

# LEFT FOOT OUTLINE

FOR USE WHEN ORDERING JOBST® OPEN OR CLOSED TOE GARMENTS

(For Right Foot, see other side)

Patient Name: \_\_\_\_\_

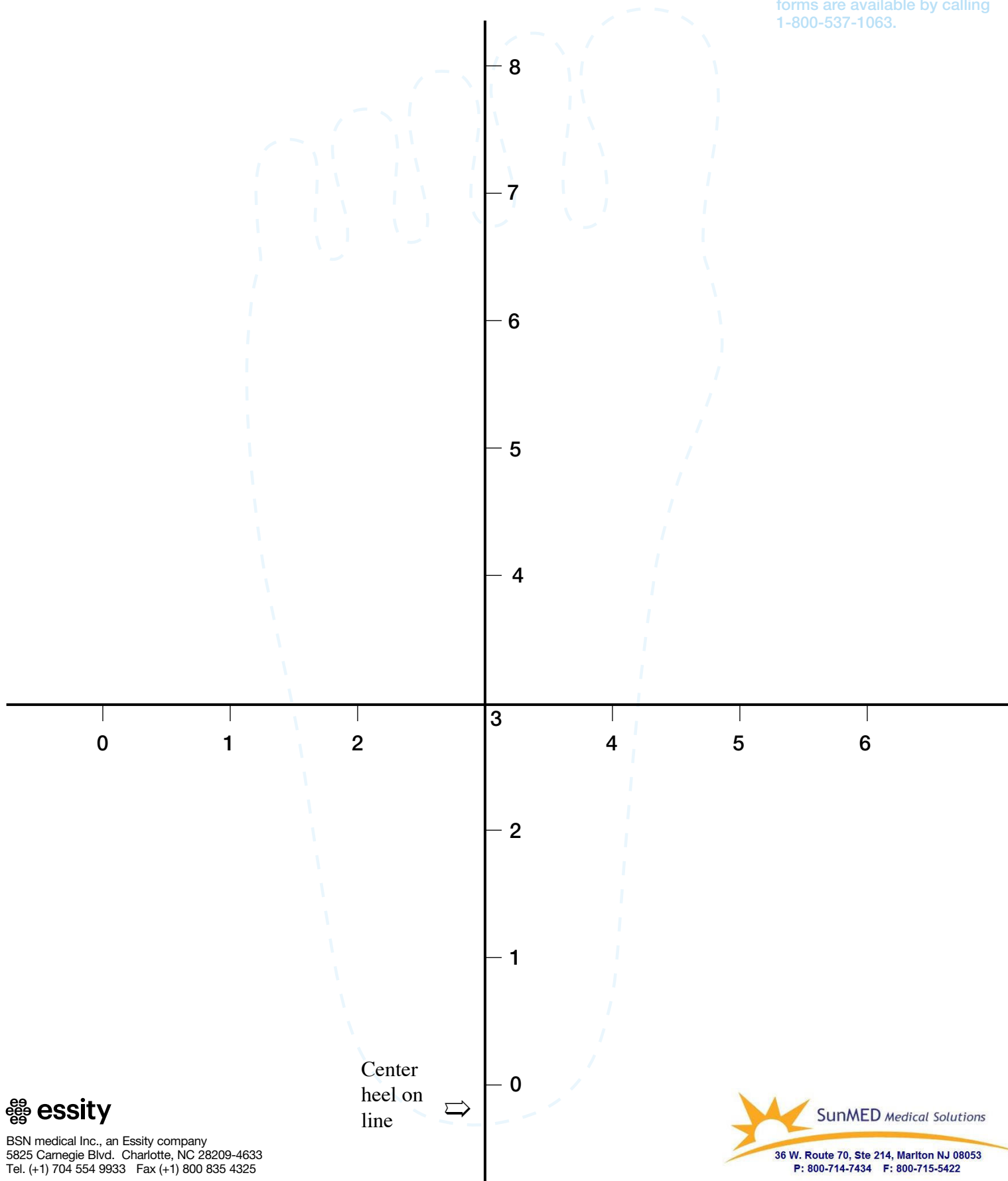
File#: \_\_\_\_\_

Acct. #: \_\_\_\_\_ Date: \_\_\_\_\_

Measured By: \_\_\_\_\_

## INSTRUCTIONS:

- 1) Place heel on center line.
- 2) Use black pen.
- 3) Fax or mail outline with order.
- 4) Do not copy form. Additional forms are available by calling 1-800-537-1063.



BSN medical Inc., an Essity company  
5825 Carnegie Blvd. Charlotte, NC 28209-4633  
Tel. (+1) 704 554 9933 Fax (+1) 800 835 4325

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Patient Name: \_\_\_\_\_

File#: \_\_\_\_\_

Acct. #: \_\_\_\_\_ Date: \_\_\_\_\_

Measured By: \_\_\_\_\_

Center heel on line