



# V-VAS™ Adult and Pediatric KAFO Orthometry Form

Fabricated and distributed by Anatomical Concepts, Inc.

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PO# \_\_\_\_\_ Practitioner's Email Address \_\_\_\_\_

Ship to: \_\_\_\_\_ Bill to: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Patient's Name: \_\_\_\_\_ Practitioner Name: \_\_\_\_\_

Ht. \_\_\_\_\_ Weight \_\_\_\_\_ Age \_\_\_\_\_ Practitioner Signature \_\_\_\_\_

Diagnosis: \_\_\_\_\_ Phone #: \_\_\_\_\_

Comments \_\_\_\_\_

Ship Via:  Ground  Next Day Air  Next Day Air Saver  2<sup>nd</sup> Day  3 Day

**Fill out all information listed or case may be delayed**

CIRCLE PREFERENCE  
R / L / Bilateral

WANT TO CORRECT (PLEASE CIRCLE)  
Genu Varum / Genu Valgum / Tibia Vara(Blount's)  
R / L / Bilateral

**ANY SPECIALTY REQUESTS NOT LISTED ON OUR FORM, PLEASE CALL TO SPEAK WITH OUR ORTHOTIST PRIOR TO SENDING YOUR CASE**

**V-Vas™ Pediatric KAFO STANDARD DESIGN & COMPONENT ITEMS**

- 1/8" Standard Poly Propylene
- 1/8" x-firm volara (Aliplast) thigh & calf liner
- Tamarack® ankle joints
- Posterior opening thigh
- Anterior opening calf
- Growth adjustments on all four uprights Full
- foot trim line
- 1 1/2" Black Straps

•**Patient Ankle Joint Condition:**  
(Sagittal & Coronal Plane)  
Fixed  Flexible

•**Patient Knee Joint Condition:**  
(Sagittal & Coronal Plane)  
Fixed  Flexible

**V-Vas™ Adult KAFO STANDARD DESIGN & COMPONENT ITEMS**

- 3/16" Black Poly Propylene
- Removable Terry cloth thigh & calf liner
- Medial and Lateral Heavy Duty Oklahoma ankle joints
- Posterior opening thigh & calf
- Sulcus foot trim line
- Wrap around neoprene thigh strap
- 1 1/2" Black Calf Straps
- Medial Chafe(s)

**ADDITIONS to STANDARD DESIGN**

Transfer: 1st Choice \_\_\_\_\_ 2nd Choice \_\_\_\_\_

Step Lock Knee Joint (Circle Manufacturer : Becker / Fillauer) Opposite V-Vas™  
Adjustable Joint. Part# \_\_\_\_\_

Drop Lock Knee Joint (Manufacturer: Becker) Opposite V-Vas™  
Adjustable Joint. Part# \_\_\_\_\_

\*Included Raw Material: \_\_\_\_\_

**MODIFICATIONS TO STANDARD DESIGN**

Plastic Thickness: \_\_\_\_\_

Plastic Type: \_\_\_\_\_

Anterior Thigh Opening

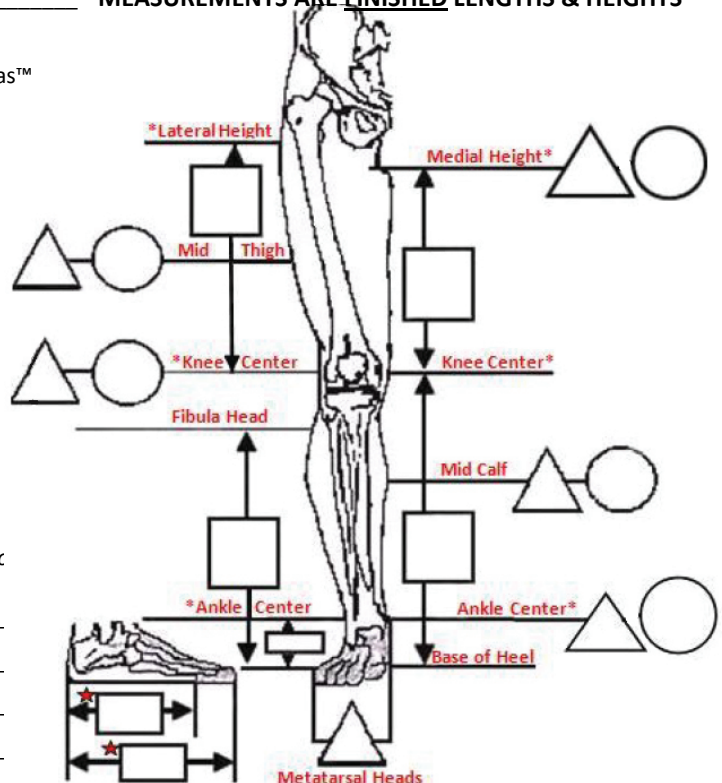
Posterior Calf Opening- (**NOT recommended for excessive lateral knee thrust**  
Along with internal or external rotation of the tibia and or knee hyperextensic control)

High medial and lateral foot trim lines: \_\_\_\_\_

Club foot trim line: \_\_\_\_\_

Other: \_\_\_\_\_

**\*MANDATORY MEASUREMENTS ARE FINISHED LENGTHS & HEIGHTS**



**Casts will be saved for 30 days unless otherwise requested.**

**CUSTOM MADE ORTHOSES ARE NOT RETURNABLE FOR CREDIT**

**Please read casting instructions entirely and update outdated forms accordingly.**

**Contact our on-site orthotist prior to sending you cast impressions if there are any unique patient clinical/technical questions or concerns along with material or modification changes from our standard design criteria listed on the orthometry form. Failure to do so may affect the product warranty and/or turnaround time.**

*For Treatment of Osteoarthritis (OA), Degenerative Joint Disease (DJD), Genu Varum (Bowleg), Genu Valgum (Knock Knee), Knee buckling from pain or musculature impairment, Gross medial – lateral instabilities*

## Casting Tips (for custom to mold options)

1. Take a non weight bearing mold with the leg in a corrected position.
2. It is helpful to align the leg in the frontal and sagittal plane in the most pain free position (slight distraction may be beneficial).
3. Place the knee in a comfortable fully extended position (as possible).
4. It is advisable to complete all of the measurements.
5. Place the cast removal cutting strip on the posterior aspect of the leg if possible.
6. If possible cast impression should be a minimum of 10" above and below the knee center.
7. It is REQUIRED to outline the border of the patella with an indelible pencil and locate and mark the knee center.
8. When casting the patient with either plaster or fiberglass cast wrap, please do so in a manner that will not distort soft tissue or bony landmarks. Simply a light overlap capturing the patients true anatomical shape is all that would be necessary to provide a more accurate fitting device.
9. Please create indentation to cast impression on both sides of the patellar tendon with fingers on order to locate the center of the patella accurately.
10. Please tape or staple cut seam to prevent distortion to cast impression during shipping.