

Formula Fit Custom Order Form



2710 Amnicola Highway
Chattanooga, TN 37406
423.624.0946
info@fillauer.com

Company

Account No.

Address Line 1

Address Line 2

City, State, Zip

Practitioner

Phone

Email

Purchase Order

Patient Information

Amputation Level

Patient ID

Patient Age

Patient Height

Patient Weight

Selection Chart

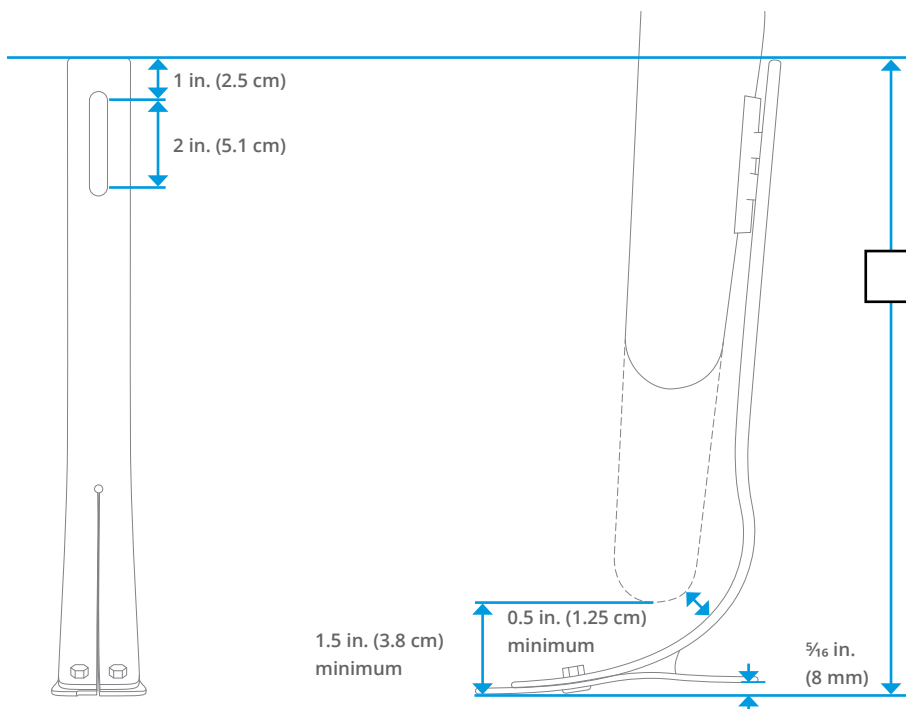
Pediatric Posterior Mounting Bracket Included (180-10-3000). Foot shell sold separately.

178-130-XC-XX Formula Fit with Custom Pylon

Patient Weight	24 cm	25 cm	26 cm	27 cm	28 cm
70 – 95 lbs. 32 – 43 kg	AC-24	AC-25	AC-26	AC-27	AC-28
95 – 120 lbs. 43 – 54 kg	BC-24	BC-25	BC-26	BC-27	BC-28
120 – 145 lbs. 54 – 66 kg	CC-24	CC-25	CC-26	CC-27	CC-28
145 – 176 lbs. 66 – 80 kg	DC-24	DC-25	DC-26	DC-27	DC-28

Ordering Information

Formula Fit Part Number



Custom Pylon Length

Measure the maximum height to avoid popliteal impingement in full flexion. (Normally this will be the posterior trim line.)

Must be 9.5 – 16.5 in. (24 – 42 cm)

Additional Instructions
