



E8-1155 Appleby Line, Burlington, ON L7L 5H9  
 Tel: (905) 335-7029 Fax: (905) 335-4154  
 Email: info@premierorthoticslab.com  
 www.premierorthoticslab.com

OFFICE USE ONLY

**Rush Order**  
**4 to 5 Days (\$25)**

**CLINIC INFORMATION**

Clinic Name: \_\_\_\_\_

Practitioner Name: \_\_\_\_\_

**PATIENT INFORMATION**

Patient Name: \_\_\_\_\_ Gender: \_\_\_\_\_  
 Age: \_\_\_\_\_ Weight: \_\_\_\_\_ lbs Shoe Size: \_\_\_\_\_ M F

**STEP 1 ORTHOTIC TYPE**

**POL EVERYDAY**

Standard flex 100% memory shell. Full length ETC top for sweat control. Perfect for runners, workboots and everyday walking shoes

<b>What TOP do you want?</b>	Thin Top (1/16")	Thick Top (1/8")
<b>What PROFILE do you want?</b>	Full	Sulcus 3/4

**POL DRESS**

Dress flex (2mm) shell with 1/16 dress hyde top

<b>What PROFILE do you want?</b>	Regular	Narrow
	Full	Sulcus 3/4

**POL ACCOMMODATIVE**

3mm EVA Shell with soft arch fill, full length diabetic topcover

**POL SPORTS/RUN**

Standard flex shell with full length 1/16 ETC top and a red cushion layer for extra shock absorption, full length

**POL BUILT IN BIRKENSTOCK TYPE SANDAL**

Custom made built in birk type sandal. Please be sure of the size as these are non- exchangeable/Not returnable

Please indicate make and model in Step 3 section, or provide the sandal

**F3 CUSHION**

Lightest, greenest and most cushiony orthotic. 3D printed, 1/8 extra cushion top with memory foam. Full length top only, suitable for shoes with good removeable liners

\*If no selection is made, default is full length POL Everyday with 1/8 ETC +2mm shell

**TOP COVER OPTIONS**

Top Thickness <i>If not selected or noted above</i>	Microcell Puff	1/16" Dress (Hyde with cushion)
1/16"	Black	1/8" F3 Top (Hyde with cushion)
1/8"	Black Swirl	Diabetic Top 3/16" (Add \$10)
	Pink Swirl	1/4" P Cell
	Blue Swirl	Spenco
		Cushioned Cotton (etc)

**SPECIALTY ORTHOTICS - optional**



**GAIT PLATE**

Induce in toeing  
 Induce out toeing

**UCBL**

- Deep heel
- Flanges
- Puff top

**TURBO SPORT**

- Skate
- Soccer
- Golf

2mm Shell Default

**ADDITIONAL INSTRUCTIONS**



**OFFICE USE ONLY**

EA \_\_\_\_\_ HW \_\_\_\_\_  
 AL \_\_\_\_\_ FT \_\_\_\_\_  
 AH \_\_\_\_\_

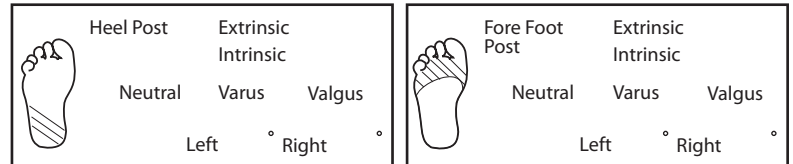
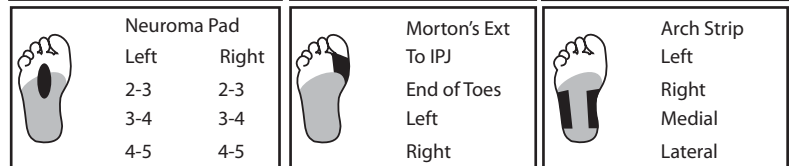
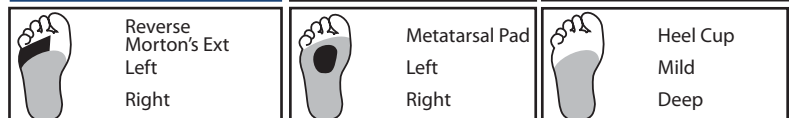
**Shell Thickness Guide:**

**1mm**  
 client weight  
 under 120lbs

**2mm**  
 client weight  
 under 190lbs

**3mm**  
 client weight  
 over 190lbs

**STEP 2 MODIFICATIONS**



**STEP 3 SHOE INFORMATION**

**MUST PROVIDE SHOE INFORMATION**

WHAT SHOES WILL THESE ORTHOTICS BE GOING INTO?

Make: \_\_\_\_\_

**1** Model: \_\_\_\_\_  
 Size/Width: \_\_\_\_\_ With Orthotic

Make: \_\_\_\_\_

**2** Model: \_\_\_\_\_  
 Size/Width: \_\_\_\_\_ With Orthotic

**Total Number of Orthotics Ordered:** \_\_\_\_\_ **Shoes Ordered:** \_\_\_\_\_