



MOBIDERM
MADE-TO-MEASURE
**LOWER EXTREMITY
GARMENT**

Please complete and submit to Knit-Rite/Thuasne customer service.

cs@knitrite.com | 800.821.3094

Patient Name: _____

Gender: M F _____

Patient's height: _____

ORDER (by default) QUOTATION REORDER

Customer Name: _____

Customer Account: _____

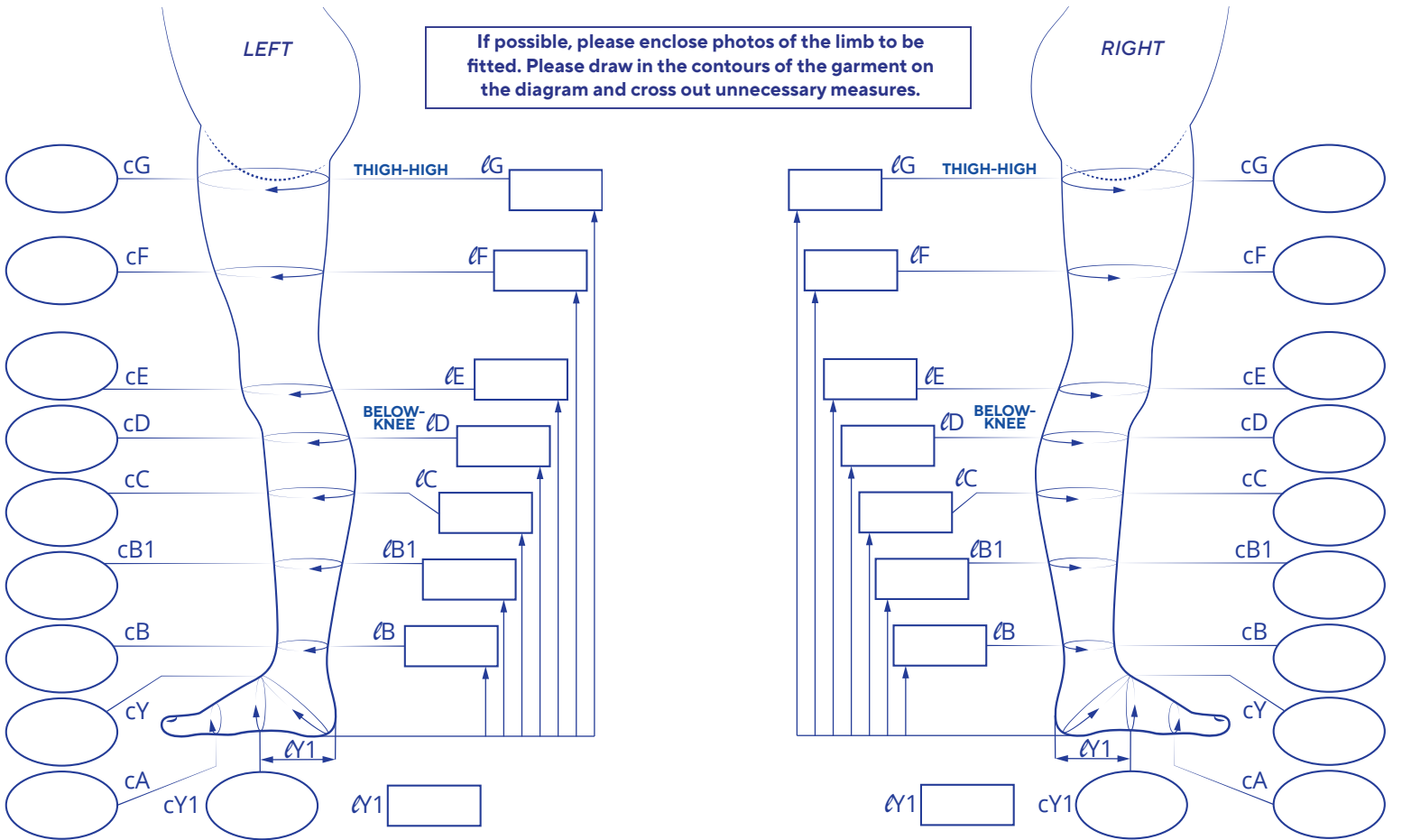
Purchase Order #: _____ Ships To: Therapist Patient

Shipping Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____

Phone: _____



Desired foot length:

| | |
|-------------|--|
| Inner (lA) | |
| Outer (lA1) | |

Desired foot length:

| | |
|-------------|--|
| Inner (lA) | |
| Outer (lA1) | |

- Models**
- | | | |
|-------------------------------------|-------------------------------|--------------------------------|
| <input type="checkbox"/> Below-knee | LEFT <input type="checkbox"/> | RIGHT <input type="checkbox"/> |
| <input type="checkbox"/> Thigh-high | LEFT <input type="checkbox"/> | RIGHT <input type="checkbox"/> |

- Foam options**
- All small blocks
 - All big blocks
 - Big blocks on the leg and small blocks on the feet (by default)

- Proximal options**
- Anti-slip with silicone dots 3 cm
 - Velcro opening (Maximum 1/3 of the height)

- Distal options**
- Open toe
 - Closed toe

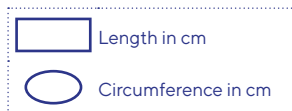
Special Instructions

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INTERNAL USE ONLY
Customer Code: 67855



800-821-3094 | cs@knitrite.com
wholesale.therafirm.com