

Convoid Rodeo Tilt Transit- HCPCS E1232/E1161

Retail Price List / Order Form

Account #: _____ Purchase Order #: _____ Date: _____
 Contact: _____ ATP/RTS: _____ Mark For: _____

Bill To:	Ship To:
Address:	Address:
City/State/Zip:	
Phone:	City/State/Zip:
Email:	Phone:

Rodeo Tilt Standard Features:

- 5° to 45° of Adjustable Tilt
- Silver Powder Coated Frame
- One Piece Height Adjustable Push Handle
- One Piece Angle Adjustable Footplate
- 7.5 x 2" Front, 11.5 x 2.5" Rear Solid Tire
- Quick Release Rolko Rear Tires
- HCPCS code E1161 is only valid on size 16 (RD16)

Standard Models:

	<u>Price</u>
<input type="checkbox"/> Rodeo Transit RD10T - C904860	\$3,365
<input type="checkbox"/> Rodeo Transit RD12T - C904861	\$3,365
<input type="checkbox"/> Rodeo Transit RD14T - C904862	\$3,365
<input type="checkbox"/> Rodeo Transit RD16T - C904863	\$3,365

- Single Foot Activated Wheel Lock Bar
- 3-Pt Positioning Belt
- Seat Depth Growth of 5"
- Tool-less Upholstery Removal
- Zippered Pockets in Seat Bottom Upholstery
- Elevating Legrest
- Made in the USA

Transit Standard Features:

- Transit Anchor Brackets
- Headrest Extension
- H-Harness with Padded Covers & 3-PT Positioning Belt
- Foot Positioners

<u>Upholstery Colors</u>	<u>Price</u>
<input type="checkbox"/> Panther Black	\$0
<input type="checkbox"/> Royal Blue	\$0
<input type="checkbox"/> Sassy Purple	\$0
<input type="checkbox"/> Princess Pink	\$0
<input type="checkbox"/> Forest Green	\$0
<input type="checkbox"/> Cherry Red	\$0
<input type="checkbox"/> Chocolate Brown	\$0
<input type="checkbox"/> Aqua Blue	\$0
<input type="checkbox"/> Apple Green	\$0

<u>Frame Option</u>	<u>Price</u>	<u>HCPCS</u>
<input type="checkbox"/> Recline Option (Requires Manufacturer Installation)	\$481	E1225
<input type="checkbox"/> Height Adjustable Flip-Up Armrests (pair)	\$238	E0973
<input type="checkbox"/> Attendant Hand Brakes (pair) ¹	\$246	
<input type="checkbox"/> Caster Lock for 2" Wide Front Tires ¹	\$98	K0073
<input type="checkbox"/> Curb Tipper	\$102	
<input type="checkbox"/> Rear Anti-Tip Tubes (Pair)*	\$120	E0971

<u>Transit Required Items</u>	<u>Price</u>	<u>HCPCS</u>
<input type="checkbox"/> Foot Positioners - Small 7" - 10" (pair)	\$0	K0108
<input type="checkbox"/> Foot Positioners - Medium 8" - 11" (pair)	\$0	K0108
<input type="checkbox"/> Foot Positioners - Large 9" - 12" (pair)	\$0	K0108

<u>Tire Options</u>	<u>Price</u>	<u>HCPCS</u>
<input type="checkbox"/> 12.5" Rear Solid Knobby Tire	\$208	
<input type="checkbox"/> 7.5" x 2" Front, 12.5" Rear Pneumatic Knobby Tire	\$311	

<u>Head Supports</u>	<u>Price</u>	<u>HCPCS</u>
<input type="checkbox"/> Padded Headwings	\$254	E0955
<input type="checkbox"/> Occi Headwings	\$238	E0955

<u>Trunk Positioning</u>	<u>Price</u>	<u>HCPCS</u>
Right Adj Firm Lateral Trunk Sup - Contoured (Hrdw Req)		
<input type="checkbox"/> X Small= 2.75"x 3.75"*	\$123	E0956
<input type="checkbox"/> Small = 3"x 5"	\$123	E0956
<input type="checkbox"/> Medium = 3.75"x 5.5"	\$123	E0956
<input type="checkbox"/> Large = 4.75"x 6"	\$123	E0956
Left Adj Firm Lateral Trunk Sup - Contoured (Hrdw Req)		
<input type="checkbox"/> X Small= 2.75"x 3.75"*	\$123	E0956
<input type="checkbox"/> Small = 3"x 5"	\$123	E0956
<input type="checkbox"/> Medium = 3.75"x 5.5"	\$123	E0956
<input type="checkbox"/> Large = 4.75"x 6"	\$123	E0956
<input type="checkbox"/> Right S/A Adj. Hardware for Lateral Trunk Support	\$248	E1028
<input type="checkbox"/> Left S/A Adj. Hardware for Lateral Trunk Support	\$248	E1028
<input type="checkbox"/> Full Torso Support Vest	\$248	
<input type="checkbox"/> Reducer Seat Insert (Reduces Seat Width 2" & Seat Depth 1")	\$368	

* RD10 requires X Small laterals.

RD10	RD12	RD14	RD16
C903854	C903854	C903854	C903854
C903850	C903850	C903850	C903850
C903851	C903851	C903851	C903851
C903759	C903759	C903759	C903759
C903857	C903857	C903857	C903857
C903855	C903855	C903855	C903855
C904189	C904189	C904189	C904189
C904753	C904753	C904753	C904753
C904754	C904754	C904754	C904754

RD10	RD12	RD14	RD16
C904342	C904343	C904344	C904345
C904346	C904346	C904346	C904346
		904370	904371
C904650	C904650	C904650	C904650
C905310	C905310	C905310	C905310
C904649	C904649	C904649	C904649

RD10	RD12	RD14	RD16
C903415B	C903415B	C903415B	C903415B
C903416B	C903416B	C903416B	C903416B
C903417B	C903417B	C903417B	C903417B

RD10	RD12	RD14	RD16
C904117	C904117	C904117	C904117
C904118	C904118	C904118	C904118

RD10	RD12	RD14	RD16
C904365	C902673	C902653	C903147
C905270	C905270	C905271	C905271

RD10	RD12	RD14	RD16
C904385	C904385	C904385	C904385
	C904071	C904071	C904071
	C904072	C904072	C904072
	C904073	C904073	C904073
C904465	C904465	C904465	C904465
	C904466	C904466	C904466
	C904467	C904467	C904467
	C904468	C904468	C904468
C904362	C904362	C904362	C904362
C904363	C904363	C904363	C904363
C904364	C903261	C903260	C903259
C904211	C904211	C904110	C904110

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<u>Pelvic Positioning</u>	<u>Price</u>	<u>HCPCS</u>
<input type="checkbox"/> Support - General Use Cushion* ¹	\$251	E2601
<input type="checkbox"/> Position Cushion - Medial Thigh Support/Anti Thrust* ¹	\$486	E2607
<input type="checkbox"/> Align Cushion - Lateral Pelvis/Lateral Thigh Support* ¹	\$486	E2607
<input type="checkbox"/> Incontinence Cushion Liner (Cushion req) ¹	\$75	E2619

* Solid Seat Insert included with all Cushions.
¹ Manufacturer Installation Required.

RD10	RD12	RD14	RD16
C904347	C904350	C904353	C904356
C904348	C904351	C904354	C904357
C904349	C904352	C904355	C904358
C902324	C902324	C902324	C902324

<u>Foot & Leg Positioning</u>	<u>Price</u>	<u>HCPCS</u>
<input type="checkbox"/> Medial Thigh Support (Abductor)	\$169	E0957
<input type="checkbox"/> Lateral Thigh Support (Adductor)	\$169	E0956
<input type="checkbox"/> Padded Elevating Legrest Cover	\$15	
<input type="checkbox"/> Legrest Extension - 2"* ¹	\$57	
<input type="checkbox"/> Calf Panel	\$64	E0995
<input type="checkbox"/> Individual Angle Adjustable Footplates ¹	\$186	K0040
<input type="checkbox"/> Full Padded Footbox (One-Piece Footplate Required)	\$339	K0108

***Manufacturer installation required if model was made prior to June 2019.**
***2" Legrest Extension interferes with caster swivel when seat is in upright position.**
Seat must be tilted back at least 5 degrees OR Legrests must be elevated to allow caster swivel.

RD10	RD12	RD14	RD16
C904359	C902667	C902647	C903140
C904360	C902668	C902648	C903141
C904619	C904619	C904619	C904619
C904095	C904095	C904096	C904097
C904361	C904361	C904361	C904361
	C904957	C904958	C904959
C904953	C904954	C904955	C904956

<u>Transit Options</u>	<u>Price</u>	<u>HCPCS</u>
<input type="checkbox"/> Q'Straint Transit Lap Belt	\$94	E0978
<input type="checkbox"/> Sure-Lok Transit Lap Belt	\$94	E0978

RD10	RD12	RD14	RD16
C903094	C903094	C903094	C903094
C903232	C903232	C903232	C903232

<u>Accessories</u>	<u>Price</u>	<u>HCPCS</u>
<input type="checkbox"/> Headrest Cover (Canopy)	\$238	
<input type="checkbox"/> Extended Headrest Cover - No Windows (Canopy)	\$260	
<input type="checkbox"/> Extended Headrest Cover - with Windows (Canopy)	\$307	
<input type="checkbox"/> Upper Extremity Support Surface (Clear Tray)*	\$116	E0950
<input type="checkbox"/> Adj. Removable Hardware (Required for Clear Tray)	\$237	E1028
<input type="checkbox"/> Upper Extremity Support Surface (Foam Tray) Small [^]	\$158	E0950
<input type="checkbox"/> Upper Extremity Support Surface (Foam Tray) Medium [^]	\$158	E0950
<input type="checkbox"/> Solid Side Panels	\$220	
<input type="checkbox"/> Mesh Side Panels	\$155	
<input type="checkbox"/> Medical Necessity Storage Basket	\$307	
<input type="checkbox"/> Under Seat Storage Basket - Tilt-In-Space	\$78	
<input type="checkbox"/> IV Pole (height adjustable and collapsible) ²	\$157	K0105
<input type="checkbox"/> Oxygen Tank Bag	\$186	E2208
<input type="checkbox"/> Utility Bag	\$40	
<input type="checkbox"/> Rain Cover Size 1 (Canopy Req)	\$157	
<input type="checkbox"/> Rain Cover Size 2 (Canopy Req) (RD14 Extended Canopy Req)	\$157	
<input type="checkbox"/> Rain Cover Size 3 (Extended Canopy Req)	\$157	
<input type="checkbox"/> Mosquito Net Size 1 (Canopy req)	\$157	
<input type="checkbox"/> Mosquito Net Size 2 (Canopy req) (RD14 Extended Canopy Req)	\$157	
<input type="checkbox"/> Mosquito Net Size 3 (Extended Canopy req)	\$157	

***Flip-Up Armrests and Hardware required.**
²Anti-tip Tubes Required
[^]Crash tested Foam Tray with vinyl cover. Flip-Up Armrests required.

RD10	RD12	RD14	RD16
C904366	C902679	C902659	C903152
C904728	C904729	C904730	C904731
C904744	C904745	C904746	C904747
C904367	C903405	C903401	C903402
C903369	C903369	C903369	C903369
C903669	C903669		
		C903670	C903670
C904388	C902672	C902652	C903145
C904389	C902680	C902681	C903146
C904476	C904476	C904477	C904477
C904529	C904529	C904530	C904530
C904566	C904566	C904566	C904566
C902870	C902870	C902870	C902870
C904531	C904531	C904531	C904531
C904939	C904939	C904939	
		C904940	C904940
			C905283
C904655	C904655	C904655	
		C904656	C904656
			C905319

The Rodeo Transit option includes four manufacturer installed red wheelchair transportation anchors. The Rodeo Transit model has been crash tested and conforms to RESNA WC19 standards. Anthropomorphic Test Device weights are RD10T, RD12T 66lbs/30kg, RD14T 100lbs/45kg, and RD16T 140lbs/64kg.

The Convaid Rodeo mobility base was tested with Rodeo seating module equipped with head support, H-Harness with padded Covers, 3-point restraint system, foot positioners, and 4 transit anchor brackets.

It is Convaid's position that the wheelchair user should be transferred from the wheelchair into appropriate vehicle seating whenever possible. Please note that at this time, the Department of Transportation has not officially approved any tie-down system for a user while in a wheelchair, therefore Convaid cannot recommend a transit system.

The WC19 standard is specially designed for the wheelchair to be secured in a forward facing configuration and not in any other direction.
 For more information on RESNA WC-19 and WC-20 standards please visit <http://www.ercwts.pitt.edu/WC19.html>.

HCPCS codes are provided for your convenience and are NOT to be considered billing or legal advice. Providers are responsible for insuring that appropriate billing codes are used when submitting claims. Proper use of HCPCS codes does not insure coverage or payment. Contact the appropriate payer for coverage information.

Standard Domestic Shipping Rate: \$40 • For expedited shipping rates, please call 1-844-876-6245 or email convaidsales.us@etac.com

Prices in USD & subject to change, ex works Torrance, California.

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