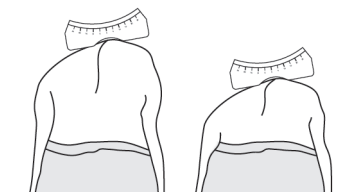




PROFESSIONAL MEDICAL PRODUCTS

SCOLIOMETRO - SCOLIOMETER SCOLIOMÈTRE  
- DAS SKOLIOMETER - ESCOLIÓMETRO  
- ESCOLIÓMETRO - ΣΚΟΛΙΟΜΕΤΡΟ  
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Manuale utente - User manual - Notice d'utilisation - Betriebsanweisungen - Manual de uso - Manual de uso - εγχειρίδιο - دليل الإستعمال والرعاية



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gima@gimaitaly.com - export@gimaitaly.com  
www.gimaitaly.com  
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4) a posterior rib hump in the chest wall.

The first three checks above can be easily done by observing the patient from behind and in erect position. It is more difficult to observe the entirety of the posterior rib hump in the chest wall, which is formed as vertebrae rotate around the spinal column. In fact, scoliosis causes the patient to modify his posterior rib position, so that both sides are no longer on a horizontal plane. The concave side of the scoliosis (Fig. 1, left side for observer) is curved inwards, therefore the posterior ribs are lowered, while on the convex side (Fig. 1, right side for observer) it is more protruding. The hump form can be seen more clearly by examining the patient's back view and having him bend his chest forward over his hips.

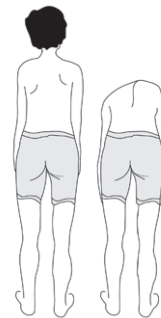


Fig 1 Fig 2

The non-horizontal alignment is thus visible. On this subject, for an accurate overall evaluation, it is most important that the patient bends forward correctly, feet together, arms hanging beside his legs and in a relaxed position (Fig. 2).

Various studies have shown that about 5% of school-age children have sideways bends. So careful screening by the family doctor, from the age of 6 till puberty, should be one of the routine checkups carried out.

The **Scoliometer**, a useful instrument for doctors in their everyday practice, diagnoses and measures rib hump. Based on the spirit-level principle, it has been adapted to allow measurement of the different heights of both parts of the thorax, with respect to horizontal, of scoliosis sufferers.

In order to quantify the amount of scoliosis, expressed in degrees, simply place the Scoliometer, without pressure, upon the patient's back, with the concave part of the instrument on the spinal apophysis. Then read on the scale the torso's angle of rotation (the angle between horizontal and an axis touching the back of the torso on top of the rib hump).

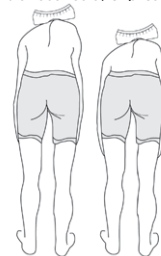


Fig 3 Fig 4

**Fig. 3** shows how the upper torso is measured, with the patient bending over slightly. **Fig. 4** shows the correct position of the thoracic area

over the hips for measuring the lumbar part of the spinal column, which requires a full forward bend. The instrument contains a small sphere that slides within a track, directly indicating on the scale divergence from horizontal in degrees. This screening makes it possible to identify the defect and quantify it. Results greater than or equal to 5 degrees require attention. It is also possible to track results over time, thus obtaining a precise idea of the advancement, if any, of the pathological process, while also reducing X-ray exposure. The measured values are approximate.

When cleaning the item, do not use aggressive cleaning agents or solvents or the like, but use a damp cloth with mild soap and water; it is allowed to use denatured alcohol for disinfection.

**GIMA WARRANTY TERMS**  
The Gima 12-month standard B2B warranty applies.



ENGLISH

**SCOLIOSIS** is a deviation (morphological or functional) of the spinal column to the side, to the left or to the right. Often, scoliosis is first diagnosed by finding:

- 1) irregular vertical alignment of spinal hypophyses of the vertebrae (misalignment);
- 2) asymmetry of shoulders and hips;
- 3) prominence of one shoulder blade;