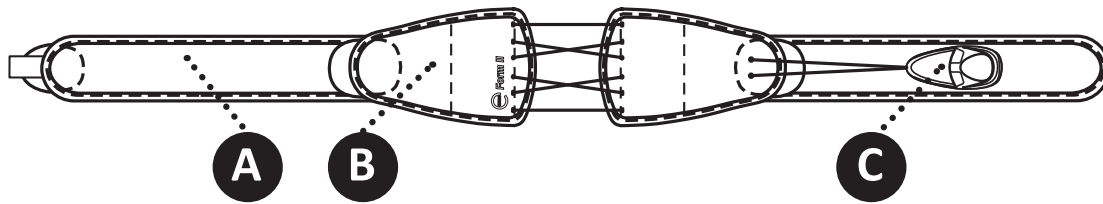




Spine Bracing System

PATIENT APPLICATION INSTRUCTIONS

EXOS FORM™ II 621



Application of Brace:

1 LOOSEN BRACE by detaching the Pull Tab (C) and pull Rear Panel Section (B) in opposite directions.



3 TIGHTEN BRACE by grasping Pull Tab and pulling away from body. Secure Pull Tab to Belt Wing.



2 APPLY BRACE by centering Rear Panel Section just above buttock crease. Wrap Belt Wings (A) in front about 1" (2.5 cm) above widest part of hips and secure hook and loop.



BRACE REMOVAL: Detach Pull Tab from Belt Wings so tension becomes loose. Detach the hook and loop connection on Belt Wings and remove belt.

USE AND CARE (CLEANING & STORAGE INSTRUCTIONS): Hand wash in cold water, less than 86°F (30°C), using mild soap. Air dry. NOTE: If not rinsed thoroughly, residual soap may cause irritation and deteriorate material. Do NOT iron. Do NOT expose to heat over 120°F (49°C). Do NOT tumble dry. Do NOT bleach.



For more information including application videos, please visit DJOGlobal.com/products/exos/exos-form-ii-back-brace or call **888.405.3251**

MATERIAL CONTENTS: Nylon, Polyethylene, Polyester, Antimicrobial treated material, Polyurethane, Polyvinylchloride, Silicone, Elastic. **FOR SINGLE PATIENT USE ONLY. NOT MADE WITH NATURAL RUBBER LATEX.**

CONTRAINDICATIONS: Pulmonary, cardiovascular or skeletal conditions which have risk to be made worse as a result of compression and/or pressure; unstable, displaced fractures.

For product assistance, please contact Product Support at **1.888.405.3251** or email product.specialist@djoglobal.com

WARRANTY: DJO, LLC will repair or replace all or part of the unit and its accessories for material or workmanship defects for a period of six months from the date of sale. To the extent the terms of this warranty are inconsistent with local regulations, the provisions of such local regulations will apply.

Patented

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Individual results may vary. Neither DJO Global, Inc. nor any of its subsidiaries dispense medical advice. The contents of this brochure do not constitute medical, legal, or any other type of professional advice. Rather, please consult your healthcare professional for information on the courses of treatment, if any, which may be appropriate for you.

MKT00-4185 Rev B

Next Appointment:

Date: _____

Time: _____



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