

One Visit Prosthetic Solutions

With Direct Socket TF:
Your guide to getting the most out of your new socket



INTRODUCTION

This One Visit Prosthetic solution allows you to be at the centre of your care. Here's what you need to know about the Direct Socket TF.

The manufacture of this Total Surface Bearing socket follows a standardised process, whilst allowing the socket to be an optimised fit for each patient, resulting in improved satisfaction and comfort. The Direct Socket TF is made and delivered on the same day, alongside a session of physiotherapy to ensure that you get the best function when walking in your new socket.

Direct Socket TF is a different style of socket, with lower trimlines and a flexible brim. You may find you feel an ache around your hip and residual limb as you adjust to walking with this new socket style. It may highlight gait compensations that you have developed walking with your prosthesis. You may benefit from more physiotherapy input after your fitting appointment to correct these gait

compensations. This may be either as face to face sessions or via a home exercise programme. In order to get the best quality walking with the Direct Socket TF, you must be aware that you will need to engage with physiotherapy throughout the process.

Whilst the socket is being made, you will be lying on your side on the plinth. It will be interesting to see how the socket is made, but this may alter your position on the plinth.

Prior to your appointment you can use this QR code to watch the DSTF summary video to view the process, as well as the exercises within this guide.

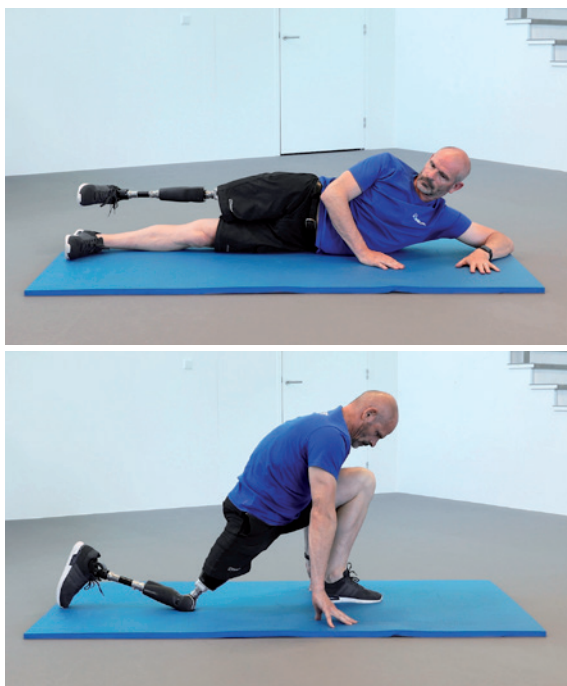


BEFORE YOUR FITTING APPOINTMENT

It is a good idea to prepare several weeks before your fitting appointment, to ensure the muscles around the hip joint have sufficient range of movement and muscle strength. Here

are some exercises to prepare you for your new socket. Check with your physiotherapist which exercises are important for you:

1



Stretch

Anterior hip/thigh stretch: This can be done lying on your stomach, lying on one side, or in kneeling.

- A. In side lying/lying on your stomach – squeeze the gluteal muscles and stretch the top leg backwards. The stretch should be felt over the front of the hip or down the thigh.
- B. In kneeling – keep the hips behind the knee joint on the kneeling side. Squeeze the gluteal muscles and push the pelvis forwards. The stretch should be felt in the thigh/front of the hip.



Side Lying

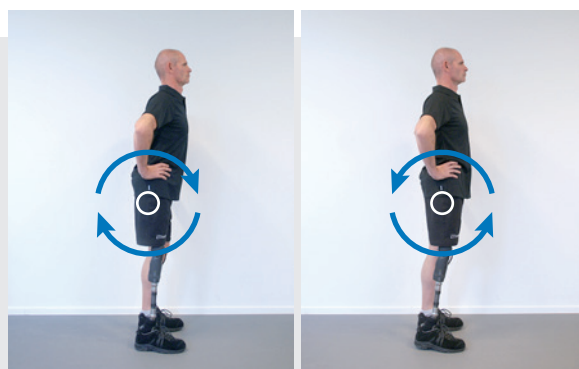


Kneeling stretch

2

Mobilise

Pelvic tilts in lying/sitting/standing: Put your hands on top of your pelvic bones and using your lower abdomen muscles, tilt the front of your pelvis downwards. Then squeeze your belly button in and use your gluteal muscles to tilt your pelvis backwards. Meanwhile, keep your shoulders and trunk still. The only movement should be from the pelvis.



Standing pelvic tilts



Sitting pelvic tilts

BEFORE YOUR FITTING APPOINTMENT

3

Strengthen

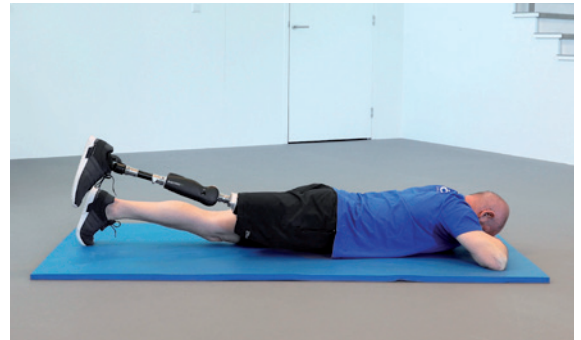
Prone hip extension: Lie on your stomach, rest your forehead on your hands in front of you. Squeeze your belly button in towards your spine and lift your leg up off the bed. Don't lift it too high. If you are unable to lie on your stomach, you can do this in a kneeling position with your hands on the floor.



Prone hip extension



Kneeling hip extension



Glute bridge: Lie on your back with your prosthesis on, bend both knees to 90 degrees (your prosthetic leg may need support to stop it from moving), squeeze your gluteal muscles and lift them up from the floor. Ask your physiotherapist to show you a harder progression (marching glute bridge/ single leg glute bridge) if this feels easy.



Glute bridge

Abduction leg lift: Either lie on your side or in standing, take the leg that you are strengthening slightly behind your other leg and then lift out to the side. Ask your physiotherapist to show you how to make this more difficult by using a resistance band around your thighs or feet (if wearing a prosthesis).



Abduction leg lift



Sitting Adduction squeeze: Sit with a straight back and both legs extended. Place something soft, like a rolled towel between your legs. Squeeze your thighs tight and hold for 5 seconds.



Sitting Adduction squeeze

AT THE APPOINTMENT

At the start of your appointment, the physiotherapist/prosthetist may look at how you are walking in your current socket, assess your hip and back, looking at the range of movement and strength.

It is important during the process that you are able to tense your muscles in your residual limb when required. This will be practiced prior to making the socket.

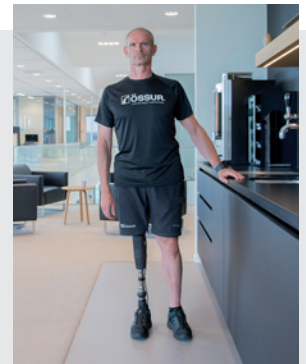
Following the fitting of your new socket, the physiotherapist will review your walking. They will be able to provide training on key movements, specifically at the pelvis and upper body, and will advise you on specific exercises to practice, to help you get the best function with your new socket. Below are some exercises that may be given to you by physiotherapist, to get you used to using your new DSTF socket. Check which exercises are possible with your prosthesis.

If you regularly complete the stairs and ramps, ensure you check these with your physiotherapist/prosthetist before you leave your fitting appointment. Depending on your prosthetic knee joint, the settings in your prosthesis may need adjusting to support you during these activities. A good prompt to control the descending movement is to push down through the heel, like you are squashing ants.

1

Left-right shift

Stand upright with feet comfortably apart (5-10cm). shift your pelvis slowly from left to right and back again. Feel how your weight is shifting from one foot to the other.



Össur Logic application for Rheo Knee users:

You will receive real-time feedback based on your load.



Left-right shift

2



Standing up and sitting down

Stand upright with both feet the same distance from a chair with armrests. Distribute your weight evenly between prosthetic and sound sides. Reach back for the chair armrests and sit down while loading your prosthesis, keep pushing through the foot into the ground. If using a Rheo Knee, you will feel supportive resistance as you sit down. Use a mirror for visual feedback.



Össur Logic application for Rheo Knee users:

You will receive real-time feedback based on your load.



Össur Logic app



Standing up and sitting down

AT THE APPOINTMENT

3

Split stance

Standing in the parallel bars, with most of your weight on your sound limb (this heel should be placed just in front of the toes of your prosthetic foot). Practice the forward rotation of your pelvis on the prosthetic side, aim for the opposite parallel bar. This will allow the foot to roll onto the toes and allow the knee to begin to bend. Your physiotherapist may use some resistance/support at your pelvis to help you feel this movement. This is an important movement for walking efficiently.



Split stance

4



Sitting trunk rotations

In sitting, with your weight evenly spread across your bottom, with a slight pushing down movement through your feet to the floor. Sit with your back away from the chair and place your arms across your chest. Take a deep breathe in. As you exhale, slowly turn to one side. Keep both sides of your bottom touching the chair and both feet on the floor. Breathe in as your return to the centre. Then repeat on the opposite side.

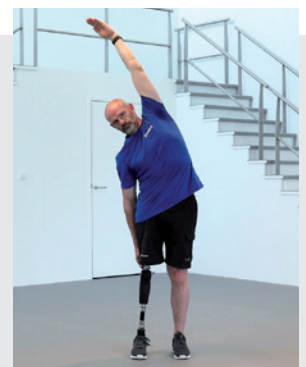


Trunk rotation

5

Standing trunk side flexion stretch

In standing with your feet slightly apart, keep your weight evenly spread between your feet. Lift one arm up towards the ceiling, then over your head slowly. Keep your weight going between both feet, you should feel a stretch from the outside of your hip up to your stretching arm. You may also do this in sitting if you feel too unbalanced. Repeat on the opposite side.



Side flexion

AFTER THE FITTING

It is necessary for you to take some time to adjust to the new socket. The perceived lack of support from the top of the socket means that you may fatigue quicker as you are trying to recruit more muscles from around your hip and residual limb, that you wouldn't normally utilise. During this adjustment period, you should still remain active, but should pace activities. For example, if you are used to going on a 4 mile walk every day, break up the walk into smaller distances, such as 1 mile four times a day, for a few days until you get used to the new socket.

Ideally you should be seen for a socket review 4-6 weeks following your fitting, this is a good time to be reviewed in physiotherapy also to check your walking and if any changes to exercises are needed. In the meantime, your physiotherapist

may advise you to continue the exercises from the pre-fitting and appointment sections while you adjust to your new socket.

Some key points to focus on when walking with your new socket:

- Practice spending longer on your prosthetic limb, and not stepping quickly onto your sound limb.
- Ensure you get a good trunk and arm swing as you walk.

If you can manage all the earlier exercises without issues, here are some more advanced exercises to progress to:



1

Donning the Direct Socket

- A. Fold the brim over the socket. If using a Iceross Seal in Liner, it may be required to use spray after folding the brim over the socket.
- B. Fully step into the socket
- C. Fold the brim back up

NOTICE: Do not pull on the brim when you don the socket. If you pull on the brim, you can damage it.



Donning



2

Doffing the socket

- A. Fold the brim over the socket
- B. Press the release valve and pull the socket off
- C. Fold the brim back up



Doffing





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