## **LOWER EXTREMITY DEVICES**

## **Lower Extremity Measurement Chart – GL Devices**

## Patient Information:

Flexion

Extension

|                    | Name:  |                |       |
|--------------------|--|----------------|-------|
| A                  | Circumference: 1 1/2" (3.8 cm) below Groin                       | Date of Birth: |       |
| В                  | Circumference: Largest point of Calf                             | Height:        |       |
| C                  | Length: Groin to Knee Center (not center of Knee Cap)            | Weight:        |       |
| D                  | Length: Knee Center (not center of Knee Cap) to Medial Malleolus | · -            |       |
| E                  | Length: Foot Length  |                | eight |
| ation requirements |  | •              |       |

Range of Motion requirements to use the GL Knee Devices:

- > GL Knee Flexion Leg must be able to bend to at least 48 degrees of Flexion
- > GL Knee Extension Leg must be able to bend to at least 50 degrees of Flexion

