



PROVIDER	Date	MONTH	DAY	YEAR		
	Name					
	Location	IF APPLICABLE				
PATIENT	Last Name					
	First Name					
	Date of Birth	IF APPLICABLE				
	Prescription #	Patient - Attach Prescription for Insurance Eligibility				
	Diagnosis	☐ I97.2 POSTMASTECTOMY LYMPHEDEMA SYNDROME ☐ Q82.0 HEREDITARY LYMPHEDEMA ☐ I89.0 LYMPHEDEMA NOT ELSEWHERE CLASSIFIED ☐ I97.89 OTHER POSTPROCEDURAL COMPLICATIONS & DISORDERS OF THE CIRCULATORY SYSTEM, NOT ELSEWHERE CLASSIFIED				
HUGGER REFERRAL	HuggerPRIMA	☐ DAY ☐ NIGHT ☐ BOTH	QUANTITY: ☐ 1 ☐ 2 ☐ 3	☐ PrimaEXTENDER	SIZE	
	HuggerVIDA	☐ DAY ☐ NIGHT ☐ BOTH	QUANTITY: ☐ 1 ☐ 2 ☐ 3	☐ VidaEXTENDER	SIZE	
	HuggerLUMA	☐ DAY ☐ NIGHT ☐ BOTH	QUANTITY: ☐ 1 ☐ 2 ☐ 3		SIZE	
	HuggerARIA	☐ DAY ☐ NIGHT ☐ BOTH	QUANTITY: ☐ 1 ☐ 2 ☐ 3		SIZE	
	Reason for Garment	☐ NEW REQUEST ☐ CHANGE IN MEDICAL OR PHYSICAL CONDITION ☐ WORN OUT DUE TO NORMAL WEAR AND TEAR ☐ DUE TO LOSS, THEFT OR IRREPARABLE DAMAGE ☐ ACCESSORIES NEEDED - REASON IN NOTES SECTION REQUIRED				
	Notes					

Send with Patient or to applicable facility for garment purchase and insurance coordination.

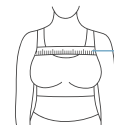
Hugger FIT CHART

BAND (IN)	BAND (CM)	HUGGER	EXTENDER PRIMA & VIDA only
26-28	66-71	XS	
30-32	76-81	S	M
34-36	86-91	M	M
38-40	96-102	L	L
42-44	107-112	XL	L
46-48	117-122	2XL	L
50-52	127-132	3XL ARIA ONLY	L



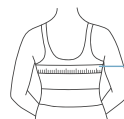
Just one measurement!

FIT TIPS



Above the chest

In between sizes?
HuggerPRIMA: upsize one size. All other Huggers: downsize one size.



Around the back

DD cup or higher?
HuggerPRIMA & LUMA: upsize one size.



Add an Extender!

Need Flexibility?
+ Add an extender to flex your fit & size up your HuggerPRIMA & VIDA by one size.



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