**Transfemoral Measurment Form**

Patient Registration :- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:DD/MM/YYYY

Side of Amputation :- Left Right Bilateral

Activity Level :- K1-K2 K2-K3 K3-K4

Distal End Type :- Conical Cylindrical Bulbous Ideal

Stump Muscle Type : Bony Loose Firm Ideal

Socket Type :- Quadrilateral Ischeal containment Hybrid Other\_\_\_\_\_\_\_

Casting Type :- Hand Cast Brim cast Jig cast CAD-CAM Saddal Cast Other :-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Socket Material :- Lamination PP Socket Other

Suspension Type :- TES Belt Locking Liner Suction Valve KISS Lanyard Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Note :-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_