

VANCARE[®]

VERA OPERATING MANUAL

Models: V350, 350 w/scale, V600, V600 w/scale, & V800



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Made with Pride in the USA

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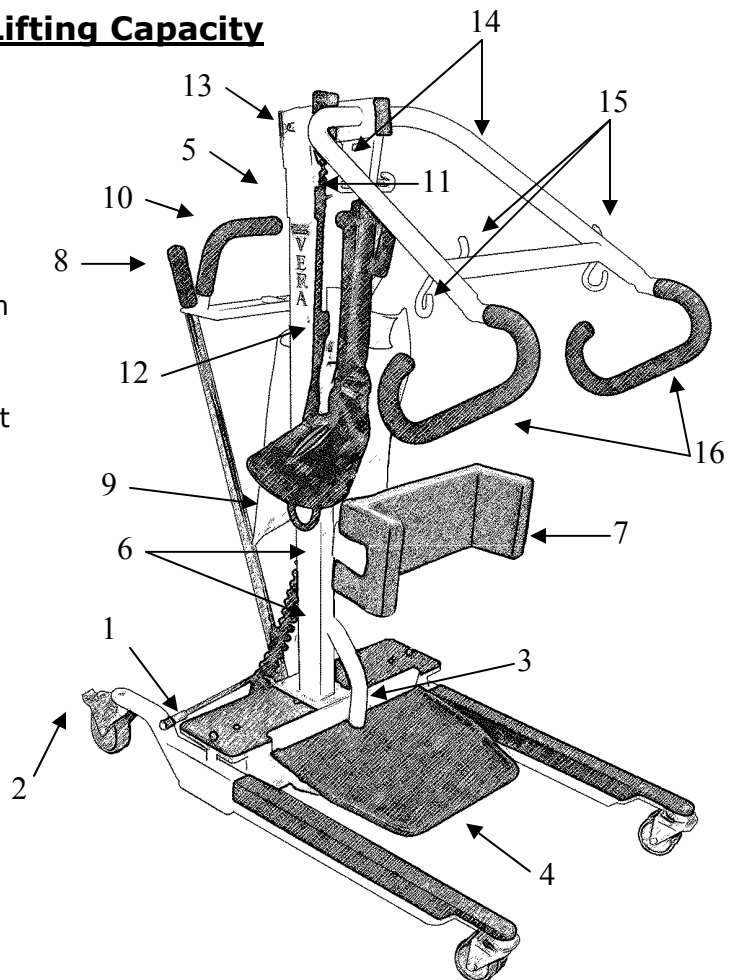
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Diagram and Features

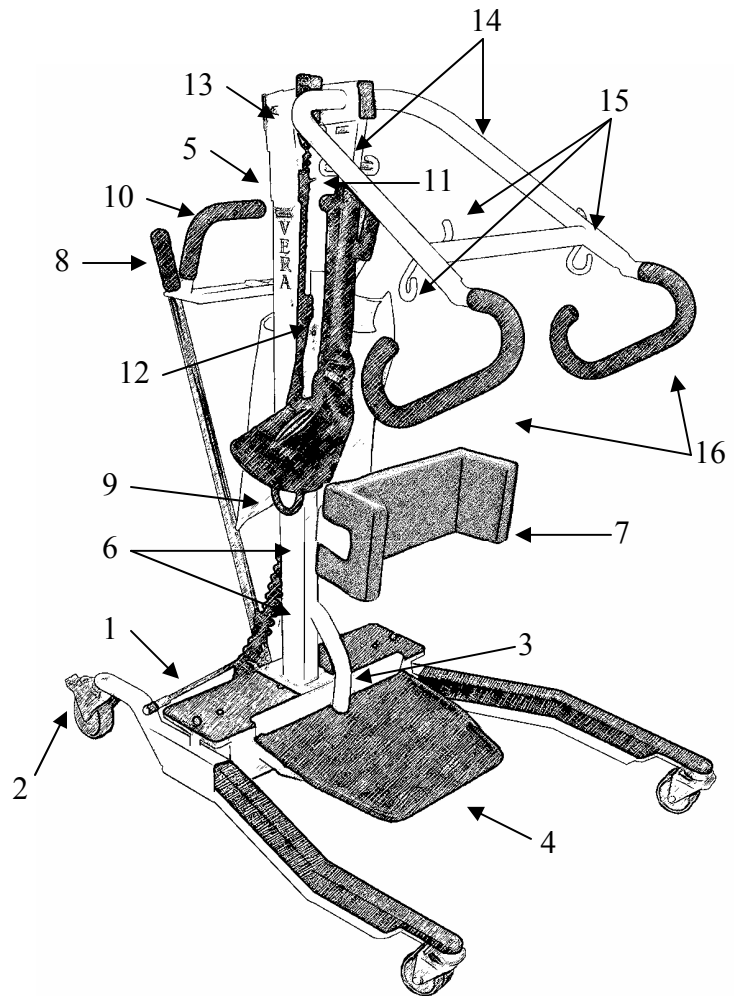
VERA-LIFT™ V350 Pound Lifting Capacity

1. Lift base
 2. Locking rear caster brakes
 3. Emergency up/down switch (on back of base)
 4. Foot pad (moveable height on models without scales)
 5. Mast
 6. Mast pegs (on models without scales)
 7. Knee pad (with optional knee strap)
 8. Shift bar
 9. Re-charging plug
 10. Mast handgrips
 11. Emergency stop switch
 12. Pendant switch with battery indicator lights
 13. Extended bolt (optional)
 14. Lift Arms
 15. Lift arm hooks
 16. Patient handgrips
- Scale (optional)



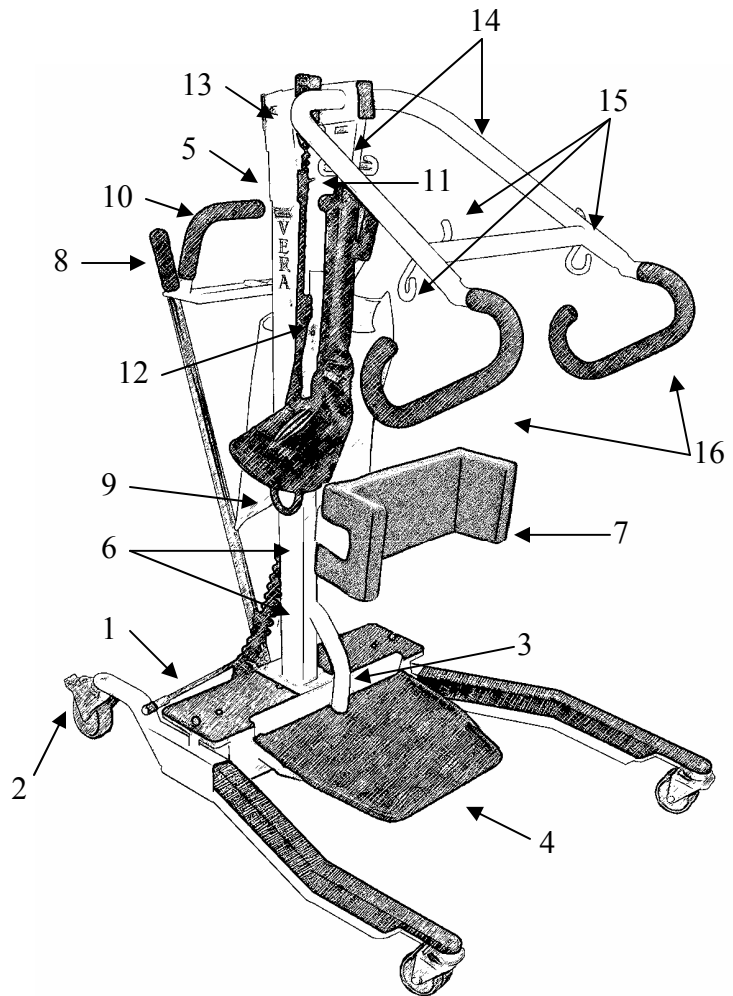
VERA-LIFT™ V600 Pound Lifting Capacity

1. Lift base
 2. Locking rear caster brakes
 3. Emergency up/down switch (on back of base)
 4. Foot pad (moveable height on models without scales)
 5. Mast
 6. Mast pegs (on models without scales)
 7. Knee pad (with optional knee strap)
 8. Shift bar
 9. Re-charging plug
 10. Mast handgrips
 11. Emergency stop switch
 12. Pendant switch with battery indicator lights
 13. Extended bolt (optional)
 14. Lift Arms
 15. Lift arm hooks
 16. Patient handgrips
- Scale (optional)



VERA-LIFT V800 Pound Lifting Capacity

1. Lift base
 2. Locking rear caster brakes
 3. Emergency up/down switch (on back of base)
 4. Foot pad (moveable height on models without scales)
 5. Mast
 6. Mast pegs (on models without scales)
 7. Knee pad (with optional knee strap)
 8. Shift bar
 9. Re-charging plug
 10. Mast handgrips
 11. Emergency stop switch
 12. Pendant switch with battery indicator lights
 13. Extended bolt (optional)
 14. Lift Arms
 15. Lift arm hooks
 16. Patient handgrips
- Scale (optional)



Safety Information

Warning Symbol



A warning symbol is used in this manual to alert the user to important safety information. Make sure your staff understands the meaning of the warning symbol and follows the instructions that follow it.

Using the VERA-LIFT™ and VERA-LIFT™ Back Belt and Sitting Slings with Other Manufacturer's Equipment

⚠ WARNING

VERA-LIFT™ belts/slides should be used with the VERA-LIFT™ only. Using other manufacturer's patient lifts with VERA-LIFT™ belts/slides is not recommended. For belt/slide compatibility questions, please contact your local distributor.

Back Belt and Sling Care

When belts are soiled or contaminated, they should be washed with mild detergent in cold or warm water only.

Laundering Instructions

- 1) Standard VERA back belts and sitting slings may be tumble-dried on the "delicate" temperature cycle in the dryer. If the dryer in your facility does not have a "delicate" cycle, slings should be hung to air dry.
- 2) "C" Cloth back belts and sitting slings may be washed in water temperature up to 167° F (75° C). Do not bleach. Air dry or dry at temperature below 167°. Inspect with each use.
- 3) "H" Cloth back belts and sitting slings may be washed in water temperature up to 200° F (93° C). Do not bleach. Air dry or dry at temperature below 200°. Inspect with each use.

⚠ WARNING

Bleach MAY NOT BE USED as it can weaken the stitching and fabric. **It is important that the Laundry Department is told how to care for belts correctly.**

Pre-Use and Monthly Inspections

VANCARE lifts are designed and manufactured to meet or exceed the safety requirements for patient care equipment. In addition, they have been tested and listed by a nationally recognized testing laboratory, MET Labs., to insure their safety. It is important, however, that you know that materials can fail due to normal wear caused by use over time. Doing the inspections described below will help your facility make sure that lifts, back belts and slings are kept in safe working condition and that potential problems are noted before hazardous conditions result.

Leaving Slings Positioned Under Patients in Wheelchairs, etc.

There are times when leaving the sling under a patient while he or she is seated in a wheelchair or chair would promote patient comfort and would enable staff to provide care. Before this can be done, however, the patient's posture must be evaluated by a nurse or professional rehabilitation department staff member to see if leaving the sling under the patient might contribute to the patient sliding out of, or falling off of, a wheelchair or chair. Secondly, the patient's clothing, the sling fabric, and the surface of the chair or wheelchair must be assessed for slipperiness. If leaving the sling under the patient while he or she is in the wheelchair or chair poses risk for sliding out of or falling off of the wheel-chair, it may not be left under the patient.

Patient Transport with the VERA-LIFT™

WARNING

It is important for staff to know that the VERA-LIFT™ **is approved for standing patient transfers within the patient's room and the connecting bathroom only.** The VERA-LIFT™ with the back belt **MAY NOT** be used to transport patients who are standing on the lift from one room in the facility to another.

The VERA-LIFT™ with the sitting sling MAY BE used to transport patients in a sitting position from one room to another in addition to transferring patients within their room.

Staff Training

After the VERA-LIFT™ has been received from VANCARE, Inc., a manufacturer's representative will provide initial in-service training for your staff. Before using the VERA-LIFT™ to transfer patients, all staff must be trained and authorized to use the VERA-LIFT™. If additional training is needed, contact your local distributor.

A video demonstrating transfer techniques and VERA-LIFT™ care was sent to the facility with the lift. This video can be used, along with "hands on" training led by a nurse or professional rehabilitation staff member who has been designated as your facility's mechanical lift trainer, as part of your facility's mechanical lift education program. Only staff members who have been trained according to the procedures in this manual, by a manufacturer's representative, or by a nurse or professional rehabilitation staff member designated as your facility's mechanical lift trainer, be allowed to use the VERA-LIFT™.


WARNING

Watching the video without "hands on" training **DOES NOT QUALIFY AS TRAINING.** Staff members who have seen the video but who have not had "hands on" training described above may not use the VERA-LIFT™.


Patient Assessment Criteria for Transfers

Transfer Criteria for the VERA-LIFT™

WARNING

 Before using the VERA-LIFT™ V350 and V600, patients must be assessed by the facility's professional nursing or professional rehabilitation staff to determine which patients are suitable for transfer with the VERA-LIFT™ V350, which VERA-LIFT™ transfer technique to use, which size back belt or sitting sling is appropriate, and the number of staff members necessary to transfer each patient.

WARNING

 Although one person can perform patient transfers, certain patients or situations may require the help of one or more additional staff members. For example, patients with unpredictable behavior due to dementia may require additional help if their behavior poses risk of injury to themselves or to staff members.

The above information must be recorded in the patient's record and must be communicated to the staff.

Basic Standing Transfer

1) The Patient Must:

- a) Have predictable, cooperative behavior - may not exhibit behavior that might pose risk of injury to the patient or for staff members during VERA-LIFT™ standing transfers. (See "Patients Not Suited For VERA-LIFT™ Standing Transfers" on next page.)
- b) Be able to follow simple directions
- c) Be able to put **both** feet on the VERA-LIFT™ foot pad and bear weight on both legs
- d) Be able to stand erect or lean back into the back belt with arms on the outside of the back belt
- e) Have no injuries or medical conditions that might be aggravated by the transfer procedure
- f) When using VERA V350, patient must weight less than 350 pounds; when using VERA V600, patient must weight less than 600 pounds; VERA V800; less than 800 pounds.

Standing Transfer with Crossed Straps

1) The Patient Must:

- a) Have cooperative behavior - may not exhibit behavior that might pose risk of injury to the patient or for staff members during VERA-LIFT™ standing transfers, (See "Patients Not Suited For VERA-LIFT™ Standing Transfers" on next page.)
- b) Be able to follow simple directions
- c) Be able to bear weight on at least one leg

- d) Be able to stand erect or lean back into the back belt with arms on the outside of the back belt
- e) Have no injuries or medical conditions that might be aggravated by the transfer procedure
- f) When using VERA V350, patient must weight less than 350 pounds; when using VERA V600, patient must weight less than 600 pounds; VERA V800; less than 800 pounds.

2) The Patient May:

- a) Have unpredictable behavior, for example: patients with dementia - as long as behavior exhibited does not pose a safety hazard for the patient or for staff members during VERA-LIFT™ transfers. (See "*Patients Not Suited For VERA-LIFT™ Standing Transfers*" section below.)
- b) Be unable to hold onto one or both hand grips
- c) Have history of knee(s) giving way to side
- d) Have one-sided paralysis or single lower extremity amputation

Standing Transfer with Crossed Straps and Buttock Support Strap

1) The Patient Must:

- a) Have cooperative behavior - may not exhibit behavior that might pose risk of injury to the patient or for staff members during VERA-LIFT™ standing transfers, (See "*Patients Not Suited For VERA-LIFT™ Standing Transfers*" section below.)
- b) Be able to follow simple directions
- c) Be able to bear weight on at least one leg
- d) Be able to stand erect or lean back into the back belt with arms on the outside of the back belt
- e) Have no injuries or medical conditions that might be aggravated by the transfer procedure
- f) When using VERA V350, patient must weight less than 350 pounds; when using VERA V600, patient must weight less than 600 pounds; V800; less than 800 pounds.

2) The Patient May:

- a) Have unpredictable behavior, for example: patients with dementia - as long as behavior exhibited does not pose a safety hazard for the patient or for staff members during VERA-LIFT™ transfers. (See "*Patients Not Suited For VERA-LIFT™ Standing Transfers*" section below.)
- b) Be unable to hold onto one or both hand grips
- c) Have history of knee(s) giving way to side
- d) Have one-sided paralysis or single lower extremity amputation
- e) Have one leg with weight-bearing restriction such as status post-hip or knee surgery (assessment must be done by physical or occupational therapist to determine appropriateness of transfer for individual patient)
- f) Have decreased motor control and/or weakness with coming to standing position

Patients Not Suited For VERA-LIFT™ Standing Transfers

1) Patients whose unpredictable behavior during transfers poses risk of injury to patients or staff. Examples are patients who:

- a) Attempt to pick one or both feet off of the floor during gait belt transfers or off of the VERA-LIFT™ foot pad during VERA-LIFT™ standing transfers
- b) Attempt to climb the knee pad
- c) Attempt to step backward off of the VERA-LIFT™ foot pad
- d) Are unpredictably able to bear weight

- e) Frequently exhibit combative behavior during transfers
- f) Are unable to follow simple directions

2) Patients who:

- a) Are non-weight bearing
- b) Are paraplegic, quadriplegic or who have multiple amputations
- c) Have injuries or medical conditions that might be aggravated by the VERA-LIFT™ standing transfer procedure
- d) When using VERA V350, patient must weight less than 350 pounds; when using VERA V600, patient must weight less than 600 pounds; VERA V800; less than 800 pounds.

Note: Patients who are not suited for VERA-LIFT™ transfers, can generally be transferred safely with VANCARE's companion product, the VANDER-LIFT™. The VANDER-LIFT™ is designed to lift patients who require higher levels of care. For information about the VANDER-LIFT™, contact VANCARE, Inc. at (800) 694 – 4525, or call your local VANCARE representative.

Seated Transfer with Sitting Sling

1) The Patient Must:

- a) Not exhibit behavior that might pose risk of injury to the patient or for staff members during VERA-LIFT™ seated transfers
- b) Be able to sit erect with arms on the outside of the sitting sling
- c) Be able to have both knees against the knee rest
- d) Have no knee or other injuries, or medical conditions that might be aggravated by the transfer procedure
- g) When using VERA V350, patient must weight less than 350 pounds; when using VERA V600, patient must weight less than 600 pounds. VERA V800; less than 800 pounds.

2) The Patient May:

- a) Be unpredictably able to bear weight in legs
- b) Be non-weight bearing
- c) Be unable to follow simple directions
- d) Have unpredictable behavior while being transferred in a standing position (examples: patients who attempt to pick one or both feet up off of the floor during gait belt transfers or off the VERA-LIFT™ foot pad, attempt to climb the knee pad, or who attempt to step backward off the VERA-LIFT™ foot pad)

Sizing and Positioning the Back Belt

VERA-LIFT™ back belts come in medium and large lengths and in different widths. When transferring a patient using the VERA-LIFT™ and a back belt, the back belt should be wide enough to fit from the top of the fold between the buttocks to 2 – 3 inches below the lower edge of the patient's shoulder blades. When connecting the VERA-LIFT™ back belt to the lift using the "*Standing Transfer with Crossed Straps*" or the "*Standing Transfer with Crossed Straps and Buttock Support Strap*", the back belt should be long enough for belt fabric to fit around the patient's abdomen without loop fabric touching the patient. When the correct size back belt has been determined for the patient, the information should be documented in the patient's record and the information should be communicated to the nursing staff.

You can tell the size of the back belt by looking at the color of the stabilizing handle on the back of the back belt. A reference guide for back belt sizes is on the VERA-LIFT™ arm.

Small	Black Stabilizing Handles	Medium	Red Stabilizing Handles
Large	Blue Stabilizing Handles	Extra Large	Brown Stabilizing Handles

Sizing and Positioning the Sitting Sling

VERA-LIFT™ sitting slings come in medium and large sizes. When transferring a patient using the VERA-LIFT™ and a sitting sling, the sling should be large enough to extend from the patient's coccyx to 2 – 3 inches below the lower edge of the patient's shoulder blades. When the correct size sitting sling has been determined for the patient, the information should be documented in the patient's record and the information should be communicated to the nursing staff.

You can tell the size of the sitting sling by looking at the color of the stabilizing handles on the back of the sitting sling. A reference guide for sitting sling sizes is on the VERA-LIFT™ arm.

Small	Black Stabilizing Handles	Medium	Red Stabilizing Handles
Large	Blue Stabilizing Handles	Extra Large	Brown Stabilizing Handles

Tip for Positioning the Back Belt Buttock Strap and Sitting Sling Leg Supports Under Buttocks of Patients Who Have Extensor Tone or Who Are More Dependent

Help the patient lean forward and to the side, if needed, to place the buttock strap or sitting sling leg support under the patient's buttocks. (See illustration at right)



Specialty Back Belts and Sitting Slings

On rare occasions, a non-standard size or shape sling will meet an individual patient's transfer needs more safely. If you have a patient with special back belt or sitting sling needs, contact your VANCARE distributor.

VERA-LIFT™ Transfer Procedures

Basic Standing Transfer

- 1) Make sure you understand which back belt and which method of connecting the back belt to the lift arm hooks is to be used to transfer the patient.
- 2) **⚠ Inspect the VERA-LIFT™ and back belt to make sure they are undamaged and in good working order.**
- 3) Make sure there is enough room to do the transfer. Move furniture or other things that may be in the way. The required number of staff members must be present.
- 4) Help the patient to a sitting position, if needed.
 - a) If the transfer is from the bed, the patient should be sitting on the edge of the bed.
 - b) If the transfer is to or from a wheelchair, remove the wheelchair foot pedals.
- 5) Place the bottom of the back belt at the top of the fold between the patient's buttocks. The top of the belt should be 2 – 3 inches below the lower edge of the patient's shoulder blades.
⚠ The patient's arms must be on the outside of the back belt. Fasten the inner safety belt snugly.
- 6) **⚠ Lower the lift arms to their lowest position and spread the base of the VERA-LIFT™ to its widest position.** (Spreading the base maximizes the stability of the lift.)
- 7) Move the lift in front of the patient and help the patient to place his or her feet on the foot pad with the patient's knees against the knee pad. **⚠ It is important that the patient's feet be flat on the base of the foot pad.** (The height of the foot pad can be raised by positioning it on the upper mast pegs for VERA-LIFT™ models without scales.)
- 8) **⚠ Lock the caster brakes.**
- 9) **⚠ Connect the back belt loops snugly to the lift arm hooks using the same loop on both sides of the back belt.** (The upper or lower lift arm hooks may be used for short to medium height patients. The upper hooks should be used for tall patients as this will help the patient to stand erect on the VERA-LIFT™.)
- 10) **⚠ Double check the back belt loop connection to the lift arm hooks to make sure the loops are connected securely to the lift.**
- 11) Lift the patient to a standing position.
- 12) Unlock the VERA-LIFT™ brakes and back the lift away.



- 13) **⚠ While slowly turning the lift, move the patient to the desired location within the room with the back of the patient's legs against the bed, wheelchair, etc.**
- 14) Leaving the caster brakes unlocked, lower the patient so that his or her buttocks are positioned correctly on the bed or at the back of the wheelchair seat, etc.
- 15) Remove the back belt from the lift arm hooks and back the lift away from the patient.
- 16) Unfasten the inner safety belt and remove the back belt.
- 17) Make sure the patient is safely positioned before removing the VERA-LIFT™ and back belt from the room.

Standing Transfer with Crossed Straps








****This transfer may only be done if the facility has purchased "double strap" back belts and if the knee pad is equipped with the optional knee strap.***

VERA-LIFT™ transfer with Crossed Strap Method of connecting the back belt to the lift and with the knee strap fastened



View from above the VERA-LIFT™ showing the Crossed Strap Method of connecting the back belt to the lift

- 1) Make sure you understand which back belt is to be used to transfer the patient.
- 2) **⚠ Inspect the VERA-LIFT™ and back belt to make sure they are undamaged and in good working order.**
- 3) Make sure there is enough room to do the transfer. Move furniture or other things that may be in the way. The required number of staff members must be present.
- 4) Help the patient to a sitting position, if needed.
 - a) If the transfer is from the bed, the patient should be sitting on the edge of the bed.
 - b) If the transfer is to or from a wheelchair, remove the wheelchair foot pedals.
- 5) **⚠ Place the bottom of the back belt at the top of the fold between the patient's buttocks.** The top of the belt should be 2 – 3 inches below the lower edge of the patient's shoulder blades. **⚠ The patient's arms must be on the outside of the back belt.** Fasten the inner safety belt snugly.






- 6)  Lower the lift arms to their lowest position and spread the base of the VERA-LIFT™ to its widest position. (Spreading the base maximizes the stability of the lift.)
- 7) Move the lift in front of the patient and help the patient place his or her feet on the foot pad with the patient's knees against the knee pad.
 **It is important that the patient's feet be flat on the base of the foot pad.**
(The height of the foot pad can be raised by positioning it on the upper mast pegs for VERA-LIFT™ models without scales.)
- 8)  **Lock the caster brakes.**
- 9)  **Connect the back belt to the lift arm hooks snugly:**
 - a) Cross one back belt white strap through the loop closest to the back belt on the other white strap.
 - b) Connect the right side white back belt loops to the left lift arm hook and connect the left side white back belt loops to the right lift arm hook using the same loop on both sides of the back belt.
 - c) Remove the colored straps from the VELCRO pocket under the patient's arms and connect the colored straps straight (not crossed) to the lift arm hooks using the same loop on both sides of the back belt. (The upper or lower lift arm hooks may be used for short to medium height patients. The upper hooks should be used for tall patients as this will help the patient to stand erect on the VERA-LIFT™.)
- 10)  Snuggly fasten the knee strap behind the patient's knees.
- 11)  **Double check the back belt loop connection to the lift arm hooks to make sure the loops are connected securely to the lift.**
- 12) Lift the patient to a standing position.
- 13) Unlock the VERA-LIFT™ brakes and back the lift away.
- 14)  **While slowly turning the lift, move the patient to the desired location within the room with the back of the patient's legs against the bed, wheelchair, etc.**
- 15) Leaving the caster brakes unlocked, lower the patient so that his or her buttocks are positioned correctly on the bed or at the back of the wheelchair seat, etc.
- 16) Remove the back belt from the lift arm hooks, unfasten the knee strap and back the lift away from the patient.
- 17) Unfasten the inner safety belt and remove the back belt.
- 18) Make sure the patient is safely positioned before removing the VERA-LIFT™ and back belt from the room.

Standing Transfer with Crossed Straps and Buttock Support Strap

****This transfer may only be done if the facility has purchased "double strap" back belts with attachments for the buttock support strap and if the knee pad is equipped with the optional knee strap.***

1. Make sure you understand which back belt is to be used to transfer the patient.
2. **⚠ Inspect the VERA-LIFT™ and back belt to make sure they are undamaged and in good working order.**
3. Make sure there is enough room to do the transfer. Move furniture or other things that may be in the way. The required number of staff members must be present.
4. Help the patient to a sitting position, if needed.
 - a. If the transfer is from the bed, the patient should be sitting on the edge of the bed.
 - b. If the transfer is to or from a wheelchair, remove the wheelchair foot pedals.
5. **Position the buttock support strap under the patient's buttocks.** (See *Tip for Positioning the Back Support Back Belt Buttock Strap Under Patients Who Have Extensor Tone or Who Are More Dependent* on page 10)
6. **⚠ Place the bottom of the back belt at the top of the fold between the patient's buttocks.** The top of the belt should be 2 – 3 inches below the lower edge of the patient's shoulder blades. **⚠ The patient's arms must be on the outside of the back belt.**
7. Fasten the buttock support strap to the clips on each side of the lower edge of the back belt and adjust it so it provides the appropriate degree of buttock support for the patient. **⚠ Fasten the back belt's inner safety belt snugly.** **⚠**
8. Lower the lift arms to their lowest position and spread the base of the VERA-LIFT™ to its widest position. (Spreading the base maximizes the stability of the lift.)
9. Move the lift in front of the patient and help the patient place his or her feet on the foot pad with the patient's knees against the knee pad.
⚠ It is important that the patient's feet be flat on the base of the foot pad.

(The height of the foot pad can be raised by positioning it on the upper mast pegs for VERA-LIFT™ models without scales.)

10.  **Lock the caster brakes.**
11.  **Connect the back belt to the lift arm hooks snugly:**
 - a. Cross one back belt white strap through the loop closest to the back belt on the other white strap.
 - b. Connect the right side white back belt loops to the left lift arm hook and connect the left side white back belt loops to the right lift arm hook using the same loop on both sides of the back belt.
 - c. Remove the colored straps from the VELCRO pocket under the patient's arms and connect the colored straps straight (not crossed) to the lift arm hooks using the same loop on both sides of the back belt. (The upper or lower lift arm hooks may be used for short to medium height patients. The upper hooks should be used for tall patients as this will help the patient to stand erect on the VERA-LIFT™.)
12.  Snuggly fasten the knee strap behind the patient's knees.
13.  **Double check the back belt loop connection to the lift arm hooks to make sure the loops are connected securely to the lift.**
14. Lift the patient to a standing position.
15. Unlock the VERA-LIFT™ brakes and back the lift away.
16.  **While slowly turning the lift, move the patient to the desired location within the room with the back of the patient's legs against the bed, wheelchair, etc.**
17. Leaving the caster brakes unlocked, lower the patient so that his or her buttocks are positioned correctly on the bed or at the back of the wheelchair seat, etc.
18. Remove the back belt from the lift arm hooks, unfasten the knee strap and back the lift away from the patient.
19. Unclip the buttock support strap and unfasten the inner safety belt. Remove the back belt.
20. Make sure the patient is safely positioned before removing the VERA-LIFT™ and back belt from the room.

Seated Transfer with Sitting Style Slings/Belts

This transfer may only be done if the facility has purchased a VERA-LIFT™ with an extended bolt (on the mast) and sitting slings.

- 1) Make sure you understand which sitting sling is to be used to transfer the patient.
- 2) **⚠ Inspect the VERA-LIFT™ and sling to make sure they are undamaged and in good working order.**
- 3) Make sure there is enough room to do the transfer. Move furniture or other things that may be in the way. The required number of staff members must be present.
- 4) Help the patient to a sitting position, if needed.
 - a) If the transfer is from the bed, the patient should be sitting on the edge of the bed.
 - b) If the transfer is to or from a wheelchair, remove the wheelchair foot pedals.
- 5) **⚠ Place the sitting sling behind the patient with the bottom of the sitting sling over the patient's coccyx.** The top of the sitting sling should be 2 – 3 inches below the lower edge of the patient's shoulder blades.
- 6) **⚠ The patient's arms must be on the outside of the sling.**
 - a) Lift one of the patient's legs and pull the leg support under the leg, making sure not to twist or fold the leg support.
 - b) Lay the leg support loops across the patient's thigh.
 - c) Repeat the above two steps for the patient's other leg. (See *Tip for Positioning the Back Support Back Belt Buttock Strap Under Patients Who Have Extensor Tone or Who Are More Dependent* on page 10)
- 7) **⚠ Fasten the inner safety belt snugly.**
- 8) **⚠ Lower the lift arms to their lowest position and spread the base of the VERA-LIFT™ to its widest position.** (Spreading the base maximizes the stability of the lift.)
- 9) Move the lift in front of the patient and help the patient place his or her feet on the foot pad with the patient's knees against kneepad. (The height of the foot pad can be raised by positioning it on the upper mast pegs for VERA-LIFT™ models without scales.)
- 10) **⚠ Lock the caster brakes.**
- 11) **⚠ Connect the sitting sling to the VERA-LIFT™ snugly:**
 - a) Connect the leg support loops to the extended bolt on the mast using the same loop on both of the leg supports.



- b) Connect the back support loops to the lift arm hooks using the same loop on both sides of the sitting sling. Use the lift arm hooks that will position the patient in an erect sitting position.
- 12) **Double-check the sitting sling connection to the lift to make sure the loops are connected securely to the lift.**
- 13) Lift the patient approximately 2 inches off of the bed, wheelchair, etc. DO NOT raise the patient to a standing position, as this will be uncomfortable for the patient.
- 14) Unlock the VERA-LIFT™ brakes and back the lift away.
- 15) Lower the patient to a normal sitting position.
- 16) While slowly turning the lift, move the patient to the desired location with the back of the patient's legs against the bed, wheelchair, etc.
- 17) Raise the patient approximately 2 inches above the top of the bed, wheelchair, etc. DO NOT raise the patient to a standing position.
- 18) Leaving the caster brakes unlocked, lower the patient so that his or her buttocks are positioned correctly on the bed or at the back of the wheelchair seat, etc.
- 19) Remove the sitting sling from the extended bolt on the mast and from the lift arm hooks. Back the lift away from the patient.
- 20) Unfasten the inner safety belt and remove the sitting sling.
- 21) Make sure the patient is safely positioned before removing the VERA-LIFT™ and sitting sling from the room.

Standing Transfer Toileting Procedure

Follow the VERA-LIFT™ standing transfer procedure for the patient that is used for other standing transfers through step 12 in the "Basic Standing Transfer" procedure and through step 13 in the "Standing Transfer With Crossed Straps" procedure. Continue with the following steps.


- 13) While slowly turning the lift, move the patient into position with the back of the patient's legs against the front of the toilet or commode.
- 14) Adjust the patient's clothing and incontinence products if used and, leaving the caster brakes unlocked, lower the patient onto the toilet or commode seat.
- 15) Lock the caster brakes. Leave the back belt attached snugly to the lift arm hooks with the lift in front of the patient. **⚠ NEVER LEAVE THE PATIENT UNATTENDED DURING THE TOILETING PROCEDURE.**
- 16) After the patient has finished, lift him or her to a standing position, and help with peri care as needed.
- 17) Apply a clean incontinence product, if needed, and replace the patient's clothing.
- 18) Unlock the caster brakes and move the patient to the desired location within the room with the back of the patient's legs against the bed, wheelchair, etc.

Continue the transfer with step 14 in the "Basic Standing Transfer" procedure and step 15 in the "Standing Transfer with Crossed Straps" procedure.


Seated Transfer Toileting Procedure

In order to promote comfort for patients, to decrease physical stress for staff, and to speed the toileting process for both, it is preferable if patients who prefer to wear pants wear adaptive pants (pants with extended zippers on both side seams or a back flap that extends from side seam to side seam) when they are no longer able to do standing transfers. Refer to adaptive clothing catalogues for ideas. Contact VANCARE, Inc. if further help is needed.

Follow the VERA-LIFT™ "Seated Transfer" procedure through step 4. Continue with the following steps.

- 5) Adjust the patient's clothing:
 - a) Spread the back of split back dresses or wrap around skirts.
 - b) Unzip side zippers and roll the back of pants toward the patient's buttocks or open the back flap of pants.
 - c) Untape the Brief, fold the front side panels in and roll the back of the Brief toward the patient's buttocks so the clean outer surface of the Brief is touching patient's clothing OR
Unbutton the elastic belt for button-type incontinence products OR
Roll the patient's underwear as close to the bottom of the patient's buttocks as possible.
- 6) Place the sitting sling behind the patient with the bottom of the sitting sling approximately 1 inch above the top of the rolled down pants and Brief, if used. The top of the sitting sling should be below the patient's shoulder blades.
 **The patient's arms must be on the outside of the sling.**
 - a) Lift one of the patient's legs and pull the leg support under the leg, making sure not to twist or fold the leg support.
 - b) Lay the leg support loops across the patient's thigh.
 - c) Repeat the above two steps for the patient's other leg.

Continue with steps 6 through 14 of the VERA-LIFT™ "Seated Transfer" procedure.

- 15) While slowly turning the lift, move the patient into position in front of the toilet or commode with the back of the patient's legs against the front of the toilet or commode.
- 16) Raise the patient approximately 2 inches above the top of the toilet or commode seat. DO NOT raise the patient to a standing position.
- 14) Adjust the patient's clothing if necessary and, leaving the caster brakes unlocked, lower the patient onto the toilet or commode seat.
- 15) Lock the caster brakes. Leave the sitting sling attached securely to the lift with the lift in front of the patient.  **NEVER LEAVE THE PATIENT UNATTENDED DURING THE TOILETING PROCEDURE.**
- 16) After the patient has finished, lift him or her approximately 2 inches off of the toilet or commode seat and help with peri care as needed.
- 21) Unlock the VERA-LIFT™ brakes and back the lift away.
- 22) Apply a clean incontinence product, if needed, and replace the patient's clothing.

Continue with steps 14 through 20 of the VERA-LIFT™ "Seated Transfer" procedure.

Wheelchair Repositioning

Follow the VERA-LIFT™ transfer procedure indicated for the patient through the step when the back belt or sitting sling connection to the lift arm hooks is double checked.

- 1) Lift the patient approximately 2 inches off of the wheelchair seat.
- 2) Move the VERA-LIFT™ until the patient's buttocks are positioned at the back of the wheelchair seat.
- 3) Leaving the caster brakes unlocked, lower the patient so that his or her buttocks are at the back of the wheelchair seat.

Continue with the transfer procedure indicated for the patient.

Models V350, V600 & V800: Other Procedures

Emergency Stop Switch

A red emergency stop switch is located on the inside of the mast.

WARNING

If the hand control fails and the lift continues to raise or lower, push down on the emergency stop switch to stop the lift.

Base Adjustment

The base of the VERA-LIFT™ should be open to its widest position for all transfers. The base may be narrowed to go through doorways but must be opened after the lift has cleared the door. To adjust the width of the base, stand behind the lift and grasp the soft rubber handle on the spreader bar located at the rear of the lift. Adjust as follows:

Closed	Move the spreader bar to the right hand position.
Half Open	Move the spreader bar to the center position.
Open	Move the spreader bar to the left hand position.

Rear Caster Brakes

The VERA-LIFT™ is equipped with caster brakes on the rear wheels. To lock the brakes, step down on the end of each brake tab. To release the brakes, push forward on the tab located on the top of each brake.

WARNING

The brakes need to be locked as the patient is being lifted and should remain unlocked as the patient is being lowered.

Emergency Up/Down Switch

WARNING

If the pendant switch fails, use the emergency up/down switch located on the back of the lift base. To use it, push up on the switch to raise the lift and down to lower the lift. This switch should only be used in emergency situations when the pendant switch fails.

 **Do not press on the hand held pendant switch buttons and on the emergency up/down switches at the same time.**

Charging the Batteries

The VERA-LIFT™ has a built-in charger, which works when the power cord is plugged into a standard 120 volt A.C. outlet. (See charging instructions on the lift.) Plugging the lift into an outlet continuously for 7 hours, such as at night, will charge the batteries enough for a full day of patient transfers. Emergencies can arise, however, which may cause the staff to forget to plug the lift in (example: an emergency near the end of the evening shift). In order to make sure the VERA-LIFT™ batteries will always be charged, the lift may be plugged into an outlet whenever it is not being used. Either charging procedure is acceptable.

WARNING

Be sure to unplug the power cord from the wall outlet before moving the VERA-LIFT™ to prevent damage to the lift.

When the VERA-LIFT™ is plugged in, the green “battery charge” light on the pendant switch will be lit and you will hear a click, which indicate the batteries are being charged.

WARNING

For your protection, the lift will not work while it is charging.

Pendant Switch Battery Indicator Lights

The pendant switch has a green “battery charge” light and a red “low battery” light. The “battery charge” light will shine when the power cord is plugged into a 120 volt outlet and the batteries are charging. The “low battery” light will shine when the batteries have used about 70% of their charge. Although enough charge will remain to do several more transfers when the “low battery” light is lit, it is important for staff to plug the power cord in and recharge the batteries.

Product Care

Back Belt and Sling Care

When belts are soiled or contaminated, they should be washed with mild detergent in cold or warm water only.

Laundering Instructions

- 1) Standard VERA back belts and sitting slings may be tumble-dried on the "delicate" temperature cycle in the dryer. If the dryer in your facility does not have a "delicate" cycle, slings should be hung to air dry.
- 2) "C" Cloth back belts and sitting slings may be washed in water temperature up to 167° F (75° C). Do not bleach. Air dry or dry at temperature below 167°. Inspect with each use.
- 3) "H" Cloth back belts and sitting slings may be washed in water temperature up to 200° F (93° C). Do not bleach. Air dry or dry at temperature below 200°. Inspect with each use.

Monthly Back Belt and Sitting Sling Inspection

Back belts and sitting slings must be inspected by a nurse or professional rehabilitation staff member at least monthly for signs of damage, for loose and missing stitching, and for tears and excessive wear that might cause them to fail. If a back belt or sling is damaged or overly worn, it must be thrown away and replaced with an undamaged back belt or sling. A permanent record of each of these inspections and action taken should be kept by the facility. (See Monthly VERA-LIFT™ Back Belt/Sitting Sling Inspection Checklist at the back of this manual.)

WARNING

It is important that a nurse or professional rehabilitation staff member inspects all back belts and sitting slings monthly.

Monthly VERA-Lift™ Inspection

WARNING

The VERA-LIFT™ must be inspected by qualified maintenance staff at least monthly for missing parts and excessive wear that might cause the lift to fail. If a problem is noted, the lift should not be used until repairs have been made by qualified maintenance staff. A permanent record of each of these inspections and repairs made should be kept by the facility. (See Monthly VERA-LIFT™ Inspection Checklist at the back of this manual.)

 **It is important that qualified maintenance staff inspect all VERA-LIFTs™ monthly.**

Cleaning the VERA-LIFT™

When the VERA-LIFT™ gets soiled, it may be wiped clean with a damp cloth and mild detergent.



WARNING

The VERA-LIFT™ should NEVER be cleaned in a shower, as water will damage the electronics in the base of the lift. Damage from failure to follow this cleaning procedure is NOT covered under warranty.

Factory Service and Ordering Replacement Parts

For factory-authorized service, or to order replacement parts, contact your local authorized VANCARE Distributor.

Further Questions

If you have questions about any of the material covered in this manual, contact your local VANCARE Distributor. Your local distributor's name, address and phone number are located on the back page of this manual. If you are unable to locate your local distributor, call VANCARE directly using the phone number on the front cover.

This instruction applies to Vancare mobile lifts, ceiling lifts, sit to stand lifts, and lift stretchers, yet in this text we refer only to lifts.

To avoid possible transmission of infectious disease, it is important to clean the lift if it has become soiled or if it is to be used by another patient. Also refer to your facility's cleaning and disinfection policies for any additional guidelines on frequency.

It is important to follow the recommendations in this manual to maintain the warranty and expected life time.

This manual gives detailed cleaning and disinfecting procedures for Vancare lifts. The instructions in this manual do not replace your facility's cleaning and disinfection policies.

This manual is intended for use by facility-approved persons only. To ignore this restriction could cause severe injury to people and serious damage to equipment.

Vancare recommends that the lift be disinfected prior to first use.

Vancare recommends to disinfect the lift prior to disposal in accordance with local environmental regulations.

Vancare's products undergo continuous development, which is why we reserve the right to make product changes without prior notice. The only warranty Vancare makes is the express written warranty extended on the sale or rental of its products.

The information contained in this manual is subject to change without notice. Visit our website www.vancare.com for updated versions of this manual or contact your local Vancare representative for advice or more information.

Safety recommendations

- Wear protective equipment according to manufacturer's instruction and per facility protocol throughout the cleaning operations, such as: rubber gloves, goggles, apron, face mask and shoe covers.
- Unplug mains (AC power source) before cleaning and disinfection.
- Never clean the lift by pouring water on it, steam cleaning it, or by using a high-pressure jet.
- Refer to the recommendations made by the cleaning and disinfecting product manufacturer.

△ Inadequate cleaning may increase risk of cross contamination!

Vancare Vanderlifts & VanGo Cleaning Instruction

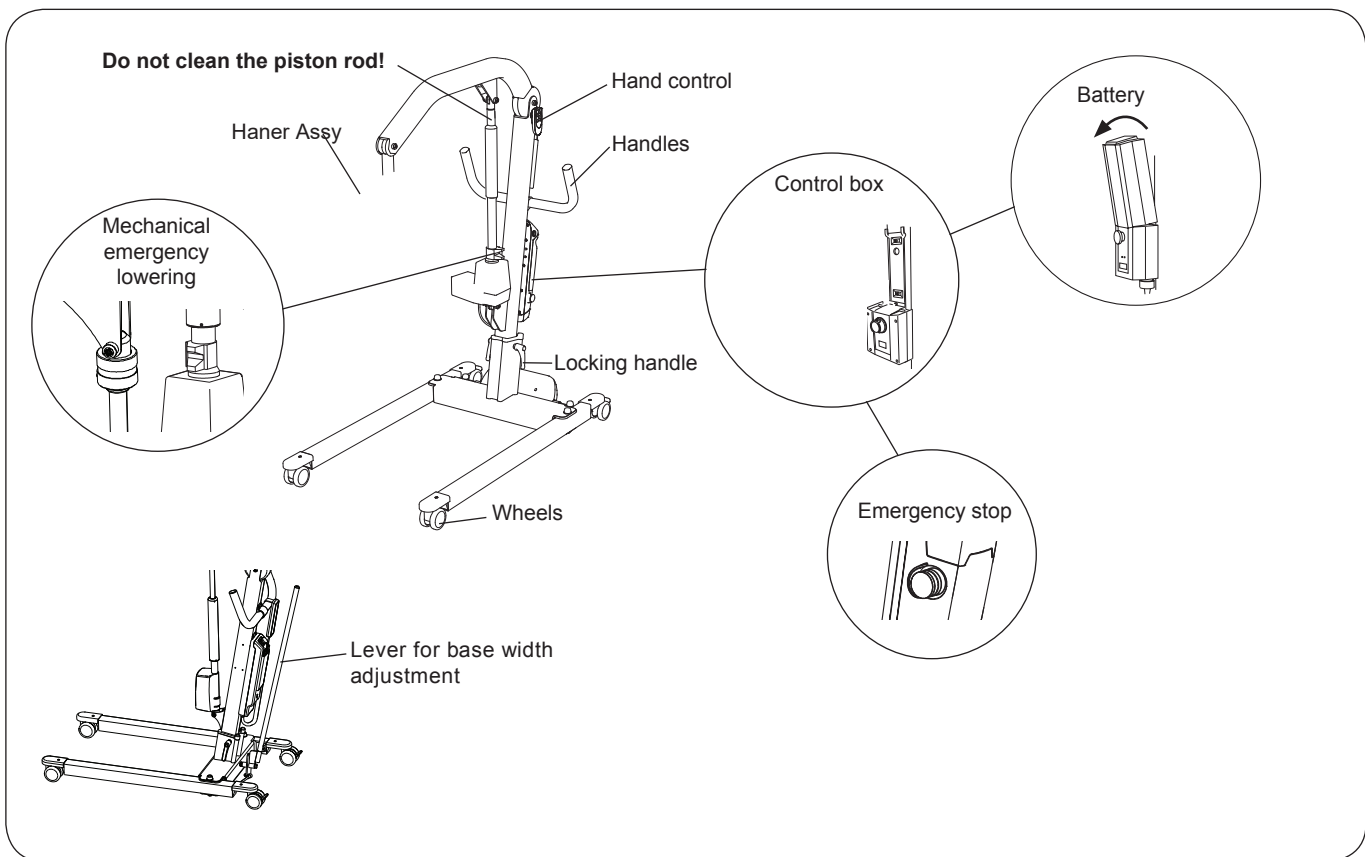
1. **⚠ Unplug mains (AC power source) before cleaning and disinfection.**

2. Clean the lift with a moist cloth, using warm water and a facility approved neutral detergent. A soft brush can be used to remove stains and resistant soil.
3. Wipe down the entire lift starting from the top down. Do not use a cloth that is dripping wet. To have access to all areas run the lift into the highest and lowest positions and extend the base width adjustment entirely in and out. Remove the Battery to have access behind the battery.

NOTE! Do not clean the piston rod!

4. Pay special attention to the following areas:

- Hanger Assembly (different designs)
- Mechanical emergency lowering (different designs)
- Handles
- Hand control (different designs)
- Emergency stop
- Operation panel/display (where applicable)
- Lever for base width adjustment (where applicable)
- Pedal for base width adjustment (where applicable)
- Locking handles
- Wheels



Disinfect

Follow the manufacturer's instructions for proper use of the disinfectant. After you disinfect the lift, wipe the lift with a moist cloth using clean water to remove all disinfectant residue.

⚠ The lift may be disinfected by using only Vital Oxide or a chemically equivalent product.

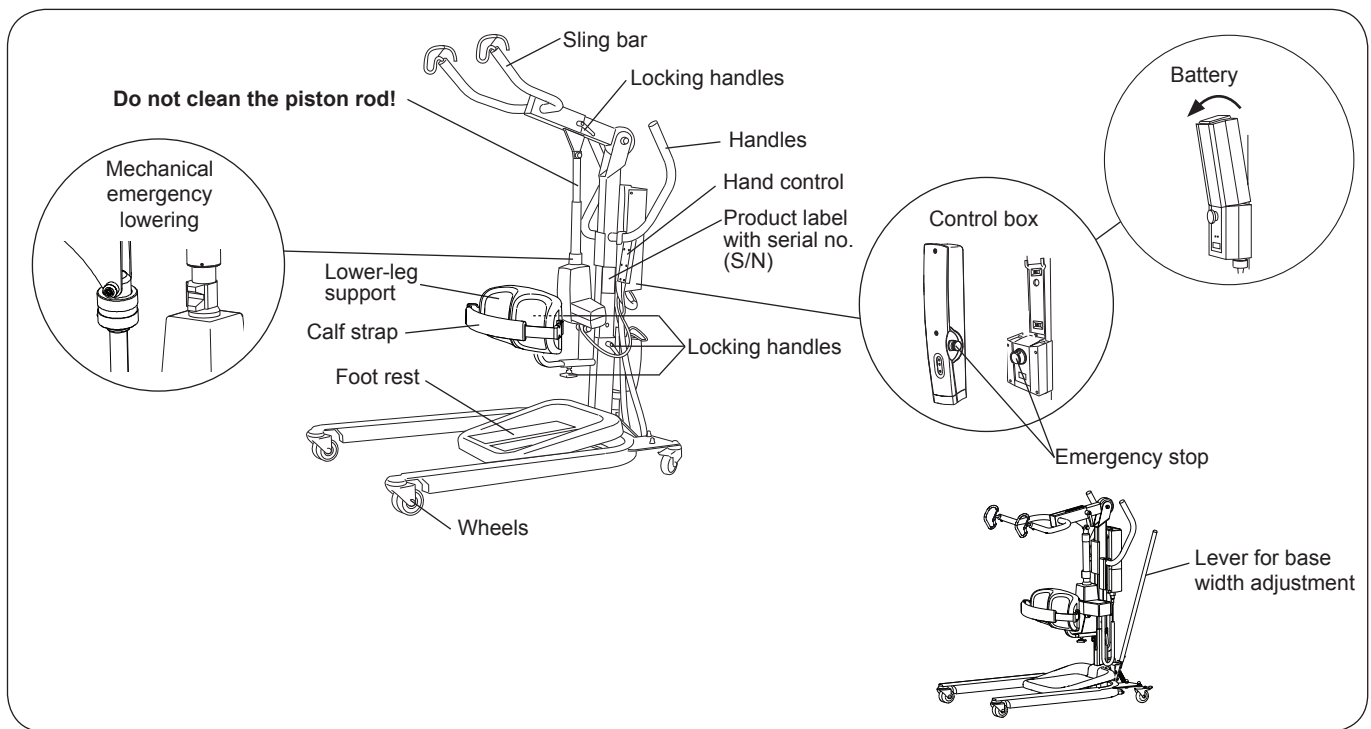
Vera & Vera Lift II

Cleaning Instruction

1. **⚠ Unplug mains (AC power source) before cleaning and disinfection.**
2. Clean the lift with a moist cloth, using warm water and a facility approved neutral detergent. A soft brush can be used to remove stains and resistant soil.
3. Wipe down the entire lift starting from the top down. Do not use a cloth that is dripping wet. To have access to all areas run the lift into the highest and lowest positions and extend the base width adjustment entirely in and out. Remove the Battery to have access behind the battery. The calf strap may be machine washed 60-80°C (140-176°F), see "Care and Maintenance of Vancare Slings" for more information.

NOTE! Do not clean the piston rod!

4. Pay special attention to the following areas:
 - Sling bar (different designs)
 - Side support (where applicable)
 - Handles
 - Mechanical emergency lowering (different designs)
 - Hand control
 - Emergency stop
 - Lower-leg support
 - Foot rest
 - Locking handles
 - Wheels
 - Lever for base width adjustment (where applicable)



Disinfect

Follow the manufacturer's instructions for proper use of the disinfectant. After you disinfect the lift, wipe the lift with a moist cloth using clean water to remove all disinfectant residue.

- ⚠ The lift may be disinfected by using only Vital Oxide or a chemically equivalent product.**

February 2, 2015

Vital Oxide

Section 1: Product and Company Identification

Product Name	Vital Oxide	Aqueous Oxidant												
Manufacturer/Distributor	Vital Solutions, LLC. PO Box 9932 West Palm Beach, FL 33419	<table border="1"> <tr> <td>H</td><td>0</td><td></td></tr> <tr> <td>F</td><td>0</td><td></td></tr> <tr> <td>R</td><td>0</td><td></td></tr> <tr> <td>PE</td><td>--</td><td></td></tr> </table>	H	0		F	0		R	0		PE	--	
H	0													
F	0													
R	0													
PE	--													
Phone Numbers														
Product Information	(561) 848-1717													
Medical Emergency	(800) 222-1222													

Section 2: Composition/ Information on Ingredients

Ingredients	CAS Number	Wt %
Oxychlorine Compounds	Mixture	0.200
n-Alkyl Dimethyl Benzyl Ammonium Chloride	68391-01-5	0.125
n-Alkyl Dimethyl Ethylbenzyl Ammonium Chloride	85409-23-0	0.125
Inert Ingredients	Mixture	99.55

At these concentrations none of the ingredients are known to pose any hazards to human health.

Section 3: Hazards Identification

Emergency Overview

Colorless liquid with mild fresh odor. Avoid contact with eyes. Keep out of reach of children.

HMIS Rating: **Health:** 0 **Flammability:** 0 **Reactivity:** 0 **PPE:** None

Potential Health Effects

Eye Contact: Eye contact may cause mild eye irritation with discomfort.

Skin Contact: Does NOT cause skin irritation and the product is NOT skin sensitizer.

Inhalation: Does NOT cause any respiratory irritation. If consumer product accidentally contacts strong acids in restricted ventilation area, avoid breathing the vapors and allow adequate time for the vapors to disperse before re-entering the restricted area.

Ingestion: Non-Toxic

Carcinogenicity Information None of the components present in this material at concentrations equal to or greater than 0.1% are listed by IARC, NTP, OSHA, and ACGIH as carcinogens.

Section 4: First Aid Measures

Inhalation

Does NOT cause any respiratory irritation. If consumer product accidentally contacts strong acids in restricted ventilation area, avoid breathing the vapors, and allow adequate time for the vapors to disperse before re-entering the restricted area.

Skin Contact

Does NOT cause skin irritation.

Eye Contact

In case of contact, flush eyes with plenty of water.

Ingestion

Non-toxic. Give a glass of water.

Section 5: Fire Fighting Measures

Flammable Properties: Flash Point: Not Available (Non Flammable)

Flammable Limits: Lower Flammable Limit: Not Established

Burn Rate: Unknown

Upper Flammable Limit: Not Established

Flammability Classification: Non-Flammable liquid **Autoignition Temperature:** Not Established

Hazardous Combustion Products: Thermal or other decomposition may yield chlorine dioxide or chlorine.

Extinguishing Media: N/A (Non-Flammable liquid) **Additional Considerations:** None

FIRE FIGHTING INSTRUCTIONS: Non-Flammable liquid

NFPA Rating: Health: 0 **Flammability:** 0 **Reactivity:** 0 **PPE:** NONE

Section 6: Accidental Release Measures

Spill Clean Up

No special cleanup measures are required for the consumer product. To avoid the possibility of "bleaching" the spill should be absorbed with paper towels, and the area rinsed with clean water.

Accidental Release Measures

Spills are slippery and should be cleaned up promptly.

Section 7: Handling and Storage

Handling: Keep away from heat and strong acids. Do not ingest. Keep container closed. Use only with adequate ventilation.

Storage: Keep container tightly closed and sealed until ready for use. Keep container in a well-ventilated place. Do not store above 120°F or near fire or open flame. Store large quantities in buildings to comply with OSHA 1910.106. Do not transfer contents to bottles or other unlabeled containers. Do not reuse empty containers. Keep out of reach of children.

Incompatible materials: Strong acids

Special Packaging Materials: None

Section 8: Exposure Control/ Personal Protection

Engineering Controls: Use in adequately ventilated areas.

Personal Protective Equipment:

Eye/Face Protection: Not required for consumer product.

Skin Protection: Not required for consumer product.

Respirators: None required for normal use. If consumer product accidentally contacts strong acids in restricted ventilation area, avoid breathing the vapors, and allow adequate time for the vapors to disperse before re-entering the restricted area.

Exposure Limits:

Oxychlorine Compounds: n-Alkyl Dimethyl Ethylbenzyl Ammonium Chloride:

PEL (OSHA): Not available	PEL (OSHA): Not available
TLV (ACGIH): Not available	TLV (ACGIH): Not available

n-Alkyl Dimethyl Benzyl Ammonium Chloride:

PEL (OSHA): Not available
TLV (ACGIH): Not available

Section 9: Physical and Chemical Properties

Appearance:	Colorless liquid	Odor:	Mild-Fresh
Physical State:	Liquid	pH:	8 - 9
Boiling Point (°F):	212	Solubility in Water:	100%
Freezing Point (°F):	32	Vapor Pressure (mm Hg):	Not Available
Volatile Organic Compounds (VOC):	None	Evaporation Rate:	Less than Ether
Specific Gravity:	1.003 @ 68°F (20°C)	Density (lb/gal):	8.40 @ 68°F (20°C)

Section 10: Stability and Reactivity

Chemical Stability: The product is stable.

Incompatibility with other Materials: Strong acids

Conditions to avoid: Contact with strong acids

Hazardous Polymerization: Will not occur.

Hazardous Decomposition Products: Thermal or other decomposition may yield chlorine dioxide or chlorine.

Section 11: Toxicological Information

TOXICITY TESTING – ACUTE Inhalation – Studies with Wistar Albino rats exposed to a respirable aerosol made from a solution of Vital Oxide at a level of 2.08 mg/l for four hours resulted in no deaths and no abnormal necropsy observations. **Eye Contact** – Studies with New Zealand white rabbits showed this product is a very mild ocular irritant; mild conjunctival irritation was observed, but cleared within 24 hours. **Skin Contact** – Study of dermal toxicity in New Zealand white rabbits showed the product to be non-toxic: Dermal LD₅₀ > 5,000 mg/kg of body weight; Study of dermal irritation in New Zealand white rabbits showed the product is not a dermal irritant. In Dermal Sensitization studies, Vital Oxide was determined not to be a sensitizer. **Swallowing** - Acute oral toxicity in albino rats: Non-toxic LD₅₀ > 5,000 mg/kg of body weight.

EPA TOXICITY RATING – IV This is the lowest category on the scale and is designed for substances that are the least hazardous.

Section 12: Ecological Information

Environmental Hazards: Not data available.

Environmental Fate: Not data available.

Section 13: Disposal Considerations

Waste Disposal: Treatment, storage, transportation, and disposal must be in accordance with applicable Federal, State/Provincial and Local regulations.

Section 14: Transport Information

Shipping Information: Not regulated by DOT, IMO/IMDG and IATA/ICAO for ground, air or ocean shipments.

Section 15: Regulatory Information**U.S. Federal Regulations:**

TSCA: All components appear in TSCA Inventory

OSHA: Refer to Section 8 for exposure limits.

CERCLA SARA Hazard Category:

Section 311 and 312: This product has been reviewed according to the EPA "Hazard Categories" promulgated under Sections 311 and 312 of the Superfund Amendment and Reauthorization Act of 1986 (SARA Title III) and is considered, under applicable definitions, to meet the following categories: Information not available.

Section 313: This product contains following substances subject to the reporting requirements of Section 313 of Title III of the Superfund Amendments and Reauthorization Act of 1986 and 40 CFR Part 372: None

State regulations:

State Right to Know information is not provided.

California prop. 65 (no significant risk level): None

International Regulations:

Canadian WHMIS: Not controlled

Canadian Environmental Protection Act (CEPA): Additional information available upon request.

EU Regulations: Additional information available upon request.

Section 16: Other Information

The information is furnished without warranty, expressed or implied, except that it is accurate to the best knowledge of Vital Solutions, LLC. The Data on this sheet related only to the specific material designed herein. Vital Solutions, LLC assumes no legal responsibility for the use or reliance on this data.

VERA-LIFT™ Back Belt, Sitting Sling, and Gait Belt

Ordering Information

VERA-LIFT™ Back Belts

Sizing

The VERA-LIFT™ back belt should be wide enough to fit from the top of the gluteal fold (between the buttocks) to 2 – 3 inches below the lower edge of the patient's shoulder blades. The back belt should be long enough for belt fabric to fit around the patient's abdomen without loop fabric touching the patient.

Material

Back belt and sitting slings are available in your choice of standard polyester, high-heat polyester (which withstands temperatures up to 200°). You may also choose cool-heat polyester (which withstands temperatures up to 167°) and has a non-absorbent coating on one side for easy spot cleaning.

Double Strap Contour Back Belts (For Skilled Nursing and Long Term Care Facilities)

Double strap back belts can be used with the white straps connected to the lift arm hooks to transfer patients with predictable, cooperative behavior who meet the other single strap connection criteria. Patients with cooperative but unpredictable behavior, patients with one-sided weakness and patients with a single lower amputation can be safely transferred with the white straps crossed and the colored straps connected straight to the lift arm hooks. (Refer to "Patient Assessment Criteria" and "VERA-LIFT™ Transfer Procedures" for specific information.)



10-Inch Wide Contour Back Belt

Size	Length	Part Number
Small	35 inches long	5-091020
Medium	40 inches long	5-092020
Large	46 inches long	5-093020
Ex-large	62 inches long	5-094020

13-Inch Wide Contour Back Belt

Size	Length	Part Number
Small	35 inches long	5-091023
Medium	40 inches long	5-092023
Large	46 inches long	5-093023
Ex-large	62 inches long	5-094023

Single Strap Contour Back Belts **(For Assisted Living Facilities)**

Single strap back belts can be used to transfer patients with predictable, cooperative behavior who are able to follow simple directions, are able to hold onto both hand grips and put both feet on the VERA-LIFT™ foot pad, are weight bearing on both legs. (Refer to "Patient Assessment Criteria" and "VERA-LIFT™ Transfer Procedures" for specific information.)

10-Inch Wide Contour Back Belt

Size	Length	Part Number
Small	35 inches long	5-091010
Medium	40 inches long	5-092010
Large	46 inches long	5-093010
Ex-large	62 inches long	5-094010

13-Inch Wide Contour

Size	Length	Part Number
Small	35 inches long	5-091013
Medium	40 inches long	5-092013
Large	46 inches long	5-093013
Ex-large	62 inches long	5-094013



VERA-LIFT™ Sitting Slings

Sizing

The VERA-LIFT™ sitting sling should be long enough to extend from the bottom of the patient's coccyx to two to three inches below the lower edge of the patient's shoulder blades.

The VERA-LIFT™ sitting sling can be used to transfer patients who do not exhibit behavior during transfers that might pose risk of injury to the patient or for staff members during seated transfers. Patients must also be able to sit erect with arms on the outside of the sitting sling and able to have both knees against the knee rest. (Refer to "Patient Assessment Criteria" and "VERA-LIFT™ Transfer Procedures" for specific information.)

Measurements are from the top of the back support to the bottom of the horseshoe area.

Size	Length	Part Number
Small	12 inches long	5-071000
Medium	14 inches long	5-072000
Large	16 inches long	5-073000
X-Large	18 inches long	5-074000



VANCARE Gait Belts

Gait belts can be used to assist patients who are able to do staff assisted standing or squat pivot transfers. Gait belts are constructed of polyester webbing and a heavy-duty acetal composite buckle.



Gait belts are 63 inches long by 2 inches wide.

Part Number: 6-004000

VERA-LIFT™ Back Belt and Sling Options

Back belts and slings can be manufactured with optional synthetic sheep skin or STAPH-CHEK® sewn in moisture proof lining. Moisture proof STAPH-CHEK® slip on sling and back belt protectors are also available.

Special Orders

On rare occasions, a non-standard size or shape back belt or sling will meet an individual patient's transfer needs more safely. Contact your distributor for custom order requirements.

FOR INFORMATION ON CURRENT PRICING, OR TO PLACE AN ORDER, CONTACT YOUR DISTRIBUTOR

WARRANTY INFORMATION

VANCARE back belts and slings are guaranteed for one year from the date of purchase for defects in materials and manufacture. Damage caused by misuse or improper care is not covered.

Optional Built-in VERASCALE®

Thanks to such features as push-button operation and automatic zeroing, optional built-in or hanging **VERASCALES®** weigh residents with extraordinary ease and accuracy.

Operation

1. To turn on the scale, press the "ON/ZERO" pad. The display will perform a startup sequence, showing the firmware version (V 1.0) and the current battery voltage (b 6.7), then settle on some weight.
2. Place the sling onto the spreader bar. Make sure that no part of the sling or spreader-bar is touching the floor or any object. Press the "ON/ZERO" pad to zero the display. The display will show the word "ZERO" while the pad is pressed, then will count down from -3- to -0-.
3. Place the sling around the patient per the Lift Manufacturer's instructions. Lift the patient clear of all contact with the bed/chair. Read the patient's weight on the scale display. If the display turned off before lifting the patient, simply press the "ON/ZERO" pad to turn the scale on and read the weight (be careful to press the "ON/ZERO" pad only once to turn the scale on, or the display may be inadvertently zeroed while the patient is in the sling).
4. To change the display unit from lb to kg or from kg to lb, press and hold the "LB/KG" pad for approximately 3 to 4 seconds. The display will show the "conv" message then blank and the unit enunciator will change from LB to KG or from KG to LB. Release the "LB/KG" pad after the unit enunciator changes.
5. To recall the last patient's weight, the scale must first be turned on. Press the center of the "VANCARE" logo to the left of the "ON/ZERO" pad on the front of the scale. The display will show the message "RECL" then alternately flash between the stored weight and the "RECL" message.
6. If the battery symbol appears, replace the battery with a AA alkaline battery. The battery access cover is on the bottom of the scale.

Calibration

1. Should calibration be necessary, all that is required is a 25 lb precision weight (do NOT use bags of flour or other packaged goods for weights - contact the Lift Manufacturer to purchase precision weights).
2. To enter the calibration mode, first press and hold the "ON/ZERO" pad. While holding the "ON/ZERO" pad press and hold the "LB/KG" pad. After approximately 3 seconds the message on the display will change from "ZERO" to "CAL". Release both pads at this time and the display will show the "C 0" message.
3. Make sure the sling is empty and press the "ON/ZERO" pad. The indicator will count down from -8- to -0- while taking readings and store the zero point. When finished, the indicator will show the "C25" message.
4. Place a 25 lb test weight in the sling and press the "ON/ZERO" pad once again. The indicator will count down from -8- to -0- while taking readings and calculate and store the span calibration. The indicator then automatically returns to the normal weighing mode. Calibration is now complete.

MONTHLY VERA-LIFT™ INSPECTION CHECKLIST

INSTRUCTIONS: Use one page for each VERA-LIFT™. Check each blank as that item is inspected. Note date inspected, initials of maintenance staff member who performed inspection and repairs or adjustments made in the "COMMENTS" column.

Serial Number of Lift _____

Year _____

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	COMMENTS
Check nuts & bolts for tightness													
Inspect welds for cracks, rusting & damage													
Remove lids & inspect wire connections													
Check casters for tightness/lint													
Check battery voltage while lift is in operation*													
Check battery charger output (27.6 volts + or - .5 volts)													

*13.2 volts if fully charged, approx. 12.0 volts if partially discharged (+ or - .5 volt). If voltage decreases by 4 – 5 volts, change the battery.

Please follow the maintenance and inspection procedures outlined in the product manuals and record accordingly.
Based on institutional average usage data, Vancare recommends that all lifts be replaced every ten years or sooner based upon the facilities usage and the findings during regular use, maintenance and inspections.

MONTHLY VERA-LIFT™ BACK BELT AND SLING INSPECTION CHECKLIST

INSTRUCTIONS: All slings in the facility must be checked monthly. Slings that are damaged or excessively worn must be removed from service and replaced with undamaged slings. Check each blank as that item is inspected. Note the date inspected, the initials of the nurse or professional rehabilitation department staff member who performed the inspection, and action taken, if any, in the "CORRECTIVE ACTION" column.

YEAR _____

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	CORRECTIVE ACTION
Total number of back belts													
Total number of sitting slings													
Does Safety belt Velcro or plastic connector fasten securely?													
Is loose and/or missing stitching present?													
On slings with safety belts, does Velcro or plastic connector fasten securely?													
Are tears present?													
Is excessive wear present?													
Is color fading on stabilizing handles?*													
Is the padding inside the leg straps smooth?**													

*If the color is fading on the stabilizing handles, this indicates the sling is being laundered with bleach or with a harsher detergent than is recommended. The sling must be removed from service immediately and discarded as bleach or harsh detergent can weaken the fabric and stitching.

**If the padding inside the leg straps is bunched (no longer smooth), this indicates the sling has been dried in a hot dryer. The sling must be removed from service immediately and discarded as too much heat can damage the sling.

VERA LIFT AND VERA LIFT II **Standing** Transfer Skills Observation Assessment

Staff Member Observed _____

Date _____

The resident must be able to stand erect and have no contraindications to being transferred with a back belt with knees against the knee rest.

PROCEDURE - DID THE EMPLOYEE:

- ☐ Have the required number of staff members present?
- ☐ Select the correct size back belt?
- ☐ Inspect the back belt and lift for damage and proper operation?
- ☐ If **DAMAGED**, did the employee get another lift/belt and notify charge nurse?
- ☐ Correctly position the back belt behind the resident with back belt top at least 2 inches below shoulder blades and fasten safety belt snugly?
- ☐ Perform environment assessment and remove objects that would impede operation of lift?
- ☐ Lower the lifting frame using the Pendant Switch, **open the base** all the way, and **position in front of the resident** with feet on footrest and knees against kneepad?
- ☐ Properly lock brakes?
- ☐ Snuggly connect back belt loops to lift arm hooks? **For single strap transfer** connect back belt loops (without crossing) to lift arm hooks. **For double strap transfer** 1) cross back belt loops on one side of back belt through the loop closest to the back belt on the other side and connect to the lift arm hooks, 2) connect the colored loops to the lift arm hooks straight (see photograph), 3) fasten knee strap. **Double check the back belt attachment to the lift?**
- ☐ Lift the resident to a comfortable position?
- ☐ Unlock brakes and move the lift into position in front of bed/wheelchair/commode? (1 person pushes lift, while other pulls on back belt handle)
- ☐ Leave brakes unlocked and lower the lift to seat the resident on the chair/bed/commode?
- ☐ Remove the back belt loops from the lift arm hooks and unfasten knee strap, if used?
- ☐ Back the lift away from the resident and remove the back belt?
- ☐ Make certain the resident is safe and comfortable before leaving?



KNOWLEDGE – CAN THE EMPLOYEE:

- ☐ Identify lifting capabilities (maximum weight)?
- ☐ Identify location and use of Emergency Stop Switch?
- ☐ Identify location and use of Emergency Lowering?
- ☐ Identify location and use of Auxiliary Up/Down Switch?
- ☐ Identify Low Battery Indicator light?
- ☐ Demonstrate how to recharge battery?
- ☐ Properly use the Scale attachment (if applicable)?
- ☐ Demonstrate proper understanding of how to clean the back belt and lift?

Refer to Operator's Manual for more detailed description of transfer technique.

☐ Pass

☐ Fail

Observations _____

Observer's Name _____

Observer's Signature _____

VERA LIFT & VERA LIFT II **Sitting** Sling Transfer Skill Observation Assessment

Staff Member Observed _____ Date _____

The resident must be able to sit erect and have no contraindications to having knees against the knee rest to be transferred with the Vera Lift and Vera Lift II and a sitting sling.

PROCEDURE - DID THE EMPLOYEE:

- ☐ Have the required number of staff members present?
- ☐ Select the correct size sitting sling?
- ☐ Inspect the sitting sling and lift for damage and proper operation?
- ☐ If **DAMAGED**, did the employee get another lift/sitting sling and notify charge nurse?
- ☐ Assist resident to sit on edge of the bed and position the sitting sling behind the resident with the tip of the sitting sling at least 2 inches below shoulder blades?
- ☐ Fasten safety belt snugly?
- ☐ Perform environment assessment and remove objects that would impede operation of lift?
- ☐ Lower the lifting frame using the Pendant Switch, **open the base** all the way, and **position in front of the resident** with feet on footrest and knees against kneepad?
- ☐ Properly lock brakes?
- ☐ Snuggly connect sitting sling shoulder loops to bottom lift arm hooks and leg loops to extended bolt on mast? **Double check the sitting sling attachment to the lift?**
- ☐ Lift the resident no more than 2" off the bed/wheelchair?
- ☐ Unlock brakes and back the lift away and when clear, lower resident to normal sitting position?
- ☐ Move the lift into position over bed/wheelchair (1 person pushes lift, while other pulls on sitting sling handle)
- ☐ Leave brakes unlocked and lower the lift until the resident is sitting on the chair/bed?
- ☐ Unfasten the safety belt and remove the sitting sling loops from the lift?
- ☐ Back the lift away from the resident, then remove the sitting sling?
- ☐ Make certain the resident is safe and comfortable before leaving?

KNOWLEDGE – CAN THE EMPLOYEE:

- ☐ Identify lifting capabilities (maximum weight)?
- ☐ Identify location and use of Emergency Stop Switch?
- ☐ Identify location and use of Emergency Lowering?
- ☐ Identify location and use of Auxiliary Up/Down Switch?
- ☐ Identify Low Battery Indicator light?
- ☐ Demonstrate how to recharge battery?
- ☐ Properly use the Scale attachment (if applicable)?
- ☐ Demonstrate proper understanding of how to clean the back belt and lift?

Refer to Operator's Manual for more detailed description of transfer technique.

☐ Pass ☐ Fail

Observations _____

Observer's Name _____

Observer's Signature _____