

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.

Received Date

Thuasne USA's shipping department use only

Patient Information

Fit Date: _____

Patient's Last Name: _____

Patient's First Name: _____

Male Female **Age** _____

Weight _____ (LBS) **Height** _____ (IN)

Leg: Left Right

Patient's Diagnosis: _____

Surgeries (type/date): _____

Is the patient currently using any assistive device?

- Brace/KAFO Crutch Wheel chair
- Cane Walker

Casted position:

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

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

Ankle:

- Casted in corrected position
- Cast was NOT corrected. Please correct:
 - Forefoot Supination Hindfoot Inversion
 - Forefoot Pronation Hindfoot Eversion

What control do you want this AFO to provide?

Please check all that apply:

- Ankle: Dorsiflexion Plantarflexion
- Inversion Eversion

Ankle/Foot evaluation *(weight bearing)*

Weight bearing ankle position is:

- Neutral
- Inverted _____ degrees Everted _____ degrees

Dorsiflexion & Plantarflexion range of motion:

- Full ROM Limited ROM Fused

Forefoot position: Pronated Supinated

Rearfoot position: Inverted Everted

Provide M.L. Measurements

A. M-L *at the smallest aspect just above the ankle:* _____"

B. M-L *at the ankle joint:* _____"

C. Distance from lateral ankle to floor _____"

*Indicates additional charges apply

Choose Standard Joint Model

- PTS — *Posterior tibia shell with standard joints*
- ATS — *Anterior tibia shell with standard joints*
- SU/ATS — *Single upright, anterior tibia shell with standard joints*
- SU/PTS — *Single upright, posterior tibia shell with standard joints*

Choose Urethane Joint Model

- PTS/TJ — *Posterior tibia shell with Proteor Aflex urethane joint*
- ATS/TJ — *Anterior tibia shell with Proteor Aflex urethane joints*
- Standard Proteor joints*
- Dorsi assist Proteor joints*

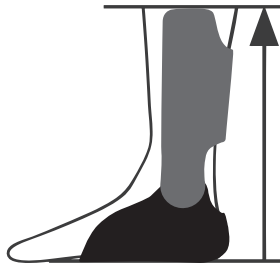
Choose Joint Additions

- Add dorsi assist bands* *(Standard joint model only)*
- Add adj plantar stop* *(Posterior models only)*

Indicate Total Brace Height

NOTE: Posterior shell is routinely trimmed shorter than the sides

- 9" 10" 11"
- 12" 13" Other _____"



Indicate Tibial Shell Material

- Copolymer Opaque polypro
- Graphite Black polypro

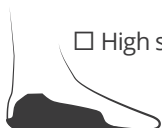
OR

Graphite Reinforced Thermo Plastic:*

- Copolymer Black polypro
- Opaque polypro

Indicate Foot Plate Material

- Graphite lamination *(Not available in sulcus or toe length)*
- Polypropylene *(Stiff, heat adjustable)*
- Co-polymer *(Softer, more flexible, heat adjustable)*
- Black poly pro *(Good all around and heat adjustable)*



High sides *(UCB Type)*






Low side *(Sole Plate)*

Foot Plate Trim

- Heel cup *(proximal to the base of the 5th metatarsal)*
- Trim proximal to the metatarsal heads
- Trim to toe sulcus
- Trim to toes - Outline of full foot required!!!

Heel Trim

-  Open heel *(graphite footplate only)*
-  Half heel
-  Full heel *(Closed)*

Foot Plate Padding

- Fabricate entire foot plate with no padding
- Line entire foot plate with 1/8 inch padding
- Line entire foot plate with 1/4 inch padding
- Line sides with 1/8 inch; sole with 1/4 inch
- Line sole with 1/8 inch; no padding on sides

Foot Plate Padding Material

- Aliplast 1/8" *(soft-white)* Plastizote 1/8" *(pink)*
- Pelite 1/8" *(medium white)* Aliplast 1/8" *(soft black)*
- Aliplast 3/16" *(soft-white)* Plastizote 1/4" *(pink)*

Finish and Color *(Graphite sections only)*

Textured Powdercoat Finish *(Lightest, most durable finish)*

- Black textured Royal blue
- Pewter *(silver)* Burgundy

High Gloss Paint Finish

- Black Emerald green Steel blue
- Royal blue White Quicksilver
- Burgundy Burnt orange Indy yellow
- Beige Dark violet
- Custom paint finish* - *Indicate custom paint #* _____

Special Instructions: _____
