



504 Arm Order Form

All fields are required in order to process your order

Order Details

Date: _____ Date Required: _____
 Order No.: _____
 Contact Name: _____
 Contact Phone No.: _____
 Email: _____
 Hospital/Clinic: _____
 Delivery Address: _____

 _____ Post Code: _____

Patient Details

Patient Reference No.: _____
 First Name: _____
 Surname: _____
 Date of Birth: _____
 Please indicate: Male Female
 Please indicate: New Patient Existing Patient
 Diagnosis: _____

Fabrics

Plain Powernet: Beige Tan Blossom Red Raspberry
 Classy Blue Denim Blue Black

Printed Powernet: Unicorn Safari Car Paw Print Pink Camo Green Camo
 Blue Camo

Zips

Colour Matching Leopard Camouflage Galaxy Rainbow Tribe

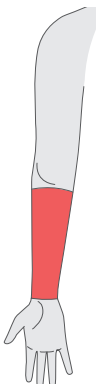
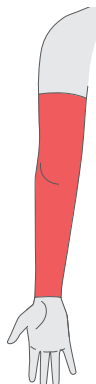
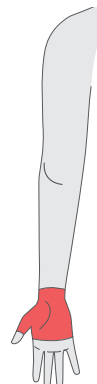
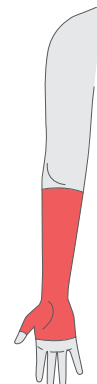
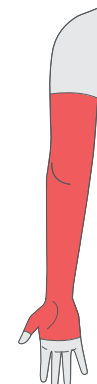
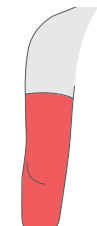
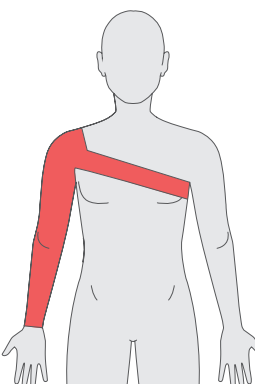
Bindings

None Daisies Roses Rainbow Mermaid Pink Tribe Rocket
 B&W Football Pink Football Pink Hearts Silver Aztec Pink Aztec Spots & Stripes

Thread

Colour Matching Beige White Tan Pastel Pink Bright Pink
 Red Purple Green Pastel Blue Royal Blue Denim Blue
 Navy Blue Black

Garment - please indicate quantity of garments required in the boxes below, i.e. 2

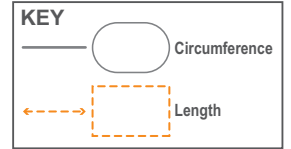
<input type="checkbox"/> 0515 Forearm Sleeve <input type="checkbox"/> Left <input type="checkbox"/> Right 	<input type="checkbox"/> 0501 Arm Sleeve <input type="checkbox"/> Left <input type="checkbox"/> Right 	<input type="checkbox"/> 0505 Detachable Gauntlet <input type="checkbox"/> Left <input type="checkbox"/> Right 	<input type="checkbox"/> 0516 Forearm Sleeve and Gauntlet <input type="checkbox"/> Left <input type="checkbox"/> Right 	<input type="checkbox"/> 0502 Arm Sleeve and Gauntlet <input type="checkbox"/> Left <input type="checkbox"/> Right 	<input type="checkbox"/> 1140 Stump Sleeve <input type="checkbox"/> Left <input type="checkbox"/> Right 	<input type="checkbox"/> 0503 Arm Sleeve and Shoulder Flap <input type="checkbox"/> Left <input type="checkbox"/> Right 
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When completed, please click: customerservice@jobskin.co.uk to email your electronic order form

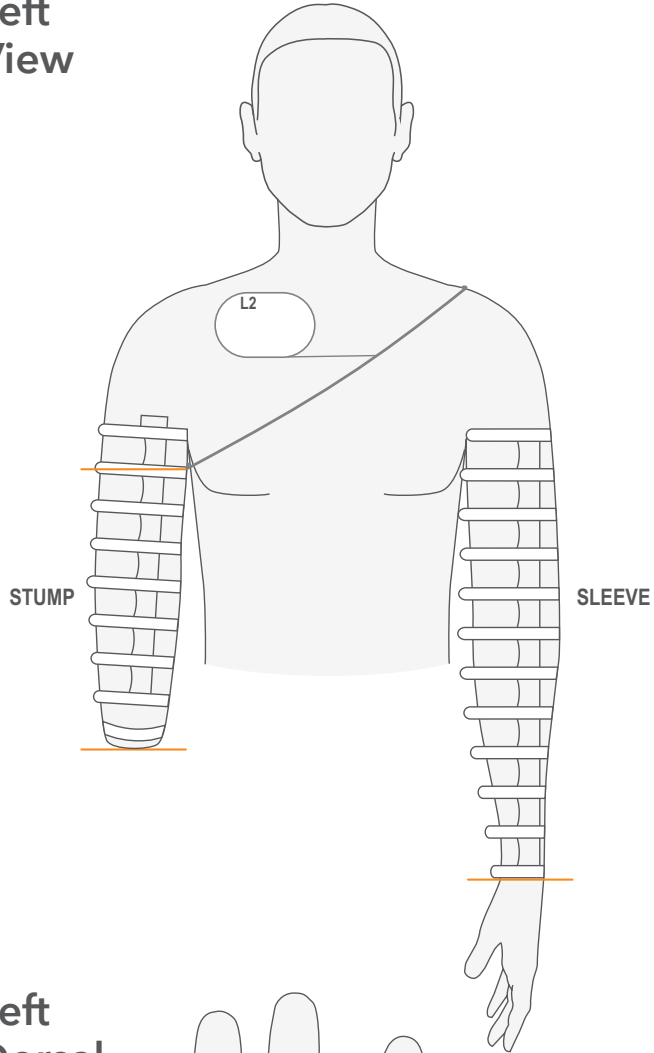
Please download your electronic forms directly from our website - www.jobskin.co.uk/file-download

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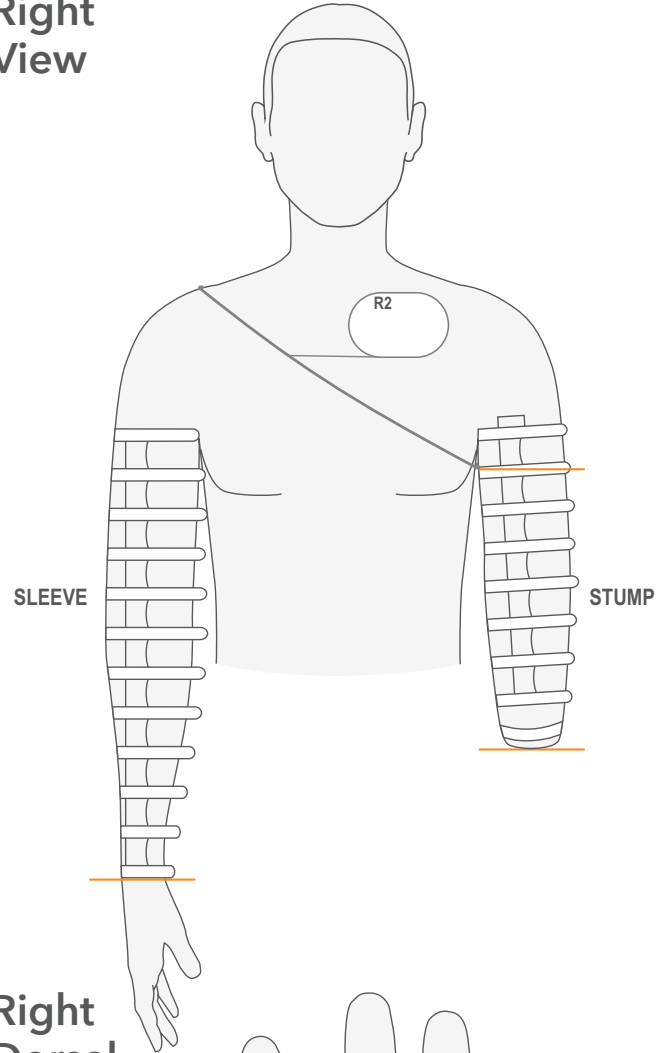
Order No.: _____ Patient Reference No.: _____



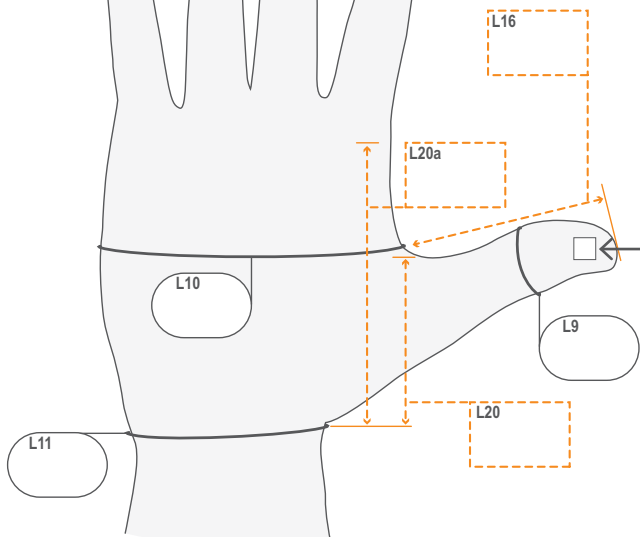
Left View



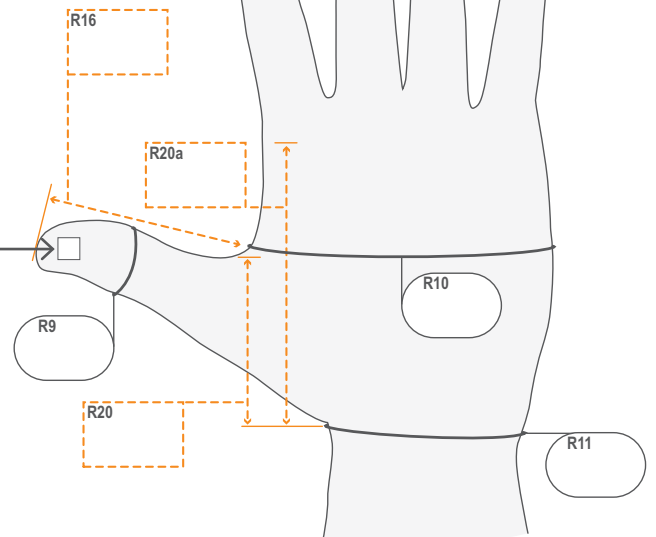
Right View



Left Dorsal View



Right Dorsal View



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0503 - Arm Sleeve with Shoulder Flap

Circumference Measurements

Left (cm) Right (cm)

2	Point of shoulder circumferentially under opposite axilla	Strap Length	
	<input type="checkbox"/> Style A - (Female) Ties		
	<input type="checkbox"/> Style B - (Male) Ties		
	<input type="checkbox"/> Style E - Closed with Velcro		
<input type="checkbox"/> Style F - Bra Loop closed with poppers		<input type="checkbox"/>	<input type="checkbox"/>

Gauntlet

Circumference Measurements

Left (cm) Right (cm)

9	Thumb IP joint		
10	Palm		
11	Wrist Crease		
3.4 beyond Wrist			
7.6 beyond Wrist			

Length Measurements

Left (cm) Right (cm)

16	Thumb web to required length Closed Tips	<input type="checkbox"/>	<input type="checkbox"/>
20	Wrist to thumb web		
20a	Wrist to distal end of garment		

Modifications (tick if required)

Item description	Product Code	Left	Right
Pocket (sewn in for the insertion of pads to apply extra pressure to certain areas)	0027	<input type="checkbox"/>	<input type="checkbox"/>
Use Silon-TEX II placement pad to mark position			
Short zipper (<20cm)	1164	<input type="checkbox"/>	<input type="checkbox"/>
Long zipper (>20cm)	1165	<input type="checkbox"/>	<input type="checkbox"/>
Lining inside elbow	1167	<input type="checkbox"/>	<input type="checkbox"/>
Full lining elbow	1168	<input type="checkbox"/>	<input type="checkbox"/>

Zipper Options (tick if required)

Left Right

<input type="checkbox"/> Lateral aspect (standard)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Medial aspect	<input type="checkbox"/>	<input type="checkbox"/>

Specific Instructions

Arm Measurements (from PINK paper tape)

Left (cm)

Right (cm)

	Distal Pleat	
Wrist		
	-4½	
	-3	
	-1½	
	0	
	+1½	
	+3	
	+4½	
	+6	
	+7½	
Elbow 9		
	+10½	
	+12	
	+13½	
	+15	
	+16½	
	+18	

Axilla

	Proximal Pleat	
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