

# Measuring Guidelines for TributeNight Facial Units



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## Positioning Your Client When Measuring for Facial Garments

TributeNight garments are most commonly worn while the client is sleeping, however, clients with facial swelling may be measured in a seated posture.

### Measuring:

Please record the needed measurements in the designated areas on the Facial Order Form.

- A:** Measure the length from one ear tip to the other.
- B:** Measure the head circumference at the temple line or largest part.
- C:** Measure the distance from the outside crease of the right eye to the outside crease of the left eye.
- D:** Measure the length of the nose.
- E:** Measure the length at the midline from the nose to the upper lip.
- F:** Measure the length at the midline from the lower lip to the chin.
- G:** Measure the length from the sterno-clavicular notch to the chin. Follow the contour with chin in relaxed posture.
- H:** Measure from the right ear lobe to the right nostril.
- I:** Measure from the left ear lobe to the left nostril.
- J:** Measure the distance from the right TMJ to the chin.
- K:** Measure the distance from the left TMJ to the chin.
- L:** Measure the length from the right ear lobe to the HPS (High Point of Shoulder).
- M:** Measure the length from the left ear lobe to the HPS.
- N:** Measure the neck circumference.



Body Works  
Compression

# TributeNight Facial Order Form

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**SHIP TO:**

Attn: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-Mail for Shipping Notification: \_\_\_\_\_

**BILL TO:**

Attn: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Account # \_\_\_\_\_

PO # \_\_\_\_\_

CC # \_\_\_\_\_ Exp \_\_\_ / \_\_\_

If we have a question, whom should we contact? \_\_\_\_\_

Contact Phone #: \_\_\_\_\_

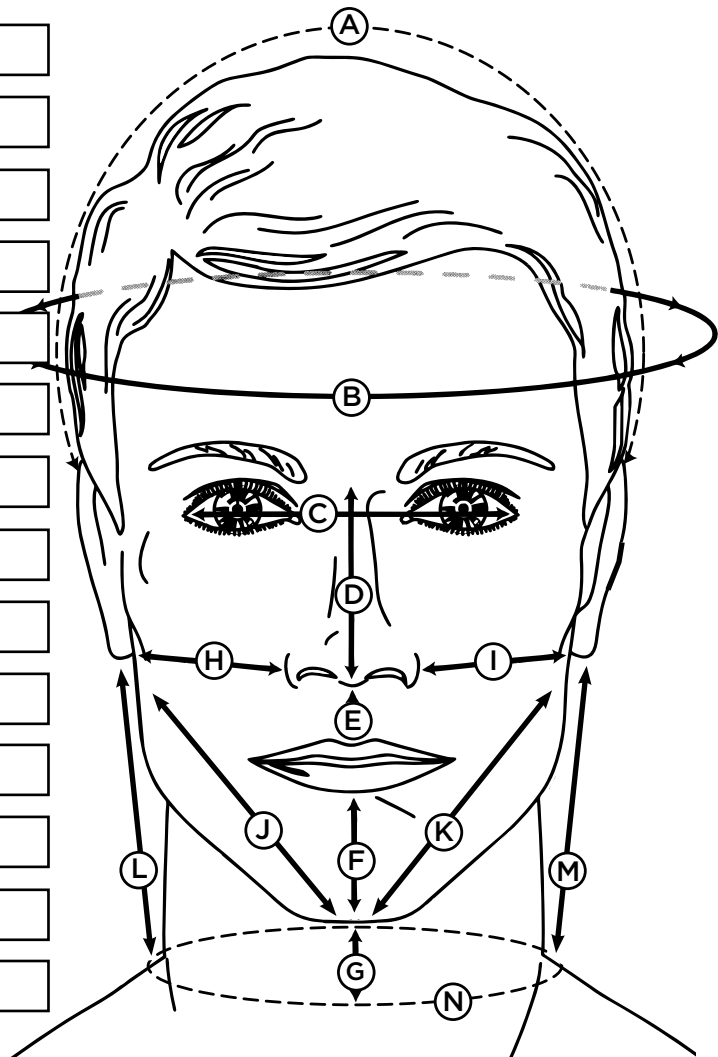
Client Name or Order Reference #: \_\_\_\_\_

DX  457.1  457.0  Other \_\_\_\_\_

Age \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

For Solaris Internal Usage: \_\_\_\_\_

- A=
- B=
- C=
- D=
- E=
- F=
- G=
- H=
- I=
- J=
- K=
- L=
- M=
- N=



Denote with Hash Marks /// Areas of Scarring or Fibrosis on Diagram.		
QTY	UNIT	PRICE
	Garment Code: FN-	
	Garment Code: FN-	
	Lip Bridge	N/A
	Trach Modification (no additional charge)	N/A
	Priority Production Fee	
	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

**TOTAL:** \_\_\_\_\_

Comments: \_\_\_\_\_

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