

# Raz-AT600 (Attendant Tilt – Heavy Duty) Mobile Shower Commode Chair (MSCC) Evaluation and Medical Justification

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ P: \_\_\_\_\_

MD/PA/NP: \_\_\_\_\_ email: \_\_\_\_\_ P: \_\_\_\_\_

Therapist: \_\_\_\_\_ email: \_\_\_\_\_ P: \_\_\_\_\_

Site of Eval: \_\_\_\_\_

Supplier Company: \_\_\_\_\_ Supplier Contact: \_\_\_\_\_ P: \_\_\_\_\_

Supplier Email: \_\_\_\_\_

Primary Dx: \_\_\_\_\_ Co-morbidities: \_\_\_\_\_

### Transfer Status

<b>Transfers:</b> Number of transfers required for showering / toileting: without MSCC _____ with MSCC _____							
independent	min assist	mod assist	max assist	dependent	1 person assist	2 person assist	
<b>Transfer Method:</b>							
stand pivot	sit / squat pivot	sliding board	lift / sling required				
transfer surfaces need to be same height			tilt required to facilitate transfers		posterior tilt	anterior tilt	
Comments: _____							

## Functional Use of MSCC

### Toileting

Bowel management program:    enema    suppository    digital stimulation    medication    other						
Comments: _____						
Level of independence: _____						
Time spent on MSCC for bladder/bowel care: _____					# days/week on MSCC: _____	
Seat access required for bowel / bladder program:    Front    Left    Right    Rear						
Comments: _____						

### Shower / Dressing / Other

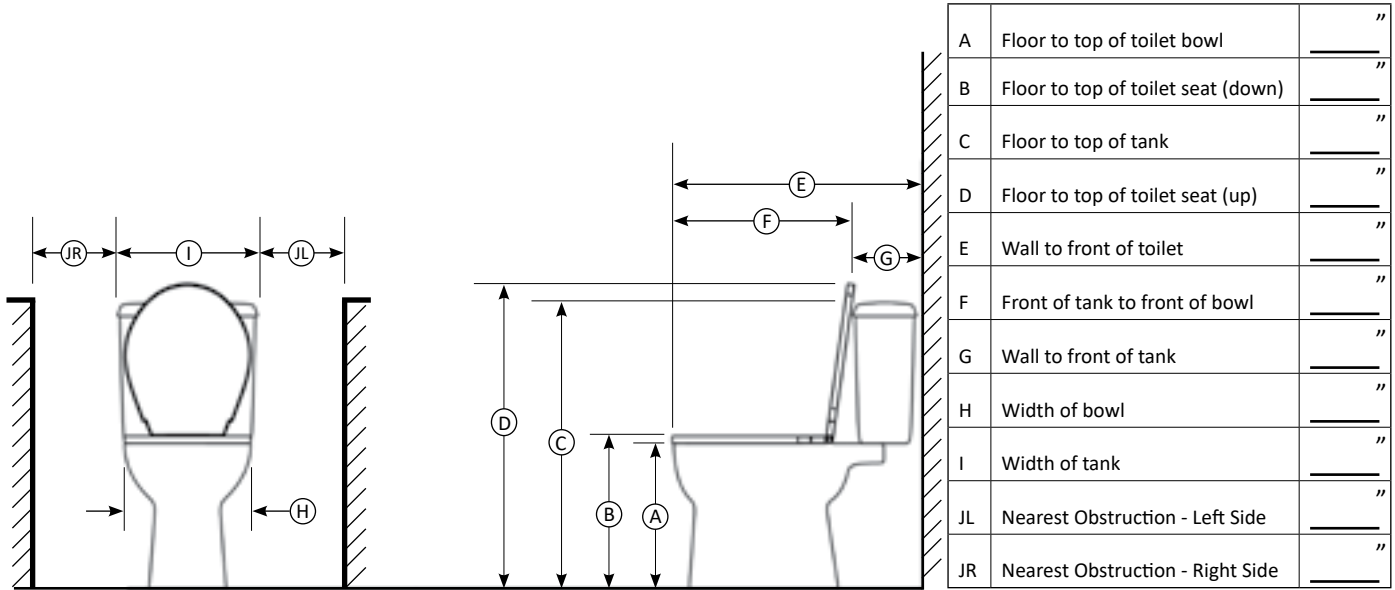
Body position during shower (tilt/recline/upright): _____						
Seat access opening required for bathing / shower hygiene program program:    Front    Left    Right    Rear						
Comments: _____						
Time spent on MSCC for showering: _____					# days/week on MSCC: _____	
Dressing and other activities performed using the MSCC: _____						
_____						

**Environmental Assessment for MSCC**

Unobstructed access from bedroom to bathroom? \_\_\_\_\_

Bathroom door width: \_\_\_\_\_ Is there a roll-in shower? No Yes

Enough room to maneuver MSCC in bathroom? No Yes Comments: \_\_\_\_\_



Comments: \_\_\_\_\_

**Sensation, Pain and Skin Integrity**

Sensation: intact impaired absent

Location(s) of impairment / absence: \_\_\_\_\_

Comments: \_\_\_\_\_

**Pressure Management:** Able to perform effective weight shift / pressure relief / reperfusion on MSCC? No Yes

Can perform pressure relief lift in chair  
 Weight shift eg. Lean side-to-side (without risk of falling)?  
 Requires attendant-operated Tilt Recline

Comments: \_\_\_\_\_

**Skin Integrity:** intact at risk – prolonged sitting impaired scar tissue

current Pressure Injury PI Stage: \_\_\_\_\_ location(s) / size(s): \_\_\_\_\_

other wounds: \_\_\_\_\_

**Sensation, Skin Integrity and Pain...cont'd**

<b>Hx of Pressure Injury:</b>	No	Yes	Comments: _____
<b>Hx of Skin/Flap Surgery:</b>	No	Yes	
Location(s)	_____		
Comments:	_____		

<b>Pain Intensity:</b>	(no pain)	0	1	2	3	4	5	6	7	8	9	10	(worst pain possible)
How is pain relieved? _____													
Comments: _____													

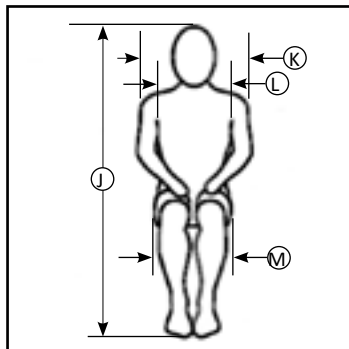
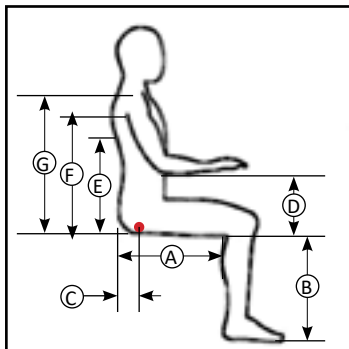
**Sitting Balance**

Able to sit independently in MSCC
Unable to sit independently (requires tilt, laterals, anterior support, back angle adjustment, tension-adjustable upholstery, etc.)
Requires support for dynamic movement in MSCC (“hooks” for support to reach perianal area or lower extremities for care)

**Posture: (MAT Evaluation)**

<b>Pelvic Mobility:</b>	Neutral	Posterior	Anterior	Flexible to Neutral
<b>Pelvic Rotation:</b>	Left Forward	Right Forward		Flexible to Neutral      Changes in support tolerated
<b>Pelvic Obliquity:</b>	Left Side Elevated	Right Side Elevated		
<b>Spinal Mobility:</b>	Kyphosis	Lordosis	Scoliosis	Leans to Left      Leans to Right      Flexible to Neutral
	Change in support tolerated			
<b>Tonal Influence Pelvis:</b>	Paralysis	Flaccid	Low Tone	High Tone      Spasticity      Dystonia      Other
<b>Tonal Influence Trunk:</b>	Paralysis	Flaccid	Low Tone	High Tone      Spasticity      Dystonia      Other
<b>Lower Extremity:</b>	Leg Position	Neutral	Abduction	Adduction      Windswept Left      Windswept Right
<b>Knee issues:</b>	Limited Range of Motion - Specify: _____			
<b>Ankle issues:</b>	Plantar Flexion	L	R	Dorsiflexion      L      R      Inversion      L      R      Eversion      L      R
Comments: _____				
<b>Upper Extremity</b>				
	Requires armrest for support	Requires supplementary arm support	Requires flip-up arms for transfers	
	Hand dominance for bowel therapy and perianal hygiene access	Left	Right	
	Able to propel MSCC	Able to use wheel locks	Requires wheel lock extensions	
<b>Head Positioning:</b>	Requires posterior head support		Unable to hold head up	
	Pulls to side/rotates	Left	Right	Requires laterally-offset head support
<b>Blood Pressure Management:</b>				
	wears binder	wears compression stockings	uses medication	requires Tilt      requires Recline

**Client Measurements**



Height:	_____
Weight:	_____

Left	Right		
_____ "	_____ "	A Buttock / Thigh depth	_____ " J Top of head
_____ "	_____ "	B Lower leg length	_____ " K Shoulder width
_____ "	_____ "	C Ischial depth	_____ " L Chest width
_____ "	_____ "	D Seat to elbow	_____ " M Hip width
_____ "	_____ "	E Seat to Inferior Scapula	_____ " Overall width (asymmetrical width for windswept legs or scoliotic posture)
_____ "	_____ "	F Axilla	
_____ "	_____ "	G Top of shoulder	

**Angular Measurements (accomodations required)**

Pelvis-to-thigh (seat-to-back) angle:	Left	>90°	<90°	Right	>90°	<90°
Thigh-to-calf (knee) angle:	Left	>90°	<90°	Right	>90°	<90°
Ankle:	Left	>90°	<90°	Right	>90°	<90°
Comments: _____						

The Raz Mobile Shower Commode Chair is being recommended to enhance the opportunity for participation in the following Motor-Related Activities of Daily Living (MRADL).

bowel/bladder voiding	perianal hygiene	bathing/showering	dressing/undressing	catheter application
other _____				

# Raz-AT600 Clinical Justification Checklist

## Product Model

## Clinical Justification

Raz-AT600 – Attendant Tilt – Heavy Duty (600-lb cap)	<p>Weighs over 350 lbs.          Required for client's safety as he / she is not a safe, functional ambulator          Required for client's safety as he / she is unable to transfer or sit on bath or shower bench          Required for client's safety as he / she is unable to transfer or sit on toilet          Provide mobile chair between bedroom and toilet / shower          Promote independent toileting and showering          Provide support during hygiene / shower / bowel / bladder / ADL routines / programs          Reduce number of transfers for hygiene / showering / bowel / bladder / ADL routines / programs</p>
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## Tilt

Posterior	<p>40° tilt range for pressure reduction          Minimize risk of aspiration          Decrease respiratory distress          Facilitate visual orientation          Decrease pain          Increase sitting tolerance          Facilitate safe transfers with mechanical lift          Manage tone / spasticity          Assist/maintain postural alignment          Maintain vital organ capacity          Manage autonomic dysreflexia          Manage orthostatic hypotension          Blood pressure management          Increase independence in transfers          Change position against gravitational force on head / trunk          Change position for pressure redistribution / cannot weight shift          Facilitate postural control</p>
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## Special Frame Configurations

Frame Width – 22"	Wider frame better accomodates client's size
Frame Width – 24"	Wider frame better accomodates client's size
Frame Width – 26"	Wider frame better accomodates client's size
Frame Width – 28"	Wider frame better accomodates client's size
Frame Width – 30"	Wider frame better accomodates client's size

## Seats

IPAS (Ischial Pelvic Alignment System)	IPAS, an exclusive feature on all Raz seats, utilizes adjustable seat mounting brackets that provide 2" fore / aft adjustment. This allows the aperture to be adjusted and optimally positioned around the ITs, to minimize pressure and increase pelvic stability.
Contoured Molded†	<p>Stabilize pelvis          Improve pressure distribution          Appropriately located aperture to help manage sacral sitting          Accommodate hygiene management (side cut-outs)</p>

†exclusive to Raz

**Seats (cont'd)****Clinical Justification**

Visco Foam Interface†	<p>Stabilize pelvis</p> <p>Seat design and materials offer improved immersion, envelopment, and off-loading for optimum pressure redistribution</p> <p>Appropriately located aperture to help manage sacral sitting</p> <p>Accommodate hygiene management (side cut-outs)</p> <p>History of pressure injury</p> <p>Pressure injury present</p>
Seat Support Kit	<p>Allows placement of narrower seat on a wider seat / base frame, avoiding cost of custom seat</p>
Custom Seat†	<p>History of Pressure Injury</p> <p>Accommodate hygiene management</p> <p>Appropriately located aperture to help manage sacral sitting</p> <p>Client requires special length to accommodate client's height</p> <p>Client requires special width to accommodate client's width</p> <p>Unique aperture / seat design to accommodate selfcare</p> <p>Accommodates leg length discrepancy</p> <p>Seat design and materials offer improved immersion, envelopment, and off-loading for optimum pressure redistribution</p> <p>Pressure relief area under existing pressure injury</p> <p>Pressure relief area under site of flap surgery</p> <p>Raised area accommodates pelvic obliquity</p> <p>Accommodate multiple deformities</p> <p>Allows for attendant to perform perianal hygiene from side of chair (insufficient space in roll-in shower for both attendant and MSCC)</p> <p>Side access facilitates self-care</p> <p>Side access facilitates caregiver access to perianal area for hygiene management</p> <p>Rear access facilitates caregiver access to perianal area for hygiene management</p>
<b>Access Opening</b> Front Access	<p>Accommodate hygiene management</p> <p>Allows for attendant to perform perianal hygiene</p>
Front Bridge	<p>Allows client to transfer laterally without leg falling into front opening</p>
Left Access Right Access	<p>Allows client to perform suppository insertion</p> <p>Allows client to perform digital stimulation and / or manual evacuation for bowel movement</p> <p>Allows for to perform selfcare</p> <p>Accommodate hygiene management</p> <p>Allows for attendant to perform perianal hygiene from side of chair (insufficient space in roll-in shower for both attendant and MSCC)</p>
Rear Access	<p>Eliminate pressure at rear of seat to accommodate coccygeal / sacral pressure injury</p> <p>Eliminate pressure at rear of seat to accommodate surgical site at coccygeal / sacral area</p> <p>Allows for attendant to perform perianal hygiene from rear of chair</p>

**Back Frames**

Fixed Back Frame (with angle adjustability)	<p>Back angle adjustability accommodates decreased ROM (when hip angle is greater than 90° and non-reducible)</p> <p>Increase sitting tolerance (with back support set at 97° and tension-adjustable upholstery optimally adjusted)</p> <p>Facilitate postural control (with back support set at 97° and tension-adjustable upholstery optimally adjusted)</p> <p>Facilitate safe transfers (with flip-up arm supports)</p> <p>Increases trunk stability (at 97° vs 90°)</p>
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† exclusive to Raz

**Back Frames (cont'd)****Clinical Justification**

Adjusta-Back Frame†	<p>Tension-adjustable upholstery accomodates client's back shape and provides moderate lateral postural support</p> <p>Back angle adjustability accomodates decreased ROM (when hip angle is greater than 90° and non-reducible)</p> <p>Increase sitting tolerance (with back support set at 97° and tension-adjustable upholstery optimally adjusted)</p> <p>Facilitate postural control (with back support set at 97° and tension-adjustable upholstery optimally adjusted)</p> <p>Facilitate safe transfers (with flip-up arm supports with user-operated arm support lock release)</p> <p>Increases trunk stability (at 97° vs 90°)</p> <p>Height-adjustable arms can be set at an optimal height for the arm supports to carry some of client's weight, thereby reducing sitting pressures</p> <p>Reduce shoulder subluxation</p> <p>Provide support with elbow at 90°</p> <p>Having arm supports at optimal height decreases gravitational pull on shoulder joints</p> <p>Having arm supports at optimal height improves postural control / trunk support</p> <p>Change height / angle of arm supports to facilitate ADLs</p>
Reclining Adjusta-Back Frame†	<p>Back angle adjustability accomodates decreased ROM (when hip angle cannot go to 90°)</p> <p>Increase sitting tolerance</p> <p>Facilitate postural control</p> <p>Facilitate safe transfers (with flip-up 2-Point Arm Supports)</p> <p>Increases trunk stability</p> <p>Facilitates catheter insertion</p> <p>Facilitates bathing</p> <p>Blood pressure management</p> <p>Head / neck support</p> <p>Manage tone / spasticity</p> <p>Decrease respiratory distress</p> <p>Decrease pain</p> <p>Height-adjustable arms can be set at an optimal height for the arm supports to carry some of client's weight, thereby reducing sitting pressures</p> <p>Improve circulation</p> <p>Manage bowel / bladder / catheter care, intermittent catheterization, undergarment, change</p> <p>Pressure redistribution – cannot weight shift</p> <p>Maintain muscle length / joint ROM</p>
Back Frame Narrower than Base / Seat Frame	<p>Positions arm supports medially, accomodates client's torso size and provides additional stability for upper body</p> <p>Narrower back frame and improved arm support position assists with repositioning and transfers</p> <p>Arm supports closer to client's trunk allows for a more upright, midline posture</p>
Back Frame Wider than Base / Seat Frame	<p>Back frame that is wider than seat frame supports client's trunk width and size</p> <p>Eliminates the need for the more expensive option of an MSCC with a wider base frame</p>

**Arm Supports**

Arm Support Locks	Lock arms to allow stabilization for ADLs or transfers
Flat Arm Pad†	Requires additional support surface for arms
Molded Arm Trough	<p>Requires additional support surface and positioning for arms</p> <p>Help prevent UE from falling off arm support</p>

† exclusive to Raz

**Arm Supports (cont'd)****Clinical Justification**

Pivoting Arm Mount†	Provides clearance for Lateral Thoracic Supports to be swung away for transfers when Molded Arm Troughs are used Provides clearance for arm supports with Molded Arm Troughs to be flipped up for transfers and bathing
Arm Support Spacer Kit†	Accommodate the client's size or specialized arm position Provides improved access for bathing Provides clearance for Lateral Thoracic Supports
2-Point Arm Supports	Keeps Arm Supports parallel for improved positioning of client's arms throughout recline range
Anterior Postural Support Bar	Control tone / spasticity
Pivoting Hand Grips	Allows client to reposition him / herself Increases stabilization of upper body Increases stabilization of UE

**Foot and Leg Supports**

MFX Footrests (shorter range)	Accommodate client's leg length
Footrest Extension Tubes (longer range)	Accommodate client's leg length
Angle / Depth Adjustable Footplates	Accommodate ankle ROM Accommodate knee ROM
V-Style Foot Support†	Improved maneuverability with smaller footprint Facilitates safe lateral transfers
Flip-Back Foot Support†	Improved maneuverability with smaller footprint
Elevating Leg Supports	Blood pressure management Elevate with recline for showering, catheter access, dressing, or other ADLs Accommodates client's limited knee ROM Helps manage edema when combined with recline
Custom Leg / Foot Support	Accommodate client's leg length Accommodate knee ROM Accommodates windswept deformity Allow feet to go under MSCC base Provide foot support with proper pressure distribution

**Foot and Leg Support Accessories**

H-Strap	Prevent legs from falling rearward into frame / casters of MSCC
Calf Strap – Bodypoint Aeromesh	Prevent legs from falling rearward into frame / casters of MSCC Manage flexion contractures
Calf Panel – Bodypoint Aeromesh	Prevent legs from falling rearward into frame / casters of MSCC Manage flexion contractures
Calf Strap – Infection Control	Prevent legs from falling rearward into frame / casters of MSCC Manage flexion contractures Required for ease of cleaning
Heel Loops	Prevent legs from falling rearward into frame / casters of MSCC Manage flexion contractures

†exclusive to Raz



## Foot and Leg Support Accessories (cont'd)      Clinical Justification

Neoprene Footplate Covers†	Cover footplates to protect feet from hard edges / pressure injuries Covers foot plates to provide additional friction to keep from falling off
Lateral / Medial Offset Foot Support Receivers†	Accommodates abduction Accommodates windswept lower extremities Accommodate foot position on wide chairs
Forward Offset Foot / Leg Support Receivers (mounts)	Accommodates abduction Accommodates windswept lower extremities Accommodate foot position on wide chairs
Residual Limb Support	Provides support and positioning for residual limb Pain management for residual limb Provides protection for residual limb
Foot Support Lock	Lock footrest to prevent movement

## Positioning Pads

Lateral Thoracic Support† (swingaway) Left Right	Decrease lateral trunk leaning Accommodate asymmetry Control of tone / spasticity Safety
Lateral Pelvic Support† (Hip Guides) Left Right	Stabilize pelvis Decrease pelvic rotation Align pelvis over aperture
Medial Thigh Support† (pommel / adductor)	Decrease adduction Accommodate ROM limitations Accommodate windswept deformity
Lateral Thigh Support† (adductor) Left Right	Decrease abduction Accommodate windswept deformity Position thighs in alignment
Lateral Extension Plate	Allows for lateral thoracic support to be positioned more medially Allows for lateral hip supports to be positioned more medially Allows for lateral thigh supports to be positioned more medially

## Head Support

Large Pad	Support during recline Provide posterior head support Provide posterior neck support Accommodate tone / spasticity Improve visual orientation Improve respiration
Small Pad	Support during recline Provide posterior head support Provide posterior neck support Accommodate tone / spasticity Improve visual orientation Improve respiration
Offset Interface Plate† (offsets headrest laterally)	Accommodate ROM limitations Accommodate asymmetrical head position

†exclusive to Raz

**Pelvic Belt****Clinical Justification**

Standard Pelvic Belt	Stabilize pelvis in neutral rotation Prevents sliding out of MSCC Required for safety when using chest belt
Bodypoint Pelvic Belt	Stabilize pelvis in neutral rotation Prevents sliding out of MSCC Required for safety when using chest belt
Infection Control Pelvic Belt	Stabilize pelvis in neutral rotation Prevents sliding out of MSCC Required for safety when using chest belt Required for ease of cleaning

**Chest Belt**

Standard Chest Belt	Provide anterior support to prevent upper body from falling forward
Bodypoint Chest Belt	Provide anterior support to prevent upper body from falling forward
Infection Control Chest Belt	Provide anterior support to prevent upper body from falling forward Required for ease of cleaning

**Caster Options**

Directional Caster Lock†	Assists with steering MSCC
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**Anti-Tipper Options**

Rear Anti-Tippers	Prevents MSCC from tipping backward Stabilizes MSCC
Front Anti-Tippers	Prevents MSCC from tipping forward during forward reach or placing weight on foot support Increased side and forward stability Increased stability for lateral transfers Stabilizes MSCC

**Other**

Whizard© Urine Deflector†	Assists with directing urine stream into toilet Assists with directing urine stream into commode pan
Commode Pan Spacer†	Lowers commode pan for digital stim and hygiene with pan in place

†exclusive to Raz

Therapist Name: \_\_\_\_\_ Therapist Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I concur with the above findings and recommendations of the therapist.

MD/PA/NP: \_\_\_\_\_ MD/PA/NP Signature: \_\_\_\_\_ Date: \_\_\_\_\_