

Quantum® 6000Z HD Series

Group 3 Heavy Duty
Single Power & Multiple Power Order Form
450 lbs. weight capacity



Quantum Rehab®

A Division of Pride Mobility Products Corporation®
182 Susquehanna Ave., Exeter, PA 18643
Phone: (866)800-2002 • Fax: (866) 707-3422 or e-mail
quantumorders@pridemobility.com

ACCOUNT INFO

Account Number: _____
Provider Name: _____
Contact Name: _____
Phone #: _____
Fax #: _____
E-mail Address: _____

Date: _____
PO#: _____
Marked For: _____
3 Column Pricing on Quote/Order: Yes No
Quote #: _____

Ship To: _____
Address: _____
City: _____ State: _____ Zip: _____
Lift Gate Needed: Yes No

Taken By: _____

SET-TO-SPEC*

Please Supply Client Information:

Client Height: _____
Client Weight: _____

Mount Hip/Thigh Supports: Yes No
Mount Lateral Thoracic Supports: Yes No

Armrest Height from Pan: _____

Rigging Length (whole numbers only): _____

Seat to Floor Height (check one):

NOTES:

Seat	Seat-To-Floor Heights			
TRU-Balance® Bariatric Tilt (Fixed Towers)	18.375"	19.25"	20.125"	21"
TRU-Balance® Bariatric Tilt (Angle Adjustable Towers)	19"	19.875"	20.75"	21.625"
TRU-Balance® Bariatric Tilt (Super Low)	18"	18.5"	19"	19.5"


Seat to floor height are +/- 1/8" with 24"W x 24"D with Flat-Free tires (add 3/8" for pneumatic tires).

* While every effort will be taken to ensure dimensions will be preset to your specifications prior to shipping variations in options may effect final settings.

DME providers are responsible for determining appropriate billing codes when submitting for insurance reimbursement. HCPCS codes should not be considered as legal advice. All prices are MSRP.

BASE MODEL	PROGRAMMING
------------	-------------

Description	Price	HCPCS Code
<input type="checkbox"/> Quantum Q6000Z HD 3SPHD-SS	\$7,560	K0858
<input type="checkbox"/> Quantum Q6000Z HD 3MPHD-SS <i>Contact your Quantum Specialist for Multiple Power Options</i>	\$7,360	K0862

Description	Price	
<input type="checkbox"/> Q-Logic Handheld Programmer 	\$545	
<input type="checkbox"/> Q-Logic PC Programming Cable with Disk ¹	\$750	

1. Works with Q-Logic EX only.

COLORS

Metallic Colors:

<input type="checkbox"/> Metallic Red	<input type="checkbox"/> Metallic Black
<input type="checkbox"/> Metallic Blue	<input type="checkbox"/> Metallic Silver
<input type="checkbox"/> Sunburst Orange	

DRIVE WHEELS

Description	Price
<input type="checkbox"/> 14" Flat-Free (pair)	Standard
<input type="checkbox"/> 14" Pneumatic (pair)	No Charge

JOYSTICK HANDLES

Description	Price	HCPCS Code
<input type="checkbox"/> Standard Carrot Handle	Standard	
<input type="checkbox"/> Mushroom Handle	\$71	E2323
<input type="checkbox"/> T-Bar	\$107	E2323
<input type="checkbox"/> Chin Cup	\$71	E2324 ¹
<input type="checkbox"/> Extended I-Handle	\$71	E2323
<input type="checkbox"/> Soft Ball Handle	\$50	E2323
<input type="checkbox"/> Medium Ball Handle	\$50	E2323
<input type="checkbox"/> Bodypoint 3" Goal Post Handle	\$69	E2323
<input type="checkbox"/> Bodypoint 4" Goal Post Handle	\$69	E2323

1. Use HCPCS code E2323 when not used in conjunction with a chin control.

BASE MOUNTED FOOT PLATFORM

Description	Price
<input type="checkbox"/> Base Mounted Foot Platform Installed	Standard
<input type="checkbox"/> No Base Mounted Foot Platform	No Charge

JOYSTICK MOUNTING BRACKETS

Description	Price	HCPCS Code
<i>Comes Standard with a Quick Release, Adjustable-Height Joystick Block</i>		
<input type="checkbox"/> Fixed Inline ¹	Standard	
Side: <input type="checkbox"/> Left <input type="checkbox"/> Right		
<input type="checkbox"/> Swing-away	\$210	E1028
Side: <input type="checkbox"/> Left <input type="checkbox"/> Right		
Style: <input type="checkbox"/> Inline <input type="checkbox"/> Offset		
Length: <input type="checkbox"/> 4" Ext. <input type="checkbox"/> 7" Ext. ²		
<input type="checkbox"/> Multi-axis Fixed	\$100	K0108
Side: <input type="checkbox"/> Left <input type="checkbox"/> Right		

1. Not available with Q-Logic EX Stand Alone Joystick
2. In iQuantum choose in addition to Swing-Away 4" mount.

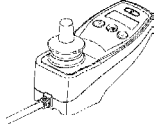
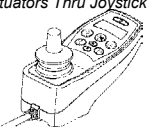
BATTERY CHARGER

Description	Price
<input type="checkbox"/> 8 Amp Off-board Charger	Standard

LED LIGHT PACKAGE

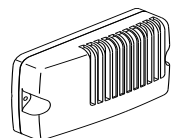
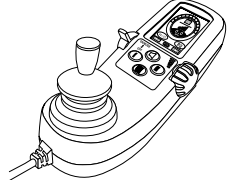
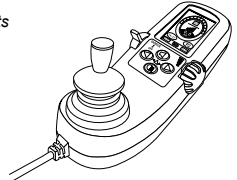
Description	Price
<input type="checkbox"/> Through Q-Logic EX or NE+ 8-Key w/ Lights	\$995

NON-EXPANDABLE CONTROLS

Description	Price	HCPCS Code
<input type="checkbox"/> 75 Amp NE 	Standard	
<input type="checkbox"/> 75 Amp NE+ 6-Key For Up To 2 Actuators Thru Joystick 	\$200 <i>Standard on 3SP-SS Package</i>	

EXPANDABLE CONTROLS

Q-Logic EX Joystick or Enhanced Display must be ordered with a Q-Logic EX Controller and Harness For Expandable Controls

Description	Price	HCPCS Code
<input type="checkbox"/> 100 Amp Q-Logic EX Controller 	\$695	E2377
<input type="checkbox"/> Expandable Controller Harness	\$350	E2313
<input type="checkbox"/> Q-Logic EX Joystick 	\$700	
<input type="checkbox"/> Q-Logic EX Joystick for Lights 	\$700	

SEATING SYSTEM

Description	Price	HCPCS Code
<input type="checkbox"/> TRU-Balance® HD Power Tilt <i>40 Degree Center of Gravity (CG) Power Tilt with Full Drive Lockout at 20 Degrees</i>	\$7,250	E1002
<input type="checkbox"/> Super Low Option ¹	No Charge	

1. Requires Group 34 batteries.

SEATING SPECIFICATIONS

Tower Selection:

<input type="checkbox"/> Angle Adjustable	<input type="checkbox"/> Super Low	<input type="checkbox"/> Fixed
---	------------------------------------	--------------------------------

Seat Width:

<input type="checkbox"/> 20"	<input type="checkbox"/> 21"	<input type="checkbox"/> 22"	<input type="checkbox"/> 23"	<input type="checkbox"/> 24"
<input type="checkbox"/> 25"	<input type="checkbox"/> 26"	<input type="checkbox"/> 27"	<input type="checkbox"/> 28"	

Seat Width Packages:

<input type="checkbox"/> 20"W-24"W	<input type="checkbox"/> 24"W-28"W
------------------------------------	------------------------------------

Seat Depth:

<input type="checkbox"/> 15"	<input type="checkbox"/> 16"	<input type="checkbox"/> 17"	<input type="checkbox"/> 18"	<input type="checkbox"/> 19"
<input type="checkbox"/> 20"	<input type="checkbox"/> 21"	<input type="checkbox"/> 22"	<input type="checkbox"/> 23"	<input type="checkbox"/> 24"
<input type="checkbox"/> 25"	<input type="checkbox"/> 26"	<input type="checkbox"/> 27"	<input type="checkbox"/> 28"	

Seat Depth Package:

<input type="checkbox"/> 14"D-18"D	<input type="checkbox"/> 15"D-20"D	<input type="checkbox"/> 20"D-24"D	<input type="checkbox"/> 24"D-28"D
------------------------------------	------------------------------------	------------------------------------	------------------------------------

Back Cane Height:

<input type="checkbox"/> 14"	<input type="checkbox"/> 15"	<input type="checkbox"/> 16"	<input type="checkbox"/> 17"	<input type="checkbox"/> 18"
<input type="checkbox"/> 19"	<input type="checkbox"/> 20"	<input type="checkbox"/> 21"	<input type="checkbox"/> 22"	<input type="checkbox"/> 23"
<input type="checkbox"/> 24"	<input type="checkbox"/> 25"			

BACK OPTIONS

Description	Price	HCPCS Code
Tilt Back:		
<input type="checkbox"/> Omit Back	(-\$100)	
<input type="checkbox"/> Synergy® Back with 1.5" Thick Back Cushion	No Charge	
Overall Back <input type="checkbox"/> 18" H <input type="checkbox"/> 19" H <input type="checkbox"/> 20" H <input type="checkbox"/> 21" H		
Height: <input type="checkbox"/> 22" H <input type="checkbox"/> 23" H <input type="checkbox"/> 24" H <input type="checkbox"/> 25" H		
Choose Lateral Extensions ¹ :		
<input type="checkbox"/> 6" for 13"-16" H Back	\$25	
<input type="checkbox"/> 10" for 17"-18" H Back	\$25	
<input type="checkbox"/> 12" For 19"-22" H Back	\$25	
<input type="checkbox"/> 16" For 23"-25" H Back	\$25	
<input type="checkbox"/> TRU-Comfort™ Back 4-way Stretch Material Cover		
Width: <input type="checkbox"/> 16" W <input type="checkbox"/> 18" W <input type="checkbox"/> 20" W	\$595	E2620
Overall Back <input type="checkbox"/> 20" H <input type="checkbox"/> 21" H <input type="checkbox"/> 22" H <input type="checkbox"/> 23" H		
Height ² : <input type="checkbox"/> 24" H <input type="checkbox"/> 25" H <input type="checkbox"/> 27" H <input type="checkbox"/> 28" H		
Width: <input type="checkbox"/> 17" W <input type="checkbox"/> 19" W	\$595	E2620
Overall Back <input type="checkbox"/> 22" H <input type="checkbox"/> 23" H <input type="checkbox"/> 24" H <input type="checkbox"/> 25" H		
Height ² : <input type="checkbox"/> 27" H <input type="checkbox"/> 28" H		
Width: <input type="checkbox"/> 22" W <input type="checkbox"/> 24" W	\$695	E2621
Overall Back <input type="checkbox"/> 24" H <input type="checkbox"/> 25" H <input type="checkbox"/> 27" H <input type="checkbox"/> 28" H		
Height ² :		

Tru Comfort Color Shroud Option: Black (Standard color option)**Metallic Colors:\$100**

- Red
 Blue
 Sunburst Orange
 Silver

Tilt Back Options:

- Standard Back Canes Standard
 Omit Push Handles \$125
 Offset (Meso) \$195
 2" (1" Per Side) 4" (2" Per Side)
 Inset (Endo) \$195
 2" (1" Per Side) 4" (2" Per Side)

1. Lateral extensions are required to mount lateral thoracic supports.

2. Overall Back height measurement is measured from the seat pan to the top of the back, +/- 1/2".

ARMRESTS

Description	Price
<input type="checkbox"/> Bariatric, Removable Height Adjustable ¹	Standard
<input type="checkbox"/> 8"H-12"H <input type="checkbox"/> 10"H-14"H	
<input type="checkbox"/> Height Adjustable Cantilever Armrests ²	\$195
Angle Adjustable: -30° through +30°	

1. Bariatric armrests are full length and require bariatric armpads.

2. Height adjustment from 11"-17" depends on cane height.

ARMPADS

Description	Price
<input type="checkbox"/> Straight, Full Length (2"x14")	Standard
<input type="checkbox"/> Left <input type="checkbox"/> Right	
<input type="checkbox"/> Straight, Desk Length (2"x10")	No Charge
<input type="checkbox"/> Left <input type="checkbox"/> Right	
<input type="checkbox"/> Waterfall, Full Length (2"x14") ¹	No Charge
<input type="checkbox"/> Left <input type="checkbox"/> Right	
<input type="checkbox"/> Waterfall, Desk Length (2"x10") ¹	No Charge
<input type="checkbox"/> Left <input type="checkbox"/> Right	

1. Not available w/ Cane Mounted, Flip Back Armrests combined with a Synergy Back.

ARMPADS (CONT'D)

Description	Price
<input type="checkbox"/> Falcon Gel, Full Length, (3.5"x14")*	\$160 pr.
<input type="checkbox"/> Left <input type="checkbox"/> Right	
<input type="checkbox"/> Full Length Gel Armpad Mounting Plate (Required)*	\$56.69 ea.
<input type="checkbox"/> Falcon Gel, Desk Length, (3.5"x10")*	\$125 pr.
<input type="checkbox"/> Left <input type="checkbox"/> Right	
<input type="checkbox"/> Desk Length Gel Armpad Mounting Plate (Required)*	\$53.52 ea.
<input type="checkbox"/> Flat, Bariatric ²	No Charge
<input type="checkbox"/> Left <input type="checkbox"/> Right	

2. Bariatric armrests are full length and require bariatric armpads.

POWER POSITIONING ELECTRONICS

Description	Price	HCPCS Code
Single Actuator Electronics:		
<input type="checkbox"/> Through Toggle Box	No Charge	
<input type="checkbox"/> Left Mount <input type="checkbox"/> Right Mount		
<input type="checkbox"/> Through NE+ Joystick or Single Switch	\$1,175	E2310
<input type="checkbox"/> Through Single Switch ¹ (Q-Logic or NE Only)	\$500	
Multiple Actuator Electronics (for use w/ AFP):		
<input type="checkbox"/> Through Q-Logic EX Controller	\$2,375	E2311
<input type="checkbox"/> Q-Logic EX Through 4-Way Toggle	\$2,375	
<input type="checkbox"/> Left Mount <input type="checkbox"/> Right Mount		
<input type="checkbox"/> Q-Logic EX Through 4-Way Button Toggle	\$2,375	
<input type="checkbox"/> Left Mount <input type="checkbox"/> Right Mount		
<input type="checkbox"/> Q-Logic EX Through Quad Pushbutton	\$2,375	
<input type="checkbox"/> Left Mount <input type="checkbox"/> Right Mount		

1. Single switch not included. See specialty controls order form for a list of available switches.

HEADRESTS

Description	Price	HCPCS Code
<input type="checkbox"/> No Headrest Required		
TRU-Comfort™ Headrest¹:		
<input type="checkbox"/> 8" W Leatherette	\$205	E0955
<input type="checkbox"/> 8"W TRU-Comfort Plus	\$205	E0955
<input type="checkbox"/> 10" W Leatherette	\$205	E0955
<input type="checkbox"/> 10"W TRU-Comfort Plus	\$205	E0955
<input type="checkbox"/> Removable Headrest Bracket	\$210	E1028
Stealth:		
<input type="checkbox"/> Small (9.75"W x 3"H) (STL-OTSM250)	\$205	E0955
<input type="checkbox"/> Large (11"W x 6"H) (STL-OTLG150)	\$205	E0955
<input type="checkbox"/> Pediatric Comfort Plus (6"W) (CPN350)	\$142	E0955
<input type="checkbox"/> Small Comfort Plus (10"W) (CP250)	\$142	E0955
<input type="checkbox"/> Large Comfort Plus (14"W) (CP150)	\$142	E0955
<input type="checkbox"/> Removable Headrest Bracket ² (HMO475P)	\$210	E1028
<input type="checkbox"/> Swing-away (Flip-down) Headrest Bracket ² (FDM350)	\$210	
Used in Addition to Removable Headrest Bracket		
Aftermarket Bracket:		
<input type="checkbox"/> Stealth's World's Best Removable Headrest Hardware (TWB485)	\$210	E1028

1.. Measurement is taken from the inside of the headrest.

2. Not available on power recline.

NON-POWERED LEGRESTS

Description	Price
<input type="checkbox"/> Heavy Duty Drop-In Legrests ¹	Standard
Angle Adjustable Extension Length:	
<input type="checkbox"/> 12"-14.5" <input type="checkbox"/> 14.5" -18"	
Angle Adjustable Footplate Size:	
<input type="checkbox"/> 4" x 6" <input type="checkbox"/> 5" x 6" <input type="checkbox"/> 5" x 8"	
<input type="checkbox"/> 6" x 8" <input type="checkbox"/> 6" x 11" <input type="checkbox"/> 8" x 11"	

1. Extension length is measured from the seat pan to footplate. Comes standard with angle adjustable footplates with heel loops.

Items marked with a (*) should be chosen in the Positioning Components screen in iQuantum

ADJUSTABLE CENTER MOUNT FOOT PLATFORM

Description	Price
<input type="checkbox"/> Adjustable Center Mount Foot Platform <i>Includes 10"W x 11"D Split Foot Platform</i> Extensions: ¹ <input type="checkbox"/> 10"-16" Ext. <input type="checkbox"/> 13"-19" Ext ² Calf Supports ³ : <input type="checkbox"/> Calf Pads (pair) <input type="checkbox"/> Small (6"H x 6"W) \$150 <input type="checkbox"/> Large (8"H x 8"W, Tapered to 6"W) \$150 New! <input type="checkbox"/> Calf Panel (ea.) <input type="checkbox"/> Small (8"H x 18"W) \$150 <input type="checkbox"/> Large (8"H x 24"W) ⁴ \$200 Optional Modular Footplate Extension Components/Kits ^{3,5} <input type="checkbox"/> 4" Width Extension Kit \$50 <input type="checkbox"/> 2" Bell Shaped, Length Extension Kit \$50 <input type="checkbox"/> 4" Width Extension with 2" Bell Shaped, Length Extension Kit \$75 <input type="checkbox"/> 6-Piece Extension Stock Kit \$95 <i>(Includes all above pieces)</i> Additional Optional Accessories ⁵ : <input type="checkbox"/> Footplate Connector \$49	

1. Extension length is measured from top of the seat pan to footplate.
2. Not available on Recline only.
3. Choose in Rigging Accessory Section in iQuantum.
4. Only available on 20"W or greater.
5. Assembly required. May require seating configuration adjustments to avoid front caster interference.

CENTER MOUNT ARTICULATING FOOT PLATFORM

Description	Price	HCPCS Code
<input type="checkbox"/> Center Mount Articulating Foot Platform <i>Includes 10"W x 11"D Split Foot Platform</i> Extensions: ¹ <input type="checkbox"/> 10"-16" Ext. <input type="checkbox"/> 13"-19" Ext. Calf Supports ² : <input type="checkbox"/> Calf Pads (pair) <input type="checkbox"/> Small (6"H x 6"W) <input type="checkbox"/> Large (8"H x 8"W, Tapered to 6"W) New! <input type="checkbox"/> Calf Panel (ea.) <input type="checkbox"/> Small (8"H x 18"W) \$150 <input type="checkbox"/> Large (8"H x 24"W) ³ \$200 Optional Modular Footplate Extension Components/Kits ^{2,4} <input type="checkbox"/> 4" Width Extension Kit \$50 <input type="checkbox"/> 2" Bell Shaped, Length Extension Kit \$50 <input type="checkbox"/> 4" Width Extension with 2" Bell Shaped, Length Extension Kit \$75 <input type="checkbox"/> 6-Piece Extension Stock Kit \$95 <i>(Includes all above pieces)</i> Additional Optional Accessories ⁴ : <input type="checkbox"/> Footplate Connector \$49		K0108

1. Extension length is measured from top of the seat pan to footplate.
2. Choose in Rigging Accessory Section in iQuantum.
3. Only available on 20"W or greater.
4. Assembly required. May require seating configuration adjustments to avoid front caster interference.

POWER ELEVATING LEGRESTS (300LB WT CAP. SOF REQUIRED)

Description	Price	HCPCS Code
<input type="checkbox"/> 70° Articulating Swing-Away Legrests, 4" Articulation Range \$2,395 E1010 <input type="checkbox"/> Quad Release Lever Calf Pads ¹ : <input type="checkbox"/> 6" x 5.35" <input type="checkbox"/> 8" x 5.86" Angle Adjustable Extension Length ² : <input type="checkbox"/> 11"-13" <input type="checkbox"/> 14.5"-18" Angle Adjustable Footplate Size: <input type="checkbox"/> 4" x 6" <input type="checkbox"/> 5" x 6" <input type="checkbox"/> 5" x 8" <input type="checkbox"/> 6" x 8" ³ <input type="checkbox"/> 6" x 11" ³ <input type="checkbox"/> 8" x 11" ⁴ Operational Method: <input type="checkbox"/> Independent <input type="checkbox"/> Combined		
<input type="checkbox"/> 70° Articulating Drop-In Legrests \$2,395 E1010 Calf Pads ¹ : <input type="checkbox"/> 6" x 5.35" <input type="checkbox"/> 8" x 5.86" Angle Adjustable Extension Length ² : <input type="checkbox"/> 12"-14.5" <input type="checkbox"/> 14.5"-18" Angle Adjustable Footplate Size: <input type="checkbox"/> 4" x 6" <input type="checkbox"/> 5" x 6" <input type="checkbox"/> 5" x 8" <input type="checkbox"/> 6" x 8" ³ <input type="checkbox"/> 6" x 11" ³ <input type="checkbox"/> 8" x 11" ⁴ Operational Method: <input type="checkbox"/> Independent <input type="checkbox"/> Combined		

1. Choose in Rigging Accessory Section in iQuantum.
2. Extensions are measured from top of seat pan to footplate.
3. Only available with seat width 18" or greater.
4. Only available with seat width 20" or greater.

FRONT RIGGING ACCESSORIES

Description	Price	HCPCS Code
<input type="checkbox"/> Wheel Bumpers \$25 <input type="checkbox"/> Heel Loops (pair) ¹ \$38 E0951 <input type="checkbox"/> Gel Neoprene Footrest Sleeve (pair) ² \$65 K0108 <input type="checkbox"/> ELR/ALR Adductor Buttons (pair) \$125 K0108 <input type="checkbox"/> POSAlinc Knee Adductor for Swing-Away Legrests (pair)* \$256 K0108 <input type="checkbox"/> POSAlinc Rail Mounted Knee Adductor (pair) * \$287 K0108 <input type="checkbox"/> Residual Limb Support \$300 E1020 <input type="checkbox"/> Bodypoint Ankle Huggers (pair)* \$134 K0108 <input type="checkbox"/> Small <input type="checkbox"/> Medium		

1. Standard with Angle Adjustable or Multi-Axis footplates.
2. Only available with Swing-Away legrests.

SEAT CUSHIONS

Description	Price	HCPCS Code
<input type="checkbox"/> No Cushion Required <i>Please refer to Synergy order forms for detailed pricing, sizes and codes.</i> Spectrum® Visco Cushion Skin Protection & Positioning <input type="checkbox"/> 10" x 10" - 20" x 24" \$480 E2607 <input type="checkbox"/> 22" x 16" - 28" x 28" \$530 E2608		

Items marked with a (*) should be chosen in the Positioning Components screen in iQuantum

LATERALS

Description	Price	HCPCS Code
<input type="checkbox"/> Stealth Thoracic Laterals (pair)*		
<i>Bracket:</i>		
<input type="checkbox"/> Swing-Away Rail Mounted	\$450	E1028
<i>For Use on Synergy Back and Tru-Comfort</i>		
<i>Pad:</i>		
<input type="checkbox"/> Flat Pad, 3"x5", Leather-Like Cover	\$200	E0956
<input type="checkbox"/> Flat Pad, 4"x6", Leather-Like Cover	\$200	E0956
<input type="checkbox"/> Curved Pad, 2"x3", 4-Way Stretch Cover	\$200	E0956
<input type="checkbox"/> Curved Pad, 3"x5", 4-Way Stretch Cover	\$200	E0956
<input type="checkbox"/> Curved Pad, 4"x6", 4-Way Stretch Cover	\$200	E0956
<input type="checkbox"/> Stealth Pelvic/Thigh Laterals*		
<i>Side:</i>		
<input type="checkbox"/> Left Side		<input type="checkbox"/> Right Side
<i>Bracket:</i>		
<input type="checkbox"/> Removable Bracket (ea.)	\$250	E1028
<input type="checkbox"/> Removable Bracket w/ 1" Offset (ea.)	\$325	E1028
<input type="checkbox"/> Flip Down Bracket (ea.)	\$225	E1028
<i>Pad:</i>		
<input type="checkbox"/> Short Pad, 4"x4" (ea.)	\$50	E0956
<input type="checkbox"/> Medium Pad, 4"x8" (ea.)	\$50	E0956
<input type="checkbox"/> Long Pad, 4"x12" (ea.)	\$50	E0956
<i>Adapter:</i>		
<input type="checkbox"/> 2" Depth/Height Adapter Plate (ea.) ²	\$25	K0108

1. Swing-away laterals interfere with flip-up armrests.
 2. Height adapter plate is needed w/ Tru Comfort seat cushion. Not available on the flip down bracket.

BATTERY OPTIONS

Description	Price	HCPCS Code
<input type="checkbox"/> Group 24, 70 Amp, Gel (Universal)	\$352 ea.	E2363
<input type="checkbox"/> Group 24, 70 Amp, Gel (MK)	\$352 ea.	E2363
<input type="checkbox"/> Group 34, 60-Amp Gel ¹	\$330 ea.	E2359
<input type="checkbox"/> NF-22, 50-Amp Batteries		
<input type="checkbox"/> Maintenance Free AGM (MK)	\$295 ea.	E2361
<input type="checkbox"/> Maintenance Free Gel Cell (Universal)	\$295 ea.	E2361
<input type="checkbox"/> Maintenance Free Gel Cell (MK)	\$295 ea.	E2361
<i>Installation:</i>		
<input type="checkbox"/> Batteries Installed		<input type="checkbox"/> Do Not Install

1. Required with Super Low Option.

MISCELLANEOUS POSITIONING COMPONENTS

Description	Price	HCPCS Code
<input type="checkbox"/> Therafin Flip-down Knee Abductor Bracket*	\$172	E1028
<i>Pad:</i>		
<input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large	\$135	E0957
<input type="checkbox"/> Stealth Foot Boxes (pair)*	\$475	K0108
<input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large		
<input type="checkbox"/> Stealth Padded Shoe Holders (pair)*	\$166	K0108
<input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> X-Large		
<input type="checkbox"/> Otto Bock Arm Channels (ea.)*	\$104	E2209
<i>Side:</i>		
<input type="checkbox"/> Left <input type="checkbox"/> Right		
<i>Size:</i>		
<input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large		
<input type="checkbox"/> Otto Bock Flat Hand Pad(ea.)*	\$52	
<i>Side:</i>		
<input type="checkbox"/> Left <input type="checkbox"/> Right		
<i>Size:</i>		
<input type="checkbox"/> Medium <input type="checkbox"/> Large		

Please see positioning components order form for additional types, sizes and details.

ACCESSORIES

Description	Price	HCPCS Code
<input type="checkbox"/> Quantum Backpack ¹	\$60	
<input type="checkbox"/> Oxygen Holder ²	\$150	E2208
<input type="checkbox"/> Recline Accessory Mounting Bracket ³	\$50	
<input type="checkbox"/> Weather Cover, Medium, Black	\$158	
<input type="checkbox"/> Cup Holder	No Charge	
<input type="checkbox"/> Left <input type="checkbox"/> Right		
<input type="checkbox"/> Tablet Holder	\$315	
<input type="checkbox"/> Deluxe Cell Phone/Media Holder	\$140	
<input type="checkbox"/> Cell Phone/Media Holder	No Charge	

1. Backpack may interfere w/ other rear accessories.
 2. Not available with a Power Elevating Seat or a Lift/Tilt. Oxygen holder on Tilt with Tru Comfort back requires SOF. N/A on Power Recline.
 3. 1" adaptor tube allows cane mounted accessories to mount to power recline back or siderail.

LAPBELTS

Description	Price
<input type="checkbox"/> 50" Lap Belt	Standard
<input type="checkbox"/> 60" Lap Belt	Standard
<input type="checkbox"/> 70" Lap Belt	Standard
<input type="checkbox"/> 80" Lap Belt	Standard
<input type="checkbox"/> 90" Lap Belt	Standard

Items marked with a (*) should be chosen in the Positioning Components screen in iQuantum