

# ORTHOMERICA® CTM ORLANDO KAFO/HKAFO ORDER FORM

6333 North Orange Blossom Trail, Orlando FL 32810 • www.orthomerica.com • phone 800-446-6770 • fax 800-638-9259

PATIENT INFO (PH)

LAST NAME/ID \_\_\_\_\_ FIRST NAME \_\_\_\_\_

AGE \_\_\_\_\_ HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_ SEX \_\_\_\_\_

DIAGNOSIS \_\_\_\_\_

PO# \_\_\_\_\_

REMARKS: \_\_\_\_\_

SHIPPING INFORMATION

PRACTITIONER \_\_\_\_\_ PHONE \_\_\_\_\_ FAX \_\_\_\_\_

FACILITY \_\_\_\_\_

SHIP TO ADDRESS \_\_\_\_\_

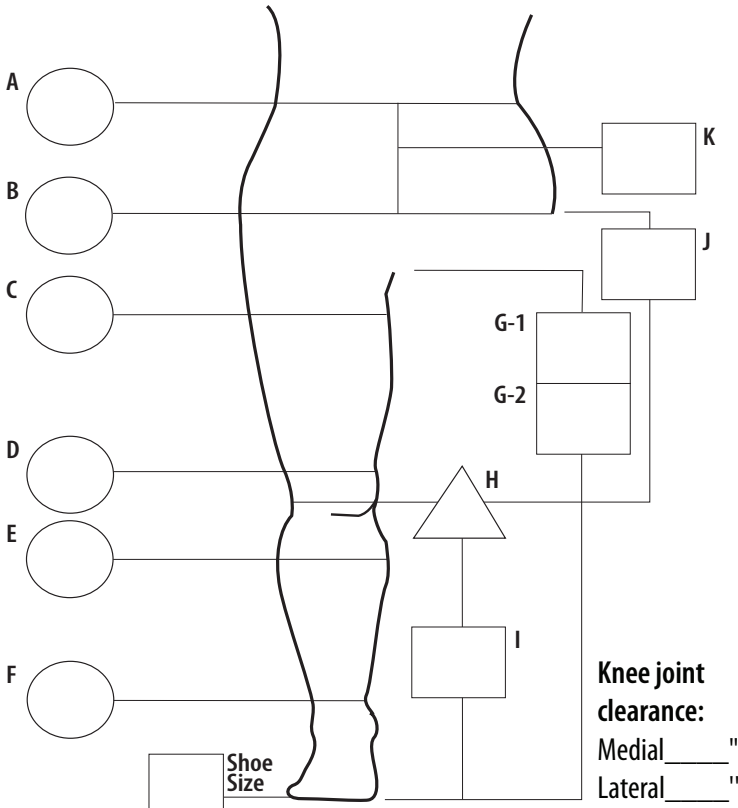
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Ground  2 Day Air  Overnight  Other: \_\_\_\_\_

**Need by:** \_\_\_\_\_

BILL TO ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_



- A = Waist Circumference
- B = Hip Circumference
- C = Proximal Thigh Circ.
- D = Distal Thigh Circ.
- E = Largest Calf Circ.
- F = (Just above) Ankle Circ.
- G = Length, Perineum to Floor  
 .1 Anatomical  
 .2 Actual Medial Brace
- H = Caliper Meas., Knee Center (M/L)
- I = Length, Knee Center to Floor
- J = Length, Trochanter to Knee Center
- K = Waist to Trochanter

**STYLE**

- HKAFO  KAFO  
(KAFO only requires dimensions C-I)
- Left  Right

**PELVIC SECTION**

- Newport® 3  Newport® 4
- Newport® MC (CTM 2 strap upgrade charge)
- Newport® Jr.

**HIP JOINTS**

- Virtual® 5
- Virtual® (adj. ab/adduction, flexion/extension)
- Following WILL NOT work with Newport 4:**
- Adj. ROM (adj., flexion/extension, 15° abduction)
- Drop Lock\*

**THIGH COMPONENTS**

- Ischial  NSNA

**KNEE JOINTS**

(Special order knee joints available—please call for more info)

- Free Motion ( 1/8"  3/16"\*)
- Drop Lock ( 1/8"  3/16"\*)
- Adj. ROM\* ( 1/8"  3/16")

**TIBIAL COMPONENTS**

- Orlando Tibial
- Orlando Lite Tibial section  
(with bilateral uprights)
- Orlando TPFx

**SHOE INSERTS**

- Free Motion
- Adjustable Single Axis  
(Extended footplate, locks at 90° or has free ROM)
- Solid Ankle
- PRAFO\*

**LINER\***

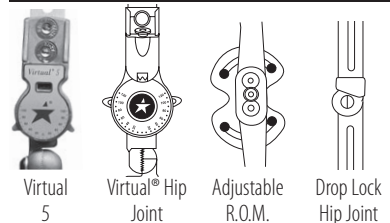
- Aliplast ( 1/8"  3/16"  1/4")
- CoolFoam®

**FRACTURE SOCKS (adult)**

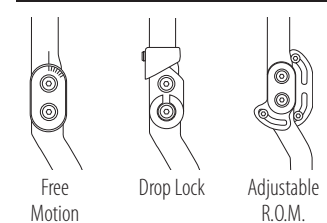
- Yes, Quantity \_\_\_\_\_
- No

**\* Incurs upgrade charge**

**Hip Joints**



**Knee Joints**



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