

# CUSTOM MADE DEVICE REQUEST

## Custom Made Device

### Identification code:

The Asana case number you get in the confirmation e-mail when you submit the request.

Category 1 - 6 :

### Information to consider

Height:

Weight:

Symptoms:

Comment:

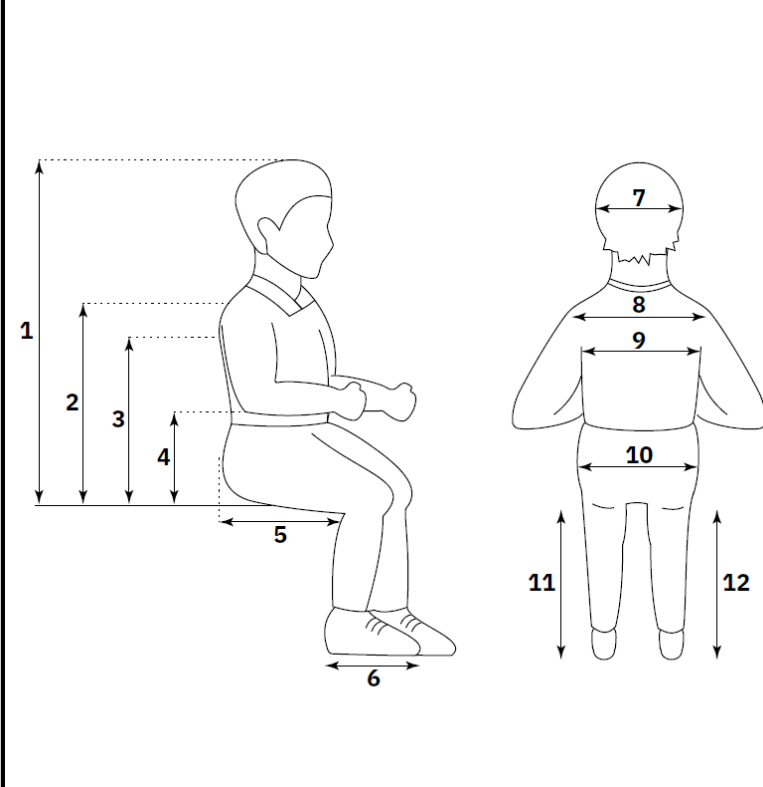
Yes No

Rocker

Tremors

Scoliosis

Other

		MEASUREMENTS	[CM]
	1	Top of head to bottom of buttocks	
	2	Top of shoulder to bottom of buttocks	
	3	Arm pit to bottom of buttocks	
	4	Elbow to bottom for buttocks	
	5	Back of buttocks to back of knee	
	6	Foot length	
	7	Head width	
	8	Shoulder width	
	9	Arm pit to arm pit	
	10	Hip width	
	11	Distance to bottom of left leg (popliteal to heel)	
	12	Distance to bottom of right leg (popliteal to heel)	

Is this a request for a new chair?

Yes

No

If Yes, attach configuration as attached file to the request.

If No to the previous question; Attach the Serial number and Model of the existing product on next side.

