

**THUASNE**TEL: 01295 257422
FAX: 01295 257877

Patient Name _____

Order No. _____

Date Measured _____

Telephone _____

Measured by _____

E-mail _____

Clinic / Hospital _____

MOBIDERM
autofit

Thigh Length

Thigh High



SIZING

Circumferences	1	2	3	4
g Thigh Top	46 - 57	53 - 65	61 - 72	68 - 80
c Mid calf	24 - 35	32 - 43	40 - 51	48 - 59
b Ankle	16 - 24	20 - 28	24 - 32	28 - 36

Lengths

A-g Short	67 - 72	67 - 72	67 - 72	67 - 72
A-g Normal	72 - 77	72 - 77	72 - 77	72 - 77
A-g Long	77 - 82	77 - 82	77 - 82	77 - 82
A-g Extra Long	82 - 87	82 - 87	82 - 87	82 - 87

CODES

LENGTH	1	2	3	4
SHORT	400 - 9056	400 - 9064	400 - 9072	400 - 9080
NORMAL	400 - 8934	400 - 8942	400 - 8959	400 - 8967
LONG	400 - 8991	400 - 9007	400 - 9015	400 - 9023
EXT LONG	400 - 8876	400 - 8884	400 - 8892	400 - 8900

Delivery Address _____

Invoice Address _____

Postcode _____

Postcode _____

E-mail _____

E-mail _____

Telephone _____

Telephone _____

**THUASNE**TEL: 01295 257422
FAX: 01295 257877

Patient Name

Order No.

Date Measured

Telephone

Measured by

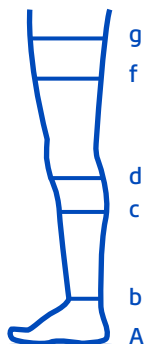
E-mail

Clinic / Hospital

MOBIDERM
autofit

Below Knee

Below Knee



SIZING

Circumferences	1	2	3	4
d2-finger widths below the popliteal crease	25 - 36	32 - 43	39 - 50	46 - 57
c Mid calf	24 - 35	32 - 43	40 - 51	48 - 59
b Ankle	16 - 24	20 - 28	24 - 32	28 - 36

Lengths

A - d Short	38 - 40	38 - 40	38 - 40	38 - 40
A - d Normal	40 - 42	40 - 42	40 - 42	40 - 42
A - d Long	42 - 44	42 - 44	42 - 44	42 - 44
A - d Extra Long	44 - 46	44 - 46	44 - 46	44 - 46

CODES

LENGTH	1	2	3	4
SHORT	400 - 9056	400 - 9064	400 - 9072	400 - 9080
NORMAL	400 - 8934	400 - 8942	400 - 8959	400 - 8967
LONG	400 - 8991	400 - 9007	400 - 9015	400 - 9023
EXT LONG	400 - 8876	400 - 8884	400 - 8892	400 - 8900

Delivery Address

Invoice Address

Postcode

Postcode

E-mail

E-mail

Telephone

Telephone