

# **Raz-AT600 (Attendant Tilt – 600-lb cap.)**

## **Justification Guide for Letters of Medical Necessity**

The Raz Mobile Shower Commode Chair (MSCC), is being recommended to enhance the opportunity for \_\_\_\_\_ to safely participate in Motor Related Activities of Daily Living, MRADL, which include: bowel and bladder voiding, perianal hygiene, and showering. Dressing and undressing is also performed on the MSCC. Catheter application is performed when using the MSCC. The MSCC provides mobility between the bedroom and bathroom (toilet and shower).

The Raz MSCC decreases the number of transfers required for toileting and / or bathing / showering, thus decreasing fall / injury risk, stress and strain on joints during transfers, and improved efficiency for hygiene management needs. The Raz MSCC is built to resist corrosion and provide a stable base of support throughout the performance of the MRADL. The Raz MSCC can be configured and adjusted to meet \_\_\_\_\_'s unique functional and positional needs, optimizing safety and independence. Specific justifications for the Raz MSCC frame and components are listed below.

### **MSCC / Model**

The **Raz-AT600 Attendant Tilt Heavy Duty** Mobile Shower Commode Chair has a 600-lb weight capacity and comes with 4 casters, which allow an attendant to push the client between the bedroom and the bathroom.

- It allows for a reduced number of transfers, and these transfers can be made outside of the bathroom.
- The Ischial Pelvic Alignment System (IPAS), standard on the Raz-AT600, enables the seat to be adjusted fore / aft within a 2" range so that the clients' Ischial Tuberosities (ITs) can be positioned optimally within the aperture (commode opening). Optimal IPAS adjustment stabilizes the pelvis for seated safety and offloads the ITs and sacrum which are areas of highest risk for skin breakdown.
- A 25° tilt range enables the caregiver to position the client safely by transferring pressure on high-risk areas of the body (such as the buttocks) to low-risk areas (such as the back) to reduce the risk of pressure injury. As well, by putting the client in a posteriorly-tilted position, they can be showered more safely and comfortably since gravity holds them in position.
- The Weight Assist Spring System (WASS) was designed to help lift the client out of tilt with minimal effort. Batteries not included ... or needed.
- Pre-tilting the AT600 allows the client to be transferred deeper into the seat with mechanical lifts. This makes for safer transfers.
- The frame and seat are designed to provide unrestricted access from the front, side and rear of the MSCC. Under-seat access is required for suppository insertion, digital stimulation, perianal hygiene, bowel / bladder care, and menstruation management as required.
- Dual-locking casters lock both the roll and swivel functions to keep the MSCC stationary and stable during transfers decreasing fall risk.
- The back cane handles are designed so that the user can "hook" their arm around a back cane handle during MRADLs. The action of hooking increases postural stability and safety during toileting or showering.

## Standard Raz Features / No-Charge Options

### Back Support Frame with Gluteal Shelf Accommodation

- Lower, rearward bend in back frame, along with tension-adjustable upholstery, accommodates client's excess gluteal tissue.

### Ischial Pelvic Alignment System (IPAS),

- Exclusive to Raz, IPAS allows the seat to be adjusted fore / aft within a 2" range so that the aperture (commode opening is positioned optimally for the client's Ischial Tuberosities (ITs).
  - Optimal IPAS adjustment offloads the highest risk area, the ITs, by "floating" or suspending them within the aperture.
  - Adjustment of the IPAS provides off-loading to the sacrum, reducing risk of pressure injury to this site.
  - Adjustment of the IPAS ensures better stabilization of the pelvis as it accommodates the client's stable sitting posture and still locates the ITs within the aperture.
  - IPAS allows the contours of the seat to be adjusted so that the seat conforms with the client's preferred sitting position for stability and safety.

### Adjustable-Angle Back Support:

- Client requires the back angle to be set at 97° in order to accommodate kyphosis.
- Client requires the back angle to be set at 97° in order to provide additional stability while seated in the chair.
- Client requires the back angle to be set at 97° in order to accommodate his / her limited ROM at the hips.

### Cane-Style Push Handles:

- The client requires cane-style push handles in order to "hook" and maintain stability while performing ADLs.

### Cantilevered Flip-up Arm Supports

- This client requires cantilevered arm supports to prevent contact of his / her / their thighs with the front, vertical support tube inherent with 2-point arm supports.
- This client requires a seat that is wider than the seat frame to accommodate his / her / their hip width. The cantilevered arm support design allows the seat to be wider than the base frame. This eliminates the need for a wider frame, which will hamper accessibility of the chair in the home environment.
- The client requires cantilevered arm supports to facilitate self-care / transfers. The cantilever design allows the client to raise / lower the arm supports independently, decreasing risk of falls / injuries during transfers. This provides optimized transfer positioning in and out of the chair.

## Special Frames:

### 24"W Frame

- The client requires a 24" wide frame in order to accommodate his / her body size

### 26"W Frame

- The client requires a 26" wide frame in order to accommodate his / her body size

### 28"W Frame

- The client requires a 28" wide frame in order to accommodate his / her body size

### 30"W Frame

The client requires a 30" wide frame in order to accommodate his / her body size

## Tilt

### Rearward (Posterior) Tilt:

- Pre-tilting the MSCC allows the client to be transferred deeper into the seat when using a mechanical lift. This makes for safer transfers and easier repositioning of the client after the transfer.
- Tilting rearward redistributes pressures from the high-risk buttocks area and onto the client's back, a lower risk area. This is critical in helping to prevent pressure injuries when independent weight shifts cannot be performed.
- Spinal extension and postural control can be enhanced with tilt. The position of the head, neck and shoulders in a tilted position will open the chest cavity, minimizing the risk of aspiration and decreasing respiratory distress. This position also promotes relaxed and supported neck and trunk posture.
- The rearward tilted position decreases risk for forward falls due to paralysis, spasticity, and hypo / hypertonicity.
- The rearward tilt can decrease pain and increase sitting tolerance for the duration of the bowel program or shower.
- The change in position will be used for blood pressure management and decreasing the incidence of autonomic dysreflexia and orthostatic hypotension. This is particularly important during showering due to the lack of other external blood pressure supports such as an abdominal binder, and the temperature fluctuations experienced during a shower routine.
- Rearward tilt assists in managing tone / spasticity.
- Rearward tilt places the body in a position of decreased stress on vital organs.

### Tilt Limit Spacers

- The client needs this no charge option in order to limit the tilt to \_\_\_° degrees because he / she suffers anxiety when tilted beyond \_\_\_\_°.

## Back Frames

### Fixed Back Frame:

- Allows the seat-to-back angle to be adjusted to either 90° or 97°. This open seat-to-back angle slightly changes the gravitational pull on the head and upper spine, thereby increasing trunk stability and sitting tolerance while reducing stress on the lower back. It accommodates tight hamstrings, which pull on the pelvis during upright sitting.
- Standard, flip-up padded arm supports facilitate transfers.

### **Locking Arm Kit on Fixed Back** (Standard on Adjusta-Back – see below):

- This client requires the arm supports to be locked in the down position to ensure safe lateral transfers.
- This client requires the arm supports to be locked in the down position to ensure safe repositioning.
- This client requires the arm supports to be locked in the down position to ensure safety while performing self-care activities.

## **Back Supports**

### **Symphony Back Support:**

- The client requires the Symphony Back Support because it provides a firmer back support than tension-adjustable upholstery.
- The client reports reduced back pain when supported with a firmer backrest support.
- The curved, recessed back support provides lateral trunk stability without a loss of seat depth.
- The Symphony Back is easy to clean, contains no woven fabrics or straps, no sewing and is therefore ideal for infection control.

## **Seats**

### **Molded Seat:**

- Molded Seat Justification: The client requires a molded, contoured seat to stabilize the pelvis and redistribute sitting pressures.
  - The client requires a front access opening for hygiene and independence in bladder management.
  - The client requires a front access opening for prevention of pressure injury to the genitals and pubic region.
  - The client requires a front access opening for hygiene care by an attendant.
  - The client requires a bridged front seat to prevent his / her / their legs or hands from falling in an opening during transfers.
  - The client sits with windswept legs and requires a bridged front seat to prevent legs from falling in an opening.

### **Visco Foam Interface Seat:**

- The Visco Foam Interface Seat is constructed by adding 1” of visco-elastic foam over top of a contoured molded foam seat base. The contouring helps hold the client in a functional and stable sitting position while the visco-elastic foam provides additional pressure redistribution for skin protection and postural comfort.
- This client requires a \_\_\_\_\_ (insert right side / left side / rear) access opening in order to perform intimate self care.
- This client requires a \_\_\_\_\_ (insert right side / left side / rear) access opening in order to perform suppository insertion, digital stimulation and / or manual evacuation of the bowel.
- This client requires a \_\_\_\_\_ (insert right side / left side / rear) access opening in order to perform perianal hygiene, bowel / bladder care, and / or menstruation management as necessary.

### **Longer Seat Depth:**

- The client's upper leg measurement is \_\_\_" and he / she requires a longer seat depth to support the distal thighs and minimize sitting pressures.
- The client's upper leg measurement is \_\_\_" and he / she requires a longer seat depth to support their legs and control the position of their knees.
- Due to kyphotic posture, non-correctable posterior pelvic tilt, and upper leg length of \_\_\_\_\_", the client requires a longer seat to support the full length of their upper leg for stability and pressure distribution.
- Due to this client's posterior pelvic tilt, necessary for trunk stability, the client requires a longer seat to support the full length of their upper leg for stability and pressure distribution.

### **Custom Seat:**

- Custom Length
  - The client's upper leg measurement is \_\_\_" and he / she requires a longer-than-standard seat to support the distal thighs and minimize sitting pressures
  - The client's windswept posture / leg length discrepancy requires a custom seat to accommodate this sitting posture while providing equalized pressure distribution across sitting surfaces.
  - Due to kyphotic posture, non-correctable posterior pelvic tilt, and upper leg length of \_\_\_\_\_", the client requires a longer seat to support the full length of their upper leg for stability and pressure distribution.
- Custom Width (Wider or Narrower)
  - Wider-than-standard seat width accommodates a larger client by providing a larger support surface to minimize pressures.
  - Narrower-than-standard seat width accommodates a smaller client's pelvis, even where a larger back frame is needed.
  - The custom seat is required to fit the non-standard chair width that is needed to accommodate the client's size.
- Aperture Size – smaller than standard
  - This client's pelvis is smaller than the standard aperture and the client requires a narrower aperture to stabilize the pelvis and prevent the pelvis from sinking into the aperture.
  - A narrower aperture will ensure there is still seat cushion available to provide greater support under the greater trochanters for this smaller / thinner client.
  - A custom-sized aperture is required on the seat cushion to enable skin protection, seated stability, fall risk reduction, and offloading of bony prominences, which cannot be accommodated on the standard cushions.
- Aperture Size – larger than standard
  - This client has ITs that are further apart than average and requires a wider aperture to protect the high-risk areas from contacting the edges of the standard aperture.
  - A wider aperture will help separate the buttocks to facilitate a bowel movement.
  - A custom-sized aperture is required on the seat cushion to enable skin protection, seated stability, fall risk reduction, and offloading of bony prominences, which cannot be accommodated on the standard cushions.

- Aperture Shape / Location
  - An offset aperture (not centered midline) is required to accommodate the asymmetrical posture of this client.
  - This client's pelvis is smaller than the standard aperture and the client requires a unique aperture shape to stabilize the pelvis and prevent one hip from falling in.
  - This client is a sacral sitter and requires the aperture further forward than standard.
  - A custom aperture location is required to accommodate this client's pelvic rotation.
  - A custom aperture is required to provide a complete offload in the area of a pressure injury for this client.
  - A custom-sized aperture is required on the seat cushion to enable skin protection, seated stability, fall risk reduction, and offloading of bony prominences, which cannot be accommodated on the standard cushions.
  - The custom-shaped aperture is required to off-load specific and unique postural features of the user, decreasing risk for falls, pressure injuries and pain.
  
- Access Opening Location
  - Client had flap surgery and the access opening is required to be located such that the area impacted by surgery needs to be offload.
  - The custom access opening location accommodates the client's limited ROM.
  - The custom-shaped side-opening and aperture is required to off-load specific and unique postural features of the client, decreasing risk for falls, pressure injuries and pain while still enabling safe independent / dependent / partially independent performance of bathroom and bathing activities of daily living.
  
- Custom – Other
  - This client requires a softer cushioning in the seat to align with the area of a pressure injury.
  - This client requires a complete offload in the area of pressure injury.

### **Seat Support Kit**

- The client requires a Seat Support Kit in order to support an 18"W seat on a 20"W base / seat frame. The wider seat frame is required to accommodate the client's body width and / or the toilet design.
- The client requires a Seat Support Kit in order to support a 23"W seat on a 24"W seat / base frame. The wider seat frame is required to accommodate the client's body width and / or the toilet design.
- The client requires a Seat Support Kit in order to support a 26"W seat on a 28"W seat / base frame. The wider seat frame is required to accommodate the client's body width and / or the toilet design.
- This allows for the use of a standard seat rather than a custom designed seat.

## **Arm Supports**

### **Flat Arm Support Pad:**

- The wider support surface is needed to keep the client's arm from falling off the arm supports.

- The client needs more medial arm support for stability. The Flat Arm Support Pads can be angled inward to achieve this.
- The wider flat arm support pad is required to enable push up pressure releases or independent repositioning with decreased joint strain and / or access via elbow and forearm strength due to limited or absent hand strength for grasp of a standard armrest pad.

#### **Molded Arm Trough:**

- The walls of the trough support keep the client's arms from falling off the arm supports laterally, medially and rearward during tilt. This client is otherwise medically unable to retain his / her / their arms on the armrests while in a tilted position.
- The client needs more medial arm support for stability. The Molded Arm Supports can be angled inward to achieve this.

#### **Arm Support Locks:**

- The Arm Support Locks secure the arm supports in a horizontal position, which is required for safe transfers.
- The Arm Support Locks secure the arm supports in a horizontal position, which is required for safe repositioning.

#### **Pivoting Arm Mount:**

- The client requires Molded Arm Troughs and lateral thoracic supports. The Pivoting Arm Mount rotates the troughs outward to clear space for lateral thoracic support pads to be swung away from the client to provide improved access for transfers.
- Allows the Flat Arm Support Pad or Molded Arm Trough to be rotated outward to clear space within the seat area to provide improved access for the use of a mechanical lift to transfer the client.

#### **Arm Support Spacer Kit:**

- Positions the arm supports laterally away from the back frame to accommodate the client's size or specialized arm position.
- Allows for the lateral thoracic supports to remain in place while the arm supports are flipped up. This maintains trunk stability with improved access for bathing.

#### **2-Point Arm Supports:**

- The 2-Point Arm Supports provide increased stability to the arm supports when they are used for stability during transfers or MRADL.
- The down tubes of the 2-Point Arm Supports are required by the client to safely reposition.
- The down tubes of the 2-Point Arm Supports are required to prevent this client's legs from splaying outward.

#### **Anterior Postural Support Bar:**

- The Anterior Postural Support Bar is required for support while the client leans forward for weight shifts
- The Anterior Postural Support Bar is required for the client to have a bowel movement by bearing down on the bar. This allows the client to assume an anterior squat position, which improves the alignment of the intestines for a facilitated bowel movement.

**Pivoting Hand Grips:**

- The Pivoting Hand Grips are required for support while the client leans forward for weight shifts.
- The Pivoting Hand Grips are required for the client to have a bowel movement by bearing down with use of the grips. This allows the client to assume an anterior squat position, which improves the alignment of the intestines for a facilitated bowel movement.

## Foot and Leg Supports

**Footrest Extension Tubes:**

- The client requires Footrest Extension Tubes to accommodate a longer than standard lower leg length.

**Angle / Depth Adjustable Footplates:**

- The Angle / Depth Adjustable Footplates are required to accommodate the client's foot position given the limited ROM of the knee. This decreases the risk of pressure injury and pain in the feet.
- The Angle / Depth Adjustable Footplates are required to accommodate the client's plantar flexion, and increase the supported surface area under the foot. This decreases the risk of pressure injury and pain in the feet.
- The Angle / Depth Adjustable Footplates are required to accommodate the client's dorsiflexion and increase the supported surface area under the foot. This decreases the risk of pressure injury and pain in the feet.

**V-Style Foot Support:**

- The V-Style Foot Support is required for this client to accommodate the client's plantar flexion.
- The V-Style Foot Support is required for this client to accommodate the client's dorsiflexion.
- The V-Style Foot Support provides a more compact midline foot support. It is required for the client to maneuver through his / her / their narrow doorway and / or within his / her / their small bathroom.

**Flip-Back Footplate:**

- The Flip-Back Foot Support provides a more compact midline foot support. It is required for the client to maneuver through his / her / their narrow doorway and / or within his / her / their small bathroom.

**Elevating Leg Supports:**

- Elevating Leg Supports allow the client's legs to be elevated into extension. The client requires these because his / her / their knees cannot flex sufficiently to use standard, non-elevating foot supports.

**Snap-On Calf Strap:**

- The Snap-on Calf Strap is required to prevent the client's feet from falling rearward and off the footplates while the chair is in tilt. Feet falling rearward can become trapped against the frame, trapped behind the foot supports, or make contact with the casters, which can lead to injuries of the lower extremities.



- The Snap-on Calf Strap is required because the client has flexion contractures and cannot keep his / her / their feet on the foot supports without a calf strap, which can lead to injury of the lower extremities.

#### **H-Strap:**

- The H-Strap is required to prevent the client's feet from falling rearward and off the footplates while the chair is in tilt. Feet falling rearward can become trapped against the frame, trapped behind the foot supports, or make contact with the casters, which can lead to injuries of the lower extremities.
- The H-Strap is required because the client has flexion contractures and cannot keep his / her / their feet on the foot supports without a calf strap, which can lead to injury of the lower extremities.

#### **Calf Panel:**

- The Calf Panel is required to prevent the client's feet from falling rearward and off the footplates while the chair is in tilt. Feet falling rearward can become trapped against the frame, trapped behind the foot supports, or make contact with the casters, which can lead to injuries of the lower extremities.
- The Calf Panel is required because the client has flexion contractures and cannot keep his / her / their feet on the foot supports without a calf strap, which can lead to injury of the lower extremities.
- The Calf Panel is required because it provides a higher barrier, which prevent the client's feet from falling rearward off the footplates when they involuntarily lift their knees / feet, which can lead to injury of the lower extremities.

#### **Heel Loops:**

- Heel Loops are required to prevent the client's feet from falling rearward and off the footplates. Feet falling rearward can become trapped against the frame, trapped behind the foot supports, or make contact with the casters, which can lead to injuries of the lower extremities

#### **Neoprene Footplate Covers:**

- Neoprene Footplate Covers are required to help protect the client's feet that are at-risk for pressure injury.
- Neoprene footplate covers reduce foot pain for the client during use of the MSCC.
- Neoprene footplate covers safely provide a small amount of friction that assists in preventing the client's feet from slipping off the footplates.

#### **Lateral / Medial Offset Foot / Leg Support Receivers:**

- The client needs an extra-wide chair to accommodate their hip width and also requires Lateral / Medial Offset Foot / Leg Support Receivers in order to move the foot supports medially into alignment with the natural position of the lower extremities.
- The client requires Lateral / Medial Offset Foot / Leg Support Receivers in order to move the foot supports laterally in order to accommodate the splayed-out position of the feet caused by redundant tissue in the thighs and legs.
- The client requires Lateral / Medial Offset Foot / Leg Support Receivers in order to move both foot supports to the right / left to accommodate their windswept leg position.

#### **Forward Offset Leg Support Receivers**

- The client requires Forward Offset Leg Support Receivers to allow Elevating Leg Rests

to be used on the chair without interference with an extra-deep seat that overhangs the front of the frame.

- The client has a leg-length discrepancy and requires Forward Offset Leg Support Receivers to accommodate the foot that is positioned further forward for stability, comfort and postural management.

### **Residual Limb Support**

- The client requires the Residual Limb Support because he / she/ they has a below-knee amputation.

## **Positioning Pads**

### **Lateral Thoracic Supports (Swing-Away Laterals):**

- The client requires Lateral Thoracic Supports for trunk stability and prevention of lateral loss of balance or fall.

### **Medial Thigh Support (Pommel):**

- The client has excessive adduction tone and requires a Medial Thigh Support to prevent his / her / their legs from crossing, allowing for peri hygiene and a stable, seated position.
- The client has excessive adduction tone and requires a Medial Thigh Support to maintain a neutral position of his / her / their legs.

### **Lateral Pelvic Support (Hip Adductors):**

- The client requires Lateral Pelvic Supports to maintain a neutral sitting position.

### **Lateral Thigh Support (Leg Adductor):**

- The client requires Lateral Thigh Supports to prevent splaying of his / her / their legs.

### **Large Head Support Pad Upgrade:**

- The client requires a larger-than-standard head support pad to prevent the client's head from coming off the Head Support Pad while in tilt.

### **Offset Head Support Interface Plate:**

- The Offset Head Support Interface Plate is required to position the Head Support Pad off midline to accommodate the client's asymmetrical sitting position.

### **Lateral Extension Plate**

- The client's trunk width is significantly narrower than the back frame / seat frame and requires extension plates to position the lateral trunk supports more medially. This prevents purchase of multiple alternate custom-width backrests over time, while also ensuring safe trunk positioning during bathroom and shower use.
- The client's hip width is significantly narrower than the back frame / seat frame and requires extension plates to position the hip adductors more medially. This prevents purchase of multiple alternate custom-width backrests over time, while also ensuring safe pelvic positioning during bathroom and shower use.

- The client's thigh position is such that he / she requires extension plates to position the leg adductors more medially. This prevents purchase of multiple alternate custom-width seat cushions over time, while also ensuring safe lower extremity positioning during bathroom and shower use.

## **Chest and Pelvic Belts**

### **Chest Belt:**

- A Chest Belt is required to prevent the client from falling forward during toileting and showering.
- A Chest Belt is required to allow the client to safely lean forward during bathing.

### **Pelvic Belt:**

- A Pelvic Belt is needed to stabilize the client's pelvis and him / her / them safely seated.
- A Pelvic Belt is required to prevent the client from sliding out of the MSCC during showering and toileting.
- A Pelvic Belt is required for the client's safety when using a Chest Belt.

## **Caster and Anti-Tipper Options**

### **Directional Caster Lock:**

- A Directional Caster Lock is required to facilitate steering when the client is being transported between the bedroom and the bathroom.

### **Rear Anti-Tippers:**

- This client requires Rear Anti-Tippers to provide additional rearward stability.

### **Front Anti-Tippers:**

- This client requires Front Anti-Tippers to provide additional forward stability.

### **Self-Propel Kits**

- This client requires a Self-Propel Kit on his / her / their tilting MSCC in order to be more independent in toileting and showering routines.

### **Whizard Urine Deflector:**

- The Whizard Urine Deflector is required to direct the client's urine into the toilet / commode pan, improving hygiene.

### **Commode Pan Spacer Kit:**

- The client requires a Commode Pan Spacer Kit in order to lower the commode pan to provide enough space for the client to perform digital stimulation / selfcare with the pan in-place, improving hygiene and bowel care performance, when voiding over a toilet is not possible.