YANKE BIONICS
PROSTHETIC AND ORTHOTIC PATIENT CARE

CENTRAL FABRICATION SERVICES

CUSTOM AFO LAB ORDER FORM

yankebionics.com/cfab | 330-352-0963

ACCOUNT & BILLING

ACCOUNT / PRACTICE NAME | BILL TO | SHIP TO

PATIENT INFORMATION

PATIENT NAME | AGE | DIAGNOSIS / ICD-10 | HT | WT

SHOE SIZE | QTY | ☐ Pairs ☐ Right ☐ Left ☐ Bilateral

SUBMISSION TYPE

☐ COMB Scan ☐ Cast (plaster / fiberglass) ☐ Digital File (OBJ / STL) ☐ Duplicate from Previous Scan

DEVICE TYPE & MATERIAL

☐ Ankle Short Solid
☐ Articulated Short
☐ DAFO
☐ Floor Reaction AFO
☐ HKAFO
☐ Moon Boot / C.R.O.W.
☐ SMO
☐ UCBL
☐ Articulated
☐ Conventional
☐ Dorsi Assist
☐ Hip Abduction
☐ KAFO
☐ PTB
☐ Solid Ankle
☐ OTHER

SPECIFICATIONS

MATERIAL | THICKNESS | TRIMLINES | FOOT PLATE | COLOR | CORRECT CAST TO 90°

ANKLE JOINTS | PLANTAR FLEXION STOP | CONTROL STRAP | LEG LENGTH DISC. L/R

FOOT ORTHOTIC (FO) — IF APPLICABLE

FO TYPE | GENERAL ALIGNMENT | PLASTIC TYPE

MODIFICATIONS

☐ Metatarsal Relief: 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
☐ Toe Relief: 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
☐ Base of 5th Relief
☐ Navicular Relief
☐ Forefoot Post
☐ Hindfoot Post
☐ Toe Crest
☐ Toe Filler: 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
☐ Anterior Shell Add-On
☐ Control Strap — Valgus
☐ Control Strap — Varus
☐ Leg Length Discrepancy
☐ FO: Metatarsal Arch
☐ FO: Pronation/Valgus Design
☐ FO: Supination/Varus Design
☐ FO: Morton Extension

MEASUREMENTS

CIRCUMFERENCES (NOTE ALL LEVELS) | ML MEASUREMENTS

ADDITIONAL NOTES / SPECIAL INSTRUCTIONS