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: CCMI Mark III

Frame: ☐ DEFIANCE® III ☐ DEFIANCE®

Hinge:

☐ FourcePoint™ (ACL only)

☐ Female Fource™ (ACL only)

☐ Standard (D III)

☐ Standard Slide Shield

☐ DropLock (CI only)

☐ Elbow (CI only)

☐ Adjustable OA

Strapping:

☐ ACL

☐ PCL

☐ CI

OA Affected Compartment: ☐ Medial ☐ Lateral

Degrees of Correction: _____ (1° to 7°) (Standard = 3°)

FLAT COLORS:

☐ Black ☐ Red ☐ Purple ☐ Pink

☐ White ☐ Blue ☐ Light Blue ☐ Yellow

☐ Green ☐ Orange ☐ Tan ☐ Red, White, Blue

METALLIC COLORS:

☐ Black ☐ Red ☐ Purple ☐ Pink

☐ Navy ☐ Dark Blue ☐ Bright Blue ☐ Gold

☐ Green ☐ Orange ☐ White ☐ Silver

MULTIPLE COLORS:

Thigh Frame _____

Calf Frame _____

Fade (flat colors only): ☐ Yes ☐ No

GRAPHICS (extra charge):

☐ Tiger Red ☐ Tiger Orange ☐ Leopard Blue

☐ Butterfly ☐ Snake ☐ Camouflage

☐ Stars & Stripes (flat) ☐ Stars & Stripes (metallic)

DONJOY®

CCMI Mark III
#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 #: _____

Brace #: _____

PATIENT INFORMATION:

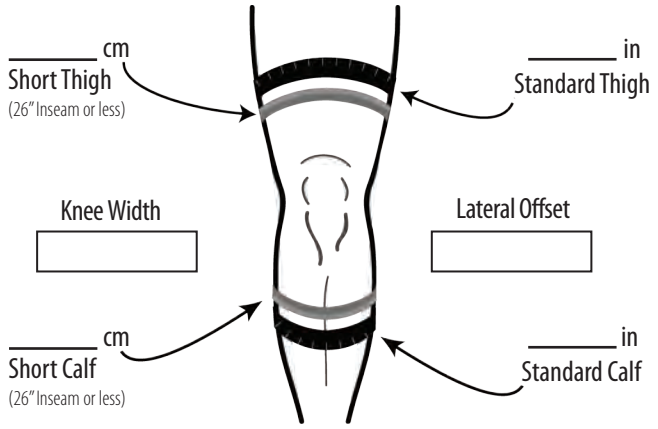
Name _____

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.____

FEATURES (*standard option on DEFIANCE® III):

☐ High Strength Stainless Steel Gears

☐ Suede Liners / Pads

☐ Chamois Liners / Pads

☐ Pneumatic Liners / Pads (not available on DEFIANCE® III)

☐ Swooping Thigh (not available on short thigh)*

☐ Swiveling Strap Tabs*

☐ PowerCaps - metal strap caps (recommended for contact sports)

☐ 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)

☐ Tru-Pull® Advanced Attachment

ACCESSORIES (extra charge):

☐ Full Extension Lockout Stop

☐ Lycra® Undergarment

☐ Neoprene Undergarment

☐ Sports Cover

☐ Pneumatic Condyle Kit

☐ Sili-Grip Strap Pad Kit

☐ Air Condyle Pads

☐ Floam™ Condyle Pads

☐ Impact Guard

☐ Calf Pinch Guard

☐ Neoprene Suspension Strap Kit

☐ Atrophy Pad Kit

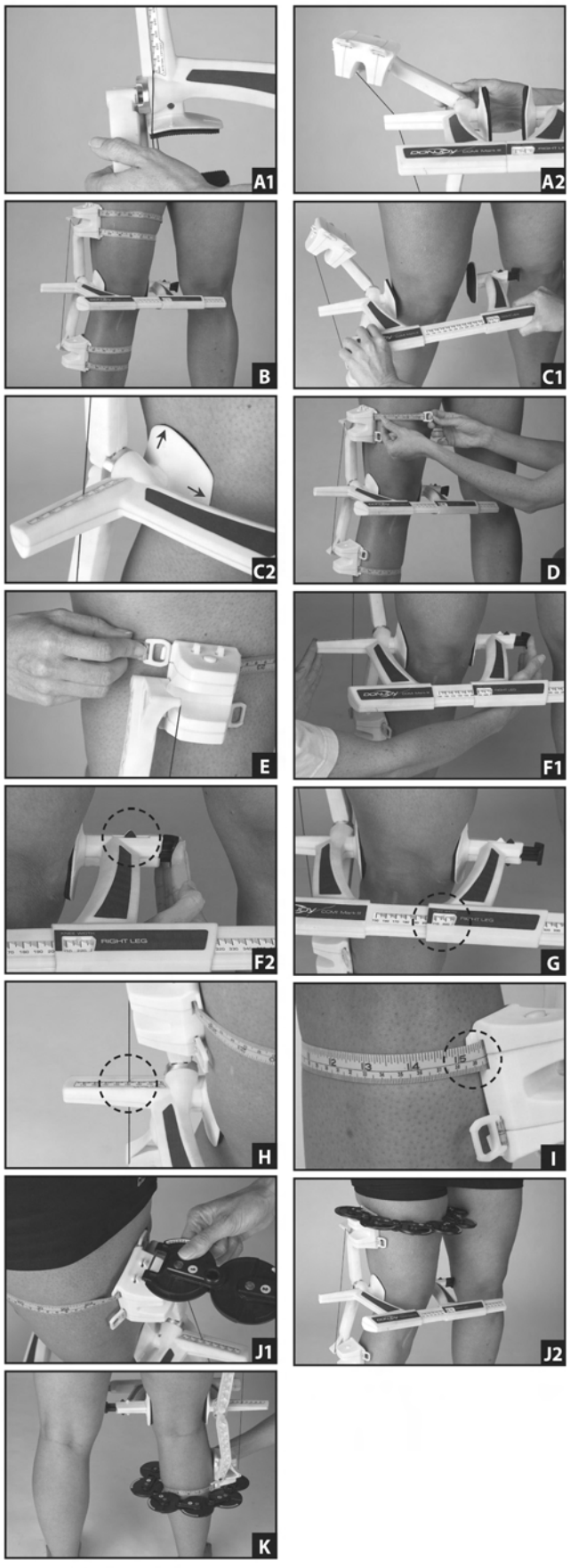
For further instructions, please refer to the CCMI Mark III instruction video and instuction card included with the instrument.

C A U T I O N !

FEDERAL LAW (U.S.A.) RESTRICS THIS DEVICE TO SALE BY THE ORDER OF A LICENSED HEALTH CARE PROFESSIONAL

Custom Contour Measuring Instrument - Mark III 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.



APPLICATION INFORMATION:

1. To unstow, distract and rotate swing arms as shown in figures (A1 and A2).

2. Have the patient stand feet shoulder width apart and knees flexed slightly. Do not allow the knees to flex beyond 15 degrees. Apply the instrument directly to the bare leg. Note: Taking measurements from the uninvolved leg is not recommended because of differences in leg dimensions due to dominance of one leg over the other. See figure B.

3. Distract knee width caliber and position on the patient's knee. Arrows on condyle shells should align with the top of the knee cap and slightly posterior to midline. See figures (C1 and C2).

4. For standard thigh and calf, extend tape measure marked in Inches located distal to knee. Wrap around leg and secure to hook on tape module. Press tape release button to pull tape snug to leg; ensure it is parallel to floor. For short thigh or calf, follow same procedure using Metric measurements. See figure (D and E).

5. To establish proper knee compression for knee width measure ment, support lateral side of instrument and press load plunger on medial condyle until triangles are aligned, as shown in figures (F1 and F2).

6. Record knee width on order form. See figure (G.)

7. Record lateral offset on order form. See figure (H).

8. Record thigh and calf circumference on order form. See figure (I).

9. To record thigh and calf contour measurements, insert steel shaft of contour gauge into snap feature on tape module, as shown in figure (J1). Wrap the contour gauge around the anterior thigh, parallel with the floor being careful not to compress tissue. See figure (J2). 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. Remove contour gauge. Repeat the procedure at the posterior calf. See figure (K).