

Raz-CAT (Compact Attendant Tilt) 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

Transfers: 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	
Transfer Method:							
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

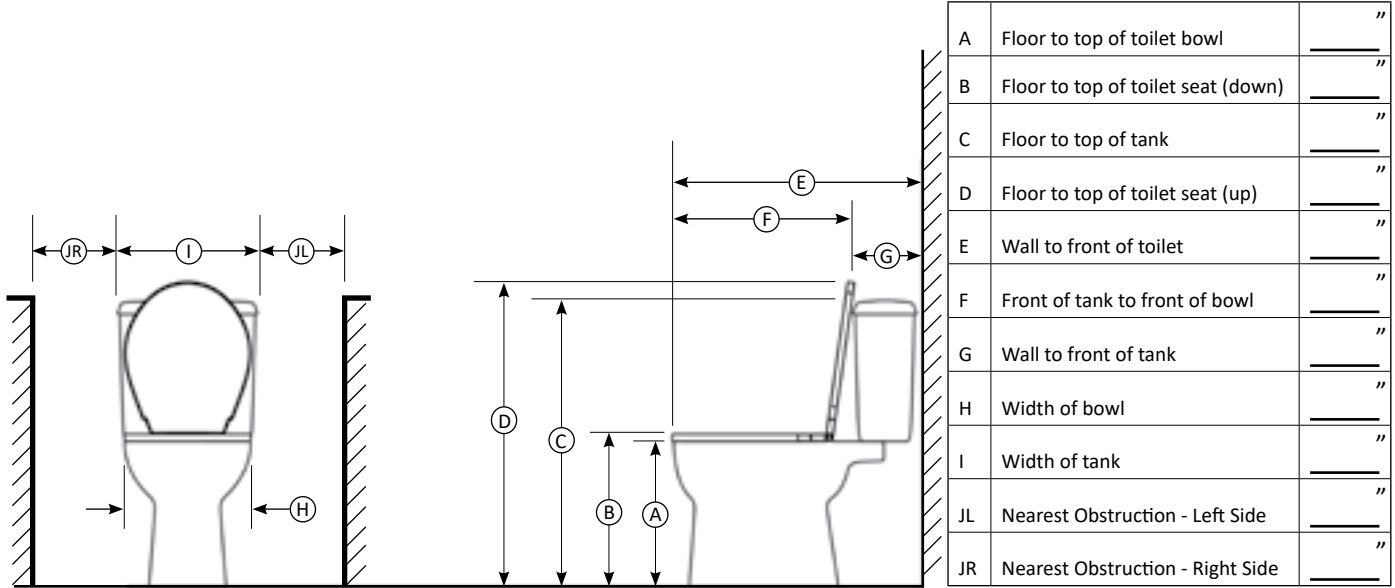
Body position during shower (tilt/recline/upright): _____						
Seat access opening required for bathing / shower hygiene program program: Front Left Right Rear						
Comments: _____						
Time spent on MSCC for showering: _____					# days/week on MSCC: _____	
Dressing and other activities performed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

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

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

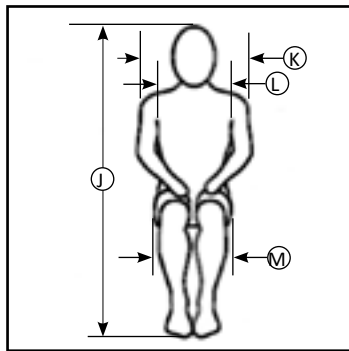
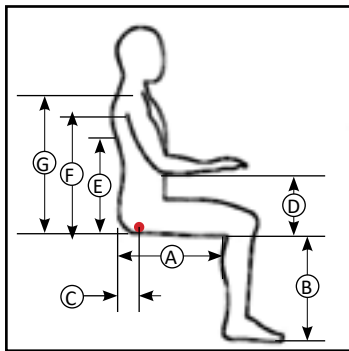
Sitting Balance

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)

Pelvic Mobility:	Neutral	Posterior	Anterior	Flexible to Neutral								
Pelvic Rotation:	Left Forward	Right Forward		Flexible to Neutral		Changes in support tolerated						
Pelvic Obliquity:	Left Side Elevated		Right Side Elevated									
Spinal Mobility:	Kyphosis	Lordosis	Scoliosis	Leans to Left	Leans to Right	Flexible to Neutral						
	Change in support tolerated											
Tonal Influence Pelvis:	Paralysis	Flaccid	Low Tone	High Tone	Spasticity	Dystonia	Other					
Tonal Influence Trunk:	Paralysis	Flaccid	Low Tone	High Tone	Spasticity	Dystonia	Other					
Lower Extremity:	Leg Position	Neutral	Abduction	Adduction	Windswept Left	Windswept Right						
Knee issues:	Limited Range of Motion - Specify: _____											
Ankle issues:	Plantar Flexion	L	R	Dorsiflexion	L	R	Inversion	L	R	Eversion	L	R
Comments: _____												
Upper Extremity												
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								
Head Positioning:	Requires posterior head support			Unable to hold head up								
Pulls to side/rotates		Left	Right	Requires laterally-offset head support								
Blood Pressure Management:												
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-CAT Clinical Justification Checklist

Product Model

Clinical Justification

Raz-CAT – Compact Attendant Tilt (300-lb cap)	<p>Requires shorter seat depth</p> <p>Capable of accommodating client growth</p> <p>Accommodates client's small size and capable of being used over toilet</p> <p>Required for client's safety as he / she is not a safe, functional ambulator</p> <p>Required for client's safety as he / she is unable to transfer or sit on bath or shower bench</p> <p>Required for client's safety as he / she is unable to transfer or sit on toilet</p> <p>Provide mobile chair between bedroom and toilet / shower</p> <p>Promote independent toileting and showering</p> <p>Provide support during hygiene / shower / bowel / bladder / ADL routines / programs</p> <p>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</p> <p>Minimize risk of aspiration</p> <p>Decrease respiratory distress</p> <p>Facilitate visual orientation</p> <p>Decrease pain</p> <p>Increase sitting tolerance</p> <p>Facilitate safe transfers with mechanical lift</p> <p>Manage tone / spasticity</p> <p>Assist / maintain postural alignment</p> <p>Maintain vital organ capacity</p> <p>Manage autonomic dysreflexia</p> <p>Manage orthostatic hypotension</p> <p>Blood pressure management</p> <p>Increase independence in transfers</p> <p>Change position against gravitational force on head / trunk</p> <p>Change position for pressure redistribution / cannot weight shift</p> <p>Facilitate postural control</p>
Anterior	Facilitates standing pivot transfers

Special Frame Configurations

Frame Width – 16"	Narrower frame better accommodates client's size
Frame Width – 20"	Wider frame better accommodates client's size
Low Frame	<p>Facilitates transfers</p> <p>Allows for foot propulsion between toilet / shower and bedroom</p>

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.
CAT Seat†	Accommodates growth

† exclusive to Raz

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

Contoured Molded†	<p>Stabilize pelvis Improve pressure distribution Appropriately located aperture to help manage sacral sitting Accommodate hygiene management (side cut-outs) Longer depth accomodates taller client (19"D seat)</p>
Visco Foam Interface†	<p>Stabilize pelvis Seat design and materials offer improved immersion, envelopment, and off-loading for optimum pressure redistribution Appropriately located aperture to help manage sacral sitting Accommodate hygiene management (side cut-outs) History of pressure injury Pressure injury present Longer depth accomodates taller client (19"D seat) Side / Rear Access Opening allows client to perform perianal hygiene / self-care Side / Rear Access Opening allows attendant to perform perianal hygiene / self-care</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 Accommodate hygiene management Appropriately located aperture to help manage sacral sitting Client requires special length to accommodate client's height Client requires special width to accommodate client's width Unique aperture / seat design to accommodate selfcare Accomodates leg length discrepancy Seat design and materials offer improved immersion, envelopment, and off- loading for optimum pressure redistribution Pressure relief area under existing pressure injury Pressure relief area under site of flap surgery Raised area accommodates pelvic obliquity Accommodate multiple deformities Allows for attendant to perform perianal hygiene from side of chair (insufficient space in roll-in shower for both attendant and MSCC) Side access facilitates self-care Side access facilitates caregiver access to perianal area for hygiene management</p>
Access Opening Front Access	<p>Accommodate hygiene management 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 Allows client to perform digital stimulation and / or manual evacuation for bowel movement Allows for client to perform selfcare Accommodate hygiene management 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 Eliminate pressure at rear of seat to accommodate surgical site at coccygeal / sacral area Allows for attendant to perform perianal hygiene from rear of chair</p>

† exclusive to Raz

Back Frames

CAT Back Frame†	<p>Back frame narrower than seat frame required to accommodate over-toilet use and thin client stature</p> <p>Tension-adjustable upholstery accommodates client's back shape and provides moderate lateral postural support</p> <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 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 accommodates 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>

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>
Pivoting Arm Mount†	<p>Provides clearance for Lateral Thoracic Supports to be swung away for transfers when Molded Arm Troughs are used</p> <p>Provides clearance for arm supports with Molded Arm Troughs to be flipped up for transfers and bathing</p>

† exclusive to Raz

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

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
Neoprene Footplate Covers†	Cover footplates to protect feet from hard edges / pressure injuries Covers footplates to provide additional friction to keep from falling off

† exclusive to Raz

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

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 deeper seat Accommodates leg length discrepancy
Residual Limb Support	Provides support and positioning for residual limb Pain management for residual limb Provides protection for residual limb
Foot Support Lock	Locks foot support 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
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

4" Caster Upgrade	Lowers seat height to facilitate transfers
6" Caster Upgrade	Increases seat height to facilitate transfers Increases seat height to clear ADA toilet
Directional Caster Lock†	Assists with steering MSCC

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: _____