

Configuration Sheet – Cuff Thigh

Commission no. / Patient ID:
(No Name!)

Step 1: What is ordered?

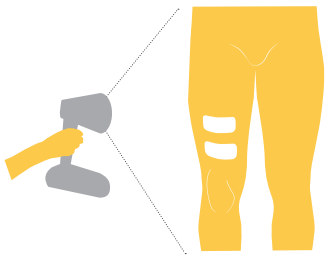
- | | | |
|---|---------------------------------|---|
| <input type="radio"/> evomove orthokit (incl. holder) | <input type="radio"/> right leg | Fabric color
<input checked="" type="radio"/> grey <input type="radio"/> black |
| <input type="radio"/> evomove solokit (incl. pocket) | <input type="radio"/> left leg | |
| <input type="radio"/> Pair of new cuffs (excl. control unit) | | |
| Reference (Ordernumber, patient ID,..): _____ | | |

Step 2: Recording the measurements (please check)

1. Option: 3D-Scan

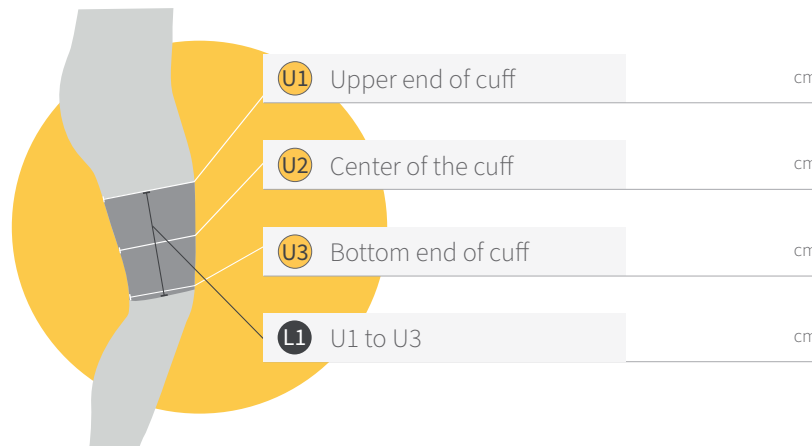
Please make a **3D scan** of the leg with attached screening electrodes.

Important: Please scan with your knee stretched as far as possible so that your knees and waist can be seen. When exporting, ensure that the electrodes are visible (elevated), the scan is complete and has no overlaps.



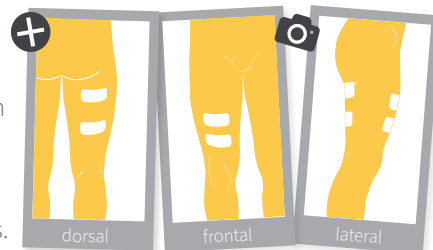
We accept **.obj** and **.stl** files.

2. Option: Measurements with photos

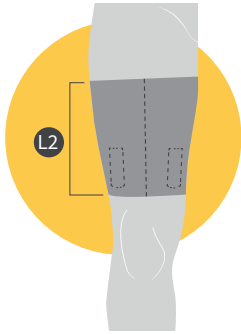


Three photos of the upper leg with corresponding electrodes.

Important: Knees and hip joint must be visible when taking photos.



Step 3: Cuff details

	<input checked="" type="radio"/> L2 Cuff length _____ cm	<input type="radio"/> Standard (Minimal, all electrodes included)
		<input type="radio"/> Individual
	Pocket or cable outlet _____	<input type="radio"/> Standard (medial)
		<input type="radio"/> lateral
		<input type="radio"/> Individual for Orthokit (please mark on photo or scan)
Zipper	<input type="radio"/> No <input type="radio"/> Yes*	<input type="radio"/> lateral <input type="radio"/> medial
	*Runs from top to bottom over the entire length	
Silicone adhesive tape	<input type="radio"/> No <input type="radio"/> Yes	