

2ND Ankle Measurement Form



FREEDOM FABRICATION

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PATIENT INFORMATION

LEFT RIGHT BILATERAL

Dx _____ POUR AS IS

CORRECT CAST TO _____ °PF _____ °DF _____

FOREFOOT _____ °INVERSION _____ °EVERSION _____

HEIGHT _____ WEIGHT _____ ACTIVITY _____

*When casting, please externally rotate the tibia 3-5°
to accentuate the longitudinal arch*

OPTIONS

TENDON ORIENTATION:

MEDIAL* LATERAL

LAYUP:

LIGHT MEDIUM* HEAVY

CLOSURE:

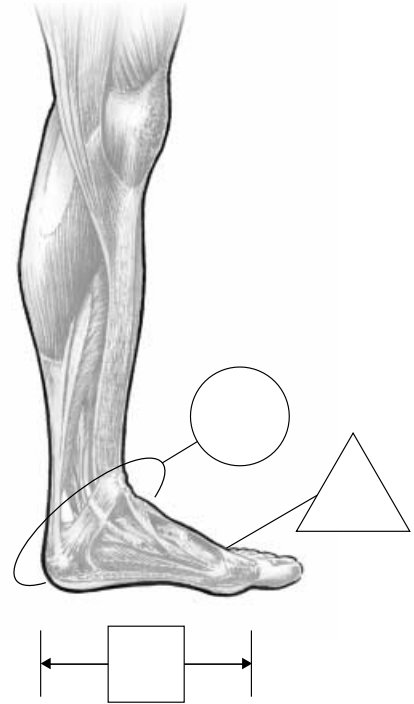
KEVLAR PULL*

BOOT LACE

BOOT HOOK UPPERS*

**Standard Options*

*Tendon Orientation: Medial;
Layup: Medium;
Closure: Kevlar Pull with Boot Hook Uppers*



ADDITIONAL INSTRUCTIONS

PATIENT IDENTIFICATION

SHIP TO _____

SHIP VIA _____

MEASURED BY

BILL TO _____

P.O. # _____ DATE DUE _____