

- |   |                       |                |
|---|-----------------------|----------------|
| <input type="checkbox"/> VANCOUVER 1615 West 4th Avenue             | <b>P 604.736.6537</b> | F 604.736.6599 |
| <input type="checkbox"/> VANCOUVER 3888 Oak Street                  | <b>P 604.734.0224</b> | F 604.739.9522 |
| <input type="checkbox"/> PORT COQUITLAM #114 – 3200 Westwood Street | <b>P 604.942.4938</b> | F 604.942.5318 |
| <input type="checkbox"/> BURNABY #9 – 5901 Broadway                 | <b>P 604.299.0207</b> | F 604.299.0297 |
| <input type="checkbox"/> LANGLEY 1 – 20349 88th Ave, Walnut Grove   | <b>P 604.882.6510</b> | F 604.882.6509 |
| <input type="checkbox"/> SURREY 8630 – 120th Street                 | <b>P 604.736.6537</b> | F 604.736.6559 |

## PLEASE CALL FOR APPOINTMENT

DATE \_\_\_\_\_ PATIENT NAME \_\_\_\_\_

HEALTH CARE PROFESSIONAL  
(PRINT OR STAMP)

SIGNATURE \_\_\_\_\_

### DIAGNOSIS / SYMPTOMS (PLEASE SPECIFY)

- DX:**  PLANTAR FASCIITIS    METATARSALGIA    PATELLA FEMORAL PAIN  
 LEG LENGTH DISCREPANCY    ACHILLES TENDINOPATHY  
 DIABETES    ARTHRITIS    OTHER

**RX:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### APPOINTMENT REQUIRED

#### CUSTOM FOOT ORTHOSES

- NEUTRAL CAST METHOD
  - AS REQUIRED
  - SEMI RIGID
  - FLEXIBLE
  - ACCOMMODATIVE
- MODIFIED O.T.C. INSOLE



#### ADDITIONS TO ORTHOSES

- METATARSAL PADS
- SPUR ACCOMMODATION
- HEEL LIFT(S) \_\_\_\_\_ cm

#### CUSTOM ANKLE/ FOOT ORTHOSES (AFO)

- RICHIE BRACE

#### DIABETIC PRODUCTS

- WALKER BOOT
- HEALING SANDAL

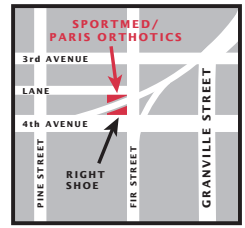
ORTHOTIC USAGE \_\_\_\_\_

#### ORTHOPEDIC FOOTWEAR/MODIFICATIONS

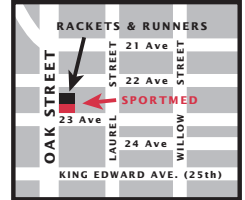
- |   |  |
|---|--|
| <input type="checkbox"/> CUSTOM MADE FOOTWEAR       | <input type="checkbox"/> LACE TO VELCRO CONVERSION L / R |
| <input type="checkbox"/> LEG SHORTAGE ACCOMMODATION | <input type="checkbox"/> ROCKER BOTTOM CONVERSION L / R  |
| MEASURED SHORTAGE _____ CM L / R                    | <input type="checkbox"/> SOLE STIFFENER L / R            |
| ACCOMMODATION _____ CM L / R                        | <input type="checkbox"/> AS REQUIRED                     |

#### NON-CUSTOM ORTHOSES (NO APPOINTMENT REQUIRED)

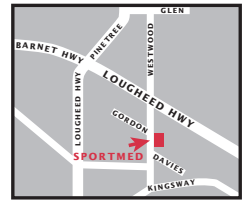
- |  |   |
|--|---|
| <input type="checkbox"/> O.T.C. ARCH SUPPORTS      | <input type="checkbox"/> O.T.C. HEEL SPUR PADS        |
| <input type="checkbox"/> O.T.C. METATARSAL SUPPORT | <input type="checkbox"/> O.T.C. HEEL LIFT(S) _____ cm |
| <input type="checkbox"/> O.T.C. HEEL PADS/CUPS     | <input type="checkbox"/> O.T.C. DIABETIC INSOLES      |



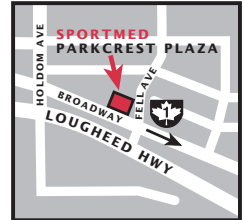
VANCOUVER - 4th Ave.



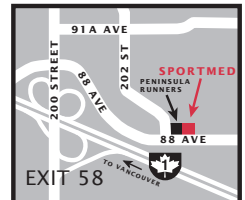
VANCOUVER - Oak



PORT COQUITLAM - Westwood



BURNABY - Broadway



LANGLEY - Walnut Grove



SURREY (Satellite Office)  
*Pedorthic Services Only*