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CUSTOM ORTHOTIC SANDAL ORDER FORM

(Lab use only)

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

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

Patient: _____ Medical Rec. #: _____
Last First

Gender: Male Female Age: _____ Weight: _____ Height: _____ **Common Shoe size:** _____

Invoice #: _____

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: _____

I. Sandal Style (select sandal style below)

Men's Styles

- > X-Trac
 - 6501a coffee
 - 6501b black
- > Granola
 - 6521a wheat
- > X-Trail
 - 6601a ocean
 - 6601b wheat
 - 6601c olive
- > Mako
 - 6650a aztec
 - 6650b navy
 - 6650c black
 - 6650d crimson
 - 6650e charcoal
- > X-Golf
 - 6101b coffee

Ladies' Styles

- > Spirit
 - 8450b mist
 - 8450c red
 - 8450d white
 - 8450e denim
 - 8450f bubble gum
 - 8450h black
 - 8450i lime
- > Tracks
 - 9418b red
 - 9418c steel blue
 - 9418d lime
- > Sorbet
 - 9419a raspberry
 - 9419b orange
 - 9419c lime
- > X-Trac
 - 8501a tea
- > Twilight
 - 8401a aztec
- > Granola
 - 8521a sand
 - 8521b black
- > X -Golf
 - 8601b almond
- > Twilight Golf
 - 8201a black
 - 8201b wheat

II. Sandal Size (select sandal size below)

Men's Size 7 8 9 10 11 12 13 14 15 16

Women's Size 5 6 7 8 9 10 11

PLEASE NOTE: Half sizes available on Tracks and Sorbet only. For all other styles, round down to the nearest whole size.

III. Orthoses (select orthotic device and any desired options)

Custom orthotic sandals come standard with the Root Sandal-thotic. Specifications: semi-rigid polypropylene shell (patient weight required) vertical heel bisection, intrinsic forefoot correction, 0/0 firm crepe post, 12-14mm heel cup, standard width, 1/8" EVA full-length top cover, 1/8" EVA full-length forefoot extension.

Orthotic device: Standard Sandal-thotic (per specifications above) Standard Sandal-thotic with the following options:

Shell Material:

Polypropylene (optional thickness)
 1/8 5/32 3/16 1/4

Graphite Composite (TL-2100)

- .070" semi-flexible .110" rigid
- .090" semi-rigid .110" ultra strength

Cast Modifications:

- L ___ R ___ Plantar fascia accom. (mm)
- L ___ R ___ Add. lat. heel expansion (mm)
- L ___ R ___ Medial heel skive (mm)

Anterior shell width:

- L R Narrow
- L R Standard
- L R Wide
- L R Full width

Rearfoot post material:

- Crepe
- Birkocork™
- Acrylic
- Polypropylene
- No rearfoot posts

Additions:

(please mark location on cast and diagram below)

- L R Morton's extension (1/8" Korex)
- L R Rev. Morton's extension (1/8" Korex)
- L R Metatarsal pad
- L R Heel pad (poron): 1/16" 1/8"
- L R Horseshoe pad
- L R Neuroma pad (mark interspace below)
- L R Sweet spot (mark location below)
- L R EVA bottom fill
- L R Medial arch reinf.: Korex EVA

(Additional charges may apply for the following non-standard options: graphite shell., cast modifications., acrylic post., additions)

Rush request:

Requested on/before: ___/___/___

Store positive molds for 90 days

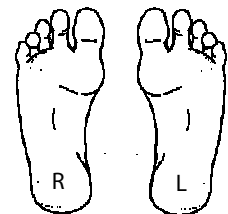
Express shipping:

- 3 day select
- 2nd day air
- Next day air

Please send more:

- Order forms
- Address labels
- Prepaid labels
- Small boxes
- Large boxes

Diagnosis/comments: _____



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