

PATIENT SLING SYSTEM

WARNINGS

1. Read instruction booklet(s) carefully before attempting to lift anyone.
2. Never exceed the maximum weight capacity of the lift or sling.
3. Never use the lift or sling to lift or transfer anything other than a patient.
4. Ensure you have the correct lift and sling for the patient's size and weight.
5. Torn, cut, frayed, or broken slings can fail resulting in serious injury or death to patient. Use slings in good condition only. Destroy and discard unserviceable slings.
6. All sling straps must be attached to the lift prior to lifting the patient.

1.0 All Horcher lifts are equipped with the original Horcher Sling System. The different sling series are compatible with the following lift products.

1.1 Ceiling Mounted Systems:

UNILIFT (C-Series or PC-2w/spreader bar): USB, USS, USSK, UTK, UPG, PATRON

1.2 Floor Based Models:

DIANA Series and LEXA HD: USB, USS, USSK, UTK, UPG, UBT

RAISA: Back belt and Corset

2.0 General Use Instructions: Slings can be applied to patients in either a lying or seated position. The USSK series slings with head support are patients with limited or no head/neck control. The head support stays are made of plastic and are easily removed for washing.

2.1 Applying the sling in a bed:

2.1.1 For a patient in a hospital, raise the side rails (if installed), and raise the bed to the highest position before moving the patient onto the sling. Note: This will reduce strain on the caregiver's back. Also, when the patient is ready to be lifted, lower the side rails (if installed) and the level of the bed, decreasing the height you have to elevate the patient.

2.1.2 There are two methods for placing a sling under a patient in a bed.

2.1.2.1 In a seated position or in a bed with an adjustable head section, raise the section bringing the patient to a near seated position. While providing support, lean the patient forward enough to allow the sling to be slid past the shoulders, down the patient's back, past the hips to the sitting surface (excluding toileting slings). Depending on the type of sling, head support, non head support, or toileting, the top portion of the sling will end either at the shoulders, top of head, or at the axilla.

2.1.2.2 To place the sling under a person in a lying position, safely "log roll" the patient onto their side. "Fan" or "Z" fold the sling and place behind patient's back. Roll the patient back onto their other side and pull the sling out flat and center under patient.

2.1.3 There are two methods for applying the sling to the patient's legs.

2.1.3.1 For patient's comfort and proper positioning, the sling should be pulled to toward the bottom of the legs and wrapped around, under, and between each of the patient's legs. The leg straps/clips should be applied as high and straight as possible and pulled closely up to the body.

2.1.3.2 Another variation is to pull both straps under both legs (creating a saddle) and attach the straps/clips to the outside points on the spreader bar. This holds the legs in adduction.

WARNING

All straps must be attached to the lift prior to lifting the patient.

2.1.4 Slings without head support are attached to the spreader bar/patient with four straps. Each strap loop on slings so equipped, have an integral choice of three different lengths; short, medium, and long. Choice of strap length depends on the patient's condition. Care must be taken to choose straps of equal lengths for each strap pair (shoulder and leg). If not, the patient will be positioned unevenly in the sling when being lifted. Slings with head support have two additional straps on each side of the head support. The care-provider needs to ensure the head and neck is supported properly at all times.

2.1.5 Proper strap loop attachment to the spreader bar is to have the head and/or shoulder straps placed on the outside spreader bar hooks with the leg straps traditionally placed on the inside hooks of the spreader bar.

3.0 Lifting the Patient:

3.0.1 Once the sling is properly attached to the spreader bar, raise the patient slowly. If patient is in a hospital bed, it will help to raise the head of the bed. Repositioning of the patient may be necessary to ensure a safe sitting position is attained as the patient is raised.

3.0.2 Raise patient until buttocks is just above mattress surface. Grasp patient's legs and turn patient so the legs are off the side of the bed. DO NOT push or pull patient off of the bed. Lower the bed if more clearance is needed.

3.1 Moving the Patient:

3.1.1 Grasp the spreader bar handle and/or the assistance hand loop on the back of the sling and pull the patient clear of the bed.

3.1.2 Lower the patient to the lowest, safe working height, if possible to minimize the elevation that the patient is transported at.

3.1.3 From behind the patient, push the individual along the track length to the desired location being aware of any obstruction/obstacle along the track route.

3.1.4 Once at the desired location (mobility device, toilet, tub, floor), orientate the patient and slowly lower the individual onto/into the device or appliance maintaining control with the spreader bar handle and/or the assistance hand loop.

3.2 Transfer to Wheelchair or Chair:

3.2.1 Position lift so that the patient is as far back in the chair as possible. Always be sure to lock wheelchair brakes, if transferring to a wheelchair.

3.2.2 Lower patient slowly into chair.

3.2.3 To position, push gently on the knees of the patient with your left or right hand while simultaneously lowering patient into chair.

3.2.4 An alternative for positioning patient back in the chair is;

3.2.4.1 Lower patient so they are just touching seat.

3.2.4.2 Pull up and back on the assistance hand loop with one hand.

3.2.4.3 Complete lowering the patient into chair. Repeat steps if necessary.

3.3 Removing Sling from Under Patient:

WARNING

Pulling sharply on sling may cause patient to fall forward resulting in injury. Always ensure the patient is being supported when placing or removing the sling.

3.3.1 Disconnect sling from lift.

3.3.2 While providing support, pull leg sections of the sling out from under the thighs. Lean patient forward and pull remainder of sling up from behind patient.

3.3.3 Reposition patient back into chair as necessary.

3.4 Transfer from wheelchair or chair:

3.4.1 While providing support, lean the patient forward slightly to allow the sling to be slid past the shoulders, down the patient's back, past the hips to the sitting surface (excluding toileting slings). Depending on the type of sling, head support, non head support, or toileting, the top portion of the sling will end either at the shoulders, top of head, or at the axilla.

3.4.2 The leg sections of the sling should be pulled forward and wrapped around, under, and between each of the patient's legs. The leg straps should be applied as high and straight as possible and pulled closely up to the body.

3.4.3 Lock wheelchair brakes. Raise patient above seat height being aware of any obstacles that may hinder a safe lift.

3.5 Bathroom Access:

3.5.1 It is suggested that the sling remain connected during bathroom use.

3.5.2 Position patient over commode and gently lower. Once seated and ensuring proper support is provided, unhook the leg sections from the spreader bar.

3.5.3 When finished, reattach leg sections of sling to spreader bar.

3.5.4 Raise lift until patient's buttocks is clear of the commode. Move lift away from commode and adjust height for safe transport.