

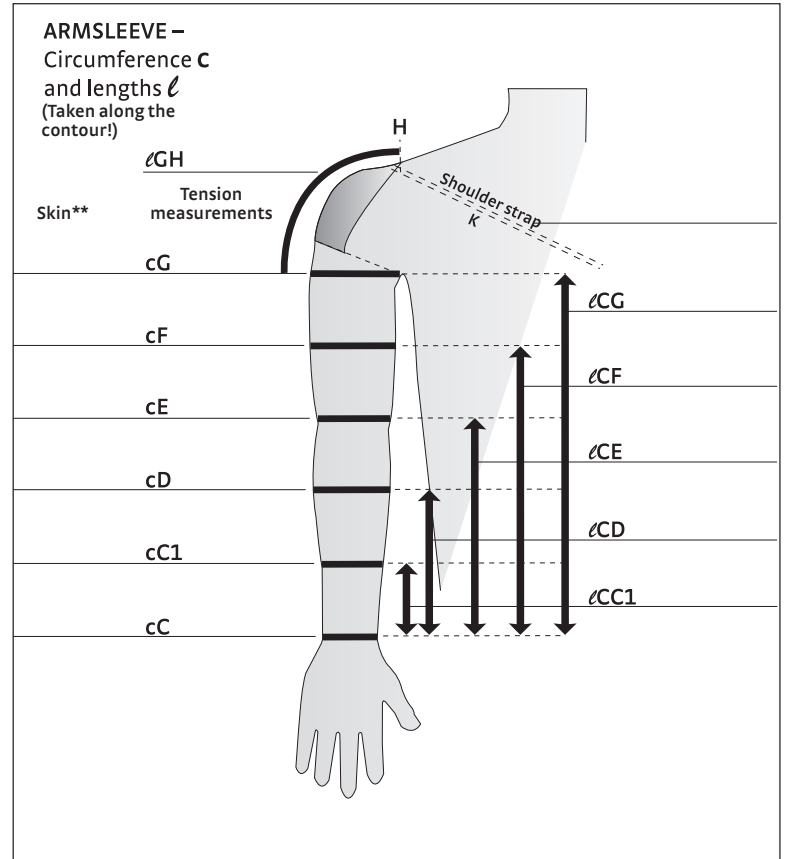
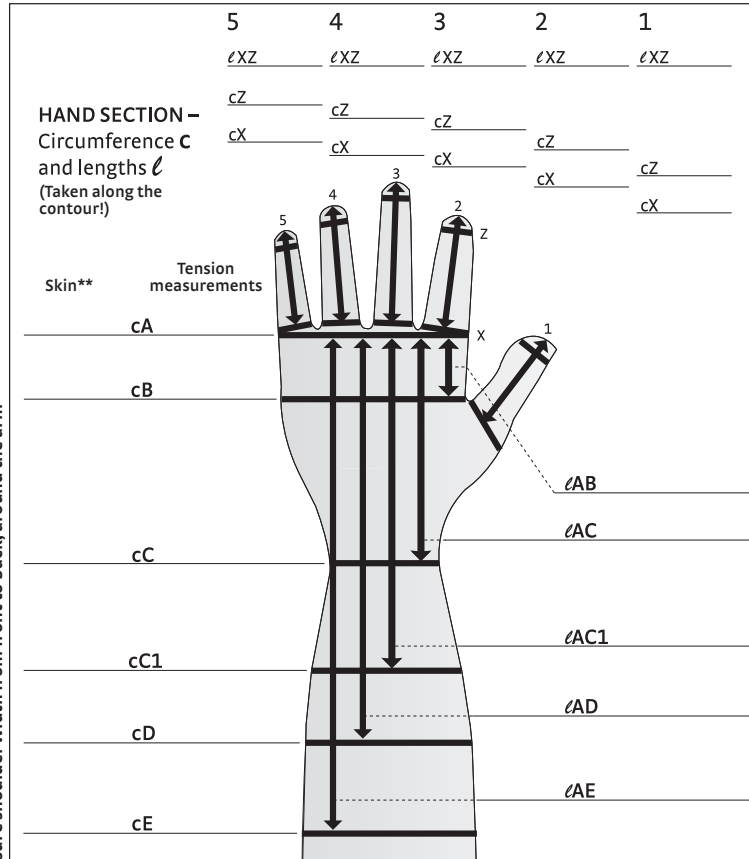
mediven® flat-knit arm & hand - Custom Order Form

Fax order to 1-888-840-0939 • email customs@mediusa.com

medi



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



**Requires 5 additional working days for production. **Skin measurements optional. *Measure shoulder width from front to back, around the arm

Material	Compression (CCL)	Standard Colors	Trend Colors*	Qty.	Side
<input type="checkbox"/> mediven 550 <input type="checkbox"/> mediven esprit	<input type="checkbox"/> I (15-21 mmHg) <input type="checkbox"/> II (23-32 mmHg) <input type="checkbox"/> III (34-46 mmHg)	<input type="checkbox"/> Caramel <input type="checkbox"/> Sand <input type="checkbox"/> Cashmere <input type="checkbox"/> Navy <input type="checkbox"/> Black <input type="checkbox"/> Anthracite	<input type="checkbox"/> medi Magenta <input type="checkbox"/> Blue-Jeans <input type="checkbox"/> Cherry-Red <input type="checkbox"/> Violet <input type="checkbox"/> Grey	pcs. _____	<input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Open fingers <input type="checkbox"/> Closed fingers

Style	Proximal Ending	Accessories			Topband
Hand piece <input type="checkbox"/> AC1 <input type="checkbox"/> AD/AE Armsleeve <input type="checkbox"/> CD/CE/CF/CG <input type="checkbox"/> AF/AG (1-PC)	<input type="checkbox"/> Straight (Porous 2cm) (Standard) <input type="checkbox"/> Flat oblique <input type="checkbox"/> Steep oblique <input type="checkbox"/> Flat oblique (Standard) <input type="checkbox"/> Steep oblique <input type="checkbox"/> Straight <input type="checkbox"/> Flat oblique (Standard) <input type="checkbox"/> Steep oblique <input type="checkbox"/> Straight	Position <input type="checkbox"/> Along the oblique border <input type="checkbox"/> On the palm Design Elements: <input type="checkbox"/> Live Laugh Love <input type="checkbox"/> Timeless <input type="checkbox"/> Sportive Swarovski® Crystals: Location: <input type="checkbox"/> Lower arm <input type="checkbox"/> Upper arm Pattern: <input type="checkbox"/> Crystal <input type="checkbox"/> Pearl <input type="checkbox"/> Roségold	Topband Piece Sizes <input type="checkbox"/> 5 X 2.5 cm <input type="checkbox"/> 5 X 5 cm <input type="checkbox"/> 5 X 10 cm <input type="checkbox"/> 20 X 2.5 cm <input type="checkbox"/> 5 X 5 cm	Anti-slip dots Fixed size <input type="checkbox"/> 6 X 4.5 cm <input type="checkbox"/> 6 X 4.5 cm	<input type="checkbox"/> Narrow 2.5 cm beaded <input type="checkbox"/> Wide 5 cm beaded <input type="checkbox"/> Sensitive 5 cm microdot <input type="checkbox"/> Motif 5 cm beaded <input type="checkbox"/> Rose 5 cm solid

Other Accessories	Shoulder Attachments	Special requests:
Knitting marks at elbow: <input type="checkbox"/> 160° (standard) <input type="checkbox"/> 150° <input type="checkbox"/> 135° <input type="checkbox"/> Elbow flexure functional zone (550 only) <input type="checkbox"/> Lymphpad <input type="checkbox"/> silk lining <input type="checkbox"/> Pocket (Please specify/draw in Special Requests) _____ length _____ width	<input type="checkbox"/> Shoulder cap standard <input type="checkbox"/> Shoulder cap anatomical: _____ cm <input type="checkbox"/> Shoulder strap width: <input type="checkbox"/> 2.5 cm (adjustable) <input type="checkbox"/> 5 cm (velcro) <input type="checkbox"/> Bra attachment width of bra strap: _____ cm	

Luna Medical, Inc. • Specialists in Venous & Lymphatic Insufficiencies

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