

Upper limb silicone cover. Order form.

Contact	<input type="text"/>	Customer No.	<input type="text"/>	Date	<input type="text"/>
Customer Information			Ship To Information (if different from customer address)		
Company	<input type="text"/>	Company	<input type="text"/>		
Address	<input type="text"/>	Address	<input type="text"/>		
City/State/Zip	<input type="text"/>	City/State/Zip	<input type="text"/>		
Email	<input type="text"/>	Email	<input type="text"/>		
Phone	<input type="text"/>	Phone	<input type="text"/>		
Patient ID	<input type="text"/>	Shipping Options	<input type="checkbox"/> UPS Next Day <input type="checkbox"/> UPS 2-Day <input type="checkbox"/> UPS Ground <input type="checkbox"/> Other <input type="text"/>		
<input type="checkbox"/> Order <input type="checkbox"/> Quote Only					

“Natural” : Full Colour
 “Basic” : One Colour

Configuration

- 88A10 Silicone Cover “Natural” TR
- 88A11 Silicone Cover Elbow to Shoulder Extension
- 88A13 Silicone Cover “Basic” TR

Please provide:

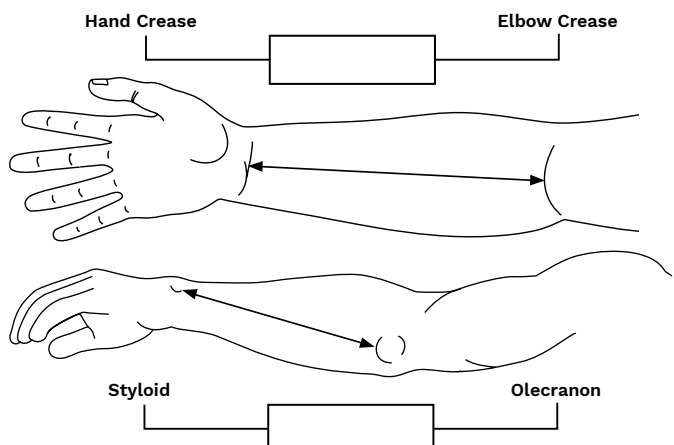
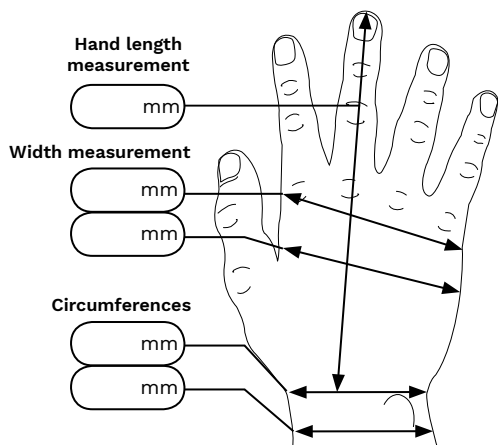
- Photos of contralateral side
- Photos of client wearing prosthesis
- Genuine arm hair
- Assembled prosthesis
- Cast of the contralateral side
- Measurements (below)

Measurement form.

Measurement of contralateral side

Please reproduce the anatomical shape of the arm in the prosthesis and note that the prosthesis circumference should be approximately 5-10% smaller than the contralateral side, with a gradual transition from 5% at the forearm to 10% at the wrist. This reduction accounts for the silicone cover thickness.

To be filled out by the prosthetist



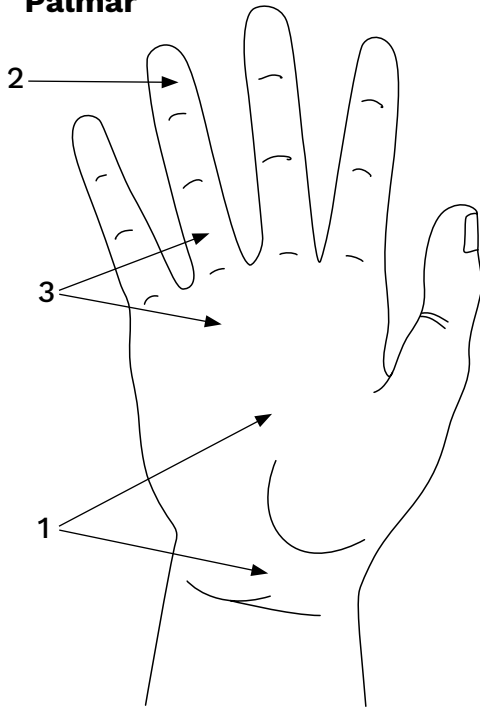
Silicone partial finger/hand prosthesis.

Colour determination spec sheet.

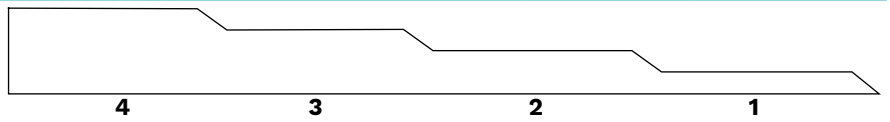
Patient ID Customer No. Date

Comments:

Palmar

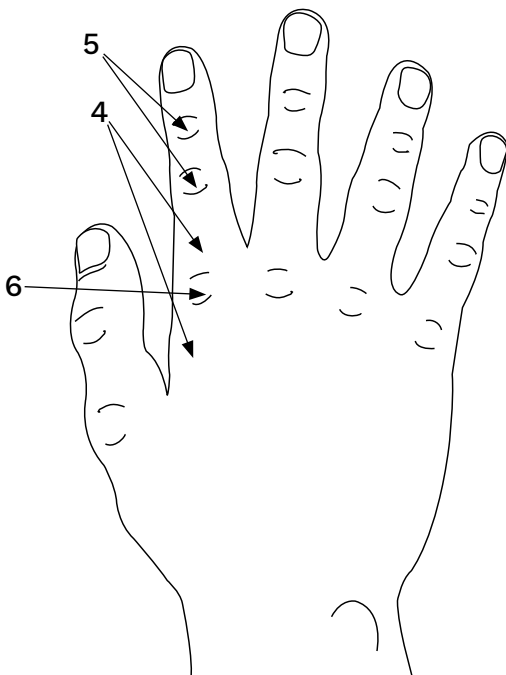


Colour swatch - Colour grade



Area	Swatch #	Grade #	Additional Comments
Palmar			
1	Base	3 4	
2	Fingertip		
3	Palmar		
Dorsal			
4	Tan		
5	MCP		
6	PIP/DIP		
Vein*	Green	Blue	Other: _____ *Draw vein location
Freckles	Yes	No	
Hair**	Yes	No	**Draw hair orientation

Dorsal



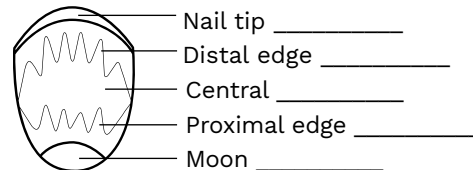
Nails

Shape + length determined by cast
 Acrylic Silicone

Nail Swatch Ring

Nail sample as colour reference only Nail swatch ring*

*If using nail swatch ring, write swatch ID in corresponding area



Tip Length

