

### **ÖSSUR**TT Check Socket Order Form

Send all casts, sockets, files to: 9545 S John Young Parkway, Ste #100, Orlando, FL 32819 tel: (888)839-6213, fax: (800)788-9878 | cs@ossur.com | www.ossur.com

Billing & Shipping Information	
Össur Account #:	Ship To:
Contact for ordering or delivery questions:	Company:
Contact:	Address:
	City/State/Zip:
	Contact:
Email:	Phone: Fax:
Mobile Phone:	Email:
PO#:	Shipping Check Priority: Next Day Air <b>2nd Day</b> Include return shipping label (\$50 charge inside 48 states)

Completion of this order form with the most accurate and up-to-date information, including all patient information, measurements, and construction information enables us to provide the highest quality product for you and your patient.

Required Patient Information											
Last Name:	Height:	ft.	in.	Impact Leve	el: F	High	Med	Low	Amputation Le	evel: T	T Symes
First Name:	Weight:		lbs.	K-Level:	K1	K2	K3	K4	Left	Right	Bilat Order

#### **Check Socket Measurements** Call to disuss before design Trim Lines Measurements\*\* Shape Socket Styles Standard Shape by cast Total Surface Bearing Level Measurement Supracondylar Shape by app scan Patellar Tendon Bearing 10cm Supracondylar Suprapatellar Shape by CAD file Modified PTB MPT to Floor CAD file name: 5cm 0cmLiner Used \*Angles Adduction: Flexion: 5cm \*If a specific alignment isn't provided, ÖCS' standard alignment is 0° 10cm flexion and 0°adduciton. 15cm \*3% global reduction (if using Iceross liners) OR 4% for any other liner unless Total Reduction requested differently. 20cm % \*The percent reduction needed for correct socket fit is highly dependent on PML cm practitioner's measurement technique as well as patient's tissue density. It's Ply not uncommon to require a different percent reduction. ML cm ΑP Notes:

<sup>\*\*</sup>Length and circumferences are required. If not provided and socket fit requires remake, customer is responsible for cost of remake.

Cast sent to Össur Custom Solutions (optional) Check here to receive foam carving for this order.

## **TT Check Socket Order Form**

Flexible Inner Socket Plastics	Fab Custom Inner From Sh	Other		
Flexible EVA with Silicone (Proflex with Silicone) Flexible EVA without Silicone (Proflex without Silicone)	Lightweight Polyethylene – Firm 25 Shore A ( <b>PeLite</b> ) 12mm (1/2") beige white 5mm (3/16") beige	Stovepipe Slit in lateral side Slit in medial side	Lightweight Ethylene Vinyl Acetate (Keasy Cone) 6.5mm profile, 10mm distal	
Flexible EVA – Black ( <b>Optek Flex Comfort - Black</b> )	3mm (1/8") beige		Tommi distai	
Flexible EVA – Optek Flex Comfort White + Black ( <b>BiLam</b> ) Modified Polyethylene ( <b>MPE</b> ) EVA ( <b>ÖssurFlex</b> )	Lightweight Polyethylene 25 Shore A ( <b>Bocklite</b> ) 6mm (1/4")			

Fab Custom Pad RevoFit

Lightweight Polyethylene – Medium Shore A (**Plastizote**)

12mm (1/2") pink white

6mm (1/4") pink

5mm (3/16") pink

Lightweight Polyethylene – Firm 25 Shore A (**PeLite**)

12mm (1/2") beige white

5mm (3/16") beige

3mm (1/8") beige

Location

Distal end (1/2") Other (see notes below)

Door

Fab door with Velcro strap(s) (draw door on cast/check socket/use notes below)

Dial Location

Distal anterior medial Proximal lateral Other (see notes below)

Panel Locations

Pretibial & posterior (with pads)
Posterior only (with pad)

Pad on Panel

Firm Ethylene Vinyl Acetate 55 Shore A (Puff)

12mm (1/2") black 10mm (3/8") black 6mm (1/4") black

#### **TT Check Socket Order Form**



🖫 Waterproof rated Össur products provide permanent protection against harmful ingress of fresh, salt or chlorinated water, even after submersion.

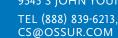
















# **ÖSSUR** TT Definitive Socket Order Form

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Billing & Shipping Information								
Ossur Account #:	Ship To:							
CONTACT FOR ORDERING OR DELIVERY QUESTIONS:	Company:							
Contact:	Address:							
Email:	City/State/Zip:							
Phone:	Contact: Phone:	Email:						
THORE.								
PO#:		Check Priority: Next Day Air <b>2nd Day</b>						
Completion of this order form with the most and construction information e	accurate and up-to-date information, including all mables us to provide the highest quality product for	patient information, measurements, or you and your patient.						
Patient Information								
		W. I.						
Patient Name/Reference:  Amputation Level: BK SYMES	Activity Level: 1 2 3 4	Weight: Left: Right: Bilat Order:						
·	,							
Definitive Socket		Call to discuss before fabrication						
TT Measurement Chart	From Socket From Cast F	From CAD/AOP file dated:						
Socket Flexion:	Lamination Finish							
Socket Adduction:	Lammation i mish							
0° unless otherwise specified	Carbon Basalt Color (PRS Pigment 1-16)  Decorative Lamination							
MPT to	Decorative Zammadon							
Floor	Alignment							
	T (	Use Angles						
	Transfer Transfer and zero out	Flexion						
	Use Lines	Flexion						
1/ 11 10 10 10 10 10 10 10 10 10 10 10 10	Other	Adduction						
	Modifications							
	Socket Sizing	Prosthetic Height						
		(optional)						
	Increase Decrease	Transfer						
		Extend:						
	%:							
	Ply:	Shorten:						

#### TT Definitive Socket Order Form

#### **Special Fabrications**

Flexible Inner Socket Plastics

Fab Custom Inner From Sheet Material

Other

Flexible EVA with Silicone (**Proflex** with Silicone)

Flexible EVA without Silicone

(Proflex without Silicone)

Flexible EVA – Black (Optek Flex

Comfort - Black)

Flexible EVA – Optek Flex Comfort

White + Black (BiLam)

Modified Polyethylene (MPE)

EVA (ÖssurFlex)

Lightweight Polyethylene – Firm 25

Shore A (PeLite)

12mm (1/2") beige white

5mm (3/16") beige

3mm (1/8") beige

Lightweight Polyethylene 25 Shore A

(**Bocklite**) 6mm (1/4")

Othe

Lightweight Ethylene Vinyl Acetate (Keasy

Cone) 6.5mm profile,

10mm distal

Fab Custom Pad

Lightweight Polyethylene – Medium Shore A (Plastizote)

12mm (1/2") pink white

6mm (1/4") pink

5mm (3/16") pink

Lightweight Polyethylene – Firm 25 Shore A (PeLite)

12mm (1/2") beige white

5mm (3/16") beige

3mm (1/8") beige

Location

Distal end (1/2") Other (see notes below)

Custom shaped foam cover (provide meas. in diagram on previous page)

Fab cosmetic distal end

Fab windows, cutouts or Dacron strap (draw windows or cutouts on check socket/use notes below)

Fab door with Velcro strap(s) (draw door on check socket/ use notes below)

Dial Location

Distal anterior medial Proximal lateral

RevoFit

Other (see notes below)

Panel Locations

Pretibial & posterior (with pads)

Stovepipe

Slit in lateral side

Slit in medial side

Posterior only (with pad)

Pad on Panel

Firm Ethylene Vinyl Acetate 55 Shore A (Puff)

12mm (1/2") black

10mm (3/8") black

6mm (1/4") black

See markings on cast/socket

Other (see notes below)

**Notes** 



