

# Custom to Cast Lower Extremity Orthometry Form

**PATIENT INFORMATION**

Patient Name \_\_\_\_\_  
 Male  Female DOB: \_\_\_\_\_  
 Height \_\_\_\_\_ Weight \_\_\_\_\_  
 Specify Side(s)  Bilateral  Left  Right  
 Casting Date \_\_\_\_\_ RX \_\_\_\_\_

**FACILITY INFORMATION**

Practitioner \_\_\_\_\_ PO# \_\_\_\_\_  
 Facility \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone \_\_\_\_\_ Date Required \_\_\_\_\_

**PRODUCT SPECIFICATIONS**

Pelvic Band Type: \_\_\_\_\_  
 Hip Joint Type : \_\_\_\_\_

**Materials AK**  
 Anterior  Clamshell Plastic \_\_\_\_\_  
Type & finished thickness  
 Liner \_\_\_\_\_  
 Posterior Plastic \_\_\_\_\_  
Type & finished thickness  
 Liner \_\_\_\_\_

**Component Style AK**  
 Natural  
 Ischial  
 Quad  
 Other \_\_\_\_\_

**Knee Joints**  
 Free Motion  
 Drop Lock  
 Adj. Drop Lock  
 Spring Lever Lock  
 Step Lock  
 Other \_\_\_\_\_  
 Bar Size \_\_\_\_\_ X \_\_\_\_\_

Transfer Pattern: \_\_\_\_\_

**Materials BK**  
 Anterior  Clamshell Plastic \_\_\_\_\_  
Type & finished thickness  
 Liner \_\_\_\_\_  
 Posterior Plastic \_\_\_\_\_  
Type & finished thickness  
 Liner \_\_\_\_\_

**Component Style BK**  
 PLS  
 Semi-Solid  
 Solid Ankle  
 Floor Reaction  
 Transformer  
 Dorsal Wrap on Foot  
 Other \_\_\_\_\_

Articulating  
 Ankle Joint type: \_\_\_\_\_  
 Plantar Stop type: \_\_\_\_\_

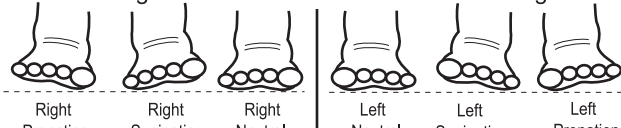
**ALIGNMENT**

**MUST BE COMPLETED TO PREVENT DELAY OF ORDER**

**Ankle Alignment** (Dorsiflexion - Plantarflexion)  
 Correct to \_\_\_\_\_ degrees  Do Not Correct (Cast Alignment OK)

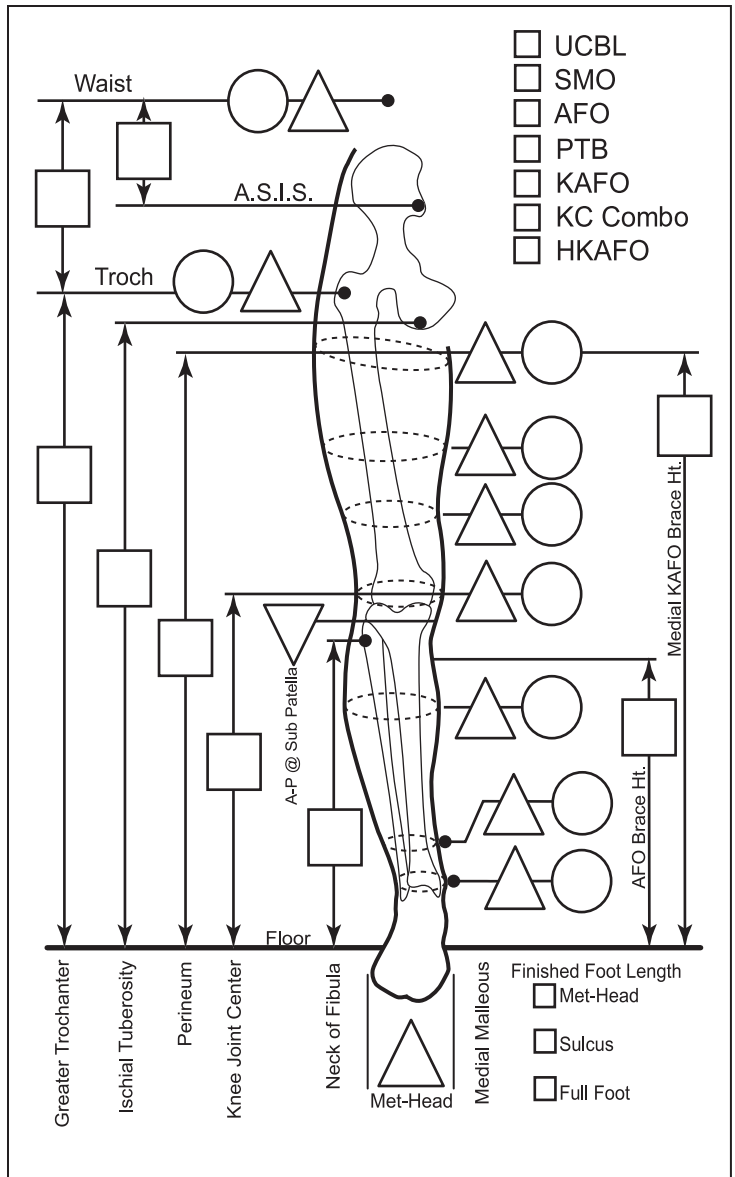
**Hindfoot Alignment**  
 Correct to Vertical  Do Not Correct (Cast Alignment OK)

**Forefoot Alignment**  
 Circle drawing below to indicate finished forefoot alignment



Right Pronation    Right Supination    Right Neutral    Left Neutral    Left Supination    Left Pronation

Include Met Height to Floor in Inches \_\_\_\_\_



**ADDITIONAL INFO**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Gencogrup Use Only**

Cast Height \_\_\_\_\_ "

Cast Length \_\_\_\_\_ "

Ankle M-L \_\_\_\_\_ "