

# BK CHECK SOCKET ORDER FORM

Date Needed in Office: \_\_\_\_\_

**Bill To:**

Company: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Contact: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Ship To:**

Company: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Contact: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

PO#: \_\_\_\_\_

Shipping Check Priority:  Next Day Air  2nd Day  3rd Day  Ground

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

## Patient Information

Patient Name/Reference: \_\_\_\_\_

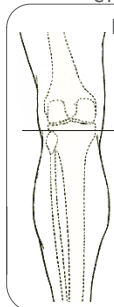
Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Age: \_\_\_\_\_

Left:  Right:  Amputation Level: BK  SYME

Activity Level: 1  2  3  4

## Measurements

### CIRCUMFERENCES



Level	Measurement
4"	_____
2"	_____
0"	_____
2"	_____
4"	_____
6"	_____
8"	_____

Length: \_\_\_\_\_

AP: \_\_\_\_\_

ML: \_\_\_\_\_

PML: \_\_\_\_\_

- Cast taken over skin
- Add thickness of liner
- Cast over liner
- Additional Reduction

\_\_\_\_\_ %

\*Standard 4% reduction unless otherwise stated.

Notes: \_\_\_\_\_

### SOCKET STYLES

- Patellar Tendon Bearing
- Modified PTB
- Total Surface Bearing

## Construction

### SOCKET MATERIAL

**INNER**

- Pelite:
- DE Pad:
- Proflex:
- PE:

**OUTER**

- PETG:
- Thermolyn:

### BRIM STYLE

- Velocity:
- Velocity SC:
- Velocity SCSP:

### ATTACHMENTS

- Low Profile Mounting Plate:
- Heavy Duty Mounting Plate:
- Other:

### NOTES

### SUSPENSION (Check all that apply)

Setup on customer supplied components

#### Shuttle Lock

- Type: \_\_\_\_\_
- Space for lock
- Evo supplied/installed

#### Sleeve

- Customer supplied
- Evo supplied
- Aura**
- Customer supplied

#### Expulsion

- Evo Expulsion Valve Kit
- Evo Expulsion Plate (VEP-001)
- Lyn Valve BK2
- Barb and Valve

#### Vacuum

- Evo Vacuum Valve Kit
- Evo Expulsion Valve Kit
- Barb and valve
- Evo Seal Plate
  - VEP-002
  - VSP-001
  - VSP-002

Please direct any questions to cs@ossur.com. Send casts to Evolution Industries, Inc. 7199 S. Conway Rd. Suite 100, Orlando, Florida, 32812. Send files to cs@ossur.com.