



corecompassion®
— PROJECT —

Core Compassion Project Application for Lymphedema Specialist for Lymphediva LLC sleeve

Guidelines:

1. Any person who has been diagnosed with breast cancer and is at risk for lymphedema or has lymphedema in the arm and/or hand may apply.
2. Applicant must complete the application in its entirety with physician or lymphedema specialist signature and attach it to the Type Form application online.
3. Applicant can assist in choosing color of sleeve based on choices listed in medical release form below.
4. Applicant must be measured or have been measured by a lymphedema specialist.
5. Types of expenses covered are purchase of one solid sleeve per calendar year, not to exceed 3 total sleeves during the lifetime of the program.
6. Applicant may apply once per calendar year and may not be approved by the program for more than 3 total sleeves during the lifetime of the program.
7. If approved, the sleeve will be ordered based on the information provided below and shipped directly to you from Lymphediva LLC
8. For questions regarding sizing, please refer to the sizing chart at lymphedivas.com/size-fit; call Lymphedivas LLC customer service line at 866-411-3482; or email info@lymphedivas.com
9. For questions regarding returns and/or the application process, please email sleeves@corecompassionproject.org



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Referring Physician and/or Oncology Care Team Information (**required**) - this box is for physician or Lymphedema Specialist use only:

Sleeve Information - please circle one for each category below based on patient preference and appropriate sizing (solid sleeves provided only).

Type: Sleeve Sleeve with glove Sleeve with gauntlet

Compression Class: Class 1(20-30 mmHg) Class 2(30-40 mmHg)

Color: Bei Chic Onyx Mocha Fuchsia White Navy

Size: Small Medium Large

Length: Short Tall

Diva Diamond Band: With Without

Name: _____

Practice Address: _____

Clinician Signature: _____