



JAY®

Balance

Jay Balance_OF_Intrenational Template_2020_01_01

Invoice to:
 Name:
 Street:
 Town: Postal code:
 E-Mail:
 Tel: Fax:

Deliver to:
 Name:
 Street:
 Town: Postal code:
 E-Mail:
 Tel: Fax:



Order date:
 Purchase order:
 Number required:

Marked for:
 Sunrise order no:

Jay® Balance Standard Features

Order
 Calculation

Fluid pad or Air (single or dual valve) insert to optimize immersion and accommodate positioning needs. Positioning accessories available.
 Innovative dual-cover system: water-resistant inner cover, easy to clean, combined with 3 types of machine-washable outer covers: stretch, microclimatic and incontinent.
 2 Year guarantee; 6 months on cover.

Max. user weight:
 150 kg (cushion width 34 to 50 cm)
 225 kg (cushion width 56 to 60 cm)

USER WEIGHT kg
 Mandatory information to ensure correct configuration

Reimbursement code:

Application:

Client at high risk of skin breakdown with or without high postural needs.
 Symmetrical to significant asymmetrical posture requiring laterally, forward/rearward stability and/or positioning.
 May be unable to reposition or perform an independent pressure relief.

To order a Jay Balance cushion, follow the steps below to build your part number and then choose your accessories

fixed	Width	Depth	Insert	Outer Cover	Pos. Kit	fixed
JBALC	40	42	FL	M	P	EU
Jay Balance Cushion	STEP 1	STEP 2	STEP 3	STEP 4	STEP 5	

Example: JBALC4042FLMPEU

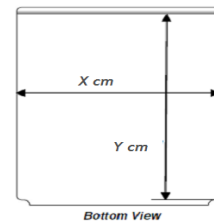
CUSHION WIDTH AND DEPTH - STEP 1 + STEP 2

Standard Cushion (width: 34 - 50 cm; max user weight 150 kg) -
 Bariatric Cushion (width: 56 - 60 cm; max user weight 225 kg) -

Base Price 663 €
Base Price 702 €

		Width										
		34	36	38	40	42	44	46	48	50	56	60
Depth	34	○										
	36	○	○	○								
	38	○	○	○	○	○	○					
	40	○	○	○	○	○	○					
	42	○	○	○	○	○	○	○	○	○		
	44		○	○	○	○	○	○	○	○		
	46			○	○	○	○	○	○	○	○	
	48					○	○	○	○	○	○	○
	50							○	○	○	○	○
	56										○	○
60											○	
PLA Size		A			B				C			

Jay Balance Measuring Guide



Width X cm - Measurement made from outside edge to outside edge of cushion (including cover)
Depth Y cm - Measurement made from front of seat notch to front topside (or bottom of contracture cut) of cushion (including cover)

WIDTH x DEPTH
 STEP 1 STEP 2



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JAY BALANCE CUSHION

Jay Balance Lead Time - for the below listet cushions the lead time is 5 days; for all others the lead time is 15 days

Seat Width	Seat Depth	Balance Part No.	
34	34	JBALC3434FLMPEU	
	36	JBALC3640FLMEU	
	40	JBALC3440FLMEU	
36	36	JBALC3636FLMEU	
	40	JBALC3640ASMEU JBALC3640FLMEU JBALC3640FLMPEU	
	42	JBALC3642FLMEU JBALC3642FLMPEU	
	44	JBALC3644FLMPEU	
	46	JBALC3646FLMEU JBALC3646FLMPEU	
	40	40	JBALC4040ADMEU JBALC4040ASMEU JBALC4040FLIEU
42		JBALC4042ADMEU JBALC4042ASMEU JBALC4042FLMPEU	
44		JBALC4044ASMEU JBALC4044FLMEU JBALC4044FLMPEU	
46		JBALC4046ADMEU JBALC4046FLIEU JBALC4046FLMEU JBALC4046FLMPEU	
42		40	JBALC4240FLIEU JBALC4240FLMEU JBALC4240FLMPEU
		42	JBALC4242ADMEU JBALC4242ADMPEU JBALC4242ASMPPEU JBALC4242FLIEU JBALC4242FLIPEU JBALC4242FLMEU JBALC4242FLMPEU JBALC4242FLSPEU
		44	JBALC4244ADMEU JBALC4244FLIEU JBALC4244FLIPEU JBALC4244FLMEU JBALC4244FLMPEU
		46	JBALC4246ADMEU JBALC4246FLIEU JBALC4246FLIPEU JBALC4246FLMEU JBALC4246FLMPEU JBALC4246FLSPEU
	48	JBALC4248FLIEU JBALC4248FLIPEU JBALC4248FLMEU JBALC4248FLMPEU JBALC4248FLSEU	
	44	40	JBALC4440FLMEU JBALC4440FLIEU JBALC4440FLMPEU
42		JBALC4442FLIPEU JBALC4442FLIEU JBALC4442FLMEU JBALC4442FLMPEU	
44		JBALC4444ADMEU JBALC4444ADMPEU JBALC4444ASMPPEU JBALC4444ASMEU JBALC4444FLIPEU JBALC4444FLIEU JBALC4444FLMEU JBALC4444FLMPEU JBALC4444FLSPEU	
46		JBALC4446ASSEU JBALC4446ADMEU	

Seat Width	Seat Depth	Balance Part No.	
44	46	JBALC4446ADMPEU JBALC4446ASMPEU JBALC4446FLSPEU JBALC4446FLIPEU JBALC4446FLIEU JBALC4446FLMEU JBALC4446FLMPEU JBALC4446FLSEU	
		48	JBALC4448FLMEU JBALC4448FLMPEU
		50	JBALC4450FLMEU JBALC4450FLIPEU JBALC4450FLIEU JBALC4450ASMPEU JBALC4450FLMPEU
		46	42
	44		JBALC4644FLMEU JBALC4644FLMPEU
	46	46	JBALC4646ADMEU JBALC4646ASIEU JBALC4646FLSPEU JBALC4646ASMPEU JBALC4646ADMPEU JBALC4646ASMEU JBALC4646FLIEU JBALC4646FLIPEU JBALC4646FLMEU JBALC4646FLMPEU
48			JBALC4648FLIEU JBALC4648FLMEU JBALC4648FLMPEU JBALC4648FLSEU
50			JBALC4650FLIEU JBALC4650FLIPEU JBALC4650FLMPEU JBALC4650FLSEU
48			42
		44	JBALC4844FLMPEU JBALC4844FLMEU
48		46	JBALC4846FLIEU JBALC4846FLMEU JBALC4846FLMPEU
	48	JBALC4848FLMEU JBALC4848FLMPEU	
	50	JBALC4850FLIEU JBALC4850FLMEU JBALC4850FLMPEU	
	50	42	JBALC5042FLMEU JBALC5042FLMPEU
44		JBALC5044FLMEU JBALC5044FLMPEU	
46		JBALC5046FLIEU JBALC5046FLMEU JBALC5046FLMPEU	
48		JBALC5048FLMEU JBALC5048FLMPEU	
56	50	JBALC5050ASMPEU JBALC5050FLIEU JBALC5050FLMEU JBALC5050FLMPEU	
	46	JBALC5646FLMEU	
	50	JBALC5650FLMEU JBALC5650ASMEU JBALC5650FLMPEU	
	56	JBALC5656FLMPEU JBALC5656FLMPEU	



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JAY BALANCE CUSHION

PELVIC LOADING AREA (PLA) INSERT* - STEP 3

	Select	Part #	Charge
FLUID - Fluid Pad Option	<input type="checkbox"/>	FL	-
AIR Insert Option - Single Valve**	<input type="checkbox"/>	AS	-
AIR Insert Pad Option - Dual Valve**	<input type="checkbox"/>	AD	-



Fluid - FL



Air single valve - AS



Air dual valve - AD

INSERT

STEP 3
(FL, AS or AD)

* The insert pad sizes supplied are based on PLA size and automatically determined when you select the cushion (see matrix)

**Air Bladder Options shipped with instructions, air pump, patch kit and nozzle fittings

OUTER COVER OPTION - STEP 4

	Select	Part #	Charge
Microclimatic	<input type="checkbox"/>	M	-
Stretch	<input type="checkbox"/>	S	-
Incontinent	<input type="checkbox"/>	I	-

OUTER COVER

STEP 4
(M, S or I)

All cushions are delivered with an water resitant inner cover.

POSITIONING KIT *) - STEP 5

If you wish your Jay Balance to have positioning components, please write "P" in the Step 5 box. Otherwise, leave the box empty to get a standard cushion (without positioning components). When ordering a positioning version, you will get the following positioning kit:

Positioning Kit (containing each 1 of the components mentioned below)

- Lateral Thigh 2.5 cm Left
- Lateral Thigh 2.5 cm Right
- Medial Thigh 2.5 cm (1") (each)
- Lateral Pelvic 2.5 cm (2") Left
- Lateral Pelvic 2.5 cm (2") Right

Part # P Charge 54 €



POS. KIT

STEP 5
(P or blank)

*) all positioning components are delivered with a stretchable water resistant inner cover to accommodate these components onto the Balance cushion.

JAY Balance Smart Part Number

	Width	Depth	Insert	Outer Cover	Pos. Kit	
JBALC	40	42	FL	M	P	EU
fixed	STEP 1	STEP 2	STEP 3	STEP 4	STEP 5	fixed

Notes

The part # above (JBALC4042FLMPEU) describes a Jay Balance cushion with 40 width and 42 depth, fluid insert, microclimatic outer cover and positioning components.

Additional explanations:

When selecting the PLA insert and the positioning option for your cushion, the water resistant inner cover will be automatically selected (here in this example it will be an inner cover which accommodates fluid insert and positioning components).

If any modifications of your cushion is needed please contact your Sunrise Medical authorized Customer Service.

JAY BALANCE COSTS

	Unit price	Total price
Cushion Price	663 € standard	
Option Price		
Total Cost		

Sunrise Medical Customer Service
Address: Kahlbachring 2-4, D-69254 Malsch/Heidelberg
Tel. +497253 980-0
Fax. +497253 980-222

For more information
visit our webpage
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Spare Parts		Charge	
Cushion base (ww = width; dd = depth)			
<input type="checkbox"/>	BJBALCwwddEU Base assembly	202,00 €	
Spare Outer Cover (ww = width; dd = depth)			
<input type="checkbox"/>	CJBALCwwddSEU Stretch outer cover	107,00 €	
<input type="checkbox"/>	CJBALCwwddMEU Microclimatic outer cover	107,00 €	
<input type="checkbox"/>	CJBALCwwddIEU Incontinent outer cover	107,00 €	
Spare Inner Cover (ww = width; dd = depth)			
<input type="checkbox"/>	CIFLJBALCwwddEU Inner cover for fluid cushion	104,00 €	
<input type="checkbox"/>	CIFLPJBALCwwddEU Inner cover for fluid and positioning cushion	104,00 €	
<input type="checkbox"/>	CIAJBALCwwddEU Inner cover for air cushion	104,00 €	
<input type="checkbox"/>	CIAPJBALCwwddEU Inner cover for air and positioning cushion	104,00 €	
Solid Seat (ww = width; dd = depth)			
<input type="checkbox"/>	JSIwwdd Solid Seat insert (wood plate)	74,00 €	
Fluid & Air inserts *)		Charge	
PLA A			
<input type="checkbox"/>	FLJBALCAEU Fluid insert for PLA size A	382,00 €	
<input type="checkbox"/>	J3CSAASEU Air insert - single valve - for PLA size A	382,00 €	
<input type="checkbox"/>	J3CSAADEU Air insert - dual valve - for PLA size A	405,00 €	
PLA B			
<input type="checkbox"/>	FLJBALCBEU Fluid insert for PLA size B	382,00 €	
<input type="checkbox"/>	J3CSBASEU Air insert - single valve - for PLA size B	382,00 €	
<input type="checkbox"/>	J3CSBADEU Air insert - dual valve - for PLA size B	405,00 €	
PLA C			
<input type="checkbox"/>	FLJBALCCEU Fluid insert for PLA size C	382,00 €	
<input type="checkbox"/>	J3CSCASEU Air insert - single valve - for PLA size C	382,00 €	
<input type="checkbox"/>	J3CSCADEU Air insert - dual valve - for PLA size C	405,00 €	
* Note: A Balance cushion with Air insert has a different inner cover as with fluid insert. In case you want to change the insert for an existing Balance cushion, you need to order a suitable inner cover.			
Jay Balance Positioning kit *)		Charge	
	for depth 34-40 cm	for depth 42-60 cm	
Lateral Thigh Left 2.5cm Left	<input type="checkbox"/> JBALCLTLH-S	<input type="checkbox"/> JBALCLTLH	23 €
Lateral Thigh Left 2.5cm Right	<input type="checkbox"/> JBALCLTRH-S	<input type="checkbox"/> JBALCLTRH	23 €
Medial Thigh 2.5cm (each)	<input type="checkbox"/> JBALCMT-S	<input type="checkbox"/> JBALCMT	23 €
Lateral Pelvic 2.5 cm Left	<input type="checkbox"/> JBALCLPLH-S	<input type="checkbox"/> JBALCLPLH	28 €
Lateral Pelvic 2.5 cm Right	<input type="checkbox"/> JBALCLPRH-S	<input type="checkbox"/> JBALCLPRH	28 €
Positioning kit	<input type="checkbox"/> JBALCPKIT-S	<input type="checkbox"/> JBALCPKIT	111 €
(Positioning kit is containing 1 of each of the components above)			
* Note: A Balance Standard cushion has a different inner cover as the Positioning version. In case you want to change from Standard to Positioning (and versa vice) you need to order a suitable inner cover			
Jay Balance Obliquity Pads		Charge	
Order 1 or 2 obliquity pads per side, depending on the level of obliquity that needs to be corrected. The pad has hook/loop on it and can be stacked (maximum 2).			
Obliquity pads can be stacked the following way: for PLA size A: order the obliquity pad size A - one side (RH or LH) - and additionally order the size B (RH or LH). For PLA size B, order the obliquity pad size B - one side (RH or LH) - and additionally order the size C (RH or LH). For PLA size C, order the obliquity pad size C - one side (RH or LH) - and additionally order the size D (RH or LH). Please notice that size D can only be ordered in combination with size C otherwise it will not fit in the PLA.			
<input type="checkbox"/>	JBALCOP-ALH Obliquity pad (left) for PLA A	42 €	
<input type="checkbox"/>	JBALCOP-BLH Obliquity pad (left) for PLA B	42 €	
<input type="checkbox"/>	JBALCOP_CLH Obliquity pad (left) for PLA C	42 €	
<input type="checkbox"/>	JBALCOP-DLH Additional obliquity pad (left) that can be stacked over obliquity pad for PLA C	42 €	
<input type="checkbox"/>	JBALCOP-ARH Obliquity pad (right) for PLA A	42 €	
<input type="checkbox"/>	JBALCOP-BRH Obliquity pad (right) for PLA B	42 €	
<input type="checkbox"/>	JBALCOP-CRH Obliquity pad (right) for PLA C	42 €	
<input type="checkbox"/>	JBALCOP-DRH Additional obliquity pad (right) that can be stacked over obliquity pad for PLA C	42 €	
Note: Cushions or inner covers purchased before February 2017 do not contain appropriate velcro attachment for the obliquity pads.			
		For more information visit our webpage www.sunrisemedical.eu © Sunrise Medical 2020	



JAY® Soft Combi P Cushion

OF-Jay Soft Combi P-EU-en-01.01.2020

Invoice to:
 Name:
 Street:
 Town: Postal code:
 E-Mail:
 Tel: Fax:

Deliver to:
 Name:
 Street:
 Town: Postal code:
 E-Mail:
 Tel: Fax:

Order date:
 Purchase order:
 Number required:



Marked for:
 Sunrise order no:

- Order
- Calculation

Jay® Soft Combi P Features
 Mild lateral & moderate posterior contouring
 Premoulded incontinence resistant coated foam base
 Deeper leg trough and medial thigh and trocantic support
 Flat base; solid seat option for sling seats use
 Incontinence resistant cover
 2 year guarantee

Customer service fax number
 Max. user weight: 150 kg

Reimbursement code:
 Art. no.:

USER WEIGHT kg
 Mandatory information to ensure correct configuration

Application:

Designed for the client who has symmetrical or mild asymmetrical posture, requiring moderate postural support
 Provides moderate lateral stability as well as moderate forward/rearward stability. Client must have low risk of skin breakdown.

CLIENT MEASUREMENT

Size Configuration - PRODUCT		COMPLETE		SEAT WIDTH													Basic Price	Product Code
				Width Coding	JC25	JC30	JC35	JC38	JC40	JC42	JC44	JC46	JC48	JC50	JC56	JC60		
SEAT DEPTH	cm	25	30	35	38,4	40	42	44	46	48	50	56	60	190,00 €	JC----			
Depth Coding	25	○	○															
JC__25	30	○	○	○														
JC__30	35		○	○														
JC__35	40			○	○													
JC__40	42				○	○	○	○										
JC__42	44					○	○	○	○	○								
JC__44	46						○	○	○	○	○							
JC__46	50								○	○	○	○	○					
JC__50	56									○	○	○	○	○				
JC__56	60											○	○	○	◇			
JC__60															◇			

SPARES AND ACCESSORIES

JSI wddd	<input type="checkbox"/> Solid Seat	Quantity	Unit Price	State Size Code
CJC wddd	<input type="checkbox"/> Additional Incontinence Resistant cover			CJC----

COSTS

Cushion Price	
Option Price	
Total Cost	

JAY SOFT COMBI P CODING SYSTEM

Soft Combi P Cushion Product Coding	(inc. cover)	JC = Jay Soft Combi P	25 = Width cm	30 = Depth cm	> JC2530 = Complete Cushion
Soft Combi P Cover Part Coding (spare)	Cover > C	JC = Jay Soft Combi P	25 = Width cm	30 = Depth cm	> CJC2530 = Cover
Jay Easy Solid Seat Part Coding (spare)		JSI = Jay Solid Insert	25 = Width cm	30 = Depth cm	> JSI2530 = Solid Seat

Conversion Table

cm	25,0	30,0	35,0	40,0	42,0	44,0	46,0	48,0	50,0	56,0	60,0
inches	9,8	11,7	13,7	15,6	16,4	17,2	18,0	18,8	19,5	21,9	23,4

For more information
 visit our webpage
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JAY®

Edition: 01.20
Valid until: 12.20

J3 Cushion

Invoice to:
Name:
Street:
Town: Postal code:
E-Mail:
Tel: Fax:

Deliver to:
Name:
Street:
Town: Postal code:
E-Mail:
Tel: Fax:

Order date:
Purchase order:
Number required:



Marked for:
Sunrise order no:

- Order
- Calculation

Jay® J3 Cushion Standard Features
Unique Optiwell technology to maximize stability & pressure redistribution
Fluid pad (standard factory filled or field variable) or Air (single or dual valve) insert to optimize immersion & accommodate positioning needs
Modifications and positioning accessories available
Std or deep flat foam base. Microclimatic cover with foam comfort layer
2 Year guarantee. 6 months on cover

Max. user weight:
150kg (cushion width 30 to 50 cm)
227 kg (cushion width: 56 to 60cm)

USER WEIGHT kg
 Mandatory information to ensure correct configuration

Base price Jay 3 Standard (Fluid / Air)
Base price Jay 3 Deep Contur (Fluid / Air)

Reimbursement code:

Application:

Client at high(std) to extreme (deep) risk of skin breakdown with or without aggressive postural needs.
 Symmetrical to significant asymmetrical posture requiring laterally, forward/rearward stability and/or positioning.
 May be unable to reposition or perform an independent pressure relief.

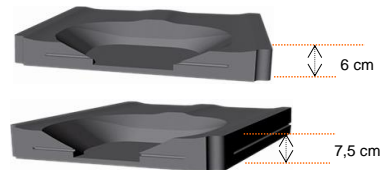
To order a J3 Cushion, a J3 SMART Part Number must be built. Follow the steps below to build your own unique Smart Part #.

J3C	S	4040	B	FF	M
J3 Cushion	STEP 1	STEP 2	STEP 3	STEP 4	STEP 5

J3 CUSHION BASE	Part #	Charge	Selected Components
	J3C	672 €	J3C

STEP 1

CUSHION HEIGHT	Select	Part #	Charge	Selected Components
Standard (9,5cm / 3,75" unloaded state)	<input type="checkbox"/>	S	-	S or D
Deep (11cm / 4,25" unloaded state)	<input type="checkbox"/>	D		
Deep (width: 56 - 60cm)	<input type="checkbox"/>	D		



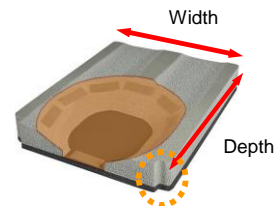
Note: Deep height not available in 30x30, 30x35 or 35x30cm sizes
 Deep height designed for maximum immersion/envelopment for a higher risk user with decreased tissue mass

STEP 2

CUSHION WIDTH AND DEPTH	Part #	Charge	Width in cm	Depth in cm
Standard Cushion (width: 30 - 50 cm)	Select	-	<input type="text"/>	<input type="text"/>
Bariatric Cushion (width: 56 - 60cm)	in matrix			

		Width										
		30	35	38	40	42	44	46	48	50	56	60
Depth	30	△	△									
	35	△	○									
	38		○	○	○	○	○					
	40		○	○	○	○	○					
	42			○	○	○	○	○	○			
	44			○	○	○	○	○	○	○		
	46		○		○	○	○	○	○	○	○	
	48				○	○	○	○	○	○	○	○
	50					○	○	○	○	○	○	○
	56										○	○
60										○	○	
Standard PLA		A			B (can be reduced to PLA A)				C (can be reduced to PLA A & B)			

- △ Only available in standard height
- Available in Standard and Deep height



Note: measure depth from front of seat notch to front top side of cushion

Conversion Table

cm	30	35	38	40	42	44	46	48	50	56	60
inches	11,7	13,7	14,9	15,6	16,4	17,2	18,0	18,8	19,5	21,9	23,4



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STEP 3

PELVIC LOADING AREA (PLA) SIZE **Select** **Part #** **Selected Components**

Experience has indicated that the PLA size that is standard on the cushion is appropriate for the majority of users. There is an option to reduce the PLA size via PLA reducer rings if this is clinically appropriate to optimize immersion, lateral stability and prevent bottoming out.

Optimal PLA sizing can help provide lower Ischia pressures, improved stability and comfort for the user

- A - Small (Standard with 30 - 38cm width*) A
- B - Medium (Standard with 40 - 48cm width*) B
- C - Large (Standard with 50 - 60cm width*) C A, B or C

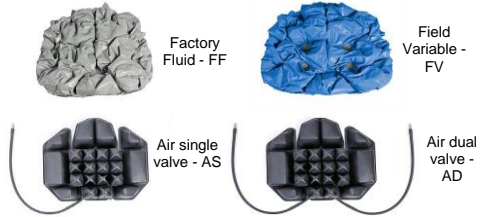
*Unless another size is requested

B and C PLA sizes are not available on 30 - 38cm wide cushions. / C PLA size are not available on 30 - 48cm wide cushions

STEP 4

PELVIC LOADING AREA (PLA) INSERT **Select** **Part #** **Charge**

- FLUID - Factory Filled Fluid Pad Option FF -
- FLUID - Field Variable Fluid Pad Option* FV
- AIR Insert Option - Single Valve** AS FF; FV; AS; AD
- AIR Insert Pad Option - Dual Valve** AD



*Field Variable Insert comes standard with two 3D fluid supplement pads for adjustment or assessment purposes and can accommodate two additional pads, which can be ordered in: Small, Medium; Large, X-Large

The 2 standard Supplement Pads supplied are based on PLA size (see table) and together with the PLA insert = FF fluid level

**Air Bladder Options ship with instructions, air pump, patch kit and nozzle fittings

FV	Fluid Supplement Pads Size
FV Size A	2x Medium - J3CFSPM
FV Size B	2x Large - J3CFSP
FV Size C	2x X-Large - J3CFSPXL

STEP 5

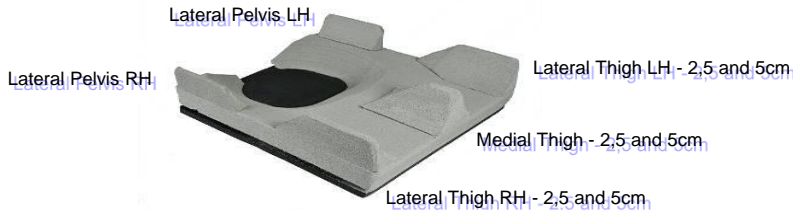
COVER OPTION

- Incontinent I -
 - Microclimatic M -
- I or M

POSITIONING COMPONENTS

Description	Charge	Short (Seat width 30 - 38cm)	Medium (Seat width 40 - 48cm)	Long (Seat width 50 - 60cm)
Lateral Thigh 2,5cm (1") (Left & Right)		<input type="checkbox"/> J3CAL51	<input type="checkbox"/> J3CALM1	<input type="checkbox"/> J3CALL1
Lateral Thigh 5cm (2") (Left & Right)		<input type="checkbox"/> J3CAL52	<input type="checkbox"/> J3CALM2	<input type="checkbox"/> J3CALL2
Medial Thigh 2,5cm (1") (each)		<input type="checkbox"/> J3CAMS1	<input type="checkbox"/> J3CAMP1	<input type="checkbox"/> J3CAML1
Medial Thigh 5cm (2") (each)		<input type="checkbox"/> J3CAMS2	<input type="checkbox"/> J3CAMP2	<input type="checkbox"/> J3CAML2
Lateral Pelvic 5cm (2") (Left & Right)		<input type="checkbox"/> J3CAPS2	<input type="checkbox"/> J3CAPM2	

Description	Charge	PLA A	PLA B	PLA C
Obliquity Pad Left - Standard base (each)		<input type="checkbox"/> J3CSAOL	<input type="checkbox"/> J3CSBOL	<input type="checkbox"/> J3CSCOL
Obliquity Pad Right - Standard base (each)		<input type="checkbox"/> J3CSAOR	<input type="checkbox"/> J3CSBOR	<input type="checkbox"/> J3CSCOR
Obliquity Pad Left - Deep base (each)		<input type="checkbox"/> J3CDAOL	<input type="checkbox"/> J3CDBOL	<input type="checkbox"/> J3CDCOL
Obliquity Pad Right - Deep base (each)		<input type="checkbox"/> J3CDAOR	<input type="checkbox"/> J3CDBOR	<input type="checkbox"/> J3CDCOR



J3 Smart Part Number

J3C					
STEP 1	STEP 2	STEP 3	STEP 4	STEP 5	

Notes

COSTS

COSTS	Unit price	
Cushion Price		
Option Price		
Total Cost		

Sunrise Medical Customer service

Address: Kahlbachring 2-4, D-69254 Malsch/Heidelberg

Tel. +497253 980-0

Fax. +497253 980-222

E-mail: international@sunrisemedical.de

Website: sunrisemedical.eu



www.SunriseMedical.eu

SPARE PARTS		Fluid Supplement Pads (each)		Charge	
PLA Reducer - Standard base		<input type="checkbox"/> J3CFSPS		Small	
<input type="checkbox"/> J3CPLARSCB	PLA reducer Std C -> B	<input type="checkbox"/> J3CFSPM		Medium	
<input type="checkbox"/> J3CPLARSCA	PLA reducer Std C -> A	<input type="checkbox"/> J3CFSP		Large	
<input type="checkbox"/> J3CPLARSBA	PLA reducer Std B -> A	<input type="checkbox"/> J3CFSPXL		X-Large	
PLA Reducer - Deep base		Spare Cover		Charge	
<input type="checkbox"/> J3CPLARDCB	PLA reducer Deep C -> B	<input type="checkbox"/> J3CCwwddl	Cover Standard & Deep Incontinent		
<input type="checkbox"/> J3CPLARDCA	PLA reducer Deep C -> A	<input type="checkbox"/> J3CCwwddM	Cover Standard & Deep Microclimatic		
<input type="checkbox"/> J3CPLARDBA	PLA reducer Deep B -> A	ww: Width	dd: Depth		
Evaluation (Fluid & Air) & Positioning Kits		Solid Seat		Charge	
<input type="checkbox"/> J3CEKSAEU	Standard PLA evaluation kit	<input type="checkbox"/> JSIwwdd	Solid Seat insert (wood plate)		
<input type="checkbox"/> J3CEKDAEU	Deep PLA evaluation kit	ww: Width	dd: Depth		
<input type="checkbox"/> J3CPEKEU	Positioning kit				
Fluid & Air inserts					
PLA A		PLA B		PLA C	
<input type="checkbox"/> J3CSAFFEU	FF Fluid Std	<input type="checkbox"/> J3CSBFFEU	FF Fluid Std	<input type="checkbox"/> J3CSCFFEU	FF Fluid Std
<input type="checkbox"/> J3CSAFVEU	FV Fluid Std	<input type="checkbox"/> J3CSBFVEU	FV Fluid Std	<input type="checkbox"/> J3CSCFVEU	FV Fluid Std
<input type="checkbox"/> J3CDAFFEU	FF Fluid Deep	<input type="checkbox"/> J3CDBFFEU	FF Fluid Deep	<input type="checkbox"/> J3CDCFFEU	FF Fluid Deep
<input type="checkbox"/> J3CDAFVEU	FV Fluid Deep	<input type="checkbox"/> J3CDBFVEU	FV Fluid Deep	<input type="checkbox"/> J3CDCFVEU	FV Fluid Deep
<input type="checkbox"/> J3CSAASEU	AS Air Std	<input type="checkbox"/> J3CSBASEU	AS Air Std	<input type="checkbox"/> J3CSCASEU	AS Air Std
<input type="checkbox"/> J3CSAADEU	AD Air Std	<input type="checkbox"/> J3CSBADEU	AD Air Std	<input type="checkbox"/> J3CSCADEU	AD Air Std
<input type="checkbox"/> J3CDAASEU	AS Air Deep	<input type="checkbox"/> J3CDBASEU	AS Air Deep	<input type="checkbox"/> J3CDCASEU	AS Air Deep
<input type="checkbox"/> J3CDADEU	AD Air Deep	<input type="checkbox"/> J3CDBADEU	AD Air Deep	<input type="checkbox"/> J3CDCADEU	AD Air Deep

J3C Positioning kit - J3CPEKEU	Short (Seat width 30 - 38cm)	Medium (Seat width 40 - 48cm)	Long (Seat width 50 - 60cm)
Lateral Thigh Left 2,5cm (1") (Left & Right)		1x J3CALM1	1x J3CALL1
Lateral Thigh Left 5cm (2") (Left & Right)	1x J3CALS2	1x J3CALM2	1x J3CALL2
Medial Thigh 2,5cm (1") (each)		1x J3CMM1	1x J3CAML1
Medial Thigh 5cm (2") (each)	1x J3CAMS2	1x J3CMM2	1x J3CAML2
Lateral Pelvic 5cm (2") (Left & Right)	1x J3CAPS2	1x J3CAPM2	
		PLA B	PLA C
Obliquity Pad Left - Standard base (each)		1x J3CSBOL	1x J3CSCOL
Obliquity Pad Right - Standard base (each)		1x J3CSBOR	1x J3CSCOR
Obliquity Pad Left - Deep base (each)		1x J3CDBOL	1x J3CDCOL
Obliquity Pad Right - Deep base (each)		1x J3CDBOR	1x J3CDCOR

J3C Fluid Standard evaluation kit - J3CEKSAEU	Qty	Part Nr.	Qty	Part Nr.	Qty	Part Nr.
Field Variable Fluid Pad Option (PLA B & PLA C)			1x	J3CSBFVEU	1x	J3CSCFVEU
AIR Fluid Pad Option - Single Valve (PLA B & PLA C)			1x	J3CSBASEU	1x	J3CSCASEU
AIR Fluid Pad Option - Dual Valve (PLA B & PLA C)			1x	J3CSBADEU	1x	J3CSCADEU
PLA reducer Std C -> B	1x	J3CPLARSCB				
Fluid Supplement Pads - Small & Medium	1x	J3CFSPS	1x	J3CFSPM		
Fluid Supplement Pads - Large & X-Large	1x	J3CFSP	1x	J3CFSPXL		
Repair Kit	1x	J3CRK				
Air Pump	1x	J3CAP				

J3C Fluid Deep evaluation kit - J3CEKDAEU	Qty	Part Nr.	Qty	Part Nr.	Qty	Part Nr.
Field Variable Fluid Pad Option (PLA B & PLA C)			1x	J3CDBFVEU	1x	J3CDCFVEU
AIR Fluid Pad Option - Single Valve (PLA B & PLA C)			1x	J3CDBASEU	1x	J3CDCASEU
AIR Fluid Pad Option - Dual Valve (PLA B & PLA C)			1x	J3CDBADEU	1x	J3CDCADEU
PLA reducer Std C -> B	1x	J3CPLARDCB				
Fluid Supplement Pads - Small & Medium	1x	J3CFSPS	1x	J3CFSPM		
Fluid Supplement Pads - Large & X-Large	1x	J3CFSP	1x	J3CFSPXL		
Repair Kit	1x	J3CRK				
Air Pump	1x	J3CAP				

Invoice to:
 Name:
 Street:
 Town: Postal code:
 E-Mail:
 Tel: Fax:

 Deliver to:
 Name:
 Street:
 Town: Postal code:
 E-Mail:
 Tel: Fax:

 Order date:
 Purchase order:
 Number required:

 Marked for:
 Sunrise order no:

 Order
 Calculation
Jay Easy Back Range
Complete backrest package for clients up to 136kg.
Universal hardware for rapid application.
Easily adjustable for assessment & changing needs.
Backs and options fully transit tested.

2 year guarantee

 ○ = 5 days from the EDC
 ◇ = 15 days from the EDC
 = upcharge option

Customer service fax: +497253 980-222
Max. user weight: 136 kg
User weight: kg
Mandatory information to ensure correct configuration
Applications:
 For all clients requiring postural back support from mild lateral stability to high lateral and posterior stability.
 Two postural back shapes to cover back support at the appropriate backrest height for the user.
 Adjustable in depth, height, angle and chair width, ensuring rapid and comprehensive client positioning.

CLIENT MEASUREMENT
Ordering Steps:

1. Assess Lateral Stability Requirement (SC or PDC)
2. Assess Posterior Stability Requirement (MT; UT or SH)
3. Determine client trunk width across the sternum and cross check with backpost width.
4. Assess for options and 'velcro' positioning inserts


Shallow Contour (SC)
 Moderate Lateral Support

Posterior Deep Contour (PDC)
 Full Lateral Support

Chair backcane widths (Outside to outside of backcane)	Back Width				Back Width			
	36 cm	41 cm	46 cm	51 cm	36 cm	41 cm	46 cm	51 cm
	36 - 40 cm	41 - 45 cm	46 - 50 cm	51 - 56 cm	36 - 40 cm	41 - 45 cm	46 - 50 cm	51 - 56 cm

Mid Thoracic, Height: 38 cm	€ 595			
	○	○	○	
	JEBSCMTT36	JEBSCMTT41	JEBSCMTT46	

Posterior Deep Contour (PDC)	€ 708			
	○	○	○	
	JEBPDCMTT36	JEBPDCMTT41	JEBPDCMTT46	

Upper Thoracic, Height: 46 cm	€ 629			
	○	○	○	○
	JEBSCUTM36	JEBSCUTM41	JEBSCUTM46	JEBSCUTM51
Laterals, headrest & harnesses available				

Posterior Deep Contour (PDC)	€ 708			
	○	○	○	○
	JEBPDCUTM36	JEBPDCUTM41	JEBPDCUTM46	JEBPDCUTM51
Laterals, headrest & harnesses available				

Shoulder Height, Height: 53 cm	€ 663			
	○	○	○	○
	JEBSCSHS36	JEBSCSHS41	JEBSCSHS46	JEBSCSHS51
Laterals, headrest & harnesses available				

Posterior Deep Contour (PDC)	€ 708			
		○	○	○
		JEBPDCSHS41	JEBPDCSHS46	JEBPDCSHS51
Laterals, headrest & harnesses available				

HEADREST Unit Price

Only available where headrest is indicated on the first page.
 For complete headrest please order the mount and the pad (J3EUHDXH & J3EUHDLSP).
 This headrest is in combination with the Easy Back crash tested.

J3EUHDXH	<input type="checkbox"/>	Jay Standard Headrest Mount (Bracket & Mount only)	180 €
J3EUHDLSP	<input type="checkbox"/>	Jay Standard Headrest Pad	90 €
J3EUUHM	<input type="checkbox"/>	Universal Headrest Mount (required to use any other headrest not listed in this order form)	57 €

FIXED LATERAL SUPPORT (only available where laterals are indicated on the first page) Unit Price

Left Hand Fixed Lateral

		Height		
		10	12	15
Width	10	<input type="checkbox"/> J3LAT1010FXLH	<input type="checkbox"/> J3LAT1012FXLH	<input type="checkbox"/> J3LAT1015FXLH
	15	<input type="checkbox"/> J3LAT1510FXLH	<input type="checkbox"/> J3LAT1512FXLH	<input type="checkbox"/> J3LAT1515FXLH

101 €
101 €

Right Hand Fixed Lateral

		Height		
		10	12	15
Width	10	<input type="checkbox"/> J3LAT1010FXRH	<input type="checkbox"/> J3LAT1012FXRH	<input type="checkbox"/> J3LAT1015FXRH
	15	<input type="checkbox"/> J3LAT1510FXRH	<input type="checkbox"/> J3LAT1512FXRH	<input type="checkbox"/> J3LAT1515FXRH

101 €
101 €

When ordering 2 laterals (left & right), you need to pick the sizes in both matrices above.

Total Price

CHEST STRAP (only available where harnesses are indicated on the first page) Unit Price

	Size			
	Small	Medium	Large	Xlarge
Padded Anterior Strap	<input type="checkbox"/> J3HRNPASS	<input type="checkbox"/> J3HRNPASM	<input type="checkbox"/> J3HRNPASL	<input type="checkbox"/> J3HRNPASX
Centre Open Harness	<input type="checkbox"/> J3HRNCOHS	<input type="checkbox"/> J3HRNCOHM	<input type="checkbox"/> J3HRNCOHL	<input type="checkbox"/> J3HRNCOHX

90 €
136 €

Total Price

LUMBAR SUPPORT Unit Price

		Width			
		36 cm	41 cm	46 cm	51 cm
Small Lumbar	<input type="checkbox"/> J3SPNSL36	<input type="checkbox"/> J3SPNSL41	<input type="checkbox"/> J3SPNSL46	<input type="checkbox"/> J3SPNSL51	1 unit included as standard
Large Lumbar Support	<input type="checkbox"/> J3SPNLL36	<input type="checkbox"/> J3SPNLL41	<input type="checkbox"/> J3SPNLL46	<input type="checkbox"/> J3SPNLL51	1 unit included as standard
Wedge	<input type="checkbox"/> J3SPNWE36	<input type="checkbox"/> J3SPNWE41	<input type="checkbox"/> J3SPNWE46	<input type="checkbox"/> J3SPNWE51	

22 €
22 €
22 €

Total Price

Jay Easy Back - Basic Price €
Option price €
Packaging and transport	
Exclusive VAT	
VAT.	
Total Price €

Invoice to:
 Name:
 Street:
 Town: Postal code:
 E-Mail:
 Tel: Fax:

 Deliver to:
 Name:
 Street:
 Town: Postal code:
 E-Mail:
 Tel: Fax:

 Order date:
 Purchase order:
 Number required:


Marked for:

Sunrise order no:

-
- Order
-
-
- Calculation
-
- Product Features:**
- Firm base, anatomically correct well
 - Carveable base for build-ups, cut outs and customisation
Jay Deep Fluid Tripad with soft foam overlay
 - Wide range of postural support accessories
 - Air exchange as standard, incontinence resistant cover and
solid seat inserts are options


Customer Service Fax Number
 Max. user weight: 150 kg

USER WEIGHT kg

Mandatory information to ensure correct configuration

Size	Complete Cushion *	Air Exchange Cover **	Incontinence Cover ***	Solid Seat Insert	3D Jay Flow Fluid Tripad	Pre Contoured Foam Base	Foam Base with Solid Drop Seat
Standard	725 €	93 €	89 €	77 €	461 €	254 €	494 €
SW x SD	Item no.	Item no.	Item no.	Item no.	Item no.	Item no.	Item no.
32 x 35	<input type="checkbox"/> JM2444.3235AT	<input type="checkbox"/> JC2444AT	<input type="checkbox"/> JC2444NI	-	<input type="checkbox"/> JF2444	<input type="checkbox"/> JMB2444.3235	-
32 x 38	<input type="checkbox"/> JM2446.3238AT	<input type="checkbox"/> JC2446AT	<input type="checkbox"/> JC2446NI	-	<input type="checkbox"/> JF2446	<input type="checkbox"/> JMB2446.3238	-
32 x 40	<input type="checkbox"/> JM2446.3240AT	<input type="checkbox"/> JC2446AT	<input type="checkbox"/> JC2446NI	-	<input type="checkbox"/> JF2446	<input type="checkbox"/> JMB2446.3240	-
35 x 35	<input type="checkbox"/> J2444AT	<input type="checkbox"/> JC2444AT	<input type="checkbox"/> JC2444NI	<input type="checkbox"/> JS2444	<input type="checkbox"/> JF2444	<input type="checkbox"/> JB2444	<input type="checkbox"/> JB2444D
35 x 38	<input type="checkbox"/> JM2446.3538AT	<input type="checkbox"/> JC2446AT	<input type="checkbox"/> JC2446NI	<input type="checkbox"/> JS2444	<input type="checkbox"/> JF2446	<input type="checkbox"/> JMB2446.3538	-
35 x 40	<input type="checkbox"/> J2446AT	<input type="checkbox"/> JC2446AT	<input type="checkbox"/> JC2446NI	<input type="checkbox"/> JS2446	<input type="checkbox"/> JF2446	<input type="checkbox"/> JB2446	<input type="checkbox"/> JB2446D
38 x 35	<input type="checkbox"/> JM2455.3835AT	<input type="checkbox"/> JC2455AT	<input type="checkbox"/> JC2455NI	<input type="checkbox"/> JS2444	<input type="checkbox"/> JF2455	<input type="checkbox"/> JMB2455.3835	-
38 x 38	<input type="checkbox"/> J2455AT	<input type="checkbox"/> JC2455AT	<input type="checkbox"/> JC2455NI	<input type="checkbox"/> JS2455	<input type="checkbox"/> JF2455	<input type="checkbox"/> JB2455	<input type="checkbox"/> JB2455D
38 x 40	<input type="checkbox"/> JM2457.3840AT	<input type="checkbox"/> JC2457AT	<input type="checkbox"/> JC2457NI	<input type="checkbox"/> JS2446	<input type="checkbox"/> JF2457	<input type="checkbox"/> JMB2457.3840	-
38 x 42	<input type="checkbox"/> J2457AT	<input type="checkbox"/> JC2457AT	<input type="checkbox"/> JC2457NI	<input type="checkbox"/> JS2457	<input type="checkbox"/> JF2457	<input type="checkbox"/> JB2457	<input type="checkbox"/> JB2457D
38 x 45	<input type="checkbox"/> JM2468.3845AT	<input type="checkbox"/> JC2468AT	<input type="checkbox"/> JC2468NI	<input type="checkbox"/> JS2457	<input type="checkbox"/> JF2468	<input type="checkbox"/> JMB2468.3845	-
40 x 38	<input type="checkbox"/> JM2466.4038AT	<input type="checkbox"/> JC2466AT	<input type="checkbox"/> JC2466NI	<input type="checkbox"/> JS2455	<input type="checkbox"/> JF2466	<input type="checkbox"/> JMB2466.4038	-
40 x 40	<input type="checkbox"/> J2466AT	<input type="checkbox"/> JC2466AT	<input type="checkbox"/> JC2466NI	<input type="checkbox"/> JS2466	<input type="checkbox"/> JF2466	<input type="checkbox"/> JB2466	<input type="checkbox"/> JB2466D
40 x 42	<input type="checkbox"/> JM2468.4042AT	<input type="checkbox"/> JC2468AT	<input type="checkbox"/> JC2468NI	<input type="checkbox"/> JS2466	<input type="checkbox"/> JF2468	<input type="checkbox"/> JMB2468.4042	-
40 x 45	<input type="checkbox"/> J2468AT	<input type="checkbox"/> JC2468AT	<input type="checkbox"/> JC2468NI	<input type="checkbox"/> JS2468	<input type="checkbox"/> JF2468	<input type="checkbox"/> JB2468	<input type="checkbox"/> JB2468D
40 x 50	<input type="checkbox"/> J2460AT	<input type="checkbox"/> JC2460AT	<input type="checkbox"/> JC2460NI	<input type="checkbox"/> JS2460	<input type="checkbox"/> JF2460	<input type="checkbox"/> JB2460	<input type="checkbox"/> JB2460D
42 x 38	<input type="checkbox"/> J2475AT	<input type="checkbox"/> JC2475AT	<input type="checkbox"/> JC2475NI	<input type="checkbox"/> JS2475	<input type="checkbox"/> JF2475	<input type="checkbox"/> JB2475	<input type="checkbox"/> JB2475D
42 x 40	<input type="checkbox"/> JM2477.4240AT	<input type="checkbox"/> JC2477AT	<input type="checkbox"/> JC2477NI	<input type="checkbox"/> JS2466	<input type="checkbox"/> JF2477	<input type="checkbox"/> JMB2477.4240	-
42 x 42	<input type="checkbox"/> J2477AT	<input type="checkbox"/> JC2477AT	<input type="checkbox"/> JC2477NI	<input type="checkbox"/> JS2477	<input type="checkbox"/> JF2477	<input type="checkbox"/> JB2477	<input type="checkbox"/> JB2477D
42 x 45	<input type="checkbox"/> JM2488.4245AT	<input type="checkbox"/> JC2488AT	<input type="checkbox"/> JC2488NI	<input type="checkbox"/> JS2477	<input type="checkbox"/> JF2488	<input type="checkbox"/> JMB2488.4245	-
45 x 40	<input type="checkbox"/> J2486AT	<input type="checkbox"/> JC2486AT	<input type="checkbox"/> JC2486NI	<input type="checkbox"/> JS2486	<input type="checkbox"/> JF2486	<input type="checkbox"/> JB2486	<input type="checkbox"/> JB2486D
45 x 42	<input type="checkbox"/> JM2488.4542AT	<input type="checkbox"/> JC2488AT	<input type="checkbox"/> JC2488NI	<input type="checkbox"/> JS2477	<input type="checkbox"/> JF2488	<input type="checkbox"/> JMB2488.4542	-
45 x 45	<input type="checkbox"/> J2488AT	<input type="checkbox"/> JC2488AT	<input type="checkbox"/> JC2488NI	<input type="checkbox"/> JS2488	<input type="checkbox"/> JF2488	<input type="checkbox"/> JB2488	<input type="checkbox"/> JB2488D
45 x 50	<input type="checkbox"/> J2480AT	<input type="checkbox"/> JC2480AT	<input type="checkbox"/> JC2480NI	<input type="checkbox"/> JS2480	<input type="checkbox"/> JF2480	<input type="checkbox"/> JB2480	<input type="checkbox"/> JB2480D

Special size	804 €	102 €	96 €	84 €	563 €	305 €	521 €
SW x SD	Item no.	Item no.	Item no.	Item no.	Item no.	Item no.	Item no.
48 x 40	<input type="checkbox"/> JM2406.4840AT	<input type="checkbox"/> JC2406AT	<input type="checkbox"/> JC2406NI	<input type="checkbox"/> JS2486 °	<input type="checkbox"/> JF2406	<input type="checkbox"/> JMB2406.4840	-
48 x 42	<input type="checkbox"/> JM2408.4842AT	<input type="checkbox"/> JC2408AT	<input type="checkbox"/> JC2408NI	<input type="checkbox"/> JS2486 °	<input type="checkbox"/> JF2408	<input type="checkbox"/> JMB2408.4842	-
48 x 45	<input type="checkbox"/> JM2408.4845AT	<input type="checkbox"/> JC2408AT	<input type="checkbox"/> JC2408NI	<input type="checkbox"/> JS2488 °	<input type="checkbox"/> JF2408	<input type="checkbox"/> JMB2408.4845	-
50 x 40	<input type="checkbox"/> J2406AT	<input type="checkbox"/> JC2406AT	<input type="checkbox"/> JC2406NI	<input type="checkbox"/> JS2406	<input type="checkbox"/> JF2406	<input type="checkbox"/> JB2406	<input type="checkbox"/> JB2406D
50 x 42	<input type="checkbox"/> JM2408.5042AT	<input type="checkbox"/> JC2408AT	<input type="checkbox"/> JC2408NI	<input type="checkbox"/> JS2406	<input type="checkbox"/> JF2408	<input type="checkbox"/> JMB2408.5042	-
50 x 45	<input type="checkbox"/> J2408AT	<input type="checkbox"/> JC2408AT	<input type="checkbox"/> JC2408NI	<input type="checkbox"/> JS2408	<input type="checkbox"/> JF2408	<input type="checkbox"/> JB2408	<input type="checkbox"/> JB2408D
50 x 50	<input type="checkbox"/> J2400AT	<input type="checkbox"/> JC2400AT	<input type="checkbox"/> JC2400NI	<input type="checkbox"/> JS2400	<input type="checkbox"/> JF2400	<input type="checkbox"/> JB2400	<input type="checkbox"/> JB2400D
55 x 40	<input type="checkbox"/> J2426AT	<input type="checkbox"/> JC2426AT	<input type="checkbox"/> JC2426NI	<input type="checkbox"/> JS2426	<input type="checkbox"/> JF2426	<input type="checkbox"/> JB2426	<input type="checkbox"/> JB2426D
55 x 45	<input type="checkbox"/> J2428AT	<input type="checkbox"/> JC2428AT	<input type="checkbox"/> JC2428NI	<input type="checkbox"/> JS2428	<input type="checkbox"/> JF2428	<input type="checkbox"/> JB2428	<input type="checkbox"/> JB2428D

° 70 €

- | | | | |
|--|-------------|------------------------|--------------------------|
| Overfilled Fluid Pad on request, no upcharge | no upcharge | Add OFI to item number | <input type="checkbox"/> |
| * Cushion with Solid Drop Seat, upcharge | 156 € | Add D to item number | <input type="checkbox"/> |
| **Stretch Air Exchange Cover for Solid Drop Seat Option | no upcharge | Add D to item number | <input type="checkbox"/> |
| ***Stretch Incontinence Cover for Solid Drop Seat Option | no upcharge | Add D to item number | <input type="checkbox"/> |
| Set of Four 1,25 cm Drop Hooks (Replacement Cost) | 61 € | M-24S | <input type="checkbox"/> |
| Set of Four 2,5 cm Drop Hooks (Replacement Cost) | 61 € | M-24M | <input type="checkbox"/> |
| Set of Four 3,75 cm Drop Hooks (Replacement Cost) | 74 € | M-24L | <input type="checkbox"/> |

Sunrise Medical Customer service
 Address: Kahlbachring 2-4, D-69254 Malsch/Heidelberg
 Tel. +497253 980-0
 Fax. +497253 980-222

 E-mail: export@sunrisemedical.de
 Website: www.sunrisemedical.eu

 For more information
 visit our webpage

www.sunrisemedical.eu

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Invoice to:
 Name:
 Street:
 Town: Postal code:
 E-Mail:
 Tel: Fax:

 Deliver to:
 Name:
 Street:
 Town: Postal code:
 E-Mail:
 Tel: Fax:

 Order date:
 Purchase order:
 Number required:


-
- Order
-
-
- Calculation

Product Features:

- Firm base, anatomical well, femoral loading
- Carveable base for build-ups, cut outs and customisation
- Jay Fluid Tripad for ischial immersion and envelopment
- Wide range of postural support accessories
- Air exchange cover as standard, incontinence resistant cover and sold seat inserts are options


 Marked for:
 Sunrise order no:

Customer Service Fax Number +497253 980-222
Max. user weight: 150 kg
USER WEIGHT kg

Mandatory information to ensure correct configuration

Size	Complete Cushion	Air Exchange Cover	Incontinence Cover	Flow Fluid Pad	J2 Base	Solid Seat Insert	1,25 cm Pelvic Obliquity Build-Up LH	1,25 cm Pelvic Obliquity Build-Up RH
Standard	692 €	73 €	73 €	428 €	230 €	77 €	40 €	40 €
SW x SD	Item no.	Item no.	Item no.	Item no.	Item no.	Item no.	Item no.	Item no.
32 x 38	<input type="checkbox"/> JM2108.3238AT	<input type="checkbox"/> JC2108AT	<input type="checkbox"/> JC2108N	<input type="checkbox"/> JF2108	<input type="checkbox"/> JMB2108.3238	<input type="checkbox"/> JS2108	<input type="checkbox"/> JB2168L	<input type="checkbox"/> JB2168R
32 x 40	<input type="checkbox"/> JM2108.3240AT	<input type="checkbox"/> JC2108AT	<input type="checkbox"/> JC2108N	<input type="checkbox"/> JF2108	<input type="checkbox"/> JMB2108.3240	<input type="checkbox"/> JS2108	<input type="checkbox"/> JB2168L	<input type="checkbox"/> JB2168R
35 x 38	<input type="checkbox"/> JM2108.3538AT	<input type="checkbox"/> JC2108AT	<input type="checkbox"/> JC2108N	<input type="checkbox"/> JF2108	<input type="checkbox"/> JMB2108.3538	<input type="checkbox"/> JS2108	<input type="checkbox"/> JB2168L	<input type="checkbox"/> JB2168R
35 x 40	<input type="checkbox"/> J2108AT	<input type="checkbox"/> JC2108AT	<input type="checkbox"/> JC2108N	<input type="checkbox"/> JF2108	<input type="checkbox"/> JB2108	<input type="checkbox"/> JS2108	<input type="checkbox"/> JB2168L	<input type="checkbox"/> JB2168R
38 x 38	<input type="checkbox"/> JM2105.3838AT	<input type="checkbox"/> JC2105AT	<input type="checkbox"/> JC2105N	<input type="checkbox"/> JF2105	<input type="checkbox"/> JMB2105.3838	<input type="checkbox"/> JS2108	<input type="checkbox"/> JB2165L	<input type="checkbox"/> JB2165R
38 x 40	<input type="checkbox"/> JM2105.3840AT	<input type="checkbox"/> JC2105AT	<input type="checkbox"/> JC2105N	<input type="checkbox"/> JF2105	<input type="checkbox"/> JMB2105.3840	<input type="checkbox"/> JS2108	<input type="checkbox"/> JB2165L	<input type="checkbox"/> JB2165R
38 x 42	<input type="checkbox"/> JM2106.3842AT	<input type="checkbox"/> JC2106AT	<input type="checkbox"/> JC2106N	<input type="checkbox"/> JF2106	<input type="checkbox"/> JMB2106.3842	<input type="checkbox"/> JS2105	<input type="checkbox"/> JB2166L	<input type="checkbox"/> JB2166R
38 x 45	<input type="checkbox"/> JM2106.3845AT	<input type="checkbox"/> JC2106AT	<input type="checkbox"/> JC2106N	<input type="checkbox"/> JF2106	<input type="checkbox"/> JMB2106.3845	<input type="checkbox"/> JS2106	<input type="checkbox"/> JB2166L	<input type="checkbox"/> JB2166R
40 x 40	<input type="checkbox"/> J2105AT	<input type="checkbox"/> JC2105AT	<input type="checkbox"/> JC2105N	<input type="checkbox"/> JF2105	<input type="checkbox"/> JB2105	<input type="checkbox"/> JS2105	<input type="checkbox"/> JB2165L	<input type="checkbox"/> JB2165R
40 x 42	<input type="checkbox"/> JM2106.4042AT	<input type="checkbox"/> JC2106AT	<input type="checkbox"/> JC2106N	<input type="checkbox"/> JF2106	<input type="checkbox"/> JMB2106.4042	<input type="checkbox"/> JS2105	<input type="checkbox"/> JB2177L	<input type="checkbox"/> JB2177R
40 x 45	<input type="checkbox"/> J2106AT	<input type="checkbox"/> JC2106AT	<input type="checkbox"/> JC2106N	<input type="checkbox"/> JF2106	<input type="checkbox"/> JB2106	<input type="checkbox"/> JS2106	<input type="checkbox"/> JB2166L	<input type="checkbox"/> JB2166R
42 x 40	<input type="checkbox"/> JM2117.4240AT	<input type="checkbox"/> JC2117AT	<input type="checkbox"/> JC2117N	<input type="checkbox"/> JF2117	<input type="checkbox"/> JMB2117.4240	<input type="checkbox"/> JS2105	<input type="checkbox"/> JB2177L	<input type="checkbox"/> JB2177R
42 x 42	<input type="checkbox"/> J2117AT	<input type="checkbox"/> JC2117AT	<input type="checkbox"/> JC2117N	<input type="checkbox"/> JF2117	<input type="checkbox"/> JB2117	<input type="checkbox"/> JS2117	<input type="checkbox"/> JB2177L	<input type="checkbox"/> JB2177R
43 x 45	<input type="checkbox"/> JM2101.4345AT	<input type="checkbox"/> JC2101AT	<input type="checkbox"/> JC2101N	<input type="checkbox"/> JF2101	<input type="checkbox"/> JMB2101.4345	<input type="checkbox"/> JS2100	<input type="checkbox"/> JB2161L	<input type="checkbox"/> JB2161R
45 x 40	<input type="checkbox"/> J2100AT	<input type="checkbox"/> JC2100AT	<input type="checkbox"/> JC2100N	<input type="checkbox"/> JF2100	<input type="checkbox"/> JB2100	<input type="checkbox"/> JS2100	<input type="checkbox"/> JB2160L	<input type="checkbox"/> JB2160R
45 x 43	<input type="checkbox"/> JM2101.4543AT	<input type="checkbox"/> JC2101AT	<input type="checkbox"/> JC2101N	<input type="checkbox"/> JF2101	<input type="checkbox"/> JMB2101.4543	<input type="checkbox"/> JS2100	<input type="checkbox"/> JB2161L	<input type="checkbox"/> JB2161R
45 x 45	<input type="checkbox"/> J2101AT	<input type="checkbox"/> JC2101AT	<input type="checkbox"/> JC2101N	<input type="checkbox"/> JF2101	<input type="checkbox"/> JB2101	<input type="checkbox"/> JS2101	<input type="checkbox"/> JB2161L	<input type="checkbox"/> JB2161R
Special size								
Special size	759 €	89 €	89 €	509 €	250 €	85 €	40 €	40 €
SW x SD	Item no.	Item no.	Item no.	Item no.	Item no.	Item no.	Item no.	Item no.
38 x 50	<input type="checkbox"/> JM2107.3850AT	<input type="checkbox"/> JC2107AT	<input type="checkbox"/> JC2107N	<input type="checkbox"/> JF2107	<input type="checkbox"/> JMB2107.3850	<input type="checkbox"/> JS2107	<input type="checkbox"/> JB2167L	<input type="checkbox"/> JB2167R
40 x 50	<input type="checkbox"/> J2107AT	<input type="checkbox"/> JC2107AT	<input type="checkbox"/> JC2107N	<input type="checkbox"/> JF2107	<input type="checkbox"/> JB2107	<input type="checkbox"/> JS2107	<input type="checkbox"/> JB2167L	<input type="checkbox"/> JB2167R
42 x 48	<input type="checkbox"/> JM2103.4248AT	<input type="checkbox"/> JC2103AT	<input type="checkbox"/> JC2103N	<input type="checkbox"/> JF2103	<input type="checkbox"/> JMB2103.4248	<input type="checkbox"/> JS2100*	<input type="checkbox"/> JB2163L	<input type="checkbox"/> JB2163R
42 x 50	<input type="checkbox"/> JM2103.4250AT	<input type="checkbox"/> JC2103AT	<input type="checkbox"/> JC2103N	<input type="checkbox"/> JF2103	<input type="checkbox"/> JMB2103.4250	<input type="checkbox"/> JS2107	<input type="checkbox"/> JB2163L	<input type="checkbox"/> JB2163R
45 x 48	<input type="checkbox"/> JM2103.4548AT	<input type="checkbox"/> JC2103AT	<input type="checkbox"/> JC2103N	<input type="checkbox"/> JF2103	<input type="checkbox"/> JMB2103.4548	<input type="checkbox"/> JS2101*	<input type="checkbox"/> JB2163L	<input type="checkbox"/> JB2163R
45 x 50	<input type="checkbox"/> J2103AT	<input type="checkbox"/> JC2103AT	<input type="checkbox"/> JC2103N	<input type="checkbox"/> JF2103	<input type="checkbox"/> JB2103	<input type="checkbox"/> JS2103	<input type="checkbox"/> JB2163L	<input type="checkbox"/> JB2163R
48 x 40	<input type="checkbox"/> JM2116.4840AT	<input type="checkbox"/> JC2116AT	<input type="checkbox"/> JC2116N	<input type="checkbox"/> JF2116	<input type="checkbox"/> JMB2116.4840	<input type="checkbox"/> JS2100*	<input type="checkbox"/> JB2169L	<input type="checkbox"/> JB2169R
48 x 42	<input type="checkbox"/> JM2118.4842AT	<input type="checkbox"/> JC2118AT	<input type="checkbox"/> JC2118N	<input type="checkbox"/> JF2118	<input type="checkbox"/> JMB2118.4842	<input type="checkbox"/> JS2100*	<input type="checkbox"/> JB2169L	<input type="checkbox"/> JB2169R
48 x 45	<input type="checkbox"/> JM2118.4845AT	<input type="checkbox"/> JC2118AT	<input type="checkbox"/> JC2118N	<input type="checkbox"/> JF2118	<input type="checkbox"/> JMB2118.4845	<input type="checkbox"/> JS2101*	<input type="checkbox"/> JB2169L	<input type="checkbox"/> JB2169R
48 x 48	<input type="checkbox"/> JM2102.4848AT	<input type="checkbox"/> JC2102AT	<input type="checkbox"/> JC2102N	<input type="checkbox"/> JF2102	<input type="checkbox"/> JMB2102.4848	<input type="checkbox"/> JS2101*	<input type="checkbox"/> JB2169L	<input type="checkbox"/> JB2169R
48 x 50	<input type="checkbox"/> JM2102.4850AT	<input type="checkbox"/> JC2102AT	<input type="checkbox"/> JC2102N	<input type="checkbox"/> JF2102	<input type="checkbox"/> JMB2102.4850	<input type="checkbox"/> JS2103	<input type="checkbox"/> JB2169L	<input type="checkbox"/> JB2169R
50 x 40	<input type="checkbox"/> J2116AT	<input type="checkbox"/> JC2116AT	<input type="checkbox"/> JC2116N	<input type="checkbox"/> JF2116	<input type="checkbox"/> JB2116	<input type="checkbox"/> JS2116	<input type="checkbox"/> JB2169L	<input type="checkbox"/> JB2169R
50 x 42	<input type="checkbox"/> JM2118.5042AT	<input type="checkbox"/> JC2118AT	<input type="checkbox"/> JC2118N	<input type="checkbox"/> JF2118	<input type="checkbox"/> JMB2118.5042	<input type="checkbox"/> JS2116	<input type="checkbox"/> JB2170L	<input type="checkbox"/> JB2170R
50 x 45	<input type="checkbox"/> J2118AT	<input type="checkbox"/> JC2118AT	<input type="checkbox"/> JC2118N	<input type="checkbox"/> JF2118	<input type="checkbox"/> JB2118	<input type="checkbox"/> JS2118	<input type="checkbox"/> JB2170L	<input type="checkbox"/> JB2170R
50 x 48	<input type="checkbox"/> JM2102.5048AT	<input type="checkbox"/> JC2102AT	<input type="checkbox"/> JC2102N	<input type="checkbox"/> JF2102	<input type="checkbox"/> JMB2102.5048	<input type="checkbox"/> JS2118	<input type="checkbox"/> JB2162L	<input type="checkbox"/> JB2162R
50 x 50	<input type="checkbox"/> J2102AT	<input type="checkbox"/> JC2102AT	<input type="checkbox"/> JC2102N	<input type="checkbox"/> JF2102	<input type="checkbox"/> JB2102	<input type="checkbox"/> JS2102	<input type="checkbox"/> JB2162L	<input type="checkbox"/> JB2162R
56 x 45	<input type="checkbox"/> JM2104.5645AT	<input type="checkbox"/> JC2104AT	<input type="checkbox"/> JC2104N	<input type="checkbox"/> JF2104	<input type="checkbox"/> JMB2104.5645	<input type="checkbox"/> JS2104	<input type="checkbox"/> JB2164L	<input type="checkbox"/> JB2164R
56 x 48	<input type="checkbox"/> JM2104.5648AT	<input type="checkbox"/> JC2104AT	<input type="checkbox"/> JC2104N	<input type="checkbox"/> JF2104	<input type="checkbox"/> JMB2104.5648	<input type="checkbox"/> JS2118	<input type="checkbox"/> JB2164L	<input type="checkbox"/> JB2164R
60 x 45	<input type="checkbox"/> JM2104.6045AT	<input type="checkbox"/> JC2104AT	<input type="checkbox"/> JC2104N	<input type="checkbox"/> JF2104	<input type="checkbox"/> JMB2104.6045	<input type="checkbox"/> JS2118	<input type="checkbox"/> JB2164L	<input type="checkbox"/> JB2164R
60 x 48	<input type="checkbox"/> JM2104.6048AT	<input type="checkbox"/> JC2104AT	<input type="checkbox"/> JC2104N	<input type="checkbox"/> JF2104	<input type="checkbox"/> JMB2104.6048	<input type="checkbox"/> JS2118	<input type="checkbox"/> JB2164L	<input type="checkbox"/> JB2164R
60 x 50	<input type="checkbox"/> J2104AT	<input type="checkbox"/> JC2104AT	<input type="checkbox"/> JC2104N	<input type="checkbox"/> JF2104	<input type="checkbox"/> JB2104	<input type="checkbox"/> JS2104	<input type="checkbox"/> JB2164L	<input type="checkbox"/> JB2164R

* 75 €

 Overfilled Fluid Pad on request, no upcharge
Sunrise Medical Customer service

 Address: Kahlbachring 2-4, D-69254 Malsch/Heidelberg
 Tel. +497253 980-0
 Fax. +497253 980-222

 E-mail: export@sunrisemedical.de
 Website: www.sunrisemedical.de

 For more information
 visit our webpage
www.sunrisemedical.de



JAY[®]

Edition: 01.20
Valid until: 12.20

J2 Cushion

Invoice to:
Name:
Street:
Town: Postal code:
E-Mail:
Tel: Fax:

Deliver to:
Name:
Street:
Town: Postal code:
E-Mail:
Tel: Fax:



Order date:
Purchase order:
Number required:

Marked for:
Sunrise order no:

- Order
 Calculation

Jay J2 Standard Features
 Closed cell foam base with anatomical well
 Carvable base for build-ups, cut outs and customisation
 Jay Fluid Tripad for ischial immersion and envelopment
 Wide range of postural support accessories
 Microclimatic cover (NEW) as standard, incontinence resistant cover and solid seat inserts are options

Max. user weight: 150 kg

USER WEIGHT kg
 Mandatory information to ensure correct configuration

Application:

Client at high risk of skin breakdown with high postural needs.
 Symmetrical to significant asymmetrical posture requiring laterally, forward/rearward stability and/or positioning.
 May be unable to reposition or perform an independent pressure relief.

CUSHION WIDTH AND DEPTH

Seat Width

Depth	cm	35	40	42	45	50	60
	40	●	●		●	○	
	42			●			
	45		●		●	●	
	50		●		●	●	○

- = 5 day lead time
○ = 15 day lead time

Sizes	Complete Cushion	€
35 x 40	<input type="checkbox"/> J2108AT	692
40 x 40	<input type="checkbox"/> J2105AT	692
40 x 45	<input type="checkbox"/> J2106AT	692
42 x 42	<input type="checkbox"/> J2117AT	692
45 x 40	<input type="checkbox"/> J2100AT	692
45 x 45	<input type="checkbox"/> J2101AT	692
40 x 50	<input type="checkbox"/> J2107AT	759
45 x 50	<input type="checkbox"/> J2103AT	759
50 x 40	<input type="checkbox"/> J2116AT	759
50 x 45	<input type="checkbox"/> J2118AT	759
50 x 50	<input type="checkbox"/> J2102AT	759
60 x 50	<input type="checkbox"/> J2104AT	759

A complete cushion comes always with a microclimatic cover.
 An incontinent cover can be ordered as spare (optionally).

Accessory Cushion with overfill fluid pad on request.
 Add "OFI" as suffix to item number.

JAY J2 CUSHION COSTS	Unit price	Total price
Cushion Price		
Spare Price		
Total Cost		



For more information
 visit our webpage
www.sunrisemedical.eu
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JAY J2 Cushion Spare Parts

Spare 3D Flow Fluid Pad

Standard sizes	3D Flow Fluid Pad	€
35 x 40	<input type="checkbox"/> JF2108	428
40 x 40	<input type="checkbox"/> JF2105	428
40 x 45	<input type="checkbox"/> JF2106	428
42 x 42	<input type="checkbox"/> JF2117	428
45 x 40	<input type="checkbox"/> JF2100	428
45 x 45	<input type="checkbox"/> JF2101	428
40 x 50	<input type="checkbox"/> JF2107	509
45 x 50	<input type="checkbox"/> JF2103	509
50 x 40	<input type="checkbox"/> JF2116	509
50 x 45	<input type="checkbox"/> JF2118	509
50 x 50	<input type="checkbox"/> JF2102	509
60 x 50	<input type="checkbox"/> JF2104	509

Spare Covers

Standard sizes	Micro Cover	€	Incontinent Cover	€
35 x 40	<input type="checkbox"/> C2108AT	73	<input type="checkbox"/> JC2108N	73
40 x 40	<input type="checkbox"/> C2105AT	73	<input type="checkbox"/> JC2105N	73
40 x 45	<input type="checkbox"/> C2106AT	73	<input type="checkbox"/> JC2106N	73
42 x 42	<input type="checkbox"/> C2117AT	73	<input type="checkbox"/> JC2117N	73
45 x 40	<input type="checkbox"/> C2100AT	73	<input type="checkbox"/> JC2100N	73
45 x 45	<input type="checkbox"/> C2101AT	73	<input type="checkbox"/> JC2101N	73
40 x 50	<input type="checkbox"/> C2107AT	89	<input type="checkbox"/> JC2107N	89
45 x 50	<input type="checkbox"/> C2103AT	89	<input type="checkbox"/> JC2103N	89
50 x 40	<input type="checkbox"/> C2116AT	89	<input type="checkbox"/> JC2116N	89
50 x 45	<input type="checkbox"/> C2118AT	89	<input type="checkbox"/> JC2118N	89
50 x 50	<input type="checkbox"/> C2102AT	89	<input type="checkbox"/> JC2102N	89
60 x 50	<input type="checkbox"/> C2104AT	89	<input type="checkbox"/> JC2104N	89

Spare Pelvic Obliquity Build Up

Standard sizes	1,25 cm Pelvic Obliquity Pad		€
	Left Hand	Right Hand	
35 x 40	<input type="checkbox"/> JB2168L	<input type="checkbox"/> JB2168R	40
40 x 40	<input type="checkbox"/> JB2165L	<input type="checkbox"/> JB2165R	40
40 x 45	<input type="checkbox"/> JB2166L	<input type="checkbox"/> JB2166R	40
42 x 42	<input type="checkbox"/> JB2177L	<input type="checkbox"/> JB2177R	40
45 x 40	<input type="checkbox"/> JB2160L	<input type="checkbox"/> JB2160R	40
45 x 45	<input type="checkbox"/> JB2161L	<input type="checkbox"/> JB2161R	40
40 x 50	<input type="checkbox"/> JB2167L	<input type="checkbox"/> JB2167R	40
45 x 50	<input type="checkbox"/> JB2163L	<input type="checkbox"/> JB2163R	40
50 x 40	<input type="checkbox"/> JB2169L	<input type="checkbox"/> JB2169R	40
50 x 45	<input type="checkbox"/> JB2170L	<input type="checkbox"/> JB2170R	40
50 x 50	<input type="checkbox"/> JB2162L	<input type="checkbox"/> JB2162R	40
60 x 50	<input type="checkbox"/> JB2164L	<input type="checkbox"/> JB2164R	40

Spare J2 Foam Base

Standard sizes	J2 Foam Base	€
35 x 40	<input type="checkbox"/> JB2108	230
40 x 40	<input type="checkbox"/> JB2105	230
40 x 45	<input type="checkbox"/> JB2106	230
42 x 42	<input type="checkbox"/> JB2117	230
45 x 40	<input type="checkbox"/> JB2100	230
45 x 45	<input type="checkbox"/> JB2101	230
40 x 50	<input type="checkbox"/> JB2107	250
45 x 50	<input type="checkbox"/> JB2103	250
50 x 40	<input type="checkbox"/> JB2116	250
50 x 45	<input type="checkbox"/> JB2118	250
50 x 50	<input type="checkbox"/> JB2102	250
60 x 50	<input type="checkbox"/> JB2104	250

Spare Solid Seat Insert

Standard sizes	Solid Seat Insert	€
35 x 40	<input type="checkbox"/> JS2108	77
40 x 40	<input type="checkbox"/> JS2105	77
40 x 45	<input type="checkbox"/> JS2106	77
42 x 42	<input type="checkbox"/> JS2117	77
45 x 40	<input type="checkbox"/> JS2100	77
45 x 45	<input type="checkbox"/> JS2101	77
40 x 50	<input type="checkbox"/> JS2107	85
45 x 50	<input type="checkbox"/> JS2103	85
50 x 40	<input type="checkbox"/> JS2116	85
50 x 45	<input type="checkbox"/> JS2118	85
50 x 50	<input type="checkbox"/> JS2102	85
60 x 50	<input type="checkbox"/> JS2104	85

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 Tel. +497253 980-0
 Fax. +497253 980-222

export@sunrisemedical.de

For more information
 visit our webpage
www.sunrisemedical.eu
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Invoice to:
Name:
Street:
Town: Postal code:
E-Mail:
Tel: Fax:

Deliver to:
Name:
Street:
Town: Postal code:
E-Mail:
Tel: Fax:

Order date:
Purchase order:
Number required:



Marked for:
Sunrise order no:

- Order
- Calculation

Jay[®] Zip Standard Features
The JAY[®] ZIP™ is specially designed for kids. Through the use of anthropometric data – hip breadth, child weight and ischial tuberosity spacing– the ZIP provides skin protection and positioning in a comfortable, effective and convenient cushion.
2 Year guarantee

Customer Service Fax Number
Max. user weight: **75 kg**

USER WEIGHT kg
Mandatory information to ensure correct configuration

Reimbursement code:

Art. no.:

Application:

Client with mild assymetric posture and moderate postural support. Clients with moderate pressure sore and low shear risk. Provides moderate lateral stability as well as moderate forward/rearward stability.

CLIENT MEASUREMENT

Size Configuration

SEAT WIDTH

SEAT DEPTH

cm	20	22	24	26	28	30	32	34	36	38	40
20	◇	◇									
22	◇	◇	◇								
24	◇	◇	◇	◇							
26	◇	◇	◇	◇	◇						
28		◇	◇	◇	◇	◇					
30			◇	○	○	○					
32				◇	◇	○	○				
34					◇	◇	○	○			
36						○	○	○	○	◇	
38							◇	◇	◇	○	◇
40								◇	◇	◇	◇
42									◇	◇	◇
44										◇	◇
46											◇

Basic Price

Product Code

- = 5 days lead time
- ◇ = 15 days lead time
- = not available

Complete Cushion (lead time: see size matrix)			Quantity	Unit Price	State Code
JZwwddEU	<input type="checkbox"/>	Complete cushion: includes dual layered contoured foam base, moisture resistant inner cover & anti-microbial microclimatic outer cover black.		439 €	JZ ___ EU
SPARES (lead time: 15 days)			Quantity	Unit Price	State Code
CJZBKwwdd	<input type="checkbox"/>	Additional outer cover black		90 €	CJZBK ___
CJZBLwwdd	<input type="checkbox"/>	Additional outer cover blue		90 €	CJZBL ___
CJZPKwwdd	<input type="checkbox"/>	Additional outer cover pink		90 €	CJZPK ___
CIJZwwdd	<input type="checkbox"/>	Additional moisture resistant inner cover		73 €	CIJZ ___

JAY ZIP CUSHION CODING SYSTEM

Zip Cushion Product Coding (complete)	(inc. Cover Black)	JZ = Jay Zip Cushion	20 = Width cm	24 = Depth cm	> JZ2025EU = Complete Cushion
Zip Black Outer Cover Part Coding	C = Outer Cover	JZBK = Jay Zip Black	20 = Width cm	24 = Depth cm	> CJZBK2024 = Outer Cover Black
Zip Blue Outer Cover Part Coding	C = Outer Cover	JZBL = Jay Zip Blue	21 = Width cm	25 = Depth cm	> CJZBL2024 = Outer Cover Blue
Zip Pink Outer Cover Part Coding	C = Outer Cover	JZPK = Jay Zip PINK	22 = Width cm	26 = Depth cm	> CJZPK2024 = Outer Cover Pink
Zip Inner Cover Part Coding	CI = Inner Cover	JZ = Jay Zip Cushion	20 = Width cm	24 = Depth cm	> CIJZ2024 = Inner Cover

Jay Zip Cushion - Basic Price€
Option price€
Packaging and transport	
Exclusive VAT	
VAT.	
Total Price€

Sunrise Medical Customer service
Address: E-mail:
Tel. E-commerce:
Fax. Website:

For more information visit our webpage
www.sunrisemedical.com
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Conversion Table

cm	20,0	21,0	22,0	23,0	24,0	25,0	26,0	27,0	28,0	29,0	30,0	31,0	32,0	33,0
inches	7,9	8,3	8,7	9,1	9,4	9,8	10,2	10,6	11,0	11,4	11,8	12,2	12,6	13,0



JAY®

LITE

OF_Jay Lite_CushionEU_en_2020-01-01

Invoice to:
 Name:
 Street:
 Town: Postal code:
 E-Mail:
 Tel: Fax:

Deliver to:
 Name:
 Street:
 Town: Postal code:
 E-Mail:
 Tel: Fax:

Order date:
 Purchase order:
 Number required:



Marked for:
 Sunrise order no:

- Order
- Calculation

Jay® Lite Cushion Standard Features
 Firm, lightweight, airflow foam base with ischial cut outs. Optiwell technology to maximize stability & pressure redistribution. Lightweight, detachable foam well insert. Medial & lateral thigh supports for thigh positioning. Base with corner cut. Microclimatic cover for heat & moisture dissipation.
2 Year guarantee

Max. user weight: 150 kg

USER WEIGHT **kg**
 Mandatory information to ensure correct configuration

Reimbursement code:

Application:

Active client requires minimal weight but mild/moderate postural support. Mild/moderate lateral and forward-rearward stability needs. Moderate risk of skin breakdown. Intact skin integrity. Able to perform independent pressure relief. Requires heat and moisture dissipation.

CLIENT MEASUREMENT

		SEAT WIDTH								
		Width Coding								
		JL35 -- JL38 -- JL40 -- JL42 -- JL44 -- JL46 -- JL48 -- JL50 --								
		cm	35	38	40	42	44	46	48	50
SEAT DEPTH	Depth Coding	JL __ 35	35	○*						
	JL __ 38	38		○	○*	◇	○*			
	JL __ 40	40	○	○	○	○	○*	○*	○*	
	JL __ 42	42		○	○	○	○	○*	○*	
	JL __ 44	44		○	○	○	○	○*	○*	
	JL __ 46	46	○	○	○	○	○	○	○*	○
	JL __ 50	50			○			○	○*	○*
		PLA	A	B			C			

Basic Price

Product Code

Delivery times

○	5 days
◇	15 days
▨	not available
*	15 days only for JAY Lite P

If no Cushion version is chosen below, the standard version will be delivered.

CUSHION VERSION			Quantity	Unit Price
JL wddd	<input type="radio"/>	Standard version (lead times: see matrix above)		439 €
JL wddd P	<input type="checkbox"/>	Positioning version (contoured cushion for a better positioning) (lead times: see matrix above)		925 €

SPARES			(15 days delivery time)	Quantity	Unit Price
CJL wddd	<input type="checkbox"/>	Additional Microclimatic cover			83 €
CJL wdddP	<input type="checkbox"/>	Additional Microclimatic cover for Positioning version			97 €
RFIJLA	<input type="checkbox"/>	Reticulated foam insert for PLA size A (35 width) incl. air flow cover for insert*			€
RFIJLB	<input type="checkbox"/>	Reticulated foam insert for PLA size B (38 - 44 widths) incl. air flow cover for insert*			€
RFIJLC	<input type="checkbox"/>	Reticulated foam insert for PLA size C (46 - 50 widths) incl. air flow cover for insert*			€
PUIJLA	<input type="checkbox"/>	PU foam insert for PLA size A (35 width) incl. incontinent cover for insert*			€
PUIJLB	<input type="checkbox"/>	PU foam insert for PLA size B (38 - 44 widths) incl. Incontinent cover for insert*			€
PUIJLC	<input type="checkbox"/>	PU foam insert for PLA size C (46 - 50 widths) incl. Incontinent cover for insert*			€


* same insert can be used for positioning and standard versions

If any modification of your cushion is needed please contact your Sunrise Medical authorized Customer Service.

COSTS		Unit price	Total price
Cushion Price			
Option/Spare Price			
Total Cost			

Sunrise Medical Customer Service Address: Tel. Fax.		E-mail: E-commerce: Website:	For more information visit our webpage www.SunriseMedical.com © Sunrise Medical 2020
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OF-Jay Easy Visco-EU-en-01.01.2020

Invoice to: Name: Street: Town: Postal code: E-Mail: Tel: Fax:	Deliver to: Name: Street: Town: Postal code: E-Mail: Tel: Fax:
Order date: Purchase order: Number required:	
Marked for: Sunrise order no:	

-
- Order
-
-
- Calculation

Jay® Easy Visco Features
High Level Comfort and Stability
 Lightweight precontoured foam with medial/lateral thigh support
 Incontinence resistant cover as standard and foam base
 Curved Base as standard for sling seat
 Flat base option for solid seats (solid seat insert optional)
 2 year guarantee

 Customer service fax number
 Max. user weight: **150 kg**

Reimbursement code:

Art. no.:

Application:

 Client with mild assymmetric posture and moderate postural support. Clients with moderate pressure sore and low shear risk.
 Provides moderate lateral stability as well as moderate forward/rearward stability.

 USER WEIGHT kg
 Mandatory information to ensure correct configuration

CLIENT MEASUREMENT

 Size Configuration -
COMPLETE PRODUCT- Curved Base

SEAT DEPTH	cm	SEAT WIDTH											Basic Price	Product Code		
		25	30	35	38,4	40	42	44	46	48	50	56			60	
Depth Coding															280 €	JEV ____ C
JEV __ 25C	25	○	◇													
JEV __ 30C	30	○	○	◇												
JEV __ 35C	35		○	○												
JEV __ 40C	40			○	○	○	○	○								
JEV __ 42C	42			○ ₁	○	○	○	○	○	○	○					
JEV __ 44C	44			○	○	○	○	○	○	○	○					
JEV __ 46C	46			○*	○	○	○	○	○	○	○	○	○	○		
JEV __ 48C	48				○ ₁	○ ₁	○ ₁	○ ₁	○ ₁	○ ₁						
JEV __ 50C	50				○ ₁	○ ₁	○ ₁	○ ₁	○	○	○	○	○	◇		
JEV __ 52C	52										○ ₁	○ ₁				
JEV __ 56C	56												◇	◇		
JEV __ 60C	60													◇		

○ = 5 day lead time
 ◇ = 15 day lead time
 □ = upcharge option
 (1) only available with curved base
 * cushion 35x46 actual depth will be 45cm and part number will be 3545

OPTIONS (by tiking this box you will order a flat base with the measurements choosen in the matrix above)			Unit Price	State Size Code
JEV wddd F	<input type="radio"/>	Jay Easy Visco with Flat Base (same lead times as curved base)	280 €	JEV ____ F

SPARES AND ACCESSORIES (similar lead times as in matrix above)			Quantity	Unit Price	State Size Code
JSI wddd	<input type="checkbox"/>	Solid Seat <small>(recommended for Flat Base option where used on sling seats)</small>		74 €	JSI ____
CJEV wddd C	<input type="checkbox"/>	Additional Incontinence Resistant cover - Curved Base Cushion		73 €	CJEV ____ C
CJEV wddd F	<input type="checkbox"/>	Additional Incontinence Resistant cover - Flat Base Cushion		84 €	CJEV ____ F
CJEVwdddCM	<input type="checkbox"/>	MicroClimatic cover - Curved Base Cushion <small>(ONLY as an accessory)</small>		73 €	CJEV ____ CM
CJEVwdddFM	<input type="checkbox"/>	MicroClimatic cover - Flat Base Cushion <small>(ONLY as an accessory)</small>		84 €	CJEV ____ FM

COSTS			
Cushion pride			
Option Price			
Total Cost			

JAY Easy Visco Coding System - Curved Base					
Easy Visco Cushion Product Coding	Jay Easy Visco	Width cm	Depth cm	Curved Base	
<small>(inc. cover)</small>	JEV	25	30	C	> JEV2530C = Complete Cushion
Easy Visco Incontinence Cover <small>(spare)</small>	JEV	25	30	C	> CJEV2530C = Incontinence Cover
Easy Visco MicroClimatic Cover <small>(spare)</small>	JEV	25	30	C	> CJEV2530CM = MicroClimatic Cover

JAY Easy Visco Coding System - Flat Base					
Easy Visco Cushion Product Coding	Jay Easy Visco	Width cm	Depth cm	Flat Base	
<small>(inc. cover)</small>	JEV	25	30	F	> JEV2530F = Complete Cushion
Easy Visco Incontinence Cover <small>(spare)</small>	JEV	25	30	F	> CJEV2530F = Incontinence Cover
Easy Visco MicroClimatic cover <small>(spare)</small>	JEV	25	30	F	> CJEV2530FM = MicroClimatic Cover
Easy Visco Solid Seat Part Coding <small>(spare)</small>	JSI	25	30	F	> JSI2530 = Solid Seat

Conversion Table											
cm	25,0	30,0	35,0	40,0	42,0	44,0	46,0	48,0	50,0	56,0	60,0
inches	9,8	11,7	13,7	15,6	16,4	17,2	18,0	18,8	19,5	21,9	23,4

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Invoice to:
 Name:
 Street:
 Town: Postal code:
 E-Mail:
 Tel: Fax:

 Deliver to:
 Name:
 Street:
 Town: Postal code:
 E-Mail:
 Tel: Fax:

 Order date:
 Purchase order:
 Number required:

 Marked for:
 Sunrise order no:

-
- Order
-
-
- Calculation

Jay® Easy Fluid
 'Jay Flow' immersion to maximise skin integrity of ischials
 Lightweight precontoured foam base for pelvic stability
 Medial and lateral thigh supports for thigh positioning
 Incontinence resistant cover as standard and foam base
 Curved Base as standard for sling seat
 Flat base option for solid seats (solid seat insert optional)
 2 year guarantee

Customer service fax number
Max. user weight: 150 kg

Reimbursement code:
USER WEIGHT kg

Mandatory information to ensure correct configuration

Art. no.:
Application:

 Clients with high risk of skin breakdown and shear and with symmetrical/mild asymmetrical posture requiring moderate postural support
 Provides moderate lateral stability as well as moderate forward/rearward stability.

CLIENT MEASUREMENT
SEAT WIDTH
Size Configuration -
COMPLETE PRODUCT- Curved Base

SEAT DEPTH	cm	Width Coding											
		JE25 -- G	JE30 -- G	JE35 -- G	JE38 -- G	JE40 -- G	JE42 -- G	JE44 -- G	JE46 -- G	JE48 -- G	JE50 -- G	JE56 -- G	JE60 -- G
Depth Coding													
JE__25C	25	◇	◇										
JE__30C	30	◇	◇	○ ₁									
JE__35C	35		○ ₁	○ ₁									
JE__40C	40			○	○	○	○	○	○	○			
JE__42C	42				○	○	○	○	○	○			
JE__44C	44				○	○	○	○	○	○			
JE__46C	46			◇		○	○	○	○	○	○	○	◇
JE__50C	50							○	○	○	○	○	◇
JE__56C	56											◇	◇
JE__60C	60												◇

Basic Price
Product Code

- = 5 day lead time
 ◇ = 15 day lead time
 1 = 15 day lead time for flat base

OPTIONS (by tiking this box you will order a flat base with the measurements choosen in the matrix)	Unit Price	State Size Code
JE wddd F <input type="radio"/> Jay Easy Fluid with Flat Base (see lead time matrix above) <i>(Recommended for solid base seated chairs)</i>		JE ____ F

SPARES AND ACCESSORIES (similar lead times as in matrix above)	Quantity	Unit Price	State Size Code
JSI wddd <input type="checkbox"/> Solid Seat <i>(recommended for Flat Base option where used on sling seats)</i>			JSI ____
CJE wddd C <input type="checkbox"/> Additional Incontinence Resistant cover - Curved Base Cushion			CJE ____ C
CJE wddd F <input type="checkbox"/> Additional Incontinence Resistant cover - Flat Base Cushion			CJE ____ F
CJE wddd CM <input type="checkbox"/> MicroClimatic cover - Curved Base Cushion <i>(ONLY as an accessory)</i>			CJE ____ CM
CJE wddd FM <input type="checkbox"/> MicroClimatic cover - Flat Base Cushion <i>(ONLY as an accessory)</i>			CJE ____ FM

COSTS		
Cushion Price		481 €
Option Price		
Total Cost		

JAY Easy Fluid Coding System - Curved Base					
Easy Fluid Cushion Product Coding	Jay Easy Fluid	Width cm	Depth cm	Curved Base	
<i>(inc. cover)</i>	JE	25	30	C	> JE2530C = Complete Cushion
Easy Fluid Incontinence Cover (spare)	Cover > C	JE	25	C	> CJE2530C = Incontinence Cover
Easy Fluid MicroClimatic Cover (spare)	Cover > C ... M	JE	25	C	> CJE2530CM = MicroClimatic Cover
JAY Easy Fluid Coding System - Flat Base					
Easy Fluid Cushion Product Coding	Jay Easy Fluid	Width cm	Depth cm	Flat Base	
<i>(inc. cover)</i>	JE	25	30	F	> JE2530F = Complete Cushion
Easy Fluid Incontinence Cover (spare)	Cover > C	JE	25	F	> CJE2530F = Incontinence Cover
Easy Fluid MicroClimatic (spare)	Cover > C ... M	JE	25	F	> CJE2530FM = MicroClimatic Cover
Easy Fluid Solid Seat Part Coding (spare)	Solid Seat	JE	25	F	> JSI2530 = Solid Seat

Conversion Table											
cm	25,0	30,0	35,0	40,0	42,0	44,0	46,0	48,0	50,0	56,0	60,0
inches	9,8	11,7	13,7	15,6	16,4	17,2	18,0	18,8	19,5	21,9	23,4

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JAY[®] Basic Cushion

OF-Jay Basic-EU-en-2020_01_01



Invoice to:
 Name:
 Street:
 Town: Postal code:
 E-Mail:
 Tel: Fax:

Deliver to:
 Name:
 Street:
 Town: Postal code:
 E-Mail:
 Tel: Fax:

Order date:
 Purchase order:
 Number required:



Marked for:
 Sunrise order no:

- Order
- Calculation

Jay[®] Basic Standard Features
 Comfort with minimal postural support
 Durable moulded foam contoured for mild lateral and posterior stability
 Bevelled for seat rails on sling seats
 Incontinence resistant cover.
 2 Year guarantee

Reimbursement code:
 Art. no.:

Customer Service Fax Number
 Max. user weight: 125 kg

USER WEIGHT kg
 Mandatory information to ensure correct configuration

Application:

Client requires comfort with minimal postural support. Low risk of skin breakdown or shear. Intact skin integrity.

CLIENT MEASUREMENT

SEAT WIDTH

Size Configuration - COMPLETE PRODUCT

Depth Coding	cm	Width Coding															
		JB25	JB30	JB35	JB38	JB40	JB42	JB44	JB46	JB48	JB50	JB52	JB56	JB60			
JB__25	25	○	○														
JB__30	30	○	○	○													
JB__35	35		○	○													
JB__40	40			○	○	○	○										
JB__42	42				○	○	○	○	○	○	○	◇					
JB__44	44				○	○	○	○	○	○	○						
JB__46	46			○*		○	○	○	○	○	○	○	○				
JB__48	48											◇					
JB__50	50								○	○	○	◇	○	○			
JB__56	56												◇	◇			
JB__60	60																◇

Basic Price 129,00 €
Product Code JB____

Lead times
 ○ = 5 day lead time
 ◇ = 15 day lead time
 * = actual depth 45cm;
 Code JB3545

SPARES		Quantity	Unit Price	State Code
CJB wddd	<input type="checkbox"/> Additional Incontinence Resistant cover		73 €	CJB_____

COSTS			
Cushion Price			
Option Price			
Total Cost			

JAY BASIC CODING SYSTEM				
Basic Cushion Product Coding;	(inc. cover)	JB = Jay Basic	25 = Width cm	30 = Depth cm > JB2530 = Complete Cushion
Basic Cover Part Coding	Cover > C	JB = Jay Basic	25 = Width cm	30 = Depth cm > CJB2530 = Cover

Conversion Table											
cm	25,0	30,0	35,0	40,0	42,0	44,0	46,0	48,0	50,0	56,0	60,0
inches	9,8	11,7	13,7	15,6	16,4	17,2	18,0	18,8	19,5	21,9	23,4

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JAY®

Xtreme Active

OF_Jay Xtreme Active_EU Template_2020-01-01

Invoice to:
 Name:
 Street:
 Town: Postal code:
 E-Mail:
 Tel: Fax:

Deliver to:
 Name:
 Street:
 Town: Postal code:
 E-Mail:
 Tel: Fax:



Order date:
 Purchase order:
 Number required:

Marked for:
 Sunrise order no:

- Order
- Calculation

Jay® Xtreme Active - clinical indications

Active clients requiring moderate to high level pressure redistribution with low seat to floor height.
 Symmetrical client requiring mild lateral and moderate forward stability.
 Independent weight shift

2 Year guarantee; 6 months on cover.**Max. user weight: 150 kg**

USER WEIGHT
 Mandatory information to ensure correct configuration

Reimbursement code:

To order a Jay Xtreme Active cushion, follow the steps below to build your part number and then choose your accessories

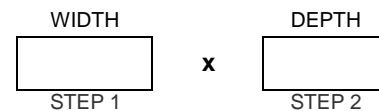
	Width	Depth	Fluid type	Outer Cover	fixed
JXAC	40	42	S	M	EU
Jay Xtreme Active Cushion	STEP 1	STEP 2	STEP 3	STEP 4	

Example: JXAC4042SMEU

CUSHION WIDTH AND DEPTH - STEP 1 + STEP 2

		Width									
		cm	34	36	38	40	42	44	46	48	50
Depth	Leg support kit available (size S) 34 - 42 cm depths	34	○	○							
		36	○	○							
		38		○	○	○	○	○			
		40		○	○	○	○	○			
		42		○	○	○	○	○	○	○	○
	Leg support kit available (size R) 44 - 50 cm depths	44				○	○	○	○	○	○
		46					○	○	○	○	○
		48						○	○	○	○
		50							○	○	○

Please refer to back page for delivery times



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STANDARD FLUID PAD

LARGE FLUID PAD

Microclimatic cover **JXACwwddSMEU**

		Width								
		34	36	38	40	42	44	46	48	50
Depth	34	○	◇							
	36	○	○							
	38		○	○	○	○	○			
	40		○	○	○	○	○			
	42		○	○	○	○	○	○	○	○
	44			○	○	○	○	○	○	○
	46				○	○	○	○	○	○
	48					○	○	○	○	○
	50						○	○	◇	○

Microclimatic cover **JXACwwddLMEU**

		Width								
		34	36	38	40	42	44	46	48	50
Depth	34	◇	◇							
	36	◇	◇							
	38		◇	○	◇	○	◇			
	40		○	○	○	○	○			
	42		◇	○	○	○	○	○	◇	◇
	44			○	○	○	○	○	○	○
	46				○	○	○	○	○	○
	48					○	○	○	◇	◇
	50						○	○	◇	◇

Incontinent cover **JXACwwddSIEU**

		Width								
		34	36	38	40	42	44	46	48	50
Depth	34	◇	◇							
	36	◇	◇							
	38		◇	◇	◇	◇	◇			
	40		◇	○	○	◇	◇			
	42		◇	○	○	○	○	○	◇	◇
	44			○	○	○	○	○	◇	◇
	46				○	○	○	○	◇	◇
	48					◇	◇	◇	◇	◇
	50						◇	◇	◇	◇

Incontinent cover **JXACwwddLIEU**

		Width								
		34	36	38	40	42	44	46	48	50
Depth	34	◇	◇							
	36	◇	◇							
	38		◇	◇	◇	◇	◇			
	40		○	○	○	○	○			
	42		◇	◇	○	○	○	○	◇	◇
	44			◇	◇	○	○	○	◇	◇
	46				◇	◇	○	○	◇	◇
	48					◇	◇	◇	◇	◇
	50						◇	◇	◇	◇

Stretch cover **JXACwwddSSEU**

		Width								
		34	36	38	40	42	44	46	48	50
Depth	34	◇	◇							
	36	◇	◇							
	38		◇	○	◇	◇	◇			
	40		○	○	○	○	◇			
	42		○	○	○	○	○	◇	◇	◇
	44			○	○	○	○	○	◇	◇
	46				○	○	○	○	◇	○
	48					◇	◇	◇	◇	◇
	50						◇	◇	◇	◇

Stretch cover **JXACwwddLSEU**

		Width								
		34	36	38	40	42	44	46	48	50
Depth	34	◇	◇							
	36	◇	◇							
	38		◇	◇	◇	◇	◇			
	40		◇	◇	○	◇	◇			
	42		◇	◇	◇	◇	◇	◇	◇	◇
	44			◇	◇	◇	◇	◇	◇	◇
	46				◇	◇	◇	◇	◇	◇
	48					◇	◇	◇	◇	◇
	50						◇	◇	◇	◇

Delivery times

- 5 days
- ◇ 15 days
- not available

JAY® XTREME ACTIVE CUSHION

SELECT YOUR FLUID TYPE - STEP 3

	Select	Part #	Charge	FLUID TYPE
Standard fluid pad	<input type="checkbox"/>	S	-	STEP 3 (S or L)
Large fluid pad	<input type="checkbox"/>	L	add XX €	

All cushions are delivered with an water resistant inner cover which fits both fluid types.

OUTER COVER OPTION - STEP 4

	Select	Part #	Charge	OUTER COVER
Microclimatic	<input type="checkbox"/>	M	-	STEP 4 (M, S or I)
Stretch	<input type="checkbox"/>	S	-	
Incontinent	<input type="checkbox"/>	I	-	

JAY Xtreme Active Smart Part Number

	Width	Depth	Fluid Type	Outer Cover	fixed
JXAC	40	42	S	M	EU
fixed	STEP 1	STEP 2	STEP 3	STEP 4	

The part # above (JXAC4042SMEU) describes a Jay Xtreme Active cushion with 40 width and 42 depth, standard fluid pad, and microclimatic outer cover. If any modifications of your cushion is needed please contact your Sunrise Medical authorized Customer Service.

ACCESSORIES AND SPARES

Leg Support Components			Qty	Price
LSKJXACEU-S	<input type="checkbox"/>	Leg support kit* (short) for cushions with depths up to 42 cm, containing 2 adductors (left and right) and 1 abductor (middle), each 2,5 cm high - 5 days lead time		43 €
LSKJXACEU-R	<input type="checkbox"/>	Leg support kit* (regular) for cushions with depths from 44 cm up to 50 cm, containing 2 adductors (left and right) and 1 abductor (middle), each 2,5 cm high - 5 days lead time		43 €

Spares

CJXACwwddMEU	<input type="checkbox"/>	Microclimatic outer cover (same for positioning and non-positioning cushions)		102 €
CJXACwwddIEU	<input type="checkbox"/>	Incontinent outer cover (same for positioning and non-positioning cushions)		103 €
CJXACwwddSEU	<input type="checkbox"/>	Stretch outer cover (same for positioning and non-positioning cushions)		104 €
CIJXACwwddSEU	<input type="checkbox"/>	Inner cover (same for all fluid types, positioning and non-positioning cushions)		105 €
BJXACwwdd-SEU	<input type="checkbox"/>	Foam base for standard fluid pad		197 €
BJXACwwdd-LEU	<input type="checkbox"/>	Foam base for large fluid pad		197 €
FLJXAC-L1EU	<input type="checkbox"/>	Large fluid pad for cushion widths 34 and 36cm **		361 €
FLJXAC-L3EU	<input type="checkbox"/>	Large fluid pad for cushion widths 38 and 40cm **		362 €
FLJXAC-L5EU	<input type="checkbox"/>	Large fluid pad for cushion widths 42 and 44cm **		363 €
FLJXAC-L6EU	<input type="checkbox"/>	Large fluid pad for cushion widths 46 and 50cm **		364 €
FLJXAC-S1EU	<input type="checkbox"/>	Standard fluid pad for cushion widths 34 and 36cm **		338 €
FLJXAC-S3EU	<input type="checkbox"/>	Standard fluid pad for cushion widths 38 and 40cm **		339 €
FLJXAC-S5EU	<input type="checkbox"/>	Standard fluid pad for cushion widths 42 and 44cm **		340 €
FLJXAC-S6EU	<input type="checkbox"/>	Standard fluid pad for cushion widths 46 and 50cm **		341 €
JSI wwdd	<input type="checkbox"/>	Solid Seat (recommended for Flat Base option where used on sling seats)		74 €

* it is not necessary to order a separate inner cover then you order the leg support kit, as all inner covers are designed to accommodate leg support kits.

** when changing from standard to large fluid pad (or vice-versa) you need to order a base assembly. The bases are made either for large or for standard fluid pad and are not interchangeable.

COSTS	Unit price	Total price
Cushion Price	608 €	
Accessories and spares		
Total Cost		

Sunrise Medical Customer Service
 Address: Kahlbachring 2-4, D-69254 Malsch/Heidelberg
 Tel. +497253 980-400
 Fax. +497253 980-222

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