

HART'S ORTHOPEDIC

Bracing Reference Guide



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DESCRIPTION OF SERVICES

Hart Orthotics and Prosthetics is comprised of a highly trained and certified, clinical practitioner team who works hard to provide quality and functional bracing to meet individual needs. We strive to provide our patients the knowledge and confidence to excel in their short and long term treatment goals. We offer a variety of custom and prefabricated bracing for upper and lower extremities, and we cast and/or measure as well as custom fit braces to accommodate the unique anatomy of every patient. Additionally, we educate patients regarding care, use, and fit and answer all questions or concerns. To ensure complete confidence, we offer free follow up appointments as needed.

CONTACT INFORMATION

The staff at Hart Orthotics and Prosthetics takes great pride in being a resource for clinicians and patients. If you have a question about any of the products or services we offer, we're ready to help. Here's how you can reach us:

WEBSITE: hartmedical.org

MAIN LINE: (888) 606-8778

ORTHOTICS: (248) 304-4564

To download a digital version of this booklet, please go to hartmedical.org/guides.

ANKLE & FOOT

	DEVICE DESCRIPTION	COMMON USES	PRESCRIPTION REQUIREMENTS
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Ankle Stirrup

Rigid stirrup with padding to limit ankle M/L movements

Mild to moderate ankle sprains

Chronic ankle instability

Post-cast and post walker support

Ankle injury rehabilitation and/or post-surgical use

Diagnosis of Ankle Sprains or Fractures



Lace Up Ankle / Figure 8 Ankle

Lace up ankle brace for long-term wear with or without figure 8 straps

Ankle injury rehabilitation or immobilization (Grade I/II sprains)

Support chronic instability

Prophylactic use

Diagnosis of Ankle Sprains or Fractures



Walking Boot

Orthopedic Walking Boots are designed to protect the foot and ankle after an injury or surgery. Comes in pneumatic for greater compression and low profile for metatarsal fractures

Foot and ankle conditions that may benefit from motion restriction, such as: Grade 2 and 3 ankle sprains, stable foot fractures, or tendon/ligament sprain

If used with the Achilles Wedge Kit, Achilles Ruptures can be treated as well.

Tall boot used for several foot and ankle injuries

Low profile walking boot recommended for 2nd, 3rd, or 4th metatarsal and toe fractures only



Rigid (Velocity Style) Ankle Brace

Rigid Hinged Ankle Brace used for maximum protection, typically for athletes and highly active patients

Conditions that may benefit from ankle stabilization such as: Grade 1, 2, 3 and high ankle sprains, transition out of a walker, and/or cast after fracture or surgery, chronic ankle instability, or prophylactic use

Diagnosis of Ankle Sprains or Fractures

ANKLE & FOOT

	DEVICE DESCRIPTION	COMMON USES	PRESCRIPTION REQUIREMENTS
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Places the ankle in a neutral position, not for use during ambulation

Conditions that may benefit from resting with the ankle in a neutral position, such as: Plantar Fasciitis or Achilles Tendinopathy

Patient must have diagnosis of Plantar Fasciitis or Ankle Contracture. No other diagnoses are valid.

PRAFO Boots are designed to protect from heel ulcers

Insurance will not cover PRAFO boots for ulcers.

Posterior Night Splint / Dorsal Night Splint / PRAFO Boot



Prefabricated lightweight carbon AFO. Holds foot in neutral position during ambulation.

Drop foot secondary to: Cerebrovascular Accident (CVA), other neurological conditions, Multiple Sclerosis, mild knee instability, or Charcot-Marie-Tooth Disease

Patient must be ambulatory and have a documented ankle condition that could benefit from this type of device.

Anterior and posterior styles available

Works well for partial foot patients

Prefab Carbon AFO



Unlimited options including AFOs, KAFOs, Arizona Braces, CROW Boots, Richie Braces, and custom foot orthotics

Plantar Fasciitis and multiple other podiatric conditions

Foot orthotics are rarely covered by insurance, but there are some exceptions.

Plantar Fasciitis patients will receive accommodative orthotics with neutral posting unless otherwise noted.

Custom Foot and Ankle Bracing

KNEE

	DEVICE DESCRIPTION	COMMON USES	PRESCRIPTION REQUIREMENTS
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Basic Hinged Knee Brace

Lightest knee brace covered by insurance

Provides stabilization with lightweight medial and lateral hinges

Comes in wrap-around (shown) and pull up sleeve configurations

Typically used for minor sprains and instability

Often used after injections to provide compression and stability

Used for patients with both medial and lateral bicompartmental OA

Prescription must mention hinges "Hinged Knee Brace."

Several diagnoses, excluding "Pain"

Patient must be ambulatory and have documented knee instability, weakness, or deformity.

Not Covered: Knee Brace, Knee Sleeve, Elastic Knee Brace, and Genumedi Knee Brace



Hinged Patella Stabilizer Brace

Several configurations available based on patient's condition and anatomy

Provides patella tracking control and M/L stability with hinges

Styles include U-Shaped Patella Stabilizer, Lateral J, and Reaction Brace

Typically used for Chondromalacia Patella, Patellofemoral OA, Jumpers Knee, Osgood-Schlatter Disease, and Patellar Tendonitis

Prescription must mention hinges or specific brand "Hinged Patella Stabilizer."

Several diagnoses, excluding "Pain"

Patient must be ambulatory and have documented knee instability, weakness, or deformity.

Not Covered: Knee Brace, Lateral J, Patella Stabilizer



Reaction Brace

Lightweight web-style brace used for anterior knee conditions

Patellofemoral conditions and Osgood-Schlatter Disease

Several diagnoses, excluding "Pain"

Prescription must state: "Reaction Style Knee Brace."

Patient must be ambulatory and have documented knee instability, weakness, or deformity.



Knee Immobilizer

Easiest way to protect a knee and place into full extension

Temporary knee immobilization after injury

Typically used while waiting on results from imaging

For long-term immobilization, TROM is preferred

Typical diagnosis is Acute Knee Injury.

KNEE

	DEVICE DESCRIPTION	COMMON USES	PRESCRIPTION REQUIREMENTS
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TROM

Range of motion post-op knee brace
Can be locked in full extension

Maximum knee stabilization for injuries
Typically used post-operatively to protect knee and limit range of motion

Several diagnoses of severe knee injuries
Must use diagnosis codes and not procedure codes (Z Codes)
Please specify range of motion and patient instructions.



Playmaker KO

Long hinged knee brace that provides maximum functional M/L stability

Commonly used for MCL or Meniscus Tears

Typical diagnosis Knee Derangement or MCL Tears



Medial/Lateral Unloader OA

Applies a Varus or Valgus force to knee
Multiple styles based on patient's activity level

Used primarily for unicompartmental OA either medial or lateral

Diagnosis must be Medial or Lateral Knee OA
Must have specific OA diagnosis
Must specify R, L, or B/L



ACL/PCL Brace

Rigid framed brace for maximum stabilization and functionality
Can be custom fabricated for non-standard sizes
Additional strapping can be added for PCL injuries

Typically used after healed ACL tear for returning to sport
Can be used to protect ACL in nonsurgical situations
Maximum M/L and rotational stabilization
Restricts genu recurvatum

Typical diagnosis Knee Derangement or ACL/MCL Tears
Documented Knee Instability

KNEE

	DEVICE DESCRIPTION	COMMON USES	PRESCRIPTION REQUIREMENTS
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Custom Knee Braces

Most types of knee braces can be custom made.

Custom knee braces are for irregular sizes and for long-term daily wear.

Several diagnoses, excluding "Pain"

Must use diagnosis codes and not procedure codes (Z Codes)

Insurance varies, but patient typically must not be able to fit into a standard size brace.

HIP BRACING

	DEVICE DESCRIPTION	COMMON USES	PRESCRIPTION REQUIREMENTS
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Hip Abduction Brace

Places hip in abduction and flexion to allow ambulation

Post-operative hip revision patients, primary arthroplasty patients at risk of hip dislocation, patients needing stability after dislocation, inoperable patients requiring hip stabilization, or patients who can benefit from a hip orthosis to reinforce hip precautions

Diagnosis of Chronic Dislocations or Hip Surgery Revisions



Hip Unloader Brace

Hip brace that provides joint stabilization and also decreases the internal rotation and adduction moment during gait cycle

Specifically for Hip OA

Can be single or bilateral design

Diagnosis of Hip OA

"Pain" is not a valid diagnosis.

UPPER EXTREMITY

	DEVICE DESCRIPTION	COMMON USES	PRESCRIPTION REQUIREMENTS
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Abduction Sling

Sling to immobilize shoulder in abduction and flexion

Typically used post operatively after rotator cuff surgery

Can be pre-fit and dispensed 48 hours prior to surgery

Can be used to treat shoulder injuries

Must use diagnosis codes and not procedure codes (Z Codes)



ROM Elbow Brace

Range of Motion Elbow Brace designed for limiting the flexion and extension of the elbow joint

Indications requiring elbow immobilization and/or range of motion restriction, including: stable fractures of the elbow, distal humerus, proximal radius or ulna, tendon and ligament injuries or repairs, collateral ligament reconstructions, elbow hyperextension, triceps tendon repair, or chronic elbow injuries

Can be pre-fit and dispensed 48 hours prior to surgery

Must use diagnosis codes and not procedure codes (Z Codes)



Humeral or Ulnar Fracture Brace

Sarmiento style brace that controls humeral segments through circumferential soft tissue compression

Best suited for stable mid-shaft fractures

Diagnosis of Humeral or Ulnar Fractures



Ulnar Gutter / Radial Gutter Splint

Provides positioning for fractures or injuries to metacarpals, phalanges, and MCP and IP joints

Can be used for partial hand fractures

Can stabilize 4th, 5th or 3rd, 4th or 2nd, 3rd metacarpals

Diagnosis of Metacarpal Fractures

Can be applied directly to stable fractures or after cast removal

UPPER EXTREMITY

	DEVICE DESCRIPTION	COMMON USES	PRESCRIPTION REQUIREMENTS
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Adjustable splint used for positioning wrist, hand, fingers, and thumb

Used for hand contractures and can be applied for after cast removal

Make sure to include hand diagnosis; i.e., Hand Contracture from CVA.

Resting Hand Splint



Cubital Tunnel Splint

Splint that immobilizes and positions the elbow at 122° to help reduce pain and numbness associated with Cubital Tunnel Syndrome

Indicated for Cubital Tunnel Syndrome, post-surgical application, or post-cast removal

Diagnosis of Cubital Tunnel Syndrome

Indicate R, L, or B/L



Cock-up Wrist Splint

Lightweight splint to immobilize wrist

Carpal Tunnel Syndrome

Mild to moderate sprains and strains

Tendonitis

Post cast healing

Other select soft tissue injuries

Several diagnoses, excluding "Pain"



Thumb Spica

Similar to wrist splint but with added thumb stabilization

Gamekeeper's thumb

Selected scaphoid injuries

Soft tissue injuries

De Quervain's Tenosynovitis

Post-cast healing

Several diagnoses, excluding "Pain"

SPINAL BRACING

	DEVICE DESCRIPTION	COMMON USES	PRESCRIPTION REQUIREMENTS
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Rigid Cervical Collar

Adjustable collar for neck immobilization

Situations requiring gross immobilization of the cervical spine: pre and post C spine surgery, C spine, or precaution for trauma patients

Can be pre-fit prior to surgery

Diagnosis of Neck Injury

If fit in the hospital and the patient is not discharged within 48 hrs from delivery, the facility is responsible for payment.



Low Profile LSO

Low Profile Lumbar Brace designed for day to day lumbar conditions

For lower back conditions that may benefit from compression and gross motion restriction, such as: lower back pain (Lumbago), Lumbosacral Sprain/Strain, or Degenerative Joint/Disc Disease

Several lumbar diagnoses, except "Pain"

If fit in the hospital and the patient is not discharged within 48 hrs from delivery, the facility is responsible for payment.



LSO Back Brace

Back brace designed to stabilize the lumbar spine in 3 planes

Conditions requiring gross immobilization of the trunk in the lumbar region such as: stable, non-displaced spinal fractures (L1-L5), Spinal Stenosis, herniated discs, degenerative spinal pathologies, Spondylolysis, or Spondylolisthesis

Several lumbar diagnoses, except "Pain"

If fit in the hospital and the patient is not discharged within 48 hrs from delivery, the facility is responsible for payment.



TLSO

Back brace designed to stabilize the lumbar and thoracic spine in 3 planes

Conditions requiring gross immobilization of the thoracic and lumbar spine. Such conditions may include: Post-surgical immobilization, Spinal Support TLSO Attachment up to T7, Spinal Stenosis, herniated disc, degenerative spinal fractures, or Spondylolisthesis

Several lumbar and thoracic diagnoses, except "Pain"

If fit in the hospital and the patient is not discharged within 48 hrs from delivery, the facility is responsible for payment.

SPINAL BRACING

	DEVICE DESCRIPTION	COMMON USES	PRESCRIPTION REQUIREMENTS
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Posture Control TLSO

Lighter version of TLSO specifically designed to control Kyphosis

Back pain caused by stable vertebral compression fractures (VCF)

Thoracic Kyphosis

Post-operative immobilization

Diagnosis of Stable Anterior Compression Fracture or Kyphosis

"Pain" is not a valid diagnosis.



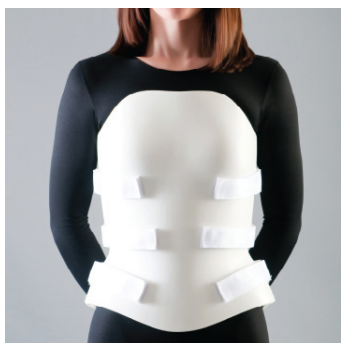
Prefab Scoliosis Brace

Prefabricated Scoliosis Brace designed for daily wear for adult Scoliosis patients

Designed to limit pain due to adult Scoliosis and postural conditions

Diagnosis of Scoliosis

"Pain" is not a valid diagnosis.



Custom Spinal

Custom fabricated spinal bracing designed for patients who need maximum immobilization

Conditions similar to LSO and TLSO, such as: fractures and post-op situations

Patient must have a need for a custom fabricated brace.

Must use diagnosis codes and not procedure codes (Z Codes)

"Pain" is not a valid diagnosis.

