

# Phonak Vitus™ Order Form

HSP Fully Subsidised Devices

## Step 1: Order Details

Account Number: 20

Hearing Clinic:

Delivery Address:

Contact Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Date Ordered: \_\_\_\_\_ Date Required: \_\_\_\_\_

## Step 2: Patient Information

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Impressions:  
Please select:

New impressions enclosed

Use scanned data Existing Serial No. \_\_\_\_\_

## Step 3: HI Warranty/VIP Service

4th year warranty (charges will apply) VIP 24 hour service (\$57.75 incl GST)

## Step 4: Choose your Hearing Instrument



Model	Part No.	OHS Code	Colour	Qty
Vitus BTE-micro	050-0573-xx	B544PHO		



Model	Part No.	OHS Code	Colour	Qty
Vitus BTE-P	050-0240-xx	B543PHO		



Model	Part No.	OHS Code	Colour	Qty
Vitus BTE-UP	050-0269-xx	B542PHO		

### Colour Chart:

01	E8
Beige	Mid Gray

## Step 5: Choose your sound delivery system

Open Fit (for Micro & P devices only) Earmould Tone Hook\*

\_\_\_\_\_ Please complete Earmould Order Form \*Tone hooks are standard with every order

## Step 6: Choose your coupling options

Domes (for Micro & P devices)					SlimTube HE (for Micro & P devices)		Slim Tips (for Micro & P devices) <small>(Impression required)</small>			Standard Earmould (for UP devices)		Power SlimTube II (for UP devices) <small>(Earmould required)</small>		
L	R	S	M	L	0-L	0-R	L	R	Shell Colour (HA)				00-L	00-R
Open					1-L	1-R	Hollow (HA)		Clear	Beige	Please complete Earmould Order Form		0-L	0-R
Closed				2-L	2-R	Solid (HA)							1-L	1-R
Power				3-L	3-R	Soft (70/40)							2-L	2-R
												3-L	3-R	

## Step 7: Choose your accessories

Roger Accessories - please complete the Phonak Roger Order Form

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