

TRANSTIBIAL SOCKET | ORDER DETAILS

CLINIC

DATE

PATIENT REF.

PATIENT WEIGHT

Kg

PURCHASE ORDER

ACTIVITY LEVEL

K1

K2

K3

k4

PROSTHETIST

NOTES

PHONE

STEP 1 | DESIGN & COLOR



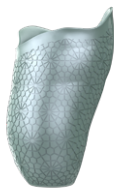
U



FLOW



DOTS



AMBRA



HERRINGBONE



GALAXY



FLORAL



RIVET



CIRCUIT



NEXT



ODISSEY *



ATLANTIS *

COLOR

Choose your *color* from catalog page 14

COLOR 1

COLOR 2 *

** Only applicable to designs 'Odyssey' (outer part) and 'Atlantis' (scales part)*

COAT

Choose coating (glossy or matt)

GLOSSY

MATT

STEP 2 | ADD YOUR EXTRAS

If you choose color or 3D image, our team will contact you for details



COLOR IMAGE

Ref: CE002



3D IMAGE

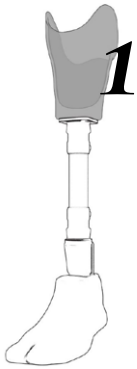
Ref: CE003



ACTIVITY TRACKER

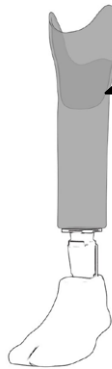
Ref: SE010

STEP 3 | CHOOSE YOUR UNYQ SOCKET OPTION



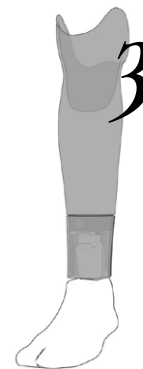
1 MIRROR ME

Ref: S001



2 MIRROR LITE

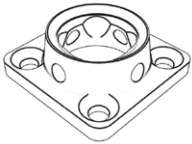
Ref: S002



3 TOTAL REFLECTION

Ref: S003

STEP 4 | DISTAL ADAPTERS

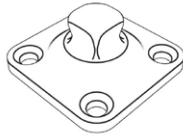


4 HOLE FEMALE ADAPTER
Titanium

Ref: SE001

Add it to the order

I have it!

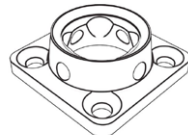


4 HOLE MALE ADAPTER
Titanium

Ref: SE002

Add it to the order

I have it!

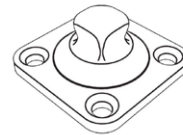


4 HOLE ROTATABLE
FEMALE ADAPTER - Titanium

Ref: SE003

Add it to the order

I have it!



4 HOLE ROTATABLE
MALE ADAPTER - Titanium

Ref: SE004

Add it to the order

I have it!



YOUR ADAPTER

If you want to use a different adapter, send it to us and we'll integrate into our socket

STEP 5 | VALVES & LOCK SYSTEM



TRANSIBIAL VALVE

Ref: SE005

Add it to the order

I have it!

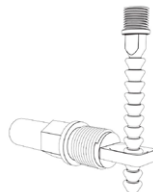


SMOOTH LOCK SYSTEM

Ref: SE007

Add it to the order

I have it!

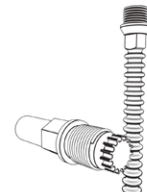


RATCHET LOCK SYSTEM

Ref: SE008

Add it to the order

I have it!



CLUTCH LOCK SYSTEM

Ref: SE009

Add it to the order

I have it!



OTHER OPTIONS

If you use a different system, please contact us

STEP 6 | SCAN or SEND



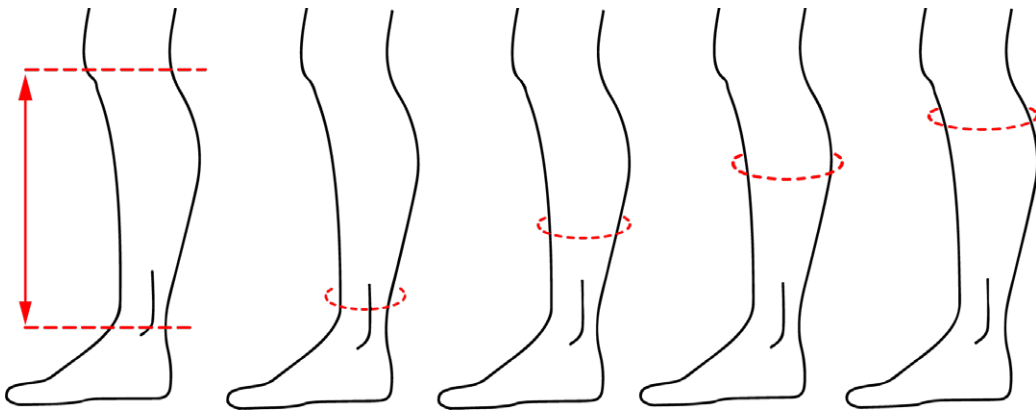
Scan the prosthesis and send the **.stl** file along with this form to **prosthetics@unyq.com**.



Send the scanner or prosthesis to our office. Contact us at **prosthetics@unyq.com** or **(+34) 954 043 699** for further details.

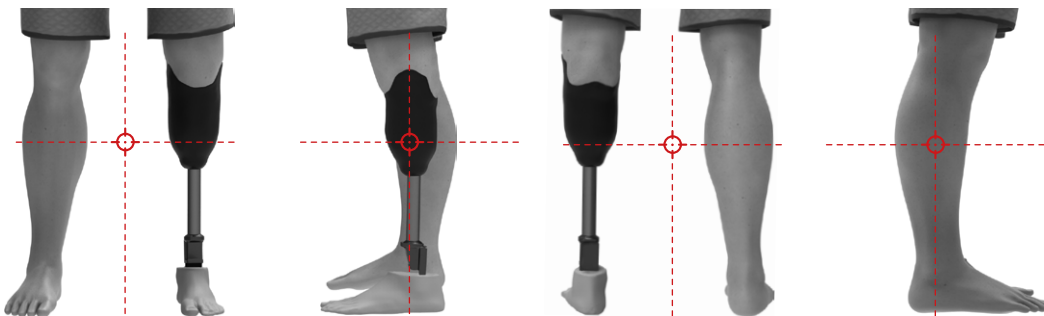
SCAN

5 MEASUREMENTS



- | | | | | |
|--|--|---|--|---|
| LENGTH
Measure the length from the middle of the knee to the center of the ankle bone. | LOW CALF
Measure the circumference right above the ankle bone. | MID CALF
Measure the circumference halfway between the ankle bone and the middle of the knee. | MAX CALF
Measure the circumference at the widest part of the calf. | TOP CALF
Measure the circumference halfway between the max calf and the middle of the knee. |
|--|--|---|--|---|

4 PHOTOS



Take four general pictures: front, prosthesis side, back, and your sound leg side. Please read the following tips:

- Take off shoes and socks.
- Entire prosthesis should be visible.
- Take photos straight on, from a low angle.
- Legs should be centered in all photos.

UNYQ.COM

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