What to do

① An appointment is needed to attend ShoeTech's Clinic. Please phone 9972 4488

② A fee is charged for all clinical services. An initial assessment and consultation fee is payable at the time of the service. Please ask the current fees at time of booking.

What to bring

① DOCTORS REFERRAL

② RELEVANT REPORTS

(a) Relating to your foot problem

(b) Any X-Rays, scans of your feet, ankle, leg and hip

(c) Any reports on factors contributing to your foot problems
such as back problems which limit the amount of footwear change

③ EXAMPLES OF FOOTWEAR

Studying current and past shoes can give important information to us about what works and what doesn't work and why.

(a) Sample range of current footwear~
most comfortable shoes, least comfortable**,** most worn shoes, special function shoes

(b) Sample of footwear type you are hoping you can receive
this may be an photograph from an advertisement or a borrowed shoe

③ Any (and all) orthoses you have received

WHAT ELSE IS USEFUL?

① Information on foot changes
such as if your foot swells a great deal, a measurement of when it is swollen, and when it is not is helpful. Further information can be given to you when you make the appointment.

② Information on any special needs or circumstances

sometimes in an consultation people forget to mention special problems they have or features they want, and sometimes it is only after shoes are made that you remember. Thinking about this before the appointment and jotting down any points can be very helpful.

③ Any questions or issues

It is useful to jot down these before your appointment so you can discuss them with us.

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Style of Footwear

Different types of footwear are needed for different purposes:

If your foot swells a great deal, greater adjustability is needed, such as lace-ups.
If you need greater ankle control, a higher boot style may be needed.

The designs recommended to you will emphasis your medical priorities. In new patients we concentrate on functional footwear with generous safety margins.

Some styles of footwear will not be suitable. The most obvious is women's court shoes, which have no adjustment, reduce foot control and apply direct pressure to the toes. While very popular, this design can be damaging and dangerous, and do not meet Medical Grade footwear standards.

Footwear / Orthotics aims

Footwear / orthotics can be designed for a wide range of treatment aims including accommodation, correction, pressure redistribution, joint stabilisation and functional relief. Different combinations are possible, with different effects and advantages / disadvantages. It is important to work out the right mix and levels of improvements to suit each person.

Amount of improvement

The levels of problems adjusting to new footwear / orthotics is often related to the amount of improvement that is trying to be achieved, or problems in other areas. Often a partial correction is made to make it easier to get used to or stir up other problems. The extent is a matter of judgement and needs to be agreed on by all parties.

Foot changes

Changing deformities such as increasing toe clawing over time can result in a future mismatch between the footwear / orthotics and the (changed) foot. A different approach than if the deformity was fixed. Future surgery, which may change the alignment, can also result in a different foot-to-footwear / orthotics match.

Changes in activities

Sitting-type footwear / orthotics is different to Active-type footwear / orthotics (a slipper and a hiking boot). Significant changes in activities can directly cause different pressures inside the shoe resulting in problems. Secondary changes such as swelling due to inactivity (following surgery or illness) can affect fit and function. If this is likely, a change in footwear / orthotics plans may be required.

Foot improvement

Sometimes modest improvements in foot flexibility and control can result in significant improvements in overall foot-footwear / orthotics function. A combination of foot and footwear improvements may be needed.

Complementing related services

The best results are when all services have consistent aims. There is then a collective reinforcement. One treatment then doesn't undermine another. No important information or needs are missed.

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Medical Grade Footwear

Medical Grade Custom can be highly labour intensive and time consuming, typically involves between 3-6 hours of direct clinical time in 5-10 separate stages and between 8-15 hours of skilled technical time and over 100 individual steps.

Costs

Medical Grade Footwear / Orthotics Services are clinically based. Extensive resources are used to provide the most comprehensive and thorough range of services possible. Our costs, like other medical services, are separated into clinical and technical elements. There are direct charges for clinical time, skill and degree of difficulty or relative risks.

The cost-effectiveness is measured against risk, priorities, quality of life and related foot costs.

Cost Variations

There may be a number of reasons for higher individual fees. For example, high risk patients with advanced diabetic disease and history of foot problems will require greater clinical time, more sophisticated materials, increased steps and follow up as well as more related services such as advice, education and liaison.

First footwear / orthotics often requires significantly more judgements and checking (and more visits) as your specific needs and responses are being established. Where greater initial clinical input is needed, initial footwear designs may be deliberately simpler. If in subsequent footwear less clinical input is required, costs may be shifted into more complex designs or into reducing functional tolerances (to change appearance.) Where conditions are essentially stable and a number of different footwear is required, some cross subsidisation may occur.

Number of visits

Given the number of possible variables and variations, and as footwear is time consuming to make and to change, most custom footwear / orthotics services are provided with a number of key clinical reviews to maximise function. As with any clinical service, it is common, particularly on first treatments, to have to effect some changes as a result of clinical use and feedback. This usually means between 3-6 visits including follow up.

Adjusting to Change

Medical Grade Footwear / Orthotics can involve significant changes to aspects such as foot control and pressure distribution. These changes may be initially disruptive and may take some time to adjust to. Coordinated input from other service providers helps in this dynamic of maximising specific aims and minimising the transition. Please allow sufficient time to get used to the footwear / orthotics. If your footwear / orthotics causes you any discomfort or pain or any other unexpected change, please stop using it and call us. If you have a lack of sensation, use visual or other control to check for changes that may occur. We will discuss your specific adjustment and check up system with you. Please talk to us if you have any concern or question.

Appearance

Many people wear footwear that has minimal safety margins. They may try dozens of brands of shoes of same size and style before selecting footwear (that they may periodically have some fitting difficulties with). People may have "functioning" footwear that is not Medical Grade (insufficient tolerances and inadequate design) which we are unable to reproduce to enable sustained, successful use. For first shoes, it is usual to emphasis safe, maximum function. When individual benchmarks are established, emphasis for subsequent footwear designs may shift to particular appearance characteristics.

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