college park — PRODUCT ORDER FORM

CUSTOMER #	P.O.#	DATE

PROSTHETIST INFORMATION

BILLING		SHIPPING (LEAVE BLANK IF SAME AS BILLING)	
FACILITY/ATTN:		FACILITY/ATTN:	
ADDRESS		ADDRESS	
CITY	STATE/PROV	CITY	STATE/PROV
COUNTRY	POST	COUNTRY	POST
PHONE	FAX	PHONE	FAX
CARRIER* ☐ UPS ☐ OTHER		DATE REQUIRED	TIME
		EMAIL	

PATIENT INFORMATION

PROSTHETIST NAME	REQUISITIONER
PATIENT ID	
NOTES	

orbit™

M3

PART ID	SIDE	SHELL COLOR	MOUNTING	SIZE	FIRMNESS CATEGORY	
OR	L		EN		G	
OR	R		EN		G	

SHELL COLOR	
Caucasian	C
Tan	T
Brown	B
Jet Black	J

SIZE: 21-30cm

FIRMNESS CATEGORY: 1-6

Additional Accessories:
☐ Shelltread

WEIGHT KG	0-63	64-81	82-100	101-125	126-150
SIZE CM	21-30				
LOW-MODERATE IMPACT	1	2	3	4	5
HIGH IMPACT	2	3	4	5	6

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