

# Pediatric Earmold Order Form

## Customer Information

Ship To Account Number:

Address:

City: State: Zip:

Bill To Account Number:

Third Party Patient Number:

Date:

Purchase Order Number:

Contact Name:

Phone:

Email:

## HI Warranty/Rush Options

☐ 2<sup>nd</sup> year ☐ 3<sup>rd</sup> year ☐ 4<sup>th</sup> year / ☐ 24-hour service (\$64.99)

## Step 1: Order BTE Product

### Marvel

L	R	90	70	50	30	Instrument
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Phonak Sky™ M-M
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Phonak Sky M-PR
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Phonak Sky M-SP
<input type="checkbox"/>	<input type="checkbox"/>					Phonak Sky Link M
<input type="checkbox"/>	<input type="checkbox"/>					Phonak Naída Link M

Other:

## Patient Information

Last Name:

First Name:

Age: Gender:

Is this patient order being fully or partially paid for by state or federal government funds? ☐ Yes ☐ No

## Audiogram (Required for AOV):

	Hz	250	500	1K	2K	3K	4K
Left:	AC						
Right:	AC						

## Shipping & Handling Options\*

- ☐ Next Morning (\$32.99) ☐ 2 Business Days (\$20.99)  
☐ Next Afternoon (\$21.99) ☐ 3-5 Business Days (\$19.99)

\* Based on location and courier

- ☐ Shipment directly to patient (\$26.99 + shipping)  
☐ C.O.D. (\$21.99 + shipping)

### Paradise

L	R	90	70	50	30	Instrument
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Phonak Naída™ P-UP
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Phonak Naída P-PR

### Belong

L	R	90	70	50	30	Instrument
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Phonak Sky B-UP
<input type="checkbox"/>	<input type="checkbox"/>					Phonak CROS B-13 <sup>1,2</sup>

1 Only compatible with Belong products

2 Not compatible with Rechargeable models

3 Only compatible with Audéo B-R

## Step 2: Color

Paradise	Marvel	Naída Link M	Sky Link M	Belong	Exclusive to Sky M/B and CROS B-13
H0 Beige	H0 Beige	P1 Sand Beige	P1 Sand Beige	H0 Beige	Q2 Electric Green
P1 Sand Beige	P1 Sand Beige	P4 Chestnut	P4 Chestnut	P1 Sand Beige	Q3 Caribbean Pirate
	P3 Sandalwood	P6 Silver Gray	P8 Velvet Black	P3 Sandalwood	T3 Precious Pink
P4 Chestnut	P4 Chestnut	P8 Velvet Black	Q3 Caribbean Pirate	P4 Chestnut	M6 Lava Red
P5 Champagne	P5 Champagne		T3 Precious Pink	P5 Champagne	M7 Blue Ocean
P6 Silver Gray	P6 Silver Gray		M7 Blue Ocean	P6 Silver Gray	M8 Majesty Purple
P7 Graphite Gray	P7 Graphite Gray*			P7 Graphite Gray*	
P8 Velvet Black	P8 Velvet Black			P8 Velvet Black	
	T7 Alpine White			T7 Alpine White	

Color:

\*Not available on Sky products

### Step 3: Select Coupling (defaults in bold)

#### Earmolds

##### Style

- ☐ ☐ Phonak CROS [CB]
- ☐ ☐ Phonak Canal Lock [CL]
- ☐ ☐ Phonak Canal [CU]
- ☐ ☐ Phonak Skeleton [SK]
- ☐ ☐ Phonak Half-Shell [HC]
- ☐ ☐ Phonak Full Shell Carved [SC]
- ☐ ☐ Phonak Standard Full Shell [SU]

##### Canal Length

- ☐ ☐ Short [CS]
- ☐ ☐ **Medium [CM]**
- ☐ ☐ Long [CL]
- ☐ ☐ Cut as marked [R.]

##### Options

- ☐ ☐ Soft Coat [SC] (Acrylic only)
- ☐ ☐ Helix Lock
- ☐ ☐ Removal Line [RF]
- ☐ ☐ Bell Bore [A2]
- ☐ ☐ Color Dot [CD]
- ☐ ☐ No Glue [NG] (Tubing)

##### Color

- ☐ ☐ **Clear [CL]**
  - ☐ ☐ Brown
  - ☐ ☐ Tinted Pink
  - ☐ ☐ Specialty Color
- (Color codes below. Silicone only.)

- ☐ ☐ Swirl. Pick up to 3
- (Color codes below. Solid silicone and metallic only.):

##### Material

- ☐ ☐ Acrylic [AC]
- ☐ ☐ **Silicone [S70]**

##### Venting

- ☐ ☐ AOV [A0]
- ☐ ☐ **Large SAV [s30]**
- ☐ ☐ IROS A [IA30]
- ☐ ☐ Large Vent [P30]
- ☐ ☐ Medium [P25]
- ☐ ☐ Small [P20]
- ☐ ☐ Pressure [P12]
- ☐ ☐ No Vent [X]

Vents are drilled parallel as a default. If the physical size of the earmold or acoustic requirements prevent us from using a parallel vent, we will install a merged vent.

##### Tubing

- ☐ ☐ **13 Standard Clear [13M]**
- ☐ ☐ 13 Thick Clear [13T]
- ☐ ☐ Dry Tubing [13D]
- ☐ ☐ Tube Lock [TRS] (Silicone only)

##### Sky B Power Slim Tube II

- ☐ ☐ 00
- ☐ ☐ 0
- ☐ ☐ 1
- ☐ ☐ 2
- ☐ ☐ 3

Available with Sky B-SP and Sky B-UP only

#### Earmold Specialty Color Options

##### Solid Silicone



##### New Metallic Colors



### Step 4: Remotes and Wireless Accessories

#### Paradise / Marvel

- ☐ TV Connector
- ☐ Phonak PartnerMic™
- ☐ Roger Select™ iN
- ☐ Phonak Remote Control
- ☐ Roger On™ iN
- ☐ Roger Table Mic II iN

#### Belong

- ☐ Phonak ComPilot II

### Step 5: Notes and Special Instructions

- ☐ Call if changes are required
- ☐ No phone call required to make changes