



# Flip-Up Bioptic Telescope System ORDER FORM

**OCUTECH® SightScope®**

**FAX: 919 967-8146**

**ACTION REQUESTED:**  Estimate Only  Place Order

DATE \_\_\_\_\_

ACCOUNT NAME \_\_\_\_\_ PATIENT NAME \_\_\_\_\_

PRESCRIBER'S NAME \_\_\_\_\_ PATIENT AGE \_\_\_\_\_  M  F

ADDRESS \_\_\_\_\_ PATIENT DIAGNOSIS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ P.O. NO. \_\_\_\_\_

COUNTRY \_\_\_\_\_ PHONE \_\_\_\_\_ OFFICE CONTACT \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_ FAX \_\_\_\_\_

**1 TYPE of ORDER:**  Frame-Mounted System  Patient Clip-on System  Demonstrator Clip-on System

**2 SIGHTSCOPE TELESCOPE**  1.7x  2.2x For which eye(s)? OD  OS  OU

**SIGHTSCOPE FIELD EXPANDER**  0.5x FE For which eye(s)? OD  OS  OU

**3 CARRIER LENSES**  Supply as specified below  Provide without carrier lenses

OD:	ADD	Distance PD	OD	OS
OS:	ADD	Near PD	OD	OS

Lens Type: \_\_\_\_\_ Material:  CR-39  Hi-Index  Polycarbonate \_\_\_\_\_ Seg. height \_\_\_\_\_

Special instructions: (Tint, coatings, etc.) \_\_\_\_\_

**4 FRAME** (Choose One Style, Frame Size, Temple Style and Length, and Color) VISIT OUR WEBSITE FOR COMPLETE SELECTION

**Ocutech Unisex** Frame Size:  49/18  51/18  53/18 (Available in Bronze and Silver)  Gold  Bronze  Silver

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

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

Temples Skull  135  140  145 Cable  155  160  165

Pediatric  K Style 48/18/140  Unisex 47/18/140  Silver  Bronze

**5 ACCESSORIES** (Cleaning cloth and neckstrap are included with each system order)

Patient Case  Yes  No  Other: \_\_\_\_\_

Slip-behind Sunfilters  Gray  Brown  Yellow

Reading Cap(s)  P{ } ^  UÖ  OÜ  Power: \_\_\_\_\_

**6 SPECIAL INSTRUCTIONS:** \_\_\_\_\_

**7 AUTHORIZATION:** \_\_\_\_\_

Card Type:  VISA  MasterCard Card # \_\_\_\_\_ Code \_\_\_\_\_ Exp. Date \_\_\_\_\_

Name on Credit Card \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_