

<b>ORDER</b> (by default)
QUOTATION
RFNFWAI



RETAILER IDENTIFICATION	Patient's surname:							
	Cube No. 101 Periewal							
	Gender:□M □F □Child	☐ 1st treatment						
	Patient's height:	Date :Quantity:						
Customer code:	☐ I authorize my health care professional to to Thuasne company as part of the processing accordance with Law No 78-17 of 6 January 19 EU of 27 April 2016, I have rights including in portability and deletion of my data. I can exerc professional to who I ordered my medical device	Patient signature						
If possible, please enclose photos of the limb to be fitted. Please draw in the contours of the garment on the diagram and cross unnecessary measures.								
Fill in one form for each side	Options Sleeve fastening	Opening Type: □Zip	Other  Compression pad					
Indications       □         □ Major burn (by default)       □         □ EDS (Ehlers-Danlos Syndrome)       □	☐ Elastic plain braid 3 cm ☐ Anti-slip with silicone dots 3 cm ☐ Silicone men anti-slip 5 cm ☐ Silicone women anti-slip 5 cm	□ Velcro  Dimensions: cm  Position:	Dimensions (\( \epsilon x \) h): cm Position: to be drawn in  Comments					
Fabrics   WHITE BEIGE BLACK   □     □ Cicatrex Nature   □   □	☐ Up to the armpit☐ Shoulder cover☐ Shoulder attachment (bra loop)	□ Join side □ Back of the hand side □ Palm of the hand side						

Heights			Measures in cm			
v	Length from the wrist to middle of the widest pa forearm					
W	Length from the wrist to elbow	the				
х	Length from the wrist to middle of the widest pa upper arm					
Υ	Length from the wrist to armpit	the				
Н	Length from the armpit the acromion process (t shoulder)					
Circumferences						
C	Wrist circumference					
D	Circumference at the m the widest part of the fo					
E	Elbow circumference					
F	Circumference at the m the widest part of the u		า			
G	Arm circumference at th	ne armpi	t			
	Chest circumference fro acromion process and g under the opposite arm	going				
	Circumferences in cm		Ler	ngth in cm		

