

Cascade Dafo, Inc.

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Knee Ankle Foot Orthotic

	Last name:		Construction Features Options
ient	First name:		,
Pati	Birth date: Bilateral Left Right		LATERAL
	Date cast:		(Right)
oner	Last Name:		
	First Name:		
actit	Title/Credentials:		D-Ring Anterior
<u></u>	Email: Phone:		Strap
	Customer/Business name:		
5)	Street address:		HM
Billing			/ 0 1
m	City: State: Zip:		Knee Joint
	PO#/UCAN#:		D-Ring Ontario
	☐ Shipping info is the same as Billing info. —OR—		Anterior Strap
5 0	Shipping contact name:		Instep
<u>p</u>	Facility name:		Strap
Shipping	Street address:		Layover Forefoot Strap
•,			Strap
	City: State: Zip:		
	NOTE: If you don't choose an option, you will receive the Standard.		Knee Joint
AF Sty	**NOTE: Choose ONE of the five AFO styles below and include the corresponding order form.	Hinge Style:	Off-set JMS Upright
	DAFO Turbo (Standard)		Drop Lock
	DAFO Turbo Softy		Posterior Off-set Free Motion
	DAFO Hinged Turbo		Step Lock
	DAFO Tami2		Adjustable Ring Lock
		Additional	
	DAFO R	Details:	Quick release lever*
	FLOOR TO HEIGHT MEASUREMENTS All measurements in millimeters (mm)	*NOTE: additional	Quick disconnect*
	All measurements in minimeters (min)	cost items.	Knee pad*
	Lateral Height		Growth extension bar*
	<u> </u>	Knee Alignments:	Set Knee Flexion to °
	Medial Height	· g	Correct Knee Varus/Valgus to Neutral Yes No
			Special Instructions
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**Page 2 is the chosen AFO corresponding order form