

# Bioness NESS L300<sup>®</sup> Foot Drop System

Offer your patients the freedom to take the stairs. Walk on the beach. Stroll through the park. Dance. It's now possible with the NESS L300 Foot Drop System. The NESS L300 offers a variety of advantages for your patients.

**For function.**

**For freedom.**

**For life.**



**Advanced Physical Therapy Center**

*The therapist you choose does make a difference*

# Bioness NESS L300<sup>®</sup> Foot Drop System

## Walk faster, farther, with more freedom

The NESS L300 is an advanced functional electrical stimulation (FES) system that sends low-level electrical impulses to the common peroneal nerve in your leg, stimulating muscles to lift the foot. The NESS L300 automatically senses, while walking, the foot position, terrain as it changes, and your patients walking speed. Therefore, the NESS L300 may assist gait (a manner of walking) following an upper motor neuron injury or disease.

## Physical therapy with the NESS L300<sup>®</sup> can help foot drop patients who have suffered...

- Stroke
- Multiple Sclerosis
- Traumatic Brain Injury
- Incomplete Spinal Cord Injury
- Cerebral Palsy

***“MY GOALS WERE TO THROW AWAY MY AFO, THROW AWAY MY CANE, AND START WALKING AGAIN. AND THAT’S WHAT I’VE ACCOMPLISHED,”***  
SIMON L., 13 YEAR STROKE & TRAUMATIC BRAIN INJURY SURVIVOR

## Three Wireless Components

The NESS L300 is unlike a rigid, uncomfortable ankle-foot orthosis (AFO). Once fitted, your patients can wear the NESS L300 under most clothing, and with most shoes.

The system consists of three small components that communicate with each other wirelessly. When the patients lift their heel, the Intelli-Sense Gait Sensor sends wireless signals to the leg cuff which stimulates the nerves to contract the muscles that lift the foot while walking.

### ***The potential benefits of the NESS L300 start with improved walking***

#### **The NESS L300 offers a variety of advantages for people with foot drop and may:**

- Provide close to natural movement when walking
- Increase speed, stability, and social participation
- Reeducate muscles to function without the system
- Prevent muscle loss (often called atrophy)
- Maintain or increase range of motion in the ankle and foot
- Increase local blood flow

\*Individual results vary.



**Grand Blanc**.....810-695-8700..... 10809 S. Saginaw Street  
**Clio** .....810-687-8700.....303 S. Mill Street  
**Flint** .....810-732-8400.....G-2241 S. Linden Rd, Suite A  
**Hartland** .....810-632-8700.....11182 Highland Road

**Davison** .....810-412-5100.....2138 Fairway Drive  
**Goodrich** .....810-636-8700..... 7477 S. State Rd, Suite B  
**Clarkston** .....248-620-4260..... 6167 White Lake Road, Suite 1  
[www.AdvancedPhysicalTherapy.com](http://www.AdvancedPhysicalTherapy.com)

**IMPORTANT**

Bring this prescription and any HMO referral, Auto or Worker's Comp authorizations on your first day.



**Advanced Physical Therapy Center**  
*The therapist you choose does make a difference*

**PRESCRIPTION**

**MEDICARE CERTIFICATION/RECERTIFICATION**

**Grand Blanc** (810) 695-8700  
Fax (810) 695-7946

**Clio** (810) 687-8700  
Fax (810) 687-8724

**Flint** (810) 732-8400  
Fax (810) 732-4075

**Hartland** (810) 632-8700  
Fax (810) 632-5850

**Goodrich** (810) 636-8700  
Fax (810) 636-8702

**Davison** (810) 412-5100  
Fax (810) 412-5106

**Clarkston** (248) 620-4260  
Fax (248) 620-4239

Date \_\_\_\_\_ Patient Phone Number \_\_\_\_\_

Name \_\_\_\_\_

Diagnosis \_\_\_\_\_

Precautions \_\_\_\_\_

**Physical / Occupational / Hand Therapy**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Evaluate and Treat per Care Plan | <input type="checkbox"/> Sportsmetrics            | <input type="checkbox"/> Paraffin Bath                  |
| <input type="checkbox"/> Home Exercise Program            | <input type="checkbox"/> Manual Techniques        | <input type="checkbox"/> Fluidotherapy                  |
| <input type="checkbox"/> Self Care Education              | <input type="checkbox"/> Graston Technique        | <input type="checkbox"/> Pinch/Grip strengthening       |
| <input type="checkbox"/> Therapeutic Exercise             | <input type="checkbox"/> Joint Mobilization       | <input type="checkbox"/> Scar massage                   |
| <input type="checkbox"/> Passive ROM                      | <input type="checkbox"/> Myofascial Release       | <input type="checkbox"/> Desensitization                |
| <input type="checkbox"/> Active-assisted ROM              | <input type="checkbox"/> Soft Tissue Massage      | <input type="checkbox"/> Orthotic Fabrication: _____    |
| <input type="checkbox"/> Active ROM                       | <input type="checkbox"/> Ultrasound/Phonophoresis | <input type="checkbox"/> Tendon Repair Protocol _____   |
| <input type="checkbox"/> Progressive Resistive Exercise   | <input type="checkbox"/> Iontophoresis            | <input type="checkbox"/> Therapeutic Activities _____   |
| <input type="checkbox"/> Sports Rehab                     | <input type="checkbox"/> Light/Laser Therapy      | <input type="checkbox"/> ADL Activities _____           |
| <input type="checkbox"/> Neuromuscular Re-Education       | <input type="checkbox"/> Electrical Stimulation   | <input type="checkbox"/> TMJ Rehabilitation             |
| <input type="checkbox"/> Vestibular Rehab                 | <input type="checkbox"/> Cervical Traction        | <input type="checkbox"/> Lymphedema Treatment           |
| <input type="checkbox"/> LSVT Big Therapy                 | <input type="checkbox"/> Pelvic Traction          | <input type="checkbox"/> Functional Capacity Evaluation |
| <input type="checkbox"/> Gait and Balance Training        | <input type="checkbox"/> TENS                     | <input type="checkbox"/> Work Reconditioning/Hardening  |
| WB Status: _____  | <input type="checkbox"/> Biofeedback              | <input type="checkbox"/> Return to Work Assessment      |
| <input type="checkbox"/> Advanced Stabilization           | <input type="checkbox"/> Contrast Bath/Whirlpool  | <input type="checkbox"/> Disability Testing             |
| <input type="checkbox"/> Med X Testing/Rehab              | <input type="checkbox"/> Bioness                  | <input type="checkbox"/> Ergonomic Assessment           |
| <input type="checkbox"/> Pediatric Transformers Program   | <input type="checkbox"/> Women's Health           |   |

Comments/Goals \_\_\_\_\_

3 x Weekly     2 x Weekly     Daily    **Number of visits** \_\_\_\_\_  
**for** \_\_\_\_\_ **weeks** \_\_\_\_\_ **months**

I  certify /  recertify that I have examined the patient and physical and/or occupational therapy is necessary, and that services will be furnished while the patient is under my care, and that the plan is established and will be reviewed every ninety (90) days or more often if the patient's condition requires. I estimate that these services will be needed for 90 days.

**R** \_\_\_\_\_

Physician Signature

Date

**PHYSICAL AND OCCUPATIONAL THERAPY APPOINTMENT INFORMATION:** When you receive this prescription please call to set up your first appointment. Bring this prescription, all insurance information such as insurance cards, forms, HMO referrals, worker's compensation or auto insurance claim numbers. Check with your insurance company if you are unsure of your physical and occupational therapy benefits. Wear or bring comfortable clothing so that the area to receive treatment can be easily exposed. Hospital gowns will be provided when needed. If it is necessary to cancel and reschedule, please try to notify us 1 day in advance.

We look forward to serving your rehabilitation needs.

For further information, you may contact us by phone or to speed your registration process, fill out / print forms online at [www.advancedphysicaltherapy.com](http://www.advancedphysicaltherapy.com) under **NEW PATIENTS**.

<b>Grand Blanc</b> 10809 S. Saginaw St. Grand Blanc, MI 48439	<b>Clio</b> 303 S. Mill St. Clio, MI 48420	<b>Flint</b> G-2241 S. Linden Rd. Suite A Flint, MI 48532	<b>Hartland</b> 11182 Highland Rd. Hartland, MI 48353	<b>Davison</b> 2138 Fairway Dr. Davison, MI 48423	<b>Goodrich</b> 7477 S. State Rd. Suite B Goodrich, MI 48438	<b>Clarkston</b> 6167 White Lake Rd. Suite 1 Clarkston, MI 48346
---	--	--	---	---	---	---