Maximize Your Options
Maximize Your Outcomes

Stride Family
Stance Control Program

Whatever your experience with stance control happens to be, we have put together a dedicated team to help you every step of the way. We offer everything from online support and training, to personal one-on-one training at your facility working directly with you and your patients. Our program offers educational in-services at your facility with one of our clinical education specialists, or online in-services via WebEx™ to help you get started.

Education
Gary G. Bedard, CO, F.A.A.O.P
Clinical Education Specialist
Email: ggbsf@earthlink.net
Phone: (650) 349-0752

Engineering/Product Development
Nicholas LeCursi, Chief Technology Officer
Product Development
Email: NLecursi@beckerorthopedic.net
Phone: (800) 521-2192 ext. 3161

Technical Support/Central Fabrication
Rodger Broick
Technical Advisor
Email: RBroick@beckerorthopedic.net
Phone: (800) 521-2192 ext. 3150

Scan the QR codes above with your Smartphone to view our Stride videos.
Stride Component Selection

The following chart can be used to help you determine your patient’s compatibility with our Stride stance control systems. We also recommend you use our PreStride Assessment Orthosis to qualify patients.

If you would like to speak with one of our stance control experts, please complete and fax the Patient Assessment Form on the following page to either Becker Orthopedic or Becker Oregon prior to scheduling your private consultation. It will serve as a common point of reference for us to understand your patient and help us assist you in selecting the best product to suit their needs.

<table>
<thead>
<tr>
<th>LOCKING ANGLE AND MECHANISM</th>
<th>FULLSTRIDE™</th>
<th>STRIDE4™</th>
<th>SAFETYSTRIDE™</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requires full extension of the orthotic knee joint to engage positive lock</td>
<td>• 4 bar linkage mechanism provides stability when orthotic knee joint is fully extended</td>
<td>• Positive lock engaged when orthotic knee joint is fully extended</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Adjustable extension stop</td>
<td>• Internal one way clutch bearing will resist knee flexion at any angle</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Integral Extension Assist</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Optional Lock</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ANKLE R.O.M. (MINIMUM REQUIRED)</th>
<th>Sufficient (3-5°) ankle and/or forefoot movement to generate 4 mm of cable excursion</th>
<th>Sufficient (3-5°) ankle and/or forefoot movement to generate 4 mm of cable excursion</th>
<th>Sufficient (3-5°) ankle and/or forefoot movement to generate 4 mm of cable excursion</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>KNEE EXTENSION R.O.M. REQUIRED</th>
<th>Metal uprights can be contoured to accommodate contractures of 10° or less</th>
<th>Metal uprights can be contoured to accommodate contractures of 10° or less</th>
<th>Metal uprights can be contoured to accommodate contractures of 10° or less</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Adjustable extension stop allows fine tuning</td>
<td>• SafetyStride should be considered when patient fails to consistently achieve full knee extension prior to initial contact</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ANKLE STRENGTH</th>
<th>No requirement</th>
<th>No requirement</th>
<th>No requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>KNEE STRENGTH</td>
<td>No requirement</td>
<td>No requirement</td>
<td>No requirement</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>WEIGHT LIMIT</th>
<th>220 lbs. (A) / 140 lbs. (B)</th>
<th>220 lbs.</th>
<th>220 lbs.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>GENU VARUS/VALGUS</th>
<th>Yes</th>
<th>Yes</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>BI-LATERAL USE</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>KNEE JOINT ALIGNMENT</th>
<th>• Mobile varus and valgus deformities of the knee joint are not a contraindication. Knee joint should be realigned. Consideration should be given to KAFO design and rigidity to afford maximum control in coronal plane.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Fixed varus and valgus deformities less than 15 degrees require careful evaluation. Consideration should be given to KAFO design, side bar material selection and inherent rigidity to afford maximum control in coronal plane.</td>
</tr>
<tr>
<td></td>
<td>• Fixed varus and valgus deformities greater than 15 degrees are a contraindication.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>GENERAL HIP STRENGTH</th>
<th>• Ideally patient will demonstrate the ability to maintain hip stability while weight bearing with the knee stabilized in the Prestride Assessment Orthosis.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>HIP EXTENSOR WEAKNESS</th>
<th>Mild: Stride4 with internal extension assist or FullStride with 75N GX-Assist</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Moderate: Stride4 with internal extension assist or FullStride with 125N GX-Assist</td>
</tr>
<tr>
<td></td>
<td>Severe: FullStride with 175N GX-Assist, SafetyStride with 175N GX-Assist, or Stride4 with optional lock</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HIP FLEXOR WEAKNESS</th>
<th>Mild: Stride4 with internal extension assist or FullStride with 75N GX-Assist</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Moderate: Stride4 with internal extension assist or FullStride with 125N GX-Assist</td>
</tr>
<tr>
<td></td>
<td>Severe: FullStride with 175N GX-Assist, SafetyStride with 175N GX-Assist, or Stride4 with optional lock</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HIP ABDUCTOR WEAKNESS</th>
<th>Mild: Stride4 with internal extension assist or FullStride with 75N GX-Assist</th>
</tr>
</thead>
<tbody>
<tr>
<td>Note: Walking aid may be required in contralateral hand</td>
<td>Moderate: Stride4 with internal extension assist or FullStride with 125N GX-Assist</td>
</tr>
<tr>
<td></td>
<td>Severe: FullStride with 175N GX-Assist or SafetyStride with 175N GX-Assist</td>
</tr>
</tbody>
</table>
Patient Assessment Form

Today's Date: ___________________ Prescribing Physician: ___________________
Facility: ___________________ Account #: __________________ Orthotist: ___________________
Street: ___________________ City: ___________________ State: ___________________ Zip: ___________________
Phone Number: ___________________ Fax Number: ___________________

DATES: Assessment: ___________________ Delivery: ___________________ Follow-up: ___________________
Patient ID: ___________________ Affected Side: Left ☐ Right ☐ Bilateral ☐
Height: ___________________ Weight: ___________________ Age: ___________________ Gender: M ☐ F ☐
Diagnosis: ___________________ DX Onset: ___________________
Gait Description: ___________________

Center of Mass (COM): Anterior ☐ Neutral ☐ Posterior ☐
Previous type of orthosis (ankle joints, knee joints, trimlines): ___________________

Type of walking aid: ___________________
Treatment goal: ___________________

Proprioception: ___________________

Sensation: ___________________

Other circumstances (e.g. upper extremity weakness): ___________________

RANGE OF MOTION (Limits, specified, WNL, contracture)
Hip: ___________________ Knee: ___________________ Ankle: ___________________
Genu valgum: ___________________ ° Genu varum: ___________________ ° Genu recurvatum: ___________________ °
Ankle valgus: ___________________ ° Ankle varus: ___________________ °
Foot Progression Angle: Toe in: ___________________ ° Toe out: ___________________ °

MANUAL MUSCLE TESTING

<table>
<thead>
<tr>
<th>Left Leg</th>
<th>MMT ISOMETRIC GRADING</th>
<th>Right Leg</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hip Flexors: ___________________</td>
<td>5</td>
<td>Holds test position against maximal resistance</td>
</tr>
<tr>
<td>Hip Extensors: ___________________</td>
<td>4+</td>
<td>Holds test position against moderate to strong pressure</td>
</tr>
<tr>
<td>Hip ABductors: ___________________</td>
<td>4</td>
<td>Holds test position against moderate resistance</td>
</tr>
<tr>
<td>Hip Adductors: ___________________</td>
<td>4-</td>
<td>Holds test position against slight to moderate pressure</td>
</tr>
<tr>
<td>Knee Extensors: ___________________</td>
<td>3+</td>
<td>Holds test position against slight resistance</td>
</tr>
<tr>
<td>Knee Flexors: ___________________</td>
<td>3</td>
<td>Holds test position against gravity</td>
</tr>
<tr>
<td>Plantarflexors: ___________________</td>
<td>3-</td>
<td>Gradual release from test position</td>
</tr>
<tr>
<td>Dorsiflexors: ___________________</td>
<td>2+</td>
<td>Moves through partial ROM against gravity or moves through complete ROM gravity eliminated and holds against pressure</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>Able to move through full ROM gravity eliminated</td>
</tr>
<tr>
<td></td>
<td>2-</td>
<td>Moves through partial ROM gravity eliminated</td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>No visible movement; palpable or observable tendon prominence/flicker ctx</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>No palpable or observable muscle ctx</td>
</tr>
</tbody>
</table>
The PreStride is an evaluation tool that may be used in combination with a physical examination to assess candidacy for Stride stance control orthotic management.

The PreStride is a modular and fully adjustable stance control KAFO that may be fitted in a controlled clinical setting to most adults who are between 5’ 2” and 6’ 2” in height. The overall height of the orthosis is quickly and easily adjusted by releasing the spring loaded knobs located on the medial and lateral uprights. Calf and thigh bands are also easily adjusted for varying A-P depths.

The PreStride is available in two unique models: The original PreStride, Model 9007, and the PreStride4, Model 9008. The original PreStride, Model 9007, comes with FullStride™ stance control knee joints and an optional GX-Assist unit to accommodate individuals with significant weakness of hip musculature. The GX-Assist uses a pneumatic spring to assist in knee extension by mimicking the swing phase function of the quadriceps muscle group. Model 9007 also offers interchangeability with the SafetyStride™ stance control knee joint (sold separately), which has the ability of resisting knee flexion at any angle and does not require full 180° knee extension in order to lock.

The PreStride4, Model 9008, utilizes our new Stride4 stance control knee joints, which are comprised of a four bar linkage mechanism and offer (3) modes of operation: Stance control, free motion and locked with stance phase flexion. An integral extension assist spring housed within the midsection assists with knee extension, while an adjustable extension stop allows the clinician to adjust and fine tune the point at which the joint enters into its stable/locked state. A button on the Stride4 knee joint allows the clinician to switch between stance control and locked modes of operation. When the lock option is selected and engaged by the clinician, the joint will allow approximately 3° of flexion to provide some shock absorption to the patient.

An additional advantage of the PreStride is that it may be used as an effective gait training tool during rehabilitation.

We offer a full range of technical and clinical support for the successful implementation of stance control technology into your practice. Please see page 2 to learn more about our comprehensive program and how we can help you get into stride with stance control.
FEATURES
• Fully adjustable and easy to work with modular design
• Can assess potential patients for FullStride, SafetyStride, Stride4 and GX-Assist
• Accommodates patients from 5’ 2” to 6’ 2” in height
• Double action ankle joints for gait optimization
• One-piece rigid footplate stirrup assembly
• Removable and disposable padding
• Delivered completely assembled

INDICATIONS
• Quadriceps weakness or lack of knee control as a result of:
  ▪ Polio
  ▪ MS
  ▪ CVA
  ▪ Femoral Nerve and Incomplete SCI
  ▪ Inclusion Body Myositis
• Genu recurvatum

CONTRAINDICATIONS
• Patient weight greater than 220 lbs.
• Fixed varus or valgus deformity at the knee in excess of 15°
• Knee flexion contractures greater than 10°
• Knee hyperextension that cannot be controlled by the orthosis
• Substantial leg length discrepancy where the affected side is shorter
• Significant spasticity or tone in hip, knee or ankle musculature that is not controlled by the orthosis
• Insufficient ankle range-of-motion
• Significant impairment in the patient's cognition and/or motivation

AVAILABILITY
• The PreStride must be ordered directly through Becker Orthopedic

CODING
• The PreStride is not a prescription device and is designed for use in a controlled environment under clinical supervision as an assessment and therapy tool

PreStride Ordering Information

<table>
<thead>
<tr>
<th>Order No.</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>9007-R</td>
<td>PreStride - Right</td>
</tr>
<tr>
<td>9007-L</td>
<td>PreStride - Left</td>
</tr>
<tr>
<td>9007-P</td>
<td>PreStride - Pair</td>
</tr>
</tbody>
</table>

PreStride4 Ordering Information

<table>
<thead>
<tr>
<th>Order No.</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>9008-R</td>
<td>PreStride4 - Right</td>
</tr>
<tr>
<td>9008-L</td>
<td>PreStride4 - Left</td>
</tr>
<tr>
<td>9008-P</td>
<td>PreStride4 - Pair</td>
</tr>
</tbody>
</table>

Stride4™ Patent Pending
The FullStride is a mechanical stance control orthotic knee joint that utilizes a low-profile cabling system to automatically unlock at the end of stance phase. At the end of swing phase, when the orthotic knee joint reaches full extension, the locking mechanism re-engages to provide knee stability for stance phase.

When necessary, the stance control capability of the FullStride can be easily converted into a traditional automatic bail lock.

We offer a full range of technical and clinical support for the successful implementation of stance control technology into your practice. Please see page 2 to learn more about our comprehensive program and how we can help you get into stride with stance control.
FEATURES
• Automatic, mechanical locking and unlocking
• Flexible, adaptive, modular design
• Durable, straightforward components
• Cost effective
• Interchangeable with the SafetyStride and Stride4
• Available with aluminum, stainless steel or titanium uprights

INDICATIONS
• Quadriceps weakness or lack of knee control as a result of:
  ▪ Polio
  ▪ MS
  ▪ CVA
  ▪ Femoral Nerve and Incomplete SCI
  ▪ Inclusion Body Myositis
  ▪ Genu recurvatum

CONTRAINDICATIONS
• Patient weight greater than 220 lbs.
• Fixed varus or valgus deformity at the knee in excess of 15°
• Knee flexion contractures greater than 10°
• Knee hyperextension that cannot be controlled by the orthosis
• Substantial leg length discrepancy where the affected side is shorter
• Significant spasticity or tone in hip, knee or ankle musculature that is not controlled by the orthosis
• Insufficient ankle range-of-motion
• Significant impairment in the patient's cognition and/or motivation

FABRICATION
• Can be fabricated into a variety of orthotic designs including conventional metal and leather, composites and prepreg. To ensure that optimal joint alignment and function is maintained throughout the gait cycle, we recommend the use of inherently rigid materials when designing your FullStride KAFO.
• We strongly recommend that you select an ankle joint configuration that limits dorsiflexion and allows for accurate alignment of the foot ankle complex in the sagittal plane

AVAILABILITY
• The FullStride can be purchased as a kit through Becker Orthopedic, or fabricated into a variety of custom KAFO designs by Becker Central Fabrication

CODING
• We recommend you consider coding the FullStride with a base code of L2005. The responsibility of accurate coding lies with the patient care facility that is billing for the product and service. The HCPCS Alpha-Numeric System is subject to revisions and periodic updates and should be consulted prior to billing.
The FullStride is also available in our “B,” or youth size for smaller adults and adolescents. Offering a 25% reduction in weight to enhance the clinical application, the “B” size FullStride gives you additional possibilities in offering stance control to your patients.

The FullStride is a mechanical stance control orthotic knee joint that utilizes a low-profile cabling system to automatically unlock at the end of stance phase. At the end of swing phase, when the orthotic knee joint reaches full extension, the locking mechanism re-engages to provide knee stability for stance phase. When necessary, the FullStride can also be easily converted into an automatic bail lock knee joint.

We offer a full range of technical and clinical support for the successful implementation of stance control technology into your practice. Please see page 2 to learn more about our comprehensive program and how we can help you get into stride with stance control.

**FullStride™ - B Size**

### FullStride B Size Ordering Information

<table>
<thead>
<tr>
<th>Order No.</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>9006-B6</td>
<td>FullStride B Size Kit with Aluminum Uprights</td>
</tr>
<tr>
<td>9006-B6S</td>
<td>FullStride B Size Kit with Stainless Steel Uprights</td>
</tr>
<tr>
<td>322-B*</td>
<td>Custom FullStride B-Size KAFO</td>
</tr>
</tbody>
</table>

Step into the Stride Family
**Technical**

**FEATURES**
- Automatic, mechanical locking and unlocking
- Flexible, adaptive, modular design
- Durable, straightforward components
- Cost effective
- Available with aluminum or stainless steel uprights

**INDICATIONS**
- Quadriceps weakness or lack of knee control as a result of:
  - Polio
  - MS
  - CVA
  - Femoral Nerve and Incomplete SCI
  - Inclusion Body Myositis
- Genu recurvatum

**CONTRAINDICATIONS**
- Patient weight greater than 140 lbs.
- Fixed varus or valgus deformity at the knee in excess of 15°
- Knee flexion contractures greater than 10°
- Knee hyperextension that cannot be controlled by the orthosis
- Substantial leg length discrepancy where the affected side is shorter
- Significant spasticity or tone in hip, knee or ankle musculature that is not controlled by the orthosis
- Insufficient ankle range-of-motion
- Significant impairment in the patient's cognition and/or motivation

**FABRICATION**
- Can be fabricated into a variety of orthotic designs including conventional metal and leather, composites and prepreg. To ensure that optimal joint alignment and function is maintained throughout the gait cycle, we recommend the use of inherently rigid materials when designing your FullStride B Size KAFO.
- **We strongly recommend that you select an ankle joint configuration that limits dorsiflexion and allows for accurate alignment of the foot ankle complex in the sagittal plane**

**AVAILABILITY**
- The FullStride B Size can be purchased as a kit through Becker Orthopedic, or fabricated into a variety of custom KAFO designs by Becker Central Fabrication

**CODING**
- We recommend you consider coding the FullStride B-Size with a base code of L2005. The responsibility of accurate coding lies with the patient care facility that is billing for the product and service. The HCPCS Alpha-Numeric System is subject to revisions and periodic updates and should be consulted prior to billing.
The SafetyStride is a mechanical stance control orthotic knee joint that utilizes a low-profile cabling system to automatically unlock itself at the end of stance phase. The key feature of the SafetyStride is its ability to resist knee flexion at any angle. The SafetyStride does not require full 180° knee extension to resist knee flexion in stance phase.

Designed to unlock at terminal stance, an internal lever re-engages during swing phase to ensure knee joint stability prior to heel contact. Individuals who intermittently fail to reach full extension will now have the added security and stability they require while ambulating.

The SafetyStride works in conjunction with the FullStride and can be easily installed on a FullStride equipped KAFO.

We offer a full range of technical and clinical support for the successful implementation of stance control technology into your practice. Please see page 2 to learn more about our comprehensive program and how we can help you get into stride with stance control.

<table>
<thead>
<tr>
<th>SafetyStride Ordering Information</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Order No.</strong></td>
</tr>
<tr>
<td>9005-A6</td>
</tr>
<tr>
<td>9005-A6S</td>
</tr>
<tr>
<td>9005-A6Ti</td>
</tr>
<tr>
<td>321*</td>
</tr>
</tbody>
</table>
FEATURES

- Automatic, mechanical locking and unlocking will resist knee flexion at any angle
- Designed to unlock at terminal stance, an internal lever will re-engage during swing phase ensuring knee stability prior to heel contact
- Interchangeable with the FullStride and Stride4
- Durable, straightforward modular design
- Available with aluminum, stainless steel or titanium uprights

INDICATIONS

- Quadriceps weakness or lack of knee control as a result of:
  - Polio
  - MS
  - CVA
  - Femoral Nerve and Incomplete SCI
  - Inclusion Body Myositis
- Genu recurvatum
- Knee flexion contractures - Contact Technical Support on page 3 for guidance

CONTRAINDICATIONS

- Patient weight greater than 220 lbs.
- Fixed varus or valgus deformity at the knee in excess of 15°
- Knee flexion contractures greater than 10°
- Knee hyperextension that cannot be controlled by the orthosis
- Substantial leg length discrepancy where the affected side is shorter
- Significant spasticity or tone in hip, knee or ankle musculature that is not controlled by the orthosis
- Insufficient ankle range-of-motion
- Significant impairment in the patient's cognition and/or motivation

FABRICATION

- Can be fabricated into a variety of orthotic designs including conventional metal and leather, composites and prepreg. To ensure that optimal joint alignment and function is maintained throughout the gait cycle, we recommend the use of inherently rigid materials when designing your SafetyStride KAFO.
- **We strongly recommend that you select an ankle joint configuration that limits dorsiflexion and allows for accurate alignment of the foot ankle complex in the sagittal plane**

AVAILABILITY

- The SafetyStride can be purchased as a kit through Becker Orthopedic, or fabricated into a variety of custom KAFO designs by Becker Central Fabrication

CODING

- We recommend you consider coding the SafetyStride with a base code of L2005. The responsibility of accurate coding lies with the patient care facility that is billing for the product and service. The HCPCS Alpha-Numeric System is subject to revisions and periodic updates and should be consulted prior to billing.
The Stride4 is the latest addition to the Stride Family of interchangeable stance control knee joints. It contains many additional features to enhance patient function and like the FullStride and SafetyStride, the Stride4 is a mechanical stance control orthotic knee joint that utilizes a low-profile cabling system to automatically unlock at the end of stance phase. At the end of swing phase, when the orthotic knee joint reaches full extension, the locking mechanism re-engages to provide knee stability for stance phase. Cable adjustment clevises allow the practitioner to easily adjust the cable length to match the patient’s stride length.

The joint body of the Stride4 is comprised of a four bar linkage mechanism; the upper and lower aspects of the joint do not purely rotate about one fixed center of rotation. Instead, the joint motion involves some translation, in addition to rotation, to more closely mimic anatomical knee motion.

In the stance control mode of operation, the four bar linkage mechanism provides stability when the orthotic knee joint is fully extended. An integral extension assist spring housed within the midsection assists with knee extension, while an adjustable extension stop allows the practitioner to adjust and fine tune the point at which the joint enters into its stable/locked state. If desired, the extension stop can be fully adjusted to eliminate the stability feature to facilitate free motion.

A button on the Stride4 allows the patient to switch between locked and stance control modes of operation. This feature provides the patient with the option of locking the joint should they desire. When the lock option is selected and engaged by the patient, the joint will allow approximately $3^\circ$ of flexion to provide some shock absorption to the user.

We offer a full range of technical and clinical support for the successful implementation of stance control technology into your practice. Please see page 2 to learn more about our comprehensive program and how we can help you get into stride with stance control.

<table>
<thead>
<tr>
<th>Order No.</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>LMB-C063-A6</td>
<td>Stride4 Kit with Aluminum Uprights</td>
</tr>
<tr>
<td>LMB-C063-A6S</td>
<td>Stride4 Kit with Stainless Steel Uprights</td>
</tr>
<tr>
<td>LMB-C063-A6TI</td>
<td>Stride4 Kit with Titanium Uprights</td>
</tr>
<tr>
<td>323*</td>
<td>Custom Stride4 KAFO</td>
</tr>
</tbody>
</table>
**FEATURES**

- 3 operation modes: Stance control, free motion and locked with stance phase knee flexion
- 4 bar linkage mechanism to afford stability and mimic anatomical knee motion
- Integrated extension assist
- Adjustable extension stop to fine tune knee stability
- Free motion option
- Durable, straightforward modular design
- Cost effective
- Interchangeable with the FullStride and SafetyStride
- Available with aluminum, stainless steel or titanium uprights

**INDICATIONS**

- Quadriceps weakness or lack of knee control as a result of:
  - Polio
  - MS
  - CVA
  - Femoral Nerve and Incomplete SCI
  - Inclusion Body Myositis
  - Genu recurvatum

**CONTRAINDICATIONS**

- Patient weight greater than 220 lbs.
- Fixed varus or valgus deformity at the knee in excess of 15°
- Knee flexion contractures greater than 10°
- Knee hyperextension that cannot be controlled by the orthosis
- Substantial leg length discrepancy where the affected side is shorter
- Significant spasticity or tone in hip, knee or ankle musculature that is not controlled by the orthosis
- Insufficient ankle range-of-motion
- Significant impairment in the patient’s cognition and/or motivation

**FABRICATION**

- Can be fabricated into a variety of orthotic designs including conventional metal and leather, composites and prepreg. To ensure that optimal joint alignment and function is maintained throughout the gait cycle, we recommend the use of inherently rigid materials when designing your Stride4 KAFO.
- **We strongly recommend that you select an ankle joint configuration that limits dorsiflexion and allows for accurate alignment of the foot ankle complex in the sagittal plane**

**AVAILABILITY**

- The Stride4 can be purchased as a kit through Becker Orthopedic, or fabricated into a variety of custom KAFO designs by Becker Central Fabrication

**CODING**

- We recommend you consider coding the Stride4 with a base code of L2005. The responsibility of accurate coding lies with the patient care facility that is billing for the product and service. The HCPCS Alpha-Numeric System is subject to revisions and periodic updates and should be consulted prior to billing.
MODEL GX-ASSIST
For individuals with significant weakness of hip musculature, the FullStride and SafetyStride may be ordered with a GX-Assist option that incorporates a pneumatic spring on the lateral or medial joint unit to assist in knee extension during the swing phase of gait. Available with your choice of a 75N, 125N (for standard applications), or 175N pneumatic spring, the GX-Assist can also be retrofit to existing FullStride and SafetyStride KAFO’s.

GX-Assist Add-On Kit Ordering Information

<table>
<thead>
<tr>
<th>Order No.</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>9006-GX-A</td>
<td>GX-Assist Add-On Kit for FullStride (3/16&quot; x 3/4&quot;)</td>
</tr>
<tr>
<td>9006-GX-B</td>
<td>GX-Assist Add-On Kit for FullStride B size (3/16&quot; x 5/8&quot;)</td>
</tr>
<tr>
<td>9005-GX-A</td>
<td>GX-Assist Add-On Kit for SafetyStride (3/16&quot; x 3/4&quot;)</td>
</tr>
</tbody>
</table>

Conversions

<table>
<thead>
<tr>
<th>Force (N)</th>
<th>Torque (in-lbf)</th>
<th>Band Color</th>
</tr>
</thead>
<tbody>
<tr>
<td>75N</td>
<td>17</td>
<td>Blue</td>
</tr>
<tr>
<td>125N</td>
<td>28</td>
<td>Green</td>
</tr>
<tr>
<td>175N</td>
<td>39</td>
<td>No Band</td>
</tr>
</tbody>
</table>

MODELS 9006-MD-A/LMB-CO63-FD-A MOLDING DUMMIES
Molding dummies are available for the FullStride, SafetyStride and Stride4 knee joints. The FullStride and SafetyStride utilize the same, universal, nylon molding dummy, which can be used on the left or right side. Sold individually.

Since the Stride4 knee joint does not have one fixed center of rotation, we strongly recommend using the Stride4 molding dummies for fabrication. The dummies have a 3/8” hole to mark knee center and are made of stainless steel. Stride4 dummies are left and right specific and may be ordered individually or in pairs.

Molding Dummy Ordering Information

<table>
<thead>
<tr>
<th>Order No.</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>9006-MD-A</td>
<td>FullStride / SafetyStride A Size Molding Dummy</td>
</tr>
<tr>
<td>9006-MD-B</td>
<td>FullStride B Size Molding Dummy</td>
</tr>
<tr>
<td>LMB-CO63-FD-A</td>
<td>Stride4 Molding Dummy</td>
</tr>
</tbody>
</table>