

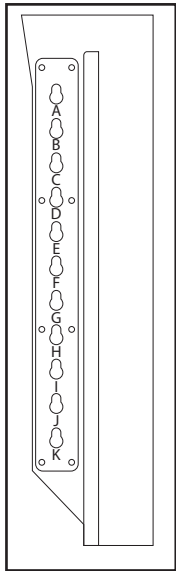
Set-up Sheet - Harn-S™, MT-CFHN-003

Patient: _____

Date: _____

Notes: _____

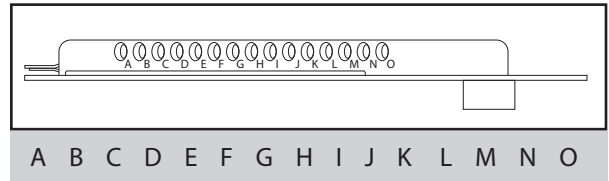
1. Strap Location (circle one for each arm)



Left
A B C D E F G H I J K

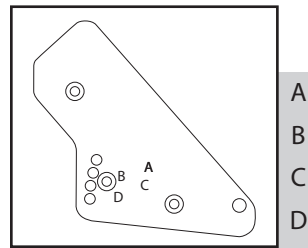
Right
A B C D E F G H I J K

2. Hip Stop Location (circle one)



A B C D E F G H I J K L M N O

3. Hip Stop Angle (circle one)



A
B
C
D



800.842.8688 | 712.737.8688 | WWW.CIVCO.COM