

PRC MOUNTING SELECTION SHEET

CLIENT: *The client is the person who will be receiving the equipment or services.*

Client Last Name: _____ First Name: _____

Client D.O.B. _____ State of Residence: _____

Make/Model of Wheel Chair (if wheelchair mount is requested): _____

Device/Access Method: _____

CONTACT PERSON: *Contact person is the person who would address any questions related to this Selection Sheet.*

Contact Person Last Name: _____ First Name: _____

Phone: _____ Email: _____

Please note that all of PRC stocked mounts are manufactured by Rehadapt.
If you are requesting a mount **NOT** on this form (either from Rehadapt or another manufacturer), please attach a quote for that mount.

QRM Mounting Plate: *Optional*



Accent 800/1000 (+\$26)

PRiO Serial Number lower than 200PRA (+\$59)

PRiO SN higher than 199PRA (+\$59)

PRiO-mini SN lower than 35PRM (+\$59)

PRiO-mini higher than 34PRM (+\$59)

The QRM Mounting Plate is included with the Accent 1400. The QRM Mounting Plate is NOT included with an Accent 800, Accent 1000, PRiO, or PRiO-mini unless the QRM Mounting Plate has been selected as an accessory on the product selection sheet. Please select ONE plate option if you will need a mounting plate with your mount order for Accent 800, 1000, PRiO, or PRiO-mini.

1. SELECT TYPE OF MOUNT: *REQUIRED*

All Purpose Mounts are available to accommodate variable or complex positioning of the SGD in multiple locations such as wheelchair and bed/chair/floor etc. For pricing, configuration and availability contact your PRC consultant or PRC funding.

Wheelchair Only - *Select from section 1A*

Table or Floor Mount Only - *Select from section 1B*

1A. WHEELCHAIR MOUNT:



RM-2

Proceed to Step 2A



RM-3

Proceed to Step 2B



RM-S

Proceed to Step 2C



RM-3HD

Proceed to Step 2D



Equipped with a double tube. Significantly reduces vibration, allows for heavier devices on mounts.

1B. TABLE AND FLOOR MOUNT: *if selecting ONLY a table or floor mount, then no further selection is necessary.*



Standard Tablestand



Standard Floorstand



PentaLock



VarioLock*



Standard Floorstand
*with QuickPack Option**



VarioFloat*

**Due to the cost of this product, they may not be available for all funding sources. Contact your local PRC consultant or the Funding Department at 800-268-5224. The VarioFloat is not available for the All Purpose Mount.*

2. SELECT TUBING SIZE FOR WHEELCHAIR MOUNTS

Step 2A – RM-2

Standard tube lengths



Please select one:

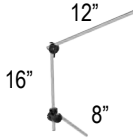
- Ship standard tube lengths
- Replace one or more tubes

- Replace vertical tube with 12" tube
- Replace vertical tube with 20" tube
- Replace horizontal tube with 16" tube
- Replace horizontal tube with 8" tube

[Proceed to Step 3](#)

Step 2B – RM-3

Standard tube lengths



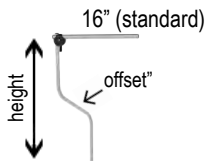
Please select one:

- Ship standard tube lengths
- Replace one or more tubes

- Replace 8" frame tube with 12" tube
- Replace vertical tube with 12" tube
- Replace vertical tube with 20" tube
- Replace horizontal tube with 16" tube
- Replace horizontal tube with 8" tube

[Proceed to Step 3](#)

Step 2C – RM-S



1. MUST Choose the appropriate offset distance*.

- SMALL (6" offset/ 26" high)
- MEDIUM (9" offset/30" high)
- LARGE (12" offset/34" high)

2. Horizontal tube length:

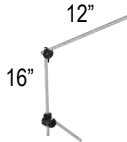
- Choose one
- Ship standard length
- Replace horizontal tube with 12" tube

*Larger offset will set the device further from the client

[Proceed to Step 3](#)

Step 2D – RM-3HD

Standard tube lengths



Please select one:

- Ship standard tube lengths
- Replace one or more tubes

- Replace vertical tube with 12" tube
- Replace vertical tube with 20" tube
- Replace horizontal tube with 16" tube
- Replace horizontal tube with 8" tube

[Proceed to Step 3](#)

3. SELECT TOP CORNER JOINT FOR WHEELCHAIR MOUNTS: *Select ONE, regardless of wheelchair mount*

Universal Quick Shift Joint

Fully adjustable for alignment of device. Includes handle.



Included joint if fold down joint option is not selected.

[Proceed to Step 4](#)

Fold Down Joint Option (+\$190)

Fold Down Joint for quick folding of mount. May not be available for all funding sources.



Select location of folding joint:
Left and right is from perspective of person in wheelchair.

- Left Side Fold Down Option
- Right Side Fold Down Option

[Proceed to Step 4](#)

4. SELECT FRAME CLAMP TO ATTACH MOUNT TO WHEELCHAIR: *Select ONE, regardless of wheelchair mount*



Pictured: 1", 3/4", & 7/8" Round Clamps

1" Round

3/4" Round

7/8" Round

1" Side Mount



Base Coupler Option for the RM-3/RM-3HD (+\$170)



T-nut for Quantum/Invacare

T-nut for Quickie

Permobil – Unitrack

Tie Down Bracket and Bolts



Other _____

Pictured: T-Nut Quickie & Quantum Clamps



Kimba



Rectangular



Madita



Additional Frame Clamp Required? Please specify from list above:

Questions about which wheelchair frame clamp you need?
Contact our mounting specialists at (800) 262-1990.