InTouch[®] Critical Care Bed REF Model FL27 (2131/2141)

Version 2.5

SCRY/EP®



For parts or technical assistance call: USA: 1-800-327-0770

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Warning/Caution, consult accompanying documentation



Safe Working Load



Alternating Current



Fuse Rating for Beds with the 100V ~ or 120V ~ Electric System



Fuse Rating for Beds with the 200V $\tilde{}$ or 220V $\tilde{}$ or 240V $\tilde{}$ Electric System



Type B Equipment: equipment providing a particular degree of protection against electric shock, particularly regarding allowable leakage current and reliability of the protective earth connection.

Class 1 Equipment: equipment in which protection against electric shock does not rely on BASIC INSULATION only, but which includes an additional safety precaution in that means are provided for the connection of the EQUIPMENT to the protective earth conductor in the fixed wiring of the installation in such a way that ACCESSIBLE METAL PARTS cannot become live in the event of a failure of the BASIC INSULATION.

Mode of Operation: Continuous



Protection from liquid splash



Dangerous Voltage



Protective Earth Terminal



Potential Equalization



Medical Equipment approved by the Canadian Standards Association with Respect to Electric Shock, Fire, Mechanical and Other Specified Hazards.



In accordance with European Directive 2002/96/EC on Waste Electrical and Electronic Equipment, this symbol indicates that the product must not be disposed of as unsorted municipal waste, but should be collected separately. Refer to your local distributor for return and/or collection systems available in your country.



Model Number



Manufacturer

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WARNING / CAUTION / NOTE DEFINITION

The words WARNING, CAUTION, and NOTE carry special meanings and should be carefully reviewed.

MARNING

Alerts the reader about a situation, which if not avoided, could result in death or serious injury. It may also describe potential serious adverse reactions and safety hazards.

Alerts the reader of a potentially hazardous situation, which if not avoided, may result in minor or moderate injury to the user or patient or damage to the equipment or other property. This includes special care necessary for the safe and effective use of the device and the care necessary to avoid damage to a device that may occur as a result of use or misuse.

Note

This provides special information to make maintenance easier or important instructions clearer.

INTENDED USE

This manual is designed to assist you with the operation of Stryker *In*Touch® Critical Care Bed Model FL27 (2131/2141). Carefully read this manual thoroughly before using the equipment or beginning maintenance on it. To ensure safe operation of this equipment, it is recommended that methods and procedures be established for educating and training staff on the safe operation of this bed.

This Operations Manual is an integral part of the bed and should be included if the bed is sold or transferred.

BRIEF PRODUCT DESCRIPTION AND INTENDED USE STATEMENT

INTENDED MEDICAL INDICATIONS: In-touch is an AC-powered adjustable hospital bed designed to position patients for procedures, therapy, and recovery in healthcare environment, transport patients between bays and procedural rooms, provide patient security, measure and display patient weight, allow patients to alert caregiver when the patient requires emergency assistance or any assistance to improve comfort levels, and monitor patient position to alert caregiver of a deliberate exit or potential fall. The bed has thirty-nine prerecorded clinical phrases in 24 languages and offers music therapy.

INTENDED PATIENT POPULATION: The intended patient population is acute-care human patients. The safe working load (i.e. the sum of the patient, the mattress, and accessory weight) for InTouch is 550lbs (250kg). This bed is not intended for use with patients 35 inches or less and/or patients that weigh less than 50 pounds.

INTENDED PART OF THE BODY: InTouch is intended to support a patient. It is intended to be used with a sleep surface. The Frame can come in contact with human skin but a patient should never be on the frame without a support surface.

INTENDED USER PROFILE: InTouch is intended for use in Acute Care settings. These settings may include critical care, step down, progressive care, med/surg, sub-acute care, and post anesthesia care unit (PACU) or other locations as prescribed. Intended operators are health care professionals (nurses, nurse aids, doctors) which can use all bed operations (e.g., bed motion functions, nurse call, siderail communications, bed exit, therapy options), patient and bystander, which can use bed motion functions, nurse call & siderail communications, and trained professionals for installation, service, and calibration.

INTENDED CONDITION OF USE AND EXPECTED LIFE: Stryker Medical Bed products are designed for a 10 year expected service life under normal use, conditions, and with appropriate periodic maintenance as described in the maintenance manual for each device. Stryker warrants to the original purchaser that the welds on its Bed products will be free from structural defects for the expected 10 year life of the Bed product as long as the original purchaser owns the products.

The product is intended to be used in a healthcare environment, including hospitals, surgery centers, long term acute care centers, and rehabilitation centers. The intended environmental conditions are 10 to 40 degrees Celsius and 30 to 75% RH. The product is compatible with 35" x 84" surfaces, the facility nurse call system, standard Med-Surg equipment, and the facility infrastructure. InTouch is intended to be used with a 6"-8.5" sleep surface; asleep surface or overlay greater than 6" that offers therapeutic value may be used with, patient supervision.

PRODUCT ILLUSTRATION



SPECIFICATIONS

	Safe Working Load			
	Note: Safe Working Load indicates the sum of the patient, mattress and accessory weight.	550 lbs 249 kg		
Bed Weigh	it	750 lbs	340.2 kg	
Overall Be	d Length	90"	228,6 cm	
Overall Be	d Siderails Up	42"	106,7 cm	
Width	Siderails Down	40"	102,9 cm	
Base	Under Bed Clearance	5"	12,7 cm	
Litter	Patient Surface Width Length Length (with Optional Bed Extender) 	35" 84" 90"	88,9 cm 213,4 cm 228,6 cm	
	Seat Section Depth 	18.5"	47 cm	
	Foot Section Length Angle 	29" 0° to 50°	73,7 cm 0° to 50°	
	Fowler Section Length Width Angle 	36" 34" to 35" 0° to 70°	91,4 cm 86,4 cm - 88,9 cm 0° to 70°	
	Gatch Section Length Width Angle 	18" 34" to 35" 0° to 15°	45,7 cm 86,4 cm - 88,9 cm 0° to 15°	
	Cardiac Chair • Standard Cardiac Chair Position • Enhanced Cardiac Chair Position	Head: 65°, Seat: 17°, Foot: 30°, Trend: 3° Head: 70°, Seat: 19°, Foot: 47°, Trend: 3°		
Fowler	Length	36.5"	92,7 cm	
Bed Lift	Height (high) to top of litter	33"	83,8 cm	
System	Height (low) to top of litter	16" 40,6 cm		
	Trendelenburg/Reverse Trendelenburg	12°		
	Bed Lift Time	35 seconds maximum from lowest to highest position		
Scale Syst	em Capacity	550 lbs	249 kg	
Accuracy: • For weight from 100 lb to 550 lb • For weight from 100 lb to 550 lb • For weight under 100 lb		+/- 2% when in Trendelenburg or Reverse Trendelenburg +/- 2% when Flat +/- 2 lb when in Trendelenburg or Reverse Trendelenburg +/- 2 lb when Flat		
CPR Syste	rem Speed to level bed from any position • Fowler 15 seconds • Foot and Seat 60 seconds			
Drive System Speed (Optional Zoom® Drive) • Forward • Backwards		3.6 mph 2.5 mph	5.8 km/h 4.0 km/h	

SPECIFICATIONS (CONTINUED)

	Recommended Mattress Size	35" x 84" x 6"	88,9 cm x 213,4 cm x 15,2 cm	
	With Bed Extender DM64196 (PositionPRO) (35" x 6" x 4")	35" x 90" x 4"	88,9 cm x 228,6 cm x 10,1 cm	
	• With Bed Extender DM64197 (XPRT™) (35" x 6" x 5.5")	35" x 90" x 5.5"	88,9 cm x 228,6 cm x 13,9 cm	
Mattress	Recommended Air Mattress Size • With Bed Extender DM64196	35" x 84" x 6" - 8.5"	88,9 cm x 213,4 cm x 15,2 cm - 21,6 cm	
	(PositionPRO) (35" x 6" x 4")	35" x 90" x 4"	88,9 cm x 228,6 cm x 10,1 cm	
	• With Bed Extender DM64197 (XPRT™) (35" x 6" x 5.5")	35" x 90" x 5.5"	88,9 cm x 228,6 cm x 13,9 cm	
Maximum	Without Optional Auxiliary Outlet (120VAC Only)	4.8 Amps		
Consumption	With Optional Auxiliary Outlet(s) (120VAC Only)	9.8 Amps		
	Storage Ambient Temperature Relative Humidity Atmospheric Pressure 	-40°F to 158°F 10 to 100% 500 to 1060 hPa	-40°C to 70°C	
Environmental Conditions	Operating Ambient Temperature Relative Humidity Atmospheric Pressure Scale Accuracy 	50°F to 104°F 30 to 75% 700 to 1060 hPa 18 °C to 25 °C	10°C to 40°C 64 °F to 77 °F	
Electrical Requirements	All electrical requirements meet CSA C22.2 No. 601.1, UL 60601-1 and IEC 60601-1.60601-2-38 specifications. $\begin{array}{c} 100V\sim, 50{-}60Hz, 7.5A - Two 250V, 10A \ Fuses 120 \pm 10\% \ Vac, 50/60Hz - Two 250V, 10A \ Fuses 20V\sim, 50{-}60Hz, 4.0A \ (9.8A \ with 120V \ Option Outlet) - Two 250V, 10A \ Fuses 20V\sim, 50{-}60Hz, 3.2A \ -Two 250V, 10A \ Fuses 220V\sim, 50{-}60Hz, 2.9A \ -Two 250V, 10A \ Fuses 240V\sim, 50{-}60Hz, 2.7A \ -Two 250V, 10A \ Fuses 240V\sim, 50{-}60Hz, 2.7A \ -Two 250V, 10A \ Fuses 240V\sim, 50{-}60Hz, 2.7A \ -Two 250V, 10A \ Fuses 240V\sim, 50{-}60Hz, 2.7A \ -Two 250V, 10A \ Fuses 240V\sim, 50{-}60Hz, 2.7A \ -Two 250V, 10A \ Fuses 240V\sim, 50{-}60Hz, 2.7A \ -Two 250V, 10A \ Fuses 240V\sim, 50{-}60Hz, 2.7A \ -Two 250V, 10A \ Fuses 240V\sim, 50{-}60Hz, 2.7A \ -Two 250V, 10A \ Fuses 240V\sim, 50{-}60Hz, 2.7A \ -Two 250V, 10A \ Fuses 240V\sim, 50{-}60Hz, 2.7A \ -Two 250V, 10A \ Fuses 240V\sim, 50{-}60Hz, 2.7A \ -Two 250V, 10A \ Fuses 240V\sim, 50{-}60Hz, 2.7A \ -Two 250V, 10A \ Fuses 240V\sim, 50{-}60Hz, 2.7A \ -Two 250V, 10A \ Fuses 240V\sim, 50{-}60Hz, 2.7A \ -Two 250V, 10A \ Fuses 240V\sim, 50{-}60Hz, 2.7A \ -Two 250V, 10A \ Fuses 240V\sim, 50{-}60Hz, 2.7A \ -Two 250V, 10A \ Fuses 240V\sim, 50{-}60Hz, 2.7A \ -Two 250V, 10A \ Fuses 240V\sim, 50{-}60Hz, 2.7A \ -Two 250V, 10A \ Fuses 240V\sim, 50{-}60Hz, 2.7A \ -Two 250V, 10A \ Fuses 240V\sim, 50{-}60Hz, 2.7A \ -Two 250V, 10A \ Fuses 240V\sim, 50{-}60Hz, 2.7A \ -Two 250V, 10A \ Fuses 240V\sim, 50{-}60Hz, 2.7A \ -Two 250V, 10A \ Fuses 240V\sim, 50{-}60Hz, 2.7A \ -Two 250V, 10A $		wo 250V, 10A Fuses - Two 250V, 10A Fuses 0.8A with 120V Optional Auxiliary Fuses wo 250V, 10A Fuses wo 250V, 10A Fuses wo 250V, 10A Fuses	
Battery	12 V, 17.6 Ahr, Sealed Lead-Acid Battery (Part Number QDF9188) 3.0 V 220mAh Lithium Battery, Size 20mm - Varta Int. CR2032 Coin Cell PC Battery Holder, Size 20mm - MDP Int. BA2032			

Stryker reserves the right to change specifications without notice.

Specifications listed are approximate and may vary slightly from unit to unit or by power supply fluctuations.

Before operating the bed, it is important to read and understand all information in this manual. Carefully read and strictly follow the safety guidelines listed below.

Note

To ensure safe operations of the bed, methods and procedures must be established for educating and training hospital staff on the intrinsic risks associated with the usage of electric beds.

A WARNING

- To prevent permanent damage to this unit, the unit must reach room temperature prior to conducting any setup and/or unit operations.
- The Weigh system is intended to assist in the monitoring of the patient's weight variation. Under no circumstances should its reading be used as sole reference for medical treatment.
- Preventative maintenance should be performed at least once a year to ensure all bed features are functioning properly.
- This bed is not intended for pediatric use, i.e, for any patient measuring 35 inches (88,9 cm) or less.
- This bed is equipped with a hospital grade plug for protection against shock hazard. It must be plugged directly
 into a properly grounded receptacle. Grounding reliability can be achieved only when a hospital grade receptacle
 is used.
- Shock Hazard Improper handling of the power cord may result in damage to the power cord and potential shock hazards. If damage has occurred to the power cord, immediately remove the bed from service and contact the appropriate maintenance personnel. Failure to do so could result in serious injury or death.
- Serious injury can result if caution is not used when operating the bed. Operate the bed only when all people and equipment are clear of the electrical and mechanical systems.
- Always apply the brakes when a patient is on the bed or entering/exiting the bed. Serious injury could result if the bed moves while a patient is getting on or off the bed. Once the brake pedal is engaged, push on the bed to ensure the brakes are securely applied. Do the same test when using the electrical brake.
- To help reduce the number and severity of a potential fall when the patient is unattended, keep the siderails in the fully raised position and the sleep surface horizontal in its lowest position, unless his/her medical condition dictates otherwise. When raising the siderails, be sure that you hear the "click" that signals the locked condition. Pull firmly on the siderail to ensure it is locked into position.
- When the sleep surface sections are articulated, ensure that all the patient's limbs are within the raised siderails to avoid patient injury.
- When a patient's condition requires greater safety measures for his/her security, use the lockout controls in the footboard control panel to inhibit the siderail functions or remove any optional pendant control and install protective pads on the siderails.
- Siderails, with or without their padded covers, are not intended to serve as restraint devices to keep patient from exiting the bed. Siderails are designed to keep a patient from inadvertently rolling off the bed. It is the responsibility of the attending medical personnel to determine the degree of restraint necessary to ensure a patient will remain safely in bed. Failure to use the siderails properly could result in serious patient injury.
- To reduce risk of injury, ensure the sleep surface is horizontal and in the lowest position with the siderails fully raised and locked when moving the bed with a patient in it.
- To avoid injury to the patient and/or user, do not attempt to move the bed laterally with the steer mode engaged. The steer wheel cannot swivel.
- The CPR emergency pedal is for emergency use only. When activating the CPR pedal, all people and equipment must be removed from the area below and around the head, thigh and foot sections of the bed or serious personal injury and/or equipment damage could occur.
- The manual backup brake is for emergency use only. It should not be used for any other situation than an emergency or it might get overused when the time comes to use it for an emergency.
- Possible fire hazard exists when this bed is used with oxygen administering equipment other than nasal, mask type
 or half bed-length tent type. Unplug the bed power cord from the wall when oxygen administering equipment is used.
 When using a half bed-length tent type, ensure that the siderails are outside the oxygen tent and that the tent does
 not extend below the mattress support level.

WARNING (CONTINUED)

- The Bed Exit system (optional) is intended only to aid in the detection of a patient exiting the bed. It is not intended to replace patient monitoring protocol. The Bed Exit system signals when a patient is about to exit the bed. The addition or removal of equipment with the Bed Exit system armed must be done using the "Adding or Removing Equipment with the System Armed" procedure, otherwise the sensitivity of the system may be affected and the readings of the patient's movements in the bed be erroneous.
- The Weigh system as well as the Bed Exit system must be adjusted if accessories are added when either system is in function.
- · The maximum load capacity of the Monitor Tray is 40 lbs (18kg).
- · The maximum load capacity of the tubular support is 150 lbs (68 kg).
- The Bed Exit system is not designed to be used with patients weighing less than 50 lbs (23 kg).
- Do not route the power cord between the mattress and the bed frame.
- · Do not attach the power cord to any moving parts of the bed frame.
- The power cord could be pinched and may cause electrical shock if a bed extender is used.
- Ensure connector 'A' is securely fixed (see Figure B).
- Do not sit on the bed extender. This may cause the bed to flip.
- Do not steam clean, hose off or ultrasonically clean the bed. Do not immerse any part of the bed. The internal
 electrical parts may be damaged by exposure to water. Hand wash regularly all surfaces of the bed with warm
 water and a mild detergent. Wipe cleaned surfaces dry to avoid build-up of cleaning substance. Inspect the
 mattress after each use. Discontinue use if any cracks or rips, which may allow fluid to enter the mattress, are
 found in the mattress cover. Failure to properly clean the mattress, or dispose of it if defective, may increase the
 risk of exposure to pathogenic substances and may bring about diseases to the patient and user.
- Always unplug the bed power cord from the wall socket when servicing or cleaning the bed. When working under the bed with the bed in the high position, always apply the brakes and place blocks under the Bed Lift levers to prevent injury in case the Bed Down switch is accidentally pressed.
- Improperly adjusted restraint straps can cause serious injury to a patient. It is the responsibility of the attending
 medical personnel to determine proper use of the restraint straps and restraint strap locations. Stryker is not
 responsible for the type and/or use of restraint straps on any of Stryker's products.
- Use only hospital grade electric equipment consuming 5A or less with the auxiliary power outlet (optional). The use of standard electric equipment may bring the current leakage to a level unacceptable for hospital equipment.
- Battery posts, terminals and related accessories contain lead and lead compounds, chemicals known to the State
 of California to cause cancer and birth defects or other reproductive harm. Wash hands after handling.
- Do not modify the *In*Touch[®] bed. Modifying the unit can cause unpredictable operation resulting in injury to the patient or user. Modifying the unit will also void this warranty.

- The weight of the I.V. bags should not exceed 22 lbs (10 kg).
- The mattress thickness should not exceed 6 inches (15,24 cm).
- When using a mattress thicker than 6 inches (15,24 cm) or a mattress overlay, extra caution and/or patient supervision may be required to reduce the likelihood of occurence of a patient fall.
- Preventative maintenance should be performed at least once a year to ensure all bed features are functioning properly. Ensure that any bed malfunction is promptly reported to your service personnel for immediate attention.
- When large fluid spills occur in the area of the circuit boards, cables and motors, immediately unplug the bed power cord from the wall socket, remove the patient from the bed and clean up the fluid. Have maintenance completely check the bed. Fluids can have an adverse effect on operational capabilities of any electrical product. DO NOT put the bed back into service until it is completely dried and has been thoroughly tested for safe operation. Ensure, among other things, that the plastic components being used as covers for the siderail mechanism arms and the foot end casing are removed and that the parts they cover are thoroughly dried.
- Clean Velcro AFTER EACH USE. Saturate Velcro with disinfectant and allow disinfectant to evaporate. (Appropriate disinfectant for nylon Velcro should be determined by the hospital.)
- To avoid damage to the siderail mechanisms, do not move the bed using the raised siderails. Move the bed using the handles integrated to the boards.

CAUTION (CONTINUED)

- Because individual beds may have different options, footboards should not be moved from one bed to another. Mixing footboards could result in unpredictable bed operation.
- · When servicing use only identical replacement parts provided by Stryker.
- Some cleaning products are corrosive in nature and may cause damage to the product if used improperly. If the
 products described above are used to clean Stryker patient care equipment, measures must be taken to ensure
 the beds are wiped with a damp cloth soaked in clean water and thoroughly dried following cleaning. Failure to
 properly rinse and dry the beds will leave a corrosive residue on the surface of the bed, possibly causing premature
 corrosion of critical components. Failure to follow the above directions when using these types of cleaners may void
 this product's warranty.

Note

- Throughout this Operations Manual, the words "right" and "left" refer to the right and left sides of a patient lying on his/her back on the bed.
- The addition of accessories affects the motion of the bed.
- The *i*Bed option is only used as an informational feature and is not supposed to replace normal patient monitoring protocol.

OPTIONAL ZOOM® DRIVE SYSTEM (MODEL 2141 ONLY)

In addition to the previous warnings and cautions, all of the following warnings and cautions apply to units equipped with the Zoom[®].

- The 2141 *In*Touch® Bed is intended for use by trained hospital personnel only. Failure to properly train personnel could result in injury.
- USE CAUTION while maneuvering the unit with the drive wheel activated. Always ensure there are no obstacles near the unit while the drive wheel is activated. Injury to the patient, user or bystanders or damage to the frame or surrounding equipment could occur if the unit collides with an obstacle.
- Use caution when transporting the unit down halls, through doors, in and out of elevators, etc. Damage to the siderails or other parts of the unit could occur if the unit comes in contact with walls or door frames.
- Put the drive wheel in the neutral position and release the brake before pushing the unit manually. For 2141 models; push the Brake Off button to disengage drive wheel (Zoom[®]) before pushing the unit manually. Do not attempt to push the unit manually with the drive wheel engaged. The unit will be difficult to push and injury could result.
- If unanticipated motion occurs, unplug the power cord from the wall socket, push the battery power on/off switch to the "OFF" (0) position (the LED will not be illuminated), actuate the drive wheel pedal to the neutral position and call maintenance.
- The power save mode is activated after one hour on battery power with no motion release switch activation. Functions including Bed Exit, Scale and Motion will cease to operate when the unit enters the power save mode. Injury to the patient could occur if proper patient monitoring protocol is not observed.
- Always unplug the power cord and push the battery power on/off switch to the "OFF" (0) position before service or cleaning. When working under the frame, always support the litter frame to prevent injury in case the Bed Down switch is accidently activated.

To prevent permanent damage to this unit, the unit must reach room temperature prior to conducting any setup and/or unit operations.

It is important to ensure that the bed is working properly before it is put into service. The following list will help ensure that each part of the bed is checked.

· Install the foot and headboards on the bed. Insert the footboard carefully so that the footboard fit in smoothly.

Because individual beds may have different options, footboards should not be moved from one bed to another. Mixing footboards could result in unpredictable bed operation.

- Plug the power cord to the bed connector at the head end of the bed and into a properly grounded hospital grade wall socket.
- Turn the battery power switch to the "ON" (1) position (located below the litter surface at patient right side).
- Set the time and date through the touch screen (see page 44 for procedure).

This bed is equipped with a hospital grade plug for protection against shock hazard. It must be plugged directly into a properly grounded receptacle. Grounding reliability can be achieved only when a hospital grade receptacle is used.

- To test the manual backup brake (located on the patients right side only), flip the manual backup brake pedal outward and depress down fully on the foot end side of the pedal. The word BRAKE in red will be visible in the clear window located on the base next to the pedal and the Brake symbol will be flashing on the footboard control panel. The brakes should now be applied.
- To test the electric brake; engage the brake by pressing the brake button on the siderail or footboard control panel. Try moving the bed to ensure the brakes are applied. Press the Neutral or Brake button on the siderail control panel or on the footboard to disengage the brake.
- For Model 2141 Beds only: On the patient's right side of the bed, flip the manual backup brake pedal outward and depress down fully on the head side of the pedal. The letter D in GREEN should be visible in the clear window located on the base next to the pedal. The Zoom[®] Drive wheel should now be engaged. Depress down fully on the center of the pedal until the letter N in BLUE is visible in the clear window. The Zoom[®] Drive wheel should now be disengaged.
- Ensure that the siderails raise, lock in the fully raised position and lower smoothly.
- Run through each control on the footboard.
- · Verify the scale system and the Bed Exit system for proper operation.
- Run through each control on both inner and outer control panels of the head siderails. If the bed is equipped with
 the optional Communication Pendant, plug the provided cable to the 37-pin connector located at the head end of
 the bed and into the proper wall socket.
- Raise the bed completely and activate the Trendelenburg function. Ensure the head end lowers to the full down position. See "Nurse Control" illustration on page 24. Level the bed using the Bed Lift system controls.
- Raise the bed completely and activate the reverse Trendelenburg function. Ensure the foot end lowers to the full down position. See "Nurse Control" illustration on page 24. Level the bed using the Bed Lift system controls.
- Verify functionality of the CPR emergency release: raise the fowler up then depress down on the CPR pedal located on either side of the bed at the head end of the bese. The fowler will lower towards a flat position until the pedal is released.
- Ensure the Knee Gatch (if raised) also starts flattening when the Fowler is completely down. Following the complete lowering of the Fowler, wait approximately 30 seconds (the time for the Fowler control motor to reset) and verify that the motor has indeed reset by raising the Fowler fully up using the "Fowler Up" control.
- Verify the following optional equipment for proper operation: 120V auxiliary outlet, night light, emergency crank operation, etc.

OPTIONAL XPRT™ THERAPY MATTRESS

If your bed is equipped with the **XPRT[™]** Therapy Mattress option, perform the following setup procedures to install the Mattress. For graphic representation of the setup procedures, refer to the **XPRT[™]** Therapy Mattress Operations Manual.

When using a mattress thicker than 6 inches (15,24 cm) or a mattress overlay, extra caution and/or patient supervision may be required to reduce the likelihood of occurence of a patient fall.

- 1. Place mattress over bed litter with printed logo at head end of the bed.
- 2. Fold back foot end section of mattress.
- 3. Place foot box on foot end of bed litter.
- 4. Connect the two (2) color coded connectors on the foot box to the corresponding color coded connectors on the mattress. Connect black connection on foot box to cable adapter 2950-001-180 and then to the bed frame.
- 5. Turn the locking collars clockwise to secure the connections.
- 6. Connect the other end of the black connector to the bed (left side of litter at foot end behind the accessory outlet).
- 7. Connect the air line from the mattress to the corresponding fitting on the foot box.
- 8. Fasten the two (2) retaining clips to the two (2) D-Rings on the foot box.
- 9. Lower the foot section of mattress over the foot box. Attach the mattress to the bed frame using the mattress tie-downs.
- 10. Apply linens utilizing the "D" rings for the flat sheet.
- 11. To secure linens, to mattress, thread four corners through D-Rings attached to mattress.
- 12. To ensure proper therapy, do not pull linens taut. The linens should remain loose and wrinkly on the surface of the mattress.
- 13. Plug the mattress power cord into a properly grounded, hospital grade receptacle.

Note

The *In*Touch[®] bed will detect when the mattress has been connected as well as what type of mattress it is. This will be shown on the *In*Touch[®] screen.

MARNING

- Do not route the power cord between the mattress and the bed frame.
- Do not attach the power cord to any moving parts of the bed frame.
- · The power cord could be pinched and may cause electrical shock if a bed extender is used.

OPTIONAL POSITIONPRO™ PATIENT REPOSITIONING MATTRESS OPTION

If your bed is equipped with the Position PRO[™] Patient Repositioning Mattress option, perform the following setup procedures to install the mattress. For graphic representation of the setup procedures, refer to the Position PRO[™] Mattress Operations Manual.

When using a mattress thicker than 6 inches (15,24 cm) or a mattress overlay, extra caution and/or patient supervision may be required to reduce the likelihood of occurence of a patient fall.

- 1. Place the mattress onto the bed.
- 2. Flip the foot section towards the head end.
- 3. Place the control box (upside down) into the opening in the foot section.
- 4. Connect outer transparent tubes to manifold, matching the color coding.

OPTIONAL POSITIONPRO[™] PATIENT REPOSITIONING MATTRESS OPTION (CONTINUED)

- 5. Connect tilt sensor cables.
 - a. Align the white dots.
 - b. Twist clockwise to fasten.
- 6. Connect pendant cable.
- 7. Connect power cord (4') and turn the switch to on. **Note:** The switch is hidden under the power cord.
- 8. Fasten straps over the power cord.
- 9. Install the power cord in the two (2) retaining clips.
- 10. Fasten the three (3) retaining straps.
- 11. Carefully rotate the foot end control box and the mattress into the flat position.

Gently lower the foot end section to not damage the control box.

- 12. Fasten the retaining straps to secure the mattress to the bed frame (four (4) straps total).
- 13. Connect the power cord to the 110V outlet on the bed.

Applying the linens

- 1. Apply the linens using the "D" rings for the flat sheet.
- 2. To effectively use the "Turn Assist", do not pull linens taut. Linens should remain loose and wrinkly on surface of the mattress.

Ensure that you have always access to the CPR straps.

OPTIONAL ZOOM® DRIVE SYSTEM (MODEL 2141 ONLY)

If your bed is equipped with the Optional Zoom[®] Drive System, run through the preceding setup procedures and continue with the procedures listed below.

- With the battery power switch in the "ON" position and the drive wheel in the neutral position (not touching the floor), ensure the "Engage Drive Wheel" LED on the head end control panel is illuminated.
- Run through the operation of the drive wheel (see page 60) to ensure it is operating properly.
- On both sides of the bed, flip the manual backup brake pedal outward and depress down fully on the head side of the pedal. The letter D in GREEN should be visible in the clear window located on the base next to the pedal. The Zoom® drive (2141 Model only) should now be engaged. Depress down fully on the center of the pedal until the letter N in BLUE is visible in the clear window. The Zoom[®] drive should now be disengaged.

POWERING THE BED

When the bed power switch is turned off or in the event of a power failure, the settings of the lockout controls and the calibration data of the Scale and the Bed Exit (optional) systems are preserved.

Note

The bed is provided with batteries which will charge themselves while the bed is connected to the wall socket. When the "Battery Low" light is on you must connect the bed to make sure the battery will be recharged. Also, make sure the battery disconnect switch is turned on.

Shock Hazard - Improper handling of the power cord may result in damage to the power cord and potential shock hazards. If damage has occurred to the power cord, immediately remove the bed from service and contact the appropriate maintenance personnel. Failure to do so could result in serious injury or death.

MODES OF OPERATION WITH THE BATTERY

A power outage to the boards will initiate the battery mode. During the operation in the battery mode, the system will set itself in the following modes:

Sleep Mode:	This mode occurs as a result of the absence of electricity and no activity has been detected from the control panels for 5 minutes. Also, after 1 hour with no activity when the bed is on DC power, the touch screen turns off and the sleep mode occurs.	
Alarm Mode before Dead Mode:	The Alarm Mode before Dead Mode occurs if, while the system is in the Sleep Mode, the Bed Exit is activated and if there is no activity in regards to the control panels of the bed for a period of 4 hours or the batteries are weak.	
Dead Mode:	The Dead Mode is activated if, while the bed is in the Sleep Mode, the Bed Exit is not activated and there is no activity on the control panels for a period of 1 hour or the batteries are weak. This mode is also activated after 15 minutes if, while the system is in the Alarm Mode before Dead Mode, the power is not back and there is no activity on the control panels.	
Normal Mode:	This is activated under the following conditions:1. The power is back or if any sign of activity is detected back on the control panels.2. The touch screen is no longer in the calibration state.	
Power Up Mode:	If the power supply is back (that is, the bed is plugged back to the wall socket or the power outage is over), the system will exit the Dead Mode to go to the Power Up Mode if the batteries no longer have power and need to be recharged. The system then goes to the Initialization Mode which goes back to the Normal Mode.	

Note

The time needed to charge both batteries completely is approximately 8 hours.

BRAKE / DRIVE / NEUTRAL OPERATION

The bed's brake system can be used in electronic or manual mode.

Electronic Mode

- To **engage** one of these systems: press on the "Brake", "Drive" or "Neutral" button located on the footboard and on each head siderail.
- To disengage the brake: press on one of the following buttons: "Brake", "Neutral" or "Drive".
- To **disengage** the neutral and drive, press on one of the two buttons not selected.

These systems can also be disengaged using the pedal. To do so, simply flip the pedal to one of the systems not in use.

Manual Mode

- To engage the brake, drive or neutral system, flip the pedal on the side of the base to the desired system.
- To **disengage** these systems, flip the pedal to one of the systems not in use. The electronic mode could also be used to disengage the systems.

- Always apply the brakes when a patient is on the bed (except during transport) or entering/exiting the bed. Serious
 injury could result if the bed moves while a patient is getting on or off the bed. Once the brake pedal is manually
 engaged, push on the bed to ensure the brakes are securely applied.
- To reduce risk of injury, ensure the sleep surface is horizontal and in the lowest position with the siderails fully raised and locked when moving the bed with a patient in it.
- To avoid injury to the patient and/or user, do not attempt to move the bed laterally with the Drive mode activated; the Drive wheel cannot swivel.

CPR EMERGENCY RELEASE

When quick access to the patient is needed and the Fowler, Gatch, or Foot end are raised, the bed can be positioned at 0° by pressing on the CPR pedal. The Fowler, Gatch and Foot end will automatically flatten.

The CPR pedal is for emergency use only. When activating the CPR pedal, all people and equipment must be removed from the area below and around the head, thigh and foot sections of the bed or serious personal injury or equipment damage could occur.

Lowering the Fowler During a Power Failure

If there is a power failure and the backup battery is out, the CPR pedal can be used to partially or completely lower the Fowler. Simply depress the CPR pedal until the desired angle is reached.

FOLEY BAG HOOKS

The four Foley bag hooks are located on both sides of the bed frame under the foot and seat sections. Two are centered and isolated.

Note

The Foley bag hooks move when the Fowler is activated. Fowler motion must be locked out when using these hooks to avoid inadvertent movement of the hooks.

PATIENT RESTRAINT LOCATIONS

The bed has 12 locations on the mattress support for installing patient restraint straps. Ten of them are located on the mattress support edges directly across from each other and the remaining two are located on the top edge of the head section.

Improperly adjusted restraint straps can cause serious injury to a patient. It is the **responsibility of the attending medical personnel** to determine proper use of the restraint straps and restraint strap locations. Stryker is not responsible for the type and/or use of restraint straps on any of Stryker's products.

Clean Velcro AFTER EACH USE. Saturate Velcro with disinfectant and allow disinfectant to evaporate. (Appropriate disinfectant for nylon Velcro should be determined by the hospital.)

NURSE CALL USAGE

The Nurse Call function allows the patient to communicate through a speakerphone with the nurse station by simply pressing the Nurse Call button on the Patient Control. The speakerphones are located on the inner side of the head end siderails.

The communication between the patient and the nurse station is established the moment a member of the nursing staff responds to the call signal.

Note

The Nurse Call system will automatically send a call signal to the nurse station if the communication between the bed and the nurse station is interrupted following a power failure, the switching off of the bed or the disconnection of the Nurse Call communication cable.

AUXILIARY POWER OUTLET USAGE

The auxiliary power outlet provides the nursing staff with a convenient power source for peripheral equipment. The outlet is located on the left side at the foot end of the bed. A 5A breaker is integrated to the power outlet.

Use only hospital grade electric equipment consuming 5A or less with the auxiliary power outlet (optional). The use of standard electric equipment may bring the current leakage to a level unacceptable for hospital equipment.

HEAD AND FOOTBOARD OPERATION

Both the footboard and the headboard can be removed or replaced easily. The removal of the headboard allows easy access to the patient's head.

To Remove Boards

1. Grasp both ends of the board and lift up.

To Install Boards

- 1. For the headboard: Insert the board posts inside the mounting sockets and push down to secure it.
- 2. For the footboard: Insert the board slowly in the mounting sockets while ensuring that the board connector properly fits on the connector of the foot end casing.

Note

If the footboard must be removed and the bed electric functions remain accessible through the siderails, ensure that the siderail controls are operational by deactivating any lockout activated before removing the footboard.

POSITIONING THE SIDERAILS

The bed siderails are designed to allow their lowering using only one hand. They have one lock position which is the upper position.

\Lambda WARNING

- To help reduce the number and severity of a potential fall when the patient is unattended, keep the siderails in the fully raised position and the sleep surface horizontal in its lowest position, unless his/her medical condition dictates otherwise. When raising the siderails, be sure that you hear the "click" that signals the locked condition. Pull firmly on the siderail to ensure it is locked into position.
- Siderails, with or without their padded covers, are not intended to serve as restraint devices to keep patient from exiting the bed. Siderails are designed to keep a patient from inadvertently rolling off the bed. It is the responsibility of the attending medical personnel to determine the degree of restraint necessary to ensure a patient will remain safely in bed. Failure to use the siderails properly could result in serious patient injury.

To Lower the Siderails (Figure 1.1)

• Lift the yellow latch (A) using one hand and guide it down with the other hand. (See figure below)

To Raise the Siderails (Figure 1.1)

• Pull on the siderail until it is locked in the fully raised position; a "click" will be heard to indicate it is locked. (See figure below)





BED POSITIONING

This bed features five positions: Flat, Standard Chair, Chair Enhanced, Trendelenburg and Reverse Trendelenburg. These positions can be achieved by pressing their respective buttons on the "Nurse Control" (see page 24).

OPTIONAL BED EXTENDER

The bed can be expanded using a Bed Extender. For further information see page 62.



SIDERAIL MOTION CONTROL PANEL, NURSE CONTROL

	Button	Name	Function
su	А	Chair Position	Press on this button to place the bed in the Chair or Enhanced Chair position.
itio	В	Flat Position	Press on this button to place the bed in the Flat position.
d Pos	с	Trendelenburg	Press on this button to place the bed in the Trendelenburg position.
Be	D	Reverse Trendelenburg	Press on this button to place the bed in the Reverse Trendelenburg position.
t	E	Fowler Up	Press on this button to raise the Fowler section of the bed to the desired angle.
ch and Foo	F	Gatch Up	Press on this button to raise the Gatch section of the bed to the desired angle.
	G	Foot Up	Press on this button to raise the Foot section of the bed to the desired angle.
, Gato	н	Fowler Down	Press on this button to lower the Fowler section of the bed to the desired angle.
owler	I	Gatch Down	Press on this button to lower the Gatch section of the bed to the desired angle.
ш	J	Foot Down	Press on this button to lower the Foot section of the bed to the desired angle.
ed ght	к	Bed Height Up	Press on this button to raise the height of the bed to the desired level.
Hei	L	Bed Height Down	Press on this button to lower the height of the bed to the desired level.

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BED POSITIONING DESCRIPTIONS

Note

The addition of accessories affects the motion of the bed.

Flat (0°)

To activate the Flat Bed position, press on the Flat Bed Position button located on the Nurse Control. This will place the Fowler, Foot and Gatch sections in the flat position. In the event that the Flat button is pressed when the bed is in Trendelenburg or Reverse Trendelenburg, the bed will be set into motion such that either the head Bed Lift and the foot Bed Lift will move in order to achieve the Flat Bed position.

Note

It is possible to move the Gatch, Head and Foot sections at the same time.

Standard Cardiac Chair

To activate the Cardiac Chair position, press on the Chair button located on the Nurse Control. Keep pressing the control until the complete Cardiac Chair position is obtained. The Fowler and Gatch will simultaneously raise to full up position and then the bed will position itself into Reverse Trendelenburg.

Enhanced Cardiac Chair

To activate the Enhanced Cardiac Chair position, press on the Chair button located on the Nurse Control. Keep pressing the control until the complete Cardiac Chair position is obtained. The Fowler and Knee Gatch will simultaneously raise to full up position and then the bed will position itself into Reverse Trendelenburg.

Note

There will be a 1 second stop between each chair position.

Trendelenburg

The Trendelenburg position places the bed Fowler to the low position while the foot section is set to the high position. This position can be achieved by pressing the Trendelenburg button on the Nurse Control until the desired angle is obtained. The bed height can be lowered while it is in Trendelenburg without changing the angle.

Reverse Trendelenburg

The Reverse Trendelenburg position places the bed Fowler to a high position and the foot section to a low position. This position is achieved by pressing the Reverse Trendelenburg button on the Nurse Control Panel.

Note

- The maximum angle of inclination that can be achieved during the Trendelenburg and Reverse Trendelenburg position is 15 degrees.
- Upon detection of the I.V. pole, the foot section of the bed can no longer be set into motion.
- A minimum clearance of 20 inches is required to allow the Trendelenburg and Reverse Trendelenburg positions to be executed.
- · These positions cannot be executed when one or more locks is activated.

SIDERAIL BRAKE/MOTION CONTROL PANEL, NURSE CONTROL



	Button	Name	Function
ion	А	Brake Off Activation/Indicator	Press this button to activate the brake off mode. The button will be illuminated when this mode is activated making it an indicator.
d Mot	В	Steer Activation/Indicator	Press this button to activate the steer mode. The button will be illuminated when this mode is activated making it an indicator.
Bec	с	Brake Activation/Indicator	Press this button to activate or deactivate the brake mode. The button will be illuminated when this mode is activated making it an indicator.
ators	D	Brake Not Set	This LED will be illuminated when the brake system is not activated.
Indic	E	Brake Set	This LED will be illuminated when the brake system is activated.
ed ions	F	Vascular Position	Press this button to start a treatment with the bed in the vascular position.
Bí	G	HOB 30 Degree Position	Press this button to start a treatment with the bed in the HOB 30 Degree position.

Note

The brake can also be set manually. See page 17 for more information.

OPTIONAL PENDANT CONTROL



(All option pendant shown)

	Button	Name	Function
_	Α	Channel Up	Press this button to change to a higher numbered channel.
tro	В	Channel Down	Press this button to change to a lower numbered channel.
L OL	С	Music Up	Press this button to turn the music up.
e C nel	D	Music Down	Press this button to turn the music down.
Pa	E	Room Lights	Press this button to turn the room lights on and off.
rac	F	Reading Light	Press this button to turn the reading light on and off.
nte	G	TV	Press this button to turn the TV on and off.
_	н	Radio	Press this button to turn the Radio on and off.
	I	Nurse Call	Press this button to communicate with the nurse station.
itch	J	Fowler Up	Press this button to raise the Fowler section of the bed to the desired angle.
Jd Ga	к	Fowler Down	Press this button to lower the Fowler section of the bed to the desired angle.
ler aı	L	Gatch Up	Press this button to raise the Gatch section of the bed to the desired angle.
Fow	М	Gatch Down	Press this button to lower the Gatch section of the bed to the desired angle.

CONTROL PANEL



	Button	Name	Function
Bed Positions	А	HOB 30 Degree Activation	Press this button to start a treatment with the bed in the HOB 30 Degree position.
	В	Vascular Activation	Press this button to start a treatment with the bed in the vascular position.
	С	Display Touch Screen	This displays all the functions selected using the buttons. It also shows error codes, alarms and other necessary information.
			Quick return to the Main Menu; see below.
licators	D	Main Menu	Patient Info. Bed Controls A Bed Exit Support Surfaces Options A / Bed
	E	Bed Exit On(Armed)/ Off(Disarmed) Indicator	When this LED is illuminated, it means the Bed Exit is Armed (On). When it is not illuminated, it means the Bed Exit is Disarmed (Off). When the LED is flashing, an alarm condition exists.
oul be	F System Message Indicator	These LEDs indicate any state the bed might be in or if there is a need to call maintenance. (See descriptions on page 27.)	
B	G	Steer Activation/Indicator	Press this button to activate the Steer system. This button is illuminated when the system is activated.
	н	Brake Activation/Indicator	Pres this button to activate or deactivate the Brake system. This button is illuminated when the system is activated.
	I	Brake Off Activation/Indicator	Press this button to activate the Brake Off system. This button is illuminated when the system is activated.

SYSTEM MESSAGE INDICATOR LIGHTS

Bed Unplugged:	This indicator shows that the bed is no longer plugged into a wall socket and that its power comes from the battery.
Bed Charging:	This indicator shows that the bed is actually plugged into a power outlet and that the battery is recharging itself. It is highly recommended not to unplug the bed as long as this LED is on.
Brake Not Set:	This indicator shows that the brakes are not set, which means that the bed might move if it is pushed or pulled. This LED can be seen as a reminder to the personnel that the brake needs to be set before leaving a patient unattended.
Battery Low:	This indicator turns on when the power of the battery is at a low level. When it does turn on, the bed should be plugged in a wall socket to allow the battery to be recharged.
Call Maintenance:	This indicator shows when the bed needs repairs or maintenance in regards to its proper functioning. Most of the time the Call Maintenance indicator will be illuminated when there is a problem with the electronic part of the bed system. In this case the appropriate maintenance personnel should be called.
Locks Enabled:	This indicator shows that a part of the bed (Patient Control Only) is locked or that a total lockout (All Bed Controls) is activated. Refer to page 49 for the Lockouts menu.

Note

- The total lockout mechanism blocks the control panel from the siderails, footboard, pendant, touch screen and head panel (located between the Zoom[®] Option handles).
- The brake system can be activated during a Total Lockout but it cannot be removed at any moment during a Total Lockout.
- The Total Lockout does not affect the Nurse Call (optional), Scale System (optional) and Bed Exit Detection (optional) functions.
- The parameters of the lock mechanism will be saved if there is a power outage and will start from their original state when the power returns.

Touch Screen

The Nurse Interface can be activated by pressing one of the function buttons or by pressing on the screen itself. After 2 minutes of inactivity, the LCD intensity will lower to about 10% of its maximal level.

If a submenu is opened and no further action is taken by the user, the LCD will shut off completely after 4 minutes (4 minutes = 2 minutes at 100% intensity + 2 minutes at 10% intensity).

MAIN MENU: BED CONTROLS



MAIN MENU: PATIENT INFORMATION

When the "Main" button is pressed, Figure 3.0 will be displayed. The following features are available to the operator to configure.

- · New Patient: pressing on the "New Patient" button displays Figure 3.1 and patient information may be entered.
- Configure Screen: pressing "Configure Screen" displays Figure 3.2 and the additional patient information may be configured.
- · Height: pressing on the "Height" button allows the operator to enter the patient's height
- Braden Scale¹: pressing the "Braden Scale" button takes the operator directly to The Braden Scale for Predicting Pressure Sore Risk main menu.
- Patient Note: pressing on the pencil tool icon in the bottom right of the Patient Note window allows the operator to enter a patient note if necessary.
- Unit/Room : pressing on the pencil tool icon in the bottom left of the Patient Information screen allows the operator to enter the unit and room number that the patient is in.



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Figure 3.0

MAIN MENU (CONTINUED)

Patient Information, New Patient

When the "New Patient" button is pressed on the Patient Information screen, Figure 3.1 will be displayed. The operator can enter the new patient ID by pressing the pencil icon which will bring up the keyboard screen. When the patient name is entered, the operator presses the "Ok" button on the keyboard screen and then "Ok" on the New Patient screen. The Patient Information screen will be displayed with the new patient ID.



Figure 3.1

Patient Information, Configure

When the "Configure Screen" button is pressed on the Patient Information screen, Figure 3.2 will be displayed. The operator may enter the patient's height manually on this screen. Other options available to the operator include calculating the patient's BMI, displaying the patient's ID and displaying the last Braden Scale¹ score.



Figure 3.2

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	Button	Name	Function
	А	Bed Height Up/Down	Press the Up arrow to raise the height of the bed or on the Down arrow to lower it.
<u>v</u>	В	Fowler Up/Down	Press the Up arrow to raise the Fowler section to the desired angle and on the Down arrow to lower it to the desired angle.
ontrol	с	Gatch Up/Down	Press the Up arrow to raise the Gatch section to the desired angle and on the Down arrow to lower it to the desired angle.
D Bed C E	D	Foot Up/Down	Press the Up arrow to raise the Foot section to the desired angle and on the Down arrow to lower it to the desired angle.
	E	Trendelenburg	Press this button to place the bed in the Reverse Trendelenburg position (Head Down / Foot Up).
	F	Reverse Trendelenburg	Press this button to place the bed in the Trendelenburg position (Head Up / Foot Down).
ors	G	Angle Indicator	This indicator shows the angle of Trendelenburg or Reverse Trendelenburg.
cat	н	HOB Angle Indicator	This indicator shows the angle of HOB.
ndi	I	Battery Power Indicator	This indicator shows the power left in the battery.
-	J	Bed Height Indicator	This indicator shows the actual height of the bed.

Note

- · When pressed the buttons turn grey.
- The bed height is actually the distance between the floor and the bed support mattress.



MAIN MENU: SCALE



	Button	Name	Function
Functions	Α	Current Patient Weight	Shows the current weight of the patient.
	В	Patient Since	This will give information about the new patient.
	С	Scale Last Zero	This will give information about the date and time of the last zero of the scale.
	D	Change Weight	Press this button to change the weight of a patient.
	E	Gain or Loss	Press this button to start the Gain or Loss reading.
	F	Zero	Press this button to zero the scale settings.
	G	Weight History	Press this button to access the History of the patient's weight.
	н	Store	Press this button to store the patient's weight.
	I	Lbs/Kg	Press this button to select the measure wanted (pounds or kilograms).
	J	Delayed Weight	Press on this button to start the Delayed Weight. This will give the user the time to add or remove accessories.



MAIN MENU: SCALE (CONTINUED)

Delayed Weight Button

When the Delayed Weight button is pressed on the Scale screen, Figure 5.1 will be displayed, at which time a 15 second timer starts.

Note

The delayed time is set 15 seconds.

To calculate patient weight with a delayed start:

- 1. Press Delayed Weight button.
- 2. The 15 second timer starts.
- The operator has 15 seconds to lift up any medical devices or equipment that should not be calculated in the patient's weight. This includes anything lying on the bed surface or resting on the patient (i.e., hoses).
- 4. After 10 seconds expires, an audible beep will sound.
- For the next 5 seconds, the bed will calculate the weight of the patient lying on the bed. The operator must remain lifting equipment described in step 3.
- After 5 seconds expires, another audible beep will sound and the Delayed Weight screen will be displayed as shown in Figure 5.2. The bed has completed its calculation and the equipment being lifted can be repositioned on the bed surface.

Lbs/Kg

The user can change the delayed weight measuring value to Kg or Lbs by pressing on the "Lb/Kg" button located at the bottom of the Delayed Weight screen as shown in the Scale menu.



Figure 5.1



Figure 5.2



MAIN MENU: SCALE (CONTINUED)

Zero Button

When the "Zero" button is pressed on the Scale screen, Figure 5.3 will be displayed.

If "Ok" is pressed, the bed will start zeroing the scale and the "Do not touch bed" message will appear as shown in Figure 5.4.

If "Cancel" is pressed, the command will be cancelled. If the bed gets into an auto shutoff at this stage, the Zero request will be cancelled.











Figure 5.5

When the "Do not touch bed" message disappears, Figure 5.5 will be displayed.

When the zeroing of the scale is complete, Figure 5.5 will be displayed.

Note

The "Zero" function will reset all the values for the different patient's weights. All the data stored in the touch screen concerning the weight of the patient will be lost.



MAIN MENU: SCALE (CONTINUED)

Weight History Button

When the "Weight History" button is pressed on the Scale screen, Figure 5.6 will be displayed.

Each value indicates the time and date that the weight was taken as well as the weight measured.

The cursor allows the user to go further on each side to see the values not visible. The arrows only move by one value at a time.

The "Lb/Kg" button allows the user to change the measuring value.

The "Store" button allows the user to store the reading that has just been done.

The "Close" button will bring the user back to the Scale main screen.

Figure 5.7 appears when the user presses on one of the weights displayed on the graphic in Figure 5.6. It shows the weight, the date and the time when this weight was taken.

You can choose to go back to the previous one by pressing on "Prev" or to go to the next one by pressing on "Next".

Note

The system can keep a maximum of fifty (50) entries in memory. Any new value added after the 50th entry will have the first value deleted following the "First In, First Out" rule.





Figure 5.7


MAIN MENU: SCALE (CONTINUED)

Change Weight Button

When the "Change Patient Weight" button is pressed on the Scale screen, Figure 5.8 will be displayed. Press "Ok" to change patient weight.





When Ok has been pressed, the "Do not touch bed" message will be displayed as shown in Figure 5.9. When the "Do not touch bed" message disappears Figure 5.10 will be displayed.

Press the up or down arrows as show in Figure 5.10 to increase or decrease the weight. The weight will increment or decrement by 0.1 lb or kg. If the arrows are pressed longer than just a touch, the incrementation/ decrementation will change by 1 lb or kg. To save the new weight, press "Ok".







Figure 5.10



MAIN MENU: SCALE (CONTINUED)

Gain or Loss Button

When the "Gain or Loss" button is pressed on the Scale screen, Figure 5.11 will be displayed. This will show the initial weight of the patient, the current weight and the gain or loss of weight of the patient.

To change the measuring values, press on the "Lb/ Kg" button.

To close the window, press on the "Close" button.













When the reset button is pressed, Figure 5.12 will be displayed. If "Ok" is pressed, the message "Do not touch bed" will be displayed.

When the "Do not touch bed" message disappears, the "Gain or Loss reset success!" message will be displayed as shown in Figure 5.13.



	Button	Name	Function		
on	А	Traditional Bed Exit Zone	Press this button to activate the complete zone of detection. This is the default zone.		
Zone tivati	В	Medium Zone	Press this button to activate the medium zone of detection.		
Aci	С	Small Zone	Press this button to activate the small zone of detection.		
m/ arm	D	Arm	Press this button to Arm the Bed Exit Detection System.		
Arı Disê	Е	Disarm	Press this button to Disarm the Bed Exit Detection System.		
	F	Volume (see page 40)	Press this button to access the Volume menu for the alarm.		

Note

40

- A minimum of 5 lbs is necessary to arm the Bed Exit System.
- During a power outage, the parameters that were set for the detection of the Bed Exit are maintained and saved. • When power resumes, the system will reactivate itself to the same state it was before the power outage. The zone that was selected before the power outage and the signal CALL NURSE on the wall of the hospital (optional) are activated.
- The blue color on one of the zones indicates that this is the zone which is actually activated.
- When the zone color turns red, it means that there is a Bed Exit Alarm. In that case the Event Manager window will appear. Return To Table of Contents

MAIN MENU: BED EXIT (CONTINUED)



The Volume button allows the user to set an alarm reminder. The alarm has different tones that can be chosen by the user.

	Button	Name	Function
A Volum B Volum C Chan D Chan E Test	A	Volume Down	Press this button to decrease the volume.
	В	Volume Up	Press this button to increase the volume.
	Change Tone	There are 10 tones to choose from, and they are labeled through 10. Press this button to change the tone sound to lower number than what it is currently set at. If the bed is equipped with the iAudio feature, then the la available tones will be voices.	
	D	Change Tone	Press this button to change the tone sound to a higher number than what it is currently set at.
	E	Test Volume / Tone	Press this button to test the current volume or tone setting. When the volume or tone is changed from its current setting, you may press the test button to hear the new tone setting or the new volume adjustment.

MAIN MENU: SUPPORT SURFACES

Air Mattress Options

The InTouch bed can detect if it is connected to a mattress. It can also detect the typical Air Mattress which is connected to it.

When the Support Surface button is pressed on the main menu bar and there is no mattress connected to the *In*Touch®, Figure 7.0 will be displayed.



Figure 7.0

XPRT™ Mattress Specifications

Refer to the **XPRT™** manual.

When using a mattress thicker than 6 inches (15,24 cm) or a mattress overlay, extra caution and/or patient supervision may be required to reduce the likelihood of occurence of a patient fall.

*In*Touch® integrated with the XPRT[™] Mattress

Siderail Position

The position of the siderails determines the functionality of the **XPRT[™]** mattress. All the therapies, including Max Inflate, Firmness and Turn Assist, will function if the siderails are unlocked, **except for the rotation therapy**. If a siderail is unlocked during the rotation therapy, this therapy will automatically stop. If two therapies are simultaneously executed and a siderail is unlocked during these therapies, they will automatically stop. If one of the siderails is unlocked during a rotation therapy (ex.: rotation and vibration is being executed simultaneously), both therapies will stop instantly.



Figure 7.1



MAIN MENU: SUPPORT SURFACES (CONTINUED)

PositionPRO™ Mattress Specifications

Refer to the PositionPRO[™] manual.

When using a mattress thicker than 6 inches (15,24 cm) or a mattress overlay, extra caution and/or patient supervision may be required to reduce the likelihood of occurence of a patient fall.

Interaction Between *In*Touch® and PositionPRO[™]

Siderails Position

The position of the siderails determines the functionality of the PositionPRO[™] mattress. All the therapies, including Max Inflate, Firmness and Turn Assist, will function if the siderails are unlocked. If a siderail is unlocked during the rotation therapy, this therapy will automatically stop. If two therapies are simultaneously executed and a siderail is unlocked during these therapies, they will automatically stop. If one of the siderails is unlocked during a rotation therapy (ex.: rotation and vibration is being executed simultaneously), both therapies will stop instantly.

Specific PositionPRO[™] Functionality on the *In*Touch[®]

The indicators on the PositionPROTM menu screen from the *In*Touch® and on the PositionPROTM pendant are slightly different, but the same functions are available.

When requesting a Turn Assist left or right on the PositionPRO[™] via the *In*Touch®'s touch screen, a Turn Assist menu screen will appear (see Figure 7.3).

If the *In*Touch[®] senses an error with the PositionPRO[™], the Call Maintenance LED will turn on (see Figure 7.3).

When activating the *In*Touch[®] CPR pedal, the PositionPRO[™] automatically turns on.

When the Position PROTM is connected to the *In*Touch[®], the Position PROTM uses the fowler and Trendelenburg tilt sensors of the *In*Touch[®] to sense the angle of the fowler.



Figure 7.3



Figure 7.4



Figure 7.5

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MAIN MENU: OPTIONS



	Button	Name	Function	
Options	Α	Time Setup	Press this button to setup the time and date on the bed.	
	В	Smart TV	Press this button to access the Smart TV menu.	
	с	Language	Press this button to access the Language menu and select th language of the touch screen.	
	D	Advanced Options	Press this button to access the Advanced Options menu.	
	E	Maintenance	Press this button to access the Maintenance menu.	
	F	Battery	This shows the percentage of power left in the battery. Each battery block indicates 25 percent of the power.	
	G	Backlight	Press this button to access the Backlight menu.	
	н	History	Press this button to access the History menu.	

Time Setup Button

When the "Time Setup" button is pressed on the Options screen, Figure 8.0 will be displayed. The time and date can now be changed using the arrows. Press "Accept" when done or "Cancel" to refuse the changes done.

Note

The "Time Setup" does not automatically adjust for daylight savings time.



Figure 8.0







Figure 8.2

Smart TV Button (Optional)

When the "Smart TV" button is pressed on the Options screen, Figure 8.1 will be displayed.. The television currently attached to the room interface card of the bed can now be selected. Once the selection is done, press on the "Accept" button to confirm the choice.

Language Button

When the "Language" button is pressed on the Options screen, Figure 8.2 will be displayed. You can now select the desired language.

Advanced Options Button

When the "Advanced Options" button is pressed on the Options screen, Figure 8.3 will be displayed.

The operator may activate or deactivate the **Zoom**[®] **Voice**, **Awareness** and or **Reminder**. If the **Zoom**[®] **Voice** option is activated, sound will be played through the speakers when the **Zoom**[®] is activated. If the **Awareness** and/or **Reminder** options are selected, the alarms will be sent through the bed Nurse Call signal.

Advanced Options		stryker					
Send alarms through Nurse Call							
Bed Exit Always Activated	Awareness Activated	Reminder Deactivated					
Z00M Voice Activated	200M Voice Activated						
		Back					
Patient Bed Info. Controls	Bed Exit Support Surfaces	Options 1 i Bed					
Unit/Rm:		Oct. 05,2008. 2:03 PM					

Figure 8.3

History Button

When the "History" button is pressed on the Options screen, Figure 8.5 will be displayed.

When the "Scale" button is pressed, the Weight History screen appears (see pg. 34, Fig. 5.6).





When the "Head of Bed" button is pressed on the Options screen, Figure 8.6 will be displayed.

The "Head of Bed History" displays the head's angle of the bed for the last 24 hours.



Figure 8.6

When the "Angle History" button is pressed, on the Head of Bed screen, Figure 8.7 will be displayed.

Note

The maximum time frame for angle position is 30 days.

Angle History						
Angle	Last 12h	Last 24h				
0 ~ 9°	12:00	24:00				
10 ~ 19°	12:00	24:00				
20 ~ 29°	12:00	24:00				
30 ~ 39°	12:00	24:00				
40 ~ 49°	12:00	24:00				
50 ~ 59°	12:00	24:00				
60 ~ 69°	12:00	24:00				
70 ~ 79°	12:00	24:00				
80 ~ 89°	12:00	24:00				
HOB 30 History	Reset	Close				

Figure 8.7

When the "Bed Height" button is pressed on the History screen, Figure 8.8 will be displayed.



Figure 8.8

Height	Last 12h	Last 24h
16 ~ 18	00:00	00:00
18 ~ 20	00:00	00:00
20 ~ 22	00:00	00:00
22 ~ 24	00:00	00:00
24 ~ 26	00:00	00:00
26 ~ 28	00:00	00:00
28 ~ 30	00:00	00:00
30 ~ 33	00:00	00:00

Figure 8.9

When the "Height history" button is pressed on the Bed Height screen, Figure 8.9 will be displayed.

The "Bed Height History" provides the user with information on the current bed height as well as the bed height for the last 24 hours. If the Bed Height History needs to be reset, press the "Reset" button.

Nurse Control Backlight Button

When the "Nurse Control Backlight" button is pressed on the Options screen, Figure 8.10 will be displayed. The backlighting interface allows the user to set the intensity of the indicators (LED) and of the touch screen.

Press the arrows to increase or decrease the intensity. When completed, press the "Close" button.





Maintenance Button

When the "Maintenance" button is pressed on the Options screen, Figure 8.11 will be displayed.

When the "Error Codes" button is pressed, Figure 8.12 will be displayed. The Error codes display provides information on component status.

When the "Signal Values" button is pressed, Figure 8.13 will be displayed. The Signal Values display provides information on sensor status.

Note

Refer to the Maintenance Manual for further details on Buttons Pressed, Boards and Bed Information.

Error Codes	stryker		
Current error	Error log		
ADC invalid values	ADC invalid values		
Battery absent	Battery absent		
Battery bad capacity			
Cmd without safe from nurse (SRR)	Battery bad capacity		
GPIO failure init	Cmd without safe from nurse (SRR)		
Load cell 1 overrange	GPIO failure init		
Motor gatch overheat	Load cell 1 overrange		
Motor brake overload	Notes and the second se		
Motor HL foot overheat	Motor gatch overheat		
Motor zoom overheat	Motor zoom overheat		
Safe without cmd from B1	Safe without cmd from B1		
Tilt hilo foot over range	Tilt hilo foot over range		
Tilt gatch over range			
Brake bad calib.	Clear log Back		
Brake unable to elec.			
Patient Bed Controls Bed Exit	Support Options / /Bed		
Unit/Rm :	Oct. 25,2007 12:00 AM		

Figure 8.12



Figure 8.11



Figure 8.13

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	Button	Name	Function		
Locks Position	А	All bed controls	Press on this button to activate or deactivate the complete lock of the bed.		
	В	Bed Height Lock	Press on this button to activate or deactivate the lock for the bed height.		
	С	Fowler Lock	Press on this button to activate or deactivate the lock of t Fowler.		
	D	Gatch Lock	Press on this button to activate or deactivate the lock of the Gatch.		
	E	Foot Lock	Press on this button to activate or deactivate the lock of the Foot.		
rols	F	All bed controls	Select this when you want to restrain any change in the lock activation on every bed controls.		
Con	G	Patient controls only	Select this when you want to restrain any change in the lock activation on the patient controls only.		

Note

- If the bed is in Trendelenburg or Reverse Trendelenburg the bed will be locked in this position.
- When one of the locks is enabled, the indicator on the footboard will turn on so the user is aware that some motion
 may not be activated.

MAIN MENU: iBED

When the "*i*Bed" button is pressed on the main menu bar, Figure 10.0 will be displayed.

Note: If your bed is equipped with the *i*Documentation option then the *i*Documentation button will be displayed on the *i*Bed menu. If your bed is equipped with the *i*Audio option then the **Sound TherapyTM** button will be displayed.

iBed, Awareness

When the "Awareness" button is pressed on the *i*Bed screen, Figure 10.1 will be displayed.

In this menu the user can monitor some functions or even all of them. To select functions actually in use, press on "Monitor current bed situation".

When functions are being monitored and an alarm is set the following occurs:

- · Footboard LED flashes amber,
- · Siderail LED flashes amber,
- Monitored event button turns amber,
- The Event Manager window appears as shown in Figure 10.2.

In the Event Manager the user has the choice to:

- PROCEED TO MENU: the user will be directed in the menu where the alarm comes from.
- CLOSE AND DISARM: the alarm will simply be deactivated and no longer monitored.
- REMIND ME IN: the user can decide to report the alarm by choosing the appropriate time reminder.

Note

It is possible to browse through the bed's menus even if conditions are not corrected. If the touch screen is inactivated for 60 seconds without correcting the conditions, it goes automatically back to the "Smart Bed Position" screen until the corrections are made.











Figure 10.2

iBed, Protocol Reminder™

When the "**Protocol Reminder™**" button is pressed on the *i*Bed screen, Figure 10.3 will be displayed.

To add or view a protocol, press on the appropriate button.

To add a one-time **Protocol ReminderTM**, enter the desired time for the protocol alarm as shown in Figure 10.4.

To add a repeated **Protocol ReminderTM**, enter the lapse of time between each protocol alarm as shown in Figure 10.5.

Note

The default screen is the one-time reminder, but the user can change it to "Repeated Task" by pressing on the "Repeated Task" button.





Figure 10.4



Figure 10.5

*i*Bed, Protocol Reminder[™] (Continued)

When it is time for a reminder, Figure 10.6 will be displayed.



Figure 10.6



Figure 10.7



Figure 10.8

When the View Reminder's List button is pressed on the Reminder screen, Figure 10.7 will be displayed.

When the View Reminder's Log button is pressed on the Reminder screen, Figure 10.8 will be displayed.

iBed, Head of Bed (HOB) History

When the "HOB History" button is pressed on the *i*Bed screen, Figure 10.9a will be displayed.

The "Head of Bed History" displays the head's angle of the bed for the last 24 hours.



iBed, Bed Height History

When the "Bed Height History" button is pressed on the *i*Bed screen, Figure 10.10a will be displayed.

When the "Height History" button is pressed on the Bed Height screen, Figure 10.10b will be displayed.

The "Bed Height History" provides the user with information on the current bed height as well as the bed height for the last 24 hours. If the Bed Height History needs to be reset, press the "Reset" button.





Figure 10.9a

Angle History						
Angle	Last 12h	Last 24h				
0 ~ 9°	12:00	24:00				
10 ~ 19°	12:00	24:00				
20 ~ 29°	12:00	24:00				
30 ~ 39°	12:00	24:00				
40 ~ 49°	12:00	24:00				
50 ~ 59°	12:00	24:00				
60 ~ 69°	12:00	24:00				
70 ~ 79°	12:00	24:00				
80 ~ 89°	12:00	24:00				
HOB 30 History	Reset	Close				

Figure 10.9b



Figure 10.10a

Height history						
Height	Last 12h	Last 24h				
16 ~ 18	00:00	00:00				
18 ~ 20	00:00	00:00				
20 ~ 22	00:00	00:00				
22 ~ 24	00:00	00:00				
24 ~ 26	00:00	00:00				
26 ~ 28	00:00	00:00				
28 ~ 30	00:00	00:00				
30 ~ 33	00:00	00:00				
Low height History	Reset	Close				

Figure 10.10b

iBed, Calculator

When the "Calculator" button is pressed on the *i*Bed screen, Figure 10.12 will be displayed.

The operator can perform various calculations using the Calculator tool. If conversions are needed, the operator can switch directly from the Calculator display to a conversion tool by pressing the "Converter" button.





*i*Bed, Converter

When the "Converter" button is pressed on the *i*Bed screen, Figure 10.13 will be displayed. When the operator completes their conversions, they may switch back to the "Calculator" by pressing on the "Calculator" button.

Figure 10.13

*i*Bed, Translations

When the "Translation" button is pressed on the *i*Bed screen, Figure 10.14 will be displayed.

The Translations display provides information to the operator to retrieve a quick translation of medical sentences in 24 different languages.

The operator may choose a sentence in the list provided on the display and then select the language to be translated in. The translated sentence will be displayed in the Translations box.

Audio is provided for the translations as well. Press on the play button to hear the translations. To increase the audio, press the "+" button. To decrease the audio, press the "-" button.

Note: If the *i*Audio option is not equipped on your bed, then the audio controls buttons will not be dispalyed in Figure 10.14

Theme		Theme	e Pain	_		
Neurola	nical Assessment		i feel nain?			
Rain	Sylcar Assessment	Where	do vou feel pair	1?		
Neede	Accorement	What	is your pain leve	1?		
Awaran	assessment	Are yo	u feeling better	•		
Awaren	tess & Introduction					
Kespira	litory					
Langu	age	Transla	tion			
	Spanish					
	French					
	German					
	Russian				_	
	Polish					Deale
	Italian			_ "\"" L _		васк
	· · · · · ·		,		,	
Patient	Bed	A Bec	Exit Suppo	rt Options	A	<i>i</i> Bec

Figure 10.14

*i*Bed, Documentation

When the "Documentation" button is pressed on the *i*Bed screen, Figure 10.15 will be displayed.

The operator may retrieve logged patient information for a specific date by selecting the date using the up and down arrows for the year, moth and day. Press the View button and a log will be displayed for that date. You may view specific logged information by pressing either the Bed Exit, Reminder, Scale, *i*Bed or System buttons.

Docum									
Date:	20	07 🔼	Octob	er 🔼	9		iew		
Display	/: Bed	exit I	Reminder	Scale	iBed Po	s. Sys	tem		
	Event		Time	De	etail <mark>s /</mark> Actio	ons Taken			
	Audio translat	ion played:	8:41 AM	A	rabic : Squeez	e my hand.			
	Sound therap	y stopped	8:41 AM	Sound therapy stopped					
=	Sound therap	by started	8:41 AM	Sound therapy started					
Sort						[Back		
Patient Info.	Bed Controls		Bed Exit	Support Surfaces	Options	1	√ Bed		
Unit/I	Rm:					Oct. 09,200)7. 8:42 AM		

Figure 10.15

*i*Bed, The Braden Scale for Predicting Pressure Sore Risk¹

When the "Braden Scale" button is pressed on the *i*Bed screen, Figure 10.22a will be displayed.

The Braden Scale is a 6 question survey the caregiver may use to evaluate the potential that a patient may develop pressure ulcers.

When the is pressed for any items 1-4, additional information will be provided for that item. See example for item 2 (Very Limited) in Figure 10.22b.

The survey results is a number (score) that is used to identify the care needed on the patient's skin (see Figure 10.22c). The lower the score the more attention the caregiver needs to provide to the patient's skin.

When a Braden Scale is done to completion the last Braden score is displayed in the Main screen with the date of the evaluation. The display of this score on the main screen can be enable or disabled.

1 Copyright. Barbara Braden and Nancy Bergstrom, 1988. Reprinted with permission.

Braden Scal	le for Predic	ting Pres	ssure Sor	e Risk	stry	ker	
Ability to respond meaningfully to pressure-related discomfort							
1 Completely Limited	Unresponsive (does not moan flinch or grasp) to painful stimuli due to diminished level of consciousness or sedation. OR Limited ability to feel						
2 Very Limited	Responds only to painful stimuli. Cannot communicate discomfort except by moaning or restlessness OR has a sensory impairment which limits the abil						
3 Slightly Limited	Responds to verbal commands but cannot always communicate discomfort or the need to be turned. OR has some sensory impairment which limits abili						
4 No Impairment	Responds to verbal commands. Has no sensory deficit which would limit ability to feel or voice pain or discomfort.						
Select the number	Select the number that corresponds to the evaluated value for this step Back Cancel						
Patient Bec Info. Contr	$d_{ols} \Delta \Delta$	Bed Exit	Support Surfaces	Options	£	i∕ Bed	
Unit/Rm:					Sep. 21,201	1. 9:46 AN	

Figure 10.22a



Figure 10.22b

Braden Scale for Predicting Pressure Sore Risk	stryker	
Result Summary		
1. Sensory Perception	4	
2. Moisture	4	
3. Activity	3	
4. Mobility	3	
5. Nutrition	3	
6. Friction and Shear	3	
Total Score :	20	
Copyright. Barbara Braden and Nancy Bergstrom 1988. Reprinted with permission.	Close	
Patient Bed Controls Controls Bed Exit Support Surfaces Options	€ ded	
Unit/Rm: Oct	. 25,2011. 4:49 PM	



*i*Bed, Sound Therapy[™]

When the "**Sound Therapy™**" button is pressed on the *i*Bed screen, Figure 10.23a will be displayed.

The operator may select a **Sound Therapy™** from the Song(s) list and press play to activate. The volume of the sound selected can be adjusted by moving the volume slider up or down.

The **Sound Therapy™** can be set to stop after a specified time which is calculated in minutes. Press the "Stop After" button to enable the stop time.

The playback mode allows the operator to play a single sound file or choose to play all files listed.

Pressing the Edit Play List button will display the Play List screen as shown in Figure 10.23b. The operator may add songs from the play list to the song list or remove songs from the song list.

If **Sound Therapy™** is playing, a "Music Note" icon will be displayed at the bottom of the Main menu bar next to the date.

Note: The "Music Note" icon will continue to be displayed on all menu screens if **Sound Therapy**[™] is playing.



Figure 10.23a



USING THE ZOOM® DRIVE (MODEL 2141)

- 1. Disconnect the bed power cord from the wall socket.
- 2. Push the Drive button (see Figure 24) located on either the head end siderail or on the footboard.
- The button will backlight and the LED will light up.



Note

- Handles might be hidden in the head section (see Figure 25).
- To take them out you have to unfold them and pull up to make sure they lock into place (See Figure 26).
- 4. Use handles as follows:
 - To move the bed forward, push on the handles while holding the yellow triggers.
 - To move the bed backward, pull on the handles while holding the yellow triggers.
 - To stop the movement, release both yellow triggers and stop pushing or pulling on the bed.

Note

- The speed of the bed's movement will change according to the strength used to push or pull.
- If the bed battery charge level become too low, the motorized wheel will retract (raise) while driving, or won't go down.



Figure 25



Figure 26

The accessories listed below can be purchased and installed on the FL27 Intouch Critical Care Bed. Details on installation and service are included in the FL27 InTouch Critical Care Maintenance Manual.

Accessory	Part Number	Page Reference
Bed Extender	FA64234-XXX	See page 61
Bed Extender Mattress (2920 PositionPRO only)	DM64196	See page 61
Bed Extender Mattress (2950 XPRT™ only)	DM64197	See page 61
I.V. Pole, Permanent, Right	FA64221	See page 62 - 63
I.V. Pole, Permanent, Left	FA64238	See page 62 - 63
I.V. Pole, Dual Head End Permanently Attached	FA64202	See page 64 - 65
Line Management System	FA64210	See page 66
Monitor Tray	FA64214	See page 68 - 69
Oxygen Bottle Holder, Upright	FA64187	See page 70
Oxygen Bottle Holder, Right Fit	FA64203	See page 71
Pendant with Motion Control Only	FA64209	See page 72
Pendant with Motion Control & Nurse Call	FA64194	See page 73
Pendant with Motion Control & Smart TV	FA64195	See page 74
Pendant with Motion Control, Nurse Call & Smart TV	FA64193	See page 75
Pendant Clip	FA64186	See page 76
Traction Sleeve 4" x 1/2"	FA64215	See page 77
Traction Sleeve 4" x 3/4"	FA64216	See page 77
Traction Sleeve 8" x 1/2"	FA64217	See page 77
Traction Sleeve 8" x 3/4"	FA64218	See page 77
Traction Sleeve 6-1/2" x 3/4"	FA64219	See page 77
Wall Saver Cable	FA64208	See page 78
X-Ray Cassette Holder	FA64205	See page 79

The Optional Bed Extender was designed to lengthen the bed by six inches.

This accessory is designed for the following product(s):

InTouch 2.5 (FL27)-2131 InTouch 2.5 (FL27)-2141

INSTALLATION

Required Tools: None

Refer to the figures following the Installation section for visual help.

- 1. Install the appropriate mattress cushion over the bed extender (see Figure A).
- 2. Remove the footboard.
- 3. Insert bed extender legs on the bed end rods (see Figure B).
- 4. Replace the footboard over the bed extender rods (see Figure B, section 2).

- Ensure connector 'A' is securely fixed (see Figure B).
- Do not sit on the bed extender. This may cause the bed to flip.



Figure A





The Optional Single 2-Stage I.V. Pole is permanently attached and equipped with a telescopic pole. The telescopic pole is an extension which provides a second height position. The Permanent I.V. Pole can be folded and stored.

INSTALLATION

Required Tools:

- 3/8" Drive Ratchet
- 1/2" Socket
- 1. Using bolt (D) and washer (C), secure the I.V. pole (A) into the appropriate opening to the left of the head of the bed.
- 2. Using bolt (D) and washer (C), secure the I.V. pole support (B) in the appropriate opening to the right of the head of the bed.

Note: The bolt used is coated with "Scotch Grip". This type of bolt must be replaced by a new identical bolt if it is removed following a first installation.



OPERATION

- 1. Lift and pivot the pole from the storage position and push down until it is locked into the receptacle.
- To raise the height of the pole, pull up on the telescoping portion (A) until it locks into place at its fully raised position. There are no intermediary positions for this section.
 Detects the LV raise here are (B) to desired position and here the LV here.
- 3. Rotate the I.V. pole hangers (B) to desired position and hang the I.V. bag.
- 4. To store the I.V. pole, turn the latch (C) clockwise until section (A) lowers. Lift up on the pole to remove it from its receptacle, fold it and store it on the bracket.

The weight of the I.V. bags should not exceed 22 lbs (10 kg).





DETAIL OF I.V. POLE LATCH

The Optional Dual Head End I.V. Pole is permanently attached and equipped with a telescopic pole. The telescopic pole is an extension which provides a second height position. The Permanent I.V. Pole can be folded and stored.

INSTALLATION

Required Tools:

- 3/8" Drive Ratchet
- 1/2" Socket
- 1. Using bolt (D) and washer (C), secure the I.V. pole (A) into the appropriate opening to the left of the head of the bed.
- 2. Using bolt (D) and washer (C), secure the I.V. pole support (B) in the appropriate opening to the right of the head of the bed.

Note: The bolt used is coated with "Scotch Grip". This type of bolt must be replaced by a new identical bolt if it is removed following a first installation.



OPERATION

- 1. Lift and pivot the pole from the storage position and push down until it is locked into the receptacle.
- To raise the height of the pole, pull up on the telescoping portion (A) until it locks into place at its fully raised position. There are no intermediary positions for this section.
- 3. Rotate the I.V. pole hangers (B) to desired position and hang the I.V. bag.
- 4. To store the I.V. pole, turn the latch (C) clockwise until section (A) lowers. Lift up on the pole to remove it from its receptacle, fold it and store it on the bracket.

The weight of the I.V. bags should not exceed 22 lbs (10 kg).





DETAIL OF I.V. POLE LATCH

The Optional Line Management System (Accessory Clip) was designed to help manage the tubes around the bed.

INSTALLATION

Required Tools: None

- 1. Open clip (A) and install at a strategic and secure location on the bed.
- 2. Raise clip prong (B) and insert tubes of 3/4" diameter or less.
- 3. Close opening and make sure that the tubes are not pinched.

- · Make sure the clip is not located where it can interfere with a mechanism or activate one.
- If accessory is placed in a liquid solution it could deteriorate the mechanism.

- Do not use with tubing of a diameter greater than 0.75" (19 mm).
- · Sterilize accessory after each use (see procedure in Maintenance Manual)
- · Make sure that the clip is stable when installing.



The Optional Monitor Tray is designed to hold a monitor at the foot end of the bed.

🕂 WARNING

The Weigh system as well as the Bed Exit system must be adjusted if this accessory is added when either system is in function. Refer to the "Add/Remove Equipment" from the bed procedure on page 35.

INSTALLATION

Required Tools: None

Procedure

- 1. Install the bracket (A) at the left side of the foot end. (see Figures B, C, D, and E).
- 2. Install the transport tray (see Figure F) into the bracket just secured in step 1 and into the the IV socket (not shown).

Note: Ensure that the tray support is correctly anchored in the hole of the bracket installed in step 1 (see Figure F).



Figure A



Figure B - foot end



Figure C - bracket mounted (back)



Figure D - bracket mounted (front)



Figure E - secure bracket with screw knob



Figure F - install tray

OPERATION

- 1. Pull the lock down (see Figure G) and turn the tubular support 90° (see Figure H) to get it perpendicular to the board (see Figure I) then release the lock.
- 2. Hold the bottom of the plastic tray and flip it up and over so it rests on the tubular support. Apply a pressure on the tray to stabilize it on the tubular support (see Figure J).
- 3. Secure the monitor to the tray using the strap (see Figure K, L).

Note: The litter should be flat before installing the transport tray.



Figure G - pull the lock



Figure H - turn the tubular support



Figure I - pendicular to board



Figure J - stabilize tray



Figure K - secure with straps



Figure L - secure with straps



- The maximum load capacity of the tray is 40 lbs (18kg)
- The maximum load capacity of the tubular support is 150 lbs (68 kg)

The Optional Upright Oxygen Bottle Holder was designed to support the oxygen bottle.

INSTALLATION

Required Tools: None

- 1. Insert the Support Bar in the middle hole on the right or left side of the head end of the bed.
- 2. Secure the Support Bar to the head end of the bed by inserting the security chain through the Support Bar hole located at the end of the Support Bar.



The Optional Right Fit Oxygen Bottle Holder is designed to support the oxygen bottle on the headboard.

INSTALLATION

Required Tools: None

- 1. Install bottle holder (A) on headboard (B).
- 2. Screw the holder handle (C) until the holder is installed properly on the headboard.
- 3. Route the number 3 straps (D and E) through the holes in the headboard and attach them to their fasteners.
- 4. Insert the oxygen bottle in the holder.
- 5. Install the cover (F) on the holder and tie the number 1 straps (G) together.

Note: The cover is reversible. It can be placed so that the opening is on the right or on the left of the bed to ease the use.


The Optional Pendant with Motion Control was designed to give the patient control over the bed's motion.



The Weigh system as well as the Bed Exit system must be adjusted if this accessory is added when either system is in function. Refer to the "Add/Remove Equipment" from the bed procedure on page 35.

INSTALLATION

- 1. Plug the cable connector into connector (A) located on the right of the upper frame.
- 2. Install the removable pendant on the right foot siderail.



The Optional Pendant with Motion Control and Nurse Call was designed to give the patient control over the bed's motion and the ability to contact the nurses from the bed when needed.

The bed must be configured and synchronized with the hospital system in order for the Nurse Call function to be available.



The Weigh system as well as the Bed Exit system must be adjusted if this accessory is added when either system is in function. Refer to the "Add/Remove Equipment" from the bed procedure on page 35.

INSTALLATION

- 1. Plug the cable connector into connector (A) located on the right of the upper frame.
- 2. Install the removable pendant on the right foot siderail.



The Optional Pendant with Motion Control and Smart TV was designed to give the patient control over the bed's motions, TV, radio, channels, volume and lights from the bed when needed.

The bed must be configured and synchronized with the hospital system in order for some functions to operate properly such as TV control, radio, channels, volume and lights.



🕂 WARNING

The Weigh system as well as the Bed Exit system must be adjusted if this accessory is added when either system is in function. Refer to the "Add/Remove Equipment" from the bed procedure on page 35.

INSTALLATION

- 1. Plug the cable connector into connector (A) located on the right of the upper frame.
- 2. Install the removable pendant on the right foot siderail.



The Optional Pendant with Motion Control, Nurse Call and Smart TV was designed to give the patient control over the bed's motions, TV, radio, channels, volume and lights as well as being able to contact a nurse from the bed when needed.

The bed must be configured and synchronized with the hospital system in order for some functions to operate properly such as Nurse Call, TV control, radio, channels, volume and lights.



The Weigh system as well as the Bed Exit system must be adjusted if this accessory is added when either system is in function. Refer to the "Add/Remove Equipment" from the bed procedure on page 35.

INSTALLATION

- 1. Plug the cable connector into connector (A) located on the right of the upper frame.
- 2. Install the removable pendant on the right foot siderail.



The Optional Pendant Clip was designed to support the removable pendant (FA64193, FA64194, FA64195, FA64209).

INSTALLATION

Required Tools: None

1. Raise the clip prong (A) and install the clip on the bed at a safe and useful location.



The Optional Traction Sleeve enables the installation of traction equipment. There are five different size configurations available as shown below. The installation procedures below apply to all configurations listed.

NOTE: The foot end section of the mattress is stopped when a traction socket or I.V. pole is inserted.

•	Traction Sleeve Set - 4" x 1/2"	FA64215
•	Traction Sleeve 4" x 3/4"	FA64216
•	Traction Sleeve 8" x 1/2"	FA64217
•	Traction Sleeve 8" x 3/4"	FA64218
•	Traction Sleeve 6-1/2" x 3/4"	FA64219

INSTALLATION

Required Tool:

• 7/16" Combination Wrench

Procedure

- 1. Install the four traction sleeves (A) in the corresponding holes located at the four corners of the bed.
- 2. Secure them using the washers (B) and bolts (C) provided.

Note: The bolt used at step 2 is coated with "Scotch Grip". This type of bolt must be replaced by a new identical bolt if it is removed following a first installation.



The Optional Wall Saver is designed to avoid damages while moving the bed if the bed is not unplugged. This wall saver will easily unconnect itself.

INSTALLATION

Required Tools: None

Procedure

- 1. Insert the connector in the outlet on the bed, as indicated in the figure below.
- 2. Screw the connector's screws at the bed location.
- 3. Join both cables.
- 4. Insert the connector in the other one on the cable from the hospital.
- 5. Screw the connector's screws to the hospital connector.



The Optional X-Ray Cassette Holder was designed to hold the necessary material in order to perform X-Rays with the bed.

INSTALLATION

Required Tools:

- #2 Phillips Screwdriver
- 1. Raise the fowler to the full upright position.
- 2. Apply the brakes if they are not already engaged.
- 3. Unplug the bed and turn off the battery disconnect switch.
- 4. Using a Phillips screwdriver, install the bracket assembly (A) to the the top of the fowler frame with two #10 x ¹/₂" tapping screws (F).
- 5. Using a Phillips screwdriver, install the two Cassette Holder Pivot brackets (B) into the lower section of the fowler with four #10 x 1/2" tapping screws (G).
- Using the Phillips screwdriver, install the X-Ray Cassette Holder Plate (C) into the Cassette Holder Pivot brackets (B) with two #10 x 3/4" tapping screws (E) and two spacers (D)

Note: Make sure to close the X-ray cassette holder support after using it to avoid damaging it when there is a movement of the fowler section or of the list system.



Beds require an effective maintenance program, we recommend checking these items annually. Use this sheet for your records. Keep on file.

CHECKLIST

- _____ All fasteners secure (reference all assembly prints).
- _____ Engage brake pedal and push on the bed to ensure all casters lock securely.
- "Brake Not Set" LED on the footboard and head end siderails when brakes are not engaged.
- Locking steer caster engages and disengages properly (2131 Model only).
- _____ Siderails move, latch and stow properly.
- _____ CPR release working properly.
- _____ I.V. pole working properly (if on bed).
- _____ No cracks or splits in head or footboards.
- _____ No rips or cracks in mattress cover.
- All functions on head end siderails working properly (including LED's).
- All functions on footboard working properly (including LED's).
- _____ Scale and bed exit system working properly.
- _____ Night light working properly.
- Power cord not frayed.
- _____ No cables worn or pinched.
- _____ All electrical connections tight.
- _____ All grounds secure to the frame.
- Ground impedance not more than 100 milliohms.
- Current leakage not more than 300 microamps.
- _____ Engage drive wheel and ensure it is operating properly (Zoom® option 2141 model only).
- _____ Motion release switches working properly (Zoom® option 2141 model only).
- Confirm head end Zoom® handle functionality (2141 model only).
- _____ Confirm battery powered functionality.
- _____ Ensure ground chains are clean, intact, and have at least two links touching the floor.
- _____ Check fowler angle for accuracy 0° 70°.
- _____ Check gatch angle for accuracy 0° 15°.
- _____ Check foot section angle for accuracy 0° 50°.
- Siderail switches working properly (*i*BED Awareness option).
- iBED Awareness Light Bar LED's on footboard and siderails working properly (iBED Awareness option).
- _____ Inspect footboard control labeling for signs of degradation.
- _____ Ensure calibration of the touch screen is accurate.
- Ensure calibration of the bed is accurate.

Bed Serial Number:	 	
Completed by:	 Date:	

BED CLEANING

Hand wash all surfaces of the bed with warm water and mild detergent. Wipe the bed clean and DRY THOROUGHLY to avoid build up of cleaning solution. Do not steam clean or hose off the bed. Do not immerse any part of the bed. Some of the internal parts of the bed are electric and may be damaged by exposure to water.

Suggested cleaners for bed surfaces:

- · Quaternary Cleaners (active ingredient ammonium chloride).
- Phenolic Cleaners (active ingredient o-phenylphenol).
- Chlorinated Bleach Solution (5.25% less than 1 part bleach to 100 parts water).

Avoid over saturation and ensure the product does not stay wet longer than the chemical manufacturer's guidelines for proper disinfecting.

SOME CLEANING PRODUCTS ARE CORROSIVE IN NATURE AND MAY CAUSE DAMAGE TO THE PRODUCT IF USED IMPROPERLY. If the products described above are used to clean Stryker patient care equipment, measures must be taken to ensure the beds are wiped with a damp cloth soaked in clean water and thoroughly dried following cleaning. Failure to properly rinse and dry the beds will leave a corrosive residue on the surface of the bed, possibly causing premature corrosion of critical components. Failure to follow the above directions when using these types of cleaners may void this product's warranty.

MATTRESS CARE

Inspect the mattress after each use. Discontinue use if any cracks or rips are found in the mattress cover as these openings may allow fluid to enter the mattress.



Item	Recycling/Material Code	Important Information	Qty
A	(QDF27-1097) Brake Control Board		2
В	(QDF27-1099) Siderail Nurse Control Board		2



Item	Recycling/Material Code	Important Information	Qty
А	(QDF27-1429) Nurse Call Board		2
В	(QDF75-0410) Can-Conn Board		1



Item	Recycling/Material Code	Important Information	Qty
A	(QDF2060) Smart TV Board		1



Item	Recycling/Material Code	Important Information	Qty
А	(QDF27-1562) iBed Electronic Board Lens		4

Assembly Part number: OL270263-XXX (Reference Only)

Item	Recycling/Material Code	Important Information	Qty
А	(QDF27-1099) Siderail Nurse Control Board		3



Item	Recycling/Material Code	Important Information	Qty
А	QDF75-0230 (Zoom [®] Control Board)		1
В	QDF27-1372 (Zoom [®] Load Cell)		1

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Item	Recycling/Material Code	Important Information	Qty
А	(QDF27-1562) iBed Electronic Board Lens		4

Assembly Part number: OL270294-XXX (Reference Only)





Item	Recycling/Material Code	Important Information	Qty
A	(QDF75-0010) Menu Board		1
В	(QDF27-1097) Brake Control Board		1



Item	Recycling/Material Code	Important Information	Qty
А	(27-2477) Fowler Angle Sensor		1



Item	Recycling/Material Code	Important Information	Qty
А	(27-2477) Gatch Angle Sensor		1



Item	Recycling/Material Code	Important Information	Qty
А	(27-2477) Foot Angle Sensor		1



ltem	Recycling/Material Code	Important Information	Qty
А	(27-2477) Base Angle Sensor		1



Item	Recycling/Material Code	Important Information	Qty
А	(27-2477) Trend Angle Sensor		1



Item	Recycling/Material Code	Important Information	Qty
А	(QDF75-0450) DC Power Control Board		1
В	(QDF9188) 12V 18Ah Battery		1



Item	Recycling/Material Code	Important Information	Qty
А	(QDF27-1430) Zoom [®] Board		1
В	(QDF75-0240) Zoom [®] Interface Board		

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Item	Recycling/Material Code	Important Information	Qty
А	(QDF27-1372) Litter Load Cell		4

LIMITED WARRANTY

Stryker Medical Division, a division of Stryker Corporation, warrants to the original purchaser the *InTouch*® Critical Care Bed, Model FL27 (2131/2141) be free from defects in material and workmanship for a period of one (1) year after date of delivery. Stryker's obligation under this warranty is expressly limited to supplying replacement parts and labor for, or replacing, at its option, any product which is, in the sole discretion of Stryker, found to be defective. If requested by Stryker, products or parts for which a warranty claim is made shall be returned prepaid to the factory. Any improper use or any alteration or repair by others in such manner as in Stryker's judgment affects the product materially and adversely shall void this warranty. Any repair of Stryker products using parts not provided or authorized by Stryker shall void this warranty. No employee or representative of Stryker is authorized to change this warranty in any way.

Stryker Medical Bed products are designed for a 10 year expected service life under normal use, conditions, and with appropriate periodic maintenance as described in the maintenance manual for each device. Stryker warrants to the original purchaser that the welds on its Bed products will be free from structural defects for the expected 10 year life of the Bed product as long as the original purchaser owns the product.

This statement constitutes Stryker's entire warranty with respect to the aforesaid equipment. Stryker makes no other warranty or representation, either expressed or implied, except as set forth herein. There is no warranty of merchantability and there are no warranties of fitness for any particular purpose. In no event shall Stryker be liable here under for incidental or consequential damages arising from or in any manner related to sales or use of any such equipment.

TO OBTAIN PARTS AND SERVICE

Stryker products are supported by a nationwide network of dedicated Stryker Field Service Representatives. These representatives are factory trained, available locally, and carry a substantial spare parts inventory to minimize repair time. Simply call your local representative, or call Stryker Customer Service USA at 1-800-327–0770, option 2, Canada 1-888-233-6888.

SERVICE CONTRACT COVERAGE

Stryker has developed a comprehensive program of service contract options designed to keep your equipment operating at peak performance at the same time it eliminates unexpected costs. We recommend that these programs be activated before the expiration of the new product warranty to eliminate the potential of additional equipment upgrade charges.

A Service Contract helps to:

- · Ensure equipment reliability
- Stabilize maintenance budgets
- Diminish downtime
- Establish documentation for JCAHO
- Increase product life
- Enhance trade-in value
- Address risk management and safety

SERVICE CONTRACT PROGRAMS

Stryker offers the following service contract programs:

Service Agreement Options *	Premium	Complete	Standard
Annually scheduled preventative maintenance	Х		Х
All parts	Х	Х	
All labor and travel	Х	Х	
Unlimited emergency service calls	Х	Х	
Priority one contact: two hour phone response	Х	Х	
Most repairs completed within 3 days	Х	Х	
JCAHO documentation	Х	Х	Х
On-site record of PM & emergency service	Х		Х
Factory-trained Stryker service technician	Х	Х	Х
Stryker authorized parts used	Х	Х	Х
Service during regular business hours (8-5)	Х	Х	Х

* Does not include maintenance due to abuse or for any disposable items. Stryker reserves the right to change options without notice.

Stryker Medical also offers personalized service contracts. Pricing is determined by age, location, model and condition of product.

For more information on our service contracts, please call your local representative.

RETURN AUTHORIZATION

Merchandise cannot be returned without approval from the Stryker Customer Service Department. An authorization number will be provided which must be printed on the returned merchandise. Stryker reserves the right to charge shipping and restocking fees on returned items. **Special, modified, or discontinued items not subject to return.**

DAMAGED MERCHANDISE

ICC Regulations require that claims for damaged merchandise must be made with the carrier within fifteen (15) days of receipt of merchandise. **Do not accept damaged shipments unless such damage is noted on the delivery receipt at the time of receipt.** Upon prompt notification, Stryker will file a freight claim with the appropriate carrier for damages incurred. Claim will be limited in amount to the actual replacement cost. In the event that this information is not received by Stryker within the fifteen (15) day period following the delivery of the merchandise, or the damage was not noted on the delivery receipt at the time of receipt, the customer will be responsible for payment of the original invoice in full. Claims for any short shipment must be made within thirty (30) days of invoice.

INTERNATIONAL WARRANTY CLAUSE

This warranty reflects U.S. domestic policy. Warranty outside the U.S. may vary by country. Please contact your local Stryker Medical representative for additional information.



Manufactured For UNITED STATES Stryker Medical 3800 E. Centre Ave., Portage, Michigan USA 49002



