

BIVONA[®] CUSTOMIZED-CUFFLESS TRACHEOSTOMY TUBE TEMPLATE (USA ONLY)



SELECT TYPE SERVICE

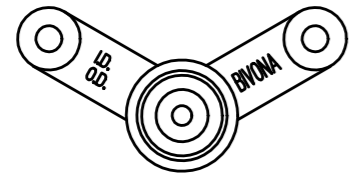
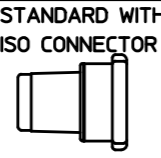
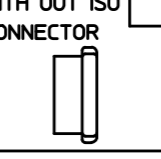
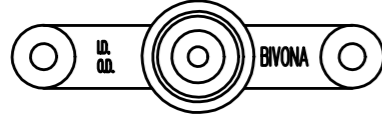
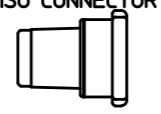
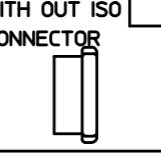
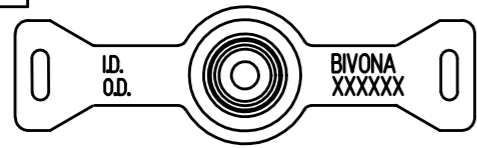
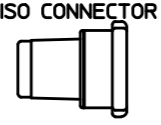
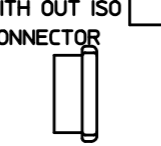
3-4 WEEKS (STERILE)

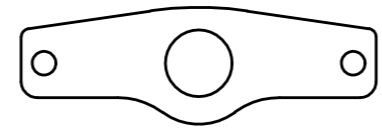
STANDARD SERVICE (NON STERILE)

EXPRESS SERVICE (NON STERILE)

SAME DAY SEVICE (NON-STERILE)

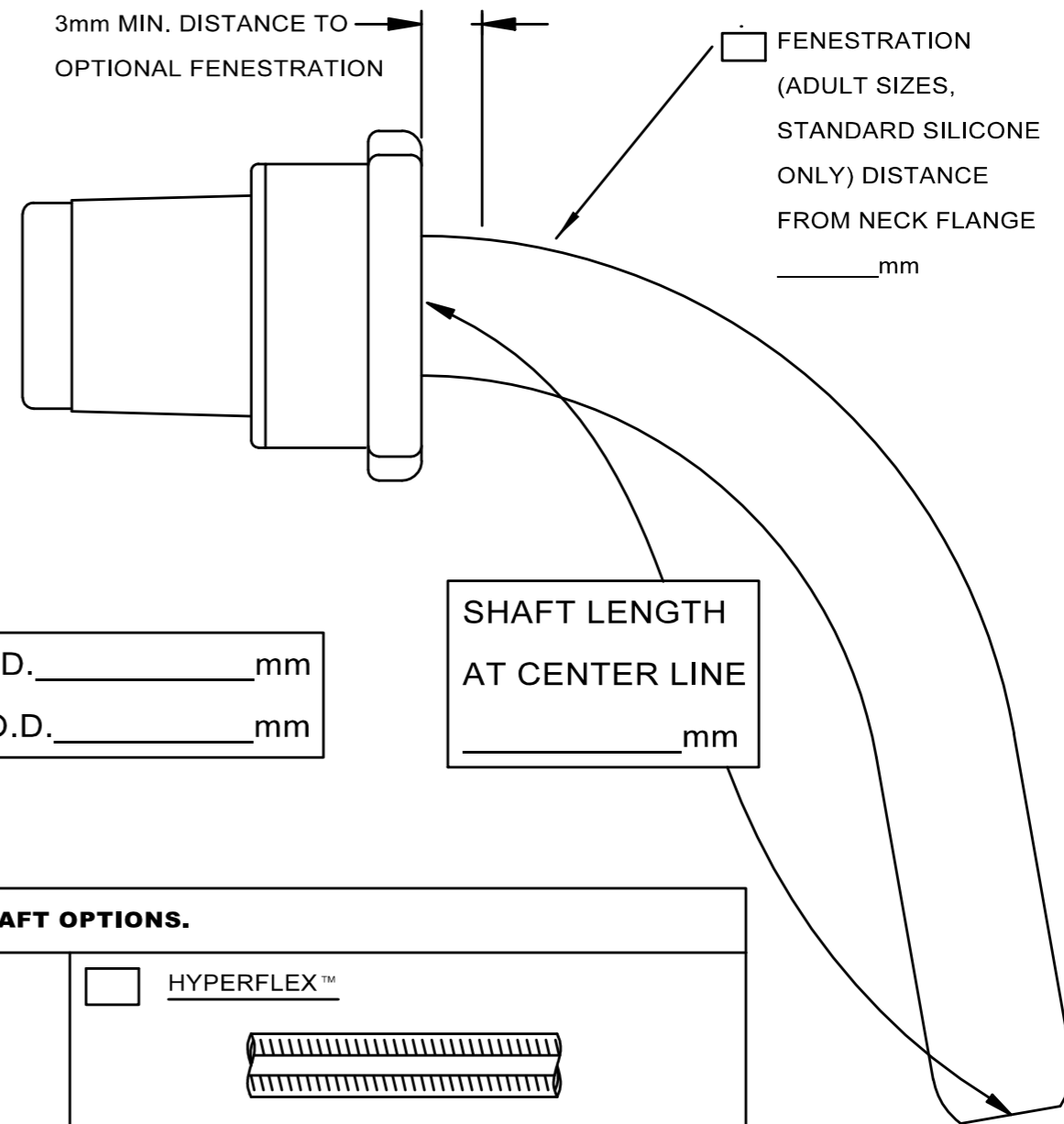
NECK FLANGE OPTIONS.

NECK FLANGE OPTIONS.		SIDE VIEW	
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<input type="checkbox"/>	 <p>FIXED NECK FLANGE AVAILABLE SIZES: 2.5 - 9.5mm</p>	B	<p>STANDARD WITH ISO CONNECTOR</p>  <p>WITH OUT ISO CONNECTOR <input type="checkbox"/></p> 
<input type="checkbox"/>	 <p>FIXED NECK FLANGE AVAILABLE SIZES: 2.5 - 9.5mm</p>	C	<p>STANDARD WITH ISO CONNECTOR</p>  <p>WITH OUT ISO CONNECTOR <input type="checkbox"/></p> 



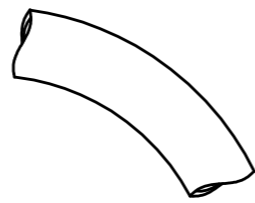
FIXED NECK FLANGE
AVAILABLE SIZES:
2.5 - 9.5mm

WITHOUT ISO CONNECTOR

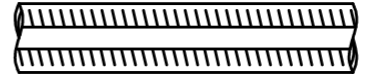


SHAFT OPTIONS.

STANDARD SILICONE



HYPERFLEX™



WIRE REINFORCED
CAN NOT BE FENESTRATED.

CLINICIAN:	DATE:	P.O. NUMBER:	FOR QUESTIONS CALL 1-800-424-8662 (USA ONLY) (001)(219)989 9150 (OUTSIDE USA)	SMITHS-MEDICAL USE ONLY
CLINICIAN SIGNATURE:		METHOD OF PAYMENT:		APPROVAL:
CLINICIAN CREDENTIALS:			FAX COMPLETED TEMPLATES TO (001)(219)989-7435	REORDER#
PATIENT/CLIENT ID:	FACILITY TYPE			

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

Website: www.smiths-medical.com