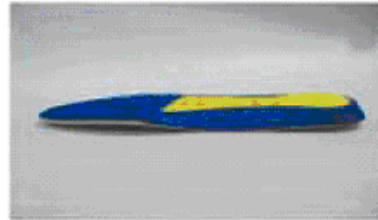
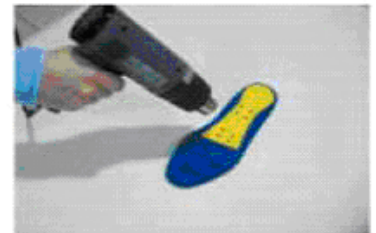
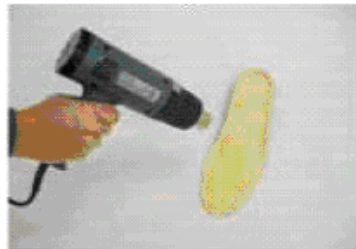


Dr. Comfort Elite Insert Direct Molding Technique

First and foremost, verify that the insert is the correct size for the patient's foot and that it matches the size of the Dr. Comfort extra depth shoe. During the direct molding process, the patient may be seated or standing.



Dr Comfort Elite Insert



1. Heating Process (please wear heat-resistant gloves!!)

- HEAT GUN: using a heat gun at a minimum of 230 degrees Fahrenheit, heat the prefabricated insert on the top and the bottom of the device until it is soft and malleable (approximately 2-4 minutes)
- OVEN: heat the convection oven to 250 degrees Fahrenheit and place the device until it is soft and malleable (approximately 1-2 minutes)

Both heating methods normally take a few minutes maximum per insert. DO NOT place inserts in the microwave!! Word of Caution: do not heat the inserts to a point where they can be dangerous to the patient!!

2. Positioning the Patient's Foot for the Molding Process

- Cover the patient's foot with a sock or other protective material
- Place the heated insert on a foam block that is a minimum of two inches thick
- Position the patient's foot on top of the heated insert
- Molding the prefabricated insert:
- Have the patient step down on the insert (standing or sitting)
- Allow the insert to mold to the patient's foot and arch while the insert is warm
- Remove the patient's foot from the insert after the insert has cooled down (approximately 2 minutes)



3. Checking for total contact after molding:

- Remove the insert from the foam block and place on the floor
- Position the patient's foot on top of the molded insert
- Check to see if the arch on the insert is high enough to achieve total contact with the weight bearing surface of the foot including the arch



4. Modification of the device to achieve total contact

- a. The EVA base (blue material or sometimes beige colour) of the Dr. Comfort insert will maintain its shape (just mouldable)
- b. In the case of a patient with a high arch or a heavy patient, you may determine that additional support material should be added under the arch for support
- c. Glue (cyanoacrylate preferred – such as in Dermabond or Traumaseal, Super Glue or Krazy Glue – although Barge cement is ok) the appropriate size latex, poron, sponge rubber or molded rubber scaphoid pad (longitudinal arch pad) onto the bottom of the EVA
- d. The pad may be cut or tapered for better fit and comfort
- e. Once complete, check to see that you have a properly fitted insert



Placing pad on the arch for support.



Proper location.



Insert with arch support

Additional Protection for pre-ulcerative site or healing site

- a) Cut a piece of 1/8" rubberized cork, slightly larger than the diameter of the lesion, or the area to be protected
- b) Tape this piece of cork directly to the foot of the patient, on the area that you want to provide extra protection;
- c) Put the sock on the patient's foot and heat the insert as previously described, utilizing the heat gun or oven method
- d) Place the warm insert on the molding pad; have the patient step down on the insert for about 30 seconds
- e) Verify that the depression matches the lesion site

In this manner, the cork taped to the site on the foot will create a deeper depression into the Plastazote® material. You have just offloaded the site without adding any extra loading or pressure to the adjacent sites. This molded insert is now an accurate match to the patient need.

To remove the cork and tape from the bottom of the foot, it is important to begin at the area closest to the toes, and gently push the skin away from the tape, remove the tape and cork from the top, down toward the heel. NEVER start at the bottom and go upwards, as that could cause the skin to tear. It is advisable that only a licensed health practitioner (podiatrist, chiroprapist, pedorthist, orthotist) apply and remove the cork and tape from the patient's foot.