

VisionWeb Order Processing Information with 3M

Select Account Information and Package Information

- Select 3M from the "Laboratory" drop-down. The "Billing/Shipping Account" drop-down box will be populated with account numbers. The account number selected designates who is invoiced for that order by 3M. The top number on order form brought in by patient should match the first number in your billing/shipping selection. If the number is not listed, it can be added using "Add a Supplier" or contact 3M.
- The Job Type is automatically populated to "Safety" in the "Job Type" drop-down; just select your package from the drop down:
 - 3M Safety
 - PC Req Frm Grp (contains frames that must have High Impact Lens per manufacturer specification)
 - Wrap/PC Grp (8 Base Wrap Styles)



HOME	Order Now	Track Orders	Payer Transactions	Promotions	My
Laboratory *		Billing/Shipping Account *			
3M Safety Collection - Plymouth, IN		8959398-8959398 / 8959398			
This lab offers second pair orders.					
Job Type *		Lens Type *		Package *	
Safety Packages		SV		[Select]	

3M Prescription Eyewear - Order Form

3M
2925 Gary Dr. Plymouth, IN 46563
Tel: 800.982.2828 Fax: 800.945.2828

Order Date (mm/dd/yy) _____
Order Form# X00000
Company: 012345678
Company Name
City, State, Zip code
Bill-To: 012345678
Company Name
City, State, Zip code
Ship-To: _____ (Account#)
Your ship to account number

EMPLOYEE PHONE (Required) _____

Obtain Secure Credit Card ID from: https://acosafety.srx.com/secure_id OR 866.235.5506
VLMCAKDI 16 digit SCCID (xxxx-xxxx-xxxx-xxxx) Exp (mm/yy) Amount

*Employee _____
Company _____

Lenses Only Patient's Own Frame Patient's Own Frame

Single Vision Progressives
 BiFocal 28 35 Base PAL Clear CR39 SoloOne
 TriFocal 28 35 SolarMax Outlook
 Occupational 14 mm sep. AO Compact WIP
 28 35 Other AO Easy

Duty to warn: Polycarbonate is the most impact resistant material available & is highly recommended

Polycarbonate Plastic CR-39 Glass Other

Tints & Coatings No charge for Scratch Resistant Coating

Clear Polarized Anti-Reflective
 Tint SuperCote UV
 Photochromic AR W/SuperCote Anti-Fog
 Transitions TRActive Other

Prescription

Right OD _____ Left OS _____
Right OD _____ Left OS _____
Right OD _____ Left OS _____

Frame

Style _____ Model _____ Eye _____ Bridge _____ Color _____ Temple _____

Side Shields Permanent Detachable Gray T-LOC *Steel
 *Select Styles Only *Perforated *Breeze Catcher

Special Instructions _____



Enter Required Information

- If Order form has “REQUIRED” below
 - PO Number
 - Department Number
 - Employee Number
 - Requisition Number
- It must be entered into VisionWeb or the job will go on hold due to missing Account Profile Edits. Employee and Department fields in the 3M system are limited to 6 characters.
- 3M order forms have different wording, the field format is always PO, Requisition, Last Name, First Name, Employee #, and Department #. Note: if a field was renamed, after the re-label name there will be parentheses showing field information belongs in.

VisionWeb

HOME	Order Now	Track Orders	Payer Transactions	Promotions	My Account	T
Customer						
PO Number	Department Number	Employee Number	Requisition Number			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			

- This field is required to process the order.
- Renamed field will have parentheses around original field name

3M Prescription Eyewear - Order Form

3M
2925 Gary Dr. Plymouth, IN 46563
Tel: 800.982.2828 Fax: 800.945.2828

Order Date (mm/dd/yy)

Order Form# X00000

PO# (Required)

EMP LAST NAME (Required)

EMP FIRST NAME (Required)

EMPLOYEE# (Required)

EMP DEPT

EMPLOYEE PHONE (Required)

Company:

Bill-To:

Ship-To: (Account#)

Obtain Secure Credit Card ID from: https://aocsafevsnrx.com/secure_id_OR_866_235_5506

VLMCAKDI 16 digit SCCID (xxxx-xxxx-xxxx-xxxx) Exp (mm/yy) Amount

*Employee Department

Company

Signature required for Emp Credit Card charges

Lenses Only Patient's Own Frame Same as Employee

Single Vision Progressives Base PAL Clear SoloOne

BiFocal 28 35 TriFocal 28 35 Occupational 14 mm sep: 28 35 Other AO Compact WIP AO Easy

Duty to warn: Polycarbonate is the most impact resistant. Polycarbonate is highly recommended.

Polycarbonate Plastic CR-39 Other

Lens Style

Clear Polarized Anti-Reflective

Tint UV Photochromic AR W/SuperCote Anti-Fog

Transitions Transitions TRActive Other

Lens Material

Sphere Cylinder Axis Prism Base

Right OD Left OS

Right OD Left OS

ADD Power Seg Hgt Dist PD Near PD

Frame Style Model Eye Bridge Color Temple

Side Shields Permanent Detachable Gray T-LOC *Steel

* Select Styles Only *Integrated *Perforated *Breeze Catcher

Special Instructions

COPYES LISTED ON ORDER FORM MUST BE PAID BY EMP
EMP 5 DIGIT RCN NUMBER IS REQUIRED TO PLACE ORDER.

prof Nov 2012 0804630 0001 06/12/13

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Complete Payment Information

- You will need to complete the payment information as follows:
 - The “Co-Payment 1 (Employee)” is Employee’s expense may be part or all of the order. Upgrade amount would be found on the order form
 - “Co-Payment 2 (Company)” is used for the Company pro card information. Enter \$1.00 in Amount field acknowledging Invoice Balance will be charged, Secure CCID type and token information. Company Token information will be found on order form Company Section. It is beneficial to note Contact information to in “Treatment Comments to Lab”.
 - Click “Get Secure CCID to access site: www.3m.com/safetyrx or Phone:866-235-5506

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Adding an account to your VisionWeb site

1. Login into VisionWeb.
2. From the VisionWeb toolbar go to "My Account" then "Supplier Accounts"
3. Under the Supplier Accounts options click on "+ Add New Supplier"
4. In the Supplier Details section:
 - Category = Lenses
 - Supplier = 3M Safety Collection
 - Location = 3M Safety Collection, Plymouth, Indiana
5. You will need to fill out the Account Details section. Under the "Billing Account number" *please* put the company account number that is ordering glasses. Under the " Shipping Account number" please put the account number that the glasses will be shipping to.
6. Then click "Submit Request"

Contact Information

- If you have any questions please contact
 - 3M Customer Service
 - Phone: 800-982-2828
 - E-mail srxcsr@mmm.com
 - Nathan Briney
 - Phone: 940-268-5524
 - E-Mail: nbriney@mmm.com