



Upper Body Orthosis
Custom Measurement Form

Date _____

Name (Patient) _____ Age _____

Contact Name _____

Contact Phone _____ Contact Email _____

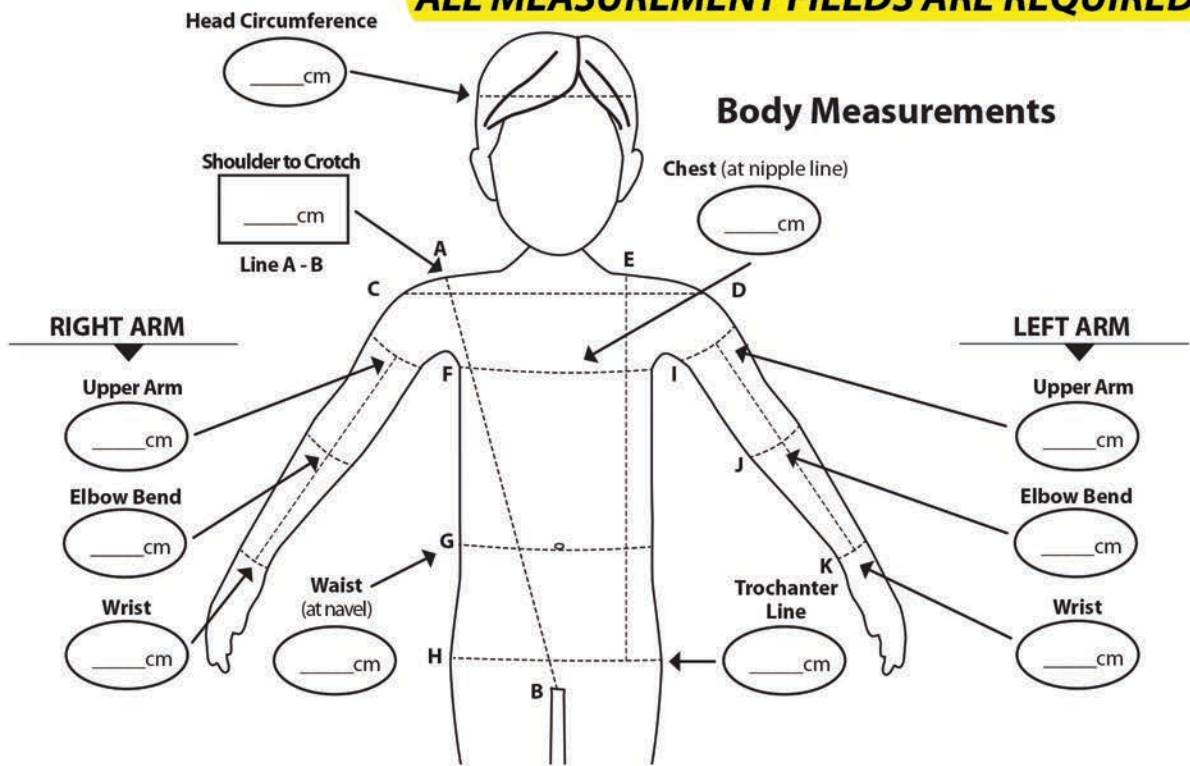
Measurement Key

Length =

Circumference =

Instructions: Measure child laying down. Measure elbow circumference at 15 degrees flexion. Measure in centimeters. Measure both arms. Measure over diaper or underwear. Measure on top of the torso, not on the side.

ALL MEASUREMENT FIELDS ARE REQUIRED



Shoulder Tip to Shoulder Tip
 cm
Line C - D

Shoulder to Chest (nipple line)
 cm
Line E - F

Shoulder to Waist
 cm
Line E - G

Shoulder to Trochanter
 cm
Line E - H

Upper Arm to Elbow Bend
 cm
Line I - J

Elbow Bend to Wrist
 cm
Line J - K

Product Measurements

cm Armpit to Shirt End
Line F - H

Sleeve Inseam Length

cm Long Sleeve Short Sleeve

Neck Closure

Zipper
 Velcro
 None

Quantity

Additional Information

Color Black Blue White

Abdominal Reinforcement Yes No

Please include a copy of the order form along with your custom measurement form.