Diagram 1

Turn on by pressing control knob. Click and turn up level a little before doing 3 button trick

3 BUTTON TRICK
1. Press and hold control knob
2. Press pause and test buttons
3. Let all three go.

Start

Put the ODFS Pace into SETUP MODE using three button trick

Find the head of fibula

If skin is dry, moisten with water
If skin is greasy clean with an alcohol wipe

Place electrodes in standard position
Patient should be seated with leg supported with and extended knee

Select NEW SETUP?
Select DROPPED FOOT
Select HEEL RISE
Set the OUTPUT CURRENT

Increase the current until dorsiflexion with eversion is seen. The pulse width is set automatically to 50%

Correct movement Dorsiflexion with eversion?
Yes / No

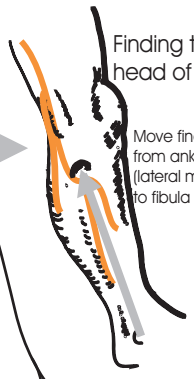
Sensation OK?
Nearly / No / Yes

If you nearly have sufficient dorsiflexion and eversion try walking anyway. Often the level can be increase when standing as sensation is often reduced

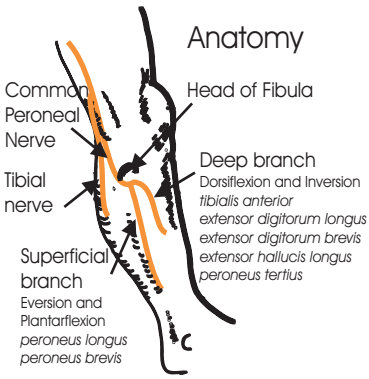
Correct movement Dorsiflexion with eversion?
Yes / No

Use exercise stimulation. building up level day by day until acceptable 2x20min a day for 1 month

Finding the head of fibula



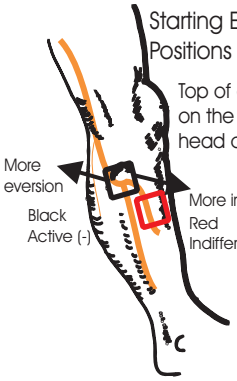
Anatomy



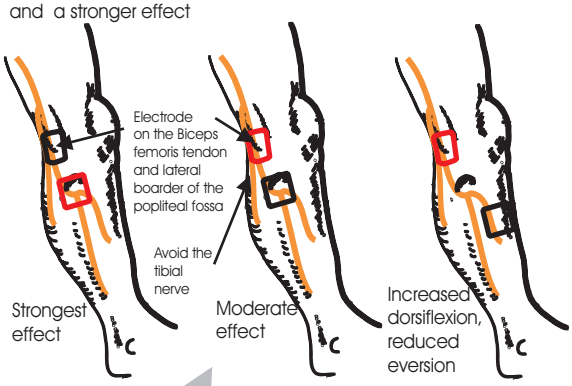
Press and release the test button. Repeat as required

The current can only be turned up while the LED flashes. Can turn down at any time.

Starting Electrode Positions



Popliteal Fossa position for the withdrawal reflex (knee flexion) and a stronger effect



Too much inversion?
Move the active electrode (black lead) backwards and upwards about 1cm
Still too much inversion?
Move active electrode (black plug) to popliteal fossa

Too much eversion?
Move the active electrode (black lead) forwards and downwards about 1cm
Still to much eversion?
Swap the active (black plug) and indifferent (red plug)

Eversion but no dorsiflexion?
Increase stimulation level

Weak response?
Increase current
Move active electrode (black plug) to popliteal fossa
Increase OUTPUT FREQ
8th menu option OUTPUT FREQ.

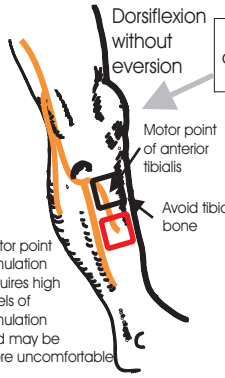
Spastic calf reduces ROM or causes clonus spasm?
Increase rising edge ramp NB ramp must be quick enough to pick up the foot in walking
2nd menu option RISING RAMP
Increase in 50ms steps

Reduced knee flexion, calf co-contraction
Reduce Stimulation frequency

Increase in 50ms steps

Still too much eversion?
Put active (black plug) on to the motor point of Tibialis Anterior

Dorsiflexion without eversion



To much inversion?
Change waveform to Symmetrical Biphasic

Correct movement Dorsiflexion with eversion?
No → Repeat analysis and try again
Yes

If the correct movement is still not achieved the ODFS Pace may not be a suitable treatment for this Patient

If still a problem use an exercise stimulator 2 x 20 min a day for 1 month

Prepare for walking
Go to diagram 2
(Stay in set up mode)

7th menu option
OUTPUT WAVEFORM