



# SPIO®

## Unitard Custom Measurement Form

Date \_\_\_\_\_

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

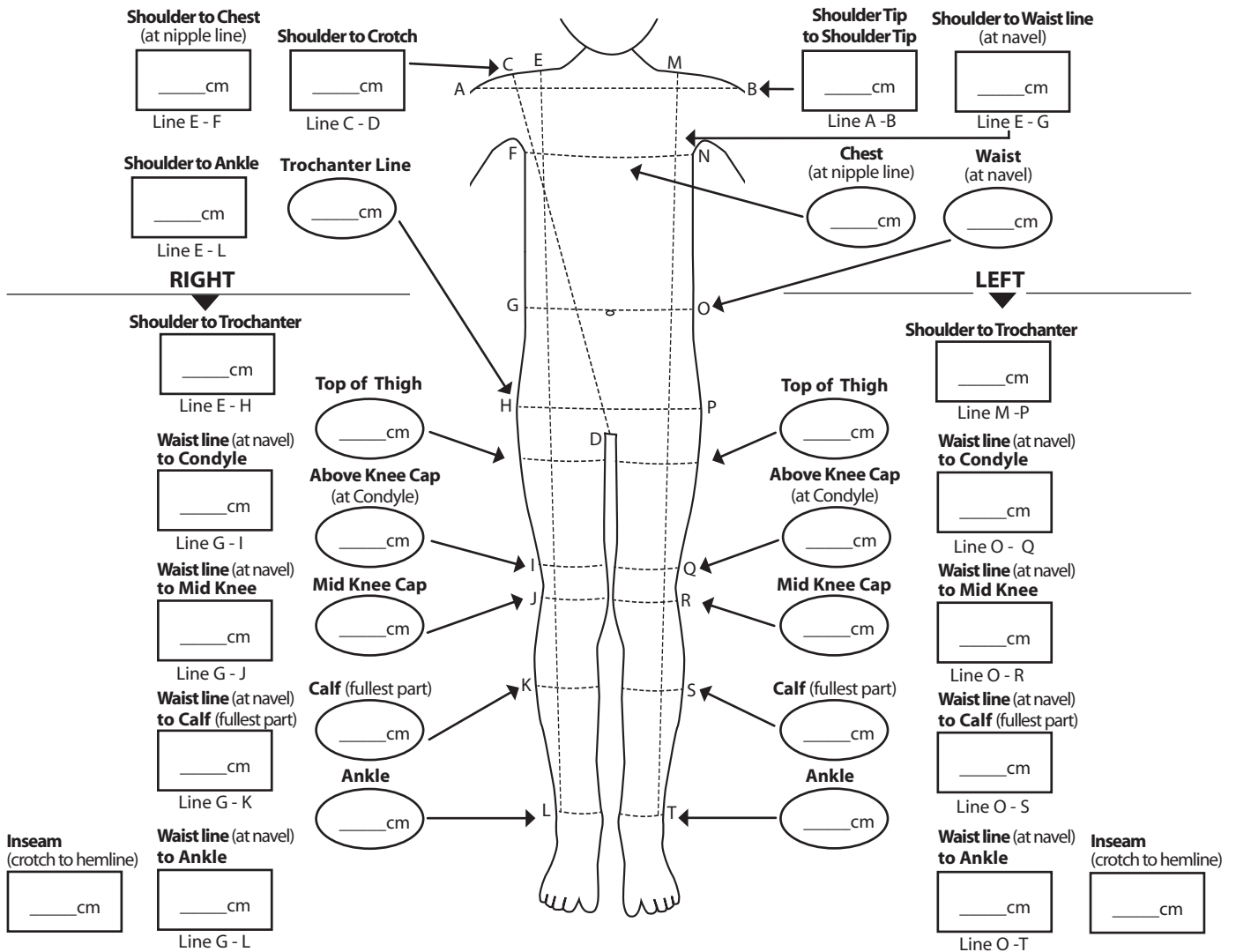
Contact Name \_\_\_\_\_

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

### Measurement Key

Length = Circumference = 

Measure child laying down. Measure knee circumference at 15 degrees flexion. Measurements should be in centimeters. Measure both legs. Measure over diaper or underwear. Measure on top of the torso, not the side. All boxes must be filled in.



#### Options

Color  BLACK  ROYAL BLUE  WHITE

#### Additional Comments

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