



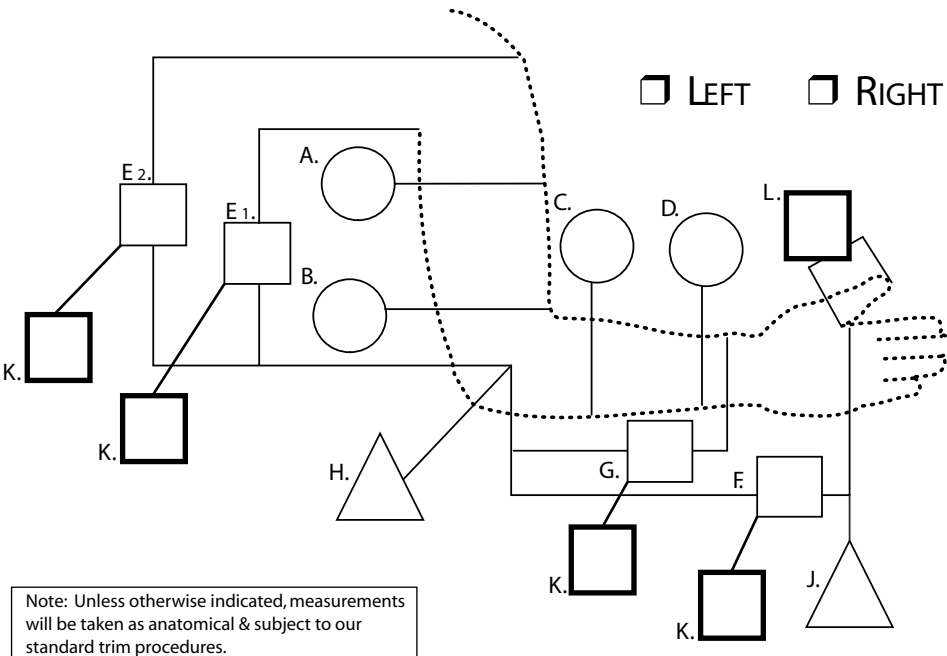
PRIME
(1140) **Elbow Orthosis**
(1110.50)

WHO
(1010.50) **WHTO**
(1000.50)

Humeral: **Fx (Universal)**
(1079.50) **Shoulder Type**
(1090.50) **Bivalve**
(1350.50)

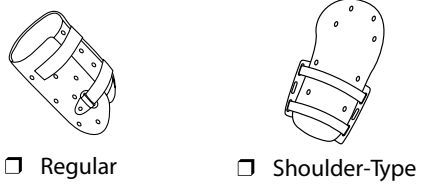
Ulnar: **Fx (Universal)**
(1050.50) **Bivalve**
(1030.50)

CUSTOM-TO-MEASUREMENTS



MEASUREMENT LEGEND	
A =	Circumference at Proximal Upper Arm
B =	Circumference at Distal Upper Arm
C =	Circumference at Proximal Forearm
D =	Circumference at Distal Forearm
E ₁ =	Length from Axilla to Elbow Center
E ₂ =	Length from Acromion Process to Elbow Center
F =	Length from Elbow Center to Mid Palm
G =	Length from Elbow Center to Styloid
H =	Caliper M/L at Elbow
J =	Palm Width
K =	FINISHED PLASTIC LENGTH
L =	THUMB LENGTH

UPPER ARM COMPONENTS



FOREARM COMPONENTS



UPGRADES

- Upgrade to Bilateral Adjustable Elbow Joints
(Standard includes adjustable lateral, non-adjustable medial joint.)
- Upgrade to Bilateral R.O.M. Wrist Joint
(adjustable lateral and medial joints.)

ORDER INFORMATION Account # _____

Date: _____ P.O.#: _____

Facility to be billed: _____

Ship to Address: _____

Phone: _____ Fax: _____

Date Required: _____

Ship via: _____ on (date) _____

Contact: _____

PATIENT / ID INFORMATION (PHI)

Date: _____

Patient Name: _____

Age: _____ Sex: _____ Height: _____ Weight: _____

Diagnosis: _____

Fax This Form to 800.638.9259
or Call 800.446.6770

