Hanger Clinic

VerteShield™ 637 LSO

Nursing Station Quick Reference

IMPORTANT: Confirm wear schedule and spinal precautions with prescribing physician prior to mobilizing the patient. Some orders specify full-time brace wear, while others indicate out-of-bed only.



SCAN QR CODE TO VIEW THE INSTRUCTIONAL VIDEOS

SUPINE DONNING

1. Lay bed flat and remove pillow as needed. Ensure gown is properly secured.
2. One staff member rolls and supports the patient on their side. A second person slides the lateral extension beneath the patient's side and centers the posterior panel along the lumbar spinous processes. Posterior-inferior trimline sits just above the gluteal apex.
3. The staff members safely return the patient to supine. Lateral extension midpoints should fall at the natural waist between the 12th rib and iliac crest.
4. Bring anterior panels forward and overlap right over left. Anterior-inferior trimline rests just above the thighs, allowing 90 degrees of hip flexion.
5. Pull both tabs simultaneously until snug compression is achieved. Secure them anteriorly.

SUPINE DOFFING

1. Lay bed flat and position the patient in supine.
2. Release both pull tabs and secure to the lateral aspect of the brace.
3. Undo anterior Velcro overlap.
4. One staff member rolls and supports the patient on their side. A second person removes the brace from behind.
5. Return patient to supine.
6. Leave tabs slack and overlap anterior portion to preserve Velcro surface.

SEATED DONNING

1. Staff assists patient to sit at the edge of the bed.
2. Center posterior panel on lumbar spinous processes. Posterior-inferior trimline sits just above the gluteal apex. Lateral extensions fall at the natural waist.
3. Bring anterior panels forward and overlap right over left. Anterior-inferior trimline rests just above the thighs.
4. Pull both tabs until snug compression is achieved. Secure them anteriorly.

SEATED DOFFING

1. Safely seat patient at the edge of the bed.
2. Release both pull tabs and secure to the lateral aspect of the brace.
3. Undo anterior Velcro overlap and remove brace.
4. Leave tabs slack and overlap anterior portion to preserve Velcro surface.

SKIN & FIT MONITORING

- Perform a skin check at least once daily. Mild redness is expected and should resolve shortly after brace removal.
- Notify the orthotist of any persistent redness or irritation.
- If the brace has migrated, fully release all closures, reposition, and re-secure.
- Recheck fit after every positional change.

KEY TIPS

- Brace may tighten from supine to seated. The right tab may need loosening when the patient is upright.
- Brace should remain snug and properly positioned at all times.
- All structural modifications must be performed by a certified orthotist or certified orthotic fitter.

CARE INSTRUCTIONS

- Hand wash with mild detergent. Air-dry flat on a clean towel. Do not store near heat or submerge.
- Hospital gown should be changed routinely and kept clean and dry. Upon discharge, the patient should wear a well-fitting single-layer undershirt each day, avoiding wrinkles, zippers, or buttons.

Questions? Contact your nearest Hanger Clinic.

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