

Date: ___ / ___ / ___
DD MM Year

Rush order in 48h (\$40.00 charge)

PO#: _____

Attention to (at Phonak): _____

Ship to Account Number:

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

Bill to Account Number:

Phone#: _____
Company Name: _____
Address: _____

SHIP TO

BILL TO

User Name: Last

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(Please print)

First

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Pediatric Date of Birth: ___ / ___ / ___
DD MM Year

Claim Type: VAC NIHB ORCMP WCB-AB OWS-BC
WCB-MB OWSIB Other: _____
(Please Specify)

Audiometric Information (Please include with ALL orders)

L	R	Speech Scores			
		Right	Left	Binaural	
		dB HL	dB SPL		
		SRT			
		MCL			
		UCL			

Canal Length: Short Med. Long Ear Texture: Soft Avg. Firm

Claim # (Required): _____

Step 1 Model, Performance Level & Product Options

L R B90 L R B70 L R B50 L R B30

Shell Style		Instrument Type						Power Level				Options			
Side	IIC	CIC	MC	ITC	HS	FS	M		P	SP	UP	VC		TC	
							40/109	50/115	60/119	70/127					
<input type="radio"/> L <input type="radio"/> R	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	Virto B-10 NW O				<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	PB w/EP MiniControl wo/PB ⁺ VC - wo/PB, wo/EP		<input type="radio"/>
<input type="radio"/> L <input type="radio"/> R		<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	Virto B-312 NW O				<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	PB w/EP VC - wo/PB, wo/EP		<input type="radio"/>
<input type="radio"/> L <input type="radio"/> R		<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	Virto B-10 O				<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> VC	<input type="radio"/>	
<input type="radio"/> L <input type="radio"/> R		<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	Virto B-10				<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> VC	<input type="radio"/>	
<input type="radio"/> L <input type="radio"/> R		<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	Virto B-312				<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> VC	<input type="radio"/>	
<input type="radio"/> L <input type="radio"/> R		<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	Virto B-13				<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> VC	<input type="radio"/>	

Faceplate Colour: Pink 26 Cocoa 22 Brown 28 Black 06 (IIC only)

Shell Colour: Pink 26 Blue/Red Transparent (Phonak IIC standard) Transparent 21

Manual Dexterity: Removal Line** Extended Removal Line +5mm | Vent size: AOV (Audiogram required) Customer Specific: Left _____ mm Right _____ mm

Wax System: Cerustop Ext. Receiver tube Wax Spring HF3 HF4

Shell Option: L R Soft Coat L R Digital Canal Lock* L R Digital Helix Lock* *same colour as shell

Step 2 CROS B Model and Performance Level

	Shell Style			Instrument Type	Wireless	Options	
	ITC	HS	FS			PB	VC
<input type="checkbox"/> L <input type="checkbox"/> R	<input checked="" type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	CROS B 312 Custom	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> L <input type="checkbox"/> R	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input checked="" type="radio"/>	<input type="radio"/> <input type="radio"/>	CROS B 13 Custom	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	

Special Instructions Call-back requested WHS model without push button

Step 3 Wireless accessories

PilotOne II ComPilot Air II ComPilot II TVLink II Base Station RemoteMic EasyCall II DECT Phone II D-Dry Kit MiniControl

Refer to Phonak Price & Policy for compatibility and complimentary Digital Wireless Accessory options

S = Standard O = Optional PB = Push Button VC = Volume Control EP = EasyPhone TC = Inductive Telecoil + Push Button or Volume Control functionality via MiniControl ✓ Fixed-Cannot be changed

**Standard for nano and CIC