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# Assistive Technology PRODUCTS AND SERVICES Communication Devices Program Programming Request Form



Winnipeg Regional Health Authority  
Office régional de la santé de Winnipeg

## GENERAL INFORMATION

Client : \_\_\_\_\_ Request date: \_\_\_\_\_  
Therapist: \_\_\_\_\_ Due date: \_\_\_\_\_  
Device \_\_\_\_\_ Software/APP: \_\_\_\_\_

## ACCESSIBILITY

Touch Enter     Touch Exit     Hold Time \_\_\_\_\_     Headmouse     Switch \_\_\_\_\_  
 Daessy Plate     Ideas Plate     Release Time \_\_\_\_\_     Scan Time \_\_\_\_\_     Auditory Scan  
Other: \_\_\_\_\_

## SELECT LAYOUT STYLE

Pre-existing user eg. *Grid 3: Fast Talker* \_\_\_\_\_     Create new user/layout  
Font size : \_\_\_\_\_ Buttons per page (row x col): \_\_\_\_\_ Message Window  YES  NO    Speak Button  YES  NO  
 Symbols only     Symbols & Text     Text only     Static Buttons: \_\_\_\_\_

## BUTTON ACTIONS / BEHAVIORS

Clear message window  
 Speak when activated  
 Insert text into message window

Special requests: _____ _____ _____ _____
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## ADDITIONAL NOTES

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