Perkins ADC - Cardboard Chair and Table Measurements

Childs Name: __________________________ Contact Person: __________________________
Date: ______________ Phone Number: __________________________
Color: __________________________ Motif/design: __________________________

Does the child have CVI? □ Yes □ No  Does the child require a simple decorative design? □ Yes □ No
Does the child have any atypical features that we need to take into account? (i.e. wider torso, shorter legs, g-tube)

I. Type of Chair

□ Square Chair □ Perch
□ Corner Back Chair □ Floor Sitter
II. Positioning Features

A. Seat to Back Angle
   ___Standard 90 degrees
   ___Other (measure or draw)

B. Tilt in Space
   ___Upright
   ___Tipped back in space.
   Angle of Tilt ______ deg, or draw

C. Seat Angle
   ___Flat
   ___Wedge (Back higher than front by 5-7 deg
   ___Dump (Front higher than back)

D. Seat Add-Ons
   ___Pelvic positioning belt (seat belt)
   ___Shoulder straps
   ___Typical Chest support straps
   ___Wider Chest support straps (if more trunk support is needed)
   ___Pummel
   ___Foot straps
   ___Yoga Mat
   ___Head positioning cushions

(Any other special seating features require a consultation with an ADC OT and a possible fitting with the child)

All questions can be directed to Molly.campbell@perkins.org or Andrea.tavares@perkins.org
III. Child Measurements

A. Back Height: ___________ in
   1. Child with poor head control: Top of head to bottom on buttock
   2. Child with good head control: Top of shoulders to bottom of buttock = (B) Shoulder Height

B. Shoulder Height (if shoulder straps are needed): ________in
   Bottom of buttock to top of shoulders

C. Seat Depth: __________in
   Base of Spine to back of knees

D. Seat Height: __________in
   Bottom of foot to popliteal fossa (area behind knees)

E. Seat Width: __________in
   Widest distance across hips or lap

F. Trunk Width (if chest straps are needed): ________in
   Width across chest

G. Foot Length (if foot rest is needed): __________in
   Length of foot with shoes on

H. Elbow Height: ________in
   With arm bent at 90 degrees, bottom of elbow to seat

I. Width of Head ________in
   If Headrest is needed
IV. Chair Measurement - *For Reference Only*

A. Back Height
   Same as child

B. Shoulder Strap Height
   Same as child's Shoulder Height

C. Seat Depth
   Same as child

D. Seat Height
   Same as child

E. Seat Width
   Add 1.5 -2” to measurement on child’s Seat Width

F. Chest/Trunk Strap Placement
   Same as measurement on child’s Trunk Width

G. Foot Rest Depth
   Add 2” to measurement of child’s Foot Length

H. Arm Rest Height
   Add 1” to measurement of child’s Elbow Height

I. Pummel Height= 3”

J. Pummel Diameter= 1.5” diameter
   Unless additional hip abduction is required

K. Pummel Location: front edge of seat
V. Table Measurement - As shown below unless otherwise noted

A. Height
   Typically height is made to clear arm rests by ½”

B. Width = 24”

C. Depth = 18”

D. Lip Height = 1.25”

E. Tummy-Cut: Width x Depth
   Width = Add 1” to Child’s Seat Width
   Depth = 3 ¼” - 5 ¼”

F. Other Features
   1. Table Surface Shape (Make paper template if the fit needs to be exact)
      ___Delete Tummy-Cut
      ___Tummy-Cut on both sides to allow two children to play simultaneously (Table Depth will increase proportionally)
      ___Deeper Tummy-Cut to provide give extra support at the elbows ___in

   2. Table Tilt: _____ deg
      (Standard is parallel to floor)

   3. Table Surface (Standard surface is as fabricated with Tri-wall cardboard)
      ___Black plastic overlay for table surface