

**Account Contact Information**

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Billing and Shipping**

PO# \_\_\_\_\_ Billing Account #: \_\_\_\_\_ Shipping Account #: \_\_\_\_\_

**Shipping Preference**

Ground

Next Day A.M.

Next Day P.M.

2-Day A.M.

2-Day P.M.

Billing Address: \_\_\_\_\_ Shipping Address: \_\_\_\_\_

City: \_\_\_\_\_ City: \_\_\_\_\_

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

*(If no preference is indicated, this order will be shipped 2 Day P.M.) Note: We do not ship products directly to patients.*

**PLEASE FOLLOW STEP-BY-STEP CAST PROTOCOL INSTRUCTIONS**

The Townsend Full Shell BK Orthosis is designed to fit directly over your patients prosthetic socket. The thigh and tibial shell will integrate with any conventional or vacuum suspension system. All protocol must be followed as an intimate fit is imperative for proper function and acceptance by your patient.

1. Cast your patient, fit your test socket, and then laminate your definitive socket with adaptors as needed.
2. Complete your dynamic alignment as necessary and finalize all adjustments that need to be completed.
3. Add plastic wrap over your patients entire prosthesis. This includes the shoe, pylon, adaptors, gel liners, and suspension sleeves.
4. Add a stockinette and a cut strip to the prosthesis. If you are ordering an anterior tibial shell, the cut strip MUST be on the posterior of the socket. If you are ordering a posterior calf shell, the cut strip MUST be on the anterior of the socket. Cut strips on the same side of the distal shell will result in a poor fit.
5. Use elastic plaster or hybrid casting tape only. Do not use standard plaster or fiberglass casting rolls.
6. Wrap your cast from the four hole or distal adaptor to three inches above your thigh shell length. Once you have wrapped your cast, you must stand the patient. The patient MUST stand in the same position that you completed your dynamic alignment in.
7. Once the cast has hardened, mark the MTP, MPT, and tibial crest on the OUTSIDE of the cast. This will help isolate proper knee center during modification and alignment.
8. Make a single line down your cut strip and add hash marks down this line. Remove your cast and secure with staples to ensure proper alignment.
9. Allow cast to fully dry before shipping in a well padded box.

\*Indicates additional charges apply

**Fit Date:** \_\_\_\_\_

**Patient's Last Name:** \_\_\_\_\_

**Patient's First Name:** \_\_\_\_\_

Male  Female **Age** \_\_\_\_\_

**Weight** \_\_\_\_\_ (LBS) **Height** \_\_\_\_\_ (IN)

**Leg:**  Left  Right

**Patient's Clinical Diagnosis:** \_\_\_\_\_

**Surgeries (type/date):** \_\_\_\_\_

Is the patient currently using any assistive device?

- Brace/KAFO  Crutch  Wheel Chair  
 Cane  Walker

**Suspension Type:** \_\_\_\_\_

**Socket Type:** \_\_\_\_\_

**Casted Position:**

- Standing with Dynamic Alignment  Static Bench Alignment

**Casted Over:**

- Over Test Socket  Over Definitive Socket

**Model**

- Anterior Thigh  Posterior Thigh  
 Anterior Tibia  Posterior Tibia

**Thigh Shell Length**

- 7 Inch  8 Inch  9 Inch  Other \_\_\_\_\_"

**Tibia Shell Length**

- 6 Inch  7 Inch  Other \_\_\_\_\_"

Anti-Migration Silicon Infused Strap Pads\*

**Tibia Straps**

- No Straps  One Strap  Two Straps

**Casted position:**

*It is imperative to compare angular and motion differences when evaluating the patient's static (non weight bearing) and dynamic (standing-walking) alignments.*

- Seated                       Standing                       Supine
- Weight Bearing                       Non Weight Bearing
- Semi Weight Bearing

**Set Hinge Position (Must be completed)**

- 0                       5                       10                       15
- Other \_\_\_\_\_"

**Townsend Knee Joints**

**Free Knee Townsend Motion Joints**

- Original
- 5 Bar Free Knee (*heavy duty for larger or more active patients*)
- 5 Bar Free Knee Extension Stop Kit\*
- 5 Bar Flexion Stop kit: (*factory installed only*)
  - 15°     30°     45°     60°     75°     90°
- Install Extension Assist Bands/Posts

**Locking Joint Options**

- Single Pivot With No Free Motion     Cable
- Manual Lock
- Single Pivot With Free Motion (*requires Cables with Twist Release*)
- 5 Bar Trigger Locks With No Free Motion
- 5 Bar Trigger Locks With Free Motion
- Cable  5 Bar Manual Droplock     5 Bar Manual Free Motion
- Install Extension Assist Bands/Posts
- 5 Bar Flexion Stop kit: (*factory installed only*)
  - 15°     30°     45°     60°     75°     90°

**Customer Supplied Joints**

- Customer Supplied Joints

**Becker Knee Joints (Townsend stocked items)**

- Modular Ring Lock Model 1402-B
- Automatic Angled Levered Lock Model 1017A
- Modular Ratchet Lock Model 1018A
- Bend Levers As A Bail Rod

**Becker External Lock Release Options**

- Bail Lock Integrated Strap System (*BLISS*) Model MX-003 BLISS (*for use on model 1017 and 1018*)

Townsend Twist and Lever Release System CANNOT be used with Becker knee joints

**Brace Color (Select One)**

**Colors**

- Black                       Red                       Green
- Beige                       Navy Blue                       Burgundy
- Gray                       Royal Blue

**Fabric Inlay\***

- Clear Graphite     Sheer Purple\*     U.S.A. Flag
- Sheer Red\*     Fabric -1 yard     Fabric\*
- Sheer Teal\*     from patient\*

**Comments:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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