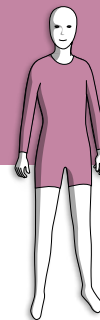


39311, 39312 Suit Suit with Sleeves and Legs Measurement Form

elements
body



Patient ID: _____

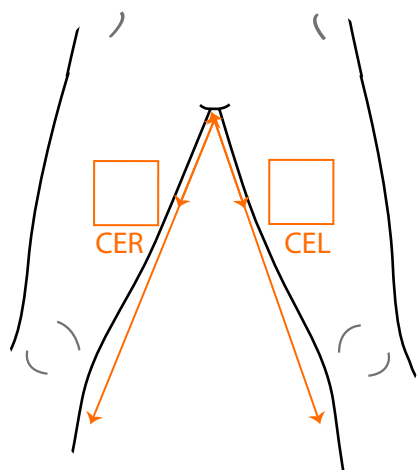
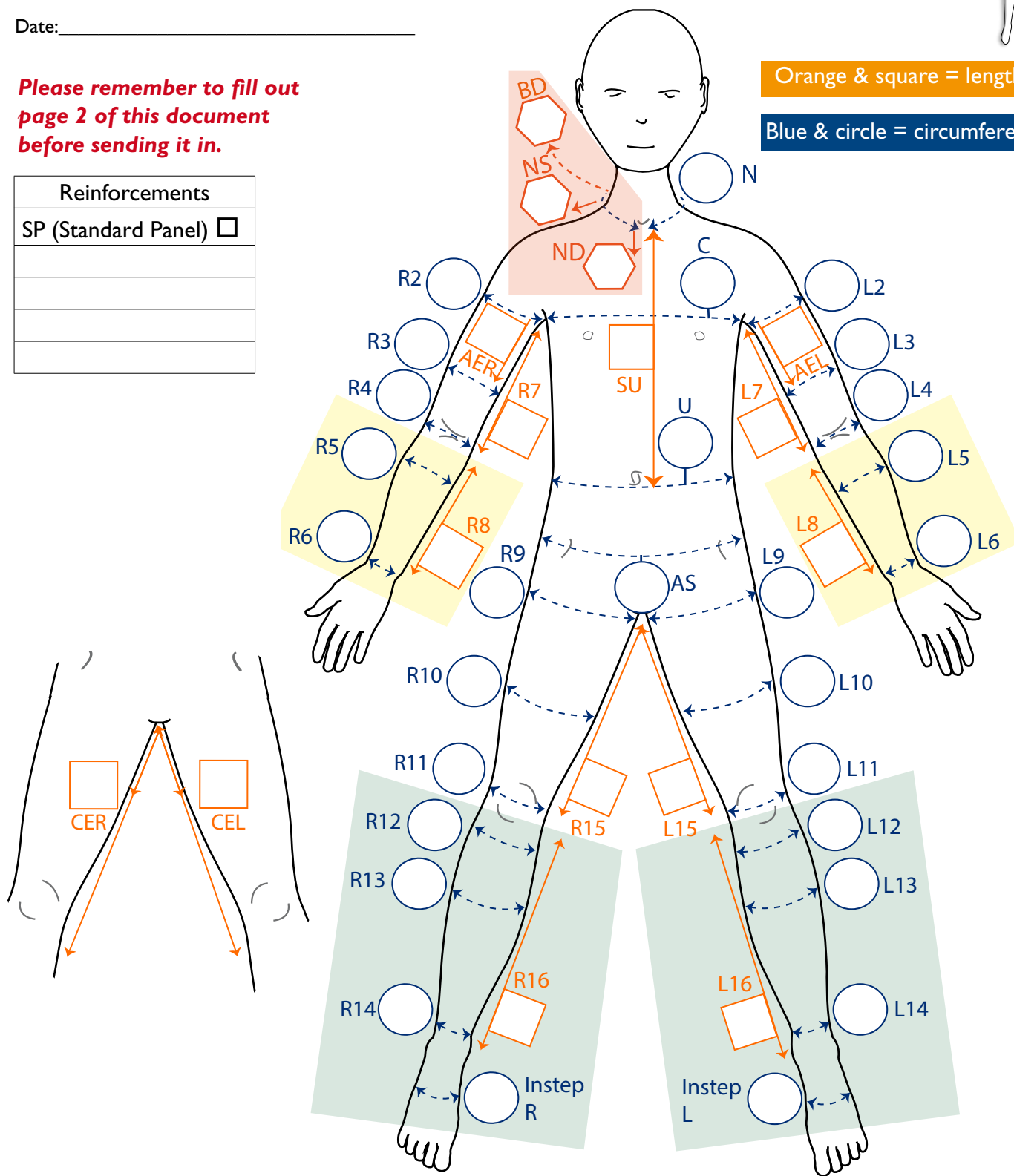
Date: _____

**Please remember to fill out
page 2 of this document
before sending it in.**

Reinforcements
SP (Standard Panel) <input type="checkbox"/>

Orange & square = length

Blue & circle = circumference



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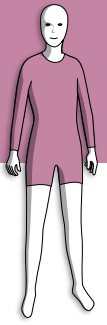
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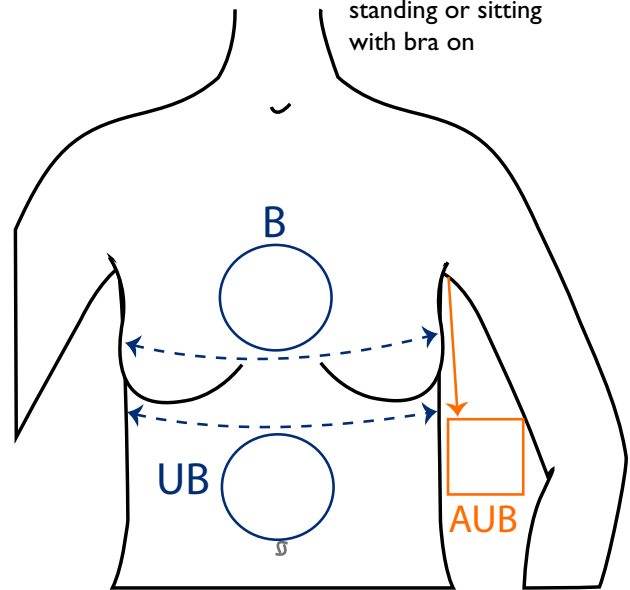
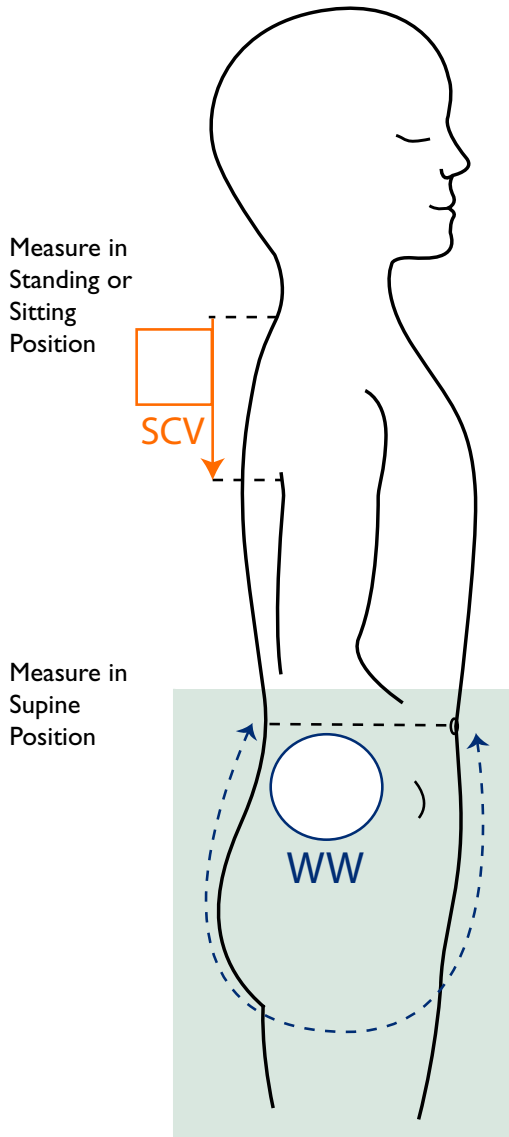


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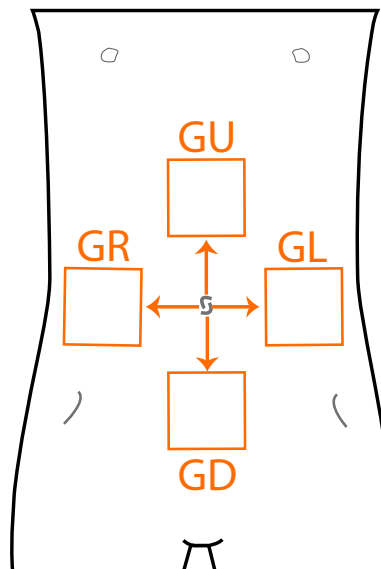
Date: _____

Bust Measurements - For Women Only

Measurements must be taken standing or sitting with bra on



If Patient needs a Gastro Hole



Measure in Supine Position