

**Prescription Form for Kapitex Kapi-Gels**  
Kapitex Brand Stoma Studs and Laryngectomy Tubes  
Kapitex Trachi-Naze Plus Stoma Studs & Laryngectomy Tubes

>Orders must be from a licensed practitioner trained in the care and rehabilitation of people with laryngectomies and tracheotomies - i.e. Physician, Physician's Assistant, Speech Pathologist, Head & Neck Nurse Specialist, Respiratory Therapist.

>A list of Stoma Studs, Laryngectomee Tubes and Kapi-Gels is on the other side of this sheet. Each one shows our Luminaud Cat. # as well as Kapitex's Cat. # which will always appear on Kapitex products obtained from any source. This will allow cross referencing so you can be sure of prescribing the right product when it is purchased from us.

>Measure the patient's stoma carefully, then initial the line by the specific Stoma Stud and/or Laryngectomy Tube and/or Kapi-Gel Spacers you choose for this patient. Opened packages of these products are not returnable. (Contact us to request Kapitex's free single-use measuring devices.)

>This form may be copied and used as needed for your patients - or your own prescription form or letterhead may be used, if preferred, as long as it contains the specific Cat. # number and measurements..

>Standing orders should be renewed yearly. Any change in size requires a new prescription.

>Filters for the Trachi-Naze Studs and Tubes come in Day, Night and Active versions and do NOT require a prescription, but a prescription might be helpful if you patient will be applying for insurance reimbursement.

**PLEASE PRINT OR WRITE VERY CAREFULLY**

**CLINICIAN** \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Licensee# \_\_\_\_\_ or DEA Reg.# \_\_\_\_\_ or NPI# \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ e-mail \_\_\_\_\_

**PATIENT NAME** \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ e-mail \_\_\_\_\_

**Please send the initialed products to my patient as he/she needs and requests**

Prescriber Signature \_\_\_\_\_ Date \_\_\_\_\_

**MAIL OR FAX COMPLETED PRESCRIPTION WITH FIRST ORDER TO LUMINAUD, INC. ADDRESS BELOW**



PHONE HOURS: WEEKDAYS 9:00a to 4:30p EASTERN

FEDERAL ID #34-1268969

[www.luminaud.com](http://www.luminaud.com) e-mail: [info@luminaud.com](mailto:info@luminaud.com)

8688 Tyler Boulevard • Mentor, OH 44060-4348

Phone **800-255-3408** • 440-255-9082 • Fax 440-255-2250

## KAPITEX Studs & Tubes

All measurements are in Millimeters

### Stoma Studs

Luminaud#	Kapitex #	L	ID	OD
_____ 38176	TR SST 0001	22	8	10.5
_____ 38177	TR SST 0002	22	10	12.5
_____ 38178	TR SST 0003	22	12	14.5
_____ 38179	TR SST 0004	22	14	16.5

### Laryngectomy Tubes

Luminaud #	Kapitex #	L	ID	OD
_____ 38250	TR VNT 0820	20	8	10.5
_____ 38251	TR VNT 0830	30	8	10.5
_____ 38252	TR VNT 0840	40	8	10.5
_____ 38253	TR VNT 0850	50	8	10.5
_____ 38254	TR VNT 0860	60	8	10.5
_____ 38255	TR VNT 1020	20	10	12.5
_____ 38256	TR VNT 1030	30	10	12.5
_____ 38257	TR VNT 1040	40	10	12.5
_____ 38258	TR VNT 1050	50	10	12.5
_____ 38259	TR VNT 1060	60	10	12.5
_____ 38260	TR VNT 1220	20	12	14.5
_____ 38261	TR VNT 1230	30	12	14.5
_____ 38262	TR VNT 1240	40	12	14.5
_____ 38263	TR VNT 1250	50	12	14.5
_____ 38264	TR VNT 1260	60	12	14.5
_____ 38265	TR VNT 1420	20	14	16.5
_____ 38266	TR VNT 1430	30	14	16.5
_____ 38267	TR VNT 1440	40	14	16.5
_____ 38268	TR VNT 1450	50	14	16.5
_____ 38269	TR VNT 1460	60	14	16.5

## KAPI-GEL TRACE<sup>0</sup>STOMA SPACERS

Thin are about 2-3 mm. Thick are about 3-4mm

May vary from piece to piece and lot to lot.

Outer Diameter is 43 mm in all sizes	ID
_____ 38130 LA TNG 2008 Thin	8
_____ 38131 LA TNG 2012 Thin	12
_____ 38132 LA TNG 4008 Thick	8
_____ 38133 LA TNG 4012 Thick	12

## TRACHI-NAZE PLUS Studs & Tubes

by KAPITEX All measurements are in Millimeters

### Stoma Studs to Hold Filters

Luminaud #	Kapitex #	L	ID	OD
_____ 38071	LA TNP 2001	14.5	8	10.5
_____ 38072	LA TNP 2002	14.5	10	12.5
_____ 38073	LA TNP 2003	14.5	12	14.5
_____ 38074	LA TNP 2004	14.5	14	16.5
_____ 38075	LA TNP 2005	14.5	16	18.5
_____ 38076	LA TNP 3001	22.5	8	10.5
_____ 38077	LA TNP 3002	22.5	10	12.5
_____ 38078	LA TNP 3003	22.5	12	14.5
_____ 38079	LA TNP 3004	22.5	14	16.5
_____ 38080	LA TNP 3005	22.5	16	18.5

### Laryngectomy Tubes To hold Filters

Luminaud #	Kapitex #	L	ID	OD
_____ 38180	LA TNL 0820	20	8	10.5
_____ 38181	LA TNL 0830	30	8	10.5
_____ 38182	LA TNL 0840	40	8	10.5
_____ 38183	LA TNL 0850	50	8	10.5
_____ 38184	LA TNL 0860	60	8	10.5
_____ 38185	LA TNL 1020	20	10	12.5
_____ 38186	LA TNL 1030	30	10	12.5
_____ 38187	LA TNL 1040	40	10	12.5
_____ 38188	LA TNL 1050	50	10	12.5
_____ 38189	LA TNL 1060	60	10	12.5
_____ 38190	LA TNL 1220	20	12	14.5
_____ 38191	LA TNL 1230	30	12	14.5
_____ 38192	LA TNL 1240	40	12	14.5
_____ 38193	LA TNL 1250	50	12	14.5
_____ 38194	LA TNL 1260	60	12	14.5
_____ 38195	LA TNL 1420	20	14	16.5
_____ 38196	LA TNL 1430	30	14	16.5
_____ 38197	LA TNL 1440	40	14	16.5
_____ 38198	LA TNL 1450	50	14	16.5
_____ 38199	LA TNL 1460	60	14	16.5

The Trachi-Naze Plus Studs & Tubes will hold Trachi-Naze Plus Night Filters, Day Filters and Active filters.

**Prescription is not required for filter sales** but might be useful if applying for insurance reimbursement

_____ 38068	LA TNP 1001	Night Filter
_____ 38069	LA TNP 1002	Day Filter
_____ 38070	LA TNP 1003	Active Filter