

Foot and Ankle Orthotics Prescription

Patient Name: _____ DOB: _____

DIAGNOSIS: _____

ORTHOTICS:

LEFT RIGHT BILATERAL

_____ Full Length Custom	_____ Accommodative	_____ Medial Post
_____ ¾ Length Custom	_____ Semi-Rigid	_____ Lateral Post
_____ UCBL	_____ Rigid	_____ Deep heel
_____ Cut out/Relief under 1 st metatarsal head/sesamoids	_____ Heel lift	
_____ Carbon Fiber baseplate to shield the 1 st MP joint aka. Carbon fiber baseplate with Morton's extension	_____ Metatarsal bar	
_____ Carbon Fiber baseplate to shield the midfoot	_____ Arch Support	
_____ Other:		

BRACES:

LEFT RIGHT BILATERAL

_____ Solid AFO

_____ Articulated AFO _____ with Neutral dorsiflexion stop

_____ Arizona Brace (Custom leather ankle gauntlet)

_____ CROW (Charcot Restraint Orthotic Walker)

_____ Other:

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NOPCO

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NOPCO also has other sites located in:
Weymouth, Waltham, Burlington, Lawrence and Peabody
<http://www.nopcoclinics.com/Locations/default.asp>

Rogerson Orthopedic

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New England Orthotic and Prosthetics

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