



FTS-600 (Floor-to-Stand) USER'S MANUAL

IndeeLift FTS-600 User Manual

FTS-600 UM 04-07-2022

NOTICE

Please read this entire manual *before* using the product and retain for future reference. Users should also view the “IndeeLift FTS-600 Training Video”, available on IndeeLift’s YouTube channel.

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THIS PRODUCT MAY CONTAIN THE POSSIBILITY FOR CERTAIN HAZARDS IF NOT USED IN THE CORRECT MANNER. EVERY OPERATOR IS RESPONSIBLE FOR READING AND UNDERSTANDING ALL OF THE OPERATIONAL AND SAFETY PRECAUTIONS AVAILABLE FOR THIS PRODUCT.

Safety Symbols



Will result in Death or Serious Injury



Could result in Death or Serious Injury



Could result in Minor or Serious Injury



Not related to Personal Injury

Introduction:

IndeeLift’s patented line of patient-handling, Floor-to-Stand (FTS) lifts are unlike any other. This family of products has been designed to enable safe patient handling in all care environments. These lifts provide self or assisted operation for individuals and their care providers who have mobility challenges and are unable to get up from a seated position or the floor without assistance. The rugged and reliable IndeeLift FTS lifts are purpose-built appliances built in the USA with UL and CE certified components and are available in consumer/care, professional-healthcare and emergency-medical-services models.

The Floor-To-Stand 600 (FTS-600) is a lift designed specifically for professional health care. Acute and post-acute care requires daily patient handling. This appliance virtually eliminates the need for manual patient lifting in these environments!! The FTS-600 can lift a person up to 600 pounds (272kg) from the floor or a seated height to a standing position without risk of injury to the fallen or anyone assisting them.

The FTS-600 lift can be used to lift a person from a bed, wheelchair, commode, exam table, the floor, or any other place a user may be seated and need assistance to get to a standing position. FTS-600 is also configurable to safely raise the patient from a standing position on the floor to assist in getting onto an exam or x-ray table along with other places that an injured, recovering or mobility challenged patient may need to access.

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As a fall recovery appliance, the FTS-600 is extremely maneuverable. Its small footprint allows fall recovery to occur in even the tightest of places. The FTS-600 replaces larger and more cumbersome sling-style lifts for fall recovery and many transfer functions, while greatly reducing the associated risks.

Overview:

This manual covers the Floor-to-Stand (FTS-600) professional model which is designed for use in the acute and post-acute care environments. The FTS-600 is engineered to accommodate persons weighing up to 600 pounds (272kg). **The FTS-600 model is referred to as the “FTS” throughout this manual.**

The FTS is operated with a wired remote control in a portable “roll-around” configuration. This state-of-the-art product was designed to easily lift patients from the floor or a sitting or standing position and can be safely operated by staff of all levels, with or without the assistance of a second provider and without risk of injury to the provider or the patient. The FTS safely lifts a person up to 30” from the floor to achieve a full standing position.

⚠ WARNING Individuals that fall must be assessed for injuries that may require medical assistance. Use of this human floor lift after sustaining a serious injury resulting from a fall is discouraged to avoid what could result In Death or Serious Injury. Instead of using this lift if a serious injury is noted, phone 911 for medical assistance.

Basic operation

The FTS is a multi-function patient handling lift tool designed to be used for day-to-day patient handling. The FTS is intended to be used in all care environments.

There are multiple modes of operation for the FTS. Raising a patient from a seated position to a standing position, lifting a seated patient from the floor after planned floor exercises stretches etc., or after a fall, positioning a patient at a level for use with exercise equipment (e.g. recumbent bike), raising or lowering a patient to the right height to transfer to a bed, commode chair or other intended destination.

The FTS is made to lift patients to standing from anywhere they may be located. Consequently, patient transfers to the FTS are the most common activity. Transferring to or from the FTS is a simple process that is always assisted by gravity. The seat can be placed at any height, typically one to two inches below the height of the destination seat when transferring to the FTS or one to two inches above the destination seat when transferring from the FTS.

When transferring onto the FTS, the FTS is placed just lower than the height of the current user seated position. When transferring to the FTS, the FTS seat platform is positioned one to two inches below the height of the seated user.

Fall Recovery

After a fall, the provider rolls the FTS to the fall location, slides or tilts the patient onto the mounting ramp seat, pushes a button on the wired remote activating the motor which raises them from the floor to a level to transfer the patient to a chair, commode or other destination. If the intent is to lift the patient to a

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standing position, the seat locks are disengaged to allow the seat platform to rotate forward to shift the weight from the buttocks to the legs, allowing them to stand up.

Once up from the floor, the fallen person can stop at chair height to take a breath and/or rest comfortably or simply get up and walk away or be directly transferred to a wheelchair, bed, toilet or recliner, all without the risk of injuries related to the fall recovery

Standing Operation

The FTS provides patients a method to be lifted while standing on a floor to a safe height 12-14 inches from the floor. This application can assist the user onto an exam table or an imaging bed or table.

The FTS is positioned next to the desired destination (e.g., imaging bed). The rise-assist handle is swung out of the patient's way allowing the patient to mount the FTS standing without having to step up more than two inches. The rise assist handle is swung forward to its locked position. The patient typically faces away from the destination and holds on to the rise-assist handles or the transport handles in preparation for being lifted. The patient is then lifted to the level required for the patient to place their buttocks on to the imaging bed and then the patient lies back and swings around to a position laying on the imaging bed/table.

When ready, the patient sits up placing their feet back onto the FTS platform, stands up and the FTS is then lowered to the ground for the patient to dismount.

Patient Transfers

The FTS has been designed to be used as a patient transport device for short distance patient placement. Many care situations require a patient to be transferred from a bed to a wheelchair and then to a commode and back to the wheelchair and back to the bed. This process requires a transfer from the bed, chair or other place the patient is located to the wheelchair and then a transfer back to the bed. With the FTS, the provider can transfer the patient directly to the FTS, transport the patient to the destination (i.e. Commode) transfer to the destination. And reverse the process to return the patient to the desired destination. This transport ability eliminates two transfer procedures in the simple process of getting a patient to the commode and back to the bed.

⚠ CAUTION

This product contains moving parts where hands or feet could be injured if they are in an inappropriate location. Users and caregivers must be aware of everyone's body parts that could be trapped between the seat platform and the floor or between the seat platform and any obstruction located above the seat platform level, that when contacted, could cause Minor or Serious Injury.

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FTS Features/Functionality:

Seated Lifts

The IndeeLift FTS is primarily designed to raise a seated person from the floor, or any level above the floor, to a height that allows the user to stand directly up or to be transferred as required.

For those who are able to walk away once they are on their feet, the FTS lifts the user to a seated level and then, as the lifting continues, the seat tilts forward allowing the transfer of the user's weight to their legs at a comfortable level as dictated by the height of the specific user. The FTS has been designed and tested to work with individuals of any height up to 6'5.

For users with less mobility, the transfer directly to a wheelchair or power chair is accomplished by raising the seat height to about 21" (53 cm), 1-2 inches (2.5-5cm) above the destination seat for gravity-assisted-lift-free transfers from most seated.

Use as a Standing Lift

A secondary function of the FTS is to provide lift assistance to a standing person needing a little lift to access a bed, exam table or other place that the user is unable to negotiate that requires the patient to be raised above the floor.

The FTS provides users a method to be lifted while standing, to a safe level 12-14 inches from the floor. This application can assist the user onto a bed that may be the perfect height to get up from but too tall for the user get up onto. This function can also assist where single or dual step level changes may need to be overcome in the care environment.

⚠ CAUTION When using the FTS for a standing lift, the seat locks **MUST** be engaged to keep the platform from rotating forward during the lifting process. Never lift a standing patient with the seat locks disengaged!!!

⚠ CAUTION This product this lift will lift a person beyond the safe distance of 12 to 14 inches from the floor! It is the responsibility of the provider to ensure that the patient is not lifted above a safe height of 14 inches from the floor!!!

Small Footprint and Easy Portability

The FTS is a portable lift that is rolled around on wheels like a traditional dolly. The small footprint allows it to be positioned in many places other lifts simply cannot go. With a turning radius of 34" (86 cm), the FTS can go just about anywhere a patient may be found in the care environment.

Mounting Ramp Seat-Tilt

The FTS patented design includes a mounting ramp seat that eliminates the need to ever "lift" a person manually and a tracking function that allows the seat to shift forward as the user is lifted and shifting their weight onto their legs. The FTS seat plate can either be locked in a stationary position or unlocked to allow the seat plate to rotate forward to allow a user to get to a standing position. Two locking tabs are located at the rear of the seat plate, one on each side of the main vertical column.

Wired Remote

The wired remote has a 10' (3m) retractable cord, allowing the provider to operate the lift while assisting the patient with balance or confidence. The wired remote has physical, easy-operate button controls that indicate the up and down functionality. The wired remote is stored on the FTS's handles

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with the hanger clip.

Adjustable and/or Removable Rise-Assist Handles

The rise-assist handles have been engineered to provide leverage for the seated party to assist in the process of standing once they are up from the floor or provide a stable place to hold on to while being transferred or raised to a standing position. The arms can swing away from the seat as needed. They are also removable to allow for mount assistance or a direct transfer to a wheelchair or other destination.

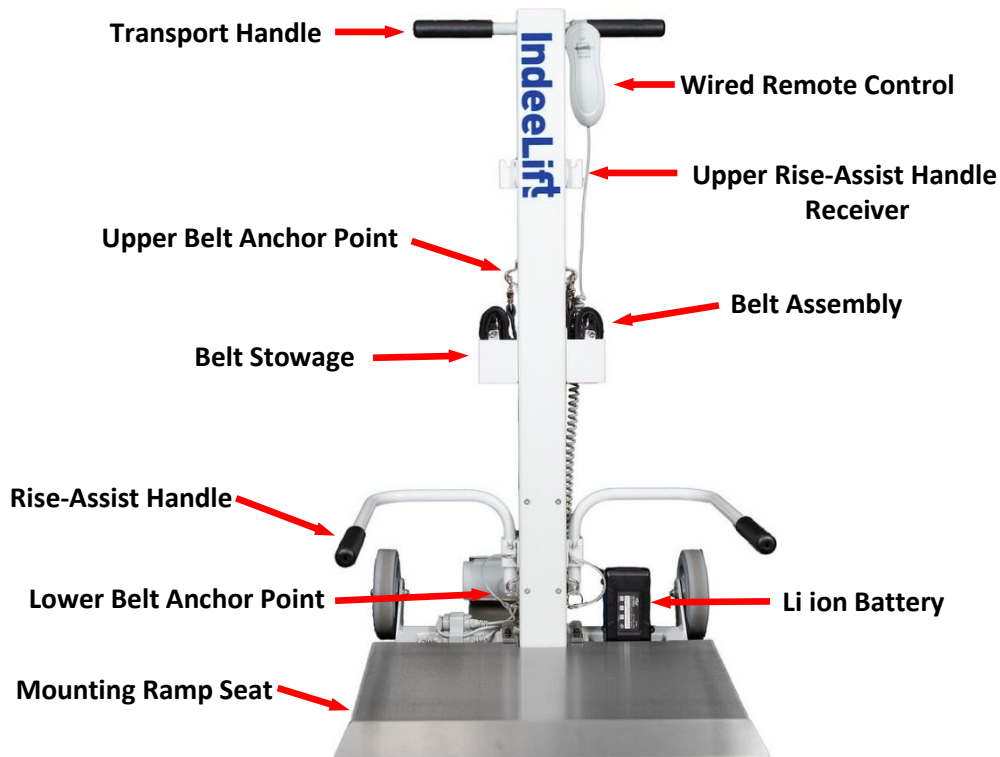
Rechargeable Battery

The FTS comes standard with two rechargeable Lithium-Ion battery pack and a charging unit. Charging is accomplished by plugging the charging unit's AC power cord into a standard AC wall power outlet and placing the Lithium Ion battery in the charger. Two batteries are provided. One battery should stay on the charger while the second battery should stay on the FTS. It is recommended that the battery packs be swapped at least twice a month or as necessary based on volume of use. (see **Preparing the FTS-600 for use** on Page 8).

WARNING California requires the following notice: **WARNING: Lithium-ion batteries and products that contain lithium-ion batteries can expose you to chemicals including cobalt lithium nickel oxide, and nickel, which are known to the State of California to cause cancer and birth defects or other reproductive harm.**

NOTICE Lithium-Ion batteries offer light weight, high energy density, low memory effect and long-life. The charger automatically shuts off when charging is complete, which prevents over-charging. The battery should be charged in a clean, dry location, away from direct sunlight, sparks or flame. Failure to recharge the battery at least once every three months *may* result in the battery no longer accepting a charge. The battery should be fully charged before storing the FTS for extended periods. If the battery needs replacing, dispose of the old battery at a recycling center that accepts rechargeable batteries.

FTS-600 Component Identification:



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Components and Controls:

Wired Remote

The wired remote control is connected to the FTS with a retractile cord and used to raise and lower the seat by pressing the lever up or down. Raising or lowering the seat takes approximately 75 seconds from the floor to a full standing height. Seated to standing takes approximately 40 seconds. The wired remote has graphics indicating the up and down functionality. The wired remote is generally stored on the FTS's handles with the hanger clip.



Rise-Assist Handles

The Rise-Assist handles provide support and balance when standing from the seat or when using the FTS in a standing mode. The Rise-Assist handles are positioned on the lower bracket for seated operation and on the upper brackets for standing operation. If desired, one or both rise-assist handles can be swung away from the seat by lifting one inch and then rotating them rearward away from the seat. They swing completely out of the way to enable unimpeded transfers onto and off of the FTS. They are also removable if desired. To remove a rise-assist handle, remove the locking pin at the bottom of the handle, (as shown), then lift the handle upward. *Note: There are two locking pins on the lower bracket, (one for each handle) secured to the main column with a lanyard, as shown.*



Handles Shown in Lower and Upper Brackets



Remove Locking Pin Then Lift Handle

NOTICE

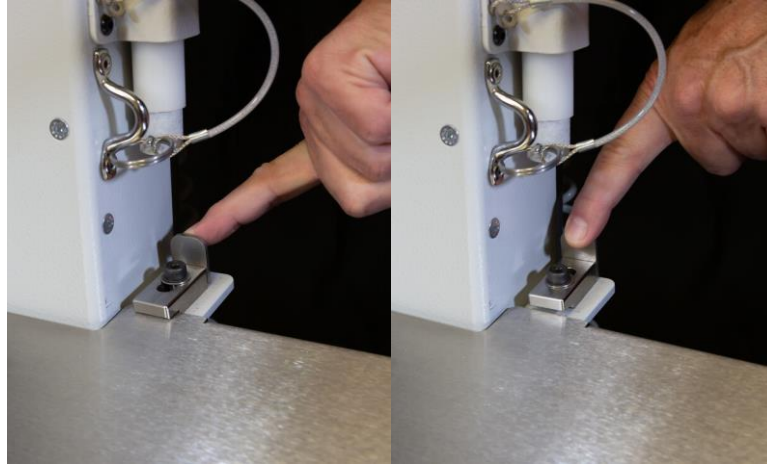
The FTS Identification label is located on the back side of the FTS column and includes the model number, serial number and patent numbers. The IndeeLift HFL and FTS products are covered by one or more patents, including U.S. Patent Nos. 9,808,388 B2 & 10,835,434

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Mounting-Ramp Seat-Tilt

The FTS mounting-ramp seat includes two modes of operation, locked and unlocked. Locked mode renders the seat rigid and is used when a person is being lifted from the floor, or being transferred to or from another seated position (i.e., wheelchair, commode, bed, etc.) The unlocked mode is used when raising a person from a seated position to fully standing. The seat is unlocked in preparation to raise the user to a standing. Unlocked mode allows the seat to rotate forward as the user is raised and shifting their weight onto their legs.



Slide the Locking Tab rearward to unlock the seat. Slide the Locking Tab forward to lock the seat.

Two locking tabs are located at the rear of the seat plate, one on each side of the main vertical column. The locking tabs are to be used together. Both locking tabs must be slid rearward to release the seat for rotation. Both locking tabs must be slid forward to lock the seat for transfers or floor lifting.



The Seat Locks MUST be engaged to raise a person from the floor or for transfers on to or off of the FTS Seat platform!

Preparing the FTS-600 for Use:

Unpacking the FTS-600:

The FTS comes packaged for shipment on a pallet with a strapped cardboard enclosure. Packed inside the shipping carton will be the FTS, user manual and a box containing the two batteries, the battery charger and the two safety belts.

- Cut or remove the bands holding the cardboard enclosure.
- Lift the cardboard top and remove the two cardboard outer carton components.
- Remove the box containing the batteries and charger.
- Remove the screws holding the FTS to the pallet.
- Remove the wired remote from its protective bag.
- Remove the plastic wrap holding the Rise-assist handles in place.

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- Install the Risa Assist handles in the upper or lower receivers on the FTS main column.
- Install one of the batteries on to the battery mount of the FTS as shown below.
- Test the FTS by raising and lowering the seat using the wired remote's up and down buttons.
- Properly dispose of the packaging materials.



Charging System:

The FTS is powered by a Lithium-Ion battery pack and charging system. The FTS comes with two batteries and a charger. The Kobalt brand battery packs and charger are available from Lowes or on line. The two battery packs are “intelligent” batteries with internal monitoring. The user has the ability to check the charge by depressing the monitor switch and observing the LED indicator showing the charge level. The user manual for the batteries and charger is included with the FTS.

It is intended that one battery be on the FTS and one be in the charger. The batteries should be exchanged weekly to ensure the FTS will always be ready to do the lifting!

WARNING California requires the following notice: **WARNING: Lithium-ion batteries and products that contain lithium-ion batteries can expose you to chemicals including cobalt lithium nickel oxide, and nickel, which are known to the State of California to cause cancer and birth defects or other reproductive harm.**

NOTICE It is recommended that the FTS batteries be fully charged *before* its first use. The FTS battery system is shipped with minimally charged batteries for transportation safety. The initial use battery should be charged for approximately one hour before extended use.

NOTICE Lithium Ion batteries require charging once every three months to ensure the longest life.

Charging the Battery Packs

Identify a location to store and charging system.

Attach the male end of the AC power cord to a standard commercial AC wall power outlet.

Place a Battery pack in the Charger and confirm the system is charging by the indicators on the battery charger. The battery should be fully charged within one hour.

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Operation:

NOTICE

Ensure that any users are thoroughly familiar with the correct operation of the FTS-600 *before* they use it to lift themselves or someone else.

Moving the HFL-FTS

Any able-bodied staff or provider can move the FTS around the care environment. The person moving the FTS stands behind the lift and places one foot on the stainless-steel motor cover plate at the rear of the unit and then gently tilts the FTS rearward by pulling the handles toward them. They can now pull or push to FTS to the required location.



Preparing to move the FTS

Typical operation for day-to-day use is to position the seat platform for the primary function. If the primary function is as a standing lift in an imaging department or an exam room, the seat platform would be stored with the seat platform positioned at the floor level. If the primary use is at the nursing station for patient management, the seat platform would be stored at a seated height between 14 and 20 inches from the ground

Raising or lowering the lift height to match the height of the user provides a more comfortable transport if desired. It is also practical, in many cases, to pull the FTS from behind allowing the operator the ability to open doors and traverse thresholds and other impediments to smooth travel.

CAUTION

As you stop at the desired location, ensure there are no foreign objects beneath the seat *before* lowering the seat or tilting the unit back to the upright position to avoid minor or serious injury.

Functional Overview

The FTS provides seated-lift, standing-lift and patient transport functionality. This manual covers the standing-lift function and three separate seated-lift scenarios: Transfer to Stand; Floor to Transfer; Floor to Stand and patient transport operation. Each of these can be performed by a single provider without secondary assistance as determined, or deemed necessary, by the situational requirements.

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Transfer-to-Stand is where the patient needing assistance is in a chair, wheelchair, bed or other seated position and needs assistance to stand.

Floor-to-Transfer operation is when a patient is lifted from the floor and delivered in a seated position to a wheelchair, bed or other destination.

Floor-to-Stand is where a person is on the floor and needs to be lifted to a standing position.

Patient transport utilizes previously described methods to transfer the patient onto the FTS. The patient is transported to the desired destination and is then raised to stand or transferred to

The FTS is equipped with a seat platform that is designed to lock in place for lifts associated with transfers and unlocks to allow forward rotation when the user is being raised to a standing position.

When the intent is to raise the patient to a standing position, the rotating-seat function is enabled by moving the seat-lock levers to the rear position enabling the seat to rotate forward as the user's weight is shifted from their buttocks to their feet. The FTS is designed to work effectively for people of all heights up to 6'5". For example, a person five feet tall will begin to shift their weight to their legs when the lift reaches a height of 23 inches, where a person that is 6'4" will begin shifting their weight to their feet when the lift reaches about 27 inches.

The seat rotates forward a maximum of 27 degrees causing the hips and legs to align, gently enabling the user to stand. The seat does not push the user forward. As the lifted person shifts their weight and adjusts their feet, the gradual rotation of the seat is all that is required to achieve a standing position.

Once the user is back on their feet, return the seat to a normal seated height (17"-19") or to the floor (home) position as normal use dictates and clip the wired remote to one of the rise-assist handles or brackets for storage.

NOTICE

Always ensure there are no foreign objects below the seat *before* lowering it to the home position and before tilting the FTS back to an upright position in its stored location!

General FTS Operation:

These are the basic operational steps for using the FTS to lift a person from the floor or a seated position to a transfer or standing position.

- 1) The provider moves the FTS the patient location.
- 2) The provider positions the seat one to two inches below the height of the current seated position to allow the patient to mount the lift via lateral scooting with the assistance of gravity.
- 3) Staff assists the patient to scoot laterally onto the FTS's mounting ramp seat.
- 4) Once fully seated in the center and to the rear of the FTS's seat, the lever is pressed to the "Up" or "Down" position on the wired remote. The motor engages and smoothly raises or lowers the seat.
- 5) If the patient will transfer to another seated position, the lift is stopped at 20 to 22 inches (51 to 56 cm) above the floor or 2" (5 cm) above the height of the receiving seat, whichever is closer.
- 6) Proceed with the transfer. The patient slides from the FTS to the destination seat.

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- 7) If the patient is going to stand directly from the FTS at chair height, ensure the patient's feet are properly positioned for standing, and use the rise-assist handles to steady the patient. The patient then stands up as one would from any chair.
- 8) If the user is being lifted to stand by the FTS:
 - a. Disengage the seat locks.
 - b. Press the lever "Up" and lift the user until they are standing.
 - c. The provider needs to ensure that the patient's feet align under their body as the seat moves upward. The patient's body weight naturally transfers from the seat to the patient's legs and the seat rotates forward 27 degrees to allow the hips to become aligned with the legs.
- 9) Clip the wired remote back onto one of the handles.
- 10) Return the seat to the desired storage position:
 - a. At the floor for a primary fall recovery tool or,
 - b. As a multifunction tool for daily patient management transfers etc. At approximately 20 inches (51 cm) from the floor

Floor to Stand

When the patient needing a lift is on the floor, staff scoots the FTS to the patient and assists the patient to slide or tilt onto the seat. *If the patient is unable to scoot onto the beveled seat, the provider positions the FTS directly behind the fallen person with the beveled seat as close to the fallen person's buttocks as possible and then assists the patient to tilt upward to a seated position. This leaves the patient seated on the FTS seat.*

Once the patient is fully seated in the center and to the rear of the FTS's seat, the patient places their hands on the rise-assist handles for stability. The provider then presses the lever "UP", as indicated by the words on the wired remote. The seat will rise until the "UP" lever is released or at the maximum height of 30" from the floor.

The Floor-to-Stand function is the complete fall-recovery seated-lift use cycle for Human Floor Lifts. Once the seated person's weight shifts to their feet, they are standing, (see Figure A, Page 11).

Once the lift is complete, using the wired remote, position the FTS seat to the floor or a normal seated height based on the preference of the primary user and return the FTS to its storage location.

Floor to Transfer

When the patient is transferring to a bed, wheelchair or a commode, they follow the Floor-to-Stand instructions above. When the patient will be transferring to a wheelchair, bed or other destination, the FTS should be stopped at one to two inches above the destination seat allowing for a slight-downward-gravity-assisted transfer.

The provider then assists the patient to slide from the FTS to the receiving seat. The patient should reach out for the Rise-assist handle on the opposite side of the FTS to provide upper body leverage in the transfer motion. If the patient is unable to slide safely, a transfer board may be utilized to assist with the transfer.

Once the transfer is complete, using the wired remote, position the FTS seat to the floor or a normal seated height based on the preference of the primary user and return the FTS to its storage location. Figure B depicts a Floor-to-Stand *from a seated position*, while Figure C depicts a *transfer* from a

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seated position.



Figure B: Floor to Stand – From a Seated Position



Figure C: Floor to Stand – Transfer From a Seated Position

Transfer to Stand

In this scenario, the patient is seated in a chair, on a bed, a couch, in a wheelchair or elsewhere. The patient will need to be transferred to the FTS to assist in raising them to a standing position, (see Figure B, above).

The provider positions the FTS directly beside the patient and uses the wired-remote to position the seat one to two inches below the height of the patient's seated buttocks. This positioning facilitates a gravity-assisted transfer eliminating the possibility of injury to the provider or the patient. The lifting is done by the FTS.

The rise-assist handle on the patient side of the FTS is swung rearward to allow an unimpeded transfer.

The patient is instructed to grab the rise-assist handle at the opposite side of the seat to help them pull their body to mount the seat. The provider then assists the patient to slide on to the FTS seat. If the patient is unable to slide safely, a transfer board may be utilized to assist in the transfer.

Once the patient is fully seated in the center and to the rear of the FTS's seat, have them place their hands on the rise-assist handles and let them know you are about to raise the seat.

NOTICE

Always ensure that the Tilt-Seat locks are disengaged to ensure the seat rotates with the lifting person.

When they are ready, press lever up, as indicated on the wired remote. The seat will rise until the "UP" lever is released or at the maximum height of 30" from the floor. Once the patient's weight shifts to their feet, they are standing.

Once the lift is complete, using the wired remote, position the FTS seat to the floor or a normal seated

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height based on the preference of the primary user and return the FTS to its storage location.

Standing Function

While the primary function of the FTS is lifting people from a seated position, the need to lift a standing person a few inches occurs regularly in many care environments. Many patients are unable to raise themselves to a height that allows access to many care facilities. The ability to get patients onto x-ray, imaging tables or exam tables becomes problematic with many larger patients. Adding mobility challenges, injury and disease to the mix makes it nearly impossible to serve many larger patients. The FTS provides a safe and reliable method to raise patients up to 600 lbs. those few inches necessary to be served by the care facilities.

⚠ WARNING Always place the mounting ramp seat locks in the “locked” position when using this lift in a standing function aid to avoid mishaps that could result in death or serious injury.

⚠ WARNING Never lift a standing person higher than 12 inches from the floor. It is unsafe for standing persons to be lifted above 12”!

This function is accomplished by moving the Rise-Assist Handles from the lower mounting brackets to the upper mounting brackets and securing the seat platform in the locked position. The FTS is then placed along side of the exam table, imaging bed or other facility as required. With the seat in the fully lowered position, the patient steps on to the seat and grasps the rise-assist handles. The provider then presses the control; lever in the “Up” direction on the wired remote to raise the seat to the required height. These steps are reversed to return to the floor level.



Once the lift is complete, using the wired remote, position the FTS seat to the floor or a normal seated height based on the preference of the primary user and return the FTS to its storage location.

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Patient Transport

The FTS-600 is designed to provide lift and transport functionality in acute, post-acute and long-term care facilities. Many times, a patient needs to get from one point across the room to another point in the same room. The FTS is designed to lift and transfer patients between seats or from the floor and to transport patients for short distances eliminating multiple transfers in the effort to move a mobility-challenged patient across the room.

The FTS can transport patients of any weight with minimal effort on the part of the provider. The procedure is as follows:

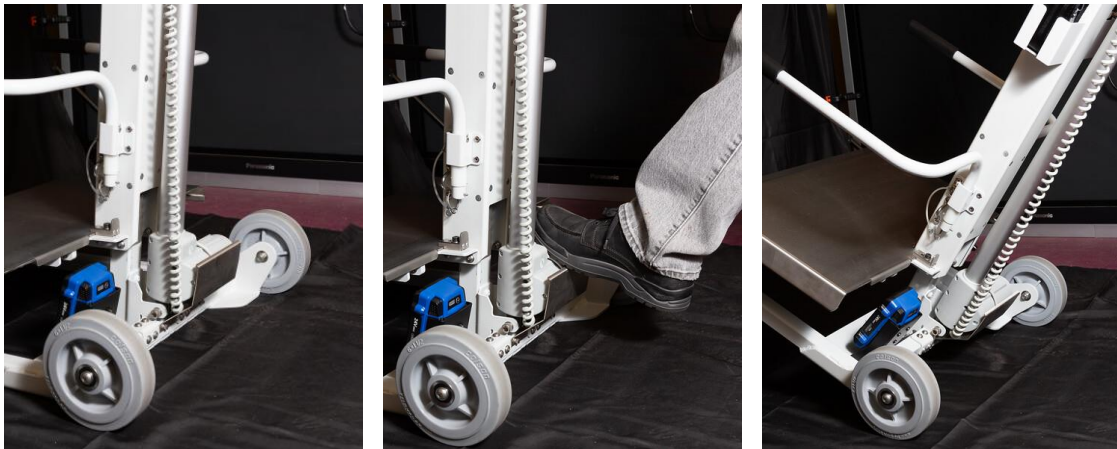
Transfer the patient to the FTS from wherever they are seated.

Raise or lower the seat platform from 12 "to 14" from the floor.

Inform the patient that they will be lifted slightly. Many patients like to place their feet on the baseplate of the FTS as they are being transported.

From the rear of the machine, with the patient on the seat at 12"to 14" from the floor, the provider places their right foot on the Stainless Foot pad while pulling the transport handles rearward to tilt the patient back to balance the patient on the FTS wheels.

The patient is then moved to the desired location and tilted back forward to a seated position before transferring to another seat or standing as desired.



Floor Mount Assist Procedure:

This procedure will help the provider assist a patient that has fallen and is unable to independently scoot backwards onto the FTS mounting ramp seat.

Ensure the FTS's seat is in the fully downward position, and swing the appropriate rise-assist handle toward the rear by lifting the handle upward out of its locked position and swinging the rise-assist handle to the rear of the FTS out of the way.

The patient is helped to lie on the floor in a prone position with their legs as far forward as possible, (to form an "L" shape).

The FTS is placed with the rear edge of the seat, as close to the fallen person's buttocks as possible.

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The provider positions themselves on the other side of the FTS's seat and kneels to take the patient's hand and gently tilt the patient up to a seated position. If available or necessary, install a gait belt around fallen persons upper chest area and gently tilt them up to a seated position on the center of the FTS's seat. *If needed, assist the patient to shimmy to the center of the seat, as far back on the seat as possible, (with their back resting on the FTS's vertical column).*

Once the patient is fully seated in the center and to the rear of the FTS's seat, replace the rise-assist handle by swinging it back into its locked position on the FTS. If the patient seems to be unstable sitting on the FTS, secure them with the security belts. Have the fallen person place their hands on the rise assist handles, assisting them if necessary, and let them know you are about to raise the seat.



Figure E: Floor to Stand – Mount Assist Procedure

Assisted Operation – Wheelchair Transfer:

Wheelchair seats are between 17' and 19" from the floor. Wheelchair Transfers to or from the FTS are performed at a height of 19 -21 inches above the floor. When transferring to the FTS, the FTS seat platform is positioned two inches below the height of the wheelchair seat. When transferring from the FTS to a wheelchair, the seat is placed two inches above the wheelchair. The two inches allows a gravity assisted transfer in either direction. Most wheelchairs will roll right up to the FTS's seat on the most convenient side.

- 1) Determine which side is preferred for the transfer.
- 2) and place the wheelchair as close as possible to the FTS's seat.
- 3) Lift the rise-assist handle on the appropriate side and swing it rearward out of the way.
- 4) Engage the brakes on the wheelchair.
- 5) Using the wired remote, position the FTS's seat to be approximately one to two inches higher than the wheelchair's seat.
- 6) Place the wired remote on the FTS's upper handle then have the patient grasp the far handle of the wheelchair and assist them if needed as they scoot themselves from the FTS's

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seat to a fully seated position on the wheelchair.

- 7) Once the recovered person is safely in the wheelchair, disengage the wheelchair's brakes and move them away from the FTS.

Transferring to the FTS is the reverse of this procedure.

CAUTION Before transferring anyone from the FTS to a wheel chair, always ensure the brakes on the wheelchair are fully engaged to avoid an accident that could lead to death or serious injury.

NOTICE If you remove the rise assist handle, temporarily place the handle in a safe location (where they will not interfere with the transfer).

Before returning the FTS to its stored location, don't forget to either swing the rise assist handle back into position or – if you removed the handle -- replace it on the appropriate side and secure it back in place with the locking pin.



Securement Belt Information:

The anchor points and belt assemblies are for use when lifting an individual who is non-ambulatory, has minimal upper and lower body strength, or has a condition that causes significant mobility challenges, (e.g., a paraplegic person with no ability to move their legs, a person with cerebral palsy who may need additional help to sit upright on the FTS when being lifted, or anyone with neuromuscular conditions that may limit their lower body strength or their ability to stay on the seat unassisted). The belt assemblies can also be used simply as desired for additional safety when lifting an individual.

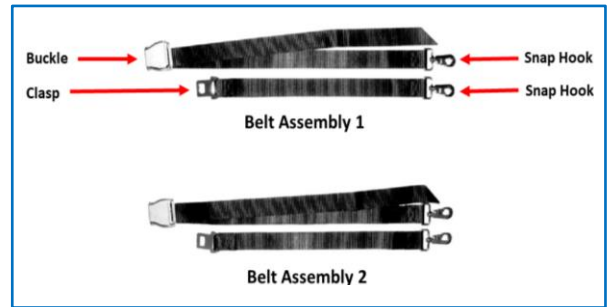
All procedures that do not involve the use of the waist and chest belt accessories are covered in detail earlier in this Users' Manual and are fully applicable to the FTS-600 units.

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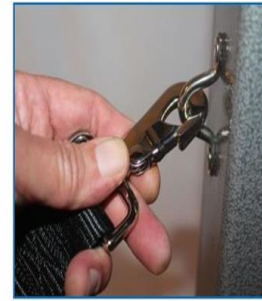
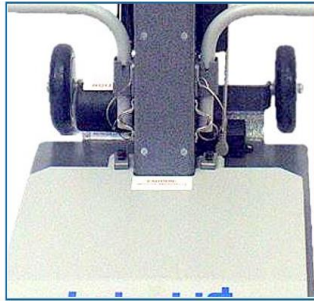
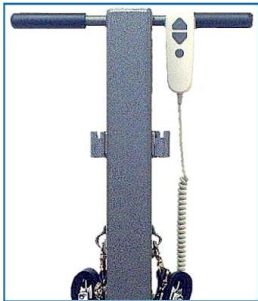
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Using the Belt Assemblies

Each belt assembly includes two straps; the longer strap has a seatbelt style *buckle* with a snap hook at the end, the shorter strap has a seatbelt style *clasp* with a snap hook at the end. Each of the two straps form a single belt assembly. The two belt assemblies are identical, (*either assembly can be used as a chest belt or a waist belt*).



In use, they are secured to the FTS's upper and lower belt anchor points, (located on the FTS's main column), using the snap hooks at the end of each belt assembly. The upper belt assembly and anchor points can be used as a chest belt and the lower belt assembly and anchor points can be used as a waist belt.



NOTICE

Depending on the circumstances, you may choose to use the waist belt only. The anchor points and belt assemblies also allow for additional configurations, (such as crossing the chest of the person being lifted by attaching one belt assembly to the upper left and lower right anchor points and the second belt assembly to the upper right and lower left anchor points).

NOTICE

Once the patient is securely buckled to the lift using the belt assemblies, pull on each buckles' strap to ensure both belts are snug and secure *before* pressing the up button on the wired remote. As the patient is being lifted, have them gradually move their legs inward, then ensure their feet are properly positioned *before* they stand up from the FTS's seat, (as the would from any chair).

NOTICE

When lifting a person with little-to-no lower body strength, (such as a paraplegic), the belts will hold the person securely in place and their legs will naturally move inward towards the FTS as they're being lifted. *A person properly secured to the FTS using the two belt assemblies cannot fall off the FTS's seat!*



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Maintenance:

The IndeeLift FTS requires no regular maintenance. All exposed surfaces can be cleaned with standard cleaning products and a soft cloth. The FTS is rated for water exposure and is able to be washed with a pressure washer if contaminated.

Lithium-Ion Battery Maintenance

The FTS Lithium-ion battery packs should last up to five years when properly maintained. These battery packs need to be charged at minimum once every three months to ensure longest operating performance. It is recommended that the primary and secondary batteries are swapped at least once a month or more often as deemed necessary by volume of use.

NOTICE

While the FTS is extremely durable and will perform well indoors or outdoors, it is recommended that the FTS be stored indoors when not in use.

Troubleshooting / Service:

The FTS-600 was designed to provide years of trouble-free performance. There are no user serviceable parts. However, should you encounter a situation where the unit is not operating properly, please ensure you have correctly followed the procedures for recharging the unit (covered in the **Charging the Battery** section of this manual on Page 9).

If charging the unit does not resolve the problem, or if you encounter any other operational issues with this unit, please contact IndeeLift Customer Care at the number below. Our knowledgeable associates will help to diagnose the problem and present a plan for swift resolution.

IMPORTANT: When contacting IndeeLift Customer Care, please be prepared with your model number, serial number, purchase date and a detailed description of the problem.

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Warranty Information:

IndeeLift Inc. warrants to the original purchaser that this product and the components thereof will be free from defects in workmanship and materials for a period of **one year** from the original date of purchase. IndeeLift Inc. will, without charge, repair or replace at its option, any defective components or the whole product if necessary. Shipping charges may apply. If a total replacement is necessary, IndeeLift, may upon its discretion provide the latest model, which meets or exceeds the specifications of the product to be replaced.

Exclusions:

This warranty does not apply in the event of misuse or abuse of the product or as a result of unauthorized alterations or repairs. IndeeLift Inc. reserves the right to make changes in design or make additions or improvements to this product without any obligation to install the same on products previously manufactured.

IndeeLift Inc. shall not be liable for any consequential damages including, without limitations, damages resulting from loss of use. Some states do not allow limitations of incidental or consequential damages, so the above limitation or exclusion may not apply to you. The warranty gives you specific rights and you may have other rights, which vary from state to state.

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Physical Specifications:

Model	FTS-600
Safe Working Load	600 lbs. (272kg)
Overall Depth	26.5 " (673mm)
Maximum Overall Height (raised).....	84.75" (1746mm)
Minimum Overall Height (lowered).....	43.75" (1054mm)
External Width incl Rise Handles.....	23" (584mm)
Maximum Seat Height	30" (762mm)
Seat Width.....	22" (559mm)
Wheel Diameter.....	6" (152mm)
Unit Weight	82 lbs. (37kg)
Rotating Seat Plate	Standard
Securement Belt System	Standard

Electrical Specifications:

Standard 2-prong 110V AC Power 9' (2.74m) cord (USA)
Standard 2-prong 220V AC Power 9' (2.74m) cord (Rest of World)
Operating environment: 41° to 104°F (+5°C to 40°C)
Battery and System: 24V
Lithium Ion Battery Pack..... Standard
"Smart" Charger..... Standard

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Owner's Notes:

Model: FTS-600

Serial Number: _____

Date Purchased: ____/____/____

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Residential



Professional



Emergency Responders