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www.fdmotion.com

Lab to Call Doctor: Date _____

Date Received in Lab: _____

**SMO
BRACE
ORDER FORM**

Doctor's Name: _____

Doctor's Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Patient Name: _____

M F DOB: ____/____/____

Height: _____ Weight: _____

Left Foot Right Foot Bilateral

Diagnosis: _____



BOSS SMO

Clinical Indicators

- Pediatric or Adult
- High Tone Supination that improves when prompted with only moderate resistance

Suggested HCPCS Codes

L1907
L2330

Benefits

- Provides total contact support for the foot & ankle.
- Provides support to patients with severe pronation or low muscle tone.

Corrections & Posting

Intrinsic Corrections

Build as Cast (Do not put into Neutral)

OR

Forefoot

- Neutral (Standard)
- Varus _____ Degrees
- Valgus _____ Degrees

Rearfoot

- Neutral (Standard)
- Varus _____ Degrees
- Valgus _____ Degrees

Ankle

- Neutral (Standard)
- Varus _____ Degrees
- Valgus _____ Degrees

Extrinsic Posting

- Extrinsic Heel Post
 - Neutral
 - Varus _____ ° (R / L / BL)
 - Valgus _____ ° (R / L / BL)
 - Heel Lift _____ mm. (R / L / BL)

Shell

Shell

- Rigid (5 mm Polypro) (Standard)
- Semi Flex (3 mm Polypro)
- Carbon Fiber (Additional \$70)

Foot Plate Length

Meta Length

Total Brace Height

Supramalleolar

Brace Heel Cup

Mid-Achilles Height

Shell Color

- Black (Standard)
- Pink Polypro
- Blue Polypro

Closure/Padding

Closure

Velcro Straps (Standard)

Interior Padding

- 3 mm EVA (Standard)
- None

Padding Length

- Meta Length (Standard)
- Sulcus Length
- Full Length

Accommodations

Device Accommodations

- None
- Mortons Extension
- Reverse Mortons Extension

Removable Orthotic

- Removable Custom Orthotic Built into Brace (Additional \$100)
- Semi-Rigid Shell
- EVA Top Cover (3mm)
- EVA Bottom Cover (1mm)

Order Options

Rush Order

- 5 Day Fabrication Rush \$100.00

Shipping

- Next Day \$100.00

Please Mark Areas to Offload / Additional Comments



Measurements

Foot Length (L): _____mm

Ball Width (W): _____mm

Ball Girth (B): _____mm

Instep Girth (I): _____mm

Heel Girth (HG): _____mm

Heel Width (HW): _____mm

Lower Leg Circumference (C) (20 cm from ground): _____mm

