	Patient: Last Name:			_ FIISUNAIII	First Name		
Still Me Inc Fitting Designs	Fitter:						
Still Me Medical	Fitter Title:			_ (example: PT/OT/PTA)			
info@stillmeinc.com	Date:						
_							
Caresia [™] Order Fo	orm	225-27	′3-1900 · F	ax: 225-2	273-5555		
2 Measurements (All measurements in centimeters)	(All m	ducts easurements in c	centimeters)				
	Caresia	Foot (sold ind	dividually)				
			Circumference		Length		
	Size		Bc		AY ^{L*}	Qty.	
Left Right Left	Right	Small	22–28	-	20-25		
		ledium	28-34		25-30		
			34-40		30-35		
			ngest toe to heel.		00.00		
	ATIST	Sin tip of the lo	ngest loe to neel.				
	Caresia	Below Kne	Ə(sold individually)				
			Circumference		Length		
\ /	Size		Bc	Cc	YD ^L	Qty.	
					35–41		
	Sma	11	22–28 30–40		41–47		
					47–53		
·					35–41		
	Medi	um	28-34 40-52		41-47		
			20 01	10 02	47–53		
3°=					35–41		
	Larg	10	34-40	52-62	41-47		
		je	34-40	02-02	47–53		
					47-55		
	Caresia	Thigh (sold in	ndividually)				
	Sizo		Circumference		Length	Otv	
AYL	Size		G¢		DGL	Qty.	
					up to 23–28		
		Small	45-65		up to 28–33		
4 Shipping					up to 33–38		
□Ground □2nd Day □Overnig	ht				up to 23–28		
		ledium	65–85		up to 28–33		
Ship to	—				up to 33–38		
					up to 23–28		
Attn		_arge	85–99.9		up to 28–33		
		-			up to 33–38		
Street					· · ·	1	
City							
ony							
State/Province Zip/Postal code							
	1 1						
Phone							

All measurements in centimeters