



TrayAway™

PATENT PENDING

PRODUCT MANUAL

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1. Product Description and Features:

The TrayAway™ has been engineered to replace your power chair's present armrest system and in some instances the entire mounting system utilizing some or all of the hardware provided by the power chair manufacturer depending on the power chair that it is being mounted to.



Dimensions of Tray: 9"W x 10"L



Weight Capacity of Tray: 15lbs



Total weight of unit: 11lbs



Overall width of unit: 3 ¼ "



2. Installation Instructions:

CAUTION: The TrayAway must be installed by an authorized representative or dealer trained by Rehab Ideas. Appropriate mounting hardware must be used. Failure to do so can result in damage to the wheelchair, user and/or tray unit.

The right hand and left hand models are mounted in exactly the same manner and configuration.



Before You Start

Please have the following tools available:

- Allen wrenches
- Phillips head screw driver
- Level
- Drill



Observe that the TrayAway has a series of mounting holes. In your package a template of the TrayAway with the mounting holes. Align the template of the back cover of the Trayaway to the current armrest mounting system. Choose the most adequate spacing for mounting and plan a general installation and location.



You may find that you need to drill an additional hole or may well choose to call Rehab Ideas Technical Support at 813-600-3058 ext. 113

Step 2:

Determine if you will be replacing the armrest pad provided with the unit to another style or product provided by the wheelchair manufacturer.

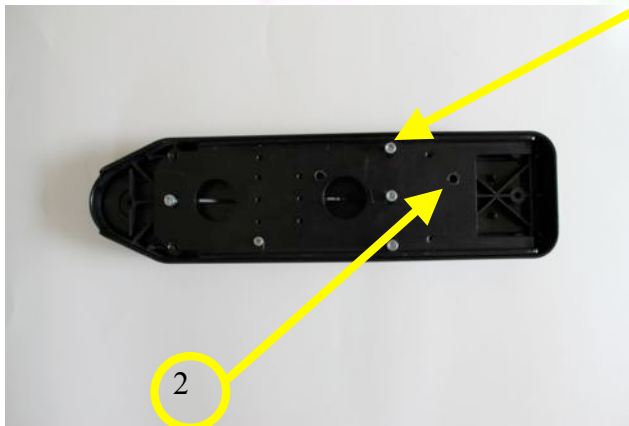
TO REPLACE THE ARMREST PAD:

- Remove the armrest pad by undoing the two screws that fasten the pad to the hinge on the unit.
- Position the replacement pad over the unit and mark the location of the holes on the hinge.
- Drill holes in the base plate of the armrest pad and use bolts to attach the new pad.



CAUTION: Ensure that the tray clears the new pad when deploying without interference. The new pad may need to be aligned accordingly.

EXAMPLE: (Permobil Armrest Pad)



1. Separate mounting plate from pad by remove allen bolts
2. Drill holes in plate to match hinge plate on tray unit
3. Attach hinge plate with nuts and bolts to fasten securely.
4. Attach metal plate to arm pad assembly

Step 3:

- Measure the height and forward location of the current armrest on the wheelchair
- Remove the existing armrest from the wheelchair and place the TrayAway unit with the armrest pad matching the above dimensions noted.
- Determine if:
 - (a) Mounting arm/bracket from the wheelchair manufacturer will work
 - (b) A mounting plate or bracket from Rehab Ideas is necessary to ensure that the height and configuration of the armrest pad remain the same for the user

EXAMPLE (A):

EXAMPLE (B):

Permobil armrest using existing bracket



Permobil armrest using right-side bracket for left-side (Allows unit to be raised)



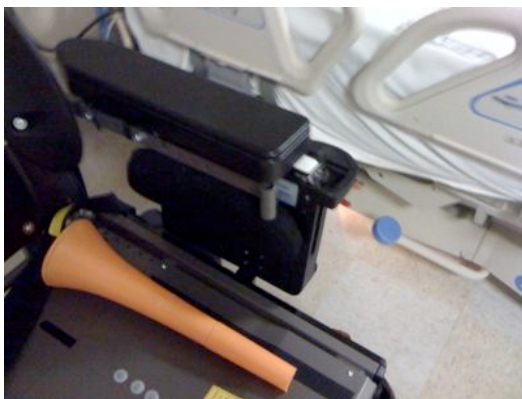
**EXAMPLE (D):
Permobil armrest with RI Adapter Plate*
(Allows unit to be lowered)**



**EXAMPLE (E):
Permobil arm-bracket modified*
(Allows width to be reduced)**



**EXAMPLE (F):
Permobil Stander-Mounted to Seat Rail**



**EXAMPLE (G):
Invacare Pronto RI Bracket**



**Available from Rehab Ideas*

TO DRILL ADDITIONAL HOLES WHEN NECESSARY:

- Remove the front cover of the Trayaway using an Allen wrench to remove the three screws on the front cover (2 at the bottom and 1 at the upper left corner)
- All mounting bolts and hardware should be inserted from the inside outward using the recessed mounting holes so as to prevent any interference with the Trayaway's operation after the mounting has been complete
- Bolts should be counter-sunk head and at least ¼"

Step 4:

Mount the TrayAway to the power chair.

3. Operation and Maintenance:

The tray is deployed by manually raising it from the storage compartment below the armrest pad.

The unit is relatively maintenance-free, however the following are recommended at least monthly for smooth operation:

- Check bolts and nuts are tight
- Clean unit and tray with a damp cloth or household cleaning solution

4. Frequently Asked Questions:

(A) CAN THE TRAYAWAY BE INSTALLED ON THE LEFT OR RIGHT SIDE?

The units can be installed on either side, but each unit is unique.

(B) DOES THE TRAYAWAY INCREASE THE OVERALL WIDTH OF THE WHEELCHAIR?

Most applications will not increase the overall width of the chair. However in some applications, due to the mounting system and/or wheelchair design, the width may be increased by as much as an inch.

(C) CAN THE UNIT BE FLIPPED BACK OR REMOVED FOR TRANSFERS?

Yes. However the user must have sufficient strength to do this independently. Care must be taken so that the unit is secure when flipped back to avoid falling down on the user when transferring.

6. Warranty:


Rehab Ideas warrants solely to the purchasing party that the product sold by it shall be free of defects in materials and workmanship; when given normal, proper, and intended usage, for a period of one (1) year from the date of the invoice. Purchaser shall notify Rehab Ideas of any product that they believe to be defective. At rehab Ideas option, such product(s) shall be returned by Purchaser to Rehab Ideas. Based upon examination and testing, Rehab Ideas shall repair or replace with a comparable product or issue an appropriate credit. In the event of a warranty adjustment, Rehab Ideas shall pay appropriate shipping charges, when applicable, to return product to the Purchaser.

A Warranty Card will be provided with each shipment of Rehab Ideas products and the customer is to submit this card to Rehab Ideas upon receipt. A sample of this Warranty Card is shown below.

Requirements:

1. Installation will be via Rehab Ideas authorized installer
2. Alterations to the product will receive prior approval from Rehab Ideas before installation
3. Defective products will be forwarded to Rehab Ideas for evaluation and final determination of defect
4. Warranty will be voided due to improper installation or damage caused by abuse

Sample warranty Card

 REHAB IDEAS <i>Innovations for Independence</i>		WARRANTY CARD	
CUSTOMER INFORMATION:		DEALER INFORMATION:	
Customer name:		Name of dealer:	
Wheelchair make/model:		Location:	
Serial Number of unit:		Invoice Number:	
Contact Phone Number:		Date of installation:	
Email:		Contact Phone Number:	
		Email:	