

## Fitted Sock Application Instructions

1. With the foot at 90° to the leg, place cutting strip on dorsum of foot. **Fig. 1**



2. Tape Channel tube on top of cutting strip. **Fig. 2**



3. Place plastic baggie of appropriate length on foot and leg. **Fig. 3**



4. Dip sock in cool water. Then gather moistened STS Sock and slip on foot. **Fig. 4**



5. Completely apply the sock to foot and leg. Stretch out any wrinkles, leave no overlapping, thoroughly massage sock to shape of foot, ankle and leg. **Fig. 5**



6. Place foot in desired neutral position, (**Fig. 6a**) or in a semi-weight bearing foot position (**Fig. 6b**).



7. Mark malleoli, 1st and 5th metatarsals heads or bony prominences with indelible pen. **Fig. 7**



8. Remove channel tube. **Fig. 8**



9. Cut sock with scissors or letter opener over cutting strip. **Fig. 9**



10. Spread cured STS sock and remove from foot and leg. **Fig. 10**



Bermuda Sock: 19" - 20" high

Mid-leg Sock: 12" - 14" high

Ankle Sock: 7" - 9" high

**"A" Length:**

	Ankle	Mid-leg	Bermuda
Small:	7" - 9"	7" - 9"	—
Medium:	9" - 11"	9" - 11"	9" - 11"
Large:	10" - 13"	10" - 13"	10" - 13"
Extra Large:	11" - 14"	11" - 14"	11" - 14"

## Sizing Information

<b>ANKLE CASTING SOCK</b>		
Item No.	Size	Shoe Size
900-S	Small	W: 4-6 1/2
900-M	Medium	W: 7-10, M: 7-9
900-L	Large	W: 10 1/2 - 12 , M: 9 1/2 - 11 1/2
900-XL	X-Large	M: 12-15

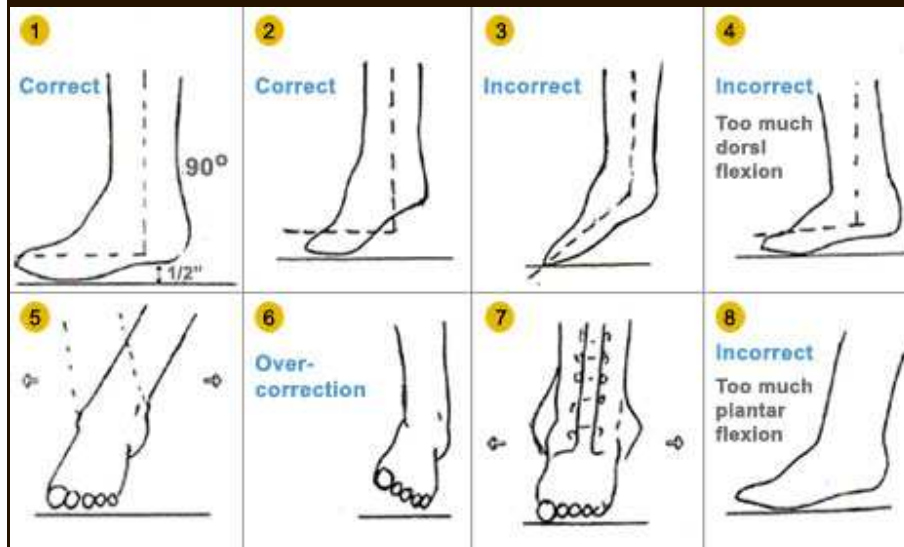
<b>MID-LEG CASTING SOCK</b>		
Item No.	Size	Shoe Size
901-S	Small	W: 4-6 1/2
901-M	Medium	W: 7-10, M: 7-9
901-L	Large	W: 10 1/2 - 12 , M: 9 1/2 - 11 1/2
901-XL	X-Large	M: 12-15

<b>BERMUDA CASTING SOCK</b>		
Item No.	Size	Shoe Size
902-M	Medium	W: 6-10, M: 6-9
902-L	Large	W: 11-12, M: 10-11
902-XL	X-Large	M: 12-15

[Normal Version](#)

## Correct Casting Procedure Diagram

Please see diagram below for correct casting procedure:



Figures

1. (Good Cast) Cast must be taken on a 1/2" contoured footboard.
2. (Good Cast) If the patient is in equines the cast should look something like this.
3. Not like this!
4. Unless it is a fixed situation, this is in too much of a dorsi flexion position.
5. If the patient is not genu valgus the leg should not be like this.
6. Please be careful not to over correct by putting the forefoot into inversion.
7. If the cast is taken like the one in figure 8, it will cause the brace to buckle outward.
8. (continued) as in figure 7, at the malleolus areas when the patient stands and the leg straight, thus providing no support.