

Available on FP10/GP10 - PLEASE COMPLETE ALL SECTIONS
TO BE COMPLETED BY THE HEALTHCARE PROFESSIONAL AND GIVEN TO YOUR PRESCRIBER

1 Order No.
Patient Name
Altiform Registration No. (Repeat Orders)

DELIVER TO PHARMACY/HOSPITAL:
Name
Address
..... Postcode

Telephone No.

MEASUREMENTS COMPLETED BY:
Health Centre

Contact No.

2 INVOICE TO:

Hospital/Clinic
 Buying Group
 Wholesaler
 Pharmacy Chain

Name of buying group

Account No.

3 COMPRESSION CLASS:
 1 (14-17 mmHg) 2 (18-24 mmHg) 3 (25-35 mmHg)

STYLE:
 Below Knee Thigh Length Hold Ups:
 Thigh Length Standard Plain Lace

FOOT:
 Closed Toe Open Toe

If you have chosen thigh length stockings, choose what styles you would like, at no extra cost.

4 COLOUR: Beige Black

QUANTITY (SINGLES): Left Leg Right Leg

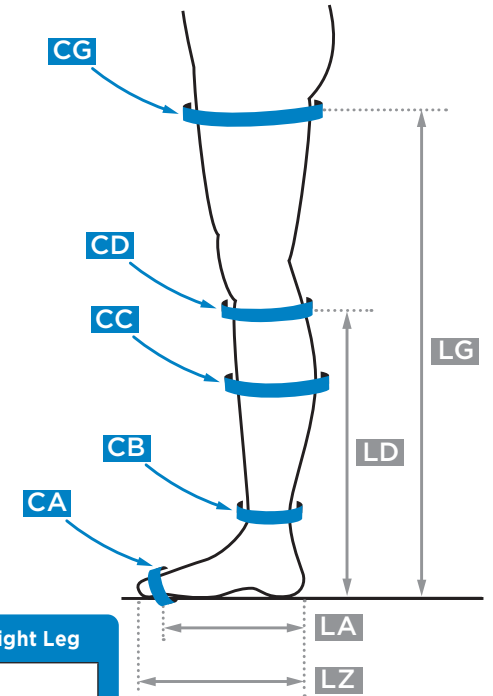
5 MEASUREMENTS:

MEASUREMENT TIPS:

- Measurements should be taken with the person seated, feet flat on the floor.
- For foot measurement: stand on a plain sheet of paper, mark at the toe and at the heel; remove the foot and measure between the points; this will provide a more accurate reading.
- When possible, measurements should be taken first thing in the morning. ⁽¹⁾
- For thigh length, take the measurement while the person is standing.

1. NICE Clinical Knowledge Summaries

Please fill in all the appropriate measurements in centimetres



CIRCUMFERENCE MEASUREMENTS	Left Leg	Right Leg
CG (thigh - thigh length only)		
CD (under knee)		
CC (calf)		
CB (ankle)		
CA (measure at base of little toe)		

LENGTH MEASUREMENTS	Left Leg	Right Leg
LG (for thigh length only)		
LD		
LA (for open toe only)		
LZ (for closed toe only)		

COMMENTS:

72 hours despatch

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