

# Fillauer BK-3S Prosthesis

Practitioner \_\_\_\_\_ Branch Name \_\_\_\_\_  
 PO# \_\_\_\_\_ Date: \_\_\_\_\_ Ship Via: \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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## Patient Information

Patient's Name \_\_\_\_\_  
 Age \_\_\_\_\_ Sex \_\_\_\_\_ Weight \_\_\_\_\_ Height \_\_\_\_\_  
 Amputation Cause: \_\_\_\_\_ Date \_\_\_\_\_  
 Amputation Level: \_\_\_\_\_  Right  Left

## Socket Information

NOTE: If model circumferences are 1/4" or more greater than anatomical circumferences, disregard anatomical measurements and calculate reductions from model measurements.

Durr-Plex Check Socket Model				
Level	Model unmodified	Reduce	Goal	Model modified

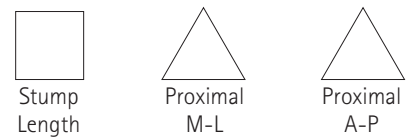
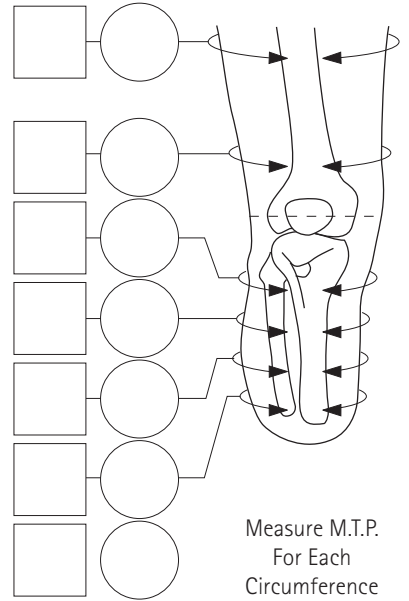
Socket Reduction Table				
Circ.	0" (MTP) Level	2" Level	4" (3") Level	6" (5") Level
Small 8-10"	+3/8" to +1/2"	+1/4"	+1/4"	+1/4" to +3/8"
Med. 10-13"	0"	0"	0"	0"
Large 13-15"	-1/4"	-3/8"	-3/8"	-1/2"

Silicone Liner Model				
Level	Model unmodified	Reduce	Goal	Model modified

Liner Reduction Table				
Circ.	0" (MTP) Level	2" Level	4" (3") Level	6" (5") Level
8"	1/2"	5/8"	5/8"	3/4"
9"	1/2"	5/8"	3/4"	7/8"
10"	1/2"	3/4"	7/8"	1"
11"	1/2"	3/4"	7/8"	1-1/8"
12"	5/8"	7/8"	1"	1-1/4"
13"	5/8"	7/8"	1-1/8"	1-3/8"
14"	5/8"	1"	1-1/4"	1-1/2"
15"	5/8"	1"	1-3/8"	1-3/4"
16"	3/4"	1"	1-1/2"	2"

REMARKS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## Measurements



Color \_\_\_\_\_

Heel Height \_\_\_\_\_

Shoe Size \_\_\_\_\_

