

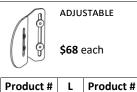
ORDER FORM VALEO BACK



Date :		P.O.#:									
Last name:			First name:		Valec	TM .					
Ordered by :					PHYSIPR	0					
Establishment	:				CONFIRM ORDER BY E-MA	IL	Yes	No 🗌			
Address :					SUBSCRIBE TO PHYSIPRO N	IEWSLETTER	Yes	No 🗌			
Phone :			Fax:		YOUR EMAIL ADDRESS						
		wed	ciple postural componen ge can be easily installed detachment for folding	. The new 4 po	oint quick release hardw	vare system		;			
		BACK CHOICE)		COVER OPTIONS						
D6000: Standar				VP1CC: Standard Cover n/c D5212: Lycra Black n/c VP1C: Extra Cover Air knit Black \$203 D5212: Extra Cover Lycra Black \$203 D5213: Incontinent Cover \$90							
	I										
Сноісе	BACK SI (W X F	THE LATERAL		ASS	OCIATED CHAIR WIDTH	Түре О	F WHEELCI	HAIRS			
	10" x 1	6.5" to 8.5"	3.5" to 11"		10" and 11"	ı	Pediatric				
	12" x 1	4" 8.5" to 10.5	5.5" to 13"		12" and 13"	Pediatric					
	14 X 16		7.5" to 15"		14" and 15"		Adult				
	16" x 1	8" 12.5" to 14.5	9.5" to 17"		16" and 17"		Adult				
	18" x 1 18" x 1 18" x 2	8" 14.5 to 16.5	" 11.5" to 19"		18" and 19"		Adult				
			13.5" to 21"		20" and 21"		Adult				
CUSTOM BACKREST SIZE											
CUSTOMIZATION	N FEE \$12	6									
width											
HEIGHT "											

mounting hardware angle adjust ment choice **TOP** 0° Fixed stabilizer Standard 5° D3345 For 1" diameter tube 10° For 7/8" diameter tube D3346 **BOTTOM** For 3/4" diameter tube D3347 Standard 0° 5° 10° cushion choice standard foam composition Additional customization fees apply in addition to the price of the foam. VPZ: Urethane 1 ½" (N/C) Please indicate the letter (A, B, C) to determine your foam selection. (refer to the figure) vpu: custom foam overlay \$126 Choice of foam (for customization only) ABC VR10084C Urethane ½" \$12 SBS-5 Stimulite 1" \$291 VR10076 Urethane 1" VR10110C Sunmate soft ½" \$51 VR10088 Urethane 1 ½" \$35 VR10091C Sunmate soft 1" \$87 VR10074 Viscose ½ " \$35 VR10111C Temper T36 ½" \$95 VR10073 Viscose 1" \$55 VR10095C Temper T38 1" \$194 VR10085C Latex 1" \$32 **FIPS** Sunmate extra-soft ½ unit: BP-0.5U-XS \$175 1 unit: BP-1U-XS \$279 ½ unit: BP-0.5U-S \$179 Sunmate soft 1 unit: BP-1U-S \$287 Sunmate medium ½ unit: BP-0.5U-M **\$174** 1 unit: BP-1U-M \$298 Note: You must order a Lycra cover to utilize FIPS. POSTURAL COMPONENTS wedge lumbar support D3405 D3395 D3385 THORACOLUMBAR WEDGE LUMBAR WEDGE THORACIC WEDGE \$30 \$24 \$24 LEFT RIGHT **THICKNESS** THICKNESS 1" 1" **THICKNESS** 1 ½" 1 ½" 1" 2" 1 ½" #1: **D3410** L9½" P:1" H: 10" \$39 2" #2:**D3415** L9½" P: 1 ½" H: 11" \$39 WIDTH: 4" HEIGHT: 8" HEIGHT: 4" #3: **D3420** L 9 ½" P: 2" H: 12" **\$39 HEIGHT:** determined based on the WIDTH: determined based on the WIDTH: determined based on size of the backrest size of the backrest the size of the backrest 2

HARDWARE OPTIONS



DVRG



FIXED TO THE WHEELCHAIR CANE \$144 each (fixed hardware only) Will properly fit 3/4", 7/8" or 1" tubing diameter.

Product #	L	Product #	R
DVMG		DVMD	

PAD OPTIONS

R

DVRD

