



Mediloan Program Instruction Manual

City of Scottsdale Human Services
Aether Youth Medical Foundation

NOTICE: Users understand that there is the potential for physical injury of varying degrees, including, without limitation to: concussions, head injuries, scrapes, scratches, bruises, broken bones, sprains/strains, and other injuries up to and including death may occur while using/misusing equipment. This is a resource guide provided purely as a courtesy.

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Introduction



Via Linda Senior Center

The Mediloan Program

Active within both the Via Linda Senior Center and the Granite Reef Senior Center, the Mediloan Program aims to offer seniors with medical equipment that has been kept in optimal condition to offset issues related to the cost of purchasing these items. The main purpose of this document is to provide an overview on the correct use of loaned, medical items from the Mediloan Program.

(For more information, visit

<https://www.scottsdaleaz.gov/seniors/services/medical-equipment-loan-out>)

Types of available equipment/donations

There is a wide range of medical equipment that is able to be loaned out from the Mediloan program, with prominent items including:

Wheelchairs (Motorized, transport, and self)

Walkers

Crutches (Forearms and underarm)

Any kind of braces (i.e. arm/leg braces)

Along with disposable items such as (but not limited to):

Protective underwear/briefs

Pads

If you have spare, reusable/disposable medical equipment and would like to donate, please visit either one of the senior centers or contact (480) 312-5810 for the Via Linda Senior Center, or (480) 312-1700 for the Granite Reef Senior Center.



Granite Reef Senior Center

Medical Equipment #1: Wheelchairs



If there are any questions for the locations of the wheelchair's parts, please refer to this image as it can assist in the learning of how to correctly access this equipment.

It is important to note that not all wheelchairs are the same, but they tend to follow a similar structure to the image above as either a transport or standard wheelchair

Universal Prerequisites/Guidelines

Regardless of whether a wheelchair is actively being used or not, there are certain conditions that need to be met for safe use and maintenance of this device.

1) Tires must remain inflated at all times if that the wheelchair is a pneumatic model

- The pressure information is typically located on the sides of the wheels, but if not, it is highly recommended to check the brand of the wheelchair's website for accuracy

2) Wheelchairs are not meant for all-terrain travel

- The wheelchairs that are provided by the Mediloan program are not meant to travel across various platforms, and it is important to avoid uneven surfaces to prevent damage to the equipment and the user.



3) Be mindful about locks and footrests

- Wheelchair locks must be secured in place at all times during transportation (i.e. bus rides), and also when the movement of a person to the wheelchair is taking place.

4) Weight limit

- The weight limit for a wheelchair must never be exceeded, and is often written behind the backrest or seat. Typically, wheelchairs can withstand up to 250-300 pounds, but this is not guaranteed for all of the wheelchairs that are available for loaning.

Wheelchair Usage

1) Setting up

To set up a wheelchair, first place the wheelchair on a flat surface, ensure that the wheel locks are secured, move footrests out of the way completely, then begin to move towards the wheelchair until your legs have touched the seat, then lower yourself into the sitting position, and return the footrests while also placing your feet onto the footplates. **It is imperative that you do not stand on the footplates at any time.**

2) Movement

This section will be split into 2 main categories to address the differences between a transport and standard wheelchair:

Transport:



The person sitting in the wheelchair typically cannot maneuver the wheelchair themselves, and will require another person to assist with movement. Transport wheelchairs are the ones with push handles. Maintaining a careful, consistent speed is necessary to prevent problems when moving.

Movement and stopping are all very similar to the use of a shopping cart, but some wheelchairs can have brakes on the handles, which should be gently squeezed when slowing to a stop. Furthermore, when entering an elevator, it is necessary to back into the main interior for an easy pull out.

Standard:



Hand rims are the main form of movement for wheelchairs, where the user will be expected to push themselves without another's assistance.

It is recommended to travel by wheelchair with short, circular pushes on the wheels in order to maintain more precise control.

Turns are done by pushing a wheel and having a stopped wheel, i.e. if you want to turn left then push the right wheel hard while maintaining no motion in the left wheel and vice versa for a right turn.

To stop, slowly apply some resistance to the wheels, then once the wheelchair has fully stopped, apply the wheelchair locks to prevent any unwanted movement.

3) Ramps

Ramps are alternative pathways that people in wheelchairs can take, and knowing how to safely move from one end to the next is crucial for convenience and safety. This section will also be divided between transport and standard wheelchairs as well.

Transport:

For the caregiver, when going up a ramp, push from the handles with a consistent force, and be mindful about the wheels on the transport wheelchair to prevent sudden unwanted turns from happening (especially wheelchairs that have smaller wheels).

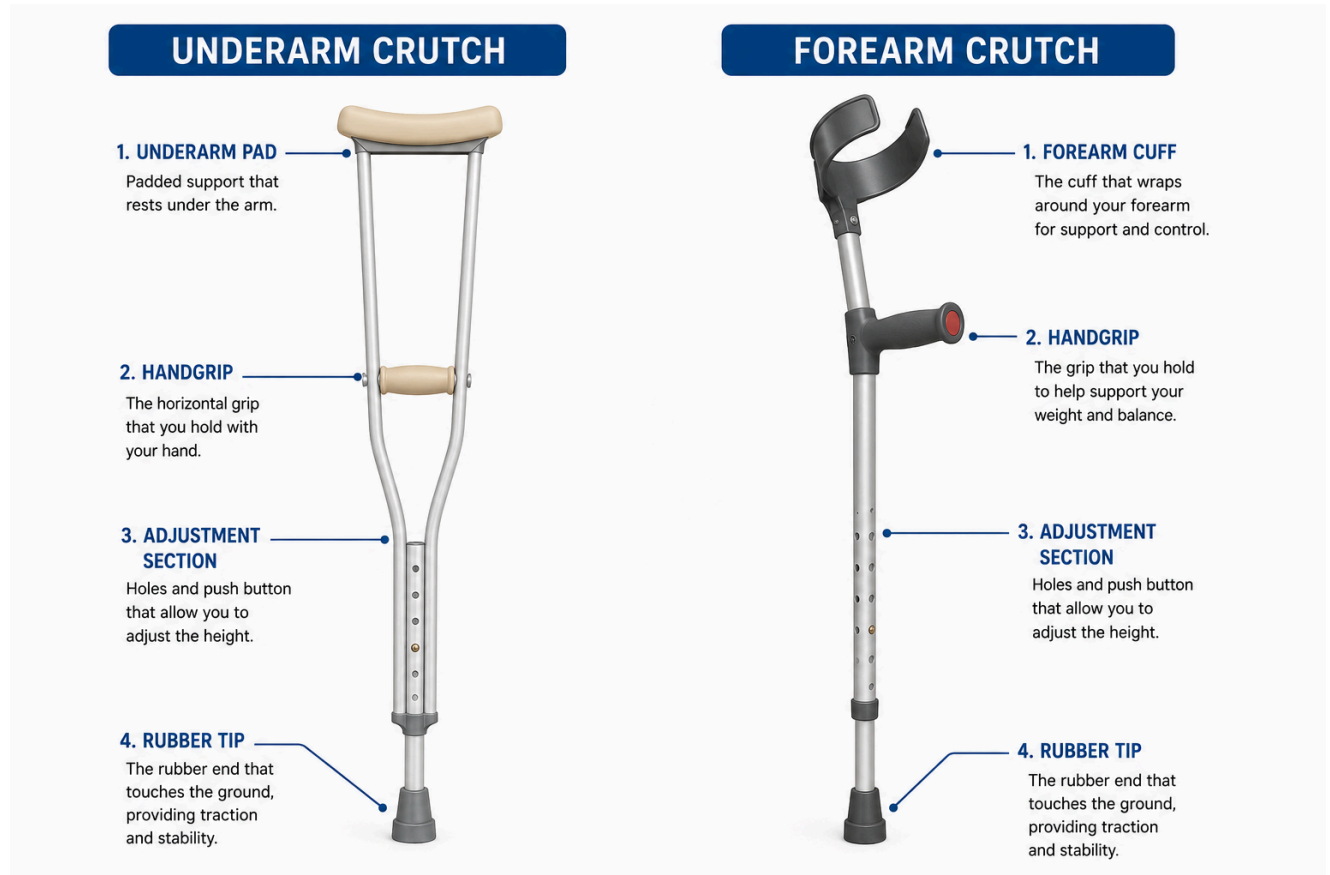
When moving down a ramp, the person controlling the wheelchair should face backwards to prevent the person sitting in the wheelchair from falling forward, and they should only move down with the help of gravity. It is important to maintain a firm grip on the handles while also traveling small distances along the ramp to avoid sudden acceleration.

Standard:

For the user, when going up a ramp, lean slightly forward to maintain the center of weight, push the hand rims of the wheel with a consistent, circular force. If the ramp is too steep, moving in a zig-zag motion can be helpful to gain distance while also conserving energy. It is not recommended for someone in a wheelchair to pause midway, because this can cause the wheelchair to begin moving downwards and resisting gravity when you want to move forward is not advised. If you do decide to stop, slowly descend until you are no longer on the ramp, and wait to try again.

When travelling down a ramp, the user should lean backwards to prevent sudden rolls in the forward direction, and slowly begin to descend with a light but still grip on the hand rims. As you go down, if you feel that you are picking up too much speed, it is recommended to gently turn sideways so that you are facing the rails of the ramp. This will cause you to stop and give you time to start moving downwards again.

Medical Equipment #2: Crutches



If there are any questions for the locations of the crutches' parts, please refer to the accompanying image as it can assist in learning how to correctly access and use this equipment. Like the wheelchairs, not all crutches are identical, but they generally follow a similar structure to the image above.

Universal Prerequisites/Guidelines

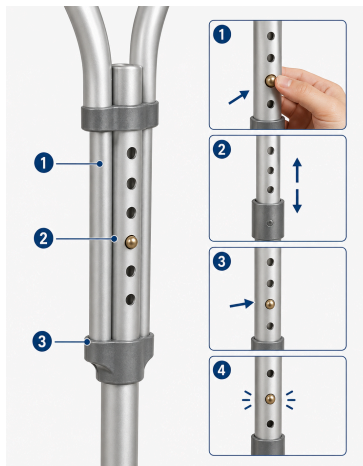
Regardless of whether crutches are actively being used or not, there are certain conditions that need to be met for safe use and maintenance of this device.

1) Rubber tips must remain intact

- The rubber tips at the bottom of the crutches are essential for grip and stability. Worn, cracked, or missing tips should be replaced immediately because damaged tips can increase the risk of slipping.

2) Proper height adjustment is required

- Crutches should be adjusted according to the user's height. For underarm crutches, there should generally be approximately 1-2 inches of space between the top of the crutch and the underarm area while standing upright.



3) Avoid placing body weight directly on the underarms

- Body weight should primarily be supported by the hands through the hand grips rather than by leaning heavily into the underarm supports. Excess pressure beneath the arms may cause discomfort or irritation.

4) Weight limit

- Crutches have weight capacities that should not be exceeded. Weight limits vary depending on the model and manufacturer and should be checked before use.

Crutch Usage

1) Setting up

This section will be divided into underarm crutches and forearm crutches due to their structural differences.

Underarm Crutches



To properly set up underarm crutches, stand upright while wearing normal footwear. Adjust the crutches so that the tops rest approximately 1–2 inches below the underarm area while standing. The hand grips should be adjusted so that the elbows maintain a slight bend of approximately 15–30 degrees when holding the grips. The tops of the crutches should never press directly into the underarms.

Forearm Crutches



Forearm crutches should be adjusted so that the hand grips allow a slight bend in the elbows while standing upright. The forearm cuffs should wrap around the forearm comfortably without restricting movement or circulation.

2) Movement

Underarm Crutches

Movement begins by placing both crutches slightly ahead of the body while supporting weight through the hands. Depending on the user's mobility needs, the injured or weaker leg may either remain off the ground or support limited weight.

When walking, steps should remain short and controlled to maintain balance. Sudden movements or placing the crutches too far ahead should be avoided because this may cause instability.

Stopping is accomplished by slowing movement and firmly placing both crutches on the ground before remaining stationary.

When going up the stairs, hold both crutches with one arm while the other holds on to the railing, and make sure your strong leg is placed first. When going down, place your weaker leg down first and your crutches while holding the rail and then your strong leg next. **(Up with the Good, Down with the Bad)**

Forearm Crutches

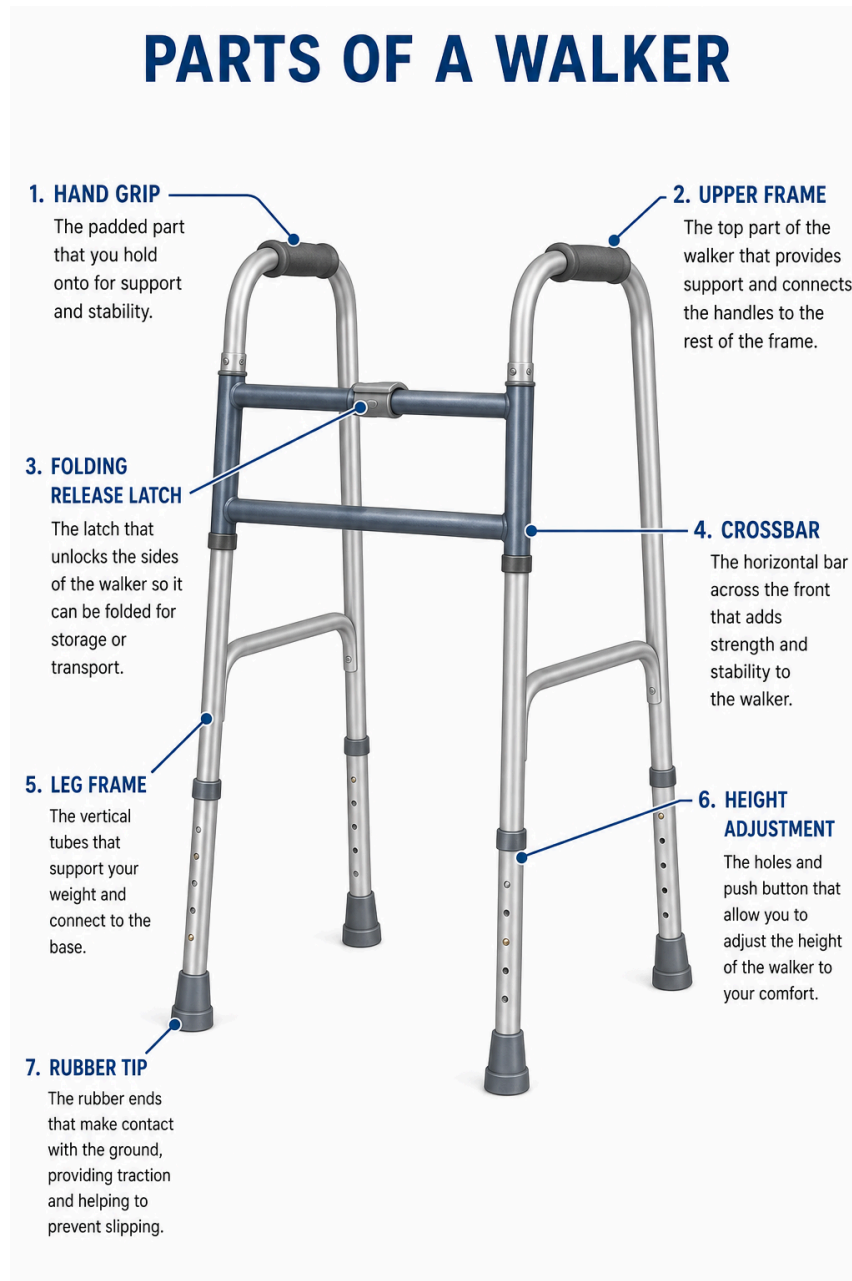
Forearm crutches generally allow more freedom of movement and often provide increased mobility for long-term users.

To move, place both crutches slightly forward while supporting body weight through the hands and forearms. Step forward in a controlled motion while maintaining an upright posture.

Due to the increased mobility of forearm crutches, users should avoid taking excessively large steps or moving too quickly, particularly when changing direction.

Once again, when going up the stairs, hold both crutches with one arm while the other holds on to the railing, and make sure your strong leg is placed first. When going down, place your weaker leg down first and your crutches while holding the rail and then your strong leg next. **(Up with the Good, Down with the Bad)**

Medical Equipment #3: Walkers



Please refer back to this image if there are any unfamiliar terms within this section of the manual. Not all walkers are identical, but they generally follow a similar structure to the image above.

Universal Prerequisites/Guidelines

Regardless of whether a walker is actively being used or not, there are certain conditions that need to be met for safe use and maintenance of this device.

1) Inspect rubber tips/wheels

- Rubber tips and wheels should be checked frequently for wear and damage. Worn components can reduce stability and increase slipping risk.

2) Proper Height Adjustment

- Walker handles should generally align with the user's wrists while standing upright with arms relaxed at the sides. This allows for comfortable elbow bending during use.

3) Avoid excessive leaning

- Walkers are intended to provide support and balance assistance, but excessive leaning or pushing downward can affect stability.

4) Be mindful about pathways

- Walkers require adequate space for movement. Objects, cords, loose rugs, or cluttered pathways should be removed whenever possible.

Walker Usage

1) Setting up

To set up a walker, place it on a flat surface and ensure all adjustment mechanisms are locked. If the walker is foldable, confirm that it has fully opened and locked into position before use.

Stand upright while holding both hand grips firmly.

2) Movement

This section will be divided into two main categories to address differences between standard walkers and wheeled walkers.

Standard Walker



The standard walker requires lifting with each step.

Lift the walker slightly and move it a short distance forward while keeping all four legs level with the ground. Step forward into the walker area with the affected leg first, then bring the stronger leg forward.

Movement should remain controlled and avoid placing the walker too far ahead.

Standard Walker with tennis balls/glide caps/ski ends



For walkers with tennis balls, glide caps, or ski ends, sliding is the main method of movement, with little to no requirement for lifting. However, these walkers should only be used indoors as outside walkways are more rough and may prevent movement.

Wheeled Walker



Wheeled walkers move more continuously and generally require less lifting effort.

Push the walker forward a short distance while maintaining both hands on the grips. Walk forward at a steady pace while remaining within the walker frame.

Users should avoid pushing the walker too far ahead because this can reduce stability.

High rise walkers

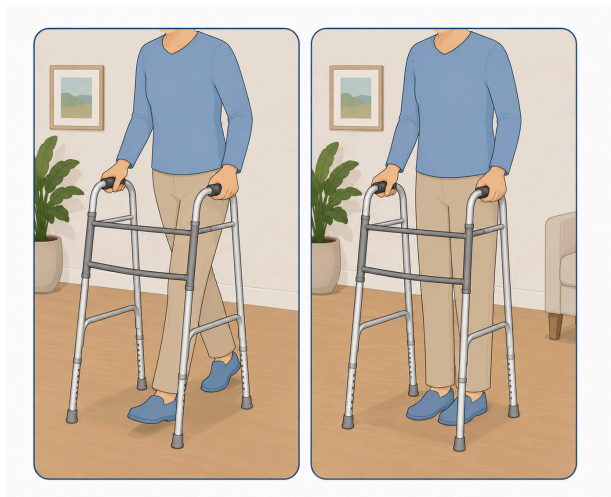


Place both forearms securely on the padded supports (adjust as needed) and grasp the hand grips before beginning movement. Push the walker forward a short distance while maintaining an upright posture and keeping your body centered within the frame. Walk forward at a slow, controlled pace while keeping your forearms in contact with the supports.

Stopping

To stop movement, gradually reduce walking speed and remain standing inside the walker frame.

For wheeled walkers that include brakes, gently squeeze the brakes until movement has completely stopped.



Medical Equipment #4: Knee scooters



Please refer back to this image if there are any unfamiliar terms within this section of the manual. Not all knee scooters are identical, but they generally follow a similar structure to the image above.

Universal Prerequisites/Guidelines

Regardless of whether a knee scooter is actively being used or not, there are certain conditions that need to be met for safe use and maintenance of this device.

- 1) Tires must remain properly inflated if the knee scooter uses pneumatic wheels
 - The recommended tire pressure is typically printed on the sidewall of the tire. If this information cannot be found, it is highly recommended to consult the manufacturer's website for the correct specifications.

- 2) Knee scooters are not meant for rough or uneven terrain
 - The knee scooters provided by the Mediloan program are designed primarily for indoor use and smooth outdoor surfaces such as sidewalks. Gravel, grass, loose dirt, steep slopes, and uneven terrain should be avoided whenever possible, as these conditions may increase the risk of tipping, loss of control, or equipment damage.

- 3) Always inspect brakes before use
 - The hand brakes should be tested before each use to ensure that they are functioning properly. If the scooter rolls while the brakes are engaged or if the brake cables appear loose or damaged, the scooter should not be used.

- 4) Keep adjustment mechanisms secure
 - Before each use, ensure that all adjustment knobs, height settings, and folding mechanisms are fully tightened and locked into place. Loose components may affect stability and increase the risk of injury during operation.

- 5) Use appropriate footwear
 - Users should wear secure, closed-toe shoes while operating a knee scooter. Bare feet, socks, sandals, or loose footwear may reduce stability and increase the risk of slipping while mounting, dismounting, or propelling the scooter.

Knee Scooter Usage

1) Setting Up

To set up a knee scooter, place it on a flat surface and ensure all adjustment mechanisms are securely tightened. Adjust the handlebar height and knee platform height as needed so that the user can maintain a comfortable and upright posture.

Before use, confirm that the handlebars, knee platform, and folding mechanisms (if applicable) are locked into place. Test the brakes briefly to ensure they function properly before moving.

2) Movement

Knee scooters are designed to support users with injuries below the knee while allowing movement without placing weight on the affected leg.

Place the injured leg on the knee platform so that the knee is centered and comfortably supported by the cushion. Both hands should remain on the handlebars at all times during movement.

Use the uninjured leg to push off the ground in a controlled manner, similar to riding a scooter. Movement should remain slow and steady, especially when turning or navigating through narrow spaces.



When changing direction, make gradual turns using the handlebars. Sharp turns or sudden movements should be avoided, as they may increase the risk of tipping.

Users should remain aware of floor conditions and avoid wet surfaces, loose rugs, thresholds, or obstacles that may interfere with the wheels.

3) Stopping

To stop movement, gradually reduce pushing speed with the uninjured leg and allow the scooter to slow naturally.

Once the scooter has nearly stopped, gently squeeze both hand brakes until movement has completely ceased. Keep both hands on the handlebars while stopping.

After stopping, place the uninjured foot firmly on the ground before removing the injured leg from the knee platform. If the knee scooter is equipped with a parking brake, engage it whenever the scooter will remain stationary for an extended period or during transfers.



Medical Equipment #5: Portable Safety Bed Rails



Please refer back to this image if there are any unfamiliar terms within this section of the manual. Not all portable safety bed rails are identical, but they generally follow a similar structure to the image above.

Universal Prerequisites/Guidelines

Regardless of whether a safety bed rail is actively being used or not, there are certain conditions that need to be met for safe use and maintenance of this device.

1) Bed rails must be securely positioned at all times

Before each use, verify that the mattress support base is fully inserted between the mattress and bed frame and that any included straps or securing mechanisms are properly fastened. The bed rail should not shift or wobble when pressure is applied.

2) Safety bed rails are intended to assist with bed mobility

Bed rails are designed to help users reposition themselves, sit upright, and transfer into or out of bed. They should not be used as a substitute for a walker, cane, or other mobility device intended to support walking.

3) Inspect for gaps between the rail and mattress

Before use, ensure that there are no excessive gaps between the mattress and the bed rail. Large gaps may create an entrapment hazard for arms, legs, or other body parts.

4) Check stability before use

The rail should be tested regularly by applying gentle pressure in multiple directions. If the rail shifts, loosens, or becomes unstable, it should be repositioned before further use, and check if the rails are compatible with your bed.

5) Keep the surrounding area clear

The area around the bed should remain free of clutter, loose rugs, electrical cords, and other obstacles that may interfere with transfers. Maintaining a clear environment helps reduce the risk of falls and injuries.

Portable Safety Bed Rail Usage

1) Setting Up

To set up a portable safety bed rail, place the mattress support base between the mattress and bed frame according to the manufacturer's instructions. The support base should be positioned far enough beneath the mattress so that the bed rail remains secure during use.

If the bed rail includes a safety strap, attach and tighten the strap around the bed frame as directed. Ensure that all adjustment mechanisms, locking buttons, and fasteners are fully engaged before use.

Before using the bed rail, apply gentle pressure in multiple directions to confirm that it remains stable and does not shift. If any movement is observed, reposition the rail and inspect all securing mechanisms before proceeding.

2) Usage

Safety bed rails are designed to assist users with repositioning in bed, sitting upright, and transferring into or out of bed. The rail should always be grasped firmly using one or both hands before applying pressure.



3) Sitting Up

When moving from a lying position to a seated position, roll onto your side facing the bed rail. Grasp the rail firmly and use your arms to help pull your upper body upright while simultaneously moving your legs toward the edge of the bed.

4) Getting Out of Bed

Once seated at the edge of the bed, keep one hand on the bed rail while placing both feet firmly on the floor. Push upward using both your legs and the bed rail until standing. If additional mobility equipment is required, ensure it is positioned nearby before standing.

5) Getting Into Bed

Before sitting down, ensure the bed rail is secure and stable. Sit on the edge of the bed while maintaining a firm grip on the rail. Slowly lower yourself onto the mattress and use the rail as needed while repositioning into a comfortable lying position.

6) General Safety Considerations

The bed rail should only be used to assist with movement and transfers. Users should avoid pulling, pushing, or leaning excessively on the rail, as doing so may reduce stability and increase the risk of injury. All movements should remain slow and controlled, particularly when transitioning between sitting, standing, and lying positions.

For any further questions, please contact or visit either senior center:

Via Linda Senior Center
10440 E Via Linda, Scottsdale, AZ 85258
(480) 312-5810

Granite Reef Senior Center
1700 N Granite Reef Rd, Scottsdale, AZ 85257
(480) 312-1700

Thank you!



Credits

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