Dartmouth-Hitchcock
MEDICAL CENTER

Audiology Section
One Medical Center Drive
Lebanon, NH 03756-0001
Office: (603) 650-8123

HEARING DEVICE REPAIR FORM

CUSTOMER SECTION

Name:	**Date of Birth:** / /
Today's Date: / /	**Phone:** ( ) _____ - _____

Did you purchase your hearing device(s) from DHMC? ☐ YES ☐ NO

Problem(s) with your hearing device:

☐ Battery Drain ☐ Cleaning ☐ Damaged Case ☐ Dead ☐ Distorted ☐ Intermittent ☐ Tubing
☐ Weak ☐Other(reason): _____

Charges:

- **DHMC on-site Cleaning / Repair $30.00-$130.00**
- **Factory Re-Case / Re-Make - $50.00-$150.00 (out of warranty)**
- **Factory Repair & verification $300.00 (out of warranty)**

☐ **Ok to Send to Factory**

☐ **Factory Repair Express $50.00**

☐ **Mail to PT Express $50.00**

My signature indicates my understanding of the charges associated with this repair / check per device.

Signature (Mandatory)X_____

☐ Mail when Ready ☐ Call when Ready ☐ MyDH when Ready

Findings:

Medical Record #:

Revised 7/01/18(mp)