

QUICK RELEASE SPIRING ASSIST DOBBS BAR

Model QDCB Small and Regular

Indications for Use:

After your child's foot has been corrected, the Dobbs Bar foot abduction brace prevents relapse by holding the foot in the corrected position.

NOTE: Never apply this brace to an uncorrected foot. The brace does not correct clubfoot, it only holds the correction achieved by the Ponseti Method of treatment (a method that uses a series of serial cast to gradually correct clubfoot).

Instructions for Use:

The Dobbs Bar should be worn 23 hours a day for the first 3 months and then at nighttime and naps for 2 to 4 years. Bracing is critical in maintaining the correction of clubfeet. If the brace is not worn as prescribed, there is a near 100 percent recurrence rate.

Warnings and precautions:

Never use Loctite or other superglue-based thread lock on the screws in the Dobbs Bar. The superglue/Loctite will react with the polycarbonate plastic and cause the plastic to weaken and break.

Setting Up the Dobbs Bar

Setting the bar width:

The Dobbs Bar should be set so that the width of the bar is equal to the shoulder width of the child. Measure the shoulder width of the child from the left outside shoulder to the right outside shoulder. Adjust the length of the Dobbs Bar so that the length of the bar is equal to your shoulder width measurement from mid-heel of the left footplate to mid-heel of the right foot plate. It is better to have the bar a little wider than shoulder width rather than too narrow. It is uncomfortable for the child if the bar length is too narrow.

Using the hex key provided in the package, loosen the hex head screws on the center clamp and slide the width of the bars open until they match the shoulder width of the child. Once the width is correct, retighten the hex head screw(s) to lock the bars firmly in place.

Setting the external rotation:

The affected foot or clubfoot should be set at 60 degrees of external rotation, the none affected side should be set at 30 degrees or external rotation. For bilateral clubfoot both feet should be set to 60 degrees. The angle of external rotation should match the degree of external rotation achieved in the last cast. For example, if the physician was only able to correct the affected foot to 50 degrees then the brace should also be set to 50 degrees. *Loosen the Hex head screw in the center of the black swivel arm and rotate the red "Y" piece outward until the pointer on the black swivel arm lines up with the correct degree setting on the red "Y" piece. Retighten the screw to lock in the desired angle of external rotation.*

Attaching the foot plate to the shoes/AFO:

Attach the black foot plate to the bottom of the Markell shoes/AFO by lining up the two countersunk holes in the black foot plate with the two holes on the bottom of the shoes. Using the standard head screws provided,

first tighten one screw halfway, then tighten the other screw completely. Then go back and tighten the first screw all the way.

Using the quick disconnect feature:

Once the foot plate is attached to the shoes, slide the black foot plate onto the two red clips and slide the foot plate forward to engage the spring plunger and lock the shoes in place. To release the shoes, pull the spring-loaded plunger while pushing the plate backwards towards the child's heel.