

ORDERING CUSTOM-MADE PRODUCTS

MalleoTrain®



BAUERFEIND.COM

Fax UK ????????

Patient name _____

Quotation only

Foot
 right left

Color
 titanium natural

Extras
 Velcro fastening*

Measuring points for pads**

① _____
 ② _____

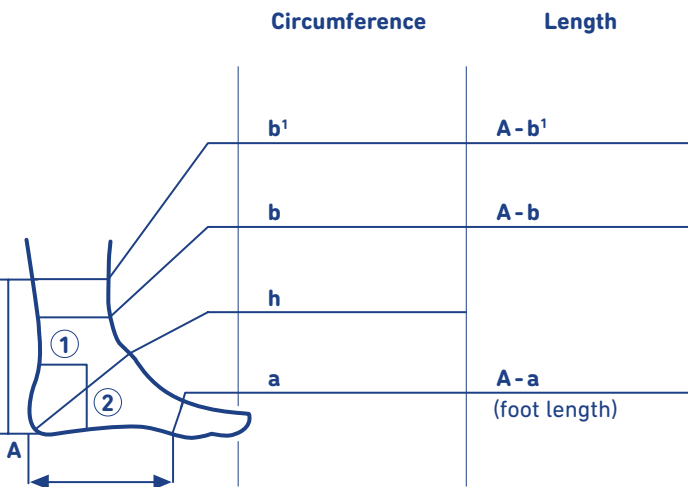
Patient details
 male female
 obese muscular

Age _____ Height _____

* subject to additional charge

** special position of the pads (the size and position of the ankle and its position differ substantially from the standard measurements)

The purchaser is responsible for ensuring that all size information is correct. Custom-made solutions cannot be returned.



All measurements must be entered to ensure the right treatment is provided.

- b' Calf sleeve (at least 16 cm above point A)
- b Smallest circumference above the ankle
- h Instep (circular measurement of the instep over the heel)
- a Circumference behind the metatarsophalangeal joint
- A Heel
- A-a Foot length without toe

- Caution:**
- Only specify the pad measurement points if special positioning is required.
 - Distance ① from the inside to the outside of the ankle (measured horizontally across the Achilles tendon)
 - Distance ② from the inside to the outside of the ankle (measured across the sole of the foot)

Stamp

Customer No. _____

Signature _____

Date _____

