

PATIENT INFORMATION:

Patient Name: _____

DX: _____

Age: _____ Height: _____ Weight: _____

-
- Right
-
- Left
-
- Bilateral (symmetrical pathology)
-
-
- Bilateral (asymmetrical pathology)

CUSTOMER INFORMATION

Company: _____

Ship to: _____

Contact: _____ Phone: _____

PO: _____ Date Needed: _____

PATIENT PRESENTATION:
DESIGN: DRG Gauntlet (rigid outer shell) Lite Gauntlet (no rigid outer shell)

HINDFOOT ALIGNMENT:

- L R
-
-
-
- AS CASTED
-
-
-
- Vertical

ANKLE ALIGNMENT

-
- AS CASTED
-
- L R
-
-
-
- +3°DF
-
-
-
- +5°DF
-
-
-
- 90°
-
-
-
- 3°PF
-
-
-
- 5°PF
-
-
-
- Other _____

STANDARD CONFIGURATION

-
- BULID TO STANDARD CONFIGUATION
-
- PROXIMAL TO METS OUTER SHELL
-
- SULCUS INNER SHELL, ENCOMPASSES METS
-
- 10' HEIGHT
-
- LACE CLOSURE W SPEED HOOKS ABOVE SHOE
-
- PLASTIC DETERMINED BY WEIGHT

FOOT TRIMS:

-
-
- Proximal to Mets Trim (STD for DRG & lite)
-
-
-
- Sulcus Trim
-
-
-
- Encompass metatarsals (INNER SHELL or lite)
-
-
-
- Other: _____

FOREFOOT:

-
- AS CASTED
-
- L R
-
-
-
- Neutral Forefoot:
-
-
-
- Supinate Forefoot
-
-
-
- Pronate Forefoot

DESIGN:
PROXIMAL TRIM: L R 10" DRG STD L R Other: L R notch posterior
 7" Lite STD _____
OUTER SHELL DRG

-
- PP 3/32"
-
-
- CP 3/32"
-
-
- PP 1/8"
-
-
- CP 1/8"
-
-
- PP 5/32"
-
-
- CP 5/32"
-
-
- OTHER: _____

DRG Lite Control strap

-
- varus strap
-
-
- valgus strap
-
-
- Both
-
-
- NONE

Transfer : _____

Note: transfer NA for lite and Laces for closure only

CLOSURE SYSTEM:

-
- LACE (SPEED LACE ABOVE ANKLE) STD
-
-
- COMBO (LACE BELOW ANKLE VELCRO ABOVE)
-
-
- VELCRO

Special Instructions
LENGTHS

Foot: _____

height: _____

Internal Use

| | | | |
|-----|-------|-----|-------|
| PP | _____ | TFO | _____ |
| MOD | _____ | STP | _____ |
| TFI | _____ | SQC | _____ |

Date

Job Number