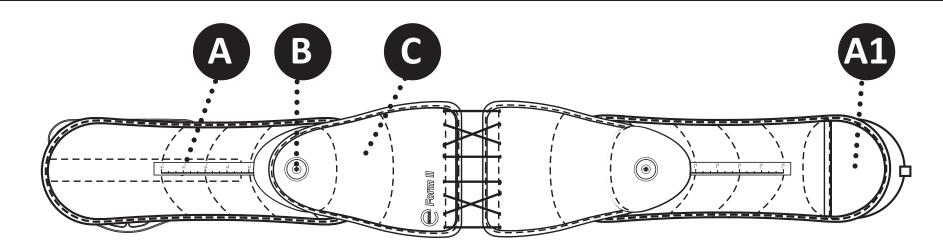
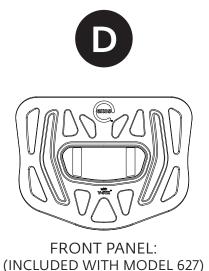


Spine Bracing System CLINICIAN APPLICATION INSTRUCTIONS EXOS FORM[™] 11 626 / 627





Application of Brace:



SIZE BELT by taking circumferential measurement. Select larger brace for in between sizes.

TRIM EXCESS material on Belt Wings (A) if needed.



3c

NOTE: Rear Panel Section should be centered on patient's back.



2

OPEN BRACE by pulling out on both Boa Knobs (B) and pull Rear Panel Section (C) in opposite directions.



APPLY BRACE to patient. Have patient insert hand into Donning Mitt pocket (A1).



4

TIGHTEN BRACE by pushing in both Boa Knobs and turn knobs clockwise.

NOTE: Left Boa Knob controls top half of brace. Right Boa Knob controls bottom half.



3b

IF APPLICABLE: Secure
Front Panel (D) (included with model 627) by holding panel at desired location. Have patient insert hand into Donning Mitt pocket and wrap Belt Wing over Front Panel. Close Brace.





MOLD THE FRONT PANEL: Remove foam lining and heat panel with either an Exos heating device (on lowest setting) or a heat gun (~170°F/~77°C) until panel is malleable. Shape appropriately and let cool. Reapply foam liner.

MOLDING LORDOTIC INSERTS: by removing inserts from Rear Panel Section. Heat inserts with either an Exos heating device (on lowest setting) or a heat gun (~170°F/~77°C) until malleable. Shape appropriately and let cool. Reinsert inserts into Rear Panel Section. **Ensure Exos logo is facing the patient.**

OPTIMAL WAIST FIT: Detachable Belt Wings can be repositioned for improved patient fit.

OPTIONAL BRIDGE WING: For patients whose circumferential measurement is between 60" and 70", (152cm and 178cm), use optional Bridge Wing. Apply hook portion of Donning Mitt Section to loop exterior of Bridge Wing.

PETITE PATIENT: For smaller patients, you can remove Donning Mitt Section entirely and adhere Rear Panel Section directly to Front Panel Wing.



For more information including application videos, please visit

DJOGlobal.com/products/exos/exos-form-ii-back-brace or call 888.405.3251

MATERIAL CONTENTS: Nylon, Polyethylene, Polyester, Antimicrobial, Polyurethane, Stainless Steel, Polycarbonate, Thermoplastic Elastomer, Polyoxymethylene, Carbon Steel, Acrylic Adhesive.

FOR SINGLE PATIENT USE ONLY. NOT MADE WITH NATURAL RUBBER LATEX.

CONTRAINDICATIONS: Pregnancy and circulation, pulmonary, cardiovascular or skeletal conditions which have risk to be made worse as a result of compression and/or pressure.

For product assistance, please contact Product Support at 1.888.405.3251 or email product.specialist@djoglobal.com

WARRANTY: DJO, LLC will repair or replace all or part of the unit and its accessories for material or workmanship defects for a period of six months from the date of sale. To the extent the terms of this warranty are inconsistent with local regulations, the provisions of such local regulations will apply.

