



## PATIENT

Last Name/Patient ID \_\_\_\_\_

First Name \_\_\_\_\_

DOB        /        /         Male     Female

Weight \_\_\_\_\_        Height \_\_\_\_\_

Dx \_\_\_\_\_

Right     Left     Bilateral

## COMPANY

Name \_\_\_\_\_

Contact Name \_\_\_\_\_

Phone \_\_\_\_\_        Fax \_\_\_\_\_

E-mail \_\_\_\_\_

## BILLING / SHIPPING

**BILLING**

Address \_\_\_\_\_

City \_\_\_\_\_

ST/Prov \_\_\_\_\_        Zip \_\_\_\_\_

Shipping address same as billing?     Yes     No

**SHIPPING**

Address \_\_\_\_\_

City \_\_\_\_\_

ST/Prov \_\_\_\_\_        Zip \_\_\_\_\_

PO # \_\_\_\_\_

Order confirmation:     Fax     E-mail

## FedEx SHIPPING OPTIONS

**Need by Date**

Ground® .....FREE

2 Day® A.M. 10:30 a.m. or noon 2nd business day .....\$30.00

Priority Overnight® 10:30 a.m. next business day .....\$55.00

First Overnight® 8:00 a.m. next business day .....\$100.00

**Rush Fab**     4 Day Turnaround ..... \$100.00

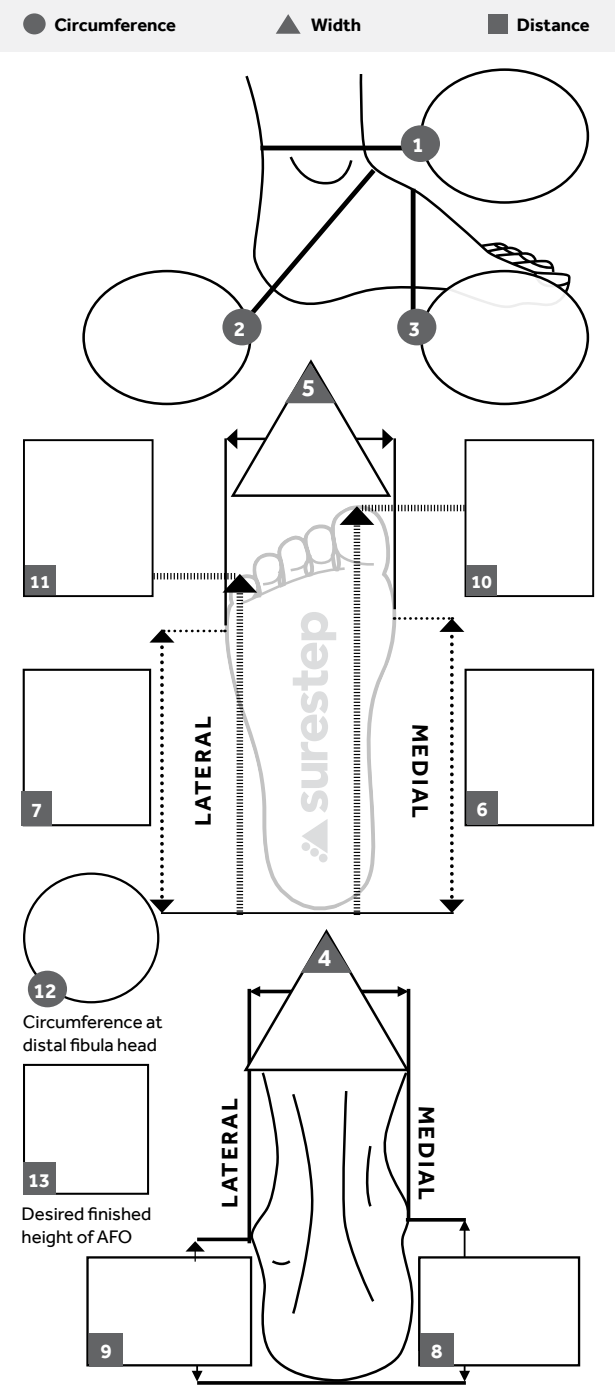
## CASTS

Sending Casts:     Yes     No

Return impressions pre-modifications \$20.00/pr.

Send casts:  
 17530 Dugdale Drive  
 South Bend, IN 46635

## MEASUREMENTS



\* If number 5 measurement is 3" or greater, a cast is required.

## Standard DASS

The Standard DASS features the options listed below. If you would like to specify modifications, select **Modified DASS** and customize.

<b>Medial Ankle Hinge</b>	Goni-Joint	<b>Walking Base</b>	1/4" Soft PUFF mid-sole with thin tread
<b>Lateral Ankle Hinge</b>	Pediatric DA Joint	<b>Molded Inner Boot</b>	Duraflex
<b>Correction</b>	Neutral/90		3/32"
<b>Chafe (D-Rings)</b>	Plastic	<b>Trimline</b>	Height    SMO
<b>Dorsal Pad</b>	Dorsal Pad		Boot    Full Length Footplate
<b>Liner</b>	Volara (white)    3/16"		

## Modified DASS

Additional charges may apply, see price list.

➔ IF OPTION IS LEFT BLANK, THE STANDARD OPTION WILL BE USED

<b>Medial Ankle Hinge</b>	<b>Lateral Ankle Hinge</b>
<input type="checkbox"/> Tamarack	<input type="checkbox"/> Surestep Free Motion
<input type="checkbox"/> Pediatric DA joint	<input type="checkbox"/> Tamarack
<input type="checkbox"/> Other:	<b>Correction</b>
<b>Walking Base</b>	<input type="checkbox"/> As casted
<input type="checkbox"/> Other:	Heel:
<b>Chafe (D-Rings)</b>	Ankle:
<input type="checkbox"/> Dacron (Optional, no charge)	Forefoot:
<b>Dorsal Pad</b>	<b>Liner</b>
<input type="checkbox"/> Neoprene Pad (Optional, no charge)	<input type="checkbox"/> Puff
<b>Molded Inner Boot</b>	<input type="checkbox"/> Other:
<input type="checkbox"/> MPE <input type="checkbox"/> Foam	<input type="checkbox"/> 1/8"
<input type="checkbox"/> 1/16" <input type="checkbox"/> 1/8"	<input type="checkbox"/> 1/4"

## PLASTIC OPTION

<input type="checkbox"/> Copolymer 3/32" (below 70 lbs)	<input type="checkbox"/> Copolymer 1/8" (over 70 lbs)
<input type="checkbox"/> Other:	

<b>PATTERN</b>	<b>STRAP COLOR</b>

## NOTES