

Head Office
Firefly Orthoses
Markievicz Road
Sligo
Ireland

Phone 00353 71 91 49494
Fax 00353 71 91 14299
Web www.firefly.ie

UK Postal
Firefly Orthoses
10 Main Street
Garrison
BT93 4ER

FIREFLY

custom made foot orthoses

DATE / / WO #

PLEASE PRINT	PATIENT FIRST _____ LAST _____	PRESCRIBER/LAB CUSTOMER
	ADDRESS _____	NAME _____
	POSTCODE _____	ADDRESS _____
	PHONE (H) _____ (W) _____ DOB DAY / MO / YR SEX _____	PHONE _____ FAX _____
	Footwear Type _____ Weight _____ Shoe Size _____	

RICHIE BRACE PRESCRIPTION FORM

BRACE SELECTION

- | | |
|---|--------------------------------|
| <input type="checkbox"/> ORIGINAL RICHIE™ BRACE | <input type="checkbox"/> LEFT |
| <input type="checkbox"/> LITTLE RICHIE™ (1-12 Years) | <input type="checkbox"/> RIGHT |
| <input type="checkbox"/> RICHIE SOCCER™ (Shin Gaurd) | <input type="checkbox"/> PAIR |
| <input type="checkbox"/> DYNAMIC ASSIST (Mild Drop Foot) | |
| <input type="checkbox"/> GAUNTLET (Details on separate Order Form) | |
| <input type="checkbox"/> Cast and Separate Order Form enclosed for orthotic for non-braced foot | |

ANKLE PIVOT SECTION

- FULL ARTICULATION (Original Richie Brace Standard)
- PERMANENTLY FIXED (Dynamic Assist Option)
- TAMARAC (Dynamic Assist Option)

The following are some common pathology-specific prescriptions that are known to be effective:

Posterior Tibial Tendon Dysfunction

Original Richie Brace, full articulation pivot, 4 or 6mm medial skive, 35mm heel cup. Medial Flange & Navicular sweet spot optional

Lateral Ankle instability

Original Richie Brace, full articulation pivot, 2 to 4 degree valgus forefoot post extended to sulcus, 35mm heel cup

Dropfoot Deformity

Original Richie Brace, permanently fixed or Tamarac pivot, 15 or 25mm heel cup. *Note that the Richie Brace is not indicated for patients with total dorsiflexion paralysis, an unstable knee or if patient weighs over 250lbs.*

Charcot Deformity

Original Richie Brace, permanently fixed pivot, 15 or 25mm heel cup Poron & Plastazote cover. *Note that the Richie Brace is not indicatd for Patents with severe "rocker bottom" deformity.*

DJD of the ankle or Subtalar joint

Original Richie Brace, permanently fixed pivot, 35mm heel cup, Medial flange

Caution: The Richie Brace is not recommended if equinus is a primary deformity or for high risk diabetic patients

SPECIAL INSTRUCTIONS

POSTING

- Post according to lab evaluation
- Post to calcaneal vertical
- Post to these measurements from vertical
- REARFOOT L ____° varus / valgus R ____° varus / valgus
- FOREFOOT L ____° varus / valgus R ____° varus / valgus
- Skive L ____ mm R ____ mm Skive
- Neutral (as they sit)
- FF post type Intrinsic Extrinsic Extended to Sulcus Extended to Toes

SHELL MODIFICATIONS

- Heel cup depth 15mm 25mm 35mm Standard
- 1st Met Cut-out with supporting post
- 1st Ray Cut-out
- Brace width wide narrow
- Flange medial lateral
- Fascial Accommodation
- Navicular/cuneiform sweet spot & flange (as marked)
- Medial Arch suspender Lateral Arch suspender

OPTIONAL TOP COVER SELECTION

- 1.5mm poron/1.5mm puff 3.0mm poron/1.5mm puff
- 1.5mm poron/3.0mm puff 3.0mm poron/3.0mm plastazote
- LENGTH
- Mets Sulcus Toes
- Glue Posterior only

ADDITIONS

- Heel Lift _____ mm L / R
- Heel Pad L / R
- Horseshoe spur L / R
- Metatarsal pad L / R
- Metatarsal bar L / R
- Metatarsal raise L / R
- Neuroma pad L / R
- Morton's extension L / R
- Reverse Morton's Extension (2-5) L / R
- Functional Hallux Limitus Accommodation L / R
- Cuboid pad L / R
- Lesion Accommodation sub _____ MPJ L / R



