

Transtibial Laminated Socket Work Order Form

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**WAMHOFF
MOBILITY LAB**

Patient Name: _____

PO#: _____ Date: _____ Date Needed: _____

Practitioner: _____ Phone/Email: _____

Facility: _____

Address: _____

Side: _____ K-Level: _____ Height: _____ Weight: _____ Age: _____ Sex: _____

Model Type: Cast Diagnostic Socket No Modifications Needs Modifications

Modification Notes:

Alignment: Bench Alignment Transfer Alignment Other (please specify): _____

Lamination Layup: K1 Low Activity K2 Moderate K2 Moderate K3 High Activity K3 K4

Carbon Non-Carbon (Basalt) Non-Carbon (NSP)

Socket Color/Design:

Flexible Inner: Full-Length Proximal Third Posterior Brim Only

Pe-Lite Bocklite Proflex OPTek Flex Orfitrans Excel OssurFlex

Proflex w/ Silicone OPTek Flex Comfort Orfitrans Extra Soft w/ Silicone Northvane

End Pad: 1/8" | 3mm 3/16" | 5mm 1/4" | 6mm 3/8" | 8mm 10mm 1/2" | 12mm 15mm

Plastazote Bocklite Pe-Lite Silicone (5mm or 10mm only)

Lock: Coyote AirLock Coyote EasyOff Bulldog 3Genesis Fillauer Shuttle Lock

Ossur Icelock 621 Ossur Icelock 4-Hole Ossur Icelock 562 Hybrid Other:

Valve (Threaded): KISS BK Lyn Ossur 551 Ossur VacuValve CA Aria Other:

Valve (Distal Expulsion): Bulldog TP5 Ossur Icelock 544 CA Aria HV Plate Other:

Revo/Click Reel: Panels drawn on model 1 Panel (Gastroc) 3 Panel (Gastroc + Tibs) Other:

ClickReel Placement:

Vacuum: Limb Logic Harmony Other:

Trimlines: Standard Drawn on Model Specified Below:

Socket Attachment Plate: WML Choice Hi-Tek (AL) Willowwood (composite) Bulldog (AL or SS) Bulldog (delrin)
3-Prong 4-Prong Other:

Componentry: No components, socket only Provided by practitioner New components provided by WML

Component Provider: Hi-Tek Bulldog APC Trulife Other:

Notes: