

# Apis Custom Orthotics Order Form

Customer ID \_\_\_\_\_

Order By \_\_\_\_\_

Order Date \_\_\_\_\_

PO# \_\_\_\_\_

Patient Name \_\_\_\_\_

Gender F\_\_ M\_\_

Weight \_\_\_\_\_

Shoe style \_\_\_\_\_

Shoe Size \_\_\_\_\_

Please select the custom orthotics styles from below and use the space provided for any special instructions or modifications.



\_\_\_ Accommodative

Plastazote top cover with Cork or EVA base  
Diabetic; R.A; At-risk  
Tri-laminated



\_\_\_ Emey Flex Full length \_\_\_ 3/4 \_\_\_

Co-polymer with top cover  
Comfort & support



\_\_\_ Functional Full length \_\_\_ 3/4 \_\_\_

With or w/out EVA posting  
Polypro / Firm Control  
w/out top cover



\_\_\_ Emey Sport Full length \_\_\_ 3/4 \_\_\_

Support with calcaneal heel relief  
Spenco top with reinforced Polypro bottom  
Dress; Runners

(Posting available on all functionals)

Special Instructions:

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