



(800) 833-4779 • (480) 748-4545
 fax: (480)-748-4546 • www.GSRx.com
 14505 N Hayden Rd Suite #101 • Scottsdale, AZ 85260

PATIENT NAME (PLEASE PRINT)					SPECIAL INSTRUCTIONS	
LENS STYLES					<input type="checkbox"/> Lab Redo	
epik™ Series <input type="checkbox"/> Variable <input type="checkbox"/> Variable Device <input type="checkbox"/> Variable Active <input type="checkbox"/> Day <input type="checkbox"/> Standard <input type="checkbox"/> SV Ultimate <input type="checkbox"/> 13mm <input type="checkbox"/> 14mm <input type="checkbox"/> DRV .50 <input type="checkbox"/> 15mm <input type="checkbox"/> 17mm <input type="checkbox"/> DRV .80 <input type="checkbox"/> 17mm <input type="checkbox"/> DRV 1.10 <input type="checkbox"/> 19mm <input type="checkbox"/> Office Ultra HD <input type="checkbox"/> 22mm <input type="checkbox"/> Book <input type="checkbox"/> Desk <input type="checkbox"/> Room <input type="checkbox"/> iBifocal™ <input type="checkbox"/> epik™ ND4™ (Select lens. Available in Variable, DRV, and SV Ultimate.)					<input type="checkbox"/> Dr Change	
auraND™ Series (All lenses include ND4™ pupil-optimized correction.) <input type="checkbox"/> auraND™ <input type="checkbox"/> aura Variable <input type="checkbox"/> aura Device <input type="checkbox"/> aura DRV .50 <input type="checkbox"/> aura DRV .80 <input type="checkbox"/> aura DRV 1.10 <input type="checkbox"/> aura SVU ^{ND™}					<input type="checkbox"/> Warranty	
Other Lens Styles					<input type="checkbox"/> Non-Adapt	
<input type="checkbox"/> SV <input type="checkbox"/> D28 <input type="checkbox"/> D35					<input type="checkbox"/> Infinity®	
<input type="checkbox"/> 7x28 <input type="checkbox"/> Other					<input type="checkbox"/> Infinity® Clear	
SPHERE CYLINDER AXIS PRISM UNCUT					COATINGS	
R					<input type="checkbox"/> PrevaBlue®	
L					<input type="checkbox"/> Flash Mirror	
ADD SEG HT DPD NPD OC					<input type="checkbox"/> Blue <input type="checkbox"/> Silver <input type="checkbox"/> Red	
R					<input type="checkbox"/> Gold <input type="checkbox"/> Green	
L					<input type="checkbox"/> Mirror	
LENS MOUNTING					<input type="checkbox"/> Black <input type="checkbox"/> Ruby <input type="checkbox"/> Rose	
<input type="checkbox"/> Metal <input type="checkbox"/> Zyl					<input type="checkbox"/> Emerald <input type="checkbox"/> Amethyst	
<input type="checkbox"/> Groove <input type="checkbox"/> Drill					<input type="checkbox"/> Sapphire <input type="checkbox"/> Fire Opal	
<input type="checkbox"/> Other _____					<input type="checkbox"/> Dk Sapphire <input type="checkbox"/> Gold	
PROPER OPTICS® PACKAGE					WARRANTY	
<input type="checkbox"/> INNOV <input type="checkbox"/> KIDS					<input type="checkbox"/> 2 Years Lens	
<input type="checkbox"/> AGIO <input type="checkbox"/> NAMED _____					<input type="checkbox"/> 2 Years Frame & Lens	
<input type="checkbox"/> APIC <input type="checkbox"/> SUN RX _____					POSITION OF WEAR	
FRAMES					Vertex _____	
<input type="checkbox"/> FTC <input type="checkbox"/> Supply <input type="checkbox"/> Enclosed <input type="checkbox"/> Archive: Cir _____					Panto _____	
MFG		MODEL #			PHOTOCHROMIC	
DRILL MOUNT SHAPE #		COLOR			<input type="checkbox"/> Gray	
A DBL B ED TEMPLE		ORIGINAL INVOICE		POLARIZED		
		INVOICE NUMBER		<input type="checkbox"/> Gray		
OPTICIAN _____ DATE _____					<input type="checkbox"/> Brown	
ACCOUNT NAME _____ ACCOUNT NUMBER _____					<input type="checkbox"/> _____	
					<input type="checkbox"/> Hi-Luster	
					<input type="checkbox"/> Satin	
					<input type="checkbox"/> Roll & Polish	
					<input type="checkbox"/>	