

Made-to-Order JoViPak® Vest Form

Suprasternal Notch to Waist

Length

Axilla to Waist

Measurements Recorded in:
 Inches
 Centimeters

Right Left

Full Torso Circumference

Axilla

Largest Chest

Xyphoid Process

Waist

Waist

Widest Hip

Circumference

PATIENT INFORMATION

Mastectomy
 Lumpectomy
 Bi-lateral
 Unilateral
 Right Left

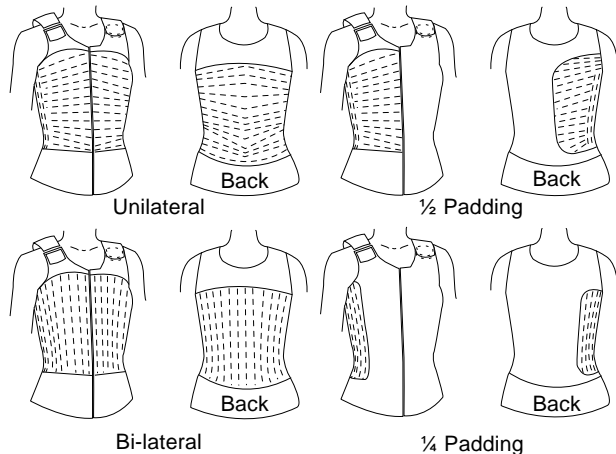
Birth Date
 Height
 Weight
 Bra Size
 Blouse Size

SIZE

	Largest Chest Circumference	Waist	Widest Hip
<input type="checkbox"/> XSmall	(28-32")	(22-26")	(30-34")
<input type="checkbox"/> Small	(32-36)	(26-30)	(34-38)
<input type="checkbox"/> Medium	(36-40)	(30-34)	(38-42)
<input type="checkbox"/> Large	(40-44)	(34-38)	(42-46)
<input type="checkbox"/> XLarge	(44-48)	(38-42)	(46-50)

Note: Largest Chest, Waist and Widest Hip measurements must fall within size ranges for Made-to-Order. You may use this same form for Custom (Made-to-Measure), but ask for price quote. Garments are not returnable. Alterations are billed at \$60 per hour.

Fax this form
Toll Free to:
1-877-760-4943
with standard
JoViPak
Order Form
with Shipping and
Billing Instructions



VEST INFO

Full Padding
 Unilateral
 Bi-lateral
 1/2 Padding
 Right Left
 1/4 Padding
 Right Left

OPTIONS

Slimline (more channels, less foam)
 Low ILD Foam (for fragile skin)
 End Garment at Waist (Custom only)

Choose Vest Color: (Cotton/Lycra® only)
 Ivory Royal Blue

Add Nylon/Spandex JoVi Jacket
 (For added compression or as a substitute for bandages)

Choose JoVi Jacket Color:
 Black White

LENGTH

Suprasternal Notch to Waist

Short (13-14")
 Regular (14-15)
 Long (15-16)
 XLong (16-17)

Patient Name or Reference# _____ Date _____

