



2001 Regent Avenue No.#100
FAX: 763-588-0066

RENTAL UNIT ORDER FORM

Minneapolis, MN 55422
TELEPHONE: 800-322-4461

PLEASE NOTE: FOR PATIENTS WHO ARE "SELF-PAY", WE WILL NEED CREDIT CARD INFORMATION. PLEASE INDICATE YOUR PREFERENCE: SEE BELOW FOR CREDIT CARD NUMBER OR CURRENT TECHNOLOGY, INC. SHOULD CONTACT PATIENT

CLINIC NAME & ADDRESS: _____
(SHIPPING ADDRESS)

SHIP TO:
CLINIC
PATIENT

ORDERED BY: _____ DATE NEEDED: _____

TELEPHONE NO. _____ FAX NO. _____

PATIENT NAME: _____ DIAGNOSIS: _____

PATIENT TELEPHONE: _____ ALT. PHONE: _____

CREDIT CARD NO. _____ EXP. DATE: _____ SEC. CODE. _____

NAME ON CARD IF DIFFERENT THAN PATIENT NAME: _____

(s)EMG BIOFEEDBACK DEVICE(S)	MONTHLY RENTAL FEE	PATIENT ADDRESS:
<input type="checkbox"/> TR-10 PATHWAY SINGLE CHANNEL	\$ 60.00	_____
<input type="checkbox"/> TR-20 PATHWAY DUAL CHANNEL	\$100.00	_____
<input type="checkbox"/> MR-10 PATHWAY SINGLE CHANNEL	\$100.00	_____
<input type="checkbox"/> MR-20 PATHWAY DUAL CHANNEL	\$180.00	_____
<input type="checkbox"/> U-CONTROL TTL SINGLE CHANNEL	\$ 60.00	_____

Does your patient have an internal sensor? Yes ___ No ___ If yes, what model is it? _____

(s)EMG & E. STIM ACCESSORIES	PURCHASE PRICE:
<input type="checkbox"/> ADAPTOR FOR INTERNAL SENSORS OR EXT. CABLES FOR THE TR / MR SERIES ABOVE	\$60.00 (N/C DURING RENTAL)
<input type="checkbox"/> #6320 PATHWAY VAGINAL / RECTAL (s)EMG SENSOR	\$38.00
<input type="checkbox"/> #6330 PATHWAY VAGINAL (s)EMG / E. STIM SENSOR	\$44.00
<input type="checkbox"/> #6340 PATHWAY RECTAL (s)EMG / E. STIM SENSOR	\$44.00
<input type="checkbox"/> #5328 PATHWAY EXTENDER CABLES \$45.00	<input type="checkbox"/> #T8820 U-CONTROL EXT. CABLES \$35.00
<input type="checkbox"/> #H59P WHITE CLOTH SINGLE SNAP ELECTRODES	<input type="checkbox"/> #6750 PATHWAY ELECTRODES
[FIRST SET (2 PKG.) IS SENT AT NO CHARGE; H59P-30 \$8.00 (30/PKG) OR 6750-4 \$4.80 (4/PKG.)]	
<input type="checkbox"/> #T6050 TTL VAGINAL (s)EMG SENSOR	\$50.00
<input type="checkbox"/> #T6051 TTL RECTAL (s)EMG SENSOR	\$50.00
<input type="checkbox"/> #PFS-041 LIBERTY VAGINAL E. STIM SENSOR	<input type="checkbox"/> #PFS-042 LIBERTY EXTENDED HANDLE VAGINAL E. STIM SENSOR
<input type="checkbox"/> #PFS-043 LIBERTY RECTAL E. STIM SENSOR	NOTE: ALL PFS LIBERTY SENSORS ARE \$75.00

PELVIC FLOOR E. STIM DEVICE(S)	MONTHLY RENTAL FEE
<input type="checkbox"/> PATHWAY STM-10	\$ 60.00
<input type="checkbox"/> LIBERTY PFS-200	\$ 60.00

Does your patient have an internal sensor? Yes ___ what model is it? _____
No ___

ALL RENTAL FEES APPLY TOWARD THE PURCHASE PRICES BELOW:
TR-10 \$505. MR-20 \$1450.
TR-20 \$825. LIBERTY \$ 375.
MR-10 \$750. STM-10 \$ 475.
U-Control \$350.

