CONSIDERATIONS WHEN CHOOSING A SHOWER CHAIR

Shower chairs allow people with mobility limitations the ability to bathe independently or with assistance. Some are designed with legs for use in tubs, while others have wheels for use in roll-in showers. Tilt-in-space models are used for repositioning and options in all models include seatbelts, commode openings, padding, armrests, footrests, and headrests.

After you complete this self-assessment use your answers to look at the inventory to see which shower chair best meets your needs.

SHOWER CHAIR QUESTIONS

1. Is the intended user a child or adult?
   - Child
   - Adult

2. Do you currently use a shower chair?
   - Yes (if known, please indicate) __________________________________________
   - No (if no, proceed to question # 10)

3. Is there a manufacturer sticker present?
   - Yes (make, model) ______________________________________________________
   - No

4. Why is your current shower chair no longer usable for you?
   ________________________________

5. What did/didn’t you like about your shower chair? (Do you want to duplicate what you have or need additional features?) __________________________________________________________

6. Current shower chair seat width?
   Seat Width ________ inches

7. Current shower chair seat depth?
   Seat Depth ________ inches

8. Current seat to floor height?
   Seat to Floor ________ inches

9. Current seat surface to top of back height?
   Seat to Back Height ________ inches
10. User’s approximate height and weight?
   Height____________________
   Weight____________________

11. Do you have roll-in shower or a bath tub (with or without sliding glass doors)?
   □ Roll-In
   □ Bath Tub with Sliding Glass Doors
   □ Bath Tub without Sliding Glass Doors

12. Do you want/need a rolling, self-propelling, sliding, or tub chair with legs?
   □ Rolling (caregiver pushes)
   □ Self-Propelling
   □ Sliding
   □ Tub Chair

13. Do you want/need a commode opening? If so, round or u-shaped (placement, Left, Right, Front, Rear)?
   □ No Opening
   □ Round Opening
   □ U-Shaped Left Opening
   □ U-Shaped Right Opening
   □ U-Shaped Front Opening
   □ U-Shaped Rear Opening

14. Do you want/need tilt and/or recline seating function?
   □ Tilt
   □ Recline

15. Do you want/need a seatbelt?
   □ Yes
   □ No

16. Do you want/need a headrest?
   □ Yes
   □ No

17. Do you want/need a sliding tub chair?
   □ Yes

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18. Do you want/need suction cups on legs?
   - Yes
   - No

19. Do you want/need padded armrests?
   - Yes
   - No

20. Do you want/need a transfer bench, and if so, which side will you transfer to (L/R)?
   - Yes Left
   - Yes Right
   - No, Don’t Want/Need