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Measuring Forms for DZ Suit or Leotard PCP 73A/73B/73C

Patient details

Surname:
First name:
Date of birth: __ / __ / ____ Age:
Diagnosis:
Please indicate: Male Female
Date: __ / __ / 20 __
Hospital/Clinic:

Purchasers details

Address :
Post code:
Consultant:
Name:
Measured by: <input type="checkbox"/> OT <input type="checkbox"/> PT <input type="checkbox"/> Orthotist <input type="checkbox"/> Jobskin
Hospital order number:
Contact phone number:

DZ Suit: No Sleeve	Quantity
PCP 73A: Standard double front	
PCP 73B: Standard double front with centre panel	
PCP 73C: Double expander front zip	
DZ Suit: Short Sleeve	Quantity
PCP 73A: Standard double front	
PCP 73B: Standard double front with centre panel	
PCP 73C: Double expander front zip	
DZ Leotard: No Sleeve	Quantity
PCP 73A: Standard double front	
PCP 73B: Standard double front with centre panel	
PCP 73C: Double expander front zip	
DZ Leotard: Short Sleeve	Quantity
PCP 73A: Standard double front	
PCP 73B: Standard double front with centre panel	
PCP 73C: Double expander front zip	

Other Information

Wears AFO's: Yes No

Gastrostomy site: Yes No

Hole required: Yes No

If required, please mark position at first fitting only

Zips for DZ Suits and Leotard

Back: Closed Open Upside down

Crotch: (short leg only)

Outside leg: (short leg only)

Poppers for Suits and pants (short leg only)

Inside leg

Fabric colour

White Beige Pastel Pink Navy Blue Black

Reinforcement

White Beige Pastel Pink Pastel Blue Black Red
Purple Royal Blue Bronze Camouflage Pink Floral

Thread colour

Beige White Pastel Pink Pastel Blue Mint Green
Bright Pink Red Purple Denim Blue Green
Black Orange Royal Blue Bronze

Motif number:

Position:

First SDO:

Yes No



Tick here if extra reinforcements are required and complete page 3



Tick here if special instructions and complete page 3

Delivery address if different from purchasers:
Post code:

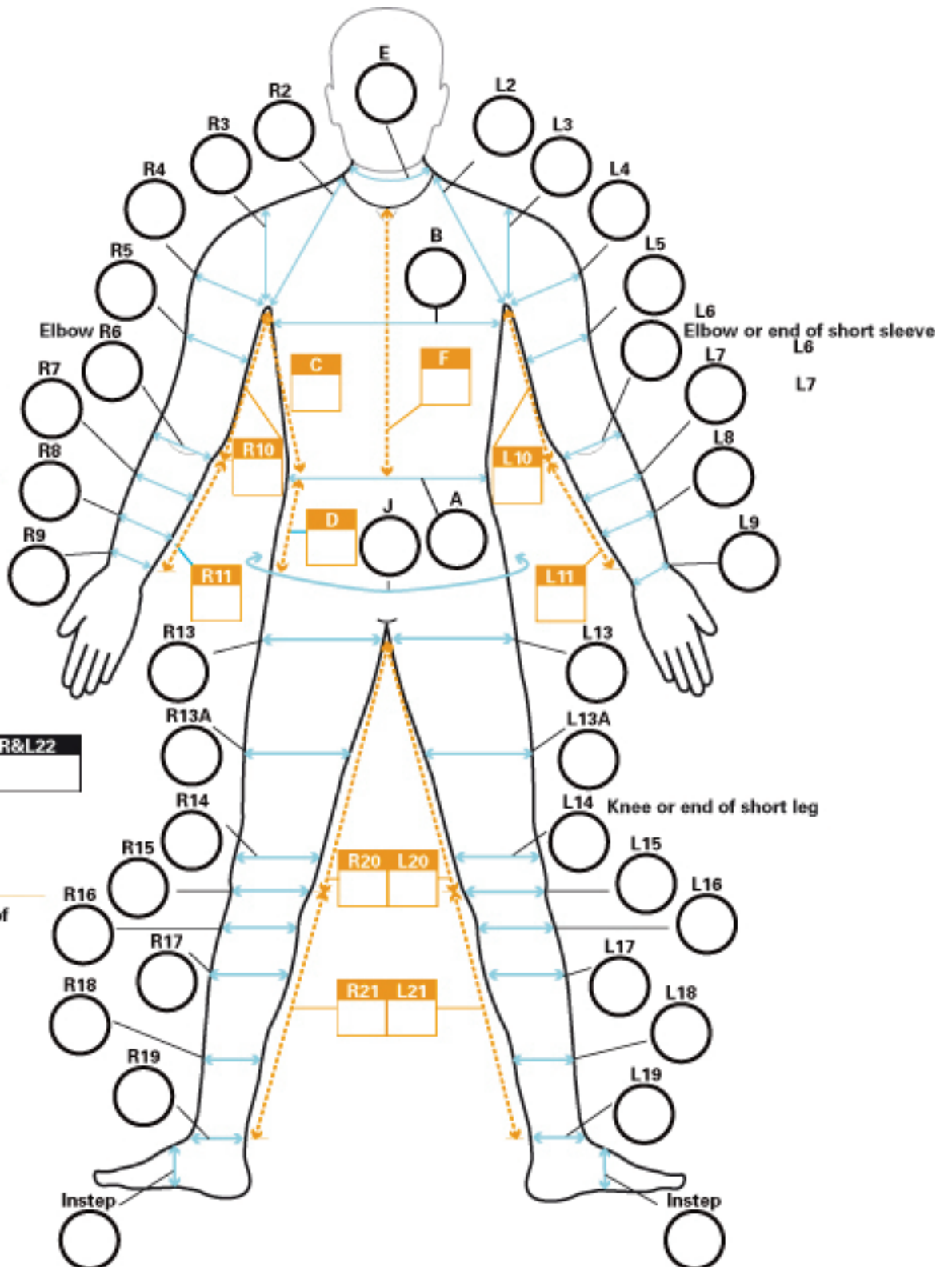
Patient Name:

Date of assessment:

Circumference  

Lengths  

Please Note:
Measurement 22 is
now taken from
the waist



R&L22 measurement must be taken	R&L22
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Knee or end of
garment if
above knee

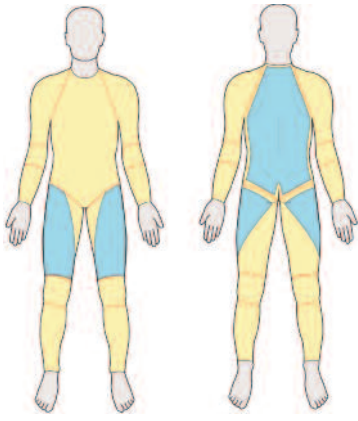
Please complete if required

Additional measurements for Leotard	
Waist to waist through Legs	
Base of neck to acromian process (sleeveless style only)	
Waist to the end of Leotard at side of body	

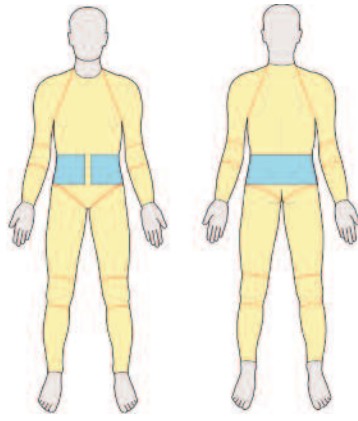
For office use only

Waist to crotch

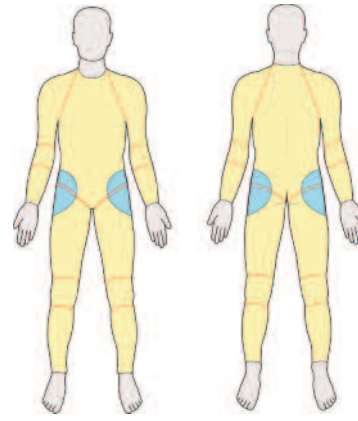
Reinforcement Codes



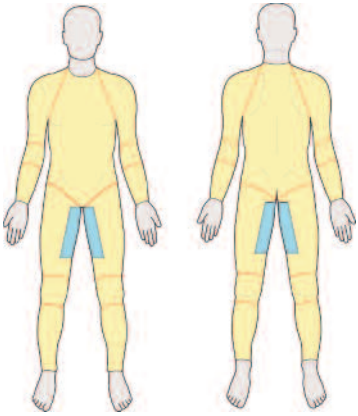
SDO Standard Panels Code: SP



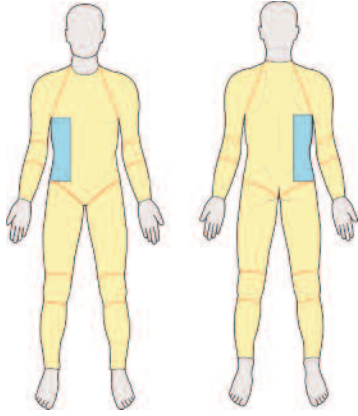
Lumber Panels Code: LP



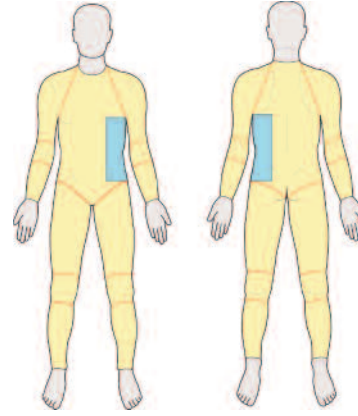
Hip Panels Code: HP



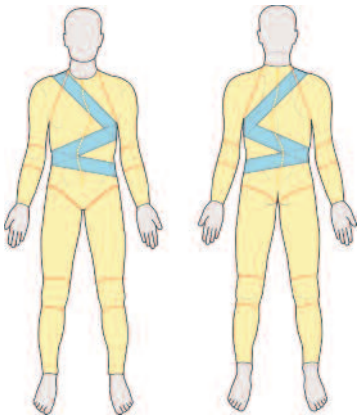
Medial Upper Leg Panels Code: ULM



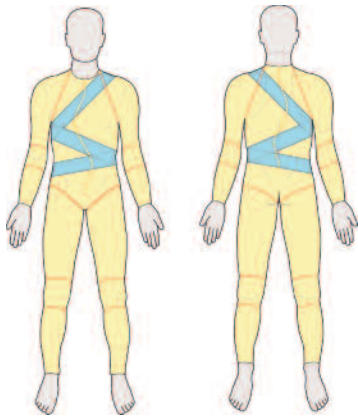
Lateral Trunk Panels Code: TPL



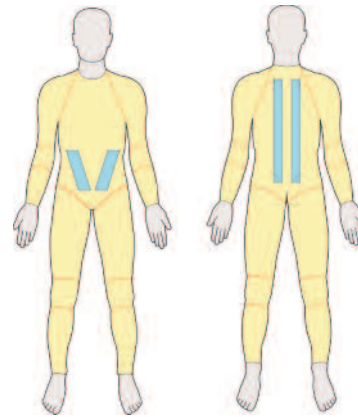
Lateral Trunk Panels Code: TPR



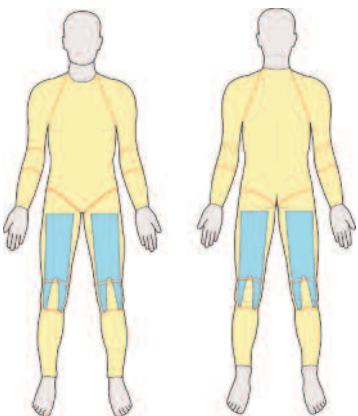
Scoliosis Panels Code: SPR



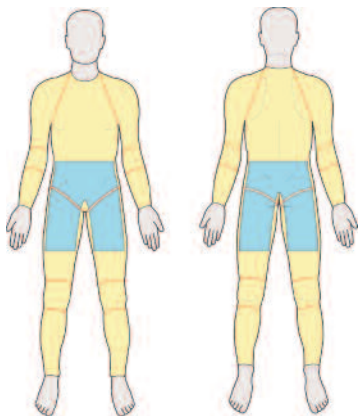
Scoliosis Panels Code: SPL



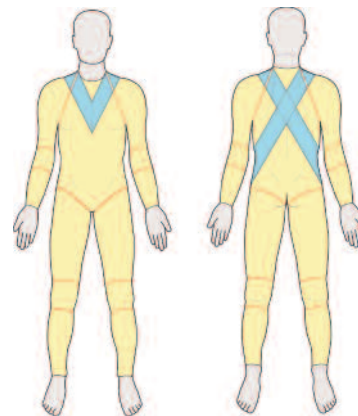
Anterior Abdominal Panels Code: AP
Posterior Back Panels Code: BP



Anterior Leg Panels Code: KE
Posterior Leg Panels Code: KF



Anterior Pelvic Panels Code: APP
Posterior Pelvic Panels Code: PPP



Anterior Chest Panels Code: CP1
Posterior Chest Panels Code: CP2



Posterior Leg Panels Code: HE