



5.0-6.0 NAIL DELIVERY TICKET

12449 Silicon Dr, San Antonio,
TX-78249

E-MAIL TO: ORDERS@NVISIONBIOMED.COM

Date of Surgery _____ Tray # _____ Procedure _____

Hospital _____

Street _____

City _____ State _____ Zip _____

SURGEON (F/L Name) _____ Distributorship _____

PRIORITY (BY 10:30 AM)

STANDARD (BY 4:30 PM)

2ND DAY(BY 4:30 PM)

Salesperson _____ Phone _____

RESTOCK TO: _____

ADDRESS: _____

☐ PRIORITY (BY 10:30 AM)

☐ STANDARD (BY 4:30 PM)

☐ 2ND DAY(BY 4:30 PM)

PO# _____ E-MAIL TO: Accounting@Nvisionbiomed.com

RN NAME: _____ RN SIGNATURE: _____

Patient Sticker

ALL SYSTEMS USED IN CASE: _____

TOTAL \$:

Item #	NVISION Description	Qty	Price	Ext. Price
PP-50-100	5.0mm diameter x 100mm long nail - NGAGE Implant			
PP-60-100	6.0mm diameter x 100mm long nail - NGAGE Implant			
PP-1000T-500	Nail Cannulated 5.0mm Drill			
PP-1000T-600	Nail Cannulated 6.0mm Drill			
KWIRE-16-152S	Kwire Ø1.6mm x 152mm single trocar			
PP-1000T-250	2.5mm extraction drill			

PP-1000L-401 REV F