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PRESCRIPTION ORTHOSIS ORDER FORM

(Lab use only)

Date: ___/___/___ Practitioner: _____ Phone: (____) _____

Invoice #: _____

Billing Address: _____ Shipping Address (if different): _____

Ship date: _____

IBS: \$ _____

Bal. by: _____

L ___ ° inv. / ev. R ___ ° inv. / ev.

L ___ R ___ negative

L ___ R ___ positive

L ___ R ___ orthoses

L ___ R ___ shoes

L ___ R ___ other: _____

Patient: _____ Last _____ First _____ Medical Rec. #: _____

Gender: Male Female Age: _____ Wt: _____ Ht: _____ Shoe size: _____ Shoe type: _____

I. Orthosis Type (see back of form for product descriptions and defaults. Use sections II - VI to modify defaults as desired.)

Functional	Sports	Dress	Specialty
<input type="checkbox"/> Polypropylene <input type="checkbox"/> PolyMax™ <input type="checkbox"/> Graphite <input type="checkbox"/> Fiberglass <input type="checkbox"/> Acrylic	<input type="checkbox"/> Multi-Sport™ <input type="checkbox"/> Multi-Sport-Plus™ <input type="checkbox"/> Soft-Sport™ <input type="checkbox"/> Soft-Sport-Flex™ <input type="checkbox"/> SSC™	<input type="checkbox"/> Men's Dress <input type="checkbox"/> Women's Casual <input type="checkbox"/> Women's High-Heel <input type="checkbox"/> Hole-Heel™ <input type="checkbox"/> Cobra	<input type="checkbox"/> Blake (circle inv. °) 25° / 35° / 45° <input type="checkbox"/> Modified UCBL <input type="checkbox"/> Cushion-Flex™ <input type="checkbox"/> Cushion-Flex-Control™ <input type="checkbox"/> Diaba-Flex™ <input type="checkbox"/> Diaba-Flex-Control™ <input type="checkbox"/> Accommodative

II. Orthosis Material (use this section to indicate optional material or thickness)

Polypropylene White Natural
 1/8 5/32 3/16 1/4
(see material stiffness guide on back of form)

Graphite Composite (TL-2100)
 .070 semi-flexible .110 rigid
 .090 semi-rigid .110 ultra strength

Fiberglass Composite (TL-Silver)
 .085 semi-rigid .110 rigid

Acrylic (Polydor) Amber Pink Green
 3mm 3.5mm 4mm 5mm

High-Density Polyethylene (HDPE)
 2mm 3mm 4mm

VI. Top Covers and Extensions

Top cover length:
 Orthosis only To sulcus Full length

Top cover material:
 Vinyl: Black Forest Bronze
 Leather: Black Brown
 EVA: 1/16" 1/8"

NCN™ (Nylon/Neoprene): 1/16" 1/8"

Diabetic: (1/16" poron, 1/8" plastazote)

Poron under topcover: 1/16" 1/8"

Bottom cover material:
 EVA: 1/16"

Forefoot Extension:
 Material: Poron Korex EVA NCN™
 Thickness: 1/16" 1/8" 3/16" 1/4"
 Extension Length: Sulcus Full length

III. Corrections & Modifications

Cast orientation:
 L R Vertical
 L ___ ° R ___ ° Inverted
 L ___ ° R ___ ° Everted

Forefoot correction type:
 L R Intrinsic (balance cast)
 L R Extrinsic (forefoot post)

Modifications:
 L ___ R ___ Plantar fascia accom. (mm)
 L ___ R ___ Styloid accom. (mm)
 L ___ R ___ As marked on cast (mm)
 L ___ R ___ Add. lat. heel expansion (mm)
 L ___ R ___ Medial heel skive (mm)

Medial arch fill:
 L R Increased
 L R Standard
 L R Decreased
 L R Minimal

L R No filler between platforms

IV. Orthosis Specifications

Heel cup height:
 L R 10mm (shallow)
 L R 14mm (normal)
 L R 18mm (deep)

Other: Med. Lat.
 Left: ___mm ___mm
 Right: ___mm ___mm

Anterior width:
 L R Extra narrow
 L R Narrow
 L R Standard
 L R Wide
 L R Extra wide
 L R Full width

Other shell configurations:
 L R Lateral flange
 L R Wide arch profile
 Thin material at heel contact
 Fit to enclosed shoe
 Cut out proximal to 1st met head
 Cut out proximal to 5th met head

V. Posting

Rearfoot post:
 No Post
 Crepe
 Birkocork™
 Acrylic
 Polypropylene

Heel lift:
 L ___ R ___ (mm)

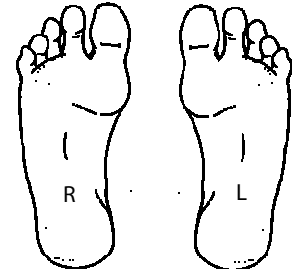
Rearfoot post motion:
 L R 4° motion
 L R 0° motion
 Other: L ___ ° R ___ °

Rearfoot posting elevator:
 L R 4mm
 L R 8mm
 L ___ R ___ Other (mm)

Rearfoot post options:
 L R Medial post flare
 L R Lateral post flare
 L R Long post
 L R Short post

Non-corrective forefoot post:
 L R Full width
 L R Medial corner
 L R Lateral corner

Chief complaint/diagnosis: _____



Comments/Instructions:

Practitioner's Signature (required): **X** _____

Rush Order:
 2 day turnaround (\$20)
 Next day turnaround (\$40)
 Requested on/before: ___/___/___

Express shipping:
 3 day select
 2nd day air
 Next day air

Please send more:
 Rx forms Small boxes
 Address labels Large boxes
 Prepaid labels

Store positive molds for 60 days

PRODUCT DESCRIPTIONS

FUNCTIONAL ORTHOSES

Polypropylene – semi-rigid polypropylene shell, standard width, 14mm heel cup, intrinsic forefoot correction, vertical heel bisection, 4/4 firm crepe post, 8mm post elevator, orthosis length vinyl top cover

PolyMax™ – semi-rigid polypropylene shell, standard width, 14mm heel cup, intrinsic forefoot correction, vertical heel bisection, 4/4 integrated polypropylene post, 8mm post elevator, orthosis length vinyl top cover

Graphite – semi-rigid graphite composite shell, standard width, 14mm heel cup, intrinsic forefoot correction, vertical heel bisection, 4/4 firm crepe post, 8mm post elevator, orthosis length vinyl top cover

Fiberglass – semi-rigid fiberglass composite shell, standard width, 14mm heel cup, intrinsic forefoot correction, vertical heel bisection, 4/4 firm crepe post, 8mm post elevator, orthosis length vinyl top cover

Acrylic – semi-rigid acrylic shell, standard width, 14mm heel cup, intrinsic forefoot correction, vertical heel bisection, 4/4 firm crepe post, 8mm post elevator, orthosis length vinyl top cover

SPORTS ORTHOSES

Multi-Sport™ – semi-rigid polypropylene shell, standard width, 16mm heel cup, intrinsic forefoot correction, vertical heel bisection, 4/4 medium crepe post, 8mm post elevator, orthosis length vinyl top cover

Multi-Sport-Plus™ – semi-rigid polypropylene shell, standard width, 16mm heel cup, intrinsic forefoot correction, vertical heel bisection, 4/4 medium crepe post, 8mm post elevator, full length vinyl top cover, 1/8" EVA extension under forefoot

Soft-Sport™ – 1/8" polypropylene shell, standard width, 16mm heel cup, intrinsic forefoot correction, vertical heel bisection, 4/4 medium crepe post, 8mm post elevator, 1/8" full length EVA top cover, EVA bottom filler

Soft-Sport-Flex™ – 2mm HDPE shell, standard width, 16mm heel cup, intrinsic forefoot correction, vertical heel bisection, 4/4 medium crepe post, 8mm post elevator, 1/8" full length EVA top cover, EVA bottom filler

SSC™ – (Ski/Skate/Cycle) rigid graphite composite shell, width and heel cup per shoe gear, intrinsic forefoot correction, vertical heel bisection, short 0/0 firm crepe post, elevator per shoe gear, 1/16" full length NCN top cover, 1/16" EVA extension under forefoot (pls. provide shoe gear)

DRESS ORTHOSES

Men's Dress – semi-rigid graphite composite shell, standard width, 12mm heel cup, intrinsic forefoot correction, vertical heel bisection, short 4/4 firm crepe post, 8mm post elevator, sulcus length vinyl top cover, 1/16" poron extension under forefoot

Women's Casual – semi-rigid graphite composite shell, narrow width, 10mm heel cup, intrinsic forefoot correction, vertical heel bisection, short 4/4 firm crepe post, 10mm post elevator (or to shoe), sulcus length vinyl top cover, 1/16" poron extension under forefoot

Women's High-Heel – semi-rigid graphite composite shell, narrow width, minimal heel cup, intrinsic forefoot correction, vertical heel bisection, no rearfoot post, sulcus length vinyl top cover, 1/16" poron extension under forefoot (please provide shoes)

Hole-Heel – semi-rigid polypropylene shell, narrow width, 10-12mm heel cup, intrinsic forefoot correction, vertical heel bisection, no rearfoot post, hole cut in heel, sulcus length vinyl top cover, 1/16" poron extension under forefoot

Cobra – 1/8" polypropylene shell, narrow width, 12mm heel cup, intrinsic forefoot correction, vertical heel bisection, no rearfoot post, sulcus length vinyl top cover, 1/16" poron extension under forefoot, full EVA bottom filler

SPECIALTY ORTHOSES

Blake – semi-rigid polypropylene shell, extra wide width, 23mm med. / 21mm lat. heel cup, limited intrinsic forefoot correction, inverted heel bisection (specify inv. ° on front), 0/0 Birkocork™ post, 8mm post elevator, no top cover

Modified UCBL – semi-rigid polypropylene shell, wide width, 30mm heel cup, intrinsic forefoot correction, vertical heel bisection, 4/4 firm crepe post, 8mm post elevator, no top cover

Cushion-Flex™ – 2mm HDPE shell, standard width, 14mm heel cup, intrinsic forefoot correction, vertical heel bisection, EVA post, 1/8" full length NCN top cover, EVA bottom filler

Cushion-Flex-Control™ – 2mm HDPE shell, standard width, 14mm heel cup, intrinsic forefoot correction, vertical heel bisection, 4/4 medium crepe post, 8mm elevator, 1/8" full length NCN top cover, EVA bottom filler

Diaba-Flex™ – 2mm HDPE shell, standard width, 14mm heel cup, intrinsic forefoot correction, vertical heel bisection, EVA post, 3/16" full length diabetic top cover, EVA bottom filler

Diaba-Flex-Control™ – 2mm HDPE shell, standard width, 14mm heel cup, intrinsic forefoot correction, vertical heel bisection, 4/4 medium crepe post, 8mm elevator, 3/16" full length diabetic top cover, EVA bottom filler

Accommodative – dual layer, multi-density plastazote shell, full width, deep heel cup, no forefoot correction, no rearfoot post, 3/16" full length diabetic top cover, 1/16" EVA bottom cover (extra depth shoe recommended)

POLYPROPYLENE MATERIAL STIFFNESS GUIDE

Material Thickness	Patient Weight (lbs.)				
	<110	110-160	160-210	210-260	>260
1/8"	Semi Rigid	Flexible	Very Flexible	Extremely Flexible	(not rec.)
5/32"	Rigid	Semi Rigid	Flexible	Very Flexible	Extremely Flexible
3/16"	Very Rigid	Rigid	Semi Rigid	Flexible	Very Flexible
1/4"	Extremely Rigid	Very Rigid	Rigid	Semi Rigid	Flexible

Note: This is a general stiffness guide. It does not take into account individual patient conditions and prescription options that may affect material stiffness characteristics.