

Moxi RIC and Custom Ear Piece Order Form



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Step 1 Ship to

Rush 24 Hour Rush (additional charge)

Ship to account number _____

Account name _____

Address _____

City _____ State _____ Zip code _____

Third party bill to _____

Purchase order number _____

Medicaid number _____

Contact information

Date _____

Contact name _____

Email _____

Step 2 Patient information

First _____ Age _____

Last _____

Patient audiogram

| | 250 Hz | 500 Hz | 1000 Hz | 2000 Hz | 3000 Hz | 4000 Hz |
|-------|--------|--------|---------|---------|---------|---------|
| Left | | | | | | |
| Right | | | | | | |

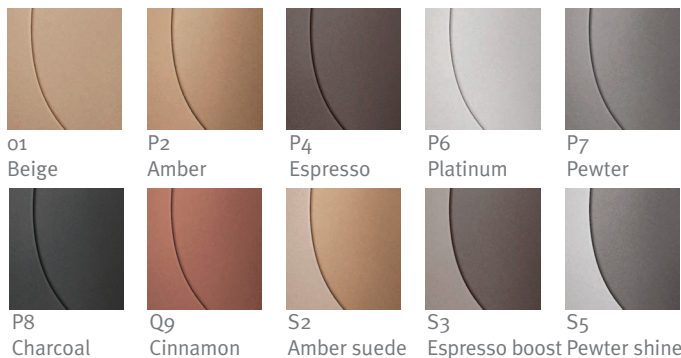
Step 3 Hearing instrument selection

Please add to order Already have the following

| | 9 | 7 | 5 | 3 |
|-------------|---|---|---|---|
| Moxi Fit | <input type="checkbox"/> L <input type="checkbox"/> R | <input type="checkbox"/> L <input type="checkbox"/> R | <input type="checkbox"/> L <input type="checkbox"/> R | <input type="checkbox"/> L <input type="checkbox"/> R |
| Moxi Jump R | <input type="checkbox"/> L <input type="checkbox"/> R | <input type="checkbox"/> L <input type="checkbox"/> R | <input type="checkbox"/> L <input type="checkbox"/> R | <input type="checkbox"/> L <input type="checkbox"/> R |

Color

- | | | |
|--|---|--|
| <input type="checkbox"/> Beige (01) | <input type="checkbox"/> Pewter (P7) | <input type="checkbox"/> Espresso boost (S3) |
| <input type="checkbox"/> Amber (P2) | <input type="checkbox"/> Charcoal (P8) | <input type="checkbox"/> Pewter shine (S5) |
| <input type="checkbox"/> Espresso (P4) | <input type="checkbox"/> Cinnamon (Q9) | |
| <input type="checkbox"/> Platinum (P6) | <input type="checkbox"/> Amber suede (S2) | |



Step 4 Custom ear piece options

| Shell style | S 111/46 | M* 114/50 | P 122/58 | UP 130/67 |
|---|---|---|---|---|
| SlimTip, Hollow (Acrylic) o62-0006-01 | <input type="checkbox"/> L <input type="checkbox"/> R | <input type="checkbox"/> L <input type="checkbox"/> R | <input type="checkbox"/> L <input type="checkbox"/> R | NA |
| RIC Secure Fit (RSF) (Soft Silicone) o62-0007-01 | <input type="checkbox"/> L <input type="checkbox"/> R | <input type="checkbox"/> L <input type="checkbox"/> R | <input type="checkbox"/> L <input type="checkbox"/> R | NA |
| cShell (Acrylic) o62-0008-01 | <input type="checkbox"/> L <input type="checkbox"/> R | <input type="checkbox"/> L <input type="checkbox"/> R | <input type="checkbox"/> L <input type="checkbox"/> R | <input type="checkbox"/> L <input type="checkbox"/> R |

*Default

Receiver length

0 L R 1 L R 2 L R 3 L R

Shell color (hard shell)

- Pink (26)
- Tan (14)
- Cocoa (22)
- Brown (28)
- Clear (21)
- Blue/Red
- Trans. pink (T)
- Trans. brown (N)

cShell Faceplate color (hard shell only)

- Pink (26)
- Tan (14)
- Cocoa (22)
- Brown (28)
- Clear (13)

Venting

- L R Intellivent (audiogram required) (AO)
- L R Pressure vent SAV 1.2 mm (S12)
- L R 2.0 mm SAV (S20)
- L R 2.5 mm SAV (S25)
- L R 3.0 mm SAV (S30)
- L R IROS vent (S, IA)
- L R No vent (X)

Wax system

- L R None L R Extended Receiver Tube*
 - L R UH wax guard (CS) L R Wax Spring*
- Default wax system for SlimTip and cShell *cShell only

Finish

- Gloss (HC) (standard)
- Satin (SA)

Shell options

- L R Removal filament (RF)
- L R Canal lock (CL)
- L R Skeleton Lock (SL)

Step 5 Wireless accessories

- TV Connector (076-5049-0611)



Step 6 Special instructions

- Please send: Shipping labels Order forms
 Impression boxes Repair forms