

JOBST® ELVAREX® PLUS

Foot Cap order form

TO ORDER PLEASE EMAIL: info@hc21.ie

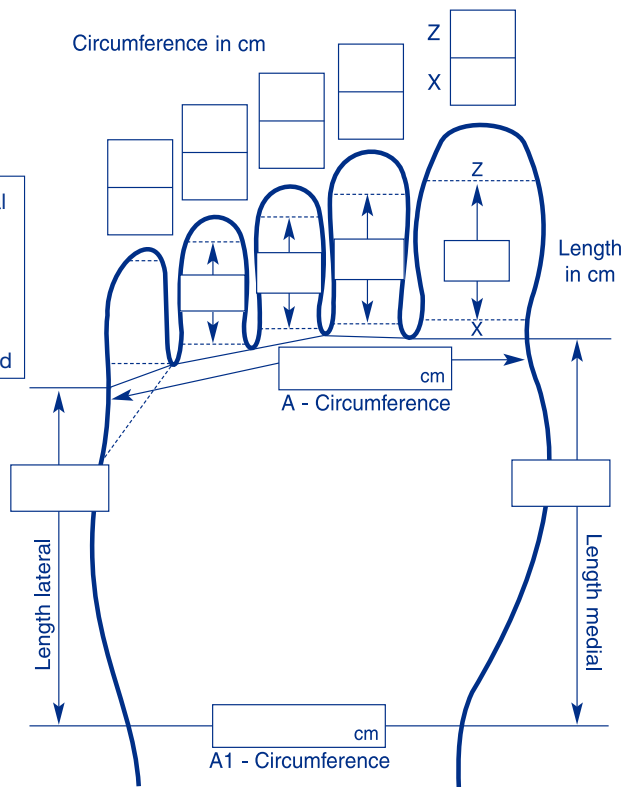
HC21
Healthcare

Date: _____ Purchase Order No.: _____ Patient Name: _____ DoB: _____
 Measured By: _____ Tel: _____ Email: _____
 Delivery Address: _____ Invoice Address: _____



Left Foot

Note: Circumferential measurements are required for all 5 toes however length measurement not required for little toe unless 5th toe required



Note: All foot caps will be manufactured with **4 toes** unless noted in this remarks box that 5 toes are required.

Left Foot:

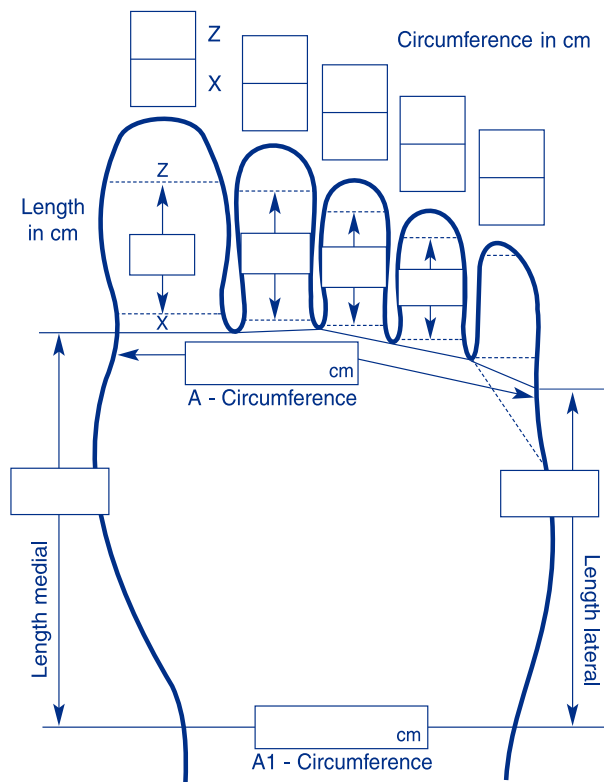
- ☐ 5 Toes
☐ Length of little toe

Right Foot:

- ☐ 5 Toes
☐ Length of little toe

Right Foot

Note: Circumferential measurements are required for all 5 toes however length measurement not required for little toe unless 5th toe required



JOBST Elvarex Plus

Compression Class:	Colour:	Style:	Quantity:	Options:
<input type="checkbox"/> CCL 1 (18-21mmHg)	<input type="checkbox"/> Beige <input type="checkbox"/> Black	<input checked="" type="checkbox"/> AA Footcap	Left <input type="text"/>	<input checked="" type="checkbox"/> 1.5cm slanted little toe opening†
<input type="checkbox"/> CCL 2 (23-32mmHg)	<input type="checkbox"/> Dark blue <input type="checkbox"/> Grey	<input checked="" type="checkbox"/> 4 Toes	Right <input type="text"/>	
<input type="checkbox"/> CCL 3 (34-46mmHg)*	<input type="checkbox"/> Dark brown	Remarks:		
<input type="checkbox"/> Cranberry				

*Note: this will be JOBST Elvarex (seamed)

†This is standard. If different size is required, please note in remarks box.

JOBST Elvarex Soft Seamless

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<input type="checkbox"/> CCL 1 (18-21mmHg)	<input type="checkbox"/> Beige	<input checked="" type="checkbox"/> AA Footcap	Left <input type="text"/>
<input type="checkbox"/> CCL 2 (23-32mmHg)	<input type="checkbox"/> Black	<input checked="" type="checkbox"/> 4 Toes	Right <input type="text"/>
Options: <input checked="" type="checkbox"/> 1.5cm slanted little toe opening			

