

**ACCOUNT INFO**

Name: \_\_\_\_\_ Account #: \_\_\_\_\_ PO# / MR#: \_\_\_\_\_

Shipping address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**PATIENT INFO**

Last name: \_\_\_\_\_ First name: \_\_\_\_\_

Age/DOB: \_\_\_\_\_ Weight (Required): \_\_\_\_\_ Height: \_\_\_\_\_  Male  Female

Shoe type:  Dress  Casual  Athletic  Other: \_\_\_\_\_

Shoe size (Required): \_\_\_\_\_ Shoe width: \_\_\_\_\_ Diagnosis: \_\_\_\_\_

**ORDER INFO**

Make \_\_\_\_\_ pairs

Make from prior Rx: (# \_\_\_\_\_)

Ship to patient (please provide address)

Left only  Right only

**NORTHWEST SELECT ORTHOTICS™** Select one. Specs on reverse. **Patient weight required.**

**Activity/use**

- Athletic
  - Low profile shoes
  - Standard / high profile shoes
  - Standard / high profile shoes + lateral stability
- Everyday
- Dress (Heel below 1.5")
- Accommodative (Control + comfort)

**Foot pain/pathology**

- AAF/PTTD
- Heel spurs
- Sesamoiditis/hallux limitus
- Plantar fasciitis
- Amputee

**YOU BUILD ORTHOTICS™** Patient weight required. Underlined options are standard/default. Rx forms with missing/incomplete info will automatically revert to standard/default options.

**Shell/foundation**

**Polypropylene**

High-quality polypropylene routed to NWPL's exacting specifications for excellent performance.

Semi-flexible      Semi-rigid      Rigid      Extra rigid

Semi-flexible      Semi-rigid      Rigid

**How it works**

Select flex based on desired in-shoe feel & treatment goals → Ensure patient weight is provided → Shell crafted based on selected flex and patient information

**Arch height (shell)**

- Very high (Very intimate to arch)
- High (Intimate to arch)
- Standard
- Low (Less intimate to arch)

**Top cover length and material**

- 3/4
- To sulcus
- Heel to toe

Vinyl  Charcoal  Dark brown  Gray-tan  Blue-gray  Leather (black)

Neoprene  1/16" (1.5mm)  1/8" (3.0mm)      Microsuede  Black  Gray

Firm EVA  1/16" (1.5mm)  1/8" (3.0mm)      Soft EVA  1/16" (1.5mm)  1/8" (3.0mm)

1/16" top cover requires extension

**X-Guard (bottom cover)**

- Standard
- Sulcus
- Full
- Complete

**Cushion**

- 3/4
- To sulcus
- Heel to toe

P-Foam  1/16" (1.5mm)  1/8" (3.0mm)

Soft EVA  1/16" (1.5mm)  1/8" (3.0mm)

Firm EVA  1/16" (1.5mm)  1/8" (3.0mm)

**Extension**

- Full
- Sulcus

P-Foam  1/16" (1.5mm)  1/8" (3.0mm)

Soft EVA  1/16" (1.5mm)  1/8" (3.0mm)

Firm EVA  1/16" (1.5mm)  1/8" (3.0mm)

# DETAILS/SPECS FOR NORTHWEST SELECT ORTHOTICS™





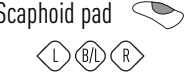


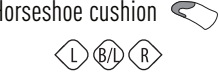
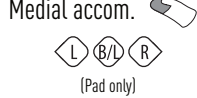

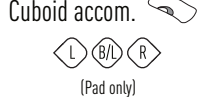
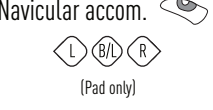


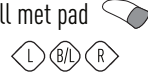
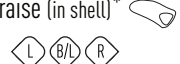

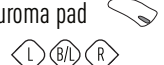






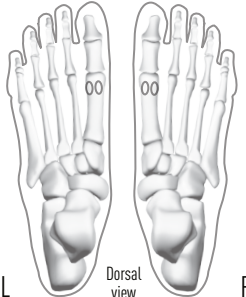
## Activity/use

<b>Everyday</b>	Semi-rigid shell / charcoal vinyl top cover (heel to toe) / 1/16" firm EVA extension (full) / X-Guard (standard)
<b>Dress - Heel below 1.5"</b>	Semi-rigid shell / black microsuede top cover (to sulcus) / 1/16" P-Foam extension (sulcus-length) / X-Guard (standard)
<b>Athletic - Low profile shoes</b>	Rigid shell / charcoal vinyl top cover (3/4-length) / X-Guard (standard)
<b>Athletic - Standard / high profile shoes</b>	Rigid shell / 1/16" neoprene top cover (heel to toe) / 1/16" firm EVA extension (full) / deep heel cup / X-Guard (standard)
<b>Athletic - Standard / high profile shoes + stability</b>	Rigid shell / 1/16" neoprene top cover (heel to toe) / 1/16" firm EVA extension (full) / deep heel cup / heel post (vertical) / X-Guard (standard)
<b>Accommodative - Control + comfort</b>	Semi-flexible shell / charcoal vinyl top cover (heel to toe) / 1/16" P-Foam cushion (heel to toe)

## Foot pain/pathology

<b>AAF/PTTD</b>	Rigid shell (AAF/PTTD design) / charcoal vinyl top cover (3/4-length) / low arch height / medial heel skive / deep heel cup / integrated extrinsic forefoot post (3 degrees varus) / integrated heel post (vertical) / high medial overlay
<b>Plantar fasciitis</b>	Semi-rigid shell / charcoal vinyl top cover (heel to toe) / 1/16" firm EVA extension (full) / medial heel skive / deep heel cup / high arch height / X-Guard (standard)
<b>Sesamoiditis/hallux limitus</b>	Semi-rigid shell / charcoal vinyl top cover (heel to toe) / 1/16" Firm EVA extension (full) / Reverse Morton's extension
<b>Heel spurs</b>	Semi-rigid shell / charcoal vinyl top cover (heel to toe) / 1/16" P-Foam cushion (heel to toe) / 1/16" firm EVA extension (full) / deep heel cup / heel cushion
<b>Amputee</b>	Semi-rigid shell (amputee design) / 1/16" soft EVA top cover (heel to toe) / 1/16" firm EVA extension (full)

## ORTHOTIC OPTIONS = Bilateral

Posting	Heel	Metatarsal	Forefoot							
<p><b>Integrated heel post</b></p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"> <p>Left</p> <p>Varus _____°</p> <p>Vertical _____°</p> <p>Valgus _____°</p> </td> <td style="width: 50%; border: none;"> <p>Right</p> <p>Varus _____°</p> <p>Vertical _____°</p> <p>Valgus _____°</p> </td> </tr> </table> <p style="text-align: center; font-size: small;">Maximum of 4°</p> <p style="font-size: x-small;">Integrated heel posts are crafted as part of the shell. Standard heel posts are available for an added cost. Request standard posts in notes.</p> <p><b>Heel lift (requires heel post)</b></p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"> <p>Left</p> <p>1/8" (3.0mm)</p> <p>2/8" (6.0mm)</p> <p>3/8" (9.0mm)</p> <p>4/8" (12.0mm)</p> </td> <td style="width: 50%; border: none;"> <p>Right</p> <p>1/8" (3.0mm)</p> <p>2/8" (6.0mm)</p> <p>3/8" (9.0mm)</p> <p>4/8" (12.0mm)</p> </td> </tr> </table> <p><b>Integrated forefoot post</b></p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"> <p>Left</p> <p><input type="checkbox"/> Extrinsic</p> <p><input type="checkbox"/> Intrinsic</p> <p>Varus _____°</p> <p>Vertical _____°</p> <p>Valgus _____°</p> </td> <td style="width: 50%; border: none;"> <p>Right</p> <p><input type="checkbox"/> Extrinsic</p> <p><input type="checkbox"/> Intrinsic</p> <p>Varus _____°</p> <p>Vertical _____°</p> <p>Valgus _____°</p> </td> </tr> </table> <p style="text-align: center; font-size: small;">Maximum of 6°</p>	<p>Left</p> <p>Varus _____°</p> <p>Vertical _____°</p> <p>Valgus _____°</p>	<p>Right</p> <p>Varus _____°</p> <p>Vertical _____°</p> <p>Valgus _____°</p>	<p>Left</p> <p>1/8" (3.0mm)</p> <p>2/8" (6.0mm)</p> <p>3/8" (9.0mm)</p> <p>4/8" (12.0mm)</p>	<p>Right</p> <p>1/8" (3.0mm)</p> <p>2/8" (6.0mm)</p> <p>3/8" (9.0mm)</p> <p>4/8" (12.0mm)</p>	<p>Left</p> <p><input type="checkbox"/> Extrinsic</p> <p><input type="checkbox"/> Intrinsic</p> <p>Varus _____°</p> <p>Vertical _____°</p> <p>Valgus _____°</p>	<p>Right</p> <p><input type="checkbox"/> Extrinsic</p> <p><input type="checkbox"/> Intrinsic</p> <p>Varus _____°</p> <p>Vertical _____°</p> <p>Valgus _____°</p>	<p><b>Deep heel cup</b></p> <p style="text-align: center;"></p> <p><b>Heel cushion</b></p> <p style="text-align: center;"></p> <p><b>Donut cushion</b></p> <p style="text-align: center;"></p> <p><b>Arch/midfoot</b></p> <p><b>High medial overlay</b></p> <p style="text-align: center;"></p> <p><b>Scaphoid pad</b></p> <p style="text-align: center;"></p> <p><b>Plantar fascia accom.</b></p> <p style="text-align: center;"></p>	<p><b>Medial heel skive</b></p> <p style="text-align: center;"></p> <p><b>Horseshoe cushion</b></p> <p style="text-align: center;"></p> <p><b>Medial accom.</b></p> <p style="text-align: center;"></p> <p><b>Base of 5th/styloid</b></p> <p style="text-align: center;"></p> <p><b>Cuboid accom.</b></p> <p style="text-align: center;"></p> <p><b>Navicular accom.</b></p> <p style="text-align: center;"></p>	<p><b>Cutout</b></p> <p style="text-align: center;"></p> <p style="text-align: center;">1 2 3 4 5    1 2 3 4 5</p> <p style="text-align: center; font-size: x-small;">(In cushion only)</p> <p><b>Met pad</b></p> <p style="text-align: center;"></p> <p style="text-align: center;"><input type="checkbox"/> Soft    <input type="checkbox"/> Firm</p> <p><b>Full met pad</b></p> <p style="text-align: center;"></p> <p><b>Met raise (in shell)*</b></p> <p style="text-align: center;"></p> <p><b>Dancer's pad</b></p> <p style="text-align: center;"></p> <p style="text-align: center;">1 2 3 4 5    1 2 3 4 5</p> <p><b>Neuroma pad</b></p> <p style="text-align: center;"></p> <p style="text-align: center;">1 2 3 4    1 2 3 4</p> <p><b>Shaft pad</b></p> <p style="text-align: center;"></p> <p style="text-align: center;">1 2 3 4 5    1 2 3 4 5</p>	<p><b>Forefoot wedge</b></p> <p style="text-align: center;"></p> <p style="text-align: center;"><input type="checkbox"/> Varus    <input type="checkbox"/> Valgus</p> <p><b>Morton's extension</b></p> <p style="text-align: center;"></p> <p style="text-align: center;">(In cushion only)</p> <p><b>Rev. Morton's extension</b></p> <p style="text-align: center;"></p> <p style="text-align: center;">(Cutout in pad only)</p> <p><b>Hallux accom.</b></p> <p style="text-align: center;"></p> <p><b>Toe crest accom.</b></p> <p style="text-align: center;"></p>
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			 <p style="text-align: center; font-size: x-small;">Dorsal view</p>							

## NOTES AND SIGNATURE

Signature: \_\_\_\_\_

Print name: \_\_\_\_\_

Date: \_\_\_\_\_