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CERTIFIED

CUSTOM GO AFO ORDER FORM

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First Name: _____
Last Name: _____
Age: _____ Sex: _____ Height: _____ Weight: _____
Diagnosis: _____
Phone #: _____ Fax #: _____
☐ Right ☐ Left ☐ Bilateral
Cast Scan

P
R
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Date: _____ P.O.#: _____
Facility: _____
Address: _____
Contact Name: _____
Ship via: _____
Requested Date of Delivery: _____

(Please allow for shipping time)

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GO-100C
GO AFO Custom



GO-150C
GO AFO Custom w/
Foot Orthotic
UCBL



GO-300C
GO AFO Custom w/
Molded Inner Boot
LDPE Boot
Flexible Boot



GO-500C
GO AFO Custom w/
Partial Foot
Transmet
First Ray
Lateral Column



GO-200C
Custom GO
AFO Short

GO-200C Options:

w/Foot Orthotic
w/UCBL

w/Molded Inner Boot
LDPE Boot
Flexible Boot

w/Partial Foot

Transmet
First Ray
Lateral Column

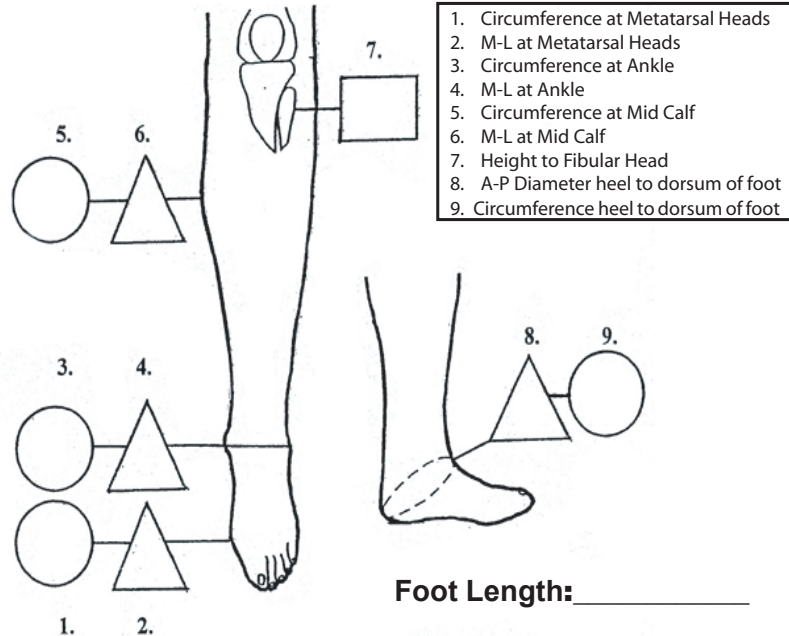
CAST PREPARATION INSTRUCTIONS

ANKLE ☐ As Is ☐ Correct to 90°
☐ Amount _____° ☐ Dorsi ☐ Plantar
HINDFOOT ☐ As Is ☐ Correct to Neutral
FOREFOOT ☐ As Is ☐ Correct to Neutral
Metatarsal Pad: Amount _____" S.T. Modification
Other Modifying Instructions: _____

ADDITIONAL OPTIONS

Open Heel Trim Line Closed Heel Trim Line
Extended Trim Line to Control Forefoot Medial Lateral
Correction Flare padded/lined Valgus/Medial Varus/Lateral
Proximal Trim Line Flare
Footplate Length Full Foot (Std) Sulcus Proximal Metheads
Add Pretibial Shell
Add Molded Calf Lacer
LDPE Calf Lacer Flexible Plastic Calf Lacer
Liner: _____ (Specify Area & Material)
Pads: _____ (Specify Area & Material)
Additional Straps (specify) _____
Plastic (Pro-Comp Standard) _____

ADDITIONAL INFORMATION:



Foot Length: _____

STANDARD DYNAMIC AFO INCLUDES:

- Standard Modifications
- Procomp Carbon Reinforced Plastic
- GO AFO Dynamic Carbon Strut
- Ankle Reinforcement (Medial & Lateral)
- Custom Foot Orthotic, UCBL, Inner Boot, and/or Partial Foot (Depending on Model Selected)
- Desired Trim Lines, Desired Flares, Desired Footplate Length
- Pretibial Strap, Ankle Strap, and/or Dorsum Strap
- Dorsum Overlaps and Malleolus Pads