

# biotech

orthotic design inc.

## Custom Sandal

### PRESCRIPTION ORDER FORM

#### OFFICE USE ONLY

Arrive \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Completed \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Shipped \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

#### Account Information

Acct. Name \_\_\_\_\_

#### Patient Information

Date \_\_\_\_\_

Name \_\_\_\_\_

Occupation \_\_\_\_\_

Age \_\_\_\_\_ Gender \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_ lbs \_\_\_\_\_

#### Required Information

Colour  Black Leather  
 Dark Brown Leather  
 Cocoa Nubuk

Casting Method  Non Weight Bearing  
 Semi Weight Bearing  
 Full Weight Bearing

Foot Outline (weight bearing)  Pedograph  
 Tracing



Two Strap



Three Strap

#### POSTING INSTRUCTIONS

- Post according to lab evaluation
- Calcaneal Vertical
- Neutral Shell (As Casted)
- Arch Aggressiveness -
  - low  medium  high
- Post to these values:

**REARFOOT**      **LEFT**      **RIGHT**  
 Intrinsic \_\_\_°Varus/Valgus \_\_\_°Varus/Valgus  
 Extrinsic \_\_\_°Varus/Valgus \_\_\_°Varus/Valgus

**FOREFOOT**      **LEFT**      **RIGHT**  
 Intrinsic \_\_\_°Varus/Valgus \_\_\_°Varus/Valgus  
 Extrinsic \_\_\_°Varus/Valgus \_\_\_°Varus/Valgus

#### FOOTBED MODIFICATIONS

	LEFT	RIGHT
<input type="checkbox"/> Lateral Flange	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> High Medial Flange	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 1st Met Grind Out	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Toe Ridge	<input type="checkbox"/>	<input type="checkbox"/>

#### OUTSOLE MODIFICATIONS

Rocker Sole       LT       RT  
 Heel Lift      LT \_\_\_\_\_ mm      RT \_\_\_\_\_ mm

#### TOP COVERS

- Suede (default)
- 1/6" Poron and Suede
- 1/8" Poron and Suede
- 1/6" Plastazote
- Other \_\_\_\_\_

#### ACCOMMODATIONS



**Soft Core 35**  
 Left  Right  Both



**Metatarsal Cushion**  
 Left  Right  Both



**2-4 Met Pad**  
 Left  Right  Both



**Met Bar**  
 Left  Right  Both



**Intrinsic Heel Cushion**  
 Left  Right  Both



**Heel Spur Pad**  
 Left  Right  Both



**Heel Cushion**  
 Left  Right  Both



**Other** \_\_\_\_\_  
 Left  Right  Both

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