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**IMPORTANT**  
File in your  
maintenance  
records

**stryker**<sup>®</sup>  
**Medical**



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**E//PIC II<sup>®</sup> & E//PIC II<sup>®</sup> + Critical Care Bed**

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**Model 2030/2031**

**OPERATIONS MANUAL**

For Parts or Technical Assistance  
1-800-327-0770

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# Introduction

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## INTRODUCTION

This manual is designed to assist you with the operation of the Stryker Model 2030 Epic II® and Epic II® + Critical Care Beds. Read it thoroughly before using the equipment.

## SPECIFICATIONS

Maximum Weight Capacity	500 pounds or 227 kilograms
Weigh System Capacity (optional equipment)	patients weighing up to 500 pounds or patients weighing up to 227 kilograms
Weigh System Accuracy (optional equipment)	± 2% of total patient weight at zero degrees of Trend
Overall Bed Length/Width	L-91" /W-42.5" or L-231 cm /W-108 cm
Minimum/Maximum Bed Height (Standard)	18.25" to 32.5" – 46.5 cm. to 82.5 cm. (6" casters) 20.25" to 34.5" – 51.5 cm. to 88 cm. (8" casters)
Minimum/Maximum Bed Height (Enhanced)	19.9" to 34.5" – 50.5 cm. to 88 cm. (6" casters) 21.9" to 36.5" – 56 cm. to 93 cm. (8" casters)
Fluoro Access	17.5" (Epic II®), 16" (Epic II®+)
Knee Gatch Angle	0° to 30°
Back Angle	0° to 90°
Trendelenburg/Reverse Trendelenburg	-14° to +14°
Electrical Requirements	115 VAC, 60 Hz, 7.0 Amps 230 VAC, 50/60 Hz, 4.0 Amps 100 VAC, 50/60 Hz, 9.0 Amps (Japan Option)
Battery Voltage (Optional)	24 V, 31 Ah
Noise Level	> 65 Decibels

Stryker reserves the right to change specifications without notice.

## WARNING / CAUTION / NOTE DEFINITION

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

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### **WARNING**

The personal safety of the patient or user may be involved. Disregarding this information could result in injury to the patient or user.

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### **CAUTION**

These instructions point out special procedures or precautions that must be followed to avoid damaging the equipment.

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### **NOTE**

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

# Introduction

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Warning, Refer to Service/Maintenance Manual



Alternating Current



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

IPX4: Protection from liquid splash



Dangerous Voltage Symbol



Protective Earth Terminal



Potential Equalization Symbol



Medical Equipment Classified by Underwriters Laboratories Inc. with Respect to Electric Shock, Fire, Mechanical and Other Specified Hazards Only in Accordance with UL 2601 -1 and CAN/CSA C22.2 No. 601.1

# Introduction

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## SAFETY TIPS AND GUIDELINES

Before operating the Epic II® and Epic II®+ Critical Care Beds, it is important to read and understand all information in this manual. Carefully read and strictly follow the safety guidelines listed on this page and on page 5. To ensure safe operation 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.

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### **WARNING**

- Serious injury can result if caution is not used when operating the bed. Operate bed only when all persons are clear of the electrical and mechanical systems.
  - Leave the bed in the lowest position when the patient is unattended. Leaving the bed in a raised position could increase the chance of patient falls and injury.
  - Scale function may be affected by siderail/caster interference. With the litter fully lowered or lowered in Reverse Trendelenburg, the siderails tucked under the litter in the storage position and the casters turned, there is the potential for interference between the siderail and the caster. Raise the siderails when lowering the litter to the full down position to prevent the interference from causing the bed's scale system to weigh inaccurately.
  - Leave the siderails fully up and locked when the patient is unattended. After raising the siderails, pull firmly on the siderail to ensure it is securely locked into the up position. Siderails are not intended to serve as a patient restraint device to keep patients 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 in bed. Failure to utilize the siderails properly could result in patient injury.
  - Always apply the caster brakes when a patient is getting on or off the bed. Always keep the caster brakes applied when a patient is on the bed (except during transport). Serious injury could result if the bed moves while a patient is getting in or out of bed. After the brake pedal is applied, push on the bed to ensure the brakes are locked. When moving the bed, toggle the steer pedal to put the bed in the steer mode. This locks the swivel motion of the right foot end caster and makes the bed easier to move.
  - Ensure the brakes are completely released prior to attempting to move the bed. Attempting to move the bed with the brakes actuated could result in injury to the user and/or patient.
  - Assistance is required to lower the Back if the angle of the Back is greater than 80° when the CPR emergency release is activated. Attempting to lower the Back in this position without assistance may result in injury to the operator.
  - The Bed Exit System 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. Adding or subtracting objects from the bed after arming the bed exit system may cause a reduction in the sensitivity of the bed exit system.
  - Because individual beds may have different options, foot boards should not be moved from one bed to another. Mixing foot boards could result in unpredictable bed operation.
  - If the bed is equipped with the Epic II®+ option, there is a power save mode. 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.
  - Due to the weight the battery back-up option adds to the bed (approximately 50 pounds), additional force is required to move a bed equipped with the Epic II®+ Option. Caution should be used when transporting this bed. Additional assistance should be used when necessary. Failure to use caution while transporting this bed may result in injury to the user.
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# Introduction

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## SAFETY TIPS AND GUIDELINES (CONTINUED)

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### WARNING

- Hand wash all surfaces of the bed with warm water and mild detergent. Dry thoroughly. **DO NOT STEAM CLEAN, PRESSURE WASH, HOSE OFF OR ULTRASONICALLY CLEAN.** Using these methods of cleaning is **not** recommended and may void this product's warranty. Inspect the mattress cover after each use. Discontinue use if any cracks or rips are found in the cover which may allow fluids to enter the mattress. Exposure to fluids may cause injury to patient and/or user.
  - If large fluid spills occur in the area of the circuit boards or 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 short out controls and may cause the bed to operate erratically or make some functions completely inoperable. Component failure caused by fluids could even cause the bed to operate unpredictably and could cause injury to the patient. **DO NOT** put the bed back into service until it is completely dry and has been thoroughly tested for safe operation.
  - Preventative maintenance should be performed at a minimum of biannually to ensure all features are functioning as designed. Close attention should be given to safety features including, but not limited to:

Safety side latching mechanisms	Caster braking systems
Leakage current 100 microamps max.	No controls or cabling entangled in bed mechanisms
Frayed electrical cords and components	
All controls return to off or neutral position when released	
  - Always unplug bed during service or cleaning. When working under the bed, always place blocks under the litter frame to prevent injury in case the Bed Down switch is accidentally activated.
  - The battery tray assembly weighs 50 pounds. Take care when removing the two hex head screws securing it to the base frame or personal injury could result.
  - 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.**
  - The Epic II® Critical Care Bed is not intended for pediatric use or for patients under 50 pounds.
  - Explosion Hazard - do not use bed in the presence of flammable anesthetics.
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# Set-Up Procedures

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## SET-UP PROCEDURES

It is important that the Epic II® Critical Care Bed is working properly before it is put into service. The following list will help ensure that each part of the bed is checked.

- Plug the bed into a properly grounded, hospital grade wall receptacle.



### **WARNING**

The Epic II® Critical Care Bed is equipped with a hospital grade plug for protection against shock hazard. It must be plugged directly into a properly grounded three-prong receptacle. Grounding reliability can be achieved only when a hospital grade receptacle is used.

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- Depress the pedal at either side of the bed fully to set the four wheel brakes and ensure all four casters lock. Depress the pedal again to release the brakes.
  - Toggle the steer pedal to put the bed in the steer mode and ensure the locking caster engages.
  - Ensure the siderails raise and lower smoothly and lock in the up and intermediate positions.
  - Run through each function on the foot board control panel and ensure that each is working properly (see function lockout system usage, page 14 and weigh system control panel guide, page 18).
  - Ensure all functions are working properly on the siderail controls.
  - Raise the Back up to approximately 60°. Squeeze the CPR release handle and ensure the Back and Knee will drop with minimal effort.
  - If the bed is equipped with the Epic II®+ battery backup option, unplug the power cord from the wall socket. Push the battery power switch located on the lower left corner of the head end to the "ON" position. Again, verify each function on the foot board and siderails is operating properly. The 12 volt batteries that provide back-up power to the unit functions with the Epic II®+ option will charge whenever the power cord is plugged into the wall socket. The batteries require approximately 10 hours of charging time before the bed is put into service.

# Operation Guide

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## BRAKE PEDAL OPERATION

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### **WARNING**

Always apply the caster brakes when a patient is getting on or off the bed. Push on the bed to ensure the brakes are securely locked. Always engage the brakes unless the bed is being moved. Injury could result if the bed moves while a patient is getting on or off the bed.

Ensure the brakes are completely released prior to attempting to move the bed. Attempting to move the bed with the brakes actuated could result in injury to the user and/or patient.

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To activate the brakes, push down once on one of the pedals located at the midpoint of the bed on both sides (identified by the label at right). The pedal will remain in the lowered position, indicating the brakes are engaged. To disengage the brakes, push down once and the pedal will return to the upper position.



### **NOTE**

There are LED lights on the outside of the head end siderails that will blink when the brakes *are not* engaged only if the bed is plugged into a wall socket (see page 10). The brakes will still operate properly when the bed is not plugged in.

## STEER PEDAL OPERATION

The purpose of the steer caster is to help guide the bed along a straight line and to help with pivoting at corners when the bed is moved.

To activate the steer caster, move the pedal located at the head end of the bed to your left as shown on the label.



### **NOTE**

For proper "tracking" of the steer caster, push the bed approximately 10 feet to allow the wheels to face the direction of travel before engaging the steer pedal. If this is not done, proper "tracking" will not occur and the bed will be difficult to steer.



# Operation Guide

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## **CPR EMERGENCY RELEASE USAGE**

If the Back and/or Knee is raised and quick access to the patient is needed, squeeze one of the two red emergency release handles, located under the litter top at the head section on either side of the bed, and the Back and Knee will lower to a flat position. The handle can be released at any time to stop the Back from lowering.

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### **WARNING**

Assistance is required to lower the Back if the angle of the Back is greater than 80° when the CPR emergency release is activated. Attempting to lower the Back in this position without assistance may result in injury to the operator.

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## **CPR BOARD USAGE**

The CPR board is stored on the bed's head board. To remove it, pull it away from the head board and lift it out of the storage position. The head board can also be removed and used as an emergency CPR board.

## **FOLEY BAG HOOKS USAGE**

The standard Foley bag hooks are found at two locations on both sides of the bed, under the frame rail below the seat section and at the extreme foot end of the bed. The patient weight reading on the bed scale system will not be affected when the Foley bag hooks are used.

# Siderail Operation Guide

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## POSITIONING SIDERAILS

### NOTE

The siderails can be locked at two heights (intermediate & full up).

- The siderails can be tucked away under the bed when not in use. To remove the rail from the tucked position, grasp the top of the rail and pull outward.
- To engage the head end siderail, grasp the rail and swing it upward to full height. When the siderail is being raised, it does not lock in the intermediate position. To lower the siderail, push in the blue release handle and rotate the siderail until it locks in the intermediate position. To lower the siderail fully, push in the blue release handle again and rotate the siderail until it is completely lowered.

### NOTE

To activate the siderail bypass mechanism, the rail must be fully lowered. If the rail is not completely lowered, the siderail will lock in the intermediate position when it is raised.

- To engage the foot end siderail, the same procedure is required as for the head end siderail, however, the siderail swings toward the foot end of the bed.



### WARNING

Leave the siderails fully up and locked when the patient is unattended. After raising the siderails, pull firmly on the siderail to ensure it is securely locked into the up position. Siderails are not intended to serve as a patient restraint device to keep patients 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 in bed. Failure to utilize the siderails properly could result in patient injury.

Scale function may be affected by siderail/caster interference. With the litter fully lowered or lowered in Reverse Trendelenburg, the siderails tucked under the litter in the storage position and the casters turned, there is the potential for interference between the siderail and the caster. Raise the siderails when lowering the litter to the full down position to prevent the interference from causing the bed's scale system to weigh inaccurately.

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### CAUTION

The siderails are not intended to be used as a pushing device. Damage to the siderails could occur.

### NOTE

For the Back to raise to 90°, both head end siderails must be in the intermediate or down position.

## SIDERAIL CONTROL PANEL LIGHTS

- The head end siderails are equipped with lights to illuminate the siderail control buttons and the nurse call switch. The lights are activated at the foot board control panel.
- There are three settings for the intensity of the siderail control lights: low, medium and high. When all the siderail lights are off, push the siderail control light button on the foot board once to turn on both the control lights and the nurse call indicator light. Push the button again to change the siderail control lights from low to medium setting, and again to change to the high setting. (The intensity of the nurse call indicator light does not change.)
- When all the siderail lights are on, pushing the button once will turn off only the siderail control lights and pushing it again will turn off the nurse call indicator light (see control panel guide page 13).



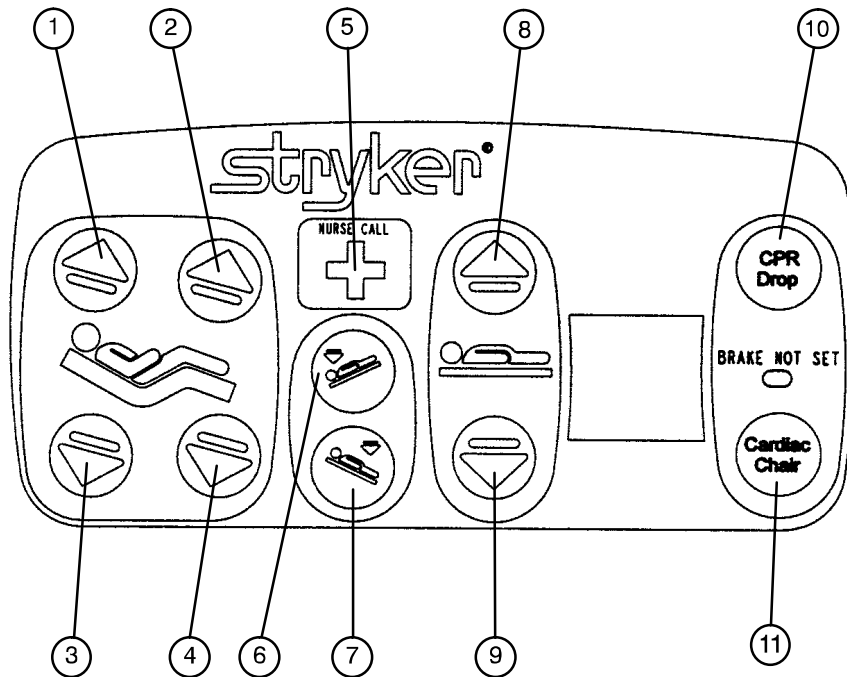
### WARNING

The nurse call indicator light on the siderails helps ensure the patient understands where the button is for contacting the nurse station. Turning this light off will compromise this ability, especially in a darkened room.

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# Siderail Operation Guide

## OUTSIDE SIDERAIL FUNCTION GUIDE



1. Press to raise back section.
2. Press to raise knee section.
3. Press to lower back section.
4. Press to lower knee section.
5. Press to activate nurse call.  
▶ This function is optional equipment.
6. Press to lower the head end of the bed (Trendelenburg).
7. Press to lower the foot end of the bed (Reverse Trendelenburg).
8. Press to raise the litter. If your bed is equipped with the enhanced height option, continue to hold the button an additional 5 seconds after the first stop. The litter will raise an additional 2 inches.
9. Press to lower the litter.
10. Press to activate emergency CPR positioning.
11. Press to activate Cardiac Chair positioning.

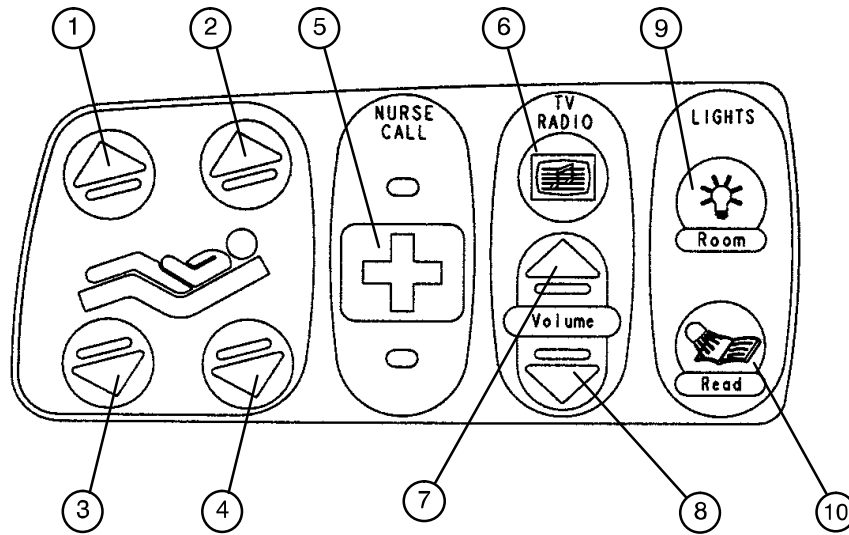
### **WARNING**

When attaching equipment to the bed, ensure it will not impede normal bed operation or patient injury could occur. For example: hooks on hanging equipment must not actuate control buttons, equipment must not hide the nurse call button, etc.

# Siderail Operation Guide

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## INSIDE SIDERAIL FUNCTION GUIDE



Beds with All Options (Including Basic TV/Radio)

1. Press to raise knee section.
  2. Press to raise back section.
  3. Press to lower knee section.
  4. Press to lower back section.
- The following functions are optional equipment.
5. Press to activate the nurse call.
  6. Press to turn on the TV or radio. Press again to change TV channels and to turn off the TV.
  7. Press to increase the TV or radio volume.
  8. Press to decrease the TV or radio volume.
  9. Press to turn on the room lights. Press again to turn off.
  10. Press to turn on the reading light. Press again to turn off.

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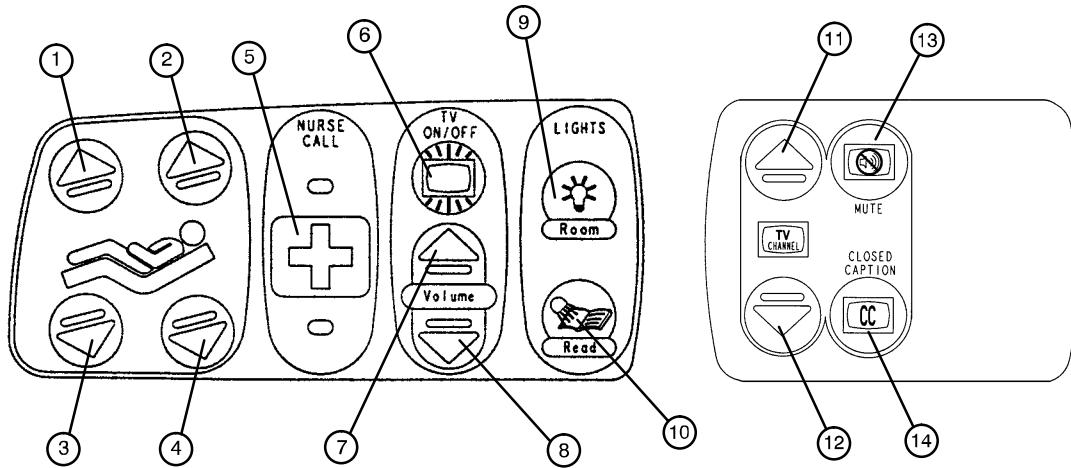
 **WARNING**

When attaching equipment to the bed, ensure it will not impede normal bed operation. For example: hooks on hanging equipment must not actuate control buttons, equipment must not hide the nurse call button, etc.

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# Siderail Operation Guide

## INSIDE SIDERAIL FUNCTION GUIDE



Beds with All Options (Including Smart TV)

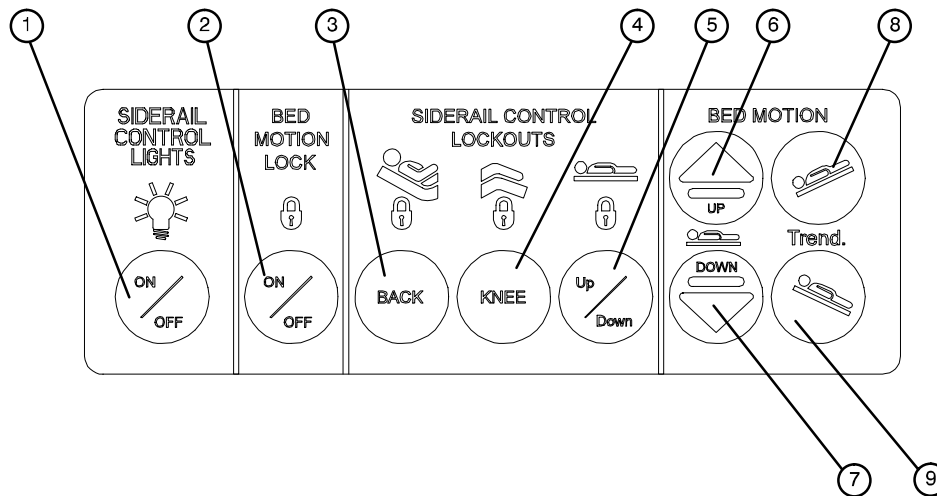
1. Press to raise knee section.
  2. Press to raise back section.
  3. Press to lower knee section.
  4. Press to lower back section.
- The following functions are optional equipment.
5. Press to activate the nurse call.
  6. Press to turn the TV on. Press again to turn off the TV.
  7. Press to increase the TV or radio volume.
  8. Press to decrease the TV or radio volume.
  9. Press to turn on the room lights. Press again to turn off.
  10. Press to turn on the reading light. Press again to turn off.
  11. Press to change the TV channel up.
  12. Press to change the TV channel down.
  13. Press to mute the TV sound. Press again to turn the sound back on.
  14. Press to display TV closed captioning.

### **WARNING**

When attaching equipment to the bed, ensure it will not impede normal bed operation. For example: hooks on hanging equipment must not actuate control buttons, equipment must not hide the nurse call button, etc.

# Foot Board Operation Guide

## FOOT BOARD CONTROL PANEL GUIDE



1. Press repeatedly for low, medium and high settings for the siderail control lights. Continue to press this switch to turn off the siderail control lights and the nurse call indicator light (see page 9).
2. Press to lock out all bed motion controls on the siderails. Press again to unlock.
3. Press to lock out Back motion control on the siderails. Press again to unlock.
4. Press to lock out Knee motion control on the siderails. Press again to unlock.
5. Press to lock out bed up/down motion controls on the siderails. Press again to unlock.
6. Press to raise the bed height. If your bed is equipped with the enhanced height option, continue to hold the button an additional 5 seconds after the first stop. The litter will raise an additional 2 inches.
7. Press to lower bed.
8. Press to lower head end of bed (Trendelenburg).
9. Press to lower foot end of bed (Reverse Trendelenburg).

### **WARNING**

When attaching equipment to the bed, ensure it will not impede normal bed operation or patient injury could occur. For example: hooks on hanging equipment must not actuate control buttons, equipment must not hide the nurse call button, etc.

### **WARNING**

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

# Foot Board Operation Guide

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## FOOT BOARD CONTROL PANEL GUIDE (CONTINUED)

### Led Display Panel Guide

The LED Display Panel is located at the foot end of the bed, below the Control Panel.



"POWER" - will light when the bed is plugged into the wall receptacle or the battery power switch is on. Will blink if the 9V Nurse Call battery needs to be replaced.

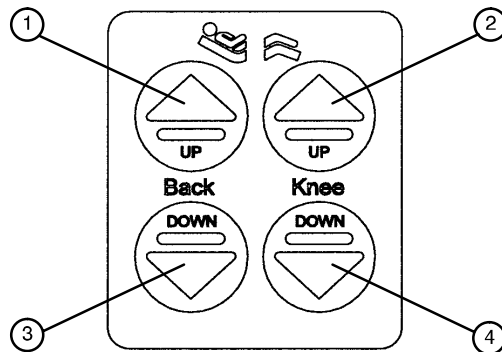
"BED MOTION LOCKED" - will light when the Bed Motion Lock has been activated.

### Function Lockout System Usage

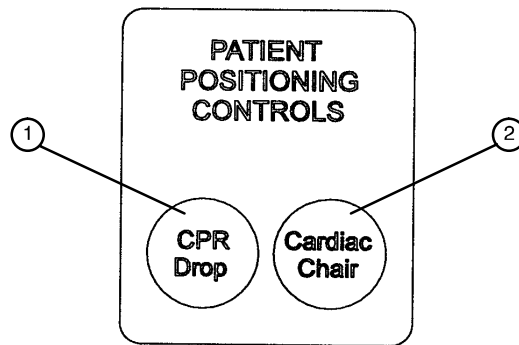
1. To lock out all bed motion switches on the bed, press the "ON/OFF" switch in the "Siderail Control Lockouts" module. The "padlock" symbol on the control panel will be lighted when that function is locked out.
2. To lock out the bed movement functions on the siderails and prevent the patient from changing the positioning of the bed, press the "BACK" or "KNEE" switch in the "Siderail Control Lockouts" module. The "padlock" symbol on the control panel will be lighted when that function is locked out.
3. To lock out the bed up/down motion on the siderails, press the Up/Down switch in the "Siderail Control Lockouts" module. The "padlock" symbol on the control panel will be lighted when that function is locked out.

# Foot Board Operation Guide

## FOOT BOARD CONTROL PANEL GUIDE (CONTINUED)



1. Press to raise back section.
2. Press to raise knee section.
3. Press to lower back section.
4. Press to lower knee section.



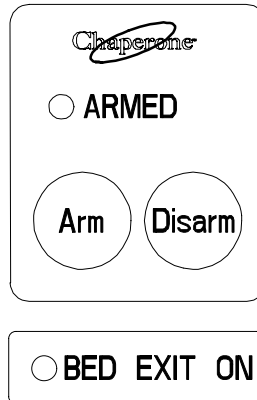
1. Press to activate the emergency CPR drop function. The bed will level from Trendelenburg/reverse Trendelenburg, the Fowler will lower to flat, the Knee will lower to flat and the litter will lower to full down.
2. Press to activate the Cardiac Chair function. The Knee will raise, the Fowler will raise or lower to approximately 52° and the bed will tilt to approximately -12° reverse Trendelenburg (foot end down) or -14° if the bed has the enhanced height option. Release the button to stop bed movement: hold the button until movement stops to complete the function.



# Foot Board Operation Guide

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## CHAPERONE® BED EXIT (OPTIONAL EQUIPMENT)



### For beds with a scale system:

#### NOTE

If the weigh system is in use, it will switch to "off" when the "ARM" key is pressed.

1. Before putting the patient on the bed, the weigh system must be zeroed for the Bed Exit System to function properly (see page 19 for instructions on zeroing the weigh system).
2. Put the patient on the bed and push the "ARM" key to activate the Bed Exit function. The "ARMED" light will come on.
3. To deactivate Bed Exit, push the "DISARM" key. The "ARMED" and "BED EXIT ON" lights will turn off.

### For beds without a scale system:

1. Before putting the patient on the bed, press and hold the "ARM" and the "DISARM" keys together until the "ARMED" light begins to flash.
2. Release the "ARM" and the "DISARM" keys and do not touch the bed until the "ARMED" light stops flashing.
3. Put the patient on the bed and push the "ARM" key to activate the Bed Exit function. The "ARMED" light will come on.
4. To deactivate Bed Exit, push "DISARM". The "ARMED" and "BED EXIT ON" lights will turn off.

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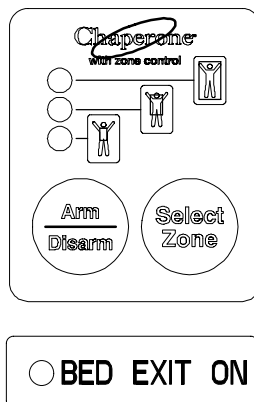
#### **WARNING**

The Bed Exit System is intended only to aid in the detection of a patient exiting the bed. It is NOT intended to replace patient monitoring protocol. It signals when a patient is about to exit. Adding or subtracting objects from the bed after arming the bed exit system may cause a reduction in the sensitivity of the bed exit system.

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# Foot Board Operation Guide

## CHAPERONE® BED EXIT WITH ZONE CONTROL (OPTIONAL EQUIPMENT)



### For beds with a scale system:

#### NOTE

If the weigh system is in use, it will switch to "off" when Bed Exit is armed.

1. Before putting the patient on the bed, the weigh system must be zeroed for the Bed Exit System to function properly (see page 19 for instructions on zeroing the weigh system).
2. Put the patient on the bed and push and release the "ARM/DISARM" key (top light will come on).
3. The Bed Exit system with Zone Control will automatically select the first zone. To change the zone, push and hold the "SELECT ZONE" key until the light indicating the desired zone comes on.
4. To deactivate Bed Exit, push the "ARM/DISARM" key. The selected zone light and "BED EXIT ON" lights will turn off.

### For beds without a scale system:

1. Before putting the patient on the bed, press and hold the "ARM/DISARM" and the "SELECT ZONE" keys together for 5 seconds. The top light will begin to flash.
2. Release the "ARM/DISARM" and the "SELECT ZONE" keys and do not touch the bed until the top light stops flashing.
3. Put the patient on the bed and push and release the "ARM/DISARM" key (top light will come on).
4. The Bed Exit system with Zone Control will automatically select the first zone. To change the zone, push and hold the "SELECT ZONE" key until the light indicating the desired zone comes on.
5. To deactivate Bed Exit, push the "ARM/DISARM" key. The selected zone light and "BED EXIT ON" light will turn off.

## CHAPERONE® ZONE SETTINGS

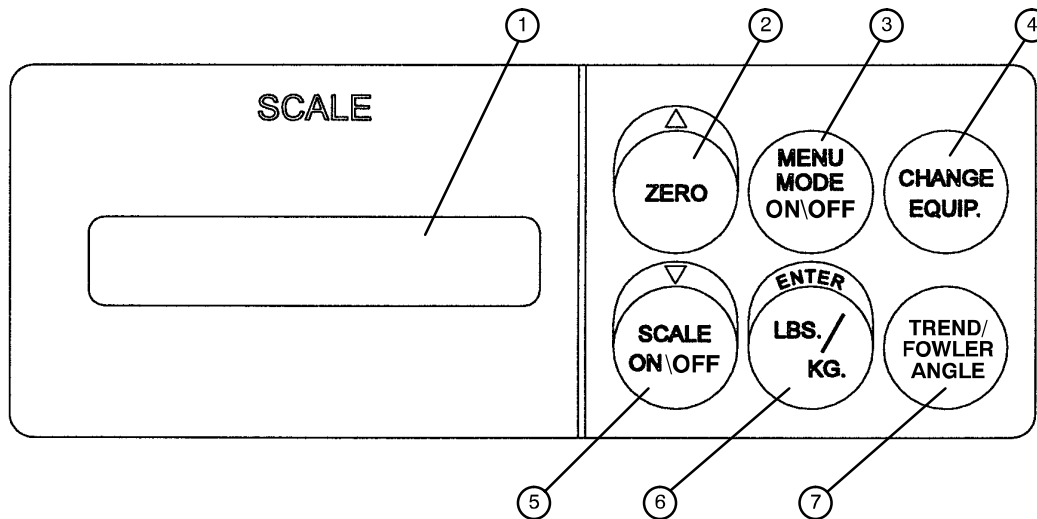
The first zone (top light) is the traditional Bed Exit zone. The patient can move around the bed freely but cannot fully exit the bed or the alarm will sound.

The second zone (middle light) is more restrictive. It allows the patient to sit up and roll over but any attempt to exit the bed will cause the alarm to sound.

The third zone (bottom light) is the most movement restrictive zone. Small movements like raising an arm or lifting the shoulders off the bed will cause the alarm to sound. The third zone is used to alert staff to a change in the condition of an unconscious or paralyzed patient.

# Foot Board Operation Guide

## WEIGH SYSTEM CONTROL PANEL GUIDE



1. LCD - displays patient weight. Trendelenburg angle is displayed when the scale is not active.
2. Press to zero bed (see page 19). Also press to scroll while Menu Mode is active.
3. Press to enter and exit the Menu Mode.
4. Press when adding or removing equipment to the bed (see page 20).
5. Press to turn weigh system on and off. Also press to scroll while Menu Mode is active.
6. Press to change weight from pounds to kilograms or back (see page 21). Also press while using the Menu Mode.
7. Press to display the Trendelenburg or Fowler angle of the bed (see page 21).

### NOTE

If weight is displayed, SCALE ON/OFF must be pressed to turn off the scale before the Trend. or Fowler angle will display.



### WARNING

Scale function may be affected by siderail/caster interference. With the litter fully lowered or lowered in Reverse Trendelenburg, the siderails tucked under the litter in the storage position and the casters turned, there is the potential for interference between the siderail and the caster. Raise the siderails when lowering the litter to the full down position to prevent the interference from causing the bed's scale system to weigh inaccurately.

For more detailed operating instructions see the following:

1. Preparing The Bed For Patient Stay - page 19
2. Activating the Weigh System and Displaying Patient Weight - page 19
3. Adding or Removing Items During a Patient's Stay - page 20
4. Displaying Trendelenburg or Fowler Angle - page 21
5. Converting the Patient's Weight - page 21
6. Viewing Patient Weight In Gain/Loss Mode - page 22
7. Changing the Numerical Value Of Displayed Weight - page 23


► This panel is optional equipment.

# Weigh System Usage

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## PREPARING THE BED FOR PATIENT STAY

- Prepare bed for patient stay by adding/removing linens, pillows, etc.

- Press and release  The scale monitor will read:

“LET GO FOR SCALE”


“WEIGHING”

“XXX.X LB”

- Press and hold  The scale monitor will read:

“HOLD TO ZERO WT.”

“RELEASE TO ZERO”

- Release  The scale monitor will now read:

“DO NOT TOUCH BED”

“0.0 LB”

The bed is now ready for the patient.

### NOTE

If Bed Exit is armed, it must be disarmed before the scales can be zeroed.

### NOTE

Do not zero the bed while a patient is in bed. If this should occur, remove the patient and zero the bed.

## ACTIVATING THE WEIGH SYSTEM AND DISPLAYING PATIENT WEIGHT

- Press and release  The scale monitor will read:

“LET GO FOR SCALE”

“WEIGHING”


“XXX.X LB”


# Weigh System Usage

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## ADDING OR REMOVING ITEMS DURING A PATIENT'S STAY


- If it is necessary to add or remove items (monitors, pumps, etc.) during the patient's stay, press and re-

lease  to activate the weigh system. After the scale monitor reads: "XXX.X LB", press and hold

 The scale monitor will read:


"HOLD TO START"

"RELEASE TO START"


- Release  The scale monitor will read:

"DO NOT TOUCH BED"

"ADD/REMOVE EQUIP."

- Add or remove the equipment and press  The scale monitor will read:

"RELEASE TO FIN."

- Release  The scale monitor will read:


"DO NOT TOUCH BED"

"XXX.X LB"


The weight displayed will be that of the patient only.

- If the CHANGE EQUIPMENT function is started but not finished, after 50 seconds the monitor will read:

"HIT CH. EQ. TO END"

- Press  The scale monitor will read:

"RELEASE TO FIN."

- Release  The scale monitor will read:



"DO NOT TOUCH BED"

"XXX.X LB"


# Weigh System Usage

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## DISPLAYING TRENDLENBURG OR FOWLER ANGLE

- If scale system is on, press and hold  The scale monitor will read:  
“EXIT SCALE”  
“TREND ANGLE X°”  
or  
“FOWLER ANGLE X°”
- If scale system is not active, press and hold  The scale monitor will read:  
“LET GO FOR FOWL”  
“FOWLER ANGLE X°”  
or  
“LET GO FOR TREND”  
“TREND ANGLE X°”

## CONVERTING THE PATIENT’S WEIGHT

- Press and release  The scale monitor will read:  
“WEIGHT NOW KGS”  
“XXX.X KG”
- Repeat the procedure to return to pounds. The display will read:  
“WEIGHT NOW LBS”  
“XXX.X LB”

# Weigh System Usage

---

## VIEWING PATIENT WEIGHT IN GAIN/LOSS MODE

- To view the patient's weight and to begin totaling the amount of weight the patient has gained or lost, press



to activate the weigh system. The scale monitor will read:

"LET GO FOR SCALE"

- Press



to enter the Menu Mode. The scale monitor will read:

"▲▼ FOR OPTIONS"

- Press



to scroll menu options. The scale monitor will read:

"START GAIN/LOSS"

"PUSH ENTER"

- Press



The scale monitor will read:

"DO NOT TOUCH BED"

"XXX.X LB G XX.X"

- To exit Gain/Loss mode, press



to enter the Menu Mode. The scale monitor will read:

"▲▼ FOR OPTIONS"

- Press



to scroll menu options. The scale monitor will read:

"QUIT GAIN/LOSS"

"PUSH ENTER"

- Press




The scale monitor will read:

"XXX.X LB"

# Weigh System Usage

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## CHANGING THE NUMERICAL VALUE OF DISPLAYED WEIGHT

- To decrease the numerical value of the displayed weight, press  to activate the weigh system.


The scale monitor will read:

“LET GO FOR SCALE”

“XXX.X LB”


- Press  to enter the Menu Mode. The scale monitor will read:

“▲▼ FOR OPTIONS”



- Press  to scroll menu options. The scale monitor will read:


“CHNG. PTNT. WGT.”

“PUSH ENTER”

- Press  The scale monitor will read:

“HOLD ▲ TO INC.  
▼ TO DEC.”

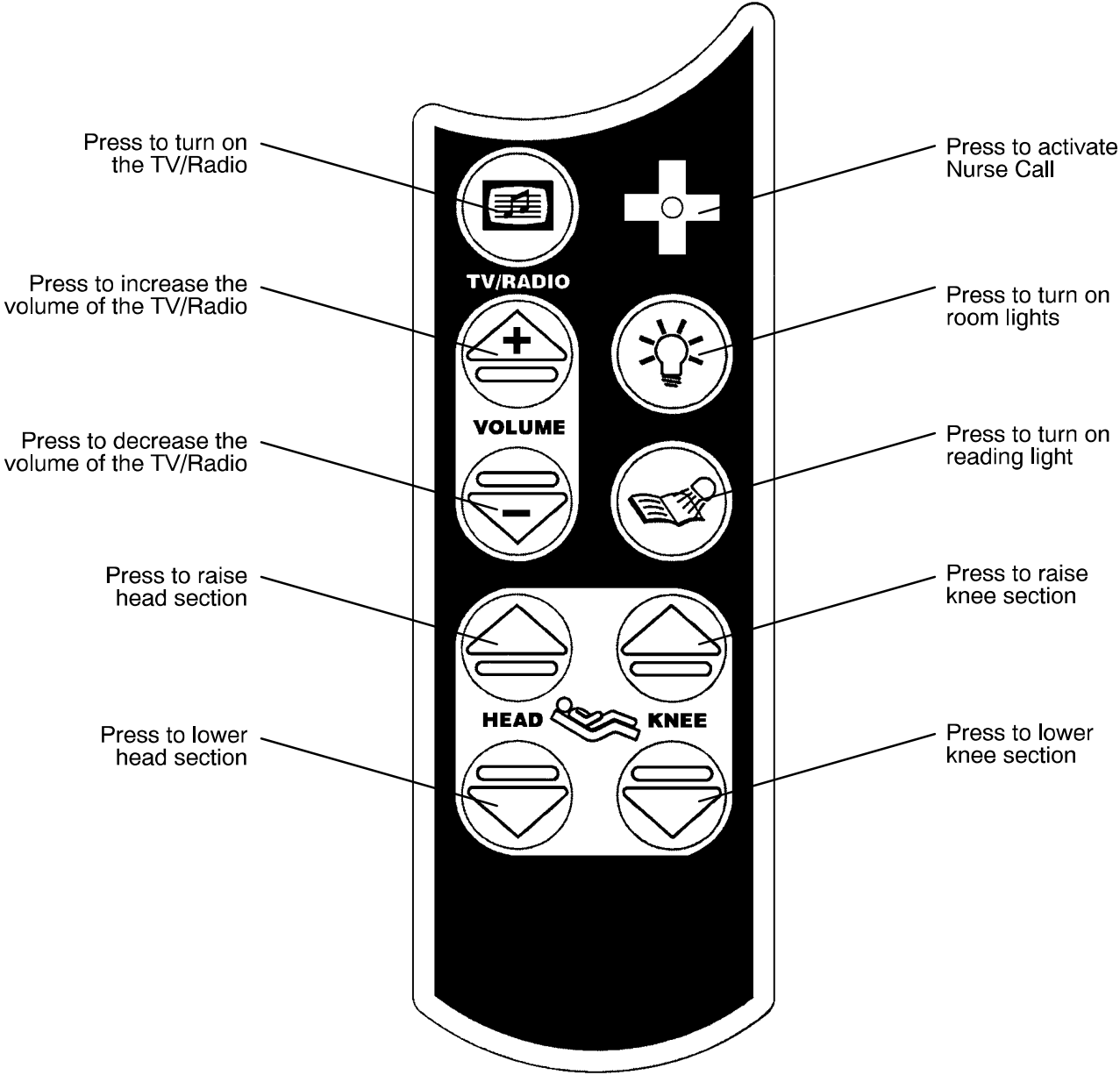
- Press  to decrease the displayed weight or  to increase the displayed weight.

- Once the desired weight is displayed, press  The scale monitor will read:

“XXX.X LB”

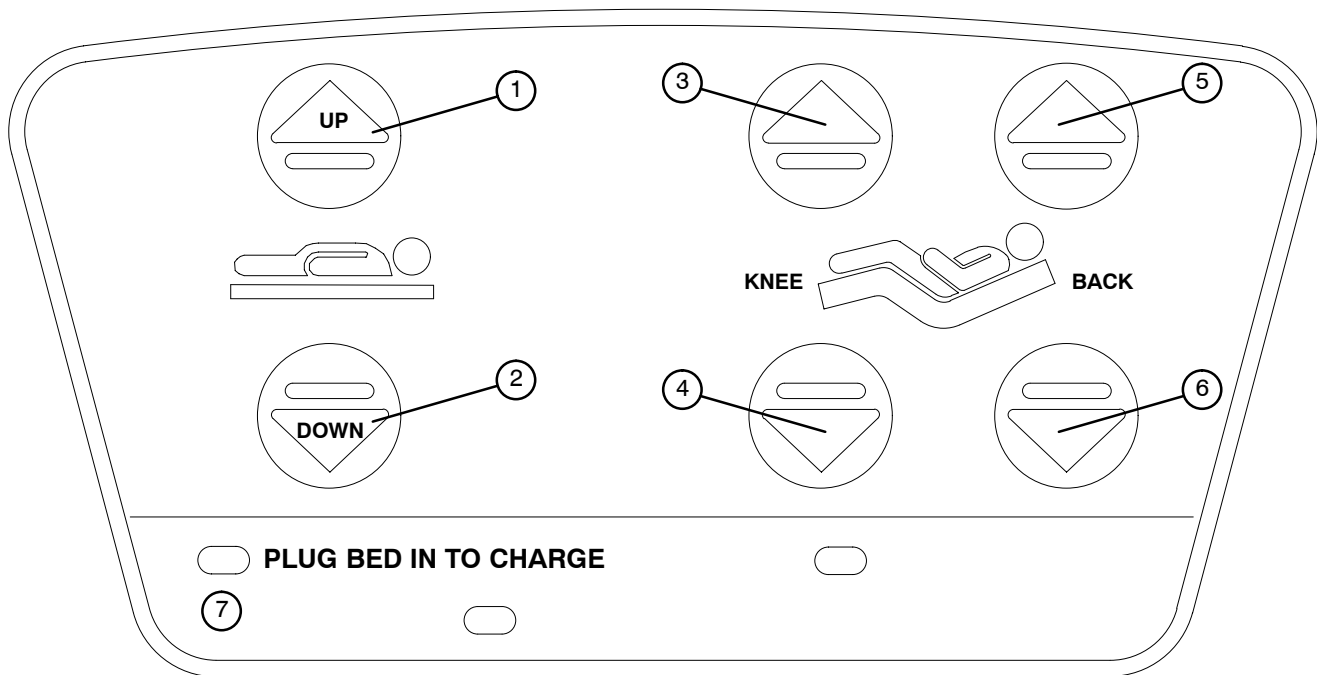


# Optional Pendant Operation



# Operation Guide

## OPERATING THE OPTIONAL EPIC II®+ HEAD END CONTROL PANEL

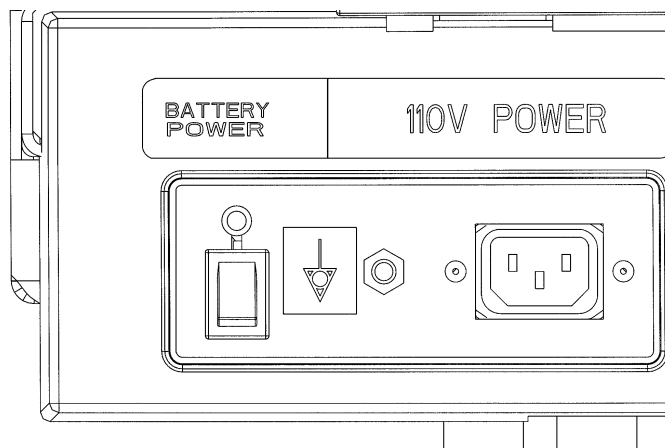


1. Press and hold to raise the litter. If your bed is equipped with the enhanced height option, continue to hold the button an additional 5 seconds after the first stop. The litter will raise an additional 2 inches.
2. Press and hold to lower the litter
3. Press to raise the Knee section.
4. Press to lower the Knee section.
5. Press to raise the Back section.
6. Press to lower the Back section.
7. The "Plug Bed In To Charge" LED will be illuminated while the battery power switch is on if the battery level is low. Plug the bed power cord into the wall socket to charge the batteries.

# Operation Guide

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## BATTERY BACKUP OPERATION AND BATTERY CHARGING (EPIC II®+ OPTION)



1. A unit equipped with the Epic II®+ option has two 12 volt batteries to provide back-up power to the unit functions if the power cord is unplugged from the wall socket. The unit functions will not operate properly with the power cord unplugged if the batteries are not sufficiently charged. The batteries are charging whenever the power cord is plugged into a properly grounded, hospital grade wall socket. When the unit is stationary, the power cord should be plugged into a wall socket whenever possible. The batteries require approximately 10 hours of charging time when they are fully discharged.
2. Activate the battery backup option by placing the battery power switch located at the left side of the head end of the litter in the “ON” position. The Battery Power LED will illuminate. The three LED’s on the head end control panel will flash on for approximately 1 second to indicate the level of battery charge. All three will flash if the batteries are fully charged, two will flash if the batteries are partially discharged but still adequate for operation and only one will flash if the batteries are near full discharge. The “Plug Bed In To Charge” LED on the Head End Control Panel (see page 25) will remain illuminated while the battery power switch is on if the battery level is low. Plug the power cord into a wall socket to charge the batteries.
3. After one hour on battery power, the unit will enter power save mode and none of the unit’s powered functions will operate. To reactivate the battery backup, either toggle the battery power switch off and back on again or plug the bed power cord into a wall socket.

### NOTE

The Battery Power LED located above the battery power switch will be illuminated when the unit is in power save mode.



### WARNING

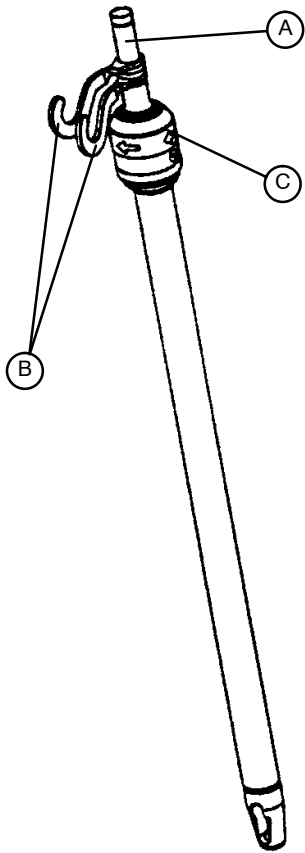
Functions including Bed Exit, scale and bed motion will cease to operate when the unit enters the power save mode. Injury to the patient could occur if proper patient monitoring protocol is not observed.

Due to the weight the battery back-up option adds to the bed (approximately 50 pounds), additional force is required to move a bed equipped with the Epic II®+ Option. Caution should be used when transporting this bed. Additional assistance should be used when necessary. Failure to use caution while transporting this bed may result in injury to the user.

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# Operation Guide

## OPERATING I.V. POLES



### To use the 2-Stage Permanently Attached I.V. pole:

#### NOTE

The 2-stage permanently attached I.V. pole is an option and may have been installed at either the head, foot or both ends of the stretcher. The choice was made at the time the stretcher was purchased.

1. Lift and pivot the pole from the storage position and push down until it is locked into the receptacle.
2. To raise the height of the pole, pull up on the telescoping portion (A) until it locks into place at its fully raised position.
3. Rotate the I.V. hangers (B) to desired position and hang I.V. bags.
4. To lower the I.V. pole turn the latch (C) clockwise until section (A) lowers.



#### CAUTION

The weight of the I.V. bags should not exceed 40 pounds.

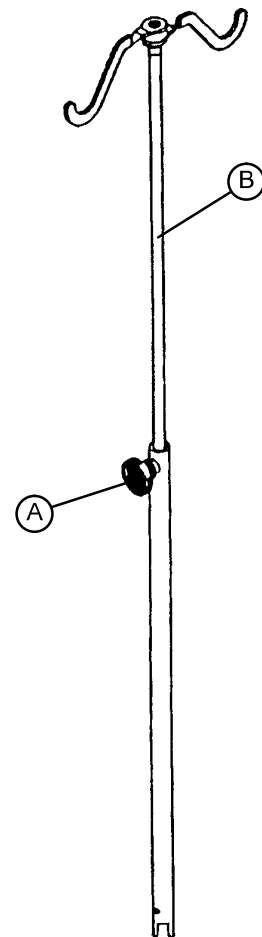
### To use the "Removable" I.V. pole:

1. Install the pole at any of the four receptacles on the bed top (located on all four corners of the bed.)
2. To raise the height of the pole, turn knob (A) counterclockwise and pull up on the telescoping portion (B) of the pole and raise it to the desired height.
3. Turn knob (A) clockwise to tighten the telescoping portion in place.



#### CAUTION

The weight of the I.V. bags should not exceed 40 pounds.



# Preventative Maintenance

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## **WARNING**

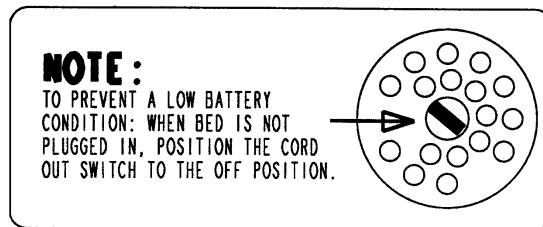
Service only by qualified personnel. Refer to the maintenance manual. Ensure the power cord is unplugged and battery power switch (Epic II®+ option) is turned to the off position before servicing.

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## **NURSE CALL BATTERY**

To prevent a low battery condition when the bed is not plugged in, position the cord out switch at the head end of the bed to the off position. The switch is identified by the label shown below. If the switch is not positioned as shown below and the bed power cord and pendant cord are unplugged, the life of the back-up battery will be significantly reduced.

If the power light (located on the foot board) is flashing, the Nurse Call battery needs to be replaced. The battery is located on the patient's left side at the head end of the bed. No tools are required to replace the battery. Unplug the bed power cord from the wall socket and replace the battery.



## **MAIN BED POWER CIRCUIT BREAKER**

In the event of a loss of bed functions, unplug the bed power cord from the wall socket and reset the circuit breaker(s) located under the bed on the patient's left side. Plug the bed into a properly grounded wall receptacle and follow the set-up procedures listed on page 6.

## **BATTERY CHARGER CIRCUIT BREAKER (EPIC II®+ OPTION)**

If the battery charger circuit breaker(s) located under the litter on the patient's head end, left side are tripped, refer to the troubleshooting section of the maintenance manual.

# Preventative Maintenance

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## MAINTENANCE CHECKLIST

- \_\_\_\_\_ All fasteners secure
- \_\_\_\_\_ Engage brake pedal and push on the bed to ensure all casters lock securely
- \_\_\_\_\_ Optional locking steer caster engages and disengages properly
- \_\_\_\_\_ Siderails move, latch and stow properly
- \_\_\_\_\_ All functions on siderails working properly (including LED's)
- \_\_\_\_\_ Head End Control Panel working properly (including LED) - optional equipment
- \_\_\_\_\_ Confirm battery powered functionality - optional equipment
- \_\_\_\_\_ CPR release working properly
- \_\_\_\_\_ Foot prop intact and working properly
- \_\_\_\_\_ I.V. pole working properly
- \_\_\_\_\_ Foley bag hooks intact
- \_\_\_\_\_ Chart rack intact and working properly
- \_\_\_\_\_ CPR board not cracked or damaged and stores properly
- \_\_\_\_\_ No cracks or splits in head and foot boards
- \_\_\_\_\_ All functions on footboard working properly (including LED's)
- \_\_\_\_\_ No rips or cracks in mattress cover
- \_\_\_\_\_ Scale and Bed Exit system calibrated properly - optional equipment
- \_\_\_\_\_ Motion interrupt switches 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 100 microamps
- \_\_\_\_\_ Apply grease to litter grease points

Bed Serial No. \_\_\_\_\_  
                                  \_\_\_\_\_  
                                  \_\_\_\_\_  
                                  \_\_\_\_\_

Completed By: \_\_\_\_\_ Date: \_\_\_\_\_

# Cleaning

Hand wash all surfaces of the bed with warm water and mild detergent. Dry thoroughly. **DO NOT STEAM CLEAN, PRESSURE WASH, HOSE OFF OR ULTRASONICALLY CLEAN.** Using these methods of cleaning is **not** recommended and may void this product's warranty.

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.)

In general, when used in those concentrations recommended by the manufacturer, either phenolic type or quaternary type disinfectants can be used. Iodophor type disinfectants are not recommended for use because staining may result. The following products have been tested and have been found not to have a harmful effect **WHEN USED IN ACCORDANCE WITH MANUFACTURERS RECOMMENDED DILUTION.\***

TRADE NAME	DISINFECTANT TYPE	MANUFACTURER	*MANUFACTURER'S RECOMMENDED DILUTION
A33	Quaternary	Airwick (Professional Products Division)	2 ounces/gallon
A33 (dry)	Quaternary	Airwick (Professional Products Division)	1/2 ounce/gallon
Beaucoup	Phenolic	Huntington Laboratories	1 ounce/gallon
Blue Chip	Quaternary	S.C. Johnson	2 ounces/gallon
Elimstaph	Quaternary	Walter G. Legge	1 ounce/gallon
Franklin Phenomysan F2500	Phenolic	Purex Corporation	1 1/4 ounce/gallon
Franklin Sentinel	Quaternary	Purex Corporation	2 ounces/gallon
Galahad	Phenolic	Puritan Churchill Chemical Company	1 ounce/gallon
Hi-Tor	Quaternary	Huntington Laboratories	1/2 ounce/gallon
LPH	Phenolic	Vestal Laboratories	1/2 ounce/gallon
Matar	Phenolic	Huntington Laboratories	1/2 ounce/gallon
Omega	Quaternary	Airwick (Professional Products Division)	1/2 ounce/gallon
Quanto	Quaternary	Huntington Laboratories	1 ounce/gallon
Sanikleen	Quaternary	West Chemical Products	2 ounces/ gallon
Sanimaster II	Quaternary	Service Master	1 ounce/gallon
Vesphene	Phenolic	Vestal Laboratories	1 1/4 ounce/ gallon

Quaternary Germicidal Disinfectants, used as directed, and/or Chlorine Bleach products, typically 5.25% Sodium Hypochlorite in **dilutions ranging between 1 part bleach to 100 parts water, and 2 parts bleach to 100 parts water are not considered mild detergents. These products are corrosive in nature and may cause damage to your stretcher if used improperly.** If these types of products are used to clean Stryker patient handling equipment, measures must be taken to insure the stretchers are rinsed with clean water and thoroughly dried following cleaning. Failure to properly rinse and dry the stretchers will leave a corrosive residue on the surface of the stretcher, possibly causing premature corrosion of critical components.

## NOTE

Failure to follow the above directions when using these types of cleaners may void this product's warranty.

## REMOVAL OF IODINE COMPOUNDS

This solution may be used to remove iodine stains from mattress cover surfaces.

1. Use a solution of 1-2 tablespoons Sodium Thiosulfate in a pint of warm water to clean the stained area. Clean as soon as possible after staining occurs. If stains are not immediately removed, allow solution to soak or stand on the surface.
2. Rinse surfaces which have been exposed to the solution in clear water before returning bed to service.

# Warranty

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## Limited Warranty:

Stryker Medical Division, a division of Stryker Corporation, warrants to the original purchaser that its products should 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. Stryker warrants to the original purchaser that the frame and welds on its beds will be free from structural defects for as long as the original purchaser owns the bed. If requested by Stryker, products or parts for which a warranty claim is made shall be returned prepaid to Stryker's factory. Any improper use or any alteration or repair by others in such manner as in Stryker's judgement 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 beds are designed for a 15 year expected life under normal use conditions and appropriate periodic maintenance as described in the maintenance manual for each device.

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 HEREUNDER 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 at (800) 327-0770.

## 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



# Warranty

**Stryker offers the following service contract programs:**

SPECIFICATIONS	GOLD	SILVER	PM* ONLY
Annually scheduled preventative maintenance	X		X
All parts,** labor, and travel	X	X	
Unlimited emergency service calls	X	X	
Priority one contact; two hour phone response	X	X	X
Most repairs will be completed within 3 business days	X	X	
JCAHO documentation	X	X	X
On-site log book w/ preventative maintenance & emergency service records	X		
Factory-trained Stryker Service Technicians	X	X	X
Stryker authorized parts	X	X	X
End of year summary	X		
Stryker will perform all service during regular business hours (9-5)	X	X	X

\* Replacement parts and labor for products under PM contract will be discounted.

\*\* Does not include any disposable items, I.V. poles (except for Stryker HD permanent poles), mattresses, or damage resulting from abuse.

**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 or call (800) 327-0770 (option #2).***

## **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.



## **European Representative**

Stryker EMEA RA/QA Director  
Stryker France  
ZAC Satolas Green Pusignan  
Av. De Satolas Green  
69881 MEYZIEU Cedex  
France

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**Medical**

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



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