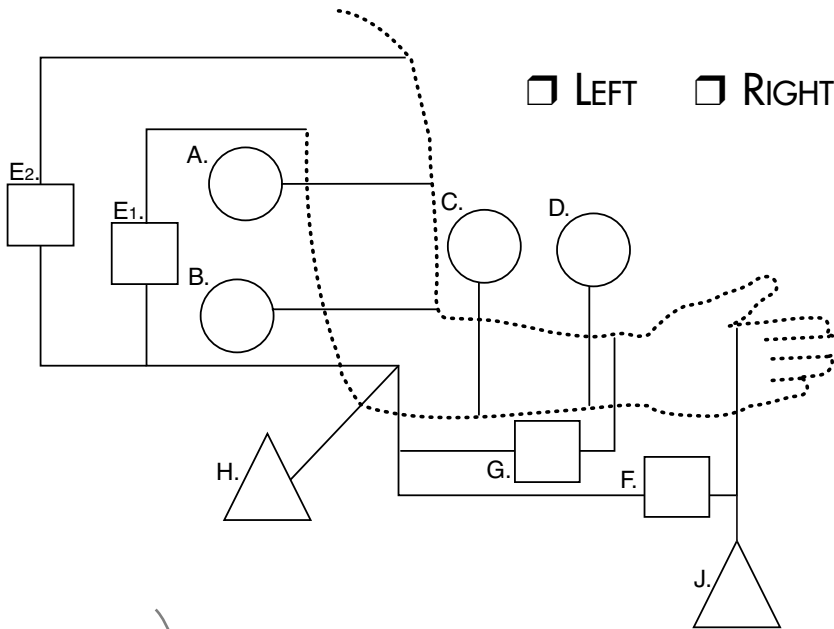
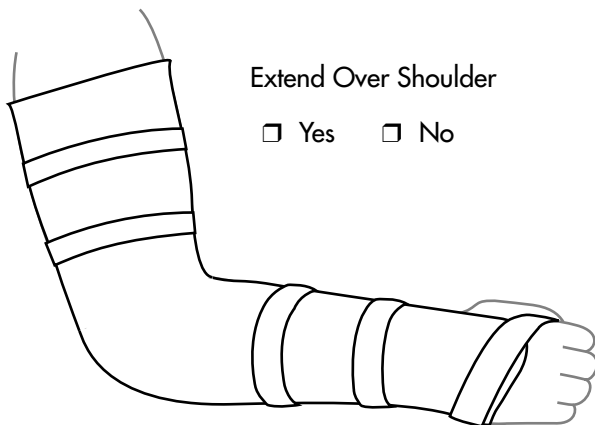


UPPER EXTREMITY CUSTOM-TO-CAST



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



Extend Over Shoulder

Yes No

Plastic: _____

Liner: _____

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.)
- Other _____

ORDER INFORMATION

Date: _____ P.O.#: _____

Facility to be billed: _____

Ship to Address: _____

Phone: _____ Fax: _____

Date Required: _____

Ship via: _____ on (date) _____

Contact: _____

PATIENT INFORMATION

Date: _____

Patient Name: _____

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

Diagnosis: _____

Includes 2 socks and

**Fax This Form to 877.737.8445
or Call 877.737.8444**

ORTHOMERICA[®]
THE GLOBAL ORTHOTIC SOLUTION.