

## Ear Impression Form

(To be printed by customer, completed by ear impression provider and included in return box to London Ear Lab)

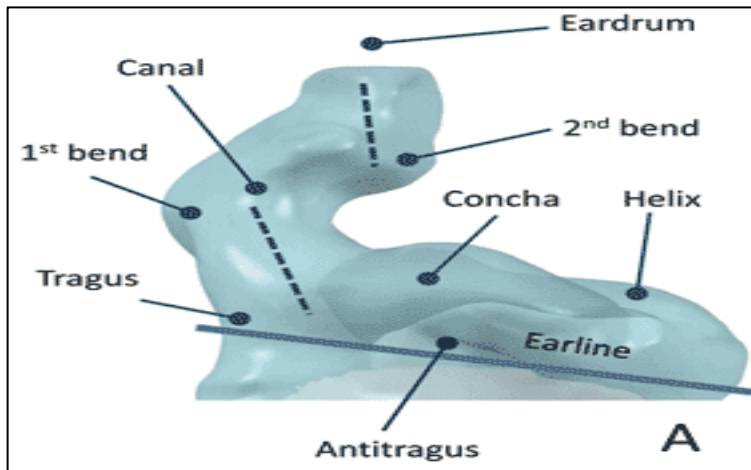
**Client Name:** .....

Order Number .....

<b>Ear Impression Provider:</b>	
<b>Ear Impression Provider Contact Number and Address:</b>	

### Ear Impression Provider Attestation:

(This section is used to verify that the Impressions contain all required information per image A)



- ✓ We hereby attest that the enclosed ear impressions for the above named client include all the above features in image A, or are missing some of the features due to ear abnormalities listed below in 'Otoscopic Findings'
- ✓ We hereby attest that the enclosed ear impressions were taken using suitable impression material and impression taking methodology
- ✓ We hereby attest that the enclosed ear impressions have been checked and are deemed of good enough quality to be used to create custom ear products
- ✓ We accept responsibility if the ear impressions are not deemed of good quality by London Ear Lab technical team and are subsequently returned to us by the client for the purposes of re-impressions or a refund

**Otoscopic Findings:**  
(Patient Sensitivity to Impression taking?):

**Repeat Impression:**

**Reason:**

**By signing this form, you confirm that you have read and accepted the above listed points**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_