

133 Moneymore Road
Cookstown Co Tyrone
BT80 9UU

R IRELAND & EUROPE CALL:
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DATE: _____

PRACTITIONER: _____ PATIENT NAME: * _____

CLINIC NAME: _____ PATIENT SHOE SIZE: * _____

ADDRESS: _____ PATIENT WEIGHT: * _____

CHIEF COMPLAINT: _____

EMAIL: _____

TELEPHONE: _____

WARRANTY REPAIR NON WARRANTY

REPAIR/ADJUSTMENTS REQUIRED: (PLEASE PRINT CLEARLY)

THE SPACE BELOW IS FOR REPAIR LAB USE ONLY

ORTHOTIC BRAND	TOPCOVER	THICKNESS	LENGTH	COLOUR	SIZING
FEET 24 7	VINYL	1MM	3/4	BLACK	TRACING
TOG	LUNAIRMED	1.5MM	SULCUS	BLUE	INSOLE
LANGER	LUNASOFT	2MM	FULL LENGTH	GREEN	FOOTWEAR
PEGASUS	SMOOTH LEA.	3MM		NAVY	
PPL	ETC		VINYL SANDWICH	MARBLE	SOFT MEDIAL FLANGE
OTHER	STARSTUEDE	EXTRA PADDING	YES NO	WHITE	LEFT
	NEOPRENE	YES		RED	RIGHT
	SUEDE LEA	NO	1ST MET CUTOUT	GREY	
	OTHER		LEFT RIGHT	BEIGE	
MET PADS	FULL HEEL CUSH.	SCAPH PAD	NEUROMA PADS	FOREFOOT PAD	REARFOOT POST
LEFT	LEFT	LEFT	LEFT 1/2 RIGHT 1/2	LEFT	EXTRIN. LEFT
RIGHT	RIGHT	RIGHT	2/3 2/3	RIGHT	RIGHT
NORMAL		NORMAL	3/4 3/4	SULCUS	INTRIN. LEFT
LARGE	SPUR PAD	LOW	4/5 4/5	F/L	RIGHT
LO PROFILE	LEFT			1.5MM	
HIGH PROFILE	RIGHT	MORTONS EXT.		3MM	
PLACEMENT	ARCH REIN.	LEFT	SUB MET ACCM.	FOREFOOT POSTING EXTRIN.	SHOCK ABSORBER (UNDER HEEL)
10MM DISTAL	LEFT	RIGHT	LEFT 1 RIGHT 1	LEFT 0	LEFT
20MM	RIGHT	SOFT	2 2	RIGHT 0	RIGHT
MM		HARD	3 3	3/4	RED
TO DRS MARK			4 4	SULCUS	MARBLE
MET BAR	POST	REV MORTON	5 5	TOPY SOLE	
LEFT	☐ REGISTERED MAIL	LEFT		LEFT	
RIGHT	☐ NORMAL POST	RIGHT	HEEL RAISE	RIGHT	
	☐ SIGNED DELIVERY	SOFT	LEFT MM		
		HARD	RIGHT MM		
	CONSULT				
DATE RECEIVED: _____	☐ CALL	INFO INCOMPLETE			
LAB RECEIVED: _____	☐ EMAILED	☐ CALL	LAB REPAIR COMPLETE: _____		
		☐ EMAILED	DATE SHIPPED: _____		