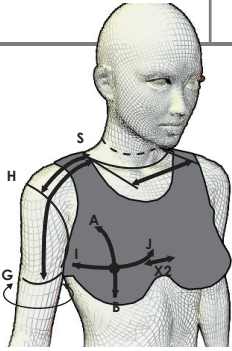
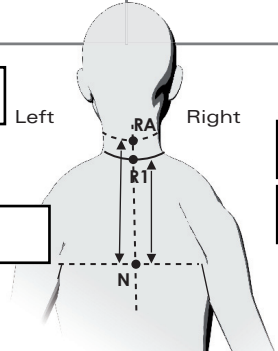


Name patient		Date of Birth	Gender	Date of Measuring
		... / ... / ...	<input type="checkbox"/> m <input type="checkbox"/> f	... / ... / 201..
Measured by	Signature	Contact Person	Department	

Circumference
Length



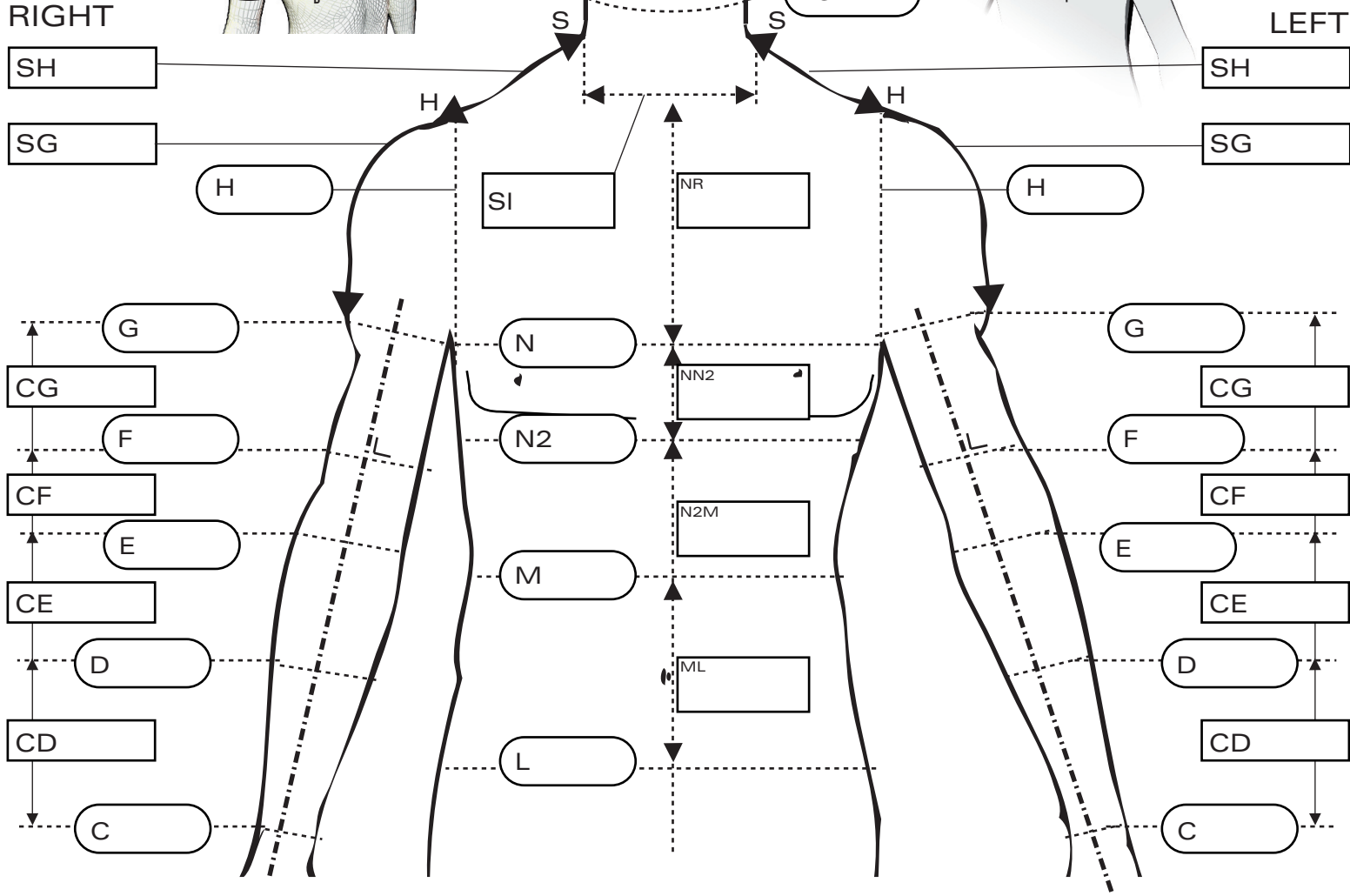
Cup	Cup	X2
A-B*	A-B*	
I-J	I-J	Collar-height



Length back

N-R1

N-RA



COMFORT	CO01 skin/skin	CO02 skin/black	CO03 black/black	SILICONE		SI01 skin	SI02 black
STRONG	ST01 skin/skin	ST03 black/black	ST06 blue/black	ST08 green/black	ST09 red/skin	ST10 red/black	
STRONG	ST11 pink/skin	ST14 bordeaux/black	ST16 grey/black	ST17 light grey/skin	ST18 light grey/black	ST19 navy blue/skin	ST20 navy blue/black



Body

standard*

L:

B:

*standard child (l:22, w:4.5 cm)

Options:

- opening middle front
- opening middle back
- hook fasteners
- zip-fastener
- with made to measure arm compression sleeves
- obese /pregnant
- without arm compression sleeve
- anti-slip
- symbol boy
- symbol girl

Remarks:

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