Momentum Health Technologies



17/34 Thynne St Bruce ACT 2617 Australia Hours of Operation Mon-Fri 8:30am – 5:00pm (AEDT)

T: (02) 6210 0066 E: info@momentumht.com.au

TLSO Order Form

| Ship To: | | Customer Account No.: |
|-----------|--|-----------------------|
| | | Purchase Order No.: |
| | | Ordered By: |
| Date Due: | | Contact Telephone: |
| Urgent? | *Rush orders may attract an additional fee | Pt. Name/Reference: |

| Pla | stic Type and Th | lickness | Strapping |
|----------------------------------|-----------------------|-----------|--|
| PolyPropylene | | | |
| 3 | 4 | 5 | Standard: 3x 38mm Velcro anterior straps |
| CoPoly | | | Other: Please Indicate position |
| 3.1 | 4.7 | | |
| PolyEthylene | | | |
| 3.1 | 4.7 | | |
| | Transfer Pape | er | Trimlines |
| *Please see our w | vebsite for available | transfers | *Please mark trimlines on cast or file |
| | | | Cut-Outs: Please indicate position |
| No Padding | Foam Paddin | g | Special Instructions |
| | | | |
| Spot Pressure Pag | dding | | |
| Thickness: Indicate Position: | 3 6 | 10 | |
| | | | |
| | | | |
| | | | |
| Full T-Foam Liner Thickness: | 3 6 | 10 | |

Please note: No responsibility will be taken by Momentum Health Technologies for inappropriate, incorrect or conflicting prescriptions. This may cause a delay in manufacturing until the information is clarified. Devices will be made to the specifications identified on this form.

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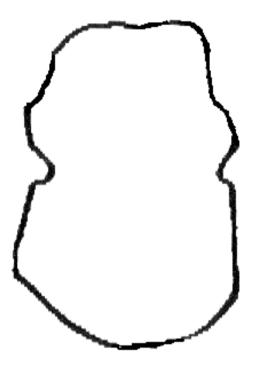


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Posterior View

Anterior View