# **Raz-AT** (Attendant Tilt) Mobile Shower Commode Chair (MSCC) Evaluation and Medical Justification

Name:	DOB:	Date:
Address:		P:
MD/PA/NP:	email:	P:
Therapist:	email:	P:
Site of Eval:		
Supplier Company:	_ Supplier Contact:	P:
Supplier Email:		
Primary Dx:	Co-morbidities:	
Transfer Status		
Transfers: Number of transfers required for showering,	/ toileting: without MSCC wit	h MSCC
independent min assist mod assist ma	ax assist dependent 1 person as	sist 2 person assist
Transfer Method:		
stand pivot sit / squat pivot sliding board	lift / sling required	
transfer surfaces need to be same height tilt	required to facilitate transfers poste	rior tilt anterior tilt
Comments:		

# **Functional Use of MSCC**

#### Toileting

Bowel management program:	enema	suppository	digital sti	imulation		medication	other
Comments:							
Level of independence:							
Time spent on MSCC for bladder,	/bowel care:					# days/week o	on MSCC:
Seat access required for bowel /	bladder progra	m: Front	Left	Right	Re	ear	
Comments:							

## Shower / Dressing / Other

Body position during shower (tilt/recline/upright):				
Seat access opening required for bathing / shower hygiene program program:	Front	Left	Right	Rear
Comments:				
Time spent on MSCC for showering:		# days/we	ek on MSC	C:
Dressing and other activities performed using the MSCC:				

nobstructed access from bedroom to	bathroom?				
athroom door width:	Is there a roll-in shower	? No	Yes		
nough room to maneuver MSCC in ba	throom? No Yes	Comme	nts:		
				A	Floor to top of toilet bowl
				с	Floor to top of tank
		Ē	└ <b>──</b> ►	D	Floor to top of toilet seat (up)
		(F)	→ •©→	E	Wall to front of toilet
				F	Front of tank to front of bowl
				G	Wall to front of tank
				н	Width of bowl
			*	1	Width of tank
	B A	)		JL	Nearest Obstruction - Left Side
				JR	Nearest Obstruction - Right Side
omments:					

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# Sensation, Pain and Skin Integrity

Sensation: intact impaired absent
Location(s) of impairement / absence:
Comments:
Pressure Management: Able to perform effective weight shift / pressure relief / reperfusion on MSCC? No Yes
Can perform pressure relief lift in chair
Weight shift eg. Lean side-to-side (without risk of falling)?
Requires attendant-operated Tilt Recline
Comments:
Skin Integrity: intact at risk – prolonged sitting impaired scar tissue
current Pressure Injury PI Stage: location(s) / size(s):
other wounds:

# Sensation, Skin Integrity and Pain...cont'd

Hx of Pressure Injury:	No	Yes	Comments:
Hx of Skin/Flap Surgery:	No	Yes	
Location(s)			
Comments:			

Pain Intensity:	(no pain)	0	1	2	3	4	5	6	7	8	9	10	(worst pain possible)
How is pain relieved?													
Comments:													

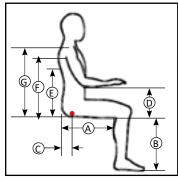
# **Sitting Balance**

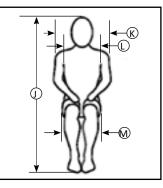
	Able to sit independently in MSCC
	Unable to sit independently (requires tilt, laterals, anterior support, back angle adjustment, tension-adjustable upholstery, etc.)
ſ	Requires support for dynamic movement in MSCC ("hooks" for support to reach perianal area or lower extremities for care)

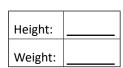
# Posture: (MAT Evaluation)

Pelvic Mobility: Pelvic Rotation:	Left Forward	Posterior Right F		Flexible	to Neutral to Neutral	Change	s in support tolerated					
Pelvic Obliquity: Spinal Mobility:	Left Side Elev Kyphosis Change in su	Lordosis	ight Side Elev Scoliosis red	ated Leans to	Left Leans	s to Right	Flexible to Neutral					
Tonal Influence Pelv				ow Tone	High Tone	Spastic	ity Dystonia	Other				
Tonal Influence Trur	nk: Paralys	is Fla	ccid Lo	ow Tone	High Tone	Spastici	ty Dystonia	Other				
Lower Extremity: Le	eg Position	Neutral	Abduction	Adduo	ction Wind	swept Left	Windswept Right					
Knee issues: Lin	mited Range of	Motion - Sp	ecify:									
Ankle issues: P	lantar Flexion	L R	Dorsiflexio	n L F	lnversion	L R	Eversion L R					
Comments:												
Upper Extremity												
Hand dominance for	Requires armrest for support       Requires supplimentary arm support       Requires flip-up arms for transfers         Hand dominance for bowel therapy and perianal hygiene access       Left       Right         Able to propel MSCC       Able to use wheel locks       Requires wheel lock extensions											
Head Positioning: Pulls to side/rotates			l support equires latera		to hold head up ead support							
Blood Pressure Mar wears binder	-	ession stock	ings use	es medicati	on require	s Tilt re	quires Recline					

#### **Client Measurements**







Left	Right			
"	"	A Buttock / Thigh depth	"	J Top of head
"	"	B Lower leg length	"	K Shoulder width
"	"	C Ischial depth	,,	L Chest width
"	"	D Seat to elbow	,,	M Hip width
"	"	E Seat to Inferior Scapula	,,	Overall width (asymetrical width for windswept legs or scoliotic posture)
"	"	F Axilla		
"		G Top of shoulder		

# Angular Measurements (accomodations required)

<u> </u>		-						
Pelvis-to-thigh (seat-to-back) angle:	Left	>90°	<90°	Right	>90°	<90°		
Thigh-to-calf (knee) angle:	Left	>90°	<90°	Right	>90°	<90°		
Ankle:	Left	>90°	<90°	Right	>90°	<90°		
Comments:								

The Raz Mobile Shower Commode Chair is being recommended to enhance the opportunity for participation in the following Motor-Related Activities of Daily Living (MRADL).

bowel/bladder voiding	perianal hygiene	bathing/showering	dressing/undressing	catheter application
other				

# **Raz-AT Clinical Justification Checklist**

Product Model	Clinical Justification
Raz-AT – Attendant Tilt (400-lb cap)	Required for client's safety as he / she is not a safe, functional ambulator Required for client's safety as he / she is unable to transfer or sit on bath or shower bench Required for client's safety as he / she is unable to transfer or sit on toilet Provide mobile chair between bedroom and toilet / shower Promote independent toileting and showering Provide support during hygiene / shower / bowel / bladder / ADL routines / programs Reduce number of transfers for hygiene / showering / bowel / bladder / ADL routines / programs

### Tilt

Posterior	40° tilt range for pressure reduction	
	Minimize risk of aspiration	
	Decrease respiratory distress	
	Facilitate visual orientation	
	Decrease pain	
	Increase sitting tolerance	
	Facilitate safe transfers with mechanical lift	
	Manage tone / spasticity	
	Assist/maintain postural alignment	
	Maintain vital organ capacity	
	Manage autonomic dysreflexia	
	Manage orthostatic hypotension	
	Blood pressure management	
	Increase independence in transfers	
	Change position against gravitational force on head / trunk	
	Change position for pressure redistribution / cannot weight shift	
	Facilitate postural control	
Anterior	Facilitates standing pivot transfers	

# **Special Frame Configurations**

Frame Width – 16"	Narrower frame better accomodates client's size
Frame Width – 20"	Wider frame better accomodates client's size
Frame Width – 22"	Wider frame better accomodates client's size
Frame Width – 24"	Wider frame better accomodates client's size
Long Seat Frame	Accomodates client's upper leg length
Long Base Frame	Accomodates client's upper leg length Required for stability
Low Frame	Facilitates transfers Allows for foot propulsion between toilet / shower and bedroom

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eats	Page 6 o
IPAS (Ischial Pelvic Alignment System)	IPAS, an exclusive feature on all Raz seats, utilizes adjustable seat mounting brackets that provide 2" fore/aft adjustment. This allows the aperture to be adjusted and optimally positioned around the ITs, to minimize pressure and increase pelvic stability.
Contoured Molded <sup>†</sup>	Stabilize pelvis Improve pressure distribution Appropriately located aperture to help manage sacral sitting Accommodate hygiene management (side cut-outs) Longer depth accomodates taller client (19"D seat)
Visco Foam Interface†	Stabilize pelvisSeat design and materials offer improved immersion, envelopment, and off-loading for optimum pressure redistributionAppropriately located aperture to help manage sacral sitting Accommodate hygiene management (side cut-outs)History of pressure injury Pressure injury present Longer depth accomodates taller client (19"D seat)Side / Rear Access Opening allows client to perform perianal hygiene / self-care Side / Rear Access Opening allows attendant to perform perianal hygiene / self-care
E&J Replica†	Stabilize pelvis Seat design and materials offer improved immersion, envelopment, and off- loading for optimum pressure redistribution Accommodate hygiene management (deep side cut-outs) Appropriately located aperture to help manage sacral sitting Dependant on old Everest&Jennings teardrop-shaped aperture
Shower Only Seat <sup>+</sup>	MSCC is only required for showering Prevention of wound tearing, post surgery
Seat Support Kit	Allows placement of narrower seat on a wider seat / base frame, avoiding cost of custom seat
Custom Seat <sup>+</sup>	<ul> <li>History of Pressure Injury</li> <li>Accommodate hygiene management</li> <li>Appropriately located aperture to help manage sacral sitting</li> <li>Client requires special length to accommodate client's height</li> <li>Client requires special width to accommodate client's width</li> <li>Unique aperture / seat design to accommodate selfcare</li> <li>Accomodates leg length discrepancy</li> <li>Seat design and materials offer improved immersion, envelopment, and off- loading for optimum pressure redistribution</li> <li>Pressure relief area under existing pressure injury</li> <li>Pressure relief area under site of flap surgery</li> <li>Raised area accommodates pelvic obliquity</li> <li>Accommodate multiple deformities</li> <li>Allows for attendant to perform perianal hygiene from side of chair (insufficient space in roll-in shower for both attendant and MSCC)</li> <li>Side access facilitates self-care</li> <li>Side access facilitates caregiver access to perianal area for hygiene management</li> </ul>

Seats (cont'd)	Clinical Justification
Access Opening Front Access	Accommodate hygiene management Allows for attendant to perform perianal hygiene
Front Bridge	Allows client to transfer laterally without leg falling into front opening
Left Access Right Access	Allows client to perform suppository insertion Allows client to perform digital stimulation and / or manual evacution for bowel movement Allows for client to perform selfcare Accommodate hygiene management Allows for attendant to perform perianal hygiene from side of chair (insufficient space in roll- in shower for both attendant and MSCC)
Rear Access	Eliminate pressure at rear of seat to accommodate coccygeal / sacral pressure injury Eliminate pressure at rear of seat to accommodate surgical site at coccygeal / sacral area Allows for attendant to perform perianal hygiene from rear of chair

# **Back Frames**

Fixed Back Frame (with angle adjustability)	Back angle adjustability accomodates decreased ROM (when hip angle is greater than 90° and non-reducable)
	Increase sitting tolerance (with back support set at 97° and tension-adjustable upholstery optimally adjusted)
	Facilitate postural control (with back support set at 97° and tension-adjustable upholstery optimally adjusted)
	Facilitate safe transfers (with flip-up arm supports)
	Increases trunk stability (at 97° vs 90°)
Adjusta-Back Frame <sup>+</sup>	Tension-adjustable upholstery accomodates client's back shape and provides moderate lateral postural support
	Back angle adjustability accomodates decreased ROM (when hip angle is greater than 90° and non-reducable)
	Increase sitting tolerance (with back support set at 97° and tension-adjustable upholstery optimally adjusted)
	Facilitate postural control (with back support set at 97° and tension-adjustable upholstery optimally adjusted)
	Facilitate safe transfers (with flip-up arm supports with user-operated arm support lock release)
	Increases trunk stability (at 97° vs 90°)
	Height-adjustable arms can be set at an optimal height for the arm supports to carry some
	of client's weight, thereby reducing sitting pressures
	Reduce shoulder subluxation
	Provide support with elbow at 90°
	Having arm supports at optimal height decreases gravitational pull on shoulder joints
	Having arm supports at optimal height improves postural control / trunk support
	Change height / angle of arm supports to facilitate ADLs

Back Frames (cont'd)	Page 8 of 11 Clinical Justification
Reclining Adjusta-Back Frame†	Back angle adjustability accomodates decreased ROM (when hip angle cannot go to 90°) Increase sitting tolerance Facilitate postural control Facilitate safe transfers (with flip-up 2-Point Arm Supports) Increases trunk stability Facilitates catheter insertion Facilitates bathing Blood pressure management Head / neck support Manage tone / spasticity Decrease respiratory distress Decrease pain Height-adjustable arms can be set at an optimal height for the arm supports to carry some of client's weight, thereby reducing sitting pressures Improve circulation Manage bowel / bladder / catheter care, intermittent catheterization, undergarment, change Pressure redistribution – cannot weight shift Maintain muscle length / joint ROM
Back Frame Narrower than Base / Seat Frame	Positions arm supports medially, accomodates client's torso size and provides additional stability for upper body Narrower back frame and improved arm support position assists with repositioning and transfers Arm supports closer to client's trunk allows for a more upright, midline posture
Back Frame Wider than Base / Seat Frame	Back frame that is wider than seat frame supports client's trunk width and size Eliminates the need for the more expensive option of an MSCC with a wider base frame

# **Arm Supports**

Arm Support Locks	Lock arms to allow stabilization for ADLs or transfers
Flat Arm Pad <sup>+</sup>	Requires additional support surface for arms
Molded Arm Trough	Requires additional support surface and positioning for arms Help prevent UE from falling off arm support
Pivoting Arm Mount <sup>+</sup>	Provides clearance for Lateral Thoracic Supports to be swung away for transfers when Molded Arm Troughs are used Provides clearance for arm supports with Molded Arm Troughs to be flipped up for transfers and bathing
Arm Support Spacer Kit†	Accommodate the client's size or specialized arm position Provides improved access for bathing Provides clearance for Lateral Thoracic Supports
2-Point Arm Supports	Keeps Arm Supports parallel for improved positioning of client's arms throughout recline range
Anterior Postural Support Bar	Control tone / spasticity
Pivoting Hand Grips	Allows client to reposition him / herself Increases stabilization of upper body Increases stabilization of UE

# **Foot and Leg Supports**

MFX Footrests (shorter range)	Accommodate client's leg length
Footrest Extension Tubes (longer range)	Accommodate client's leg length
Angle / Depth Adjustable Footplates	Accommodate ankle ROM Accommodate knee ROM
V-Style Foot Support†	Improved manuverability with smaller footprint Facilitates safe lateral transfers
Flip-Back Foot Support <sup>+</sup>	Improved manuverability with smaller footprint
Elevating Leg Supports	Blood pressure management Elevate with recline for showering, catheter access, dressing, or other ADLs Accomodates client's limited knee ROM Helps manage edema when combined with recline
Custom Leg / Foot Support	Accommodate client's leg length Accommodate knee ROM Accomodates windswept deformity Allow feet to go under MSCC base Provide foot support with proper pressure distribution

# Foot and Leg Support Accessories

H-Strap	Prevent legs from falling rearward into frame / casters of MSCC
Calf Strap – Bodypoint Aeromesh	Prevent legs from falling rearward into frame / casters of MSCC Manage flexion contractures
Calf Panel – Bodypoint Aeromesh	Prevent legs from falling rearward into frame / casters of MSCC Manage flexion contractures
Calf Strap – Infection Control	Prevent legs from falling rearward into frame / casters of MSCC Manage flexion contractures Required for ease of cleaning
Heel Loops	Prevent legs from falling rearward into frame / casters of MSCC Manage flexion contractures
Neoprene Footplate Covers <sup>+</sup>	Cover footplates to protect feet from hard edges / pressure injuries Covers footplates to provide additional friction to keep from falling off
Lateral / Medial Offset Foot Support Receivers†	Accomodates abduction Accomodates windswept lower extremities Accomodate foot position on wide chairs
Forward Offset Foot / Leg Support Receivers (mounts)	Accomodates deeper seat Accomodates leg length discrepancy
Residual Limb Support	Provides support and positioning for residual limb Pain management for residual limb Provides protection for residual limb
Foot Support Lock	Locks foot support to prevent movement

<sup>†</sup>exclusive to Raz

Positioning Pads	Clinical Justification	Page 10 of 11
Lateral Thoracic Support <sup>+</sup>	Decrease lateral trunk leaning	
(swingaway)	Accommodate asymmetry	
Left	Control of tone / spasticity	
Right	Safety	
Lateral Pelvic Support <sup>+</sup>	Stabilize pelvis	
(Hip Guides)	Decrease pelvic rotation	
Left	Align pelvis over aperture	
Right		
Medial Thigh Support <sup>+</sup>	Decrease adduction	

Medial Thigh Support† (pommel / adductor)	Decrease adduction Accommodate ROM limitations Accommodate windswept deformity
Lateral Thigh Support† (adductor) Left Right	Decrease abduction Accommodate windswept deformity Position thighs in alignment
Lateral Extension Plate	Allows for lateral thoracic support to be positioned more medially Allows for lateral hip supports to be positioned more medially Allows for lateral thigh supports to be positioned more medially

# **Head Support**

Large Pad	Support during recline Provide posterior head support Provide posterior neck support Accommodate tone / spasticity Improve visual orientation Improve respiration
Offset Interface Plate <sup>+</sup> (offsets headrest laterally)	Accommodate ROM limitations Accommodate asymmetrical head position

## **Pelvic Belt**

Standard Pelvic Belt	Stabilize pelvis in neutral rotation Prevents sliding out of MSCC Required for safety when using chest belt
Bodypoint Pelvic Belt	Stabilize pelvis in neutral rotation Prevents sliding out of MSCC Required for safety when using chest belt
Infection Control Pelvic Belt	Stabilize pelvis in neutral rotation Prevents sliding out of MSCC Required for safety when using chest belt Required for ease of cleaning

# **Chest Belt**

Standard Chest Belt	Provide anterior support to prevent upper body from falling forward
Bodypoint Chest Belt	Provide anterior support to prevent upper body from falling forward
Infection Control Chest Belt	Provide anterior support to prevent upper body from falling forward Required for ease of cleaning

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# **Caster Options**

#### **Clinical Justification**

4" Caster Upgrade	Lowers seat height to facilitate transfers
6" Caster Upgrade	Increases seat height to facilitate transfers Increases seat height to clear ADA toilet
Directional Caster Lock <sup>+</sup>	Assists with steering MSCC

# **Anti-Tipper Options**

Rear Anti-Tippers	Prevents MSCC from tipping backward Stabilizes MSCC
Front Anti-Tippers	Prevents MSCC from tipping forward during forward reach or placing weight on foot support Increased side and forward stability Increased stability for lateral transfers Stabilizes MSCC

#### Other

Whizard© Urine Deflector+	Assists with directing urine stream into toilet Assists with directing urine stream into commode pan
Commode Pan Spacer+	Lowers commode pan for digital stim and hygiene with pan in place

<sup>†</sup>exclusive to Raz

Therapist Name:\_\_\_\_\_\_ Date:\_\_\_\_\_\_ Therapist Signature:\_\_\_\_\_\_ Date:\_\_\_\_\_\_

I concur with the above findings and recommendations of the therapist.

MD/PA/NP:	MD/PA/NP Signature:	Date:
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