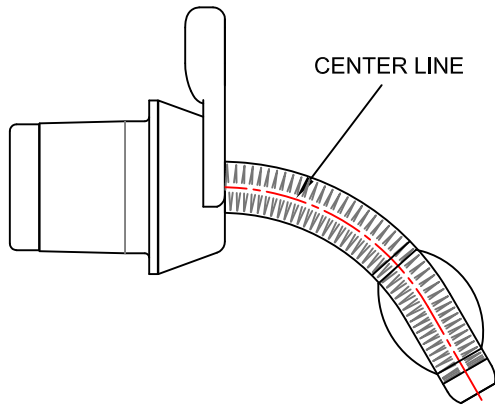
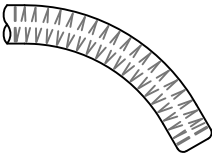

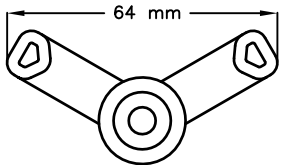

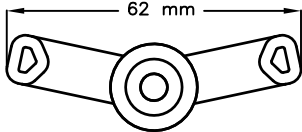


CUSTOMIZED FIXED NECK FLANGE PEDIATRIC & NEONATAL TRACHEOSTOMY TUBE TEMPLATE



AIRWAY TUBING	CUFF OPTIONS	NECK FLANGE OPTIONS
<p>WIRE REINFORCED</p>  <p>AVAILABLE SIZES 2.5-5.5 mm</p>	<p><input type="checkbox"/> LP LOW PROFILE CUFF</p> 	<p><input type="checkbox"/> "V" NECK FLANGE</p> <p>64 mm</p>  <p>PED/NEO SIZES 2.5-5.5mm</p>
<p>AIRWAY TUBING: I.D. _____ mm</p> <p>LENGTH AT CENTER LINE _____ mm</p>	<p><input type="checkbox"/> CUFFLESS</p> 	<p><input type="checkbox"/> LARGE PERFECT FIT NECK FLANGE®</p> <p>62 mm</p>  <p>PED/NEO SIZES 2.5-5.5mm</p>
<p>COMMENTS: _____</p> <p>_____</p> <p>_____</p>		

**SPECIAL ORDERS WILL BE
HANDLED ON AN INDIVIDUAL BASIS**

SHIP TO: _____

CLINICIAN NAME:

SIGNATURE: _____ DATE: _____

DISTRIBUTOR NAME:

ARCADIA APPROVAL:

CONTACT INFORMATION:
ARCADIA MEDICAL CORPORATION
TELEPHONE: 219.779.9431 (USA)

CLINICIAN CREDENTIALS:

COUNTRY:

CUSTOMER P.O. NUMBER:

PATIENT/CLIENT ID:

QUANTITY ORDERED _____ UNIT(S)

REORDER NUMBER:
AMFNF-

FAX OR E-MAIL COMPLETED FORM TO:
FAX: 847.620.2502 (USA)
E-MAIL: info@arcadiamedical.com

NON STERILE PRODUCT: MUST BE STEAM STERILIZED PRIOR TO USE.

CAUTION: FEDERAL (USA) LAW RESTRICTS THIS DEVICE TO SALE BY OR ON THE ORDER OF A PHYSICIAN.
NOTE: ANY REQUIRED MODIFICATIONS WILL BE MADE WITH THE APPROVAL OF THE CLINICIAN.
PLEASE PRINT CLEARLY. ARCADIA MEDICAL WILL REVIEW THE FINISHED TEMPLATE FOR CONSENT.