

OFFICE

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AFO/CROW/SMO LAB ORDER

BILL TO ADDRESS: _____

SHIP TO ADDRESS: _____

SHIPPING : GROUND 3-DAY 2-DAY NEXT DAY EARLY AM

PATIENTS NAME: _____ CLINICIAN: _____ DATE: _____

HEIGHT: _____ WEIGHT: _____ AGE: _____ REQUESTED DATE: _____

PURCHASE ORDER: _____

- ___ Solid Ankle
- ___ Dorsi Assist (pls) R / L / B ___ Correct to ___
- ___ Semi-Solid ___ 3/8 Foot Board
- ___ Articulated ___ NO Foot Board
- ___ Transformer ___ Do Not Correct
- ___ SMO – includes padding Malleoli
- ___ Neuropathic Walker (crow walker) Standard 3 straps

STANDARD COMPONENT:

___SULCUS ENDING ___ 3/16 CO-POLY ___ 1/8 POLY-PRO ___UCB HEEL MOD

UPGRADE COMPONENT:

- ___ MALLEOLUS PAD
- ___ PROXIMAL FLARE
- ___ Dacron 2" REINFORCED PROXIMAL STRAP
- ___ Dacron 1.5" REINFORCED INSTEP/ANKLE STRAP
- ___ Dacron 1.5" REINFORCED TIBAL STRAP
- ___ INSTEP STRAP W/ SLIPPER (not reinforced)

MODIFICATIONS:

- ___ METATARSAL PAD
- ___ FULL FOOT
- ___ CP & INHIB MODS

ADDITIONAL OPTIONS: ARTICULATED: _____ PRE-ARTICULATED _____

- ___ SABOLICH MOD/TRIM (Medial/Lateral)
- ___ CP & INHIB MODSTRIM (Dorsum Flaps)
- ___ LONGITUDIAL ARCH PAD
- ___ Foam Liner (BK)
- ___ Motion Control Strap
- ___ Transfer Paper Style _____
- ___ Graphite/Compcore Reinforcement
- ___ Posting (Wedge) neutral / medial / lateral
- ___ PLASTIC STOP
- ___ FREE MOTION
- ___ ELITE POSTERIOR STOP
- ___ ANKLE JOINTS: TAMERACK
- ___ ANKLE JOINTS: DORSI
- ___ ANKLE JOINTS: OKLAHOMA

___ OTHER: _____

___ OTHER: _____

NOTES:

