

Specialty Seat Kit Order Form



Pride Mobility Products Corporation
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Discount: _____
Terms: _____
Freight: _____
Taken By: _____

Account Number: _____
Provider Name: _____
Contact: _____
Phone: _____
Fax: _____
Date: _____
PO#: _____
Marked For: _____
Ship To Address: _____
City: _____ State: _____ Zip: _____

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.

BASES: BACK OPTIONS

300lb Weight Capacity. Max Dimensions 20"W x 20"D

- Jazzy Select 6
- Jazzy Select Elite
- Jazzy Select Elite 6
- J6
- Quantum 610
- Jazzy Elite 14
- Q6000Z

For Discontinued Bases, Contact Inside Sales Specialist

Description	Price	HCPCS Code
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- | | | |
|--|---|-------------|
| <input type="checkbox"/> Synergy® Shape Back <i>Positioning Back</i> | Various | E2613/E2614 |
| <i>See Synergy Shape Back Order Form For Detailed Pricing, Sizes and Codes</i> | | |
| <input type="checkbox"/> Sling Back | \$98 | |
| <input type="checkbox"/> Omit Back | No Charge | |
| <input type="checkbox"/> Synergy® Back with 1.5" Thick Back Cushion | \$275 | |
| Overall Back | <input type="checkbox"/> 18" H <input type="checkbox"/> 19" H <input type="checkbox"/> 20" H <input type="checkbox"/> 21" H | |
| Height: | <input type="checkbox"/> 22" H <input type="checkbox"/> 23" H <input type="checkbox"/> 24" H <input type="checkbox"/> 25" H | |
| <i>Choose Lateral Extensions¹:</i> | | |
| <input type="checkbox"/> 6" for 13"-16"H Back | \$25 | |
| <input type="checkbox"/> 10" for 17"-18"H Back | \$25 | |
| <input type="checkbox"/> 12" For 19"-22"H Back | \$25 | |
| <input type="checkbox"/> 16" For 23"-25"H Back | \$25 | |

Synergy® Back Cane Options:

- | | |
|--|-----------|
| <input type="checkbox"/> Standard Back Canes | Standard |
| <input type="checkbox"/> Omit Push Handles | No Charge |

1. Lateral extensions are required to mount lateral thoracic supports.

SEATING SYSTEMS JOYSTICK RECEIVER MOUNT

Description	Price
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- | | |
|--|-------|
| <input type="checkbox"/> Specialty Seating | \$400 |
| List base serial # for off chair seating | |
| S/N: _____ | |

Seat Width:

- 16" 18" 20"

Seat Depth:

- 16" 17" 18" 19" 20"

Back Cane Height:

- 18" 20" 22"

Armrests:

- | | | |
|--|-----------|-------|
| <input type="checkbox"/> 2-Post, Fixed, Flip Back ¹ | No Charge | |
| <input type="checkbox"/> Flip-Back, Cane Mounted ¹ | \$95 ea. | |
| <input type="checkbox"/> Removable, Adjustable, Quick Height ² | \$275 ea. | E0973 |
| <input type="checkbox"/> Removable, Single-Post, Height Adjustable Heavy Duty | \$150 ea. | E0973 |
| <input type="checkbox"/> 8-12" Adjustment <input type="checkbox"/> 10-14" Adjustment | | |

Armpads:

- | | |
|---|-----------|
| <input type="checkbox"/> Straight, Full Length (2"x14") | Standard |
| <input type="checkbox"/> Left <input type="checkbox"/> Right | |
| <input type="checkbox"/> Straight, Desk Length (2"x10") | No Charge |
| <input type="checkbox"/> Left <input type="checkbox"/> Right | |
| <input type="checkbox"/> Waterfall, Full Length (2"x14") ³ | No Charge |
| <input type="checkbox"/> Left <input type="checkbox"/> Right | |
| <input type="checkbox"/> Waterfall, Desk Length (2"x10") ⁴ | No Charge |
| <input type="checkbox"/> Left <input type="checkbox"/> Right | |

1. Swing-away Laterals Interfere with flip-back arms. Call for configuration with Shape back.

2. Adjustable from 11" to 17"H in 1/2" increments.

3. Not available w/ Cane Mounted, Flip Back Armrests combined with a Synergy Back.

Description	Price
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- | | |
|---|-----------|
| <input type="checkbox"/> Universal Joystick Receiver Mount | No Charge |
| <input type="checkbox"/> Left <input type="checkbox"/> Right | |
| <input type="checkbox"/> Omit Universal Joystick Receiver Mount | No Charge |

LAP BELTS

Description	Price
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- | | |
|--|----------|
| <input type="checkbox"/> 38" Lap Belt | Standard |
| <input type="checkbox"/> 50" Lap Belt | Standard |
| <input type="checkbox"/> 60" Lap Belt | Standard |
| <input type="checkbox"/> 60" Padded Lap Belt | \$115 |
| <input type="checkbox"/> 70" Lap Belt | Standard |
| <input type="checkbox"/> 80" Lap Belt | Standard |
| <input type="checkbox"/> 90" Lap Belt | Standard |

HEADRESTS

Description	Price	HCPCS Code
<input type="checkbox"/> No Headrest Required		
TRU-Comfort™ Headrest¹:		
<input type="checkbox"/> 8" W Leatherette	\$205	E0955
<input type="checkbox"/> 8"W TRU-Comfort Plus	\$205	E0955
<input type="checkbox"/> 10" W Leatherette	\$205	E0955
<input type="checkbox"/> 10"W TRU-Comfort Plus	\$205	E0955
<input type="checkbox"/> Removable Headrest Bracket	\$210	E1028
Stealth:		
<input type="checkbox"/> Small (9.75"W x 3"H) (STL-OTSM250)	\$205	E0955
<input type="checkbox"/> Large (11"W x 6"H) (STL-OTLG150)	\$205	E0955
<input type="checkbox"/> Pediatric Comfort Plus (6"W) (CPN350)	\$142	E0955
<input type="checkbox"/> Small Comfort Plus (10"W) (CP250)	\$142	E0955
<input type="checkbox"/> Large Comfort Plus (14"W) (CP150)	\$142	E0955
<input type="checkbox"/> Removable Headrest Bracket ² (HMO475P)	\$210	E1028
<input type="checkbox"/> Swing-away (Flip-down) Headrest Bracket (FDM350)	\$210	
Used in Addition to Removable Headrest Bracket		
Aftermarket Bracket:		
<input type="checkbox"/> Stealth's World's Best Removable Headrest Hardware (TWB485)	\$210	E1028

1. Measurement is taken from the inside of the headrest.

LATERALS

Description	Price	HCPCS Code
<input type="checkbox"/> Stealth Thoracic Laterals (pair)^{1*}		
<i>Bracket:</i>		
<input type="checkbox"/> Swing-Away Rail Mounted	\$450	E1028
<i>For Use on Synergy Back</i>		
<i>Pad:</i>		
<input type="checkbox"/> Flat Pad, 3"x5", Leather-Like Cover	\$200	E0956
<input type="checkbox"/> Flat Pad, 4"x6", Leather-Like Cover	\$200	E0956
<input type="checkbox"/> Curved Pad, 2"x3", 4-Way Stretch Cover	\$200	E0956
<input type="checkbox"/> Curved Pad, 3"x5", 4-Way Stretch Cover	\$200	E0956
<input type="checkbox"/> Curved Pad, 4"x6", 4-Way Stretch Cover	\$200	E0956

1. Swing-away laterals interfere with flip-up armrests.

NON-POWER LEGRESTS

Description	Price	HCPCS Code
<input type="checkbox"/> 60-90° Swing-away Legrests¹	\$162	
<i>(Adjustable in 5° increments)</i>		
<input type="checkbox"/> Standard Extruded Footplates	No Charge	
<i>Standard Extruded Extensions:</i>		
<input type="checkbox"/> 13"-16.5"		<input type="checkbox"/> 15.5"-19.5"
<i>Standard Extruded Footplate Size:</i>		
<input type="checkbox"/> 7.25" x 6"		<input type="checkbox"/> 8.5" x 6"
<input type="checkbox"/> Angle-Adjustable Footplates ²	\$150	K0040 ³
<i>Angle Adjustable Extensions:</i>		
<input type="checkbox"/> 13"-16.5"		<input type="checkbox"/> 15.5"-19.5"
<i>Angle-Adjustable Footplate Size:</i>		
<input type="checkbox"/> 4" x 6"		<input type="checkbox"/> 5" x 6"
<input type="checkbox"/> 6" x 8" ⁴		<input type="checkbox"/> 6" x 11" ⁴
<input type="checkbox"/> 5" x 8"		<input type="checkbox"/> 8" x 11" ⁵
<input type="checkbox"/> Multi-Axis Footplates	\$495	K0040 ³
<i>Multi-Axis Extensions:</i>		
<input type="checkbox"/> 15.5"-19.5"		
<i>Multi-Axis Footplate Size:</i>		
<input type="checkbox"/> 4" x 6"		<input type="checkbox"/> 5" x 6"
<input type="checkbox"/> 6" x 8" ³		<input type="checkbox"/> 6" x 11" ⁴
<input type="checkbox"/> 5" x 8"		<input type="checkbox"/> 8" x 11" ⁴

90° Pediatric Swing-Away Legrests⁶ **\$162**

Angle Adjustable Footplates²

Angle Adjustable Extension Length:

7" - 10"

Angle Adjustable Footplate Size:

4" x 6" 5" x 6"

1. Possible caster wheel interference when adjusted to less than 70 degrees.

2. Includes Heel Loops

3. K0040 is not separately reimbursable on Group 2 bases.

4. Causes interference on seat widths less than 18".

5. Causes interference on seat widths less than 20".

6. Extensions are measured from the seatpan to footplate.

NON-POWER LEGRESTS (CONT'D)

Description	Price	HCPCS Code
<input type="checkbox"/> Elevating Legrests⁷	\$325	K0195/E0990 ⁸
<input type="checkbox"/> Standard Footplates		
<i>Standard Extruded Extension Length:</i>		
<input type="checkbox"/> 11"-14"		<input type="checkbox"/> 14"-17"
<i>Standard Extruded Footplate Size:</i>		
<input type="checkbox"/> 7.25" x 6"		<input type="checkbox"/> 8.5" x 6"
<input type="checkbox"/> Angle Adjustable Footplates ⁹	\$150	K0040 ³
<i>Angle Adjustable Extension Length:</i>		
<input type="checkbox"/> 12"-14.5"		<input type="checkbox"/> 14.5" -18"
<i>Angle Adjustable Footplate Size:</i>		
<input type="checkbox"/> 4" x 6"		<input type="checkbox"/> 5" x 6"
<input type="checkbox"/> 6" x 8" ¹⁰		<input type="checkbox"/> 6" x 11" ¹⁰
<input type="checkbox"/> 5" x 8"		<input type="checkbox"/> 8" x 11" ¹¹
<input type="checkbox"/> Calf Pad Adjustment		
<input type="checkbox"/> 1 Hole	<input type="checkbox"/> 3 Hole	<input type="checkbox"/> 6 Hole
<input type="checkbox"/> High Mount, Clamp-On Footplates*		
<input type="checkbox"/> Angle Adjustable		
<input type="checkbox"/> Small, 4" x 7.75"	\$356	K0040 ³
<input type="checkbox"/> Large, 4.25" x 9.25"	\$356	
<input type="checkbox"/> Multi-Axis		
<input type="checkbox"/> Small, 4" x 7.75"	\$456	K0040 ³
<input type="checkbox"/> Large, 4.25" x 9.25"	\$460	

7. Extensions are measured from the seatpan to footplate.

8. E0990 code used for purchase. K0195 code used for capped rental.

9. Includes Heel Loops.

10. Causes interference on seat widths less than 18".

11. Causes interference on seat widths less than 20".

FOOT RIGGING ACCESSORIES

Description	Price	HCPCS Code
<input type="checkbox"/> Wheel Bumpers	\$25	
<input type="checkbox"/> Heel Loops (pair) ¹	\$38	E0951
<input type="checkbox"/> Gel Neoprene Footrest Sleeve (pair) ²	\$65	K0108
<input type="checkbox"/> ELR/ALR Adductor Buttons (pair)	\$125	K0108
<input type="checkbox"/> POSAlinc Knee Adductor for Swing-Away Legrests (pair)*	\$512	K0108
<input type="checkbox"/> Residual Limb Support	\$300	E1020
<input type="checkbox"/> Left		<input type="checkbox"/> Right
<input type="checkbox"/> Bodypoint Ankle Huggers (pair)*	\$134	K0108
<input type="checkbox"/> Small		<input type="checkbox"/> Medium

1. Standard with angle adjustable footplates.

2. Available only with swing-away legrests.

SYNERGY® SEAT CUSHIONS

Description	Price	HCPCS Code
<input type="checkbox"/> No Cushion Required		
<i>Please refer to Synergy order forms for detailed pricing, sizes and codes.</i>		
Simplicity Cushion General Use		
<input type="checkbox"/> 16" x 16" - 20" x 20"	\$98	E2601
Solution@ 1 Cushion Skin Protection:		
<input type="checkbox"/> 14" x 14" - 20" x 20"	\$380	E2603
Solution@ Cushion Skin Protection & Positioning		
<input type="checkbox"/> 10" x 10" - 20" x 20"	\$380	E2607
Spectrum@ Gel Cushion Positioning		
<input type="checkbox"/> 12" x 10" - 20" x 20"	\$480	E2605
Spectrum@ Visco Cushion Skin Protection & Positioning		
<input type="checkbox"/> 10" x 10" - 20" x 20"	\$480	E2607
Spectrum@ Air Adjustable Skin Protection		
<input type="checkbox"/> 14" x 12" - 20" x 20"	\$480	E2622
Spectrum@ Air Contour Adjustable Skin Protection & Positioning		
<input type="checkbox"/> 14" x 12" - 20" x 20"	\$499	E2624
TRU-Comfort™ Seat Cushion General Use		
<i>Includes Allure leather-like cover</i>		
<input type="checkbox"/> 16" x 16" - 20" x 20"	\$380	E2601
TRU-Comfort™ Plus Seat Cushion Skin Protection		
<i>Includes 4-way stretch material cover</i>		
<input type="checkbox"/> 16" x 16" - 20" x 20"	\$380	E2603

Items marked with a (*) should be chosen in the Positioning Components screen in iQuantum

MISCELLANEOUS POSITIONING COMPONENTS

<i>Description</i>	<i>Price</i>	<i>HCPCS Code</i>
<input type="checkbox"/> Therafin Flip-down Knee Abductor Bracket*	\$172	E1028
<i>Pad:</i>		
<input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large	\$135	E0957
<input type="checkbox"/> Stealth Foot Boxes (pair)*	\$475	K0108
<input type="radio"/> Small <input type="radio"/> Medium <input type="checkbox"/> Large		
<input type="checkbox"/> Stealth Padded Shoe Holders (pair)*	\$166	K0108
<input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> X-Large		
<input type="checkbox"/> Otto Bock Arm Channels (ea.)*	\$104	E2209
<i>Side:</i>		
<input type="checkbox"/> Left <input type="checkbox"/> Right		
<i>Size:</i>		
<input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large		
<input type="checkbox"/> Otto Bock Flat Hand Pad(ea.)*	\$52	
<i>Side:</i>		
<input type="checkbox"/> Left <input type="checkbox"/> Right		
<i>Size:</i>		
<input type="checkbox"/> Medium <input type="checkbox"/> Large		

Please see positioning components order form for additional types, sizes and details.

ACCESSORIES

<i>Description</i>	<i>Price</i>	<i>HCPCS Code</i>
<input type="checkbox"/> Rear Basket ¹	\$103	
<input type="checkbox"/> Cane/Crutch Holder ¹	\$98	E2207
<input type="checkbox"/> Weather Cover, Medium, Black	\$158	
<input type="checkbox"/> Cup Holder	No Charge	
<i>Side:</i>		
<input type="checkbox"/> Left <input type="checkbox"/> Right		
<input type="checkbox"/> Saddle Bag	\$28	
<input type="checkbox"/> Flag Holder	\$17	
<input type="checkbox"/> Quantum Backpack ²	\$60	
<input type="checkbox"/> Oxygen Holder, Synergy Seat ³	\$150	E2208
<input type="checkbox"/> Walker Holder	\$92	K0108
<input type="checkbox"/> Tablet Holder	\$315	
<input type="checkbox"/> Deluxe Cell Phone/Media Holder ⁵	\$140	

1. Includes mounting hardware.
 2. Backpack may interfere w/ other rear accessories.
 3. Not available with Synergy manual recline or manual tilt. Includes mounting hardware.

Items marked with a () should be chosen in the Positioning Components screen in iQuantum*