



<b>Office Name:</b>		
<b>Address:</b>		
<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Phone:</b>		

<b>Patient Information</b>		<b>Contact Name:</b>	
<b>PO#</b>	<b>Date:</b>	<b>Gender:</b>	<b>M    F</b>
<b>Patient Name:</b>		<b>Date of Birth:</b>	
<b>Patient Weight:</b>		<b>Activity Level:</b>	<b>Low    Moderate    High</b>

<b>Orthotic Information</b>	
<p><b>Shell Thickness</b></p> <input type="checkbox"/> 3.25mm ( <i>Kids Lightweight</i> ) <input type="checkbox"/> 3.55mm ( <i>Lightweight</i> ) <input type="checkbox"/> 3.85mm ( <i>Performs like 1/8<sup>th</sup></i> ) <input type="checkbox"/> 4.15mm ( <i>Between 1/8<sup>th</sup> and 3/16<sup>th</sup></i> ) <input type="checkbox"/> 4.45mm ( <i>Performs like 3/16<sup>th</sup></i> )	<p><b>Heel Cup Depth</b></p> <input type="checkbox"/> 10mm ( <i>Dress/Kids</i> ) <input type="checkbox"/> 14mm ( <i>Dress/Kids</i> ) <input type="checkbox"/> 18mm ( <i>Summit Standard</i> ) <input type="checkbox"/> 20mm ( <i>Aggressive Control</i> ) <input type="checkbox"/> UCBL (25mm)

<b>Topsheet options</b>		
<input type="checkbox"/> Black Ice 1/8" <input type="checkbox"/> Black Ice 1/16" <input type="checkbox"/> Pink Camo 1/8" <input type="checkbox"/> Pink Camo 1/16" <input type="checkbox"/> Black Leather	<input type="checkbox"/> Black Ice 1/16" + PPT 1/16" <input type="checkbox"/> Black Ice 1/8" + PPT 1/16" <input type="checkbox"/> Pink Camo 1/16" + PPT 1/16" <input type="checkbox"/> Pink Camo 1/8" + PPT 1/16" <input type="checkbox"/> Brown Leather + PPT 1/16"	<input type="checkbox"/> Black Ice 1/16" + SRP 1/16" <input type="checkbox"/> Black Ice 1/16" + SRP 1/8" <input type="checkbox"/> P-Cell 1/8" + PPT 1/16" <input type="checkbox"/> Brown Leather <input type="checkbox"/> Black Leather + PPT 1/16"

<b>Topsheet finish options</b>		
<input type="checkbox"/> Send loose in package	<input type="checkbox"/> 3/4 Length Topsheet Glued	<input type="checkbox"/> Full length with bottom cover Glued

<b>Posting</b>	<b>Left</b>	<b>Right</b>
<b>Forefoot Posting</b>	<input type="checkbox"/> Lateral _____ <input type="checkbox"/> Medial _____	<input type="checkbox"/> Lateral _____ <input type="checkbox"/> Medial _____
<b>Rearfoot Posting</b>	<input type="checkbox"/> Lateral _____ <input type="checkbox"/> Medial _____	<input type="checkbox"/> Lateral _____ <input type="checkbox"/> Medial _____
<b>Posting Style</b>	<input type="checkbox"/> Intrinsic <input type="checkbox"/> Extrinsic	<input type="checkbox"/> Intrinsic <input type="checkbox"/> Extrinsic
<i>Intrinsic post is an approximant 1" flat spot on the bottom of the orthotic shell</i> <i>Extrinsic post is a solid plastic heel posting (Looks like a traditional heel posting expect it is machined out of plastic)</i>		

<b>Quantity of Orthotics</b>	<b>Areas of Concern</b>
<input type="checkbox"/> 1 Pair <input type="checkbox"/> 2 Pairs    Other: Left <input type="checkbox"/> _____ Right <input type="checkbox"/> _____	
<b>Metatarsal Pads</b>	
<input type="checkbox"/> Left <input type="checkbox"/> Right	
<b>Special Instructions</b>	

