

Armsleeve Order Form Elvarex® Elvarex®, Elvarex® Soft



Orders@comfortcaremd.com

Patient Name			DOB	Date	Date	
Address				Gender	М 🗆	F 🗆
Dity/State/Zip						
Diagnosis						
Ooctor/Address						
Dity/State/Zip						
Fitter Name	Fitter # _		Fitter Ph	none		
Fitter Facility	Email					
Ship To Acct #						
Address						
Email						
Fluerey®** Cherry Fluerey® Coff		Ougatity/Class	CCL1	CCL2	CCL2	F†
Elvarex®** ☐ Cherry ☐ Navy ☐ Beige ☐ Cranberry ☐ Beige ☐ Cranberry	y	Quantity/Class Left	(15-21mmHg*)	(23-32mmHg*)	(23-32mm	nHg*)
☐ Black ☐ Cramberry ☐ Black ☐ Cherry ☐ Hansy ☐ New ☐ New ☐ Caramel		Right				
Style		Shoulder Cap Options (CH and AH)				
☐ CG Sleeve ☐ AG Sleeve & hand attachm		☐ Shoulder Strap ☐ Bra loop with Velcro cm (Bra Strap width)				
☐ CH Sleeve & ☐ AH Sleeve, hand attachme shoulder cap ^{†***} & shoulder cap ^{†***}	ent					
		Elbow Options □ Elbow Comfort† (CCL 2 only) □ Pocket Inside Elbow (Not available with Elbow Comfort)				
//GH						
	ıth	Silicone Band	On Top	Inside	Inside	3/4
		2.5 cm				
	\ \.	SoftFit				
	_ ``\\	5 cm (Elvarex® Soft = On Top only)				
CE CD CD CE		Zipper†	Inside	Outside	On To	р
cF		C-E only				
cE CE		E-G only				
		* Design Pressure *** Not available in Elvarex Soft † Only available in Elvarex				
cD		**CAUTION: This product NOTE: Garments ordered	ed in black and bei	ne have an estimate	d arrival tim	ne of
S / CE		4-5 business days from arrival time of 7-10 busi	the date submitted	 All other colors has 	ave an estim	nated
		For additional product of		go to ute.com/resources/	ordors	
		niip.//www.Job	accompressioninstit	ute.com/resources/	oruers	

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