



Absolute Medical. 1843 W Hubbard St #2A  
 Chicago, IL 60622  
 Tel: 312 233 2207 Fax: 866 860 9358  
 To Order Online: orders@absolutemedical.com  
 Our website: absolutemedical.com

Patient Last Name: \_\_\_\_\_ Patient First Name: \_\_\_\_\_

Fitter Last Name: \_\_\_\_\_ Fitter First Name: \_\_\_\_\_

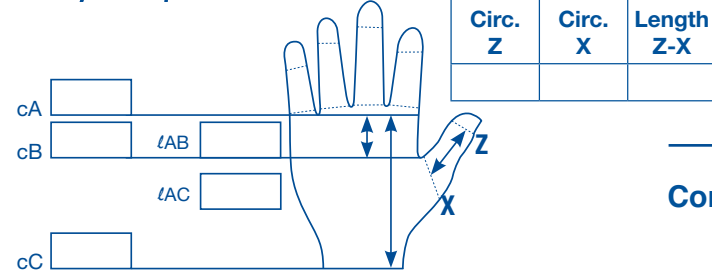
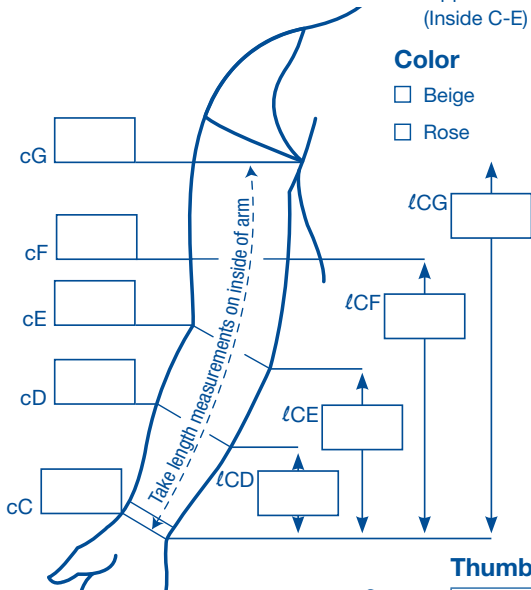
Date: \_\_\_\_\_

# Relax Order Form

## Armsleeves

Quantity/Class	CCL 1 (15-20 mmHg*)
Left	
Right	

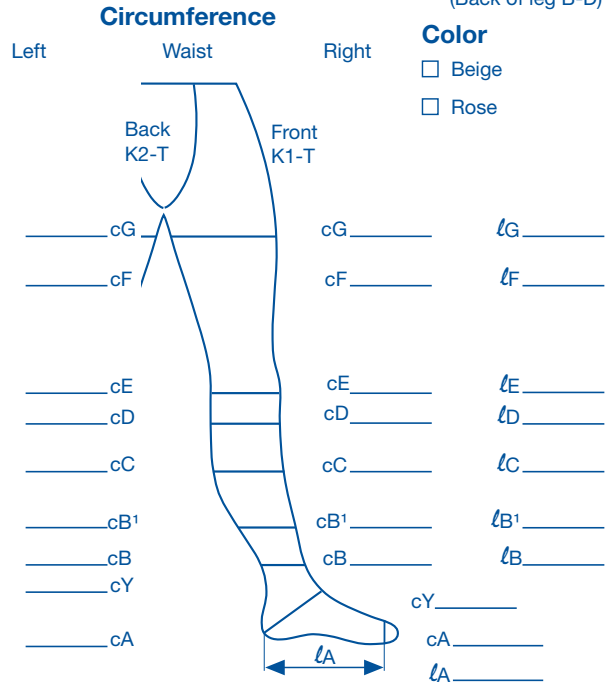
- Style**
- C-GI
  - A - GI gauntlet
- Options**
- Zipper  
(Inside C-E)
- Color**
- Beige
  - Rose



## Lower Extremities

Quantity/Class	CCL 1 (15-20 mmHg*)	CCL 2 (20-30 mmHg*)
Left (AD and AG)		
Right (AD and AG)		

- Basic styles**
- Knee High
  - Thigh High
- Options**
- Zipper  
(Back of leg B-D)
- Color**
- Beige
  - Rose



Comments: \_\_\_\_\_