

FUSION Seating Prescription Form

Custom Built Seating System



Please use Adobe 'Fill & Sign' to complete this form – Please check boxes with an X

GENERAL INFORMATION

Clinician:	Email:	Date:
Service:	Delivery Address:	

ASSESSMENT SUMMARY

Client Name/Ref:	Year of Birth:
Address/School:	Diagnosis:
Current Equipment:	
Issues with Current Equipment:	
Observations, deformity:	
Hips/Pelvis:	
Spine/Trunk:	

MEASUREMENTS

	Client measurements		Current Seat
a Pelvic Width:			cm
b Trunk Width:			cm
c Backrest Height:			cm
d Thoracic Pad Height:	L	R	cm
e Seat Depth:	L	R	cm
f Seat Ramp Length:			cm
g Footrest Height:	L	R	cm
h Footplate Length:			cm
i Knee Width:			cm
j Medial Pad:			cm
k Distance Between Knees:			cm
l Outside of Knees			cm
Backrest Recline:		Seat Tilt:	

Please record current seat sizes as a cross check

ORDERING INFORMATION

<input type="checkbox"/> Seat & Back		<input type="checkbox"/> Back Only		<input type="checkbox"/> Seat Only	
Wheelchair Model & Size:			<input type="checkbox"/> Fixed	<input type="checkbox"/> Removable	
<i>Wheelchair Size: Width should be approx. 100mm wider than hip width to give 60mm width adjustment, Length approx. 70mm longer than seat depth Please indicate if minimal width adjustment required, eg for self propelling or age of client <input type="checkbox"/></i>					
Seat Cushion:		<input type="checkbox"/> Ramped	<input type="checkbox"/> Anti-Thrust	<input type="checkbox"/> Flat	
Back Cushion:		<input type="checkbox"/> inc Sacral	<input type="checkbox"/> inc Lumbar	<input type="checkbox"/> Full Type	
<input type="checkbox"/> Wraparound Laterals		<input type="checkbox"/> Swingaway Laterals	<input type="checkbox"/> Arm Protraction Pads	<input type="checkbox"/> Synergel Lining	
Headrest :	<input type="checkbox"/> Std	<input type="checkbox"/> Curved	<input type="checkbox"/> Wing Curved	Multi-Adjustable:	<input type="checkbox"/> 350mm <input type="checkbox"/> 450mm <input type="checkbox"/> 550mm
Harness:	<input type="checkbox"/> H Type	<input type="checkbox"/> X Type	<input type="checkbox"/> Dynaflex	<input type="checkbox"/> Front Pull <input type="checkbox"/> Rear Pull <input type="checkbox"/> Top Pull	
Padded Lap Strap:		<input type="checkbox"/> 2 point	<input type="checkbox"/> 4 point	<input type="checkbox"/> Pommel	<input type="checkbox"/> Knee Laterals
Footrest:	<input type="checkbox"/> CAPS Type	<input type="checkbox"/> Wheelchair Only	<input type="checkbox"/> Footbox	<input type="checkbox"/> Foot Straps	<input type="checkbox"/> Ankle Huggers
Upholstery:	<input type="checkbox"/> Black	<input type="checkbox"/> Pink	<input type="checkbox"/> Royal Blue	<input type="checkbox"/> Denim	<input type="checkbox"/> Purple <input type="checkbox"/> Red

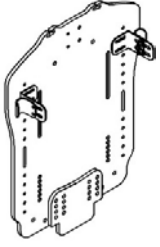
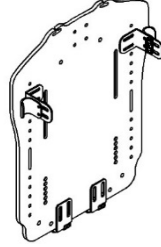
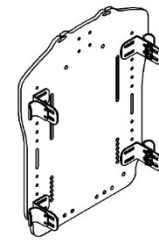
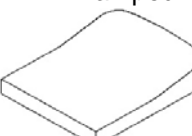
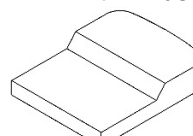
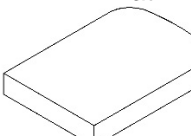
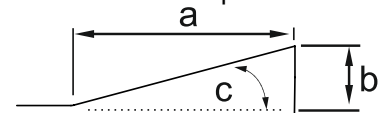
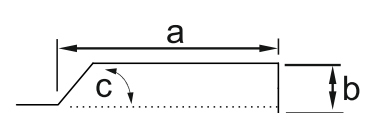
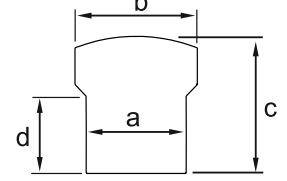
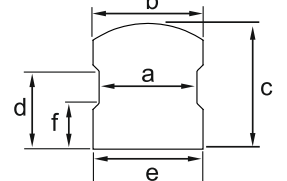
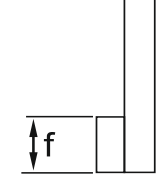
We will automatically select component sizes based on client measurements however you can indicate your preference below at no extra charge. Items shown in yellow incur a small additional charge. Please see details on attached sheets

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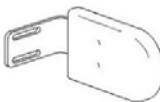
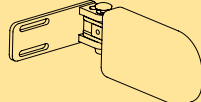
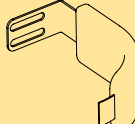
Seat Configuration						
<input type="checkbox"/> Seat & Back		<input type="checkbox"/> Back Only		<input type="checkbox"/> Seat Only		
<input type="checkbox"/> Interface into 2 wheelchairs						
Seat Mounting						
<input type="checkbox"/> RMS Lock & Latch		<input type="checkbox"/> Fixed (Tube Clamps)		<input type="checkbox"/> Drop Seat Required		
Backrest Mounting						
<input type="checkbox"/> 2 Pt With Tongue		<input type="checkbox"/> 2 Pt With Hinge		<input type="checkbox"/> 4 Pt mounting		
						
				<input type="checkbox"/> RMS Lock & Latch <input type="checkbox"/> Fixed (Tube Clamps) 2 Point lock & latch with tongue is the standard option, allowing easy assembly 2 Point lock & latch with hinge mounting is suitable for smaller seats. 4 Point mounting with either lock & latch or tube clamps is primarily used with separate back support systems.		
Upholstery						
Machine washable upholstery is normally supplied in two tone with Speckle black fabric on sides and back of all covers						
Duratex:	<input type="checkbox"/> Black	<input type="checkbox"/> Pink	<input type="checkbox"/> Royal Blue	<input type="checkbox"/> Denim	<input type="checkbox"/> Purple	<input type="checkbox"/> Red
Dartex:	<input type="checkbox"/> Black	Macro Suede:	<input type="checkbox"/> Black	<input type="checkbox"/> Pink	<input type="checkbox"/> Blue	<input type="checkbox"/> Red
<input type="checkbox"/> 2 nd Set of covers, please specify:						
Special Requirements:						
Seat Cushion						
<input type="checkbox"/> Ramped		<input type="checkbox"/> Anti-Thrust		<input type="checkbox"/> Flat		
						
Sizes determined by Seat Dimensions Reflex 650F (Firm) as Standard (typically 50mm thick on flat) Further customisation available below if required.						
<input type="checkbox"/> Custom Ramp			<input type="checkbox"/> Custom Anti-Thrust			
						
Specify b or c						
a) Ramp Length:		b) Ramp Height:		c) Ramp Angle:		
Ramp Base Layer:		<input type="checkbox"/> Firm (Reflex 650F)		<input type="checkbox"/> Chip Foam		
Flat Section of Cushion		<input type="checkbox"/> Firm (Reflex 650F)	<input type="checkbox"/> Soft Memory	<input type="checkbox"/> Med. Memory	<input type="checkbox"/> Firm Memory	<input type="checkbox"/> SynerGel
<input type="checkbox"/> Asymmetric:		Left: _____ cm		Right: _____ cm		
Special Requirements:						
Backrest Cushion						
<input type="checkbox"/> Sacral Pad		<input type="checkbox"/> Lumbar Pad		<input type="checkbox"/> Full Pad		
Standard Foam <input type="checkbox"/> Memory Foam <input type="checkbox"/>		Soft <input type="checkbox"/> Medium <input type="checkbox"/> Firm <input type="checkbox"/>				
<input type="checkbox"/> Custom T Shape		<input type="checkbox"/> Custom I Shape		<input type="checkbox"/> Custom Sacral		
						
a: _____	b: _____	c: _____	d: _____	e: _____	f: _____	
Special Requirements:						

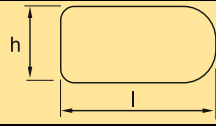
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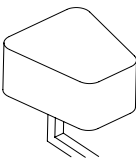

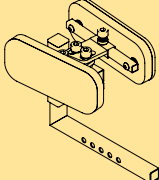


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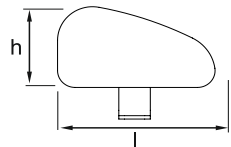
Lateral Supports						
Fixed  <input type="checkbox"/> Thoracic <input type="checkbox"/> Pelvic	Swing away  <input type="checkbox"/> Thoracic	Wrap around  <input type="checkbox"/> Thoracic	<i>Sizes determined by Seat Dimensions Evazote padded slim line lateral pads Further customisation available below if required.</i>			

Customise your laterals more:							
Size	A	B	C	D	E	F	
L	13	14	15	17	20	25	
H	7.5	7.5	9.5	9.5	9.5	9.5	
Thoracic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Custom : L H cm
Pelvic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Custom : L H cm
Arm Protraction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Custom : L H cm

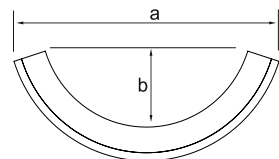
Special Requirements:

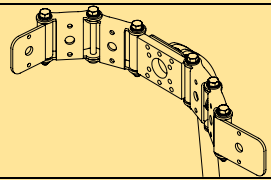
Knee Control		
<input type="checkbox"/> Solid Pommel 	<input type="checkbox"/> Knee Lateral 	<input checked="" type="checkbox"/> Adjustable Pommel 

*Sizes determined by seat dimensions
 Solid Pommel **or** Knee Laterals standard
 Solid Pommel **and** Knee Laterals
 Adjustable Pommel
 Further customisation available below.*

Pommel					Knee Laterals			
Size	a	b	c	d	Size	l	h	
<input type="checkbox"/> S	8	9	6	6	<input type="checkbox"/> S	15	7	
<input type="checkbox"/> M	9	11	7	7	<input type="checkbox"/> M	19	9	
<input type="checkbox"/> L	11	13	8	8	<input type="checkbox"/> L	22	10	
<input type="checkbox"/> XL	13	15	9	9	<input type="checkbox"/> XL	25	10	
Custom					Custom			

Special Requirements:

Shallow Contour				Curved				
Size	a	b	h	Size	a	b	h	
<input type="checkbox"/> S	20	0.5	9	<input type="checkbox"/> S	21	6.5	8	
<input type="checkbox"/> M	25	1	11	<input type="checkbox"/> M	24	7	10	
<input type="checkbox"/> L	30	2	11	<input type="checkbox"/> L	27	8	11	
<input type="checkbox"/> XL	34	2.5	14	<input type="checkbox"/> XL	29	9	12	
Custom				Custom				

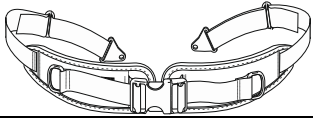
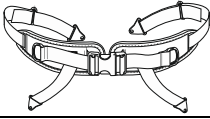
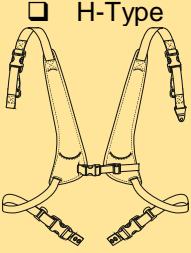
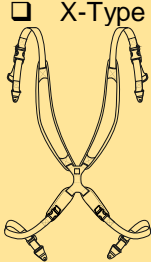

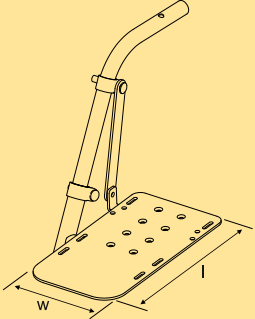
Wing Curved				Multi Adjustable							
Size	a	b	h	Joints	a	b	h				
<input type="checkbox"/> S	31	6.5	8	<input type="checkbox"/> 4	35	N/A	10				
<input type="checkbox"/> M	33.5	6.5	10	<input type="checkbox"/> 6	40 / 45	N/A	10				
<input type="checkbox"/> L	36.5	8	10	<input type="checkbox"/> 8	50 / 55	N/A	10				
Custom				Custom							
<input type="checkbox"/> Basic Link Mount				<input type="checkbox"/> Ball & Link					<input type="checkbox"/> Through Bar (Ball Joints)		

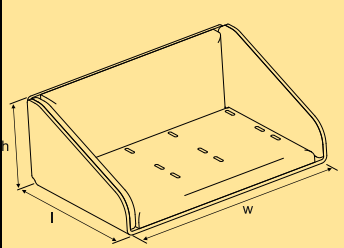
Special Requirements:

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Harnessing					
Pelvic Belt – Size determined by seat dimensions					
<input type="checkbox"/> 2 Point 			<input type="checkbox"/> 4 Point 		
<input type="checkbox"/> Plastic Buckle - Single Pull		<input type="checkbox"/> Plastic Buckle - Dual Pull		<input type="checkbox"/> Safety Buckle	
<input type="checkbox"/> Standard Pad Size			<input type="checkbox"/> Slim line Pad Size		
Shoulder Harness					
<input type="checkbox"/> H-Type 		<input type="checkbox"/> X-Type 		<input type="checkbox"/> Dynaflex 	
<input type="checkbox"/> Rear Pull <input type="checkbox"/> Top Pull <input type="checkbox"/> Front Pull				<input type="checkbox"/> XXS <input type="checkbox"/> XS <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL	
<input type="checkbox"/> Special Requirements:					
Foot Support					
<input type="checkbox"/> Use Standard Wheelchair footplates					
<input type="checkbox"/> CAPS type footplates (aluminium)		Size	W	L	
<input type="checkbox"/> Separate footplates with rear upstand (PP)		<input type="checkbox"/> XXS	10.5	16	
<input type="checkbox"/> One piece Footplate (polypropylene)		<input type="checkbox"/> XS	10.5	18	
<input type="checkbox"/> ABS Plastic foot box		<input type="checkbox"/> S	11.5	20	
<input type="checkbox"/> Padding Required		<input type="checkbox"/> M	12.5	22.5	
<input type="checkbox"/> Mounted on wheelchair footrest hangers		<input type="checkbox"/> L	13.5	25	
<input type="checkbox"/> Neo/Discovery standard footrest hanger		<input type="checkbox"/> Custom			
<input type="checkbox"/> Neo/Discovery Swing away footrest hanger		Size	W	L	H
<input type="checkbox"/> Webbing Footstraps – Camlock Buckles		<input type="checkbox"/> XS	23	18	10
<input type="checkbox"/> Webbing Footstraps - Velcro		<input type="checkbox"/> S	26	20	10
<input type="checkbox"/> Leather Footstraps		<input type="checkbox"/> M	31	22	12
Ankle Huggers <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L		<input type="checkbox"/> L	36	24	13
Moulded Foot Skates <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L		<input type="checkbox"/> XL	39	25	13
Ottobock Foot Skates <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L		<input type="checkbox"/> Custom			
<input type="checkbox"/> Special Requirements:					



Inside measurements

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FUSION
CUSTOM BUILT SEATING SYSTEM



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Tray			
Tray mounted off Armrests, price subject to wheelchair specification			
<input type="checkbox"/> Moulded Black	<input type="checkbox"/> Clear Perspex	<input type="checkbox"/> Custom CNC Cut	
<input type="checkbox"/> S	<input type="checkbox"/> M	<input type="checkbox"/> L	Specify Below
<input type="checkbox"/> Special Requirements:			