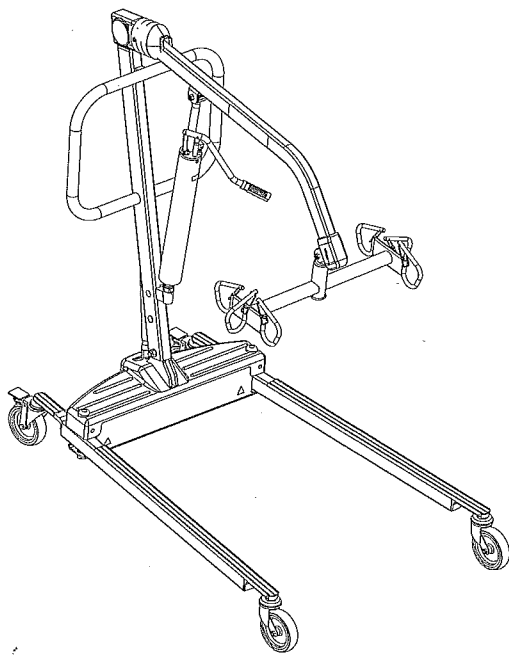
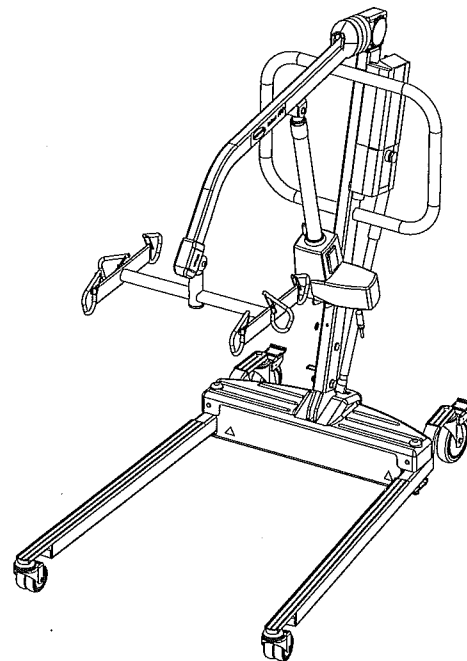


Manual/Electric Portable Patient Lift



Manual/Hydraulic Lift



Electric Lift

DEALER: This manual **MUST** be given to the user of the patient lift.

USER: BEFORE using this patient lift, read this manual and save for future reference.

For more information regarding
Invacare products, parts, and services,
please visit www.invacare.com



Yes, you can.

WARNING

DO NOT OPERATE THIS EQUIPMENT WITHOUT FIRST READING AND UNDERSTANDING THIS MANUAL. IF YOU ARE UNABLE TO UNDERSTAND THE WARNINGS, CAUTIONS AND INSTRUCTIONS CONTACT A QUALIFIED DEALER OR INVACARE TECHNICAL SUPPORT BEFORE ATTEMPTING TO USE THIS EQUIPMENT - OTHERWISE INJURY OR DAMAGE MAY RESULT.

INVACARE PRODUCTS ARE SPECIFICALLY DESIGNED AND MANUFACTURED FOR USE IN CONJUNCTION WITH INVACARE ACCESSORIES. ACCESSORIES DESIGNED BY OTHER MANUFACTURERS HAVE NOT BEEN TESTED BY INVACARE AND ARE NOT RECOMMENDED FOR USE WITH INVACARE PRODUCTS.

SYMBOL LEGEND

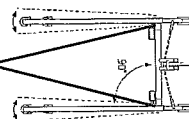
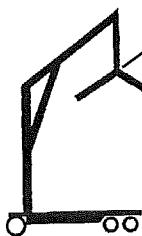


"ATTENTION, see instructions for use".

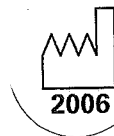
CAUTION - Pinch Points, fingers could be pinched.

Between Boom and Swivel Bar

Base of Lift

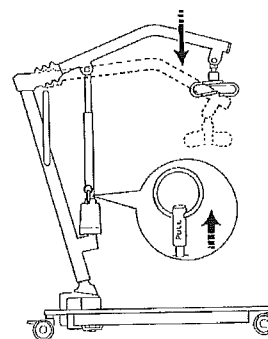


WARNING - When positioning Lift, be aware of the position of the Swivel Bar and the patient. Injury could occur.



"Date of Manufacture"

Device contains NiCd batteries. **DO NOT** dispose of batteries in normal household waste. They **MUST** be taken to a proper disposal site. Contact your local waste management company for information.



EMERGENCY
Mechanical
Lowering - Pull UP
on EMERGENCY
Ring. Push DOWN
on Boom.

NOTE: Updated versions of this manual are available on www.invacare.com.

SECTION I—GENERAL GUIDELINES

WARNING

SECTION I - GENERAL GUIDELINES contains important information for the safe operation and use of this product. **DO NOT** use this product or any available optional equipment without first completely reading and understanding these instructions and any additional instructional material such as **Owner's Manuals, Service Manuals or Instruction Sheets** supplied with this product or optional equipment. If you are unable to understand the **Warnings, Cautions or Instructions**, contact a healthcare professional, dealer or technical personnel before attempting to use this equipment - otherwise, injury or damage may occur.

Check all parts for shipping damage before using. In case of damage, **DO NOT** use the equipment. Contact the Dealer for further instructions.

The Invacare patient lift is **NOT** a transport device. It is intended to transfer an individual from one resting surface to another (such as a bed to a wheelchair). Moving a person suspended in a sling over ANY distance is **NOT** recommended.

DO NOT attempt any transfer without approval of the patient's physician, nurse or medical assistant. Thoroughly read the instructions in this Owner's Manual, observe a trained team of experts perform the lifting procedures and then perform the entire lift procedure several times with proper supervision and a capable individual acting as a patient.

Use common sense in all lifts. Special care **MUST BE** taken with people with disabilities who cannot cooperate while being lifted.

Invacare slings and patient lift accessories are specifically designed to be used in conjunction with Invacare patient lifts. Slings and accessories designed by other manufacturers are not to be utilized as a component of Invacare's patient lift system.

If the patient lift is exposed to extreme temperature (above 100°F or below 32°F), high humidity and/or becomes wet, prior to use, ensure handgrips do not twist on patient lift handle - otherwise damage or injury may occur.

Assembling the Lift

DO NOT overtighten mounting hardware. This will damage mounting brackets.

Operating the Lift

Although Invacare recommends that two assistants be used for all lifting preparation, transferring from and transferring to procedures, our equipment will permit proper operation by one assistant. The use of one assistant is based on the evaluation of the health care professional for each individual case.

Make sure there is an audible click when mounting battery on the battery charger to confirm proper mounting. Otherwise, injury or damage may occur.

DO NOT exceed maximum weight limitation of the patient lift. The weight limitation for the RPA450-1 (Adjustable Base) and RPL450-1 (Low Base) is 450 lbs. The weight limitation for the RPA600-1 (Adjustable Base) and RPL600-1 (Low Base) is 600 lbs.

ALWAYS keep hands and fingers clear of moving parts to avoid injury.

Using the Sling

Use an Invacare approved sling that is recommended by the individual's doctor, nurse or medical assistant for the comfort and safety of the individual being lifted.

DO NOT use any kind of plastic back incontinence pad or seating cushion between patient and sling material that may cause the patient to slide out of the sling during transfer.

After each laundering (in accordance with instructions on the sling), inspect sling(s) for wear, tears, and loose stitching.

Bleached, torn, cut, frayed, or broken slings are unsafe and could result in injury. Discard immediately.

DO NOT alter slings.

Be sure to check the sling attachments each time the sling is removed and replaced, to ensure that it is properly attached before the patient is removed from a stationary object (bed, chair or commode).

If the patient is in a wheelchair, secure the wheel locks in place to prevent the chair from moving forwards or backwards.

When connecting slings equipped with color coded straps to the patient lift, the shortest of the straps MUST be at the back of patient for support. Using long section will leave little or no support for patient's back. The loops of the sling are color coded and can be used to place patient in various positions. The colors make it easy to connect both sides of the sling equally. Make sure that there is sufficient head support when lifting a patient.

Lifting the Patient

When using an adjustable base lift, the legs MUST be in the maximum Opened/Locked position before lifting the patient.

When the sling is elevated a few inches off the surface of the bed and before moving the patient, check again to make sure that the sling is properly connected to the hooks of the swivel bar. If any attachments are not properly in place, lower the patient back onto the stationary surface and correct this problem - otherwise, injury or damage may occur.

Adjustments for safety and comfort should be made before moving the patient. Patient's arms should be inside of the straps.

Invacare slings are made specifically for use with Invacare Patient Lifts. For the safety of the patient, DO NOT intermix slings and patient lifts of different manufacturers. Warranty will be voided.

Before transferring a patient from a stationary object (wheelchair, commode or bed), slightly raise the patient off the stationary object and check that all sling attachments are secure. If any attachment is not correct, lower the patient and correct the problem, then raise the patient and check again.

During transfer, with patient suspended in a sling attached to the lift, DO NOT roll caster base over objects such as carpet, raised carpet bindings, door frames, or any uneven surfaces or obstacles that would create an imbalance of the patient lift and could cause the patient lift to tip over. Use steering handle on the mast at all times to push or pull the patient lift.

Invacare does not recommend locking of the rear casters of the patient lift when lifting an individual. Doing so could cause the lift to tip and endanger the patient and assistants. Invacare does recommend that the rear casters be left unlocked during lifting procedures to allow the patient lift to stabilize itself when the patient is initially lifted from a chair, bed or any stationary object.

Transferring the Patient

When elevated a few inches off the surface of the stationary object (wheelchair, commode, or bed) and before moving the patient, check again to make sure that the sling is properly connected to the hooks of the swivel bar. If any attachments are not properly in place, lower the patient back onto the commode chair or the standard commode and correct this problem.

Wheelchair wheel locks MUST be in a locked position before lowering the patient into the wheelchair for transport.

Before transferring, check that the wheelchair weight capacity can withstand the patient's weight.

Be sure to check the sling attachments each time the sling is removed and replaced, to ensure that it is properly attached before the patient is removed from the bed or chair.

Mast pivot under the rubber boot must be tight to ensure safe use of the patient lift. Bolt must be checked at least every six months in conjunction with periodic maintenance.

Performing Maintenance

The pump is sealed at the factory. DO NOT attempt to open the pump or obtain local service as this will VOID the warranty and might result in damage. Consult your dealer or write Invacare for further information.

After the first year of use, the hooks of the swivel bar and the mounting brackets of the boom should be inspected every three months to determine the extent of wear. If these parts become worn, replacement must be made.

Casters and axle bolts require inspections every six months to check for tightness and wear.

After the first twelve months of operation, inspect the swivel bar and the eye of the boom (to which it attaches) for wear. If the metal is worn, the parts **MUST** be replaced. Make this inspection every six months thereafter.

Regular maintenance of patient lifts and accessories is necessary to assure proper operation.

DO NOT overtighten mounting hardware. This will damage mounting brackets.

Electrical - Grounding Instructions

DO NOT, under any circumstances, cut or remove the round grounding prong from any plug. Some devices are equipped with three-prong (grounding) plugs for protection against possible shock hazards. Where a two-prong wall receptacle is encountered, it is the personal responsibility and obligation of the customer to contact a qualified electrician and have the two-prong receptacle replaced with a properly grounded three-prong wall receptacle in accordance with the National Electrical Code. If you must use an extension cord, use only a three-wire extension cord having the same or higher electrical rating as the device being connected. In addition, Invacare has placed RED/ORANGE WARNING TAGS on some equipment. DO NOT remove these tags. Carefully read battery/battery charger information prior to installing, servicing or operating your patient lift.

Assembling the Electric Actuator to the Boom

NOTE: For this procedure, refer to FIGURE 2.5.

1. Remove the shoulder bolt, washer and nut from the mounting bracket on the boom assembly.
2. Unpack the pinch guard from the patient lift carton.

NOTE: The bottom of the electric actuator assembly will already be assembled to the mast mounting bracket.

3. Cut the plastic-wrap that secures the boom and mast together.
4. Lift-up on the boom and place it on your left shoulder.
5. Let the actuator rest on your right-side of your chest and rotate the shaft extension of the actuator assembly until it lines-up with the mounting holes in the boom assembly.
6. Place the pinch guard over the shaft extension of the actuator.
7. Align the holes of the boom assembly mounting bracket with those of the actuator and insert the bolt. Secure with nut.

NOTE: Be sure that the bolt is completely through the holes of the boom assembly mounting bracket and the actuator assembly. The boom assembly will pivot easily if the mounting hardware is aligned properly when the boom assembly is secured to the mast.

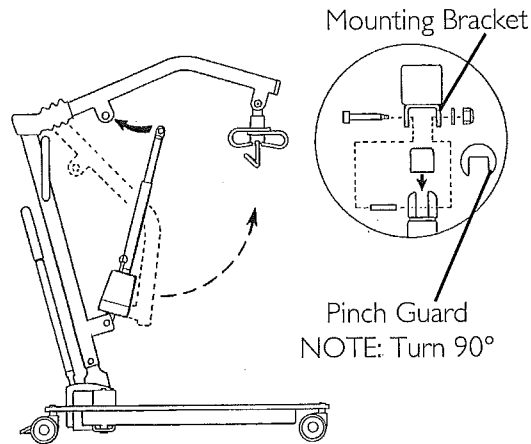


FIGURE 2.5 Assembling the Electric Actuator to the Boom

CAUTION

DO NOT overtighten the nut and bolt. This damages the mounting bracket.

8. Plug in the electrical connectors from the electric actuator to the bottom of the battery assembly.
9. Plug the pendant control into the bottom of the battery assembly.

NOTE: The bottom of the actuator assembly will already be assembled to the mast mounting bracket.

Installing the Shifter Handle

NOTE: For this procedure, refer to FIGURE 2.6.

1. Remove the shifter handle from the packaging carton.
2. Line-up the shifter handle threads with threaded opening in the base.
3. Turn the shifter handle clockwise and securely tighten into the base.

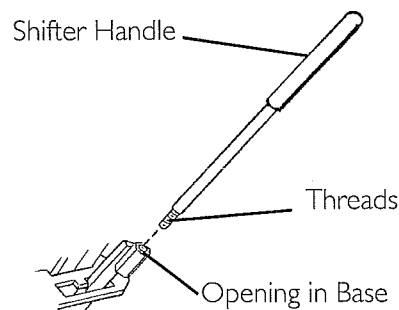


FIGURE 2.6 Installing the Shifter Handle

SECTION 3—OPERATION

Operating the Patient Lift

NOTE: Although Invacare recommends that two assistants be used for all lifting preparation, transferring from and transferring to procedures, our equipment will permit proper operation by one assistant. The use of one assistant is based on the evaluation of the health care professional for each individual case.

Closing/Opening the Legs of the Base Assembly

The shifter handle is used to open or close the legs of the base for stability when lifting a patient.

⚠ WARNING

The operation of the patient lift is an easy and safe procedure. **DO NOT** attempt any transfer without approval of the patient's physician, nurse or medical assistant. Thoroughly read the instructions in this Owner's Manual, observe a trained team of experts performing the lifting procedures and then perform the entire lift procedure several times with proper supervision and a capable individual acting as a patient.

The legs of the lift must be in the maximum open position and the shifter handle locked in place for optimum stability and safety. If it is necessary to close the legs of the lift to maneuver the lift under a bed, close the legs of the lift only as long as it takes to position the lift over the patient and lift the patient off the surface of the bed. When the legs of the lift are no longer under the bed, return the legs of the lift to the maximum open position and lock the shifter handle immediately.

Closing the Legs

NOTE: For this procedure, refer to FIGURE 3.1.

1. Stand at the rear of the patient lift and grasp the shifter handle with one hand and place the opposite hand on the steering handle of the mast for balance.

NOTE: The shifter handle MUST lock into its mounting slot to lock the legs in the full closed position.

⚠ WARNING

If the shifter handle is **NOT** positioned completely into its mounting slot, **DO NOT** use the patient lift until the shifter handle is properly seated and the legs of the patient lift are locked in place. Otherwise, injury and/or damage may occur.

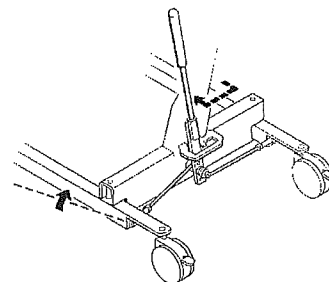


FIGURE 3.1 Closing the Legs

2. Pull the shifter handle away from the patient lift and then to your left until it locks in the notch of the bracket.

Opening the Legs

NOTE: For this procedure, refer to FIGURE 3.2.

1. Stand at the rear of the patient lift and grasp the shifter handle with one hand and place the opposite hand on the steering handle of the mast for balance.

NOTE: The shifter handle MUST lock into its mounting slot to lock the legs in the full open position.

⚠ WARNING

If the shifter handle is not positioned completely into its mounting slot, **DO NOT** use the patient lift until shifter handle is properly seated and the legs of the patient lift are locked in place. Otherwise, injury and/or damage may occur.

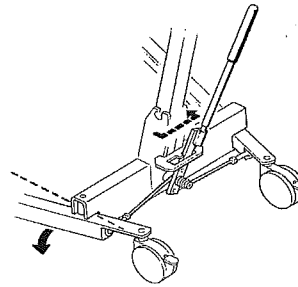


FIGURE 3.2 Opening the Legs

2. Pull the shifter handle away from the patient lift and then to your right.

Raising/Lowering a Manual/Hydraulic Lift

⚠ WARNING

Invacare does not recommend locking of the rear casters of the patient lift when lifting an individual. Doing so could cause the lift to tip and endanger the patient and assistants. Invacare does recommend that the rear casters be left unlocked during lifting procedures to allow the patient lift to stabilize itself when the patient is initially lifted from a chair, bed or any stationary object.

There are two controls on the pump assembly:

- The control valve
- The pump handle

Raising the Hydraulic Lift

NOTE: For this procedure, refer to FIGURE 3.3.

The control valve must be in the closed position (control valve positioned towards pump handle) to move the pump handle up and down to elevate the boom and the patient until the boom locks in the notch of the bracket.

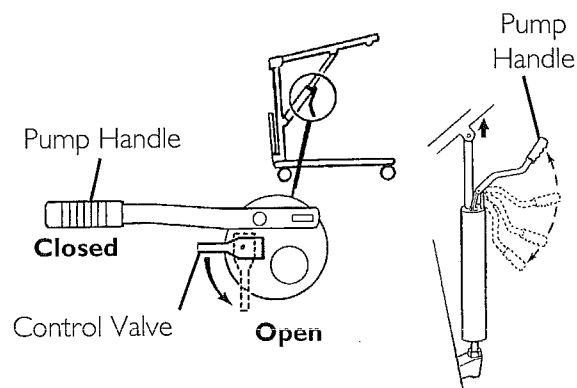


FIGURE 3.3 Raising the Hydraulic Lift

Lowering the Hydraulic Lift

NOTE: For this procedure, refer to FIGURE 3.4.

The control handle **MUST** be in the open position (control valve positioned away from pump handle) to lower the boom and the patient. The rate of descent can be controlled by varying the amount that the control valve is opened.

NOTE: A safety gate is part of the hydraulic system that controls the maximum descent of the boom regardless of how far the control valve is opened.

1. Perform one of the following:

WITH the patient in a sling:

- Gently open the control valve. See Detail "A" of FIGURE 3.4.

WITHOUT the patient in a sling:

- Open the control valve and pull down on the boom. See Detail "B" of FIGURE 3.4.

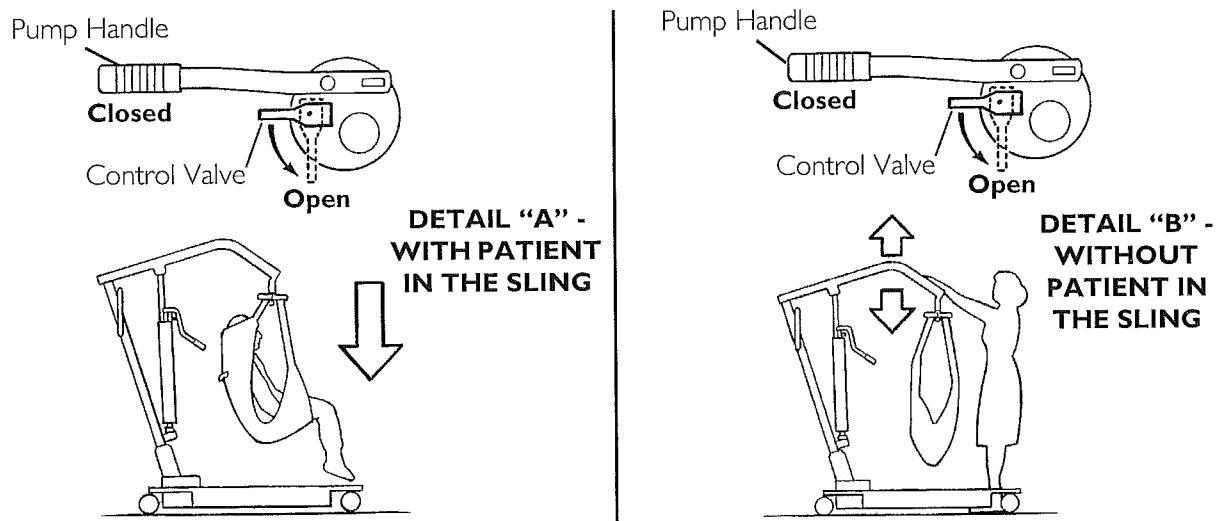


FIGURE 3.4 Lowering the Hydraulic Lift

Raising/Lowering an Electric Lift

⚠ WARNING

Invacare does not recommend locking of the rear casters of the patient lift when lifting an individual. Doing so could cause the lift to tip and endanger the patient and assistants. Invacare does recommend that the rear casters be left unlocked during lifting procedures to allow the patient lift to stabilize itself when the patient is initially lifted from a chair, bed or any stationary object.

NOTE: For this procedure, refer to FIGURE 3.5.

Raising the Lift

Press the UP (↑) button to raise the boom and the patient.

Lowering the Lift

Press the DOWN (↓) button to lower the boom and the patient.

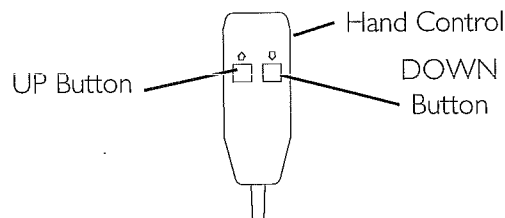


FIGURE 3.5 Raising/Lowering an Electric Lift

Activating a Mechanical Emergency Release

Primary Emergency Release

NOTE: For this procedure, refer to FIGURE 3.6.

All lift actuators are equipped with a mechanical Emergency release. The mechanical release will enable the actuator to retract without power. The actuator will only retract while under load and the mechanical Emergency release is pulled. The release is colored reddish orange with the word Emergency spelled out in white.

To activate the primary emergency release, insert a pen into the hole labeled "emergency" on the control box of the lift and push down on the boom at the same time.

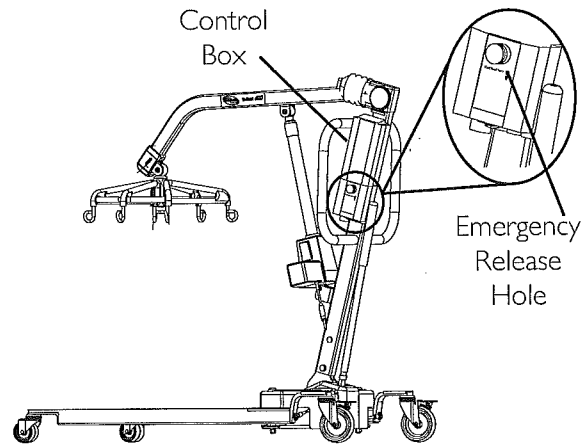


FIGURE 3.6 Primary Emergency Release

Secondary Emergency Release

NOTE: For this procedure, refer to FIGURE 3.7.

NOTE: It is recommended that the primary emergency release be used. The secondary emergency release is only a back-up to the primary emergency release.

In cases where the primary release is either not functioning or unreachable, a secondary emergency release may be used.

To activate the secondary release, pull up on the EMERGENCY ring and push down on the boom at the same time.

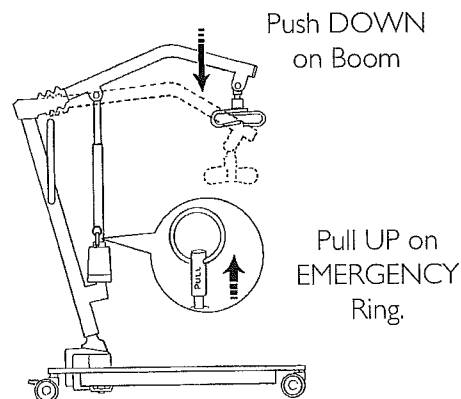


FIGURE 3.7 Secondary Emergency Release

Performing an Emergency Stop

NOTE: For this procedure, refer to FIGURE 3.8.

Press the RED button on the control box in to stop the lift arms and patient from raising or lowering.

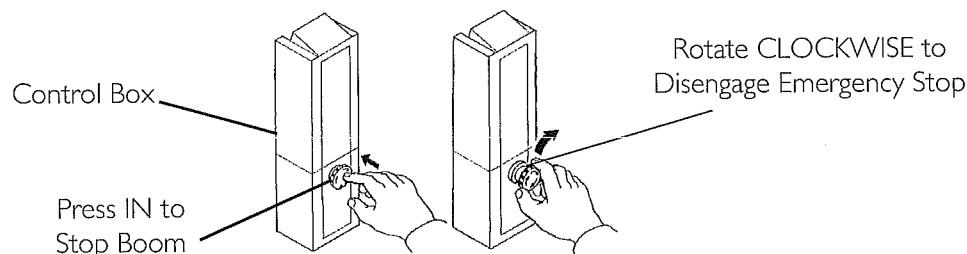


FIGURE 3.8 Performing an Emergency Stop

Mounting the Battery Charger

NOTE: For this procedure, refer to FIGURE 3.9.

NOTE: Refer to your local regulations concerning proper mounting procedures.

1. Place the battery charger with mounting bracket on the wall at the desired position.
2. With a pencil, mark the middle hole position.
3. Measure down 6½ inches from the pencil mark and drill one mounting hole.
4. Install the bottom mounting screw until there is an approximate 1/8-inch gap between the screw head and the wall.
5. Install the battery charger with mounting bracket onto the bottom mounting screw.
6. Drill the remaining two mounting holes.
7. Install the two remaining mounting screws through the mounting bracket and into the wall. Tighten securely.
8. Plug the battery charger into the wall electrical outlet.

NOTE: ON LED should illuminate.

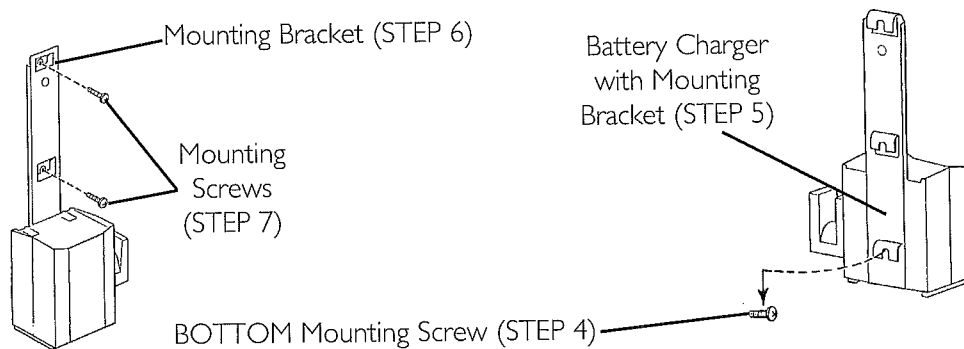


FIGURE 3.9 Mounting the Battery Charger

Charging the Battery

NOTE: For this procedure, refer to FIGURE 3.10 on page 25.

NOTE: Invacare recommends the battery be recharged daily to prolong battery life.

NOTE: An audible alarm will sound (horn will beep) when battery is low.

1. Lift up on the handle on the back of the battery.
2. Lift the battery up and out away from the control box.

CAUTION

Make sure there is an audible click when mounting battery on the battery charger to confirm proper mounting. Otherwise, injury or damage may occur.

3. Place the battery on the battery charger as shown in FIGURE 3.10. Make sure there is an audible click.

NOTE: The charge LED will illuminate. When charging is complete, charge LED will stop illuminating.

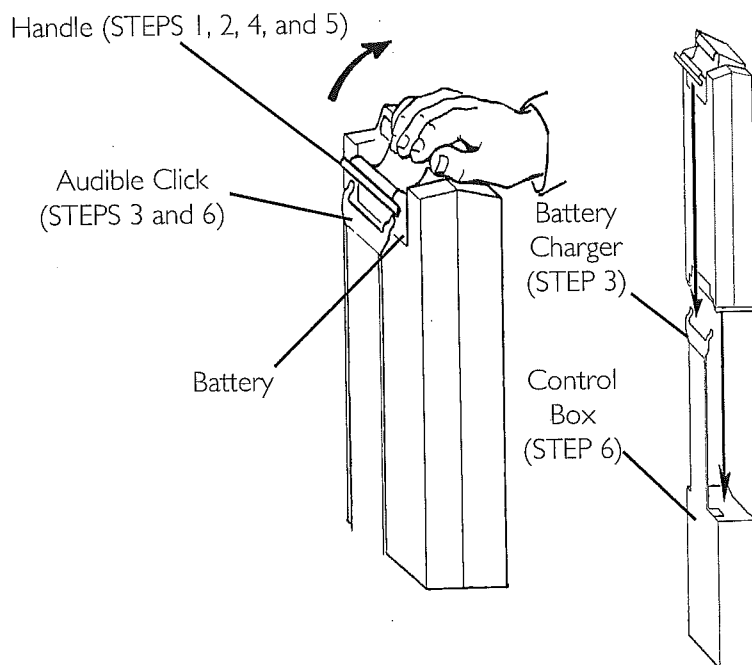
NOTE: A battery needing to be fully recharged will take approximately four hours.

4. Lift up on the handle on the back of the battery.
5. Lift the battery up and out away from the battery charger.

CAUTION

Make sure there is an audible click when mounting battery on the battery charger to confirm proper mounting. Otherwise, injury or damage may occur.

6. Reinstall the battery onto the control box as shown in FIGURE 3.10. Make sure there is an audible click.



NOTE: The Battery mounts to the Control Box and Battery Charger as shown.

FIGURE 3.10 Charging the Battery

SECTION 4—LIFTING THE PATIENT

Preparing the Lift for Use

NOTE: Although Invacare recommends that two assistants be used for all lifting preparation, transferring from and transferring to procedures, our equipment will permit proper operation by one assistant. The use of one assistant is based on the evaluation of the health care professional for each individual case.

Positioning the Lift for Use

NOTE: For this procedure, refer to FIGURE 4.1.

NOTE: Refer to General Guidelines on page 13 in this manual before proceeding further and observe all warnings indicated.

NOTE: Before positioning the legs of the patient lift under a bed, make sure that the area is clear of any obstructions.

⚠ WARNING

The legs of the lift must be in the maximum open position and the shifter handle locked in place for optimum stability and safety. If it is necessary to close the legs of the lift to maneuver the lift under a bed, close the legs of the lift only as long as it takes to position the lift over the patient and lift the patient off the surface of the bed. When the legs of the lift are no longer under the bed, return the legs of the lift to the maximum open position and lock the shifter handle immediately.

1. With the legs of the base open and locked, use the steering handle to push the patient lift into position.
2. Lower the patient lift for easy attachment of the sling.

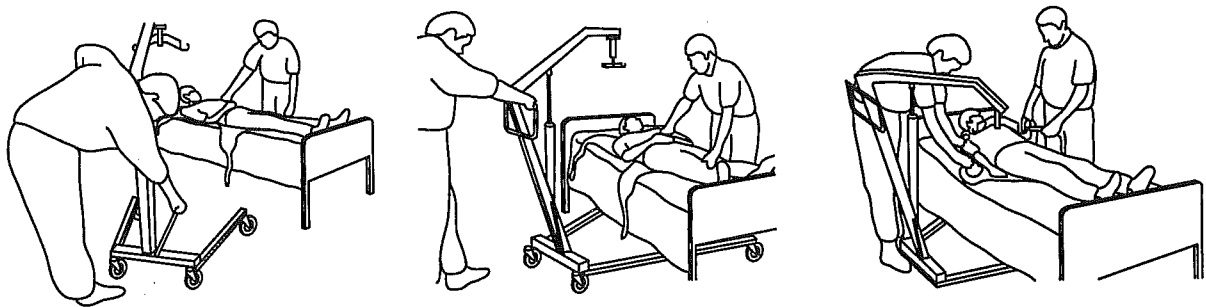


FIGURE 4.1 Positioning the Lift for Use

Attaching Slings to the Lift

Attaching Slings Using Color Coded Straps

NOTE: For this procedure, refer to FIGURE 4.2.

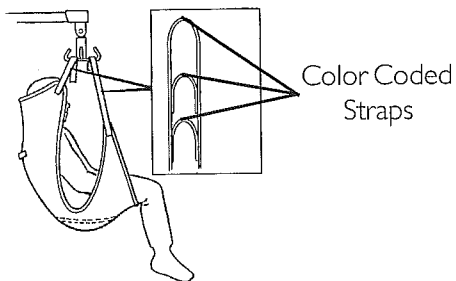
1. Place the straps of the sling over hooks of the swivel bar.
2. Match the corresponding colors on each side of the sling for an even lift of the patient, refer to FIGURE 4.2.

NOTE: Model Nos. R110 - R117 Full Body Slings and Model Nos. R120 - R122 Toileting Slings have four sling straps. Model Nos. R100 - R102 Divided Leg Slings have six sling straps.

NOTE: Invacare Lift Swivel Bars have three hookup points per side. The middle hookup is ONLY used for slings that have three sets of straps per side.

3. Use the lift. Refer to Lifting/Moving the Patient on page 27.

DETAIL "A" - FULL BODY OR HEAVY DUTY SLING WITH OR WITHOUT COMMODE OPENING (FOUR STRAPS ONLY)



DETAIL "B" - DIVIDED LEG SLING WITH COMMODE OPENING (SIX STRAPS)

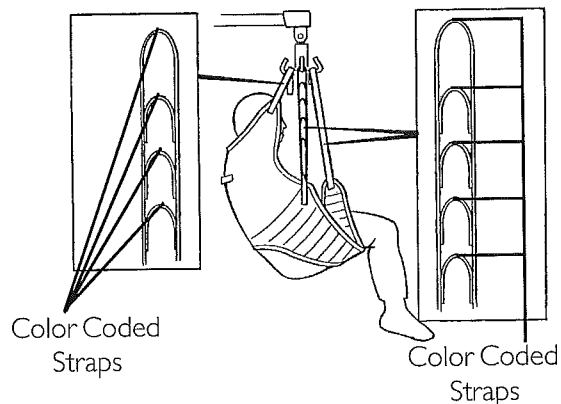


FIGURE 4.2 Attaching Slings to the Lift - Attaching Slings Using Color Coded Straps

Lifting/Moving the Patient

NOTE: For this procedure, refer to FIGURE 4.3 on page 28.

NOTE: DO NOT engage the rear locking casters when patient is in the lift.

1. Pump the lift handle or press the UP (↑) button to raise the patient above the bed. The patient should be elevated high enough to clear the bed with their weight fully supported by the lift.

NOTE: On manual/hydraulic lift, the boom will stay in position until the control valve is opened. On the electric lift, the boom will stay in position until the DOWN (↓) button is pressed.

2. When the patient is lifted from the bed (with the patient's head supported by the sling and/or an assistant), he/she will be raised to a sitting position (Detail "A", FIGURE 4.3).

⚠ WARNING

When the sling is elevated a few inches off the surface of the bed and before moving the patient, check again to make sure that the sling is properly connected to the hooks of the swivel bar. If any attachments are **NOT** properly in place, lower the patient back onto the stationary surface and correct this problem - otherwise, injury or damage may occur.

Adjustments for safety and comfort should be made before moving the patient. Patient's arms should be inside of the straps.

Invacare slings are made specifically for use with Invacare Patient Lifts. For the safety of the patient, **DO NOT** use slings and patient lifts of different manufacturers.

3. When the patient is clear of the bed surface, swing their feet off the bed (Detail "B", FIGURE 4.3).
4. Using the steering handle, move the lift away from the bed.
5. When moving the patient lift away from the bed, turn the patient so that he/she faces assistant operating the patient lift (Detail "C", FIGURE 4.3).
6. Press the DOWN (↓) button (electric) or open the control valve (manual/hydraulic) lowering patient so that his feet rest on the base of the lift, straddling the mast. Close the control valve.

NOTE: The lower center of gravity provides stability making the patient feel more secure and the lift easier to move.

7. Pull the patient lift away from the bed and then push it from behind with both hands firmly on the steering handle.

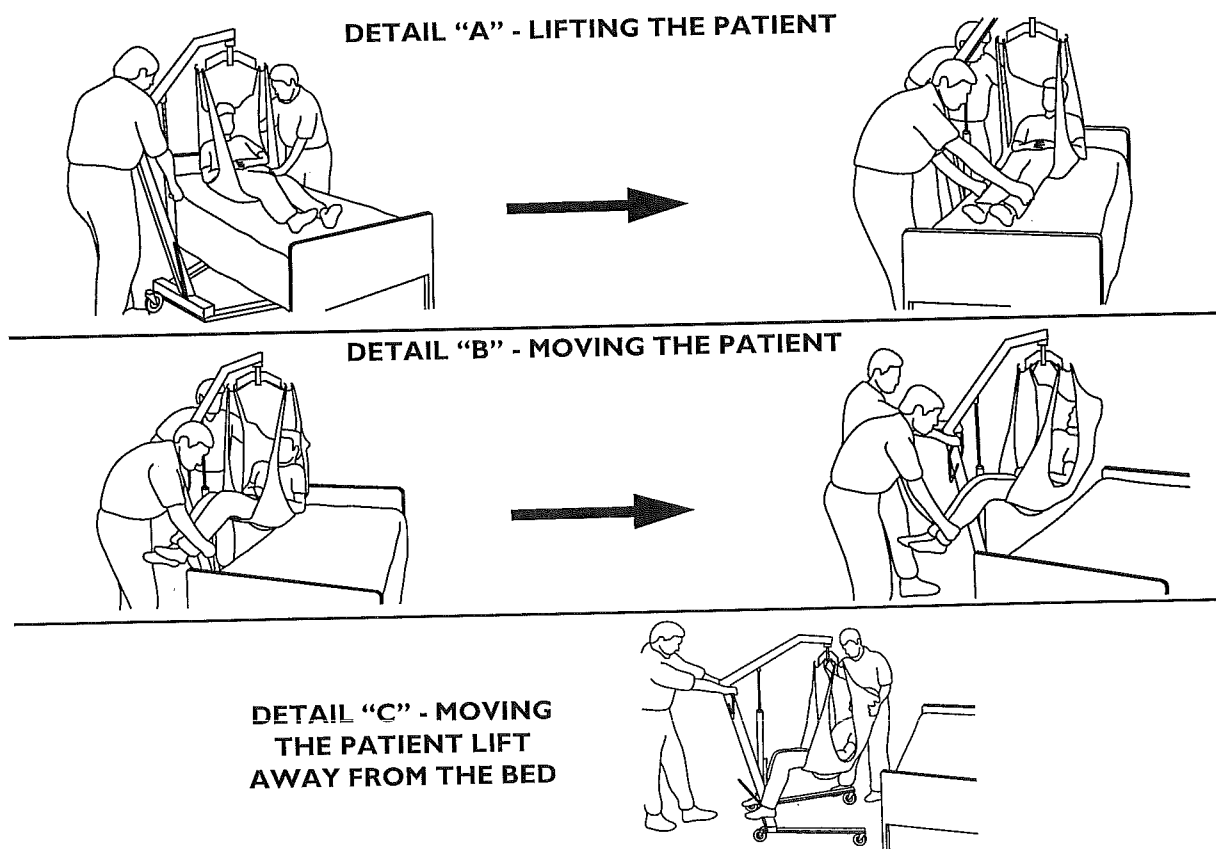


FIGURE 4.3 Lifting/Moving the Patient

SECTION 5—TRANSFERRING THE PATIENT

Transferring the Patient for Using a Commode Chair or Standard Commode

NOTE: Although Invacare recommends that two assistants be used for all lifting preparation, transferring from and transferring to procedures, our equipment will permit proper operation by one assistant. The use of one assistant is based on the evaluation of the health care professional for each individual case.

The slings with commode openings are designed to be used with either a commode chair or standard commode.

NOTE: Invacare recommends that the sling remain connected to the swivel bar hooks during the patient's use of either the commode chair or standard commode.

NOTE: Although Invacare recommends that two assistants be used for all lifting preparation, transferring from and transferring to procedures, our equipment will permit proper operation by one assistant. The use of one assistant is based on the evaluation of the health care professional for each individual case.

⚠ WARNING

When the sling is a few inches off the surface of the bed and before moving the patient, check again to make sure that the sling is properly connected to the hooks of the swivel bar. If any attachments are **NOT** properly in place, lower the patient back onto the stationary surface and correct this problem - otherwise, injury or damage may occur.

Adjustments for safety and comfort should be made before moving the patient. The patient's arms should be inside the straps.

Invacare slings are made specifically for use with Invacare Patient Lifts. For the safety of the patient, **DO NOT** use slings and patient lifts of different manufacturers.

Invacare does **NOT** recommend locking the rear casters of the patient lift when lifting an individual. Doing so could cause the lift to tip and endanger the patient and assistants. Invacare **DOES** recommend that the rear casters be left unlocked during lifting procedures to allow the patient lift to stabilize itself when the patient is initially lifted from a chair, bed or any stationary object.

The legs of the lift must be in the maximum open position and the shifter handle locked in place for optimum stability and safety. If it is necessary to close the legs of the lift to maneuver the lift under a bed, close the legs of the lift only as long as it takes to position the lift over the patient and lift the patient off the surface of the bed. When the legs of the lift are no longer under the bed, return the legs of the lift to the maximum open position and lock the shifter handle immediately.

NOTE: For this procedure, refer to FIGURE 5.1.

Transferring to a Commode Chair

1. Before lifting the patient from the bed, refer to Attaching Slings to the Lift on page 27. For operation of the patient lift, refer to Operation on page 20.
2. The patient should be elevated high enough to clear the commode chair arms and have their weight supported by the patient lift.
3. With the help of both assistants, guide the patient onto the commode chair.
4. Lower the patient onto the commode chair leaving the sling attached to the swivel bar hooks.
5. When complete, recheck for correct attachment and then raise the patient off the commode chair.
6. When patient is clear of the commode surface (using the steering handles), move the lift away from the commode chair.

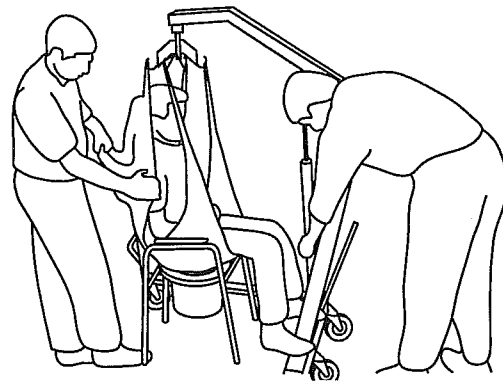
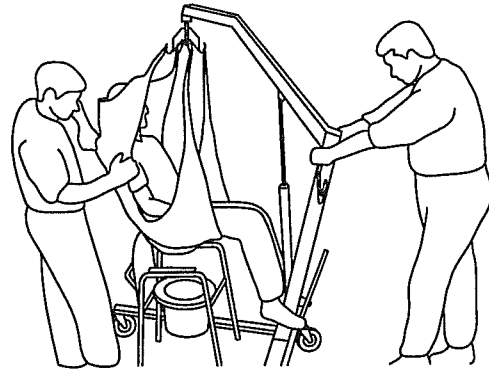


FIGURE 5.1 Transferring to a Commode Chair

7. To return the patient to bed, reverse the procedures for lifting the patient, operation and sling attachment.
8. To return or place the patient in a wheelchair, refer to Transferring to a Wheelchair on page 32.

Transferring to a Standard Commode

NOTE: Although Invacare recommends that two assistants be used for all lifting preparation, transferring from and transferring to procedures, our equipment will permit proper operation by one assistant. The use of one assistant is based on the evaluation of the health care professional for each individual case.

NOTE: The Invacare patient lift is NOT intended as a transport device. Moving a person suspended in a sling over any distance is NOT recommended. If the bathroom facilities are NOT near the bed or if the patient lift cannot be easily maneuvered towards the commode, then the patient MUST be transferred to a wheelchair and transported to the bathroom facilities before using the patient lift again to position the patient on a standard commode. Refer to Transferring to a Wheelchair on page 32.

NOTE: Before transferring the patient, the patient lift should be guided to the bathroom facilities to check that it can be easily maneuvered towards the commode.

1. Before lifting the patient from the bed, refer to Attaching Slings to the Lift on page 27. For operation of the patient lift, refer to Operation on page 20.
2. Transport the patient to the bathroom facility.
3. The patient should be elevated high enough to clear the standard commode and have their weight supported by the patient lift.
4. With the help of both assistants, guide the patient onto the standard commode.
5. Lower the patient onto the standard commode leaving the sling attached to the swivel bar hooks.
6. When complete, recheck for correct attachment and then raise the patient off the standard commode.
7. When patient is clear of the standard commode surface (using the steering handle), move the lift away from the standard commode.
8. To return or place patient in a wheelchair, refer to Transferring to a Wheelchair on page 32.
9. To return the patient to bed, reverse the procedures for lifting the patient, operation and sling attachment.

Transferring to a Bathing Unit

NOTE: Although Invacare recommends that two assistants be used for all lifting preparation, transferring from and transferring to procedures, our equipment will permit proper operation by one assistant. The use of one assistant is based on the evaluation of the health care professional for each individual case.

WARNING

When the sling is elevated a few inches off the surface of the bed and before moving the patient, check again to make sure that the sling is properly connected to the hooks of the swivel bar. If any attachments are **NOT** properly in place, lower the patient back onto the stationary surface and correct this problem - otherwise, injury or damage may occur.

Adjustments for safety and comfort should be made before moving the patient. The patient's arms should be inside the straps.

Invacare slings are made specifically for use with Invacare Patient Lifts. For the safety of the patient, **DO NOT** use slings and patient lifts of different manufacturers.

Invacare does **NOT** recommend locking the rear casters of the patient lift when lifting an individual. Doing so could cause the lift to tip and endanger the patient and assistants. Invacare **DOES** recommend that the rear casters be left unlocked during lifting procedures to allow the patient lift to stabilize itself when the patient is initially lifted from a chair, bed or any stationary object.

The legs of the lift must be in the maximum open position and the shifter handle locked in place for optimum stability and safety. If it is necessary to close the legs of the lift to maneuver the lift under a bed, close the legs of the lift only as long as it takes to position the lift over the patient and lift the patient off the surface of the bed. When the legs of the lift are no longer under the bed, return the legs of the lift to the maximum open position and lock the shifter handle immediately.

TRANSFERRING THE PATIENT

NOTE: There are many portable bathing apparatuses; this is an example of one. Refer to your particular portable bath instructions and use them in conjunction with this Owner's Manual.

1. Before lifting the patient from the bed, refer to Attaching Slings to the Lift on page 27. For operation of the patient lift, refer to Operation on page 20.
2. The patient should be elevated high enough to clear the bed and be able to slide the portable bath tub under the patient.
3. Lower the patient into the portable bath tub.
4. Detach the sling from the swivel bar hooks and attach the portable bath tub straps to the patient lift.
5. Using the lift, raise the sides of the portable bath tub.
6. Bathe the patient.
7. Reverse the procedures to return the patient to bed.

Transferring to a Wheelchair

WARNING

When the sling is elevated a few inches off the surface of the bed and before moving the patient, check again to make sure that the sling is properly connected to the hooks of the swivel bar. If any attachments are **NOT** properly in place, lower the patient back onto the stationary surface and correct this problem - otherwise, injury or damage may occur.

Adjustments for safety and comfort should be made before moving the patient. The patient's arms should be inside of the straps.

Invacare slings are made specifically for use with Invacare Patient Lifts. For the safety of the patient, **DO NOT** use slings and patient lifts of different manufacturers.

Invacare does **NOT** recommend locking the rear casters of the patient lift when lifting an individual. Doing so could cause the lift to tip and endanger the patient and assistants. Invacare **DOES** recommend that the rear casters be left unlocked during lifting procedures to allow the patient lift to stabilize itself when the patient is initially lifted from a chair, bed or any stationary object.

Before transferring, check that the wheelchair weight capacity can withstand the patient's weight.

The legs of the lift must be in the maximum open position and the shifter handle locked in place for optimum stability and safety. If it is necessary to close the legs of the lift to maneuver the lift under a bed, close the legs of the lift only as long as it takes to position the lift over the patient and lift the patient off the surface of the bed. When the legs of the lift are no longer under the bed, return the legs of the lift to the maximum open position and lock the shifter handle immediately.

NOTE: For this procedure, refer to FIGURE 5.2.

NOTE: Before lifting the patient from the bed, refer to Attaching Slings to the Lift on page 27. For operation of the patient lift, refer the section Operation on page 20.

NOTE: Although Invacare recommends that two assistants be used for all lifting preparation, transferring from and transferring to procedures, our equipment will permit proper operation by one assistant. The use of one assistant is based on the evaluation of the health care professional for each individual case.

1. Ensure the legs of the lift (with patient) are in the open position.
2. Move the wheelchair into position.
3. Engage the rear wheel locks of the wheelchair to prevent movement of the chair.

⚠ WARNING

The wheelchair wheel locks *MUST* be in a locked position before lowering the patient into the wheelchair for transport.

NOTE: Use the straps or handles on the side and the back of the sling to guide the patient's hips as far back as possible into the seat for proper positioning.

4. Position the patient over the seat with their back against the back of the chair.
5. Begin to lower the patient either by opening the control valve or by pressing the DOWN (↓) button.
6. With one assistant behind the chair and the other operating the patient lift, the assistant behind the chair will pull back on the grab handle (on select models) or sides of the sling to seat the patient well into the back of the chair. This will maintain a good center of balance and prevent the chair from tipping forward.
7. Leave the sling in place.

NOTE: Remove only if a divided leg sling was used.

8. To return to the seating surface, reverse procedures for lifting the patient, operation and sling attachments.

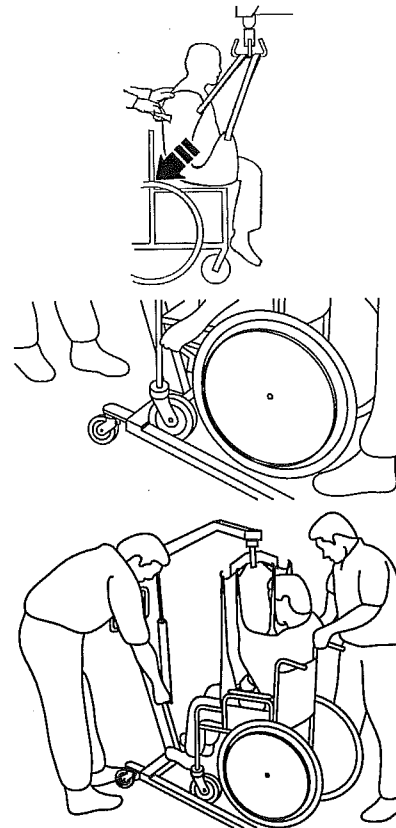


FIGURE 5.2 Transferring to a Wheelchair

⚠ WARNING

Be sure to check the sling attachments each time the sling is removed and replaced to ensure that it is properly attached before the patient is removed from the bed or chair.

SECTION 6— TROUBLESHOOTING

SYMPTOMS	FAULTS	SOLUTION
Patient Lift feels loose.	Mast/Base joint loose. Tie - Rods are loose.	Refer to <u>Assembly</u> on page 17. Refer to <u>Maintaining the Base Adjustment</u> on page 40.
Casters/Brakes noisy or stiff.	Fluff or debris in bearings.	Refer to <u>Replacing Casters/Forks</u> on page 40.
Noisy or dry sound from pivots.	Needs lubrication.	Refer to <u>Lubricating the Lift</u> on page 36.
Oil leaking from hydraulics.	Hydraulic pump in need of replacement.	Refer to <u>Replacing a Manual/Hydraulic Pump</u> on page 37 and <u>Replacing the Electric Actuator</u> on page 37. Contact your Dealer.
Manual / Hydraulic pump fails to lift when pumped.	Control Valve not fully closed. Manual / Hydraulic pump in need of replacement.	Close Control Valve. Refer to <u>Replacing a Manual/Hydraulic Pump</u> on page 37 and <u>Replacing the Electric Actuator</u> on page 37. Contact your Dealer. Check connections.
Electric actuator fails to lift when button is pressed.	Hand-control or actuator connector loose. Battery low. RED emergency stop button pressed IN. Battery not connected properly to control box. The connecting terminals are damaged. Electric actuator in need of service or load is too high.	Charge batteries. Refer to <u>Charging the Battery</u> on page 24. Rotate RED emergency stop button CLOCK-WISE until it pops out. Reconnect the battery to the control box. Refer to <u>Charging the Battery</u> on page 24. Replace the battery pack. Refer to <u>Charging the Battery</u> on page 24. Refer to <u>Replacing a Manual/Hydraulic Pump</u> on page 37 and <u>Replacing the Electric Actuator</u> on page 37. Contact your Dealer.
Unusual noise from actuator.	Actuator is worn or damaged or spindle is bent.	Refer to <u>Replacing a Manual/Hydraulic Pump</u> on page 37 and <u>Replacing the Electric Actuator</u> on page 37. Contact your Dealer.
Lift arms will not lower in uppermost position.	Lift arms require a minimum weight load to lower from the uppermost position.	Pull down slightly on the lift arms.
Lift arms will not lower during a power retraction.	Shoulder bolt at the junction of the boom and mast may not be properly installed.	Refer to <u>Checking and Tightening Mast Pivot Bolt</u> on page 38.

NOTE: If problems are not remedied by the suggested means, please contact your dealer or Invacare.