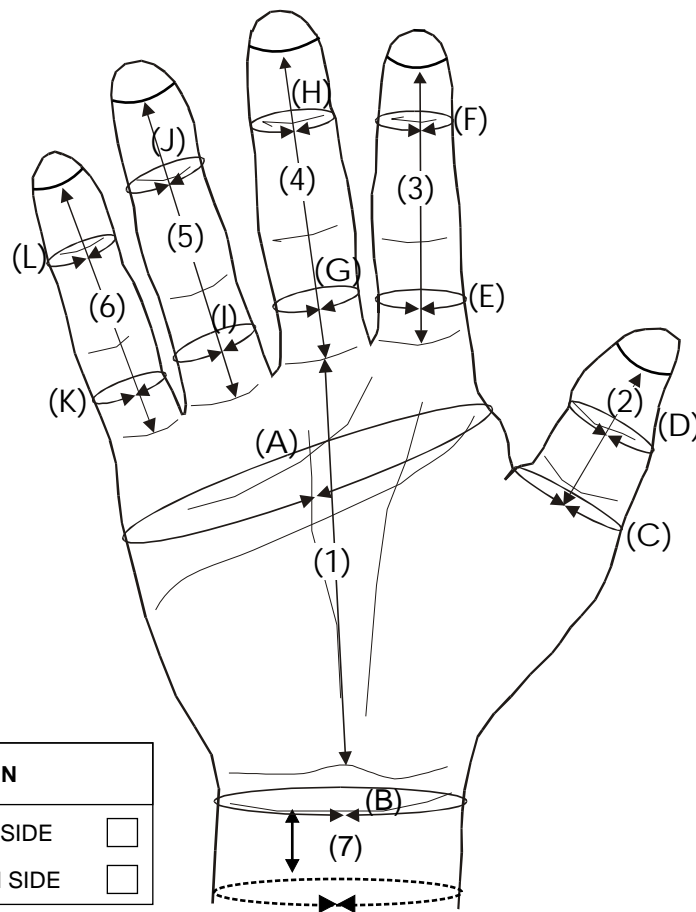


INSTRUCTIONS

(PLEASE READ THE FOLLOWING INSTRUCTIONS CAREFULLY BEFORE FILLING IN THE MEASUREMENT.)

1. Fill in all the measurements in CENTIMETER
2. Take all the measurements on Bare Skin (i.e without the bandages.)
3. Note that measurement (A) to (L) are Circumferences and measurements (1) to (6) are lengths.
4. For length measurements keep the palm and fingers straight
5. Mention any deformities in the Any Additional information" column.
6. Use ordinary measuring tape.



DESIGN OPTION	
1. ZIPPER ON PALMER SIDE	<input type="checkbox"/>
2. ZIPPER ON DORSAM SIDE	<input type="checkbox"/>

CIRCUMFERENCE

	LT	RT	
(A) PALMER CREASE	<input type="text"/>	<input type="text"/>	cms.
(B) WRIST CREASE	<input type="text"/>	<input type="text"/>	cms.
(C) BASE OF THUMB	<input type="text"/>	<input type="text"/>	cms.
(D) D.I.P THUMB	<input type="text"/>	<input type="text"/>	cms.
(E) BASE OF I. FINGER	<input type="text"/>	<input type="text"/>	cms.
(F) D.I.P INDEX FINGER	<input type="text"/>	<input type="text"/>	cms.
(G) BASE OF M. FINGER	<input type="text"/>	<input type="text"/>	cms.
(H) D.I.P MIDDLE FINGER	<input type="text"/>	<input type="text"/>	cms.
(I) BASE OF R. FINGER	<input type="text"/>	<input type="text"/>	cms.
(J) D.I.P RING FINGER	<input type="text"/>	<input type="text"/>	cms.
(K) BASE OF L.FINGER	<input type="text"/>	<input type="text"/>	cms.
(L) D.I.P LITTLE FINGER	<input type="text"/>	<input type="text"/>	cms.
(M) ABOVE WRIST CIRCUMFERENCE	<input type="text"/>	<input type="text"/>	cms.

LENGTH

	LT	RT	
(1) PALM LENGTH	<input type="text"/>	<input type="text"/>	cms.
(2) THUMB LENGTH	<input type="text"/>	<input type="text"/>	cms.
(3) I. FINGER LENGTH	<input type="text"/>	<input type="text"/>	cms.
(4) M. FINGER LENGTH	<input type="text"/>	<input type="text"/>	cms.
(5) R. FINGER LENGTH	<input type="text"/>	<input type="text"/>	cms.
(6) L. FINGER LENGTH	<input type="text"/>	<input type="text"/>	cms.
(7) L. WRIST LENGTH	<input type="text"/>	<input type="text"/>	cms.

ANY ADDITIONAL INFORMATION

MAIL THIS FORM AND D.D. OF THE APPROPRIATE AMOUNT TO :
NORMA D.N.D. PRODUCTS PVT. LTD.
NORMA Complex, D.D.A. Mkt., J-Block, Vikas Puri, N.Delhi - 110 018,
PH: 2854-1111(5 Lines), 98182 99999(5 Lines)FAX : 011-28541122
E-mail: normadnd@vsnl.com Website: www.normadnd.com

