



Patient Last Name: _____ Patient First Name: _____
 Fitter Last Name: _____ Fitter First Name: _____
 Fitter Title: _____ (example: PT/OT/PTA)
 Date: _____

SIGVARIS CompreFLEX™ - BELOW KNEE & THIGH COMPONENT

Measure & Order Form

PRODUCT INFORMATION

LEFT LEG:

Below Knee (BK) Thigh Component (TC)

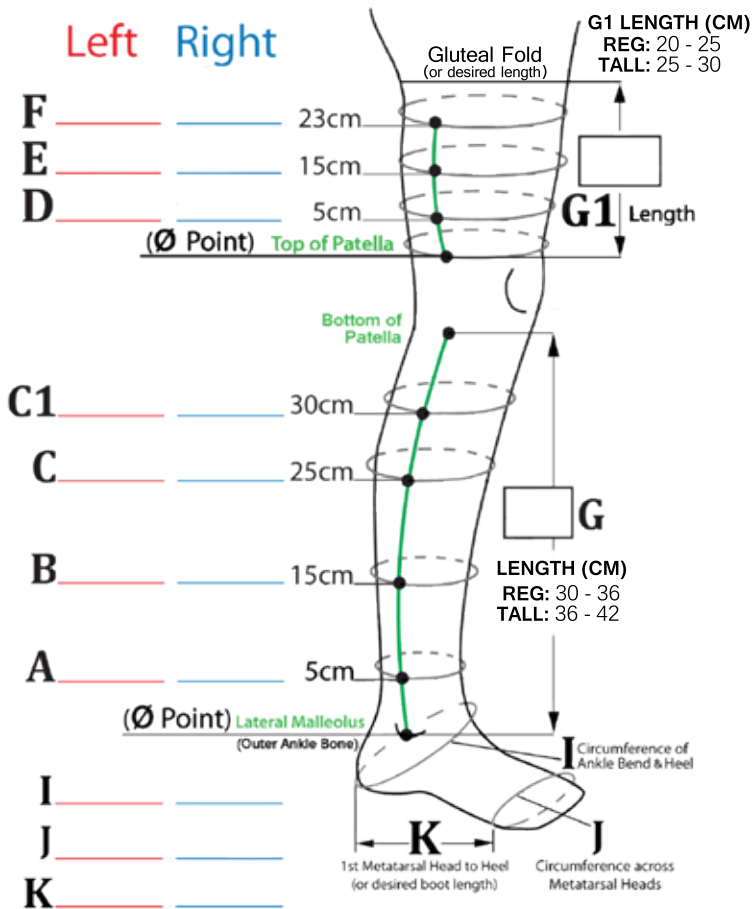
Size: _____ Size: _____
 Length: _____ Item #: _____
 Item #: _____
 Foot Size: _____

RIGHT LEG:

Below Knee (BK) Thigh Component (TC)

Size: _____ Size: _____
 Length: _____ Item #: _____
 Item #: _____
 Foot Size: _____

SIZING CHART & ITEM NUMBERS



COMPREFLEX - TC

	SMALL	MEDIUM	LARGE	X - LARGE
F	48 - 58	56 - 66	64 - 74	74 - 84
E	43 - 53	51 - 61	58 - 68	68 - 78
D	38 - 48	46 - 56	53 - 63	63 - 73
RIGHT				
REG	1401-TCR-R	1402-TCR-R	1403-TCR-R	1404-TCR-R
TALL	1401-TCT-R	1402-TCT-R	1403-TCT-R	1404-TCT-R
LEFT				
REG	1401-TCR-L	1402-TCR-L	1403-TCR-L	1404-TCR-L
TALL	1401-TCT-L	1402-TCT-L	1403-TCT-L	1404-TCT-L

COMPREFLEX - BK

	SMALL	MEDIUM	LARGE	X - LARGE	XX - LARGE
C1	29 - 39	34 - 44	40 - 50	46 - 56	54 - 64
C	29 - 39	34 - 44	40 - 50	46 - 56	54 - 64
B	24 - 34	29 - 39	34 - 44	39 - 49	44 - 55
A	16 - 26	21 - 30	26 - 36	31 - 41	36 - 46
REG	1401 - BKR	1402 - BKR	1403 - BKR	1404 - BKR	1405 - BKR
TALL	1401 - BKT	1402 - BKT	1403 - BKT	1404 - BKT	1405 - BKT

COMPREBOOT SIZING

	SMALL		MED/LARGE		XL/XXL	
	REGULAR	LONG	REGULAR	LONG	REGULAR	LONG
I	28 - 36	28 - 36	39 max	39 max	44 max	44 max
J	22 - 26	22 - 26	30 max	30 max	33 max	33 max
K	14 - 18	19 - 23	18 - 20	23 - 25	20 - 22	25 - 27