



FRIDDLE'S

ORTHOPEDIC APPLIANCES, INC.

12306 Belton Honea Path Hwy. Honea Path, SC 29654
 (800) 528-9339 Fax (800) 982-3646

Custom Spinal Order Form

Date: _____ Date Required _____

P.O. Number: _____

Ship To: _____

Customer: _____
(Bill to:) _____
Contact: _____
Phone: _____

BILL TO:

Cascade Orthopedic Supply
 2638 Aztec Drive • Chico, CA 95928

- UPS: Regular UPS: Next Day Air UPS 2 Day
 UPS: 3 Day Other _____

Patient Name _____ Sex _____ Height _____ Weight _____ Age _____

Diagnosis _____

- TLSO Scoliosis TLSO Post-OP Scoliosis CTLSO CTLSO

Brace Made To: Measurements Cast

Taken: Supine Standing

Opening/Type	Degree Lordosis	Material	Special	Other	Special CTLSO
Anterior	0° / 15° / 30°	Copolymer	Finished	Lumbar Pad	SS LP Neck Ring
Posterior	_____ °	LDPE	Blank	Left	Plastic LP Neck Ring
Bivalve	Abdominal Style	MPE	Strap Kit	Right	Throat Mold
__50/50	Flat	HDPE	Unlined	Thoraic Pad	Stainless Steel
__70/30	Full	Thickness _____	Lined	Left	Superstructure
__60/40	Pendulous	Color _____	Thickness _____	Right	Aluminum
Overlap	Paper Transfer	_____	_____	Kyphosis Pads	Superstructure
Lateral	Application	_____	_____	Waist Groove Pads	_____
Left	Style/Pattern	_____	_____	_____	_____
Right	_____	_____	_____	_____	_____

Special Considerations: _____

CIRC-LL MEASUREMENT INFORMATION

