

Please! Fill this form completely

**TRU-MOLD SHOES, INC.**

42 Breckenridge Street • Buffalo, NY 14213  
 (716) 881-4484 • Fax (716) 881-0406  
 info@trumold.com

**SHIPPING:**

Two Day  Ground  Overnight

**HANGER CLINIC**

Date \_\_\_\_\_ Clinic PCC # \_\_\_\_\_  
 P.O.# \_\_\_\_\_ Phone (MANDATORY) \_\_\_\_\_  
 ORDERED BY \_\_\_\_\_  
 Fax # \_\_\_\_\_ HD User E mail (MANDATORY) \_\_\_\_\_

**•SHIP TO•**

Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**•BILL TO•**

Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Patient Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Sex \_\_\_\_\_ Weight \_\_\_\_\_ Age \_\_\_\_\_  
 Occupation \_\_\_\_\_

Had Tru-Mold Shoes before (Approx. Date) \_\_\_\_\_ Invoice CAD/CAM Number \_\_\_\_\_  
 Repeat CAD/CAM order as before; no changes \_\_\_\_\_  
 Repeat CAD/CAM order but with the following changes shown on order form \_\_\_\_\_

**Rx. DIAGNOSIS**

Diabetic \_\_\_\_\_ Post Polio \_\_\_\_\_ Amputee (where): \_\_\_\_\_  
 Club Foot \_\_\_\_\_ Charcot \_\_\_\_\_  
 Casted over AFO: LF \_\_\_\_\_ RF \_\_\_\_\_ Arthritic \_\_\_\_\_  
 Casted Prosthetic Foot: LF \_\_\_\_\_ RF \_\_\_\_\_  
 Other \_\_\_\_\_

**CAST MODIFICATION**

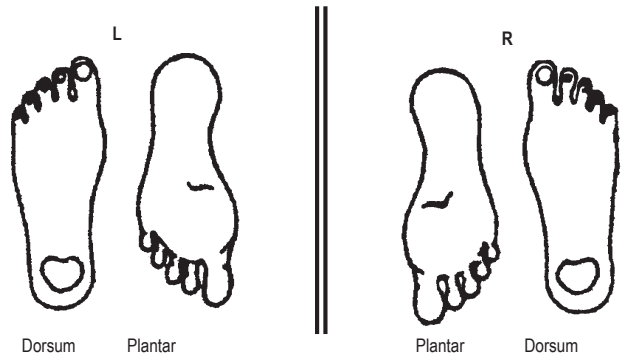
Reg. Elongation (5/8") \_\_\_\_\_ 1/8" Extra (5/8" + 1/8") \_\_\_\_\_  
 High Toe Box \_\_\_\_\_ Extra High Toe Box \_\_\_\_\_  
 Other \_\_\_\_\_

**STYLE**

Barcelona \_\_\_\_\_ Paris \_\_\_\_\_ Capri \_\_\_\_\_ Liberty \_\_\_\_\_  
 Flyer 5" \_\_\_\_\_ Flyer 4" \_\_\_\_\_ Other: \_\_\_\_\_  
 Color \_\_\_\_\_  
 Regular Opening \_\_\_\_\_ Wide Vent \_\_\_\_\_  
 Semi-Surgical \_\_\_\_\_ Scalloped Heel \_\_\_\_\_  
 Surgical \_\_\_\_\_  
 Other \_\_\_\_\_

**INDICATE ANY LESIONS**

(I.E. AMPUTATIONS OR ULCERATIONS)



**PLASTAZOTE® MOLDED INSERT**

One pair  Two pairs  Three pairs

1/4" Pink + 1/4" White* _____	1/4" Poron bottom _____
1/2" White (firm) _____	Thermocork _____
1/4" White (firm) _____	Spenco® Cover _____
1/2" Pink (soft) _____	Leather Cover _____
1/4" Pink (soft) _____	Met Pads _____
1/8" Poron middle _____	Other _____
1/8" Poron bottom _____	_____

**Recess insert and base of shoe**

## CONSTRUCTION

Regular \_\_\_\_\_ Reinforce Counters \_\_\_\_\_  
Heavy Duty \_\_\_\_\_

## SHORT LIMB RAISE

	L	R
Heel	_____	_____
Ball	_____	_____
Toe	_____	_____

Raise inside shoe covered with leather \_\_\_\_\_  
Raise outside shoe with soling \_\_\_\_\_  
Other \_\_\_\_\_

## BASE MODIFICATIONS

	L	R
Lateral Flare	_____	_____
Medial Flare	_____	_____
Lateral Wedge	_____	_____
Medial Wedge	_____	_____
Wide Base	_____	_____
Reinforced for Brace	_____	_____
Other	_____	

## LINING

Regular (full leather) \_\_\_\_\_ Flannel \_\_\_\_\_ Fleece \_\_\_\_\_  
Spenco® Heel \_\_\_\_\_ Vamp \_\_\_\_\_  
Plastazote® Heel \_\_\_\_\_ Vamp \_\_\_\_\_  
Tan Athletic \_\_\_\_\_ Black Athletic \_\_\_\_\_  
Other \_\_\_\_\_

## EXTERNAL ADDITIONS

	L	R
Amputation filler to match	_____	_____
No amputation filler	_____	_____
Steel shank 3/4 length	_____	_____
Steel shank full length	_____	_____
Attach Tru-Mold's caliper plate	_____	_____
Attach customer's caliper plate/stirrup	_____	_____
Thermo Plastic toe cap	_____	_____
Other	_____	

## SOLING

Standard (15 Iron) \_\_\_\_\_ Mini Rib \_\_\_\_\_ Silvano \_\_\_\_\_  
Heavy Duty Work \_\_\_\_\_ Infinity \_\_\_\_\_ Lug \_\_\_\_\_  
Rockersole Forefoot L \_\_\_\_\_ R \_\_\_\_\_ Rockersole Heel to Toe L \_\_\_\_\_ R \_\_\_\_\_  
Leave outside wedge and final outsole off L \_\_\_\_\_ R \_\_\_\_\_  
Leave final outsole off L \_\_\_\_\_ R \_\_\_\_\_  
Other \_\_\_\_\_

## UPPERS

Lace \_\_\_\_\_ Speed-lace (top 3 eyelets) \_\_\_\_\_  
Velcro Strap \_\_\_\_\_ Ortho-lace (combination lace/velcro) \_\_\_\_\_  
Velcro D-Ring \_\_\_\_\_ Medial T-strap L \_\_\_\_\_ R \_\_\_\_\_  
Perforate Arch \_\_\_\_\_ Lateral T-strap L \_\_\_\_\_ R \_\_\_\_\_  
Perforate Top \_\_\_\_\_ Attach T-strap yes \_\_\_\_\_ no \_\_\_\_\_  
Other \_\_\_\_\_

## Special "Foot Notes"

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**"MOLDED SHOES ARE ONLY AS GOOD AS THE CASTS RECEIVED"**

# WEIGHT-BEARING TRACINGS

(Hold pencil vertically when tracing)

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Left Heel

Right Heel