Impression taking & measurement technique
for silicone finger and partial hand prostheses

Technical information 3.1.1
Table of contents

1 Introduction 3
  1.1 Procedure 3
  1.2 Benefits and areas of application 4
  1.3 Types of definitive silicone prostheses 5
  1.4 From taking measurements to ordering the silicone finger or partial hand prosthesis 6

2 Anamnesis and taking measurements 7
  2.1 Preparing the workplace for anamnesis and taking measurements 7
  2.2 Patient interview 7
  2.3 Palpating the residual limb 9
  2.4 Testing joint mobility 10
  2.5 Taking measurements 10

3 Colour determination 17
  3.1 Preparing the workplace for colour determination 17
  3.2 Conditions for colour determination 17
  3.3 Limits of colour determination 17
  3.4 Determining the main colour 18
  3.5 Determining additional colours for the “classic” version 19
  3.6 Taking photographs of the hands 20

4 Taking the impression 22
  4.1 Preparing the workplace for creating the negative 22
  4.2 Applying impresil to the affected side 24
  4.3 Applying impresil to the contralateral side 26
  4.4 Removing the impresil 26
  4.5 Stabilising the impresil impression with plaster bandages 27
  4.6 Transportation and storage 27

Annex 1: Measurement form for silicone finger prosthesis 28
Annex 2: Measurement form colour determination for silicone finger prosthesis 29
Annex 3: Measurement form for silicone partial hand prosthesis 30
Annex 4: Measurement form for colour determination for silicone partial hand prosthesis 31

Explanation of symbols

| INFORMATION | Notes on processing. |
1 Introduction

This document provides technical information on silicone finger and partial hand prostheses to help prosthetists produce an individual silicone finger or partial hand prosthesis. It explains how to take the impression and measurements needed to produce such a prosthesis as well as how to determine the colour(s) for the final prosthesis. All relevant steps are described in detail and illustrated with pictures.

1.1 Procedure

Trial fitting and modification options for a test prosthesis are not explained in this technical information. This information is contained in the Technical Information 646T3=1.3. The fabrication of the test prosthesis and final prosthesis is not explained in this document.
1.2 Benefits and areas of application

Finger and partial hand prostheses made of silicone are noted for their anatomical and individual shape, offering their wearers passive functionality – e.g. counter-support when grasping objects. A vacuum effect and compression of the elastic socket provides fixation of the prosthesis. In this way, the prosthesis is fixed to the residual limb without annoying closures. In addition to functionality, the prostheses feature ultimate wearer comfort thanks to thin tapered edges as well as the material, which is easy to clean and comfortable to wear. Aside from the functional benefits, the appearance of the patient is also restored. Furthermore, silicone products are easy to clean and hygienic. They can be washed with water and soap. If they are very dirty, they can be cleaned by boiling.

Silicone partial hand prostheses are used for patients with the following amputations:

- Amputation of one finger with a residual stump length of less than 2 cm
- Amputation of several fingers with a residual stump length of less than 2 cm
- Amputations up to the metacarpus
- Hand dysmelia

Silicone finger prostheses are used in patients with the following indicated amputations:

- Amputations of one finger with a residual stump length of more than 2 cm
- Amputation of several fingers with a residual stump length of more than 2 cm

INFORMATION

Please note that the use of finger prostheses requires that the complete condyles are still present.

It is not always clear which of the two kinds of prosthesis should be used. The decision whether to use a finger or a partial hand prosthesis depends on various factors. It should be made after a detailed examination of the amputations and in direct consultation with the patient.

For the characteristics of the two kinds of fittings, please refer to sections 2.2.1 and 2.2.2 on page 8.

Technical and medical benefits and functions of a silicone prosthesis include:

- Custom socket design and stump compression with even pressure distribution
- High surface adhesion and full contact with good fixation to the stump
- Thin-walled socket and form-fit edge on the stump without closures
- Passive counter-support to the remaining fingers
1.3 Types of definitive silicone prostheses
Ottobock Service Fabrication Silicone offers silicone finger and partial hand prostheses in two standard versions: “Basic” and “Classic”. As an alternative, Ottobock offers the highly customised “Natural” version. The colour and shape follow the patient’s appearance very closely and are recreated in painstaking detail. However, this requires a visit to an Ottobock Competence Centre.

"Basic" version
The “Basic” version of the silicone finger and partial hand prostheses features a customised socket design and an anatomical finger shape with little surface structure. Only one colour is used for colouring this version, which is also used to colour the silicone fingernails.

"Classic" version
The “Classic” version of the silicone finger and partial hand prostheses also features a customised socket design and an anatomical finger shape. In contrast to the “Basic” version, however, the surface shows a more detailed structure. This version is made of 2–3 silicone colours. The fingernails are made of silicone; they are coloured with one main nail colour and another colour for the fingernail tip.

In addition, there is the option to fabricate fingernails made of acrylic. These allow for a more natural appearance of the fingernail.

"Classic" version with acrylic nail
1.4 From taking measurements to ordering the silicone finger or partial hand prosthesis

The orthopedic technician takes the patient’s measurements, chooses the colours using the 89D4 Colour determination Ring and takes informative photographs of the hands from various angles using the 647F285=GB Colour Determination Sheet. The prosthetist also takes the required impressions of the residual limb and hand.

These data are used by Service Fabrication Silicone to create a test prosthesis. The patient should wear the finger test prosthesis for a period of about 2 weeks and the partial hand test prosthesis for a period of 2 to 3 weeks during everyday activities. If necessary, the technician can make adjustments to the test prosthesis during this time (shape or compression). After the test period the test prosthesis must be returned to Service Fabrication Silicone.

The Service Fabrication Silicone produces the definitive silicone prosthesis and the prosthetist on site delivers it to the patient.
2 Anamnesis and taking measurements

When producing a customised finger or partial hand prosthesis, it is important to match it to the personal requirements and residual limb conditions of the patient. A patient interview therefore serves to clarify all important details and to thoroughly examine the residual limb and take all important measurements. For a precise fit and proper use of the prosthesis, taking accurate measurements of the amputated side and the contralateral side using a measuring tape and recording them on the Ottobock measurement form is essential.

It is only on the basis of exact patient measurements that Ottobock Service Fabrication Silicone is able to fabricate the test prosthesis and ensure the optimum fit of the test prosthesis. Otherwise, time-consuming corrections will be necessary.

2.1 Preparing the workplace for anamnesis and taking measurements

Material:
1 Ottobock measurement form

Tools:
1 662R5 Measuring Tape
1 Calliper
1 Pencil

Equipment:
Room with sink and washable floor

2.2 Patient interview

In order to determine the needs and requirements of the patient for a prosthetic fitting, the demands of the patient on a silicone finger or partial hand prosthesis must be discussed in an initial patient interview. Special demands the patient puts on the prosthesis – e. g. being able to type on a keyboard using the prosthesis, to use certain tools or to grasp a bicycle handle – should be recorded on the measurement form. This allows Ottobock Service Fabrication Silicone to optimise the prosthesis in order to meet these demands – e. g. by changing the finger position on the prosthesis. In this context, the cause and history of the amputation, any complications and the previous wound healing process should also be addressed. Particularities – e. g. sensitive areas, areas with a large amount of soft tissue or transplanted areas – should also be recorded on the Ottobock measurement form. This enables the technicians to take this information into account accordingly when fabricating the test prosthesis or definitive prosthesis in Ottobock Service Fabrication Silicone.

Based on the patient’s requirements, stump length and other residual limb conditions (e. g. sensitive or bony areas), a decision regarding the type of prosthesis suitable for the patient is made in the course of the patient interview.
2.2.1 Indications for silicone partial hand prostheses

In case of a residual limb length of less than 2 cm from the end of the web, a silicone partial hand prosthesis is suitable. Sufficient fixation of the prosthesis is ensured by including the wrist or proximate fingers.

2.2.2 Indications for silicone finger prostheses

Silicone finger prostheses can be used after amputations of one or several fingers with a residual limb length of more than 2 cm. The finger prosthesis is placed directly on the stump and does not require any further attachment. This type of fitting requires the complete condyles to be present. Otherwise, the proper hold of the prosthesis cannot be ensured. If only the tubular bone is still present and the stump length is less than 2 cm, a finger prosthesis cannot be used. The prosthesis would not have sufficient hold on the stump and might come off the finger.
2.2.3 Limit cases
At some patients it is unclear whether a silicone finger or partial hand prosthesis should be used. The advantages of the individual prostheses should be explained in detail to these patients. Partial hand prostheses offer the advantage of more secure fixation in limit cases than finger prostheses. They also restore the gripping function. On the other hand, finger prostheses allow for mobility of the residual fingers and are faster to don and doff than partial hand prostheses. These different advantages and the preconditions and requirements of the patient must be weighed, and finally a decision has to be made about which fitting will be the most suitable for the patient.

2.2.4 Contraindications
A silicone finger or partial hand prosthesis cannot be used for unhealed residual limbs. The prosthesis could put too much strain on the unhealed residual limb, which would result in pain for the patient and could slow down the wound healing process. Large volume changes of the residual limb are another indication against the use of a silicone finger or partial hand prosthesis. Excessive volume fluctuations prevent the prosthesis from obtaining sufficient hold on the residual limb. This can cause the prosthesis to fall off the residual limb. If such problems are known, the patient should consult the physician.

In case of distal amputations, bacteria can get under the skin via the remainder of a fingernail or pressure points may develop. Therefore, a physician should be consulted regarding removal of the remaining nail prior to a fitting with a silicone finger or partial hand prosthesis.

2.3 Palpating the residual limb
After the patient interview has been completed, the affected hand or finger is palpated for pain-sensitive or bony areas, areas with high soft tissue coverage or noticeable scar tissue. It is of special importance to palpate the shape of the bone end in the stump for the condyles and to document them, because the impression will not show them. Any conspicuous results gained during this step must be recorded on the Ottobock measurement form or documented on the measurement form as a sketch.

For this purpose, palpate the residual limb all around with light pressure using your thumb, index and middle finger and search for conspicuous areas.
2.4 Testing joint mobility

Test the mobility of the residual limb in the flexion and extension directions. On the one hand, you should find out whether the carpal and metacarpal joints as well as the remaining fingers have free or limited mobility. On the other hand, you should test whether the remaining thumb can be brought into an abduction and opposition position.

2.5 Taking measurements

It is very important to measure accurately because the test prosthesis will be fabricated based on the measurements. Therefore, the factors that have to be taken into account when taking the measurements in order to ensure an optimal fit of the prosthesis are described below.

This measurement process applies to both partial hand prostheses and finger prostheses.
Circumferences
Measure the circumferences of the residual limb to the millimetre. The measuring tape must be in full contact with the skin but must not constrict soft tissue. The photo shows correct tension of the measuring tape.

If the measuring tape is applied too tightly to the finger, a prosthesis fabricated on the basis of this measurement will be too tight.

The measuring tape is applied too tightly to the residual limb

If the measuring tape is applied too loosely to the finger, the prosthesis will be too loose and can come off the patient’s stump.

The measuring tape is applied too loosely to the residual limb
Measurements

All required lengths are measured with the hand in the functional position:

- The wrist is at 25° – 30° extension.
- The wrist shall not have any radial or ulnar deviation.
- The fingers are in the light flexion position so that contact can be made between the thumb, index and middle finger.
- The thumb is in direct opposition to the index and middle finger.

Measure all lengths with a measuring tape. Apply the measuring tape between the fingers and read the length distally. The finger to be measured must be flat without tension and hyperextension.

2.5.1 Taking measurements for a finger prosthesis

The following measurements must be taken and recorded on the measurement form in order to fabricate a finger prosthesis.

Circumferences of the amputated side

First draw the residual limb shape in the sketch on the measurement form. If the residual limb condition is too difficult to draw in the present sketch on the measurement form, please make a contour drawing on the back of the measurement form. Note the circumferences at the corresponding places.

For a finger prosthesis, three circumference measurements of the two fingers adjacent to the amputated finger have to be taken:

- Circumference between MCP and PIP
- Circumference between PIP and DIP
- Circumference between DIP and fingertip

In regards to the amputated finger, all measurements possible according to the respective residual limb are taken. The process is similar to that used for measuring the finger circumferences for partial hand prostheses (see section 2.5, page 11).
2.5.2 Taking measurements for a partial hand prosthesis

The following measurements must be taken and recorded on the measurement form in order to fabricate a partial hand prosthesis.

Circumferences of the amputated side

For a partial hand prosthesis, the circumferences from the distal residual limb end up to beyond the styloid process are measured at different points and recorded on the measurement form.

First make a sketch of the residual limb on the back of the measurement form.

Circumferences of the contralateral side

The required circumferences that have to be measured on the contralateral side are the same as those taken on the amputated side – i.e. on the finger that corresponds to the amputated finger and on the two proximate fingers.

Lengths of the amputated side

Finger prostheses as well as partial hand prostheses require the residual limb length to be measured. For finger prostheses, the process corresponds to that used for measuring the residual limb length for partial hand prostheses (see section 2.5.2, page 16).

Lengths of the contralateral side

Measure the total length of the finger(s) of the contralateral hand corresponding to the amputated finger(s) of the other hand. Measure the lengths from the web to the fingertip and record them on the Ottobock measurement form.

Circumferences of the contralateral side

The required circumferences that have to be measured on the contralateral side are the same as those taken on the amputated side – i.e. on the finger that corresponds to the amputated finger and on the two proximate fingers.
Then use the calliper to measure the width over the metacarpophalangeal joints (MCP) as well as the metacarpal width.

Mark the styloid process and measure the wrist circumference distal to the styloid process as well as
If fingers are still present, also measure their circumferences. For this purpose, three circumference measurements of the two fingers proximate to the amputated finger must be taken. In regards to the amputated finger, all measurements possible according to the respective residual limb are taken.

Starting at the proximal end of the finger, measure the circumferences between the joints and record the measurements on the measurement form.

Take the last measurement at the fingertip. Draw the areas where measurements are taken on the Ottobock Service Fabrication Silicone measurement form. Record the measurements.
Lengths of the amputated side

Measure the total residual limb length of the amputated fingers. Apply the measuring tape laterally on the inner side of the finger distal to the web. Record the measurements on the sketch of the residual limb on the back of the measurement form.

Circumferences of the contralateral side

In order to optimally adapt the prosthesis to the natural hand, measurements of the contralateral side must be taken as well. The points where the circumference has to be measured are outlined on the Ottobock Silicone Service Fabrication measurement form. These are the same measurements that have been taken on the amputated side:

- Width over the metacarpophalangeal joints (MCP)
- Metacarpal width
- Wrist circumference distal to the styloid process
- Circumference proximal to the styloid process
- Circumference between MCP and PIP
- Circumference between PIP and DIP
- Circumference between DIP and fingertip

**INFORMATION**

Circumferences must not be measured over the joints, because these measurements vary as the joints are flexed.
3 Colour determination

3.1 Preparing the workplace for colour determination

Tools:
1. 89D4 Colour determination Ring
1. Camera
1. 646F285=GB Colour determination Sheet

Equipment:
Bright room with as much natural light as possible

3.2 Conditions for colour determination

Colour determination should take place under neutral daylight with additional artificial light, because during their day-to-day lives, patients are exposed to daylight as well as artificial light. Artificial light should be provided by neon tubes (daylight type). Please make sure that the Colour Determination Sheet is not exposed to direct sunlight. Direct sunlight makes skin on photographs look paler than it really is. The patient should sit frontally to the window/to the incident light.

For colour determination, it is also important that the patient is not cold and has a balanced pulse. If colour determination and impressions are completed on the same day, colour determination should be completed first since the process of taking impressions changes the colour of the skin. For good and clear colour determination, it is also important that the fingernails are free of artificial nails, adhesive for artificial nails and nail polish. Apply skin cream to dry hands to make the appearance of the colours better.

INFORMATION

It is very important that the patient is sitting during colour determination. In a standing position, the corresponding hand position causes blood to flow to the hands which makes them appear redder than they are when the patient is sitting.

3.3 Limitations of colour determination

The patient should be informed about the limitations of colour determination before proceeding. Although it is possible to fabricate a prosthesis that is very similar to the natural hand, it is important to note that colour determination takes place at a given moment in time and that many factors influence the skin. For example, the skin is darker in the summer time than it is in the winter time. States of mind such as tiredness or excitement also cause the skin to change its colour. Therefore the patient should be in a normal circulatory condition and emotional state.
3.4 Determining the main colour

The main colour is chiefly found on the back of the hand and between the finger joints.

Ask the patient to put his/her hands in a relaxed position on the 646F285=GB Colour Determination Sheet so that at least one full colour scale is visible and free of shadow. If this is not possible with the scales on the form, you may cut out one colour scale and apply it as needed.

Finally choose the main colour using the thinnest end of the colour sample (lip) of the 89D4 Colour Ring.
Record the number of the chosen main colour on the measurement form for colour determination.

**INFORMATION**

If none of the colours of the Colour Ring match the main skin colour, select the colour of the Colour Ring that is most similar to the main colour. On the Ottobock Service Fabrication Silicone order form, you can then describe how much the colour differs from the actual skin colour. The technicians at Ottobock Service Fabrication Silicone will then choose a corresponding colour and send it to you for verification and confirmation along with the test prosthesis.

### 3.5 Determining additional colours for the “classic” version

With the “Classic” version, there is the option of choosing two other colours in addition to the main colour. This allows the prosthesis to be more closely adapted to the natural hand or finger. The prosthetist can also select the required colours for the “joints” and “fingertips”. Use the Colour Ring for colour selection and record the numbers of the chosen colours on the measurement form for colour determination. The additional colours can also be selected by Service Fabrication Silicone based on the photos.
3.6 Taking photographs of the hands

In addition, informative photographs of both hands taken from different perspectives are required. They serve to document a visual impression of the fingers and the entire hand. The patient should be sitting and lay both hands side by side on the Colour Determination Sheet in order to take the photographs.

The camera flash must be turned off and the macro function activated. Hold the camera parallel to the photo background and as close to it as possible. The pictures should be made from a bird’s eye view. Make sure the photographs are not blurred or wiggly. If these instructions are not followed, the ability to fabricate a natural prosthesis will be limited. Ottobock Service Fabrication Silicone needs four pictures of the hands (dorsal, upright and palmar) for the fabrication of a silicone prosthesis.

Dorsal view

Upright view
It is important to take another photo with the corresponding colour sample of the main colour from the Colour Ring.

Position the colour samples on the respective areas of the hand or finger to make a comparison between the colour samples and the colours of the hand or finger possible. Determination of the main colour is described in section 3.4 on page 18.

Ensure that the colour number is clearly visible.
4 Taking the impression

After the anamnesis interview has taken place, the residual limb has been measured and the colour has been determined, you can start taking an Impresil impression of the residual limb. In many cases, particularities of the residual limb or in the patient’s history are observed while the impression is being taken. These also have to be documented on the Ottobock measurement form.

Since the test prosthesis is fabricated according to the position of the impression, make sure that the hands are in a relaxed functional position when taking the impression.

A tense, unnatural position of the hands could falsify the results. In many cases, the position of the fingers must be subsequently changed on the test prosthesis — which is very time consuming — because the hand/fingers were not in a relaxed functional position when the impression was taken.

4.1 Preparing the workplace for creating the negative

Material:
Suitcase set Impresil
642V15=1 for purchase
642V15=MP5710 on loan
Disposable apron
84V1 Vaseline
699G3=12 Plaster Bandages

Tools:
1 89G9 Alginate Spatula
1 719G1 Plaster Cast Scissors

Equipment:
Room with sink and waterproof floor

INFORMATION
When using Impresil, please observe the safety instructions in the 647G363 Instructions for Use.

Covering clothing
Prior to applying the Impresil for the impression to the skin, give the patient a disposable apron to wear in order to protect their clothing. Impresil that has cured is easy to remove from the floor and from objects, but not from textiles.
Preparing the impresil cartridge

With the help of the mixing gun and the static mixer, the two Impresil components are mixed homogeneously and in the correct proportion. They can be applied immediately thereafter and directly to the desired area.

To insert the cartridge into the mixing gun, pull out the plunger of the mixing gun as far as possible and put the Impresil cartridge with the notch down into the mixing gun.

Remove the protective cap from the Impresil cartridge. Next, apply an unused static mixer to the Impresil cartridge and secure it by turning.

**INFORMATION**

Before applying the Impresil to the hand or finger, the first 1.5 centimetres of Impresil of a new Impresil cartridge should be thrown away because the two components have not yet mixed in the correct proportion. For more detailed information on the application of Impresil, please refer to the 647G363 Instructions for Use.
4.2 Applying impresil to the affected side

At a room temperature of 23°C, the processing time of Impresil is about 6 minutes. However, since cured Impresil bonds with uncured Impresil, the impression can be taken without time restrictions. Make sure that the Impresil impression has a wall thickness of at least 2 mm to be stable enough. It is important to comply with this requirement when taking the impression. The impression in conjunction with the measurements that have been taken will subsequently provide the basis for the fabrication of the prosthesis.

Positioning the hand

Before taking the impression, the hand must be brought into a suitable position. Ask the patient to loosely shake the hand close to the body and lift it in a relaxed position. Take the Impresil impression with the hand in this position.

Applying Impresil

Apply Impresil to the hand beginning with the spaces between the fingers. Hold the cartridge vertically to the hand and slowly press the Impresil out of the cartridge in lines. Make sure to apply the Impresil lines as close to one another as possible, enclosing the least amount of air in the Impresil and always leaving the tip of the static mixer in the soft material.
Once the spaces between the fingers are completely covered with Impresil, continue to **cover the dorsal side of the hand with Impresil.**

Disperse the **Impresil using a spatula.** Ensure that as few air bubbles as possible are enclosed in the Impresil and that an even layer is achieved. It is a natural reaction of the patient to slightly spread the fingers when Impresil is applied between them. Ensure that the relaxed functional position of the hand is maintained while continuing to apply Impresil.

**Cover the inner side of the hand with Impresil.** The patient has to take care not to change the hand position when turning the hand. Proceed as described above.

**INFORMATION**

Impresil impressions for **partial hand prostheses** must include the styloid process. Impresil impressions for **finger prostheses** only have to include the affected finger and the proximate fingers. This impression must fully cover the metacarpophalangeal joints!
4.3 Applying impresil to the contralateral side

The next step is to take an Impresil impression of the contralateral side. This impression is required in order to enable Ottobock Service Fabrication Silicone to fabricate a customised prosthesis. The procedure is the same as with the affected side. The impression for a partial hand prosthesis should include the styloid process. For silicone finger prostheses, it is sufficient to take an Impresil impression of the affected fingers from the residual limb to the two proximate fingers.

4.4 Removing the impresil

Impresil takes about 6 minutes to cure completely. The impression can only be removed from the hand after this period. Since Impresil is more flexible and expandable than plaster, it is not necessary to cut the Impresil negative open for removal.

First loosen the edge of the Impresil negative and ask the patient to carefully move his or her fingers in the cured Impresil impression.

As soon as the patient feels that the fingers are separating from the Impresil impression, slightly loosen the hand from the impression by massaging the Impresil.
Then carefully pull the hand out of the impression. If the patient does not manage to get his/her hand out of the impression, we recommend cutting a prede-
termined breaking point into the Impresil from the beginning of the impression to the maximal metacar-
pal circumference and gluing it together later.

**INFORMATION**
The degree of curing of the Impresil is recognisable at the edge of the Impresil. The Impresil has fully cured when it is no longer sticky.

**4.5 Stabilising the impresil impression with plaster bandages**
The Impresil impression can be additionally stabilised by wrapping it with plaster bandages. It is important, however, not to change the shape of the Impresil im-
pression. Wrapping the Impresil impression with plas-
ter bandages makes it less sensitive to shocks during transportation.

**4.5 Transportation and storage**
To provide better protection, thoroughly wrap the Impresil impression and finally send the impressions along with the completed measurement form and the pictures burned on a CD to Ottobock Service Fabrication Silicone. As an alternative you may also send the pictures per e-mail to Service Fabrication Silicone (servicefertigung_silikon@ottobock.de).
Silicone Finger Prosthesis
Order form

<table>
<thead>
<tr>
<th>Customer</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Company</td>
<td></td>
</tr>
<tr>
<td>Street</td>
<td></td>
</tr>
<tr>
<td>Postal code/city</td>
<td></td>
</tr>
<tr>
<td>Email</td>
<td></td>
</tr>
<tr>
<td>Patient ID</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Shipping address</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Company</td>
<td></td>
</tr>
<tr>
<td>Street</td>
<td></td>
</tr>
<tr>
<td>Postal code/city</td>
<td></td>
</tr>
<tr>
<td>Phone</td>
<td></td>
</tr>
</tbody>
</table>

**Age:** 

**Gender:** □ Female □ Male

**Affected side:** □ Left □ Right

**Configuration**

- **88A1=PF** Trial Prosthesis
- **88A1=FF** Definitive Prosthesis “Basic”
  - Colour code per 89D4
- **88A1=FS** Definitive Prosthesis “Classic”
- **88A1** Definitive Prosthesis “Natural”
- Colour determination as per colour determination sheet
- Silicone fingernails (uni-coloured)
- **88A1=S** Silicone Fingernails (multi-coloured)
- **88A1=A** Acrylic Fingernails

**Scope of delivery**

- □ Photos of affected and contralateral sides
- □ Casting

**Case history**

- Finger joints:
  - □ Free moving
  - □ Limited motion

- Bone end:
  - □ Wide
  - □ Pointed

**Diagnosis**

- □ Accident
- □ Dysmelia
- □ Other
- □ Arm length differences
- □ Accompanying disease

**Affected fingers:**

Left hand:

- □ I
- □ II
- □ III
- □ IV
- □ V

Right hand:

- □ I
- □ II
- □ III
- □ IV
- □ V

**Comments:**
# Silicone Finger Prosthesis
## Measurement form

**Measurement from contralateral side**
Please mark the circumferences of the contralateral side. Take the finger length measurements from the highest point of the MCP joint to the fingertip in a relaxed, functional position.

### Finger measurements

<table>
<thead>
<tr>
<th>D</th>
<th>I</th>
<th>II</th>
<th>III</th>
<th>IV</th>
<th>V</th>
</tr>
</thead>
<tbody>
<tr>
<td>MCP-PIP (circumference)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PIP-DIP (circumference)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DIP (circumference)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Finger length from MCP joint</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Finger length from webbing</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Measurement from amputated side**
Please sketch the course of the amputation or use the free “Outline” field on the next page.

### Finger measurements

<table>
<thead>
<tr>
<th>D</th>
<th>I</th>
<th>II</th>
<th>III</th>
<th>IV</th>
<th>V</th>
</tr>
</thead>
<tbody>
<tr>
<td>MCP-PIP (circumference)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PIP-DIP (circumference)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DIP (circumference)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Finger length from MCP joint</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Finger length from webbing</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Silicone Finger Prosthesis

Colour determination sheet

<table>
<thead>
<tr>
<th>Contact</th>
<th>Customer number</th>
<th>Date</th>
</tr>
</thead>
</table>

Colour sample – colour strength

Use pen to mark skin colours on the sketch

<table>
<thead>
<tr>
<th>IV</th>
<th>III*</th>
<th>II</th>
<th>I</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pen</td>
<td>Colour sample</td>
<td>Colour strength</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Thickness III is recommended for the primer.

Nails

- [ ] Acrylic
- [ ] Silicone

Nail length

- [ ] Like photo
- [ ] mm longer

Nail shape

- [ ]
- [ ]

Colour

- Nail tip
- Distal edge
- Central
- Proximal edge
- Moon
# Silicone Finger Prosthesis

## Colour determination sheet

<table>
<thead>
<tr>
<th>Contact</th>
<th>Customer number</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

### Colour sample – colour strength

Use pen to mark skin colours on the sketch

<table>
<thead>
<tr>
<th>IV</th>
<th>III*</th>
<th>II</th>
<th>I</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pen</td>
<td>Colour sample</td>
<td>Colour strength</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Thickness III is recommended for the primer.

---

### Comments:

<table>
<thead>
<tr>
<th>Comments:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>
# Silicone Partial Hand Prosthesis

## Order form

**Contact**

<table>
<thead>
<tr>
<th>Customer number</th>
<th>Shipping address (if different from customer address)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Company</th>
<th>Company</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street</td>
<td>Street</td>
</tr>
<tr>
<td>Postal code/city</td>
<td>Postal code/city</td>
</tr>
<tr>
<td>Email</td>
<td>Phone</td>
</tr>
<tr>
<td>Patient ID</td>
<td></td>
</tr>
</tbody>
</table>

**Age:**

**Gender:**

- [ ] Female
- [ ] Male

**Affected side:**

- [ ] Left
- [ ] Right

**Configuration**

- [ ] **88A2=PF** Trial Prosthesis
- [ ] **88A2=HF** Definitive Prosthesis “Basic”
  - Colour code per 89D4
- [ ] **88A2=HS** Definitive Prosthesis “Classic”
- [ ] **88A2=F** Definitive Prosthesis “Natural”
- [ ] Colour determination as per colour determination sheet
- [ ] Silicone fingernails (uni-coloured)
- [ ] **88A2=S** Silicone Fingernails (multi-coloured)
- [ ] **88A2=A** Acrylic Fingernails

**Scope of delivery**

- [ ] Photos of affected and contralateral sides
- [ ] Casting

**Case history**

**Finger joints:**

- [ ] Free moving
- [ ] Limited motion

**Bone end:**

- [ ] Wide
- [ ] Pointed

**Affected fingers:**

Please mark with a cross.

**Left hand**

- [ ] I
- [ ] II
- [ ] III
- [ ] IV
- [ ] V

**Right hand**

- [ ] I
- [ ] II
- [ ] III
- [ ] IV
- [ ] V

**Diagnosis**

- [ ] Accident
- [ ] Dysmelia
- [ ] Other
- [ ] Arm length differences
- [ ] Accompanying disease

**Comments:**

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
# Silicone Partial Hand Prosthesis

## Measurement form

### Measurement form contralateral side
Please mark the circumferences of the contralateral side. Take the finger length measurements from the highest point of the MCP joint to the fingertip in a relaxed, functional position.

### Finger measurements

<table>
<thead>
<tr>
<th></th>
<th>I</th>
<th>II</th>
<th>III</th>
<th>IV</th>
<th>V</th>
</tr>
</thead>
<tbody>
<tr>
<td>MCP-PIP (circumference)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PIP-DIP (circumference)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DIP (circumference)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Finger length from MCP joint</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Measurement form amputated side
Please sketch the course of the amputation or use the free “Outline” field on the next page.

### Finger measurements

<table>
<thead>
<tr>
<th></th>
<th>I</th>
<th>II</th>
<th>III</th>
<th>IV</th>
<th>V</th>
</tr>
</thead>
<tbody>
<tr>
<td>MCP-PIP (circumference)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PIP-DIP (circumference)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DIP (circumference)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Finger length from MCP joint</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Silicone Partial Hand Prosthesis

### Colour determination sheet

<table>
<thead>
<tr>
<th>Contact</th>
<th>Customer number</th>
<th>Date</th>
</tr>
</thead>
</table>

### Colour sample – colour strength

Use pen to mark skin colours on the sketch

* Thickness III is recommended for the primer.

<table>
<thead>
<tr>
<th>Pen</th>
<th>Colour sample</th>
<th>Colour strength</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II</td>
<td></td>
<td></td>
</tr>
<tr>
<td>III</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Model blood vessels: [ ] Yes [ ] No

### Nails

- [ ] Acrylic
- [ ] Silicone

### Nail length

- [ ] Like photo
- [ ] mm longer

### Nail shape

- [ ]
- [ ]

### Colour

- Nail tip
- Distal edge
- Central
- Proximal edge
- Moon

Otto Bock HealthCare GmbH · Max-Näder-Str. 15 · 37115 Duderstadt
T +49 5527 848-3030 · F +49 5527 848-1585 · servicemontage@ottobock.de · www.ottobock.com
Silicone Partial Hand Prosthesis
Colour determination sheet

<table>
<thead>
<tr>
<th>Pen</th>
<th>Colour sample</th>
<th>Colour strength</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Thickness III is recommended for the primer.

Comments:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________