

# FOOT MEASUREMENTS

## TOE/JAPANESE FOOT GLOVE - 5C



**Therapist  
Support  
Laboratory**

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Knee End

Left	Centimetres	Right
	16	
	12	
	8	
	4	
	<b>Heel</b>	
	-4	
	-8	
	-12	
	-16	
Left	Centimetres	Right

**A hand/Foot Outline Form showing full toe length's and web heights is required for each foot. Indicate open tip length if required.**

Patient Name \_\_\_\_\_

OT/Physio name \_\_\_\_\_

Diagnosis \_\_\_\_\_

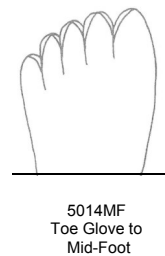
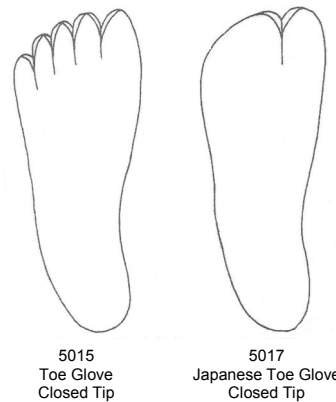
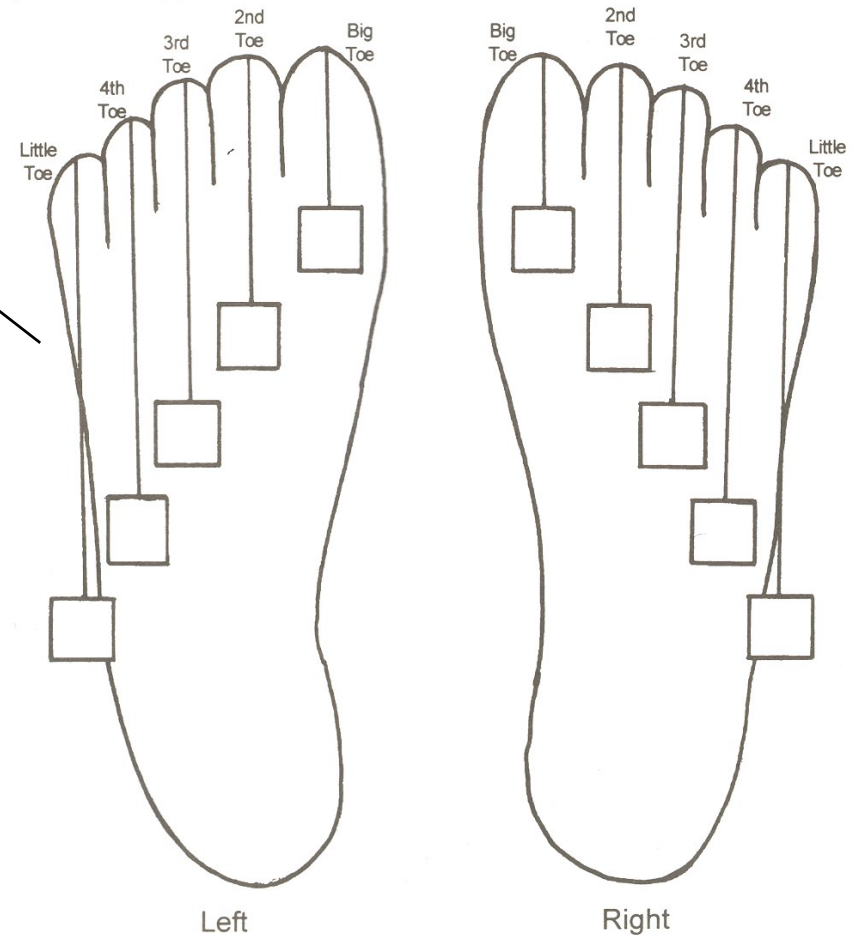
Date \_\_\_\_\_

**M**

**F**

**Age** \_\_\_\_\_

**Place toe I.P. circumferences in the boxes provided in foot diagrams**



Foot End

Garment Descriptions	Qty Left	Qty Right	Item No
Toe glove open tip			5014
Toe glove closed tip			5015
Japanese toe glove open/Closed tip			5016
Toe Glove to Mid-Foot			5014MF
Slants			6009
Lining heel			6005
Lining dorsum of ankle			6007
Zipper under 25cm (show position)			6010
Zipper over 25cm (show position)			6011
Padding/Lining under zipper < 25cm			6010L
Padding/Lining under zipper >25cm			6011L
Lining (show position)			6001
Velcro tabs (show position)			6012
Silipos Lining			6024
Silon Tex Lining			60241