|  |  |  |  |
| --- | --- | --- | --- |
| Patient |  | Date of Birth |  |
| system serial # |  | | |
| Notes |  | | |

|  |  |  |
| --- | --- | --- |
| headrest type | Choose an item. |  |
| type of customizable head cushion (if applicable) |  |  |
| head support used | Choose an item. |  |

|  |  |  |
| --- | --- | --- |
| Thermoplastic type | Choose an item. | A white and green plastic face mask  Description automatically generated A white and green object with black handles  Description automatically generated |
| Shoulder thermoplastic Used? | Choose an item. |  |