## InTouch® Critical Care Bed

REF FL27 (2131/2141)

Upgraded from version 2.x - 3.1 to 4.0

# stryker\*

**Operations Manual** 



# **Symbols**

$\triangle$	General warning
$\triangle$	Caution
i	Consult instructions for use
REF	Model
	Manufacturer
	Date of manufacture
<u>^</u>	Safe working load
~	Alternating current
4	Dangerous voltage
10A 250V	Fuse rating for beds with the 100V $\sim$ or 120V $\sim$ electric system
\$	Unit provides terminal for connection of a potential equalization conductor. The potential equalization conductor provides direct connection between the unit and potential equalization busbar of the electrical installation.
	Protective Earth terminal
IPX4	Protection from liquid splash
<b></b>	Type B applied part
C∰* US	Medical Equipment approved by the Canadian Standards Association with Respect to Electric Shock, Fire, Mechanical and Other Specified Hazards
<u>X</u>	In accordance with European Directive 2002/96/EC on Waste Electrical and Electronic Equipment, this symbol indicates that the product must not be disposed of as unsorted municipal waste, but should be collected separately. Refer to your local distributor for return or collection systems available in your country.

www.stryker.com 2141-800-101 REV D

# **Symbols**

$((\overset{\sim}{\blacktriangle}))$	Non-ionizing radiation such as RF transmitter (Wi-Fi)
	iBed Locator is connected
×	iBed Locator is not connected
(((P)))	Wireless Network is connected
P×	Wireless Network is not connected
<b>△</b> V	Support surface call maintenance

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Removing or replacing the footboard	
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## Warning/Caution/Note Definition

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



#### **WARNING**

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



#### **CAUTION**

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

Note: Provides special information to make maintenance easier or important instructions clearer.

This manual assists you with the operation or maintenance of the Stryker Model FL27 (2131/2141) InTouch® Critical Care bed. Read this manual thoroughly before operating or maintaining this product. Set methods and procedures to educate and train your staff on the safe operation or maintenance of this product.



#### WARNING

- Improper usage of the product can cause injury to the patient or operator. Operate the product only as described in this manual.
- Do not modify the product or any components of the product. Modifying the product can cause unpredictable operation resulting in injury to patient or operator. Modifying the product also voids its warranty.

#### Notes

- This manual should be considered a permanent part of the product and should remain with the product even if the product is subsequently sold.
- Stryker continually seeks advancements in product design and quality. Therefore, while this manual contains the most current product information available at the time of printing, there may be minor discrepancies between your product and this manual. If you have any questions, contact Stryker Customer Service or Technical Support at 1-800-327-0770.

#### **Product description**

InTouch is an AC-powered, adjustable hospital bed designed to position human patients for procedures, therapy, and recovery in a healthcare environment, and transport patients between bays and procedural rooms. InTouch measures and displays patient weight. The scale output is not intended to be used to determine diagnosis or treatment. The nurse call allows patients to alert an operator when the patient requires assistance. There is a 30° head of bed (HOB) button that puts the patient at a 30° angle that is calculated relative to the base to assist in ventilator-associated pneumonia (VAP) prevention. When the Chaperone bed exit system is active, it monitors a chosen zone, and alerts the operator of a deliberate or non-deliberate bed exit. InTouch has 39 prerecorded clinical phrases in 24 languages, and a sound feature that offers various environmental and musical selections.

#### Intended use: InTouch Critical Care bed

InTouch is intended for use by patients in an acute care setting. The safe working load (the sum of the patient, the mattress, and accessory weight) for InTouch is 550 lb (249 kg).

InTouch is intended to support a human patient. The frame can come in contact with human skin, but a patient should never be on the frame without a support surface in use.

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

The product is intended for use in a healthcare environment, including hospitals, surgery centers, long term acute care centers, and rehabilitation centers.

The product is compatible with 35 in. x 84 in. support surfaces, the facility nurse call system, standard med/surg equipment, and the facility infrastructure. InTouch is intended for use with a 6 in. to 8.5 in. support surface. You may use a support surface or overlay greater than 6 in. that offers therapeutic value with added patient supervision.

The Chaperone bed exit system is intended only to aid in the detection of a patient exiting the product. It is not intended to replace patient monitoring protocol.

#### Intended use: iBed Wireless® with iBed Awareness

The intended use for the *i*Bed Wireless (with *i*Bed Awareness) is to assist clinical staff to monitor bed parameters on specific Stryker beds. The desired bed parameters are set by operators at the bedside. The *i*Bed Wireless software is only intended for use with specifically enabled Stryker beds that have been verified and validated with the *i*Bed Wireless software, and is not intended to provide bed status information for non-Stryker beds. The *i*Bed Wireless software is not intended to communicate any patient status information, nor to permanently store any type of data. The *i*Bed Wireless with *i*BedAwareness System is not intended to provide automated treatment decisions or as a substitute for professional healthcare judgment. The *i*Bed Wireless with *i*Bed Awareness System is not a replacement or substitute for vital signs monitoring or alert equipment. All patient medical diagnosis and treatment are to be performed under direct supervision and oversight of an appropriate healthcare professional.

#### **Expected service life**

InTouch has a 10 year expected service life under normal use conditions and with appropriate periodic maintenance.

#### **Contraindications**

InTouch is not intended to:

- be used without a support surface
- use the scale output to determine diagnosis or treatment
- · be used with an oxygen tent
- · support more than one individual at a time
- · be used with patients that are 35 in. or less
- be used with patients that weigh 50 lb or less
- · be used on patient less than two years old
- · be used in a home healthcare environment
- be used in the presence of flammable anesthetics

### **Specifications**

	Safe working load  Note: Safe working load indicates the sum of the patient, mattress, and accessory weight	500 lb	227 kg
Product weight		750 lb	340,2 kg
Product length		90 in.	228,6 cm
Due done to dale	Siderails up	42 in.	106,7 cm
Product width	Siderails down	40 in.	102,9 cm
Base	Under product clearance	5 in.	12,7 cm

# **Specifications (Continued)**

	Patient surface     Width     Length     Length (with optional bed extender)	<ul><li>35 in.</li><li>84 in.</li><li>90 in.</li></ul>	<ul><li>88,9 cm</li><li>213,4 cm</li><li>228,6 cm</li></ul>
	Seat depth	18.5 in.	47 cm
	Foot • Length • Angle	• 29 in. • 0° to 50° (± 5°)	• 73,7 cm • 0° to 50° (± 5°)
	Fowler width	36 in.	91,4 cm
	Fowler length	34 in. to 35 in.	86,4 cm - 88,9 cm
Litter	Fowler angle	<ul> <li>0° to 70°</li> <li>(0°-40° and 50°-70° ± 3°)</li> <li>(40°-50° ± 5°)</li> </ul>	<ul> <li>0° to 70°</li> <li>(0°-40° and 50°-70° ± 3°)</li> <li>(40°-50° ± 5°)</li> </ul>
	Gatch • Width • Length • Angle	<ul> <li>18 in.</li> <li>34 in. to 35 in.</li> <li>0° to 15° (± 3°)</li> </ul>	<ul> <li>45,7 cm</li> <li>86,4 cm - 88,9 cm</li> <li>0° to 15° (± 3°)</li> </ul>
	Cardiac chair position     Standard     Enhanced	<ul> <li>Head: 65°, Seat: 17°, Foot: 30°, Trend: 3°</li> <li>Head: 70°, Seat: 19°, Foot: 47°, Trend: 3°</li> </ul>	
Fowler	Length	36.5 in.	92,7 cm
	Height (high) to top of litter	33 in.	83,8 cm
Lift ovetom	Height (low) to top of litter	16 in.	40,6 cm
Lift system	Trendelenbur g/Reverse Trendelenbur g	12° (± 2°)	
	Product lift time	35 seconds maximum from	n lowest to highest position
	Capacity	550 lb	249 kg
Scale system	Accuracy:     For weight from 100 lb to 550 lb     For weight from 100 lb to 550 lb     For weight under 100 lb     For weight under 100 lb     For weight under 100 lb		-
CPR system	Speed to level product from any position Fowler Foot and seat	<ul><li>15 seconds</li><li>60 seconds</li></ul>	

## **Specifications (Continued)**

Zoom® motorized drive (Model 2141) (option)	Speed • Forward • Backward	<ul><li>2.98 mph</li><li>1.79 mph</li></ul>	• 4.8 km/h • 2.88 km/h
Maximum currency	- Only)		
consumption	With optional auxiliary outlets (120 $\mathrm{V}\!\!\sim$ only)	9.8 Amps	
Electrical requirements	All electrical requirements meet CSA C22.2 No. 601.1, UL 60601-1 and IEC 60601-1.60 601-2-38 specifications  120 ± 10% V∼, 50/60Hz - two 250V, 10A fuses 120 V∼, 50-60Hz, 4.0A (9.8A with 120V optional auxiliary outlet) - two 250V, 10A fuses		
<i>i</i> Bed Wireless radio ( optional)	802.11 b/g, 2.4 GHz  • Minimum operational signal strength: -65 dB  • Supported security protocols:  WEP  WPA-PSK (TKIP)  WPA2-PSK (CCMP/AES)  WPA2-Enterprise (Only with PEAP-MS-CHAPv2)		
802.1x  • PEAP-MS-CHAPv2 (Without certificate) • Supports IPv4 and DHCPv4			
Battery	12 V, 17.6 Ahr, sealed lead-acid battery (part number QDF9188) 3.0 V 220mAh lithium battery, size 20mm - Varta Int. CR2032  Coin cell PC battery holder, size 20mm - MDP Int. BA2032		

 $\textbf{Note:} \ \ \textbf{For Isolibrium} \ \ \textbf{specifications, see the Isolibrium operations/maintenance manual}.$ 

Recommended Mattress Size	35 in. x 84 in. x 6 in.	88,9 cm x 213,4 cm x 15,2 cm
With Bed Extender DM64196 (PositionPRO® and Isolibrium™) (35 in. x 6 in. x 4 in.)	35 in. x 90 in. x 4 in.	88,9 cm x 228,6 cm x 10,1 cm
With Bed Extender DM64197 (XPRT™) (35 in. x 6 in. x 5.5 in.)	35 in. x 90 in. x 5.5 in.	88,9 cm x 228,6 cm x 13,9 cm

## **Specifications (Continued)**

Recommended air mattress size	35 in. x 84 in. x 6 in 8.5 in.	88,9 cm x 213,4 cm x 15,2 cm - 21,6 cm
With Bed Extender DM64196 (PositionPRO® and Isolibrium™) (35 in. x 6 in. x 4 in.)	35 in. x 90 in. x 4 in.	88,9 cm x 228,6 cm x 10,1 cm
With Bed Extender DM64197 (XPRT™) (35 in. x 6 in. x 5.5 in.)	35 in. x 90 in. x 5.5 in.	88,9 cm x 228,6 cm x 13,9 cm

Environmental conditions	Operation	Storage and transportation
Ambient temperature	104 °F (40 °C) 50 °F (10 °C)	158 °F (70 °C) -40 °F (-40 °C)
Relative humidity (Non-condensing)	30%75%	10%
Atmospheric pressure	700 hPa	1060 hPa 500 hPa
Scale accuracy	77 °F (25 °C) 64 °F (18 °C)	

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

Stryker reserves the right to change specifications without notice.

## **Product illustration**

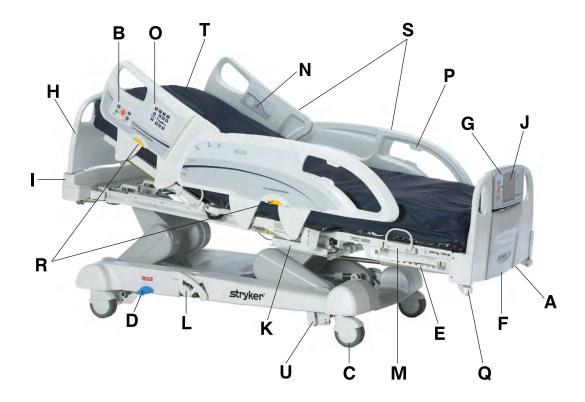


Figure 1: InTouch Critical Care bed

Α	110V outlet (optional)	
В	Brake control panel (outside siderail)	
С	Caster	
D	CPR release pedal	
Е	Foley bag hooks	
F	Footboard	
G	Footboard control panel	
Н	Headboard	
I	Head end control panel (optional)	
J	InTouch touch screen	
K	Isolated foley bag hooks	

L	Manual backup brake	
М	Mattress retainer	
N	Nurse call (inside siderail) (option)	
0	Motion control panel (outside siderail)	
Р	Pendant holder	
Q	Roller bumpers	
R	Siderail release levers	
S	Siderails	
Т	Support surface (optional)	
U	Zoom motorized drive (Model 2141) (option)	

#### **Contact information**

Contact Stryker Customer Service or Technical Support at: 1-800-327-0770.

Stryker Medical 3800 E. Centre Avenue Portage, MI 49002 USA

Have the serial number (A) of your Stryker product available when calling Stryker Customer Service or Technical Support. Include the serial number in all written communication.

#### Serial number location

You can find the serial number plate behind the patient right siderail near the foot end of the product.



Figure 2: Serial number location

## **Specification label location**

You can find the specification label behind the head end cover on the patient right side of the product.

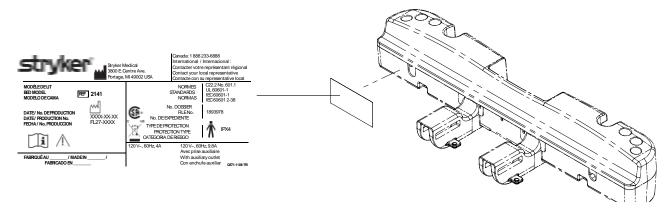


Figure 3: Specification label location

Carefully read and strictly follow the warnings and cautions listed on this page. Service only by qualified personnel.



#### WARNING

- Improper usage of the product can cause injury to the patient or operator. Operate the product only as described in this manual.
- Do not modify the product or any components of the product. Modifying the product can cause unpredictable operation resulting in injury to patient or operator. Modifying the product also voids its warranty.
- Always allow the product to reach room temperature before conducting any setup or testing functional operations to prevent permanent product damage.
- · Always operate the product when all operators are clear of the mechanisms.
- Always plug the product directly into a properly grounded, three-prong receptacle. You can only achieve grounding reliability when you use a hospital-grade receptacle. This product is equipped with a hospital-grade plug for protection against electric shock hazard.
- Always properly handle the power cord to avoid the risk of entanglement, damage to the power cord, or potential shock hazards. If the power cord is damaged, immediately remove the product from service and contact the appropriate maintenance personnel.
- Do not attach the power cord to any moving parts of **InTouch**.
- Always unplug the power cord, turn the battery switch to the OFF (O) position, press the N/Brake Off button, and call
  maintenance if unanticipated motion occurs.
- Always unplug the product power cord from the wall when using oxygen administering equipment. Possible fire
  hazard exists when this product is used with oxygen administering equipment other than nasal, mask type, or half
  bed-length tent type.
- The optional /Bed® Wireless function is only intended to provide remote information of product status and parameter conditions. It is not intended to replace patient monitoring protocol.
- The line of sight between an iBed Locator and the head end of bed must be free of obstruction at all times. Any
  interference could interrupt communication between the iBed Locator and the IR module.
- You must use an iBed® Wireless compatible footboard with an iBed® Wireless compatible product. You will lose iBed® Wireless functionality if you use an older version of the footboard.
- You must verify all iBed® Wireless functionality after installation. Verify that the iBed locator communicates the
  product's positions, and that iBed® Wireless communicates with the wireless access point. Failure to do may result in
  the loss of information or the transmission of incorrect information.
- You must install the iBed Locators more than 71" apart from one another in the same room (such as in a semi-private room with more than one product). Failure to do may result in the product transmitting information to the incorrect iBed Locator.
- Do not use iBed® Wireless to replace the existing nurse call system. iBed® Wireless products are only intended to transmit product information. They are not intended to transmit nurse call information.
- Always correctly associate or map the iBed Locator to the room or location to provide accurate location information.
   Failure to properly map the iBed Locator to the room or location may result in the product transmitting incorrect information.
- If you move an iBed Locator after it has been installed and mapped, you must remap to the new room or location in
  which it is moved to. You must also remap the iBed Locator if you change the room or location information after
  initial installation.
- Always wash your hands after handling a battery. 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. Properly dispose of batteries when required.
- Power save mode activates after one hour on battery power with no motion release switch activation. Bed exit, scale, and product motion stops operating when the product enters the power save mode.
- Always keep feet clear from the area above the base cover or below the base cover when lowering the product or when applying the brakes or releasing the brakes.

#### ★ WARNING (CONTINUED)

- Always apply the brakes when a patient is getting in the product or out of the product to avoid instability.
- Always apply the brakes when the patient is unattended.
- Do not apply the brake to slow or stop the product while it is in motion.
- Always lock the siderails in the full up position with the sleep surface horizontal in the lowest position when transporting a patient.
- Do not use the **Zoom** motorized drive when the batteries become discharged. Press **N/Brake Off** to place the drive wheel in neutral and push the product manually. Recharge the batteries before using the Zoom motorized drive again to avoid the risk of battery damage and the drive wheel getting stuck in the down position.
- Use caution while maneuvering the product with the drive wheel activated. Always make sure that there are no obstacles near the product while the Zoom motorized drive is activated. Injury to the patient, user or bystanders or damage to the frame or surrounding equipment could occur if you collide with an obstacle.
- Make sure that the brakes are completely released before attempting to move the product. Attempting to move the product with the brakes applied could result in injury to the patient or operator.
- Do not attempt to move the product manually when you activate the Zoom motorized drive. Always place the drive wheel into the neutral position and release the brakes before attempting to move the product manually.
- Do not attempt to move the product laterally after you apply the Zoom motorized drive. The the Zoom motorized drive cannot swivel.
- Always make sure that all persons and equipment are away from the area below and around the product before you activate the CPR release. The CPR release is for emergency use only.
- Always determine the proper use of the restraint straps and restraint strap locations. Improperly adjusted restraint straps can cause serious injury to a patient. Stryker is not responsible for the type or use of restraint straps on any of Stryker's products.
- Only use hospital-grade electric equipment consuming 5A or less with the auxiliary power outlet (optional). The use of standard electric equipment may bring the current leakage to a level unacceptable for hospital equipment.
- Always lock the siderails in the full up position with the sleep surface horizontal in the lowest position. Always lock the siderails unless a patient's condition requires extra safety measures.
- Do not use siderails as restraint devices to keep the patient from exiting the product. The design of the siderails keep the patient from rolling off the product. The operator must determine the degree of restraint necessary to make sure that the patient is safe. Failure to use the siderails as intended could result in serious patient injury.
- Always keep the siderails outside of the oxygen tent.
- The scale system is intended to assist in the monitoring of the patient's weight variation. Under no circumstances should its reading be used as sole reference for medical treatment.
- Bed exit is intended only to aid in the detection of a patient exiting the product. It is not intended to replace patient monitoring protocol.
- Bed exit is not designed to be used with patients weighing less than 50 lb (23 kg).
- Do not use extension cords with support surfaces. Support surfaces are only intended to be powered by InTouch with the power cord supplied.
- Do not route cables between the support surface and InTouch.
- Always make sure that all of the patient's limbs are within the raised and locked siderails when the support surface is articulating to avoid the risk of patient injury.
- Always center the patient on the support surface. Align the patient's head toward the headboard before starting functions. Check the patient frequently to make sure that you maintain the proper positioning.
- Always make sure that the tubing and wiring that is connected to the patient is long enough, stable, and secure during Lateral Rotation or Turn Assist.
- Always raise all of the InTouch bed siderails before starting Turn Assist or Lateral Rotation functions.

#### **MARNING (CONTINUED)**

- Do not exceed the safe working load of the **Isolibrium** support surface. Excess weight could cause unpredictable safety and performance of this system.
- Always use extra caution when reading radiology images taken of a patient on a support surface because internal components can cause artifacts and distort readings.
- Do not extubate or intubate patients during Lateral Rotation or Turn Assist. The functions could interfere with the performance of the ancillary devices.
- Do not zero the bed scales or weigh the patient with Lateral Rotation or Turn Assist active. Motion from the support surface functions may adversely affect the scale system performance.
- Do not arm bed exit with Lateral Rotation or Turn Assist active. The patient motion and position that results from the support surface may adversely affect bed exit system performance.
- Do not leave the patient unattended during Turn Assist.
- Always deflate the Isolibrium support surface before beginning CPR.
- Always lock the control panel when you leave the patient unattended. Always lock the control panel when the patient's condition requires extra safety measures.
- Do not use iBed® Awareness as a lock indicator for siderails. iBed® Awareness is only intended to detect the position of the siderails. It is not intended to replace patient monitoring protocol.
- The /Bed® Awareness LED light bars are only intended to monitor the product status and parameter conditions. It is not intended to replace patient monitoring protocol.
- You must physically verify that the siderails are locked before arming iBed® Awareness.
- Always securely set the footboard connector on the optional bed extender into the footboard connector slot at the foot end of the product.
- Do not pinch the power cord or cables when installing the optional bed extender.
- Do not sit on the optional bed extender. This may cause the product to tip.
- Do not allow the optional line management clip to interfere with a mechanical or electronic mechanism of the product.
- Do not pinch tubes inside the clip.
- Do not clean the clip with a liquid solution.
- Always adjust the scale or bed exit system if an option is added while the scale or bed exit system is armed.
- Do not place objects that exceed 40 lb (18 kg) onto the optional monitor tray.
- Do not exceed the 150 lb (68 kg) load capacity for the tray support pole.
- Do not clean, service, or perform maintenance while the product is in use.
- Always unplug the power cord and turn the battery switch to the OFF (O) position before cleaning, servicing, or performing maintenance.
- Always immediately unplug the power cord from the wall outlet when large spills occur near the circuit boards, cables, and motors. Remove the patient from the product, clean up the fluid, and have service personnel completely inspect the product. Fluids can cause unpredictable operation and decreased functionality of any electrical product. Do not return the product to service until it is completely dry and has been thoroughly tested for safe operation.

#### **CAUTION**

- Always plug the product into a wall outlet (regulated AC power source) when not in use to maintain a sufficient battery charge and to maximize product performance while operating on battery power.
- Always immediately replace batteries that have corrosion at the terminals, display cracking, have expanded or bulging sides, or no longer can maintain a full charge.

## CAUTION (CONTINUED)

- Always use only Stryker authorized batteries when replacing the batteries. Use of non-Stryker batteries may lead to unpredictable system performance.
- Upon a Battery Low alarm (Battery Low LED on Footboard and audible beep), stop using the **Zoom** motorized drive
  and recharge the batteries immediately. Ignoring the Battery Low alarms may cause your batteries to degrade
  quicker than normal and may decrease battery life.
- Always 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.
- Do not move footboards from one product to another. Individual products may have different options. Mixing footboards could result in unpredictable operation of the product.
- Do not use the siderails to move the product. Always move the product using the integrated handles in the headboard and footboard.
- Do not use pencils, pen caps, pen tips, or other pointed objects to tap the touch screen display. Using excessive
  pressure may damage the footboard control panel and the touch screen display.
- Always use extra supervision when using a mattress or support surface thicker than six in. (15,4 cm).
- Do not allow sharp objects to come into contact with the support surface that could puncture, tear, or cut the cover.
- Do not allow sharp edges from the X-ray plate to come in contact with the support surface cover. The recommendation is you cover the X-ray plate with a pillow case or other device before placement under the patient. If damaged, remove the support surface cover from service immediately to prevent cross contamination.
- Make sure that you set the desired product parameters before enabling iBed® Awareness.
- Do not use accessories that cover the footboard and outside siderail LED light bars.
- Do not turn off the iBed® Awareness alarm. You will lose access to the event manager that displays the compromised parameter condition.
- Do not hang IV bags that exceed 22 lb (10 kg) onto the IV pole.
- · Always make sure that the IV pole is at a low height to pass safely through door openings.
- Do not use the IV pole as a push/pull device.
- Always make sure that the clip is stable when installed.
- Do not inset tubes that are larger than 0.75 in. into the line management clip.
- · Always sterilize the clip after each use.
- Always make sure that the clip is stable when installed.
- Always unplug the product before cleaning or servicing.
- Always unplug the product, set the brakes, and place blocks under the litter frame for support when working under the product.
- Always make sure that you wipe each product with clean water and thoroughly dry each product after cleaning.
   Some cleaning products are corrosive in nature and may cause damage to the product if you use them improperly. If you do not properly rinse and dry the product, a corrosive residue may be left on the surface of the product that could cause premature corrosion of critical components. Failure to follow these cleaning instructions may void your warranty.
- Do not steam clean, pressure wash, ultrasonically clean, or immerse any part of the product in water. Exposure to
  water may damage the internal electric parts. These methods of cleaning are not recommended and may void this
  product's warranty.

## Setup

To unpack your product, see the unpacking instructions that are attached to the product inside of the shipping crate.



#### **WARNING**

- Always allow the product to reach room temperature before conducting any setup or testing functional operations to prevent permanent product damage.
- Always operate the product when all operators are clear of the mechanisms.
- Always plug the product directly into a properly grounded, three-prong receptacle. You can only achieve grounding reliability when you use a hospital-grade receptacle. This product is equipped with a hospital-grade plug for protection against electric shock hazard.
- Always properly handle the power cord to avoid the risk of entanglement, damage to the power cord, or potential shock hazards. If the power cord is damaged, immediately remove the product from service and contact the appropriate maintenance personnel.
- Do not attach the power cord to any moving parts of InTouch.
- Always unplug the power cord, turn the battery switch to the OFF (O) position, press the N/Brake Off button, and call maintenance if unanticipated motion occurs.

#### To turn on the product:

- 1. Plug the power cord into a properly grounded, hospital-grade wall outlet.
- 2. Turn the battery switch to the ON (|) position.

Before placing the product into service, make sure that these components are working properly:

- Visually inspect the product for any signs of shipping damage.
- 2. Flip down and depress the manual brake pedal and make sure that the neutral, drive, and brake functions of the manual brake pedal hold.
- 3. Press BRAKE on each control panel and make sure that the neutral, drive, and brake functions of the electric brake hold.
- 4. Test the **Zoom** motorized drive (Model 2141) (option).
- 5. Raise and lower the siderails to make sure that they move smoothly and lock securely in the full up position.
- 6. Press each button on the head end control panel (optional), motion control panel, brake control panel, footboard control panel, and patient control pendant (optional) to make sure that each function operates properly.
- 7. Make sure that the footboard operates properly.
- 8. Make sure that the scale system operates properly.
- 9. Make sure that the bed exit system operates properly.
- 10. Make sure that the CPR release pedal operates properly.
- 11. Make sure that the support surface operates properly (optional).
- 12. Make sure that optional accessories are properly installed and operate as described.



#### **WARNING**

Always unplug the product power cord from the wall when using oxygen administering equipment. Possible fire hazard exists when this product is used with oxygen administering equipment other than nasal, mask type, or half bed-length tent type.

#### Installation

#### Installing the XPRT Therapy support surface (optional)

To install the **XPRT** support surface option onto **InTouch**, see the installation instructions in the **XPRT** support surface operations manual.

#### Installing the PositionPRO support surface (optional)

To install the **PositionPRO** support surface option onto **InTouch**, see the installation instructions in the **PositionPRO** support surface operations manual.

#### Installing the Isolibrium support surface (optional)

To install the **Isolibrium** support surface option onto **InTouch**, see the installation instructions in the **Isolibrium** support surface operations manual.

#### Installing iBed Wireless (120V North American only) (optional)



#### WARNING

- The optional *i*Bed® Wireless function is only intended to provide remote information of product status and parameter conditions. It is not intended to replace patient monitoring protocol.
- The line of sight between an iBed Locator and the head end of bed must be free of obstruction at all times. Any
  interference could interrupt communication between the iBed Locator and the IR module.
- You must use an iBed® Wireless compatible footboard with an iBed® Wireless compatible product. You will lose iBed® Wireless functionality if you use an older version of the footboard.
- You must verify all *i*Bed® Wireless functionality after installation. Verify that the *i*Bed locator communicates the product's positions, and that *i*Bed® Wireless communicates with the wireless access point. Failure to do may result in the loss of information or the transmission of incorrect information.
- You must install the iBed Locators more than 71" apart from one another in the same room (such as in a semi-private room with more than one product). Failure to do may result in the product transmitting information to the incorrect iBed Locator.
- Do not use iBed® Wireless to replace the existing nurse call system. iBed® Wireless products are only intended to transmit product information. They are not intended to transmit nurse call information.

You must install the *i*Bed Locator on the wall at the head end of the product. The *i*Bed Locator communicates with the IR Module that is installed onto the product.

To install the *i*Bed Locator, see the installation instructions that were included with your *i*Bed Locator installation kit. After you install the *i*Bed Locator, you must configure the wireless connection settings for the *i*Bed Server application.

To configure the *i*Bed Server application, see the installation and configuration instructions in the *i*Bed Server Installation/Configuration manual.



#### WARNING

- Always correctly associate or map the iBed Locator to the room or location to provide accurate location information.
   Failure to properly map the iBed Locator to the room or location may result in the product transmitting incorrect information.
- If you move an *i*Bed Locator after it has been installed and mapped, you must remap to the new room or location in which it is moved to. You must also remap the *i*Bed Locator if you change the room or location information after initial installation.

If you have any problems during the *i*Bed Wireless installation process, contact Stryker Technical Support at 1-800-327 -0770.

#### **Battery modes**

**InTouch** is equipped with two batteries that charge when the product is plugged in to a wall outlet. The battery modes begin when the product is unplugged, or during a power failure. The **InTouch** battery back-up functionality activates when you unplug the product.

## A

#### **WARNING**

- Always wash your hands after handling a battery. 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. Properly dispose of batteries when required.
- Power save mode activates after one hour on battery power with no motion release switch activation. Bed exit, scale, and product motion stops operating when the product enters the power save mode.

## <u>^</u>

#### **CAUTION**

- Always plug the product into a wall outlet (regulated AC power source) when not in use to maintain a sufficient battery charge and to maximize product performance while operating on battery power.
- Always immediately replace batteries that have corrosion at the terminals, display cracking, have expanded or bulging sides, or no longer can maintain a full charge.
- Always use only Stryker authorized batteries when replacing the batteries. Use of non-Stryker batteries may lead to unpredictable system performance.
- Upon a Battery Low alarm (Battery Low LED on Footboard and audible beep), stop using the **Zoom** motorized drive
  and recharge the batteries immediately. Ignoring the Battery Low alarms may cause your batteries to degrade
  quicker than normal and may decrease battery life.

**Note:** The settings for lockout controls, scale calibration data, and bed exit are preserved when the product is unplugged, or during a power failure.

The **InTouch** batteries cycle through various modes of operation:

Mode	Operation
Sleep	Occurs if no power is being supplied to the product, if no control panel or touch screen activity has been detected within five minutes, or if no product activity is detected while on DC power within one hour
Alarm mode before dead	Occurs if the batteries are weak, bed exit is armed during sleep mode, or if no control panel activity is detected within four hours
Dead	Occurs if power is not restored to the product or no control panel activity has been detected within 15 minutes after the product has been in alarm mode before dead mode, if the batteries are weak, bed exit is not armed during sleep mode, or if no control panel activity is detected within one hour
Power up	Occurs if power is restored to the product. The product exits dead mode and enters power up mode if the batteries are charging. After the batteries are fully charged, the product returns to normal mode.
Normal	Occurs if power is restored to the product, control panel activity is detected, or the touch screen is not in calibration mode

## Applying or releasing the manual brake

#### **MARNING**

- Always keep feet clear from the area above the base cover or below the base cover when lowering the product or when applying the brakes or releasing the brakes.
- Always apply the brakes when a patient is getting in the product or out of the product to avoid instability.
- Always apply the brakes when the patient is unattended.
- Do not apply the brake to slow or stop the product while it is in motion.

InTouch is equipped with both a manual and an electric braking system.

You can find the manual brake pedal on the patient right side of the product.

To apply the manual brakes:

- Flip down the brake pedal (A) (Figure 5 on page 21).
- 2. Fully depress the brake pedal (A) until Brake appears in the brake pedal window (B) (Figure 6 on page 21). Note: The Brake button and Brake Set LED illuminate when you apply the brakes.

To release the manual brakes, depress the pedal until Neutral or Drive appears in the brake pedal window (B) (Figure 6 on page 21).

Note: If you set the brakes manually, they can be released electronically.

## Applying or releasing the manual brake (Continued)

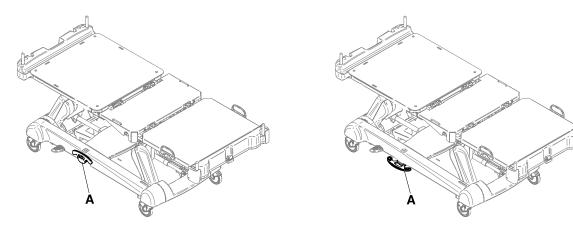


Figure 4: Manual brake pedal

Figure 5: Flipped manual brake pedal

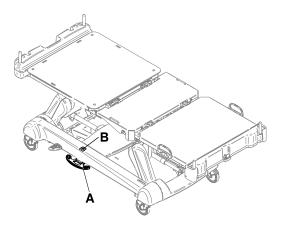


Figure 6: Brake pedal window

#### Applying or releasing the electric brakes

#### **MARNING**

- Always keep feet clear from the area above the base cover or below the base cover when lowering the product or when applying the brakes or releasing the brakes.
- Always apply the brakes when a patient is getting in the product or out of the product to avoid instability.
- Always apply the brakes when the patient is unattended.
- Do not apply the brake to slow or stop the product while it is in motion.

The electric brakes are available on the brake control panel (see Brake control panel (outside siderail) on page 34), footboard control panel (see Footboard control panel on page 37), or head end control panel (optional) (see Head end control panel (optional) on page 36).

To apply the electric brakes, press Brake.

Note: The Brake button and Brake Set LED illuminate when you apply the brakes.

To release the electric brakes, press N/Brake Off.

Note: The N/Brake Off button and Brake Not Set LED illuminate when you release the brakes.

Note: If you set the brakes electronically, they can be released manually.

#### Transporting InTouch with steer lock (Model 2131)



#### WARNING

Always lock the siderails in the full up position with the sleep surface horizontal in the lowest position when transporting a patient.

The steer lock function locks both of the foot end casters for better tracking of the product when transporting a patient.

The steer lock function is available on the brake control panel (see Brake control panel (outside siderail) on page 34), footboard control panel (see Footboard control panel on page 37), or head end control panel (optional) (see Head end control panel (optional) on page 36).

To transport InTouch with steer lock, press D/Drive.

To release steer lock, press N/Brake Off.

#### Transporting InTouch by using the Zoom motorized drive (Model 2141) (option)

#### A

#### **WARNING**

- Do not use the Zoom motorized drive when the batteries become discharged. Press N/Brake Off to place the drive
  wheel in neutral and push the product manually. Recharge the batteries before using the Zoom motorized drive
  again to avoid the risk of battery damage and the drive wheel getting stuck in the down position.
- Use caution while maneuvering the product with the drive wheel activated. Always make sure that there are no
  obstacles near the product while the **Zoom** motorized drive is activated. Injury to the patient, user or bystanders or
  damage to the frame or surrounding equipment could occur if you collide with an obstacle.
- Make sure that the brakes are completely released before attempting to move the product. Attempting to move the
  product with the brakes applied could result in injury to the patient or operator.
- Always lock the siderails in the full up position with the sleep surface horizontal in the lowest position when transporting a patient.
- Do not attempt to move the product manually when you activate the Zoom motorized drive. Always place the drive
  wheel into the neutral position and release the brakes before attempting to move the product manually.
- Do not attempt to move the product laterally after you apply the Zoom motorized drive. The the Zoom motorized drive cannot swivel.

**Note:** To move the product in any direction, including laterally, press **N/Brake Off** on the brake control panel (see Brake control panel (outside siderail) on page 34), footboard control panel (see Footboard control panel on page 37), or head end control panel (optional) (see Head end control panel (optional) on page 36).

**InTouch** may be equipped with a **Zoom** motorized drive. The **Zoom** motorized drive provides mobility and efficient transport of the product.

To transport InTouch using the drive wheel:

- Unplug the power cord from the wall outlet.
   Note: The Zoom motorized drive does not operate if the power cord is plugged into a wall outlet.
- 2. Store the power cord on the Zoom handle brackets.
- Unfold the drive handles from the head end of the product (Figure 7 on page 23). Make sure that the drive handles lock into the upright position.



Figure 7: Unfolding the Zoom motorized drive handles

- 4. Press N/Brake Off to release the brakes.
- Press D/Drive on the brake control panel, footboard control panel, or head end control panel (optional).
   Note: The D/Drive button illuminates when the drive wheel is activated.
- 6. Make sure that the product is ready for driving.

# Transporting InTouch by using the Zoom motorized drive (Model 2141) (option) (Continued)

Two LEDs on the drive handle indicate whether the product is ready for driving (Figure 8 on page 24):



Figure 8: Zoom motorized drive handle LEDs

#### **Notes**

- · If the green LED is on, the battery is charged, and you may use the Zoom motorized drive for driving.
- If the amber LED is on and the battery is at low charge, the Zoom motorized drive should not be used. InTouch requires two 12 volt batteries to provide power to the Zoom motorized drive. The Zoom motorized drive will not operate properly if the batteries are not sufficiently charged. Plug InTouch into a wall outlet to charge the batteries before using the Zoom motorized drive.
- 7. Grasp the yellow triggers on the Zoom drive handles.
  - **Note:** You can squeeze one or both triggers to enable movement, but you must release both triggers to stop movement.
- 8. While squeezing the triggers, push the handles away from you or pull the handles toward you to initiate motion in the desired direction. The speed increases proportionally to the amount of force applied to the drive handles. When you reach the desired speed, the Zoom motorized drive maintains the speed and direction with no extra push force.
- 9. To accelerate, push or pull the handles again until you reach the desired speed.
- 10. Relax the force to a neutral position to maintain speed.
- 11. To slow down, push or pull the handles in the opposite direction the product is currently moving.
- 12. To stop motion, you must release both triggers on the drive handles.



Do not use the brake to slow or stop the product while it is in motion.

## Activating the CPR release pedal



#### **WARNING**

Always make sure that all persons and equipment are away from the area below and around the product before you activate the CPR release. The CPR release is for emergency use only.

When the product is raised and quick access to the patient is needed, you can position **InTouch** quickly to 0° by activating the CPR release.

Two instant CPR release pedals are located at the head end section on both the left and right sides of the litter (A) (Figure 9 on page 25).

To activate the CPR release pedal, fully depress the CPR pedal. The product instantly flattens to 0°.

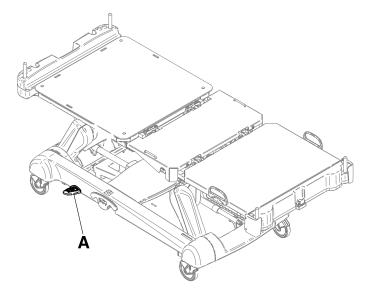


Figure 9: CPR release pedal

## Locating the foley bag hooks

There are two isolated foley bag hooks under the seat section (B) on both sides of the product (Figure 10 on page 26). If you weight the patient with the scale system, the isolated foley bag weight is not included with the patient weight.

There are four foley bag hooks under the fowler section (A) and foot section (C) on both sides of the product (Figure 10 on page 26). If you weigh the patient with the scale system, the foley bag weight is included with the patient weight.

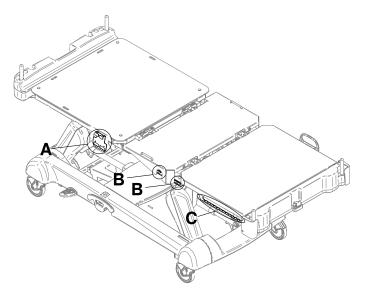


Figure 10: Foley bag hooks

#### Locating the patient restraint strap tie-ins



#### **WARNING**

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

#### $\bigwedge$

#### **CAUTION**

Always 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.

There are eight patient restraint strap tie-in locations on the litter assembly for installing patient restraint straps. Four of them are located on the fowler section, two are located on the seat section, and the remaining two are the mattress retainers located on the foot section (Figure 11 on page 27).

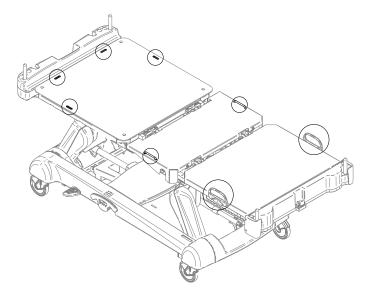


Figure 11: Restraint strap tie-in locations

#### Operating nurse call (option)

Nurse call allows a patient to alert an operator when they require assistance.

To activate nurse call, press the nurse call button on the inside siderail (N) (Figure 1 on page 11) or on the optional patient control pendant (see Patient control pendant (optional) on page 35). Communication between the patient and the nurse station is established when the nursing staff responds to the nurse call signal.

Note: If the communication between the product and the nurse station is interrupted following a power failure, the disconnection of the nurse call communication cable, or the switching off of InTouch, the nurse call system automatically sends a signal to the nurse station.

## Connecting peripheral equipment to the built-in 110 volt auxiliary power outlet (optional) and the auxiliary mattress connector



#### **WARNING**

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

You can use the 110 volt InTouch auxiliary power outlet as a built-in power source for peripheral equipment. The outlet is located beneath the foot end on the patient left side of the product (A) (Figure 1 on page 11). There is a one and two plug option for the InTouch auxiliary outlet (A) (Figure 12 on page 28).

There is also an auxiliary mattress connector outlet for connecting a support surface option to InTouch (B) (Figure 12 on page 28). A 5A breaker is also integrated into this power outlet.

#### Note:

To install a support surface option onto InTouch, see the installation instructions in the support surface operations manual.

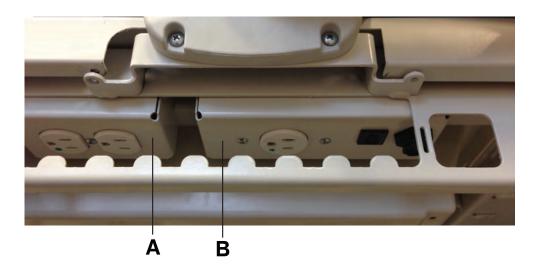


Figure 12: Optional InTouch auxiliary outlets

## Removing or replacing the headboard

You can easily remove the headboard for patient accessibility and cleaning.

To remove the headboard, grasp the handles and lift the headboard straight up and off the product (Figure 13 on page 29).

To replace the headboard, align the bottom of the headboard with the pegs at the head end of the product, and then lower the headboard until it completely seats onto the pegs (Figure 14 on page 29).

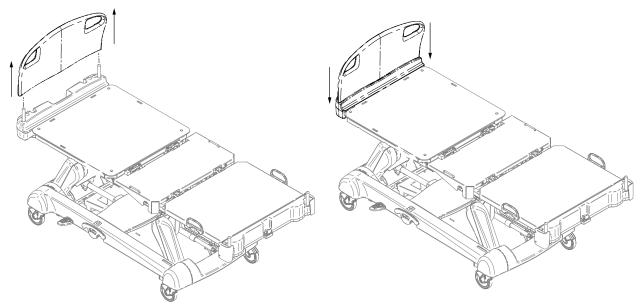


Figure 13: Removing the headboard

Figure 14: Replacing the headboard

## Removing or replacing the footboard



#### **CAUTION**

Do not move footboards from one product to another. Individual products may have different options. Mixing footboards could result in unpredictable operation of the product.

**Note:** Do not lock the control panel functions from the footboard if you must access the control panel functionality when you remove the footboard.

You can easily remove the footboard for patient accessibility, cleaning, and attachment of the bed extender (optional).

To remove the footboard, grasp the handles and lift the footboard straight up and off the product (Figure 15 on page 30).

To replace the footboard, lower the footboard onto the footboard connector. Make sure that the footboard properly fits onto the footboard connector on the foot end of the litter (Figure 16 on page 30).

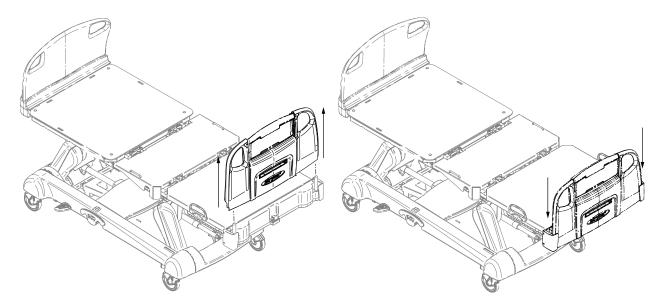


Figure 15: Removing the footboard

Figure 16: Replacing the footboard

#### Raising or lowering the siderails

#### A

#### **WARNING**

- Always lock the siderails in the full up position with the sleep surface horizontal in the lowest position. Always lock
  the siderails unless a patient's condition requires extra safety measures.
- Do not use siderails as restraint devices to keep the patient from exiting the product. The design of the siderails keep
  the patient from rolling off the product. The operator must determine the degree of restraint necessary to make sure
  that the patient is safe. Failure to use the siderails as intended could result in serious patient injury.
- Always keep the siderails outside of the oxygen tent.

## Æ

#### **CAUTION**

Do not use the siderails to move the product. Always move the product using the integrated handles in the headboard and footboard.

You can lower both the head end and foot end siderails with only one hand. Siderails only lock in the full up position.

When raising the siderails, listen for the "click" that indicates that the siderail has locked in the raised position. Pull firmly on the siderail to make sure that it is locked into position.

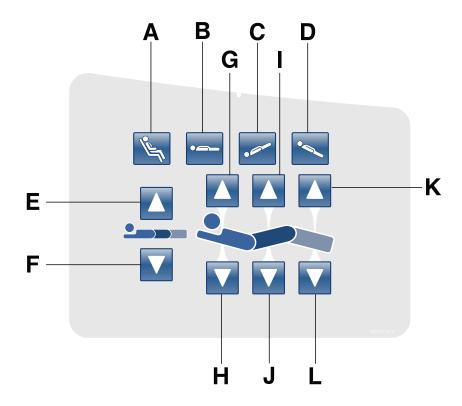
To raise the siderails, grasp the yellow release latch (A) (Figure 17 on page 31) and rotate the siderail backward.

To lower the siderails, grasp the yellow release latch (A) (Figure 17 on page 31) and rotate the siderail forward.



Figure 17: Raising or lowering the siderails

## Motion control panel (outside siderail)



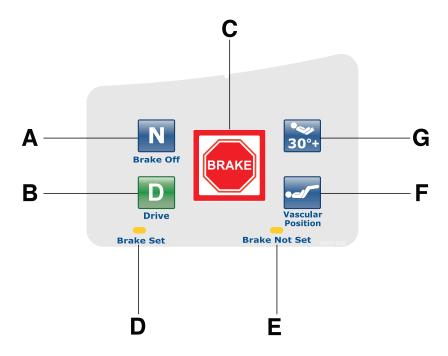
	Name	Function
А	Cardiac chair/Enhanced cardiac chair position	Press and hold once to place the product into the cardiac chair position. Press and hold a second time to place the product into the enhanced cardiac chair position.
В	Flat position	Places the product into the flat position (0°)
С	Trendelenburg	Places the product into the Trendelenburg position (head down / foot up)
D	Reverse Trendelenburg	Places the product into the Reverse Trendelenburg position (head up / foot down)
Е	Litter up	Raises the litter
F	Litter down	Lowers the litter
G	Fowler up	Raises the fowler section
Н	Fowler down	Lowers the fowler section
I	Gatch up	Raises the gatch section
J	Gatch down	Lowers the gatch section
К	Foot up	Raises the foot section
L	Foot down	Lowers the foot section

## Motion control panel (outside siderail) (Continued)

#### **Notes**

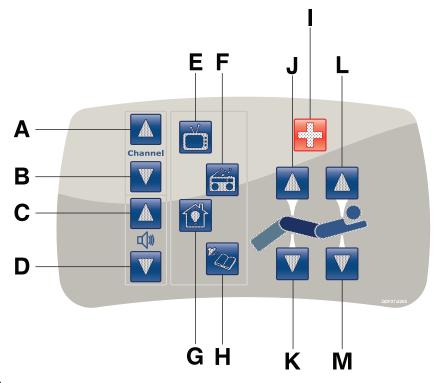
- Do not lock the motion control panel functions from the footboard if you must access the motion control panel functionality when you remove the footboard.
- · The addition of accessories affects the motion of the bed.
- Foot end section mobility stops when you insert an accessory into the traction socket at the foot end of the product.
- · The maximum angle of inclination during the Trendelenburg and reverse Trendelenburg position is 15°.
- · You must have a minimum clearance of 20 in. for the Trendelenburg and Reverse Trendelenburg positions.
- · You can lower the height while in Trendelenburg without changing the angle.

# Brake control panel (outside siderail)



	Name	Function	
A	Neutral/Brake Off (N/Brake Off)	<ul> <li>Model 2131: releases the brakes and the steer function</li> <li>Model 2141: releases the brakes and deactivates the Zoom motorized drive</li> <li>Note: The N/Brake Off button and Brake Not Set LED illuminate when you release the brakes.</li> </ul>	
В	D/Drive (Activates steer lock activation and the <b>Zoom</b> motorized drive)	<ul> <li>Model 2131: releases the brakes and locks the foot end casters for the steer lock function</li> <li>Model 2141: activates the Zoom motorized drive         Note: The Drive button illuminates when you activate steer lock or the Zoom motorized drive.     </li> </ul>	
С	Brake	Applies the electric brakes.  Note: The Brake button and Brake Set LED illuminate when you apply the brakes.	
D	Brake set LED	Illuminates amber when you apply the brakes	
Е	Brake not set LED	Flashes amber when you release the brakes	
F	Vascular Position	Raises the foot section to the vascular position	
G	HOB 30° position	Raises the fowler section/head of bed (HOB) to 30°	

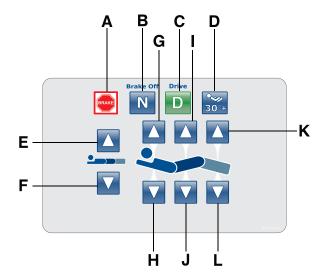
# Patient control pendant (optional)



(All options shown)

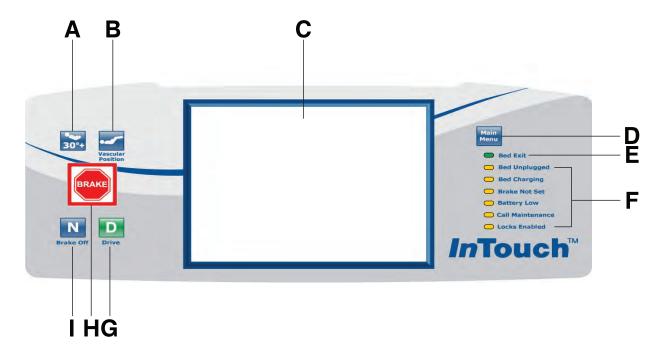
	Name	Function
Α	Channel up	Changes the TV channel up
В	Channel down	Changes the TV channel down
С	Volume up	Increases the volume
D	Volume down	Decreases the volume
Е	TV	Turns the TV on or off
F	Radio	Turns the radio on or off
G	Room light	Turns the room light on or off
Н	Reading light	Turns the reading light on or off
I	Nurse call	Activates nurse call
J	Gatch up	Raises the gatch section
K	Gatch down	Lowers the gatch section
L	Fowler up	Raises the fowler section
М	Fowler down	Lowers the fowler section

# Head end control panel (optional)



	Name	Function	
А	Brake	Applies the electric brakes.  Note: The Brake button and Brake Set LED illuminate when you apply the brakes.	
В	Neutral/Brake Off (N/Brake Off)	<ul> <li>Model 2131: releases the brakes and the steer function</li> <li>Model 2141: releases the brakes and deactivates the Zoom motorized drive</li> <li>Note: The N/Brake Off button and Brake Not Set LED illuminate when you release the brakes.</li> </ul>	
С	D/Drive (Activates steer lock activation and the <b>Zoom</b> motorized drive)	<ul> <li>Model 2131: releases the brakes and locks the foot end casters for the steer lock function</li> <li>Model 2141: activates the Zoom motorized drive         Note: The Drive button illuminates when you activate steer lock or the Zoom motorized drive.     </li> </ul>	
D	HOB 30° position	Raises the fowler section/head of bed (HOB) to 30°	
Е	Litter up	Raises the litter	
F	Litter down	Lowers the litter	
G	Fowler up	Raises the fowler section	
Н	Fowler down	Lowers the fowler section	
I	Gatch up	Raises the gatch section	
J	Gatch down	Lowers the gatch section	
К	Foot up	Raises the foot section	
L	Foot down	Lowers the foot section	

# Footboard control panel



	Name	Function	
Α	HOB 30° position	Raises the fowler section/head of bed (HOB) to 30°	
В	Vascular Position	Raises foot section to the vascular position	
С	Touch screen display	Displays InTouch features and functions	
D	Main menu	Returns to the Patient Information screen or awakens the touch screen from sleep mode	
Е	Bed exit indicator	Illuminates green when you arm Bed Exit	
F	Footboard LED indicators	Indicates current product state (see Footboard LED indicators on page 38)	
G	D/Drive (Activates steer lock activation and the <b>Zoom</b> motorized drive)	<ul> <li>Model 2131: releases the brakes and locks the foot end casters for the steer lock function</li> <li>Model 2141: activates the Zoom motorized drive         Note: The Drive button illuminates when you activate steer lock or the Zoom motorized drive.     </li> </ul>	
Н	Brake	Applies the electric brakes.  Note: The Brake button and Brake Set LED illuminate when you apply the brakes.	
I	Neutral/Brake Off (N/Brake Off)	<ul> <li>Model 2131: releases the brakes and the steer function</li> <li>Model 2141: releases the brakes and deactivates the Zoom motorized drive</li> <li>Note: The N/Brake Off button and Brake Not Set LED illuminate when you release the brakes.</li> </ul>	

## **Footboard LED indicators**

The LED indicators on the footboard control panel illuminate when there is a parameter change on the product.

LED	Indicator	
Bed unplugged	Illuminates amber when you unplug the product. Battery back-up functionality activates when you unplug the product.	
	<u></u> CAUTION	
	Plug the product into a wall outlet (regulated AC power source) when not in use to maintain a sufficient battery charge and to maximize product performance while on battery power.	
Bed charging	Illuminates amber when you connect the product to a wall outlet and the batteries are recharging. The batteries fully charge in approximately eight hours. When the batteries are fully charged, the LED no longer illuminates.	
	If the batteries are not connected, or if the battery switch is in the <b>OFF</b> position (O), the LED indicator does not illuminate.	
Brake not set Flashes amber when you release the brakes		
Battery low	Flashes amber when the battery charge is low	
	To recharge the <b>InTouch</b> batteries, plug the power cord into a properly grounded, hospital-grade wall outlet.	
	<u></u>	
	Do not use the <b>Zoom</b> motorized drive when you hear a battery low alarm (Battery Low LED on Footboard and audible beep). Stop using the <b>Zoom</b> motorized drive and recharge the batteries immediately. If you ignore the battery low alarms, the batteries may degrade quicker than normal and may decrease battery life.	
Call maintenance	Illuminates amber when the product requires maintenance or repairs. Contact the appropriate maintenance personnel to restore proper functionality.	
Locks enabled	Illuminates amber on the footboard control panel when one lock or a total lockout is set (see Main menu: Lockouts on page 86).	

# Accessing functions and features with the touch screen display and navigation bar

#### $\hat{\Lambda}$

#### **CAUTION**

Do not use pencils, pen caps, pen tips, or other pointed objects to tap the touch screen display. Using excessive pressure may damage the footboard control panel and the touch screen display.

The **InTouch** footboard control panel has a touchable user interface (touch screen display) that displays the main menu for **InTouch** functions and features.

To access a main menu option, tap the menu item in the Navigation bar (Figure 18 on page 39).



Figure 18: Navigation bar

#### **Notes**

- · Unless a submenu or a notification is open, the navigation bar is always available for navigation.
- If no control panel or touch screen activity is detected within two minutes, the touch screen lighting dims to 10%.
- · If no control panel or touch screen activity is detected within four minutes, the touch screen enters sleep mode.

To awaken the touch screen from sleep mode, press any button on the footboard control panel, or tap the touch screen display.

Note: The touch screen display shows the Patient Information screen by default when it awakes from sleep mode.

## Main menu: Patient information

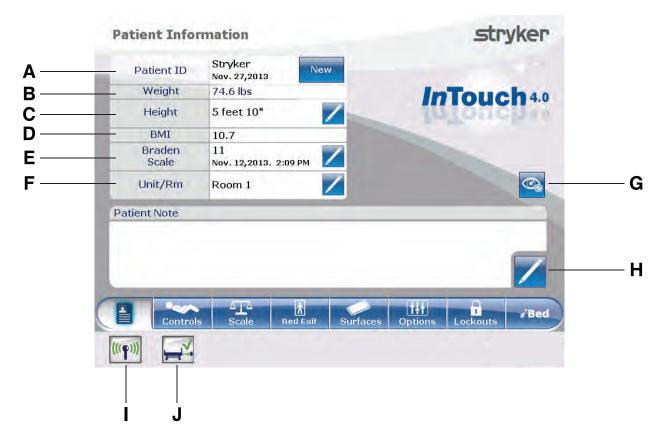


Figure 19: Patient information

	Name	Function
Α	Patient ID	Displays patient name and date admitted
В	Weight	Displays patient weight
С	Height	Displays patient height
D	ВМІ	Displays the patient's body mass index (BMI)
E	Braden Scale for Predicting Pressure Sore Risk <sup>1</sup>	Displays the patient's last Braden Scale score and the time and date the score was recorded. Tap the pencil to enter the Braden Scale menu.
F	Unit/Rm	Tap the pencil to enter unit/room number
G	Configure privacy	Configures the visibility of patient information displayed on the Patient Information screen
Н	Patient note	Tap the pencil to enter patient notes
i	Wi-Fi (Optional)	View the Wi-Fi connection status (Figure 95 on page 84)
J	iBed Locator (Optional)	View the <i>i</i> Bed Locator connection status (Figure 98 on page 85)

<sup>&</sup>lt;sup>1</sup>Copyright. Barbara Braden and Nancy Bergstrom, 1988. Reprinted with permission.

## Clearing and entering new patient information

Clear all previous product parameters and patient history before placing a new patient onto **InTouch**.

To enter new patient information, tap **New** (Figure 19 on page 40).

To clear previous product parameters and patient history:

- Tap the option that you want to clear.
   Note: Options change from blue (deactivated) to green (activated) when tapped.
- 2. Tap **Ok**.

To enter a new Patient ID:

- 1. Tap the pencil (Figure 20 on page 41).
- 2. Enter the Patient ID.
- 3. Tap Ok.

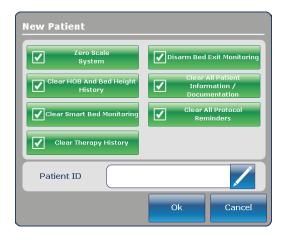


Figure 20: New patient

#### Configuring the visibility of patient information

The Configure screen allows you to choose what patient information is displayed on the Patient Information screen.

To configure the visibility of patient information, tap Configure privacy (Figure 19 on page 40).

To enable visibility of patient information on the Patient Information screen:

- Tap the option in the Configure screen that you want to display (Figure 21 on page 42).
  - **Note:** Options change from blue (deactivated) to green (activated) when tapped.
- 2. Tap Ok.

**Note:** If the option is not tapped to enable visibility of patient information, dashes are displayed for the missing value in the **Patient Information** screen.

Display Height: Displays the patient's height.

- To increase patient height by 1 (in. or cm), tap the up arrow (Figure 21 on page 42).
- To decrease patient height by 1 (in. or cm), tap the down arrow (Figure 21 on page 42).

**Display Weight From Scale System:** Displays the patient's weight as measured by the scale system.

Calculate BMI: Displays the patient's body mass index (BMI). You must tap both the Display Height and Display Weight From Scale System options to calculate the BMI.

**Display Last Braden Scale Score:** Displays the patient's last Braden Scale score and the time and date the score was recorded. If no score has been measured, dashes are displayed for the missing value.

**Display Patient ID:** Displays the Patient ID. You can enter the Patient ID on the **New Patient** screen (Figure 20 on page 41).

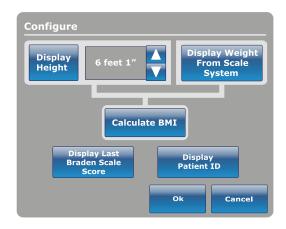
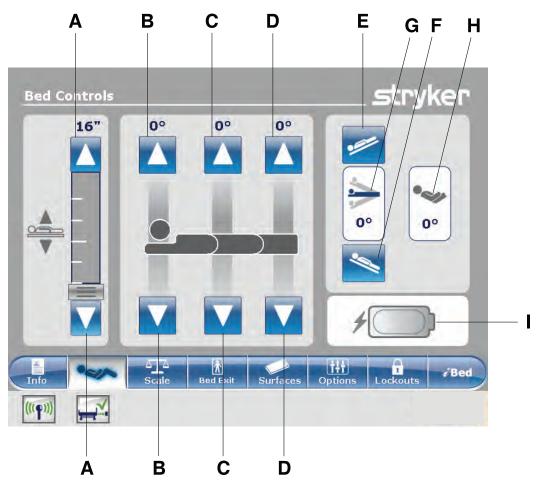


Figure 21: Configuring private patient information

## Main menu: Bed controls



	Name	Function
Α	Bed height up/down	Raises or lowers the litter
В	Fowler up/down	Raises or lowers the fowler
С	Gatch up/down	Raises or lowers the gatch
D	Foot up/down	Raises or lowers the foot section
Е	Trendelenbur g	Places the product into the Trendelenburg position (head up / foot down)
F	Reverse Trendelenburg	Places the product into the Reverse Trendelenburg position (head down / foot up)
G	Angle indicator	Shows the angle of Trendelenburg or Reverse Trendelenburg
Н	HOB angle indicator	Shows the angle of head of bed (HOB)
I	Battery power indicator	Shows the power left in the battery

#### Main menu: Scale



	Name	Function	
А	Delayed Weight	Records patient weight with a delay. Tap to start a delayed weight measurement.	
В	lbs/kg	Changes the displayed measuring unit (lbs or kg)	
С	Store	Tap to store the current weight reading	
D	Zero	Zeros the scale settings	
Е	Weight History	Accesses stored patient weight history	
F	Change Weight	Change the weight of a patient	
G	Gain or Loss	Displays the initial patient weight measured, current patient weight, and weight the patient has gained or lost from the initial patient weight	
Н	Scale Last Zero	Date and time of the last zero of the scale	
I	Patient Since	Patient's admittance date	

#### **WARNING**

- The scale system is intended to assist in the monitoring of the patient's weight variation. Under no circumstances should its reading be used as sole reference for medical treatment.
- Power save mode activates after one hour on battery power with no motion release switch activation. Bed exit, scale, and product motion stops operating when the product enters the power save mode.

## Recording patient weight with a delay

#### **Notes**

- The delayed time is set to 15 seconds.
- The patient must be still while the scale records their weight. If the scale cannot measure a stable weight value, no weight entry is recorded.

To record patient weight with a delay:

 Tap Delayed Weight (see Main menu: Scale on page 44).

Note: The 15 second timer starts.

- Remove or lift up any equipment you do not want calculated into the patient's weight. This includes anything lying on the product or resting on the patient.
   Note: To cancel the request, tap Cancel (Figure 22 on page 45).
  - · The scale beeps after 10 seconds elapses.
  - The scale calculates the weight of the patient for the next five seconds.
  - The scale beeps again, and then the Delayed Weight screen appears (Figure 23 on page 45).
- 3. Return the equipment to its original position.

To change the displayed measuring unit, tap **lbs/kg** (Figure 23 on page 45).

To return to the **Scale** screen, tap **Close** (Figure 23 on page 45).

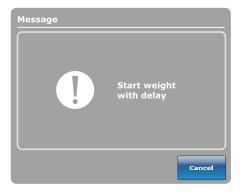


Figure 22: Start weight with delay



Figure 23: Delayed Weight

## Setting the scale to zero

The zero function clears all of the stored values for weight history, change patient weight, and gain or loss.

To set the scale to zero:

- 1. Tap Zero (Main menu: Scale on page 44).
- 2. To confirm setting the scale to zero, tap **Ok** (Figure 24 on page 46).

To cancel the request, tap **Cancel** (Figure 24 on page 46 ).

**Note:** The request is cancelled if the bed goes into auto shutoff.

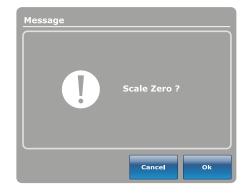


Figure 24: Scale Zero?

After confirming setting the scale to zero, a notification appears (Figure 25 on page 46).

Note: To cancel the request, tap Close.



Figure 25: Do not touch bed

A confirmation notification indicates that setting the scale to zero was successful (Figure 26 on page 46).



Figure 26: Zero success!

#### Viewing weight history

Weight history displays measured and stored weight values. The system stores a maximum of 50 weight measurements. Any new measurement taken after the fiftieth measurement deletes the oldest measurement taken.

To view weight history, tap **Weight History** (Main menu: Scale on page 44).

To reset the stored weight histories, tap **Reset** (Figure 27 on page 47).

To change the displayed measuring unit, tap **lbs/kg** (Figure 27 on page 47).

To view values that are not currently visible on the screen, tap the arrows to scroll from the left to right. The cursor only moves by one value at a time.

To store the current weight reading, tap **Store** (Figure 27 on page 47).

To return to the **Scale** screen, tap **Close** (Figure 27 on page 47).

To view specific weight history information:

- Tap a weight value in the weight history screen (Figure 27 on page 47). Each value displays the time and date of the measurement (Figure 28 on page 47).
- 2. Tap **Previous** to see the previous weight measured (Figure 28 on page 47).
- 3. Tap **Next** to see the next weight measured (Figure 28 on page 47).
- 4. To return to the **Weight History** screen, tap **Cancel** (Figure 28 on page 47).

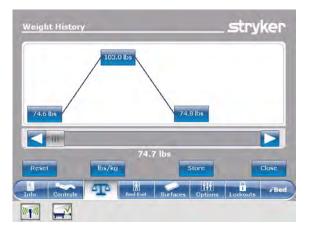


Figure 27: Weight history



Figure 28: Weight history information

## Changing the patient weight

To change the patient weight:

Tap Change Weight (Main menu: Scale on page 44).

To confirm changing the patient weight, tap **Ok** (Figure 29 on page 48).

To cancel the request, tap Cancel (Figure 29 on page 48 )

**Note:** The request is cancelled if the bed goes into auto shutoff.

While changing patient weight, a notification appears (Figure 30 on page 48).

Note: To cancel the request, tap Close.

After the scale calibration, you can change the patient weight (Figure 31 on page 48).

- To increase patient weight by .1 (lb or kg), tap the up arrow
- To decrease patient weight by .1 (lb or kg), tap the down arrow.
- To increase patient weight by 1.0 (lb or kg), hold the up arrow.
- To decrease patient weight by 1.0 (lb or kg), hold the down arrow.
- · To save the desired weight, tap Ok.
- To cancel the request, tap Cancel.



Figure 29: Change patient weight?

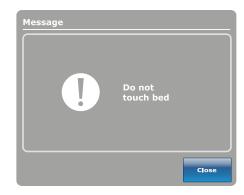


Figure 30: Do not touch bed



Figure 31: Change patient weight

## Measuring weight gain or loss

The gain or loss function compares the initial patient weight to the current patient weight. It then displays the weight the patient has gained or lost since the initial patient weight reading.

To view gain or loss, tap **Gain or Loss** (see Main menu: Scale on page 44).

To change the displayed measuring unit, tap **lbs/kg** (Figure 32 on page 49).

To reset the gain or loss measurement, tap **Reset** (Figure 32 on page 49).

To return to the **Scale** screen, tap **Close** (Figure 32 on page 49).

To reset the gain or loss measurement, tap **Ok** (Figure 33 on page 49).

To cancel the request, tap **Cancel** (Figure 33 on page 49 ).

**Note:** The request is cancelled if the bed goes into auto shutoff.

A confirmation notification indicates that the resetting of the gain or loss is complete (Figure 34 on page 49).



Figure 32: Gain or loss

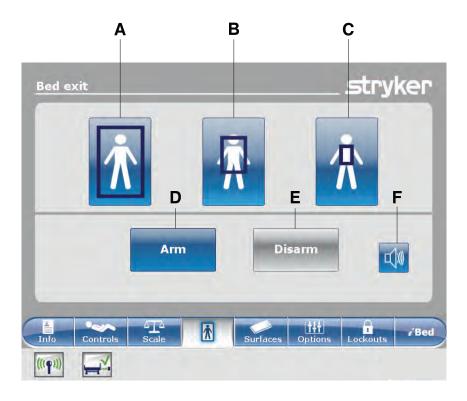


Figure 33: Reset gain or loss?



Figure 34: Gain or loss reset success!

## Main menu: Chaperone Bed exit



	Name	Function
А	Zone 1	The patient can move freely, but the alarm sounds when the patient attempts to leave the product.
В	Zone 2	The patient can move with limited movement. The alarm sounds when the patient approaches the siderails or moves toward the foot end.
С	Zone 3	The patient can move with minimal movement. The alarm sounds when the patient moves out of the center of gravity.
D	Arm	Arms bed exit
Е	Disarm	Disarms bed exit
F	Alarm	Accesses the alarm settings menu

## **MARNING**

- Bed exit is intended only to aid in the detection of a patient exiting the product. It is not intended to replace patient monitoring protocol.
- Bed exit is not designed to be used with patients weighing less than 50 lb (23 kg).
- Power save mode activates after one hour on battery power with no motion release switch activation. Bed exit, scale, and product motion stops operating when the product enters the power save mode.

## **Arming or disarming Chaperone Bed exit**

When armed, Chaperone® Bed Exit monitors the patient's position on the product.

Note: A notification appears if there is not enough weight on the product to arm bed exit.

To arm bed exit:

- 1. Tap the desired zone (see Main menu: Chaperone Bed exit on page 50).
- 2. Tap Arm (D) (see Main menu: Chaperone Bed exit on page 50).

After arming bed exit, the LED light bars on the outside siderails and footboard illuminate green, the bed exit indicator LED on the footboard control panel illuminates, and the selected zone in the **Bed exit** screen is highlighted green.

If the patient moves from the armed zone and compromises the bed exit parameter, the LED light bars on the outside siderails and footboard flash amber, the bed exit indicator LED on the footboard control panel flashes, a sound alarm is triggered, the compromised zone is highlighted red, and the **Event Manager** screen appears (Figure 101 on page 91).

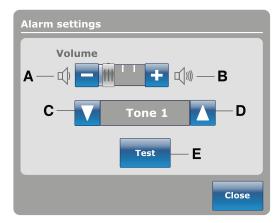
**Note:** If **InTouch** is equipped with the optional *i*Audio feature, voice alarms are available. Voice alarms replace the buzzer alarm and play through the inside siderail speakers.

To disarm bed exit, tap Disarm.

# Setting the alarm tones

InTouch has 10 alarm tone settings.

**Note:** If **InTouch** is equipped with the optional *i*Audio feature, voice alarms are available. Voice alarms replace the buzzer alarm and play through the inside siderail speakers.



	Name	Function
Α	Volume down	Decreases the volume
В	Volume up	Increases the volume
С	Change tone	Scrolls to the next tone
D	Change tone	Scrolls to the previous tone
Е	Test	Tests the selected volume and tone setting

## Connecting a support surface to InTouch

#### A

#### **WARNING**

- Do not use extension cords with support surfaces. Support surfaces are only intended to be powered by InTouch
  with the power cord supplied.
- Do not route cables between the support surface and InTouch.
- Install the support surface onto InTouch.
   Note: To install a support surface option onto InTouch, see the installation procedures in the appropriate support surface operations manual.
- 2. Connect the integration cable from the support surface to the auxiliary mattress connector (B) (Figure 35 on page 53).
- Plug the support surface power cord into the auxiliary mattress connector outlet (A) (Figure 35 on page 53).

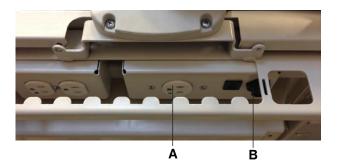


Figure 35: Auxiliary mattress connector outlet

#### Main menu: Surfaces

**InTouch** can detect if a support surface is connected to the auxiliary mattress connector.

If you tap **Surfaces** on the navigation bar (Figure 37 on page 53) and there is no support surface connected to **InTouch**, a notification appears (Figure 36 on page 53).

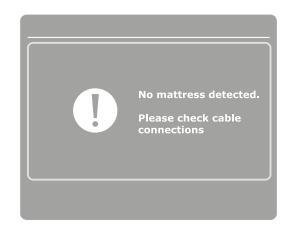


Figure 36: No mattress detected



Figure 37: Navigation Bar

## **XPRT Therapy support surface (optional)**

If you tap **Surfaces** on the navigation bar and **XPRT** is connected to **InTouch**, the home screen for **XPRT** appears (Figure 38 on page 54).

To install the **XPRT** Therapy support surface while integrated with **InTouch**, see the **XPRT** Therapy support surface operations manual.

#### **△WARNING**

Always make sure that all of the patient's limbs are within the raised and locked siderails when the support surface is articulating to avoid the risk of patient injury.

#### **↑**CAUTION

Always use extra supervision when using a mattress or support surface thicker than six in. (15,4 cm).



Figure 38: XPRT home screen on InTouch

#### PositionPRO support surface (optional)

If you tap **Surfaces** on the navigation bar and **PositionPRO** is connected to **InTouch**, the home screen for **PositionPRO** appears (Figure 39 on page 54).

To install the **PositionPRO** support surface while integrated with **InTouch**, see the **PositionPRO** support surface operations manual.

#### **△WARNING**

Always make sure that all of the patient's limbs are within the raised and locked siderails when the support surface is articulating to avoid the risk of patient injury.

#### **CAUTION**

Always use extra supervision when using a mattress or support surface thicker than six in. (15,4 cm).



Figure 39: PositionPRO home screen on InTouch

## Restarting a support surface function

A notification appears (Figure 40 on page 55) after **InTouch** has reset and the Turn Assist or Max Inflate support surface functions were active. You may need to restart the interrupted function after receiving this message.

To restart an **XPRT** support surface function, see the instructions in the **XPRT** support surface operations manual.

To restart a **PositionPRO** support surface function, see the instructions in the **PositionPRO** support surface operations manual.

To restart an **Isolibrium** support surface function, seeStarting and stopping Turn Assist on page 68 or Starting and stopping Max Inflate on page 70.

#### Notes

- The firmness settings for XPRT and PositionPRO are preserved when the product resets.
- The Pressure Redistribution settings for Isolibrium are preserved when the product resets.
- The settings for Protocol Reminders are lost when the product resets.



Figure 40: System reset message

## **Isolibrium support surface (optional)**

## Main support surface screen for Isolibrium

The main support surface screen for **Isolibrium** displays when you tap **Support Surface** on the **InTouch** navigation bar (see Connecting a support surface to InTouch on page 53). Active functions are displayed or upon initial entry (Figure 41 on page 56), the functions available to the operator include:

- Low Air Loss (LAL)
- Screen Lockout
- · Therapy History
- Max Inflate
- · Surface Settings (from the Pressure Redistribution menu)



Figure 41: First Time Entry

#### Notes

- Pressure Redistribution, Lateral Rotation, and Turn Assist are not available until after you complete the Weight Range selection through the Surface Settings screen.
- · When you tap to select an icon, the icon illuminates orange.

## Preparing Isolibrium for a new patient



#### **WARNING**

Do not exceed the safe working load of the **Isolibrium** support surface. Excess weight could cause unpredictable safety and performance of this system.

There are two options for clearing the therapy history and are located:

- New Patient display
- Surface settings display (see Selecting to retain or clear therapy history on page 61).

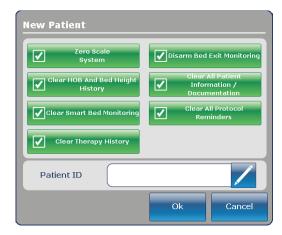


Figure 42: InTouch New Patient screen

#### Positioning a patient on the support surface

#### **MARNING**

- Always center the patient on the support surface. Align the patient's head toward the headboard before starting functions. Check the patient frequently to make sure that you maintain the proper positioning.
- Always make sure that the tubing and wiring that is connected to the patient is long enough, stable, and secure during Lateral Rotation or Turn Assist.
- Always raise all of the InTouch bed siderails before starting Turn Assist or Lateral Rotation functions.
- Do not exceed the safe working load of the Isolibrium support surface. Excess weight could cause unpredictable safety and performance of this system.
- Always use extra caution when reading radiology images taken of a patient on a support surface because internal components can cause artifacts and distort readings.

#### / CAUTION

- Do not allow sharp objects to come into contact with the support surface that could puncture, tear, or cut the cover.
- Do not allow sharp edges from the X-ray plate to come in contact with the support surface cover. The recommendation is you cover the X-ray plate with a pillow case or other device before placement under the patient. If damaged, remove the support surface cover from service immediately to prevent cross contamination.

#### To position the patient:

- 1. Max Inflate the support surface.
- 2. Position the patient in the center of the support surface, align the patient's head toward the head board (Figure 43 on page 58).
- 3. Check the patient frequently during Lateral Rotation for proper positioning and support surface inflation (Figure 44) on page 58 and Figure 45 on page 58).

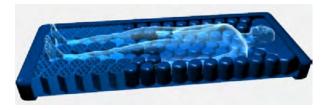


Figure 43: Center the patient









Figure 44: Correct patient positioning

Figure 45: Incorrect patient positioning

## Preparing bed positions for support surface functions

To prepare bed positions:

- 1. Raise all of the bed siderails.
- 2. Lower the bed height to the lowest practical position.
- 3. Lower the head section to the flat position or as low as possible.

## **Initializing Pressure Redistribution**

Pressure Redistribution provides firmness for the patient based on the weight range and firmness settings.

To initialize Pressure Redistribution:

Tap Pressure Redistribution on the Pressure Redistribution screen (Figure 46 on page 59).



Figure 46: Pressure redistribution

## Selecting patient weight range

Tap Surface Settings on the Pressure Redistribution screen (A) (Figure 47 on page 60).



Figure 47: Pressure redistribution screen

Tap the up and down arrows to select the desired weight range (Figure 48 on page 60).
Note: A healthcare professional should determine the use of the Isolibrium support surface and therapies outside of the therapeutic weight range of 50 lb to 350 lb (22.7 kg to 158.7 kg).



Figure 48: Surface setting screen

2. Confirm patient weight range.

#### Notes

- The patient weight range default is based on the weight that is measured by InTouch scale when patient is stable.
- Patient weight is presented in pounds or kilograms based on the InTouch selection.
- The patient weight range selection is between 50 lb and 460 lb (22.7 kg and 208.7 kg) and is used as input for Pressure Redistribution.

## Selecting to retain or clear therapy history

Tap Retain to keep therapy history (see Figure 48 on page 60).

Tap Clear to delete therapy history (see Figure 48 on page 60).

Note: Retain therapy history is the default setting.

## **Changing Pressure Redistribution**

The default **Medium** setting is set from the Selected Weight Range.

To change pressure redistribution:

Tap Soft to decrease the firmness setting (Figure 49 on page 61).

Tap Firm to increase the firmness setting (Figure 49 on page 61).



Figure 49: Pressure redistribution

Note: Always confirm patient weight (see Selecting patient weight range on page 60).

#### **Preparing for Lateral Rotation**

Lateral Rotation allows the operator to rotate the patient from left to right by increasing or decreasing the rotation levels and hold times.

#### WARNING

- Always make sure that the tubing and wiring that is connected to the patient is long enough, stable, and secure during Lateral Rotation or Turn Assist.
- Do not extubate or intubate patients during Lateral Rotation or Turn Assist. The functions could interfere with the performance of the ancillary devices.
- Always raise all of the InTouch bed siderails before beginning Turn Assist or Lateral Rotation.
- Do not zero the bed scales or weigh the patient with Lateral Rotation or Turn Assist active. Motion from the support surface functions may adversely affect the scale system performance.
- Do not arm bed exit with Lateral Rotation or Turn Assist active. The patient motion and position that results from the support surface may adversely affect bed exit system performance.
- Always deflate the Isolibrium support surface before beginning CPR.
- Always center the patient on the support surface. Align the patient's head toward the headboard before starting functions. Check the patient frequently to make sure that you maintain the proper positioning.

#### To prepare for lateral rotation:

- Position the patient in the center of the support surface.
- 2. Raise all of the bed siderails.
- Lower the bed height to the lowest practical position.
- 4. Set the head of bed angle between -5° to 60°.

#### Notes

- A healthcare professional should determine the use of the Isolibrium support surface and therapies outside of the therapeutic weight range of 50 lb to 350 lb (22.7 kg to 158.7 kg).
- Lateral Rotation will not function if the siderails are down. However, Pressure Redistribution, Max Inflate and Turn Assist will still activate without the siderails up. If a siderail is lowered or unlocked during Lateral Rotation, the function will automatically stop.

#### **Starting Lateral Rotation**

Note: The first Lateral Rotation cycle performs at a reduced angle before performing a full rotation.

To start lateral rotation:

- Tap Lateral Rotation on the Support Surface screen.
- 2. Adjust the Lateral Rotation selections as needed (Figure 50 on page 63):
  - a. Tap the up and down arrows to increase or decrease the rotation level for patient left side or patient right side.



Figure 50: Lateral rotation screen

#### **Notes**

- You can only change the Lateral Rotation settings when the therapy stops. You cannot change the Lateral Rotation settings when the therapy is active or paused.
- When you do not set a rotation level for the patient left side or patient right side, the hold times become disabled and change to zero.
- When you do not set a rotation level for the patient left and patient right side, a notification appears (51 Notification left and right rotation level not seton page 63).



Figure 51: Notification — left and right rotation level not set

- b. Tap the up and down arrows to increase or decrease the hold times for patient left, patient right, or surface flat position.
- 3. Raise all of the siderails to allow Lateral Rotation to start.

**Note:** If you do not raise all of the siderails, a notification will display (Figure 52 on page 64). Tap **OK** to return to the previous screen.

## **Starting Lateral Rotation (Continued)**



Figure 52: Notification — siderails not raised

4. Set the head of bed (HOB) angle before starting Lateral Rotation to allow the function to start. You cannot start a full rotation with the HOB angle greater than 35°.

Limitations due to HOB angle	Rotation level
-5° < HOB ≤ 35°	Full and reduced
35° < HOB < 60°	Maximum allowed rotation level is reduced
HOB ≤ -5° or HOB ≥ 60°	Rotation not allowed

**Note:** If the HOB is not within the specified range, a notification appears (Figure 53 on page 64 and Figure 54 on page 64). Tap **OK** to return to the previous screen.



Figure 53: Notification HOB angle setting for any rotation



Figure 54: Notification HOB angle setting for full rotation

5. Tap Start to initiate.

## Starting a one-sided Lateral Rotation

To perform a one-sided Lateral Rotation:

- Tap Down one the side that you do not want to rotate.
   Note: When you do not set a rotation level for the patient left side or patient right side, the hold times become disabled and change to zero.
- 2. Tap **Up** on the opposite side to the desired angle (Figure 55 on page 65).
- 3. Set the desired hold time (Figure 55 on page 65).
- 4. Tap Start.



Figure 55: Starting a one-sided Lateral Rotation

#### **Pausing or stopping Lateral Rotation**

To pause lateral rotation, tap Pause (Figure 56 on page 65).

To resume lateral rotation for a paused state, tap Start (Figure 57 on page 65).

To stop lateral rotation at any time, tap Stop.



Figure 56: Lateral rotation screen



Figure 57: Lateral rotation paused

## **Pausing or stopping Lateral Rotation (Continued)**

#### Notes

- You can only change the Lateral Rotation settings when the therapy stops. You cannot change the Lateral Rotation settings when the therapy is active or paused.
- · Lateral Rotation will continue until you stop, pause the function, or reach the time limit of 100 hours.
- All therapy parameters are stored in the history until you clear the history (see Selecting to retain or clear therapy historyon page 61).

#### Changing head of bed angle during Lateral Rotation

If during full Lateral Rotation the HOB angle is increased to > 35°, the level of rotation is automatically reduced. A notification of change is displayed (Figure 58 on page 67). You have the following options:

To continue with lateral rotation at reduced rotation, tap **OK**.

To change back to full rotation:

- 1. Tap **OK**
- 2. Stop therapy
- 3. Lower the HOB to < 36°
- 4. Increase the rotation level back to full
- 5. Restart Lateral Rotation

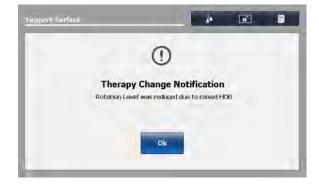


Figure 58: Notification for rotation level was reduced due to raised HOB

#### **Timing duration Lateral Rotation**

Lateral Rotation stops automatically when the duration of 100 hours is reached (Figure 59 on page 67). The operator is notified that Lateral Rotation has been cancelled (Figure 60 on page 67).

To return to the Lateral Rotation screen, tap OK.





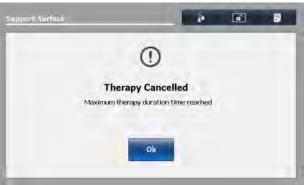


Figure 60: Lateral rotation duration time reached

#### Starting and stopping Turn Assist

#### **MARNING**

- Always make sure that the tubing and wiring that is connected to the patient is long enough, stable, and secure during Lateral Rotation or Turn Assist.
- Always raise all of the InTouch bed siderails before beginning Turn Assist or Lateral Rotation.
- Do not leave the patient unattended during Turn Assist.
- Do not zero the bed scales or weigh the patient with Lateral Rotation or Turn Assist active. Motion from the support surface functions may adversely affect the scale system performance.
- Do not arm bed exit with Lateral Rotation or Turn Assist active. The patient motion and position that results from the support surface may adversely affect bed exit system performance.

#### To start Turn Assist:

- Raise all of the bed siderails.
- 2. Center the patient on the support surface.
- 3. Tap Turn Assist (Figure 61 on page 68).



Figure 61: Turn assist screen

- 4. Select Hold Side by tapping turn the patient left or patient right.
- Select Hold Time by tapping one of the three options:
  - a. 15 sec
  - b. 30 min
  - c. 120 min

Note: Make sure that the head of bed (HOB) angle is less than or equal to 60° to avoid the therapy cannot be started notification (Figure 62 on page 69).

# **Starting and stopping Turn Assist (Continued)**



Figure 62: Therapy cannot be started

6. Tap Start to begin Turn Assist and hold time selected.

**Note:** Tap X to cancel Turn Assist and return to the Turn Assist selection screen or do nothing to allow inflation to complete. The Inflation in progress window is displayed (Figure 63 on page 69).





Figure 63: Turn assist inflation in progress

Figure 64: Turn assist time remaining

**Note:** When inflation is complete, the Turn Assist time remaining window is displayed and the selections are gray (Figure 64 on page 69). The timer will count down to zero and then the support surface deflates.

To stop Turn Assist, tap Stop.

# Starting and stopping Max Inflate

To start max inflate:

1. Tap Max Inflate (Figure 65 on page 70).



Figure 65: Max inflate screen

- 2. Select Hold Time by tapping one of the two options:
  - a. 10 min
  - b. 30 min



Figure 66: Max inflate hold time selected

Tap Start to begin Max Inflate and hold for the time selected.
 Note: The Inflation in progress window is displayed (Figure 67 on page 71).

# Starting and stopping Max Inflate (Continued)



Figure 67: Max Inflation in progress

#### **Notes**

- Tap X to cancel Max Inflate and return to the Max Inflate selection screen or do nothing to allow inflation to complete (67 Max Inflation in progresson page 71).
- When inflation is complete, the **Max Inflate** duration window is displayed and the selections are gray (68 Max inflate time remaining on page 71). The timer will count down to zero.



Figure 68: Max inflate time remaining

To stop max inflate, tap **Stop**.

### **Activating and resetting CPR**



#### **WARNING**

Always deflate the Isolibrium support surface before beginning CPR.

To activate CPR:

- 1. Options to activating CPR include:
  - a. Pull either the patient left (Figure 70 on page 72), patient right or both CPR straps that are located at the foot end of the support surface until it locks.
  - b. Depress the InTouch CPR release pedal, located toward the head end of the bed to deflate the support surface and flatten the InTouch bed frame.
  - Both of the CPR straps and the InTouch CPR release pedal can be activated (Figure 71 on page 72).
- 2. After you activate the CPR straps or CPR release pedal the screen displays (Figure 69 on page 72).



Figure 69: CPR Activated — Surface is deflating

3. Tap OK to confirm. The screen displays CPR Activated until you reset CPR (Figure 70 on page 72 and Figure 71 on page 72).



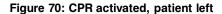




Figure 71: CPR activated, both straps and pedal

To reset the CPR straps, pull down on the CPR straps until they snap back into their fully seated position.

To reset the InTouch CPR release pedal, tap OK (Figure 71 on page 72).

# **Cancelling functions**

The actions listed below will cancel a current function (Lateral Rotation, Turn Assist, or Max Inflate) and display the cancellation confirmation notice (Figure 72 on page 73).

- 1. You select a new function
- 2. You select Pressure Redistribution and change the firmness setting
- 3. You select Pressure Redistribution and change the patient weight range



Figure 72: Cancellation confirmation

Note: If you choose not to cancel the current function, tap X.

### **Locking support surface functions**

To lock all support surface functions:

Tap Lock which is located at the top of the Support Surface display (Figure 73 on page 73).



Figure 73: Locked

Note: Active lock is orange.

### Unlocking support surface functions

To unlock all of the support surface functions, tap **Lock** which is located at the top of the **Support Surface** display (Figure 74 on page 73).



Figure 74: Unlocked

Note: Inactive lock is white.

### Turning Low Air Loss (LAL) on or off

To turn LAL on, tap LAL at the top of the Support Surface display (Figure 75 on page 74).



Figure 75: Low Air Loss On

To turn LAL off, tap LAL at the top of the Support Surface display (Figure 76 on page 74).



Figure 76: Low Air Loss Off

#### Notes

- · Active LAL is orange. Inactive LAL is white.
- The LAL status is ON by default.

### Viewing and clearing history

The **Therapy History** screen provides details about the therapies that were performed for a patient. This information resets when you tap **New Patient** (see Preparing Isolibrium for a new patient on page 57) or **Clear History** (see Figure 78 on page 74).

To view therapy history, tap **Therapy History** (see Figure 77 on page 74). Tap the up and down arrows to the far right of the screen to scroll through the report (see Figure 78 on page 74).



Figure 77: Therapy history button

To clear therapy history, tap Clear History.

To exit therapy history, tap X or tap Therapy History.



Figure 78: View history or clear history

# Support surface malfunctioning

If the support surface **Call Maintenance Quick Link** is active in the **InTouch** navigation bar (Figure 79 on page 75), tap the button to display the **Support Surface** error condition message.



Figure 79: Call Maintenance Quick Link Active for Isolibrium



Figure 80: Support surface malfunction

If the support surface malfunction message is displayed (Figure 80 on page 75), the operator may have limited access to the support surface functions depending upon the malfunction.

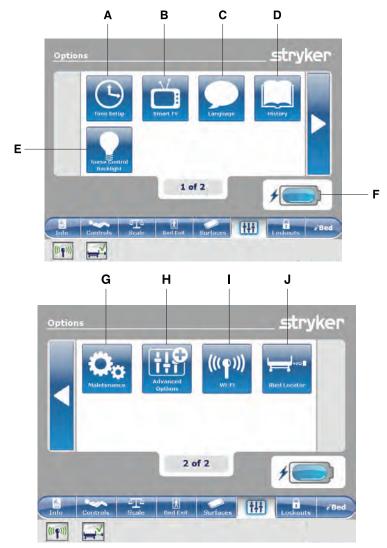


Figure 81: Remove from service

If the support surface malfunction message is displayed (Figure 81 on page 75):

- 1. Immediately remove the patient from the support surface.
- 2. Immediately remove the product from service.
- 3. Contact the appropriate maintenance personnel.

# Main menu: Options



	Name	Function
Α	Time Setup	Set up the time and date
В	Smart TV	Configure Smart TV
С	Language	Change the displayed language on the InTouch screen
D	History	View weight history, head of bed history, and bed height history
E	Nurse Control Backlight	Change the LED backlight intensity for the control panels
F	Battery	Indicates the charge left in the battery
G	Maintenance	View general status information for error codes and signal values
Н	Advanced Options	Activate or deactivate alarms for Bed Exit, <b>iBed</b> Awareness, and Protocol Reminders
I	Wi-Fi (Optional)	View the Wi-Fi connection status (Figure 95 on page 84)
J	iBed Locator (Optional)	View the iBed Locator connection status (Figure 98 on page 85)

# Setting the time and date

To set the time or date:

Tap Time Setup (see Main menu: Options on page 76).

To increase the value, tap +.

To decrease the value, tap -.

To accept the changes, tap **Accept** (Figure 82 on page 77).

To cancel the request, tap **Cancel** (Figure 82 on page 77 ).

#### Notes

- The request is cancelled if the bed goes into auto shutoff.
- Time setup does not automatically adjust for daylight savings time.



Figure 82: Time setup

### **Configuring Smart TV (optional)**

Note: A smart TV board must be installed before configuring this option.

To configure smart TV:

Tap Smart TV (see Main menu: Options on page 76).

Tap the TV Configuration number that corresponds to the model of television (1-6) (Figure 83 on page 77).

To configure smart TV automatically, tap **Autoconfig** (Figure 83 on page 77).

To configure a digital TV automatically, tap **Auto Dig Vol** (Figure 83 on page 77).

To accept the changes, tap **Accept** (Figure 83 on page 77).

To cancel the request, tap **Cancel** (Figure 83 on page 77).

**Note:** The request is cancelled if the bed goes into auto shutoff.



Figure 83: Smart TV configuration

# Changing the displayed screen language

To change the displayed language on the **InTouch** touch screens:

Tap Language (see Main menu: Options on page 76).

Tap the desired language (Figure 84 on page 78).

**Note:** Options change from blue (deactivated) to green (activated) when tapped.

Tap Close (Figure 84 on page 78).



Figure 84: Language

### Viewing parameter history

The History option stores historical values for weight history of the scale, head of bed, and bed height.

To view the History options:

Tap **History** (see Main menu: Options on page 76).

To view weight history (Figure 27 on page 47), tap **Scale** (Figure 85 on page 79).

To return to the **Options** screen, tap **Close** (Figure 85 on page 79).

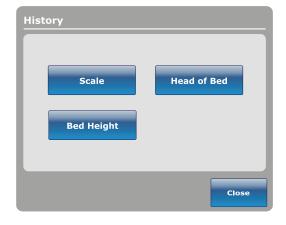


Figure 85: History

Head of Bed history provides values for the date, time, and duration a specific angle was set.

To view head of bed history, tap **Head of Bed** (Figure 85 on page 79).



Figure 86: Head of Bed

Angle History provides values for specific angles and how long the angle was held within the last 12 to 24 hours.

**Note:** The maximum time frame for an angled position history is 30 days.

To view angle history, tap **Angle History** (Figure 86 on page 79).

To reset the stored angle histories, tap **Reset** (Figure 87 on page 79).

To return to the **History** screen, tap **Close** (Figure 87 on page 79).



Figure 87: Angle History

# Viewing parameter history (Continued)

Bed Height history provides values for the date, time, and duration a specific bed height was set.

To view bed height history, tap **Bed Height** (Figure 85 on page 79).

To return to the **History** screen, tap **Close** (Figure 88 on page 80).

Height History provides values for specific heights and how long the height was held within the last 12 to 24 hours.

**Note:** The maximum time frame for a bed height history is 30 days.

To view height history, tap **Height History** (Figure 88 on page 80).

To view Low height history, tap Low height history (Figure 89 on page 80).

To reset the stored height histories, tap **Reset** (Figure 89 on page 80).

To return to the **History** screen, tap **Close** (Figure 89 on page 80).



Figure 88: Bed Height



Figure 89: Height History

# Changing the control panel LED backlight intensity

The nurse control backlight changes the LED backlight intensity for all control panels (motion control panel, brake control panel, footboard control panel, and head end control panel (optional)).

Five settings are available for the control panel LED intensity (from left to right):

- Setting one: Off no LED backlight appears when you push a control panel button
- Setting two: nurse call indicator only only the nurse call LED backlight illuminates (inside siderails)
- · Setting three: low LED intensity for control panels
- · Setting four: medium LED intensity for control panels
- Setting five: high LED intensity for control panels

To change the intensity of the LED backlight:

- Tap Nurse Control Backlight (Main menu: Options on page 76).
- 2. Tap the left or right arrow (Figure 90 on page 81).
- 3. To save the LED intensity setting, tap **Close** (Figure 90 on page 81).



Figure 90: Nurse control LED intensity

### Viewing general maintenance status information

The **Maintenance** menu contains general status information for technicians and maintenance personnel to help troubleshoot **InTouch**. To view the full diagnostics menu or calibration information, see the **InTouch** maintenance manual.

To access the maintenance menu, tap **Maintenance** (see Main menu: Options on page 76).

Error Codes: Displays the current active errors and the error log (Figure 92 on page 82). See the InTouch maintenance manual for the definition of the error codes.

**Signal Values:** Lists all the sensors and their current signal values (Figure 93 on page 82).

For more detailed information about **Boards**, **Buttons Pressed**, **Bed Information**, and **Input States**, see the **InTouch** maintenance manual.

To return to the **Options** screen, tap **Close** (Figure 91 on page 82).

To return to the Maintenance screen, tap Back.

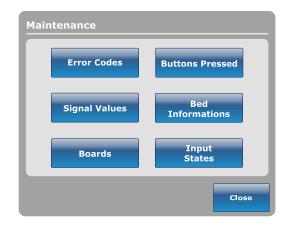


Figure 91: Maintenance





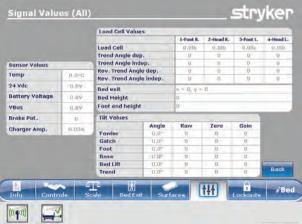


Figure 93: Signal Values

### Viewing advanced alarm options

Advanced options allows you to activate or deactivate alarms for Bed Exit, iBed Awareness, and Protocol Reminders.

To access the advanced options, tap **Advanced Options** (see Main menu: Options on page 76).

To activate an alarm, tap the alarm to activate it.

**Note:** Options change from blue (deactivated) to green (activated) when tapped.

**Bed Exit:** Always activated. **InTouch** sends a signal through the nurse call system when a parameter condition is compromised.

**iBed Awareness: InTouch** sends a signal through the nurse call system when a parameter condition is compromised.

**Reminder: InTouch** sends a signal through the nurse call system when a parameter condition is compromised.

#### Notes

- Options that are not configured for your model are grayed out.
- If InTouch is equipped with the optional iAudio feature, voice alarms are available. Voice alarms replace the buzzer alarm and play through the inside siderail speakers.

To return to the **Options** main menu, tap **Back** (Figure 94 on page 83).



Figure 94: Advanced Options

### Viewing the Wi-Fi connection status (optional)

Note: iBed Wireless must be installed and configured in order to view this option.

To view the Wi-Fi connection status, tap **Wi-Fi** (see Main menu: Options on page 76) or tap the Wi-Fi connectivity icon at the bottom of the touch screen.

Wi-Fi ON displays the connection status of the wireless network.

To configure the Wi-Fi option, see the **InTouch** maintenance manual.

To return to the **Options** screen, tap **Back** (Figure 95 on page 84).



Figure 95: Wi-Fi Connection Status

### Resetting the Wi-Fi connection

When the Wi-Fi connection is lost and cannot reconnect to the network, you must reset the Wi-Fi connection.

To reset the Wi-Fi connection, tap **Reset** (Figure 96 on page 84).

#### Notes

- After you reset, InTouch reboots to the Patient Information screen (19 Patient informationon page 40).
- The settings for lockout controls, scale calibration data, bed exit, and iBed<sup>®</sup> Awareness are preserved when you reset the product.
- The settings for Isolibrium patient information and patient weight are preserved when you reset the product.
- The settings for Protocol Reminders are lost when you reset the product.

To cancel the request, tap **Cancel** (Figure 96 on page 84 ).

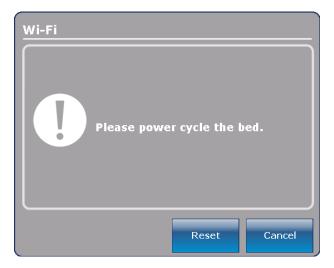


Figure 96: Resetting the Wi-Fi connection

### Viewing the iBed Locator connection status (optional)

Note: The iBed Locator must be installed and configured in order to view this option.

To view the *i*Bed Locator connection status, tap *i*Bed Locator (see Main menu: Options on page 76) or tap the *i*Bed Locator connectivity icon at the bottom of the touch screen.

Locator ID: Displays the iBed Locator ID.

**Battery Status:** Indicates the charge left in the *i*Bed Locator battery.

Note: Replace the iBed Locator batteries as necessary.

If the *i*Bed Locator is not connected, a red X appears next to the *i*Bed Locator connectivity icon, no Locator ID is displayed, and the Battery Status field displays Not Connected (Figure 97 on page 85).

To return to the **Options** screen, tap **Back** (Figure 97 on page 85).

If the *iBed* Locator is connected, a green check mark appears next to the *iBed* Locator connectivity icon, a valid Locator ID is displayed, and the **Battery Status** field displays **Good** or **Low**, depending on the battery charge (Figure 98 on page 85).

To return to the **Options** screen, tap **Back** (Figure 98 on page 85).



Figure 97: iBed Locator Information (not connected)

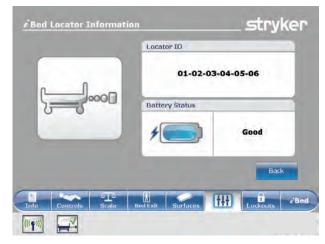
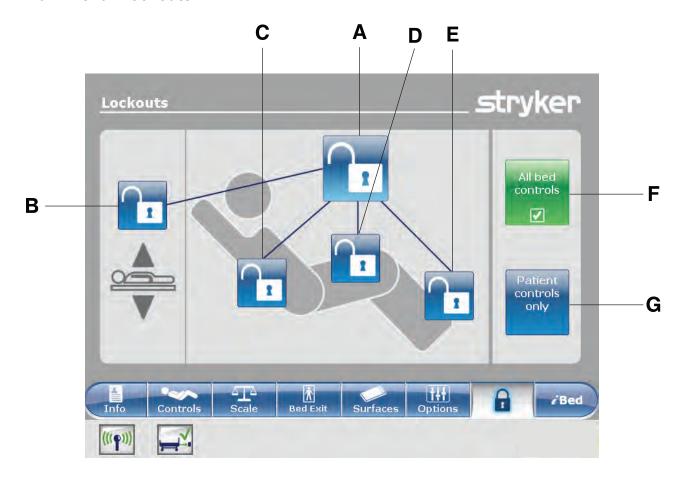


Figure 98: iBed Locator Information (connected)

# Main menu: Lockouts



	Name	Function
Α	Total lockout	Locks all motion controls
В	Bed height lock	Enables or disables the lock for the bed height
С	Fowler lock	Enables or disables the lock of the fowler section
D	Gatch lock	Enables or disables the lock of the gatch section
Е	Foot lock	Enables or disables the lock of the foot section
F	All bed controls	Locks all bed controls
G	Patient controls only	Locks all siderail patient controls



Always lock the control panel when you leave the patient unattended. Always lock the control panel when the patient's condition requires extra safety measures.

### **Enabling or disabling lockouts**

Lockouts can lock out product motion input from the motion control panel, footboard control panel, and head end control panel (optional). The brake control panel, Bed Exit, scale, and optional nurse call features are still available.

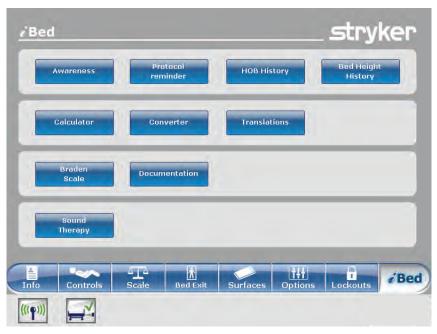
Note: Locks change from blue (deactivated) to amber (activated) when tapped.

- To perform a total lockout, tap (A) (Main menu: Lockouts on page 86).
- To lock the bed height, tap (B) (Main menu: Lockouts on page 86).
- To lock a specific litter section, tap the corresponding lock (C, D, or E) (Main menu: Lockouts on page 86).
- To lock all bed controls, tap (F) (Main menu: Lockouts on page 86). This allows all lockout options to appear.
- To lock all the patient controls, tap (G) (Main menu: Lockouts on page 86). This allows only the total lockout, fowler lock, and gatch lock options to appear.

#### **Notes**

- If the product is held in a specific position when a lock is enabled, the product will be locked in that position.
- The Locks Enabled LED illuminates amber on the footboard control panel whether one lock or a total lockout is set.
- · Lock parameters are saved when the product is unplugged, or during a power failure.
- Do not lock the control panel functions from the footboard if you must access the control panel functionality when you remove the footboard.

# Main menu: iBed (optional)



Name	Function
Awareness	Configure status and parameter conditions for the product
Protocol Reminder™	Set reminders for critical intervention practices
HOB History	Provides values for the date, time, and duration a specific angle was set (Figure 86 on page 79)
Bed Height History	Provides values for the date, time, and duration a specific bed height was set (Figure 88 on page 80)
Calculator	View the in-screen calculator (Figure 108 on page 95)
Converter	View the in-screen converter (Figure 109 on page 95)
Translations	View and listen to translations of clinical phrases to communicate with Limited English Proficiency (LEP) patients
Braden Scale	Take the Braden Scale for Predicting Pressure Sore Risk survey to assess a patient's risk of developing pressure ulcers
Documentation (optional)	View logged information from Bed Exit, protocol reminders, scale system, <b>iBed</b> Awareness, and <b>InTouch</b> bed system
Sound Therapy™ (optional)	Listen to or create playlists of previously loaded music selections or sounds of nature

#### Notes

- If your product is equipped with the *iBed* option, the *iBed* tab appears in the navigation bar.
- If your product is equipped with the Documentation option, the Documentation option appears in the *i*Bed main menu.
- If your product is equipped with the iAudio option, the iAudio option appears in the iBed main menu.

### Configuring iBed Awareness

When enabled, iBed Awareness helps to monitor InTouch's status and parameter conditions.



#### **WARNING**

- Do not use /Bed® Awareness as a lock indicator for siderails. /Bed® Awareness is only intended to detect the position of the siderails. It is not intended to replace patient monitoring protocol.
- The iBed® Awareness LED light bars are only intended to monitor the product status and parameter conditions. It is not intended to replace patient monitoring protocol.
- You must physically verify that the siderails are locked before arming *i*Bed® Awareness.



### **♠** CAUTION

- Make sure that you set the desired product parameters before enabling iBed® Awareness.
- Do not use accessories that cover the footboard and outside siderail LED light bars.
- Do not turn off the iBed® Awareness alarm. You will lose access to the event manager that displays the compromised parameter condition.

### Configuring iBed Awareness (Continued)

To enter the **Smart bed position** screen, tap **Awareness** (see Main menu: *i*Bed (optional) on page 88).

To monitor a parameter, tap the desired function to monitor (Figure 99 on page 90).

**Note:** Options change from blue (deactivated) to green (activated) when tapped.

To monitor the product's currently monitored functions, tap **Monitor current bed situation** (Figure 99 on page 90).

To stop monitoring a parameter, tap the activated parameter or tap **Deselect all**.

To set an alarm tone for *iBed* Awareness, tap the bell icon to access the alarm settings (Setting the alarm tones on page 52).

**Note:** If **InTouch** is equipped with the optional *i*Audio feature, voice alarms are available. Voice alarms replace the buzzer alarm and play through the inside siderail speakers.

To return to the *i*Bed screen, tap Back (Figure 99 on page 90).

If no parameter conditions are selected for *iBed*Awareness, the LED light bars on the outside siderails and footboard do not activate.

If parameter conditions are selected for *iBed* Awareness, the LED light bars on the outside siderails and footboard illuminate green.

If the parameter conditions selected for *iBed* Awareness are compromised, the LED light bars on the outside siderails and footboard flash amber, a sound alarm is triggered, the compromised parameter condition is highlighted amber (Figure 100 on page 90), and the **Event Manager** screen appears (Figure 101 on page 91).

To return to the *i*Bed screen, tap Back (Figure 100 on page 90).



Figure 99: iBed Awareness



Figure 100: iBed Awareness compromised

### Acknowledging the event manager

The **Event Manager** screen displays the compromised parameter condition when an alarm is triggered. To disarm the alarm, the compromised parameter condition must be acknowledged and resolved in the event manager.

To acknowledge a compromised parameter condition, return the condition back to its original state, or tap:

**Proceed to menu:** Displays the menu related to the compromised parameter condition.

**Close and Disarm:** Disarms the alarm, and the parameter condition is no longer monitored.

**Remind me in:** Disarms the alarm, and the alarm sounds after the selected time interval elapses.

**Note:** If you tap a time interval, the compromised parameter condition stays highlighted amber (Figure 100 on page 90).

After acknowledging and resolving the condition, the LED light bars illuminates green, the sound alarm stops, and the event manager window disappears.



Figure 101: Event Manager

### Setting a protocol reminder

Protocol reminders allow you to set patient reminders to make sure that critical intervention practices are performed consistently.

There are nine groups of interventions that can be set, including a custom reminder. There are up to nine reminders in each intervention group. You can set a one-time reminder or a repeating reminder.

View reminders list: View a list of reminders and the values for the date, time, and reminder that was set (Figure 106 on page 94).

View reminders log: View a list of reminders and the values for the date, time, and reminder that was logged (Figure 107 on page 94).

To set an alarm tone for a reminder, tap the bell icon to access the alarm settings (Setting the alarm tones on page 52).

**Note:** If **InTouch** is equipped with the optional *i*Audio feature, voice alarms are available. Voice alarms replace the buzzer alarm and play through the inside siderail speakers.

To return to the *i*Bed main menu, tap Back (Figure 102 on page 92).

To set a one-time reminder:

- Tap Protocol reminder (see Main menu: iBed (optional) on page 88).
- 2. Tap the intervention group (Figure 102 on page 92).
- 3. Tap the reminder to be set.
- 4. Set the desired date and time of the reminder (Figure 103 on page 92).
- 5. Tap Add to reminders list.

**Note:** The reminder is added to the **Reminders List** (Figure 106 on page 94).

Note: You can set up multiple reminders at a time.

To return to the **Reminder** screen, tap **Back** (Figure 103 on page 92).



Figure 102: Reminder interventions



Figure 103: Setting a one-time reminder

### Setting a protocol reminder (Continued)

To set a repeating reminder:

- Tap Protocol reminder (see Main menu: iBed (optional) on page 88).
- 2. Tap the intervention group (Figure 102 on page 92).
- 3. Tap the reminder to be set.
- 4. Set the desired date and time of the reminder (Figure 103 on page 92).
- 5. Tap Repeated Task (Figure 103 on page 92).
- Set the desired time interval for the repeated reminder (Figure 104 on page 93).

**Note: Repeat Every** can be set to minutes, hours, or days.

7. Tap Add to reminders list.

**Note:** The reminder is added to the **Reminders List** (Figure 106 on page 94).

Note: You can set up multiple repeating reminders.

To return to the **Reminder** screen, tap **Back** (Figure 104 on page 93).

The reminder alarm displays the set reminder when a reminder time interval is reached. To disarm the alarm, the reminder must be acknowledged and resolved in the reminder alarm (Figure 105 on page 93).

Have done / Will do the necessary action: Tap to acknowledge that the protocol reminder action has been performed on the patient. The reminder alarm is disarmed, and the reminder is logged (Figure 107 on page 94).

Did not / cannot do the necessary action: Tap to explain why the protocol reminder action cannot be performed on the patient. The reminder is not disarmed, and the reminder is logged (Figure 107 on page 94).

**Remind me in:** Disarms the alarm, and the alarm sounds after the selected time interval elapses.

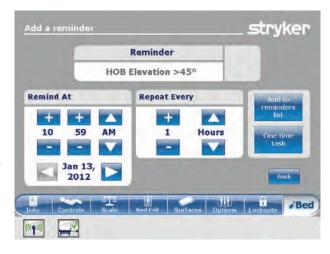


Figure 104: Setting a repeating reminder



Figure 105: Reminder alarm!

### Setting a protocol reminder (Continued)

The **Reminders List** screen lists reminders and the values for the date, time, and reminder that was set (Figure 106 on page 94).

To edit a time interval for a reminder, tap **Edit** (Figure 106 on page 94).

To remove the highlighted reminder from the reminders list, tap **Remove from reminders** (Figure 106 on page 94).

To remove all reminders from the reminders list, tap Remove all reminders (Figure 106 on page 94).

To return to the **Reminder** screen, tap **Back** (Figure 106 on page 94).

The **Reminders Log** screen lists reminders and the values for the date, time, and reminder that was logged (Figure 107 on page 94).

Logged reminders also include reminders that have alarmed on **InTouch** and alarms that were acknowledged (Figure 105 on page 93).

To clear the highlighted reminder from the reminders log, tap Clear log (Figure 107 on page 94).

To return to the **Reminder** screen, tap **Back** (Figure 107 on page 94).



Figure 106: Reminders List



Figure 107: Reminders Log

# Accessing the in-screen calculator

An in-screen calculator is available so you can perform calculations at the bedside.

To access the in-screen calculator, tap **Calculator** (see Main menu: *i*Bed (optional) on page 88).



Figure 108: Calculator

### Accessing the in-screen converter

The conversion calculator allows you to convert units of measure from the imperial system to the metric system.

To access the in-screen converter:

Tap **Calculator** (see Main menu: *i*Bed (optional) on page 88).

Tap Converter (Figure 108 on page 95).



Figure 109: Converter

### Reading and listening to translated clinical phrases

**InTouch** is equipped with translated and spoken clinical phrases to help improve communication with Limited English Proficiency (LEP) patients at the point of care. These simple questions and patient commands can reduce the risk of injury to non-English speaking patients.

To view translated clinical phrases:

Tap **Translations** (see Main menu: *i*Bed (optional) on page 88).

**Theme:** There are seven themes that the clinical phrases originate from.

To select a theme, tap the up and down arrows to scroll through the available themes in the **Theme** area (A) (Figure 110 on page 96).

**Note:** The theme that is currently selected is highlighted in gray (B) (Figure 110 on page 96).

The clinical phrase related to the **Theme** appears in English in the **Theme**: area (C) (Figure 110 on page 96).

To select a clinical phrase, tap the up and down arrows to scroll through the available phrases in the **Theme:** area (C).

**Note:** The clinical phrase that is currently selected is highlighted in gray (D) (Figure 110 on page 96).

**Language:** Several languages are available for readable and spoken translations of the clinical phrases.

To select a language, tap the up and down arrows to scroll through the available languages in the **Language** area (E) (Figure 110 on page 96).

**Note:** The language that is currently selected is highlighted in gray (F) (Figure 110 on page 96).

**Translation:** A corresponding written translation of the clinical phrase from the **Themes:** area (C) appears in the **Translation** area (G) (Figure 110 on page 96).

**Note:** The *i*Audio option must be equipped to hear the spoken translations.

- To decrease the volume of the spoken translation, tap -.
- To increase the volume of the spoken translation, tap
   +.
- To play the spoken translation, tap Play.
- To stop the spoken translation, tap Stop.
- To return to the iBed main menu, tap Back (Figure 110 on page 96).



Figure 110: Translations

### Taking the Braden Scale for Predicting Pressure Sore Risk survey

The Braden Scale for Predicting Pressure Sore Risk is a survey used to assess a patient's risk of developing pressure ulcers.

To take the Braden Scale for Predicting Pressure Sore Risk survey:

- Tap Braden scale (see Main menu: iBed (optional) on page 88).
- 2. Tap the corresponding value (1-4) in each category (Figure 111 on page 97).

**Note:** To view a complete description of a value, tap the magnifying glass icon (Figure 111 on page 97). Another window appears with the complete value description (Figure 112 on page 97).

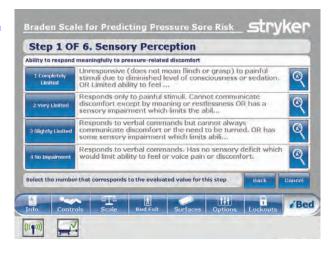


Figure 111: Braden scale for predicting pressure sore risk



Figure 112: Complete value information

### Taking the Braden Scale for Predicting Pressure Sore Risk survey (Continued)

After each category is completed, a result summary that contains a score for each category and total score (the braden score) is populated (Figure 113 on page 98).

**Note:** The total score is the score displayed in the Braden Scale section of the **Patient Information** screen (Figure 19 on page 40). To configure whether this score is displayed, see Configuring the visibility of patient information on page 42.



Figure 113: Braden scale result summary

### **Viewing logged information using Documentation (optional)**

The **InTouch** documentation feature logs all information and alarms generated from Bed Exit, protocol reminders, scale system, **iBed** Awareness, and the **InTouch** bed system.

The documentation feature logs the event, time of the event, and the details or actions taken when the event happened.

To view logged documentation, tap **Documentation** (see Main menu: iBed (optional) on page 88).

To view from a specific date, enter the year, month, and day, and then tap **View** (Figure 114 on page 98). **Note:** A notification message appears if an entered date contains no information.

To display logged information from a specific feature, tap the feature in the **Display** area (Figure 114 on page 98).

#### Notes

- The documentation feature only logs information from the last 90 days.
- Only one day of documentation is viewable at a time.
- Events are recorded from 00:00 to 23:59.
- Logs are displayed in chronological order from the most recent to the least recent.

To sort the logged documentation, tap **Sort** (Figure 114 on page 98).

To return to the *i*Bed screen, tap Back (Figure 114 on page 98).



Figure 114: Documentation

# Playing music using sound therapy (optional)

The **InTouch** sound therapy feature provides a choice of music selections or sounds of nature to help create a soothing environment.

To play a music selection or sound of nature:

- 1. Tap **Sound Therapy**(see Main menu: *i*Bed (optional) on page 88).
- 2. Tap the up and down arrows to select a genre (A) (Figure 115 on page 99).
- Tap the up and down arrows to scroll through the available songs in the Song(s) area (B) (Figure 115 on page 99).

Note: The song that is currently selected is highlighted in gray (C) (Figure 115 on page 99).

- Tap the up and down arrows to select a playback mode.
- Tap the up and down arrows to select a desired time duration.
- · To decrease the volume, tap -.
- · To increase the volume, tap +.
- · To play sound therapy, tap Play.
- · To stop sound therapy, tap Stop.

To return to the *i*Bed main menu, tap Back (Figure 115 on page 99).



Figure 115: Sound therapy

# Creating or editing a playlist using sound therapy (optional)

To create or edit a playlist:

Tap Edit play list (Figure 115 on page 99).

Tap the up and down arrows to select a genre (A) (Figure 116 on page 100).

Tap the up and down arrows to scroll through the available songs in the **Song(s)** area (B) (Figure 116 on page 100).

**Note:** The song that is currently selected is highlighted in gray (C) (Figure 116 on page 100).

Tap **Add** to add a song from the **Song(s)** area (B) to the **Play list** area (D) (Figure 116 on page 100).

Tap **Remove** to remove a song from the **Play list** area (D) to the **Song(s)** area (B) (Figure 116 on page 100).

Tap **Remove all** to remove all songs from the **Play list** area (D) to the **Song(s)** area (B) (Figure 116 on page 100).

**Note:** A music note icon appears at the bottom of the touch screen when music is playing (E) (Figure 116 on page 100).

To return to the **Sound therapy** screen, tap **Back** (Figure 116 on page 100).



Figure 116: Play list

# **Accessories**

These accessories may be available for use with your product. Confirm availability for your configuration or region. Call Stryker Customer Service: 1-800-327-0770.

Name	Part number
Bed extender	FA64234-XXX
Two-stage IV pole, permanent - Left	FA64221-XXX
Two-stage IV pole, permanent - Right	FA64238-XXX
Two-stage IV pole, dual head end permanently attached	FA64202-XXX
Line management clip	FA64210-XXX
Patient control pendant clip	FA64186-XXX
Monitor tray	FA64214-XXX
Upright oxygen bottle holder	FA64187-XXX
Right fit oxygen bottle holder	FA64203
Patient control pendant	FA64225-XXX through FA64228-XXX
Traction sleeve 4 in. x 1/2 in.	FA64215-XXX through FA64219-XXX
Traction sleeve 4 in. x 3/4 in.	
Traction sleeve 8 in. x 1/2 in.	
Traction sleeve 8 in. x 3/4 in.	
Traction sleeve 6-1/2 in. x 3/4 in.	
Wall saver	FA64208
X-ray cassette holder	FA64205-XXX

### Accessories

# Installing the optional bed extender

### **MARNING**

- Always securely set the footboard connector on the optional bed extender into the footboard connector slot at the foot end of the product.
- Do not pinch the power cord or cables when installing the optional bed extender.
- Do not sit on the optional bed extender. This may cause the product to tip.

The optional bed extender lengthens the product by six inches.

To install the optional bed extender:

- Strap the appropriate mattress extender cushion onto the optional bed extender (Figure 117 on page 102).
- 2. Remove the footboard (see Removing or replacing the footboard on page 30).
- 3. Insert the optional bed extender legs (A) and the footboard connector (B) onto the foot end of the product (Figure 118 on page 102).

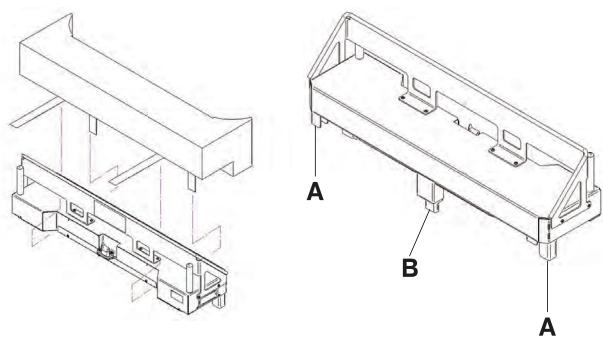


Figure 117: Strapping the mattress to the optional bed extender

Figure 118: Attaching the optional bed extender

# Installing the optional single two-stage IV pole

The optional single two-stage IV pole is permanently attached to the head end of the product. It is equipped with a telescopic pole that extends to provide a second height position. You can also fold and store the IV pole when not in use.

#### Tools required:

- Two washers
- Two bolts
- · 3/8 in. drive ratchet
- 1/2 in. socket

#### To install the optional IV pole:

- 1. Using a 3/8 in. drive ratchet and a 1/2 in. socket, install one washer (C) and one bolt (D) to secure the IV pole into the socket at the head end of the product (A) (Figure 119 on page 103).
- 2. Using a 3/8 in. drive ratchet and a 1/2 in. socket, install one washer (C) and one bolt (D) to secure the IV pole support into the socket at the head end of the product (B) (Figure 119 on page 103).

**Note:** The bolts are coated in Scotch Grip. You must replace the bolt with an identical equivalent if the bolt is removed during a service procedure.

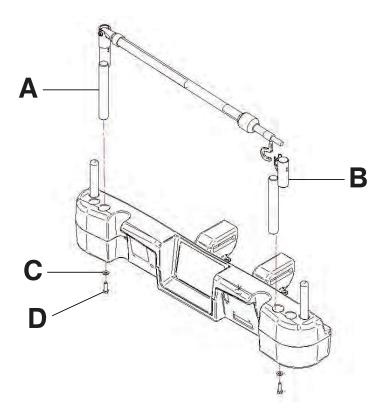


Figure 119: Single two stage IV pole (Left side shown)

# Operating the optional single two-stage IV pole

### **CAUTION**

- Do not hang IV bags that exceed 22 lb (10 kg) onto the IV pole.
- · Always make sure that the IV pole is at a low height to pass safely through door openings.
- · Do not use the IV pole as a push/pull device.

#### To operate the optional IV pole:

- 1. Lift and pivot the pole from the storage position.
- 2. Push the IV pole down until it locks into place.
- 3. To raise the height of the pole, pull up on the telescoping portion (A) until it locks into place at its fully raised position (Figure 120 on page 104).
- 4. Rotate the IV hangers to the desired position and hang the IV bags (B) (Figure 120 on page 104).
- 5. To lower the IV pole, turn the latch (C) until the telescoping portion lowers (Figure 120 on page 104).

#### To store the optional IV pole:

- 1. Lift up on the IV pole to release it from its receptacle.
- 2. Pivot the IV pole from its upward position.
- 3. Fold the IV pole down into the head end of the product.

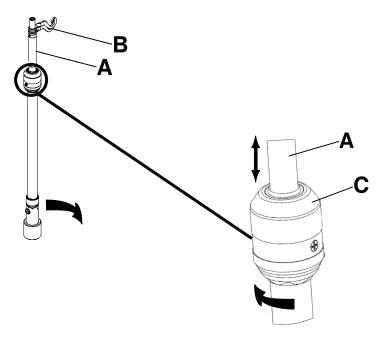


Figure 120: Operating the IV pole

# Installing the optional dual two-stage IV pole

The optional dual two-stage IV pole is permanently attached to the head end of the product. It is equipped with a telescopic pole that extends to provide a second height position. You can also fold and store the IV pole when not in use.

#### Tools required:

- Two washers
- Two bolts
- · 3/8 in. drive ratchet
- 1/2 in. socket

#### To install the optional IV pole:

- 1. Using a 3/8 in. drive ratchet and a 1/2 in. socket, install one washer (C) and one bolt (D) to secure the IV pole into the socket at the head end of the product (A) (Figure 121 on page 105).
- 2. Using a 3/8 in. drive ratchet and a 1/2 in. socket, install one washer (C) and one bolt (D) to secure the IV pole support into the socket at the head end of the product (B) (Figure 121 on page 105).

**Note:** The bolts are coated in Scotch Grip. You must replace the bolt with an identical equivalent if the bolt is removed during a service procedure.

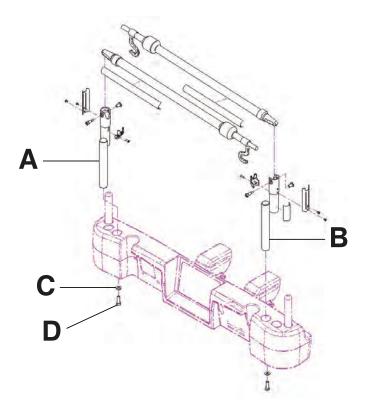


Figure 121: Dual two stage IV pole

# Operating the optional dual two-stage IV pole

# **↑** CAUTION

- Do not hang IV bags that exceed 22 lb (10 kg) onto the IV pole.
- · Always make sure that the IV pole is at a low height to pass safely through door openings.
- · Do not use the IV pole as a push/pull device.

#### To operate the optional IV pole:

- 1. Lift and pivot the pole from the storage position.
- 2. Push the IV pole down until it locks into place.
- 3. To raise the height of the pole, pull up on the telescoping portion (A) until it locks into place at its fully raised position (Figure 122 on page 106).
- 4. Rotate the IV hangers to the desired position and hang the IV bags (B) (Figure 122 on page 106).
- 5. To lower the IV pole, turn the latch (C) until the telescoping portion lowers (Figure 122 on page 106).

#### To store the optional IV pole:

- 1. Lift up on the IV pole to release it from its receptacle.
- 2. Pivot the IV pole from its upward position.
- 3. Fold the IV pole down into the head end of the product.

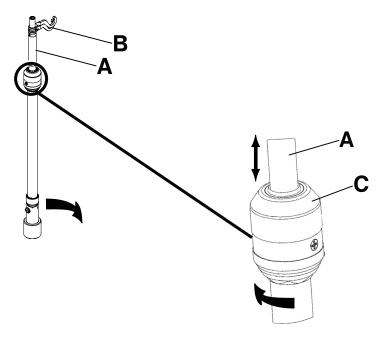


Figure 122: Operating the IV pole

## Installing the optional line management clip



## **WARNING**

Do not allow the optional line management clip to interfere with a mechanical or electronic mechanism of the product.



#### CAUTION

Always make sure that the clip is stable when installed.

The optional line management clip holds tubes that are hung around the product. The clip can hold four 1/2" tubes.

To install the optional line management clip:

- 1. Open the clip (A) (Figure 123 on page 107).
- 2. Secure the line management clip to the headboard, footboard, or siderail.

To insert a tube into the line management clip:

- 1. Raise the clip prong (B) (Figure 123 on page 107).
- 2. Insert the tube into the clip opening.
- 3. Release the clip prong to secure the tube into the line management clip.



## **WARNING**

- · Do not pinch tubes inside the clip.
- Do not clean the clip with a liquid solution.

# $\hat{\mathbb{A}}$

## **CAUTION**

- Do not inset tubes that are larger than 0.75 in. into the line management clip.
- · Always sterilize the clip after each use.
- Always make sure that the clip is stable when installed.

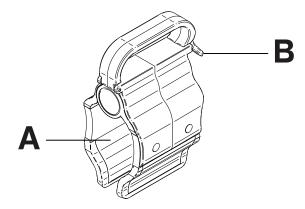


Figure 123: Line management clip

# Installing the optional patient control pendant clip

## **MARNING**

- Do not allow the optional line management clip to interfere with a mechanical or electronic mechanism of the product.
- Do not pinch tubes inside the clip.
- Do not clean the clip with a liquid solution.

# **♠** CAUTION

- Always sterilize the clip after each use.
- Always make sure that the clip is stable when installed.

The optional patient control pendant clip supports the patient control pendant in a stable location close to the patient.

To install the optional patient control pendant clip:

- Raise the clip (A) (Figure 124 on page 108).
- Secure the patient control pendant clip to a siderail.

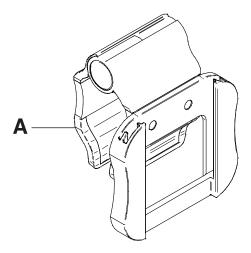


Figure 124: Patient control pendant clip

## Installing the optional monitor tray



### **WARNING**

Always adjust the scale or bed exit system if an option is added while the scale or bed exit system is armed.

The optional monitor tray supports a monitor at the foot end of the product.

Note: Make sure that the litter is flat before you install the optional monitor tray.

To install the optional monitor tray:

- 1. Install the bracket back (A) and the bracket (B) (Figure 125 on page 109) onto the end of the foot end foley bag hook at the foot end of the product (C and D) (Figure 126 on page 109).
- 2. Install the screw knob onto the bracket back (E) (Figure 127 on page 109).
- 3. Rotate the bracket over the socket at the foot end of the product.
- 4. Install the tray support pole into the bracket (F) and into the socket at the head end or foot end of the product (Figure 128 on page 109).

#### **Notes**

- Make sure that the tray support pole is anchored correctly into the hole of the assembled bracket and the foot end socket.
- · Foot end functionality stops when you insert equipment into the sockets at the foot end of the product.



Figure 125: Bracket and bracket back

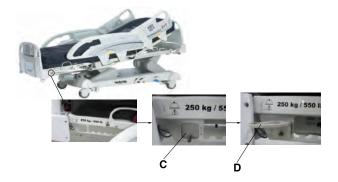


Figure 126: Installing the bracket back and bracket

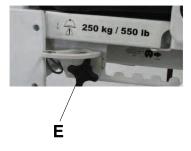


Figure 127: Installing the screw knob

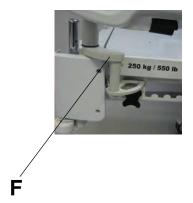


Figure 128: Installing the tray support

# Operating the optional monitor tray



## **MARNING**

- Do not place objects that exceed 40 lb (18 kg) onto the optional monitor tray.
- Do not exceed the 150 lb (68 kg) load capacity for the tray support pole.

#### To operate the optional monitor tray:

- 1. Pull down the tray support pole lock (G) (Figure 129 on page 110).
- 2. Swing the tray support pole out 90° (H) (Figure 130 on page 110).
- 3. Grasp the bottom of the monitor tray and flip it up onto the tray support pole (I) (Figure 131 on page 110).
- 4. Press the monitor tray into the tray support pole to secure the monitor tray.
- 5. Using the strap, strap the monitor to the monitor tray.

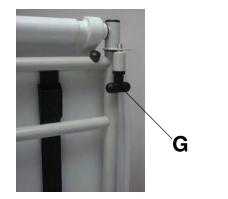




Figure 130: Swinging out the tray support pole

Figure 129: Tray support lock

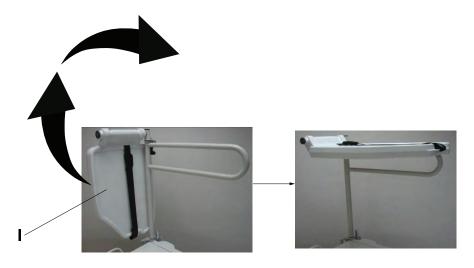


Figure 131: Flipping up the monitor tray

# Installing the optional upright oxygen bottle holder

## A

## **WARNING**

Always adjust the scale or bed exit system if an option is added while the scale or bed exit system is armed.

The optional upright oxygen bottle holder supports an oxygen bottle in a vertical position.

To install the optional upright oxygen bottle holder:

- 1. Insert the support bar into the socket at the head end or foot end of the product on either side (A) (Figure 132 on page 111).
  - Note: Foot end functionality stops when you insert equipment into the sockets at the foot end of the product.
- 2. Insert the security chain pin (B) through the support bar hole (Figure 132 on page 111) to secure the bottle holder to the product.

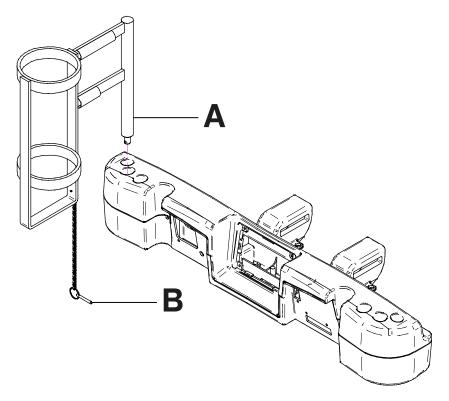


Figure 132: Upright oxygen bottle holder

## Installing the optional right fit oxygen bottle holder



## **MARNING**

Always adjust the scale or bed exit system if an option is added while the scale or bed exit system is armed.

The optional right fit oxygen bottle holder supports an oxygen bottle in a horizontal position on top of the headboard.

To install the optional right fit oxygen bottle holder:

- Place the oxygen bottle holder on top of the headboard (A) (Figure 133 on page 112).
- Screw on the oxygen bottle holder clasp onto the headboard (B) (Figure 133 on page 112) to secure the bottle holder to the product.
- 3. Route the bottom straps (C) through the headboard handles (Figure 133 on page 112).
- Attach the bottom straps to their respective fasteners.
- 5. Insert the oxygen bottle into the bottle holder.
- Place the oxygen bottle holder cover on top of the oxygen bottle (D) (Figure 133 on page 112). Note: You can orient the oxygen bottle holder cover opening to face the right or left side of the product.
- 7. Fasten the oxygen bottle holder cover straps together (E) (Figure 133 on page 112).

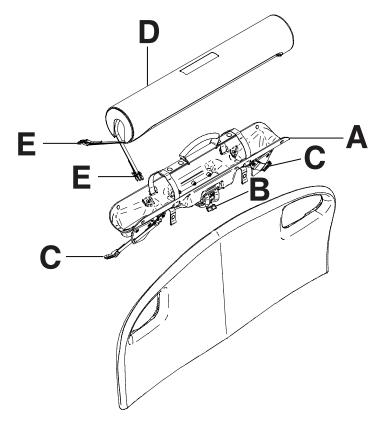


Figure 133: Right fit oxygen bottle holder

# Installing the optional patient control pendant



## **WARNING**

Always adjust the scale or bed exit system if an option is added while the scale or bed exit system is armed.

The optional patient control pendant allows the patient to control product motion and other InTouch features.

#### Tools required: None

To install the optional patient control pendant onto InTouch:

- 1. Slide the pendant into the molded pendant holder inside the foot end siderail handle (A) (Figure 134 on page 113).
- 2. Plug the pendant cable connector into the pendant connector that is located behind the foot end siderail (B) (Figure 134 on page 113).

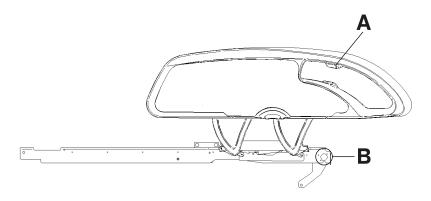
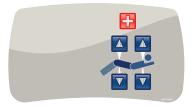


Figure 134: Installing the optional patient pendant

## Optional patient control pendants



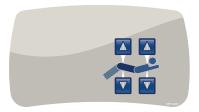
With motion control, nurse call, and smart TV (FA64225)



With motion control and nurse call (FA64226)



With motion control and smart TV (FA64227)



With motion control (FA64228)

# Installing the optional traction sleeves

The optional traction sleeves allow you to install traction equipment. Five different traction sizes are available. You can use these installation instructions to install all size configurations.

#### Tools required:

- Four washers
- Four bolts
- 7/16 in. combination wrench

#### To install the optional traction sleeves:

- Install the traction sleeves into the sockets at the head end and foot end of the product (A) (Figure 135 on page 114).
  - Note: Foot end functionality stops when you insert equipment into the sockets at the foot end of the product.
- 2. Using a 7/16 in. combination wrench, install one washer (B) and one bolt (C) to secure the traction sleeve in the socket (Figure 135 on page 114).
  - **Note:** The bolts are coated in Scotch Grip. You must replace the bolt with an identical equivalent if the bolt is removed during a service procedure.
- 3. Repeat step 2 to install the remaining traction sleeves.

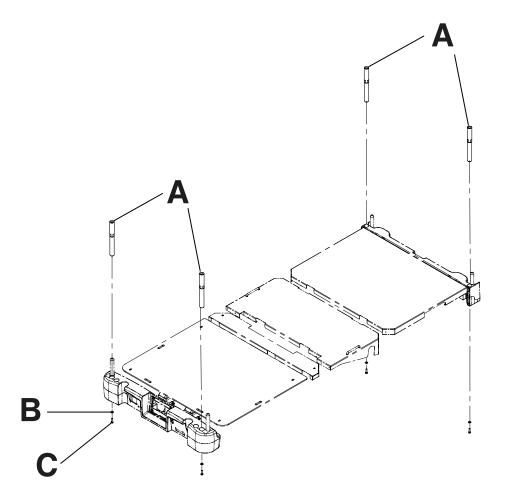


Figure 135: Traction sleeves

# Installing the optional wall saver

The optional wall saver helps mitigate damage to the wall and to the product by disconnecting the 37 pin connector when you move the product away from the wall without first unplugging the product.

#### Tools required: None

To install the optional wall saver:

- 1. Insert the pin end of the first connector (A) into the head end of the product (Figure 136 on page 115).
- 2. Screw the connector fasteners (B) in to secure the connector to the product (Figure 136 on page 115).
- Connect the back end of the second connector into the back end of the first connector (C) (Figure 136 on page 115).
- 4. Insert the pin end of the second connector (D) into the wall (Figure 136 on page 115).
- 5. Screw the connector fasteners (E) in to secure the connector to the wall (Figure 136 on page 115).

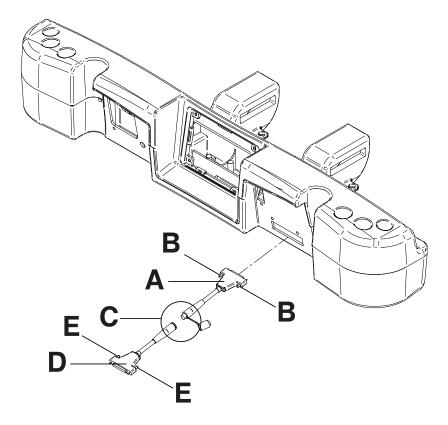


Figure 136: Wall saver connections

## Installing the optional X-ray cassette holder

The optional X-ray cassette holder attaches to the fowler to support X-ray cassettes. You can take X-rays while a patient is on the product. You can also adjust the cassette's position before taking an X-ray.

#### Tools required:

#2 Phillips screwdriver

To install the optional X-ray cassette holder:

- 1. Apply the brakes.
- 2. Raise the fowler section to its full height.
- 3. Turn the battery switch to the OFF (O) position.
- 4. Unplug the power cord from the wall outlet.
- 5. Using a #2 Phillips screwdriver, install two screws to secure the fastener (A) to the top of the fowler frame (Figure 137 on page 116).
- 6. Using a #2 Phillips screwdriver, install four screws to secure the two cassette holder pivot brackets (B) into the lower fowler section (Figure 137 on page 116).
- 7. Using a #2 Phillips screwdriver, install two screws and two spacers to secure the X-ray cassette holder (C) into the cassette holder pivot brackets (B) (Figure 137 on page 116).

Note: Always close the X-ray cassette holder when not in use.

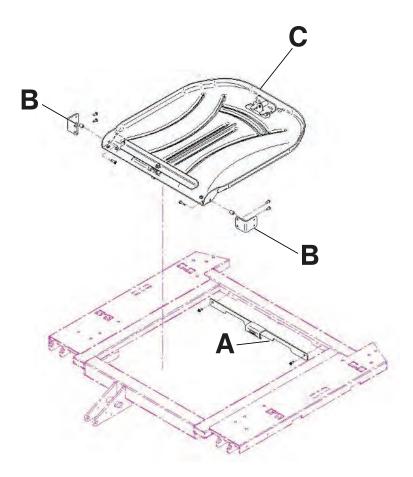


Figure 137: X-ray cassette holder

# Cleaning

# A

### **WARNING**

- Do not clean, service, or perform maintenance while the product is in use.
- Always unplug the power cord and turn the battery switch to the OFF (O) position before cleaning, servicing, or performing maintenance.
- Always immediately unplug the power cord from the wall outlet when large spills occur near the circuit boards, cables, and motors. Remove the patient from the product, clean up the fluid, and have service personnel completely inspect the product. Fluids can cause unpredictable operation and decreased functionality of any electrical product. Do not return the product to service until it is completely dry and has been thoroughly tested for safe operation.

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#### **CAUTION**

- Always unplug the product before cleaning or servicing.
- Always unplug the product, set the brakes, and place blocks under the litter frame for support when working under the product.

The recommended cleaners for this product's surfaces include the following:

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

Hand wash all surfaces of the product with warm water and mild detergent. Dry thoroughly.

Avoid oversaturation and make sure the product does not stay wet longer than the chemical manufacturer's guidelines for proper disinfecting.



#### **CAUTION**

- Always make sure that you wipe each product with clean water and thoroughly dry each product after cleaning.
   Some cleaning products are corrosive in nature and may cause damage to the product if you use them improperly. If you do not properly rinse and dry the product, a corrosive residue may be left on the surface of the product that could cause premature corrosion of critical components. Failure to follow these cleaning instructions may void your warranty.
- Do not steam clean, pressure wash, ultrasonically clean, or immerse any part of the product in water. Exposure to
  water may damage the internal electric parts. These methods of cleaning are not recommended and may void this
  product's warranty.
- Always clean Velcro® after each use. Saturate Velcro with disinfectant and allow the disinfectant to evaporate.
   Appropriate disinfectant for nylon Velcro should be determined by hospital protocol.

# Cleaning a support surface

To clean and disinfect a support surface, see the cleaning and disinfecting instructions in the support surface operations manual.

# **Preventive Maintenance**



## **WARNING**

Do not clean, service, or perform maintenance while the product is in use.

At a minimum, check all items listed during annual preventive maintenance for all Stryker Medical products. You may need to perform preventive maintenance checks more frequently based on your level of product usage.

Remove product from service before performing preventive maintenance. Preventive maintenance should only be performed by trained or certified personnel.

#### Notes

- Clean and disinfect the exterior of the support surface before inspection, if applicable.
- For Isolibrium preventive maintenance items, see the Isolibrium operations/maintenance manual.

Inspect the following items:

	. All welds and all fasteners are secure
	. Tubing or sheet metal for bends or breaks
	. Casters are free of debris
	Casters are secure and swivel properly
	Casters lock securely by depressing the brake pedal
	Manual and electric brakes apply and release properly
	Brake Not Set LED on the footboard and head end siderails when brakes are not engaged
	Locking steer caster engages and disengages properly (model 2131)
	. Steer caster latches properly
	Fowler operates properly
	Litter up/down operates properly
-	. Trend operates properly
	. IV pole is intact and operating properly (optional)
-	Support surface cover after each use
	Support surface cover for rips or cracks
	. Headboard, footboard, and siderail panels for cracks or splits
	. All covers are not damaged and are not producing sharp edges
	. Night light operating properly
	. CPR release operating properly
	. All siderail motion functionality
	. Siderails move, latch, and stow properly
	Siderail switches working properly ( <i>i</i> Bed Awareness option)
	. iBed Awareness light bars on footboard and siderails are working properly (iBed Awareness option)
	. All functions on head end siderails working properly (including LEDs)
	All functions on footboard working properly (buttons, touch screen display, and LEDs)
	Touch screen is accurately calibrated
	Product is accurately calibrated
	Scale and bed exit system operating properly
	Drive wheel to make sure it is operating properly (Zoom motorized drive) (Model 2141) (option)
	Motion release switches working properly (Zoom motorized drive) (Model 2141) (option)
	Head end <b>Zoom</b> handle functionality operates properly (Zoom motorized drive) (Model 2141) (option)
	Batteries for replacement (every two years) (use only QDF9188 for battery replacement)
	. Batteries for corrosion at the terminals, cracking, expanded or bulging at the sides, or can no longer maintain a full charge
	Nurse call functionality (optional)
	Lubricate where required
	Pendant for any physical damage

# **Preventive Maintenance**

Power cord not frayed				
Cables not worn or pinched				
All electrical connections tight				
All grounds secure to the frame				
Ground impedance not more than 100 m $\Omega$ (milliohms)				
Current leakage not more than 300 μA (microamps)				
Ground chains are clean, intact, and have at least two links touching the floor				
Enclosure is free from wear, tear, stresses and mechanical damage				
No rust or corrosion of parts				
Labels for legibility, proper adherence, and integrity				
iBed Wireless Module and IR Module are intact and footboard icons are displaying (iBed Wireless option)				
Product Serial Number:				
Completed by:	Date:			

# **Warranty**

## **Limited warranty**

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

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

## Warranty exclusion and damage limitations

The express warranty set forth herein is the only warranty applicable to the product. Any and all other warranties, whether express or implied, including any implied warranty of merchantability or fitness for a particular purpose are expressly excluded by Stryker. In no event shall Stryker be liable for incidental or consequential damages.

## 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 1-800-327-0770.

#### Return authorization

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

## **Damaged product**

ICC Regulations require that claims for damaged product must be made with within fifteen (15) days of receipt of the product. 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. Claims 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 product, 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 within thirty (30) days of receipt. Claims for any incomplete shipments 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. Contact your local Stryker Medical representative for additional information.

Manufactured For Stryker Medical 3800 E. Centre Avenue Portage, MI 49002 USA

