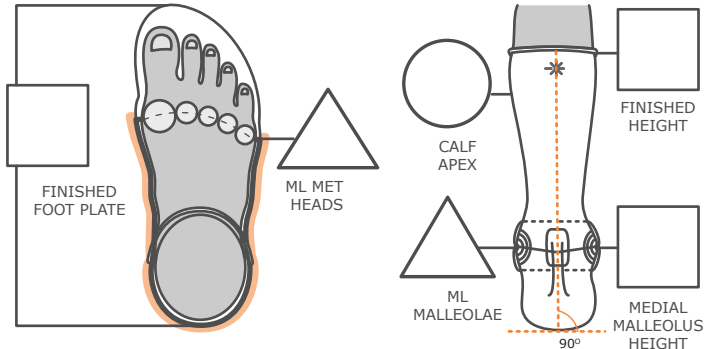


BILL TO: _____
ADDRESS: _____
SHIP TO: _____
ADDRESS: _____
 SAME AS BILLING
PRACTITIONER: _____
PHONE #: _____

PATIENT NAME: _____
HEIGHT: LEFT MALE
WEIGHT: RIGHT FEMALE
AGE: BILATERAL
OPS INVOICE/NG ENCOUNTER: _____
DATE OF SERVICES: _____
IN-OFFICE REQUEST DATE: _____
 EARLY AM AM SATURDAY

AAFO-STANDARD

- Heel Neutral
- Forefoot Neutral
- Ankle Neutral
- 5/32" Copolymer
- 1 1/2" Proximal Strap
- White Velcro
- Felt Strap Pad
- Buildups +1/8
- Plantar Mod-STD
- Full Footplate
- Standard Forefoot trim
- Chafe Medial
- Tamarack Joints
- 90° Plastic Stop



VARIATIONS

CAST CORRECTION

ANKLE DF _____ ° PF _____ ° **HEEL** IN _____ ° EV _____ ° **FOREFOOT** SUP _____ ° PRO _____ ° **HEEL HEIGHT** 90° OTHER 3/16 1/4 1/8

MODIFICATIONS

+ / BUILDUPS 1/8 _____ LOCATION 1/8 _____ LOCATION
 5/32 _____ 5/32 _____
 3/16 _____ 3/16 _____
 1/4 _____ 1/4 _____
 OTHER _____ **- / REDUCTIONS** OTHER _____

TRIMLINES

FOOTPLATE FULL METS SULCUS OTHER _____
FOREFOOT VARUS MOD VALGUS MOD EXTENDED LATERAL EXTENDED MEDIAL DORSAL WRAP INNER BOOT* _____
 *PROVIDE HEEL-DORSUM ○

MATERIAL SELECTION

TRANSFER: NONE DESIGN _____

PLASTIC POLYPROPYLENE COPOLYMER POLYETHYLENE _____
THICKNESS 5/32 3/16 1/4 1/8 _____ **COLOR** BLACK COPOLY NATURAL

PADDING ALIPLAST PLASTAZOTE PE-LITE _____
THICKNESS 5/32 3/16 1/4 1/8 _____ **LOCATION** FULL LATERAL MEDIAL _____

JOINT OKLAHOMA CAMBER AXIS DA TAMARACK _____
POSTERIOR STOP 90° PLASTIC STOP FREE MOTION MOTION CTRL LIMITER (755) SNAP STOP PAS ELITE OTHER _____

FINISH

UNFINISHED

STRAPS LEATHER CHAFE LATERAL DACRON 1" FIG 8 2" INSTEP _____

STRAP COLOR BLACK PURPLE BLUE RED BEIGE PINK OTHER
OTHER VENT HOLES EXT HEEL POST CREPE PLASTIC _____ ° EXT FOREFOOT POST CREPE PLASTIC _____ °

NOTES: