

Patient Last Name:	Patient First Name: _
Fitter Last Name:	Fitter First Name:

Fitter Title: \_

Fitter First Name: \_\_\_\_\_ (example: PT/OT/PTA)

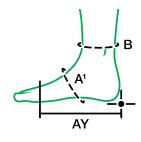
Date: \_\_\_\_

## 🗞 🔜 ReadyWrap<sup>™</sup> Foot SL Order Form

ReadyWrap Foot SL (sold individually)							
Size	Circumference		Length	Orientation	Qty.		
	A <sup>1C</sup>	Bc	AYL	- Orientation	Beige Black		
	21–24	18–23	16–19	Left			
Small				Right			
			19–22	Left			
				Right			
Medium	25-28	20-28	16–19	Left			
				Right			
			19–22	Left			
				Right			
Large	29–32	25-33	16–19	Left			
				Right			
			19–22	Left			
				Right			
X-Large	33–36	30–38	16–19	Left			
				Right			
			19–22	Left			
				Right			

## ReadyWrap<sup>™</sup> Foot SL

0:	Circumf	Length		
Size	A <sup>1C</sup>	Bc	AYL	
Regular				
Small	21–24 cm	18–23 cm		
Medium	25–28 cm	20–28 cm	- - 16–19 cm -	
Large	29–32 cm	25–33 cm		
X-Large	33–36 cm	30–38 cm		
Long				
Small	21–24 cm	18–23 cm		
Medium	25–28 cm	20–28 cm	- - 19–22 cm	
Large	29–32 cm	25–33 cm	- 19-22 CIII	
X-Large	33–36 cm	30–38 cm		



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