

Form 5 Lymphoedemas Tailor-made

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- www.m	ainat.com / irene@mainat.com F. (+34	93 794 27 62	, ,	
Patient			Age	<u></u> □♀ □♂
Orthopaedics / Distributor				
Prescribing Doctor / Centre				
Address				
Town	Post code Pro	ovince		
Telephone	e-mail			Stamp
LC-500 Gauntlet with thumb			Beige -	Coffee Black
LC-500.1 Elbow-length gauntlet with thumb			Beige -	Coffee Black
Have you ordered, for this patient, the	same or similar garment before	e? NO [	YES	
	Jame of Similar garment before			
Compression degree	Characteristics		_	
Class 1 = Low	In case of gauntlet with full slee		our prefere	ence:
Class 2 = Medium	ONE PIECE SEPARA	.TE		
Class 3 = High				
Hand				
Right Left	Please, add to this form, the corresponding form for the full sleeve			
Quantity	FORM 7			
	Measuren Measuren	ments should be take nents should be take mplete them all.		in the morning. ric tape-measure taking
Remarks	W	Order Lot	- <u> </u>	
		Date		