



Foot Solutions of Hickory
242 Union Square NW
Hickory, NC 28601
Telephone: 828.328.9844 Fax: 828.324.4059
Email: Hickory@FootSolutions.com

Standard Written Order

Order valid for only 6 months from date of signature

PATIENT NAME:

DOB:

PHYSICIAN (PRINT):

DATE OF ORDER:

I AM PRESCRIBING:

- 1Pair A5500 Depth Inlay Shoes
- 3 Pairs A5512 Heat Molded Multi-Density Inserts 3 Pairs A5513/A5514 Custom Fabricated Inserts
- Partial Foot Toe Filler Right Left 3 Custom Inserts Other Foot
- Other (Describe) _____

I CERTIFY THAT I AM THE PRESCRIBING PHYSICIAN. I HAVE REVIEWED THIS DETAILED WRITTEN ORDER AND CONFIRM THE ITEMS PRESCRIBED AND DIAGNOSIS ARE TO THE BEST OF MY KNOWLEDGE ACCURATE.

PHYSICIAN SIGNATURE:

DATE:

NPI:

PHONE:

FAX:

Please Fax to: 828.324.4059