

The TC Flex Orthometry Forms are designed so that each design has its own form which includes line drawings of default trim lines, straps, and components specific to each orthosis. The reverse side of the form has space and line drawings to indicate any changes or deviations you require. In addition, this area contains information about the available padding, strap colors, and transfer patterns. Certain defaults are standard for each design, and Orthomerica technicians will fabricate the orthosis based on the default design for the orthosis if the default sections are incomplete. Other sections (like the cast correction position of function) are specific to each patient and must be completed for the orthosis to be processed. If the required sections are incomplete, an Orthomerica customer service representative will contact you for the necessary information. Despite our best efforts, there will most likely be a delay in the standard 4-day turn around time when key information is missing on the Orthometry Form.

Type of orthosis and part number

The name of each orthosis is printed on the top left corner of the orthometry form along with the Orthomerica part number. A drawing is also placed at the top of the form to assist with choosing the correct Orthometry Form.


Patient Information

Orthomerica is a HIPPA compliant manufacturer. Feel free to write the patient's name or specific identification number or code in the Patient Name area of the form. Complete the entire section and indicate whether the orthosis is for the right or left side or bilateral.

Facility Information

Complete the practitioner and facility information including name, customer number, address, phone, or fax. Add a PO# if required by your facility.

Defaults

The symbol  indicates the default in each section. The default will be used if information is not provided.

Line Drawing

The default trim lines are shown in the line drawing on each form. Shaded areas indicate foam padding. Default and optional straps are shown for each design.

Special instructions

Please note any additional information that will assist Orthomerica in making the best possible orthosis for your patient. This may include but is not limited to restrictions in range of motion, special posting, trim line requests, or other details pertinent to the fabrication of the orthosis.

Cast correction:

This section must be completed to prevent delay of order.

This section is the most important part of the Orthometry form. With input from other health care providers, the practitioner should perform a thorough evaluation of the patient's range of motion, muscle strength and weak-

nesses. The practitioner should consider the patient's developmental as well as occupational activities before determining the optimal alignment for function. **If the patient has the range of motion available**, it is usually best to choose a vertical hind foot with neutral forefoot and ankle alignment at 90 degrees or a few degrees of dorsiflexion. **Hind foot alignment should never be compromised because it is the key to controlling the midfoot and forefoot position.**

If the patient lacks forefoot range of motion, consider posting the forefoot in supination or pronation to maintain a vertical calcaneus with the ankle as close to 90 degrees as possible. With the hindfoot vertical, measure and record the height from the 1st metatarsal to the floor to post the forefoot in supination. With the hindfoot vertical, measure and record the height from the 5th metatarsal to the floor to post the forefoot in pronation. Extrinsic posting is used to post the forefoot to a vertical hindfoot.

If the patient lacks dorsiflexion range, the **Transformer** is often a good option. The ankle motion can be adjusted for both dorsiflexion and plantarflexion and the orthotist can use heel wedges to bring the ground up to the foot to accommodate the limited range. Over time, the ankle joint can be adjusted to accommodate gains in range of motion. Patients may also benefit from the **Dorsi-Free Stretch**, an orthosis usually worn at night to increase range of motion.

Patients do not tolerate alignment outside their range of motion capabilities. Botox injections, serial casting, therapeutic intervention and/or surgery may be used prior to orthotic management to increase range of motion and promote more effective alignment. If these interventions are not available or appropriate, the orthosis should be set in the best possible alignment as this will still promote improved weightbearing and biomechanics for functional activities.

Plantar Modification

Total contact default plantar modifications include a well-defined calcaneus, peroneal arch, medial longitudinal arch, metatarsal arch and toe rise pad. If these plantar modifications are not desired, check "No" in this category. If a casting plate was used, please indicate the size and width of the casting plate. A removable toe rise pad is the default for this section and is included with every orthosis.


ORTHOMERICA®

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TEL: 877.737.8444 | FAX: 877.737.8445
ORTHOMERICA.COM | TCFLEX.COM

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TC Flex Orthometry Forms (continued)

Dorsal Trim lines

The length of the dorsal trim line can help to control coronal plane forefoot deviations. Mark "Extend Medial" if you wish to control forefoot adduction. Mark "Extend Lateral" if you wish to control forefoot abduction. Indicate "Extend Both" if you wish to control an extremely spastic foot and/or want to stiffen the anterior portion of the orthosis. "No Dorsal Wrap" is an option on select designs for those wanting more traditional trim lines. The dorsal trim line default is plastic ending just proximal to the 1st and 5th metatarsal head. This provides midline alignment and makes it easier to fit shoes over the orthosis.

Plastic

The default plastic for most TCflex designs is 3/32" copolymer although TPE is used for the Full Blocker Resting and Dorsi-Free Stretch orthoses. Indicate your choice of transfer design (if any) in this section. Transfer paper changes periodically, and the most current designs are posted on the Orthomerica web site at www.orthomerica.com and the TC Flex website at www.tcflex.com.

Posterior Height

The posterior orthosis height is as high as the foot is long plus 10%. Always cast the patient at least 2 cm proximal to the desired trim line to ensure that the orthosis will be at the desired height. Indicate any deviation from the default height on the Orthometry Form. (The Reactor Group does not have a default height and will be fabricated to the specific measurement indicated by the practitioner or to the top of the cast.)

Foot Length

The standard foot length is the distance from the most posterior aspect of the plantar surface of the calcaneus to the distal end of the impression plus 1/4". The practitioner may also record the exact finished foot length in the space marked "Other".

Joints

The default joint on the Articulating Wrap, Articulating Combo, Dorsi-Blocker Reactor and Transformer is the Tamarack Straight Joint. These orthoses are also available with a Tamarack Dorsi Joint. The Articulating Wrap and Articulating Combo have a plastic plantarflexion stop while the Dorsi Blocker Reactor has free plantarflexion with anterior stop. The Transformer uses a 655 Motion Control Limiter (MCL) as a plantarflexion stop that is adjustable for both dorsiflexion and plantarflexion.

The default joint for the Dorsi-Free Overlap and Dorsi-Free Stretch orthoses is a single axis hinge. The Dorsi-Free Overlap usually comes with a plastic plantarflexion stop, but can be ordered without the stop for patients needing significant medial-lateral control without sagittal plane weakness. The Dorsi Free Stretch orthosis does not come with a plantar stop option.

Padding

The shaded areas in the line drawings indicate the default padding. Practitioners may also request an extra navicular pad by checking the box in this section. Padding color choices include white, red, blue, light blue, yellow, purple, pink, and black.

Straps

The default straps are indicated on each line drawing. Additional strap options are available by checking the desired box in this section. Strap colors include white, red, blue, light blue, yellow, purple, pink, black, and any transfer pattern selected from the guide located on the Orthomerica site at www.orthomerica.com and the TC Flex website at www.tcflex.com.

Extrinsic Posting

The default posting is a vertical heel post. If forefoot posting is needed, it will be fabricated using an extrinsic post aligned to a vertical calcaneus. Other options include a mid-foot/heel post, no extrinsic posting, extrinsic posting on the entire bottom of the orthosis, and non-skid bottom.

Back of the Orthometry Form

The back of the Orthometry Form provides information about color choices for padding and straps. It also provides defaults for foot length and the posterior height of the orthosis.

Special Instructions—Line Drawings

Please use this area to draw or indicate any areas of the orthosis requiring special attention from Orthomerica staff. This may include but is not limited to making notations about adding extra relief over bony prominences, drawing in areas of deformity, and requesting specific changes in the total contact modifications.

Note: If there is a need for major trim line, design, or material changes, we recommend that you consider ordering the orthosis as a custom extremity or TC² design. This will ensure that you have the plastic options and components to meet the needs of your patients.