



DATE CASTED ____/____/____ DATE SENT ____/____/____ RUSH (\$100.00 Extra Charge) plus shipping
 DOCTOR'S NAME _____ OFFICE NAME _____
 ADDRESS _____ CITY _____
 STATE _____ ZIP _____ PHONE (____) _____ FAX(____) _____
 PATIENT'S NAME _____ MALE FEMALE AGE _____ WEIGHT _____ lbs.
 HEIGHT _____' _____" SHOE SIZE _____ RANGE OF MOTION: LIMITED NORMAL EXCESSIVE

CAST CORRECTION

- PLANTARFLEXION DORSIFLEXION
- FABRICATE AS CAST
- CORRECT TO 90 DEGREES
- OTHER _____ DEGREES

FOREFOOT

- FABRICATE AS CAST
- CORRECT TO NEUTRAL

REARFOOT

- FABRICATE AS CAST
- CORRECT TO NEUTRAL

⚠️ (Incomplete scans may incur a modification charge of 65.00 and/or void fit guarantee)

PLASTIC AFO'S

- ARTICULATING AFO
 - SPLIT UPRIGHT OPTION (STANDARD)
- SOLID ANKLE AFO
 - POSTERIOR SPRING ASSIST
- POSTERIOR ENTRY AFO
- SMO (SUPRA MALLEOLAR ORTHOSIS)
- KR-AFO (KINETIC RESPONSE AFO)
- POLYPRO CO-POLY CARBON

FABRICATION OPTIONS

- COLOR: NATURAL BLACK (STANDARD)
- FOOT PLATE LENGTH: METS SULCUS FULL LENGTH(+15.00)
- PLASTIC THICKNESS: 1/8" 3/16" 1/4"
- OVERALL HEIGHT: _____ IN INCHES (+15.00 per inch above 8")

LEATHER AFO'S

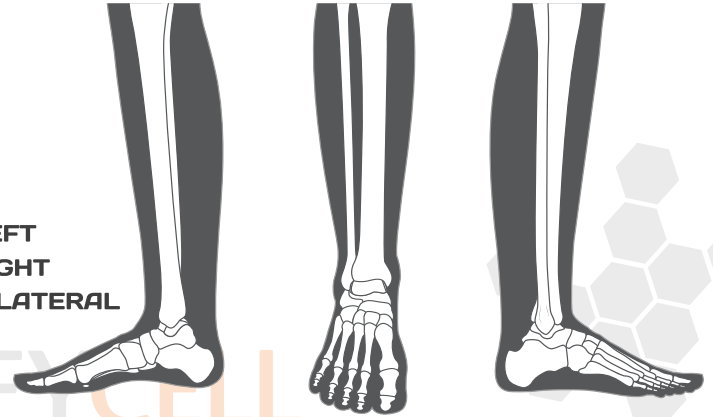
- SOLID GAUNTLET (STANDARD)
- ARTICULATING GAUNTLET
- BALANCE BRACE

FABRICATION OPTIONS

- COLOR: WHITE BLACK (STANDARD)
- FOOT PLATE LENGTH: METS SULCUS FULL LENGTH(+15.00)
- CLOSURE: VELCRO LACE COMBINATION
- OVERALL HEIGHT: _____ IN INCHES (+15.00 per inch above 8")

FABRICATION INFORMATION

MEDIAL VIEW ANTERIOR VIEW LATERAL VIEW



- LEFT
- RIGHT
- BILATERAL

⚠️ Fit guarantee applies to patient model & order specifications NOT desired footwear.

MARK PADDING/ACCOMMODATION LOCATION

- PADDING: ENTIRE DEVICE (STANDARD) FOOT PLATE ONLY AS DRAWN ABOVE
- FOOT PLATE CUSHION LENGTH: METS SULCUS FULL LENGTH

FOOT PLATE PADDING TYPE

- VOLARA P-CELL (STANDARD)
- LUNA SOFT OR PK WT (+\$5 up charge)
- PADDING THICKNESS: 1/8" 3/16"

STRAPS

- STANDARD
- REINFORCED (COMPOSITE BACKED) +\$7
- INSTEP STRAP REMOVEABLE ATTACHED
- PULL STRAP (ATTACHED) MEDIAL LATERAL
- OTHER _____

ANKLE JOINTS

- TAMARACK (STANDARD) TAMARACK (DORSI ASSIST) 75 85
- CAMBER AXIS (+\$100.00) NONE

Additional info: _____

