

COMBO Order Form

2801 Dodds Ave., Unit 103, Chattanooga, TN 37407
 P : (423) 617-0901 | F : (423) 661-7473 | workorders@onesourceoandp.com | www.onesourceoandp.com

Billing and Shipping Information

OneSource Account # :

Contact for ordering or delivery questions

Contact :

Email :

Mobile Phone :

PO # :

Ship To:

Company :

Address :

City/ State/ Zip :

Contact :

Phone :

Fax :

Email :

Shipping Check Priority : Ground 2nd Day
 (shipping calculated separately per order)

Completion of this order form with the most accurate and up-to-date information, including all patient information, measurements, and construction information allows us to provide the highest quality product for you and your patient

Required Patient Information

Patient Initials : Height : ft. in. Weight : lbs.

First and Last Name Initial

Patient ID # : Impact Level : High Med Low Device Side: Left Right

Affected Side(s) : Left Knee Right Knee Both Knees

ALLARD AFO CHOICE

BlueROCKER® 2½
 ToeOFF® 2½

Recommended
May be considered

Shoe Size :
 (used as a guide to help determine Allard AFO size)

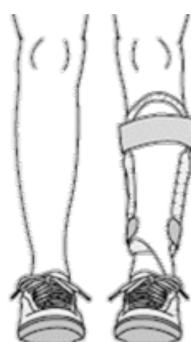
PADDING OPTIONS

- ComfortKIT™** (Recommended) Premium 5mm memory foam interface for patients requiring added cushioning and a more intimate fit due to the shape of the tibia, skin condition, diabetes, and/or activity level.
- SoftKIT™** Soft foam in 3mm.
- CoverKIT™** Soft interface combined with a spandex sleeve to cover the AFO (Recommended for venous insufficiency)

AFO ALIGNMENT (TOE IN/OUT)

Left Foot

- Standard (5-7 degrees toe out)
- Toe In: _____ (specify degrees)
- Toe Out: _____ (specify degrees)



Right Foot

- Standard (5-7 degrees toe out)
- Toe In: _____ (specify degrees)
- Toe Out: _____ (specify degrees)

cont'd

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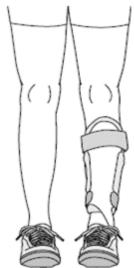
PREPARE PATIENT FOR FITTING & LEG TRACING

Below measurements are in:

in.

cm.

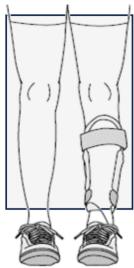
1. Evaluate patient standing. Observe patients functional standing posture, particularly toe in/out position.



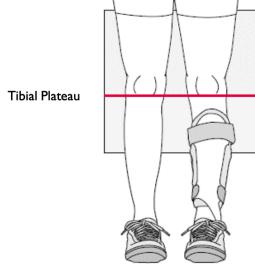
2. Patient should be supine. Be certain to duplicate standing and toe in/out posture observed in step one.



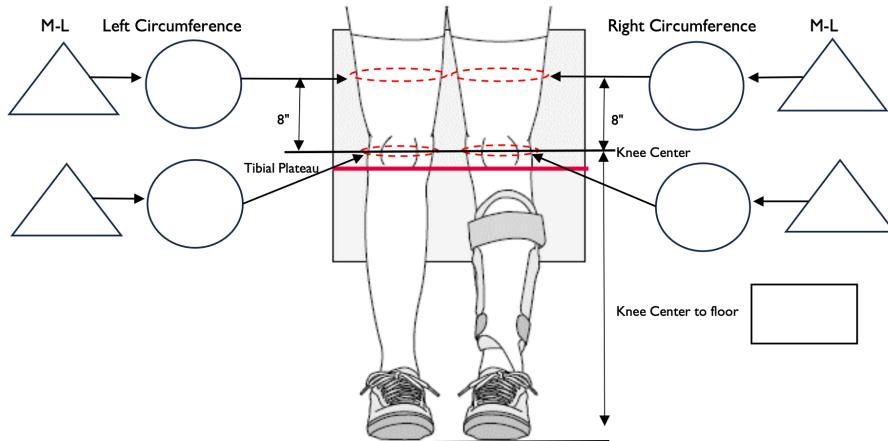
- 3a. Trace leg on tracing paper.



- 3b. Draw a horizontal line at level of Tibial Plateau.



- 3c. Take circumferential and M-L measurements, at knee center and 8" (20cm) above mid-patella.



Notes :