

Virto™ P Order Form

Additional Information

Shell & Faceplate Colour Options



Virto P-Titanium



Virto P-10 NW O



Virto P-312 NW O



Virto P-312

SHELL



Titanium Grey



Transparent



Pink



Black



Red
Transparent



Blue
Transparent

FACEPLATE



Black



Cocoa



Pink



Pink



Cocoa

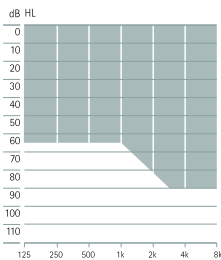


Brown

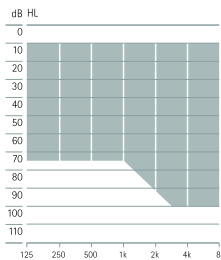


Black

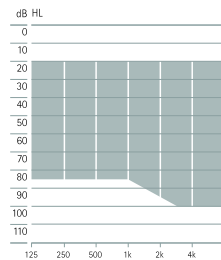
Fitting Ranges



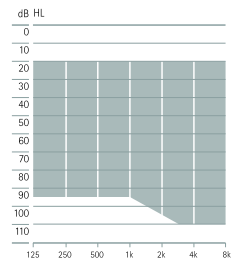
Mild to moderate (M) 40/109



Mild to moderately-severe
(P) 50/115



Moderate to severe (SP) 60/119



Moderate to severe/profound
(UP) 70/127

Titanium Information

Titanium FitGuide

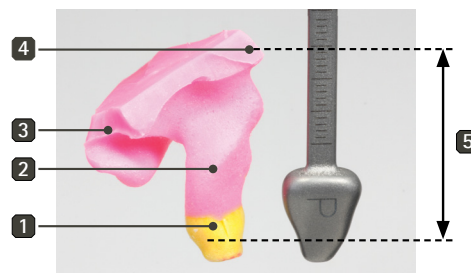
Measure the possible insertion depth. The device will be built in accordance with the indicated FitGuide value. If the measurement falls between two numbers, please use the smaller number.

- Side M – for devices with M-receiver
- Side P – for devices with P-receiver
- Models with SP receiver will be built without FitGuide information

Impression Taking

Recommendations for taking impressions:

- EasyView Otoblock placed past the second bend **1**
- Low viscosity material **2**
- Always fill the complete concha with impression material **3**
- Intertragal notch must be visible **4**
- When fitting Titanium, impression length must cover the evaluated FitGuide value **5**



Check out our video on how to take ear impressions!



Virto™ P Order Form

Step 1: General Information

Rush order in 48h (\$40.00 charge)
(N/A for Titanium)

Date: ____ / ____ / ____
 DD MM Year

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:

Last Name:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

First Name:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

- AADL BCEHP CNESST Eastern Health Greenshield
 Manitoba Health Nisga'a OODSP 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: _____

Claim # (Required): _____

Step 2: Product Selection & Configuration

Product		Technology Level				Shell Style					Power Level				User Control Options				Accessories				
		90	70	50	30	IIC	CIC	MiniCanal	ITC	Half Shell	Full Shell	M	P	SP	UP	Push Button (PM1)	Volume Control (VC3)	Telecoil (TP)	EasyPhone ^{1,3} (016)	MiniControl ¹ (015)	TV Connector (\$139)	PartnerMic	RemoteControl
Virto P Titanium	<input type="checkbox"/> L	<input type="checkbox"/>	<input type="checkbox"/>			S	O					O	S	O		O ²		O	O	<input checked="" type="checkbox"/> S ²			
	<input type="checkbox"/> R					S	O					O	S	O		O ²		O	O				
Virto P 10 NW O	<input type="checkbox"/> L	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	S	O	O	O	O	O	O	S	O		S ²	O ²	O	S	<input type="checkbox"/> S ²			
	<input type="checkbox"/> R					S	O	O	O	O	O	O	S	O		S ²	O ²	O	S				
Virto P 312 NW O	<input type="checkbox"/> L	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			S	O	O	O	O	S	O		O	O	O	S				
	<input type="checkbox"/> R							S	O	O	O	O	S	O		O	O	O	S				
Virto P 312 (wireless)	<input checked="" type="checkbox"/> L	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					S	O	O	S	O	O	✓	O				<input checked="" type="checkbox"/> S	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> R									S	O	O	S	O	O	✓	O					<input type="checkbox"/> S	<input type="checkbox"/>

1 Choose between MiniControl or EasyPhone; MiniControl is standard with Virto P Titanium

2 Choose only one of Push Button, Volume Control or Mini Control
3 Easyphone for acoustic program only

= Standard O = Optional ✓ = Required \$ = Chargeable = Roger Direct

Step 3: Configuration Continued

	Virto P Titanium	Virto P 10 NW O	Virto P 312 NW O	Virto P 312 (wireless)
Venting	<input checked="" type="checkbox"/> AOV (audiogram required) <input type="checkbox"/> AOV-O (audiogram required) <input type="checkbox"/> Manual L: ____mm R: ____mm	<input checked="" type="checkbox"/> AOV (audiogram required)	<input type="checkbox"/> Manual L: ____mm R: ____mm	
Wax System	Cerustop (CS) (required)	<input checked="" type="checkbox"/> Cerustop (CS) <input type="checkbox"/> Wax Spring (WS) <input type="checkbox"/> No wax system required (X)	<input type="checkbox"/> Ext. + Spring (WE) <input type="checkbox"/> Ext. Tubing (ER)	<input type="checkbox"/> HF3 (H3) <input type="checkbox"/> HF4 (H4)
Other Options	<input type="checkbox"/> Titanium Surface- Extra Retention (ERS) <input checked="" type="checkbox"/> Removal Filament (RF)	<input type="checkbox"/> Soft Coat (SC)	<input type="checkbox"/> Canal Lock (CL) <input type="checkbox"/> Helix Lock (HL) <input type="checkbox"/> Removal Filament (RF) <input type="checkbox"/> Extended Removal Filament (RFE)	
Colours	Shell	Titanium Grey (U0)	<input type="checkbox"/> Black (06) <input checked="" type="checkbox"/> Pink (26) <input type="checkbox"/> Red/Blue (R/B) <input type="checkbox"/> Transparent (21) Black available for Virto 312 wireless only	
	Face plate	<input checked="" type="checkbox"/> Black (06) <input type="checkbox"/> Cocoa (22) <input type="checkbox"/> Pink (26)	<input type="checkbox"/> Black (06) <input type="checkbox"/> Cocoa (22) <input checked="" type="checkbox"/> Pink (26) <input type="checkbox"/> Brown (28) Black N/A for Virto 312 NW O; Cocoa std for acrylic IIC	

Audiogram (required for AOV & AOV-O)

	250	500	1k	2k	3k	4k
L						
R						

Call me if changes are needed

Special Instructions :
