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.

The only patients who are not qualified to use our device are those with implanted medical devices (such as a nerve stimulator or pacemaker). 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: _____

State License Number: _____

I am authorizing the use of The Fisher Wallace Stimulator® for _____,
PATIENT'S NAME

for the treatment of _____.

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

Fisher Wallace Stimulator®

Information for Your Doctor

Please fax authorization or prescription to: 800.657.7362

The Fisher Wallace Stimulator®

The Fisher Wallace Stimulator® is a portable, non-invasive neurostimulation device that has been cleared by the FDA for the treatment of depression, anxiety, insomnia and chronic pain. The device works by stimulating the brain to produce serotonin, GABA and endorphins, and has been proven to be safe and effective in multiple published studies. Patients use the device once or twice a day for 20 minutes and it may be used safely in conjunction with any medication.

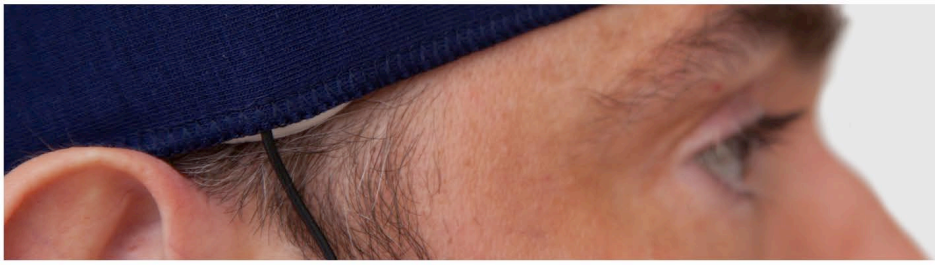
FDA CLEARED

Use for 20 minutes, once or twice a day.

Key Facts

- The device is approved by New York City Health and Hospitals Corporation for use in eleven hospitals, including Bellevue Hospital and Metropolitan Hospital.
- Twenty published, placebo-controlled studies show that reduction or remission of depression, anxiety and insomnia symptoms typically occurs within the first one-to-four weeks of daily use.
- The device has been prescribed by over 2000 board-certified psychiatrists since 2009.
- No serious side effects or adverse events have been reported in published studies or clinical practice.
- The only patients who are not qualified to use the device are those with implanted medical devices (such as a nerve stimulator or pacemaker) that may be interfered with by external stimulation.
- The safety and effectiveness of the technology has been endorsed by Mental Health America.

NEXT STEP: Patients in the United States are required to obtain a prescription or written authorization (attached) from a licensed healthcare practitioner (Primary Doctor, Psychologist, Psychiatrist, OBGYN, Chiropractor, Acupuncturist, Nurse, Physician's Assistant). **Please fax to: 800.657.7362.** No prescription is required for patients in Europe or Canada where the device is approved for sale over-the-counter.



Contact Us

Tel. 800.692.4380
Fax 800.657.7362
Email info@fisherwallace.com
Web www.fisherwallace.com

CE 0086