



**THUASNE**  
COMPRESSIONCARE

# CICATREX<sup>®</sup>

Regenerate your skin

Cicatrex<sup>®</sup>, made-to-measure  
and standard compression  
garments for skin healing...

## Cicatrex® Thuasne expertise in compression for the treatment of scars

The name "Cicatrex®" comes from the French "cicatrice", itself from the Latin "cicatrix", meaning scar or the new tissue formed in the healing of a wound. Because wearing a compression garment has a beneficial effect on the formation of scar tissue and the healing process.

Founded in 1847 by Maurice Thuasne, the group is now the European leader in compression products.

Having initially specialised in the production of elastic textiles for medical applications, at the end of the 1970s THUASNE created the first European compression concept, designed for the treatment of major burns: **Thuasne Cicatrex®**.

With more than 30 years' medical and technical experience, THUASNE has been able to develop an extensive range of different compression fabrics and garments (made-to-measure and standard) and now offers the widest variety of products to treat burns patients.

In addition, Thuasne is closely involved in the tricky task of taking measurements, offering fitters and care staff a specific measurement method. Thanks to its computer-assisted production process, Thuasne guarantees reliability and security when it comes to making the finished product.

Finally, so that it can be even closer to burns patients, Thuasne has developed several production centres in Europe.



Elizabeth Ducottet,  
CEO THUASNE

### The 3 + Cicatrex®



- + Efficient**  
A comprehensive range of fabrics meeting every requirement
- + High Performance**  
Special training methods for prescription and measurement-taking
- + Innovative**  
An accurate and reliable production method thanks to digitalisation

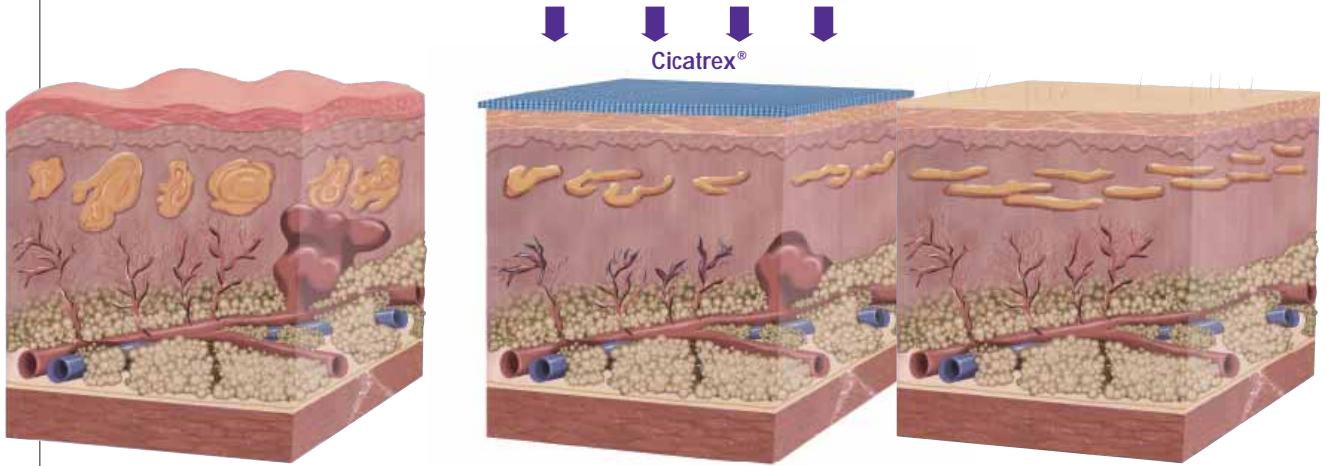
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# Treatments that are known to work

## PRINCIPLE AND THERAPEUTIC MECHANISMS OF ACTION OF COMPRESSION THERAPY



• Hypertrophic scar before treatment

• Effect of compression during Cicatrex® treatment

• Flat scar after Cicatrex® treatment

Patients with deep second-degree burns or worse are exposed to a major risk of hypertrophic scarring, potentially degenerating into keloids.

The compression exerted by Thuasne Cicatrex® garments leads to a slowing-down in blood irrigation (or relative ischemia).

This relative ischemia helps reduce:

- the hypervascularisation that causes hypertrophy
- oedema
- pruritus
- fibroblasts

The principle of Cicatrex® compression also helps reorganise the collagen fibres in a plane parallel to the skin, preventing anarchic healing of the connective tissue.

Unsightly scars and dysfunctional adhesions are reduced.

### It should be noted

the scar maturation phase lasts around 18 months.

This is the optimum period for compression using Thuasne Cicatrex® garments.

For treatment to be as effective as possible, Cicatrex® compression garments should be used as soon as the burn allows.



## INDICATIONS

### A first-line method of therapy

Today, Cicatrex® healing compression garments are a first-line method in the treatment of major burns victims and help minimise the need for reconstructive surgery.

However, their usefulness does not stop at the healing of burns; they are also valuable in the treatment of numerous other conditions, such as reconstructive surgery and lymphology.

### Burns

- Prevention and treatment of hypertrophic scars, keloids and scar retractions
- Treatment of thermal, chemical or electrical burns
- Compression of skin graft zones

### Lymphology

- Reduction and stabilisation of lymphoedema

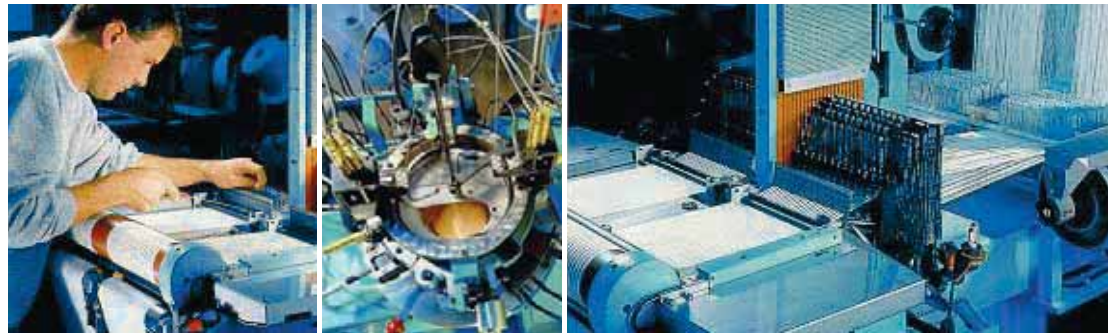
### Plastic and reconstructive surgery

- Postoperative treatment of traumatic and surgical scars
- Following skin grafts



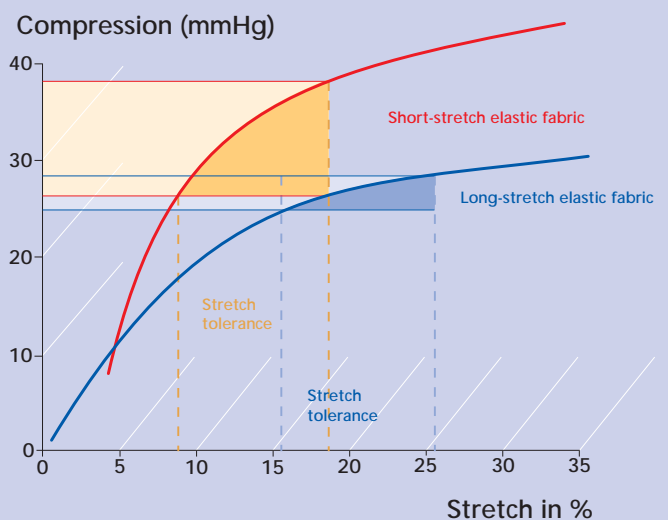
# A range of fabrics tailored to the different needs

The extensive nature of the Cicatrex® range makes it possible to find the best solution to fit the various needs of patients and demands of doctors. Whether it is a matter of obtaining a thin aesthetic compression garment or a very stretchy one that is easy to put on or finding a hardwearing garment or a specific colour garment, it is always possible to find an ideal match between the compression garment and the patient's wishes, without compromising the effectiveness of the treatment.



**IT SHOULD BE NOTED THAT:  
Thusne Cicatrex® garments  
are made of long  
or medium-stretch elastic fabrics.**

This significant capacity to stretch makes the garments easier to put on and take off. In addition, it allows great freedom of movement and good adjustment (up to 5%) to variations in circumference.



of burned patients

CICATREX®



**Tested for harmful substances**

according to Oeko-Tex Standard 100

ASQUAL CQ. 636/4

ITF, Lyon

#### **"OEKO TEX" LABEL**

All the fabrics in the Thuasne Cicatrex® range have been awarded the Oeko-Tex label, certifying their natural qualities.

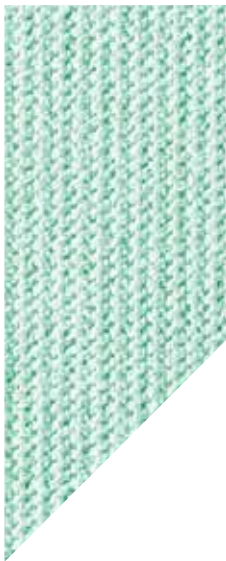
The Oeko-Tex label is the most significant label in the world for certifying textiles that have been tested for the presence of unwanted substances. Products that have been optimised from a human ecology point of view bearing this label have been checked by internationally-recognised certified textile institutes.



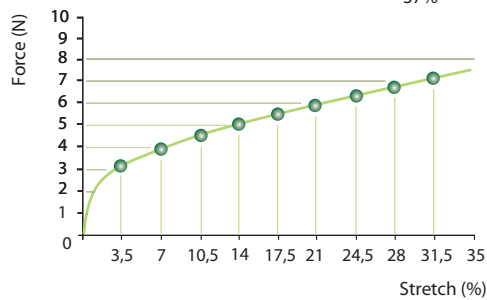
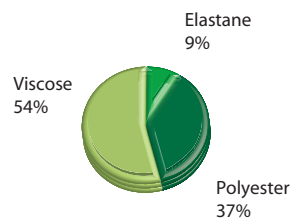
**THUASNE**  
COMPRESSIONCARE

# Fabrics tailored to the different needs of burned

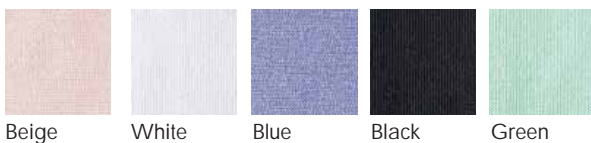
## Cicatrex® Nature



Cicatrex® Nature compression garments contain a high percentage of viscose. Produced from natural raw materials (wood), viscose is soft against the skin, enveloping and breathable, making the garments very easy to wear.



Available in 5 colours

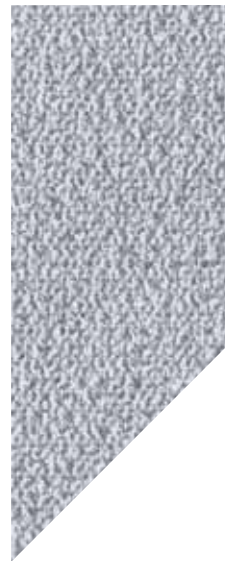


### The 3 +

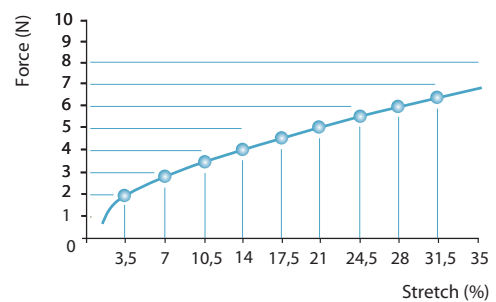
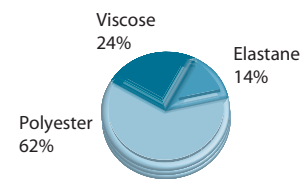


- + Comfortable**  
Excellent skin tolerance, obtained through the presence of viscose produced from natural fibres. Good conformability, adapts to the patient's shape and movements.
- + Resistant**  
Hardwearing.
- + Aesthetic**  
Broad range of colours.

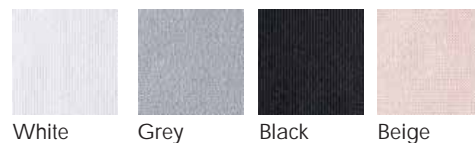
## Cicatrex® Filifine



Cicatrex® Filifine compression garments are made of extra-thin high-tech fibres. The finesse of Cicatrex® Filifine fabric makes it easier to fit garments to the fingers and toes.



Available in 4 colours



### The 3 +



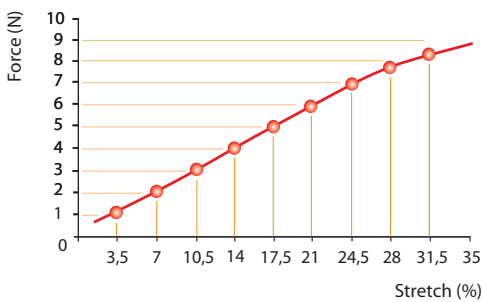
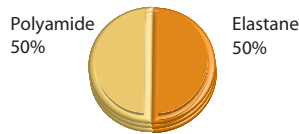
- + Comfortable**  
Excellent wicking of perspiration.
- + Practical**  
Fast-drying.
- + Aesthetic**  
Soft and thin.



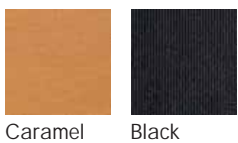
## Cicatrex® Skin



The particular quality of Cicatrex® Skin is its very fine, smooth, lightweight knit with the sheen of silk. Thanks to their composition, Cicatrex® Skin compression garments are both aesthetically pleasing and easy to care for.



Available in 2 colours



The 3



**+ Comfortable**  
Easy to slip on.

**+ Practical**  
Fast-drying.

**+ Aesthetic**  
Aesthetic, silky appearance.



## Accessories

The additional accessory options proposed by Cicatrex® are selected and adapted for each patient. They ensure an optimum healing result, excellent comfort and easy putting on of the garments. The fact that accessories can be customised for each patient is a major reason for the popularity of Cicatrex®.



### 1/Fastenings

- Make it easy to put on and take off the garment, particularly for immobile patients.
- Their position is tailored depending on the type of garment.



### 2/Compression pad

- Used to obtain a local increase in the level of pressure exerted on the skin.
- Sewn into the garment or removable.



### 3/Finger or toe separators

- Reinforce pressure between the fingers or toes (in the event of scar adhesions).



### 4/Non-compressive fabric

- For improved comfort, areas of non-compressive fabric are added at the underarms and bust, if treatment does not require compression of these areas.

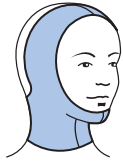


### 5/Seams

- The extra-flat seams are on the outside of the garments, to avoid irritation of sensitive skin.

# Made-to-measure range

## Head



### Partial hood

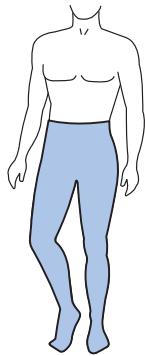
- With oblique head strap
- Velcro fastening on the head
- Ears uncovered or covered



### Hood

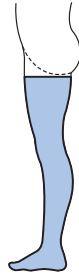
- Open or closed
- Face uncovered (open) or covered (closed)
- With or without compression at the ears

## Abdomen and lower limbs



### Shorts

- Open or closed crotch
- Different leg lengths
- Open or closed foot
- With high waist and/or braces



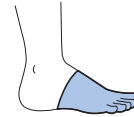
### Leg

- Open or closed foot
- Open or closed toe
- Different lengths
- Fastening by adhesive tape or hip strap
- With compression seams to reinforce compression between the toes



### Compression components

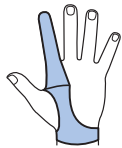
- Hose shape for the thigh and leg
- Anatomical shape for components covering joints



### Foot glove

- Open or closed foot
- Open or closed toe

## Hand/Arm



### Fingercot

- With or without brake



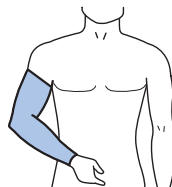
### Glove

- Mitten
- With open or closed fingers
- Customised hand length
- Can be combined with a sleeve bandage
- With compression seams to reinforce compression between the fingers



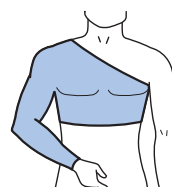
### Finger separators

- Reinforced compression between the fingers
- Adapted to the glove



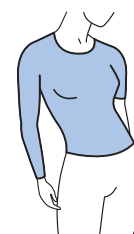
### Arm bandage

- Different lengths
- Can be combined with the glove
- Fastening by adhesive tape, braces or shoulder strap



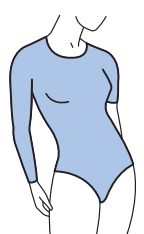
### Special arm protector

- To treat an arm including the shoulder
- Bolero cut



### Jacket

- Different sleeve lengths
- Front or back fastening
- Cups at the bust and underarms with or without compression
- Crotch strap for a secure fit for small children



### Body

- Brief or top-of-leg form
- Open or closed crotch
- Different sleeve lengths
- Front or back fastening
- Cups at the bust and underarms with or without compression

## Customer Service

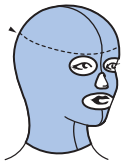
Tel. + 33 4 77 81 40 01

Fax : + 33 4 77 81 10 03

E.mail : [ScIExport@thuasne.fr](mailto:ScIExport@thuasne.fr)

# Standard garments

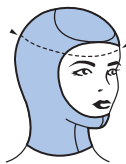
## Hood



Ref. Thuasne : 3402

Size	White
0	51 - 52 cm
1	53 - 55 cm
2	56 - 57 cm
3	58 - 59 cm

## Open hood



Ref. Thuasne : 3416

Size	White
0	51 - 52 cm
1	53 - 55 cm
2	56 - 57 cm
3	58 - 59 cm

## Partial hood



Ref. Thuasne : 3410

Size	White
1	27 - 30 cm
2	31 - 36 cm
3	37 - 45 cm

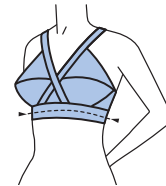
## Ear band



Ref. Thuasne : 3411

Size	White
1	< 52 cm
2	> 52 cm

## Bra



Ref. Thuasne : 3418 01

Size	Cup	White
0	62 - 80 cm	AB
1	62 - 85 cm	C
2	75 - 95 cm	D

## Bra frontal opening

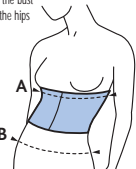


Ref. Thuasne : 3434 01

FR	EUR	FR	EUR	FR	EUR	FR	EUR	Black
80A	65A	85C	70C	90D	80D	100C	85C	
80B	65B	85D	70D	95B	80B	100D	85D	
85A	70A	90B	75B	95D	80D			
85B	70B	90C	80C					

## Belt

Measurement taken below the bust or on the hips



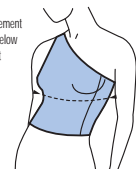
Ref. Thuasne : 3401 01

Size	White
1	70 - 92 cm
2	93 - 114 cm

A = chest belt, B = abdominal belt

## Mastectomy compression vest

Measurement taken below the bust



Ref. Thuasne : 3419 01

Size	White
1	60 - 75 cm
2	75 - 90 cm
3	91 - 105 cm

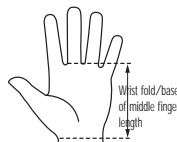
## Sleeveless vest



Ref. Thuasne : 3424 01

Size	White
1	74 - 82 cm
2	83 - 91 cm
3	92 - 98 cm
4	99 - 115 cm
5	116 - 120 cm
6	121 - 135 cm

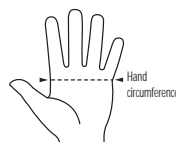
## Finger separator



Ref. Thuasne : 3413

Size	White
1	< 9 cm
2	> 9 cm

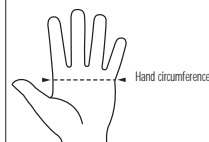
## Standard ladder-proof gloves (Cicatrex® Skin)



Ref. Thuasne : 3448

Size	Caramel
1	13 - 14 cm
2	15 - 16,5 cm
3	17 - 18,5 cm
4	19 - 20,5 cm
5	21 - 22,5 cm
6	23 - 24,5 cm
7	25 - 26,5 cm
8	27 - 28,5 cm

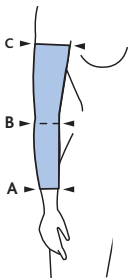
## Standard microfibre gloves (Cicatrex® Filifine)



Ref. Thuasne : 3447

Size	White/Beige
1	13 - 14 cm
2	15 - 16,5 cm
3	17 - 18,5 cm
4	19 - 20,5 cm
5	21 - 22,5 cm
6	23 - 24,5 cm

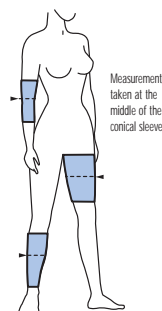
## Sleeve (Cicatrex® Skin)



Ref. Thuasne : 3449 01

Size A	Size B	Size C	Height	Caramel
1	13 - 15 cm	20 - 25 cm	22 - 28 cm	
2	15 - 17 cm	23 - 28 cm	25 - 31 cm	
3	17 - 19 cm	26 - 31 cm	29 - 35 cm	39 cm
4	19 - 21 cm	29 - 34 cm	33 - 39 cm	
5	21 - 23 cm	32 - 37 cm	37 - 43 cm	
6	23 - 26 cm	35 - 41 cm	41 - 48 cm	

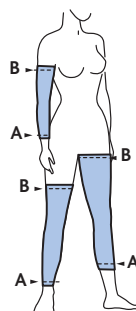
## Sleeve



Ref. Thuasne : 3400 01

Size	Height	White
1	12 - 14 cm	20 cm
2	15 - 17 cm	
3	18 - 22 cm	
4	23 - 29 cm	
5	30 - 37 cm	26 cm
6	38 - 45 cm	
7	46 - 54 cm	
8	55 - 63 cm	

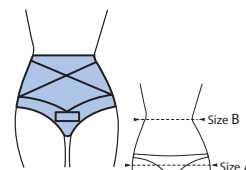
## Long sleeve



Ref. Thuasne : 3425 01

Size A	Size B	Height	White
1	9 - 11 cm	19 - 23 cm	35 cm
2	11 - 14 cm	23 - 28 cm	
3	14 - 16 cm	28 - 32 cm	
4	16 - 20 cm	32 - 37 cm	
5	20 - 25 cm	37 - 42 cm	45 cm
6	25 - 30 cm	42 - 48 cm	
7	30 - 40 cm	48 - 58 cm	
8	40 - 50 cm	58 - 67 cm	

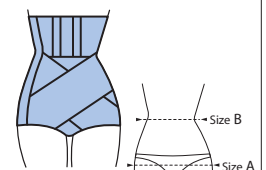
## Panty girdle



Ref. Thuasne : 3415

Size A	Size B	White
1	88 - 94 cm	62 - 72 cm
2	95 - 101 cm	67 - 79 cm
3	102 - 108 cm	73 - 85 cm
4	109 - 115 cm	80 - 93 cm
5	116 - 122 cm	90 - 104 cm
6	123 - 129 cm	97 - 113 cm

## Boned panty girdle



Ref. Thuasne : 3417

Size A	Size B	White
1	88 - 94 cm	62 - 72 cm
2	95 - 101 cm	67 - 79 cm
3	102 - 108 cm	73 - 85 cm
4	109 - 115 cm	80 - 93 cm
5	116 - 122 cm	90 - 104 cm
6	123 - 129 cm	97 - 113 cm

## Panty

Ref. Thuasne : 3403



Size A	Size B	White/Black
1	88 - 94 cm	62 - 72 cm
2	95 - 101 cm	67 - 79 cm
3	102 - 108 cm	73 - 85 cm
4	109 - 115 cm	80 - 93 cm
5	116 - 122 cm	90 - 104 cm
6	123 - 129 cm	97 - 113 cm

## Below-knee panty

Ref. Thuasne : 3412



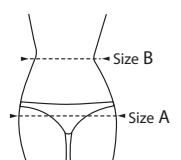
Size A	Size B	White/Black
1	88 - 94 cm	62 - 72 cm
2	95 - 101 cm	67 - 79 cm
3	102 - 108 cm	73 - 85 cm
4	109 - 115 cm	80 - 93 cm
5	116 - 122 cm	90 - 104 cm
6	123 - 129 cm	97 - 113 cm

## Trousers

Ref. Thuasne : 3420



Size A	Size B	White/Black
1	88 - 94 cm	62 - 72 cm
2	95 - 101 cm	67 - 79 cm
3	102 - 108 cm	73 - 85 cm
4	109 - 115 cm	80 - 93 cm
5	116 - 122 cm	90 - 104 cm
6	123 - 129 cm	97 - 113 cm



Measurement line (A) must be located 3 or 4 cm above the top of the pubic bone at the front and at the upper median of the buttocks at the back.

# Measurement sheets



## CONTENTS

- Taking torso measurements ..... 13
- Taking upper limb measurements  
(arm, hand) ..... 15
- Taking lower limb measurements  
(leg and pelvis, foot) ..... 17
- Taking head measurements..... 19

RETAILER ID

N° client :

Date :

NAME OF PRESCRIBER

**PATIENT**

Surname: \_\_\_\_\_

First Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Address : \_\_\_\_\_

1st treatment  Unit

Dossier No. for renewal  Pair

\_\_\_\_\_

Please also complete torso sheet 1b

FASTENING	ARM FASTENING	MODEL	SPECIFICITIES	FABRIC
<input type="checkbox"/> Zipper <input type="checkbox"/> Velcro  <b>Positions</b> <input type="checkbox"/> Front <input type="checkbox"/> Back  <b>Gender</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>RIGHT</b> <input type="checkbox"/> Zipper <input type="checkbox"/> Velcro length: _____ cm <input type="checkbox"/> Internal <input type="checkbox"/> External <b>Armpit compression</b> <input type="checkbox"/> yes <input type="checkbox"/> no  <b>LEFT</b> <input type="checkbox"/> Zipper <input type="checkbox"/> Velcro length : _____ cm <input type="checkbox"/> Internal <input type="checkbox"/> External <b>Armpit compression</b> <input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Vest <input type="checkbox"/> Body <input type="checkbox"/> 1-sleeved shoulder piece  <b>Neckline</b> <input type="checkbox"/> V-neck <input type="checkbox"/> Round neck <input type="checkbox"/> High neck <b>Front neckline cut-away for V necks</b> From the sternum _____ cm <b>Back neckline cut-away (V neck at the back)</b> From the 7th cervical _____ cm  <b>For the High neck</b> Circumference top _____ cm bottom _____ cm  Height front _____ cm back _____ cm Sternum/neck front _____ cm	<input type="checkbox"/> Compression pad (draw)  <input type="checkbox"/> Additional opening (draw)  <input type="checkbox"/> Crotch strap. _____ cm <input type="checkbox"/> Bra cups <input type="checkbox"/> with compression <input type="checkbox"/> without compression  Prof. <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/> F	<input type="checkbox"/> <b>Cicatrex<sup>®</sup> Nature</b> <input type="checkbox"/> white <input type="checkbox"/> beige <input type="checkbox"/> green <input type="checkbox"/> denim <input type="checkbox"/> black  <input type="checkbox"/> <b>Cicatrex<sup>®</sup> Filifine</b> <input type="checkbox"/> white <input type="checkbox"/> beige <input type="checkbox"/> grey <input type="checkbox"/> black  <input type="checkbox"/> <b>Cicatrex<sup>®</sup> Skin</b> <input type="checkbox"/> caramel <input type="checkbox"/> black

Right side	Left side
13 Length of right shoulder from the acromion to round the neck No. 1 14 Armhole circumference 15 Arm circumference at the armpit 16 Top of the sleeve 17 Upper arm circumference (thickest part) 18 Length to the middle of the upper arm 19 Elbow circumference 20 Length to the elbow 21 Forearm circumference (thickest part) 22 Length to the middle of the forearm 23 Wrist circumference 24 Length to the wrist 36 Thigh circumference*	1 Neck circumference from the 7th cervical to the top of the sternum 2 Chest width, breathing in (armpit to armpit) 3 Chest perimeter, breathing in 4 Top of the sternum/armpit line length 5 Circumference below the chest, breathing in 6 Top of the sternum-below the chest length 7 Waist measurement 8 Top of sternum/waist length 9 Hip measurement 10 Top of sternum/base of vest length (for a body, to the crotch) 11 Length of left shoulder from the acromion to round the neck No. 1 12 Armhole circumference 25 Arm circumference at the armpit 26 Top of the sleeve 27 Upper arm circumference (thickest part) 28 Length to the middle of the upper arm 29 Elbow circumference 30 Length to the elbow 31 Forearm circumference (thickest part) 32 Length to the middle of the forearm 33 Wrist circumference 34 Length to the wrist 35 Thigh circumference*

\* Uniquement pour le body



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 Also available on www.thuasne.biz

Please also complete torso sheet 1b

**PATIENT**

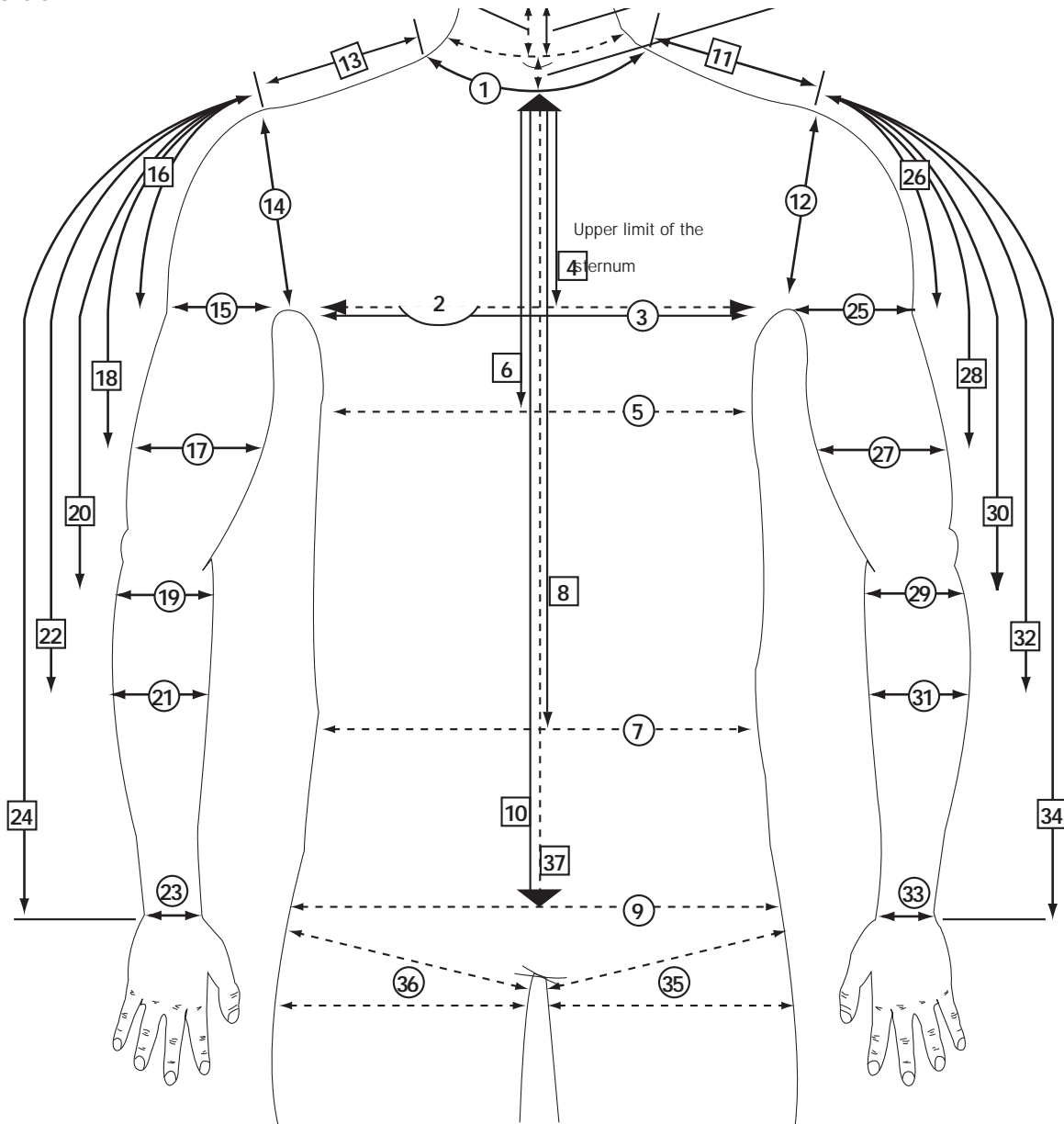
Surname: .....

First Name: .....

Date: .....

Right side

Left side



35 et 36 : Uniquement pour le body  
 Prise de mesure en biais pour un body culotte  
 Prise de mesure droite pour un body short

14



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 Also available on [www.thuasne.biz](http://www.thuasne.biz)

RETAILER ID

Customer N°:

Date:

NAME OF PRESCRIBER

**PATIENT**

Surname: \_\_\_\_\_

First Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Address : \_\_\_\_\_

1st treatment  Unit

Dossier No. for renewal  Pair

\_\_\_\_\_

**RIGHT SLEEVE**

To under the armpit

Anti-slip

**Above the shoulder**

with belt: \_\_\_\_\_ cm

with bra strap loops

**Specificities:**

compression pad (to be drawn)

additional opening (to be drawn)

**RIGHT FASTENING\***

Zipper

Velcro

length \_\_\_\_\_ cm

Front / thumb side

Back / little finger side

Inside

Outside

\* Facultatif

**LEFT SLEEVE**

To under the armpit

Anti-slip

**Above the shoulder**

with belt: \_\_\_\_\_ cm

with bra strap loops

**Specificities:**

compression pad (to be drawn)

additional opening (to be drawn)

**LEFT FASTENING\***

Zipper

Velcro

length \_\_\_\_\_ cm

Front / thumb side

Back / little finger side

Inside

Outside

\* Facultatif

**FABRIC**

**Cicatrex<sup>®</sup> Nature**

white

beige

green

denim

black

**Cicatrex<sup>®</sup> Filifine**

white

beige

grey

black

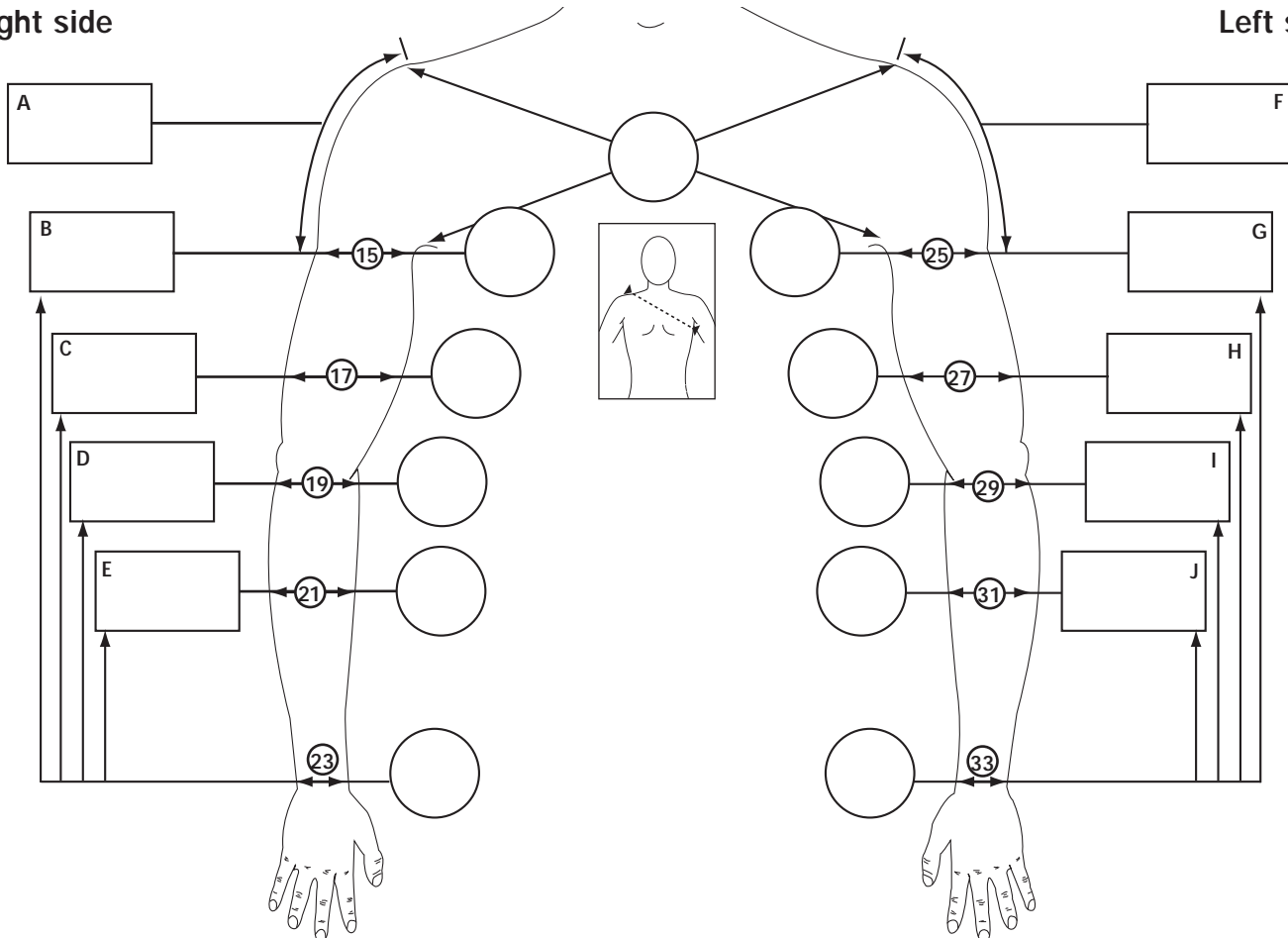
**Cicatrex<sup>®</sup> Skin**

caramel

black

Right side

Left side



Please draw the contours of the garment on the diagram.

RETAILER ID

Customer N°:

Date:

NAME OF PRESCRIBER

PATIENT

Surname: \_\_\_\_\_

First Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Address : \_\_\_\_\_

1st treatment  Unit

Dossier No. for renewal  Pair

\_\_\_\_\_

**RIGHT GLOVE**

With sleeve (max.5 cm)

Up to the elbow

Separate

One-piece

**Fastening**

Zipper

Velcro

length: \_\_\_\_\_ cm

Internal surface of the hand

Back of the hand

Little finger side

**RIGHT SPECIFICITIES**

Finger guard with strap

Finger guard without strap

compression pad (to be drawn)

Internal surface of the hand

Back of the hand

**LEFT GLOVE**

With sleeve (max.5 cm)

Up to the elbow

Separate

One-piece

**Fermeture**

Zipper

Velcro

length: \_\_\_\_\_ cm

Internal surface of the hand

Back of the hand

Little finger side

**LEFT SPECIFICITIES**

Finger guard with strap

Finger guard without strap

compression pad (to be drawn)

Internal surface of the hand

Back of the hand

**FABRIC**

Cicatrex<sup>®</sup> Filifine

white

beige

grey

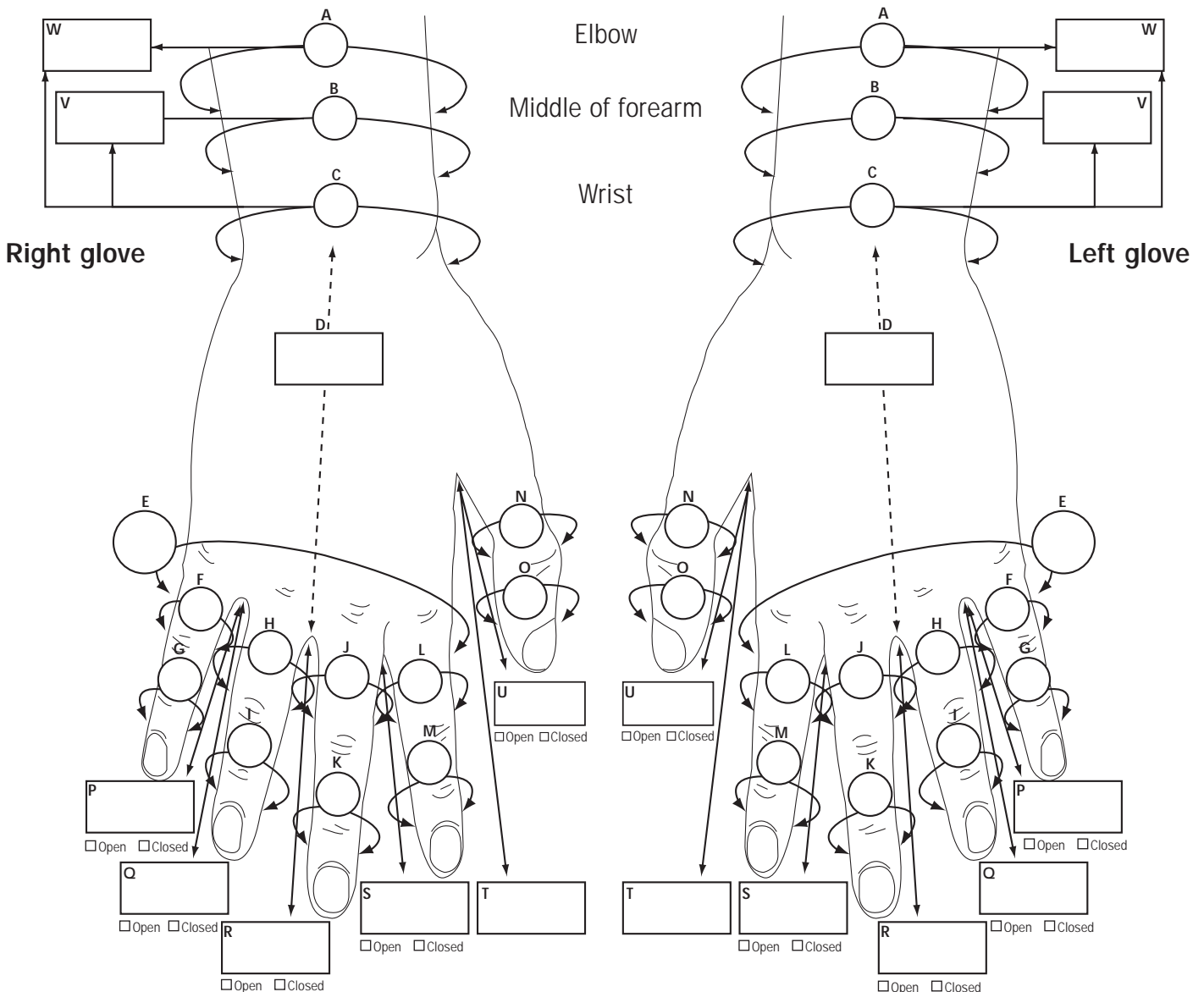
black

Cicatrex<sup>®</sup> Skin

caramel

black

Please draw the contours of the garment on the diagram.



**Merci de nous indiquer les longueurs du gant et non les longueurs des doigts**

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RETAILER ID

Customer N°:

Date:

NAME OF PRESCRIBER

**PATIENT**

Surname: \_\_\_\_\_

First Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Address : \_\_\_\_\_

1st treatment  Unit

Dossier No. for renewal  Pair

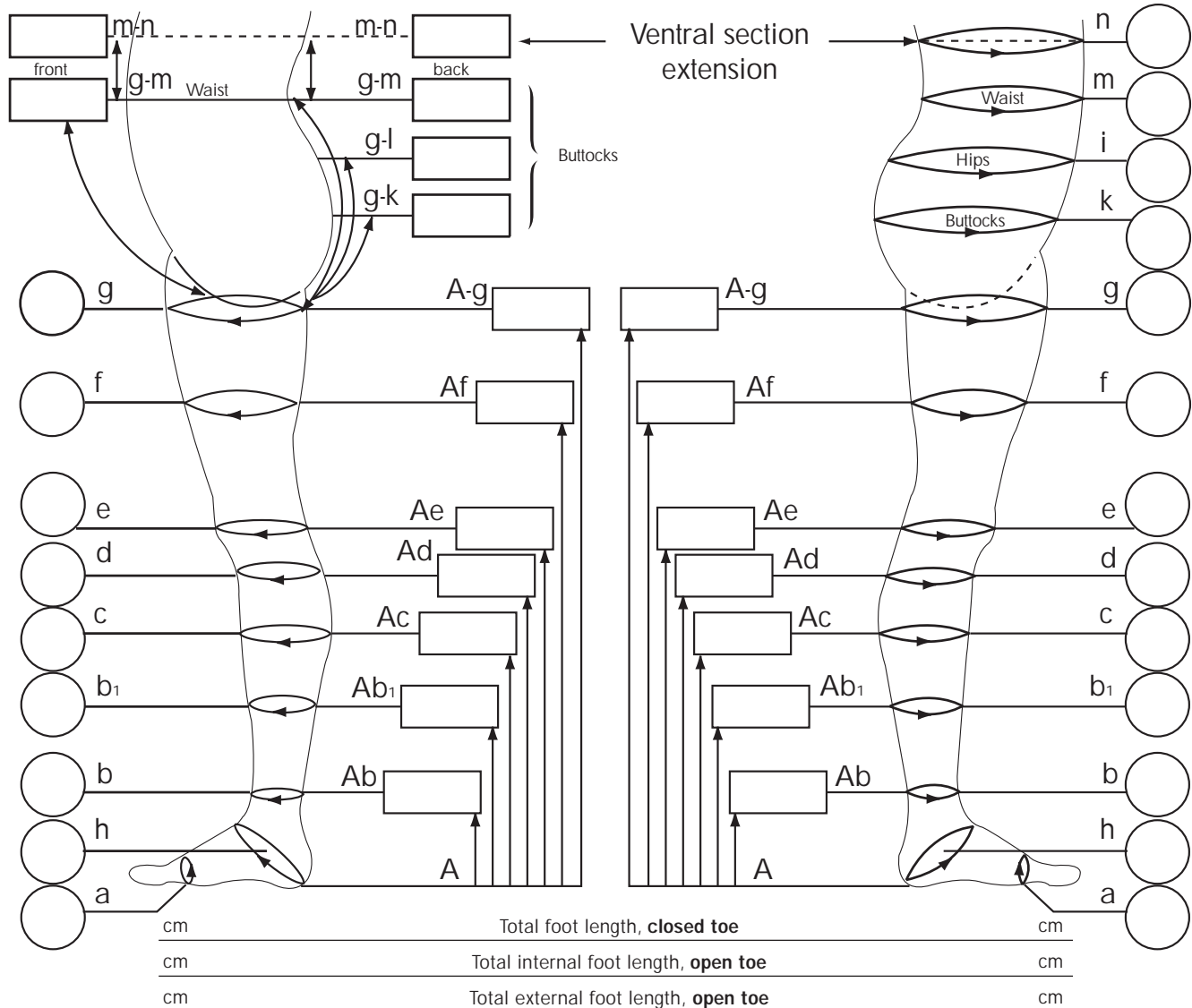
\_\_\_\_\_

VENTRAL FASTENING	RIGHT LEG FASTENING	LEFT LEG FASTENING	ATTACHMENT	SPECIFICITIES	FABRIC
<input type="checkbox"/> Zipper <input type="checkbox"/> Velcro <input type="checkbox"/> Hooks / eyes <input type="checkbox"/> Front <input type="checkbox"/> Back <input type="checkbox"/> Right <b>Crotch</b> <input type="checkbox"/> Open <input type="checkbox"/> Closed	<input type="checkbox"/> Zipper <input type="checkbox"/> Velcro <input type="checkbox"/> Length: _____ cm <input type="checkbox"/> Front <input type="checkbox"/> Inside <input type="checkbox"/> Back <input type="checkbox"/> Outside <input type="checkbox"/> Open-toe <input type="checkbox"/> Closed-toe <input type="checkbox"/> Separate toes	<input type="checkbox"/> Zipper <input type="checkbox"/> Velcro <input type="checkbox"/> Length: _____ cm <input type="checkbox"/> Front <input type="checkbox"/> Inside <input type="checkbox"/> Back <input type="checkbox"/> Outside <input type="checkbox"/> Open-toe <input type="checkbox"/> Closed-toe <input type="checkbox"/> Separate toes	<input type="checkbox"/> Braces : _____ cm <input type="checkbox"/> Anti-slip <input type="checkbox"/> Belt  <b>SOCK</b> (merci de remplir la fiche n° 5) <input type="checkbox"/> attenant <input type="checkbox"/> séparé	<input type="checkbox"/> Compression pad (to be drawn) <input type="checkbox"/> Additional opening (to be drawn)	<input type="checkbox"/> <b>Cicatrex® Nature</b> <input type="checkbox"/> white <input type="checkbox"/> green <input type="checkbox"/> beige <input type="checkbox"/> denim <input type="checkbox"/> black <input type="checkbox"/> <b>Cicatrex® Filifine</b> <input type="checkbox"/> white <input type="checkbox"/> beige <input type="checkbox"/> grey <input type="checkbox"/> black <input type="checkbox"/> <b>Cicatrex® Skin</b> <input type="checkbox"/> caramel <input type="checkbox"/> black

Please draw the contours of the garment on the diagram

### Right leg

### Left leg



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RETAILER ID

Customer N°:

Date:

NAME OF PRESCRIBER

PATIENT

Surname: \_\_\_\_\_

First Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Address : \_\_\_\_\_

1st treatment  Unit

Dossier No. for renewal  Pair

\_\_\_\_\_

**RIGHT SPECIFICITIES**

Compression reinforcement (to be drawn)

top of foot

bottom of foot

**RIGHT TOE**

Open

Closed

**LEFT SPECIFICITIES**

Compression reinforcement (to be drawn)

top of foot

bottom of foot

**LEFT TOE**

Open

Closed

**FABRIC**

Cicatrex<sup>®</sup> Filifine

white  beige  grey  black

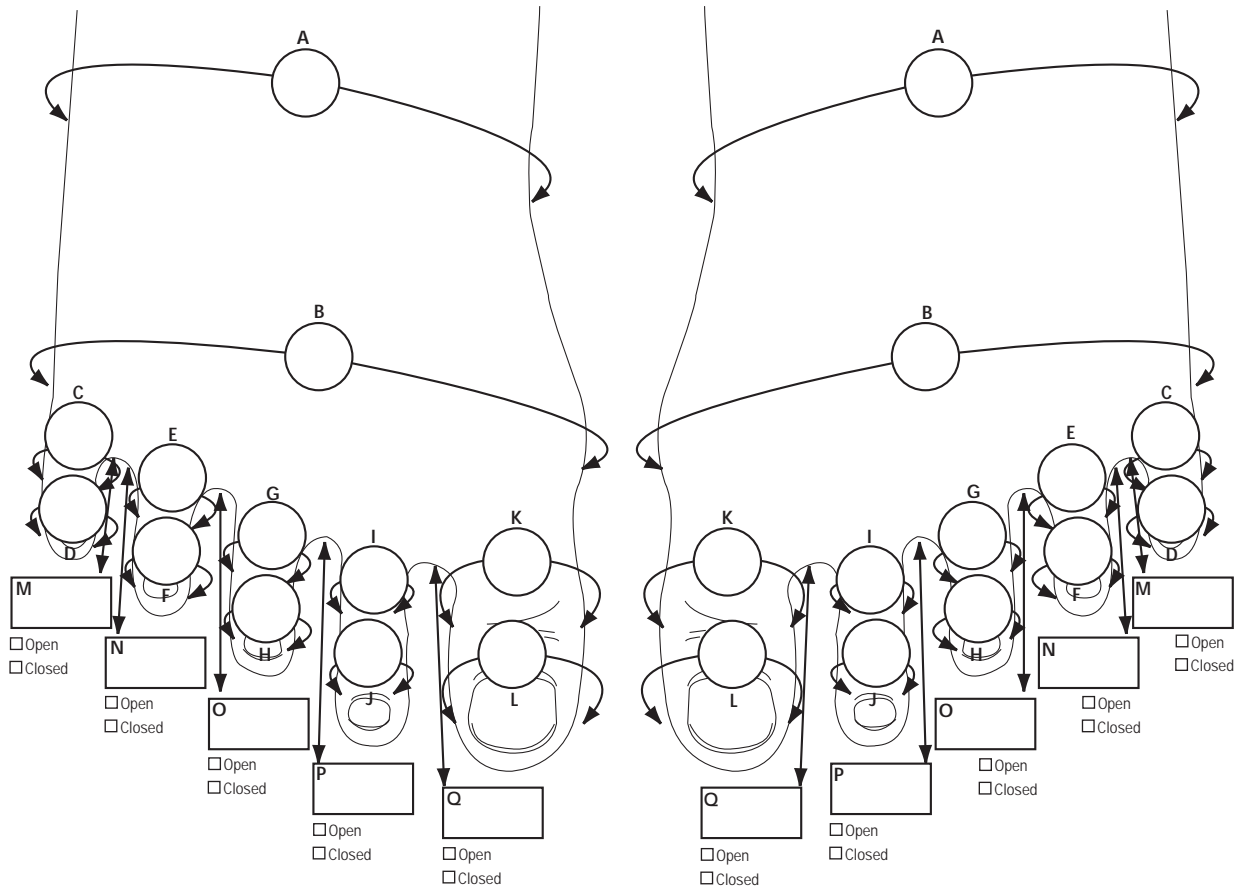
Cicatrex<sup>®</sup> Skin

caramel  black

Please complete sheet No. 4 for the rest of the lower limb.

### Right foot

### Left foot



cm Internal length (from the tip of the big toe to the heel) cm

cm External length (from the tip of the little toe to the heel) cm

**Please draw the contours of the garment on the diagram.**  
**Merci de nous indiquer les longueurs du gant et non les longueurs des doigts**



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RETAILER ID

Customer N°:

Date:

NAME OF PRESCRIBER

PATIENT

Surname: \_\_\_\_\_

First Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Address : \_\_\_\_\_

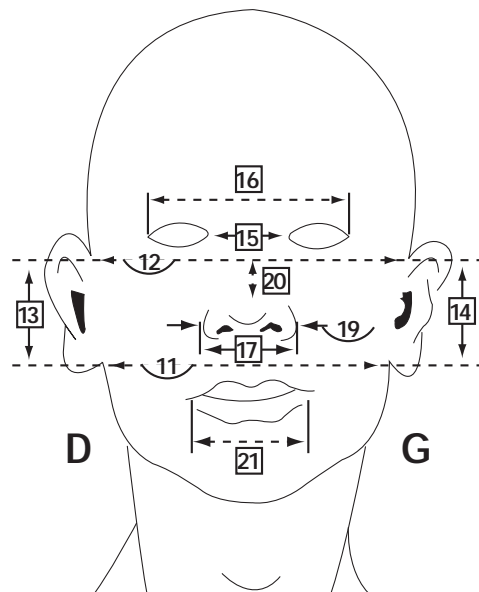
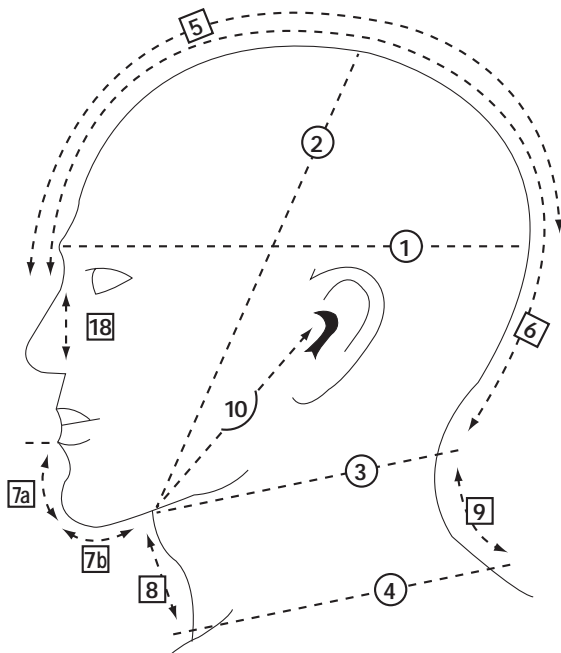
1st treatment  Unit

Dossier No. for renewal  Pair

\_\_\_\_\_

MODEL	FACE	SPINE OF NOSE	RIGHT EAR	LEFT EAR	SPECIFICITIES	FABRIC
<input type="checkbox"/> Chine piece <input type="checkbox"/> Hood	<input type="checkbox"/> Free <input type="checkbox"/> Covered	<input type="checkbox"/> Free <input type="checkbox"/> Covered	<input type="checkbox"/> Free <input type="checkbox"/> Covered	<input type="checkbox"/> Free <input type="checkbox"/> Covered	<input type="checkbox"/> Compression pad (to be drawn)	<input type="checkbox"/> <b>Cicatrex<sup>®</sup> Nature</b> <input type="checkbox"/> white <input type="checkbox"/> green <input type="checkbox"/> beige <input type="checkbox"/> denim <input type="checkbox"/> black <input type="checkbox"/> <b>Cicatrex<sup>®</sup> Filifine</b> <input type="checkbox"/> white <input type="checkbox"/> beige <input type="checkbox"/> grey <input type="checkbox"/> black <input type="checkbox"/> <b>Cicatrex<sup>®</sup> Skin</b> <input type="checkbox"/> caramel <input type="checkbox"/> black

- **1** Horizontal head circumference
  - **2** Vertical head circumference
  - **3** Neck circumference at the top
  - **4** Neck circumference at the base / end of the bandage
  - **5** Nose bone (occipital prominence)
  - **6** Nose bone / Neck circumference at top
  - **7a** Lower lip - tip of the chin
  - **7b** Tip of the chinupper base of the neck
  - **8** Neck height at the front
  - **9** Neck height at the back
  - **10** Ear canal - ear canal under the chin
  - **11** Base of the ear - Base of the ear above the upper lip
  - **12** Top of the ear - Top of the ear above the top of the nose
  - **13** Length of the right ear
  - **14** Length of the left ear
  - **15** Distance between the eyes, internal
  - **16** Distance between the eyes, external
  - **17** Nose width (measured by projection) 3 Neck circumference at the top
  - **18** Lateral measurement of nose length
  - **19** Ala of the nose - Ala of the nose above the nose bone (for nose protection)
  - **20** Nose length (for nose protection) Measured by projection
  - **21** Mouth width Measured by projection
- = Measurements essential for a chin piece



**Please draw the contours of the garment on the diagram**

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