

Work Order #



ARIZONA AFO, INC.

4825 East Ingram Street, Mesa, AZ 85205-3212
(877) 780-8382 Fax: (480) 461-5187 www.ArizonaAFO.com

Moore Balance Brace

Standard Feature

- Velcro Closure
- Intrinsic Varus/Valgus control (no extrinsic posting available)
- Sulcus Length
- Padded Tongue

MBB Diabetic Insole

- Non-custom dual density PPT flat insert to place in shoe under the brace.

Shoe Size: _____

Color

Black



Tan



Joint Types



Oklahoma



Tamarack®



Tamarack® w/Dorsi-Assist



MBB



MBB Extended



Articulated

Joint Options:

- Oklahoma
- Tamarack®
- Tamarack® w/dorsi-assist



Articulated

Joint Options:

- Oklahoma
- Tamarack®
- Tamarack® w/dorsi-assist

PATIENT INFORMATION

Name: _____ Last _____ First _____

PO# _____ Male Female Right Left Bilateral

Age: _____ Height: _____ Weight: _____

SHIPPING AND BILLING ADDRESSES

Practitioner: _____

Provide email to receive an email alert once this order has been shipped.
Email: _____

Facility Name: _____ Phone: _____ Fax: _____

SHIP TO: _____ BILL TO: _____

MANUFACTURING AND SHIPPING

MFG: 3 DAY RUSH (\$75.00) 7 DAY RUSH (\$50.00)

SHIP: GROUND 3 DAY AIR 2 DAY AIR

OVERNIGHT OTHER _____

RELATIVE DIAGNOSTIC CODES:

- Muscle Weakness (728.87)
- Ataxia, Muscular Incoordination (781.3)
- At risk / Hx of falls (V15.88)
- Gait abnormality (781.2)
- Ankle pain and support (729.5)
- Instability of joint, ankle & foot (718.87)
- Dropfoot (736.79)
- Hemiplegia (438.20)

Special Instructions: If you do not want the dorsi-plantar angle of the cast set to our recommendations, please choose:

- LEAVE CAST EXACTLY AS IS
- CORRECT ANKLE VARUS/VALGUS
- OTHER _____
- CORRECT FOREFOOT TO NEUTRAL

(If ankle and/or forefoot are correctable, it is highly recommended that you capture that at the time of casting to obtain best results)

REMARKS: _____