

# Unique Custom Liners



## iFab – Uneo Unique Urethane and Skeo Unique Silicone Liner Order Form

Customer Information		Ship To Information	
Date	<input type="text"/>	Name	<input type="text"/>
Account Number	<input type="text"/>	Address	<input type="text"/>
Bill to	<input type="text"/>	City/State/Zip	<input type="text"/>
Phone Number	<input type="text"/>	Phone Number	<input type="text"/>
Email	<input type="text"/>	Email	<input type="text"/>
Buyer	<input type="text"/>	Desired Delivery Date	<input type="text"/>
PO Number	<input type="text"/>		

**Shipping Options**      UPS Next Day      UPS Ground      UPS 2-Day      Other

### Replacement Liner

Call Liner Customer Service at **512 806 2596**

Or, e-mail **USSLCLiners@Ottobock.com**

Send scan files to **USSLCCad@Ottobock.com**

### Patient Information

Custom Liners are imprinted with your patient's name. Please clearly write the appropriate first and last name and/or patient ID.

First Name

Last Name

Patient ID

Left    Right    Transtibial    Transfemoral  
Other

### Select the appropriate Liner options below

(For vacuum/suction liners select Tapered, Cushion, and Uncovered or Partial Covered exterior is recommended)

**Liner Material**    Uneo Urethane    Skeo Silicone

### Wall Thickness

Uniform (Uneo 6mm, Skeo 4.5mm distal wall to proximal)  
Tapered (Uneo 6mm to 3 mm MPT to prox, Skeo 4.5 mm to 2.5 mm)  
(Locking Distal End thickness: Uneo 18 mm and Skeo 21 mm)  
(Cushion Distal End thickness: 13 mm for both Uneo and Skeo)

### Locking Mechanism

None/Cushion    Pin Locking\*    DVS\*  
\* Locking & DVS liners must have exterior textile selected

**Exterior**    Uncovered    Full Textile Cover\*\*  
Partial Textile Cover\*\* (Partial cover height)  mm

\*\* If partial or full cover, select textile below:

Slick/Stretchy Lycra	Black	Tan
Thicker Wearforce	Black	Tan
Uneo 3D Textile	Silver	
KISS TF Textile	KISS Gray	

### Additives

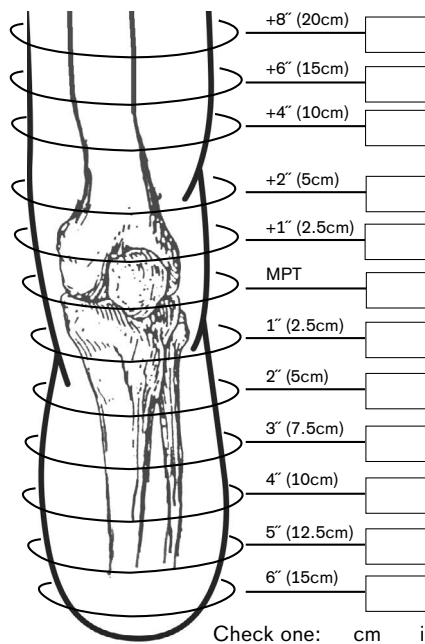
Uneo Urethane ONLY (Choose one or none):

With Skinguard antibacterial **OR** With Fresh scent

### Special Instructions

### For Transtibial Measurements\*

Important: Extend measurements as needed. Please mark the MPT and any problem areas on cast or diagram.



**OFFICE USE ONLY**

Length of residual limb from MPT to distal end.

For limbs > 4" in length the cast should be taken in ≤10° flexion and at least 8" above MPT. For limbs < 4" in length take cast in 20° for best results.

Otto Bock maintains all rights, title and ownership to the custom liner mold and will keep the mold on file for 2 years from the last order date.

**\*Note:** For Transfemoral liners, a cast or skin fit test socket is recommended.

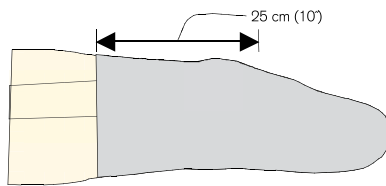
## Casting for the Custom Liner

1. Complete all required sections of the Order Form, including limb circumferences.
2. Apply parting agent to the limb, stopping 25 cm (10") above MPT.

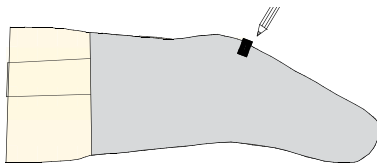
**Normal Skin:** Wrap the limb with plastic wrap or cover with lubricant.

**Skin with Invagination or Scarring:** Invaginations or deep scarring that do not close when cupped by hand are rare; only 1–2% of all patients. If you encounter one of these cases, fill the invagination/scar with plaster bandage wrap. Apply petroleum jelly to the remainder of the limb. Avoid getting petroleum jelly on the bandage wrap. Make a note on the Order Form to alert Ottobock of the invagination/scar.

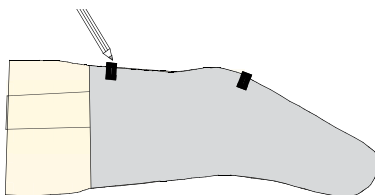
3. Pull a thin casting sock over the limb to a height of 25 cm (10") above MPT.



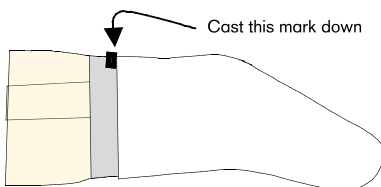
4. Mark the MPT on the casting sock with an indelible pencil. This mark is used by the Ottobock technician when manufacturing the custom liner.



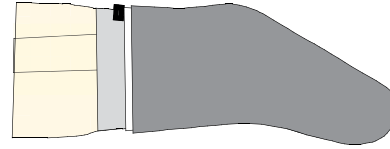
5. Mark a spot on the thigh 23 cm (9") above the MPT mark as a reference for the top of the cast. Have the patient hold their limb at 10° of flexion.



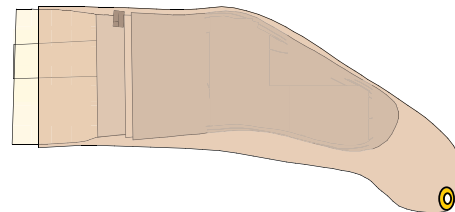
6. Cast the limb with plaster bandage starting proximally at the mark.



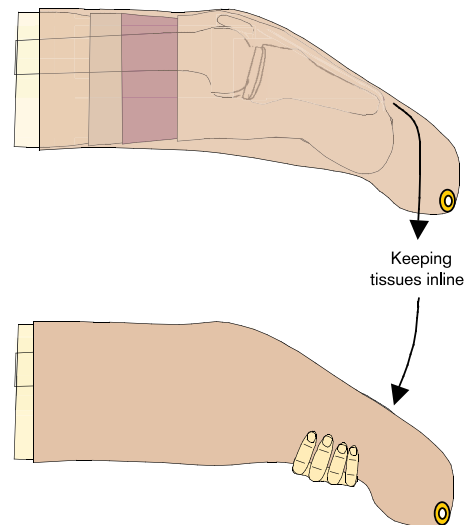
7. Apply 4 layers of nylon or a casting sock over the cast.



8. Apply casting bag. Extend it up to the thigh to form a seal.



9. If necessary, lightly support any distal, redundant soft tissue that gravity has caused to droop so that it remains in line with the rest of the lower limb until the plaster has set. The reason to support the soft tissue is to avoid producing a liner that tends to hold soft tissue off center.



10. Place the knee at 10° of flexion and turn on the casting pump. Maintain vacuum until the cast has set.

**Note:** For limbs less than 4" long, a 20° knee flexion gives best results.

11. Write the patient's name on the cast and ship with completed order form to Ottobock