

General Information

Ordered by : _____

Phone: _____

Patient's Name: _____

BILLING: P.O. Number _____

Townsend Account Number: _____

Bill To: _____

Address: _____

City: _____

State: _____ Zip Code: _____ Country: _____

Phone: _____ Fax: _____

Ship To: _____

Address: _____

City: _____

State: _____ Zip Code: _____ Country: _____

Phone: _____ Attention: _____

Fit Date: If known, please indicate the date you are scheduled to fit the patient: _____

Shipping Preference:

Ground 2-Day P.M. 2-Day A.M.

Next Day P.M. Next Day A.M.

(If no preference is indicated, this order will be shipped 2 Day P.M.)

Note: We do not ship new or repaired products directly to patients.

Sizing Reference

X-Small (tibia shell only)

6" above: 12.5" to 15.5" 6" below: 11" to 12.5" M-L width: 3" to 3.5"

Small

6" above: 15.5" to 18.5" 6" below: 12.25" to 13.75" M-L width: 3.5" to 4"

Medium

6" above: 18.5" to 21" 6" below: 13.25" to 15" M-L width: 4" to 4.5"

Large

6" above: 21" to 23.5" 6" below: 14.25" to 15.75" M-L width: 4.5" to 5"

X-Large

6" above: 23.5" to 25" 6" below: 15" to 17" M-L width: 5" to 5.5"

XX-Large

6" above: 25" to 28" 6" below: 17" to 19" M-L width: 5.5" to 6"

Ordering Instructions

Please complete and fax this form to 800.798.2722 (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 800.700.2722 between 7:00 a.m. and 4:00 p.m. (PST).

UniReliever OA Unloading Knee Brace

***Indicates additional charges apply**

Compartment (Hinge is on the side of pathology)

Medial Compartment (hinge on medial side)

Lateral Compartment (hinge on lateral side)

Leg

Right Left

Shell Lengths

Thigh 7 inch 8 inch

Tibia 7 inch 8 inch

Size

X-Small Small Medium

Large X-Large XX-Large

Color

Matte Black (standard stock color)

Non-stock colors, brace may ship next business day

Bengal Silver Bengal Yellow Bengal White

Gloss Black Electric Blue Sky Blue Violet

Candy Green Sparkle Copper Sparkle Red

TM5+ Hinge -- Includes Extension Stops

Optional Flexion Stop Kit*

Brace Cover*

Posterior Closure Style Pull On Style

Color: Black Blue

Undersleeves*

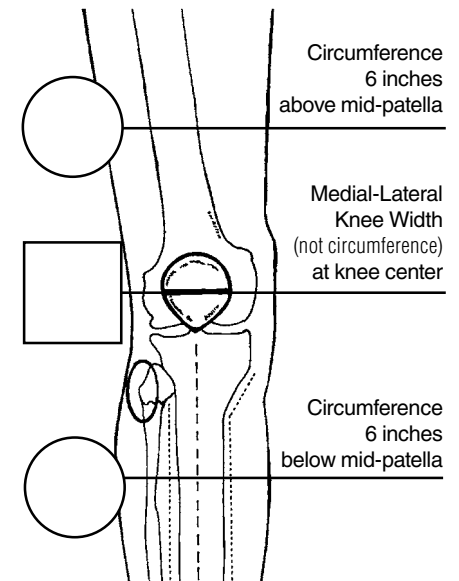
18" Cotton 18" Neoprene 22" Neoprene

Thigh Sleeves*

1/8 Atrophy Thigh Sleeve 1/16 Comfort Thigh Sleeve

Special Instructions: _____

3 MEASUREMENTS: "CUSTOMIZED"
 ASSEMBLY (NO ADDED CHARGE)



If your patient has proportional leg sizing (see sizing reference, above) or if you are ordering a brace for stock inventory, please select from the size option in the bottom left column. However, if you would prefer to have Townsend customize the assembly of your patient's brace at no addition charge please provide leg measurements beside the illustration in the right column.

Townsend Design

4615 Shepard St., Bakersfield, CA, 93313

Phone: 800.432.3466 or 661.837.1795; Fax: 800.798.2722