

WHEELCHAIR SEATING COMPONENT REQUEST AND JUSTIFICATION FORM GUIDE

1/2 April 2017

SECTION #1: CLIENT INFORMATION

• When completing this section, provide all requested information. If information is not available write N/A or UNKNOWN in the box, whichever is most appropriate.

SECTION #2 PRESCRIBER (Occupational therapist/Physiotherapist licensed to practice in Manitoba)

- When completing this section, provide all requested information. If information is not available write N/A or UNKNOWN in the box, whichever is most appropriate.
- Provide prescriber's professional designation

SECTION #3 DIAGNOSIS / PRESENTING MEDICAL CONDITION

 Provide diagnosis and other presenting medical condition related to the need for the prescribed wheelchair seating components

SECTION #4 MOBILITY BASE

Mobility base refers to the wheelchair that the client will use to mobilize with.

SECTION #5 SEATING

- Seating components is another term that refers to cushions and/or backrests.
- Cushion refers to the pelvic, hip and femoral support surface that the client will use when sitting on the wheelchair/mobility base.
- Backrest refers to the trunk support surface that the client will use when sitting on the wheelchair/mobility base.
- Secondary positioning components refer to any accessory component other than the cushion or backrest that must be included in the set up of the client's mobility base for postural support. e.g. headrest, foot strap, etc.

SECTION #6 ASSESSMENT FINDINGS

- Provide relevant information gathered during assessment that specifically relates to the rationale and justification for the prescribed equipment including
 - Sitting balance
 - Dynamic weight shifting
 - Transfers
 - Ambulation
 - Manual chair propulsion
 - Power chair driving
 - Positioning tendencies
 - Postural asymmetries
 - o Tone
 - Joint flexibility / range of motion for seating
 - Skin Integrity
 - Sitting tolerance and comfort

SECTION #7 TARGETED OUTCOMES

• Provide goals and outcomes the prescriber is aiming for the prescribed equipment to achieve.

SECTION #8 PRODUCT TRIAL

- Select authorized vendor from the Wheelchair Seating Component Equipment List
- Provide information about the products trialed as well as description of the outcome of the trial.
- Product trial is crucial to determine if targeted outcomes are achieved with the use of the prescribed equipment.

SECTION #9 FINAL PRESCRIPTION

- Include the specific product details including set up instructions as applicable that the prescriber is requesting DHSU to provide funding for.
- Must provide rationale to support request for custom modification.