

Dynamic Control Orthosis (DCO) and Footwear Order Form

Return this form with cast to:

United States 2905 Veterans Hwy • Ronkonkoma • NY • 11779

T: 800.645.5520 • F: 800.419.0772

Canada 160 Markland Street • Markham • Ontario • L6C 0C6

T: 877.644.4344 • F: 877.551.3001

Lab Use Only

Opened By: _____

Date Received: ___ / ___ / ___

Incoming Postage: _____

Account # _____ P.O. # _____

Account Name: _____

E-Mail: _____

Practitioner: _____

Phone: _____ Fax: _____

Address: _____

City, ST/Province: _____

Zip/Postal Code: _____

Patient Name: _____

Date of Birth: ___/___/___ Sex: M F

Height: _____ Weight: _____ Shoe Size: _____

SHOES ENCLOSED

Primary Activity for Orthotic Use: _____

Diagnosis: _____

DYNAMIC CONTROL ORTHOTIS (DCO) Right Left Bilateral



DCO



DCO w/ Dorsi-Assist*



DCO w/ Variable ROM*

* Charge option

90 Degree Stop (Charge option) DCO w/ Overlap Hinge

Optional Topcovers

3/16" PPT Plastazote 1/8" Neoprene 1/8" Multi-color medium density EVA topcover

Post Specifications

Rearfoot Intrinsic Extrinsic

Post according to lab evaluation 0 Degrees 3 Degrees 5 Degrees

Forefoot Intrinsic Extrinsic

Post according to lab evaluation 0 Degrees 3 Degrees 5 Degrees

Heel Cup Depth

10mm 15mm 35mm (standard)

Required Measurements:

Width of forefoot at metatarsal heads ___ in Circumference above ankle ___ in

Width of ankle joint at widest point ___ in Circumference at 3" above ankle ___ in

All braces ship with a free STS Casting Sock. If no size is selected, a large sock will be sent.

Small Medium Large X-Large

Lab Cast Correction Fee:

Correction to the AFO after fabrication will incur charge. To avoid additional charges, casts must be taken with the ankle at 90 degrees neutral and the foot in subtalar neutral.

If order form is not completed, order will be made to meet these standard specifications:

Custom molded polypropylene foot orthosis • Free Motion ankle joint to integrated one-piece calf design • 35mm deep heel cup • Removable Medial and Lateral interface pads • Standard met length shell with compressible post to sulcus • Velcro® closure PPT® Ultralux® padded topcover to sulcus

FOOTWEAR: Shoe Size: Length_____ Width_____

NEW BALANCE: MEN'S AND WOMEN'S

- 927** - Motion Control Walker **1123** - Running Shoe
 Black White

AETREX: MEN'S

- Ambulator Classic Oxford Ambulator Stitched Oxford Ambulator Moc Toe Oxford
 Black Leather Brown Leather Black Leather Brown Leather
- Ambulator Lace-Up Boot Ambulator Single Strap Sierra Trail Runner
 Black Leather Brown Leather

AETREX: WOMEN'S

- Ambulator Classic Lace Ambulator Mary Jane Ambulator Striped Lace
 Black Leather Black Leather Black Leather
 Brown Nubuck Brown Nubuck Brown Nubuck
 Grey Nubuck

Larger Therapeutic Footwear Program Sizing Charts

NEW BALANCE FOOTWEAR (Sizes according to width and model)

	2A	B	D	2E	4E	6E
Men's 927			7-13, 14, 15, 16	7-13, 14, 15, 16	7-13, 14, 15, 16	7-13, 14, 15, 16
Women's 927		5, 6-11, 13	5-13	5-11, 12, 13		
Men's 1123		7-13, 14, 15, 16		7-13, 14, 15, 16		
Women's 1123	5-11, 12, 13		5-11, 12, 13	5-8, 9-11, 12, 13	5-11, 12, 13	

* Not all colors are available in the sizes and widths listed.

AETREX FOOTWEAR

Men's Sizes	
Ambulator Stitched Oxford	6.5-13, 14, 15, 16
Ambulator Moc Toe Oxford	6.5-13, 14, 15, 16
Ambulator Classic Oxford	6.5-13, 14, 15, 16
Ambulator Single Strap	6.5-13, 14, 15, 16
Ambulator Lace-up Boot	6.5-13, 14, 15, 16
Sierra Trail Runner	6.5-13, 14, 15

Women's Sizes	
Ambulator Mary Jane	5-11, 12, 13
Ambulator Classic Lace	5-11, 12, 13
Ambulator Striped Lace	4.5-11, 12, 13

* All shoes available in widths of medium, wide and extra-wide.