

### PATIENT

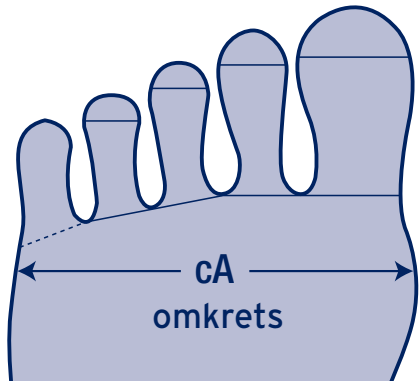
Namn: \_\_\_\_\_  
 Adress: \_\_\_\_\_  
 Postadress: \_\_\_\_\_  
 Tel: \_\_\_\_\_  
 Datum: \_\_\_\_\_

### MÅTTAGARE

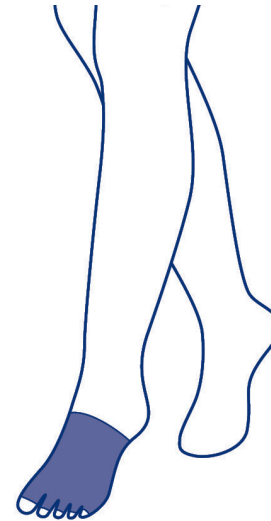
Namn: \_\_\_\_\_  
 Avd: \_\_\_\_\_ Sjukhus: \_\_\_\_\_  
 Adress: \_\_\_\_\_  
 Postadress: \_\_\_\_\_  
 Tel: \_\_\_\_\_ E-post: \_\_\_\_\_

### FAKTURERAS

Rekv nr: \_\_\_\_\_  
 Namn: \_\_\_\_\_  
 Adress: \_\_\_\_\_  
 Postadress: \_\_\_\_\_  
**Produkten skickas till:**  Patient  Måttagare



Storlek	cA
X-Small	20 - 22 cm
Small	22 - 24 cm
Medium	24 - 26 cm
Large	26 - 28 cm



Färg: Beige/Svart  
 Kompression: KKL1 (15-20 mmHg) och KKL2 (20-30 mmHg)  
 Innehåll: 59% Nylon, 41% Spandex