

RASCAL Product Lineup







	Venture FDA Class II Medical Device ¹		Conquest FDA Class II Medical Device ¹		Carbon Cruiser FDA Class II Medical Device ¹
Model	RSC39 (3-Wheel)	RSC49 (4-Wheel)	RSC103 (3-Wheel)	RSC104 (4-Wheel)	RSCCRUISER
Weight Capacity	300 lbs.		350 lbs.		300 lbs.
Maximum Speed ²	4 mph		6 mph		3.7 mph
Ground Clearance ³	1.26" at Motor	1.36" at Motor	2.44" at Motor		2"
Turning Radius ³	33"	46.75"	38.78"	51.75"	31"
Overall Length/ Overall Width ^{3,4}	38.5"/22.5"	40.5/22.5"	44.65/23.79"	46.97/23.79"	37"/24"
Front Tires ³	8"		9"	10"	7"
Rear Tires ³	8"		10.75"		8.5"
Range per Charge ^{2,5}	Up to 10.1 miles at 200 lbs. Up to 8.1 miles at 300 lbs.	Up to 8 miles at 200 lbs. Up to 6.6 miles at 300 lbs.	at 200 lbs.	Up to 16.9 miles at 200 lbs. Up to 10.5 miles at 350 lbs.	Up to 9.3 miles at 300 lbs.
Total Weight Without Batteries ³	76.5 lbs.	81.5 lbs.	120 lbs.	124.8 lbs.	42.4 lbs.
Standard Seating	Black, Vinyl Moldable Plastic (17" x 17")		Black, Vinyl Folded Moldable Plastic (17" x 17")		Black, Foam (17" x 17")
Battery Requirements	Two 12Ah		Two U1		12Ah Lithium-ion
Battery Weight ⁷	20 lbs. (battery pack)		22.2 lbs. each		4 lbs.
Battery Charger	Off-board		Off-board		Off-board
Seat to Deck/ Foot Platform Height	16.5" - 18"		16.25" - 17.75"		14.5"
Seat to Ground Height ³	21.5" - 23"		21.5" - 23"		19"
Suspension	N/A		N/A		Front
HCPCS Code	K0899*		K0899*		K0899*
Warranty	3-Year limited on Frame 2-Year limited on Electronics 2-Year limited on Drivetrain 6-Month limited on Batteries		3-Year limited on Frame 2-Year limited on Electronics 2-Year limited on Drivetrain 6-Month limited on Batteries		5-Year limited on frame 1-year limited on electrical, control/lever system, motor/drive system, bearing sleeve, and battery

1. Mega Motion® FDA Class II Medical Devices are designed to aid individuals with mobility impairments.

Varies with user weight, terrain type, battery amp-hour (AH), battery charge, battery condition and tire condition. This specification can be subject to a variance of (+ or -) 10%.
Due to manufacturing tolerances and continual product improvement, this specification can be subject to variance of + or - 3%.

*K0899: Power Mobility Device, not coded by DME PDAC.

DME Providers are responsible for determining appropriate billing codes when submitting for insurance reimbursement. HCPCS Codes provided should not be considered as legal advice and do not guarantee reimbursement. Payer Coding, coverage, and bundling guidelines may apply.

Width of base (not including seat).
Tested in accordance with ANSI/RESNA, WC Vol 2, Section 4 and ISO 7176-4 standards. Results derived from theoretical calculations based on battery specifications and drive system performance. Test conducted at maximum weight capacity.
Deep cycle (AGM or gel cell type recommended).
Battery weight may vary based on manufacturer.

The information contained herein is correct at the time of publication; we reserve the right to alter specifications without prior notice. Speed & range vary with user weight, terrain type, battery charge, battery condition and tire pressure. Due to manufacturing tolerances and continual product improvement, length, width, turning radius and ground clearance can be subject to variance of + or -3%.