

Facility Name _____ Account # _____ Contact: _____

Due Date: _____ Ship Via: _____ P.O. #: _____

Ship to Address: _____ City: _____

State: _____ Zip Code: _____ Phone: _____ Fax: _____ Email: _____

SIZE	WAIST MEASUREMENT	HIP MEASUREMENT	LSO LP MODEL #	LSO MODEL #	TLSO MODEL #	TLSO 3 PANEL MODEL #	TLSO LP 3 PANEL MODEL #	TLSO 4 PANEL MODEL #	TLSO LP 4 PANEL MODEL #
XS	26" - 32"	31" - 37"	ESLPXS	ESLSXS	ESTLXS	ESTL3XS	ESTP3XS	ESTL4XS	ESTP4XS
SM	30" - 36"	35" - 41"	ESLP SM	ESLS SM	ESTL SM	ESTL3 SM	ESTP3 SM	ESTL4 SM	ESTP4 SM
MD	34" - 40"	39" - 45"	ESLP MD	ESLS MD	ESTL MD	ESTL3 MD	ESTP3 MD	ESTL4 MD	ESTP4 MD
LG	38" - 44"	43" - 49"	ESLP LG	ESLS LG	ESTL LG	ESTL3 LG	ESTP3 LG	ESTL4 LG	ESTP4 LG
XL	42" - 48"	47" - 53"	ESLP XL	ESLS XL	ESTL XL	ESTL3 XL	ESTP3 XL	ESTL4 XL	ESTP4 XL
2X	46" - 52"	51" - 57"	ESLP 2X	ESLS 2X	ESTL 2X	ESTL3 2X	ESTP3 2X	ESTL4 2X	ESTP4 2X
3X	50" - 56"	55" - 61"	ESLP 3X	ESLS 3X	ESTL 3X	ESTL3 3X	ESTP3 3X	ESTL4 3X	ESTP4 3X
CHOOSE EDGE SL MODEL:									

COMPLETE:	SIZE	ABDOMEN	DEGREE OF LORDOSIS								
<input type="checkbox"/> XS	<input type="checkbox"/> SM	<input type="checkbox"/> MD	<input type="checkbox"/> LG	<input type="checkbox"/> XL	<input type="checkbox"/> 2X	<input type="checkbox"/> 3X	<input type="checkbox"/> NEUTRAL	<input type="checkbox"/> PENDULOUS	<input type="checkbox"/> 0	<input type="checkbox"/> 15	<input type="checkbox"/> 25
<input type="checkbox"/> XS	<input type="checkbox"/> SM	<input type="checkbox"/> MD	<input type="checkbox"/> LG	<input type="checkbox"/> XL	<input type="checkbox"/> 2X	<input type="checkbox"/> 3X	<input type="checkbox"/> NEUTRAL	<input type="checkbox"/> PENDULOUS	<input type="checkbox"/> 0	<input type="checkbox"/> 15	<input type="checkbox"/> 25
<input type="checkbox"/> XS	<input type="checkbox"/> SM	<input type="checkbox"/> MD	<input type="checkbox"/> LG	<input type="checkbox"/> XL	<input type="checkbox"/> 2X	<input type="checkbox"/> 3X	<input type="checkbox"/> NEUTRAL	<input type="checkbox"/> PENDULOUS	<input type="checkbox"/> 0	<input type="checkbox"/> 15	<input type="checkbox"/> 25
<input type="checkbox"/> XS	<input type="checkbox"/> SM	<input type="checkbox"/> MD	<input type="checkbox"/> LG	<input type="checkbox"/> XL	<input type="checkbox"/> 2X	<input type="checkbox"/> 3X	<input type="checkbox"/> NEUTRAL	<input type="checkbox"/> PENDULOUS	<input type="checkbox"/> 0	<input type="checkbox"/> 15	<input type="checkbox"/> 25
<input type="checkbox"/> XS	<input type="checkbox"/> SM	<input type="checkbox"/> MD	<input type="checkbox"/> LG	<input type="checkbox"/> XL	<input type="checkbox"/> 2X	<input type="checkbox"/> 3X	<input type="checkbox"/> NEUTRAL	<input type="checkbox"/> PENDULOUS	<input type="checkbox"/> 0	<input type="checkbox"/> 15	<input type="checkbox"/> 25

FRONT ONLY:	SIZE	ABDOMEN						
<input type="checkbox"/> XS	<input type="checkbox"/> SM	<input type="checkbox"/> MD	<input type="checkbox"/> LG	<input type="checkbox"/> XL	<input type="checkbox"/> 2X	<input type="checkbox"/> 3X	<input type="checkbox"/> NEUTRAL	<input type="checkbox"/> PENDULOUS
<input type="checkbox"/> XS	<input type="checkbox"/> SM	<input type="checkbox"/> MD	<input type="checkbox"/> LG	<input type="checkbox"/> XL	<input type="checkbox"/> 2X	<input type="checkbox"/> 3X	<input type="checkbox"/> NEUTRAL	<input type="checkbox"/> PENDULOUS

BACK ONLY:	SIZE	DEGREE OF LORDOSIS							
<input type="checkbox"/> XS	<input type="checkbox"/> SM	<input type="checkbox"/> MD	<input type="checkbox"/> LG	<input type="checkbox"/> XL	<input type="checkbox"/> 2X	<input type="checkbox"/> 3X	<input type="checkbox"/> 0	<input type="checkbox"/> 15	<input type="checkbox"/> 25
<input type="checkbox"/> XS	<input type="checkbox"/> SM	<input type="checkbox"/> MD	<input type="checkbox"/> LG	<input type="checkbox"/> XL	<input type="checkbox"/> 2X	<input type="checkbox"/> 3X	<input type="checkbox"/> 0	<input type="checkbox"/> 15	<input type="checkbox"/> 25

QUANTITY	PRODUCT CODE	DESCRIPTION	QUANTITY	PRODUCT CODE	DESCRIPTION
	ATBLADA	Pneumatic Bladder - Attached		OPTTHIGHCUFF-ATT	Thigh Cuff - Attached (XS, SM, MD, LG, XL, 2X, 3X)
	ATBLADU	Pneumatic Bladder - Unattached		OPTTHIGHCUFF-UNATT	Thigh Cuff-Unattached (XS, SM, MD, LG, XL, 2X, 3X)
	DLKW	Dorsal Lumbar Kit for SPK/PPK		TLCHIPJNT _ _	TLC Hip Joint - LG(Long), ST(Standard)
	DLKTESW	Dorsal Lumbar Kit w /Thoracic Extension Straps		Hip Spica:	<input type="checkbox"/> Right <input type="checkbox"/> Left <input type="checkbox"/> Attached
	ATPPKA / PPKU	Pectoral Pad Kit <input type="checkbox"/> Unattached			<input type="checkbox"/> Unattached <input type="checkbox"/> Hip Reinforcement
	ATPPXA / PPKU	Pectoral Pad Kit w / Ext <input type="checkbox"/> Unattached		Joint Type:	<input type="checkbox"/> Drop Lock: Becker <input type="checkbox"/> TLC Standard
	ATSPKA / SPKU	Sternal Pad Kit <input type="checkbox"/> Unattached			<input type="checkbox"/> TLC Long
	ATSPXA / SPXU	Sternal Pad Kit w / Ext <input type="checkbox"/> Unattached			

FAX THIS FORM TO (877) 288-4197

PHONE: 888-982-8181 • WWW.OPTECUSA.COM

Assembled By: _____

Inspected By: _____

Shipped By: _____