

Ordered by: \_\_\_\_\_ Phone # ( \_\_\_\_\_ ) \_\_\_\_\_

BILLING: P.O. Number \_\_\_\_\_ Townsend Account # \_\_\_\_\_

Bill To: \_\_\_\_\_

Ship To: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Fax: ( \_\_\_\_\_ ) \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Fax: ( \_\_\_\_\_ ) \_\_\_\_\_

 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 products directly to patients.

**Patient's Last Name:** \_\_\_\_\_

**Patient's First Name:** \_\_\_\_\_

☐ Male ☐ Female Age \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

**Leg:** ☐ Left ☐ Right

**Thigh Shell Length** ☐ 7 Inch ☐ 8 Inch

**Tibia Shell Length** ☐ 7 Inch ☐ 8 Inch

**Locking Position**

(if not indicated, zero degree lock position will be applied)

☐ Zero Degree Locking Position

☐ Five Degree Locking Position

**Options**
☐ Add Extension Assist Bands/Posts\*

Factory Installed Flexion Stop Kit (upon request)

☐ 30° ☐ 60° ☐ 90°

**Finish and 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

☐ **Anti-Migration Silicon Infused Strap Pads\***
**Undersleeves\***
☐ 18" Cotton ☐ 18" Neoprene ☐ 22" Neoprene

**Thigh Sleeves\***
☐ 1/16 Comfort Thigh Sleeve

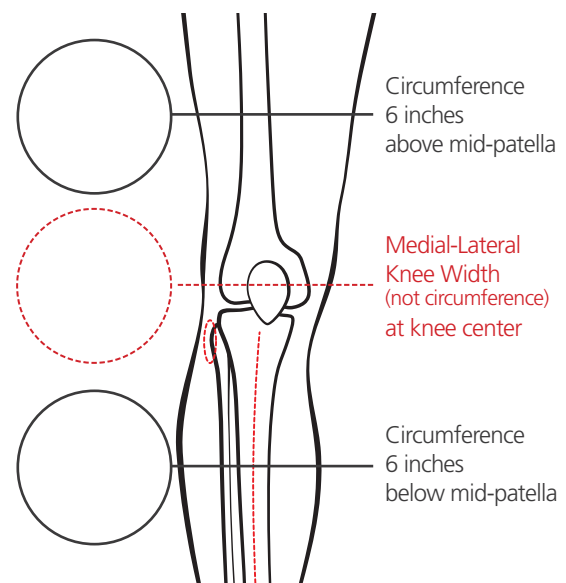
**Size**
☐ X-Small ☐ Small ☐ Medium ☐ Large ☐ X-Large

**Sizing Reference**

	6" above	M-L width	6" below
<b>X-Small</b>	12.5" to 15.5"	3" to 3.5"	11" to 12.5"
<b>Small</b>	15.5" to 18.5"	3.5" to 4"	12.25" to 13.75"
<b>Medium</b>	18.5" to 21"	4" to 4.5"	13.25" to 15"
<b>Large</b>	21" to 23.5"	4.5" to 5"	14.25" to 15.75"
<b>X-Large</b>	23.5" to 25"	5" to 5.5"	15" to 17"

**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 options. 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, below.



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 6:00 a.m. and 4:00 p.m. (PST).

\* Indicates additional charges apply

**Thuasne USA**

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Phone: 800.432.3466 or 661.837.1795; Fax: 800.798.2722

www.ThuasneUSA.com

 **TOWNSEND**  
THUASNE USA