

EXCEL G5 PRESCRIPTION WHEELCHAIR - Aluminium

AWC144 - seat width 51cm

AWC145 - seat width 46cm

AWC146 - seat width 40cm

A. **SEAT:** Available in three seat widths. Please select the seat width of your choice.

	AWC144 - Seat width 51cm <input type="checkbox"/>	AWC145 - Seat width 46cm <input type="checkbox"/>	AWC146 - Seat width 40cm <input type="checkbox"/>	\$
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B. **SEAT:** Available in four seat depths. Please select the seat depth of your choice.

	Seat Depth	40cm <input type="checkbox"/>	42.5cm <input type="checkbox"/>	45cm <input type="checkbox"/>	47.5cm <input type="checkbox"/>	50cm <input type="checkbox"/>	\$
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C. **CUSHION:** Supplied with a 3cm thick medium density foam cushion as standard. However, there is a variety of other wheelchair cushions available in the Freedom Healthcare range that may better suit your specific needs. Please choose the wheelchair cushion you prefer.

	Seat Cushion, Medium density foam 3cm thick come as standard	\$
	Freedom Healthcare Preferred Seat Cushion <input type="checkbox"/>	Product Code..... \$

D. **SEAT HEIGHT:** Refer to the Seating Diagram Overleaf for available seat heights for this model.

	Floor to Seat Height at Front	48cm <input type="checkbox"/>	49.5cm <input type="checkbox"/>	51cm <input type="checkbox"/>			
	Floor to Seat Height at Rear	42cm <input type="checkbox"/>	44.5cm <input type="checkbox"/>	47cm <input type="checkbox"/>	49.5cm <input type="checkbox"/>	52cm <input type="checkbox"/>	\$

E. **BACKREST:** Height adjustable Backrest. Please fill in your preferred backrest height.

	Backrest Height	48cm <input type="checkbox"/>	50.5cm <input type="checkbox"/>	53cm <input type="checkbox"/>	\$
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F. **BACKREST:** Available with an angle adjustable backrest. Please select your preferred backrest angle.

	Backrest Angle	90deg <input type="checkbox"/>	95.6deg <input type="checkbox"/>	101.2deg <input type="checkbox"/>	106.8deg <input type="checkbox"/>	112.4deg <input type="checkbox"/>	\$
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G. **ARMREST:** Height adjustable Armrest. Please fill in your preferred Armrest height. Choose any height between the minimum and maximum.

	Armrest Height	20cm <input type="checkbox"/>	21cm <input type="checkbox"/>	22cm <input type="checkbox"/>	23cm <input type="checkbox"/>	24cm <input type="checkbox"/>	25cm <input type="checkbox"/>	
		26cm <input type="checkbox"/>	27cm <input type="checkbox"/>					\$

H. **LEGREST:** Comes with swingaway/removable legrests as standard, heel straps included. Also available with elevating legrests or stump support as optional. Please choose your preferred legrest.

	Standard Swingaway/Removable Left Legrest <input type="checkbox"/>	Left Elevating legrest <input type="checkbox"/>	Left Stump Support <input type="checkbox"/>
	Standard Swingaway/Removable Right Legrest <input type="checkbox"/>	Right Elevating legrest <input type="checkbox"/>	Right Stump Support <input type="checkbox"/>

I. **FOOTPLATES:** Length adjustable footplate. Please fill in your preferred footplate length. Choose any length between the minimum and maximum.

	Footplate Length	Minimum 30cm	Maximum 39cmcm	\$	
	Footplate Angle Position	20° <input type="checkbox"/>	30° <input type="checkbox"/>	40° <input type="checkbox"/>	50° <input type="checkbox"/>	\$

J. **WHEELBASE:** Available with an adjustable wheelbase to aid with personal maneuverability and balance requirements. Please specify your preferred wheelbase (measured from centre of axles)

	Wheelbase	44cm <input type="checkbox"/>	46.5cm <input type="checkbox"/>	49cm <input type="checkbox"/>	51.5cm <input type="checkbox"/>	\$
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K. **TYRES:** Available with three tyre options.

	Pneumatic tyres (standard) <input type="checkbox"/>	Airless "Soft Ride" PU tyres <input type="checkbox"/>	High pressure low resistance air tyre <input type="checkbox"/>	\$
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M. **HANDLE BAR:** Available with height adjustable handle bars. Please fill in your preferred height. Choose any height between the minimum and maximum.

	Handle Bars	Minimum 100cm	Maximum 107cmcm	\$
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N. **LABOUR COSTS:** The above mentioned adjustments may incur a labour cost

	Total labour cost	\$
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O. **OPTIONAL EXTRAS:**

	Wheelguards <input type="checkbox"/>	\$
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	Lap belt <input type="checkbox"/>	\$
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	Wheelchair tray table <input type="checkbox"/>	\$
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	Ivy Pole <input type="checkbox"/>	\$
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	Oxygen bottle holder <input type="checkbox"/>	\$
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	Other <input type="checkbox"/>	\$
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P. **TOTAL COST:**

	Total cost	\$
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