

ORDER FOR CUSTOM-MADE PRODUCTS

MalleoTrain®

BAUERFEIND.COM

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Identifier _____
(e.g. patient name, abbreviation) _____

Fax Germany +49 (0)800 001 05 25
Fax Austria +43 (0)800 44 30 131
Fax Switzerland +41 (0)5 64 85 82 59

Quotation

Order

Foot

Right Left

Color

Titan Nature

Extras

Velcro fastening*

Measuring points for pads**

① _____

② _____

Patient details***

Male Female

Obese Pronounced muscles

Age _____ Height _____

* Subject to additional charges

** Special position of the pads (position of ankle bones differ substantially from the standard measurements)

***Optional; please specify special anatomical features to ensure an accurate fit of the finished product.

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

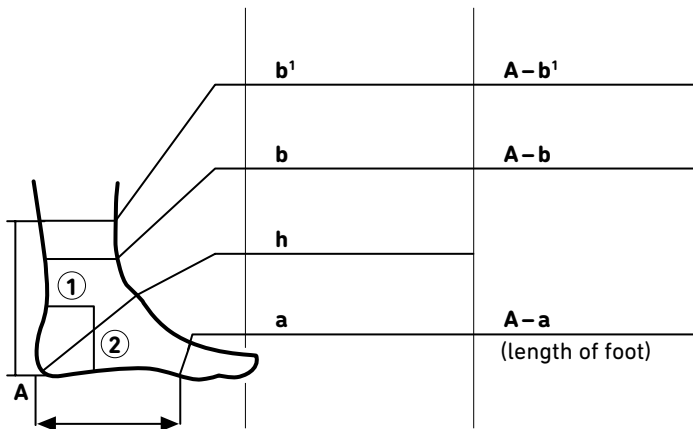
Stamp

Customer no. _____

Signature _____

Date _____

Circumference **Length**



All measurements must be entered to ensure proper treatment.

b^1 Base of calf: Measure the circumference at least 16 cm above the heel (A).

b Smallest circumference above the ankle bone

h Instep (circular measurement of the instep over the heel)

a Circumference behind the MTP joint of the little toe

A Heel

$A - a$ Foot length without toe

Notes:

- Only specify the pad measurement points if special positioning is required.
- Distance ① from the medial malleolus to the lateral malleolus (measured horizontally across the Achilles tendon)
- Distance ② from the medial malleolus to the lateral malleolus (measured over the sole of the foot)