

PRESCRIPTION Medical Compression Stockings/Socks/Armsleeves

Date: _____

Patient Name: _____

Diagnosis: _____

Physician Phone #: _____


Physician Signature: _____

COMPRESSION Level (Select) Number of Refills _____


20-30mmHg 40-50mmHg

30-40mmHg 50-60mmHg


STYLE (Select)




maternity
pantyhose




knee high



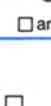
thigh high




left leg




right leg



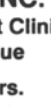
thigh high with
waist attachment




left



right



gauntlet



armsleeve

ADDITIONAL SERVICES (Select)

Foot Care Nurse Stocking Application/Removal In Home Fitting

Contact: **ACCUCARE CANADA INC.**
 Compression Therapy Support Clinic
 3rd Floor - 400 Tache Avenue
 (204) 237-1621 24 Hrs.
 by Appointment ONLY

Medical Compression Guide

Compression level at the ankle: **20 - 30 mmHg**

- Indications:
- tired/sore/aching legs
 - minimal to mild varicosities
 - minimal to mild tendency of edema
 - post small vein surgery

Compression level at the ankle: **30 - 40 mmHg**

- Indications:
- mild/moderate to severe varicosities
 - mild/moderate tendency of edema
 - venous ulcer
 - DVT
 - post thrombotic syndrome (PTS)
 - chronic venous insufficiency (CVI)
 - post vein surgery
 - mild tendency of primary lymphedema

Compression level at the ankle: **40 - 50 mmHg**

- Indications:
- severe varicosities
 - severe edema
 - recurrent venous ulcer
 - severe post thrombotic syndrome (PTS)
 - pronounced CVI
 - primary lymphedema

Compression level at the ankle: **50 - 60 mmHg**

- Indications:
- severe post thrombotic syndrome (PTS)
 - primary lymphedema

Contraindications:

- arterial insufficiency
- congestive heart failure
- dermatitis in acute or exudative stages

Cautions:

- skin sensitivity
- infection
- neuropathy
- extensive venous ulcer
- non-ambulatory use
- diabetic history

www.accucarecanada.com

Disclaimer: This guide is to be used as a point of reference only. No liability accepted for non-observance of contraindications and cautions.

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