



PATIENT DETAILS FORM

email: orders@secondskin.com.au

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PATIENT DETAILS

Date		Order:	New Order ☐	Reorder ☐
Patient: (Surname)		Given Name:		
Preferred Name:		Pronoun:		
Date of Birth:		Gender:		
Street Address:				
Suburb:		City:		Post Code:
State:		Country:		
Patient Phone No:		Other:		
Patient Email:				

HOSPITAL DETAILS

Street Address:			
Suburb:		City:	Post Code:
Therapist Name:		Department:	
Therapist Phone No:		Pager No:	
Therapist Email:			
Photos Sent via:	Online portal (preferred) ☐ Email ☐ Unable to provide ☐		

FUNDING BODY

If funding is through **NDIS** please complete our service agreement.

Company:		Company Email:	
Case Manager:		Case Mgr Email:	
Claim No:		Phone No:	

GARMENTS REQ'D:

Email quote to:		Cc Email:	
Email invoice to:		PO No:	
Shipping details:	Therapist address as above ☐ Patient address as above ☐		
Or Other:			
Date required by:	or standard turn around, 5-7 working days* ☐		

*Second Skin will always endeavor 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 or order queries.

Prescription Form

ARM SLEEVE & TAILORED ARM SLEEVE

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CLIENT SURNAME:

CLIENT FIRST NAME:

DATE:

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Diagnosis:

- ☐ Burns ☐ Lymphoedema
☐ Trauma ☐ Venous Insufficiency
☐ Neuropathic Pain
☐ Other

Colour: (Powersoft available Dark & Black only)

- ☐ Light ☐ Dark ☐ Black

Stitching:

- ☐ Purple ☐ Green
☐ Pink ☐ Blue
☐ Yellow ☐ White
☐ Red ☐ Orange
☐ Black
☐ Match base fabric

PERSONALISATION - FABRIC TRIM

Your choice matters. Please choose your trim via the QR Code

- ☐ Trim selected via QR Code

Fabric Trim Selection

Your choice matters. If not using link record code here.

Please choose carefully as garments cannot be exchanged/returned for change of mind or incorrect choice



STYLE	L	R	ELBOW - FLEXION GUSSET cont	L	R	DRESSING ASSIST	L	R
Arm sleeve (wrist to axilla)	☐	☐	Single Hydrophobic	☐	☐	Zip tab - (state quantity 1-4)		
Tailored arm sleeve (with shoulder cap)	☐	☐	Double Hydrophobic	☐	☐	Location:		
Style 1 - thin adjustable elastic strap	☐	☐	HYDROPHOBIC LINING ELBOW	L	R	Zip loopers	☐	☐
Style 2 - fabric strap w velcro closure	☐	☐	Anterior elbow	☐	☐	Leather assist		
Style 3 - fabric strap crossing at side, wrapping around & anchoring at waist	☐	☐	Posterior elbow	☐	☐	REINFORCING	L	R
Style 4 - Under axilla or	☐	☐	Circumferential elbow	☐	☐	Shimmer	☐	☐
Style 4 - Under breast	☐	☐	HYDROPHOBIC LINING SECTIONS	L	R	Powernet	☐	☐
WITH (include glove px)	L	R	Does not apply if fully lined			Powersoft	☐	☐
Attached gauntlet	☐	☐	Forearm	☐	☐	REINFORCING LOCATION	L	R
Detached gauntlet	☐	☐	Dorsum	☐	☐	Forearm	☐	☐
Attached MCP gauntlet	☐	☐	Palmar	☐	☐	Dorsum	☐	☐
Detached MCP gauntlet	☐	☐	Radial	☐	☐	Palmar	☐	☐
Attached glove	☐	☐	Lateral	☐	☐	Radial	☐	☐
Detached glove	☐	☐	Upper Arm	☐	☐	Lateral	☐	☐
FABRIC	L	R	Anterior	☐	☐	Upper Arm	☐	☐
Powernet	☐	☐	Posterior	☐	☐	Anterior	☐	☐
Powersoft	☐	☐	Medial	☐	☐	Posterior	☐	☐
Shimmer	☐	☐	Lateral	☐	☐	Medial	☐	☐
Single Hydrophobic	☐	☐	HYDROPHOBIC LINING GLOVE			Lateral	☐	☐
Double Hydrophobic	☐	☐	Attached Glove - refer to Glove px	☐	☐	Attached glove - refer to Glove px	☐	☐
HYDRO LINING	L	R	Detached Glove - refer to Glove px	☐	☐	Detached glove - refer to Glove px	☐	☐
Hydro lining to whole garment	☐	☐	ZIPS	L	R	ELASTIC OPTIONS (applies to arm sleeve only)	L	R
FLAP / STUMP	L	R	None in arms	☐	☐	Wide elastic	☐	☐
Upper limb flap	☐	☐	Forearm (extends from MCP or wrist to below elbow)	☐	☐	Silicone elastic	☐	☐
Upper limb stump	☐	☐	Radial	☐	☐			
ELBOW - FLEXION GUSSET	L	R	Ulnar	☐	☐			
All Shimmer	☐	☐	Upper arm (extends from elbow to point of shoulder)	☐	☐			
Shimmer anterior & Powernet posterior	☐	☐	Full length (extends from MCP or wrist to point of shoulder)	☐	☐			
Shimmer anterior & Powersoft posterior	☐	☐						



Prescription Form

ARM SLEEVE &
TAILORED ARM SLEEVE

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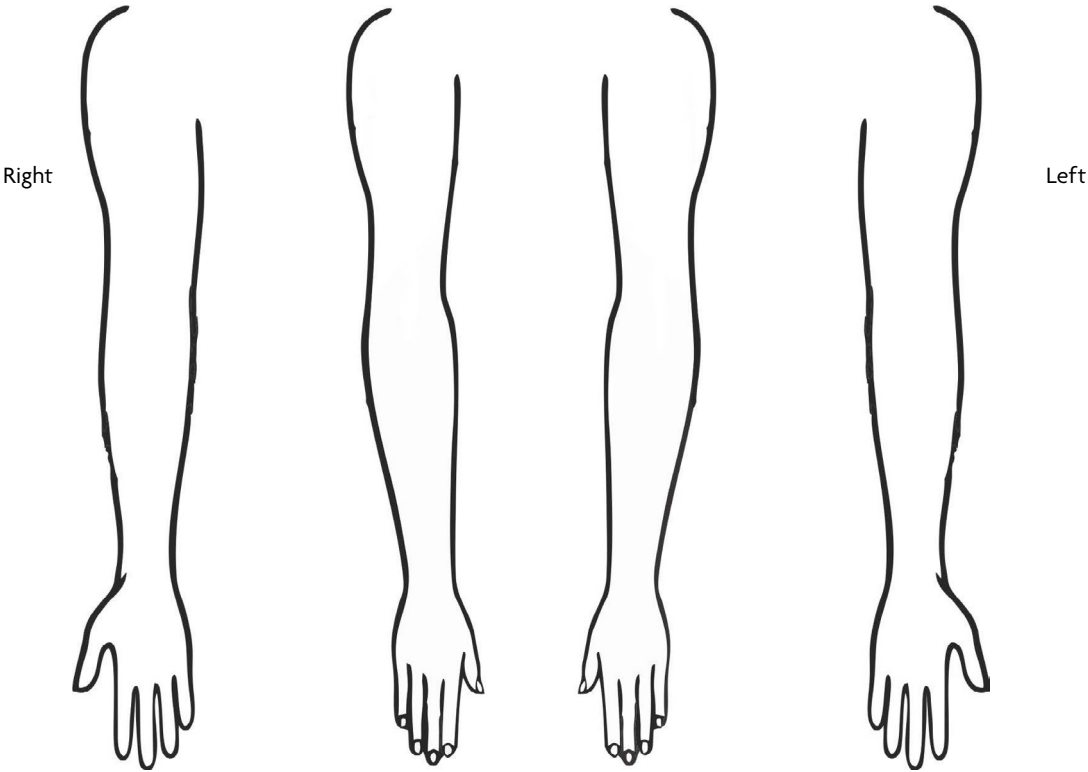
CLIENT SURNAME:

CLIENT FIRST NAME:

DATE:

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SILICONE LINED FABRIC USED TO MANAGE APPEARANCE OF SCARS	L	R
Photos provided or	☐	☐
Draw location on assessment drawings	☐	☐
Small: 3 x 8 cm	☐	☐
Medium: 6 x 12cm	☐	☐
Large: 12 x 18cm	☐	☐
A5 size: 15 x 21cm	☐	☐
A4 size: 21 x30cm	☐	☐
Pocket and deficit pad - silicone on pocket only (photos required)	☐	☐
Attached glove - refer to Glove px	☐	☐
Detached glove - refer to Glove px	☐	☐



Notes/Designs & Silicone Options:

Please note any further design options you require. Please call our design department in Perth (+61 8 9201 9455) for any queries.

Measuring Form

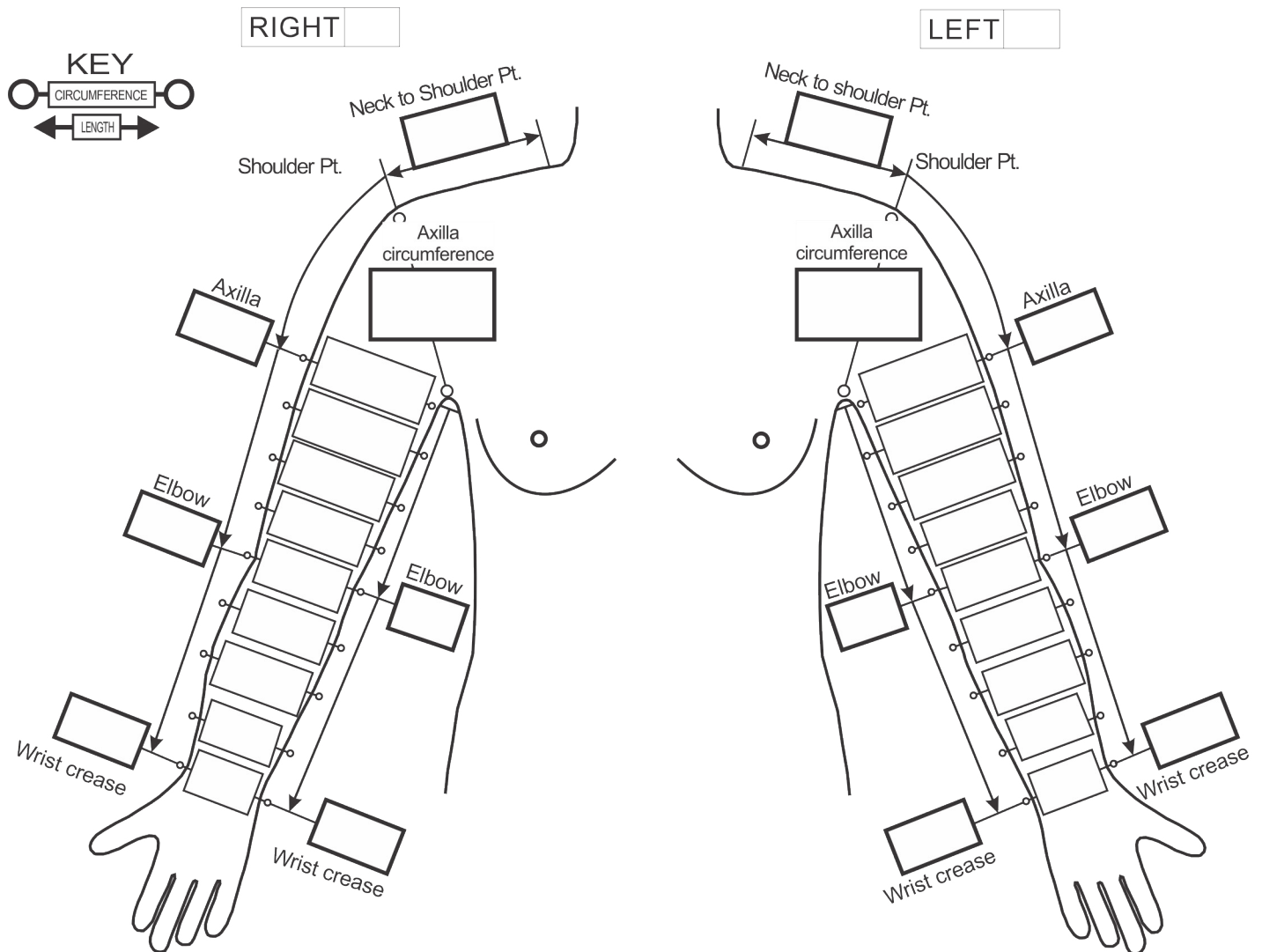
ARM SLEEVE & TAILORED ARM SLEEVE

CLIENT SURNAME:

CLIENT FIRST NAME:

DATE:

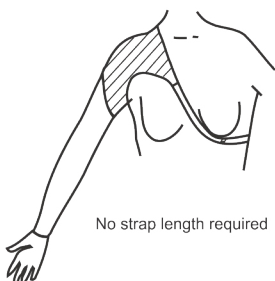
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Strap length required

NB: See diagram for placement of strap

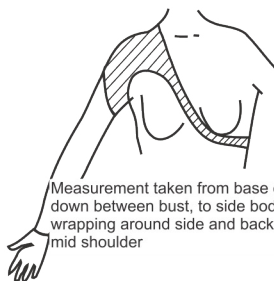
Style: 1



No strap length required

Adjustable strap with narrow elastic

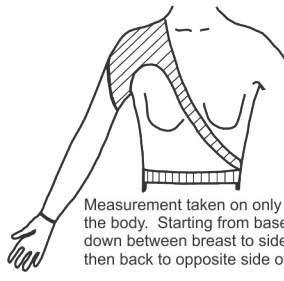
Style: 2



Measurement taken from base of neck, down between bust, to side body wrapping around side and back up to mid shoulder

Velcro Fastening

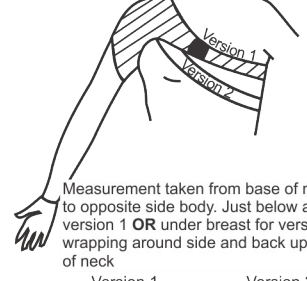
Style: 3



Measurement taken on only half the body. Starting from base of neck, down between breast to side body, then back to opposite side of body.

Velcro Fastening

Style: 4



Measurement taken from base of neck to opposite side body. Just below axilla for version 1 OR under breast for version 2, wrapping around side and back up to base of neck

Version 1 cm OR Version 2 cm

Adjustable strap with wide elastic and D Ring



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