LEIMKUEHLER
ORTHOTIC-PROSTHETIC CENTER INC.
Specialists Since 1948

American Orthotic & Prosthetic Association

Patient's Name _____ ***Date*** _____

Diagnosis / Surgical Procedure _____

Date of Surgery (if applicable) _____

Transtibial (BKA)

- ☐ Shrinker
- ☐ Limb Protector
- ☐ BKA Temporary Prosthesis
- ☐ BKA Definitive Prosthesis

Transfemoral (AKA)

- ☐ Shrinker
- ☐ AKA Temporary Prosthesis
- ☐ AKA Definitive Prosthesis

Activity K Level

- ☐ K4 – The patient has ability or potential for prosthetic ambulation that exceeds basic ambulation skills, exhibiting high impact, stress, or energy levels. Typical of the prosthetic demands of a child, active adult, or athlete.
- ☐ K3 – The patient had ability or potential for ambulation with variable cadence. Typical of the community ambulator who has the ability to traverse most barriers and may have vocational, therapeutic, or exercise activity that demands prosthetic utilization beyond simple locomotion.
- ☐ K2 – The patient has the ability or potential for ambulation with the ability to traverse low level barriers such as curbs, stairs, or uneven surfaces. Typical of the limited community ambulator.
- ☐ K1 – The patient has the ability or potential to use prosthesis for transfers/ambulation on level surface at a fixed cadence.

Other / Notes _____

Physician Signature _____ ***Date*** _____

Print Physician Name _____ ***NPI#*** _____

☐ **AMHERST** ☐ **NORTH OLMSTED** ☐ **SANDUSKY** ☐ **TOLEDO** ☐ **NILES** ☐ **FAIRLAWN**

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