

PATIENT INFORMATION

Patient: _____
 Age: _____ Sex: _____ Height: _____ Weight: _____
 Diagnosis: _____

ORDER INFORMATION


PO#: _____

MEASUREMENTS+

Finished Height _____
 Anatomical Ankle M/L _____

FOREFOOT ALIGNMENT (VARUS/VALGUS)

Select Finished Alignment:


 Valgus _____° Varus _____° **Neutral*** **Neutral*** Varus _____° Valgus _____°

Ankle Joint Alignment

Mechanical* Other: _____
 Anatomical

CAST CORRECTION

Sagittal Ankle Correction

Ankle Alignment (dorsiflexion/plantarflexion)

Do not correct
 Correct to 4° DF*
 Correct to _____° DF PF
 Heel Height _____

Coronal Hindfoot Alignment

Do not correct
 Correct to vertical*
 Correct to _____°
 Varum Valgum

PRACTITIONER SHIPPING INFORMATION

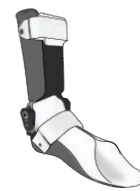
Facility: _____
 Clinician: _____
 Address: _____
 City: _____
 State/Province/Region: _____ Zip: _____
 Country: _____
 Phone (Office): _____ Phone (Cell): _____
 Fax: _____ Email: _____

DEVICE SELECTION



Triple Action® AFO

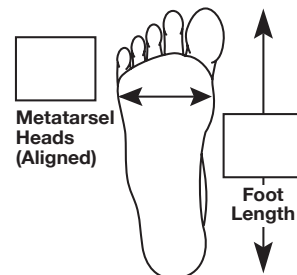
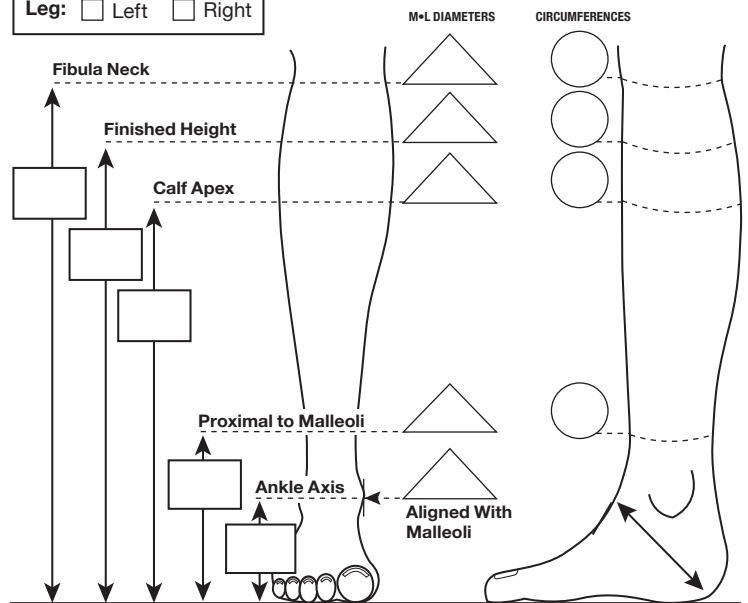
Left
Right



Triple Action® AFO with SMO

Left
Right

Leg: Left Right



Note: If you don't choose an option, the * (default) option will be selected for you.
 +AFO From Scan Orthometry Form required when providing scanned model.

TRIMLINE SELECTION

Footplate Length

- Full Foot Length***
- Sulcus Length

Footplate Control

- Full Control***
- Long Medial (Supination Control)
- Long Lateral (Pronation Control)

Ankle Control

- None***
- Medial Supramalleolar Flare
- Lateral Supramalleolar Flare

Liners / Padding / Inserts

- None***
- Extra Navicular Padding
- Plantar Footplate
- Calf Section

AFO Material

Polypropylene*
Copolymer

SMO Material

- Polyethylene
- EVA



Footplate Stabilization

- None***
- Heel
- Forefoot
- Heel Lift Height _____

Strap Color

- White***
- Other: _____

Transfer Pattern

- No Transfer***
- Transfer Options

[available at
BeckerOrthopedic.com/
Education/OrthometryForms]

Model # _____

JOINT SELECTION

Size

- A (100 - 240 lbs)
- B (65 - 220 lbs)
- C (30 - 110 lbs)

Side

- Lateral***
- Medial

Booster Springs

- None
- Dorsiflexion Resist
- Plantarflexion Resist

*Refer to Triple Action Product Manual to select number of components and booster springs.



Product Information

SPECIAL INSTRUCTIONS