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**WAMHOFF  
MOBILITY LAB**

Patient Name: \_\_\_\_\_

PO#: \_\_\_\_\_ Date: \_\_\_\_\_ Date Needed: \_\_\_\_\_

Practitioner: \_\_\_\_\_ Phone/Email: \_\_\_\_\_

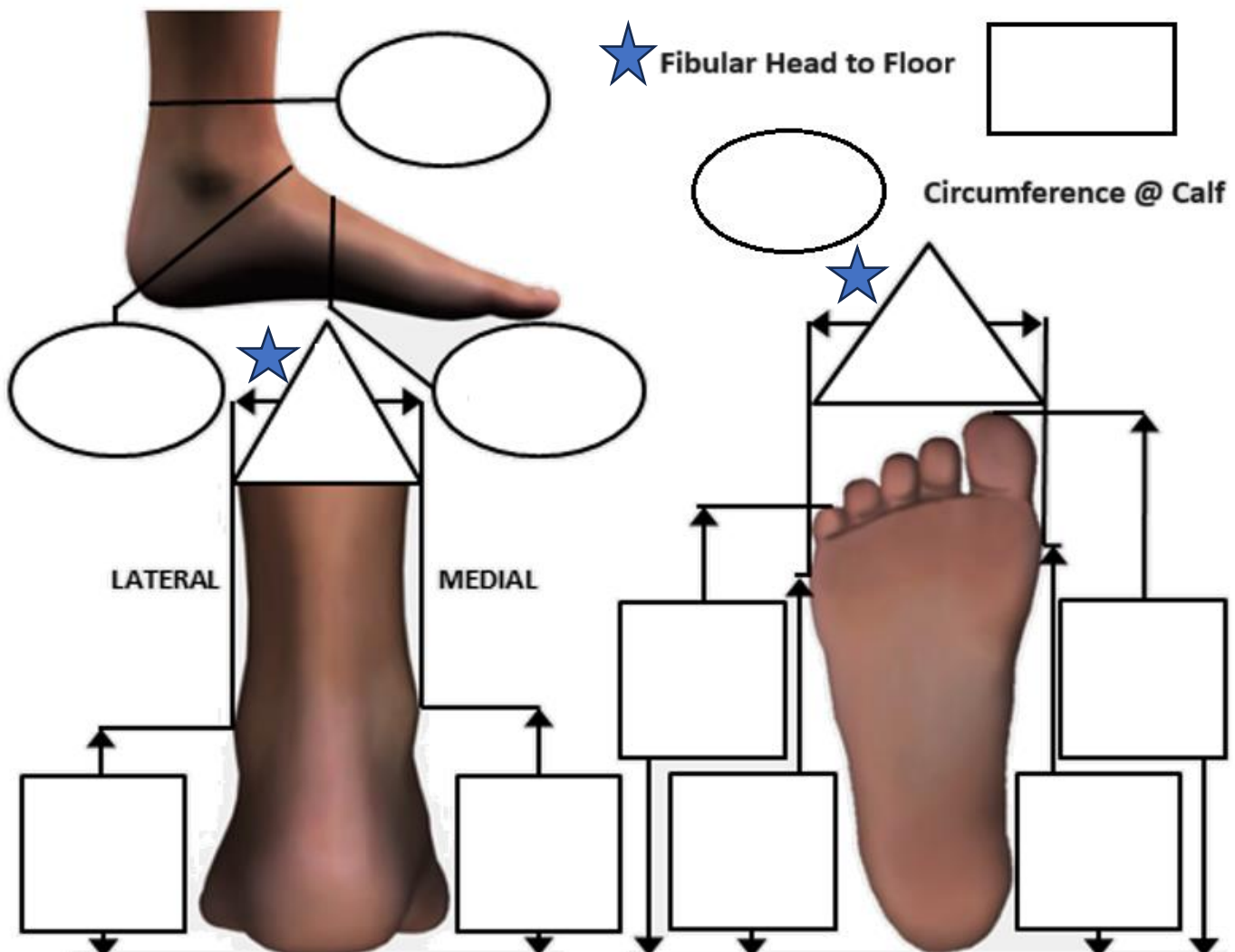
Facility: \_\_\_\_\_

Address: \_\_\_\_\_

Side: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

Diagnosis: \_\_\_\_\_

### Measurements



**AFO Type:** Solid Semi-solid PLS Articulated Ground Reaction Night-Stretching

PDE (please specify strut in notes) Other (please specify in notes)

**Alignment:** Leave Cast as is Correct cast to neutral Correct cast to specified angles below:

Sagittal: \_\_\_\_\_° PF DF Hindfoot: \_\_\_\_\_° Inv Ev Forefoot: \_\_\_\_\_° Inv Ev

Finished heel height: \_\_\_\_\_ Tibial Inclination Angle: \_\_\_\_\_°

**Modification Notes:**

**Thickness:** 1/8 5/32 3/16 1/4 **Plastic:** Polypro CoPoly ProComp Other:

**Plastic Color/Transfer Pattern:** \_\_\_\_\_

**Hindfoot Posting:** None Full Medial Lateral **Material:** Plastic Crepe Cork

**Forefoot Posting:** None Full Medial Lateral **Material:** Plastic Crepe Cork

**Joints:** Tamarack Tamarack DA Double Action Triple Action Other:  
(85 durometer standard)

**Posterior/PF Stop:** Snapstop PF Limiter X-Tension PAS-100 Other:

**Molded Inner Boot:** 3/32 1/8 5/32 3/16 Puff ProFlex OPTek Flex Northvane

**Other Additions** (i.e. flexible tongue, anterior panel, ClickReel, reinforcements, wedging, etc):

**Padding Thickness:** 1/16 1/8 3/16 1/4 **Material:** Puff P-Cell Aliplast Other:

**Padding Location(s):** Proximal Calf Malleoli Arch Navicular Plantar Surface Full Lining Other:

**AFO Height:** \_\_\_\_\_ **Trimline Specifications:** \_\_\_\_\_

**Foot Plate:** Full Sulcus 3/4 **Met Heads:** 1<sup>st</sup> Met IN OUT 5<sup>th</sup> Met IN OUT

**Straps:** Proximal Calf Supramalleolar In-Step Forefoot **Color:** \_\_\_\_\_

**Material:** Velcro only Dacron Vinyl **Closure:** D-Ring Velcro Other:

**Notes:**