

Assistive Technology

PRODUCTS AND SERVICES

Communication Devices Program Desired Equipment Form

Deer Lodge Centre (DLC) 2109 Portage Ave. Winnipeg, MB R3J 0L3 Tel. (204) 831-3430

Client Name:		PHIN:					
Clinician:	Request fo	r: 🗆 Clinic Loan 🗆 Trial 🗆 Rental					
CLINCIAN DESIRES EQUIPMENT BY: L L L L L CHECK OUT TO CLIENT BY: L L L L L L L L L L L L L L L L L L L							
Please use this form to specify the equipment, software and access method (if applicable) you are requesting:							
SPEECH-GENERATING DEVICE:	SOFTWARE/APPS:	ACCESS:					
□ <i>iDevice</i> : □ iPad □ iPad Mini □ iPod touch	☐ Communicator 5 (Windows)	☐ Direct (touch screen/buttons)					
□ <i>Tobii DynaVox</i> : □ ind □ I-110 □ I-12+	☐ The Grid 3 (Windows)	☐ Stylus (see below)					
□ Vmax+ □ Maestro	☐ Predictable (iOS/ Windows)	☐ Switch (see below)					
□ Talk Tablet		☐ Mouse Alternate (see below)					
□ Jabbla Tellus: □ 4 □ 5	☐ Flip Writer (iOS)	☐ External Keyboard(see below)					
□ <i>Lightwriter:</i> □ QWERTY □ ABC	☐ Speech Assistant (iOS)	☐ Other:					
Keyguard: ☐ Raised Keys ☐ Deep Keys ☐ Flush	☐ Snap + Core (iOS/Windows)	MOUNTING:					
□ GoTalk: □ Pocket □ One □ 9+ □ 20+ □ Express 32	□ Proloquo2Go (iOS)	☐ Not applicable					
□ <i>QuickTalker</i> : □ 7 □ 12 □ 23	☐ Touch Chat (iOS)	☐ Device Mount (see reverse)					
□ Step-by-Step: □ Little □ Big	☐ GoTalk Now (iOS)	☐ Switch Mount (see reverse)					
□ Other:	☐ Pictello (iOS)						
	☐ Other:						
DESIRED VOICE : □ Specific:							
\square Very High Pitch (childlike) \square High Pitch (often descr	ibed as 'feminine') \square Low Pitch (o	ften described as 'masculine')					
NON OPERCIA CENERATING DEVICE PROJECTS.							
NON SPEECH-GENERATING DEVICE REQUESTS:	Votto)						
Voice Amp: Mini Buddy (8 Watts) Spokeman (5 V	·	ı.					
Microphone Style: □ large headset □ small headset	□ lapei □ gooseneck □ ear noo	K					
FOR IDEVICE REQUESTS:							
Place desired app(s) on bottom bar: □ Y □ N	Remove all other speech-gener	eating anns: □V □N					
Desired Case: Protective (very durable i.e. Otterbo	•	- , ,					
☐ Specific Case Name (if known):		• •					
	untable: (Daessy, IDEAS, Tri						
Transport Method. — Shoulder Strap	untuble. (= buessy, = lbeAs, = lll	denty					
FOR ALTERNATE ACCESS REQUESTS:							
Stylus: Standard T-bar Flexible Other:							
Switch: ☐ Jellybean ☐ Ultra-light ☐ Candy Corn ☐ Oth							
External Keyboard: Large Key Bluetooth Comp							
Interface: Tapio Joy Cable Blue2 Other:							
Mouse Alternate: Head Mouse Extreme Trackball	☐ Trackpad ☐ Other:						
Internal use ONLY NAV Code: Comple	ted by:	Date:					
Provision Person: Provision Method:							



Assistive Technology

PRODUCTS AND SERVICES

Communication Devices Program Desired Equipment Form

Deer Lodge Centre (DLC) 2109 Portage Ave. Winnipeg, MB R3J 0L3 Tel. (204) 831-3430

Client Name:		PHIN:	$oldsymbol{oldsymbol{oldsymbol{\sqcup}}}$	 $\perp \perp \perp$
Mounting Equipment Poquest				
Mounting Equipment Request:	-t			
Switch Mount (Indicate particulars below in "Special In	·			
☐ Locline ☐ Daessy STEM System ☐ IDEAS tube & soc	ket			
☐ Device Mount				
☐ Rolling Floor Mount:				
☐ Round Base (Ideas), OR ☐ U-shape Base (Daes	sy), 🗆 32" 🗆 36" & 🗆 Tall 🗆 Regul	lar		
□ Desk Mount : □ Daessy □ IDEAS				
☐ Suction Mount (available for iDevices only)				
☐ Chair Mount (enter particulars below, if known)				
☐ <u>Daessy Mounting Options</u> :				
	Part Number/Description			
Frame Clamp Inner Piece				
Frame Clamp Outer Piece				
Receiver				
Spacing/Positioning (i.e. # of O3L, SPCR)				
Straight or Offset Tubing Vertical (length)				
Straight Tubing Horizontal (length)				
Type of Elbow				
Type of Quick Release Base				
Other				
☐ <u>IDEAS Mounting Options</u> :				
	Part Number/Description			
Frame Clamp Inner Piece				
Frame Clamp Outer Piece				
Receiver				
Arm (i.e. Lift & Lock, M2X)				
Type of Quick Release Base				
Other				
Special instructions and/or requests for mounting:				