



**Sales Handbook**  
Approach and presentation guide

*Making sales made easy*

[www.dynamictape.com](http://www.dynamictape.com)

### ■ **What is Dynamic Tape?** \_\_\_\_\_

Dynamic Tape is a unique, strongly elastic tape which is used in the treatment of many sporting, musculoskeletal and neurological conditions.

### ■ **What are the advantages of Dynamic Tape?** \_\_\_\_\_

Dynamic Tape allows the wearer to move through full range of motion without limitation. Dynamic Tape can strongly assist or resist movement, facilitate or inhibit and offload tissue through full range of motion. This is only possible due to the highly elastic nature (no endpoint like kinesiotapes) and four way stretch necessary when taping multi joint muscles and performing complex, three-dimensional skills.

### ■ **How does the tape work?** \_\_\_\_\_

In many cases the tape is applied in such a way that it mimics the action of the injured muscle or tendon. The tape is placed on the body with the muscle or joint in the shortened position and with stretch on the tape. As the muscle or joint lengthens, the tape is stretched further and thereby absorbs load just as a bungee cord decelerates the jumper, absorbing load. This reduces the eccentric work of the muscles. Once full range is reached, the absorbed energy is stored in the form of elastic potential energy. As the muscle or joint begins to shorten, the energy is released back into the biomechanical chain as kinetic energy, thereby assisting the concentric action of the muscle. This results in decreased workload of the muscle, decreased metabolic demand and improved tolerance to fatigue.

Reducing load may result in less pain, better healing (can load sooner resulting in functional stress and better scar formation), improved endurance and performance. Dramatic improvements in lymphatics are also observed.

There are a number of mechanical and physiological mechanisms that are likely to contribute. These are outlined in our free eLearning programs on the resources page of [www.dynamictape.com](http://www.dynamictape.com).



**■ What is the tape used for?** \_\_\_\_\_

The tape can be used whenever you want to reduce the workload on tissues. This is particularly beneficial in muscle tears like the calf or hamstring or in chronic tendon pain like Achilles Tendinopathy, Patellar Tendinopathy (Jumper's Knee), Plantar Fasciitis, Tennis Elbow, Shin Splints, Rotator Cuff etc. etc.

It can also be used to reduce load by taking weight e.g. supporting the weight of the upper limb to reduce stress on A-C joint, Shoulder dislocation (for comfort), sensitised neural tissue (brachial plexus), biceps tendon etc.

Many benefits can be obtained by using the tape to modify the biomechanics e.g. resisting internal rotation of the femur in a runner who is excessively pronating, resisting lateral translation of the patella in patellofemoral pain syndrome or correcting faulty scapular or shoulder mechanics.

Functional strength training can also be achieved by working against the resistance of the tape during activities (e.g. Late stage rehab of lateral ankle sprain - tape the ankle into plantar flexion/inversion and then work against it to maintain eversion when hopping, jumping etc.)

**■ What is the tape not used for?** \_\_\_\_\_

The tape is not designed to restrict movement. If the aim is to lock up a joint e.g. acute lateral ankle sprain, then a rigid sports tape is recommended. The Dynamic Tape however could be used in combination with the rigid sports tape to assist the action of the ankle everters.

## ■ Approaching Prospects

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Questions to ask:

- **Do you currently use tape?**

If so, what type of tape do you use: Zinc Oxide, Kinesio, EAB etc.? This will direct your explanation as you can outline the differences between Dynamic Tape and other tapes and taping methods.

If not, you may simply wish to describe how Dynamic Tape can assist.

- **Do you see patients with muscle tears, tendinopathy, biomechanical, overuse or overload injuries?**

- **Do you treat neurological conditions or lymphedema?**

- **Are you looking for an effective, hands on treatment that can be adapted to and complement your current treatment approach?**

- **Are you interested in a tool that builds on your current knowledge of anatomy and biomechanics so it can be used immediately in the clinic with only brief training?**

- **Would you like your patients to continue benefitting from your treatment 24/7?**

- **Would your patients benefit from an extremely comfortable, long lasting tape that can be used to reduce strain and pain, modify biomechanics and improve function and performance?**

The answers to these questions should create significant curiosity and interest to allow you to present the products to your clients. If they require further information or do not wish to make an appointment at this time direct them to our eLearning programs on the resources page at [www.dynamictape.com](http://www.dynamictape.com) and request a suitable time to follow up with a visit or a phone call to obtain their feedback on the program.

## ■ Step by step In-service

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1. Product history
2. Explain how product works
3. Show Introductory Guide and Quick Reference Guide to give examples
4. Explain Application Guidelines and Precautions
5. Show the Dynamic Tape product range
6. Show PosturePals Pre-cuts
7. Review Resources
8. Closing

## ■ Step 1.

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### **Product History**

a. Founded by Australian Musculoskeletal Physiotherapist, Ryan Kendrick BPhy, MPhySt. who was awarded both of his degrees at the University of Queensland under the expert guidance of respected leaders in the field such as Professors Gwendolyn Jull, Carolyn Richardson, Paul Hodges and Bill Vicenzino.

b. Ryan's clinical experience was divided between professional athletes and private musculoskeletal physiotherapy practice. He has worked as Physiotherapist to tennis player Greg Rusedski, former world number four and US Open finalist, Essex County Cricket Club, European Tour Golfers and many Commonwealth and Olympic Games athletes.

c. Developed PosturePals adhesive spinal supports which were awarded Episode Winner on ABC TV (Australia) program, the New Inventors.

d. Identified that many of the conditions presenting in clinical practice were a result of overuse or more correctly overload and that current taping products were ineffective at absorbing load or contributing energy to reduce the workload of the muscle-tendon unit. They were also ineffective at modifying the biomechanics whilst still permitting the full range of motion necessary to perform the complex skills required in many athletic pursuits.

e. Developed Dynamic Tape which achieves these objectives and is an effective clinical tool in the management of muscle strains and tears and overuse and biomechanical injuries like achilles and patellar tendinopathy, plantar fasciitis, rotator cuff pathology, tennis elbow, shin splints etc.

f. Due to the clinical effectiveness, in the first twelve months alone distribution expanded from Australia to include New Zealand, Norway, Sweden, Denmark, UK, Germany, Czech Republic, Brazil, USA, Canada, Belgium, Netherlands, Luxembourg, South Africa and continues to grow rapidly.

■ **Step 2.**

**Explain how Dynamic Tape works**

a. Dynamic Tape is applied in inner or mid range with stretch so that the elasticity of the tape absorbs load as the muscle or joint lengthens. This will reduce the eccentric demand on the muscle decelerating the movement e.g. hamstrings. Energy is then stored and as the muscle begins to shorten is re-injected back into the system to assist the concentric contraction.

b. This acts in much the same way as a bungee cord. The bungee cord absorbs load and decelerates the jumper. Once deceleration is complete the stored energy is reintroduced and the jumper is accelerated upwards.

c. Note that this only occurs if the bungee is under tension early in the jump. If it only begins to tension towards the end very little load is absorbed and the jumper hits the ground with considerable force. In other words, applying the tape at the end of range (lengthened position) results in very little load absorption.

d. Apply the tape to the middle finger of the prospect's hand with the finger flexed and the tape on stretch. Then straighten the finger fully to demonstrate that full range can be achieved and to allow them to appreciate the amount of elastic energy contained within the tape.



e. By mimicking the action of the muscle we can reduce load absorption requirements of the muscle. Reduced load equals a reduction in pain and metabolic demand which may in turn improve fatigue tolerance. We can assist overloaded muscles, compensate for weak ones, resist to encourage strengthening and pull the body part in various directions to improve the biomechanics.

f. Demonstrate the difference to kinesiology tapes if appropriate

- The two products have been designed with completely different aims in mind. Kinesio has been designed to have a similar elasticity to the skin such that when applied at the end of range, on shortening of the body part, the tape will gather and lift the skin resulting in improvements in circulation and reducing pressure on pain sensitive structures. It can also restrict to some degree if desired due to the rigid end point and two way stretch.
- Demonstrate the rigid end point of kinesio which means that to permit full range it must be applied at the end of range (can use finger example to show limitation if applied in inner range with stretch) and cannot absorb much load or provide much mechanical assistance (bungee example)
- Two way stretch only which can limit if taping multiple joints and performing complex, 3-D tasks necessary in many sports and activities
- Lack of sideways stretch will also reduce the effectiveness (elasticity) of an underlying layer if placed on top and perpendicular

■ **Step 3.** \_\_\_\_\_

**Show Introductory Guide and Quick Reference Guide to give examples.**

- a. Clients may wish to feel the effect of various techniques so it is suggested that you practise applying some simple techniques before your first presentation.
- b. The shoulder offload technique is recommended or the Dequervain's technique may be a simple alternative which does not require exposing the shoulder and back.



#### ■ **Step 4. Explain the Application Guidelines and Precautions.** \_\_\_\_\_

##### PREPARATION \_\_\_\_\_

- **Skin** – Ensure that the skin is clean and dry and free from dirt, creams or oils. For best results and ease of removal we strongly recommend removing hair prior to application. Do not apply to broken or frail skin or sunburn. If stinging, itching, burning or irritation occurs, cease use immediately.
- **Tape** – To reduce peeling or curling, round off all ends of the tape prior to applying to the skin
- **Body Position** – This may vary depending on the aim however generally place the body part in such a way as to shorten and relax the target muscles or soft tissues.

##### APPLYING THE TAPE \_\_\_\_\_

- Carefully tear and remove the backing sheet in small increments to avoid tangling the tape or handling the adhesive.
- As with most adhesive tapes traction blisters can result when the tape pulls continuously on the skin. This generally occurs at the ends of the tape. Therefore, apply at least four centimetres with no stretch to act as an anchor point.
- Start/finish the technique further from the joint to improve adhesion and to increase the length of the effort arm of the tape. This will increase the mechanical advantage.
- Hold down the anchored end of the tape to minimise any tension when stretch is applied.
- Gather up the soft tissue and apply the tape with a moderate degree of stretch.
- Apply pressure to the tape smoothly as you peel away the backing paper
- Apply the final few centimetres of tape with no stretch to act as an anchor point.
- Where possible, avoid finishing the tape on soft and sensitive areas of skin (e.g. inside of thigh and upper arm).
- Rub the tape thoroughly to ensure optimal adhesion.

## ■ GENERAL PRINCIPLES

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- Start and finish on skin. Avoid overlapping or crossing if possible. If necessary, use adhesive spray on the back of the first layer of tape to improve adhesion. Due to the soft, highly waterproof fabric and the elastic nature (subsequent layers of tape pulling in different directions and with different degrees of stretch) the tape prefers to stick directly to the skin. It is not necessary to apply locking off strips however you may choose to do so. A rigid tape is best for this purpose.
- Take care with circumferential taping applications. As Dynamite Tape is strongly elastic it should be applied on an angle and not completely around the limb to avoid creating a tourniquet effect.
- Apply approximately thirty minutes prior to vigorous exercise, swimming or showering.
- Adhesive wipes or sprays are recommended to protect skin and improve adhesion. If overlapping tape, spray the back of the underlying layer with adhesive spray to improve adhesion of subsequent layer.
- Pat dry after showering or bathing – do not rub.
- Dynamite Tape can generally remain in place for five days.
- Remove tape in the direction of the hair. Hold down the skin and peel tape back on itself. Do not remove when wet.

■ **Step 5.** \_\_\_\_\_

**Show the Dynamic Tape product range.**

- a. Tattoo and Plain Tape
- b. 5cm (2") x 5m or 31m and 7.5cm (3") x 5m
- c. Scissors - non-stick, excellent quality, heat resistant blades, blunt nose
- d. Dynamic Tape Protect – Adhesive products designed to improve adhesion, reduce friction and blisters

■ **Step 6.** \_\_\_\_\_

**Show PosturePals Pre-cut Ergo Tapes**

- a. Two styles that can be used for many conditions including posture, shoulder, knee, low back, elbow, hip
- b. X Tape – two sizes
- c. Box Tape – one size

■ **Step 7.** \_\_\_\_\_

**Review Resources**

- a. [www.dynamictape.com](http://www.dynamictape.com) – many videos, application guidelines and eLearning programs
- b. [www.facebook.com/dynamictape](https://www.facebook.com/dynamictape) – videos, eLearning programs, input from other clinicians, regular tips
- c. Workshops – 3 – 4 hour highly practical training - listed on website or contact distributor
- d. Introductory Guide and Quick Reference Guide (QRG)

■ **Step 8.** \_\_\_\_\_

**Closing the call**

- a. Suggest they order a starter pack (tape, scissors, wipes and QRG). The best way to understand what the tape is capable of and how it will fit into clinical practice is to experiment with it, apply it to others and have it applied to themselves.
- b. If they require further information direct them to the eLearning or workshops and schedule a time to obtain their feedback.

## ■ Common Questions

1. *How long does it last?* - Both Dynamic Tape and PosturePals are single use devices. Under normal conditions and with correct application they should last five days.

2. *Are they hypoallergenic?* - Allergic reaction to the adhesive is very uncommon. If it occurs it will usually present within 30 minutes and affect the entire area covered with tape. Traction blisters usually occur on the ends of the tape or if there are creases in the skin or tension points along the length of the tape. They usually occur around 18 – 24 hours depending on the amount of tension and are due to faulty application.

3. *How do I reduce the chance of blisters?* - Use Dynamic Tape Protect, leave 5cm (2") without tension at either end, do not stretch the tape strongly (the position achieves this), avoid starting and finishing on soft skin such as the inside of the thigh, arm and ribs, warn the patient to remove if itching, stinging, burning or irritation occurs.

4. *Can I get it wet?* - Yes. Brief showers should not present a problem. Pat dry with a towel afterwards. Swimming is also fine however allow thirty minutes after application for the heat sensitive glue to maximally bond prior to entering the water. Adhesive spray or wipes are also recommended to improve adhesion. Wear times may be reduced with demanding activities.

5. *How does it differ from Kinesio Tapes?* See explanation in Step 2. It is recommended that you watch the introductory eLearning program, A Brief Overview before your first presentation.

6. *What research has been done?* - As this product is only new, no research has been published at this stage however a number of universities are contemplating various projects. Kinesio has been around for 30 years and there is still not a great deal of studies available. First principles of physics tell us that the tape is absorbing load and therefore must reduce the intrinsic force that is necessarily generated by the muscle. This is supported with anecdotal and clinical observations. Photos e.g. hamstring supports the benefits to the lymphatic system. Please work through the eLearning program 'Getting Started' for a more detailed description of the theoretical background and a printable version of our Science Supplement.

■ **If you need help or advice please ask.** \_\_\_\_\_

Please do not hesitate to contact us if you require further assistance or advice. We are only too happy to answer your questions and provide assistance in any way we can.

Before you make any presentations we strongly suggest that you watch the introductory eLearning 'A Brief Overview' and practice applying the tape until you are confident to demonstrate a few basic techniques. Practise makes perfect and it does take a little time to perfect the handling.

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*Thank you and good luck.*

## Weapons for serious athletes and clinicians

FOR PROFESSIONAL USE ONLY

*Get serious*

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