

Fit Right Guide

Client Name _____ Age _____ Sex _____

Address _____ Phone () _____

City _____ State/Prov. _____ Zip/Postal Code _____

Diagnosis _____

Physician _____

SITTING MEASUREMENTS:

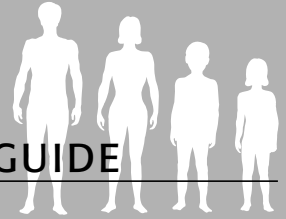
- A _____ Lower leg length (measured from the back of the knee to the floor)
- B¹ _____ Upper leg length (measured from the back of the knee to the back of the seat as the child leans forward slightly)
- B² _____ Upper leg length (measured from the front of the knee to the back of the seat as the child leans forward slightly)
- C¹ _____ Elbow height (measured from the bent elbow to the seat)
- C² _____ Elbow height (measured from the bent elbow to the floor)
- D _____ Shoulder height (measured from the shoulder to the seat)
- E _____ Upper body height (measured from the top of the head to the seat)
- F _____ Trunk width (measured at the widest location)
- G _____ Hip width (measured at the widest location)

STANDING MEASUREMENTS:

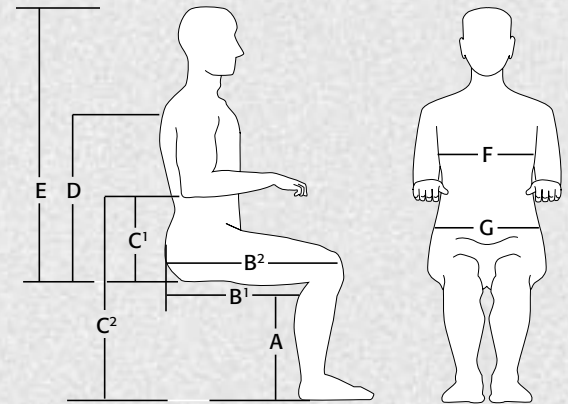
- A _____ Lower leg length (measured from the back of the knee to the floor)
- B _____ Leg length (measured from the hip bone to the floor)
- C¹ _____ Elbow height (measured from the bent elbow to the hip)
- C² _____ Elbow height (measured from the bent elbow to the floor)
- D _____ Chest height (measured from the armpit to the floor)
- E _____ Full body height (measured from the top of the head to the floor)
- F _____ Trunk width (measured at the widest location)
- G _____ Hip width (measured at the widest location)

NOTES: _____

FIT RIGHT GUIDE



SITTING MEASUREMENTS:



STANDING MEASUREMENTS:

