aspire

POSTUREPRO CHAIRS ASSESSMENT FORM

Prescriber Name:	Client Name:
Phone Number:	Phone Number:
Email:	Address:
Funding Body:	

POSTUREPRO | CODE - CHP231600 | SWL - 140KG
POSTUREPRO PLUS | CODE - CHP231610 | SWL - 140KG

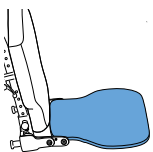| Measurement	Select (mm)	Measurement	Select (mm)
Seat Depth (Range Available) Please specify required depth: 450mm as standard	450 - 540	**Seat to Footrest height** 460mm as standard	410
			435
			460
			485
Seat Width (Range Available) Please specify required width: 400mm as standard	330 - 530		510
		Footrest Angle Angle measured between ltegrest and footrest	90
			96
Seat to Floor Height 530mm as standard	530		102
	560	**Armrest Height** 175mm as standard	175
	590		215
			255
Legrest Depth Please specify required length: 20mm as standard	20 - 140	**Armrest Depth** 0mm as standard	0
			25
			50
			75

Measured from front of Armrest
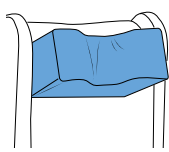
Measurement

Castors

100mm single castors (Set of 4 Standard)

100mm dual castors (Set of 4 Option)

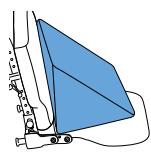13mm spacers are required when fitting. These are provided in the kit
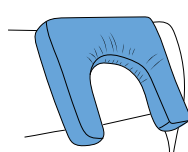
Accessories Items highlighted in blue
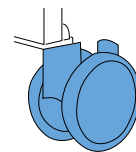

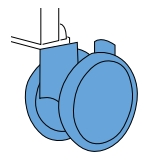| 1" Footrest Padding CHP231650 | Concave Pillow CHP231660 | Legrest Wedge CHP231670 | Horse Shoe Pillow CHP231680 | Twin Total Locking Castor GSP511900 | Twin Directional Locking Castor GSP511905 |

CHAIR ASSESSMENT AND SITE INSPECTION CHECK LIST

After assessment please fill out the below form prior to ordering the chair

External Movement

Alternative entry access points: _____

Are there steps?   Yes   No   If yes, How many? _____

Is the property accessible easily?   Yes   No   Comments: _____

Please give extra information if any: _____

_____

Internal Movement

Are the door and hallway wide enough to move the Chair?   Yes   No

Does the chair have to go upstairs?   Yes   No

Is there a lift?   Yes   No   If yes please mention the lift dimensions (L x W x H):

Is the location and space adequate for the chair?   Yes   No

Is there a power outlet close to the chairs desired location?   Yes   No

Additional Information: