ÖSSUR ARMS - i-DIGITS FABRICATION ORDER FORM

Return shipments to: Össur Custom Solutions, 6640 Riverside Dr, Suite 360, Dublin, OH 43017 For other inquires: touch.fabrication@ossur.com



FACILITY INFORMATION (Billing)

Account # Shipping same as billing address

Clinician Name Ship to Address

Company Name Company Address

City State Zip

Telephone

Purchase Order #

Sales Quotation# Ship Via Next Day 2 Day

Please provide email address or fax number for order confirmation

REQUIRED PATIENT INFORMATION SIDE(S) Last Name: First Name: LEFT RIGHT

| INCLUDED ITEMS | ALTERNATIVE PARTS USED | | | | | | | | |
|--|------------------------|--------------|--------------------|------------------|-------------------------------|--------------------|------------------|-----------------------|--------------------|
| Kit includes: 1. Fitting instructions manual 2. Silicone diagnostic socket and frame 3. Plaster model to modify 4. Digit(s) with plate for alignment 5. Alternative Parts Kit | CHECK USED PARTS | DESCRIPTION | QUANTITY IN KIT | CHECK USED PARTS | DESCRIPTION | QUANTITY IN KIT | CHECK USED PARTS | DESCRIPTION | QUANTITY IN KIT |
| | | Nothing Used | X | | Thumb Size 5 | 1 | | Flat Mounting Plate R | 1 |
| | | Size 6 digit | 1 | | Bellows | 1 | | Flat Mounting Plate L | 1 |
| | | Size 5 digit | 1 | | Wristband | 1 | | LP Remote Electrodes | 2 |
| *All items in the kit must be returned with the diagnostic package or additional fees will result. | | Size 3 digit | 1 | L R | Stepped Mounting Plate Medium | 1/ea | | Compact Electrodes | 2 |
| | | Size 2 digit | 1 | L R | Stepped Mounting Plate XS | 1/ea | | | |

NEXT STEP

| DIAGNOSTIC | |
|------------|--|
| PROSTHESIS | |

REQUESTS

Bilateral user modifications to improve independence

Position anchor points for radial suspension strap

Other

| DEFINITIVE | |
|------------|--|
| PROSTHESIS | |

| SOCKET COLOR | FRAME COLOR | | FRAME MATERIAL | |
|---|---|---|----------------|--|
| Black | Color (i.e. Black, Blue, Red, | Fiberglass Lamination | | |
| Gray Battery Color | Otto Back Caucasian | | Other | |
| Other such as Red or Blue | Freds Legs Style | Note: Carbon fiber is conductive and cannot be used with myoelectric devices. FRAME FINISH Smooth Finish Weave Featured (Carbon Look) Finish Notes: | | |
| (Please include example print-out or swatch of color) | Other If using a swatch provider other than To | | | |
| Hand-mixed Skin Tone based on | a physical swatch Hand-mixed Skin Tone bas | | | |
| Swatch # | Swatch # | | | |
| by | by | | | |

NOTES

OTHER

Bilateral user modifications to improve independence Zipper modification to prevent skin pinching

Position anchor points for radial suspension strap Material in palm for increased friction during grasp

NOTES

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| CHECKEIST | | | | |
|--------------------|--|--|--|--|
| INITIAL TO CONFIRM | REQUIREMENTS (See associated "Fitting Instructions" pages) | | | |
| | I mounted the electrodes in the silicone socket (pg2) | | | |
| | I aligned and mounted the digits to the diagnostic frame (pg3) | | | |
| | I modified the positive model (pg4) | | | |
| | I marked the trimlines and electrode locations on the positive model (pg4) | | | |
| | I packaged the positive model, socket, frame, componentry, and paperwork for return without damage | | | |