

SHUTTLE MINIPRESS

WELCOME TO THE FAM

Congratulations on the purchase of your new Shuttle MiniPress. Shuttle equipment has been trusted by physical therapists and sports training facilities around the globe for almost half a century. It is our mission to deliver the finest quality exercise devices with superior customer service. We welcome you as a valued customer.

For your safety it is crucial that you read this manual thoroughly and understand the equipment before use. If you have any questions about your Shuttle MiniPress you can give us a call at +1 (800)-334-5633, email us at customerservice@shuttlesystems.com, or chat with us via live chat at www.shuttlesystems.com (Monday-Friday, 8 am to 5 pm Pacific Time).

TABLE OF CONTENTS

IMPORTANT SAFETY INFORMATION 1

PERSONAL SAFETY 1

SPECIFICATIONS 2

IDENTIFICATION OF THE MANUFACTURER 2

USING THE PRODUCT 3

MAINTENANCE AND CARE 4

PRECAUTIONS 5

TREATMENT PROGRESSION 5

SEATED LOWER EXTREMITY PROTOCOLS 6

STANDING PROTOCOLS 12

SUPINE PROTOCOLS 14

UPPER EXTREMITY PROTOCOLS 16

WARRANTY 19

SUPPORT 20

IMPORTANT SAFETY INFORMATION

Read all safety information before operating the MiniPress. It is the owner's responsibility to ensure that users are aware of all warnings and precautions.

Please read all instructions before using the product. These instructions were written to ensure the safety of the user and to protect the product.

You should always consult with a physician before beginning a new fitness plan. You are advised to investigate and inform yourself about any health related actions and choices you make.

Perform regular maintenance for optimal performance and longevity. To ensure safety, the MiniPress must be checked for wear and damage on a regular basis.

Replace any damaged or worn parts immediately. Do not use the MiniPress until the repair is performed.

Use only original parts from the manufacturer. Changes or modifications to this unit not expressly approved by Shuttle Systems could void the warranty.

The MiniPress is for indoor use only. Do not store the MiniPress outdoors, near water, or at high humidity levels.

Fully assemble the product before using it. Check the product before each use. Do not continue to use the product if it is not working properly.

PERSONAL SAFETY

Use of this product is subject to medical examination to assess your suitability to the type of workout exercise you intend to perform, and in compliance with the conditions for use laid down by Shuttle Systems.

Persons suffering from certain physical conditions may only use the product under the strict supervision of a doctor with specific qualifications.

Before starting any workout, make sure your position on the product is correct, paying attention to any components that may obstruct use.

Plan the workout according to your physical characteristics and state of health, beginning with less demanding workloads.

Do not overexert yourself or work to exhaustion. Incorrect or excessive exercise may cause physical harm or sudden death. If you feel any pain or abnormal symptoms, stop your workout immediately and consult your physician.

When using the MiniPress, other people must remain at a safe distance.

Do not use the product when children or pets are present.

The person in charge of the gym must explain proper and improper use of the equipment to users.

Use the product only on a solid and flat surface.

Keep the product in good working condition. If you see signs of wear, contact Shuttle Technical Support Service.

Do not attempt any maintenance work on the product other than the operations described in the user manual.

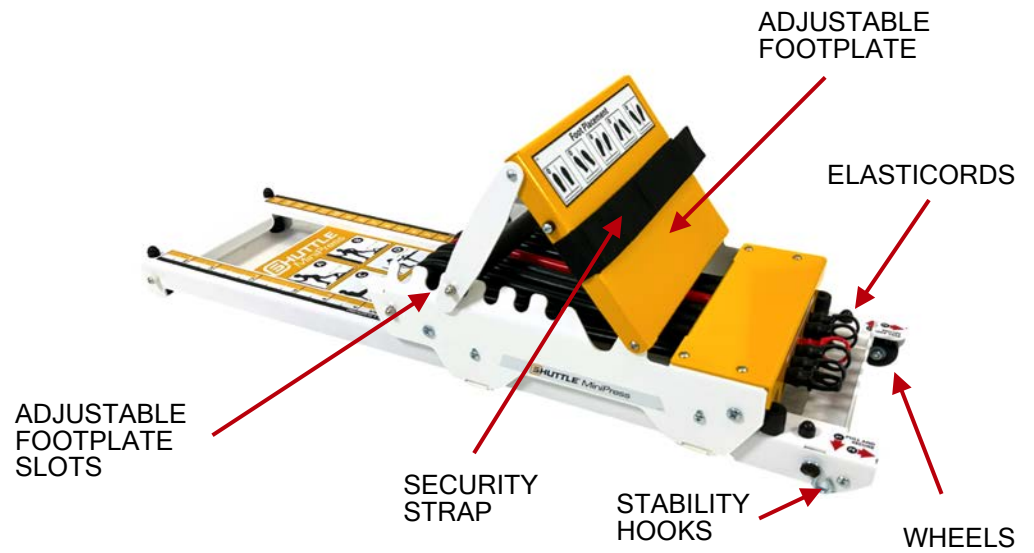
SPECIFICATIONS

Dimensions: 12" x 41"

Floor Space Required: 2' x 6'

Carriage Travel: 19 3/4"

Resistance: 2-80lbs*



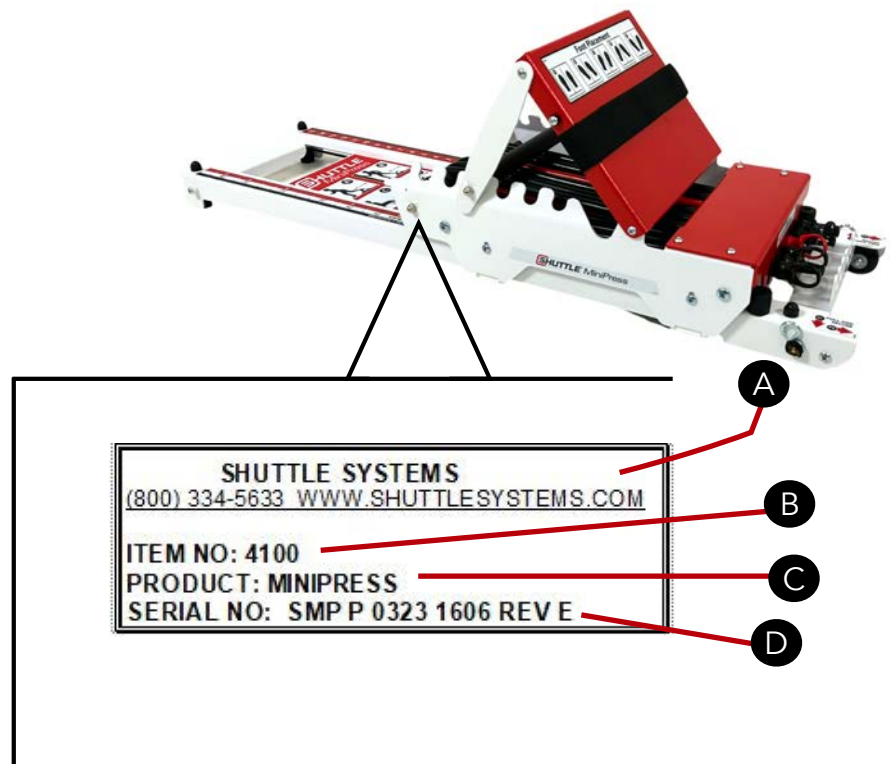
IDENTIFICATION OF MANUFACTURER

A - Manufacturer's name and contact

B - Item number

C - Description of product

D - Serial number



USING THE PRODUCT

Located inside the MiniPress carriage are 6 elasticcords located near the footplate with handles. Once the elasticcords are attached to the slotted plate in the rail system, they engage resistance.

Always detach the Elasticcords when the machine is not in use. This prevents premature stretching of the Elasticcords and greatly extends their life.

Attaching Elasticcords: To increase the resistance, attach elasticcords one-by-one to the slotted plate on the rails.

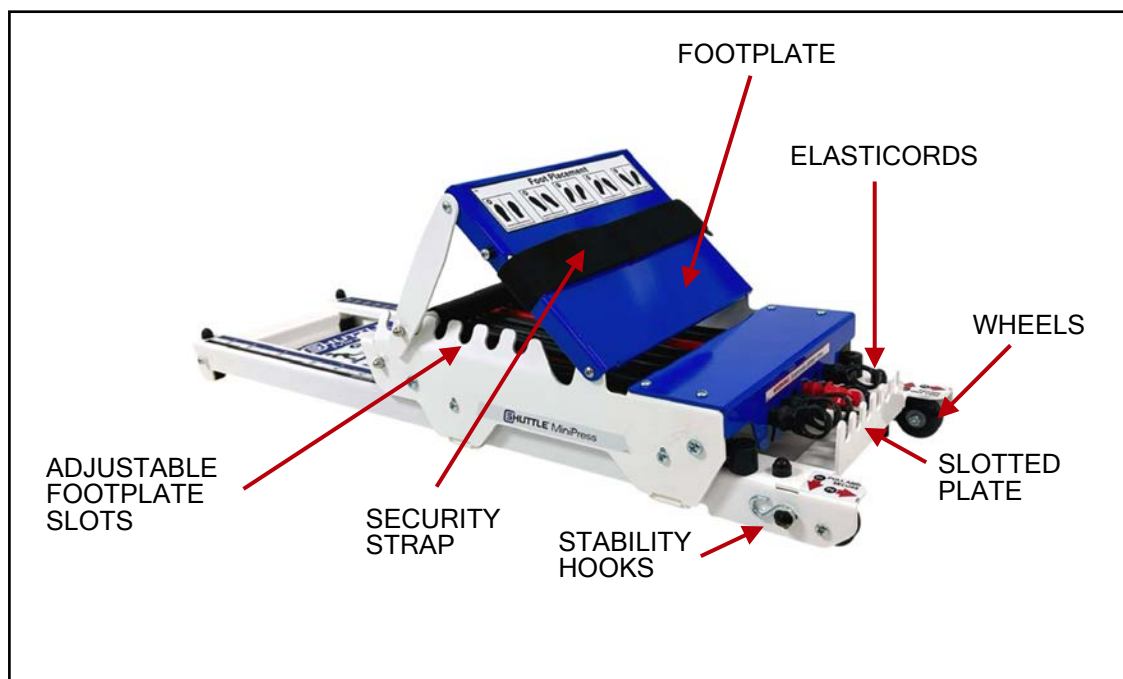
Detaching Elasticcords: To decrease resistance, detach Elasticcords from the slotted plate and gently retract them into the carriage.

Adjusting the Footplate: The footplate is adjustable from 0°-75° from a horizontal line with the carriage. Adjustment is accomplished by lifting the support bar (lower bar with rubber) on the back side of the footplate frame and securing the bar into the desired slot on the sides of the carriage. The rubber sleeve on the bar helps secure the bar into the slots.

Warning! Never attempt to adjust the footplate when the equipment is in use.

The Security Strap: The security strap attached to the footplate is there to secure the foot for desired exercises.

Stabilizing the MiniPress: There are two black ropes attached to each side of the MiniPress. When secured properly, these ropes keep the machine in place when the patient pushes against the Footplate. To secure the MiniPress, pull the black ropes out from under the MiniPress by grasping the hooks found on each side of the rails and looping them around chair legs or a wheelchair frame. Make sure that the chair or wheelchair is against a wall in order to keep it from tipping over when resistance is applied.



MAINTENANCE AND CARE

Removing the Carriage

1. To remove the carriage from the rails, remove the two clips from one side of the carriage using a phillips head screwdriver. Then lift one side of the carriage up over the side of the rail. The carriage will slip off easily. To re-install the carriage, reverse the process. During normal use, the carriage will be held onto the rails by the two clips extending under each rail.

Elasticord Maintenance

1. Lubricating elasticords is suggested every 6 months. A well maintained elasticord should last 3 to 5 years.
2. Sagging Elasticords - This can result from normal wear and tear and only needs to be replaced if you are not receiving the resistance you require.
3. Cracked, dry, or pitted elasticords - This is a sign that your elasticords are worn-out which could result in an elasticord breaking when in use and should be replaced immediately.

Part #4409 - MiniPress Elasticords (Set of 6)

Part #4414B - MiniPress Elasticord: Black Normal Load (Each)

Part #4414R - MiniPress Elasticord: Red Light Resistance (Each)

Lubricating Elasticords

1. Engage one cord at a time and press the carriage 10-12 inches exposing the Elasticords.
2. Apply a pea size portion of silicone gel to each elasticord using latex gloves. Make sure not to get silicone gel on the elasticord handles.

Part #1011 - Silicone Gel

Warning! Do not use oil, or any petroleum products on the elasticords. Using anything other than the silicone gel suggested above will void the warranty of your elasticords.

PRECAUTIONS

Follow these precautions for safe operation.

1. When using the MiniPress for upper and lower extremities, the security strap should always be used to bind the extremity to the footplate.
2. When in use, the stabilization ropes should be attached to a stable object.
3. Keep fingers and objects outside of the frame at all times while the MiniPress is in use.
4. When using the MiniPress with a patient sitting in a chair, the back of the chair must be up against the wall, or an immovable object, to prevent the chair from tipping backwards.
5. Do not stand on the MiniPress, or attempt to use it while standing on it. There are several exercises in which the MiniPress is used while standing; however, in these, the patient is always stabilized on the floor, not the machine. We strongly suggest that the patient is firmly holding onto a railing, such as parallel bars, or supported by their trainer.

TREATMENT PROGRESSION

The MiniPress is a closed kinetic chain exercise device designed to initiate early lower extremity motion in a functional pattern. It allows the practitioner to introduce un-weighted range of motion or gradual resistance from very light to moderate, applied either unilaterally or bilaterally. Exercises may be performed from a supine standing or seated position, as dictated by their health.



NOTE THESE ITEMS BEFORE YOU USE THE SHUTTLE MINIPRESS

1. Use the stabilization ropes to steady the machine, if necessary.
2. Set the footplate to the appropriate angle for the patient's use. The varying angles of the footplate will allow Plantarflexion and Dorsiflexion.
3. Monitor range of motion, smoothness and alignment of the foot with the knee.
4. Begin with a light load to allow full use of the patient's available range of motion and gradually increase resistance.
5. To increase hip and knee stability add a ball or proprioceptive disk, this will introduce a neuromuscular component to the exercise.

SEATED LOWER EXTREMITY PROTOCOLS

REFER TO PAGE 5 (PRECAUTIONS) BEFORE PROCEEDING

QUAD STRETCHING



1. Orient the machine with the elasticcord slotted plate facing the patient.
2. Stabilize the machine.
3. Set the footplate to the appropriate angle for patient's comfort.
4. Secure the patients foot/feet to the footplate using the security strap over the top of the foot/feet.
5. The patient can perform a single push-pull exercise with the desired range of motion.
6. Engage elasticcords as strength and comfort dictate.

HAMSTRING STRETCHING (Sit to Stand)



1. Orient the machine with the elasticcord slotted plate facing away from the patient.
2. Stabilize the machine.
3. Set the footplate to the flat position.
4. Place the security strap behind the heel(s).
5. The patient can start moving the carriage by pulling their leg(s) towards the body and drawing them back out in a controlled manner.

SEATED LOWER EXTREMITY PROTOCOLS

REFER TO PAGE 5 (PRECAUTIONS) BEFORE PROCEEDING

HEEL SLIDE



1. Orient the machine with the elasticcord slotted plate facing the patient.
2. Stabilize the machine.
3. Set the footplate to the flat position.
4. Secure the patients foot/feet to the footplate using the security strap over the top of the foot/feet.
5. The patient can start moving the carriage by pushing the leg away from the body and drawing it back in a controlled manner.
6. Monitor for range of motion, smoothness and alignment of the foot with the knee.

UNILATERAL LEG PRESS



1. Orient the machine with the elasticcord slotted plate facing the patient.
2. Stabilize the machine.
3. Set the footplate to the appropriate angle for patient's comfort.
4. Place the security strap behind the heel(s).
5. The patient can start moving the carriage by pushing their leg(s) away from the body and drawing them back in a controlled manner.
6. Engage elasticords based upon weight-bearing ability.
7. Monitor for range of motion, smoothness and alignment of the foot with the knee.

SEATED LOWER EXTREMITY PROTOCOLS

REFER TO PAGE 5 (PRECAUTIONS) BEFORE PROCEEDING

UNILATERAL LEG PRESS



Unilateral Variation I:

Rotating the ankle clockwise or counter-clockwise while pressing on the footplate will introduce medialis or lateralis muscle firing.

UNILATERAL LEG PRESS



Unilateral Variation II:

By adding a ball, instability is added to the process which will introduce a neuromuscular component to the exercise.

SEATED LOWER EXTREMITY PROTOCOLS

REFER TO PAGE 5 (PRECAUTIONS) BEFORE PROCEEDING

BILATERAL LEG PRESS



1. Orient the machine with the elasticcord slotted plate facing the patient.
2. Stabilize the machine.
3. Set the footplate to the appropriate angle for patient's comfort.
4. Place the security strap behind the heel(s).
5. The patient can start moving the carriage by pushing their leg(s) away from the body and drawing them back in a controlled manner. If applicable, the uninjured leg may be used to propel the MiniPress to assist the injured leg.
6. Engage elasticords based upon weight-bearing ability.
7. Monitor for range of motion, smoothness and alignment of the foot with the knee.

BILATERAL LEG PRESS



Bilateral Variation I:

Place a rubber ball between the knees. Medialis muscles are necessarily involved to keep the ball in place. The ball should not rotate if both limbs are pressed equally hard.

SEATED LOWER EXTREMITY PROTOCOLS

REFER TO PAGE 5 (PRECAUTIONS) BEFORE PROCEEDING

BILATERAL LEG PRESS



Unilateral OR Bilateral Variation II:

Attach a band from the patient's knee to a chair leg. This will activate the lateralis or either limb.

BILATERAL LEG PRESS



Unilateral OR Bilateral Variation III:

Place a proprioceptive disk under the patient's foot/feet. This will introduce neurological involvement with the patient's ankle and knee.

SEATED LOWER EXTREMITY PROTOCOLS

REFER TO PAGE 5 (PRECAUTIONS) BEFORE PROCEEDING

KNEE FLEXION (Hamstring stretched with resistance)



1. Orient the machine with the elasticcord slotted plate facing the patient.
2. Stabilize the machine.
3. Set the footplate into the flat position.
4. Place the security strap behind the heel(s).
5. The patient can perform a slow, controlled push-pull exercise within the desired range of motion.
6. Engage elasticcords based upon weight-bearing ability.
7. Monitor for range of motion, smoothness and alignment of the foot with the knee.

TOE LIFT (Dorsiflexion)



1. Orient the machine with the elasticcord slotted plate facing the patient.
2. Stabilize the machine.
3. Remove the support bar so the footplate swings freely.
4. Secure the patients foot to the footplate using the security strap over the top of the foot.
5. Keep the knee at full flexion while pulling the toes toward the chair.

STANDING PROTOCOLS

REFER TO PAGE 5 (PRECAUTIONS) BEFORE PROCEEDING

STANDING HIP ABDUCTION (Trunk Stabilization)



1. Stabilize the machine.
2. Set the footplate into the flat position.
3. Direct the patient to stand in such a way that the machine is facing sideways with the slotted plate on the same side as the supporting leg.
4. Direct the patient to place their foot on the colored flat surface of the carriage directly before the footplate so that the active leg is slightly across the front of the body.
5. The patient will start by pushing the carriage laterally away from the body and bringing it back in a controlled manner.
6. Engage elasticcords slowly to allow full use of the patient's available range of motion and gradually increase resistance.
7. Monitor the proper stabilization of the trunk and supporting leg.

STANDING HIP EXTENSION



1. Stabilize the machine.
2. Set the footplate to the appropriate angle for the patient's use.
3. Direct the patient to stand before the machine with the slotted plate facing the patient's heels at a distance where the patient can perform a pushing exercise within the desired range of motion. The relationship between the machine and the patient will need to be adjusted to accommodate leg length.
4. Direct the patient to place their foot on the footplate.
5. The patient will start by pushing the leg away from the body and drawing it back in a controlled manner.
6. Engage elasticcords slowly to allow full use of the patient's available range of motion and gradually increase resistance.
7. Monitor the proper stabilization of the trunk and supporting leg.

STANDING PROTOCOLS

REFER TO PAGE 5 (PRECAUTIONS) BEFORE PROCEEDING

STANDING HIP EXTENSION



1. Stabilize the machine.
2. Set the footplate to the appropriate angle for the patient's use.
3. Direct the patient to stand before the machine with the slotted plate facing the patient's heels at a distance where the patient can perform a pushing exercise within the desired range of motion. The relationship between the machine and the patient will need to be adjusted to accommodate leg length.
4. Direct the patient to place their foot on the footplate.
5. The patient will start by pushing the leg away from the body and drawing it back in a controlled manner.
6. Engage elasticords slowly to allow full use of the patient's available range of motion and gradually increase resistance.
7. Monitor the proper stabilization of the trunk and supporting leg.

SUPINE PROTOCOLS

REFER TO PAGE 5 (PRECAUTIONS) BEFORE PROCEEDING

SUPINE HIP ABDUCTION



1. Stabilize the machine.
2. Set the footplate into the flat position.
3. Direct the patient to lie supine in such a way that the machine is facing sideways in front of them with the slotted plate on the same side as the supporting leg.
4. Direct the patient to place their active (moving) foot on the colored slat surface of the carriage directly before the footplate. A pad under the patient that brings the level of the patient to the level of the MiniPress is recommended.
5. Ask the patient to start by pushing the carriage laterally away from the body and allowing it to return in a controlled manner.
6. Begin with a light load to allow full use of the patient's available range of motion and gradually increase resistance.
7. Monitor the proper stabilization of the trunk and supporting leg.

SUPINE HIP ABDUCTION



1. Stabilize the machine.
2. Set the footplate into the flat position.
3. Direct the patient to lie supine in such a way that the machine is facing sideways in front of them with the slotted plate on the opposite side as the supporting leg.
4. Direct the patient to place their active (moving) foot on the colored slat surface of the carriage directly before the footplate. A pad under the patient that brings the level of the patient to the level of the MiniPress is recommended.
5. Ask the patient to start by pushing the carriage laterally away from the body and allowing it to return in a controlled manner.
6. Begin with a light load to allow full use of the patient's available range of motion and gradually increase resistance.
7. Monitor the proper stabilization of the trunk and supporting leg.

SUPINE PROTOCOLS

REFER TO PAGE 5 (PRECAUTIONS) BEFORE PROCEEDING

SUPINE QUAD EXTENSION



1. Orient the machine with the slotted plate facing the patient.
2. Stabilize the machine.
3. Set the footplate to the appropriate angle for the patient's use.
4. With the patient's leg fully extended in a supine position, place a foam roll or pillow under the knee to act as a cushion.
5. The patient can press their knee down into the cushion creating a stretch in the quadricep.
6. Engage elasticcords slowly to allow full use of the patient's available range of motion and gradually increase resistance.

UPPER EXTREMITY PROTOCOLS

REFER TO PAGE 5 (PRECAUTIONS) BEFORE PROCEEDING

SEATED SHOULDER STABILIZATION



1. Secure the MiniPress to a table edge using the rubber pads over the edge of the table
2. Orient the patient facing the slotted plate.
3. Stabilize the machine.
4. Set the footplate to the appropriate angle for the patient's use.
5. Direct the patient to place their hands on the footplate. With straightened arms, use the shoulders to push the footplate away from the body in a controlled manner. With arms still straight, draw the shoulder blades together, allowing the carriage to return to its starting position.
6. Engage elasticcords slowly to allow full use of the patient's available range of motion and gradually increase resistance.

SEATED LATERAL EXERCISE



1. Secure the MiniPress to a table edge using the rubber pads over the edge of the table. Orient the patient facing the slotted plate.
2. Stabilize the machine.
3. Set the footplate to the appropriate angle for the patient's use.
4. Begin with a light load to allow a full use of the patient's available range of motion at the hips and gradually increase resistance.
5. Direct the patient to place their hands on the footplate. With straightened arms, use the abdominals transmitted through the straight arms to push the footplate away from the body in a controlled matter. With arms still straight, allow the carriage to return to its starting position resisting with the abdominals.
6. Engage elasticcords slowly to allow full use of the patient's available range of motion and gradually increase resistance.
7. Monitor for range of motion, smoothness and alignment.
8. For added difficulty, have the patient hold onto a ball while performing abdominal exercises on the MiniPress.

UPPER EXTREMITY PROTOCOLS

REFER TO PAGE 5 (PRECAUTIONS) BEFORE PROCEEDING

SEATED ABDOMINAL EXERCISE



1. Secure the MiniPress to a table edge using the rubber pads over the edge of the table
2. Orient the patient facing the slotted plate.
3. Stabilize the machine.
4. Set the footplate to the appropriate angle for the patient's use.
5. Begin with a light load to allow a full use of the patient's available range of motion at the hips and gradually increase.
6. Direct the patient to place their hands on the footplate. With straightened arms, use the abdominals to push the footplate away from the body in a controlled manner. With arms still straight, allow the carriage to return to its starting position resisting with the abdominals.
7. Engage elasticcords slowly to allow full use of the patient's available range of motion and gradually increase resistance.
8. Monitor the range of motion, smoothness and the alignment.

SEATED ABDOMINAL EXERCISE



Variation:

Add a stability ball between hands and footplate.

UPPER EXTREMITY PROTOCOLS

REFER TO PAGE 5 (PRECAUTIONS) BEFORE PROCEEDING

SEATED ROW



1. Secure the MiniPress to a table by looping the stability hooks to the legs of the table.
2. Orient the patient facing the opposite side of the slotted plate.
3. Stabilize the machine.
4. Set the footplate to flat position.
5. Direct the patient to grasp the footplate support bar in their hands.
6. The patient will straighten their arms and begin to pull the bar in a controlled manner toward the body with elbows lifted and out to the side. The back should be stabilized with the arms doing the work. Then return to the starting position.
7. Begin with a light load to allow full use of the patient's range of motion and gradually increase resistance.
8. Monitor for range of motion, smoothness, alignment and stabilization.

SEATED ROW (Back and Glutes)



1. Secure the MiniPress to a table by looping the stability hooks to the legs of the table.
2. Orient the patient facing the opposite side of the slotted plate.
3. Stabilize the machine.
4. Set the footplate to flat position.
5. Direct the patient to grasp the footplate support bar in their hands.
6. The patient will straighten their arms and begin to pull the bar in a controlled manner using the back and gluteus muscles. The arms are straight with the back and gluteus doing the work. Then return to starting position.
7. Begin with a light load to allow full use of the patient's range of motion and gradually increase resistance.
8. Monitor for range of motion, smoothness, alignment and stabilization.

5 YEAR ORIGINAL EQUIPMENT WARRANTY

REPLACEMENT PARTS: Replacement parts from SHUTTLE SYSTEMS cardio-muscular conditioning equipment are available directly from SHUTTLE SYSTEMS. To place an order, call 1-800-334-5633. Please have the following information ready: model name and number, serial number, shipping address, and authorized payment information.

REPLACEMENT PART WARRANTY: SHUTTLE SYSTEMS makes every effort to assure that operating parts meet high quality and durability standard and warrants to the original retail consumer/purchaser of our parts that each such part(s) be free from defects in materials and workmanship for a period of two years from the date of parts purchase.

Wear-parts (Elasticords, rebound elastics, lock knobs, and torque handles) are warranted for one year.

PROOF OF PURCHASE: Please retain your dated sales receipt as proof of purchase to validate the warranty period. SHUTTLE SYSTEMS may require reasonable proof of purchase and we suggest you keep your invoice.

LIMITED ORIGINAL EQUIPMENT WARRANTY: SHUTTLE SYSTEMS makes every effort to assure that its products meet high quality and durability standards and warrants to the original retail consumer/purchaser of our products that each product be free from defects in workmanship and materials under normal and reasonable use and correct assembly (if assembly by consumer/purchase), as follows. Warranty does not apply to defects due directly or indirectly to misuse, abuse, negligence or accidents, repairs or alterations outside our facilities or to a lack of maintenance.

1. **LIMITED LIFETIME WARRANTY:** Bolted metal frames, stands, towers, kickplate frame and board, and carriage frame.
2. For a period of **FIVE YEARS:** Pulley systems, carriage handles, and wheels.
3. For a period of **TWO YEARS:** Upholstery, headrest, kickplate cover, harnesses, and grips.
4. For a period of **ONE YEAR:** Elasticords, rebound elastics, lock knobs, torque handles, and all other parts.

SHUTTLE SYSTEMS LIMITS ALL IMPLIED WARRANTIES THE PERIOD SPECIFIED ABOVE FROM THE DATE THE PRODUCT WAS PURCHASED AT RETAIL. EXCEPT AS STATED HEREIN, ANY IMPLIED WARRANTIES OR MERCHANTABILITY AND FITNESS EXCLUDED. SOME STATES DO NOT ALLOW LIMITATIONS ON HOW LONG THE IMPLIED WARRANTY LASTS, SO THE ABOVE LIMITATIONS MAY NOT APPLY TO YOU.

SHUTTLE SYSTEMS shall in no event be liable for death, injuries to persons or property or incidental, contingent, special or consequential damages arising from the use of our products. In administration of this warranty, SHUTTLE SYSTEMS may at its discretion request that the product or part must be returned for examination, postage prepaid, to our Bellingham facility. If such inspection discloses a defect, SHUTTLE SYSTEMS will either repair or replace the product with a comparable replacement. Neither SHUTTLE SYSTEMS dealers nor retail establishments selling this product have any authority to make any warranties or to promise remedies in addition to or inconsistent with those stated above. SHUTTLE SYSTEMS maximum liability, in any event, shall not exceed the purchase price of the product paid by the original consumer/purchaser. Some states do not allow the exclusion or limitation of incidental or consequential damages, so the above limitations or exclusions may not apply to you. This warranty gives you specific legal rights, and you may also have other rights which vary from state to state.

SUPPORT

Shuttle Technical Support Service provides:

- telephone consultation
- information about which parts are covered by the warranty and which must be paid for
- supply of original spare parts.

When you contact Shuttle Technical Support Service you must give the following information:

- Product model
- Serial number
- Precise description of the problem

Customer Service:

Hours of Operation

Monday : **8 am - 5 pm** Pacific Time
Tuesday : **8 am - 5 pm** Pacific Time
Wednesday : **8 am - 5 pm** Pacific Time
Thursday : **8 am - 5 pm** Pacific Time
Friday : **8 am - 5 pm** Pacific Time

Phone: +1 (800)-334-5633

We are closed for all major Holidays

Technical Support:

Hours of Operation

Monday : **8 am - 5 pm** Pacific Time
Tuesday : **8 am - 5 pm** Pacific Time
Wednesday : **8 am - 5 pm** Pacific Time
Thursday : **8 am - 5 pm** Pacific Time
Friday : **8 am - 5 pm** Pacific Time

Phone: +1 (800)-334-5633

We are closed for all major Holidays

Made in the
USA



Scan code to view our MiniPress
Parts



Scan code to view our MiniPress
YouTube Playlist

