



**香港紅十字會**  
**HONG KONG RED CROSS**

輔助行動器材租借服務轉介表

**Referral Form for Mobility Equipment Loan Service**

**A) 病人資料 (Patient Information)**

姓名 Name : \_\_\_\_\_ 性別 Sex : \_\_\_\_\_ 年齡 Age : \_\_\_\_\_

**B) 轉介人 (Referral made by)**

醫院 Hospital : \_\_\_\_\_ 部門/ 病房 Department/ Ward : \_\_\_\_\_

轉介人姓名 Name : \_\_\_\_\_ 職位 Post : \_\_\_\_\_ 電話 Tel No. : \_\_\_\_\_

轉介人簽署 Signature : \_\_\_\_\_ 轉介日期 Date of referral : \_\_\_\_\_

**C) 建議病人使用之器材 (Item(s) recommended to be loaned)**

請 ✓ 合適項目 Please ✓	項目 Items	詳細資料 Details
	標準輪椅 (Standard Wheelchair)	坐位寬度 (Seat width) 14" 16" 18" 20" 可升降腳踏 (with elevating footrest) 可脫腳踏 (with movable footrest) 可脫扶手 (with movable armrest)
	高背輪椅 (Reclining Wheelchair)	坐位寬度 (Seat width) 16" 18"
	高背傾斜及後躺輪椅 (Advanced Reclining Wheelchair)	坐位寬度 (Seat width) 16" 18"
	步行架 (Walking Frame)	With _____ cm height
	四腳叉 (Quadripod)	With _____ cm height
	穿手拐杖 (Elbow Crutches)	With _____ cm height
	便椅 (Commode Chair)	
	沐浴椅 (Bathing Chair)	
	可傾斜沐浴便椅 (Advanced Commode Chair)	
	有轆步行架 (Rollator)	With _____ cm height
	助行車 (Rollator with a Basket)	
	手提斜台板 (Portable Ramp)	
	輪椅活動枱板 (Wheelchair Flip Tray)	

備註 Remarks : \_\_\_\_\_

租借器材日期 Equipment loan date : \_\_\_\_\_