

Lower limb silicone cover. Order form.

Contact	<input type="text"/>	Customer No.	<input type="text"/>	Date	<input type="text"/>
Customer Information			Ship To Information (if different from customer address)		
Company	<input type="text"/>	Company	<input type="text"/>		
Address	<input type="text"/>	Address	<input type="text"/>		
City/State/Zip	<input type="text"/>	City/State/Zip	<input type="text"/>		
Email	<input type="text"/>	Email	<input type="text"/>		
Phone	<input type="text"/>	Phone	<input type="text"/>		
Patient ID	<input type="text"/>	Shipping Options	<input type="checkbox"/> UPS Next Day <input type="checkbox"/> UPS 2-Day <input type="checkbox"/> UPS Ground <input type="checkbox"/> Other <input type="text"/>		
<input type="checkbox"/> Order <input type="checkbox"/> Quote Only					

Configuration

88A20 Silicone Cover for TT Prosthesis

Prosthetic foot:

Prosthetic foot length in mm:

Heel height in mm:

Please provide:

Photos of contralateral side

Photos of client wearing prosthesis

Genuine leg hair

Assembled prosthesis with corresponding footshell (footshell one size smaller)

Cast of the contralateral foot

Tracing of leg and measurement (below)

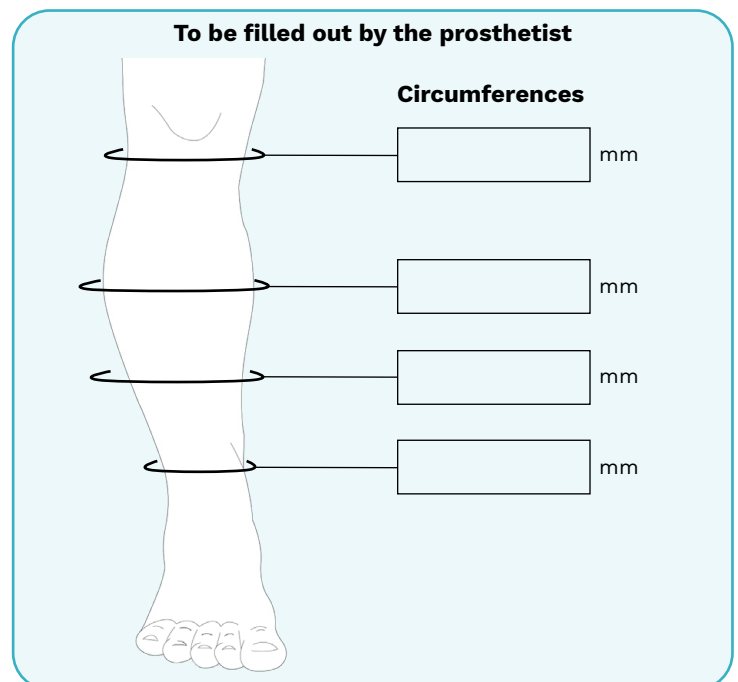
Shoe or provide shoe size

Measurement form.

Measurement of contralateral side

Please reproduce the anatomical shape of the leg in the prosthesis and note that the prosthesis circumference should be approximately 5-10% smaller than the contralateral side, with a gradual transition from 5% at the calf to 10% at the ankle. This reduction accounts for the silicone cover thickness.

Shaping of the prosthesis must be complete prior to starting the fabrication process.



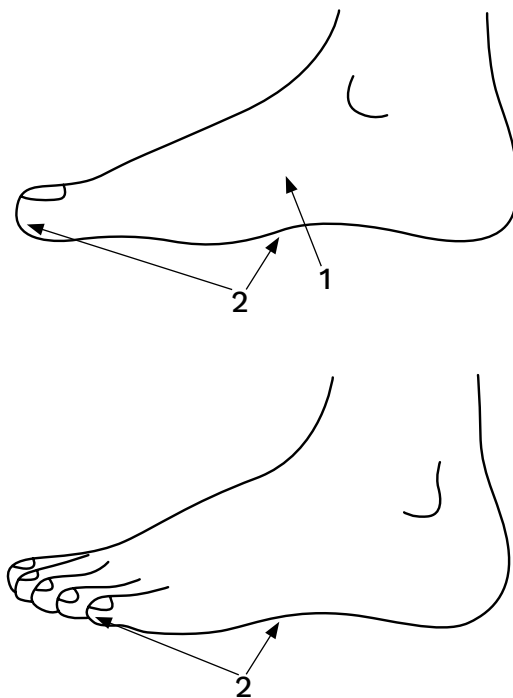
Silicone partial toe/foot prosthesis.

Colour determination spec sheet.

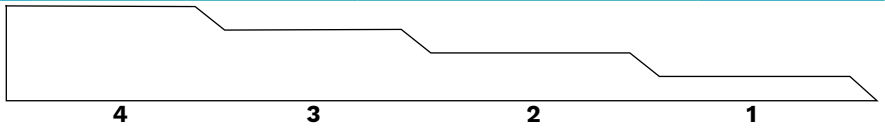
Patient ID Customer No. Date

Comments:

Plantar

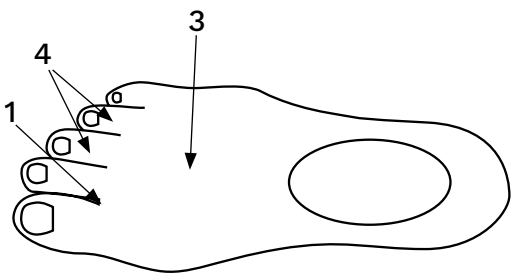


Colour swatch - Colour grade



Area	Swatch #	Grade #	Additional Comments
Plantar			
1 Base		3 4	
2 Plantar/ Toe tip			
Dorsal			
3 Tan			
4 Knuckles			
Vein*	Green	Blue	Other: _____ *Draw vein location
Hair**	Yes	No	**Draw hair orientation

Dorsal

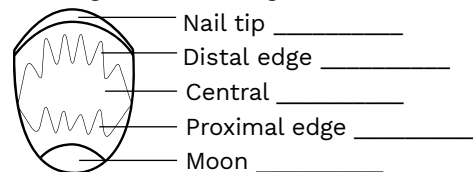


Nails

Shape + length determined by cast
Acrylic Silicone

Nail Swatch Ring

Nail sample as colour reference only Nail swatch ring*
*If using nail swatch ring, write swatch ID in corresponding area



Tip Length

