

Elvarex® Stump Order Form

Lower Extremity Order Form 50333 must accompany this form.

Patient Name / ID Code or File #	D	OB	Date	
Address			Gender M □ F □	
City/State/Zip			_	
1	Document the m	Document the measurements for the stump limb only		
	Left	Right	0 no tension + light tension ++ heavy tensio	
	Circumferences	<u>Lengths</u>	TT Heavy tension	
Top of thigh	Use Elvarex landmarks	Take lengths from e	end of stump. End of stump = 0	
	∂ G ^{++/+***}	l G		
	c F ⁺⁺	l F		
Mid-thigh F	cE ⁺	lE	6	
	c D +/0***	l D		
		lC	With plate	
Patella E	cB1 ⁺⁺ −−−−	/B1		
		lB	-	
Below knee	CY0	lA (medial)	3	
Widest calf		lA (lateral)	Without plate	
Below calf 3 B1		/Z		
Below calf	Circumference a			
Smallest ankle <u>B</u>	This will help give the end of	of the garment better s	shape.	
4	cm			
e of C	Hemispheric Len Taken from the base of stur			
Heel	Front to Back	cm		
Total foot length	Left to Right	_ cm		

The illustration above is an example of where a stump garment might end. Measure all landmark circumferences and lengths until the end of your patient's limb. Document the measurements for the stump limb only. Measurements for the full limb should be documented on Elvarex Lower Extremity order form (50333). If a stump garment is needed for both legs, please complete two stump order forms (this form).

ADDITIONAL INFORMATION:

•Include a tracing of the end of the stump to show any abnormal protrusions.

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- -Tracing must contain 1" x 1" scale for reference.
- Pictures are very helpful: front, side, back.
- •Please have fitter call Elvarex Customer Service Team before measuring if assistance is needed: 1-800-221-7573, option 3.

CAUTION: This product contains natural rubber latex which may cause allergic reactions.

- Design Pressure
- If measuring is done in lying position, cA please apply 0 tension
 *** If silicone band & straight ending

