

5 STEP

Pathology Prescription Guide



TalarMade Custom
Bespoke range of foot orthotics

POWERED BY
dola
Digital Orthotics Laboratories Australia

MODULAR ORTHOTICKS™ PRO

HOW TO ORDER

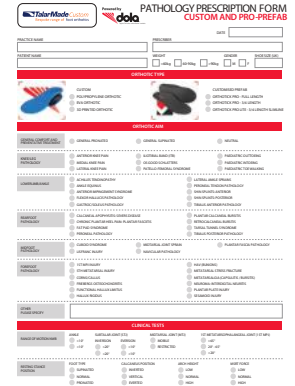
STEP 1

Complete 5 Step Pathology Prescription Form

Download Pathology Prescription Form from www.talarmadecustom.com

ALTERNATIVELY CALL 01246 268456 OR EMAIL

CUSTOM@TALARMADE.COM TO REQUEST AN ORDER PAD



STEP 2

Your clinical information is assessed by Clinical Experts including:

- FOOT TYPE
- CLINICAL TESTS
- PATHOLOGY
- ORTHOTIC TYPE
- CLINICAL PHOTOS/VIDEO (IF SUPPLIED)



STEP 3

Customised prescription is developed, including:

- ORTHOTIC DESIGN
- CORRECTIVE ADDITIONS & CUSHIONING
- TOP COVER



STEP 4

Orthotic Manufacture



STEP 5

Delivery Service

Your orthotics are dispatched within 10 working days



HOW TO ORDER

Tell us about your patient and we will design, customise and send you the orthotic you need.
Complete our Pathology Prescription Form...



PATHOLOGY PRESCRIPTION FORM CUSTOM AND PRO-PREFAB

PRACTICE NAME DATE

PATIENT NAME PRESCRIBER

WEIGHT <60kg 60-90kg >90kg GENDER M F SHOE SIZE (UK)

ORTHOTIC TYPE

	<p>CUSTOM</p> <ul style="list-style-type: none"> <input type="radio"/> POLYPROPYLENE ORTHOTIC <input type="radio"/> EVA ORTHOTIC <input type="radio"/> 3D PRINTED ORTHOTIC 		<p>CUSTOMISED PREFAB</p> <ul style="list-style-type: none"> <input type="radio"/> ORTHOTICK PRO - FULL LENGTH <input type="radio"/> ORTHOTICK PRO - 3/4 LENGTH <input type="radio"/> ORTHOTICK PRO LITE - 3/4 LENGTH SLIMLINE
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ORTHOTIC AIM

GENERAL COMFORT AND PREVENTATIVE TREATMENT	<input type="radio"/> GENERAL PRONATED	<input type="radio"/> GENERAL SUPINATED	<input type="radio"/> NEUTRAL
KNEE/LEG PATHOLOGY	<input type="radio"/> ANTERIOR KNEE PAIN <input type="radio"/> MEDIAL KNEE PAIN <input type="radio"/> LATERAL KNEE PAIN	<input type="radio"/> ILIOTIBIAL BAND (ITB) <input type="radio"/> OS GOOD SCHLATTERS <input type="radio"/> PATELLO-FEMORAL SYNDROME	<input type="radio"/> PAEDIATRIC OUTTOEING <input type="radio"/> PAEDIATRIC INTOEING <input type="radio"/> PAEDIATRIC TOE WALKING
LOWERLIMB/ANKLE	<input type="radio"/> ACHILLES TENDINOPATHY <input type="radio"/> ANKLE EQUINUS <input type="radio"/> ANTERIOR IMPINGEMENT SYNDROME <input type="radio"/> FLEXOR HALLUCIS PATHOLOGY <input type="radio"/> GASTROC/SOLEUS PATHOLOGY		<input type="radio"/> LATERAL ANKLE SPRAINS <input type="radio"/> PERONEAL TENDON PATHOLOGY <input type="radio"/> SHIN SPLINTS: ANTERIOR <input type="radio"/> SHIN SPLINTS: POSTERIOR <input type="radio"/> TIBIALIS ANTERIOR PATHOLOGY
REARFOOT PATHOLOGY	<input type="radio"/> CALCANEAL APOPHYSITIS: SEVERS DISEASE <input type="radio"/> CHRONIC PLANTAR HEEL PAIN: PLANTAR FASCIITIS <input type="radio"/> FAT PAD SYNDROME <input type="radio"/> PERONEAL PATHOLOGY		<input type="radio"/> PLANTAR CALCANEAL BURSTITIS <input type="radio"/> RETROCALCANEAL BURSTITIS <input type="radio"/> TARSAL TUNNEL SYNDROME <input type="radio"/> TIBIALIS POSTERIOR PATHOLOGY
MIDFOOT PATHOLOGY	<input type="radio"/> CUBOID SYNDROME <input type="radio"/> LISFRANC INJURY	<input type="radio"/> MIDTARSAL JOINT SPRAIN <input type="radio"/> NAVICULAR PATHOLOGY	<input type="radio"/> PLANTAR FASCIA PATHOLOGY
FOREFOOT PATHOLOGY	<input type="radio"/> 1ST MPJ INJURY <input type="radio"/> 5TH METATARSAL INJURY <input type="radio"/> CORNS/CALLUS <input type="radio"/> FRIEBERGS OSTEOCHONDRITIS <input type="radio"/> FUNCTIONAL HALLUX LIMITUS <input type="radio"/> HALLUX RIGIDUS		<input type="radio"/> HAV (BUNIONS) <input type="radio"/> METATARSAL STRESS FRACTURE <input type="radio"/> METATARSALGIA (CAPSULITIS / BURSTITIS) <input type="radio"/> NEUROMA: INTERDIGITAL NEURITIS <input type="radio"/> PLANTAR PLATE INJURY <input type="radio"/> SESAMOID INJURY
OTHER PLEASE SPECIFY	<input style="width: 100%;" type="text"/>		

CLINICAL TESTS

RANGE OF MOTION NWB	<p>ANKLE</p> <input type="radio"/> >10° <input type="radio"/> <10°	<p>SUBTALAR JOINT (STJ)</p> <p>INVERSION</p> <input type="radio"/> >20° <input type="radio"/> <20°	<p>EVERSION</p> <input type="radio"/> >10° <input type="radio"/> <10°	<p>MIDTARSAL JOINT (MTJ)</p> <input type="radio"/> MOBILE <input type="radio"/> RESTRICTED	<p>1ST METATARSOPHALANGEAL JOINT (1ST MPJ)</p> <input type="radio"/> >65° <input type="radio"/> 20° - 65° <input type="radio"/> <20°
RESTING STANCE POSITION	<p>FOOT TYPE</p> <input type="radio"/> SUPINATED <input type="radio"/> NORMAL <input type="radio"/> PRONATED	<p>CALCANEUS POSITION</p> <input type="radio"/> INVERTED <input type="radio"/> VERTICAL <input type="radio"/> EVERTED	<p>ARCH HEIGHT</p> <input type="radio"/> LOW <input type="radio"/> NORMAL <input type="radio"/> HIGH	<p>MSRT FORCE</p> <input type="radio"/> LOW <input type="radio"/> NORMAL <input type="radio"/> HIGH	

Download Form from www.talarmadecustom.com

STEP 1. TYPE + SIZE

Select Type:

PRO FULL LENGTH

- Full length orthotic
- Suitable for shoes with removable insoles



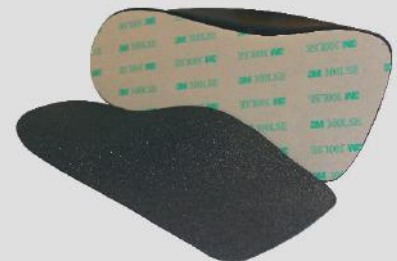
PRO 3/4 LENGTH

- 3/4 length orthotic
- Requires less shoe space than the full length version
- Suitable for most standard footwear without removable insoles



PRO LITE

- 3/4 length low profile design
- Specifically designed for **HARD TO FIT** footwear including ballet flats, court shoes, high heels, low profile football boots and even flipflops and sandals.



Select a Size:

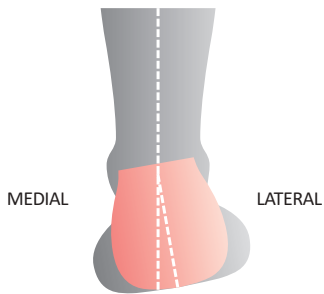
The Orthoticks Pro range is available in 10 sizes.

SIZE	MENS		WOMENS		KIDS		EU
	US	UK	US	UK	US	UK	
SK	-	-	-	-	8 - 10K	7 - 9	25 - 27
MK	-	-	-	-	11 - 13K	10 - 12	28 - 31
LK	-	-	-	-	1 - 3J	13 - 2	32 - 34
XXS	-	-	5 - 6	3 - 4	4 - 5J	3 - 4	35 - 37
XS	-	-	7 - 8	5 - 6	6 - 7J	5 - 6	38 - 39
S	7 - 8	6 - 7	9 - 10	7 - 8	-	-	40 - 41
M	9 - 10	8 - 9	11 - 12	9 - 10	-	-	42 - 43
L	11 - 12	10 - 11	-	-	-	-	44 - 46
XL	13 - 14	12 - 13	-	-	-	-	47 - 49
XXL	15+	14+	-	-	-	-	50+

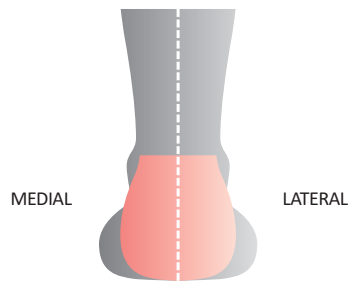
* Pro Lite: XXS - L only

STEP 2. FOOT TYPE

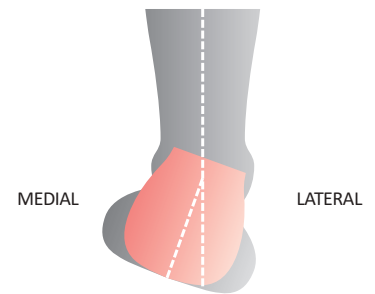
Determine a Foot Type:



**Pronated
Right Foot**



**Neutral
Right Foot**



**Supinated
Right Foot**

Determine the Level of Problem:



Mild



Moderate



Severe

STEP 3. PATHOLOGY

GENERAL

- Comfort
- Prevention
- Performance

LOWER BACK / HIP & KNEE / LEG

- SIJ
- Sciatica
- Anterior Knee Pain
 - Patello Femoral Joint
 - Patella
- Lateral Knee Pain
 - Iliotibial Band (ITB)
 - Lateral Collateral Ligament (LCL)
 - Lateral Knee Joint
- Medial Knee Pain
 - Adductor
 - Medial Collateral Ligament (MCL)
 - Medial Knee Joint

LOWERLIMB / ANKLE

- Achilles Tendonopathy
- Ankle Equinus
- Anterior Impingement Syndrome
- Gastroc/Soleus Pathology
- Lateral Ankle Sprains
- Peroneal Tendon Pathology
- Shin Splints: Anterior
- Shin Splints: Posterior
- Tibialis Anterior Pathology

KIDS FEET

- Flat Feet
- Osgood Schlatters / Sinding - Larsen
- Calcaneal Apophysitis: Severs
- Paediatric Outtoeing
- Paediatric Intoeing
- Paediatric Toe Walking



FOREFOOT / MIDFOOT / REARFOOT



FOREFOOT	MIDFOOT	REARFOOT
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- 1st MPJ Injury
- 5th Metatarsal Injury
- Corns/Callus
- Friebergs Osteochondritis
- Functional Hallux Limitus
- Hallux Rigidus
- HAV (Bunions)
- Metatarsal Stress Fracture
- Metatarsalgia (Capsulitis / Bursitis)
- Neuroma: Interdigital Neuritis
- Plantar Plate Injury
- Sesamoid Injury

- Cuboid Syndrome
- Lisfranc Injury
- Midtarsal Joint Sprain
- Plantar Fascia Pathology

- Chronic Plantar Heel Pain: Plantar Fasciitis
- Fat Pad Syndrome
- Plantar Calcaneal Bursitis
- Retrocalcaneal Bursitis
- Tarsal Tunnel Syndrome
- Tibialis Posterior Pathology

STEP 4. CLINICAL TESTS

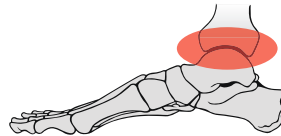
ANKLE RANGE OF MOTION NWB

TEST

Ankle joint dorsiflexion and plantar flexion

RESULTS

Dorsiflexion range is greater than or less than 10°



SUBTALAR JOINT (STJ) RANGE OF MOTION NWB

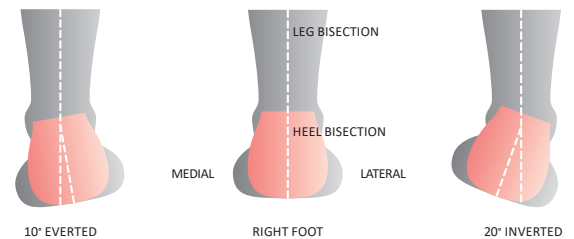
TEST

Subtalar joint inversion (supination) and eversion (pronation)

RESULTS

Inversion (supination) range is greater than or less than 20°

Eversion (pronation) range is greater than or less than 10°



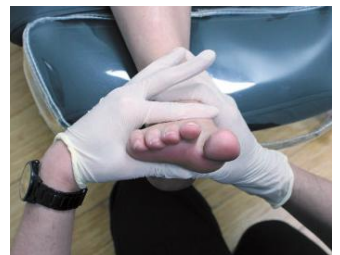
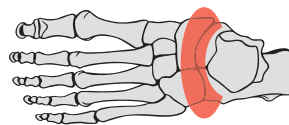
MIDTARSAL JOINT (MTJ) RANGE OF MOTION NWB

TEST

- Midtarsal Inversion and Eversion
- Midtarsal Adduction & Abduction
- Midtarsal Dorsiflexion & Plantarflexion

RESULTS

Midtarsal joint is mobile or restricted



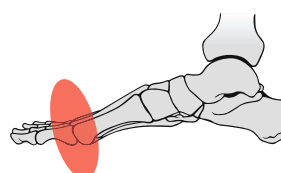
1ST METATARSOPHALANGEAL JOINT (1st MPJ) RANGE OF MOTION NWB

TEST

1st MPJ plantarflexion and dorsiflexion

RESULTS

1st MPJ dorsiflexion range is above 65°, between 20° - 65° or below 20°



CALCANEUS POSITION RESTING STANCE POSITION

The position of the calcaneus in the patients normal stance



Everted / Pronated
(right foot)

Vertical / Neutral
(right foot)

Inverted / Supinated
(right foot)

ARCH HEIGHT RESTING STANCE POSITION

The height of the medial longitudinal arch in the patients normal stance



Low Arch

Normal Arch

High Arch

MANUAL SUPINATION RESISTANCE TEST (MSRT) RESTING STANCE POSITION

TEST

The amount of force required to supinate the foot

RESULTS

Low, moderate or high amount of force is required to supinate the foot



LUNGE TEST SAGITTAL PLANE

TEST

Functional range of ankle joint dorsiflexion in stance

RESULTS

The foot is greater than or less than 10cm from the wall



JACKS TEST SAGITTAL PLANE

TEST

Assess the activation, range of motion available and force required for 1st MPJ dorsiflexion while weight bearing. Tests the function of the windlass mechanism

RESULTS

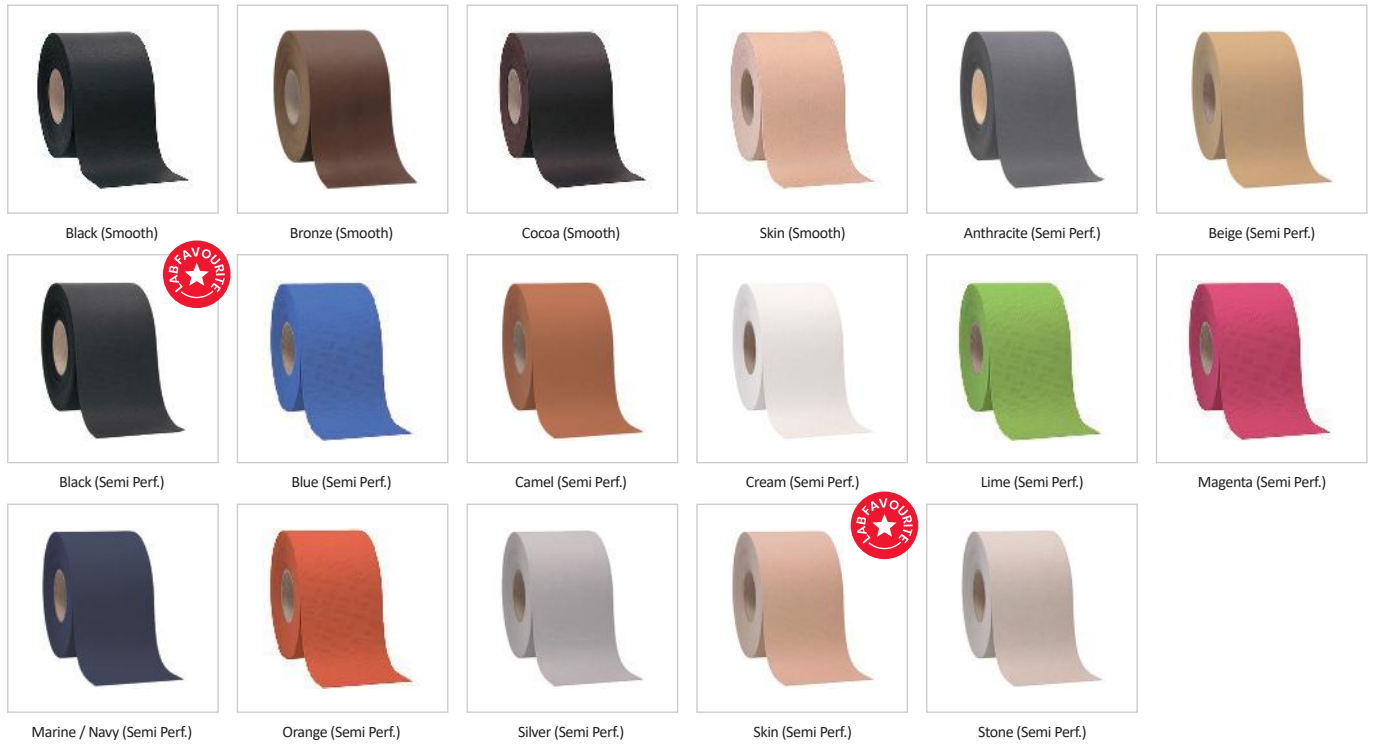
Low force or high force required to dorsiflex the 1st MPJ
The 1st MPJ has a high or low range of motion



STEP 5. TOP COVERS

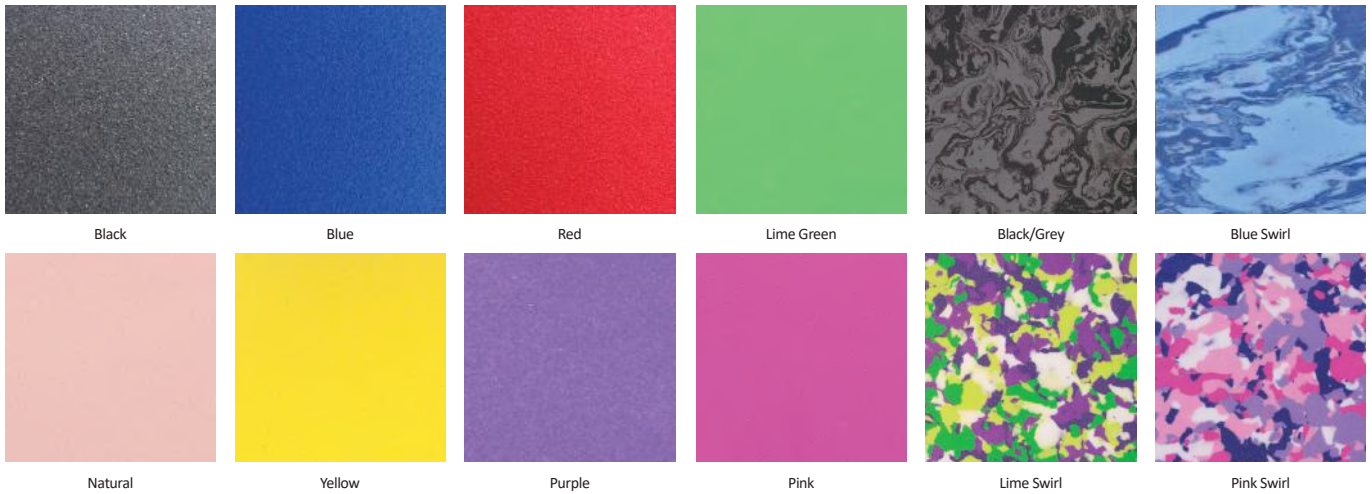
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DISCLAIMER: The information and recommendations provided in this manual are general in nature and do not replace the need for professional assessment. Including thorough history, physical examination, clinical diagnosis and other treatment modalities. The results of treatment directed testing including strapping and padding; and the results of applicable tests can be used to determine if your patient could benefit from orthotic therapy and to guide the design features of your custom orthotic.