



Custom From Measurement Noodle Order Form

www.kineticresearch.com

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 Email: email@kineticresearch.com

Company: _____

Location: _____

PO#: _____

Date: _____

Practitioner: _____

Contact #/Email: _____

Patient name: _____

Age: _____ Height: _____ Weight: _____

Male Female

Activity level: _____

Pathology: _____

Ankle Alignment: 5° DF
 90°
90° on 3/8" Heel

AFO Height: _____

Footplate Length: _____

Noodle AFO Style:

Cuff: Posterior Classic
 Posterior Hemi-spiral
 Anterior TA

Strut: Lateral Medial

Flexibility:

| | |
|---------------|---------------|
| Strut: | Footplate: |
| Flexible | Flexible |
| <u>Normal</u> | <u>Normal</u> |
| Stiff | Stiff |
| Extra Stiff | Extra Stiff |

All models are set to Neutral in the Coronal plane

Pretibial Shell*:

T-Strap*:

Color:

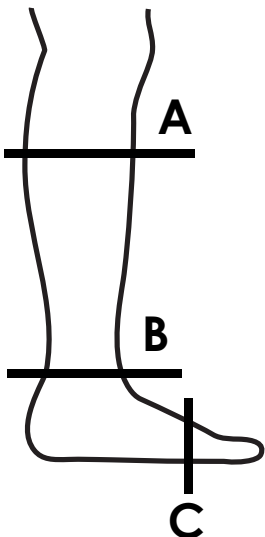
Black
 Beige*
 Fabric*: _____

Shipping:

Ground
 3-Day
 2-Day
 Next Day PM
 Next Day AM

All measurements must be filled in or fabrication will not start

Left Right



| | | Left | Right |
|---------------------|---------------|------|-------|
| A- Calf | Circumference | | |
| | M/L | | |
| | Height | | |
| B- Ankle | Circumference | | |
| | M/L | | |
| | Height | | |
| C- Metatarsal Heads | Circumference | | |
| | M/L | | |