



ADVANCE TRADITIONAL BRACES

PLACE ACCOUNT LABEL HERE

Please use the most recent order form at sololabs.com/order-forms
Updated 8/7/24

P.O. Number

Order Options

ADDITIONAL CHARGES WILL APPLY

SHIPPING INFORMATION IF SHIP TO PATIENT OR LOCATION OTHER THAN THE ACCOUNT LABEL

PATIENT INFORMATION

Name

Shoe Size* Male Female (for shoe sizing)

Date of Birth Weight

Shoes/ Insoles Enclosed

Previous Rx # Date

- US Mail Labels (Qty 5)
- UPS Labels (Qty 5)
- RUSH** - 7-10 Business Days
- OVERNIGHT SHIPPING** (RUSH CHARGES DO NOT INCLUDE OVERNIGHT SHIPPING)

Street Address

City State & ZIP

Physician's Signature

Send Account Labels



Scan for order forms

To expedite the processing of your order, please call ahead with questions.

Activity Level: Non Ambulatory Low/Transfer Medium High/Active

Diagnosis:

Primary reason for the device:

Clinical Observation:

Ankle: Normal/Flexible Limited Fixed/Fused

Forefoot: Normal/Flexible Limited Fixed/Fused

Special Instructions:

ADVANCE TRADITIONAL

Left Only Right Only Bilateral



- LOW PROFILE**
- Full Flexion Hinge
- Permanent Fixed Hinge



- STANDARD**
- Full Flexion Hinge
- Permanent Fixed Hinge



- GAFFNEY FLEXOR**
- Dorsi Assist with removable anterior band



- DYNAMIC TAMARACK**
- Free Motion
- Dorsi Assist
- With Posterior Bracket
- Without Posterior Bracket

Top Cover: **EVA Swirl** Ebony Plastazote/PPT Spenco

Top Cover Length: **Met** Sulcus Full

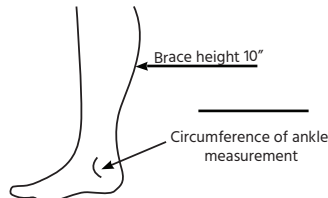
Rearfoot Post: Varus Valgus Degrees _____ **Lab Discretion**

Forefoot Post: Varus Valgus Degrees _____ **Lab Discretion**

Cast Modifications:

- Lab Discretion**
- Ankle:** Correct to Neutral Leave as Casted
- Forefoot:** Correct to Neutral Leave as Casted

Circumference Measurement:



Scan for product details

(Items highlighted in Bold are Standard)