

KAPHAPHYSIO®



Electromagnetic Focused Shockwave



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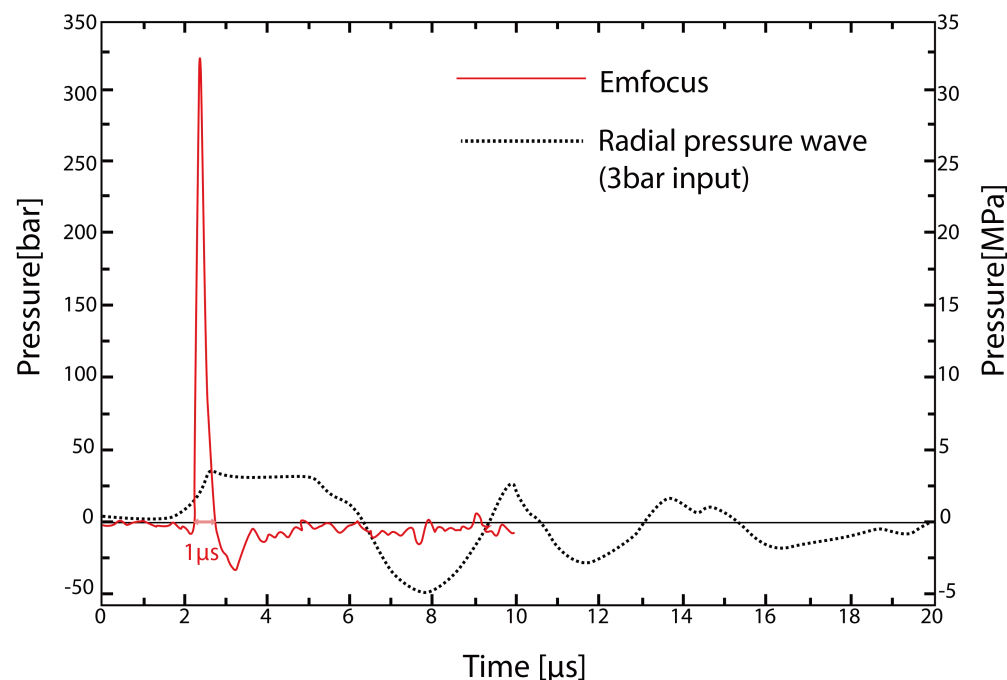
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I. What is Electromagnetic Focused Shockwave?

Shockwave therapy, also known as Extracorporeal Shockwave Therapy (ESWT), is a non-invasive treatment that utilizes high-energy acoustic waves to stimulate your body's natural healing process.

EM FOCUS, the electromagnetic focus shockwave is based on the physical principle of electromagnetic induction. It enables very precise and highly sensitive dosing of the applied shock wave energy. The shock wave source used a special coil to focus the shock waves. EM FOCUS have substantially higher pressure amplitudes, characterized by a single, mostly positive pressure pulse followed by a comparatively small tensile wave component (negative pressure pulse). EM FOCUS will produce a pressure peak in the range of 10-100 Mega-Pascals (MPa). Compared to the positive peak pressure of 0.1-1 MPa for a radial pressure wave-100 times the amount of energy.

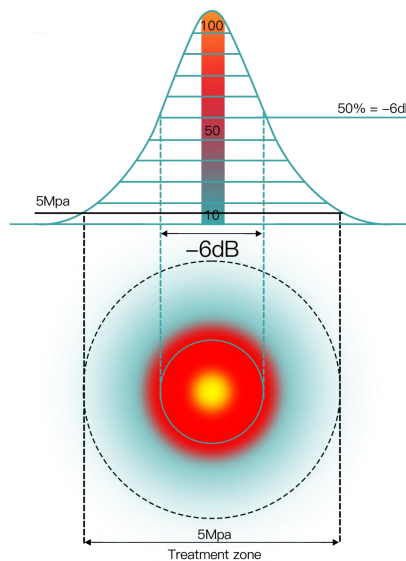
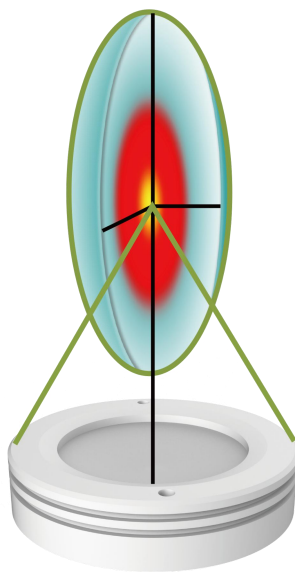
Furthermore, the time taken for a focused shock-wave to reach that peak, as well as its overall pulse duration, is far shorter than that of a Radial shockwave. It's faster, stronger and comforter.



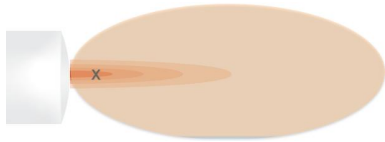
II.The Pressure Distribution of EM FOCUS Focal Zone.

That is the area in which the shockwave produces biological effects. The shock wave treatment area inside the body is not identical with the size of the -6dB focal zone. It can be larger or smaller. This definition is based on the assumption that a certain minimum pressure threshold exists below which shockwave have no or only minimal therapeutic effectiveness. The focal zone is the area of maximum energy intensity. The size of focal zone is basically independent of the selected energy level.

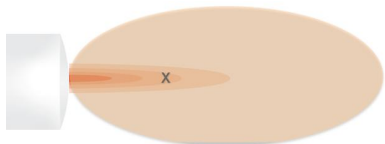
By contrast, the size of the treatment zone depends on the selected energy level. EM FOCUS maximum 100% energy output (energy level at 0.45j/mm²)



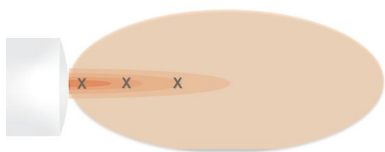
- ◆ EM FOCUS utilizes electromagnetic shockwave emitter (EMSE) technology that consists of an electromagnetic coil and a membrane opposite to it. An acoustic pulse is generated by the acceleration of the membrane away from the coil due to eddy currents.



For superficial area of interest: use low energy intensity



For deeper area of interest: increase energy intensity to penetrate deeper into the body

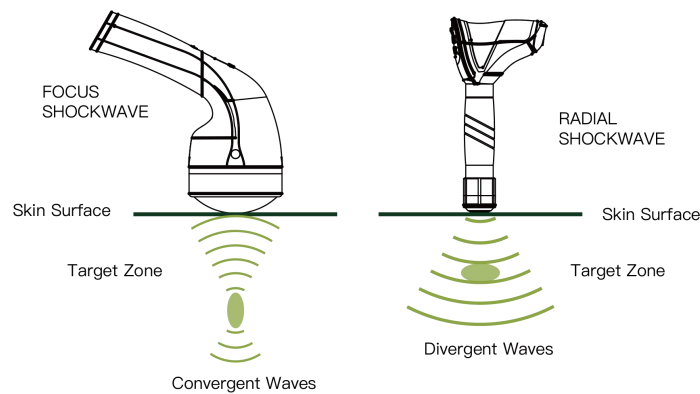


For a wide area of interest: adjust energy intensity to reach more area

Patient's body

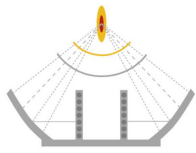


◆ Comparison Between FOCUS SHOCKWAVE and Traditional RADIAL SHOCKWAVE



Item	FOCUS SHOCKWAVE	RADIAL SHOCKWAVE
Penetration Depth	>65mm	0-35mm
Impulse	Fast	Slow
Effect	Deep Mechanical	Superficial Mechanical
Target	Muscle, bone	Skin, muscle
Number of Treatments	Less	More
Treatment Duration	300-1000 shocks	2000-4000 shocks
Usage Area	Physiotherapy, orthopaedics, sport medicine, urology, dermatology, cardiology, veterinary	Physiotherapy, orthopaedics, sport medicine and aesthetics
More effective in	Erectile dysfunction, wound treatment	Superficial muscle relaxation
Wave Propagation	Convergent Wave	Divergent wave

◆ Focused Shockwave Technologies Comparison

Dimension	Electromagnetic Focused Shockwave	Piezoelectric Focused Shockwave	Electrohydraulic Focused Shockwave
Shockwave Generation	Magnetic coil and membrane	Piezoelectric crystals	Spark discharge in water
Energy Characteristics	Large focal zone	Narrow focal zone	Narrow focal zone
Precision	Ideal for deep tissue treatment	Ideal for superficial or Localized treatments	Ideal for treating large areas
Applications	Musculoskeletal	Superficial soft tissue	Deep tissue injuries
Maintenance	Cost-effective	High cost	High cost
Depth control	No gel pad control by water level	Change gel pads	Energy control
Technical Principles			

III. EM FOCUS HIGHLIGHTS

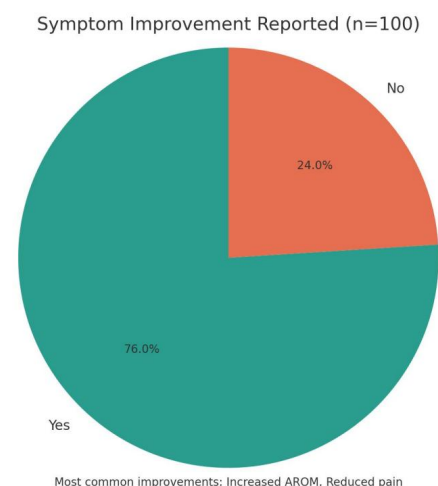
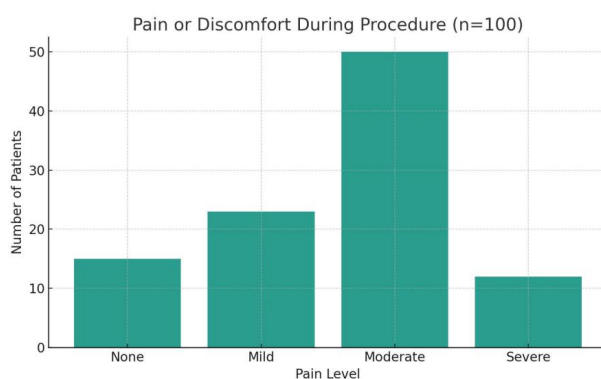
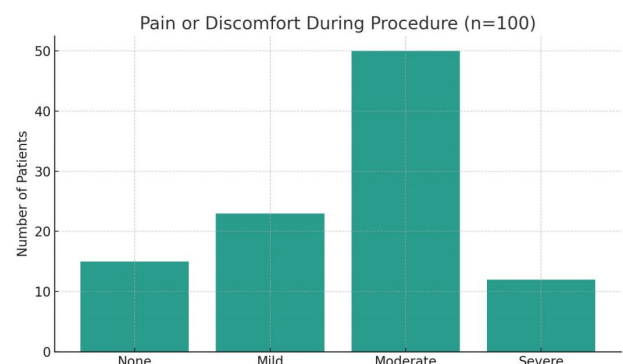
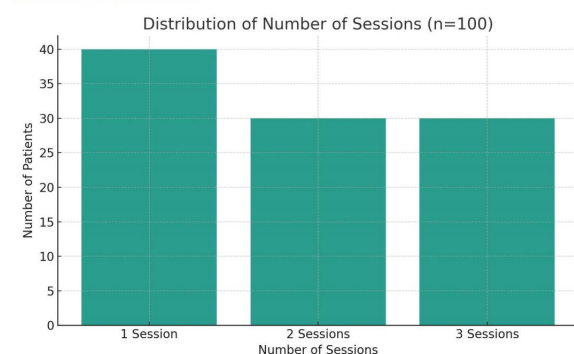
- ✓ Game-changing and affordable focus shockwave
- ✓ No gel pad
- ✓ Wider clinical applications
- ✓ Well tolerated, precise focus - perfect for diagnosis and therapy
- ✓ Wide range of energy settings with a pulse rate of up to 10 Hz
- ✓ 12.1 inch large touch screen
- ✓ User-friendly software with 29 treatment protocols and preset parameters
- ✓ Easy-to-operate handle with intensity adjustment buttons

◆ Customer Feedback Clinical Diagnostic Auxiliary Data

Reference (The following clinical data is the test feedback of EM FOCUS by Cyprus professional physiotherapist Dr.Alex in May 2025)

This report summarizes feedback from 100 patients who underwent EM FOCUS Shockwave Therapy. The analysis covers session frequency, pain experience, symptom improvement, satisfaction levels, and side effects.

Visual Data Presentation



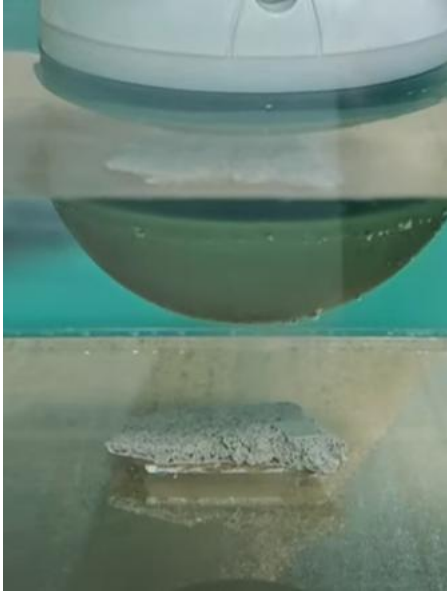
Summary of Results

- The majority of patients (70%) underwent two or more sessions.
- Moderate pain was the most commonly reported discomfort level (50%).
- 76% of patients reported noticeable symptom improvement, most commonly increased active range of motion (AROM) and reduced pain.
- Patient satisfaction was high, with 83% rating their experience as a 4 or 5 out of 5.
- Side effects were minimal; 88% reported none, while 8% experienced bruising and 10% swelling (some overlap).
- Importantly, 73% of patients indicated willingness to return for follow-up sessions, and 81% expressed satisfaction with the results. These results reinforce the clinical benefit and patient acceptance of EM FOCUS Shockwave Therapy.

This data supports its role as a well-tolerated, effective modality for musculoskeletal symptom relief. As a patient-centered treatment, it demonstrates excellent outcomes in reducing pain and improving function, positioning EM FOCUS Shockwave Therapy as a valuable addition to modern musculoskeletal care.

◆ ***Effectiveness and Penetration of the EM FOCUS***

A test video about how the EM FOCUS shockwave breaks down the calcification(frozen shoulder/adheresive tissue). We use the *limestone* for the test and it is a kind of calcification.



Youtube channel guide video path:

<https://youtu.be/f8u286VBiGM>

Conclusion: The intensity can influence the tissue under 12CM

IV. Model Introduction and Installation

◆ Model Appearance



◆ Standard Accessories List



Focus Shockwave applicator*1

Guarantee: half a million shocks



High voltage pulse switch*1 (Inside the machine)

Guarantee: 1 million shocks



Spare silicone water bladder*1

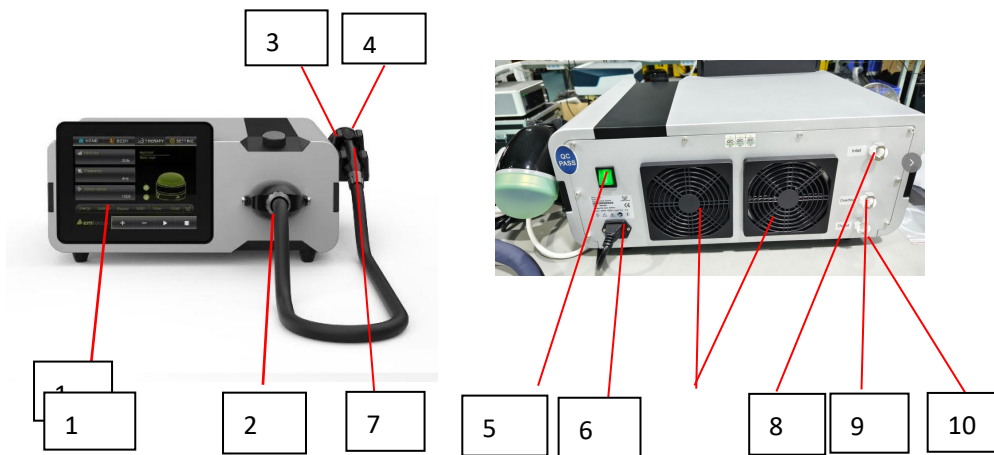


Self-locking water filling/drainage pipe*2



Power cord*1 (matching the plug and voltage for your country)

◆ Machine Structure



1. Screen
2. Applicator outlet
3. Shockwave applicator
4. Key switch
5. Power switch
6. Power socket
7. Cooling fans
8. Water inlet
9. Overflow
10. Water outlet

◆ Machine Initial Installation Guide

- ✓ How do I install the machine?
- ✓ How do I add and drain water from the machine?

Youtube channel guide video path:

<https://www.youtube.com/watch?v=-hb1vjwCY-0&t=107s>

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V. Technical Parameters and Certifications

◆ Technical Data

Power voltage	≤400 w	Pressure range	5-50 Mpa
Penetration depth	0-65 mm	Voltage	100-110V or 220-240V
Pressure range	0.06-0.45MJ/MM ²	Treatment protocols	29
Frequency	1-10 Hz	Applicator	1 pcs
Screen size	11.2 inches	Dimensions	50*38*28CM
Net weight	30 kg	Password	888888

◆ Related Certifications

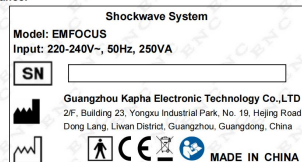


Certification of Conformity

EU-MEDICAL DEVICES DIRECTIVE-93/42/EEC
Registration No.: ENC2411188GZ85

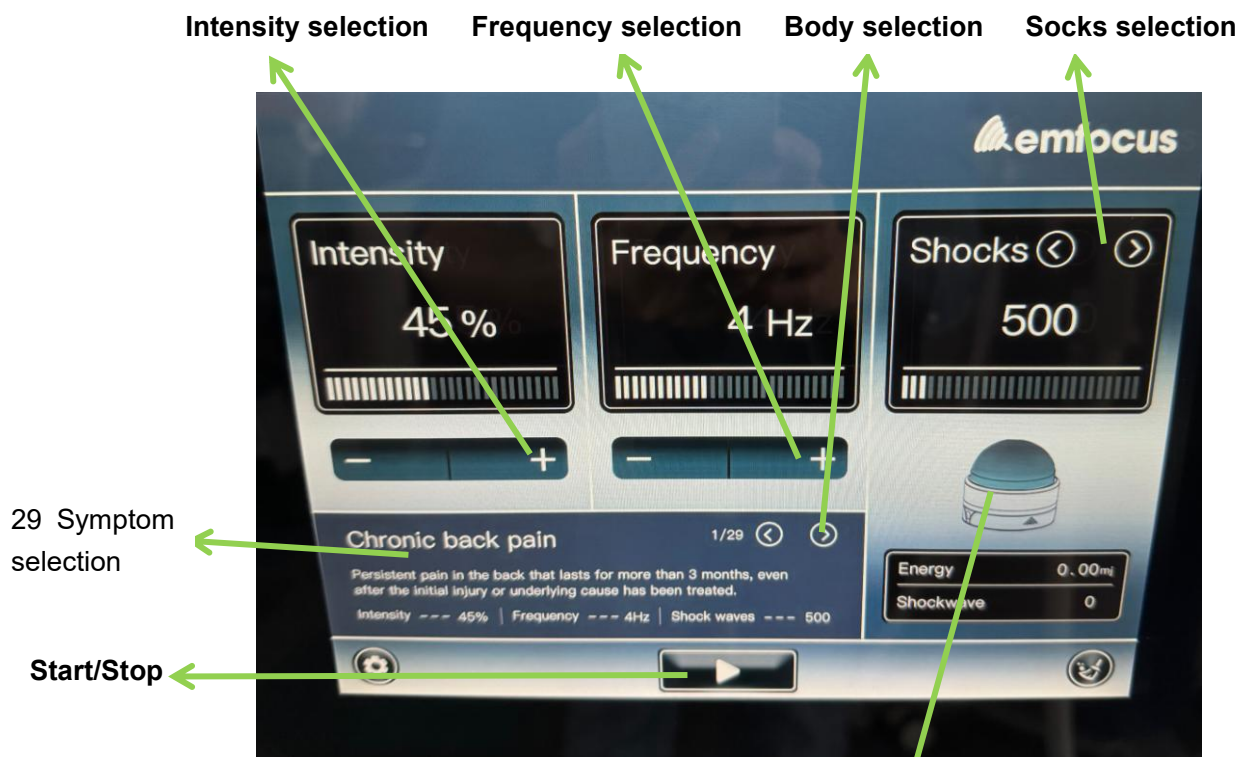
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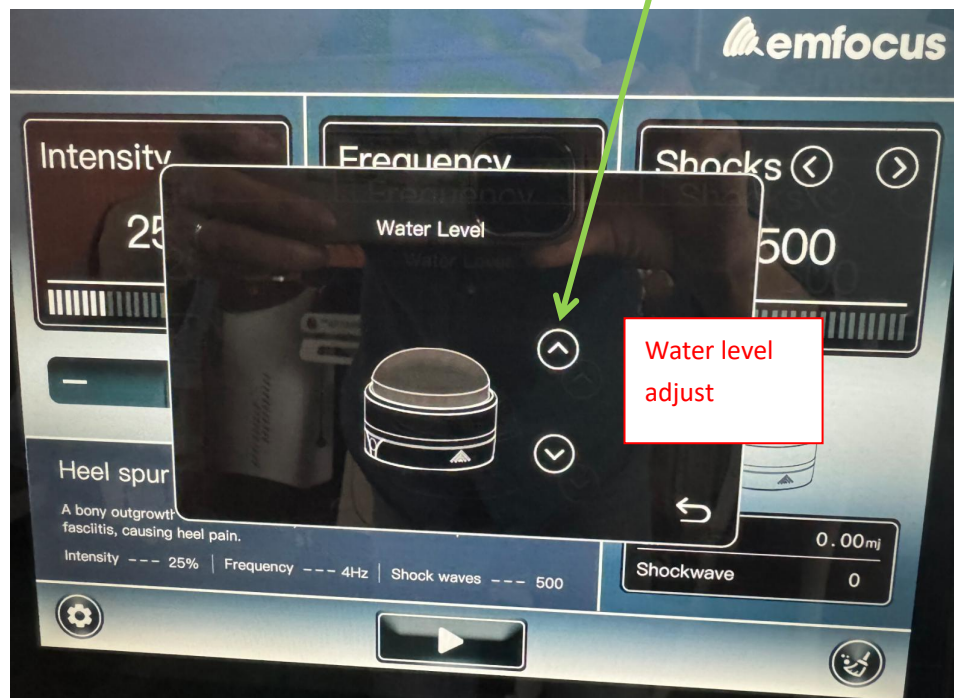


VI. EM FOCUS Software Function Introduction

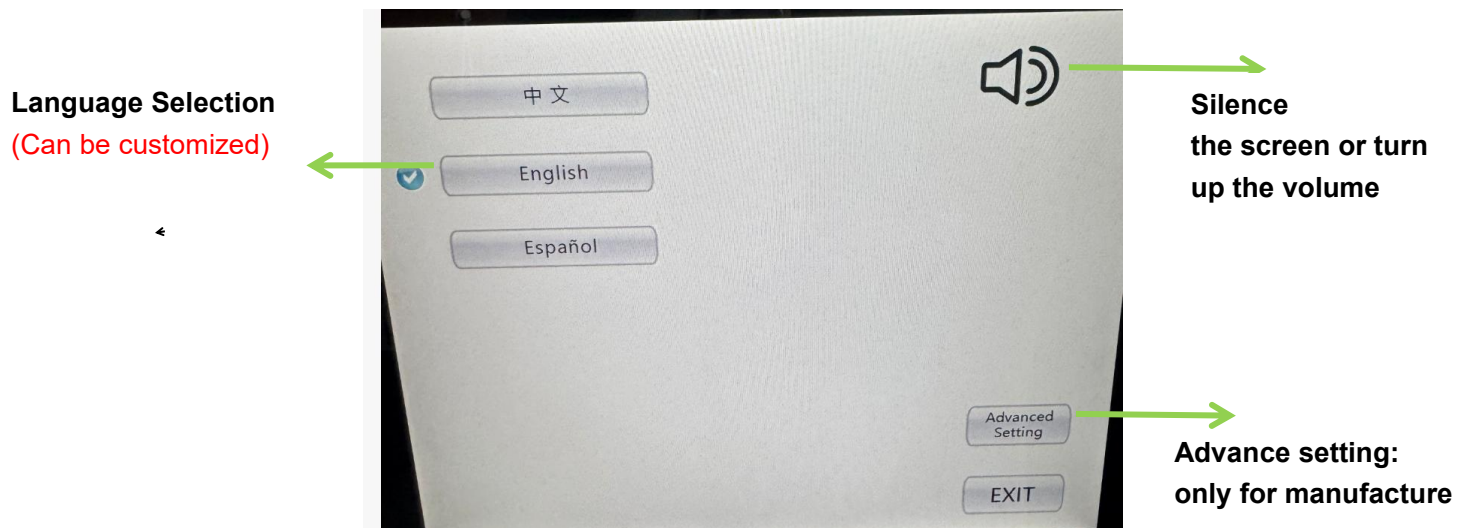
Program ①: Treatment selection page



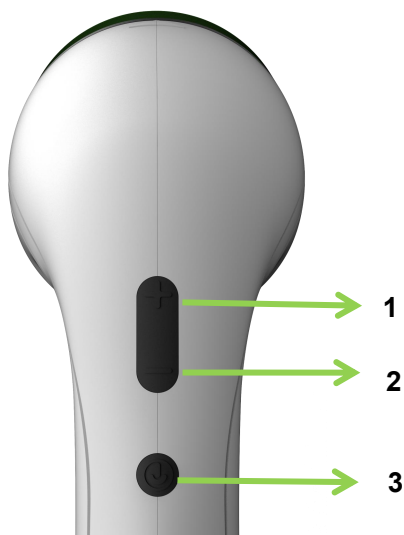
Program ②: Water level control page



Program ③: Setting page



Program ④: Function Button



1. (+) Button

Using the plus button, shock wave intensity can be increased

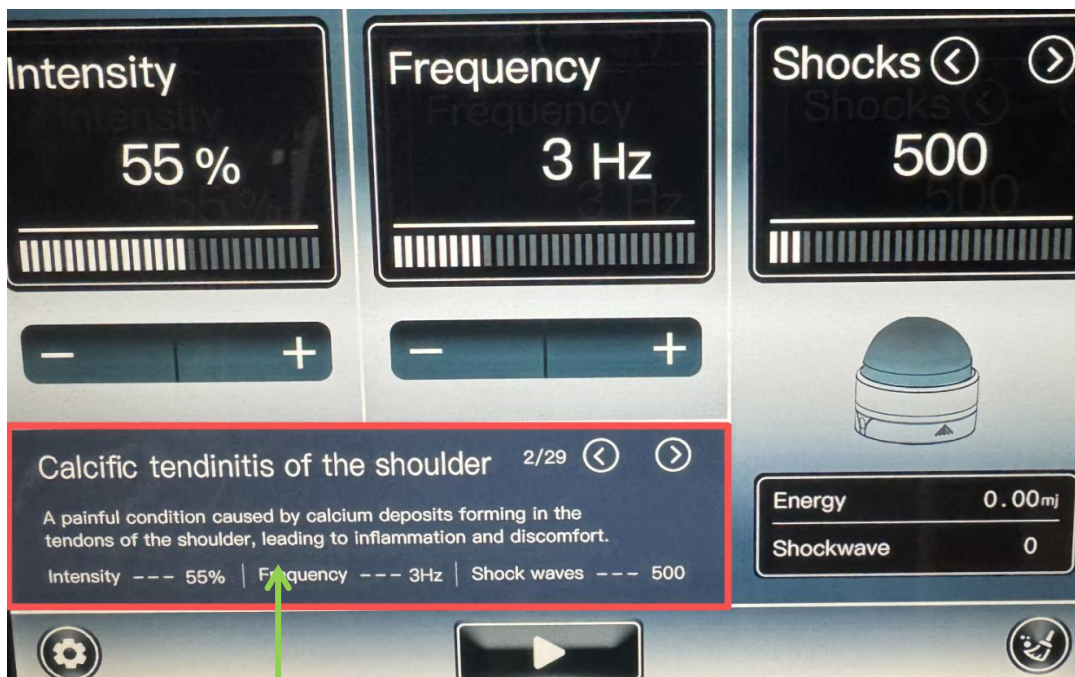
2. (-) Button

Using the minus button, shock wave intensity can be decreased

3. "Start" button

Using the "start" button to start or stop the treatment

VII. Detailed Explanation of 29 Treatment Protocols



29 common pain conditions and symptoms.

(This parameter was developed exclusively by Thailand's PT Medical Company and Kaphaphysio.)

Symptom	Intensity	Frequency	Shock waves	Application	Sessions
Hip pain	50%	3 Hz	500	Once a week	3-5
Jumper's knee	35%	4 Hz	500	Once a week	3-5
Tibial stress syndrome	40%	4 Hz	500	Once a week	2-5
Plantar Fasciitis	30%	4 Hz	500	Once a week	2-5
Heel spur	25%	4 Hz	500	Once a week	2-5
Chronic back Pain	45%	4 Hz	500	Once a week	3-5
Calcific tendinitis	55%	3 Hz	500	Once a week	3-5
Degenerative joint ankle	35%	4 Hz	500	Once a week	2-5
Wrist Tendonitis	25%	4 Hz	500	Once a week	2-5
Tennis elbow	30%	4 Hz	500	Once a week	2-5
Erectile dysfunction	10%	4 Hz	500	Once a week	3-10
Neck strain	20%	6Hz	1000	once a week	3-10
Upper trapezius strain	30%	4Hz	1500	twice a week	5-10
C-spondylosis	30%	4Hz	1500	twice a week	5-10
Upper trapezius spasm	40%	3Hz	2000	twice a week	5-10
Bicep tendinitis	30%	4Hz	1500	once a week	4-8
Rotator cuff injury	40%	5Hz	1800	twice a week	3-10
Golfer elbow	30%	6Hz	800	twice a week	3-10
CTS	20%	6Hz	500	twice a week	3-5
De Quervain's tenosynovitis	20%	6Hz	500	twice a week	3-5
L-spondylosis	50%	4Hz	2000	twice a week	5-10
HNP	40%	5Hz	1500	twice a week	5-10
Paravertebral syndrome	40%	4Hz	2000	twice a week	5-10
LBP	50%	3Hz	2000	twice a week	5-10
Piriformis syndrome	60%	3Hz	2000	twice a week	5-10
Hamstring shortening	30%	5Hz	1500	twice a week	5-10
OA knee	30%	6Hz	1000	twice a week	3-10
Calf muscle strain	40%	4Hz	1500	twice a week	3-10
Quadriceps spasm	30%	5Hz	1500	twice a week	3-10

◆ Overview of 29 Symptoms

✓ Lower Limb Conditions

Hip Pain

→ Symptoms: Deep aching pain in the groin or buttocks, worsened when standing after sitting for a long time

Jumper's Knee

→ Symptoms: Sharp pain below the knee, severe pain when jumping or walking down stairs

Tibial Stress Syndrome

→ Symptoms: Dull pain in the inner calf, especially during the first few steps of running

Plantar Fasciitis

→ Symptoms: Sharp pain in the heel, severe pain with the first step in the morning

Heel Spur

→ Symptoms: Persistent tenderness in the heel, a foreign body sensation when walking

✓ Spine Conditions

Chronic Back Pain

→ Symptoms: Persistent back pain, worsened by prolonged standing or sitting

L-Spondylosis

→ Symptoms: Lower back stiffness, snapping and pain when turning

HNP (Hybrid Disc)

→ Symptoms: Numbness and pain radiating to the lower limbs, aggravated by coughing

Paraspinal Syndrome

→ Symptoms: Muscles on both sides of the spine, severe pain with pressure

LBP

→ Symptoms: Dull pain in the lower back, limited bending

C-Spondylosis

→ Symptoms: Neck and shoulder stiffness, numbness in the arms

✓ **Upper Limb Disorders**

Calcific Tendinitis

→ Symptoms: Sudden, severe shoulder pain, inability to sleep on one's side at night

Wrist Tendonitis

→ Symptoms: Swelling on the back of the wrist, weakness in making a fist

Tennis Elbow

→ Symptoms: Burning pain on the outside of the elbow, difficulty wringing a towel

Golfer's Elbow

→ Symptoms: Soreness on the inside of the elbow, especially when lifting

Rotator Cuff Injury

→ Symptoms: Weakness raising the shoulder, stabbing pain at night

Biceps Tendinitis

→ Symptoms: Sharp pain in the front of the shoulder, worse when flexing the elbow

✓ **Neuromuscular Disorders**

Piriformis Syndrome

→ Symptoms: Deep soreness and pain in the buttocks, radiating to the sciatic nerve

Hamstring Shortening

→ Symptoms: Tightness in the posterior thigh, limited forward bending

Quadricep Spasm

→ Symptoms: Sudden, cramping pain in the front of the thigh

Calf Muscle Strain

→ Symptoms: Tearing pain in the posterior calf, worsened by standing on tiptoes

Upper Trapezius Strain

→ Symptoms: Soreness and stiffness at the neck-shoulder junction, limited head rotation

Upper Trapezius Spasm

→ Symptoms: Sudden stiffness in the shoulder, accompanied by headache

✓ **Joint Degeneration**

Degenerative Joint Ankle

→ Symptoms: Ankle swelling, pain climbing stairs

OA Knee

→ Symptoms: Knee weakness, severe pain when standing after sitting for a long time

✓ **Nerve Compression**

CTS (Carpal Tunnel Syndrome)

→ Symptoms: Finger numbness (especially at night), decreased grip strength

De Quervain's Tenosynovitis

→ Symptoms: Swelling on the thumb side of the wrist, severe pain when opening the thumb

✓ Specific Conditions

Erectile Dysfunction

Introduction to Erectile Dysfunction (ED):

Penile erection is a complex phenomenon which implies a delicate and co-ordinated equilibrium among the neurological, vascular and the smooth muscle compartment.

Erectile dysfunction (ED) can be conceptualized as an impairment in the arousal phase of the sexual response and is defined as the consistent or recurrent inability to attain and/or maintain penile erection

sufficient for sexual satisfaction, including satisfactory sexual performance.

Erectile Dysfunction may affect physical and psychosocial health and may significantly impact the quality of life of sufferers and their partner's.

→ Symptoms: Vascular ED requiring medical diagnosis, with pelvic circulatory impairment

Neck Strain

→ Symptoms: Cracking when turning the neck, accompanied by dizziness and nausea

◆ Analysis of The Clinical Mechanism of Action, Efficacy, and Key Points of Operation of FSWT for Major Types of Diseases

1. Neuromuscular Pain (e.g., piriformis syndrome, upper trapezius spasm)

High-frequency oscillatory waves (5-15Hz) → Destroy oversensitive myofascial trigger points, stimulate the release of substance P → Block pain signal transmission.

Clinical Effectiveness: Single treatment relief rate: 70% for acute spasms, 1-2 times/week for 3 weeks.

Key Points: Penetration depth: 40-60mm (reaching deep muscle), energy range (0.12-0.25mJ/mm²), avoid muscle spasms.

2. Tendon Enthesis Diseases (e.g., Tennis Elbow, Plantar Fasciitis)

Cavitation Effect → Fragmentation of Calcified Deposits (especially for Calcific Tendinitis), Promotes TGF-β1 Secretion → Stimulates Collagen Remodeling

Clinical Results: Calcification Clearance Rate: 86% (Verified by Ultrasound After 4 Treatments), Heel Pain VAS Score Reduction: 5.2 → 1.8.

Key Points: Focus Diameter: 4mm (Precise Coverage of Tendon Insertion), Pulse Frequency: 2000-2500/spot (≤0.28mJ/mm²)

3. Joint Degeneration (e.g., OA knee, ankle degeneration)

Mechanical stress transmission → Activation of the chondrocyte MAPK pathway. Inhibition of the IL-1β inflammatory cytokine → Reduction of joint effusion.

Clinical Effect: 35% improvement in knee WOMAC functional score (after 3 treatments), pain relief lasting 6-9 months.

Key Points: Avoid cartilage surfaces, focusing on osteophytes, 0.15mJ/mm² at 8Hz (to avoid thermal damage to the joint capsule)

4. Spinal Pain (e.g., HNP, LBP)

Focusing on paraspinal muscle trigger points → Relieves compensatory muscle spasm, enhances epidural blood flow → Reduces nerve root edema. Clinical Results: Sciatica relief rate: 78%. Treatment contraindications: Direct irradiation of the spine (focusing 2 cm from the paravertebral column) is strictly prohibited.

Key Operational Tips: Depth setting: 50-70 μm , diffuse (5-point fan-shaped coverage, 800 pulses per pain point)

5. Special Indications (e.g., ED, De Quervain's tenosynovitis)

ED Treatment Mechanism: Stimulation of VEGF expression in the corpus cavernosum → Increased neovascularization density by 40%.

Parameters: 0.09 mJ/mm^2 + 3000 pulses (perineal focus)

Risk of ED (European Association of Urology)

Erectile Dysfunction shares both unmodifiable and modifiable common risk factors with CVD (e.g., obesity, diabetes mellitus, dyslipidemia, metabolic syndrome, lack of exercise, and smoking). The association between ED status and age, diabetes mellitus duration, poor glycaemic control, body mass index (BMI), obstructive sleep apnoea, hyperhomocysteinemia and chronic liver failure associated with hepatitis B has also been confirmed. An association between ED status and vitamin D deficiency has also been reported.

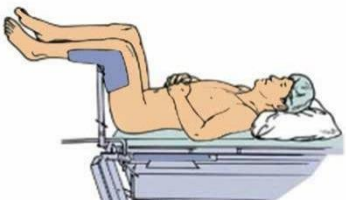
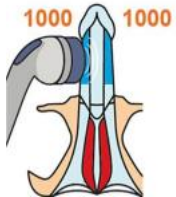
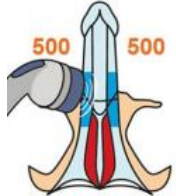
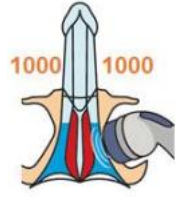
Benefits of ESWT for Erectile Dysfunction

Disease modifying treatment, induces angiogenesis to restore erectile function

- No contraindication for patients on nitrates/ nitroglycerin.
- Non-invasive treatment: in-office procedure with no need for anesthesia.
- 6 or 12 total sessions (1, 2 or 3 sessions per week), depending on ED severity.

- Clinical improvement may begin from the 6th session, while further improvement is expected up to 3 months post-treatment.
- Treatment can be successfully repeated after 6 months few side effects.

Em FOCUS - for ED Treatment Protocol

Patient Positioning: The lithotomy position, or supine frog-leg position, allows for easy access to the penile crura.	Shockwave Coupling: Apply ultrasound gel to the applicator and patient. Ensure no bubbles are trapped in the gel	Intensity: Use 10% intensity
		
Shaft: Apply 1000 SW each to left and right corpus cavernosa. Extend the penis, and move the applicators lowly along the shaft to treat the entire length of the shaft.		
Hilum: 500 SW each to the left and right corpus cavernosa.		
Root: If not in lithotomy position, bend the patient's leg to access the crus. Apply 1000 SW each to the left and right crus. Obese patients may require higher energy levels. Misalignment of the applicator onto the pelvic bone will cause pain.		

Immediate Side Effects

It is normal to experience tingling sensations or mild tenderness. If moderate or severe pain is reported, stop treatment immediately. Check that the applicator is not against the pelvic bone.

VIII. Operation, Contraindications and Precautions

◆ Recommend Steps

Take “Chronic back pain treatment” as an example:

- (1) Enter the password “888888”
- (2) Choose the “Chronic back pain treatment” (intensity, frequency and shocks have been preset). We can also change the parameters based on the specific needs. Use the suitable treatment head based on the size of the treatment area.
- (3) Apply the gel to the back
- (4) Click on “Start” in the interface
- (5) Push the treatment head against the back
- (6) Press the “start” button on the shockwave applicator
- (7) Move the handle slightly

After the preload shocks finish, the handle will stop automatically.



1. Fill water into system



2. Fill water into bladder



3. Choose operation part



4. Set depth of shockwaves



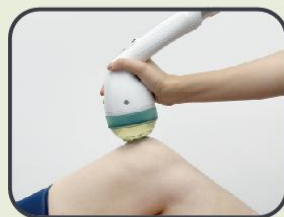
5. Target trigger points



6. Load shockwaves



7. Apply gel before treatment



8. Start treatment



9. Clean the bladder

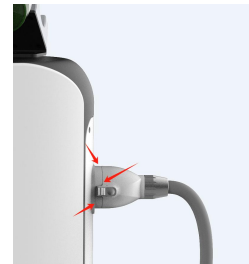
◆ Precautions

About Installation

Note: When the machine is power on, we must not install the shock wave applicator and also we can not remove handles from their outlets.

a.The machine has changeable applicators. Before starting the machine, the applicator **MUST BE** attached to the device firmly. If there is no applicator attached to the device and we start the machine, the energy has no way to release and will burn the circuit board.

This misuse to cause the problem **WILL NOT BE** included into the warranty. Please consult the sales person to get the video guidance about how to install the applicator and change the applicator.



b.Because the machine adopts water system, we need to fill in distilled or purified water into the machine when we receive the device. For maintenance, we need to change the water every month. Please consult the sales person to get the video guidance about how to add water and change water.

◆ Tips during using the machine

Adjust the water level of the water bladder

- During the water level adjustment process, press the water bladder appropriately to ensure water pressure balance and ensure stable energy output and deep penetration during the treatment process.
- At the end of treatment, lower the water level in the water bladder and observe whether the water level in the water bladder is stable before shutting down;
- During treatment, a GEL medium must be used to ensure that the energy can stably and deeply penetrate into the treatment area.



Without the gel, the power will be reduced by 30%

◆ **Contraindication**

- Pregnancy: Risk to the fetus.
- Active infection at the treatment site.
- Malignant tumors in the treatment area.
- Blood clotting disorders or use of anticoagulants.
- Presence of a pacemaker or other electronic implants.
- Open wounds or skin lesions at the treatment site.
- Vascular diseases present in or near the treatment area
- Local infections in the treatment area
- Around malignant or benign tumours
- Directly on cartilage surfaces or near the small facet joints of the spinal column
- Directly over implanted electronic devices such as pacemakers, analgesic pumps, etc.
- In areas, in which mechanical energy in the form of vibrations may lead to tissue damage such as metal implants after a fracture

◆ **Daily Maintenance**

- After the treatment, clean the gel of the bladder.
- Change the purified or distilled water every 2 weeks.

VIX. Q&A about EM FOCUS

Question 1: How to fill in water to the machine?

Answer: Please refer to the video instructions when filling water

After filling water into the machine, we need to change the water every 2 weeks. The aim is to maintain the water system. Drain away the water first and then fill in water again. And the water should be distilled or purified water.

Question 2: Why should I fill in water into the machine?

Answer: Because the machine adopts water system and before the delivery we will drain away water to avoid the water coming out during the international transportation. So if you need to move it to a far workplace, you also need to drain away water in the machine and put it into the aluminum box with foam for protection.

Question 3: What kind of water should I fill into the machine and why?

Answer: **Distilled water or purified water** because there is no waste in such water.

The waste of the normal water may produce incrustation and damage the water-cooled system.

Question 4: Do I need to replace the gel pad?

Answer: No need to replace, this is the upgraded focus shockwave. In the past, we need to change different heads/gel pads to control the penetration depth. According to the doctors' feedback, it is not so convenient and it costs time. So the R&D team make improvement. In the EM FOCUS, we can control the penetration depth by controlling the water level.

-Higher water level, less penetration

-Lower water level, deeper penetration

One applicator can make different penetration.

Question 4: How often should I replace the EM FOCUS applicator with a new one?

Answer: Lifespan and cost of the consumable applicator

Lifespan: 500,000 shocks for each applicator

Price: 699USD

Profits One applicator can bring \$6,000-\$45,000 in profit, which depends on the shots you use for each treatment and how much you charges. You can see the ROI chart contact your sales.

Question 5: How can I combine the existing radial shockwave and EM FOCUS (FSWT)?

Answer:If you have the radial shockwave, you can also combine it with focus shockwave. This will make treatment more effective and efficient.

The focus shockwave is precise and penetrates deeper. Use it to target trigger points.

The radial shockwave has higher frequency and the energy coverage area is larger. It can be used to relax surrounding muscles.

Question 6: What about treatment protocols? Does it have protocols?

Answer:Yes, the standard software has 11 protocols. The upgraded software has 29 treatment protocols. We can provide you with free upgrades. The treatment protocols come from a medical team. They tested the EM FOCUS for half of year and provide us with their protocols.

You can start the treatment by taking simple steps.

After choose the indication and the intensity, frequency, and number of shocks are preset. There is corresponding information on symptom description and recommendations on treatment duration and intervals.

Question 7: About the warranty period and after-sales service?

Answer: Warranty——1 year for the host machine, 6 months for spare parts and lifetime technical support. Not include the consumable.

Because we only provide the device that we produce and all the structures are designed by our own technical team, no matter what problem you meet during the operation, we can provide the timely solution within 24 hours.