

USA ORDER FORM HP2 BACKREST HCPCS E2613 / E2614



Date :	P.O.#:			
Made for (client) Last name:	First name:			
Ordered by :				U
Establishment :		CONFIRM ORDER BY E-MAIL	Yes	No
Address :		SUBSCRIBE TO PHYSIPRO NEWSLETTER	Yes	No
Phone :	Fax :	YOUR EMAIL ADDRESS		

INCLUDED : Aluminum backrest, cushion and 2 point anchoring system with quick release. **FOAM CUSHION:** $\frac{1}{2}$ " Sun-Mate Soft, $\frac{1}{2}$ " Viscose and $\frac{3}{8}$ " AeroLite

	НР2 ВАСК	Product#	HCPCS	,		DESCRIPTIO	N			MSRP	
		☐ HPP	E2613	Less than 2	22" width					\$652	
		П НРР	E2614	22" or 26"	width					ćco 4	
										\$694	
	BACKREST SI	ZE CHOICE (SEE TAI	BLE 1, PAG	e 3 for more i	COVER COLOR CHOICES						
CHOICE	size (W x H)	WIDTH BETWE	EN ASS	OCIATED CHAIR	EXTENSION OPTION	Produence	<u></u>	(Ref.)	HP1C	HP2C	
		THORACIC SUPP		WIDTH	\$32			Тор	Black	Red	
	12" x 12"		:	12" to 13"	14"			Bottom	Black	Black	
	12" x 14" 14" x 14"							CHOICE			
	14 x 14 14" x 16"	9" to 11 ½'	9" to 11 ½" 14"		16"	Extra cover with in	itial purchase	\$203			
	14 x 10 16" x 16"					CH	DICE OF BACK (UTOUT IN THE	COVER		
	16" x 18"			16" to 17"	18"						
	16" x 20"			10 10 17		Permana					
	18" x 16"					Н 🖌 🖌	00	П нро1		П нро2	
	18" x 18"	13" to 15 ½	"	18" to 19"	20"			\$23		\$23	
	18" x 20"	_									
	20" x 16"					Without space in t cover for the	cover for	the	Cover ba Chest Su	ck cutout oport	
	20" x 18"	15" to 17 ½	15" to 17 ½"		N/A	headrest support headrest support Physipro does not warrant the use of headrest support oth					
	20" x 20"					those proposed	warrant the us	e of nedarest	support of	ner than	
EXTENS	ION OPTION						SACRO-LUM	BAR CORRECTO	R*		
	4	Extend width b	oy one in	ı.		D	Width: 9½"	□ or 7½"			
		Please refer to to	able 1 for	depth adjust	tment.	T	Product #	Thic	kness	Height	
0							D3410		1"	8"	
Extension P	Extension Plate					н	D3415	1	1⁄2"	10"	
			W	D3420 🗖		2"	12"				
EXTRA MEMORY FOAM LAYER The combination of various foams densities provide						*Choose this optic	n at no extra d	harge			
		varying leve			onac						
□ HP	Y Cushion Cu	stomization Fee.			\$58						
	0093	Temper T-36 1"			\$190	-					
U VR10	0073	Viscose 1"			\$56	1					
U VR10	0111	Temper T-36 ½".			\$93	1					

VR10074

Viscose 1/2"......\$35



ORDER FORM HP2 BACKREST HCPCS E2613 / E2614

гптэ				псрез) EZ013 / EZ	.014						
LATERALS (PLE	ASE CHOOSE BET	TWEEN THE F	OLLOWING COI	NFIGURATIONS)							HCPCS	MSRP
	🗌 Withou	ut thoracic	support								N/A	N/A
Description											HCPCS	MSR
	Adjustable (cushion & co included)		Pediatric Right HPT001D Left HPT001G	x-small Right HPT002D Left HPT002G	Small Right HPT003D Left HPT003G	☐ Righ ☐ Left M e	edium 4½' ht HPT0040 HPT0040 edium 5½' ht HPT0060 HPT0060		Right Left Lar Right	ge 4½" HPT005D HPT005G ge 5½" HPT007D HPT007G	E0956	\$68 each
	Swing-aw Adjustable (cushion & co included)	-	Pediatric Right HPTR001D Left HPTR001G	X-small Right HPTR002D Left HPTR002G	Small Right HPTR003D Left HPTR003G	☐ Righ ☐ Left M a	edium 4½' ht HPTR004 HPTR004 edium 5½' ht HPTR006 HPTR006	4D 4G 6D	Right Left Lar Right	ge 4½" HPTR005D HPTR005G ge 5½" HPTR007D HPTR007G	E1028 + E0956	\$157 each
REF	ERENCE TAB	LE—latera	l sizes <i>(meas</i>	urements inc	lude cushion	ning)				PAD OPTIO	NS	
Pediatric	X-small		Small	Small Medium		Large						
Dptions				ω		10,		H			H +	
S үмвіо	PRODUCT#		Desci	RIPTION		HCPCS	MSRP	S	UNMA	ΓΕ ΟΥΝΑΜΙΟ	-RESIN U	JNIT
	□ AT5450 This headrest support, made of aluminum, is light, ensures safety, and allows for adjustment to a variety of positions.			ty, and ty of	N/A	\$248	Extra	soft	1/2 unit □ #BP-0.50		-	
PAD	PRODUCT#		Desci	RIPTION		HCPCS	MSRP	☐ #BP-1U-		XS	\$16	
	□ AT5000	7"x 4"				N/A	\$90) Soft 1		1/2 unit #BP-0.5U-S 1 unit #BP-1U-S		\$10
	□ AT5005					N/A	\$90					
	□ AT5010	9"x 6"				N/A	\$90					\$16
NOTES												

The HCPCS CODES provided are based on code verification through PDAC or our interpretation of the code definitions. The use of HCPCS CODES does not ensure coverage or payment. For coverage information, verify the appropriate payer's coverage policy.



Please note that it is unnecessary to send page 3 when ordering.

SPECIFICATION TABLE

Table 1 - HP2 Setup Chart— Including a 1" cushion

HP2 backrest width External width of the wheelchair cane	12"	14"	16"	18"	20"	Technical diagram
12"	- 1" to + 2½"					
13"	- 1½" to + 2"					Backrest
14"	OPTION* 2" to + 1½"	- 1" to + 2½"				Adjustment (+)
15"		- 1½" to + 2"				
16"		OPTION* - 2" to + 1½"	- 1" to + 2½"			
17"			- 1½" to + 2"			
18"			OPTION* - 2" to + 1 ½"	- 1" to + 2 ½"		$\langle \rangle_{0}$
19"				- 1½" to + 2"		
20"				OPTION* - 2" to + 1½"	- 1" to + 2½"	
21"					- 1½" to + 2"	

*OPTION, adjustment extension