

Date \_\_\_\_\_

6333 North Orange Blossom Trail, Orlando FL 32810 • www.orthomerica.com • phone 877-737-8444 • fax 877-737-8445

**PATIENT INFO (PHI)**

Last Name / ID \_\_\_\_\_ First Name \_\_\_\_\_  
 Gender \_\_\_\_\_  
 Male \_\_\_\_\_  
 Female \_\_\_\_\_ Age \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_ Shoe Size \_\_\_\_\_  
 Diagnosis \_\_\_\_\_

Remarks/Additional Prosthetic Components

**SHIPPING INFORMATION**

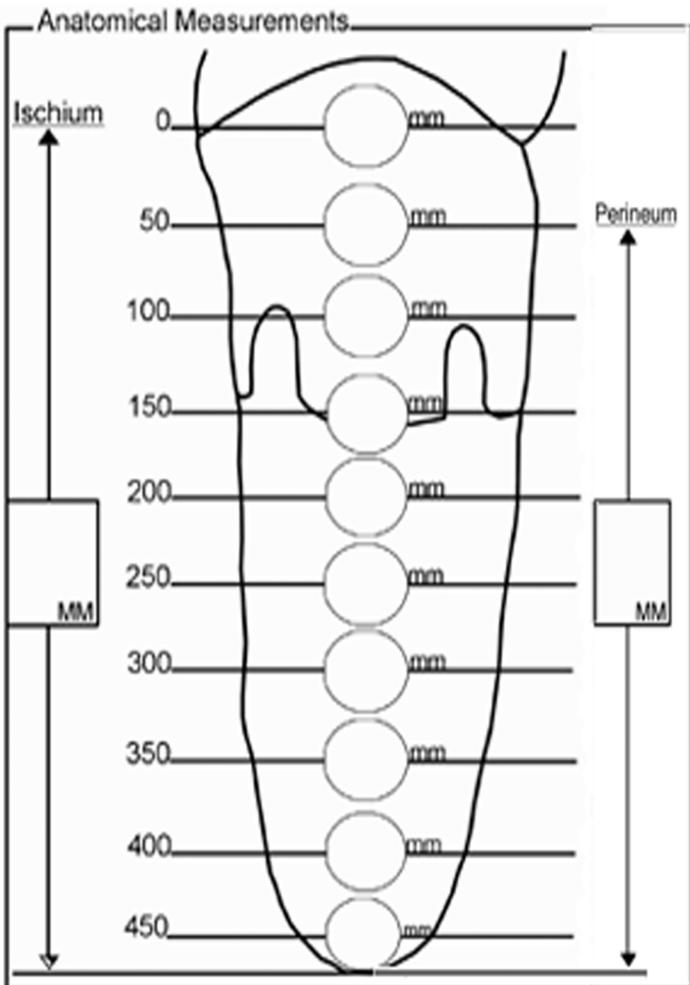
Practitioner \_\_\_\_\_ Phone/Fax \_\_\_\_\_  
 Facility \_\_\_\_\_ PO Number \_\_\_\_\_  
 Ship to Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Shipping Company \_\_\_\_\_ Service \_\_\_\_\_  
 UPS  Ground  
 FedEx  2 Day Air  
 Other: \_\_\_\_\_  Overnight \_\_\_\_\_  
 Need by \_\_\_\_\_  
 Bill to Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Shape Acquisition Via:  Cast  Scan | Affected Side:  Left  Right |  Cast Over Liner  3mm  6mm  9mm

**MEASURE IN MILLIMETERS, PLEASE** Measurements Taken By: \_\_\_\_\_

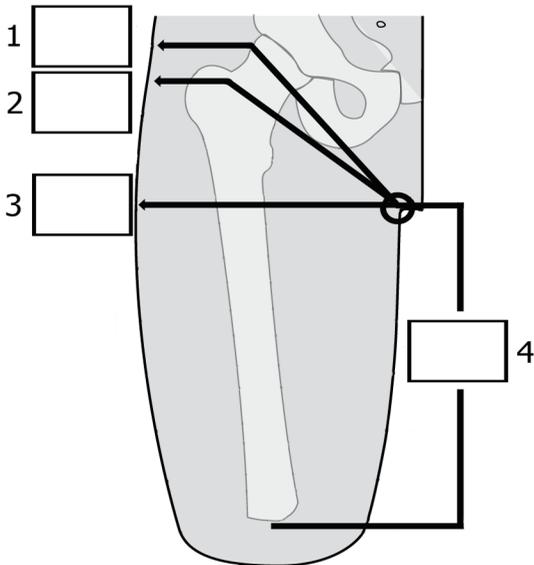
**Email Orthomerica a Picture of Patient's Residual Limb With Liner Donned**  
 Yes  No **ebracepros@orthomerica.com**



Measurements taken with patient **SITTING** or **STANDING**

Round  Conical  Flat

Carving Only  
 Test Socket Only  
 Test Socket & Carving  
 PETG or Orfitrans Stiff  
 Attachment  
 4 Hole Plate  
 3 Prong (M or F)  
 None  
 Dummy  
 Kiss } Supply Lock  
 Bulldog } Y or N  
 4SN1  
 None



Use ML stick applying sufficient pressure to simulate the desired socket ML dimension. **All 4 measurements begin at the point where the proximal adductor longus will exit the socket.**

1. Measured angularly to gluteus medius belly.
2. Measured angularly to apex of GT.
3. Measured horizontal from proximal adductor longus to sub-trochanter.
4. Length of femur from the point where the proximal adductor longus will exit the socket.

Measurements taken:  Inches  MM

**Patient Name / Purchase Order #:** \_\_\_\_\_

Patient Height: \_\_\_\_\_, Patient Weight: \_\_\_\_\_, Amputated Side: Left  Right

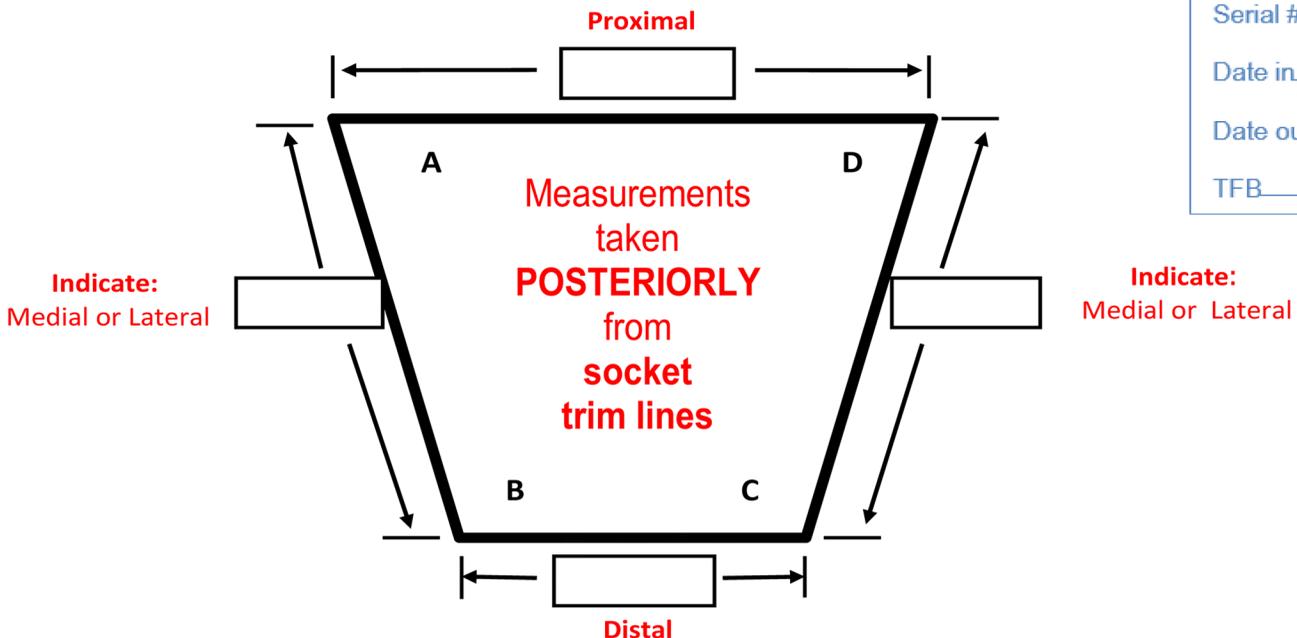
Material Color:  Black  Coyote (Brown)  Heavy Duty Fabric (Black Only) **K Level:** 1 2 3 4

- Closure Options:**
- Standard (1:1) Closure, 1.5" Velcro Attached to Batten
  - (2:1) Closure, 1.5" Loops Attached to Batten. **(Customer supplies Velcro Straps)\*\***
  - (2:1) Closure, 1" Loops Attached to Batten, 1" **Pressure Buckles** with Dacron Strap (No Velcro)

- Other Options:**
- Proximal Arc (for very Conical or Flexed Residual Limbs, Degrees of Socket Flexion \_\_\_\_\_ (Required))
  - Darts Sewn into Sail (for Irregular Shaped Residual Limbs) Dart Measurements (H" x W"): \_\_\_\_\_
  - This is a Replacement Sail for an existing socket, No Holes Needed
  - OPEN FLAP** Design – Medial Side of Sail Will Not Have Attachment Holes – Secured by Closure Choice Above
  - \*\*CJ Socket to Make Dacron-backed Velcro Straps** (to be used with (2:1) Closure, 1.5" Loops Attached to Batten)

**Special Instructions:** \_\_\_\_\_

**FOR INTERNAL USE ONLY-ORTHOMERICA TO PROVIDE SAIL MEASUREMENTS TO CJ SOCKET TECHNOLOGIES**



**Internal use only**

Serial # \_\_\_\_\_

Date in \_\_\_\_\_

Date out \_\_\_\_\_

TFB \_\_\_\_\_