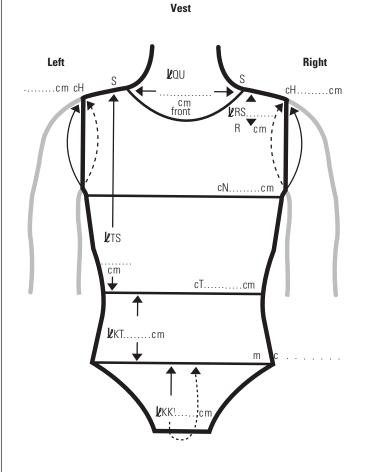
Custom Measurement Form for Compression Vests

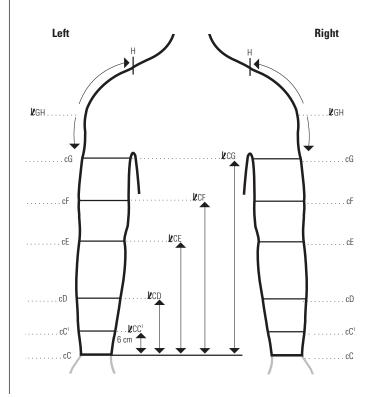
Phone: 1 800 222-4999 Fax: 1 800 645-2519



Account Information (Please Print) Account Number Re-order# Account Name Contact Ship to Address Phone Fax Patient ID P.O. Number Prescribing Physician Compression Quantity..... piece(s) 18-21 mmHg 23-32 mmHg Juzo® Expert ☐ Beige ☐ Fuchsia ☐ Blue ☐ Gray **3**021 **3**022 ☐ Dark Blue ☐ Chestnut ☐ Black ☐ Violet Juzo® Expert Silver (beige) □ 3021SV □ 3022SV Styles & Options: ■ Mid back ■ With zipper ☐ With hook & loop closure ☐ Slip on ■ With arm sleeve ■ Without arm sleeve ☐ Breast opening, cup size ☐ Breast cup seamless, cup size ■ Pocket for prosthetic □ left □ right ■ Stand up collar Neck circumference Stand up collar height_ (In this case, measurements & QU & & RS are not needed) ☐ Attached on a body part of a compression AT pantyhose (for hook and loop closure at "T" please attach pantyhose measurement form) ☐ Silicone border at "T"



Arm Sleeves / Arm Sleeve Extensions



Special requests:

With crotch panel (KK) (28cm length, 10cm width)Crotch panel closed wth hook & eye fastener