



THE POWER OF PRECISION

# PRECISION-FIT™ ORDER FORM

Date \_\_\_\_\_

PO# \_\_\_\_\_

Patient Name \_\_\_\_\_

Part# \_\_\_\_\_

Phone # \_\_\_\_\_

Company Name \_\_\_\_\_

**Base Foam**

- Soft (STD)  Firm

**Liner Foam**

- 1/4" Soft  1/2" Medium
- 1/4" Medium  1" Super Soft
- 1/2" Super Soft  1" Soft
- 1/2" Soft
- 1/4" Top Medium X 1/2" Bottom Soft
- 1/4" Top Soft X 1/2" Bottom Medium
- 1/2" Top Super Soft X 1/2" Bottom Super Soft
- 1/2" Top Super Soft X 1/2" Bottom Soft
- 1/2" Top Soft X 1/2" Bottom Soft
- 1/2" Top Medium X 1/2" Bottom Medium
- 1/2" Top Medium X 1/2" Bottom Soft
- 1/2" Top Soft X 1/2" Bottom Medium

**Pressure Redistribution Options**

- Synergel™
- Star Cushion Air Insert
- ROHO Air Insert
- Foam

**Outer Cover Options**

- Waterproof Lycra (Std.)
- Black Neoprene
- Polartec
- Dartex
- Spacer Mesh
- Addl. Outer Zipper Cover

**Mount**

- On Rails  Back Shell
- Between Rails

A Seat Depth \_\_\_\_\_

B Seat Width \_\_\_\_\_

**Subtle Positioning**

Standard

**Moderate Positioning**

Standard

**Agressive Positioning**

Standard

**Pelvic Obliquity Modifications**  User's Left  User's Right

A \_\_\_\_\_

B  Increase \_\_\_\_\_  
 Decrease \_\_\_\_\_

C \_\_\_\_\_

**Lateral Hip Support Modifications**  User's Left  User's Right

A \_\_\_\_\_

B  Increase \_\_\_\_\_  
 Decrease \_\_\_\_\_

**Anti-Thrust Seat** \*Beginning of transition

A\* \_\_\_\_\_

B  Increase \_\_\_\_\_  
 Decrease \_\_\_\_\_

**Asymmetrical Seat Depth**

User's Left \_\_\_\_\_

User's Right \_\_\_\_\_

**Front Contour Height Modifications**

**Leg Trough**

**Right**  Increase \_\_\_\_\_  
 Decrease \_\_\_\_\_

**Left**  Increase \_\_\_\_\_  
 Decrease \_\_\_\_\_

**Medial Thigh Support**

Increase \_\_\_\_\_  
 Decrease \_\_\_\_\_  
Length \_\_\_\_\_

**Right Lateral Thigh Support**

Increase \_\_\_\_\_  
 Decrease \_\_\_\_\_  
Length \_\_\_\_\_

**Left Lateral Thigh Support**

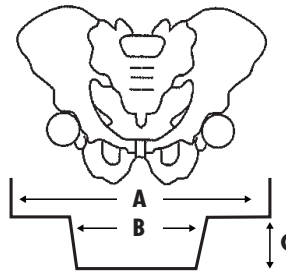
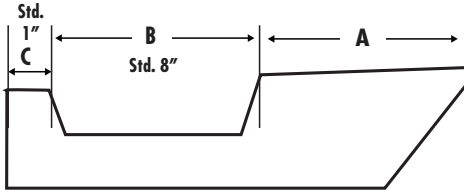
Increase \_\_\_\_\_  
 Decrease \_\_\_\_\_  
Length \_\_\_\_\_



THE POWER OF PRECISION

**PRECISION-FIT™**

**ORDER FORM**



PSIS = \_\_\_\_\_

ASIS = \_\_\_\_\_

(A) Width of Lateral Hip Supports \_\_\_\_\_

(B) Width of Well \_\_\_\_\_

(C) Depth of Well\* \_\_\_\_\_

- (A) FRONT top edge of well to FRONT of cushion
- (B) BACK top edge of well to FRONT top edge of well
- (C) Pelvic well thickness

\*Standard for gel insert: .5"

\*Standard for air or foam: 1"

Coccyx cut out

**Additional Options**

**Extra Strong Lateral Thigh Support**  
(3/8" ABS standard)  
 Left  Right  Both

**ABS Reinforced Lateral Thigh Support**  
(1/8" ABS standard)  
 Left  Right  Both

**Base Options** (1/8" ABS standard)

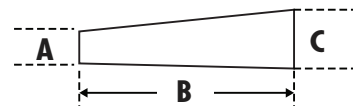
**Drop Base**  
 3/8" ABS  1/2" Wood

**3/8" ABS**

**1/2" Wood**

**Wedge** (1/8" ABS standard)

**Posterior**  **Anterior**



(A) \_\_\_\_\_

(B) \_\_\_\_\_

(C) \_\_\_\_\_

**Comments**

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