

Appendix A: Orthopaedic Footwear Submission Checklist



Revised May 2018

Employee/Member Name: _____ Patient Name: _____

Policy/Plan Number: _____

Certificate/ID Number: _____

Patient DOB: _____

Information must be clear, concise, and legible. Proper medical terminology and anatomical terms must be included. If acronyms are used, there must be a legend explaining the terminology.

Clinical assessment findings

1. Diagnosis/clinical impression that necessitates orthopaedic footwear using appropriate anatomical and medical terminology

• Congenital deformity (e.g., clubfoot): _____

• Disease process (e.g., Charcot): _____

• Injury/trauma (e.g., stroke): _____

• Foot deformity: _____

2. Relevant clinical assessment/biomechanical examination/gait analysis findings that necessitate footwear: _____

3. Date of assessment: _____ Date of dispensing/fitting: _____

Pre-fabricated/mass-produced orthopaedic footwear

1. Make and model of footwear: _____

a. Size and width: _____

2. If modifications performed, please list: _____

Custom-made orthopaedic footwear

1. Outline the manufacturing process: _____

a. Foot capture/casting/scanning technique. If digital, include the brand name and model of the scanner: _____

b. Materials used: _____

c. Specific features to accommodate foot deformity: _____

The following must also be included with your submission:

i) Completed claim form

ii) Referral from a qualified prescriber

iii) Itemized paid receipt (including payment date and type)

iv) Copy of the lab/manufacturing facility packing slip or invoice including name, address, and phone number (copy of lab order in cases where the dispenser is the manufacturer)

v) Two sets of photos: (1) of patient's feet; and (2) of custom-made footwear dispensed **this is for custom-made footwear claims ONLY**

Provider information

Clinic name: _____

Address: _____

Phone: _____

Professional qualifications: _____

College registration number: _____

Date: _____

Canadian Certified Pedorthist Name: _____

Signature: _____

For more information, contact the Pedorthic Association of Canada at 1-888-268-4404 or info@pedorthic.ca.