

# FLAT KNIT CUSTOM ORDERS

VenoTrain® curaflow

223

Hospital

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Customer name: \_\_\_\_\_ Customer no.: \_\_\_\_\_

Contact: \_\_\_\_\_

Order date: \_\_\_\_\_ Previous order no.: \_\_\_\_\_

Patient name: \_\_\_\_\_

Quotation  Order

Signature/Company stamp: \_\_\_\_\_

**Arm**

**Colors**  Cream  Caramel  Black  
 Anthracite  Navy  Bordeaux

**Compression**  Ccl1  Ccl2  Ccl3

**Versions**  with hand, 1 part  with hand, 2 part

**Quantity** Left arm \_\_\_\_\_ Right arm \_\_\_\_\_

**Glove**  seamless (only AC1)  with seam

**Colors**  Cream  Caramel  Black  
 Anthracite  Navy  Bordeaux

**Compression**  Ccl1  Ccl2  Ccl3

**Versions**  without fingers  open fingers  closed fingers

**Quantity** Left arm \_\_\_\_\_ Right arm \_\_\_\_\_

All sizes in cm. The purchaser is responsible for ensuring that all size information is correct. Custom-made products are non-returnable.

**Edging/fastening:**

Silicone top band, narrow, 2.5 cm   
 Silicone top band, wide, 4.7 cm

**Lining\*:**

Length \_\_\_\_\_ cm  
 Width \_\_\_\_\_ cm

\* Length and position given in special requests

Special requests: \_\_\_\_\_

**Additional features:**

Hand part, porous C1 \_\_\_\_\_ cm  
 Arm, porous C \_\_\_\_\_ cm  
 Silicone top band section 5 x 5 cm G1   
 Slanted edging G1 \_\_\_\_\_ cm  
 without soft inner elbow area   
 Elbow angle 150°   
 Elbow angle 135°   
 Zip fastening\*

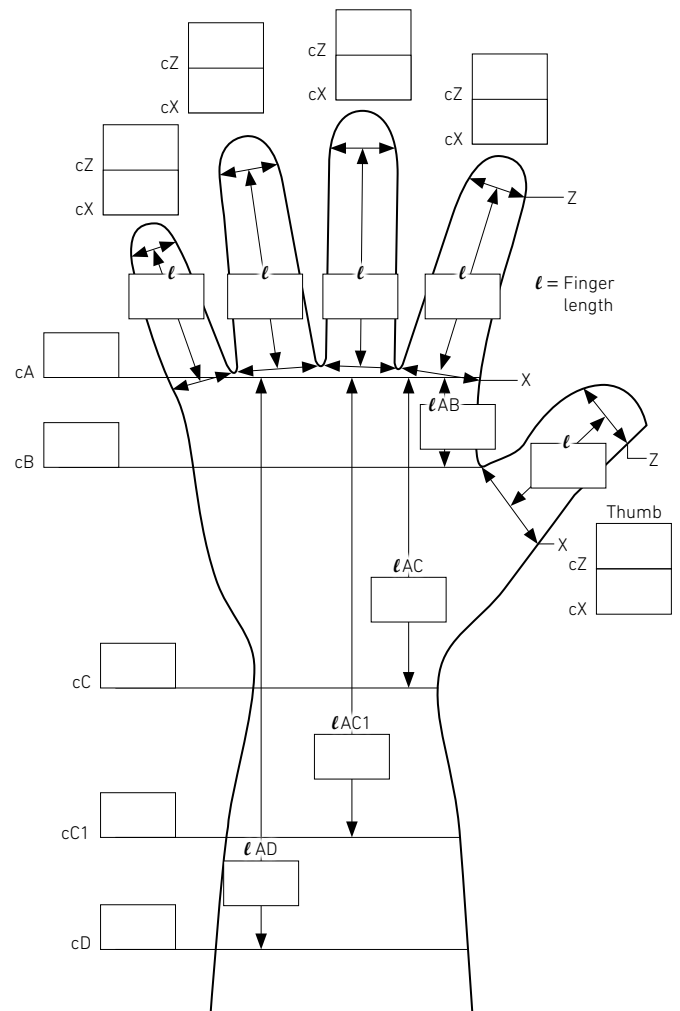
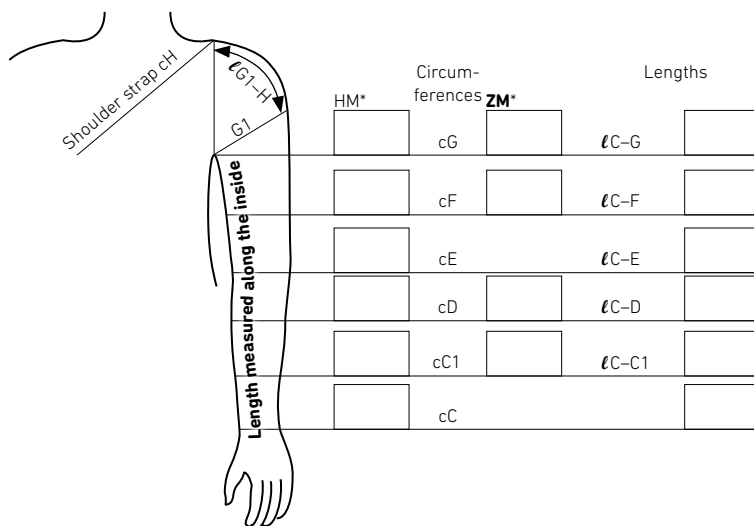
**Lymph pad:**

Length \_\_\_\_\_ cm Width \_\_\_\_\_ cm

Palm of hand   
 Back of hand   
 According to specifications   
 Supplied by customer

**Pocket:**

Palm of hand   
 Back of hand



\* HM = Measurement next to the skin | ZM = Measurement with tape tightened