

Permobil power standing

Evaluation checklist

A qualified medical professional **must** determine and document in the medical record that the individual is safe and medically cleared to stand.

Equipment

Single switches
Lap belt and chest bar/strap
Anterior knee support
Cushion & back support that are appropriate for client
Arm support appropriate for client
Drive control appropriate for client

Instructions

- **Step 1:** Take chair through stand sequence before transferring the client and ensure it is set through checkpoint programming within clinician-evaluated ROM tolerances
- Step 2: Determine how the client or caregiver will control the standing sequence (joystick, alt drive, single switch, ICS)
- **Step 3:** Prior to placing client in the chair, adjust seat depth to client's measurements based on clinician's evaluation. Confirm programming for seat depth matches the actual, adjusted seat depth
- Step 4: Lower leg length: adjust footplate height to client's measurements based on clinician evaluation
- Step 5: Adjust footplate angle to accommodate seated ankle range based on clinical evaluation
- **Step 6:** Permobil chest support is required for standing. Height, depth, and angle is determined by clinical evaluation and stability needs
- **Step 7:** Permobil anterior knee support is required for standing. Single post anterior knee support depth should have 1"/2.5 cm of space when in a seated position. The swing-away anterior knee support should make loose contact with the body when in the seated position
- **Step 8:** Additional positioning components as determined by evaluation: ex: trunk supports, head supports, lateral hip supports, lumbar supports, other positioning belts
- Step 9: Bring client into standing