



2026 - 2027 PRODUCT CATALOG



Who is OPSB™

Our Story.....05

New to OPSB™

Halo Gravity Traction System: TRAXIO06

GiggleFIT Therapeutic Play Gym07

PediHip™ Hippo Rigid Brace08

PediHip™ Modu-Roar MAB and MAH.....09

macu4 Lumo System10

macu4 Lynk System10

macu4 Explorer System11

Mitchell Ponseti®

Clubfoot Journey.....12

Mitchell Ponseti® AFO 13 - 17

 MP Baby AFO13

 TS Toddler AFO14

 Plantar Flexion Stop AFO.....15

 Plantar Flexion Stop TS AFO 16

 AFO Stock Colors..... 17

 AFO Custom Colors..... 17

 Custom Color Swatch..... 17

2026 Color Drops 18

Mitchell Ponseti® Bars 19-22

Move Bar.....19

Plus Abduction Bar20

Abduction Bar.....21

Bar Hardware Kit.....21

Geared Quick Clips.....22

Mitchell Ponseti® Accessories.....23

 MP AFO Socks23

 Pressure Saddles.....23

 Sizing Liner Set.....23

C-Pro Direct™

C-Pro Direct™24

UNFO

UNFO25

DF2®

DF2® 26 - 27

Boston O&P

OPSB™ Sensor28

Boston Brace®.....29 - 57

 Boston Brace 3D®29

 Night Shift.....30

 Baby.....31

 RC.....32

 Soft Spinal Postural.....33

 Soft Spinal Corrective.....34

 Original35

 Kyphosis36

 Body Jacket.....37

 Overlap Brace.....38

Boston Lower Limb..... 39 - 42

 Boston AFO® 39 - 40

 Ranger39

Tall Mover40

Boston SMO 41-42

 Boston Control SMO41

 Boston Boomerang.....41

Boston Cranial.....43

 Boston Band®43

Clinics56

Why Partner With Us?.....57

Family Resource Hub.....58

OPSB.com Website59

Rhino®

Rhino® Cruiser44

Rhino® Kicker Pavlik Harness45

Rhino® Knee Immobilizer46

Rhino® Neoprene Support46

Rhino® Cast Boot47

Rhino® Stomper47

Rhino® Elbow Splint.....48

Rhino® Arm Sling.....48

Rhino® Wrist/Forearm Brace.....49

Rhino® Clavicle Strap50

Rhino® Cervical Collar.....50

Move-D

Move-D Brace.....51

OPSB™ Resources

Ponseti Method Educational Training.....52

Mitchell Ponseti® Educational Events.....52

Mitchell Ponseti® Training Kit.....53

 Tenotomy Practice Model.....54

 Vertical Talus Model..... 54

 Ponseti® Clubfoot Model55

 Tenotomy Model.....55

 Five Stage Cast Model.....55

 Rubber Legs & Stands.....55



WHO IS OP SPECIALTY BRACING™?



2021



Mitchell
Ponseti
2022



2024



SPECIALTY
BRACING

Expert Care for KIDS, for Every Journey

2023

OUR STORY

For over 20 years, OrthoPediatics® has been focusing on innovating the orthopedic space exclusively in the care of KIDS. In 2021, we collaborated with Boston Orthotics & Prosthetics® to create the DF2® as an alternative to spica casting. This led to a new opportunity to consider how we could help KIDS outside of the operating room environment. Since then we have been building a house of brands and innovating to help families throughout their entire orthotic, prosthetic, and mobility journey.

Check out the timeline below to meet some of our OPSB™ family!



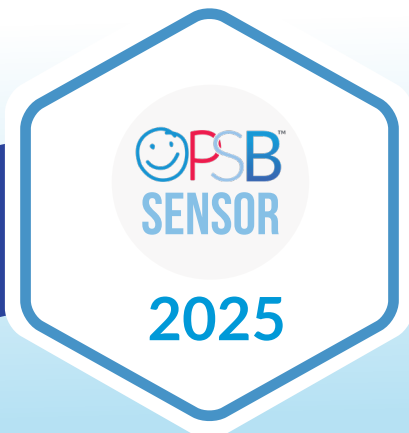

boston
ORTHOTICS & PROSTHETICS
2024



c-prodirect
Proud to support the Ponseti method
2025



PediHip™
2025



OPSB™
SENSOR
2025



NEW IN 2026

Halo Gravity Traction System: TRAXIO

In partnership with Synetik, we are excited to announce the limited launch of the new Halo Gravity Traction System, TRAXIO!

The Size 2 (Medium) Weight System is currently available for purchase in limited quantities. Additional sizes of the Weight System, along with the full Spring System, will be available later this year.



SCAN THE QR CODE TO
LEARN MORE!



Products distributed by OPSB should be used under the guidance of a qualified healthcare professional. Individual results may vary. Please consult your healthcare provider for medical advice including product warnings, precautions, side effects and contraindications regarding Synetik Group Inc.'s TRAXIO Complete - Weight System. OrthoPediatrics Corp. and its affiliates, including OPSB, are authorized distributors for Synetik Group Inc.'s products.

Crafted with Care by
Synetik

GiggleFIT Therapeutic Play Gym



The GiggleFIT TPG is a research-based exercise system for children with medical complexity, designed to overcome movement poverty and community rehabilitation access barriers. The system consists of two frame types: NEO (Neonatal TPG) and H2H (Hospital to Home) and provide adaptive play opportunities in hospital, home, school, and community settings.

The **Neonatal (NEO)** frame is designed for babies 0 - 12 months with a small footprint that fits in the NICU and infant hospital beds. This frame adds value to the hospital and families through increasing intervention value, helping patients meet discharge competencies, and training caregivers.

The **Hospital to Home (H2H)** frame is designed for children from 6 months - 12 years. Inspired by the NEO frame, this kit can help caregivers support adaptive play and mobility training at home while allowing patients to continue building on the progress started in the hospital. H2H can help equip families to continue therapy at home during their wait for EI therapy and beyond.

Benefits

- Easy to assemble and transport
- Apply therapy exercise at home
- Range of cuff and strap sizes to grow with the child
- Accessory bundle included with H2H and NEO kits
- Optional Scoli Kit to prevent rolling



The GiggleFIT Therapeutic Play Gym from Boost Therapeutic Innovations is available from OPSB™ through an exclusive distribution agreement focused on US children's hospitals and associated clinics.



PEDIHIP™
Hippo Rigid Brace

Our newest in-house innovation is designed to bring smarter, more effective solutions to pediatric hip care.

The PediHip™ Rigid Brace (Hippo) is intended for treatment of Developmental Dysplasia of the Hip (DDH) and post-operative stabilization in pediatric patients ages three years and younger. The brace is used to flex and abduct the child's legs to set the hips in the desired position for maintaining or obtaining hip reduction.

Benefits

- Adjustable posterior brace component to ensure hip hinges stay in the right place
- Lightweight hip hinges with significant adjustability (180°)
- Comfortable, hygienic padding
- Allows for easier diapering

PediHip™ Hippo Rigid brace is in limited launch and is not widely available yet.



PEDIHIP™

Modu-Roar Modular Abduction Brace & Modu-Roar Modular Abduction Harness

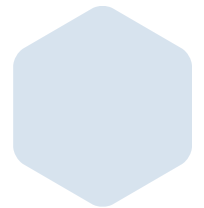
The PediHip™ Modular Abduction System is intended for treatment of Developmental Dysplasia of the Hip (DDH) and post-operative stabilization in pediatric patients ages three years and younger, as instructed by a healthcare provider.

The PediHip™ Modular Abduction System is offered in a unique color for each size. Braces are bilateral in nature, come fully assembled, and offered in two different styles, Modular Abduction Bar (MAB) and Modular Abduction Harness (MAH). Each brace has the opportunity to interchange brace specific soft goods.

Benefits

- All components are adjustable
- Lock mechanism inspired by the Ponseti® Bar with moldable cuffs that lock into place
- Comfortable, hygienic padding
- Two abduction styles
 - Abduction bar + check strap for controlled hip abduction
 - Harness + Abduction Bar to pull into full flexion
- Allows for easier diapering
- Array of sizes: XS - XXL

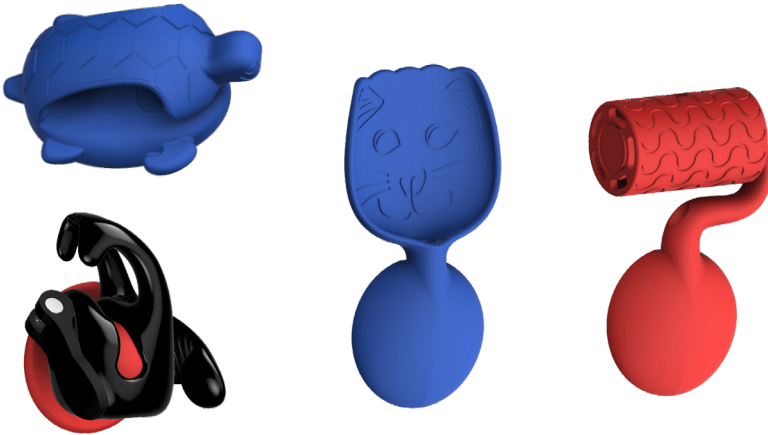
PediHip™ Modu-Roar and Modu-Roar Harness are in limited launch and not widely available yet.





MACU4 Lumo System

Designed for our smallest patients with upper extremity **prosthetic and orthotic needs**. Using lightweight, 3D printed materials, this system accommodates young play and development with the **Clamp Module**, **Hold Module**, **Shovel Module**, and **Roll Module**. The Lumo modules are also compatible with any other prosthetic base, providing access to more kids!



MACU4 Lynk System



Designed for **orthotic patients** and patients with hand weakness, brachial plexus injury, cerebral palsy, arthrogyrosis, limb difference, and more. The cuff comes in velcro and elastic strap cover style. Modules include the **Clic Lock**, **Hold STD**, **Clic STD**, **Hold Lock**, **Hook**, and **Push**.

Modules help with functional activities like crutch use, utensil use, and bike/scooter/wheelchair attachments.





MACU4 Explorer System

Designed for upper limb *prosthetic patients* to support sports, play, and everyday activities. This lightweight, 3D printed system includes the **Ball, Bike, Hold, Pinch, Swim, and Twin** modules.

The Explorer socket is crafted from a scan or measurements of the patient, and uses the Ring EXP attachment to accommodate wrist length. Other prosthetic sockets may also be used with the Explorer System after applying lamination and the Standard (STD) Ring.



MAGU4 ORTHOTIC SOLUTIONS



MAGU4 PROSTHETIC SOLUTIONS



The Clubfoot Journey

We are committed to partnering with parents and families to help them feel supported along every step of the **Clubfoot Journey**.

Diagnosis of Clubfoot

(At or before birth)

Family Resource Hub is available for all clubfoot questions, info, and how to's.

Treatment Phase

(6 to 8 weeks)

The doctor manipulates and casts the child's foot (feet) using the Ponseti Method.

Tenotomy Procedure

At the final casting, the doctor releases the Achilles tendon in a majority of cases.

Transition to Bracing

The child is fitted with the ankle foot orthosis (AFO) and bar that are to be worn 23 hrs a day for 90 days (3 months).

Baby AFO is applicable at this stage.

Transition to Only Night and Nap

The AFO and bar are worn when the child sleeps for the duration of treatment, as prescribed, to ensure the correction holds.

Sleep Maintenance

MP TS Toddler AFO is now applicable for weight bearing and to help with balance when the child is pulling up to stand in crib.

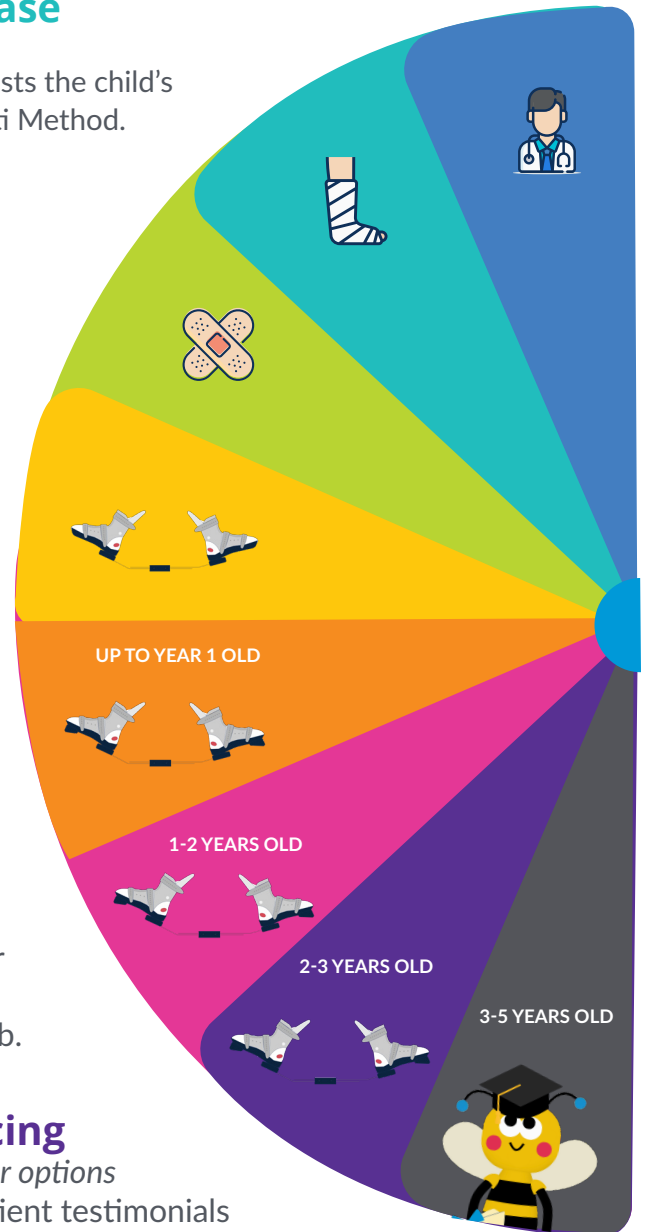
Ongoing Bracing

Addition of custom color options

For continued support and patient testimonials visit the Family Resource Hub below.

Final Year of Bracing

Get your graduation certificate on our Family Resource Hub!



MITCHELL PONSETI® MP Baby AFO

The Mitchell Ponseti® Standard ankle foot orthosis (AFO), now known as the MP Baby AFO, is part of the Ponseti Method, the gold standard in clubfoot treatment worldwide.

Available in sizes preemie through 12.

Benefits

- Based on the Ponseti Method
- Commonly used for ages 0-12 months
- Heel window for increased heel visibility
- Easy lock-and-release attachment technology with Ponseti® Abduction Bar and Mitchell Ponseti® Move Bar (sold separately)
- Gold standard in clubfoot treatment worldwide
- All sizes, Preemie - 12, available in the color of grey
- Sizes 0000-6 available in base colors of pink, blue, and grey
- Custom colors available in select sizes at an additional cost



**shown here custom color #34 Blueberry*



MITCHELL PONSETI® TS Toddler AFO

The Mitchell Ponseti® Toe Stilt ankle foot orthosis (AFO), now known as the MP TS Toddler AFO, is part of the Ponseti Method, the gold standard in clubfoot treatment worldwide.

The patient must be able to stand independently for the TS Toddler AFO to have any effect when used without the Ponseti® Abduction bar. The built in wedge attached to the front of the AFO aids in safety in standing by helping to maintain balance when using a abduction bar

Available in sizes 2 through 11.

Benefits

- Permanent 10° wedge attached to front of AFO
- Applicable for toddlers ages 1+
- Aids in balance for standing
- Heel window for increased heel visibility
- Easy lock-and-release attachment technology with Ponseti® Abduction Bar and Mitchell Ponseti® Move Bar (sold separately)



MITCHELL PONSETI® Plantar Flexion Stop AFO

The Mitchell Ponseti® Plantar Flexion Stop (PFS) ankle foot orthosis (AFO) is part of the Ponseti Method, the gold standard in clubfoot treatment worldwide.

The articulated Plantar Flexion Stop (PFS) limits plantar flexion with rigid dorsiflexion to maintain the prescribed position of the foot. Recommended for the complex clubfoot. This device is also beneficial for children with hyperflexible feet as it ensures the foot is always held in a neutral or dorsiflexed position.

Available in sizes 00 through 12

Benefits

- All comfort, fit and ease-of-use features of the Mitchell Ponseti® Baby AFO System
- Developed for children with complex clubfoot
- Rigid dorsiflexion ensures consistent positioning
- Rear plantar flexion stop attachment limits motion



**shown here custom color #61 Tangerine*



MITCHELL PONSETI®

Plantar Flexion Stop / Toe Stilt AFO

The Plantar Flexion Stop/Toe Stilt (PFS/TS) is a dual purpose ankle foot orthosis (AFO) that supports the Ponseti Method, the gold standard in clubfoot treatment worldwide.

The AFO is worn attached to the Ponseti® Abduction Bar in accordance with the standard Ponseti® bracing protocol. The PFS is designed to structurally limit any plantar flexion and works particularly well in clubfoot cases involving hypermobility or corrected atypical/complex deformities. The PFS is mounted on the standard AFO during the assembly process but is designed to be custom fit as necessary by orthotists to meet the dynamic needs of each clubfoot child.

The TS encourages lower calf, achilles tendon and plantar fascia stretch in the toddler who can stand independently without the Ponseti® Abduction Bar. The TS holds both feet at 10° dorsiflexion when standing.

Available in sizes 2 through 11

Benefits

- All comfort, fit and ease-of-use features of the Mitchell Ponseti® Baby AFO System
- Developed for children with complex clubfoot
- Limits plantar flexion
- Pairs well with a dynamic abduction bar



AFO Stock Colors

All sizes and styles of the Mitchell Ponseti® AFOs are available in base color grey.



MITCHELL PONSETI® AFO Custom Colors



Custom colors are available for the MP Baby, TS Toddler, and PFS style pairs and singles.

- MP Baby styles are available sizes 0000 through 12
- TS Toddler styles are available sizes 2 through 11
- AFO PFS styles are available sizes 00 through 12

Custom Color Swatch Set

Custom color swatch set includes eleven 2" oval samples to conveniently illustrate actual color.



Coming Soon: 2026 Color Drops!

Keep your eye out for these exclusive MP Standard AFO color combinations,
only available during select times of the year:



Release 1
Buzzton Boot



Release 2
Summer Slushie



Release 3
Snow Shoe

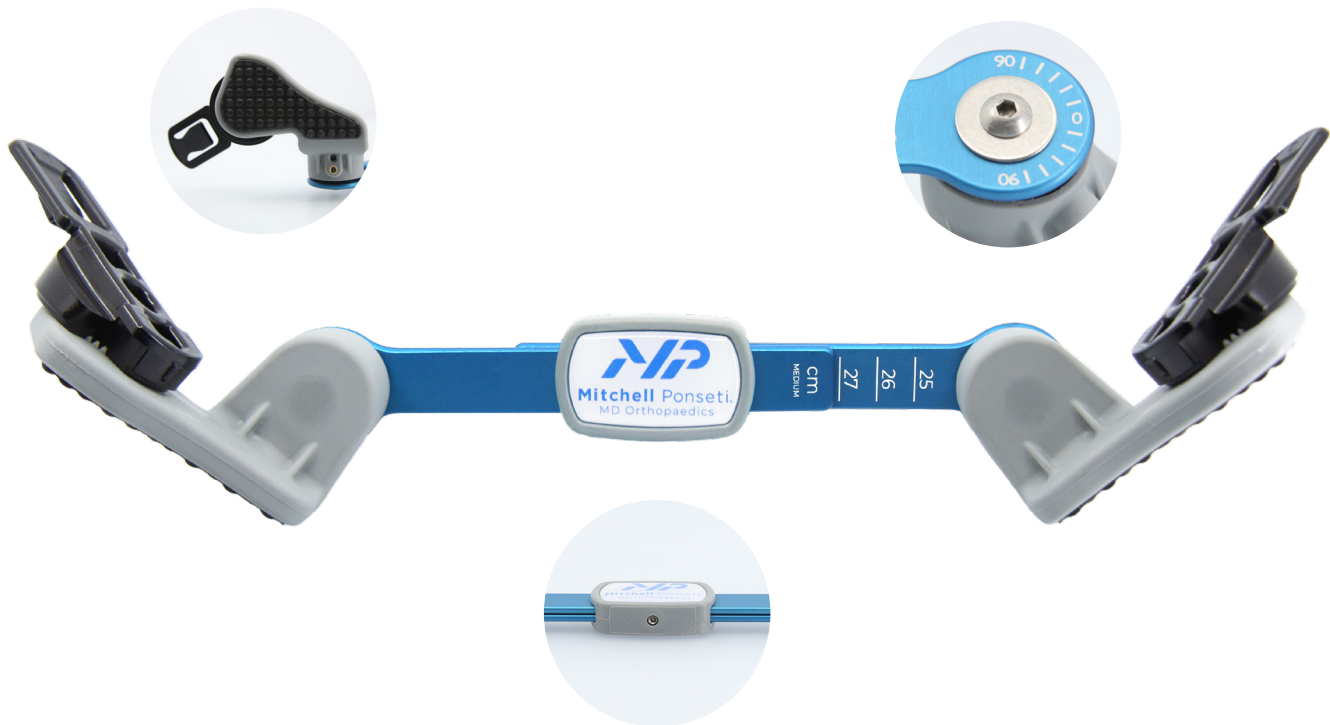
Scan the QR Code here to view and
pre-order the latest Color Drop!



MITCHELL PONSETI® Move Bar

Introducing the Mitchell Ponseti® Move Bar, the innovative dynamic abduction bar solution for supporting the treatment of clubfoot. The advanced spring technology allows the baby to move, kick and crawl while maintaining an active dorsiflexion stretch and building calf muscle and strength.

- Patented lock-and-release mechanism for improved access and ease of use
- Advanced spring technology
- Lightweight design
- Engraved bar measurements and angle indicators



Available in

- Short 19.2-22.5 cm
- Medium 22.4-28 cm
- Long 27-37 cm

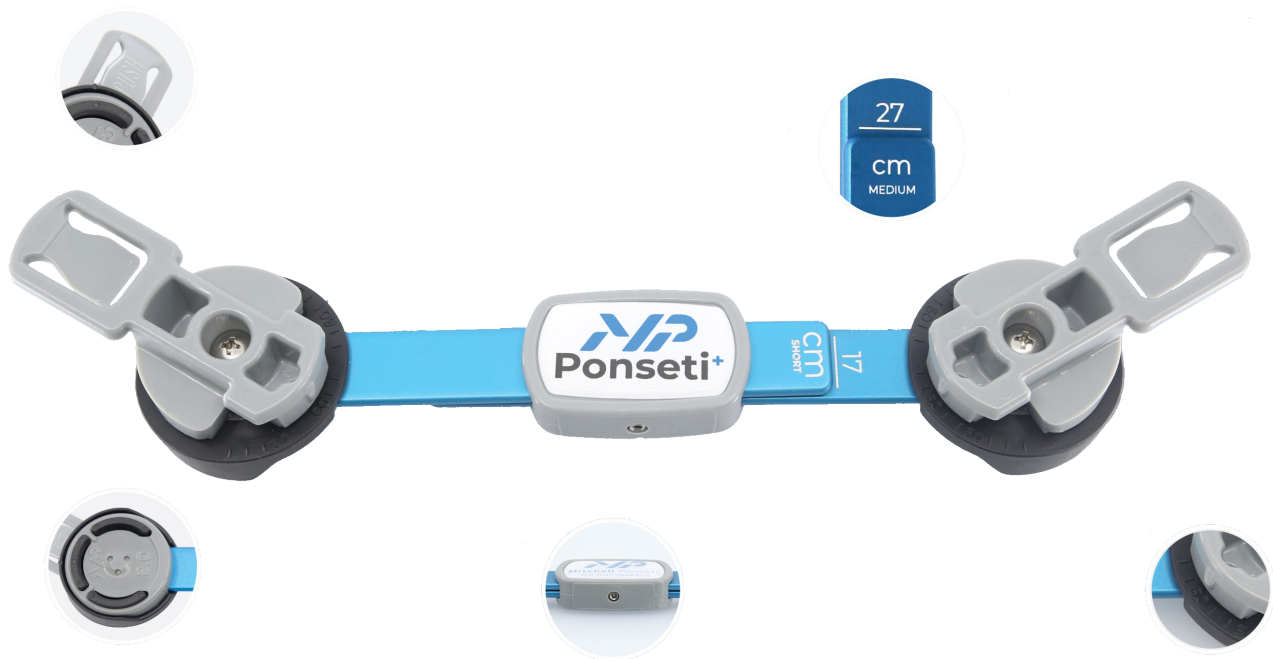
Benefits

- Quick Clip connectors for easy on/off of the AFO
- Engraved bar width indicators
- Advanced spring technology
- Padded bumpers
- Single bar adjustment screw



MITCHELL PONSETI® Plus Abduction Bar

Ponseti® Plus Abduction Bar by Mitchell Ponseti® is an upgraded static abduction bar, from the Ponseti® Bar, boasts a range of enhanced features for improved use, fit, and function.



Available in

- 12cm fixed
- 13cm fixed
- 14cm fixed
- Short adjustable bar (15.25cm - 21cm)
- Medium adjustable bar (19.5cm - 30cm)
- Long adjustable bar (23.5cm - 37.4cm)

Benefits:

- Laser etched bar size measurements
- Upgraded bar adjustment lock technology with one set screw
- Easy to use Lock and release clip technology
- Engraved angle indicators
- Non-marking rubber bumpers
- Light weight design

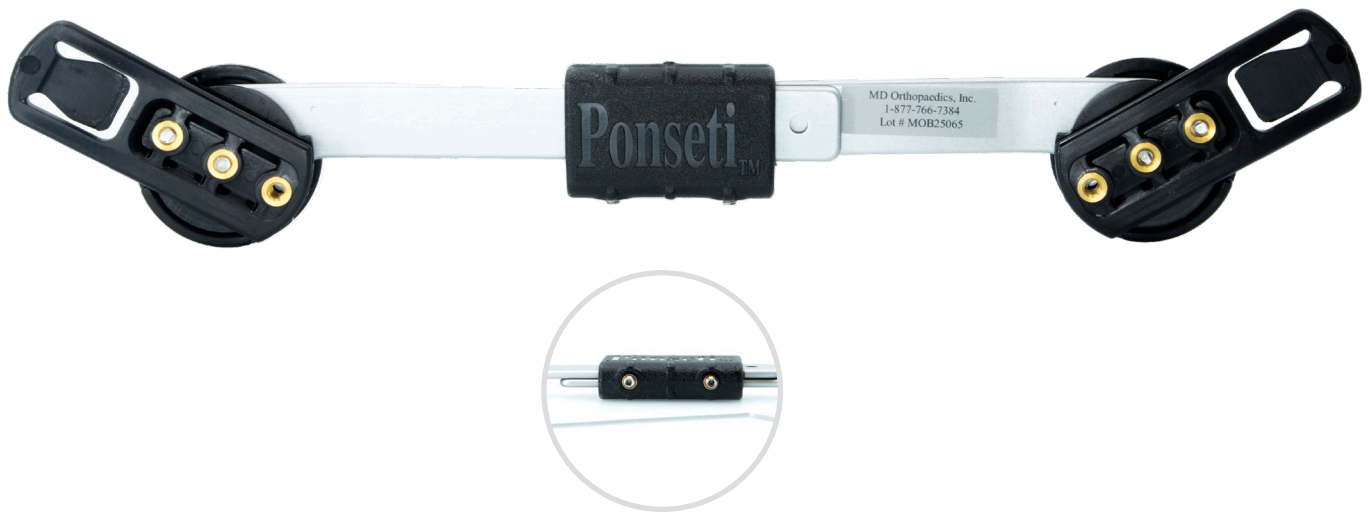


MITCHELL PONSETI® Abduction Bar

Abduction bar for managing the prescribed width and orientation of the corrected clubfoot. This adjustable bar easily clips on and off the AFO footwear by means of our patented "Quick Clip" system.

Benefits

- Adjustable bar width
- Pre-packaged at 60° abduction and 10° dorsiflexion
- Available in sizes extra short, short, and long



MITCHELL PONSETI® Bar Hardware Kit

This kit is designed to replace the hardware on your Ponseti® Bar, ensuring that it remains secure and functional during treatment.



MITCHELL PONSETI® Geared Quick Clips

The Mitchell Ponseti® Geared Quick Clip System is designed to give providers the ability to tailor fit the amount of fixed dorsiflexion the brace delivers for their patients. Each clip has teeth that mesh with the bar and can be adjusted in 10 degree increments of abduction.

Available in:

- 0, 10, or 15 degrees of dorsiflexion

Special Features

- Used only for the Move, and Plus Bar



Mitchell Ponseti® AFO Socks



The AFO socks were specifically designed to be worn with AFOs. Made with skin-safe silicone grips to help keep the foot in correct position and a red colored heel to make it easier to determine heel placement.

Special Features:

- Made with high quality bamboo fabric
- Soft and breathable
- Moisture wicking
- Hypoallergenic benefits
- Red heel to best determine heel placement

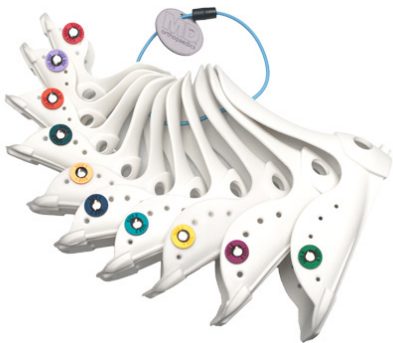
Pressure Saddles

The soft, comfortable pressure saddle attaches to the middle strap of the Mitchell Ponseti® AFO to provide additional relief of pressure areas.

Sold individually

Special Features:

- Available in sizes small and large
- Small: 0000-1
- Large: 2-12
- Sold individually



Sizing Liner Set

Order patient's correct size using the convenient Sizing Liner Set, instead of taking measurements.* Place patient's foot in liners to choose AFO size needed. Liners for size 0000 through 6 included. Additional circumferences may be required for extra wide or extra narrow feet and legs.

*Sizing Liner Set for clinic/office use only.



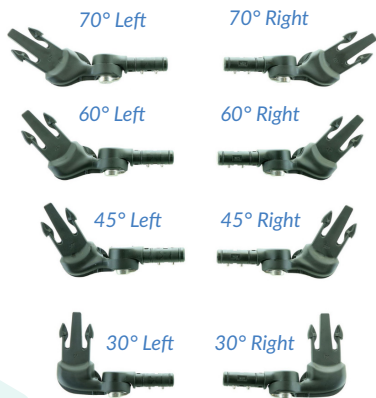
C-Pro Direct™

C-Pro Direct™ is a leading UK-based medical device company specializing in innovative bracing solutions for children with clubfoot and other pediatric orthopaedic conditions that is now part of the OP Specialty Bracing.

Founded by parents with firsthand experience navigating clubfoot treatment, the company has grown into a trusted partner for clinicians and families around the world. C-Pro Direct™ is known for its commitment to clinical excellence, family-centered care, and high-quality, regulatory-compliant devices. Their products support the Ponseti Method—the global gold standard for clubfoot treatment—and are used in over 80 countries.

Benefits

- Lightweight device with soft neoprene straps
- Clip mechanism for easy donning and doffing
- Modular system
- Optional Ambulatory ADM™ for night and day wear



ADM™ AFO



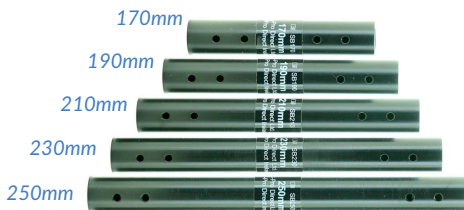
Ambulatory ADM™ Day



Spring Assist Articulating Dobbs Bar



Unilateral ADM™ Night



Dobbs Adm Bar Kit For Use With Dobbs Adm Clips

UNFO

Specifically engineered for newborns with metatarsus adductus, the UNFO brace is the first orthopedic device worn below the ankle. Its innovative design supports natural foot alignment while minimizing the physical and emotional stress often associated with full-leg casting.

Available in two sizes and two colors for both left and right feet, the UNFO brace is recommended for infants up to approximately 10 months of age. It's a trusted choice for physicians seeking a modern, credible solution and for parents who want safe, effective care that fits seamlessly into daily life.

Benefits

- Average treatment completed in less than 12-16 weeks
- Simplified treatment process for infants and parents
- Soft thermoplastic for comfort
- Proven alternative to casting
- Easy to don/doff



Learn More:

<https://pubmed.ncbi.nlm.nih.gov/33835248/>





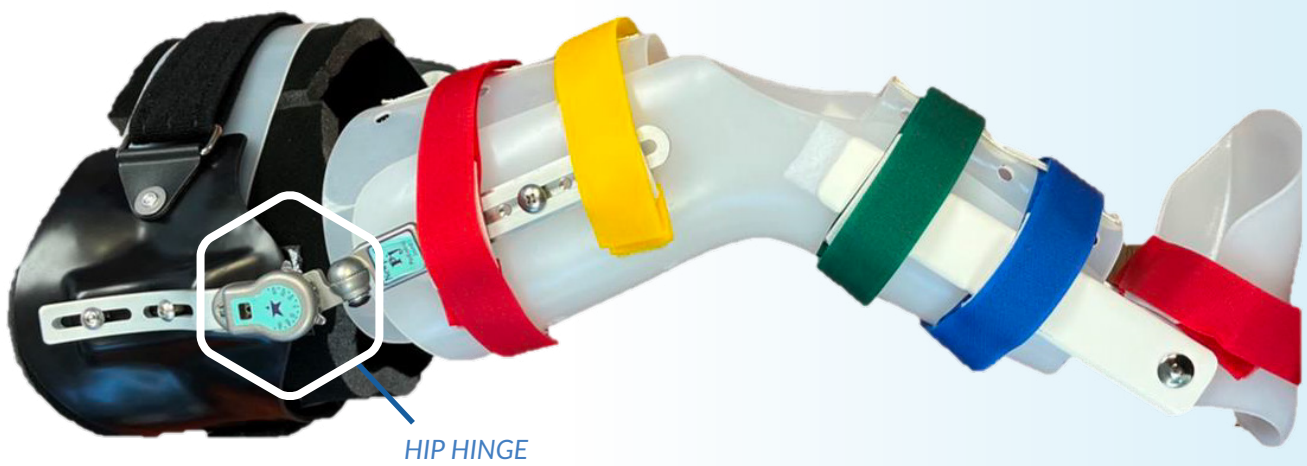
OR/ED SOLUTIONS

DF2®

Introducing the DF2 - a revolutionary solution redefining femur fracture treatment and post operative stabilization in pediatric patients by providing immobilization of the femur, knee, and hip as an alternative to spica casting.

Designed to provide superior comfort and convenience, this remarkable device allows for dressing changes, comfortable positional adjustments (like sitting), and effortless toiletry needs. Its unique feature of adjustable compression ensures that it stays securely in place throughout the entire treatment period, eliminating worries of loosening, a common issue with traditional casts.

To optimize healing, it is crucial to maintain a snug fit over the femur, and our DF2® does just that. Think of it as your child's steadfast companion during the healing journey. While it's typically worn full-time for approximately six weeks, your child's doctor will tailor the duration to their specific healing progress, ensuring the best possible outcome. Choose DF2® for unparalleled comfort and effective femur fracture and post-operative bracing treatment.





Alternative Method to Spica Casting



Easy cleaning, changing, and dressing



Fracture Fixation that still allows for surgeon adjustment



No need for Spica car seat in most cases



DF2® Features

- Includes fracture sock to prevent skin irritation/degradation
- Adjustable hook and loop strap to anchor brace in correct position
- Maintains fracture fixation and allows for surgeon adjustment of flexion/extension as well as adduction/abduction as needed
- Pre-configured in left or right options

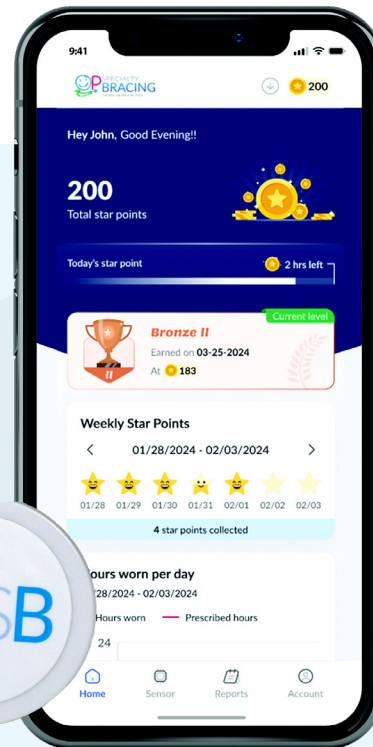
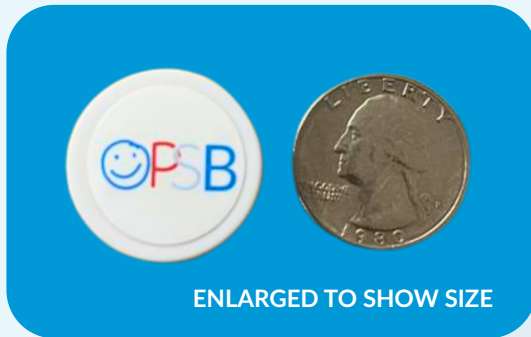
The DF2® is intended for femur fractures and post-operative stabilization in pediatric population patients from approximately 6 months to 5 years of age instead of spica cast by providing immobilization of the femur, knee, and hip.

Sizing Chart

SIZE	Prox. Thigh Circumference Range (cm)	KC to Medial Height (cm)	KC to Lateral Height (cm)	KC to End of DF2® (cm)	Largest Calf Circumference Range (cm)
XS	18.5 - 30.5	9.8	12.6	11.2	15.4 - 21.7
S	23.5 - 32	11.5	15	12.5	18.5 - 23
M	25.5 - 34.5	13.5	17.5	14	19.5 - 24
L	28.0 - 37	15.5	20	15.5	20.5 - 25
XL	29.5 - 40	18	23.2	17.2	22 - 26
XXL	31.5 - 42	19.8	25.2	18.9	22.5 - 27



SENSOR, APP, AND CLOUD OPSB™ Sensor



The OPSB™ Sensor System is a wireless device designed to monitor patient brace wear time with precision and ease. The sensor is securely mounted within the brace, recording temperature every 15 minutes to accurately track wear time. When patients know they are being monitored, compliance improves, which leads to better patient results. The success of bracing depends on adherence.

The app offers a complete wear-time history that can be downloaded in both PDF and CSV formats for easy reporting. Patients are encouraged to meet wear-time goals with an interactive interface that provides digital rewards for milestones achieved. Physicians, therapists and hospitals are able to use remote monitoring CPT codes when accessing, analyzing, and communicating with the family about their wear time schedule.

Features

- Minimum 12 month battery life
- Monitor a patient's wear pattern
- Data automatically uploaded to the cloud
- Low-profile and small diameter (25 mm)
- Designed to be worn in all settings i.e. school, work, and sports
- OPSB™ Sensor app shows progress updates

The OPSB™ Sensor System is intended to collect, transmit and store temperature data to monitor a patient's wear time and pattern. Please consult with your HCP for professional advice, including product warnings, precautions, side effects and contraindications. This material and use of the OPSB Sensor System is for informational purposes only and does not constitute medical advice. Always follow your HCP's recommendations and instructions

Scan this QR code to learn more!



Boston Brace 3D®



The Boston Brace 3D® is the next innovation in the non-operative treatment of idiopathic scoliosis. Our clinical experts have combined knowledge of the three-dimensional scoliosis curvature with the latest in shape capture and CAD/CAM technologies. This enhanced brace design comes from the unique and selective shift/push/relief combination of corrective forces that are fabricated into each brace. Initial in-brace X-rays (X-rays with the brace on) show that most patients achieve greater than 60% correction of the primary curve when wearing the Boston Brace 3D®. The combination of in-brace curve reduction and adherence to the prescribed wear schedule has been shown in multiple studies to reduce the risk of curve progression and in many cases actually improve the curve.

Benefits

- Asymmetrical brace
- Outstanding outcomes
- Custom made for each patient
- Requires a scan of patient's body
- Can be worn day and night
- Works with all forms of physical therapy.
- Covered by most insurances

Options

- OPSB™ Sensor and App
- Rear or front opening
- Transfer choice

This brace is indicated for patients, four years old to skeletal maturity, diagnosed with Idiopathic scoliosis or congenital scoliosis, and Spinal curves of $\leq 45^\circ$.



Boston Night Shift



The Boston Brace Night Shift is a nocturnal brace used in the non-operative treatment of idiopathic scoliosis. A nighttime brace takes advantage of the recumbent position. Studies suggest that most growth occurs at night. For some curves, nighttime wear has shown to be as effective as full-time. The Boston Brace Night Shift has built-in correction in all three planes of motion. Instead of working against gravity, the brace utilizes it and the internal pushes do not have to work as hard. It applies direct forces with opposing relief areas to straighten curves.

Benefits

- Asymmetrical brace designed for recumbent position
- Custom made for each patient
- Made from measurements, scan or cast of patient
- Only worn at night and around the house
- Opens in front for ease of donning and comfortable sleeping
- Covered by most insurances

Options

- OPSB™ Sensor and App
- Transfer choice

This brace is indicated for patients diagnosed with idiopathic scoliosis and spinal curves of 20-45°, and who are unwilling to wear the brace 24/7. It is ideal for complex spinal curves with apices above T7-8.



Boston Baby



The Boston Baby orthosis is specifically designed to utilize many of the Mehta and Boston Brace 3D[®] concepts. It may be used in combination with Mehta casting or it can be used as a primary means of treatment. Our clinical experts have combined knowledge of the three-dimensional scoliosis curvature with the latest in shape capture and CAD/CAM technologies. This enhanced brace design comes from the unique and selective shift/push/relief combination of corrective forces that are fabricated into each brace.

Benefits

- Asymmetrical brace
- Custom made for each patient
- Open stomach for easier breathing mechanics
- Outstanding outcomes
- Made from scan or cast of patient
- Can be worn day and night
- Covered by most insurances

Options

- Open stomach (symmetrical asymmetrical abdominal opening)
- Closed stomach
- Transfer choice

This brace is indicated for patients 0-3 years old, with spinal curves of 20-50°, diagnosed with infantile idiopathic or congenital scoliosis. Ideal for complex spinal curves.



Boston RC



The Boston Brace RC is an asymmetrical, anterior opening, custom fabricated scoliosis orthosis. This is a custom made brace from a scan of the patient and incorporates the principles of the Rigo-Cheneau brace.

Benefits

- Asymmetrical brace
- Custom made for each patient
- Opens in front only
- Made from scan or cast of patient
- Can be worn day and night
- Works with all forms of scoliosis physical therapy, including the Schroth method

Options

- OPSB™ Sensor and App
- Transfer choice

This brace is indicated for patients 4 years old to skeletal maturity, with spinal curves of 20-50°, diagnosed with Idiopathic scoliosis. Ideal for complex spinal curves.



Boston Soft Spinal-Postural



The Boston Soft Spinal-Postural orthosis is a spinal brace used to support low-tone patients and provide improved sagittal balance while providing support in the frontal and transverse planes. Its asymmetric trim lines allow the patient to utilize their corrective reflex to improve sitting posture and head control. It can be made from a cast, scan or measurement of the patient.

Benefits

- Sagittal plane control
- Improved sitting/standing posture
- Head/neck control
- Abdominal window for easy breathing
- Soft and flexible
- Lightweight
- Easy to clean

Options

- Removable stays
- Permanent framework
- Colored foam
- G-tube or Baclofen Pump relief
- Rear or front opening
- Bivalve opening

This brace is indicated for patients diagnosed with neuromuscular scoliosis, pelvic obliquity, and/or low-tone.



Boston Soft Spinal-Corrective



The Boston Soft Spinal-Corrective orthosis is a spinal brace used to support low-tone patients, provide improved sagittal balance and correct a spinal curve. It can be made from a cast, scan or measurement of the patient. It incorporates an asymmetric trim line to allow for relief areas opposite the built-in corrective forces. This permits the patient to utilize their corrective reflex to improve sitting posture and head control.

Benefits

- Sagittal Plane Control
- Improved sitting/standing posture
- Head/neck control
- Abdominal window for easy breathing
- Soft and flexible
- Lightweight
- Easy to clean

Options

- Removable stays
- Permanent framework
- Colored foam
- G-tube or Baclofen Pump relief
- Rear or front opening
- Bivalve opening

This brace is indicated for patients diagnosed with neuromuscular scoliosis, pelvic obliquity, and/or low-tone.



Boston Original



The Boston Brace Original is the most studied and utilized scoliosis brace in the world. Clinically proven to control curve progression, the available models include Lumbar, Thoracic, or Thoraco/Lumbar. All Boston Braces may be lined, partially lined, or unlined. The custom made, patient matched Boston Brace® is made from a scan, cast, or measurements for each individual patient. Each is proudly stamped ensuring you received a true Boston Brace®.

Benefits

- Symmetrical brace with additive asymmetry
- Custom made for each patient
- Made from scan, measurements, or cast of patient
- Opens in front or back based on preference
- Works with all forms of scoliosis physical therapy, including the Schroth method
- Covered by most insurances

Options

- OPSB™ Sensor and App
- Transfer choice
- Rear or front opening
- Lined, partially lined, or unlined

This brace is indicated for patients 4 years old to skeletal maturity, with spinal curves of 20-50°, diagnosed with idiopathic scoliosis. Ideal for complex spinal curves.



Boston Kyphosis



Kyphosis is defined as a deformity of the upper spine causing an exaggerated (more than 50°) outward curve. Technically this condition is known as hyper kyphosis, though it is commonly referred to as simply kyphosis. The Boston Kyphosis brace corrects this condition.

Benefits

- Custom made for each patient
 - Sagittal Plane Correction
- Opens in front or back
- Made from scan or cast of patient
- Can be worn day and night
- Covered by most insurances

Options

- OPSB™ Sensor and App
- Transfer choice
- Rear or front opening
- Lined, partially lined or unlined

This brace is indicated for patients of skeletal immaturity diagnosed with Scheurman Kyphosis, Postural Kyphosis, or Atypical Kyphosis curves greater than 40°.



Boston Body Jacket



The Boston Brace Jacket is designed to immobilize the thoracic and lumbar spine after trauma or surgery. It is the ideal solution for post-operative patients and trauma situations, and can help shorten hospital stays.

Benefits

- Sagittal plane control
- Improved sitting/standing posture
- Head/neck control
- Abdominal window for easy breathing
- Soft and flexible
- Lightweight
- Easy to clean

Options

- Rear/front/lateral/bivalve opening
- Sternal bar and pad

This body jacket is indicated for patients diagnosed with any of the following: neuromuscular scoliosis, Pelvic obliquity, and low-tone.



Boston Overlap Brace (BOB)



The Boston Overlap Brace (BOB) was the first brace to use the anterior overlap design, which allows the patient to adjust the brace for comfort. The antilordotic design addresses the biomechanical need to treat spondylolysis, and the posterior paraspinal bars allow for lordotic adjustment.

Benefits

- Velcro closure
- Low-priced
- Made from measurements, or pre-fabricated custom fit
- Anterior opening with a 3-4" overlap

Options

- Plastic and lining options
- Posterior corrugation

This brace is indicated for patients diagnosed with any of the following: spondylolysis, spondylolisthesis, severe back pain, lumbar fusion and fracture.



BOSTON AFO® Ranger



The Ranger Ankle Foot Orthosis (AFO) design is intended to control foot/ankle motion and address all associated alignment compensations. The brace consists of a solid ankle outer boot in combination with a more flexible inner boot. The increased height of this design allows for better control of the knee position and optimizes stability. The Ranger has multiple fabrication options, allowing it to be customized to your child's specific needs.

Benefits

- Foot and ankle alignment
- Stability and control
- Heel-to-toe gait pattern
- Toe clearance
- Knee position
- Neuro-motor patterning
- Range restoration
- Strengthening
- Pain reduction
- Increased endurance

Options

- Strap color
- Transfer pattern
- Flexible or rigid inner boot
- Internal or external heel
- Reinforced toeplate

This AFO is indicated for patients diagnosed with any of the following: moderate to severe pronation/supination, ankle/knee instability, out-toeing or in-toeing, knee hypertension or crouch, contracture, high tone, and/or toe walking.

ONLY AVAILABLE AT OP SPECIALTY BRACING CLINICS



BOSTON AFO® Tall-Mover



The Tall-Mover Ankle Foot Orthosis (AFO) proprietary design was developed to meet the needs of ambulatory patients. The brace consists of a flexible one-piece inner boot and a jointed outer boot. These materials work together to allow the Tall-Mover to both resist and assist motion at different phases of gait. The increased height of this design allows for better control of the knee position and optimizes stability. The Tall-Mover combines the benefits of both a solid and articulated AFO into one brace.

Benefits

- Foot and ankle alignment
- Stability and control
- Heel-to-toe gait pattern
- Toe clearance
- Prevents foot drop/slap
- Knee position
- Pain reduction

Options

- Strap color
- Transfer pattern
- Anterior shell

This AFO is indicated for patients diagnosed with any of the following: ankle/knee instability, out-toeing or in-toeing, and/or knee hypertension.

ONLY AVAILABLE AT OP SPECIALTY BRACING CLINICS





BOSTON SMO

Boston Control SMO

The Control Supramalleolar Orthosis (SMO) envelops the foot and ankle using thin plastic, providing moderate control of foot and ankle. It is secured with a single strap to adjust compression. The Control SMO is a low-profile option for kids with mild instability in the foot/ankle and who need a little support to lead their most active life. The pediatric foot is continuously developing and becoming more structural with growth. Protecting the ligaments is paramount in preventing foot deformity and pain later in life.

Benefits

- Foot and ankle alignment
- Stability and control
- Pain reduction

Options

- Strap color
- Transfer pattern
- Flexible inner boot

This SMO is indicated for patients diagnosed with any of the following: ankle/knee instability, out-toeing or in-toeing, and/or knee hypertension.

ONLY AVAILABLE AT OP SPECIALTY BRACING CLINICS



BOSTON AFO

Boston Boomerang



The Boomerang Ankle Foot Orthosis (AFO) was designed as a low-profile, early intervention solution for toe walking and is also effective for preventing foot slap and mild hyperextension at the knee. The brace envelops the foot and ankle with a flexible inner boot and more rigid outer boot. The posterior extension acts as a sensory “trigger” to encourage heel strike. The Boomerang can transition to a Stabilizer SMO when the patient demonstrates a consistent heel-to-toe gait pattern.

Benefits

- Foot and ankle alignment
- Stability and control
- Heel-to-toe gait pattern
- Moderate knee control
- Neuro-motor patterning
- Pain reduction

Options

- Strap color
- Transfer pattern

This SMO is indicated for patients diagnosed with any of the following: ankle/knee instability, out-toeing or in-toeing, toe walking, and mild to moderate pronation/supination

ONLY AVAILABLE AT OP SPECIALTY BRACING CLINICS



Boston Band®

The Boston Band® is a lightweight foam and plastic helmet that treats a number of types of cranial asymmetry, including positional plagiocephaly by providing a pathway for the infant's head to grow into a more symmetrical shape.

Benefits

- Pre-cut void ensures continued relief over the flattened area
- A unique, multi-layer foam system allows for easy adjustment
- Lightweight - under 12 oz
- Reports available to measure progress
- Free color or pattern*

Options

- A unique, optional hinged opening that allows easy internal modification for clinicians and easy operation by parents
- Permanent framework



The Boston Band® is indicated for infants 3-18 months of age diagnosed with any of the following: Plagiocephaly, Brachycephaly, Asymmetrical Brachycephaly, Scaphocephaly, and Craniosynostosis needs.

*Extra helmet decals or custom paint are requested and paid for by the family.



RHINO® Cruiser

The Cruiser polypropylene hip abduction brace designed to address hip dysplasia in infants up to 3 years old. This brace serves as a crucial aid in maintaining the optimal hip abduction position. Notably, it strikes the perfect balance between providing steadfast support and granting the necessary flexibility for unhindered walking.

Benefits

- Open front for easy access for ultrasound and diapering in the brace
- Array of sizes: Preemie - XL
- 90* hip flexion, 60* abduction



SIZES	WAIST CIRCUMFERENCE
PREEMIE	12"-14"
X-SMALL	14"-16"
SMALL	16"-18"
MEDIUM	18"-20"
LARGE	20"-22"
X-LARGE	22"-24"



RHINO® Kicker Pavlik Harness

The Rhino® Kicker is engineered for effective hip dysplasia treatment, pairing precise strap placement with soft, infant-friendly materials. Its smart design helps optimize positioning for improved outcomes, while ensuring comfort for both baby and caregivers.

Benefits

- Open-front design for convenient ultrasound access and diapering
- Sizes ranging from preemie to large to support individualized fit
- Machine-washable and dryer-friendly for daily ease



SIZES	
PREEMIE	4-6 LBS
X-SMALL	0-2 MONTHS
SMALL	0-3 MONTHS
MEDIUM	3-6 MONTHS
LARGE	5-9 MONTHS



RHINO® Knee Immobilizer

Benefits

- 3 piece design for correct circumference fit (except infant)
- Loop/lock closure
- Removable straps for easy washing

LEG LENGTH	
8"	INFANT
10"	
12"	PEDIATRIC
14"	
16"	
18"	ADOLESCENT
20"	
22"	
24"	



RHINO® Neoprene Support

Designed specifically for kids, this neoprene compression sleeve delivers comfortable support. An added anterior knee pad provides focused compression and protection, with open- or closed-patella options to match each child's needs and activity level.

SIZES	THIGH CIRCUMFERENCE
X-SMALL	8"-10"
SMALL	10"-12"
MEDIUM	12"-14"
LARGE	14"-16"
X-LARGE	15"-17"



RHINO® Cast boot

Cast boots are made of durable canvas and have a ripple pattern rocker sole for safe, comfortable walking for children of all ages.

LENGTH	WIDTH	SHOE SIZE
5.5"	3.0625"	5.5 - 7.5 CHILD
6.375"	3.125"	8 - 10 CHILD
7.25"	3.5625"	10.5 - 12.5 CHILD
8"	3.875"	1 - 2 JUNIOR
9.5"	4.25"	5 - 8.5 ADULT
11.25"	5.0625"	9 - 13 ADULT



RHINO® Stomper

The "Stomper" Pediatric Boot is durable and easy to apply. It has a unique rocker bottom design which simulates normal gait

Options

- Pediatric sizing
- Rocker bottom

	SMALL	LARGE
HEIGHT OF LINER	9.5" (24.13 CM)	11" (27.94 CM)
HEIGHT OF UPRIGHT	8" (22.86 CM)	9.5" (24.13 CM)
LENGTH OF FOOT PLATE	6.5" (16.51 CM)	7.5" (19.05 CM)
WIDTH OF FOOT PLATE	3" (7.62 CM)	3.5" (8.89 CM)



RHINO® Elbow Splint

The Rhino® elbow splint is designed for elbow sprains and contusions. We have a variety of sizes that will fit from toddler to teen.

SIZES	FOREARM LENGTH	UPPER ARM LENGTH
X-SMALL	8.5"	7.5"
SMALL	9"	8"
MEDIUM	9.5"	8.5"
LARGE	10"	9"
X-LARGE	11"	9.5"



RHINO® Arm Sling

A blue envelope sling with an adjustable strap. This sling has self-gripping fasteners that make it easy to apply. Sizes available to fit all children.



SIZES	FOREARM LENGTH
X-SMALL	10"
SMALL	12"
MEDIUM	15"
LARGE	17"



RHINO® Wrist/Forearm Brace

For use in sprains or non-displaced torus fractures, the wrist/forearm brace provides excellent support and protection as follow-up to cast treatment for forearm fractures. Allows gradual increase in function. Remove for bathing.

- Loop/Lock closure
- Specify right or left
- Removable stays for easy washing
- Sized by forearm length and circumference



PEDIATRIC SIZES

BRACE LENGTH	ARM
6.5"	LEFT & RIGHT
7.5"	LEFT & RIGHT
8.5"	LEFT & RIGHT
10"	LEFT & RIGHT

ADOLESCENT SIZES

BRACE LENGTH	ARM
8.5"	LEFT & RIGHT
10"	LEFT & RIGHT
12"	LEFT & RIGHT



RHINO® Clavicle Strap

For treatment of clavicle fractures. Four way strap made up of comfortable foam and stockinette. Very easy to apply with self-gripping fasteners.
(Chest circumference measured at bottom of sternum.)



SIZES	CHEST CIRC.
X-SMALL	16"-19"
SMALL	19"-24"
MEDIUM	24"-30"
LARGE	30"-34"



RHINO® Cervical Collar

Comfortable, contoured, well fitting foam collar designed especially for children. Natural colored stockinette with self gripping fasteners.

SIZES	NECK SIZE
X-SMALL	7"-13"
SMALL	9"-14"
MEDIUM	11"-16"
LARGE	13"-18"



MOVE-D

Move-D Brace

Inspired to improve the quality of life for patients with upper extremity tremors.

Move-D is a simple and elegant mechanical full arm brace that stabilizes tremors in the dominant upper extremity to improve the performance of Activities of Daily Living (ADL) for pediatric patients through adulthood with movement disorders such as Essential Tremor, Ataxic Cerebral Palsy, and Parkinson's Disease.

The Move-D device is lightweight, easy-to-wear, portable, comfortable, non-electric, and adjustable as a patient grows.



Move-D

MAKING AN IMPACT GLOBALLY

Ponseti Method Training

OP Specialty Bracing is dedicated to training the next generation of clinicians on the ground-breaking Ponseti Method, and we provide a variety of anatomical training models to better equip physicians, orthotists, prosthetists, and other Ponseti Method practitioners around the globe.

These tools allow practitioners the hands-on training they need to perform the manipulations, casting and tenotomy procedures that the Ponseti Method recommends.

MDO Training Models in use:

1. Ponseti® Clubfoot Model
2. Cast Application Rubber Legs
3. Tenotomy Model
4. Five Stage Cast Set
5. Tenotomy Practice Model
6. Vertical Talus Model



MITCHELL PONSETI® Educational Events

The Mitchell Ponseti® Educational Event is a **FREE comprehensive educational program** that offers healthcare professionals the opportunity to learn about clinical support, product training, parent perspective, and reimbursement information. The events are offered in a variety of formats, including online, in-person, and hybrid options. This allows participants to choose the format that best suits their needs and schedule.

Educational Events include:

1. Clinical Support
2. Product Training
3. Parent Resources
4. Reimbursement Recommendations
5. Parent Perspective
6. Q&A Session



MITCHELL PONSETI® Training Kit



The Mitchell Ponseti® Training Kit provides the visual and tactile training tools needed to give practitioners the confidence to treat typical and atypical clubfoot on even the smallest patients.

For new practitioners of the Ponseti Method, it can be difficult to visualize the internal aspect of the clubfoot deformity, palpate anatomic correction endpoints or know just where to place the hands for effective manipulation. The rubber models are made from synthetic materials that replicate the look and feel of an infant clubfoot – and are easy to clean. The Talus bone model includes a gray colored talus bone for instructional orientation and Dr. Ponseti’s “NO” directive over the calcaneocuboid joint.



Dr. Norgove J. Penny, MD
Orthopedic Surgeon, the Pediatric Orthopedic Society for Africa

“The {MD Orthopaedics} training models have been revolutionary, I carry them around in my bags now all over the world when I go training...”



Dr. John Herzenberg, MD
Director of Pediatric Orthopedics at Sinai Hospital, Baltimore, MD

“The models are a great teaching tool, without them you just can’t teach...”



Tenotomy Practice Model

The MD Orthopaedics® Tenotomy Practice Model is designed for physicians and providers, trained in the Ponseti Method, to practice the necessary steps involved with the tenotomy procedure. The model is designed to accurately identify anatomic landmarks both positionally and palpably. The base foot mold is representative of a six month old baby's foot. The model can be practiced both in the posterior upright or lateral position based on surgical preference. The synthetic skin and tendon material are designed to give appropriate feel and palpable feedback of the completed transection.



****Refill Kit Also Available****

KIT INCLUDES:	
1	BASE FOOT MODEL
50	SYNTHETIC TENDONS
10	RUBBER BANDS (NEUROVASCULAR BUNDLE)
2	SYNTHETIC SKIN OVERLAYS



Vertical Talus Model

Understanding of the anatomical relationships of the vertical talus deformity, from either congenital or iatrogenic etiology, is critical in assessing treatment options whether conservative or surgical.

- Real life size and position of a 6 month old clubfoot patient
- Color coded for instructional orientation

The Vertical Talus Model was designed to give the proper anatomic orientation and relational disposition of the typically rigid, irreducible talonavicular dislocation that defines the deformity. The model is representative of a child 6 months of age.

The model includes a gray colored talus bone for instructional orientation and the “NO” directive, by Dr. Ponseti himself, over the calcaneo-cuboid joint.





Ponseti® Clubfoot Model

Medical teaching model to demonstrate proper correction of clubfoot deformity. Errors in the manipulation of the congenital clubfoot can easily be demonstrated with this replica of the bony anatomy of the lower leg, ankle, and foot.

Tenotomy Model

Medical teaching model for visualizing the anatomic relationship of the Achilles tendon in relation to lower leg anatomy. Showing the details and results of heel cord tenotomy procedure. This model is also a useful visual aid when discussing the procedure and expected results with the parent.



Five Stage Cast Model

The Cast Model allows visualization of the completed cast at each of the five different stages of the Ponseti Method, with emphasis on bony landmarks and the toe platform.

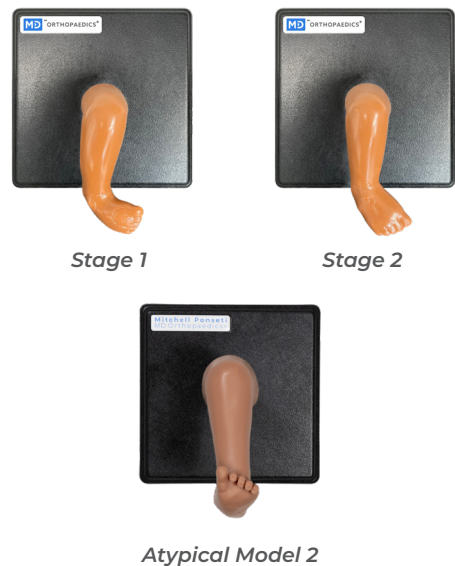
Cast Application Rubber Legs & Stands

These anatomic models are soft and pliable, with finger placement etchings to demonstrate the proper positioning for manipulation.

These legs serve as the teaching models for the proper application of plaster casts at each stage to maintain the correction obtained by manipulation.

Available in 4 configurations: Left uncorrected, Right uncorrected, Left partially corrected, and Right partially corrected.

Cast Application Rubber Legs and Stands may be purchased as a complete set or individually.



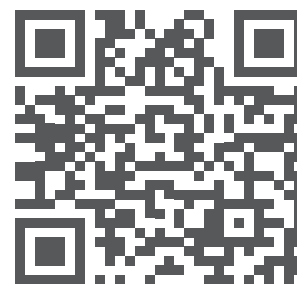
OP SPECIALTY BRACING Clinics



Committed to Patient and Family Care

OP Specialty Bracing is a recognized leader in the field of pediatric orthotics and prosthetics products and services. We believe patients achieve the best outcomes when we work together as a team to diagnose and solve the related problem.

We are committed to working collaboratively to answer any questions you may have and ensure you're fully informed about all aspects of treatment.



Clinic Locations

We have over 45 clinics across the United States and 5 international clinics. Scan the QR code to find a clinic near you!

What We Strive For:

- Evidenced-based programmatic approach to treatment with validated outcomes
- Continuously evolving programs driven by best practice research that set the standards
- Collaborative treatment with physicians and therapists for optimal patient outcomes
- Treatment progress reporting back to the medical team
- Access to our vast network of nationally certified Pediatric Orthotist & Prosthetist Specialists
- Partnering with world class children's hospitals for state of the art collaborative care
- New innovative pediatric solutions being created by our team of engineers on a yearly basis



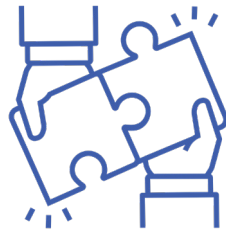
Why Partner With Us?



Kids are at the heart of EVERYTHING we do!

We are proud partners of leading children's hospitals across the United States, with **over 45 pediatric specialty clinics nationwide** and further expansions underway, all dedicated to delivering advanced pediatric orthotic and prosthetic services.

Partnering with providers, we can **supply localized care** adjacent to current orthopedic and prosthetic clinics.



We create **research collaboration opportunities** between pediatric providers to improve standards.

This creates a **net positive financial partnership** for all participating facilities.



Best-In-Class Pediatric Pathways

- Scoliosis
- Cranial
- Lower Limb
- Prosthetics
- Hip Dysplasia
- Clubfoot



Presenting A Website Dedicated To The Kids And Families We Serve!

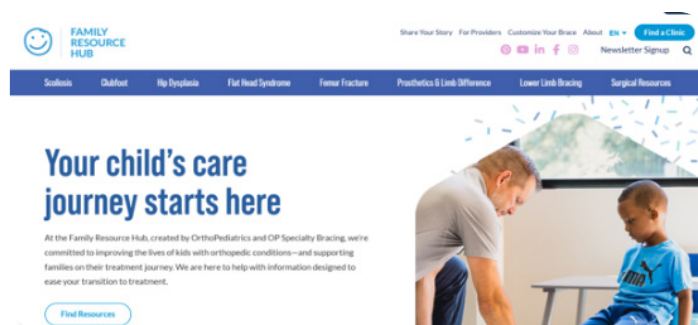
Visit [OPSB.COM/RESOURCES](https://www.opsb.com/resources) to check it out!

Resources for Families and Health Care Providers

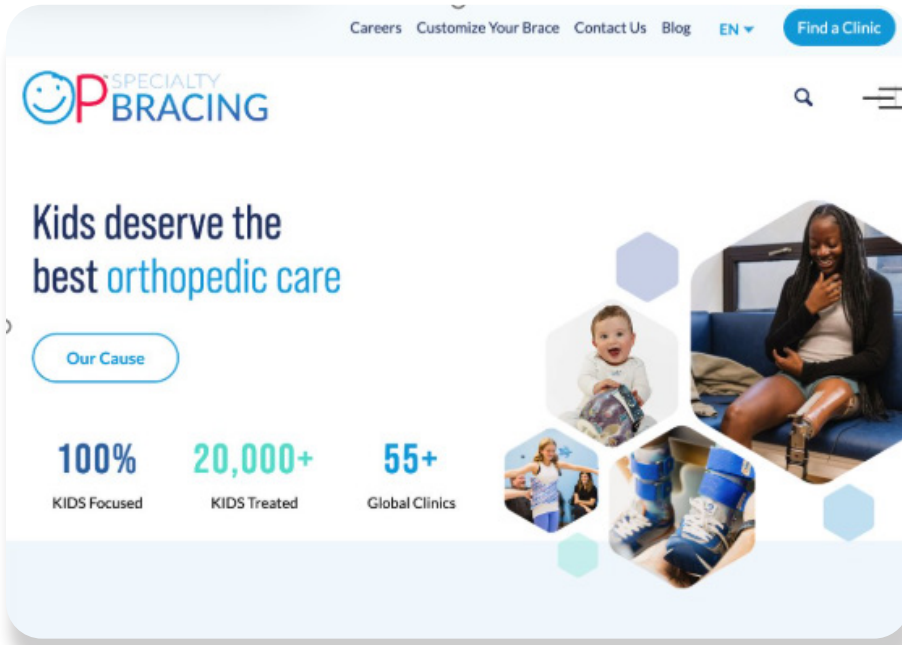
- **Learn** the standard solutions for treatment
- **Understand** your care pathways
- **Be inspired** by parent and patient stories
- **Explore** a wide array of pediatric diagnoses
- **Comprehensive information** on the most common treatment areas from head to toe
- **Experience** parent centered education
- **Discover** medically reviewed resources



At home care experience from the start to finish of bracing - this hub is a one-stop-shop tool to show families diagnosis information through treatment. Simple, trusted guidance for your patient's condition, right at the family's fingertips. Your patient's care doesn't stop when they leave the appointment.



OPSB.COM Main Website



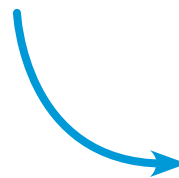
100% Pediatric Focused!

Discover

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- Over 55 Clinics
- Educational Programs
- Appointment Scheduling
- Provider Information
- FAQ's



Learn and Connect with us!



More Info:

www.opsb.com



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