∴ surestep

Stirrup AFO Form

FAX OR E-MAIL COMPLETED FORMS

Fax 866.700.7837 | E-mail orders@surestep.net | Phone 877.462.0711

*Orders cannot be processe	ed if indicate	ed fields ar	re left blan	k
PATIENT				
Date (dd/mm/yy)	☐ Right	☐ Left	□ Bilate	ral
Last Name/Patient ID				
First Name				
DOB	Weight		☐ Male	☐ Female
Dx				
COMPANY				
*Name				
Contact Name				
*Phone	Fax			
E-mail				
BILLING / SHIPPING				
Billing Address				
*City				
*ST/Prov	*Zip/Pos	tal Code		
$\hfill \square$ Shipping address same as billing				
Shipping Address				
City				
ST/Prov	Zip/Posta	al Code		
PO #	Order cor	nfirmation	n: 🗆 Fax	□ E-mail
SALES REPRESENTATIVE				
Name				
ADDITIONAL NOTES				······································

= Circumference = Width Smallest = Distance supra-malleolar circumference 2 Diagonal Midfoot circumference circumference at apex of at apex of arch calcaneus Width at met-heads (simulated weight bearing) Finished Finished length of length of device on device medial on lateral side side LATERAL MEDIAL Posterior Posterior calcaneus calcaneus to apex of 1st to apex of 5th met-S met-head head 6 Width at apex of malleoli Circumference at distal fibula head **LATERAL MEDIAL** Desired finished height of AFO Height Height to apex to apex of lateral of medial malleolus malleolus

Fabrication Time: 4 days

Casts and measurements are required

STAN	DARD) FEAT	URES:

Hinge - Free Motion Heel Cup - 1" Device Color - Black Cover Length - Sulcus Correction - Neutral/90 Footplate - Proximal to Mets Top Cover - EVA

HINGE

☐ Solid

Ш	Free Motion Hinge (Standard)
	Dorsi Assist Hinge

DEVICE COLOR

☐ Black (Standard)	☐ Beige	☐ Natural

CORRECTION

l	Cast Modifications	☐ Neutral/90	☐ As casted
	Heel:	Ankle:	Forefoot:

TOP COVER

☐ EVA (Standard)	☐ Diabetic (Plastazote/Poron)
□Spenco	

HEEL CUP

□ ³ / ₈ "	□ 3/4"
□ ½"	☐ 1" (Standard)

MEDIAL HEEL POST (FOR SEVERE PRONATION CONTROL)

□ ½"	□ 1⁄4"
☐ ³ /16"	

FOOTPLATE

\square Proximal to Mets (Standard)	☐ Sulcus
C F # F	Fire to a C

Full Foot Finished foot length

SHIPPING OPTIONS

☐ 3 Day Select\$15.00
☐ 2 nd Day (by 12:00 p.m.)\$30.00

☐ UPS Ground......No Charge

- ☐ Next Day Saver.....\$45.00
- ☐ Next Day (by 10:30 a.m.)....\$55.00
- ☐ 24 Hour Rush Fabrication\$75.00 Fee Shipping charges apply separately

Need by Date

 \square Return impressions pre-modifications \$20.00/pr. Send casts to: 17530 Dugdale Dr. South Bend, IN 46635

4/2020