

This page can be inserted into the User's Care Plan to record specific sling information for the individual

Name of User:		
Name of Care Plan Manager:		
Name of OT/Assessor:		
Sling Model:		
Size:		
Serial No:		
Tick preferred options		
LEG CONFIGURATION  ☐ Divided with modesty loop ☐ Divided without modesty loop ☐ Cradled ☐ Cradled with crossed strap	LEG STRAP CONFIGURATION*  ☐ Longest ☐ 2nd (orange) ☐ 3rd (green) ☐ 4th (yellow)	SHOULDER STRAP CONFIGURATION*  ☐ Extensor / Longest ☐ 2nd (orange) ☐ 3rd (green) ☐ 4th (yellow)
		*Note: some sling models have fewer loops than others.
ADDITIONAL NOTES:		
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