



OMNISTIM[®] FX² PORTABLE PENS Professional User Manual

**Revised 10.14.2021
Part No. MNL-0004 Rev 8**

This manual and all content therein is owned exclusively by Accelerated Care Plus ("ACP") and is protected by copyright. This manual or any portion thereof may not be photocopied, reproduced or translated to another language without the express prior written consent of ACP. This manual may only be used by entities that have purchased the equipment or have implemented the ACP program and are covered by an executed lease agreement. This manual may not be used for any other purpose.

Any additional copies of the Manual shall be ordered from ACP. No changes or modifications shall be made to the Manual without prior review and written authorization from ACP. No authorization is given to market, sell, disclose, or exploit this Manual except as for purposes of using the Equipment as contemplated by the Lease Agreement.

ACCELERATED CARE PLUS MAKES NO WARRANTY OF ANY KIND WITH REGARD TO THIS MANUAL, INCLUDING, BUT NOT LIMITED TO, THE IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE. Accelerated Care Plus shall not be liable for errors contained herein or for incidental or consequential damages in connection with the furnishing, performance or use of this Manual. The information contained in this document is subject to change without notice.



OMNISTIM® FX² PORTABLE PENS

ACP manufactures a premier line of rehabilitation technologies to assist health care professionals with improved outcomes and quality-of-life for Patients. The ACP product line includes Pain Control Systems, Muscle Stimulators, Interferential Therapy, Therapeutic Ultrasound, Pulsed Shortwave Diathermy devices, and advanced Therapeutic Exercise Systems. Our **OMNISTIM®**, **OMNICYCLE®**, **OMNIVR®**, **OMNISTAND®**, **OMNIVERSA®**, **OMNISWD®** and **SYNCHRONY** represent the most recent worldwide advances available for therapeutic application of electromedical devices and other rehabilitation technology.

ACP is internationally recognized for its contribution to research in the development of medical applications for therapeutic rehabilitation. The Company sponsors and conducts research at leading health care institutions and major universities throughout the world.

SYMBOLS ON THE PRODUCT

Symbol	Used for	Symbol	Used for
	Serial number		Type BF medical device per: IEC 60601
	Date of manufacture		Manufacturer
	Caution, consult accompanying documents		Caution, electrical precautions
	Remote Control connection		CE mark of confidence compliant to MDD (93/42/EEC)
	Connection Electrode Cable		Classification against intrusion of water, dust, accidental contact of a body part.
	Proper disposal required. Do not dispose of with regular household waste. Follow state and/or local regulations.		Alternating current device.
	Observe the user manual		Consult instructions for use
	Protect the product from humidity		ON / OFF push button

TABLE OF CONTENTS

SYMBOLS ON THE PRODUCT.....	2
ELECTROTHERAPY INDICATIONS & CONTRAINDICATIONS.....	4
Indications	4
Contraindications.....	4
Adverse Reactions	4
ELECTROTHERAPY WARNINGS & PRECAUTIONS.....	5
Warnings	5
Precautions	6
THE OMNISTIM® FX² PORTABLE.....	8
Delivery of the OMNISTIM® FX ² PORTABLE PENS	8
Introduction	8
Controls and Functions.....	9
Factory Settings.....	10
Professional Programming Sequence	10
Patient Operational Sequence.....	11
Electrode Application Techniques.....	15
INFECTION CONTROL EQUIPMENT AND PRINCIPLES OF USE	21
Definitions	21
Universal Precautions – Body Substance Isolation	21
Cleaning / Disinfecting of the OMNISTIM® FX ² PORTABLE PENS	21
Cleaning and Low Level Disinfection	21
Intermediate Level Disinfection and Barriers.....	21
Use of Barriers – Intermediate Level Disinfection	22
MODES OF OPERATON	23
Protocol Reference Sheet	23
OMNISTIM® FX² PORTABLE PENS PROGRAM MENU	24
Neuro Re-Ed.....	24
Pain Control.....	25
TROUBLESHOOTING	27
TECHNICAL SPECIFICATIONS	28
OMNISTIM® FX² PORTABLE PENS STANDARD AND OPTIONAL ACCESSORIES	29
Infection Control Supplies.....	29
TREATMENT CHART	30
ELECTRODE PLACEMENT GUIDE.....	30
STANDARD LIMITED PRODUCT WARRANTY	31

ELECTROTHERAPY INDICATIONS & CONTRAINDICATIONS

CAUTION: Federal law restricts this device for sale or use by or on the order of a Practitioner licensed by the laws of the state in which he/she practices to use or order the use of the device.

Please notice that Accelerated Care Plus cannot provide medical advice. If you have specific medical questions, please contact your healthcare professional.

Indications

The Omnistim is indicated for:

- Relaxation of muscle spasms
- Re-Education of muscle
- Prevention or retardation of disuse atrophy
- Immediate post-surgical stimulation of calf muscles to prevent venous thrombosis
- Increase local circulation
- Maintaining or increasing range of motion
- Symptomatic relief and management of chronic intractable pain and as an adjunctive treatment in the management of acute pain, post-surgical pain and pain associated with post-traumatic injury.

Electrical muscle stimulator devices should only be used under medical supervision for adjunctive therapy for the treatment of medical diseases and conditions.

Contraindications

- Do not use this device on patients who have a cardiac pacemaker, implanted defibrillator, or other implanted metallic or electronic device because this may cause electric shock, burns, electrical interference, or death.

Note:

There is no contraindication to the application of Transcutaneous Electrical Stimulation or Powered Muscle Stimulation over metal implants.

- Never connect lead wires to the power line or electro-surgery equipment. Use only the lead wires recommended or approved by the manufacturer

Adverse Reactions

- Skin irritation and burns, beneath the electrodes; have been reported with the use of powered muscle stimulators. Patients may experience skin irritation and burns beneath the stimulation electrodes applied to the skin.
- Patients may experience headache and other painful sensations during or following the application of electrical stimulation near the eyes and to the head and face.
- Patients should stop using the device and should consult with their physicians if they experience adverse reactions from the device.

ELECTROTHERAPY WARNINGS & PRECAUTIONS

CAUTION: Federal law restricts this device for sale or use by, or on the order of, a Practitioner licensed by the laws of the state in which he/she practices to use or order the use of the device.

Please note that Accelerated Care Plus cannot provide medical advice. If you have specific medical questions, please contact your healthcare professional.

Warnings

- The long-term effects of electrical stimulation are unknown;
- Do not apply stimulation over the patient's neck because this could cause severe muscle spasms resulting in closure of the airway, difficulty in breathing, or adverse effects on heart rhythm or blood pressure
- Do not apply stimulation across the patient's chest because the introduction of electrical current into the chest may cause rhythm disturbances to the patient's heart, which could be lethal. Stimulation should not be applied transthoracically in the vicinity of the heart, as introduction of electrical current into the heart may cause cardiac arrhythmias.
- Do not apply stimulation when the patient is in the bath or shower
- Do not apply stimulation while the patient is sleeping; and
- Do not apply stimulation while the patient is driving, operating machinery, or during any activity in which electrical stimulation can put the patient at risk of injury.
- Consult with the patient's physician before using this device because the device may cause lethal rhythm disturbances to the heart in susceptible individuals
- Apply stimulation only to normal, intact, clean, healthy skin.
- Do not operate this device until the User Manual, including all Indications for Use, Contraindications, Warnings and Precautions, have been carefully read and understood.
- Operation of this device or placement of lead wires, probes, pads and electrodes in close proximity (less than 5 feet) to an operating shortwave or microwave diathermy unit may produce instability in the device output or burns at the treatment site. Lead wires and device can pick up the magnetic field output of the diathermy and through induction convert it into an electrical field, transmit the energy into the patient increasing the current density at the electrodes of applicators. Since the patient may not feel the 27 MHz frequency, they lack the protective sensation and tissue burns could result. Short-wave field could potentially damage or reset medical devices in close proximity to the drum applicator.
- Treatment should not be applied over the carotid sinus nerves, (located in the anterior neck triangle), including, stellate ganglion, vagus nerve, or laryngeal or pharyngeal muscle. Particular care should be taken for patients with a known sensitivity to the carotid sinus reflex, as carotid sinus stimulation may alter blood pressure and cardiac contractility.
- Do not apply treatment over testes, heart or eyes. Electrical stimulation may affect organ function.
- Do not apply over or in close proximity to active cancer (except in terminal / palliative / hospice care), as therapy may increase blood flow to the tumor.
- Treatment should not be applied when high fever is present over swollen, severe infection (osteomyelitis, sepsis, tuberculosis, etc.) or inflamed areas/skin eruptions (phlebitis, thrombophlebitis, varicose veins, etc.).
- Do not apply over the lumbar or abdominal region, or over the uterus during pregnancy (to prevent uterine contraction), or during menstruation as therapy may temporarily increase menstrual flow.
- Treatment should not be applied transcranially. Since the effects of stimulation of the brain are unknown, stimulation should not be applied across the head, and electrodes should not be placed on opposite sides of the head;
- Stimulation should not be applied to patients connected to patient monitoring equipment, as the stimulation may have an effect on the proper operation of the monitoring equipment.
- Stimulation should not be applied directly over external stimulator systems with lead wires
- Neuromuscular electrical stimulation (NMES) should not be applied directly over or in close proximity to Deep Vein Thrombosis (DVT), as it activates the muscle and causes muscle contractions. This should be avoided in tissue following an acute DVT when the thrombosis is not completely resolved. Therapists should follow the guidelines provided by the referring physician on recommended activity level and modality use. If the patient is not permitted exercise, NMES therapy should be avoided. Generally, NMES over a DVT of six weeks or less should be avoided altogether.

Precautions

- The safety of electrical stimulation during pregnancy has not been established;
- Some patients may experience skin irritation or hypersensitivity due to the electrical stimulation or electrical conductive medium. The irritation can usually be reduced by using an alternate conductive medium, or alternate electrode placement.
- Application site and settings should be based on the guidance of the prescribing practitioner.
- All equipment and accessories should be kept out of the reach of children or unqualified persons.
- Do not connect this device to any wall outlet that has not been properly grounded, or to any electrically non-isolated medical device. Powered muscle stimulators should be used only with the leads and electrodes recommended for use by the manufacturer. Use this device only with the leads, electrodes, and accessories recommended by the manufacturer. Use only ACP specified accessories and/or supplies with ACP devices. Do not use any power cords, or power supplies, other than the ones provided or specified for this device. Use of any other power supply could seriously damage the device and will void the warranty.
- The use of conductive mediums other than specifically approved pre-gelled or self-adhering electrodes such as ultrasound gel or lotion, hand or body lotion, electrolyte spray mist, paper towels, non-approved reusable or disposable pre-gelled or self-adhering electrodes—are not advised for use with Omnistim Systems.
- When cleaning the device, never immerse them or wash them with water. See the infection control section in this manual for cleaning instructions. Devices should not be submerged in water or other liquids.
- Failure to follow the manufacturer's prescribed maintenance for this device may lead to device failure and transient or unreliable performance. State and federal survey and JCAHO require all equipment to be maintained and calibrated according to the manufacturer recommended schedules.
- A potential electric shock hazard exists once the device outer casing has been in part, or fully, removed. Only qualified service personnel should perform Service and repairs. Warranty will be voided if the outer casing has been removed or tampered with.
- Use caution when the patient has a tendency to bleed internally, such as following an injury or fracture. Do not apply over areas of hemorrhage or active bleeding.
- Inspect and cleanse the skin prior to application. Following treatment check the skin for evidence of irritation or burns, and if present, treat as appropriate. If the patient has, or complains of, skin irritation following treatment; shorten the treatment time on the next treatment session, or use an alternative type of therapy or electrode placement.
- Gradually increase the output intensity/power to required dose or patient tolerance while monitoring the device display.
- Caution should be taken with patient exhibiting psychological or physical hypersensitivity to the therapeutic treatment. Several attempts should be made to place them at ease so that their confidence and cooperation can be gained during the treatment.
- The treatment area should be checked from time to time, and if there is evidence of, or if the patient complains of, pain during treatment, adjust the output downward until it is tolerated by the patient. If the patient continues to complain of pain, discontinue the treatment and shorten the treatment time on the next treatment session, or use an alternative type of therapy or electrode placement.
- Do not apply treatment directly over/under hot or cold packs. Caution is recommended when treatment follows the application of hot or cold therapy, which may alter the patient's sensation. Application of thermal agents over areas of impaired circulation should be performed with caution as the circulation may be insufficient to heat or cool the tissue, altering the patient's perception of warmth and pain, and burns or tissue necrosis may result from subsequent treatment.
- Caution is recommended when treatment follows the application of medicated patches, salves, or creams which may alter the patient's sensation. If there is a medical necessity to perform such treatments, these patients should be monitored diligently during application. The effect of electrical stimulation may be altered by the presence of these materials on the patient's skin.
- Caution should be used over areas of body where circulation is impaired, or which lack normal sensation. Absent or diminished sensation should be avoided or, if unavoidable, treated with caution. Establishment of acceptable

intensity levels for desensitized areas may be related to the intensity levels tolerated on normal skin in opposite or related body parts.

- Caution should be used in the presence of recent surgical procedures, fractures or healing bone and soft tissue when muscle contraction may disrupt the healing process.
- Caution should be used for patients with suspected or diagnosed epilepsy. Patients with suspected or diagnosed epilepsy should follow precautions recommended by their physicians.
- Electrodes should not be placed in direct contact or in close proximity (one inch or less) of each other during treatment. Electrodes placed in contact or in close proximity can lead to high energy density and skin burns under or between the electrodes.
- Care should be used when removing electrodes after treatment, in order to minimize the potential for skin tearing. Skin should be inspected after removal of electrodes for any signs of tearing or irritation.
- Do not connect the stimulator to any electrical equipment for combination therapy except the Omnisound® family of ultrasounds.

THE OMNISTIM® FX² PORTABLE PENS

Delivery of the OMNISTIM® FX² PORTABLE



Upon receipt of your Omnistim® FX² Portable PENS, inspect the shipping container and contents for any obvious or concealed damage. All ACP products are packaged carefully for rapid, safe delivery. We guarantee delivery in perfect condition to the postal or delivery services. However any damage or loss incurred during transportation or delivery is the postal or delivery company responsibility. If damage or loss to the product and/or container is obvious or suspected, appropriate notation must be made on the signed freight bill at the time of delivery. All damage claims should be promptly filed with the delivering carrier and must be initiated by the addressee where the package was to be delivered. Retain the original shipping container and inserts for validation of damage claim or use at a later date.

Unpack and check all accessories. A list of enclosed accessories is provided with each unit to assist you in identification of the type and number of accessories.

Note:

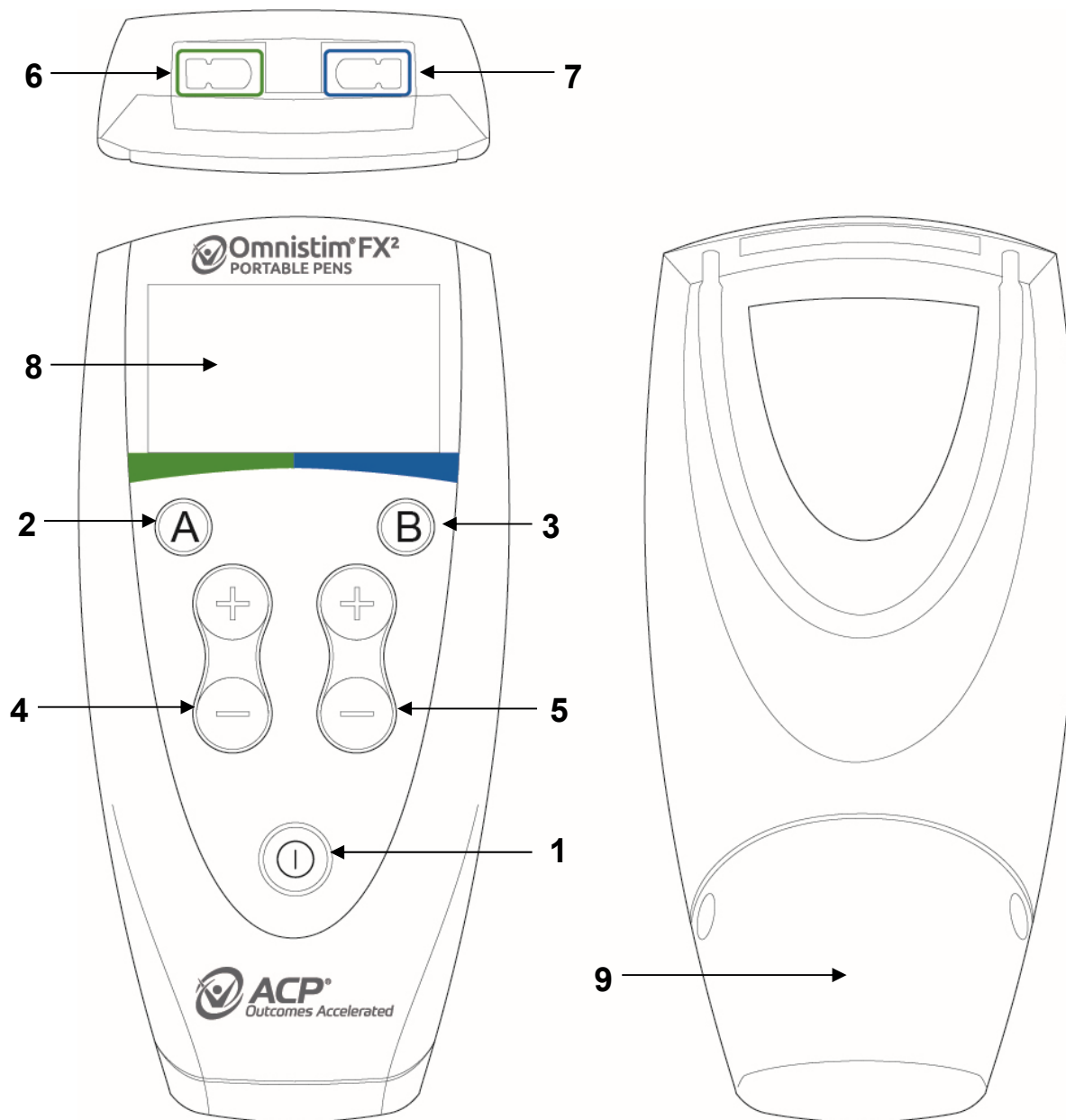
The purpose of this manual is to acquaint you with the Omnistim operating features and functionality. Please read the manual carefully before attempting to operate the Omnistim. If questions remain unanswered, contact your ACP sales representative or call 800-350-1100. Outside the USA call 1-775-685-4000.

Introduction

The Omnistim® FX² Portable PENS provides Patterned Electrical Neuromuscular Stimulation (PENS), which is a form of stimulation that replicates the correct firing patterns of muscles (agonist and antagonist or reciprocal muscle pairs) in Upper and Lower Extremity Triphasic (ballistic), or Upper Extremity Biphasic (reciprocal) patterns. This approach to neuro re-ed provides a comfortable, precisely timed sensory input, which duplicates the firing activity of sensory nerves and muscles during voluntary activity.

The Omnistim® FX² Portable PENS also provides Medium Frequency Alternating Currents (MFAC) for pain management applications. Its generator produces medium frequency 5000 Hz current. Two output circuits with independent intensity controls are provided. The output of each circuit is easily determined in milliamps through the display screen. The digital timer allows the operator to select the length of the total treatment time in minutes.

Controls and Functions



- (1) Main Power Switch – is used to turn the device on and/or off.
- (2) Program Button A – is used to select the first program prescribed.
- (3) Program Button B – is used to select the second program prescribed.
- (4) Output Adjustment Channel A – is used to adjust the intensity level of channel A.
- (5) Output Adjustment Channel B – is used to adjust the intensity level of channel B.
- (6) Channel A Connections – plug the green marked lead into the green channel which corresponds to the Program Button A being used.
- (7) Channel B Connections – plug the blue marked lead into the blue channel which corresponds to the Program Button B being used.
- (8) Display – displays program information and intensity readings. The A and B at the top of the display mark the channels.
- (9) Battery Compartment – this is where the 9-volt battery is located.

Factory Settings

The Omnistim® FX² Portable PENS comes with the factory settings defaulted to the PENS I program. This is generally suitable for most patients. The following chart shows the available channel configurations.

PROGRAM	PROTOCOL	USER ADJUSTABLE PARAMETERS		
PENS 1	UE BIPHASIC PENS	PHASE DURATION Range = 50 to 120μs Default = 70 μs	CYCLE TIME 0.6, 1.5 sec	TREATMENT TIME Range = 1 to 30 min Default = 20 min
PENS 2	UE TRIPHASIC PENS		N/A	
PENS 3	LE TRIPHASIC PENS			
TENS 1	MFAC SENSORY	TREATMENT TIME Range = 1 to 30 min Default = 30 min		
TENS 2	MFAC MOTOR			
TENS 3	MFAC MOTOR-SENSORY			

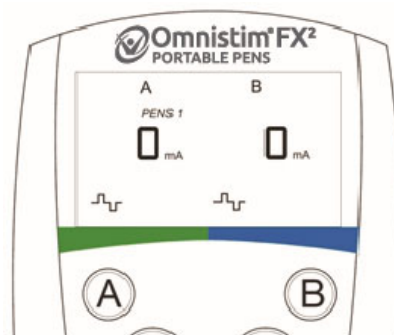
DEFAULT	PROGRAM	PHASE DURATION	TREATMENT TIME
PROGRAM BUTTON A	PENS 1	70 µs	20 min
PROGRAM BUTTON B	TENS 1		30 min

Professional Programming Sequence

1. Press the on/off button (1) to power on the device.

At power on, the display will default to the factory loaded PENS 1 program (UE Biphasic). PENS 1 is a two channel program requiring adjustment of both channel A (4) and channel B (5). It may be necessary to change the default parameters and/or settings to meet the patient's specific needs.

2. To program the device for another program/protocol, press and hold the Program Button A (2) for 5 seconds to enter the programming mode. In the programming mode, the program "PENS 1" will flash. Use the (+) (-) buttons (4) to toggle between the six programs/protocols available on the Omnistim® FX² Portable PENS.
3. To move to the next setting, press the Program Button A (2) one time. This will take you to the next programmable setting. Use the (+) (-) buttons (4) to change the default settings, as needed. Repeat this step until all default parameters are programmed.
4. To program a second program/protocol, press and hold the Program Button B (3) for 5 seconds to enter the programming mode for the second program/protocol.
5. In the programming mode, the program "TENS 1" (MFAC Sensory) will flash. Use the (+) (-) buttons (5) to toggle between the six programs/protocols available on the Omnistim® FX² Portable.
6. To move to the next setting, press the Program Button B (3) one time. This will take you to the next programmable setting. Use the (+) (-) buttons (5) to change the default settings, as needed. Repeat this step until all default parameters are programmed.
7. Once complete, press the on/off button (1) to power down the device. The new settings will be saved as the new "default program" that starts the next time the device is powered on.



NOTE: The settings will not be saved unless the unit is powered down following programming.

NOTE: The above settings cannot be accessed during operation and are only available following the start up screen. To reset to factory settings, press and hold both Program Buttons A + B for 5 seconds.

Patient Operational Sequence

Follow the sequence below. The number in parenthesis references the location of the button from the control section on the previous page.

1. Install battery in compartment located on the back of the unit (9).
2. Connect lead wires to corresponding bar code under the display window (green lead wire in the left input (6), blue lead in the right input (7)).
3. Wash the skin with water, (use soap if dirty).
4. Connect black unit lead wires to white electrode wires.
5. Press the power on/off button (1) to power on the device.
6. At power on, the display (8) will default to the pre-set program selected for your condition.
 - a. If a second program has been ordered by your physician, press Program Button B (3) to access the additional program.
 - b. To return to the first program, press Program Button A (2).
7. Apply electrodes to treatment area prescribed by your physician or therapist.
8. Adjust stimulation intensity to level prescribed by your physician or therapist.
 - a. Increase / decrease (4) Output A. Press (+) button to increase intensity in channel A. Press the (-) button to decrease intensity in channel A.

NOTE: If the channel indicator flashes and/or you see this symbol you must resolve the problem and then reset the output level. (See troubleshooting section).



Caution/Attention

- b. Increase / decrease (5) Output B. Press (+) button to increase intensity in channel B. Press the (-) button to decrease intensity in channel B. **See Note above**

NOTE: Shortly after reaching the desired intensity setting, the unit will lock the setting preventing an accidental increase in the intensity. A lock icon will be indicated on the display. To unlock, you must first press the (-) button to decrease the intensity, and then press the (+) button to increase the intensity to the new desired level. If you see the decrease output symbol you must press (-) button to decrease the intensity, and then press the (+) button to increase the intensity to the new desired level.



Lock



Decrease

9. The treatment timer will automatically end the treatment in the time prescribed. Treatment ends when bars show up on the display (8).
10. Turn the unit off by pressing the Power Button (1).
11. Remove the stimulation electrodes. Repack the re-useable electrodes into their foil pouch electrodes and follow the directions on the label for electrode care and storage.

NOTE: If you are using single use electrodes, discard after each use.
12. Clean unit with ACP Germicidal Wipes.
13. Store unit in carrying case.
14. Record treatment activity and setting on form provided.



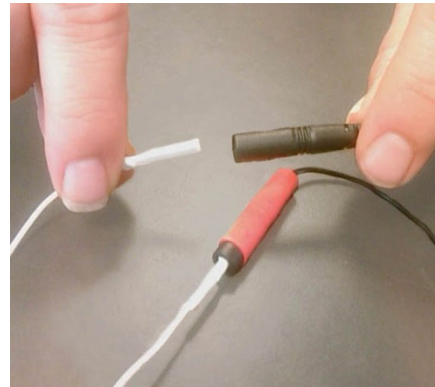
- 1). Install battery in compartment located on the back of the unit.



- 2). Connect lead wires to corresponding bar code under the display window (green lead wire in the left input, blue lead in the right input).



- 3). Wash the skin with water (use soap if dirty).



- 4). Connect black unit lead wires to white electrode wires.



- 5). Press the power on/off button to power on the device.



- 6). Select Program Button A or Program Button B as directed by your physician or therapist.



- 7). Apply electrodes to treatment area prescribed by your physician or therapist.



- 8). Adjust stimulation intensity to level prescribed by your physician or therapist.



NOTE: To readjust stimulation intensity, remove the lock by pressing (-) Button and then (+) Button to preferred level.



- 9). Treatment is completed when bars appear in the Display Window.



- 10). Remove the stimulation electrodes. Repack the re-useable electrodes into their foil pouch electrodes and follow the directions on the label for electrode care and storage.

NOTE: If you are using single use electrodes, discard after each use.



- 11). Turn the unit off by pressing the Power Button.



12). Clean unit with ACP Germicidal Wipes.



13). Store the device in carry case.



14). Record treatment activity and setting on form provided.

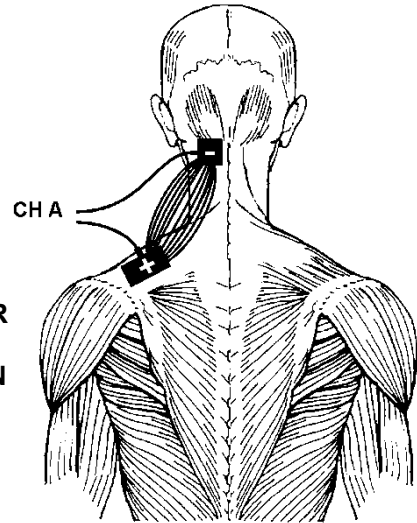
Electrode Application Techniques

The following electrode placement diagrams are a general representation of treatment set-ups using the Omnistim® FX² Portable (monopolar and bipolar techniques are illustrated). Electrode placement is dependent on the etiology of the condition.

Monopolar (Mono-Polar) Technique

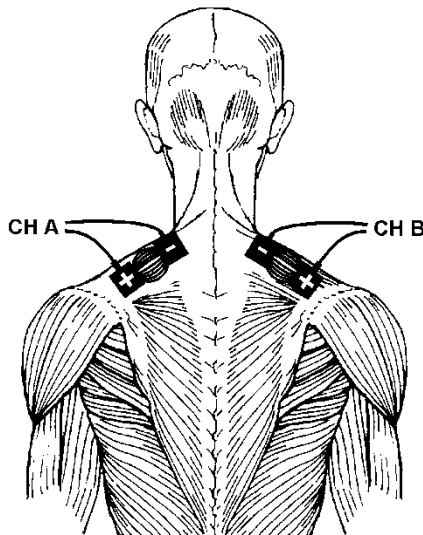
This technique may use two electrodes of different sizes. The smaller or “active” electrode can be positioned over the segmental innervation or peripheral nerve path of the involved tissue, or over a distal location overlying any muscle that is not an antagonist to the muscle being stimulated.

CERVICAL MONOPOLAR PLACEMENT OF ELECTRODES FOR PAIN MANAGEMENT



Bipolar (Bi-Polar) Technique

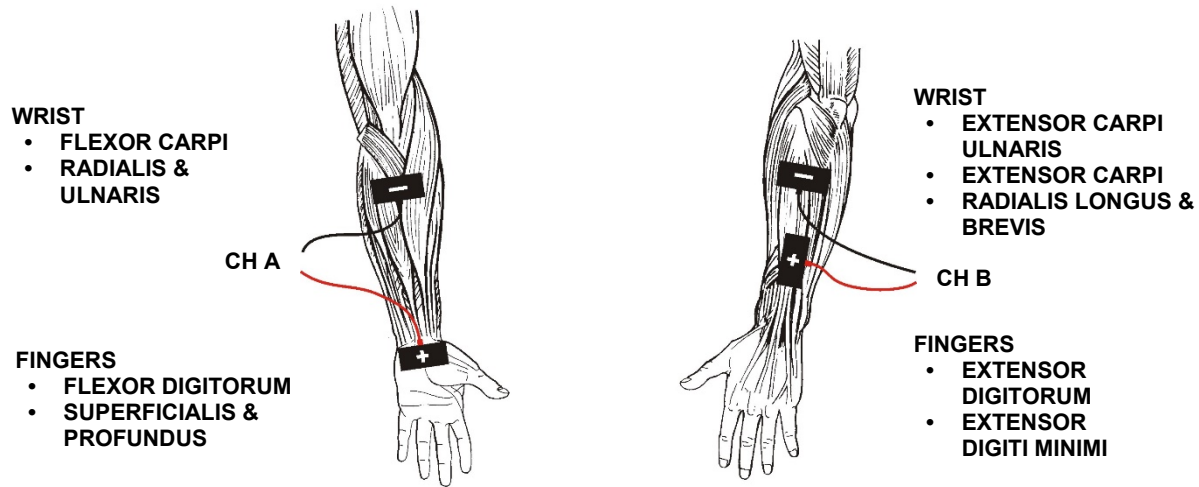
This is the most commonly used technique for muscle stimulation or pain management. This technique utilizes two electrodes but not exclusively of the same size. One electrode should be applied over the motor point and the other electrode over the belly of the muscle as far away from the motor point as possible. This technique allows for more effective muscle and nerve fiber recruitment since the entire neural innervation of the muscle is furnished with current.



CERVICAL BIPOLAR PLACEMENT OF ELECTRODES

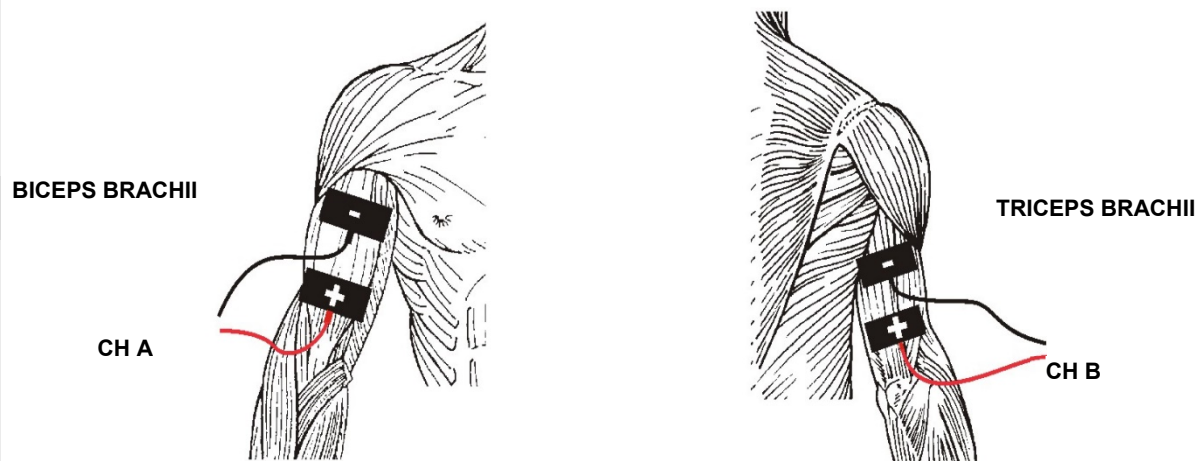
PENS Neuro Re-Education Techniques

WRIST AND FINGER FLEXION AND EXTENSION



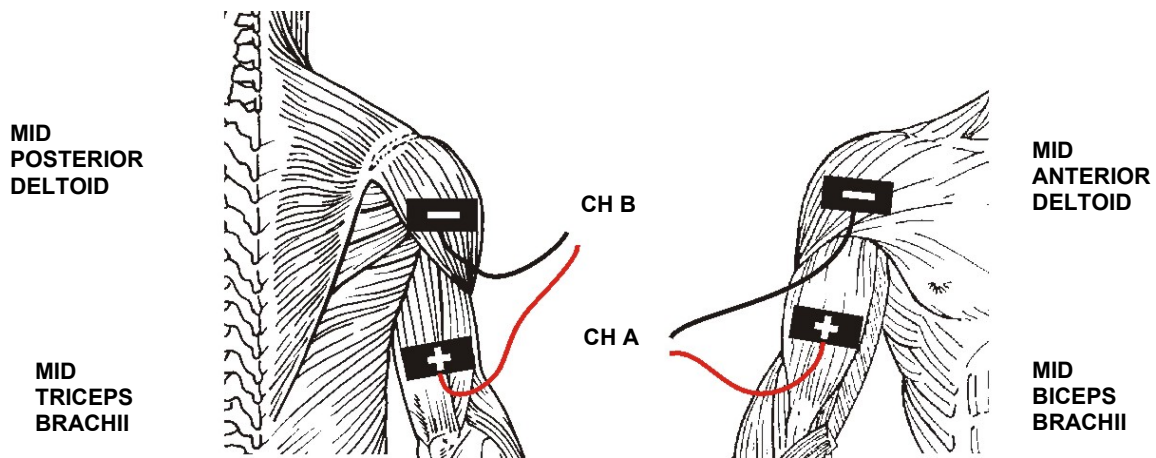
- PATIENT IS PASSIVE DURING STIMULATION

ELBOW FLEXION AND EXTENSION



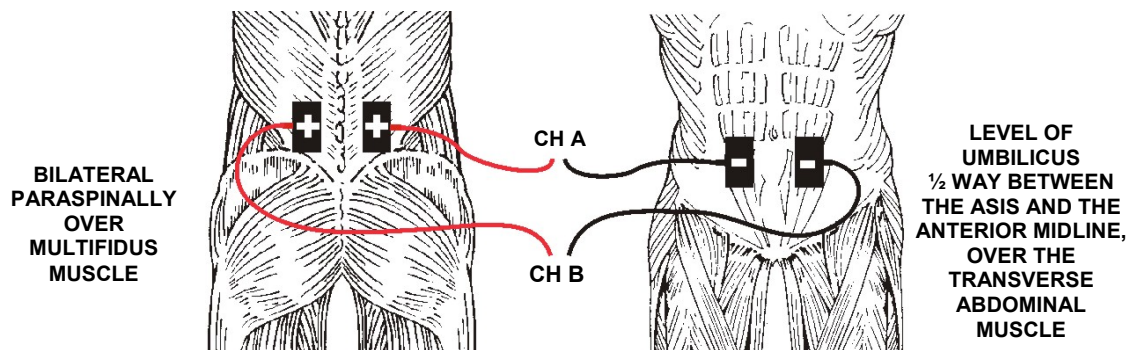
- PATIENT IS PASSIVE DURING STIMULATION

SHOULDER FLEXION AND EXTENSION



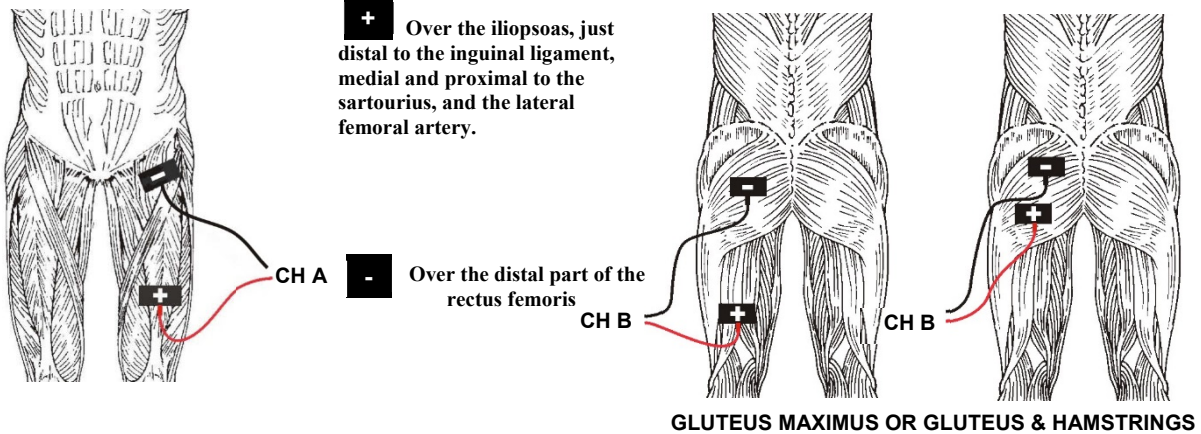
- PATIENT IS PASSIVE DURING STIMULATION

LUMBAR STABILIZATION



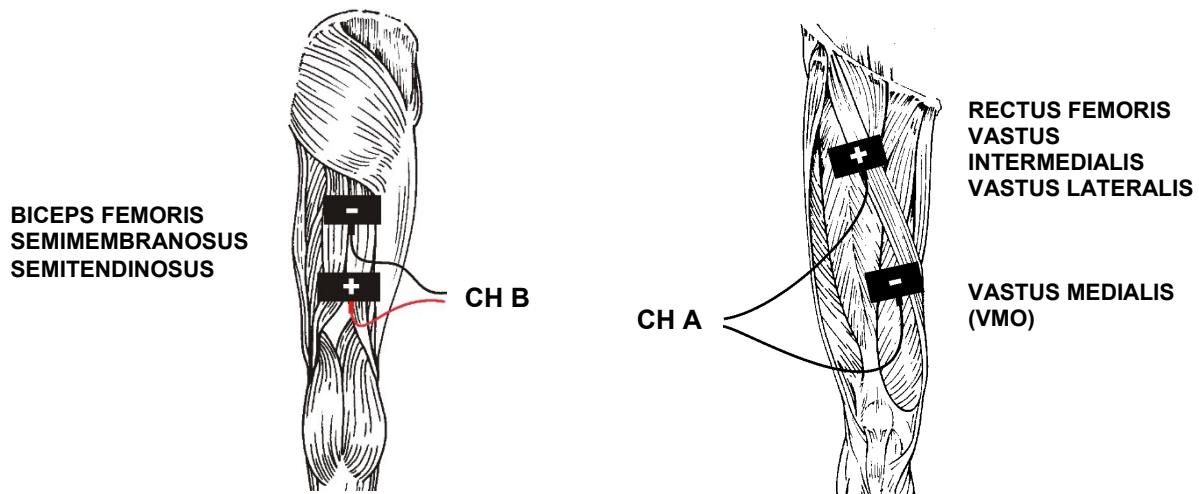
- PATIENT IS PASSIVE DURING STIMULATION
- FOR UNILATERAL INVOLVEMENT, APPLY CH A TO THE MOST INVOLVED SIDE

HIP FLEXION AND EXTENSION

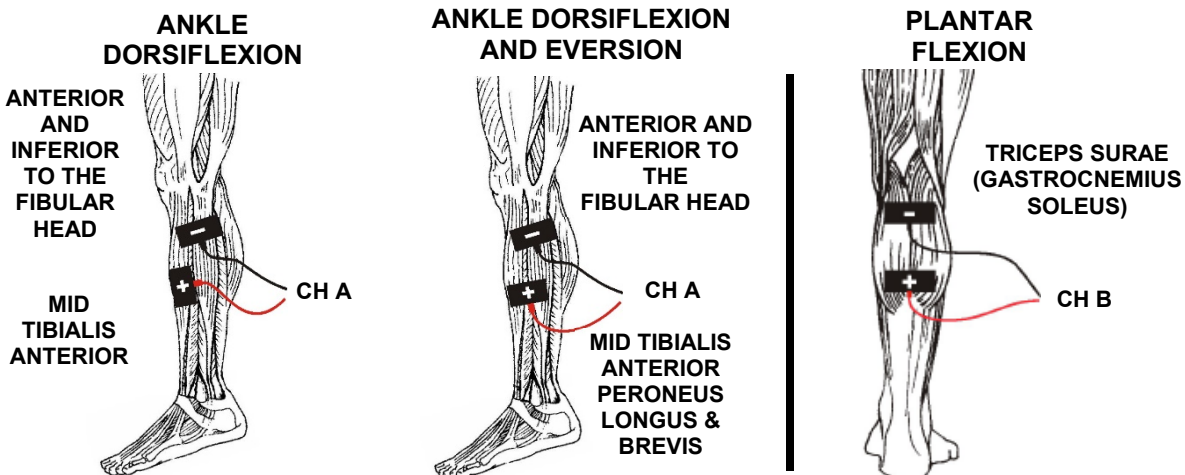


- PATIENT IS PASSIVE DURING STIMULATION
- PATIENT NEEDS TO BE SUPINE WITH HIPS EXTENDED

KNEE FLEXION AND EXTENSION



- PATIENT IS PASSIVE DURING STIMULATION



- PATIENT IS PASSIVE DURING STIMULATION IN A RELAXED TOE DOWN POSITION
- TO ACCOMPLISH A TOE DOWN POSITION WHILE SEATED: PLACE A TOWEL ROLL UNDER HEEL, PLACE A PILLOW UNDER THIGH, RAISE SEAT HEIGHT

Treatment Preparation

Treatment Site / Skin Inspection

Thoroughly cleanse the treated area with soap and water to remove oils, creams, dirt, and sweat; this will ensure uniform current conduction across the skin. After cleansing, inspect and evaluate the skin's integrity and sensation prior to treatment. Avoid absent or diminished sensation; if unavoidable, treat with caution. Establishment of acceptable intensity levels for desensitized areas may be related to the intensity levels tolerated on normal skin in opposite or related body parts. Frequently monitor the intensity level and skin response during all treatments.

Stinging, burning or other painful sensation under the electrodes on normal or desensitized areas is an indication of increased current density under part or the entire electrode surface. In this case, slowly but immediately reduce the current intensity to zero; remove the electrodes to inspect the surface skin. Recheck your application techniques.

Immediately after treatment, clean and thoroughly inspect the skin under the electrode. Peripheral vasodilatation along with systemic vasomotor responses can lead to redness (hyperemia) directly under both electrodes. Inform the patient of this normal after effect and that the redness will disappear within an hour or two. Apply topical agents to the reddened area under the electrodes if needed to decrease post-treatment irritation. Persistent skin irritation could be due to repeated stimulation of the same electrode site or a possible allergic reaction to the conductive mediums, tapes, elastic wraps, and/or cleaning and disinfectant solutions. Therefore, use additional electrode stimulation sites to decrease or eliminate skin irritation on electrically sensitive patients. If skin irritation persists with alternate site applications, decrease the treatment times and lower the intensities; if necessary, discontinue treatment. If an allergic reaction is suspected, attempt to identify and change the allergic substance(s). If skin irritation persists, discontinue treatment until the source of irritation is determined.

By far the most common error with reported faulty machines is inadequate or improper conductive medium interface or lead wire breakage. Because of the increased current density available with pulsed or continuous medium frequency currents, a proportionally greater degree of conductive medium interface problems exists and should be monitored by the clinician.

ACP Reusable Pre-gelled Surface Electrodes

Remove the electrodes from their foil packaging. Connect the electrodes to the device. Cleanse the skin, and then apply the electrodes over the treatment site points according to the electrode placements techniques described in this manual. Various sizes of electrodes are available dependent upon muscle size of the area to be treated. Follow the enclosed infection control procedures. Review the warnings and application directions on the electrode packaging.

Lead Wires

Inspect the full length of the lead wires for signs of frayed or cut wires and loose connections where the lead wires join the jack plug and tip pins. Insert the plug completely. Allow the lead wires to hang freely with no excessive strain on the connector.

NOTE: *The use of conductive mediums other than specifically approved pre-gelled or self adhering electrodes such as ultrasound gel or lotion, hand or body lotion, electrolyte spray mist, paper towels, non-approved reusable or disposable pre-gelled or self-adhering electrodes—are contraindicated for use with OMNISTIM® Systems.*

INFECTION CONTROL EQUIPMENT AND PRINCIPLES OF USE

Definitions

- **Barrier Film** – One-time use, disposable plastic film for use over touch/operator surfaces of equipment to reduce risks of cross-contamination and need for high level disinfection of equipment between patients.
- **Germicidal Disposable Wipe** – Low level and/or intermediate level disposable germicidal disinfectant wipe for use on electrotherapeutic devices and accessories.
- **Plastic Lead Wire Sleeve** – Barrier to be used on electrical stimulation lead wires, covering the junction of lead wire and electrode wire.

Universal Precautions – Body Substance Isolation

Universal Precautions (UP) must be implemented in the care of all patients to protect employees from occupational exposure to blood borne pathogens. Personal protective equipment (gloves, masks, gowns) should be available and worn by staff when occupational exposure to blood, body fluids containing blood, semen and vaginal secretions is likely to occur. Health care workers with exudating lesions or weeping dermatitis should refrain from all direct patient care and from handling patient care equipment until the condition resolves. Equipment must be cleaned/disinfected and protective barriers used when appropriate.

Cleaning / Disinfecting of the OMNISTIM® FX² PORTABLE

Modality equipment shall be cleaned / disinfected per facility infection control policy. ACP recommends the following guidelines:

Cleaning and Low Level Disinfection

This is a recommended daily housekeeping practice to keep the equipment clean and free of contaminants which could contribute to transmission of infection. The following practices are recommended for use when treating intact skin without the presence of physiologic fluids such as blood and urine.

- Clean equipment daily with ACP germicidal wipes. At the end of the day, wipe common contact surfaces, such as control panel and lead wires, with germicidal disposable wipe and allow to air dry. This technique will inactivate *M. tuberculosis* as well as most bacteria and viruses. This will also facilitate removal of organic material contaminants from equipment.
- Disposable/reusable electrodes are for individual patient use only and should not be used on multiple patients.

Intermediate Level Disinfection and Barriers

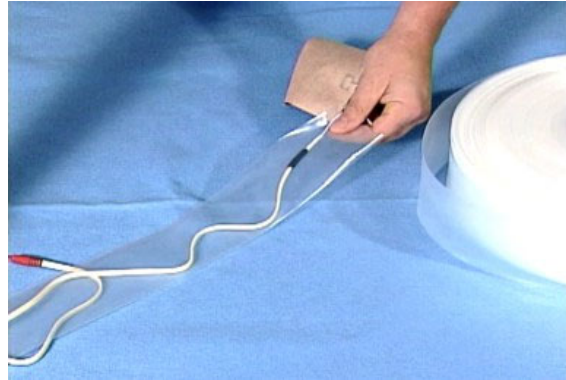
This method is recommended to keep the equipment clean and free of contaminants when used between patients for treatment of non-intact skin or incontinence management, where there is an increased risk of patient cross-contamination. The following are the recommended practices.

- After each use, clean common contact surfaces, such as control panel and lead wires with ACP germicidal wipes.
- With a second ACP germicidal cloth, wipe again leaving surfaces wet for at least 5 minutes. Allow the surface to air dry before patient use.
- Barriers should also be used on the equipment for treatment of non-intact skin or incontinence management. This technique will inactivate *M. tuberculosis* as well as most bacteria and viruses.

Use of Barriers – Intermediate Level Disinfection

The use of an all-purpose barrier film provides surface protection from cross-contamination resulting from a variety of applications. This precaution should be used whenever dealing with non-intact skin or the chance of coming in contact with bodily fluids. Barrier film is designed to cover any surface that may be touched during a patient treatment, in order to help prevent cross-contamination. Barrier film is for single-use only. The film is discarded after each patient treatment. The procedure for use is as follows:

1. Wash hands.
2. Apply Intermediate Level Disinfection prior to barrier application.
3. Select, tear or cut with clean scissors a length of barrier film to fit over the operator surfaces of the Omnistim® FX² Portable unit.
4. Select and cut with clean scissors a 2-foot length of plastic sleeve and fit over the lead wire and the electrode cabling.
5. Prepare any items which may become in contact with the therapist during treatment, such as ultrasound gel, pens, assessment tools, cart handles, etc.
6. Set up the patient per guidelines for the procedure.
7. Provide treatment as appropriate.
8. Discard all disposables.
9. With clean gloves, remove the plastic film from the unit and discard.
10. Remove the plastic sleeve from the lead wire by sliding it toward the electrode. Remove the electrode and discard with the sleeve.
11. Intermediate disinfect the Omnistim® FX² Portable unit prior to the next treatment application.



MODES OF OPERATON **Protocol Reference Sheet** **OMNISTIM® FX² PORTABLE PENS**

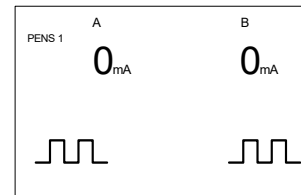
PROTOCOL / CLINICAL INDICATION	STIMULATION PARAMETERS	MECHANISM OF ACTION	PROGRAM USAGE	APPLICATION TECHNIQUE
PENS 1 - NMES UE BIPHASIC PENS	70 µS phase duration Biphasic EMG Pattern Treatment time of 20 minutes	Patterned Electrical Neuromuscular Stimulation (PENS) is a precise reproduction of EMG firing patterns of muscle agonist and antagonist pairs. The stimulation helps to re-establish proper firing sequence in the spinal and supraspinal central pattern generators, re-educating neuromuscular function. The PENS programs help re-boot the sense position system and neuromuscular junction to improve recruitment and muscle function. It should be used prior to Therex to improve recruitment and motor performance. It's also used to decrease spasticity and muscle tone.	This program is used to re-educate U.E. agonist - antagonist muscle pairs for reciprocal movement such as pursing the lips, chewing, and for the treatment of torticollis.	Place the (+) and (-) electrodes over the agonist and antagonist muscle pair to be treated. In patients with severe disuse atrophy, decreased sensation or inflammation use a sensory level of stimulation for the first two weeks of treatment. This can be followed increased to a moderate muscle twitch during the next 4-6 weeks of treatment.
PENS 2 - NMES UE TRIPHASIC PENS	70 µS phase duration Triphasic EMG pattern Treatment time of 20 minutes		This program is used to re-educate U.E. agonist and antagonist muscle pairs where fine motor control and positioning is required.	
PENS 3 - NMES LE TRIPHASIC PENS	70 µS phase duration L.E. Triphasic EMG Pattern Treatment time of 20 minutes		This program is used to re-educate L.E. agonist and antagonist muscle pairs where fine motor control and positioning is required.	
TENS 1 – MFAC SENSORY	Treatment time of 30 minutes	Sensory stimulation activates A-beta fibers causing the release of spinal Enkephalin and Dynorphin to block pain at the segmental level (Gate Control). Duration of relief is typically from 30 min to 2 hrs. Fast onset of relief usually within 15-20 minutes.	Symptomatic relief of superficial and deep pain from localized dermatome or segmental origin. Target tissue - superficial and deep.	Bilateral or unilateral bipolar placement through the painful area or over the involved spinal segments. Apply parallel to incision line for post op pain management. Set intensity to elicit a pleasant tingling sensation, just below muscle contraction.
TENS 2 – MFAC MOTOR	Treatment time of 30 minutes	Motor level stimulation activates motor and A-delta fibers causing the release of Endorphin systemically. Duration of relief is typically from 2-6 hours. Slow Onset of relief usually within 15 minutes to 1 hour	Symptomatic relief of superficial and deep pain with inflammation, and pain of generalized or multi-segmental nature. Target tissue - superficial and deep.	Bipolar placement over local and distal acu / trigger points; bilateral or unilateral over area of local pain; or spinal segment. Set intensity to elicit a moderate muscle twitch.
TENS 3 – MFAC MOTOR SENSORY	Treatment time of 30 minutes	Combines motor and sensory stimulation. Starts with motor and ends with sensory. More aggressive protocol. Duration of relief is typically from 2-6 hours. Slower onset of relief usually within 15-30 minutes.	Symptomatic relief of superficial and deep pain with inflammation, and pain of local, generalized single or multi-segmental nature. Target tissue - superficial and deep.	Bipolar placement over local and distal acu / trigger points; bilateral or unilateral over area of local pain; or spinal segment. Set intensity to elicit a moderate muscle twitch.

OMNISTIM® FX² PORTABLE PENS PROGRAM MENU

Neuro Re-Ed

A. PENS 1 – UPPER EXTREMITY BIPHASIC PENS

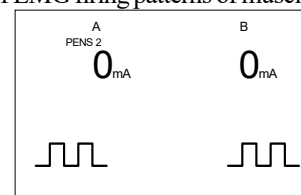
This program is used to re-educate upper extremity agonist - antagonist muscle pairs to enhance reciprocal and fast movement. It is called biphasic because the agonist fires first followed by the antagonist. Due to reciprocating action of the muscle groups there is no third phase. Functional task simulation is reciprocal movement such as typing, boxing, piano playing, swimming, upper extremity positioning speed walking, rowing, etc. Patterned Electrical Neuromuscular Stimulation (PENS) is a precise reproduction of EMG firing patterns of muscle agonist and antagonist pairs. The stimulation helps to re-establish proper firing sequence in the spinal and supraspinal central pattern generators, re-educating neuromuscular function. PENS helps re-boot the sense position system and neuromuscular junction to improve recruitment and muscle function. It should be used prior to Therex to improve recruitment and motor performance. It's also used to decrease spasticity and muscle tone.



User Adjustable Parameter (Y/N)	Order in Parameter Set Loop	Parameter Name	Adjustable Range (unit)	Default (unit)
Y	2	PHASE DURATION	50 to 120 (μs)	70 (μs)
N	1	CYCLE TIME	0.6 or 1.5 (sec)	0.6 (sec)
N		PULSE RATE		50 (Hz)
Y	3	TREATMENT TIME	1 to 30 (min)	20 (min)

B. PENS 2 – UPPER EXTREMITY TRIPHASIC PENS

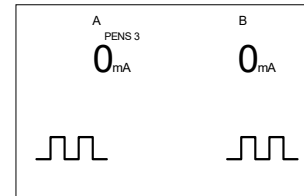
This program is used to re-educate upper extremity agonist - antagonist muscle pairs where fine motor control and positioning is required. It is called triphasic because the agonist fires first, followed by the antagonist followed by a small burst of agonist muscle to slow down the antagonist and position the joint. Patterned Electrical Neuromuscular Stimulation (PENS) is a precise reproduction of EMG firing patterns of muscle agonist and antagonist pairs. The stimulation helps to re-establish proper firing sequence in the spinal and supraspinal central pattern generators, re-educating neuromuscular function. PENS helps re-boot the sense position system and neuromuscular junction to improve recruitment and muscle function. It should be used prior to Therex to improve recruitment and motor performance. It's also used to decrease spasticity and muscle tone.



User Adjustable Parameter (Y/N)	Order in Parameter Set Loop	Parameter Name	Adjustable Range (unit)	Default (unit)
Y	1	PHASE DURATION	50 to 120 (μs)	70 (μs)
N		CYCLE TIME		1.5 (sec)
N		PULSE RATE		50 (Hz)
Y	2	TREATMENT TIME	1 to 30 (min)	20 (min)

C. PENS 3 – LOWER EXTREMITY TRIPHASIC PENS

This program is used to re-educate lower extremity agonist - antagonist muscle pairs where fine motor control and positioning is required. It is called triphasic because the agonist fires first, followed by the antagonist followed by a small burst of agonist muscle to slow down the antagonist and position the joint. Patterned Electrical Neuromuscular Stimulation (PENS) is a precise reproduction of EMG firing patterns of muscle agonist and antagonist pairs. The stimulation helps to re-establish proper firing sequence in the spinal and supraspinal central pattern generators, re-educating neuromuscular function. PENS helps re-boot the sense position system and neuromuscular junction to improve recruitment and muscle function. It should be used prior to Therex to improve recruitment and motor performance. It's also used to decrease spasticity and muscle tone.



User Adjustable Parameter (Y/N)	Order in Parameter Set Loop	Parameter Name	Adjustable Range (unit)	Default (unit)
Y	1	PHASE DURATION	50 to 120 (μs)	70 (μs)
N		CYCLE TIME		1.5 (sec)
N		PULSE RATE		50 (Hz)
Y	2	TREATMENT TIME	1 to 30 (min)	20 (min)

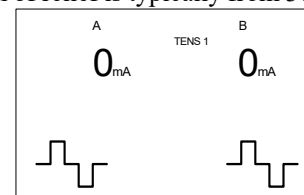
Procedure

Gradually increase intensity to a comfortable muscle twitch contraction. The treatment should last approximately 20 minutes and be applied 3 to 4 times a week or as needed to increase re-educate the affected muscle group. The twitch intensity may be adjusted based on the patient's degree of neural wind down. With patients with severe atrophy, use sensory stimulation for the first two weeks of treatment. Subsequently adjust the output to motor twitch. These patient may benefit from a course of patterned stimulation first prior to more aggressive muscle stimulation.

Pain Control

A. TENS 1 – MFAC SENSORY

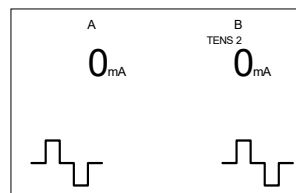
This program is used for symptomatic relief of superficial and deep pain from localized dermatome or segmental origin. Sensory stimulation activates A-beta fibers causing the release of spinal Enkephalin and Dynorphin to block pain at the segmental level (Gate Control). Duration of relief is typically from 30 minutes to 2 hours. Fast onset of relief usually within 15-20 minutes. Target tissue is superficial and deep. Bilateral or unilateral bipolar application through the painful area or over the involved spinal segments. Apply parallel to incision line for post operative pain management. The intensity should be set to elicit a pleasant tingling sensation, just below a muscle contraction.



User Adjustable Parameter (Y/N)	Order in Parameter Set Loop	Parameter Name	Adjustable Range (unit)	Default (unit)
N		CARRIER FREQ		5.0 (kHz)
N		PULSE WIDTH		70 μs
N		BURST FREQUENCY		100 (Hz)
N		BURST RATE SCAN		20 (%)
N		RATE SCAN		ON
N		RATE SCAN TIME		20 (s)
Y	1	TREATMENT TIME	1 to 30 (min)	30 (min)

B. TENS 2 – MFAC MOTOR

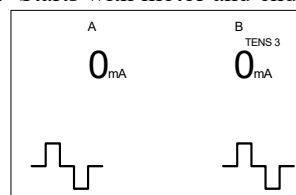
Provides symptomatic relief of superficial and deep pain with inflammation, and pain of generalized or multi-segmental nature. Motor level stimulation activates motor and A-delta fibers causing the release of Endorphin systemically. Duration of relief is typically from 2 to 6 hours. Slow onset of relief usually within 15 minutes to 1 hour. Target tissue is superficial and deep. Bipolar placement over local and distal acu / trigger points, bilateral or unilateral over area of local pain, or at involved spinal segment. The intensity should be set to elicit a moderate muscle twitch.



User Adjustable Parameter (Y/N)	Order in Parameter Set Loop	Parameter Name	Adjustable Range (unit)	Default (unit)
Y		CARRIER FREQ		5.0 (kHz)
N		PULSE WIDTH		100µs
Y		BURST FREQUENCY		2.0 (Hz)
N		BURST RATE SCAN		50 (%)
N		RATE SCAN		ON
N		RATE SCAN TIME		20 (s)
Y	1	TREATMENT TIME	1 to 30 (min)	30 (min)

C. TENS 3 – MFAC MOTOR SENSORY

Provides symptomatic relief of superficial and deep pain with inflammation, and pain of local, generalized single or multi-segmental nature. Combines motor and sensory stimulation. Starts with motor and ends with sensory. This is a more aggressive protocol. Duration of relief is typically from 2 to 6 hours. Slower onset of relief usually within 15 to 30 minutes. Target tissue is superficial and deep. Bilateral or unilateral bipolar placement over local and distal acu / trigger points, over area of local pain, or at involved spinal segment. The intensity should be set to elicit a moderate muscle twitch.



User Adjustable Parameter (Y/N)	Order in Parameter Set Loop	Parameter Name	Adjustable Range (unit)	Default (unit)
N		CARRIER FREQ		5.0 (kHz)
N		PULSE WIDTH		90µs
N		BURST FREQUENCY		15.0 & 2.0 (Hz)
N		BURST RATE SCAN		50 (%)
N		RATE SCAN		ON
N		RATE SCAN TIME		20 (s)
Y	1	TREATMENT TIME	1 to 30 (min)	30 (min)

TROUBLESHOOTING

The following table lists machine problem symptoms and possible areas to check for the problem causes. If these suggested measures do not correct the machine malfunction, call your ACP Customer Support representative.

PROBLEM	CAUSE	REMEDY
Unit will not power on	- No batteries - Low batteries	- Install batteries - Replace batteries - Verify type of batteries - Inspect battery contacts
Display shows low battery symbol	Battery voltage is too low	Replace batteries for future use
Channel indicator flashing and caution symbol is displayed	- Batteries are too low to perform treatment - Lead wires not properly connected - Lead wire to electrode not connected - Improper skin preparation	- Replace batteries - Replace lead wire(s) if defective - Properly connect leads as needed - Properly prepare skin prior to treatment
Patient feels surging or spiking sensation	- Lead wire(s) breakage - Electrode(s) lead wire breakage	- Replace lead wire(s) if defective - Replace electrode(s)
Patient cannot detect output	- Failure of lead wire(s) - Electrode(s) failure, or gel dried out - Device failure	- Replace lead wire(s) if defective - Remove electrode(s) and replace if necessary - Contact ACP customer service

Symbols



Caution or Attention. There is a problem. No patient detected.



Output locked. Decrease output to unlock then increase output.



Reduce output before increasing the channel to desired level.

Inspect Battery Contacts

1. Remove batteries if they are installed.
2. Inspect the battery contacts for any corrosion or discoloration. If corrosion or discoloration is found, clean the contact with emery cloth or fine grit sandpaper to remove the corrosion.
3. Verify the battery door closes correctly. The door should lock into place when closed.

Service Center

For repair or service of ACP Products and accessories, please call (800) 350-1100 and follow the prompts. Normal hours of operation are 6:00am to 5:00pm Pacific Standard Time. After hours, please leave a message and a technician will return your call during the next scheduled workday.

TECHNICAL SPECIFICATIONS

GENERAL:	
Dimensions:	1.5" (38mm) D x 2.5" (65mm) W x 5.4" (137mm) H
Weight (Including batteries):	0.35lbs. (0.16kgs)
Operating Power:	9V alkaline
Battery Life:	New alkaline batteries operate the system for 40 hours at full output and over 100 hours at normal settings. Battery voltage emblem is displayed when battery low voltage is indicated.
Display System:	LCD Display
Push Buttons:	Polyester embossed overlay for tactile feel and infection control.
System Memory:	The system remembers all prior custom settings from treatment to treatment in non-volatile memory.
System Architecture:	CMOS integrated micro-controller with on board memory and instruction set.
STIMULATION SYSTEM:	
Output:	Constant current up to maximum preset current limit of 60mA or 100mA into a 500 ohm load.
PENS (PATTERNED ELECTRICAL NEUROMUSCULAR STIMULATION) PROGRAMS:	
Waveform:	Asymmetric Biphasic Pulsed Current 0-60mA average single pulse peak current into a 500 ohm load.
Phase Duration:	Set at 70 μ s; Variable from 50 μ s to 120 μ s
Pulse Rate:	Set at 50 Hz burst pattern
TENS (MEDIUM FREQUENCY CURRENT) PROGRAMS:	
Carrier Frequency:	Output channel A, or B fixed at 5.0 KHz. Modulated at Burst Rate.
Burst Rate:	Three programs, Sensory 80-120 BPS, Motor 2-15 BPS, Sensory Motor 15-2-100 BPS
Rate Scan:	0-20 seconds for rate sweep
TIMER FUNCTIONS:	
Treatment Timer:	Set to 15 minutes by default; Adjustable for 1-30 minutes in one minute increments.

CAUTION: Federal law restricts this device to sale by or on the order of a physician (or other health practitioner licensed by their State).

ACP reserves the right to change technical specifications and product availability without notice.

OMNISTIM® FX² PORTABLE STANDARD AND OPTIONAL ACCESSORIES

ITEM	ITEM NO.	DESCRIPTION
	300200A	OMNISTIM® FX² PORTABLE PENS Offers 2 channels of programmable stimulation with PENS and TENS programs.
	28126	OMNISTIM® FX² PORTABLE PENS Hard Carry Case
	59762	9V Alkaline battery
	38155	2x2 Reusable E-stim Electrodes (4 ea/pkg, 10 pkg/bx)
	61227	2x4 Reusable E-stim Electrodes (4 ea/pkg, 10 pkg/bx)
	https://acplus.com/acp-technology-user-manuals	OMNISTIM® FX² PORTABLE PENS <i>Professional</i> User Manual
	https://acplus.com/acp-technology-user-manuals	OMNISTIM® FX² PORTABLE PENS <i>Patient</i> User Manual

Infection Control Supplies

ITEM	ITEM NO.	DESCRIPTION
	55536	Super Sani-Cloth® Wipes, Single Use Packets (50 pkt/bx)
	44425	Super Sani-Cloth® Wipes, Tub (160wipes /tub)
	96849	Sani-Cloth® Wipes w/ Bleach, Tub (75 wipes/tub)
	63574	Barrier Tubing (3" x 1200'/roll)

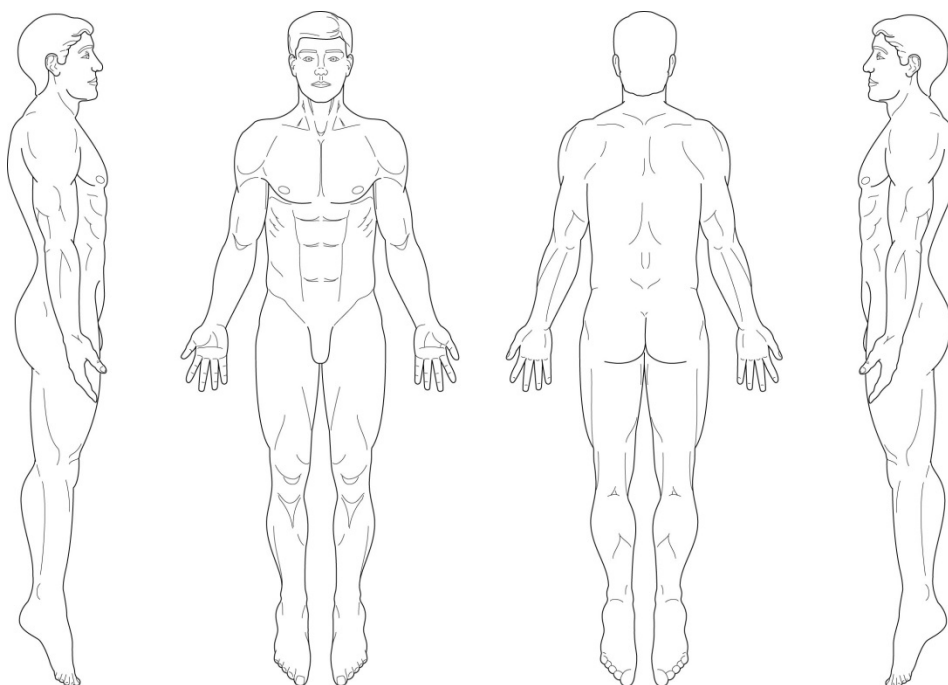
TREATMENT CHART

Mark the prescribed program, button, and intensity prescribed. Place date and time in the column provided, and comment on the intensity level.

[illegible]

ELECTRODE PLACEMENT GUIDE

Provide the patient with the Patient Electrode Placement Guide and indicate the electrode placement for each treatment prescribed. Mark each electrode location with (+) or (-) sign to indicate the polarity of the electrodes, or use red and black marker to identify the color code for each wire. Red represents (+) and Black represents (-). Mark the blue (B) and Green (A) channels.



STANDARD LIMITED PRODUCT WARRANTY

The warranty information provided in this section is applicable only to products purchased from ACP, directly or through an authorized dealer. This section does not apply to leased products. The terms of maintenance and repair of any leased products are detailed in the separately executed agreement between the parties.

Warranty Coverage

This warranty provides coverage, for Equipment purchased, against manufacturer's defects in material and workmanship, and extends to the original owner of the product during the warranty period for that product. Only those items returned to the ACP Service Center within the warranty period, and also within thirty (30) days after notification to ACP of the defect, shall be eligible for repair under the Standard Limited Product Warranty. Buyer is responsible for shipping cost associated with sending the Equipment to the ACP Service Center. ACP shall ship Equipment to Buyer after repair at no cost to the Buyer provided repair is deemed to be under warranty. ACP may, at its discretion and only for valid warranty claim, repair or replace any part(s) that prove to be defective during the warranty period.

Warranty Exclusion

Any and all warranty coverage will be void if any of the following have occurred:

1. The product contains repairs or replacement parts not furnished by ACP.
2. The product is damaged resulting from misuse or negligence.
3. The product has been tampered with and/or altered, including serial number alteration.

Note: Use of the Equipment with accessories and/or supplies not approved by ACPL for use with the Equipment may void the warranty if such accessory or supply item caused damage to the Equipment.

Warranty Period

The following coverage is provided at no additional cost to the Buyer:

New Equipment / Product. Products purchased as new from ACP are warranted against manufacturer's defects in material and workmanship for a period of two (2) years from the date of purchase.

Refurbished Equipment / Product. Products purchased specifically as Refurbished Equipment are warranted against manufacturer's defects in material and workmanship for a period of one (1) year from the date of purchase.

Accessories. All accessories for ACP equipment / products are warranted against manufacturer's defects in material and workmanship for a period of three (3) months from the date of purchase.

Warranty Validation

The following information needs to be provided to the ACP Customer Support representative prior to the product being returned under warranty coverage:

1. Buyer name or account number as it appears under the "Bill TO" on the ACP or recognized ACP Dealer invoice.
2. Invoice Date and Number.
3. Model number, description, and serial number of equipment.
4. Detailed description of the problem.

Return of Defective Equipment

Any Equipment returned to the ACP Service Center under warranty coverage must have the Warranty coverage validated and must receive authorization from ACP Customer Support prior to being received at the Service Center.

Shipping charges, insurance, and any other costs incurred in sending product to ACP Service Center is the responsibility of the customer and will not be refunded. ACP shall cover the shipping charges and related costs to return the unit to the customer, provided repair is deemed to be under warranty.

ACP is not responsible for any loss or damage to the Equipment prior to receipt at the ACP Service Center. Equipment returned for warranty service must be shipped complete with all accessories (except for manuals), in its original packing or equivalent so as not to be damaged while in transit.

Note: Any Equipment sent to the ACP Service Center that is not covered by the ACP Limited Product Warranty is subject to a minimum service and handling fee.

IMPORTANT:

DO NOT SHIP THE EQUIPMENT TO ACP SERVICE CENTER WITHOUT FIRST SECURING AUTHORIZATION TO DO SO. EQUIPMENT SENT IN WITHOUT AUTHORIZATION FROM ACP CUSTOMER SUPPORT WILL NOT BE ACCEPTED.

Returned Materials Shipping Address:

**Accelerated Care Plus
Attn: ACP Service Center
4999 Aircenter Circle, Suite 103
Reno, NV 89502**

Manufactured for ACP by:

 Tic Medizintechnik
Endelner Feld 9
46286 Dorsten,
GERMANY
Tel: + 49-0-2369-2085-0
Fax: + 49-0-2369-2085-720
www.tic-med.de

