

Recipient's Name:

Amtryke Assessment Form

Thanks for choosing an Amtryke therapeutic tricycle!

In order to accommodate the widest variety of people and disabilities, Amtryke offers many tryke models and each can be customized in a variety of ways. Following the steps below will help you choose to the perfect tryke for your client from what might seem like a dizzying array of options.

Remember you can always refer to our website, www.amtrykestore.org, or the Amtryke catalogue for more information and product images.

Step 1: Fill out the first page of the Amtryke Assessment Form.

Step 2: Choose the way the tryke will be propelled: **Hand & Foot, Foot, or Hand**. Your choice should be based on the rider's ability and therapy goals.

Hand & Foot trykes improve coordination, strength and range of motion. Using all four extremities helps with weakness in any area, even general weakness, and can positively affect tone.

Foot trykes were developed in response to requests from therapists for a traditional tricycle for riders with special needs.

Hand trykes are designed for persons whose lower limbs lack function or those who need special therapy for the upper extremity.

Step 3: Take rider's measurements from the front of this Assessment Form and compare them to our Sizing Chart. (This will narrow the choices considerably)

Step 4: Choose a drive. (If it doesn't mention a choice, then ignore this step.)

Amtrykes come with two drive possibilities: **fixed** drive or **geared** drive. Tryke models have been carefully designed so the drive matches the therapeutic goals of the equipment; therefore all drives are not available on all trykes.

A **fixed** drive, commonly known as a 'fixie,' works on a mechanical level to help individuals make a full pedal rotation. The foot crank is constantly in motion for full therapeutic effect. Coasting is not possible with a positive drive; when limb motion stops, the bike does as well.

Riders of **geared** drive trykes must be able to make a complete pedal rotation on their own. This tryke is suitable for riders who need help with balance and a stable sitting position and who have the cognitive ability to steer successfully and apply the coaster brake or hand brake. The key feature of geared trykes is the ability to coast.

Step 5: Chose any adaptations and/or accessories needed by the rider. *Each tryke model can only be customized in the ways noted in its own model section in the Tryke Selection Forms or with the generic accessories listed below. If a customization option is not listed, it is because of design or other practical constraints in offering it on a particular model.*

GENERIC ACCESSORIES (not model specific)			
Fun Items	<input type="checkbox"/> License Plate	<input type="checkbox"/> Water Bottle w Cage	<input type="checkbox"/> Mirror
Leg & Foot Items	<input type="checkbox"/> Foot Cups (pair): <input type="checkbox"/> Small <input type="checkbox"/> Medium	<input type="checkbox"/> Knee Adductor Strap: <input type="checkbox"/> Small <input type="checkbox"/> Large <input type="checkbox"/> Medium	<input type="checkbox"/> Pedal Block (1 = 3/4") _____ qty
Hand Items	<input type="checkbox"/> Variable Range of Motion Kit <i>(only for Hand & Foot Cycles)</i>	<input type="checkbox"/> Wrist Wraps <i>(Includes right & left)</i> <input type="checkbox"/> X-Small <input type="checkbox"/> Large <input type="checkbox"/> Small <input type="checkbox"/> Medium	<input type="checkbox"/> Wrist Brace Mitt: <input type="checkbox"/> Right <input type="checkbox"/> Left <input type="checkbox"/> XX-Small <input type="checkbox"/> Medium <input type="checkbox"/> X-Small <input type="checkbox"/> Small

Amtryke Assessment Form

(Must be filled out completely by therapist)

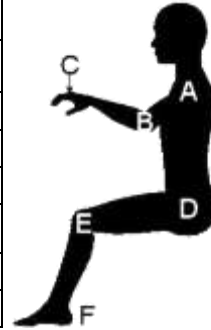
Recipient's Name: _____

Age: _____ Weight (lbs.):* _____ Height (inches):* _____

Diagnosis(es):* _____

*This private information is only used to help appropriately fit the rider.

RIDER'S MEASUREMENTS					
Arm Measurements (inches)					Total Length
Left	A to B:		B to C:		
Right	A to B:		B to C:		
Trunk	A to D:				
Leg Measurements (inches)					Total Length
Left	D to E:		E to F:		
Right	D to E:		E to F:		



A	Center of Shoulder
B	Center of Elbow
C	Center of Digit Crease
D	Center of Hip
E	Center of Knee
F	Bottom of Foot

Arm Length & Leg Length Measurements are critical to correct Amtryke Selection

Sizing Chart is available online:
www.ambucs.org/riders/wish-list/sizing-chart/

Notes on Provided Measurements (if any):

Helmet Sizing	
Size	Measurement (head circumference)
XXS	18.5" to 19.5"
XS	20.5" to 22"
S/M	22" to 23.6"
L/XL	23.6" to 25.75"

Therapist Name: _____ Is this the treating therapist? Yes No

Credentials: _____

Phone: _____ Email: _____

Facility Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Is this facility an Amtryke Evaluation Site? Yes No Not Sure

Therapist comments concerning recipient or goals:

This request/assessment is directed to:

Local AMBUCS Chapter Name: _____

National Wish List (AMBUCS Resource Center)

By signing below, you are signifying that in your professional opinion this rider would benefit from an Amtryke. You assume no liability.

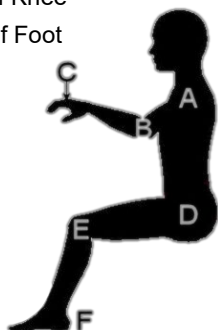
Therapist Signature: _____ **Date:** _____

Ship Amtryke To			
Name/Facility: _____			Phone: _____
Street Address: _____			
City: _____	State: _____	Zip: _____	

Amtryke Sizing Chart

TRYKE TYPE (How will the tryke be propelled?)	RIDER LEG LENGTH (Inches from center of hip to bottom of shoe.)	RIDER ARM LENGTH (Inches from middle of shoulder to center of digit crease.)	MODEL	RIDER WEIGHT (Pounds)	RIDER MAX HEIGHT (Inches)	TRYKE WEIGHT (Pounds)	WHEEL SIZE (Inches)	TTRYKE HEIGHT (inches)	TRYKE LEGNTH (inches)	TRYKE WIDTH (Inches)
Hand & Foot	15-21	13-17	AM-10	55	40	45	10	24	38	21
	19-24	15-20	AM-12S	150	40	45	12	27	38	24
	21-29	14-23	AM-12	150	47	45	12	36	60	32
	24-36	18-27	AM-16	175	66	55	16	36	68	33
	32-46	18-30	AM-20	250	74	80	20	45	72	32
Foot	15-21	12-20	1410	55	40	45	10	24	38	21
	23-28	16-24	1412	125	42	72	12	13	43	27
	26-32	16-24	1416	175	60	74	16	49	58	30
	29-35	20-30	1420	250	68	74	20	50	64	30
	30-45	22-34	1420XL	275	76	89	20	43	72	29
	30-41	20-28	JT-2000/ JT2300USS	250	74	80	20	48	72	32
	36-45	17-29	TP-3000	300	75	47	20	33	63-70	33
Hand	up to 37	19-30	1020	250	67	74	20	41	69	30
	up to 41	22-26	1024	250	72	85	24	45	75	32
	up to 41	22-26	HP-1000	250	74	83	Front 16 Rear 20	45	72	32
All trykes in the Hand & Foot section can be converted to Hand trykes – except the AM-20.										

- A Center of Shoulder
- B Center of Elbow
- C Center of Digit Crease
- D Center of Hip (greater trochanter)
- E Center of Knee
- F Bottom of Foot



RIDER'S MEASUREMENTS	
Arm Measurements (inches) Total Length	
Left	A to B + B to C = _____
Right	A to B + B to C = _____
Trunk	A to D = _____
Leg Measurements (inches) Total Length	
Left	D to E + E to F = _____
Right	D to E + E to F = _____

HELMET SIZING	
Youth Sizes	Head Circumference Inches
XXS	18.5 to 19.5
XS	20.5 to 22
S/M	22 to 23.6
L/XL	23.6 to 25.75
Adult Sizes	Head Circumference Inches
S/M	22 to 23.6
L/XL	23.6 to 25.75

Updated 10/29/18

The Request Form, Liability Waiver Form, and Tryke Selection Form must be received before placement is considered. Please email completed packet to vtambucs@gmail.com.