

1118 Longwood Ave. 2nd
Floor, Bronx, New York 10474
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**TO SERVE YOU PROPERLY, PLEASE COMPLETELY AND LEGIBLY FILL OUT
THE BASIC INFORMATION REQUIRED OR YOU MAY INCUR EXTRA COSTS & DELAYS**

PROVIDE A FULL WEIGHT BEARING TRACING (extending the toes) FOR THE MOST ACCURATE RESULTS

Purchase Order #

Date: / / Acct. #

BILL ADDRESS:

City: State: Zip

City: _____ State: _____ Zip: _____

Tel # _____ Fax # _____

Tel # _____ Fax# _____

Contact: _____ Title: _____

Contact: _____ Title: _____

☒ Fax Order Acknowledgment To The Shipping Address

 Fax Order Acknowledgment To The Billing Address

☐ Fax Additional Acknowledgment To:

Title: Fax # ()

☐ Male ☐ Female Weight: Age:

Activity level: ☐ Non Ambulatory ☐ Low / transfer ☐ Medium ☐ High / active Occupation:

☐ Currently Wearing Custom Shoes Company: Height: Information:

Rx / Diagnosis:

Primary reason for ordering custom shoes:

☐ SPECIAL DIABETIC PROGRAM

(Available for styles on pages 2, 3, & 5 only and the box to the left must be checked to receive special package pricing.)

PLEASE MARK AREAS OF SPECIAL ATTENTION ON THE PICTURES BELOW ↓ AND ON THE CAST

FOOT STRUCTURE

Normal

Flaccid

Rigid

ANKLE RANGE OF MOTION

Normal

Fixed

Limited

WEIGHT BEARING TOE POSITON

Normal

Turned-Up

Turned-Down

Overlap or Hammered

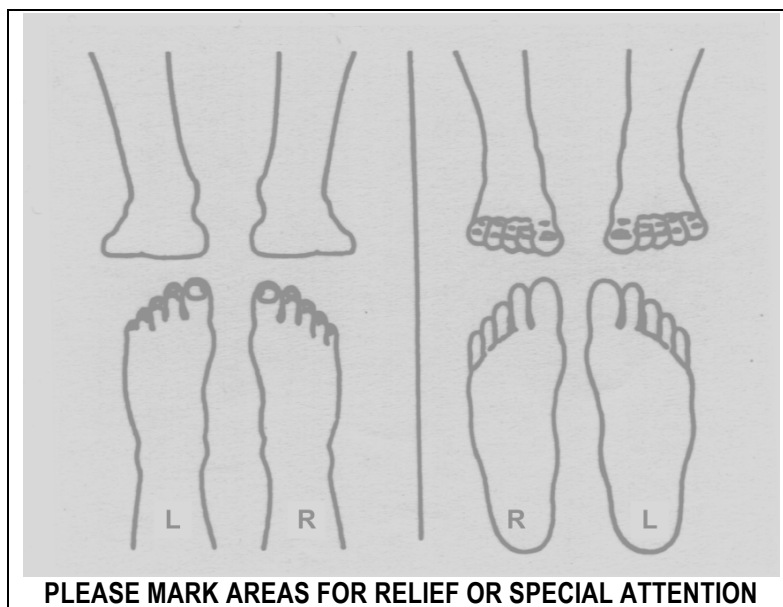
NON-WEIGHT BEARING TOE POSITION

Normal

Turned-Up

Turned-Down

Overlap or Hammered



MARKING VERTICAL LINES ON THE CAST GUARANTEES YOUR ALIGNMENT

☐ PLEASE CALL BEFORE PROCESSING ☐ THIS ORDER IS A 2nd OR 3rd PAIR

Eff:3/2006

1	L	R	SHOE STYLE		Catalog Page	
			LOW TOP		below the ankle or mark the cast for specific height	
			CHUKKA		just above the ankle or mark the cast for specific height (more support & control)	
			HIGH TOP		~ 2" above the ankle, specify in inches or mark cast for specific height (maximum control & function)	
			POSTERIOR SHOE HEIGHT IN INCHES FROM BASE OF CONSUMERS HEEL TO TOP OF COUNTER			
			SEMI-SURGICAL OPENING		(Standard)	between 1/2 to 2/3 of the distance from the heel to the toe
			SURGICAL OPENING		to the end of the toes, maximum opening for rigid or painful deformities	
			SPECIAL OPENING AS MARKED			
			LACE Closure			
			VELCRO Closure			
			PER SHOE			
			STRAP & BUCKLE			
			SPEED LACES		TOP 3 EYELETS	chukka and high tops laced quickly, in groups of 3 pairs on top or specify
			HOOKS		chukka and high top laces criss-crossed quickly, in groups of 3 pairs on top or specify	
			PULL LOOPS			
			sewn into the back (usually boots) patient pulls upward while placing foot into the shoe			
			LEATHER WRAP		COLLARS	cosmetic, wrapped over the edges to minimize edge pressure
			SOFT FOAM PADDED		COLLARS	foam wrapped over the edges of upper to minimize edge pressure, increase comfort
			CUSTOM PADDED		COLLARS (as pictured or call)	cosmetic while providing special sizes, shapes and / or placement
			SOFT FOAM PADDED		TONGUES	keeps the foot from sliding forward, wide surface area enhances comfort and fit
			BELLWS		TONGUES	minimizes water or sand from entering the shoe around the laces and the tongue
			SPOT PLASTAZOTE PADDING			
			placed between the inner and outer leather, provide spot relief anywhere marked			
2	L	R	LEATHER 'UPPER' SHOE COLORS (If you have any question regarding color or leather type please call)			
			BLACK			
			BLACK	Nubuck	cosmetic, suede like appearance, may not wear as well as regular leather (no protective polish)	
			BROWN (Dark)			
			BROWN (Dark)	Deerskin	very soft, minimize high pressure areas but may not support heavy weight / angular deformity	
			BROWN (Dark)	Nubuck	cosmetic, suede like appearance, may not wear as well as regular leather (no protective polish)	
			DARK BEIGE	Nubuck	cosmetic, suede like appearance, may not wear as well as regular leather (no protective polish)	
			DARK BEIGE		fragile, color will vary	
			WINE			
			NAVY			
			GRAY			
			BONE			
			WHITE			
			very fragile, color will vary			
			very fragile			
			BOOT LEATHER	BLACK	BROWN	extra durable, firmer, may not be suitable for fragile skin
3	L	R	CAST MODIFICATIONS			
			COSMETIC FRONT		COSMETIC IMPROVEMENT, lowers the profile on the toe box (less angular) without minimizing function	
			MATCH FRONT OF THE SHOES SHAPE & HEIGHT		make the front of the shoes the same shape & height if possible	
			LENGTH OF SHOE W/ AMPUTATION		Shorter Than Sound Side By	Same As Sound Side
			APPLY STANDARD TOE ELONGATION			
			Standard toe elongation 3/4" from longest toe			
			APPLY STANDARD TOE BOX			
			Standard toe box is 1/8 "			
			APPLY EXTRA TOE ELONGATION			
			we add ~3/4"at the toe / check the box for 1/4" more or specify			
			APPLY EXTRA HEIGHT TO TOE BOX			
			we add ~1/8" over the toes / check the box for 1/8"more or specify			
			SNUG HEELS			
			extra soft tissue removed around the ankle for more intimate fit			
			DEPRESS AS MARKED (on cast and/ or tracing)			
			mark area and depth required for relief of high pressure or bony prominence			
			CASTED OVER AFO			
			PROSTHETIC FOOT CASTED			
			shoe inserts will be 1/4" non-compressible cork for easy adjustment and stability			
			CORRECT CAST TO 90°			
			Patient has full ROM of the ankle normal heel elevation should be applied			
4	L	R	SHOE BALANCING			
			BALANCE SHOE TO 90°	ANTERIOR / POSTERIOR	MEDIAL / LATERAL	
			BALANCE SHOE TO ALIGNMENT LINES			
			BALANCE AS CAST	STANDARD 3/4" HEEL RAISE		
5	L	R	REMOVABLE CUSTOM MOLDED INSERTS			
			1/4" Pink PLASTAZOTE® over 1/4" EVA		STANDARD COMBINATION, soft smooth top + firm bottom layer	
			1/4" Pink PLASTAZOTE + 1/8" PORON + 1/4" White PLASTAZOTE		molds/absorbs shock, light/medium weight	
			1/4" Pink PLASTAZOTE over 1/8" PORON over 1/4" Firm CORK		the best combination for heavy, active protection	
			PINK (SOFT) PLASTAZOTE®	soft, smooth, non-allergic, washable, light, moldable	1/4"	1/2"
			WHITE (FIRM) PLASTAZOTE®	firmer version (heavier patients) with the same benefits	1/4"	1/2"

5	L	R	REMOVABLE CUSTOM MOLDED INSERTS (CONTINUED)						
			EVA BASE LAYER 35-40 SHORE A DUROMETER			Complies with Medicare guidelines	1/4"	1/2"	
			PORON®			shock absorbing, lightweight, non-bottoming layer	1/16"	1/8"	1/4"
			CORK COMPOSITE				1/8"	1/4"	1/2"
			OTHER MATERIAL(S)						
			EXTRA PAIR'S CUSTOM INSERTS (ordered with shoes)			One Pair	Two Extra Pairs		
			ACCOMMODATIONS:						
			DEPRESSION WITH SOFT SPOT			depression added to the insert + protective poron inside			
			METATARSAL PAD						
			TOP COVERS			LEATHER	durable and comfortable	SPENCO	shock & shear absorbing
6	L	R	AMPUTATION FILLER MARK SPECIAL INSTRUCTIONS ON THE BACK						
			BUILT ON THE MOLD & MOLDED TO THE AMPUTATION SITE						
			Molded to the amputation site "socket" type toe filler						
			BUILT ON THE REMOVABLE MOLD NOT MOLDED						
			Plastazote Filler is soft, and easy for you to modify or adjust if required						
			COMPENSATION AMOUNT (in inches)			Make Shorter (than sound side by)			
7	L	R	SPECIAL LINING STANDARD LINING: PEARL COWHIDE ON CUSTOM MOLDED STYLES- -VELCLOTH ON BOARD LASTED						
			FULL 1/8" PINK PLASTAZOTE						
			diabetic, arthritic, lesions, ulcers, fragile skin (soft, low friction, non allergic, washable)						
			SOFT VELCLOTH FABRIC						
			N/A on styles on page 2, 3, & 5 soft, flexible, durable and extremely comfortable for active patients						
			FULL FLEECE						
8	L	R	CONSTRUCTION						
			LIGHT WEIGHT						
			REGULAR WEIGHT						
			HEAVY WEIGHT						
			WEDGE						
			provides maximum support and surface area, not leather covered and more cosmetic						
			FLEXIBLE FORE FOOT						
			bends easily at the metatarsal heads / minimize break in & maximize comfort						
9	L	R	SOLING						
			LIGHT WEIGHT						
			12 iron, light weight for geriatric or minimal ambulatory patients, but wears well						
			REGULAR WEIGHT						
			Standard - 18 iron, good all around weight vs. durability						
			HEAVY DUTY WEIGHT						
			24 iron, extra firm and thick for extra hard wear and tear or heavy weights						
			SPECIAL						
			see price list for complete options or call customer service						
			UNIT						
			COSMETIC, looks like separate outside heel and sole combination but more durable						
			ROCKER (Fore Foot)			ROLLER (Heel & Toe)			
			(mark the bottom of the cast for exact placement)						
			WEDGE						
			provides maximum support and surface area, not covered with leather, more cosmetic						
			CARBON FIBER SHANK			1/2 Length		Full Length	
			RIGID soles for rockers, braces, amputation fillers, x-heavy						
			EXTRA FIRM MID-SOLE LAYER FOR BRACE ATTACHMENT						
			lighter than shank, can attach brace through it						
			LEAVE THE SOLE OFF						
			when you are installing a brace, rocker sole or unique build up						
10	L	R	SHOE HEEL HEIGHT						
			STANDARD HEEL PITCH 3/4" HEEL 0" AT BALL						
			MEDIUM HEEL PITCH 5/8" HEEL 0" AT BALL						
			LOW HEEL PITCH 3/8" HEEL 0" AT BALL						
11	L	R	EXTRA PLATFORM RAISE* STANDARD HEEL HEIGHT = 3/4" AT THE HEEL / 0" AT THE BALL						
			INTERNAL RAISE ON INSERT OR BASE			EXTERNAL RAISE ON SOLE			
			HEEL						
			BALL		TOTAL HEIGHT		IN ADDITION TO STANDARD HEEL		
			TOE						
12	L	R	BASE MODIFICATIONS						
			LATERAL FLARE						
			add 1/4" or specify, provides more lateral support (inversion sprains) + wider base						
			MEDIAL FLARE						
			add 1/4" or specify, provides more medial support (pronation and mid-foot rotation) + wider base						
			WIDE BASE						
			superior stability, firm vertical walls start from the widest points of the foot (medial and/or lateral)						
			LATERAL WEDGE		add 1/4" or specify in inches / degrees or (mark posterior line on the cast), enhance stability				
			MEDIAL WEDGE		add 1/4" or specify in inches / degrees or (mark posterior line on the cast), enhance stability				
13	L	R	REINFORCED HEEL COUNTERS SPECIFY HEIGHT, SHAPE & LENGTH MAXIMUM RESULTS FOR						
			LATERAL						
			enhanced lateral rear/mid-foot control, give us dimensions or mark the cast for a specific shape						
			MEDIAL						
			enhanced medial rear/mid-foot control, give us dimensions or mark the cast for a specific shape						
			FOUR COUNTERS			Firm counters		Firm support, extra thick, wraps around the heel from medial to lateral, please mark	
			AFO COUNTERS						
			Plastic Reinforced with AFO Trim lines (Chukka & High top Only)						
			1/8" poly-pro from the collar of shoe to met-heads						
15	L	R	SAFETY TOE BOX						
			CUSTOM MOLDED THERMOPLASTIC COMPOSITE						
			extra strong, light, resilient, (not ANSI or OSHA Approved call for details)						
16	L	R	PERFORATIONS						
			SIDES		TOP		ALL		
			OTHER						

SPECIAL INSTRUCTIONS☐ SHIP NEXT DAY UPS☐ SHIP SECOND DAY UPS☐ SHIP GROUND UPS☐ SEND ____ CATALOGS☐ SEND ____ ORDER FORMS☐ SEND ____ UPS LABELS**CASTING INFORMATION FOR LAB USE ONLY**

Cast Material	<input type="checkbox"/> Plaster	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Synthetic Sock	
Cast Information	<input type="checkbox"/> Duplicate Cast	<input type="checkbox"/> Shoe last	<input type="checkbox"/> Shoe to pour	<input type="checkbox"/> Caliper Plate Or Stirrup Included
	<input type="checkbox"/> Casted over AFO	<input type="checkbox"/> AFO Included	<input type="checkbox"/> Metal Brace Included	<input type="checkbox"/> Duplicate shoe(s) Included
Cast Style	<input type="checkbox"/> Wrap	<input type="checkbox"/> 2 Piece (bi-valve)	<input type="checkbox"/> Multiple Pieces	<input type="checkbox"/> Other
Observation	<input type="checkbox"/> Satisfactory	<input type="checkbox"/> Damaged	<input type="checkbox"/> Tight	<input type="checkbox"/> To Low <input type="checkbox"/> Flimsy (too thin)
Cast Marks	<input type="checkbox"/> Outside Marks	<input type="checkbox"/> Outside Verticals	<input type="checkbox"/> Outside Information	<input type="checkbox"/> Inside Marks
Position	<input type="checkbox"/> Neutral	<input type="checkbox"/> Plantar Flexed	<input type="checkbox"/> Dorsi Flexed	<input type="checkbox"/> Inverted <input type="checkbox"/> Everted
	<input type="checkbox"/> Not enough weight	<input type="checkbox"/> Flat Plantar surface	<input type="checkbox"/> Used Cast Board	<input type="checkbox"/> Severe Deformity
Other	<input type="checkbox"/> Tracings Included	<input type="checkbox"/> Prosthetic Foot Included	<input type="checkbox"/> Inserts Included	<input type="checkbox"/> Soling Material Included

OTHER INFORMATION FOR LAB USE ONLY**NEW YORK ORTHOPEDICS MANUFACTURING CORPORATION**

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