CHARACTERISTICS
- Frame in T6 aluminum alloy (light, sturdy and moldable) and PE plastic.
- Adjustable cervical cursor for adaptation to the patient’s height; revolving buckles to adapt to the patient’s anatomy.
- Single closure in velcro on the pubic padding; with a single gesture the shoulder and pelvic straps are tightened.
- Wide pads for better fit in the pubic zone.
- Padded shoulder straps.
- Padded frame in material bonded in a double layer (MTP + PE).
- External covering in three-dimensional mesh.
- Removable lining.
- Low profile.

INDICATIONS
- Dorsalgia and lumbalgia due to osteoporosis.
- Vertebral collapse due to osteoporosis, localized in the dorsal and/or lumbar section.
- Vertebral collapse due to secondary metastatic localizations.
- Precocious osteochondrosis.
- Hyperkyphosis with chronic back pain.
- Post-traumatic treatment of knee sprains.

TECHNICAL NOTES
Adjustment of the waist and shoulders is made exclusively with the stays fastened to the pubic pads. The corset is designed so that a single gesture is all that is needed to tighten the shoulder stays and pelvic strap, thereby straightening the vertebral column. During production the frame is pre-shaped; however adaptation to the lordo-kyphotic profile of the individual patient will ensure better treatment and greater comfort of the patient.

MAINTENANCE
- Check the screws periodically and tighten if necessary.
- Wash the padded parts by hand in warm water with neutral detergent; rinse thoroughly. Let dry far from direct heat sources.
- Do not dispose of the device or any of its parts carelessly.
- To replace worn parts, consult your orthopedic expert.

USE PRECAUTIONS
We recommend wearing a garment under the corset to prevent direct contact with the skin. The pressures exercised by the corset must not be applied to parts of the body with wounds, swelling or enlargements. In case of doubt about the method application, consult an orthopedic expert. Do not wear the corset near open flames or strong magnetic fields.

WARNINGS
The corset must be prescribed and used under medical control and applied by an orthopedic expert, who is the competent figure of reference both for application and for any other information regarding safe use in compliance with individual needs. To ensure effective performance, tolerability and function it is necessary to apply the corset with the maximum care. Any possible alteration to the structure or adjustment of the corset must be prescribed by a physician and made by an orthopedic expert. We recommend use by one patient only. Persons with problems of hypersensitivity may experience reddening or irritation in case of direct contact with the skin. If there is any pain, swelling or enlargement or any other unusual reaction, see your doctor immediately.

Read these instructions carefully and thoroughly
www.bell-horn.com
**Method of Adjustment for the Physician/Orthopedic Expert**

1. Adjust the length of the dorsal part of the support to the patient’s back:
   - Open the padding with the velcro strap and loosen the screws fastening the sliding cursor (fig. 1).
   - Position the lower part of the support in the area of S1/L5 (fig. 2).
   - Move the cursor vertically (fig. 2) to align the upper part with C7/D1.
   - Tighten the screws to block the position of the cursor (fig. 3) and close the padding.

2. Adjust the shape of the support to the patient’s back (normally this can be done without removing the padding; if necessary, use the clamps at the level of the sacroiliac and remove the padding as described in the specific section):
   - Mold the vertical frame, applying leverage on a rounded surface so as to adapt it to the shape of the patient’s back (lordo-kypnotic profile) (fig. 4): when properly fitted, the support will not change position and will ensure better support.
   - Mold the upper cursor so that it adheres to the body.

3. Widen the shoulder straps (by pulling them upward) to facilitate putting the corset on (fig. 5).
   - Have the patient put the corset on and insert the arms through the shoulder straps (fig. 6).

4. Close it on the front (in the pubic area) using the special velcro pads (fig. 7):
   - Make sure the pads are centered on the front section.
   - The smaller pad should be centered on the larger one (fig. 8), so that further adjustment is possible later.

5. Adjust the stays:
   - Detach the Y fasteners from the stay (in the pubic area) (fig. 9A).
   - With the upper body erect and the shoulders back, pull the stays (fig. 8).
   - Mark where to shorten the stays (taking care not to remove too much, to prevent difficulty closing the corset) and cut them (fig. 9B): repeat of necessary for the best fit.
   - Attach the Y fasteners to the ends of the stays again (fig. 9A).
   - Make sure the stays are pulled tight at the level of the shoulders and lumbar region.
   - Make sure the pads are still centered on the front.
   - If necessary, adjust the fit.

6. Make sure all the settings are correct, with the patient:
   - Open the corset by releasing the pubic pads.
   - Pull the shoulder straps upward and remove the corset (fig. 10A).
   - Put the corset back on and close it, pulling the pads to the sides (fig. 10B) and fastening them on the front, one on the other (fig. 10C).
   - If necessary, repeat the adjustment described in item 6.

**How to Remove the Support**

- Open the support by separating the public pads.
- Pull the shoulder straps upward to facilitate removal (fig. 5).
- Remove the support.

**How to Replace or Remove Padded Parts**

- Detach the pads from the stays.
- Remove the padding from the pelvic strap by bending the plastic.
- Remove the screws and after opening the hinges remove the upper cursor (after marking the position where it was fastened).
- Remove the padding of the vertical rods.
- If necessary, remove the padding around the shoulders and detach the stays from the cursor (using their velcro straps).

To reposition the padding proceed as above in reverse order.

**Sizing & Measurements**

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<thead>
<tr>
<th>Size</th>
<th>(a) length</th>
<th>(b) hip circumference</th>
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<tbody>
<tr>
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