

## Order form

# IncrediBack® Deep Back Support

*HCPCS coding: E2615 / Positioning wheelchair back cushion, posterior-lateral, width less than 22 inches, any height, including any type mounting hardware*



Company Name/ACCT #: \_\_\_\_\_

P.O. Number: \_\_\_\_\_

Requested By: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Ship To: \_\_\_\_\_

Client Reference: \_\_\_\_\_

For best results, do not fill out in your browser. Interactive form should be completed using Adobe Reader after saving to your local drive. Then email or print and fax to Customer Support at orders.comfort@permobil.com or 1.406.522.8563.

\*DO NOT SEND PROTECTED HEALTH INFORMATION. IT IS NOT NEEDED TO MAKE THE PRODUCT YOU ARE REQUESTING.\*

## 1 Size selection

\*Length (L) refers to the actual size dimension of the support from bottom to top edge.

Part number &amp; MSRP by size

Length*	34"	<b>414TA</b> \$665.00	<b>414TB</b> \$665.00	<b>414TC</b> \$665.00	<b>414TD</b> \$793.00	Moldable tail
	21"	<b>414A</b> \$599.00	<b>414B</b> \$599.00	<b>414C</b> \$599.00	<b>414D</b> \$753.00	
		15" - 21"	17" - 21"	19" - 21"	21"	Moldable standard
		WC frame widths				

### Solace cover

Designed for pressure relief and comfort. Solace is fluid-proof, anti-microbial, soft to the touch and has multi-dimensional stretch.

### Moldable support

Designed to support spinal curvature and other postural asymmetries.

IF DESIRED SIZE IS NOT LISTED, PLEASE CONTACT  
CUSTOMER SUPPORT FOR ASSISTANCE. | 800.736.0925

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