

Your physician has prescribed the Aircast Cryo/Cuff™ IC as part of your recovery program.

The therapeutic effects of compressive cold are recognized by practitioners, as well as patients, as a useful method for reducing the symptoms of pain and swelling while providing comfort following trauma or surgery.

Further, the use of compressive cold has been proven to reduce the need for narcotics and helping accelerate rehabilitation.

What is the Aircast Cryo/Cuff IC?

The Cryo/Cuff IC is a post-operative device that provides automated compression and cold therapy to help treat swelling and pain.



BetterBraces.com
P.O. Box 223, Louisiana, MO 63353

Phone: 800-553-6019
Fax: 760-683-6937

Email: ColdTherapy@BetterBraces.com

You confirm, as purchaser of the Cold Therapy Unit ("Unit") and/or Pads, that you are a patient of, and currently under the treatment of, the physician listed under "Physician Authorization" on this Cold Therapy Order Form ("Form"). The Unit information contained in this Form is not a substitute for the Operating Instructions that are to be provided with the Unit. You acknowledge that you must carefully read and follow the Operating Instructions that are to be provided with the Unit before your use. You acknowledge that your use of the Unit must be under the supervision of a licensed healthcare professional who will select your treatment temperature parameters. You acknowledge that you must immediately contact your physician for medical treatment advice if you experience any discomfort when using the Unit. Extreme care must be taken when using any cryotherapy as it may cause cold injury and/or frostbite when improperly used. You are aware that BetterBraces.com is a distributor for the manufacture of this product and assumes no responsibility for any injury caused due to malfunction, misuse, inappropriate application, or any other reason. BetterBraces.com cannot provide details as to the product's application or use, other than what is provided in the product instructions, developed by the manufacturer of this product.

© 2009 DJO, LLC

00-0823 Rev A

AIRCRAFT
DJOglobal.com

Order Form For
Aircast Cryo/Cuff™ IC

STEPS FOR ORDERING

1 Fill out your credit card and shipping information below.

2 Obtain your physician's authorization signature on this order form.

3 Fax this form with physician's information, physician signature and credit card information to **1-760-683-6937**.

BETTERBRACES.COM COLD THERAPY ORDER FORM

Fax Order to 760-683-6937

To receive the Cryo/Cuff™ IC, complete this form. Your credit card will be billed for the unit plus shipping and applicable sales tax. This order must have a physician's authorization. For questions please call BetterBraces.com Customer Service at **800-553-6019**.

Name (as it appears on credit card)

Billing Address (as it appears on credit card)

City State Zip

Shipping Address

City State Zip

Email

Phone

PAYMENT – CREDIT CARD ONLY (check one):

MasterCard Visa American Express Discover

Credit Card Number

Expiration Date

Signature*

* My signature indicates that the information I have provided above is true and accurate. My signature also indicates that the information included in the physician authorization section was completed by my health care provider and is being prescribed for me as part of a treatment protocol established by my provider. I further understand that BetterBraces.com will not bill my insurance company for this product and that I am responsible for payment in full. If I am a Medicare patient, I understand that Medicare does not reimburse for this product, that BetterBraces.com will not bill Medicare, and that I am responsible for payment in full.

Aircast Cryo/Cuff™ IC COLD THERAPY PRESCRIPTION



Knee Cryo/Cuff
(Includes Cryo/Cuff IC)



Shoulder Cryo/Cuff
(Includes Cryo/Cuff IC)



Ankle Cryo/Cuff
(Includes Cryo/Cuff IC)



Back/ Hip/ Rib Cryo/Cuff
(Includes Cryo/Cuff IC)

Check Appropriate Boxes		Quantity	\$119.99 Each
Each Selection Includes an Cryo/Cuff IC Cooler			
<input type="checkbox"/> Cryo/Cuff IC w/ Ankle	51A10A		
<input type="checkbox"/> Cryo/Cuff IC w/ Knee, Med	51A11A		
<input type="checkbox"/> Cryo/Cuff IC w/ Knee, Large	51A11B		
<input type="checkbox"/> Cryo/Cuff IC w/ Shoulder	51A12A		
<input type="checkbox"/> Cryo/Cuff IC w/ Back, Hip and Rib	51A14A		
Shipping (see shipping chart)			
CA Residents Add 8.75% Sales Tax			
Total			

Physician Authorization

I authorize the use of the AirCast Cryo/Cuff IC unit for this patient.

Patient Name

Patient Date of Birth

Physician Name (please print) NPI #

Physician Address

Physician Phone Number

Physician Signature* Date

* My signature above means that, in my judgment, the above prescribed product is medically indicated and necessary, and consistent with current accepted standards of medical practice and treatment of this patient's physical condition.

Shipping Chart

Standard Ground Shipping	\$10
2nd Business Day*	\$15
Overnight-Next Business Day*	\$20

*Orders must be received by 2:00 EST



For additional Aircast Cryo/Cuff Therapy products and other items, please visit www.BetterBraces.com.

Cryo/Cuff™ IC Cryo Therapy

Aircast offers a variety of Cryo/Cuffs to provide cold therapy to various areas of the body.



Knee Cryo/Cuff



Shoulder Cryo/Cuff



Ankle Cryo/Cuff



Back/ Hip/ Rib Cryo/Cuff

The Cryo/Cuffs are anatomically designed to provide complete coverage for treatment of swelling and pain.

Tear and Fax