

# ARTICULATING WRAP - 532



**ORTHOMERICA**  
PRODUCTS, INC.

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Patient ID: \_\_\_\_\_ PO#: \_\_\_\_\_  Bilateral  Right  Left  
 Facility: \_\_\_\_\_ Practitioner: \_\_\_\_\_ Email: \_\_\_\_\_  
 Ship To: \_\_\_\_\_ Phone#: \_\_\_\_\_

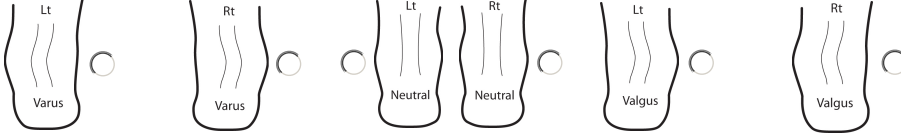
## MODIFICATION

**Left Ankle Flexion:** \_\_\_\_\_

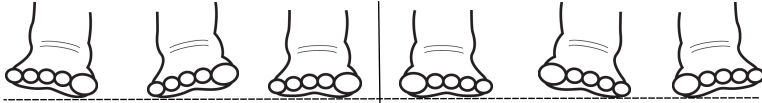
**Right Ankle Flexion:** \_\_\_\_\_

Specify finished mold alignments  
Flexion, Hind foot & Fore foot

### Hindfoot Alignment



### Forefoot Alignment \*



Modification Special Instructions:

**Patient Diagnosis:** \_\_\_\_\_

**Plantar Modifications:** \_\_\_\_\_

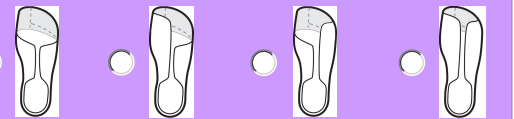
**Left Inner Boot  
Fore Foot Trim:**

N/A



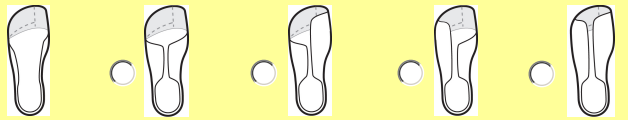
**Right Inner Boot  
Fore Foot Trim:**

N/A



**Left Outer  
Shell Trim:**

N/A



**Right Outer  
Shell Trim:**

N/A



## THERMOFORMING/GRIND & BUFF

**FOAM Inner Boot:** \_\_\_\_\_

**Thickness:** \_\_\_\_\_

**Material Type:** \_\_\_\_\_

**AFO Outer Shell: Plastic Type:** \_\_\_\_\_

**Plastic Thickness:** \_\_\_\_\_

**Transfer on Plastic:** \_\_\_\_\_

### FINISHED HEIGHT

Posterior Finished height = \_\_\_\_\_

**FOOT LENGTH** Finished foot length = \_\_\_\_\_

**JOINTS**

**STOPS**

**PADDING**

**Extra Navicular padding:** \_\_\_\_\_

**PADDING COLOR**

**EXTERNAL POSTING**

**TREADING**

Thermoforming Special Instructions:

Grind & Buff Special Instructions:

**\* Note:** Pronation or Supination alignments will be externally posted to neutral

Strapping Special Instructions:

## STRAPPING

**STRAP COLOR**

Transfer on Straps: \_\_\_\_\_