



Access Ability

Premier Issue

Ability Prosthetics and Orthotics, Inc. www.abilitypo.com

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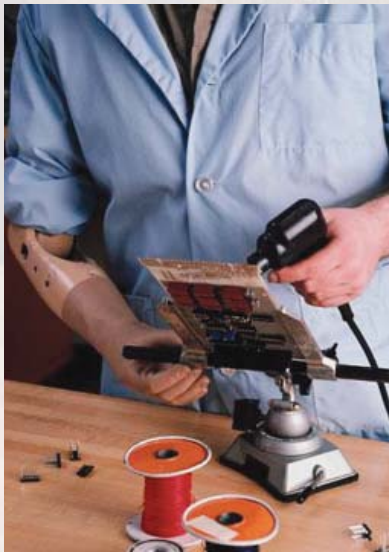
FACTS

At least 3 million people living in the US have lost a limb.

Men are more likely to have fractures before age 45; after that, fractures are more common among women.

Over 20.8 million people in the United States have diabetes but nearly one-third are unaware they have the disease.

Proper footwear is important, as the average person walks 4 miles every day (or about 115,000 in a lifetime).



HELPFUL RESOURCES

www.abilitypo.com

www.oandp.com

www.amputee-coalition.org

www.diabetes.org

www.aopanet.org

INTRODUCTION

Introducing the Ability Prosthetics and Orthotics, Inc. Newsletter, *Access Ability*

In our continued effort to increase awareness of orthotics and prosthetics, we will be producing this semi-annual bulletin targeted for physicians, therapists and patients alike. Our hope is that the relevant information, facts and resources provided in this newsletter will allow you to further access Ability.

Jeffrey M. Brandt, CPO
CEO, President

Jeffrey T. Quelet, CPO
Vice President



ASK ABILITY

Off-Loading Knee Bracing: Better Than Ever!

Q: Are there effective orthoses to off-load an osteoarthritic knee?

A: Yes! There are many new orthoses for this condition and designs continue to evolve and improve. These orthoses are either custom molded or prefabricated and range from functional to accommodative/supportive designs, depending on many variables, such as varus or valgus angle severity, flexibility of the deformity, limb girth, patient girth, patient activity level and compliance.



Many off-loading knee orthoses mechanically reduce the amount of lower extremity adduction or abduction at heel strike during the gait cycle. This reduction of angulation just prior to heel strike increases condylar separation and hence, reduces pain. Up to 73% of patients report decreased pain as a result of condylar separation, or off-loading.

Off-loading knee orthoses are primarily indicated for use in patients with osteoarthritis who are either non-surgical candidates with degenerating knee compartments or surgical candidates delaying total knee replacement. Additionally, tibial plateau fractures are sometimes managed with off-loading knee braces. Please contact Ability for more information about today's newest designs.

ABOUT ABILITY

While working together as interns in the orthotics and prosthetics field, we dreamed of creating an O & P company that would break the traditional mold by offering a strong commitment to patient and physician satisfaction through top-notch service, education and compassion.

In 2004, our dream became reality. Ability Prosthetics and Orthotics, Inc. opened in Gettysburg and was awarded ABC-accreditation shortly thereafter. Within the first year, increased demand necessitated the opening of a second office in Hagerstown, Maryland. This year, we will be opening a third office in Frederick, Maryland.



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Since its inception, Ability has secured hospital privileges at Wellspan Gettysburg and Summit Health Waynesboro in PA, Washington County in MD and Martinsburg City in WV. We are the preferred provider for over thirty insurance companies and are actively securing additional contracts.

This section of the newsletter will provide information about our continued growth and development, as well as happenings within our company. We welcome comments, concerns or suggestions regarding this bulletin and/or your Ability experience.

To learn more about Ability, our locations, our experience and our commitment to patient care, please view our website, www.abilitypo.com.

GETTYSBURG: 717.337.2273

HAGERSTOWN: 301.790.3636

FREDERICK: 301.698.4692

ACHIEVE ABILITY

Necrotizing Fasciitis (NF) is an infection caused by the Strep A bacteria that is sometimes life-threatening because it destroys soft tissue. Progression of the infection is rapid; it is associated with an approximate 20% mortality rate. A prompt diagnosis allows for effective treatment through antibiotics and removal of affected tissue, often involving amputation.

When our patient with NF began physical therapy, one of the rehabilitation challenges was to effectively fit him with custom compression garments to reduce swelling and promote continued wound healing. Due to large amounts of soft tissue removed from his lower limb, this job was challenging. A prosthetic restoration sleeve had to be fabricated to “fill-in” the

limb shape, so that once in place, compression stockings could be fit.

As shown, the sleeve wraps around the limb for easy application and is secured by straps. The urethane is covered by a thin layer of lycra, which allows for controlled stretching and prevents the urethane gel from tearing. With this system, the patient has completed therapy and is doing well.

