

BILL TO:

Account Name _____
 Account # _____ P.O. # _____
 Contact _____ Phone _____
 Address _____
 City _____ State _____ Zip _____

SHIPPING INFORMATION: Same as "BILL TO"

Name _____
 Address _____
 City _____ State _____ Zip _____
 UPS Red (overnight) UPS Blue (2 day air)
 UPS 3 Day UPS Ground
 Other _____

PRODUCT SELECTION:

Frame: DEFIANCE® III DEFIANCE®

Strapping:	Hinge:
<input type="checkbox"/> ACL	<input type="checkbox"/> Adjustable OA
<input type="checkbox"/> ACL	<input type="checkbox"/> FourcePoint™
<input type="checkbox"/> ACL	<input type="checkbox"/> Female Fource™
<input type="checkbox"/> ACL	<input type="checkbox"/> Standard Low Profile
<input type="checkbox"/> ACL	<input type="checkbox"/> Standard Slide Shield
<input type="checkbox"/> PCL	<input type="checkbox"/> Adjustable OA
<input type="checkbox"/> PCL	<input type="checkbox"/> Standard Low Profile
<input type="checkbox"/> PCL	<input type="checkbox"/> Standard Slide Shield
<input type="checkbox"/> CI	<input type="checkbox"/> Adjustable OA
<input type="checkbox"/> CI	<input type="checkbox"/> Standard Low Profile
<input type="checkbox"/> CI	<input type="checkbox"/> Standard Slide Shield
<input type="checkbox"/> CI	<input type="checkbox"/> DropLock

OA Affected Compartment: Medial Lateral
 Degrees of Correction: _____ (1° to 7°) (Standard = 3°)

FLAT COLORS:

<input type="checkbox"/> Black	<input type="checkbox"/> Red	<input type="checkbox"/> Purple	<input type="checkbox"/> Pink
<input type="checkbox"/> White	<input type="checkbox"/> Blue	<input type="checkbox"/> Light Blue	<input type="checkbox"/> Yellow
<input type="checkbox"/> Green	<input type="checkbox"/> Orange	<input type="checkbox"/> Tan	

METALLIC COLORS:

<input type="checkbox"/> Black	<input type="checkbox"/> Red	<input type="checkbox"/> Purple	<input type="checkbox"/> Pink
<input type="checkbox"/> Navy	<input type="checkbox"/> Dark Blue	<input type="checkbox"/> Bright Blue	<input type="checkbox"/> Gold
<input type="checkbox"/> Green	<input type="checkbox"/> Orange	<input type="checkbox"/> White	<input type="checkbox"/> Silver

MULTIPLE COLORS:

Thigh Frame _____
 Calf Frame _____
 Fade (flat colors only): Yes No

GRAPHICS (extra charge):

<input type="checkbox"/> Tiger Red	<input type="checkbox"/> Tiger Orange	<input type="checkbox"/> Leopard Blue
<input type="checkbox"/> Butterfly	<input type="checkbox"/> Splash	<input type="checkbox"/> Snake
<input type="checkbox"/> Stars & Stripes (flat)	<input type="checkbox"/> Stars & Stripes (metallic)	<input type="checkbox"/> Camouflage

DONJOY®

#1 in Knee Bracing

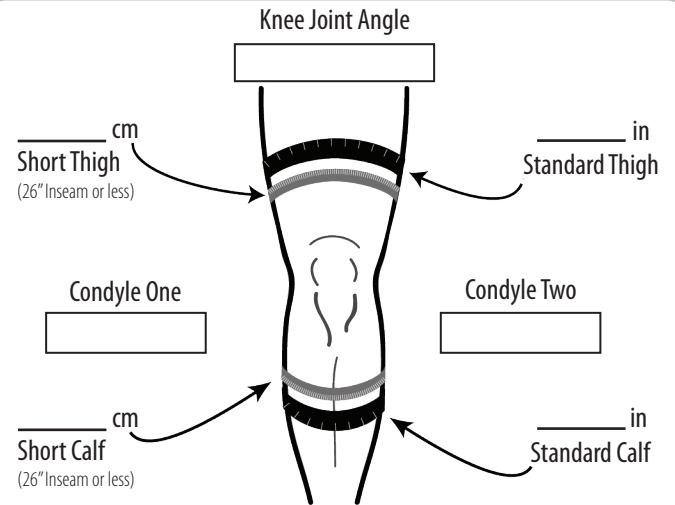
1430 Decision Street
 Vista, CA 92081-8553 USA
 Tel 800.336.6569
 www.DonJoy.com

FAX TO: (800) 936-6569**For Office Use Only:**

Order Date: _____
 Taken By: _____
 Order #: _____
 Brace #: _____

PATIENT INFORMATION:

Name _____
 Age _____ Height _____ Weight _____
 Knee Measurements: Right Left Reverse
 Measured By: _____
 New Brace Remeasurement/Repair Refurbish



Note: Check both short and standard measurements for ski boot option. Best to measure with Ski Boot On.

Thigh Contours: 1. _____ 2. _____ 3. _____ 4. _____ 5. _____

Calf Contours: 1. _____ 2. _____ 3. _____ 4. _____ 5. _____

OPTIONS (*standard option on DEFIANCE® III):

- Sili-Grip Strap Pads
- Suede Liners / Pads
- Chamois Liners / Pads
- Pneumatic Liners / Pads (not available on DEFIANCE® III)
- Swooping Thigh (not available on short thigh)*
- Swiveling Strap Tabs*
- Reinforced Carbon Composite Frame
- Square Velcro Strap Ends
- Installed Extension Stop: 0° 10° 20° 30° 40° (circle one)
- Installed Flexion Stop: 45° 60° 75° 90° (circle one)
- Neoprene Suspension Strap Kit

ACCESSORIES (extra charge):

- Tru-Pull® Advanced Attachment
- Full Extension Lockout Stop
- Lycra® Undergarment
- Neoprene Undergarment
- Sports Cover
- Pneumatic Condyle Kit
- Air Condyle Pads
- Floam™ Condyle Pads
- Impact Guard
- Calf Pinch Guard
- Atrophy Pad Kit
- High Strength Stainless Steel Gears

For further instructions, please refer to the CCMII Mark II instruction video and instruction card included with the instrument.

C A U T I O N !
 FEDERAL LAW (U.S.A.) RESTRICTS THIS DEVICE TO SALE BY OR ON THE ORDER OF A LICENSED HEALTH CARE PROFESSIONAL

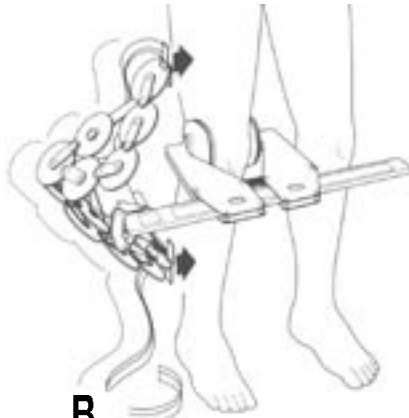
Custom Contour Measuring Instrument - Mark II Use Instructions

NOTICE: For optimum long term fit of the DEFIANCE® or DEFIANCE® III, measurements should be taken when there is no edema or atrophy present.

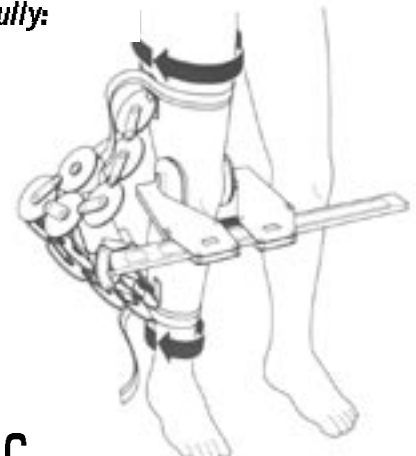
To apply the CCMII instrument to the involved leg, follow steps A, B, & C carefully:



A
 Have the patient stand, feet shoulder width apart and knees flexed slightly. Do not allow the knees to flex beyond 15°. Apply the instrument directly to the bare leg.



B
 Push the circumference pads firmly against the lateral side of the leg. The pads should lie midline and flush against the thigh and lower leg.



C
 Wrap the standard measuring tapes around the leg and fasten, ensure the tapes are parallel with the floor. The tapes should be just snug, and not compressing tissue.

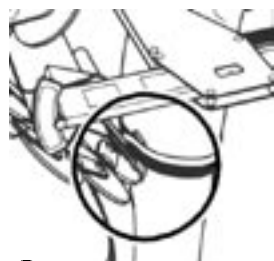
With the appropriate measuring tapes unfastened and hanging, distract the condyle pads away from each other, and position on the patient's knee. Once applied, the spring of the CCMII should align with the top of the kneecap and the condyle pads slightly posterior to midline.

NOTE: If using Short Thigh/Calf measuring tapes, you should also attach and secure the standard measuring tapes to help support the CCMII.

Follow each step carefully and record your data as indicated on the order form:



1
 Standard: Thigh circumference measurement from tape.



2
 Standard: Calf circumference measurement from tape.



3
 Short: Thigh circumference measurement from tape.
NOTE: Leave Standard Tapes in place.



4
 Short: Calf circumference measurement from tape.
NOTE: Leave Standard Tapes in place.



5
 Knee joint angle.



6
 Knee width at the condyle pads. Keep pads firmly pressed against the knee.



7
 Wrap the thigh contour gauge around the anterior thigh, parallel with the floor being careful not to compress tissue. Record the readings in each dial window starting with dial #1.

NOTE: Dials 4 & 5 may be pulled away from the leg once a contour has been registered. This will make it easier to read.



8
 Repeat the procedure at the posterior calf.