



NEWS BRAKE

THE NEWSLETTER OF ADED www.aded.net 711 S. Vienna St., Ruston, LA 71270

VOL. 31 NO. 3 • SUMMER 2007 EDITION

Presidential Update—Summer 2007

Well summer is finally here and I hope you are finding some down time to enjoy the sun and spend time with your family and friends. "Every now and then go away, have a little relaxation, for when you come back to your work your judgment will be surer."-Leonardo da Vinci

Conference: Speaking of summer, the event of the season is fast approaching! I hope you are planning on attending the 31st Annual ADED Conference and Exhibits, being held July 28-31st in Dallas, Texas. This conference strives to continue the vision "Reach for the Stars". Whether you have been a part of ADED since its inception or are a first time conference attendee, this conference will not disappoint. The conference committee has put together a program which offers more contact hour opportunities than ever before. Between the courses, workshops, seminars and exhibit hall, there are educational opportunities for driver rehabilitation specialists of all levels of experience. I guarantee you won't be bored!

I look forward to seeing many old friends and meeting lots of new ones. Please make it a point to say "Howdy" to myself, the executive directors and the board. We'd love to discuss your hopes and visions for ADED. The last night of the conference is always a good time and this year the theme

of the banquet is that Wild West so join us in wearing your best "Old West" attire.

Certification Policies: The board met on June 20th and a few certification policies were updated. Please refer to the Moving Forward article in this edition for a summary or go to the ADED website to view the complete policy.

Executive Director Search: We have had many excellent candidates to choose from. Members of the executive director search committee are interviewing several of the candidates on June 25th. We are hopeful that one of these candidates will be the right fit for the organization and that they will be introduced to the membership at the conference.

Board Development Committee: I am pleased to announce that the Board of Directors approved the appointment of John Hogan as the Board Development Committee Chairperson. This committee is responsible for developing a slate of candidates for elective office and open committee positions, coordination of the elections and soliciting nominations and presenting candidates to the

board for the ADED awards program. The open board positions are President-Elect, Treasurer, Board Member at Large, and Mobility Equipment Dealer Board Member. Thank you John and I look forward to working with you.

The ADED board and co-executive directors continue to work diligently for the membership. We thank you for this opportunity to further advance the field of driver rehabilitation. As always I encourage you to contact anyone on the board to communicate concerns, ask questions, make suggestions or simply check in.

Committee work is another critical part of our organization and I must send a thank you to the various committee members who have worked so hard on many important projects this past quarter. I challenge you to become an active part of your organization. We need committee members and board members for 2008.

Staci

Staci Frazier, 2007 ADED president



Staci Frazier

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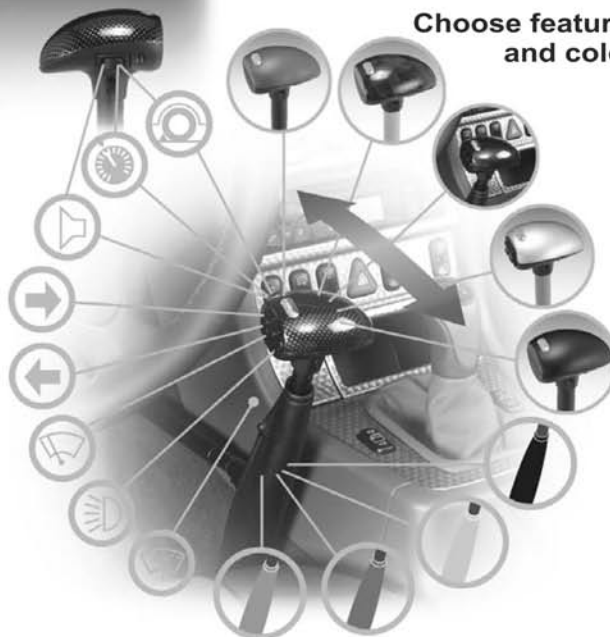
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Editor's Note

ISN'T SUMMERTIME always a busy time? I'm not talking about summer activities like picnics, vacations, home improvement projects, etc. I'm talking about driving. Independent transportation this time of year is a necessity indeed.

Have you ever noticed how sometimes we seem to have clusters of either the same diagnostic groups, or we tend to have clusters of clients using the same pieces of adaptive equipment? I recently experience that again this summer with my clients who need to use the left foot accelerator (LFA). I agree that all options should be presented to our clients. However, for some folks a LFA is the only cost effective method of returning to driving.

I RECALL checking out the ADED Website members' only forum a few months ago where a discussion ensued about the decision of some of our mobility equipment dealers (MEDs) who no longer install this specific type of adaptive equipment. The issue of proper evaluation, education, training with LFAs and even the testing or re-testing through the state process is obvious. There should be no debate: we must properly train our clients on any piece of adaptive equipment prior to prescribing it. And along those same lines, the MED should not install any piece of equipment unless a user is properly trained.

Yet, one of the interesting issues on the member's forum was not only are there less MEDs now installing the LFAs, but now the cost has increased disproportionately to other adaptive equipment. I asked a MED who continues to install the LFA's about the increase in cost. Is it due

to liability insurance or due to the benefit of being a sole provider in his region? It turns out for both reasons.

INSURANCE COMPANIES are reluctant to insure the MEDs that install those products. It can take several meetings and reviews before an insurance company will agree to take on the risk. The risk is not only with LFAs, but all adaptive equipment. For the MED, there is a relatively low profit when installing LFAs with a much higher risk. Even though the MED got into the business perhaps for altruistic reasons, profit is not necessarily a bad word, you know. Revenue is important in any industry and cost increases should be expected as part of a successful business practice.

The MED that I spoke to commented that the problem still remains in that our entire country is suit happy. No one wants to take the responsibility for an accident, regardless of how or why it happened or how their legal action will affect others in the future. With any accident, fingers are pointed and legal counsel will look to see who has the deep pockets. The MED owners have a lot to do with the decision of whether or not to install specific equipment. Therefore, the owners of some companies, with the liability being so great, feel that it's just not worth it.

ONE MIGHT BE curious to know if the manufacturers of LFAs have experienced a decrease in requests for this piece of adaptive equipment. A quick phone call to the owner of a company that manufactures this product answered that question; there is no less or no more of a demand. It seems that those who prescribe the

equipment are finding other MEDs that are willing to install and therefore the volume of requests for LFAs is unchanged. It appears that even though some MEDs are no longer installing LFAs, it hasn't yet affected our decision to prescribe the equipment.

IT WAS INTERESTING to hear of one manufacturer who has considered stopping the manufacture of LFAs, but he would not do this because he knows the MEDs still need them for their clients. He acknowledged that the insurance is sky high. Just as the MED stated, the insurance is not directly related to LFAs, but is factored in with all products. He did admit that his personal experiences with lawsuits are more often related to LFAs than any other piece of adaptive equipment. It appears our litigious society continues to make it more and more difficult for our clients, our manufacturers, our MEDs and for us.

I would be curious to know if anyone has data to indicate that there are more accidents with drivers using LFAs as compared to drivers without adaptive equipment or compared to those with different types of adaptive equipment, like hand controls. How have you handled these changes in your area of the country? Has it directly affected you or your driving program? Finally, do you think it will influence what you might prescribe in the future? I suppose only time will tell.

I look forward to hearing your thoughts and opinions.

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ADDITIONAL ISSUES are available by contacting the editor at 412-586-6915. News Brake is published quarterly. Articles are accepted by members and non-members of the ADED association at the discretion of the editor and as space permits.

For advertising rates, please contact Amy Lane, OTR/L CDRS at 412-586-6915, Fax (412) 586-6910 or email to laneak@upmc.edu.

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I HAVE HAD THE OPPORTUNITY to present information on this topic at conference over the past several years. I have accumulated a “list” of problems or driving deficits that many Driving Evaluators would recommend that the client stop driving, complete further training, or recommend driving restrictions. This is evidenced in many driving presentations. The presenter provides a case study and the audience provides variety and differences in recommendations and interpretations. My curiosity, if not concern, is for the lack of agreement on a list by MVA Examiners, Researchers and all of the Driving Specialists.

I believe that there are many variables that account for the lack of agreement on both a list of driving problems and our ranking of the severity of the driving problems. Let’s take a look at a few of the potential reasons.

CLINICAL REASONING is a term used to describe the thinking that guides

doing as we listen to the client during the interview. We hear the specifics including the emotions involved in their story. This is also where we gather information regarding the client’s own level of insight.

PROCEDURAL THINKING is the process of defining clients’ diagnostically related issues. This type of thinking taps the Driving Specialist’s reservoirs of knowledge about specific diseases and the functional problems. When a client starts to list their medical conditions, we are already formulating the list of potential problems and possible affects on driving. We need to have a large reservoir of knowledge about the many medical conditions that are presented by our clients. This is also the type of thinking where we are exploring the types of treatment and or driving experiences the client has already had in relationship to his/her medical condition. It is where we gather information on prognosis or potential deterioration. It includes our rationale for the

field may have very few resources in the form of mentors or other local Driving Specialists, and may not have the benefit of, or exposure to a variety of values, knowledge and experience. The new Driving Specialist may have only the information provided to them by their original trainers or course instructors.

CONDITIONAL THINKING is used to revise training, moment by moment to meet the patients’ needs. Driving Specialists often have to alter training and our interactive style due to weather, client’s anxiety, traffic conditions, client’s level of fatigue etc. It may be this type of thinking that allows us to make associations and predictions about the results of the clinical evaluation and the on road performance. We explore potential resolutions.

CLINICAL REASONING is influenced by a variety of factors: knowledge, personal values, perceived levels of risk, situational or environmental features and length of

Why Do Clients Not Pass a Driving Evaluation —

our practice. It is a combination of thinking and verbal interaction geared toward understanding. It involves multiple modes of thinking that are for different purposes or in response to particular features of the clinical problem. It is elusive because it is an ongoing interactive process of decision making, involving art, science and ethics and it is private-individuals rarely voice the steps they follow during the process. It not only includes the ability to describe our actions but to explain and justify our actions. The goal of clinical reasoning is to determine the best recommendation that is made in the best interest of the client/patient and the community. It is not simply deciding and problem solving. I believe that Driving Specialists use clinical reasoning because of the nature of our work-interacting with clients with medical impairments and disabilities.

The types of thought that are involved in clinical reasoning are narrative, procedural, interactive, pragmatic, and conditional. Narrative reasoning yields the clients/patient’s story. It sets the overall mental context for working with a particular client/patient. This is often the type of thinking we are

tools we use for clinical evaluations and our gathering of that data.

INTERACTIVE THINKING yields an understanding of what the disease or disability means to the client. It also encompasses the interpersonal interactions between the Driving Specialist and the client. We often call this rapport. It describes how well we “connect” to the client and how we make the driving rehabilitation process meaningful to each client.

PRAGMATIC THINKING is used to consider all of the practical issues that affect services; the environment; the Driving Specialists values, knowledge, abilities and experience; the clients social and financial resources and the clients environment. This is one type of thinking in which Driving Specialists are significantly different. Here are some examples. Those who provide driving services for a government agency versus those who require self pay may have very different ideas about cost. Those who practice in rural areas have very different views on the skills required for driving from those who practice in large metropolitan areas. Those who have newly entered the

experience. It is also influenced by our mentors, supervisors, facility policies or course instructors. There are also known stages of skill acquisition related to clinical reasoning: novice, advanced beginner, competent, proficient and expert.

The concept of clinical reasoning is fundamental in understanding the variety in the Driving Specialists field. This concept helps explain why Driving Specialists do not always agree with the various pieces of driving research that are available-the outcomes are not applicable to all that we do in the “real world”. It can explain why all Driving Specialists cannot completely agree on a driving problem list; the severity of problem; its affect on driving or why we disagree on clients need to fail, pass or require driver training. It also can explain the lack of flexibility of thinking of MVA staff-they do not use clinical reasoning-they do not work with “patients” or people with medical conditions or disabilities. They are generally fact and procedurally oriented employees of a very rule based state agency. It might also explain why researchers do not see the many, many components of a single client let

alone the entire population that we see and the services we provide. Researchers strive to control variables. They want clean data in order to show significant results from the statistical analysis. They must choose and limit variables, control data and subjects, and limit the “extraneous”.

Given this background on clinical reasoning, let’s look at this compiled list of problematic driving skills or behaviors.

The Client:

- Confuses the gas and the brake
- Has numerous, frequent moving violations with the same issues being addressed during the evaluation (i.e. speed, aggression, improper or negligent lane changes...)
- Is incorrect in (versus lack of) signaling
- Has trouble navigating turns
- Moves into the wrong lanes
- Parks inappropriately
- Hits curbs
- Has speeds that are not congruent with

- Is unable to maintain lane position
- Lacks navigational skills in general
- Lacks navigational skill in his/her own local environment
- Fails to yield
- Poorly uses highway exit/entrance ramps
- Has a consistently exaggerated startle reflex
- Is unable to locate basic controls
- Is distractible, inattentive
- Is not aware of other vehicles, objects or hazardous situations-especially in a known deficient visual field
- Has an active seizure disorder
- Is unable to consistently identify the presence of a traffic signal or it’s indicated color
- Required physical intervention or verbal cueing during the driving evaluation

THIS LIST IN NO WAY DESCRIBES the potential cause, or disease process that

restrictions.

Now, let us look at the typical indices of an MVA driving test. In this list you will note very specific parameters or measures for a fail ranking to be given.

- Failed to fasten seat belt
- Failed to wear glasses or corrective lenses
- Jumped the curb
- Failed to complete a turn-a-bout, or could not do so in 3 minutes
- Passed the stop sign
- Knocked the marker over during parallel parking
- Unable to Parallel Park in 3 minutes
- Failed to exit the park in 2 minutes
- Accident
- Driver’s vehicle struck another vehicle because of his/her violation
- Driver’s vehicle struck a pedestrian because of his/her violation
- Driver’s vehicle struck any fixed object because of his/her violation

Why Don't We "All" Agree?



- the driving environment or condition
- Stops (heavy use of the brake) for no apparent reason
- Has accidents or near misses
- Has a significantly delayed response for the driving situation
- Has a lack of anticipation, experiences “surprise” with excessive braking, erratic acceleration
- Has increased agitation

accounts for these problematic driving behaviors, only that many Driving Specialists agree that when these occur during the driving evaluation they must be addressed by either; recommending driving cessation, restricting the client from types of driving environments or providing driving training. When driving training is provided, the issue(s) must be resolved or it must be documented that there has been adequate compensation by alternative strategies or

- Dangerous action
 - Either physical or verbal intervention was required by the examiner to avoid an accident or injury because of the driver’s violation
 - A defensive action was required by another motorist in order to avoid any injury because of the driver’s violation
 - A defensive action was required by a pedestrian to avoid an injury because
- (Continued on page 15)*

Why Do Clients Not Pass a Driving Evaluation — Why Don't We "All" Agree?

(Continued from page 5)

of the driver's violation

- Driver failed to obey any road sign on a public road
- Driver removed both hands from the steering wheel at the same time the vehicle was in motion
- Driving in improper lane
- Driver's vehicle straddled a solid traffic line for three or more vehicle lengths and drove with two wheels on either side of the line.
- All four wheels of the driver's vehicle crossed a solid traffic line from the proper lane
- All four wheels of the driver's vehicle entered the incorrect side of traffic and remained on the incorrect side for at least 2 vehicle lengths.

ONE MIGHT immediately notice that the Driving Specialist list does not heavily emphasize crashes or near misses. There may be two reasons for this. One is that it is our job to prevent crashes or even near misses! We use dual brake equipped vehicles; we can hit the gear to neutral or provide verbal or physical intervention as needed. When this occurs, it is noted in our documentation and report. More importantly, we are also trying to identify the reason or the problematic/faulty driving skill that required our intervention. The other reason may be that we all agree that a crash or near miss results in an inability to "pass" the client on that driving evaluation-but I am not sure we would all agree that permanent driving cessation is the conclusion. There are many who would offer the client driver training. One might hear, "it depends on...."

One may also notice that many of the problems on the Driving Specialists list might never be noticed by an MVA examiner-especially if they are not privy to or knowledgeable about certain medical information, or the test is conducted in the absence of traffic. There are many states in which the MVA test is completed on a closed course. I don't necessarily blame them; those examiners do not have the benefit of a dual brake equipped vehicle!

Some of the MVA indices are not always considered to be "true" driving behaviors by MVA staff, Driving Specialists and research-



ers. Skills such as parallel parking or the ability to complete a turn-a-bout can indicate good vehicle control and good spatial awareness. But, depending on the clients driving environment, it may be rarely used. Some of the MVA indices such as the use of the turn signal, and completing legal stops indicate the ability to follow the legal requirements, but many consider the lack of use to be due to poor driving habits. One might say that the significance of the skill and our need to test it depends on whether the client is a new driver or a previously experienced driver. Who is right? What is right?

SO, WHERE DO WE GO FROM HERE? What, if any, criteria can we agree on. How can the MVA, the Driving Specialists and the Researchers co-exist, interact and benefit each other? What questions can be asked and answered so that we spend time and money wisely, provide the best options for community mobility and driving and yet make the public roadways safest? How can we prove that driving programs are viable and cost effective-currently there is a lack of funding (health insurance, auto insurance) or support for these programs. When they actually include vehicles, they are costly to develop and maintain. We hear the call to increase new programs and staff by some agencies due to the growing aging and potentially medically impaired population. How do we encourage growth via new

programs and new Driving Specialists while assuring that the new staff have adequate knowledge of medical conditions, traffic safety and driving skills, the clinical testing AND the on road evaluations and training?

I will end this article at this point and would be pleased to continue with a "Part 2" should your interest be piqued. Over the past 13 years I have had the opportunity to be an administrator of a Driving Program, a Driving Specialist in two programs and have participated in at least 2 driving research projects, my thinking is constantly evolving and growing. I invite the membership to interact with each other by responding to this article and sharing your thoughts and opinions. Collectively we can share suggestions for all of our future.

Please phrase your comments in terms of the following areas:

- The list of driving problems
- Strategies for creating unity in our decision making/clinical reasoning
- Collaboration with Motor Vehicle Administrations
- Collaboration with Researchers
- Growth and development of new staff and programs

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Moving Forward — ADED board meeting notes | June 20, 2007

Your ADED Board of Directors met via teleconference June 20, 2007 for a quick meeting to finalize some policy changes and discuss progress with the executive director search committee. The board is excited to announce that we received many excellent resumes for the position of executive director. The final candidates are being interviewed by the search committee at the end of June and we are hopeful to introduce ADED's new executive director during the annual conference this July in Dallas, Texas. This is very exciting news for our organization. We hope you will be in attendance at conference for this special event.

Conference: Practice saying "yee-haw" and addressing everyone around you as "y'all" and dig that ten gallon hat out of the closet, 'cause we'll be seein' you in Dallas! Exciting things will be happening and I know you don't want to miss the action.

Policy changes: The following policies have been updated. The full policies in PDF form are available on the ADED website.

ADED Approved Educational Programs for Contact Hours. In summary, contact hours are automatically approved if the educational program is directly related to the field of driver rehabilitation, is a minimum of one hour in length and has been attended at an ADED, AOTA, ADTSEA, American Geriatrics Society, Transportation Research Board, Transport Canada or a Canadian Occupational Therapy Association event. Other organizations may apply for this status by contacting the association.

Applying for contact hours approval for educational programs not automatically approved by ADED. The purpose of this policy is to describe the process for applying for contact hour approval. Changes to this policy include the statement that the term "ADED Approved" or similar promotional phrase can not be used prior to notification of ADED approval. Also, any ADED sponsored event is exempt from paying the application fee for contact hour approval. Finally, applications for contact hour approval must be submitted at least 45 days prior to the event.

Certification Renewal. The purpose of this policy is to describe the process for renewal of certification.

ADED Memorial Scholarship Awards. The purpose of the ADED Memorial Scholarship Awards is to provide financial assistance to professionals interested in entering or increasing their skills in the field of driver rehabilitation for the purpose of attending courses developed and provided by ADED. This policy establishes a sub-committee under the Education Committee charged with solicitation and awarding of scholarships to attend courses. The committee reviews applications and awards scholarships. Revisions to this policy allows for funds to be dedicated to the fund from all fundraising activities at ADED Annual Conference and pre-Conference workshops at NMEDA Annual Conference. These funds are deposited into a special account for the program.

Respectfully submitted,

Elizabeth Green, ADED secretary

Raising Funds for ADED Memorial Scholarship



The ADED Memorial Scholarship was established to assist ADED members with funds to attend the ADED Course series. The fund raising activity at this year annual conference in Dallas, Texas will be a raffle. Several items have already been committed to the raffle.

If you are interested in donating an item or monies to help buy items please contact:

Maryfrances Gross at mfgross@gmail.com or (859) 219-3144.

There are some individuals whom a van just doesn't fit their lifestyle, or perception of enjoyable driving experiences. Some people feel, you are what you drive.



Photo By Veronica Verve

ANYTHING but a VAN

Veronica Verve
Marketing Executive, RediAuto Sport
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Peter Timp just turned 50. He became a paraplegic at the age 22 riding motocross, today he still races - with a couple classic cars, **1969 El Camino** and **1995 Thunderbird**. Peter even plans to race his new **2007 Corvette**, with six-speed paddle shifters. He has always been very athletic and mobile, owning a van as a paraplegic since 1979 has never been an option. Water sports is big to Pete, he rides a seated watercraft, with seating for three people. The first car he drove was after his accident was a lowered **Chevy Truck**. "Our minds tell us what we are limited with, we all have challenges whether we are disabled or not. We all have challenges, even though I am physically challenged, I believe that my disability should not hold me back from doing things that I want to do; or driving what I want to drive.

Steve Bucaro, nicknamed 'Wheels' has been in love with all things related to the automotive industry from motorcycles to mini trucks and more. Steve, a paraplegic now enjoys off road driving in his **Six-Speed 2007 Jeep Rubicon**. The four-door Jeep provides Steve with better access to the great outdoors. Steve's Jeep is outfitted with six-speed manual transmission. "The hand controls made in Italy and imported by RediAuto Sport. They are the same kind Alex Zinardi, the racecar driver uses. They are really cool. The clutch is very similar to a motorcycle and that's why I take to it so easily." Steve runs the show car circuit, and has become a legend at SEMA Shows with his pimped out rides. Time will only tell what this gear head will be driving in the coming years.

Cody Unser, daughter of racing's champion, Al Unser Jr., drives an **Audi A3**. She recently took part in RediAuto Sport's Track Challenge in Southern California. "I have wanted to race since I was born into a racing family, but when I became paralyzed on February 5, 1999 due to an immune disorder called Transverse Myelitis, I thought that dream had died." Cody Unser believes being able to drive with just our hands let alone a 5-speed is such a limit breaker. After learning to drive a five-speed **Ford Mustang** Cody knows about pushing the limits. Cody Unser's First Off Foundation's mission is to do just that, most recently she became scuba certified - she may very well be the first person in a wheel chair to do so.

Maurice Valeriano, a bilateral amputee and U.S. veteran loves his sporty **Mercedes 430 CLK Coupe**, recently outfitted with Soft Touch Driving. "I like the fact the system requires no alterations to my Benz. That was my main concern when looking at hand controls. I just don't want my baby being cut into. I am glad I found a nice solution."

For those of you not familiar with mobility racing legends, **Carol Hollfelder** and **Lance Magin**. Carol, a paraplegic prefers to drive racecars, her father outfitted her **Ford Mustang** as a racecar. Her streetcar is **Ferrari Mondial**. Fellow racer, Lance Magin has won The Best of the West, Off-Road Series, he's won and placed in quite a few races with his **Ford Explorer** equipped with a MasterCraft racing seat. Lance's daily drivers are a **Ford F350** with a Bruno Turney electric seat and a **Mazda Miata** convertible.

The fact is that vans are not the only choice for those with disabilities or debilitating conditions. Being in the mobility business we all need to consider the best fit for each individual and accept emerging technologies that exist in the market place. We are in a society where the demographics are changing, our nation is aging, the market is expanding. Addressing the issues surrounding hand controls takes thorough analysis of lifestyle, physical capabilities and budget - ADEDs members should be taking advantage of new advances in the industry.

Chris Chavez, a left leg amputee was delighted he would not have to sell his tricked out mini with dual exhaust, and an engine enhanced by a performance microchip. He now uses RediAuto Sport's clutch system, powered with a servomotor. "I tell you, I put so much time and money into my **Mini Cooper**, it broke my soul to not think of driving it again, but hey technology has made it happen. It's great!"

Here is a short list of cars converted with the Soft Touch Driving System:

- **Sara Soltan**, a retired grandmother with MS, drives a **Lexus GS**.
- **Robert Luccio**, retired naval officer suffering from chronic back pain, got his hands on the limited edition **Chevy SSR Truck** and has already taken his converted truck to Vegas.
- **Pat Oliva** drives a **530 BMW**. The paraplegic believes that



Photos (clockwise, from opposite page): Daniel Reyes, Carol Hollfelder, Steve Bucaro, Robert Luccio

his new hand controls are much easier to use than ones he had used previously.

- **Alyssa O'Brien**, a business owner with MS, converted her **Volvo C70 Convertible**.
- **David Converse**, a recent paraplegic, first hand controls were installed in his **Lexus GS430** hatchback.
- **James Logan**, after not being able to drive for years, purchased a **Kia Spectrum**.
- **Debbie Larsen**, a retiree with MS, converted her **Toyota Avalon**.
- **Daniel Reyes**, an above the knee amputee, has outfitted his **Jaguar S Type** and **PT Cruiser**.

If you asked any of these individuals, “*What type of vehicle do you want to drive?*” I think you might be able to guess what their response would be. The simple truth is, there are more options than ever and mobility challenged drivers are no longer limited in their choice of vehicles.



AOTA[®]

news

Dear ADED members

I am thrilled to again be attending ADED’s annual conference in Dallas.

I was asked to give a brief update of our projects. The AOTA Older Driver Initiative continues to work with partner organizations to increase the services and resources available to help seniors drive safer longer. Currently we are in the first of a three year NHTSA funded project to compile input from clinicians and administrators to better understand the barriers to providing driver rehabilitation services and addressing driving and community mobility needs. The next phase of this project will be the devel-

opment of toolkit of resources targeted at addressing the key barriers identified.

The AOTA website is under revision, due out this summer. The Older Driver website will continue to contain a variety of tools and resources available to professionals and consumers www.aota.org/olderdriver. We always welcome your input and suggestions for updating this resource.

Elin Schold Davis will be presenting the NHTSA Funded ASA DriveWell Speaker’s Toolkit (www.asaging.org/drivewell) at the ADED conference in Dallas. This is but one project that offers specialists in driver rehabilitation educational materials to bring

to their communities.

AOTA invites ADED members to join in the collaborative activities of AOTA and other partner organizations working together to address older driver needs and bring education to our communities.

Please introduce yourself to me at conference or drop me an e-mail.

I welcome your ideas and recommendations.

*Elin Schold Davis OTR/L, CDRS
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ADED 31st Annual Conference 2007

“WHAT YOU NEED TO KNOW”

REFUND POLICY

All cancellations of registrations for workshops and conference must be made in writing to the ADED Executive Office on or prior to June 30, 2007. A \$50.00 handling fee will be charged. There will be no refunds for the ADED Course.

CONFIRMATIONS

Confirmation receipts will be mailed for registrations received on or before June 20, 2007. After June 20 receipts will be available at the conference.

DRESS

Business casual is recommended for all sessions. Casual is recommended for the receptions. The Banquet theme this year is “Wild West”. Suggested dress is “Old West” attire.

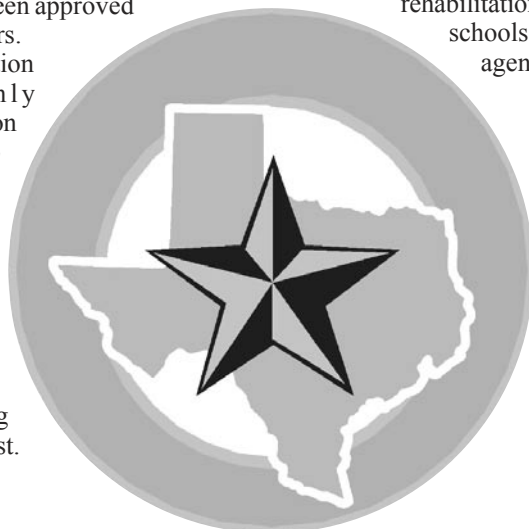
EXHIBIT AREA

Several hours of unopposed time has been scheduled to provide plenty of time for gathering information from the exhibitors. Again this year CDRS contact hours will be offered for attending the exhibits with the completion of case studies (Sunday only 10:15 to 1:15). You MUST be present the entire time (Sunday 10:15-1:15) for CDRS contact hours.

CDRS CONTACT HOURS

The ADED courses, workshops, seminars and completion of case studies in the exhibit area on Sunday have been approved for CDRS contact hours.

Certification Examination
ADED is the only professional organization to offer testing to become a Certified Driver Rehabilitation Specialist. The 2007 test will be given on Tuesday July 31, exact times and location will be sent to approved applicants by AMP the ADED testing company for CDRS test.



ADED MEMBERSHIP

ADED membership year is January 1-December 31. Membership fees are accepted at anytime during the year and membership benefits are available for the remainder of the membership year. Membership renewals must be received by March 31 to maintain your current membership privileges.

★ INDIVIDUAL NEW \$120.00

An individual directly involved in service delivery of driver evaluation or education for persons with disabilities and the aging process.

MOBILITY EQUIPMENT DEALER \$250.00

A business involved in service, installation and/or sales of equipment used in vehicles and /or driver evaluation/education for persons with disabilities and the aging process.

CORPORATE \$500.00

A business that manufactures products for vehicles and/or driver evaluation/education for persons with disabilities and the aging process.

Facility \$250.00 (1-3 individuals)
****ALL MEMBERS MUST BE AT THE SAME ADDRESS

\$500.00 (4-6 individuals)

\$750.00 (7-10 individuals)

A business or agency involved in the provision, implementation or administration of driver rehabilitation services. This category includes hospitals, rehabilitation centers, driving schools, driver licensing agencies, etc.

“CONTACT INFORMATION”

Registration, Membership and Refunds
Judy Sutton

ADED Executive Office
711 South Vienna
Ruston, LA 71270
800 290-2344 | (318) 257-5055
(318) 255-4175 fax

ADED Courses, CDRS Testing, General Information and Conference Questions
Kathie Jane Regan
ADED Conference, Events and Exhibits Office
107 Morgan Drive
Nicholasville, KY 40356
(859) 223-5826 office and fax

Exhibitor Questions

Michele Coffey or Katy Greene
ADED Exhibits
1271 Short Shun Road
Nicholasville, KY 40356
(859) 608-4959 – Michele
(859) 797-6889 - Katy
(859) 246-2799 fax

Workshops or Seminar Questions

Stacey Stevens
ADED Conference Program
240 Hillsboro Avenue
Lexington, KY 40511
(859) 351-6612 office | (859) 246-2799 fax

Hotel Room Reservations

Hyatt Regency Dallas At Reunion
300 Reunion Boulevard
Dallas, TX 75207
(214) 651-1234 | 1-800-233-1234
Ask for ADED Conference room rate
ADED Room rates single or double \$129.00
There is a fee for parking personal vehicles
RESERVATION RATE IS AVAILABLE ONLY UNTIL June 25, 2007

Ground Transportation

Hyatt Regency Dallas at Reunion is 23 miles for Dallas/Fort Worth International Airport.
The Hyatt does not offer ground transportation. There is a variety of ground transportation: Taxi, Shuttle and Train
2007 ADED Courses, Workshop and Conference Registration Form
Hyatt Regency Reunion, Dallas, TX July 27-31, 2007

2007 ADED Courses, Workshop and Conference Registration Form

Hyatt Regency Reunion, Dallas, TX July 27-31, 2007

Complete the registration form for each individual. Photocopy additional forms if necessary

Last Name _____ First _____ MI _____

Organization _____

Address _____

City _____ State/Pro _____ Zip _____

Telephone _____ E-Mail _____

Are you a CDRS? Yes No If yes, how many years? _____ How many years an ADED member? _____

Do you have a special dietary need? Yes No Please specify: _____

Please indicate if you request an accommodation for disability: _____

ADED 2 Day Course July 27 & 28, 2007 *(choice of one course, courses are two full days you may only attend one)*

ADED Member Non-Member

\$480.00 \$580.00

Select One Course (2 days) Only One Course May Be Attended

- 1. Fundamentals of Driver Rehabilitation
- 2. Driver and Traffic Safety
- 3. Disability, Aging and Vision
- 4. Application Vehicle Modification

ADED Workshops July 28, 2007 *(choice of one workshop, if attending a course a workshop may not be attended)*

On or before June 20, 2007 ADED Member Non-Member

\$210.00 \$310.00

After June 20, 2007 \$250.00 \$350.00

Select One Workshop *(the workshops are full day presentations you may only attend one)*

- Workshop A: Nuts and Bolts: A Van Evaluation and Modification Experience
- Workshop B: Evaluation and Treatment of Adolescents with Cognitive and Social Skill Limitations
- Workshop C: Neuropsychological Perspectives on Driving

ADED Conference July 29-31, 2007

On or before June 20, 2007 ADED Member Non-Member

\$410.00 \$510.00

After June 20, 2007 \$450.00 \$550.00



See Other Side for Combo Registrations

COMBO REGISTRATION FOR ADED MEMBERS ONLY

ATTEND 2 DAY ADED COURSE AND CONFERENCE FOR ONE REGISTRATION FEE

Course: 1 2 3 4 (ADED Members Only) _____ \$700.00

ATTEND ONE WORKSHOP AND CONFERENCE FOR ONE REGISTRATION FEE

Workshop: A B C (ADED Members Only) _____ \$500.00

THE COMBO FEES ARE FOR ADED MEMBERS ONLY AND MUST BE RECEIVED BY JUNE 20, 2007

2007 ADED MEMBERSHIP

Individual

- New \$120.00
- 2007 Renewal \$95.00

- Mobility Equipment Dealer** \$250.00
- Corporate** \$500.00

Facility

- \$250.00 (1-3 individuals)
- \$500.00 (4-6 individuals)
- \$740.00 (7-10 individuals)

TOTAL ALL FEES: \$ _____

Do you plan to attend the Monday Night Banquet? Yes No

ADED Accepts Cash, Checks, Money Orders, Purchase Orders, Visa or MasterCard

Credit Card Information Visa or MasterCard Only

Credit Card Number _____

Cardholders Name _____

Address _____

Expiration Date _____ Signature _____

Return Registration Form To: ADED, 711 South Vienna, Ruston, LA 71270 OR FAX (318) 255-4175

ADED | The Association of Driver Educators for the Disabled
The Association for Driver Rehabilitation Specialists | An International Association

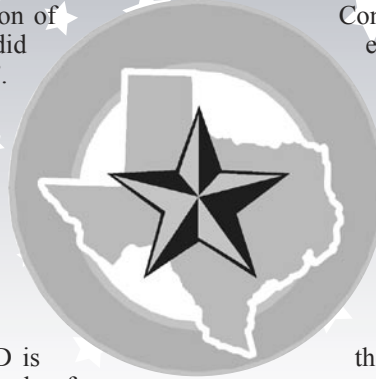
Reach for the Stars

Who remembers ADED as the Association of Driver Educators for the Disabled? Well, did you know that is ADED's "official name". Yep, 31 years ago a group of driver educators from Michigan had a vision. In 1977 that group held an organizational meeting in Detroit Michigan. I will not name any names, but a few of those people are still around and serving ADED.

Their vision was to REACH FOR THE STARS

Thirty one years have passed and ADED is thriving and serving the transportation needs of many.

Now it is time for the old, the young and the new to come together and nurture that vision at the ADED Annual



Conference. If you have attended in the past, no explanation needed. If you are considering coming to the ADED Conference for the first time, I promise you will immediately connect, learn and be a part of this vision.

This is a personal invitation from the ADED Board, Executive Office and the Conference Team. Ya'll come down to Texas for the Biggest and Best event of the year.

Don't be surprised if you see a little bit of the Old West.

Check out the combo registrations and the scholarships for registration fees.

See ya in Dallas.

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THE ADAPTIVE DRIVING ALLIANCE New Technology Award

The Adaptive Driving Alliance is excited to announce the creation and sponsorship of the New Technology Award being presented by the National Mobility Equipment Dealers Association (NMEDA.)

The purpose of the Award is to create an avenue to showcase new technology for the automotive adaptive industry that would otherwise not be able to make it to the market. This award would provide seed money and exposure for new ideas and innovations related to the automotive adaptive market. New products would make their way to the market faster, thus better serving the mobility dealer and the consumer. The technology must be related to

the adaptation of a motor vehicle or a product that applies to the adaptation of a motor vehicle.

The Adaptive Driving Alliance will donate \$5,000 toward the award. Three finalists will receive \$1,000 each to offset travel to the NMEDA Conference in February, 2008. NMEDA will provide to the three finalists registration to the conference as well as booth space adjoining the ADA booth for the finalists to exhibit their new technology to industry dealers and manufacturers. The winner will be announced at the conference and receives a \$2,000 grand prize.

Applications for the award can be obtained by visiting www.nmeda.org/ADATechAwardEntryForm.pdf or by contacting NMEDA at 800-833-0427 or the ADA at 877-853-1402.

Please help spread the word about this important opportunity. The greater the exposure to this competition, the more ideas we receive. More ideas mean innovative products to better the lives of our customers. TELL EVERYONE! Fliers and PDF files of the award are available at www.nmeda.org/ADA-NEW-TECH-AWARD.pdf. Talk to your local support organizations. If they could insert the award flier into their publications, we would be glad to provide the information. We know not from where the next great technology will come!

Call for Nominations for the 2008 ADED Board

Please take note of next year's open positions for the 2008 ADED board.

Now is the time to consider running for a position.

The current slate of 2008 open board positions includes:

- President Elect, Treasurer,
- Board member at large, Mobility Equipment Dealer

If you are interested or just contemplating and need more information, contact Lori Benner: lbenner@psu.edu or by phone (717) 531-7444.



Nor-Cal Vans
Nor-Cal MAX

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From wheelchair lift to ground

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www.mobilitymotoringprogram.com

Nor-Cal MAX vehicles are distributed through NMEDA dealers.



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SOUTH BEND 3725 Cleveland Road, Suite 400 South Bend, IN 46628 (574) 271-1175 (866) 340-8267	LEXINGTON 1180 E. New Circle Rd. Lexington, KY 40505 (859) 253-1832 (888) 742-8267	EVANSVILLE 3414 Interstate Drive Evansville, IN 47715 (812) 402-8267 (866) 490-8267

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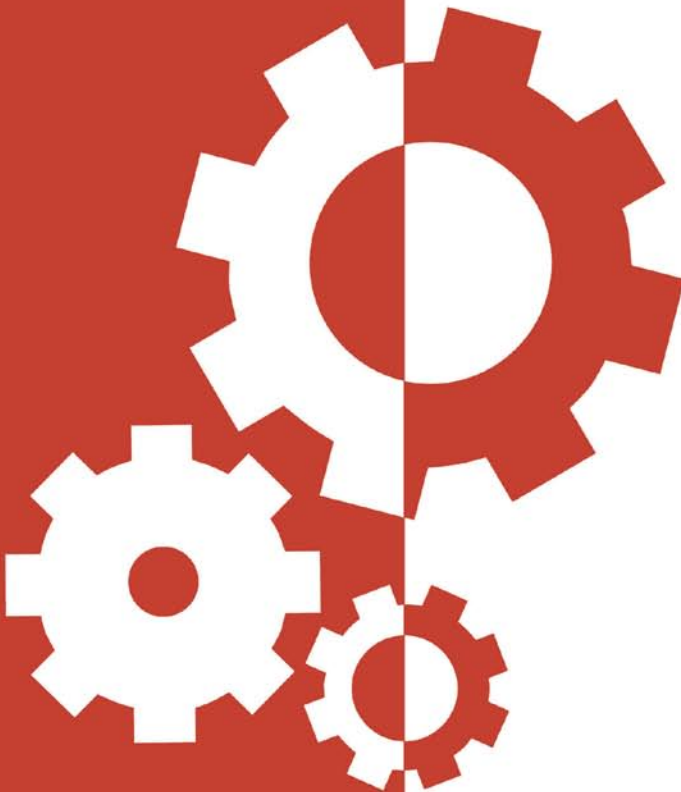
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National
Mobility
Equipment
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Association



ADAPTIVE DRIVING ALLIANCE NEW TECHNOLOGY AWARD

TOTAL AWARDS \$7,200.00

PURPOSE:

Showcase new technology to manufacturers and dealers in the automotive adaptive industry. This award provides seed money and exposure for new ideas and innovations related to the automotive adaptive market, getting new products to the market faster, thus better serving the mobility dealer and the consumer.

AWARDS:

Grand Prize Winner \$3,000.00 cash award, *plus* Exhibitor Registration and Booth Space at the NMEDA Conference

Finalists (2 Winners) \$1,000.00 cash award, *plus* Exhibitor Registration and Booth Space at the NMEDA Conference

Applications and details are available
by visiting the following web sites:

Entry Form:

<http://www.nmeda.org/ADATechAwardEntryForm.pdf>

Promotional Fliers:

<http://nmeda.org/ADA-NEW-TECH-AWARD.pdf>

Complete Rules:

<http://www.nmeda.org/ADAContestRules.doc>

Or by calling NMEDA at 800-833-0427 or the
Adaptive Driving Alliance at 877-853-1402.

Manufacturers Corner

The Dock 'N' Lock® Difference

The Dock 'N' Lock wheelchair securement system from Sure-Lok, Inc. dramatically expanded the concept of auto access by allowing wheelchair occupants to drive motor vehicles without assistance. It meets the 30mph/20g Impact Test Criteria in both forward and reverse mount positions per SAE J2249 and ISO 10542 standards.

Developed jointly by Sure-Lok and Freedom Lift Corporation and introduced at the National Mobility Equipment Dealers Association 2007 Conference, the Dock 'N' Lock system features a unique design that facilitates docking and minimizes movement for greater occupant protection and comfort. Its compact dock module provides smooth entry and superior stability due to a dual-locking arm mechanism that affords users the freedom to maneuver until both coordinated locking arms are fully engaged. Its low-profile wheelchair bracket provides maximum ground clearance for enhanced maneuverability and prevention of snag-

ging on uneven surfaces, thresholds and carpets.

A fixed sub-plate mount gives installers greater accessibility to the unit, and stackable elevation plates facilitate adjustment of the docking module to the proper height. A dash-mounted electrical release button with visual and audible warning indicators allows

for quick release of the wheelchair. The system is also available with a manual release, requires no preventative maintenance and carries a two-year warranty. It is compatible with most types of power wheelchairs, including low-profile models.

For more information, e-mail info@sure-lok.com or visit www.sure-lok.com.



A Valuable Assessment Tool becomes more Accessible

The timing of one's physical reaction in response to visual stimulus is a primary test in the evaluation of a potential driver. This is typically done using a gas/brake reaction timer.

I recently started work with a long established driving evaluation program. Looking over some of the assessment tools, I noticed an antique device used to assess gas/brake reaction time. It had wonderful wood craftsmanship and big high voltage lamps and foot pedals. However due to its design it was no longer practical to use. Conveniences such as simple digital readouts, light weight, safe low voltage components and a wireless remote control are important factors in the functionality of any device.

A year ago, I did some research and found there was a need for a simple, user friendly and less expensive Gas/Brake Reaction Timer. The electronics was similar to other devices I have designed in the past. I put together a prototype and began testing it at our driving evaluation program. The Occupational Therapist who worked in the program was happy with the operation of the device and more importantly, it worked well with the clients. A few more refinements, like adaptations to simulators and car power supplies for portability, gave the production design a little extra utility. It is always fun to see a plan come together.

For more information, check it out on line at: www.progressivetec.com



Call for papers 2008

ADED Conference 2008

Kansas City, MO - Hyatt Crown Center - August 1-5, 2008

Deadline September 1, 2007

CARNEGIE MELLON UNIVERSITY and the **UNIVERSITY OF PITTSBURGH** have recently started a new set of projects of direct relevance to ADED members. The Safe Driving family of engineered systems is a cluster of projects within the Quality of Life Technology Center (QoLT, <http://www.qolt.org/>) focused on driver capability, navigation, and vehicle modification. QoLT is a National Science Foundation Engineering Research Center (ERC) and therefore has a core set of ambitious goals:

- Enable people who are aging and persons with disabilities to independently participate in the community
- Assist professional and informal caregivers
- Delay or prevent the manifestation of functional impairment
- Empower all people to contribute to society and the economy

With respect to driving, the third goal highlights the importance of finding good solutions for driver capability weaknesses at an individual level. The remaining goals are directly related to or addressed by enabling independent driving.

ONE OF THE KEY OBSERVATIONS to arise during formulation of the Safe Driving projects was that the problems related to driving within both the aging and disabled communities could be decomposed into driver capability within a set of common denominator tasks. The basic fact is that task-specific levels competence are needed in core driver capabilities, regardless of what is leading to unsafe driving.

For example, correct mirror position is an important enabler of safe driving. Successful driver education techniques have been deployed in both the older driver population (<http://www.asaging.org/asav2/carfit/>) and for commercial vehicle operators (VanDyne, 2004). The basic premise is the same for any population – provide drivers with the knowledge and tools to properly set their mirrors on their own.

THE TEAM ALSO OBSERVED that, like aging in place, the transition from driving to not driving can often occur due to external factors that have

Quality of Life Technology & Safe Driving



photo by: Bina Sveda

no relationship to the driver's actual ability. This is mostly manifested as an issue with payment – either for equipment or training. Therefore, technology alone is not sufficient. It is important to also address payment,

policy, and deployment issues.

Rather than take an incremental approach, the Safe Driving projects are looking to the future and is seeking to leverage trends in vehicle design, components, and population demographics. For example, vehicle sensing capability is increasing dramatically (e.g., GPS, adaptive cruise control, collision warning systems, etc) and our ability to package additional sensors is improving at a steady rate. However, these sensors are not ideal for certain measurements and adding new sensors is not free. Therefore, we are leveraging decades of cutting edge work in robotics, active vehicle safety, and automated vehicles to measure key driver capability metrics with low-cost sensing. If we are successful, such systems will allow a driver rehabilitation specialist to examine long-term trends rather than rely on self-reporting and sparse observation.

AS IMPLIED ABOVE, all projects in the QoLT ERC are infused and integrated with a topic area termed Person & Society. Specifically, cutting edge technology is being developed hand-in-hand with issues related to policy, payment, clinical application, acceptability, end user participation, and quality of life outcomes. Continuing with the prior example, real-time driver capability monitoring may lead to new payment avenues as a direct result of automobile insurance market forces. However, such extensive observation also introduces privacy constraints and requires new policy models.

As part of the Safe Driving collection of projects, QoLT researchers will be actively seeking ADED input on a wide variety of topics. We value input on all areas of this work. We will also be reaching out to ADED peers at NMEDA and RESNA's SIG 02 Personal Transportation (<http://www.cs.cmu.edu/~astein/sig02/>).

This is a multi-year effort so contact with ADED members will be ongoing. If you can't wait for our first round of discussions and want to share you thoughts now, feel free to contact Amy Lane or me.

Van Dyne, P. (2004). Trucker survey identifies top practices in fleet safety. LibertyDirections Magazine, Fall. Liberty Mutual Insurance Company.



We sink our teeth into safety.



The innovative Dock 'N' Lock® Securement System from Sure-Lok provides superior stability. The docking station has two locking arms to minimize side-to-side and front-to-back movement for maximum protection and easy docking. The low-profile wheelchair bracket provides increased ground clearance and minimizes snagging on carpets, thresholds and uneven surfaces. Dock 'N' Lock gives drivers the accessibility they need to lock in, without holding them back.

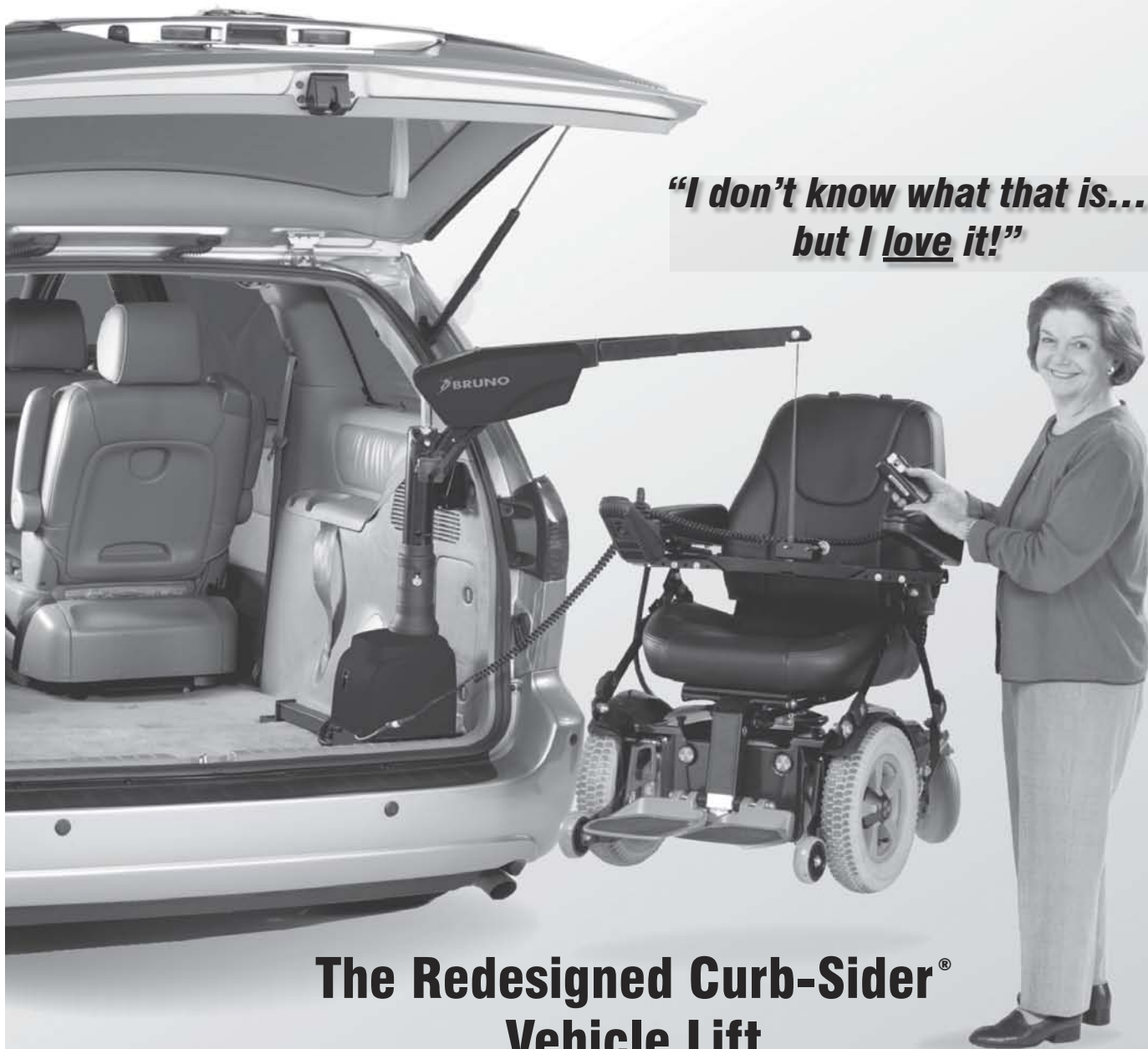
To find out more, call 800-866-0004 or visit www.sure-lok.com.

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code: ADEDNEWS0407

NEWS from NMEDA

Jenna DeTrapani

Many folks may be interested to know about the new 2007 NMEDA (National Mobility Equipment Dealers Association) Adaptive Equipment Transportation Industry Terminology. The terminology that was recently added was “Push/Rock Hand Control”.

The full document from the NMEDA website can be accessed by the following link: <http://www.nmeda.org/forms/2007Terminology5-18-07.pdf>

NMEDA'S NEW COLOR BROCHURE: “Consumer Reference Guide to Purchasing Adaptive Vehicles and Equipment” is available this month. The information in this brochure may be valuable to many driver rehabilitation specialists, and especially to their customers. The contents of this brochure include:

1. An Industry Overview
2. Buying Adaptive Equipment - Where and What?
3. What You Need to Know and Decide Before Purchasing
4. Safety and Compliance
5. Warranty and Service
6. Summary – The Top 10 Factors
7. Funding
8. Resources

The following is an excerpt from the brochure:

NEW NEW NEW NEW NEW

From: **PROGRESSIVE TECHNOLOGIES**



Optional **Wireless Remote & Simulator Kit**

Gas/Brake Reaction Timer

Go To: www.progressivetec.com



Making an educated purchase of adaptive equipment requires you to understand the industry, its players and the relationship between them. The following are the **5 KEY COMPONENTS** of this industry:

1. Manufacturers – Manufacturers fall into two categories. First is the manufacturer of the original vehicle. This refers to companies such as Ford, Toyota, GM, etc. They are also referred to as the OEM Manufacturer. The second is the manufacturer of the adaptive equipment. These companies either manufacture components that “bolt on” to an OEM vehicle or they perform substantial structural and mechanical alterations to the vehicle such as raising the vehicle’s roof and door or lowering the vehicle floor. Those that manufacture “bolt on” products are referred to as equipment manufacturers and those that perform substantial structural modifications are referred to as second stage manufacturers, alterers, or modifiers.

2. Dealers or Retailers – These are the companies that you, as the consumer, will interact with. They are your retail source for adaptive equipment. They either sell you components and modifications for your existing vehicle or sell you a complete and fully modified vehicle. They are the representatives and distributors of products from many of the second stage manufacturers, alterers or equipment manufacturers.

3. Driver Evaluators and Trainers – These are the professional individuals that determine the equipment needs of disabled persons who wish to drive a vehicle independently. They also provide the required training that disabled individuals need in order to effectively and safely drive a modified vehicle.

4. NMEDA – NMEDA is the only international non-profit association that is committed to bringing all of the above together in an effort to ensure that the market place for you, as the consumer, is as professional, consistent, and seamless as possible. NMEDA also facilitates the only Quality Assurance Program (QAP) in the industry for the Dealers.

NMEDA provides a mediation service for its members and for the consumers if they have a serious problem with the products or services provided by one of its members.

5. Customers – You are the customer. Your needs, desires, size, disability, and resources determine how all of the above work together to provide you with the highest level of quality and the greatest value and safety.

THE RELATIONSHIP of all 5 comes together as follows:

You as the consumer contact a dealer(s)/retailer (NMEDA can provide you with the contact information for the dealer closest to you). The dealer learns about your needs, desires and constraints and determines the vehicle(s) and equipment choices that may fit your needs and give you pricing. You evaluate your options, possibly by consulting several dealers, and make a decision. The dealer then:

A. modifies your vehicle with purchased components from equipment manufacturers and/or internal manufacturing processes, or

B. purchases a modified vehicle from a second-stage manufacturer or a modifier and then adds the final “touches” with components from

NEWS from NMEDA



equipment manufactures, or

C. sends your vehicle to a second-stage manufacturer, or modifier for structural modifications before making the final “touches.”

The Driver Evaluators and trainers fit into the process in several ways:

A. You may see them before you search for dealers and get a prescription outlining what equipment you may need. This process can include your driving vehicles with different equipment to see what suites your needs the best. The evaluator will document your needs in a written prescription. You will then take the prescription to a dealer for pricing.

B. If you have been evaluated by a driver trainer, they will com-

monly come to the “fitting” of you in your modified vehicle. The “fitting” is the process of positioning all adaptive equipment in the appropriate locations for your needs.

C. Once the vehicle is complete and you are going to be driving the vehicle independently, the driver evaluator/trainer will teach you how to properly and safely drive your modified vehicle.

During the process, dealers who are NMEDA members and/or participants of NMEDA’s QAP Program, follow and abide by detailed guidelines developed by NMEDA that assist in ensuring that the dealer provides you with a quality product, in an efficient manner, with your and other’s safety being considered.

For more information about this brochure, please contact NMEDA at:

800-833-0427



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ADED's Memorial Scholarship Program

ADED has a Memorial Scholarship fund. This scholarship is intended to assist ADED members to attend ADED courses.

Monies are donated to this fund in memory of an ADED member. Funds generated from the silent auction, raffles or any other fund raisers at the ADED Annual Conference are contributed to this worthwhile fund.

For more information contact the ADED Executive Office for an application or use the application included in this edition of the News Brake

www.aded.net
1-800-290-2344
318-257-5055

Would you like to help with fund raising for the ADED Memorial Scholarship Fund? You can send donations to the ADED Executive Office. The donations can be in the memory of an ADED member(s) or a donation to the ADED Annual Conference's fund raiser (for example raffles or silent auction).

ADED is a non-profit 501 © (3) organization. Your contributions are tax deductible. On receipt of your donation you will be sent a tax form for your donation.

Mail your donation to:
ADED
711 S. Vienna Street
Ruston, LA 71270

For silent auction/raffle donations: Bring to the ADED Annual Conference or contact:

Maryfances Gross at mfgross@gmail.com or (859) 219-3144
Kathie Jane Regan at 859-223-5826



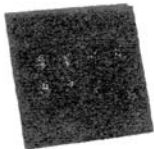
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Remote Controls - Remote controls for all wheelchair lifts including Ricon, Crow River, Braun, Mobil - Tech, I. M.S. and others. They can be purchased with magnetic entry and dash controls.

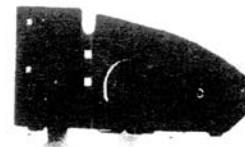
Magnetic Entries are available for all lifts

Visit our web site at www.crescentindustries.com

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Crescent Industries has been manufacturing reliable vehicle control products for many years from complete systems to an individual relay pack to help with the small jobs. At Crescent, we do not lose sight of our mission.....*to help others.* We believe in handing a person the key to unlock the door of dependency and to enter the world of independence. We have a Can Do attitude!

New product! **1997 Ford Heater Control**





Memorial Scholarship Application

This scholarship award has been established to assist ADED members attend ADED two-day educational courses. The purpose of this scholarship is to provide financial assistance to those seeking to enter the driver rehabilitation field or for those already in the field to expand their knowledge. ADED membership is required for applicants. A maximum scholarship award will be equal to the amount of the current member registration course fee. The funds may be used for course registration and/or other costs associated with the course. The money is reimbursed after expense receipts are submitted. There will be a maximum of two scholarships per course event, based on fund availability.

Application Deadline: 10 working days prior to the class you wish to attend

Name _____

Address _____

City _____ State _____ ZIP _____

What Course are you applying for? _____

Date and Location of the Course? _____

What is your professional background? _____

Are you a member of ADED? YES NO

How long have you been a member? _____

Are you currently in the Driver Rehabilitation business? YES NO

If Yes, describe your experience in the field _____

No, describe your future goals for entering the field _____

What type of support will your employer provide for attending this course? _____

Mail this application to:

ADED Scholarship Committee
711 S. Vienna Street, Ruston, LA 71270
or fax this application to: (318) 255-4175

For more information:

Contact Anne Hegberg at 630-909-6082
or ahegberg@marianjoy.org.



Call For Presentations 2008

ADED

Friday, August 1 - Tuesday, August 5, 2008

Kansas City, MO - Hyatt Crown Center

Title: _____

Abstract:

Workshop (7hrs) ____ Seminar (3hrs) ____ Seminar (1-1/2hrs, given twice during conference) ____

Presenter/Qualifications (Please attach Vita for each presenter including address, telephone, and e-mail)

Level of course: Beginning ____ Intermediate ____ Advanced ____

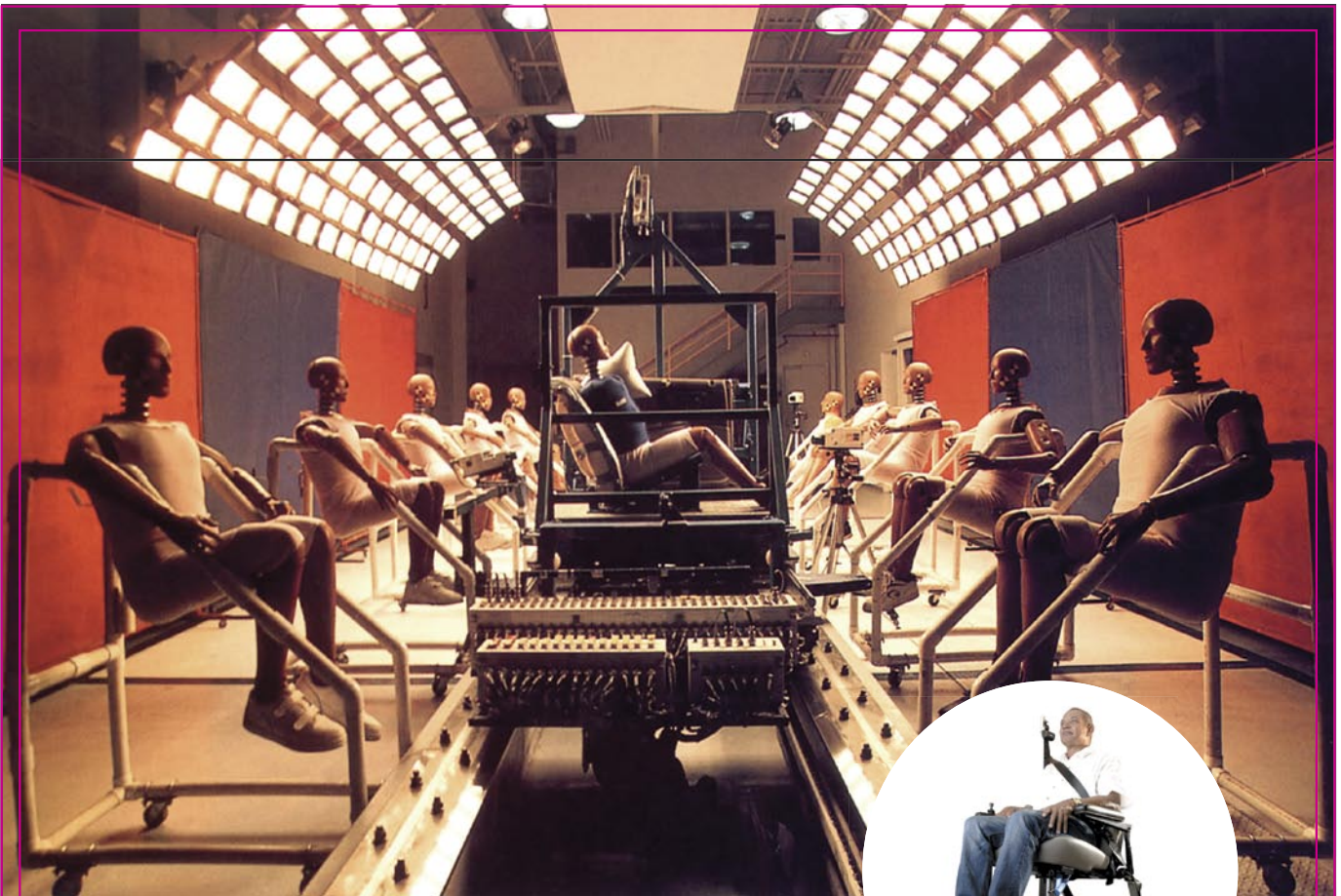
List 5 Educational Objectives:

1. _____
2. _____
3. _____
4. _____
5. _____

Honorarium Offered: \$1000 per workshop; \$500 per 3 hr seminar or two 1-1/2 hr. seminars

Forward To: Stacey Stevens, OTR/L, CDRS
240 Hillsboro Avenue
Lexington, KY 40511
Fax (859) 246-2799

Deadline: September 1, 2007

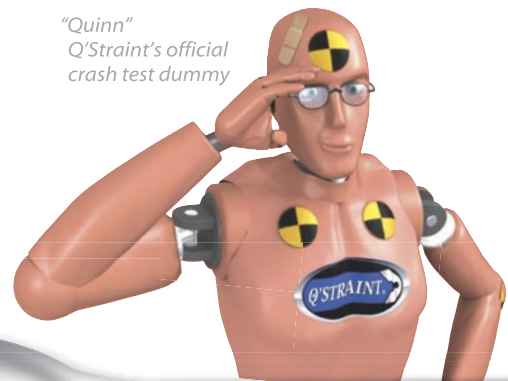


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Ruston, LA 71270
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(318) 255-4175 (Fax)
mike.shipp@driver-ed.org
mshipp@latech.edu

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cigree0@email.uky.edu

Stacey Stevens, Program Coordinator
240 Hillsboro Ave.
Lexington, KY 40511
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(859) 246-2191 (fax)
staceystevens1@excite.com

Mark Your Calendars



The calendar of upcoming events is provided as a service to ADED members. News Brake does not confirm the accuracy of the information provided. Please verify dates and locations with the organizations listed.

* * * * * **JULY** * * * * *

July 27-31, 2007 Dallas, TX: ADED 31st Annual Conference

Contact: www.driver-ed.org
or 800-290-2344

* * * * * **OCTOBER** * * * * *

October 2-4, 2007 Orlando, Florida: Medtrade.

Contact: www.medtrade.com

October 20-21, 2007 Hudson, New York: ADED NE Chapter meeting

Contact: Gail Babirad 800-987-2753

* * * * * **FEBRUARY** * * * * *

February 20-23, 2008 Phoenix, Arizona: National Mobility Equipment Dealers Association (NMEDA) Seventeenth Annual Conference

Contact: www.nmeda.org or 800-833-0427

* * * * *

To have your event information included in the Mark Your Calendar section, please provide the information to:

Amy Lane, Editor, News Brake
laneak@upmc.edu
(412) 586-6915
Dept. of Rehab Science and Technology
2310 Jane Street, Suite 1300
Pittsburgh, PA 15203

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You've seen the headlines, everyday more and more drivers cross the line from "able to drive" to "should find a new way to drive."

Are you helping them?

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Or are you going to let bad things happen to otherwise good people?



IT'S FREE for your evaluation, so what's your excuse?

How much longer are you going to let Americans drive at risk?

Soft Touch Driving is approved by California evaluators, taking advantage of our advanced technology.

Across the nation users report it's better than other systems.

"It's very simple to use."

– Roberto Luccio, retired Naval Officer with chronic back pain

Application available online.



AS SEEN IN

MOTOR TREND
AutoWeek

The Washington Post
The New York Times



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"The future of mobility equipment"
– Motortrend July 2007

"It is so intuitive."
– Warren Brown - Auto Columnist for the Washington Post

"It is by far the easiest hand control available and I feel totally safe using these too. Now, I can't wait to drive my new Volvo C70 back to Arizona and the first thing I am going to do when I get home is schedule a trip back to have our other car fitted with these too."

– Alysa O'Brien, Phoenix, Arizona Business Owner, Suffering from MS

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For more information on this or other products to aid the disabled, please contact Mobility Products & Design.

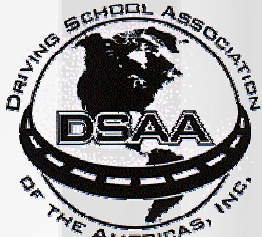


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DSAA: (800) 270-3722

DSAA MEMBERSHIP RATES & NON-MEMBER RATES



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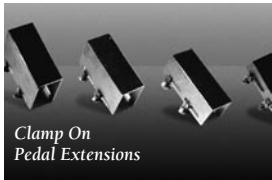
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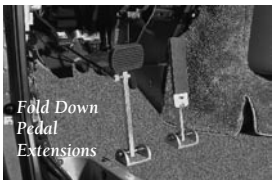
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2007



MEMBERSHIP RENEWAL

2007 - ADED MEMBERSHIP RENEWAL INFORMATION FORM

ADED membership runs from January 1 through December 31.

Membership Categories are as Follows:

Individual (new member): \$120
Individuals involved in provision, implementation, research or administration of driver rehabilitation services (driver evaluation, behind the wheel training and/or transportation evaluations).

Individual (renewal): \$95
Individuals who have been members for the current year.

Mobility Equipment Dealer: \$250
Business involved in providing installation, services, and/or retail sale of equipment, vehicles or rental vehicles for individuals with disabilities.

Facility: \$250 (1-3 individuals)
\$500 (4-6 individuals)
\$750 (7-10 individuals)

Business or agency involved in the provision, implementation or administration of driver rehabilitation services (driver screening, evaluation, behind the wheel training and/or transportation evaluations). This category includes hospitals, rehabilitation centers, driving schools, driver licensing agencies, etc. Individuals must be listed on facility's membership so their status is maintained for eligibility to run for office.

Corporate: \$500
Business involved in manufacturing and distributing products used by driver rehabilitation specialists or individuals with disabilities. You will also receive with your membership: (1) ADED's extensive Resource Manual, (2) NEWSBRAKE newsletter, (3) your personal website access, (4) Discounted conference rates, and (5) Discounted Professional ADED course costs.

Name _____ Organization _____

Address _____ Business Phone _____

City/State/Prov./Zip _____ Fax No. _____

E-mail _____ Check Enclosed VISA MasterCard # _____ Exp. Date _____

NOTE: Please completely fill in this form.

- Facility**
(check primary)
- Hospital
 - School System
 - Private Driving School
 - Equipment Installation
 - Manufacturer
 - State Agency
 - Specify:
 - Other _____

- Professional Background**
(check primary)
- Driver Education
 - Occupational Therapy
 - Vocational Rehabilitation
 - Rehab Engineering
 - Equipment Dealer
 - Equipment Manufacturer
 - Kinesiotherapy
 - Other _____

- Program Services**
(check all that apply)
- Clinical
 - Classroom
 - Driving Range
 - Simulator
 - Car
 - Van
 - Van Modifications
 - Other _____

COMMENTS? Please use the back of this form to pass on ideas, suggestions or comments to the ADED board.

THANK YOU FOR YOUR RENEWAL!!!

Checks must be in U.S. Funds made payable to ADED.

Return membership renewal and this data update to:

ADED • 711 South Vienna Street • Ruston, LA 71270

318 257-5055 • 800-290-2344

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The NEW BL-7317 docking base from EZ Lock is the culmination of more than two decades of research and experience in producing quality wheelchair docking systems. In designing the latest version of our EZ Lock, we've drawn on that experience to develop the absolute best wheelchair docking system available.

The unparalleled quality and real-life successes of our docking system have long established EZ Lock as **America's #1 choice for wheelchair security solutions**. At EZ Lock, docking systems are not a sideline business, they are our exclusive focus.

The new BL-7317 couples the proven reliability of the "Original" EZ Lock system with an added level of functionality and durability.

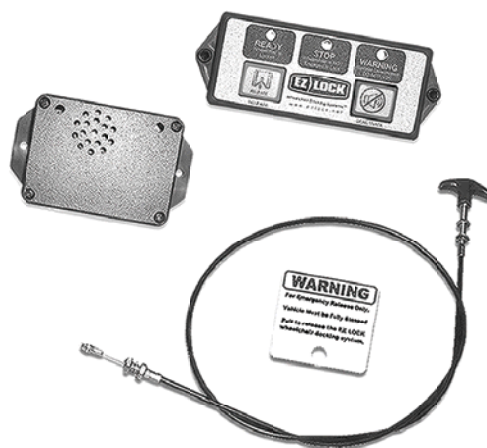


- **DURABILITY** - The BL-7317's rugged component based design is unsurpassed in strength and holding power. **Hardened steel reinforcements** ensure a long service life.
- **RELIABLE CONTROLS** - Our reliable and accurate electronics constantly monitor the security status of your wheelchair in the docking base, and our exclusive **ADP (Accidental Disconnect Protection)** feature ensures a reliable and accurate status display; even if the wiring harness should become detached.

For EZ Lock driver applications, the **BL-7317** may also be equipped with the optional **Remote Manual Release** for emergency use in the event of vehicle power loss.

- **NEW LOOK** - The new BL-7317 docking base has a sleek exterior design that easily compliments today's popular vehicle interior colors. In addition to the great new look, the **"hammered" powder-coat finish** is extremely durable and is further protected by tough nylon labeling.

- **TESTING** - No other docking system has been tested as extensively as the EZ Lock. Not only has the EZ Lock been repeatedly "system tested" by the top University Safety Labs, **we take the further precaution of testing specific wheelchair models** for compatibility and structural integrity. Nothing is left to chance when the safety of our customers is at stake.
- **REAL LIFE SUCCESS** - More impressive than the scientific testing conducted in the laboratory, is the extensive archive of positive customer testimonials maintained by EZ Lock. On our website at www.ezlock.net, you can read the accounts of numerous EZ Lock users attesting to the effectiveness of our system in real-life emergencies.



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STOP !! *What's New at Your Place?*

In order to keep updated on what is going on with ADED members across the country, I need your help. Take a minute and fill out this form, fold it and mail it.

- Been Promoted?
- Started a new program or expanded an existing program?
- Presented at a workshop or conference?
- Doing a research project?
- Ideas for an article or question?
- Other: _____

Details: _____

Look in the next newsletter for your item.

Name: _____

Institution: _____

Phone: _____

NEWSLETTER DEADLINE:

The next deadline is ***July 31, 2007***. Please send any articles, pictures or news information to:

Amy Lane, OTR/L CDRS
Department of Rehab Science and Technology
University of Pittsburgh
2310 Jane Street, Suite 1300
Pittsburgh, PA 15203

or email to laneak@upmc.edu

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from:

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