Earmold Order Form.



Customer Information							Patient Information									
Date:							Last Name:									
Ship To Account Number:							First Name:									
Address:							Age: Gender:									
City: State: Zip:								Is this patient order being fully or partially paid for by state or								
Bill To Account Number:							federal government funds?									
Third Party Patient Number:							Audiog	ram (F	Require	d for	AOV):					
Purchase Order Number:								Hz	25	0	500	1K	2K	3K	4K	
Contact Name:								AC								
Phone:								AC								
Email:																
HI Warranty \square 2 nd year \square 3 rd year \square 4 th year \square 5 th year* / \square 24-hour service (\$64.99) *Patient age required at time of order							Shipping & Handling Options* ☐ Next Morning (\$32.99) ☐ Next Afternoon (\$21.99) ☐ 2 Business Days (\$20.99) *Based on location and courier									
Step	1: Ord	ler BT	E Prod	duct												
Lumity						Marvel		ı								
_ <u>L</u>	R	90	70	50	30	Instrument	L	R	90	70	50	30	Instrume			
						Phonak Naída™ L-PR							Phonak Naída Link M			
						Phonak Naída L-SP							Phonak Sky Link M			
						Phonak Naída L-UP Phonak Sky™ L-PR	ODOC									
						Phonak Sky L-M	CROS L	R	90	70	50	30	Instrument			
<u> </u>						Phonak Sky L-UP			30	70		1		CROS L-R*		
						Phonak Sky L-SP							THORIGIN CHOS L-III			
	2: Colo						*Only compatible with Naída L-PR and Sky L-PR									
Lumity Naída Link M							Sky Link M					Exclusive to Sky L				
HO Beige P1 Sand Beige							P1 Sand Beige					Q2 Electric Green				
P1 Sand Beige P4 Chestnut						P4 Chestnut					Q3 Caribbean Pirate					
P3 Sandalwood P6 Silver Gray P4 Chestnut P8 Velvet Black							P8 Velvet Black Q3 Caribbean Pirate					T3 Precious Pink M6 Lava Red				
P5 Champagne						EIVEL DIACK	T3 Precious Pink					M7 Blue Ocean				
P6 Silver Gray								A7 Blue Ocean					M8 Majesty Purple			
P7 Graphite Gray							mo majest, i tipie									
P8 Velvet Black																

Color

Q3 Caribbean Pirate**

^{**} Not available on Naída L products

Step 3: Select Coupling (defaults in bold)

Earmolds

Style

- Phonak CROS [CB]
- Phonak Canal Lock [CL]
- Phonak Canal [CU]
- □ Phonak Semi-Skeleton [SS]
- Phonak Skeleton [SK]
- Phonak Half-Shell [HC]
- □ Phonak Carved Full Shell [SC]
- Phonak Standard Full Shell [SU]
- Phonak Helix Lock [HL]

Canal Length

- Short [CS]
- S Medium [CM]
- R Long [CL]
- R Cut as marked [R.]

Options

- R Helix Lock
- Removal Line [RF]
- R Color Dot [CD]
- No Glue [NG] (Tubing)

Color

- S Clear Transparent [21]
- R Light Brown [N]
- Rose Tint [T]
- R Other L _____

Material

- S Acrylic [AC]
- Silicone [S70]

Venting

- R AOV [AO]
- □ Large SAV [S30]
- IROS A [IA30]
- R Large Vent [P30]
- Medium [P25]
- Small [P20]
- R No Vent [X]

Vents are drilled parallel as a default. If the physical size of the earmold or acoustic requirements prevent us from using a parallel vent, we will install a merged vent.

Tubing

- 13 Thick Clear [13T]
- B Dry Tubing [13D]
- Quick Snap TLG tubing (Acrylic only)
- Tube Lock [TRS] (Silicone only)

Bolded items will be selected if no choice made.



Phonak **CROS**



Phonak Skeleton



Phonak Semi-Skeleton



Canal



Phonak



Phonak Canal Lock



Phonak Helix Lock



Phonak Half Shell



Phonak Full Shell Carved



Standard Full Shell

Solid Colors







White (19) Yellow (20) Orange (11) Red (10)









Green (17)





Blue (07)



Purple (08)







Metallic Colors











Magic Pink (4B)

Step 4: Remotes and Wireless Accessories

Lumity / Paradise / Marvel

- ☐ TV Connector [076-3006-0611]
- ☐ Phonak RemoteControl [076-0065-P5]
- ☐ Phonak PartnerMic[™] [076-4001-P511]
- ☐ Roger Table Mic 3 [056-4012-P5011]
- ☐ Roger On[™] 3 [056-3032-xx011]
 - ☐ Champagne [P5]
 - ☐ Graphite Gray [P7]
- ☐ Roger Select[™] 3 [056-3033-xx011]
 - ☐ Champagne [P5]
 - ☐ Graphite Gray [P7]

Step 5: Notes and Special Instructions

- ☐ Call if changes are required
- ☐ No phone call required to make changes