

# 1 CLINICIAN REQUIRED

Account ..... Location .....

PO Number .....

Clinician .....

Clinician Email .....



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 Fax: 1-866-919-9268  
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 hello@kevinrootmedical.com



# Traditional AFO Order Form

Contact me to review Order Form      Date: MM / DD / YYYY       Rush order due date: MM / DD / YYYY

# 2 PATIENT REQUIRED

Patient's Email .....

First Name .....

Last Name .....

DOB MM / DD / YYYY      Sex:  M  F      Weight .....      Height .....

# 3 SIDE

Use separate Rx for each side

Right

Left

# IMPRESSION



Plaster



STS Casting Socks



3D Foot Scanner



Fiberglass Casting Tape

# FITTING

Shoe size:

Fit AFO to submitted:

Tracing

Shoes

# 4 AFO REQUIRED

## T100 Leaf Spring

- 4mm Polypropylene frame
- Rearfoot intrinsic post
- No joints
- No top cover
- Tibial strap & pad
- Fibula height
- Reduced posterior trimlines
- Device to mets

L Codes: L1960, L2275

## T200 Tamarack Free Motion

- Plantar stop
- Free motion tamarack joints
- 4mm Polypropylene frame
- Rearfoot intrinsic post
- No top cover
- Tibial strap & pad
- Fibula height
- Device to mets
- Low, medial and lateral flanges

L Codes: L1970, L2275

## T150 Solid Ankle

- Valgus T-Strap (reduces varus rearfoot)
- Varus T-Strap (reduces valgus rearfoot)
- Additional L Code: L2270

- Extended anterior trimlines
- 4mm Polypropylene frame
- Rearfoot intrinsic post
- No joints
- No top cover
- Tibial strap & pad
- Fibula height
- Device to mets

L Codes: L1960, L2275

## T300 Tamarack Dorsi-Assist

- Foot Frame to mets standard
- Foot frame to sulcus       Foot frame to toes

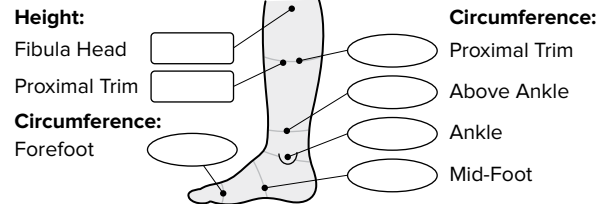
- Plantar stop
- Tamarack dorsi-assist joints
- 4mm Polypropylene frame
- Rearfoot intrinsic post
- No top cover
- Tibial strap & pad
- Fibula height

L Codes: L1970, L2275, L2210, L2210

# 5 IMPRESSION PREPARATION REQUIRED

<b>Ankle</b>	<input type="checkbox"/> As is <input type="checkbox"/> Correct to 90°	
<b>Rearfoot</b>	<input type="checkbox"/> As is <input type="checkbox"/> Correct to 90°	
<b>Forefoot</b>	<input type="checkbox"/> As is <input type="checkbox"/> Balance FF to RF	

# A MEASUREMENTS OPTIONAL



# B CUSHIONS & PADDINGS OPTIONAL

Full Plastazote Liner     3mm     4.5mm     6mm



Special Instructions: .....