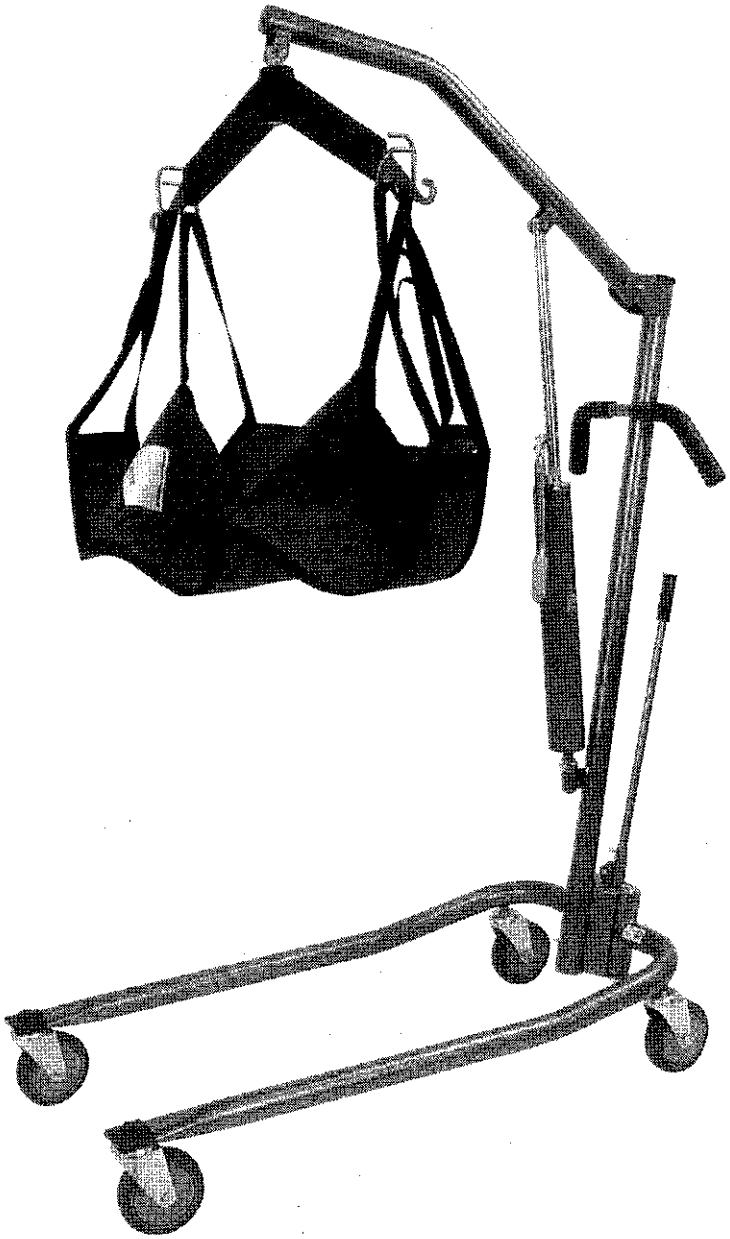
PATIENT LIFT



OWNERS MANUAL & INSTRUCTIONS

drive™

Port Washington, NY 11050

Website: www.drivemedical.com

SAFETY SUMMARY

WARNING!

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

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

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

Use common sense in all lifts. Special care **MUST BE** taken with physically challenged individuals who cannot cooperate while being lifted. Use restraint straps if necessary.

Drive slings and patient lift accessories are specifically designed to be used in conjunction with Drive patient lifts. Slings and accessories designed by other manufacturers are not to be utilized as a component of Drive's patient lift system. Use of these products is prohibited and will void Drive's patient lift warranty. Use only genuine Drive slings and lift accessories to maintain patient safety and product utility.

Use a sling that is recommended by the individual's doctor, nurse or medical attendant for the comfort and safety of the individual being lifted.

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

When using an adjustable base lift, the legs **MUST BE** in the maximum **OPENED/LOCKED** position **BEFORE** lifting the patient.

Before transferring a patient from a stationary object (wheelchair, commode or bed), slightly raise the patient off the stationary object and check all sling hardware for secure attachment to include swivel bar, straps, S-hooks and D or O-rings. If any attachment is not correct, lower the patient and correct the problem, then raise the patient and check again.

During transfer, with patient suspended in a sling attached to the lift, **DO NOT** roll caster base over objects such as carpets, raised carpet bindings, door frames, or any uneven

SAFETY SUMMARY

surfaces or obstacles that would create an imbalance of the patient lift and could cause the patient lift to tip over. Use steering handles on the mast at **ALL** times to push or pull the patient lift.

After the first 12 months of operation, inspect the swivel bar and the boom (to which it attaches) for wear. If the metal is worn, the parts **MUST** be replaced. Make this inspection every three (3) months thereafter.

The hydraulic pump is sealed at the factory and if service is required, the pump unit **MUST BE** returned to the factory for repair. **DO NOT** attempt to open the hydraulic pump or obtain local service as this will VOID the warranty and may result in damage and a costly repair. Consult your Dealer or Drive for further information.

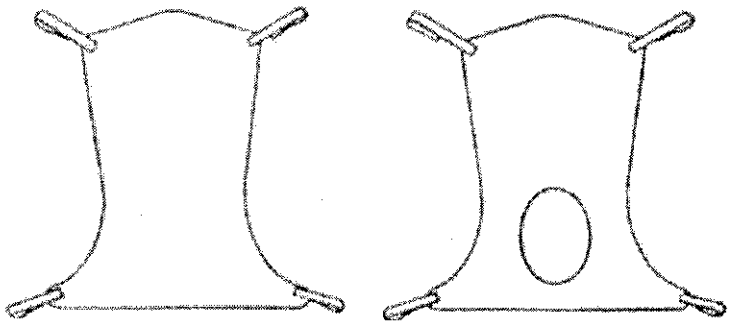
Casters and axle bolts require inspection every six (6) months to check for tightness and wear.

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

DO NOT exceed maximum weight limitation of the patient lift. These suggested weight limitations will vary from 300 to 450 lbs. depending on the type of patient lift purchased. Refer to the **SPECIFICATIONS** in this Owner is Manual for maximum weight limitation.

FEATURES (CONT.)

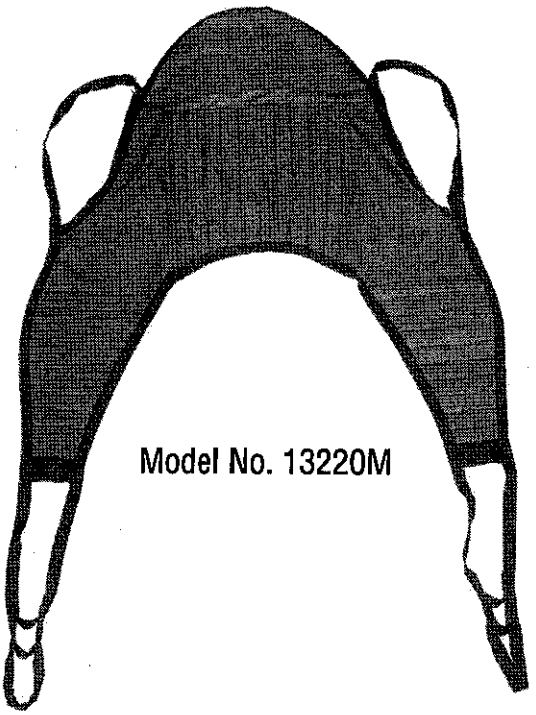
13223M - Mesh, Medium, 1/ea
13223L - Mesh, Large, 1/ea
13222M - Solid, Medium, 1/ea
13222L - Solid, Large, 1/ea
13224XL - Solid, Extra Large, 1/ea
13221M - Mesh, Commode Opening, Medium, 1/ea
13221L - Mesh, Commode Opening, Large, 1/ea
13221XL - Mesh, Commode Opening, Extra Large, 1/ea



Model No. 13222M

Model No. 13221M

Divided leg design is best suited for high level spinal cord injuries or patients where sling removal is more difficult. Support ranges from the upper back to beneath the thighs. Can be positioned with patient seated. Greatly simplifies the use of bathroom facilities.



Model No. 13220M

ONE - PIECE SLINGS

SLINGS USING CHAINS, O-RINGS AND D-RINGS

13011 - Nylon, 1/bx
13012 - Canvas, 1/bx
13025 - Polyester, 1/bx
13013 - Nylon, with Commode Opening, 1/bx
13014 - Canvas, with Commode Opening, 1/bx
13026 - Polyester, with Commode Opening, 1/bx
13060 - Heavy Duty, Canvas, with Commode opening, 1/bx
13061 - Heavy Duty, Canvas, 1/bx

Drive slings are designed specifically for use with Drive Patient Lifts and made to support the patient during lift and transfer procedures. Slings attach to the lift with either straps or chains (inter-changeable). The slings are reinforced at all points of attachment for safety. The fabrics used in these slings are of very durable materials that resist deterioration from exposure to moisture and laundering. This design will accommodate patients of heavy or light weight with support from the shoulders to the knees. The contour shape provides comfort during the lift by avoiding the bulk of excess material between the back and seat sections.

FABRIC

The fabric has a smooth inner side. The outer side has binding tape around the pocket.

NOTE: Always place the sling under the patient with the smooth side next to the body. Sling fabrics are offered in a choice of three (3) materials. Canvas, Nylon and Polyester.

NOTE: Laundering should always be done with dark colors.
Open mesh nylon fabric is an exceptional material that provides safety and comfort for the patient. The open mesh weave of the fabric preshrunk, and durable for use and laundering. It provides considerable traction to resist slipping and sliding during use.

BODY

Slings may be ordered at the time of purchase with a commode opening in the seat section for use over a commode or a commode chair.

Each sling includes four (4) metal support bars that have a hole at the center to attach the S-hook.

When shipped from the factory, these reinforcing metal support bars are enclosed in the sling pocket with the hole exposed.

ONE - PIECE SLINGS (CONT.)

FULL BODY AND PADDED "U" SLING

Slings attach to the lift with straps for easy positioning. Each loop strap is reinforced at the hook-up point for strength and durability.

FABRIC

The outer side has a reinforced "grab handle" for assistance in positioning the patient in a wheelchair, commode, etc. The edging is soft yet durable with extra reinforced stitching for safety.

NOTE: Always place the sling under the patient with the handle away from the patient.

NOTE: Laundering should always be done with dark colors. Refer to tagged washing instructions on the sling.

The full body and "U" sling fabrics are an exceptional material that provides safety and comfort for the patient. They provide considerable traction to resist slipping and sliding during use.

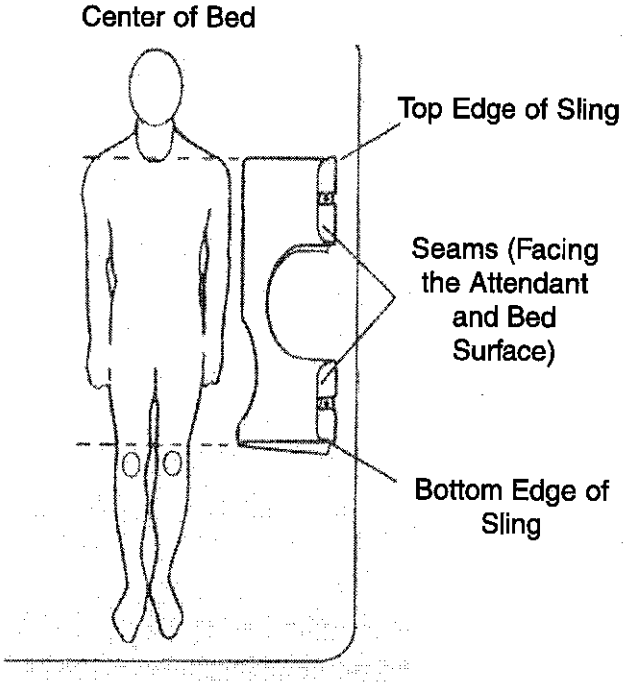
BODY

Slings may be ordered at the time of purchase with a commode opening in the seat section for use over a commode or a commode chair. Slings are constructed with a high back section and built-in headrest that provides additional support for the head and neck.

POSITIONING THE SLING (WITHOUT HEADREST)

1. Position the patient in the center of the bed and laying flat on his/her back.
2. Fold the sling in half (length-wise) and place the fabric sections of the sling beside the patient.

NOTE: The sling seams (uneven surface) will be against the bed surface and facing the attendant when folded. The opposite side of the fabric is smooth. After the sling is positioned for lifting purposes, the smooth side will be next to the patient.



POSITIONING THE SLING (WITHOUT HEADREST)

ONE - PIECE SLINGS (CONT.)

3. The top edge of the sling fabric (nearest to the patient's head) should be slightly above the armpit level of the patient.
4. The bottom edge of the sling fabric should then be a few inches above the back of the patient's knee.
5. With both attendants holding the patient, push the folded sling under the patient without rolling him/her over.

POSITIONING THE PATIENT ON THE SLING

NOTE: Use the following method to easily move the patient and avoid strain to yourself.

1. If the patient is to roll to their LEFT-SIDE, then elevate the patient's RIGHT KNEE until the right foot is flat on the bed.

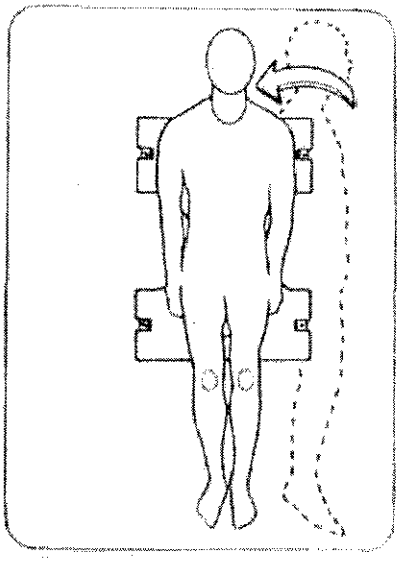
NOTE: Drive recommends that two (2) attendants (One [1] on each side of the bed) be used when positioning the patient in a sling.

2. With an attendant on each side of the bed and up against the mattress, the attendant on the left-hand side of the bed will position his/her RIGHT-HAND on the elevated KNEE and his/ her LEFT-HAND under the patient's RIGHT SHOULDER, slowly push on the knee and assist with a slight lift of the shoulder and the patient will easily roll onto their side.
3. With the patient on their side, push the fabrics of the seat and back gently under them.

NOTE: The upper edge of the back section should be positioned slightly above the armpit level and the lower edge of the seat section positioned a few inches above the back of the patient's knees.

4. Roll the patient on to his/her back. NOTE: Attendants will reverse roles.
5. After the patient has been positioned once again on his/her back, you now need to roll the patient to their RIGHT-SIDE (facing the attendant on the LEFT).
6. With an attendant on each side of the bed and up against the mattress, the attendant on the right-hand side of the bed will elevate the LEFT KNEE and position his/her LEFT-HAND on the elevated KNEE and his/her RIGHT-HAND under the patient's LEFT SHOULDER. The attendant will slowly push on the knee and assist with a slight lift of the shoulder and the patient will easily roll onto their side.
7. Pull the fabrics of the seat and back across the mattress until they are smooth.
8. Roll the patient onto their back and they should be approximately centered on the sling.
9. You are now ready to attach the chains or straps to the sling.

PATIENT CENTERED IN SLING



PADDED, "U" SLINGS

NOTE: Drive recommends that two (2) attendants (One [1] in front and one [1] in back of the wheelchair) be used when positioning the patient in the sling.

NOTE: Use the following method to easily move the patient and avoid strain to yourself.

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

1. With the patient sitting in a chair one (1) attendant in the front and the other attendant in the back, lean the patient forward.

NOTE: The front attendant will be supporting the weight of the patient.

2. Place the sling behind the patient and bring the flaps out alongside the patient's legs.

NOTE: The back of the sling (mounting area) should be parallel to the patient's upper arms and be positioned between the top of the patient's back and the top of the chair back.

3. With the back of the sling positioned properly, push the edges of the commode opening under the patients buttocks.
4. Lean the patient back into the chair with the attendant in the rear supporting his/her weight.
5. Lift the patient's legs (one at a time) while holding the leg panel of the sling, reach under the patient's leg and pull until the leg panel of the sling is behind the patient's knees (about three [3] inches) and the back of the sling remains in position.
6. The straps may be crossed BETWEEN or UNDERNEATH the patient's legs. Refer to Attaching the Slings to the Patient Lift in LIFTING THE PATIENT Section of this manual.
7. Refer to Attaching the Slings to the Patient Lift in LIFTING THE PATIENT Section of this manual.

ATTACHING THE SLING HARDWARE

The hardware used with the one piece contour sling includes four (4) metal support bars. The hardware inserts into the pockets at the edge of the fabric. The pocket that will hold the metal bar has an opening in the center. The pocket is sewn closed on one end and has an open-end with a strap on the other.

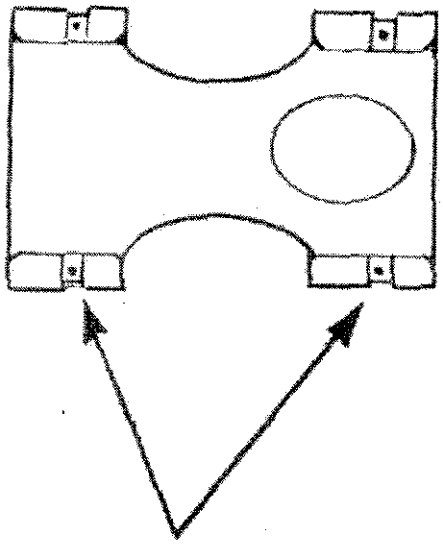
NOTE: When the slings are laundered, remove the four (4) metal support bars. They MUST be replaced or the sling can not be used for lifting purposes.

Inserting the Four (4) Metal Support Bars into the Sling

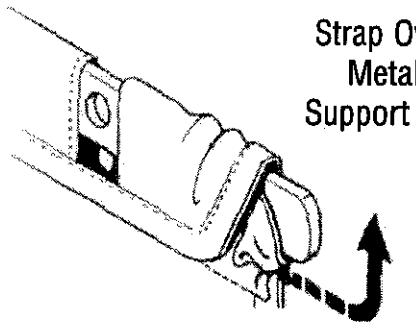
NOTE: When inserting each metal bar into the sling pocket, align the metal support bar in the center of the strap (after it has been pulled down) and push the metal support bar into the sling pocket. The sling is sewn on both sides so the center location is critical.

1. To insert the metal support bar, pull the strap down allowing the bar to pass through the opening in the sling pocket.
2. Push the metal support bar through until the mounting hole clears the center opening of the sling pocket.
3. Once the opposite end of the bar is inside the sewn pocket, push the strap over the metal support bar to prevent it from falling out.

NOTE: The hole in the metal bar should be in the center of the pocket opening. This is where the S-hook of the chain or strap will be attached.



Metal Support Bars with
Openings for Chains or Straps



Strap Over
Metal
Support Bar

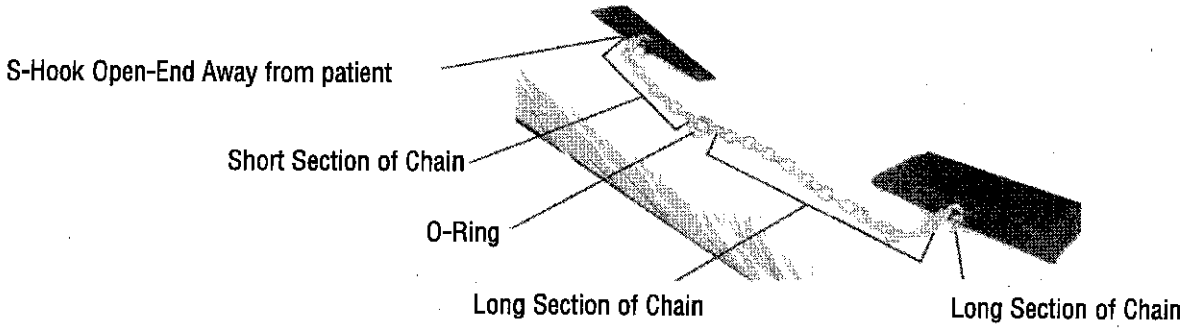
ATTACHING THE SLING HARDWARE (CONT.)

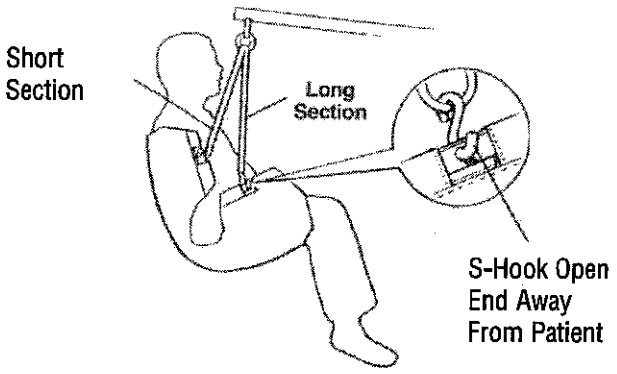
CAUTION- When using either the chains or straps to connect the sling to the patient lift, the shortest of the two (2) sections of the chains or straps MUST be attached to the back section of the sling. Using the long section will leave little or no support for the patient's back.

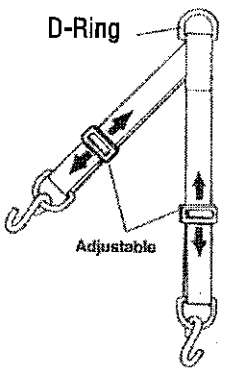
1. With the patient laying on his/her back and positioned properly in the sling, lay the chains or straps on the bed next to the sling.
2. The short section of chain or strap will be placed parallel to the patients back. This will position the longer section of chain or strap from the waist to the mid section of the thigh.
3. The S-hooks on the ends of the chains or straps are inserted into the metal support bar of the sling.
4. The S-hook MUST be inserted through the hole in the support bar with the open end facing away from the patient.
5. The O-ring of the chain assembly is the suggested location to attach to the swivel bar, however, by changing to different links, you can reposition the patient into a reclining or more upright position.

WARNING - When changing to different lengths, DO NOT disconnect the O-rings of the chains from the swivel bar. Position BOTH the O-rings and additional chain link onto the hooks of the swivel bar.

6. The straps can be simply adjusted to achieve the same effect.
7. With the sling positioned under the patient, and the metal support bars in place, you are now ready to move the lift into position to attach the sling hardware to the swivel bar.







ATTACHING THE FULL BODY AND PADDED "U" SLING

NOTE: Refer to PATIENT LIFT SAFETY SUMMARY in the front of this manual before proceeding further and observe all WARNINGS indicated.

WARNING - Before lifting or transferring the patient, the base legs MUST be LOCKED in the OPEN position for optimum stability and safety.

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

1. With the legs of the base OPEN and LOCKED, use the steering handle to push the patient lift underneath the bed.
2. Lower the patient lift for easy attachment of the sling.
3. Place the straps of the sling over the hooks of the swivel bar.

CAUTION - When connecting the sling to the patient lift, the shortest of the straps MUST be at the back of the patient for support. Using the long section will leave little or no support for the patient's back.

OPERATION

OPERATING THE PATIENT LIFT

To Open the Legs of the Adjustable Base

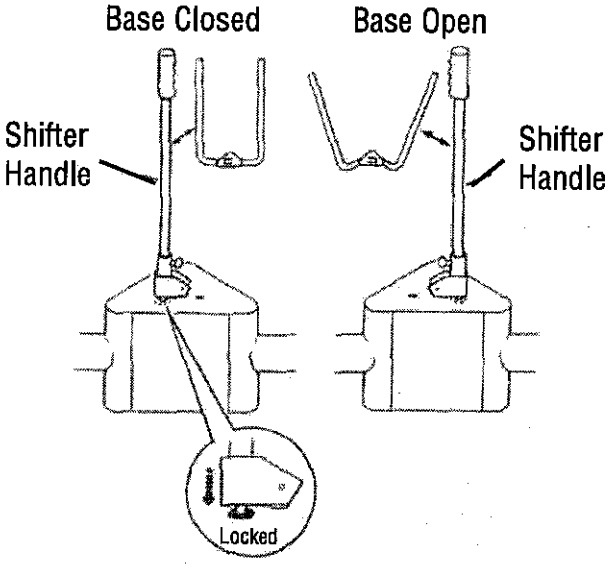
WARNING! - The operation of the patient lift is an easy and safe procedure. DO NOT attempt any transfer without approval of the patient's physician, nurse or medical attendant. Thoroughly read the instructions in this Owner's Manual, observe a trained team of experts performing the lifting procedures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

ONLY operate this lift with the legs in maximum open position and locked in place. The base legs MUST be locked in the open position at all times for stability and patient safety when lifting and transferring a patient
The Shifter handle is used to open the legs of the base for stability when lifting a patient.

1. Grasp the shifter handle in one hand and place the opposite hand on the steering handle of the mast for balance.
2. Push the shifter handle to your RIGHT to release the lock pin from its mounting hole.
3. Turn the handle CLOCKWISE until you are able to secure the lock pin into the opposite mounting hole to fully open the legs of the base.

NOTE: The lock pin MUST insert into its mounting hole in the socket assembly to lock the legs in the full open position. The shifter handle will be in the vertical position; parallel with the mast assembly.

WARNING- If the shifter handle is NOT vertical, the lock pin is NOT seated in the socket assembly. DO NOT use the patient lift until lock pin is properly seated and LOCKED in place or injury and/or damage may occur.



TO OPEN THE LEGS OF THE ADJUSTABLE BASE

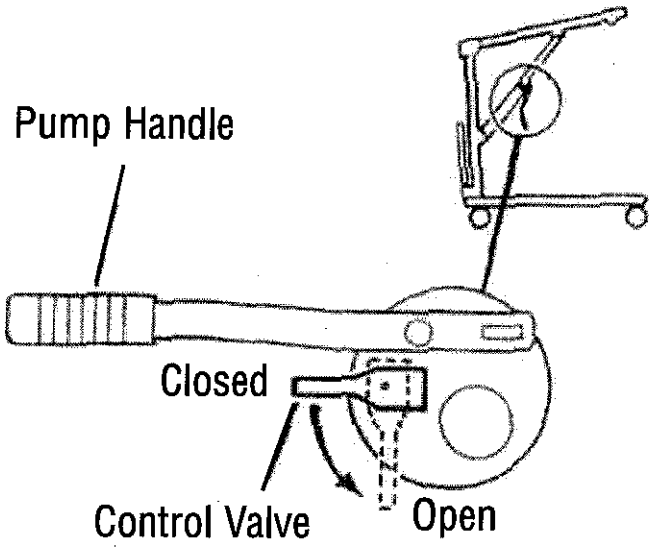
OPERATION (CONT.)

There are two (2) controls on the pump assembly:
1. The control valve
2. The pump handle

RAISING THE LIFT. The control valve MUST be in the CLOSED position (control valve positioned towards pump handle) to move the pump handle up and down to elevate the boom and the patient.

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

NOTE: A safety gate is part of the hydraulic system that maintains a SLOW constant descent of the boom regardless of how far the control valve is



RAISING/LOWERING THE HYDRAULIC PATIENT LIFT

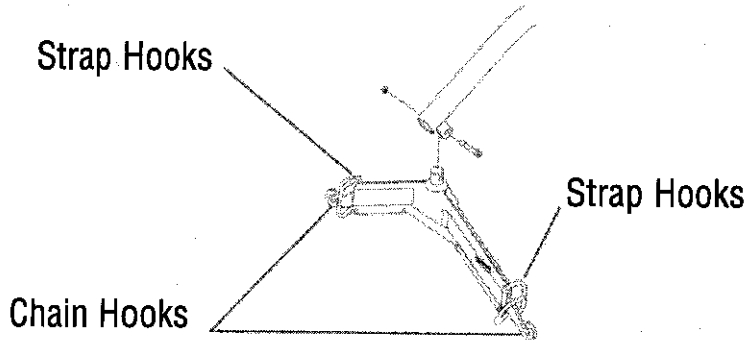
LIFTING THE PATIENT

NOTE: Refer to PATIENT LIFT SAFETY SUMMARY in the front of this manual before proceeding further and observe all WARNINGS indicated.

WARNING- Before lifting or transferring the patient, the base legs MUST be locked in the open position for optimum stability and safety.

1. Using the steering handle, push the patient lift underneath the bed.
2. Lower the patient lift for easy attachment of the sling hardware or straps.
3. Chains, O-Rings and D-Rings:
   After the chains, O-Rings or D-Rings are attached and the S-hooks are secured in both sides of the sling sections (open end facing outward), place the D-rings of the strap assembly or the O-ring and chain link of the chain assembly over the chain hooks of the swivel bar.
4. Chain-Free Full Body and Padded "U" Slings:
   Attach the straps to the strap hooks of the swivel bar.

WARNING- ONLY attach STRAPS of the Full Body and Padded "U" Slings to the STRAP HOOKS of the Swivel Bar. ONLY attach CHAINS, O-RINGS or D-RINGS to CHAIN HOOKS of the Swivel Bar. DO NOT change or intermix attachment points or serious injury may occur.



ATTACHING THE SLING TO THE SWIVEL BAR

5. Pump the lift handle or turn the handle clockwise (clicking sound is normal) to raise the patient above the bed. The patient should be elevated high enough to clear the bed and their weight supported by the lift.

NOTE: The manual (crank) lift handle will automatically turn back one (1) quarter turn to lock in place.

NOTE: On a hydraulic lift, the boom will stay in position until the control valve is opened.

LIFTING THE PATIENT (CONT.)

6. When the patient is lifted from the bed (with the patient's head supported), he/she will be raised to a sitting position.

NOTE: A headrest sling may be used for support for the patient's head during elevation and transfer.

WARNING- When elevated a few inches off the surface of the bed and before moving the patient, check again to make sure that all hardware is properly connected. Check each S-hook to make sure it is completely attached to the metal support bars of the sling. Check the attachment of the straps, O or D-rings to the swivel bar hooks. If any attachments are NOT properly in place, lower the patient back onto the bed and correct this problem.

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

7. When patient is clear of the bed surface, swing their feet off the bed.
8. Using the steering handles, move the patient lift away from the bed.
9. When moving the patient lift away from the bed, turn patient so that he/she faces attendant operating the patient lift.
10. Open control valve lowering patient so that his feet rest on or over the base of the lift, straddling the mast. Close control valve.

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

11. Pull the patient lift away from the bed and push from behind with both hands.

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

TRANSPORTING PATIENT FOR USE OF BATHROOM FACILITIES

TRANSPORTING PATIENT FOR USE OF COMMODE CHAIR OR STANDARD COMMODE

TRANSFERRING TO A COMMODE CHAIR

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

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

WARNING- When elevated a few inches off the surface of the commode chair or standard commode and before moving the patient, check again to make sure that all hardware or straps are properly connected. Check each S-hook to make sure it is completely attached to the metal bars of the sling. Check the attachment of the straps, O or D-rings to the swivel bar hooks. If any attachments are NOT properly in place, lower the patient back onto the commode chair or standard commode to correct this problem.

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

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

1. The patient should be elevated high enough to clear the commode chair and their weight supported by the lift.
2. With the help of both attendants, guide the patient onto the commode chair.
3. Lower the patient onto the commode chair leaving the sling attached to the swivel bar.
4. When complete, recheck for correct attachment and then raise the patient off of the commode chair.
5. When patient is clear of the commode surface (using the steering handles), move the lift away from the commode chair.
6. To return patient to bed, reverse procedures concerning lifting the patient, operation and sling attachment.
7. To return or place patient in a wheelchair, refer to TRANSFERRING TO A WHEELCHAIR in this manual.

TRANSPORTING PATIENT FOR USE OF BATHROOM FACILITIES

TRANSFERRING TO A STANDARD COMMODE

NOTE: The patient MUST be transferred to a WHEELCHAIR and transported to the bathroom facilities before using the patient lift again to position the patient on a standard commode. Refer to TRANSFERRING TO A WHEELCHAIR in this manual. After this has been accomplished refer to the following:

1. To lift the patient from the bed, follow the procedures concerning lifting the patient, operation and sling attachment.
2. The patient should be elevated high enough to clear the standard commode and their weight supported by the patient lift.
3. With the help of both assistants, guide the patient onto the standard commode.
4. Lower the patient onto the standard commode leaving the sling attached to the swivel bar hooks.
5. When complete, recheck for correct attachment and then raise the patient off of the standard commode.
6. When patient is clear of the standard commode surface (using the steering handles), move the lift away from the standard commode.
7. To return or place a patient in a wheelchair, refer to TRANSFERRING TO A WHEELCHAIR in this manual.
8. To return patient to bed, reverse procedures concerning lifting the patient, operation and sling attachment.

WARNING- When elevated a few inches off the surface of the bed and before moving the patient, check again to make sure that all hardware or straps are properly connected. Check each S-hook to make sure it is completely attached to the metal support bars of the sling. Check the attachment of the straps, O or D-rings to the swivel bar hooks. If any attachments are NOT properly in place, lower the patient completely to correct this problem.

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

1. To remove the patient from the bed, observe procedures concerning sling attachment, operation and lifting the patient.
2. The patient should be elevated high enough to clear the bed and be able to slide the portable bath tub under the patient.
3. Lower the patient into the portable bath tub.
4. Detach chains/straps from sling and reattach to the portable bath tub.
5. Using the lift, raise the sides of the portable bath tub.
6. Bath patient.
7. Reverse procedures to return patient to bed.

TRANSFERRING TO A WHEELCHAIR

NOTE: Drive recommends that two (2) attendants be used when transferring a patient to a wheelchair.

WARNING- When elevated a few inches off the seating surface of the wheelchair and before moving the patient, check again to make sure that all hardware and straps are properly connected. Check each S-hook to make sure it is completely attached to the metal support bars of the sling. Check the attachment of the straps, O or D- rings to the swivel bar hooks. If any attachments are NOT properly in place, lower the patient completely to correct this problem.

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

Drive does NOT recommend locking of the rear casters of the patient lift when lifting an individual. Doing so could cause the lift to tip and endanger the patient and assistants.

Drive DOES recommend that the rear casters be left UNLOCKED during lifting procedures to allow the patient lift to stabilize itself when the patient is initially lifted from a chair, bed or any stationary object.

1. The legs of the lift (w/patient) are in the opened position.
2. The wheelchair is moved into position.

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

3. The rear wheel locks are locked to further prevent movement of the chair.
4. The patient is positioned over the seat with their back against the back of the chair.
5. Begin to lower the patient either by opening the control valve or by turning the crank counterclockwise.
6. With one (1) attendant behind the chair and the other operating the patient lift, the attendant behind the chair will pull back on the handle or sides of the sling to place the patient into the back of the chair. This will maintain a good center of balance and prevent the chair from tipping forward.
7. The sling is disconnected from the patient lift.
8. To return to the bed, reverse procedures concerning lifting the patient, operation and sling attachments.