

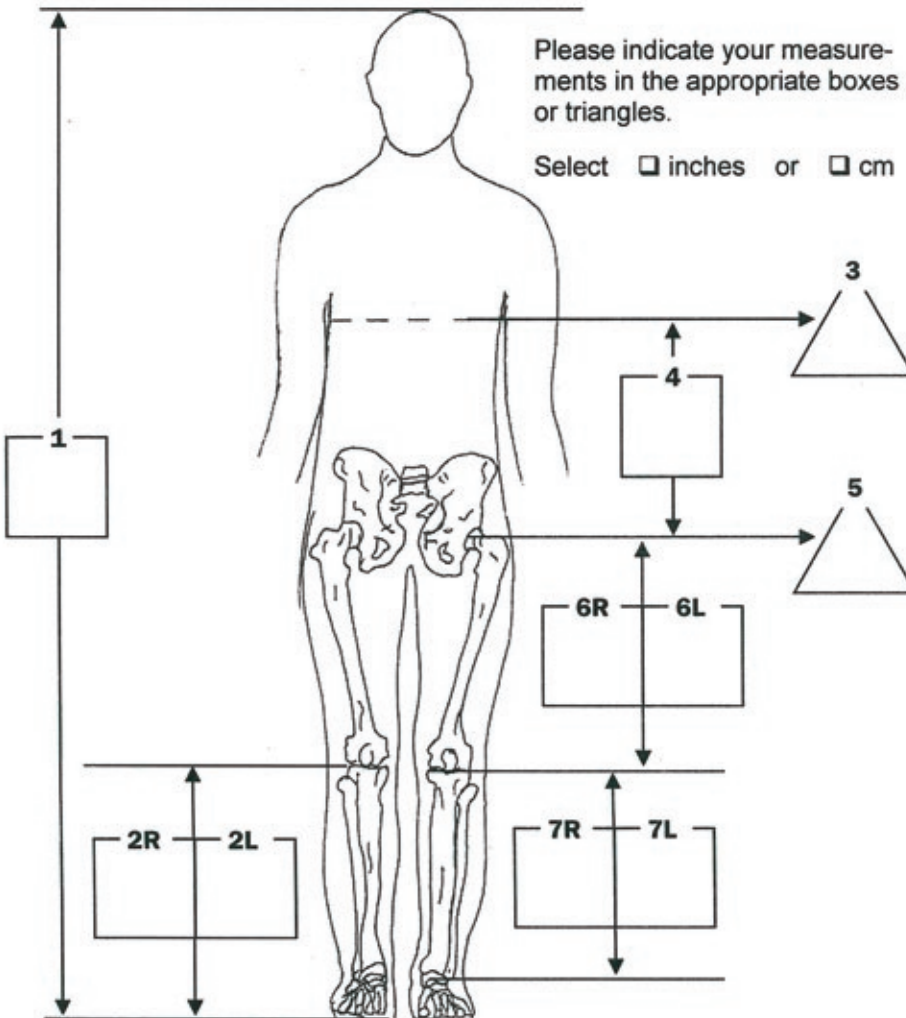


**ADVANCED  
ORTHOTIC  
DESIGNS INC.**

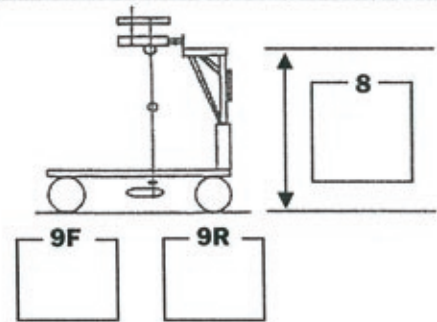
# SMART Walker™ Orthosis Measurement Form

Please fax to 905-607-9099

DATE		ORTHOTIST		
CLIENT NAME		PHYSIO THERAPIST		
FRAME SIZE	<input type="checkbox"/> SMALL 16.5-22"/42-56cm	<input type="checkbox"/> MEDIUM 20-26"/51-66cm	<input type="checkbox"/> LARGE 24-29"/61-74cm	<input type="checkbox"/> XLARGE 28.5-33.5"/73-85cm
SHOES	ARTICLE NUMBER	COLOR	SIZE	WIDTH



- REFERENCE**
- 1** Total height of child
  - 2R** Length from right knee center to heel
  - 2L** Length from left knee center to heel
  - 3** Diameter 1"/2.5cm below the axilla
  - 4** Length 1"/2.5cm below the axilla to hip centre (GT)
  - 5** Diameter of hip centre (GT)
  - 6R** Length from right hip centre (GT) to right knee center
  - 6L** Length from left hip centre (GT) to left knee center
  - 7R** Length from right knee centre to right lateral malleolus
  - 7L** Length from left knee centre to left lateral malleolus



- POST FITTING REFERENCE**
- 8** Height from lift post to floor
  - 9F** Length of front strap
  - 9R** Length of rear strap

NOTES \_\_\_\_\_

As the SMART Walker is custom-fitted, personal information is gathered for the strict purpose of designing, manufacturing and fitting the SMART Walker to the individual's specific measurements. All information will be kept in the strictest confidence by Advanced Orthotic Designs Inc.

**ADVANCED ORTHOTIC DESIGNS**  
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