SUPPLEMENTARY MATERIAL 6

**Cast Assessment/Measurements**

* Length: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Circumference: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Proximal Border: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Distal Border: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Cast Mold: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Water Retention: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Weight (Dry): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Weight (Wet): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Smell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Integrity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Range of Motion:

* Digits: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Thumb Opposition: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Wrist Flexion/Extension: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Wrist Ulnar / Radial Deviation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Forearm Supination: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Forearm Pronation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Elbow Flexion/Extension: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_