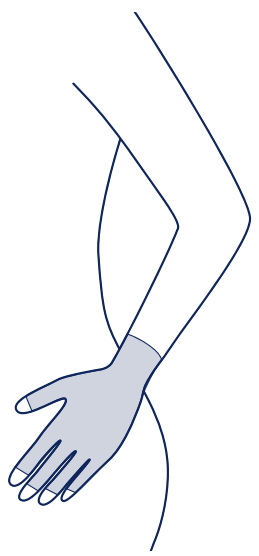
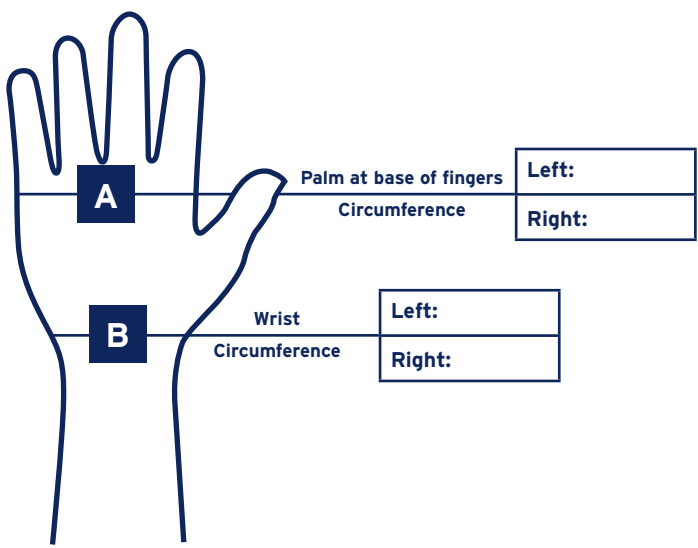


JOBST® Farrow® Glove

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

Ready-to-wear order form and prescription request
 Email order to Customer Services on: **compression.uk@jobst.com**
 Fax order to Customer Services on: **0345 122 3450**



Measuring instructions

1. Measure the **A** circumference of the palm at the base of the fingers
2. Measure the **B** circumference around the wrist
3. Determine the size (**1-8**)

Size	1	2	3	4	5	6	7	8
A	16.6 - 18.0cm	16.6 - 18.0cm	18.0 - 19.5cm	18.0 - 19.5cm	18.0 - 19.5cm	19.5 - 21.5cm	19.5 - 21.5cm	21.5 - 23.1cm
B	15.6 - 16.7cm	16.7 - 18.1cm	15.9 - 17.0cm	17.0 - 18.5cm	18.5 - 20.4cm	17.2 - 18.7cm	18.7 - 20.6cm	18.3 - 20.1cm

JOBST® Farrow® Glove

Size: 1 2 3 4 5 6 7 8

Colour: Tan Black

PIP Code: -

Product Code: -

Quantity Required:

Repeat prescription required every months

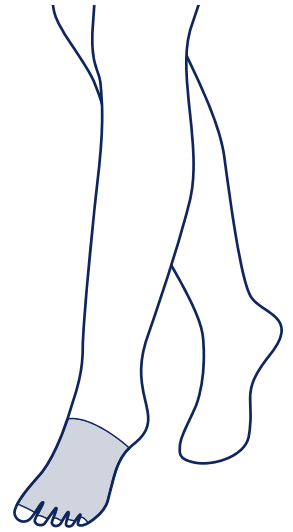
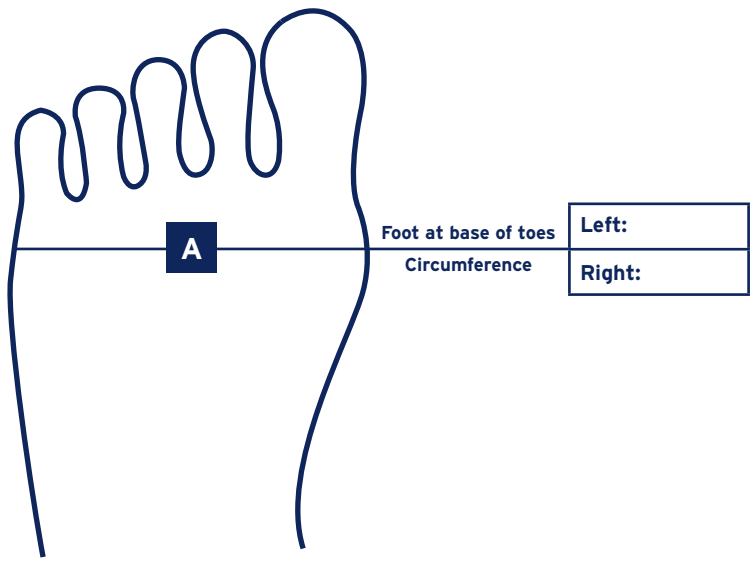
Order Codes

Colour	Compression Level	Size 1		Size 2		Size 3		Size 4		Size 5		Size 6		Size 7		Size 8	
		Product Code	PIP Code	Product Code	PIP Code	Product Code	PIP Code	Product Code	PIP Code	Product Code	PIP Code	Product Code	PIP Code	Product Code	PIP Code	Product Code	PIP Code
Tan	15-20 mmHg	75463-00	411-0847	75463-01	411-0854	75463-02	411-0862	75463-03	411-0870	75463-04	411-0888	75463-05	411-0896	75463-06	411-0904	75463-07	411-0912
	20-30 mmHg	75924-00	411-1035	75924-01	411-1043	75924-02	411-1050	75924-03	411-1068	75924-04	411-1076	75924-05	411-1084	75924-06	411-1092	75924-07	411-1100
Black	15-20 mmHg	75463-10	411-0920	75463-11	411-0938	75463-12	411-0946	75463-13	411-0953	75463-14	411-0979	75463-15	411-0987	75463-16	411-0995	75463-17	411-1027
	20-30 mmHg	75924-10	411-1118	75924-11	411-1126	75924-12	411-1134	75924-13	411-1159	75924-14	411-1167	75924-15	411-1175	75924-16	411-1191	75924-17	411-1217

JOBST® Farrow® Toe Cap

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

Ready-to-wear order form and prescription request
 Email order to Customer Services on: **compression.uk@jobst.com**
 Fax order to Customer Services on: **0345 122 3450**



Measuring instructions

1. Measure the **A** circumference around the base of the toes
2. Determine the size (**XS-L**) using the chart

JOBST® Farrow® Toe Cap

Size: X Small Small Medium Large

Colour: Tan Black

PIP Code: -

Product Code: -

Quantity Required:

Repeat prescription required every months

Size	X Small	Small	Medium	Large
A	20 - 22cm	22 - 24cm	24 - 26cm	26 - 28cm

Order Codes

Colour	Compression Level	X Small		Small		Medium		Large	
		Product Code	PIP Code	Product Code	PIP Code	Product Code	PIP Code	Product Code	PIP Code
Tan	15-20 mmHg	71027-00	411-1274	71027-01	411-1282	71027-02	411-1308	71027-03	411-1316
	20-30 mmHg	72947-00	411-1290	72947-01	411-1266	72947-02	411-1258	72947-03	411-1241
Black	15-20 mmHg	71027-04	411-1324	71027-05	411-1332	71027-06	411-1340	71027-07	411-1357
	20-30 mmHg	72947-04	411-1233	72947-05	411-1225	72947-06	411-1209	72947-07	411-1183

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By completing this order form, you are confirming that you are aware of your obligation to obtain consent from the patient on the processing of their data for the production of their JOBST® compression garment in accordance with the Data Protection Act 2018, the UK's implementation of the (EU) General Data Protection Regulation [GDPR]. For more information and our Privacy Policy, visit www.jobst.co.uk.