

Scooters

“Another Mobility Option”



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Allan R. Thieme built the first mobility scooter in 1968, in Bridgeport, Michigan. Thieme was personally motivated to create this product in order to help a family member diagnosed with multiple sclerosis. This first mobility scooter, a front-wheel drive model, was conceived and built at his home. The Amigo, as it was brand-named, initiated the entire “scooter” industry. Today, Amigo Mobility international Inc headquarters is located in Bridgeport, Mich.

Mobility scooters are now available in a wide range of models, from tiny folding travel scooters to heavy-duty bariatric models. Scooters are commonly available for loaner use at public facilities, such as grocery stores and for rent at theme parks/amusement

Assistive and small sit-down motor scooters provide important advantages to people with mobility problems throughout the world. A scooter is useful for persons without the stamina or arm/shoulder flexibility necessary to use a manual wheelchair. Also, swiveling the seat of an electric scooter is generally easier than moving the foot supports on most conventional wheelchairs. A mobility scooter is very helpful for persons with systemic or whole-body disabling conditions (coronary or lung issues, some forms of arthritis, obesity, etc.) who are still able to stand and walk a few steps, sit upright without torso support, and control the steering tiller.

A main selling point of the electric scooter is that it does not look like a wheelchair, which many people see as a sign of old age. However, as increasing numbers of elderly persons choose mobility scooters, the scooter is now developing its own reputation, at least among the able-bodied, as a geriatric item. Mobility scooters are generally less affordable than powered wheelchairs, and often harder to obtain from insurers or health care



Rascal AutoGo® 550
Uses its own power supply to automatically fold to a compact

The Pride Mobility heavy-duty Wrangler 4 wheel motorized scooter has a weight capacity of 400 lbs, with a max speed 10 MPH, will handle up to



Various canopies and covers are available as



agencies.

While a mobility scooter eliminates much of the strength problems of a manual wheelchair, its tiller steering mechanism still requires upright posture, shoulder and hand strength, and some upper-body mobility and strength. Other drawbacks of mobility scooters are their longer length, which limits their turning radius and ability to use some lifts or wheelchair-designed access technologies such as kneeling bus lifts. Often a mobility scooter has a low ground clearance, which can make it difficult to navigate certain obstacles, such as traveling in cities without proper curb cuts. Navigating nursing home rooms, where space is often limited, can also be a problem. Scooters also have fewer options for body support, such as head or leg rests. They are rarely designed for ease of patient transfer from seat to bed. These limitations may prevent some individuals from using scooters. In addition, scooter limitations may vary depending on model and manufacturer. A limitation of one make/model does not necessarily carry over to all. Individual needs may affect the suitability of a particular model.



Scooters are commonly transported outside the vehicle using a hitch

Currently in the United States, Medicare will not approve a power wheelchair for persons who do not need to use the chair "inside their own home", even if their medical needs restrict the use of a mobility scooter. For example, a person with severe arthritis of both shoulders and hands may not be the best candidate for a scooter, but because they can walk a few steps in their own home, such persons are not seen as approved candidates for a power wheelchair either. Various disability rights groups are campaigning for Medicare to change this policy.

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