

Order by email at varisan.sumisura@cizetamedicali.com

Stamp/Signature

Patient _____

Date _____

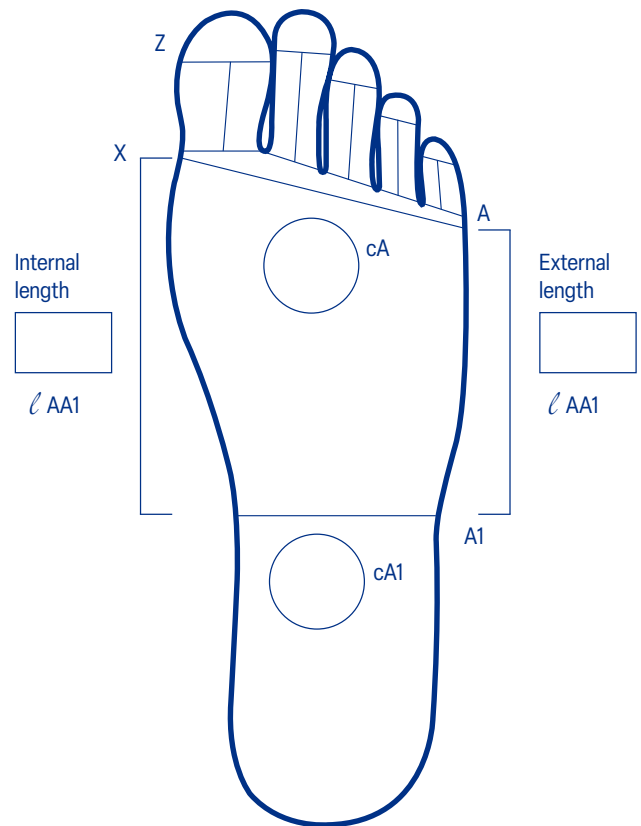
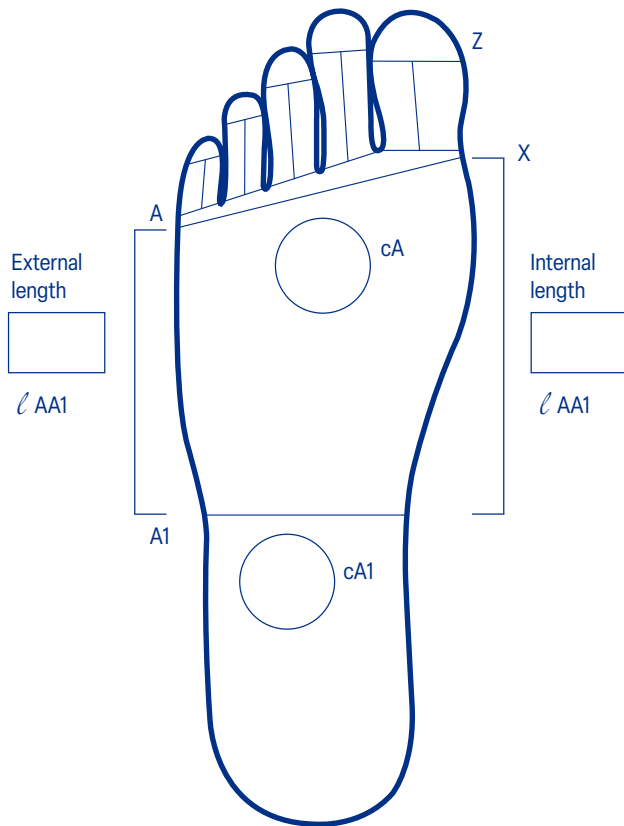
The custom-made device in question complies with the General Safety and Performance Requirements set out in Annex I and with the provisions of Annex XIII of Regulation (EU) 2017/745. The custom-made device in question is intended for the exclusive use of the patient identified in this model.


LEFT TOES CIRCUMFERENCES AND LENGTHS

RIGHT TOES CIRCUMFERENCES AND LENGTHS

	V°	IV°	III°	II°	I°
ℓ XZ	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
cZ	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
cX	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

	I°	II°	III°	IV°	V°
ℓ XZ	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
cZ	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
cX	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>



COMPRESSION Ccl. 1 <input type="checkbox"/> 2 <input type="checkbox"/> 2 <input type="checkbox"/> <small>STRONG</small>	QUANTITY <input type="checkbox"/> Left _____ <input type="checkbox"/> Right _____	TOE CAP TIPOLOGY <input type="checkbox"/> 4 left toes <input type="checkbox"/> 4 right toes <input type="checkbox"/> 5 left toes <input type="checkbox"/> 5 right toes <input type="checkbox"/> Soft microfibre ribbon	PAD INSERT  <input type="checkbox"/> Pad insert Thickness 1cm <input type="checkbox"/> Pad insert Thickness 0,5cm Please indicate pad positioning and dimension												
TOE CAP OPTIONS <input type="checkbox"/> 5° drop shaped 5th toe	FOR 4 TOE CAP PLEASE INDICATE CX V° TOE														
SPECIFIC REQUESTS		COLOURS <table border="0"> <tr> <td><input type="checkbox"/> 106 ivory</td> <td><input type="checkbox"/> 440 carmine</td> <td><input type="checkbox"/> 608 forest green</td> </tr> <tr> <td><input type="checkbox"/> 604 havana*</td> <td><input type="checkbox"/> 450 fuchsia</td> <td><input type="checkbox"/> 820 grey</td> </tr> <tr> <td><input type="checkbox"/> 112 sand</td> <td><input type="checkbox"/> 535 blulette</td> <td><input type="checkbox"/> 862 black</td> </tr> <tr> <td><input type="checkbox"/> 420 coral</td> <td><input type="checkbox"/> 545 navy blue</td> <td></td> </tr> </table>		<input type="checkbox"/> 106 ivory	<input type="checkbox"/> 440 carmine	<input type="checkbox"/> 608 forest green	<input type="checkbox"/> 604 havana*	<input type="checkbox"/> 450 fuchsia	<input type="checkbox"/> 820 grey	<input type="checkbox"/> 112 sand	<input type="checkbox"/> 535 blulette	<input type="checkbox"/> 862 black	<input type="checkbox"/> 420 coral	<input type="checkbox"/> 545 navy blue	
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<input type="checkbox"/> 420 coral	<input type="checkbox"/> 545 navy blue														

*Standard colour for VARISAN® FLAT - other colours available on request