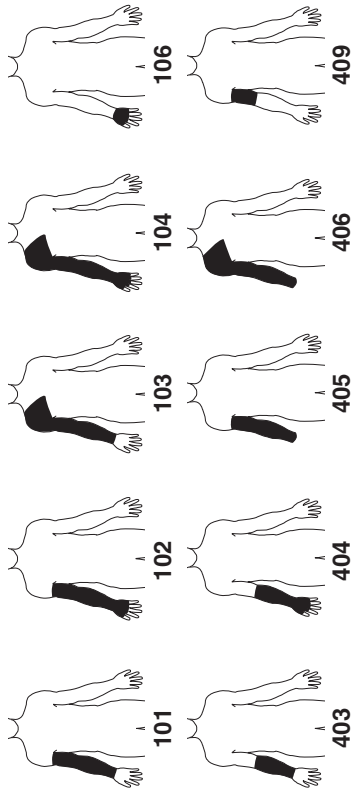


Form F-035 - Upper Extremity Supports



Purchase Order No _____ Date _____ Fitter's Phone No. _____

Ordered by _____ Patient _____ Age _____

Street _____ Ship to _____

City _____ State _____ Zip _____

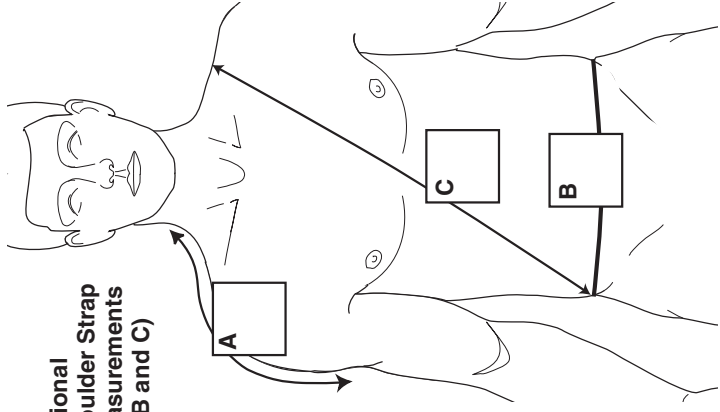
Street _____

City _____ State _____ Zip _____

For Gauntlets Only _____ Circumference between thumb joints
 Separate (or) One Piece with Sleeve

Wrist - Measurement is taken ahead of wrist bone, toward hand

Left	Right
3	
1½	
0	
1½	
3	
4½	
6	
7½	
9	
10½	
12	
13½	
15	
16½	
18	
19½	



Please refer to our current price list for a description of these items

HOTLINE SERVICE

(Guaranteed delivery in 4-5 business days, or less) **Additional Cost**

REQUIRED Allergies:

Allergic to silicone? Yes, No, NA | Allergic to metal? Yes, No, NA

OPTIONAL SHOULDER STRAP MEASUREMENTS: (See diagram)

- A. Length from end of last strap to base of neck, with arm at side (same side as sleeve or gauntlet)
- B. Waist Circumference
- C. Diagonal Length for Shoulder Flap with retaining strap

OPTIONS & EXTRAS:

- **Zipper:**
 - Lateral (Outside) (or) Medial (Inside) (or)
 - Posterior (Top)
- **Garment Color No:** _____
- **Elbow Lining:** Inside (or) Full (or) Outside
- **Strap:**
 - Worn to opposite axilla (or)
 - Adjustable, axilla to waist (or)
 - Two piece, with separate belt
 - Bra strap, with Velcro flap
- **Flex/Contracture Seam:** Elbow
- **Elastic Band:** Regular 1" 2" (or) Silicone 1" 2" (or) Microdot 2"

DIAGNOSIS: (Must be indicated to obtain proper counter-pressure)

- 22-28 mm Hg - Burns
- 25-30 mm Hg - Lymphedema Mild
- 30-35 mm Hg - Lymphedema Moderate
- 35-40 mm Hg - Lymphedema Severe

COMMENTS & INSTRUCTIONS:

Check this box if there are instructions on other side