



## GBA-3045-M-2 Bio Pants

This 8 chamber all-in-one pant offers a unique design covering the entire lower body. The garment addresses not only lower extremities, but the difficult to treat areas of the groin, buttocks and abdomen. This garment is designed to redirect tissue fluid movement from the foot all the way to the auxiliary nodes and thoracic duct for drainage while creating new channels. Sizing is not a problem for this garment, each patient is custom fitted to insure an ideal treatment is delivered each and every time. With two front zippers and easy to use pull-up straps, this garment is simple to don and doff for every single patient.

SUPPLY ITEMS			
MODEL #	SIZE	TRUNK	FULL LEGS
GBA-3045-S-2	S	E0656	E0667
GBA-3045-M-2	M	E0656	E0667
GBA-3045-L-2	L	E0656	E0667

The Bio Pants provide the best possible solution for the most difficult conditions.



### Benefits:

- Reduces Pain
- Improves Lymphatic and Vascular Flow
- Promotes Wound Healing
- Prevents Infection
- Provides Effective Prophylaxis for Venous Thrombosis
- Reduces Dynamic Edema

### Secondary Lymphedema:

- Lymph Node Dissection
- Lymph Node Obstructions
- Surgical Damage to the Lymph Vessels and/or Nodes
- Radiation Therapy
- Trauma

Indications are not limited to the above, others may be determined by the treating physician.

### Prescription Required



### Key Features:

- Full Lower Body Coverage
  - Bi-lateral Legs
  - Groin
  - Buttocks
  - Abdomen
- Custom Fit
- Comfortable Foot Design
- Easy to Don and Doff
- Directional Tissue Fluid Movement





PHONE: 201-939-0716  
 800-888-0908 / FAX: 201-939-4503  
 www.biocompression.com

**INSTRUCTIONS: MEASURE THE CIRCUMFERENCE OF THE LEG USING A STANDARD MEASURING TAPE. BE SURE TO FILL IN ALL MEASUREMENTS . (#1 through #12 )**

**NOTE:** Please indicate in proper anatomical area below, any additional unusual measurements pertinent to the fitting. When measuring patients please write the exact measurements on this form below. The additional inches/centimeters for the proper fit will be added by production personnel at Bio Compression when manufacturing garments. Please send pictures if possible, it helps in the design of the pants.

Custom Sleeve Order Form Bio Pants

UPPER ABDOMEN  
 (MEASURE CIRCUMFERENCE AROUND)

10. ( )

LOWER WAIST  
 (MEASURE CIRCUMFERENCE AROUND)

11. ( )

THIGH BELOW CROTCH

1. (L R )

MID THIGH

2. (L R )

KNEECAP

3. (L R )

MID CALF

4. (L R )

ANKLE

5. (L R )

ARCH (INSTEP)

6. (L R )

Maximum size at torso is  
 100" in/254cm circumference

Maximum size per  
 leg is 50" in/127cm  
 circumference

**TYPE OF MEASUREMENTS:**

INCHES  CENTIMETERS

UPPER ABDOMEN LENGTH FROM TOP OF  
 ABDOMEN TO CROTCH

**NOTE:** This is a STRAIGHT VERTICAL measurement. It is best to measure the patient from the side at the top of the thigh to the upper abdomen.

9. ( )

LENGTH OF LEG FROM  
 HEEL TO CROTCH

8. (L R )

LENGTH FROM  
 CENTER OF  
 KNEECAP TO HEEL

7. (L R )

**NOTE:** In cases when an abrupt change in width (circumference) occurs, i.e.: a "Flap", "Roofing; etc., draw a vertical and horizontal line (see #7 & #8) indicating length from heel to specific point.

LENGTH OF FOOT

12. (L R )

Qty Ordered \_\_\_\_\_ Ordered by \_\_\_\_\_ P.O.# \_\_\_\_\_ Pump \_\_\_\_\_

Company Name

Authorized Person \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Phone # \_\_\_\_\_ E-mail: \_\_\_\_\_

Special Instructions/Ship to: \_\_\_\_\_