

**TIMOTHY C. RUNYON, D.P.M., P.A.**

*Podiatric Physician & Surgeon*

**FOOT & ANKLE SURGERY**

*DIPLOMATE, AMERICAN BOARD  
OF PODIATRIC SURGERY*

1401 16TH STREET N.  
ST. PETERSBURG, FL 33704  
Tel. (727) 894-0794  
Fax (727) 895-1215



**TAMPA BAY SPORTS  
MEDICINE CENTER**

**WHAT ARE ORTHOTICS?**

An orthotic device (orthosis) is an individually designed custom brace that changes the function of your foot.

**HOW DO THEY WORK?**

An orthosis changes the way your foot works. Dr. Runyon will determine why your foot function is causing your particular symptoms. Then, by using an orthosis that changes the way your foot works, the symptoms may be relieved. Flat feet, high arches, hammertoes, neuromas callouses, bunions, and heel pain are common foot problems that may be helped by changing your foot function. Ankle weaknesses or frequent sprains are often treated with orthotics devices. Sometimes knee and back pain may be related to abnormal foot function and are relieved by orthotic control. One of the most common uses for foot orthosis is for post-operative control. Many foot problems requiring surgical correction are caused by abnormal function. Frequently following surgical correction of the deformity, an orthotic device is used to reduce the possibility of its recurrence.

**HOW MUCH OF THE TIME DO I NEED TO  
WEAR MY ORTHOTICS DEVICES?**

You should discuss your particular needs with Dr. Runyon. Orthotic control is somewhat analogous to the use of eyeglasses. While you are wearing them, the function is improved. Ideally, you should wear the orthoses whenever you are on your feet. If your symptoms are because of the strain of a particular activity, you may need to wear the orthoses only while engaged in the activity. In most situations, it is advisable to wear your orthoses about 75% of the time you are on your feet. It may be acceptable for you to wear some shoes occasionally without your orthoses. Because many foot symptoms result from abnormal foot function, the more you wear them the greater the benefit.

**TYPES OF ORTHOTIC DEVICES**

There are many types of orthotic devices. Dr. Runyon will decide which type will be best for treating your particular problem. You should discuss with us the types of shoes you will be using with them. The material that is used will depend on the different activities during which you will be wearing them. Some activities put unusual stress on your feet and will require specific materials or additions to the orthotic device. For example, activities requiring rapid direction changes may cause blistering on the sole without a special topcover. The type of device you will need for best function may not fit in all shoes. It might be useful to have a second pair of devices made which will function in your dress or sport shoes.

**TYPES OF SHOES**

Some types of orthotic devices will work in nearly any type of shoe. It is important both the orthoses and your shoes are appropriate for your activities. Most types of orthotic devices will work in several different types of shoes. In some situations more than one pair of orthoses may be needed. A woman's foot obviously needs to be in a different position in a high-heeled dress shoe than in her running shoes. Often it is necessary to compromise on the type of shoes you will wear in order to insure the best control of your foot function. It is important we discuss the type of shoes you will be wearing with your orthoses.

## HOW LONG WILL ORTHOSES BE NEEDED?

Most often an orthotic device will change the way your foot works only while you are wearing it. So the orthosis is accommodating the abnormal function, not correcting it. Theoretically, an orthosis could change the structure and function permanently, but this is not often seen in clinical practice. Because of this, orthoses will be required as long as you are involved in an activity that is causing your symptoms. Orthotic control of a child's foot is an exception where the primary use may be to prevent development of a deformity during growth. In this situation, it is best to use the orthoses until growth is complete and then as needed if symptoms are present. Controlling abnormal function of a growing foot allows more normal structure to develop limiting future symptoms.

## HOW LONG DOES IT TAKE TO GET THE ORTHOSES BACK FROM THE LABORATORY ?

It depends on the materials that the devices are made of, and the transportation time. Some devices may be back in the office within ten days, and others may take as long as four weeks. We may want you to wear a temporary device while you are waiting for them to be returned.

## HOW LONG DOES IT TAKE TO GET USED TO THE ORTHOTICS ?

Usually you will adjust to orthoses in a few weeks. In some situations, it might take a little longer. If you intend to use your orthoses in sports activities, it will probably be necessary for you to adjust to them for everyday wear first. We will recommend a break-in schedule for your particular needs.

## EVALUATION

The extent of evaluation necessary to prescribe an orthotic device will differ. Often an evaluation will include range of motion testing, muscle testing, posture and gait (walking) evaluation. X-rays are often indicated to determine the condition and position of joints and to rule out abnormalities not appropriately treated with orthoses. Sometimes use of tape or padding will allow us to determine the degree of control that will be needed.

## IMPRESSIONS

In order for the laboratory to construct your orthotic device, it is necessary for us to make an impression of your foot in the position he wants it to function. This Impression is usually made of plaster. Dr. Runyon or one of his assistants may position your foot and hold it while the impression "sets up," or it may be taken with your foot partially weight-bearing or in a particular shoe. This impression is the most critical step in the fabrication of the orthotic device.

## LAB PROCESS

Your impressions will be sent to the laboratory. The lab makes a positive model of your foot and adds any corrections prescribed by Dr. Runyon. The materials specified will then be formed to the positive model of your foot. Additional corrections are often added to the orthotic device at this point to be sure that it balances your foot to the supporting surface. Covers, extensions, and other additions are then made before the orthotic is mailed back. We often apply the covers and extensions here in our office after checking fit and are part of the orthotic "adjustment" process to insure the best fit to both your foot and shoe.

## FEEES

The case fee for one pair of orthotic devices is 420<sup>00</sup>. This case fee includes the orthotics, biomechanical castings (impressions), and any evaluation and testing that needs to be done for your specific condition. This case fee also includes any office visits for orthotic adjustments for one year from the time of dispensing. The case fee does not include fees for x-rays, office visits for evaluation and management of another unrelated condition, and office visits for orthotic checks after 1 year. We feel it is important to check the orthotics at least once a year for proper wear and fit to the foot and shoe. Additional pairs, if ordered within six months of the original impression, are 152<sup>00</sup>. Most orthoses are lifetime devices and should never have to be replaced. Occasionally after a number of years they will have to be sent back to the lab for a refurbishment, and there is a small charge for this along with postage.

One half of the fee has to be paid at the time of impressions, with the other half to be paid at the time of dispensing. Seldom do insurances cover the cost of orthotics, as it is considered a preventive treatment, and they are not attached to a brace in the shoe. Even if an insurance company says they are covered, frequently only a portion, if any, ends up being paid. Therefore we can only accept assignment with insurance companies we have a favorable "track record" with. We will be happy to discuss with you any questions you may have about your insurance.