

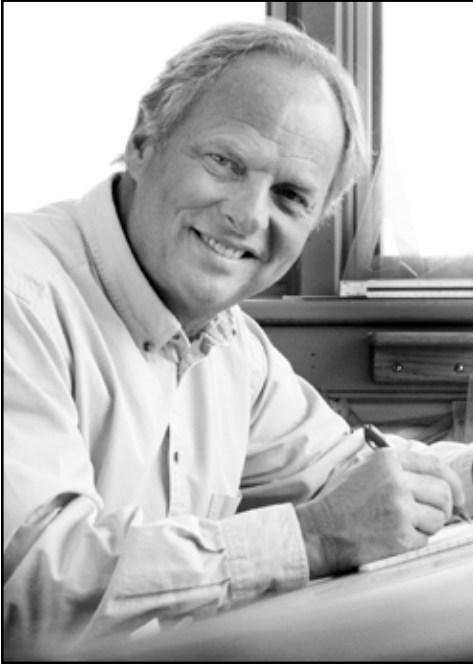


# 550 Owner's Manual



## Table of Contents

<b>Introduction . . . . .</b>	<b>2</b>	<b>Accessories . . . . .</b>	<b>12</b>
<b>Identification of Parts / Motor . . . . .</b>	<b>3-4</b>	<b>Care &amp; Maintenance . . . . .</b>	<b>13-14</b>
<b>Table Assembly . . . . .</b>	<b>5</b>	<b>Motor Troubleshooting . . . . .</b>	<b>15</b>
<b>Headpiece Operation . . . . .</b>	<b>6-8</b>	<b>Warranty . . . . .</b>	<b>16</b>
<b>Table Operation . . . . .</b>	<b>9-11</b>	<b>Overview of Products . . . . .</b>	<b>Back</b>



Thank you for your purchase of a 550 Elevation table.

We are pleased to provide you with an aesthetically beautiful chiropractic adjusting table that is versatile and precisely engineered. It has been thoroughly inspected and tested right down to the smallest detail before leaving our shop. We are confident that it will provide you with many years of reliable service.

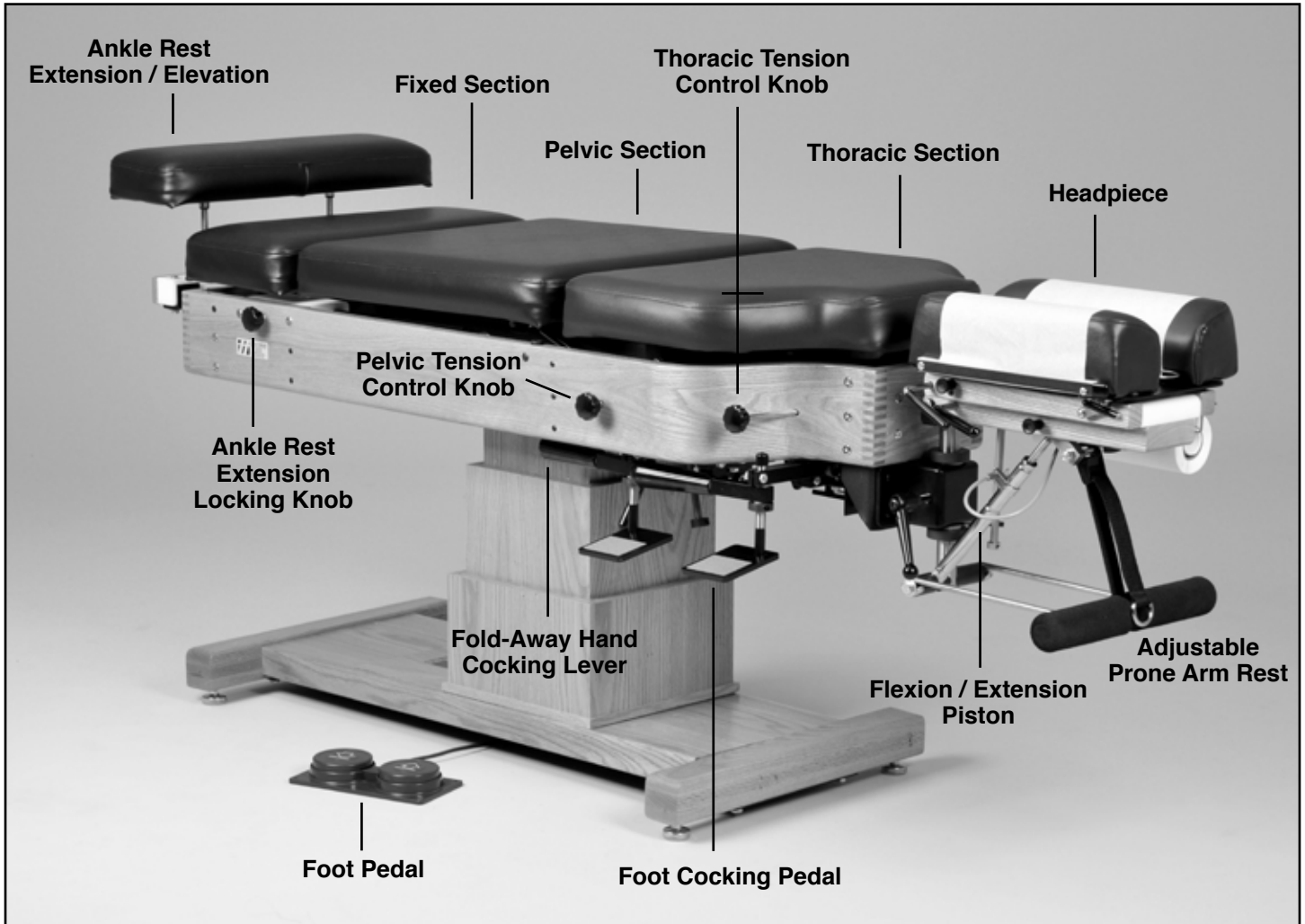
Please take the time to read this manual. It will familiarize you with the table and instruct you on its proper operation and maintenance.

If you have any questions or comments, please contact us.

Sincerely,

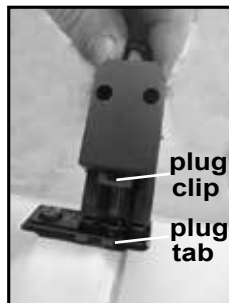
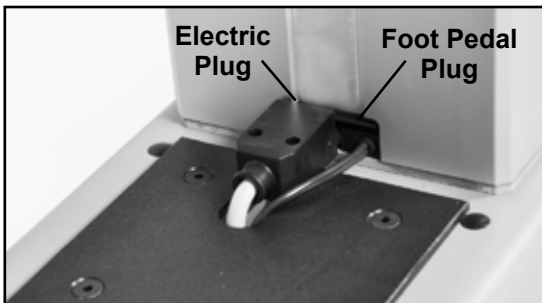
A handwritten signature in cursive script that reads "Rick Thuli".

**Rick Thuli, D.C.**  
**President**



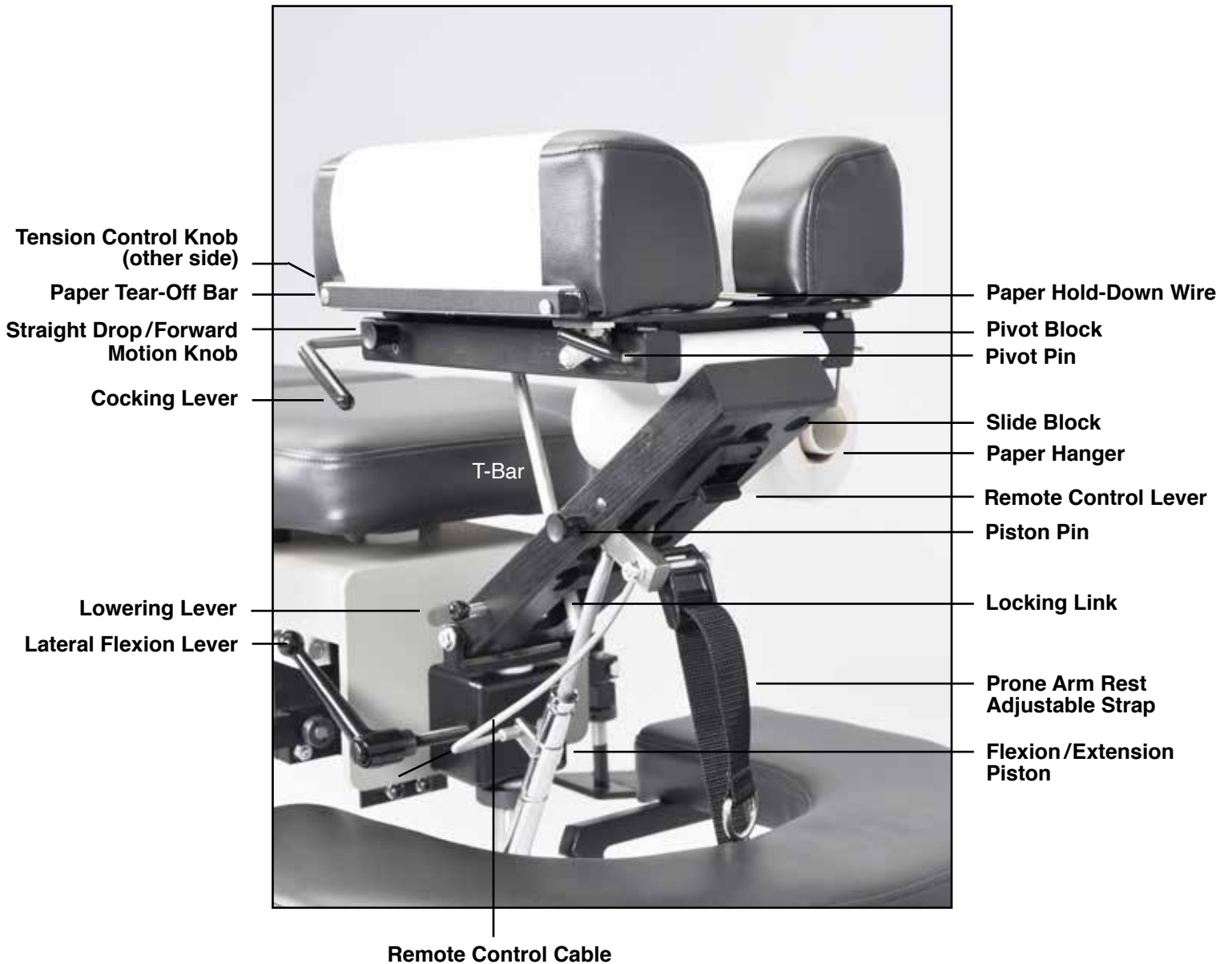
## MOTOR INFORMATION

To extend the life of the motor, instruct the patient to get on and off at the center of the table. Avoid elevating or lowering the table while the patient is not centered on the table.



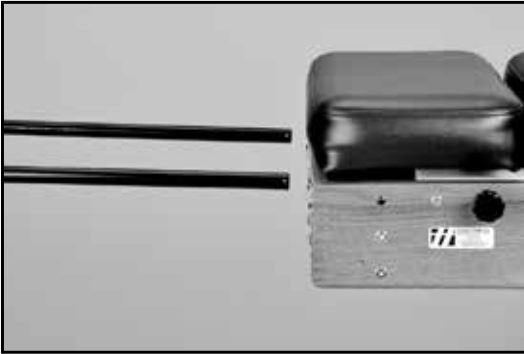
If the cord is not attached to the motor, plug it in, making sure the clip snaps onto the tab. A flat screwdriver may be helpful to gently guide the clip.

The electric and foot pedal plugs are located at the base of the motor shaft.



Your table is easy to set up and operate. In order to protect the headpiece and ankle rest extension during shipment, they have been packaged together in a separate box from the table.

## ANKLE REST ATTACHMENT



1. Remove the hitch pins and “O” rings from the ankle rest rods.
2. Loosen both ankle rest locking knobs.
3. Slowly insert the ankle rest rods through the frame and plastic blocks.  
**Note:** If the rod does not slide in, the brass spacer that is inside the plastic block (under the table) needs to be moved out of the way. Simply insert an allen wrench into the small hole on the side of the block and push the brass spacer past the large hole, clearing the way for the rod (middle photo above).
4. Push the ankle rest all the way in and replace the “O” rings and hitch pins.

## HEADPIECE ATTACHMENT



Remove the black metal plate from the block (attached to the headpiece) and, using it as a spacer (between the table and headpiece), attach the headpiece to the table with the four bolts, lockwashers and the 9/16” wrench provided.

## HEADPIECE PAPER



1. Install a 8.5” roll of headpiece paper.
2. Raise the paper hold-down wire and tear-off bar. Advance the paper and tuck it between the cushions.
3. Lower the hold-down wire between the cushions, lower the tear-off bar and tear off excess paper.
4. To advance the headpiece paper, raise the tear-off bar, hold your finger on the paper hold-down wire and pull the paper across the cushions. Pulling the paper in an upward direction will reduce friction, making it easier to pull.
5. To tear off used headpiece paper, use an upward motion while holding down the tear-off bar.

## FLEXION / EXTENSION



Flex and extend the headpiece by grasping the front end of the headpiece and operating the remote control lever.

## LATERAL FLEXION



To flex the headpiece laterally, lift the lateral flexion lever in a counterclockwise direction, manually position the headpiece, then lock it into position by tightening the lateral flexion lever. This can be done while the headpiece is in the flexed, extended or elevated position.

## LATERAL FLEXION LEVER



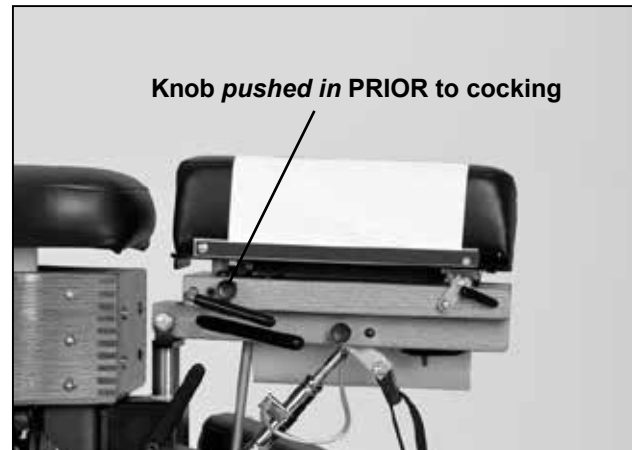
The position of the lateral flexion lever can be changed. With the lateral flexion lever tightened, pull the lever directly outward, rotate to the desired position, and release.

## HEADPIECE: STRAIGHT DROP



**PRIOR to cocking the headpiece**, set for straight drop by pulling out the headpiece straight drop/forward motion knob until you feel it is “set” into position. This will be just short of coming into contact with the cocking bar. If you pull the knob out too far, simply push it back in and continue.

## HEADPIECE: FORWARD MOTION DROP



**PRIOR to cocking the headpiece**, set for forward motion drop by pushing in the headpiece straight drop/forward motion knob.

**Please note:** Be sure to change the headpiece drop function **before** cocking the headpiece to prevent an ineffective drop and damage to the drop mechanism.

**Cock the headpiece** with an upward motion on the headpiece cocking lever.

**Set the desired tension** by turning the tension control knob clockwise (increasing tension) or counterclockwise (decreasing tension).

## VERTICAL ELEVATION



1. Raise the back end of the headpiece by lifting the red grip of the cocking lever (without operating the lever).  
Caution: Do not grasp the cushions to raise the back end, which could stretch and damage the small springs.



2. Raise the front end of the headpiece by operating the flexion/extension control lever.



3. With practice, steps 1 and 2 can be combined to vertically raise the headpiece in one smooth motion.

## VERTICAL LOWERING



1. Lower the front end of the headpiece by operating the remote control lever.



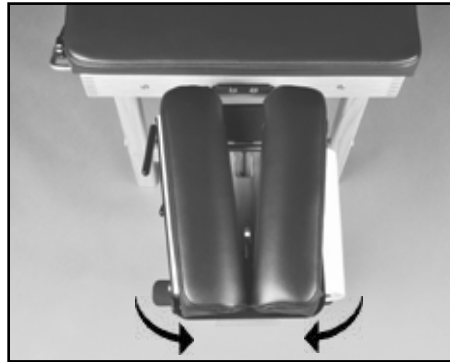
2. In one smooth motion, lower the back end of the headpiece by lifting the headpiece lowering lever firmly with one hand while gently lowering the back end of the headpiece with the other.

## HEADPIECE CUSHIONS: ADJUSTABLE WIDTH

The headpiece cushions are easily adjustable in width at the front end for individualized patient comfort. Firmly pull up on the front end of each headpiece cushion and move in (one or two notches) or out (one or two notches) to desired position. Secure cushions by engaging locating pins into notches provided.



Neutral position.



Narrower position for smaller faces (eg children).



Wider position takes pressure off of the patient's eyes.

## PRONE POSITION



Position the patient sufficiently forward with arms outstretched and wrists resting comfortably on the Prone or Crescent Arm Rest, which is adjustable in height. To raise, pull on the loop at the end of the strap. To lower, squeeze the cam lock (to loosen the strap) and push down on the Arm Rest. Advise the patient not to apply weight on the Arm Rest while getting up from the table.

## SIDE POSTURE POSITION



Side posture positioning of the patient's head for lumbo-pelvic adjusting or toggle recoil adjusting.

## SUPINE POSITION



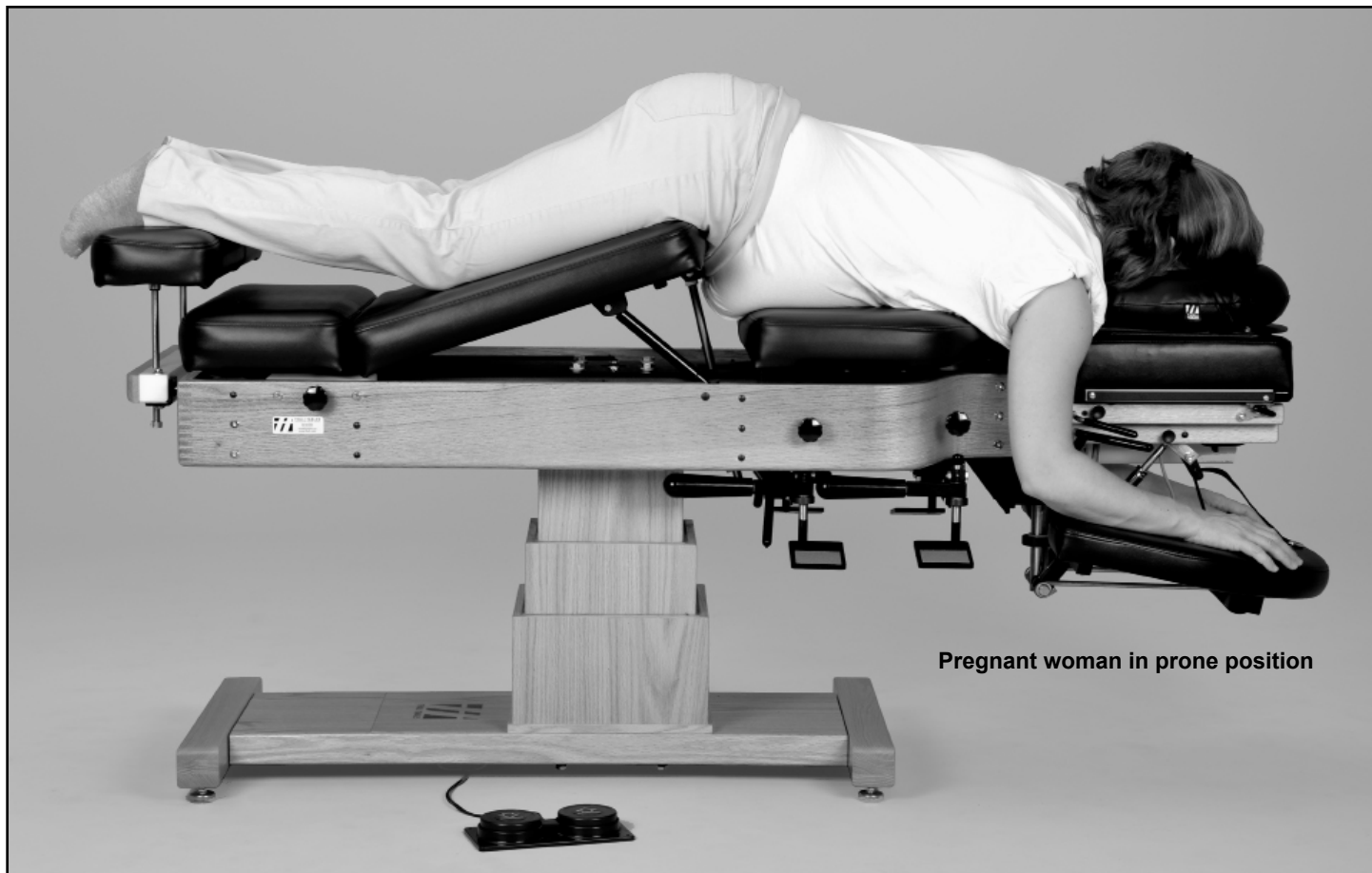
The headpiece can be positioned to support the cervical spine and head when the patient is in the supine position.

## EYE COMFORT IN PRONE POSITION

For patients who are sensitive to pressure on their eyes, slightly raise the back end of the headpiece. This will take pressure off of the eyes by supporting the weight of the head at the mandible and zygomatic arches. Using this maneuver, in combination with slight flexing of the headpiece, will provide additional comfort for many patients.



## MULTIPLE SECTION POSITIONING



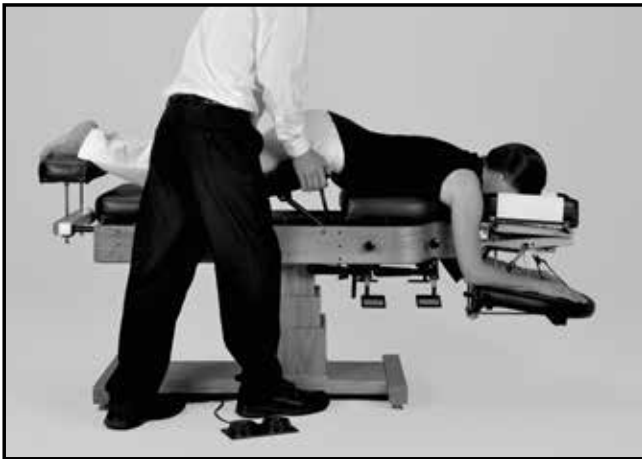
Pregnant woman in prone position

By changing the position of each section, the table can comfortably accommodate various body types.

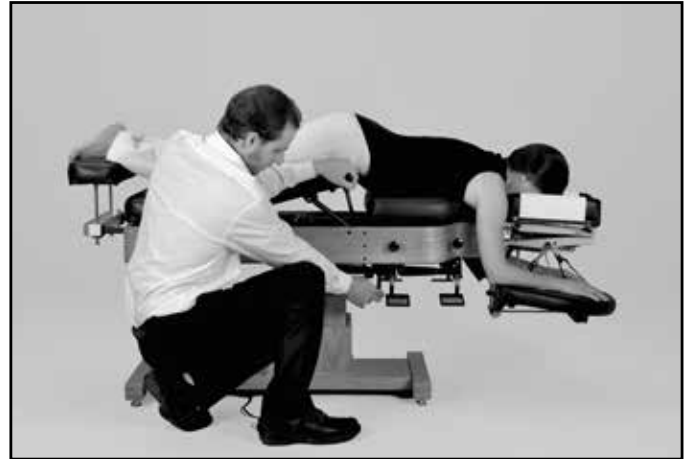
## RAISING AND LOWERING THE PELVIC SECTION

The cephalad end of the pelvic section can be raised to a height from 0"- 6 1/2" from horizontal, which translates to an angle of 0 - 22 degrees, and is intended to be used in the raised position with the patient in the prone position only.

Before lowering the thoracic or pelvic section from a raised position, advise your patient of your intention. Do not attempt to lower the pelvic section with the patient's weight on the section or without the patient's knowledge, as this could result in a sudden drop of the section causing surprise and/or possible injury to the patient.



**RAISING** the pelvic section: Simply lift up on the cephalad end. If your patient is lying prone on the table when you intend to raise the pelvic section, ask the patient to assist you by momentarily shifting his/her weight off of the pelvic section (e.g. to his/her chest and knees) while you raise the pelvic section to the desired height/angle. **FOR USE WITH THE PATIENT IN THE PRONE POSITION ONLY.**



**LOWERING** the pelvic section:

- a. Advise your patient of your intention.
- b. Ask your patient to shift his/her weight off of the pelvic section (i.e. to his/her chest and knees).
- c. Pull back and upward on the pelvic lowering lever.
- d. Lower the pelvic section by pushing down on the cephalad end.

## PELVIC DROP

The pelvic section both elevates and drops. The drop can be used in any elevated position. However, there is a sequence in which it will and will not work:

### Proper Drop Function

If the pelvic section is in any elevated position, the drop can be cocked and dropped.

If the pelvic section is in any elevated position, the drop is cocked, and then the section is lowered to an elevation higher than 2" from its neutral position, the drop will work.

### Improper Drop Function

While the pelvic section is in an elevated position, the drop is cocked, and (prior to using the drop) the section is lowered to its completely neutral (lowest) position, the drop will **not** work. To correct this, elevate the pelvic section at least 2" from its neutral position, and then the drop will work.

### Patient Positioning

Proper prone positioning on the pelvic drop section should have the patient's anterior superior iliac spine (ASIS) at the juncture of the pelvic and thoracic sections.

## THORACIC DROP

When using the thoracic drop, position the patient sufficiently forward with their arms outstretched and wrists resting on the prone arm rest.

## TENSION SETTING

The pelvic and thoracic drops have adjustable tension and cock with a downward movement of the fold-away hand lever or foot pedal.

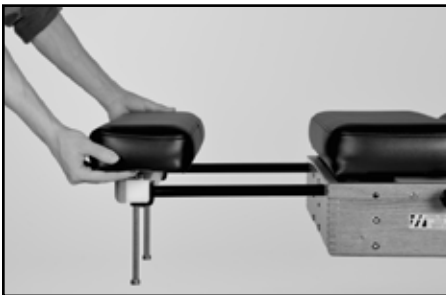
**Before setting the tension, advise your patient of your intention.**

1. With the patient on the table, cock the drop section. You must have sufficient tension on the drop mechanism to hold the patient's weight. **NOTE:** It may be helpful to raise the front end of the pelvic section so that it contacts and bears the weight of the patient's pelvis.
2. Loosen the tension by turning the tension control knob counter-clockwise until the section drops.
3. Tighten the tension by turning the tension control knob clockwise 2 - 4 half turns.

\*Note: each half turn increases the holding capacity by approximately 10 pounds.

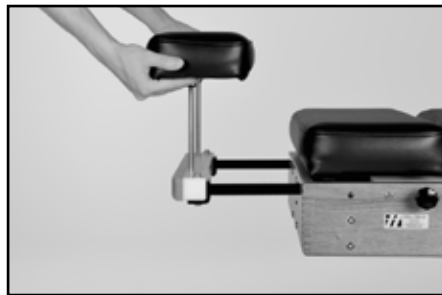
As a general rule, the drop is now set for the patient's weight. The desired tension may vary according to the practitioner's preference.

## ANKLE REST EXTENSION



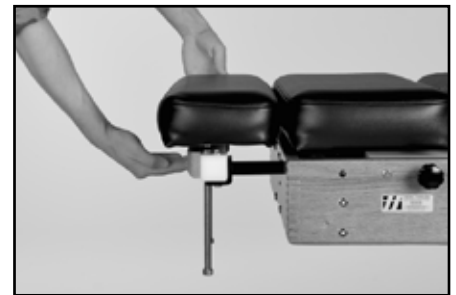
The ankle rest can be extended up to 11" to accommodate taller patients. Shorter patients can drop their feet into the recess created by the extended ankle rest. Locking knobs are located on both sides of the table.

## ANKLE REST ELEVATION



To ELEVATE, simply lift up on the ankle rest.

## ANKLE REST LOWERING



To LOWER, lift the center of the wood bar with one hand while gently lowering the ankle rest with the other hand.

**COMFORT PILLOW**



**Comfort Pillow**

The base of the Comfort Pillow inserts into place between the headpiece cushions. The opening is adjustable.



**Pillow**

**Base**

The Velcro on the underside of the pillow secures it to the base, allowing for width adjustability.

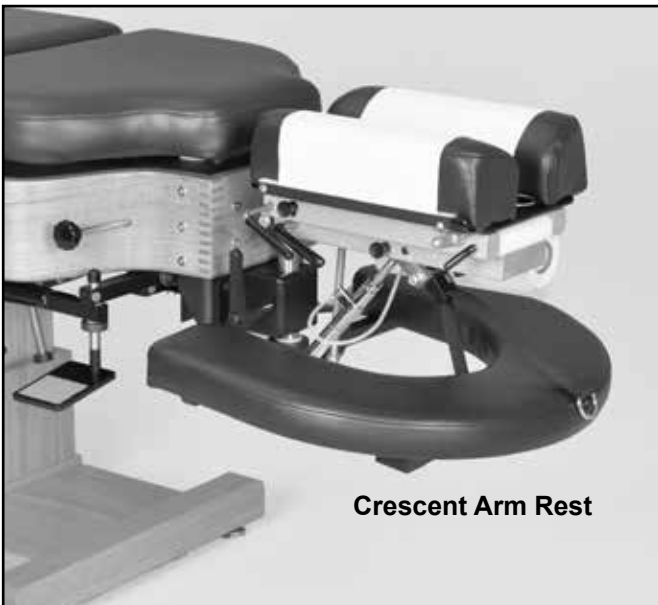


The Comfort Pillow offers massage quality comfort in the prone position.



Rotate the Comfort Pillow 180 degrees to provide cervical support in the supine position.

**CRESCENT ARM REST**



**Crescent Arm Rest**

The Crescent Arm Rest provides additional forearm support in the prone position. Can be retrofitted to your table at anytime (minimal installation required).

**BOLSTERS**



**2.75" x 20" Bolster (shown on Tour portable table)**

Bolsters are 20" wide with a nonslip base. Choice of two heights: 2.75" or 4.25". Use in prone position under ankles or in supine position under knees to relax hamstrings.

**PRONE ARM REST SHIELDS**



Nonporous and durable plastic shields slip over the prone arm rest grips. Easy to sanitize.

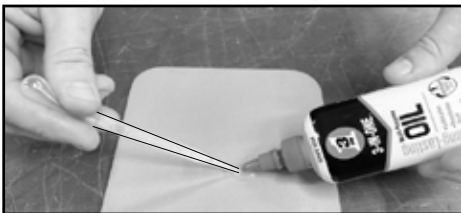
## DROP MECHANISMS: CLEANING & LUBRICATION

Periodic lubrication of the drop mechanisms will ensure smooth, crisp drops. Apply **3-IN-ONE** oil every month or 500 adjustments. If the drops have not been lubricated on a regular basis, first apply **WD-40** to clean the plungers from dust & debris. See below.



### CERVICAL DROP

1. Raise the back of the headpiece and locate the hole in the plastic block.
2. **Lubricate with 3-IN-ONE oil:** Apply oil into the hole. Allow a few minutes for the oil to penetrate before using. Lubricate every month or 500 adjustments.
3. **Clean with WD-40:** If the drop has not been lubricated on a regular basis, apply WD-40 into the hole and drop the headpiece several times to clean off dust & debris. It is important to follow the cleaning with **3-IN-ONE** oil for lubrication.



### THORACIC & PELVIC DROPS: SYRINGE USE

To access the thoracic and pelvic plungers, use a small syringe (provided). Squeeze several drops of **3-IN-ONE** oil onto a nonporous surface and suction into the syringe. Save the syringe for future use.

### THORACIC DROP

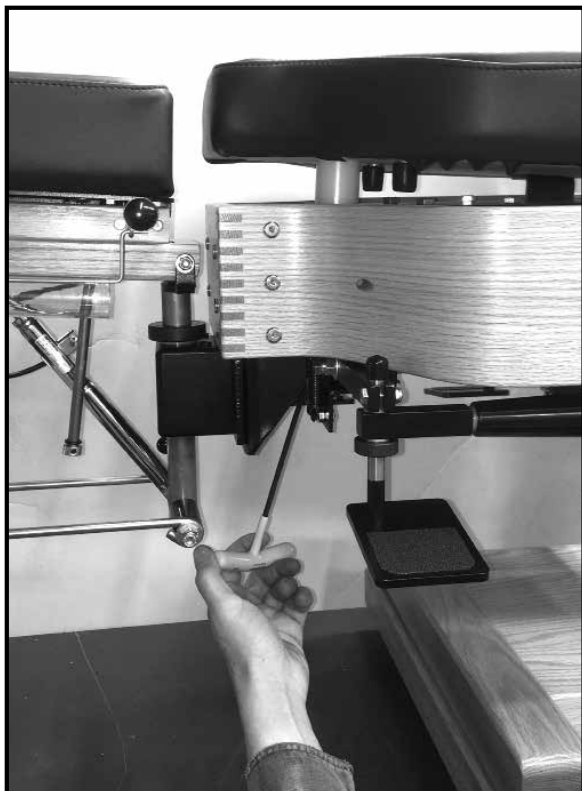


### PELVIC DROP



1. Elevate the thoracic & pelvic sections and cock both drops. Look underneath the table and locate the thoracic & pelvic plungers.
2. **Lubricate with 3-IN-ONE oil:** Using the syringe, apply oil onto the plungers. Allow a few minutes for the oil to penetrate before using. Lubricate every month or 500 adjustments.
3. **Clean with WD-40:** If the drops have not been lubricated on a regular basis, apply **WD-40** onto each plunger. Drop the section several times to clean off dust & debris. It is important to follow the cleaning with **3-IN-ONE** oil for lubrication.

## THORACIC & PELVIC STRIKE PLATES: ROUTINE TIGHTENING



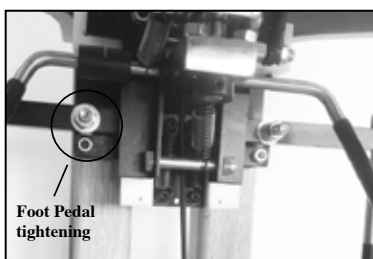
Periodic tightening of the thoracic and pelvic drop strike plates will assure proper functioning and reduce wear on the cocking arms. It is advised to tighten once/month.

First, cock the drop. Using the long-handled 3/16" allen wrench provided with your table, insert it between the two springs on the drop mechanism and firmly tighten the screw in each strike plate.

### THORACIC (close-up)



### PELVIC



### FOOT COCKING PEDAL

If the foot cocking pedals loosen over time, tighten the bolt on the cocking arm. Contact us for instructions if needed.

## VINYL CLEANING

1. **Mild Cleaning:** Dilute dish soap in warm water (1:10) and clean using a soft cloth. Follow with a thorough, clear water rinse. If more cleaning is necessary, use a soft bristle brush with the same solution. Avoid harsh detergents and powdered abrasives. Areas coming in contact with hair, body oils or perspiration should be washed frequently. Remove stains immediately to prevent the possibility of becoming permanent.
2. **Disinfecting Options:**
  - Bleach:** In spray bottle, dilute 4 tsp bleach in 1 quart of water. Spray on vinyl, leave for 1-2 minutes and rinse well with water.
  - Hydrogen Peroxide (3%):** Available in spray bottle. Use undiluted and leave on for 5 minutes and rinse well with water.
  - Alcohol (70% min):** Use undiluted. Leave on for 1-2 minutes and rinse well with water.
3. **Water Rinse:** It is important to follow any cleaning with a thorough, clear water rinse to minimize premature deterioration of the vinyl from extended exposure to chemicals.

**REPLACEMENT VINYL:** In the event of wear or damage, pre-sewn replacement vinyl is available from Thuli Tables.

The motor is covered by a one year warranty. Please note that the motor, like all electrical products, will eventually wear out. The life of the motor is determined by various factors including number of uses, weight and positioning of patients, humidity and environmental conditions. To extend the life of the motor, instruct the patient to get on & off **at the center of the table**. Also, avoid raising or lowering the table if the patient is not centered on the table. If the motor is not functioning properly, please go through this checklist to determine the cause and resolution (which may include replacing the motor).

## MOTOR IS NOT WORKING

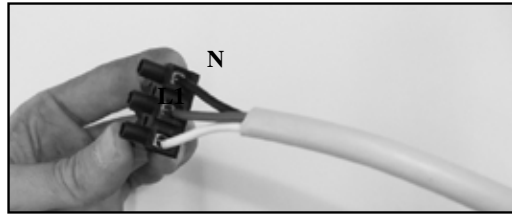
1. The outlet may not be working or the breaker is tripped. Test the outlet using another device.
2. The electrical connection in the back of the motor may be disengaged.
3. The air lines from the foot switch to the motor may be not be fully connected or may be kinked or broken.  
If kinked, try to straighten. If broken, contact us for a replacement.
4. The foot switch may be worn out. Unplug the air lines from the foot switch and blow into both of them, one at a time.  
If the motor operates by doing this, the foot switch is worn out. Contact us for a replacement.
5. The wires inside the plug may be loose or disconnected.  
To check, first unplug the motor from the electricity and then follow the steps below.



Remove the plug from the motor by lifting up on the tab (using a flat screwdriver).



Remove the cover by removing the 2 screws (using a Philips screw driver).



Loosen the 3 screws (using a flat screwdriver) and re-connect the wires as follows:

### **110 volt motor:**

- White wire goes into L1 (left)
- Green wire goes into middle
- Black wire goes into N (right)

### **220 volt motor:**

- Brown wire goes into L1 (left)
- Green/Yellow goes into middle
- Blue goes into N (right)

## MOTOR IS MAKING NOISE

1. Squealing or screeching noise: The electronic brake has likely failed and must be sent in for repair.
2. Clicking noise: This is normal and may get louder with age, but functionally the motor is fine.

## TABLE MOVEMENT

When the table is in an elevated position, some movement of the table is normal. If the movement becomes excessive and interferes with function, it is likely that the motor needs replacing.

Our tables are designed and built to high standards. We are proud to offer a limited lifetime warranty against manufacturing defects, with the exception of the headpiece piston and the motor (on elevation tables), which are covered by a one year warranty.

This warranty is valid to the original owner if the table has not been altered in any way. It does not cover issues caused by normal wear & tear or damage due to accidents, improper use or negligence.

If your table needs repair, whether under warranty or not, please contact us. We will determine what is needed and send you either a replacement or the necessary part for repair. Our tables have been designed so that replacing a part is relatively easy to do yourself. Please note that we do not cover labor costs if you hire someone to install the replacement part on your behalf.





**Junior Portable**



**Tour Portable**



**Sport Portable**



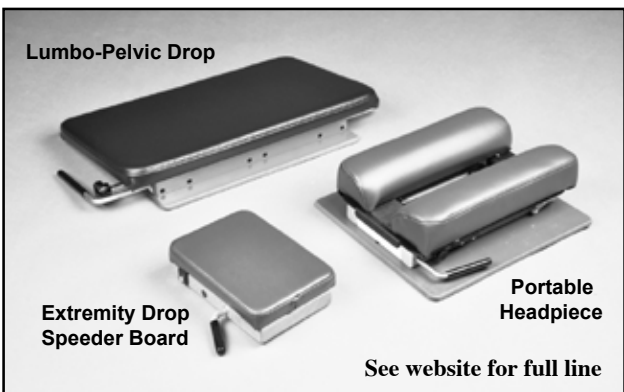
**300 Stationary**



**500 Stationary**



**Elevation Tables**



Lumbo-Pelvic Drop

Extremity Drop  
Speeder Board

Portable  
Headpiece

See website for full line

**Portable Drops**



800.458.4854

608.935.9300

[www.thulitables.com](http://www.thulitables.com)

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