



## Ride Custom Systems Shape Capture Check List

**This comprehensive tools and materials check-list will ensure you have all materials needed for capturing the shape of your client for a Ride Custom Cushion and/or Back support.**

- Order Forms (download order forms at [www.ridedesigns.com/orderforms.html](http://www.ridedesigns.com/orderforms.html))
- Tape Measure
- Camera

### **Ride Custom Cushion tools:**

- Ride Custom Evaluator Cushion of appropriate size for Evaluator Based cushions (these are the blue covered cushions that came in your Ride Custom Cushion Starter Kit. Make sure Ride CAM® Wedges are in the front pouch of the Evaluator cover. ):
  - Small (14" W x 14" D)
  - Medium (16" W x 16" D)
  - Large (16" W x 16" D)

**Note:** Evaluator cushions are used to determine if a standard off-loading contour will safely and correctly support a person. If successful, build a Ride Custom Cushion around this contour by filling out the order form and fax to Ride Designs. If unsuccessful, then proceed to capture the person's shape in the impression foam simulator.

- Box of Ride Gauges
- Ride Custom Cushion impression foam simulator of appropriate size for Simulator Based cushions:
  - Small for hip widths less than 14"
  - Medium for hip widths less than or equal to 17"
  - Large for hip widths greater than or equal to 18"
- Box of simulator refresh kits, same size as simulator selected.
- 2" hook Velcro to attach simulator/evaluator to wheelchair.

### **Ride Custom Back tools:**

- Back kit:
  - Inside your original kit you will find everything needed:
    - Inner spandex bag with outer plastic bag installed.
    - Vacuum pump
    - Additional outer replacement bags
    - A zip-loc bag with electrical tape, shipping label, order forms, and indelible pencil (make sure it is sharpened).
    - M-L measuring stick
- 1 Box of splinting material and 2 rolls of plaster for each shape to be captured.
  - Note: A pre-paid shipping label, new outer bag, pencil, splinting material and 2 plaster rolls accompany every Ride Custom Back you order.
- Roll of high quality masking tape for quick patch of the occasional bag tear.
- Bucket for plastering
- Examination gloves for use during plastering.
- Tarp to protect floor.
- Scissors for removing used outer bags.



**Ride Designs®**  
a branch of Aspen Seating, LLC  
  
4211-G South Natches Court  
Sheridan, Colorado 80110

toll-free 866.781.1633  
phone 303.781.1633  
fax 303.781.1722

# Face Sheet



## Ride Custom Systems Face Sheet

(Please fill in one face sheet per client order)

Client First Name / Last Initial \_\_\_\_\_

### Components ordered:

Please attach appropriate order form for each component

- Ride Custom Cushion**
  - Simulator (shape capture) based,  
Simulator number: \_\_\_\_\_
  - Evaluator based
- Ride Custom Back**

Account #: \_\_\_\_\_

PO # \_\_\_\_\_

Date \_\_\_\_\_

### 1. General Information

Supplier \_\_\_\_\_

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

### Ship To (if different from above)

NOTE: Ride Custom Systems must be fitted by a Ride Certified provider, and WILL NOT be drop shipped to end users.

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

### Referral Source

Facility \_\_\_\_\_ Clinician Name \_\_\_\_\_

Phone # \_\_\_\_\_ E-mail \_\_\_\_\_

### 2. Client Information

WARNING: Caution should be exercised when capturing shapes in Ride Simulators for people with osteoporosis, bone cancer, history of pathological fracture, osteogenesis imperfecta, or any brittle bone condition.

First Name/Last Initial \_\_\_\_\_ M F

Diagnosis \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Hip width: \_\_\_\_\_" Leg length: Left \_\_\_\_\_" Right \_\_\_\_\_"

### 3. Mobility Base Specifications

Wheelchair Make \_\_\_\_\_ Model \_\_\_\_\_

Frame Width \_\_\_\_\_" Depth \_\_\_\_\_"

NOTE: Ride Designs does not recommend use of Ride Custom Cushions on wheelchairs with **ERGO FRAMES**.

### 4. Please fill in and attach the appropriate order form for each Ride Custom Component ordered.



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**Ride Custom Back Support**

Client First Name / Last Initial \_\_\_\_\_

**NOTE:** This order form must be accompanied by a Ride Custom Systems Face Sheet  
Prices effective March 1, 2009

**Ride Custom Back (Model #: RCB100)**

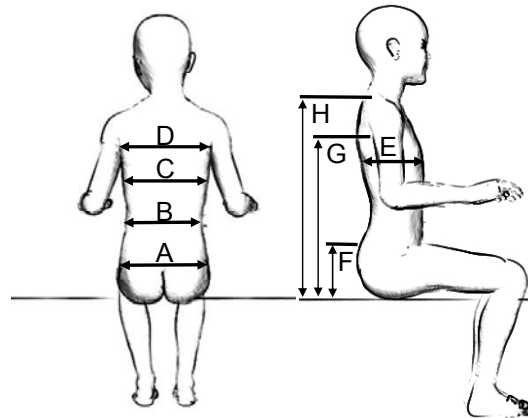
Includes custom ventilated contoured seat back shell, with breathable composite foam interface insert, and spacer fabric cover.

Ride Custom Back (Model #: RCB100) FOR COMMODOE BACK

Includes custom ventilated contoured seat back shell and spacer fabric cover.

**Client Measurements:**

- A. Trochanters \_\_\_\_\_"
- B. Waist \_\_\_\_\_"
- C. Mid-Thorax \_\_\_\_\_"
- D. Axilla \_\_\_\_\_"
- E. A-P Mid-Thorax \_\_\_\_\_"
- F. PSIS height \_\_\_\_\_"
- G. Axilla height \_\_\_\_\_"
- H. Top of shoulder \_\_\_\_\_"



**Before transferring client from simulator, please complete the following:**

- Photos of client in simulator:  Front view  Side View
- E-mailed to [myride@ridedesigns.com](mailto:myride@ridedesigns.com), with client name and provider information.
- Attached
- Trim Lines: Establish and mark on simulator bag:
  - Back Height
  - Lateral support depth and height

**Before shipping cast, ALLOW TO DRY FOR 48 HOURS, and please complete the following:**

- Face sheet and order form (Enclose one copy of each in box with cast)
- Mark cast with following information:
  - Trim lines
  - Client first name and last initial
  - Supplier/Vendor
  - Supplier/Vendor representative
  - Therapist name
  - Date

**1. Ride Custom Back Specifications:**

- Trochanter width ≤ 20" ..... \$ 1900.00
- Trochanter width >20" ..... \$ 2200.00

**2. Supplementary Padding, Reliefs, Dimensions**

- Enhanced relief with reticulated foam padding ..... \$ 300.00  
(Typically used for improved protection and comfort at skeletal prominences such as rib humps and spinous processes.)  
(Draw desired location and shape of relief on cast)
- Axillary support pad  
(Typically used for distribution of corrective forces near the axilla on concave side of scoliosis)
  - Left ..... \$ 175.00
  - Right ..... \$ 175.00
 (Draw desired location and shape of pad(s) on cast)
- Extended depth and/or height lateral thoracic support (Mark reference lines on cast)
  - Extend LEFT lateral thoracic support \_\_\_\_\_" forward, \_\_\_\_\_" above reference lines ..... \$ 290.00
  - Extend RIGHT lateral thoracic support \_\_\_\_\_" forward, \_\_\_\_\_" above reference lines ..... \$ 290.00
- Extended back height (Mark reference lines on cast)
  - Extend back height \_\_\_\_\_" above reference line ..... \$ 290.00





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## Ride Custom Back Options Order Form

Supplier Name & Address	Ship To	Details
_____	_____	Account # _____
_____	_____	P.O. # _____
_____	_____	Purchaser _____
Phone _____	Phone _____	Mark for _____
Fax _____	Fax _____	Date _____

### LIGHT adjustable & removable Multi-axial Hardware

Lighter weight, with less range of adjustment than the original.

**WARNING.** Two (2) sets of hardware are required if the client presents with any of the following:

- Weight exceeds 250 pounds
- Overall back height measurement (as measured to trim lines on cast) is  $\geq 28$ "
- Severe extensor tone, spasticity, etc.

Hardware Size	Part Number	Fits Wheelchair Widths	Mfr. Sugg. Retail Price* for 1 set	Mfr. Sugg. Retail Price* for 2 sets	Quantity	Total
Pediatric - Small	RCB-MHPSL	10.5-13" Straight	\$495.00	\$950.00		
Pediatric - Medium	RCB-MHPML	12.5-14" Straight	\$495.00	\$950.00		
Adult - Small	RCB-MHASL	15" & 16" Bent	\$495.00	\$950.00		
Adult - Medium	RCB-MHAML	17" & 18" Bent	\$495.00	\$950.00		



Light adjustable & removable Multi-axial Hardware.

**Soft Fit Option** (Half-inch thick, breathable, reticulated foam liner for a softer feel. Increases lateral support thickness by .5" and may result in compromise of postural correction.)

Item	Part Number	Mfr. Sugg. Retail Price*	Quantity	Total
Soft Fit Option for Ride Custom Back	RCB-SF	\$340.00		



Abdominal Support Panel.

### Abdominal Support Panel

- Instructions:
1. Before removing client from back simulation, mark height of each ASIS on back capture bag.
  2. Measure up from this mark to establish desired height of abdominal panel needed.
  3. Draw a vertical reference line from the ASIS mark extending up to the height of desired abdominal panel.
  4. Provide a circumferential measurement around the abdomen from one vertical line to the opposite.
  5. Ride Designs will install the abdominal panel for you to meet these specifications.

Size	Part Number	Specify Measurement	Mfr. Sugg. Retail Price*	Quantity	Total
Small (height: 4")	RCB-AP-4	Circumferential measurement: _____"	\$345.00		
Medium (height: 6")	RCB-AP-6	Circumferential measurement: _____"	\$345.00		
Large (height: 8")	RCB-AP-8	Circumferential measurement: _____"	\$345.00		



Integrated Headrest/Accessory Mount with Shoulder Harness Guides and headrest installed.

### Additional Custom Back Items

Item	Part Number	Mfr. Sugg. Retail Price*	Quantity	Total
Integrated Headrest/Accessory Mount	RCB-AM	\$240.00		
Shoulder Harness Guides (pair)	RCB-SHG	\$ 95.00		

\*All prices are in U.S. dollars.

**TOTAL from all categories** \_\_\_\_\_