



Dationt Dataila



Order Form Details

Order Detaile

All fields are required in order to process your order

| Order Details | Fatient Details |
|--------------------|------------------------------|
| Date: Order No.: | Patient Reference No.: |
| Contact Name: | |
| Contact Phone No.: | Surname: |
| Email: | Year of Birth: |
| Hospital/Clinic: | Please indicate: Male Female |
| Delivery Address: | |
| | Diagnosis: |
| | |
| | |
| Post Code: | |
| | |

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

Jobskin Premium Original

Medigarments Ltd® DESIGNED AROUND YOU

Socks Order Form

All fields are required in order to process your order

| Premium Orig | inal | | | | |
|--|---|--------------------------------------|--|---|--|
| Plain Powernet: | Beige Classy Blue | Tan Denim Blue | Blossom Black | Red | Raspberry |
| Printed Powernet: | Unicorn | Safari Car | Paw Print | Pink Camo | Green Camo |
| | Blue Camo | Rainbow Unicorn | | | |
| Zips | | | | | |
| None | Colour Matching | | | | |
| | | | | | |
| Bindings - no | binding choice | e available o | n sock garment | :S. | |
| Thursd | | | | | |
| Thread | □•. | □ vag s | □ - | | |
| Colour Matching | Beige | White | Tan | Pastel Pink | Bright Pink |
| Red | Purple | Green | Pastel Blue | Royal Blue | Denim Blue |
| Navy Blue | Black | | | | |
| Premium Activ | ve - 50 UPF (both) | garment colour choice | s are designed with black z | ipper and thread) | |
| | (no the | emed binding is availab | ble with this fabric option) | .ppor ana amoua, | |
| Eucalyptus Green | Black | | | | |
| | | | | | |
| Premium Q10 | - Q10 cosmetic | ingredient (zippe (no th | er & thread are matching - nemed binding is available | plain colours are based on with this fabric option) | the Fitzpatrick scale) |
| 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 0020 | PO 0021 | | PO 0105 | PO 0101 | |
| New Premium | New Premium | | Traditional Premium | Traditional Premium | |
| Anklet | Knee Length Sock | | Anklet | Knee Length Sock | |
| Side seam design ☐ Open Toe ☐ Closed To | Side seam design e □ Open Toe □ Closed | Too | Back seam design Open Toe Closed Toe | Back seam design Open Toe Closed Toe | |
| Left Right | Left Right | ioe | Left Right | Left Right | |
| | | | | | |
| | | | | | |

Side seam design Back seam design

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

Use measurement method A for PO 0020 & PO 0021

Use measurement method B for PO 0105 & PO 0101

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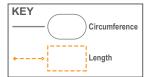
Medigarments Ltd®
DESIGNED AROUND YOU

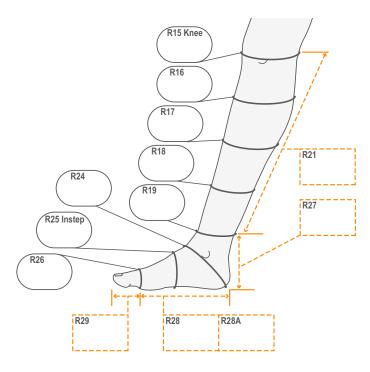
Socks Order Form

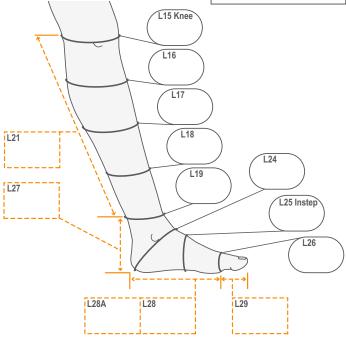
| Order No.: | Patient Reference No.: |
|------------|------------------------|
| | |

Please use this outline in conjuction with the guide and grids below

To record measurements type them in the boxes below or in the corresponding grid, both fill simultaneously.







Method A: For side seam designs with traditional tape measure

| | | Left (cm) | Right (cm) |
|----|--------------------------------------|-----------|------------|
| 15 | Knee joint | | |
| 16 | Upper calf | | |
| 17 | Mid calf | | |
| 18 | Lower calf | | |
| 19 | Upper margin of medial malleolus | | |
| 24 | Around foot and heel under malleolus | | |
| 25 | Instep or waist of foot | | |
| 26 | Foot at metatarsal heads | | |

| Length Measurements | | Left (cm) | Right (cm) |
|---------------------|---|-----------|------------|
| 21 | Medial malleolus to required top of sock | | |
| 27 | Upper margin medial malleolus to sole of foot | | |
| 28 | Metatarsal heads to heel (medial) | | |
| 28a | From metatarsal heads to heel on lateral border | | |
| 29 | Metatarsal heads to tip of toes (medial) | | |

| Sock closed toe only | Left (cm) | Right (cm) |
|----------------------|-----------|------------|
| Foot length required | | |

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

Method B: For back centre seam designs with paper tapes (no extra lengths required)

Half Leg (use GREEN paper tape for a half leg)

| Left (cm) | | Right (cm) |
|-----------|----------------|------------|
| | Distal Pleat | |
| | Toe End | |
| | -7½ | |
| | -6 | |
| | -41/2 | |
| | -3 | |
| | -1½ | |
| | Heel 0 | |
| | +1½ | |
| | +3 | |
| | +4½ | |
| | +6 | |
| | +7½ | |
| | +9 | |
| | +10½ | |
| | +12 | |
| | +13½ | |
| | +15 | |
| | Knee End | |
| | Proximal Pleat | |

Jobskin Premium Original

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0027

1147

1178

1179

1180

Use placement

pad to mark

pad to mark position

position Use placement

Pockets & Pads

Low profile 5mm

Low density 20mm

High density 25mm

Pocket (sewn in for the insertion of

areas) Please specify position

pads to apply extra pressure to certain

Silon-TEX® II pocket (as above but covered with Silon-TEX® II fabric)

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

Socks Order Form

| Order No.: _ | .: Patient Reference No.: | | | |
|--|---|----------------------|-----------|--------------------|
| All Other St | tyle Options | | | |
| Proximal | Regular (inverted) | 1.5cm | Left | Right |
| elastic: | Regular (inverted) | 2.5cm | | |
| | Regular (inverted) | 5cm | | |
| | Cuff 1.5cm | | | |
| | Cuff 2.5cm | | | |
| | Cuff 5cm | | | |
| | Silicone Regular (| inverted) 2.5cm | | |
| | Silicone Regular (| inverted) 5cm | | |
| | Silicone cuff 2.5cm | | | |
| | Silicone cuff 5cm | | | |
| Ankle contract | ure seam (at front of a | inkle for shaping | | |
| Distal | Regular (inverted) | 1.5cm | | |
| elastic: | Regular (inverted) | | | |
| | Cuff 1.5cm | | | |
| | Cuff 2.5cm | | | |
| | Silicone Regular (| inverted) 2.5cm | | |
| | Silicone cuff 2.5ci | | | |
| Zipper placem | | de of fabric | Outside o | |
| Position (please | select: Medial, Lateral | or Posterior) | Left | Right |
| Length: | cm | | | |
| Hook & eye (or | fly behind the zip to as | ssist donning) | | |
| Inset Zippe | rs - 1144 (tick if r | equired) | | |
| Use placement | pad to mark position | on if required | | |
| Zipper placem | ent Insid | de of fabric | Outside o | |
| Position (please | Position (please select: Medial, Lateral or Posterior) | | | of fabric |
| | | or Posterior) | Left | of fabric Right |
| | | or Posterior) | Left | |
| Length: | cm | or Posterior) | Left | |
| Length: | cm | or Posterior) | Left | |
| Reinforcem | cm | or Posterior) | Left | |
| Reinforcem | cm ents I (for high wear area | | Left | |
| Reinforced hee to reinforce) | cm ents I (for high wear area | 1187 | Left | |
| Reinforced hee to reinforce) Non-slip silicor | cm ents I (for high wear area | 1187 | Left | |
| Reinforced hee to reinforce) Non-slip silicor Toes Self enclosed t (no seams) | cm ents I (for high wear area | 1187 1188 | Left | |
| Reinforced hee to reinforce) Non-slip silicor Toes Self enclosed t (no seams) | cm ents I (for high wear area ne sole of foot oe in base fabric oe in lining fabric | 1187 1188 1159 | Left | |