

THE **Richie**
BRACE®
RESTORING MOBILITY

Restoring mobility for
thousands of patients...
for over 25 years.



PRODUCT CATALOG

The Richie Brace® has become
the gold standard in AFO therapy,
helping you provide the quality
of life your patients deserve.



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Introduced to the medical community in 1996, The Richie Brace® has revolutionized the conservative approach to the most challenging pathologies treated by the foot and ankle specialist.

Additional AFOs have been designed and added to the Richie Brace® family of products to address a wide-range of conditions, patient needs and activity levels.

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Richie Brace® (Standard)

With a contoured balanced orthotic footplate articulated to adjustable semi-rigid lower leg uprights, the Richie Brace® is ideally suited to stabilize rotational forces at the midtarsal, subtalar and talo-Crural joints. Modifications are available to add further restriction of motion in the sagittal, frontal or transverse plane.

The Richie Brace® is lighter than most other AFOs. The leg uprights are designed to leave the front and back leg areas open for air flow and comfort. Once donned, the patient is hardly aware it is on.

CLINICAL INDICATIONS

- PTTD (mild-to-moderate)
- Lateral ankle instability
- Peroneal tendinopathy
- Cavo-varus deformity

AFO FEATURES

- Custom balanced foot orthotic
- Standard 35mm heel cup fits into the bottom of the heel counter of the shoe
- Anatomic ankle axis hinge placement
- Semi-rigid lower limb supports
- Control of first ray, midtarsal, and subtalar joints
- Control of calcaneal inversion/eversion
- Pure, unrestricted sagittal ankle motion

Leg uprights positioned for maximum comfort and shoe fit.

Anatomic ankle axis hinge placement

Custom-balanced, contoured orthotic footplate.

Medial and lateral placement of limb uprights do not affect shoe fit. The Richie Brace® can be applied and removed by adjusting a single strap.



Richie Brace® Dynamic Assist

CLINICAL INDICATIONS

The Richie Brace® Dynamic Assist is indicated for the stabilization of the foot and ankle in patients with weakness of the dorsiflexor and evtor muscles of the lower leg. This presentation may be the result of:

- Post-CVA (stroke)
- Mild muscular dystrophy
- Charcot Marie Tooth Disease
- Post-spinal cord surgery
- Diabetic neuropathy

The brace can be used if patient has:

- Partial or complete dropfoot
- Abducto-varus foot deformity
- Diabetic Charcot deformity without severe equinus
- Body weight over 200lbs

Contraindications

- Spasticity of plantar flexors or invertor muscle groups
- Moderate to severe varus/valgus deformity of hindfoot
- Severe equinus (ankle dorsiflexion zero degrees or less)
- Unstable knee

AFO FEATURES

- Custom balanced foot orthotic
- 35mm heel cup
- Anatomic ankle axis hinge placement
- Tamarack flexural ankle joints
- Dynamic dorsiflexion-assist provides up to 15° of dorsiflexion
- Semi-rigid lower limb supports
- Pure, unrestricted sagittal ankle motion
- Control of varus/valgus alignment of the foot

• Tamarack™
Dorisflexion Assist
Flexure Joints



Custom-balanced,
contoured orthotic
footplate.



Upon Request: Fixed backstrap
for additional control of
dropfoot conditions.



Richie Brace® Restricted Hinge

CLINICAL INDICATIONS

- PTTD (moderate-to-severe w/ subluxed TN Joint)
- Dropfoot (equinus Severe varus/valgus; weak calf)
- DJD (ankle or rearfoot w/ dropfoot & spasticity)
- Peroneal Tendinopathy (order with lateral arch suspender)
- Lateral Ankle Instability (severe; order with lateral arch suspender)
- Peroneal Nerve Injury (fixed varus in hindfoot/ankle; order with lateral arch suspender)

AFO FEATURES

A more rigid ankle articulation restricts ankle dorsiflexion and plantarflexion to a range under 5° without disrupting a smooth contact and heel rise phase of gait.

Arch Suspenders

The **medial arch suspender** provides an adjustable lifting strap under the talo-navicular joint to resist collapse of the medial arch as well as eversion of the ankle and hindfoot.

The **lateral arch suspender** provides an adjustable lifting strap under the calcaneal-cuboid joint to resist inversion of the ankle or hindfoot.



*Medial
Arch Suspender*

Lateral Arch Suspender

Richie Brace[®] California AFO

CLINICAL INDICATIONS

- PTTD (severe; stage IV)
- DJD (severe)
- Charcot Arthropathy
- Ankle deformity

AFO FEATURES

- Custom molded shell
- Adjustable leather closure over tibia and forefoot
- Patented Medial or Lateral Arch Suspender[®]
- Rearfoot stabilizing post
- Continuous single strap closure; no laces
- Total restraint of foot and ankle movements
- Self-adjusting arch support
- Prevents medial/lateral instability

Continuous single strap; no laces

Patented medial or lateral arch suspender

Rearfoot stabilizing post



Richie Brace[®] Solid AFO

CLINICAL INDICATIONS

- Dropfoot (fixed equinus; knee instability; spasticity; weak calf)
- Charcot Arthropathy

AFO FEATURES

- Traditional full leg posterior shell
- Rearfoot post
- Correction of varus/valgus forefoot deformities
- Comfort & accommodation of plantar lesions
- Balanced functional orthotic footplate
- Extended forefoot padding
- Control hindfoot inversion/eversion

Traditional full-leg posterior shell

Extended forefoot padding

Rearfoot post

Balanced functional orthotic footplate



Richie Brace® Gauntlet

CLINICAL INDICATIONS

- PTTD (stages III and IV)
- DJD (severe)
- Hindfoot Deformity
- Charcot Arthropathy


AFO FEATURES

- Custom molded AFO shell
- Medial or Lateral Arch Suspender®
- Legitimate Varus/Valgus control of hindfoot
- Rearfoot stabilizing post
- Non-weight bearing cast provides better heel and arch contour
- All casts intrinsically balanced to correct forefoot varus/valgus deformities

Suggested Billing Codes

L1940 Solid AFO Shell
L2275 Varus/Valgus Control
L2330 Lacer
L2820 Soft Interface

For more billing and coding guides, as well as helpful resources to ensure compliance, visit www.richiebrace.com/billing-and-coding



Medial and Lateral
Arch Suspender



Rearfoot stabilizing post

Richie AeroSpring Bracing System®

A new and improved Richie AeroSpring system replaces walking boots and treats a variety of lower extremity pathologies.

It's simply the best solution.

CLINICAL INDICATIONS

Achilles Offloading System

- Tendinopathy of the Achilles tendon
- Post-surgical and non-surgical management of the Achilles tendon rupture

Plantar Fascia Offloading System

- Severe recalcitrant plantar heel pain syndrome

Midfoot Offloading System

- Treatment of sprain of the tarsometatarsal (TMT) joints
- Treatment of degenerative arthritis of the midfoot joints

Dropfoot Stability System

- Neurologic conditions resulting in foot drop or loss of posterior lower leg muscle strength

AFO FEATURES

- Carbon fiber ankle foot orthosis – controls ankle joint dorsiflexion and load on the Achilles tendon
- Custom functional foot orthosis (1 pair) – controls rearfoot pronation
- Patented “Richie ArchLock” – offloads the medial-central band of the plantar fascia



Richie Brace® OTC

CLINICAL INDICATIONS

- Acute ankle sprain
- Tendinopathy of the foot or ankle

AFO FEATURES

- Prefabricated orthotic footplate in 4 sizes
- Full flexion ankle joints or restricted hinge ankle options
- Adjustable Velcro strap closures
- Interim brace before custom AFO

Richie Brace® OTC Dynamic Assist

CLINICAL INDICATIONS

- Dropfoot secondary to CVA or nerve injury
- Mild muscular dystrophy
- Diabetic neuropathy
- Charcot-Marie-Tooth Disease

AFO FEATURES

- Tamarack™ dorsiflexion assist flexure joints
- Prefabricated contoured orthotic footplate
- Lightweight adjustable leg uprights
- Interim brace before custom AFO



Ordering

After 25 years, 16 of the best orthotics companies in the nation share and support the Richie Brace®. Why?

They recognize the best product for their customers.

All Richie Brace® products, parts and services are available to health care providers only and must be ordered through one of the authorized distributors.

For a complete distributor listing, please visit www.RichieBrace.com

The Richie Brace® distributors have trained client service personnel who can help you with every aspect of Richie Brace® treatment from providing casting instructions, clinical indications as well as coding and reimbursement information.

The Richie Brace® is only available in the U.S.A., Canada, Ireland, United Kingdom, Spain and Australia.

Order Forms: Order forms must be obtained from any of our authorized distributors. All casts and order forms must be submitted to an authorized distributor.

Price List: Pricing for all Richie Brace® models are provided to practitioners only and can be obtained by contacting a lab distributor below. Patients can learn about cost and insurance reimbursement for the Richie Brace® by contacting their specialist.

Replacement Parts and Brace Refurbishments: Are provided to all health care providers by our lab distributors. We do not sell parts to patients.

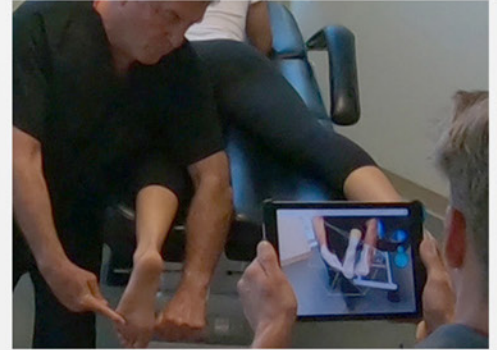
Patients with existing braces are encouraged to see their original dispensing health care provider to obtain these products and services.

Casting

Casting with precision is essential for a proper patient fit.

No matter which of the three accepted casting methods you choose (plaster splints, STS socks, digital scanning with iPad Structure Sensor), we have the training tools to assist you.

Digital casting tutorial, as well as other helpful casting tools can be found at www.RichieBrace.com



PLASTER CASTING



- Foot held 90° dorsiflexed
- Mark foot according to printed instructions



- Apply plaster strip #1
- Form a slipper cast with splint #2



- Complete with splint #3 and lay over the tip of the toes



- Lock midtarsal joint and plantarflex the first metatarsal
- Remove cast following proper guidelines

STS SOCK CASTING



- Lay down cutting channel
- Place plastic bag over foot and leg
- Apply STS sock following instructions carefully



- Mold sock
- Lock midtarsal joint and plantarflex the first metatarsal

Treatment Guide



Richie Brace® Standard

- Mild to moderate PTTD
- Lateral ankle instability

Casting Sock Size: Ankle



Richie Brace® Restricted Hinge

- DJD of ankle or rearfoot
- Dropfoot (mild)
- Dropfoot with varus/valgus deformity
- Dropfoot with spasticity
- Unstable knee

Casting Sock Size: Ankle



Medial Arch Suspender

- Moderate to severe PTTD
- Stage II or III PTTD with subluxed T-N Joint

Casting Sock Size: Ankle



Lateral Arch Suspender

- Peroneal tendinopathy fixed varus deformity of hindfoot/ankle
- Severe lateral ankle instability

Casting Sock Size: Ankle



Richie Brace® Dynamic Assist

- Ideal brace for dropfoot
- Cannot be used in: equinus, spasticity and unstable knee or significant frontal plane deformity (varus, valgus)

Casting Sock Size: Ankle



California AFO

- Severe deformity: stage IV PTTD
- Charcot deformity
- Severe DJD of ankle or hindfoot

Casting Sock Size: Mid-leg



Solid AFO

- Severe dropfoot - spasticity
- Charcot arthropathy
- Dropfoot with unstable knee

Casting Sock Size: Full-leg (Bermuda)



Gauntlet

- Rigid, non-reducible adult acquired flatfoot (stage III & IV)
- Severe DJD or deformity of hindfoot
- Charcot arthropathy

Casting Sock Size: Mid-leg



Richie Brace® OTC

- Acute ankle sprain
- Tendinitis of ankle

No Casting. Order S, M, L, XL



Richie Brace® OTC Dynamic Assist

- Paralysis or weakness of ankle muscles
- Peroneal or tibialis anterior tendinopathy

No Casting. Order S, M, L, XL