



# SPIO<sup>®</sup>

## Wrist-Hand Orthosis - Gauntlet Custom Measurement Form

Date \_\_\_\_\_

Name (Patient) \_\_\_\_\_ Age \_\_\_\_\_

Contact Name \_\_\_\_\_

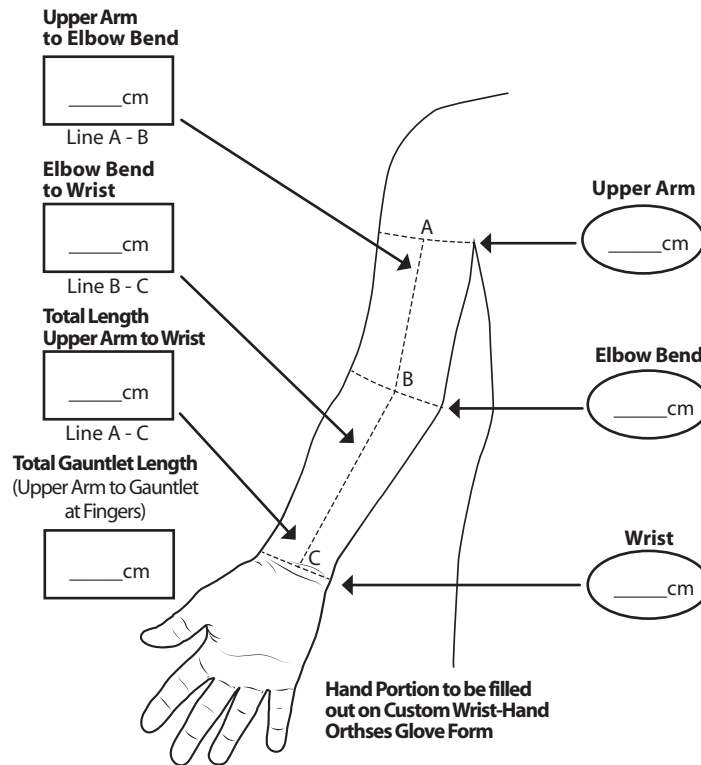
Contact Phone \_\_\_\_\_ Contact Email \_\_\_\_\_

### Measurement Key

Length =

Circumference =

Measurements should be in centimeters. All boxes must be filled in. **Measure elbow at 15 degrees flexion.** In addition to this form you must submit a completed Glove form.



### Options

**Color**  BLACK  ROYAL BLUE  WHITE

### Additional Comments

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Please include a copy of the SPIO Order Form along with your custom measurement form.