



Steenberg Vet Clinic  
 Shop 1A  
 Steenberg Village Shopping Village  
 Tokai

**Email:** [info@holisticvet.co.za](mailto:info@holisticvet.co.za)  
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**Neck brace Measurement Form**

<b>Name:</b> .....	<b>Landline:</b> .....
<b>Address:</b> .....	<b>Cell:</b> .....
.....	<b>Email:</b> .....
.....	<b>Vet:</b> .....

*Brief Description of your Dog's condition:*

<b>Dog's Name:</b>		<b>Breed:</b>	
<b>Weight:</b>		<b>Male or Female:</b>	
<b>Age:</b>		<b>Spay or Neuter:</b>	
<b>Type of injury:</b>		<b>Date of injury:</b>	

**Measurements**

A	Most cranial circumference just at the base of the occiput: (circumference at the top of the neck)	
B	Most caudal circumference at distal cervical region: (circumference at the base of the neck)	
C	Desired dorsal length for cervical brace: (length of the top from head to beginning of neck)	
D	Desired ventral length for cervical brace: (length from under the head to where the chest meets the neck)	

Holistic Vet does not take responsibility for measurements, which are done incorrectly. Please be thorough when doing measurements. This is a custom made product.

Please be advised that a 50% cart deposit fee is required in order to process your order. EFT / credit card / cash are accepted.

**Print Name:** .....

**Signature:** .....

**Date:** .....