

# REMOTE CARE FITTING ORDER FORM



signiaremote@signiausa.com

Warranty  24-Month  36-Month

Account #

Date

P.O. No.

HCP Contact Name

Medicaid ID #

HCP Email & Phone #   
REQUIRED

Patient Name

Last, First, Middle initial  
or Clinic ID / Patient ID

Drop ship address  Patient  Provider

Cannot ship to PO Box / NO  
PAPERWORK will go to the  
patient on delivery

### Hearing Thresholds

	250 Hz	500 Hz	1 kHz	2 kHz	3 kHz	4 kHz	6 kHz	8 kHz
R								
L								

Note: Highlighted fields are required audiometric values. If 500 not available, default will be the 1000 threshold.

RIC Technology	Styletto X	Active X	Silk™ X Click CIC
	R L		R L
	7X <input type="checkbox"/> <input type="checkbox"/>	Active X <input type="checkbox"/>	7X <input type="checkbox"/> <input type="checkbox"/>
	5X <input type="checkbox"/> <input type="checkbox"/>	Active Pro X <input type="checkbox"/>	5X <input type="checkbox"/> <input type="checkbox"/>
	3X <input type="checkbox"/> <input type="checkbox"/>		3X <input type="checkbox"/> <input type="checkbox"/>
	2X <input type="checkbox"/> <input type="checkbox"/>		2X <input type="checkbox"/> <input type="checkbox"/>
	1X <input type="checkbox"/> <input type="checkbox"/>		1X <input type="checkbox"/> <input type="checkbox"/>
Receiver Strengths	S/45 <input type="checkbox"/> <input type="checkbox"/>	Active X Colors	<input type="checkbox"/> <input type="checkbox"/>
	M/60 <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Black	<input type="checkbox"/>
	P/70 <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Snow White/Rose Gold	<input type="checkbox"/>
		<input type="checkbox"/> Black/Silver	<input type="checkbox"/>
Receiver/Thin Tube Length	0 <input type="checkbox"/> <input type="checkbox"/>	Silk X Colors	
	1 <input type="checkbox"/> <input type="checkbox"/>	(Shells are Red and Blue. Select Faceplate color)	
	2 <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Mocha (fp)	<input type="checkbox"/>
	3 <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Black (fp)	<input type="checkbox"/>
	4* <input type="checkbox"/> <input type="checkbox"/>		
* 4 length available for M only		Accessories	
Colors	<input type="checkbox"/> Black	<input type="checkbox"/> StreamLine™ TV	
	<input type="checkbox"/> Cosmic Blue/Rose Gold	<input type="checkbox"/> StreamLine™ Mic	
	<input type="checkbox"/> Snow White/Rose Gold	<input type="checkbox"/> miniPocket™	
	<input type="checkbox"/> Black/Silver		
	<input type="checkbox"/> White		

Select option for EACH hearing aid below  
(one card for EACH hearing aid)

Dome	Vented	Closed
4mm	<input type="checkbox"/>	
6mm		<input type="checkbox"/>
8mm	<input type="checkbox"/>	<input type="checkbox"/>
10mm	<input type="checkbox"/>	<input type="checkbox"/>
8/10 Double		<input type="checkbox"/>
10/12 Double		<input type="checkbox"/>
Semi Open	<input type="checkbox"/>	
Sleeve	Vented	Closed
XS	<input type="checkbox"/>	<input type="checkbox"/>
S	<input type="checkbox"/>	<input type="checkbox"/>
M	<input type="checkbox"/>	<input type="checkbox"/>
L	<input type="checkbox"/>	<input type="checkbox"/>

If multiple sizes of domes and/or sleeves are selected, fitting dome or sleeve will default to largest size.

RIC default:  
- Gain default will be M  
- Receiver length default will be Size 2  
- Dome size default will be 8mm Vented

Active X:  
- Sleeve size default will be M Closed

Silk X:  
- Sleeve size default will be S Closed

Other Special Notes:

# REMOTE CARE FITTING ORDER FORM (EARWEAR 3.0)



signiaremote@signiausa.com

Warranty  24-Month  36-Month

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HCP Email & Phone #   
REQUIRED

Patient Name

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Hearing Thresholds								
	250 Hz	500 Hz	1 kHz	2 kHz	3 kHz	4 kHz	6 kHz	8 kHz
R								
L								

Note: Highlighted fields are required audiometric values. If 500 not available, default will be the 1000 threshold.

RIC and BTE Technology	Styletto AX		Pure <sup>®</sup> Charge&Go AX		Pure <sup>®</sup> Charge&Go TAX		Motion Charge&Go X		Motion Charge&Go PX	
	R	L	R	L	R	L	R	L	R	L
	7X	<input type="checkbox"/>	7AX	<input type="checkbox"/>	7AX	<input type="checkbox"/>	7X	<input type="checkbox"/>	7X	<input type="checkbox"/>
	5X	<input type="checkbox"/>	5AX	<input type="checkbox"/>	5AX	<input type="checkbox"/>	5X	<input type="checkbox"/>	5X	<input type="checkbox"/>
	3X	<input type="checkbox"/>	3AX	<input type="checkbox"/>	3AX	<input type="checkbox"/>	3X	<input type="checkbox"/>	3X	<input type="checkbox"/>
							2X	<input type="checkbox"/>	2X	<input type="checkbox"/>
							1X	<input type="checkbox"/>	1X	<input type="checkbox"/>

Select your options for EarWear 3.0 (one card for EACH hearing aid)

EarTips 3.0	Open	Tulip
5mm	<input type="checkbox"/>	
7mm	<input type="checkbox"/>	
8mm		<input type="checkbox"/>
10mm	<input type="checkbox"/>	
12mm		<input type="checkbox"/>

Charger	Charger
<input type="checkbox"/> Portable <input type="checkbox"/> Dry&Clean	<input type="checkbox"/> Standard <input type="checkbox"/> Portable <input type="checkbox"/> Dry&Clean <input type="checkbox"/> Standard Open <input type="checkbox"/> Portable <input type="checkbox"/> Dry&Clean

Sleeve	Vented	Closed	Power
XS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
L**	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

\*\* L Sleeves may cause hearing aid to not fit optimally within the Styletto AX portable charger.

Receiver Strength and Thin Tube Diameter	Receiver Strength and Thin Tube Diameter
S/46 <input type="checkbox"/>	S/46 <input type="checkbox"/>
M/60 <input type="checkbox"/>	M/60 <input type="checkbox"/>
P/65 <input type="checkbox"/>	P/65 <input type="checkbox"/>
	<input type="checkbox"/> Standard <input type="checkbox"/> Power

Receiver/Thin Tube Length	Receiver/Thin Tube Length
0 <input type="checkbox"/>	0 <input type="checkbox"/>
1 <input type="checkbox"/>	1 <input type="checkbox"/>
2 <input type="checkbox"/>	2 <input type="checkbox"/>
3 <input type="checkbox"/>	3 <input type="checkbox"/>
4* <input type="checkbox"/>	4 <input type="checkbox"/>

\*Length 4 receiver may cause hearing aid to not fit optimally within the Styletto AX portable charger.

- RIC default:**
- Gain default will be M
  - Receiver length default will be Size 2
  - Dome size default will be 8mm Tulip
- BTE default:**
- Thin Tube 3.0 Length 2
  - Sleeve Small Closed

Styletto AX Colors	Colors
<input type="checkbox"/> Black/Fine Gold	<input type="checkbox"/> Beige
<input type="checkbox"/> Black/Silver	<input type="checkbox"/> Granite
<input type="checkbox"/> Black/Graphite	<input type="checkbox"/> Grey
<input type="checkbox"/> Snow White/Rose Gold	<input type="checkbox"/> Black
<input type="checkbox"/> Snow White/Fine Gold	<input type="checkbox"/> Pearl White
<input type="checkbox"/> Snow White/Silver	<input type="checkbox"/> Sandy Brown
<input type="checkbox"/> Cosmic Blue/Rose Gold	<input type="checkbox"/> Dark Champagne
<input type="checkbox"/> Cosmic Blue/Fine Gold	<input type="checkbox"/> Deep Brown
<input type="checkbox"/> Cosmic Blue/Silver	<input type="checkbox"/> Silver Hero
<input type="checkbox"/> Black/Black	<input type="checkbox"/> Rose Gold
<input type="checkbox"/> Beige/Beige	<input type="checkbox"/> Fine Gold
<input type="checkbox"/> Deep Brown/Deep Brown	<input type="checkbox"/> Graphite
	<input type="checkbox"/> Silver

- Accessories**
- StreamLine™ TV
  - StreamLine™ Mic
  - miniPocket™

Other Special Notes: