

Transtibial CAD

Orlando Ph 407.852.6170 | Fx 407.852.6171
 Kansas: Ph 913.888.4200 | Fx 913.888.4244
 Tempe: Ph 480.894.1755 | Fx 480.921.9686
 Anaheim: Ph 714.961.2155 | Fx 714.961.2181
 CDC: Ph 480.377.2226 | Fx 480.377.2896

Workorder #:
(Lab Use Only)

Bill To: _____
Address: _____

Ship To: _____
Address: _____

Practitioner: _____
Phone #: _____

Patient Name: _____

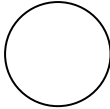
Height: _____ Left Male
 Weight: _____ Right Female
 Age: _____ Bilateral

Order Date: _____

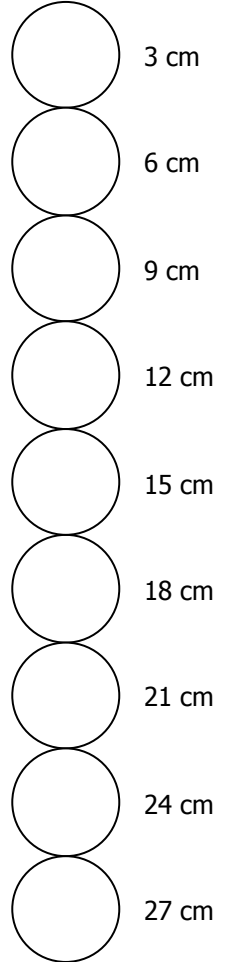
In-Office Request Date: _____ am pm

OPS invoice / NG encounter: _____

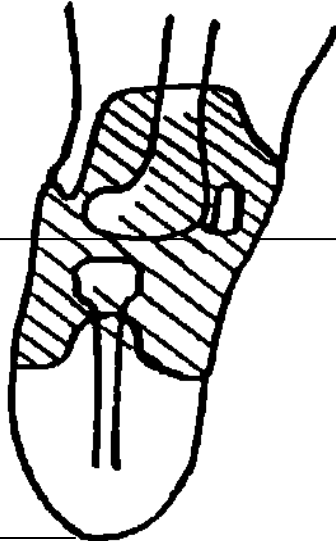
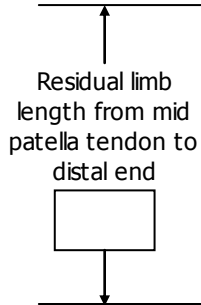
Proximal Circumference at
Mid-Patella Tendon Level:



Record circumferences 3cm
distal to patella tendon,
without brim, and every 3cm
thereafter



ANATOMICAL



Patella Tendon

- PTS
- PTB

DEVICE TYPE

- Carving Only
- Check Socket Only
- Check Socket & Carving

MATERIAL TYPE

- MPE
- Other _____

WORK ORDER TO FOLLOW

- Yes
- No

- Increase Ply for Sock Fit
Plys _____

SPECIAL INSTRUCTIONS:

