



Patient Last Name: _____ Patient First Name: _____
 Fitter Last Name: _____ Fitter First Name: _____
 Fitter Title: _____ (example PT/OT/PTA)
 Date: _____

FarrowWrap® Knee High OTS and Custom Order Form

? This field indicates a measurement necessary to fit a patient for an OTS (off-the-shelf) component. If the patient will not fit into an OTS component, then the additional measurements are required for a custom component. Mark the number of components desired, OTS or custom, in the appropriate field. You may mix and match custom with OTS (i.e. OTS footpiece & custom legpiece.) If you know what size OTS garment you want, it is not necessary to fill in the measurements.

Note: All measurements in cm

A-D Measure posteriorly Follow leg contour

D 2 finger widths below crease

C widest calf

B² midpoint b¹ & c

B¹ base of calf

B least ankle

A1 mid-foot

A=Floor

X Straight distance

R: **L:** **d circumference**

R: **L:** **c circumference**

R: **L:** **b² circumference**

R: **L:** **b¹ circumference**

R: **L:** **b circumference**

R: **L:** **a¹ circumference**

R: **L:** **x straight distance**

Please note that “_” in the SKU below (i.e. FW_-O-LR) stands for either “CL” for Classic, “LT” for LITE, “ST” for STRONG or “BA” for BASIC. The SKU's may then be cross-referenced with our price sheet to obtain the garment price.

Off-The-Shelf Legpiece Size Chart										
Please place a numeric value in the white box to indicate items needed.	XSmall	Qty	Small	Qty	Medium	Qty	Large	Qty	XLarge	Qty
(C) Widest Calf	36 – 43 cm		42 – 50 cm		48 – 58 cm		53 – 63 cm		58 – 68 cm	
(B) Ankle	21 – 25 cm		25 – 30 cm		30 – 36 cm		36 – 42 cm		42 – 50 cm	
(A-D) Reg FW_-O-LR	33 – 37 cm		35 – 39 cm		37 – 41 cm		39 – 43 cm		39 – 43 cm	
(A-D) Tall FW_-O-LT	38 – 41 cm		40 – 43 cm		42 – 45 cm		44 – 47 cm		44 – 47 cm	
Off-The-Shelf Footpiece Size Chart										
Please place a numeric value in the white box to indicate items needed.	XSmall	Qty	Small	Qty	Medium	Qty	Large	Qty	XLarge	Qty
(A ¹) Mid-Foot	22 – 24 cm		25 – 27 cm		28 – 30 cm		31 – 34 cm		35 – 40 cm	
(X) Reg FW_-O-FR	16 – 17 cm		17 – 18 cm		19 – 20 cm		20 – 21 cm		22 – 23 cm	
(X) Long FW_-O-FL	18 – 19 cm		19 – 20 cm		21 – 22 cm		22 – 23 cm		24 – 25 cm	

Custom Components	Legpiece	FW_-C-L	Footpiece	FW_-C-F
Quantity	Right:	Left:	Right:	Left:

~~ed in place of a footpiece! See~~

legpiece are purchased together, 1 pair of liners are included free. Additional liners will cost extra. See liner form for details. **BASIC foot and leg piece combinations will only be issued one (1) liner, not a pair.**

THIS IS FOR THE INTENDED USE OF LUNA MEDICAL ONLY