

#7

COMPLETE

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Page 1: Please review the following:

Q1

Contact Person:

| | |
|---------------|-------------------------------------|
| Name | Cuauhtemoc Carboni |
| Email Address | cuauhtemoc.carboni@gcccd.edu |

Q2

Department:

Athletics

Q3

Title of Request:

Therapy Bikes (CU-800) for Athletic Medicine

Q4

Location of Request:

Athletic Training Room (D301)

Q5

Equipment

Type of Request (Select one):

Q6

Description of Request: Please provide a description of the supplies, equipment, furniture or other request. When making your request, please be as specific as possible and include information such as make, model, manufacturer, color, quantity, etc.

Spirit CU800

Adjustments- A vertical ratcheting, pop pin engaged seat post and micro adjustments of the seat in the fore/aft direction.

Heart Rate % Profile- There is a bar graph integrated into the console that lets you know where your heart rate is in relation to projected

maximum (calculated when you enter your age in the programming section of each program).

Flywheel System- A heavy duty 30 lb. flywheel results in more inertia (Revolutions Per Minute & Watt output).

Comfort - The dual spring seat is made of high durometer foam, and the pedals are also padded for less stress on your feet.

Generator System - This unit uses a generator to power the console. Therefore there is no need for an electrical hookup.

SPECIFICATIONS

Mechanical

Product Weight: 115 lbs.

Product Dimensions: 42 X 21 X 53 in

Weight Capacity: 450 lbs.

Electrical

Heart Rate: Contact & Telemetric (Chest Strap sold separately)

Resistance: 40 Levels

Q7

Estimated Cost:

\$7,698.76 plus tax and shipping.

Q8

Respondent skipped this question

Please attach quote, if available

Q9

Total Cost of Ownership: Can this request be maintained with existing funding sources? If not, please explain your plan to maintain this request. Example: potential yearly service agreements, warranties, and replacement costs.

Yes

Q10

Justification of Request: Please select the applicable criteria(s) and provide the details of how the criteria(s) relate to your request.

Health and safety,

Equipment replacement,

Critical need,

Program expansion,

Impact on student success and access,

Innovation,

Provided details::

1. Health and Safety • Required to be used for injured student-athletes in every session. Non-function bikes are limiting the appropriate treatment for both injured and rehabbing student-athletes. 2. Equipment replacement and duplication • Replacement of 4 non-functioning bikes currently in Athletic Medicine Area 3. Critical need • Items are required in the treatment space for use by studentathletes every day. 4. Program expansion/innovation • New bikes provide additional heart rate option that allows for more exact measurement of treatment for student-athletes with cardiologist-directed recovery guidelines (High Blood Pressure, Heart Murmur, Chest Injury, etc.). 5. Impact on student success and access • Better treatment and recovery times for injured and rehabbing athletes when all equipment is operational.

Q11

Program Goal: Please identify the program goal(s) this request would help your program achieve and provide a brief explanation of how it would do so.

Goal 1. Create state of arts athletic facilities to support department's needs for innovation.

Stationary bikes are used by every student-athlete in every treatment session to warm-up. Injuries do not allow student-athletes with injuries to run a normal warm-up: either due to lower limb injury or ground impact that might exacerbate a back or upper torso injury. Inadequate warm-up can result in varying levels of preparedness to specific treatment modalities. The current bikes have outlasted their usefulness. They are broken and have limited functionality.

This inoperable required equipment diminished how the effectively the staff can treat injured student-athletes. It also demonstrates a diminished concern for the student-athletes when the college allows for broken and poorly functioning items are left in use.

Q12

Respondent skipped this question

Cuyamaca values equity and our resource allocations should reflect our values. How does this request support the college's equity and anti-racist work? Or how does this request contribute to more equitable student outcomes?
District's Governing Board Resolution: To view, please visit the Governing Board's site [here](#), view the June 16, 2020 meeting, and view agenda item 8.1 "Resolution No. 20-015 In Denunciation of Violence Against Black Americans and Commitment to Anti-Racism"
Cuyamaca College's Academic Senate's Resolution
Cuyamaca College's Equity Plan
