

Your Information	Step 1: Account Information									
	Ship to Account:				Bill to Account: 6001400					
	Account Name:				Date:			Fitting Date:		
	Address:				Purchase Order #:					
	Step 2: Patient Information									
	City:		State:		Zip:		First Name:			
	Phone #:				Last Name:					
	Contact Name:				Age:					
Email (required):				Medicaid #:						

Product	Hearing Aid				Wireless Accessories			
	Model: L: R:				SoundClip-A: Serial #:			
	Style: L: R:				TV-A: Serial #:			
	Serial #: L: R:				Desktop Charger: Serial #:			
	Serial #:				SmartCharger: Serial #:			
	MicroShell Detect/MicroShell/Power Receiver Mold							
Serial #:								
Serial #:								

Reason for Return	Please indicate reason for return:	
	General Reasons:	Performance/Fit:
	<div><input type="checkbox"/> Fitted with Other Bernafon Model (4)</div> <div><input type="checkbox"/> No Reason Given for Return (42)</div> <div><input type="checkbox"/> Patient Would Not Pay (1)</div> <div><input type="checkbox"/> No Perceived Benefit (26)</div> <div><input type="checkbox"/> Not Ready to Use Instrument (7)</div> <div><input type="checkbox"/> Patient Didn't Return for Fitting (2)</div> <div><input type="checkbox"/> Overstock (56)</div> <div><input type="checkbox"/> Patient Could Not Manipulate (9)</div> <div><input type="checkbox"/> No Hearing Aid Preferred (64)</div>	<div><input type="checkbox"/> Caused Physical Discomfort (8)</div> <div><input type="checkbox"/> Defective Instrument (31)</div> <div><input type="checkbox"/> Programming Difficulty (32)</div> <div><input type="checkbox"/> Poor Intelligibility (16)</div> <div><input type="checkbox"/> Intermittent (21)</div> <div><input type="checkbox"/> Occlusion (29)</div> <div><input type="checkbox"/> Cosmetic Rejection (10)</div> <div><input type="checkbox"/> Feedback (23)</div> <div><input type="checkbox"/> Multiple Repairs (51)</div> <div><input type="checkbox"/> Too Much Background Noise (15)</div>

Instructions for Shipping Lithium-ion Batteries with Hearing Devices

1. Be sure Lithium-ion batteries are locked in battery drawer of hearing device.

2. Never return loose Lithium-ion batteries back to Bernafon for any reason.

3. Affix Non-Restricted Lithium-ion Battery labels to the shipping label. Request these labels from Bernafon.

Comments:

INTERNAL USE ONLY
DO NOT WRITE