



SPIO®

Leg Orthosis Custom Measurement Form

Date _____

Name (Patient) _____ Age _____

Contact Name _____

Contact Phone _____ Contact Email _____

ALL MEASUREMENT FIELDS ARE REQUIRED

Measurement Key

Length =

Circumference =

Instructions

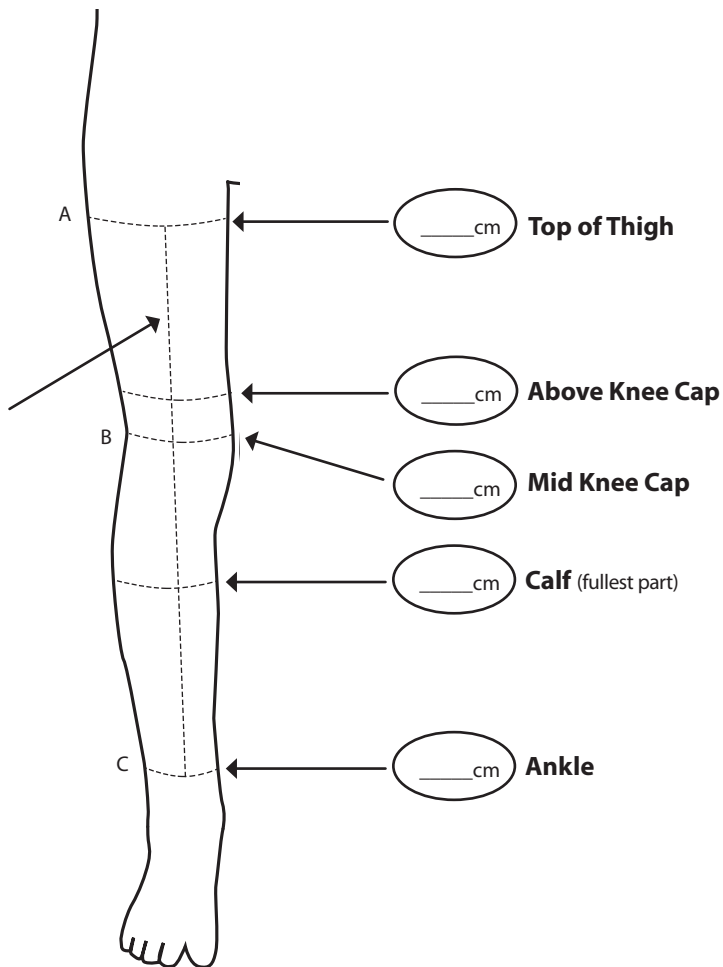
- Measurements should be in centimeters.
- All boxes must be filled in.
- Measure knee at 15 degrees flexion.**

Top of Thigh to Mid Knee

Line A - B

Mid Knee to Ankle

Line B - C



Quantity

Options

Additional Comments

Color	BLACK	ROYAL BLUE	WHITE	
Layers	SINGLE	DOUBLE		

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