

Why Physicians Choose STARband®

★ Gold Standard

- More than 100,000 infants successfully treated with the STARband
- Largest selection of cranial remolding orthoses for treatment of Deformational Plagiocephaly and Craniosynostosis
- Over 135 STARscanners used in prestigious institutions worldwide

★ STARscanner Technology

We utilize the STARscanner System for capturing accurate head shape data alleviating the need for plaster casting. The STARscanner and STARband are proven to be clinically effective, with published results in medical journals.

★ Free Evaluations

The clinician can provide a free evaluation with 3-D head shape data for assessment. This information can be shared with physicians to determine appropriate treatment options.

★ Conservative Treatment

We encourage conservative treatment options, such as repositioning and tummy-time.

★ One STARband

Our experienced practitioners use the STARband, which allows us to successfully complete treatment for nearly all plagiocephaly patients with a single helmet—verses other providers who may suggest the use of multiple helmets.

★ Clinical Expertise

Our dedicated team of Certified/Licensed Clinicians are highly educated and participate in on-going training to specialize in cranial remolding helmet treatment.

★ Insurance Coverage and Patient Access

We are contracted with most/all insurance companies, including Medicaid. Our in-house Billing Department will work with families to minimize out of pocket expenses. We also work with many charitable organizations to help ensure that patients who need treatment receive the care they need.



NEW! EVALUATION AND TREATMENT OF DEFORMATIONAL PLAGIOCEPHALY AND OTHER HEAD SHAPE DEFORMITIES GUIDE.

We are committed to increasing awareness for the prevention and early intervention of infant head shape abnormalities. We have developed a new educational tool for the medical community that can be utilized for evaluating patient head shapes and determining the best path for treatment. To request this complimentary flip chart, please return this order form to the address below.

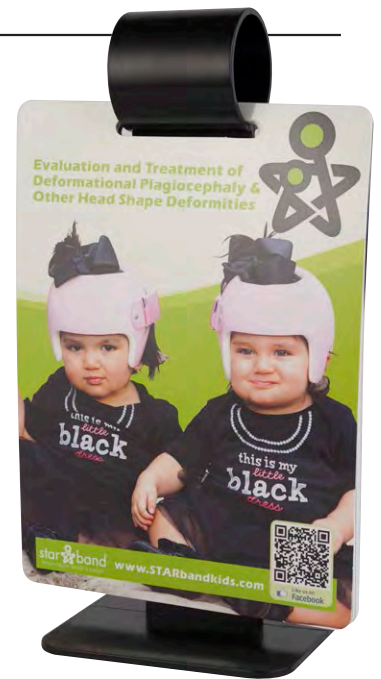
Practice Name:

Practitioner's Name:

Practice Address:

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Contact: