Sharp Podiatric
MEDICINE + SURGERY
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Orthotic Instructions

Congratulations! You have received a pair of prescription orthotic devices. When used correctly they will provide years of comfort and support. Please read the following instructions on care and use very carefully in order to understand the proper use essential for maximum benefit and tolerance of the devices.

Due to the fact that these foot orthoses improve the function of the foot they will change the muscles, control and position of the foot, and the relationship between the foot and the leg. In order to adapt to these changes, it is important to gradually increase use of the orthotics over the next 2 weeks.

INITIAL WEAR INSTRUCTIONS

It is best to slowly progress from a very short interval to eventually wear the orthotics for a full day. Begin with one hour the first day in a controlled environment and increase the time wearing the device by one hour per day. Each person and foot are unique and will require a different amount of time to 'break-in' the orthotics. Please note: **It is possible during this initial period to continue to experience your initial pain, and also have temporary pain or discomfort in the foot, leg, knee, or hip.**

After successfully completing the break-in process, wear the device as close to 100% of the time spent on your feet to ensure the most rapid recovery. While this is ideal, we understand that most people will wear them approximately 50-60% of the time after the break-in period. Only after completing the break-in period, and successfully wearing for at least 8 hours per day, should you consider using the devices for higher impact activities such as running and other sports.
It is normal to feel 'odd' while wearing the orthotics. However, if at any time during the break in period you experience pain that lasts for more than a day, or affects the ankles, knees, hips, or back should you stop wearing the devices and call our office.

PROPER FIT IN SHOES

Shoe choice is very important to the function of the orthotic. A running or walking shoe is optimal, however we recognize this type of shoe cannot be used in all situations.
When preparing to place the orthotics in shoes, begin by removing the factory insoles/sock liner from the shoe, if possible. Many shoes will have a removable insole. Insert the orthotic into its respective shoe front (toe portion) first, and ensure that the heel cup (rear of orthotic) is all the way to rear of the shoe.

For full length orthotics, trimming the soft front portion of the orthotic may be necessary to fit in your shoe. You can easily trim them using sharp scissors, and tracing the orthotic to match the removable factory insole or liner in the shoes you previously removed. If you cut these too short, they will need to be sent back to the lab for an adjustment.

DEVICE CARE

Orthotics may be cleaned with soap and cool water. Do not use warm or hot water on the orthosis, as this may distort the devices or loosen the top cover adhesive. Avoid submerging the devices in water.

Sometimes orthotics squeak. To eliminate this, sprinkle a small amount of talcum powder in your shoes and/or a little paraffin wax to the edge of the orthotics. This will eliminate the friction that causes the squeak.

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FOLLOW-UP

At the completion of the 1-2 week break in period and with consistent use, you should follow up with your physician. This helps evaluate if adequate control is being obtained and that the prescription is correct to address your specific symptoms. Simple adjustments can be made during this initial period for increased comfort and tolerance. It is important to return for this check-up so that the adjustments can be made during the initial warranty period.

After the break-in period, the most common concern is that the orthotic is too high or too hard. If you are unable to adjust to wearing the orthotics for a full day after the break-in period, the orthotics may need more correction than what is originally prescribed. In some circumstances we do add changes or make modifications to the prescription in order to adjust for more correction or comfort. **Do not expect more than a 20-30% improvement of your symptoms in the first 3 weeks.** In some cases there are additional therapies that may be employed during this initial period.

ADDITIONAL ORTHOTICS

Once we are confident that your orthotics are comfortable and function normally to improve your symptoms, you may wish to order additional pairs to accommodate various types of shoes. Most commonly this employs an aggressive pair and a 'dress' pair. There are also specific orthotics that may work well specific to sporting activities, such as golfing, cycling, or hockey skates.

EXTENDED WEAR

We expect that most patients will wear their orthotic between 50-60% of their walking or standing hours, which should include exercise, and work or school. We expect that the remainder of the time will be spent without the orthotics, but obviously more wear of the orthotics is beneficial.
Most orthotics last between five and seven years, while some patients wear them much longer. We recommend that you change the orthotic after five years if you are very active and athletic with the devices. The fabric on the top of the orthotics will wear to a point in which these materials will need to be replaced, usually within one to two years. The cost for refurbishment ranges from $30-$60.
Please feel free to call our office if you have any questions or concerns regarding your orthotics. We hope you enjoy your new orthotics and that they improve your activity and function.

Sincerely,

John Sharp, Marc House, and staff