

Purchase Authorization Form The Fisher Wallace Stimulator®

Fax form to: 800.657.7362
Email form to: orders@fisherwallace.com

The following Purchase Authorization Form may be completed by any healthcare practitioner (GP, Psychiatrist, Acupuncturist, Chiropractor, Physician's Assistant, Psychologist, OBGYN, Nurse Practitioner, Social Worker, Pharmacist, Physical Therapist, etc.) who is licensed in the state that he or she practices. Please fax this completed form to 800.657.7362 or email it to orders@fisherwallace.com.

Patients with implanted medical devices (such as a nerve stimulator or pacemaker) are not qualified to use our device. Patients may safely use the Fisher Wallace Stimulator® in conjunction with any medication.



Date: _____ / _____ / _____

Patient's Information

Patient's Name: _____

Patient's Address: _____

City: _____ State: _____ Zip code: _____

Phone Number: _____

Practitioner's Information

Practitioner's Name: _____

Practitioner's Address: _____

City: _____ State: _____ Zip code: _____

Phone Number: _____ Email: _____

State License Number: _____

I am authorizing the use of The Fisher Wallace Stimulator® for _____

PATIENT'S NAME

Device Procedure Code: E0720

Diagnosis Code (optional): _____

PRACTITIONER'S SIGNATURE

Tel. 800.692.4380

Fax 800.657.7362

Email info@fisherwallace.com

Web www.fisherwallace.com

The Fisher Wallace Stimulator® For Depression, Anxiety and Insomnia

The Fisher Wallace Stimulator® is a wearable neurostimulation device cleared by the FDA to treat depression, anxiety and insomnia. Over 10,000 licensed providers have prescribed the Fisher Wallace Stimulator® and more than 50,000 patients have used our device.



Key Facts

- FDA-Cleared in the US by prescription and approved for sale over-the-counter in Europe, Canada, Mexico and Brazil
- Approved by Medicaid in Maine (MaineCare)
- In published clinical trials, the majority of patients experienced reduction or remission of symptoms within 2-4 weeks of daily use
- The device does not cause serious side effects (less than 1% of patients may experience a headache or dizziness)
- The device is safe to use in conjunction with any medication (such as antidepressant or sleeping medication)
- Patients with implanted medical devices, such as a pacemaker or electronic stent, should NOT use the device
- 30-Day Return & Refund Policy



Contact Us [Tel: 800.692.4380](tel:800.692.4380) [Fax: 800.657.7362](tel:800.657.7362) [Email: info@fisherwallace.com](mailto:info@fisherwallace.com) [Web: fisherwallace.com](http://fisherwallace.com)