

Patient Name / Essity File # _____ DOB _____ Date _____

Address _____ Gender M F

City/Province/Postal Code _____

Diagnosis _____

PO#	
Original Order <input type="checkbox"/>	Reorder w Changes <input type="checkbox"/>
Exact Reorder <input type="checkbox"/>	Schema # _____

Fitter Name _____ Fitter # _____ Fitter Phone _____
Fitter Facility _____ Email _____

Ship To Acct # _____ Acct Name _____
Address _____ City _____ Province _____ Postal Code _____
Email _____ Phone _____ Fax _____

Bill To Acct # _____ Acct Name _____
Address _____ City _____ Province _____ Postal Code _____
Email _____ Phone _____ Fax _____

Confirmation Fax # _____ Email _____ <small>By choosing communication via email (above), I acknowledge that Personal Health Information associated with this purchase may be transmitted from Essity in a non-encrypted manner.</small>	Quantity/Class	CCL1 (15-21mmHg*)	CCL2 (23-32mmHg*)	CCL2F† (23-32mmHg*)
	Left			
	Right			

Elvarex[®]**

Black
 Beige
 Caramel fmr Honey
 Cherry
 Hazelnut fmr Caramel
 Cranberry

Navy
 Bronze

Elvarex[®] Soft (N/A IN CCL2F)

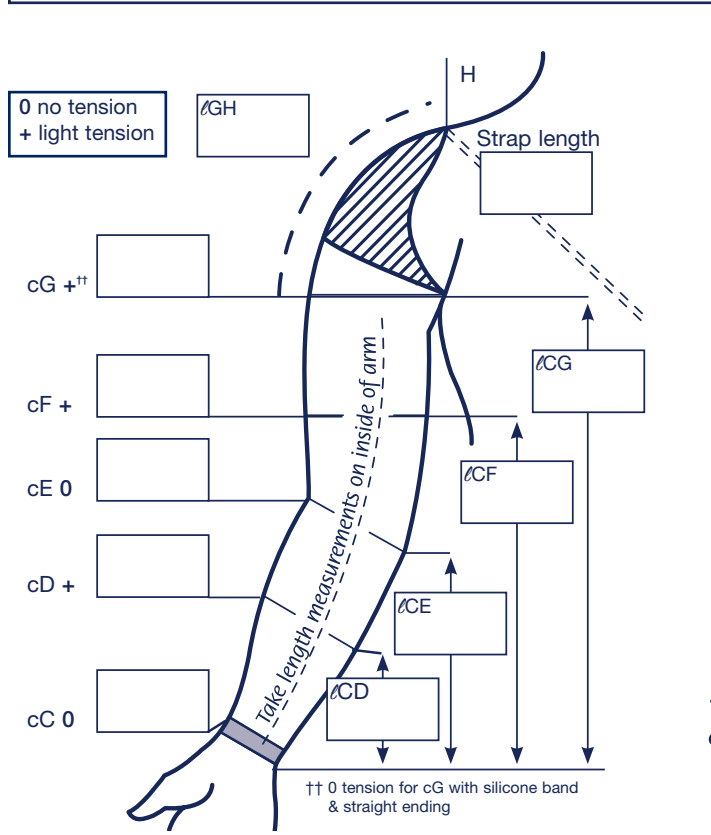
Beige Cranberry
 Black Honey
 Navy Cherry

Shoulder Cap Options (CH and AH) (Elvarex only)

Shoulder Strap Bra loop with Velcro _____ cm
(Bra Strap width)

Style (AG AH AND CH NOT AVAILABLE IN SOFT)

CG Sleeve CH Sleeve & shoulder cap†*** AG Sleeve & hand attachment†*** AH Sleeve, hand attachment & shoulder cap†***



Elbow Options†

Elbow Comfort† (CCL 2 only) (not available in Soft)

Pocket Inside Elbow† (Not available with Elbow Comfort)

Lining† (Pocket all sides closed)

Silicone Band	On Top	Inside	Inside 1/2 Elvarex only	Inside 3/4 Elvarex only
2.5 cm				
5 cm				
SoftFit (C-G only)				
Micro Dot 5 cm				
Zipper†	Inside	Outside	On Top	
C-E only				
E-G only				

* Design Pressure *** Not available in Elvarex Soft † Only available in Elvarex
**CAUTION: This product contains natural rubber latex which may cause allergic reactions.

For additional product order forms, please go to <https://eshop.jobst-ca.com>