FAQ

Q. How long does it take post-MD referral for a patient to get a device?
A. After the MD referral, the patient will consult with a certified prosthetist (CP) and have the appropriate measurements and intake completed. Once Naked Prosthetics receives the information, the device turnaround time is 6-8 weeks for this custom device.

Q. Are there preferred residual lengths to fit the devices?
A. Yes, this is an area in which the surgeon has a large impact on prosthetic outcomes. There are three amputation levels of particular interest: PIP & MCP disarticulations, and amputations within the first phalanx.

**PIP & MCP disarticulations:**
It is common for short P2 and P1 amputations to be taken back to PIP and MCP disarticulations, respectively. There are many contributing factors for this choice including little functional gain from retaining the joint, risk of complication in tendon attachment, healing problems for sparse closure material, residuum sensitivity, and an amputee's aversion to revision surgery if proper closure doesn't occur. However, if the surgeon can retain a functional joint and enough skeletal structure in the residuum distal to the joint to suspend a ring, the amputee now has the option to use a highly functional dynamic mechanically driven prosthesis appropriate for returning to work.

**PIP joint disarticulation limitations:**
To fit the PIPDriver, there must residual bone distal to the PIP joint to drive it. A PIP-level disarticulation exists in a “no man's land” for prosthetic fitting: the PIPDriver won't work as the joint is missing, and the MCPDriver will be too long to match the grasp of the other fingers. Additionally, by forcing the patient to a MCPDriver at this level, the prosthetic suspension moves from a simple ring to a whole hand suspension.

**First phalanx:**
To avoid an MCPDriver fitting that is artificially long and unmatched in grip radius to the adjacent fingers, it is ideal to remove the distal condyles of the first phalanx. This leaves the amputation in the mid to distal 1/3 of the first phalanx, which is ideal for an MCPDriver.

_The NP clinical team is available to consult on specific cases._

Q. How do I find an appropriate prosthetist to fit NP products?
A. Please contact NP for a preferred providing clinic. We have a network of experienced CPs throughout the USA and the world.

Q. Can my Hand Therapy team fit the devices?
A. No, HTs do not fit prostheses. We advise surgeons and HTs to refer to our website for a CHT/surgeon patient evaluation form, which will allow us to connect you with local experienced prosthetic care. We highly recommend hand therapy post fitting to increase patient performance and satisfaction.
FAQ

Q. What is the life expectancy of the devices?
A. NP aggressively life tests the products under load to an approximation of 3 years of life. The curve of device failure in the field tends to center on 3.5 – 4 years, with some patients still wearing the same PIPDriver and MCPDriver 5 years on.

Q. Do the devices break often?
A. Our rule of thumb is that if it’s going to break or badly damage your intact finger, it will likely break the prosthesis. Our failure rate in-field is low due to our aggressive product testing and design. Additionally, many parts of the prosthesis are considered consumable and easy to replace by the clinician or patient.

Q. Are patients with hypersensitivity able to use these devices?
A. Yes. The devices act as a protective exoskeleton and reduce the amount of pain experienced by the amputee.

Q. Is web space deepening effective in short thumb amputations?
A. Yes, we have seen web space deepening provide the length required for a successful ThumbDriver intervention.