Slider Transfer Boards

One family manual for standard and oversized listings in white and black.

SUPPORTED TRANSFERS ONLY. NEVER LIFT OR CARRY A PERSON.





Genuine product photographs with Titan branding. Photos identify appearance, not a dimensional scale or a chemical-compatibility approval.

Titan Medical + Titan Mortuary

A shared slider-board family for trained personnel conducting supported patient or first-call body transfers. Match the exact board and receiving equipment to the documented transfer plan; neither brand-family placement nor color establishes clinical suitability.

What this manual covers

Model identification, non-weight-bearing limitations, inspection, cleaning and disinfection principles, storage, maintenance boundaries and recordkeeping. This is a care and inspection manual, not a clinical operating IFU, an approved transfer technique or an engineering release.

Keep this manual with the equipment. Obtain exact-model operating instructions, material compatibility confirmation and facility-approved transfer training before patient use. No load rating, bridging distance, operator count, warranty extension or third-party fit guarantee is created here.

Models & published sizes

Identify the model from its equipment label, order record and product page, not from the photograph alone.

Model / color	Catalog designation	Published L × W
FS1-SB-STD-W / White	Standard • archived legacy	72.25 × 18.25 in
FS1-SB-STD-B / Black	Standard	72.25 × 18.25 in
FS1-SB-XL-B / Black	Oversized • archived legacy	72.75 × 22.25 in
TITAN-PSB-W72 / White	Standard	72.25 × 18.25 in
TITAN-PSB-WXL / White	Oversized	72.25 × 18.25 in • unresolved

Oversized white: dimension confirmation required

TITAN-PSB-WXL currently lists 72.25 × 18.25 in, the same as TITAN-PSB-W72. That is a catalog conflict, not confirmation that the boards are the same size. No new dimension has been inferred. Obtain written exact-model dimensions before fit-critical ordering or use.

Published material and construction

Existing Titan listings identify polyethylene construction, a smooth sliding surface and a thin, stackable profile. Do not infer thickness, mass, density grade, a load capacity or a handle count for another model. The 14-handle statement belongs to the listed black standard and legacy black oversized models.

Current models and legacy records

The current active records are FS1-SB-STD-B, TITAN-PSB-W72 and TITAN-PSB-WXL. FS1-SB-STD-W and FS1-SB-XL-B are included for identification of previously supplied equipment; their catalog listings remain archived. Catalog status does not certify the condition of an individual board.

Custom sizes, shapes and features

Custom sizes, shapes, colors and features may be requested. A request does not change the specifications of an existing board. Custom dimensions and intended support method require a separate written scope and review; this family manual is not a design approval.

Use boundaries & inspection

The board assists sliding between supported surfaces. It is not a stretcher, scoop stretcher, lifting board or spine board.

Never lift by the board or handholds

Use handholds to handle and position an empty board only. Do not lift, carry, suspend or drag a person by the board or handholds, and do not attach lifting slings, hoist hooks or restraints to them.

Do not bridge unsupported space

This family is non-weight-bearing. Do not assume a permissible gap, overhang, overlap or cantilever. The person must remain supported by the transfer surfaces under the approved exact-model procedure. If adequate support cannot be verified, do not proceed.

Plan the transfer with trained staff

Use the facility-approved safe-handling process and appropriate personnel and transfer equipment. Confirm receiving-surface stability, restraints and brakes under those devices' instructions. Patient positioning, spinal precautions, staffing and transfer technique are not prescribed here.

Inspect before each use and after an incident

Check both faces, every edge and each handhold for cracks, splits, deep scoring, sharp burrs, deformation, contamination or roughened sliding areas. Check that identification remains readable and that the board is clean, dry and free of sticky or oily residue.

Stop and quarantine when in doubt

Remove a board from service after damage, abnormal loading, heat exposure or suspected chemical attack. Tag it, segregate it and record the finding. Do not return it to use merely because it has been cleaned; obtain a documented disposition.

No inherited third-party claims

Do not assume radiolucency, MRI compatibility, flotation, vehicle-restraint approval, FDA clearance, CE status or compatibility with another manufacturer's cot or accessory. A similar appearance or shared family name establishes none of these.

Cleaning & disinfection

Research-informed general care. Exact-model chemical compatibility still requires confirmation.

1. Prepare and separate. Wear PPE selected by the facility risk assessment and chemical label. Separate soiled equipment from clean storage; prepare a cleanable work area and suitable wipes or soft cloths. Identify who is responsible for reprocessing.[1,2]

2. Remove soil first. Remove disposable coverings and visible contamination using the approved process. Wipe with a compatible mild detergent solution or approved combined cleaner/disinfectant. Do not transfer soil back onto a cleaned face with a dirty cloth.[1,2]

3. Clean every contact area. Wipe both faces, all four edges and the inner surfaces of every handhold. Support and turn the empty board safely so the underside is not missed or recontaminated. Use fresh wipes or cloths as needed.[2]

4. Disinfect with a compatible product. For patient-care use, select the facility-approved EPA-registered hospital disinfectant with the appropriate label claim and verified material compatibility. Follow the label dilution, application method and safety precautions; do not mix chemicals.[1,3]

5. Maintain the full wet time. Keep every treated area wet for the entire contact time on the selected disinfectant label. Reapply only as permitted by that label; do not assume a universal one-minute or ten-minute period.[2,3]

6. Rinse if required; dry and inspect. Complete any label-required rinse and allow the board to dry fully before return or storage. Reinspect for residue or surface damage. Clean/disinfect between users and when visibly soiled under facility policy.[1,2]

Compatibility boundary: polyethylene alone does not validate a chemical against this exact resin, finish or applied branding. No bleach concentration, alcohol percentage, soaking, autoclaving or heat cycle is approved by this manual. Ask support for the exact-model validated method when it is unavailable.

1. CDC, equipment care and compatibility: https://www.cdc.gov/healthcare-associated-infections/hcp/cleaning-global/procedures.html

2. WRHA, rigid sliders/boards, p. 4: https://professionals.wrha.mb.ca/old/extranet/ipc/files/transfer-equipment-devices-cleaning-sws.pdf

3. CDC, noncritical devices and label directions: https://www.cdc.gov/infection-control/hcp/disinfection-sterilization/summary-recommendations.html

Maintenance, storage & family

No routine lubrication is specified for these solid slider boards.

Do not modify or repair without authorization

Do not drill new holes, cut handholds, sand or flame-treat the surface, weld plastic, fill cracks, add adhesive grip pads or change the contour. Do not apply oils, waxes, silicone sprays or other lubricants to alter sliding behavior. Seek a written model-specific disposition.

Store clean, dry and supported

After cleaning and complete drying, use a designated clean storage area separate from used equipment. Protect from heat, sunlight, contamination, heavy objects and sustained bending. Do not store on the floor. The storage method must not distort the board.[1,4]

Record and escalate

Keep the model, serial/lot identifier if present, purchase record, inspection findings and cleaning product information together. Report damage, unusual surface changes or unreadable identification to support. Annual signoffs are a record format, not a validated service interval or replacement life.

Product QR directory

FS1-SB-STD-B
Standard black
Open product page

TITAN-PSB-W72
Standard white
Open product page

TITAN-PSB-WXL
Oversized white
Open product page

Related Titan families: Titan Medical EMS stretchers · Stair chairs · Titan Mortuary cots · Trays and boards. Related products are separate families, not automatic fits or included accessories.

Model-specific support: mymortuarycooler.com/pages/tech-support · 1-888-792-9315. Identify the model and provide clear equipment photos with your documentation request.

1. CDC, clean-equipment storage: https://www.cdc.gov/healthcare-associated-infections/hcp/cleaning-global/procedures.html

4. MSF, transfer-board care and off-floor storage: https://unicat.msf.org/cat/product/12948

Equipment & training records

Complete for the individual board. Do not record patient names or clinical identifiers.

Equipment identity	Enter details
Model / color / measured size	
Serial / lot / asset number, if present	
Owner / location / purchase reference	
Date placed in service / responsible person	

Training record

Date	Person / trainer	Topic / exact IFU revision	Signoff

First five annual inspection signoffs

Use in addition to pre-use checks and the actual facility/model inspection schedule. A signature records the inspection; it is not certification or permission to ignore a defect.

Year / date	Inspector / company	Findings / disposition / signature
1 /		
2 /		
3 /		
4 /		
5 /		

Continuing dated care & service log

Record inspection, cleaning/disinfection, incident follow-up and disposition. Add sheets as needed.

Model / asset ID: _____ Owner: _____

For cleaning entries, record product, dilution if applicable, label wet time and completion. For a defect, record quarantine and the authorized return-to-service or replacement decision.

Date / activity	Findings / product / wet time / work / reference	Person / company / disposition

Notes

Keep additional equipment observations and document references here. No patient-identifying information.