

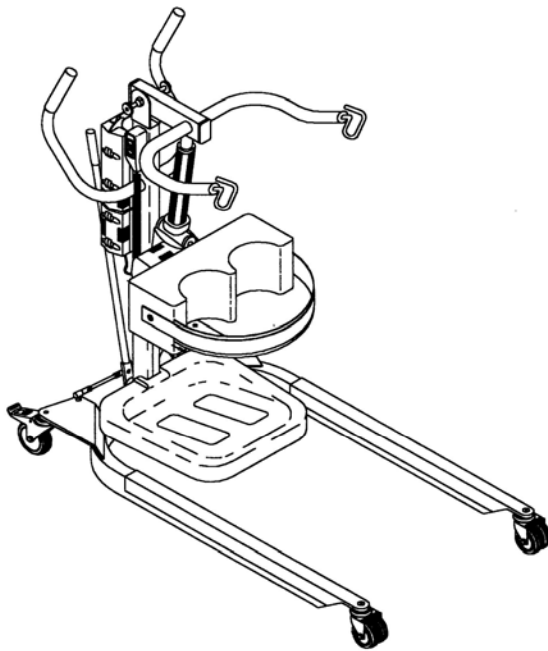


**VANCARE Inc.**

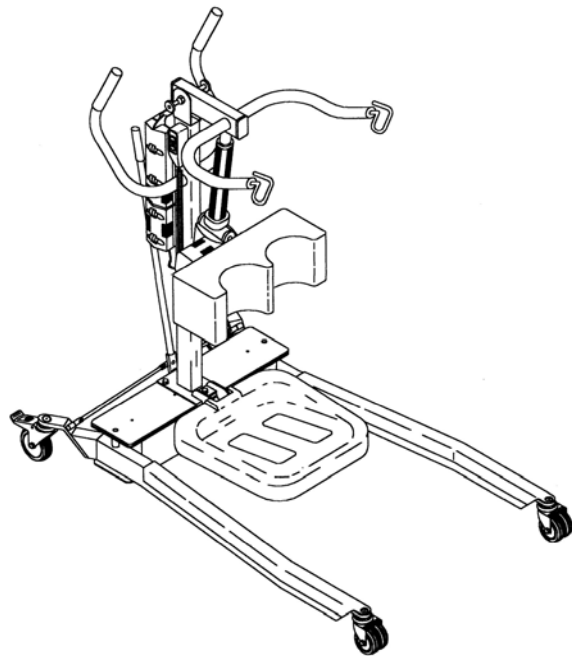
***VERA-LIFT II™ MODELS B350 & B600***

*Models: B350 and B350 with scale, B600 and B600 with scale*

***OPERATING MANUAL***



VERA II B350



VERA II B600

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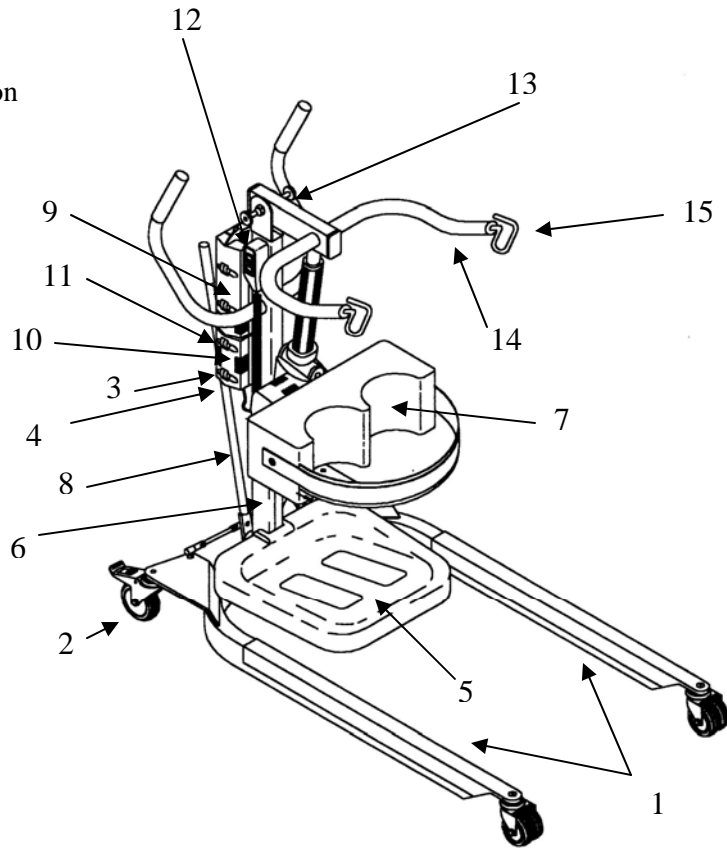
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## **Monthly VERA-LIFT II™ Belt/Sling Inspection Checklist.....**

# Diagram and Features

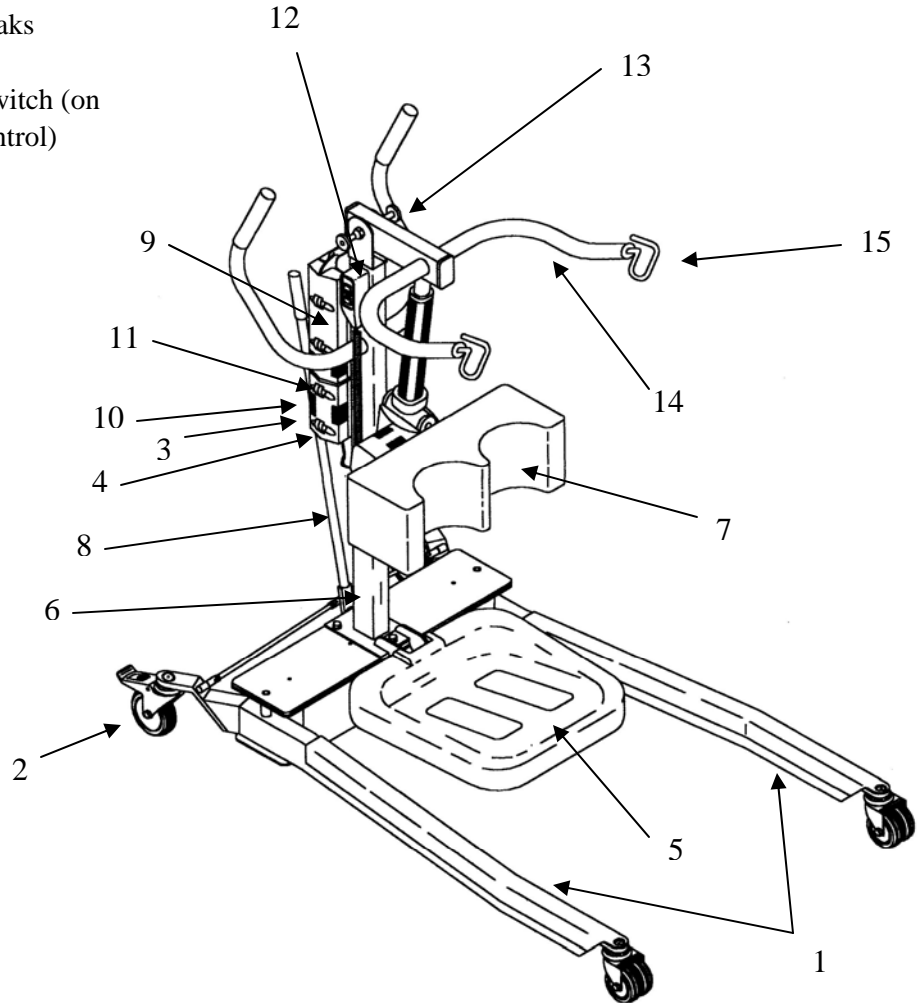
## VERA-LIFT II™ B350 Pound Lifting Capacity

1. Lift base
2. Locking rear caster breaks
3. Emergency stop switch
4. Emergency lowering switch (on bottom of mobilette control)
5. Foot plate
6. Mast
7. Knee pad (with knee strap)
8. Shift bar
9. Rechargeable battery
10. Mobilette control
11. Battery indicator lights
12. Pendant switch
13. Extended bolt
14. Lift arms
15. Lift arm hooks



## VERA-LIFT II™ B600 Pound Lifting Capacity

1. Lift base
2. Locking rear caster breaks
3. Emergency stop switch
4. Emergency lowering switch (on bottom of mobilette control)
5. Foot plate
6. Mast
7. Knee pad
8. Shift bar
9. Rechargeable battery
10. Mobilette
11. Battery indicator lights
12. Pendant switch
13. Extended bolt
14. Lift arms
15. Lift arm hooks



# 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 II™ and VERA-LIFT II™ Back Belt and Sitting Slings with Other Manufacturer's Equipment

### **WARNING**

VERA-LIFT II™ belts/slings may be used with the VERA-LIFT II™ only. Using other manufacturer's patient lifts with VERA-LIFT II™ belts/slings is also prohibited.

## 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.

### **WARNING**

If leaving the sling under the patient places the patient at risk of sliding out of, or falling off of, the chair or wheelchair, the sling may not be left under the patient.

## **Patient Transport with the VERA-LIFT II™**

### **WARNING**

It is important for staff to know that the VERA-LIFT II™ **is approved for standing patient transfers within the patient's room and the connecting bathroom only.** The VERA-LIFT II™ 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 II™ 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 II™ has been received from VANCARE, Inc., a manufacturer's representative will provide initial in-service training for your staff. Before using the VERA-LIFT II™ to transfer patients, all staff must be trained and authorized to use the VERA-LIFT II™. If additional training is needed, contact your local distributor.

*A DVD demonstrating transfer techniques and VERA-LIFT II™ care was sent to the facility with the lift. This DVD 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 II™.*

** WARNING**

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

## Patient Assessment Criteria for Transfers

### Transfer Criteria for the VERA-LIFT II™

** WARNING**

Before using the VERA-LIFT II™, 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 II™, which VERA-LIFT II™ transfer technique to use, which size belt/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 II™ standing transfers. (See “Patients Who Are Not Suited For VERA-LIFT II™ Standing Transfers” on next page.)
- b) Be able to follow simple directions
- c) Have ability to hold onto **both** lift arms
- d) Be able to put **both** feet on the VERA-LIFT II™ foot pad and bear weight on both legs
- e) Be able to stand erect or lean back into the back belt with arms on the outside of the back belt
- f) Have no injuries or medical conditions that might be aggravated by the transfer procedure
- g) When using VERA-LIFT II B350, patient must weigh less than 350 pounds; when using VERA-LIFT II B600, patient must weigh less than 600 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 II™ standing transfers, (See *Patients Who Are Not Suited For VERA-LIFT II™ 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-LIFT II B350, patient must weigh less than 350 pounds; when using VERA-LIFT II B600, patient must weigh less than 600 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 II™ transfers. (See "Patients Not Suited For VERA-LIFT II™ Standing Transfers" section below.)
- b) Be unable to hold onto one or both lift arms
- 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* 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

### **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 II™ 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 II™ foot pad during VERA-LIFT II™ standing transfers
  - b) Attempt to climb the knee pad
  - c) Attempt to step backward off of the VERA-LIFT II™ 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 II™ standing transfer procedure
  - d) When using VERA-LIFT II B350, patient must weigh less than 350 pounds; when using VERA-LIFT II B600, patient must weigh less than 600 pounds

Note: Patients who are not suited for VERA-LIFT II™ 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 II™ 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
  - e) When using VERA-LIFT II B350, patient must weigh less than 350 pounds; when using VERA-LIFT II B600, patient must weigh less than 600 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 II™ foot pad, attempt to climb the knee pad, or who attempt to step backward off the VERA-LIFT II™ foot pad)

## **Sizing and Positioning the Back Belt**

VERA-LIFT II™ back belts come in different lengths and in different widths. When transferring a patient using the VERA-LIFT II™ 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 II™ 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 II™ arm.

<b>Small</b>	Black Stabilizing Handles	<b>Medium</b>	Red Stabilizing Handles
<b>Large</b>	Blue Stabilizing Handles	<b>Extra Large</b>	Brown Stabilizing Handles

## **Sizing and Positioning the Sitting Sling**

VERA-LIFT II™ sitting slings come in different sizes. When transferring a patient using the VERA-LIFT II™ 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 II™ arm.

<b>Small</b>	Black Stabilizing Handles	<b>Medium</b>	Red Stabilizing Handles
<b>Large</b>	Blue Stabilizing Handles	<b>Extra Large</b>	Brown Stabilizing Handles

### **Tip for Placing 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 belt/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 II™ 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 II™ 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 II™ 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 II™ 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 II™.)
- 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 II™ 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 II™ 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 II™ 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 II™ 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 II™ 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 II™ 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 II™ 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 II™.)
- 10)  Snugly 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 II™ 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 II™ 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 11)
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 Sling

- 1) Make sure you understand which sitting sling is to be used to transfer the patient.
- 2) **⚠ Inspect the VERA-LIFT II™ 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 11)
- 7) **⚠ Fasten the inner safety belt snugly.**
- 8) **⚠ Lower the lift arms to their lowest position and spread the base of the VERA-LIFT II™ 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 knee pad. (The height of the foot pad can be raised by positioning it on the upper mast pegs for VERA-LIFT II™ models without scales.)
- 10) **⚠ Lock the caster brakes.**
- 11) **⚠ Connect the sitting sling to the VERA-LIFT II™ 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 II™ 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 II™ and sitting sling from the room.

### **Standing Transfer Toileting Procedure**

*Follow the VERA-LIFT II™ 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 II™ “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 II™ “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 II™ 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 II™ “Seated Transfer” procedure.**

## **Wheelchair Repositioning**

Follow the VERA-LIFT II™ 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 II™ 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 B350 & B600: Other Procedures

### Emergency Stop Switch

A red emergency stop switch is located on the mobilette control.

#### **WARNING**

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

### Base Adjustment

The base of the VERA-LIFT II™ 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 top of 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 II™ 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 Lowering Switch

#### **WARNING**

If the pendant switch fails, use the emergency lowering switch located on the bottom of the mobilette. To use it, press the yellow button 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 lowering switch at the same time.**

## **Charging the Batteries**

The VERA-LIFT II™ is equipped with a mains adapter, which charges the battery when 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 II™ 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 mains adapter from the wall outlet before moving the VERA-LIFT II™ to prevent damage to the lift.

When the VERA-LIFT II™ 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 mains adapter 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 main adapter 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 II™ 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 II™ Inspection

### **WARNING**

The VERA-LIFT II™ 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-LIFT IIs™ monthly.**

## **Cleaning the VERA-LIFT II™**

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



### **WARNING**

**The VERA-LIFT II™ 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.



# VERA-LIFT II™ Back Belt, Sitting Sling, and Gait Belt Ordering Information

## VERA-LIFT II™ Back Belts

### **Sizing**

The VERA-LIFT II™ 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 belts are available in your choice of standard polyester, high-heat polyester (which withstands temperatures up to 200°) or 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 pages 8, 9, 10 and 11 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 lift arms and put both feet on the VERA-LIFT II™ foot pad, are weight bearing on both legs. (Refer to pages 8, 9, 10 and 11 for more 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 II™ Sitting Slings**

### **Sizing**

The VERA-LIFT II™ 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 II™ 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 pages 8, 9, 10 and 11 for more specific information.)

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

Size	Length	Part Number
Medium	14 inches long	5-072000
Large	16 inches long	5-073000



## **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 II™ Back Belt and Sling Options**

Back belts and slings can be manufactured with optional synthetic sheep skin or STAPH-CHEK® moisture proof lining sewn in. 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, the optional built-in VERASCALE® weighs 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 9.0), then settle on some weight.
2. Place the belt onto the spreader bar. Make sure that no part of the belt 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 go to 0.0 when the pad is released.
3. Place the belt 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 (**negative weights are indicated by flashing of the weight 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 belt).
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 9 Volt alkaline battery. The battery access cover is on the rear 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 -16- 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 -16- 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 II™ INSPECTION CHECKLIST

INSTRUCTIONS: Use one page for each VERA-LIFT II™. 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													
Inspect wire connections													
Check casters for tightness/lint													
Check battery voltage*													

\*26.4 volts if fully charged, approx. 24.0 volts if partially discharged (+ or - .5 volt). If voltage is less than 24 volts, change the battery.

## MONTHLY VERA-LIFT II™ BACK BELT AND SLING INSPECTION CHECKLIST

INSTRUCTIONS: All belts/slings in the facility must be checked monthly. Belts/Slings that are damaged or excessively worn must be removed from service and replaced with undamaged belts/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 belt/sling is being laundered with bleach or with a harsher detergent than is recommended. The belt/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.