Alliance Medical
At the Center of Care

ALLIANCE BLUE BOOK

V.9820

Alliance Medical
At the Center of Care

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Client Packet

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Dear Valued Client:

Welcome to Alliance Medical is a specialty medical equipment company, dedicated to delivering excellent products and outstanding service. If you have any questions or concerns, please call us anytime.

Rights and Responsibilities. As a healthcare client, you have a number of important rights and responsibilities. See attached client **Bill of Rights**. Your client rights will be reviewed and a copy provided.

Hours of Operation. We are open for routine business from 9:00am to 5:00pm Monday through Friday (except holidays). We are on-call 24 hours per day seven days per week and holidays. **Please call 1-888-349-2348.**

Safety Precautions. Please be sure you and your caretakers understand the operation and back-up operation of your equipment. This is essential for your safety.

Power Outages. Natural disasters, inclement weather or other emergency may cause an interruption in provision of service. If your support surface requires electricity to operate and there is a power outage, use your regular mattress and mattress overlay until power resumes. Contact Alliance Medical at **1-888-349-2348** when power resumes if assistance is needed.

Equipment Emergencies. Alliance Medical is available for equipment service 24 hours per day, seven days per week .C**all 1-888-349-2348.**

Medical Emergencies. If you have a medical emergency call your physician or 911.

Compliments/Complaints. Compliments, complaints or questions are encouraged to contact Alliance Medical directly. You may call or write our President, and/or **ACHC** (Accreditation Commission for Healthcare), if your situation is not resolved or you would like to report a compliment.

Daren Abreu

Mr. Daren Abreu President
2500 Almeda Ave #201
Norfolk, VA 23513

ACHC Contact Number
1 855-937-2242

Client Responsibilities

• To provide to the best of your knowledge, accurate and complete information.

• To follow the plan of care or service recommended by your physician.

•To care for, use as instructed and return rental equipment in good condition, normal wear and tear expected.

•To pay for the replacement costs of any equipment damaged,, destroyed or lost due to misuse, abuse or neglect.

• To notify Alliance Medical of any equipment malfunction or defect and allow company technicians to enter the premises to repair, relocate or provide substitute equipment.

• To be responsible for any payment not paid by your insurance company, except where not allowed by law.

• To make it known that you clearly understand the equipment and services being provided.

• To advise Alliance Medical of any changes in your status, including address, medical condition, etc.

•To understand that the Term of All Rentals shall repeat on the monthly anniversary date of the original rental and that no rental of less than a full month shall be allowed. Unless previously negotiated with client.

Client Bill of Rights

As a client of Alliance Medical, you have the following rights as they pertain to our role as one of your homecare providers:

- To be involved in your care and services.
- To make informed decisions and participate in your care and services at any time.
- To be involved in resolving conflicts about care and service.
- To be involved in resolving ethical issues.
- To formulate advance directives, to be involved in decisions to withhold resuscitation (provided our failure to honor any such instructions when there is doubt over the legality or enforceability or proper execution of such instruments shall not result in any liability to us or our employees, agents, officers and directors), and to otherwise discontinue treatment to the extent permitted by law.
- To be involved in decisions to forgo or withdraw life-sustaining care subject to the preceding sentence.
- To choose whether or not to participate in research, investigational or experimental studies or clinical trials.
- To have all communication needs met.
- To receive service without discrimination relative to age, sex, race, religion, disability, sexual preference, ethnic origin, or other protected status.
- To be treated professionally, courteously and with respect, and have a right to privacy and security.
- To have your privacy and property respected.
- To express complaints without fear of reprisal and to have such complaints heard, reviewed and if possible resolved.
- To expect that all information regarding yourself be treated confidentially.
- To ensure your participation in a prompt and orderly transfer to another organization or level of care or service.
- To have the following ethical issues addressed: all ethical issues in client care or services; all ethical issues in marketing, admission, transfer, discharge and billing practices; and all ethical issues in the relationship of the organization, its staff, and its governing body with other health care providers, educational institutions, and payers.
- To be informed of any financial benefit, if any, to the referring organization when the client is referred to another organization, service, or individual.
- To be apprised of your financial responsibility for any part of your care provided by us.
- To be informed of your responsibilities as a client/customer.

MEDICARE DMEPOS SUPPLIER STANDARDS

Note: This is an abbreviated version of the supplier standards every Medicare DMEPOS supplier must meet in order to obtain and retain their billing privileges. These standards, in their entirety, are listed in 42 C.F.R. 424.57(c).

1. A supplier must be in compliance with all applicable Federal and State licensure and regulatory requirements.
2. A supplier must provide complete and accurate information on the DMEPOS supplier application. Any changes to this information must be reported to the National Supplier Clearinghouse within 30 days.
3. A supplier must have an authorized individual (whose signature is binding) sign the enrollment application for billing privileges.
4. A supplier must fill orders from its own inventory, or contract with other companies for the purchase of items necessary to fill orders. A supplier may not contract with any entity that is currently excluded from the Medicare program, any State health care programs, or any other Federal procurement or non-procurement programs.
5. A supplier must advise beneficiaries that they may rent or purchase inexpensive or routinely purchased durable medical equipment, and of the purchase option for capped rental equipment.
6. A supplier must notify beneficiaries of warranty coverage and honor all warranties under applicable State law, and repair or replace free of charge Medicare covered items that are under warranty.
7. A supplier must maintain a physical facility on an appropriate site and must maintain a visible sign with posted hours of operation. The location must be accessible to the public and staffed during posted hours of business. The location must be at least 200 square feet and contain space for storing records.
8. A supplier must permit CMS or its agents to conduct on-site inspections to ascertain the supplier's compliance with these standards.
9. A supplier must maintain a primary business telephone listed under the name of the business in a local directory or a toll free number available through directory assistance. The exclusive use of a beeper, answering machine, answering service or cell phone during posted business hours is prohibited.
10. A supplier must have comprehensive liability insurance in the amount of at least $300,000 that covers both the supplier's place of business and all customers and employees of the supplier. If the supplier manufactures its own items, this insurance must also cover product liability and completed operations.
11. A supplier is prohibited from direct solicitation to Medicare beneficiaries. For complete details on this prohibition see 42 CFR § 424.57 (c) (11).
12. A supplier is responsible for delivery of and must instruct beneficiaries on the use of Medicare covered items, and maintain proof of delivery and beneficiary instruction.
13. A supplier must answer questions and respond to complaints of beneficiaries, and maintain documentation of such contacts.
14. A supplier must maintain and replace at no charge or repair cost either directly~~,~~ or through a service contract with another company, any Medicare-covered items it has rented to beneficiaries.
15. A supplier must accept returns of substandard (less than full quality for the particular item) or unsuitable items (inappropriate for the beneficiary at the time it was fitted and rented or sold) from beneficiaries.
16. A supplier must disclose these standards to each beneficiary it supplies a Medicare-covered item.
17. A supplier must disclose any person having ownership, financial, or control interest in the supplier.
18. A supplier must not convey or reassign a supplier number; i.e., the supplier may not sell or allow another entity to use its Medicare billing number.
19. A supplier must have a complaint resolution protocol established to address beneficiary complaints that relate to these standards. A record of these complaints must be maintained at the physical facility.
20. Complaint records must include: the name, address, telephone number and health insurance claim number of the beneficiary, a summary of the complaint, and any actions taken to resolve it.
21. A supplier must agree to furnish CMS any information required by the Medicare statute and regulations.
22. All supplier~~s~~ must be accredited by a CMS-approved accreditation organization in order to receive and retain a supplier billing number. The accreditation must indicate the specific products and services, for which the supplier is accredited in order for the supplier to receive payment for those specific products and services (except for certain exempt pharmaceuticals).
23. All supplier~~s~~ must notify their accreditation organization when a new DMEPOS location is opened.
24. All supplier locations, whether owned or subcontracted, must meet the DMEPOS quality standards and be separately accredited in order to bill Medicare.
25. All supplier~~s~~ must disclose upon enrollment all products and services, including the addition of new product lines for which they are seeking accreditation.
26. A supplier must meet the surety bond requirements specified in 42 CFR § 424.57 (d).
27. A supplier must obtain oxygen from a state-licensed oxygen supplier.
28. A supplier must maintain ordering and referring documentation consistent with provisions found in 42 CFR § 424.516(f).
29. A supplier is prohibited from sharing a practice location with other Medicare providers and suppliers.
30. A supplier must remain open to the public for a minimum of 30 hours per week except physicians (as defined in section 1848(j)(3) of the Act) or physical and occupational therapists or a DMEPOS supplier working with custom made orthotics and prosthetics.

MEDICARE DMEPOS SUPPLIER STANDARDS

DMEPOS suppliers have the option to disclose the following statement to satisfy the requirement outlined in Supplier Standard 16 in lieu of providing a copy of the standards to the beneficiary.

The products and/or services provided to you by (supplier legal business name or DBA) are subject to the supplier standards contained in the Federal regulations shown at 42 Code of Federal Regulations Section 424.57(c). These standards concern business professional and operational matters (e.g. honoring warranties and hours of operation). The full text of these standards can be obtained at http://ecfr.gpoaccess.gov. Upon request we will furnish you a written copy of the standards.

Community Resources

Alliance Medical is dedicated to delivering excellent specialty support surfaces and bariatric equipment. The following list identifies additional community organizations that may also be beneficial to you.

Senior Services of Southeastern Virginia

Address: 6350 N Center Dr # 5, Norfolk, VA 23502
Phone: (757) 461-9481
www.ssseva.org

Other:

American Association of Retired Persons (AARP)	**888-687-2277**
Alzheimer's Association	**800-272-3900**
ACHC-Alliance Medical Accreditation	**855-937-2242**
Medicare	**800-MEDICARE**

EQUIPMENT WARRANTY INFORMATION FORM

Every product sold or rented by Alliance Medical carries a minimum of a 1-year limited manufacturer's warranty. Alliance Medical will notify all Medicare beneficiaries of the warranty coverage, and we will honor all warranties under applicable law.

Alliance Medical will repair or replace, free of charge, Medicare-covered equipment that is under warranty. In addition, an owner's manual with warranty information will be provided to beneficiaries where this manual is available.

ELECTRICAL GROUND REPORT AND RELEASE

Dear Support Surface Provider,

I understand that prior to the set-up of the support surface product (or other medical equipment) at my home, a ground test was performed by your technician and that the preliminary test shows that my electrical outlet is not grounded properly and as such may pose a hazard to me and other family members. For this reason, you notified me that you suggest I contact an electrician to perform a more detailed test and correct any deficiencies found at my expense.

I understand the above and nevertheless instruct you to have the equipment set-up (using an adapter if necessary) which I acknowledge is a temporary situation and that I will promptly call a licensed electrician to have the problem corrected at my expense. In consideration for you setting this up under these conditions, I agree (for myself and my heirs and assigns) That I release and hold harmless your Company and its officers, employees, board members, shareholders, agents and assigns from and against any and all claims or liabilities of any nature including attorney fees and expenses arising out of or relating in any way to my failure to have properly grounded outlets including without limitation my failure to promptly have an electrician update my wiring and I recognize that you will not contact me to follow-up on this or otherwise remind me and that it is fully my responsibility and liability to implement this. By signing below, I intend to be legally bound by this release.

HIPAA NOTICE OF PRIVACY PRACTICES

Effective Date: February 15, 2003

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

This Notice is provided to you pursuant to the Health Insurance Portability and Accessibility Act of 1996 and its implementing regulations ("HIPAA"). It is designed to tell you how we may, under federal law, use or disclose your Health Information.

1. We May Use or Disclose Your Health Information for Purposes of Treatment, Payment or Healthcare Operations without Obtaining Your Prior Authorization and Here is One Example of Each:

- We may provide your Health Information to heath care professionals—including physicians, nurses, case managers and discharge planners—for purposes of providing care to you.
- We may obtain your Health Information from you and your other healthcare providers (including your physicians, nurses and facilities such as assisted living centers, nursing home or hospital) and in turn send relevant parts to insurance companies, administrators and others for purposes of obtaining authorization, billing and receiving payment for our services rendered to you, and/or for locating and retrieving our equipment rented to you.
- We may obtain and allow our legal, accounting, banking, accreditation and other advisors, consultants and entities to review relevant parts of your Health Information in connection with their engagements with us relating to our operations, growth, financings, acquisitions, sales, regulatory status, taxes and other business activities.

2.We May Also Use or Disclose Your Health Information Under the Following Circumstances without Obtaining Your Prior Authorization:

- **To Notify and/or Communicate with your Family.** Unless you tell us you object, we may use or disclose your Health Information in order to notify your family or assist in notifying your family, your personal representative or another person responsible for your care about your location, your general condition or in the event of your death. If you are unable or unavailable to agree or object, we will use our judgment in any communications with your family and others.

- **As Required by Law.**

- **For Public Health Purposes:** We may use or disclose your Health Information (a) to provide information to local, state or federal public health authorities, as required by law, to prevent or control disease, injury or disability; (b) to report suspected child abuse or neglect or domestic violence; (c) to report to the FDA problems with medical products or reactions to medications; and (d) to report diseases and infectious exposure under OHSA or other laws.

- **For Health Oversight Activities:** We may use or disclose your Health Information to health agencies and their intermediaries and agents during the course of audits, investigations, certifications and other proceedings.

- **In Response to Subpoenas or for Judicial and Administrative Proceedings:** We may use or disclose your Health Information in the course of any administrative or judicial proceeding. However, in general, we will attempt to ensure that you have been made aware of the use or disclosure of your Health Information prior to providing it to another person.

- **To Law Enforcement Personnel.** We may use or disclose your Health Information to a law enforcement official to identify or locate a suspect, fugitive, material witness or missing person, comply with a court orders or subpoena and other law enforcement purposes.

- **To Coroners or Funeral Directors:** We may use or disclose your Health Information for purposes of communicating with coroners, medical examiners and funeral directors.

- **For Purposes of Organ Donation.** We may use or disclose your Health Information for purposes of communicating to organizations involved in procuring, banking or transplanting organs and tissues.

- **For Public Safety:** We may use or disclose your Health Information in order to prevent or lessen a serious and imminent threat to the health or safety of a particular person or the general public.

- **To Aid Specialized Government Functions:** If necessary, we may use or disclose your Health Information for military or national security purposes.

- **For Worker's Compensation:** We may use or disclose your Health Information as necessary to comply with worker's compensation laws.

- **To Correctional Institutions or Law Enforcement Officials if you are an Inmate.**

The above examples are not exhaustive and your Health Information may be used for matters or purposes directly related to the above where consistent with the intent of the above categories.

3. You Should Be Advised that We May Also use or Disclose Your Health Information for the Following Purposes:

- **Change of Ownership.** In the event that our company or its assets are sold, combined or merged with another organization, your Health Information/record will become the property of the purchaser or surviving entity in a merger.

- **Providing Information to Our Plan Sponsor.** We may disclose your Health Information to our Plan Sponsor.

4. For All Other Circumstances, We May Only Use or Disclose Your Health Information After You Have Signed an Authorization. If you authorize us to use or disclose your Health Information for another purpose, you may revoke your authorization (the "Authorization") in writing at any time (but it will not be retroactive for prior disclosures).

5. Your Rights are Summarized Below:

- You have the right to request restrictions on the uses and disclosures of your Health Information. However, we are not required to comply with your request.

- You have the right to receive your Health Information through confidential means through a reasonable alternative means or at an alternative location.

- You have the right to inspect and copy your Health Information. We may charge you a reasonable cost-based fee to cover copying, postage and/or preparation of a summary.

- You have the right to request that we amend your Health Information that is incorrect or incomplete. We are not required to change your Health Information and will provide you with information about our denial and how you can disagree with the denial.

- You have the right to receive an accounting of disclosures of your Health Information made by us, except that we do not have to account for disclosures that are: authorized by you; made for treatment, payment, healthcare operations; provided to you; provided in response to an Authorization; made in order to notify and communicate with family; and/or for certain government functions.

- You have the right to a paper copy of this Notice of Privacy Practices. If you would like to have a more detailed explanation of these rights or if you would like to exercise one or more of these rights, call our main office toll-free at 800-547-3899 and ask for our Privacy Officer.

6. Our Duties.

- We are required by law to maintain the privacy of your Health Information and to provide you with a copy of this Notice and use diligent efforts to obtain your acknowledgement.

- We are also required to abide by the terms of this Notice.

- We reserve the right to amend this Notice at any time in the future and to make the new Notice provisions applicable to all your Health Information—even if it was created prior to the change in the Notice. If such amendment is made, we will immediately display the new revised Notice at our offices and provide you with a copy of the amended Notice (or at a minimum mail it to your last known address). We will also provide you with a copy, at any time, upon requrest.

7. Complaints to the Government.

You may make complaints to the Secretary of the Department of Health and Human Services (DHHS) if you believe your rights have been violated. We will not retaliate against you for any complaint you make to the government about our privacy practices.

8. Contact Information. You may contact us about our privacy practices by calling our Privacy Officer at 800-547-3899. You may contact DHHS at:

Department of Health and Human Services
200 Independence Ave, S.W.
Washington, D. C. 20201
Toll-free 877-696-6775

9. Electronic Notice. This electronic notice is also available on our web page at www.Recovercare.com.

Medicare Capped Rental and Inexpensive or Routinely Purchased Items

I received instructions and understand that Medicare defines the _____ that I received as being either a capped rental or an inexpensive or routinely purchased item.

For Capped Rental Items:

- Medicare will pay a monthly rental fee for a period not to exceed 13 months, after which ownership of the equipment is transferred to the Medicare beneficiary.
- After ownership is transferred to the Medicare beneficiary, it is the beneficiary's responsibility to arrange for any required service or repair.
- Examples of this type of equipment include: Hospital Beds, support surface mattresses and overlays, Negative Pressure wound therapy pumps, trapeze bars, patient lifts.

For Inexpensive or routinely Purchased Items:

- Equipment in this category can be purchased or rented; however, the total amount paid for monthly rentals cannot exceed the fee schedule purchase amount.
- Examples of this equipment include: low pressure and positioning pads, commodes

Purchase Option_____ **Rental Option**_____

ACKNOWLEDGEMENT AND ACCEPTED BY ELECTRONIC SIGNATURE AT TIME OF DELIVERY

Side Rail Release Form

For Patient Using Hospital Beds. I understand that it is the policy of Alliance Medical (together with its successors and assigns referred to as the Company) to provide mattress or mattress overlay support surfaces to only customers who use both side rails at all times while in bed (other than when being supervised by a caretaker who has removed one side rail in order to provide care or other appropriate services)**.**

For Patients Not Using Hospital Beds. I understand that it is the policy of the Company not to provide a mattress or mattress overlay support surfaces to any customer who is not using a hospital bed with side rails due to the very real and serious risk of falling out of bed. However, I have determined, within my rights as a patient, to use the support surface on a bed without side rails and thereby assume all risks associated with such set-up which the Company has advised me is deemed dangerous**.**

By signing below, I agree (for myself and my heirs and assigns) that I release and hold harmless the Company and its officers, employees, board members, shareholders, agents and assigns from and against any and all claims or liabilities of any nature including attorney fees and expenses arising out of or relating in any way to my failure either to agree to use a hospital bed with side rails or to use both side rails or to use both side rails where my bed has side rails. By signing DIGITAL SIGNATURE AT TIME OF DELIVERY , I intend to be legally bound by this release.

ACKNOWLEDGEMENT AND ACCEPTED BY ELECTRONIC SIGNATURE AT TIME OF DELIVERY

Acknowledgment and Receipt of Client Packet

I have read and been informed and understand the content, requirements, and expectations regarding the information discussed in this patient/client packet, and of the Home Care services provided by Alliance Medical.

ACKNOWLEDGEMENT AND ACCEPTED BY ELECTRONIC SIGNATURE AT TIME OF DELIVERY

ACKNOWLEDGEMENT AND ACCEPTED BY ELECTRONIC SIGNATURE AT TIME OF DELIVERY VIA ALLIANCE MEDICAL SERVICE ACKNOWLEDGEMENT

Client/Patient Instructions

Low Air Loss/Alternating Pressure Mattress System

There are various types of pressure relieving mattresses on the market today. Your personal needs will determine the type most appropriate for you. Alliance Medical specialist can assist you in choosing the right therapy.

DESCRIPTION A powered alternating pressure mattress designed to turn any standard hospital bed into an integrated pressure relief system. It is intended to be used for the treatment and/or prevention of pressure ulcers and other skin trauma conditions. The mattress consists of sixteen 5" air cells positioned above a 2" convoluted foam base.

MATTRESS SIZE Length: 81" x Width: 36" x Height: 7.5"

MAXIMUM WEIGHT LIMIT 350 LBS

SET UP

- Remove the standard mattress from the bed frame.
- Place the mattress replacement system directly onto the bed frame making sure the hoses are on the foot end of the bed.
- Attach 6 anchor straps with D-rings to the bed frame. The anchor straps should be attached in a manner that does not hinder any moving parts of the bed frame.
- Suspend the power control unit at the foot end of the bed.
- Connect the male/female couplers on the hoses from the mattress to the couplers on the bottom of the control unit.
- Plug the power cord into a properly grounded electrical outlet.
- Turn system on and program settings.

ADJUSTING THE POWER CONTROL UNIT

- Use "Patient Weight" key to select the appropriate patient weight. Round the patient's weight to the nearest increment.
- Use the "Cycle Time" key to choose the appropriate cycle time. Caregivers can choose between four different cycle times to customize therapy. The time displayed is for one full cycle (20 minute cycle equals 10 minutes on A, and 10 minutes on B set).

Note: There should be approximately a four-finger clearance between the foam base and the patient's sacral area.

CPR EMERGENCY DEFLATE A CPR release is located near the head of the patient on the left side of the mattress system. In the event of an emergency pull the CPR release to deflate the mattress immediately. The mattress system will be completed deflated in 15-20 seconds. To resume therapy, insert the CPR pull back into the connector and inflate the mattress.

SAFETY PRECAUTIONS

- Always leave side rails in their highest position when using a mattress replacement system.
- Always plug power control unit into a properly grounded electrical outlet to avoid shock.
- Do not immerse power control unit in any liquid.
- Do not insert any items into any opening of the power control unit. This could short internal components, which could cause fire or electrical shock.
- Do not place anything on power cord, and be sure cord is located where it ill not be hazardous.

CLEANING The coverlet and mattress replacement are designed to be cleaned with a mild detergent and damp cloth while in use. Do not use harsh chemicals, alcohol or solvents. The coverlet can be machined washed in cool water with detergent and machine dried using LOW HEAT. The mattress replacement should be wiped down as stated above.

Control Unit Wipe off any dust. If necessary, clean the housing exterior only, with a mild disinfectant solution or mild detergent and a damp cloth. Do not use harsh chemicals, cleaning solvents or aerosol cleaners. Wipe completely dry.

Client/Patient Instructions

Hospital Bed

Hospital Beds enhance home care, ease the caregiver's tasks and add comfort for the person who is ill. Most people being cared for at home need some degree of bed rest. Bed rest helps injured tissues heal, helps relieve pain, and reduces stress on weakened body systems. A hospital bed lets a person who is weak or injured elevate their head or feet to improve breathing and circulation. With a hospital bed, it can be done without physical effort or a caregiver's help. A hospital bed is higher than a regular bed, saving the caregiver's back and shoulders from strain. Also, it rolls easily on wheels.

There are three types of hospital beds available (manual, semi-electric, and electric), therefore it is important to consider both the person's and the caregiver's needs. People who cannot get out of bed, weak or injured need a semi-electric or electric bed so they can make adjustments themselves. Both the person who requires frequent repositioning and the caregiver may find a manual bed inconvenient; however, the choice may be limited to what your insurance will cover, as determined by your diagnosis.

General Information

1. Place your hospital bed where it is centrally located, yet can still provide privacy and quiet when required.
2. Place the bed away from the walls so it's easy to reach from either side.
3. There are three (3) types of hospital beds available: manual, semi-electric and electric. Be sure you know which type you have and exactly how it works.
4. Our Delivery Technician will review manufacturer's instructions with you. Be sure you read and understand all instructions.
5. Wipe down your hospital bed WEEKLY with a cloth dampened with soap and water.
6. Please call us for any service repairs, malfunctions or questions.
7. Please notify us if your equipment is no longer needed and it will be picked-up as soon as possible.

Safety

1. Keep a bedside call bell and a telephone with an emergency number near the bed. In an emergency, a bedridden person must be able to get help.
2. Lock the wheels to keep the bed securely in place. Unlock the wheels only when you're moving the bed; after you reposition the bed, RELOCK the wheels.
3. To prevent shocks, always unplug an electric bed before washing it or the mattress.
4. Know how to use the emergency crank. Most electric beds have a manual emergency crank to adjust the bed if a malfunction or power failure leaves it stuck on one position.
5. NEVER allow children to play with the bed controls, or on or around the bed unattended.
6. KEEP the side rails up. Side rails prevent injury that may result from falling out of bed. The side-rails also give the person something to grasp when changing position, call a family member or your doctor for help.

Med-Aire Melody Alternating Pressure Low Air Loss Mattress Replacement System

OPERATOR'S MANUAL

Item # 14026

www.drivemedical.com

drive™

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IMPORTANT SAFEGUARDS

When using electrical products, especially when children are present, basic safety precautions should always be followed, including the following

READ ALL INSTRUCTIONS BEFORE USING

DANGER

To reduce the risk of electrocution:

- Always unplug this product immediately after use.
- Do not use while bathing.
- Do not place or store product where it can fall or be pulled into a tub or sink.
- Do not place or drop into water or other liquids.
- Do not reach for a product that has fallen into water. Unplug immediately.

WARNING

To reduce the risk of burns, electrocution, fire or injury to persons:

- A product should never be left unattended when plugged in.
- Close supervision is necessary when this product is used by, on, or near children or invalids.
- Use this product only for it intended use as described in this manual.
  Do not use attachments not recommended by the manufacturer.
- Never operate this product if it has a damaged cord or plug, if it is not working properly, if it has been dropped or damaged, or dropped into water. Return the product to a service center for examination and repair.
- Keep the cord away from heated surfaces.
- Never block the air openings of the product or place it on a soft surface, such as a bed or couch, where the air openings may be blocked. Keep the air openings free of lint, hair and the like.
- Never drop or insert any object into any opening or hose.
- Do not use outdoors or operate where aerosol (spray) products are being used.
- Connect this product to a properly grounded outlet only. See Grounding Instructions.

GROUNDING

Before any connection is made, make certain that this product is connected to a protective earth conductor via the three-wire power cord; the three-blade plug should be inserted only into a socket outlet that provides a protective earth contact.

SAVE THESE INSTRUCTIONS

STATEMENTS & SYMBOLS

Note, caution, warning & danger statements

NOTE

Indicates some tips or some information users should be aware of.

CAUTION

Indicates correct operating or maintenance procedure in order to prevent damage to or destruction of the equipment or other property.

WARNING/DANGER

Calls attention to a potential danger that requires correct procedures or practices in order to prevent personal injury.

Others

Symbols on the printed label on the outside package box are as below:

 Grounding Terminal

 Always read the operating instructions before use.

SYMBOLS

Symbol	Meaning
	Power ON.
	Power OFF.
	Series number.
	Class II Medical electric equipment.
	Type BF applied part.
	Refer to instruction manual/ booklet.
IP21	Degree of protection against harmful ingress of water and particulate matter.

INTRODUCTION

INDICATIONS

The Med Aire Melody Alternating Pressure and Low Air Loss Mattress Replacement System, item # 14026, is indicated for the prevention and treatment of any and all stage pressure ulcers when used in conjunction with a comprehensive pressure ulcer management program. It can be used in a hospital, homecare, or other healthcare environment.

PRODUCT FUNCTIONS

CONTROL UNIT

The functions of the Med Aire Melody control unit are described below. Please refer to the figures of the Med Aire Melody control unit in Fig A.

Power Switch (1)
Turn ON/OFF the power switch, the control unit will start/stop operation.
Pressure-adjust Knob (2)
Determine the patient's weight and set the control knob to that weight setting on the control unit.
Normal Pressure Indicator (3)
A visible indicator (green) tells the pressure has reached a preset or user-defined level.
Low Pressure Indicator (4)
A visible indicator (orange) warns the pressure is below a preset or user-defined level.
Static/Alternating control (5)
Press ON to set the air mattress to static mode or OFF to set to alternating pressure mode.

1. Power Switch
2. Pressure-adjust Knob
3. Normal Pressure Indicator
4. Low Pressure Indicator
5. Static Control

Figure A

MATTRESS

The Med Aire Melody System comes with an air cell mattress that provides low air loss, alternation and static pressure redistribution therapy. It is composed of a combination of materials including Nylon PVC and PU. Please refer to the specifications section for details.

ENTRAPMENT GUIDELINES

The use of Bed Rails is dependent on the setting as well as the facilities protocols. Drive DeVilbiss does not make product recommendations for any given patient. Those decisions are the responsibility of the health care facility and/or health care professional(s) familiar with each patient's unique requirements. Drive DeVilbiss support surfaces are made to fit standard hospital and health care facility beds. However, variations in bed rail dimensions, mattress compression based on patient size and shape, conditions such as dementia, seizure disorders, sleeping problems, incontinence, and restlessness could create an entrapment risk. Proper patient assessment and monitoring, and equipment use and maintenance are required to reduce entrapment risk.

INSTALLATION INSTRUCTIONS

Step 1

Place the mattress flat on the bed frame. The inflation tube should be towards the foot end so that it can be connected to the inflation nozzles on the control unit.

Step 2

You may place a thin cotton sheet over the quilted mattress top cover.

Step 3

Hang the control unit over the frame or board at the foot end of the bed using the hooks attached to the control unit. Make sure the control unit is secured.

Step 4

Connect the inflation tubes from the mattress to the control unit's inflating nozzles. Make sure they are properly attached.

NOTE!

Make sure the air hoses are not kinked or tucked under the mattress. Also check to ensure the CPR valves are properly attached.

Step 5

Plug the power cord into an electrical outlet with grounded AC power. This product should be grounded. The power cord has a grounding wire with a grounding pin.

NOTE!

Before inserting the plug into the outlet, make sure the voltage is compatible. Also make sure this product is well grounded.

Step 6

Turn on the power by pressing the power switch on the control unit. Proceed to the Operating Instructions section on page 7.

OPERATING INSTRUCTIONS

Step 1

Turn on the control unit power. The indicator of the power switch will come on. The control unit will start to blow air into the mattress.

Step 2

The Low Pressure indicator (orange) will come on as inflation is underway.

Step 3

Press the Static button for a quicker inflation.

Step 4

When the pressure reaches the preset level, within approximately 30 minutes, the Normal Pressure indicator will come on, and the Low Pressure indicator will turn off.

Step 5

Patients can directly lie on the mattress or cover with a sheet and tuck loosely to increase the comfort of the patient.

Step 6

Determine the patient's weight and set the control knob to that weight setting on the control unit.

Step 7

Press the Static button to shift between Alternating mode and Static Mode. When in Static mode, and the Static indicator will come on. The static mode will be started within approximately 6 minutes. In Alternating Pressure mode, the air cells will alternate in 10 min cycles.

NOTE!

In static mode, the mattress provides a firm surface that makes it easier for the patient to transfer or reposition. The static mode will help ensure the patient does not bottom out when in a sitting position.

DISCONNECT DEVICE

To fully disengage the power to the unit, disconnect the power cord from the AC inlet.

WARNING

- The control unit provided should only be used with the air mattress provided.
- Do not expose the product to lint, dust and sun light to prevent damage of the product.
- Keep the product away from the heat and moisture.
- Keep the product away from pets and children.

ENVIRONMENT REQUIREMENTS

- Operation Temperature: 50°F~95°F (10°C~35°C)
- Storage and Transport Temperature: 5°F~122°F (-15°C~50°C)
- Operation Humidity: 20%~80% non-condensing

CLEANING GUIDELINES

- Use a neutral detergent to clean surface of control unit and mattress; disinfectant products may be used according to the manufacturer's protocol. Do not use phenolics on this product.
- Do not immerse the control unit in water.
- Do not heat or steam in autoclave.
- Be sure to fully air dry the mattress and cover after cleaning and before use.
- After using for some time (~ 3 months), clean the air filter cotton inside the enclosure base, steps as below:

  1) Take out air filter cover and air filter cotton.

  2) Wash air filter cotton with clean water, if the dirt sticks to the filter, soak the air filter cotton in the water.

  3) Dry the air filter cotton then put it back to the air filter cover.

MAINTENANCE

- Make sure the control unit is in good condition by checking if the indicators illuminate when the power is first turned on.
- Power supply cord can be replaced by SERVICE PERSONNEL.

Power supply Information: Non-detachable cord , 18AWG/2C, Rated 300V, 105°C.

⚠ WARNING

For safety reasons, only qualified service personnel should open the equipment.

MANUFACTURER will provide circuit diagrams, component part lists, descriptions, calibration instructions to assist to SERVICE PERSONNEL in parts repair.

LAY OPERATOR or LAY RESPONSIBLE ORGANIZATION should contact the MANUFACTURER or the MANUFACTURER'S representative for assistance in setting up, using or maintaining the product and to report unexpected operation or events.

MAINTENANCE TROUBLE SHOOT / TECHNICAL SPECIFICATIONS

Trouble Signal		Failure Cause	Fault Handling
No air output	Power indicator is ON.	The inflation tube is not connected to the control unit.	Connect the air tube.
		The silicone tubes inside the control unit are disconnected.	Contact Service Personnel.
	Power indicator is OFF.	No power.	Turn on power switch
Incomplete inflation	Mattress too soft.	Small hole at the air cell, or mattress life comes to its end.	Replace the air cell or the whole mattress.
		Air knob indicate at “MIN” location.	Turn the air tube at the right to give max pressure .

PACKAGE CONTENT LIST

- Control Unit x 1
- Mattress Unit x 1
- User Manual x 1

TECHNICAL SPECIFICATIONS

INPUT RATING: 120VAC, 60Hz, 1A FUSE RATING: 250V, 1A

Control Unit	Mattress
Item #: Melody 14026	Item #: 14508M
Power Supply: 120V/60Hz	Size: 80’’L x 35’’W x 8’’H
Air output: 8 liter/min	Top Cover Material: Nylon/PU
Pressure range: 30-60 mmHg	Air Cells Material: Nylon/PVC
Cycle Time: 10 min	Bottom cover material: Nylon/PVC
Size: 11’’ x 5.9’’ x 3.5’’	# of aircells: 20
Weight: 1.4kg (3lbs)	CPR Valve? YES

LIMITED WARRANTY

Your Drive branded product is warranted to be free of defects in materials and workmanship for 1 year from the date of purchase for the original consumer purchaser.

This device was built to exacting standards and carefully inspected prior to shipment. This Limited 1 Year Warranty is an expression of our confidence in the materials and workmanship of our products and our assurance to the consumer of years of dependable service.

This warranty does not cover device failure due to owner misuse or negligence, or normal wear and tear. The warranty does not extend to non-durable components, such as rubber accessories, casters, and grips, which are subject to normal wear and need periodic replacement.

If you have any questions about your Drive device or this warranty, please contact an authorized Drive dealer.

drive™

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Port Washington, NY 11050
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www.drivemedical.com
REV 1.07.24..17

Med Aire Plus 8" Alternating Pressure and Low Air Loss Mattress Replacement System

OPERATOR'S MANUAL
ITEM #14029 (control unit 14029XP)

Med Aire Plus 8" Alternating Pressure and Low Air Loss Mattress Replacement System with Defined Perimeter

OPERATOR'S MANUAL
ITEM #14029DP (control unit 14029XP)

www.drivemedical.com

TABLE OF CONTENTS

NOTE, CAUTION, WARNING & DANGER STATEMENTS

A) NOTE!!:
Tips or information users should be aware of.

B) CAUTION:
Correct operating or maintenance procedures to be carefully followed to prevent damage to or destruction of the equipment or other properties.

C) WARNING/DANGER:
Attention has to be paid to a potential danger that requires correct procedures or practices in order to prevent personal injury.

D) SYMBOLS:
Symbols on the printed label on the outside package box are as below:


Grounding Terminal


Type BF Equipment


Always read the operating instructions before use.

INTRODUCTION

This manual should be used for the initial set up of the system and for reference purposes.

GENERAL
Drive Support Surfaces are high quality and affordable air replacement mattress systems. Specifically designed to redistribute pressure, these systems offer a solution for the prevention and treatment of pressure ulcers and offers an optimal solution for pressure redistribution and microclimate control.

The 14029 series has been tested and certified for the following standards:

UL 60601-1
CAN/CSA C22.2 No. 601.1

INTENDED USE
Drive Support Surfaces are designed and constructed to reduce the incidence of pressure ulcers while optimizing patient comfort. It is also indicated for:

- Individual home care and long-term care settings
- Pain management as prescribed by a physician.

CONTRAINDICATION
Patient conditions for which the application of pressure redistributing therapy on an alternation system is contraindicated are as follows:

- Cervical or skeletal traction
- Unstable spinal cord injuries

PACKAGE CONTENT

Check your package contents. If any of the following items should be missing or damaged, please contact your local dealer or service center for immediate replacement.

Control unit
Please be sure you have received the identical control unit to the one purchased. Control unit functions vary from model to model. This manual is for use with control unit 14029XP.

MATTRESS

Item #14029
The pressure redistribution mattress provided includes cell-on-cell design constructed of a base and air inflation cells. The air cells are 8” in height with a static 4” air cell base.

Item #14029DP
The pressure redistribution mattress provided includes cell-on-cell design constructed of a base and air inflation cells. The air cells are 8” in height with a static 4” air cell base. 10 " deep static perimeters surround the length of the mattress.

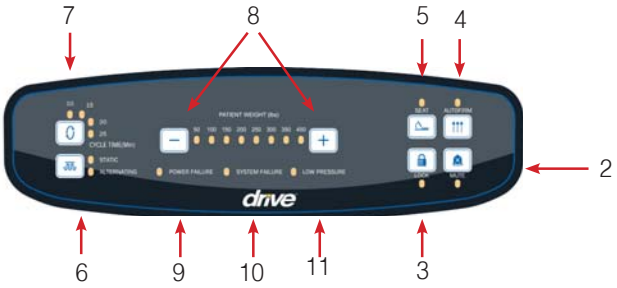
COVER SHEET
The cover provided is a 4 way stretch, low shear, vapor permeable, quilted cover easily zippered for removal and cleaning.

MANUAL
Please be sure to read the manual in its entirety before using the product.

PRODUCT FUNCTIONS

Control unit

Below are the functions of the 14029XP Control unit to be used with your Pressure Redistribution Mattress.



1. Power ON/OFF Switch
2. MUTE Button
3. PANEL LOCK Button
4. AUTOFIRM Button
5. SEAT Button
6. STATIC/ALTERNATING Button
7. CYCLE TIME Button
8. WEIGHT SETTING SELECTION Keys
9. POWER FAILURE indicator
10. SYSTEM FAILURE indicator
11. LOW PRESSURE indicator

Power Switch (1)

The POWER switch is at the lower right side of the control unit. Turning the POWER switch ON/OFF will start/stop the control unit. The switch lights up when the power is ON, and extinguishes when the power is OFF.

MUTE Button (2)

The audible/visible alarm turns on either when the pressure is low or the system fails to alternate. Press the Mute button to mute the audible alarm, and the MUTE indicator will light up (amber). The alarm indicator will continue flickering. Re-press the Mute button to re-activate the audible alarm and to extinguish the MUTE indicator.

PANEL LOCK Button (3)

Press the PANEL LOCK button and hold it for 3 seconds to LOCK or UNLOCK the panel. The PANEL LOCK indicator lights up (amber) when the panel is locked. The panel will automatically lock up if no operations are used for over 30 seconds.

AUTOFIRM Button (4)
Press the AUTOFIRM button to set AUTOFIRM mode to quickly inflate the air mattress to the maximum pressure which facilitates nursing and caring. The AUTOFIRM indicator lights up (amber) when the system is in AUTOFIRM mode. The system will automatically return to the previous mode 30 minutes after the AUTOFIRM mode is in operation. It is also possible to cancel AUTOFIRM mode by pressing the AUTOFIRM button.

SEAT Button (5)
Press the SEAT button to set SEAT (FOWLER) mode to inflate all cells and increase the pressure by 10mmHg. The SEAT indicator lights up (amber) when the system is in SEAT (FOWLER) mode. To cancel SEAT (FOWLER) mode, press the SEAT button.

STATIC/ALTERNATING Button (6)
Press the STATIC/ALTERNATING button to operate the air mattress in STATIC mode or ALTERNATING PRESSURE mode. The amber STATIC indicator (or the green ALTERNATING indicator) turns on to indicate the corresponding operation mode.

CYCLE TIME Button (7)
The CYCLE TIME button can be used to select the appropriate cycle time of the inflation modes. There are 4 different cycle times available: 10, 15, 20 and 25 minutes.

WEIGHT SETTING Buttons (+) and (-) (8)
The WEIGHT SETTING Buttons (+) and (-) can be used to adjust the pressure of the inflated cells based on the patient's weight. As the weight setting increases, the pressure level indicator lights up (green) with each added level of pressure. Eight pressure levels are available and indicated by increasing green light indicator.

NOTE!! Weight capacities vary between models. Please refer to your item number below for corresponding weight capacity.

Item #	Weight Capacity
14029	450 lbs
14029DP	450 lbs

POWER FAILURE indicator (9)
This indicator light (red) flickers when there is no power input to control unit.

SYSTEM FAILURE indicator (10)
This indicator light (red) flickers when the system fails to alternate.

LOW PRESSURE indicator (11)
This indicator light (red) flickers when the pressure is below the pre-defined level.

INSTALLATION

Place the mattress flat on the bed frame. The inflation tube should be towards the foot end so that it can be connected to the inflation nozzles on the control unit. See figure below for reference.

Step 2
Cover the mattress with a cotton sheet.

Step 3
Hang the control unit over the frame or at the foot board of the bed. Make sure the control unit is secured.

Step 4
Connect the inflation tubes from the mattress to the control unit's inflating nozzles. Make sure they are properly attached.

> **NOTE!**
> Make sure the air hoses are not kinked or tucked under the mattress. Also check if the CPR valve is properly attached. The CPR strap is located at the head end right-hand side of the mattress as you are lying down. See photo above.

Step 5
Plug the power cord into an electrical outlet with grounded AC power.

> **NOTE!**
> This product should be grounded. The power cord has a grounding wire with a grounding pin. This three-pronged plug must be plugged properly into an outlet and grounded as shown in the figure in the Grounding Instructions section. See page 9 for reference.

Step 6
Turn on the power by pressing the power switch at the right side of the control unit. Proceed to the OPERATION section.

GROUNDING INSTRUCTIONS

This product should be grounded. In the event of a short circuit, grounding reduces the risk of electric shock by providing an escape wire for the electric current. This product is equipped with a cord that contains a grounding wire and with a grounding plug.

DANGER - Improper use of the grounding plug can result in the risk of electric shock.

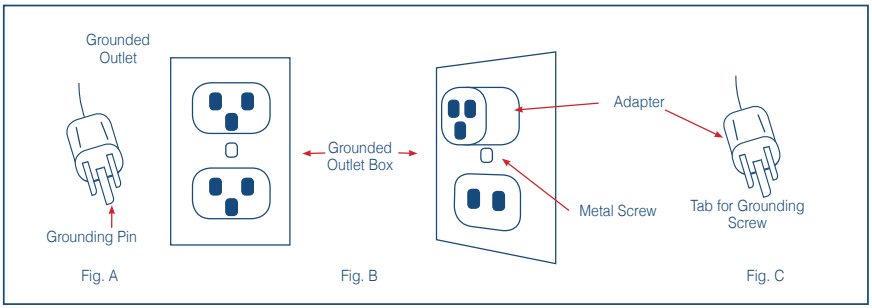
When repair or replacement of the cord or plug is necessary, be sure not to connect the grounding to either flat blade terminal.

NOTE!!
The grounding wire is the green wire (with or without yellow stripe).

Consult a qualified electrician or serviceman if the grounding instructions are not completely understood, or if in doubt as to whether the product is properly grounded.

The grounding plug looks like the plug in figure A below. A temporary adapter that looks like the adapter illustrated in figure B and C may be used to connect the grounding plug to a 2-pole outlet as in figure B if a properly grounded outlet is not available. The temporary adapter should be used only until a properly grounded outlet (figure A) can be installed by a qualified electrician. The green colored rigid ear, lug, tab or the like extending from the adapter must be connected to a permanent ground such as properly grounded outlet box cover.

If it is necessary to use an extension cord, use only a 3-wire extension cord that has a 3-blade grounding plug and a 3-slot receptacle that will accept the plug on the product.



OPERATION

Always read the operating instructions before use.

GENERAL
This product is designed to provide maximum comfort and therapeutic levels of pressure redistribution. Please be sure to review this manual for appropriate use and optimal benefit.

Product Use:
DO NOT use any other control unit with this mattress system than the one provided by Drive. Control units with pressure capacities over 120mmHg may be dangerous and cause cell puncture.

DO NOT change any component by yourself. If there is need for replacement or repair, always contact your authorized Drive dealer or service center.

Patient Use:
When the NORMAL PRESSURE indicator lights up (green), the pressure in the mattress has reached the pre-defined level, and the patient can then be placed on the mattress.

Cover the mattress with a cotton sheet to avoid direct skin contact and improve the patient's comfort level.

An even surface will make the transfer or reposition of the patient easier. STATIC mode provides an even support surface for the patient.

The STATIC mode and SEAT (FOWLER) mode also prevent the patient from bottoming out when the patient is in a seated position.
See the figure at right.

14029XP

- **Turn the power ON**

A BEEP sound will begin the operation. The indicator of the power switch will light up (green), and the control unit will begin to pump air into the mattress. The LOW PRESSURE indicator (red) will flicker as the inflation of the mattress begins.

> **NOTE!!**
> The audible alarm will not be heard when inflating the mattress for the first time.

- **Automatic STATIC mode**

The control unit will automatically enter STATIC mode when it is turned on. Once the pressure reaches 50 mmHg, the unit will return to the previously selected mode, if applicable.

> **NOTE!!**
> If the pressure does not reach 50 mmHg 40 minutes after the control unit is turned on, the audible alarm will start to beep, and the LOW PRESSURE indicator will continue flickering.

- **Mode selection**

Press the STATIC/ALTERNATING button to change the function mode to ALTERNATING PRESSURE or STATIC as desired.

> **NOTE!!**
> It is recommended to always keep the control unit in the ALTERNATING PRESSURE mode when the patient is in a lying position for more efficient pressure ulcer prevention and treatment.

> **NOTE!!**
> The STATIC mode provides an even support surface that will make the patient transfer or reposition easier. The STATIC mode or SEAT (FOWLER) mode also prevents the patient from bottoming out when in the seated position.

- **Weight Setting Selection**

The pressure of the mattress can be adjusted by choosing the patients' corresponding weight setting using the weight setting buttons (+) and (-). Use the weight setting buttons to select the desired level. Pressure levels will range from 10 to 50 mmHg.

> **NOTE!!**
> Pressing the [+] key will bring the pressure one level higher, and the [-] key will bring the pressure one level lower. It is recommended to follow the HAND CHECK procedure as demonstrated in page 10 to decide the appropriate pressure level.

- **Automatic pressure control**

During normal operation, 14029XP control unit will monitor pressure changes and keep it constant at the set level. When the pressure is below the set pressure level, the control unit will automatically start

to inflate the mattress. The control unit will stop when the set pressure level is reached.

NOTE!!
If the pressure is consistently low, the audible alarm will beep and its indicator will light up to attract attention. If there should be obvious leakage, for example caused by loose connection of tubes, the audible/visible alarm will be activated.

- **For nursing and caring convenience**

Press the AUTOFIRM button to automatically inflate the mattress to the maximum level (above 50 mmHg) for about 30 minutes. After 30 minutes, the control unit will return to the previously set weight setting and pressure level.

- **Placing the patient in the seated (Fowler) position**

Press the SEAT button for support during the seated position. Air pressure will increase by 10mmHg to prevent the patient from bottoming out when in a seated position.

- **To silence the alarm**

If the pressure drops below the pre-defined level, the LOW PRESSURE indicator will light up accompanied by a BEEP alarm tone. If the control unit fails to alternate in the ALTERNATING PRESSURE mode, the SYSTEM FAILURE indicator will light up accompanied by a BEEP alarm tone. If the control unit loses power input, the POWER FAILURE indicator will light up accompanied by a BEEP alarm tone. For either scenario, pressing the MUTE button will silence the alarm, but the indicator will continue flickering. Repressing the MUTE button will reactivate the audible alarm.

CPR function

When there is an emergency to perform CPR on the patient, pull the CPR strap to release the air immediately from the mattress.

The CPR strap is located at the head end right-hand side of the mattress as you are lying down.

CLEANING

In this section, the procedures to clean and decontaminate the control unit will be described. It is important to follow these procedures before using the system.

It is recommended to clean the cover and mattress system once a week to reduce contaminants.

Control unit

It is important to follow the cleaning procedures before using the system.

Wipe down the Control Unit with a damp cloth pre-soaked with a mild detergent. Avoid contact with dust and proximity to dusty areas. Make sure that any cleaning agents you use will not harm or corrode the plastic casing on the Control Unit . If your doctor or medical facilities have other special cleaning instruction, please follow the professional instruction.

CAUTION: Do not immerse or soak Control Unit.

WARNING: Do not remove the housing of the Control Unit to avoid electrical shock. All disassembly or repair should be done by professional technicians.

CAUTION: The Control Unit does not need oil lubrication, please do not disassemble the system.

CLEANING

Mattress/ Cover

Cover Material: • **Polyfiber/ Polyurethane Stretch**	

Wipe down the mattress unit with a damp cloth pre-soaked with warm water containing a mild detergent. Approved intermediate level disinfectants may be used according to the cover material. Please refer to the chart below for recommended disinfectants. The mattress top cover can be completely removed for laundry with water temperature up to 95°F; however, it is recommended that the user still check with local policy to determine the time/temperature ratio required to achieve thermal disinfection. After cleaning, please avoid dust and proximity to dusty areas. All parts should be air dried thoroughly before use.

	Polyfiber/Polyurethane Stretch Cover	**Vinyl Cover**
Recommended	Quaternary	Phenolics
Acceptable	Chlorine Bleach (1:10)	Quaternary, Chlorine Bleach (1:10)
Not Recommended	Phenolics	Quat/Isopropyl

CAUTION: After cleaning, dry the mattress without direct exposure of sunlight.

General

- Check the power cord and plug to see if there any signs of wear or damage.
- Check the mattress cover for signs of wear or damage. Make sure the mattress cover and tubes are connected together correctly.
- Plug in the control unit and check the airflow from the hose connection port. The airflow should alternate between ports every half-cycle time during alternating pressure mode.
- Check the air hoses to see if there are kinks or breaks. For replacement, please contact your local agent or dealer.
- Make sure the mattress tube is well connected.
- Check the control unit and make sure both power and power indicator are off when the switch is turned off.

Low pressure

Examine if there is air leakage between the control unit and the mattress connections or from the air mattress tubes.

- Check connectors between the air mattress and control unit. If there is any disconnection, please reconnect it.
- Check the CPR Valves. Be sure their outlets are sealed.
- Check the air-connecting tubes. Be sure no single cell is broken.
- Set the unit to the highest weight setting. Keep the tubes fully inflated and inspect for air leakage from cells. Make sure that no leakage occurs. If any leakage occurs, please contact your local agent or dealer.

STORAGE

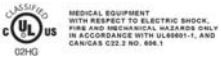
- Lay the mattress out flat and upside down.
- Roll from the foot end towards the head end. The foot-end strap can then be stretched around the rolled mattress to prevent unrolling.
- Do not fold, crease or stack the mattress.
- Follow your local regulations for proper disposal of the control unit.

TROUBLESHOOTING

PROBLEMS	SOLUTIONS
The control unit doesn't work	1. Check if the plug is inserted firmly into the outlet. 2. Turn on the power switch again. • If the power indicator is ON and the control unit still doesn't work, contact your local dealer immediately. • If the power indicator is OFF, there may be a faulty outlet. Try to connect the power cord to another outlet. If the power indicator is still OFF, contact a qualified electrician for main power check.
Incomplete inflation (Low Pressure)	1. For a quick check, adjust the pressure to Firm. 2. Check to see if the tubes connected to the control unit are twisted or there is any leakage occurring. • Always keep the tubes straight. • Change tubes if there is any leakage. • Ensure the CPR valves are closed. Ensure every single cell is not broken.
Slow air flow	A dirty filter may decrease the air flow. Wash the filter with mild detergent to keep it clean. • Check the air filter at the back of the control unit at least once a month.

SPECIFICATIONS

SYSTEM

ITEM	SPECIFICATIONS
Classification	Class I; IPX0; AP/APG NO; Type BF 
Applied Part	Mattress
Input Rating	AC 120V 60Hz; 12W, 1A
Fuse Rating	250V, 1A
Pressure Range	20 ~ 60 mmHg
Cycle Time	14029XP 10, 15, 20, 25 minutes
Dimensions (Control unit)	369 x 135 x 250 mm (14½" x 5" x 10")
Weight (Control unit)	14029XP: 3.9 kg (8 lbs)
Environment Requirements	Temperature: Operation 50°F~95°F (10~35°C) Storage 5°F ~122°F (-15~50°C) Shipping 5°F ~158°F (-15~70°C) Humidity: Operation 20%~80% non-condensing Storage 10%~90% non-condensing
Safety Standards	 UL, c-UL (With respect to electric shock, fire and mechanical hazards only)

* Due to the continual development of the above products, specifications are subject to change without prior notice.

NOTE!
The above specifications are also applicable to those areas operating with the same power supply range.

AP/APG NO indicates the device is NOT suitable for use in the presence of flammable anesthetic mixture with air or flammable anesthetic mixture with oxygen or flammable anesthetic mixture nitrous oxide. The mattress can be used in the presence of oxygen administered by nasal cannula or face mask.

Type BF symbol indicates the degree of protection against electric shock.

Instructions or reference information for repair of equipment parts are provided by the manufacturer, please contact local dealer for further information.

Owner's Operator and Maintenance Manual

IVC™ Bed Series

Full Electric Beds
Semi-Electric Beds
Manual Beds

For additional informatiin on this product, and to download the complete user manuial please visit *Invacare.com*

DEALER: This manual MUST be given to the user of the product.

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

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

INVACARE®

Yes, you can.®

⚠ WARNING

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.

The initial set up of this bed must be performed by a qualified technician.

Procedures other than those described in this manual must be performed by a qualified technician.

For Dealers Only - Set-up and Assembly Instructions are in the rear of this manual. These procedures must be performed by a qualified technicians only.

⚠ ACCESSORIES WARNING

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.

SPECIAL NOTE

For your convenience, the March 2006 version of the FDA's bed safety guidelines are provided in the Appendix. The information from the FDA's brochure, published by Hospital Bed Safety Workgroup, is reproduced verbatim, the latest revision of which is available at http://www.fda.gov.

REGISTER YOUR PRODUCT

The benefits of registering include:

1. Safeguarding your investment.
2. Ensuring long-term maintenance and servicing of your product.
3. Receiving updates with product information, maintenance tips and industry news.

Register ONLINE at warranty.invacare.com

Please have your model number and purchase date available to complete your registration.

Any registration information you submit will only be used by Invacare Corporation and protected as required by applicable laws and regulations.

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

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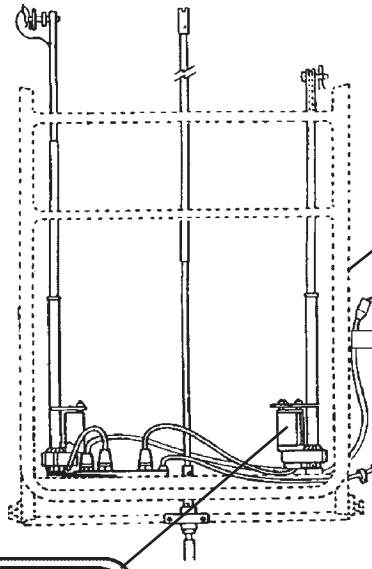
LABEL LOCATIONS

NOTE: Underside of bed shown.



Serial number located here.

Pendant Cord

Power Cord

⚠ WARNING

REMOVE PENDANT WHEN NOT IN USE AND STORE OUT OF REACH OF CHILDREN.

Label P/N - 1118366 - Rev A 03/03

⚠ CAUTION

CLEANING INSTRUCTIONS

See Owner's Manual

1. Unplug product before washing.
2. Make sure all electrical parts (motors, junction box and pendant) are not damaged and that all connection ports are plugged.
3. Disinfect and wash all components.
4. DO NOT power wash or steam clean. Use household water pressure.
5. Rinse thoroughly with water (maximum temperature 110°).
6. Dry all components before storing.

P/N 1116654

CAUTION

KEEP SWITCH CORD CLEAR OF MOVING PARTS

⚠ WARNING

Close cover when not in use otherwise personal injury may occur.

1117179 Rev A

NOTE: This warning label is located on the gearbox (not shown).

SPECIAL NOTES

Signal words are used in this manual and apply to hazards or unsafe practices which could result in personal injury or property damage. Refer to the table below for definitions of the signal words.

SIGNAL WORD	MEANING
DANGER	Danger indicates an imminently hazardous situation which, if not avoided, will result in death or serious injury.
WARNING	Warning indicates a potentially hazardous situation which, if not avoided, could result in death or serious injury.
CAUTION	Caution indicates a potentially hazardous situation which, if not avoided, may result in property damage.

NOTICE

THE INFORMATION CONTAINED IN THIS DOCUMENT IS SUBJECT TO CHANGE WITHOUT NOTICE.

Pendant Operation

A safety feature of this product includes protection against overheating caused by excessive or extended periods of operation. Depending on the duration, this includes multiple or repeated adjustments or the use of multiple functions at one time. To assure trouble free operation, ALWAYS allow a slight pause between multiple adjustments and avoid pressing more than one function button at a time. If thermal protection activation should occur, the bed will not respond to pendant commands. Given this situation, release the pendant button and allow the bed unit to sit for several minutes. This will allow the protection function time to reset and restore bed function. Depending on the severity of the initial overheating, this could take up to 30 minutes.

⚠ WARNING

On Full Electric beds, the Hi/Lo crank MUST be removed before the bed is used. Failure to remove the crank may cause damage or personal injury.

TYPICAL PRODUCT PARAMETERS

	5410IVC	5310IVC	5307IVC
DESCRIPTION	Full Electric	Semi-Electric Single Crank Hi/Lo	Manual Single Crank-Hi/Lo
SHIPPING WEIGHT	176.5 lbs (80.1 kg)	172 lbs (78.0 kg)	161.5 lbs (73.3 kg)
OVERALL LENGTH	88 in. (223.4 cm)		
OVERALL HEIGHT	36 in. (91.4 cm)		
SPLIT SPRINGS TO ENDS HEAD FOOT	 43 in. (109.2 cm) 45 in. (114.3 cm)		
ADJUSTMENT RANGE DECK BED END	 15 in. (38 cm) ± 2 in. to 23 in. (58.3 cm) ± 2 in. 26 ¼ in. (66.7 cm) to 33 ¾ in. (85.7 cm)		

	BED COMPONENTS				
	FULL ELECTRIC		SEMI-ELECTRIC		MANUAL
BED NAME (MODEL NUMBER)	5410IIVC	5411IVC Canada	5310IVC	5311IVC Canada	5307IVC
HEAD SPRING (5000IVC)	X	X	X	X	X
UNIVERSAL BED ENDS (5301IVC)	X	X	X	X	X
FOOT SPRING THREE MOTORS (5490IVC)	X				
FOOT SPRING THREE MOTORS CANADA (5491IVC)		X			
FOOT SPRING TWO MOTORS (58901IVC)			X		
FOOT SPRING TWO MOTORS CANADA (5891IVC)				X	
FOOT SPRING TWO CRANK (5770IVC)					X

SECTION 1—GENERAL GUIDELINES

⚠ WARNING

SECTION 1 - GENERAL GUIDELINES contains important information for the safe operation and use of this product.

Operating Information

DO NOT use near explosive gases.

Keep the product a minimum of 12" away from any direct heat source.

Close supervision is necessary when this product is used by or near children or people with disabilities.

Check all parts for shipping damage and test before using. In case of damage, DO NOT use. Contact a qualified technician for further instruction.

After any adjustments, repair or service and before use, make sure all attaching hardware is tightened securely.

DO NOT let any individual underneath the bed or in between the raised bed frame components at anytime.

When bed is not to be used for an extended period, unplug electric bed from the wall outlet.

If a liquid is spilled in or around the electric bed, unplug the electric bed before cleaning. Clean up the spill and allow the electric bed or the area around the electric bed to dry thoroughly before using the electric controls again.

The manual/electric bed is NOT designed to be used as a patient transport. When transporting a patient, use an approved patient transport. Otherwise, injury or damage may result.

Body weight should be evenly distributed over the surface of the bed. DO NOT lay, sit or lean in such a way that your entire body weight is placed only on raised head or foot sections of the bed. This includes when assisting the user in repositioning or transferring in or out of bed.

When operating/moving manual/electric beds, always ensure that the individual utilizing the bed is positioned properly within the confines of the bed. DO NOT let any extremities protrude over the side or between the bed rails when performing these functions.

After the manual/electric bed has been assembled, always test to make sure that all sections of the manual/electric bed are properly and securely in place before using.

Make sure head and foot springs/sections are connected securely to the universal bed ends before use.

If the unit is not working properly, call a qualified technician to examine the unit and repair it.

Keep all moving parts, including the main frame, mattress deck (head and foot springs/sections) and all drive shafts, free of obstruction (i.e. blankets/sheets, heating blankets/pads, tubing, wiring, etc. and other types of products using electric cords which may get tangled around the bed, side rails or legs) during operation of the manual/electric bed.

The manual/electric bed is equipped with locking casters. When transferring into or out of the manual/electric bed, always lock the locking caster(s). Inspect the wheel locks for correct locking action before actual use. Even with casters properly locked, some flooring surfaces such as tile or wood, will allow the bed to move under some conditions. Use on surfaces such as these must be evaluated by the care provider.

ALWAYS remove manual crank(s) before performing electronic functions. Otherwise, the crank(s) will turn when the motor is on and could cause personal injury or damage to the bed.

⚠ ENTRAPMENT WARNING

Proper patient assessment and monitoring, and proper maintenance and use of equipment is required to reduce the risk of entrapment. Variations in bed rail dimensions, and mattress thickness, size or density could increase the risk of entrapment. Visit the FDA website at http://www.fda.gov to learn about the risks of entrapment. Review "A Guide to Bed Safety", published by the Hospital Bed Safety Workgroup, located at www.invacare.com. Use the link located under each bed rail product entry to access this bed safety guide.

Refer to the owners manuals for beds and rails for additional product and safety information.

After any adjustments, repair or service and before use, make sure all attaching hardware is tightened securely. Assist rails with dimensions different from the original equipment supplied or specified by the bed manufacturer may not be interchangeable and may result in entrapment or other injury.

Mattress MUST fit bed frame and assist rails snugly to reduce the risk of entrapment.

Replacement Parts/Accessories

Possible fire hazard when used with oxygen administering equipment other than nasal or masked type.

Use masked or nasal type oxygen administering equipment only in conjunction with the manual/electric bed. The use of any other type of oxygen administering equipment can result in a fire hazard.

When using nasal or masked type oxygen administering equipment, the oxygen or air tubing MUST be routed and secured properly to ensure that the tubing does not become entangled and/or severed during normal operation of manual/electric bed.

ALWAYS test to make sure that the side rails are properly and securely in place before using the manual/electric bed.

Invacare recommends that the mattress be centered on the bed frame. Otherwise, individuals may become entangled between the bed rail and the bed frame.

Physically challenged individuals who cannot prevent themselves from rolling/climbing out of the manual/electric bed may require alternative safe means of restraint.

When used with a manual/electrical bed, the bed rails DO NOT fall under any weight limitations. Bed rails can be deformed or broken if excessive side pressure is exerted on the bed rails. These bed rails are used for the purpose of preventing an individual from inadvertently rolling out of bed. The bed rails are NOT intended nor may be used for restraint purposes. If an individual is capable of injuring himself/herself, a physician or a healthcare professional should be consulted for alternative means of safe restraint.

Although bed rails are not rated to any specific weight limitation, the bed rails may become deformed or broken if excessive side pressure is exerted on the bed rails. The bed rail is not an assist rail for getting into or out of bed. DO NOT use the bed rails as push handles when moving the bed.

DO NOT use the side rails as push handles for moving the manual/electric bed.

Once patient assessment concludes that the patient's condition increases the chance of entrapment, the bed MUST be in the flat position when left unattended.

After raising/lowering the head/foot end of the manual/electric bed, check the distance between the bottom of the bed rail and the mattress. If there is excessive distance between the bottom of the bed rail and the mattress in which individuals may become entangled, adjust the height of the bed rail (if applicable), or provide alternative means of patient protection.

Trapeze units must be positioned on a universal bed end as near as possible to the center point of the bed end. The trapeze is to be used only in assisting the patient in repositioning or transferring in or out of the manual/electric bed.

Traction units must be securely fastened to universal bed ends of the manual/electric bed. These units are to be used only for immobilizing a patient in various traction setups or assisting the patient in repositioning or transferring in or out of the manual/electric bed.

NEVER allow patients to use trapeze or traction units as a total individual weight support.

Trapeze units are to be used only for immobilizing a patient in various traction setups or assisting the patient in repositioning or transferring into or out of bed.

Replacement mattresses and bed side rails with dimensions different than the original equipment supplied or specified by the bed frame manufacturer are not interchangeable. Variations in bed side rail design, width and thickness or firmness of the mattress could cause/contribute to entrapment. Use only authorized Invacare replacement parts and/or accessories otherwise the warranty is void. Invacare will not be responsible for any damage or injury that may result.

Electrical

⚠ DANGER

When using an extension cord, use only a three wire extension cord having at least 16 AWG (American Wire Gauge) wire and the same or higher electrical rating as the device being connected. Use of improper extension cord could result in a risk of fire and electric shock. Three prong to two prong adapters should not be used. Use of three prong adapters can result in improper grounding and present a shock hazard to the user.

NEVER operate if the unit has a damaged cord or plug. If it is not working properly, call a qualified technician for examination and repair.

Keep all electrical cords away from heated or hot surfaces.

Ensure all cables and cords are routed such that they will not become entangled or pinched. Otherwise damage or injury may result.

DO NOT unplug power cord from junction box.

The pendant and power cords must be routed and secured properly to ensure that the cords DO NOT become entangled, pinched and/or severed during operation of the electric bed.

NEVER operate the unit if these cords are damaged.

Refer servicing to qualified personnel only. Grounding reliability depends upon a properly grounded wall outlet.

Repair or Service Information

DO NOT open assemblies such as the motors, pendant, junction boxes or gear boxes. No user serviceable parts are inside. Only qualified technicians are permitted to repair these parts. If unqualified individuals perform any work on these beds, the warranty is void.

Unplug the power cord from its power source before performing any maintenance on the manual/electric bed. DO NOT unplug the power cord from the junction box. Damage to cord will result.

The junction box is mounted to the foot motor with an actuator clip-lock. If replacing the junction box, remove the actuator clip-lock and slide the junction box away from the foot motor until it is free. Disconnect all cable connections.

Before connecting/disconnecting the connections at the junction box, make sure the cable lock is removed by lightly depressing on the end tabs and lifting. After connectors are plugged in, route all cables into the cable lock slots and snap the cable lock in place. When installing any connectors into the junction box, be sure the cable lock is secure after installation - otherwise, injury or damage may occur.

DO NOT force the connector into the junction box, otherwise - injury or damage may occur.

Inspect the covering of the bed's control panel and the patient control panel to assure that the covering is not cracked or damaged.

Servicing of Double-Insulated Products

In a double-insulated product, two systems of insulation are provided instead of grounding. No grounding means is provided on a double-insulated product, nor is a means for grounding to be added to the product. Servicing a double-insulated product requires extreme care and knowledge of the system, and is to be done only by qualified service personnel. Replacement parts for a double-insulated product must be identical to the parts they replace. A double-insulated product is marked with the words "DOUBLE INSULATION" or "DOUBLE INSULATED". The symbol (⧈) is also able to be marked on the product.

Radio Frequency Interference

Electronic equipment may be influenced by Radio Frequency Interference (RFI). Caution should be exercised with regard to the use of portable communications equipment in the area around such equipment. If RFI causes erratic behavior, unplug the electric bed IMMEDIATELY. Leave unplugged while transmission is in progress.

Weight Limitations

The total weight limit of the Invacare 36-inch (91.4 cm) wide Manual/Electric bed (including accessories, mattress, occupant and any other person/object positioned on the bed) is 450 pounds (204 kg.); 350 pounds (158 kg) patient weight.

DO NOT permit more than one person on/in the manual/electric bed at any time.

Body weight should be evenly distributed over the surface of the manual/electric bed. DO NOT lay, sit or lean in such a way that your entire body weight is placed only on raised head or foot sections of the bed. This includes when repositioning or transferring in or out of bed.

SECTION 2—OPERATION

⚠ WARNING

The Invacare IVC Beds are to be assembled and adjusted by a qualified technician only.

Operating Full Electric Bed - Models 5410IVC and 5411IVC

⚠ WARNING

NEVER operate if the unit has a damaged cord or plug. If it is not working properly, call a qualified technician for examination and repair.

Keep all electrical cords away from heated or hot surfaces.

Ensure all cables and cords are routed such that they will not become entangled or pinched. Otherwise damage or injury may result.

CAUTION

Allow a slight pause between adjustments and avoid pressing multiple buttons at the same time. If pendant buttons are depressed too rapidly or multiple buttons are pressed at the same time, the desired feature may not activate. Simply release the pendant button, permit a slight pause and then activate the next operation.

On Full Electric beds the Hi/Lo crank MUST be removed before the bed is placed in service. If left in place the crank may cause damage or personal injury.

NOTE: For this procedure, refer to FIGURE 2.1 on page 14.

Before placing the bed into use, test it by operating it through all phases of its operation.

1. If any problems arise during the test, recheck all electrical connections and mechanical hook ups.
2. Full electric beds use a six function pendant for all bed operations.
3. All full electric beds come with an emergency crank to allow operation in the event of a power outage.

Raising and Lowering the Entire Bed

⚠ WARNING

DO NOT place pendant under or between objects. This may unintentionally press the buttons and may cause injury or damage.

NOTE: For this procedure, refer to Detail "A" of FIGURE 2.1.

1. To raise the entire bed, press the "Bed Up" button.
2. To lower entire bed, press the "Bed Down" button.

Raising and Lowering the Head and Foot Sections

NOTE: For this procedure, refer to Detail "A" of FIGURE 2.1.

1. To raise the head of the bed, press the "Head Up" button.
2. To lower the head of the bed, press the "Head Down" button.
3. To raise the foot of the bed, press the "Foot Up" button.
4. To lower the foot of the bed, press the "Foot Down" button.

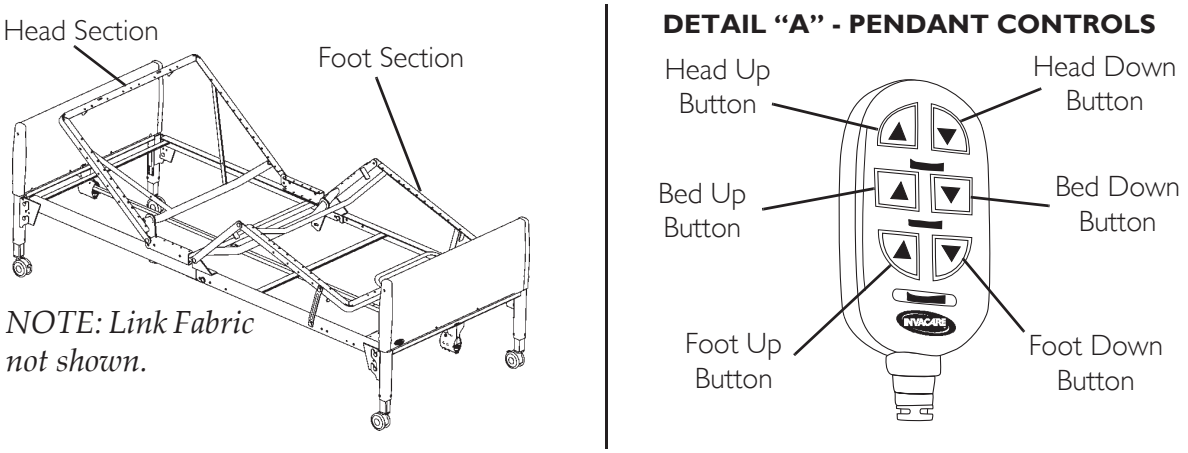


FIGURE 2.1 Operating Full Electric Bed - Models 5410IVC and 5411IVC

Operating the Semi-Electric Bed - Models 5310IVC and 5311IVC

NOTE: For this procedure, refer to FIGURE 2.2.

1. Perform one of the following:
   - Use a four function pendant for head and foot spring functions.
   - Use a hand crank for Hi/Lo bed operation.
2. Test all operating features of the bed.
3. If any problems arise during test, recheck all electrical connections and mechanical hook ups.

NOTE: All semi-electric beds come with an emergency crank to allow continued operation in the event of a power outage.

CAUTION

If a button on the pendant does not release or sticks, the bed spring will not stop moving.

Raising and Lowering Head and Foot Sections

NOTE: For this procedure, refer to Detail "A" of FIGURE 2.2.

1. To raise the head of the bed, press the "Head Up" button.
2. To lower the head of the bed, press the "Head Down" button.
3. To raise the foot of the bed, press the "Foot Up" button.
4. To lower the foot of the bed, press the "Foot Down" button.

Raising and Lowering the Entire Bed

1. Model 5310IVC - Use crank "B" to raise and lower the entire bed.

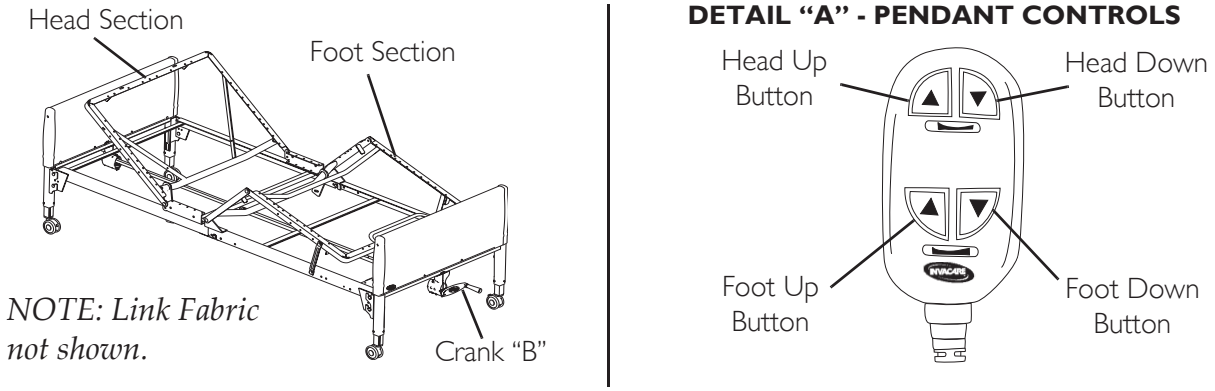


FIGURE 2.2 Operating the Semi-Electric Bed - Models 5310IVC and 5311IVC

Using the Emergency Crank

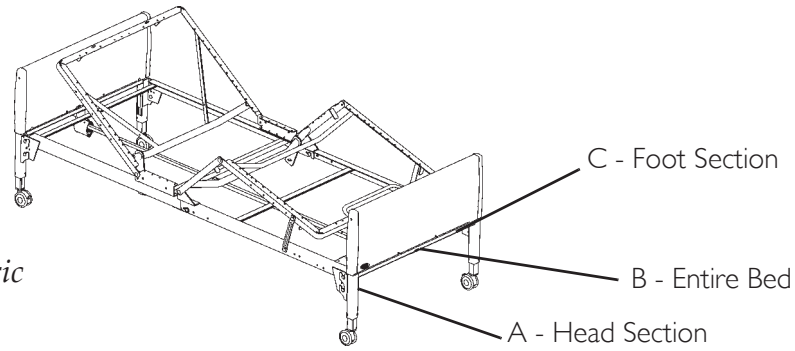
NOTE: For this procedure, refer to FIGURE 2.3.

NOTE: If the full electric or semi-electric bed needs to be adjusted manually due to a power outage or an electronic malfunction, use the emergency crank to make the adjustments. You should find the Emergency crank stored in the link fabric of the spring deck. If you do not find the crank, contact your dealer.

1. Remove the emergency crank from the spring deck of the bed under the mattress.
2. Locate the exposed shaft end according to the function you want to perform. Refer to FIGURE 2.3.
3. Attach the emergency crank to A, B, or C.
4. Refer to Operating the Manual Bed on page 16 for further instruction.

NOTE: Push in the emergency crank while turning it the desired direction.

NOTE: To move the entire bed on full electric models, open drive shaft cover on the foot end of the gear box.



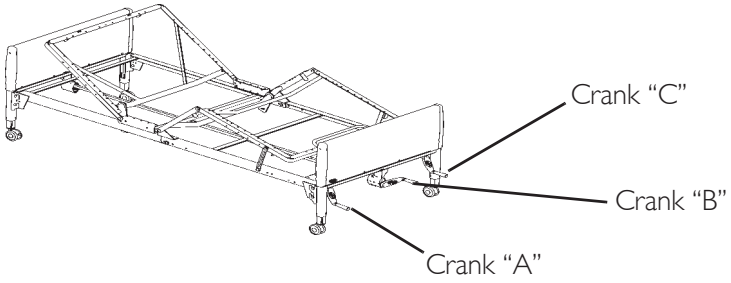
NOTE: Link Fabric not shown.

FIGURE 2.3 Using the Emergency Crank - Operating Full Electric Bed - Models 5410IVC and 5411IVC

Operating the Manual Bed

NOTE: For this procedure, refer to FIGURE 2.4.

1. Perform one of the following:
   - Raise or lower the head section with crank "A"
   - Raise or lower the foot section with crank "C".
   - For Model 5307IVC only - Raise or lower the entire bed with crank “B”.
2. Test all operating features of the bed.
3. If any problems arise during testing, recheck all mechanical hook ups.



NOTE: Link Fabric not shown.

FIGURE 2.4 Operating the Manual Bed - Model 53071IVC

Optional Bed Rails

⚠ WARNING

DO NOT install the optional bed rails without reading and understanding all of the instructions in the instruction sheet that accompanies the bed rail kit.

SECTION 3—TROUBLESHOOTING

Troubleshooting Electrical

SYMPTOM	PROBABLE CAUSE	SOLUTIONS
Bed spring does not move.	End of stroke reached.	Operate opposite button.
Full Electric Bed: Hi/Lo function does not work.	Bed not plugged in.	Ensure power cord is plugged into power source.
	Pendant not functioning.	Ensure Pendant is correctly connected to junction box. Ensure Pendant cable not entangled/pinched.
	Cables	Ensure cables are not entangled/pinched. Call the dealer for repair/replacement of cables and/or motors.
	Broken cable lock.	Call dealer to replace cable lock.
	Household fuse or breaker blown.	Check household fuse/breaker box.
	Motors are not functioning.	Call dealer.
	Hi/Lo Motor.	Ensure cables are not entangled or pinched. Call dealer.
	Thermal Protection Activated.	Allow bed unit to sit for 30 minutes and retry.
Bed Spring does not stop moving.	Pendant.	Check for depressed/stuck buttons. If button is stuck, call dealer for repair.
Bed Hi/Lo movement does not stop.		Check cables, if damaged call dealer.
Bed is producing unusual sounds, burning odors, or movement deviations observed in the controls, motors, or the limits switch functions.		Call dealer.

Troubleshooting Mechanical

SYMPTOM	PROBABLE CAUSE	SOLUTIONS
Bed does not stay in place.	Casters unlocked.	Lock Casters.
Bed springs do not move.	Pull tube.	Check pull tube(s) for binding. Call dealer for repairs.
	Manual Beds - crank(s) not working.	Call dealer.
Bed ends move in opposite directions (electrical or manual bed).	Drive Shaft connected to wrong gear box shaft.	Call dealer.
Hi/Lo function does not work.	Crank not properly installed.	Call dealer.
	Drive shaft disconnected.	Call dealer.
Pressing function on pendant results in motion other than that intended.	Motor cable connections to junction box incorrect.	Call dealer.

⚠ WARNING

Read all general guidelines, warnings and cautions before performing any repair/maintenance on the bed. All repair and maintenance on the bed should be performed by a qualified technician.

Maintenance Checklist

Invacare recommends the following maintenance and cleaning procedures be conducted between users or as needed. This form is provided as a guide to help with documentation.

Mechanical Inspection and Maintenance

- ❑ Inspect all bed components for damage or excessive wear.
- ❑ Visually examine all welds for cracks.
- ❑ Inspect the head and foot spring sections for bending, warping or damage.
- ❑ Inspect all bolts and rivets to ensure that they are securely tightened and functioning properly.
- ❑ Check sleep surfaces to ensure all links are intact.
- ❑ Check casters to ensure they lock, if applicable, and roll properly.

Electrical Inspection and Maintenance

- ❑ Inspect all electrical bed components for damage or excessive wear (i.e. cracked or broken housings, or worn components).
- ❑ Check pendant, power and motor cords for chafing, cuts or excessive wear.
- ❑ Make sure all plugs are fully attached and free of damage.
- ❑ Make sure cable lock on junction box is properly positioned and locked
- ❑ Check all functions:
  - Head raises and lowers properly.
  - Foot raises and lowers properly.
  - Bed Ends raise and lower properly.

Pass/Fail

- ❑ PASS: Bed and all components have passed all of the above inspection criteria and the bed is ready for placement into a client's home.
- ❑ FAIL: Bed, or any component, has failed any of the above inspection criteria. Tag the bed or component with a complete description of the failure(s) and have the bed serviced.

PATRIOT LOW BED

1 SAFETY

The safety statements presented in this chapter refer to the basic safety information that the operator of the Patriot Homecare Bed shall pay attention to and abide by. There are additional safety statements in other chapters or sections, which may be the same as or similar to the following, or specific to the operations. Please note the following special statements, used throughout this manual, and their significance:

⚠ **WARNING: Indicates a potential hazard situation or unsafe practice that, if not avoided, could result in death or serious personal injury.**

⚠ **CAUTION: Indicates a potential hazard situation or unsafe practice that, if not avoided, could result in moderate or minor personal injury.**

▲ **NOTICE: Indicates a potential hazard or unsafe practice that, if not avoided, could result in product or property damage.**

Info: Provides application recommendations or other useful information to ensure that you get the most from your product.

WARNING / CAUTION / NOTICE SUMMARY

WARNING: To Reduce the Risk of Burns, Fire, Electric Shock, or Personal Injury:

⚠ **WARNING: Keep hands and feet clear of all moving parts.**

⚠ **WARNING: Do not allow small children on or near bed during operation.**

⚠ **WARNING: Do not allow this device to be operated by small children.**

⚠ **WARNING: When operating the hi/lo, knee, or back function of the bed, ALWAYS ensure that the individual confined to the bed is positioned properly within the confines of the bed. DO NOT let any extremities protrude over the side or between the bed rails when performing any functions.**

⚠ **WARNING: Under normal operating conditions, this product has a maximum weight capacity of 450 lb, EVENLY DISTRIBUTED, including mattress, accessories, rails, etc.**

This product has a maximum *patient* weight capacity of 350 lb, EVENLY DISTRIBUTED.

Ensure that body weight is evenly distributed over the surface of the bed. Do not lie, sit or lean in such a way that your entire body weight is placed only on the raised head or foot sections of the bed. This includes when assisting the user in repositioning or transferring in or out of bed.

⚠ **WARNING: In order not to invalidate the warranty or create a hazardous condition resulting in serious personal injury, GF Health Products, Inc. recommends the use of only Lumex replacement parts.**

⚠ **WARNING: Before operating, ensure that the bed frame rivets are properly seated in the bed end hooks; otherwise, personal injury or damage could result.**

⚠ **WARNING: Keep all moving parts free of obstructions (i.e. blankets/sheets, heating blankets/pads, tubing, wiring, and other types of products).**

⚠ **WARNING: Ensure that Bed End Locking Hardware is installed in order to prevent personal injury when moving the bed or using a bed-mount trapeze.**

⚠ **WARNING: WARNING/CAUTION labels applied to the bed outline hazards or unsafe practices that could result in personal injury and/or property damage; do not remove them.**

⚠ **WARNING: Ensure that the power cord DOES NOT get tangled around the bed, bed rails or legs during normal operation of the bed.**

⚠ **WARNING: Do not leave the bed unattended when plugged in.**

⚠ **WARNING: Notice for California Customers- California Proposition 65 WARNING: This product contains a chemical known to the State of California to cause cancer and reproductive or developmental harm.**

⚠ **WARNING: GF Health Products, Inc. assumes no responsibility for any damage or injury caused by improper assembly or use of this product.**

⚠ **WARNING: GF Health Products, Inc. specifically disclaims responsibility for any bodily injury or property damage which may occur during any use which does not comply with federal, state or local laws or ordinances.**

NOTICE: To Reduce the Risk of Product or Property Damage:

▲ **NOTICE: The pendant hand control cord must be routed and secured properly to ensure that the cord does NOT become entangled and eventually severed during use.**

▲ **NOTICE: When using nasal or masked type administering equipment, oxygen or air tubing MUST be routed and secured properly to ensure that tubing does NOT become entangled and eventually severed during normal operation of bed.**

2 INTRODUCTION, PATRIOT HOMECARE BED USER MANUAL

This manual contains assembly and maintenance instructions for your Model US0208 / US0208PL Semi-Electric and US0458 / US0458PL Full-Electric / Low Patriot bed. Read the entire manual carefully before using your bed, and refer to it during use if you have questions.

THERMAL MOTOR PROTECTION

This product is powered by a quiet, efficient DC motor system. When the bed is plugged into a power outlet, the electrical transformer is always energized in a stand-by condition. The Okimat actuator casing may feel warm to the touch even when the bed is not being used; this is a normal condition.

Thermal protection activation (protection against overheating caused by excessive or extended periods of operation), which causes the bed to shut down operation when overheated, is a safety feature of this product.

Causes of thermal protection activation include multiple or repeated adjustment of long duration, or the use of multiple functions at one time. To ensure trouble-free operation, always allow a slight pause between multiple adjustments, and avoid operating more than one function at a time. If thermal protection activation occurs, the bed pendant hand control will not function. The thermal protection will reset after a period of time dependent on the severity of the overheating. To shorten the reset time, temporarily unplug the power cord from the power outlet.

GRAVITY-DOWN FEATURE FOR HEAD AND KNEE ELEVATION

Patriot beds are equipped with a gravity-down safety feature. The motors push the head and knee grid decks up, but do not pull the knee and head down. As the motor plunger retracts, the head and knee lower freely, minimizing bed damage and/or personal injury from items caught under the grid deck.

Info: When using telescoping deck-mount bed rails, the head and knee may not lower without weight on the bed.

4 BED OPERATION

⚠ **WARNING: Ensure that bed is secure and assembled as instructed on previous pages before operating.**

Plug the power cord into any grounded outlet.

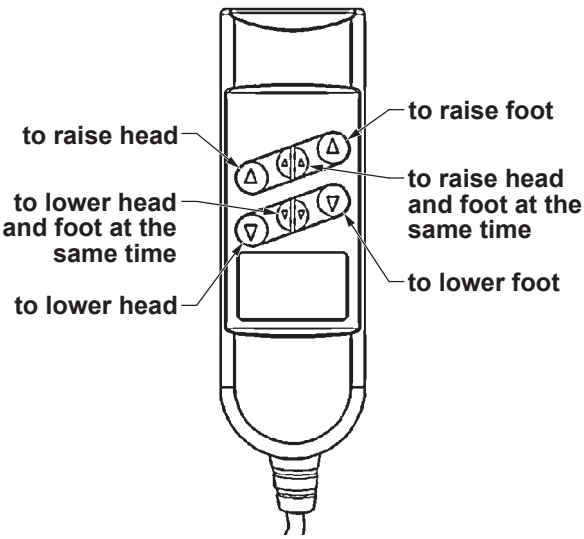
⚠ **WARNING: Do not leave the bed unattended when plugged in.**

Info: In the event of a power failure, use a standard 9V battery to lower the bed's head and foot sections (the 9V battery connection is attached to the motor). When used with the battery, the motor will only lower, not lift, the head and/or foot sections.

PENDANT HAND CONTROL OPERATION

Semi-electric bed only (US0208 / US0208PL)

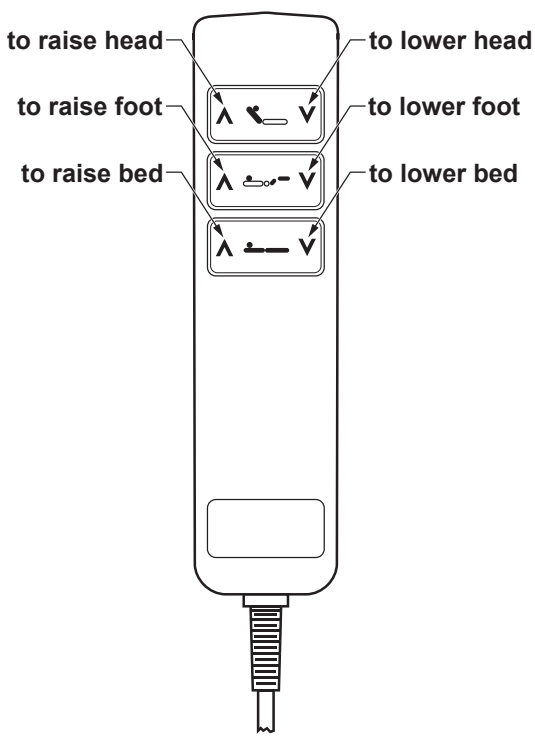
The semi-electric pendant hand control is shown at right. Use the pendant hand control to raise and lower bed head and foot. Each button has a different function, as noted in the picture.



Semi-electric pendant hand control

Full-electric bed only (US0458 / US0458PL)

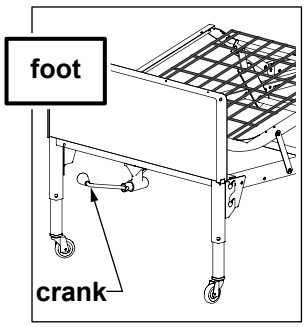
The full-electric pendant hand control is shown at right. Use the pendant hand control to raise and lower bed, head and foot. Each button has a different function, as noted in the picture.



Full-electric pendant hand control

CRANK OPERATION: SEMI-ELECTRIC BED ONLY (US0208 / US0208PL)

Use the crank at the center foot of the semi-electric bed (shown at right) to change bed height (raise or lower entire deck).



Crank operation

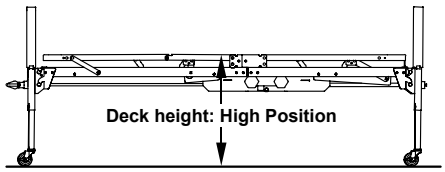
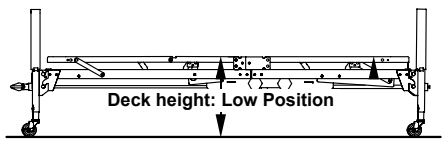
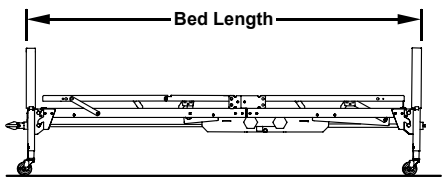
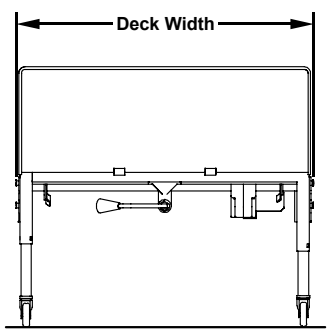
TRENDELENBURG POSITION, ALL MODELS (HEAD END AT LOWER ELEVATION THAN FOOT END)

1. Lower bed to its lowest height. Disengage the hi/lo rod by compressing the spring button and removing the hi/lo rod from the motor or bed end.
2. Raise the foot bed end using the pendant hand control or crank (semi-electric bed only). The head end will remain in the low position.

REVERSE TRENDELENBURG POSITION, ALL MODELS (HEAD END AT HIGHER ELEVATION THAN FOOT END)

1. Raise bed to its highest height. Disengage the hi/lo rod by compressing the spring button and removing the hi/lo rod from the motor or bed end.
2. Lower the foot bed end using the pendant hand control or crank (semi-electric bed only). The head end will remain in the high position.

5 SPECIFICATIONS, ALL MODELS

<table>
<tr><td rowspan="4">Deck height</td><td>High position</td><td colspan="3"> 
</td></tr>
<tr><td>US0208 / US0208PL:
24.0 inches</td><td>US0458 / US0458PL with casters in low position:
20.0 inches</td><td>US0458 / US0458PL with casters in standard position:
23.5 inches</td></tr>
<tr><td rowspan="2">Low position</td><td colspan="3"> 
</td></tr>
<tr><td>US0208 / US0208PL:
15.0 inches</td><td>US0458 / US0458PL with casters in low position:
9.5 inches</td><td>US0458 / US0458PL with casters in standard position:
13 inches</td></tr>
<tr><td colspan="2" rowspan="2">Bed length
Info: To extend grid length (80 in.) to 84 in., install optional kit 690-0084-000 (all beds).</td><td colspan="3"> 
</td></tr>
<tr><td colspan="3">All models: 87.0 inches</td></tr>
<tr><td colspan="2" rowspan="2">Deck width</td><td colspan="3"> 
</td></tr>
<tr><td colspan="3">All models: 36.0 inches</td></tr>
<tr><td colspan="2" rowspan="2">Weight</td><td>Normal operating conditions</td><td colspan="2">450 lb, EVENLY DISTRIBUTED including mattress, accessories, rails, etc.</td></tr>
<tr><td>Maximum patient weight</td><td colspan="2">350 lb, EVENLY DISTRIBUTED</td></tr>
<tr><td colspan="2">Construction</td><td>Frame</td><td colspan="2">10 ga (.135) high strength, low alloy steel (roll formed)</td></tr>
<tr><td colspan="2"></td><td>Sleeping surface</td><td colspan="2">11 ga (.120) cold rolled steel</td></tr>
<tr><td colspan="2" rowspan="6">Finish</td><td rowspan="5">5 stage bath</td><td colspan="2">1. S21F acid bath (cleans grease and oil from metal).</td></tr>
<tr><td colspan="2">2. Fresh water rinse.</td></tr>
<tr><td colspan="2">3. QuiliPhos 20 phosphate coat (inhibits rust and helps maintain electrical charge during powder application).</td></tr>
<tr><td colspan="2">4. Fresh water rinse.</td></tr>
<tr><td colspan="2">5. QuiliRinse 404 (seals metal for powder coating).</td></tr>
<tr><td colspan="3">All parts are then coated with a colored epoxy powder and baked 35 minutes at 375 degrees F. The powder coating finish is approximately 2.5 mils thick. The coating is smooth, uniform finish without runs, wrinkles, or grit.</td></tr>
</table>

6 ACCESSORIES: BED RAILS

Patriot Homecare Bed decks are equipped with patent-pending slots specifically for bed rail installation, providing a fixed place to mount GF bed rails. Two styles of Lumex bed rails are described in Section 6:

1) The Lumex Patriot Liberty bed rail system, designed specifically for Patriot Beds, and
2) The Lumex Universal bed rail system

⚠ **WARNING: Please read the following bed rail safety information before attaching and using your rails.**

Bed Rail Safety

⚠ **WARNING: If bed rails are not properly installed and adjusted, personal injury and / or damage to the bed rail could result.**

Please read and understand the following bed rail decal before use:

For information on Bed Rail safety, please see the FDA's brochure concerning Bed Safety and Bed Rails on the FDA website, at:
www.fda.gov/MedicalDevices/ProductsandMedicalProcedures/GeneralHospitalDevicesandSupplies/HospitalBeds/

⚠ **WARNING: Patient entrapment with bed side rails may result in serious injury or death. Use only with coherent patients capable of avoiding entrapment. Patients at risk of entrapment include those who have problems with memory, sleeping, incontinence, pain, uncontrolled body movement or who get out of bed and walk unsafely without assistance. For at-risk patients, use only with proper bed side rail protective barriers. There is also an increased risk of entrapment when bed rails are used in conjunction with a low air loss product.**

⚠ **WARNING: Bed side rails are not restraining devices. If restraint is required, use only proper protective restraints. Follow the manufacturer's instructions and applicable regulations. Monitor patient frequently.**

⚠ **WARNING: DO NOT push or pull the bed by the bed rails.**

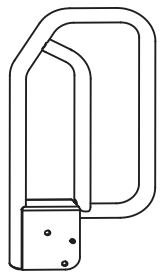
⚠ **WARNING: GF Health Products, Inc. assumes no responsibility for any damage or injury caused by improper installation of bed rails or unauthorized bed rail use. Only Lumex bed rails are recommended for use with Patriot beds. Please consult the instructions that accompany your Lumex bed rails for complete rail assembly and installation instructions.**

PATRIOT LIBERTY BED RAIL DESIGN

Lumex Patriot Liberty Bed Rails, designed specifically for use with Lumex Patriot Beds, were developed using the ***FDA Hospital Bed System Dimensional Guidance to Reduce Entrapment*** and tested to the ***Hospital Bed Safety Workgroup and FDA Dimensional Test Methods for Bed System Zones 1-4*** and ***International Standard IEC60601-2-38 Requirements for the Safety of Electrically Operated Hospital Beds***. For installation of these FDA-compliant bed rails, follow the installation instructions that accompany them. Patriot Liberty Bed Rail descriptions follow.

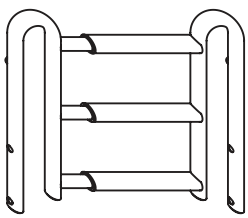
GF6500B-1: Assist Bar

The Assist Bar, shown at right, is a secure handhold and support for active patients who need assistance getting in and out of bed on their own. This bar is bolted directly to either side of the bed frame to support the split frame when a patient enters or exits the bed. It can also assist patients capable of grasping the bar and maneuvering themselves with rotating and turning in bed.

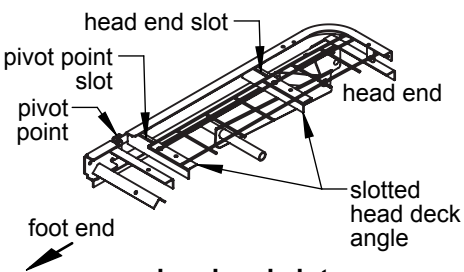


GF6500B-1
Assist Bar

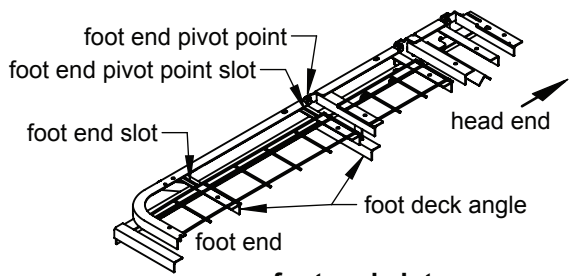
GF6580BH-1: Quarter Rail



GF6580BH-1
Quarter Rail



head end slots



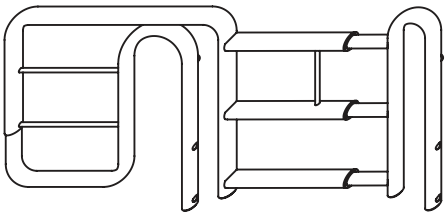
foot end slots

The Quarter Rail, shown above, is approximately 18 inches in length when mounted on the Patriot bed. It can be used as a head assist, head rail, or foot rail.

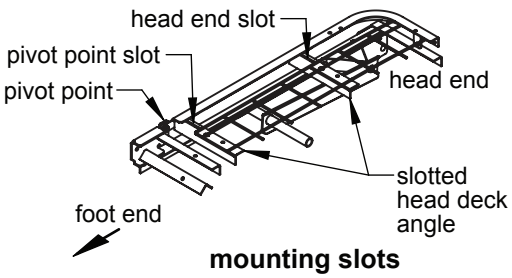
Mounting slot locations utilized when the Quarter Rail is used as a head rail are shown in “head end slots” above (opposite slots are directly across bed).

Mounting slot locations utilized when the Quarter Rail is used as a foot rail are shown in “foot end slots” above (opposite slots are directly across bed).

GF6590BH-1: Half No-Gap Head Rail



GF6590BH-1
Half No-Gap Head Rail

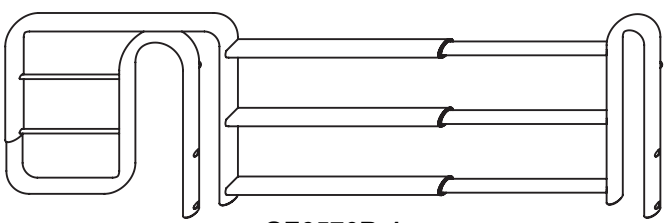


mounting slots

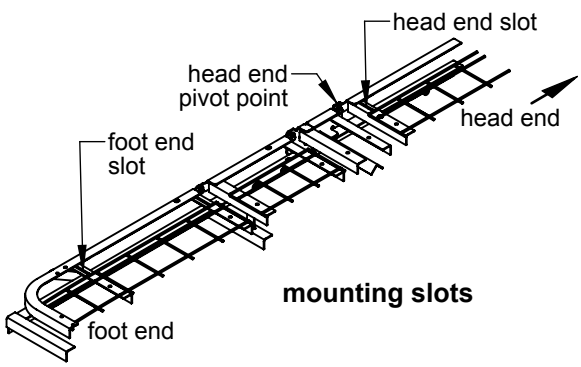
The Half No-Gap Head Rail, shown above, provides full head coverage of 31.5 inches and extends to eliminate the gap between the head board and the end of the rail. The GF6590BH-1 mounted on the bed's head and the GF6580BH-1 mounted on the bed's foot combine to create the Patriot split rail system.

Half No-Gap Head Rail mounting slot locations are shown in "mounting slots" above (opposite slots are directly across bed).

GF6570B-1: Full Length Rail



GF6570B-1
Full-Length Rail



mounting slots

The Full Length rail, shown above, is a nominal, telescoping full length rail that provides maximum length rail perimeter coverage.

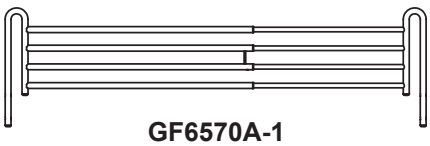
Full Length Rail mounting slot locations are shown in "mounting slots" above (opposite side slots are directly across bed).

LUMEX UNIVERSAL BED RAILS

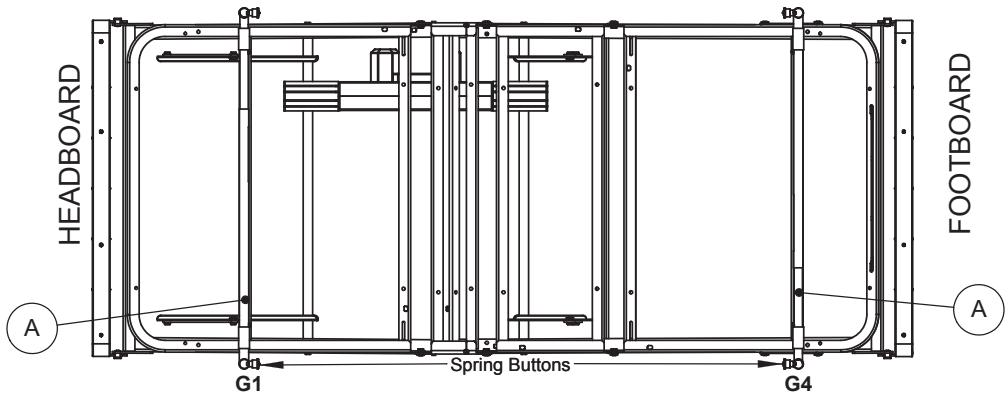
If you install Lumex universal bed rails, follow the installation instructions that accompany them; the following instructions are provided to describe the differences between the installation of bed rail crossbraces on Patriot grid beds and spring beds.

⚠ **WARNING: Do not use the bed rails as handles for getting into or out of bed; this could result in personal injury and damage to the bed rails.**

GF6570A-1: Full Length Side Rail



GF6570A-1
Full-Length Side Rail



Position spring-loaded crossbraces #A into slots G1 and G4 on both sides of bed with spring buttons facing inward as shown above.

8 MAINTENANCE AND SAFETY CHECKS

Perform the following as needed or between patient placements, whichever happens sooner:

Electronics and Motors	Check all controls to ensure that all functions work properly.	Foot control
		Head control
		Hi/Lo (if applicable)
	Check all cables for damaged or frayed wires.	Power cord
		Pendant hand control cord
	Check to ensure that all plugs are fully inserted or attached.	
	Check to ensure that all wires are routed and attached properly so not to interfere with any moving parts.	
	Inspect motor casings for excessive wear and cracks	
	Inspect motor slide caps for excessive wear and deformation	
Bed frames and sleeping surface	Visually check all welds	Head section
		Foot section
		Main Frame
	Check joints between sleeping surface sections for loose fasteners.	
	Inspect frames and sleeping surface for bending and excessive wear	
Cleaning	The metal parts of the bed are covered with a powder coating. Clean all coated parts with mild detergent and warm water. Periodically raise head and foot sections of the bed and remove dust from frame. Also, periodically remove mattress and clean mattress deck.	
Lubrication and mechanical	Lubricate all caster roller and swivel bearings with light machine oil.	
	Check all bolts and tighten as needed.	

⚠ **WARNING: The bed's electronic system contains no serviceable parts. Do not open the motors, cables, or pendant hand control. Only a Graham-Field authorized distributor or factory-trained personnel may perform service or adjustments on these components.**

Bed Entrapment

Reducing the Risk in Your Healthcare Facility

What is Entrapment?
The U.S. Food and Drug Administration (FDA) received approximately 691 entrapment reports from January 1985 to January 2006. Of those reports, more than 60% resulted in death. Residents have become caught, trapped, or entangled in the space in or around the bed rail, mattress, or bed frame, often resulting in serious injury and sometimes even death. Entrapment can occur when a resident attempts to move in or exit their bed without assistance as a result of delirium, confusion, agitation or pain.
Residents most vulnerable to entrapment are those who are frail, confused, restless, or who have uncontrolled body movement.

How to Reduce the Risk of Entrapment
The FDA has issued guidelines for reducing the risk of bed entrapment, “Hospital Bed System Dimensional and Assessment Guidance to Reduce Entrapment”. This guidance identifies potential entrapment areas and those body parts most at risk for entrapment; provides design criteria for manufacturers of new hospital beds; recommends test methods to assess the conformance of existing hospital bed systems; and answers frequently-asked questions about this subject.The guidance defines a hospital bed system — which could be used for patients in acute care, long term care, or homecare settings — as “the bed frame and its components, including the mattress, bed side rails, head and foot board, and any accessories added to the bed”.

Basic American encourages all hospital bed owners to read the Hospital Bed Safety Workgroup Guidelines regarding entrapment, which can be found at www.fda.gov.

There you can also find ordering instructions for an Entrapment Testing Kit, which you can use to determine whether your beds are in conformance with the guidance. You may also wish to review a discussion of Clinical Guidance (http://www.ute.kendal.org/learning/documents/clinical-guidance_SideRails.pdf),which you can use to assess an individual patient’s needs when using a side rail. These resources will supply you with the knowledge to evaluate the safety of the hospital beds you currently own.

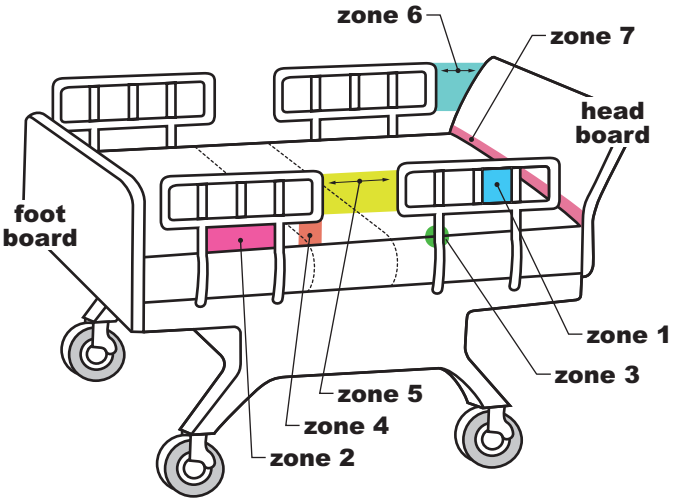
All Basic American beds are designed in full compliance with the FDA’s Hospital Bed System Guidance to Reduce Entrapment. For more details about Basic American beds, please contact us at 800.554.9215.

BASIC AMERICAN
MEDICAL PRODUCTS

AM | Alliance Medical
At the Center of Care

Alliance Medical
At the Center of Care

The diagram at right shows the seven bed system zones where there is potential for entrapment. The table below describes them.



Bed Entrapment Zones

Zone 1	**Within the rail**	**Any open space within the perimeter of the rail presents risk of head entrapment. * Recommended space: less than 4 3/4".**
Zone 2	**Under the rail, between the rail supports, or next to a single rail support**	**The gap under the rail and above the mattress presents risk of dangerous head entrapment. * Recommended space: less than 4 3/4".**
Zone 3	**Between the rail and the mattress**	**The space between the inside surface of the rail and the mattress, if too large, presents risk of head entrapment. * Recommended space: less than 4 3/4".**
Zone 4	**Under the rail at the ends of the rail**	**The gap between the mattress and the lowermost portion of the rail presents risk of neck entrapment. * Recommended space: less than 2 3/8".**
Zone 5	**Between split bed rails**	**When partial-length head and foot side rails (split rails) are used on the same side of the bed, the space between the split rails presents risk of neck or chest entrapment.**
Zone 6	**Between the end of the rail and the side edge of the head or foot board**	**The gap between the end of the bed rail and the side edge of the head or foot board presents risk of entrapment.**
Zone 7	**Between the head or foot board and the end of the mattress**	**The space between the inside surface of the head or foot board and the end of the mattress presents risk of head entrapment.**

** Note: Dimensional recommendations are provided for zones 1-4 because the majority of entrapment incidents have occurred in these areas.*

BASIC AMERICAN MEDICAL PRODUCTS

800.554.9215 Fax 800.524.4113
View these and more products at www.grahamfield.com

GF0900101RevB12

GF6580A-1: BED RAILS, LOW UNIVERSAL INSTALLATION & OPERATION INSTRUCTIONS

PLEASE SAVE THESE INSTRUCTIONS FOR FUTURE USE

Note: The most current version of these instructions can be found online at www.grahamfield.com

⚠ **WARNING: Important! Read and understand these instructions before installing or using the GF6580A-1 Bed Rails. If you do not understand any part of these warnings, cautions or instructions, contact a healthcare professional for direction in the use of this product. If the GF6580A-1 Bed Rails are not properly installed and adjusted, personal injury and/or damage to the Bed Rails could result.**

For information on bed rail safety, please see the following brochure: "A Guide to Bed Safety: Bed Rails in Hospitals, Nursing Homes and Home Health Care: The Facts" on the FDA website, at http://www.fda.gov/cdrh/beds/

⚠ **WARNING: The GF6580A-1 Bed Rails are designed for use in the homecare setting. The GF6580A-1 Bed Rails are not intended for institutional use.**

⚠ **WARNING: If components are damaged or missing, contact your dealer immediately. DO NOT use substitute parts. Use only Lumex replacement parts. Non-Lumex replacement parts could cause entrapment, personal injury, and damage to bed rails.**

⚠ **WARNING: The GF6580A-1 Bed Rails are intended to define the edge of the sleep surface and to help prevent an individual from inadvertently rolling or climbing out of bed. Do not use the bed rails as a restraint.**

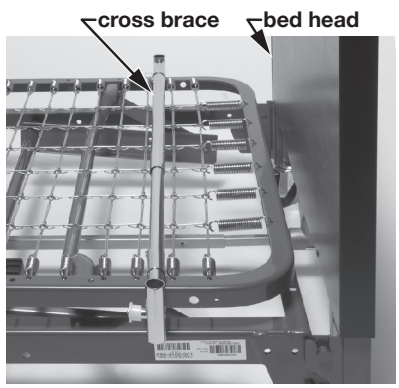
⚠ **WARNING: Although they have no specific weight limitation, the Low Universal Bed Rails may deform or break when subjected to excessive side pressure.**
DO NOT exert side pressure on the bed rails.
DO NOT use them as handles for getting into or out of bed.
DO NOT use them as push handles for moving the bed.
DO NOT use them as aids in transfer.
These activities could result in personal injury and damage to the bed rails.

⚠ **WARNING: GF Health Products, Inc. assumes no responsibility for any damage or injury caused by improper installation or use of this product.**

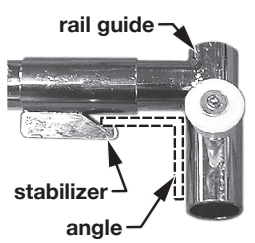
INSTALLATION

Note: Mount these bed rails on the head section of the bed.

1. Position the first cross brace on the head section angle, between the second and third deck springs from the head of the bed, as shown at left below.
2. Attach the first cross brace to the top of the spring deck. Hook one stabilizer under the spring deck angle as shown at far right (you may turn the cross brace to expose the stabilizer, thereby facilitating assembly); then compress the spring-loaded cross brace enough to hook the opposite stabilizer under the opposite deck angle, locking the cross brace into place.

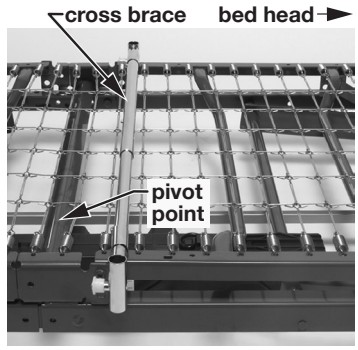


install cross brace at bed head



lock stabilizer under head section spring deck angle

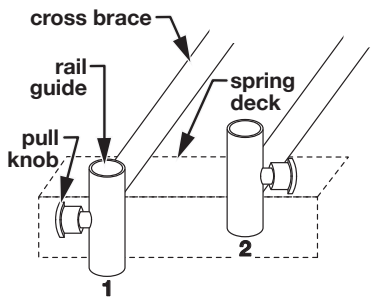
3. Install the second cross brace between the first and second springs from the head pivot point, as shown at right.
4. See **rotate cross braces** at right - before installing bed rails, rotate both cross braces from position 1 to 2 as shown, so that the pull knobs are positioned above the spring deck. If you do not perform this operation, the bed rails may be too low to install properly.
5. Insert the bed rails into the rail guides. Slide the rails down until the buttons catch in the holes.



install second cross brace

⚠ **WARNING: Ensure that bed rails do not exceed mattress width. If the spaces between mattress and bed rails are too wide, entrapment could occur, or objects could become entangled between mattress and bed rails.**

⚠ **WARNING: Before use, ensure that bed rails are assembled and installed as described, that all attaching hardware is securely tightened, and that the bed rails are securely in place.**



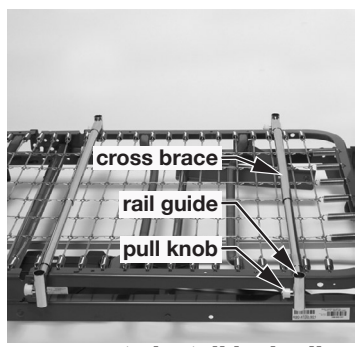
rotate cross braces

OPERATION

To drop the rail to the **DOWN** position, pull out both pull knobs and allow the rail to slide down.

To raise the rail to the **UP** position, pull out both pull knobs, lift the rail up, and release the pull knobs at the desired height, ensuring that the rail engages securely.

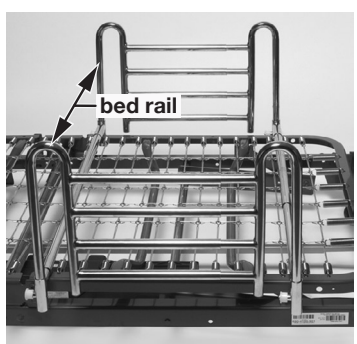
To make the bed: place the rail in the **DOWN** position; drop the bed linens between the rails and mattress; tuck in the linens; and raise the rail to the **UP** position. Follow the same procedure for the other side.



prepare to install bed rails

⚠ **WARNING: Raise bed rails to a height sufficient to define the edge of the sleep surface without creating a gap between bottom of rail and bed, which could cause entrapment.**

⚠ **WARNING: During use, inspect frequently to ensure that all attaching hardware is securely tightened, and that the bed rails are securely in place.**



install bed rails

WARRANTY

GF Health Products, Inc. warrants the Lumex GF6580A-1 Low Universal Bed Rails against manufacturer's defects for a period of three years. If a product is deemed to be under warranty, GF Health Products, Inc. shall provide, at its option, (1) replacement of any defective part or product or (2) a credit of the original selling price made to GF Health Products, Inc.'s initial customer. The warranty does not include any labor charges incurred in replacement part(s) installation or any associated freight or shipping charges to GF Health Products, Inc.

GRAHAM-FIELD

GF8900-1: ECONOMY OVERBED TABLE, NON-TILT ASSEMBLY & OPERATION INSTRUCTIONS

PLEASE SAVE THESE INSTRUCTIONS FOR FUTURE USE

Note: The most current version of these instructions can be found online at www.grahamfield.com

Tools needed: Phillips screwdriver, 9/16 hex wrench

⚠ **WARNING: Important! Read and understand these instructions before assembling or using the GF8900-1 Overbed Table. If you do not understand any part of these instructions, contact a healthcare professional for direction in the use of this product. If the GF8900-1 Overbed Table is not properly assembled and adjusted, personal injury and/or damage to the Overbed Table could result.**

⚠ **WARNING: If components are damaged or missing, contact your dealer immediately. DO NOT use substitute parts. Use only Lumex replacement parts. Non-Lumex replacement parts could cause personal injury and/or damage to overbed table.**

⚠ **WARNING: GF Health Products, Inc. assumes no responsibility for any damage or injury caused by improper assembly or use of this product.**

UNPACKING

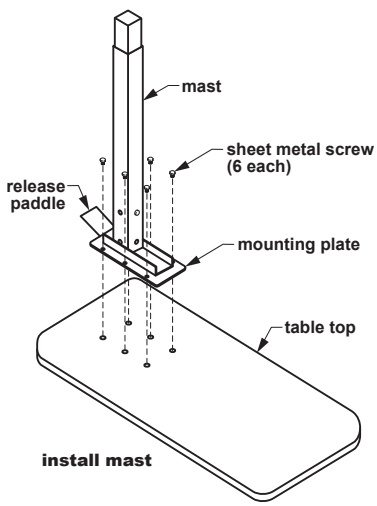
1. Check for obvious damage to the carton or its contents. If damage is evident, notify the carrier and your Graham-Field® authorized distributor.
2. Remove all loose packing from the box. Carefully remove all the components from the carton. Components: Table top, mast, 6 sheet metal screws, base, 4 casters, 2 hex head bolts, 2 flat washers, and 2 metal spacers.

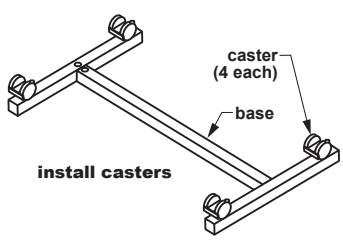
ASSEMBLY (SEE PICTURES AT RIGHT)

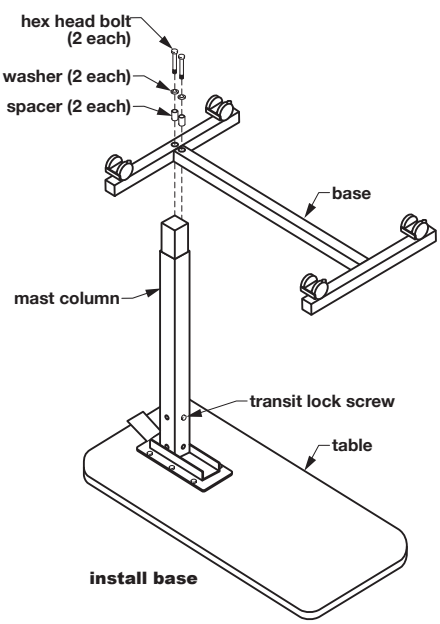
⚠ **WARNING: Do not remove the transit lock screw from the mast before the table is completely assembled; the table top could rise suddenly and cause serious personal injury.**

⚠ **WARNING: Do not disassemble the mast; this could cause serious personal injury.**

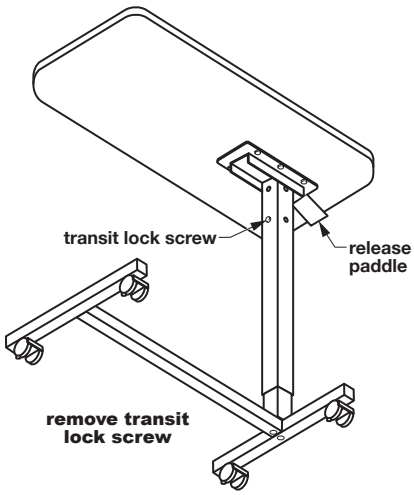
1. Place the table top upside down on work surface.
2. Position the mast above the table top, oriented as shown at near right. Place mast mounting plate on table top, matching mounting plate holes with table top predrilled pilot holes.
3. Mount mast to table top: Install sheet metal screws through mounting plate holes into table top holes. Tighten.
4. Place the base upside down on work surface. Press casters into sockets in bottom of base as shown at lower right.
5. Place the table top upside down on work surface. Place the base upside down above the mast, oriented as shown at far right.
6. Install the two hex head bolts through the washers, spacers, and base, and into the end of the mast column as shown. Tighten the bolts.







7. Turn the table upright and place it on the floor, as shown at right. While holding table top down with one hand, **carefully — table could rise suddenly —** remove the transit lock screw with the other hand. Discard transit lock screw.



⚠ **WARNING: Ensure that the table is assembled as described, and that all components are securely attached, before use.**

OPERATION INSTRUCTIONS

⚠ **WARNING: Do not lean on the suspended end of the table top; this may cause the table to tip.**

⚠ **WARNING: The table supports up to 30 lb of dispersed weight. Do not exceed this limit.**

To raise the table top

To raise the table top, apply light pressure upward on the bottom of the table top and stop when the table top has reached the desired position.

To lower the table top

To lower the table top, squeeze the release paddle upward while pushing the table top down; release the paddle when the table top has reached the desired position.

⚠ **WARNING: Ensure the table top is locked in place before use.**

MAINTENANCE

Check the fit and tightness frequently of all nuts and bolts to ensure that the table is securely assembled.

Cleaning

1. To clean: Gently wipe the table with a soft, clean, damp cloth.

▲ **Caution: Do not use cleansers that may damage the table's finish.**

2. To wash more thoroughly: Clean with mild soap and water.
3. Dry table with a clean, soft cloth.

WARRANTY

GF Health Products, Inc. offers a limited one-year warranty against manufacturer's defects on the Lumex® GF8900-1 Economy Overbed Table. If a product is deemed to be under warranty, GF Health Products, Inc. shall provide, at its option, (1) replacement of any defective part or product or (2) a credit of the original selling price made to GF Health Products, Inc.'s initial customer. The warranty does not include any labor charges incurred in replacement part(s) installation or any associated freight or shipping charges to GF Health Products, Inc.

GRAHAM-FIELD®

www.grahamfield.com

2800A, 2800GA: VERSA-HELPER TRAPEZE ASSEMBLY & OPERATION INSTRUCTIONS

PLEASE SAVE THESE INSTRUCTIONS FOR FUTURE USE

SAFETY GUIDELINES - PLEASE READ BEFORE USE

⚠ **WARNING:** **Important: Read and understand these instructions before installing or using the 2800A/2800GA Versa-Helper Trapeze. Ensure that the Trapeze is installed as described in the following paragraphs before use. If the Trapeze is not properly installed, personal injury and/or property damage could result.**

⚠ **WARNING:** **The fixed trapeze used in conjunction with a bed can assist an individual weighing up to 250 lbs. The fixed trapeze is designed to provide support, increase stability, and assist the user when repositioning himself/herself in bed. The fixed trapeze is NOT designed, however, to support the total body weight of an individual. Use it for assistance ONLY.**

⚠ **WARNING:** **Do not use this product without proper instruction from a healthcare professional.**

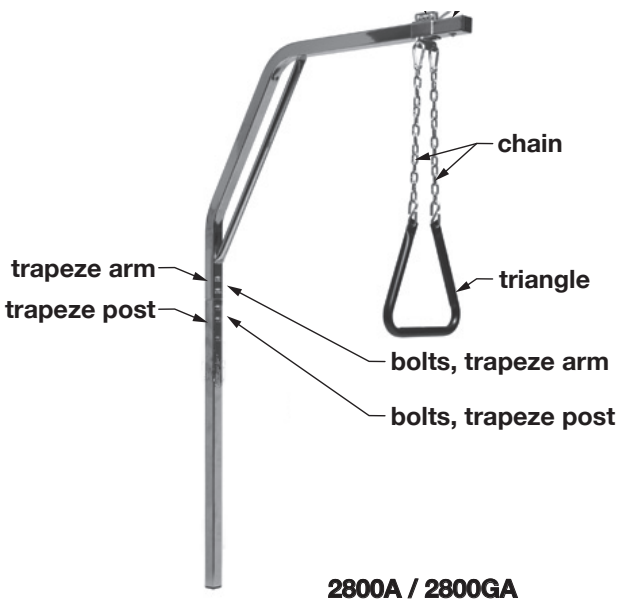
⚠ **WARNING:** **GF Health Products, Inc. assumes no responsibility for any damage or injury caused by improper installation, assembly or use of this product.**

⚠ **WARNING:** **If components are damaged or missing, contact your Graham-Field Health Products dealer immediately. DO NOT use substitute parts.**

TRAPEZE ASSEMBLY - REFER TO PICTURE AT RIGHT

Tools needed: M14 wrench, Phillips screwdriver, Pliers

1. Use screwdriver to remove the screw, labeled in picture at right, at top end of trapeze arm.
2. Slide bracket onto trapeze arm with chains downward as shown.
3. Adjust bracket to desired position; use the T-screw on top of the bracket to tighten it.
4. Reinstall screw at top end of trapeze arm; use screwdriver to tighten.
5. Slide bottom of trapeze arm over top of trapeze post as shown.
6. Install washers on bolts. Install four bolts through trapeze arm into connecting rod at top of trapeze post. Tighten securely.



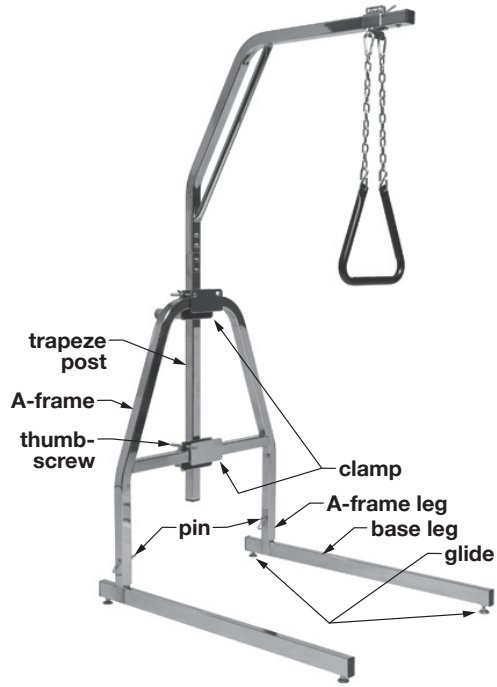
2800A / 2800GA
Versa-Helper Trapeze

⚠ **WARNING:** **Ensure that trapeze is correctly and securely assembled, that bracket is secure, and that trapeze arm and post bolts are secure before proceeding.**

Note: The trapeze is now ready to be installed on either the trapeze base or on bed headboard clamps. Please see the next page for those instructions.

Trapeze-Base Assembly - Refer to Picture at Right

1. Place the two base legs on the floor parallel to each other with leveling glides on the floor, as shown at right.
2. Attach the A-frame to the base legs: Slide the A-frame legs down over the upright posts projecting upward from the base legs. Slide the locking pins through both base legs and A-frame legs. Slide loops over ends of locking pins.
3. Install clamps on A-frame as shown at right; use the thumbscrews on both sides of the clamps to tighten them. Ensure that clamps are secure on A-frame.
4. Install trapeze post in both clamp center tubes; adjust trapeze to desired height, ensuring that it passes completely through both center clamps. Use the wing nuts on clamp center tubes to tighten clamps. Ensure that trapeze post is secure in clamps.



Trapeze Base

Trapeze-Bed Headboard Assembly - Refer to Picture at Lower Right

⚠ **WARNING: Perform this assembly while bed is unoccupied. Attach trapeze and clamps to metal-frame headboard *ONLY*.**

1. Slide upper clamp onto bottom of trapeze post so that it is oriented as shown at right.
2. Slide lower clamp onto bottom of trapeze post so that it is oriented as shown at right.
3. Assemble both clamps onto bed headboard as shown; use the thumbscrews on both sides of the clamps to tighten them. Ensure that clamps are secure on headboard.
4. Adjust trapeze to desired height, ensuring that it passes completely through both center clamps. Use the wing nuts on clamp center tubes to tighten clamps. Ensure that trapeze post is secure in clamps.


Trapeze mounted on bed headboard

TRAPEZE OPERATION

⚠ **WARNING: Before use, ensure that trapeze is correctly and securely assembled, and that all clamps are tight.**

⚠ **WARNING: The trapeze is intended to be used *ONLY* as an assistive device—that is, to enable patients to more easily and safely reposition themselves. It is not intended to bear entire body weight.**

⚠ **WARNING: When using trapeze assembled to bed headboard, ensure that bed casters are locked during trapeze use, to prevent unintended bed movement.**

WARRANTY

GF Health Products, Inc. warrants the Lumex 2800A/2800GA Trapeze for a period of three years for defects in workmanship and materials. During the warranty period, defective items will be repaired or replaced at GF Health Products, Inc.'s option at no charge.

INTRODUCTION

READ BEFORE OPERATING YOUR WHEELCHAIR

Important safety, operating and maintenance instructions are contained in this Owner's Manual. Read it carefully before operating your wheelchair and refer to it as often as needed to help maintain all-around, performance standards. If you do not understand the warnings and instructions provided herein, contact your healthcare professional, Everest & Jennings dealer or technical representative before proceeding with the use of this product, otherwise personal injury or damage to your wheelchair could result.

Consult your healthcare professional and/or Everest & Jennings dealer for assistance in developing safe and effective techniques for performing daily activities according to your individual abilities and needs, and to make certain your wheelchair is properly prescribed and adjusted for your use. All procedures involved should be practiced with an attendant until you are thoroughly familiar with them.

Keep in mind that the basic safety procedures included in this manual are to be used as a guide only. You may find it necessary to develop your own unique methods for safely solving frequently encountered challenges. Again, consult your healthcare professionals for their recommendations and never hesitate to ask for their assistance.

Your wheelchair should receive maintenance on a regular schedule and should be inspected frequently for proper mechanical operation. Some suggestions of safety inspection areas, methods of detecting improper operation and making minor adjustments are included in this manual. When it comes to service and repairs, remember your Everest & Jennings dealer knows your wheelchair best.

All information and specifications in this manual are current at the time of printing. However, because it is Everest & Jennings policy to continually improve the quality and reliability of all our products, we must reserve the right to make changes at any time without notice.

Thank you for choosing an Everest & Jennings wheelchair! We want to assure you of our continued commitment to providing innovation and quality in our products.

BASIC SAFETY PRECAUTIONS

Safety requires the constant attention of the wheelchair user and the attendant. It is extremely important to learn and always use safe methods of performing basic daily activities. Always consult your physician, nurse or physical therapist to determine methods most suitable for your individual abilities. Protect yourself and your wheelchair by having it serviced regularly. If you experience any malfunction, contact your Everest & Jennings dealer immediately, as a hazardous condition could result, causing personal injury or damage to your wheelchair. Periodic inspection, adjustment and replacement of worn parts are necessary to provide years of superb performance.

IMPORTANT: Before using your wheelchair, please read and adhere to the following safety precautions. Failure to do so could result in personal injury and/or damage to your wheelchair.

WARNINGS:

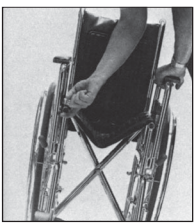
- **Do not operate this wheelchair on streets or roadways.**
- **Do not operate this wheelchair on hilly or rough terrain, sand, wet or icy surfaces, or surfaces with impaired traction. Ensure pathway is clear of all obstacles.**
- **Always engage wheel locks when transferring, resting or using a wheelchair lift, and do so on a stable, level surface.**
- **Under normal usage, anti-tippers will prevent the wheelchair from tipping over backwards. Everest & Jennings recommends the use of anti-tippers. (If anti-tippers are an option with your wheelchair, Everest & Jennings strongly recommends ordering them as an additional safety measure).**
- **Do not attempt to tilt the wheelchair backwards past its balance point (a "wheelie").**
- **Unauthorized modification of your wheelchair or the use of non-Everest & Jennings replacement parts may change the structure of the wheelchair and could create a hazardous condition which may result in serious injury and void the warranty.**
- **Do not attempt *any* inclines or declines greater than six degrees (10% grade or one foot of rise or fall per ten feet of ramp length). Do not attempt inclines without anti-tippers installed.**

WARNINGS: (continued)

- **During descent, the lowest part of the footrest should be no closer to the ground than 2-1/2" to permit proper clearance at the bottom of the incline.**
- **Do not turn wheelchair while going downhill, as chair could tip over.**
- **This wheelchair has not been approved as a seat in a motor vehicle. Always transfer wheelchair user to an approved vehicle seat, and use the provided motor vehicle restraint.**
- **Do not tie down or attach any thing to the wheels. This could cause tipping and may result in personal injury or damage to the wheelchair.**
- **To reduce the risk of tipping, before leaning or reaching forward, sit back in the seat and rotate casters fully toward front of wheelchair.**
- **Do not lean over the top of the wheelchair back. This could cause the wheelchair to tip over. Do not lean on this wheelchair, use it for support (other than sitting in it), or use it as a walker; these are practices which could result in loss of balance and personal injury or damage to your wheelchair.**
- **Do not stand or step on the footplates while transferring. This could cause the wheelchair to tip or may cause injury or damage to your wheelchair.**
- **The maximum weight capacity is 250 lbs. Everest & Jennings recommends a heavy duty constructed wheelchair for persons weighing more than 250 lbs. or for those wheelchair users who are extremely active.**
- **Do not use your wheelchair on escalators.**
- **Never lift the wheelchair by the armrests or footrests as these parts are detachable. Doing so may cause personal injury or damage to the wheelchair.**
- **Check tire pressure weekly to ensure correct air pressure. Failure to maintain proper air pressure may result in the malfunction of the wheel locks, which could result in serious injury.**
- **WHEEL LOCKS ARE NOT BRAKES! Do not use the wheel locks to slow down your wheelchair or while the wheelchair is moving. Wheel locks are only intended to keep the wheelchair in place when it is at a complete stop.**
- **Everest & Jennings specifically disclaims responsibility for any bodily injury or property damage which may occur during any use which does not comply with federal, state or local laws or ordinances.**

GENERAL OPERATING GUIDELINES

OPENING AND FOLDING THE WHEELCHAIR

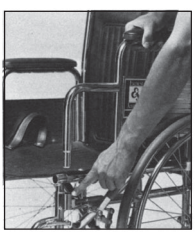


To Open: Slightly tilt wheelchair to one side and push down on seat rails. **(WARNING: DO NOT place your hand or fingers between seat rail and side panel.)**

To Close: Fold up footplates. Make sure footrests / legrests are in locked position in front of the wheelchair. (If the wheelchair is equipped with heel loops, pull them forward before folding the footplates.) Tilt the wheelchair to one side, and lift up on the seat rail opposite you or on the upholstery next to the seat rail. For wheelchairs with carrying straps, lift up on the opposite strap and pull toward you.

REMOVING AND ADJUSTING DETACHABLE ARMS

WARNING: Make sure arms are securely locked before using the wheelchair. DO NOT lift the wheelchair by the armrests if they are detachable. Doing so may cause injury to the wheel user or others or damage to the wheelchair.



To Remove Arms: Press down on the release mechanism on front post of frame and lift arm up and off. Pull up to return release mechanism to locked position.

To Adjust Arm Height: Press down on lock pin located on arm and raise or lower arm to desired height. Return pin to locked position.

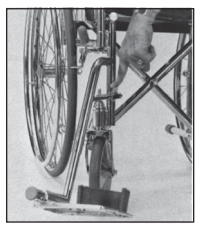
FRONT RIGGING

WARNING: Lowest part of the footrest should not be less than 2 1/2" from the ground to permit proper clearance.

Never stand on footplates as chair may tip forward abruptly.

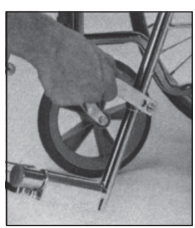
Periodically inspect metal areas for sharp edges.

When utilizing footrests, ensure they are securely attached to the hinge pins and plates on frame.

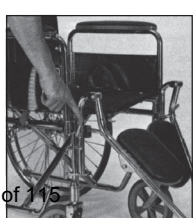


To Remove: Push swing away release lever toward back of wheelchair. Swing footrest/ legrest outward and lift up and off.

To Attach: Set footrests/legrests on wheelchair frame so that footrests/legrests hinge plates engage wheelchair hinge pins. Swing footrests/ legrests inwards and using some force, firmly lock footrests/legrests in place and ensure that swing away release lever is locked in forward position.



To Adjust: The length is adjusted by loosening the bolt (or nut) on the telescoping tube shaft. Tighten securely after adjustment.



LEGREST ANGLE ADJUSTMENTS

Raise legrests to appropriate height and angle. To lower, disengage release mechanism. When utilizing footrests, ensure they are securely attached to the hinge plates on frame.

COMPANION/TRANSPORT CHAIR WHEEL LOCK ADJUSTMEN

Two wheel locks are located on the Companion/Transport chair; one on each of the fixed rear wheels. To engage, push the lever forward. Once over center, the lever will lock into place. To disengage, pull back on the lever.

FOLDING A RECLINING BACK WHEELCHAIR

Back must be in the upright position. Turn the legrest panels so padded side face outward, and fold up the footplates. Depress the button on the left side of the spreader bar on the back of the wheelchair. Slide the outside tube to the left until the coupling is uncovered. Follow the instructions on folding the wheelchair.

ADJUSTING RECLINING BACK

Full-Reclining back (90º): Pull trigger release located below the push handles on both sides simultaneously and recline back to desired increment position and lock into place.

FOLDING A COMPANION/TRANSPORT WHEELCHAIR BACK

To enhance the storage and transportability of the Everest & Jennings Companion/Transport chair, a fold down back mechanism is incorporated at the rear of each backpost. One of several different mechanisms can be found on the wheelchair:

(1) Sliding Back: To engage, pull up on the latch. When completely raised, pull the back post rearward and down towards the bottom of the chair. Repeat for both sides. Fold the wheelchair.

(2) Pull Pin with Ring: To engage, pull pin outward and hold while pulling the backpost rearward. Fold the back down towards the bottom of the chair.

(3) Pin with Plastic Paddle: To engage, press rearward on the top of the paddle to release pin. Fold the back down towards the bottom of the chair.

SAFETY AND HANDLING GUIDE

STABILITY AND BALANCE

Proper balance is the key to maintaining stability of your wheelchair. Your wheelchair has been designed and engineered to maintain balance during normal daily activity. However, it is possible to tip the wheelchair over if used improperly or if you move beyond the center of gravity. Everest & Jennings strongly recommends the use of a positioning belt to maintain proper weight distribution. It is very important that you learn the characteristics of your wheelchair as well as learn safe methods to perform the daily activities basic to your lifestyle. Your healthcare professional should assist you in developing the skills and proper techniques to perform all activities safely.

PRECAUTIONS WHEN REACHING OR BENDING

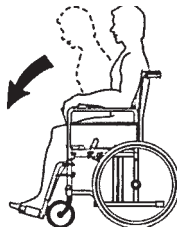
Although it is not recommended, you may find it occasionally necessary to lean or reach while sitting in your wheelchair. Consult with your healthcare professional for assistance in developing your personal safe reaching or moving techniques suited to your abilities and restrictions.

WARNING: Always have the front casters turned to the front to provide stability while reaching. If in doubt, ask for assistance or use a device that will extend your reach without requiring you to shift your weight.

DO NOT attempt to reach objects if you must move forward in the seat or if you must reach down between your knees.

DO NOT shift your weight in the direction you are reaching. This could cause the wheelchair to tip, resulting in injuries.

Reaching/Bending Forward or Sideward:



(1) Maneuver the wheelchair as close as possible to the object you wish to reach.
(2) Rotate both front casters fully forward.
(3) Engage both wheel locks.

Reaching/Bending Backward:

WARNING: DO NOT engage the wheel locks. If your weight shifts while reaching, it is better to roll backwards than to tip over.

DO NOT lean over the top of the back upholstery, as wheelchair could tip.

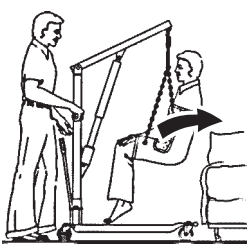
(1) Maneuver the wheelchair as close as possible to the object.
(2) Rotate both front casters fully forward.
(3) Reach only as far as your arm will extend without changing your sitting position. If in doubt, reposition the wheelchair or ask for assistance.

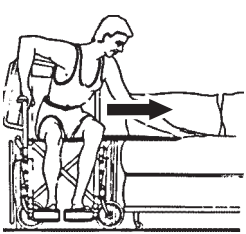
TRANSFER ACTIVITIES

WARNING: Before attempting a transfer, always engage both wheel locks.

Check tire pressure of pneumatic tires (if so equipped) weekly to ensure correct air pressure. Failure to maintain proper air pressure could result in the malfunction of the wheel locks, which could result in personal injury.

DO NOT step on the footplates, as this could cause the chair to tip. Fold them up, detach them, or swing them to the side. There is a critical moment when there is little or no seat platform beneath you, so take every precaution to reduce this unsupported distance BEFORE you attempt to transfer.



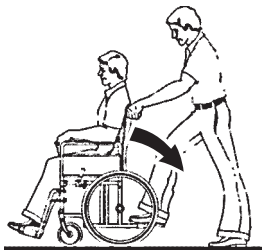


Transferring into or out of a wheelchair is a very difficult maneuver and can be very hazardous for both the wheelchair user and attendant. Under ideal conditions, such transfers should only be attempted with the help of a well trained attendant using a "patient lift." However, there are situations when the wheelchair user must, or chooses to, transfer without the aid of either an attendant or patient lift. Exercise extreme care in these situations. Consult your healthcare professional for assistance in developing your individual technique.

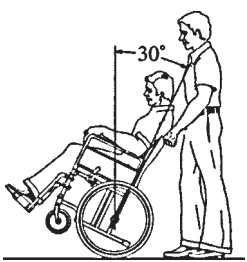
Whenever possible, use two (2) attendants to perform transfers. Make sure the wheelchair is stabilized and will not move or slide during the transfer. Take extra precautions to prevent tipping. Use good body mechanics to prevent injuries.

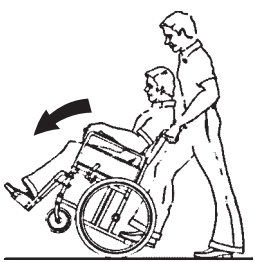
TILTING

WARNING: Do not tilt the wheelchair backward past its balance point a it can be dangerous and may result in injuries. DO NOT attempt to tilt your wheelchair without assistance. Attendan should ensure handgrips are firmly attached and that they do not turn or slip off.



Tilting the wheelchair backward is generally required to negotiate such obstacles as ramps, inclines, curbs, stairs and door sills. Tilting should only be performed with the assistance of an attendant. An attendant should: (1) Grasp the push handles securely and ensure that the hand grips are firmly attached. (2) Make sure the wheelchair user's feet are situated flat on the footplates
and that arms, hands and fingers are clear of the wheels. (3) Advise the wheelchair user prior to tilting the wheelchair backward. (4) Place one foot on the tipping lever and apply downward force until the proper balance point is reached (approximately 30 °). (5) Lower the front end slowly.





RAMPS AND INCLINES

WARNING: DO NOT attempt inclines or declines without anti-tippers installed.

DO NOT attempt any incline or decline of more than six degrees (10% grade, or one foot of rise or fall per ten feet of ramp length).

During descent, the lowest part of the footrest should be no closer to the ground than 2-1/2" to permit proper clearance.

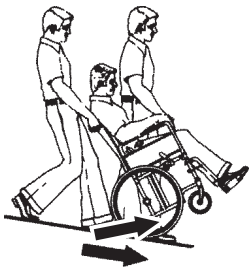
DO NOT use the wheel locks to slow your descent as this could result in accidental locking, veering, tipping or abrupt stopping which may result in serious injuries.

Avoid changing direction when descending as this could cause instability, which may result in serious injuries.

Know your own capabilities and limitations in terms of strength and endurance before attempting to negotiate an incline or decline. Practice with an attendant or healthcare professional first before attempting any inclines, declines, curbs or ramps. Always inspect the ramp, incline, decline, or any pathway for hazards such as holes, obstacles, slippery or uneven surfaces, etc. before proceeding. If you cannot see the entire ramp, ask someone to inspect it for you.

Ascent: Lean the upper part of your body slightly forward as you propel up an incline. If it becomes necessary to stop, avoid any abrupt or sudden forward movement as this could cause tipping.

Descent: Always face forward when going down a ramp, but **DO NOT** lean forward as this could cause the wheelchair to tip. Lean slightly backward to increase stability. It is critical to keep the wheelchair



under control at all times. Descent should be made slowly and safely by grasping the handrims; however, use care as friction heat will be generated.

NOTE: (Gloves will help prevent friction burn).

CURBS, STEPS, AND STAIRWAYS

WARNING: Never attempt to negotiate steps, stairs or escalators in your wheelchair.

Always check the hand grips to make sure they are secure and will not turn or slip off.

DO NOT allow the wheelchair to drop off the curb edge.

A high curb should NOT be attempted without two attendants.

DO NOT attempt to lift the wheelchair by any detachable armrest, legrest or other removable parts.

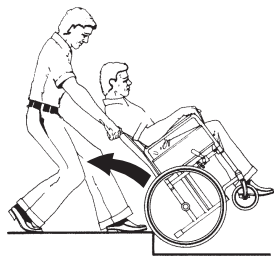
Curbs, steps, and stairways are dangerous obstacles that confront the wheelchair user. When you encounter these obstacles, try to find a way around them by using curb cuts, ramps or designated disabled elevators now available in most areas.

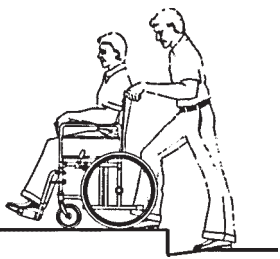
CURBS

Curbs should only be negotiated with the assistance of an attendant. The following are ***suggestions only*** for how to negotiate curbs. It is important for you to develop your own safe technique that is best suited for your abilities with the aid of your healthcare professional.

Going Up (Method 1): When approaching a curb, the attendant should ensure the hand grips are securely fastened and do not turn or slip off. Tilt the wheelchair backward to its "balance point" and move forward until the front casters pass over the top of the curb. The front casters should be slowly lowered on top of the curb while the wheelchair is lifted up by the push handles and pushed forward until the rear wheels roll up and over the curb. The attendant should make sure the wheelchair has completely cleared the curb and can not roll backwards.

Going Up (Method 2): The attendant should ensure the hand grips are securely fastened and do not turn or slip off. Then, turn the wheelchair backward until the rear wheels are against the curb. Tilt the wheelchair back to its "balance point" and lift up by the push handles while pulling the wheelchair up and over the curb. **DO NOT** let the front casters down until the wheelchair is back far enough to clear the curb**.**





Going Down: While standing behind the wheelchair, and after ensuring handgrips are securely fastened the attendant should turn the wheelchair backward and carefully step down. Tightly holding the handgrips, the attendant should pull the wheelchair to where the rear wheels reach the curb edge and then slowly roll the rear wheels down onto the lower level. After the wheels are safely on the lower level, the wheelchair should be tilted back to its "balance position" and turned face forward. The attendant should carefully lower the front casters by placing one foot on the tipping lever and gradually decreasing the force of exertion.

STEPS AND STAIRWAYS

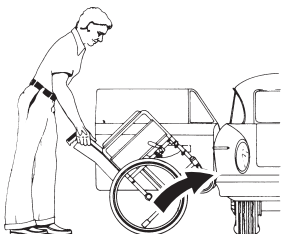
WARNING: Wheelchairs are specifically prohibited on escalators. It is extremely dangerous and should never be attempted.

Due to the many hazards which exist for both the wheelchair user and the attendant, Everest & Jennings does not recommend taking a wheelchair up or down stairs or steps. Always consult your healthcare professional for assistance and safety guidelines.

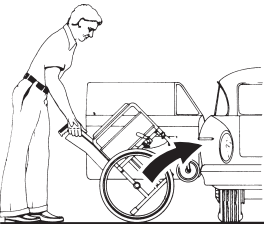
TRANSPORTING A WHEELCHAIR

WARNING: This wheelchair has not been approved as a seat in a motor vehicle. The wheelchair user should always transfer to an approved vehicle seat and use the provided motor vehicle restraints. A wheelchair positioning belt (which is available from your dealer) may be installed but is only intended for mild restraint. It is not designed for use as a safety device withstanding high stress loads, such as motor vehicle or aircraft safety belts.

When transporting the wheelchair in a motor vehicle, do not place the wheelchair where it will interfere with the safe operation of the vehicle or endanger the driver or passengers. The front seat **IS NOT** a good location to store a wheelchair during transport as the wheelchair can become dislodged and become a serious hazard to the vehicle driver. Always take precautions to avoid personal injury when loading or lifting a wheelchair into or out of a vehicle.



Rear Seat: Move the front seat as far forward as possible. Remove the footrests or legrests, fold the wheelchair and face it toward the open car door. Tilt the wheelchair backwards and roll it forward on the rear wheels. Push the



wheelchair forward so the casters enter the car. Tilt the wheelchair away from the back of the front seat, then lower the casters to the floorboard. Slowly lift-roll the chair into the car. Be sure it is stable and will not shift while the car is in motion. Make sure the wheelchair does not block the driver's field of vision.

Trunk: Reduce the weight and length of the wheelchair by removing detachable components (legs, arms, footrests, etc.). Fold the wheelchair and set the wheel locks. Grasp the front of the frame and rear of the wheels and lift the wheelchair carefully, using good body mechanics to avoid injury and place it in the trunk. **DO NOT** put any articles on top of the wheelchair. Close the trunk lid slowly.

Carriers: There are several practical wheelchair carriers that mount onto the rear bumper. Contact your Everest & Jennings dealer for information.

SAFETY INSPECTION AND MAINTENANCE

WARNING: Improper maintenance can cause operating problems and may affect your warranty coverage.

The use of non-Everest & Jennings replacement parts could create a hazardous condition, which may result in serious injury.

Proper care and maintenance are essential in keeping your wheelchair in safe working condition. Periodic inspection of the wheelchair is necessary to detect potential problems which may necessitate adjustment and/or replacement of worn parts. When you believe a component/part is not functioning properly, immediately contact your Everest & Jennings dealer, as a potentially hazardous condition could result. Only excellent condition is acceptable where safety is concerned.

SECTION 5—OPERATING INSTRUCTIONS

Introduction

Your oxygen concentrator is intended for individual use in the home. It is an electronically operated device that separates oxygen from room air. It provides high concentration of oxygen directly to you through a nasal cannula. Clinical studies have documented that oxygen concentrators are therapeutically equivalent to other types of oxygen delivery systems.

Your provider will show you how to use your oxygen concentrator. He/She should be contacted with any questions or problems regarding your oxygen concentrator. This owner's manual will tell you about your concentrator and will serve as a reference as you use your concentrator.

Select a Location

You may select a room in your house where using your oxygen concentrator would be most convenient. Your concentrator can be easily rolled from room to room on its casters.

Your oxygen concentrator will perform best when operated under the following conditions. Usage in environments other than those described may result in the need for increased equipment maintenance. The air intake of the unit should be located in a well ventilated area to avoid airborne pollutants and/or fumes.

Recommended Guidelines for Optimum Performance

Temperature:	50°F - 95°F (10°C - 35°C)
Electrical:	No extension cords.
Placement:	No closer than three (3) inches from the wall, furniture, draperies, or similar surfaces.
Tubing and Cannula:	7 ft cannula with a maximum 50 ft of Crush-Proof Tubing (DO NOT pinch).
	Platinum 10: Recommended use up to 25 ft high flow tubing with high flow cannula at all flow rates.
Environment:	Smoke and soot-free. No confined spaces (Example: No closets).
Relative Humidity:	20 to 60%
Time of Operation:	Up to 24 hours per day.
Flow Rate	Platinum 5 and XL: From 0.5 L/min. to 5 L/min. For flow rates less than 1 L/min., use the Pediatric Flowmeter Accessory.
	Platinum 10: From 2 L/min. to 10 L/min
Minimum Operating Time:	30 Minutes

NOTE: Ensure that your concentrator is at least three (3) inches away from walls, draperies or furniture to assure sufficient air flow. Avoid deep pile carpets and heaters, radiators or hot air registers.

Plug in Power Cord

1. Plug in power cord to an electrical outlet.

Connect Humidifier (If So Prescribed)

NOTE: For this procedure, refer to FIGURE 5.1 - FIGURE 5.4.

1. Fill humidifier with distilled water to the level indicated by the manufacturer. (For Platinum 5,XL - recommended humidifiers are: Invacare 3260, 003-40, or 006-40).

⚠ WARNING

DO NOT overfill humidifier.

Replace the humidifier cap and securely tighten.

DO NOT reverse the oxygen input and output connections. Water from the humidifier bottle will travel through the cannula back to the patient.

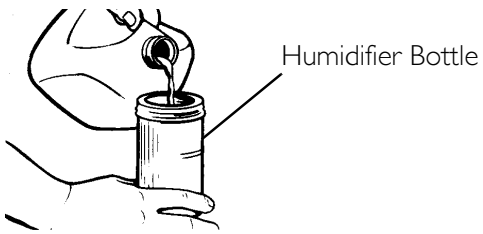


FIGURE 5.1 Filling the Humidifier

2. Place the humidifier bottle in the humidifier compartment.

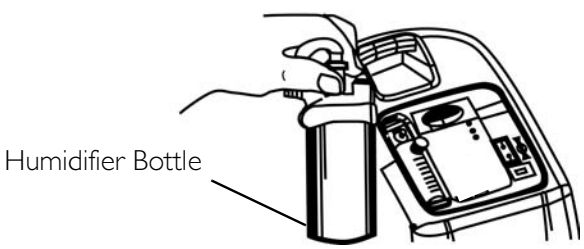


FIGURE 5.2 Humidifier Compartment

3. Remove the filter access door located on the side of the concentrator. Insert a flathead screwdriver in the plate groove on the top edge of the filter access door and gently pry the filter access door open. Refer to Detail "A" in FIGURE 5.3.

4. The humidifier adapter is next to the inlet filter. Pull up and remove the humidifier bottle adapter. Refer to Detail "B" in FIGURE 5.3.
5. Attach it to the humidifier by turning the wing nut on the humidifier bottle counterclockwise until it is securely fastened. Refer to Detail "C" in FIGURE 5.3.

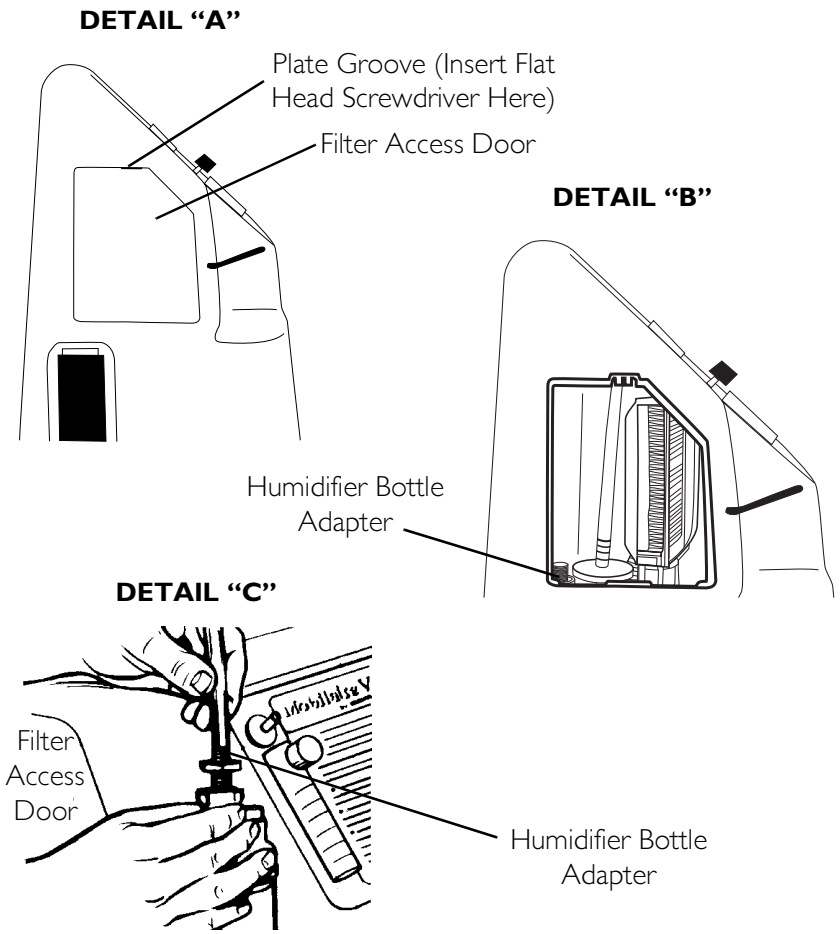


FIGURE 5.3 Attaching the Humidifier Bottle Adapter

6. Attach oxygen tubing from the humidifier bottle to oxygen outlet connector on the oxygen concentrator.

7. Attach the cannula/patient supply tubing to the humidifier bottle outlet.
8. After assembly, ensure that oxygen is flowing through the cannula.

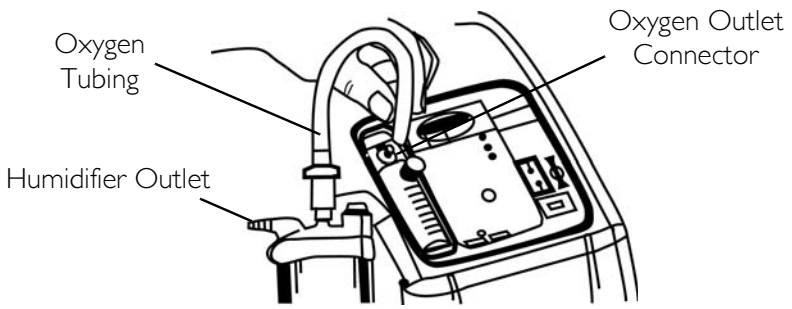


FIGURE 5.4 Attaching the Oxygen Tubing

⚠ WARNING

For optimum performance, Invacare recommends that each concentrator be on and running for a minimum of 30 minutes at a time. Shorter periods of operation may reduce maximum product life.

Power Switch

NOTE: For this procedure, refer to FIGURE 5.5.

1. Press power switch to on position. All the panel lights and the audible alarm will come on for one second, indicating that the unit is functioning properly. After one second, only the GREEN system ok/power light will stay on.

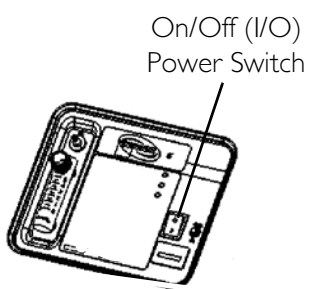


FIGURE 5.5 Power Switch

Flowrate

NOTE: For this procedure, refer to FIGURE 5.6.

1. Turn the flowrate knob to the setting prescribed by your physician or therapist.

⚠ WARNING

DO NOT change the L/min. setting on the flowmeter unless a change has been prescribed by your physician or therapist.

NOTE: To properly read the flowmeter, locate the prescribed flowrate line on the flowmeter. Next, turn the flow knob until the ball rises to the line. Now, center the ball on the L/min. line prescribed.

2. If the flowrate on the flowmeter ever falls below 0.5 L/min. for Platinum 5 (1 L/min. for Platinum 10) for more than about one minute, the LOW FLOW alarm will be triggered. This is a rapid beeping of the audible alarm. Check your tubing or accessories for blocked or kinked tubing or a defective humidifier bottle. After rated flow is restored, more than 0.5 L/min. for Platinum 5 (1 L/min. for Platinum 10), the LOW FLOW audible alarm will go off.

NOTE: The use of some accessories such as the pediatric flowstand and the HomeFill II compressor will deactivate the Low Flow Alarm.

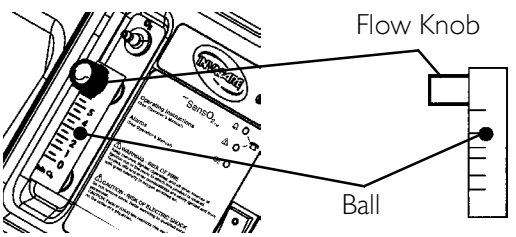


FIGURE 5.6 Flowrate

SensO$_2$ Oxygen Purity Indicator (If Your Unit Features the O$_2$ Sensor Feature)

This feature monitors the purity of oxygen generated by the oxygen concentrator. If purity falls below factory preset standards, indicator lights on the control panel will illuminate.

Initial Startup of the Concentrator

NOTE: Concentrator may be used during the initial start warm-up time (approximately 30 min.) while waiting for the O_2 purity to reach maximum.

When the unit is turned on, the GREEN light will come on (SYSTEM OK/O_2 greater than 85%). After five (5) minutes, the oxygen sensor will be operating normally and will control the indicator lights depending on oxygen concentration values.

Explanation of Oxygen Purity Indicator Lights

NOTE: For this procedure, refer to FIGURE 5.7.

GREEN light (O_2) - Normal Operation.

YELLOW light (⚠) - Call supplier IMMEDIATELY. You may continue to use the concentrator unless instructed otherwise by your supplier. Be certain that backup oxygen is nearby.

RED light (🔔)- Total unit shutdown. Switch IMMEDIATELY to backup oxygen supply. Call supplier IMMEDIATELY.

GREEN light - with YELLOW light flashing - Call supplier IMMEDIATELY. Oxygen sensor malfunctioning; you may continue to use the concentrator.

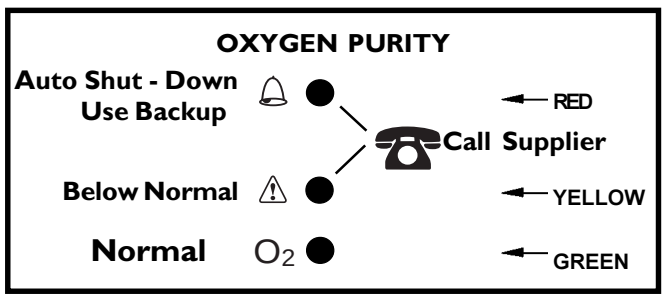


FIGURE 5.7 SensO_2 Oxygen Purity Indicator (If Your Unit Features the O_2 Sensor Feature)

Indicators (If Your Unit Does Not Feature the O_2 Sensor)

NOTE: For this procedure, refer to FIGURE 5.8.

LX models indicator Light Explanation

RED light (🔔) - Total Unit Shut-Down. Switch immediately to a back-up oxygen supply. Call supplier IMMEDIATELY.

GREEN light (I/O) - On/Off. System okay.

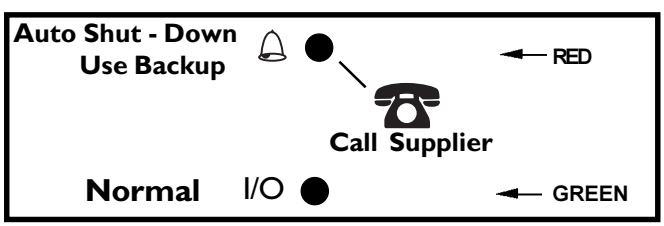


FIGURE 5.8 Indicators (If Your Unit Does Not Feature the O_2 Sensor)

SPECIAL NOTES

SIGNAL WORD	MEANING
DANGER	Danger indicates an imminently hazardous situation which, if not avoided, will result in death or serious injury.
WARNING	Warning indicates a potentially hazardous situation which, if not avoided, could result in death or serious injury.
CAUTION	Caution indicates a potentially hazardous situation which, if not avoided, may result in property damage.

NOTICE

The information contained in this document is subject to change without notice.

⚠ DANGER

Users MUST not smoke while using this device. Keep all matches, lighted cigarettes or other sources of ignition out of the room in which this product is located. No smoking signs should be prominently displayed. Textiles and other materials that normally would not burn are easily ignited and burn with great intensity in oxygen enriched air. Failure to observe this warning can result in severe fire, property damage and cause physical injury or death.

SECTION 1—GENERAL GUIDELINES

In order to ensure the safe installation, assembly and operation of the Platinum concentrator these instructions MUST be followed.

CAUTION

"Caution: Federal law restricts this device to sale or rental by or on order of a physician, or any other practitioner licensed by the law of the State in which he/she practices to use or order the use of this device."

⚠ WARNING

SECTION 1 - 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.

Risk of electric shock. DO NOT disassemble. Refer servicing to qualified service personnel.

The use of oxygen therapy requires that special care be taken to reduce the risk of fire. Any materials that will burn in air, and some that will not, are easily ignited and burn rapidly in high concentrations of oxygen. For safety concerns, it is necessary that all sources of ignition be kept away from the product and preferably out of the room in which it is being used. NO SMOKING signs should be prominently displayed.

A spontaneous and violent ignition may occur if oil, grease or greasy substances come in contact with oxygen under pressure. These substances MUST be kept away from the oxygen concentrator, tubing and connections, and all other oxygen equipment. DO NOT use any lubricants unless recommended by Invacare.

For optimum performance, Invacare recommends that each concentrator be on and running for a minimum of 30 minutes at a time. Shorter periods of operation may reduce maximum product life.

If the concentrator has a damaged cord or plug, if it is not working properly, if it has been dropped or damaged, or dropped into water, call qualified technician for examination and repair.

Keep the cord away from heated or hot surfaces.

DO NOT move or relocate concentrator by pulling on the cord.

NEVER drop or insert any object into any opening.

NEVER block the air openings of the product or place it on a soft surface, such as a bed or couch, where the air opening may be blocked. Keep the openings free from lint, hair and the like. Fill humidifier with water to the level shown by the manufacturer. DO NOT overfill.

Keep unit at least three (3) inches away from walls, draperies, furniture, and the like.

Invacare recommends that Crush-Proof oxygen tubing be used with this product and not exceed 50 ft. (15.2m) in length. Recommended use for Platinum 10 is up to 25 ft. in length of high flow tubing.

FOR ADDITIONAL INFORMATION PLEASE VISIT INVACARE.COM OR CONTACT ALLIANCE MEDICAL AT 1-888-349-2348

SECTION 5—OPERATING INSTRUCTIONS

Introduction

Your oxygen concentrator is intended for individual use indoors. It is an electronically operated device that separates oxygen from room air. It provides high concentration of oxygen directly to you through a nasal cannula. Clinical studies have documented that oxygen concentrators are therapeutically equivalent to other types of oxygen delivery systems.

Your provider will show you how to use your oxygen concentrator. He/She should be contacted with any questions or problems regarding your oxygen concentrator. This owner's manual will tell you about your concentrator and will serve as a reference as you use your concentrator.

Select a Location

⚠ WARNING

NEVER block the air openings of the product or place it on a soft surface, such as a bed or couch, where the air opening may be blocked. Keep the openings free from lint, hair and the like.

Move oxygen concentrator at least 12 inches away from walls, draperies or furniture.

You may select a room where using your oxygen concentrator would be most convenient. Your concentrator can be easily rolled from room to room on its casters.

Your oxygen concentrator will perform best when operated under the following conditions. Refer to Typical Product Parameters on page 12. Usage in environments other than those described may result in the need for increased equipment maintenance. The air intake of the unit should be located in a well ventilated area to avoid smoke, airborne pollutants and/or fumes. DO NOT place in a closet.

Set Up

Plug in Power Cord

Plug in power cord to an electrical outlet.

Connect Humidifier (If So Prescribed)

⚠ WARNING

DO NOT overfill humidifier.

DO NOT reverse the oxygen input and output connections. Water from the humidifier bottle will travel through the cannula back to the patient.

NOTE: For this procedure, refer to FIGURE 5.1, FIGURE 5.2 on page 16, FIGURE 5.3 on page 17.

1. Remove cap from bottle.
2. Fill humidifier with distilled water to the level indicated by the manufacturer. Replace the humidifier cap and securely tighten.

FIGURE 5.1 Filling the Humidifier

3. Insert a flathead screwdriver in the plate groove on the top edge of the filter access door and gently pry the filter access door off (FIGURE 5.2).
4. Pull up and remove the humidifier bottle adapter (FIGURE 5.2).

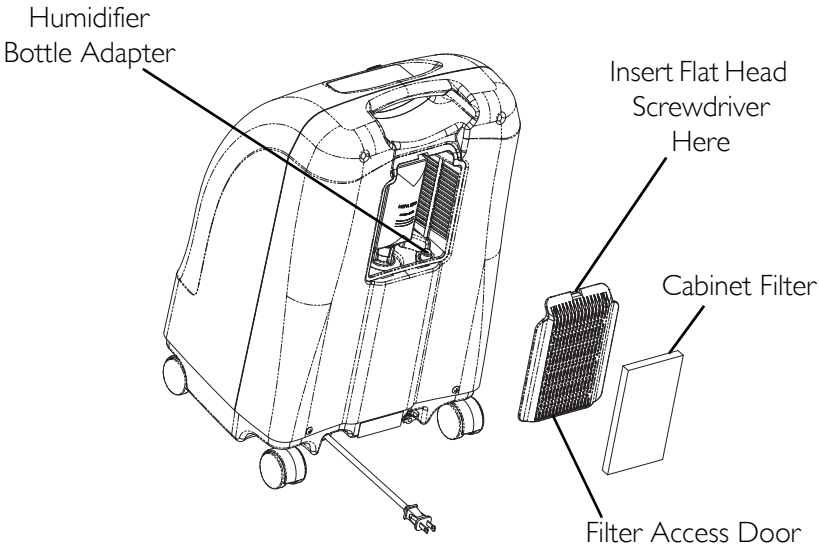


FIGURE 5.2 Humidifer Bottle Adapter

5. Attach the humidifier bottle adapter to the humidifier bottle by turning the wing nut on the humidifier bottle counterclockwise until it is securely fastened. See Detail "A" in FIGURE 5.3.
6. Place the humidifier bottle/adapter assembly in the humidifier compartment on the concentrator. See Detail "B" in FIGURE 5.3.
7. Attach oxygen tubing from the humidifier bottle/adapter assembly to oxygen outlet connector on the concentrator. See Detail "B" in FIGURE 5.3.
8. Attach the cannula/patient supply tubing to the humidifier bottle outlet. See Detail "B" in FIGURE 5.3.
9. After assembly, ensure that oxygen is flowing through the cannula.

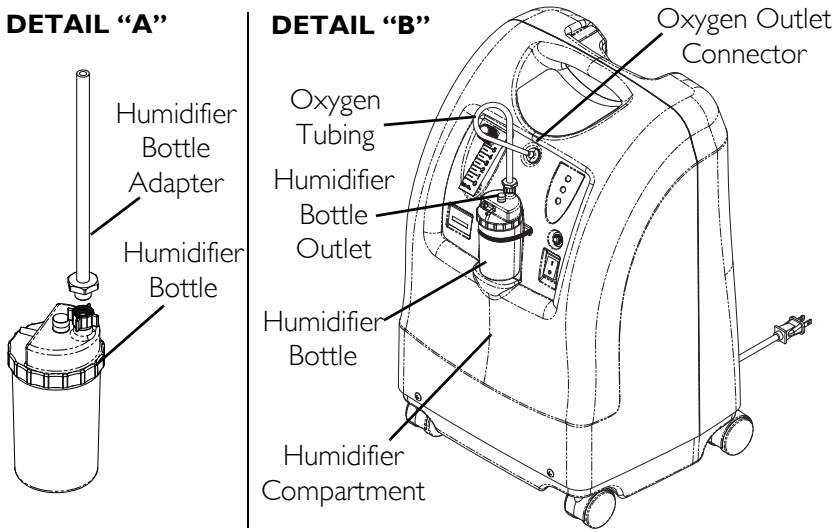


FIGURE 5.3 Humidifier Compartment

Power Switch

NOTE: For this procedure, refer to FIGURE 5.4.

1. Press power switch to on position. All the panel lights and the audible alarm will come on for one second, indicating that the unit is functioning properly.

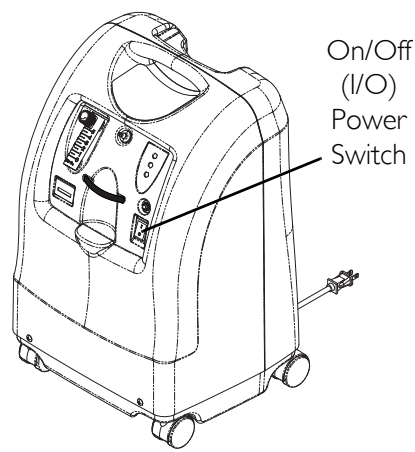


FIGURE 5.4 Power Switch

Flowrate

NOTE: For this procedure, refer to FIGURE 5.5 on page 19.

1. Turn the flowrate knob to the setting prescribed by your physician or therapist.

⚠ CAUTION

Never set the flow greater than 5 L/min.

⚠ WARNING

DO NOT change the L/min setting on the flowmeter unless a change has been prescribed by your physician or therapist.

NOTE: To properly read the flowmeter, locate the prescribed flowrate line on the flowmeter. Next, turn the flow knob until the ball rises to the line. Now, center the ball on the L/min line prescribed.

NOTE: A Potential Obstruction Alert indicates a condition that may be associated with a partial or complete obstruction of oxygen output.

2. If the flowrate on the flowmeter ever falls below 0.5 L/min more than about one minute, the Potential Obstruction Alert will be triggered. This is a rapid beeping of the audible alarm. Check your tubing or accessories for blocked or kinked tubing or a defective humidifier bottle. After rated flow is restored between 0.5 L/min and 0.75 L/min, the Potential Obstruction Alert will turn off.

NOTE: The use of some accessories such as the PreciseRx™ pediatric flowmeter and the HomeFill compressor will deactivate the Potential Obstruction Alert.

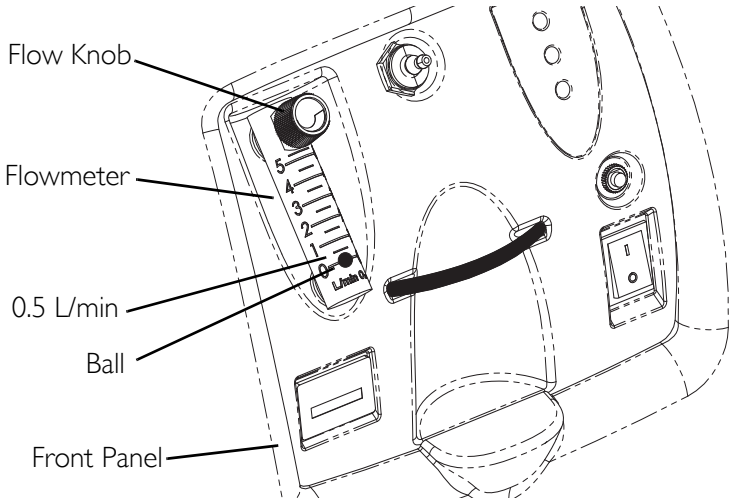


FIGURE 5.5 Flowrate

Front Panel Indicators - Units with SensO$_2$

The SensO$_2$ feature monitors the purity of oxygen generated by the oxygen concentrator. If purity falls below factory preset standards, indicator lights on the control panel will illuminate.

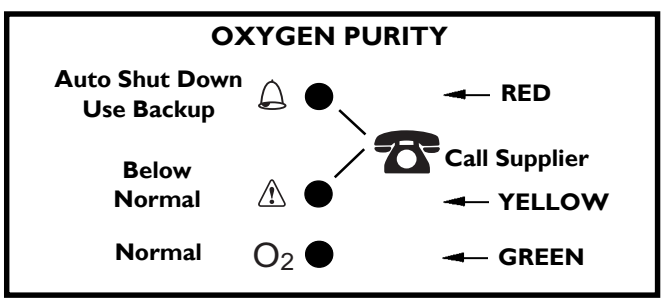


FIGURE 5.6 Front Panel Indicators - Units with SensO2

Initial Startup of the Concentrator

NOTE: Concentrator may be used during the initial start warm-up time (approximately 30 min.) while waiting for the O_2 purity to reach maximum.

LABEL SYMBOL	O_2 PURITY	INDICATOR LIGHTS (LED)
O_2	SYSTEM OKAY O_2 over 85%	GREEN Indicator Light
⚠	O_2 Between 73% to 85%	YELLOW Indicator light A. YELLOW Solid B. YELLOW Flashing Sensor Failure Call a qualified technician. Have a back-up supply of oxygen ready.
🔔	SYSTEM FAILURE O_2 Below 73%	RED Indicator Light Continuous Audible Alarm Sieve-GARD™ Compressor Shut-down. Call a qualified technician. Switch to a back-up supply of oxygen immediately.

Front Panel Indicators - Units without SensO$_2$

NOTE: For this procedure, refer to FIGURE 5.7.

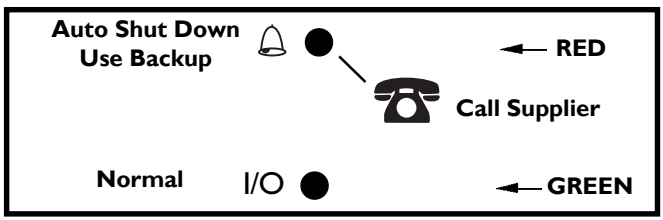


FIGURE 5.7 Front Panel Indicators - Units without SensO2

SECTION 1—IMPORTANT SAFEGUARDS

Important Safeguards

In order to ensure the safe installation, assembly and operation of the Perfecto$_2$ concentrator these instructions MUST be followed.

CAUTION

"Caution: Federal law restricts this device to sale or rental by or on order of a physician, or any other practitioner licensed by the law of the State in which he/she practices to use or order the use of this device."

⚠ DANGER

The use of oxygen therapy requires that special care be taken to reduce the risk of fire. Any materials that will burn in air, and some that will not, are easily ignited and burn rapidly in high concentrations of oxygen. For safety concerns, it is necessary that all sources of ignition be kept away from the product and out of the room in which it is being used. NO SMOKING signs should be prominently displayed.

A spontaneous and violent ignition may occur if oil, grease or greasy substances come in contact with oxygen under pressure. These substances MUST be kept away from the oxygen concentrator, tubing and connections, and all other oxygen equipment. DO NOT use any lubricants unless recommended by Invacare.

For optimum performance, Invacare recommends that each concentrator be on and running for a minimum of 30 minutes at a time. Shorter periods of operation may reduce maximum product life.

If the concentrator has a damaged cord or plug, if it is not working properly, if it has been dropped or damaged, or dropped into water, call qualified technician for examination and repair.

Keep the oxygen tubing, cord, and unit away from heated or hot surfaces, including space heaters, blankets, stoves and similar electrical appliances.

DO NOT move or relocate concentrator by pulling on the cord.

NEVER drop or insert any object into any opening.

NEVER block the air openings of the product or place it on a soft surface, such as a bed or couch, where the air opening may be blocked. Keep the openings free from lint, hair and the like. Fill humidifier with water to the level shown by the manufacturer. DO NOT overfill.

Keep unit at least three inches away from walls, draperies, furniture, and the like.

Invacare recommends that Crush-Proof oxygen tubing be used with this product and not exceed 50 ft. (15.2m) in length.

Radio Frequency Interference

Most electronic equipment is influenced by Radio Frequency Interference (RFI). Caution should be exercised with regard to the use of portable communications equipment in the area around such equipment.

To Reduce The Risk Of Burns, Electrocution, Fire Or Injury To Persons.

DO NOT come in contact with the concentrator while wet.

DO NOT place or store product where it can drop into water or other liquid.

DO NOT reach for product that has fallen into water. Unplug IMMEDIATELY.

A product should NEVER be left unattended when plugged in.

Use this product for only intended use as described in this manual.

DO NOT connect the concentrator in parallel or series with other oxygen concentrators or oxygen therapy devices.

Use of some administration accessories or certain humidifiers not specified for use with oxygen concentrator may impair the performance.

This equipment is to be used as an oxygen supplement and is not considered life supporting or life sustaining.

Avoid creation of any spark near medical oxygen equipment. This includes sparks from static electricity created by any type of friction.

Portable Oxygen Cylinders
Training and Safety Guidelines

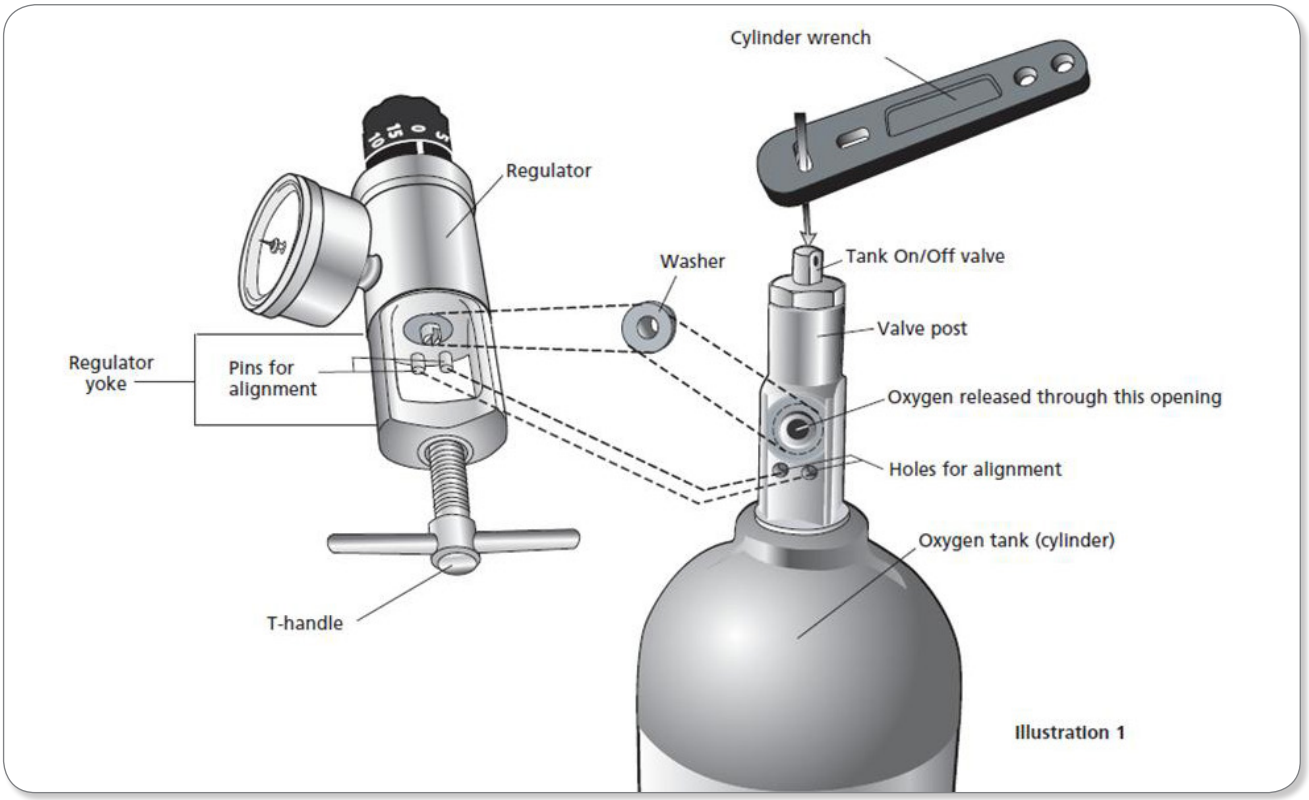


Illustration 1

For your Safety

It is very important to understand that oxygen can be dangerous if not used correctly. Oxygen makes things burn more easily and can even explode. Following these safety guidelines will help reduce potential risks. Refer to Manufacturer website if you would like further information about your equipment.

- Post the *Oxygen in Use* sign that comes in your oxygen kit where visitors can see it.
- Keep your oxygen tanks (cylinders) away from all heat sources, including radiators, heat ducts, stoves, fireplaces, matches, and lighters.
- Do not permit open flames, sparks, or burning tobacco in the room where oxygen is being used.
- Use only as prescribed by your physician.
- While using oxygen, do not use
  - aerosols such as hair spray or paint
  - oil-based face creams or lotions on your nose or face
  - petroleum-based products such as Vaseline
- Keep the cylinder you are using in a stand or cart.
- Extra cylinders should be stored lying on their sides. Block them so they do not roll around. If the valve post were to break off of a cylinder, it could cause considerable harm to anything in its path.

– It is normal that small amounts of oxygen will leak from cylinders so it is important to always keep oxygen cylinders in a well ventilated area. Only store them in a closet if there is a vent in the door. If you keep cylinders under the bed, make sure the covers do not interfere with the air circulating.

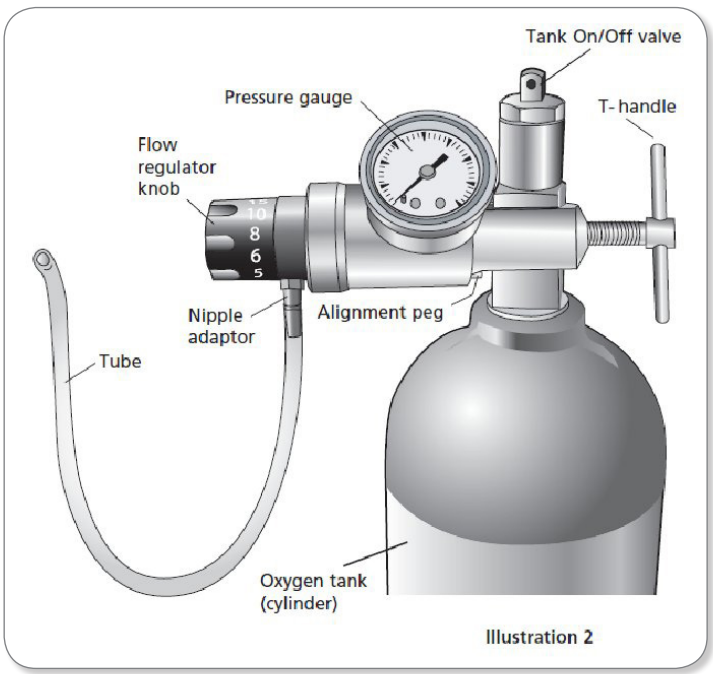


Illustration 2

How to use oxygen cylinders

1. Be sure the flow regulator knob is set at 0 (see *illustration 2).*
2. Make sure the T-handle is tight.
3. Place the cylinder wrench on the cylinder's on/off valve, located at the top of the cylinder.
4. Open the valve by turning it counter-clockwise one full turn. As the valve opens, the gauge on the regulator will show the amount of pressure in the cylinder. A full cylinder will read about 2000 psi (pounds per square inch).
5. Adjust the flow regulator knob to the flow rate your doctor prescribed.
6. Attach tubing to the nipple adaptor on the regulator.

How to use the nasal cannula

You will receive an oxygen kit containing two lengths of tubing, a connector, and nasal cannulas. The nasal cannula will be your source of oxygen delivery. The cannula is a narrow tube with soft prongs that are placed in the nostrils to deliver oxygen. When placing the cannula, place the prongs in your nostrils with the curve facing down. Change your cannula every 2 weeks. Change your oxygen tubing every 2 months.

When to change your oxygen cylinder

Check your pressure gage often to know when to change your cylinder. When the needle gets to the lower part of the red section on the regulator, it is time to change the cylinder. Be sure to change the cylinder before the needle gets below 200 psi.

It is important to keep a sufficient supply of full cylinders in your home in case of an emergency. Intermountain Homecare & Hospice will supply you with one month's supply of oxygen. Call to order more cylinders when your supply gets down to 2 cylinders or about 20% of the amount you received at your first delivery.

How to change your oxygen cylinder

Turn off the oxygen flow

1. Using the small cylinder wrench, turn the cylinder on/off valve clockwise to close it.
2. Bleed off the pressure in the valve by opening the flow regulator knob.
3. When the gauge reads zero, turn the flow regulator knob to zero.

Change the cylinder

4. Remove the regulator by loosening the T-handle.
5. Slide the pegs out of the holes on the valve post and remove the regulator.

6 Remove the tab from the valve post on the new cylinder (see *illustration 1*).

7 Make certain there is a washer on the large post on the regulator.

8 Attach the regulator to the cylinder by slipping the regulator over the valve post of the cylinder.

9 Align the pegs located on the inside of the regulator yolk with the holes in the valve post.

10 Slide the regulator forward so the pegs go into the holes (see *illustration 1*).

11 Turn the T-handle on the regulator until it is tight. If the handle is not tight enough or if the washer is not in place, the cylinder will leak when the valve is opened (see *illustration 2* for proper placement).

Turn on the oxygen flow

Be sure that the flow regulator knob on the regulator is shut. This knob is usually marked with numbers.

12 Make sure the T-handle is tight.

13 Place the cylinder wrench on the cylinder's on/off valve, located at the top of the cylinder.

14 Open the valve by turning it counter-clockwise one full turn. As the valve opens, the gauge on the regulator will show the amount of pressure in the cylinder. A full cylinder will read about 2000 psi (pounds per square inch).

15 Adjust the flow knob on the regulator until the gauge reaches the flow rate your doctor prescribed.

16 Attach tube to the nipple adaptor on the regulator.

How to travel with your oxygen cylinders

- Oxygen cylinders must be secured when being transported so they do not roll or bump against other cylinders or objects.
- Crack a window in the vehicle to increase ventilation.
- Keep cylinders out of direct sunlight.
- Do not store cylinders in the trunk of a vehicle.
- If you will be traveling outside of our service area for an extended amount of time, please call us. We will help you coordinate appropriate oxygen services while you travel.

Call your doctor if...

- You think the amount of oxygen you are receiving should be changed.

Call Intermountain Homecare & Hospice if...

- You experience any problems with your oxygen equipment.

If you are observed in violation of any of these oxygen safe use guidelines, Intermountain Homecare & Hospice reserves the right to discontinue your oxygen services for your safety and the safety of those around you.

Oxygen Cylinder Use Timeline

	Flow Rate	Full Tank 2000 PSI	¾ Tank 1500 PSI	½ Tank 1000 PSI	¼ Tank 500 PSI
M - Cylinder	1/32	76 days	56 days	38 days	18 days
	1/16	38 days	28 days	19 days	9 days
	1/10	24 days	18 days	12 days	6 days
	1/8	19 days	14 days	9.5 days	4.5 days
	1/4	9.5 days	7 days	4.5 days	2 days
	1/2	4.5 days	3.5 days	2 days	1 day
	1	2.4 days	43 hours	28.75 hours	14 hours
E - Cylinder	1/10	100 hours	75 hours	50 hours	25 hours
	1/8	83 hours	62 hours	41 hours	20 hours
	1/4	41 hours	30 hours	20 hours	10 hours
	1/2	20 hours	15 hours	10 hours	5 hours
	1	13 hours	9 hours	6 hours	3 hours
	2	5 hours	3.5 hours	2.5 hours	1.1 hours
	3	3.4 hours	2.3 hours	1.5 hours	0.7 hours
	4	2.5 hours	1.75 hours	1.1 hours	0.5 hours
D - Cylinder	1/32	160 hours	96 hours	64 hours	48 hours
	1/16	80 hours	48 hours	32 hours	24 hours
	1/10	50 hours	30 hours	20 hours	15 hours
	1/8	40 hours	24 hours	16 hours	12 hours
	1/4	23 hours	17 hours	12 hours	6 hours
	1/2	11 hours	9 hours	6 hours	3 hours
	3/4	8 hours	6 hours	4 hours	2 hours
	1	5 hours	3 hours	2 hours	1.5 hours
	2	2.5 hours	1.5 hours	1 hour	0.75 hours
C - Cylinder	1/32	80 hours	60 hours	40 hours	20 hours
	1/16	40 hours	30 hours	20 hours	10 hours
	1/8	20 hours	15 hours	10 hours	5 hours
	1/4	11.5 hours	8.6 hours	5.6 hours	2.8 hours
	1/2	5.5 hours	4.1 hours	2.75 hours	1.4 hours
	1	2.5 hours	1.9 hours	1.25 hours	0.63 hours
	2	1.25 hours	0.95 hours	0.75 hours	0.31 hours
	3	0.75 hours	0.56 hours	0.38 hours	0.2 hours

This chart shows the approximate amount of time a cylinder will last based on continuous oxygen flow. Use this chart to help you know how long your cylinder will last you and when to order more cylinders.

Alliance Medical
At the Center of Care

Nebulizer Instructions

Getting Started

Always wash your hands before handling any of your respiratory equipment and supplies.

Your Prescription

A nebulizer machine used with a nebulizer cup turns liquid medicine into a mist so it can be inhaled. Your doctor has ordered this system for you; using this to deliver your medication is called a "treatment".

Your order includes:

- How much medicine to use
- How many times each day you are to take your treatment(s)

Nebulizer Machine

A nebulizer machine is a small air compressor that is set to deliver a specific liter flow of air.

It has the following parts:

- Electrical plug
- On/off switch
- Tubing port
- Filter

To use the nebulizer:

1. Place the nebulizer on a flat surface
2. Plug the nebulizer into an electrical outlet
3. Connect the tubing to the port of the nebulizer

Nebulizer Cup

The nebulizer cup holds the liquid medication. The nebulizer cup together with the nebulizer machine turns the liquid medication into a mist so it can be inhaled.

The nebulizer cup has the following parts:

- Mouth piece (or mask)
- Cup
- Tower
- Top of cup (twists on in place)
- Tubing stem

To use the nebulizer cup:

1. Place medicine into cup
2. Place and twist top in place
3. Place mouth piece (or mask) into top of nebulizer cup
4. Attach tubing to the tubing stem

Start Your Treatment

1. Turn on the nebulizer machine
2. Check for mist coming out of the nebulizer cup. (If no mist, check for secure connections and be certain the nebulizer cup's tower is in place)
3. Put the nebulizer mouth piece into your mouth – between your teeth and over your tongue
4. If you are using a mask – secure it over your nose and mouth and breathe with your mouth open

Breathe slowly and take occasional deep breaths with a breath hold (if able). Continue the treatment until all of the medication is gone.

If you have any of these side effects, stop your treatment and call your doctor:

- Shaky
- Nausea
- Dizziness
- Increased heart rate or chest pain

When your treatment is done:

1. Turn off the nebulizer machine
2. Rinse the nebulizer cup under running water – allow to air dry

Cleaning Your Nebulizer Cup

After your last treatment of the day:

1. Take the nebulizer cup apart
2. Wash the pieces in warm soapy water
3. Rinse well
4. Allow to air dry

Once a week you will need to disinfect your nebulizer cup:

For disposable cups:

1. Clean in warm soapy water
2. Make solution of 1 part white vinegar and 3 parts water
3. Allow all parts of the nebulizer cup to soak in this solution for 30 minutes
4. Rinse well
5. Allow to air dry

For non-disposable cups:

1. You may clean as above
2. These cups can be boiled for 20 minutes
3. These cups are dishwasher safe (Be sure to place in a mesh bag so as not to damage or lose the small components)
4. Allow to air dry

With proper cleaning non-disposable cups will last up to six months!

Cleaning the Machine

1. Unplug the machine from electricity and wipe off with a damp cloth
2. Remove filter and wipe off with a damp cloth

Safety

- Do not place or store the nebulizer machine by water
- Always unplug the machine to wipe off when cleaning
- Supervise when machine is being used by children
- Never operate if the cord is damaged
- Keep the cord away from heated surfaces

Kwikpoint®

FDA

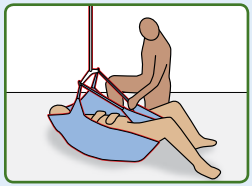
Patient Lifts

SAFETY GUIDE

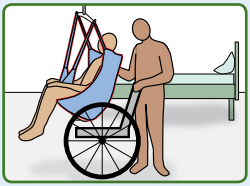
This guide provides general safety recommendations and is not a replacemer
for the manufacturer's instructions. Refer to manufacturer's instructions for

1 Caregiver Safety Tips

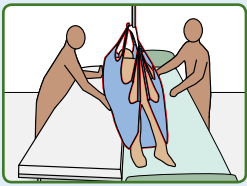
Using lifts for these activities may help caregivers avoid back injury



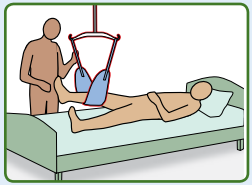
✓ Lifting from floor



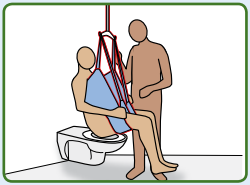
✓ Bed-Chair transfer



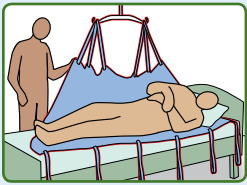
✓ Lateral transfer



✓ Lifting limbs

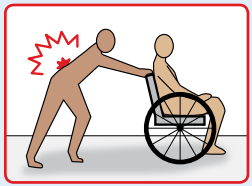


✓ Toileting/Bathing

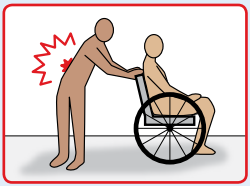


✓ Repositioning

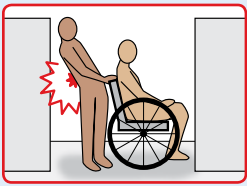
DO NOT push, pull or lift weight while…



Off-balance or leaning forward



Twisting and/or reaching



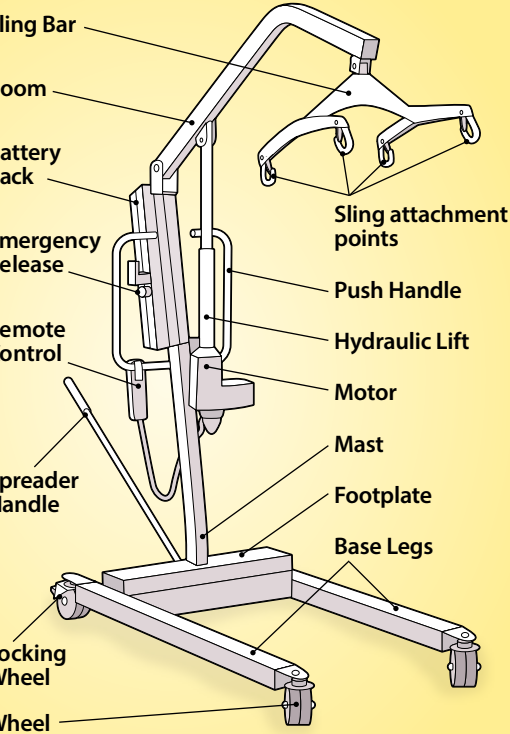
Entrapped in a confined space

! Work as close to patient as possible to avoid stress of leaning.

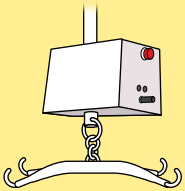
Know Your Lift

! Patient falls from lifts may cause injuries, including head trauma, fractures and death.

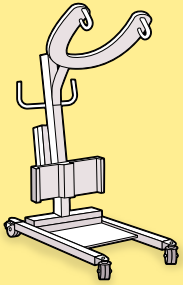
Receive training and practice before operating a lift.



Floor-Based, Full-Body Sling Lift



Overhead Full-Body Sling Lift



Sit-to-Stand Lift

A floor-based, full-body sling lift is featured throughout this guide; however the information applies to all patient lifts.

3 Check Patient's Condition

Before using a patient lift, check:

Patient's physical capabilities

- ✓ Check to see if patient can assist with transfer.
- ✓ Check patient's weight and physical condition; use manufacturer's guidelines to make sure lift is appropriate.
- ✓ Determine how many caregivers are required to safely lift the patient.

Patient's medical condition

- ✓ Make sure you have correct lift and sling for patient's condition.
- ✓ Ensure the lift will not make the patient's condition worse.

Patient's mental status

- ✓ If alert, ensure patient is able to understand and follow instructions.
- ✓ Make sure patient is ready to be placed in a lift.

The use of a patient lift should be avoided if the patient

Select Patient's Sling Size

1 Assess patient's size, weight and hip measurement.

2 Choose size of sling based on manufacturer recommendation for patient's measurements. Choosing correct sling size is critical for safe patient transfer.

SLING TOO LARGE:

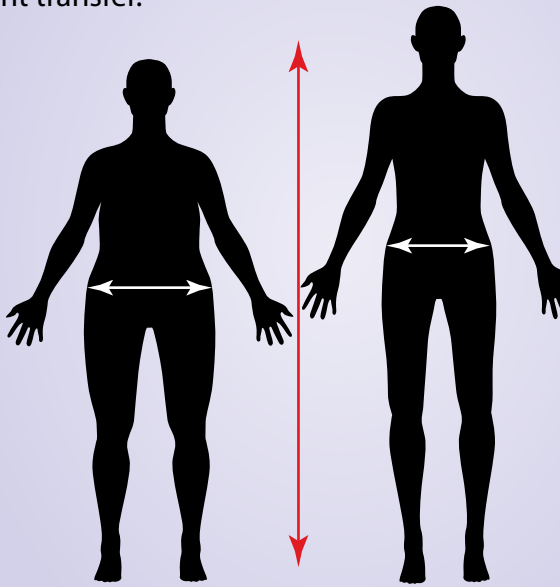
Patient may slip out.

SLING TOO SMALL:

Patient may fall out. Sling may worsen patient's condition.

IF BETWEEN SIZES:

Smaller size may keep patient more secure.



! Using the wrong sling or attaching the sling incorrectly may cause an accident that can result in serious injury or death.

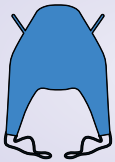
5

Choose Sling and Sling Bar

! Only use a sling specifically designed for your lift. Using the wrong sling may cause serious injury.

To increase patient safety, use the correct type and size of sling for your patient. Select sling and sling bar based on manufacturer recommendations for the following criteria:

- ✓ Type of transfer task
- ✓ Patient's medical condition
- ✓ Patient's size and weight
- ✓ Pressure sensitivity
- ✓ Need for full back support
- ✓ Need for head support
- ✓ Need for padding
- ✓ Patient's preferred or medicall appropriate position



U-shaped

Full-Body

Some medical conditions such as stroke orthopedic conditions, amputations or certain wounds may affect sling choice.

Sling Bars

- ✓ Use a sling bar that is appropriate for the patient's size.
- ✓ Choose sling bar/sling combination that will place patient at a safe angle.

- ✓ Only use sling with correct clip or loop attachment type for the sling bar.

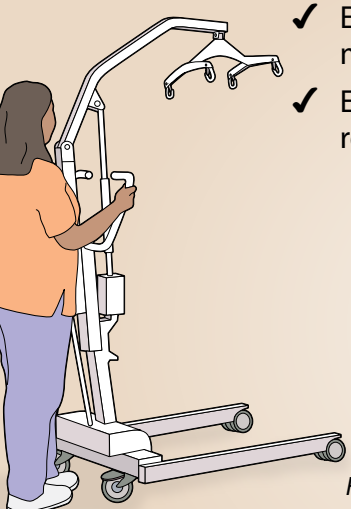
Prepare Environment

Determine number of caregivers needed:

- ✓ Most lifts require two or more caregivers to safely operate lift and handle patient.

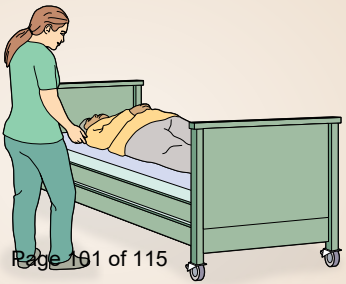
Position lift and receiving surface:

- ✓ Move lift base legs near or around patient's device. Base legs are usually more stable in full open position.
- ✓ Position lift and receiving surface at correct height to transfer patient easily.



Clear path for lift:

- ✓ Ensure there is space for lift to pivot and move freely to receiving area.
- ✓ Ensure lift is able to fit under or around receiving surface and through doorway.



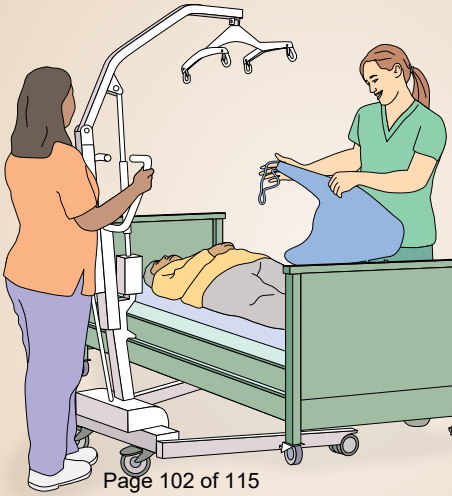
For thick carpet, consider choosing a lift with large

7

Prepare Equipment

! Do not use lift to transport patient unless lift is specifically designed for transport.

- ✓ Ensure battery is charged for transfer.
- ✓ Test lift controls before bringing lift to patient. **Make sure the emergency release feature works.**
- ✓ Ensure receiving surface is stable and locked.
- ✓ Ensure slings, hooks, chains, straps and supports are available, appropriate and correctly sized.
- ✓ Check lift and sling weight limits. Ensure patient's weight does not exceed the limits.
- ✓ Examine sling and attachment areas for tears, holes and frayed seams. **DO NOT USE sling with any signs of wear.**



Place Patient in Sling

! Using the wrong sling or attaching the sling incorrectly may cause serious injury to the caregiver or patient.

1 Place patient in sling.

- Position center of sling under patient's spine.
- Place leg straps flat under patient; do not let material fold.
- Make sure sling opening is not large enough to let patient slip out or too small to let patient fall out.

2 Lower sling bar down to patient. Do not let sling bar hit patient

3 Attach sling straps to sling bar as directed by manufacturer.

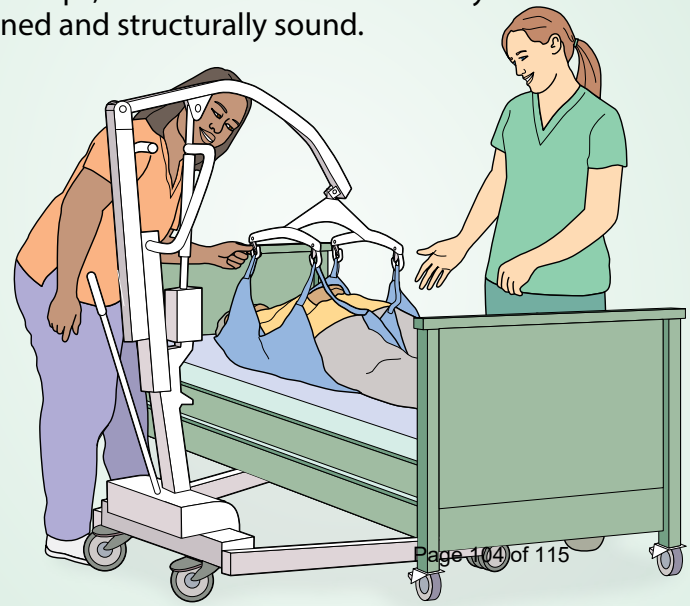
- Use matching loops from each side to ensure sling is balanced. Choose loops that provide best angle and position for patient.
- Ensure all clips or loops are secure and will stay attached as patient is lifted.
- Ensure straps are not twisted.
- Ensure patient's head and/or

9

Perform Safety Check

Before lifting the patient, perform safety check:

- ✓ Examine all hooks and fasteners to ensure they will not unhook during use.
- ✓ Double-check position and stability of straps and other equipment before lifting patient.
- ✓ Ensure clips, latches and bars are securely fastened and structurally sound.



For electric lifts, make sure batteries are always charged

Lift the Patient

! Do not leave patient unattended while in lift. Never keep patient suspended in sling for more than a few minutes.

1. Lift patient two inches off the surface to make sure patient is secure. Check the following:

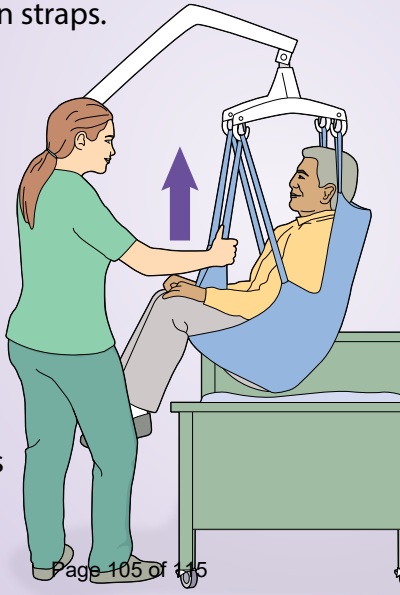
- ✓ Sling straps are confined by guard on sling bar and will not disengage.
- ✓ Weight is spread evenly between straps.
- ✓ Patient will not slide out of sling or tip backward or forward.

2. Check patient's comfort:

- ✓ Make sure sling does not pinch or pull patient's skin.
- ✓ Ask if patient is comfortable.
- ✓ Look for non-verbal signs of discomfort.

3. Slowly lift patient, only as high as necessary to complete transfer. Check the following:

- ✓ Patient is still comfortable.
- ✓ Sling will not hurt patient's skin.



11 Lower the Patient

1. Use gentle hands-on pressure to guide patient as you slowly move lift toward receiving surface.

! Holding or supporting patient's weight while in sling may cause straps or hooks to detach from lift.

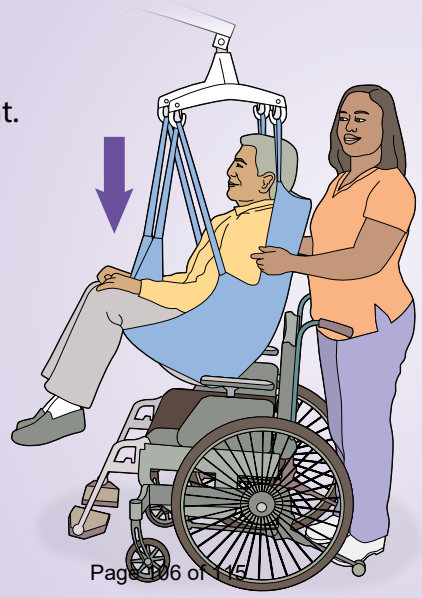
2. Slowly lower patient toward receiving surface. Move patient's body into correct position on receiving surface before releasing patient's weight.

3. Release patient's weight.
Do not let sling bar hit patient.

4. Detach sling from lift using manufacturer's instructions.

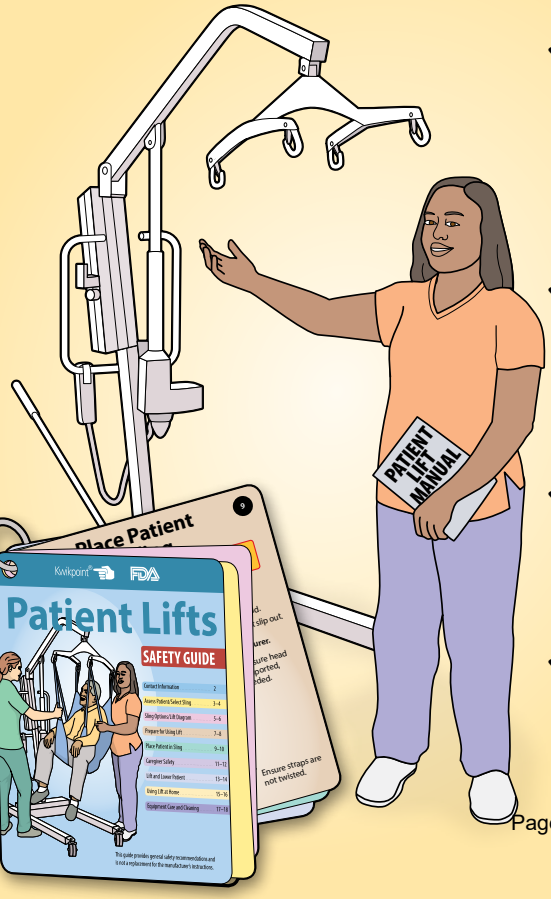
5. Carefully remove sling from patient's body, if necessary.

- ✓ Be careful not to hurt patient's skin.
- ✓ Ensure that seated patients do not fall forward as sling is removed.



f power fails, use the emergency elease to lower patient manually.

Patient Lifts at Home



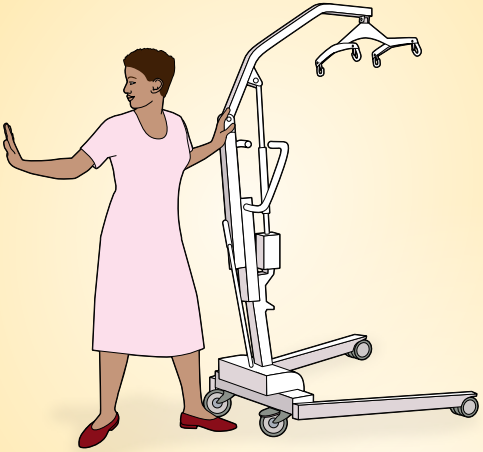
- ✓ Get training from a qualified medical professional before operating a patient lift at home.
- ✓ Keep manufacturer's instructions close to your lift and always follow them.
- ✓ Have a back-up plan in case your lift stops working properly.
- ✓ When selecting a lift for home use, ensure you have the required number of caregivers needed to operate the lift.

13

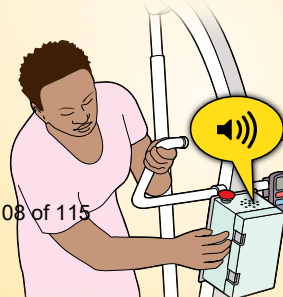
Patient Lifts at Home

! Never operate a lift by yourself if the lift requires more than one person for operation.

- Keep children and pets away from lift.



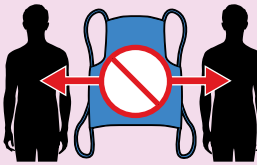
- Make sure you recognize and understand the alarms and error messages. Always follow through when you hear an alarm.



- Call your supplier or manufacturer if you need help or have a problem with the device.

Sling Care

Do not share slings between patients unless slings are properly washed and disinfected.



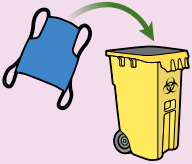
! Disinfect slings after every use.

Follow manufacturer sanitation and wash instructions. Remove metal or plastic reinforcements if required.

Disinfect and scrub areas that contact patient's skin.

Air dry only.
Do not machine dry.

Do not bleach.
Do not iron.



Throw away used disposable slings.

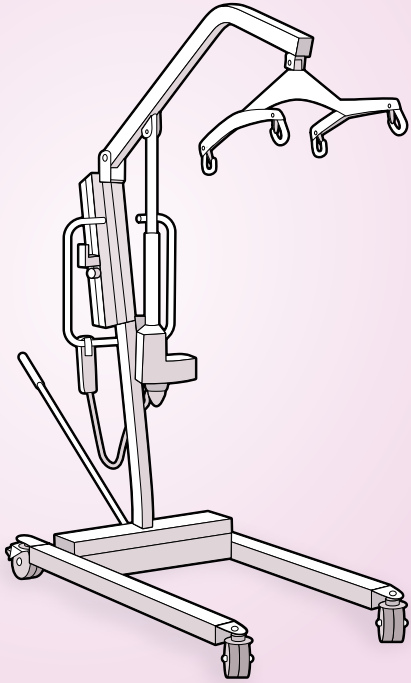
! Do not use slings that are frayed, ripped or have holes. If sling shows signs of wear, replace it immediately.

15 Patient Lift Care

Follow manufacturer instructions to clean and disinfect lift. Always clean lift before and after each patient use.

- ✓ Disinfect all lift surfaces.

- ✓ Wipe off traces of disinfectant.



- ✓ Clean motor casings and ceiling tracks if using an overhead lift.

Operating Your Oxygen Concentrator

Oxygen concentrators are available in different sizes and models. However, all models have the same basic parts: a power switch to turn the unit on and off, a flow selector that regulates the amount oxygen you receive, an alarm system that alerts you if the power is interrupted, and if prescribed, a humidifier unit that allows the oxygen to be moisturized so it will not dry out your nose, mouth, and throat.

The following step-by-step instructions will help you operate your oxygen concentrator:

Step 1:

- Plug the cord into a grounded electrical outlet.
- If your outlet is not grounded you will need to use a plug adapter.
- **Do not** use an extension cord with the concentrator.
- **Do not** plug the concentrator into an outlet that has other appliances plugged into it.

Humidification Bottle-Humidifier Tubing Connector-(May vary slightly)

Step 2:

- If prescribed, attach the humidification bottle filled with distilled water.
- Center the threaded cap on the humidification bottle with the humidifier tubing connector (black)
- Turn the cap on the humidification bottle until it is tightly screwed onto the outlet.

Step 3:

- Attach the oxygen tubing to the port on the lid of the humidification bottle.
- If you are not using humidification, you should attach an oxygen adapter to the concentrator outlet and attach the oxygen tubing to the oxygen adapter.

Step 4:

- Press the ON/OFF switch to the ON position.
- The alarm will sound for a few seconds after the concentrator is turned on.
- The oxygen concentrator must be turned on 15-20 minutes before using to ensure the concentrator is making the correct concentration of oxygen.

Step 5:

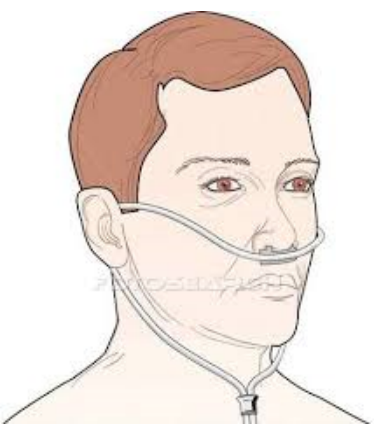
- Adjust the oxygen flow rate by turning the liter control knob until the flow is at the prescribed number.
- Flowmeter with Liter Tube:
    - Adjust the liter control knob until the middle of the indicator ball is at the prescribed number.

Your doctor has prescribed the oxygen rate for you.

Never change this liter flow without instructions from your doctor.

Step 6:

- Fit the nasal cannula or oxygen mask to your face so that it is comfortable.
- Nasal Cannula:
    - Insert the two prongs of the cannula into your nostrils.
    - Make sure the prongs face upward and curve into your nostrils.
    - Slide the tubing over and behind each ear.
    - Adjust the tubing to fit comfortably under your chin by sliding the adjustor upward.
    - Be careful not to adjust it too tightly.
    - Regularly check the ears and inside the nose for pressure areas and/or sores from the nasal cannula.



Maintaining Your Oxygen Concentrator

Your oxygen concentrator is a durable dependable piece of equipment and will continue to operate efficiently with just a few simple maintenance procedures.

As needed, you should unplug the concentrator and wipe the outside of the cabinet with a clean damp cloth. Never use wax, cleaning sprays, or furniture polish. Many of these products are flammable.

Once a week you should clean the outside air inlet filter if located on the concentrator using the following procedure:

Step 1: Remove the filter from the side or back of the concentrator.

Step 2: Wash the filter with warm water only.

Step 3: Thoroughly rinse the filter with warm water.

Step 4: Gently squeeze excess water from the filter and pat it dry with a clean paper towel.

Step 5: Replace the filter in the opening on the side or back of the concentrator.

Youou should never open your unit and attteempt any repairs on your own. Should you havee any problems with your oxygen concentra attoor at any time call our office immediately. We maaiintain service 24 hours a day, 7 days aa week for equipment emergencies. 1-888-349-2348

Care of Your Oxygen Humidification Bottle

If you are using humidification with your oxygen concentrator, you will need to check the water level in the bottle frequently. When the water (preferably distilled water) runs or the bubbling stops, you will need to refill the bottle.

Refilling the Oxygen Humidification Bottle:

Step 1: Wash your hands.

Step 2: Turn the oxygen concentrator off and remove the humidification bottle from the oxygen concentrator.

Step 3: Unscrew the lid from the humidification bottle.

Step 4: Discard any water remaining in the humidification bottle.

Step 5: Refill the humidification bottle with distilled water to the fill line marked on the bottle. Do not overfill the bottle. Too much water in the bottle will cause the water to collect in your oxygen tubing.

Step 6: Screw the lid back on the humidification bottle until it is tight. Reattach the humidification bottle to your oxygen concentrator.

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Commitment Comunication Consistency

Suction Unit

Getting Started with your Suction Unit

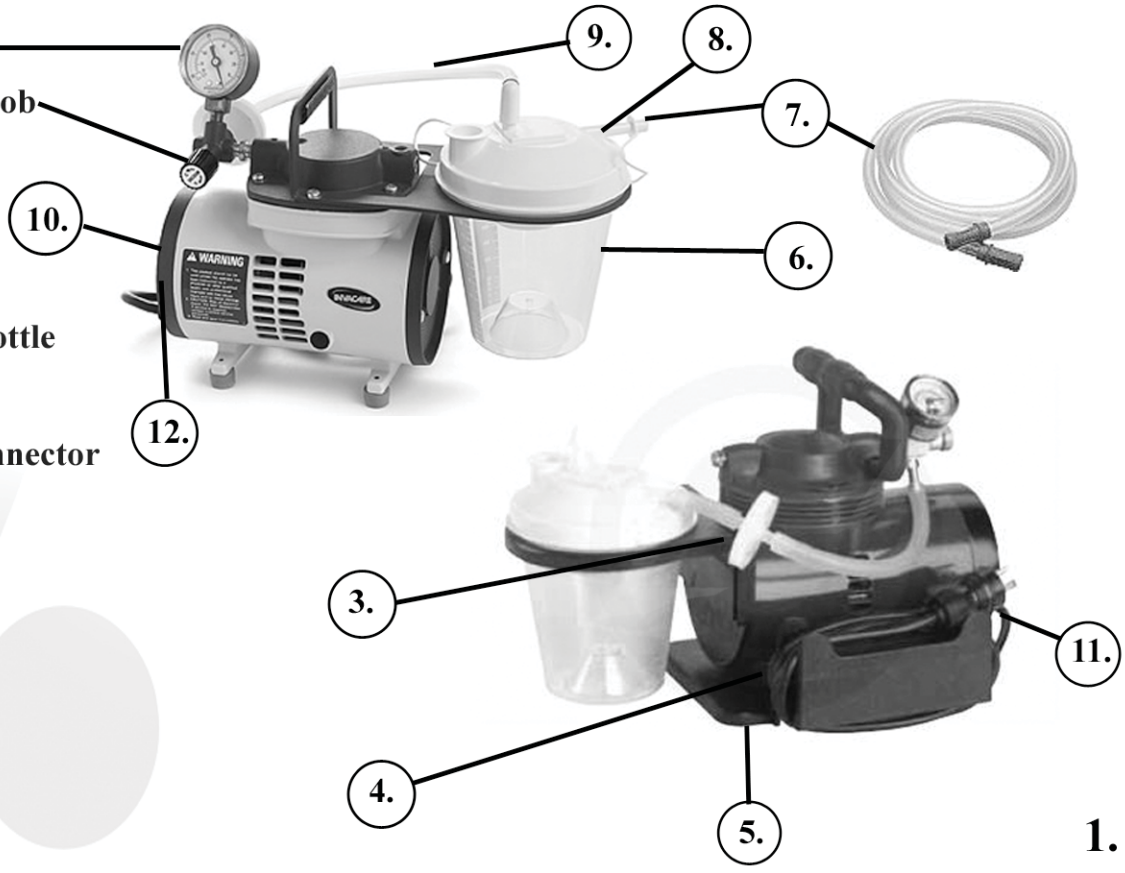
Set up

1. Connect either end of the connecting tubing (item# 9) to the top of collection bottle connector then connector then connect the other end to the bacteria filter.
2. The patient tubing should be connected to collection bottle at the outlet labeled (patient).
Please assure that all connections are secure and without leaks before using.

How to Operate Your Suction Unit

1.Before use, check the specification label on the side of the suction unit to ensure that the voltage and current indicated on the unit correspond with the voltage and current available. Make sure the power switch located on the side of the unit is in the **"OFF"** position before connecting the unit to a power source.
2.Switch the power switch to "I" position (on), the unit start running.
3. Adjust the vacuum level from 0 to 520 mm Hg by turning the vacuum adjust knob (clockwise) to increase vacuum and counter-clockwise to decrease vacuum). Referring to the vacuum gauge while setting the desired level of vacuum. To accurately read the gauge, block the patient end of the hose or cap off the collection bottle and allow the gauge to reach a stable vacuum reading.
4. Place the patient tubing to the appropriate position of patient and start to suck sputum.
5. When the sputum reaches the safe full level of collection bottle (800cc), the suctioning will stop sucking automatically (float shut-off).
6. Switch the power switch to **"O"** position (off), shut off the suction motor.
7.Remove the sputum from collection bottle after the motor stops turning completely.
8.Turn on the unit and start to run the suction unit again.

1. Vacuum Gauge
2. Vacuum Adjust Knob
3. Bacteria Filter
4. Cord Caddy
5. Base
6. 800cc Collection Bottle
7. Patient Tubing
8. Patient Tubing Connector
9. Connection Tubing
10. Power Switch
11. Power Cord
12. Fuse



Cleaning & Maintenance

Clean Collection Bottle:

1. Turn off the suction unit and allow vacuum to drop, then disconnect AC power source.
2. With the collection bottle still in the holder, remove the collection bottle lid. The bottle can now be taken out of the holder to be emptied **(Collection bottle should be emptied after each use)**
3. Collection bottle should be thoroughly cleaned after each use by one of the following methods:
   a. Wash in a hot water/dish washing detergent solution and rinse with clean, hot tap water. Then wash in one part vinegar to three parts hot water solution. Rinse with hot tap water and air dry.
   b. Wash with rubbing alcohol and air dry.
   c. Wash with a commercial (bacterial germicidal) disinfectant, follow disinfectant manufacturer's recommended instructions and dilution rates carefully.

Clean Suction Unit and Collection Bottle Lid:

1. Disconnect the suction unit from all external power sources.
2. Wipe the suction unit housing and collection bottle lid with a clean cloth and any commercial (bacterial-germicidal) disinfectant.

Clean Tubing:

1. Disconnect the tubing from the unit.
2. Tubing should be rinsed thoroughly after every use by running hot tap water through it followed by a solution of one part vinegar to three parts hot water.
3. Rinse with hot water and air dry.
4. Keep the outer surface of the tubing clean by wiping with a clean, damp cloth.

Maintenance:

Inspect suction tubing and collection bottle for leaks, cracks, etc. before each use.
Do not attempt to open or remove suction cabinet. If serviced required, please return to provider.
Bacteria filter should be replaced as needed. If overflow occurs, change the filter immediately.

Troubleshooting

Problem	Action
Unit does not turn on	1. Check power source and connection 2. Ensure that the wall outlet is live 3. Check power cord is not damage
Motor runs, no vacuum	1.Verify tubing connection security 2. Check for leaks or tubing kinks 3. Ensure that float shut-off is not activated 4. Check for bottle leaks and cracks
Low Vacuum	1. Use vacuum adjust knob to increase vacuum level 2.Check system for leaks 3. Adjust vacuum adjust knob and release

IMPORTANT: THIS IS A LEGAL DOCUMENT

Please read and understand this document before signing. If you have any questions please ask us or consult an attorney

Let this acknowledgement confirm that facility representative and patient that rents, purchase, and or use, but not limited to medical equipment and or supplies. waives, release, and discharge Alliance Medical Inc. and its agencies, officers, and employees from any and all negligence and liability for my death, disability, personal injury, property damages, property theft or claims of any nature which may hereafter accrue to me, and my estate as a direct or indirect result of my participation in the above referenced activity or event or services provide by Alliance Medical; and defend, indemnify, and hold harmless Alliance Medical Inc, its agencies, officers and employees, from and against any and all claims of any nature including all costs, expenses and attorneys' fees, which in any manner result from participant's actions during this activity or event, and thereafter. The undersigned participant, affirm that I am at least 18 years of age and am freely signing this agreement. I have read this form and fully understand that by signing this form I am giving up legal rights and/or remedies which may otherwise be available to me regarding any losses I may sustain as a result of my participation. I agree that if any portion is held invalid, the remainder will continue in full legal force and effect. Side Rail Disclosure For Patient Using Hospital Beds. I understand that it is the policy of Alliance Medical Inc. (together with its successors and assigns referred to as the Company) to provide mattress or mattress overlay support surfaces to only customers who use both side rails at all times while in bed (other than when being supervised by a caretaker who has removed one side rail in order to provide care or other appropriate services).For Patients Not Using Hospital Beds. I understand that it is the policy of the Company not to provide mattress or mattress overlay support surfaces to any customer who is not using a hospital bed with side rails due to the very real and serious risk of falling out of bed. However, I have determined, within my rights as a patient, to use the support surface on a bed without side rails and thereby assume all risks associated with such set-up which the Company has advised me is deemed dangerous. By signing below, I agree (for myself and my heirs and assigns) that I release and hold harmless the Company and its officers, employees, board members, shareholders, agents and assigns from and against any and all claims or liabilities of any nature including attorney fees and expenses arising out of or relating in any way to my failure either to agree to use a hospital bed with side rails or to use both side rails or to use both side rails where my bed has side rails. By signing below, I intend to be legally bound by this release. 3. Terms and Conditions of Rental/Sales Equipment and Supplies Patient acknowledges that title to rental equipment shall rest in the name of Alliance Medical during the term of rental period or until fully paid for if purchased. Renter/Purchaser further agrees that such equipment shall not be moved to another location without the prior written consent and approval on by Alliance Medical. In no case shall any equipment be moved outside of the established area serviced by Alliance Medical. The patient may not loan, sell, abuse, or damage rental equipment. If such should occur, the patient/agent shall be personally responsible to Alliance Medical for the costs of repair, replacement or purchase of such equipment. Alliance Medical reserves the exclusive right to determine the extent of such damage an avenue of recourse. Disclaimer of Warranties. Alliance Medical makes no warranty to patient/agent hereunder. The only warranty to the patent/ agent is that of the manufacturer of the equipment or supply. Patient will not attempt to make any repair or adjustment to rented equipment other than those specified by Alliance Medical, In the event of equipment malfunction, patient agrees to promptly notify Alliance Medical who will repair, replace, or otherwise resolve such malfunction. Only the patient shall use equipment in accordance with proper instructions and physician's orders. This agreement contains the entirety of the terms and conditions. Any addendum's must be in writing an (acknowledged by both parties to be enforceable) Patient Confidentiality Per our Policy and Procedure Manual, we must have all records, all communication, written or oral between customers and healthcare providers treated confidentially. All information shall be made available only to authorize company personnel except as otherwise provided by law, third party payers contracts, or as necessary to secure payment. Each night; any files, papers invoices, reports; notes, etc. that contain patient information must be secured in locked drawers or file cabinets. Each department will be responsible for securing information and enforcing this policy. I understand and agree not to disclose any customer information to unauthorized people, under any circumstances, in the interest of patient/ Company confidentiality. 4. Electric Ground Safety Check I understand that prior to the set-up of the support surface product (or other medical equipment) at my home, aground test should be performed by an electrician. It is not the responsibility of Alliance Medical to ensure that electrical outlets in the home are properly grounded and as such may pose a hazard to me and other family members. For this reason, you notified me that you suggest I contact an electrician to perform a detailed test and correct any deficiencies found at my expense. I understand the above and nevertheless instruct you to have the equipment set-up (using an adapter if necessary) which I acknowledge is a temporary situation and that I will promptly call a licensed electrician to have the problem corrected at my expense. In consideration for you setting this up under these conditions, I agree (for myself and my heirs and assigns) That I release and hold harmless Alliance Medical and its officers, employees, board members, shareholders, agents and assigns from and against any and all claims or liabilities of any nature including attorney fees and expenses arising out of or relating in any way to my failure to have properly grounded outlets including without limitation my failure to promptly have an electrician update my wiring and I recognize that you will not contact me to follow-up on this or otherwise remind me and that it is fully my responsibility and liability to Implement this. By signing this acknowledgement, I intend to be legally bound by this release. Failure to pay invoice. Facility agrees that In the event of non-payment or failure to pay invoices within 60 days, Facility agrees and permits Alliance Medical unrestricted authority and without notice to pickup any and all equipment provided by, and or owned by Alliance Medical. 5. HIPPA Policy We May Use or Disclose Your Health Information for Purposes of Treatment, Payment or Healthcare Operations without Obtaining Your Prior Authorization and Here is One Example of Each: We may provide your Health Information to heath care professionals—including physicians, nurses, case managers and discharge planners—for purposes of providing care to you. We may obtain your Health Information from you and your other healthcare providers (including your physicians, nurses and facilities such as assisted living centers, nursing home or hospital) and in turn send relevant parts to insurance companies, administrators and others for purposes of obtaining authorization, billing and receiving payment for our services rendered to you, and/or for locating and retrieving our equipment rented to you. We may obtain and allow our legal, accounting, banking, accreditation and other advisors, consultants and entities to review relevant parts of your Health Information in connection with their engagements with us relating to our operations, growth, financings, acquisitions, sales, regulatory status, taxes and Other business activities. We May Also Use or Disclose Your Health Information Under the Following Circumstances without Obtaining Your Prior Authorization: To Notify and/or Communicate with your Family. Unless you tell us you object, we may use or disclose your Health Information in order to notify your family or assist in notifying your family, your personal representative or another person responsible for your care about your location, your general condition or in the event of your death. If you are unable or unavailable to agree or object, we will use our judgment in any communications with your family As a client of Alliance Medical, you have the following rights as they pertain to our role as one of your homecare providers: To be involved in your care and services. To make informed decisions and participate in your care and services at any time. To be involved in resolving conflicts about care and service. To be involved in resolving ethical issues. To formulate advance directives, to be involved in decisions to withhold resuscitation (provided our failure to honor any such instructions when there is doubt over the legality or enforceability or proper execution of such instruments shall not result in any liability to us or our employees, agents, officers and directors), and to otherwise discontinue treatment to the extent permitted by law. To be involved in decisions to forgo or withdraw life-sustaining care subject to the preceding sentence. To choose whether or not to participate in research, investigational or experimental studies or clinical trials. To have all communication needs met. To receive service without discrimination relative to age, sex, race, religion, disability, sexual preference, ethnic origin, or other protected status. To be treated professionally, courteously and with respect, and have a right to privacy and security. To have your privacy and property respected. To express complaints without fear of reprisal and to have such complaints heard, reviewed and if possible resolved. To expect that all information regarding yourself be treated confidentially. To ensure your participation in a prompt and orderly transfer to another organization or level of care or service. To have the following ethical issues addressed: all ethical issues in client care or services; all ethical issues in marketing, admission, transfer, discharge and billing practices; and all ethical issues in the relationship of the organization, its staff, and its governing body with other health care providers, educational institutions, and payers. To be informed of any financial benefit, if any, to the referring organization when the client is referred to another organization, service, or individual. To be apprised of your financial responsibility for any part of your care provided by us. To be informed of your responsibilities as a client/customer. 6. Acknowledgment and Assumption of Risk: It is the undersigned responsibility that you read and understand all information in this rental agreement. ***V.737789914A***

Alliance Medical
At the Center of Care

AM Equipment Technichian:_____

Date:_____

SERVICE 24HOUR 7 DAYS PER WEEK:_1-888-349-2348_
