

BILL TO/PCC# _____

SHIP TO: _____

ADDRESS: _____

ADDRESS: _____

SAME AS BILLING

CLINICIAN: _____

PATIENT ID: _____ STOCK ONLY

CELL #: _____

Click here to email form > HFN_Arizona@Hanger.com CUSTOMER SERVICE PHONE: 480-894-1755

@	XX-SML (F5779)	@	CM	QTY:
+10"	14 1/4" - 16 1/4"	+25	36-41	Shipping <input type="checkbox"/> Next Day Air <input type="checkbox"/> 2 Day <input type="checkbox"/> Ground
+4"	11" - 14"	+10	28-36	
0"	11" - 14"	0	28-36	
-4"	12" - 14 1/2"	-10	30-37	
-6"	12" - 14 1/8"	-15	30-36	

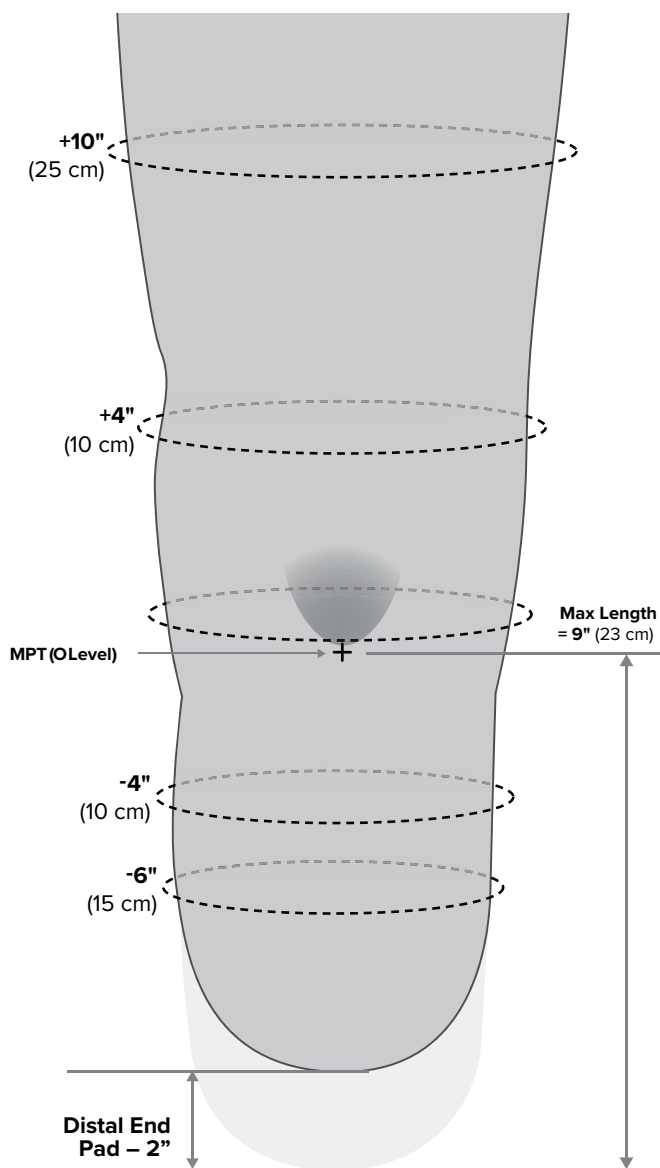
@	X-SML (F5780)	@	CM	QTY:
+10"	17 3/4" - 19 3/4"	+25	47-52	Shipping <input type="checkbox"/> Next Day Air <input type="checkbox"/> 2 Day <input type="checkbox"/> Ground
+4"	15 1/2" - 17 1/2"	+10	46-51	
0"	15" - 16"	0	44-49	
-4"	14 3/4" - 16"	-10	42-47	
-6"	15 1/8" - 16 1/8"	-15	38-43	

@	SML (F5781)	@	CM	QTY:
+10"	18 7/8" - 20 7/8"	+25	48-53	Shipping <input type="checkbox"/> Next Day Air <input type="checkbox"/> 2 Day <input type="checkbox"/> Ground
+4"	12 1/2" - 17 1/2"	+10	39-44	
0"	16" - 17"	0	41-43	
-4"	15 3/4" - 16 3/4"	-10	40-43	
-6"	16 1/8" - 17 1/8"	-15	41-44	

@	MED (F5782)	@	CM	QTY:
+10"	19 1/2" - 21 1/2"	+25	50-55	Shipping <input type="checkbox"/> Next Day Air <input type="checkbox"/> 2 Day <input type="checkbox"/> Ground
+4"	17 5/8" - 19 5/8"	+10	44-50	
0"	17" - 18"	0	43-46	
-4"	16 3/4" - 17 3/4"	-10	43-45	
-6"	17 1/8" - 18 1/8"	-15	44-46	

@	LRG (F5783)	@	CM	QTY:
+10"	21 1/4" - 21 1/2"	+25	54-62	Shipping <input type="checkbox"/> Next Day Air <input type="checkbox"/> 2 Day <input type="checkbox"/> Ground
+4"	17 5/8" - 19 5/8"	+10	44-50	
0"	17" - 18"	0	43-46	
-4"	16 3/4" - 17 3/4"	-10	43-45	
-6"	17 1/8" - 18 1/8"	-15	44-46	

SIZING SPECIFICATIONS (IN/CM)
Measure circumference proximal and distal from MPT level



- Length from MPT to distal cone = 9" (23 cm)
- Adjust to patient's length with distal pad as needed

TURNAROUND TIMES

To review current projected turnaround times for fabrication sites visit the [Daily HFN Capacity Webpage](#).