

# XTERN Summit Order Form



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## Patient Information

Patient Initials \_\_\_\_\_

Clinic \_\_\_\_\_

Clinician \_\_\_\_\_

☐ Left leg ☐ Right leg ☐ Bilateral

## Trade/Orthotist/Practitioner Information

(Person who took the measurements)

Clinic/Customer Name \_\_\_\_\_

Customer PO/Order No. \_\_\_\_\_

Telephone No. \_\_\_\_\_

Email Address \_\_\_\_\_

## Was a Trial Kit (FS3000) Used?

☐ Yes ☐ No ☐ Small  
☐ Medium  
☐ Large

☐ Assembled  
XTERN Summit Required

☐ Small ☐ Medium  
☐ Large

☐ Non-assembled  
XTERN Summit Required

☐ Small ☐ Medium  
☐ Large

Assembled and Non-assembled braces are the same price.

## Measurements

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

☐ Male ☐ Female

Approx Height \_\_\_\_\_

Approx weight in Kg \_\_\_\_\_

**A**

Forefoot Total Width:

☐ Change width of  
heel section

☐ \_\_\_\_\_ mm narrower

☐ \_\_\_\_\_ mm wider

**B**

Heel Total Width:

☐ Change width of  
heel section

☐ \_\_\_\_\_ mm narrower

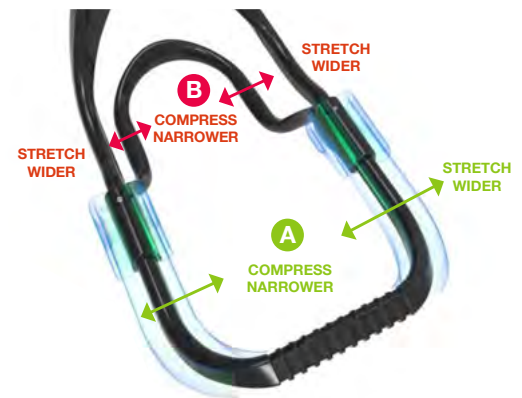
☐ \_\_\_\_\_ mm wider

If the form is not completed correctly it could lead to a possible delay in processing the device for shipment.

## XTERN Summit Accessories and Options

(Extra charge for all items, see price list for details.)

| Item                                                         | Size         | Part No.       | Quantity |
|--------------------------------------------------------------|--------------|----------------|----------|
| <input type="checkbox"/> Lace Clip Attachment                | Small        | 200000-L00-S   |          |
| <input type="checkbox"/> Lace Clip Attachment                | Med/Large    | 200000-L00-ML  |          |
| <input type="checkbox"/> Extra Cable Ties                    | Pack of 1000 | 700000-ZZZ-002 |          |
| <input type="checkbox"/> Extra Cable Ties                    | Pack of 20   | 700000-ZZZ-001 |          |
| <input type="checkbox"/> Summit XTERN Moulded Calf Pad/Strap | Med/Large    | 501302-K00-ML  |          |
| <input type="checkbox"/> Summit XTERN Moulded Calf Pad/Strap | Small        | 501302-K00-S   |          |
| <input type="checkbox"/> XTERN Magnet Buckle Strap           | S/M/L        | 501433-MBS-SML |          |
| <input type="checkbox"/> Ankle Stabilisation Strap           | Universal    | 500100-AST-SML |          |
| <input type="checkbox"/> Heel Bumper Kits (8 per kit)        | S/M/L        | 500250-HBP-SML |          |
| <input type="checkbox"/> Extension Stopper 40mm              | S            | 500202-EXT-40  |          |
| <input type="checkbox"/> Extension Stopper 45mm              | M/L          | 500202-EXT-45  |          |



## Additional Information

For technical support please email [david.bowles@blatchford.co.uk](mailto:david.bowles@blatchford.co.uk)

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