

CIRCAID Custom Armsleeve & Glove Form

Fax Orders: 888-840-0939 Email: customs@mediusa.com

| ☐ Exact Reorder Order |
|-----------------------|
| Number: |
| RMA#: |



| Customer Name | | | | | | | | | | |
|----------------------------------|---|--------------|------------------------|-------------------|-----------|------------------|-------------------|-----------------------------|---------------------|--|
| Customer No. — | Purchase Order No | | | | | | | | | |
| | | | | | | | | | | |
| Patient Name — | | | | | | | | | Fax | |
| Billing Address – | | | | | | | | | | |
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| Silippilig Address | 5 —— | | | | | | | | | |
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| Telephone —— | lephone Measured by | | | | | | | | | |
| Order Date | | | | Em | nail — | | | | | |
| | | | | | | | | | | |
| Shipping metho | od:□St | andard (| max. 5 days if comple | ete orde | r is rece | eived by 3:00p | om EST) [| Seco | ond Day (extra char | rge) |
| Credit Card Info- | | | | | | | | | | |
| iuvtafit® (| accar | ntiale | arm | | - | | | | 1 | Cavanun |
| Juxtant | essentials arm Oty Oty Standard Partial Partial Partial Made of extra-firm | | | | | | | | | Cover up color |
| | Qty Left | Qty Right | Standard arm sleeve | sleev | ve | Partial sleeve | Partial sleeve | Made of extra-firm material | | (indicate qty.) |
| | | | (C-G) | (C-E) |) | (E-G) | (C-F) | | | black |
| armsleeve | | | | | | | | | | (default)beige |
| juxtafit® | esser | ntials | zlove | | | | | | | pink |
| *open palm is | | | | | Qt | y Qty | Finger- | Ex | ctend wrist | |
| circumferences greater than 24cm | | | | | Lef | | | ba | and | Additional |
| glove | | | | | _ | \bot | | | ⊐3cm □6cm | Options |
| open palm glove | | | | | \bot | | | | ⊒3cm □6cm | Undersleeves |
| glove w/ dorsum strap | | | | | \bot | | | | ⊒3cm □6cm | (indicate qty.) |
| open palm glove w/ dorsum strap | | | | | | | | | ⊒3cm □6cm | silver |
| hand wrap | | | | | | | | | | wide |
| | | | - | | | | | | | *New custom options |
| graduate | тм | | | | | | | | | and add-ons may incur additional costs. |
| | Qty Left | Qty Righ | | Foam lateral rise | | op foam | Tack thur hole | nb | Band locks | |
| armsleeve | Leit | Kigii | + | 15cm | at | <u> </u> | liole | | | |
| | TM fo | am lir | er color or | | ns | | | | | |
| Interior | 10 | ann m | ici coloi op | | xteri | or | | | | |
| □ Beige (default) | | | | | | k (defa ı | ılt) | | | |
| Li Deige (uerault) | | | | | l Beig | | 416 <i>)</i> | | | |

Notes on taking measurements for custom-made circaid inelastic products

- Measurements for compression garments should not be taken until the best possible decongestion effort has been achieved. Circumference and length measurements are taken in a distal to proximal sequence. Measurements should be taken with the arm extended straight, such as with a patient lying flat on a table or standing.
- It is essential to mark the measuring points on the arm so that the circumference and length measurements are taken at the same point.
- The circumference measurements are taken without any tension as the products are adjustable and will accommodate some changes in size. Measurements are to be taken with skin measurements. Skin measurements should be taken loosely without tension.

Please take measurements without tension!

Patient Name: _ Arm measurement Please hold the arm straight. Circumferences Right in cm. Left in cm. 55 50 45 40 35 30 25 20 c C1 15 c C 10 Measurements 05 εC1 must be every 5cm from the _cC wrist starting point (C). eВ

Arm measurement Lengths

Left Right in cm.

left C-G

left C-F

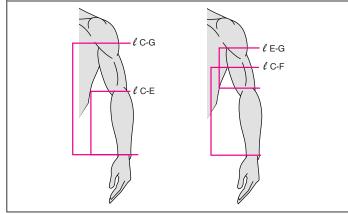
left Right in cm.

Please on the istraight

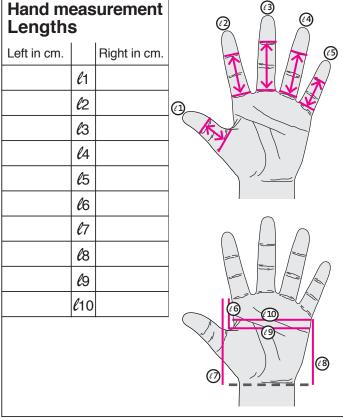
*Only &C-E and &C-G required for standard arm sleeve. Other measurements only needed for partial arm sleeves depending on sleeve end point.

Date:

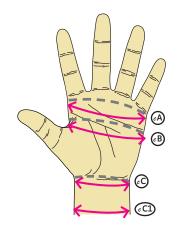
Please measure the length on the inside of the arm in a straight line.



| Hand measurement Circumferences | |
|---------------------------------|------------------------|
| Left in cm. Right in cm. | $\widehat{\mathbb{Q}}$ |
| 1cz | |
| 2 <i>c</i> z | SX |
| 3ez | |
| 4ez | (LX) |
| 5ez | |
| 1ex | |
| 2ex | |
| 3ex | |
| 4ex | |
| 5ex | (A) |
| cA | |
| eB Palm | 0 |
| وC Wrist | (I) |
| eC1 [*] | |
| 10* | 10 |



Arm & Hand Circumference Measurements

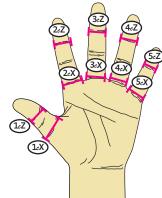


Circumference (c) A -Circumference of the hand even with the base of the little finger.

Circumference (c) B - Circumference of the hand even with the base of the thumb webbing.

Circumference (c) C - Circumference of the wrist.

Circumference (c) C1 - Circumference 5cm above C.

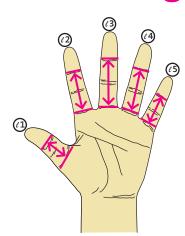


Circumference (e) Z 1-5 Circumference of each distal interphalangeal joint (or at the desired end location of the glove fingers), starting at the thumb (1) and working out to

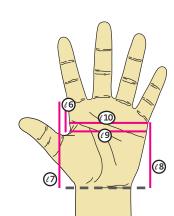
Circumference (c) X 1-5-Circumference of the base of each finger, starting at the thumb (1) and working out to the little finger (5).

the little finger (5).

Hand Length Measurements



Lengths (*l*) 1-5-Length from the base of each finger to the distal interphalangeal joint of each finger (or at the desired end location of the glove fingers), starting at the thumb (1) and working out to the little finger (5).



Length (ℓ) **6** - Length from the base of the index finger to the thumb webbing with the thumb in a relaxed postion.

Length (*l***)7 -** Length from the base of the index finger to the wrist.

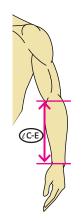
Length (ℓ)8 - Length from the base of the little finger to the wrist.

Length (ℓ) **9** - Length from the thumb webbing to the opposite side of the hand.

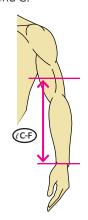
Length (ℓ) **10** - Length from the base of the little finger to the opposite side of the hand.

Arm Length Measurements

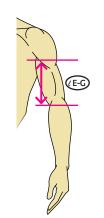
Lengths (ℓ) C-E-Length from the wrist to the elbow crease.



Lengths (ℓ) C-F-Length from the wrist to the midpoint of E and G.



Lengths (ℓ)**E-G-**Length from the elbow crease to the axilla.



Lengths (ℓ)C-G-Length from the wrist to the axilla.

