

# Clinical Application for Custom Fit Spinal Orthosis

Patient Name: \_\_\_\_\_

Product Fitted:  L0631       L0637       L0639

## Medical Necessity:

- Reduce pain by restricting mobility of the trunk
- Facilitate healing following injury to the spine or related soft tissues
- Facilitate healing following a surgical procedure to the spine or related soft tissues
- Support weak spinal muscles and/or deformed spine

## Need for Custom-fitting:

- Waist to hip ratio/disparity  Pendulous abdomen  Obesity  Short stature/ torso  Hyper/hypo-lordosis
- Multi-vertebral level injury/surgery  Accomodate post-surgical dressings  Scoliosis  Spinal deformity
- Compromised cognitive/ physical ability  Hyper-kyphosis  Other \_\_\_\_\_

Additional notes: \_\_\_\_\_  
\_\_\_\_\_

- Substantial modifications required to meet above medical necessity and need for custom fitting:

Gross Modifications:

- Brace assembled/ modified to fit patient circumference

\_\_\_\_\_ "Waist; \_\_\_\_\_ " Hip \_\_\_\_\_ "Lower rib

## Panel/ component Modifications:

	Anterior	Lateral	Posterior	Thoracic	Purpose: _____
Assembled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Trimmed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Bent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Molded	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

## Accessories/ Other Modifications

Description \_\_\_\_\_

Purpose \_\_\_\_\_

- Assembled and angulated panel/belt components to accomodate:

- Neutral waist  Waist to hip ratio/disparity  Pendulous abdomen  Scoliosis  Spinal deformity

## Patient Education:

- Donning and doffing  Proper application to maximize compression and support
- Proper location inferior/ superior

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_