

Quantum Rehab®

Account Number

A Division of Pride Mobility Products Corporation®

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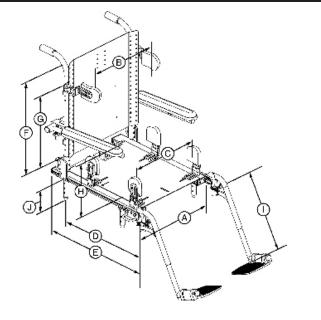
Quantum® 600 Series

Group 3 Single Power & Multiple Power Order Form



Account Number		
Provider Name:		
Contact:		
Phone:		
Fax:		
Date:		
PO#:		
Marked For:		
Ship To:		
Address:		
City:		
Discount:		
Terms:		
Freight:		
Takan Du		

SET-TO-SPEC



Please supply patient information for optimal setup prior to shipping.

Client Height:_____

- A. Seat Width:_
- B. Lateral Offset:_
- C. Hip/Thigh Lateral Offset:_
- D. Center of Gravity: Optimized based on seat dimensions
- E. Seat Depth:_
- F. Back Height from Pan:_
- G. Lateral Height from Pan:_
- H. Armrest Height from Pan:_
- I. Rigging Length (whole numbers only):_
- J. Seat to Floor Height (circle one):

Seating System	Seat-To-Floor Heights			
TRU-Balance® Tilt or Tilt & Recline	18.125"	19.125"	20.125"	21.125"
TRU-Balance® Recline	17"	18"		19"
TRU-Balance® Lift	19.25"	20.125"	21"	21.875"

Seat to floor height are +/- 1/8" with 18"W x 18"D with Flat-Free tires (add 3/8" for pneumatic tires). Increased widths may increase lowest seat to floor heights.

Clinician Notes:_			

Revised: July 7, 2011 Page 1 of 7

^{*} While every effort will be taken to ensure items will be preset to your specifications prior to shipping, variations in options may effect final settings.

Group 3 Single Power & Multiple Power

Order Form

DME providers are responsible for determining appropriate billing codes when submitting for insurance reimbursement. HCPCS codes should not be considered as legal advice. All prices are MSRP. Options with a circular checkbox (Q) are NOT available through Quantum West. **BASE MODEL EXPANDABLE CONTROLS HCPCS Code** Description Price Q-Logic EX Joystick or Enhanced Display must be ordered with a Q-Logic **EX Controller and Harness For Expandable Controls** Quantum 600 3SP-SS \$6,321 K0856 **HCPCS** Code Description Price □ Quantum 600 3MP-SS \$6,121 K0861 ☐ 100 Amp Q-Logic EX Controller E2377 \$695 COLORS Harness For Expandable Controller \$350 E2313 Solid Colors: Metallic Colors: □ Champagne ☐ Mariner Blue □ Cardinal Red Candy Apple Red \$700 Q-Logic EX Joystick O Spring Green □ Viper Blue ■ Onyx Black ■ SolarYellow □ Violet Sunburst Orange O Kelly Green □ Pearl Pink O Q-Logic EX Joystick for Lights Required For LED Light Package □ Pewter ■ Tangerine \$700 □ Silver ☐ Emerald Green ☐ Graphite Blue ☐ Sapphire Blue **MOTOR OPTIONS** O Q-Logic EX Standalone Joystick \$700 E2373 **HCPCS Code** Description **Price** ☐ Standard Motor Package Standard O High Speed Motor Package \$1,574 Programmable Speed Up To 6 MPH, 300 lbs. Weight Cap O Q-Logic EX Enhanced Display 4
W/ Bluetooth Mouse & IR Capability \$1,884.93 O Accu-Trac Motor Technology¹ \$1.295 K0108 (KITASMB1678) Delivers Enhanced Traction and Tracking Especially With O Community Use Package² \$2,125 Includes: - Q-Logic EX Enhanced Display Package Includes: - Flexible Gooseneck - 300 lbs. Weight Capacity - Enhanced Display Mounting Bracket - 4-Pole High Speed Motor Package **PROGRAMMING** - 4" Wide Flat Free or Pneumatic Knobby, Extended Traction Tires Description Price **BASE MOUNTED FOOT PLATFORM** Description Price \$545 Q-Logic Handheld Programmer O No Base Mounted Front Platform No Charge □Base Mounted Foot Platform Standard **DRIVE WHEELS** Description Price O Q-Logic PC Programming Cable with Disk⁵ \$750 ☐ 14" Flat-Free Standard **JOYSTICK HANDLES** Rim Color: Black Silver **HCPCS Code** Description **Price** ☐ 14" Pneumatic No Charge ☐ Standard Knob Standard □ Silver □ Black Rim Color: Mushroom Handle \$71 E2323 O 4" Wide Flat Free, Knobby, Extended-\$551 E2323 □ T-Bar \$107 Traction Tires² ☐ Chin Cup⁶ \$71 E2324 O 4" Wide Pneumatic, Knobby, Extended-\$551 ☐ Extended I-Handle \$71 E2323 Traction Tires² ☐ Soft Ball Handle \$50 E2323 **BATTERY CHARGER** ■ Medium Ball Handle \$50 E2323 ☐ Bodypoint 3" Goal Post Handle Price \$66 E2323 Description ☐ Bodypoint 4" Goal Post Handle E2323 \$66 8 Amp, Off-board Charger Standard JOYSTICK MOUNTING BRACKETS LED LIGHT PACKAGE Description Price **HCPCS Code** Description Price ☐ Fixed Inline Standard Through Q-Logic EX with Lights \$995 □ Left Right TRANSIT KIT E1028 Swing-away \$210 Description Price □ Left □ Right Refer to Page 6 for Details Regarding Occupied and Unoccupied Transit Kits □ Inline Offset Occupied Transit Kit □ 4" Ext. □ 7" Ext. \$350 O Unoccupied Transit Kit3 \$300 O Multi-axis Fixed \$100 K0108 O Left O Right NON EXPANDABLE CONTROLS **FOOTNOTES** Description Price **HCPCS Code** ☐ 75 Amp NE Standard 1. Requires Q-Logic EX. 2. Increases overall base width by 1.5" with Flat Free, 1.8" with Pneumatic Unoccupied Transit Kit with a Vent Tray may not allow lowest seat to floor height, vent tray All mounting hardware is included in kit. See Specialty Electronics order form for additional mounting options and secondary controls. Bluetooth mouse emulator requires a run plug harness for either static or power seating. Additional fees will apply. ☐ 75 Amp NE+ 6-Key For Up To 2 Actuators Thru Joystick Standard on 3SP-SS Package Works with Q-Logic EX and NE+ only

Revised: July 7, 2011

Use code E2323 when not used in conjunction with a chin control

Not available with Q-logic EX Stand Alone Joystick

Order Form

Options with a circular checkbox (Q) are NOT available through Quantum West

TRU-BALANCE® POWER POSITION			TRU-COMFORT™ SEATING
Description	Price		B : (: Nopeo o)
☐ TRU-Balance® Power Tilt (55°) 55 degree center of gravity (CG) power tilt seating s	\$4995	E1002	Please refer to TRU-Comfort™ Cushion and TRU-Comfort Back order forms for detailed pricing, sizes and codes.
 55 degree center of gravity (CG) power tilt seating sy TRU-Balance® Power Recline (168°) 	ystem. 300lbs weig \$5595	ht capacity. E1004	TRU-Comfort™ Back Cushion:
Full Drive lock-out at 20 degrees. 300 lbs. weight of	capacity		□ 16"W □ 18" W □ 20"W \$595 E2620 Back Height ⁷ :
☐ TRU-Balance® Power Tilt (55°) & Recline (Full Drive lock-out at 20 degrees, 300 lbs. weight of 55 degree center of gravity (CG) power tilt seating	168°) \$9595 capacity system.	E1007	□22" H □25" H No Charge
○ TRU-Balance® Lift (10") ¹	\$2895		□Standard Allure leather-like cover No Charge
Must be selected in conjunction with TB Power Till SEATING SPECIFICATIONS	lt or TB Power Tilt	& Recline.	□Plus 4-way stretch material cover No Charge TRU-Comfort™ Back Options:
			□Offset (Meso) ⁸ \$195
Seat Width: ☐ 14" ☐ 15" ☐ 16"	□ 17"	□ 18"	□2" (1" Per Side) □4" (2" Per Side)
□ 19" □ 20"			□Inset (Endo) ⁸ \$195 □2" (1" Per Side) □4" (2" Per Side)
Seat Width Package: □ 14"W-18"W □ 15"W-20"W			TRU-Comfort™ Seat Cushion General Use
Seat Depth:	D 47"	D 40"	Includes Allure leather-like cover
□ 14" □ 15" □ 16" □ 16" □ 19" □ 20"	□ 17"	□ 18"	TRU-Comfort™ Plus Seat Cushion Skin Protection
Seat Depth Package:			Includes 4-way stretch material cover □ 16" x 16" - 20" x 20" \$380 E2603
□ 14"D-18"D □ 16"D-20"D Back Cane Height:			ARMRESTS
□ 14"	□ 17"	□ 18"	Description Price HCPCS Code
□ 19" □ 20" □ 21" □ 24" □ 25"	□ 22"	□ 23"	Tilt Armrests:
Back Rest Height: ☐ 18" ☐ 19" ☐ 20"	2 1"	2 2"	☐ Flip-back, Cane Mounted ⁹ No Charge
□ 18" □ 19" □ 20" □ 23" □ 24" □ 25"	u 21	J 22	□ 2-post, Flip-back, Height-adjustable, No Charge Removable ^{9,10}
BACK OPTIONS			☐ Single-post, Height-adjustable, Removable ¹¹ No Charge ☐ Quad Release Lever
Description	Price	HCPCS Code	
Tilt Back:			□8"H - Ĭ2"H ´ □10"H-14"H
☐ Synergy Back with 1.5" thick back cushion	Standard	i	☐ Removable, Single-post, Height Adjustable, No Charge Heavy Duty ———————————————————————————————————
Choose Lateral Extension:			□ Pediatric, Removable ¹³ □ 10"H-14"H No Charge
□10" (For Back Heights 18") □12" (For Back Heights 19"-22")	\$25 \$25		Color: □Match Shroud □Black
□16" (For Back Heights 23"-25")	\$25		☐ Quad Release Lever ☐ Height Adjustable Cantilever Armrests¹⁴ \$195
☐ Synergy® Shape Back Positioning Back	Various	E2613/E2614	Angle-Adjustable: - 30° through + 30°
See Synergy Shape Back order form for detailed pricing O Omit Back	g, sizes and codes (-\$100)		Recline Armrests:
Tilt Back Options:	(,,		□ Reclining, Flip Back TRU-Balance Power Recline Only □8"H - 9"H □10"H-11"H
□Standard Back Canes □ Omit Push Handles	Standard \$125	d	□8"H - 9"H □10"H-11"H ○ Height Adjustable Cantilever Armrests¹⁴ \$195
OFlip Forward Canes ²	\$125 \$150		Angle-Adjustable: - 30° through + 30°
☐ Omit Push Handles	\$125		FOOTNOTES
Offset (Meso)³ □2" (1" Per Side) □4" (2" Per Si	\$195 de)		10" of scissor lift. Must select TB Tilt or TB Tilt & Recline in conjuncton with lift. Includes 1/4 Speed
Olnset (Endo) ³	\$195		Inhibit. Allowable dimensions 16" x 16" - 20" x 20". Requires Q-Logic EX. Not available with Manual Recline.
□2" (1" Per Side) □4" (2" Per Si	,	E4000	Not available with Attendant Manual Recline, Vent Tray, Bariatric Armpads, or O2 Holder Tru Comfort Back requires SOF. May interfere with Lateral Supports and Waterfall Armpads
OAttendant Manual Recline ⁴ 250lbs Weight Capacity	\$750 , 180° of Recline	E1226	Dual Post Flip-back Armrests interfere with offset canes. Not available with Manual Recline.
			4. Not available with Flip Back Arms, Cantilever Arms, Shape Back, Power Elevate or 10" Lift. Requires
Recline Back: ☐ Synergy Reclining Back with 1.5" thick back cushion	Standard	i	Synergy Back. Pivot point 2.5" above seat pan. In iQuantum this option should be chosen under 'Dep Package Type' and also 'Back Cane Type'.
with 1.5" thick back cushion O After Market Back Interface⁵	\$200		Seat depth may be adjusted to accomodate certain after market backs. Contact your Quantum Specialist for details. Does not include brackets to mount After Market Back
Recline Back Options:	¢405		 Recline units require Cantilever Armrests and disallows the selection of an Articulating Vent Tray. Back width cannot be less than 14"W or exceed 24"W.
□Offset (Meso) ⁶ □2" (1" Per Side) □4" (2" Per Si	\$195 de)		7. TRU-Comfort back height is measured from the top of a 3" cushion.
□Inset (Endo) ⁶	[*] \$195		Dual Post Flip-back Armrests interfere with Meso brackets. Back width cannot be less than 16"W or exceed 22"W.
□2" (1" Per Side) □4" (2" Per Si	de)		Interferes with swing-away laterals
			10 Height adjustable from 9"-13" in 1" increments
			11. Height adjustable from 11"-17" in 1/2" increments
			12. Bariatric armrests must be used with bariatric armpads.
			13. Height adjustable from 7.75"-9.75" in 1/2" increments. Not available with full length armpads
			 Height adjustment from 11-17" depends on cane height. Not available with Manual Recline, Flip Forward back canes, Cane Clamp Pushbar, & Shape Back. Call for details when selecting aftermarke arm troughs.
			The state of the s

Order Form

Options with a circular checkbox (O) are NOT available through Quantum Wes

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ARMPADS			NON-POWERED L	EGRESTS			
☐ Straight, Full Length (2"x14") ☐ Left ☐ Right	Standard		Description			Price	HCPCS Code
☐ Straight, Desk Length (2"x10") ☐ Left ☐ Right	No Charge		☐ 70° Swing-away L☐ Straig	•	Tapered	Standard	
☐ Waterfall, Full Length (2"x14") ☐ Left ☐ Right	No Charge		☐ Standard Extruded Standard Extruded Exter	l Footplates		No Charge	
☐ Waterfall, Desk Length (2"x10") ☐ Left ☐ Right	No Charge		☐ 11"-13" Standard Extruded Footp		□ 15.5"-1	19.5"	
☐ Falcon Gel, Full Length, (3.5"x14") ☐ Left ☐ Right	\$150 pr.		☐ 7.25" x 6" ☐ Angle-Adjustable F Angle Adjustable Extens	□ 8.5" x 6" Footplates ⁸		\$150	K0040
☐ Falcon Gel, Desk Length, (3.5"x10") ☐ Left ☐ Right	\$115 pr.		☐ 11"-13" Angle-Adjustable Footpla	□ 13"-16.5"	□ 15.5"-1	19.5"	
O Flat Bariatric ¹ O Left O Right	No Charge		□ 4" x 6" □ 6" x 8" ⁹	□ 5" x 6" □ 6" x 11"9	□ 5" x 8" □ 8" x 11	"10	
JOYSTICK MOUNTING BLOCKS			☐ Multi-Axis Footplat		_ 0 / 1.	\$495	K0040
	Derive	HODOO O- d-	Multi-Axis Extensions:	.00		Ψ.00	110010
Description ☐ Quick Disconnect ²	Price No Charge	HCPCS Code	☐ 11"-16.5" Multi-Axis Footplates:	□ 15.5"-19.5"			
☐ Vertical Adjustment Clamp	\$95	K0108	☐ 4" x 6" ☐ 6" x 8" ⁹	□ 5" x 6" □ 6" x 11" ⁹	□ 5" x 8"	"10	
☐ Figure 8 style (For use with waterfall armpads)	No Charge				□ 8" x 11		
☐ Figure 8 T-style (For use with recline & waterfall are	mpads) No Charge		O High Mount, Clan	np-On Footre	Si	¢226	K0040
POWER POSITIONING ELECTRO	NICS		O Angle Adjustable O Small, 4" x	7 75"	O Larne	\$326 4.25" x 9.25'	
Description	Price	HCPCS Code	O Multi-Axis	1.15	J Large,	\$412	K0040
Single Actuator Electronics			O Small, 4" x	7.75"	O Large,	4.25" x 9.25'	
☐ Through Toggle Box (Tilt Only)	No Charge		☐ Heavy Duty Drop		3 /	\$420	
☐ Left Mount ☐ Right Mount	140 Onlarge		☐ Angle Adjustable F			\$150	K0040
☐ Through NE+ 6-Key	\$1175	E2310	Angle Adjustable Extens	ion Length:		7.55	
☐ Through Single Switch³ (Tilt Only with Q-Logic EX)	\$500		☐ 12"-14.5" Angle Adjustable Footpla	□ 14.5" -18"			
☐ Through Q-Logic EX Controller	\$1175	E2310	□ 4" x 6"	□ 5" x 6"	□ 5" x 8"		
Dual Actuator Electronics			☐ 6" x 8"9	□ 6" x 11"9	□ 8" x 11	"10	
☐ Through NE+ 6-Key Controller	\$2375	E2311	☐ Elevating Legres			\$325	E0990
Multiple Actuator Electronics			☐ Standard Footplate			4020	
☐ Through Q-Logic EX Controller	\$2375	E2311	Standard Extruded Exter				
Q-Logic EX Through 4-way Toggle	\$2375		☐ 11"-14" Standard Extruded Footp	☐ 14"-17"			
☐ Left Mount ☐ Right Mount ☐ Q-Logic EX Through 4-way Button Toggle	\$2375		□ 7.25" x 6"	□ 8.5" x 6"			
☐ Left Mount ☐ Right Mount	ΨΖΟΙΟ		☐ Angle Adjustable F			\$150	K0040
☐ Q-Logic EX hrough Quad Push-button	\$2375		Angle Adjustable Extens			,	
☐ Left Mount ☐ Right Mount			□ 12"-14.5"	1 4.5" -18"			
HEADRESTS			Angle Adjustable Footpla	ate Size:			
Description	Price	HCPCS Code	□ 4" x 6"	□ 5" x 6"	□ 5" x 8"		
	77700	7707 00 0040	□ 6" x 8" ⁹	□ 6" x 11" ⁹	□ 8" x 11	"10	
O No Headrest Required			☐ Calf Pad Adjustme				
TRU-Comfort™Headrest⁴	COO E	FOOFF	□ 1 Hole	□ 3 Hole	□ 6 Hole		
□ 8" Wide Leatherette	\$205	E0955	☐ 90° Pediatric Swi		rests ⁷	No Charge	9
□ 8" TRU-Comfort Plus □ 10" Wide Leatherette	\$205 \$205	E0955 E0955	☐ Angle Adjustable F Angle Adjustable Extens	·ootplates° ion Lenath:			
□ 10° Wide Leatherette □ 10° TRU-Comfort Plus	\$205 \$205	E0955	□ 7"-10"				
☐ Removable Headrest Bracket ⁵	\$210	E1028	Angle Adjustable Footpla				
Stealth	Ψ210	21020	□ 4" x 6"	□ 5" x 6"			
☐ Small (9.75"W x 3"H)	\$205	E0955	HIGH MOUNT FOC	T PLATFOR	RM		
□ Large (11"W x 6"H)	\$205	E0955	Description			Price	HCPCS Code
O Pediatric Comfort Plus (6"W)	\$205	E0955	D. I. liede May not Foot Dietfor			0.450	1/0400
☐ Small Comfort Plus (10"W)	\$205	E0955	☐ High Mount Foot Platfor☐ 10"-14" Ext.7		"Ext7	\$450	K0108
☐ Large Comfort Plus (14"W)	\$205	E0955		☐ 14"-17	EXI.		
□ Removable Headrest Bracket ⁵	\$210	E1028	FOOTNOTES				
☐ Swing-away (Flip-down) Headrest Bracket ⁶	\$210	E1028					
Used in Addition to Removable Headrest Bracket			Bariatric armrests must be us	ed with bariatric arm	pads.		
Medical Applications			2. Not available with waterfall ar	mpads.			
O Small (9.75"W x 3"H)	\$230	E0955	3. Single switch not included. S	ee specialty controls	order form for	a list of available	switches.
O Large (11"W x 6"H)	\$230	E0955	Measurement is taken from t	he inside of the hear	drest.		
O Removable Headrest Bracket ⁵	\$210	E1028					and December 1
O Reclining Headrest (6.5"W x 7"H)	\$205	E0955	When headrest pad is choser		ically selects R	emovable Headre	est Bracket.
O Removable Bracket For Reclining Headre	st ⁵ \$210	E1028	6. Not available with power recl	ine.			
Aftermarket Bracket O Removable Bracket for Aftermarket Headrest	\$210	E1028	7. Extensions measured from to	p of seatpan to footp	late.		
Tremovable bracket for Attermarket Headlest	ψ∠ 10	L1020	8. Includes heel loops.				
			9. Requires seat width 18" or gro	eater.			
			10. Requires seat width 20" or gre	eater.			

Group 3 Single Power & Multiple Power

Order Form

Options with a circular checkbox (O) are NOT available through Quantum West.

POWER ELEVATING LEG	GRESTS			SYNERGY® CUSHIONS		
Description		Price	HCPCS Code	Description	Price	HCPCS Code
☐ 70° Articulating Swing-Aw	ay Legrests,	\$2,395	E1010	O No Cushion Required		
4" Articulation Range		•		Please refer to Synergy order forms for detailed pricing, sizes and	codes.	
☐ Quad Release L	_ever			Simplicity Cushion General Use	***	====
Calf Pads¹: ☐ 6" x 5.35"	□ 8" x 5.86"			□ 16" x 16" - 20" x 20"	\$98	E2601
Angle Adjustable Extension Length ² :				Solution® 1 Cushion Skin Protection		
□ 11"-13"	□ 14.5"-18"			□ 14" x 14" - 20" x 18"	\$380	E2603
Angle Adjustable Footplate Size:	"			□ 20" x 20"	\$430	E2603
□ 4" x 6" □ 5" x 6 □ 6" x 8" ³ □ 6" x 1		"4		Solution® Cushion Skin Protection & Positioning		
Operational Method:	1 · • 0 × 11			□ 10" x 10" - 20" x 18"	\$380	E2607
Independent	Combined			□ 20" x 20"	\$430	E2607
□ 70° Articulating Drop-In Le	aaraete	\$2,395	E1010	Spectrum® Gel Cushion Positioning		
□ 4" Range	□ 6" Range	ΨΣ,333	L1010	☐ 12" x 10" - 20" x 19"	\$480	E2605
Calf Pads1:	ŭ			□ 20" x 20"	\$530	E2605
☐ 6" x 5.35" Angle Adjustable Extension Length ² :	□ 8" x 5.86"			Spectrum® Visco Cushion Skin Protection & Positionir	าต	
□ 12"-14.5"	□ 14.5"-18"			□ 10" x 10" - 20" x 18"	\$480	E2607
Angle Adjustable Footplate Size:				□ 20" x 20"	\$530	E2607
□ 4" x 6" □ 5" x 6	" □ 5" x 8"			Spectrum Air Adjustable Skin Protection		
☐ 6" x 8" ³ ☐ 6" x 1 Operational Method:	1"³ □ 8" x 11'	"4		O 14" x 12" - 20" x 20"	\$480	E2622
☐ Independent	Combined				•	LLULL
POWER ARTICULATING	FOOT PLAT	FORM		Spectrum Air Contour Adjustable Skin Protection & Posi. O 14" x 12" - 20" x 20"	tioning \$499	E2624
Description		Price	HCPCS Code	LATERALS	φ 4 99	L2024
☐ Power Articulating Foot P	Platform	\$2,895	K0108			
☐ Standard Split Footplatform		4 2,000	110100	Description	Price	HCPCS Code
Extension Length ² :				☐ Stealth Thoracic Laterals (pair)		
☐ 12"-14" ☐ 14"-16 Footplatform Size:	6"			Bracket: □125° Swing-Away Bracket ⁸	\$450	E1028
□ 10.5" x 8" □ 10.5"	x 10.5"			(For Use with TRU-Comfort)		
☐ Depth Adjustable Split Footp				☐Swing-Away, Rail Mount Bracket ⁸ (For Use with Synergy Back)	\$450	E1028
Depth Adjustable Extension Length ² :				Pad:		
1 6" -18"				□Flat Pad, 3" x 5", Leather-Like Cover	\$200	E0956
Depth Adjustable Footplatform Size:				□Flat Pad, 4" x 6", Leather-Like Cover	\$200 \$200	E0956 E0956
□ 10.5" x 10.5"				□Curved Pad, 2" x 3", 4-Way Stretch Cover □Curved Pad, 3" x 5", 4-Way Stretch Cover	\$200 \$200	E0956
Optional Accessories:				□Curved Pad, 4" x 6", 4-Way Stretch Cover		E0956
☐ Connection Bracket		\$49				
☐ Heel Cups		\$39	K0108	☐ Stealth Pelvic/Thigh Laterals		
FRONT RIGGING ACCES	SORIES			□ Left Side □ Right Side		
Description		Price	HCPCS Code	Bracket: ☐ Removable Bracket (ea.)	\$250	E1028
■ Wheel Bumpers ⁵		\$25		☐ Flip Down Bracket (ea.)	\$225	E1028
☐ Heel Loops (pair) ⁶		\$38	E0951	Pad: ☐ Short Pad, 4" x 4" (ea.)	\$90	E0956
☐ Gel Neoprene Footrest Sleeve	'' '	\$65	K0108	☐ Medium Pad, 4" x 8" (éa.)	\$90	E0956
□ ELR/ALR Adductor Buttons (pa□ POSAlinc Knee Adductor for	ıır)	\$100 \$464	K0108 K0108	☐ Long Pad, 4" x 12" (ea.) ´	\$90	E0956
Swing-Away Legrests (pair)		\$404	KU100			
☐ POSAlinc Rail Mounted Knee A	Adductor (pair)	\$464	K0108			
☐ Residual Limb Support	tadactor (pair)	\$300	E1020			
□ Left	□ Right	7				
O Ankle Huggers (pair)	Ü	\$126	K0108			
O Small	O Medium					
				I		

FOOTNOTES

- Calf pads are selected in the rigging accessory section of iQuantum
- 2. Extensions are measured from top of seat pan to footplate
- 3. Only available with seat width 18" or greater
- 4. Only available with seat width 20" or greater
- 5. Standard on Power Elevating Legrests
- 6. Standard with angle adjustable footplates
- 7. Available only with swing-away legrests
- 8. Swing-away laterals interfere with flip-back armrests

Options with a circular checkbox (O) are NOT available through Quantum West.

MISCELL ANEOUS POSITIONING COMPONENTS

MISCELLANEOUS POSITIONING C	OMPONEN	113	U
Description	Price	HCPCS Code	
☐ Therafin Flip-down Knee Abductor Bracket¹	\$190	E1028	
☐ Small ☐ Medium ☐ Large ☐ Stealth Foot Boxes (pair) ☐ Small ☐ Medium ☐ Large	\$125 \$475	E0957 K0108	N
☐ Stealth Padded Shoe Holders (pair) ☐ Small ☐ Medium ☐ X-Large	\$166	K0108	
☐ Otto Bock Arm Channels (ea.)	\$102	E2209	
☐ Left ☐ Right Size: ☐ Small ☐ Medium ☐ Large ☐ Otto Bock Flat Hand Pad(ea.) Side:	\$51		
☐ Left ☐ Right			
☐ Medium ☐ Large Please see positioning components order form for add	lditional types, siz	es and details.	

ACCESSORIES		
Description	Price	HCPCS Code
O Quantum Backpack ²	\$60	
□ Oxygen Holder³	\$150	E2208
○ Recline Accessory Mounting Bracket ⁴	\$50	
O Weather Cover, Medium, Black	\$158	
☐ Cup Holder	\$17	
<i>\$ide</i> : □Left □Right		

LAP BELTS		
Description	Price	HCPCS Code
□ 38" Lap Belt	Standard	
☐ 50" Lap Belt	Standard	
☐ 60" Lap Belt	Standard	
☐ 70" Lap Belt	Standard	
□ 80" Lap Belt	Standard	
☐ 90" Lap Belt	Standard	
□ Pelvic Positioning Belt, 2-Point Padded Med, 9"-15" Hip Width	\$86	
☐ Pelvic Positioning Belt, 2-Point Padded, Lg, 13"-19" Hip Width	\$91	
☐ Pelvic Positioning Belt, 4-Point Padded, Med, 9"-15" Hip Width	\$112	
☐ Pelvic Positioning Belt, 4-Point Padded, Lg,	\$116	

13"-19" Hip Width		
BATTERIES		
Description	Price	HCPCS Code
□NF-22, 50-Amp Batteries □Maintainance Free AGM □Maintainance Free Gel Cell (Un ○Maintainance Free Gel Cell (Mr Installation:		E2361 E2361 E2361
	Do Not Install	

COMPACT VENT TRAY

O Compact Vent Tray The addition of a compact vent tray may increase the length & weight of your power chair.

Mounting Bracket:

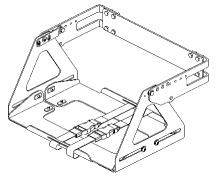
n not required with Recline systems or with TRU-Comfort Back

- O 3" Offset⁵ O 6" Offset
- Max Vent Dim. 3.25" H x 10.5" W x 13.5" / 20 lbs.
- Not Available with Shape Back, flip-down back canes, or with any rear mounted accessories
- Requires back cane height greater than 22" on seats without recline.



Description	Price	HCPCS Code
O Articulating Vent Tray - 14.5"W x 10.5-15.5"D	\$1,450	E1030
O Articulating Bi-PAP Vent Tray - 9.5"W x 9.5-13.5"D	\$1.450	E1030

The addition of an articulating vent or Bi-PAP tray may increase the length & weight of your power chair.



Battery Tray Selection:

O Battery Tray	\$450	K0108
O Include U1 Battery Box	\$50	K0108
O Include U1 Battery	\$133	E2365

FOOTNOTES

- Not available with highmount footplatform.
- 2. Backpack may interfere w/ other rear accessories.
- 3. Oxygen holder on Tilt with Tru Comfort back or on Power Recline requires SOF.
- 1" adaptor tube allows cane mounted accessories to mount to power recline back or siderail.
- 5. Not available with Flip-back Cane Mounted Arms.
- Not available with TRU Balance Lift, Manual Recline or with rear mounted accessories.

TRANSIT KIT INFO

Q600

THIS SECTION MUST BE READ

The Transit Securement Package, when used in conjunction with a wheelchair in the specific configuration of a 18"x20" seat size, with 25" high back canes, Full-length height-adjustable single post armrests, Synergy back 25"h, and style 8 swing away legrests and extruded footplates and heelloops, conforms with the standard of ANSI/RESNA WC/Vol. 4, Section 19, for the purpose of enabling wheelchairs to be secured in certain types of motor vehicles. The Transit Securement Package, including manufacturer-installed front and rear securement brackets and pelvic belt anchoring brackets, has been crash tested in accordance with ANSI/RESNA WC/Vol. 4, Section 19, Frontal Impact Test, with a 168-lbs. (76.2 kg) surrogate occupant corresponding to a user weight range of 115 lbs. (52.16 kg) to 210 lbs. (95.25 kg). While the Transit Securement Package is compatible with additional seat sizes, optional components, and varied configurations, and provides designated securement points, Pride Mobility makes no claims that any other components or configurations have been tested beyond the above described ANSI/RESNA conforming configuration. Please refer to the Transit Securement Package supplement (part number INFMANU3658) for additional information.

RULES

- -All options are available when unoccupied.
- Notes when selecting occupied transit kit:
- -It is recommended that usuable back height be 2" lower than shoulder height.
- -Available on Synergy Seat up to 20W x 20D
- -Power AFP, ALRs & ELRs are available on Synergy Seating
- -All legrests must have heel loops
- -Synergy manual seating is N/A
- -TRU-Balance Power Positioning seating, options and accessories are N/A
- -TRU-Comfort seat cushion is N/A
- -Contoured seating is N/A
- -Specialty seating is N/A
- -Vent option is N/A

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