



G • R • A • C • E  
 PROSTHETIC  
 FABRICATION, INC.  
*"Dedicated to Excellence"*

CAD-CAM AK  
 ORDER FORM

Patient Name \_\_\_\_\_ AK \_\_\_\_\_ BK \_\_\_\_\_ Left \_\_\_\_\_ Right \_\_\_\_\_

Caucasian \_\_\_\_\_ Negroid \_\_\_\_\_ Other \_\_\_\_\_ Color Swatch # \_\_\_\_\_ Shoe Size \_\_\_\_\_

Heel Height \_\_\_\_\_ Foot Length \_\_\_\_\_ Ischial Tuberosity to Floor \_\_\_\_\_ Knee Center \_\_\_\_\_

MPT to Floor \_\_\_\_\_ Pelvic Circ. \_\_\_\_\_ Calf \_\_\_\_\_ Ankle \_\_\_\_\_

Company \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_ PO# \_\_\_\_\_

Fabrication Instructions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Components Desired: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

CAD-CAM AK Measurements:

Ischial Tuberosity to Distal End of Residual Limb \_\_\_\_\_

Stump Length \_\_\_\_\_ Suction \_\_\_\_\_ Partial Suction \_\_\_\_\_

Brim Style: (Circle) Quad NML SNML Aggressive

0 \_\_\_\_\_ Special Instructions: \_\_\_\_\_

2 \_\_\_\_\_

4 \_\_\_\_\_

6 \_\_\_\_\_

8 \_\_\_\_\_

10 \_\_\_\_\_

Shipping (Circle) UPS GROUND 2<sup>ND</sup> DAY 3 DAY NEXT DAY AIR

7928 Rutilio Court \* New Port Richey, FL \* 34653 \* 800-940-LEGS (5347) \* Fax 727-842-2264

www.gpfinc.com