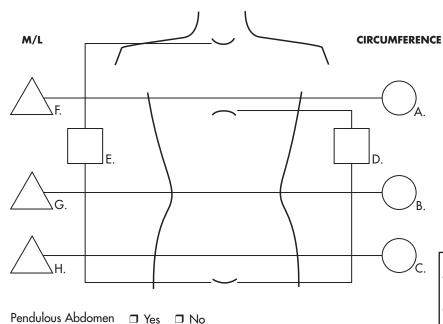


## CUSTOM-TO-MEASUREMENTS



MATERIAL

Lordosis

☐ Kydex<sup>®</sup> □ 3/32"

Polyethylene

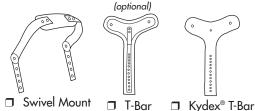
**□** 5/32" **3/16**"

LINER

□ Coalfoam<sup>®</sup>

■ White Volara/Aliplast

**Thoracic Extensions** 



LINEAR Spine of Scapula Inferior/Ang. Scapula Coccyx

**MEASUREMENT LEGEND** 

A = Circumference at Xyphoid Process

B = Circumference at Waist

C = Circumference at Hip

D = Length from Symphysis Pubis to Xyphoid (anatomical)

E = Length from Symphysis Pubis to Sternal Notch (anatomical)

F = Medial Lateral at Xyphoid Process

G = Medial Lateral at Waist

H = Medial Lateral at Hips

J = Length from Coccyx to Spine of Scapula

K = Length from Coccyx to Inferior Ang. Scapula

## **ORDER INFORMATION**

Now A	VAILABLE -	Lower	PRICED	5/32"	POLYETHYLENE
	<b>A</b> IR <b>B</b> ACK®	WITH <b>C</b> L	OSED C	ELL <b>F</b> OAM	1 LINER

Available: Prefabricated

**1**5

 $\Box$  0

Custom-to-Measurements

- Custom-to-Cast

**UPGRADES** 

- add .04TB suffix T-Bar add .04 suffix Swivel Mount Kydex® T-Bar - add .04KTB suffix Additional set of liners ☐ Part # 2113

Date:		P.O.#:			
Facility to	be billed:				
Phone:		Fax			
Date Req	uired:				
			On (Date)		
Contact:					
		IENT INFORMAT	ΓΙΟΝ		
Date:		_			
Patient N	ame:				
Age:	Sex:	Height:	Weight:		

Fax This Form to 800.638.9259 or Call 800.446.6770

E-mail:custserv@orthomerica.com http://www.orthomerica.com

Diagnosis:

