

1 PATIENT **2 PRESCRIBER** **3 ORDER INFO**

PATIENT NAME _____
ADDRESS _____
D.O.B. D / M / Y SEX M / F WEIGHT _____
FOOTWEAR TYPE _____ SHOE SIZE _____

PRESCRIBER _____
ADDRESS _____
PHONE _____
EMAIL _____

DATE D / M / Y
WO # _____
 RUSH
 POST TO PATIENT
REPEAT ORDER # _____
 DUPLICATE (no change)
 CHANGE (as marked)

4 DEVICE TYPE

- BRACE**
- RICHIE BRACE (standard brace)
 - Full Articulation
 - Permanently Fixed
 - RICHIE DYNAMIC ASSIST
 - Tamarac Hinge
 - RICHIE SOCCER (shin guard)
 - LITTLE RICHIE (1-12 years)
 - RICHIE GAUNTLET
 - 7" Most versatile height
 - 9" For maximum rigidity and control
 - RICHIE CALIFORNIA
 - 7" Most versatile height
 - 9" For maximum rigidity and control
 - RICHIE SOLID
(Cast must capture full calf circumference)

- FOOT**
- LEFT RIGHT PAIR
 - Separate cast & separate order form enclosed for orthotic of non-braced foot.

5 OPTIONAL SPECS

- TOP COVER**
- MATERIAL**
- Puff 1.5mm 3mm
Plastazote 1.5mm 3mm
- COMBINE MATERIAL WITH**
- Poron 1.5mm 3mm
- LENGTH**
- mets sulcus toes
- BOTTOM COVER SELECTION**
- MATERIAL**
- Agoflex
 - Vinyl
 - Puff 1.5mm
 - Nyplex 1.5mm
 - Microsuede
 - WSL Carbon

6 POSTING, ADDITIONS & MODS

- POSTING**
- POST TO REARFOOT**
- Calcaneal Vertical Neutral (as they sit)
- POST TO FOREFOOT**
- extrinsic intrinsic L ___ ° VR/VLG R ___ ° VR/VLG
 to sulcus to toes
- Skive L ___ mm R ___ mm
- CAST DRESSING**
- Skin Type 1 Min Moderate Max

- SHELL MODIFICATIONS**
- L/R Heel Cup Depth 15mm 25mm 35mm
 - L/R 1st Met Cut-Out w/ support post
 - L/R 1st Ray Cut-Out
 - L/R Rigid 1st Extension sulcus toes
 - L/R Medial Flange standard 50%
 - L/R Lateral Flange standard 50%
 - L/R Narrow Shell Grind
 - L/R Wide Shell Grind
 - L/R Fascial Accommodation
 - L/R Heel Spur Accommodation
 - L/R Heel Hole w/gel plug w/ poron plug
 - L/R Lateral Arch Suspender
 - L/R Medial Arch Suspender

- ADDITIONS**
- L/R Heel Lift ___ mm EVA poron loose
 - L/R Heel Pad 1.5mm 3mm
 - L/R Morton's Extension
 - L/R Reverse Morton's Ext. cushion cork poron EVA
 - L/R Functional Hallux Limitus Accommodation
 - Lesion Accommodation L [5 4 3 2 1] R [1 2 3 4 5]
 - L/R Horseshoe Spur
 - L/R Metatarsal Pad Standard 50%
 - L/R Metatarsal Bar Standard 50%
 - L/R Metatarsal Raise
 - L/R Poron Arch Pad 1.5mm 3mm
 - L/R Neuroma Pad
 - L/R Cuboid Pad
 - L/R Amputation Accommodation Partial Full

EFFECTIVE PATHOLOGY-SPECIFIC PRESCRIPTIONS

- | | |
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| <p>Posterior Tibial Tendon Dysfunction</p> <ul style="list-style-type: none"> ● Original Richie Brace ● Full articulation pivot ● 4mm/6mm Medial skive ● 35mm Heel cup ● Medial flange optional & Sweet spot optional <p>Lateral Ankle Instability</p> <ul style="list-style-type: none"> ● Original Richie Brace ● Full articulation pivot ● 2°/4° Valgus forefoot post to sulcus ● 35mm Heel cup <p>DJD of the Ankle/Subtalar Joint</p> <ul style="list-style-type: none"> ● Original Richie Brace ● Permanently fixed pivot ● Medial flange ● 35mm Heel cup | <p>Dropfoot Deformity</p> <ul style="list-style-type: none"> ● Original Richie Brace / Dynamic ● Permanently fixed or Tamarac pivot ● 15mm/25mm Heel cup <p>Note: The Richie Brace is not indicated for patients with total dorsiflexion paralysis, an unstable knee or if patient weighs over 250lbs.</p> <p>Charcot Deformity</p> <ul style="list-style-type: none"> ● Original Richie Brace ● Permanently fixed pivot ● Poron & Plastazote cover ● 15mm/25mm Heel cup <p>Note: The Richie Brace is not indicated for patients with severe "rocker bottom" deformity</p> <div style="border: 1px solid orange; padding: 5px; margin-top: 10px;"> <p>Caution: The Richie Brace is not recommended if equinus is a primary deformity or for high risk diabetic patients</p> </div> |
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7 SPECIAL INSTRUCTIONS



