

### Seat Depth Measurement

- Measure from the deepest point at bottom of back straight forward for actual (molded) seat depth
  - If you have molded a posterior pelvic wall please request 1" added to rear of seat
  - If you need to add seat depth because the client was longer mark in box to add
- Make sure you mark actual finished dimension in box provided





### Seat Depth Measurement

**MEASUREMENTS** 

SEAT TO BACK AN			MOLDED DIMENSION	INCREASE	DECREASE	FINISHED	DIMENSION
SEAT	SEAT DEPTH	l	18	+ 2	-	20	
		R	17	+	-	17	EXTEND

#### SIGNATURE-FIT ORDER FORM

TECHNICIAN NAME

PATIENT NAME/NUMBER

BACK FILE NAME

O TRIAL FIT O TRIAL FIT W/LINER & COVERS O FINISH CUSHION COMPLETE O VCO FOAM CARVING ONLY

\*INFORMATION ON THIS PAGE REQUIRED

ALL OTHERS OPTIONAL

11861 EAST MAIN ROAD NORTH EAST, PA 16428 Toll Free 1-866-PRM-REHAB P. 814.725.8731

F. 814.725.2934

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**MEASUREMENTS** 

**CLIENT INFO** 

COMPANY NAME

TECHNICIAN PHONE

SEAT FILE NAME

SEAT TO BACK AN	GLE				MOLDED DIMENSION	١	INCREASE DECRE	ASE FI	NISHED	DIMENSION	١		
SEAT	SEAT DEPTH  ADDUCTOR WALL			L +			-						
				R		+	-			EXTEND			
				L		+	-			+	☐ MA	ATCH TO RIGHT	
				R		+	-			+	□ MA	ATCH TO LEFT	
	ABDI	JCTOF	1		☐ AS MOLDED	+	-			+			
					O LOOSE FIT (1/4"	Std.)							
					O BETWEEN RAILS								
	T-NUT FOR HARDWARE			O NONE O	PRM:	□ Full Row □ Partial Row	fy)		0 7/8"	0 1"			
	VELCRO SEAT ATTACHMENT				T O YES O	NO							
SEAT TO	SEAT TO BACK HEIGHT (to be to					l of s	eat to top of back):		_ GAF	):		_	
BACK	BACH	( HEIC	HT	MOLDED DIMENSION +			-		FROM	TO	(from b	ottom up)	
	LATE	RAL D	EPTH	ι		+	-				☐ MATCH TO RIGHT		
	R				+	-		$\square$ match to left					
	FIT	0	STANDARI	) FIT	O LOOSE FIT (1/4"	Std.)							
	MOUNT O ON RAILS O				O BETWEEN RAILS								
	T-NU	T FOR	HARDW!	RE	O NONE O	PRM:	□ Full Row □ Partial Row	O OTHE	fy)		0 7/8"	01"	
	T-NUT FOR HEADREST				O NONE O	PRM	OTHER (specify)						

## Seat to Back THE POWER OF PRECISION Height Measurement

- Seat to back height is measured from the lowest point at rear of seat to the top of the back
  - If you have a gap between the seat and back and want it filled in you must tell us to add to the bottom of the back
  - Increases requested to back height will be added to the top unless specified
  - If you want some added to top and some to bottom communicate what you would like.
  - Be sure to fill in the actual back height measurement on form



# Seat to Back Height THE POWER OF PRECISION Measurement

HE POWER (	OF PRECISION	CLIENT	SIG	NATURE-FIT ORDER FOR		GE 1 OF 2 REQUIRED		
		PO#		DATE				
		COMPANY NAME		TECHNICIAN NAME				
		TECHNICIAN PHON	NE	PATIENT NAME/NUMBER	<b>PKM</b>	•		
		SEAT FILE NAME		BACK FILE NAME	THE POWER OF PRECISI	ION		
		CHAIR MAKE		CHAIR WIDTH	11861 EAST MAIN ROA NORTH EAST, PA 16428			
			FIT O TRIAL FIT W/LINER & COVERS	O FINISH CUSHION COMPLETE O VCO FOAM CARVING ONLY	Toll Free 1-866-PRM-REH P. 814.725.8731 F. 814.725.2934	HAB		
		SEAT TO			WWW.PRMREHAB.COM	l		
	VELCKO JERI RITRCHIMEN	BACK AI	NGLE: MOLDE	D DIMENSION INCREASE DECREASE I	FINISHED DIMENSION			
SEAT TO	BACK HEIGHT (to be	taken fr	om rear wall of	seat to top of back):	18	GAP:	1	
BACK	BACK HEIGHT		DIMENSION 16 +	1 -		FROM	TO (from	m bottom up)
	LATERAL REPORT	///						
			MOUNT ON RAILS OBE T-NUT FOR HARDWARE	TWEEN RAILS  O NONE O PRM:   Full Row   P Initial Row O OTH	1" to bott	om o	f back	7
		SEAT TO	VELCRO SEAT ATTACHMENT  BACK HEIGHT (to be taken	YES ONO TOP	Actual heio	ght of	17"	
		BACK		ED DIMENSION + -	FROM TO (from bottom up)			_
			LATERAL DEPTH L	+ -	☐ MATCH TO F			
			FIT O STANDARD FIT O LO	DOSE FIT (1/4" Std.)				
			MOUNT ON RAILS OBE	TWEEN RAILS				
			T-NUT FOR HARDWARE	O NONE O PRM:   Full Row   Partial Row   O OTH	IER (specify) 0 7/8"	01"		
			T-NUT FOR HEADREST	O NONE O PRM O OTHER (specify)				

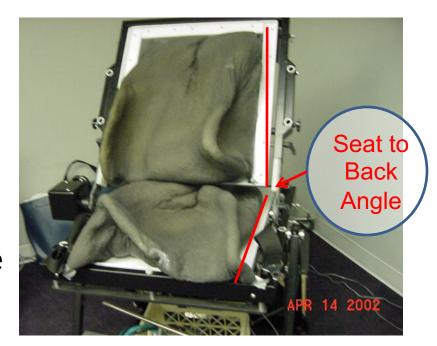


#### Seat to Back Angle

## Take Seat to back angle measurement from

molding frame

 We recommend setting the seat to back angle for the mold at an angle the chair and the client can accommodate, this will make mounting the system in the chair easier





## Seat to Back Angle

CLIENT	INFO	PAGE 1 C *INFORMATION ON THIS PAGE REQUI ALL OTHERS OPTIONAL.										
PO#			DATE				, 22 0111210 0111010					
COMPANY NAME			TECHNICIA	N NAME				DDM				
TECHNICIAN PHONI	i .		PATIENT NA	AME/NUMBER				(PRM)				
SEAT FILE NAME			BACK FILE	NAME			THE POWER OF PRECISION					
CHAIR MAKE			CHAIR WID	П			11861 EAST MAIN ROAD NORTH EAST, PA 16428 Toll Free 1-866-PRM-REHAB					
O TRIAL	FIT O TRIAL FIT W/LINER	& COVE	rs O FINISH CUSHIO	N COMPLETE (	O vco	FOAM CARVING ONLY		P. 814.725.8731 F. 814.725.2934				
<b>MEASUI</b>	REMENTS							WWW.PRMREHAB.COM				
SEAT TO BACK ANGLE: MOLDED DI			MOLDED DIMENSION	INCREASE		DECREASE	FINISHED	DIMENSION				
SEAT	SEAT DEPTH	L		+		-						
		R		+	-	-		EXTEND				

MEASU	REMENTS										,	WWV EFT	п
SEAT TO BACK ANGLE: 105			MOLDED DIMENSION	l	INCREAS	SE .	ı	DECREASE	F	FINISHED	DIMENSI		
SEAT	SEAT DEPTH	L		+		-	-				/8"	0 1"	
		R		+			-				EXTEND		
						ERIERRE	R	+		-		☐ MATCH TO	
						FIT O STANDARD FIT O LOOSE FIT (1/4" Std.)  MOUNT O ON RAILS O BETWEEN RAILS							
						T-NUT FOR HARDWARE O NONE O PRM:     Full Row   E				Partial Row O OTH	IER (specify)	0 7/8"	01"
						T-NUT FO	R HEADREST	O NONE O PRM	O OTHER (spe	ecify)			



#### Junction Issues

#### THE POWER OF PRECISION

- No Gap, Specified Gap (1", 2", or 3")
  - PRM cannot tell if you molded a gap or not because the shapes are captured separately
  - If you want us to add to the bottom of back to fill gap you must let us know
  - Make sure to mark on order form gap distance and if we are to add to bottom of back
  - The amount of gap will effect how we cut angle at rear of seat and bottom of back to obtain proper seat to back angle
  - If you have molded with no gap and want a gap you need to tell PRM to remove from the bottom of back

