Diagram 2

Prepare for walking

Fix the foot switch to the heel of the underside of a cork innersole

Black side against the innersole

Lead exits forward

Fix the footswitch to the underside of a cork innersole using adhesive tape on the back of the footswitch

An innersole allows the footswitch to be transferred from shoe to shoe easily and prolongs it's life

Connect the footswitch to the footswitch extension lead. Connect the extension lead to the ODFSIII when it is turned off or in sleep mode

Before standing press the pause switch to put the ODFSIII into sleep mode
Connect the footswitch
Press the pause switch again to activate the ODFSIII when the patient is ready to walk

Pause switch

Mount the footswitch further forward to delay stimulation

Patient should walk with assistive aids that they are used to such as a Cane or walker and with close supervision

Use a sounder

Use the sounder to hear when the stimulation occurs

Useful when setting ramps and extension time

The sounder will take some of the power from the stimulation.
Increase level slightly when using the sounder and reduce the level when it is disconnected.

From Electrodes

Stand
press pause switch
Try walking

Correct movement Dorsiflexion with eversion?

Yes

No

It is common for calf tone to increase when standing. Increase stimulation if required

Correct movement Dorsiflexion with eversion?

Yes

No

Review electrode positions

The correct movement

Heel strike is achieved i.e the heel strikes the ground before the forefoot

Eversion - the outside of the foot is tilted upwards relative to the inside.

Dorsiflexion: The foot is lifted throughout the swing phase of gait

The position of the foot at heel strike is most important as it determine how the weight passes through the foot and the stability of the ankle in the stance phase

Observe gait from behind to ensure sufficient eversion at heel strike

Setting the rising ramp
The correct ramp is the longest setting that will cause the stimulation to lift the foot quickly enough to clear the ground in the swing phase

Calf clonus spasm?
Insufficient ankle ROM?
Stimulation uncomfortable?

Increase rising ramp

Insufficient dorsiflexion at the beginning of the swing phase?

Reduce rising edge ramp

Foot slap?
(Forefoot strikes the ground rapidly following heel strike)

Listen to the sounder
If stimulation ends before the forefoot Strikes the ground, increase the Extension time

Inconsistent heel contact causing inconsistent stimulation or premature heel lift causing early stimulation

Change mode from heel rise to heel strike and place the foot switch under the heel on the opposite side

Insufficient knee flexion?

Use popliteal fossa electrode positions (see diagram 1)

User hesitant in taking a step so weight is repeatedly taken on and off the footswitch, starting and stopping the stimulation

Use fixed time mode
Listening to the sounder, adjust the stimulation time until it is on for the duration of the swing phase

Good Gait Correction?

No

Yes

Teach user and carers how to use the ODFS
Give user the user instruction manual
Mark in manual the position of the electrodes
Take a photograph of the electrode position for the user
Mark electrode positions using skin marker
Record control settings
Record outcome measures

Follow up next day
6 weeks later
3 months later
6 months later
every 6 or 12 months for as long as it used

Key to success
1. User education
2. Solve problems as soon as possible
3. Regular follow up