



CUSTOM FOOTWEAR ORDER FORM

FACILITY NAME:	
Purchase Order #	Date: / /

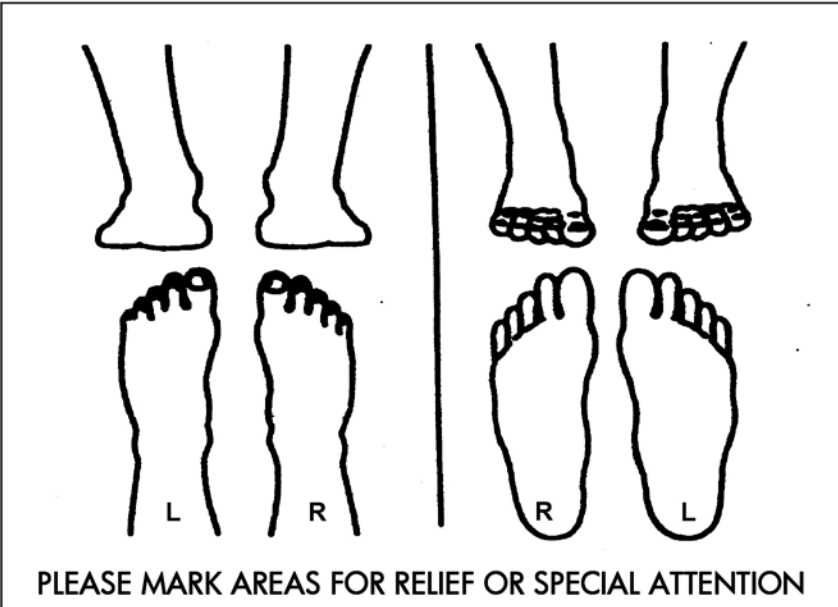
SHIP ADDRESS:			BILL ADDRESS:		
City:	State:	Zip:	City:	State:	Zip:
Tel #	Fax		Tel # ()	Fax # ()	
Contact:		Title:	Contact:		Title:

PATIENT NAME:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	Weight:	Age:	
Activity level:	<input type="checkbox"/> Non Ambulatory	<input type="checkbox"/> Low / transfer	<input type="checkbox"/> Medium	<input type="checkbox"/> High / active	Occupation:
<input type="checkbox"/> Currently Wearing Custom Shoes	Company:	Height:	Information:		
Rx / Diagnosis:					

PLEASE MARK AREAS OF SPECIAL ATTENTION ON THE PICTURES BELOW ↓ AND ON THE CAST

L R LEFT RIGHT LEFT RIGHT

- FOOT STRUCTURE**
- Normal
 - Flaccid
 - Rigid
- ANKLE RANGE OF MOTION**
- Normal
 - Fixed
 - Limited
- WEIGHT BEARING TOE POSITION**
- Normal
 - Turned-Up
 - Turned-Down
 - Overlap or Hammered
- NON-WEIGHT BEARING TOE POSITION**
- Normal
 - Turned-Up
 - Turned-Down
 - Overlap or Hammered



CAST MODIFICATIONS

L	R	<input type="checkbox"/>	<input type="checkbox"/>	EXTRA HIGH TOE BOX
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EXTRA TOE ELONGATION
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CORRECT CAST TO 90°

L	R	<input type="checkbox"/>	<input type="checkbox"/>	DEPRESS AS MARKED
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SNUG HEELS
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PROSTHETIC FOOT CASTED

SHOE STYLE _____

COLOR _____

L	R	
<input type="checkbox"/>	<input type="checkbox"/>	LOW TOP
<input type="checkbox"/>	<input type="checkbox"/>	CHUKKA
<input type="checkbox"/>	<input type="checkbox"/>	HIGH TOP
<input type="checkbox"/>	<input type="checkbox"/>	SEMI-SURGICAL OPENING
<input type="checkbox"/>	<input type="checkbox"/>	SURGICAL OPENING

L	R	
<input type="checkbox"/>	<input type="checkbox"/>	LACE
<input type="checkbox"/>	<input type="checkbox"/>	VELCRO _____ PER SHOE
<input type="checkbox"/>	<input type="checkbox"/>	SPEED EYELETS _____ PER SHOE
<input type="checkbox"/>	<input type="checkbox"/>	HOOKS _____ PER SHOE
<input type="checkbox"/>	<input type="checkbox"/>	PADDED COLLARS
<input type="checkbox"/>	<input type="checkbox"/>	PADDED TONGUES

L	R	INSERTS
<input type="checkbox"/>	<input type="checkbox"/>	¼" PINK + ¼" WHITE
<input type="checkbox"/>	<input type="checkbox"/>	¼" PINK + ⅛" PORON + ¼" WHITE
<input type="checkbox"/>	<input type="checkbox"/>	¼" PINK + ⅛" PORON + ¼" CORK
<input type="checkbox"/>	<input type="checkbox"/>	¼" PINK + ¼" EVA
<input type="checkbox"/>	<input type="checkbox"/>	¼" PINK + ⅛" PORON + ¼" EVA

L	R	AMPUTATION FILLERS
<input type="checkbox"/>	<input type="checkbox"/>	MOLDED PROSTHETIC FILLER
<input type="checkbox"/>	<input type="checkbox"/>	NON-MOLDED TOE FILLER
<input type="checkbox"/>	<input type="checkbox"/>	MATCH SOUND SIDE
<input type="checkbox"/>	<input type="checkbox"/>	_____ SHORTER THAN SOUND SIDE

L	R	ELEVATIONS
<input type="checkbox"/>	<input type="checkbox"/>	HEEL <input type="checkbox"/> ON INSERT(S)
<input type="checkbox"/>	<input type="checkbox"/>	BALL <input type="checkbox"/> ON SOLE
<input type="checkbox"/>	<input type="checkbox"/>	TOE <input type="checkbox"/> IN ADDITION TO ¾" HEEL
		<input type="checkbox"/> TOTAL RAISE

L	R	SOLES
<input type="checkbox"/>	<input type="checkbox"/>	HEAVY DUTY WEIGHT
<input type="checkbox"/>	<input type="checkbox"/>	WEDGE SOLE
<input type="checkbox"/>	<input type="checkbox"/>	AMERICAN SOLE
<input type="checkbox"/>	<input type="checkbox"/>	ROCKER SOLES (FORE FOOT)
<input type="checkbox"/>	<input type="checkbox"/>	ROLLER SOLES (HEEL AND FOREFOOT)

SPECIAL INSTRUCTIONS

PLEASE CALL FOR CONSULT BEFORE PROCESSING



COMMON OPTION:

- Low Top
- Chukka
- High Top
- Velcro Closure
- Speed Laces
- Boot Hooks

COMMON MODIFICATIONS:

- Amputations Fillers
- Sole Wedges
- Flares
- Full Length Carbon
- Shanks
- Rocker Soles
- Wide Base

STANDARD LEATHER COLORS

Actual leather color and natural grain will vary from the representations below.



BLACK



**DARK
BROWN**



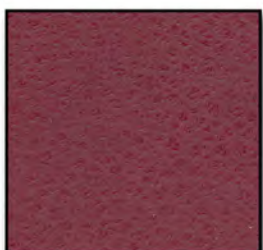
**MEDIUM
BROWN**



TAUPE



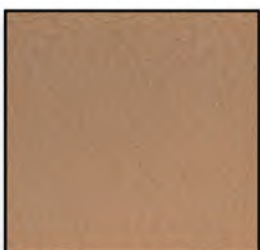
GREY



WINE



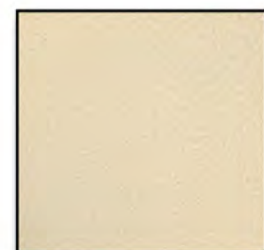
NAVY



**DARK
BEIGE**



**LIGHT
BEIGE**



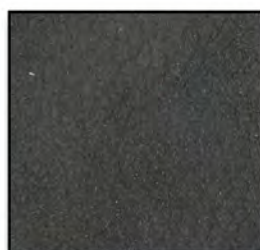
BONE



WHITE



**BEIGE
NU-BUCK**



**BLACK
NU-BUCK**



**BROWN
NU-BUCK**