

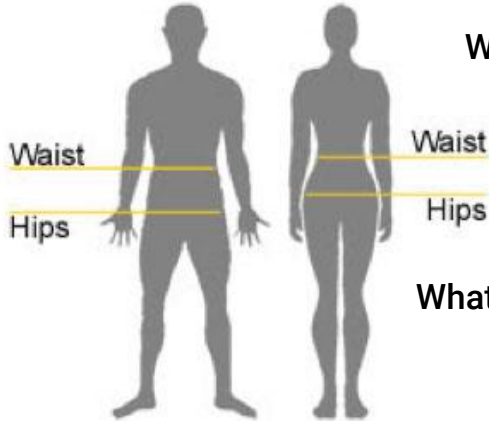


# activearmsupports

Print this form and bring it to your occupational or physical therapist. Get assistance to take proper measurements and then use the information to complete your order. Each LuxArm is custom built and can *only* be ordered online at [www.ActiveArmSupports.com](http://www.ActiveArmSupports.com).

*LuxArm*  
*Bilateral*

## Measurement Tool

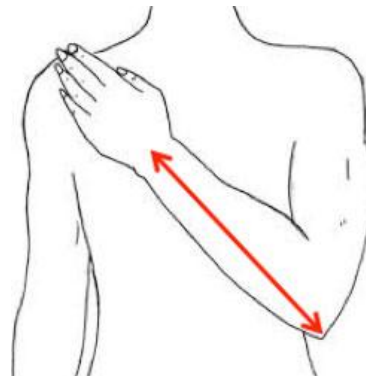


What is your **HIP** measurement (inches around)?

What is your **WAIST** measurement (inches around)?

What is your **ELBOW** to **WRIST** measurement (inches)?

RIGHT ARM	
LEFT ARM	

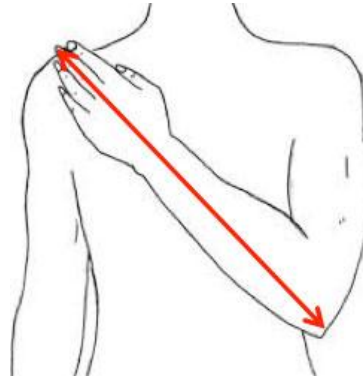




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What is your **ELBOW to MIDDLE FINGER TIP** measurement (inches)?

RIGHT ARM	
LEFT ARM	



What is your **HEIGHT** (feet, inches)?

What is your **WEIGHT** (pounds)?

## Thank you!

Feel free to contact us at [info@activearmsupports.com](mailto:info@activearmsupports.com) if you have any questions.

Please transfer the information to the online order form carefully!