

Easiest Way To Get  
Back On Your Feet



# FOOTBAR® Walker

ASSISTS PATIENTS AND CAREGIVERS

## Sit to Stand Mobility Aid

Patented walker features *PULLBAR* designed to improve, retrain or regain sit-to-stand (STS) transfer function often lost due to: temporary injury, surgery (hip/knee replacement), chronic medical conditions or disease progression which may be physical or neurological in nature.

### FEATURES

- Foldable
- Removable Top Bar
- Adjustable heights
- Rated to 300 lbs.
- Preassembled
- Portable

**Ideal patient:** anyone who cannot successfully pass the 30-sec. STS functional assessment tool administered by a medical professional.

### AWARDS

1. AEC Functional Independence and Dignity Award 2021
2. Today's Caregiver - Product Friendly 2021
3. Manufacturer of the Week 2021 - *U of TN Center for Indus. Svcs.*
4. Today's Caregiver - Product Friendly 2020
5. Int'l Journal - Safe Patient Handling & Mobility 2019
6. Rising Star 2019 & Future Star 2018 - *U of TN (Martin) SBDC*
7. Viewers Choice, 1st Place - *WNBj News 39*

*"The Footbar Walker is a miraculous invention! My father at age 91 broke his hip in 11 places and was able to easily use. Our family will forever be thankful for this wonderful invention."* **Kathy Callicott Ray**

*"We never would have made it without the Footbar. My husband is 6.5" and I'm 5.3". I damaged both shoulders lifting him, needed surgery and was the only help he had. I was able to recover from surgery, still use the walker and keep him out of the nursing home thanks to the Footbar Walker."* **Mrs. Wayne (Deborah) Meggs**



STS limitations are often due to lack of lower body strength or inability to safely push one's self up to a standing position due to limited Mobility Assistive Equipment (MAE) options. The Footbar Walker offers, a newly designed *pullbar* feature not available on any other MAE. Physical weakness or neurological conditions that have previously created barriers are now resolved due to the design and natural movement performed by beneficiaries who may have been previously limited. It's been demonstrated numerous times by Footbar Walker consumers, they are able to pull themselves to a standing position with ease despite a lack of strength on the first attempt.

The Footbar is safe, works at the pace of the individual and matches medically desired body form (trunk over base of support) when performing STS.

Conditions/diagnoses often suffering from lost STS function (not an exhaustive list): Osteoarthritis, Chronic pain sufferers, surgery for hip/knee replacement, amputation, Alzheimer's /dementia(s), Obesity, Progressive Supranuclear Palsy, Parkinson's, Transverse Myelitis, generalized weakness, neuromuscular diseases, Stroke, Sarcopenia, and Multiple Sclerosis.

### **Functional Information:**

- Sit-to-Stand Progression: An important movement function is an important functional movement that enables a person to safely move from a seated position to a standing position. This transfer is important for the completion of Activities of Daily Living (ADLs), and Instrumental Activities of Daily Living (IADLs), and serves as a starting point for ambulation.
- The sit to stand can also be used as part of therapeutic exercise/activities to help build lower extremity muscle strength. Research has shown that as a person ages, there is a decrease in LE muscle strength and diminished anterior weight shift during sit to stand, making the transfer more difficult to complete.
- An alteration in strength, overall body bradykinesia, balance, posture, as well as cognition may result in an impaired sit-to-stand transfer in individuals. The inability to perform this necessary, yet straightforward action leads to impaired daily functioning and poor quality of life, possibly advancing to institutionalization.

### **FOOTBAR® Benefits vs. Standard Walkers:**

- Improved efficiency of the patient transfer with the higher location of pullbar vs the handles of the standard walker allowing an improved directional resistance (pull upward to standing or resisted downward to sitting) more relevant to the targeted end position.
- Improved hand/arm/shoulder positioning with use of the pullbar on the Footbar Walker (pronation of hands, wrists in neutral position, potentially less shoulder flexion without need for abduction) vs handles of Standard Walker (wrists flexed and in ulnar deviation, increased shoulder flexion and abduction) reducing stress/strain on the patient's hands, thumbs, wrists and shoulders.
- Decrease in pulling force required by the patient due to the caregiver's ability to apply a greater resistive force downward on the footbar and opposite the patient through the pullbar rather than attempting to hold the walker down steady and in place over the top of the standard walker with arms only while patient performs sit-to-stand transfer.
- Improved stability and safety for the patient during the transfer due to caregiver's ability to apply greater resistive force downward on footbar opposite the client through the pullbar rather than attempting to hold down over the top of the standard walker with their arms only.