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MERIDIAN™

Ideal for preventing posterior-pelvic tilt. The Meridian benefits those at high risk of tissue breakdown and in need of a high level of symmetric positioning. This product is classified as an adjustable skin protection and positioning cushion.

The Meridian is a configured product. The first six digits make up the Medicare billing number.

STANDARD SIZES

List Price **\$375.00**
 HCPCS **K0736** (less than 22" width)
 Cover **Mesh or Incontinence**

| Size | Mesh | Incontinence |
|-------|-------------|--------------|
| 12x14 | 72000212141 | 72000212142 |
| 14x14 | 72000214141 | 72000214142 |
| 14x16 | 72000214161 | 72000214162 |
| 14x18 | 72000214181 | 72000214182 |
| 14x20 | 72000214201 | 72000214202 |
| 15x15 | 72000215151 | 72000215152 |
| 15x17 | 72000215171 | 72000215172 |
| 16x14 | 72000216141 | 72000216142 |
| 16x16 | 72000216161 | 72000216162 |
| 16x18 | 72000216181 | 72000216182 |
| 16x20 | 72000216201 | 72000216202 |
| 17x17 | 72000217171 | 72000217172 |
| 18x16 | 72000218161 | 72000218162 |
| 18x18 | 72000218181 | 72000218182 |
| 18x20 | 72000218201 | 72000218202 |
| 20x16 | 72000220161 | 72000220162 |
| 20x18 | 72000220181 | 72000220182 |
| 20x20 | 72000220201 | 72000220202 |

BARIATRIC SIZES

List Price **\$458.00**
 HCPCS **K0737** (22" or greater width)
 Cover **Mesh or Incontinence**

| Size | Mesh | Incontinence |
|-------|-------------|--------------|
| 22x18 | 72300222181 | 72300222182 |
| 22x20 | 72300222201 | 72300222202 |
| 24x18 | 72300224181 | 72300224182 |
| 24x20 | 72300224201 | 72300224202 |

REPLACEMENT COVERS

STANDARD SIZES

List Price: **\$78.00**
 HCPCS **E2619**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 12x14 | 02517 | 02534 |
| 14x14 | 02518 | 02535 |
| 14x16 | 02519 | 02536 |
| 14x18 | 02619 | 02624 |
| 14x20 | 02620 | 02625 |
| 15x15 | 02621 | 02626 |
| 15x17 | 02622 | 02627 |
| 16x14 | 02623 | 02628 |
| 16x16 | 02520 | 02537 |
| 16x18 | 02521 | 02538 |
| 16x20 | 02522 | 02539 |
| 17x17 | 02523 | 02540 |
| 18x16 | 02524 | 02541 |
| 18x18 | 02525 | 02542 |
| 18x20 | 02526 | 02543 |
| 20x16 | 02527 | 02544 |
| 20x18 | 02528 | 02545 |
| 20x20 | 02529 | 02546 |

BARIATRIC SIZES

List Price **\$104.00**
 HCPCS **E2619**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 22x18 | 02530 | 02547 |
| 22x20 | 02531 | 02548 |
| 24x18 | 02532 | 02549 |
| 24x20 | 02533 | 02550 |



MERIDIAN WAVE™ CPW (Contoured Positioning Wedge)

Ideal for preventing posterior-pelvic tilt. The Meridian Wave CPW provides exceptional positioning of the lower extremities for enhanced sitting posture. This product is classified as an adjustable skin protection cushion.

The Meridian Wave is a configured product. The first six digits make up the Medicare billing number.

STANDARD SIZES

List Price **\$458.00**
 HCPCS **K0736** (less than 22" width)
 Cover **Mesh or Incontinence**

BARIATRIC SIZES

List Price **\$530.00**
 HCPCS **K0737** (22" or greater width)
 Cover **Mesh or Incontinence**

| Size | Mesh | Incontinence |
|-------|-------------|--------------|
| 12x14 | 72001212141 | 72001212142 |
| 14x14 | 72001214141 | 72001214142 |
| 14x16 | 72001214161 | 72001214162 |
| 14x18 | 72001214181 | 72001214182 |
| 14x20 | 72001214201 | 72001214202 |
| 15x15 | 72001215151 | 72001215152 |
| 15x17 | 72001215171 | 72001215172 |
| 16x14 | 72001216141 | 72001216142 |
| 16x16 | 72001216161 | 72001216162 |
| 16x18 | 72001216181 | 72001216182 |
| 16x20 | 72001216201 | 72001216202 |
| 17x17 | 72001217171 | 72001217172 |
| 18x16 | 72001218161 | 72001218162 |
| 18x18 | 72001218181 | 72001218182 |
| 18x20 | 72001218201 | 72001218202 |
| 20x16 | 72001220161 | 72001220162 |
| 20x18 | 72001220181 | 72001220182 |
| 20x20 | 72001220201 | 72001220202 |

| Size | Mesh | Incontinence |
|-------|-------------|--------------|
| 22x18 | 72301222181 | 72301222182 |
| 22x20 | 72301222201 | 72301222202 |
| 24x18 | 72301224181 | 72301224182 |
| 24x20 | 72301224201 | 72301224202 |

REPLACEMENT COVERS

STANDARD SIZES

List Price: **\$78.00**
 HCPCS **E2619**

BARIATRIC SIZES

List Price **\$104.00**
 HCPCS **E2619**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 12x14 | 02551 | 02568 |
| 14x14 | 02552 | 02569 |
| 14x16 | 02553 | 02570 |
| 14x18 | 02629 | 02634 |
| 14x20 | 02630 | 02635 |
| 15x15 | 02631 | 02636 |
| 15x17 | 02632 | 02637 |
| 16x14 | 02633 | 02638 |
| 16x16 | 02554 | 02571 |
| 16x18 | 02555 | 02572 |
| 16x20 | 02556 | 02573 |
| 17x17 | 02557 | 02574 |
| 18x16 | 02558 | 02575 |
| 18x18 | 02559 | 02576 |
| 18x20 | 02560 | 02577 |
| 20x16 | 02561 | 02578 |
| 20x18 | 02562 | 02579 |
| 20x20 | 02563 | 02580 |

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 22x18 | 02564 | 02581 |
| 22x20 | 02565 | 02582 |
| 24x18 | 02566 | 02583 |
| 24x20 | 02567 | 02584 |



MERIDIAN WAVE™ LPB (Lateral Positioning Base)

Ideal for preventing posterior-pelvic tilt. The Meridian Wave LPB provides a solid base of support and a high degree of pelvic and lower extremity lateral positioning. This product is classified as an adjustable skin protection cushion.

The Meridian Wave is a configured product. The first six digits make up the Medicare billing number.

STANDARD SIZES

List Price **\$458.00**
 HCPCS **K0736** (less than 22" width)
 Cover **Mesh or Incontinence**

BARIATRIC SIZES

List Price **\$530.00**
 HCPCS **K0737** (22" or greater width)
 Cover **Mesh or Incontinence**

| Size | Mesh | Incontinence |
|-------|-------------|--------------|
| 12x14 | 72002212141 | 72002212142 |
| 14x14 | 72002214141 | 72002214142 |
| 14x16 | 72002214161 | 72002214162 |
| 14x18 | 72002214181 | 72002214182 |
| 14x20 | 72002214201 | 72002214202 |
| 15x15 | 72002215151 | 72002215152 |
| 15x17 | 72002215171 | 72002215172 |
| 16x14 | 72002216141 | 72002216142 |
| 16x16 | 72002216161 | 72002216162 |
| 16x18 | 72002216181 | 72002216182 |
| 16x20 | 72002216201 | 72002216202 |
| 17x17 | 72002217171 | 72002217172 |
| 18x16 | 72002218161 | 72002218162 |
| 18x18 | 72002218181 | 72002218182 |
| 18x20 | 72002218201 | 72002218202 |
| 20x16 | 72002220161 | 72002220162 |
| 20x18 | 72002220181 | 72002220182 |
| 20x20 | 72002220201 | 72002220202 |

| Size | Mesh | Incontinence |
|-------|-------------|--------------|
| 22x18 | 72302222181 | 72302222182 |
| 22x20 | 72302222201 | 72302222202 |
| 24x18 | 72302224181 | 72302224182 |
| 24x20 | 72302224201 | 72302224202 |

REPLACEMENT COVERS

STANDARD SIZES

List Price: **\$78.00**
 HCPCS **E2619**

BARIATRIC SIZES

List Price **\$104.00**
 HCPCS **E2619**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 12x14 | 02585 | 02602 |
| 14x14 | 02586 | 02603 |
| 14x16 | 02587 | 02604 |
| 14x18 | 02639 | 02644 |
| 14x20 | 02640 | 02645 |
| 15x15 | 02641 | 02646 |
| 15x17 | 02642 | 02647 |
| 16x14 | 02643 | 02648 |
| 16x16 | 02588 | 02605 |
| 16x18 | 02589 | 02606 |
| 16x20 | 02590 | 02607 |
| 17x17 | 02591 | 02608 |
| 18x16 | 02592 | 02609 |
| 18x18 | 02593 | 02610 |
| 18x20 | 02594 | 02611 |
| 20x16 | 02595 | 02612 |
| 20x18 | 02596 | 02613 |
| 20x20 | 02597 | 02614 |

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 22x18 | 02598 | 02615 |
| 22x20 | 02599 | 02616 |
| 24x18 | 02600 | 02617 |
| 24x20 | 02601 | 02618 |



MERIDIAN WAVE™ CPB (Contoured Positioning Base)

Ideal for preventing posterior-pelvic tilt. The Meridian Wave CPB provides a solid base of support and a high degree of pelvic and lower extremity lateral and medial positioning. This product is classified as an adjustable skin protection cushion.

The Meridian Wave is a configured product. The first six digits make up the Medicare billing number.

STANDARD SIZES

List Price **\$458.00**
 HCPCS **K0736** (less than 22" width)
 Cover **Mesh or Incontinence**

BARIATRIC SIZES

List Price **\$530.00**
 HCPCS **K0737** (22" or greater width)
 Cover **Mesh or Incontinence**

| Size | Mesh | Incontinence |
|-------|-------------|--------------|
| 12x14 | 72003212141 | 72003212142 |
| 14x14 | 72003214141 | 72003214142 |
| 14x16 | 72003214161 | 72003214162 |
| 14x18 | 72003214181 | 72003214182 |
| 14x20 | 72003214201 | 72003214202 |
| 15x15 | 72003215151 | 72003215152 |
| 15x17 | 72003215171 | 72003215172 |
| 16x14 | 72003216141 | 72003216142 |
| 16x16 | 72003216161 | 72003216162 |
| 16x18 | 72003216181 | 72003216182 |
| 16x20 | 72003216201 | 72003216202 |
| 17x17 | 72003217171 | 72003217172 |
| 18x16 | 72003218161 | 72003218162 |
| 18x18 | 72003218181 | 72003218182 |
| 18x20 | 72003218201 | 72003218202 |
| 20x16 | 72003220161 | 72003220162 |
| 20x18 | 72003220181 | 72003220182 |
| 20x20 | 72003220201 | 72003220202 |

| Size | Mesh | Incontinence |
|-------|-------------|--------------|
| 22x18 | 72303222181 | 72303222182 |
| 22x20 | 72303222201 | 72303222202 |
| 24x18 | 72303224181 | 72303224182 |
| 24x20 | 72303224201 | 72303224202 |

REPLACEMENT COVERS

STANDARD SIZES

List Price: **\$78.00**
 HCPCS **E2619**

BARIATRIC SIZES

List Price **\$104.00**
 HCPCS **E2619**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 12x14 | 02585 | 02602 |
| 14x14 | 02586 | 02603 |
| 14x16 | 02587 | 02604 |
| 14x18 | 02639 | 02644 |
| 14x20 | 02640 | 02645 |
| 15x15 | 02641 | 02646 |
| 15x17 | 02642 | 02647 |
| 16x14 | 02643 | 02648 |
| 16x16 | 02588 | 02605 |
| 16x18 | 02589 | 02606 |
| 16x20 | 02590 | 02607 |
| 17x17 | 02591 | 02608 |
| 18x16 | 02592 | 02609 |
| 18x18 | 02593 | 02610 |
| 18x20 | 02594 | 02611 |
| 20x16 | 02595 | 02612 |
| 20x18 | 02596 | 02613 |
| 20x20 | 02597 | 02614 |

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 22x18 | 02598 | 02615 |
| 22x20 | 02599 | 02616 |
| 24x18 | 02600 | 02617 |
| 24x20 | 02601 | 02618 |



EVOLUTION PSV™

Ideal for users at a high risk of tissue breakdown and in need of symmetric positioning. The PSV (Pressure Setting Valve) takes the guesswork out of cushion adjustment. This product is classified as an adjustable skin protection cushion.

STANDARD SIZES

List Price **\$364.00**
 HCPCS **K0734** (less than 22" width)
 Cover **Mesh or Incontinence**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 12x14 | 72415 | 72425 |
| 14x14 | 74415 | 74425 |
| 14x16 | 74615 | 74625 |
| 14x18 | 74816 | 74826 |
| 14x20 | 74016 | 74026 |
| 15x15 | 75515 | 75525 |
| 15x17 | 75715 | 75725 |
| 16x14 | 76415 | 76425 |
| 16x16 | 76615 | 76625 |
| 16x18 | 76815 | 76825 |
| 16x20 | 76015 | 76025 |
| 17x17 | 77715 | 77725 |
| 18x16 | 78615 | 78625 |
| 18x18 | 78815 | 78825 |
| 18x20 | 78015 | 78025 |
| 20x16 | 70615 | 70625 |
| 20x18 | 70815 | 70825 |
| 20x20 | 70015 | 70025 |

BARIATRIC SIZES

List Price **\$442.00**
 HCPCS **K0735** (22" or greater width)
 Cover **Mesh or Incontinence**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 22x18 | 72815 | 72825 |
| 22x20 | 72015 | 72025 |
| 24x18 | 74815 | 74825 |
| 24x20 | 74015 | 74025 |

REPLACEMENT COVERS

STANDARD SIZES

List Price: **\$78.00**
 HCPCS **E2619**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 12x14 | 04623 | 04624 |
| 14x14 | 04643 | 04644 |
| 14x16 | 04645 | 04646 |
| 14x18 | 04681 | 04690 |
| 14x20 | 04682 | 04691 |
| 15x15 | 04683 | 04692 |
| 15x17 | 04684 | 04695 |
| 16x14 | 04689 | 04696 |
| 16x16 | 04665 | 04666 |
| 16x18 | 04667 | 04668 |
| 16x20 | 04601 | 04602 |
| 17x17 | 04640 | 04641 |
| 18x16 | 04685 | 04686 |
| 18x18 | 04687 | 04688 |
| 18x20 | 04679 | 04680 |
| 20x16 | 04605 | 04606 |
| 20x18 | 04607 | 04608 |
| 20x20 | 04599 | 04600 |

BARIATRIC SIZES

List Price **\$104.00**
 HCPCS **E2619**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 22x18 | 04620 | 04621 |
| 22x20 | 04622 | 04625 |
| 24x18 | 04626 | 04627 |
| 24x20 | 04628 | 04629 |



EVOLUTION PSV WAVE™ CPW (Contoured Positioning Wedge)

Ideal for users at high risk of tissue breakdown. The Evolution PSV Wave CPW provides exceptional positioning of the lower extremities for enhanced sitting posture. The PSV (Pressure Setting Valve) takes the guesswork out of adjustment. This product is classified as an adjustable skin protection cushion.

The Evolution Wave PSV is a configured product. The first six digits make up the Medicare billing number.

STANDARD SIZES

List Price: **\$432.00**
 HCPCS: **K0736** (less than 22" width)
 Cover: **Mesh or Incontinence**

BARIATRIC SIZES

List Price: **\$505.00**
 HCPCS: **K0737** (22" or greater width)
 Cover: **Mesh or Incontinence**

| Size | Mesh | Incontinence |
|-------|-------------|--------------|
| 12x14 | 71501112141 | 71501112142 |
| 14x14 | 71501114141 | 71501114142 |
| 14x16 | 71501114161 | 71501114162 |
| 14x18 | 71501114181 | 71501114182 |
| 14x20 | 71501114201 | 71501114202 |
| 15x15 | 71501115151 | 71501115152 |
| 15x17 | 71501115171 | 71501115172 |
| 16x14 | 71501116141 | 71501116142 |
| 16x16 | 71501116161 | 71501116162 |
| 16x18 | 71501116181 | 71501116182 |
| 16x20 | 71501116201 | 71501116202 |
| 17x17 | 71501117171 | 71501117172 |
| 18x16 | 71501118161 | 71501118162 |
| 18x18 | 71501118181 | 71501118182 |
| 18x20 | 71501118201 | 71501118202 |
| 20x16 | 71501120161 | 71501120162 |
| 20x18 | 71501120181 | 71501120182 |
| 20x20 | 71501120201 | 71501120202 |

| Size | Mesh | Incontinence |
|-------|-------------|--------------|
| 22x18 | 71801122181 | 71801122182 |
| 22x20 | 71801122201 | 71801122202 |
| 24x18 | 71801124181 | 71801124182 |
| 24x20 | 71801124201 | 71801124202 |

REPLACEMENT COVERS

STANDARD SIZES

List Price: **\$78.00**
 HCPCS: **E2619**

BARIATRIC SIZES

List Price: **\$104.00**
 HCPCS: **E2619**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 12x14 | 05500 | 05517 |
| 14x14 | 05501 | 05518 |
| 14x16 | 05502 | 05519 |
| 14x18 | 05745 | 05750 |
| 14x20 | 05746 | 05751 |
| 15x15 | 05747 | 05752 |
| 15x17 | 05748 | 05753 |
| 16x14 | 05749 | 05754 |
| 16x16 | 05503 | 05520 |
| 16x18 | 05504 | 05521 |
| 16x20 | 05505 | 05522 |
| 17x17 | 05506 | 05523 |
| 18x16 | 05507 | 05524 |
| 18x18 | 05508 | 05524 |
| 18x20 | 05509 | 05526 |
| 20x16 | 05510 | 05527 |
| 20x18 | 05511 | 05528 |
| 20x20 | 05512 | 05529 |

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 22x18 | 05513 | 05530 |
| 22x20 | 05514 | 05531 |
| 24x18 | 05515 | 05532 |
| 24x20 | 05516 | 05533 |



EVOLUTION PSV WAVE™ LPB (Lateral Positioning Base)

Ideal for users at high risk of tissue breakdown. The Evolution PSV Wave LPB provides a solid base of support and a high degree of pelvic and lower extremity lateral positioning. The PSV (Pressure Setting Valve) takes the guesswork out of cushion adjustment. This product is classified as an adjustable skin protection cushion.

The Evolution Wave PSV is a configured product. The first six digits make up the Medicare billing number.

STANDARD SIZES

List Price: **\$432.00**
 HCPCS: **K0736** (less than 22" width)
 Cover: **Mesh or Incontinence**

BARIATRIC SIZES

List Price: **\$505.00**
 HCPCS: **K0737** (22" or greater width)
 Cover: **Mesh or Incontinence**

| Size | Mesh | Incontinence |
|-------|-------------|--------------|
| 12x14 | 71502112141 | 71502112142 |
| 14x14 | 71502114141 | 71502114142 |
| 14x16 | 71502114161 | 71502114162 |
| 14x18 | 71502114181 | 71502114182 |
| 14x20 | 71502114201 | 71502114202 |
| 15x15 | 71502115151 | 71502115152 |
| 15x17 | 71502115171 | 71502115172 |
| 16x14 | 71502116141 | 71502116142 |
| 16x16 | 71502116161 | 71502116162 |
| 16x18 | 71502116181 | 71502116182 |
| 16x20 | 71502116201 | 71502116202 |
| 17x17 | 71502117171 | 71502117172 |
| 18x16 | 71502118161 | 71502118162 |
| 18x18 | 71502118181 | 71502118182 |
| 18x20 | 71502118201 | 71502118202 |
| 20x16 | 71502120161 | 71502120162 |
| 20x18 | 71502120181 | 71502120182 |
| 20x20 | 71502120201 | 71502120202 |

| Size | Mesh | Incontinence |
|-------|-------------|--------------|
| 22x18 | 71802122181 | 71802122182 |
| 22x20 | 71802122201 | 71802122202 |
| 24x18 | 71802124181 | 71802124182 |
| 24x20 | 71802124201 | 71802124202 |

REPLACEMENT COVERS

STANDARD SIZES

List Price: **\$78.00**
 HCPCS: **E2619**

BARIATRIC SIZES

List Price: **\$104.00**
 HCPCS: **E2619**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 12x14 | 05700 | 05717 |
| 14x14 | 05701 | 05718 |
| 14x16 | 05702 | 05719 |
| 14x18 | 05735 | 05740 |
| 14x20 | 05736 | 05741 |
| 15x15 | 05737 | 05742 |
| 15x17 | 05738 | 05743 |
| 16x14 | 05739 | 05744 |
| 16x16 | 05703 | 05720 |
| 16x18 | 05704 | 05721 |
| 16x20 | 05705 | 05722 |
| 17x17 | 05706 | 05723 |
| 18x16 | 05707 | 05724 |
| 18x18 | 05708 | 05725 |
| 18x20 | 05709 | 05726 |
| 20x16 | 05710 | 05727 |
| 20x18 | 05711 | 05728 |
| 20x20 | 05712 | 05729 |

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 22x18 | 05713 | 05730 |
| 22x20 | 05714 | 05731 |
| 24x18 | 05715 | 05732 |
| 24x20 | 05716 | 05734 |



EVOLUTION PSV WAVE™ CPB (Contoured Positioning Base)

Ideal for users at high risk of tissue breakdown. The Evolution PSV Wave CPB provides a solid base of support and a high degree of pelvic and lower extremity lateral and medial positioning. The PSV (Pressure Setting Valve) takes the guesswork out of cushion adjustment. This product is classified as an adjustable skin protection cushion.

The Evolution Wave PSV is a configured product. The first six digits make up the Medicare billing number.

STANDARD SIZES

List Price **\$432.00**
 HCPCS **K0736** (less than 22" width)
 Cover **Mesh or Incontinence**

BARIATRIC SIZES

List Price **\$505.00**
 HCPCS **K0737** (22" or greater width)
 Cover **Mesh or Incontinence**

| Size | Mesh | Incontinence |
|-------|-------------|--------------|
| 12x14 | 71503112141 | 71503112142 |
| 14x14 | 71503114141 | 71503114142 |
| 14x16 | 71503114161 | 71503114162 |
| 14x18 | 71503114181 | 71503114182 |
| 14x20 | 71503114201 | 71503114202 |
| 15x15 | 71503115151 | 71503115152 |
| 15x17 | 71503115171 | 71503115172 |
| 16x14 | 71503116141 | 71503116142 |
| 16x16 | 71503116161 | 71503116162 |
| 16x18 | 71503116181 | 71503116182 |
| 16x20 | 71503116201 | 71503116202 |
| 17x17 | 71503117171 | 71503117172 |
| 18x16 | 71503118161 | 71503118162 |
| 18x18 | 71503118181 | 71503118182 |
| 18x20 | 71503118201 | 71503118202 |
| 20x16 | 71503120161 | 71503120162 |
| 20x18 | 71503120181 | 71503120182 |
| 20x20 | 71503120201 | 71503120202 |

| Size | Mesh | Incontinence |
|-------|-------------|--------------|
| 22x18 | 71803122181 | 71803122182 |
| 22x20 | 71803122201 | 71803122202 |
| 24x18 | 71803124181 | 71803124182 |
| 24x20 | 71803124201 | 71803124202 |

REPLACEMENT COVERS

STANDARD SIZES

List Price: **\$78.00**
 HCPCS **E2619**

BARIATRIC SIZES

List Price **\$104.00**
 HCPCS **E2619**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 12x14 | 05700 | 05717 |
| 14x14 | 05701 | 05718 |
| 14x16 | 05702 | 05719 |
| 14x18 | 05735 | 05740 |
| 14x20 | 05736 | 05741 |
| 15x15 | 05737 | 05742 |
| 15x17 | 05738 | 05743 |
| 16x14 | 05739 | 05744 |
| 16x16 | 05703 | 05720 |
| 16x18 | 05704 | 05721 |
| 16x20 | 05705 | 05722 |
| 17x17 | 05706 | 05723 |
| 18x16 | 05707 | 05724 |
| 18x18 | 05708 | 05725 |
| 18x20 | 05709 | 05726 |
| 20x16 | 05710 | 05727 |
| 20x18 | 05711 | 05728 |
| 20x20 | 05712 | 05729 |

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 22x18 | 05713 | 05730 |
| 22x20 | 05714 | 05731 |
| 24x18 | 05715 | 05732 |
| 24x20 | 05716 | 05734 |



EVOLUTION™

Ideal for users at high risk of tissue breakdown and in need of symmetric positioning. This product is classified as an adjustable skin protection cushion.

STANDARD SIZES

List Price: **\$364.00**
 HCPCS: **K0734** (less than 22" width)
 Cover: **Mesh or Incontinence**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 12x14 | 72410 | 72420 |
| 14x14 | 74410 | 74420 |
| 14x16 | 74610 | 74620 |
| 14x18 | 74810 | 74820 |
| 14x20 | 74010 | 74020 |
| 15x15 | 75510 | 75520 |
| 15x17 | 75710 | 75720 |
| 16x14 | 76410 | 76420 |
| 16x16 | 76610 | 76620 |
| 16x18 | 76810 | 76820 |
| 16x20 | 76010 | 76020 |
| 17x17 | 77710 | 77720 |
| 18x16 | 78610 | 78620 |
| 18x18 | 78810 | 78820 |
| 18x20 | 78010 | 78020 |
| 20x16 | 70610 | 70620 |
| 20x18 | 70810 | 70820 |
| 20x20 | 70010 | 70020 |

BARIATRIC SIZES

List Price: **\$442.00**
 HCPCS: **K0735** (22" or greater width)
 Cover: **Mesh or Incontinence**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 22x18 | 7281B | 7282B |
| 22x20 | 7201B | 7202B |
| 24x18 | 7481B | 7482B |
| 24x20 | 7401B | 7402B |

REPLACEMENT COVERS

STANDARD SIZES

List Price: **\$78.00**
 HCPCS: **E2619**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 12x14 | 04623 | 04624 |
| 14x14 | 04643 | 04644 |
| 14x16 | 04645 | 04646 |
| 14x18 | 04681 | 04690 |
| 14x20 | 04682 | 04691 |
| 15x15 | 04683 | 04692 |
| 15x17 | 04684 | 04695 |
| 16x14 | 04689 | 04696 |
| 16x16 | 04665 | 04666 |
| 16x18 | 04667 | 04668 |
| 16x20 | 04601 | 04602 |
| 17x17 | 04640 | 04641 |
| 18x16 | 04685 | 04686 |
| 18x18 | 04687 | 04688 |
| 18x20 | 04679 | 04680 |
| 20x16 | 04605 | 04606 |
| 20x18 | 04607 | 04608 |
| 20x20 | 04599 | 04600 |

BARIATRIC SIZES

List Price: **\$104.00**
 HCPCS: **E2619**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 22x18 | 04620 | 04621 |
| 22x20 | 04622 | 04625 |
| 24x18 | 04626 | 04627 |
| 24x20 | 04628 | 04629 |



EVOLUTION WAVE™ CPW (Contoured Positioning Wedge)

Ideal for users at high risk of tissue breakdown. The Evolution Wave CPW provides exceptional positioning of the lower extremities for enhanced sitting posture. This product is classified as an adjustable skin protection and positioning cushion.

The Evolution Wave is a configured product. The first six digits make up the Medicare billing number.

STANDARD SIZES

List Price **\$432.00**
 HCPCS **K0736** (less than 22" width)
 Cover **Mesh or Incontinence**

BARIATRIC SIZES

List Price **\$505.00**
 HCPCS **K0737** (22" or greater width)
 Cover **Mesh or Incontinence**

| Size | Mesh | Incontinence |
|-------|-------------|--------------|
| 12x14 | 71001112141 | 71001112142 |
| 14x14 | 71001114141 | 71001114142 |
| 14x16 | 71001114161 | 71001114162 |
| 14x18 | 71001114181 | 71001114182 |
| 14x20 | 71001114201 | 71001114202 |
| 15x15 | 71001115151 | 71001115152 |
| 15x17 | 71001115171 | 71001115172 |
| 16x14 | 71001116141 | 71001116142 |
| 16x16 | 71001116161 | 71001116162 |
| 16x18 | 71001116181 | 71001116182 |
| 16x20 | 71001116201 | 71001116202 |
| 17x17 | 71001117171 | 71001117172 |
| 18x16 | 71001118161 | 71001118162 |
| 18x18 | 71001118181 | 71001118182 |
| 18x20 | 71001118201 | 71001118202 |
| 20x16 | 71001120161 | 71001120162 |
| 20x18 | 71001120181 | 71001120182 |
| 20x20 | 71001120201 | 71001120202 |

| Size | Mesh | Incontinence |
|-------|-------------|--------------|
| 22x18 | 71301122181 | 71301122182 |
| 22x20 | 71301122201 | 71301122202 |
| 24x18 | 71301124181 | 71301124182 |
| 24x20 | 71301124201 | 71301124202 |

REPLACEMENT COVERS

STANDARD SIZES

List Price: **\$78.00**
 HCPCS **E2619**

BARIATRIC SIZES

List Price **\$104.00**
 HCPCS **E2619**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 12x14 | 05500 | 05517 |
| 14x14 | 05501 | 05518 |
| 14x16 | 05502 | 05519 |
| 14x18 | 05745 | 05750 |
| 14x20 | 05746 | 05751 |
| 15x15 | 05747 | 05752 |
| 15x17 | 05748 | 05753 |
| 16x14 | 05749 | 05754 |
| 16x16 | 05503 | 05520 |
| 16x18 | 05504 | 05521 |
| 16x20 | 05505 | 05522 |
| 17x17 | 05506 | 05523 |
| 18x16 | 05507 | 05524 |
| 18x18 | 05508 | 05524 |
| 18x20 | 05509 | 05526 |
| 20x16 | 05510 | 05527 |
| 20x18 | 05511 | 05528 |
| 20x20 | 05512 | 05529 |

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 22x18 | 05513 | 05530 |
| 22x20 | 05514 | 05531 |
| 24x18 | 05515 | 05532 |
| 24x20 | 05516 | 05533 |



EVOLUTION WAVE™ LPB (Lateral Positioning Base)

Ideal for users at high risk of tissue breakdown. The Evolution Wave LPB provides a solid base of support and a high degree of pelvic and lower extremity lateral positioning. This product is classified as an adjustable skin protection and positioning cushion.

The Evolution Wave is a configured product. The first six digits make up the Medicare billing number.

STANDARD SIZES

List Price **\$432.00**
 HCPCS **K0736** (less than 22" width)
 Cover **Mesh or Incontinence**

BARIATRIC SIZES

List Price **\$505.00**
 HCPCS **K0737** (22" or greater width)
 Cover **Mesh or Incontinence**

| Size | Mesh | Incontinence |
|-------|-------------|--------------|
| 12x14 | 71002112141 | 71002112142 |
| 14x14 | 71002114141 | 71002114142 |
| 14x16 | 71002114161 | 71002114162 |
| 14x18 | 71002114181 | 71002114182 |
| 14x20 | 71002114201 | 71002114202 |
| 15x15 | 71002115151 | 71002115152 |
| 15x17 | 71002115171 | 71002115172 |
| 16x14 | 71002116141 | 71002116142 |
| 16x16 | 71002116161 | 71002116162 |
| 16x18 | 71002116181 | 71002116182 |
| 16x20 | 71002116201 | 71002116202 |
| 17x17 | 71002117171 | 71002117172 |
| 18x16 | 71002118161 | 71002118162 |
| 18x18 | 71002118181 | 71002118182 |
| 18x20 | 71002118201 | 71002118202 |
| 20x16 | 71002120161 | 71002120162 |
| 20x18 | 71002120181 | 71002120182 |
| 20x20 | 71002120201 | 71002120202 |

| Size | Mesh | Incontinence |
|-------|-------------|--------------|
| 22x18 | 71302122181 | 71302122182 |
| 22x20 | 71302122201 | 71302122202 |
| 24x18 | 71302124181 | 71302124182 |
| 24x20 | 71302124201 | 71302124202 |

REPLACEMENT COVERS

STANDARD SIZES

List Price: **\$78.00**
 HCPCS **E2619**

BARIATRIC SIZES

List Price **\$104.00**
 HCPCS **E2619**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 12x14 | 05700 | 05717 |
| 14x14 | 05701 | 05718 |
| 14x16 | 05702 | 05719 |
| 14x18 | 05735 | 05740 |
| 14x20 | 05736 | 05741 |
| 15x15 | 05737 | 05742 |
| 15x17 | 05738 | 05743 |
| 16x14 | 05739 | 05744 |
| 16x16 | 05703 | 05720 |
| 16x18 | 05704 | 05721 |
| 16x20 | 05705 | 05722 |
| 17x17 | 05706 | 05723 |
| 18x16 | 05707 | 05724 |
| 18x18 | 05708 | 05725 |
| 18x20 | 05709 | 05726 |
| 20x16 | 05710 | 05727 |
| 20x18 | 05711 | 05728 |
| 20x20 | 05712 | 05729 |

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 22x18 | 05713 | 05730 |
| 22x20 | 05714 | 05731 |
| 24x18 | 05715 | 05732 |
| 24x20 | 05716 | 05734 |



EVOLUTION WAVE™ CPB (Contoured Positioning Base)

Ideal for users at high risk for tissue breakdown. The Evolution Wave CPB provides a solid base of support and a high degree of pelvic and lower extremity lateral and medial positioning. This product is classified as an adjustable skin protection and positioning cushion.

The Evolution Wave is a configured product. The first six digits make up the Medicare billing number.

STANDARD SIZES

List Price: **\$432.00**
 HCPCS: **K0736** (less than 22" width)
 Cover: **Mesh or Incontinence**

| Size | Mesh | Incontinence |
|-------|-------------|--------------|
| 12x14 | 71003112141 | 71003112142 |
| 14x14 | 71003114141 | 71003114142 |
| 14x16 | 71003114161 | 71003114162 |
| 14x18 | 71003114181 | 71003114182 |
| 14x20 | 71003114201 | 71003114202 |
| 15x15 | 71003115151 | 71003115152 |
| 15x17 | 71003115171 | 71003115172 |
| 16x14 | 71003116141 | 71003116142 |
| 16x16 | 71003116161 | 71003116162 |
| 16x18 | 71003116181 | 71003116182 |
| 16x20 | 71003116201 | 71003116202 |
| 17x17 | 71003117171 | 71003117172 |
| 18x16 | 71003118161 | 71003118162 |
| 18x18 | 71003118181 | 71003118182 |
| 18x20 | 71003118201 | 71003118202 |
| 20x16 | 71003120161 | 71003120162 |
| 20x18 | 71003120181 | 71003120182 |
| 20x20 | 71003120201 | 71003120202 |

BARIATRIC SIZES

List Price: **\$505.00**
 HCPCS: **K0737** (22" or greater width)
 Cover: **Mesh or Incontinence**

| Size | Mesh | Incontinence |
|-------|-------------|--------------|
| 22x18 | 71303122181 | 71303122182 |
| 22x20 | 71303122201 | 71303122202 |
| 24x18 | 71303124181 | 71303124182 |
| 24x20 | 71303124201 | 71303124202 |

REPLACEMENT COVERS

STANDARD SIZES

List Price: **\$78.00**
 HCPCS: **E2619**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 12x14 | 05700 | 05717 |
| 14x14 | 05701 | 05718 |
| 14x16 | 05702 | 05719 |
| 14x18 | 05735 | 05740 |
| 14x20 | 05736 | 05741 |
| 15x15 | 05737 | 05742 |
| 15x17 | 05738 | 05743 |
| 16x14 | 05739 | 05744 |
| 16x16 | 05703 | 05720 |
| 16x18 | 05704 | 05721 |
| 16x20 | 05705 | 05722 |
| 17x17 | 05706 | 05723 |
| 18x16 | 05707 | 05724 |
| 18x18 | 05708 | 05725 |
| 18x20 | 05709 | 05726 |
| 20x16 | 05710 | 05727 |
| 20x18 | 05711 | 05728 |
| 20x20 | 05712 | 05729 |

BARIATRIC SIZES

List Price: **\$104.00**
 HCPCS: **E2619**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 22x18 | 05713 | 05730 |
| 22x20 | 05714 | 05731 |
| 24x18 | 05715 | 05732 |
| 24x20 | 05716 | 05734 |



PROFORM NX™

Ideal for individuals with leg length discrepancies, amputations and other pelvic obliquities. The ProForm NX benefits those who require a lightweight, customizable seating system. This product is classified as an adjustable skin protection cushion.

SINGLE CHAMBER

List Price **\$442.00**
 HCPCS **K0736** (less than 22" width)
 Cover **Mesh or Incontinence**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 12x14 | 72411 | 72421 |
| 14x14 | 74411 | 74421 |
| 14x16 | 74611 | 74621 |
| 15x15 | 75511 | 75521 |
| 15x17 | 75711 | 75721 |
| 16x16 | 76611 | 76621 |
| 16x18 | 76811 | 76821 |
| 16x20 | 76011 | 76021 |
| 17x17 | 77711 | 77721 |
| 18x16 | 78611 | 78621 |
| 18x18 | 78811 | 78821 |
| 18x20 | 78011 | 78021 |
| 20x16 | 70611 | 70621 |
| 20x18 | 70811 | 70821 |
| 20x20 | 70011 | 70021 |

DUAL CHAMBER

List Price **\$442.00**
 HCPCS **K0736** (less than 22" width)
 Cover **Mesh or Incontinence**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 12x14 | 72412 | 72422 |
| 14x14 | 74412 | 74422 |
| 14x16 | 74612 | 74622 |
| 15x15 | 75512 | 75522 |
| 15x17 | 75712 | 75722 |
| 16x16 | 76612 | 76622 |
| 16x18 | 76812 | 76822 |
| 16x20 | 76012 | 76022 |
| 17x17 | 77712 | 77722 |
| 18x16 | 78612 | 78622 |
| 18x18 | 78812 | 78822 |
| 18x20 | 78012 | 78022 |
| 20x16 | 70612 | 70622 |
| 20x18 | 70812 | 70822 |
| 20x20 | 70012 | 70022 |

REPLACEMENT PARTS

Covers

List Price: **\$78.00**
 HCPCS **E2619**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 12x14 | 01760 | 01750 |
| 14x14 | 01761 | 01751 |
| 14x16 | 01762 | 01752 |
| 15x15 | 01740 | 01745 |
| 15x17 | 01741 | 01746 |
| 16x16 | 01763 | 01753 |
| 16x18 | 01764 | 01754 |
| 16x20 | 01765 | 01755 |
| 17x17 | 01742 | 01747 |
| 18x16 | 01766 | 01756 |
| 18x18 | 01767 | 01757 |
| 18x20 | 01768 | 01758 |
| 20x16 | 01743 | 01748 |
| 20x18 | 01744 | 01749 |
| 20x20 | 01769 | 01759 |

Cushions

List Price **\$135.00**
 HCPCS **none**

| Size | Single Chamber | Dual Chamber |
|--------|----------------|--------------|
| 12x7 | 01780 | 01770 |
| 14x7 | 01781 | 01771 |
| 14x8 | 01782 | 01772 |
| 15x7.5 | 01790 | 01795 |
| 15x8.5 | 01791 | 01796 |
| 16x8 | 01784 | 01774 |
| 16x9 | 01785 | 01775 |
| 16x10 | 01783 | 01773 |
| 17x8.5 | 01792 | 01797 |
| 18x8 | 01787 | 01777 |
| 18x9 | 01788 | 01778 |
| 18x10 | 01786 | 01776 |
| 20x8 | 01793 | 01798 |
| 20x9 | 01794 | 01799 |
| 20x10 | 01789 | 01779 |



ZOID PSV™

For active users at moderate risk of tissue breakdown. The low profile, tapered design compliments modern sport chairs. The PSV (Pressure Setting Valve) takes the guesswork out of cushion adjustment. This product is classified as an adjustable skin protection cushion.

STANDARD SIZES

List Price **\$364.00**
 HCPCS **K0734** (less than 22" width)
 Cover **Mesh or Incontinence**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 12x8 | 32800 | 32810 |
| 12x12 | 32200 | 32210 |
| 12x14 | 32400 | 32410 |
| 14x14 | 34400 | 34410 |
| 14x16 | 34600 | 34610 |
| 14x18 | 34800 | 34810 |
| 15x15 | 35500 | 35510 |
| 15x17 | 35700 | 35710 |
| 16x16 | 36600 | 36610 |
| 16x18 | 36800 | 36810 |
| 16x20 | 36000 | 36010 |
| 17x17 | 37700 | 37710 |
| 18x16 | 38300 | 38310 |
| 18x18 | 38800 | 38810 |
| 18x20 | 38000 | 38010 |
| 20x16 | 30600 | 30610 |
| 20x18 | 30800 | 30810 |
| 20x20 | 30000 | 30010 |

REPLACEMENT COVERS

STANDARD SIZES

List Price: **\$78.00**
 HCPCS **E2619**

| Size | Mesh | Incontinence |
|-------|-------|--------------|
| 12x8 | 04651 | 04702 |
| 12x12 | 04652 | 04711 |
| 12x14 | 04653 | 04712 |
| 14x14 | 04654 | 04715 |
| 14x16 | 04655 | 04719 |
| 14x18 | 04697 | 04720 |
| 15x15 | 04698 | 04721 |
| 15x17 | 04699 | 04722 |
| 16x16 | 04656 | 04725 |
| 16x18 | 04659 | 04726 |
| 16x20 | 04847 | 04727 |
| 17x17 | 04888 | 04728 |
| 18x16 | 04571 | 04729 |
| 18x18 | 04657 | 04730 |
| 18x20 | 04572 | 04731 |
| 20x16 | 04573 | 04741 |
| 20x18 | 04514 | 04781 |
| 20x20 | 04532 | 04785 |



REFLEX™

A non-adjustable cushion ideal for wheelchair users at moderate risk of tissue breakdown. This product is classified as a skin protection cushion.

The Reflex is a configured product. The first six digits make up the Medicare billing number.

STANDARD SIZES

List Price **\$182.00**
 HCPCS **E2603** (less than 22" width)
 Cover **Incontinence**

| Size | Incontinence |
|-------|--------------|
| 12x12 | 73500112122 |
| 12x14 | 73500112142 |
| 14x14 | 73500114142 |
| 14x16 | 73500114162 |
| 14x18 | 73500114182 |
| 14x20 | 73500114202 |
| 15x15 | 73500115152 |
| 15x17 | 73500115172 |
| 16x14 | 73500116142 |
| 16x16 | 73500116162 |
| 16x18 | 73500116182 |
| 16x20 | 73500116202 |
| 17x17 | 73500117172 |
| 18x16 | 73500118162 |
| 18x18 | 73500118182 |
| 18x20 | 73500118202 |
| 20x16 | 73500120162 |
| 20x18 | 73500120182 |
| 20x20 | 73500120202 |

REPLACEMENT COVERS

STANDARD SIZES

List Price: **\$62.50**
 HCPCS **E2619**

| Size | Incontinence |
|-------|--------------|
| 12x12 | 05534 |
| 12x14 | 05535 |
| 14x14 | 05536 |
| 14x16 | 05537 |
| 14x18 | 05538 |
| 14x20 | 05539 |
| 15x15 | 05540 |
| 15x17 | 05541 |
| 16x14 | 05542 |
| 16x16 | 05543 |
| 16x18 | 05544 |
| 16x20 | 05545 |
| 17x17 | 05546 |
| 18x16 | 05547 |
| 18x18 | 05548 |
| 18x20 | 05549 |
| 20x16 | 05578 |
| 20x18 | 05550 |
| 20x20 | 05551 |



REPLACEMENT WAVE BASES

WAVE CPW (Contoured Positioning Wedge)

| Size (WxD) | Item Number | List Price |
|------------|-------------|------------|
| 12x14 | 05410 | \$104.00 |
| 14x14 | 05411 | \$104.00 |
| 14x16 | 05412 | \$104.00 |
| 14x18 | 05400 | \$104.00 |
| 14x20 | 05401 | \$104.00 |
| 15x15 | 05402 | \$104.00 |
| 15x17 | 05403 | \$104.00 |
| 16x14 | 05404 | \$104.00 |
| 16x16 | 05413 | \$104.00 |
| 16x18 | 05414 | \$104.00 |
| 16x20 | 05415 | \$104.00 |
| 17x17 | 05416 | \$104.00 |
| 18x16 | 05417 | \$104.00 |
| 18x18 | 05418 | \$104.00 |
| 18x20 | 05419 | \$104.00 |
| 20x16 | 05420 | \$104.00 |
| 20x18 | 05421 | \$104.00 |
| 20x20 | 05422 | \$104.00 |

WAVE LPB (Lateral Positioning Base)

| Size (WxD) | Item Number | List Price |
|------------|-------------|------------|
| 12x14 | 05427 | \$104.00 |
| 14x14 | 05428 | \$104.00 |
| 14x16 | 05429 | \$104.00 |
| 14x18 | 05405 | \$104.00 |
| 14x20 | 05406 | \$104.00 |
| 15x15 | 05407 | \$104.00 |
| 15x17 | 05408 | \$104.00 |
| 16x14 | 05409 | \$104.00 |
| 16x16 | 05430 | \$104.00 |
| 16x18 | 05431 | \$104.00 |
| 16x20 | 05432 | \$104.00 |
| 17x17 | 05433 | \$104.00 |
| 18x16 | 05434 | \$104.00 |
| 18x18 | 05435 | \$104.00 |
| 18x20 | 05436 | \$104.00 |
| 20x16 | 05437 | \$104.00 |
| 20x18 | 05438 | \$104.00 |
| 20x20 | 05439 | \$104.00 |

BARIATRIC SIZES

| Size (WxD) | Item Number | List Price |
|------------|-------------|------------|
| 22x18 | 05423 | \$130.00 |
| 22x20 | 05424 | \$130.00 |
| 24x18 | 05425 | \$130.00 |
| 24x20 | 05426 | \$130.00 |

BARIATRIC SIZES

| Size (WxD) | Item Number | List Price |
|------------|-------------|------------|
| 22x18 | 05440 | \$130.00 |
| 22x20 | 05441 | \$130.00 |
| 24x18 | 05442 | \$130.00 |
| 24x20 | 05443 | \$130.00 |

WAVE CPB (Contoured Positioning Base)

| Size (WxD) | Item Number | List Price |
|------------|-------------|------------|
| 12x14 | 05444 | \$104.00 |
| 14x14 | 05445 | \$104.00 |
| 14x16 | 05446 | \$104.00 |
| 14x18 | 05461 | \$104.00 |
| 14x20 | 05462 | \$104.00 |
| 15x15 | 05463 | \$104.00 |
| 15x17 | 05464 | \$104.00 |
| 16x14 | 05465 | \$104.00 |
| 16x16 | 05447 | \$104.00 |
| 16x18 | 05447 | \$104.00 |
| 16x20 | 05449 | \$104.00 |
| 17x17 | 05450 | \$104.00 |
| 18x16 | 05451 | \$104.00 |
| 18x18 | 05452 | \$104.00 |
| 18x20 | 05453 | \$104.00 |
| 20x16 | 05454 | \$104.00 |
| 20x18 | 05455 | \$104.00 |
| 20x20 | 05456 | \$104.00 |

BARIATRIC SIZES

| Size (WxD) | Item Number | List Price |
|------------|-------------|------------|
| 22x18 | 05457 | \$130.00 |
| 22x20 | 05457 | \$130.00 |
| 24x18 | 05459 | \$130.00 |
| 24x20 | 05460 | \$130.00 |

SEATING SYSTEM ACCESSORIES

RIGIDIZERS (SOLID INSERTS)

VARILITE Rigidizers counter the effects of sling seating. A rigidizer offers an easy and cost-effective solution to the problem of sling seating.

List Price **\$36.50**
 HCPCS **E0992**

| Size (in.) (WxD) | Item Number |
|------------------|-------------|
| 12X12 | 04360 |
| 12X14 | 04390 |
| 14X14 | 04260 |
| 14X16/16X14 | 04380 |
| 14X18 | 04535 |
| 14X20 | 04536 |
| 15X15 | 04537 |
| 15X17 | 04538 |
| 16X16 | 04280 |
| 16X18/18X16 | 04300 |
| 16X20/20X16 | 04290 |
| 17X17 | 04389 |
| 18X18 | 04370 |
| 18X20/20X18 | 04240 |
| 20X20 | 04250 |

WEDGES

The modifiable wedge increases the weight-bearing load on the back of the thighs and decreases the load on the buttocks, without changing the seat-to-back angle.

List Price **\$52.00**
 HCPCS **none**

| Size (in.) | Item Number |
|------------|-------------|
| 12 | 04352 |
| 14 | 04355 |
| 15 | 04574 |
| 16 | 04357 |
| 17 | 04377 |
| 18 | 04358 |
| 20 | 04359 |

BARIATRIC WEDGES

List Price **\$52.00**
 HCPCS **none**

| Size (in.) | Item Number |
|------------|-------------|
| 22 | 04397 |
| 24 | 04399 |

SEATING SYSTEM ACCESSORIES

DROP BASE SYSTEM

The Drop Base is essential for wheelchair users who need to sit lower for self-propelling or transferring.

| Size (in.) (WxD) | Item Number | List Price |
|------------------------|-------------|------------|
| 14x16 (fits 13-14 in.) | 04388 | \$390.00 |
| 16x16 (fits 15-16 in.) | 04288 | \$390.00 |
| 16x18 (fits 15-16 in.) | 04308 | \$390.00 |
| 18x16 (fits 17-18 in.) | 04278 | \$390.00 |
| 18x18 (fits 17-18 in.) | 04378 | \$390.00 |
| 20x20 (fits 19-20 in.) | 04258 | \$390.00 |

DROP BASE ACCESSORIES

| Hardware Kit | Item Number | List Price |
|--------------|-------------|------------|
| One size | 04351 | \$156.00 |

FINGER LOCK HARDWARE KIT

| Size | Item Number | List Price |
|----------|-------------|------------|
| One size | 04330 | \$21.00 |

CHEAT SHEETS™

Cheat Sheets are sheets of adhesive-backed foam used to create custom seating solutions. Each package includes four 10x10 inch sheets.

| Size | Item Number | List Price |
|----------|-------------|------------|
| One size | 02102 | \$42.00 |

CUSHION REPAIR KITS

| Description | Item Number | List Price |
|--------------------|-------------|------------|
| Repair Kit | 04101 | \$9.00 |
| Standard Valve Kit | 04221 | \$9.00 |
| PSV Valve Kit | 08949 | \$9.00 |



EVOLUTION BACK™ AND EVOLUTION BACK DEEP™

An ideal positioning back for wheelchair users with moderate to maximum support needs. This product is classified as a positioning wheelchair back cushion.

EVOLUTION BACK REGULAR

Standard Sizes

List Price **\$445.00**
 HCPCS **E2613** (less than 22" width)

| Size (in.) | Item Number | Height (in.) |
|------------|-------------|--------------|
| 12 | 47506 | 10.2 |
| 14 | 47500 | 12 |
| 15 | 47501 | 13 |
| 16 | 47502 | 14 |
| 17 | 47503 | 15 |
| 18 | 47504 | 16 |
| 20 | 47505 | 18 |

Bariatric Sizes

List Price **\$650.00**
 HCPCS **E2614** (22" or greater width)

| Size (in.) | Item Number | Height (in.) |
|------------|-------------|--------------|
| 22 | 47507 | 18 |
| 24 | 47508 | 18 |

EVOLUTION BACK TALL

List Price **\$505.00**
 HCPCS **E2613** (less than 22" width)

| Size (in.) | Item Number | Height (in.) |
|------------|-------------|--------------|
| 12 | 47516 | 14 |
| 14 | 47510 | 16.3 |
| 15 | 47511 | 17.5 |
| 16 | 47512 | 19 |
| 17 | 47513 | 20.5 |
| 18 | 47514 | 22 |
| 20 | 47515 | 25 |

EVOLUTION BACK DEEP

Deep contouring and extra lateral support are ideal for the geriatric user or anyone with poor trunk control.

List Price **\$675.00**
 HCPCS **E2620** (less than 22" width)

| Size (in.) | Item Number | Height (in.) |
|------------|-------------|--------------|
| 14 | 47518 | 16.8 |
| 15 | 47520 | 18 |
| 16 | 47522 | 19.2 |
| 17 | 47524 | 20.8 |
| 18 | 47526 | 22.2 |
| 20 | 47528 | 25.2 |



EVOLUTION BACK™ REPLACEMENT COVERS

EVOLUTION BACK REGULAR

Covers

List Price **\$70.00**
HCPCS **E2619**

| Size (in.) | Item Number |
|------------|-------------|
| 12 | 04618 |
| 14 | 04610 |
| 15 | 04611 |
| 16 | 04612 |
| 17 | 04613 |
| 18 | 04614 |
| 20 | 04615 |

Bariatric Covers

List Price **\$100.00**
HCPCS **E2619**

| Size (in.) | Item Number |
|------------|-------------|
| 22 | 04619 |
| 24 | 04636 |

EVOLUTION BACK TALL

Covers

List Price **\$80.00**
HCPCS **E2619**

| Size (in.) | Item Number |
|------------|-------------|
| 12 | 04637 |
| 14 | 04630 |
| 15 | 04631 |
| 16 | 04632 |
| 17 | 04633 |
| 18 | 04634 |
| 20 | 04635 |

EVOLUTION BACK DEEP

Covers

List Price **\$120.00**
HCPCS **E2619**

| Size (in.) | Item Number |
|------------|-------------|
| 14 | 04639 |
| 15 | 04603 |
| 16 | 04604 |
| 17 | 04609 |
| 18 | 04616 |
| 20 | 04617 |



EVOLUTION BACK™ REPLACEMENT CUSHIONS

EVOLUTION BACK REGULAR

Cushions

List Price **\$200.00**
 HCPCS **none**

| Size (in.) | Item Number |
|------------|-------------|
| 12 | 01348 |
| 14 | 01267 |
| 15 | 01268 |
| 16 | 01288 |
| 17 | 01288 |
| 18 | 01289 |
| 20 | 01293 |

Bariatric Cushions

List Price **\$250.00**
 HCPCS **none**

| Size (in.) | Item Number |
|------------|-------------|
| 22 | 01349 |
| 24 | 01350 |

EVOLUTION BACK TALL

Cushions

List Price **\$225.00**
 HCPCS **none**

| Size (in.) | Item Number |
|------------|-------------|
| 12 | 01358 |
| 14 | 01312 |
| 15 | 01308 |
| 16 | 01309 |
| 17 | 01317 |
| 18 | 01318 |
| 20 | 01319 |

EVOLUTION BACK DEEP

Cushions

List Price **\$250.00**
 HCPCS **none**

| Size (in.) | Item Number |
|------------|-------------|
| 14 | 01364 |
| 15 | 01337 |
| 16 | 01338 |
| 17 | 01339 |
| 18 | 01343 |
| 20 | 01347 |



EVOLUTION BACK™ HARDWARE AND ACCESSORIES

HARDWARE

| Description | Item Number | List Price |
|----------------------------------|-------------|------------|
| Hardware Kit | 04650 | \$95.00 |
| Upper Cane Clips | 04660 | \$55.00 |
| Lower Cane Clips | 04670 | \$55.00 |
| Standard Pin Bar Assembly (pair) | 04581 | \$25.00 |
| Extended pin bar assembly (pair) | 04582 | \$30.00 |
| 7/8" Shim Kit | 04595 | \$15.00 |
| 3/4" Shim Kit | 04596 | \$15.00 |
| 5/8" Shim Kit | 04597 | \$15.00 |
| 1/2" Shim Kit | 04598 | \$15.00 |

SUPPORTS

| Description | Item Number | List Price |
|----------------------------------|-------------|------------|
| PSIS Block Lumbar Support-Small | 04248 | \$40.00 |
| PSIS Block Lumbar Support-Medium | 04249 | \$40.00 |
| PSIS Block Lumbar Support- Large | 04259 | \$40.00 |
| Supplemental Lateral Support | 04266 | \$40.00 |

THE BACKREST™

Ideal for relieving stress and fatigue that cause backache. The BackRest promotes a healthy posture.

| Description | Item Number | List Price |
|----------------------------|-------------|------------|
| Charcoal | 03997 | \$35.00 |
| Navy | 03998 | \$35.00 |
| Accessory Cover with Strap | 04062 | \$20.00 |



eBACK™

The eBack is the system of choice for clients requiring more support than a sling back can provide. This product is classified as a general use wheelchair back cushion.

The eBack is a configured product. The first six digits make up the Medicare billing number.

eBACK REGULAR

List Price **\$350.00**
 HCPCS **E2611** (less than 22" width)

| Size (in.) | Item Number | Height (in.) |
|------------|-------------|--------------|
| 12 | 420011121 | 10.2 |
| 14 | 420011141 | 12 |
| 15 | 420011151 | 13 |
| 16 | 420011161 | 14 |
| 17 | 420011171 | 15 |
| 18 | 420011181 | 16 |
| 20 | 420011201 | 18 |

Bariatric Sizes

List Price **\$465.00**
 HCPCS **E2612** (22" or greater width)

| Size (in.) | Item Number | Height (in.) |
|------------|-------------|--------------|
| 22 | 422011221 | 18 |
| 24 | 422011241 | 18 |

eBACK TALL

List Price **\$375.00**
 HCPCS **E2611** (less than 22" width)

| Size (in.) | Item Number | Height (in.) |
|------------|-------------|--------------|
| 12 | 420021121 | 14 |
| 14 | 420021141 | 16.3 |
| 15 | 420021151 | 17.5 |
| 16 | 420021161 | 19 |
| 17 | 420021171 | 20.5 |
| 18 | 420021181 | 22 |
| 20 | 420021201 | 25 |



eBACK™ REPLACEMENT PARTS

eBACK REGULAR

Cushions

List Price **\$200.00**
 HCPCS **none**

| Size (in.) | Item Number |
|------------|-------------|
| 12 | 01560 |
| 14 | 01561 |
| 15 | 01562 |
| 16 | 01563 |
| 17 | 01564 |
| 18 | 01565 |
| 20 | 01566 |

Covers

List Price **\$70.00**
 HCPCS **E2619**

| Size (in.) | Item Number |
|------------|-------------|
| 12 | 01714 |
| 14 | 01715 |
| 15 | 01716 |
| 16 | 01717 |
| 17 | 01718 |
| 18 | 01719 |
| 20 | 01720 |

Bariatric Cushions

List Price **\$250.00**
 HCPCS **none**

| Size (in.) | Item Number |
|------------|-------------|
| 22 | 01567 |
| 24 | 01568 |

Bariatric Covers

List Price **\$100.00**
 HCPCS **E2619**

| Size (in.) | Item Number |
|------------|-------------|
| 22 | 01721 |
| 24 | 01722 |

eBACK TALL

Cushions

List Price **\$225.00**
 HCPCS **none**

| Size (in.) | Item Number |
|------------|-------------|
| 12 | 01570 |
| 14 | 01571 |
| 15 | 01572 |
| 16 | 01573 |
| 17 | 01574 |
| 18 | 01575 |
| 20 | 01576 |

Covers

List Price **\$80.00**
 HCPCS **E2619**

| Size (in.) | Item Number |
|------------|-------------|
| 12 | 01723 |
| 14 | 01724 |
| 15 | 01725 |
| 16 | 01726 |
| 17 | 01727 |
| 18 | 01728 |
| 20 | 01729 |

HARDWARE

| Description | Item Number | List Price |
|----------------------------------|-------------|------------|
| Hardware Kit | 04650 | \$95.00 |
| Upper Cane Clips | 04660 | \$55.00 |
| Lower Cane Clips | 04670 | \$55.00 |
| Standard Pin Bar Assembly (pair) | 04581 | \$25.00 |
| 7/8" Shim Kit | 04595 | \$15.00 |



TALON™

Ideal for those with spinal cord injuries. The Talon offers PSIS support while allowing a full range of motion. This product is classified as a general use wheelchair back cushion.

List Price **\$350.00**
 HCPCS **E2611** (less than 22" width)

| Size (in.) | Item Number | Height (in.) |
|------------|-------------|--------------|
| 14 | 47517 | 6.1 |
| 15 | 47519 | 6.6 |
| 16 | 47521 | 7 |
| 17 | 47523 | 7.5 |
| 18 | 47525 | 7.8 |
| 20 | 47527 | 8.8 |

No-charge mounting bracket (required) *

| Size | Item Number |
|--------|-------------|
| Short | 47532 |
| Medium | 47533 |
| Long | 47534 |

***Replacements are \$35.00 MSRP**

REPLACEMENT COVERS

List Price **\$90.00**
 HCPCS **E2619**

| Size (in.) | Item Number |
|------------|-------------|
| 14 | 04638 |
| 15 | 04642 |
| 16 | 04647 |
| 17 | 04648 |
| 18 | 04649 |
| 20 | 04658 |

REPLACEMENT CUSHIONS

List Price **\$115.00**
 HCPCS none

| Size (in.) | Item Number |
|------------|-------------|
| 14 | 01359 |
| 15 | 01368 |
| 16 | 01369 |
| 17 | 01371 |
| 18 | 01377 |
| 20 | 01378 |

MODESTY KIT

List Price **\$30.00**
 HCPCS none

| Size (in.) | Item Number |
|------------|-------------|
| 14-15 | 04584 |
| 16-17 | 04585 |
| 18-20 | 04586 |

MOUNTING KIT

List Price **\$150.00**
 HCPCS none

| Size | Item Number |
|--------|-------------|
| Short | 47529 |
| Medium | 47530 |
| Long | 47531 |



PAL™ SWING-AWAY LATERAL SUPPORTS

VARILITE PAL swing-away thoracic supports are designed to complement regular and tall Evolution Back™ and eBack™ systems. PAL (Positive Action Lateral) supports allow for hinge angle, pad rotation and horizontal pad adjustment.

STEP 1 - ADD SWING AWAY-HINGE (SOLD AS EACH)

List Price **\$112.50**
 List Price **E0128**

| Item Number | Description |
|-------------|-----------------|
| 04374 | Hinge Mechanism |

STEP 2 - SELECT TYPE OF BRACKET (SOLD AS EACH)

List price **\$75.00**
 HCPCS **E0956**

| Short | (Horizontal pad adjustment 1") |
|-------|--------------------------------|
| 89050 | Fits Evolution Back 12" |
| 89010 | Fits Evolution Back 14-15" |
| 89020 | Fits Evolution Back 16-17" |
| 89030 | Fits Evolution Back 18" |
| 89040 | Fits Evolution Back 20-24" |

| Long | (Horizontal pad adjustment 2 ¼") |
|-------|----------------------------------|
| 89150 | Fits Evolution Back 12" |
| 89110 | Fits Evolution Back 14-15" |
| 89120 | Fits Evolution Back 16-17" |
| 89130 | Fits Evolution Back 18" |
| 89140 | Fits Evolution Back 20-24" |

| Offset | (Horizontal pad adjustment 1") |
|--------|--------------------------------|
| 89250 | Fits Evolution Back 12" |
| 89210 | Fits Evolution Back 14-15" |
| 89220 | Fits Evolution Back 16-17" |
| 89230 | Fits Evolution Back 18" |
| 89240 | Fits Evolution Back 20-24" |

STEP 3 - SELECT TYPE OF PAD (SOLD AS EACH)

List Price Included in price of bracket. Replacements are \$37.50 each.
 HCPCS Included in HCPCS code for bracket.

| Contoured | Size (in.) |
|-----------|------------|
| 04317 | 3X4 |
| 04319 | 4X5 |
| 04321 | 5X6 |

| Linear | Size (in.) |
|--------|------------|
| 04307 | 3X4 |
| 04309 | 4X5 |
| 04311 | 5X6 |

LATERAL SUPPORT SYSTEM ACCESSORIES

| Item Number | Description | List Price |
|-------------|-----------------|------------|
| 04577 | PAL Hinge Cover | \$6.00 |



FIXED LATERAL SUPPORTS

Fixed lateral supports are available for situations when a swing-away lateral is not required.

STEP 1 - SELECT TYPE OF BRACKET (SOLD AS EACH)

List price **\$75.00**
HCPCS **E0956**

| Long | (Horizontal pad adjustment 2 ¼") |
|-------------|---|
| 88050 | Fits Evolution Back 12" |
| 88010 | Fits Evolution Back 14-15" |
| 88020 | Fits Evolution Back 16-17" |
| 88030 | Fits Evolution Back 18" |
| 88040 | Fits Evolution Back 20-24" |

STEP 2 - SELECT TYPE OF PAD (SOLD AS EACH)

List Price Included in price of bracket. Replacements are \$37.50 each.
HCPCS Included in HCPCS code for bracket.

| Contoured | Size (in.) |
|------------------|-------------------|
| 04317 | 3X4 |
| 04319 | 4X5 |
| 04321 | 5X6 |

| Linear | Size (in.) |
|---------------|-------------------|
| 04307 | 3X4 |
| 04309 | 4X5 |
| 04311 | 5X6 |

SECONDARY SUPPORTS - PELVIC POSITIONING

VARILITE hip belts enhance posture and function by positioning the pelvis.

2-POINT UNPADDED HIP BELTS - SINGLE PULL

HCPCS E0978

| Item Number | Description | Buckle Material | Length (in.) | Width (in.) | List Price |
|-------------|----------------|-----------------|--------------|-------------|------------|
| 81022 | Aircraft latch | MTM | 60" | 2 | \$75.00 |
| 82022 | Push button | MTM | 60" | 2 | \$35.00 |

2-POINT PADDED HIP BELTS - FRONT PULL

HCPCS E0978

| Item Number | Description | Buckle Material | Pad size (in.) | Width (in.) | List Price |
|-------------|--|-----------------|----------------|-------------|------------|
| 83212 | Medium, push button, single pull | MTM | 9x2½ | 1 ½ | \$75.00 |
| 83312 | Large, push button, single pull | MTM | 10⅝x2½ | 1 ½ | \$80.00 |
| 83012 | Extra small, side squeeze, single pull | MTM | 4x1½ | 1 | \$70.00 |
| 83112 | Small, side squeeze, single pull | MTM | 6x1½ | 1 | \$70.00 |
| 85012 | Extra small, side squeeze, single pull | Molded | 4x1½ | 1 | \$50.00 |
| 85112 | Small, side squeeze, single pull | Molded | 6x1½ | 1 | \$50.00 |
| 84212 | Medium, side squeeze, dual pull | Molded | 9x2½ | 1 ½ | \$55.00 |
| 84312 | Large, side squeeze, dual pull | Molded | 10⅝x2½ | 1 ½ | \$60.00 |

2-POINT PADDED HIP BELTS - REVERSE PULL (REAR PULL)

HCPCS E0978

| Item Number | Description | Buckle Material | Pad Size (in.) | Width (in.) | List Price |
|-------------|---------------------------|-----------------|----------------|-------------|------------|
| 83216 | Medium, push button | MTM | 9x2½ | 1 ½ | \$80.00 |
| 83316 | Large, push button | MTM | 10⅝x2½ | 1 ½ | \$85.00 |
| 83016 | Extra small, side squeeze | MTM | 4x1½ | 1 | \$75.00 |
| 83116 | Small, side squeeze | MTM | 6x1½ | 1 | \$75.00 |
| 85016 | Extra small, side squeeze | Molded | 4x1½ | 1 | \$55.00 |
| 85116 | Small, side squeeze | Molded | 6x1½ | 1 | \$55.00 |

4-POINT PADDED HIP BELTS - FRONT PULL

HCPCS E0978

| Item Number | Description | Buckle Material | Pad Size (in.) | Width (in.) | List Price |
|-------------|--|-----------------|----------------|-------------|------------|
| 83214 | Medium, push button, single pull | MTM | 9x2½ | 1 ½ | \$95.00 |
| 83314 | Large, push button, single pull | MTM | 10⅝x2½ | 1 ½ | \$95.00 |
| 85014 | Extra small, side squeeze, single pull | MTM | 4x1½ | 1 | \$90.00 |
| 85114 | Small, side squeeze, single pull | MTM | 6x1½ | 1 | \$90.00 |
| 84214 | Medium, side squeeze, dual pull | Molded | 9x2½ | 1 ½ | \$80.00 |
| 84314 | Large, side squeeze, dual pull | Molded | 10⅝x2½ | 1 ½ | \$85.00 |

SECONDARY SUPPORTS - CHEST AND ANKLE

COUNTURED CHEST HARNESS - TOP PULL

| Item Number | Description | Pad Size (in.) | Width (in.) | List Price | HCPCS |
|-------------|---|----------------|-------------|------------|-------|
| 87115 | Extra small, side squeeze, shoulder cam | 9x1½ | ¾ | \$130.00 | E0960 |
| 87215 | Small, side squeeze, shoulder cam | 13¾x1¾ | 1 | \$130.00 | E0960 |
| 87315 | Medium, side squeeze, shoulder cam | 16x1¾ | 1 | \$130.00 | E0960 |
| 87415 | Large, side squeeze, shoulder cam | 18x1¾ | 1 | \$130.00 | E0960 |

2-POINT CHEST BELT- CENTER PULL

| Item Number | Description | Width (in.) | List Price | HCPCS |
|-------------|----------------------|-------------|------------|-------|
| 88027 | Large, hook and loop | 2 | \$40.00 | E0960 |

BOTTOM PULL HARNESS ACCESSORY

| Item Number | Description | List Price |
|-------------|-----------------|------------|
| 87116 | Fits ¾" webbing | \$12.50 |
| 87117 | Fits 1" webbing | \$12.50 |

BAND-IT™ ANKLE SUPPORT- SINGLE PULL

| Item Number | Description | List Price | HCPCS |
|-------------|---|------------|-------|
| 89003 | Extra small, side squeeze, 4-6" circumference | \$115.00 | K0108 |
| 89000 | Small, side squeeze, 6-9" circumference | \$115.00 | K0108 |
| 89001 | Medium, side squeeze, 9-11" circumference | \$115.00 | K0108 |
| 89002 | Large, side squeeze, 11-13" circumference | \$115.00 | K0108 |

TRI-END HARDWARE

| Item Number | Description | List Price |
|-------------|---|------------|
| 80000 | Tri-End fitting, pair, ¾" | \$10.50 |
| 80100 | Tri-End fitting, pair, 1" | \$10.50 |
| 80200 | Tri-End fitting, pair, 1½" | \$10.50 |
| 80300 | Tri-End fitting, pair, 2" | \$10.50 |
| 80500 | Dual tab Tri-End fitting, set of four, 1" | \$10.50 |

CAM LOCK BUCKLES

| Item Number | Description | List Price |
|-------------|---------------------------|------------|
| 80001 | Cam lock buckle, pair, 1" | \$4.00 |

FRAME CLAMPS

| Item Number | Description | List Price |
|-------------|-------------------------|------------|
| 80102 | Frame Clamp, pair, ¾" | \$4.00 |
| 80202 | Frame Clamp, pair, 7/8" | \$4.00 |
| 80302 | Frame Clamp, pair, 1" | \$4.00 |



TERMS AND CONDITIONS OF SALE

TERMS:

Standard billing terms are Net 30 from invoice date on accounts approved for open credit.

NEW ACCOUNTS ONLY:

All new accounts must be approved by the area sales rep. To establish credit, a completed credit application must be received. Please allow two business days for processing. If product is needed immediately, we welcome the use of Visa® or MasterCard® to expedite your order.

MINIMUM ORDER:

Seating Systems: \$100.00 with a \$10.00 handling fee for orders under \$100.00
Belts and Harnesses: No minimum.

SHIPPING:

All shipments are FOB, Seattle, WA unless otherwise indicated. Freight charges will be prepay and additional.

RETURNS:

All returns are subject to a 15% restocking charge plus all applicable freight charges. Merchandise may not be returned without prior approval of Cascade Designs, Inc. Please call for a return authorization number. All claims for shortages or damages must be made within 10 days of receipt of shipment.

PAYMENTS:

Cascade Designs, Inc. welcomes the use of Visa, MasterCard, or EFT (Electronic Funds Transfer) as payment for invoices. Checks should be payable in US funds to Cascade Designs, Inc., PO Box 94547, Seattle, WA 98124-6847. Dealer agrees to pay each invoice in accordance with its terms.

PAST DUE ACCOUNTS:

Cascade Designs, Inc. may impose a service charge of 1.5% per month or the highest amount allowable by law, whichever is less, on any unpaid balance. Cascade Designs, Inc. may place all delinquent accounts on prepay terms and exercises the right to hold all shipments for credit review at our discretion.

These terms and conditions are effective January 01, 2009. VARILITE reserves the right to change the Terms and Conditions of Sale at any time.



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