



# HOW TO DON THE NEWGAIT - TIPS AND TRICKS



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# NEWGAIT USE TIPS:

- ✓ Patient must report comfort with the device.
- ✓ Ensure patient safety when walking with appropriate assistive device/support, especially for the first few steps to feel how the bands assist and support.
- ✓ Most comfortable wearing configuration is symmetrical band placement, but the patient will determine the best fit and comfort. Band colors may be asymmetrical to provide best support and mobility.
- ✓ Start with yellow assistance and increase where needed.



# NEWGAIT USE TIPS (CONT.):

- ✓ Recommended first band placement should be in the hip abduction position to allow the wearer to become accustomed to the sensation of joint approximation and scapular depression. Bands can then be added and changed to find the Best Fit.
- ✓ Most individuals will wear a medium above knee limb strap and a small below knee. Anchors can be kept on these limb straps to avoid having to change them between users.
- ✓ When sliding on an anchor, squeeze gently the anchor from the top and bottom toward the middle. Then slide onto the limb strap from the soft side of the fastener on the limb strap to avoid catching on the rough portion.



# NEWGAIT USE TIPS (CONT.):

- ✓ The adaptability of this device is unique and is not limited to the configurations in this presentation.
- ✓ Some therapists are analytical and choose the band placements for their patient. Others allow the patient to guide the band placement based on different configurations until the “Best Fit” is obtained. There is no right or wrong method for use as long as the patient is safe and comfortable.
- ✓ Unfortunately, not every patient finds the NewGait initially beneficial. Perhaps it is not the optimal treatment option. However, unless a trial with the device is performed (barring contraindications), you may not know who the person that benefits will be. Many individuals report lasting muscle memory and some report a significant level of pain reduction following use.

# CONTRAINDICATIONS



- ✓ Not recommended to be used over instabilities, unhealed fractures, osteoporosis (caution with use of shoulder harness), significant limb edema/DVT, unhealed incisions. Check for implanted devices, devices for bowel or bladder function, etc.. Watch for bands becoming caught on items in the environment.
- ✓ Bands contain latex.
- ✓ Check bands for fraying or wear with each application.



# INDICATIONS:

- ✓ Neurological conditions, orthopedic conditions, Amputees, abnormal gait or painful movement patterns of the back, hip, and lower extremities.
- ✓ Unit has been shown to be helpful to increase gait confidence, walking speed, gait symmetry, coordination and energy expenditure. Provides joint stability in stance and mobility assist in swing phase.

# NEWGAIT: THE BEST TIP OF ALL

Please put the device on yourself in the varying combinations to know what changes to gait are possible. As you practice, you will become faster, more efficient, and more confident. The time it takes to put the device on and finding the “BEST FIT” will improve.



# WHO NEEDS TO BUY A NEWGAIT:

- ✓ If the patient would like to purchase a unit to use at home, please fill out a configuration card included in your clinician manual.
- ✓ The patient will be able to place an order at [www.thenewgait.com](http://www.thenewgait.com)

# HOW TO DON THE NEWGAIT - PART 2

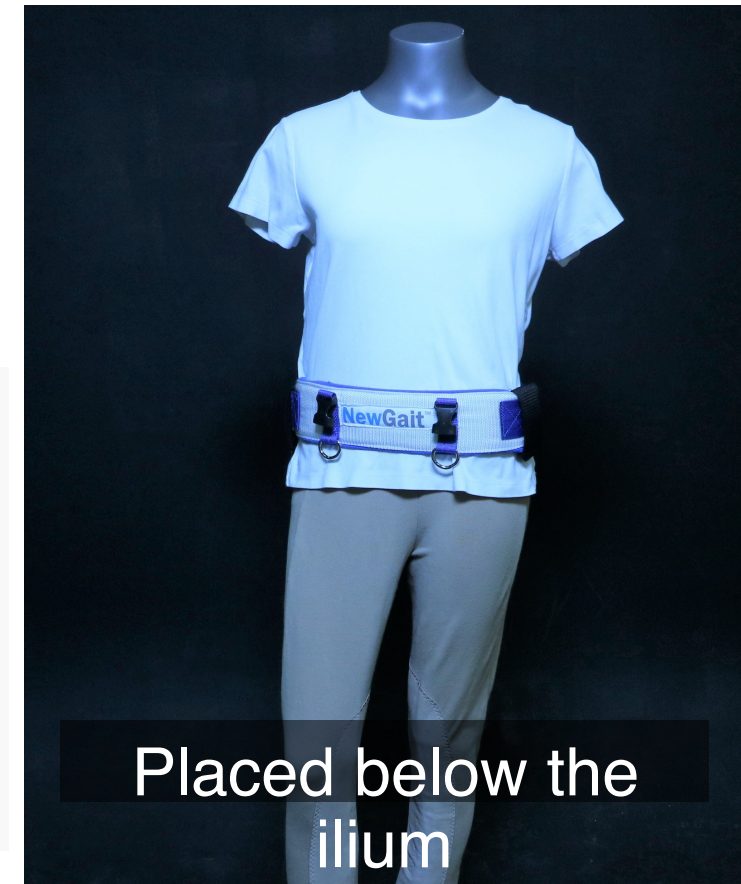
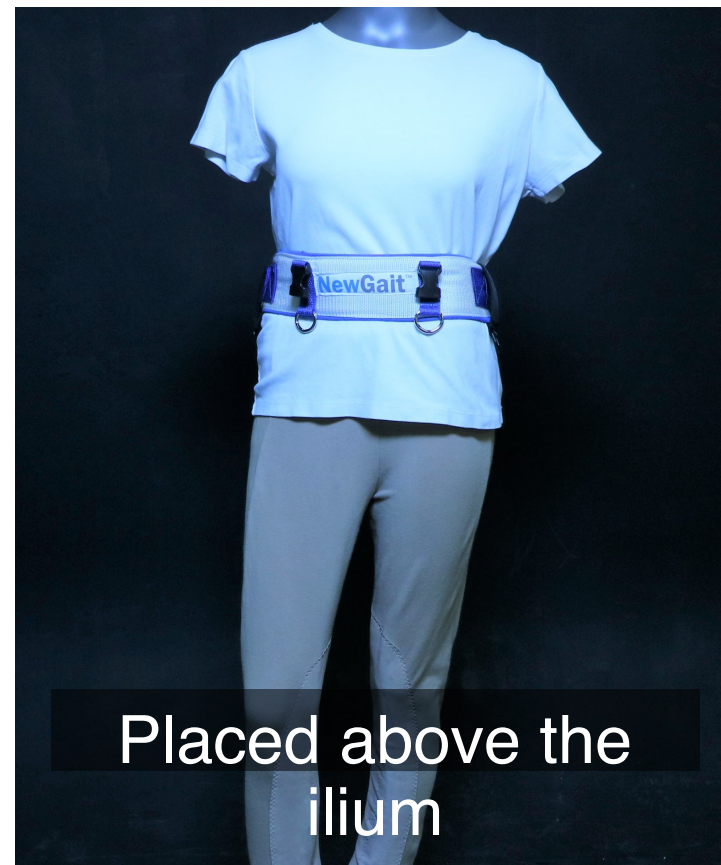
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FITTING THE WAIST  
BELT IS BASED ON  
PATIENT BODY TYPE,  
LEG LENGTH, AND  
PATIENT COMFORT.

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# SHOULDER HARNESS:



AS THE SHOULDER HARNESS IS PULLED DOWNWARD INTO POSITION, HOLD DOWN THE WAIST BELT SO IT DOES NOT RIDE UP.

Can be placed below the breast line. If the person is small, you may shorten the fasteners so there is less cross over fabric.



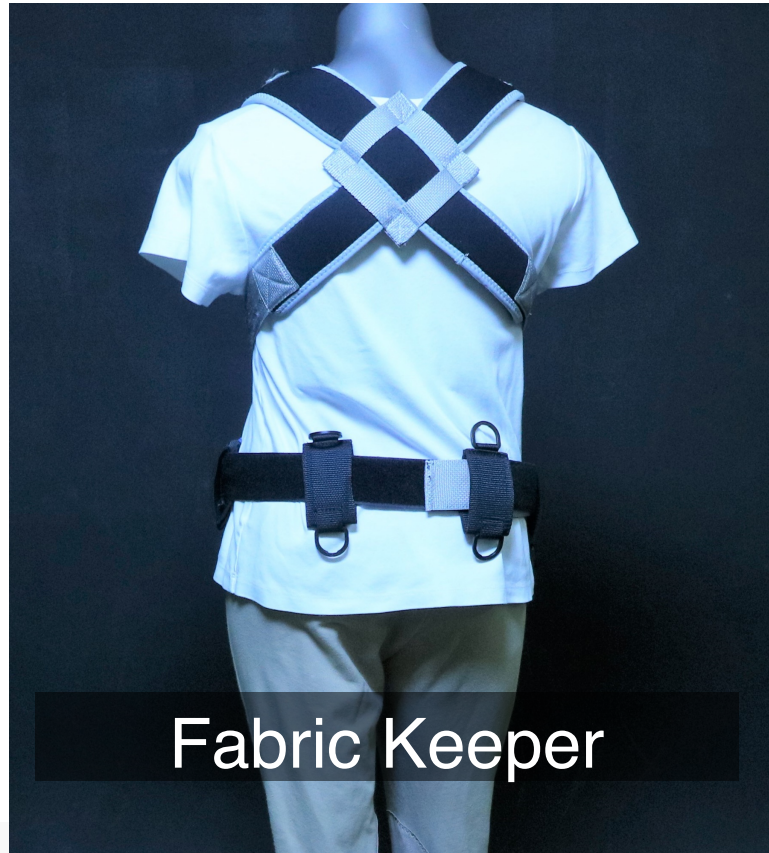
Can be placed above the breast. If the person is larger, you may wish to lengthen the harness fasteners to allow for more cross over of fabric at the chest.





# SHOULDER HARNESS:

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Plastic Keeper with  
trunk extension assist

# EXTENDERS:

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SOMETIMES TWO  
EXTENDERS ARE  
NEEDED ON THE  
WAIST BELT.



Waist Belt: Attach soft  
side of extender to belt.



Shoulder Harness:  
Attach soft side of  
extender to harness  
strap.



# FITTING LIMB STRAPS:



ATTACH 3 ANCHORS TO THE MEDIUM LIMB STRAPS  
AND A V ANCHOR TO THE SMALL LIMB STRAP.

Limb straps can be arranged to fasten toward the inside of the thigh or the outside based on user preference.



Limb straps can be fastened together or not based on user preference and patient needs.



# LIMB STRAPS:

Fastened together the limb straps are less likely to slide down or up the leg.



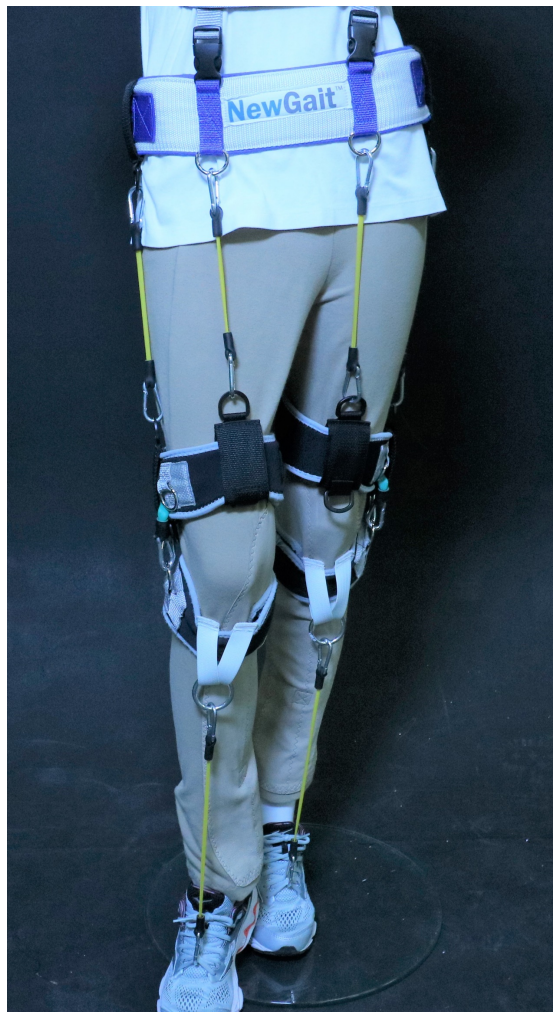
The D ring sewn onto the limb straps can be placed where needed as extra attachment sites.



# V-ANCHORS:

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V-ANCHORS ARE RECOMMENDED FOR DORSIFLEXION ASSISTANCE AS THEY ARE MORE COMFORTABLE ON THE SHIN AND LESS LIKELY TO RUB.



D-anchors on the limb straps can be placed laterally and used to attach limb straps together or attach a peroneal assistance band.

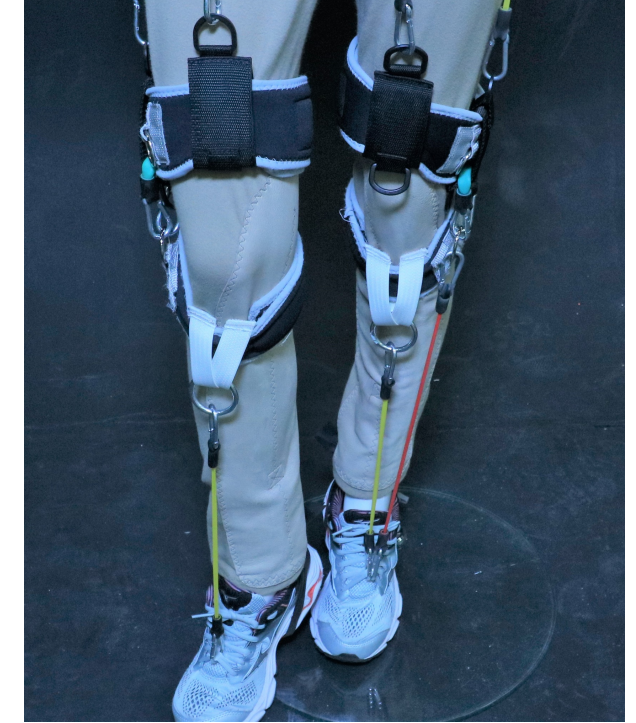
D-anchors on the limb strap in the front add greater stability to V-anchor if needed.



# SHOE ATTACHMENT OPTIONS:

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A toe loop cut from elastic resistive band and placed on widest portion of shoe. Shown in upcoming slide. For clinic use only.



Attaching to shoe laces for Dorsiflexion assist. Note the Left shoe has an optional (if needed) Peroneal Assist band.



# HOW TO DON THE NEWGAIT - PART 3

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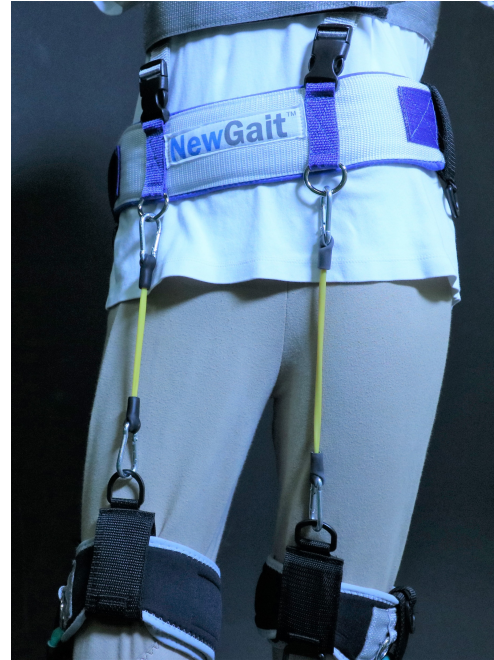






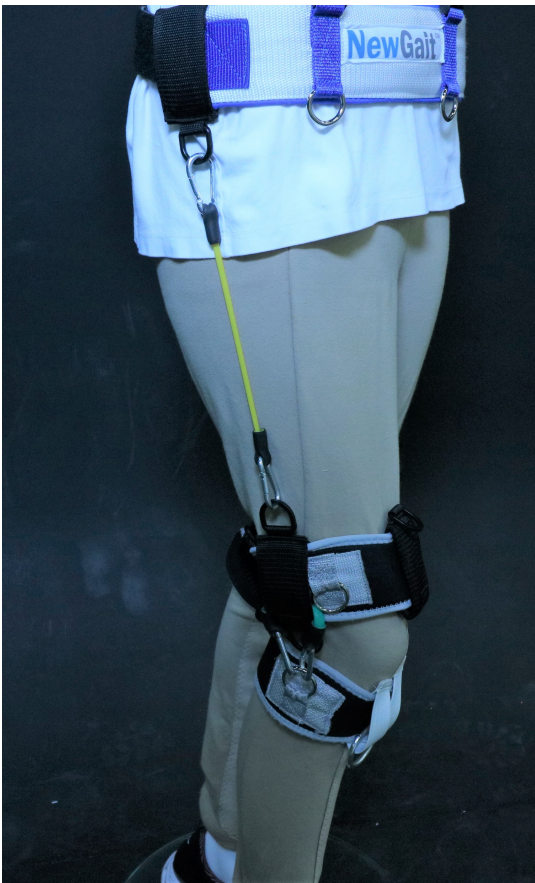
## Hip Flexion:

Increase hip flexion, assists dorsiflexion, decreases knee hyperextension, improves gait symmetry and effort. Improves running ability while helpful to decrease back pain.



## Hip Abduction:

Aids valgus knee, Trendelenburg gait, narrow step width, scissoring gait, ataxic gait, painful knees, hip and back.



# BAND PLACEMENT:

## Hip Extension:

Helps with posture, pelvic stability, gait comfort and confidence.



## Back Extension:

Helps with postural control, pelvic stability, trunk rotation and arm swing, comfort and confidence.



# BAND PLACEMENT:



# BAND PLACEMENT:

Useful for foot drop to increase knee extension. Provides proprioceptive feedback on heel strike and ground contact. For long term use, recommend use of lace shoes and/or a shoe anchor available on our website

Dorsiflexion assist: Attached to shoe laces, use a distal strap on non-lace shoe.



If using a length of elastic resistance band cut and tied and placed over widest portion of shoe, this is for in clinic use only. For long term use, a Prosthetist can fasten a D-ring to the end of the shoe.



# BAND PLACEMENT:

PLANTAR-FLEXION ASSIST WHEN THERE IS A DECREASE IN ANKLE PLANTAR-FLEXION STRENGTH, FUSED ANKLE, BACK/HIP/PIRIFORMIS AREA PAIN.

Plantar-flexion assist: Attached either to a loop or a loop made from elastic resistance band for clinic use only. Attaches to the bottom D-ring of the hip extension anchor above the knee. For home use, obtain shoes with heel loop attached.



Plantar-flexion can be placed on affected side or worn bilaterally. Useful if patient does not have or does not wear an AFO. Allows for ankle mobility when not performing gait.

# BAND PLACEMENT OPTIONS:



COMBINATIONS OF BANDS CAN BE USED TO ENHANCE GAIT STABILITY, PAIN REDUCTION, EASE OF MOVEMENT, COMFORT AND GAIT CONFIDENCE.

Combinations: 3D  
Hip is a combination of hip abduction, hip flexion, and hip extension. Provides greater support and comfort.

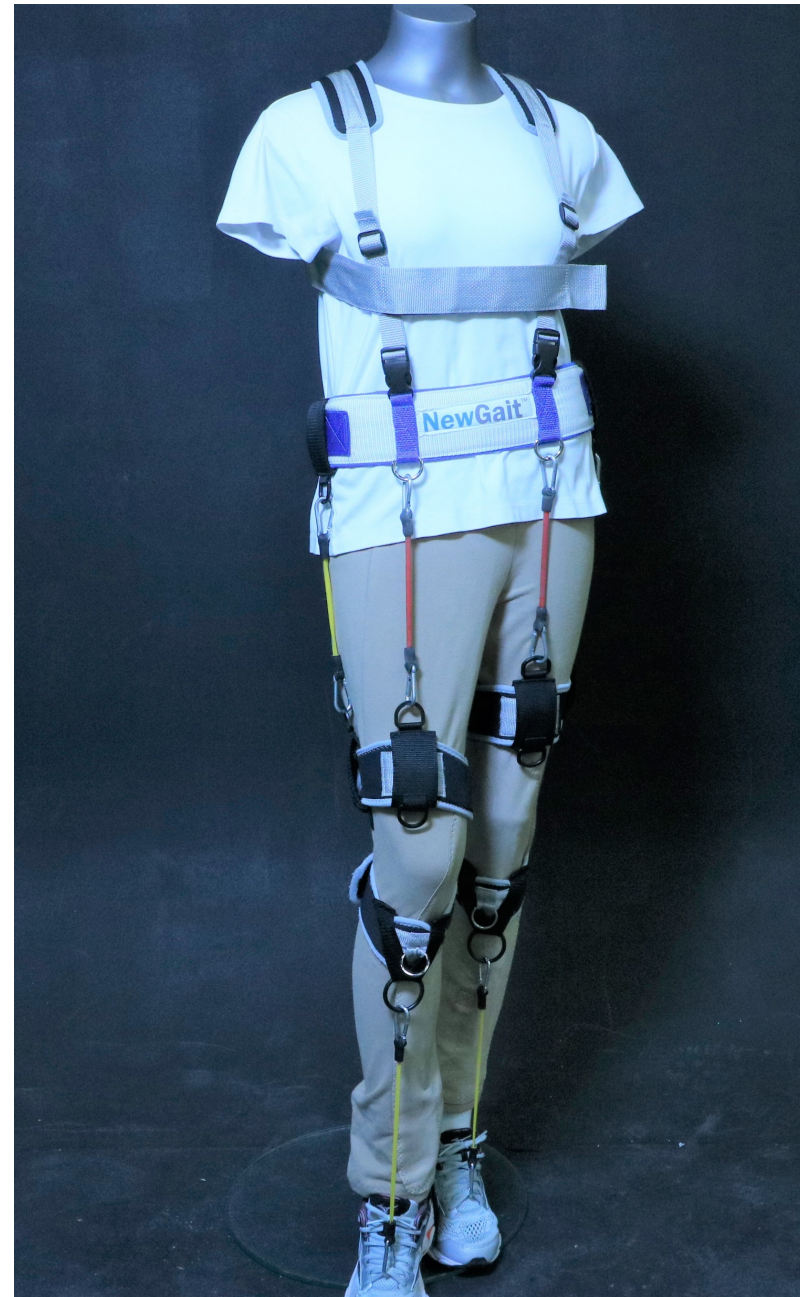


Fan configuration to help increase hip abduction and gait stability, this option can use 2 or 3 bands attaching to a single anchor point. Note the use of resistance bands to fashion an anchor where one is not placed holding the two limb straps together.



## OPTIONAL BAND PLACEMENTS:

Hip Flexion, Hip Abduction and Dorsiflexion assist.  
Helpful for hip circumduction in post stroke, Also try Plantar-flexion assist with this combination. Use of hip extension may inhibit ease of swing phase on affected side.





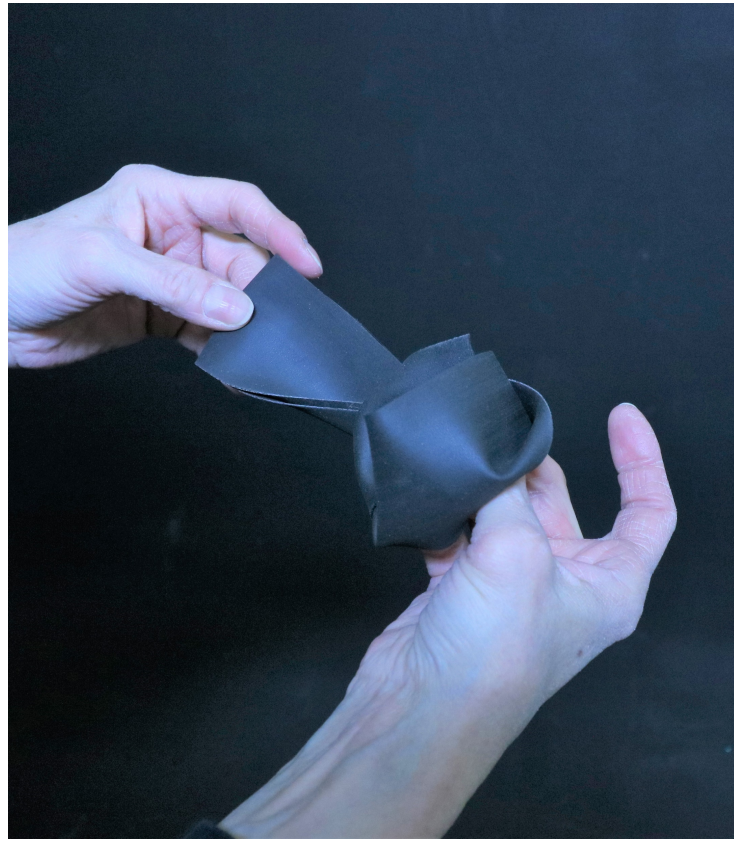
# BAND PLACEMENT OPTIONS:

## Patient/Client Participation:

- ✓ Like being fit for a new prescription of glasses, one is asked which lens allows one to see more clearly. This is how fitting the NewGait can be. As varying combinations of bands are placed, the wearer will indicate what is, or was most comfortable and supportive.

## Watch for Band Tension or Lack of Tension:

- ✓ If a band offers no stretch when tension is placed the band may be too long or the limb strap has slid to decrease tension.
- ✓ When a patient needs to sit down, loosen the hip extension bands for greater comfort and less stress on the bands.



Preparing a wrap for the shoe if there are no laces -  
Cut a length of elastic exercise band approx. 18" long.  
Fold it in half and wrap around itself to tie.



# EXTRA TIPS:

## How to Shorten an Elastic Band:

Because the metal clip has a sharp tooth this shortening method will reduce risk of tearing the band.



## How to Lengthen an Elastic Band:

Attach an unused elastic band and fasten to the metal clip thereby giving an extra inch of length.



# EXTRA TIPS:

How to Make an  
Anchor on the “Fly” -  
Fold over an unused  
elastic band and attach  
to the metal fasteners.

## When NOT TO USE THE SHOULDER HARNESS:

If patient is kyphotic and  
unable to straighten on their  
own or has osteoporosis, the  
waist belt and limb straps may  
be worn without the shoulder  
harness.





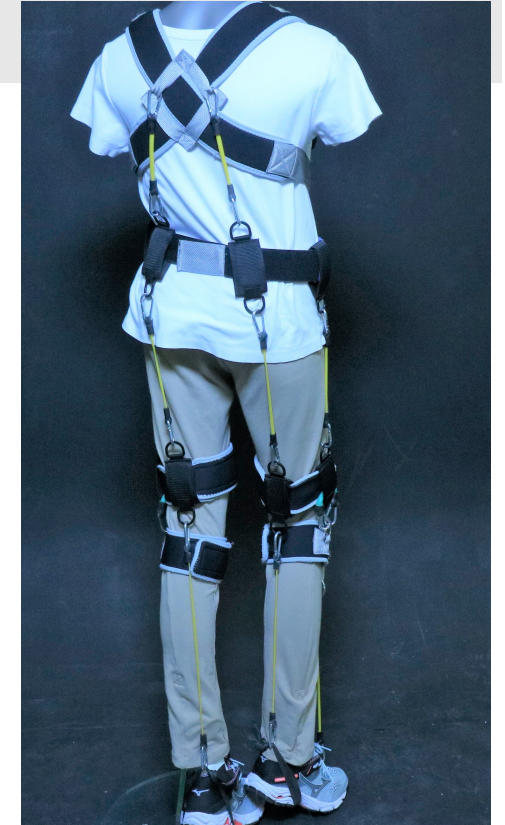
# BAND PLACEMENT OPTIONS:



3D Hip with  
bilateral Dorsi and  
Plantar-flexion.



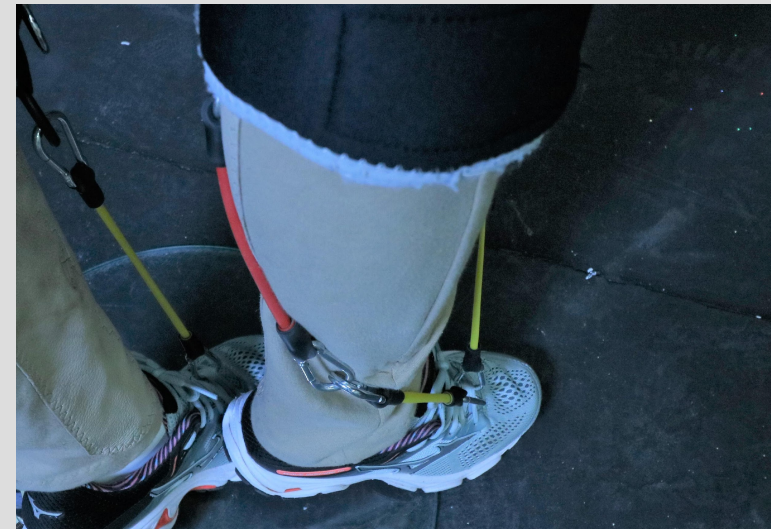
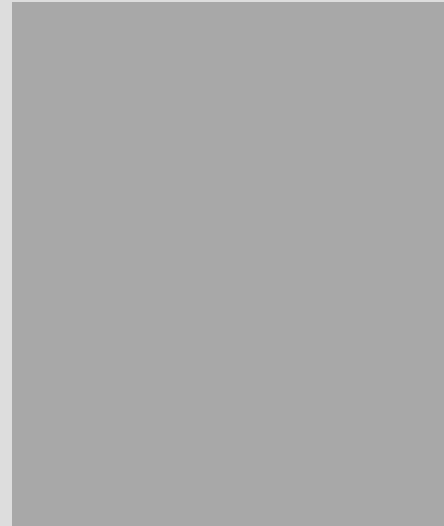
Hip Extension, Hip  
Flexion, bilateral  
Plantar-flexion.



# OTHER BAND PLACEMENT OPTIONS:

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To increase toe out:





# BAND PLACEMENT OPTIONS:

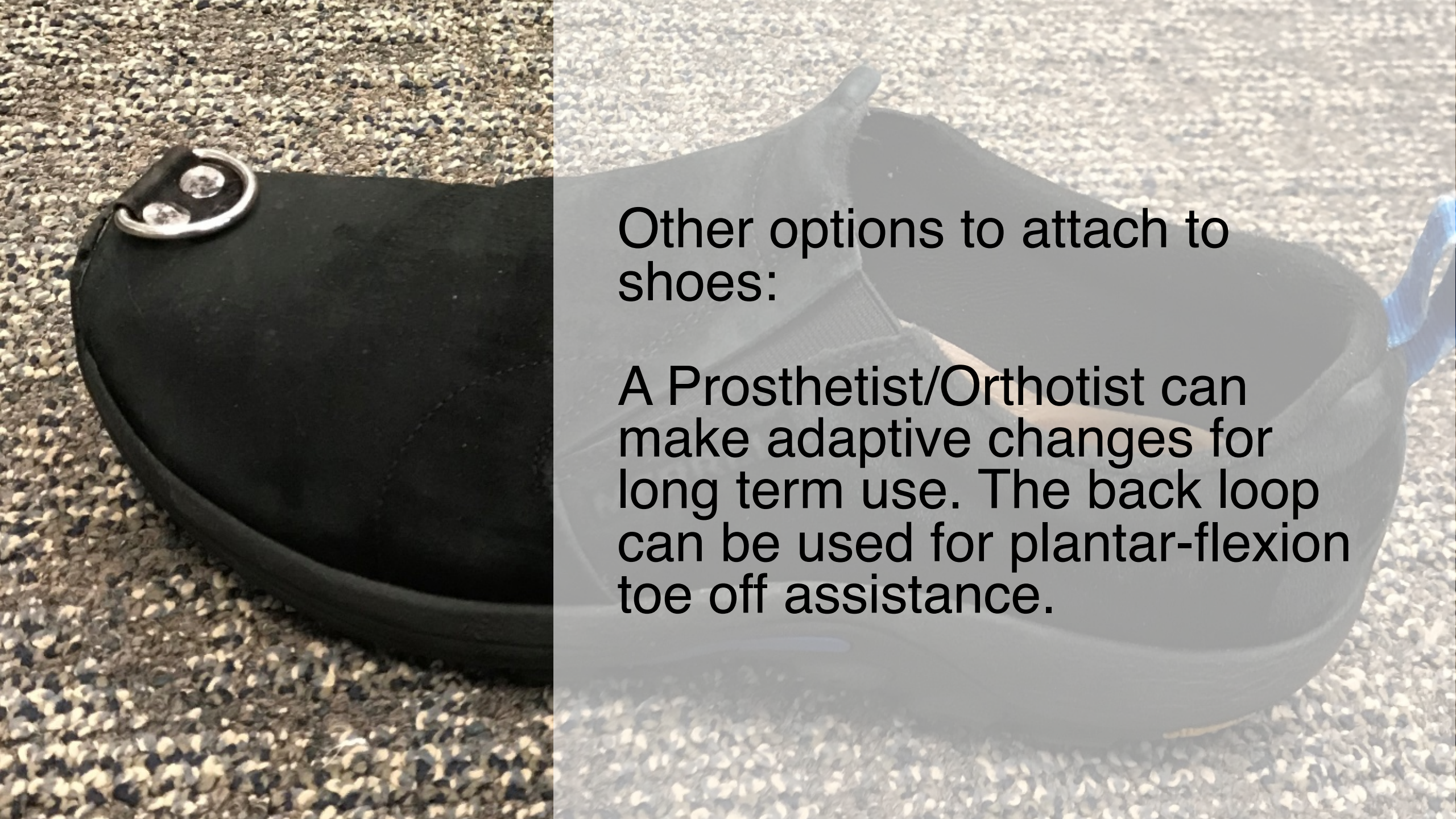
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Rotate Toe  
In:



Attaching from  
medial shoe laces  
to outer leg D-ring  
on limb strap.





Other options to attach to shoes:

A Prosthetist/Orthotist can make adaptive changes for long term use. The back loop can be used for plantar-flexion toe off assistance.



# OTHER TIPS:

To protect for hygiene purposes:

A hand towel folded lengthwise in half makes a perfect under limb strap wrap. Helps the straps stay in position.



# HOW TO CLEAN:

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May be hand washed in gentle soap, rinsed well, hang dry.  
Between uses, lightly spray and allow to dry for a minimum of 10 minutes.

