

AMERICAN ACADEMY OF PAIN MANAGEMENT

Order Form

Pain Outcomes Profile (POP) Paper & Pencil Version

Name _____ Date _____

Name of Facility _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ Fax (_____) _____

Email _____

Pain Outcomes Profile	Quantity	Price	Total
Pain Outcomes Profile Starter Kit <i>includes scoring manual, 1 pack of questionnaire, scoring instrument & record</i> <i>AAPM member</i>		\$55.00	
Pain Outcomes Profile Starter Kit <i>includes scoring manual, 1 pack of questionnaire, scoring instrument & record</i> <i>non-member</i>		\$65.00	
Pain Outcomes Profile 23 item Questionnaire <i>gummed packets of 25</i>		\$7.00	
Pain Outcomes Profile Scoring Instrument <i>gummed packets of 25</i>		\$7.00	
Pain Outcomes Profile Cumulative Patient Scoring Record <i>gummed packets of 25</i>		\$7.00	
Applicable California Tax <i>(residents only)</i>			
Prices Include Shipping and Handling			
Total			

Payment Options (For orders outside the US, contact: christine@aapainmanage.org or 209-533-9744)

Enclosed is my check or money order payable to AAPM (US funds only)

Please charge to: Visa MasterCard

Card# - - - Expiration Date _____

Signature _____



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