



SECOND SKIN PTY LTD

15/386 SCARBOROUGH BEACH RD, OSBORNE PARK 6017 (WA)

P: +61 8 9201 9455 E: orders@secondskin.com.au

or upload via www.secondskin.com.au/contact/enquiry (choose "an order")

Existing Patient ☐

New Patient ☐

PATIENT DETAILS FORM

Date:	New Order (✓)	Reorder (✓)
PATIENT: (Surname) (Given Names)		
Date of Birth:	M <input type="checkbox"/>	F <input type="checkbox"/>
Patient Address:		
		Post Code:
Patient Phone No: (Home)		(Work)
HOSPITAL: Order Number:		
Hospital Address:		
		Post Code:
Therapist Name:		Department:
Therapist Phone No:		Pager No:
Therapist Email		
Photo Sent (✓)	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Email	<input type="checkbox"/>	POST/COURIER <input type="checkbox"/>

GARMENT/GARMENTS REQUIRED:	
SEND ACCOUNT TO: (Include Claim/Reference Number)	
SEND GARMENT TO: Therapist - address as above (✓)	Patient - address as above (✓)
DATE REQUIRED BY:	

Second Skin will always endeavour to supply this order by the date you require.

Please keep in mind that delivery is subject to freight times and the receipt of written funding approval / hospital order numbers.



ARM SLEEVE & TAILORED ARM SLEEVE PRESCRIPTION FORM

CLIENT

SURNAME: _____

GIVEN NAME: _____

☐ M

☐ F

DATE: ____/____/____

Colour: Light ☐ Dark ☐ Black ☐

Powersoft available Dark and Black only

Diagnosis: Burns ☐ Lymphoedema ☐

Trauma ☐ Vascular Insufficiency ☐

My Second Skin range-feature colour ☐

Purple/Green/Pink/Blue/Yellow/White/Red/Orange _____ Left (Print colour choice clearly)

Purple/Green/Pink/Blue/Yellow/White/Red/Orange _____ Right (Print colour choice clearly)

Choose one colour per garment only *Please choose carefully as garments cannot be exchanged/returned for change of mind or incorrect choice

1. Style		L	R	4. Elbow Gusset		L	R	
Arm Sleeve (wrist to axilla)				Flexion Gusset				
Tailored Arm Sleeve	Style 1			(a) All Shimmer				
	Style 2			(b) Shimmer ant & Powernet post				
	Style 3			(c) Shimmer ant & post Powersoft				
	Style 4	Version 1 Under Axilla			(d) Single Hydrophobic			
		Version 2 Under Breast			(e) Double Hydrophobic			
With	Attached Gauntlet			Hydrophobic Lining				
	Detached Gauntlet			(a) Anterior elbow				
	Attached MCP Gauntlet			(b) Circumferential elbow				
	Detached MCP Gauntlet			5. Zips		L	R	
	Attached Glove			None				
	Detached Glove			Forearm - extends from MCP or wrist to below elbow				
2. Fabric		L	R	Upper arm - extends from elbow to point of shoulder				
Powernet				Full length - extends from MCP or wrist to point of shoulder				
Powersoft								
Shimmer								
Single Hydrophobic								
Double Hydrophobic								
3. Zip Location				6. Dressing Assist		L	R	
Ulnar				Zip tabs				
Radial				Zip loopers				
Mid Dorsal				Leather assist				
Dual								

Note any further design options you require. Call our design department in Perth (08 9201 9455) for any queries

ARMSLEEVE & TAILORED ARMSLEEVE FORM

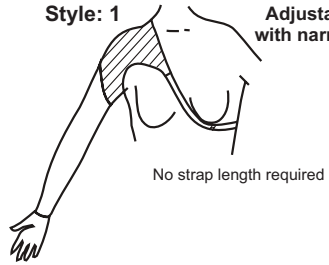
Client:

Page No

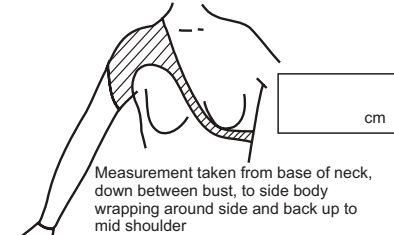
Strap length required

NB: See diagram for placement of strap

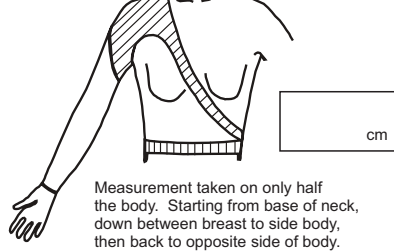
Style: 1 Adjustable strap with narrow elastic



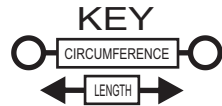
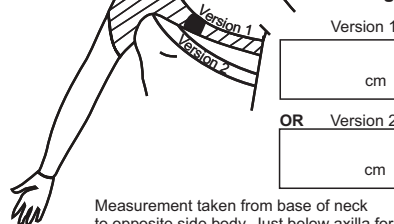
Style: 2 Velcro Fastening



Style: 3 Velcro Fastening



Style: 4 Adjustable strap with wide elastic and D Ring



RIGHT

LEFT

