

PATIENT	PODIATRIST
AGE SEX	ADDRESS
WEIGHT SHOE SIZE.....	PHONE DATE

RETURN DATE RAPID RETURN (DESPATCHED 48 HOUR AFTER RECEIPT OF CASTS)

CAST MODIFICATIONS

<u>MODIFICATION METHOD</u> <input type="checkbox"/> MODIFIED ROOT (STD) <input type="checkbox"/> INVERTED <input type="checkbox"/> MEDIAL SKIVEmm <input type="checkbox"/> MY STYLE * <input type="checkbox"/> OTHER.....	<u>REARFOOT CORRECTION</u> <table border="0"> <tr> <td style="text-align: center;">LEFT</td> <td></td> <td style="text-align: center;">RIGHT</td> </tr> <tr> <td></td> <td style="text-align: center;">DEGREES</td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td style="text-align: center;">INVERTED</td> <td><input type="checkbox"/></td> </tr> <tr> <td></td> <td style="text-align: center;">EVERTED</td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td style="text-align: center;">EVERTED</td> <td><input type="checkbox"/></td> </tr> </table>	LEFT		RIGHT		DEGREES		<input type="checkbox"/>	INVERTED	<input type="checkbox"/>		EVERTED		<input type="checkbox"/>	EVERTED	<input type="checkbox"/>	<input type="checkbox"/> EXTRA TALO-NAVICULAR CONTROL <input type="checkbox"/> EXTRA MID ARCH CONTROL <input type="checkbox"/> CUBOID NOTCH - S M <input type="checkbox"/> ME D <input type="checkbox"/> LG <input type="checkbox"/> <input type="checkbox"/> EXTRA HEEL EXPANSION <input type="checkbox"/> MINIMAL HEEL EXPANSION <input type="checkbox"/> NO LATERAL HEEL CUP (STD WIDTH) <input type="checkbox"/> PLANTAR FASCIA GROOVE <input type="checkbox"/> EXTRA PLASTER FIRST RAY
	LEFT		RIGHT														
	DEGREES																
<input type="checkbox"/>	INVERTED	<input type="checkbox"/>															
	EVERTED																
<input type="checkbox"/>	EVERTED	<input type="checkbox"/>															

SHELL

<u>SHELL MATERIAL</u> <input type="checkbox"/> 4.5MM POLYPROP' (STD) <input type="checkbox"/> 3 MM POLYPROP' <input type="checkbox"/> CARBON FIBRE <input type="checkbox"/> EVA - SOFT <input type="checkbox"/> EVA - MEDIUM <input type="checkbox"/> EVA - FIRM <input type="checkbox"/> LAB DISCRETION <input type="checkbox"/> MY STYLE *	<u>SHELL ACCOMODATIONS</u> <input type="checkbox"/> MORTONS EXT (L).....mm (R)mm <input type="checkbox"/> APERTURED HEEL <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> FIRST RAY CUT-OUT <input type="checkbox"/> LOW BULK GRIND <input type="checkbox"/> COBRA <input type="checkbox"/> HIGH HEEL CUPmm <input type="checkbox"/> MEDIAL FLARE <input type="checkbox"/> MEDIAL FLANGE <input type="checkbox"/> LATERAL FLANGE <input type="checkbox"/> MY STYLE *	<u>POSTING</u> <input type="checkbox"/> REARFOOT EVA POSTS <input type="checkbox"/> HEEL RAISE L.....mm Rmm <input type="checkbox"/> NO HEEL PLATE <input type="checkbox"/> EVA ARCH FILL -DENSITY..... <input type="checkbox"/> FOREFOOT EVA POSTS LE FTDEGREES INV / EV R IGH T.....DEGREES INV / EV
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PADDING/ COVERS

<u>COVER LENGTH</u> <input type="checkbox"/> SHELL <input type="checkbox"/> WEB <input type="checkbox"/> FULL (STD)	<u>PADDING</u> <table border="0"> <tr> <td>SHELL</td> <td>FOREFOOT</td> </tr> <tr> <td><input type="checkbox"/> (STD) NONE <input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> 1.5mm PPT <input type="checkbox"/> (STD)</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> 3.0mm PPT <input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	SHELL	FOREFOOT	<input type="checkbox"/> (STD) NONE <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 1.5mm PPT <input type="checkbox"/> (STD)	<input type="checkbox"/>	<input type="checkbox"/> 3.0mm PPT <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> SM MET DOMES <input type="checkbox"/> MED MET DOMES <input type="checkbox"/> LG MET DOMES <input type="checkbox"/> XL MET DOMES <input type="checkbox"/> OTHER (describe below)	<u>COVERS</u> <input type="checkbox"/> VINYL (S TD) <input type="checkbox"/> MULTIFORM <input type="checkbox"/> PS VLIES <input type="checkbox"/> VITA <input type="checkbox"/> LEATHER <input type="checkbox"/> NEOPRENE <input type="checkbox"/> OTHER
SHELL	FOREFOOT										
<input type="checkbox"/> (STD) NONE <input type="checkbox"/>	<input type="checkbox"/>										
<input type="checkbox"/> 1.5mm PPT <input type="checkbox"/> (STD)	<input type="checkbox"/>										
<input type="checkbox"/> 3.0mm PPT <input type="checkbox"/>	<input type="checkbox"/>										

SPECIAL INSTRUCTIONS

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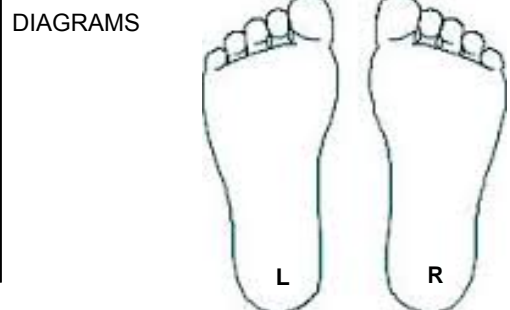
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* SEPARATE MY STYLE FORM MUST BE COMPLETED WITH THIS OPTION