



3508 East Main Street, Morgantown, PA 19543

Phone: 610-286-0018 • Fax: 610-286-0021

Email: [info@mypetsbrace.com](mailto:info@mypetsbrace.com)

Thank you for contacting My Pet's Brace. We look forward to helping your dog/patient walk and play comfortably again with the help of a custom brace. An effective custom brace starts with the creation of a well-formed cast taken by a veterinarian or rehabilitation professional.

If the veterinarian or rehabilitation facility does not have the materials to make the fiberglass cast, a casting kit may be ordered from the My Pet's Brace website or by calling 610-286-0018.

**Please follow the process below:**

- Step 1:** Veterinarian or rehabilitation professional reads the casting instructions below and watches the *Carpal Brace Casting Tutorial* video at [mypetsbrace.com/casting-videos](http://mypetsbrace.com/casting-videos).
- Step 2:** Veterinarian or rehabilitation professional takes a cast of the dog's leg.
- Step 3:** Veterinarian or rehabilitation professional completes the *Carpal Brace Order Form*.
- Step 4:** Mail the cast and *Carpal Brace Order Form* to My Pet's Brace in Morgantown, PA (address above).
- Step 5:** Once the cast is received, My Pet's Brace calls the purchaser of the brace to take payment and provide the specific date the brace will be completed and shipped from our facility.
- Step 6:** Veterinarian or rehabilitation professional fits the brace on the dog. Read the Fit and Care Instructions included with the brace.

Braces are fabricated in 5 business days and include a no-hassle 120 day warranty. Because our devices are custom-made and will not fit any other pet, no refunds can be offered by My Pet's Brace. Visit our website for more information.

## CARPAL BRACE CASTING INSTRUCTIONS



1 Watch *Carpal Brace Casting Tutorial* video at [www.mypetsbrace.com/casting-videos](http://www.mypetsbrace.com/casting-videos).

The casting procedure for a custom brace is a different process than casting for a broken bone, disease or injury.



2 Have a helper sit on the opposite side of the dog's injured leg. The helper will hold the stockinet and rubber tubing cutting strip with one hand and support the dog from sitting with the other hand underneath the dog's belly. Position the dog in a normal/corrected standing position, with the dog's paw flat on the ground (90° angle). If there is a contracture, cast the leg in the most functional position. There is no need to sedate the dog (unless there are extreme circumstance).



3 Have a bowl of lukewarm water, a sharp utility knife, a pair of bandage scissors and a marker readily available.



4 Hold the casting tape underwater for 10 seconds, then squeeze water out three times.



Start the cast by quickly wrapping the tape distally, then cover the entire paw and move up the leg to just below the elbow. Overlap each layer no more than 2-3 times, cutting off any excess tape not needed. Do not squeeze paw together.



Mold the tape to conform to bony prominences. Massage the layers together.



Use the permanent marker to trace the rubber tubing. Draw several hash marks perpendicular to the rubber tubing line.



Use the utility knife to cut the cast off before the casting tape completely hardens (less than 4 minutes). Do not wait too long. Cast will still be a little soft.



Remove the rubber tubing cutting strip. Cut the stockinet off with the bandage scissors and remove the cast from the dog's leg.



Tape or rubber band the cast together without deforming the cast. Write the dog's name on the cast.



Complete the *Carpal Brace Order Form* and record all measurements in centimeters using a soft tape measure. Length Measurement 1 – elbow joint to carpal joint



Length Measurement 2 – carpal joint to floor



Length Measurement 3 – length of paw, include nails



Circumference Measurement 1 – at elbow joint



Circumference Measurement 2 – at mid forearm



Circumference Measurement 3 – at carpal joint



On the back of the *Carpal Brace Order Form*, take a tracing of the dog's paw while the dog is standing.



Email a side view picture of the dog while he/she is standing. Take the picture at dog's eye level. Do not take the picture while the cast is on the dog's leg.



Mail cast and *Carpal Brace Order Form* to:

My Pet's Brace  
3508 East Main Street  
Morgantown, PA 19543



Mail This Form & The Dog's Cast To:  
 My Pet's Brace  
 3508 E Main St, Morgantown, PA 19543

### CARPAL BRACE ORDER FORM

**READ INSTRUCTIONS ON PAGES 1 & 2. THIS PAGE IS TO BE COMPLETED BY THE VET/REHAB. EMAIL A SIDE VIEW PICTURE OF THE DOG STANDING TO [INFO@MYPETSBRACE.COM](mailto:INFO@MYPETSBRACE.COM). ON THE BACK OF THIS PAPER, TAKE A TRACING OF THE DOG'S PAW.**

<b>Pet Name:</b>		Breed:		Weight:	lbs
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Neutered/Spayed		Age:		Affected Side/Brace For: <input type="checkbox"/> Left <input type="checkbox"/> Right	
Body Condition Score: <input type="checkbox"/> 1 (Too Thin) <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 (Ideal) <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 (Too Heavy)					
Diagnosis:			Notes/Other Instructions:		
Cast Taken While Dog Was: <input type="checkbox"/> Standing <input type="checkbox"/> Laying Down					
<b>Device Requested:</b>					
<input type="checkbox"/> Carpal Brace with Joints at Carpal		<input type="checkbox"/> Carpal Brace without Joints			
<input type="checkbox"/> Carpal Brace with Joints at Paw		<input type="checkbox"/> Below Carpal Brace			
<input type="checkbox"/> Carpal Brace with Joints at Carpal & Paw (\$150+)		<input type="checkbox"/> Add Anterior Shell			
<b>Length Measurements In CM</b>			<b>Circumference Measurements In CM</b>		
Elbow Joint to Carpal Joint:		At Elbow Joint:			
Carpal Joint to Floor:		At Mid Forearm:			
Length of Paw (Including Nails):		At Carpal Joint:			
<b>Brace Color (See Color Chart):</b>					
Clinic Name:				Date:	
Street:		City:		State:	Zip:
Phone:		Email:			
<b>Practitioner Name (Print):</b>			<b>Practitioner Signature:</b>		
Owner Name (Print):			<b>Owner Signature:</b>		
Street:		City:		State:	Zip:
Phone:		Email:			
Warranty: My Pet's Brace will repair or replace straps, liners, pads, buckles or soling for no charge within 120 days after you receive the brace. My Pet's Brace will repair or replace the plastic superstructure and mechanical hinges for no charge if they fail from defect within one year. Because devices are custom-made for each patient and will not fit any other animal, no refunds, returns or exchanges can be offered by My Pet's Brace. <u>By signing above</u> , I understand and agree to the My Pet's Brace warranty and no refunds policy.					
Fabrication Time: <input type="checkbox"/> Standard: 5 business days <input type="checkbox"/> Expedite: 2 business days - additional \$150/brace					
Ship Completed Brace To: <input type="checkbox"/> Pet Owner <input type="checkbox"/> Vet/Rehab Facility					
Shipping Method (Shipping of completed brace to owner/vet)					
USA:	<input type="checkbox"/> UPS Ground – Free	<input type="checkbox"/> 2 Day*	<input type="checkbox"/> 3 Day*	<input type="checkbox"/> Next Day*	*Fees Apply
Canada:	<input type="checkbox"/> UPS 2-5 business days (≈\$40)		<input type="checkbox"/> UPS 1-3 business days (≈\$45)		
International:	<input type="checkbox"/> UPS 2-5 business days (≈\$90)		<input type="checkbox"/> UPS 1-3 business days (≈\$110)		
Who To Bill: <input type="checkbox"/> Pet Owner <input type="checkbox"/> Vet/Rehab Facility					
Store Credit Card Number For Future Charges (Straps/Repairs): <input type="checkbox"/> Yes <input type="checkbox"/> No					
Credit Card: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/> Amex <input type="checkbox"/> Care Credit <input type="checkbox"/> Scratchpay					
Card Number:		Exp Date:		Security Code:	
Providing credit card information authorizes My Pet's Brace to charge your card for the brace plus any applicable shipping charges. Credit card information can also be given over the phone when My Pet's Brace calls the brace purchaser confirming the cast has been received at our facility. Production of the brace begins once full payment has been received. If paying by check, mail check with this form.					
Billing Address If Different From Above:					

# PAW TRACING



## COLOR CHART

### Solid Colors

White	Tan	Yellow	Orange
Light Pink	Neon Pink <small>*only for dogs under 130 lbs</small>	Red	Teal
Green	Dark Green	Purple	Light Blue
Royal Blue	Navy Blue	Brown	Black

### Patterns

Zebra* <small>*background can be any solid color, ie zebra on neon pink</small>	Pirates* <small>*pirates can be any solid color, ie green pirates</small>	Sugar Skulls (background is navy)	Yellow/Orange Swirl
Pink Camo	Purple Splash	Sharks	Starry Night
Blue Swirl	Graffiti	Green Raindrops	Tie Dye
Wood Grain	Red/Brown Dog Hair	Leopard	Woodland
Camo	Carbon Fiber	Cosmos	Flags

Colors may appear different in person. Choice of colors are subject to change depending on availability.