

CHIPSLEEVE ARM CUSTOM

MEASURE & ORDER FORM

P.O. #	Account #	Contact	Date		
Phone	Patient Name		Age	Height	Weight
Company Name					
Dropship Name & Address					

PRODUCT INFORMATION

Arm	OVERSLEEVE Color			NOTE: If no color is selected	
□ LEFT □ RIGHT	\square BLACK \square NAVY \square	$\exists PINK \ \Box TIE DYE$	☐ BLUE HORIZON	□LEOPARD	BLACK will be included.

A PDF of this order form can be found online at bit.ly/SIGmccOrderforms

MEASURING INSTRUCTIONS

With patient seated, place the arm extended and elbow bent slightly, with the palm down, on a flat surface.

CIRCUMFERENCES

Measure circumference at Palm and record on line E.

Measure circumference at Wrist, and record on line A. Mark dorsal aspect at distal edge of tape.

Measure circumference at Forearm, and record on line A1.

Measure circumference at Elbow, and record on line B.

Measure circumference at mid Bicep, and record on line B1.

Measure circumference at Axilla, and record on line C. Mark dorsal aspect at proximal edge of tape.

LENGTH

Measure length at dorsal aspect from mark at Point A to mark at Point C and record in box D.

NOTES:

