

Patient _____

Date _____

Clinic/Therapist _____

etoGrace

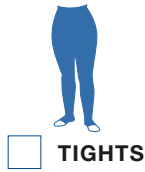
Bespoke Compression Tights for Lipoedema
25-30mmHg Compression

QUESTIONS FOR THE THERAPIST (please tick if YES)

- ☐ 1. Have you taken photos to submit with your order?
- ☐ 2. Have you ordered an Eto Grace garment previously?

BEFORE YOU BEGIN:

- For support with using this form, please see the Eto Grace measuring guide - hadhealth.com/eto-grace
- If any circumferences are outside than the **values listed**, a quote will be issued
- Don't pull in the tape at any point - only measure to skin tension



TIGHTS

ETO-G134



FOOTLESS TIGHTS

ETO-G133A



CAPRI

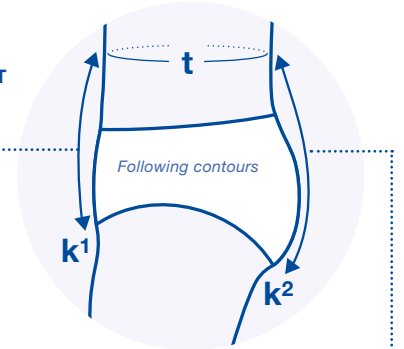
ETO-G133

t - k¹

TOP OF GARMENT TO CROTCH



For abdominal apron/pannus, add an extra 3cm



t - k²

TOP OF GARMENT TO GLUTEAL FOLD

For shelf bottom, add an extra 3cm

t TOP OF GARMENT 106 - 141CM
Where you would like the garment to finish

w UMBILICAL LEVEL NEED TEXT
Around the abdomen at the level of the belly button

j HIPS/BUTTOCKS 126 - 166CM
Largest circumference - either hips or buttocks

g UPPER THIGH 65 - 103CM
Approximately 2 finger widths below crotch

e ABOVE KNEE 44 - 66CM
Approximately 1 finger width above the popliteal crease

d BELOW KNEE 38 - 60CM
Approximately 2 finger widths below the popliteal crease

c MID CALF 39 - 62CM
Widest point of calf

b ANKLE 25 - 39CM
Above malleolus (incorporating cuff)

h Y-MEASURE 30 - 37.5CM
Around anterior ankle and heel
For ankle cuff, add an extra 3cm

a BASE OF TOES 23 - 30.5CM

RIGHT LEG

LEFT LEG

TOP OF GARMENT TO WIDEST CALF

TOP OF GARMENT TO ANKLE

ANKLE TO FLOOR

BODY HEIGHT

162 - 172CM

CM

This measurement should be taken in a standing position, measuring from the floor to the top of head.

SELECT COLOUR



WHITE



NUDE



BLACK

WAIST FASTENINGS

Optional



ZIP

OR



HOOK & EYE

PUBIS OPTION



OPEN CROTCH



CLOSED CROTCH