



# Cranial Remolding Orthosis (CRO) Device Form

Effective 5/19/05

Contact Person \_\_\_\_\_ (please print) Phone # \_\_\_\_\_

Name of Office or Facility \_\_\_\_\_ Fax # \_\_\_\_\_

Group # \_\_\_\_\_ Patient Name \_\_\_\_\_

Subscriber # \_\_\_\_\_ Subscriber Name \_\_\_\_\_

Referral # \_\_\_\_\_ Address \_\_\_\_\_  
(if applicable) (street)  
(city) (state) (zip)

**Request for CRO: Please complete all the questions fully. Failure to do so will result in delay or possible denial of claims.**

Patient Age \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ Multiple Birth? Yes \_\_\_\_\_ No \_\_\_\_\_

Primary Diagnosis \_\_\_\_\_ Date \_\_\_\_\_

Secondary Diagnosis \_\_\_\_\_ Date \_\_\_\_\_

Contributing Factor(s) resulting in diagnosis \_\_\_\_\_

Conservative Therapy done? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, type of Conservative Therapy \_\_\_\_\_

\_\_\_\_\_ # of Months \_\_\_\_\_

Measurement Completed by Physician or Orthotist? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, done manually? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, done by computer modeling scanner? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, graph/grid included with CRO request? Yes \_\_\_\_\_ No \_\_\_\_\_

Photographic Evidence included with CRO request? Yes \_\_\_\_\_ No \_\_\_\_\_

Surgery Required? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, specify the procedure \_\_\_\_\_

## Part A - Craniofacial Anthropometric Measurements to Define Asymmetry (measured in millimeters)

<u>Area</u>	<u>Measurements</u>	<u>Calculation</u>	<u>Discrepancy</u>
<u>Cranial (skull) Base</u>	<b>from</b> right and left subnasal ( <u>sn</u> ) point (midline under the nose) <b>to</b> tragus ( <u>t</u> ) (the cartilaginous projection in front of the external auditory canal)	<u>sn</u> to left <u>t</u> = _____ <b>minus</b> <u>sn</u> to right <u>t</u> = _____	
<u>Cranial Vault</u>	<b>from</b> right and left frontozygomaticus ( <u>fz</u> ) point (forehead just above the eye orbit) <b>to</b> right and left euryon ( <u>eu</u> ) (most lateral point of the head)	left <u>fz</u> to right <u>eu</u> = _____ <b>minus</b> right <u>fz</u> to left <u>eu</u> = _____	
<u>Orbitotragial Depth or Distance</u>	<b>from</b> right and left exocanthion ( <u>ex</u> ) point (outer point of the eye where the eyelids meet) <b>to</b> tragus ( <u>t</u> )	left <u>ex</u> to left <u>t</u> = _____ <b>minus</b> right <u>ex</u> to right <u>t</u> = _____	

Proceed to Part B

