

Ordered by: _____
 BILLING: P.O. Number _____
 Bill To: _____
 Address: _____
 City: _____
 Prov: _____ Postal Code: _____ Country: _____
 Phone: (_____) _____ Fax: (_____) _____

Phone # (_____) _____
 Account # _____
 Ship To: _____
 Address: _____
 City: _____
 Prov: _____ Postal Code: _____ Country: _____
 Phone: (_____) _____ Fax: (_____) _____

Shipping Preference: Ground Express

Patient's Last Name: _____

Patient's First Name: _____

Leg: Left Right

Casting Protocol

The cast should be taken with the arm in a natural hanging position at the side of the body, which places the elbow in about 25 degrees of flexion. The forearm should be parallel to the side of the leg. The cast should extend from just proximal to the wrist up to the arm pit — or at least 6 inches above and below the elbow joint. The cutting strip should run down the anterior of the arm through the cubital fold. The following landmarks should be outlined with an indelible pencil: Olecranon, medial and lateral Humeral Epicondyles, Cubital Fold and proximal and distal margins of the brace.

Measurements

What is the measurement from the elbow crease to ulnar styloid? _____ inches

What is the measurement from the ulnar styloid to palmar crease? _____ inches

Humeral length _____

Radial length _____

Ordering Options

Shell Color

- Clear Graphite (Black) Black Beige
- Gray Red Navy Blue
- Green Burgundy Royal Blue

Extension/Flexion Stops

- Send Extension/Flexion Stop Kit
- Set Extension Stops: 0 15 30 45
- Set Flexion Stops: 90 110 120

Would you like the brace fabricated with an adjustable/removable extension bar and hand grip?

- Yes No (No additional charge for this option)



Comments: _____

Please complete and fax this form to 1.877.527.1911 (24-hours a day). If you are calling in your order, this form indicates the options and information that will be required by our staff. For phone orders, please call 1.877.222.3311 between 6:00 a.m. and 4:00 p.m. (PST).