



**Hours of Operation**  
**Monday to Friday** 8:30AM - Midnight (EST)\*  
**Saturday** 10AM - 9PM (on-call after 9PM)  
**Sunday & Holidays** On Call Service  
 \*Taking Custom TLSO Orders until 10 PM EST for Next Day Delivery.

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800 253 7868 /Tech Direct 508 775 0990 /Tel 888 775 0588 / Fax

# Providence Orthometry Form

Ship To

Pt. Name		Next Day Air
		Next Day Air Saver
Customer Acct. #	Shipping Alert	Next Day Early A.M.
PO #		2nd Day Air
Ordered By		2nd Day Air A.M.
		3rd Day
		Ground
		Saturday Delivery
		Saturday Early A.M.
Telephone	Internal Use	Due Date

<b>Opening</b> Anterior w/Tongue	<b>Body Sock:</b> Small Medium
<b>Style</b> Finished Straps	Large X-Large
Plastic Type	Plastic Thickness
Liner Thickness	Pressure Strips
	Blue Mat (Conical)

**Plastic Transfer/Decals:**

Male	Female	Age	Hgt.	Wgt.
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**Instructions**

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Check box if Patient is a current or previous brace wearer  Check box if Pediatric Blocks were used

<p><b>Measurements</b></p> <p>Cir</p> <p>Axilla <input type="text"/></p> <p>Xyphoid <input type="text"/></p> <p>Waist <input type="text"/></p> <p>ASIS <input type="text"/></p> <p>Troch <input type="text"/></p> <p>A/P <input type="text"/></p> <p>Xyphoid Level <input type="text"/></p> <p>ASIS Level <input type="text"/></p>	<p><b>Curve Analysis</b></p> <p>Thoracic Curve: L or R</p> <p>Thoracic Apex: T___</p> <p>Lumbar Curve: L or R</p> <p>Lumbar Apex: L___</p> <p>Thoracolumbar Curve: L or R</p> <p>Thoracolumbar Apex: L1 or T12</p> <p>Waist/Row 0 <input type="text"/></p> <p>Pubis <input type="text"/></p>
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Length and A/P Measurements taken with patient on board and pressure pads in place.

**Pad Placement with Board**

**Stabilizing Pads**

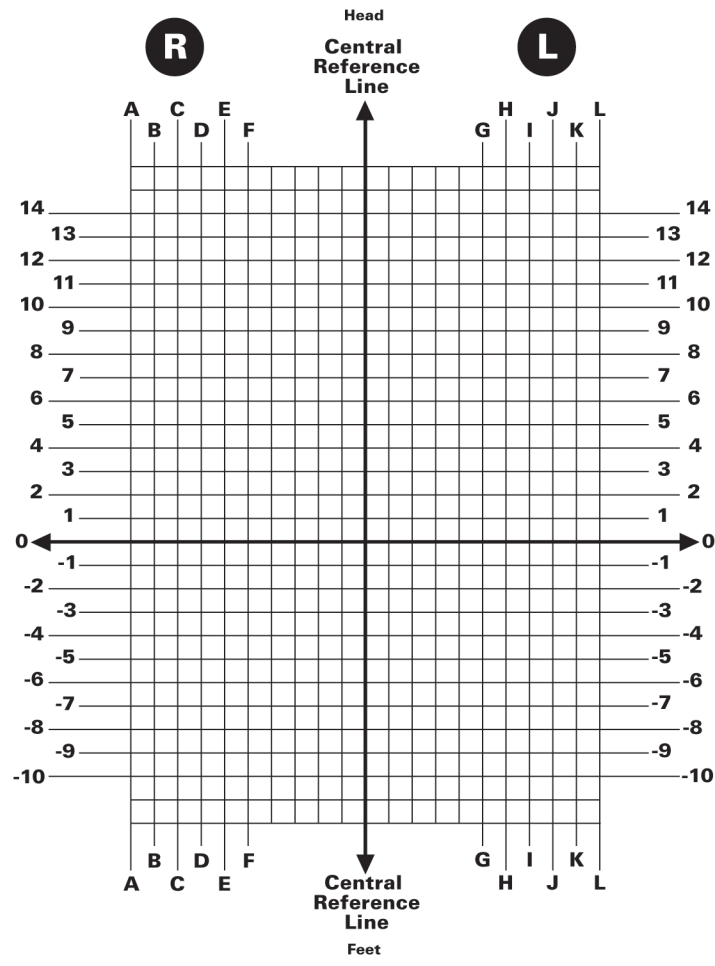
Axilla  Column (down)  Row (across)

Trochanter Pad  Column (down)  Row (across)  Distance

**Pressure Pads**

Lumbar Pad  Column (down)  Row (across)  Distance

Thoracic Pad  Column (down)  Row (across)  Distance



By Cast  Mold # \_\_\_\_\_ M \_\_\_\_\_ P \_\_\_\_\_ F \_\_\_\_\_ S \_\_\_\_\_ QC \_\_\_\_\_

E-mailed X-Ray / X-Ray / Disc