

Instructions for Use



A. Contents at Arrival

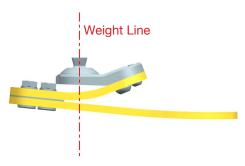
- 1. RUSH™ Foot, with fixed male proximal adapter
- 2. Spectra Sock
- 3. Foot Shell

B. Spectra Sock & Foot Shell

- A Spectra sock should always be used with the RUSHTM Kid foot to minimize or eliminate the introduction of debris that may come into contact with the material, as well as minimize wear to the foot shell.
- Always apply or remove the foot shell with an appropriate tool or device to minimize wear and damage.

C. Leg Assembly

 The bracket of the RUSH™ Kid assembly is attached to the prosthetic socket through a fixed male pyramid attachment to a female adapter. The pyramid attachment facilitates adjustment of plantarflexion/dorsifiexion and inversion/eversion. Toe-in and toe-out will need to be adjusted through other means such as a tube clamp or rotatable female threaded laminating base.



D. Bench Alignment

- 1. Sagittal Plane: After determining the appropriate socket flexion and heel height, position the weight line so that it falls directly through the midline of the pylon, or directly through the center of the proximal foot adapter. As the unique glass composite material provides substantially more flexibility than other prosthetic feet, this represents a good starting point for a bench alignment.
- Coronal Plane: After determining the appropriate socket adduction/abduction, position the weight line so that it falls through the midline of the foot in a neutral M-L position.

E. Static Alignment

- Due to the shape of the rocker sole, patients may experience a new sensation when seeking the midpoint of the foot. The rocker sole allows patients to find their own comfortable static or standing position. The rocker bottom shape of the sole serves two primary functions:
 - a. Provide a continuous and progressive point of contact throughout the entire step
 - b. Eliminate any "flat" or "dead" spot
- Adjustment of the A/P set screws at the Proximal Adapter is the more appropriate place to make changes regarding Plantarflexion or dorsiflexion, rather than the introduction of a wedge.

F. Dynamic Alignment

- 1. Dynamic alignment of the RUSH™ Kid foot is required for the use of this specialized foot. Static alignment is only a starting point for proper alignment of the foot. The roll through and toe-off of this foot is exceptionally dynamic and some plantarflexion adjustment may be necessary as the user may not be accustomed to such dynamic toe-off.
- 2. When possible, the use of a slide adapter with the RUSH™ Kid foot is highly encouraged for dynamic alignment purposes, as it provides the best solution to troubleshooting the most common alignment issues listed below:
 - a. Hard or Soft Heel
 - b. Hard or Soft Toe
 - c. Excessive Varus or Valgus moments during Stance Phase
- 3. Once the optimal relative socket/foot alignment is determined, Ability Dynamics encourages the use of Plantarflexion or Dorsiflexion at the Proximal Foot Adapter to heel-to-toe comfort and energy return.
- 4. The patient should wear the RUSH™ Kid foot for at least one week to fully experience the responsiveness of a non-carbon fiber device.

For general questions or specific inquiries regarding content of this document please call us toll-free

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