SHOULDER IMMOBILIZATION







ULTRASLING™ III

Indications

For protocols involving immobilization

- Rotator cuff repairs
- Capsular shifts
- Postoperative Bankart procedures
- Glenohumeral dislocations/ subluxation
- Soft tissue strains/repairs

Features & Benefits

- NEW! Moisture wicking mesh fabric for greater comfort, particularly in longer term use
- Helps prevent post-operative internal rotation contractures
- Promotes auxiliary air exchange to reduce risk of secondary infections
- Easy-open front panel encourages forearm exercises
- Allows arm to be positioned in a variety of positions dependent on post-operative requirements (either more posterior or anterior)
- The De-rotation Strap hooks to the UltraSling III and prevents internal rotation by securely holding the patient's arm in neutral position
- AB Version: Large comfortable pillow gives greater abduction where required (45° or 60°)

Recommended HCPCS Code: L3670



BREATHABLE SOFT SHOULDER BRACING

The premium quality UltraSling III series offers breathable, mesh fabric and thermoformed padding for greater comfort and patient compliance. An exercise ball is used to aid in stimulating circulation. The UltraSling III AB has a large comfortable foam pillow which allows 45° or 60° of abduction.



ULTRASLING III ORDERING INFORMATION

Part Number	Description	Size
11–0449-x	UltraSling III	S–XL
11–0450-x	UltraSling III AB	S-XL
11–1530	De-rotation Strap	Universal

Sizes Available: S-XL

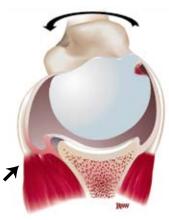
(Measure elbow crease to base of index finger, fits right or left arm)

x = 2 = 5......Up to 11"......(28 cm) x = 3 = M.....11"-13"......(28-33 cm) x = 4 = L......13"-15"......(33-38 cm) x = 5 = XL.....Above 15"......(Above 38 cm)

Auxillary View of Glenohumeral Joint



Labral and capsular tear



Bankart lesion displaced with internal rotation



External Rotation in the USER

ULTRASLING™ III ER EXTERNAL ROTATION BRACE

CLINICAL RESEARCH

A New Method of Immobilization After Dislocation of the Shoulder: A Prospective Randomized Study.¹

PURPOSE

To determine if immobilization in external rotation would decrease recurrence rates of anterior shoulder dislocations. The hypothesis was based on the observation that external rotation will tighten the anterior glenohumeral joint capsule and subscapularis tendon which causes the labrum to be forced back into position on the glenohumeral rim.²

METHODS

From January 2000 – March 2002 first-time anterior dislocators of the glenohumeral joint were enrolled. After the shoulder was reduced they were randomly assigned to the internal immobilization (n=20) or external immobilization at 10-15° of external rotation (n=20). Average follow up was 15.9 months (IR group) and 13.7 months (ER group).

RESULTS

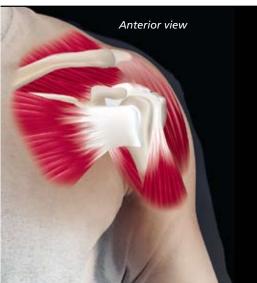
	Internal Immobilization Group	External Immobilization Group
Overall Recurrence Rate	6/20 (30%)	0/20 (0%)
Recurrence Rate in Patients < 29 Years Old	5/11 (45%)	0/11 (0%)
Anterior Apprehension Sign Positive	2/14 (14%)	1/20 (5%)

CONCLUSION

This study demonstrated that immobilization of patients in external rotation after first-time shoulder dislocation had lower recurrence rates than patients immobilized in internal rotation.

References:

- 1. Itoi E., Hatakeyama Y, Kido T, et al. A new method of immobilization after dislocation of the shoulder: A prospective randomized study. AAOS annual meeting, New Orleans, 2003. (in press, J Shoulder Elb Surg, Vol.12, No.5, 2003)
- 2. Itoi E., Sashi R., Minagawa H, et al. Position of immobilization after dislocation of the glenohumeral joint: A study with use of magnetic resonance imaging. J Bone Joint Surg, 83A: 661-7, 2001.



"For decades we as orthopedists have treated our patients following traumatic shoulder instability under the misconception that the classic position of internal rotation would aid in healing despite the dismal results seen in the literature. Now, for the first time we have a proven method to reduce the incidence of recurrent dislocation by simply treating the patient in external rotation for three weeks after the injury in the DonJoy UltraSling™ ER."

ULTRASLING III ER INSTRUCTIONS



Put on de-rotational strap like a backpack.



Posterior view



Top view
Position the white line parallel
to the front of the body for
indicated external rotation.

ULTRASLING III ER ORDERING INFORMATION

Part Number	Description	Size
11-1343-x	UltraSling III ER,15°, Right	S–XL
11-1344-x	UltraSling III ER,15°, Left	S-XL
11-1345-x	UltraSling III ER, 30°, Right	S–XL
11-1346-x	UltraSling III ER, 30°, Left	S-XL
11-9100	UltraSling III ER, 15° Wedge (single)	Universal
11-9101	UltraSling III ER, 15° Wedge (5-pack)	Universal

Sizes Available: S-XL

(Measure elbow crease to base of index finger, fits right or left arm)

x = 2 = 5	Up to 11"	(28 cm)
		(28–33 cm)
x = 4 = L	13"–15"	(33–38 cm)
x = 5 = XL	Above 15"	(Above 38 cm)

ULTRASLING™ III ER

Indications

For protocols involving immobilization in external rotation

- Initial anterior glenohumeral dislocation/subluxation
- Capsular shifts
- Use after posterior shoulder repair
- Postoperative Bankart procedures
- Soft tissue strains/repairs
- Post operative positioning after release of severe anterior capsule contracture
- Adhesive Capsulitis release/manipulation

Features and Benefits

- NEW! Moisture wicking mesh fabric for greater comfort, particularly in longer term use
- 15° and 30° versions to suit your protocol
- Comfortable foam pillow for patient compliance
- De-rotational shoulder strap to keep product in place
- Quick release buckles make it easy to take on and off
- Four sizes in left and right versions to suit your patients needs



DONJOY® SOFT SHOULDER BRACING



DONJOY® SHOULDER STABILIZER

This functional shoulder brace designed by Dr. Tom Sawa provides shoulder immobilization and controlled range of motion for glenohumeral dislocations/subluxations, rotator cuff tears and acromioclavicular separations. The shoulder brace is designed to protect and stabilize the shoulder post-injury and post-operatively.

Part Number	Description	Size
11-1101-x-06000	DonJoy Shoulder Stabilizer, Right	S–XXXL
11-1102-x-06000	DonJoy Shoulder Stabilizer, Left	S-XXXL
11-1106-0-06000	Replacement Strap Set (5 straps)	Universal
Measurement taken chest circumference under arms and across nipples.		



DONJOY® SHOULDER STABILIZER SPA

Designed by Dr. Tom Sawa and Tory Aggeler ATC/L specifically for use with football shoulder pads, the SPA is indicated for glenohumeral instabilities. This device is ideal for the restriction of abduction and external rotation for symptoms or episodes of anterior and/or glenohumeral instability. The brace is also effective for posterior instability by restricting the shoulder ROM (range of motion) and disallowing the positioning of the joint in angles that increase the odds of a posterior dislocation or subluxation.

Part Number	Description	Size
11-1319-x-06000	Shoulder Stabilizer SPA	M-XXXL
Measurement taken at center of flexed bicep muscle.		



SULLY® SHOULDER STABILIZER

Provides shoulder immobilization and controlled range of motion for anterior, multi-directional, inferior, and posterior instabilities, rotator cuff deceleration, shoulder separations, and muscle strains. The shoulder brace is designed to stabilize, assist or restrict movement of the shoulder post-injury and post-operatively.

Part Number	Description	Size
11-0525-x	Sully Shoulder Stabilizer	XS–XL
11-0526	Custom	
11-0527	Bilateral	
11-0528	AC Pad	Universal
Measure bicep in non-flex position.		



ICEMAN®

IDEAL APPLICATION: The IceMan cold therapy unit helps reduce pain and swelling and facilitates rehabilitation. It provides up to several hours of continuous cold therapy for a variety of indications. Using a patented semi-closed loop system, the IceMan maintains a more constant and accurate temperature than competitor's systems.

Part Number	Description
11-0494	IceMan Unit Model 1100
11-9098	IceMan w/Cold Pad, Shoulder
11-1334-9-00000	Wrap-On Pad Shoulder (14" x 23" x 12.5")
11-1397-9-00000	Wrap-On Pad Shoulder, small (12.75" x 19" x 12.25")

DJO provides possible coding suggestions based on publicly available information as a convenience to our customers. We do not make claims, promises or guarantees as to the availability of reimbursement for any DJO product. It is within the sole discretion of the customer to determine the appropriate billing code for a product, as well as, whether the use of a product complies with medical necessity and other documentation requirements of the payor









