



Washington

ABENA

Medicaid Program

Customer Name: _____

Contact Name: _____

Facility Name: _____

Shipping Address: _____

Phone: _____

Cell: _____

Emergency Contact: _____

Physician Name: _____

Physician Address: _____

Physician Phone: _____

Date of Service: _____

Date of Birth: _____

Medicare #: _____

ProviderOne #: _____

City, State, Zip: _____

Fax: _____

Email: _____

Emergency Phone: _____

NPI #: _____

City, State, Zip: _____

Physician Fax: _____

Mix & Match Up to 2 Products Per Month Between Pull-Ups, Briefs & Bladder Control Pads as Long as the Secondary Product is for Night-time Use Only. Combination of 2 Products May Not Exceed 200/month.

Protective Underwear (Pull-Ups)

Limited to 150/month or 5/day

ABENA ABRI-Flex Premium Pull-Up Quantity

Small 24"- 36" (14/bg) _____

Medium 32"- 44" (14/bg) _____

Large 40"- 56" (14/bg) _____

XL 52"- 67" (14/bg) _____

Prevail® Extra Pull-Up Quantity

2XL 68"- 80" (12/bg) _____

Briefs with Refastenable Tabs

Limited to 200/month or 6/day

Tena® Complete + Care Brief Quantity

Small 22"- 36" (12/bg) _____

Medium 32"- 44" (20/bg) _____

Large 40"- 56" (20/bg) _____

XL 52"- 62" (20/bg) _____

Prevail® Bariatric Brief Quantity

2XL 62"- 73" (12/bg) _____

Bladder Control Pads & Liners

Limited to 200/month or 6/day

ABENA ABRI-San Premium Pad Quantity

Light Ultra Mini 3"×8" (24/bg) _____

Mini Plus (Size 1A) 4"×11" (28/bg) _____

Normal (Size 2) 4"×10" (28/bg) _____

Extra (Size 3) 4"×13" (28/bg) _____

Super (Size 4) 8"×17" (28/bg) _____

Man Male Pad (Size F1) 9"×12" (14/bg) _____

Shaped Pads

Limited to 200/month or 6/day

ABENA ABRI-San Shaped Pads Quantity

Day Plus (Size 6) 12"×25" (34/bg) _____

Night (Size 9) 15"×29" (25/bg) _____

Booster Pads/Doublers

Limited to 90/month or 3/day

May be Used in Conjunction With Pull-Ups or Briefs Only for Extra Absorption & Are Not Covered Separately.

Dignity® Stackables Booster Pad Quantity

3.5"×12" (45/bg) _____

ABENA ABRI-Let Flow Through Pad Quantity

5.5"×15" (28/bg) _____

Underpads/Bedpads

Limited to 42/year washable or 180/month disposable

User May Order Either Washable or Disposable
Each Month & May Alternate Monthly.

ABENA Green Washable Bedpad

	Quantity
<input type="checkbox"/> Standard 30"×36" (50oz)	_____
<input type="checkbox"/> Large 35"×42" (50oz)	_____

Prevail® Disposable Bedpad

	Quantity
<input type="checkbox"/> Green 23"×36" (15/bg)	_____

Gloves

Limited to 400/month or 6 pairs/day

For Incontinence Use Only! Gloves May Only
Be Ordered With Incontinence Supplies.

Gloves

Style	Size	Quantity
<input type="checkbox"/> Nitrile (100/bx)	<input type="checkbox"/> Small	_____
<input type="checkbox"/> Synthetic (100/bx)	<input type="checkbox"/> Medium	_____
<input type="checkbox"/> Vinyl (100/bx)	<input type="checkbox"/> Large	_____
	<input type="checkbox"/> XL	_____

Personal Care Items (Free Gifts)

Limited to 2/month

Mix & Match 1 Free Gift With Each Case of Pull-Ups, Briefs or Bladder Pads
(Limit 2 Free Gifts Per Customer). The Following Items are Not Covered by
DSHS & are Provided Compliments of Soundview With Minimum Order.

Personal Care Items

	Quantity
<input type="checkbox"/> MoliCare™ Wipes 9"×13" (48/pk)	_____
<input type="checkbox"/> ByeBye Odor™ Eliminator (8oz)	_____
<input type="checkbox"/> No-Rinse Periwash (8oz)	_____
<input type="checkbox"/> Hand Sanitizer (4oz)	_____
<input type="checkbox"/> A&D Barrier Cream (4oz)	_____
<input type="checkbox"/> Lotion (8oz)	_____
<input type="checkbox"/> Shampoo Bodywash (8oz)	_____
<input type="checkbox"/> No-Rinse Shampoo (8oz)	_____
<input type="checkbox"/> Terry Cloth Feeding Bib White (1/ea)	_____
<input type="checkbox"/> Terry Cloth Feeding Bib Blue (1/ea)	_____
<input type="checkbox"/> Male Urinal (32oz)	_____



Soundview Medical Supply & ABENA have partnered to provide our clients with a higher level of incontinence care. ABENA is the leading European manufacturing company that leads the industry in outcomes, manufacturing & environmental impact. Customers will see more comfort & increased absorbency when using the ABENA product line. We are extremely excited to be partnering with such a high quality manufacturer to compliment our passion of bringing the best products, service & outcomes to the customers of Soundview Medical Supply.

Signature: _____

Caregiver Certification: I Certify That the Items Ordered are Medically Necessary, & I am Authorized to Place
Orders for the Person Listed as "Customer." After Signature, Printed Name & Date.

415 South Brandon Street, Seattle, WA 98104 | www.soundviewmed.com | www.facebook.com/soundviewmedicalsupply



Graham Smith
Sales Director

Cell: 206-718-3488
Fax: 866-416-0621

Toll-Free: 1-800-845-4925
Email: grahams@soundviewmed.com