INFINITE™ SOCKET TT/S

Check Socket Measurement Form

① CLINICIAN INFO

Facility:

Branch:

Prosthetist Name:

Email:

Phone:

Shipping: Ground **($0)** ◯ 2-Day **($75)** ◯ Next Day **($150)** ◯

PO Number:

② PATIENT INFO

Name:

DOB:

Gender: Male ◯ Female ◯ Other ◯

Height:

Weight: (<320 lbs)

Amputation Cause:

Activity Level: K1 ◯ K2 ◯ K3 ◯ K4 ◯

Tissue Density: Soft ◯ Med ◯ Firm ◯

③ SOCKET DETAILS

Side: Left ◯ Right ◯

Suspension: Pin-Lock ◯ Seal-In/Suction ◯ Seal-In/Elevated Vacuum ◯

Trim Lines: Standard **(56mm > MTP)** ◯ High **(86mm > MTP)** ◯

Liner Type: TPE ◯ Polyurethane ◯ Silicone ◯

Liner Thickness: 3mm ◯ 6mm ◯ 9mm ◯

Foot build height is required to determine L-Bracket position. Failure to provide measurement will result in L-Bracket being rotated superiorly to avoid impact with foot components.

④ MEASUREMENTS

Notice:

We will not modify your socket upon receipt. Measurements are required for clarification purposes.

Upon submitting a check socket, you will receive a $200 discount. This will be applied to your invoice.

Indications:

MAX Circumference: **400mm**
MAX Length: **300mm**
MIN Length Pin-Lock: **120mm**
Seal-In: **190mm**

Distal Build Height:
Pin lock: **24 mm**
Seal-In: **35 mm**

Tools Required:

TT Length Gauge
A/P M/L Gauge
Tape Measure
Indelible Marker
Goniometer

STEP 1: MEASURE THE LIMB

Prepare to take measurements of the patient's limb by having the patient donn the liner.

- ☐ **Measure:** MTP to end of limb relaxed **(mm)**
- ☐ **Measure:** MTP to end of limb compressed **(mm)**
- ☐ **Specify:** Desired patient flexion **(0° - 20°)**
- ☐ **Specify:** Desired patient adduction **(-5° - 7°)**
- ☐ **Measure:** Contralateral MTP to floor **(mm)**
- ☐ **Measure:** Foot build height **(mm)**

STEP 2: Mark any bony prominences

STEP 3: Save and send to **orders@liminnovations.com**