C-Brace is like no other leg brace on the market today. This first-of-its-kind device was designed to help people with incomplete spinal cord injuries, leg muscle weakness, and post-polio syndrome walk more safely and more naturally.

C-Brace has helped people to do things that may not have been possible with another leg brace:

- Change speed while walking
- Walk down stairs step over step
- Walk on uneven terrain
- Sit down without excessive compensatory movements
- Walk longer distances with less fatigue
- Recover from a stumble to avoid falling
- Feel secure and confident while walking

C-Brace has helped users get out of their wheelchairs, abandon their walking canes, and reclaim their independence.

If an incomplete spinal cord injury, leg muscle weakness, or post-polio syndrome is limiting your mobility, share this document with your primary care physician, physiatrist, or physical therapist and tell them that you would like to be evaluated for C-Brace.
C-Brace FAQs

What is C-Brace?
C-Brace is a microprocessor controlled knee ankle foot orthosis (KAFO), or leg brace, designed to help compensate for lower-limb mobility issues due to partial paralysis, incomplete spinal cord injury, post-polio syndrome, and quadriceps weakness due to a variety of conditions.

How is C-Brace different from other leg braces?
In the past, orthotic fittings for patients with neurological indications of the lower limbs consisted solely of a leg brace with a locked or manual locking knee joint. Newer stance phase control orthoses improved on this, helping users achieve a certain amount of dynamic movement. C-Brace goes a step further.

C-Brace is the only KAFO on the market that provides dynamic control of the entire gait cycle* — stance and swing phases — in real time. Movement is smoother, safer, more controlled, and more stable, even on uneven terrain. C-Brace is the first system available to utilize advanced sensor arrays, microprocessor controls, and management of the gait cycle to dramatically improve a person’s walking ability.

*The gait cycle refers to your individual walking pattern. It is divided into two major phases: stance phase and swing phase. Stance phase happens when your foot is on the ground and you are applying weight to your leg. Swing phase is when your foot is in the air and swinging forward.

How will C-Brace help me?
C-Brace encourages natural body posture, reducing excessive strain on the sound-side limb. Advanced stumble-control features facilitate a greater sense of stability and security. In addition, C-Brace may provide a number of functional benefits:
• Strengthen muscles that previously were rarely used
• Reduce muscular atrophies (muscle wasting)
• Prevent contractures (stiffening of muscles, tendons, or other tissue) and joint damage caused by immobilization
• Retain cardiovascular performance (endurance) for everyday activities
• Reduce contralateral limb pain and overuse injuries

Who is C-Brace for?
C-Brace can be considered for all neurologic indications of the lower limbs.

Leading indications:
• Incomplete paraplegia (lesion between L1 and L5)
• Very minor or no spasticity
• Quadriceps weakness
• Post-polio syndrome
• Traumatic nerve injury

C-Brace does not move for you — it responds to your movements. Because of this, the functional status of your muscles is a deciding factor.

Other factors when being considered for C-Brace:
• You must be able to fully stabilize your trunk and stand freely
• Your hip flexor muscle strength must permit controlled swing-through of your affected leg or you must be able to compensate through trunk movement
• You must be motivated and financially able to participate in physical therapy so that you can be trained in using the device
C-Brace FAQ’s

What if I can’t stand or don’t have adequate strength for C-Brace?

If you are unable to stand, results from joint mobility, muscle tone, and muscle strength tests can be used to determine if C-Brace would be appropriate for you.

Under some circumstances, it may be too early for a C-Brace fitting. Consult with your primary care physician, physiatrist, physical therapist, or orthotist** to determine what milestones must be reached before you can be evaluated for C-Brace.

**An orthotist is an allied healthcare professional who is specifically educated and trained to manage comprehensive orthotic patient care. Your orthotist will evaluate your individual needs and goals in order to design, fabricate, fit, and maintain an orthosis or brace. (Source: www.oanandpcare.org/orthoticcarefaq)

Do I need a prescription for C-Brace?

A physician’s prescription is required for C-Brace. Generally speaking, a physical medicine and rehabilitation physician (PM&R) or physiatrist will prescribe C-Brace. This may vary depending on your condition.

Your doctor will need to provide documentation to show that the device is medically necessary. Insurance providers require pre-authorization before you can receive a C-Brace.

I want to try C-Brace. What do I need to do?

Great! The next step is to find out if you’re a candidate for C-Brace. C-Brace evaluations are conducted by trained and certified orthotists, often in coordination with your physical therapist or physiatrist.

How you can help:

1. Share this document with your primary care physician, physiatrist, or physical therapist, and ask them if you can be evaluated for C-Brace.
2. Ask your physician to refer you to an orthotist for evaluation. If you already have an orthotist, he or she should be able to conduct an evaluation. If you don’t have an orthotist, and your physician or physical therapist does not have a contact, Ottobock can recommend an orthotist in your area.
3. Ask your physician to start the documentation process. C-Brace requires a physician prescription and insurance pre-authorization. The Physician Documentation Guide on the next page will help your physician document the medical necessity of the brace in your medical record.
4. If you have any questions, contact Ottobock at 512 806 2897 to speak with a member of the Professional and Clinical Services team.

What if my doctor has questions?

C-Brace is new technology, and any new technology comes with a learning curve. We’re here to help. Our clinical support team will work with your care providers every step of the way! All trials are free and come with no obligation.

A C-Brace trial can open up a new world of possibilities for you. This is your first step in becoming actively involved in finding a solution that will help you maximize your functional potential.
C-Brace Justification

Physician Documentation Guide

January 1, 2016

Documentation may come from the prescribing physician or other pertinent sources (e.g. primary care, specialists, hospital, rehabilitation, home health, etc.). Information should be documented (if possible) in the contemporaneous medical record, as many payors do not accept Letters of Medical Necessity/Templates.

**History of the Injury, Illness, or Condition**
- Diagnosis related to medical necessity for the orthosis
- Affected side
- Symptoms
- Clinical course
- Therapeutic interventions and results
- Prognosis

**Functional Limitations (ordering physician)**
- Describe the nature and extent of functional limitations on a typical day including:
  - Description of activities of daily living and how impacted by deficit(s)
  - Diagnoses causing these symptoms
  - Other comorbidities either relating to ambulatory problems or impacting the use of new orthosis (e.g. cardiovascular reserve, condition of contralateral limb, fatigue)
  - Ambulatory assistance (cane, walker, wheelchair, caregiver) currently used in addition to the orthosis
- State whether any of these limitations will affect your patient’s ability to use the C-Brace.

**Physical Examination**
- Recent physical examination that is relevant to functional deficits
  - Focus should be on the body systems responsible for the patient’s ambulatory difficulties or impact on the patient’s functional ability
- Include comprehensive manual muscle tests (if disease is progressive, these should be taken early in the day to avoid false reading due to fatigue)

**Orthosis Use (ordering physician)**
- Problems with current orthosis/component(s)
- Past experience with orthoses/braces and other failed treatments
- State your opinion as to why you believe C-Brace will help your patient regain or maintain function

**Motivation and Participation (ordering physician)**
- Document that patient is motivated to use the C-Brace
- Document that patient is able to physically function at a level necessary for a microprocessor-controlled orthosis and is willing and able to participate in training for use of the device

**Prescription (ordering physician)**
Provide a clear and specific prescription/order for a microprocessor-controlled swing and stance knee-ankle-foot-orthosis with rationale for your decision.