

Earmold Order Form.



Customer Information

Date:

Ship To Account Number:

Address:

City:State:Zip:

Bill To Account Number:

Third Party Patient Number:

Purchase Order Number:

Contact Name:

Phone:

Email:

HI Warranty

☐ 2nd year ☐ 3rd year ☐ 4th year ☐ 5th year* / ☐ 24-hour service (\$64.99)

*Patient age required at time of order

Patient Information

Last Name:

First Name:

Age:Gender:

Is this patient order being fully or partially paid for by state or federal government funds? ☐ Yes ☐ No

Audiogram (Required for AOV):

	Hz	250	500	1K	2K	3K	4K
Left:	AC						
Right:	AC						

Shipping & Handling Options*

☐ Next Morning (\$32.99) ☐ 3-5 Business Days (\$19.99)

☐ Next Afternoon (\$21.99) ☐ C.O.D. (\$21.99 + shipping)

☐ 2 Business Days (\$20.99)

* Based on location and courier

Step 1: Order BTE Product

Lumity		L	R	90	70	50	30	Instrument
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Phonak Naída™ L-PR
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Phonak Naída L-SP
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Phonak Naída L-UP
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Phonak Sky™ L-PR
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Phonak Sky L-M
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Phonak Sky L-UP
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Phonak Sky L-SP

Marvel		L	R	90	70	50	30	Instrument
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Phonak Naída Link M
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Phonak Sky Link M

CROS		L	R	90	70	50	30	Instrument
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Phonak CROS L-R*

*Only compatible with Naída L-PR and Sky L-PR

Step 2: Color

Lumity	Naída Link M	Sky Link M	Exclusive to Sky L
H0 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	P8 Velvet Black	T3 Precious Pink
P4 Chestnut	P8 Velvet Black	Q3 Caribbean Pirate	M6 Lava Red
P5 Champagne		T3 Precious Pink	M7 Blue Ocean
P6 Silver Gray		M7 Blue Ocean	M8 Majesty Purple
P7 Graphite Gray			
P8 Velvet Black			
Q2 Electric Green**			
Q3 Caribbean Pirate**			
T3 Precious Pink**			

** Not available on Naída L products

Color

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]
- ☒ ☒ **Medium [CM]**
- ☐ ☐ Long [CL]
- ☐ ☐ Cut as marked [R.]

Options

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

Color

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

Material

- ☒ ☒ **Acrylic [AC]**
- ☐ ☐ Silicone [S70]

Venting

- ☐ ☐ AOV [AO]
- ☒ ☒ **Large SAV [S30]**
- ☐ ☐ IROS A [IA30]
- ☐ ☐ Large Vent [P30]
- ☐ ☐ Medium [P25]
- ☐ ☐ Small [P20]
- ☐ ☐ Pressure [P12]
- ☐ ☐ 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 Standard Clear [13M]**
- ☐ ☐ 13 Thick Clear [13T]
- ☐ ☐ Dry Tubing [13D]
- ☐ ☐ Quick Snap TLG tubing (Acrylic only)
- ☐ ☐ Tube Lock [TRS] (Silicone only)

Bolded items will be selected if no choice made.



Solid Colors



Metallic Colors



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