

PATIENT INFORMATION

Patient: _____
Age: _____ Sex: _____ Height: _____ Weight: _____
Diagnosis: _____

PRACTITIONER SHIPPING INFORMATION

Facility: _____
Clinician: _____
Address: _____
City: _____
State/Province/Region: _____ Zip: _____
Country: _____
Phone (Office): _____ Phone (Cell): _____
Fax: _____ Email: _____

ORDER INFORMATION

PO#: _____

Note: Warranty covers fit only when mold is received in neutral alignment and does not require correction.

DEVICE SELECTION

- Side**
☐ Left
☐ Right
☐ Bilateral
- Color Options**
☐ Black
☐ Tan
☐ White
- ☐ **Richie Brace® Standard:** Full flexion ankle pivot
- ☐ **Richie Brace® Restricted Ankle Pivot:** Limits ankle motion, yet allows smooth contact phase of gait
• Indications: DJD ankle & STJ, dropfoot, tarsal coalition, mild Charcot, lateral ankle instability, peroneal tendinopathy
- ☐ **Richie Brace® Dynamic Assist:** Full Flexion pivot with spring hinges for dorsiflexion assist
• Patient requirements: 1: Dropfoot 2: Ankle dorsiflexion to at least 90° to leg 3: Stable knee ~ (must have all 3)
- ☐ **Little Richie Brace®:** Pediatric application for shoe size 4 and under
- ☐ **Richie Soccer Brace®:** Includes shin guard

Color Options

- ☐ Tan
☐ Chocolate

- ☐ **Richie Gauntlet®:** GAUNTLETS REQUIRE THE STS MID LEG SOCK / Has a medial arch suspender unless specified otherwise
Height: ☐ 7" (standard) ☐ 9"

MODIFICATIONS (NON-STANDARD MODIFICATIONS MAY HAVE EXTRA CHARGE)

- ☐ **Medial Arch Suspender** - Adjustable lifting strap under talo-navicular joint (lateral flange recommended-only available with restricted ankle pivot)*
- ☐ **Lateral Arch Suspender** - Adjustable lifting strap under calcaneal-cuboid joint (medial arch flange recommended-only available with restricted ankle pivot)*
- ☐ **Posterior Upright Connector** - Connects uprights to stiffen brace (recommended with arch suspenders)

Top Cover

- ☐ EVA (standard)
☐ Terryco
☐ Diabetic (Plastazote®/PORON®)
☐ 1/8" PORON® cushion on extension
☐ Arch Pad
☐ 1.5mm ☐ 3mm ☐ 6mm

Plastic Thickness

- ☐ 3mm (standard < 200 lbs)
☐ 4mm (standard > 200 lbs)
☐ 5mm

Footplate Length

- ☐ Proximal to Metatarsals (standard)
☐ to Sulcus
☐ Distal to Toes
☐ Morton's Extension
☐ Reverse Morton's Extension

Footplate Modification

- ☐ Medial Arch Flange*
☐ Lateral Flange*

Intrinsic Medial Heel Skive

For severe pronation control - extrinsic post recommended if selected

- ☐ 2mm
☐ 4mm
☐ 6mm

Extrinsic Posting

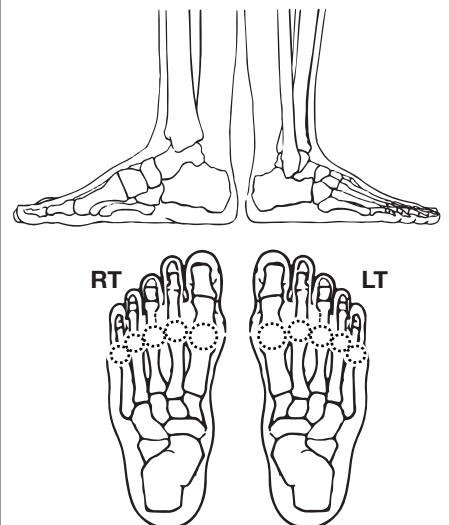
- ☐ Rearfoot Post _____° Varus
_____° Valgus
☐ Heel Lift (Requires rearfoot post) _____ (<12 mm)
☐ Crepe Plantar Arch Fill (extrinsic)
☐ Forefoot Stabilization _____° Varus _____° Valgus
☐ Sulcus Wedge _____° Varus _____° Valgus

Alignment

- ☐ Align coronal heel perpendicular to floor
☐ Accommodate 10° external rotation in ankle joint for tibial torsion

BUILDUP LOCATION(S):

(mark on illustration and on cast)



Arch Fill

- ☐ Maximum Arch Fill (standard)
☐ Minimum Arch Fill (for maximum arch support)

Heel Cup Depth

- ☐ 10mm
☐ 14mm
☐ 18mm
☐ 35mm (standard)

SPECIAL INSTRUCTIONS: