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Date MM...../DD...../YYYY.....
Rush production
3 days 4 days

Clinician

Account Name/Number
Location
PO Number
Clinician
Contact me before processing



Recommended For:

- Athletic shoes without removable insoles
- Relieving pain and biomechanical imbalances

Clinical Indications:

- Overpronation
- Lower extremity pathology
- Poor posture

Standard specifications

Top Cover: .75mm Protex
Bottom Cover: None
Frame Material: Polypropylene per Weight
Frame Filler: None
Heel Cup: 12mm
Extension: None
Rearfoot Post: Extrinsic 55-65 Shore A EVA
Balance Forefoot to Rearfoot
Custom Congruent To Foot Model

Top cover length (optional - for changing defaults)

- Mets
- Sulcus
- Toes

Top cover material (optional - for changing defaults)

- Prolite** mm
- Neoprene mm
- Protex
- Glove leather
- Suede
- Plastazote mm

Bottom cover material (optional - for changing defaults)

- Vegan Suede**
- Grip
- Suede bottom wrap
- Myolite mm

Patient

First Name
Last Name
Gender: M F DOB MM...../DD...../YYYY.....
Height Weight Shoe size
Dx
Ship to Patient
Street Address
City
State Zip

Congruency (optional - for changing defaults)

- Foot captured in desired position**
- OR
- Balance forefoot to rearfoot (Root style)
- Lower arch height (mm)
- Raise arch height (mm)
- Asymmetrical feet

Rearfoot posting (optional - for changing defaults)

- Extrinsic or Intrinsic R L °
- Heel skive R L mm L mm
- Heel lift (mm) R L

Forefoot posting (optional - for changing defaults)

- Extrinsic R L °
- or Intrinsic R L
- or Met wedge

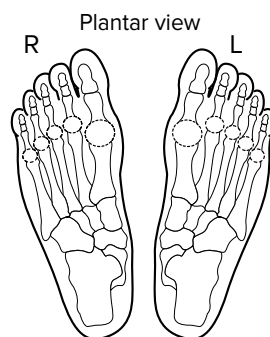
Extensions to sulcus (optional - for changing defaults) More options on 2nd page

- | | | | |
|--|------------------|---|-----------------------|
| | | | THICKNESS (mm) |
| | Morton's | R | L |
| | Reverse morton's | R | L |

Pads (optional - for changing defaults) More options on 2nd page

- | | | | |
|--|-------------------------|---|---|
| | Metatarsal pad | R | L |
| | Heel pad | R | L |
| | Myolite layer | R | L |
| | Met balance pad | R | L |
| | (select all that apply) | | |

Indicate as needed








Special instructions














Frame modifications (optional - for changing defaults)

| | RIGHT | | LEFT |
|--|----------------|------|----------------|
|  Heel Cup Depth | | (mm) | (mm) |
|  Frame Filler | Myolite | | Myolite |
|  Filler Skive | | | |
|  1 st Ray Cut Out | | | |
|  5 th Ray Cut Out | | | |
|  Navicular B. Out | | (mm) | (mm) |
|  5 th Button Out | | (mm) | (mm) |
|  Fascia Groove | | | |
|  Heel Aperture | | | |
|  Wide Arch Profile | | | |
|  Medial Flange | | | |
|  Lateral Flange | | | |
|  Valgus Frame Filler | Myolite | | Myolite |
|  Device Undercut | | | |
|  Width of Frame | | | |

Post modification (optional - for changing defaults)



| | | | |
|---|--|------|------|
|  Grip Heel Plate | | | |
|  Proximal Grind off | | | |
|  Heel Lift Tapered | | (mm) | (mm) |
|  Heel Elevator | | (mm) | (mm) |
|  Varus Motion Post | | | |

Pads & Cushions (optional - for changing defaults)









| | | | |
|--|--|------------|------------|
|  Plastazote Layer | | (mm) | (mm) |
|  Met Punch <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> | | | |
|  Medial Flap | | | |
|  Scaphoid Pad | | (mm) | (mm) |
|  Slot Accomodation | | | |
|  Met Bar 1-5 | | (mm) | (mm) |
|  Dancer's Pad | | (mm) | (mm) |
|  Toe Crest | | | |
|  Neuroma Pad | | interspace | interspace |
|  Cuboid Offload | | (mm) | (mm) |
|  Heel spur pad | | (mm) | (mm) |
|  Carlton Saddle | | (mm) | (mm) |
|  Valgus Onlay Pad | | | |

Forefoot extensions (optional - for changing defaults)

Sulcus extension

| | | | |
|---|--|---------------------|---------------------|
|  Sulcus Extension | | Myolite (mm) | Myolite (mm) |
|  Foot Cookie Ext. | | Myolite (mm) | Myolite (mm) |

To toe extension

| | | | |
|---|--|---------------------|---------------------|
|  Morton's Ext. | | | |
|  Rev. Morton's Ext. | | | |
|  Toe Extension | | Myolite (mm) | Myolite (mm) |
|  Dynamic Wedge | | (mm) | (mm) |
|  Varus Extension | | (mm) | (mm) |
|  Valgus Extension | | (mm) | (mm) |
|  Toe Filler | | | |
|  Detached Carbon Foot Plate to Toes | | | |