# Jobskin® Premium

**Medigarments Ltd™**
DESIGNED AROUND YOU

## 505 Hand 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

Diagnosis: _____

_____

_____

## Fabrics

**Plain Powernet:** ☐ Beige ☐ Tan ☐ Blossom ☐ Red ☐ Raspberry
☐ Classy Blue ☐ Denim Blue ☐ Black

**Printed Powernet:** ☐ Unicorn ☐ Safari Car ☐ Paw Print ☐ Pink Camo ☐ Green Camo
☐ Blue Camo

## Zips

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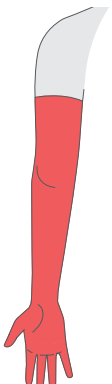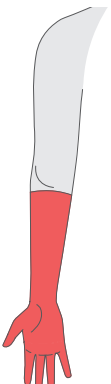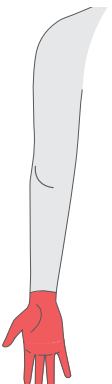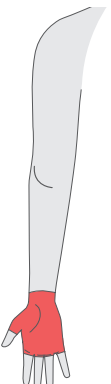
## Bindings

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

## Thread

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

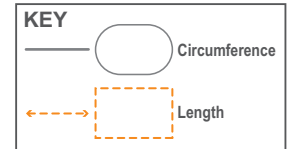## Garment – please indicate quantity of garments required in the boxes below, i.e. ☐2

☐ **0533**
Glove to Axilla
☐ Left ☐ Right

☐ **0534**
Glove to Elbow
☐ Left ☐ Right

☐ **0535**
Glove to Wrist
☐ Left ☐ Right

☐ **0536**
Interdigital Web Spacer
☐ Left ☐ Right

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**505 Hand Order Form**

**Order No.:** _____  **Patient Reference No.:** _____

## Left Dorsal View



L14

L13

L6

L5

Open Tip

L15

L3

Open Tip

L12

Open Tip

L4

L7

Open Tip

L8

L1

L2

L16

L19

L18

L17

L10 Palm

L9

Open Tip

L20

L11 Wrist

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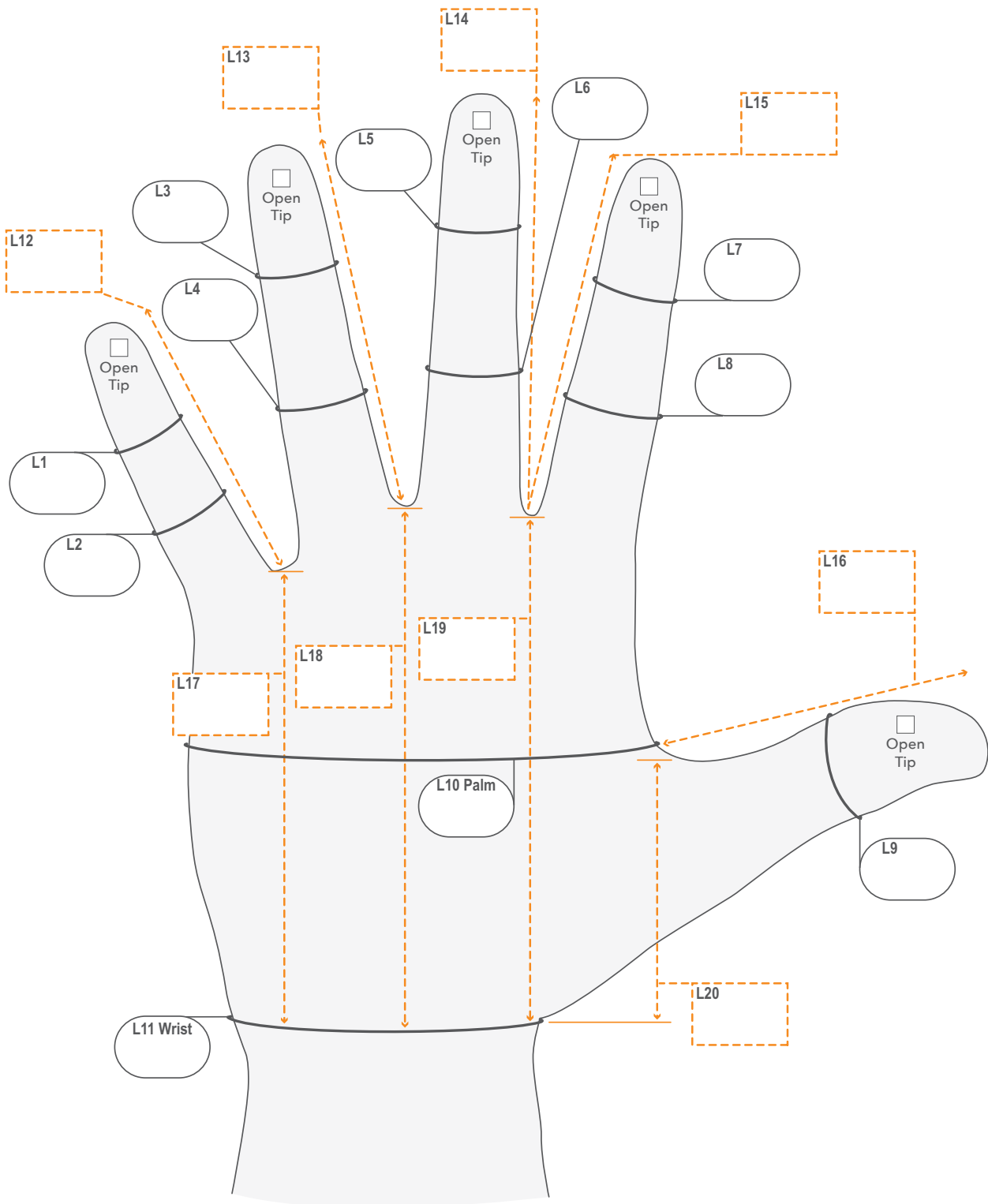
**505 Hand Order Form**

**Order No.:** _____ **Patient Reference No.:** _____

## Right Dorsal View



R14
R13
R15
R6
R5
Open Tip
Open Tip
R3
R7
Open Tip
R12
R8
R4
Open Tip
R1
R2
R16
R19
R18
R17
Open Tip
R10 Palm
R9
R20
R11 Wrist

# Jobskin® Premium
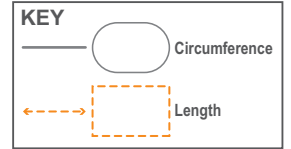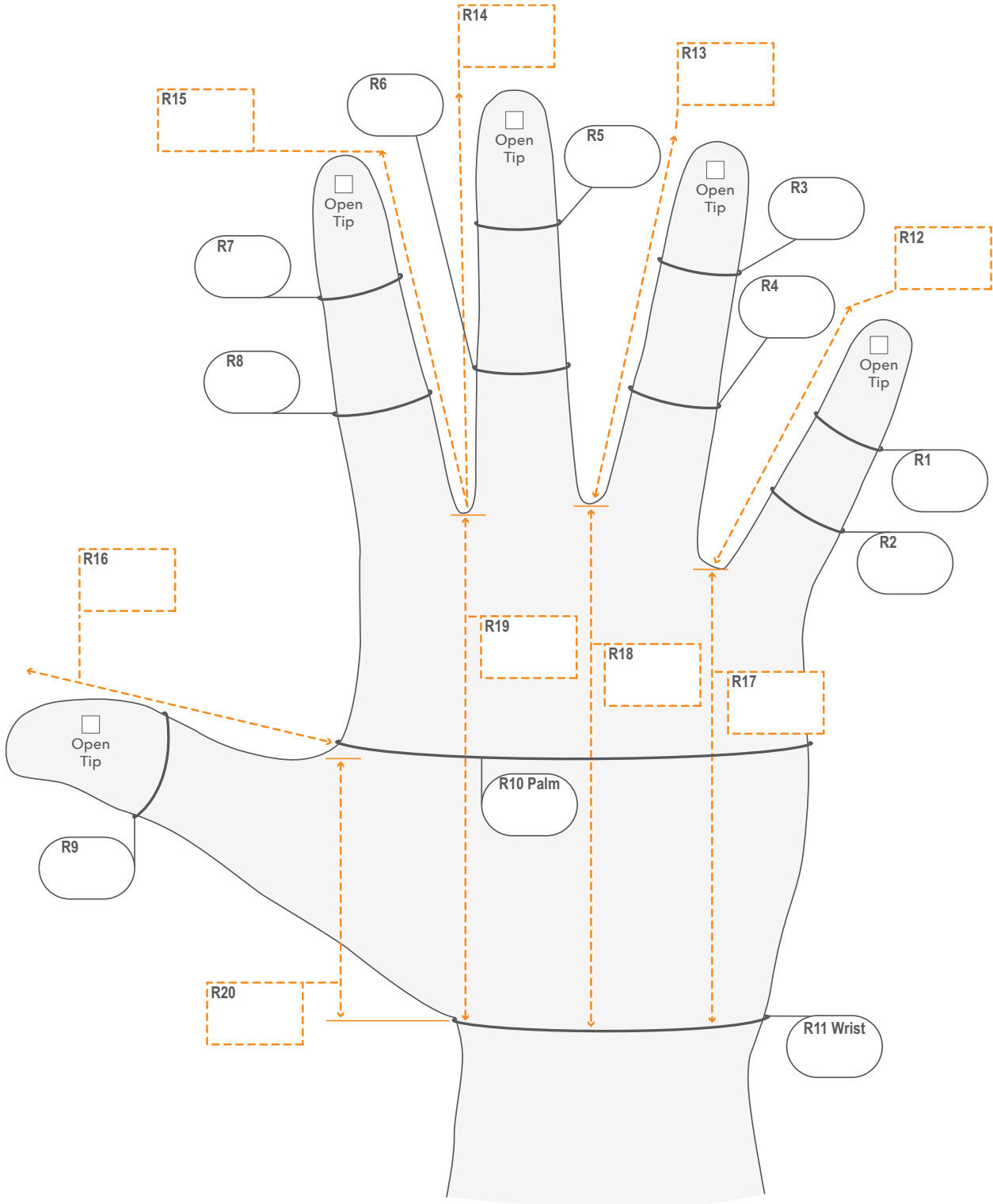
## 505 Hand Order Form

Order No.: _____  Patient Reference No.: _____

**Note:** Only measure digits required to be included in the glove.

### Circumference Measurements

| | | Open Tips (Tick if required) | Left (cm) | Right (cm) |
|---|---|---|---|---|
| 1 | Little finger DIP joint | ☐ | | |
| 2 | Little finger PIP joint | | | |
| 3 | Ring finger DIP joint | ☐ | | |
| 4 | Ring finger PIP joint | | | |
| 5 | Middle finger DIP joint | ☐ | | |
| 6 | Middle finger PIP joint | | | |
| 7 | Index finger DIP joint | ☐ | | |
| 8 | Index finger PIP joint | | | |
| 9 | Thumb IP joint | ☐ | | |
| 10 | Palm | | | |
| 11 | Wrist Crease - Place the tape around the wrist between the Ulnar Styloid Process and the base of the hand | | | |
| | 3.8cm beyond Wrist | | | |
| | 7.6cm beyond Wrist | | | |

Measurements 12 – 20 are linear and should be taken on the back of the hand or from a hand outline tracing.

Measure the length of the digit from the highest point of the web to the finger tips for closed tips or the required finished length for open tips. Alternatively transfer lengths from a hand outline tracing.

### Length Measurements

| | | Left (cm) | Right (cm) |
|---|---|---|---|
| 12 | Little finger to web between little finger and ring finger | | |
| 13 | Ring finger to web between ring finger and middle finger | | |
| 14 | Middle finger to web between middle finger and index finger | | |
| 15 | Index finger to web between middle finger and index finger | | |
| 16 | Thumb to thumb web | | |

Measure: wrist crease to web spaces for measurements 17 – 20

| | | Left (cm) | Right (cm) |
|---|---|---|---|
| 17 | Wrist to web between little and ring finger | | |
| 18 | Wrist to web between middle and ring finger | | |
| 19 | Wrist to web between index and middle finger | | |
| 20 | Wrist to thumb web | | |

### Modifications (tick if required)

| Item description | Product Code | Left | Right |
|---|---|---|---|
| Reinforced Palm | 0021 | ☐ | ☐ |
| Pocket (sewn in for the insertion of pads to apply extra pressure to certain areas) | 0027 | ☐ Use Silon-TEX II placement pad to mark position | ☐ |
| Short zipper (<20cm) | 1164 | ☐ | ☐ |
| Long zipper (>20cm) | 1165 | ☐ | ☐ |
| Slant Inserts (A seam is sewn between the digits when additional pressure is required into the web spaces of the hand, not thumb) | 1169 | ☐ | ☐ |

### Arm Measurements (from PINK paper tape)

| Left (cm) | | Right (cm) |
|---|---|---|
| | **Distal Pleat** | |
| | **Wrist** | |
| | -4½ | |
| | -3 | |
| | -1½ | |
| | 0 | |
| | +1½ | |
| | +3 | |
| | +4½ | |
| | +6 | |
| | +7½ | |
| | **Elbow 9** | |
| | +10½ | |
| | +12 | |
| | +13½ | |
| | +15 | |
| | +16½ | |
| | +18 | |
| | **Axilla** | |
| | **Proximal Pleat** | |

### Zipper Options (tick if required)

| | | Left | Right |
|---|---|---|---|
| ☐ | Dorsal | ☐ | ☐ |
| ☐ | Ulnar (standard) | ☐ | ☐ |
| ☐ | Palmer | ☐ | ☐ |

### Specific Instructions