



**HAMILTON
PROSTHETICS & ORTHOTICS
LONDON, ONTARIO**

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HAMILTONPROSTHETICS.CA

“EXPERTS IN PROSTHETIC & ORTHOTIC CARE”

Canadian Certified Orthotist/Prosthetist
WSIB/ADP registered vendor

Client Name : _____ Date : _____

Diagnosis : _____

ORTHOTICS

- Foot orthotics
- Supra malleolar (SMO)
- Ankle (AFO)
- Knee
- Knee/ankle/foot (KAFO)
- Hip
- Spinal
- Hand / wrist
- Elbow / Shoulder
- Orthopedic footwear
- Shoe modification (Lift / wedge)
- Compression stockings

PROSTHETICS

- Custom silicone (digits/hands/toes/feet)
- Upper extremity
- Lower extremity
- Myoelectric / Bionic
- Other (please specify)

R_x

Referring Professional _____

Billing # _____ Registration # _____

 @hamilton_prosthetics

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