

Instructions for Boston Kyphosis Order Form

Reminder – this form is for the technicians and goes with the flow of fabrication. All items on this form need to be completed to ensure customer service and manufacturing are able to fabricate the desired orthosis.

Boston Kyphosis Order Form

Date: _____ Due Date: _____ PO #: _____ Contact: _____
 Ship To: _____ Ship Via: _____ Email: _____
 Address: _____ Account #: _____ Phone: _____
 City: _____ State: _____ Zip: _____ Previous Kyphosis Wearer Scan Label: _____

Patient Name: _____ Ht: ___ft___in Wt: ___lbs
 Age: _____ Sex: _____ Diagnosis: _____











PLEASE DO NOT use this as your clinical note.

Demographics:

Customer service uses this section to initiate the fabrication process. All of the above is entered into our system. In the event we need to contact you, the treating orthotist, or if you have a question on the fabrication, having this information entered allows for easy retrieval.

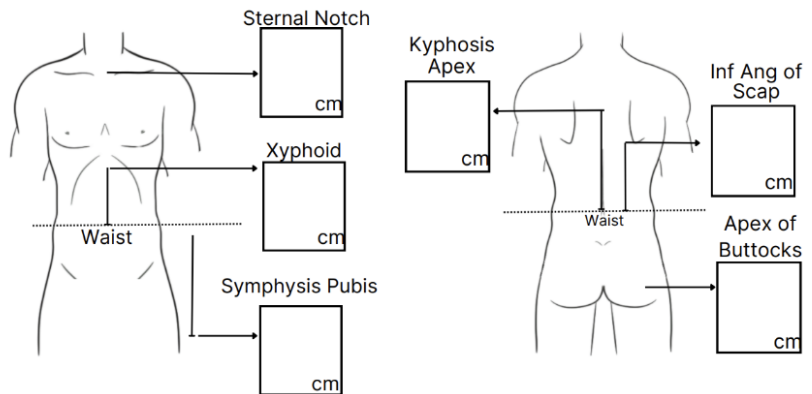
The highlighted area above needs to be completed. We will keep a secondary record for you showing the patient’s age, sex, height and weight as well as the diagnosis. Height and weight are needed in the event a second brace is required. By having this noted on the work order, it serves as a backup for your clinical record.

Anatomical Measurements

	Cir.	M/L	A/P
Sternal Notch			 cm
Xyphoid	 cm	 cm	 cm
Waist	 cm	 cm	 cm
Trochanter	 cm	 cm	
Pubis			 cm

Shape Capture

Scan Cast Measure Only



Anatomical LENGTHS taken from waist

Anatomical Measurements:

We no longer require circumferential, ML or AP measurements when a scan is provided. Scan label is required to make sure the correct scan is modified. Indicate how the patient’s shape was captured so customer service will know if a scan should be with the order.

Brace Design

Lordosis

- 15 degrees
 Other: _____

Abdominal Shape

- Neutral
 Other: _____

Plastic

- Copoly sized to model
 Other: _____

Transfer

- 1st _____
2nd _____

Straps

- White
 Black

Boston Sensor

- Send Sensor
 Sensor Hole

Brace Design - The Boston Kyphosis Brace is anterior opening.

Lordosis

Standard lordosis is 15 degrees. Provide a lordodic degree value if different than 15 degrees.

Abdominal Shape

Neutral (flat) abdominal shape is the standard. Provide an abdominal relief description (small, medium, large) if abdominal relief is required.

Plastic

Plastic thickness is determined by hip circumference. If a specific thickness is required provide value in millimeters.

Transfer:

Brace transfers can be chosen in this section. Strap transfers are no longer an option here as they decrease the life and integrity of the straps. Indicate a second-choice option in the event the first choice is not available.

Straps

Indicate the color of the straps requested by the patient. White straps are the standard.

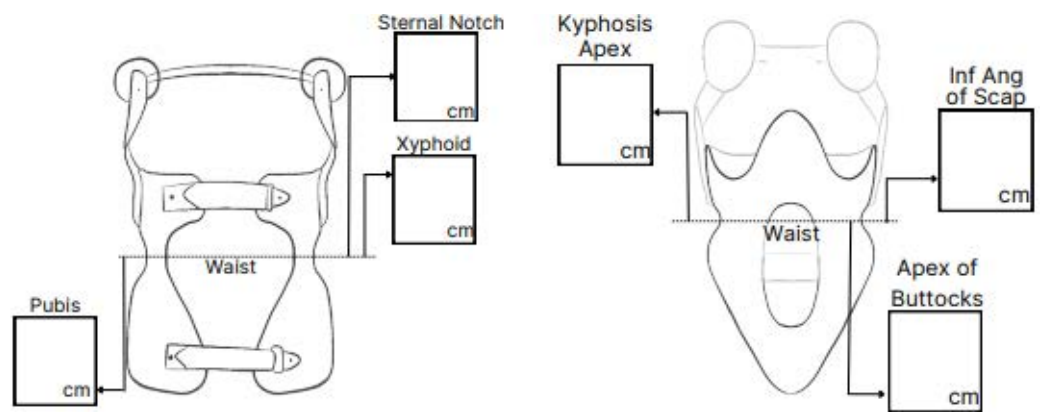
Boston Sensor: The Boston Sensor adherence monitor is standard of care. Indicate if the patient/parent agrees to have the Boston Sensor installed or not.

Send Sensor: The Boston Sensor with instructions for launching and downloading adherence data will be sent with the orthosis. This is for patients that have consented to having a sensor installed into their orthosis.

Sensor Hole: A hole is drilled in the orthosis



Finished Heights



Finished Heights

This section is optional. If completing this section, please completely fill in the all the lengths.

The brace design is universal. The medial posterior superior trim line is at the level of the kyphosis apex. The posterior lateral trim line is at the inferior angle of the scapulae. The medial posterior inferior trim line is at the coccyx or mid buttocks depending on the flexibility of the kyphosis and amount of leverage required.

The anterior lateral corrective pads (cow horns) are just inferior to the clavicle. The medial anterior superior trim line at the xyphoid. The anterior inferior trim line is at the pubis.

This orthosis has bilateral open hips.

Scoli Tees

Single

Double

Qty: _____

Scoli Tees

If providing the patient with a Boston T-shirt to wear under the brace, indicate the style (single or double underarm flap) and the quantity. The size is determined from the submitted measurements. We no longer offer silver tees.

Notes:

Notes:

This section is to be used for unique requests that are not an option on the order form.