E-MAG Active
Stance Control KAFO
Patient Data and Order Form

For clinical questions call 800.328.4058.
NOTE: Training required

Shipping Options:
- Next Day
- Ground
- 2-Day
- Other __________

Gottock recommends a corrected negative wrap/cast for best results.

Knee Joint Flexion
(Patient must be cast in 5° knee flexion)
- 5°
- 7.5°
- 10°

Specify
- Left
- Right
- Centimeters

Fitting Stage
- Test Orthosis
- KAFO Laminated with Double Action Ankle Joint
- KAFO Laminated with Solid Ankle
- KAFO Laminated with Carbon Ankle Seven
- KAFO Prepreg with Double Action Ankle Joint
- KAFO Prepreg with Solid Ankle

Check orthosis required at additional cost

Fabrication Specifications - Correction to Cast
- Ankle
  - Leave as Casted
  - To 90°
  - To ____° Plantarflexion
  - To ____° Dorsiflexion
  - Valgus/varus to neutral
- Knee
  - Leave as Casted
  - To ____° Flexion
  - Flexion (may not exceed 15 degrees)
  - Correct to neutral
  - Valgus/varus to neutral
  - Valgus/varus fixed

Liner
- Bocklite
- SpaceTex
- Microcell Puff

Liner Thickness
- 3mm
- 4mm
- 5mm
- 6mm
- Other

Finish
- Unfinished matte carbon design
- Finished satin carbon design
- High gloss clear-coat carbon finish (additional time and charges may apply)
- Fabric design; specify: ____________

* Based on Kendall and Kendall scale presented in "Muscle Testing and Function," Williams and Wilkins Co., ©1977. Five point grading system: 5 = Motion against gravity, with full resistance; 4 = Motion against gravity, with some resistance; 3 = Motion against gravity, with no resistance; 2 = Motion, with gravity omitted; 1 = Some muscle contractility with no joint motion; 0 = No muscle contractility.

** Indicates whether the device accommodates the degree of corrected joint deviation, from anatomical neutral position.
Medial Trim Line to heel

Lateral Trim Line to heel

Knee Center Line to heel

Ankle Center Line to heel

Bottom of Heel

Heel Height

Special Instructions/Comments

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________