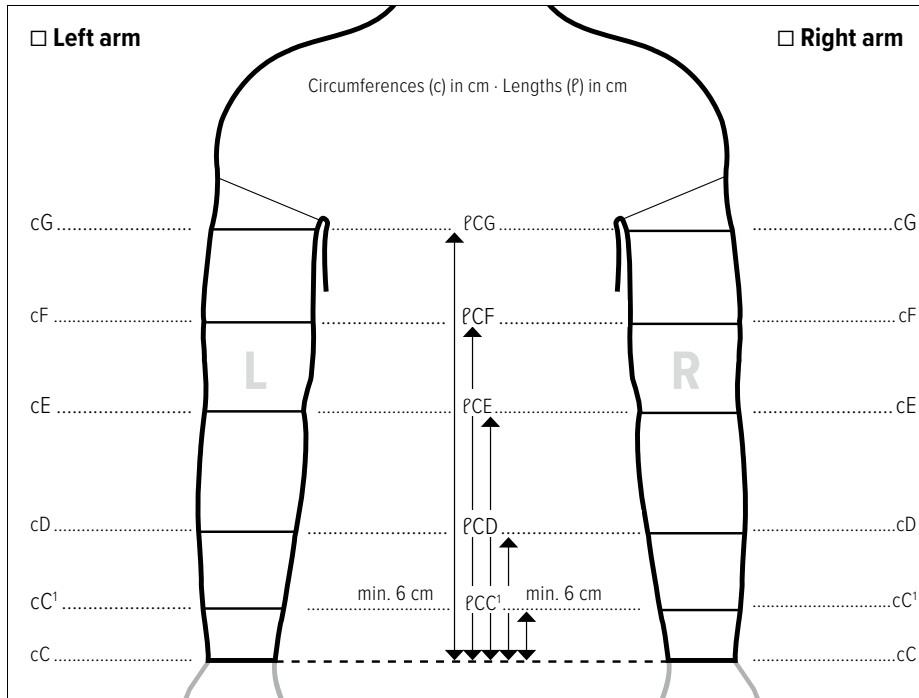


Juzo SoftCompress

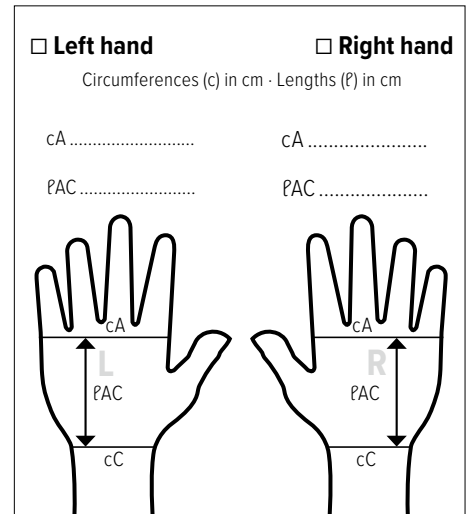
Date: Order Quotation only

Company stamp, phone (in block letters) 	Patient details <input type="checkbox"/> Photo documentation will follow by e-mail¹ Order no.?: <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Diverse <hr/> Order number / process number: Previous order no. / Quotation no. / Date: <hr/> Contact person: Quantity: Piece Customer no.:
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Model Arm
<input type="checkbox"/> Bandage Arm (Art. 6822)

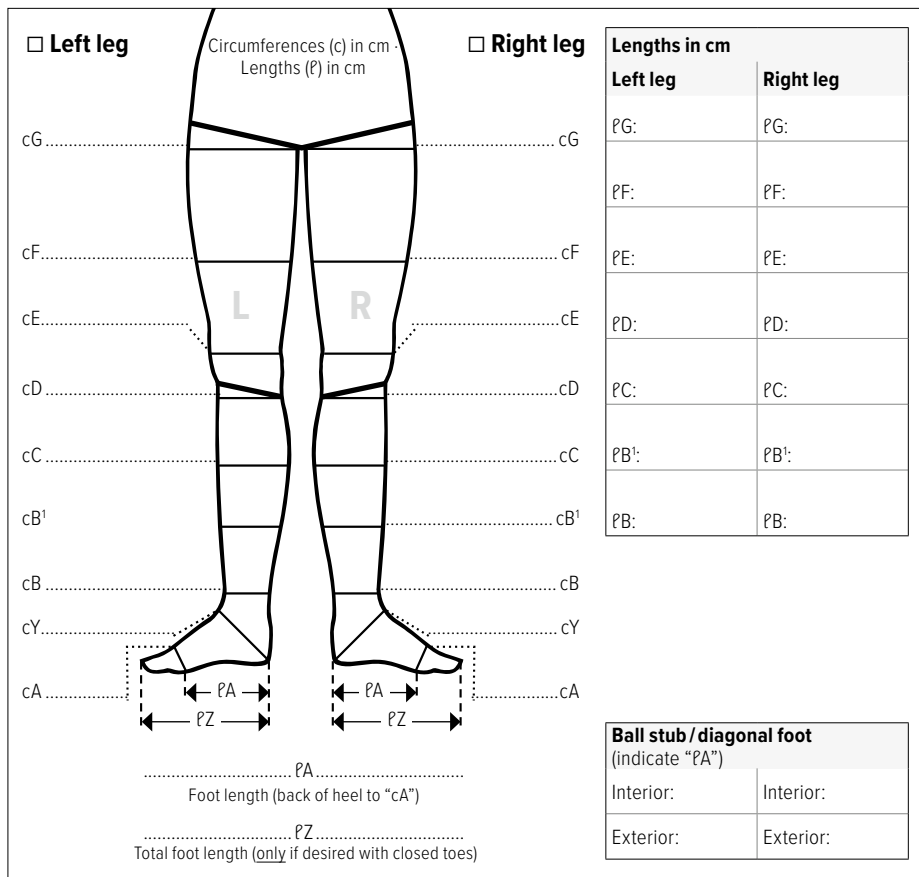
Border (We recommend a diagonal top.)
<input type="checkbox"/> Diagonal top <input type="checkbox"/> Straight top



Model Leg
<input type="checkbox"/> Bandage Lower Leg (Art. 6830)
<input type="checkbox"/> Bandage Lower Leg and Thigh (Art. 6820)

Border (We recommend a diagonal top.)
<input type="checkbox"/> Diagonal top <input type="checkbox"/> Straight top

Toe
<input type="checkbox"/> Open foot sole (standard) <input type="checkbox"/> Closed foot sole <input type="checkbox"/> Closed toes <input type="checkbox"/> Open toes <input type="checkbox"/> Diagonal foot (Indicate internal and external foot length.) <input type="checkbox"/> Straight foot



Special requests (in block letters):

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ENG - 8659 LY - 06/2022 - Subject to change, no liability for errors.

¹ Due to the principle of data minimisation under data protection law, we recommend that you only send in a photo in the case of difficult anatomical features.
² If the patient name is provided, the company placing the order confirms that it has obtained lawful consent in advance to forward and process the data of the affected patient.