

# OCUTECH®

## VES®-K (Manual Focus) ORDER FORM

**VES®-K****FAX: 919 967-8146**

ACCOUNT NAME \_\_\_\_\_ DATE \_\_\_\_\_  
PRESCRIBER'S NAME \_\_\_\_\_ PATIENT NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_ PATIENT AGE \_\_\_\_\_  M  F  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ P.O. NO. \_\_\_\_\_  
PHONE \_\_\_\_\_ OFFICE CONTACT \_\_\_\_\_  
E MAIL ADDRESS \_\_\_\_\_ FAX \_\_\_\_\_

**1 TYPE of ORDER:**  PATIENT SYSTEM  DEMONSTRATOR KIT: *Select power(s) below*

**2 TELESCOPE**

Telescope for which eye?  OD  OS Exact PD for position of telescope eyepiece:

Telescope Power  3x  4x  6x

**3 CARRIER LENSES**

OD: ADD Distance PD OD OS

OS: ADD Near PD OD OS

Lens Type: Material:  CR-39  Hi-Index  Other: Seg. height

Special instructions: (Tint, coatings, etc.)

**4 EYEPIECE CORRECTION**  NO  YES Specify Rx:

**5 FRAME** (Choose One Style, Eye Size, Temple Style and Length, and Color.) VISIT OUR WEBSITE FOR COMPLETE SELECTION

**Ocutech Unisex** Frame Size:  49/18  51/18  53/18  Gold  Bronze  Silver

**Ocutech K Style** Frame Size:  51/18  53/18  55/18  57/18  59/18  Gold  Bronze  Silver

**Ocutech Sleek** Frame Size:  50/18  53/18  Silver  Gun Metal

Temples Skull  135  140  145 Cable  155  160  165

**6 ACCESSORIES**

**Patient Case**  Yes  No

**Slip-Behind Sun Filters**  Gray  Brown  Blue Blocker  Yellow  Set of all four  
(For Ocutech frames only)

Specify eyepiece aperture:  Filter covers eyepiece  Eyepiece not covered by filter

**Filter Cap** Specify color:

**Reading Cap** Specify power:

**7 SPECIAL INSTRUCTIONS:**

**8 AUTHORIZATION:** Credit Card  VISA  MasterCard

Card # Code Exp. Date

Name on Credit Card

Signature Date