



Medigarments Ltd®

Arm Gaiter Order Form Made-to-measure

All fields are required in order to process your order

Order Details	Patient Details
Date:	Patient Reference No.:
Order No.:	First Name:
Contact Name:	Surname:
Contact Phone No.:	Date of Birth:
Email:	PLEASE NOTE: Gaiters are non-returnable.
Hospital/Clinic:	Please ensure accurate measurements as we
Delivery Address:	are unable to make alterations.
	are unable to make alterations.
Post Code:	One Garment Per Form
Specifications	
Arm: Left Right	
	Extension
Style: KNS08 Extension KNS08F Flexion*	
* Please indicate degree of flexion required:	1
Flexion is available in increments of 5 degrees, beginning at zero.	
Incorrectly supplied flexion angles will automatically be round-	G
ed up or down to the nearest 5 degrees to a maximum of 90 degrees.	
Straight steels: 2 3	
Please note: Flexion gaiters are supplied with 2 flexion steels	Flexion
rease note. Hexion gaiters are supplied with 2 nexion steers	TIEXIOII
Circumference	
Measurements (cm)	Angle of
A Proximal circumference	Flexion
B Distal circumference	
Distal circumierence	
Length	
Measurements (cm)	
C Proximal end to elbow joint (Measure Posterior surface)	$U(\Lambda)$
D Distal end to elbow joint (Measure Posterior surface)	
	(A)
G Total length of extension gaiter (Measure Medial Border)	
Fabrics	B
Bumblebee Camouflage Dinosaurs	
Hearts & Flowers Mint Butterflies Rainbow Unicorns	
Urban Camo Denim Claret	ic
Black	(
	Flexion
Lining: Cotton Towelling & Foam Padded (chargeable)	

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