



ORLANDO VA MEDICAL CENTER

Prosthetic & Sensory Aids Service (PSAS)

Durable Medical Equipment, Prosthetics, Orthotics & Supplies (DMEPOS)

All requests indicated with an \* must show evidence of patient training

Patient Name: \_\_\_\_\_ Last 4 SSN: \_\_\_\_\_

Deliver to Address: \_\_\_\_\_

Phone#: \_\_\_\_\_ Delivery to POC: \_\_\_\_\_

Patient Weight# \_\_\_\_\_

Standard Wheelchair (w/standard footrests) {requires hip to hip measurement to determine size}

- 16" Wide
- 18" Wide
- 20" Wide
- 22" Wide
- Elevating Leg Rests
- 3" Foam wheelchair cushion

\*Walker {requires height and weight}

- Standard Walker (no wheels)
- Standard Front Wheeled Walker
- 4 Wheel Rolling Walker with Seat & Basket

IV Pole

\*Feeding Pump

\*Suction Machine

\*Nebulizer w/Mist Kits

Bedside Commode

Transfer Tub Bench

Shower Chair

Shower Hose

Hospital Bed w/Standard Mattress

\*Compression Stockings

- Anti Embolism/TED Hose

Knee High Calf Circ: \_\_\_\_\_ Ankle Circ: \_\_\_\_\_  
Shoe Size: \_\_\_\_\_

Thigh High Calf Circ: \_\_\_\_\_ Ankle Circ: \_\_\_\_\_ Mid-Calf Circ: \_\_\_\_\_  
Shoe Size: \_\_\_\_\_

- Compression Stockings 20-30 MMHG

Knee High Calf Circ: \_\_\_\_\_ Ankle Circ: \_\_\_\_\_  
Shoe Size: \_\_\_\_\_

Thigh High Calf Circ: \_\_\_\_\_ Ankle Circ: \_\_\_\_\_ Mid-Calf Circ: \_\_\_\_\_  
Shoe Size: \_\_\_\_\_

Sequential Compression Pump

CPM Machine

Bone Stimulator

Other: \_\_\_\_\_

Community Health Program Location

Daytona Beach Clinic & Community Outpatient Clinics  
 Orlando VA Clinics (Baldwin Campus/Tavares Clinic)  
 Viera Outpatient Clinic  
 Viera Outpatient Clinic

Phone Number

386/947-2222  
 407/646-4663  
 321/637-3655  
 321/637-3604

Fax Number

407/643-9377  
 407/643-9338  
 407/643-9211  
 407/643-9211

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