

ORTHOTIC WORK ORDER

Patient:	Shoe Size:	Sex:	_ Date:		
Provider/Account: Location:					
Custom Foot Orthotics Modifications:					
	<u>Dress</u>	Metatars	sal Pad	L,	R
SPORT SEMI-FLEX		Heel Spur Pad		L,	R
		Deep H	eel Cup	L,	R
Tr. C		Extnc H	eel Post	L,	R
Top Cover:		□Refurbish □Repair			
□SPENCO PERFORATED EVA □LEATHER □MULTI-COLOR EVA □PLASTAZOTE					
(w/o padding)					
Extension: Full Sulcus Methead					
Other (+\$10): GLOBE Orthotic: Plastazote under spenco top; leather bottom UCBL (Reverse) Morton's Extension □L, □R Scaphoid Arch Pad L, R Gait Plate L, R(To Induce: Out-Toe In-toe) Toe Filler L, R Met-head Cutout: □1st □5th Arch Reinforcement L, R Heel Lift L, Rmm					
□AFO Device: □ Left □ Right □ B/L □ Hinged AFO w/90° stop □ Solid AFO □ SMO □ ARIZONA					
☐ Richie AFO (Low Profile/Stirrup) Knee AFO ☐ Crow Boot					
(□Dorsi Flex					
Additional modifications/instructions:					

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