

BILL TO ACCOUNT # _____	SHIP TO ACCOUNT # _____	PATIENT INFORMATION: _____	WORKCOVER STATE <input type="text"/>
		OHS <input type="checkbox"/> PRIVATE <input type="checkbox"/>	CLAIM NO. <input type="text"/>

NAME: _____	NAME: _____	FIRST NAME: _____
ADDRESS: _____	ADDRESS: _____	LAST NAME: _____
PHONE: _____	PHONE: _____	CLINICIAN CONTACT: _____
	SAME AS PER BILL TO ADDRESS: <input type="checkbox"/>	PURCHASE ORDER: _____
		DATE REQUIRED: _____

NEW ORDER: <input type="checkbox"/>	REPAIR: <input type="checkbox"/>	REMAKE: <input type="checkbox"/>	ORIGINAL SERIAL NUMBER: <input type="text"/>
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AUDIOGRAM		Hz	250	500	750	1K	1.5K	2K	3K	4K	6K	8K
RIGHT	AC											
	BC											
LEFT	AC											
	BC											

Insert Phones      Headphones

<b>BTE Colour</b> <input type="radio"/> standard BTE <input type="radio"/> power BTE (Omni)	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Colour</th> <th>R</th> <th>L</th> </tr> </thead> <tbody> <tr><td>Beige</td><td></td><td></td></tr> <tr><td>Dark Brown</td><td></td><td></td></tr> <tr><td>Grey</td><td></td><td></td></tr> <tr><td>Black</td><td></td><td></td></tr> </tbody> </table>	Colour	R	L	Beige			Dark Brown			Grey			Black		
Colour	R	L														
Beige																
Dark Brown																
Grey																
Black																

CUSTOM INSTRUMENTS	RIGHT			LEFT		
	CIC	ITC	ITCD	CIC	ITC	ITCD
<input type="radio"/> PEP						
Directionality			S			S
Program Button						
Volume Control						
Telecoil		S	S		S	S
Auto-tel						
Wireless						

NOTE: Please tick the options you require, if left blank the standard options will apply

THIN TUBE OPTIONS - BTE ONLY					<input checked="" type="radio"/> RIGHT	<input type="radio"/> LEFT	<input type="radio"/> BOTH
	Dome Options	XS (6 mm)	S (8 mm)	M (10 mm)	L (12 mm)	Tube Length	Tube Type
Open Dome						<input type="radio"/> Zero	<input type="radio"/> 0.9 (Std)
Tulip Dome						<input type="radio"/> One (Std)	<input type="radio"/> 1.3 (larger, more low and mid freq)
Dome, Sm Vent						<input type="radio"/> Two	
Dome, Lg Vent						<input type="radio"/> Three	
Power Dome							

VENT & CANAL OPTIONS		
Vent Type	Vent Size	Canal Length
Trench (Size = Open)	Extra Large (3.0mm)	As Marked on Impression
Collection	Large (2.4mm)	Deep - at 2nd bend
IROS	Medium (1.4mm)	Long-before 2nd bend
Straight	Small (1.0mm)	Medium-at 1st bend
Pressure (Size = Small)		Short-before 1st bend
No Vent		

EARMOULD OPTIONS													
Earmould Style	R		L		Material			Vent			Tube		
					Hard Acrylic	Soft Acrylic	Silicon		R	L		R	L
Micromould V1*								1 mm			Thin Tube 0.9mm		
Sock (sleeve) mould*								1.4 mm			Thin Tube 1.3mm		
Canal								2 mm			Standard BTE Tube		
Canal Lock								2.4 mm			* NOT available with standard BTE tube option		
Half Shell								3.0 mm					
Full Shell (carved)													
Skeleton													

Canal Length	Options	Earmould Colour
<input checked="" type="radio"/> Factory Select <input type="radio"/> As Marked	<input type="radio"/> Canal Lock	<input checked="" type="radio"/> Clear
<input type="radio"/> Deep <input type="radio"/> Medium	<input type="radio"/> Removal Cord (Std. on Canal, Micro)	<input type="radio"/> Beige
<input type="radio"/> Long <input type="radio"/> Short		

FACEPLATE/SHELLCOLOR: \_\_\_\_\_

Beige/Beige   
  L.Brown/Clear   
  M.Brown/Clear   
  D.Brown/Clear

OTHER OPTIONS: \_\_\_\_\_

Canal Lock   
  Soft Coat   
  Name on Shell   
  Removal Cord (Std. on CIC, CICP)   
  Removal Notch

SHIPPING: \_\_\_\_\_

Standard   
  VIP - 2 Days - \$60 / Instrument

SPECIAL INSTRUCTIONS: \_\_\_\_\_