CERTIFIED

Certified Orthopedics, Inc.
2415 E. Mulberry St. Unit 7
Fort Collins, CO 80524
ph 970-482-7116 • fax 970-498-9529
www.certifiedortho.com

CROW WALKERS - ORDER FORM

PATIENT

First Name: _____

Last Name: _____

Age: _____ Sex: _____ Height: _____ Weight: _____

Diagnosis: _____

_____

Phone #: _____ Fax #: _____

☐ Right ☐ Left ☐ Bilateral

PRACTITIONER

Date: _____ P.O.#: _____

Facility: _____

Address: _____

_____

Contact Name: _____

Ship via: _____

Requested Date of Delivery: _____

(Please allow for shipping time)

STYLES

☐

CRO-10 Traditional CROW

☐ PTB Height

☐

SLA-100 Stabilizer Leather Healing Walking Boot

☐ PTB Height

☐ **Cast**

☐ **Scan**

FABRICATION INSTRUCTIONS

PLASTIC

☐ 3/16" ☐ 1/4" (Standard)

Color: _____ (Black - Standard)

REMOVABLE INSOLE MATERIAL

☐ 1/2" Plastazote + 1/4" PPT (Standard)
☐ Diabetic Tri-Lam (Plastazote/PPT/Puff)
☐ Partial Foot Toe Filler
☐ Other: _____

LINER MATERIAL - POSTERIOR

☐ 3/16" Plastazote ☐ 1/4" Plastazote
☐ 3/16" Aliplast ☐ 1/4" Aliplast (Standard)

LINER MATERIAL - ANTERIOR

☐ 3/16" Plastazote ☐ 1/4" Plastazote
☐ 3/16" Aliplast ☐ 1/4" Aliplast (Standard)
☐ Other: _____

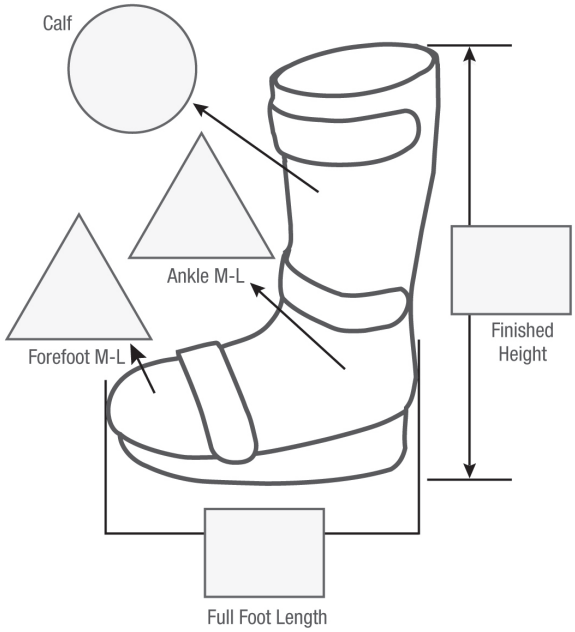
STANDARD CROW WARLKER INCLUDES:

- Standard Modification
- Heel to Toe Rocker Sole
- 1/4" Black CoPoly
- 1/2" Plastazote + 1/4" PPT Removable Insole
- 1/4" Aliplast Liner - Posterior and Anterior
- 3 - 1.5" Straps (1 on Calf; 1 on Proximal Ankle; 1 on Forefoot)

ROCKER SOLE STYLE

☐ Mid Rocker Sole
☐ Heel-to-toe Rocker Sole
☐ Toe-only Rocker Sole
☐ Severe Angle Rocker Sole
☐ Negative Heel Rocker Sole
☐ Double Rocker Sole

MEASUREMENTS



ADDITIONAL INFORMATION: _____

_____

_____