

SPECIFICATION FORM BAND II & III SHOWER COMMODE

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This form is to be used when requesting complex shower commodes. Please include the completed form with your Band II or III Complex Equipment Request.

Assessor's Name:				AEA No:	
Person's Name:				Date:	/ /
Important: Please provi	ide your Client's Weig	ht & Height details:			
Person's Weight:	kg	Pe	erson's Height:	metres	_
COMMODE TYPE					
Please indicate Model a	and Supplier:				
Select type from the list	below:				
Attendant propelled	d [Self propelling		Recliner	
Tilt in space		Custom ¹		Folding	
Heavy Duty		Short bridge		Standard br	ridge
Paediatric ²		Short handle		Bend style h	nandle
¹ Please include itemised q	uote from supplier with	the Service Request form			
² For Paediatric shower commodes specify type, size and components of the shower/commode you are requesting or include an itemised quote from the supplier					
Custom/Other Please specify					
BRAKES					
Attendant Propelled Co	ommodes				
Front Castors		Back Castors		All 4 Cas	stors
Note – Self Propelling Shower Commodes have standard brakes					
SEAT OPTIONS					
Padded Open	Front	Left	Righ	t	Back
Padded Closed		<u>—</u>			_
Custom/Other					
Please specify					
BACK REST AND HEAD SUPPORTS					
	_				
Back	Padded	Strapped		reference	Reclining
Custom/Other	High Back	Head Rest	Late	ral Supports*1	
Custom/Other Please specify					



Person's Name:	
Assessors' Name:	

ARM REST					
Swing-Up Arms	Removable Arms	Padded Arms	Padded Gutter Supports		
Custom/Other Please specify					
FOOT REST					
Standard Swing Away For Stump Supports Elevating Leg Rests Custom/Other Please specify	ootrests Left Right Right	One Piece Slidir	ng Footplates		
ACCESSORIES					
☐ Bedpan and carrier ☐ Anti Tip Bar Custom/Other Please specify	☐ Calf Straps☐ Pelvic Strap		Chest Strap 4 Point Harness		
ADDITIONAL INFOR	RMATION				
Please include an itemised quotation with the Service Request form where the specifications being requested are more complex, customised or other has been selected.					

POINTS TO CONSIDER

- Height of toilet seat does the shower commode fit over the toilet?
- Height of bed if relevant for transfers?
- If toilet is wall hung does this allow commode seat to align over the toilet seat?
- Is there a side draining pipe does this allow commode seat to align over the toilet seat?
- If the shower commode has a reclining back, does it clear the cistern?
- As a result of provision of this commode will housing modifications be required?