Custom Measurement Form For Compression Foot Portions

Call: (571) 232-3179
Fax: (703) 852-4371
Email: nancy@bodyworks-compression.com

Account Information (Please Print)

Account Number _____ Date _____

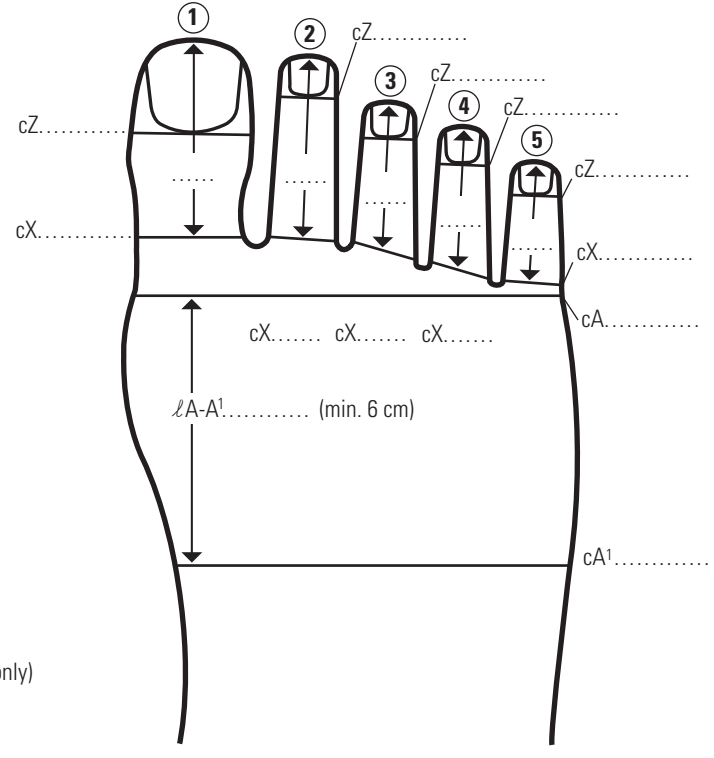
Account Name _____ Contact _____

Ship to Address _____

Phone _____ Fax _____

Patient ID _____ Prescribing Physician _____

Quantity ..... Piece(s) Left Right	**Compression** 18-21 mmHg	23-32 mmHg
Juzo Expert (Helastic)	3021	3022
Juzo Expert (Helastic) Cotton (color beige)	3021CO	3022CO
Juzo Expert (Helastic) Silver (color beige)	3021SV	3022SV
Juzo Strong	3051	3052
Juzo Strong Silver (color beige)	3051SV	3052SV



Colors

Beige Fuchsia Blue Gray Dark blue Chestnut
Black Violet

Options

With open toes With closed toes Without toe stub on toe 5 (opening only)
Wear with a compression stocking Yes No

Notes: