

Account Name: \_\_\_\_\_ Patient Name: \_\_\_\_\_  
Doctor: \_\_\_\_\_ Weight: \_\_\_\_\_ Shoe Size: \_\_\_\_\_ Age: \_\_\_\_\_  
Address: \_\_\_\_\_ Gender: \_\_\_\_\_  
\_\_\_\_\_  
Diagnosis: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Casted By: \_\_\_\_\_ Date: \_\_\_\_\_

**Type:** ☐ Right ☐ Left ☐ Bilateral  
**Color:** ☐ Black ☐ Charcoal ☐ Tan ☐ Pearl Silver

**Ankle Corrections:**

☐ Correct Anterior/Posterior to 90° ☐ As Casted  
☐ Correct Medial/Lateral to 90° ☐ As Casted

**Forefoot Corrections:**

☐ Correct to 90° ☐ As Casted

**Footplate Length:**

☐ Proximal to Met Heads ☐ Sulcus ☐ Full Foot

**Heel:**

☐ Standard (Solid Heel) ☐ Small Cutout

**Special Cast/Brace Modification Instructions:**

\_\_\_\_\_  
\_\_\_\_\_

**Casting Material (STS Mid-Leg Casting Sock. Additional charge of \$13.00 each.  
Please specify size and quantity):**

☐ None  
☐ \_\_\_\_\_ Small ☐ \_\_\_\_\_ Medium ☐ \_\_\_\_\_ Large ☐ \_\_\_\_\_ X-Large



- Featherweight
- Moisture Wicking Dri-Lex Material
- Better Fit in Shoes
- 100% U.S. Made Materials
- Handmade In The U.S.A.

**Casting Reminders:**

- Cast should be taken with the ankle at 90° neutral and the foot in subtalar neutral.
- Patient name and Doctor name must be written on the cast.
- Marks should be made on the cast on any areas that need special attention and noted on this order form on how you would like them to be accommodated.

**If order form is not completed, order will be made to these standard specifications:**

- Color – Black
- Ankle Corrections – Correct Both to 90°
- Forefoot Corrections – Correct to 90°
- Footplate Length – Proximal to Met Heads
- Heel – Standard
- Casting Material – None

**Additional Charges:**

Corrections or changes to the brace after fabrication may incur additional charges. To avoid these charges please review your cast and order form for accuracy before shipping.

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