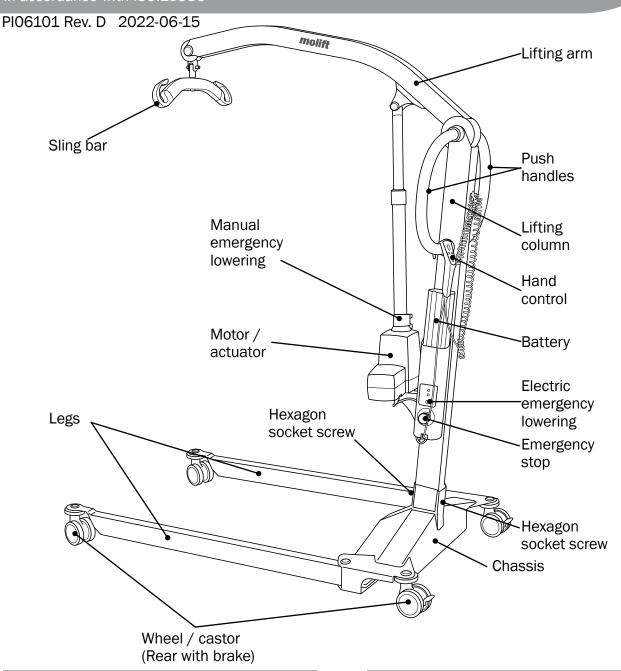
Molift Mover 180, 205, and 300

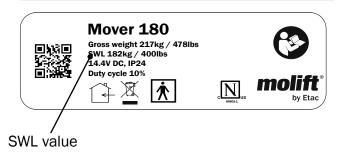


Periodic inspection checklist (EN)

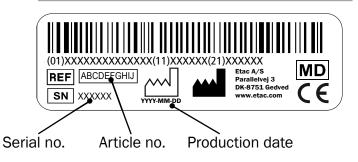
In accordance with ISO:10535

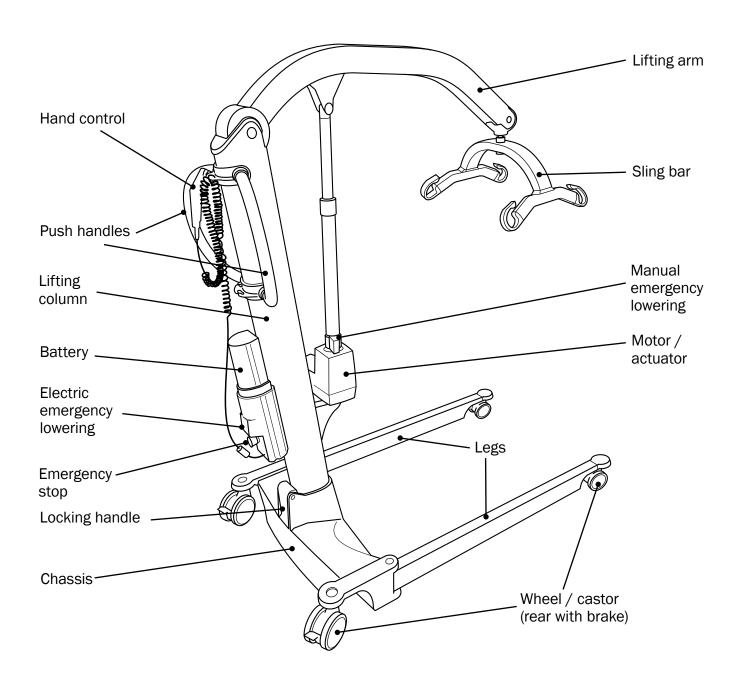


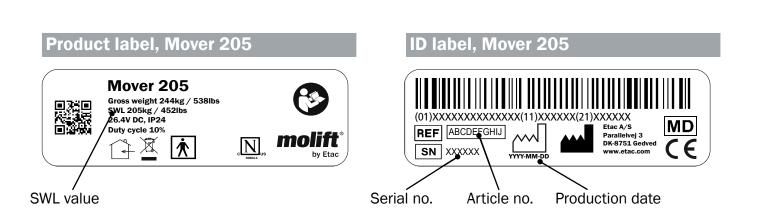
Product label, Mover 180

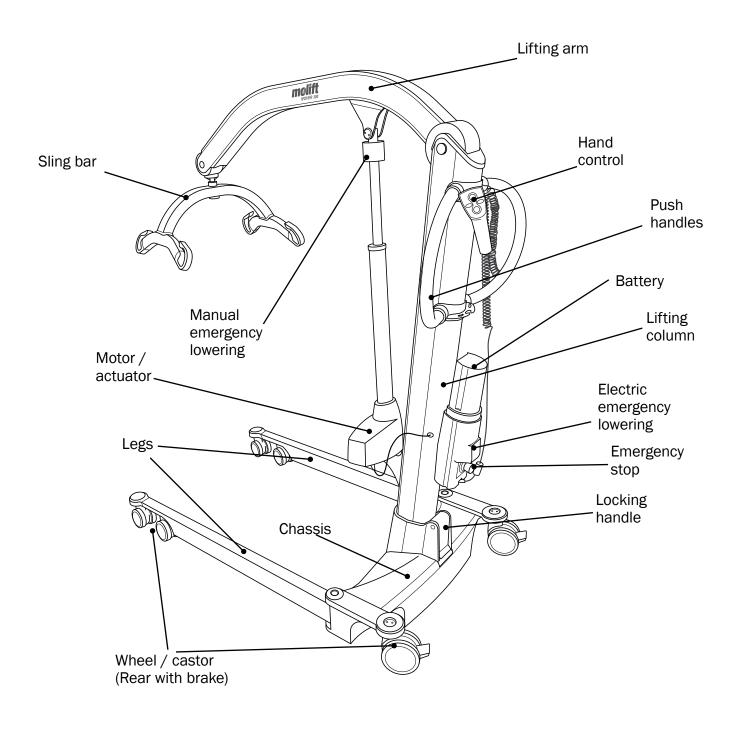


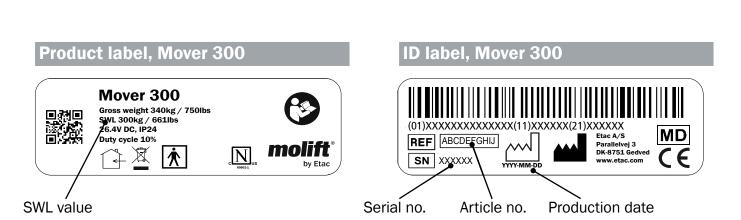
ID label, Mover 180











A copy of this document is available for download at www.etac.com.

Scan QR code on product label for accessing product home page. The user manual can be found in the document section.

Article no. (see ID label):
Serial no. (see ID label):
Production Year:

Owner:

Sling shall be inspected separately and is not included in this inspection.

Specify model:

Mover 180

Mover 205

Mover 300

Situation of use

Home Hospital Nursing home Other



The periodic inspection is to be performed by a person who is suitable and properly qualified and well acquainted with the design, use and care of the hoist



The hoist's software Molift Service tool provides option to enter date of PI and name of inspector along with additional information.

Molift recommends adding all observations / remarks concerning

the hoist in the Molift Service tool for complete history log of the hoist

Service light indicator

Note colour of service light indicator:

	Status	Service light	Mode
		(No light)	Power saving (Stand by)
	Green Yellow		Ready for use
			Order service
		Red	Perform service
		Red (and sound when activated)	Perform service immediately

Visual examination



Visual examination of load bearing structure to make sure there is no damage, cracks, frays or deformation. All checkpoints must be checked to approve hoist for further use

OK	Not OK	
		Lifting column
		Lifting arm
		Legs
		Product label
		Plastic covers
		Hand control
		Actuator
		Wheels / castors
		Brakes on wheels / castors
		Charger
		Cables
		Battery
		Other electronics
		Sling bar, incl. padding
		Leg spreading mechanism
		No corrosion
		Weldings
		Instruction for use / user manual is present / available

Functional examination



Test FUNCTION and inspect for wear and damage.

All checkpoints must be checked to approve hoist for further use

OK	Not OK	
		Wheels / castors
		Rear wheel / castor brakes
		With legs in inner position (par- allel): Check that the distance between legs can not decrease when pushed together by hand
		For Mover 180 only: Lifting column is completely fixed with hexagon locking screws tightly secured
		For Mover 205 and 300 only: Lifting column is completely fixed when locking handle is engaged
		Emergency stop button is fully operational and interrupts power when engaged. Reset switch.
		Electrical emergency lowering
		Manual emergency lowering
		Hand control (buttons, strain relief on hand control cable, hook, and battery indicator) Sling bar coupling (swivel joint
		moves freely and without noise)
		Sling bar quick release
		If all points so far are "OK", hoist shall be tested with SWL.
		Perform one lifting cycle with weight equal to SWL (see product label for value kg/lbs). Actuator must not slip when loaded (causing lifting arm to lower).
		Leg spreading mechanism, outwards and inwards with SWL
		Perform new visual control; Damage, play and deformations as described above. Any dam- aged parts must be repaired or replaced and test is repeated once more until the hoist performs correctly

OK Not OK

inser batte	fully charged battery ted, after initial cycle, ery light is off, and wrench / ce light is green			
Accessories:				
Performed by				
Full name:				
Date/Place:				
Signature:				
Approved witho	ut faults			
Next inspection	(YYYY / MM):/			
Hoist is marked for repair	with "Out of order" and sent			
Hoist is not elig	ible for repair and taken out			
If periodic inspection reveals any defect, wear or other damage that jeopardises the safety of the patient the hoist may not be used until the deficiency has been eliminated.				

Charger is operational

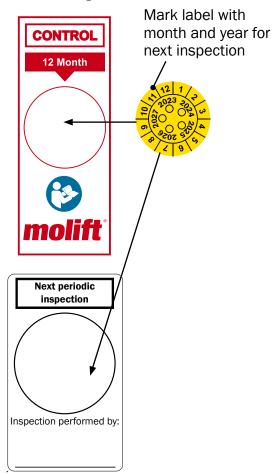
deficiency has been eliminated

The owner is notified



Due to legal requirements this document or a copy must be filed with the owner's service log book

If approved without faults, apply inspection label and mark with month and year for **next** inspection. When ordering label, use item no. 1100306



Notes and observations