HORIZON[™] PRO 637

LSO

DOCUMENTATION WORKSHEET: RETAIN IN PATIENT RECORD

Doctor:	Fitter:
Patient Name:	Date:
Patient #:	Additional Follow-Up Dates:

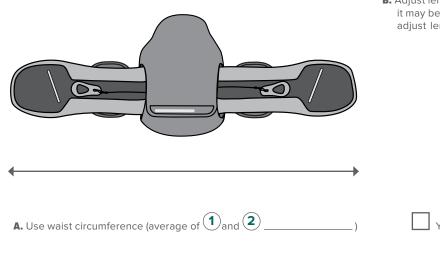
Page 1 of 2

TOOLS NECESSARY: Scissors • Heat Gun • Tape Measure

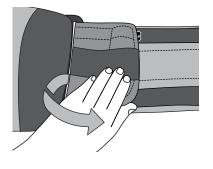
FOR USE WITH PRODUCTS MANUFACTURED BY ASPEN MEDICAL PRODUCTS, LLC ONLY. THIS PRODUCT IS INTENDED FOR APPLICATION BY HEALTH CARE PRACTITIONERS AS DIRECTED BY A PHYSICIAN OR OTHER QUALIFIED MEDICAL AUTHORITY. THIS IS A PREFABRICATED ORTHOSIS. IT IS INTENDED TO BE CUSTOMIZED TO AN INDIVIDUAL PATIENT. FOLLOW THE STEPS BELOW TO CUSTOMIZE.

STEP 1 - MEASUREMENTS		STEP 2 - CUSTOMIZE BACK PANEL TO ANATOMY
Lower rib circumference =		FLAT SIDE
Hip circumference =		Patient's Lordosis
T9 to Sacrococcygeal Junction =		Degree:
Length from hip to shoulders =	3	
TIME SPENT:		(3) ——
		TIME SPENT:

STEP 3 - CUSTOMIZE SIZING AND TIGHTENING MECHANISM



B. Adjust length of tightening mechanism. For individual patient, it may be necessary to adjust length of closure string. Trim and adjust length of strings.



Yes. Amount cut		L
Yes. Amount cut		L

_	_

TIME SPENT:



HORIZON[™] PRO 637

LSO

DOCUMENTATION WORKSHEET: RETAIN IN PATIENT RECORD

Doctor:	Fitter:
Patient Name:	Date:
Patient #:	Additional Follow-Up Dates:

TOOLS NECESSARY: Scissors • Heat Gun • Tape Measure

STEP 4 - MODIFY RIGID PANELS

MODIFY ANTERIOR PANEL AS NECESSARY

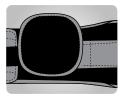




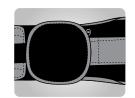
TIME SPENT:	_
Remove and heat mold anterior panel as necessary.	
Remove and trim to accommode small and extra small anatomy.	ate

Page 2 of 2

STEP 5 - LATERAL PANELS



 If waist circumference is greater than, place lateral panels on the upper portion of the belt.



4 Measurement

 If less than, place lateral panels on the lower portion of the belt.

TIME SPENT:

STEP 6 - CUSTOMIZE BELT FIT

- **A.** Bend anterior panel to conform to patient's anatomy.
- **B.** Angle anterior panels:

TIME SPENT: _

TIME SPENT: _

ANGLE	AINI	ERIOR	PANELS)
_				

Every patient has a unique individual anatomy. Determine angulation for proper fit. Circumferential contact at both upper and lower margins of brace is essential for proper brace performance and support.



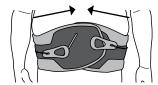
Neutral

Configuration for best support



Inferior Angulation

Configuration for best support



Superior Angulation
Configuration for best support

STEP 7 - EDUCATION

EDUCATE PATIENTS

Proper education is needed for individual to maintain proper fit throughout total time of wear.

Items to educate patients on:

Independent compression mechanics

___ Don and doffing

	Proper angulation to ensure
Ш	circumferential contact
	Proper placement of brace

Proper placement of brace

	Proper	cleaning	
\neg			

Follow up appointments

CLINICAL JUSTIFICATION FOR CUSTOMIZING BRACI
--

Physician Initials ______ Date ___

TOTAL TIME TO CUSTOMIZE BRACE:

