

Beställningsedel College Park *Venture*



CUSTOMER #	P.O.#	DATE
PROSTHETIST INFORMATION		
BILLING		SHIPPING (LEAVE BLANK IF SAME AS BILLING)
FACILITY/ATTN:		FACILITY/ATTN:
ADDRESS		ADDRESS
CITY	STATE/PROV	CITY
COUNTRY	POST	COUNTRY
PHONE	FAX	PHONE
CARRIER* <input type="checkbox"/> UPS <input type="checkbox"/> OTHER		DATE REQUIRED
		TIME
		EMAIL
PATIENT INFORMATION		
PROSTHETIST NAME		REQUISITIONER
PATIENT ID		
NOTES		

Art.nr. Right: 761300-1XX

Transtibial Transfemoral

Art.nr. Left: 761300-0XX

Transtibial Transfemoral

PART ID	SIDE	SHELL COLOR	MOUNTING	SIZE	WIDTH	FIRMNESS CATEGORY	
V	L					G	Additional Accessories: <input type="checkbox"/> Shelltread <input type="checkbox"/> Exo Block <input type="checkbox"/> Exo Alignment Tool
V	R					G	

Caucasian	C	Endo	EN	21-30cm	Narrow	N
Tan	T	Exo	ALX		Wide	W
Brown	B					
Jet Black	J					

24-30cm only
College Park suggests the Wide option for male patients.

WEIGHT KG	0-45	46-54	55-63	64-72	73-81	82-91	92-100	101-113	114-125
SIZE CM	21-24								
LOW IMPACT	1	1	2	3	3	4	4	5	N/A
MODERATE IMPACT	1	2	3	3	4	4	5	5	N/A
HIGH IMPACT	2	3	3	3	4	4	5	5	N/A
SIZE CM	25-30								
LOW IMPACT	1	1	2	3	3	4	4	5	5
MODERATE IMPACT	1	2	3	3	4	4	5	5	N/A
HIGH IMPACT	2	3	3	4	4	4	5	5	N/A

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