

PHOENIX

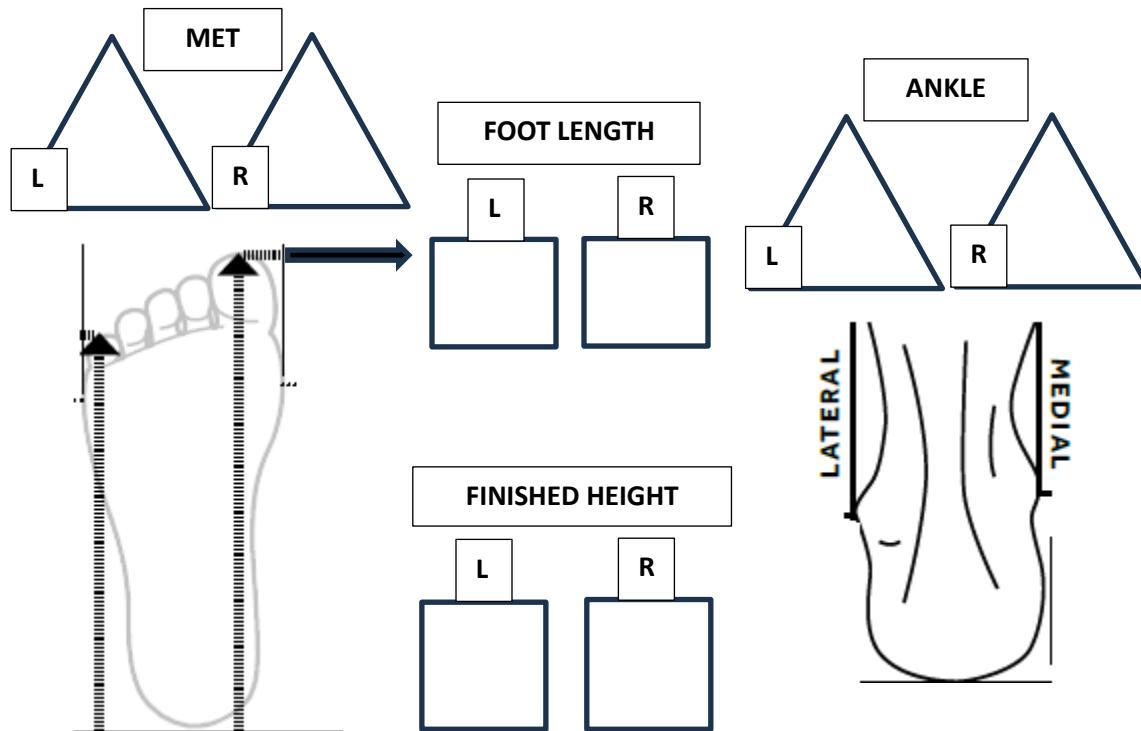
REQUIRED MEASUREMENT FORM FOR SCANNING AND CASTING

EMAIL ORDERS TO: BRACEORDERS@GMAIL.COM
IN SUBJECT LINE WRITE: "SCAN" THEN PURCHASE ORDER NUMBER

IF PATIENT PRESENTATION IS SYMMETRICAL ONLY ONE CAST/SCAN IS REQUIRED PLEASE
CHECK THE "MIRROR" BOX BELOW

QUESTIONS: PLEASE CALL 847-752-5728 AFTER HOURS 605-759-2902

SCANNED FROM PATIENT OR CAST



NOTE: PLEASE DO NOT ADD MORE THAN $\frac{3}{4}$ " TO THE FOOT LENGTH DOING SO CAN CREATE
FABRICATION ISSUES DIGITALLY AND CONVENTIONALLY