

Moxi RIC and Custom Ear Piece Order Form

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unitron[™]

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 name _____

Last name _____

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™ B-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
Moxi B-RT	<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 B-312	<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

- Sand (R8) Espresso (P4) Pewter (P7)
 Amber (P2) Platinum (P6) Charcoal (P8)



Step 4 Custom ear piece options

Shell style	S 111/47	M* 114/51	P 122/59	UP 132/71
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

00 L R 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) Default for SlimTip; only color option for silicone
 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 Custom large (3L)
 L R No vent (X)

Wax system

- L R None L R Extended Receiver Tube*
 L R UH wax guard (CS) n/a with RSF L R Wax Spring* *cShell only

Finish

- Gloss (HC) (standard) No Lacquer (NL)

Shell options

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

Step 5 Wireless accessories

- TV Connector (076-5049-0611) PartnerMic (076-5050-P811)
 Remote Control (076-0066-T9)



Step 6 Special instructions

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