

Please return form:

Please return this form completed to the ward's therapy team as soon as you can or, alternatively, you can ring the therapy team with the measurements on the numbers below.

Ward 4F therapy office: 0151 290 4352

Ward 3 Alpha therapy office: 0151 430 1186

Ward 3B therapy office: 0151 290 4445

Orthopaedic Therapy Team mobile: 07717420968

If you require this leaflet in an alternative format e.g. large print or another language, please call the Patient Advice and Liaison Services (PALS) on 0800 073 0578.

Furniture Heights Request Form

Patient:

Ward:

If you need this leaflet in a different language or accessible format please speak to a member of staff who can arrange it for you.

اگر به این بروشور به زبان دیگر یا در قالب دسترس پذیر نیاز دارید، لطفاً با یکی از کارکنان صحبت کنید تا آن را برای شما تهیه کند.

Jeśli niniejsza ulotka ma być dostępna w innym języku lub formie, proszę skontaktować się z członkiem personelu, który ją dla Państwa przygotuje.

Dacă aveți nevoie de această broșură într-o altă limbă sau într-un format accesibil, vă rog să discutați cu un membru al personalului să se ocupe de acest lucru pentru dumneavoastră

如果您需要本传单的其他语言版本或无障碍格式，请联系工作人员为您安排。

إذا احتجت إلى هذه النشرة بلغة أخرى، أو بتنسيق يسهل الوصول إليه، يرجى التحدث إلى أحد الموظفين لترتيب ذلك لك.

Whiston Hospital
Warrington Road,
Prescot, Merseyside, L35 5DR
Telephone: 0151 426 1600

St Helens Hospital
Marshall Cross Road,
St Helens, Merseyside, WA9 3DA
Telephone: 01744 26633

Please read:

Following trauma and/or surgery it can be difficult to bend down and rise up from low furniture. Therefore, it is necessary for the therapist to know the height and type of furniture used by the patient at home. Once furniture heights and types are completed then the therapist will assess the patient's need for adaptive equipment if required.

Please note, not all types of furniture are suitable for adaptive equipment. Therefore, please fill in all sections of the leaflet giving a full description as requested.

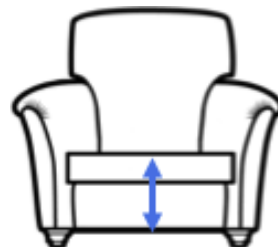
If you have been given this form on the ward **please return it completed to the therapy team as soon as you can or, alternatively, you can ring the therapy team with the measurements on the numbers on the back of this form.**

If you have been sent this form with an appointment letter for joint or foot school, please bring it completed to this appointment. Thank you,

Therapist:..... Date:.....

Armchair:

Measure from the top of the seat cushion to the floor. (If possible, get someone to sit on the seat to compress the cushion when measuring).



Height of chair: inches

Type of legs / base:e.g. castors /wooden legs

Is the chair a recliner? Tick: Yes No

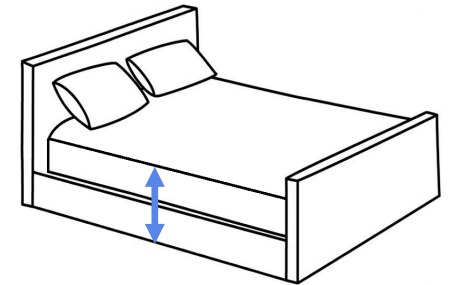
Bed:

Measure from the top of the mattress down to the floor.

(If possible, get someone to sit on the bed to compress the mattress when measuring).

Height of bed: inches

Number of legs / castors:



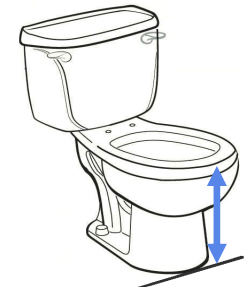
Tick: Single Double King

Tick: Slatted-base Divan base

Toilet:

Height of toilet from floor to top of toilet bowl (with both the seat & lid up): inches

Height of toilet from floor to top of toilet bowl (with the lid up & seat down): inches



Bath:

Measure the **total** width of bath.

Width of bath: inches

