

olutions

I HUASNE	Rebeireil	ever	US	teoartnrit	i s Bracing	Solutions	
Account Contact	Information						
Name:	Phone:						
Billing and Shipp	ing						
PO#	Shipping Account #:						
Shipping Preference	Billing Address:			Shipping Address:			
□ Ground □ Express							
	City:	City:					
	Province:	Dfcj ince: P		Post	al Code:		
			ı				
Patient Information			Undersleeves*				
Patient's Last Name:			☐ 18" Cotton ☐ 18" Neoprene ☐ 22" Neoprene Thigh Sleeves*				
Patient's First Nam	☐ 1/16 Comfort Thigh Sleeve						
□ Male □ Female Age			Size				
Weight(LBS) Height(IN)			l	I □ Small □ X-Large	□ Medium □ XX-Large		
Leg: □ Left □ Rig	ght		Sizing Re		E /// Large		
Compartment			Sizing Ke	6" above	M-L width	6" below	
☐ Medial Compartment ☐ Universal (select when ordering stock inventory) Medial OA pads installed, Lateral OA pads included in kit			X-Small	NOT AVAILABLE	3" to 3.5"	11" to 12.5"	
			Small	15.5" to 18.5"	3.5" to 4"	12.25" to 13.75"	
Shell Length Thigh shell extends 7" to 9" on all braces			Medium	18.5" to 21"	4" to 4.5"	13.25" to 15"	
Tibia 6 Inch 7 Inch 8 Inch			Large	21" to 23.5"	4.5" to 5"	14.25" to 15.75"	
TM5+ Hinges Includes Extension Stops			X-Large XX-Large	23.5" to 25" 25" to 28"	5" to 5.5" 5.5" to 6"	15" to 17" 17" to 19"	
☐ Optional Flexion	•		AN-Large	25 10 28	5.5 10 6	17 (019	
Color Matte Finish Black (Standard) Atlantic (Light Blue)	□ Grey □ Red	□White					
Satin Finish ☐ Lemon ☐ Fuchsia	□ Orange □ Pacific (Dark Blue)	□ Lime			Circumference	e 6 inches	
☐ Combined instab		ЛП	above mid-pat	tella			
☐ CS Package*				$\leq \downarrow $			
\square Anti-Migration S	Medial-Lateral Knee Width (not circumference)						
\square Spooner Patella		/ (() / / /	at knee center				
☐ Easy Release Bud (Not available on the dis							

Brace Cover* ☐ Posterior Closure Circumference 6 inches below mid-patella

☐ Pull On