



1-800-FLO-TECH (356-8324)
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Find Us On:

SOFTIE™ Trans-Tibial

Thank you for your interest in FLO-TECH Orthotic & Prosthetic Systems, Inc.

As home of the premier Adjustable Post-Op Prosthetic Socket System, FLO-TECH® O&P is committed to a team spirit of adventure in advancing state of the art immediate post-amputation, early ambulation, and preparatory prosthetic care for the well-being of people sustaining elective or traumatic lower limb amputation surgery.

Our sockets allow for early ambulation, more versatility for edema control, knee flexion contracture management, aids against distal end breakdown, access to surgical site care, and post-operative rehabilitation.

A limited inventory of samples for demonstration purposes are available for up to 30 days use. Call for information.

Custom Sockets, and sizes, are made from Practitioner measurements and are non-returnable and non-refundable. We make every effort to ship Custom orders within 24-48 hours.

2010 Holiday Schedule we will be closed to observe:
Memorial Day – Monday, May 27
Independence Day – Thursday, July 4
Labor Day – Monday, September 2
Thanksgiving – Thursday & Friday, November 28-29
Christmas – Wednesday, December 25





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Rehab Complete Package

The Rehab complete package consists of a FLO-TECH-TOR™, UFOS™, pylon, foot and waist belt. Each item invoiced individually for line item insurance billing.

The Rehab System (sockets only) also available.

Our sockets accommodate various sizes, shapes and dimensions from bulbous to cylindrical to conical. See measurement forms for specific fitting ranges.



Rehab System, side (sockets only)



Rehab System, front (sockets only)



TT Components



Trans-Tibial Pylon and Foot, side



TT Waist Belt

FLO-TECH® O & P Systems, Inc.

7325 Halseyville Rd., Trumansburg, NY 14886

1-800-356-8324

tel: [607-387-3070](tel:607-387-3070) | fax: 607-387-3176 | info@1800flo-tech.com



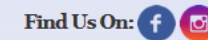
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Prep Complete Package

The Prep complete package consists of a VCSPS™, UFOS™, pylon, foot and waist belt. Each item invoiced individually for line item insurance billing.

The Prep System (sockets only) also available.

Our sockets accommodate various sizes, shapes and dimensions from bulbous to cylindrical to conical. See measurement forms for specific fitting ranges.



Prep System, front (sockets only)



Prep System, back (sockets only)



TT Components



Trans-Tibial Pylon and Foot, side



TT Waist Belt

FLO-TECH® O & P Systems, Inc.

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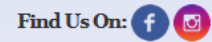


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FLO-TECH-TOR™

Post-Operative Socket

This one-piece post-operative socket limits knee flexion, maintains knee alignment and prevents flexion contractures.

Adult sizes, 7" or 9" length, left or right:

- #1416 (MPT 14" to 16")
- #1618 (MPT 16" to 18")
- #1821 (MPT 18" to 21")
- #2124 (MPT 21" to 24")

Our sockets accommodate various sizes, shapes and dimensions from bulbous to cylindrical to conical. See measurement forms for specific fitting ranges.

- [FLO-TECH-TOR™ Info Page](#) [PDF]
- [7" Measurement Form](#) [PDF]
- [9" Measurement Form](#) [PDF]
- [FLO-TECH-TOR™ APOPPS Protocol](#) [PDF]
- [APOPPS Extended Ambulation Protocol](#) [PDF]
- [APOPPS Non-Ambulatory Protocol](#) [PDF]



FLO-TECH-TOR, front



FLO-TECH-TOR, side



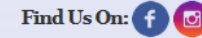
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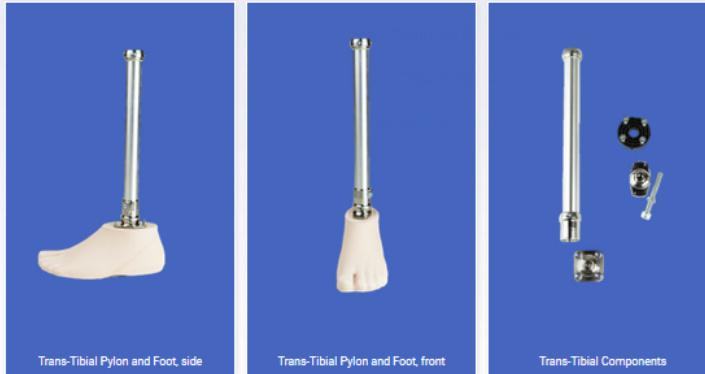
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Pylon and Foot Unit

Trans-Tibial Pylon and Foot Unit, and components



Trans-Tibial Pylon and Foot, side

Trans-Tibial Pylon and Foot, front

Trans-Tibial Components

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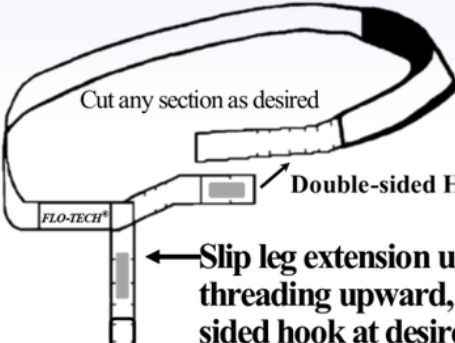
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Find Us On:  

Trans-Tibial Waist Belt

New version – After June 2018

Trans-Tibial Uni-Belt



Left or Right

Cut any section as desired

Double-sided Hook

Slip leg extension under fork strap, threading upward, attach with double-sided hook at desired length.

Traditional version – Prior to June 2018

Trans-Tibial Uni-Belt



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Protocols

PROTOCOL: For the APOPPS® FLO-TECH-TOR™ Socket When used as a Post-Operative or Early Fitting Prosthetic Socket

A licensed or certified Prosthetist should be consulted throughout the use of all APOPPS® sockets.

PHYSICIANS – SUGGESTED SURGICAL and POST-SURGICAL PROTOCOL:

- Elective surgical length is ideal between 5" and 8" as measured from the mid-patella tendon. However, the APOPPS® can be custom made to any size or length and available to your patient in 24 to 48 hours depending upon:
time of day when Prosthetist places the order (before noon ideally) and shipping schedules.
- The cut edges of the tibia should be well rounded, beveled and smooth.
- The wound (incision) should be cleaned and well sutured.
- Apply narrow adhesive strips and a non-adherent petrolatum gauze.
- Apply a thin layer of 4" x 4" gauze.
- Apply a non-compressive dressing, evenly and not too thick, from the distal end to approximately 2" above the patella. All forms of moderate skin cover (elastic bandages, gel liners, under cast padding) are acceptable with the FLO-TECH-TOR™.
- Roll the appropriate size sterile post-op fitting sock (or stockinet) up to the proximal edge of the non-compressive dressing.
- The Prosthetist may continue the application process from this point.

The FLO-TECH-TOR™ may be removed at any time to observe the incision, provide range of motion of the knee, and allow for patient or staff to change bandages or dressings. It should also be removed, routinely, 2 times per day (once in the AM once in the PM). The outer amputation sock should be changed to a clean dry sock. This will allow the outer sock to wick away moisture and other fluids.

PROSTHETISTS – SUGGESTED POST-SURGICAL PROTOCOL:

- Apply the waist belt with extension aide.
- Roll the post-op fitting sock (or sterile stockinet) up high enough to fold over the top of the socket and secure it to the extension strap portion of the waist belt (temporarily) or use a non-allergic spray adhesive to secure it to the thigh.
- Apply a reticulated polyurethane distal end pad.
- Apply an amputation sock over the reticulated pad, tall (long) enough to fold over the top of the socket.
- Apply the FLO-TECH-TOR™ (loosely fit) as a deterrent to swelling, injury and potential flexion contractures; *secure fork strap to the extension strap with minimal upward*

- Apply a reticulated polyurethane distal end pad.
- Apply an amputation sock over the reticulated pad, tall (long) enough to fold over the top of the socket.
- Apply the FLO-TECH-TOR™ (loosely fit) as a deterrent to swelling, injury and potential flexion contractures; *secure fork strap to the extension strap with minimal upward pressure*. The mid-patella strap should be loose enough to slide a finger under the strap when the patient is NOT ambulating.
- *The side(s) may be heated and shaped to the contours of your patient (bulbous distal tissue).*
- The mid-patella tendon strap and two-piece neoprene waist band must be tightened before ambulating and loosened after ambulating.
- The APOPPS® Universal Frame Outer Socket (UFOS™) should be kept in the Physical Therapist's possession until the Physician has prescribed its use on a regular independent basis.

PROTOCOL: For the APOPPS® FLO-TECH-TOR™ Socket When used as a Post-Operative or Early Fitting Prosthetic Socket

A licensed or certified Prosthetist should be consulted throughout the use of all APOPPS® sockets.

PATIENTS, NURSES, HOME HEALTH & FAMILY HELPERS

– SUGGESTED POST-SURGICAL PROTOCOL:

**Daily Hygiene, Range of Motion and Transfer Recommendations:*

- *Remove the FLO-TECH-TOR™ socket 2 times per day.
- *Remove the outer fitting sock (or stockinet) and the polyurethane distal end pad.
- Examine (**do not remove**) the innermost post-op fitting sock (or sterile stockinet) for signs of excessive bleeding or drainage
 - *If excessive blood or drainage is found, contact the Physician immediately!*
 - **If only mild spotting is noted, make a record and proceed.**
 - **Record the size and location of the spotting.**
 - **If the spotting becomes excessive at some later point contact the Physician.**
- Wash the reticulated distal end pad with an anti-bacterial soap; rinse well, dry the pad by gently compressing it in a towel (DO NOT WRING), reapply the pad and a clean dry outer sock over the pad.
- Re-apply the FLO-TECH-TOR™ socket.
- The strap at the mid-patella tendon (just below the knee) should be loose enough to slide a finger under it.
- When standing the strap and the two-piece neoprene waist band should be tightened.
- **When in bed or reclined in a chair the mid-patella tendon strap should be loose enough to slide a finger under it.**

***THE COMPLETE HYGIENE PROCESS SHOULD TAKE NO LONGER THAN 20 MINUTES EACH TIME.**

PHYSICAL THERAPISTS – SUGGESTED POST-SURGICAL PROTOCOL:

Daily Use, Rehabilitation and Training:

- Weight bearing **MUST** be authorized by a Physician.
- Patients may begin early contact weight bearing upon receipt of the FLO-TECH-TOR™ either on a tilt table, or by standing on a pillow with a chair supporting the distal socket.
- Patients should be encouraged to begin monitored use of the FLO-TECH-TOR™ in conjunction with the UFOS™ as soon as they are able (usually 24-hours to 7-days post-op).
- The extension strap is detached from the FLO-TECH-TOR™ fork strap and secured to the UFOS™ fork strap.
- When the time is right, patients should be encouraged to keep possession of the UFOS™.

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post-op).

- The extension strap is detached from the FLO-TECH-TOR™ fork strap and secured to the UFOS™ fork strap.
- When the time is right, patients should be encouraged to keep possession of the UFOS™.
- Training, prior to and after receiving the UFOS™ MUST stress: caution, following strap procedure, transfer skills, form (posture and balance), navigating obstacles and being aware of and reporting fitting problems as they develop.
- The patient should return to his/her licensed or certified Prosthetist as often as appointments are scheduled.
- The Prosthetist, with a Doctor's prescription, will provide a VCSPS™ (Variable Control Supra-patella Preparatory Socket [a prefabricated preparatory prosthesis]) to be used with the same UFOS™, when the patient is ready for knee flexion and full weight bearing.

PROTOCOL: For the APOPPS® Variable Control Supra-patellar Preparatory Socket Preparatory Socket (VCSPS™):

A licensed or certified Prosthetist should be consulted throughout the use of all APOPPS® sockets.

PROSTHETIST:

- The VCSPS™ (Variable Control Supra-patellar Preparatory Socket) should be worn with the same UFOS™ (Universal Frame Outer Socket) the patient used with the FLO-TECH-TOR™ socket during the rehabilitation phase of treatment and be provided with a Physician's prescription.
- The amputation must be healthy and ready for full weight bearing. The Prosthetist will insert a firmer distal end pad, if needed, before the patient begins full weight bearing.
- Apply the VCSPS™ very snug. This will not only reduce edema and swelling of the residuum, but will provide a better weight-bearing fit. To reduce the distal AP, wrap the distal VCSPS™ strap around the outside anterior portion of the UFOS™ and tighten to the desired dimension.
- The Prosthetist will examine the patient, with the VCSPS™, the UFOS™, foot and pylon of your choice, and provide any adjustments required to insure a stable walking alignment.
- The supra-patellar or supra-condylar area may be molded or trimmed to a SCSP socket or even a PTB type socket.
- Suspension may be altered to accept a suspension sleeve, with a Doctor's prescription.
- The Prosthetist and the patient should continue to consult with the Physician and the Physical Therapist as the patient progresses toward the time when he/she is ready for a definitive prosthesis.

PHYSICAL THERAPIST:

- Training MUST stress: weight bearing to the prescribed level, caution, form (posture and balance), navigating obstacles, and being aware of and reporting fitting problems (if they develop) to the Prosthetist and the Physician.
- Training should continue as long as the patient is making progress – physically and/or socially.
- Patients should be encouraged to **wear the prosthesis as many hours per day as possible** (even if they are not using it for walking), and to elevate the leg every time the prosthesis is removed for more than 10 minutes.
- The patient should be as independent as possible, and should return to his/her Prosthetist and Physician as often as appointments are scheduled.

**Daily Hygiene Recommendations:*

PATIENT, NURSES, HOME HEALTH AND FAMILY HELPERS:

- Remove the VCSPS™, the UFOS™ and all amputation socks and examine the skin thoroughly at least two times per day. Use a mirror if necessary to see all areas of the amputated limb.
- If blisters or broken skin are found, contact the Physician immediately.
- If redness is found, gently massage and apply rubbing alcohol to the area during the day and lanolin/aloe based lotion at night (with your Physician's approval).