



Glove, Gauntlet & Sleeve Order Form

All fields are required in order to process your order

Order Details

Date: _____ Date Required: _____
Order No.: _____
Contact Name: _____
Contact Phone No.: _____
Email: _____
Hospital/Clinic: _____
Delivery Address: _____

Post Code: _____

Patient Details

Patient Reference No.: _____
First Name: _____
Surname: _____
Date of Birth: _____
Please indicate: ☐ Male ☐ Female
Please indicate: ☐ New Patient ☐ Existing Patient
Contact me about my order via: ☐ Email ☐ Phone
Attached with order: ☐ Consent form* ☐ Images
☐ Silon-TEX® II Placement Pad

Fabrics

Plain Powernet: ☐ White ☐ Beige ☐ Tan ☐ Pastel Pink ☐ Red
☐ Purple ☐ Pastel Blue ☐ Royal Blue ☐ Black
Printed Powernet: ☐ Floral ☐ Unicorns ☐ French Bulldog ☐ Footballs ☐ Pink Camo
☐ Green Camo ☐ Blue Camo
Polycotton: ☐ White ☐ Beige ☐ Pink ☐ Navy Blue ☐ Black

Zips

☐ Colour Matching ☐ Leopard ☐ Camouflage ☐ Galaxy ☐ Rainbow ☐ Tribe

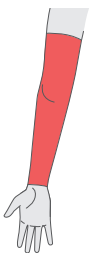
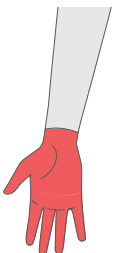

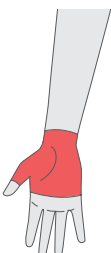

Bindings

☐ None ☐ Daisies ☐ Roses ☐ Rainbow Mermaid ☐ Pink Tribe ☐ Rocket
☐ B&W Football ☐ Pink Football ☐ Pink Hearts ☐ Spots & Stripes ☐ Silver Aztec ☐ Pink Aztec

Thread

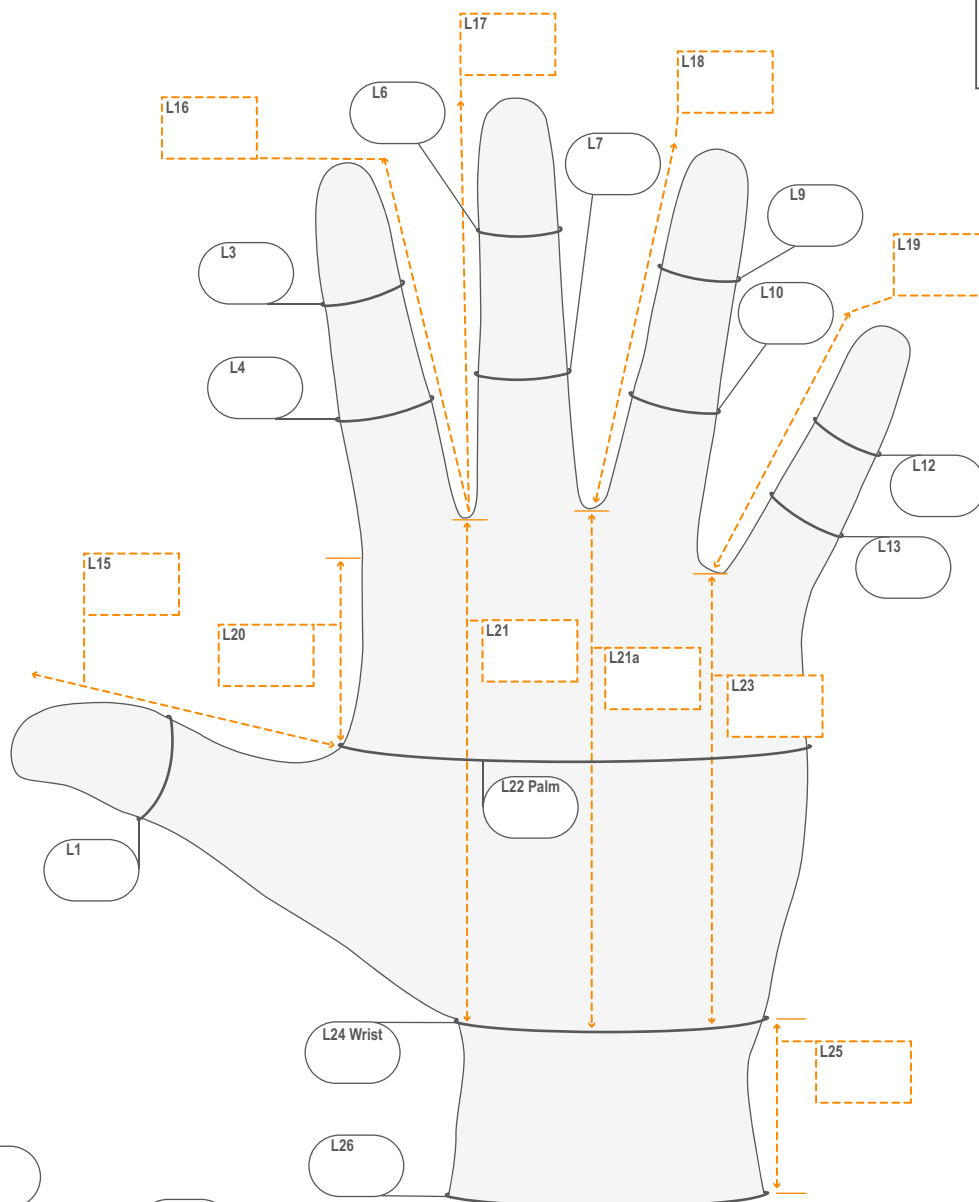
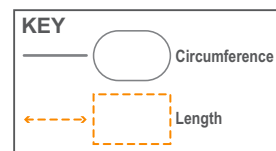
☐ Colour Matching ☐ Beige ☐ White ☐ Tan ☐ Pastel Pink ☐ Bright Pink
☐ Red ☐ Purple ☐ Green ☐ Pastel Blue ☐ Royal Blue ☐ Denim Blue
☐ Navy Blue ☐ Black

Garment (please indicate)

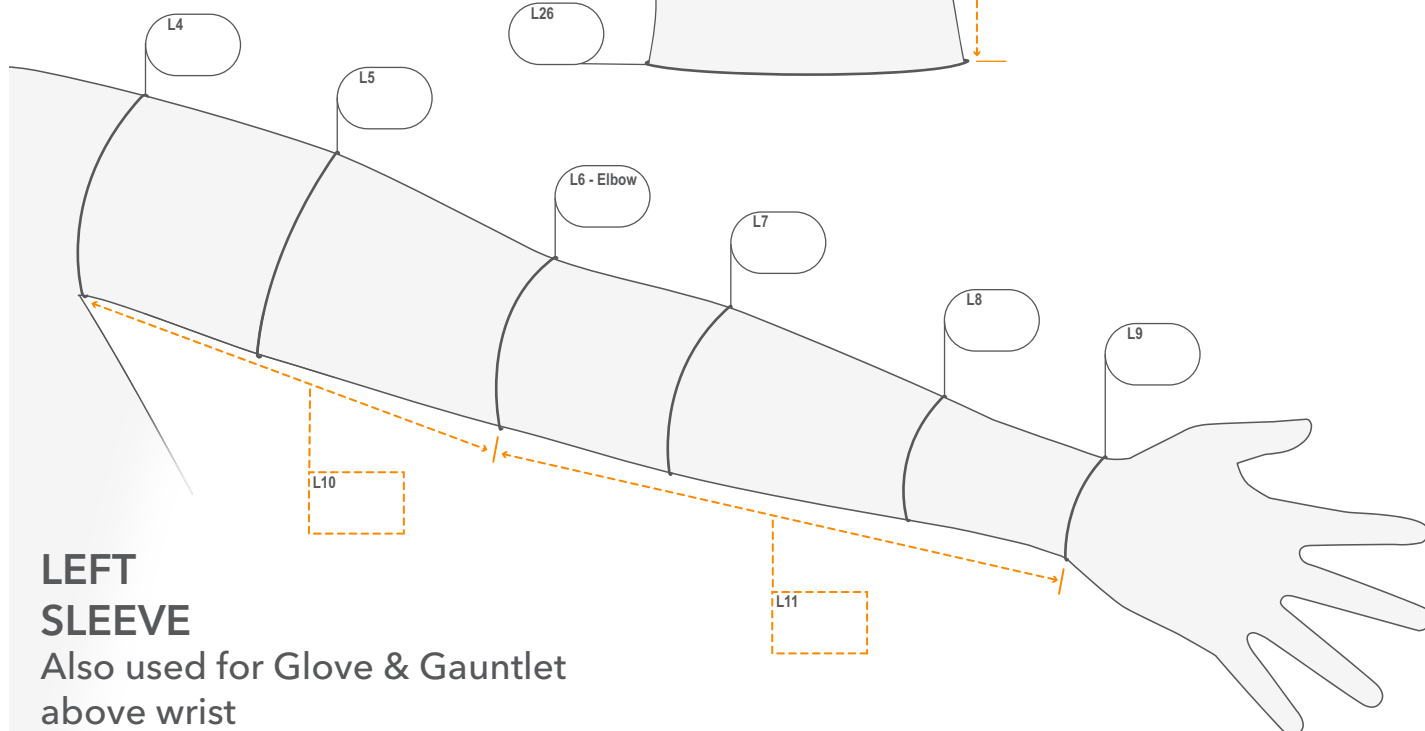
<input type="checkbox"/> PG10 Sleeve <input type="checkbox"/> Left <input type="checkbox"/> Right 	<input type="checkbox"/> PG13 Glove up to 4cm above wrist <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Open Tip <input type="checkbox"/> Closed Tip 	<input type="checkbox"/> PG14 Glove over 4cm above wrist <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Open Tip <input type="checkbox"/> Closed Tip 	<input type="checkbox"/> PG16 Gauntlet up to 4cm above wrist <input type="checkbox"/> Left <input type="checkbox"/> Right 	<input type="checkbox"/> PG17 Gauntlet over to 4cm above wrist <input type="checkbox"/> Left <input type="checkbox"/> Right 
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When completed, please click: customerservice@jobskin.co.uk to email your electronic order form

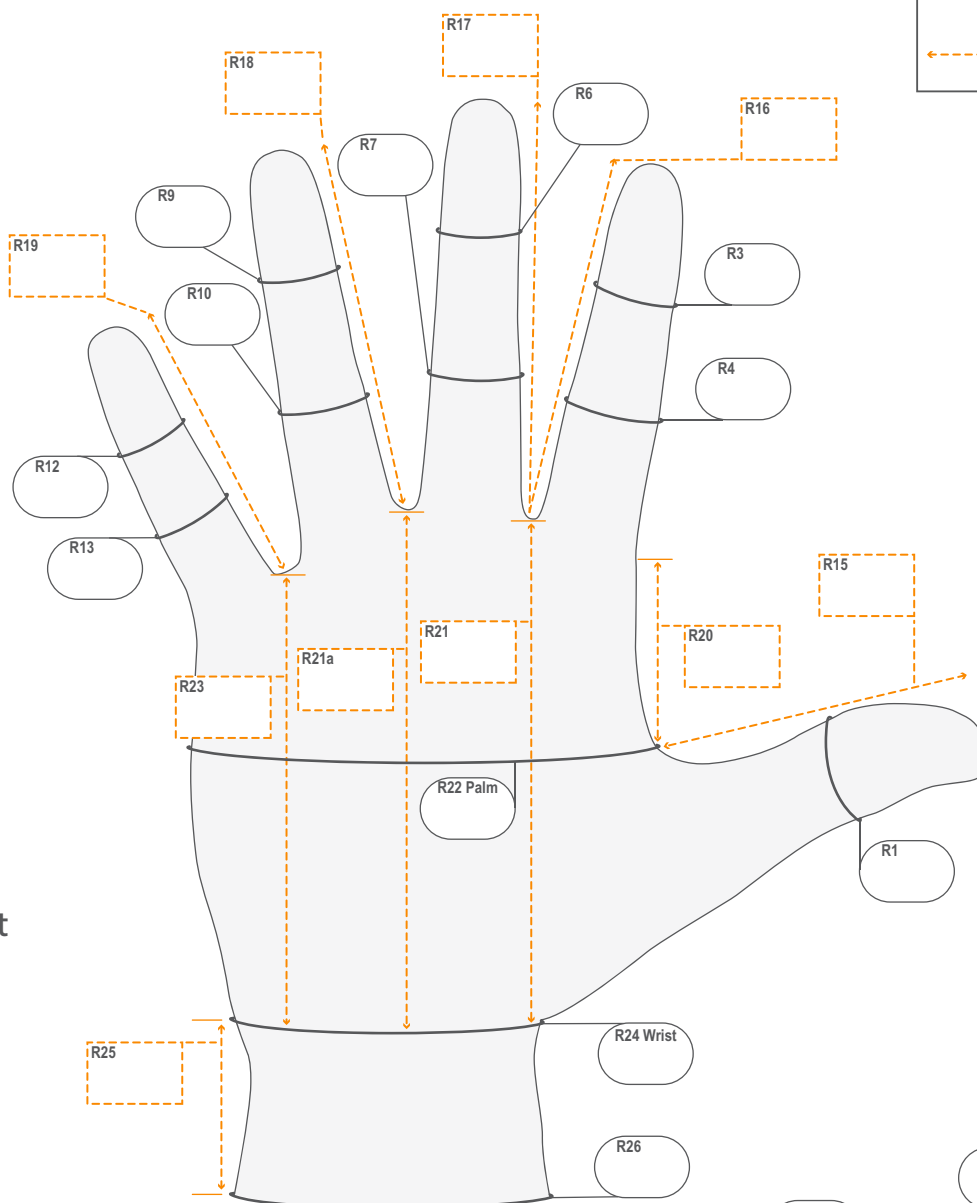
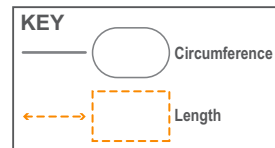
Please download your electronic forms directly from our website - www.jobskin.co.uk/file-download



**LEFT
GLOVE**
For Gauntlet
see page 4

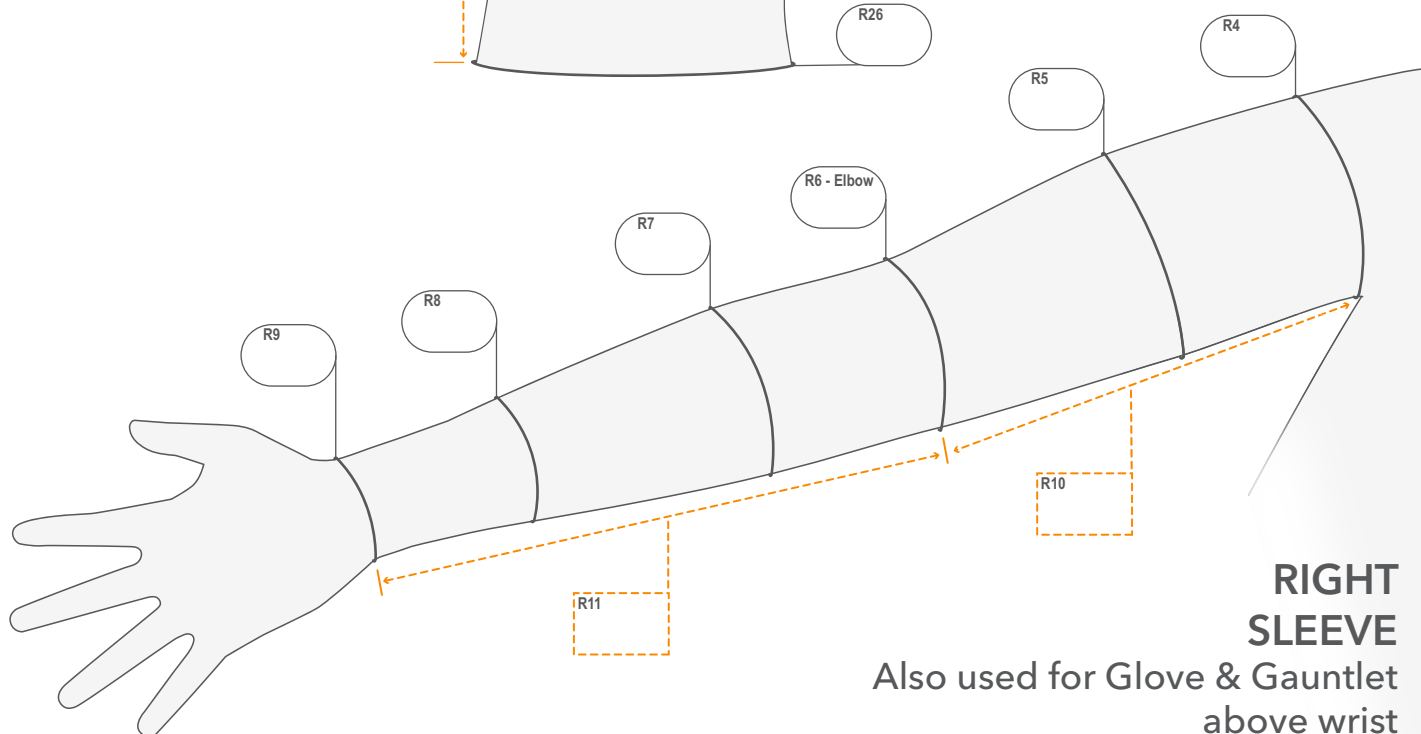


**LEFT
SLEEVE**
Also used for Glove & Gauntlet
above wrist



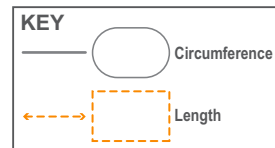
RIGHT GLOVE

For Gauntlet see page 4

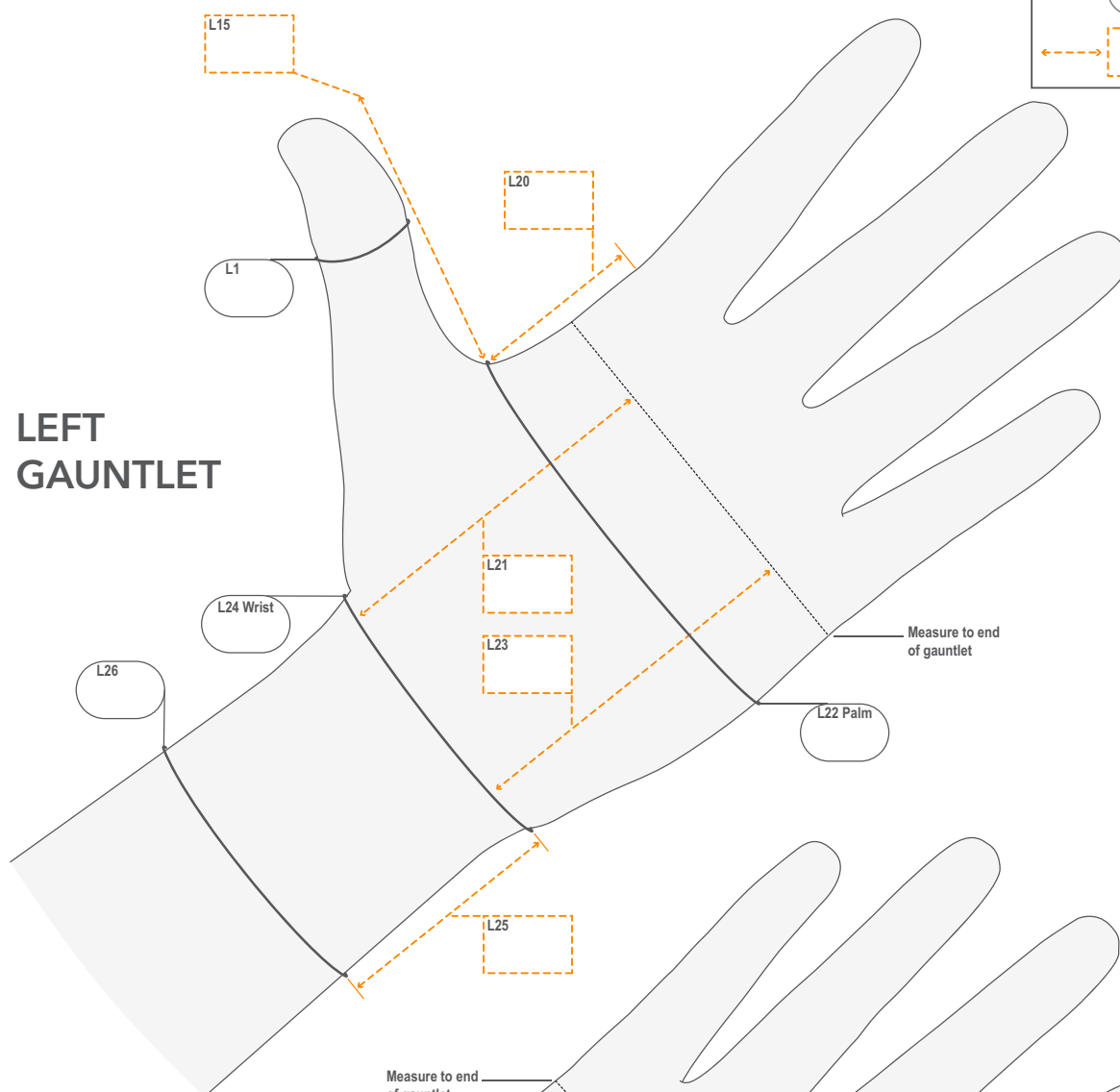


RIGHT SLEEVE

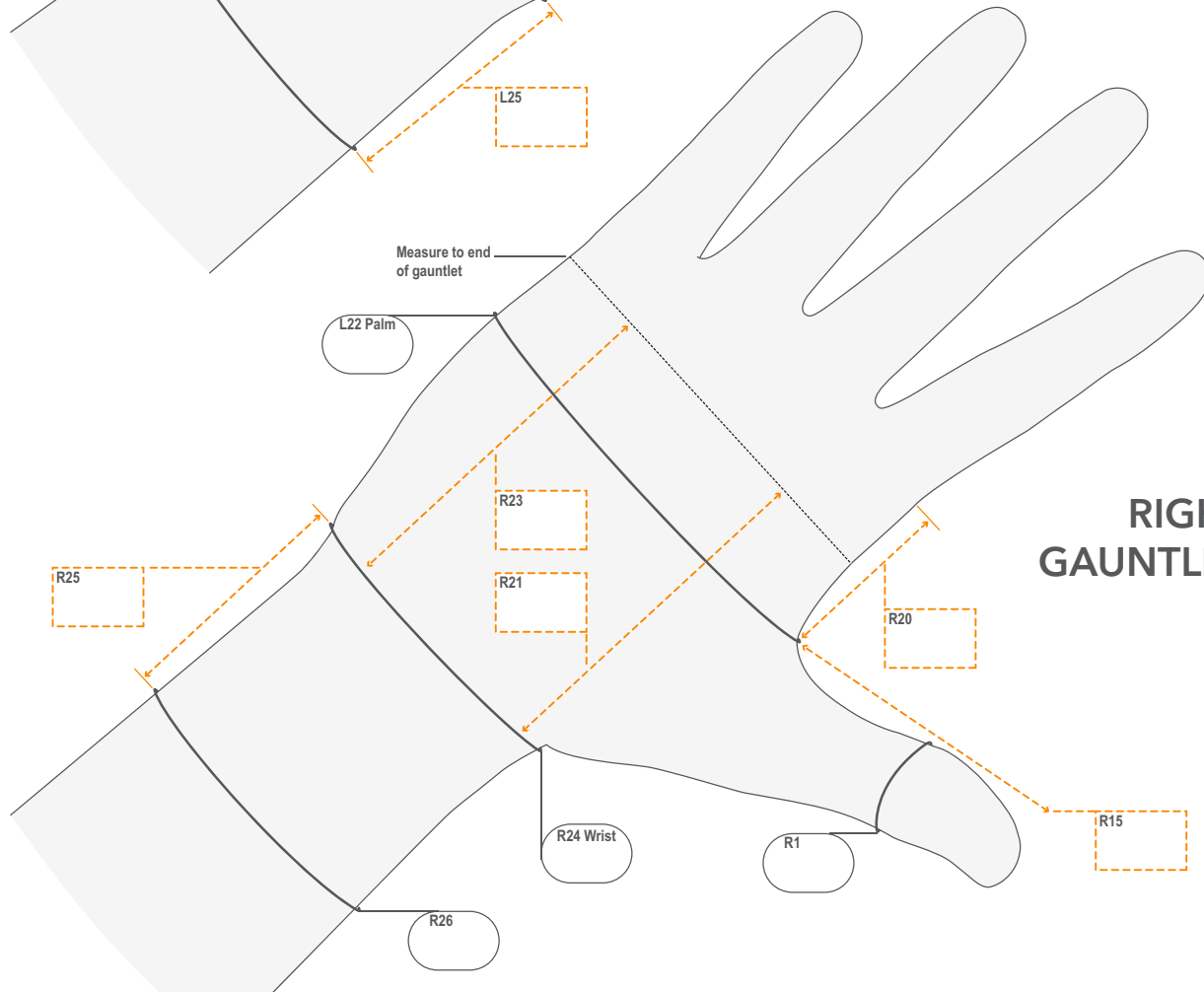
Also used for Glove & Gauntlet above wrist



LEFT GAUNTLET



RIGHT GAUNTLET



Glove

Circumference Measurements

Left (cm) Right (cm)

1	Thumb IP joint		
3	Index finger DIP		
4	Index finger PIP		
6	Middle finger DIP		
7	Middle finger PIP		
9	Ring finger DIP		
10	Ring finger PIP		
12	Little finger DIP		
13	Little finger PIP		
22	Palm (ensure palm is opened out fully)		
24	Wrist crease		
26	Forearm at finished length of glove		

Length Measurements

Left (cm) Right (cm)

15	Thumb web to finished length		
16	Index finger		
17	Middle finger		
18	Ring finger		
19	Little finger		
20	Thumb web to base of index finger		
21	Wrist to 2nd web		
21a	Wrist to 3rd web		
23	Wrist to 4th web		
25	Wrist to finished length of glove		

Closed tip gloves (tick if required)

Left Right

15	Thumb	<input type="checkbox"/>	<input type="checkbox"/>
16	Index finger	<input type="checkbox"/>	<input type="checkbox"/>
17	Middle finger	<input type="checkbox"/>	<input type="checkbox"/>
18	Ring finger	<input type="checkbox"/>	<input type="checkbox"/>
19	Little finger	<input type="checkbox"/>	<input type="checkbox"/>

Gauntlet

Circumference Measurements

Left (cm) Right (cm)

1	Thumb IP joint		
22	Palm (ensure palm is opened out fully)		
24	Wrist crease		
26	Forearm at finished length of gauntlet		

Length Measurements

Left (cm) Right (cm)

15	Thumb web to finished length		
20	* Thumb web to end of gauntlet		
21	* Wrist to end of gauntlet		
23	* Wrist to end of gauntlet		
25	Wrist to finished length of gauntlet		

* Please Note: The lengths required for this style need to be to the length required and NOT to the web spaces.

Glove & Gauntlet Modifications (tick if required)

Item description	Product Code	Left	Right
Pocket (sewn in for the insertion of pads to apply extra pressure to certain areas). Use Silon-TEX II placement pad to mark position	PG45	<input type="checkbox"/>	<input type="checkbox"/>
Pad Use Silon-TEX II placement pad to mark position	PG40	<input type="checkbox"/>	<input type="checkbox"/>
Proximal elastic: <input type="checkbox"/> Regular <input type="checkbox"/> Cuff		<input type="checkbox"/>	<input type="checkbox"/>
Proximal elastic, non-slip		<input type="checkbox"/>	<input type="checkbox"/>
Reinforced palm (outside of glove)	PG45	<input type="checkbox"/>	<input type="checkbox"/>
Lined palm (inside of glove)	PG42	<input type="checkbox"/>	<input type="checkbox"/>
Non-slip grip to palm (glove only)		<input type="checkbox"/>	<input type="checkbox"/>
Velcro tab closure (proximal end)	PG41	<input type="checkbox"/>	<input type="checkbox"/>
Zipper location: <input type="checkbox"/> Inset <input type="checkbox"/> Ulnar <input type="checkbox"/> Radial <input type="checkbox"/> Dorsal	PG41	<input type="checkbox"/>	<input type="checkbox"/>
Zipper Length: <input type="checkbox"/> Standard <input type="checkbox"/> Other _____ cm			

PG10 - Sleeve

Circumference Measurements

Left (cm) Right (cm)

4	Top of arm level with axilla		
5	Mid upper arm		
6	Elbow joint/crease, arm extended		
7	Upper forearm		
8	Lower forearm		
9	Wrist		

Length Measurements

Left (cm) Right (cm)

10	From elbow joint/crease to axilla or required length		
11	From wrist crease to elbow or required length		

Sleeve Modifications (tick if required)

Item description	Product Code	Left	Right
Pocket (sewn in for the insertion of pads to apply extra pressure to certain areas). Use Silon-TEX II placement pad to mark position	PG45	<input type="checkbox"/>	<input type="checkbox"/>
Pad Use Silon-TEX II placement pad to mark position	PG40	<input type="checkbox"/>	<input type="checkbox"/>
Proximal elastic: <input type="checkbox"/> Regular <input type="checkbox"/> Cuff		<input type="checkbox"/>	<input type="checkbox"/>
Proximal elastic, non-slip		<input type="checkbox"/>	<input type="checkbox"/>
Zipper location: <input type="checkbox"/> Inset <input type="checkbox"/> Medial <input type="checkbox"/> Lateral	PG41	<input type="checkbox"/>	<input type="checkbox"/>
Zipper Length: <input type="checkbox"/> Standard <input type="checkbox"/> Other _____ cm			

Specific Instructions