

CUSTOM IM AND IP ORDER FORM



CUSTOMER INFORMATION

Bill-to Account Number: _____
Ship-to Account Number: _____
PO #: _____
Address: _____
City: _____ State: _____ Zip: _____
Contact Name: _____
Phone: _____ Email: _____

IMPRESSION RECOMMENDATIONS



- Use silicone impression material.
- Make impressions past the second bend.
- For optimal microphone placement, it is recommended to draw a horizontal line through the tragus on the earmold impression.

PATIENT INFORMATION

Date: _____
First Name: _____
Last Name: _____

Audiometric Information

	250Hz	500Hz (Required)	1kHz	2kHz	3kHz	4kHz
Right						
Left						

Widex may decrease the vent size to accommodate your order request. Would you like to be consulted before this change is made? (Y) (N)

Widex may change your selected sides for the volume control and program button features. Would you like to be consulted before this change is made? (Y) (N)

Previous User: (Y) (N) Age: _____
Ear Texture: ☐ Soft ☐ Medium ☐ Firm
Impression: ☐ Open mouth ☐ Closed mouth

☐ Use previous CAMISHA impression scan(s) to manufacture this order. Right Serial #: _____ Left Serial #: _____

SELECT CUSTOM ITE OPTIONS

Model	Design	Hearing Instrument Colors	Venting May vary due to ear canal size	Additional Options	Canal Length
<input type="checkbox"/> EVOKE440 <input type="checkbox"/> EVOKE330 <input type="checkbox"/> EVOKE220 <input type="checkbox"/> EVOKE110 ZEN Program comes standard in all EVOKE models, except CIC Micro. (T-Coil not included. 312 battery standard.)	Canal (R) (L) Half Shell (R) (L) Full Shell (R) (L)	<input type="checkbox"/> Beige <input type="checkbox"/> Medium Brown <input type="checkbox"/> Dark Brown <input type="checkbox"/> Clear (If Clear shell is chosen, select a faceplate color) <input type="checkbox"/> Beige <input type="checkbox"/> Medium Brown <input type="checkbox"/> Dark Brown	If no vent is selected, Widex will select Vent Optimized for Anatomy/Audiogram IROS Vent (R) (L) Semi IROS Vent (R) (L) Reverse Horn Vent (R) (L) Trench Vent (R) (L) Pressure Vent (R) (L) Largest Vent Possible (R) (L) No Vent (R) (L) XS (R) (L) S (R) (L) M (R) (L) L (R) (L) XL (R) (L) Vent Optimized for Anatomy/Audiogram (R) (L)	Soft Hypoallergenic Shell Coat (R) (L) Hard Hypoallergenic Shell Coat (Default) (R) (L) Retention Ring (R) (L) Removal Line (R) (L) Removal Notch (R) (L) Canal Lock (N/A - Full and Half Shell) (R) (L) No Helix - 3/4 Shell (R) (L)	Medium (Standard) (R) (L) Short (R) (L) Long (R) (L) As Marked on Impression (R) (L) Wax Guard NanoCare™ (Standard) (R) (L) Extended Receiver Tubing (R) (L)
Receiver	Feature*				
E-IM (R) (L) E-IP (R) (L)	Volume Control (R) (L) Program Button (R) (L) *To optimize size and ease of use, Widex recommends NOT adding a push button and volume control on both ears.				

WARRANTY OPTIONS FOR ALL CUSTOMS (See EVOKE Price List for price information.)

INCLUDED WARRANTIES	OPTIONAL WARRANTIES
EVOKE440/330 3-Year Repair Warranty 3-Year Loss & Damage Coverage (Standard)	
EVOKE220 2-Year Repair Warranty 2-Year Loss & Damage Coverage (Standard)	3 rd Year Repair Warranty (R) (L) 3 rd Year of Loss & Damage Coverage (R) (L)
EVOKE110 1-Year Repair Warranty 1-Year Loss & Damage Coverage (Standard)	2 nd Year Repair Warranty (R) (L) 3 rd Year Repair Warranty (R) (L) 2 nd Year of Loss & Damage Coverage (R) (L) 3 rd Year of Loss & Damage Coverage (R) (L)

Additional Comments / Special Instructions: _____

SELECT ACCESSORIES (Indicate quantity)*

TV-DEX™: Silver _____	PerfectDry Lux™ Dryer: _____
ADD'L TV-DEX™ BASE: Silver _____	PHONE-DEX™2: Silver _____
COM-DEX™: White _____ Grey _____ Green _____	PHONE-DEX™2 ADD'L HANDSET: Silver _____
RC2-DEX™: Silver _____ Black _____	

*All DEX devices are billable items for IM/IP models.

SELECT REMOTE PROGRAMMING (Indicate quantity)

REMOTE LINK: Silver _____

CUSTOM XP AND CIC ORDER FORM

CUSTOMER INFORMATION

Bill-to Account Number: _____

Ship-to Account Number: _____

PO #: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____

Phone: _____ Email: _____

PATIENT INFORMATION

Date: _____

First Name: _____

Last Name: _____

Audiometric Information

	250Hz	500Hz (Required)	1kHz	2kHz	3kHz	4kHz
Right						
Left						

Previous User: ☒ Y ☐ N Age: _____Ear Texture: ☐ Soft ☐ Medium ☐ Firm☐ Use previous CAMISHA impression scan(s) to manufacture this order. Right Serial #: _____ Left Serial #: _____

SELECT CUSTOM OPTIONS

☐ EVOKE440 ☐ EVOKE330 ☐ EVOKE220 ☐ EVOKE110

ZEN Program comes standard in all EVOKE models, except CIC Micro.

CIC MICRO (RC-DEX and T-Coil not included): ☒ R ☐ L NOTE: Requires WidexLink™ Connector for programming.CIC (RC-DEX included, T-Coil not included): ☒ R ☐ L

Custom (XP) Instruments (T-Coil and RC-DEX standard; VC and Program Button not available):

Canal ☒ R ☐ L Half Shell ☒ R ☐ L Full Shell ☒ R ☐ L**Standard CIC:** CAMISHA Laser Fit Technology (hypoallergenic), Medium Brown Hearing Instrument, NanoCare™, Removal Line.**Standard ITE:** CAMISHA Laser Fit Technology (hypoallergenic), Beige Hearing Instrument, NanoCare™.

SELECT ACCESSORIES (Indicate quantity)

TV-DEX™: Silver _____ PerfectDry Lux™ Dryer: _____

ADD'L TV-DEX™ BASE: Silver _____ PHONE-DEX™2: Silver _____

COM-DEX™: White _____ PHONE-DEX™2: ADD'L HANDSET: Silver _____

Grey _____

Green _____

RC2-DEX™: Silver _____

Black _____

DEX devices not compatible with CIC MICRO model.

SELECT NON-STANDARD OPTIONS

Hearing Instrument Colors

☐ Beige ☐ Medium Brown ☐ Dark Brown ☐ Clear

Faceplate Colors (If a clear shell is chosen, select a faceplate color)

☐ Beige ☐ Medium Brown ☐ Dark Brown

Additional Options (Where available)

☐ Soft Hypoallergenic Shell Coat ☐ Removal Line ☐ Extended Canal Lock☐ Hard Hypoallergenic Shell Coat ☐ Removal Notch (N/A - CIC) (N/A - Full Shell/CIC)☐ Retention Ring ☐ Safety Loop (N/A - CIC) ☐ No Helix - 3/4 Shell☐ Removal Post (N/A - CIC) ☐ Canal Lock (N/A - Full Shell)

Venting Options

If no vent option is selected, Widex will select Vent Optimized for Anatomy/Audiogram.

☐ Small ☐ Semi IROS Vent ☐ Largest Vent Possible☐ Medium ☐ Reverse Horn Vent ☐ No Vent☐ Large ☐ Trench Vent ☐ Vent Optimized for☐ IROS Vent ☐ Pressure Vent Anatomy/Audiogram

Canal Length Options

☐ Medium (Standard)☐ Short☐ Long☐ As Marked on Impression

Wax Guard Options

☐ NanoCare™ (Standard)☐ Extended Receiver Tubing

Impression Recommendations:

Silicone impression material; include second bend.

Shipping Method & 48-Hour Service

(See Price & Policy Guide for price information.)

☐ UPS Next Afternoon (Standard)☐ UPS Delivery (Extra charge)☐ 48-Hour Rush Service (Extra charge)

WARRANTY OPTIONS FOR ALL CUSTOMS (See EVOKE Price List for price information.)

INCLUDED WARRANTIES	OPTIONAL WARRANTIES
EVOKE440/330 3-Year Repair Warranty 3-Year Loss & Damage Coverage (Standard)	
EVOKE220 2-Year Repair Warranty 2-Year Loss & Damage Coverage (Standard)	3 rd Year Repair Warranty <input checked="" type="radio"/> R <input type="radio"/> L 3 rd Year of Loss & Damage Coverage <input checked="" type="radio"/> R <input type="radio"/> L
EVOKE110 1-Year Repair Warranty 1-Year Loss & Damage Coverage (Standard)	2 nd Year Repair Warranty <input checked="" type="radio"/> R <input type="radio"/> L 3 rd Year Repair Warranty <input checked="" type="radio"/> R <input type="radio"/> L 2 nd Year of Loss & Damage Coverage <input checked="" type="radio"/> R <input type="radio"/> L 3 rd Year of Loss & Damage Coverage <input checked="" type="radio"/> R <input type="radio"/> L

SELECT REMOTE PROGRAMMING (Indicate quantity)

REMOTE LINK: Silver _____

Additional Comments / Special Instructions: _____