

Upper Extremity Options Form - Flat Knit Custom

Customer name _____ Bill to: _____ Ship to: _____

Account # _____ P.O. # _____

Patient Name _____

HAND PIECE: 1

Ending Circumference cZ
Base Circumference cX

AC 120 cm max length
AD 30 cm max length
AE 40 cm max length

Thumb

Length finger 1 _____ cm
Length finger 2 _____ cm
Length finger 3 _____ cm
Length finger 4 _____ cm
Length finger 5 _____ cm

Labels: cZ, cX, cA, cB, cC, cC', cD, cE, AC, AC', AD, AE, AB, 1, 2, 3, 4, 5, c

ARM SLEEVE 2

Circumference

Length cG-H _____ cm

Length _____ cm

Labels: cG, cF, cE, cD, cC', cC, cG', cF', cE', cD', cC', cC', cG, cF, cE, cD, cC', cC, cG', cF', cE', cD', cC', cC'

ANATOMICAL SHOULDER CAP (OPTIONAL) 3

Shoulder width _____ cm

(do not encroach into anterior/posterior axillary fold)
35cm max

page 1 of 2 (remember to fax with page 2)

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MATERIAL ¹

mediven 550

mediven mondi esprit

STYLE/QUANTITY ²

___ arm sleeve (cG)
(only)

___ long hand section (zD, zE)

___ 1 piece hand/arm combo (zG, AG)
(one garment)

___ 2 pieces hand/arm
 porous row for half compression

HANDPIECE/QUANTITY ³

___ gauntlet

___ glove
 finger open
 finger closed

COMPRESSION* ⁴

	CCL ¹ 15-21 mm/hg	CCL ² 23-32 mm/hg	CCL ³ 34-46 mm/hg
hand piece:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
arm sleeve:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SUPPORT OPTIONS ⁵

None

Topband Options

- Beaded Silicone Topband
 - small (2.5cm)
 - wide (5cm)
 - small (2.5cm) 3/4 circumference
- Profile (honeycomb pattern 5cm)
- Peony (beaded 5cm)

Beaded Silicone Pieces at G

- 5 x 5
- 5 x 10 width

Shoulder Attachments

- Shoulder Strap (K)
 - small (2.5cm) (adjustable)
 - wide (5cm) (velcro)
- Bra attachment strap
width of bra strap _____ cm
- Shoulder Cap
(partial compression)
 - Standard
(partial shoulder width)
 - Anatomical
(encompasses shoulder, must include Box 3 from page one)

OBLIQUE ENDING AT G ⁶

Standard Oblique

Steep Oblique

Straight Ending

KNITTING MARKS (FLEXION ANGLE) AT ELBOW ⁷

160 degrees (standard)

150 degrees

135 degrees (greatest flexion)

OTHER OPTIONS ⁸

Silk Lining Material

location: _____

(please include drawing in notes section)

width _____ cm length _____ cm

Lymphpad

location: _____

(please include drawing in notes section)

width _____ cm length _____ cm

COLOR ⁹ *Trend colors require an extra five days for delivery.

Left Right

Caramel Cashmere* Navy*

Black Cherry-Red* Magenta*

Sand Moss-Green* Aqua*




Anthracite*

DESIGN ELEMENTS ¹⁰

Live Laugh Love

Sportive

Timeless

NOTES/ADDITIONAL INFO ¹¹

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