

**Unmatched Service
Superior Quality**

experience

Allied
OSI **Labs**



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Your Lab | Your Partner | Your Choice

More Than Just a Tagline.

Allied OSI Labs is not your VENDOR... We are your PARTNER!

Finding a lab that sees you as more than an account number...

Finding a lab that cares as much as you do about your patient outcomes....

Finding a lab that provides tools to ensure your orthotics and bracing programs generate revenue...

This is not an easy thing to do. Allied OSI is the lab that gets it.

Allied is podiatrist-owned and made up of industry veterans that are dedicated to seeing a win-win-win among you, your patients, and our lab.

We are proud to be a full-service lab with competitive pricing and in-house turnaround times.

- 5-7 days for custom orthotics
- 14 days for custom AFOs
- Offering a children's outgrowth program
- 25% off additional Plus Line custom orthotic pairs *when utilizing the patient's previous cast*

Handcrafted, Quality Orthotics... Since 1978.

Premium Shell Materials | Top-Grade Naugahyde | Ultra Suede Bottom Covers

While Allied OSI Labs carries a wide range of products for the lower extremity, our foundation and legacy is in custom orthotics. With a client service team with 50+ years of combined experience, paired with the highest quality of materials, your lab experience will be unmatched.



Premier Provider of the Richie Brace®



Your Bracing Partners... Every Step of the Way.

» Casting Guides

» Prescription Guides

» Coding and Billing Guides

CUSTOM ORTHOTICS

Plus Line



Custom Orthotic Plus Line

Functional Styles

Hybrid



Standard Components

Shell: 3/16" polypropylene
Heel Cup Depth: 12mm
Forefoot Post: Intrinsic
Rearfoot Post: Extrinsic crepe
Length: Metatarsal
Top Cover: Vinyl

Also Available:



Performance RX™



TLSilver®



TL2100®

*All materials are available in different flexibilities.
 See weight chart for appropriate flexibility.*

TPD Control



Standard Components

Shell: 3mm polyethylene
Heel Cup Depth: 22mm
Forefoot Post: Intrinsic
Rearfoot Post: Extrinsic white crepe
Length: Metatarsal
Top Cover: Echoleather
Accommodations: Medial and lateral flanges

Custom Orthotic Plus Line

Intermediate Styles

Balance Lite



Standard Components

Shell: 1/8" polypropylene
Heel Cup Depth: 12mm
Forefoot Post: Intrinsic
Rearfoot Post: Modified intrinsic
Length: Sulcus
Padding: 1/16" plastazote in forefoot
Top Cover: Vinyl
Bottom Cover: Ultrasuede®

Balance Soft



Standard Components

Shell: 1/8" polypropylene
Heel Cup Depth: 12mm
Forefoot Post: Intrinsic
Rearfoot Post: Extrinsic Poron®
Length: Sulcus
Padding: 1/16" plastazote in forefoot
Top Cover: Vinyl
Bottom Cover: Ultrasuede®
Features: Poron® arch reinforcement

Balance Support



Standard Components

Shell: 1/8" polypropylene
Heel Cup Depth: 12mm
Forefoot Post: Intrinsic
Rearfoot Post: Extrinsic corax
Length: Sulcus
Padding: 1/16" plastazote in forefoot
Top Cover: Vinyl
Bottom Cover: Ultrasuede®
Features: Corax arch reinforcement

Pedestrian



Standard Components

Shell: 3mm polyethylene
Heel Cup Depth: 12mm
Forefoot Post: Intrinsic
Rearfoot Post: Extrinsic crepe
Length: Full
Padding: 1/16" SBR*
Top Cover: Vinyl
Bottom Cover: J-Foam*
Features: SBR arch reinforcement*

*SBR and J-foam are exclusive to the Pedestrian

Custom Orthotic Plus Line

Dress Styles

Dress Class I



Standard Components

Shell: TL Silver® semi-rigid graphite
Heel Cup Depth: No shell in heel
Forefoot Post: Intrinsic
Rearfoot Post: 1/16" corax heel stabilizer
Length: Sulcus
Padding: 1/16" plastazote in forefoot
Top Cover: Vinyl
Bottom Cover: Ultrasuede®
Features: Extra narrow grind with hourglass shape

Dress Class II



Standard Components

Shell: TL Silver® semi-rigid graphite
Heel Cup Depth: Flat
Forefoot Post: Intrinsic
Rearfoot Post: None
Length: Sulcus
Padding: 1/16" plastazote in forefoot
Top Cover: Vinyl
Bottom Cover: Ultrasuede® under forefoot only
Features: Extra narrow grind with hourglass shape

Dress Class III



Standard Components

Shell: 1/8" polypropylene
Heel Cup Depth: 10mm
Forefoot Post: Intrinsic
Rearfoot Post: None
Length: Sulcus
Padding: 1/16" plastazote in forefoot
Top Cover: Vinyl
Bottom Cover: Ultrasuede®
Features: Hole in heel; Narrow grind with hourglass shape

Dress Class Selection Tips

- Dress Class I is versatile for low heels, high heels, or cowboy boots.
- Dress Class II is pitched for a 2" heel.
- Dress Class III is recommended for flat slip-ons or lace-up men's or women's low-heel counter shoes.



Custom Orthotic Plus Line

Athletic Styles

Supersport



Standard Components

Shell: 3/16" polypropylene

Heel Cup Depth: 12mm

Forefoot Post: Intrinsic with a 3° runner's wedge

Rearfoot Post: Extrinsic crepe

Length: Full

Padding: 1/8" Poron®

Top Cover: Vinyl

Bottom Cover: Ultrasuede®

Walker



Standard Components

Shell: 1/8" polypropylene

Heel Cup Depth: 12mm

Forefoot Post: Intrinsic

Rearfoot Post: Extrinsic corax

Length: Full

Padding: 1/8" Poron®

Top Cover: Vinyl

Bottom Cover: Ultrasuede®

*Athletic custom orthotics provide shock absorption
and control while allowing some natural pronation.*





Custom Orthotic Plus Line

Children's Styles

Whitman Roberts



Standard Components

Shell: 1/8" white polypropylene
Heel Cup Depth: 20mm
Forefoot Post: Intrinsic
Rearfoot Post: Extrinsic crepe
Features: Medial flange, lateral clip, deep heel cup

Reverse Roberts



Standard Components

Shell: 1/8" white polypropylene
Heel Cup Depth: 18mm
Forefoot Post: Intrinsic
Rearfoot Post: Extrinsic crepe
Features: Medial flange, lateral clip, deep heel cup, shell extends under 5th metatarsal

Gait Plate In Toe



Standard Components

Shell: 1/8" white polypropylene
Heel Cup Depth: 12mm
Forefoot Post: Intrinsic
Rearfoot Post: Extrinsic crepe
Features: Extended plantar medial shell

Gait Plate Out Toe



Standard Components

Shell: 1/8" white polypropylene
Heel Cup Depth: 12mm
Forefoot Post: Intrinsic
Rearfoot Post: Extrinsic crepe
Features: Extended plantar lateral shell

*NOTE: The standard shell material is 1/8" white polypropylene.
 Red, blue, and swirl/multi-color shell materials are available in 3mm polyethylene upon request.*

Heel Stabilizers



Standard Components

Shell: 1/8" white polypropylene

Heel Cup Depth: 20mm

Forefoot Post: Intrinsic

Rearfoot Post: Extrinsic crepe

Features: Extended medial flange, lateral clip, deep heel cup, small extension under medial arch



Standard Components

Shell: 1/8" white polypropylene

Heel Cup Depth: 20mm

Forefoot Post: Intrinsic

Rearfoot Post: Extrinsic crepe

Features: Extended lateral flange, with shell extending under 5th metatarsal, medial clip, deep heel cup



Standard Components

Shell: 1/8" white polypropylene

Heel Cup Depth: 20mm

Forefoot Post: Intrinsic

Rearfoot Post: Extrinsic crepe

Features: Extended medial flange, lateral clip, deep heel cup



Standard Components

Shell: 1/8" white polypropylene

Heel Cup Depth: 12mm

Forefoot Post: Intrinsic

Rearfoot Post: Extrinsic crepe

Features: Extended plantar lateral shell



Standard Components

Shell: 1/8" white polypropylene

Heel Cup Depth: 20mm

Forefoot Post: Intrinsic

Rearfoot Post: Extrinsic crepe

Features: Extended lateral flange, extended medial flange, deep heel cup

NOTE: The standard shell material is 1/8" white polypropylene. Red, blue, and swirl/multi-color shell materials are available in 3mm polyethylene upon request.



Assured Orthotic Replacement (AOR)

Allow your patients' parents to purchase child outgrowth insurance with Allied OSI's AOR plan! This will protect parents from unforeseen costs due to:

- **Outgrowth**
- **Accidental destruction**
- **Stolen orthotics**

Coverage is valid for children of up to 18 years of age, 2 years from the date of patient enrollment. Parents will receive a renewal notice at the end of the initial term.

Applications, along with \$42 payment, are due within 30 days of dispensing orthotics.

Outgrowth Claim Coverage

- 1 free pair within the two-year plan (no deductible required for first outgrowth claim)
- \$39.00 deductible for additional outgrowth claims within the same two-year period

Accidental Destruction | Lost/Stolen Coverage

- 1 new replacement pair within the two-year plan (same as original orthotic and made from same casts).
- \$39.00 deductible

CUSTOM ORTHOTICS

Accommodative Line

Accommodative

Providing Correction, Control,
& Support With Flexibility



Diabetic Soft

Shell: 5/8" white EVA

Heel Cup Depth: 12mm

Forefoot Post: Intrinsic

Rearfoot Post: Extrinsic EVA

Length: Full

Top Cover: 1/8" plastazote; 1/8"
Poron® laminated

Bottom Cover: 1/16" EVA



Diabetic Medium

Shell: Thermocork

Heel Cup Depth: 12mm

Forefoot Post: Intrinsic

Rearfoot Post: Extrinsic thermocork

Length: Full

Top Cover: 1/8" plastazote; 1/8"
Poron® laminated

Bottom Cover: 1/16" EVA



Diabetic Firm

Shell: 2mm polyethylene

Heel Cup Depth: 16mm

Forefoot Post: Intrinsic

Rearfoot Post: Extrinsic crepe

Length: Full

Top Cover: 1/8" plastazote; 1/8"
Poron® laminated

Bottom Cover: 1/16" EVA

Features: Medial flange, lateral clip, and
deep heel cup



Classic Leather

Shell: Leather, THK, and corax

Heel Cup Depth: 12mm

Forefoot Post: None

Rearfoot Post: Extrinsic corax

Length: Sulcus

Padding: 1/16" plastazote

Top Cover: Leather

Bottom Cover: Ultrasuede®

CUSTOM ORTHOTICS

Specifications

Posting Specifications

FOREFOOT POSTS

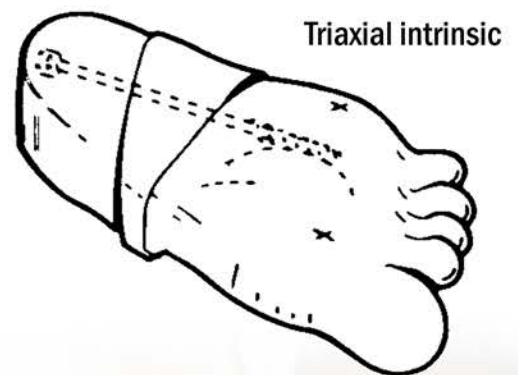
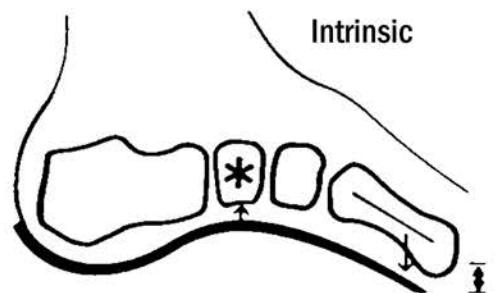
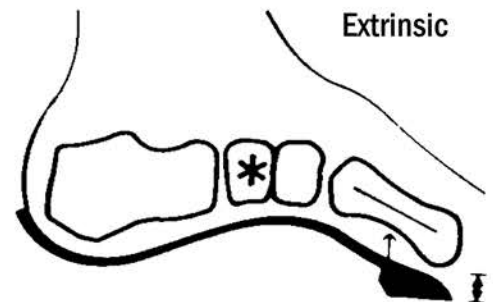
Extrinsic: This method of forefoot posting is accomplished by placing crepe directly under the front of the orthoses, wedging the forefoot into its neutral or desired position. This type of posting may not allow the metatarsal heads to reach the supporting surface and could induce jamming at the metatarsophalangeal joints. This type of posting also adds considerable bulk to the front of the orthoses, sometimes causing shoe fit problems.

Intrinsic: Intrinsic posting into the cast allows the metatarsals to plantarflex to the supporting surface, decreasing jamming of the metatarsophalangeal joints and preventing the forefoot post from affecting the place of the rearfoot.

Triaxial Intrinsic: This technique allows the posting of the forefoot to be integrated directly into the plaster cast of the foot. By sectioning the midtarsal joints to their oblique axis, the forefoot can be rotated out of a varus or valgus position. This allows full posting of large degrees of deformity. Triaxial posting is often completed by incorporating a biaxial rearfoot post.

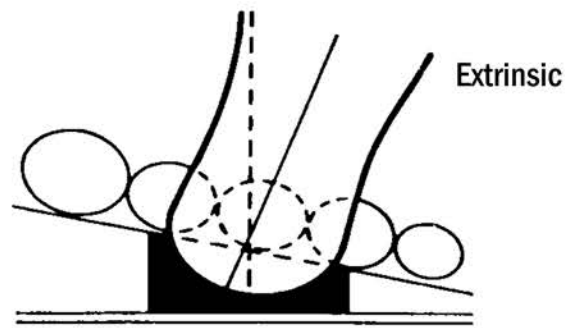
Extrinsic Long: An extrinsic forefoot post is added under the metatarsal heads, tapering off distally and becoming incorporated into a forefoot extension. The post is used in place of the intrinsic forefoot post. This posting is most useful when controlling forefoot varus or valgus in sports where heel contact is short or there are large amounts of side-to-side motion in the activity.

Runner's Wedge: A runner's wedge is incorporated in the same manner as the extrinsic long except with 3° of varus in addition to the forefoot intrinsic posting.

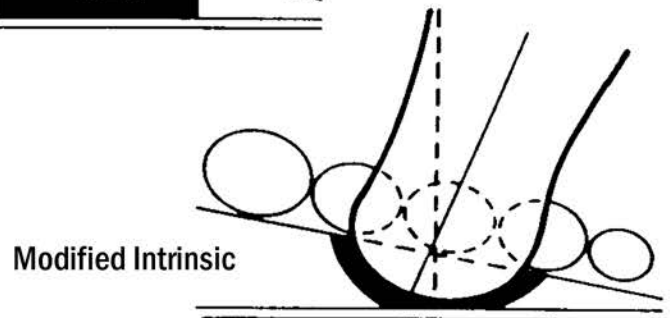


REARFOOT POSTS

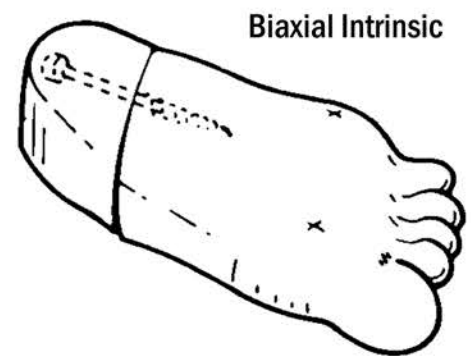
Extrinsic: In this traditional method of posting, crepe is applied directly to the heel area of the device.



Modified Intrinsic: The shell of the orthosis is ground at the heel contact point, either to the plane of the forefoot or in the desired degree of rearfoot. The amount of posting available is dependent on the thickness of the orthoses and is limited. It should not be confused with true intrinsic posting offered with biaxial or triaxial methods.



Biaxial Intrinsic: In this process, the rearfoot section of the cast is sectioned to the axis of the subtalar joint. The rearfoot section can then be rotated into its desired position of varus or valgus. The advantage of this technique is that it allows the rearfoot to be posted independently of the forefoot, eliminating discrepancies between the plane of the forefoot and rearfoot sections of the orthoses. High degrees of deformity can be posted without affecting how the device fits in the shoe and prevents lateral slippage of the foot off the orthosis. Biaxial rearfoot posting can be incorporated into most orthoses and can be used independently or in conjunction with the triaxial posting.



MEDIAL/KIRBY SKIVE

A medial skive cast modification (Kirby Skive) is a rise or lift on the inside of the heel cup. It is available in mild (2mm), strong (4mm) and very strong (6mm). This cast modification increases the ground reactive force through the orthotic on the medial plantar side of the calcaneus, which decreases the tendency to evert and encourages inversion of the heel.

PRONATION SKIVE

The amount of motion the orthotic has during the forefoot loading when the distal edge come to the ground. With a crepe extrinsic rearfoot post, the material will naturally compress to allow pronation. You can specify an exact amount of motion (eversion) ground into the post. A common request is 4° of motion.





Cast and Shell Modifications

Arch Height

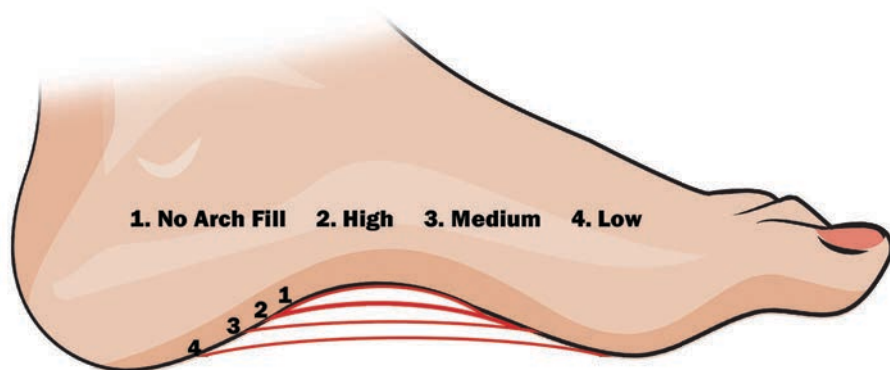
When creating your patient's custom casts, Allied OSI Labs does a **Modified Root Style cast correction**.

Arch fill is referring to the plaster fill that is added from the forefoot correction platform, through the arch area, and transitions to the heel before the shell is pressed.

- The less arch fill, the higher the arch will be on the orthotic.
- The more arch fill, the lower the arch will be on the orthotic.

The following approximations will provide an estimate of how much plaster fill will be added to the positive cast (these will vary upon the individual cast):

- **No Arch Fill:** a minimal amount of plaster is added to transition between the posting platform and arch.
- **High:** approximately 1/8" fill
- **Medium (Allied OSI standard):** approximately 1/4" fill
- **Low:** approximately 1/2" fill



Approximate representation only.

CUSTOMIZATION EXAMPLES

Pes Cavus

To accommodate a pes cavus foot type with an orthotic, it is imperative that the arch is high enough to support the patient's arch. Usually, the "no arch fill" is beneficial.

Flexible Pes Planus

To control pronation with an orthotic, one of the most effective ways is to order a "no arch fill".

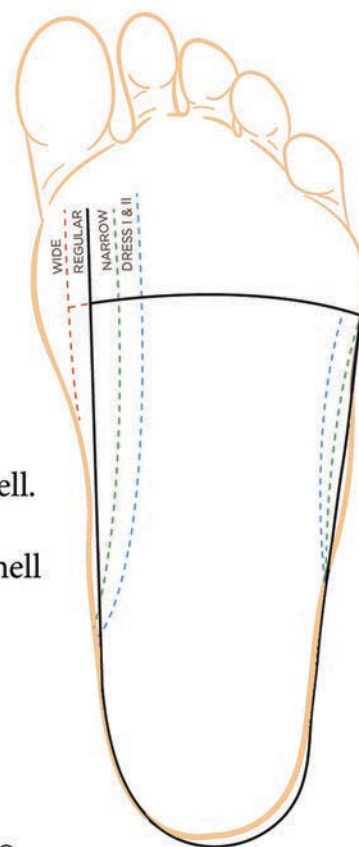
Fixed Pes Planus

A fixed pes planus foot type requires an arch that is lower than normal; a high or normal arch could be painful. If the cast already reflects this low arch, no extra plaster fill is necessary.

NOTE: Allied's standard arch fill is medium, but you can customize your arch fill under "Cast Modifications" on your order form.

Forefoot Width (*the width of the distal edge of the orthosis*)

- **Wide:** shell encompasses all metatarsal heads, 1-5
- **Regular** (Allied OSI standard): shell bisects 1st metatarsal head
- **Narrow:** forefoot is ground 1/8" laterally from bisection line on the 1st metatarsal head. *NOTE: the medial and lateral arches are bowed in 1/8" (hour-glass shape); choose narrow grind width for dress shoes*
- **Dress I & II (Extra Narrow):** 1/4" laterally from bisection of 1st metatarsal head and 1/8" medially from 5th metatarsal head



Arch Width *(all increases bulk and concerns with shoe fit)

- **Shaffer grind:** increase in the height and width in the medial arch of the orthotic shell. The shell has a low medial flange that rounds up around the 1st ray and navicular.
- **Old style shaffer grind:** increase in the height and width in the medial arch of the shell of the orthotic but is less abrupt than a flange.

Material Weight Recommendations

Polypropylene

- Up to 160 lbs: 1/8"
- 161 lbs - 299 lbs: 3/16"
- 299+ lbs: 1/4"

Performance RX™ and Graphite TL 2100®

- Up to 120 lbs: Semi-flexible (not available in TL 2100®)
- 121 lbs - 220 lbs: Semi-rigid
- 221 lbs - 300 lbs: Rigid
- Over 300 lbs: Ultra-rigid (not available in Performance RX™)

Polyethylene

- Up to 150 lbs: 3mm

Graphite TL Silver®

- Up to 200 lbs: Semi-rigid
- 200+ lbs: Rigid

Diabetic Orthotics

- Up to 150 lbs: Soft
- 151 lbs - 185 lbs: Medium
- 186 lbs - 250 lbs: Firm

NOTE: When adding medial flanges or arch reinforcement, add 60 lbs to weight limit.

These weight guidelines are provided to us by each material manufacturer. The weight recommendations are based on shell material properties of rigidity/flexibility testing for optimal control and rebound to original shape.

The thickness of plastic materials such as Polypropylene or Polyethylene material determines the stiffness or rigidity of the orthotic shell. A 1/8" plastic orthotic is more flexible (less rigid) than a 3/16" plastic shell.

Composites such as TL 2100 and Performance Rx are composed of either graphite or Nylon and are used to make the orthotic shell. Composites get their properties from the strands that are layered. The stiffness of a composite is determined by both the weave pattern and the size of the strands.

These materials will become more flexible for patients that weight exceed these recommendations. The shell flexibility can also vary not only with weight but also with the foot shape, foot size, and prescription options.

Allied OSI labs will manufacture orthotics for patients outside these guidelines. If on occasion, a material has broken or cracked due to weight, the shell warranty is voided.

Accommodations/Extras

1st MPJ Shell Cut Out*



The medial corner of the shell is removed starting distally from the first intermetatarsal space proximally to neck of 1st to allow more plantarflexion of the first ray.

Cut out 1st to cuneiform in shell: The medial corner of the shell is removed starting distally from the 1st intermetatarsal space and extending proximally to the 1st metatarsal base. The intent is to further plantarflex the 1st ray. Caution: these techniques also narrow the distal edge and posting is 2-5.

Accommodation in the Forefoot*



1/8" Corex extends from the distal edge of the device to the sulcus and an aperture is created for the area that needs offloaded.

Deep Heel Cup*



Measures 16mm (standard heel cup is 12mm). A higher heel cup will give more control and increased stiffness to the orthotic. It also widens the device in the heel making shoe fit more difficult.

Heel Lift*



Additional crepe added to an extrinsic rearfoot post to elevate the heel. The maximum recommendation inside a shoe is 1/2".

Hole in the Heel*



A circular aperture cut through the shell under the heel to off weight the heel area. The Footlights Dress features an added 1/8" Poron® fill for cushioning.

Horseshoe Pad*



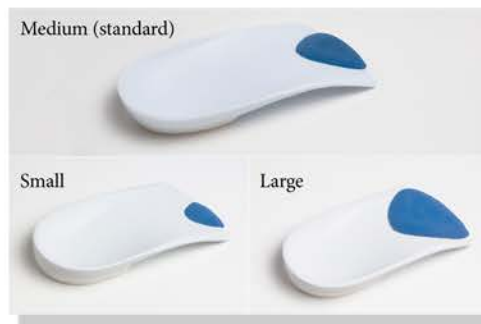
A 1/8" foam rubber horseshoe pad is added to the dorsal surface of the orthotic shell. It is effective for offloading heel spurs or pain from plantar fasciitis.

Medial Flange



An increase in the height of the orthotic shell on the medial starting just distal to the heel and extending to the distal edge. The shell wraps up medially around the 1st ray and talarnavicular area which adds increased stiffness and control. It also increases bulk and makes the orthotic arch wider, so shoe fit may be a concern.

Met Pads*



1/8" Poron® pads offer support and cushioning for the transverse arch. The standard placement is proximal to 2-4 met heads and the met pad hangs over the distal shell 1/8". Other sizes and placement is available upon request.

Morton's Extension*



1/8" Corex under the 1st metatarsalphalangeal joint from the distal end of the orthotic shell to the sulcus that limits the range of motion. It supports and preloads the first metatarsal head in relation to 2-5 mets.

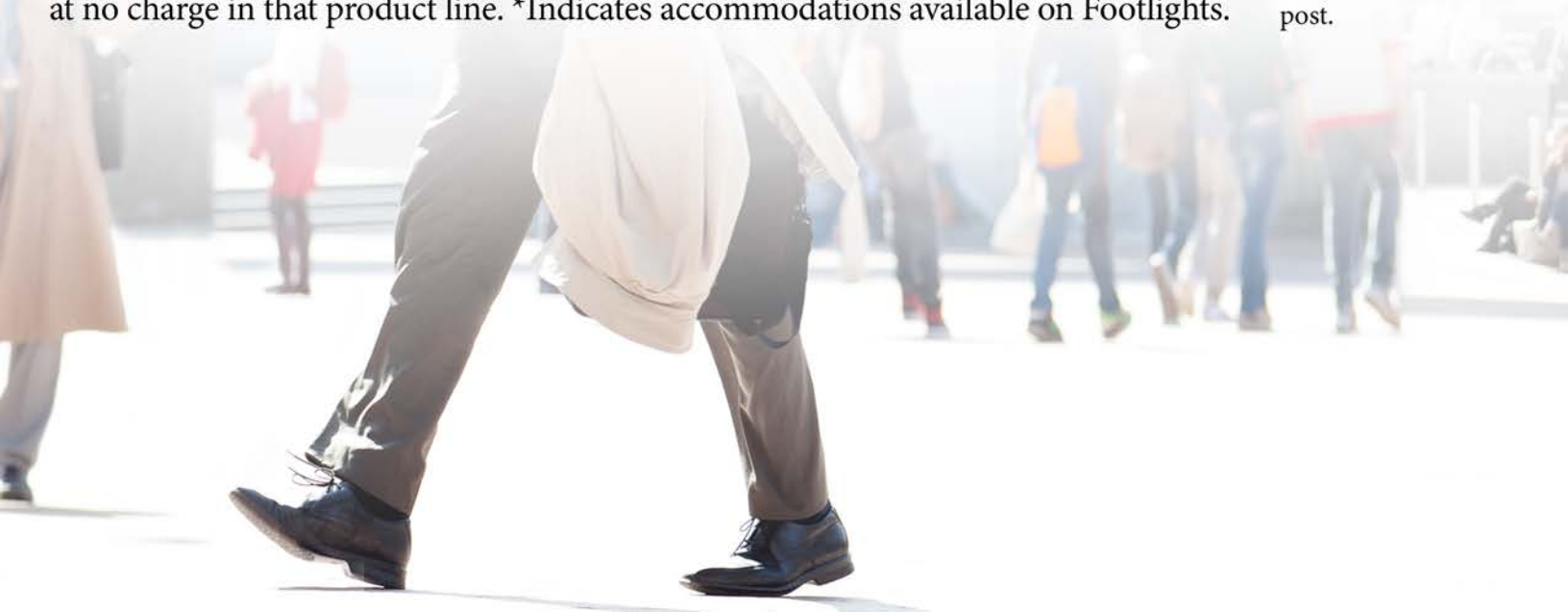
Runner's Wedge/Extrinsic Long Forefoot Post*



Crepe material extends from distal aspect of shell to sulcus and it thicker medially for a varus post or laterally for a valgus post and tapered out. This is added to carry the forefoot correction forward to control through the propulsion phase of gait. A Runner's Wedge is 3° of varus correction in addition to the intrinsic forefoot post. The Extrinsic Long Forefoot Post is used in place of the intrinsic forefoot post.

NOTE: Accommodations that are ordered but are not standard to the product will be charged by upgrading the order to the Standard+ price.

Limited accommodations are available on the Custom Footlights and are included at no charge in that product line. *Indicates accommodations available on Footlights.



CUSTOM ORTHOTICS

Casting & Shipping



Casting & Shipping Custom Orthotics

Allied OSI Labs Accepts the Following:

- Allied OSI Labs iPad Scanner (digital casts)
- Tom-Cat scans (digital casts)
- Plaster casts
- Foam boxes

NOTE: Regardless of your desired casting methodology, Allied OSI Labs recommends placing the patient in subtalar neutral position for optimal orthotic results.

Most Casts Stored Digitally!

Helpful Tips from your Allied OSI Client Service Team: **Avoid Damaged Casts**

Unfortunately, **foam box casts and plaster casts may get damaged before reaching the lab.**

When our team receives casts that have flaws, the final custom orthotic may not be as accurate as needed for desired patient outcomes. *NOTE: Foam casting is damaged more often than plaster.*

Our team will evaluate your cast and contact you if they do not meet our lab standards. Below are some helpful tips to ensure that your casts are just right for optimal orthotics:

FOAM IMPRESSION CASTING

1. Do not press the foot entirely through the foam, only deep enough to capture the entire foot.
2. Push foot 1 -1.5" evenly into the foam. An uneven weight-bearing surface or abnormal plantar contour may result in poor fit.
3. Pink or blue foam impression mailing boxes **DO NOT** meet many courier shipping standards. Tape multiple foam boxes together to strengthen them OR add protection by putting them in a larger box. Be sure to fill empty spaces with packing material for enhanced cast protection.

PLASTER CASTING

1. Let the casts cure for 24 hours; do not let the casts dry inside the packing box.
2. Stuff casts with packing material (newspaper works well).
3. Choose a box that will accommodate the size of the casts properly (not too big).
4. Always add packing materials around the cast for more protection; do not ship without packing material in the box.

Allied OSI iPad Scanner

Technology to Empower Your Practice



The Allied OSI iPad Scanner allows you to scan for custom orthotics instead of using plaster or foam molds.

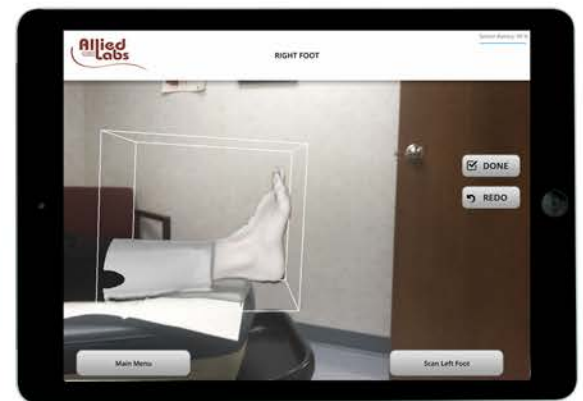
This **non-weight bearing casting** technique maintains a patient's neutral position.

With proper scanning, you will be able to capture:

- **Plantar & posterior surfaces** of the foot & heel
- **Medial & lateral sides** of the foot and toes
- **Markings** for accommodations

When scanning is complete, the Allied OSI iPad Scanner allows you to send your patient's digital casts to the lab. You are then able to **complete your prescription orthotic order** with all of our product options and accommodations for immediate electronic order submission.

Create a 3D Digital Cast of Your Patient's Feet



Visit www.alliedosilabs.com to view our training video and learn more about how the Allied OSI iPad Scanner works to accurately scan your patient's feet for custom orthotics.

iPad Scanning: The Benefits Over Casting

Time & Convenience

- 6 minutes to scan vs. 16 minutes to cast (plus additional time for the cast to dry)
- Eliminate casting mess (clothing, furniture, floor, clogging drains, etc.)
- Eliminate the need for paper order forms; order directly from iPad
- Electronic storage on your iPad of each scan on your iPad
- Scan offline/offsite; send scans to the lab once connected

Money

- Eliminate inbound shipping charge for all new orders
- Spend less money on casting supplies and packaging supplies
- Less time casting = more time to see patients

Patient Satisfaction

- Provide comfort without the use of plaster process/mess
- Improve turnaround time by eliminating shipping to the lab
- Provide modern experience and WOW factor

*Step into the Future
of Custom Orthotics*



CUSTOM BRACES



When it comes to AFOs... there is only 1 clear choice.



The Richie Brace® is a revolutionary alternative to traditional ankle braces. The lightweight construction and low profile design features of the Richie Brace® allows for a better shoe fit, more freedom of movement, and reduced pain from injury. Many patients can eventually recover and discontinue wearing their brace. This is why the Richie Brace® commitment to "Restoring Mobility" is communicated on every AFO.

Richie Brace® Standard



Features/Benefits:

- Custom balanced foot orthotic
- Standard 35mm heel cup fits into the bottom of the heel counter of the shoe
- Anatomic ankle axis hinge placement
- Semi-rigid lower limb supports
- Control of first ray, midtarsal, and subtalar joints
- Control of calcaneal inversion/eversion
- Pure, unrestricted sagittal ankle motion

Richie Brace® Restricted Hinge



Features/Benefits:

- A more rigid ankle articulation restricts ankle dorsiflexion and plantarflexion to a range under 5° without disrupting a smooth contact and heel rise phase of gait.

Medial Arch Suspender®:

- A patented innovation provides an adjustable lifting strap under the talonavicular joint to resist collapse of the medial arch, as well as eversion of the ankle and hindfoot.

Lateral Arch Suspender®:

- A patented innovation provides an adjustable lifting strap under the calcaneal-cuboid joint to resist inversion of the ankle or hindfoot.

See clinical indications & contraindications on our AFO "Go-To" Guide!

Richie Brace® Dynamic Assist



Features/Benefits:

- Custom balanced foot orthotic
- 35mm heel cup
- Anatomic ankle axis hinge placement
- Tamarack flexural ankle joints
- Dynamic dorsiflexion-assist provides up to 15° of dorsiflexion
- Semi-rigid lower limb supports
- Control of varus/valgus alignment of the foot
- Pure, unrestricted sagittal ankle motion

Richie Brace® Solid AFO



Features/Benefits:

- Traditional full leg posterior shell
- Balanced functional orthotic footplate
- Rearfoot post
- Extended forefoot padding
- Correction of varus/valgus forefoot deformities
- Control hindfoot inversion/eversion
- For comfort and accommodation of plantar lesions

Richie Brace® California AFO



Features/Benefits:

- Custom molded AFO shell
- Adjustable leather closure over tibia and forefoot
- Patented Medial or Lateral Arch Suspender®
- Rearfoot stabilizing post
- Continuous single strap closure, no laces
- Total restraint of foot and ankle movements
- Self-adjusting arch support
- Prevents medial/lateral instability

Richie Brace® Gauntlet



Features/Benefits:

- Custom molded AFO shell
- Medial or Lateral Arch Suspender®: legitimate varus/valgus control of hindfoot
- Rearfoot stabilizing post
- Non-weight bearing cast provides better heel and arch contour
- All casts intrinsically balanced to correct forefoot varus/valgus deformities

Richie AeroSpring Bracing System®



All Systems Feature:

- Carbon fiber ankle foot orthosis - limits motion and offloads damaging forces on injured structures
- Custom functional foot orthosis (1 pair) - controls rearfoot pronation
- Patented "Richie ArchLock" - offloads the medial-central band of the plantar fascia

Achilles Offloading System

- Graduated 20mm heel wedges - 2 layers of 10mm

Plantar Fascia Offloading System

- Graduated 10mm heel wedges

Midfoot Offloading System

- Carbon fiber footplate with toe rocker offloads dorsiflexion bending movements across the midfoot
- Graduated 10mm heel wedges

Dropfoot Stability System

- Carbon fiber footplate with toe rocker diminishes dorsiflexion of the MTP's and engagement of the windlass

No AFO casting necessary...the custom foot orthosis is paired with the AFO device to function as a system.

AFO "Go-To" Guide



CONDITION
↓

RECOMMENDED
BRACE →

PTTD (Adult-Acquired Flatfoot)

*Order with Medial Arch Suspender

Dropfoot

DJD

Peroneal Tendinopathy

*Order with Lateral Arch Suspender

Lateral Ankle Instability

*Order with Lateral Arch Suspender

Peroneal Nerve Injury

*Order with Lateral Arch Suspender

Post-CVA

Hindfoot Deformity

Charcot Arthropathy

Ankle Deformity

STS CASTING SOCK LENGTH →

Richie Brace® (Standard)	Dynamic Assist	Restricted Hinge	Richie Gauntlet™	California AFO	Richie Solid AFO
Mild-to-moderate		Moderate-to-severe w/ subluxed TN Joint	Stage III & IV	Severe Stage IV	
✓		*✓	✓	✓	
	✓	Equinus Severe varus/valgus Weak calf ✓			Fixed equinus Knee instability Spasticity Weak calf ✓
		Ankle or rearfoot w/ dropfoot & spasticity ✓	Severe ✓	Severe ✓	
		*✓			
✓		Severe *✓			
	✓	Fixed varus in hindfoot/ankle *✓			
	✓				
			✓		
			✓	✓	
				✓	
ANKLE	ANKLE	ANKLE	MID-LEG	MID-LEG	FULL-LEG (BERMUDA)



Quick L-Code Reference List Commonly Used for the Richie Brace®

Richie Brace® (standard)	Dynamic Assist	Restricted Hinge	Medial Arch Suspender®	Lateral Arch Suspender®	Richie Gauntlet™	California AFO	Solid AFO
L1970 AFO w/ ankle joint	L1970 AFO w/ ankle joint	L1970 AFO w/ ankle joint	L1970 AFO w/ ankle joint	L1970 AFO w/ ankle joint	L1940 AFO plastic custom	L1940 AFO plastic custom	L1960 AFO
L2820 soft interface	L2820 soft interface	L2820 soft interface	L2820 soft interface	L2820 soft interface	L2820 soft interface	L2820 soft interface	
	L2210 x 2 tamarack hinge		L2275 varus/valgus control strap	L2275 varus/valgus control strap	L2275 varus/valgus control strap	L2275 varus/valgus control strap	
					L2330 lacer	L2280 molded inner boot	

Quick ICD-10 Dx Code Reference List Commonly Used for AFO Prescriptions

Adult-Acquired Flatfoot (PTTD) Adult-Acquired Flatfoot M21.41 (RT), M21.42 (LT) Rupture, Tendon; Ankle and Foot M66.371 (RT), M66.372 (LT) Pronation, Acquired R26.9	Lateral Ankle Instability Instability of Joint; Ankle and Foot M24.871 (RT), M24.872 (LT) Calc-fib Ligament Sprain S93.411 (RT), S93.412 (LT) <i>*Need to also denote 7th character encounter type (A, D, S)</i> Anterior Talo-fib Ligament Sprain S93.491 (RT), S93.492 (LT) <i>*Need to also denote 7th character encounter type (A, D, S)</i>	Dropfoot Dropfoot M21.371 (RT), M21.372 (LT) Hemiplegia I69.351 (RT), I69.352 (LT)
Degenerative Joint Disease of Ankle & Rearfoot Osteoarthritis, Localized, Primary; Ankle and Foot M19.071 (RT), M19.072 (LT) Pain, Joint; Ankle and Foot M25.571 (RT), M25.572 (LT) Tarsal Coalition Q66.89	Tendinopathy of Ankle Tendinitis, Tibial M76.821 (RT), M76.822 (LT) Tendinitis, Peroneal M76.71 (RT), M76.72 (LT)	Charcot Foot Charcot Arthropathy M14.671 (RT), M14.672 (LT) Diabetic Charcot Joint E11.610

Richie AeroSPRING[®]

BRACING SYSTEM[®]



The **Richie AeroSpring Bracing System[®]** offers new options for podiatrists who commonly prescribe walking boots for challenging musculoskeletal conditions of the lower extremity. It's simply better!

The new brace provides 4 pathology-specific systems including:

- AeroSpring **Achilles** Offloading System
- AeroSpring **Plantar Fascia** Offloading System
- AeroSpring **Midfoot** Offloading System
- AeroSpring **Dropfoot** Stability System



This bracing system decreases the chance of pain in the knees, hips, and spine that is commonly found in patients wearing walking boots.

Eliminate the Need for Walking Boots
with an improved alternative that patients prefer.

➤ No AFO casting necessary

➤ Paired with a custom foot orthotic

➤ Lightweight for improved compliance

➤ Allows patients to drive while wearing

PDAC-Approved | Substantial Reimbursement



4 Pathology-Specific Systems

Achilles Offloading System

- Tendinopathy of the Achilles tendon
- Post-surgical and non-surgical management of the Achilles tendon rupture

Plantar Fascia Offloading System

- Severe recalcitrant plantar heel pain syndrome

Midfoot Offloading System

- Treatment of sprain of the tarsometatarsal (TMT) joints
- Treatment of degenerative arthritis of the midfoot joints

Dropfoot Stability System

- Neurologic conditions resulting in foot drop or loss of posterior lower leg muscle strength

SYSTEM FEATURES

All Systems Feature:

- Carbon fiber ankle foot orthosis - controls ankle joint dorsiflexion and load on the Achilles tendon
- Custom functional foot orthosis (1 pair) - controls rearfoot pronation
- Patented "Richie ArchLock" - offloads the medial-central band of the plantar fascia

Achilles Offloading System - offloads Achilles

- Graduated 20mm heel wedges - 2 layers of 10mm

Plantar Fascia Offloading System - offloads plantar fascia

- Graduated 10mm heel wedges

Midfoot Offloading System - offloads unstable midfoot joints

- Carbon fiber footplate with toe rocker offloads dorsiflexion bending movements across the midfoot
- Graduated 10mm heel wedges

Dropfoot Stability System - restores stability to neurologic patient

- Carbon fiber footplate with toe rocker diminishes dorsiflexion of the MTP's and engagement of the windlass



Suggested I-Codes

L1932: AFO, rigid, anterior tibial section, total carbon fiber, prefabricated

L3000: Foot, insert, removable, molded to patient model, UCB type, each

L3000 is billed as 2 separate line items, right and left. If the patient's insurance benefits do not cover the custom foot orthotics, it is suggested to charge your normal cash fee for foot orthotics.

Quick ICD-10 Dx Code Reference List

ACHILLES:

Tendinopathy or Tendinitis: M76.61 (RT), M76.62 (LT)

Tendon Rupture: M66.361 (RT), M66.362 (LT)

Tendon Rupture with Surgical Repair: M66.361 (RT), M66.362 (LT)

PLANTAR FASCIITIS:

M72.2

SPRAIN OF MIDFOOT:

Lisfranc: S93.621 (RT), S93.622 (LT)

**Need to also denote 7th character encounter type (A, D, S)*

DROPFOOT:

Dropfoot: M21.371 (RT), M21.372 (LT) Hemiplegia: I69.351 (RT), I69.352 (LT)



THE **Richie**
BRACE®



Repair Kit

Medicare Guidelines for AFO Replacement

Many physicians are unaware that Medicare WILL NOT pay for a replacement AFO due to wear and tear within **5 years** of dispensing. Medicare will only pay for the refurbishment or the repair of a brace within the 5-year timeframe of dispensing.

Medicare regulations state that the reasonable useful lifetime (RUL) for an AFO is 5 years. Medicare also stipulates that repair of an AFO during the 5-year wear period is justified and certain codes apply.

The Richie Brace® straps and limb support pads will most likely require replacement within the first year of daily use. Straps and pads are easily replaced in the office setting using a kit.

No need to send back to the lab!

Repair Kit Includes:

- 3 velcro straps
- 2 soft limb support pads



Suggested Billing Codes

Replacement Straps: L4002 RB
Soft Interface: L2820 RB

Any other repair such as replacement of top cover, rivets, hinges, and posting must be done at Allied OSI Labs.

NOTE: RB modifier is used when billing for replacement parts. Only one code per part is used even though there are three straps and two pads. When billing for these codes, the labor is already included.

CUSTOM BRACES

Casting & Shipping

Casting & Shipping Custom AFOs



Allied OSI Labs Accepts the Following:

- Plaster casts
- STS casting sock
 - Ankle length for the Richie Brace® Standard, Restricted Hinge and the Dynamic Assist
 - Mid-leg length for the Richie Gauntlet and California AFO
 - Bermuda length for the Solid AFO

NOTE: Cast for the Richie AeroSpring Bracing System® using the same method you cast for a custom orthotic.

Helpful Tips from your Allied OSI Client Service Team: **Avoid Damaged Casts**

Unfortunately, **casts may get damaged before reaching the lab.** When our team receives casts that have flaws, the final AFO may not be as accurate as needed for desired patient outcomes. Our team will evaluate your cast and contact you if they do not meet our lab standards. **Below are some helpful tips to achieve maximum success with the Richie Brace®.**

1. **Call your client service team to request a Richie Brace® Treatment Guide to assist in your patient's diagnosis and to receive brace recommendations and modification tips.**
2. Use the correct casting sock to get the height required for each Richie Brace®. For Richie Gauntlets and California AFOs, the casts need to be 2" higher than brace height (i.e. 7" brace needs to have a 9" cast).
3. Make sure markings are on medial and lateral malleoli of the cast (required).
4. Write the patient's name on bottom of the cast.
5. Let the casts cure for 24 hours; do not let the casts dry inside the packing box.
6. Rubberband the cast around the lower leg area and stuff cast with packing material.
7. Choose a box that will properly accommodate the size of the cast (not too big).
8. Add packing material around the cast; do not ship without packing material in the box.
9. Enclose the Richie Brace® order form in the box.
10. Attach an Allied shipping label to the box and ship.

*See reverse side for a Richie Brace®
step-by-step casting guide!*

Casting Overview

The Richie Brace® requires a negative impression cast utilizing either plaster splints or an STS casting stock. Neutral suspension technique is recommended while plantarflexing the First Ray. Complete casting guide and video available at www.alliedosilabs.com

PLASTER CASTING

Foot held 90° dorsiflexed.

Mark foot with felt-tip pen.

- Medial and lateral malleoli required.
- 1st & 5th MTP joints.
- All bone prominences that need accommodations.

Apply plaster strip #1.

Form a slipper cast with splint #2.

Complete with splint #3 and lay over the tip of the toes.

Use neutral-suspension casting technique.

Lock midtarsal joint and plantarflex the first metatarsal.

Remove cast following proper guidelines.

STS CASTING SOCK

Lay cutting strip down. Lay down cutting channel.

Place plastic bag over foot and leg. Apply STS sock following instructions carefully.

Mold sock. Lock midtarsal joint and plantarflex the first metatarsal.

Achieving Maximal Success with the Richie Brace®

Patient Evaluation - 4 Major Components

- Gait Analysis: knee stability, weakness in quads or ankle extensors, equinus or lack of heel strike, foot alignment at heel strike, as well as mid-stance and toe off
- Range of Motion: ankle joint dorsiflexion, subtalar joint motion, spasticity, or contracture
- Deformity: check if fixed or flexibility / reducible; check if result of muscle weakness or tightness

Impression Casting - 4 Major Components

- Ankle sock or plaster splints can be used for:
 - Standard Richie Brace®
 - Restricted Hinge Richie Brace®
 - Dynamic Assist Richie Brace®
- Mid-length must be used for:
 - Richie Gauntlets®
 - California AFO
 - Any Richie Brace® where there is severe abnormality in lower leg girth (wide or thin) or structural abnormality, such as extreme tibial varum (over 10°); also requested when prescribing Richie Restricted Hinge Brace® when dropfoot and equinus are present
- Bermuda sock must be used for:
 - Richie Solid AFO

Neutral-suspension casting technique must be used. This preserves the shape of the plantar surface of the foot; especially the heel and arch contours as well as the metatarsal weight-bearing parabola.

Positioning of the Foot During Casting

- Knee flexed 20° - 40°
 - Subtalar joint positioned in neutral
 - Midtarsal joint "locked" or fully pronated
 - 1st Ray plantarflexed to end range (i.e., remove all forefoot supinatus deformity)
- NOTE: Pronating the midtarsal joint while plantarflexing the 1st Ray maximally everts the forefoot on the rearfoot; a vital requirement to achieve maximum foot stability with Richie Brace® products

OVER-THE-COUNTER

Orthotics & Braces

OTC with Custom Quality...



We Have Your Dispensing Program Covered.

Allied OSI Labs provides a high-quality line of over-the-counter orthotics and braces at an unbeatable value!

When you're striving to run an effective and efficient practice, Allied OSI Labs is here to help you to streamline your products while providing the same quality and unmatched customer service in the industry!



Choosing an OTC Orthotic

Both our Freestyles and Mates lines are designed for over-the-counter but crafted with custom quality. Each style has distinct features that help to create a more precise fit for each of your patients.

SideKicks Freestyles

- Narrower width; similar to custom orthotics
- Full-length, met-length, and sulcus-length
- Vinyl top covers with 1/8" EVA padding on select styles
- Many styles available for various shoe types

SideKicks Mates

- Full-width; slightly wider than most custom orthotics
- Full-length and met-length
- Neolone or vinyl top covers with padding
- Heel spur pad

Both of these OTC lines have a polypropylene shell and offer 4° rearfoot posting or no rearfoot posting.



DTC Freestyle SideKicks

Support. Balance. Simplicity.

Freestyle Walker

- **Shell:** Semi-rigid poly
- **Length:** Full or sulcus top cover with 1/8" EVA padding
- **Rearfoot Post:** Black crepe 4° extrinsic; non-posted optional
- **Bottom Covers:** Suede under forefoot only

Freestyle High Heel

- **Shell:** Semi-rigid poly
- **Length:** Full or sulcus top cover with 1/8" EVA padding
- **Bottom Covers:** Suede under entire device
- **Features:** Hourglass shape & no shell in heel for better shoe fit

Freestyle Support

- **Shell:** Semi-rigid poly
- **Length:** Met top cover with 1/8" EVA padding
- **Rearfoot Post:** Black crepe 4° extrinsic; non-posted optional

Freestyle Casual

- **Shell:** Semi-rigid poly
- **Length:** Full or sulcus top cover with 1/8" EVA padding
- **Rearfoot Post:** Black crepe 4° extrinsic; non-posted optional
- **Bottom Covers:** Suede under forefoot only
- **Features:** Hourglass shape & hole in heel for better shoe fit



**Designed for Over-the-Counter.
Crafted with Custom Quality.**



DTC SportMate

Over-The-Counter Convenience. Custom Quality.



- **Shell:** Semi-rigid polypropylene
- **Forefoot Post:** None
- **Rearfoot Post:** 4° extrinsic or no post
- **Length:** Full or met-length
- **Width:** Wide
- **Top Cover:** Neolone padded top cover
- **Bottom Cover:** Suede
- **Features:** Non-skid heel protector & heel spur pad

Choosing an OTC Orthotic

Allied OSI Labs offers both the SideKicks SportMate and Freestyles lines of OTC orthotics. To help you know which type is best for your patients, keep in mind that the SportMate is full-width, making it slightly wider than most custom orthotics and has a Neolone padded topcover. The SportMate is available only from medical professionals.

OTC ^{THE} Richie ^{BRACE®}

Prefabricated Braces



The Richie Brace® prefabricated device provides powerful footplate control over the ankle and hindfoot. Offering the Richie Brace® OTC bracing program, provides patients an economical, on-the-spot treatment protocol for acute injuries, as well as an interim brace before transitioning to a custom AFO.

The Richie Brace® OTC Ankle Brace

The Richie Brace® OTC Dynamic Assist



No Casting Necessary!



CLINICAL INDICATIONS:

- Acute ankle sprain
- Tendinopathy of the foot or ankle
- Intermin brace before custom AFO

FEATURES:

- Prefabricated orthotic footplate in 4 sizes
- Full flexion ankle joints or restricted hinge ankle options
- Adjustable Velcro strap closures

CLINICAL INDICATIONS:

- Dropfoot secondary to CVA or nerve injury
- Mild muscular dystrophy
- Diabetic neuropathy
- Charcot-Marie-Tooth Disease
- Intermin brace before custom AFO

FEATURES:

- Tamarack™ dorsiflexion assist flexure joints
- Prefabricated contoured orthotic footplate
- Lightweight adjustable leg uprights



Compression Zone Technology is found in the FS6 Compression Sleeves and provides medical-grade orthopedic support for the foot structure and the Achilles tendon. The Sleeves are available in both ankle-length and calf-length.



The FS6 is an ultra-comfortable, moisture-wicking foot sleeve that can be worn under normal socks. The FS6 can also be worn overnight for morning pain relief.



Clinical Indications

- Plantar Fasciitis
- Achilles Tendonitis
- Heel Pain
- Swelling

SIX compression zones

Available in Black and Natural





Brace Layer Compression System

The AF7® is a new, innovative treatment option. It is both an ankle brace and a compression sleeve all-in-one.

The patent-pending AF7® Ankle Bracing Sleeve is a one-of-a-kind ankle brace designed to stabilize the ankle without immobilizing, for relief and balance while active. It provides medial and lateral stabilization by combining Compression Zone Technology® with our patent-pending K-Zone™ Bracing Technology (KZT™). The AF7® is effective as a solitary brace or an adjunct with AFO's until edema and acute symptoms subside.

K-Zone™ Bracing Technology (KZT™)

KZT™ Ankle Stabilizer Zone provides a no-stretch area in the sleeve which eliminates the need for a plastic or metal bar to stabilize the ankle. Instead, it provides flexible rigidity for support. The Ankle Stabilizer Zone fuses into the KZT™ Lateral Gel Stabilizer Bar for a seamless bracing effect, similar to various clinic taping techniques.

KZT™ Lateral Gel Stabilizer Bar is a one-of-a-kind bracing element designed to stabilize the talus and midtarsal joint without immobilizing. This provides lateral stabilization for inversion resistance to neutralize unsafe motion.



Features

- Provides medial and lateral stabilization
- Stabilizes Achilles tendon and ankle
- 7 zones of medical grade compression
- Thin profile to fit under any sock or shoe
- Supports the arch and the overall foot structure
- Creates a better sense of balance
- Helps to lock in midtarsal joint
- Stays in place – allows for more activity without migration
- More comfortable than traditional splints and braces

Clinical Indications

- Acute ankle sprains
- Achilles tendinitis
- Peroneal tendonitis
- Tendinopathy

Stabilize Without Immobilizing

**FOOT
GYM**
Professional Version



*All-in-One Tool for
Foot & Ankle
Strengthening and
Rehab*

8 Exercises in One

5-level resistance bands | 2 ankle resistance bands
Removable ice or heat massage roller | Non-slip foot pad | Stores easily

TOE CURL



TOE FLEXION



DORSIFLEXION



ANKLE EVERSION



**PLANTAR FASCIA
STRETCH**



MASSAGE



CALF RAISE



CALF STRETCH



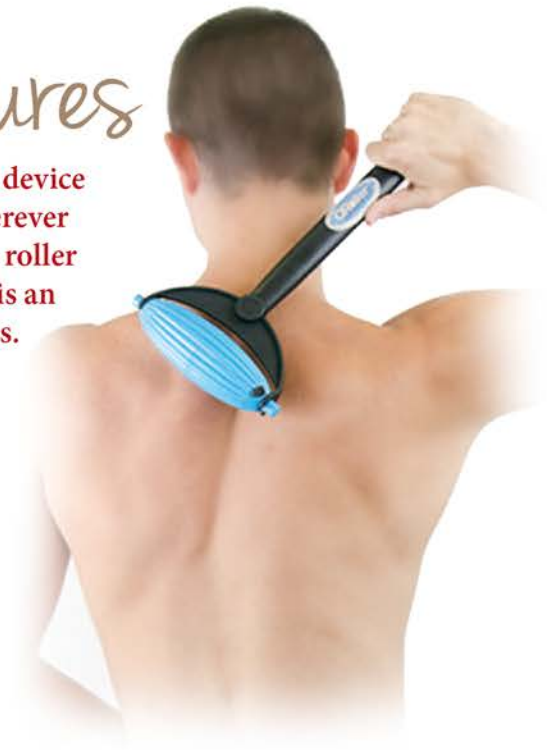
Clinical Indications

- Plantar Fasciitis
- Achilles Tendonitis
- Post-Surgery Rehab

Foot Gym Enhanced Features



The patent-pending ORoller® is an innovative device providing hot and cold massage therapy wherever needed on the body. The pivot head massage roller and the long, easy-to-hold handle makes this an effective product for all ages and lifestyles.



60° Pivot for Ultimate Reach

- Relax painful muscles and tendons
- Relieve pain in hard-to-reach areas
- Recover after exercise or injury
- Stretch and massage before exercise
- Relieve tension after a long day



Hot and Cold Therapy

- Place massage roller in refrigerator or freezer to cool
- Fill massage roller with warm water to heat

Foot Gym Professional Version Order Form

ACCOUNT NUMBER _____

ACCOUNT NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____

EMAIL (required) _____

PRICE: \$49.99/unit

QUANTITY: _____

SHIPPING: _____

\$ _____

TOTAL

SHIPPING

1-3 Units: \$8.50

3+ Units: Actual Shipping Cost

NOTE: 15% re-stocking fee. Prices subject to change.

Shipping rates listed for continental U.S.

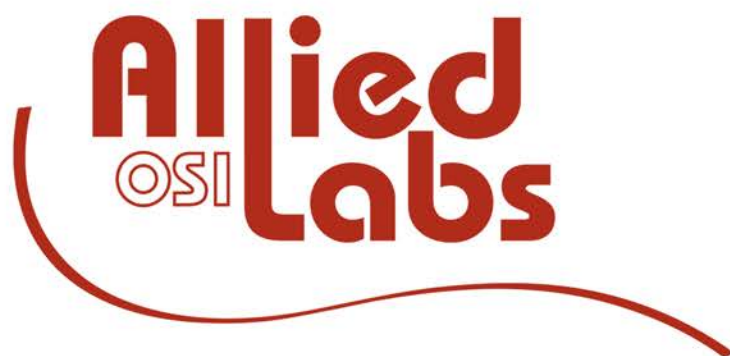
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FORM 112017

Your Lab. Your Partner. Your Choice.



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