

Government Agencies CATEGORY 1 CUSTOM ORDER FORM



Patient Last Name _____ Last Four SSN _____ Date _____

CIRCUITS

Radius 8

CUSTOM MODELS

ITE Canal CIC
 Half Shell Mini Canal

OPTIONS • SELECT ONE

Directional Microphones (Not available on Mini Canal or CIC)
 Induction Coil
 Automatic Telephone Response

FACEPLATE OPTIONS

Memory Button CROS (N/A with directional mic)
 Real Ear Ready BICROS (N/A with directional mic)
 On/Off Switch

FACEPLATE COLOR

Pink Medium Brown Chestnut Brown
 Light Brown Dark Brown

OPTIONAL VOLUME CONTROLS

No VC Raised VC (N/A on CIC)
 Screw Set VC (N/A on Radius 16 with Memory Button) Analog VC

SHELL OPTIONS

SHELL COLOR

Pink Red
 Light Brown Blue
 Clear

WAX PREVENTION

Extended Receiver Tube
 Canal Bell (ITE-Mini Canal)
 Hear Clear
 Biconic Wax Guard

SHELL OPTIONS

Canal Lock Hypoallergenic
 Helix Lock Microphone Cover
 Removal Notch Dull / Matte Finish
 CIC Removal Line Removal Handle
 Shallow Shell

VENTING

No Vent Dual Vents (CIC Only)
 IROS Vent Large SAV
 Semi-IROS Vent Medium SAV
 BAV (CIC Only) Small SAV

	125	250	500	1000	2000	4000	8K
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10							
20							
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60							
70							
80							
90							
100							
110							

SPECIAL INSTRUCTIONS

REQUESTED MATRIX COORDINATES

SSPL Gain SSPL Gain

BILL TO _____ **ACCOUNT NO.** _____

SHIP TO _____ **ACCOUNT NO.** _____

Contact _____

Contact _____

Email _____ Fax _____

Email _____ Fax _____

Check No. _____ P.O. No. _____

Amount _____

Government Agencies CATEGORY 2 CUSTOM ORDER FORM



Patient Last Name _____ Last Four SSN _____ Date _____

CIRCUITS

Radius 16 Radius 12

CUSTOM MODELS

ITE Canal CIC
 Half Shell Mini Canal

OPTIONS • SELECT ONE

Directional Microphones (Not available on Mini Canal or CIC)
 Induction Coil
 Automatic Telephone Response

FACEPLATE OPTIONS

Memory Button CROS (N/A with directional mic)
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