

# Client Standing Worksheet

Clients Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

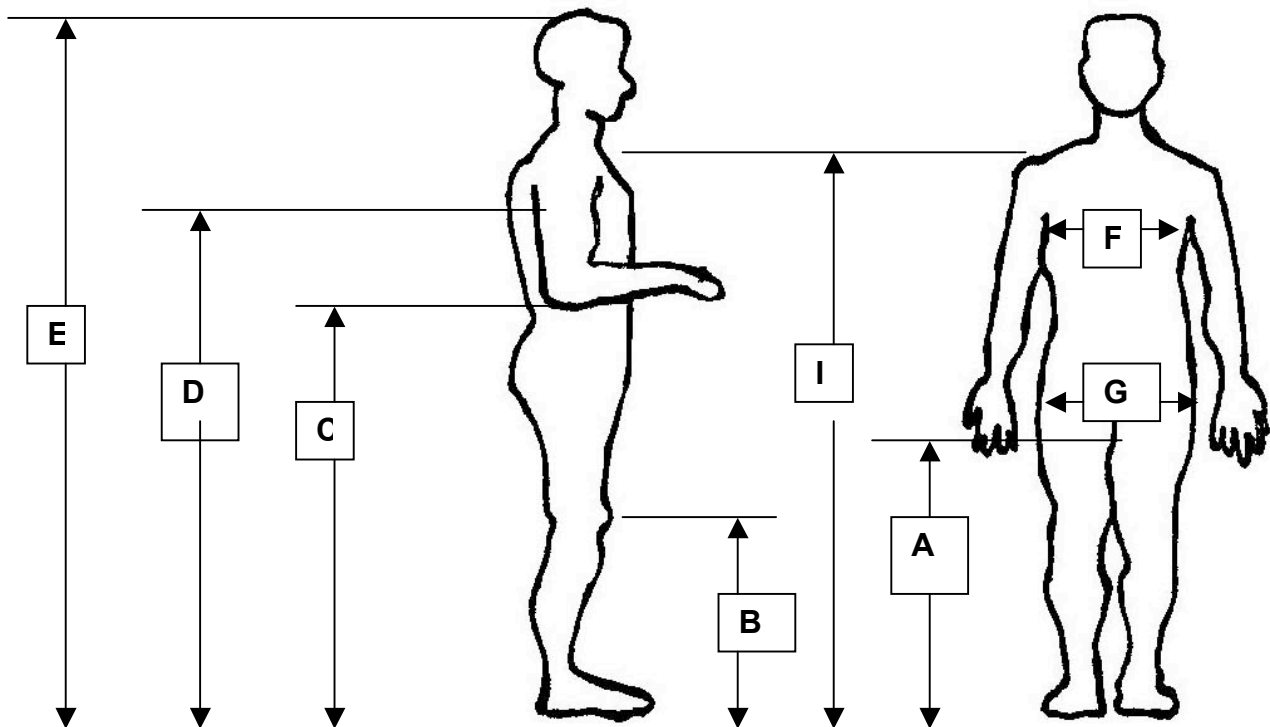
Email Address: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Diagnosis: \_\_\_\_\_

Physician: \_\_\_\_\_



- A --- Inseam (measure from inseam to floor)
- B --- Knee Cap (measure from center of knee cap to floor)
- C --- Elbow Height (measure from under arm @ 90deg to floor)
- D --- Underarm (measure from under the arm to the floor)
- E --- Overall Height
- F --- Chest Width
- G --- Hip Width
- I --- Just above shoulder (measure from floor)

Client left/right handed: \_\_\_\_\_

Weight in lbs. Of Client \_\_\_\_\_

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