



Patient: _____

Date: _____

Break-in Period / Wearing Schedule

1. Initial Wearing Time: _____ minutes.
2. After the Initial wearing time, take the brace/prosthesis off, as well as any socks and inspect the skin. Any redness should go away in 15-20 minutes. If the redness does not disappear, do not increase the wearing time. If the color is deep red or purple do not continue to use the device and contact our office.
3. As long as the skin looks good, reapply the device and wear for the same length of time. Do this a total of three times before adding wearing time. Watch for wrinkles in the socks.
4. ____ Increase the wearing time by _____ minutes after the 3 wearing sessions as long as the skin is looking good.

____ Keep to the same wearing time for an entire day before adding an additional _____ minutes per day.

____ Wear the brace according to your Doctor's instructions.
5. If the orthosis/prosthesis causes any increased discomfort, please contact our office immediately.

Practitioner: _____

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