

Ordered by: _____
 BILLING: P.O. _____
 Number Bill To: _____
 Address: _____
 City: _____
 Prov: _____ Postal Code: _____ Country: _____
 Phone: (_____) _____ Fax: (_____) _____

Phone # (_____) _____
 Account # _____
 Ship To: _____
 Address: _____
 City: _____
 Prov: _____ Postal Code: _____ Country: _____
 Phone: (_____) _____ Fax: (_____) _____

Shipping Preference: Ground Express

For more product information, please reference the catalog or website: www.bmiortho.com

SLEEQ Spinal Bracing

SLEEQ LSO Universal Size			
Item #	Description	L-codes (CF/OTS)	Qty.
<input type="checkbox"/> 901100	SLEEQ AP (anterior-posterior) lumbar-sacral orthosis	L0627 / L0642	
<input type="checkbox"/> 901200	SLEEQ AP+ (anterior-posterior) lumbar-sacral orthosis	L0631 / L0648	
<input type="checkbox"/> 901300	SLEEQ APL (anterior-posterior-lateral) lumbar-sacral orthosis	L0637 / L0650	
<input type="checkbox"/> 901070	SLEEQ EXT (extension panel for waist sizes 54" - 62")		


SLEEQ AIR LSO Universal Size			
Item #	Description	L-codes (CF/OTS)	Qty.
<input type="checkbox"/> 901510	SLEEQ AIR AP (anterior-posterior) lumbar-sacral orthosis	L0627 / L0642	
<input type="checkbox"/> 901530	SLEEQ AIR AP+ (anterior-posterior) lumbar-sacral orthosis	L0631 / L0648	
<input type="checkbox"/> 901550	SLEEQ AIR APL (anterior-posterior-lateral) lumbar-sacral orthosis	L0637 / L0650	
<input type="checkbox"/> 901500	SLEEQ AIR EXT (extension panel for waist up to 60")	N/A	

SLEEQ TLSO Universal Size			
Item #	Description	L-codes (CF/OTS)	Qty.
<input type="checkbox"/> 901400	SLEEQ FLEX (anterior-posterior TLSO)	L0456 / L0457	
<input type="checkbox"/> 901600	SLEEQ MAX (anterior-posterior, rigid control TLSO)	L0464	
<input type="checkbox"/> 901670	SLEEQ MAX EXT (extension panel for waist sizes 54" - 62")		

ACCESSORIES			
Item #	Description		Qty.
<input type="checkbox"/> 901050	SLEEQ ANTERIOR PANEL		
<input type="checkbox"/> 901060	SLEEQ LATERAL PANELS (2)		
<input type="checkbox"/> 950200	Q°THERMO COMFOWRAP cold/heat pack		

Please complete and fax this form to 1.877.527.1911 (24-hours a day). If you are calling in your order, this form indicates the options and information that will be required by our staff. For phone orders, please call 1877.222.3311 between 6:00 a.m. and 4:00 p.m. (PST).

5545 St. Jacques O. Montreal, QC H4A 2E3
 O: 514. 369. 3311

Toll Free / Sans Frais : 1.877.222.3311  Fax Toll Free / Telec Sans Frais : 1.877.527.1911
www.bmiortho.com