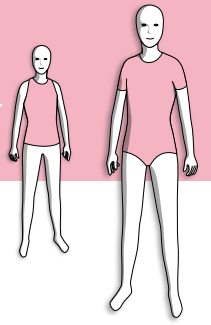


# 39300, 39301 Vest 39305, 39306 Body Vest / Body Sleeveless Measurement Form

elements  
body



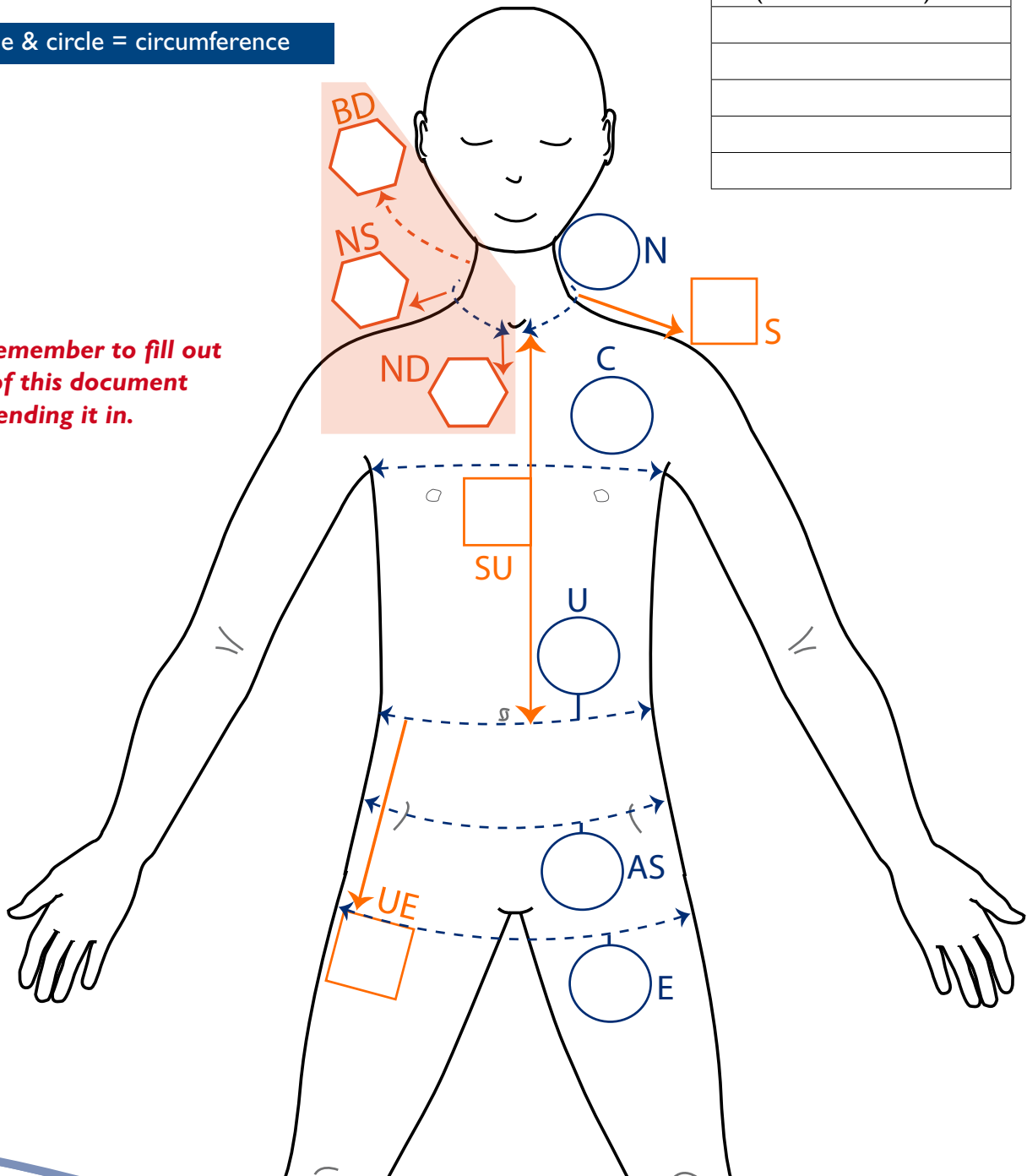
Patient ID: \_\_\_\_\_ Date: \_\_\_\_\_

Orange & square = length

Blue & circle = circumference

Reinforcements
SP (Standard Panel) <input type="checkbox"/>

**Please remember to fill out  
page 2 of this document  
before sending it in.**



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# 39300, 39301 Vest 39305, 39306 Body Vest / Body Sleeveless Measurement Form

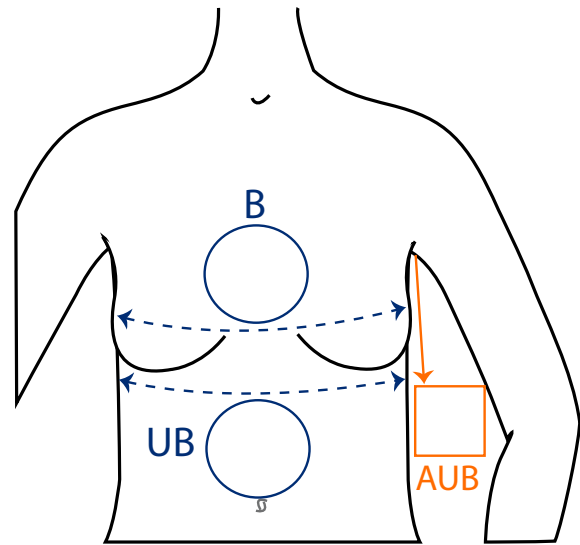
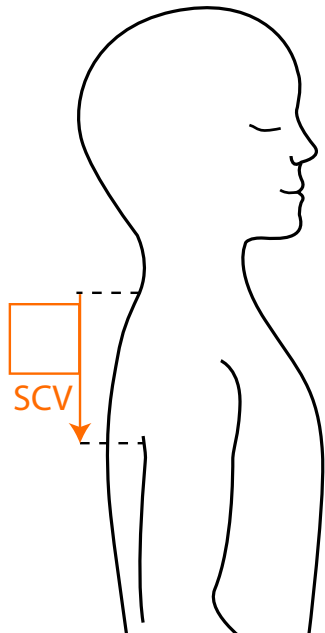
Patient ID: \_\_\_\_\_

Date: \_\_\_\_\_

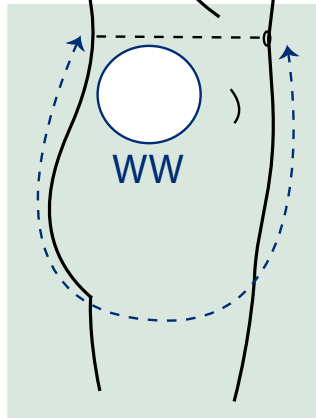
## Bust Measurements - For Women Only

Measurements must be taken standing or sitting with bra on

Measure in Standing or Sitting position



Measure in Supine Position



## If Patient needs a Gastro Hole

Measure in Supine Position

