CUSTOM AFO ORDER FORM

FACILITY NAME:		
Purchase Order #	Date: / /	American Account #

SHIP ADDRESS:			**BILL ADDRESS:**		
City:	State:	Zip:	City:	State:	Zip:
Tel #	Fax		Tel # ( )	Fax # ( )	
Contact:	Title:		Contact:	Title:	

PATIENT NAME:			❒ Male ❒ Female Weight:	Age:
Activity level:	❒ Non Ambulatory ❒ Low / transfer ❒ Medium	❒ High / active	Occupation:	
TYPE OF FOOTWEAR :	❒ Custom	❒ Extra Depth	❒ Sneaker	
Rx / Diagnosis:				

COLOR: ❒ BLACK ❒ BROWN ❒ DARK BEIGE ❒ WHITE
❒ WINE ❒ LIGHT BEIGE ❒ BONE

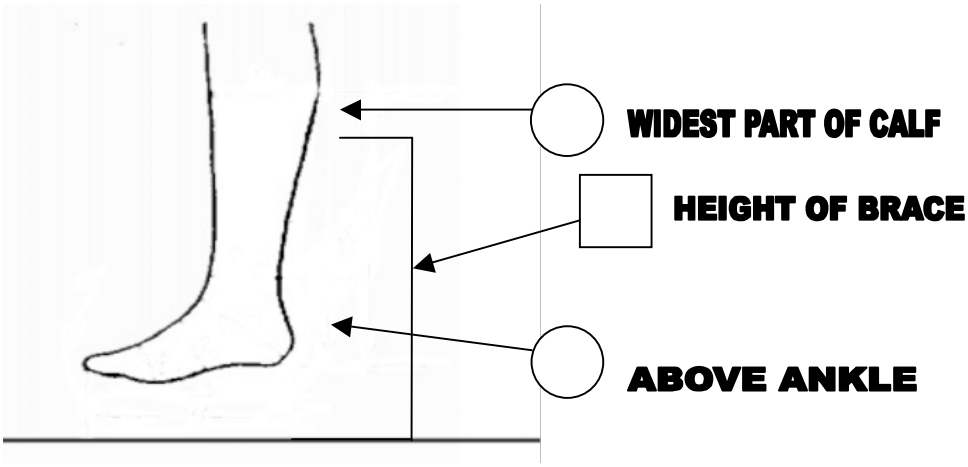
CLOSURE: ❒ LACE ❒VELCRO ❒ COMBINATION
(LACED WITH ONE VELCRO STRAP AT TOP)

HEIGHT: ❒ 7” ❒ 9” ❒ AS MARKED ON CAST
(FROM BASE OF HEEL TO TOP OF COLLAR)

REINFORCEMENT: ❒ FLEXIBLE ❒SEMI-RIGID ❒ FIRM
❒ REINFORCED ❒ NOT REINFORCED ❒

HEEL: OPEN
(SOLID PLASTIC HEEL) (LEATHER COVERED HEEL--NO PLASTIC)

FOOT PLATE TRIM LENGTH: ❒ MET HEADS ❒ SULCUS
❒ AS MARKED ON CAST



CAST MODIFICATIONS:

❒ DEPRESS AS MARKED

❒ NONE (AS CASTED)

CORRECT ANKLE TO 90°:

❒ AP ❒ ML ❒ BOTH

FORE FOOT:

❒ CORRECT TO 90°
❒ AS CASTED

SPECIAL INSTRUCTIONS

WE WILL ACCOMMODATE ANY SPECIAL REQUEST AS CLOSELY AS POSSIBLE; JUST INDICATE SPECIAL MODIFICATION OR OPTION BELOW.

❒ SHIP NEXT DAY UPS	❒ SHIP SECOND DAY UPS	❒ SHIP GROUND UPS
❒ SEND ___ CATALOGS	❒ SEND ___ ORDER FORMS	❒ SEND ____ UPS LABELS

CASTING INFORMATION FOR LAB USE ONLY

Cast Material	❒ Plaster	❒ Fiberglass	❒ Synthetic Sock		
Cast Information	❒ Duplicate Cast	❒ Shoe last	❒ Shoe to pour	❒ Caliper Plate Or Stirrup Included	
	❒ Casted over AFO	❒ AFO Included	❒ Metal Brace Included	❒ Duplicate shoe(s) Included	
Cast Style	❒ Wrap	❒ 2 Piece (bi-valve)	❒ Multiple Pieces	❒ Other	
Observation	❒ Satisfactory	❒ Damaged	❒ Tight	❒ To Low	❒ Flimsy (too thin)
Cast Marks	❒ Outside Marks	❒ Outside Verticals	❒ Outside Information	❒ Inside Marks	
Position	❒ Neutral	❒ Plantar Flexed	❒ Dorsi Flexed	❒ Inverted	❒ Everted
	❒ Not enough weight	❒ Flat Plantar surface	❒ Used Cast Board	❒ Severe Deformity	
Other	❒ Tracings Included	❒ Prosthetic Foot Included	❒ Inserts Included	❒ Soling Material Included	

OTHER INFORMATION FOR LAB USE ONLY

AMERICAN SHOE CORPORATION

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