

ACCOUNT INFO

Name: _____ Account #: _____ PO# / MR#: _____
Shipping address: _____ City: _____ State: _____ Zip: _____

PATIENT INFO

Last name: _____ First name: _____
Age/DOB: _____ Weight: _____ Height: _____ Male Female
Shoe type: Dress Casual Athletic Other: _____
Shoe size: _____ Shoe width: _____ Shoe/insole enclosed: Yes No
Diagnosis: _____

ORDER INFO

2-day rush 3-day rush
 Make from prior Rx: (# _____)
 Ship to patient (please provide address)
Street: _____
City/State/Zip: _____
 Left Right

RICHIE BRACE

COLOR OPTIONS: Black White Beige



STANDARD ADULT
Full flexion ankle hinge pivot, custom ankle foot orthotic.

STANDARD CHILD (LITTLE RICHIE)
Pediatric for shoe sizes smaller than an adult size 4.



STANDARD WITH RESTRICTED ANKLE PIVOT
Limits ankle motion yet allows smooth contact phase of gait. Allows 3-5 degree of motion.



DYNAMIC ASSIST
Spring hinge provides up to 15 degrees of dorsiflexion to treat dropfoot conditions.



SOLID AFO
Traditional full leg posterior shell with balanced functional orthotic footplate.



RICHIE SOCCER
Includes integrated shin guard.

RICHIE CALIFORNIA/GAUNTLET

COLOR OPTIONS: Tan Chocolate



RICHIE CALIFORNIA
Leather AFO with medial or lateral arch suspender and single strap closure.



RICHIE GAUNTLET
Laced Leather AFO with medial AND lateral arch suspender and legitimate varus/valgus control.

RICHIE OTC BRACES

*No cast needed



STANDARD OTC
A semi-rigid ankle stirrup articulated with a pre-formed orthotic footplate.



DYNAMIC ASSIST OTC
A pre-fabricated ankle foot orthosis providing dynamic dorsiflexion and eversion of the ankle joint.

AeroSpring Brace and modifications on page 2

RICHIE AEROSPRING BRACE SYSTEMS



- ACHILLES OFFLOADING:** Includes Carbon fiber AFO, one pair of custom orthotics and one pair of 20mm graduated heel wedges in 10mm increments.
- MIDFOOT OFFLOADING:** Includes Carbon Fiber AFO, one pair of custom orthotics, one pair of 10mm graduated heel wedges.
- DROFFOOT STABILITY:** Includes Carbon Fiber AFO, one pair of custom orthotics, No heel wedges are recommended for this system.
- PLANTAR FASCIA OFFLOADING:** Includes Carbon Fiber AFO, one pair of custom orthotics, one pair of 10mm graduated heel wedges.

BRACE MODIFICATIONS

- Medial Arch Suspender:** Adjustable lifting strap under talo-navicular joint for severe PTTD.
- Lateral Arch Suspender:** Adjustable lifting strap under calcaneal-cuboid joint for peroneal tendinopathy and severe lateral ankle instability.
- Posterior Upright Connector:** Connects uprights to stiffen brace (Arch suspenders require either a restricted ankle pivot or a posterior upright connector).
- Adjust Uprights for tibial varum**

PATIENT ALIGNMENT

Calcaneus alignment to leg: Inverted ___ Everted ___
 Leg alignment to floor: Varus ___° Valgus ___°

ORTHOTIC THICKNESS (POLY)

- 3mm (standard under 200 lbs)
- 4mm (standard over 200 lbs)
- 5mm

HEEL CUP DEPTH

- 35mm (Standard)
- 20mm
- Other: _____

SKIVE FLANGE

- Medial
 Lateral

TOP COVER

- Firm EVA (Standard) (Blue/Green/Black combo)
- Micropuff: Medium EVA (Black)
- Terryco/Neoprene/Spenco (Black)
- Diabetic: 1/8" Pink Plastizote

1/8" 1/16"

TOP COVER LENGTH

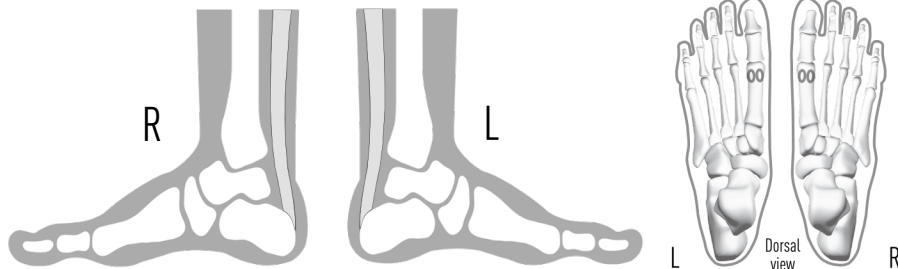
- Met Length (Standard)
- Sulcus (Std.- Dynamic Assist)
- Full-length

POSTING

- Heel Stabilizer (Standard) No Posting
- Heel Post ___° Inverted/Varus ___° Motion/Valgus
- Heel Lift ___mm
- Sulcus Forefoot Wedge ___° Varus ___° Valgus
- Plantar arch fill (black crepe)

ACCOMMODATIONS

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Fascial Groove | <input type="checkbox"/> Grind out 1st ray | <input type="checkbox"/> IPJ Accommodation | Heel Spur pads: |
| <input type="checkbox"/> Styloid | <input type="checkbox"/> Met Pad 1/8" | <input type="checkbox"/> Morton's Ext | <input type="checkbox"/> Heel cushion |
| <input type="checkbox"/> Navicular | <input type="checkbox"/> Met Bar 1/8" | <input type="checkbox"/> Balance Pad | <input type="checkbox"/> Donut cushion |
| <input type="checkbox"/> Grind out 1st met | <input type="checkbox"/> Toe Crest | <input type="checkbox"/> Arch Pad 1/8" | <input type="checkbox"/> Horseshoe cushion |
| <input type="checkbox"/> Padded Strap | <input type="checkbox"/> Medial Flip | | |



*Please review price list for additional options not shown and make any special notes below.

NOTES/SPECIAL INSTRUCTIONS:

Signature: _____

Print name: _____

Date: _____