

IMI Custom Cannula Order Form

Please consider the following options when placing your order:

Quantity: Specify the quantity needed
Tip: Specify your tip
Length: Specify your length

Orifice Pattern: Specify your hole pattern
Diameter: Specify your diameter
Hub: Specify the handle you will be using

Orifice Patterns

Aspiration Orifice Patterns



MER - Mercedes



III - Three



VEG - Vegas



TU - Two



FOU - Fournier



STD - Standard



EDG - Edger



CO - Cobra



SPI - Spiral



BEK - Basket



GAS - Gasparotti



MAN - Man



MILL - Modern Illouz



LKC - Lillis Keel Cobra



CAN - Candy Cane



SPA - Spatula



2SPA - Two Hole Spatula



SAY - Saylan



GF - Georgio Fisher



THW - Two Hole Wedge



MB - Mangubat



BLU - Blugerman



PIT - Pitanguy



MSPI - Modern Spiral



KC - Keel Cobra

Infiltration Orifice Patterns



BAN - Body Anesthesia Needle



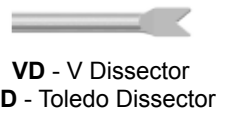
GAN - Garden Spray



MSPA - Multi Hole Spray



FAN - Facial Anesthesia Needle



VD - V Dissector
TD - Toledo Dissector



MIN 1 - Micro Style I



MIN 2 - Micro Style II



MIN 3 - Micro Style III



MIN V - Micro Style V

All Cannulas are custom made, additional orifice patterns available

Tip Options



PTD - Pointed



BLT - Blunt



BUL - Bullet



WDG - Wedge



CO - Cobra



SPA - Spatula

Hub Options



BSW - Blue Swivel Handle



LL - Luer Lock Hub



QS-S - Small Quick Screw Hub



QS-L - Large Quick Screw Hub



SYR - Syringe Hub








All cannulas are custom made, additional options available.

IMI Custom Cannula Order Form

CUSTOM CANNULAS

QTY	ORIFICE PATTERN	TIP	DIAMETER	LENGTH	HUB	NOTES	TOTAL
							\$
							\$
							\$
							\$
							\$

HANDLES, ETC.

QTY	ITEM	ITEM NUMBER	DESCRIPTION	TOTAL
		IM-QSD-L	Delrin Aspiration Handle - Large <input type="checkbox"/> Swivel <input type="checkbox"/> Non-Swivel	\$
		IM-QSD-S	Delrin Aspiration Handle - Small <input type="checkbox"/> Swivel <input type="checkbox"/> Non-Swivel	\$
		IM-LAHD	Luer Lock Aspiration Handle	\$
		IM-TH	Toomey Syringe Handle	\$
		IM-INFIL-NC	Standard Infiltration Handle	\$
		IM-INFIL	Infiltration Handle with On/Off Control	\$
		IM-EP	Epidermis Punch	\$
				\$

Physician Name: _____

Practice Name: _____

Bill To: _____

Street: _____

City: _____ State: _____

Zip: _____ Country: _____

Phone: _____

Fax: _____

Ship To: Check if same as Bill To

Street: _____

City: _____ State: _____

Zip: _____ Country: _____

Phone: _____

Fax: _____

Credit Card: Visa MasterCard Amex

CC #: _____

Exp. Date: _____ Sec Code: _____

I agree to the purchase of these items, have my credit card charged for the amount of the products plus shipping and any applicable sales tax. I have read the terms & conditions page of IMI, including the return policy. I understand and agree with the policies of Innovative Med

Print Name: _____ Signature: _____

To place an order, Fax this order form to 949-458-7316 or Call 949-458-1897 to place your order.

Shipping Instructions:

(unless specified order will ship FedEx Ground)

- FedEx Ground
- FedEx Standard Overnight
- FedEx 2 Day
- FedEx Express Saver (3 day)

Note: Shipping charges and sales tax (8.75% for California residents) will be added to order.