Chedoke Hospital
Specialized Outpatient Rehabilitation Services
Adult Wheelchair & Seating Clinic

Power Trial Worksheet

Name _____HIN_____

	Trial Request Date:	Trial Date:
Rear wheel drive		
Mid wheel drive		
Size		
Floor to rail hgt.		
Arm style		
left		
right		
Front Rigging		
60/70 degree		
manual elevating		
power elevating		
Footplate style		
standard		
angle adjustable		
centre mount		
Power tilt		
Power recline		
Joystick		
Left Right		
quad link		
speed dial		
handle style		
Specialty controls		
Back		
Cushion		
bolster		
Calf panel		
Head rest style		
Seat belt style		

Client measurements

Width		Depth		Popliteal to heel		Chest width		Back hgt (seat to top of shoulder)	

Signature _____

Revised February 2008