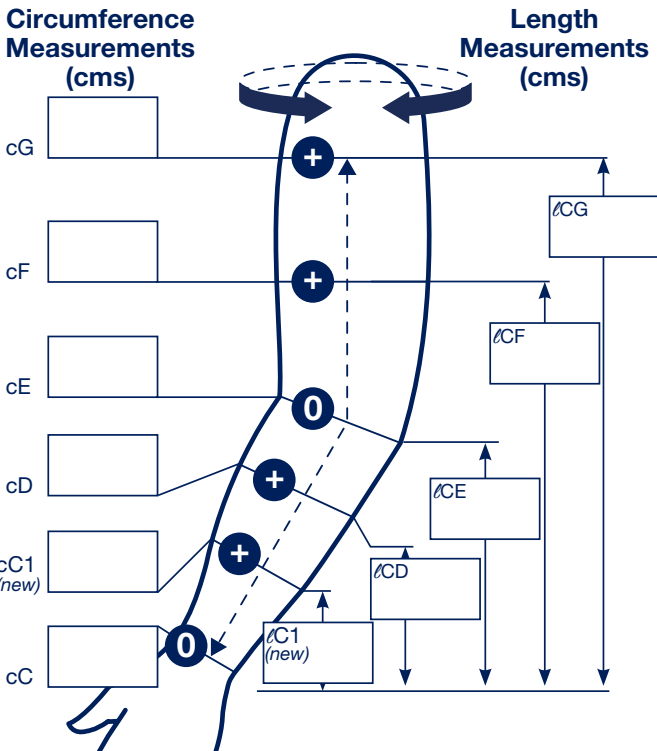


**Patient Last Name:** \_\_\_\_\_ **Patient First Name:** \_\_\_\_\_  
**Fitter Last Name:** \_\_\_\_\_ **Fitter First Name:** \_\_\_\_\_  
**Fitter Title:** \_\_\_\_\_ (example: PT/OT/PTA)  
**Date:** \_\_\_\_\_

<b>Color</b> <input type="checkbox"/> Beige <input type="checkbox"/> Caramel <input type="checkbox"/> Anthracite Heather <input type="checkbox"/> Black <input type="checkbox"/> Jeans Heather <input type="checkbox"/> Red Heather	<b>Quantity/Class</b> CCL1 (15-21mmHg*)	CCL2 (23-32 mmHg*)
	Left	
	Right	

<b>Lateral Rise is 10% of circumference at G and is not adjustable (ex: if cG is 35cm then lateral rise is 3.5cm)</b>	<b>Elbow Options</b> <input type="checkbox"/> Elbow Comfort Zone <b>Elbow Bend Options</b> <input type="checkbox"/> Elbow 25 Degree (standard) <input type="checkbox"/> Elbow 45 Degree	<b>Decorative Options</b> <input type="checkbox"/> Decorative Line (Front of garment) <input type="checkbox"/> Patient Initials Max 2 letters (A-Z) _____	<b>Silicone Band</b> <input type="checkbox"/> No Silicone <input type="checkbox"/> SoftFit <input type="checkbox"/> 2.5 Top <input type="checkbox"/> 2.5 Inside 1/2
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## Measuring Guidelines

(Only applicable for Confidence)

See Arm Diagram for applicable tension at each landmark.

0 no tension

+ light tension

cG = 0 no tension with silicone band

cG = + light tension without band

lC1 = 5 to 7cm above cC

(lCG must be taken with the arm bent)