

Custom Orthotic Case Study #1



Practitioner:
Dr. Jenny Sanders, DPM

Patient:
60 year old male

Chief Complaint:
Functional Hallux Limitus

MEDICAL HISTORY:

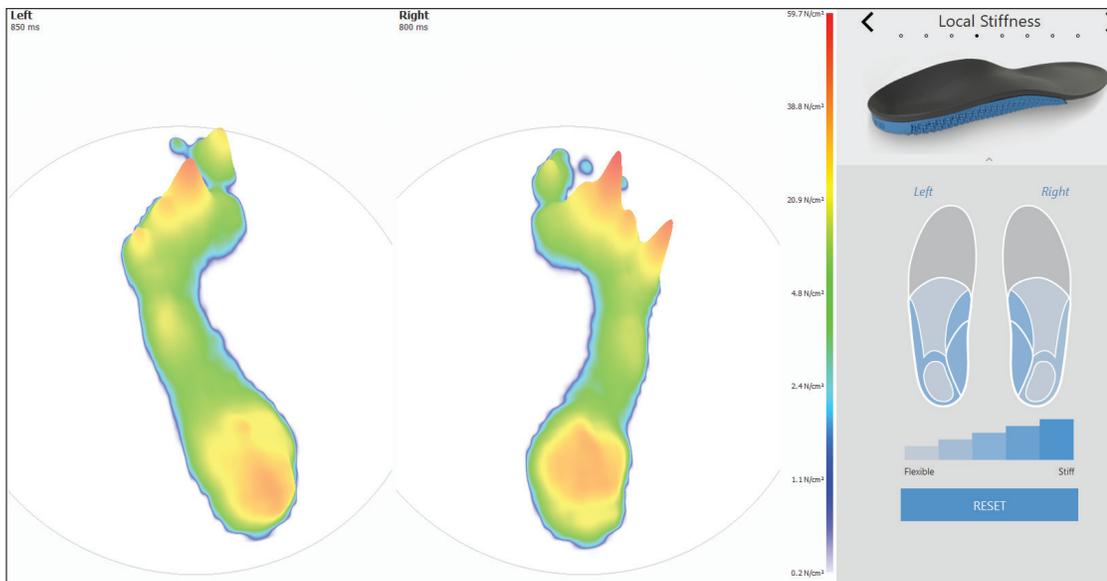
Patient has functional hallux limitus bilateral. He had been wearing orthotics from another prominent orthotics lab for years, and the orthotics had reduced his pain but never alleviated it completely.

CLINICAL / FITSTATION EXAM:

Patient has functional hallux limitus 1st ray bilateral.

PRESCRIPTION:

See images of the unique ability to utilize regional stiffness changes in the Go4D orthotic below on the right. Images on the left show in 3d how minimal the pressures are sub 1st MPJ which usually signifies hallux limitus of some extent, either arthritic or functional.



Final:

Go 4-D orthotics immediately eliminated pain and continue to eliminate 1st MPJ pain with extended walking. Using Go4-D orthotics for 5 months without symptoms.

Custom Orthotic Case Study #2



Practitioner:
Dr. Paul Ross, DPM

Patient:
65 year old female

Chief Complaint:
Post Operative Heel Pain

MEDICAL HISTORY:

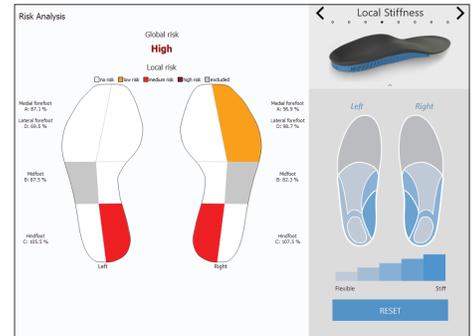
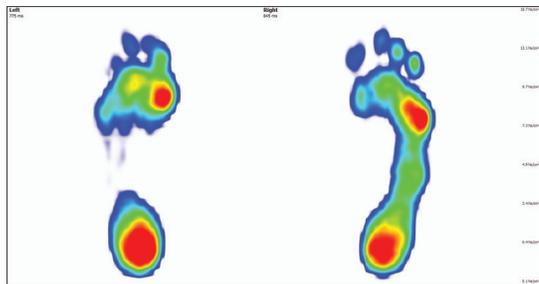
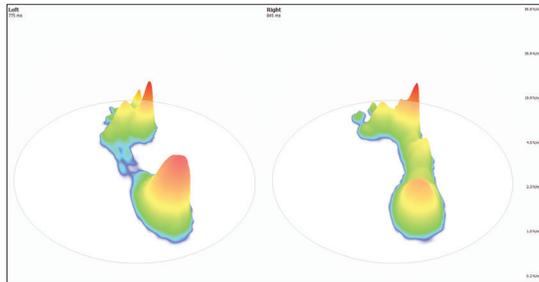
Chief Complaint: Initially seen with history of RT heel pain greater than 6 months.

She had previous reconstructive rear foot surgery in December 2017 and was not able wear any type of orthotic device fabricated previously as it was causing pain on ambulation.

Her RT heel pain was getting worse after previously prescribed physical therapy and steroid injection. On her initial visit she was diagnosed with chronic insertional plantar fasciitis and calcaneal bursitis.

On a follow up visit we did scanning and pressure mat evaluation for fabrication of Go 4-D orthotics which were subsequently dispensed

PRESCRIPTION:



Final:

When she was next seen she was nearly pain-free and very satisfied with her Go4D orthotics as she was unable to wear any type of devices prior to this.

Custom Orthotic Case Study #3



Practitioner:
Dr. Bruce Williams, DPM

Patient:
20 year old division 1 female athlete (400 meter sprinter and scholarship athlete)

Chief Complaint:
Status Post Bilateral Navicular Fracture

MEDICAL HISTORY:

Recent history of fracture and surgical repair of bilateral naviculars

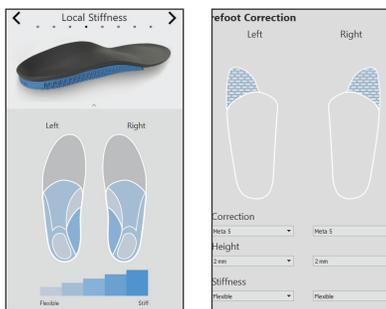
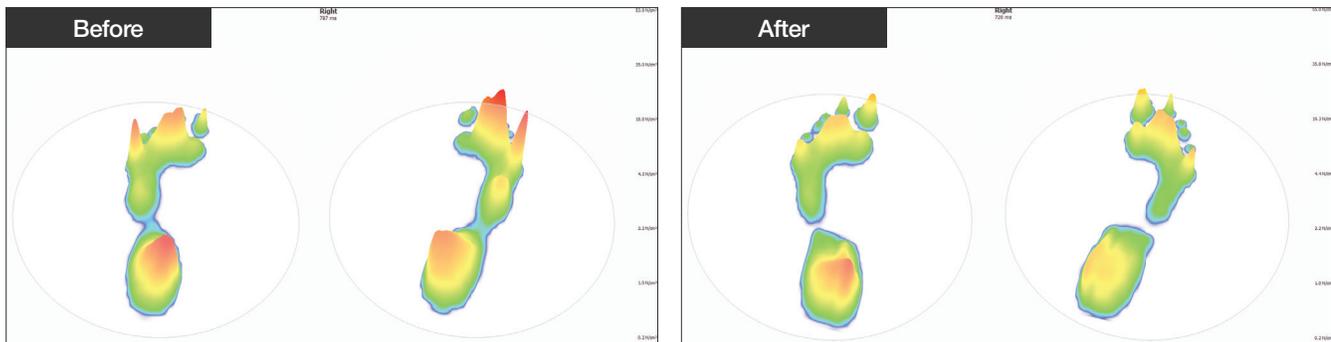
Recent late 2018 history of pain that started over a very short time and lead to significant pain, swelling and inflammation without source of acute trauma. They did an MRI that showed fracture of the navicular of both feet. She is now post-surgical screw repair from 02/2019 of the naviculars bilateral and is rehabbing, preparing to return to run and train.

I USED A TEST PROCESS WITH THIS ATHLETE:

We did initial pressure mapping exam along with physical exam and video analysis in-office. Then I decided on a test prescription and used low-dye taping and felt to mimic the prescription I wanted to use for her and then re-tested her again.

ORTHOTIC PRESCRIPTION:

Orthotics are made for her to minimize the dorsal motion of her 1st ray due to her functional hallux limitus and ankle joint equinus. We utilized heel lifts bilateral due to her limited ankle joint dorsiflexion ROM, or ankle joint equinus and decreased the stiffness of the orthotic under her 1st ray to a 1 out of 5, with 5 being the stiffest. The grey images show her orthotic prescription and stiffness values in the segmental regions of her orthotic device.



Final:

You can see on the left the after images with testing of the athlete's orthotic prescription using tape and felt padding for heel lifts, wedging, etc. The before images show much higher heel and forefoot pressures pre-treatment. The after images show how the athlete functioned with the taping and padding in place. She had significant decrease in her heel and forefoot pressures bilateral.