

# mediven<sup>®</sup>

## flat-knit arm, hand & circaid profile-

### Custom Order Form



Fax order to 1-888-840-0939 email [customs@mediusa.com](mailto:customs@mediusa.com)

Customer Name \_\_\_\_\_

Bill to: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Account # \_\_\_\_\_

Ship to: \_\_\_\_\_

P.O.# \_\_\_\_\_

\_\_\_\_\_

Patient Name \_\_\_\_\_

\_\_\_\_\_

Date Measured \_\_\_\_\_

Notes: \_\_\_\_\_

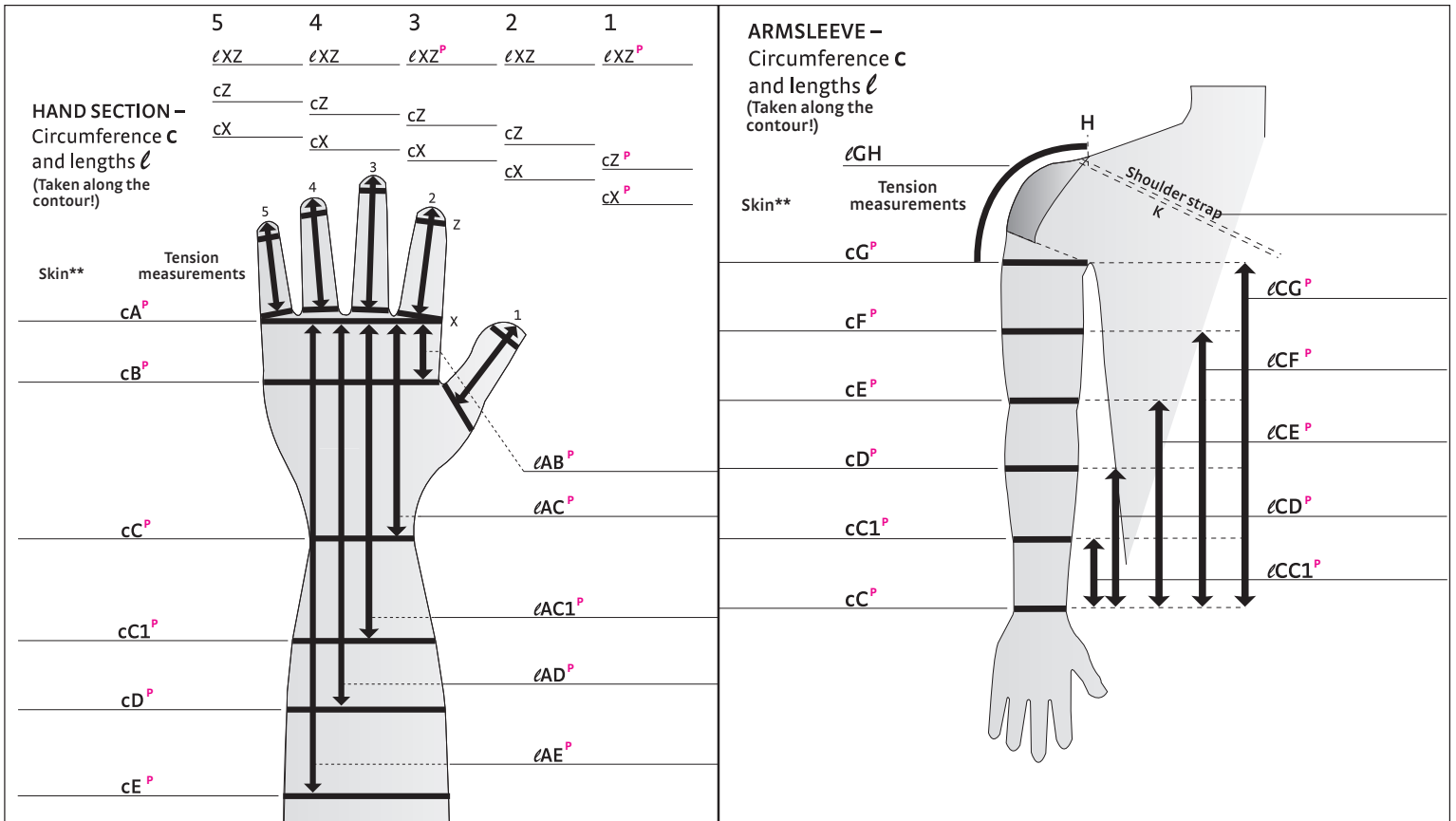
Measured By \_\_\_\_\_

\_\_\_\_\_

Exact Reorder Number \_\_\_\_\_

\_\_\_\_\_

Page 1 of 2 (remember to fax with page 2)



<sup>P</sup>Measurement required for circaid profile    <sup>\*\*</sup>Skin measurements optional.

Customer Name \_\_\_\_\_ Account # \_\_\_\_\_

Patient Name \_\_\_\_\_

**mediven flat knit arm & hand**

Material	Compression (CCL)	Standard Colors	Trend Colors*	Qty.	Side	Handpiece
<input type="checkbox"/> mediven 550	<b>CCL<sup>1</sup></b> 15-21 mmHg	<input type="checkbox"/> Caramel <input type="checkbox"/> Sand	<input type="checkbox"/> medi Magenta	hand pcs: _____	<input type="checkbox"/> Left	<input type="checkbox"/> gauntlet
<input type="checkbox"/> mediven mondi 350	<b>CCL<sup>2</sup></b> 23-32 mmHg	<input type="checkbox"/> Cashmere <input type="checkbox"/> Navy	<input type="checkbox"/> Blue-Jeans	arm pcs: _____	<input type="checkbox"/> Right	<input type="checkbox"/> glove
	<b>CCL<sup>3</sup></b> 34-46 mmHg	<input type="checkbox"/> Black <input type="checkbox"/> Anthracite	<input type="checkbox"/> Mango-yellow			<input type="checkbox"/> Open fingers
	Hand piece <input type="checkbox"/>		<input type="checkbox"/> Avocado-green			<input type="checkbox"/> Closed fingers
	Arm Sleeve <input type="checkbox"/>		<input type="checkbox"/> Grey			

Style	Proximal Ending
<b>Hand piece</b>	<input type="checkbox"/> Straight (Porous 2cm) (Standard)
<input type="checkbox"/> AC1	<input type="checkbox"/> Flat oblique <input type="checkbox"/> Steep oblique
<input type="checkbox"/> AD/AE	<input type="checkbox"/> Flat oblique (Standard) <input type="checkbox"/> Steep oblique <input type="checkbox"/> Straight

Style circle length choice	Proximal Ending
<b>Armsleeve</b>	<input type="checkbox"/> Flat oblique (Standard)
<input type="checkbox"/> CG/ CD/CE/CF <small>CG is default</small>	<input type="checkbox"/> Steep oblique <input type="checkbox"/> Straight
<input type="checkbox"/> AF/AG (1-PC)	<input type="checkbox"/> Flat oblique (Standard) <input type="checkbox"/> Steep oblique <input type="checkbox"/> Straight

Topband
<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
<input type="checkbox"/> None

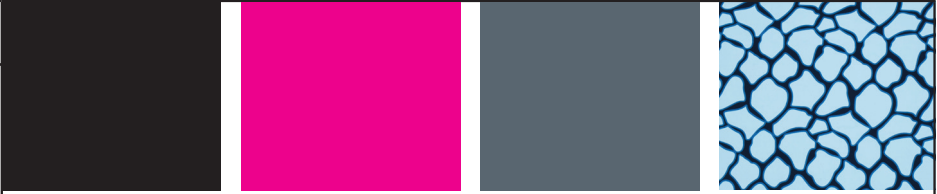
Accessories		
Position	Topband Piece (sewn into the garment) Sizes	Anti-slip dots (applied directly to the garment) Fixed size
<input type="checkbox"/> Along the oblique border	<input type="checkbox"/> 5 X 2.5 cm <input type="checkbox"/> 5 X 5 cm <input type="checkbox"/> 5 X 10 cm <input type="checkbox"/> 15 X 2.5 cm	<input type="checkbox"/> 6 X 4.5 cm
<input type="checkbox"/> On the palm	<input type="checkbox"/> 5 X 5 cm	<input type="checkbox"/> 6 X 4.5 cm
<b>Design Elements:</b> (single-color pattern)	<input type="checkbox"/> Stripes <input type="checkbox"/> Nature <input type="checkbox"/> Dots <input type="checkbox"/> Classic	<b>Fashion Elements:</b> (two-toned pattern)
<b>Crystal Motifs:</b> Location: <input type="checkbox"/> Lower arm <input type="checkbox"/> Upper arm	Pattern: <input type="checkbox"/> Crystal <input type="checkbox"/> Pearl <input type="checkbox"/> Roségold	

Crystal Motifs cannot be combined with Design Elements or Fashion Elements.

Other Accessories	Shoulder Attachments
Knitting marks at elbow: <input type="checkbox"/> 160° (standard) <input type="checkbox"/> 150° <input type="checkbox"/> 135°	<input type="checkbox"/> Shoulder cap standard <input type="checkbox"/> Shoulder cap anatomical* _____ cm
<input type="checkbox"/> Elbow flexure functional zone (550 only)	<input type="checkbox"/> Shoulder strap width: <input type="checkbox"/> 2.5 cm (adjustable) <input type="checkbox"/> 5 cm (velcro)
<input type="checkbox"/> Additional porous row ending (50% COMPRESSION) _____ cm	<input type="checkbox"/> Bra attachment width of bra strap: _____ cm

<input type="checkbox"/> silk lining material Location: _____ (Please include drawing in Special Requests section)  width _____ cm length _____ cm  <input type="checkbox"/> Lymphpad Location: _____ (Please include drawing in Special Requests section)  width _____ cm length _____ cm  <input type="checkbox"/> Pocket (Please specify/draw in Special Requests) _____ length _____ width	<b>Special Requests:</b>          
--	--

**circaid® profile**

Garment options	Oversleeve colors
<b>Indicate sleeve length:</b> <input type="checkbox"/> A-G (default) <input type="checkbox"/> C-G  <input type="checkbox"/> A-C1 <input type="checkbox"/> C-C1 <input type="checkbox"/> A-D <input type="checkbox"/> C-D <input type="checkbox"/> A-E <input type="checkbox"/> C-E <input type="checkbox"/> A-F <input type="checkbox"/> C-F	<b>Indicate side:</b> <input type="checkbox"/> Left <input type="checkbox"/> Right  <b>Options:</b> <input type="checkbox"/> No thumb <input type="checkbox"/> No lateral rise <input type="checkbox"/> Finger foam zones <input type="checkbox"/> Fused EZ-on system <input type="checkbox"/> High-energy oversleeve** <input type="checkbox"/> Split sleeve **
	
	midnight (default) Quantity _____ magenta Quantity _____ grey Quantity _____ blue giraffe Quantity _____

\*Requires 5 additional working days for production. †Measure shoulder width from front to back, around the arm  
 \*\* Includes Fused EZ-on system