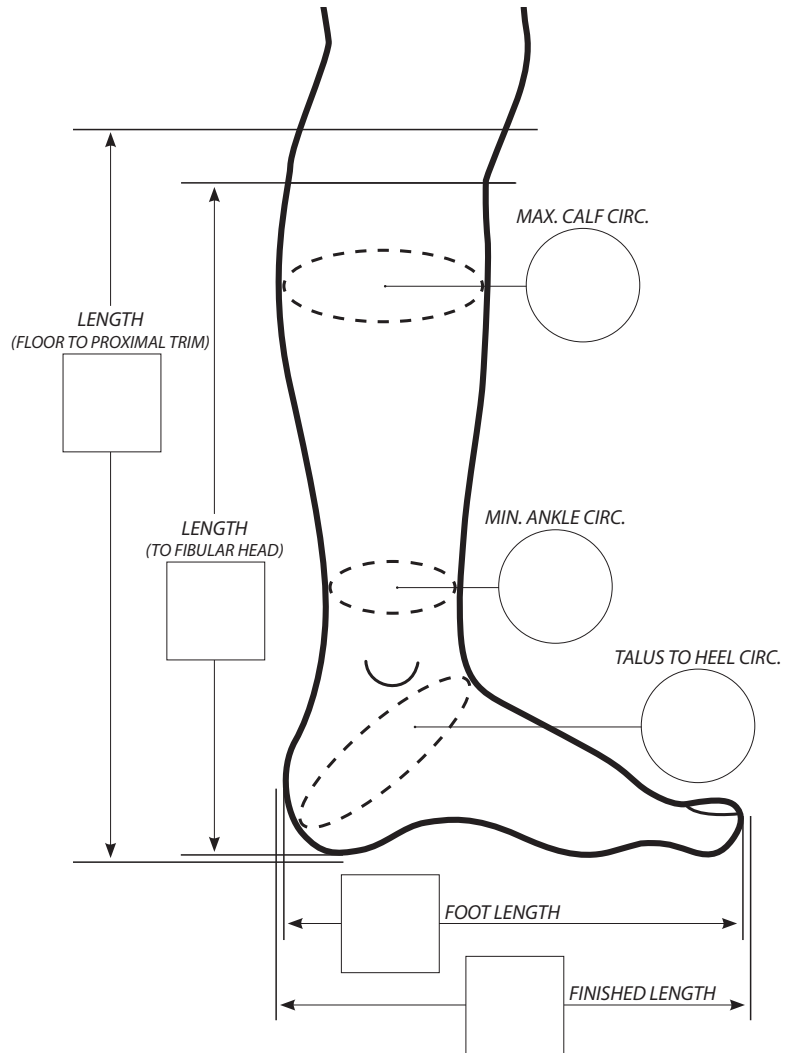
PO #: _____ Order Date: _____ Ordered By: _____ Due Date: _____

| | |
|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| MODEL | Crow Walker |
| ITEM Nº | ST-CROW |
| STYLE | Solid |
| TRIM | Full Foot |
| PLASTIC | Copolymer Polypropylene THICKNESS ▶ <input type="checkbox"/> 3/16" <input type="checkbox"/> 1/4" COLOR ▶ <input type="checkbox"/> Black <input type="checkbox"/> White |
| FOAM (INSERT) | <input type="checkbox"/> AliPlast™ 4E THICKNESS ▶ <input type="checkbox"/> 3/16" <input type="checkbox"/> 1/4" <input type="checkbox"/> Tri-Laminate (1/8" Plastazote®, 1/8" Poron, 1/8" Microcel Puff®) |
| SIDE | <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Bilateral |

| | |
|--------------------|-------------------------------------------------------------------|
| MEASUREMENT | <input type="checkbox"/> Inch <input type="checkbox"/> Millimeter |
|--------------------|-------------------------------------------------------------------|

Can make non-compliance changes

Swelling present when casted ▶ am pm



Special Instructions: _____

