

PROTEOR QUATTRO™ PHYSICAL THERAPY GUIDE

The QUATTRO is a microprocessor swing and stance controlled prosthetic knee designed for transfemoral amputees of all activity and experience levels. The QUATTRO differs from other microprocessor controlled prosthetic knees you may have used. This document is designed to explain some of those differences and discuss exercises which can be performed to optimize the performance of the QUATTRO.

Adjustments made with the Freedom App: The QUATTRO's programming is App based. The Certified Prosthetist uses the GaitLab App to initially calibrate and program the optimal settings of the knee. The patient has the ability to

make additional adjustments that are limited to +/- 10 points based on the settings set by the prosthetist, if the prosthetist allows the patient the ability to do so. Adjustments can be made to Sitting Resistance, Heel Rise Resistance, Swing Extension Resistance, Stance Extension Resistance, and Stair and Ramp Resistance. Please see the chart below for an overview of these adjustments

NOTE: Please consult with the user's prosthetist prior to making any adjustments to settings.

Open "Freedom App", hit "Connect", and select "Adjust" at the bottom of the screen.

| 10:59 at i 50 ■ Adjust X | Adjustment | Function | When to Adjust | |
|---|--------------------------------|---|--|---|
| Sitting Resistance 50 - + | | | When to Decrease Value | When to Increase Value |
| | Sitting Resistance | Provides flexion resistance while sitting | Sitting motion delayed due to high resistance | Sitting motion is rapid due to low resistance |
| Heel Rise Resistance 50 - + | Heel Rise Resistance | Controls Heel Rise in Swing Flexion | Resistance is set too high which may present as toe scuffing | Resistance is too low, resulting in excessive heel rise |
| Secture Secture Washing Secture 95% Secture Secture Secture Secture Secture Secture Make Secture Make Secture Secture Secture | Swing Extension Resistance | Controls Swing Extension | User waiting for the knee to reach full extension | Swinging too quickly, which may result in terminal impact |
| *See note | Stance Extension Resistance | Knee extension at midstance | Very little or no extension moment is observed | Rapid knee extension at midstance |
| ** See note | Stair and Ramp Resistance | Independent resistance setting for stair and ramp descent | Knee flexion is delayed due high resistance | Knee flexion is rapid due to low resistance |

* Setting of this adjustment is only required when the user is ambulating with Stance Flexion

** QUATTRO recognizes when the user is sitting or descending stairs or ramps. These two resistance adjustments are independent of each other. (QUATTRO

Troubleshooting Guide for new QUATTRO

| Function | How QUATTRO works | Suggestions |
|--|---|---|
| Not releasing into swing phase | Releases by loading and unloading of the toe | Ensure user is rolling onto the toe in gait. Use suggestions in the following section |
| Knee flexes when standing | Stable alignment needed | Un-accommodated hip flexion contracture, or not enough socket flexion (contact CP) |
| Abrupt knee extension at midstance | Ensure that the knee reaches full extension | Increase Stance Extension Resistance to control knee extension |
| Sitting resistance not changing with adjustments | Knee must reach full extension | In order for the adjustment to be made, QUATTRO requires that the knee reaches full extension between adjustments |
| High level of flexion resistance when sitting | When moving backwards QUATTRO defaults to high flexion resistance | Ensure that the shank is not moving backwards when sitting. Stand in front of the chair before sitting to prevent stepping backwards when sitting |





ACTIVITY

Weiaht Shifting

Ball

Kicks



Trust in the prosthesis and increasing proprioception

TEACHES



Weight transfer and releasing the knee into swing

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DESCRIPTION

Have the patient stand in the parallel bars and shift their weight side-to-side and front-to-back. This can be done with double and single leg stance. If desired, you can also place a ball under the sound leg and have the patient move it in multiple directions.

TIP: Ensure the patient is shifting his or her weight to the four walls of the socket. This is especially important for the front-to-back motion of the socket to help mimic the socket forces at midstance.

Have the patient stand in the parallel bars and place a ball or your foot ahead of them on the prosthetic side. Begin by placing the prosthesis behind the patient. Have the patient load the prosthetic side then kick forward into the ball or your foot.

TIP: If the patient is performing the activity correctly, the knee should break into swing as the prosthesis is unweighted and weight is transferred to the contralateral limb.



Pelvic rotation on the prosthetic side

Have the patient stand in the parallel bars with their sound leg a step ahead of their prosthetic leg. Place your hands on the patient's ASISs. This can be done from in front of or behind the patient. Apply a posteriorly directed force at the patient's ASIS while the patient steps forward with the prosthetic leg. This can be done with just a single step or a series of steps



Unloading of the knee and transition to swing

Walking side by side with your patient helps to work on equal step length.

TIP: Hip strength is important for proper use of the QUATTRO. Your patient should have hip extension strength adequate to perform a full step-through gait cycle. If your patient lacks this strength, strengthening exercises should be undertaken. A step-through gait pattern is important to trigger the QUATTRO into swing. A step-to gait pattern may cause the knee to stay in stance or cause infrequent swing. If your patient requires the use of an assistive device, it is recommended that they utilize a rolling walker or forearm crutches to allow a step-through gait pattern

Length

and



Ascent and descent of ramps and stairs

Ascent and descent of ramps and inclines tends to be very intuitive for patients. The most important aspect of descent is teaching the patient to ride the stance flexion resistance down the descent.

For stair descent, have the patient place the anterior half of the foot off the stair. This will allow the knee to flex and the patient to descend step-over-step. Riding the stance flexion resistance during descent will allow the most control of the knee. For stair ascent, patients are advised to climb the stairs with their sound limb and lift the prosthesis behind them (a "step-to" pattern).

TIP: It may be necessary to adjust the stance flexion resistance in the app to optimize stair and ramp descent.

