

### InterX Accessory Electrode Guide



Large



Small



X-Small

Standard SCAN, TARGET, DYNAMIC Applications



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### Flexible Arrays

SCAN using the built-in electrode for 5 minutes to identify the Primary Active Site.



Note: The stimulation pattern varies when using the Flexible Array, confirm comfortable intensity at different times during the treatment. There will be brief intervals where the patient will not feel any stimulation.

Plug in Flexible Array. Choose preset and set intensity. Treat on Primary Active Site for 10 minutes. For more complex conditions, place the Flexible Array on associated nerve pathways including the spine.



Use position/stretch or exercise to identify the most painful site. Place the Flexible Array onto this site and continue exercise. If the pain moves, it may be necessary to move the electrode.



### Soft Tissue

SCAN by sliding the electrode with medium pressure for 5 minutes to identify Active Sites, trigger points, tender points and/or muscle adhesions.



Point-stim with firm pressure. Maintain comfortable pressure and avoid excessive friction to prevent next-day soreness. Perform cross-friction to finish.



Use position/stretch or exercise to identify the most painful/tight muscles. Follow the pain with the electrode. Hold the device still or use sliding motions.



### Comb

Scan with the comb on surfaces where hair restricts skin contact. Identify Active Sites where stimulation feels stronger.

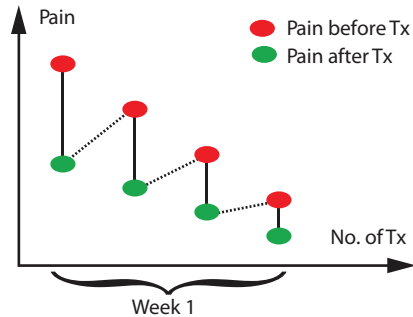


The Comb is useful to complete treatment of the spine by extending onto the scalp

Target Active Sites with stimulation for 30 seconds.

# TREATMENT PLANNING

Clinical outcomes from InterX treatment are highly correlated to the frequency and duration of treatment. Symptoms decrease in a stair-step manner as illustrated in the graph. Early intervention and frequency of treatment will result in optimal outcomes and shortest recovery times.



## Time Dependent Treatment Guidelines

Average treatment time is 15 minutes. Acute treatments are often shorter and more frequent incorporating DYNAMIC activity. Chronic conditions may require up to 30 minutes depending upon complexity and duration of pain symptoms.

Total Time	30 min	20 min	15 min	10 min
Scan	10 min	5 min	3 min	2 min
Target	15 min	10 min	7 min	5 min
Dynamic	5 min	5 min	5 min	3 min

## Acute Treatment Tips

- Provide treatment as soon as injury occurs
- Maximum treatment time per day = 2 hours
- Use professional judgement to recommend safe activity level for 1 hour following treatment
- Focus most treatment at the local area of injury and treat often
- Expanded treatment options: spine root / dermatome
- If acute exacerbation of chronic condition/injury, treat as chronic
- Start with highest acute setting and work to lowest setting with progressive treatment

## Acute Treatment Frequency

Day	1	2	3	4	5	6	7
Max.	●●●●●	●●●●●	●●●●●	●●	●●●●●	●●●●●	●●●●●
Recomm	●●	●●	●	●	●	●	
Min	●		●		●		

## Chronic Treatment Tips (musculoskeletal of known origin)

- Begin treatment with 3 visits per week for at least 2 weeks
- Treatment times are often 30 minutes in length; do not exceed 60 minutes per day
- If the progress plateaus after 2-3 weeks of treatment, discontinue treatment for 7 days to allow patient to stabilize
- Overstimulation may temporarily exacerbate symptoms
- Allow the body to respond. Positive results may require 3-6 treatments
- Stimulation sensitivity is often greater when treating chronic conditions
- Start with lowest chronic settings when treating the dermatome or spine and increase to higher settings with progressive treatment
- Only progress to acute settings if chronic settings have no results

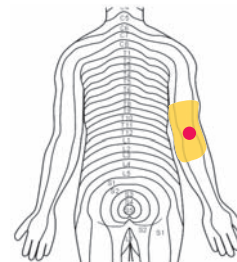
## Chronic Treatment Frequency

Day	1	2	3	4	5	6	7
Max.	●●	●●	●●	●●	●●	●●	
Recomm	●	●	●		●		●
Min	●		●		●		

● Point of Pain/Injury

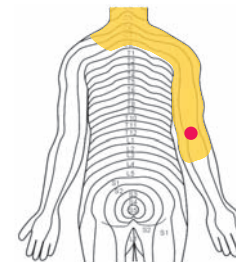
■ Scan/Target Area

### Direct/local



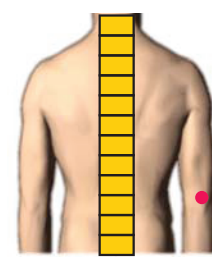
The Primary Pain/Injury Site

### Dermatome



Includes the area of pain/injury, the related dermatome and spine root.

### Spine



The spine and para - spinal area

Note: Chronic conditions often require more complex treatment planning integrating corresponding neurological pathways, adjacent muscles, connective tissues and the spine. Progress from the local area to other treatment options if symptoms do not subside or change.