



SureFitAFO@Hanger.com

PRESCRIPTION ORDER FORM:

Richie AeroSpring Brace Systems

Acct #: \_\_\_\_\_ Date: \_\_\_\_\_

Ship To: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Patient Name: \_\_\_\_\_

Age: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Sex: \_\_\_\_\_ Shoe Size: \_\_\_\_\_

Carbon Fiber AFO for:  Left  Right

SELECT THE BRACE SYSTEM:

- AeroSpring Achilles Offloading System  
Carbon Fiber AFO, one pair custom foot orthosis, one pair of 20mm graduated heel wedges-5mm increments
- AeroSpring Plantar Fascia Offloading System  
Carbon Fiber AFO, one pair custom foot orthosis, one pair of 10mm graduated heel wedges-5mm increments
- AeroSpring Midfoot Offloading System  
Carbon Fiber AFO, one pair custom foot orthosis, one pair of 10mm graduated heel wedges-5mm increments
- AeroSpring Dropfoot Stability System  
Carbon Fiber AFO, one pair custom foot orthosis, No heel wedges are recommended for this system

Special Notes: