



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

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Premium Original

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 ☐ Rainbow Unicorn

Bindings - no binding choice available on gauntlet garments.

Zips

☐ None ☐ Colour Matching

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

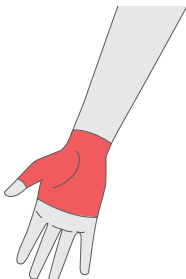
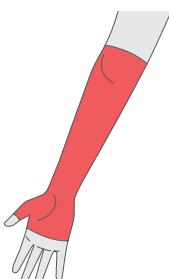
Premium Q10 - Q10 cosmetic ingredient

(Zipper and 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)

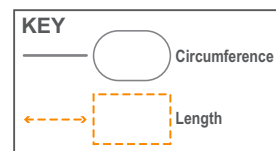
<input type="checkbox"/> PO 0505 Gauntlet up to 7.6cm above wrist <input type="checkbox"/> Left <input type="checkbox"/> Right 	<input type="checkbox"/> PO 0536 Gauntlet above 7.6cm to axilla or required finished length <input type="checkbox"/> Left <input type="checkbox"/> Right 
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Please use 1 form per garment.
 (E.g. If you are ordering both right & left gauntlet, please use two forms)

Gauntlet Order Form

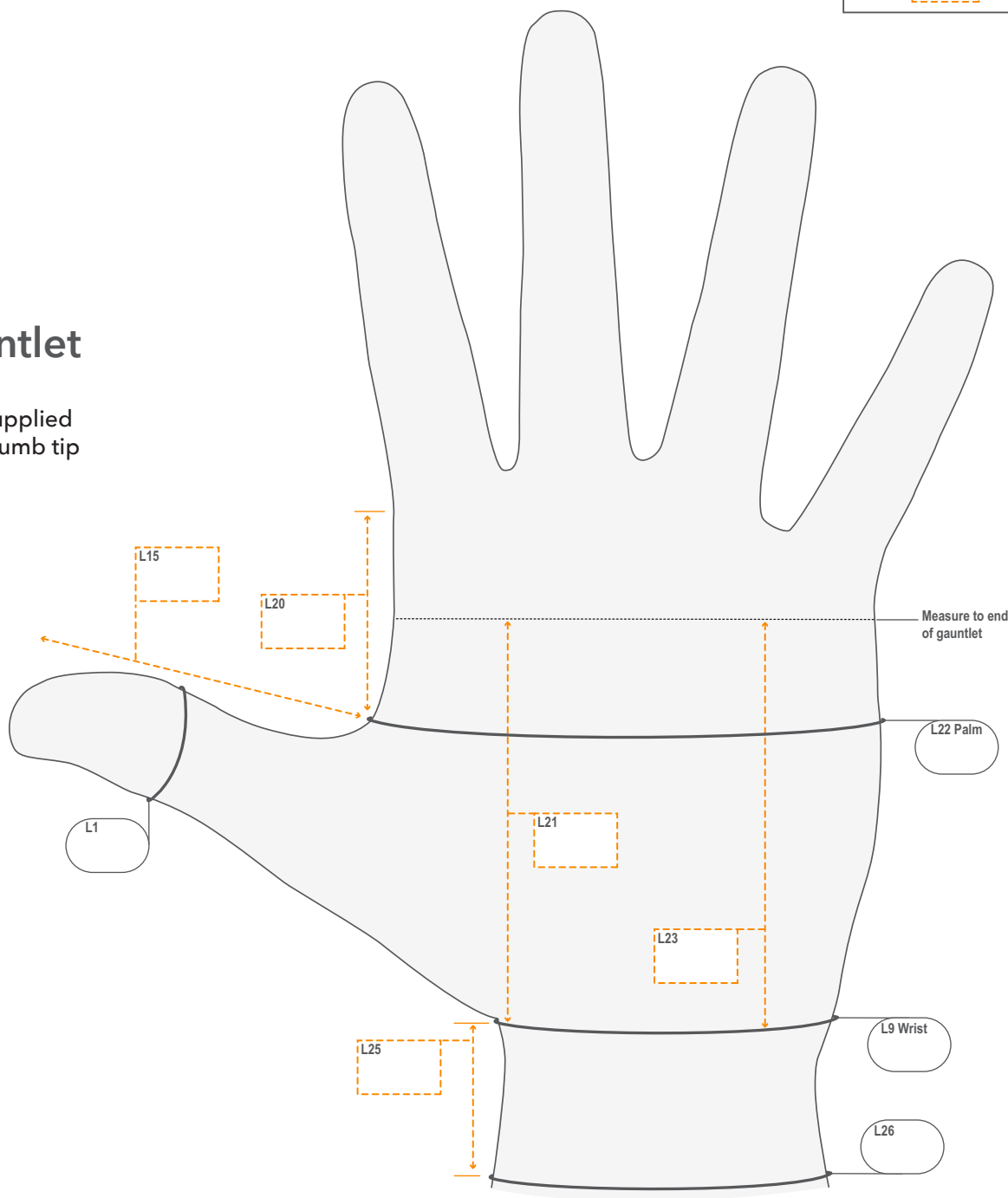
Order No.: _____ Patient Reference No.: _____

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

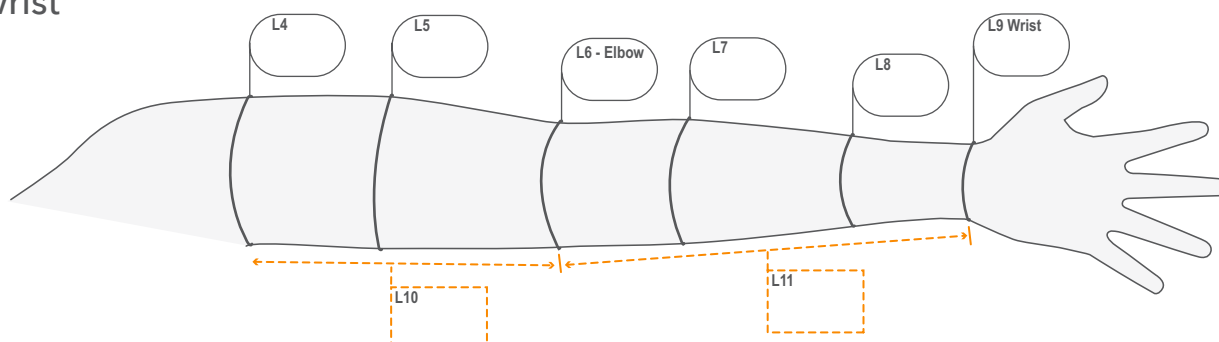


Left Gauntlet

Gauntlets are supplied with an open thumb tip



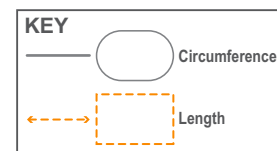
Left Arm For Gauntlet above wrist



Gauntlet Order Form

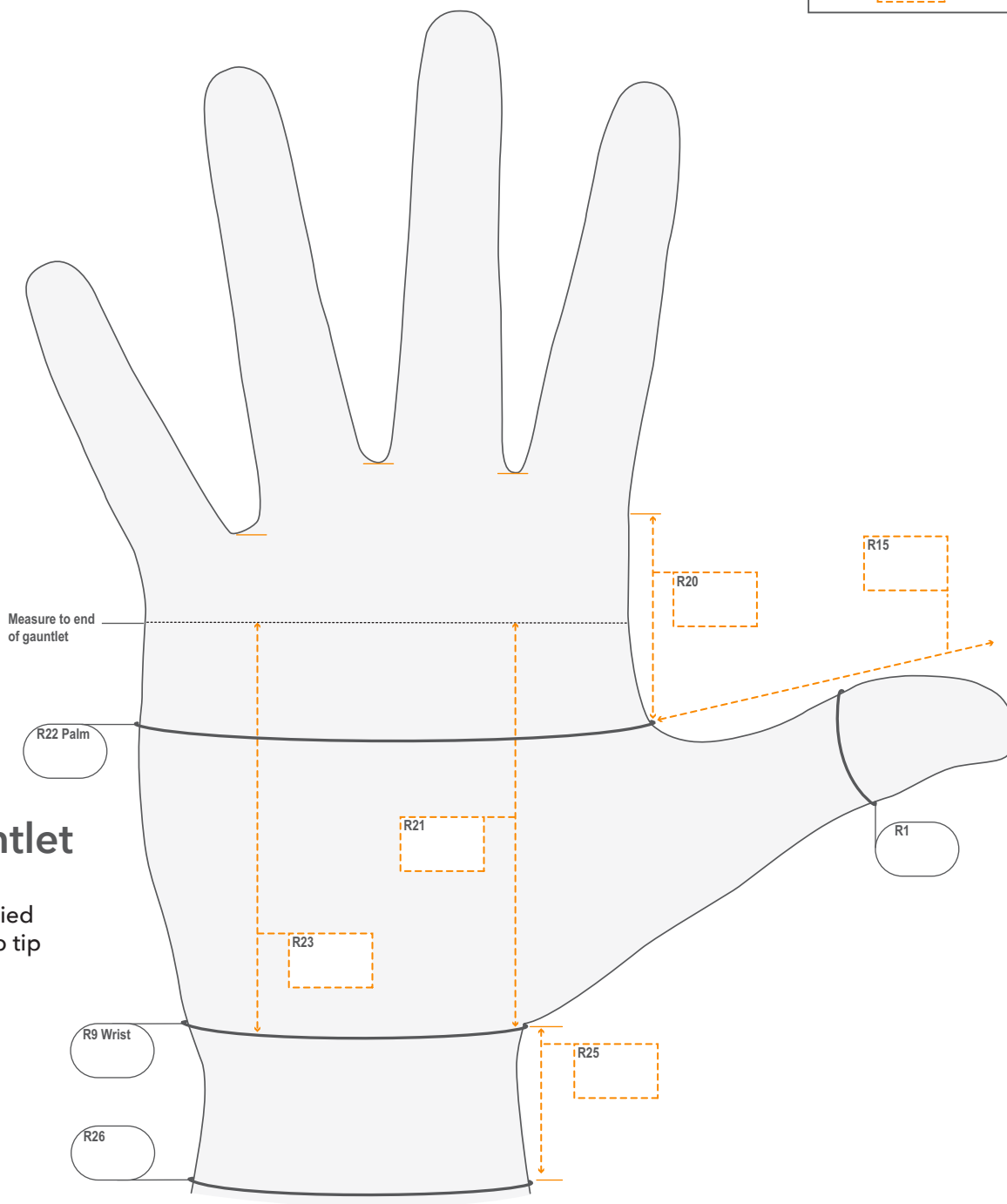
Order No.: _____ Patient Reference No.: _____

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

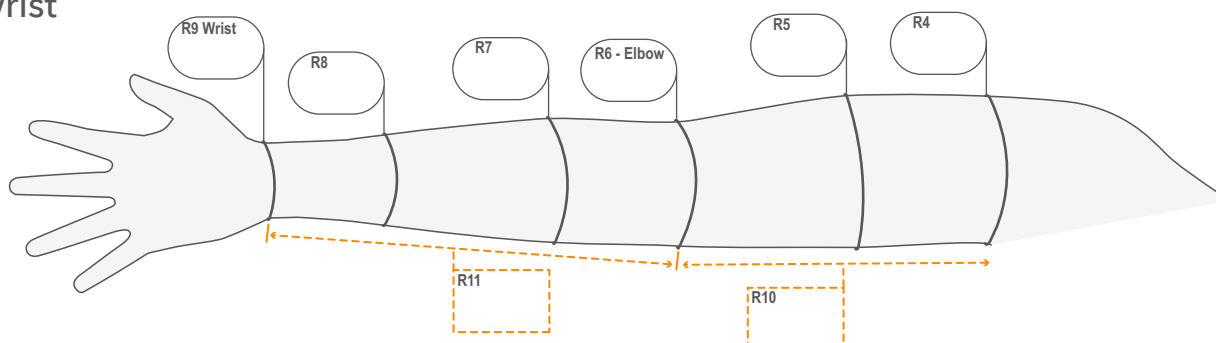


Right Gauntlet

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 PO0536 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:	Left	Right
Overlock (no elastic)	<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 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"/>

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 and 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

Item 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"/>

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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Reinforcements

Item description	Product Code	Left	Right
Non-slip grip palm	1197	<input type="checkbox"/>	<input type="checkbox"/>

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 Silon-TEX® II placement pad to mark position
Silon-TEX® II pocket (as above but covered with Silon-TEX® II fabric)	1147	<input type="checkbox"/> Use Silon-TEX® II 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"/>