

Patient Name / BSN File # _____ DOB _____ Date _____

Address _____ Gender M F

City/State/Zip _____

Diagnosis _____

Doctor/Address _____

City/State/Zip _____

PO#	
Original Order <input type="checkbox"/>	Reorder w Changes <input type="checkbox"/>
Exact Reorder <input type="checkbox"/>	Schema # _____

Fitter Name _____ Fitter # _____ Fitter Phone _____

Fitter Facility _____ Email _____

Ship To Acct # _____ Acct Name _____

Address _____ City _____ State _____ Zip _____

Email _____ Phone _____ Fax _____

Bill To Acct # _____ Acct Name _____

Address _____ City _____ State _____ Zip _____

Email _____ Phone _____ Fax _____

Confirmation Fax # _____
Email _____

By choosing communication via email (above), I acknowledge that Personal Health Information associated with this purchase may be transmitted from BSN in a non-encrypted manner.

Last 4 digits of credit card on file OR Exp. _____
 New card - call to provide credit card # Billing Zip _____
 Name on CC _____

Elvarex[®]**

Cherry
 Navy
 Beige
 Black
 Honey

Elvarex[®] Soft

Beige Cranberry Grey
 Black Cherry Cocoa
 Honey Navy

(CCL 1, 2 only)

Quantity/Class	CCL1 (15-21mmHg*)	CCL2 (23-32mmHg*)	CCL2F† (23-32mmHg*)
Left			
Right			

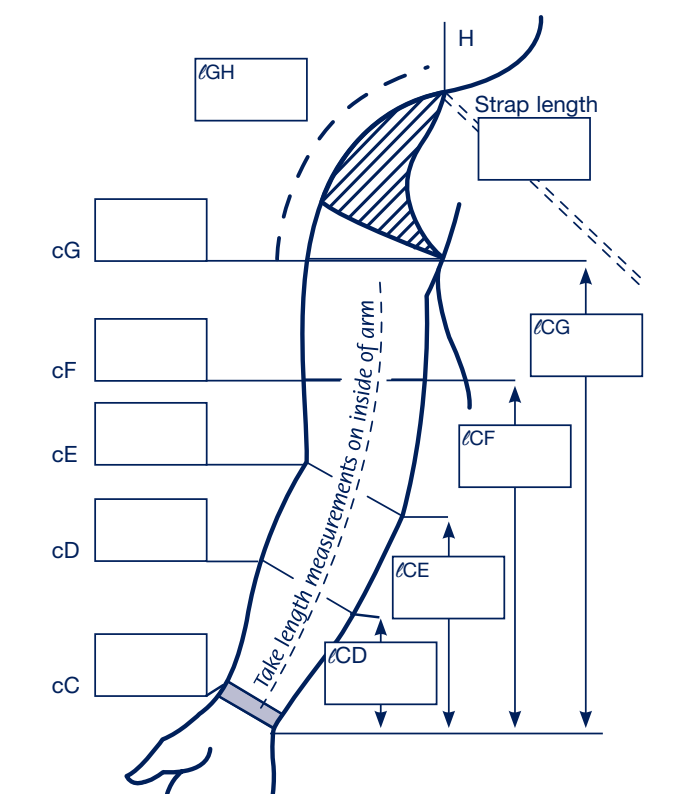
Style

CG Sleeve
 CH Sleeve & shoulder cap†***

AG Sleeve & hand attachment†***
 AH Sleeve, hand attachment & shoulder cap†***

Shoulder Cap Options (CH and AH)

Shoulder Strap
 Bra loop with Velcro _____ cm
(Bra Strap width)



Elbow Options

Elbow Comfort† (CCL 2 only)
 Pocket Inside Elbow (Not available with Elbow Comfort)

Silicone Band	On Top	Inside	Inside ¾
2.5 cm			
SoftFit			
5 cm <small>(Elvarex[®] Soft = On Top only)</small>			
Zipper †	Inside	Outside	On Top
C-E only			
E-G only			

* Design Pressure *** Not available in Elvarex Soft † Only available in Elvarex
****CAUTION:** This product contains natural rubber latex which may cause allergic reactions.

NOTE: Garments ordered in black and beige have an estimated arrival time of 4-5 business days from the date submitted. All other colors have an estimated arrival time of 7-10 business days from the date submitted.

For additional product order forms, please go to
<http://www.jobstcompressioninstitute.com/resources/orders>