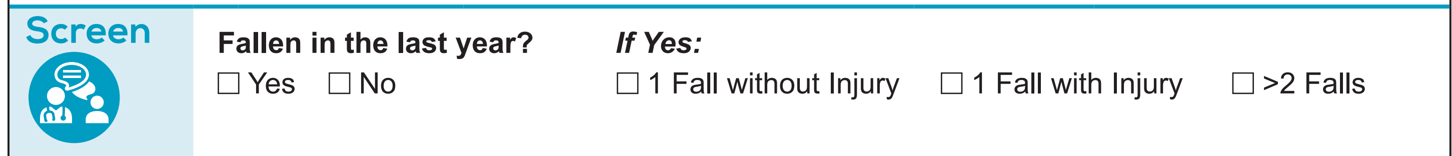
walkasins® CLINICAL INTAKE FORM

Place Copy in Patient Medical Chart

PATIENT INFORMATION				SUPPLIER INFORMATION
Patient Name:				**RxFunction, Inc.** 7576 Market Place Drive Eden Prairie, MN 55344 Phone: 888.382.3518 Fax: 844.925.5279
Street Address:				
City:		State:	Zip:	Patient Primary Phone: ☐ Home ☐ Cell
Date of Birth:	Gender:	Height:	Weight	Shoe Size (US): ☐ Men's ☐ Women's

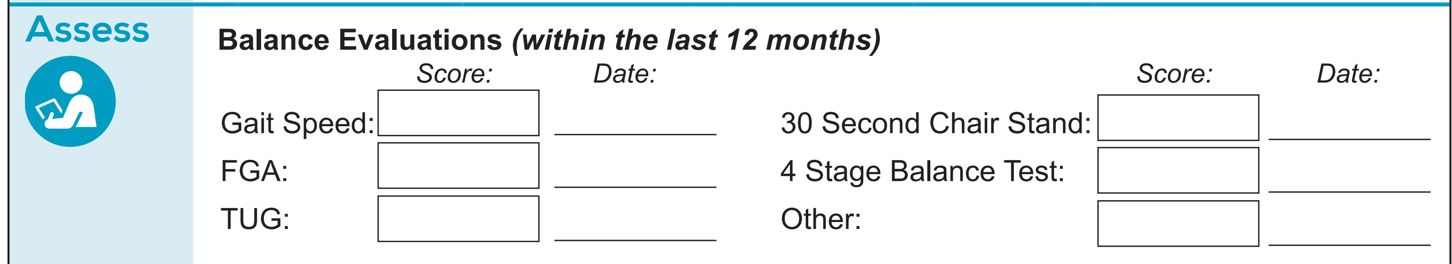
Indication for Use: Walkasins is indicated for patients with lower limb sensory peripheral neuropathy who present with gait and balance impairments. For safety information visit www.rxfunction.com.



Screen

Fallen in the last year?
☐ Yes ☐ No

If Yes:
☐ 1 Fall without Injury ☐ 1 Fall with Injury ☐ >2 Falls



Assess

Balance Evaluations *(within the last 12 months)*

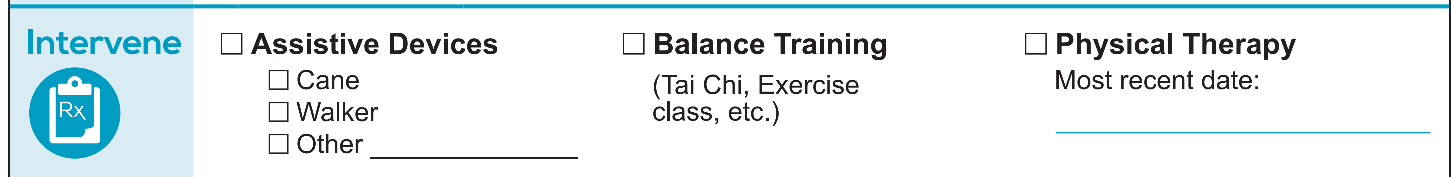
	Score:	Date:		Score:	Date:
Gait Speed:			30 Second Chair Stand:		
FGA:			4 Stage Balance Test:		
TUG:			Other:		

Conditions and impairments that impact patient's balance:

- ☐ Somatosensory
- ☐ Visual
- ☐ Vestibular

- ☐ Neurological
  - ☐ **Peripheral Neuropathy**
  - ☐ Parkinson's
  - ☐ Stroke
  - ☐ Multiple Sclerosis
  - ☐ Other ______________

- ☐ Musculoskeletal
  - ☐ Ankle ______________
  - ☐ Knee ______________
  - ☐ Hip ______________
  - ☐ Back ______________
  - ☐ Other ______________



Intervene

☐ **Assistive Devices**
- ☐ Cane
- ☐ Walker
- ☐ Other ______________

☐ **Balance Training**
(Tai Chi, Exercise class, etc.)

☐ **Physical Therapy**
Most recent date: ______________

Has a sensory test/evaluation for Walkasins been completed with patient?

☐ **Yes:** Date: ______________ Performed by: ______________

Results:
- ☐ Patient demonstrated ability to feel tactile stimuli from the Leg Unit
- ☐ Patient demonstrated the functional capability for use, including donning and doffing
- ☐ Patient did not feel tactile stimuli from the Leg Unit

☐ **No:** Please indicate who to contact to schedule:

Name: ______________ Title: ______________ Phone: ______________

Completed by:	***Clinic:***	***Phone:***

Fax this form to RxFunction Customer Service at **844.925.5279**

© 2020 RxFunction, Inc. All Rights Reserved. AP-10078v1 0620. Walkasins and RxFunction are trademarks of RxFunction, Inc.