

## **Compression Garment Referral Form**





101 Wrist to axilla



102 Gauntlet to axilla



103 Wrist through flap



104 Gauntlet through flap



Gauntlet

403 Wrist to elbow



331

Stump

above knee

One stump

open crotch

404 405 Gauntlet Sleeve stump to elbow



406 Sleeve stump w/flap



Elbow to axilla



Glove

to axilla

401 Glove to wrist



Glove to elbow



Glove through shoulder flap



451 Mitten to wrist

Waist high 2

leg pregnancy



Mitten

to elbow

201 Knee length



202 Thigh length

309

Panty girdle

below knee

418

Suit w/legs



332 Stump below knee



Chap style one lea



One leg panty open crotch



410 Vest sleeveless



412

Vest

with sleeves

303

One leg panty

closed crotch

Waist high 2 leg Waist high 2 leg



closed crotch

414 Vest brief pressure support sleeveless w/velcro flap



415 Vest brief sleeveless open crotch



Chap style

two legs

416 Vest brief w/sleeves w/velcro flap



308

Panty girdle

above knee

417 Vest brief w/sleeves above knee open crotch



420 Suit w/sleeves & legs above knee



open crotch

One stump panty One stump panty

Suit w/sleeves one lea bleow knee



closed crotch

Suit w/sleeves two leas below knee



Leg & stump

open crotch

430 Mask



Mask

432 Chin strap open face



413

Sternum

441 MR Bolero one arm



Bolero one arm female



442 M Bolero two arm



442 F Bolero two arm female



408 Anklet



453 Finger sleeve



460 Foot glove to ankle



461 Foot glove to knee



470 Knee band



471 Thigh band above knee



472 Arm band



One & two Leg Garter Belts



Patient Name:

Ordering Facility:

Date:

**FORM** F-027

## **NOTICE TO PATIENT**

Please take this form to an authorized Gottfried Medical Dealer

	l
for ordering, measuring and fitting.	
Please contact us at the number above if you require	
assistance in locating a dealer.	
Compression (mmHg):	
□ 22-28 (Burns)   □ 20-30   □ 30-40   □ 40-50   □ 50-60	
. ,	
REQUIRED Allergies:	
Allergic to silicone? ☐ Yes, ☐ No, ☐ NA   Allergic to metal? ☐ Yes, ☐ No, ☐ NA	
OPTIONS	
Toe Caps: *Foot tracing required for Closed Toe	
Open Toe Foot Length: (Please include foot tracing)	
☐ Soft Toe*	
☐ Self Toe* Left Right	
Zipper:	
☐ Open (Allows garment to be completely open)	
☐ Closed (Does not open completely, allows for easier donning)	<del></del>
Flex Seams:	
☐ Ankle ☐ Back of Knee ☐ Elbow ☐ Other	
Elastic Bands:	
□ Regular - 1" □ Silicone - 1"	
☐ Regular - 2" ☐ Silicone - 2"	
-	
Garment Lining: ☐ Medial Side AKA: REINFORCEMENT ☐ Heel	
☐ Lateral Side Ark: REINFORCEMENT ☐ FIGER	
2 Eutoral Glad	
ORDERING FACILITY INFORMATION	
Facility Name:	
Contact Name:	
Phone: Fax:	

NOTES