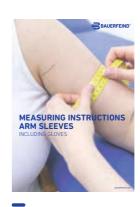


LYMPHOLOGICAL MEASUREMENTS WE WILL SUPPORT YOU

Customers with disorders of the lymphatic system need your particular attention because treating lymphological conditions is a specialist area within compression therapy requiring a high level of expert knowledge. The products ensure that as little fluid as possible accumulates in the extremities, thus preventing severe swelling. To guarantee successful treatment outcomes with medical compression stockings, the patient has to be measured correctly. These guidelines are intended to help you with this task. We also recommend the following supplementing brochure:



Measuring instructions for arm sleeves including gloves Item no. 271 4210 2021 003

GENERAL INFORMATION ABOUT MEASUREMENTS:

- Definition of circumference measurement:
- Phlebological measurement = measurement next to the skin
- Light lymphological tension = usually with soft tissue:
- up to initial skin resistance
- for cD and when measuring the edging
- Firm lymphological tension = usually with firm (taut) tissue
- Measurements are ideally taken after lymphatic drainage
- Photo documentation is helpful in difficult cases
- Do not measure in skin folds



Measure next to the skin





Light lymphological tension



Firm lymphological tension

MEASUREMENTS FOR LYMPHOLOGICAL STOCKINGS

Left leg

ℓK2 /**ℓ**G

ℓK1-**ℓ**T

(Front panty area)



MEASUREMENT INSTRUCTIONS

Right leg

 ℓ H

ℓF

€E

 ℓ D

€C

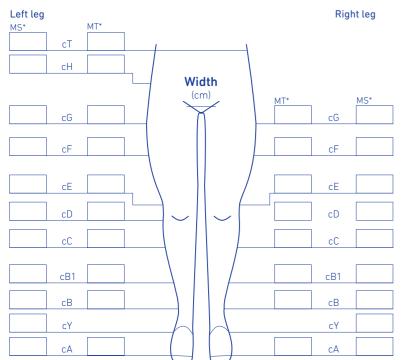
ℓB1

ℓK2 /**ℓ**G

ℓK2−**ℓ**T

(Rear panty area)

Length





DOWNLOAD:

Lymphology order sheets: Order sheet for custom-made VenoTrain curaflow products - leg https://www.bauerfeind-group.com/en/service/downloads

1 MARKING LEG MEASURING POINTS

Marking measuring point A (inside)

- Medial side: base of the big toe
- With light pressure, run the pen from the big toe toward the ball of the toes → look for the suspension point!
- Alternatively: second big toe fold with bent toe



Marking measuring point A (outside)

- Lateral side: base of the little toe
- With light pressure, run the pen from the little toe toward the midfoot
- → look for the suspension point!
- Alternatively: little toe fold with bent toe



Marking measuring point B

• One finger width above the medial malleolus



Marking measuring point D

- Two finger widths below the patella
- Alternatively: put your hand into the back of the knee from the medial side and follow the knee fold Put the mark one finger width below the knee fold extending to the medial side







1 MARKING LEG MEASURING POINTS

Marking measuring point B1

- Determine the distance between B and D using a lymphological tape measure, then divide into three equal sections
- B1: lower third

Marking measuring point C

- Determine the distance between B and D using a lymphological tape measure, then divide into three equal sections
- C: upper third



Marking measuring point E

• One finger width above the patella



Marking measuring point G

• Two finger widths below the crotch



Marking measuring point F

• Determine the distance between E and G using a lymphological tape measure, then divide into two equal sections



2 LEG CIRCUMFERENCE MEASUREMENT

Measuring point cY

- Circumference around the heel and instep in dorsiflexion with tensed tendons
- · Measure next to the skin
- Do not measure with tape tightened

Special request: 90° heel

• For patients who are immobile, sit a lot and patients with a pronounced heel

Special request: instep widening

• For patients with excess tissue over the anterior ankle region

- Measure next to the skin Measure with firm
- lymphological tension

Measuring point cB



Measuring point cB1

- Measure next to the skin
- Measure with firm lymphological tension





Measuring point cC

- · Measure next to the skin
- Measure with firm lymphological tension





Measuring point cD

- Measure next to the skin
- Measure with light lymphological tension

Special request: slanted edging on the side

Always recommended





2 LEG CIRCUMFERENCE MEASUREMENT

Measuring point cE

- Measure next to the skin
- Measure with firm lymphological tension

Special request: without anatomical knee (knee ellipse)

• For patients with pronounced tissue around the knee, with a sudden change in knee diameter or padding at the back of the knee





Measuring point cF

- Measure next to the skin
- Measure with firm lymphological tension





Measuring point cG

- Ask the patient to stand up from lying down
- Position the lymphological tape measure along the gluteal fold, not on the marking!
- Measure next to the skin
- Measure with
- firm lymphological tension for AT
- light lymphological tension for AG

Special request: slanted edging on the side

Always recommended

Special request: higher leg at the front for anatomical shape

- Always recommended
- Only available with slanted edging









Measuring point cH

- At the widest part of the buttocks
- Measure next to the skin
- Measure with firm lymphological tension





Measuring point cT

- Ideally, look for the anatomical suspension point or below the breast
- Should be above the navel → Drainage divide
- Measure next to the skin
- Measure with light lymphological tension; use phlebological measurement, if required





Measuring point cA

- With full weight on foot
- Measure next to the skin (from marking to marking)
- Measure with light
- lymphological tension

 Caution! Foot shape must not change

Special request: hallux

 For patients with pronounced hallux for pressure relief in the hallux region







Special request: anatomical foot (measuring points cA1 and lA1)

- · Circumference in the widest or narrowest area of the midfoot
- Measure with phlebological to light lymphological tension
- Length from heel to midfoot along the medial side

Please note: Measuring point A1 is positioned differently if a toe cap is required









3 LEG LENGTH MEASUREMENT

Measuring points IZ, IAi, IA

• IZ:

Entire length of foot: distance from heel to end of big toe or second toe



lAi:
 Length of medial foot side: distance from heel to big toe skin fold



Length of lateral foot side: distance from heel to little toe



Measuring point lB

- Measured along the medial side
- Perpendicular from the sole of the foot to marking B



Measuring point lB1

- Measured along the medial side
- Perpendicular from the sole of the foot to marking B1



Measuring point IC

- Measured along the medial side
- Perpendicular from the sole of the foot to marking C



Measuring point ID

- Measured along the medial side
- Perpendicular from the sole of the foot to marking D



Measuring point LE

- Measured along the medial side
- Perpendicular from the sole of the foot to marking E



Measuring point IF

- Measured along the medial side
- Perpendicular from the sole of the foot to marking F



3 LEG LENGTH MEASUREMENT

Measuring point lK1

- Measured from the front
- Perpendicular from the sole of the foot to the groin at the level of the pubic bone (halve the thigh, then halve it again)

TIP: Position the tape measure with the zero on the groin and include the front panty area height in your measurement.



Measuring point lK1 – lT (front panty area)

- Measure next to the skin
- From K1 to panty area edging T



Measuring point LG / LK2

- Measured from the back
- Perpendicular from the sole of the foot to the gluteal fold

TIP: Position the tape measure with the zero on the gluteal fold and include the rear panty area height in your measurement.



Measuring point lK2-lT (rear panty area)

- Measure next to the skin
- From the gluteal fold to the panty area edging $\ensuremath{\mathsf{T}}$
- Ask the patient to bend forward



Measuring point lH

- Measured along the lateral side
- Perpendicular from the sole of the foot to the widest part of the buttocks



Measuring point lT

- Measured along the lateral side
- Perpendicular from the sole of the foot to the panty area edging



VISCOELASTIC PELOTTES

Measuring point P1

 Circumference from the medial malleolus to the lateral malleolus via the Achilles tendon

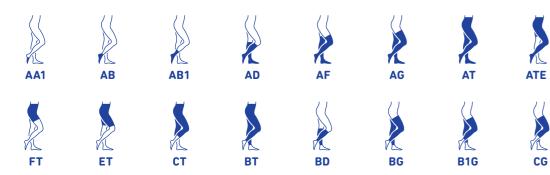
Measuring point P2

 Circumference from the medial malleolus to the lateral malleolus via the sole of the foot



STOCKING DESIGNS

CUSTOM-MADE SOLUTIONS





VenoTrain® curaflow AT with open foot



VenoTrain® curaflow AG with silicone dotted band



VenoTrain® curaflow AG with slanted edging



VenoTrain® curaflow AD



VenoTrain® curaflow AD with diagonal, closed toe



VenoTrain® curaflow with 90-degree heel

MULTI-PART COMPRESSION STOCKINGS

REASONS FOR MULTI-PART COMPRESSION STOCKINGS:

1. Patient benefits:

- Easy to put on
- · Easier everyday handling

2. Benefits from a therapist's point of view:

- Individual treatment options in problematic areas
- · Increased stiffness and therefore higher compression

GENERAL INFORMATION ABOUT MEASUREMENTS:

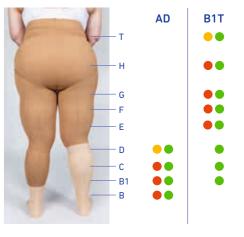
- The patient must be able to wear only the lower part of the product. That is why the relevant measurements are taken according to the standard method.
- For straight bottom edging such as for BT or ET, the lower circumference is measured next to the skin only. Alternatively, a few cm can be added.
- · In areas that overlap and are not suitable for double compression, only measurements next to the skin are taken for the uppermost product.
- · If double compression is required, measure the overlapping area at your own discretion with light tension.

EXAMPLES OF MULTI-PART COMPRESSION STOCKINGS:

No double compression

AD with B1T pantyhose

- AD stocking
- Measure next to the skin
- · Measure with tape tightened / slightly tightened
- B1T pantyhose
- Measure next to the skin only from B1 to D
- from E standard method-Measure next to the skin and with tape tightened



Double compression

AD with B1T pantyhose

- AD stocking
- Measure next to the skin
- · Measure with tape tightened / slightly tightened
- B1T pantyhose
 - · Measure next to the skin only at B1
- C to D-Measure next to the skin and with tape slightly tightened depending on the edema (tape should only be slightly tightened)
- From E standard method -Measure next to the skin and with tape tightened



No double compression

AG with ET pantyhose

- AG stocking
- Measure next to the skin
- · Measure with tape tightened / slightly tightened
- ET pantyhose
- Measure next to the skin only from E to G
- from H standard method Measure next to the skin and with tape tightened/slightly tightened



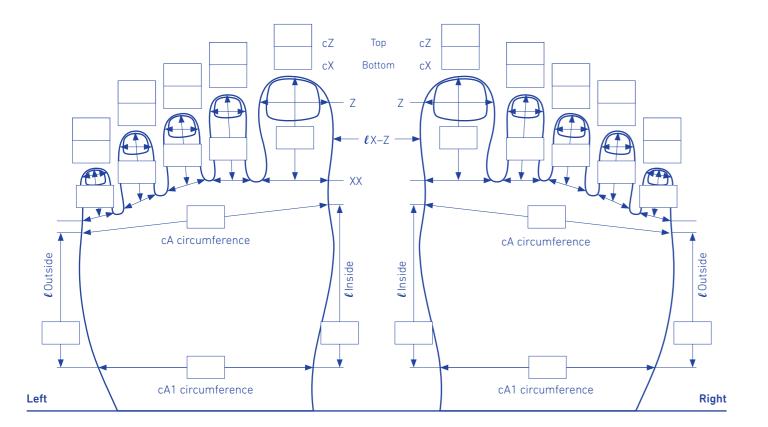


with open toe

MEASURING FOR LYMPHOLOGICAL TOE PRODUCTS



VIDEOS WITH MEASUREMENT INSTRUCTIONS



DOWNLOAD:

Lymphology order sheets: Order sheet for custom-made VenoTrain curaflow products — toe cap

https://www.bauerfeind-group.com/en/service/downloads

1 MARKING TOE CAP MEASURING POINTS

Marking measuring point A (inside)

- Medial side: base of the big toe
- With light pressure, run the pen from the big toe toward the ball of the toes
 - \Rightarrow look for the suspension point!
- Alternatively: second big toe fold with bent toe



Marking measuring point A (outside)

- Lateral side: base of the little toe
- With light pressure, run the pen from the small toe toward the midfoot
 - → look for the suspension point!
- Alternatively: little toe fold with bent toe



Marking measuring point A1

 Mark the inside and outside of the foot Please note: The toe cap should not finish on the head of the fifth metatarsal



Marking the toes 1-5 X

• Mark all bases of the toes with the toe and finger tape measure

Tip: Push the tape measure all the way to the web and put the mark toward the body. This will ensure that the toe cap will not be too long or too short in the toe area.





2 TOE CAP CIRCUMFERENCE MEASUREMENT

Measuring points for toes 1 – 5 cX and cZ

- Measure next to the skin with millimeter precision
- cX = proximal circumference measurement
- On the marking
- cZ = distal circumference measurement
- Middle of the toenail
- cX measurement must not be less than cZ; if necessary, adapt it to the cX measurement
- The fifth toe (little toe) should only be covered by the stocking in exceptional cases (in the event of edematous swelling), but it must be measured anyway!









Measuring points cA and cA1

- Ask the patient to stand up from lying down
- With full weight on foot
- cA Measure next to the skin (from marking cA to marking cA)
- cA1 Measure next to the skin (from marking cA1 to marking cA1)









3 TOE CAP LENGTH MEASUREMENT

Measuring points IX-IZ

- Measure the length with millimeter precision
- From marking X to the end of the toenail



Measuring point l outside and l inside

- With full weight on foot
- I Outside Measure the length of the small toe fold marking (A) to the marking at the end of the toe cap (A1)
- I Inside Measure the length of the big toe fold marking (A) to the marking at the end of the toe cap (A1)





VenoTrain® curaflow Seamless toe cap



VenoTrain® curaflow Toe cap with seam

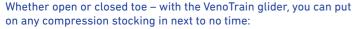


VenoTrain® curaflow with sewn-on toe loops

DONNING HELPERS AND ACCESSORIES:

PRACTICAL DONNING AID

VenoTrain glider is a practical aid for putting on and taking off medical compression stockings. This useful aid made of silicone-coated polyamide makes it easy to slide the stocking (or sleeve) over the leg (or arm). It is compact, time-saving and reusable, meaning that the VenoTrain glider is also ideal for traveling.



- Position the non-slip foam base on the floor with the tip pointing forward
- 2. Place the VenoTrain glider on top of the base with the white side up.
- 3. Place the toes in the marked semicircle, then push the foot gently forward.
- 4. Let the foot glide into the donning aid.
- 5. Smooth the compression stocking, together with the VenoTrain glider, upward over the foot (starting, as usual, from the toe). The stocking can now easily be put on the leg.
- 6. Finally, using the tape, pull the VenoTrain glider up out of the stocking.







VENOTRAIN® DONNING GLOVES

These rubber gloves make putting on and taking off VenoTrain compression stockings particularly easy. Thanks to the gripping surface, the knitted fabric is easy to smooth out evenly across the leg. At the same time, the stockings are protected from damage (e.g. caused by fingernails) more effectively. Combined with the VenoTrain glider, the Bauerfeind rubber gloves are the perfect solution for easy and correct donning and doffing of compression stockings.



BAUERFEIND CARE FOAM*

- Protects and soothes the skin using panthenol, without leaving oily residues.
- Compression stockings can be put on more easily and provide additional support.
- Forms an invisible protective layer to guard against germs and fungi
 Regulates and stabilizes: the skin returns to
- its normal state and becomes smoothEspecially suitable for patients with diabetes or allergies
- Care foam for use in the morning
- With this care foam, Bauerfeind is expanding its range of care products to allow for different skin types and requirements.



VENOTRAIN® LOTION*

This intensive care product for dry skin was developed in cooperation with Sebapharma. The gentle care lotion is based on an oil-inwater mixture with chamomile extract and allantoin. VenoTrain lotion ensures a natural moisture balance that can be felt straight away:

- Noticeably increased elasticity
- Stabilization of the skin's acid mantle
- Relieves feelings of tension and itching

For use in the evening after taking off the stockings



CARING FOR MEDICAL COMPRESSION STOCKINGS:

- · Avoid ironing and dry-cleaning.
- Increase the useful life of compression stockings by hand-washing them daily or using a gentle machine wash cycle (please note the care instructions on the label of the stockings).
- The product can be tumble-dried provided a delicate cycle is chosen (refer to the information on the label).
- However, direct heat must be avoided (radiators, sunshine).
- Use a mild detergent only and avoid the use of additives like fabric softener, optical brighteners or stain removers
- Please wipe the silicone top band on the inside once a day with a damp cloth.
- Store the VenoTrain compression stockings in a dry place away from direct light.

VENOTRAIN® DETERGENT*

FOR THE DAILY CARE OF COMPRESSION STOCKINGS

Gentle and highly efficient cleaning for all stockings: this special liquid detergent has a fresh, pleasant scent and lasts for at least 10 washes per bottle. Also suitable for use in washing machines. Caution: Never use fabric softener because this can impair the medical effectiveness of compression stockings.

- Gentle care
- Lasting protection
- For all elastic textile materials

MASCHMITTE ESSIVE LIQ. MASMIDDEL

VENOTRAIN® LINGERIE BAG

Secure protection in the washing machine: the zip-up bag made from a durable and particularly fine mesh helps with the sorting of laundry and offers reliable protection against runs and snags in compression stockings.

- Hard-wearing
- For 1–2 pairs of stockings



^{*} only available in selected countries

YOUR OWN NOTES



Do you have any questions, suggestions or requests? Just get in touch:

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