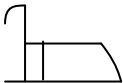

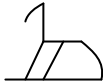
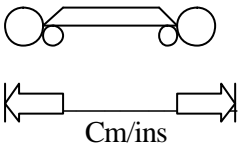




Surgical Engineering Qld Pty. Ltd.

Prescription Form

218 Holmes St. Brighton, 4017 Qld AUSTRALIA Ph/Fax (07) 3869 1919 Inter +61 7 3869 1919
 Manuf Light-Weight Wheelchairs, Handcontrols, Sports Wheelchairs Since 1970.

Client Name: _____ **Therapist Name:** _____
Address: _____ **Ph:** _____
Ph: _____ **Date Ordered:** _____
Ordered By: _____ **Financed By:** _____

WHEELCHAIR TYPE			
K.I.S. MK I <input type="checkbox"/>	K.I.S. MK II <input type="checkbox"/>	KIDZ Chair <input type="checkbox"/>	Getabout <input type="checkbox"/>
			
Rigid <input type="checkbox"/>	Fold <input type="checkbox"/>	Grow <input type="checkbox"/>	Tuck Front <input type="checkbox"/>
Fold Down Back <input type="checkbox"/>			
Seat Width  Cm/ins	Leg Length _____ Cm/ins	Seat Depth _____ Cm/ins	Back Height _____ Cm/ins
BRAKE HANDLES Long _____ Short _____ High Mount _____ Low Mount _____		FOOTPLATES Fixed _____ Split _____ Single _____ Swinging _____ Detachable _____ Heavy Duty _____	
REAR WHEELS (All quick release) 20 _____ 22 _____ 24 _____ 26 _____ x 1 ^{3/8} _____ 1.75 _____ pneumatic _____ m.c.p. _____		PUSH RIMS (All S/S) Capstan _____ Rubberised _____	
FRONT WHEELS 5 x 1 solid _____ 6 x 1 solid _____ 6 x 1 1/4 m.c.p. _____ 7 x 1 1/4 m.c.p. _____ rollerblade _____ 6 x 1 1/4 pneu _____ 8 x 1 1/4 pneu _____ 8 x 2 pneu _____		UPHOLSTERY Cordura Black _____ Mesh Black _____ Vinyl Black _____ F.O.P. Seat _____ Flat _____ Wedge _____ F.O.P. Back _____ Flat _____ Curved _____	
ARMRESTS Standard _____ Desk _____ Adjustable _____ Height _____		POLYCARBONATE TRAY Fitting onto armrests _____ own fittings _____ height _____	
HIP PROTECTORS Cloth _____ Cloth with aluminium strip _____ Polycarbonate  _____  _____			

Frame Colour: _____
Seat ht front _____ **Seat ht or angle rear** _____
Extras. _____

