

M5 Corpus



*** Indicates a Required Field**

Dealer Information

Order ID: _____

***ATP:** _____

Dealer Code: _____

***Dealer Name:** _____

Address: _____

***City:** _____

*** State/Zip:** _____

*** Phone#:** _____

PO#: _____

Email Address: _____

Client Information

Permobil recommends that the client is evaluated by a certified rehab specialist.

*** First Name:** _____

*** Last Name:** _____

Diagnosis: _____

Funding Source: _____

Client Age: _____

Client Measurements

*** Weight:** _____

***Height:** _____

A) Top of Shoulders: _____

B) Chest Depth: _____

C) Chest Width: _____

D) Seat Depth: _____

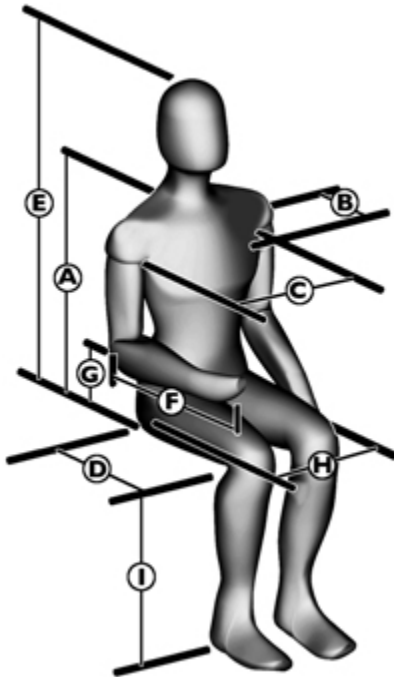
E) Top of Head: _____

F) Elbow to Hand: _____

G) Seat Pan to Elbow: _____

H) Hip Width: _____

***I) Knee to Foot:** _____



Three column pricing on order/quote:

Display HCPCS Codes on order/quote:

Please send order/quote to fax#: **(800) 231-3256**

Email to: sales@permobil.com

Permobil Inc.
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Lebanon, TN 37090
Tel: (800) 736-0925
Fax: (800) 231-3256
www.permobil.com

Prices effective **October 01, 2018**

M5 Corpus

Chair Model and Colors

CHOOSE BASE:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I11210	M5 Base Corpus - M5 SPO <i>Price Includes: MWD M5 Power Base Set Up For One Power Seat Function, FlexLink Pro Suspension System, 8" Flat-Free Casters, Tie-Down Hardware for Strap System, Charger and Permobil Connect. Max Speed = 7.5mph, Weight Capacity = 300lbs, STFH = 17.5".</i>	13,282.00	K0877
<input type="checkbox"/> I107729-99-0	M5 Base Corpus - M5 MPO <i>Price Includes: MWD M5 Power Base Set Up For Multiple Power Seat Functions, FlexLink Pro Suspension System, 8" Flat-Free Casters, Tie-Down Hardware for Strap System, Charger and Permobil Connect. Max Speed = 7.5mph, Weight Capacity = 300lbs, STFH = 17.5".</i>	13,282.00	K0884

CHOOSE DRIVE TIRES:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I107855-99-0	Flat Free Tire 3"W x 14"T Black - Standard Tread <i>Includes flat free standard tread caster wheels.</i>	No Charge	
<input type="checkbox"/> I107854-99-0	Pneumatic Tire 3"W x 14"T Black - Standard Tread <i>Includes flat free standard tread caster wheels.</i>	No Charge	
<input type="checkbox"/> I107315-99-0	Flat Free Tire 3"W x 14"T Black - Aggressive Tread <i>Includes flat free aggressive tread caster wheels.</i>	No Charge	

OPTIONAL DRIVE TIRES:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I107289-99-0	Pneumatic/Snow Tire 3"W x 14"T Black - Aggr Tread <i>Snow tires are designed for use in cold weather conditions. The nylon compound in these tires remains flexible at low temperatures, but wears more easily. Therefore, the snow tires (sold as wheel assemblies) are not recommended for year-long use and must be ordered along with standard drive wheels. Does not include caster wheels.</i>	470.00	K0108

CHOOSE SHROUD/RIM COLOR:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I107836-99-0	M5 Color Kit - Sunburst Orange	No Charge	
<input type="checkbox"/> I107831-99-0	M5 Color Kit - Galactic Green	No Charge	
<input type="checkbox"/> I107832-99-0	M5 Color Kit - Midnight Black	No Charge	
<input type="checkbox"/> I107833-99-0	M5 Color Kit - Ocean Blue	No Charge	
<input type="checkbox"/> I107834-99-0	M5 Color Kit - Power Pink	No Charge	
<input type="checkbox"/> I107835-99-0	M5 Color Kit - Radiant Red	No Charge	
<input type="checkbox"/> I107850-99-0	M5 Color Kit - Phantom Gray	No Charge	
<input type="checkbox"/> I107849-99-0	M5 Color Kit - Titan Blue	No Charge	
<input type="checkbox"/> I107899-99-0	M5 Color Kit - Carbon Fiber	No Charge	
<input type="checkbox"/> I107900-99-0	M5 Color Kit - Mossy Oak Break-Up Country	No Charge	
<input type="checkbox"/> I107983-99-0	M5 Color Kit - CDG Poly	No Charge	
<input type="checkbox"/> I108297-99-0	M5 Color Kit - Sugar Skulls	No Charge	
<input type="checkbox"/> I108302-99-0	M5 Color Kit - Fireball	No Charge	
<input type="checkbox"/> I108307-99-0	M5 Color Kit - Water Lily	No Charge	
<input type="checkbox"/> I108385-99-0	M5 Color Kit - American Liberty	No Charge	
<input type="checkbox"/> I108384-99-0	M5 Color Kit - Midnight Patriot	No Charge	

Base Options

MUST CHOOSE EITHER SEAT ELEVATOR OR FIXED SEAT TUBE:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I107086-99-0	Power Adjustable Seat Height - 14" Travel <i>Must also select Power Tilt when selecting this option.</i>	3,682.00	E2300
<input type="checkbox"/> I11117	Seat Tube Fixed	No Charge	

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I107435-99-0	Set Seat Height to 17.5"	No Charge	

M5 Corpus

Base Options

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I107433-99-0	Set Seat Height at 18.5" <i>If ordering Power Adjustable Seat Height, 1" of elevator travel is used to set seat at 18.5".</i>	No Charge	
<input type="checkbox"/> I107434-99-0	Set Seat Height at 19.5" <i>If ordering Power Adjustable Seat Height, 2" of elevator travel is used to set seat at 19.5".</i>	No Charge	

MUST CHOOSE BATTERIES:

Part Number	Description	Price	HCPCS Code
<input checked="" type="checkbox"/> I107031-99-0	Batteries, Grp 24 (72Ah) Sealed Gel, x2, Installed	1,002.00	E2363

OPTIONAL ITEMS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I107998-99-0	Enhanced Steering Perform Unit (ESP), R-net	1,519.00	K0108
<input type="checkbox"/> I107459-99-0	Essentials Box with Reflectors <i>Please Note: The total backrest angle will be limited to 150° to avoid contact between backrest components and the Essentials Box.</i>	489.00	
<input type="checkbox"/> I107204-99-0	Essentials Box with Lights <i>Please Note: The total backrest angle will be limited to 150° to avoid contact between backrest components and the Essentials Box. Must also select Light Kit.</i>	798.00	
<input type="checkbox"/> I107741-99-0	Light Kit for M3 / M5	1,233.00	
<input type="checkbox"/> I10715	Compact Laptop Ventilator Tray - Corpus Seat <i>Mounts to rear of Corpus backrest hinge. Accommodates Pulmonetic Systems / CareFusion LTV Series and similar sized Laptop Ventilators. The tray is 13"T, adjustable in width from 8" - 13", and adjustable in depth from 2" - 6.5". Overall backrest angle limited to 150° when mounting this ventilator tray. Custom Option. Additional drive restrictions may apply.</i>	1,607.00	
<input type="checkbox"/> I10787	Battery Tray for Laptop Ventilator Tray <i>Measures 11 3/8" W x 6 1/2" H x 1 5/8" D. Accommodates Pulmonetic Systems Lithium-Ion Battery Pack, CareFusion SprintPack Battery System, or Richardson PowerTech Vent Power Center. Custom Option.</i>	269.00	
<input type="checkbox"/> I10788	O2 Holder for Laptop Ventilator Tray <i>Mounts to Left or Right Side of Laptop Vent Tray. O2 Holder is 7" Tall. Width infinitely adjustable 3.5" - 7". Depth infinitely adjustable 3.75" - 5". Custom Option.</i>	341.00	
<input type="checkbox"/> ID51113	Programming Key for R-net - Permobil Version	526.00	

Joystick Options

CHOOSE JOYSTICK TYPE:

Part Number	Description	Price	HCPCS Code
PLEASE NOTE: <i>For additional input devices, please refer to the Alternative Drive Systems Section.</i>			
<input type="checkbox"/> I107778-99-0	Permobil Joystick Module <i>Designed exclusively for Permobil, this R-net color joystick features: control of up to 4 Bluetooth devices, Infrared control, programmable buttons and a programmable switch jack; all in a compact, durable Aluminum housing.</i>	1,082.00	
<input type="checkbox"/> I107829-99-0	3.5mm Y-Splitter Cable for PJSM <i>For use with the PJSM Mode/Profile jack. Allows 2 mechanical switches to control 4 separate functions. Requires PC Programming to assign the short hold and long hold commands to each switch. Switches sold separately.</i>	36.00	K0108
<input type="checkbox"/> I105700-99-0	R-net Remote Color JS w/ Lights, Heavy Duty Gimbal <i>Heavy-Duty modification enables gimbal to hold up to extreme operating forces. Reinforced housing is attached to a standard Color LCD R-net Joystick. 3" long joystick knob has 3/4" diameter. Not compatible with alternative joystick handles.</i>	1,232.00	

CHOOSE JOYSTICK HANDLE TYPE:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10045	Cone Shaped Joystick Knob - Standard	No Charge	
<input type="checkbox"/> I100960-99-0	Chin Cup For Joystick Knob	127.00	E2324
<input type="checkbox"/> I100961-99-0	"T" Handle For Joystick Knob	179.00	E2323
<input type="checkbox"/> I100962-99-0	"Large Ball" For Joystick Knob	127.00	E2323

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Joystick Options

CHOOSE JOYSTICK HANDLE TYPE:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I100963-99-0	"Softball" For Joystick Knob	167.00	E2323
<input type="checkbox"/> I100964-99-0	"Mushroom" For Joystick Knob	167.00	E2323
<input type="checkbox"/> I100965-99-0	"Stick" For Joystick Knob	167.00	E2323
<input type="checkbox"/> I105442-99-0	1.75" Black Foam Ball For Joystick Knob	127.00	E2323
<input type="checkbox"/> I105846-99-0	Bodypoint J/S Handle 3" U-Shaped w/ Flex-Shaft	167.00	E2323
<input type="checkbox"/> I105847-99-0	Bodypoint J/S Handle 4" U-Shaped w/ Flex-Shaft	167.00	E2323
<input type="checkbox"/> I105848-99-0	Bodypoint J/S Handle Dome Shaped, Rubber	167.00	E2323

CHOOSE JOYSTICK MOUNT:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10664	Joystick Mount Right - Fixed	No Charge	
<input type="checkbox"/> I10665	Joystick Mount Left - Fixed	No Charge	
<input type="checkbox"/> I102537-99-0	Joystick Mount Right - Swing Away	374.00	E1028
<input type="checkbox"/> I102538-99-0	Joystick Mount Left - Swing Away	374.00	E1028
<input type="checkbox"/> I108037-99-0	Slimline Retractable Joystick Mount - Right	503.00	E1028
<input type="checkbox"/> I108038-99-0	Slimline Retractable Joystick Mount - Left	503.00	E1028
<input type="checkbox"/> I11232	Adjustable Height Panel Bracket <i>Provides 1.77" of vertical adjustment below the armrest and 25° of angle adjustment. Compatible with all Permobil joystick mounts except for the M1 Fixed Joystick Mount.</i>	273.00	E1028
<input type="checkbox"/> I105210-99-0	Mount Standard Joystick on Corpus Back Hinge <i>Standard R-net Joystick is mounted to backrest hinge. Can be chosen instead of PN I105408-99-0. Mount on Left: _____ Mount on Right: _____</i>	344.00	
<input type="checkbox"/> I108268-99-0	Bodypoint Tri-Lock Midline Mount Assembly <i>Includes L-shaped joystick arm and height adjustable mounting clamp. Joystick mount sold separately (select from the mounts listed below). Please indicate if you want midline mounted on left or right armrest: Mount Midline on Left Armrest: _____ Mount Midline on Right Armrest: _____</i>	642.00	
<input type="checkbox"/> I108280-99-0	Bodypoint Tri-Lock Mount for R-net/Compact Adv JS	267.00	
<input type="checkbox"/> I108279-99-0	Bodypoint Tri-Lock Mount for Compact Joystick	267.00	
<input type="checkbox"/> I108310-99-0	Bodypoint Tri-Lock Mount for Omni	302.00	E1028
<input type="checkbox"/> I10842	PERMOFix Mount for Mini/Compact Joystick <i>Includes a shim washer that allows the PERMOFix joint to be mounted on the joystick arm. Provides an adjustable mount for a Mini Joystick or Compact Joystick.</i>	267.00	

OPTIONAL ITEMS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10411	Expandable Controller - R-net <i>This item is required when ordering power tilt, power recline, and power elevating legrests together OR when ordering an Alternative Drive Control.</i>	699.00	E2377
<input type="checkbox"/> I10513	Harness for Expandable Controller <i>Must be ordered with any Expandable Controller.</i>	620.00	E2313
<input type="checkbox"/> I105225-99-0	Co-Pilot Attendant Control R-net - Corpus	5,115.00	E2331
<input type="checkbox"/> I105408-99-0	Attendant Control R-net	1,372.00	E2331
<input type="checkbox"/> I107350-99-0	R-net Bluetooth iDevice Module <i>Allows input device commands (such as joystick nudges or switch clicks) to be used to operate an iPhone, iPad or iPod. By assigning each input to an iOS function, users can make phone calls, send texts and emails and access applications. Kit includes a Bluetooth iDevice Module, an R-net Bus Cable, and two mono jack cables for direct switch inputs (switches not included). Must be ordered with a Color JSM or Omni for mode display.</i>	962.00	K0108
<input type="checkbox"/> I107367-99-0	R-net Bluetooth Mouse Module <i>Enables mouse control through any R-net input device. It can operate the mouse on a computer and on select Android devices (with R-net for Android app). Kit includes a Bluetooth Mouse Module, an R-net Bus Cable, two mono jack cables for L/R click (switches not included) and a USB BT Adapter for user's computer. Note: BT Adapter may not work with all computers. Must be ordered with a Color JSM or Omni for mode display.</i>	962.00	K0108

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Joystick Options

OPTIONAL ITEMS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I107368-99-0	Add a second Bluetooth Mouse Module <i>Allows R-net to simultaneously pair to a second compatible computer or Android device. Each module is accessible through a separate R-net mode. Kit includes a unique Bluetooth Mouse Module, an R-net Bus Cable, two mono jack cables for L/R click and a USB BT Adapter.</i>	962.00	K0108
<input type="checkbox"/> I10582	Output Module (IOM) for R-net Control System <i>Enables a user to control an external device (ex: Communication Device, ECU, Door Opener, etc.) through the drive input (JSM, Head Array, etc.). Each module can provide up to 4 switch closures. May require specialty cable or wiring. Up to three output modules can be installed on one wheelchair.</i>	1,292.00	K0108

Seating System

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
PLEASE NOTE: <i>Speed limitations are imposed when the total backrest angle is greater than 150° or when the seat is tilted forward more than 5°. Drive is inhibited when the seat is tilted back more than 25°.</i>			
<input type="checkbox"/> I11211	Corpus Seat w/ No Tilt <i>Backrest angle can be manually adjusted up to 120°.</i>	7,807.00	
<input type="checkbox"/> I11212	Corpus Seat w/ No Tilt & 175° Power Recline	10,223.00	E1004
<input type="checkbox"/> I11213	Corpus Seat w/ 50° Tilt <i>Backrest angle can be manually adjusted up to 120°.</i>	8,654.00	E1002
<input type="checkbox"/> I11214	Corpus Seat w/ 50° Power Tilt & 175° Power Recline	14,415.00	E1007

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
PLEASE NOTE: <i>Active Reach should be recommended by a licensed clinical professional and/or ATP. While operating Active Reach, positioning equipment such as lap belts and chest supports should be considered to meet the user's specific safety needs. Note: A low speed limitation is imposed from 5° to 10° of Active Reach, an extra low speed limitation is imposed from 10° to 20° of Active Reach and a drive lockout is imposed above 20° of Active Reach.</i>			
<input type="checkbox"/> I11141	5° Active Reach <i>When ordered with a Power Adjustable Seat Height, tilt range will be -5° to +50°. When ordered without a Power Adjustable Seat Height, tilt range will be -5° to +45°. If this option is selected with a fixed seat, the minimum seat to floor height at 0° of tilt will be approximately 19.5". Power Legrest recommended for full functionality. Minimum legrest angle will be ~ 97° when manual legrest is selected.</i>	No Charge	
<input type="checkbox"/> I107090-99-0	10° Active Reach <i>Please Note: This option is only available on configurations ordered with Power Adjustable Seat Height and Power Tilt. A chest support belt (see Accessories section) is strongly recommended when selecting this option. Power Legrest recommended for full functionality. Minimum legrest angle will be ~ 103° when manual legrest is selected.</i>	No Charge	
<input type="checkbox"/> I107091-99-0	20° Active Reach <i>Please Note: This option is only available on configurations ordered with Power Adjustable Seat Height, Power Tilt, Power Recline and Power Legrest Elevation. Must select Corpus VS Power Elevating Legrest, Corpus VS Footplates and Corpus VS Knee Support from VS Legrest Options section. A chest support belt (see Accessories section) is strongly recommended when selecting this option. Not compatible with retractable positioning belts.</i>	2,716.00	K0108

Seating System Options

CHOOSE SEAT FUNCTION CONTROL TYPE:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10418	Single Seat Function Control Switch for R-net <i>Please choose either Push Buttons or Toggle Switches below.</i>	No Charge	E2310
<input type="checkbox"/> I10419	Single Seat Function Control Kit for R-net <i>For operation of a single seat function through the wheelchair electronics via the drive control and/or ICS Switchbox. Order with R-net Controller or remote joystick options. Please indicate below if you want push buttons or toggles on the ICS Switchbox.</i>	1,932.00	E2310

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Seating System Options

CHOOSE SEAT FUNCTION CONTROL TYPE:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10585	Multiple Seat Function Control Kit for R-net <i>MUST be selected if ordering two or more seat functions. This device is used to operate two or more seat functions through the wheelchair electronics via the drive control and/or ICS switch box. Order with R-net electronics or remote joystick options. Please indicate below if you want push buttons or toggles on the ICS Switchbox.</i>	3,657.00	E2311

CHOOSE PUSH BUTTONS OR TOGGLES:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I102798-99-0	Push Buttons on ICS Switchbox (1.4m)	No Charge	
<input type="checkbox"/> I102799-99-0	Toggle Switches on ICS Switchbox (1.4m)	327.00	
<input type="checkbox"/> I105409-99-0	Do Not Install ICS Switchbox, Send as Part	No Charge	

CHOOSE MOUNTING POSITION OF ICS SWITCHBOX:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10626	Mount ICS Switchbox onto R-net Joystick Bracket <i>ICS Switchbox will be mounted to the same bracket as the R-net Joystick Module. If this item is selected, the ICS Switchbox will swing away with the Joystick Module.</i>	No Charge	
<input type="checkbox"/> I104651-99-0	Mount ICS Switchbox onto Armrest <i>Mount on Left: _____ Mount on Right: _____</i>	No Charge	
<input type="checkbox"/> I106256-99-0	Mount ICS Switchbox on Backrest <i>Mount on Left: _____ Mount on Right: _____</i>	157.00	

OPTIONAL ITEMS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I104196-99-0	ICS Alternative Switchbox for R-net Electronics <i>Seat function interface box that accommodates up to 8 momentary switches. Provides an additional method for accessing the seat functions. 1/8" mini-mono switches not included.</i>	1,278.00	K0108
<input type="checkbox"/> I107088-99-0	Remote Stop System - F/M Series <i>Consists of a Radio Frequency (RF) handheld transmitter and an RF receiver mounted on the wheelchair.</i>	1,264.00	
<input type="checkbox"/> I10750	Memory Seat Program, Corpus w/ R-net	132.00	
<input type="checkbox"/> I106209-99-0	Legrest Movement Linked to Recline Electronically <i>Power Legrest will raise when Power Recline moves backward and will lower when back moves forward. If Power Legrest is operated, Power Recline will NOT automatically reposition. Feature works through ICS Switchbox and Driver Control.</i>	50.00	
<input type="checkbox"/> I10898	Enable Independent Repositioning Mode <i>IRM allows for sequential movement of power seat functions into a posterior position (35° tilt, 115° recline, 135° legrest) and returns to upright position (5° tilt, 100° recline, 110° legrest). This can be accessed using a standard drive control or a single switch. On the Permobil Joystick Module, IRM is accessible through the mode/profile jack (long switch hold). Please see the Alt Drive Accessories section for switch options.</i>	No Charge	

Backrest Options

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I105067-99-0	Sliding Backrest Kit - 5" Mechanical Shear	No Charge	
<input type="checkbox"/> I105066-99-0	Fixed Backrest Kit - No Mechanical Shear	39.00	

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
BACKREST HEIGHT NOTE: <i>Backrest heights are measured from the seat pan to the top of the backrest shell with the backrest set at 90°. Ergo Backs include lateral wedges and lumbar pads.</i>			
<input type="checkbox"/> I106545-99-0	Corpus Ergo Back - 14"W x 20"T (C3GERGBCA) <i>Power Recline will be limited to 150° when ordering this backrest.</i>	1,091.00	E2620
<input type="checkbox"/> I106546-99-0	Corpus Ergo Back - 16"W x 20"T (C3GERGBCA) <i>Power Recline will be limited to 150° when ordering this backrest.</i>	1,091.00	E2620
<input type="checkbox"/> I106547-99-0	Corpus Ergo Back - 18"W x 20"T (C3GERGBCA) <i>Power Recline will be limited to 150° when ordering this backrest.</i>	1,091.00	E2620

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Backrest Options

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I106548-99-0	Corpus Ergo Back - 20"W x 20"T (C3GERGBCA) <i>Power Recline will be limited to 150° when ordering this backrest.</i>	1,091.00	E2620
<input type="checkbox"/> I11104	Solid Corpus Ergo Back - 16"W x 20"T <i>Power Recline will be limited to 150° when ordering this backrest.</i>	No Charge	
<input type="checkbox"/> I11105	Solid Corpus Ergo Back - 18"W x 20"T <i>Power Recline will be limited to 150° when ordering this backrest.</i>	No Charge	
<input type="checkbox"/> I11106	Solid Corpus Ergo Back - 20"W x 20"T <i>Power Recline will be limited to 150° when ordering this backrest.</i>	No Charge	

PLEASE NOTE:

All taller backrests listed below include: lateral wedges, lumbar pads, a UT rail mounted at the top for lateral adjustment of the headrest, and split backrest feature with height adjustment in 1" increments. Please indicate below where you want the height set at so that a properly sized backrest cushion can be provided.

<input type="checkbox"/> I106532-99-0	Corpus Ergo Back - 14"W x 23" - 28"T (C3GERGBCA)	1,095.00	E2620
<input type="checkbox"/> I106533-99-0	Corpus Ergo Back - 16"W x 23" - 28"T (C3GERGBCA)	1,095.00	E2620
<input type="checkbox"/> I106534-99-0	Corpus Ergo Back - 18"W x 23" - 28"T (C3GERGBCA)	1,095.00	E2620
<input type="checkbox"/> I106535-99-0	Corpus Ergo Back - 20"W x 23" - 28"T (C3GERGBCA)	1,095.00	E2620
<input type="checkbox"/> I11107	Solid Corpus Ergo Back - 16"W x 23" - 28"T	No Charge	
<input type="checkbox"/> I11108	Solid Corpus Ergo Back - 18"W x 23" - 28"T	No Charge	
<input type="checkbox"/> I11109	Solid Corpus Ergo Back - 20"W x 23" - 28"T	No Charge	

MUST ALSO SELECT BACK HEIGHT:

- Set Corpus Backrest at 23" _____
- Set Corpus Backrest at 24" _____
- Set Corpus Backrest at 25" _____
- Set Corpus Backrest at 26" _____
- Set Corpus Backrest at 27" _____
- Set Corpus Backrest at 28" _____

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10659	Leatherette Cushion - Corpus Ergo Back	No Charge	
<input type="checkbox"/> I10660	Black Mesh Cushion - Corpus Ergo Back	43.00	

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I11258	ROHO AGILITY Max Contour Direct Mount - 16" Tall <i>Backrest can be installed at a height (seat pan to top of AGILITY) between 22" and 25". Specify Shell Width (14", 16", 18", 20"W):_____</i>	779.00	E2620
<input type="checkbox"/> I11259	ROHO AGILITY Max Contour Direct Mount - 18" Tall <i>Backrest can be installed at a height (seat pan to top of AGILITY) between 22" and 26". Specify Shell Width (14", 16", 18", 20"W):_____</i>	779.00	E2620
<input type="checkbox"/> I11260	ROHO AGILITY Max Contour Direct Mount - 20" Tall <i>Backrest can be installed at a height (seat pan to top of AGILITY) between 24" and 27". Specify Shell Width (14", 16", 18", 20"W):_____</i>	779.00	E2620

MUST ALSO SELECT BACK HEIGHT:

- Set AGILITY Backrest at 22" _____
- Set AGILITY Backrest at 23" _____
- Set AGILITY Backrest at 24" _____

M5 Corpus

Backrest Options

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
	Set AGILITY Backrest at 25" _____		
	Set AGILITY Backrest at 26" _____		
	Set AGILITY Backrest at 27" _____		

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I107488-99-0	Permobil 3" x 5" Lateral Supports - Pair <i>Must also select I107490-99-0. Only compatible with Corpus Ergo backrest shells.</i>	419.00	E0956
<input type="checkbox"/> I107489-99-0	Permobil 5" x 7" Lateral Supports - Pair <i>Must also select I107490-99-0. Only compatible with Corpus Ergo backrest shells.</i>	419.00	E0956
<input type="checkbox"/> I107490-99-0	Adj/Removable Lateral Link Hardware - Pair	574.00	E1028

OPTIONAL ITEMS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I105782-99-0	Tubular Backrest Frame - Corpus (1" Canes) <i>Provides 1" diameter, vertical canes for mounting aftermarket backrests. Frame can be adjusted to support backrest widths from 14" to 20". Canes are attached with 2" long UniTrack linkage disks that can rotate to provide space for backrest hardware. The tops of the canes can be adjusted up to a height of 27" above the seat pan. Depending on the aftermarket backrest, several inches of seat depth may be lost when mounting this system.</i>	510.00	
<input type="checkbox"/> I106072-99-0	Direct Backrest Frame - Corpus <i>Used to mount ROHO Agility, Jay 3, Matrx Elite, Varilite Icon and Ride Java backrests ranging in width from 14" to 20". Slotted brackets and 1" UniTrack linkage disks provide a close, adjustable mount. Backrest pitch can be tuned by rotating the linkage disks. Some seat depth may be lost due to the position and orientation of the backrest.</i>	510.00	K0108
<input type="checkbox"/> I10725	Split Backrest Cushion - Corpus <i>Custom Option.</i>	345.00	E2617
<input type="checkbox"/> I10786	Tailored Backrest Cushion - Corpus <i>Sides of cushion are trimmed to provide additional clearance for lateral trunk supports. Must also select a backrest cushion (I10659 or I10660) when ordering this custom option.</i>	129.00	E2617

Seat Sizing

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I107023-99-0	Set Seat Width at 17": _____	No Charge	
<input type="checkbox"/> I107024-99-0	Set Seat Width at 19": _____	No Charge	
<input type="checkbox"/> I107025-99-0	Set Seat Width at 21": _____	No Charge	
<input type="checkbox"/> I107026-99-0	Set Seat Width at 23": _____	No Charge	

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
	PLEASE NOTE: <i>There are three different seat depth kits, each providing three seat depth settings: (1) 14" - 16", (2) 17" - 19" and (3) 20" - 22". Please select the required seat depth and the appropriate kit will be provided.</i>		
<input type="checkbox"/> I107013-99-0	Seat Depth 14"	No Charge	
<input type="checkbox"/> I107014-99-0	Seat Depth 15"	No Charge	
<input type="checkbox"/> I107015-99-0	Seat Depth 16"	No Charge	
<input type="checkbox"/> I107016-99-0	Seat Depth 17"	No Charge	
<input type="checkbox"/> I107017-99-0	Seat Depth 18"	No Charge	
<input type="checkbox"/> I107018-99-0	Seat Depth 19"	No Charge	
<input type="checkbox"/> I107019-99-0	Seat Depth 20"	No Charge	
<input type="checkbox"/> I107020-99-0	Seat Depth 21"	No Charge	
<input type="checkbox"/> I107021-99-0	Seat Depth 22"	No Charge	

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
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M5 Corpus

Seat Sizing

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
	NOTE: A Corpus II Ergonomic Seat Cushion will be provided for select seat sizes.		
<input type="checkbox"/> I10651	Corpus Ergo Cushion - Leatherette (C3GERGSCA)	578.00	E2605
<input type="checkbox"/> I10652	Corpus Ergo Cushion - Black Mesh (C3GERGSCA)	578.00	E2605
<input type="checkbox"/> I10965	Corpus Ergo Air Cushion (C3GRHOSCA)	611.00	E2622
	Features ROHO Dry Floatation technology. The removable ROHO cell pad provides adjustable skin protection while the contoured foam and thigh support wedges help maintain proper positioning and stability. Includes removable stretch fabric cover. Available in widths of 17", 19" and 21" and depths of 17", 19" and 21", as well as 17" x 23". Not Available in 21" x 17"		
<input type="checkbox"/> I11113	Incontinence Cover for Ergo Cushion	186.00	E2619
	Made from a stretch Dartex fabric and suitable for all Ergo cushions including the Corpus Ergo Air. The cover is cut to the contours of the Ergo cushion and is designed to be used as an outer layer of protection. Cover size will be matched to cushion size. Sent as a part.		
<input type="checkbox"/> I11166	ROHO QUADTRO SELECT HIGH PROFILE < 22"W	586.00	E2624
	Registered in PDAC under ROHO model numbers QS98C - QS1114C.		
<input type="checkbox"/> I11167	ROHO QUADTRO SELECT HIGH PROFILE > or = 22"W	628.00	E2625
	Registered in PDAC under ROHO model numbers QS128C - QS1413C.		
<input type="checkbox"/> I11168	ROHO HIGH PROFILE Single Comp < 22"W	586.00	E2622
	Registered in PDAC under ROHO model numbers 1R98C - 1R1114C.		
<input type="checkbox"/> I11169	ROHO HIGH PROFILE Single Comp > or = 22"W	628.00	E2623
	Registered in PDAC under ROHO model numbers 1R138C - 1R1414C.		
<input type="checkbox"/> I11170	ROHO HIGH PROFILE Sensor Ready < 22"W	586.00	E2622
	Single compartment cushion designed to work with Smart Check Device I107505-99-0. Registered in PDAC under ROHO model numbers 1R98H-CA-SR - 1R1112H-CA-SR. Not available in all seat widths and depths.		
<input type="checkbox"/> I11171	ROHO HIGH PROFILE Sensor Ready > or = 22"W	628.00	E2623
	Single compartment cushion designed to work with Smart Check Device I107505-99-0. Registered in PDAC under ROHO model numbers 1R1310H-CA-SR - 1R1411H-CA-SR. Not available in all seat widths and depths.		
<input type="checkbox"/> I107505-99-0	ROHO Smart Check Device	254.00	K0108
	Sensing device that allows users to setup and maintain proper inflation pressure in ROHO Sensor Ready cushions. Only available when ordered with a ROHO Sensor Ready cushion.		
<input type="checkbox"/> I11173	Incontinence Cover for ROHO Cushion	161.00	E2619
	Made from a stretch Dartex fabric and suitable for all ROHO seat cushions. Cover size will be matched to the cushion size. Sent as a part.		
<input type="checkbox"/> I105118-99-0	Omit Seat Cushion	No Charge	

Armrest Options

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
	PLEASE NOTE: Narrow Armbar Kit can be adjusted from 15"W to 19"W between the armrest pads without any additional parts. Wide Armbar Kit can be adjusted from 19"W to 23"W between the armrest pads without any additional parts. Please select both Armbar Kit and Width Setting below.		
<input type="checkbox"/> I106543-99-0	Narrow Armbar Kit, Inf Adjustable 15"W - 19"W	No Charge	
<input type="checkbox"/> I106544-99-0	Wide Armrest Kit, Inf Adjustable 19"W - 23"W	No Charge	
	Required when selecting a 20" wide backrest. Set the Width Between the Armrests to: _____ Must be wider than backrest width to ensure proper fit. Please round to nearest 1".		

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I105069-99-0	Height Adjustable Armrests - NC	No Charge	
	No charge when ordering power tilt and/or recline.		
<input type="checkbox"/> I105081-99-0	Height Adjustable Armrests	358.00	
	Must be selected when the NPO base is selected.		

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Armrest Options

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
	SET ARMREST HEIGHT AT: _____ <i>Corpus Armrests are infinitely adjustable from 7" - 15", measured from the seat pan to the top of the armrest pad. No additional parts are needed to get this full range of adjustment. In one inch increments (ex: 8", 9", etc.), please indicate where you would like the armrests set.</i>		

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I105071-99-0	Left Armrest Bracket - Fixed <i>Medial swivel cannot be enabled when selecting this option. Must be selected when ordering arm trough adapters.</i>	No Charge	
<input type="checkbox"/> I105070-99-0	Right Armrest Bracket - Fixed <i>Medial swivel cannot be enabled when selecting this option. Must be selected when ordering arm trough adapters.</i>	No Charge	
<input type="checkbox"/> I105073-99-0	Left Armrest Bracket - Medial Swivel Enabled	No Charge	
<input type="checkbox"/> I105072-99-0	Right Armrest Bracket - Medial Swivel Enabled	No Charge	

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I105100-99-0	4"x10" Corpus Armrest Pad Right - Leatherette	No Charge	
<input type="checkbox"/> I105104-99-0	4"x13" Corpus Armrest Pad Right - Leatherette	No Charge	
<input type="checkbox"/> I105105-99-0	4"x16" Corpus Armrest Pad Right - Leatherette	No Charge	
<input type="checkbox"/> I105999-99-0	4"x18" Corpus HD Armrest Pad Right - Leatherette	No Charge	
<input type="checkbox"/> I107212-99-0	4"x10" Corpus Armrest Pad Right - Black Fabric	No Charge	
<input type="checkbox"/> I106047-99-0	4"x13" Corpus Armrest Pad Right - Black Fabric	No Charge	
<input type="checkbox"/> I107214-99-0	4"x16" Corpus Armrest Pad Right - Black Fabric	No Charge	
<input type="checkbox"/> I105995-99-0	4"x18" Corpus HD Armrest Pad Right - Black Fabric	No Charge	
<input type="checkbox"/> I107591-99-0	4"x10" Corpus Arm w/ Permobil Gel Pad - Right	175.00	
<input type="checkbox"/> I107593-99-0	4"x13" Corpus Arm w/ Permobil Gel Pad - Right	180.00	
<input type="checkbox"/> I107595-99-0	4"x16" Corpus Arm w/ Permobil Gel Pad - Right	185.00	
<input type="checkbox"/> I107597-99-0	4"x18" Corpus HD Arm w/ Permobil Gel Pad - Right	190.00	

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I105098-99-0	4"x10" Corpus Armrest Pad Left - Leatherette	No Charge	
<input type="checkbox"/> I105102-99-0	4"x13" Corpus Armrest Pad Left - Leatherette	No Charge	
<input type="checkbox"/> I105107-99-0	4"x16" Corpus Armrest Pad Left - Leatherette	No Charge	
<input type="checkbox"/> I105998-99-0	4"x18" Corpus HD Armrest Pad Left - Leatherette	No Charge	
<input type="checkbox"/> I107213-99-0	4"x10" Corpus Armrest Pad Left - Black Fabric	No Charge	
<input type="checkbox"/> I106046-99-0	4"x13" Corpus Armrest Pad Left - Black Fabric	No Charge	
<input type="checkbox"/> I107215-99-0	4"x16" Corpus Armrest Pad Left - Black Fabric	No Charge	
<input type="checkbox"/> I105994-99-0	4"x18" Corpus HD Armrest Pad Left - Black Fabric	No Charge	
<input type="checkbox"/> I107590-99-0	4"x10" Corpus Arm w/ Permobil Gel Pad - Left	175.00	
<input type="checkbox"/> I107592-99-0	4"x13" Corpus Arm w/ Permobil Gel Pad - Left	180.00	
<input type="checkbox"/> I107594-99-0	4"x16" Corpus Arm w/ Permobil Gel Pad - Left	185.00	
<input type="checkbox"/> I107596-99-0	4"x18" Corpus HD Arm w/ Permobil Gel Pad - Left	190.00	

OPTIONAL ITEMS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I105463-99-0	Corpus Arm Trough Adapter 1" - Pair <i>For aftermarket armrest pads. Please indicate below if they should be installed or on chair sent as parts. Please Note: Medial Swivel must be must be locked (I10645 & I10646) when selecting this option.</i>	345.00	
<input type="checkbox"/> I105462-99-0	Corpus Arm Trough Adapter 7/8" - Pair <i>For aftermarket armrest pads. Please indicate below if they should be installed or on chair sent as parts. Please Note: Medial Swivel must be must be locked (I10645 & I10646) when selecting this option.</i>	345.00	

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Armrest Options

OPTIONAL ITEMS:

Part Number	Description	Price	HCPCS Code
	Install Arm Trough Adapters: _____ Send Arm Trough Adapters as Parts: _____		
<input type="checkbox"/> I107339-99-0	Armrest Pouch - Right	244.00	
<input type="checkbox"/> I107338-99-0	Armrest Pouch - Left	244.00	
<input type="checkbox"/> I107840-99-0	UT Armrest Side Support - Right Outer <i>Includes 2"T x 6.5"W tapered pad.</i>	352.00	
<input type="checkbox"/> I107863-99-0	UT Armrest Side Support - Left Outer <i>Includes 2"T x 6.5"W tapered pad.</i>	352.00	
<input type="checkbox"/> I107864-99-0	UT Armrest Side Support - Right Inner <i>Includes 2"T x 6.5"W tapered pad. May require an increase to the width between the armrests to ensure armrests will flip-up.</i>	352.00	
<input type="checkbox"/> I107865-99-0	UT Armrest Side Support - Left Inner <i>Includes 2"T x 6.5"W tapered pad. May require an increase to the width between the armrests to ensure armrests will flip-up.</i>	352.00	
<input type="checkbox"/> I107839-99-0	UT Elbow Support - Right <i>Must also select PN I10881.</i>	174.00	K0108
<input type="checkbox"/> I107838-99-0	UT Elbow Support - Left <i>Must also select PN I10882.</i>	174.00	K0108
<input type="checkbox"/> I10881	Adjustable Elbow Support Hardware - Right	256.00	
<input type="checkbox"/> I10882	Adjustable Elbow Support Hardware - Left	256.00	

Legrest Options

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
	CHOOSE LEGREST TYPE:		
<input type="checkbox"/> I107763-99-0	Corpus Manual Elevating Legrest	No Charge	
<input type="checkbox"/> I107926-99-0	Corpus Power Elevating Legrest - 170° <i>Includes mechanical articulation.</i>	3,756.00	E1012
	CHOOSE FOOTPLATE STYLE:		
<input type="checkbox"/> I11197	2pc Narrow Corpus Footplates - 9"D x 6"W	No Charge	
<input type="checkbox"/> I11196	2pc Wide Corpus Footplates - 9"D x 7.5"W	269.00	
<input type="checkbox"/> I106760-99-0	1pc Narrow Corpus Footpl - 9.75"D x 12.5"W <i>Footplate is 12.5"W in front, 8"W in back.</i>	269.00	
	CALF SUPPORT OPTIONS:		
<input type="checkbox"/> I105252-99-0	UT Calf Support Kit (B) w Mesh Cover & Adj Hardware <i>3.5"W x 4.5"T Pad.</i>	No Charge	
<input type="checkbox"/> I105258-99-0	UT Calf Support Kit (J) w Mesh Cover & Adj Hardware <i>5"W x 6.5"T Pad.</i>	No Charge	
<input type="checkbox"/> I105250-99-0	UT Calf Support Kit (A) w Mesh Cover & Adj Hardware <i>5.5"W x 6"T Pad.</i>	No Charge	
<input type="checkbox"/> I105256-99-0	UT Calf Support Kit (H) w Mesh Cover & Adj Hardware <i>7"W x 7"T Curved Pad.</i>	384.00	
<input type="checkbox"/> I105254-99-0	UT Calf Support Kit (D) w Mesh Cover & Adj Hardware <i>8"W x 8"T Pad.</i>	384.00	

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
	CORPUS VS LEGREST AND KNEE SUPPORT:		
	<i>NOTE: The Corpus VS Legrest is only available with 20°, 30° and 45° of Active Reach.</i>		
<input type="checkbox"/> I107925-99-0	Corpus VS Power Elevating Legrest - 180°	3,756.00	E1012,K0108
<input type="checkbox"/> I107038-99-0	Knee Support/Abductor - Corpus VS <i>Select when ordering Corpus VS Legrest. Must also select I11129.</i>	267.00	E0957

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Legrest Options

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I11129	Adj Removable Knee Support Hardware (1 Each)	280.00	
CHOOSE FOOTPLATE STYLE:			
<input type="checkbox"/> I11198	2pc Narrow Corpus VS Footplates - 9"D x 6"W	No Charge	
CALF SUPPORT OPTIONS:			
<input type="checkbox"/> I107211-99-0	VS Calf Support Kit (J) w Mesh Cover & Adj Hardware 5"W x 6.5"T Pad. Compatible with footplate heights of 10" - 18".	No Charge	
<input type="checkbox"/> I106190-99-0	VS Calf Support Kit (A) w Mesh Cover & Adj Hardware 5.5"W x 6"T Pad. Compatible with footplate heights of 10" - 18".	No Charge	
<input type="checkbox"/> I106188-99-0	VS Calf Support Kit (H) w Mesh Cover & Adj Hardware 7"W x 7"T Curved Pad. Compatible with footplate heights of 11" - 18".	378.00	
<input type="checkbox"/> I106186-99-0	VS Calf Support Kit (D) w Mesh Cover & Adj Hardware 8"W x 8"T Pad. Compatible with footplate heights of 12" - 18".	378.00	

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
	SET FOOTPLATE HEIGHT AT: _____		
	<i>This is measured from the SEAT PAN to the top of the FOOTPLATE, when the legrest assembly is at 90°. DO NOT INCLUDE CUSHION THICKNESS IN YOUR MEASUREMENT. In one inch increments, please indicate desired footplate height. NOTE: Corpus footplate height range is 6"-17" and Corpus VS height range is 9"-17". Height may need to be reduced for shipping. Calf Pads are not available at heights less than 9".</i>		

CHOOSE ONE OF THE FOLLOWING:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I106530-99-0	Stealth Gel Pads - Narrow Footplates (Pair)	430.00	
<input type="checkbox"/> I106225-99-0	Stealth Gel Pads - Wide Footplates (Pair)	440.00	

Accessories

<input type="checkbox"/> I104518-99-0	Bodypoint Non-Padded Hip Belt - Medium	No Charge	
<input type="checkbox"/> I104520-99-0	Bodypoint Padded Hip Belt - Medium	153.00	
<input type="checkbox"/> I104514-99-0	Bodypoint Non-Padded Hip Belt - Large	130.00	
<input type="checkbox"/> I104516-99-0	Bodypoint Padded Hip Belt - Large	204.00	
<input type="checkbox"/> I100519-99-0	Positioning Belt Retractable	304.00	
<input type="checkbox"/> I100600-99-0	Positioning Belt Retractable Long	315.00	

HEADREST OPTIONS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I107470-99-0	Permobil 7"W Headrest w/ Link Hardware <i>Must also select I107480-99-0 or I107481-99-0.</i>	397.00	E0955
<input type="checkbox"/> I107469-99-0	Permobil 10"W Headrest w/ Link Hardware <i>Must also select I107480-99-0 or I107481-99-0.</i>	397.00	E0955
<input type="checkbox"/> I107468-99-0	Permobil 14"W Headrest w/ Link Hardware <i>Must also select I107480-99-0 or I107481-99-0.</i>	397.00	E0955
<input type="checkbox"/> I107480-99-0	Adj/Removable Headrest Link Hardware - Standard	273.00	E1028
<input type="checkbox"/> I107481-99-0	Adj/Removable Headrest Link Hardware - Extended <i>Includes an additional 3" link to extend headrest pad range.</i>	294.00	E1028
<input type="checkbox"/> I11305	Swing Away Egg Switch Assembly <i>Mount on Upper Left:_____ Mount on Upper Right:_____</i>	586.00	E1028
<input type="checkbox"/> I11306	Swing Away Microlight Assembly <i>Mount on Upper Left:_____ Mount on Upper Right:_____</i>	668.00	E1028
<input type="checkbox"/> I11307	Swing Away Facial Pad Assembly 4"L x 2"T <i>Mount on Upper Left:_____ Mount on Upper Right:_____</i>	475.00	E1028
<input type="checkbox"/> I11308	Swing Away Facial Pad Assembly 6"L x 2"T <i>Mount on Upper Left:_____ Mount on Upper Right:_____</i>	475.00	E1028

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Accessories

HEADREST OPTIONS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I11276	Provide Headrest Receiver for AGILITY Backrest <i>Select for AGILITY backs and third party backs ordered off chair.</i>	No Charge	
<input type="checkbox"/> I106331-99-0	Permobil 10"W Headrest, Leatherette <i>Not available with ROHO AGILITY Back Systems. Must also select PN I10552.</i>	363.00	E0955
<input type="checkbox"/> I106333-99-0	Permobil Ergo Shape Headrest, Black Fabric <i>Not available with ROHO AGILITY Back Systems. Must also select PN I10552.</i>	381.00	E0955
<input type="checkbox"/> I10552	Adj/Removable Headrest Hardware	280.00	E1028
<input type="checkbox"/> I107499-99-0	Universal Headrest Adapter <i>Please Note: Recline is limited to 160° or less (depending on backrest height) when ordering a Universal Headrest Adapter on a 23" or 24" tall Corpus backrest.</i>	276.00	

OPTIONAL ITEMS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I103070-99-0	UT Amp. Support Pad (H) w/ Mesh Cover - (1 Each) <i>7"W x 7"T Curved Pad. Must also select PN I10553.</i>	165.00	E1020
<input type="checkbox"/> I103071-99-0	UT Amp. Support Pad (D) w/ Mesh Cover - (1 Each) <i>8"W x 8"T Flat Pad. Must also select PN I10553.</i>	165.00	E1020
<input type="checkbox"/> I10553	Adj Removable - Amp Support Hardware (1 Each) <i>Please indicate if you would like the amputation support mounted on the right or left side of the seat frame: Mount Amp Suppt on Left: _____ Mount Amp Suppt on Right: _____</i>	280.00	
<input type="checkbox"/> I106104-99-0	UT Hip Suppt (B) w/ Mesh Cover - High (Pair) <i>4.5"W x 3.5"T Pad w/ 4" Tall Mounting Bracket. Must also select PN I10550.</i>	288.00	E0956
<input type="checkbox"/> I106103-99-0	UT Hip Suppt (A) w/ Mesh Cover - High (Pair) <i>6"W x 5.5"T Pad w/ 4" Tall Mounting Bracket. Must also select PN I10550.</i>	288.00	E0956
<input type="checkbox"/> I103094-99-0	UT Thigh/Hip Suppt (J) w/ Mesh Cover - High (Pair) <i>6.5"W x 5"T Pad w/ 4" Tall Mounting Bracket. Must also select PN I10550.</i>	288.00	E0956
<input type="checkbox"/> I103095-99-0	UT Thigh/Hip Suppt (C) w/ Mesh Cover - High (Pair) <i>8"W x 3.5"T Pad w/ 4" Tall Mounting Bracket. Must also select PN I10550.</i>	288.00	E0956
<input type="checkbox"/> I102977-99-0	UT Thigh/Hip Suppt (G) w/ Mesh Cover - High (Pair) <i>12"W x 3.5"T Pad w/ 4" Tall Mounting Bracket. Must also select PN I10550.</i>	288.00	E0956
<input type="checkbox"/> I10550	Adj Removable - Thigh Support Hardware (Pair)	551.00	E1028
<input type="checkbox"/> I106762-99-0	Abductor Kit Corpus - Leatherette <i>Must also select PN I10555.</i>	387.00	E0957
<input type="checkbox"/> I10555	Adj Removable - Abductor Hardware (1 Each)	280.00	E1028
<input type="checkbox"/> I105260-99-0	Transfer Handles, Corpus Seat	503.00	K0108
<input type="checkbox"/> I105292-99-0	Push Handles, Corpus Seat	447.00	
<input type="checkbox"/> I106210-99-0	RAM Self-Leveling Cup Holder	85.00	
<input type="checkbox"/> I106806-99-0	RAM X-Grip Phone Holder	85.00	
<input type="checkbox"/> I107100-99-0	RAM X-Grip 10" Tablet Holder w/Swing Away Mount <i>Compatible with most 10" screen tablets with or without a protective case. Includes adjustable swing away mount (I103476-99-0). Customization may be required if ordered with an Omni.</i>	427.00	
<input type="checkbox"/> I107222-99-0	USB Charger <i>Provides up to 1.5A (at 5V) to charge most smartphones and tablets. The charger features an isolated circuit design for improved safety; and by pulling power from the ICS, prevents battery drainage when the chair is powered off. Includes mounting hardware and ICS connector. Please select armrest for mounting, keeping in mind that charger may need to be relocated. Mount on left armrest: _____ Mount on right armrest: _____</i>	212.00	
<input type="checkbox"/> I105805-99-0	Medical Necessities Bag Hooks <i>Please Note: Recline is limited to 165° or less (depending on backrest height) when ordered with 23" or 24" tall Ergo backrest. Custom required if ordered with a ROHO AGILITY backrest.</i>	101.00	K0108
<input type="checkbox"/> I102059-99-0	Medical Necessities Bag <i>Includes hardware to attach bag to backrest. Please Note: Recline is limited to 165° or less (depending on backrest height) when ordering with a 23" or 24" tall Ergo backrest. Custom required if ordered with a ROHO AGILITY backrest.</i>	293.00	

M5 Corpus

Accessories

OPTIONAL ITEMS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I105840-99-0	Bodypoint Monoflex Medium Chest Support Belt Kit <i>18.25"L x 4"W Pad Size. Item will be shipped as a part.</i>	187.00	E0960
<input type="checkbox"/> I105839-99-0	Bodypoint Monoflex Large Chest Support Belt Kit <i>21.5"L x 4.5"W Pad Size. Item will be shipped as a part.</i>	187.00	E0960
<input type="checkbox"/> I105850-99-0	Bodypoint Monoflex X-Lrge Chest Support Belt Kit <i>24.5"L x 5"W Pad Size. Item will be shipped as a part.</i>	187.00	E0960
<input type="checkbox"/> I105262-99-0	Joystick Cutout Tray - 16" W <i>Must also select PN I10556.</i>	401.00	E0950
<input type="checkbox"/> I105263-99-0	Joystick Cutout Tray - 18" W <i>Must also select PN I10556.</i>	401.00	E0950
<input type="checkbox"/> I10843	Small Angle Adjustable Tray <i>Must also select PN I10556.</i> <i>Mount on Left: _____ Mount on Right: _____</i>	309.00	E0950
<input type="checkbox"/> I10556	Adj Removable - Tray Hardware (1 Each)	280.00	
<input type="checkbox"/> I108230-99-0	Permobil Adjustable Tray - 13"W	260.00	E0950
<input type="checkbox"/> I108228-99-0	Permobil Adjustable Tray - 15"W	260.00	E0950
<input type="checkbox"/> I108227-99-0	Permobil Adjustable Tray - 17"W	260.00	E0950
<input type="checkbox"/> I108229-99-0	Permobil Adjustable Tray - 19"W	260.00	E0950
<input type="checkbox"/> I108232-99-0	Permobil Tray Hardware Right Side Adjustable	190.00	
<input type="checkbox"/> I108233-99-0	Permobil Tray Hardware Left Side Adjustable	190.00	
<input type="checkbox"/> I105224-99-0	Oxygen Holder, Corpus	275.00	
<input type="checkbox"/> I105223-99-0	Crutch Holder, Corpus	275.00	E2207

Alternative Drive Systems

ALTERNATIVE PROPORTIONAL JOYSTICK SYSTEMS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10751	Mini-Joystick for Omni - (9-pin connector) <i>Operating Force = 0.5 oz (13 g) Neutral to Full Deflection = 0.2" (5mm)</i>	3,314.00	E2312
<input type="checkbox"/> I103893-99-0	Compact Joystick for Omni - (9-pin connector) <i>Operating Force = 7.8 oz (220 g) Neutral to Full Deflection = 1.1" (28mm) Joystick includes two 1/8" mono jacks for Mode and On/Off. Includes Standard Joystick Knob and 1.75" (42mm) Foam Ball Knob.</i>	1,621.00	E2373
<input type="checkbox"/> I103894-99-0	Compact Joystick LITE for Omni - (9-pin connector) <i>Operating Force = 1.8 oz (50 g) Neutral to Full Deflection = 0.7" (17mm) Joystick includes two 1/8" mono jacks for Mode and On/Off. Includes Standard Joystick Knob and 1.75" (42mm) Foam Ball Knob.</i>	1,834.00	E2373

ALT PROPORTIONAL JOYSTICK MOUNTING HARDWARE:

Part Number	Description	Price	HCPCS Code
NOTE: <i>Please see the PERMOfix Mounting Solutions, within the Alt Drive Accessories section, for additional mounting options.</i>			
<input type="checkbox"/> I104690-99-0	Alt JS Swing Away Mount Kit - Armrest <i>Mount in front of Left Arm: _____ Mount in front of Right Arm: _____</i>	284.00	E1028
<input type="checkbox"/> I107135-99-0	Alt JS / Omni Combo Swing Away Mount Kit - Armrest <i>Used to mount Omni and Alternative Proportional Joystick to the same armrest. Includes Swing Away Omni/Tablet Mount, with a longer mounting rod, two PERMOfix modules, one 3" rod and one 4" rod.</i> <i>Mount in front of Left Arm: _____ Mount in front of Right Arm: _____</i>	537.00	E1028
<input type="checkbox"/> I104143-99-0	Alt JS Adjustable Mount Kit - Chin Boom <i>Swing-Away / Removable Chin Boom mounted on right of backrest shell. Custom charge may be applied if ordering lower backrest heights.</i>	885.00	E1028
<input type="checkbox"/> I10752	Haims Harness for Chin Control Mount, Large <i>For neck width up to 7½".</i>	629.00	E1028

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Alternative Drive Systems

ALT PROPORTIONAL JOYSTICK MOUNTING HARDWARE:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10753	Haims Harness for Chin Control Mount, Small <i>For neck width up to 5½".</i>	629.00	E1028

ALT PROPORTIONAL JOYSTICK ACCESSORIES:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I104904-99-0	Dual Switches for Compact Joystick - Fixed Mount <i>Includes two pushbutton switches mounted on rigid arms. Switches can be used for Mode & On/Off. Switch operation force = 4.5oz (130 g)</i> <i>Mount at front of Joystick: _____ Mount at rear of Joystick: _____</i> <i>Mount at left of Joystick: _____ Mount at right of Joystick: _____</i>	263.00	
<input type="checkbox"/> I104641-99-0	Dual Switches for Compact Joystick -Gooseneck Mount <i>Includes two pushbutton switches mounted on adjustable gooseneck arms. Switches are positioned on Left and Right sides of Compact Joystick. Switches can be used for Mode & On/Off. Switch operation force = 4.5oz (130 g)</i>	474.00	

SIP & PUFF SYSTEMS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10573	Sip & Puff System for Omni <i>Requires Omni Control Module. Includes breath tube kit.</i>	1,773.00	E2325,E2326
<input type="checkbox"/> I10574	Sip & Puff System with Fiber Optic Opti-Stop <i>Requires Omni Control Module. Includes breath tube kit.</i>	2,360.00	E2325,E2326
<input type="checkbox"/> I106807-99-0	Sip & Puff Kit for Total Control Head Array <i>For use with Total Control Head Array. Requires Omni Control Module. Includes breath tube kit.</i>	914.00	E2325
<input type="checkbox"/> I10762	Adjustable Mounting Hrdw - Sip & Puff <i>Required when selecting PN I10573, I10574 or I106807-99-0.</i>	284.00	

PROPORTIONAL FOOT CONTROL:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10767	Proportional Foot Control <i>Mount on Left: _____ Mount on Right: _____</i>	3,379.00	
<input type="checkbox"/> I10766	Adjustable Mounting Hrdw - Foot Control <i>Required when selecting PN I10767.</i>	284.00	

Total Control Head Array

CONFIGURE HEAD ARRAY:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I106805-99-0	Permobil Head Array - 3-Switch System <i>Features an occipital pad sensor and two stainless steel arms configured with proximity sensors. The arms are mounted to the upper attachment points on the head array. Longer arms are also included to extend the sensor adjustment range. ESP recommended. Choose Omni Control Module separately.</i>	4,893.00	E2330
<input type="checkbox"/> I11072	Program Head Array as a 5-Switch System <i>Select additional arms/sensors below and indicate the intended use of each sensor in the Notes & Comments section. Choose Omni Control Module separately.</i>	No Charge	

CHOOSE OCCIPITAL PAD SIZE (REQUIRED):

<input type="checkbox"/> I105920-99-0	Small Occipital Pad for Head Array - 4.25"W x 3"H	No Charge	
<input type="checkbox"/> I105921-99-0	Large Occipital Pad for Head Array - 6"W x 4"H	No Charge	

CHOOSE OCCIPITAL MOUNT (REQUIRED):

<input type="checkbox"/> I10847	Fixed Mount for Head Array Occipital Pad	No Charge	
<input type="checkbox"/> I105936-99-0	Adj. Swivel Mount for Head Array Occipital Pad <i>Enables Occipital Pad to be angled up/down and left/right independent of the lateral arms.</i>	439.00	K0108

CHOOSE HEAD ARRAY MOUNT HARDWARE (REQUIRED):

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Total Control Head Array

CONFIGURE HEAD ARRAY:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I105927-99-0	Stealth TWB480 Backrest Mounting Hdwr with Links <i>Please select the length of the vertical stem below: Standard length (10"): _____ Short length (6"): _____</i>	293.00	E1028
<input type="checkbox"/> I105941-99-0	Stealth TWB480 Backrest Mnt Hdwr with Flipback	473.00	E1028
<input type="checkbox"/> I105925-99-0	Stealth HMO475 MultiAxis Backrest Mounting Hdwr	260.00	E1028
<input type="checkbox"/> I106319-99-0	Stealth TWB480 Backrest Mnt Hdwr w SubOcptl Mount	508.00	E1028
<input type="checkbox"/> I106282-99-0	Stealth 600 SubOccipital Pad - 8.5" W x 2.75" H <i>Must select when PN I106319-99-0 is ordered.</i>	104.00	K0108

SELECT ADDITIONAL LEFT ARM PACKAGE (OPTIONAL):

<input type="checkbox"/> I10976	Add Left Lateral Arm w Proximity Sensor <i>Choose Lateral Arm Adjustment Range: Short (5.5" - 10"): _____ Long (5.5" - 14"): _____</i>	630.00	
<input type="checkbox"/> I10977	Add Left Lateral Arm w Egg Switch <i>Choose Lateral Arm Adjustment Range: Short (5.5" - 10"): _____ Long (5.5" - 14"): _____</i>	515.00	
<input type="checkbox"/> I10978	Add Left Lateral Arm w Pad (No Sensor or Switch) <i>Choose Lateral Arm Adjustment Range: Short (5.5" - 10"): _____ Long (5.5" - 14"): _____</i>	420.00	

SELECT ADDITIONAL RIGHT ARM PACKAGE (OPTIONAL):

<input type="checkbox"/> I10979	Add Right Lateral Arm w Proximity Sensor <i>Choose Lateral Arm Adjustment Range: Short (5.5" - 10"): _____ Long (5.5" - 14"): _____</i>	630.00	
<input type="checkbox"/> I10980	Add Right Lateral Arm w Egg Switch <i>Choose Lateral Arm Adjustment Range: Short (5.5" - 10"): _____ Long (5.5" - 14"): _____</i>	515.00	
<input type="checkbox"/> I10981	Add Right Lateral Arm w Pad (No Sensor or Switch) <i>Choose Lateral Arm Adjustment Range: Short (5.5" - 10"): _____ Long (5.5" - 14"): _____</i>	420.00	

Alt Drive Systems Setup

CHOOSE OMNI (REQUIRED):

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I108396-99-0	OMNI2 Control Module for R-net <i>Two-section design features 3.5" VGA high resolution display, USB charger port, built in IR control and integrated Bluetooth technology for control of up to 4 Bluetooth devices. Must also select mounting hardware below. Please specify which type of alternative drive input device you will be using. Input Device: _____ Not available until after November 30th 2018.</i>	1,887.00	
<input type="checkbox"/> I103476-99-0	Adjustable Swing-Away Hardware - Omni/Tablet <i>Mount in front of Left Arm: _____ Mount in front of Right Arm: _____</i>	284.00	

CHOOSE MOUNTING POSITION OF SEAT CONTROL SWITCHBOX:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I10080	Mount Seat Control Switchbox on Backrest	No Charge	

Alt Drive Accessories

PERMOFIX MOUNTING SOLUTIONS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I106655-99-0	PERMOfix UniTrack Fixed Mount Kit <i>Includes two base joints, two 4" rods and one 8" rod.</i>	286.00	
<input type="checkbox"/> I106656-99-0	PERMOfix UniTrack Removable Mount Kit <i>Includes quick release mount and thigh support hardware, two base joints and three different length rods.</i>	502.00	
<input type="checkbox"/> I106657-99-0	PERMOfix UniTrack Swing Away Mount Kit <i>Includes PERMOfix Swing Away module, two base joints, one 2" rod and one 4" rod.</i>	719.00	

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Alt Drive Accessories

PERMOFIX MOUNTING SOLUTIONS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I105907-99-0	Proximity Sensor + Swivel Assembly <i>Only available with the Total Control Head Array. Swivel assembly allows sensor to be mounted with PERMOfix or directly to lateral arm of Total Control Head Array. Since Proximity Sensors require power, they CANNOT be used as On/Off switches.</i>	363.00	E1028
<input type="checkbox"/> I105919-99-0	Egg Switch + Swivel Mount Assembly <i>Swivel assembly allows switch to be mounted with PERMOfix or directly to lateral arm of Total Control Head Array.</i>	245.00	
<input type="checkbox"/> I105912-99-0	Solid Oval Pad + Swivel Assembly <i>Swivel assembly allows pad to be mounted with PERMOfix or directly to lateral arm of Total Control Head Array.</i>	148.00	
<input type="checkbox"/> I106675-99-0	Oval Plate + Swivel Assembly - No Switch <i>Blank plate provides mounting option for Micro Lite, Buddy Button or other switch options. Swivel assembly allows pad to be mounted with PERMOfix or directly to lateral arm of Total Control Head Array.</i>	130.00	

OPTIONAL ITEMS:

Part Number	Description	Price	HCPCS Code
<input type="checkbox"/> I101769-99-0	Microlight Switch Qty: _____	198.00	
<input type="checkbox"/> I101767-99-0	Buddy Button Qty: _____	167.00	
<input type="checkbox"/> I106293-99-0	Egg Switch Black Qty: _____	167.00	
<input type="checkbox"/> I101771-99-0	Mini Cup Switch Qty: _____	167.00	
<input type="checkbox"/> I107500-99-0	Proximity Switch Qty: _____	662.00	
<input type="checkbox"/> I107495-99-0	Mini Joystick 5 Switch OC for Omni - (9-pin)	718.00	
<input type="checkbox"/> I107498-99-0	Touch Contact with CR2032 Battery Qty: _____	408.00	
<input type="checkbox"/> I10772	Dome Switch, Backrest Mnt w Gooseneck Qty: _____ <i>Mount on Left: _____ Mount on Right: _____ Mounts at top of backrest shell. Custom charge may be applied if ordering with short backrest heights Kit Includes: One PERMOfix joint with Flat Plate, two PERMOfix joints with 45° swivel adjustment, one 6" rod, one 8" rod and one 9" gooseneck switch with 50" cable and mounting clamp.</i>	524.00	
<input type="checkbox"/> I10846	Dome Switch, Backrest Swg Awy Mnt w Gsneck Qty: _____ <i>Mount on Left: _____ Mount on Right: _____ w 90° Swing-Away Function. Mounts at top of back. Custom charge applies if ordered with short back. Kit Includes: One PERMOfix joint with Flat Plate, one PERMOfix joint with 45° swivel adjustment, two 6" rods, one 90° Swing-Away joint, one 9" gooseneck switch w 50" cable and mounting clamp.</i>	775.00	K0108
<input type="checkbox"/> I105935-99-0	3.5mm Ext. Cable for Sensor/Switch, 0.3m Long	33.00	
<input type="checkbox"/> I105931-99-0	3.5mm Ext. Cable for Sensor/Switch, 1m Long	36.00	
<input type="checkbox"/> I105932-99-0	3.5mm Ext. Cable for Sensor/Switch, 2m Long	42.00	
<input type="checkbox"/> I105933-99-0	3.5mm Ext. Cable for Sensor/Switch, 3m Long	46.00	
<input type="checkbox"/> I105934-99-0	3.5mm Y-splitter Cable for Sensor/Switch <i>Allows two Proximity Sensors/Mechanical Switches to connect to the same direction jack.</i>	36.00	

Additional Order Instructions (for Permobil):

Notes & Comments (not for Permobil):

Chair Order Policy:

You are highly encouraged to contact Permobil Sales with ANY questions regarding proper completion of our order forms at 1-800-736-0925. The order cannot be processed without the following:

- A client name or code, the client's measurements, the client's weight
- The order form must also be signed by a person authorized by your company to acknowledge the items selected. Permobil, Inc. is not responsible for configuration or size discrepancies resulting from customer errors on the order form.
- Order confirmations will be provided by Permobil summarizing the items selected. Please review this carefully.
- Once the order is shipped, any changes are subject to the returns policy and may be prohibited.

Order Acknowledgement:

I, _____, am an agent of the medical equipment provider named on this order form and I have the authority to contract for the purchase of powered wheelchairs and related parts on behalf of said provider. I acknowledge that I have reviewed this order and that it is complete and accurate to the best of my knowledge. I further acknowledge that any changes to this order after submission of this order form are subject to the returns policy and may carry additional charges.

Signed: _____

Printed Name: _____

Title: _____

Date: _____

NOTE: All specifications and prices are subject to change without notice. Please note that prices displayed are only valid if ordered with the wheelchair. Any parts ordered for service or future alterations will carry different pricing and warranty. *The HCPCS codes provided are not intended to be billing or legal advice, rather our interpretation of the code definitions. Use of the codes does not ensure coverage or payment for the item. For coverage information, verify the policy of the appropriate payer.*