

FLOWSTATE 100 SURVEY

Flowstate Knee Brace

Name _____ Age at time of injury _____

First, we would like to know about you and your prior knee injury(s)

1. What type of knee injury did you sustain? Please select the description that best fits your injury?

ACL MCL PCL Meniscus Other (please explain)

2. About how long did it take for you to recover from your injury(s)?

3. If you took time off of work, how many days did you miss?

4. Did your injury require surgery?

We would like to understand your level of daily activity before and during the injury

Daily activities can be described, in simple terms, as walking (or exercising) more than 300 feet at a time, prolonged sitting, and prolonged standing

5. **BEFORE** your injury, how many times a day did you: (Not as relevant in 2020 plus time consuming but it does play a role when a huge lifestyle change happens.)

A) Walk more than 300 feet (the length of a football field)?	
B) Sit more than 2 hours at a time?	
C) Stand more than 2 hours at a time?	

6. While **RECOVERING**, how many times a day did you:

C) Walk more than 300 feet (the length of a football field)	
D) Sit more than 2 hours at a time?	
E) Stand more than 2 hours at a time?	

Now we would like to further understand how you managed your pain

7. On a scale of 0-10 (0 being no pain and 10 being severe pain requiring urgent care), how would rate your pain when it was at its worst?

0 1 2 3 4 5 6 7 8 9 10
No Pain *Moderate* *Severe*

8. When pain was at its worst, what (if any) medication did you take to manage your pain (some examples are listed here for your reference: Tylenol, Ibuprophen [Motrin], hydrocodone [Percocet], Oxycodone [Oxycontin])

9. How many times on average per week did you use medication to manage your pain? *As a reminder, Rest, Ice, Compression and Elevation (or R.I.C.E) is commonly prescribed as a natural therapy technique*

10. On a scale of 0-10 (where 0 is hassle-free or no inconvenience and 10 is very inconvenient), how much of a hassle or inconvenience was it to ice or elevate your injury during recovery?

0 1 2 3 4 5 6 7 8 9 10
No Inconvenience *Moderate* *Very Inconvenient*

11. What was the most frustrating memory you have of the rehabilitation process?

12. Comparing use of pain medications and RICE, which technique did you use more frequently during recovery and why?

23. Comfort level with gel packs
24. Ease of wearing brace without gel packs on level floor or ground
25. Ease of wearing brace with 1, 2, 3, 4 (check all that you use) gel packs on level floor or ground
26. Ease of walking up/down stairs wearing brace without gel packs
27. Ease of walking up/down stairs wearing brace with gel packs 1, 2, 3, 4 (check all that you use)
28. Ease of rising from a chair wearing brace without gel packs
29. Ease of rising from a chair wearing brace with gel packs 1, 2, 3, 4 (check all that you use)
30. Ease of storage of brace
31. Ease of storage of gel packs
32. Degree brace slides or slips down knee/leg without gel packs
33. Degree brace slides or slips down knee/leg with gel packs 1, 2, 3, 4 (check all that you use)
34. Frequency/number of times per day used brace without gel packs
35. Frequency/number of times per day used brace leg with gel packs 1, 2, 3, 4 (check all that you use)

Please check or fill in the boxes as directed

36. Which brand of gel packs do you prefer? U-Line Custom Flowstate Logo
37. Why do you prefer this brand?
38. Do you use cold packs, warm packs, or both with this specific knee brace?
39. When using gel packs, rank in order the temperature range you use (1 highest, 2 medium, 3 lowest rank):
 Cold Warm Alternating cold and warm packs
40. Number of minutes knee brace worn *without* gel packs: 10 20 30 40 50 60
41. Number of minutes knee brace worn *with* gel packs (hot or cold) 5 10 15 20 25 30
42. Any additional comments? Please share
43. Would you be willing to share some of your testimonial in writing; and or a short video recording?

Thank you very much for your personal feedback!

Prototype Wear and Use Guide

Thank you and welcome to the “Flowstate 100” Test Team! As you become familiar with your sample/prototype here are some steps to help make wearing it and using it simple and easy.

Step 1: Open the brace and Undo the 2 Velcro straps. Your compression brace is open in the front, for comfort and Multi-uses; it’s not a sleeve, it will fasten with two open flaps in front of your knee cap. This version has 3 lined insulated external pockets, with the gel packs placed in their “assigned seats”. Two 3X5 gel packs on the sides of your knee; One 5X7 behind your knee.

Step 2: The Top and back of the brace has the open/non-slip grip strip. The bottom has your white “tag” size label (small, medium or large).

Step 3: The Round Cut out fabric circle goes behind your knee.

Step 4: Fasten the Velcro Flaps, and pull the elastic straps to secure the straps.

Step 5: Interchange the gel packs as you desire. The branded Flowstate Logo gel packs are both hot or cold and say so written on the front.

Additional Information

- The U-Line gel packs you received previously are cold packs only.
- The circular 4 inch logo brand ice packs are cold only and are used for your knee cap; or bumps and bruises.
- Put it on and use it when you work out, are active and stay on your feet. Definitely critique and comment on what works or what could improve the function and wear.

Lesssssss Goooooo! Definitely provide any feedback and comments on your time frame and availability.

Thank you for your time and effort,
Megan