

VLAKBREI MAATWERK BESTELLING

VenoTrain® curaflow

224

224

Naam klant: _____ Klantrnr.: _____

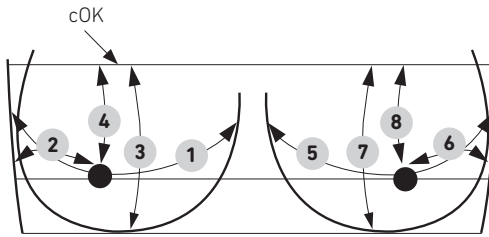
Bauerfeind AG
 T +49 (0)8 00 - 001 05 60
 F +49 (0)800 001 05 65
 E info@bauerfeind.com

Naam van de patiënt: _____

Borst

Rechts

- 1 sBorst
- 2 sTepel
- 3 ℓBorst
- 4 ℓTepel

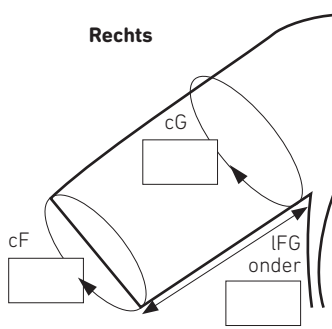


Links

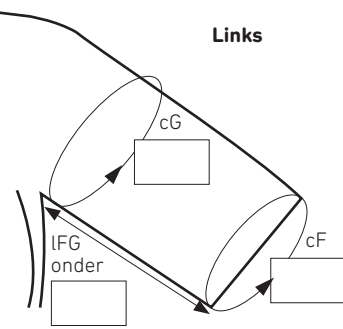
- 5 sBorst
- 6 sTepel
- 7 ℓBorst
- 8 ℓTepel

Armen

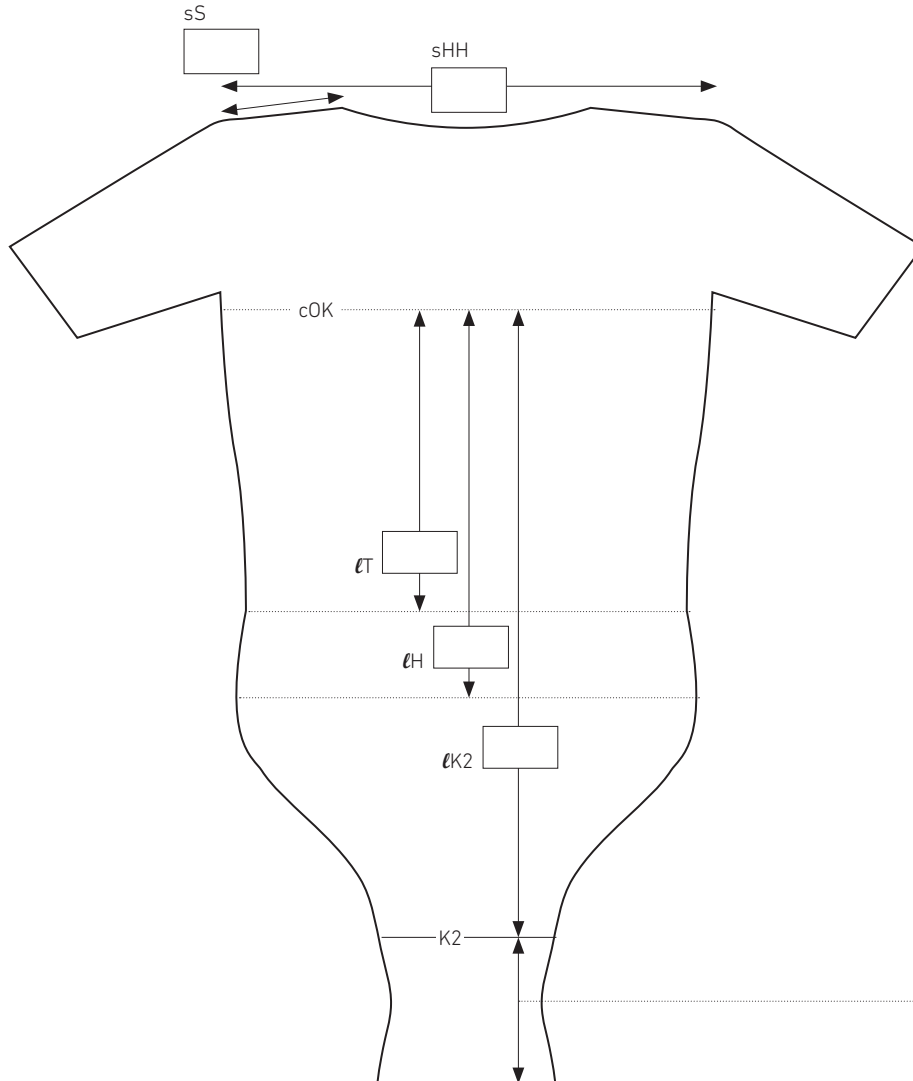
Rechts



Links



Achterzijde



Geerlengte

Handtekening adviseur: _____

Handtekening klant: _____