

RENTAL REQUEST FORM: LX9 *(Sequential intermittent pneumatic compression)*

Email, fax or post this completed form to Medi-Rent and call us with payment details to complete your order.
For latest pricing visit www.medirent.com.au

1. ORDER DETAILS

Date Requested

Required Delivery Date

Clinician

1. Courier to: *(Fees apply)*

Clinician's address

Phone No.

2. PATIENT DETAILS

Patient

DOB

2. Courier to: *(Fees apply)*

Patient's Address

Email

Home phone

Mobile

or 3. Home set-up Sydney Metro *(Premium service fees apply)*

3. BILLING INFORMATION

Who is paying?

Hospital

Client

LX9 REQUIREMENTS

Clinicians must complete this section for prescribed settings and garments and provide to your patients

TREATMENT OPTIONS

Mode - A Pre-Treatment	Pre-clearing of proximal area in prep for sequential fluid drainage	Pressure Range 10 - 140mmHg
Mode - B Classic Sequential	Fluid is moved sequentially distally to proximally	
Mode - C Distal oedema	Four compressions on distal chamber before inflating sequentially	Session Duration 5 - 90 minutes, or continuous
Mode - D Wave	Garment fills two chambers at any one time in a wave formation, followed by classic sequential	Cycle Speed 1 - 6 (slowest - fastest)

PRE-TREATMENT MODE A*

MODE B

**Mode A automatically switches to B mode after 6 cycles or approximately 12 mins. The treatment time you request pertains to the subsequent automatic B mode that follows.*

MODE C

MODE D

Pressure: -----

Session duration: -----

Speed: -----

GARMENTS

Our staff will determine sizing dependent on the measurements you fill out overleaf

Garment/s reqd:

Trunk

Arm-vest

One leg

Two legs

Arm sleeve

MEASUREMENTS

Measure your patient in relevant areas to determine sizing

1. LEG GARMENT

1a. Inner leg length - from groin to heel: cm
This determines size of garment S/M/L.
(Only one measurement needed)

1b. Widest thigh circumference:
Left cm Right cm

1c. Widest calf circumference:
Left cm Right cm

2. TRUNK GARMENT

2. Widest abdominal circumference: cm

3. ARM SLEEVE OR ARM-VEST

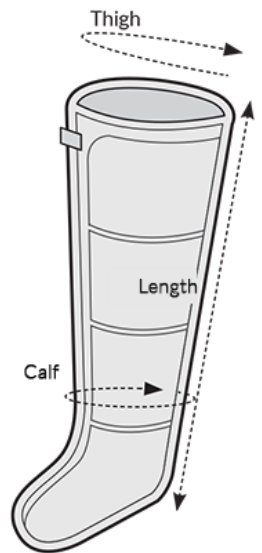
3a. Widest upper arm circumference (from under armpit): cm
3b. Widest chest/bust circumference: cm
(Arm-Vest only)
3c. Length of arm from armpit to fingertip: (Arm-sleeve only) cm

1. OVERLAPPING LEG GARMENT

Garment sizes come in S/M/L with circumference options of Standard/Wide/X-Wide. Medi-Rent customer service will determine the best size based on the measurements provided.

Largest sizes we can accommodate in LX9 leg garments:	
Leg length	89 cm
Thigh circumference	102 cm
Calf circumference	88 cm

If you have a leg measurement greater than one of the measurements above you may need to consider custom-made Biocompression leg garments. Please note these custom garments cannot be rented and use the Biocompression pump. See our Biocompression referral sheet.

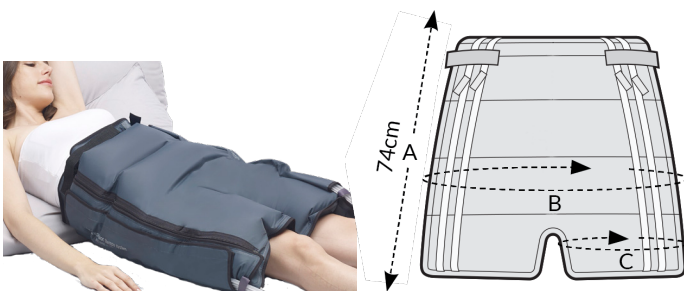


2. TRUNK GARMENT

One size with 3 built-in zippers

	B	C
Circumference on widest fitting*	133 cm	74 cm
+ 1 pair extensions	153 cm	84 cm
+ 2 pairs extensions	173 cm	94 cm
+ 3 pairs extensions	193 cm	104 cm

* Three built-in zippers mean this garment can be made smaller than the measurements listed here



3. ARM OR ARM-VEST GARMENT

		Largest fitting
A	Widest upper arm circumference	52cm (arm-vest) 60cm (arm-sleeve)
B	Widest chest circumference	142cm
C	Longest arm for full finger coverage	68cm

