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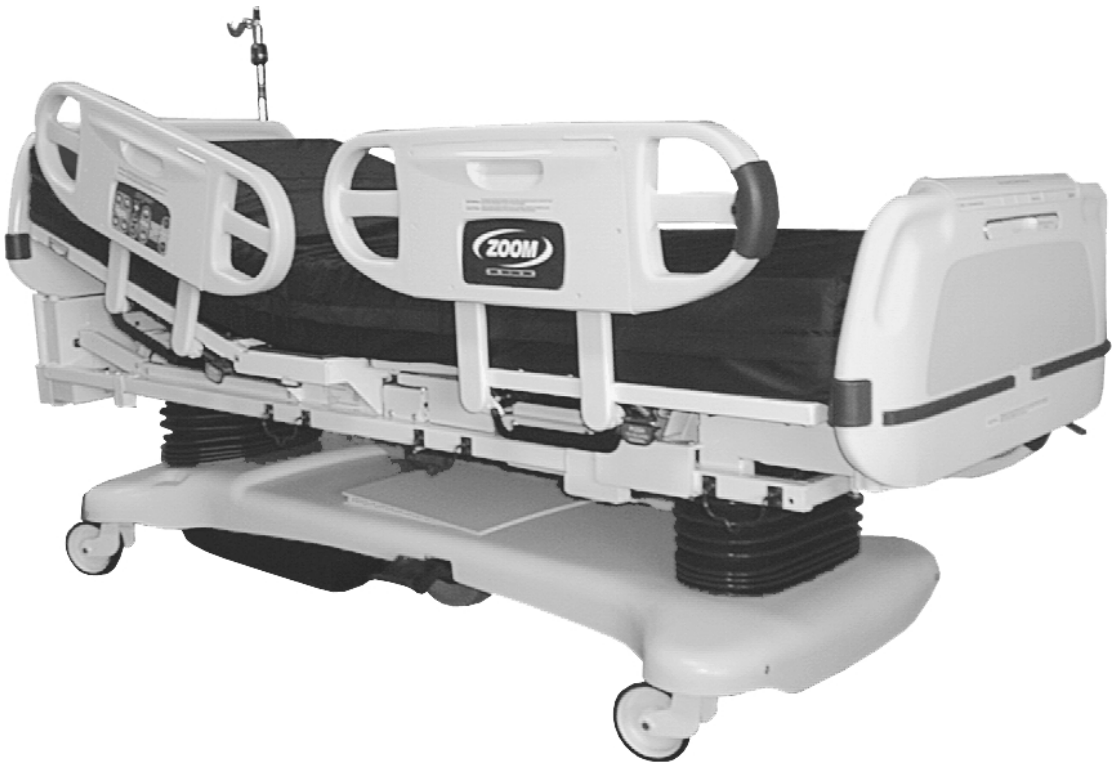


ZOOM™ Patient Transport Frame

Model 2040

OPERATIONS MANUAL

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

Table of Contents

INTRODUCTION

This manual is designed to assist you with the operation of the Model 2040 ZOOM™ Patient Transport Frame. 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)	± 1% of total patient weight
Overall Length/Width	L–93” /W–42.5” or L–238 cm /W–108 cm
Minimum/Maximum Height (Standard) Minimum/Maximum Height (Enhanced)	18.25” to 32.5” (46.5 cm. to 82.5 cm.) 19.9” to 34.5” (50.5 cm. to 88 cm.)
Knee Gatch Angle	0° to 35°
Back Angle	0° to 90°
Trendelenburg/Reverse Trendelenburg	–10° to +12°
Electrical Requirements	115 VAC, 60 Hz, 7.0 Amps
Battery Voltage	24 V, 31 Ah

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.

⚠ WARNING

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

⚠ CAUTION

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

NOTE

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

Safety Tips and Guidelines

Before operating the 2040 ZOOM™ Patient Transport Frame, it is important to read and understand all information in this manual. Carefully read and strictly follow the safety guidelines listed on this page. To ensure safe operation of the unit, methods and procedures must be established for educating and training hospital staff on the intrinsic risks associated with the usage of motorized electric frames.

⚠ WARNING

- 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.
- Serious injury can result if caution is not used when operating the unit. Operate the unit only when all persons are clear of the electrical and mechanical systems.
- Leave the frame in the lowest position when the patient is unattended. Leaving the frame in a raised position could increase the chance of patient falls and injury.
- 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 unit. Siderails are designed to keep a patient from inadvertently rolling off the unit. It is the responsibility of the attending medical personnel to determine the degree of restraint necessary to ensure a patient will remain in place. Failure to utilize the siderails properly could result in patient injury.
- Always apply the caster brakes when a patient is on the unit and push on the frame to ensure the brakes are locked. Injury could result if the unit moves while a patient is getting in or out of the unit.
- Ensure the brakes are completely released prior to attempting to move the unit. Attempting to move the unit with the brakes actuated could result in injury to the user and/or patient.
- Put the drive wheel in the neutral position and release the brakes 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” position (the LED will not be illuminated) and actuate the drive wheel pedal to the neutral position.
- When attaching equipment to the frame, ensure it will not impede normal frame operation. For example: hooks on hanging equipment must not actuate control buttons, equipment must not hide the nurse call button, etc.
- Use caution when lowering the bed with items attached to the optional accessory rail. If caution is not used, items may contact the floor resulting in damage to the items and/or injury to the patient or user.
- The CPR emergency release requires assistance to lower the Back if the angle of the Back is above 80°. Attempting to lower the Back in this position without assistance may result in injury to the operator.
- 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.
- The Bed Exit System is intended only to aid in the detection of a patient exiting the unit. 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 frame after arming the bed exit system may cause a reduction in the sensitivity of the bed exit system.
- Hand wash all surfaces of the frame 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.

Safety Tips and Guidelines

WARNING

- If large fluid spills occur in the area of the circuit boards or motors, immediately unplug the power cord from the wall socket and push the battery power on/off switch to the “OFF” position. Remove the patient from the unit and clean up the fluid. Have maintenance completely check the unit. Fluids can short out controls and may cause the unit to operate erratically or make some functions completely inoperable. Component failure caused by fluids could even cause the unit to operate unpredictably and could cause injury to the patient. DO NOT put the unit 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 frame mechanisms
  Frayed electrical cords and components — All controls return to off or neutral position when released
- Always unplug the power cord and push the battery power on/off switch to the “OFF” position before service or cleaning. When working under the frame, always place blocks under the litter frame to prevent injury in case the Bed Down switch is accidently 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 2040 Patient Transport Frame is not intended for pediatric use or for patients under 50 pounds.
- The 2040 Patient Transport Frame is intended for use by trained hospital personnel only.
- Warning: Service only by qualified personnel. Refer to maintenance manual.
- Do not modify the 2040 Patient Transport Frame. Modifying the unit can cause unpredictable operation resulting in injury to the patient or operator. Modifying the unit will also void its warranty.

WARNING

Potential pinch points

SET–UP PROCEDURES

It is important that the 2040 Patient Transport Frame is working properly before it is put into service. The following list will help ensure that each part of the unit is checked.

- Plug the power cord into a properly grounded, hospital grade wall receptacle. The 12 volt batteries that provide power to the drive wheel and back–up power to the unit functions 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.

⚠ **WARNING**

The 2040 Patient Transport Frame 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.

- Depress the pedal at either side of the frame fully to set the four wheel brakes and ensure all four casters lock. Depress the pedal again to release the brakes.
- 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 instructions, page 19 and weigh system control panel guide, page 20).
- Ensure all functions are working properly on the siderail controls (see siderail control instructions on page 13).
- Ensure all motion functions are working properly at the head end (see head end control panel guide page 15).
- Raise the Back up to approximately 60°. Squeeze the CPR release handle and ensure the Back and Knee will drop with minimal effort.
- 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.
- With the battery power switch in the “ON” position and the brakes engaged, ensure the “Release Brakes” LED on the head end control panel is illuminated.
- 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 8) to ensure it is operating properly.

Symbols

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.

IPX4: Protection from liquid splash

Dangerous Voltage Symbol

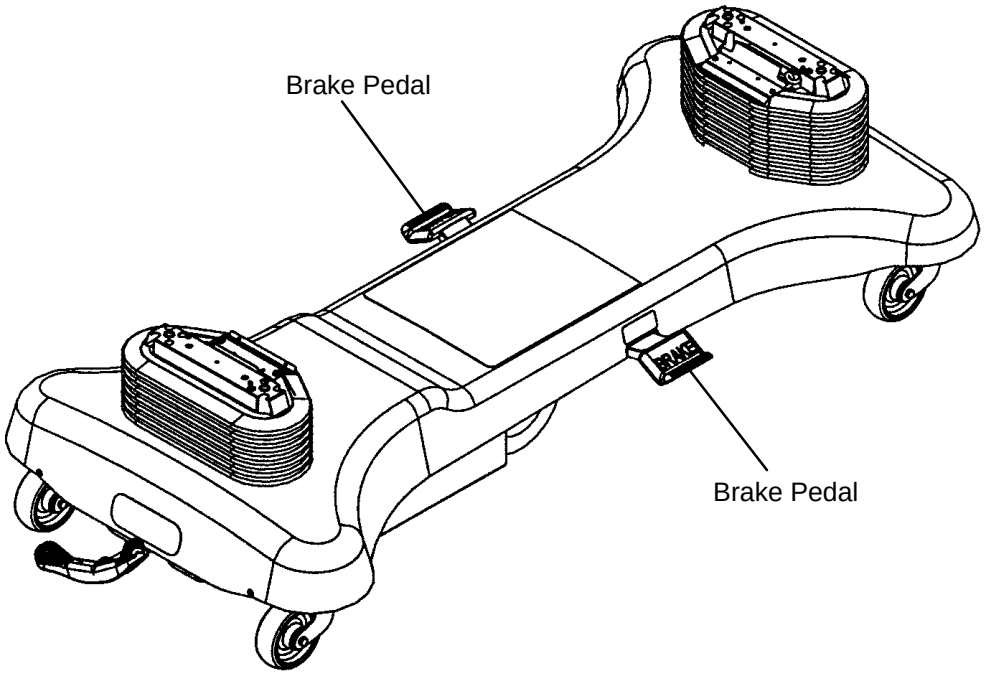
Protective Earth Terminal

Potential Equalization Symbol

BRAKE PEDAL OPERATION

⚠ WARNING

Always apply the caster brakes when a patient is getting on or off the unit. Push on the frame to ensure the brakes are securely locked. Always engage the brakes unless the unit is being moved. Injury could result if the unit moves while a patient is getting on or off the unit.
Ensure the brakes are completely released prior to attempting to move the unit. Attempting to move the unit with the brakes engaged could result in injury to the user and/or patient.



To activate the brakes, push down once on the pedal located at the midpoint of the unit on both sides (identified by the label at right). To disengage, push down again.

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 power cord is plugged into a wall socket or the battery power switch is turned on (see page 13). The brakes will still operate properly when the power cord is not plugged in. There is also a “Release Brakes” LED on the Head End Control Panel that will illuminate when the brakes *are* engaged while the battery power switch is on (see page 15).

BATTERY CHARGING AND OPERATION

1. The unit has two 12 volt batteries to provide power to the drive wheel and back–up power to the unit functions if the power cord is unplugged from the wall socket. Neither the unit functions nor the drive wheel will operate properly if the batteries are not sufficiently charged. The batteries require approximately 10 hours of charging time when they are fully discharged.
2. 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.
3. The “Plug Bed In To Charge” LED on the Head End Control Panel will be illuminated while the battery power switch is on if the battery level is low (see page 15). Plug the power cord into a wall socket to charge the batteries.
4. After one hour on battery power with no motion release switch activation, the unit will enter power save mode and none of the unit’s powered functions will operate. Squeeze either of the motion release switches located under the drive handle to enable the unit functions.

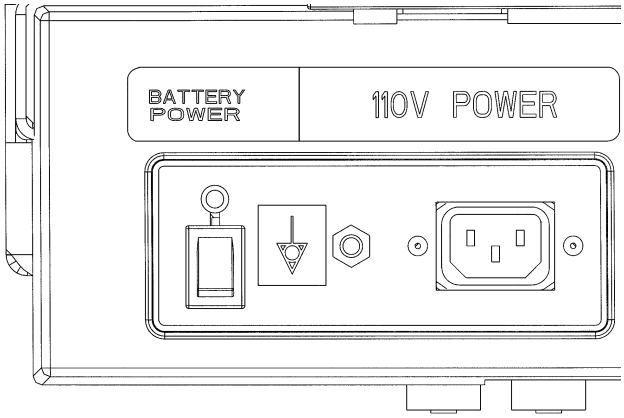
NOTE
The three LED’s on the Head End Control Panel may still be illuminated when the unit is in power save mode. The Battery Power LED located at the left side of the head end of the unit will be illuminated when the unit is in power save mode.

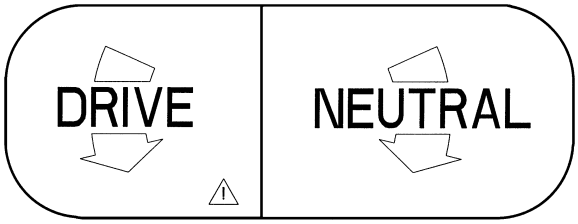
⚠ WARNING

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.

DRIVE WHEEL OPERATION

1. Unplug the power cord from the wall socket and secure the cord sufficiently to prevent entanglement while the unit is in motion. The drive wheel will not operate if the power cord is plugged into the wall socket.
2. Activate the power to the drive wheel by placing the battery power switch located at the left side of the head end of the litter in the “ON” position. The LED will illuminate.
3. Engage the drive wheel by rotating the pedal located at the head end to the left as shown on the label. To place the drive wheel in the neutral position, rotate the pedal to the right.
4. Release the brakes. The drive system will not function while the brakes are engaged. The “Release Brakes” LED on the head end control panel will be illuminated if the brakes are engaged while the battery power switch is on.



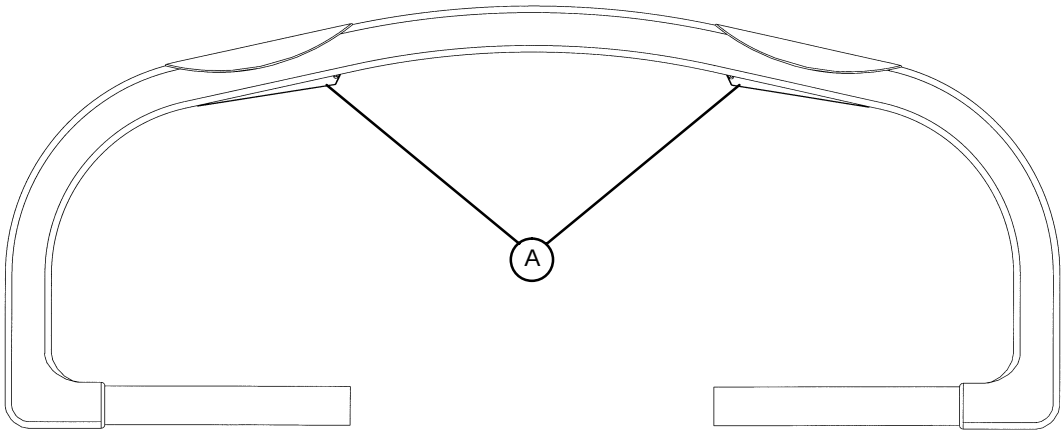


⚠ WARNING

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 unit or surrounding equipment could occur if the unit collides with an obstacle.

DRIVE WHEEL OPERATION (CONTINUED)

5. Grasp the drive handle at the two raised grip areas. Squeeze either of the motion release switches (A) located under the handle to enable the movement of the drive wheel. Either or both switches will enable movement but both switches must be released to stop movement.



6. While continuing to squeeze the switch(es), push the handle away from you or pull the handle toward you to initiate motion in that direction. The forward speed will increase proportionally to the distance the drive handle is moved. I.E. the farther forward the drive handle is pushed, the faster the unit will move. **To stop motion, remove your hands from the switches and the handle.**

NOTE
The drive wheel does not pivot. The unit cannot be moved directly sideways with the drive wheel engaged. With the drive wheel pedal in the neutral position and the unit's brakes released, the unit can be moved in any direction including sideways.

⚠ **WARNING**

Put the drive wheel in the neutral position and release the brakes 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.

⚠ **WARNING**

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

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 unit, 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.

⚠ 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.

CPR BOARD USAGE

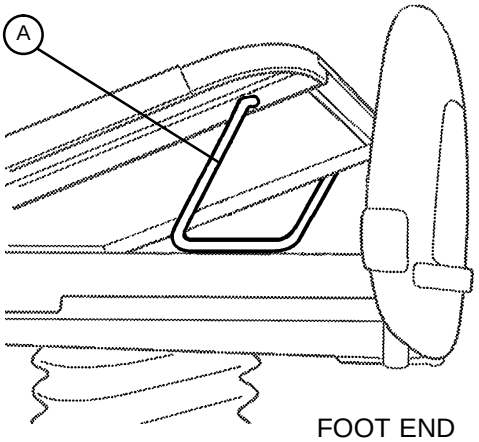
The CPR board is stored on the head board. To remove it, pull it away from the head board and lift it out of the storage position. The head board can also be removed and used as an emergency CPR board.

FOLEY BAG HOOKS USAGE

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

FOOT PROP USAGE

To prop the foot end of the Knee up, lift the litter frame at the end of the Knee, allowing the prop arm (A) to swing down and engage at the desired height. To release the foot prop, lift up on the frame, swing the prop arm toward the head end of the frame and lower the foot end.



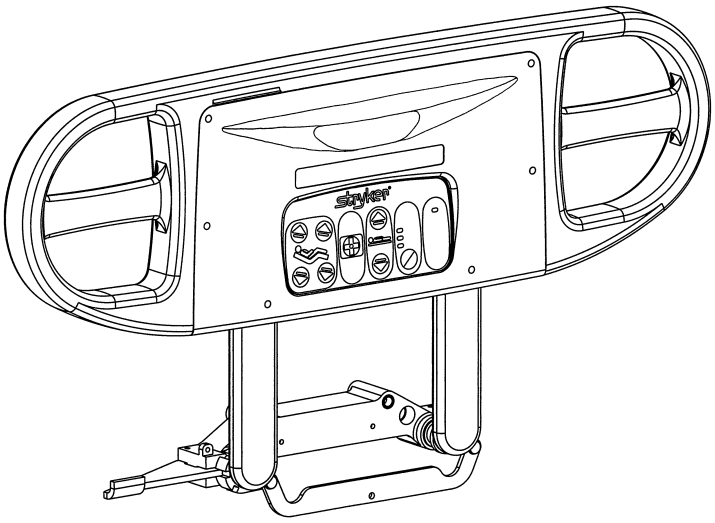
⚠ WARNING

The intent of the foot prop is to elevate a patient's feet. To avoid injury while cleaning or servicing under the foot section, secure the foot section with string or bungee cords or hold it up out of the way.

⚠ CAUTION

Do not raise the Back while the foot prop is being used to elevate the patient's feet. Damage to the siderails could occur.

POSITIONING SIDERAILS



NOTE
The head end siderails can be locked at two heights (intermediate & full). The foot end siderails lock in the full up position only.

1. All four siderails can be tucked away under the frame when not in use. To remove the rail from the tucked position, grasp the handle on the siderail panel and pull outward.
2. **To raise** the head end siderails, grasp the rail and swing it upward toward the head end of the frame until it locks in the intermediate position. To raise the rail to full height, push in the blue release handle and rotate the siderail until full height is reached and the rail locks in place.
3. The same procedure is used to raise the foot end siderail, however, the siderail swings toward the foot end of the frame instead of the head end. There is no intermediate position for the foot end siderails.
4. **To lower** the head end siderails, push the blue release handle, grasp the siderail and swing it down toward the foot end of the frame until it clicks and locks in the intermediate position. To fully lower the rail, push in the blue release handle and rotate the siderail until it is completely down. Push the rail under the litter frame for storage.
5. The same procedure is used to lower the foot end siderail, however, the siderail swings toward the head end of the frame instead of the head end. There is no intermediate position for the foot end siderails.

⚠ 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 unit. Siderails are designed to keep a patient from inadvertently rolling off the unit. It is the responsibility of the attending medical personnel to determine the degree of restraint necessary to ensure a patient will remain in place. Failure to utilize the siderails properly could result in patient injury.

⚠ CAUTION

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

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

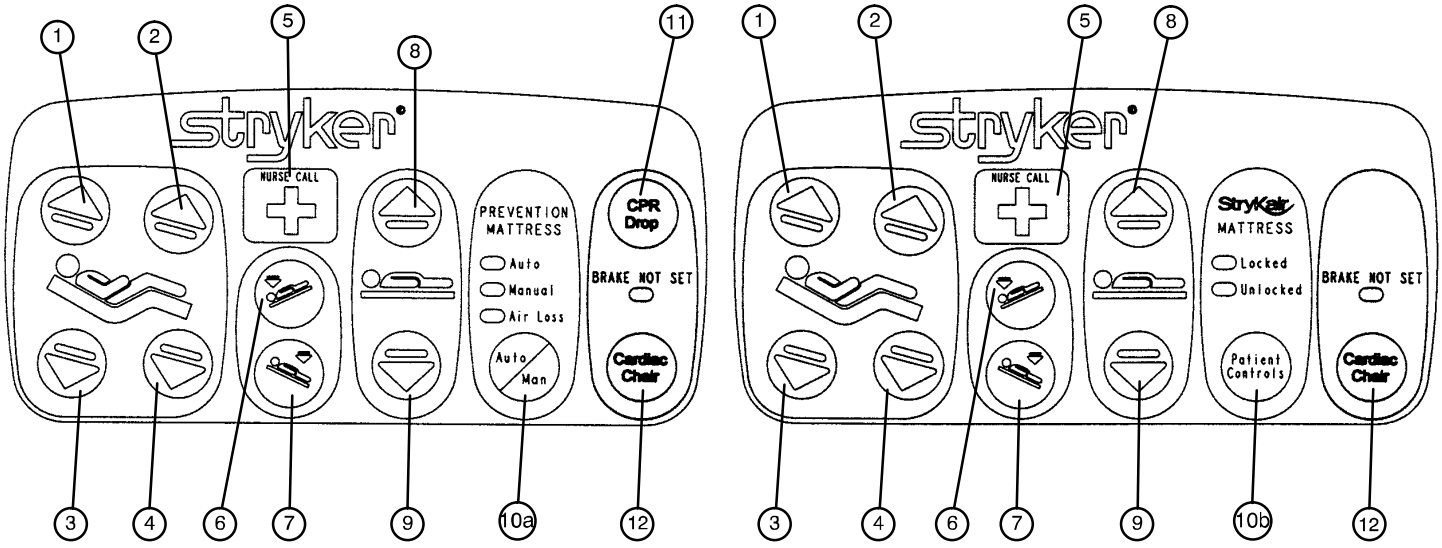
SIDERAIL CONTROL PANEL LIGHTS

- 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 16).

⚠ WARNING

The intent of the nurse call indicator light on the siderails is to help the patient locate the button for contacting the nurse station. Turning this light off will compromise this ability, especially in a darkened room.

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 (Trendelenburg).
7. Press to lower the foot end (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.

▶ The following functions are optional equipment.

10. There are two prevention mattress systems available with two different sets of siderail controls:
    a. If the unit is equipped with a Dynamic Mattress System™, press to activate the automatic or manual operation of the DMS. The LED will light to indicate which mode is activated.
    b. If the unit is equipped with a StryKair™ Mattress, press to lock out patient control of the StryKair™ Mattress. (See the StryKair™ operations manual for more detailed instructions).
11. Press to activate emergency CPR positioning. The Back will lower to flat, the Knee will lower to flat, the litter will level from Trendelenburg/reverse Trendelenburg, and the litter will lower to full down.
12. Press to activate Cardiac Chair positioning. The Knee will raise, the Back will raise or lower to 51° and the litter will tilt to –10° reverse Trendelenburg (foot end down). Release the button to stop bed move–ment. Hold the button until movement stops to complete the function.

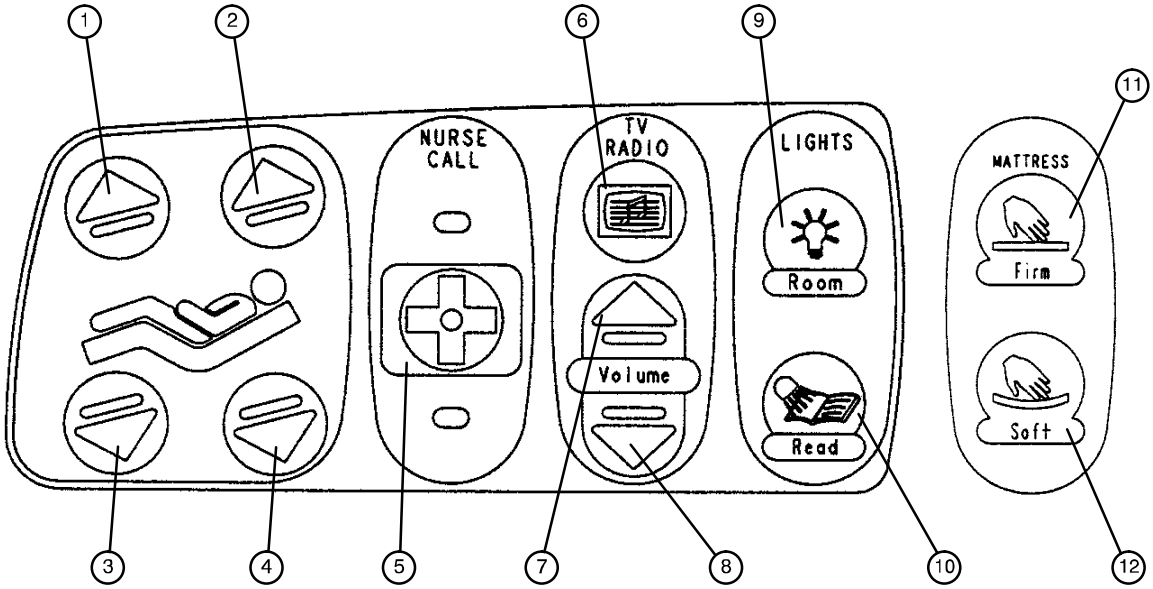
⚠ WARNING

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

⚠ WARNING

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.

INSIDE SIDERAIL FUNCTION GUIDE



Beds With All Options (Including DMS or StryKair Mattresses)

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

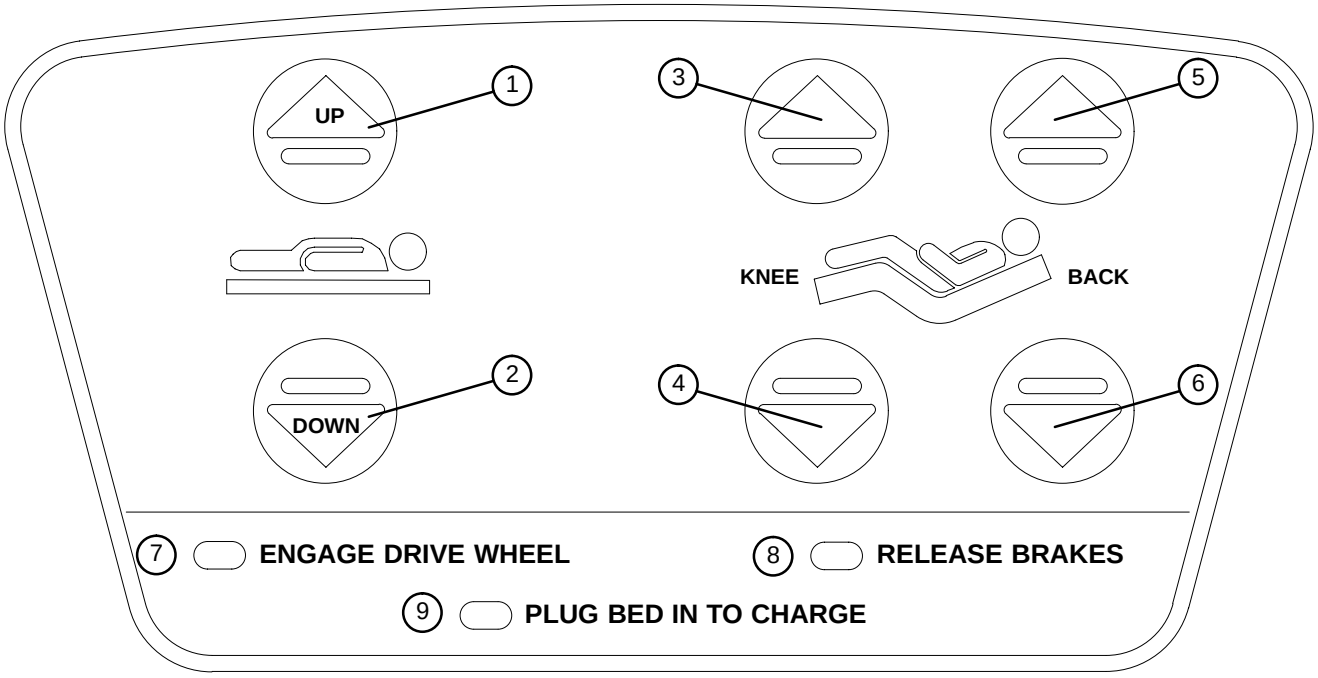
▶ The following functions are optional equipment.

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.
11. Press to increase the firmness of the mattress.
12. Press to decrease the firmness of the mattress.

⚠ **WARNING**

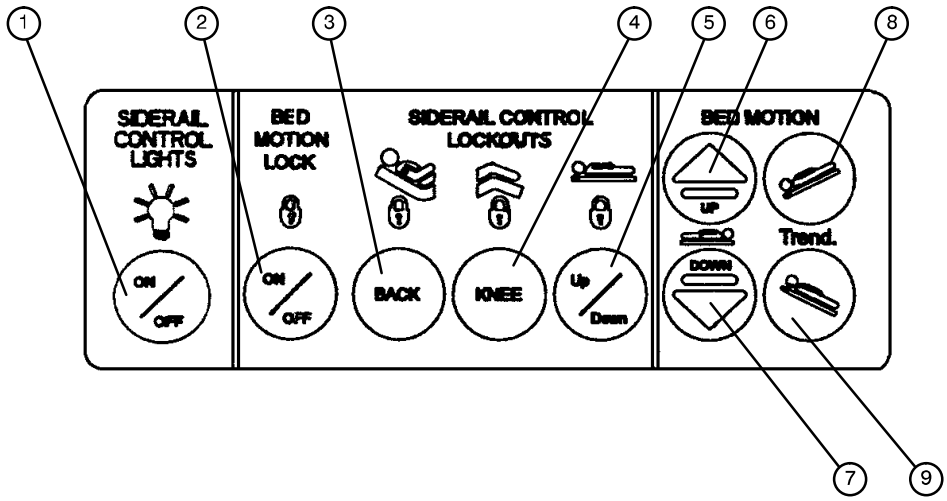
When attaching equipment to the frame, ensure it will not impede normal unit operation. For example: hooks on hanging equipment must not actuate control buttons, equipment must not hide the nurse call button, etc.

Head End Control Panel Operation Guide



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 “Engage Drive Wheel” LED will be illuminated whenever the battery power switch is on and the drive wheel pedal is in the neutral position. The light will go off when the drive wheel is in the drive position.
8. The “Release Brakes” LED will be illuminated whenever the bed’s brakes are engaged while the battery power switch is on. The light will go off when the brakes are disengaged.
9. 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.

Foot Board Control Panel Operation 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 11).
2. Press to lock out all motion controls on the siderails. Press again to unlock.
3. Press to lock out the Back motion control on the siderails. Press again to unlock.
4. Press to lock out the Knee motion control on the siderails. Press again to unlock.
5. Press to lock out the up/down motion controls on the siderails. Press again to unlock.
6. 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.
7. Press to lower the litter.
8. Press to lower the head end (Trendelenburg).
9. Press to lower the foot end (Reverse Trendelenburg).

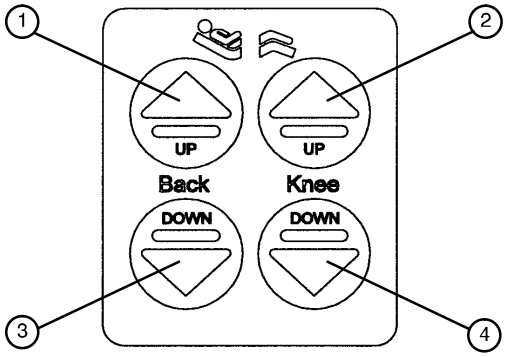
⚠ **WARNING**

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

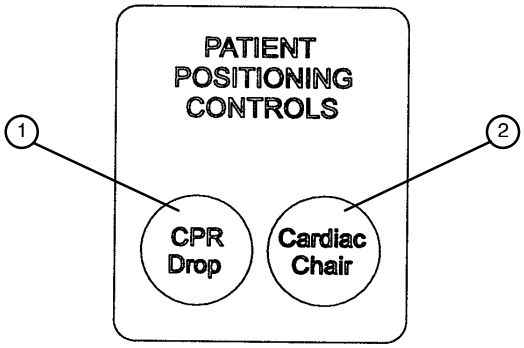
⚠ **WARNING**

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.

Foot Board Control Panel Operation Guide

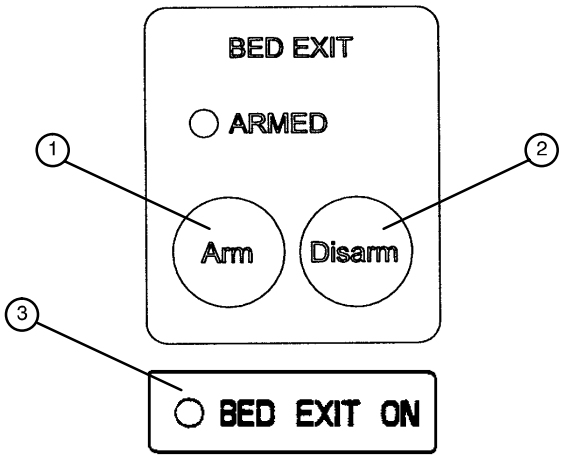


1. Press to raise back section.
2. Press to raise knee section.
3. Press to lower back section.
4. Press to lower knee section.



1. Press to activate the emergency CPR function. The Back will lower to flat, the Knee will lower to flat, the litter will level from Trendelenburg/reverse Trendelenburg, 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.

OPERATING BED EXIT SYSTEM



1. Press to arm the Bed Exit function.
2. Press to disarm the Bed Exit function.
3. “BED EXIT ON” LED – will light when the BED EXIT function is armed. Serves as the Bed Exit indicator light when the foot board lid is closed.

▶ This panel is optional equipment.

NOTE
When the unit is equipped with scales, the scales must be zeroed for the Bed Exit System to function properly (see page 21). Bed Exit must be disarmed before the scales can be zeroed.

- Before putting a new patient on the frame: prepare the frame for patient stay by adding linens and equipment. Press and hold the ”ARM” and ”DISARM” keys together for 5 seconds. The ”ARMED” light will begin to flash. Release the ”ARM” and ”DISARM” keys and do not touch the frame until the ”ARMED” light stops flashing.
- After the “ARMED” light stops flashing, place the new patient on the frame. Push and release the ”ARM” key. The ”BED EXIT ON” light will come on.
- To deactivate Bed Exit, push ”DISARM”. The ”ARMED” and ”BED EXIT ON” LED’s will turn off.

⚠ **WARNING**

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

⚠ **WARNING**

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.

Foot Board Control Panel Operation Guide

LED DISPLAY PANEL GUIDE

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

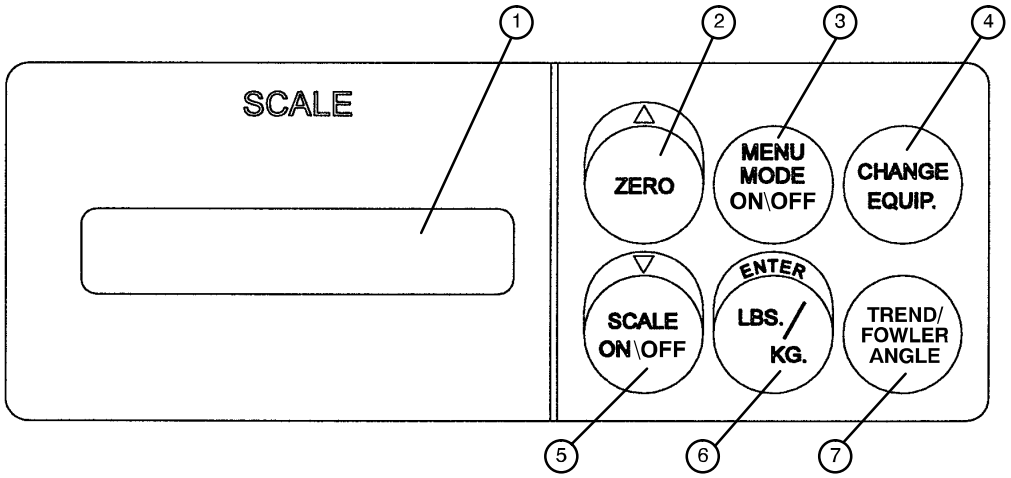
”POWER” – will light when the power cord is plugged into the wall receptacle or the battery power switch is on. Will blink if the 9V Nurse Call battery needs to be replaced.

”BED MOTION LOCKED” – will light when the Bed Motion Lock has been activated.

FUNCTION LOCKOUT SYSTEM

1. To lock out all motion switches on the unit, 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 movement functions on the siderails and prevent the patient from changing the positioning of the frame, 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 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.

WEIGH SYSTEM CONTROL PANEL GUIDE



1. LCD – displays patient weight. Trendelenburg angle is displayed when the scale is not active.
2. Press to zero weigh system (see page 21). 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 on the frame (see page 22).
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 23). Also press while using the Menu Mode.
7. Press to display the Trendelenburg or Fowler angle (see page 23).

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

For more detailed operating instructions see the following:

1. Preparing The Unit For Patient Stay – page 21
2. Activating the Weigh System and Displaying Patient Weight – page 21
3. Adding or Removing Items During a Patient's Stay – page 22
4. Displaying Trendelenburg or Fowler Angle – page 23
5. Converting the Patient's Weight – page 23
6. Viewing Patient Weight In Gain/Loss Mode – page 24
7. Changing the Numerical Value Of Displayed Weight – page 25

▶ This panel is optional equipment.

⚠ 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.
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.

Weigh System Usage

PREPARING THE UNIT FOR PATIENT STAY

- Prepare the unit 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 unit 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 weigh system while a patient is on the unit. If this should occur, remove the patient and zero the weigh system.

ACTIVATING THE WEIGH SYSTEM AND DISPLAYING PATIENT WEIGHT

- Press and release 

The scale monitor will read:

"LET GO FOR SCALE"

"WEIGHING"

"XXX.X LB"

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 release 

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"

DISPLAYING TRENDELENBURG 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"

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"

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 

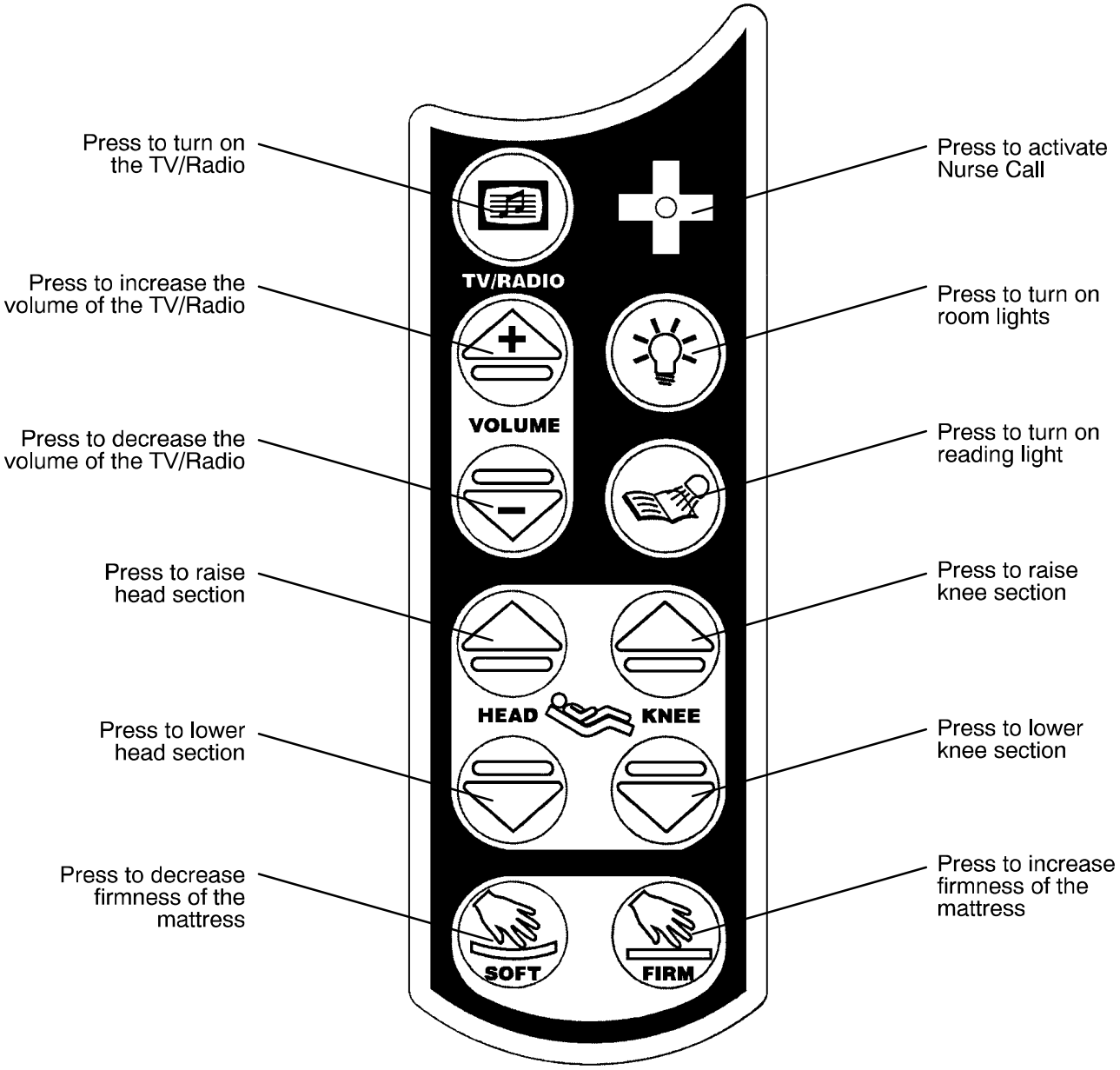
to increase the displayed weight.

- Once the desired weight is displayed, press 

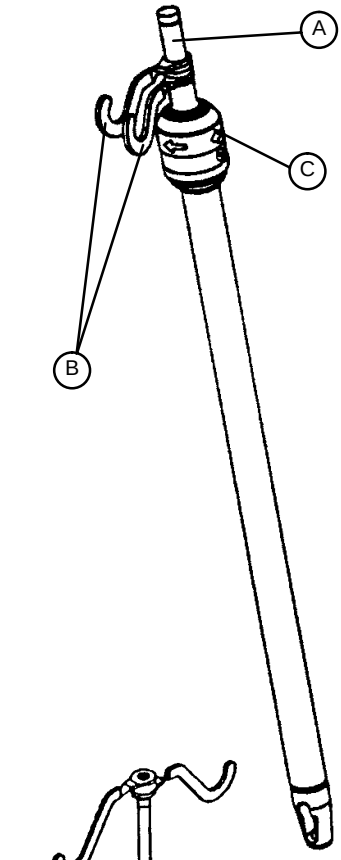
The scale monitor will read:

  "XXX.X LB"

Optional Pendant Operation



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. The choice was made at the time the unit was purchased.

1. Lift and pivot the pole from the storage position and push down until it rests in 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.

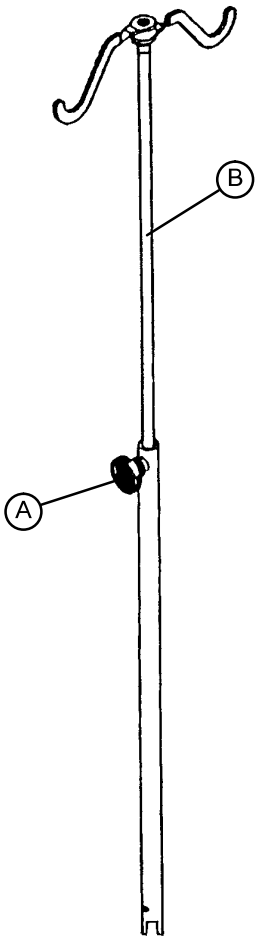
4. To lower the I.V. pole turn the latch (C) clockwise until section (A) lowers.

⚠ CAUTION

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

⚠ WARNING

To avoid pinching your fingers, place the I.V. pole in the upright position before using the drive handle .



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 frame.)

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

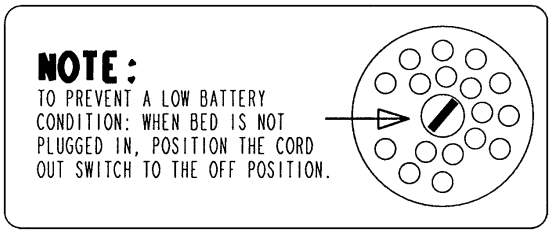
The weight of the I.V. bags should not exceed 40 pounds.

⚠ **WARNING**

Service only by qualified personnel. Refer to the maintenance manual.
Ensure the power cord is unplugged and battery power switch is turned to the off position before servicing.

NURSE CALL BATTERY

To prevent a low battery condition when the power cord is not plugged in, position the cord out switch at the head end to the off position. The switch is identified by the label shown below. If the switch is not positioned as shown below and the power cord and pendant cord are unplugged, the life of the back–up battery will be significantly reduced.
If the foot board POWER LED (located on the outside of both siderails) is flashing, the Nurse Call battery needs to be replaced. The battery is located on the patient's left side under the litter frame. No tools are required to replace the battery. Unplug the power cord from the wall socket and replace the battery. After replacing the battery, verify the foot board POWER LED is no longer flashing.



MAIN POWER CIRCUIT BREAKER

In the event of a loss of electric function, unplug the power cord from the wall socket and reset the circuit breaker(s) located under the head end of the litter on the patient's left side. Plug the power cord into a properly grounded wall receptacle and follow the set–up procedures listed on page 5.

BATTERY CHARGER CIRCUIT BREAKER

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.

Cleaning

Hand wash all surfaces of the unit 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 the unit to service.

BIANNUAL CHECKLIST

_____ All fasteners secure
_____ Engage brake pedal and push on the frame to ensure all casters lock securely
_____ Engage drive wheel and ensure it is operating properly
_____ Motion release switches working properly
_____ Confirm Head End Control Panel functionality
_____ Confirm battery powered functionality
_____ Siderails move, latch and stow properly
_____ All functions on siderails working properly (including LED's)
_____ 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
_____ 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

Unit Serial No. _____ _____
_____ _____
_____ _____
_____ _____

Completed By:_____ Date:_____

Warranty

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 units will be free from structural defects for as long as the original purchaser owns the unit. 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. No employee or representative of Stryker is authorized to change this warranty in any way.

STRYKER EXPLICITLY DISCLAIMS ANY AND ALL LIABILITY RELATED TO DAMAGE TO THE BED, SURROUNDING EQUIPMENT OR STRUCTURES AND/OR INJURY TO ANY PERSON RESULTING FROM CONTACT WITH THE BED WHILE THE DRIVE WHEEL IS ACTIVATED AND CONTROLLED BY A USER.

THIS WARRANTY DOES NOT COVER DAMAGE TO ANY PART OF THE PRODUCT CAUSED BY CONTACT OF THE BED WITH ANY SURROUNDING EQUIPMENT OR STRUCTURE WHILE THE DRIVE WHEEL IS ACTIVATED.

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.

Supplemental Warranty Coverage:

Stryker has developed a comprehensive program of extended warranty 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. Stryker offers the following Supplemental Warranties:

Extended (Parts and Labor)

- All replacement parts (excluding mattresses and consumable items)
- Labor and travel for *all* scheduled and unscheduled calls
- Annual Preventive Maintenance Inspections and repairs
- JCAHO paperwork for preventive maintenance
- Priority Emergency Service

Standard (Labor Only):

- Labor and travel for *all* scheduled and unscheduled calls
- Annual Preventive Maintenance Inspections and repairs
- JCAHO paperwork for preventive maintenance
- Priority Emergency Service

Basic (Parts Only):

- All replacement parts (excluding mattresses and consumable items)
- Priority Emergency Service

Please call your local representative, or call (800) 327–0770 for further information

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

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