

| Your Information | Step 1: Ship to Information | | | | | | | | | | Step 2: Patient Information | | | | | | | | | |
|------------------|-----------------------------|--|--|--|---------------|--------|--|--|------|--|-------------------------------------|--|-----|-----|----|----|----|----|----|----|
| | Ship to Account: | | | | | | | | | | First Name: | | | | | | | | | |
| | Account Name: | | | | | | | | | | Last Name: | | | | | | | | | |
| | Address: | | | | | | | | | | Age: | | | | | | | | | |
| | | | | | | | | | | | Last 4 digits of Social Security #: | | | | | | | | | |
| | City: | | | | | State: | | | Zip: | | Audiometric Information (required) | | | | | | | | | |
| | Phone #: | | | | | | | | | | Hz: | | 250 | 500 | 1k | 2k | 3k | 4k | 6k | 8k |
| | Contact Name: | | | | | | | | | | AC Right: | | | | | | | | | |
| | Email (required): | | | | | | | | | | AC Left: | | | | | | | | | |
| | Bill to Account: | | | | | | | | | | | | | | | | | | | |
| Date: | | | | | Fitting Date: | | | | | | | | | | | | | | | |

| Opn 1 Invisibility Non-Wireless | Style | Battery | L | | R | | Push button | | Volume wheel | | Auto Phone | | T-Coil/ Auto-Coil | | Power (100 dB) | | Connectivity Accessories (*Bluetooth required) |
|---------------------------------------|-------|---------|---|---|---|---|-------------|---|--------------|---|------------|---|----------------------|---|----------------|--|---|
| | | | L | R | L | R | L | R | L | R | L | R | L | R | | | |
| IIC | 10 | | | | | | | | | | | | | | | | -----Not Available----- |
| CIC | 10 | | | | | | | | | | | | | | | | -----Not Available----- |

| Opn 1 NFMI (Ear to Ear Wireless) | Style | Battery | L | | R | | Push button | | Volume wheel | | Auto Phone | | T-Coil/ Auto-Coil | | Power (100 dB) | | Connectivity Accessories (*Bluetooth required) |
|---|-------|---------|---|---|---|---|-------------|---|--------------|---|------------|---|----------------------|---|----------------|---|---|
| | | | L | R | L | R | L | R | L | R | L | R | L | R | L | R | |
| CIC | 10 | | | | | | | | | | | | | | | | -----Not Available----- |

| Opn 1 Bluetooth 2.4 GHz + NFMI | ITC† | 312 | L | | R | | Push button | | Volume wheel | | Auto Phone | | T-Coil/ Auto-Coil | | Power (100 dB) | | <input type="checkbox"/> ConnectClip <input type="checkbox"/> Remote Control 3.0 <input type="checkbox"/> TV Adapter 3.0 <input type="checkbox"/> Phone Adapter 2.0 |
|---|------------------|-----|---|--|---|--|-------------|--|--------------|--|------------|--|----------------------|--|----------------|--|--|
| | HS (half shell)† | 312 | | | | | | | | | | | | | | | |
| | | 13 | | | | | | | | | | | | | | | |
| | FS (full shell)† | 312 | | | | | | | | | | | | | | | |
| | | 13 | | | | | | | | | | | | | | | |

For Tinnitus SoundSupport™, a push button and NFMI is necessary.
 †Push button is required to activate Flight Mode
 Note: Aids without Bluetooth need to be cabled for programming

| Product Options | Faceplate | Shell Color | Canal Length (Factory select unless marked) | Vent Size (Factory select unless marked) | | |
|-----------------|---|--------------------------------------|--|---|-----------------------------------|--|
| | <input type="checkbox"/> Black (IIC Only) | <input type="checkbox"/> Red or Blue | <input type="checkbox"/> As marked | <input type="checkbox"/> Small 1.0 | <input type="checkbox"/> No Vent | |
| | <input type="checkbox"/> Beige | <input type="checkbox"/> Clear | <input type="checkbox"/> Short (before 1 st bend) | <input type="checkbox"/> Medium 1.4 | <input type="checkbox"/> Pressure | |
| | <input type="checkbox"/> Light Brown | <input type="checkbox"/> Beige | <input type="checkbox"/> Medium (at 1 st bend) | <input type="checkbox"/> Large 2.4 | | |
| | <input type="checkbox"/> Medium Brown | <input type="checkbox"/> Light Brown | <input type="checkbox"/> Long (before 2 nd bend) | <input type="checkbox"/> Extra Large | | |
| | <input type="checkbox"/> Dark Brown | | <input type="checkbox"/> Deep (at 2 nd bend) | <input type="checkbox"/> Largest Possible | | |

Please Send:

- Return Impressions
- Impression Boxes
- Shipping Bags
- Airbills
- New Cables
- New Flex Strips
- 10 Battery Adapters for programming
- BTE Product Order Forms
- Custom Product Forms
- RITE Mold Forms
- RITE Product Order Forms
- Service Order Forms

Special Instructions: _____

| Other Options | Retention | Removal | Tactile | Other |
|--|-------------------------------------|---|---|--|
| | <input type="checkbox"/> Canal Lock | <input type="checkbox"/> Removal Cord (Std IIC/CIC) | <input type="checkbox"/> Raised Push Button | <input type="checkbox"/> Name on Shell |
| | <input type="checkbox"/> Helix Lock | <input type="checkbox"/> Removal Notch | <input type="checkbox"/> Raised VC Wheel | <input type="checkbox"/> Color Dots |
| | <input type="checkbox"/> Soft Coat | | | <input type="checkbox"/> Matte Finish |
| <input type="checkbox"/> Clothing Loop | | | | |

INTERNAL USE ONLY
DO NOT WRITE

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Custom Order Form - Reference Guide

Offering a full range of custom styles and features for Opn 1 there is a custom product for all your patient's needs.

In addition to size and standard custom options, the Velox Custom Portfolio offers wireless and streaming choices – including ear to ear wireless (NFMI) and ear to ear wireless + Bluetooth (2.4 GHz).



How to Choose:

Invisibility

Choose an IIC or CIC for optimal discreetness, offered as Non-Wireless models only.*

(NFMI) Ear to Ear Wireless

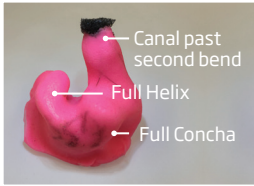
Choose a CIC for enabling binaural instrument communication, maximizing Oticon's audiological features.* Wireless programming not available with NFMI only devices.

Bluetooth (2.4 GHz) + NFMI

Choose an ITC, HS, or FS for direct Bluetooth streaming to both ears and binaural instrument communication, fully compatible with all connectivity devices including ConnectClip, Remote Control 3.0, Phone Adapter 2.0, TV Adapter 3.0 and ON App. Free form openings, takes advantage of space to ensure largest vent possible.

*Connectivity accessories, including remote control, and ON App are not available.

Getting the Fit Right - It Starts with the Impression



Be sure to provide an impression with a full concha and helix area and a canal past the second bend regardless of the model selected.

Vents are calculated in Genie 2 unless otherwise specified in the "Vent Size" or "Special Instruction" section on the order form.

Accessories



T-Cap

The nano-coated, wax-repellent T-Cap filter is used to protect the microphone for all miniature custom styles using size 10 batteries.



O-Cap

The new nano-coated O-Cap microphone protection filter is designed to reject wax and fits all instruments using battery size 312 and 13.



ProWax miniFit

Providing advanced receiver port protection, the ProWax miniFit filter fits all styles in the new Oticon product family.



T-Cap (mic cover)

Gray compact/Black tools

Part Number (1 pc):

123328 - Beige
123330 - Light Brown
123331 - Med Brown
123329 - Dark Brown
123327 - Black



O-Cap (mic cover)

Gray compact/Black tools

Part Number (1 pc):

128003 - Beige
128004 - Light Brown
128005 - Med Brown
128006 - Dark Brown



ProWax miniFit

Gray "turtle"/Black tools

Part Number (1 pc):

128057