MEDICAL - APPLIED CURRENT/ENERGY EQUIPMENT
AS TO ELECTRICAL SHOCK, FIRE AND MECHANICAL
HAZARDS ONLY IN ACCORDANCE WITH:
CAN/CSA-C22.2No. 60601-1 (2014)
E489148

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00665-001 Rev. D
03/2018
Functional Electrical Stimulation System

CLINICIAN’S GUIDE
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Central nervous system (CNS) injuries/diseases often cause a gait disorder called foot drop. People who have foot drop are unable to raise their foot while walking. They often drag their foot, resulting in instability and increased effort during gait. Many people with CNS injuries/diseases and other disabilities also suffer from thigh muscle weakness that is concurrent with or independent of foot drop. Weak thigh muscles can cause considerable difficulties with flexing or extending the knee during ambulation.

The L300 Go System is designed to improve gait in people suffering from foot drop and knee flexion or extension in individuals with thigh muscle weakness. The L300 Go System communicates wirelessly to deliver electrical pulses over the common peroneal nerve and to the motor point of the tibialis anterior muscle, causing ankle dorsiflexion in the swing phase of gait to prevent foot drop. The L300 Go System can also deliver stimulation to the quadriceps or hamstrings, in order to provide knee flexion or extension during gait. The L300 Go System also can deliver stimulation to either or both the muscles in the upper and lower leg to facilitate muscle re-education, prevent/retard disuse atrophy, maintain or increase joint range of motion, and/or increase local blood flow.

The L300 Go System consists of a lower leg Functional Stimulation (FS) Cuff (available in regular and small sizes) with an Electronic Pulse Generator (EPG), a thigh Functional Stimulation (FS) Cuff with an EPG, an optional Control Unit, and an optional Foot Sensor. The lower leg FS Cuff and thigh FS Cuff can be used either independently or together.

The L300 Go System is designed to be used in a Hospital/Professional Healthcare Facility or Residential/Home Healthcare environment.
This L300 Go Clinician’s Guide describes:

• Important safety information about the L300 Go System.
• The components of the L300 Go System.
• How to set up, operate, and maintain the L300 Go System.
• The L300 Go Clinician’s Application software.
• How to fit the L300 Go System.
• How to program the L300 Go System.
• Troubleshooting information.

The L300 Go Clinician Kit and Clinician Programmer contains the components and accessories for fitting and programming the L300 Go System. This Clinician’s Guide describes the Clinician Kits’ contents and instructions for use. A brief description of the L300 Go System components is provided for reference. Refer to the L300 Go User’s Guide for comprehensive information on the L300 Go System Kit contents and instructions for use.

Be sure to review the User’s Guide, including all safety information, with your patients before they use the L300 Go System. If you have any questions contact the Bioness Client Relations Department at 800.211.9136, Option 3 or visit the Bioness website at: www.bioness.com.
Safety Information

Indications for Use

The L300 Go System is intended to provide ankle dorsiflexion in adult and pediatric individuals with foot drop and/or to assist knee flexion or extension in adult individuals with muscle weakness related to upper motor neuron disease/injury (e.g., stroke, damage to pathways to the spinal cord). The L300 Go System electrically stimulates muscles in the affected leg to provide ankle dorsiflexion of the foot and/or knee flexion or extension; thus, it also may improve the individual’s gait.

The L300 Go System may also:

• Facilitate muscle re-education
• Prevent/retard disuse atrophy
• Maintain or increase joint range of motion
• Increase local blood flow

Contraindications

• Patients with a demand-type cardiac pacemaker, defibrillator or any electrical implant should not use the L300 Go System.

• The L300 Go System should not be used on a leg where a metallic implant is directly underneath the electrodes.

• The L300 Go System should not be used on a leg where a cancerous lesion is present or suspected.

• The L300 Go System should not be used on a leg with a regional disorder, such as a fracture or dislocation, which could be adversely affected by motion from the stimulation.

⚠️ Warnings

• The long-term effects of chronic electrical stimulation are unknown.

• The lower leg FS Cuff and thigh FS Cuff should not be worn over swollen, infected, or inflamed areas or skin eruptions, such as phlebitis, thrombophlebitis, and varicose veins.

• Simultaneous connection of the L300 Go System to the patient and high-frequency surgical equipment may result in skin burns where the stimulator electrodes touch and damage to the EPG.

• Do not use the L300 Go System within three feet of short wave or microwave therapy equipment. Such equipment may produce instability in the EPG output.

• The L300 Go System should only be configured by an authorized clinician.

• In case of any inconvenience, turn off stimulation and remove the lower leg FS Cuff and/or thigh FS Cuff. If the stimulation cannot be turned off, remove the FSC to stop stimulation.
Precautions

- Inflammation in the region of the lower leg FS Cuff and thigh FS Cuff may be aggravated by motion, muscle activity, or pressure from the cuff. Advise patients to stop using the L300 Go System until any inflammation is gone.

- Use caution when treating patients with suspected or diagnosed heart problems.

- Advise patients to use the FS Cuff with caution:
  - If the patient has a tendency to hemorrhage following acute trauma or fracture.
  - Following recent surgical procedures when muscle contraction may disrupt the healing process.
  - Over areas of the skin that lack normal sensation.
  - Use caution with patients who have suspected or diagnosed epilepsy.

- Some patients may experience a skin irritation, an allergic reaction, or hypersensitivity to the electrical stimulation or the electrical conductive medium. Irritation may be avoided by changing the stimulation parameters, type of electrodes, or electrode placement.

- Do not use the L300 Go System without electrodes.

- After removing the lower leg FS Cuff and/or thigh FS Cuff, it is normal for the areas under the electrodes to be red and indented. The redness should disappear in approximately one hour. Persistent redness, lesions, or blisters are signs of irritation. Advise patients to stop using their L300 Go System until any inflammation is gone and to alert their clinician.

- Advise patients to stop using their L300 Go System and consult their clinician if stimulation does not start at the correct time during gait.

- Advise patients to turn off the L300 Go System when at a refueling place. Do not use the L300 Go System near flammable fuel, fumes, or chemicals.

- Only a treating clinician should determine electrode placement and stimulation settings.

- Use only the L300 Go System electrodes supplied by Bioness.

- Turn off the L300 Go System before removing or replacing the electrodes.

- Specific physician clearance should be obtained before using the L300 Go System on patients who have an alteration of normal arterial or venous flow in the region of the FS Cuff because of local insufficiency, occlusion, arteriovenous fistula for the purpose of hemodialysis, or a primary disorder of the vasculature.

- Specific physician clearance should be obtained before using the L300 Go System when patients have a structural deformity in the area to be stimulated.

- The safe use of the L300 Go System during pregnancy has not been established.

- Skin problems, on the leg where the lower leg FS Cuff and/or thigh FS Cuff is worn, may be aggravated by the L300 Go System.

- Adult supervision and assistance should be provided for anyone needing help while using the L300 Go System.

- The patient is the intended operator of the L300 Go System.
• The Control Unit neck strap is meant to be worn around the neck and if not used properly could cause bodily harm.

• Protect all electronic components from contact with water, such as from sinks, bathtubs, shower stalls, rain, snow, etc.

• Do not leave the L300 Go System stored where temperatures may exceed the acceptable environmental range: -25°C to 55°C (-13°F to 131°F). Temperature extremes can damage the components.

• Do not attempt to repair your L300 Go System. Contact Bioness if you experience a technical problem not covered in this guide.

• The lower leg FS Cuff and thigh FS Cuff is to be worn only on the leg of the patient for whom it is fitted. It should not be worn by anyone else or on any other part of the body.

• Turn off the L300 Go System before putting on the lower leg FS Cuff and/or thigh FS Cuff. Do not turn on the L300 Go System until the lower leg FS Cuff and/or thigh FS Cuff is fastened in place.

• Advise patients to shut off the L300 Go System before driving, operating machinery, or performing any activity in which involuntary muscle contractions could injure you.

• Protect the L300 Go System electronic components from condensation. When moving the components between hot and cold temperatures, place them in an airtight plastic bag, and let them slowly (for at least two hours) adjust to the temperature change before use.

• Medical electrical equipment needs special precautions for electromagnetic compatibility.

• Advise patients to remove the L300 Go System before undergoing any diagnostic or therapeutic medical procedure such as Xray examination, ultrasound, MRI, etc.

• While the L300 Go (small lower cuff) is designed to fit and be worn by both pediatric patients and small individuals, the system is intended to be managed and maintained only by adult users, adult caregivers and/or healthcare professionals.

Adverse Reactions

In the unlikely event that any of the following occurs, advise patients to stop using their L300 Go System immediately and consult their physician:

• Signs of significant irritation or pressure sores where the FS Cuff contacts the skin

• A significant increase in muscle spasticity

• A feeling of heart-related stress during stimulation

• Swelling of the leg, knee, ankle, or foot

Skin irritations and burns beneath the electrodes have been reported with the use of powered muscle stimulators.
Skin Care Guidelines

In the absence of proper skin care, extended use of electrical stimulation may cause skin irritation or a skin reaction to the electrodes or the lower leg FS Cuff and thigh FS Cuff. Skin irritation tends to occur after approximately three months of use. To promote healthy skin with long-term use of the L300 Go System, it is important to follow a daily skin-care routine.

• Clean the skin where the electrodes adhere with a wet washcloth. If any oils or lotions are on the skin, then clean with soap and water. Rinse well.

• Always check the skin for redness or a rash when putting on and taking off the lower leg FS Cuff and/or thigh FS Cuff.

• Replace the electrodes every two weeks or more frequently, even if they appear to be in good condition.

• If the patient uses cloth-based electrodes, for optimal performance, advise them to wet them before use and after every 3-4 hours.

• After taking off the lower leg FS Cuff and/or thigh FS Cuff, always re-cover hydrogel electrodes with the protective plastic covers, where applicable.

• Excess body hair where the electrodes adhere may reduce electrode contact with the skin. If necessary, remove excess body hair with an electric shaver or scissors. Do not use a razor. A razor can irritate the skin.

• When positioning the lower leg FS Cuff and/or thigh FS Cuff, make sure the electrodes uniformly contact the skin.

• Ventilate the skin by removing the lower leg FS Cuff and thigh FS Cuff for at least 15 minutes every three to four hours.

If skin irritation or a skin reaction occurs, patients should stop using their L300 Go System immediately and contact their clinician or dermatologist. They can also contact Bioness Technical Support at 800.211.9136, Option 3. Patients should resume use only when the skin is completely healed, and then follow a skin conditioning protocol per the recommendation of their health-care specialist.
Environmental Conditions that Affect Use

Radio Frequency (RF) Communication Information

Several components of the L300 Go System communicate via radio communication and have been tested and found to comply with the limits for a Class B digital device, pursuant to Part 15 (RF Devices) of the FCC (Federal Communications Commission) Rules. These limits are designed to provide reasonable protection against harmful interference in a residential installation. This equipment generates, uses, and can radiate RF energy and, if not installed and used in accordance with the instructions, may cause harmful interference to radio communications. However, there is no guarantee that interference will not occur in a particular installation. If this equipment does cause harmful interference to radio or television reception, which can be determined by turning the equipment off and on, the user is encouraged to try to correct the interference by one or more of the following measures:

- Reorient or relocate the receiving antenna.
- Increase the separation between the equipment and receiver.
- Consult the dealer or an experienced radio/TV technician for assistance.

The antenna for each transmitter must not be co-located or operating in conjunction with any other antenna or transmitter.

Portable and mobile RF communications equipment can affect the L300 Go System.

Conformity Certification

The L300 Go System complies with Part 15 of the FCC rules. Operation is subject to the following two conditions:

1. This device may not cause harmful interference.
2. This device must accept any interference received, including interference that may cause undesired operation.

This equipment complies with FCC RF radiation exposure limits set forth for an uncontrolled environment.

Travel and Airport Security

The L300 Go System charger with interchangeable blades is compatible with Australian, U.K., European Union, and U.S. voltages: 100-240V, 50/60 Hz.

Advise patients to turn off their L300 Go System before going through airport security and to wear loose clothing so they can easily show the security person their L300 Go System. The L300 Go System will likely set off the security alarm. Patients should be prepared to remove the L300 Go System so that security can scan it, or ask for the system to be scanned if they do not want to remove it. It is recommended that patients carry a copy of their L300 Go System prescription.

Patients can request a copy of their prescription by contacting Bioness or their physician.
Note: The L300 Go System contains radio transmitters. The Federal Aviation Administration rules require that all radio-transmitting devices be turned off during flight. Consult with your airline about use of Bluetooth Low Energy before turning on your L300 Go system in flight.

Electromagnetic Emissions

The L300 Go System needs special precautions regarding electromagnetic compatibility (EMC). The system needs to be installed and put into service according to the EMC information provided in this manual. See Chapter 15.

The L300 Go System was tested and certified to use the following:

- AC Adapter with interchangeable blades, model number LG4-7200, supplied by Bioness Inc. Manufactured by Kuantech(Veihai) Co., Ltd.
- Magnetic Charging Cord, model number LG4-7100, supplied by Bioness Inc. Manufactured by Onanon, Inc.

⚠️ Warnings

- Do not use the L300 Go System within three feet (1 meter) of shortwave or microwave therapy equipment. Such equipment may produce instability in the output of the EPG.
- Remove the L300 Go System before undergoing any diagnostic or therapeutic medical procedure such as Xray examination, ultrasound, Magnetic Resonance Imaging (MRI), etc.
- The L300 Go System should not be used adjacent to or stacked with other equipment. If adjacent or stacked use is necessary, the equipment or system should be observed to verify normal operation in the configuration in which it will be used.
- The use of accessories, transducers, and cables other than those specified (with the exception of transducers and cables sold by the manufacturer of the L300 Go System as replacement parts for internal components) may result in increased emissions or decreased immunity of the L300 Go System.
- The L300 Go System may be interfered with by other equipment, even if that other equipment complies with CISPR (International Special Committee on Radio Interference, International Electrotechnical Commission) emission requirements.
- If the audio alert volume level is lower than the ambient levels, the ambient levels can impede user recognition of the alert conditions.
The L300 Go System

The L300 Go System consists of a lower leg Functional Stimulation (FS) Cuff with an Electronic Pulse Generator (EPG), a thigh Functional Stimulation (FS) Cuff with an EPG, a Control Unit, and an optional Foot Sensor.

The L300 Go System has two different types of system kits: Lower Leg and Thigh. The components in the Lower Leg System Kit communicate wirelessly to stimulate the common peroneal nerve (normally found posterior and slightly distal to the head of the fibula) to contract the tibialis anterior and peroneal muscles, thus causing balanced dorsiflexion (without excessive inversion or eversion). The components in the Thigh System Kit communicate wirelessly to stimulate the quadriceps or hamstrings in order to provide knee flexion or extension.

Lower Leg FS Cuff

The lower leg FS Cuff is an orthosis that fits on the leg directly under the patella and is designed to facilitate upward movement of the foot and toes. See Figure 4-1. The lower leg FS Cuff is available in right and left configurations and in two sizes (regular and small). The lower leg FS Cuff houses the EPG cradle, the lower leg EPG, and integrated electrodes. It also includes an anatomically designed locator for accurate placement on the leg and a strap that can be fastened with one hand.

Thigh FS Cuff

The thigh FS Cuff is a low-profile orthosis that fits above the knee, centered on the back or front of the thigh. It is designed to assist with knee flexion or extension. See Figure 4-2. The thigh FS Cuff is available in right and left configurations.
The thigh FS Cuff houses the EPG cradle, the thigh EPG, and integrated electrodes. It also features a locator used to accurately place the thigh FS Cuff on the leg and to ensure repeatable electrode contact. The thigh FS Cuff has adjustable straps that hold the cuff in place on the thigh. The thigh FS Cuff can be used either on its own or in conjunction with the lower leg FS Cuff.

![Figure 4-2: Thigh FS Cuff](image)

The effectiveness of eliciting muscle contraction force in the thigh FS Cuff depends on amplitude, duration, frequency, and waveform of the electrical stimulation signal. The clinician can impact the force, efficiency, and timing of the muscle contraction by adjusting stimulation parameters to provide sufficient knee flexion or extension during walking.

**Lower Leg EPG and Thigh EPG**

The lower leg EPG generates the electrical stimulation used to contract the muscles in the leg that lift the foot and toes. The EPG contains an integrated motion sensor and gait detection algorithm to synchronize electrical stimulation with the gait events (heel on and heel off). The lower leg EPG also responds to standard Bluetooth® Low Energy (BLE) wireless signals from the Control Unit and optional Foot Sensor. If a patient is wearing both the lower leg FS Cuff and the thigh FS Cuff, the lower leg EPG will also send wireless signals to the thigh EPG.

The thigh EPG generates the electrical stimulation used to flex or extend the knee. The thigh EPG responds to wireless signals from the Control Unit, lower leg EPG (for patients that are using the Lower FS Cuff with the thigh Cuff), and the Foot Sensor to turn stimulation on or off.

The effectiveness of eliciting muscle contraction force depends on amplitude, duration, frequency, and waveform of the electrical stimulation signal. The clinician can impact the force, efficiency, and timing of the muscle contraction by adjusting stimulation and gait parameters. The EPG can activate either one or two stimulation channels, depending on type of the cuff and electrode pre-set. Refer to the "Patient Programming" chapter in this guide for more information.

Patients can also control the electrical stimulation from controls on the EPG or wirelessly with the Control Unit. The EPG includes four buttons, two indicator lights, and a rechargeable battery (lithium ion 1000 mAh battery). See Figure 4-3, Table 4-1, and Table 4-2. The EPG emits an audio alert when wireless communication fails or the component malfunctions.
The EPG snaps into the EPG cradles on the cuffs and should only be removed from the cradle for maintenance and when cleaning the cuffs. The battery charging port is located at the bottom of the EPG under a flexible cover.

![EPG Diagram](image)

The EPG emits visual (see Table 4-1) and/or audio feedback when: an EPG button is pushed, stimulation is being delivered, an error has been detected, or when the battery level is low. The EPG provides vibration feedback when: an EPG button is pushed, stimulation is being delivered, or when an error is detected.

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<tr>
<td>Status Indicator Light</td>
<td>(Flashing) Flashing Green Light</td>
<td>Flashing Green Light</td>
<td>EPG is On, No Stimulation</td>
</tr>
<tr>
<td></td>
<td>(Flashing) Flashing Yellow Light</td>
<td>Flashing Yellow Light</td>
<td>EPG is On and Delivering Stimulation</td>
</tr>
<tr>
<td></td>
<td>(Solid) Solid Yellow Light</td>
<td>Solid Yellow Light</td>
<td>EPG is On and Delivering Manual Stimulation</td>
</tr>
<tr>
<td></td>
<td>(Alternating) Alternating Green, Yellow, and Red Light</td>
<td>Alternating Green, Yellow, and Red Light</td>
<td>Pairing Mode</td>
</tr>
<tr>
<td></td>
<td>(Flashing) Flashing Red Light</td>
<td>Flashing Red Light</td>
<td>Active Error / EPG Malfunction/ Battery Level-Empty</td>
</tr>
<tr>
<td>Battery Indicator Light</td>
<td>(Flashing) Flashing Green Light</td>
<td>Flashing Green Light</td>
<td>EPG Battery is Charging</td>
</tr>
<tr>
<td></td>
<td>(Solid) Solid Green Light Briefly at Power Up</td>
<td>Solid Green Light Briefly at Power Up</td>
<td>EPG Charging is Complete</td>
</tr>
<tr>
<td></td>
<td>(Solid) Solid Yellow Light</td>
<td>Solid Yellow Light</td>
<td>EPG Battery Level is Low</td>
</tr>
</tbody>
</table>

Table 4-1: EPG Displays

<table>
<thead>
<tr>
<th>EPG Button</th>
<th>Description</th>
<th>Function</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Power button</td>
<td>Turns the System On or Off</td>
</tr>
<tr>
<td></td>
<td>Stim button</td>
<td>Turns Stimulation On or Off in the Current Selected Mode</td>
</tr>
<tr>
<td></td>
<td>Plus button</td>
<td>Increase Stimulation Intensity</td>
</tr>
<tr>
<td></td>
<td>Minus button</td>
<td>Decrease Stimulation Intensity</td>
</tr>
</tbody>
</table>

Table 4-2: EPG Button Functions
Control Unit

The Control Unit is an optional handheld controller that wirelessly communicates with the L300 Go System. The Control Unit sends and receives wireless communication from the EPG(s) and Foot Sensor. It is used to select an operating mode, turn stimulation on/off, fine-tune stimulation intensity, adjust EPG audio feedback volume, and monitor system performance.

The Control Unit includes six buttons and an LCD display. See Figure 4-4, Table 4-3, and Table 4-4. It is powered by a single button cell lithium battery (CR2032 battery). The Control Unit LCD Display screen communicates the L300 Go System performance. It displays stimulation intensity level, operating mode, battery charge status, electronic registration status, and error messages. See Table 4-4.

![Control Unit](image)

Figure 4-4: Control Unit

<table>
<thead>
<tr>
<th>Control Unit Button</th>
<th>Description</th>
<th>Function</th>
</tr>
</thead>
<tbody>
<tr>
<td>▲</td>
<td>Select button</td>
<td>Selects an EPG</td>
</tr>
<tr>
<td>~</td>
<td>Stim button</td>
<td>Turns Stimulation On or Off in the Current Selected Mode</td>
</tr>
<tr>
<td>+</td>
<td>Plus button</td>
<td>Increase Stimulation Intensity</td>
</tr>
<tr>
<td>-</td>
<td>Minus button</td>
<td>Decrease Stimulation Intensity</td>
</tr>
<tr>
<td>Volume button</td>
<td></td>
<td>Turns the EPG Audio Feedback On or Off</td>
</tr>
<tr>
<td>Mode button</td>
<td></td>
<td>Selects Gait or Training Mode</td>
</tr>
</tbody>
</table>

Table 4-3: Control Unit Button Functions

<table>
<thead>
<tr>
<th>LCD Display Icons</th>
<th>Description</th>
<th>Function</th>
</tr>
</thead>
<tbody>
<tr>
<td>▣</td>
<td>EPG- Ready State icon</td>
<td>System is communicating with EPG, but not delivery stimulation</td>
</tr>
<tr>
<td>▣</td>
<td>EPG- Stim State icon</td>
<td>System is communicating with EPG and EPG is delivering stimulation</td>
</tr>
<tr>
<td>▣ (flashing)</td>
<td>EPG- Error State icon</td>
<td>Error detected with EPG that is flashing</td>
</tr>
<tr>
<td>▣</td>
<td>Selection icon</td>
<td>Indicates selected EPG</td>
</tr>
<tr>
<td>LCD Display Icons</td>
<td>Description</td>
<td>Function</td>
</tr>
<tr>
<td>-------------------</td>
<td>---------------------------------</td>
<td>---------------------------------------------------------------</td>
</tr>
<tr>
<td><img src="image" alt="Foot Sensor icon" /></td>
<td>Foot Sensor icon</td>
<td>System is communicating with Foot Sensor</td>
</tr>
<tr>
<td>(flashing)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><img src="image" alt="Foot Sensor Error icon" /></td>
<td>Foot Sensor Error icon</td>
<td>Error detected with Foot Sensor</td>
</tr>
<tr>
<td><img src="image" alt="Gait Mode icon" /></td>
<td>Gait Mode icon</td>
<td>System is in Gait Mode</td>
</tr>
<tr>
<td><img src="image" alt="Training Mode icon" /></td>
<td>Training Mode icon</td>
<td>System is in Training Mode</td>
</tr>
<tr>
<td><img src="image" alt="Battery Level (Normal) icon" /></td>
<td>Battery Level (Normal) icon</td>
<td>Battery is charged for the selected EPG</td>
</tr>
<tr>
<td>(flashing)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><img src="image" alt="Battery Level (Low) icon" /></td>
<td>Battery Level (Low) icon</td>
<td>Battery level is low and needs to be recharged for the selected EPG</td>
</tr>
<tr>
<td>(flashing)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><img src="image" alt="Error icon" /></td>
<td>Error icon</td>
<td>System has detected an error</td>
</tr>
<tr>
<td>(flashing)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><img src="image" alt="Volume icon" /></td>
<td>Volume icon</td>
<td>Indicates that audio/tactile feedback is possible</td>
</tr>
<tr>
<td><img src="image" alt="Numeric Indicator-Stimulation Intensity Level" /></td>
<td>Numeric Indicator-Stimulation Intensity Level</td>
<td>Displays current stimulation intensity level</td>
</tr>
<tr>
<td><img src="image" alt="Numeric Indicator-Error" /></td>
<td>Numeric Indicator-Error</td>
<td>Alternates between “E” and the number of the error</td>
</tr>
<tr>
<td><img src="image" alt="Numeric Indicator-Pairing" /></td>
<td>Numeric Indicator-Pairing</td>
<td>“P” appears indicating that the control unit is in pairing mode</td>
</tr>
</tbody>
</table>

Table 4-4: Control Unit LCD Display Icon Descriptions

**L300 Go System Operating Modes**

The L300 Go System has three operating modes: gait, training, and clinician.

**Gait Mode**

Gait mode is used for walking. In gait mode, the stimulation is synchronized with gait events, using either the EPG integrated motion sensors or the Foot Sensor, to achieve dorsiflexion and knee extension or flexion when the heel or forefoot leaves the ground and relaxation after heel or forefoot makes contact with the ground.

During gait, the stimulation of the lower leg EPG and/or the thigh EPG is controlled by the same gait event detector: either via the motion sensor in the lower EPG or via the Foot Sensor, at the appropriate phase of gait.

**Training Mode**

Training mode is used to train muscles when the patient is not walking (e.g., sitting, standing, or lying down). Training mode works independently of the Foot Sensor and the motion sensors in the lower leg EPG. Stimulation is delivered in pre-set cycles.
Clinician’s Guide

For lower leg FS Cuff users training mode is designed to facilitate muscle re-education, prevent or retard disuse atrophy of the lower leg muscles, maintain or improve range of motion of the ankle joint, and improve local blood circulation. For thigh FS Cuff users training mode is designed to facilitate muscle re-education, prevent or retard disuse atrophy of the thigh muscles, maintain or improve range of motion of the knee joints, and improve local blood circulation.

Clinician Mode

Clinician mode allows the clinician to apply enhanced training. Clinician mode is used to start/pause stimulation in the lower leg FS Cuff and thigh FS Cuff independently or simultaneously. The clinician may select clinician mode to enhance training to include, for example, balance training in acute and sub-acute patients. Clinician mode uses the stimulation parameters set for gait mode. The clinician can enable clinician mode by pressing and holding for five seconds the Stim and Minus buttons on the Control Unit. Pressing on the Stim button will deliver manual stimulation to the selected Cuffs while the Stim button is pressed. To exit Clinician Mode, press the Mode button.

Foot Sensor

The Foot Sensor is an optional component of the L300 Go System. The Foot Sensor uses a dynamic gait tracking algorithm to detect whether the foot is on the ground or in the air and transmits wireless signals to the EPG(s) to synchronize stimulation according to the gait pattern.

**Note:** The Foot Sensor is required for the Thigh Stand-Alone L300 Go System. The Foot Sensor will send the wireless signal to the thigh EPG to turn stimulation on/off.

The Foot Sensor features a pressure sensor, transmitter, and clip. See Figure 4-5. The pressure sensor fits under the insole of the patient’s shoe. The transmitter is worn clipped to the inner rim of the shoe. The Foot Sensor also includes two indicator lights and is powered by a single button cell lithium battery (CR2032 battery). See Figure 4-5 and Table 4-5.

⚠️ **Caution:** The Foot Sensor has not been validated for use by individuals weighing more than 300 lbs (136 kg).

⚠️ **Caution:** Do not use the Foot Sensor with a rigid insole, such as a custom rigid orthosis or an ankle foot orthosis.
<table>
<thead>
<tr>
<th>Foot Sensor</th>
<th>Display</th>
<th>Description</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Indicator Light</strong></td>
<td><img src="image1.png" alt="Image" /> (Flashes Twice)</td>
<td>Green Light Flashes Twice</td>
<td>Foot Sensor is Active</td>
</tr>
<tr>
<td></td>
<td><img src="image2.png" alt="Image" /> (Flashing)</td>
<td>Slowly Flashing Green Light</td>
<td>Pairing Mode</td>
</tr>
<tr>
<td></td>
<td><img src="image3.png" alt="Image" /> (Flashes for 5 Seconds)</td>
<td>Red Light Flashes for 5 Seconds</td>
<td>Low Battery</td>
</tr>
<tr>
<td></td>
<td><img src="image4.png" alt="Image" /> (Solid)</td>
<td>Solid Red Light</td>
<td>Error</td>
</tr>
</tbody>
</table>

Table 4-5: Foot Sensor Displays

### Charging the L300 Go System

The lower leg EPG and thigh EPG are the only L300 Go System components that can be charged. The EPG(s) must be charged daily and Bioness recommends charging the EPG(s) while attached to the FS Cuff(s).

The EPG(s) will need to be charged with the system charger set that is included in the L300 Go System Kits. The system charger set includes a dual USB 3.1A 15w AC adapter, charging adapters for U.S. and international outlets, and a magnetic USB charging cable.

**To charge the L300 Go System:**

1. Remove the System Charger Set from the packaging and select the proper adapter for your country or region.

2. Insert the USB end on the magnetic charging cable into any of the two available USB ports on the AC adapter. If you are charging both the lower leg FS Cuff and thigh FS Cuff, connect an additional USB charging cable to the AC adapter. See Figure 4-6.

![Figure 4-6: Inserting USB Charging Cable into AC Adapter](image5.png)

3. Connect the magnetic end on the charging cable to the charging port on the lower leg EPG and/or thigh EPG. The charging port is located at the bottom of the EPG under a flexible cover. See Figure 4-7.

4. Plug the AC adapter with connected magnetic USB charging cable(s) into a power outlet.

5. The battery indicator light on the EPG(s) will flash green to indicate charging.

6. The battery indicator light on the EPG(s) is a solid green when the system is fully charged.
Caution: Use only the charger included in the L300 Go System Kit. Use of any other charger could damage the system.

Caution: To completely disconnect the power input, the AC adapter portion of the System Charger Set must be disconnected from the main power supply.

Turning the L300 Go System On/Off

To turn on the L300 Go System, press the Power button once on the lower leg EPG and/or thigh EPG. The system will be in a ready state. All indicator lights will light up for a few seconds while the system performs a self-test. The Status Indicator Light on the EPG(s) will flash green to indicate the system is on.

To turn off the L300 Go System, press and hold the Power button, for three seconds, on the lower leg EPG and/or thigh EPG. The EPG will vibrate when turning off.

Selecting an Operating Mode Using the Control Unit

There are two different operating modes (Gait Mode and Training Mode) that can be selected using the Control Unit.

To select an operating mode using the Control Unit:

1. Turn on the lower leg EPG and/or thigh EPG by pressing the power button on the EPG(s).
2. Turn on the Control Unit by pressing any button.
3. The paired EPG(s) will appear in the digital display on the Control Unit with the Selection Indicator icon around the EPG Indicator icon(s). See Figure 7-1.
4. For patients using both the lower leg FS Cuff and thigh FS Cuff the Select button on the Control Unit can be used to toggle between the lower leg EPG and thigh EPG or to select both EPGs. See Figure 4-8.
5. To select gait mode, press the Mode button on the Control Unit until the Gait Indicator icon appears in the lower right corner of the digital display. See Figure 4-8.

6. To select training mode, press the Mode button on the Control Unit until the Training Indicator icon appears in the lower right corner of the digital display. See Figure 4-8.

![Figure 4-8: Selecting a Operating Mode on the Control Unit](image)

7. To activate gait or training mode, press the Stim button on the Control Unit.

8. The Status Indicator Light on the EPG(s) will change to a flashing yellow light.

9. To unpair the Control Unit from an EPG, simultaneously press mode and Stim button for five seconds. Selection Indicators will appear without EPG icons confirming unpairing was successful.

To turn on an operating mode using the EPG:

10. Turn on the lower leg EPG and/or thigh EPG by pressing the Power button on each of the EPG(s).

11. Press the Stim button on one of the EPG(s) to activate gait mode.

12. Press and hold the Stim button on the EPG for three seconds to activate training mode. Press Stim button for over three seconds to return to gait mode.

When the EPG is first turned on and the Stim button is pressed it will always activate gait mode, unless it was previously in training mode and was not powered off. The Control Unit can also be used to switch to training mode. Once training mode has been selected on the Control Unit, the Stim button on the EPG can be used to activate the selected operating mode.

Adjusting Stimulation Intensity

When gait or training mode is first activated the stimulation intensity level will always be "5". This level is set by your clinician. Normally, you will not need to adjust stimulation intensity other than when walking on different surfaces or in different shoes.

Note: An intensity level of “0” equals no stimulation.
To adjust stimulation intensity (for patients using the lower leg FS Cuff or the Thigh Stand-Alone FS Cuff):

1. Press the Plus or Minus button on the Control Unit or on the EPG to increase or decrease the stimulation intensity. See Figure 4-9.
2. The new level number will appear in the digital display on the Control Unit.

To adjust stimulation intensity (for patients using both the lower leg FS Cuff and the thigh FS Cuff):

1. The stimulation intensity will need to be adjusted separately for each connected EPG. Press the Select button on the Control Unit to select either the lower leg EPG or thigh EPG. See Figure 4-9.
2. Press the Plus or Minus button on the Control Unit to increase or decrease the stimulation intensity. See Figure 4-9.
3. The new level number will appear in the digital display on the Control Unit.
4. Repeat steps one through three for the other connected EPG.

Note: The stimulation intensity can also be adjusted without using the Control Unit, by pressing the Plus or Minus buttons on each of the EPGs.

Audio and Vibration Feedback During Stimulation

The EPG has the capability to provide audio and vibration feedback when stimulation is being delivered. The audio and vibration feedback setting is controlled by the L300 Go Clinician App. If audio feedback during stimulation is enabled the patient can turn it off using the Control Unit.
To turn off audio feedback during stimulation:
1. Press the Volume button on the Control Unit. See Figure 4-10. The Volume Indicator icon in the upper right corner of the digital display will disappear.

To turn on audio feedback during stimulation:
1. Press the Volume button on the Control Unit. See Figure 4-10. The Volume Indicator icon in the upper right corner of the digital display will appear.

Turning Stimulation Off Using the Control Unit and EPG

To turn stimulation off using the Control Unit:
1. Turn on the Control Unit by pressing any button.

2. The stimulating EPG(s) will appear in the digital display on the Control Unit as an EPG- Stim State icon.

3. To stop stimulation, press the stim button on the control unit. See Figure 4-8.

To turn stimulation off using the EPG:
1. Press the Stim button on the EPG(s) to stop stimulation.

2. The Status Indicator Light on the EPG(s) will change to a flashing green light.

Note: Once the Stim button is pressed, the EPG(s) will be in a ready state in the last selected operating mode. If the Stimulation button is pressed again, the EPG will activate stimulation in the last operating mode that was selected before stimulation was turned off.
L300 Go Clinician Kit and Clinician Programmer

The L300 Go Clinician Kit and Clinician Programmer provide the components and accessories used to fit and program the L300 Go System.

L300 Go Clinician Kit

Please reference content list provided with L300 Go Clinician Kit for content quantities.
L300 Go Clinician Programmer

- Clinician Programmer, Tablet with Software and Stylus
- Bluetooth® Dongle
- Clinician Programmer Charger

Quick Fit Electrode (right shown)

Steering Cloth Electrode (right shown)

Small Quick Fit Electrode - A

Small Quick Fit Electrode - B

Hydrogel Electrodes

Hydrogel Electrode Base Set, 45mm

Round Cloth Electrode, 45mm

Cloth Electrode Base Set, 45mm

Small Hydrogel Electrodes
Small Round Cloth Electrode, 36 mm
Small Electrode Base Set, 36mm
Lower Leg FS Cuff Snap Covers

Clinician Programmer
Personal Panels (Regular Shown)

Thigh Electrodes
Strap Covers
Lower Leg FS Cuff Straps

Foot Sensor Pads
Tester
Fitting Cable
Lower Leg FS Cuff Straps

The lower leg FS Cuff Strap is used to hold the lower leg FS Cuff in place on the leg. The lower leg FS Cuff Strap is elastic, and fastens around the leg and the EPG Cradle. See Figure 6-1. The FS Cuff strap for the Regular lower leg FS Cuff comes in four sizes: small (S), medium (M), large (L), and universal. The FS Cuff strap for the small lower leg FS Cuff comes in two sizes: extra small (XS) and extra extra small (XXS).

To select an Lower Leg FS Cuff Strap:

- Measure the circumference of the patient's leg at its broadest point (the gastrocnemius muscle belly) and refer to Table 6-1.

To attach the Lower Leg Cuff Strap to the Lower Leg FS Cuff:

- Slide the strap through the strap leads and buckles on the lower leg FS Cuff. Make sure the hook and loop fasteners face away from the lower leg FS Cuff. Press on the hook and loop fasteners to secure the strap. See Figure 6-2.

<table>
<thead>
<tr>
<th>Regular Lower Leg FS Cuff</th>
<th>FS Cuff Strap Size</th>
<th>Leg Circumference</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Small (S)</td>
<td>29–36 cm (11-14 in.)</td>
</tr>
<tr>
<td></td>
<td>Medium (M)</td>
<td>36-42 cm (14-16 in.)</td>
</tr>
<tr>
<td></td>
<td>Large (L)</td>
<td>42-51 cm (16-20 in.)</td>
</tr>
<tr>
<td></td>
<td>Universal</td>
<td>29-51 cm (11-20 in.)</td>
</tr>
<tr>
<td>Small Lower Leg FS Cuff</td>
<td>FS Cuff Strap Size</td>
<td>Leg Circumference</td>
</tr>
<tr>
<td>-------------------------</td>
<td>----------------------------</td>
<td>-----------------------</td>
</tr>
<tr>
<td>FS Cuff Strap Size</td>
<td>Extra Extra Small (XXS)</td>
<td>21-26 cm (8-10 in.)</td>
</tr>
<tr>
<td></td>
<td>Extra Small (XS)</td>
<td>25-31 cm (9-12.2 in.)</td>
</tr>
</tbody>
</table>

Table 6-1: Lower Leg FS Cuff strap fitting chart.

Figure 6-2: Lower Leg FS Cuff Strap attached to the Regular Lower Leg FS Cuff

**Personal Strap Cover (Lower Leg FS Cuff)**

The Personal Strap Cover slides over the lower leg FS Cuff Strap and is used as an hygienic cover when the lower leg FS Cuff is used by multiple patients.

⚠️ **Caution:** The Personal Strap Cover is for single patient use only to prevent cross contamination.

**To attach the Personal Strap Cover:**

1. Slide the Personal Strap Cover over the lower leg FS Cuff Strap. See Figure 6-3.
2. If the Personal Strap Cover is too long cut to size.

Figure 6-3: Personal Strap Cover on the Lower Leg FS Cuff
Personal Panels (Lower Leg FS Cuff)

The Personal Panel is a removable inner lining for the lower leg FS Cuff for use in the clinic when the lower leg FS Cuff is used by multiple patients. The Personal Panel is available in small and regular sizes, as well as in right and left configurations. The Regular Personal Panel is used with the Regular lower leg FS Cuff and features four buttonholes. The Small Personal Panel is used with the small lower leg FS Cuff and features two buttonholes.

⚠️ Caution: The Personal Panel is for single patient use only to prevent cross contamination.

To attach the Personal Panel to the Lower Leg FS Cuff for initial fittings:

1. For the Regular Personal Panel, snap the four buttonholes into the corresponding plug holes on the Regular lower leg FS Cuff. See Figure 6-4.

2. For the Small Personal Panel, align the position of the panel to the small lower leg FS Cuff and press down to attach the velcro to the cuff’s inner liner.

![Figure 6-4: Attaching the Personal Panel](image)

To remove the Personal Panel from the Lower Leg FS Cuff:

1. Remove the Personal Panel from the lower leg FS Cuff. See Figure 6-5.

2. Write the patient’s name and strap size on the Personal Panel label. If using hydrogel electrodes, re-adhere the electrode covers. If using cloth electrodes allow the electrodes to air dry.

![Figure 6-5: Personal Panel Being Removed](image)
3. Store the Personal Panel and electrodes for the patient’s next session.

**Note:** When the patient returns to the clinic for a follow-up visit, attach the Personal Panel (with the electrode bases and electrodes attached) onto the lower leg FS Cuff inner liner.

### Electrode Bases

**The electrode bases are used to:**

- Elevate the electrodes from the inner liner of the lower leg FS Cuff to optimize electrode contact.
- Ensure accurate positioning of the electrodes with every application.

The electrode bases feature a snap for attachment to the lower leg FS Cuff plug holes.

**The following electrode bases can be used with the Regular Lower Leg FS Cuff:** *(See Figure 6-6)*

- Regular L300 Cloth Electrode Bases (used with the Regular L300 Cloth Electrodes)
- Hydrogel Electrode Bases (used with the Hydrogel Electrodes)

![Figure 6-6: Regular Lower Leg FS Cuff Electrode Base Options](image)

**The following electrode base is used with the Small Lower Leg FS Cuff:** *(See Figure 6-7)*

- Small Electrode Bases (used with both the Small Hydrogel Electrodes and the Small Cloth Electrodes)

![Figure 6-7: Small Lower Leg FS Cuff Electrode Base Options](image)

**Note:** The electrode bases are re-usable. Clean the electrode bases with cool water to remove any hydrogel residue, if applicable. Then disinfect the electrode bases with alcohol. See the "Maintenance and Cleaning" chapter in this guide for more information.

⚠️ **Caution:** Only a clinician should replace or reposition the electrode bases.
Electrodes

The electrodes transmit the electrical signal from the EPG to the target nerve and there are four types of electrodes that can be used with the lower leg FS Cuff.

⚠️ **Caution:** The electrodes are to be used by no more than one individual patient. The L300 Go electrodes are for single patient use only to prevent cross contamination. Only the hydrogel electrodes carry an expiration date, therefore verify the expiration date is outside the two week period before use. To re-order all electrodes, contact your local representative or visit www.bioness.com

⚠️ **Caution:** Use only the electrodes supplied by Bioness.

⚠️ **Caution:** Do not use the L300 Go System without the electrodes attached to the FS Cuff.

With the Lower Leg FS Cuff the following electrodes can be used: (See Figure 6-8)

- Quick Fit Electrode, left or right
- Steering Electrode, left or right
- Round Cloth Electrodes, 45mm
- Hydrogel Electrodes

---

**Figure 6-8: Lower Leg FS Cuff Electrode Options**
With the Small Lower Leg FS Cuff the following electrodes can be used: (See Figure 6-9)

- Small Quick Fit Electrode - A
- Small Quick Fit Electrode - B
- Small Round Cloth Electrode, 36 mm
- Small L300 Hydrogel Electrodes (only used for the fitting process)

Figure 6-9: Small Lower Leg FS Cuff Electrode Options
Wire Concealers

The Wire Concealers are used to cover the wires and snaps of the electrode bases when attached to the lower leg FS Cuff. The Wire Concealers are used with patients that are using the Hydrogel Electrodes or Cloth Electrodes. See Figure 6-10.

![Wire Concealer](image1)

Figure 6-10: Lower Leg FS Cuff with Wire Concealers

Snap Covers

The Snap Covers are used to close two of the Regular lower leg FS Cuff plug holes when using the Quick Fit Electrode, Hydrogel Electrodes, or Round Cloth Electrodes. See Figure 6-11.

![Snap Covers](image2)

Figure 6-11: Snap Covers Attached to the Lower Leg FS Cuff
**Fitting Cable**

The Fitting Cable is used to electrically connect the electrode base snaps to the lower leg FS Cuff plug holes during fitting. See Figure 6-12. The Fitting Cable is used with the Hydrogel or Round Cloth Electrodes during the initial fitting session.

![Figure 6-12: Fitting Cable Connected to the Lower Leg FS Cuff and Electrode Bases](image)

**Personal Strap Covers (Thigh FS Cuff)**

The Personal Strap Covers slide over the two thigh FS Cuff straps and are used as an hygienic cover when the thigh FS Cuff is used by multiple patients.

⚠️ **Caution:** The Personal Strap Covers are for single patient use only to prevent cross contamination.

**To attach the Personal Strap Covers:**

1. Slide one Personal Strap Cover over each of the straps on the thigh FS Cuff. See Figure 6-13.
2. If the Personal Strap Cover is too long, cut to size.

![Figure 6-13: Personal Strap Covers on the Thigh FS Cuff](image)
**Thigh Electrodes**

The thigh FS Cuff uses two cloth electrodes to provide electrical stimulation to the muscles in the upper leg. See Figure 6-14. The Thigh Electrodes snap to the thigh FS Cuff proximal and distal panels.

⚠️ **Caution:** Use only the electrodes supplied by Bioness.

⚠️ **Caution:** Do not use the L300 Go System without the electrodes attached to the thigh FS Cuff.

![Figure 6-14: Thigh Electrodes](image)

**Foot Sensor Pads**

The Foot Sensor Pad is used to secure the Foot Sensor pressure sensor to the inside of the patient's shoe. The Foot Sensor pad is placed under the insole, and the Foot Sensor pressure sensor is placed on top of the Foot Sensor pad. See Figure 6-15.

![Figure 6-15: Foot Sensor Pad Placement](image)
Tester

The Tester is used for troubleshooting to confirm that stimulation is being delivered. It tests if there is a disconnection in the lower leg FS Cuff, thigh FS Cuff, or the EPG. The Tester provides audio feedback when connected to the lower leg FS Cuff, thigh FS Cuff, or EPG and stimulation is applied. For more information on the Tester, refer to the "Troubleshooting" chapter in this guide.

Figure 6-16: Tester
Clinician Application Software Navigation

The L300 Go Clinician Application uses proprietary software that enables the clinician to configure stimulation parameters and programs for the patient. The L300 Go Clinician App uses a Windows® based tablet PC platform and uses standard Bluetooth® Low Energy (BLE) wireless signals to communicate with the L300 Go System. The L300 Go Clinician App is used in the clinic for patient programming. The L300 Go Clinician App also enables the clinician to retrieve patient's activity logs.

The L300 Go Clinician App consists of six main screens the Login, Patient Database, Patient Dashboard, Programming Settings, Reports, and Logout/Settings screens.

Login Screen

The Login Screen is used to login into the L300 Go Clinician App software. The Login Screen appears after the software has been launched. From this screen the user must enter their username and password and press the Login button. See Figure 7-1.

![Figure 7-1: Login Screen](image)

Patient Database Screen

After the Login screen the L300 Go Clinician App will always open displaying the Patient Database Screen. The Patient Database screen lists all patient files that are stored on the L300 Go Clinician App. From this screen the clinician can search for a patient file, move the patient file onto a network for use, or edit the patient file. This screen is also used to create new patient files.

The Patient Database Screen consists of four icons and a searchable text field. See Figure 7-2.

- Add New Patient icon - used to add a new patient file to the L300 Go Clinician App.
- Upload Patient icon - used to upload a patient file to the patient network and EPG.
- Export Patient icon - used to export a patient file to load to another L300 Go Clinician App.
- Import Patient icon - used to import a patient file from another L300 Go Clinician App.
Navigation Bar

The navigation bar appears along the top of each screen in the L300 Go Clinician App software. It consists of five menu icons, patient network field and link state button. See Figure 7-3.

When the L300 Go Clinician App is paired with a patient's L300 Go System, the patient's name will appear in the patient network field with an orange outline and the active screen's icon will also appear in orange. See Figure 7-4.

When the L300 Go Clinician App is not paired with a patient's L300 Go System, the patient network field will be empty with a blue outline and the active screen's icon will also appear in blue.
Chapter 7 - Clinician Application Software Navigation

Programming Setting Screen

The Programming Setting screen can only be accessed if the L300 Go Clinician App is paired with a L300 Go System and a patient file has been uploaded to the patient network. This screen is used by the clinician to program the stimulation parameter settings, programs, and advance settings on a patient's L300 Go System. The Programming Settings Screen consists of three sub-menu screens: Stim, Gait, and Training Screens. See Figure 7-5.

Stim Screen

The Stim Screen is used to program the stimulation settings for the selected EPG. Press the Advanced Settings icon (see Figure 7-6) to open the advanced settings window. See Figure 7-6.

If the patient is using the Steering Electrode make sure the Electrode drop down menu is set to Steering Electrode to enable the Advanced Parameters icon. Press the Advanced Parameter icon to open the advanced parameter window. The clinician can then adjust the medial and lateral stimulation intensity. See Figure 7-7.
Gait Screen

The Gait screen (see Figure 7-8) is used to program gait mode settings. This screen also controls the audio and vibration feedback during stimulation settings. To access this screen press the Gait screen icon, see Figure 7-5.

Training Screen

The Training screen (see Figure 7-9) is used to program the settings that are used in training mode. To access this screen press the Training screen icon, see Figure 7-5.
Figure 7-8: Gait Screen

Figure 7-9: Training Screen
Patient Dashboard Screen

The Patient Dashboard Screen allows the clinician to view all relevant information about a specific patient, including session settings history, data logs, and notes. See Figure 7-10. To access the Patient Dashboard Screen press the Patient Dashboard icon located in the navigation bar. See Figure 7-4.

You can review and upload setting from a previous session to use for the current session. Press the Upload icon to load the previous session settings to the patient network.

![Figure 7-10: Patient Dashboard Screen](image)

Reports Screen

The clinician can access the Reports screen to view previous data and generate new test reports. See Figure 7-11. To access the Reports screen press the Reports icon located in the navigation bar. See Figure 7-4.

![Figure 7-11: Reports Screen](image)
Logout/Settings Screen

The Logout/Settings screen is used to logout of the L300 Go Clinician App software, and close the application.

![Logout/Settings Screen](image)

Figure 7-12: Logout/Settings Screen

Application Settings Screen

The Application Settings screen, accessed via the icon available on each screen on the far right, is used to adjust language settings, manage user profiles, and manage data. The Application Settings Screen consists of three sub-menu screens. See Figure 7-13.

- **Programmer Settings**: used to select a language setting, display software versions, and factory reset the EPGs
- **User Settings**: used to manage user (clinician) profiles including adding new user accounts, editing profiles, disabling user accounts, and resetting passwords
- **Manage Data**: used to load system data and export EPG system logs

![Application Settings Screen](image)

Figure 7-13: Application Settings Screen
**EPG Factory Reset**

To factory reset an EPG, access the application settings screen then click on Software Versions to view the factory reset buttons. Follow the steps below to factory reset an EPG into a different cuff.

**To factory reset an EPG:**

1. Remove central EPG from previous cuff (i.e. regular lower left FS Cuff) and place it into desired cuff (i.e. small lower right FS Cuff).
2. Pair right small FS Cuff to Clinician’s Application as if it were a left lower and allow to run through syncing sequence.
3. Click on Application Settings and select Software Version to view the factory reset options. See Figure 7-13.
4. Under the factory reset section, select the location where the EPG had been previously. This will initiate the factory reset with red status bar flashing on the EPG. Once done, turn off the EPG and turn it back on and it will recognize it’s new location.

**Information Screen**

The Information screen is accessed via the information icon available on each screen on the far right below the Application Settings icon. The Information screen provides information about the features available on the screens of L300 Go Clinician Application. The Information screen is dynamic as the information displayed is dependent on the screen in which it is accessed.

![Information Screen](Image)

*Figure 7-14: Information Screen*
Patient Fitting

Skin Preparation

Before fitting the lower leg FS Cuff and/or thigh FS Cuff on a patient, always check the patient's skin for signs of irritation. If any irritation is present, wait for complete healing before using the L300 Go System. For optimal stimulation, the skin under the FS Cuff should be clean and healthy.

To prepare the skin:

1. Use a wet cloth to clean the skin where the electrodes will touch. If any oils or lotions are on the skin, clean the skin with soap and water. Rinse well.

2. If necessary, trim excess body hair from the area using scissors. Do not use a razor. A razor can irritate the skin.

Attach the Hydrogel Electrodes and Electrode Bases

For first fittings, always use hydrogel electrodes before fitting cloth electrodes.

⚠️ Caution: The Hydrogel Electrodes are to be used by no more than one individual patient. The electrodes are for single patient use only to prevent cross contamination.

To attach the Hydrogel Electrodes to the leg:

1. Make sure the lower leg EPG is turned off.

2. Separate the two new hydrogel electrodes along the perforation. See Figure 8-1.

3. Split the two-piece covers on each electrode and discard them. See Figure 8-1.

4. For patients using the lower leg FS Cuff, attach the grid side of the electrodes to the Hydrogel Electrode Bases and then press firmly.

5. For patients using the small lower leg FS Cuff, snap the snap side of the electrodes into the Small Electrode Bases.

6. Remove the larger covers (with the Bioness logo) from the electrodes and save them. (Always cover the hydrogel electrodes between uses. Make sure the Bioness logo on the cover faces up.)
7. Have the patient sit and extend the leg to between 15 and 20 degrees of flexion. (The patient should maintain this position throughout the fitting process.) The heel should be elevated, if possible.

8. Position one electrode (the nerve electrode) over the common peroneal nerve, distal and slightly posterior to the fibular head. See Figure 8-2.

9. Position the other electrode (the muscle electrode) approximately 5 cm (2 in.) distal and anterior to the nerve electrode, over the belly of the tibialis anterior muscle.

![Figure 8-2: Positioning the Electrodes on the Leg](image)

**Note:** The Small Hydrogel Electrodes are for fitting purposes only and not for patient home use.

**Connect the Fitting Cable**

To connect the fitting cable:

1. Make sure the EPG is attached to the EPG cradle on the lower leg FS Cuff.
2. Connect the fitting cable to the electrode bases and to the lower leg FS Cuff plug holes.
3. Connect the orange ends of the fitting cable to the muscle electrode base and the orange FS Cuff plug hole. See Figure 8-4.

![Figure 8-4: Fitting Cable Connected](image)
4. Connect the blue ends of the fitting cable to the nerve electrode base and the blue FS Cuff plug hole. See Figure 8-4.

5. Place the lower leg FS Cuff next to the patient's foot. See Figure 8-4.

**Out-of-Box Settings**

The out-of-box settings are default parameter settings that have been programmed into the EPG for patient fitting. For new patients the clinician can enable the out of box settings by pressing and holding for five seconds the Stim and Mode buttons on the Control Unit. If desired these default parameter settings can be used as the patient's L300 Go System settings. To exit out-of-box mode, press the select button. If different parameter settings are desired the clinician will need to access the L300 Go Clinician App software for programming.

**Note:** The default stimulation intensity setting is set to 0.

**Adjust the Position of the Electrodes While Stimulating: Patient Seated**

To check the position of the electrodes:

1. For new patients, press and hold for five seconds the Stim and Mode buttons on the EPG to enable the default parameter settings.

2. The default stimulation intensity level is set to 0. Press the Stim button on the EPG to enable stimulation.

**Note:** When applying stimulation, observe the patient’s foot for proper dorsiflexion.

1. Press the Plus button on the EPG to gradually increase stimulation intensity to achieve dorsiflexion with a small amount of eversion.

2. **If inversion is excessive:** Move the nerve electrode posterolaterally to increase eversion.

3. **If eversion is excessive:** Move the nerve electrode slightly anteriorly to decrease eversion.

The muscle electrode can also be moved to balance dorsiflexion. Bring the muscle electrode anteriorly to decrease eversion of the foot or posterolaterally to increase eversion. Avoid stimulation directly above the tibial shaft, as it can be uncomfortable and less effective.

**Test the Effect of a Positional Change**

1. To test the effect of a positional change, gently move the electrode and skin as a unit over the common peroneal nerve area. (Do not leave stimulation on for long. Fatigue may result.)

**Note:** Press gently on the electrode bases while testing to simulate pressure from the FS Cuff.

**Adjust the Position of the Electrodes While Stimulating: Patient Standing**

Once proper dorsiflexion is achieved with the patient seated, if possible, retest with the patient standing, the knee extended, and the foot in the air. If necessary, adjust the stimulation or electrode position to achieve proper dorsiflexion in this position.
Transfer the Electrodes to the Lower Leg FS Cuff

To transfer the electrodes to the Lower Leg FS Cuff:

1. Press the Stim button on the EPG to stop stimulation.

2. Using a marker, make four small, evenly spaced marks on the patient's leg around the electrode bases for reference.

3. Disconnect the fitting cable from the electrode bases and lower leg FS Cuff, making sure not to move the electrodes.

4. For in-patient use, attach an FS Cuff strap cover and personal panel to the lower leg FS Cuff.

5. Grasp the lower leg FS Cuff on each side to flare the Orthosis slightly open. Then tilt the bottom of the FS Cuff away from the leg about 30 degrees.

6. Position the locator of the lower leg FS Cuff below the patella, over the tibial plateau. See Figure 8-5. Make sure the FS Cuff does not touch the electrode bases. The locator should fit snugly but comfortably under the inferior pole of the patella.

7. Keeping the lower leg FS Cuff open, lower the bottom of the FS Cuff, allowing only the front of the FS Cuff to contact the anterior surface of the tibia. Then wrap the ends of the lower leg FS Cuff around the leg to “capture” the electrode bases. See Figure 8-6.

8. Gently remove the lower leg FS Cuff from the leg. See Figure 8-7.

9. Press firmly on the electrode bases to secure them to the lower leg FS Cuff. Plug the electrode base snaps into the FS Cuff plug holes.
**Don the Lower Leg FS Cuff**

**To don the Lower Leg FS Cuff:**

1. Wipe the leg with lukewarm water.
2. Have the patient sit and extend the knee so that the patella is clearly defined. Use a footrest if needed.
3. Tilt the top of the lower leg FS Cuff toward the leg. Gently slide the locator up to the base of the patella. Lower the bottom of the FS Cuff until it is flush with the leg. The lower leg FS Cuff should gently grip the leg.
4. Pull the strap handle around the leg and the lower leg FS Cuff cradle to fasten it.
5. Make sure the fastened FS Cuff fits comfortably, with the locator below the patella and the strap handle around the cradle, as shown in Figure 8-8.
Retest Electrode Placement: Patient Sitting and Standing

To retest electrode placement:

1. Press the Power button on the lower leg EPG. The EPG will give vibration and audio feedback when turned on.

2. Press and hold the Stim button on the lower leg EPG for at least five seconds. The EPG will deliver stimulation until the Stim button is released.

3. If patient response is not accurate or is inconsistent with the original response, reposition the lower leg FS Cuff and assess the response to stimulation.

Fitting the Small Round Cloth Electrodes

Note: The Small Hydrogel Electrodes are used for the initial fitting process only. After the position of the electrodes have been determined, the small hydrogel electrodes will need to be removed and replaced with the Small Round Cloth Electrodes.

To fit the Small Round Cloth Electrodes: (See Figure 8-9)

1. Make sure the EPG is turned off and then remove the Small FS Cuff from patient's leg.

2. Carefully detach the Small Hydrogel Electrodes from the Small Electrode Bases. Be careful not to detach the electrode bases from the Small FS Cuff.

3. Remove the Small Round Cloth Electrodes from package.

4. Wet the new Small Round Cloth Electrodes with water until they are saturated.

5. With a soft cloth, gently wipe or blot excess water off the back (side with the snap) of the electrodes.

6. Snap the Small Round Cloth Electrodes into the Small Electrode Bases.

7. Don the lower leg FS Cuff and verify the desired dorsiflexion response. If necessary, adjust the stimulation setting or position of the cloth electrodes.
Figure 8-9: Fitting the Small Round Cloth Electrodes

Fitting the Round Cloth Electrodes

Figure 8-10: Fitting the Round Cloth Electrode Bases
To fit the Round Cloth Electrode Bases: (See Figure 8-10)

1. Make sure the EPG is turned off and then remove the lower leg FS Cuff from patient's leg.
3. Disconnect the snap on the hydrogel electrode bases from the FS Cuff plug holes.
4. Remove the hydrogel electrode bases.
5. Attach the cloth electrode bases where the hydrogel electrode bases were attached.

Note: The cloth electrode base is 2mm smaller in height than the hydrogel electrode base.
6. Connect the snaps on the cloth electrode bases to the plug holes on the FS Cuff.

To fit the Round Cloth Electrodes: (See Figure 8-11)

1. Wet the new Round Cloth Electrodes with water until saturated.
2. With a soft cloth, gently wipe or blot excess water from the back (side with the snap) of the cloth electrodes.
3. Attach the cloth electrodes to the cloth electrode bases on the Regular FS Cuff.
4. Don the lower leg Cuff and verify that the desired dorsiflexion response. If needed, optimize the stimulation settings and the position of the cloth electrodes.

Fitting the Quick Fit Electrodes

The lower leg FS Cuff can use one type of Quick Fit Electrode, which is available in left and right configurations. The small lower leg FS Cuff can use two types of Quick Fit Electrodes, the Small Quick Fit Electrode - A or the Small Quick Fit Electrode - B.

To select a Small L300 Quick Fit Electrode:

1. Measure the circumference of the patient's leg at its broadest point (the gastrocnemius muscle belly) and refer to Table 8-1.

Note: Patients with middle range calf circumference (24-25cm) may fit both types of the Small L300 Quick Fit Electrodes.
<table>
<thead>
<tr>
<th>Small Quick Fit Electrode</th>
<th>Calf Circumference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Small Quick Fit Electrode - A</td>
<td>24-31 cm</td>
</tr>
<tr>
<td>Small Quick Fit Electrode - B</td>
<td>22-25 cm</td>
</tr>
</tbody>
</table>

Table 8-1: Small L300 Quick Fit Electrode Fitting Chart

To fit the Quick Fit Electrode: *(See Figure 8-12)*

1. Make sure the EPG is turned off and then remove the lower leg FS Cuff from patient's leg.
2. Wet the entire new Quick Fit Electrode with water until saturated.
3. Remove excess water from the Quick Fit Electrode with a cloth.
4. Align the orange and blue snaps on the Quick Fit Electrode with the orange and blue plug holes on the lower leg FS Cuff.
5. Press firmly to snap the Quick Fit Electrode into the lower leg FS Cuff.
6. Don the lower leg FS Cuff.
7. Adjust the stimulation settings to achieve the desired dorsiflexion response.

Figure 8-12: Fitting the Quick Fit Electrode
(Quick Fit Electrode and L300 FS Cuff Shown)
Fitting the Steering Electrode

The Steering Electrode is used with the lower leg FS Cuff and allows the clinician to adjust the medical and lateral stimulation intensity.

To fit the Steering Electrode: (See Figure 8-13)

1. Make sure the EPG is turned off and then remove the Regular FS Cuff from patient's leg.
2. Wet the entire Steering Electrode with water until saturated.
3. Remove excess water from the Steering Electrode with a cloth.
4. Align the snaps on the Steering Electrode with the plug holes on the lower leg FS Cuff.
5. Press firmly to snap the Steering Electrode into the lower leg FS Cuff. Make sure to press on the areas above all four snaps.
6. Don the lower leg FS Cuff.
7. Adjust the stimulation settings in order to achieve the desired dorsiflexion response.

Figure 8-13: Fitting the Steering Electrode

Fitting the Foot Sensor

The Foot Sensor is an optional component of the L300 Go System. The clinician will determine if the Foot Sensor is needed based on patient presentation. For patients using the L300 Go System, Thigh Stand-Alone the Foot Sensor is a required component to use.

⚠️ Caution: The Foot Sensor has not been validated for use by individuals weighing more than 300 lbs (136 kg).

⚠️ Caution: Do not use the Foot Sensor with a rigid insole, such as a custom rigid orthosis or and ankle foot orthosis.
The placement of the Foot Sensor can be adjusted based on patient's initial contact point. For the majority of patients the Foot Sensor should be placed at the heel. For patients that have initial contact with the ground near the toes, the Foot Sensor may be placed at the forefoot.

Note: The Foot Sensor pad and Foot Sensor pressure sensor should be placed under the insole of the shoe. If the shoe does not have a detachable insole, place the Foot Sensor pad and pressure sensor on top of the insole. Then, place a soft, thin (one layer versus two) generic insole over them.

To place the Foot Sensor in the shoe:

1. For new patients the Foot Sensor will need to be paired with their lower leg EPG. For patients using the L300 Go System, Thigh Stand-Alone, the Foot Sensor must be paired with their thigh EPG. For pairing instructions, please refer to the "Pairing a New Foot Sensor to the EPG" section of this guide.

2. Determine the appropriate placement (heel position or forefoot position) of the Foot Sensor based on patient presentation.

3. Lift the shoe insole, and attach a Foot Sensor pad to the heel or forefoot of the shoe.

4. For heel position placement point the wire of the Foot Sensor toward the toe of the shoe. For forefoot position placement point the wire of the Foot Sensor toward the heel of the shoe. Attach the pressure sensor to the Foot Sensor pad. See Figure 8-14.

Note: The image of the foot on the Foot Sensor will be reverse when in the forefoot position.

5. Clamp the Foot Sensor transmitter on to the inner rim of the shoe. Face the starburst logo on the transmitter away from the ankle. See Figure 8-15.

6. Cover the pressure sensor with the insole. Tuck any excess wire under the insole. See Figure 8-15.
Doff the Lower Leg FS Cuff

To doff the lower leg FS Cuff:

1. Press the Power button on the EPG to turn off the system.
2. With a marker, mark the location of the lower leg FS Cuff locator on the leg for reference.
3. Unhook the FS Cuff strap handle from the EPG Cradle, and slowly lift the lower leg FS Cuff away from the skin.

**Note:** For patients using the hydrogel electrodes with the lower leg FS Cuff, gently peel the electrodes from the skin, and reapply the electrode covers to the electrodes.

4. With a marker, make small, evenly spaced marks around the electrode bases on the liner of the lower leg FS Cuff (or on the personal panel) for reference.

5. If appropriate, cover the electrode base wires and snaps with the wire concealers. Make sure the wires are tucked under the wire concealers.

**Note:** Make sure to instruct patients who will be using the L300 Go System at home to ventilate the skin by removing the lower leg FS Cuff for at least 15 minutes every three to four hours.

Fitting the Thigh Cloth Electrodes

The Thigh Cloth Electrodes attach to the snaps on the thigh FS Cuff panels. The larger Thigh Cloth Electrode attaches to the proximal panel on the thigh FS Cuff. The smaller Thigh Cloth Electrode attaches to the distal panel on the thigh FS Cuff. See Figure 8-16.

⚠️ **Caution:** The Thigh Cloth Electrodes are to be used by no more than one individual patient. The Thigh Cloth Electrodes are for single patient use only to prevent cross contamination.

![Figure 8-16: Thigh Cloth Electrodes](Image)

**To fit the Thigh Cloth Electrodes:** (See Figure 8-17)

1. Make sure the thigh EPG is turned off.
2. Wet the Thigh Electrodes with water. Gently squeeze the Thigh Electrodes together.
3. Remove excess water from the snap side of the Thigh Electrodes with a cloth.
4. Align the snaps on the Thigh Cloth Electrodes to the plug holes on the thigh FS Cuff.
5. Press firmly to snap Thigh Cloth Electrodes to the proximal and distal panels on the thigh FS Cuff.
Don the Thigh FS Cuff

To don the thigh FS Cuff:

1. Have the patient sit in a stable position on the edge of a chair.
2. Make sure the Thigh Cloth Electrodes are securely attached to the thigh FS Cuff panels.
3. For in-patient use, attach an FS Cuff strap cover to the thigh FS Cuff.
4. Place the thigh FS Cuff locator (a tactile finger mark) on the midline of the thigh, approximately three finger widths proximal from the patella if stimulating the quadriceps or from the popliteal fossa if stimulating the hamstrings. See Figure 8-18.

5. Center the bridge on the midline of the thigh. See Figure 8-19.
6. Fasten the straps by inserting the strap buckle into the hook attached to the thigh FS Cuff panels. See Figure 8-19. If needed, tighten the strap tension by adjusting the strap fasteners.
Testing the Position of the Thigh FS Cuff: Patient Sitting and Standing

To check the position of the thigh FS Cuff:

1. Have the patient sit with the lower leg dangling unobstructed.

2. For new patients press and hold for five seconds the Stim and Mode buttons on the thigh EPG to enable the default parameter settings.

   **Note:** If desired these default parameter settings can be used as the patient’s L300 Go System settings. If different parameter settings are desired the clinician will need to access the L300 Go Clinician App software for programming.

3. The default stimulation intensity level is set to 0. Press the Stim button on the EPG to enable stimulation.

4. Press the Plus button on the EPG to gradually increase stimulation intensity to achieve the desired extension or flexion at the knee.

5. After proper extension or flexion is achieved with the patient seated, retest with the patient standing with the knee at an adjustable angle and the foot in the air.

6. If necessary adjust the stimulation intensity to achieve knee extension or flexion in this position.

Pairing the Thigh EPG

For patients using both the lower leg FS Cuff and thigh FS Cuff the thigh EPG will need to be paired to the lower leg EPG. For pairing instructions refer to the "Pairing a lower leg EPG to a thigh EPG" section in this guide.

For patients using the Thigh Stand-Alone System the thigh EPG will need to be paired to the Foot Sensor. For pairing instructions refer to the "Pairing a New Foot Sensor to the EPG" section of this guide. For Foot Sensor fitting instructions refer to the "Fitting the Foot Sensor" section in this chapter.
Doffing the Thigh FS Cuff

1. Press the Power button on the EPG to turn off the system.
2. Unhook both sets of straps.
3. Slowly lift the thigh FS Cuff away from the patient's skin.
4. Remove the Thigh Cloth Electrodes from the thigh FS Cuff and store them where they can air dry, to prevent mold.

**Note:** Make sure to instruct patients who will be using the L300 Go System at home to ventilate the skin by removing the thigh FS Cuff for at least 15 minutes every three to four hours.
Patient Programming

Before programming the L300 Go System make sure the electrodes and FS Cuff have been properly fitted on the patient, and the patient is in a seated position. Refer to the "Patient Fitting" chapter in this guide for fitting instructions.

Pairing the L300 Go Clinician App to the L300 Go System

Before pairing the L300 Go Clinician App to the L300 Go System make sure the patient's components (EPG(s), Foot Sensor, and Control Unit) have already been paired together. Refer to the "Pairing Replacement Part Components" chapter in this guide for pairing instructions.

When a lower leg EPG or Thigh Stand-Alone EPG is paired to the L300 Go Clinician App, the L300 Go Clinician App will automatically recognize the other components that are paired to that EPG. For example a Foot Sensor or thigh EPG (for patients using the thigh FS Cuff with the lower leg FS Cuff).

To pair a L300 Go Clinician App to the L300 Go System:

1. Turn on the Clinician Programmer, and launch the Clinician's Application by pressing the L300 Go Clinician App icon.
2. The Login Screen will appear. Enter a username and password and then press the Login button.
3. The Patient Database Screen will appear. In the navigation, press the Bluetooth® icon.
4. Click on the Linking icon located above the desired leg. See Figure 9-1.
5. Place the desired EPG into Pairing Mode by pressing simultaneously on the plus (+) and minus (-) buttons on the EPG.
6. When paired the Linking icon will change to a orange Unlinked icon.

Figure 9-0: Bluetooth® Icon

Figure 9-1: Linking Icon
7. Exit the linking screen by clicking anywhere on the Bluetooth Exit Icon.

8. For existing patients the linked EPG will upload patient demographics onto the patient network, once complete a window will pop-up that asks to select the desired patient to link to the network. Upload Complete. The L300 Go Clinician App will load an existing patient to the patient network. For new patients a new patient file will need to be created.

Creating a New Patient Profile

To create a new patient profile:

1. Make sure a L300 Go System is paired with the L300 Go Clinician App.

2. From the Patient Database Screen press the Add New Patient con. See Figure 9-2.

3. Enter in the patient demographic information (Patient ID, Legal Name, Date of Birth [MM/DD/YYYY], and Gender.
4. Press the Check button to save the new patient profile.

**Uploading a Patient Profile to the L300 Go System**

An existing patient profile can be uploaded to the patient network and onto the paired EPG.

**To upload an existing patient profile:**

1. Make sure a L300 Go System is paired with the L300 Go Clinician App.

2. Open the Patient Database Screen and highlight the patient from the Patient List. See Figure 9-2.

3. Press the Upload icon, see Figure 9-2. A window will appear stating "Program all stimulators with patient: X,X”. Press the Continue button.

4. The L300 Go Clinician App will upload patient demographics to the patient network and paired EPG.

5. A window will appear stating: "X,X has been loaded onto the Programmer”. Press the OK button.

**Programming Stimulation Settings**

Once the L300 Go Clinician App has been paired to a L300 Go System and a patient has been uploaded to the patient network the clinician then can program the stimulation settings.

**To program stimulation settings:**

1. Make sure the patient is in seated position.

2. Press the Program Settings icon in the navigation bar to open the Program Settings Screen.

3. The screen will show the linked EPG(s) as a green icon on the associated leg(s) on the left side of the Program Settings Screen. See Figure 9-3.

4. The selected EPG will have an orange box outline around it.

5. Use the drop down lists to adjust the Waveform, Phase Duration, Pulse Rate, and Electrode parameter settings. Refer to Table 9-1 for parameter setting definitions.

6. For new patients make sure the Stimulation Intensity Bar is set to 0. See Figure 9-3.
7. Press the Test button to turn on stimulation. Gradually increase the stimulation intensity, using the arrows on the Stimulation Intensity Bar, to the desired level. Stimulation will start with a ramp up time (time it takes for the stimulation to increase from zero to the maximum level set) of 1.5 seconds.

**Note:** When stimulation is being delivered the Test button will appear red and the EPG icon will turn yellow with a stimulation wave.

8. If the patient is using more than one EPG the settings will also have to be programmed to the additional EPG. Select the desired EPG icon from the Programming Stimulation Screen and repeat steps 5-7.

Any changes made to the L300 Go Clinician App settings will not be implemented and saved until the Test button has been pressed. This activates the settings and saves the information to the paired EPG.

<table>
<thead>
<tr>
<th>Stim Parameter</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intensity</td>
<td>Strength of Stimulation: 0 mA to 100 mA, in 1mA Steps</td>
</tr>
<tr>
<td>Waveform</td>
<td>Type of Stimulation: Symmetric or Asymmetric</td>
</tr>
<tr>
<td>Phase Duration</td>
<td>Length of Time of the Pulse: 100, 200, or 300 μsec</td>
</tr>
<tr>
<td>Pulse Rate</td>
<td>Frequency of Stimulation: 20 Hz to 45 Hz, in 5Hz Steps</td>
</tr>
<tr>
<td>Electrode</td>
<td>Type of Electrode: Quickfit (default), Round Cloth, Hydrogel, Steering</td>
</tr>
</tbody>
</table>

Table 9-1: Stim Parameter Setting Definitions

**Programming Advanced Stimulation Settings**

1. From the Programming Stimulation Screen, press the Advanced Stim Setting icon (see Figure 9-3) to open the Advanced Stim Settings Window. See Figure 9-4.


<table>
<thead>
<tr>
<th>Advanced Stim Parameter</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interphase Period</td>
<td>This setting defaults to 50 to increase force production, providing the strongest contraction with minimal discomfort. Ranges vary from 20, 50, 100 and 200. Symmetric waveform default is 50, Asymmetric waveform default is 20.</td>
</tr>
<tr>
<td>Max Stim Time</td>
<td>To avoid excessive fatigue of the muscles that activate dorsiflexion, the L300 Go System is designed to automatically stop stimulation after a set number of seconds (the maximum duration of stimulation). This safety feature is useful when a patient sits or lies down, and the leg wearing the L300 Go System is in the air and the system is in gait mode. It limits the duration of stimulation. To adjust the maximum duration of stimulation, use the stylus to change the duration. <strong>For fast and stable users:</strong> This setting can be relatively low (default setting is 4 seconds). The lowest setting should be the maximum time it takes the patient to lift the leg to climb a stair or avoid an obstacle. <strong>For slow walkers or patients who are just beginning rehabilitation:</strong> This setting may need to be higher than 4 seconds for a patient that requires more time to advance their leg during the swing phase of gait.</td>
</tr>
</tbody>
</table>
### Advanced Stim Parameter Setting Definitions

<table>
<thead>
<tr>
<th>Advanced Stim Parameter</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foot Sensor</td>
<td>When the L300 Go Clinician App is connected to a system that uses a Foot Sensor. The Foot Sensor setting will be enabled. Use the drop down list to select: Contralateral vs. Same Side. Foot Sensor Required Box - when the box is unchecked this turns on the motion sensing backup feature. If the Foot Sensor is not communicating to the EPG the EPG will use the integrated motion sensors for gait detection.</td>
</tr>
</tbody>
</table>

Table 9-2: Advanced Stim Parameter Setting Definitions

---

**Programming Advanced Parameters Screen Settings**

If the patient is using the Steering Electrode make sure the Electrode drop down menu is set to Steering Electrode, this will enable the Advanced Parameters icon. Press the Advanced Parameter icon (see Figure 9-3) to open the advanced parameter window. The clinician can then adjust the medial and lateral stimulation intensity for the lower leg EPG. See Figure 9-5.

---

Figure 9-5: Programming Stimulation, Stim Screen with Advanced Parameter Window
Programming Gait Settings

To program gait settings:

1. Make sure the patient is in a standing position.
2. From the Programming Stimulation Screen, press the Gait Screen icon.
3. The Gait Settings Screen will open. See Figure 9-6.

4. Adjust the Ramp Up, Ramp Down, Extended, and Intensity Settings. See Table 9.3.

<table>
<thead>
<tr>
<th>Gait Parameter</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ramp Up</td>
<td>The time, in seconds, that it takes for the stimulation to increase from zero to the maximum level set. A gradual buildup of the current makes the stimulation more comfortable, helps avoid stretch reflexes, and delays the start of muscle contraction. Values are from 0 to 0.5 seconds in 0.1-second increments.</td>
</tr>
<tr>
<td>Ramp Down</td>
<td>The time, in seconds, that it takes for the stimulation to decrease from the maximum level set to zero. The current is reduced slowly to gradually reduce the muscle contraction. Increase this setting to prevent foot slap. Values are from 0 to 0.5 seconds in 0.1-second increments.</td>
</tr>
<tr>
<td>Extended</td>
<td>The percentage of total time from heel on to heel off that the stimulation continues after heel contact with the ground. This parameter determines the length of time before the stimulation starts to ramp down. Increase this setting to prevent foot slap and genu recurvatum (knee hyperextension/knee snapping) or to increase ankle stability during stance.</td>
</tr>
<tr>
<td>Delayed</td>
<td>The percent of total time that the stimulation is delayed after a gait event is detected. Used to prevent premature lifting of the foot. This parameter determines the length of time before the stimulation starts to ramp up. (The delay % is calculated from total time of &quot;heel off&quot; to &quot;heel on&quot;).</td>
</tr>
</tbody>
</table>
### Gait Parameter Definitions

<table>
<thead>
<tr>
<th>Gait Parameter</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intensity</td>
<td>The strength of the electrical stimulation. Values are from 0 to 100 mA. The initial value appearing on the intensity bar will be the level established when configuring the stimulation settings. Changes can be made to the intensity level while in gait mode and will be maintained in training mode unless you have activated the “Enable specific intensity level” for training mode in the Training Settings Advanced Settings window.</td>
</tr>
</tbody>
</table>

Table 9-3: Gait Parameter Definitions

**Note:** To minimize genu recurvatum (knee hyperextension/knee snapping) and foot slap, use the Extended option to create an eccentric contraction of the dorsiflexors after heel contact.

5. Press the Stimulation icon button to test and save the settings. Stimulation will respond to gait activity input from either the Foot Sensor (if applicable), or from the EPG integrated motion sensor.

6. Fine-tune settings while the patient is walking.

7. Press the Stimulation icon button again to stop stimulation.

## Programming Training Settings

To program training settings:

1. From the Programming Stimulation Screen, press the Training Screen icon.

2. The Training Settings Screen will open. See Figure 9-7.

3. Select Include stimulator in Training by clicking on the box to add a check mark.


5. If a stimulation intensity different than the one set for the gait intensity is desired, check the box next to “Enable Specific Training Intensity”. Then adjust the stimulation intensity level.
6. Press the Training Stimulation icon button to start stimulation in training mode.

7. Press the Training Stimulation icon button again to turn off stimulation or let the program run its allotted time.

<table>
<thead>
<tr>
<th>Training Parameter</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>On Time</td>
<td>The amount of time that stimulation is applied.</td>
</tr>
<tr>
<td>Off Time</td>
<td>The amount of rest time between stimulations</td>
</tr>
<tr>
<td>Ramp Up</td>
<td>The time, in seconds, that it takes for the stimulation to increase from zero to the maximum level set. A gradual buildup of the current makes the stimulation more comfortable, helps avoid stretch reflexes, and delays the start of muscle contraction. Values are from 0 to 2 seconds in 0.5-second increments.</td>
</tr>
<tr>
<td>Ramp Down</td>
<td>The time, in seconds, that it takes for the stimulation to decrease from the maximum level set to zero. The current is reduced slowly to gradually reduce the muscle contraction. Increase this setting to prevent foot slap. Values are from 0 to 2 seconds in 0.5-second increments.</td>
</tr>
<tr>
<td>Total Time</td>
<td>The total amount of time for the training period. The training period consists of repeated cycles of the Ramp Up, On Time, Ramp Down, and Off Time parameters, until the total session time expires.</td>
</tr>
</tbody>
</table>

Table 9-4: Training Parameter Definitions

**Audio and Vibration Feedback Settings**

The Programming Stimulation Gait Settings and Training Settings Screens feature an Audio Feedback icon and a Vibration Feedback icon. These icons enable or disable audio and vibration feedback during stimulation. The icons on the Gait Settings Screen control audio and vibration feedback when the EPG is in gait mode. The icons on the Training Settings Screen control audio and vibration feedback when the EPG is in training mode.

<table>
<thead>
<tr>
<th>Icon</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Audio Feedback is Enabled</td>
</tr>
<tr>
<td></td>
<td>Audio Feedback is Disabled</td>
</tr>
<tr>
<td></td>
<td>Vibration Feedback is Enabled</td>
</tr>
<tr>
<td></td>
<td>Vibration Feedback is Disabled</td>
</tr>
</tbody>
</table>
Patient Training

Clinicians and patients should know the limitations, warnings, and precautions associated with the L300 Go System. Clinicians should review the safety information with patients, and train patients on system set-up, operation, and maintenance. Patients should understand the system displays and indicators, and the troubleshooting solutions. Clinicians and patients should know whom to contact for clinical and technical support.

A training program should cover the following topics, which are described in this guide and in the L300 Go User Guide:

- General safety information, including the Skin Care Guidelines
- An overview of the L300 Go System
- Donning and doffing the FS Cuff
- Replacing the electrodes and electrode bases
- Placing the Foot Sensor in a shoe (for patients using this option)
- Operating the Control Unit
- The system component buttons, displays, and audio alerts: their definitions and functions
- Using gait and training modes
- Maintenance and cleaning instructions
- Review of basic troubleshooting
- How to contact Technical Support
Maintenance and Cleaning

Charging

Charge the Clinician Programmer daily. The lower leg EPG and thigh EPG batteries should also be charged daily. EPG charging instructions can be found in the "Charging the L300 Go System" section of this guide.

EPG Battery Replacement

The lower leg EPG and thigh EPG has a rechargeable battery that can only be replaced by a Bioness authorized representative. Depending on use, the battery may need to be replaced approximately every two to three years. If the battery needs to be replaced, contact the Bioness Client Relations Department, at 800.211.9136, Option 3.

Foot Sensor Battery Replacement

The battery in the Foot Sensor is not rechargeable and should be replaced approximately every six months. The Foot Sensor is powered by a single button cell lithium battery (CR2032 battery).

The red indicator light on the Foot Sensor will flash for five seconds when a low battery is detected. The Foot Sensor Indicator icon on the Control Unit will also be flashing.

Warning: For battery replacement only use a lithium coin battery, CR2032. Use of an incorrect battery may result in damage to the L300 Go System.

To replace the Foot Sensor battery:

1. Use the recess area on the back of the Foot Sensor to pop out the battery lid cover. See Figure 11-1.

   ![Figure 11-1: Replacing the Foot Sensor Battery](image)

2. Note the “+” orientation of the old battery.
3. Remove the old battery.
4. Wait for at least 120 seconds (2 minutes) and then insert the new battery. The “+” should face up.
5. Reattach the battery lid cover to the back of the Foot Sensor by pressing firmly to snap the cover back on.

6. Press the Foot Sensor pressure sensor to activate the sensor.

7. If this does not power on the foot sensor, short the battery connector by placing a coin or the battery itself between the positive and the negative terminal of the foot sensor. Repeat steps 5-6.

⚠️ Remove the old battery, and properly dispose of it according to your local environmental regulations.

### Control Unit Battery Replacement

The battery in the Control Unit is not rechargeable and depending on use will need to be replaced approximately every six months. The Control Unit is powered by a single button cell lithium battery (CR2032 battery).

The Battery Indicator icon on the Control Unit will flash for five seconds at startup when the Control Unit battery is low.

⚠️ **Warning:** For battery replacement only use a lithium coin battery, CR2032. Use of an incorrect battery may result in damage to the L300 Go System.

**To replace the Control Unit battery:**

1. Use the recess area on the back of the Control Unit to pop out the battery lid cover. If you find it difficult to remove the cover a coin (quarter) may be used to open the cover. See Figure 11-2.

   ![Figure 11-2: Replacing the Control Unit Battery](image)

2. Note the “+” orientation of the old battery.

3. Remove the old battery.

4. Insert the new battery by inserting the battery toward the back first and then carefully pressing down on the battery. The “+” should face up.

5. Reattach the battery lid cover to the back of the Control Unit by pressing firmly to snap the cover back on.

⚠️ Remove the old battery, and properly dispose of it according to your local environmental regulations.
Replacing the Quick Fit Electrodes

The Quick Fit Electrodes will need to be replaced at least every two weeks or sooner if they become worn.

⚠️ **Caution:** Use only the electrodes supplied by Bioness.

⚠️ **Caution:** Do not use the L300 Go System without electrodes.

⚠️ **Caution:** Do not fold or twist the Quick Fit Electrode.

**To replace the Quick Fit Electrodes: (See Figure 11-3)**

1. Make sure the lower leg EPG is turned off.
2. Gently remove the used Quick Fit Electrode from the lower leg FS Cuff.
3. Wet the Quick Fit Electrodes with water until they are saturated.
4. With a cloth, gently wipe or blot excess water off the electrode.
5. Align the orange and blue snaps on the Quick Fit Electrode with the orange and blue plug holes on the lower leg FS Cuff.
6. Press firmly to snap the Quick Fit Electrode into the lower leg FS Cuff.

![Figure 11-3: Replacing the Quick Fit Electrode](image)
Instruct the patient to remove and re-wet the entire Quick Fit Electrode every time they remove the lower leg FS Cuff from their leg for more than one hour, and after every three to four hours of use. When wetting the Quick Fit Electrode, always remove it from the lower leg FS Cuff.

If the Quick Fit Electrode dries out, the response to the stimulation may change. If the patient needs to adjust stimulation intensity more often than usual, try re-wetting or replacing the electrode.

**Note:** Store the Quick Fit Electrode where it can air dry, when not in use.

### Replacing the Steering Electrodes

The Steering Electrodes will need to be replaced at least every two weeks or sooner if they become worn.

⚠️ **Caution:** Use only the electrodes supplied by Bioness.

⚠️ **Caution:** Do not use the L300 Go System without electrodes.

⚠️ **Caution:** Do not fold or twist the Steering Electrode.

To replace the Steering Electrodes: *(See Figure 11-4)*

1. Make sure the lower leg EPG is turned off.
2. Gently remove the used Steering Electrode from the lower leg FS Cuff.
3. Wet the electrode with water until they are saturated.
4. With a cloth, gently wipe or blot excess water off the electrode.
5. Align the four snaps on the Steering Electrode with the four plug holes on the lower leg FS Cuff.
6. Press firmly to snap the Steering Electrode into the lower leg FS Cuff.

![Figure 11-4: Replacing the Steering Electrode](image)
Instruct the patient to remove and re-wet the entire Steering Electrode every time they remove the lower leg FS Cuff from their leg for more than one hour, and after every three to four hours of use. When wetting the Steering Electrode, always remove it from the lower leg FS Cuff.

If the Steering Electrode dries out, response to the stimulation may change. If the patient needs to adjust stimulation intensity more often than usual, try re-wetting or replacing the electrode.

**Note:** Store the Steering Electrode where it can air dry, when not in use.

### Replacing the Round Cloth Electrodes

The Cloth Electrodes will need to be replaced at least every two weeks or sooner if they become worn.

**Caution:** Use only cloth electrodes supplied by Bioness.

**Caution:** Do not use your L300 Go System without electrodes.

**To replace the Round Cloth Electrodes:**

1. Make sure the lower leg EPG is turned off.

2. Gently pull the used Round Cloth Electrodes from the cloth electrode bases. Be careful not to detach the electrode bases from the lower leg FS Cuff.

3. If necessary, clean the electrode bases with a damp cloth. The electrode bases may be cleaned and low-level disinfected using 70% isopropyl alcohol (IPA).

4. Wet the Round Cloth Electrodes with water until they are saturated. See Figure 11-5.

5. With a cloth, gently wipe or blot excess water off the back (side with the snap) of the electrodes. See Figure 11-5.

6. Attach the Round Cloth Electrodes to the electrode bases. See Figure 11-6.
Instruct the patient to remove and re-wet the Round Cloth Electrodes every time they remove the lower leg FS Cuff from their leg for more than one hour, and after every three to four hours of use. When wetting the electrodes, always remove them from the lower leg FS Cuff.

If the Round Cloth Electrodes dry out, response to the stimulation may change. If the patient needs to adjust stimulation intensity more often than usual, try re-wetting or replacing the electrode. When not in use, store the Cloth Electrodes where they can air dry.

**Replacing the Hydrogel Electrodes**

The hydrogel electrodes will need to be replaced at least every two weeks.

⚠️ **Caution:** Use only Hydrogel Electrodes supplied by Bioness.

⚠️ **Caution:** Do not use your L300 Go System without electrodes.

**To replace the L300 Hydrogel Electrodes:** (See Figure 11-7)

1. Make sure the lower leg EPG is turned off.
2. Gently pull the used Hydrogel Electrodes from the electrode bases. Be careful not to detach the electrode bases from the lower leg FS Cuff.
3. If necessary, clean the electrode bases with a damp cloth. The electrode bases may be cleaned and low-level disinfected using 70% isopropyl alcohol (IPA).
4. Separate the two new electrodes along the perforation.
5. Split the two-piece covers on each new electrode and discard them.
6. Attach the grid side of the electrodes to the electrode bases, and then press firmly.
7. Remove the covers from the electrodes.

![Figure 11-7: Replacing the Hydrogel Electrodes](image_url)
Save the covers to protect the electrodes between uses. When reapplying the covers, make sure the Bioness logo faces up. If the electrode gel becomes dry, replace with a new electrode set.

**Replacing the Electrode Bases**

Depending on use it may be necessary to need to replace the electrode bases after one year of use.

**To replace the electrode bases:**

1. Remove the wire concealers and mark the position of the used electrode bases on the FS Cuff liner with a permanent marker. See Figure 11-8.

2. Disconnect the electrode base snaps from the plug holes. See Figure 11-8.

3. Remove the used electrode bases from FS Cuff. See Figure 11-9.

4. Attach the new electrode bases where the previous bases were attached. See Figure 11-10.

5. Connect the electrode base snaps to the plug holes. See Figure 11-10.

6. Recover the wires and snaps with the wire concealers, if desired.
Replacing the Thigh Cloth Electrodes

The Thigh Cloth Electrodes will need to be replaced at least every two weeks or sooner if they become damaged.

⚠️ Caution: Use only the electrodes supplied by Bioness.

⚠️ Caution: Do not use your L300 Go System without the electrodes attached.

To replace the Thigh Cloth Electrodes: (See Figure 11-11)

1. Make sure the thigh EPG is turned off.
2. Gently remove the Thigh Electrodes from the thigh FS Cuff.
3. Wet the Thigh Electrodes with water. Gently squeeze the Thigh Electrodes together.
4. Remove excess water from the snap side of the Thigh Electrodes with a cloth.
5. Align the snaps on the Thigh Cloth Electrodes to the plug holes on the thigh FS Cuff.
6. Press firmly to snap the small Thigh Cloth Electrode to the thigh FS Cuff bottom panel. Press firmly to snap the large Thigh Cloth Electrode to the thigh FS Cuff top panel.

Advise patients to remove and re-wet the Thigh Cloth Electrodes every time they remove the thigh FS Cuff from their leg for more than one hour, and after every three to four hours of use. When wetting the Thigh Cloth Electrodes, always remove them from the thigh FS Cuff.

If the Thigh Cloth Electrodes dry out, response to the stimulation may change. If the patient needs to adjust stimulation intensity more often than usual, try re-wetting or replacing the electrode. Store the Thigh Cloth Electrodes where they can air dry, when not in use.
Removing the EPG

The lower leg EPG and the thigh EPG should only be removed for maintenance and to clean the lower leg FS Cuff and/or thigh FS Cuff.

To remove the EPG:
1. Make sure the EPG is turned off.
2. Pull the top of the EPG away from the cradle.
3. Remove the bottom of the EPG from the cradle.

To re-insert the EPG:
4. Insert the bottom of the EPG into the cradle. Then, gently push the top of the EPG until it snaps into the cradle.

Removing the Thigh FS Cuff Straps

The thigh straps can be removed from the thigh FS Cuff for cleaning or for strap replacement.

To remove the thigh straps:
1. Push the attached thigh strap buckle toward the thigh FS Cuff while making a twisting motion. See Figure 11-12.
2. Slide the thigh strap out away from the thigh FS Cuff to detach.
To reattach the thigh straps:

1. Align the strap buckle to the hook attached to the thigh FS Cuff panels.
2. Push the strap buckle with your thumbs toward the strap (direction away from the thigh FS Cuff). See Figure 11-13. The strap buckle will snap into the thigh FS Cuff panel hook.

Cleaning the L300 Go System Components

All L300 Go System components may be cleaned by carefully wiping them with a damp cloth. The electrical components are not waterproof. **Do not immerse them in water.**

Cleaning the Lower Leg FS Cuff

The lower leg FS Cuff is the only component that can be immersed in water to clean. Bioness recommends cleaning the lower leg FS Cuff when replacing the electrodes.

To clean the Lower Leg FS Cuff:

1. Remove the lower leg EPG from the cradle.
2. Gently remove the electrodes from the electrode bases. Leave the electrode bases and snap covers attached to the lower leg FS Cuff. For hydrogel electrodes, re-apply the electrode covers.

**Note:** For individuals using the Steering Electrode or Quick Fit Electrode remove the electrode directly from the lower leg FS Cuff plug holes.

3. Immerse the lower leg FS Cuff for 30 minutes in lukewarm water and mild detergent. Do not use a washing machine.
4. Rinse the lower leg FS Cuff thoroughly under running water.
5. Immerse the lower leg FS Cuff in clean, lukewarm water for an additional 15 minutes.

6. Rinse the lower leg FS Cuff again under running water.

7. Gently blot excess moisture from the lower leg FS Cuff with a towel. Do not wring the FS Cuff. Lay the FS Cuff flat in the shade to air dry. (Do not hang dry.) Drying time will vary from 4 to 12 hours depending on climate and humidity. For faster drying, place the FS Cuff in front of a circulating cold-air fan. Do not use a hot-air dryer or other heat source to dry.

8. When the lower leg FS Cuff is completely dry, insert the lower leg EPG into the cradle and attach the electrodes.

Cleaning the Thigh Straps

1. Make sure the thigh straps are removed from the thigh FS Cuff.

2. Immerse the thigh straps for 30 minutes in lukewarm water and mild detergent. Do not use a washing machine.

3. Rinse the straps thoroughly under running water.

4. Immerse the straps for an additional 15 minutes in clean, lukewarm water.

5. Rinse the straps again under running water.

6. Lay the straps in the shade to dry. If desired, place the items in front of a circulating cold-air fan. Do not use a hot-air dryer or other heat source to dry.

Disinfecting the L300 Go System Components

Disinfecting the Thigh FS Cuff

The plastic parts of the thigh FS Cuff may be disinfected using a combination of CaviWipes™, per the manufacturer’s instructions, and 70% ethanol wipes.

To disinfect the Thigh FS Cuff:

1. Remove the thigh EPG from the EPG cradle.

2. Wipe the plastic surface of the thigh FS Cuff (the side that faces the skin) with a wet CaviWipes disinfection wipes. Make sure to use a new CaviWipes for each of the thigh FS Cuff panels.

Note: Read the manufacturer’s instructions for use, and follow standard precautions for personal protection as appropriate.

3. Using one or more new CaviWipes, wipe the entire surface again for 1 minute. The surface should be visibly wet. Repeat this process again three times, using a new wipe each time.

4. Place a wipe saturated with 70% ethanol over each of the thigh FS Cuff panels (on the side that faces the skin). Cover the entire surface and leave the saturated wipes on the thigh FS Cuff for at least five minutes.

5. After five minutes, wipe the thigh FS Cuff panels with the 70% ethanol wipes and remove them to allow the plastic surface to dry.
Disinfecting the Control Unit and EPG

The Control Unit, lower leg EPG, and thigh EPG may be cleaned and low-level disinfected using wipes or cloths saturated (but not dripping) with 70% isopropyl alcohol (IPA) per the instructions below:

1. Use one saturated disinfectant wipe or cloth to thoroughly wet the component surface.
2. Use a second saturated disinfectant wipe or cloth to remove any surface contaminants. If not removed, soil will impede the disinfectant’s effectiveness.
3. As needed, use additional saturated disinfectant wipes or cloths to keep the components surface wet for three minutes.

**Note:** Follow the Bioness instructions for the specified contact time to ensure an effective bacteria kill.

Disinfecting the System Kit and Clinician Kit Carrying Cases

The L300 Go System Kit and Clinician Kit carrying cases may be cleaned and low-level disinfected using 70% isopropyl alcohol (IPA) per the following instructions:

1. Wipe the entire surface of the kit carrying case with a cloth or wipe saturated with 70% IPA.
2. Use a new cloth or wipe saturated with 70% IPA to remove any surface contaminants. Soil will impede the disinfectant’s effectiveness, if not removed.
3. Wipe the entire surface of the kit carrying case again with a new cloth or wipe saturated with 70% IPA.
4. Use additional new cloths or wipes saturated with 70% IPA as needed to keep the entire surface of the carrying case wet for 10 minutes.

**Note:** Follow the Bioness instructions for the specified contact time to ensure an effective bacteria kill.

Do not use other cleaning/disinfecting agents such as a diluted bleach mixture, or other disinfecting wipes. Bioness has not tested these products’ effectiveness on the L300 Go System components.
Pairing Replacement Part Components

The L300 Go System components must be paired to each other to communicate wirelessly. The EPG and Control Unit in the System Kit are already paired. The Foot Sensor will need to be paired to the other components during a fitting session for patients that are using the optional Foot Sensor. When a Control Unit, EPG, or Foot Sensor is replaced, the new replacement component must be paired to the existing components.

Note: When pairing make sure the components are within a few inches of each other.

Pairing Setup

1. If the replacement component is an EPG, make sure the new EPG is fully charged. See the "Charging the L300 Go System" section in this guide for more information.
2. Make sure the EPG is attached to the EPG Cradle on the FS Cuff.
3. Turn on the EPG by pressing the Power button on the EPG.

Pairing a Lower Leg EPG to a Thigh EPG

1. Make sure both EPGs are turned on.
2. Place the lower leg FS Cuff and thigh FS Cuff, with EPGs attached, within a few inches of each other.
3. Simultaneously press and hold for three seconds the Plus and Minus buttons on the lower leg EPG. The EPG will go into pairing mode and the EPG State Indicator Light will display an alternating green, yellow, and red light.
4. Immediately simultaneously press and hold for three seconds the Plus and Minus buttons on the thigh EPG. The EPG will go into pairing mode and the EPG State Indicator Light will display an alternating green, yellow, and red light.
5. Once paired the EPG State Indicator Light will flash green on both EPGs.

Pairing a New Control Unit to the EPG

1. For individuals using the lower leg FS Cuff, make sure the lower leg EPG is turned on. For individuals using the Thigh Stand-Alone FS Cuff, make sure the thigh EPG is turned on.
2. Place the FS Cuff, with EPG attached, and the Control Unit within a few inches of each other.
3. Turn on the Control Unit by pressing any button. A flashing "P" will appear in the display screen, if not, press the Plus and Minus buttons simultaneously until a flashing "P" appears.
4. For individuals using the lower leg FS Cuff, simultaneously press and hold for three seconds the Plus and Minus buttons on the lower leg EPG. The EPG will go into pairing mode and the EPG State Indicator Light will display an alternating green, yellow, and red light.
5. For individuals using the Thigh Stand-Alone FS Cuff, simultaneously press and hold for three seconds the Plus and Minus buttons on the thigh EPG. The EPG will go into pairing mode and the EPG State Indicator Light will display an alternating green, yellow, and red light.

6. Once paired, the EPG State Indicator Light on the EPG will flash green. The connected EPG/s will appear on the display screen on the Control Unit.

**Pairing an Existing Control Unit to a Different EPG**

*Note:* If pairing to an EPG with different patient parameters, be sure to unpair the Control unit first otherwise the previous patient's information will save onto the new EPG.

1. For individuals using the lower leg FS Cuff, make sure the lower leg EPG is turned on. For individuals using the Thigh Stand-Alone FS Cuff, make sure the thigh EPG is turned on.

2. Place the FS Cuff, with EPG attached, and the Control Unit within a few inches of each other.

3. Turn on the Control Unit by pressing any button. Simultaneously press and hold the Plus and Minus buttons on the Control Unit.

4. Immediately simultaneously press and hold for three seconds the Plus and Minus buttons on either the lower leg EPG or Thigh Stand-Alone EPG. The EPG will go into pairing mode and the EPG State Indicator Light will display an alternating green, yellow, and red light.

5. Once paired the EPG State Indicator Light on the EPG will flash green. The connected EPG will appear on the display screen on the Control Unit.

6. The patient's parameters stored on the Control Unit will carry over onto the new EPG unless the Control Unit was unpaired.

**Pairing a New Foot Sensor to the EPG**

1. For individuals using the lower leg FS Cuff, make sure the lower leg EPG is turned on. For individuals using the Thigh Stand-Alone FS Cuff, make sure the thigh EPG is turned on.

2. Place the FS Cuff, with EPG attached, and the Foot Sensor within a few inches of each other.

3. Remove the battery from the Foot Sensor, wait 120 seconds, and then insert the battery back into the Foot Sensor. Make sure to press firmly on the battery cover to snap back into place.

4. Press the Foot Sensor pressure sensor to activate the sensor.

5. For individuals using the lower leg FS Cuff, simultaneously press and hold for three seconds the Plus and Minus buttons on the lower leg EPG. The EPG will go into pairing mode and the EPG State Indicator Light will display an alternating green, yellow, and red light.

6. For individuals using the Thigh Stand-Alone FS Cuff, simultaneously press and hold for three seconds the Plus and Minus buttons on the thigh EPG. The EPG will go into pairing mode and the EPG State Indicator Light will display an alternating green, yellow, and red light.

7. Once paired the EPG State Indicator Light on the EPG will flash green and the indicator light on the Foot Sensor will flash green.

*Note:* Once the new Foot Sensor has been paired to the existing EPG the Control Unit will automatically recognize the paired Foot Sensor.
Troubleshooting

Using the Tester

The Tester is used to troubleshoot if there is a disconnection in the lower leg FS Cuff, thigh FS Cuff, or the EPG. The Tester provides audio feedback when connected to the lower leg FS Cuff, thigh FS Cuff, or EPG and stimulation is applied.

Testing the Lower Leg FS Cuff

1. Connect the Tester to the blue and orange plug holes on the lower leg FS Cuff. See Figure 13-1.

2. Turn on the lower leg EPG by pressing the Power button on the EPG(s).

3. Turn on the Control Unit by pressing any button.

4. Select training mode by pressing the Mode button on the Control Unit until the Training Indicator icon appears in the lower right corner of the digital display.

5. Press the Stim button on the Control Unit. You should hear a buzzing when stimulation is on and no buzzing when stimulation is off.

6. Select gait mode by pressing the Mode button on the Control Unit until the Gait Indicator icon appears in the lower right corner of the digital display.

7. Press the Stim button on the Control Unit.

8. If the EPG motion sensor setting is activated move the lower leg FS Cuff from side to side. You should hear a buzzing when stimulation is on and no buzzing when stimulation is off.

9. If the EPG motion sensor setting is not activated press and release the pressure sensor on the Foot Sensor. You should hear a buzzing when you release pressure from the pressure sensor and no buzzing when you press on the pressure sensor.

If any of the above steps elicits an error indication, test using the advanced testing procedures.
Testing the Thigh FS Cuff

1. Connect the Tester to the distal snap on the thigh FS Cuff proximal panel and to the proximal snap on the thigh FS Cuff distal panel. See Figure 13-2.

2. Turn on the thigh EPG by pressing the Power button on the EPG(s).

3. Turn on the Control Unit by pressing any button.

4. Select training mode by pressing the Mode button on the Control Unit until the Training Indicator icon appears in the lower right corner of the digital display.

5. Press the Stim button on the Control Unit. You should hear a buzzing when stimulation is on and no buzzing when stimulation is off.

6. Select gait mode by pressing the Mode button on the Control Unit until the Gait Indicator icon appears in the lower right corner of the digital display.

7. Press the Stim button on the Control Unit.

8. Press and release the pressure sensor on the Foot Sensor. You should hear a buzzing when you release pressure from the pressure sensor and no buzzing when you press on the pressure sensor.

If any of the above steps produces an error indication, refer to advanced testing procedures.

Error Code Descriptions

When an error occurs with the L300 Go System the EPG will emit an audio alert and the Status Indicator Light on the EPG will display a flashing red light. The Control Unit LCD display will show a flashing Error Indicator icon and a flashing Numeric Indicator communicating the error code. The L300 Go Clinician App software also displays error code information. Refer to Table 11-1 for the error code descriptions and solutions.

<table>
<thead>
<tr>
<th>Control Unit and L300 Go Clinician App Error Codes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Error Code</strong></td>
</tr>
<tr>
<td>----------------</td>
</tr>
<tr>
<td>E1</td>
</tr>
<tr>
<td>Error Code</td>
</tr>
<tr>
<td>------------</td>
</tr>
<tr>
<td>E2</td>
</tr>
<tr>
<td>E3</td>
</tr>
<tr>
<td>E4</td>
</tr>
<tr>
<td>E5</td>
</tr>
<tr>
<td>E6</td>
</tr>
<tr>
<td>E7</td>
</tr>
<tr>
<td>E8</td>
</tr>
<tr>
<td>E9</td>
</tr>
<tr>
<td>E10</td>
</tr>
<tr>
<td>E12</td>
</tr>
<tr>
<td>E21</td>
</tr>
</tbody>
</table>

Table 13-1: Control Unit and L300 Go Clinician App Error Codes
Frequently Asked Questions

If you have any questions or concerns, please contact the Bioness Client Relations Department at 800.211.9136, Option 3 or visit www.bioness.com.

When charging the EPG, how will I know when the batteries are fully charged?
The Battery Indicator Light on the EPG will display a solid green light, briefly at power up, when the EPG battery is fully charged. Charging takes approximately three hours. If the EPG is completely discharged it can take up to six hours for the EPG battery to charge.

If I charge the EPG every day, will I harm the batteries?
No, daily charging will not affect the lifespan or functionality of the EPG battery. Daily charging of the EPG is recommended.

How will I know when the EPG battery charge level is low?
The Battery Indicator Light on the EPG will display a solid yellow light and the Status Indicator Light will flash red. When the battery is near empty the EPG will emit an audible alarm in addition to the low battery lights until it is completely discharged or connected to a power source.

How will I know when the Foot Sensor battery charge level is low?
A Foot Sensor battery will last for approximately six months, and then it will need to be replaced. When the Foot Sensor battery charge level is low, the red Indicator Light on the Foot Sensor will flash for five seconds.

What do I do if the electrodes or electrode bases are frayed, peeling, damaged, or falling off the FS Cuff?
Replace any worn or damaged electrodes or electrode bases. Refer to the "Maintenance and Cleaning" chapter in this guide.

What if the patient’s ankle is not moving (or the foot does not lift satisfactorily), and the L300 Go System is not indicating any errors?
• Make sure the EPG(s) is turned off.
• Reposition the L300 FS Cuff.
• Make sure the strap is snug and the lower leg FS Cuff is secure.
• Turn on the lower leg EPG by pressing the Power button on the EPG.
• Test the placement of the lower leg FS Cuff by pressing and holding the Stim button on the EPG for at least five seconds. The EPG will deliver stimulation until the Stim button is released.
How come the patient's knee is not moving satisfactorily, and the L300 Go System is not indicating any errors?

- Make sure the EPG(s) is turned off.
- Reposition the thigh FS Cuff.
- Make sure the straps are snug.
- Turn on the thigh EPG by pressing the Power button on the EPG.
- Test the placement of the thigh FS Cuff by pressing and holding the Stim button on the EPG for at least five seconds. The EPG will deliver stimulation until the Stim button is released.

Why is the stimulation inconsistent when the patient is walking, but the L300 Go System is not indicating any errors?

Have the patient stop walking and shift their weight from side to side.

For patients using the Foot Sensor:
- Check for proper placement of the pressure sensor, reposition the pressure sensor slightly forward in their shoe, or loosen the shoelace.
- Check the Foot Sensor wire for wear or fraying, and check the transmitter and pressure sensor for damage.
- If damaged contact Bioness for a replacement part.

What should I do if the patient's skin is irritated or has a skin reaction where the electrodes or FS Cuff adheres?

Have the patient stop using the L300 Go System immediately and contact Bioness. The patient should resume use only when the skin is completely healed. Give patients the L300 Go Skin Care Guidelines and a skin conditioning protocol.

How can I verify that current is flowing through the L300 Go System?

Connect the Tester to the FS Cuff. The Tester will buzz when stimulation intensity is at least 10 mA.

What else can I use the Tester for?

The Tester can be used as an educational tool, to demonstrate when stimulation is on in the various stimulation modes.
## Technical Specifications

<table>
<thead>
<tr>
<th>Control Unit Specifications</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Classification</strong></td>
</tr>
<tr>
<td><strong>Operation Modes</strong></td>
</tr>
<tr>
<td><strong>Battery Type</strong></td>
</tr>
</tbody>
</table>
| **Controls**                | • Select button- to select an EPG  
   • Mode button- to select an operating mode  
   • Stim button- to turn stimulation on/off  
   • Minus and Plus buttons- to decrease or increase stimulation intensity level  
   • Volume button- turns the EPG audio feedback on/off |
| **Indications**             | • EPG icon (Ready, Stim, and Error State), Foot Sensor icon, Operating Mode icon, Battery Level icon, Error icon, and Volume (mute) icon  
   • Numerical display for stimulation intensity and error code display |
| **Carrying Options**        | In pocket or neck strap |
| **Dimensions**              | • Length: 75 mm (2.9 in.)  
   • Width: 40 mm (1.6 in.)  
   • Height: 17 mm (0.7 in.) |
| **Weight**                  | 60 grams |

<table>
<thead>
<tr>
<th>Environmental Ranges</th>
</tr>
</thead>
</table>
| Transport and Storage Conditions:  
   • Temperature: -25°C to +55°C  
   • Relative humidity: 5% to 90%  
   • Pressure: 20 kPa to 106 kPa  
| Operating Conditions:  
   • Temperature: 5°C to 40°C  
   • Relative humidity: 5% to 75%  
   • Operating pressure: 80 kPa to 106 kPa |

<table>
<thead>
<tr>
<th>Ingress Protection Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>IP22</td>
</tr>
<tr>
<td>Protection Against:</td>
</tr>
</tbody>
</table>
   • Object Sized >12.5mm  
   • Dripping Water When Tilted up to 15°  
| Effective Against:          |  
   • Fingers or Similar Objects  
   • Vertical dripping water shall have no harmful effect when the enclosure is tilted at an angle up to 15° from its normal position. |

| FCC ID Number               | RYYEYSGJN |
## EPG Specifications

<table>
<thead>
<tr>
<th>Category</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Classification</strong></td>
<td>Internally powered, continuous operation with type BF applied part(s)</td>
</tr>
<tr>
<td><strong>Battery Type</strong></td>
<td>Rechargeable lithium ion battery, 3.7V, 1000 mAh</td>
</tr>
<tr>
<td><strong>Controls</strong></td>
<td>• Power button - turns system on/off</td>
</tr>
<tr>
<td></td>
<td>• Stim button - turns stimulation on/off</td>
</tr>
<tr>
<td></td>
<td>• Minus and Plus buttons - decrease or increase stimulation intensity</td>
</tr>
<tr>
<td><strong>Indications</strong></td>
<td>• Status Indicator Light and Battery Indicator Light</td>
</tr>
<tr>
<td></td>
<td>• Audio and vibration feedback</td>
</tr>
<tr>
<td></td>
<td>• “Beeps” for audio alerts</td>
</tr>
<tr>
<td><strong>Dimensions</strong></td>
<td>Length: 82 mm, Width: 47 mm, Height: 15 mm</td>
</tr>
<tr>
<td><strong>Weight</strong></td>
<td>60 grams</td>
</tr>
<tr>
<td><strong>Environmental Ranges</strong></td>
<td>Transport and Storage Conditions:</td>
</tr>
<tr>
<td></td>
<td>• Temperature: -25°C to +55°C</td>
</tr>
<tr>
<td></td>
<td>• Relative humidity: 5% to 90%</td>
</tr>
<tr>
<td></td>
<td>• Pressure: 20 kPa to 106 kPa</td>
</tr>
<tr>
<td></td>
<td>Operating Conditions:</td>
</tr>
<tr>
<td></td>
<td>• Temperature: 5°C to 40°C</td>
</tr>
<tr>
<td></td>
<td>• Relative humidity: 5% to 75%</td>
</tr>
<tr>
<td></td>
<td>• Operating pressure: 80 kPa to 106 kPa</td>
</tr>
<tr>
<td><strong>Ingress Protection Rating</strong></td>
<td>IP42</td>
</tr>
<tr>
<td></td>
<td>Protection Against:</td>
</tr>
<tr>
<td></td>
<td>• &gt;1mm Solids Ingress</td>
</tr>
<tr>
<td></td>
<td>• Dripping Water When Tilted up to 15°</td>
</tr>
<tr>
<td></td>
<td>Effective Against:</td>
</tr>
<tr>
<td></td>
<td>• Most wires, screws, etc.</td>
</tr>
<tr>
<td></td>
<td>• Vertical dripping water shall have no harmful effect when the enclosure</td>
</tr>
<tr>
<td></td>
<td>is tilted at an angle up to 15° from its normal position.</td>
</tr>
<tr>
<td><strong>FCC ID Number</strong></td>
<td>RYYEYSGJN</td>
</tr>
<tr>
<td><strong>Pulse Parameters</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Pulse</strong></td>
<td>Balanced Biphasic</td>
</tr>
<tr>
<td><strong>Waveform</strong></td>
<td>Symmetric or Asymmetric</td>
</tr>
<tr>
<td><strong>Intensity (Peak)</strong></td>
<td>0–100 mA, 1-mA resolution (positive phase)</td>
</tr>
<tr>
<td><strong>Maximum Intensity (rms)</strong></td>
<td>16.5 mA (rms)</td>
</tr>
<tr>
<td><strong>Max Voltage</strong></td>
<td>130 V</td>
</tr>
</tbody>
</table>

### Symmetric Pulse Parameters

<table>
<thead>
<tr>
<th>Positive Pulse Duration (µsec)</th>
<th>100</th>
<th>150</th>
<th>200</th>
<th>250</th>
<th>300</th>
</tr>
</thead>
</table>
### Negative Pulse Duration (µsec)

| 100 | 150 | 200 | 250 | 300 |

### Interphase Interval (µsec)

| 50, 100, 200 |

### Total Pulse Duration for Inter-Phase Interval of 50 µsec

| 250 | 350 | 450 | 550 | 650 |

### Asymmetric

### Positive Pulse Duration (µsec)

| 100 | 150 | 200 | 250 | 300 |

### Negative Pulse Duration (µsec)

| 300 | 450 | 600 | 750 | 900 |

### Interphase Interval (µsec)

| 20, 50, 100, 200 |

### Total Pulse Duration for Inter-Phase Interval of 50 µsec

| 450 | 650 | 850 | 1050 | 1250 |

**Max. Load**

80,000 ohm (Subject to max. voltage limitation)

**Min. Load**

100 ohm

**Pulse Repetition Rate**

10–45 Hz, 5 Hz resolution

### Gait Parameters

**Swing Control Delay (%)**

0–100% of phase* time, 10% resolution

**Swing Control End (%)**

0–100% of phase* time, 10% resolution

**Stance Control Delay (%)**

0–100% of phase* time, 10% resolution

**Stance Control End (%)**

0–100% of phase* time, 10% resolution

**Ramp Up**

0–0.5 seconds, 0.1-second resolution

**Ramp Down**

0–0.5 seconds, 0.1-second resolution

**Extend (%)**

0–100% of stance time, 10% resolution

**Max. Duration of Stimulation**

1–10 seconds, 1-second resolution

* Stimulation burst can start either on swing or stance phase.
### EPG Alert Onset Time

<table>
<thead>
<tr>
<th>Condition</th>
<th>Delay to Alert</th>
</tr>
</thead>
<tbody>
<tr>
<td>Incorrect Stimulation</td>
<td>&lt; 5 sec</td>
</tr>
<tr>
<td>Communication Failure</td>
<td>&lt; 1 sec</td>
</tr>
<tr>
<td>Corrupted Memory</td>
<td>&lt; 100 ms</td>
</tr>
<tr>
<td>EPG is in the Incorrect Cuff</td>
<td>(after stimulation is enabled) &lt; 100 ms</td>
</tr>
<tr>
<td>Electrode Condition Alert (short / bad contact/open)</td>
<td>&lt; 2.5 sec</td>
</tr>
<tr>
<td>Battery Empty</td>
<td>&lt; 1 sec</td>
</tr>
</tbody>
</table>

**Note:** The alert signal range is from 39-51 dBA.

All logs are stored in EEPROM when the alert is generated. The logs are maintained as long as the EPG has power for at least a few seconds after an alert is activated. Once the contents of the logs reach maximum storage capacity, logs rollover and the oldest entries are overwritten.

### Foot Sensor Specifications

<table>
<thead>
<tr>
<th>Classification</th>
<th>Internally powered, continuous operation with type BF applied part(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Battery Type</td>
<td>Button cell lithium battery, CR2032, 3V, 240 mAh</td>
</tr>
</tbody>
</table>
| Dimensions of the Transmitter  | • Length: 65 mm (2.6 in.)  
                                  | • Width: 50 mm (2 in.)  
                                  | • Height: 10 mm (0.4 in.) | |
| Weight                          | 25 grams                                                              |
| Environment Ranges              | Transport and Storage Conditions:  
                                  | • Temperature: -25°C to +55°C  
                                  | • Relative humidity: 5% to 90%  
                                  | • Pressure: 20 kPa to 106 kPa  
                                  | Operating Conditions:  
                                  | • Temperature: 5°C to 40°C  
                                  | • Relative humidity: 5% to 75%  
                                  | • Operating pressure: 80 kPa to 106 kPa  |
| Ingress Protection Rating IP52  | Protection Against:  
                                  | • Dust  
                                  | • Dripping water when tilted up to 15°  
                                  | Effective Against:  
                                  | • Ingress of dust is not entirely prevented, but it must not enter in sufficient quantity to interfere with satisfactory operation of the equipment.  
                                  | • Vertical dripping water shall have no harmful effect when the enclosure is tilted at an angle up to 15° from its normal position. |
| FCC ID Number                   | RYYEYSGJN                                                            |
### Lower Leg FS Cuff Specifications

<table>
<thead>
<tr>
<th></th>
<th>Regular L300 FS Cuff</th>
<th>Small L300 FS Cuff</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Material</strong></td>
<td>Fabric-Polymer</td>
<td>Fabric-Polymer</td>
</tr>
<tr>
<td><strong>Fits Limb Circumference</strong></td>
<td>29–51 cm (11–20 in.)</td>
<td>22–31 cm (8-12.2 in.)</td>
</tr>
</tbody>
</table>
| **Dimensions**   | • Height: 160 mm (6.3 in.)  
                  | • Width: 100 mm (3.9 in.)    
                  | • Depth: 125 mm (4.9 in.)    | • Height: 110.5 mm (4.5 in.)  
                  | • Width: 80 mm (3 in.)       
                  | • Depth: 100 mm (4 in.)      |
| **Weight**       | Approximately 150 grams (4.8 oz) | Approximately 104 grams (3.6 oz) |

### Thigh FS Cuff Specifications

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Material</strong></td>
<td>Fabric-Polymer</td>
</tr>
</tbody>
</table>
| **Fits Limb Circumference** | • Upper thigh circumference: 53 cm–85 cm  
                               | • Lower Thigh circumference: 33 cm–50 cm  
                               | • Thigh length: 24 cm–35 cm |
| **Dimensions**   | Length: 200 mm    |
|                  | Circumference (minimal):  
                  | • Proximal panel: 270 mm    
                  | • Distal panel, regular: 310 mm    
                  | • Distal panel, large: 510 mm    |
| **Weight**       | Approximately 300 grams |

### System Charger Specifications

Use the medical Class II safety approved power supply provided/approved by Bioness with the following ratings:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Input</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Voltage</strong></td>
<td>100–240 V</td>
</tr>
<tr>
<td><strong>Current</strong></td>
<td>0.5 A</td>
</tr>
<tr>
<td><strong>Frequency</strong></td>
<td>50–60 Hz</td>
</tr>
<tr>
<td><strong>Output</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Voltage</strong></td>
<td>5.0 V</td>
</tr>
</tbody>
</table>
| **Current**      | • USB 1: 2.1 A    
                  | • USB 2: 1.0 A    |

**Note:** Do not use the L300 Go System while charging. Do not wear the lower leg FS Cuff or thigh FS Cuff while charging.
## Electrode and Electrode Base Specifications - Lower Leg FS Cuff

| Hydrogel Electrodes | • Two, 45-mm (1.77-in.) diameter, surface area $15.8 \text{ cm}^2$ hydrogel electrodes  
• Transport and storage temperature: 5°C to 27°C (41.0°F to 80.6°F)  
• Relative humidity: 35% to 50%  
**Note:** Use only electrodes provided by Bioness Inc |
| Hydrogel Electrode Bases, 45mm | • Two, 45-mm (1.77-in.) diameter, relocatable polymer electrode bases for individual fitting |
| Cloth Electrode Bases, 45mm | • Two, 45-mm (1.77-in.) diameter, relocatable Thermoplastic elastomer (TPE) electrode bases |
| Round Cloth Electrodes, 45mm | • Two, 45-mm (1.77-in.) diameter, relocatable non-woven polymer fabric (80% viscose, 20% polypropylene); conductive layer, stainless steel  
• Male snap connector  
• Low Density Polyethylene (LDPE) 10% + Ethylene Vinyl acetate (EVA)  
• Surface Area: $15.8 \text{ cm}^2$ |
| Quick Fit Electrode (right - A and left - A) | • Non-woven polymer fabric (80% viscose, 20% polypropylene); conductive layer, stainless steel  
• Male snap connector  
• Low Density Polyethylene (LDPE) 10% + Ethylene Vinyl acetate (EVA)  
• Surface area: $43.2 \text{ cm}^2 \ \& \ 55.3 \text{ cm}^2$ |
| Steering Electrode (right and left) | • Non-woven polymer fabric (80% viscose, 20% polypropylene); conductive layer, stainless steel  
• Male snap connector  
• Low Density Polyethylene (LDPE) 10% + Ethylene Vinyl acetate (EVA)  
• Surface area: $21.2 \text{ cm}^2$ (proximal cathode) \ $19.5 \text{ cm}^2$ (distal cathode) \ $56.9 \text{ cm}^2$ (anode) |
| Small Round Cloth Electrodes, 36mm | • Two, 36-mm (1.41-in.) diameter, relocatable non-woven polymer fabric (80% viscose, 20% polypropylene); conductive layer, stainless steel  
• Male Snap Connector  
• Low Density Polyethylene (LDPE) 10% + Ethylene Vinyl acetate (EVA)  
• Surface area: $10.1 \text{ cm}^2$ |
| Small Cloth Electrode Bases, 36mm | • Two, 36-mm (1.41-in.) diameter, relocatable Thermoplastic elastomer (TPE) electrode bases |
| L300 Quick Fit Electrode, Small A | • Non-woven polymer fabric (80% viscose, 20% polypropylene); conductive layer, stainless steel  
• Male snap connector  
• Low Density Polyethylene (LDPE) 10% + Ethylene Vinyl acetate (EVA)  
• Surface area: $31.1 \text{ cm}^2 \ \& \ 20.6 \text{ cm}^2$ |
| L300 Quick Fit Electrode, Small B | • Non-woven polymer fabric (80% viscose, 20% polypropylene); conductive layer, stainless steel  
• Male snap connector  
• Low Density Polyethylene (LDPE) 10% + Ethylene Vinyl acetate (EVA)  
• Surface area: $19.9 \text{ cm}^2 \ \& \ 28.2 \text{ cm}^2$ |
## Thigh FS Cuff Cloth Electrode Specifications

<table>
<thead>
<tr>
<th>Material</th>
<th>Non-woven cloth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Note</td>
<td>Use only electrodes provided by Bioness Inc.</td>
</tr>
<tr>
<td>Dimensions</td>
<td></td>
</tr>
<tr>
<td>• Proximal Oval</td>
<td>130 mm x 75 mm</td>
</tr>
<tr>
<td>• Distal Oval</td>
<td>120 mm x 63 mm</td>
</tr>
</tbody>
</table>
System Characteristics

The L300 Go System communicates wirelessly between components.

<table>
<thead>
<tr>
<th>Description</th>
<th>Industry-standard Bluetooth® Low Energy (BLE) 4.1 communication protocol</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating Frequency Band</td>
<td>2.4 Ghz, ISM band (2401-2482 MHz)</td>
</tr>
<tr>
<td>Type of Modulation</td>
<td>FSK</td>
</tr>
<tr>
<td>Type of Modulating Signal</td>
<td>Binary data message</td>
</tr>
<tr>
<td>Data Rate [=Frequency of Modulating Signal]</td>
<td>250 Kbps</td>
</tr>
<tr>
<td>Effective Radiated Power</td>
<td>&lt;10 dBm</td>
</tr>
<tr>
<td>Receiver Bandwidth</td>
<td>812 kHz around a selected frequency</td>
</tr>
<tr>
<td>EMC Testing</td>
<td>Complies with FCC 15.2473 (for U.S.) regulations</td>
</tr>
<tr>
<td></td>
<td>Complies with IEC 60601-1-2</td>
</tr>
<tr>
<td></td>
<td>Complies with IEC 60601-2-10</td>
</tr>
</tbody>
</table>

- **Quality of Service (QOS):** The L300 Go System was designed and tested to have a response rate of 10-100ms latency depending on system configuration after the detection of a heel event.

- **Wireless Interference:** The L300 Go System was designed and tested to not have interference from other RF devices (including other L300 Go systems, WiFi networks, Cellular Devices, Microwaves and other Bluetooth® devices).

L300 Go System is not susceptible to the wide range of expected EMI emitters, such as Electronic Article Surveillance Systems (EAS), Radio Frequency Identification Systems (RFID), Tag Deactivators, and Metal Detectors. However, there is no guarantee that interference will not occur in a particular situation.

⚠️ **Caution:** If performance of the L300 Go System is affected by other equipment, the user should turn the L300 Go system off, and move away from the interfering equipment.

⚠️ **Caution:** When controlling the L300 Go System on a patient using L300 Go Clinician App, make sure there is always line of site between the L300 Go Clinician App and the patient. In case of communication failure between the L300 Go Clinician App and the patient's L300 Go System, move L300 Go Clinician App closer to the patient's L300 Go System.
## Electromagnetic compatibility (EMC) Information

### Guidance and Manufacturer’s Declaration—Electromagnetic Emissions

The L300 Go System is intended for use in the electromagnetic environment specified below. The customer or the user of the L300 Go System should assure that it is used in such an environment.

<table>
<thead>
<tr>
<th>Emissions Test</th>
<th>Compliance</th>
<th>Electromagnetic Environment — Guidance</th>
</tr>
</thead>
<tbody>
<tr>
<td>RF emissions CISPR 11</td>
<td>Group 1</td>
<td>The L300 Go System uses RF energy only for its internal function. Therefore, its RF emissions are very low and are not likely to cause any interference in nearby electronic equipment.</td>
</tr>
<tr>
<td>RF emissions CISPR 11</td>
<td>Class B</td>
<td>The L300 Go System is suitable for use in all establishments, including domestic establishments and those directly connected to the public low-voltage power supply network that supplies buildings used for domestic purposes.</td>
</tr>
<tr>
<td>Harmonic emissions IEC 61000-3-2</td>
<td>Class A</td>
<td></td>
</tr>
<tr>
<td>Voltage fluctuations/flicker emissions</td>
<td>Complies</td>
<td></td>
</tr>
<tr>
<td>IEC 61000-3-3</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Guidance and Manufacturer’s Declaration—Electromagnetic Immunity for All Equipment and Systems

The L300 Go System is intended for use in the electromagnetic environment specified below. The customer or the user of the L300 Go System should assure that it is used in such an environment.

<table>
<thead>
<tr>
<th>Immunity Test</th>
<th>IEC 60601 Test Level</th>
<th>Compliance Level</th>
<th>Electromagnetic Environment—Guidance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Electrostatic discharge (ESD) IEC 61000-4-2</td>
<td>+/- 8 kV contact +/- 15 kV air</td>
<td>+/- 8 kV contact +/- 15 kV air</td>
<td>Floors should be wood, concrete, or ceramic tile. If floors are covered with synthetic material, the relative humidity should be at least 30%.</td>
</tr>
<tr>
<td>Electrical fast transient/burst IEC 61000-4-4</td>
<td>+/-2 kV for power supply lines +/- 1 kV for Input/output lines</td>
<td>+/- 2 kV for power supply lines</td>
<td>Mains power quality should be that of a typical commercial or hospital environment.</td>
</tr>
<tr>
<td>Surge IEC 61000-4-5</td>
<td>+/-1 kV line to line +/-2 kV line to earth</td>
<td>+/-1 kV line to line +/-2 kV line to earth</td>
<td>Mains power quality should be that of a typical commercial or hospital environment.</td>
</tr>
</tbody>
</table>
**Guidance and Manufacturer’s Declaration—Electromagnetic Immunity for All Equipment and Systems**

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</thead>
<tbody>
<tr>
<td>Voltage dips, short interruptions and voltage variations on power supply input lines</td>
<td>IEC 61000-4-11</td>
<td>&lt;5% $U_T$ (&gt;95% dip in $U_T$) for 0.5 cycle</td>
<td>Mains power quality should be that of a typical commercial or hospital environment. If the user of the L300 Go System requires continued operation during power mains interruptions, it is recommended that the equipment be powered from an uninterruptible power supply or a battery.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>40% $U_T$ (60% dip in $U_T$) for 5 cycles</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>70% $U_T$ (30% dip in $U_T$) for 25 cycles</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>&lt;5% $U_T$ (&gt;95% dip in $U_T$) for 5 sec</td>
<td></td>
</tr>
<tr>
<td>Power frequency (50/60 Hz) magnetic field</td>
<td>IEC 61000-4-8</td>
<td>30 Aa/m</td>
<td>Power frequency magnetic fields should be at levels characteristic of a typical location in a typical commercial or hospital environment.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>30 A/m</td>
<td></td>
</tr>
</tbody>
</table>

**Note:** $U_T$ is the AC mains voltage prior to application of the test level.

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**Guidance and Manufacturer’s Declaration—Electromagnetic Immunity**

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<tbody>
<tr>
<td>Portable and mobile RF communications equipment should be used no closer to any part of the L300 Go System, including cables, than the recommended separation distance calculated from the equation applicable to the frequency of the transmitter.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The L300 Go System is intended for use in the electromagnetic environment specified below. The customer or the user of the L300 Go System should assure that it is used in such an environment.

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<tbody>
<tr>
<td>Conducted RF</td>
<td>IEC 61000-4-6</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>3 Vrms 150 kHz to 80 MHz</td>
<td>3 Vrms 150 kHz to 80 MHz</td>
<td><strong>Recommended separation distance:</strong> &lt;br&gt;( d = 1.2\sqrt{P} )</td>
</tr>
<tr>
<td></td>
<td>6 Vrms ISM and Amateur Radio Bands</td>
<td>6 Vrms ISM and Amateur Radio Bands</td>
<td></td>
</tr>
</tbody>
</table>

| Radiated RF   | IEC 61000-4-3         |                  |                                       |
|               | 10 V/m 80 MHz to 2.7 GHz | \([E_1] = 10 \text{ V/m} \) in 26 MHz to 2.7 GHz | **Recommended separation distance:** <br>\( d = 0.4\sqrt{P} \), 80–800 MHz range <br>\( d = 0.7\sqrt{P} \), 800–2700 MHz range |

**NOTE 1:** At 80 MHz and 800 MHz, the higher frequency range applies. <br>**NOTE 2:** These guidelines may not apply in all situations. Electromagnetic propagation is affected by absorption and reflection from structures, objects, and people. <br>**NOTE 3:** \( P \) is the maximum output power rating of the transmitter in watts (W) according to the transmitter manufacturer and \( d \) is the recommended separation distance in meters (m). <br>**NOTE 4:** Field strengths from fixed RF transmitters, as determined by an electromagnetic site survey, should be less than the compliance level in each frequency range.

**NOTE 5:** Interference may occur in the vicinity of equipment marked with the following symbol: 📣

- Field strengths from fixed transmitters, such as base stations for radio (cellular/cordless) telephones and land mobile radios, amateur radio, AM and FM radio broadcast, and TV broadcast cannot be predicted theoretically with accuracy. To assess the electromagnetic environment due to fixed RF transmitters, an electromagnetic site survey should be considered. If the measured field strength in the location in which the L300 Go System is used exceeds the applicable RF compliance level above, the L300 Go System should be observed to verify normal operation. If abnormal performance is observed, additional measures may be necessary, such as re-orienting or relocating the L300 Go System. <br>- Over the frequency range 150 kHz to 80 MHz, field strengths should be less than 3 V/m.