



CUSTOM RIGID SPINAL ORDER FORM

800-813-8139 Fax
800-922-5155 Voice

DATE: _____ TIME: _____
 ORDERED BY: _____
 P.O. #: _____ DATE NEEDED: _____
 SHIP TO FACILITY _____
 STREET ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 PHONE # _____
 OTHER # _____
 SAME DAY FED EX GROUND BY 8:30 AM
 NEXT DAY FED EX BY 10:30 AM
 SECOND DAY DELTA DASH BY 12:00 PM
 THIRD DAY COURIER BY 3:00 PM

PATIENT NAME: _____
 AGE _____ SEX _____ HT. _____ WT. _____
 MEASUREMENTS TAKEN: SUPINE / STANDING / SITTING
 DIAGNOSIS: _____
 SPECIAL CONSIDERATIONS: _____

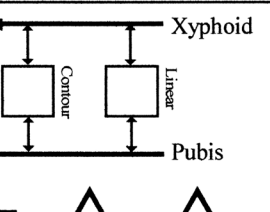
SHORT LONG SL / CONTOUR NEUTRAL LORDOSIS

 0 / 5 / 10 / 15 / 20
 Other _____

TYPE: TLSO / LP / HP / LSO PROMINENT RIBS: Yes / No
 OPENING: ANT / POST / LATERAL PROMINENT ASIS: Yes / No
 OVERLAP: SMOOTH / STEP / NONE WAIST PADS: Yes / No
 DESIGN: 70-30 / SOFT / SPINALITE KYPHOSIS: Yes / No / DEGREE _____
 CUT FOAM: ANTERIOR / POSTERIOR BUILD UPS: _____

SPINAL RELIEF
 Yes / No
 Level
 _____ to _____

DROP SLIGHT MEDIUM LARGE FULL NEUTRAL



FABRICATION: Finished / Unfinished / Other _____
 PLASTIC: LDPE / COPOLY / POLYPRO / KYDEX / MDPE GAUGE: 3/32 - 1/8 - 5/32 - 3/16
 LINER MATERIAL: Aliplast / None / Removable / Other GAUGE: 1/8 - 3/16 - 1/4
 CLOSURE: Yes - attached / Yes - unattached / No / Other _____
 OTHER FABRICATION: _____

Asis to Asis Contour Asis to Asis Straight Line
 PROX THIGH CIRC DIST THIGH CIRC
 RIGHT / LEFT

VENTILATE: ANTERIOR / POSTERIOR / BOTH INFLATABLE LUMBAR PAD: ATT / UNATT
 TONGUES: LDPE / PELITE STERNAL PAD: ATTACHED / UNATTACHED
 FINISH: MATTE / NORMAL STERNAL PAD STRAPS: OTS / UTA
 FASTENERS: RIVETS / TRUSS NUT / PLASTIC CORSET: ZIPPER / PLAIN / VELCRO OL

HIP BOLT
 BECKER DL
 HIP TRACKER
 OTHER _____

MEASUREMENTS

CIRCUMFERENCE M.L. A.P.

AXILLA:

NIPPLE LINE:

XYPHOID:

WAIST:

A.S.I.S.:

TROCHANTER:

Bra Cup Size: BREASTS INCLUDED YES / NO

STERNAL NOTCH NIPPLE TO NIPPLE XYPHOID NIPPLE TO WAIST WAIST TROCHANTER SYM PUBIS COCCYX GF

Diagram showing measurement points A (Anterior) and P (Posterior) for various body parts.

FINISHED TRIM

FLARE EDGES MUSTACHE CUT
 HYGIENE CUT

Top Anterior Top Posterior

Under the arm

Waist

Greater Trochanter

Bottom Anterior Bottom Posterior

Waist to Thigh

Diagram showing finished trim patterns and measurement points.