

**PCC #:** \_\_\_\_\_

**BILL TO:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**SHIP TO:**  SAME AS BILLING \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**SHIPPING:**  GROUND (FXGD)  STANDARD 2 DAY (FX2D)

OVERNIGHT:  PRIORITY (FX1D)  1st OVERNIGHT (FX1A)

OTHER: \_\_\_\_\_

**CLINICIAN:** \_\_\_\_\_

PREFERRED CONTACT METHOD: \_\_\_\_\_

**PATIENT:** \_\_\_\_\_

HEIGHT: \_\_\_\_\_ WEIGHT: \_\_\_\_\_ AGE: \_\_\_\_\_

DIAGNOSIS: \_\_\_\_\_

**AFFECTED SIDE (Check One):**

LEFT  RIGHT or  BILATERAL: SYMMETRICAL  YES  NO

NG ENCOUNTER #: \_\_\_\_\_

MEASUREMENT DATE: \_\_\_\_\_

IN-OFFICE REQUEST DATE & TIME: \_\_\_\_\_

**HFN:**  PHOENIX  ORLANDO  KANSAS  CHICAGO  ANAHEIM  HOUSTON  CROMWELL  OTHER \_\_\_\_\_

**CAD MEASUREMENTS**

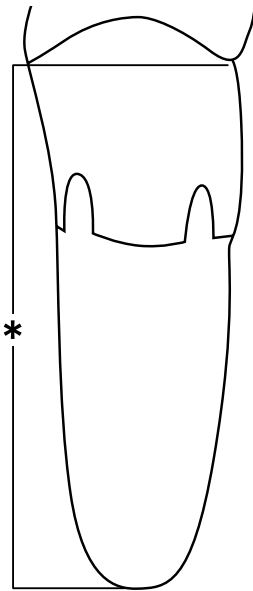
If a Discrepancy Exists, Go By  Impression  Measurements

1. Always scan/cast & measure over the liner you are fitting with. 2. Anatomical landmarks of MPT, Fibular Head, & Distal Tibia must be located on the scan/cast.

MEASUREMENTS:  IN  CM

LEFT

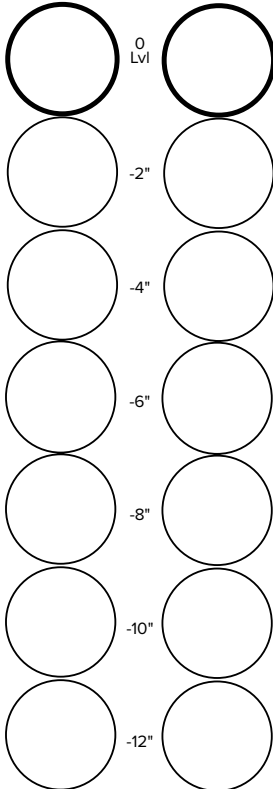
RIGHT



\*Residual limb length from ZERO Level to distal end



Left Right



**SCAN TYPE:**  Mod. Positive Model  Unmod. Positive Model

Other \_\_\_\_\_

Clinician Premodified

Use Previous Model > Provide Date or CDC Order # \_\_\_\_\_

**REDUCTIONS**

CDC Standard Reduction (based on liner/tissue type)

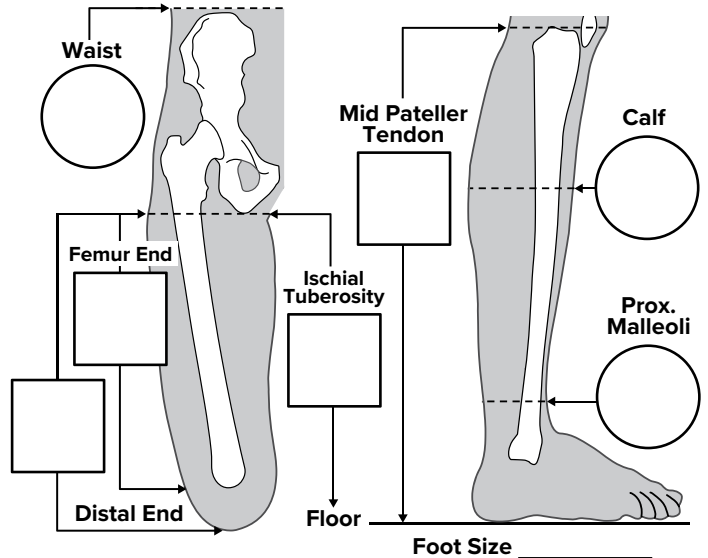
Volume Reduction/Equivalent Circ. Reduction

0%  1%  2%  3%  4%  5%  6%  7%  8%  
0.5% 1.0% 1.5% 2.0% 2.5% 3.0% 3.6% 4.1%

**ALIGNMENT**

Flexion \_\_\_\_\_ Adduction \_\_\_\_\_ Abduction \_\_\_\_\_

**FAB DESIGN**



**Activity Level:**  K1  K2  K3  K4

**RESIDUAL LIMB CIRCUMFERENCES**

Skin  Liner  Thickness

MPT \_\_\_\_\_ 1" \_\_\_\_\_ 2" \_\_\_\_\_ 3" \_\_\_\_\_  
4" \_\_\_\_\_ 5" \_\_\_\_\_ 6" \_\_\_\_\_ 7" \_\_\_\_\_  
8" \_\_\_\_\_ 9" \_\_\_\_\_ 10" \_\_\_\_\_ 11" \_\_\_\_\_

**Liner Type:** \_\_\_\_\_ Size \_\_\_\_\_

**Sleeve Type:** \_\_\_\_\_ Size \_\_\_\_\_

**Measured with Distraction:**  Yes  No

**Tissue Type:**  Soft  Medium  Firm

**ISCHIAL LEVEL MEASUREMENTS**

Skeletal ML \_\_\_\_\_ Soft ML \_\_\_\_\_

Medial AP \_\_\_\_\_ Lateral AP \_\_\_\_\_

**COVER MEASUREMENTS (Contralateral Limb)**

AP \_\_\_\_\_ ML \_\_\_\_\_ PML \_\_\_\_\_

CLINICIAN: \_\_\_\_\_ PATIENT ID/NAME: \_\_\_\_\_

PREFERRED METHOD OF CONTACT:  CELL  TEXT  EMAIL  MICROSOFT TEAMS \_\_\_\_\_

**DESIGN**

Submitted Model:  Check Socket (Needs Modification Prior to Finishing)

- Check Socket (Complete and Ready for Finishing)
- Flexible Inner Socket with Temporary Frame
- Modified Cast  Laminated Socket (Ready for Finishing)

Procedures:  Transfer  Neutralize Components (Except For Distal AP)

- Provide an Additional Check Socket  Flexible Inner Socket
- Other \_\_\_\_\_

More Procedures:  Temporary Frame  First Lamination

- Complete Lamination  Re-use Existing Components
- Cover and Finishing  Other \_\_\_\_\_

**SOCKET**

Flexible Inner Plastic:  MPE  Northvane  Northvane Black

- Proflex  Proflex w/Silicone  N/A  Other \_\_\_\_\_

Vacuum Forming Method:  Blister  Drape

Flexible Inner Plastic Thickness:  1/8"  1/4"  1/2"  3/16"

- 3/8"  Other \_\_\_\_\_

Posterior Dacron Strip:  Yes  No

**INSERT**

Custom Insert Material:  Bocklite  Pelite  N/A

- Other \_\_\_\_\_

Add Ons:  Stove Pipe  Pull Straps  N/A

- Other \_\_\_\_\_

End Pad Material:  Plastazote  Aliplast  N/A

- Other \_\_\_\_\_

**SUSPENSION**

Shuttle Lock:  Cylindrical 4 Hole  Original Fillauer  Coyote

- Clutch Lock  N/A  Other \_\_\_\_\_

Suction Valve:  Green Dot  Lyn Valve  Lyn Slide  N/A

- Other \_\_\_\_\_

Elevated Vacuum:  Unity Valve  90 Degree Barb  N/A

- Other \_\_\_\_\_

Lanyard:  Pull Strap  Kiss Puck (4-Hole)  Kiss Puck (non 4-Hole)

- Nylon Tension Buckle  Metal Cam Buckle  Metal Rod Distally

- Other \_\_\_\_\_

Suspension:  Silesian Belt  Pelvic Belt  Hip Joint

- Other \_\_\_\_\_

NOTES \_\_\_\_\_

**COMPONENTS**

Support Structure

- Endoskeletal  Exoskeletal  N/A

Componentry

- Temporary  Definitive  N/A

Component Material

- Aluminum  Stainless Steel  Titanium  N/A

Pylon Diameter

- 34 mm  30 mm  22 mm  N/A

Knee Type: \_\_\_\_\_ Foot Type: \_\_\_\_\_

Other Components: \_\_\_\_\_

Attachement Shape:  Male  Female  N/A

Attachement Rotation:  Fixed  Rotating  N/A

**FINISHING**

Resin:  Polyester  Epoxy  Acrylic  N/A

- Other \_\_\_\_\_

Ultralight Weight Design:  Yes  No

Lamination Color

Ottobock (1-18) \_\_\_\_\_ Prosthetic Research Specialists (1-18) \_\_\_\_\_

Kingsley \_\_\_\_\_

Frame Options

- Anterior Window  Posterior Window with Proximal Dacron Strip

- Trimmed 1 cm below Flexible Socket's Proximal Trim

- Socket Left Solid – Practitioner Will Frame Out

- Flexible Socket Left Long – Practitioner Will Trim

- Flexible Socket Rolled Over Frame Proximally

- Flexible Socket Trimmed to Trimlines  Other \_\_\_\_\_

**SETUP/ALIGNMENT**

Cover:  Bock Soft  Bock Firm  Ohio Willow Wood (OWW)  N/A

- Other \_\_\_\_\_

Fairing:  Lam. Shell  Poly. Shell  Stock. Reinforcement  N/A

- Other \_\_\_\_\_

Cover Process:  Rough Shape (25 mm/1" Over Measurements)

- Shape to Measurements  Shape to Scan

- Other \_\_\_\_\_

Cover Finish:  Apply Nylons  Apply Flexible Outer Covering

- Adhere and Trim Flexible Outer Covering

- Other \_\_\_\_\_

**TURNAROUND TIMES**