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**RUSH ORDER** (Specify Date: \_\_\_\_\_ Additional Charge)

Customer Account Name: \_\_\_\_\_ KLM Klub Number: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_

- Please call for RX
- Return Casts
- Computerized Cast Storage 10 Years
- SYSTEM\_RX
- HAND CORRECTED
- Value System\_Rx
- California Preform
- SEND MORE:**
- RX Forms
- Brown Boxes
- FedEx Boxes
- Preprinted Airbills
- KLM Bags
- Other

Patient: \_\_\_\_\_  
 Age: \_\_\_\_ Sex: \_\_\_\_ Ht: \_\_\_\_\_ Wt: \_\_\_\_\_ Shoe Type/Size: \_\_\_\_\_

	FUNCTIONAL	SPORTS	FASHION	GERIATRIC/
<b>Functional Orthotics</b>	<input type="checkbox"/> Uniflex 1	<input type="checkbox"/> All Purpose	<input type="checkbox"/> Fashion Ultrathin	<input type="checkbox"/> Geriatric
	<input type="checkbox"/> Uniflex 2	<input type="checkbox"/> Running		
	<input type="checkbox"/> Ultrathin	<input type="checkbox"/> Aerobic	<input type="checkbox"/> Fashion Flexible	<input type="checkbox"/> Softtouch
	<input type="checkbox"/> TL Silver	<input type="checkbox"/> Basketball		
<b>Neutral Casts</b>	<b>PEDIATRIC</b>			
	<input type="checkbox"/> Robert-Whitman	<input type="checkbox"/> Supersport	<input type="checkbox"/> Unislender	<input type="checkbox"/> Leather
	<input type="checkbox"/> Gait Plate	<input type="checkbox"/> Ultrathin	<input type="checkbox"/> Plastizote	
	<input type="checkbox"/> UCBL	<input type="checkbox"/> Snow Ski (Poly)	<input type="checkbox"/> Ultrathin	<input type="checkbox"/> Crepe
	<input type="checkbox"/> UCBL/Gait Plate	<input type="checkbox"/> Snow Ski (Graphite)	<input type="checkbox"/> In-Between	
	<input type="checkbox"/> Golf			

	PRODUCT DESCRIPTION	
<b>Richie Brace®</b> please mark medial and lateral malleoli on negative cast	<input type="checkbox"/> Standard	full flexion ankle pivot
	<input type="checkbox"/> Restricted Ankle Pivot	limits ankle motion
	<input type="checkbox"/> Dynamic Assist	Tamarack hinges provide up to 15° dorsiflexion
	<input type="checkbox"/> Little Richie	pediatric application for shoe size 4 and smaller
	<input type="checkbox"/> Richie Soccer	integrated shin guard
	<input type="checkbox"/> California AFO	rigid AFO, 9" tall, mid leg cast required
	<input type="checkbox"/> Richie Gauntlet	rigid AFO, 7" or 9" tall, tan or brown, mid leg cast
	<input type="checkbox"/> Medial Arch Suspender	adjustable lifting strap under talo-navicular joint
	<input type="checkbox"/> Lateral Arch Suspender	adjustable lifting strap under calcaneal-cuboid joint
	<input type="checkbox"/> Solid AFO	traditional full leg posterior shell & orthotic foot plate

	SHELL MATERIALS	COVER MATERIALS	TOPCOVERS	SHELL WIDTH
<b>Diabetic Orthotics</b>	<input type="checkbox"/> Crepe (Firm)	A. Pink Plastizote 1/8"	<b>Indicate A,B,C,D,E,F,G</b>	<input type="checkbox"/> Medial & Lateral Flanges (Wide)
	<input type="checkbox"/> Black Plastizote (Firm)	B. White Plastizote 1/8"		
<b>Neutral or Weight Bearing Casts</b>	<input type="checkbox"/> Multicork (Semifirm)	C. Enduro 1/16"	Top Layer _____	<input type="checkbox"/> Standard (Normal)
	<input type="checkbox"/> Micropuff (Soft)	D. Enduro 1/8"	Middle Layer _____	
	<input type="checkbox"/> White Plastizote (Soft)	E. Micropuff 1/16"	Bottom Layer _____	
		F. Micropuff 1/8"	No Cover _____	
		G. Other _____		

<b>Diabetic Shoe Program</b>	<input type="checkbox"/> Komfort Diabetic Orthotics	<input type="checkbox"/> 3 pair, A5513 compliant, dual laminate
		<input type="checkbox"/> 3 pair, A5513 compliant, dual lam w/multicork arch fill
	<input type="checkbox"/> Propet Shoes	<input type="checkbox"/> 3 pair, A5513 compliant, dual lam w/micropuff arch fill
	style: _____ size: _____	

<b>Preforms</b>	<input type="checkbox"/> System Rx Shells	(color: white, blue, black, brown, flesh tone, or clear)
	<input type="checkbox"/> Clouds	(stiffness: supersoft, soft, semisoft)
	<input type="checkbox"/> CP-3300 Shell	} (stiffness: mild, medium, max)
	<input type="checkbox"/> CP-3300 Insole	
	<input type="checkbox"/> CP-3300 Plus	
	<input type="checkbox"/> CP-Cobra	
	<input type="checkbox"/> Superstep	
	<input type="checkbox"/> Superstep Gold	} (color: black or brown)
	<input type="checkbox"/> Essence Insoles	
	<input type="checkbox"/> Kiddythotics	
<input type="checkbox"/> Juniors		
<input type="checkbox"/> Richie OTC		
<input type="checkbox"/> Richie Dynamic Assist OTC	Size(s): _____	

HEELCUP: \_\_\_\_\_ mm

**ORTHOTIC WIDTH**  
 Narrow  Wide

**ORTHOTIC STRENGTH**  
 More Rigid  More Flexible

**COVERS**  
 Length:  mets  sulcus  toes

MATERIALS	cover	extension
Simulated Leather	<input type="checkbox"/>	<input type="checkbox"/>
Enduro 1/16" 1/8"	<input type="checkbox"/>	<input type="checkbox"/>
Super All Step 1/16" 1/8"	<input type="checkbox"/>	<input type="checkbox"/>
Terryco 1/16" 1/8"	<input type="checkbox"/>	<input type="checkbox"/>
Leather	<input type="checkbox"/>	<input type="checkbox"/>
Suede	<input type="checkbox"/>	<input type="checkbox"/>
Pink Plastizote 1/8"	<input type="checkbox"/>	<input type="checkbox"/>
White Plastizote 1/16" 1/8"	<input type="checkbox"/>	<input type="checkbox"/>
EVA 1/8"	<input type="checkbox"/>	<input type="checkbox"/>
Micropuff 1/16" 1/8"	<input type="checkbox"/>	<input type="checkbox"/>
Ortholite 1/8"	<input type="checkbox"/>	<input type="checkbox"/>

**INTRINSIC POSTING**  
 Left \_\_\_\_\_ Right \_\_\_\_\_  
 Forefoot \_\_\_\_\_ Valgus \_\_\_\_\_

**EXTRINSIC POSTING**  
 Hard  Soft  None  
 Left \_\_\_\_\_ Right \_\_\_\_\_  
 Forefoot \_\_\_\_\_ Valgus \_\_\_\_\_  
 Rearfoot \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 inv/motion inv/motion

SPECIAL ADDITIONS	Left	Right
Heel Lift (Specify Ht)	_____	_____
Metatarsal Bar	_____	_____
Metatarsal Pad	_____	_____
Crepe Arch Fill	_____	_____
Soft Spot	_____	_____
Heelspur	_____	_____
Donut Pad	_____	_____
Horseshoe	_____	_____
Intrinsic	_____	_____
Toe Crest	_____	_____
Morten's Extension	_____	_____
Fascial Groove	_____	_____
Medial Flange	_____	_____
Lateral Flange	_____	_____
Lateral Clip	_____	_____
Medial Skive	_____	_____

**FOREFOOT ACCOMMODATIONS**

	Right	Left
<input type="checkbox"/> 1	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 2	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 3	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 4	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 5	<input type="checkbox"/>	<input type="checkbox"/>

**Plantar View**

