# mediven custom circular-knit lower extremity form

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



#### Exact Reorder (Order Number):

| Customer Name                                      | Date Measured                  |                            |                                     |                 |  |   |  |
|--|--------------------------------|----------------------------|-------------------------------------|-----------------|--|---|--|
| Customer No.                                       | Purchase Order No.             |                            |                                     |                 |  |   |  |
| Patient Name                                       | nt Name Measured by            |                            |                                     |                 |  |   |  |
| Bill to  |                                |                            |                                     |                 |  |   |  |
| Ship to  |                                |                            |                                     |                 |  |   |  |
| Telephone  |                                | Fax                        |                                     |                 |  |   |  |
| Order Date   | Email                          |                            |                                     |                 |  |   |  |
| Credit Card Info                                   |                                |                            |                                     |                 |  |   |  |
| Shipping Method Groun                              | nd OR □Express*<br>□Second Day | □Next Day                  | 1                                   | Expre           | ss Ship                                    | le with mediven comfort and mediven plus.<br>ping guarantees 3-day fabrication and 2-day<br>% upcharge, plus an additional fee for Next Day.  |  |
| Contact for Confirmations (se                      | elect one):                    |                            |                                     | _ □Fax          |  |   |  |
| LEFT LEG LEFT LEG<br>circumference length to floor | WHERE TO MEASURE               | RIGHT LEG<br>circumference | <b>RIGHT LEG</b><br>length to floor | PANTY<br>length |  | KEY FOR CHART   |  |
|  | T                              | t cm                       | t cm                                |                 | /  | Height measurement is from<br>each marked body location<br>to floor   |  |
|  | H H                            | h cm<br>k cm               |                                     | LK1T<br>LK2T    | <u>cm</u>                                  | LK1T Measurement from pubic bone to<br>top of garment along the<br>anatomical contour<br>LK2T Measurement from base of the  |  |
| g cm g cm  | K<br>G                         | g cm                       |                                     |                 | 1  | gluteal fold to top of garment along<br>the anatomical contour<br>t Measurement at waist<br>h Measurement just above pelvic bone  |  |
| f cm f cm  | F                              | f cm                       | f cm                                | Thigh           | Leotard                                    | <ul> <li>Measurement just above period bone</li> <li>Measurement at top of widest part of hip</li> <li>g Measurement at top of thigh at<br/>gluteal fold</li> </ul>                     |  |
| e cm e cm  | )                              | e cm                       | e cm                                |                 | Thigh w/Waist Att/Maternity Panty/Men's Le | <ul> <li>f Measurement at mid thigh</li> <li>e Measurement slightly above knee</li> <li>d Measurement slightly below knee</li> </ul>  |  |
| d cm d cm  |                                | d cm                       | d cm                                |                 | nity Pant                                  | <ul> <li>c Measurement at widest part of calf</li> <li>b1 Measurement between ankle and<br/>waist part of calf</li> <li>b Measurement just above ankle bone</li> </ul>                  |  |
| c cm c cm  | C                              | c cm                       | c cm                                |                 | tt/Mater                                   | <ul> <li>b Measurement just above ankle bone</li> <li>y Measurement diagonally around heel<br/>over widest part of top of ankle</li> <li>a Measurement circumference of ball</li> </ul> |  |
| b1 cm b1 cm  | B1                             | <u>b1 cm</u>               | <u>b1 cm</u>                        | Below Knee      | /Waist At                                  | of foot<br>Z Measurement from heel to toe for<br>Closed-toe stockings (enter below)<br>are from heal to four for  |  |
| b cm b cm  | BA                             | b cm                       | b cm                                |                 | Thigh w,                                   | or from heel to ball of foot for<br>Open-toe stockings<br>z Foot Requirement (choose one):  |  |
| <u>y cm</u><br>a cm                                | Z                              | y cm<br>a cm               |                                     |                 |  | Closed-Toe: full foot length iscm<br>Open-Toe: length from heel to ball<br>of foot iscm   |  |

#### mediven comfort

| quantity               | compression                  | toe                        | colors  | styles  | silicone top band   |
|------------------------|------------------------------|----------------------------|---|---|---|
| left<br>right<br>pairs | □ 20-30 mmHg<br>□ 30-40 mmHg | □ closed toe<br>□ open toe | □ natural<br>□ ebony<br>□ wheat<br>□ sandstone<br>□ navy<br>□ chocolate | □ calf<br>□ thigh<br>□ panty<br>□ maternity panty | □ No topband<br>A-D (calf)<br>□ beaded 2.5cm<br>□ beaded 5cm<br>□ sensitive 5cm<br>A-G (thigh)<br>□ beaded 5cm<br>□ sensitive 5cm |

## mediven plus

| quantity        | compression       | toe                      | colors              | styles  |  |  |
|-----------------|-------------------|--------------------------|---------------------|---|--|--|
| left            | □20-30 mmHg       | □ closed toe             | □beige              | □calf   |  |  |
| right           | □30-40 mmHg       | □ open toe               | □black              | □thigh  |  |  |
| right           | □40-50 mmHg       |                          |                     | □thigh w/waist attachment                                   |  |  |
| pairs           |                   |                          |                     | Dpanty  |  |  |
|                 |                   |                          |                     | □ panty w/one leg   |  |  |
|                 |                   |                          |                     | □ maternity panty   |  |  |
|                 |                   |                          |                     | □men's leotard  |  |  |
|                 |                   |                          |                     | □ bike shorts   |  |  |
|                 |                   |                          |                     |   |  |  |
|                 |                   |                          |                     |   |  |  |
|                 |                   |                          |                     | □ panty w/one leg below knee, one full leg<br>□ leg sleeves |  |  |
|                 |                   |                          |                     | Dieg sieves   |  |  |
|                 |                   |                          |                     |   |  |  |
| silicone        | silicone top band |                          | sive panty          | options   |  |  |
| 🗆 No topband    |                   |                          | **Panty compression | □open crotch (waist-high only)                              |  |  |
| A-D (calf)      | A-G (thigh)       |                          | may not be          |   |  |  |
| □ beaded 2.5cm  | □beaded 5cm       | □40-50 mmHg <sup>9</sup> | greater than legs.  |   |  |  |
| □ beaded 5cm    | □ sensitive 5cm   |                          |                     |   |  |  |
| □ sensitive 5cm |                   |                          |                     |   |  |  |

### mediven forte

| quantity  | compression                  | toe   | colors |  | styles   |  |
|---|------------------------------|---|--------|--|--|--|
| left<br>right<br>pairs  | □ 30-40 mmHg<br>□ 40-50 mmHg | □ closed toe<br>□ open toe  | □chest | nere<br>"acite<br>***<br>perry-red***<br>nut*** ***Requires 10<br>green*** additional working  | □ calf<br>□ thigh<br>□ thigh w/waist attachment<br>□ panty<br>□ panty w/one leg<br>□ maternity panty<br>□ men's leotard<br>□ bike shorts<br>□ capri<br>□ leggings<br>□ panty w/one leg below knee,<br>one full leg |  |
| silicone top band   |                              | compressive panty   |        | options  |  |  |
| □ No topband<br>A-D (calf) A-G (thigh)<br>□ beaded 2.5cm □ beaded 5cm<br>□ beaded 5cm □ sensitive 5cm<br>□ sensitive 5cm □ Motif 5cm beaded<br>□ Rose 5cm solid |                              | □ slightly<br>□ moderate<br>□ high (avail. 40-50 mmHg only)<br>**Panty compression may not<br>be greater than legs. Exact<br>mmHg not measurable. |        | □open crotch (waist-high only)<br>□soft toe (netting)<br>□hallux valgus toe section<br>(closed toe only)<br>□Anti-slip-segments foot | Crystal Motifs***  |  |

#### mediven angio

| quantity | compression                | colors               | styles |
|----------|----------------------------|----------------------|--------|
|          | □15-20 mmHg<br>□20-30 mmHg | □ caramel<br>□ black | □calf  |