



Order Form Details

All fields are required in order to process your order

Order Details

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

Post Code: _____

Patient Details

Patient Reference No.: _____
First Name: _____
Surname: _____
Year of Birth: _____
Please indicate: ☐ Male ☐ Female
Please indicate: ☐ New Patient ☐ Existing Patient
Diagnosis: _____

Please continue to fill in the garment details using the following pages.

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

Gauntlet Order Form

All fields are required in order to process your order

Premium Original

Plain Powernet:

☐ Beige

☐ Tan

☐ Blossom

☐ Red

☐ Raspberry

☐ Classy Blue

☐ Denim Blue

☐ Black

☐ Pink Camo

☐ Green Camo

Printed Powernet:

☐ Unicorn

☐ Safari Car

☐ Paw Print

☐ Blue Camo

☐ Rainbow Unicorn

Zips

☐ None

☐ Colour Matching

Bindings - no binding choice available on gauntlet garments.

Thread

☐ Colour Matching

☐ Beige

☐ White

☐ Tan

☐ Pastel Pink

☐ Bright Pink

☐ Red

☐ Purple

☐ Green

☐ Pastel Blue

☐ Royal Blue

☐ Denim Blue

☐ Navy Blue

☐ Black

Premium Active - 50 UPF (both garment colour choices are designed with black zipper and thread)
(no themed binding is available with this fabric option)

☐ Eucalyptus Green

☐ Black

Premium Q10 - Q10 cosmetic ingredient (zipper & thread are matching - plain colours are based on the Fitzpatrick scale)
(no themed binding is available with this fabric option)

Plain Q10:

☐ Type 2
(white, fair)

☐ Type 3
(medium white to olive)

☐ Type 4
(olive, moderate brown)

☐ Type 5
(brown dark brown)

☐ Type 6
(brown, very dark, brown to black)

Printed Q10:

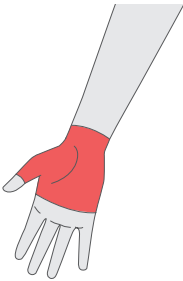
☐ Fairy & Castle

☐ Dinosaurs

Garment (please indicate)

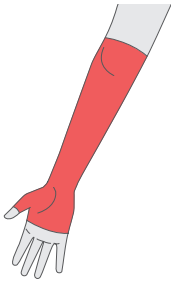
☐ PO 0505
Gauntlet up to 7.6cm above wrist

☐ Left ☐ Right



☐ PO 0536
Gauntlet above 7.6cm to axilla or required finished length

☐ Left ☐ Right

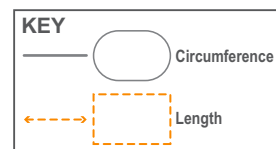


Please note: use one form per garment. E.g. If you are ordering both left and right gauntlets, please use two forms

Gauntlet Order Form

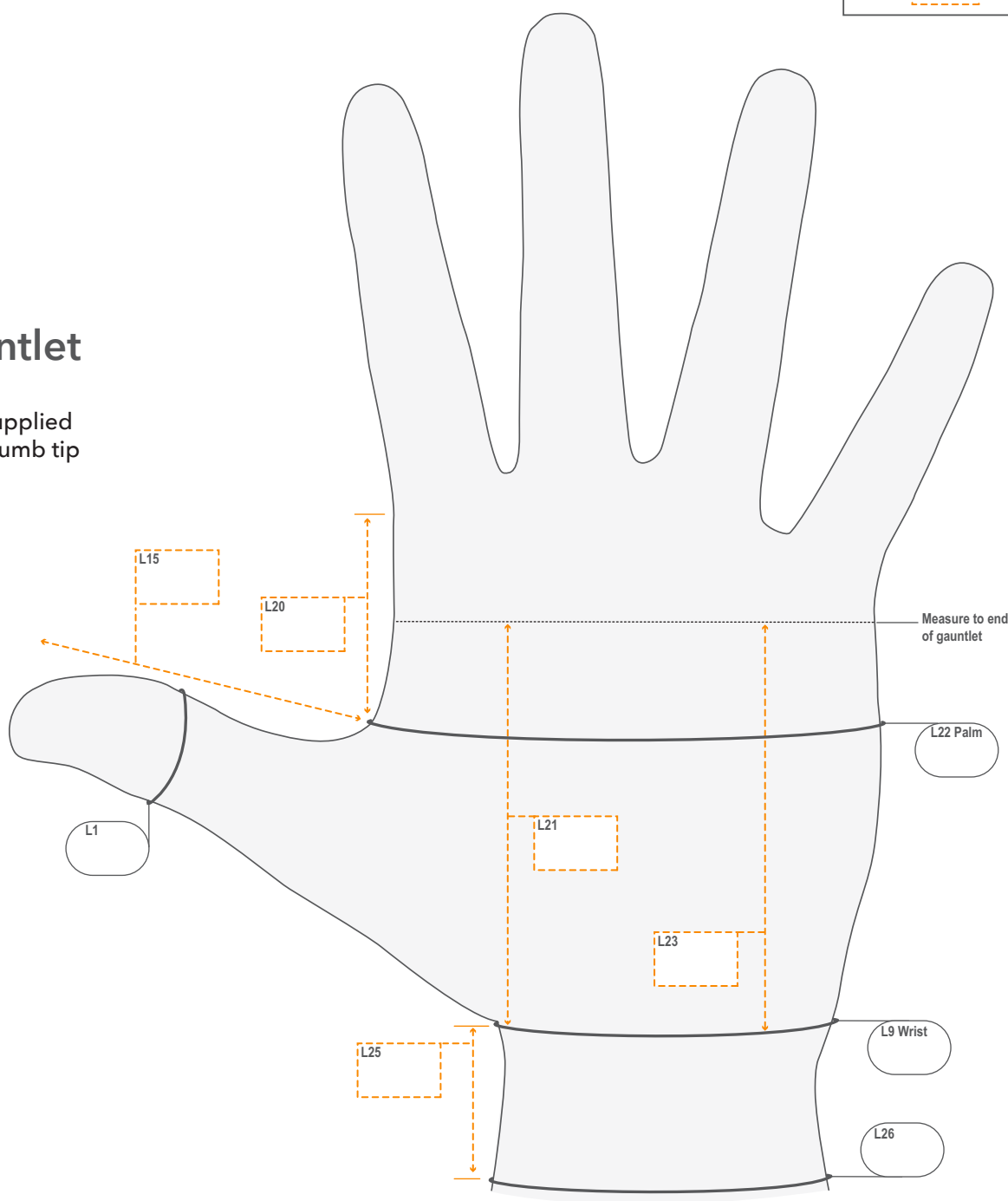
Order No.: _____ Patient Reference No.: _____

Please use this outline in conjunction with the guide and grids on page 5

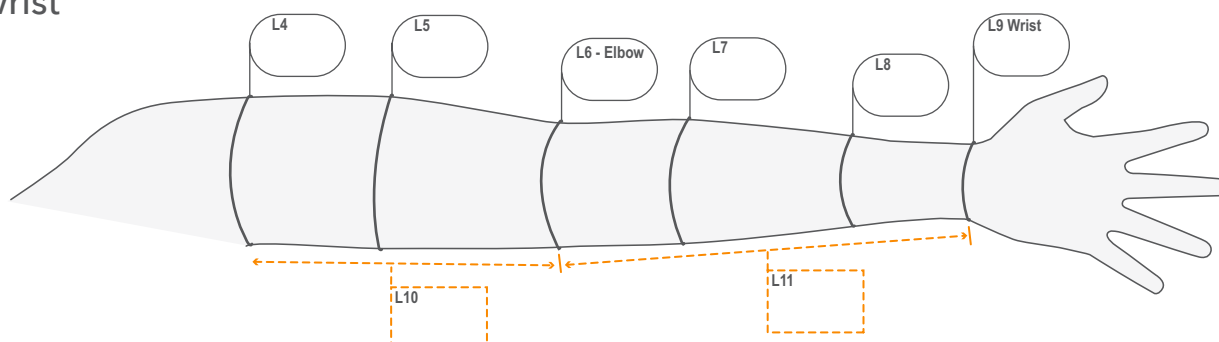


Left Gauntlet

Gauntlets are supplied with an open thumb tip



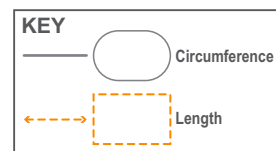
Left Arm For Gauntlet above wrist



Gauntlet Order Form

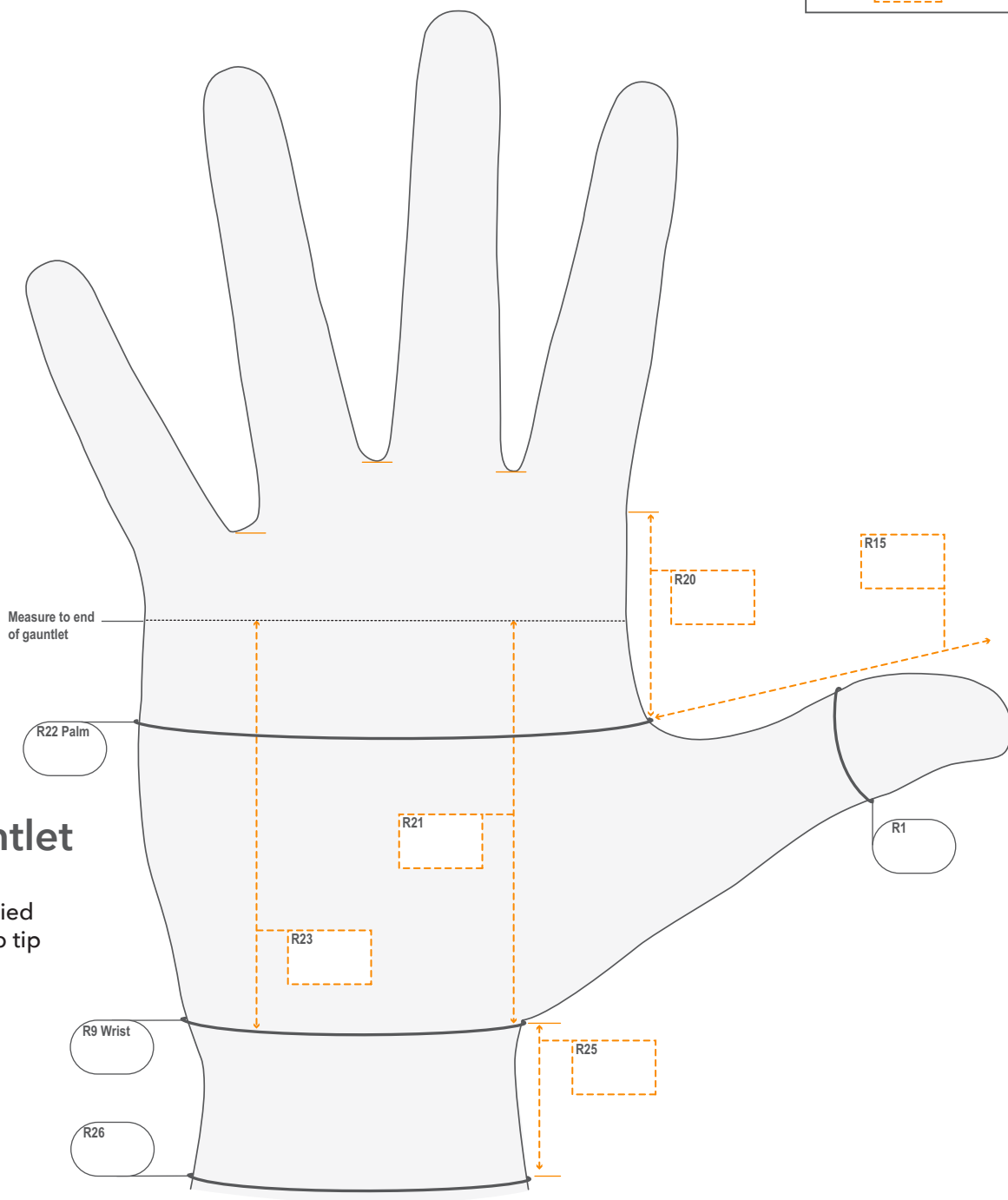
Order No.: _____ Patient Reference No.: _____

Please use this outline in conjunction with the guide and grids on page 5

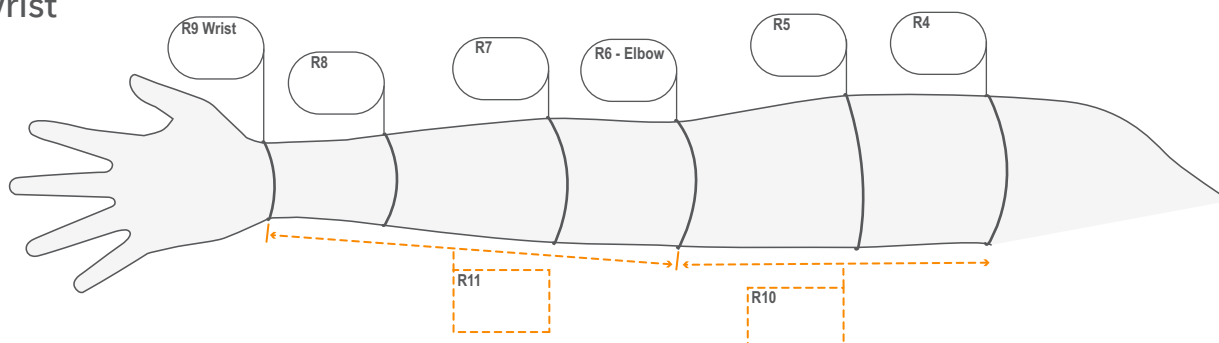


Right Gauntlet

Gauntlets are supplied with an open thumb tip



Right Arm For Gauntlet above wrist



Gauntlet Order Form

Order No.: _____ Patient Reference No.: _____

Circumference Measurements		Left (cm)	Right (cm)
1	Thumb IP joint		
9	Wrist crease		
22	Palm (ensure palm is opened out fully)		
26	Finished length		

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		
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.

Limb measurements: The new range can be measured using either method A using a traditional measure tape or method B using our specialised limb paper tapes, to record the arm/limb measurements.

Method A: For PO 0536 Gauntlet above 7.6cm to axilla or required finished length

		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 crease		

Method B

Arm (Use PINK paper tape for the arm)

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	
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Please note: When selecting the end of gauntlet elastic finish, all options are included in the finished length, indicated by the paper tapes recorded above. (This includes the CUFF finish)

Gauntlet Order Form

Order No.: _____ Patient Reference No.: _____

Style Options

Proximal elastic:	Overlock (no elastic)	Left	Right
	Regular (inverted) 1.5cm	<input type="checkbox"/>	<input type="checkbox"/>
	Regular (inverted) 2.5cm	<input type="checkbox"/>	<input type="checkbox"/>
	Regular (inverted) 5cm	<input type="checkbox"/>	<input type="checkbox"/>
	Cuff 1.5cm	<input type="checkbox"/>	<input type="checkbox"/>
	Cuff 2.5cm	<input type="checkbox"/>	<input type="checkbox"/>
	Cuff 5cm	<input type="checkbox"/>	<input type="checkbox"/>
	Silicone Regular (inverted) 2.5cm	<input type="checkbox"/>	<input type="checkbox"/>
	Silicone Regular (inverted) 5cm	<input type="checkbox"/>	<input type="checkbox"/>
	Silicone cuff 2.5cm	<input type="checkbox"/>	<input type="checkbox"/>
	Silicone cuff 5cm	<input type="checkbox"/>	<input type="checkbox"/>
Distal elastic:	Overlock (no elastic)	<input type="checkbox"/>	<input type="checkbox"/>
	Regular (inverted) 1.5cm	<input type="checkbox"/>	<input type="checkbox"/>
	Regular (inverted) 2.5cm	<input type="checkbox"/>	<input type="checkbox"/>
	Regular (inverted) 5cm	<input type="checkbox"/>	<input type="checkbox"/>
	Cuff 1.5cm	<input type="checkbox"/>	<input type="checkbox"/>
	Cuff 2.5cm	<input type="checkbox"/>	<input type="checkbox"/>
	Cuff 5cm	<input type="checkbox"/>	<input type="checkbox"/>
	Silicone Regular (inverted) 2.5cm	<input type="checkbox"/>	<input type="checkbox"/>
	Silicone Regular (inverted) 5cm	<input type="checkbox"/>	<input type="checkbox"/>
	Silicone cuff 5cm	<input type="checkbox"/>	<input type="checkbox"/>

5cm elastic option is not recommended on gloves to wrist or elbow length

Modifications

All the following items will be an additional charge

Zippers - 1145 (tick if required)

Gauntlet to wrist			
Zipper placement	<input type="checkbox"/> Inside of fabric	<input type="checkbox"/> Outside of fabric	
Position (please select: Ulnar, Radial, Radial Dorsal, Dorsal, Palmer)	Left	Right	
	<input type="checkbox"/>	<input type="checkbox"/>	
Length: _____ cm			
Hook & eye (on fly behind the zip to assist donning)	<input type="checkbox"/>	<input type="checkbox"/>	

Inset Zippers - 1144 (tick if required)

Use placement pad to mark position if required			
Arm			
Extremity	<input type="checkbox"/> Distal	<input type="checkbox"/> Proximal	
Zipper placement	<input type="checkbox"/> Inside of fabric	<input type="checkbox"/> Outside of fabric	
Position (please select: Medial, Lateral, Dorsal, Volar)	Left	Right	
	<input type="checkbox"/>	<input type="checkbox"/>	
Length: _____ cm			

Sleeve Linings

Description	Product Code	Left	Right
Inner elbow lining (to protect fragile skin and provide comfort if required)	1167	<input type="checkbox"/>	<input type="checkbox"/>
Full elbow lining (as above)	1168	<input type="checkbox"/>	<input type="checkbox"/>

Reinforcements

Description	Product Code	Left	Right
Non-slip grip to palm (glove only)	1197	<input type="checkbox"/>	<input type="checkbox"/>

Silon-TEX® II Insert

Silon-TEX® II fabric (sewn into garment)	1191	<input type="checkbox"/> Use placement pad to mark position
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Pockets & Pads

Description	Product Code	
Pocket (sewn in for the insertion of pads to apply extra pressure to certain areas) Please specify position	0027	<input type="checkbox"/> Use placement pad to mark position
Silon-TEX® II pocket (as above but covered with Silon-TEX® II fabric)	1147	<input type="checkbox"/> Use placement pad to mark position

Foam Pads (to insert into pocket, please select foam thickness)

Low profile 5mm	1178	<input type="checkbox"/>
Low density 20mm	1179	<input type="checkbox"/>
High density 25mm	1180	<input type="checkbox"/>