STARKEY EDGE AI & GENESIS AI CUSTOM ORDER FORM

HIGHLIGHTED / GREEN AREAS MUST BE COMPLETED FOR APPROPRIATE MATRIX SELECTION

STEP 1 - ORDER							
BILL TO:	ACCOUNT NUMBER:				ACCO	ACCOUNT NUMBER:	
Attention to: ordering-glencoe@starthearing.com	E6048 (Insurance & Work	ers Comp)	ADDRESS:				
			P.O. BOX:				
			CONTACT:		PHOI	PHONE:	
SERVICE OPTIONS (ADDITION	EMAIL:		FAX:				
SAME-DAY SERVICE ONE-DAY SERVICE			WARRANTY OPTIONS (REPAIR/LOSS & DAMAGE)				
STEP 2 - PATIENT (FILL OUT P	PATIENT'S NAME, DOB/AGE AND	DATE)	2ND YEA	AR 3RD YEAR	4TH YEAR	5TH YEAR	
REFERRING ORGANIZATION							_
FIRST NAME	LAST NAME			PATIENT DOB/AG	iE	DATE	
TEST DATA MCLL:	MCL R: UCL L:	UCL R:		HEARING AID	HISTORY		
Air RIGHT				LEFT PREVIOUS US	SER YES	NO PREVIOUS VENT SI	IZE
FREQUENCY 250 500 7 Air LEFT Bone	50 1K 2K 3I	C 4K 6I	K 8K	OUTPUT/MAKE	GAIN/MODEL	SERIAL NO. (IF STARKEY)	
STEP 3 - HEARING AID PR	RODUCT (BOLD INDICATES TH	E DEFAULT)		FACEPLATE/SH	HELL OPTIONS (CH	OOSE ONE)	
HEARING AID ORDER REQUIREMENTS FILL IN SELECTION BELOW				FACEPLATE COLOR \ PINK		WAX PREVENTION HEAR CLEAR	
TECHNOLOGY	WIRELESS STYLE OPTION		LIGHT BROWN		EXTENDED RECEIVER TUBE		
24 EDGE AI 20 GENESIS AI 16 12 (FOR GENESIS AI O	ITE R (IN-THE-EAR REC HS R (HALF-SHELL REC ITC R (IN-THE-CANAL F NLY) CIC (COMPLETELY-IN-C	CHARGEABLE) RECHARGEABLE)	CHEST DARK BLACK SHELL COLO	MEDIUM BROWN CHESTNUT DARK BROWN BLACK SHELL COLOR PINK		REMOVAL & FINISH OPTIONS REMOVAL NOTCH* DULL FINISH SHELL (DFS) DULL FINISH FACEPLATE (DF) REMOVAL HANDLE	
GAIN OPTIONS				!	CA	ANAL LOCK (NOT AVAILABLE IN ITE)	
MANUFACTURER SELECT	, a, a a, a , a , a			LIGHT BROWN *NOT AVAILABLE IN IIC OR CIC			

-L (IIC ONLY) L (IIC, CIC, ITC R, HS R) UP (CIC, ITC R, HS R, ITE R)

MANUFACTURER WILL SELECT OPTION BASED ON AUDIOGRAM, STYLE, AND CANAL SIZE OR IF NO GAIN IS SELECTED MANUFACTURER MAY CHANGE THE SELECTED GAIN OPTION TO PROVIDE THE BEST DEVICE POSSIBLE.

USER CONTROLS (CHOOSE ONE)

DIGITAL ROTARY PUSH BUTTON (VC OR MEMORY)

DIGITAL ROTARY + PUSH BUTTON'

NO VENT

NO USER CONTROL

CHARGEABLE OPTIONS

DIRECTIONAL* INDUCTION COIL**

*FOR ITE R. HS R. ITC R ONLY

3 VENT

VENTING OPTIONS CANAL TEXTURE NORMAL MANUFACTURER SELECT***

1 VENT OPEN/BAV *SELECTS THE OPTIMAL COMBINATION OF RECEIVER AND VENT BASED OFF OF HEARING LOSS, PATIENT HISTORY AND SIZE AND SHAPE OF THE EAR.

VC OPTIONS

STACKED VC*

SOFT

HARD

RIGID

UNKNOWN

STEP 4 - ORDER CUSTOM CHARGER

(BOLD INDICATES THE DEFAULT)

RED/BLUE

BLACK

CUSTOM CHARGER 2.0 (WITHOUT ONBOARD BATTERY) PREMIUM CUSTOM CHARGER 2.0 (WITH ONBOARD BATTERY. ADDITIONAL CHARGE APPLIES)

