

Patient name

Telephone

E-mail

Clinic/Hospital

Order no

Repeat order no

Date measured

Measured by

Delivery adress

Customer no



A Measurements

Length measurements in cm
patient's left

ℓT

ℓH

ℓG/ℓK
(for pantyhose crotch measurement (K))

ℓF

ℓE

ℓD

ℓC

ℓB¹

ℓB

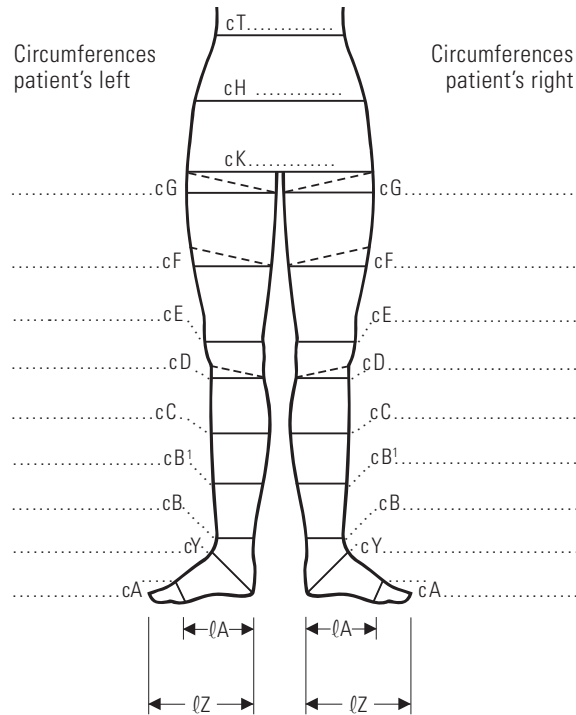
ℓA Foot length (back of heel to cA)

ℓZ Total foot length
(indication only if desired with closed toe)

Length of body part K-T: front _____ back _____

Circumferences
patient's left

Circumferences
patient's right



Length measurements in cm
patient's right

ℓT

ℓH

ℓG/ℓK
(for pantyhose crotch measurement (K))

ℓF

ℓE

ℓD

ℓC

ℓB¹

ℓB

ℓA Foot length (back of heel to cA)

ℓZ Total foot length
(indication only if desired with closed toe)

B Fabric and compression class

Quantity: piece pair	Compression classes			
	1	2	3	4
Juzo® Expert	<input type="checkbox"/> 3021	<input type="checkbox"/> 3022	<input type="checkbox"/> 3023	<input type="checkbox"/> 3024
Juzo® Expert Strong	<input type="checkbox"/> 3051	<input type="checkbox"/> 3052	<input type="checkbox"/> 3053	<input type="checkbox"/> 3054

Colours: If nothing is noted, we deliver colour Beige

- White Light beige Beige Dark brown Red Pink
 Green Blue Dark blue Grey Black

(compression class 4 only available in colour Beige)

C Model

- Model:** AD AG AG with hip attachment AT
 one-legged pantyhose capri pants bermuda pants

Options (no charge):

Tights

- box type (standard: diagonal version) standard border without waist band at "T"

Gusset: normal small

Mesh gusset: normal small

Charge options:

Stockings

Slip form: overweight overweight max

tricot border (soft grip top)

Grip top: adhesive border lace border decorative adhesive border

Hip attachment (please mention "cT"): left right "worn as a pair"

Tights

with adjustable waist band at "T" band of the hip attachment

scrotum included fly open crotch

body part in the middle of the front with zipper (not with adjustable waist band)

Tricot lining

Pressure pad: left interior exterior

right interior exterior

Lymphpad: Line Square

Anatomically flexed form at knee: 30° 50°

E Special instructions

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.....
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(Further options see Juzo® Expert Prescription brochure, for example velcro, zipper, internal border or body bandage)

D Toe options

Option (no charge): open toe

Charge options:

closed toe additional instep stitching (t heel)

ball stub/diagonal foot

"ℓA" left _____ cm interior _____ cm exterior

"ℓA" right _____ cm interior _____ cm exterior