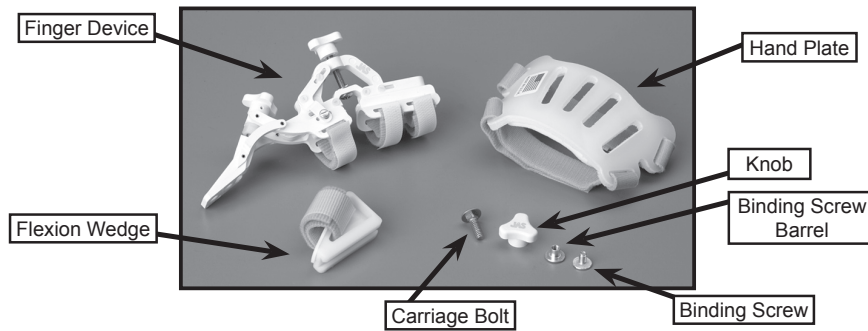


FITTING INSTRUCTIONS

NOTE: The JAS Finger Device can be used on any of all four fingers by aligning the device to the desired finger and attaching the device to hand plate. To work multiple fingers one can attach additional devices, or relocate the device to the desired finger to be stretched.

- Parts included.



**STEP 1:
ATTACH DEVICE TO HAND PLATE**

NOTE: Correct hand plate application is with the straps to the "pinky finger" side of the hand.

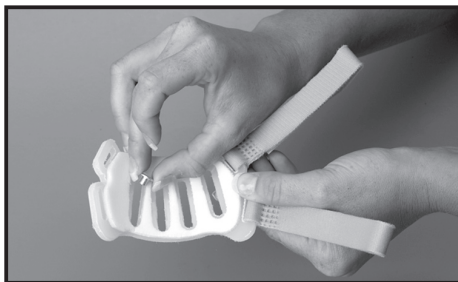


Fig. 1

Figure 1

- Insert the binding screw barrel into the bottom side of the selected hand plate slot.

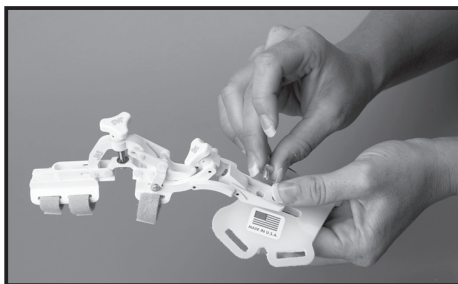


Fig. 2

Figure 2

- Align top hole on finger device over binding screw barrel.
- Secure finger device to hand plate with second half of binding screw. Do NOT fully tighten screw at this time. You will tighten during Step 3.

IMPORTANT: Be sure to attach device in the correct direction, so it extends from the distal end of the hand plate.

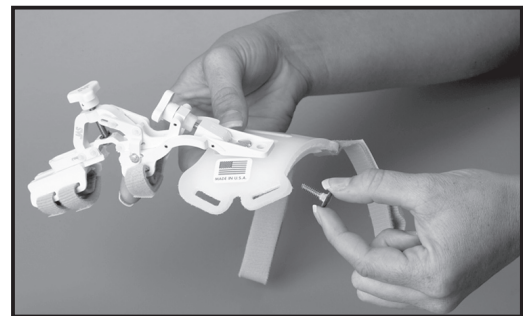


Fig. 3

Figure 3

- Insert carriage bolt into bottom side of slot and up through bottom hole of Finger Device.



Fig. 4

Figure 4

- Thread knob onto carriage bolt. Do NOT fully tighten bolt at this time. You will tighten it during Step 3.

**STEP 2:
ATTACH HAND PLATE TO BACK OF HAND**

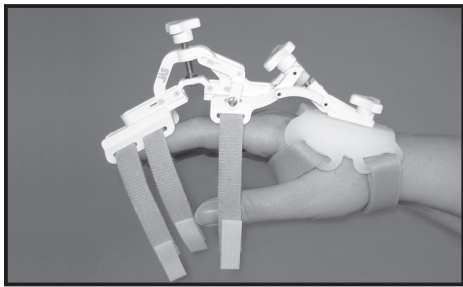


Fig. 5

- Center hand plate over back of hand, making sure it does not lie over MP joints.
- Feed hand plate straps through slots on the thumb side of splint and secure.

**STEP 3:
APPLY DEVICE TO AFFECTED FINGER**

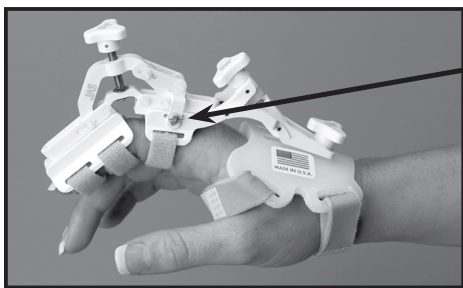


Fig. 6

Figure 6

- Align device so that MP and PIP joints are centered under corresponding device axis.
- To align axis, device can be moved forward or back by sliding it along the slot in the hand plate.

NOTE: PIP joint axis position can be further adjusted by changing the screw hole positions (see arrow, figure 6) on either side of the proximal drive arm.

- Tighten binding screw and knob to prevent device from sliding along slot during use.
- Secure finger straps.

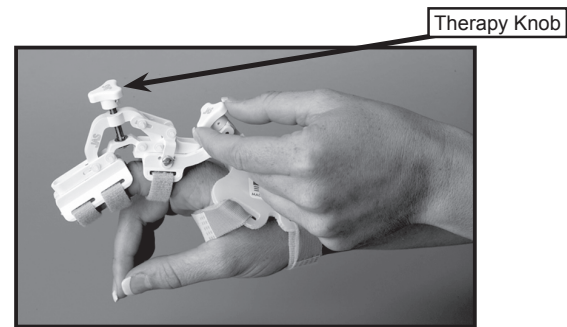


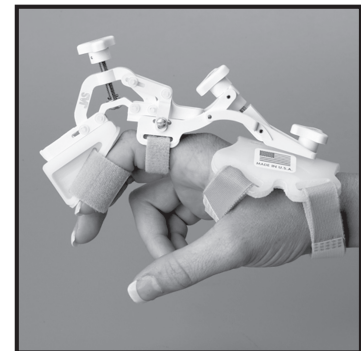
Fig. 7

Figure 7

- Adjust MP joint to desired angle by rotating MP knob. (Adjustable from 0° - 85°)
- Begin Treatment protocol by rotating therapy knob as outlined on back page.

ATTACHING FLEXION WEDGE CUFF

The accessory flexion wedge cuff provides an additional 25° of PIP flexion, and replaces the distal cuff of the JAS device. **PLEASE NOTE:** When flexion wedge is in place, the device will be limited in extension ROM by 25°. If working in both PIP flexion and extension to regain ROM, you must change to the appropriate distal cuff for each session.



**STEP 1:
REMOVE PROXIMAL CUFF**

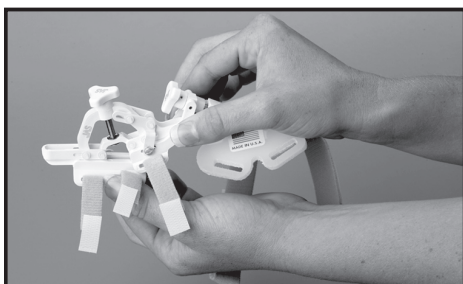


Fig. 1

Figure 1

- Adjust PIP ROM to maximum extension position. Open proximal cuff straps. Slide distal cuff towards center of device, and remove from distal drive arm.

**STEP 2:
ATTACHING FLEXION WEDGE CUFF**



Fig. 2

Figure 2

- Slide extension wedge cuff onto distal drive arm.

RECOMMENDED

JAS® EZ TREATMENT PROTOCOL

STEP 1: Rotate therapy knob until a gentle, pain-free stretch is felt. Level 2-3 on stretch intensity scale.



STEP 2: Hold stretch position for 5 minutes. Before turning knob, re-assess stretch level:

1. If stretch intensity has decreased, rotate knob until you feel a 2-3 level stretch again.
2. If stretch intensity has not changed, leave in same position.
3. If stretch intensity has increased, rotate knob in opposite direction until 2-3 level stretch is felt.

STEP 3: Hold stretch position for another 5 minutes.

Repeat steps 2 and 3 for a series of six 5-minute stretches (30-Minute Therapy Session).

IMPORTANT:

If you are initiating JAS therapy early post surgery, you may need to begin with shorter therapy sessions (one to three 5-minute stretches per session), due to post operative symptoms of swelling, pain, and sensitivity to passive stretch. If so, gradually increase to 30-minute sessions over a two week period, as tolerated.

STEP 4: When 30-minute session is complete, turn knob in opposite direction until stretch is relieved, then remove device. You may feel some joint stiffness following your JAS session. Gently move your joint back and forth to “cool down” and relieve the stiffness.

IMPORTANT:

You must evaluate stretch sensation after each 5-minute stretch period, before adjusting the Range of Motion (ROM) on your JAS device. If stretch intensity has not decreased, it is incorrect to turn further into the ROM.

You will not achieve a desired result of permanent tissue stretch.

Aggressive or painful levels of stretch will not be therapeutic, and will yield counterproductive results - increased stiffness, swelling or pain, and little or no gains in joint ROM.

NUMBER OF SESSIONS PER DAY

Three 30-minute sessions, per direction, per day, are suggested for optimal results. Begin with one 30-minute session per day and add sessions every 3-5 days as tolerated up to 3 sessions per direction per day.

WARNING: JAS SPS devices are NOT designed to be worn overnight or for prolonged, continuous periods of time. Joint Active Systems does not recommend or endorse a therapy protocol that includes extended wear times of 4 + hour sessions as are commonly recommended with dynamic splints or turnbuckle splints. This is due to the known increased risk of skin irritation and / or breakdown associated with any prolonged splinting regime.

Wait 45-60 minutes between each JAS treatment session.

TECHNICAL SUPPORT

Call JAS toll free at **(800) 879-0117** or technical assistance and any questions regarding your JAS device.

JAS Representative

Contact Number

Joint Active Systems, Inc.

2600 South Raney • Effingham, IL 62401

TEL: (217) 342-3412 or (800) 879-0117

Email: info@jointactivesystems.com

www.jointactivesystems.com

Covered by one or more US patents. Other patents pending.



PASO 2:
COLOQUE LA BANDEJA DE MANO EN EL REVERSO DE LA MANO



Fig. 5

‡&HQWUH OD EDQGHMD GH PDQR VREUH HO UHYHUVR GH OD
 PDQR DVHJXUIQGRVH TXH QR VH DSR\H VREUH ODV
 DUWLFXODFLRQHV 0&)
 ‡3DVH ODV FRUUHDV GH OD EDQGHMD GH PDQR DWUDYpV GH ODV
 UDQXUDV GH OD WDEOLOOD HQ HO ODGR GHO SXOJDU \ DM~VWHODV

PASO 3:
COLOQUE EL APARATO EN EL DEDO A TRATAR

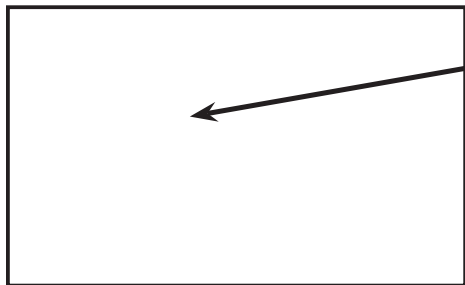


Fig. 6

& 2 1 7, 1 8 \$

Figura 6

‡\$OLQHH HO DSDUDWR SDUD TXH ODV
 3,3 HVWpQ FHQWUDGDV EDMR HO HMH
 ‡3DUD DOLQH DU HO HMH SXHGH PRYHU
 GHODQWH R KDFLD DWUiv GHVOLjiQG
 EDQGHMD GH PDQR

NOTA: /D SRVLFLyQ GHO HMH GH OD DUW
 SXHGH DMXVW DU Piv FPELDQGR OD
 DJXMHURV SDUD HO WRUQLOOR YHU
 ODGR GHO EUDJR GHO DSDUDWR SDUD

‡\$MXVWH OD SHULOOD \ HO SHUQR SDU
 GHVOLFH GXUDQWH HO XVR

‡\$VHJXUH ODV FRUUHDV DO GHGR

Perilla de terapia

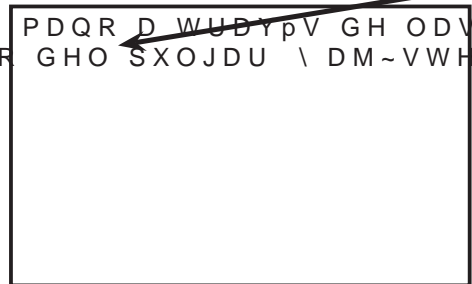


Fig. 7

Figura 7

‡\$MXVWH OD DUWLFXODFLyQ 0&) DO iQ
 OD SHULOOD 0&) \$MXVWDEOH GH D
 ‡&RPLHQFH HO WUDWDPLHQWR URWDQ
 VHJ~Q VH GHWDOOD HQ HO UHYHUVR

PARA AGREGAR LA CUÑA DE FLEXIÓN

/D FXxD GH IOH[LyQ SURYHH XQD IOH[LyQ DGLFLRQDO 3,3 GH JUDGRV \
 UHHPsOD]D HO SXxR GLVWDO GHO DSDUDWR -\$6 127\$ &XDQGR OD FXxD GH
 IOH[LyQ HVWi FRORFDGD OD H[WHQVLRQ &'0 &DPSR GH ORYLPLHQWR
 GHO DSDUDWR HVW DUi OLPLWDGD D JUDGRV 6L HVWi KDFLHQGR IOH[LRQH
 \ H[WHQVLRQHV 3,3 SDUD UHFXSHUDU &'0 GHEH FPELDU DO SXxR GLVWDO
 DSURSLDGR SDUD FDGD VHVlyQ

PASO 1:
RETIRE EL PUÑO PROXIMAL

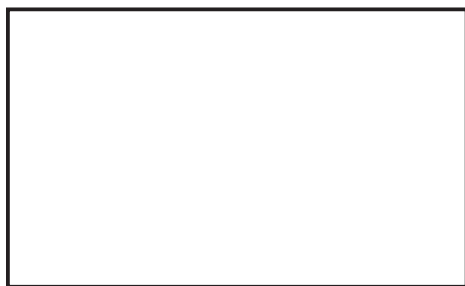


Fig. 1

PASO 2:
COLOQUE LA CUÑA DE FLEXIÓN



Fig. 2

Figura 1

‡\$MXVWH HO &'0 3,3 D OD SRVLFLyQ P[LPDQ H[WHQVLRQ \$EUD
 ODV FRUUHDV GHO SXxR SUR[LPDO 'HVOi HVWi ODV SXQR BLWMOVLyQ FLH QD FXxD G
 FHQWUR GHO DSDUDWR \ TXiWHOR GHO EUDJR GHO ODGR GHO GGGGLVWDO