

SETUP SHEET

ZIFIX TRAVERSE ABDOMINAL/THORACIC MOTION CONTROL SYSTEM RT-4558CB03

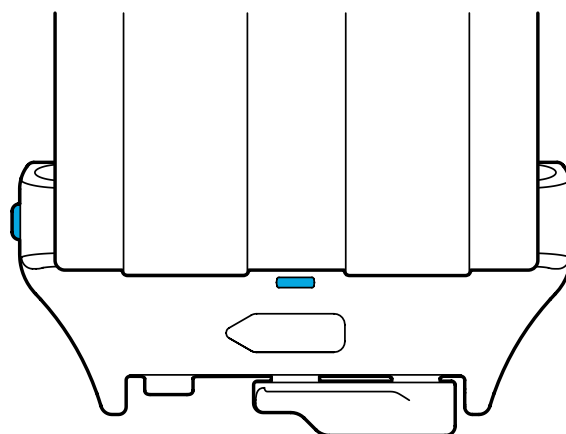
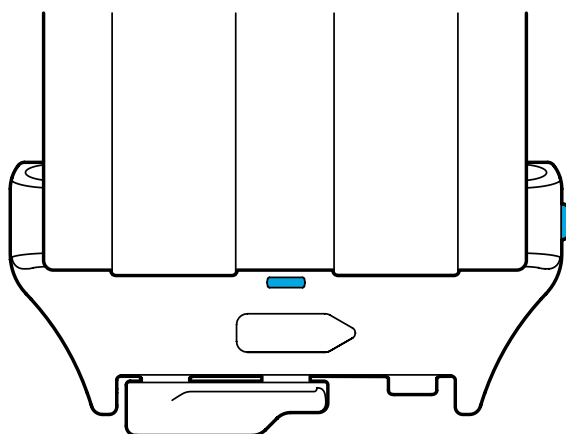
Patient Name:

Patient ID #: Setup by:

Physician: Date:

Comments:

Belt used: ☐ 130 cm x 13 cm ☐ 170 cm x 13 cm



Left Clamp to Device Scale Location:

Right Clamp to Device Scale Location:

Left Clamp to Belt Scale Location:

Right Clamp to Belt Scale Location:

Manometer readout: mmHg (FOR REFERENCE ONLY) (Pressure fluctuation of about 10 mmHg is normal)

Notes: