

CUSTOM SILICONE – MYOELECTRIC PROSTHESES ORDER FORM

— For Clinical Use Only —

Bill To:

Company Name: _____

Address: _____

City: _____

State/Prov: _____

Phone: _____

Fax: _____

US Tax ID # (for custom purposes): _____

Otto Bock Account Number: _____

Contact: _____

Email: _____

Date: _____

Ship To:

Company Name: _____

Address: _____

City: _____

State/Prov: _____

Phone: _____

Fax: _____

Purchase Order #: _____

Client Name/ID: _____

Affected Side: Left Right

NOTE:

- A standard **TRIAL liner** is opaque 20 shore and 2.0 mm thick. Electrodes and build ups, using Pastasil, will be created where necessary to represent the componentry incorporated in the device. If the device requires lamination, an initial lamination will be made. Although it is not included in the cost of the final liner, it is recommended to proceed with a trial to ensure a proper fit.

MYOELECTRIC PROSTHESES – please select appropriate option(s)		
<input type="checkbox"/>	88L3=P	Trial Liner (please also select desired option(s) for FINAL liner)
<input type="checkbox"/>	88L1=SM	Silicone Socket – no laminated frame
<input type="checkbox"/>	88L1=HM	Hybrid Socket – silicone with embedded lamination frame
<input type="checkbox"/>	88L1=BA	Roll-On Liner Only – interface to a laminated socket

Please specify components & codes below:

*please indicate if components need to be ordered by OB:

Hand		<input type="checkbox"/>
Wrist Unit		<input type="checkbox"/>
Battery	Internal: <input type="checkbox"/>	<input type="checkbox"/>
	External: <input type="checkbox"/>	
Battery Mounting Set		<input type="checkbox"/>
Battery Charger		<input type="checkbox"/>
Electrodes	13E200 Standard: <input type="checkbox"/>	<input type="checkbox"/>
	13E202 Suction: <input type="checkbox"/>	
Electrode Cables		<input type="checkbox"/>
PVC Glove		<input type="checkbox"/>
Colour of Prosthesis	OB Swatch #: _____	<input type="checkbox"/>
	Other – please specify: _____	

ADDITIONAL REQUESTS: