

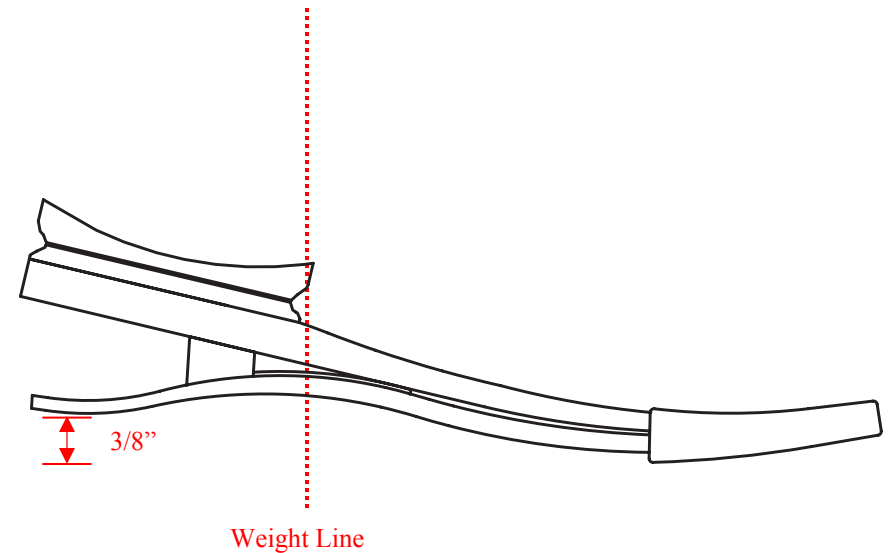
Final Assembly

- After lamination of the socket is completed, the foot should be bolted to the socket using the 10mm bolts provided, and 5 minute epoxy applied to the distal end of socket, and shoulder of the bolt to ensure total contact with the foot surface.
- Torque the ankle bolts to 35 ft*lb.
- Loctite 242 or equivalent should be used on screw threads.

Warnings and Contraindications

No specific warnings and/or contraindications are specified for this device, although they should be used for the assembled prosthesis. These include, but are not limited to:

- Discontinue use, and consult your physician or prosthetist if the prosthesis causes pain, or injures you in any way.
- Do not attempt to adjust or service the prosthesis, except as advised by your prosthetist.
- Inform your prosthetist if you lose or gain a significant amount of weight.
- Have the prosthesis serviced at the regular intervals specified by the prosthetist.
- Ensure that the prosthesis is used in a shoe with the correct heel height. The LP Symes is designed to work with a 3/8 inch heel. It will not perform as intended, and the footshell will wear in an accelerated manner, if it is worn without shoes.
- Freedom Innovations' feet are manufactured and tested for a particular weight and activity level. Use by an amputee other than the one for whom they were originally manufactured may be dangerous to the amputee, and shall void any written or implied warranty.
- Freedom Innovations' foot modules should be inspected and serviced every six months, or as advised by the prosthetist.



Low Profile Symes Prosthetic Foot

Prosthetist's Instructions for Use



Advena Ltd., Hereford, HR4 9DQ UK

R-720-064 LP2 Symes, Prosthetist's Instructions, Rev. D

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LP Symes Foot Module

Bench Alignment

Sagittal Plane:

- Introduce the appropriate socket flexion and heel height, according to the amputee's requirements.
- Position the weight line, taken from the center of the socket at the patellar tendon level, so that it bisects the apex of the heel arch.

Coronal Plane:

- Introduce the appropriate socket adduction/abduction, according to the amputee's requirements.
- Position the weight line, taken from the center of the socket at the patellar tendon level, so that it falls along the midline of the foot module.
- Set toe-out at 3-5 degrees, and ensure that the laminating dish is in a neutral position. This will allow adjustment of toe-out during dynamic alignment.

Use with Diagnostic Socket

- Static and dynamic alignment may be completed during the diagnostic socket fitting.
- A filler material should be used to correctly position the socket in relation to the foot module, and fiberglass casting tape wrapped around the adaptor and socket for reinforcement.
- The amputee should remain between parallel bars at all times when ambulating with a diagnostic socket.

Static Alignment

- Fit the anatomical foot cover onto the foot module and place into shoe. Use heel wedges to ensure that the weight line falls along the anterior edge of the pylon with shoe in place.
- Establish the correct height of the prosthesis by having the amputee stand with feet at shoulder width, and equal weight bilaterally.
- Check socket flexion, load line position and toe-out. Correct as necessary.

Dynamic Alignment

- The function of the foot may be optimized by modifying the alignment of the socket relative to the foot and by altering heel stiffness. The heel stores energy at heel strike and progressively releases it at midstance. Careful attention to

alignment will ensure optimal energy return, and improve control of the prosthesis

- As the amputee walks, check for smoothness of gait and even ground contact at all times.
- The heel is too soft if the foot comes to foot flat too early or the amputee feels like they are sinking or trying to climb up over the toe. The toe will feel too stiff and the knee may hyperextend. Shift the socket anteriorly and/or use foam wedges to stiffen the heel, and soften the toe.
- The heel is too hard if the amputee's gait exhibits rapid heel to toe movement and they have difficulty in controlling the prosthesis. The toe may feel sluggish with minimal energy return and the knee may buckle. Shift the socket posteriorly, or remove heel stiffening foam to alleviate this problem.

Altering Heel Stiffness:

- In most cases, stiffening the heel is best achieved by moving the weight line anteriorly or dorsiflexing the foot. However, the heel action may also be stiffened, by affixing the heel stiffening foam between the heel and toe portions of the foot module.
- During dynamic alignment, hold the heel stiffening foam in place by applying the double-sided adhesive strip to the bottom surface of the foam. **Moving the foam forward will soften the heel of the foot. Moving the foam towards the heel will stiffen the foot.**
- After the proper foam location has been selected, remove the temporary adhesive strip, lightly scuff the area to be glued, clean the mating surface with a solvent and apply with a permanent adhesive such as Barge Cement (not provided). Do not glue the upper portion of the stiffening foam to the shank of the foot, as this will affect foot performance and lead to eventual failure of the stiffening foam.

Fabrication of Laminated Socket

- The LP Symes Direct lamination Cup may be removed from the foot module for fabrication purposes.
- Either an open-ended socket with poured distal pad, or closed-end socket design may be used with the LP Symes Direct lamination Cup.
- If a closed-end socket is used, it is desirable to re-evaluate socket alignment after the inner socket wall is bonded to the Direct Lamination Cup.
- Two tubular carbon fiber braids should be tied into the lamination groove, and then reflected over the socket for a total of 4 layers of carbon braid in the socket lay-up. This lay-up has been successfully used on amputees weighing less than 300#.