



CUSTOM BRACE ORDER FORM

Please fax order form to (703)938-7004 ATTN: Derrick Campana, CO. An Animal Orthocare representative will call upon receipt of order form to ensure all orders are processed properly. Please allow 24 hours for response.

PATIENT INFORMATION

Payment info: CC Type: _____ Exp: _____
 CC# _____

Owner's Name: _____
 Phone Number (Day): _____
 (Evening): _____

Owners Address (Check box to Ship Brace here):

Pet Breed: _____
 Pet name: _____
 Color: _____ Age: _____ Weight: _____
 Temperament: _____
 Goals for your pet: _____

Referring Vet Name: _____

Vet Phone Number: _____

Vet Address (Check box to Ship Brace here):

Prior Surgeries: _____
 If yes, please explain: _____

Goals for brace: _____

ORDER INFORMATION

- Description of brace needed: _____
- Draw brace on model to the left.
- Draw an X on joints where ROM is needed.
- Range Of Motion: **Y** **N**
- Movement controlled:
 FLEXION EXTENSION HYPEREXTENSION LATERAL MOVEMENT
- Shipping method: Ground (no charge)
 2nd day 3rd day overnight (charges will apply)
- Brace Color: _____

***To select brace colors go animalorthocare.com (go to products, view brace colors). Click on each image to view choices.
Notice: some colors may be discontinued or temporarily unavailable. Plain colors also available.



CAST INSTRUCTIONS : Send mold to Specialized Orthopedic Services (ATTN: Animal Orthocare) 307-F Maple Ave W. Vienna, VA 22180

Place stockinette over affected limb - Place yellow cutting strip on front side of leg with groove facing up – Dip fiberglass casting material into cool water while wearing gloves – Wrap limb with 2 layers of casting material – Make sure to set angle of limb into most functional position – After cast has hardened, draw line down length of cutstrip – Use hook blade and carefully cut down line – Use scissors to cut through stockinette – Remove cast and write name of pet on it for reference. Call (703) 474-6204 for questions.