

Phonak CROS L Order Form

Date: ____ / ____ / ____
DD MM Year

Rush Order in 48hr
(\$48 charge) N/A for Titanium

PO#: _____

Attention to
(at Phonak): _____

STEP 1: Account Information

Ship to Account Number:

Phone #:
Company Name:
Address:
Contact Name (Audiologist/Dispenser):

SHIP TO

Bill to Account Number:

Phone #:
Company Name:
Address:

BILL TO

Patient Information

First Name:

Last Name:

Claim Type

AADL BCEHP CNESST Eastern Health Greenshield
 Manitoba Health Nisga'a ODSP REGIE Supp. Health
 VAC, DND, RCMP, ISC (NIHB) WCB-AB WCB-MB WCB-NS
 WCB-SASK WCB-Yukon Workplace NL, WS-NB, WCB-PEI
 WS-BC WSIB Other: _____
(Please Specify)

Claim # (Required): _____

STEP 2: Specify CROS L Transmitter

Transmitter for the unaidable ear

Unaidable ear?

Left Right



CROS L-R

Colour (both devices):

Beige (H0) Champagne (P5) Electric Green (Q2)*
 Sand Beige (P1) Silver Grey (P6) Caribbean Pirate (Q3)*
 Sandalwood (P3) Graphite Grey (P7) Precious Pink (T3)*
 Chestnut (P4) Velvet Black (P8)

*Pediatric colour n/a for Naida L-PR

STEP 3: Specify Lumity Hearing Instrument

Receiver device for the aidable ear

Aidable ear?

Left Right

Choose device for aidable ear:

Receiver-in-the-canal (RIC):

Audéo L-R Audéo L-RT

OR

Behind-the-Ear (BTE):

Naida L-PR Sky L-PR

Technology (Lumity Hearing Instrument):

L90 L70 L50 L30

STEP 4: CROS L Transmitter Retention Options

CROS Slim Tube 4.0
Tube Length (0-3): _____

Dome Size (open):

Small
 Medium
 Large

OR

Custom CROS Tip
Tube Length (0-3): _____

CROS Tip Colour:

Clear
 Pink
 Red/Blue

CROS Tip Options:

Extra canal length
 Skeleton lock
 Canal lock

STEP 5: Lumity Device Retention Options

Audéo L Receiver Power:

S Receiver
 M Receiver
 P Receiver

Receiver Length (0-3): _____

Dome Type:

Cap
 Open
 Vented
 Power

Dome Size:

Small
 Medium
 Large

Naida L & Sky L: To order an Earmold for the Lumity BTE, please use the Phonak Custom Earmold Order Form.

Custom Tip or CROS L: To order a Custom Tip for the Lumity Device or the CROS L transmitter, please use the Phonak Custom Tip 4.0 Order Form.

STEP 6: Additional Options or Special Instructions
