

PARTIAL HAND SILICONE INTERFACE ONLY HEN PHOENIX ONLY

WORK ORDER #: (LAB USE ONLY)

PCC #:	CLINICIAN:		
BILL TO:	CELL #:		
ADDRESS:	PATIENT ID:		
	HEIGHT: WEIGHT: AGE:		
SHIP TO: SAME AS BILLING	☐ MALE ☐ FEMALE ☐ BILATERAL		
ADDRESS:	NG ENCOUNTER #:		
SHIPPING: ☐ GROUND (FXGD) ☐ STANDARD 2 DAY (FX2D)	MEASUREMENT DATE:		
OVERNIGHT: ☐ PRIORITY (FX1D) ☐ 1st OVERNIGHT (FX1A)	IN-OFFICE REQUEST DATE & TIME:		
OTHER:	PROJECT NEWTON (Credit applied on prior auth. denial, details on One Hanger)		
DESIGN INPUT REQUIREMENTS □ BODY DOUBLE OR P386 (GRAY) IMPRESSION MATE □ MOLD FROM THE DISTAL TIP OF FINGERS TO THE COMPONION OF THE COMPONI	UBITAL FOLD ROM VIDEO PHOTOS		
DESIGN OPTIONS	SILICONE ONLY LEFT RIGHT BILATERAL		
	-		
■ M FINGERS □ LEFT □ RIGHT □ BILATERAL	FINGER EXTENSION		
	FINGER EXTENSION		
■ M FINGERS □ LEFT □ RIGHT □ BILATERAL			
■ M FINGERS □ LEFT □ RIGHT □ BILATERAL □ FULL DIGIT(S): □ 2/IDX □ 3/MID □ 4/RG □ 5/PKY	☐ FULL DIGIT(S): ☐ 2/IDX ☐ 3/MID ☐ 4/RG ☐ 5/PKY		
M FINGERS □ LEFT □ RIGHT □ BILATERAL □ FULL DIGIT(S): □ 2/IDX □ 3/MID □ 4/RG □ 5/PKY □ PRTL DIGIT(S): □ 2/IDX □ 3/MID □ 4/RG □ 5/PKY □ THUMB	☐ FULL DIGIT(S): ☐ 2/IDX ☐ 3/MID ☐ 4/RG ☐ 5/PKY ☐ PRTL DIGIT(S): ☐ 2/IDX ☐ 3/MID ☐ 4/RG ☐ 5/PKY		
M FINGERS □ LEFT □ RIGHT □ BILATERAL □ FULL DIGIT(S): □ 2/IDX □ 3/MID □ 4/RG □ 5/PKY □ PRTL DIGIT(S): □ 2/IDX □ 3/MID □ 4/RG □ 5/PKY □ THUMB TITAN FINGERS □ LEFT □ RIGHT □ BILATERAL	☐ FULL DIGIT(S): ☐ 2/IDX ☐ 3/MID ☐ 4/RG ☐ 5/PKY ☐ PRTL DIGIT(S): ☐ 2/IDX ☐ 3/MID ☐ 4/RG ☐ 5/PKY ☐ THUMB		
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M FINGERS □ LEFT □ RIGHT □ BILATERAL □ FULL DIGIT(S): □ 2/IDX □ 3/MID □ 4/RG □ 5/PKY □ PRTL DIGIT(S): □ 2/IDX □ 3/MID □ 4/RG □ 5/PKY □ THUMB TITAN FINGERS □ LEFT □ RIGHT □ BILATERAL	□ FULL DIGIT(S): □ 2/IDX □ 3/MID □ 4/RG □ 5/PKY □ PRTL DIGIT(S): □ 2/IDX □ 3/MID □ 4/RG □ 5/PKY □ THUMB □ WRIST DISARTICULATION □ TRANS RADIAL		
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M FINGERS LEFT RIGHT BILATERAL FULL DIGIT(S): 2/IDX 3/MID 4/RG 5/PKY 7/PKT DIGIT(S): 2/IDX 3/MID 4/RG 5/PKY 7/PKT	FULL DIGIT(S): 2/IDX 3/MID 4/RG 5/PKY PRTL DIGIT(S): 2/IDX 3/MID 4/RG 5/PKY THUMB TRANS RADIAL TRANS HUMERAL SHOULDER DIS. SILICONE SOCKET LEFT RIGHT BILATERAL VALVE TYPE: NO VALVE AK LYN VALVE PEE WEE LYN VALVE OTHER PULL TUBE FINISH OPTIONS SILICONE COLORS		
M FINGERS LEFT RIGHT BILATERAL FULL DIGIT(S): 2/IDX 3/MID 4/RG 5/PKY 7/PKT DIGIT(S): 2/IDX 3/MID 4/RG 5/PKY 7/PKT	FULL DIGIT(S): 2/IDX 3/MID 4/RG 5/PKY PRTL DIGIT(S): 2/IDX 3/MID 4/RG 5/PKY THUMB TRANS RADIAL TRANS HUMERAL SHOULDER DIS. SILICONE SOCKET LEFT RIGHT BILATERAL VALVE TYPE: NO VALVE AK LYN VALVE PEE WEE LYN VALVE OTHER PULL TUBE FINISH OPTIONS SILICONE COLORS BLACK SKIN TONE - CALL FOR OPTIONS		
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M FINGERS LEFT RIGHT BILATERAL FULL DIGIT(S): 2/IDX 3/MID 4/RG 5/PKY 7/PKT DIGIT(S): 2/IDX 3/MID 4/RG 5/PKY 7/PKT	FULL DIGIT(S): 2/IDX 3/MID 4/RG 5/PKY PRTL DIGIT(S): 2/IDX 3/MID 4/RG 5/PKY THUMB TRANS RADIAL TRANS HUMERAL SHOULDER DIS. SILICONE SOCKET LEFT RIGHT BILATERAL VALVE TYPE: NO VALVE AK LYN VALVE PEE WEE LYN VALVE OTHER PULL TUBE FINISH OPTIONS SILICONE COLORS BLACK SKIN TONE - CALL FOR OPTIONS		

EMAIL OR SHIP PROJECT/DETAILS TO: HFN_PARTIALHAND@HANGER.COM

HFN PHOENIX

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ADDITIONAL PROJECT DETAILS CAN BE PROVIDED ON PAGE 2

TURNAROUND TIMES



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NOTES			