

Trauma Stretcher

REF Model 1037

stryker[®]

Operations Manual



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

Table of Contents





Symbols and Definitions	5
Symbols	5
Warning/Caution/Note Definition	5
Introduction	6
Product Description	6
Intended Use of Product.	6
Specifications	6
Contact Information	7
Serial Number Location	7
Summary of Safety Precautions	8
Setup Procedures.	10
Operation Guide.	11
Applying the Brake System.	11
Operating the Base Controls - Side Control	12
Adjusting Trendelenburg/Reverse Trendelenburg Positions - Side Control	13
Operating the Fifth Wheel	14
Operating the Big Wheel® Option	15
Operating the Siderails.	16
Operating the Push Handles.	17
Transferring a Patient with the Patient Transfer Board.	18
Using the Patient Transfer Board as an Armboard.	18
Operating the Pneumatic Fowler.	19
Using the Base Hood for Storage	20
Operating the Two-Stage Permanently Attached I.V. Pole	21
Operating the Three-Stage Permanently Attached I.V. Pole	22
Optional Accessories	23
Using the Defibrillator Tray	24
Using the Defibrillator Tray/Foot Extender/Chart Service	24
Using the Footboard/Chartholder	25
Using the I.V. Caddy	25
Using the Serving Tray	26
Using the Fowler X-Ray Cassette Holder.	27
Using the Lateral C-Spine X-Ray Cassette Holder.	28
Operating the Removable I.V. Pole	29
Installing the Siderail Pads	29
Installing the Upright Oxygen Bottle Holder.	29
Using the Restraint Straps	30

Table of Contents

- Cleaning [31](#)
 - Stretcher Cleaning [31](#)
 - Mattress Cleaning [32](#)
- Preventative Maintenance [34](#)
- Warranty [35](#)
 - Limited Warranty [35](#)
 - To Obtain Parts and Service [35](#)
 - Service Contract Coverage [35](#)
 - Service Contract Programs [36](#)
 - Return Authorization [36](#)
 - Damaged Merchandise [36](#)
 - International Warranty Clause [36](#)

Symbols and Definitions

SYMBOLS

	Warning/Caution: Consult accompanying documentation
	Safe Working Load indicates the sum of the patient, mattress, and accessory weight
	Do not store oxygen bottle
	Do not push/pull

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 equipment or other property. This includes special care necessary for the safe and effective use of the device and the care necessary to avoid damage to a device that may occur as a result of use or misuse.

NOTE

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

Introduction

This manual is designed to assist you with the operation of Stryker Model 1037 Trauma Stretcher. Read this manual thoroughly before using the equipment or beginning maintenance on it. To ensure safe operation of this equipment, it is recommended that methods and procedures be established for educating and training staff on the safe operation of this stretcher.


PRODUCT DESCRIPTION

The Stryker Model 1037 Trauma Stretcher is a general purpose patient transport and treatment stretcher.

INTENDED USE OF PRODUCT

The Stryker Medical Trauma Stretcher is a non-powered, wheeled device which consists of a platform mounted on a wheeled frame that is designed to support patients in a horizontal position. The device has siderails and has the option available to support the temporary or permanent placement of I.V. poles. A stretcher provides the operator a method of transporting patients within a healthcare facility. Some stretchers may also be used for minor procedures and short-term stay (treatment and recovery).

SPECIFICATIONS

	Safe Working Load Note: Safe Working Load indicates the sum of the patient, mattress, and accessory weight.	500 lb	226.8 kg.
Overall Stretcher Length	83"	210.8 cm	
Minimum/Maximum Stretcher Height	24.5"/37.5"	62.2 cm/95.3 cm	
Fowler Angle	0° to 90°		
Trendelenburg/Reverse Trendelenburg	+18°/-18°		
Minimum Under-Stretcher Clearance	6" nominal	15 cm	
	1.75" under the hydraulic cylinders and fifth wheel	4.5 cm	

Stryker reserves the right to change specifications without notice.

Introduction

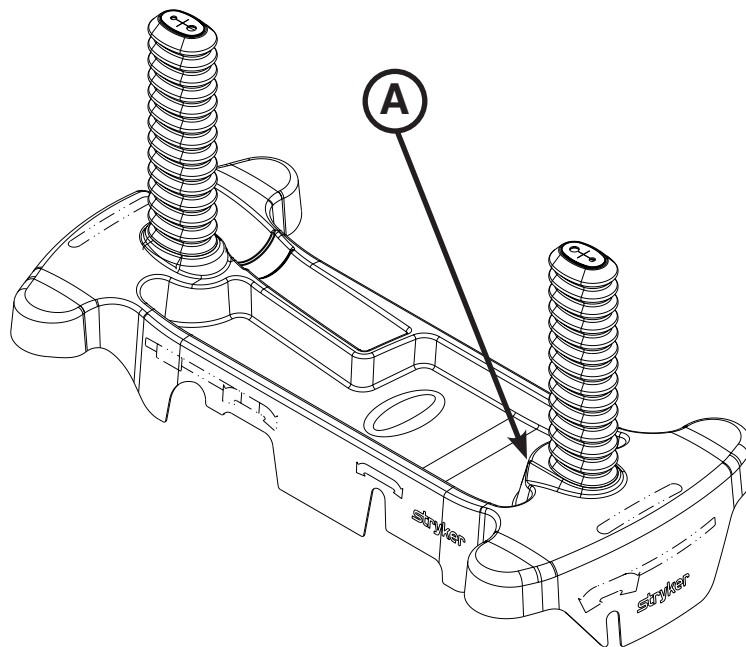
CONTACT INFORMATION

Contact Stryker Customer Service or Technical Support at: (800) 327-0770 or (269) 324-6500.

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

Please 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



Summary of Safety Precautions

Carefully read and strictly follow the warnings and cautions listed on this page.

Service only by qualified personnel. See the maintenance manual for additional information.

WARNING

- Always apply the brakes when a patient is getting on or off the stretcher. Push on the stretcher to ensure that the brakes are securely locked. Always engage the brakes unless the stretcher is being moved. Injury could result if the stretcher moves while a patient is getting on or off the stretcher.
 - Patients should be discouraged from sitting directly on the ends of the stretcher. Excessive weight could cause the litter surface to tip up, possibly causing patient injury.
 - Leave the stretcher height in the lowest position when the patient is left unattended. Leaving the stretcher height in a raised position could increase the chance of patient falls and injury.
 - Make sure that the brakes are completely released before attempting to move the unit. Attempting to move the unit with the brakes engaged could result in injury to the user and/or patient.
 - After raising the siderails, pull firmly on the siderail to ensure that it is securely locked into the fully raised position. Siderails are not intended to serve as a patient restraint device to keep patients from exiting the unit. Siderails are intended to keep a patient from inadvertently rolling off the unit. It is the responsibility of the attending medical personnel to determine the degree of restraint necessary to ensure that a patient will remain in place. Failure to utilize the siderails properly could result in patient injury.
 - When lowering the siderail to the collapsed position, keep extremities of patients and staff away from the siderail spindles or injury could occur.
 - During patient transfer, keep patient and operator extremities away from collapsed siderails or injury could occur.
 - When using the transfer board to transfer a patient from one patient support platform (for example, bed, stretcher, gurney, operating table) to another, always lock the brakes on both patient support platforms. Make sure that the transfer board is placed securely on the surface of the patient support platforms. The patient support platforms and surfaces must be at the same height before the patient is transferred.
 - Operation of the pneumatic fowler is a manual procedure. Use caution when raising the fowler while a patient is on the stretcher. Use proper lifting techniques and get additional assistance, if necessary. Failure to use proper lifting techniques could cause injury to the operator.
 - Keep hands/fingers clear of the area around the fowler release handle and the fowler frame when lowering the fowler. Injury could result if care is not taken when lowering the fowler.
 - If the stretcher is equipped with the optional foot end push handles, use caution while the foot extension/defibrillator tray is installed to avoid pinching your fingers.
 - To avoid the risk of injury to the patient or user or damage to the I.V. pole while transporting the stretcher, make sure that the I.V. caddy is securely tightened on the I.V. pole.
 - Physical restraints, even if properly secured, may result in serious harm to patients and caregivers. The use of restraint straps may potentially cause entanglement, entrapment, physical injury, and/or death. Caution must be used in affixing restraint straps to avoid potential injury to both patients and caregivers.
 - Restraint straps and/or devices must be attached only at the identified attachment points of the unit. Failure to do so may result in patient or caregiver injury. Do not attach restraint straps to the siderail.
 - This unit accommodates the use of ankle, chest, wrist, and body restraints. The use of restraint straps is regulated by state and federal restrictions. Users, caregivers, and/or practitioners should refer to the applicable state and federal restrictions and the appropriate facility protocols before using any restraint strap and/or device.
-

Summary of Safety Precautions

CAUTION

- Do not modify this stretcher. Modifying the unit can cause unpredictable operation resulting in injury to the patient or operator. Modifying the unit will also void its warranty.
- To avoid damage, remove any equipment that may be in the way before raising or lowering the litter height.
- Do not raise the unit (hydraulics on base) with a patient lift under the stretcher.
- Do not engage the steer pedal when the Big Wheel is resting on a threshold or other raised area. The force required to engage the Big Wheel will be higher than normal, possibly causing damage.
- To avoid injury or damage to the equipment, do not allow the siderail to lower on its own.
- The push handles were designed for use while transporting the stretcher. Avoid using other parts of the stretcher as push/pull devices because damage could occur.
- When the transfer board is being used to transfer a patient, the support post must be in the stored (down) position. Damage to the support post will occur if it is pushed up against a stretcher, table, etc.
- The weight capacity of the base hood is 60 lb. Do not sit or stand on the base hood. Injury or damage to the equipment could occur.
- Do not step on the base hood.
- Do not use the cutout for the oxygen bottle holder on the base hood for the storage of oxygen bottles or patient belongings.
- To avoid damage, the weight of the I.V. bags should not exceed 40 lb.
- To avoid damage while transporting the stretcher, verify that the I.V. pole is at a low enough height to allow it to safely pass through door openings and under light fixtures.
- Do not use the I.V. pole as a push/pull device because equipment damage could occur.
- To avoid damage, the weight of the I.V. bags should not exceed 12 lb while the weight of any one item attached to each stage of the three-stage permanently attached I.V. pole should not exceed 9.3 lb.
- To avoid damage, do not put items weighing more than 30 lb on the defibrillator tray.
- Do not use the defibrillator tray as a push/pull device because equipment damage could occur.
- If the stretcher is equipped with the optional foot end I.V. pole, the I.V. pole must be in the raised position when the foot extension/defibrillator tray is installed. If the I.V. pole is not raised, the foot extension will not function properly and injury could occur.
- To avoid damage, do not put items weighing more than 30 lb on the defibrillator tray/foot extender/chart service..
- Do not use the defibrillator tray/foot extender/chart service as a push/pull device because equipment damage could occur.
- Do not use the footboard/chart holder as a push/pull device because equipment damage could occur.
- Always store the I.V. caddy when not in use to avoid damaging it when the unit is moved.
- To avoid damage, do not put items weighing more than 30 lb on the serving tray.
- Do not use the serving tray as a push/pull device because equipment damage could occur.
- To avoid damage, do not put items weighing more than 40 lb in the upright oxygen bottle holder.
- Do not use the upright oxygen bottle holder as a push/pull device because equipment damage could occur.
- Before returning the unit to service after cleaning, ensure that the unit is functioning properly by verifying that all labels are intact, raise/lower the stretcher height, brake/steer pedal locks properly in both positions, latch/unlatch the siderails, raise/lower the fowler and gatch, and check all components for proper lubrication.
- Some cleaning products are corrosive in nature and may cause damage to the product if used improperly. If the products suggested above are used to clean Stryker patient handling equipment, measures must be taken to ensure that the stretcher is wiped with a damp cloth soaked in clean water and thoroughly dried following cleaning. Failure to properly rinse and dry the stretcher will leave a corrosive residue on the surface of the stretcher, possibly causing premature corrosion of critical components. Failure to follow the above directions when using these types of cleaners may void this product's warranty.

NOTE

- Clean the base hood storage area regularly.
- The bottom of the brake pads should be cleaned regularly to prevent wax or floor remnant buildup.

[Return To Table of Contents](#)

Setup Procedures

Make sure that the unit is working properly before it is put into service. The following list will ensure that each part of the unit is checked.

1. Fully depress the brake pedal of the stretcher to set the four wheel brakes and verify that all four casters are locked ([page 11](#)).
2. Raise and lower the hydraulic lift system ([page 12](#)).
3. Raise the unit completely and activate the Trendelenburg function. Ensure that the head end lowers to the lowest position ([page 13](#)).
4. Raise the unit completely and activate the reverse Trendelenburg function. Ensure that the foot end lowers to the lowest position ([page 13](#)).
5. Activate the fifth wheel to ensure that it is operating properly ([page 14](#)) or activate the Big Wheel to ensure that it is operating properly ([page 15](#)).
6. Ensure that the siderails raise and lower smoothly and lock securely when fully raised ([page 16](#)).
7. Raise and lower the fowler (head end) ([page 19](#)).

 **CAUTION**

Do not modify this stretcher. Modifying the unit can cause unpredictable operation resulting in injury to the patient or operator. Modifying the unit will also void its warranty.

Operation Guide

APPLYING THE BRAKE SYSTEM

For user convenience, a brake/steer control pedal is located on both ends of the stretcher as shown in Figure 1.

WARNING

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

To engage the brakes on the foot end, push down on the brake (red) side of pedal (A).

To engage the brakes on the head end, push down on the brake (red) side of pedal (B).

To release the brakes on the foot end, push down on the steer (green) side of pedal (A).

To release the brakes on the head end, push down on the steer (green) side of pedal (B).

Note: Your stretcher may be equipped with optional side control brake and steer functions (C) in addition to the standard head end (A) and foot end (B) controls. The side control brakes operate the same as the head end and foot end brakes.

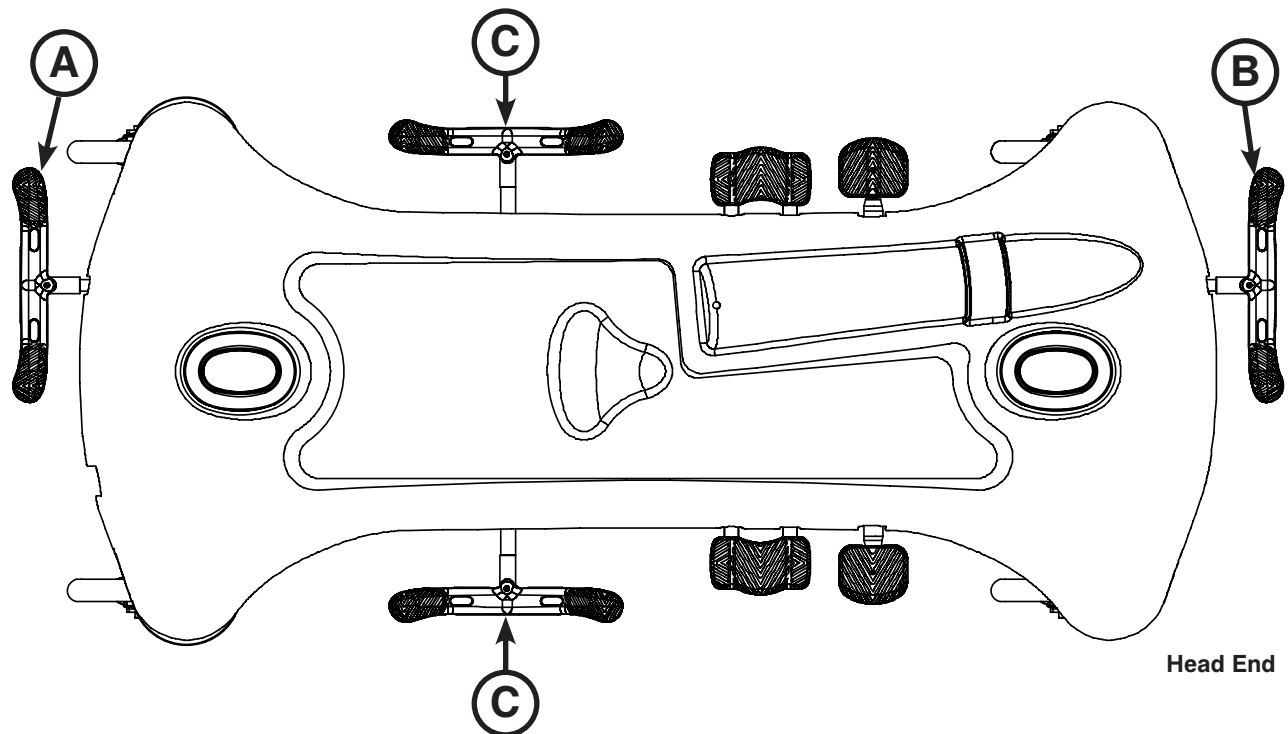
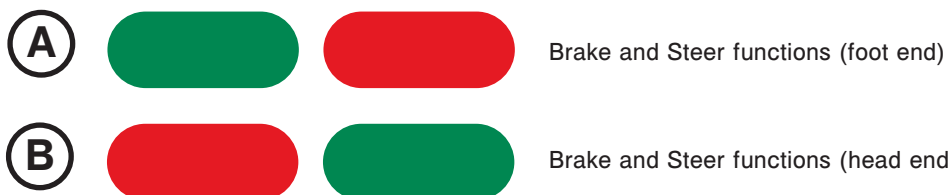


Figure 1: Brake System

Note: The bottom of the brake pads should be cleaned regularly to prevent wax or floor remnant buildup.



Operation Guide

OPERATING THE BASE CONTROLS - SIDE CONTROL

To operate the base controls, see Figure 2 to locate which pedals are used for what operation.

CAUTION

- To avoid damage, remove any equipment that may be in the way before raising or lowering the litter height.
- Do not raise the unit (hydraulics on base) with a patient lift under the stretcher.

To raise the litter height, pump pedal (A) repeatedly until the desired height is achieved.

To lower both ends of the litter together, depress the center of pedal (B).

To lower only the head end of the litter, depress the side of pedal (B) closest to the head end.

To lower only the foot end of the litter, depress the side of pedal (B) closest to the foot end.

WARNING

- Patients should be discouraged from sitting directly on the ends of the stretcher. Excessive weight could cause the litter surface to tip up, possibly causing patient injury.
- Leave the stretcher height in the lowest position when the patient is left unattended. Leaving the stretcher height in a raised position could increase the chance of patient falls and injury.

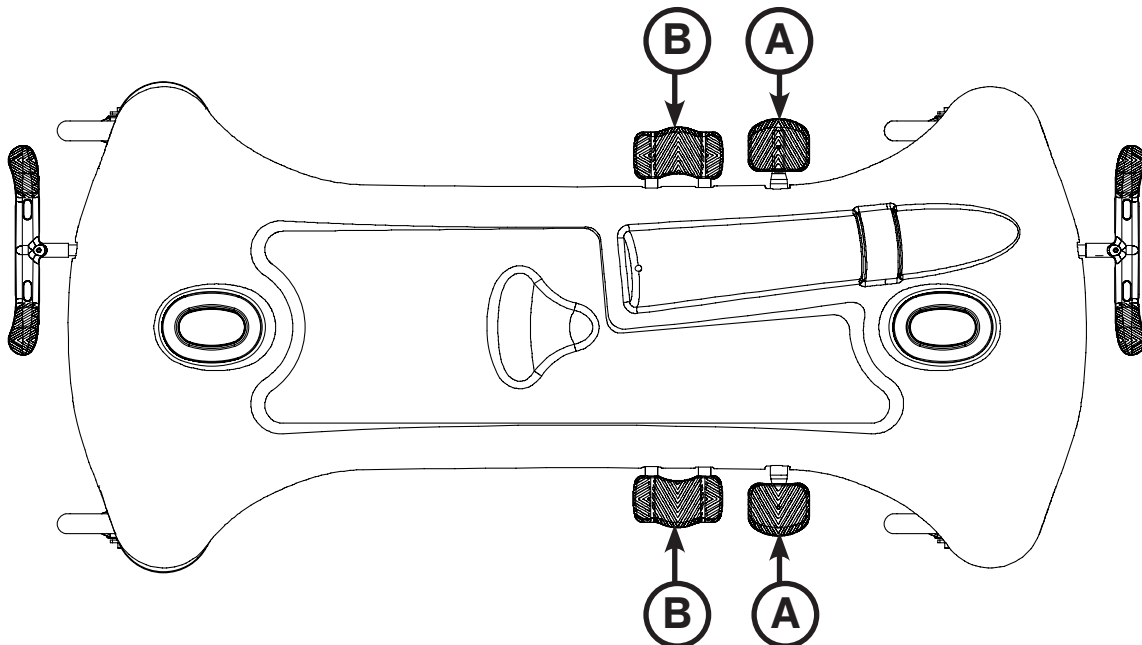
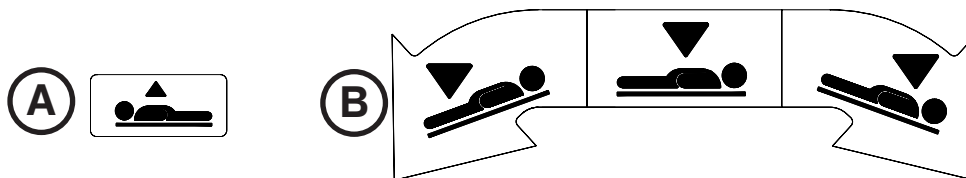


Figure 2: Stretcher Base Controls - Side Control



Operation Guide

ADJUSTING TRENDELENBURG/REVERSE TRENDELENBURG POSITIONS - SIDE CONTROL

Litter height must first be raised in order to achieve a Trendelenburg or reverse Trendelenburg position.

 **CAUTION**

- To avoid damage, remove any equipment that may be in the way before raising or lowering the litter height.
 - Do not raise the unit (hydraulics on base) with a patient lift under the stretcher.
-

For Trendelenburg positioning (head down), depress the side of pedal (B) closest to the head end (see Figure 2 on [page 12](#)).

For reverse Trendelenburg positioning (foot down), depress the side of pedal (B) closest to the foot end (see Figure 2 on [page 12](#)).

Note: The higher the litter is before pedal (B) is activated, the greater the Trendelenburg or reverse Trendelenburg angle will be. (Maximum Trendelenburg angle is +18°. Maximum reverse Trendelenburg angle is -18°.)

Operation Guide

OPERATING THE FIFTH WHEEL

 **WARNING**

Make sure that the brakes are completely released before attempting to move the unit. Attempting to move the unit with the brakes engaged could result in injury to the user and/or patient.

The fifth wheel guides the stretcher along a straight line during transport and pivots the stretcher around corners.

To operate the fifth wheel, push the steer (green) side of any brake/steer pedal to the lowest position (see Figure 1 on [page 11](#)).

To disengage the fifth wheel, push the brake (red) side of any brake/steer pedal to the neutral position (see Figure 1 on [page 11](#)).

Operation Guide

OPERATING THE BIG WHEEL® OPTION

WARNING

Make sure that the brakes are completely released before attempting to move the unit. Attempting to move the unit with the brakes engaged could result in injury to the user and/or patient.

When the brake/steer pedal is in the neutral or brake position, the Big Wheel is elevated approximately 3/4" and the stretcher rests on the four casters as shown in Figure 3.1.

Note: The two Big Wheels® do not pivot. The stretcher cannot be moved directly sideways with the Big Wheel activated.

With the pedal in the neutral position, the stretcher can be moved in any direction including sideways as shown in Figure 3.1.

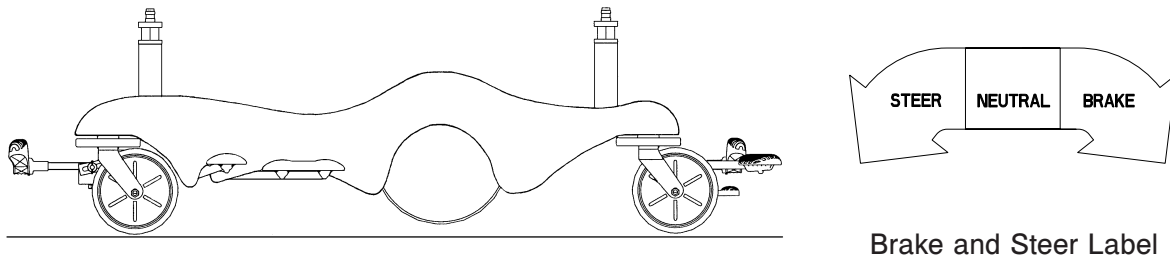


Figure 3.1: Neutral or Brake Position

When the brake/steer pedal is in the steer position, the foot end casters are elevated approximately 1/4" and the stretcher rests on the two head end casters and the two Big Wheels® as shown in Figure 3.2. This provides increased mobility and ease of steering the stretcher.

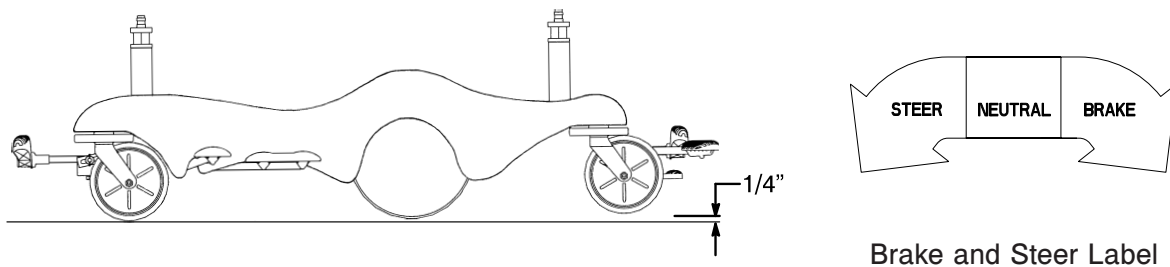


Figure 3.2: Steer Position

CAUTION

Do not engage the steer pedal when the Big Wheel is resting on a threshold or other raised area. The force required to engage the Big Wheel will be higher than normal, possibly causing damage.

[Return To Table of Contents](#)

Operation Guide

OPERATING THE SIDERAILS

Raising and lowering the siderails safely is a two-handed operation. Use one hand to hold and position the siderail and the other hand to operate the siderail latch.

To raise the siderails, pull up on the siderail (A) and raise it to the highest position until the latch (B) engages as shown in Figure 4.

WARNING

After raising the siderails, pull firmly on the siderail to ensure that it is securely locked into the fully raised position. Siderails are not intended to serve as a patient restraint device to keep patients from exiting the unit. Siderails are intended to keep a patient from inadvertently rolling off the unit. It is the responsibility of the attending medical personnel to determine the degree of restraint necessary to ensure that a patient will remain in place. Failure to utilize the siderails properly could result in patient injury.

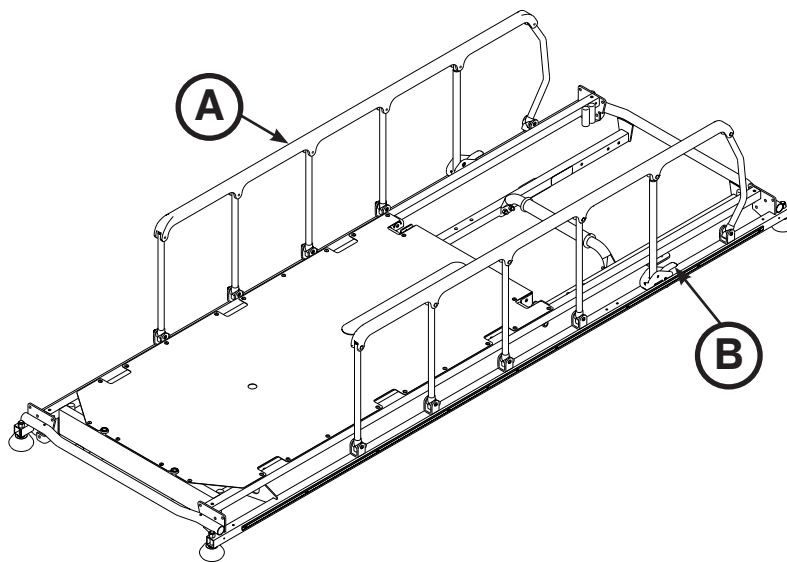


Figure 4: Siderails

To lower the siderails, pull up on the latch (B) and guide the siderail to the lowest position as shown in Figure 4.

WARNING

- When lowering the siderail to the collapsed position, keep extremities of patients and staff away from the siderail spindles or injury could occur.
 - During patient transfer, keep patient and operator extremities away from collapsed siderails or injury could occur.
-

CAUTION

To avoid injury or damage to the equipment, do not allow the siderail to lower on its own.

Make sure that the siderail latching mechanism is working properly at all times. If it is not, see the stretcher maintenance manual for "Siderail Latch Adjustment".

Operation Guide

OPERATING THE PUSH HANDLES

To use the push handles, pivot the handles up and push down until they are locked into position.

To store the push handles, lift the handles up and pivot them down to store in the handle rests.

 **CAUTION**

The push handles were designed for use while transporting the stretcher. Avoid using other parts of the stretcher as push/pull devices because damage could occur.

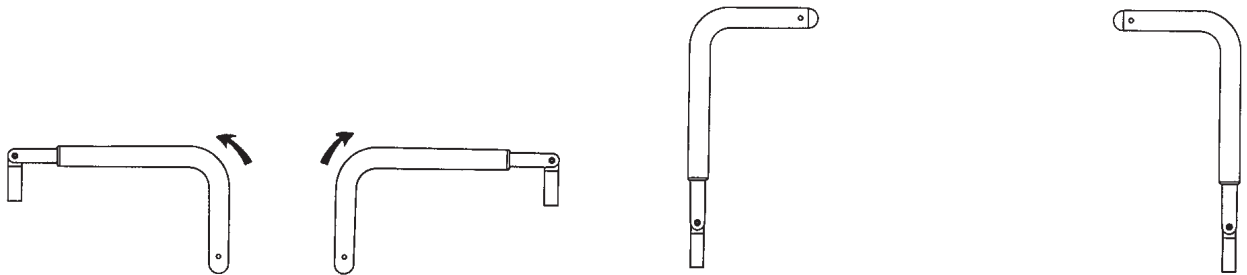


Figure 5: Push Handles

Operation Guide

TRANSFERRING A PATIENT WITH THE PATIENT TRANSFER BOARD

WARNING

When using the transfer board to transfer a patient from one patient support platform (for example, bed, stretcher, gurney, operating table) to another, always lock the brakes on both patient support platforms. Make sure that the transfer board is placed securely on the surface of the patient support platforms. The patient support platforms and surfaces must be at the same height before the patient is transferred.

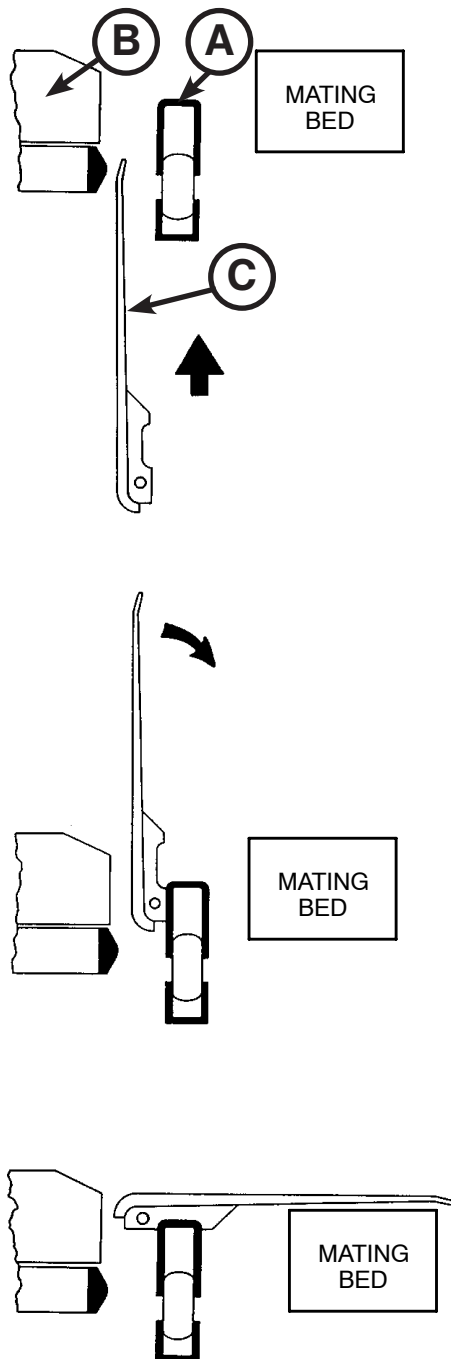


Figure 6.1: Transfer Board

To transfer a patient with the patient transfer board:

Note: The transfer board (C) is located between the siderail (A) and the mattress (B) as shown in Figure 6.1.

1. Lower the siderail (A) to the lowest position.
2. Raise the transfer board (C) from the bottom while lifting from the top.
3. When the transfer board is fully raised, it can be pivoted downward onto the surface of the mating bed or stretcher.

Note: Make sure that the brakes have been applied on both the stretcher and the mating bed or stretcher before beginning step 4.

4. Using a sheet, draw the patient onto the mating bed or stretcher.

USING THE PATIENT TRANSFER BOARD AS AN ARMBOARD

To use the transfer board as an armboard (Figure 6.2):

1. Raise the support post (D) to the highest position.
2. Raise the transfer board (C) from the bottom while lifting from the top.
3. When the transfer board is fully raised, it can be pivoted downward onto the support post (D).

CAUTION

When the transfer board is being used to transfer a patient, the support post (D) must be in the stored (down) position. Damage to the support post will occur if it is pushed up against a stretcher, table, etc.

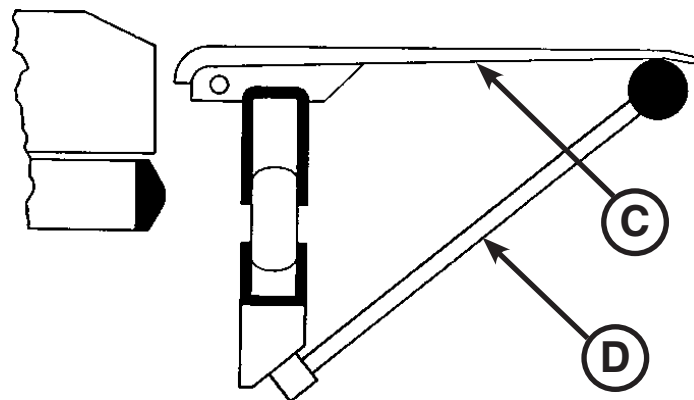


Figure 6.2: Transfer Board as an Armboard

Operation Guide

OPERATING THE PNEUMATIC FOWLER

To raise the fowler, squeeze the red fowler handle (A) for pneumatic assist until the fowler has reached the desired angle.

To lower the fowler, squeeze the red fowler handle (A) and push down until the fowler has reached the desired angle.

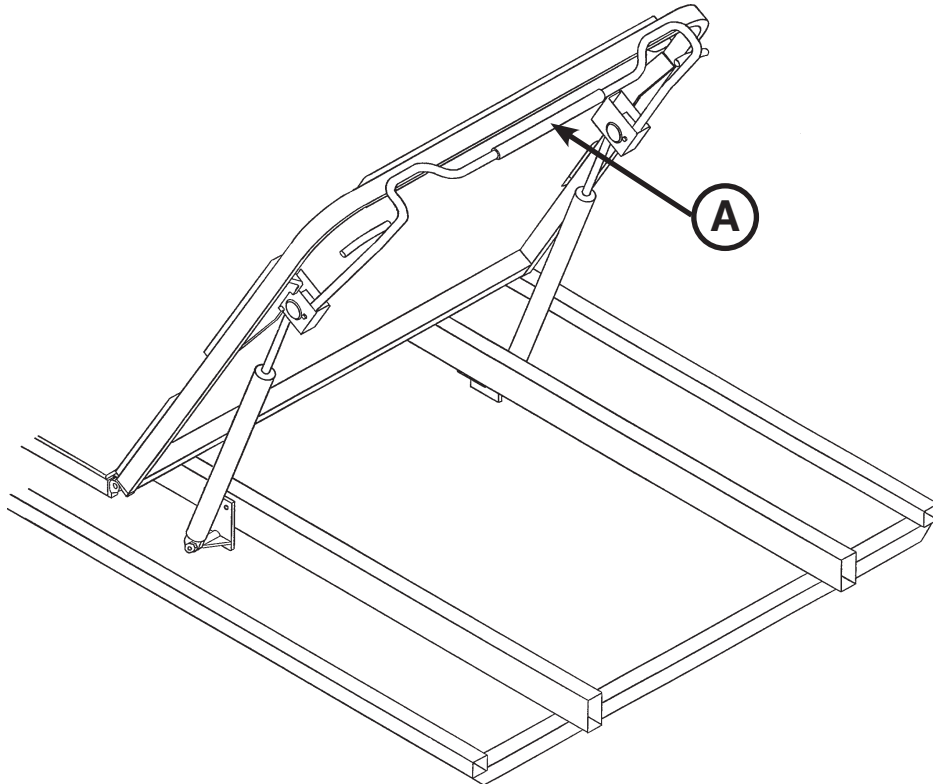


Figure 7: Pneumatic Fowler

 **WARNING**

- Operation of the pneumatic fowler is a manual procedure. Use caution when raising the fowler while a patient is on the stretcher. Use proper lifting techniques and get additional assistance, if necessary. Failure to use proper lifting techniques could cause injury to the operator.
- Keep hands/fingers clear of the area around the fowler release handle and the fowler frame when lowering the fowler. Injury could result if care is not taken when lowering the fowler.

If the pneumatic fowler is difficult to operate, see the stretcher maintenance manual for "Pneumatic Fowler Adjustment".

Operation Guide

USING THE BASE HOOD FOR STORAGE

You can store items in the base hood (A) as shown in Figure 8.

CAUTION

- The weight capacity of the base hood is 60 lb. Do not sit or stand on the base hood. Injury or damage to the equipment could occur.
 - Do not step on the base hood.
 - Do not use the cutout for the oxygen bottle holder on the base hood for the storage of oxygen bottles or patient belongings.
-

Note: Clean the base hood storage area regularly.

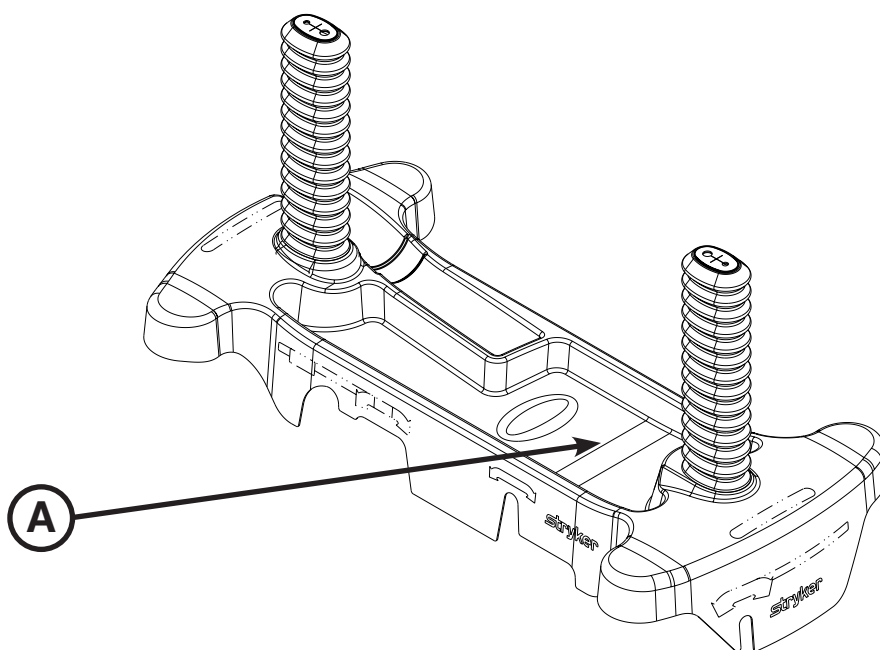


Figure 8: Base Hood Storage

Operation Guide

OPERATING THE TWO-STAGE PERMANENTLY ATTACHED I.V. POLE

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

To use the two-stage permanently attached I.V. pole:

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

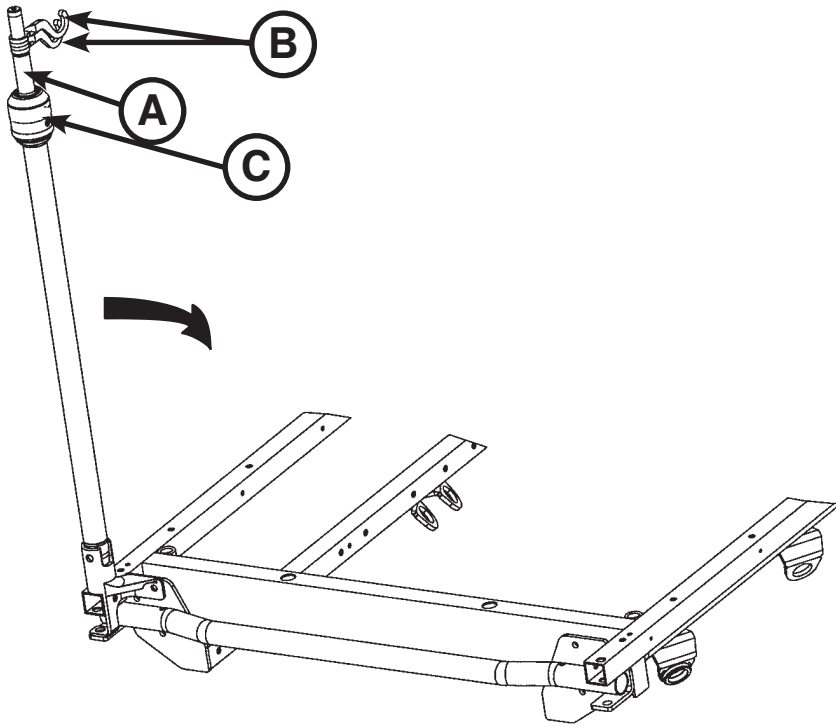


Figure 9.1: I.V. Pole

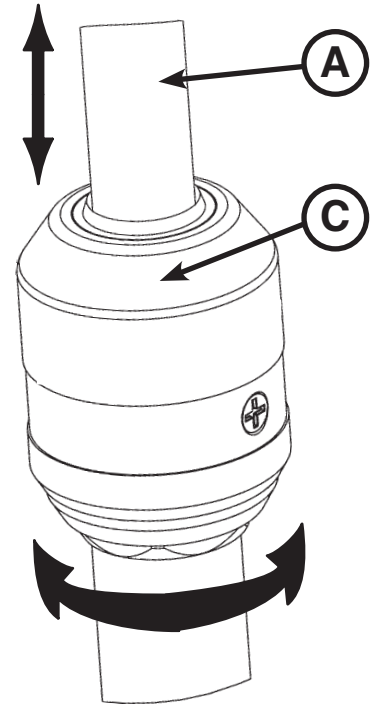


Figure 12.2: I.V. Pole Latch Detail

CAUTION

- To avoid damage, the weight of the I.V. bags should not exceed 40 lb.
- To avoid damage while transporting the stretcher, verify that the I.V. pole is at a low enough height to allow it to safely pass through door openings and under light fixtures.
- Do not use the I.V. pole as a push/pull device because equipment damage could occur.

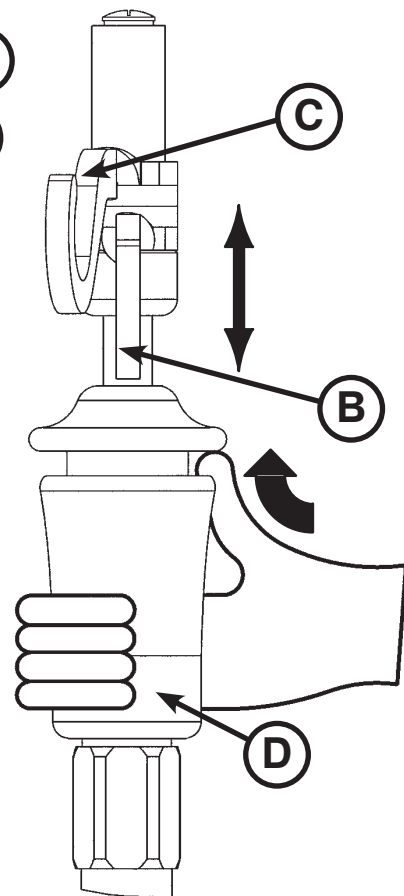
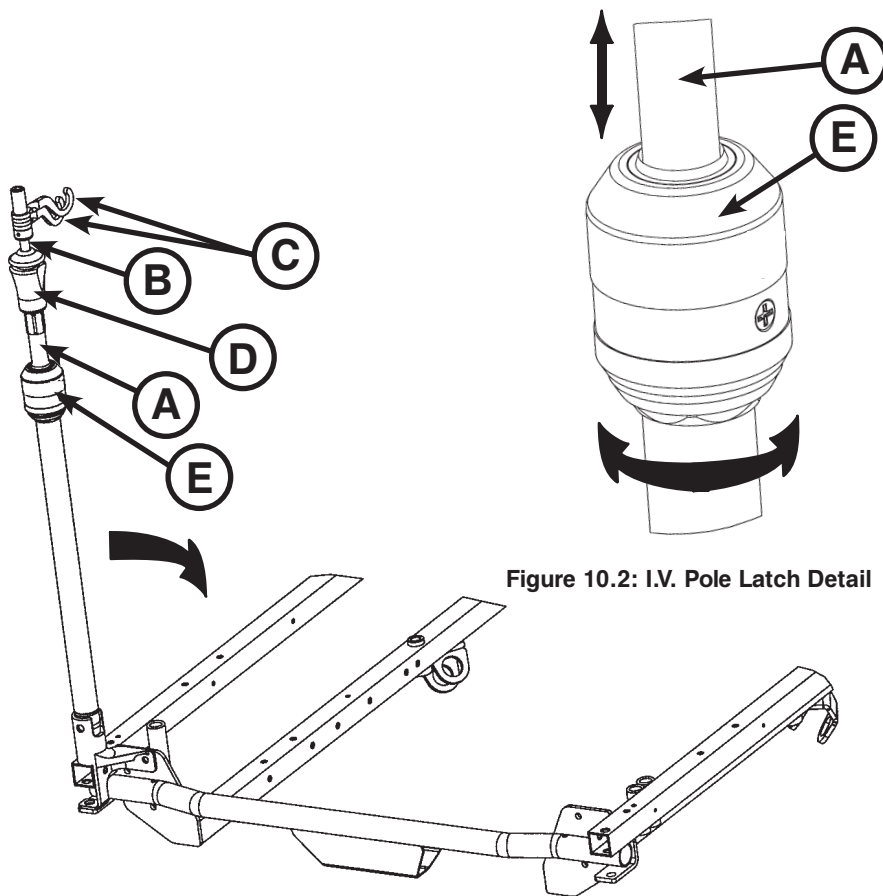
Operation Guide

OPERATING THE THREE-STAGE PERMANENTLY ATTACHED I.V. POLE

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

To use the three-stage permanently attached I.V. pole:

1. Lift and pivot the pole from the storage position and push down until it is locked into the receptacle.
2. To raise the height of the pole, pull up on the telescoping portion (A) until it locks into place at its fully raised position.
3. For a higher I.V. pole, pull up on section (B). Release section (B) at any desired height and it will lock into place.
4. Rotate the I.V. hangers (C) to the desired position and hang the I.V. bags.
5. To lower the I.V. pole, push up on the red portion of grip (D) while holding onto section (B) until it lowers. Turn latch (E) until section (A) lowers.



CAUTION

- To avoid damage, the weight of the I.V. bags should not exceed 12 lb while the weight of any one item attached to each stage of the three-stage permanently attached I.V. pole should not exceed 9.3 lb.
- To avoid damage while transporting the stretcher, verify that the I.V. pole is at a low enough height to allow it to safely pass through door openings and under light fixtures.
- Do not use the I.V. pole as a push/pull device because equipment damage could occur.

Optional Accessories

The accessories listed below can be purchased and installed on the Model 1037 Trauma Stretcher.

Accessory	Part Number	Page
Defibrillator Tray	1105-045-200	page 24
Defibrillator Tray/Foot Extender/Chart Service	1105-045-400	page 24
Footboard/Chartholder	1105-045-500	page 25
I.V. Caddy	0785-155-000	page 25
I.V. Pole, Removable	0390-025-000	page 29
Restraints, Ankle	0946-043-000	page 30
Restraints, Body/Chest	0390-019-000	
Restraints, Wrist	0946-044-000	
Restraints, Full Strap Package	1010-077-000	
Serving Tray	1105-045-700	page 26
Serving Tray Holder/Footboard	1105-045-800	
Siderail Pads	1010-052-000	page 29
Oxygen Bottle Holder, Upright	1115-130-000	page 29
X-Ray Cassette, Fowler	1037-023-000	page 27
X-Ray Cassette Holder, C-Spine, Lateral	1020-070-000	page 28
X-Ray Grid	1020-027-025	page 28
X-Ray Grid Holder Bracket	1020-027-000	page 28

Operation Guide

USING THE DEFIBRILLATOR TRAY

To install the defibrillator tray, insert the pins (A) on the defibrillator tray into the footboard sockets at the foot end of the stretcher as shown in Figure 11.1. Use the strap to secure the equipment to the tray.

CAUTION

- To avoid damage, do not put items weighing more than 30 lb on the defibrillator tray.
- Do not use the defibrillator tray as a push/pull device because equipment damage could occur.

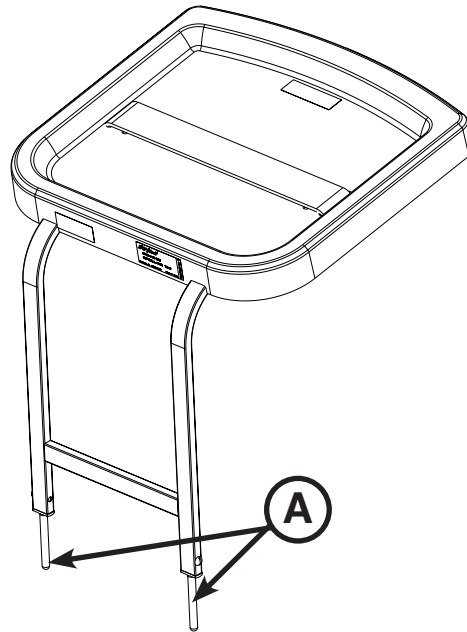


Figure 11.1: Defibrillator Tray

USING THE DEFIBRILLATOR TRAY/FOOT EXTENDER/CHART SERVICE

To use as a defibrillator tray, pull out the top knob (A) and pivot the tray (B) over the foot extension (C) until the tray extends flat over the foot end of the stretcher as shown in Figure 11.2.

To use as a foot extension, pull out knob (A) and pivot the defibrillator tray back until it locks against the foot extension (C). While holding onto the assembly, pull the bottom knob (D) and lower the foot extension down until it is flat as shown in Figure 11.2.

CAUTION

- If the stretcher is equipped with the optional foot end I.V. pole, the I.V. pole must be in the raised position when the foot extension/defibrillator tray is installed. If the I.V. pole is not raised, the foot extension will not function properly and injury could occur.
- To avoid damage, do not put items weighing more than 30 lb on the foot extension/defibrillator tray.
- Do not use the defibrillator tray/foot extender/chart service as a push/pull device because equipment damage could occur.

WARNING

If the stretcher is equipped with the optional foot end push handles, use caution while the foot extension/defibrillator tray is installed to avoid pinching your fingers.

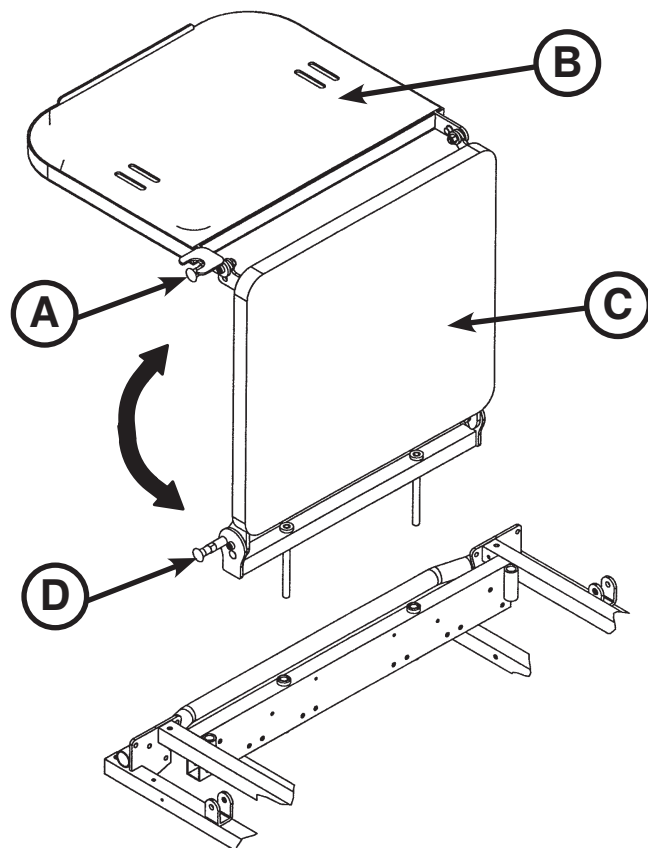


Figure 11.2: Foot Extension/Defibrillator Tray - Foot End

Operation Guide

USING THE FOOTBOARD/CHARTHOLDER

To use the footboard/chartholder, insert the footboard/chartholder supports (A) into the corresponding holes located at the foot end of the stretcher.

CAUTION

Do not use the footboard/chartholder as a push/pull device because equipment damage could occur.

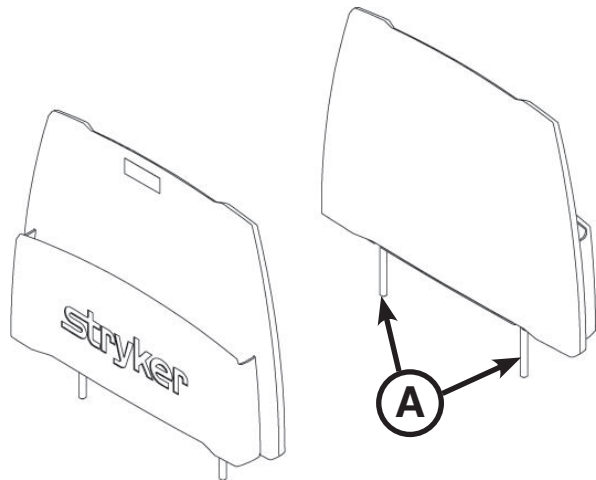


Figure 12.1: Footboard/Chartholder

USING THE I.V. CADDY

To use the I.V. caddy:

1. Lift the I.V. caddy out of the storage tray or from the storage clip. Pivot the I.V. caddy to the desired position.
2. Turn knob (A) counterclockwise to loosen the pole clamp (C).
3. Pivot the knob (A) away from the clamp (B). The clamp (C) may then be opened.
4. Place the I.V. pole into the clamp (B). Close the clamp (C) around the I.V. pole and pivot the knob (A) back into position.
5. Turn the knob (A) clockwise to tighten it. The I.V. pole is ready to be transported with the unit.

To remove the I.V. pole from the I.V. caddy:

1. Turn knob (A) counterclockwise to loosen the pole clamp.
2. Pivot the knob away from the clamp (B), open the clamp and remove the I.V. pole from the I.V. caddy.

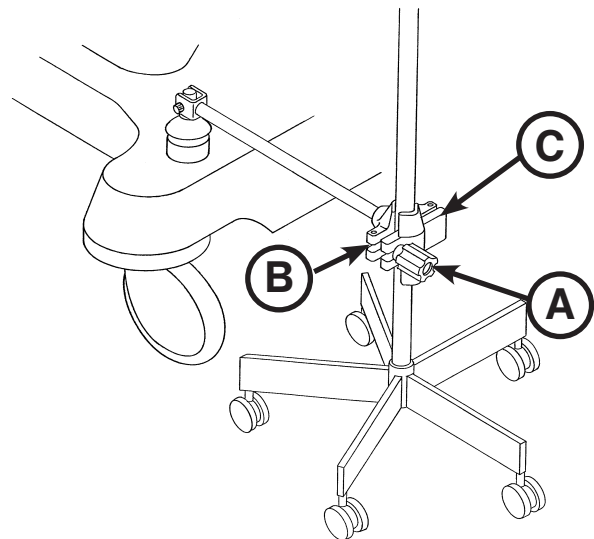


Figure 12.2: I.V. Caddy

CAUTION

Always store the I.V. caddy when not in use to avoid damaging it when the unit is moved.

WARNING

To avoid the risk of injury to the patient or user or damage to the I.V. pole while transporting the stretcher, make sure that the I.V. caddy is securely tightened on the I.V. pole.

Operation Guide

USING THE SERVING TRAY

To use the optional serving tray, pull out on either end of the serving tray to extend it to the proper width to fit on top of the stretcher siderails as shown in Figure 13.1.

To store the serving tray in the optional serving tray holder/foot board, push in both ends of the serving tray and slide it into holder as shown in Figure 13.2.

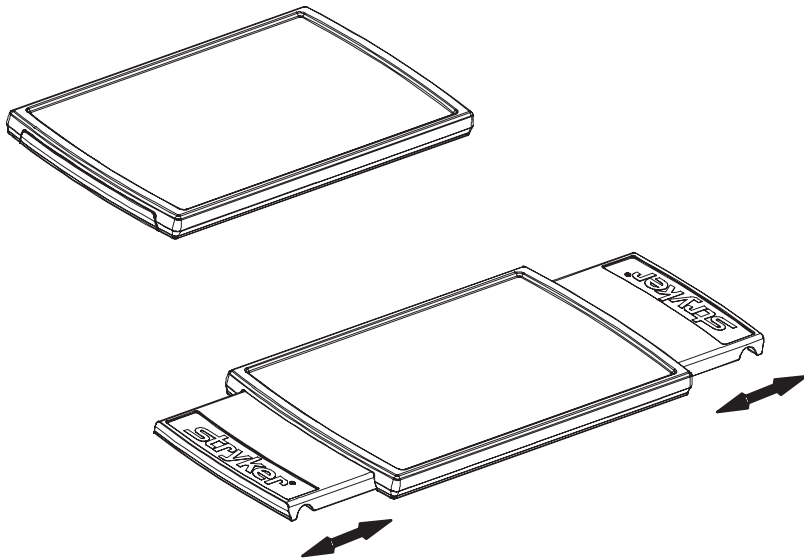


Figure 13.1: Serving Tray

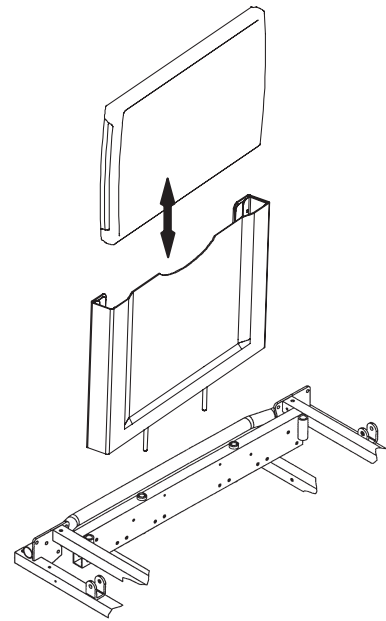


Figure 13.2: Serving Tray - Foot End

CAUTION

- To avoid damage, do not put items weighing more than 30 lb on the serving tray.
 - Do not use the serving tray as a push/pull device because equipment damage could occur.
-

Operation Guide

USING THE FOWLER X-RAY CASSETTE HOLDER

To access the fowler x-ray cassette holder:

1. Raise the fowler section.
2. Grasp the handles (A) and squeeze, until the locating pins (B) disengage from the mounting brackets (C).
3. Lower the tray and install the x-ray cassette.
4. Reverse steps 1 and 2 to install the loaded tray into the fowler mounting brackets (C).
5. To completely remove the tray from the fowler, lift the bottom of the tray out of the mounting brackets (D).

Note: The tray position can be adjusted from the patient's head to the seat section by loosening the knob on the front of the tray, then sliding the tray to the desired position and retightening the knob.

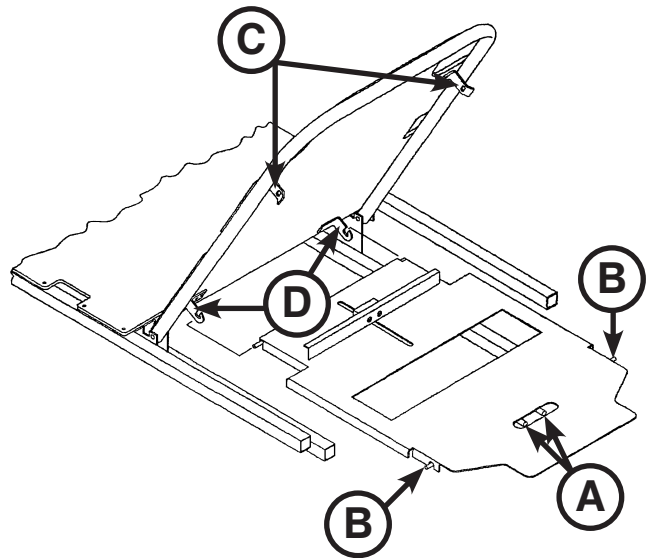


Figure 14.1: Fowler X-Ray Cassette Holder

Operation Guide

USING THE LATERAL C-SPINE X-RAY CASSETTE HOLDER

Center the patient on the stretcher by using the position indicator labels that are located on both ends of the stretcher (Figure 15.1).



Figure 15.1: Position Indicator

The cassette drawer is located on the side of the stretcher and can be identified by the yellow handle (B).

To load the cassette into the drawer:

1. Pull the handle (B) to pull the drawer fully out.
2. Loosen the knob (C) and adjust the sliding track to secure the cassette. Tighten the knob (C) to center the cassette in the drawer.
3. Push the drawer fully back under the stretcher litter.

To position the drawer to the desired location:

1. Squeeze the red handles (A) and pull toward either end of the stretcher, depending on the location needed.
Note: The drawer can be moved the entire length of the stretcher.
2. Release the red handles (A) to lock the drawer in place.

After the X-ray procedure is completed, reverse the above steps to remove the cassette.

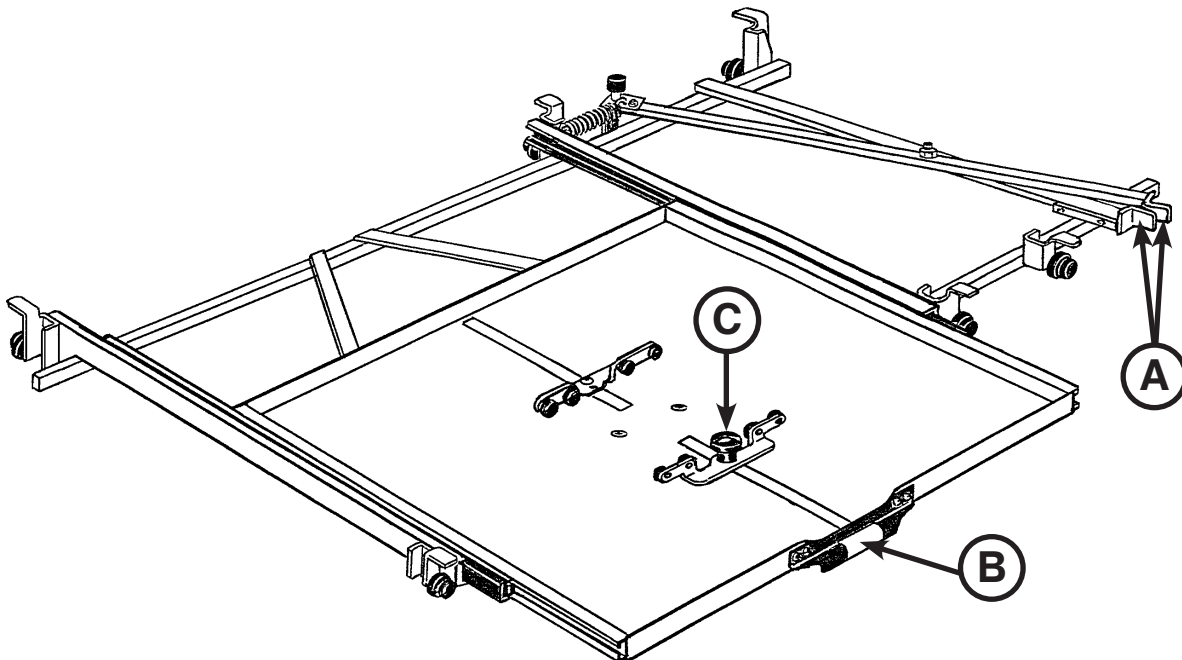


Figure 15.2: X-Ray Cassette System

Operation Guide

OPERATING THE REMOVABLE I.V. POLE

To use the removable I.V. pole:

1. Remove the I.V. pole from the storage trough under the litter and insert into the receptacle on the corner of the litter frame.
2. To raise the height of the pole, turn the knob (A) counterclockwise and pull up on the telescoping portion (B) of the pole to raise it to the desired height.
3. Turn the knob (A) clockwise to lock the telescoping portion in place.

CAUTION

- To avoid damage, the weight of the I.V. bags should not exceed 40 lb.
- To avoid damage while transporting the stretcher, verify that the I.V. pole is at a low enough height to allow it to safely pass through door openings and under light fixtures.
- Do not use the I.V. pole as a push/pull device because equipment damage could occur.

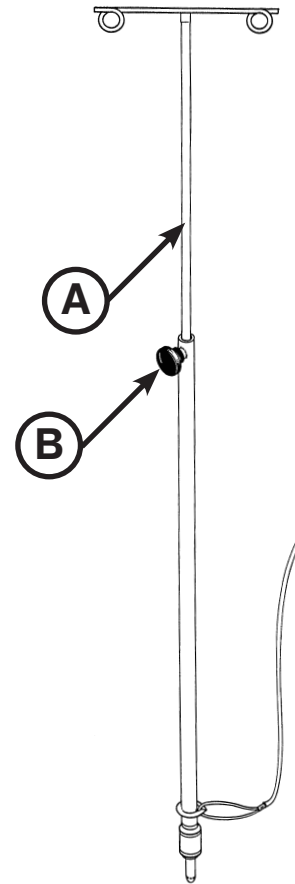


Figure 16.1: Removable I.V. Pole

INSTALLING THE SIDERAIL PADS

To install and use the siderail pads, tuck the siderail pad between the mattress and siderail. Then, attach the Velcro® straps around the top of the siderail to secure the pad to the siderail.

INSTALLING THE UPRIGHT OXYGEN BOTTLE HOLDER

To install the upright oxygen bottle holder:

1. Insert the support bar (A) into the I.V. socket at any of the four litter corners.
2. Insert the cotter pin (B) through the hole in the support bar to hold the bottle holder in place as shown in Figure 16.2.

CAUTION

- To avoid damage, do not put items weighing more than 40 lb in the upright oxygen bottle holder.
- Do not use the upright oxygen bottle holder as a push/pull device because equipment damage could occur.

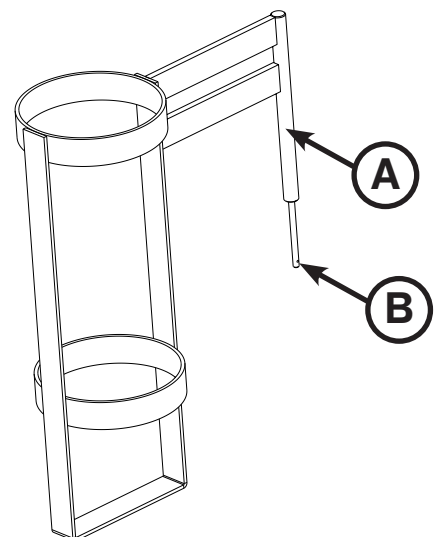


Figure 16.2: Upright Oxygen Bottle Holder

[Return To Table of Contents](#)

Operation Guide

USING THE RESTRAINT STRAPS

This unit allows the use of ankle, chest, wrist, and body restraints. See Figure 17 for restraint strap attachment points. Do not attach restraints straps to the siderail. Stryker makes no recommendation for the use of restraints.

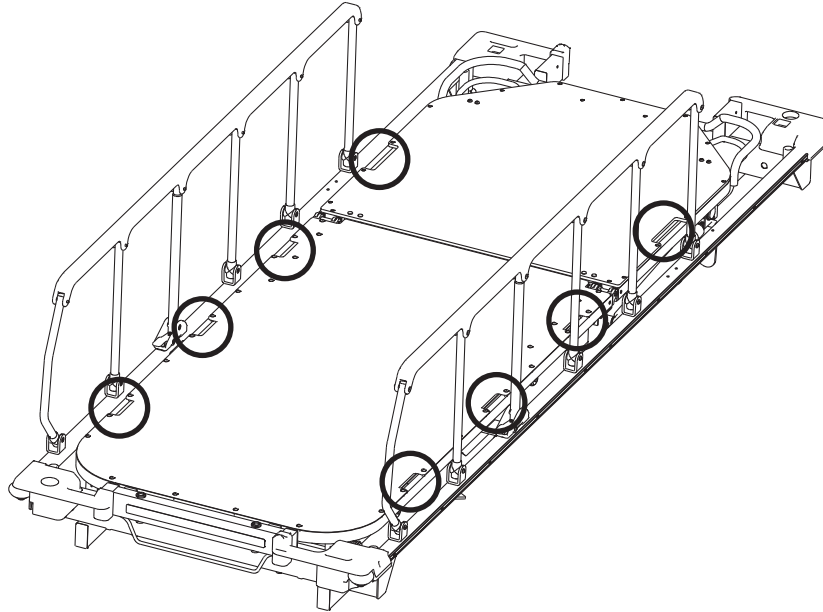


Figure 17: Restraint Strap Locations

WARNING

- Physical restraints, even if properly secured, may result in serious harm to patients and caregivers. The use of restraint straps may potentially cause entanglement, entrapment, physical injury, and/or death. Caution must be used in affixing restraint straps to avoid potential injury to both patients and caregivers.
 - Restraint straps and/or devices must be attached only at the identified attachment points of the unit. Failure to do so may result in patient or caregiver injury. Do not attach restraints straps to the siderail.
 - This unit accommodates the use of ankle, chest, wrist, and body restraints. The use of restraint straps is regulated by state and federal restrictions. Users, caregivers, and/or practitioners should refer to the applicable state and federal restrictions and the appropriate facility protocols before using any restraint strap and/or device.
-

Cleaning

STRETCHER CLEANING

These instructions are intended to provide recommended cleaning methods for the Stryker Model 1037 Trauma Stretcher. Follow hospital protocol for cleaning procedures and frequency.

RECOMMENDED CLEANING METHOD

Note: Follow the cleaning solution manufacturer's dilution recommendations exactly.

- Remove the mattress prior to washing the unit; do not wash the mattress with the stretcher.
- Wipe the unit with cleaning solution and water per manufacturer's recommended dilution.
- Dry thoroughly. Do not replace the mattress on the stretcher until the unit is completely dry.

CAUTION

Before returning the unit to service after cleaning, ensure that the unit is functioning properly by verifying that all labels are intact, raise/lower the stretcher height, brake/steer pedal locks properly in both positions, latch/unlatch the siderails, raise/lower the fowler and gatch, and check all components for proper lubrication.

DO NOT STEAM CLEAN, PRESSURE WASH, HOSE OFF OR ULTRASONICALLY CLEAN THE STRETCHER.

Using these methods of cleaning are not recommended and may void this product's warranty.

RECOMMENDED CLEANERS

Suggested cleaners for stretcher surfaces:

Quaternary Cleaners (active ingredient - ammonium chloride).

Phenolic Cleaners (active ingredient - o-phenylphenol).

Chlorinated Bleach Solution (5.25% - less than 1 part bleach to 100 parts water).

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

CAUTION

Some cleaning products are corrosive in nature and may cause damage to the product if used improperly. If the products suggested above are used to clean Stryker patient handling equipment, measures must be taken to ensure that the stretcher is wiped with a damp cloth soaked in clean water and thoroughly dried following cleaning. Failure to properly rinse and dry the stretcher will leave a corrosive residue on the surface of the stretcher, possibly causing premature corrosion of critical components. Failure to follow the above directions when using these types of cleaners may void this product's warranty.

Cleaning

MATTRESS CLEANING

These instructions are intended to provide recommended cleaning methods for stretcher mattresses. Follow hospital protocol for cleaning procedures and frequency.

RECOMMENDED CLEANING METHOD

- Hand-wash all surfaces of the mattress with warm water and mild detergent cleaner.
- Dry thoroughly.
- Apply disinfectant solution either by spray, solution or pre-impregnated wipes (do not soak mattress).
- Clean per hospital protocol for mattresses.
- Wipe up excess disinfectant.
- Rinse with clean water.
- Allow surface to dry.

RECOMMENDED DISINFECTANTS

IMPORTANT: DILUTE ALL DISINFECTANTS IN ACCORDANCE WITH MANUFACTURER'S DIRECTIONS

When used in concentrations recommended by the manufacturer, diluted bleach, diluted phenolic, or diluted quaternary germicidal disinfectants are recommended. Chlorine Bleach, typically 5.25% Sodium Hypochlorite, should be used at a dilution ratio of 1 part bleach to 10 parts water.

RINSE OFF CORROSIVE CLEANERS

These products are NOT considered mild detergents. They are corrosive in nature and may cause damage to your stretcher mattress if used improperly. Mattresses must be rinsed with clean water and dried thoroughly after using corrosives such as quaternary, phenolic, or chlorine bleach. Failure to properly rinse and dry the mattress leaves a corrosive residue on the surface, likely causing premature corrosion.

Iodophor type disinfectants are not recommended for use because staining may result.

The following table lists the recommended cleaner types for each mattress cover material (see definitions below):

	Vinyl Mattress Cover	Polyurethane Mattress Cover
Recommended	Phenolics	Quaternary, Quat/Isopropyl
Acceptable	Quaternary, Chlorine Bleach (1:10)	Chlorine Bleach (1:10)
Not Recommended	Quat/Isopropyl	Phenolics

Quaternary Cleaners: identified by ingredients containing the phrase "...yl ammonium chloride"

Quat/Isopropyl Cleaners: identified by a quaternary ingredient above plus isopropyl alcohol

Phenolic Cleaners: identified by ingredients containing the suffix "-phenol"

Chlorine Bleach: known generically as "Sodium Hypochlorite"

Cleaning

MATTRESS CLEANING (CONTINUED)

SPECIAL INSTRUCTIONS

Velcro	To clean and disinfect, saturate with disinfectant, rinse with water, and allow it to evaporate.
Soils or Stains	Use neutral soaps and warm water. Do not use harsh cleansers, solvents or abrasive cleaners.
Hard-To-Clean Spots	Use standard household/vinyl cleansers and a soft bristle brush on troublesome spots or stains. Pre-soak heavy, dried-on soil.
Laundering	Laundering is NOT RECOMMENDED. Laundering may substantially decrease the useful life of the mattress.

DO NOT STEAM CLEAN, PRESSURE WASH, HOSE OFF OR ULTRASONICALLY CLEAN MATTRESSES.

Using these methods of cleaning are not recommended and may void this product's warranty.

REMOVAL OF IODINE STAINS

1. Make a solution of 1–2 tablespoons Sodium Thiosulfate in a pint of warm water and use it to wipe the stained area. Clean the stain as soon as possible after it occurs. If stains are not immediately removed, allow solution to soak or stand on the surface before wiping.
2. Rinse surfaces which have been exposed to the solution with clear water before returning mattress to service.

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

Preventative Maintenance

At a minimum, preventative maintenance should be performed annually. A preventative maintenance program should be established for all Stryker Medical equipment. Preventative maintenance may need to be performed more frequently based on the usage level of the product.

- _____ All fasteners secure
- _____ Siderails move and latch properly
- _____ Engage brake pedal and push on the stretcher to ensure all casters lock securely
- _____ Steer function working properly
- _____ All casters secure and swivel properly
- _____ Inspect each caster and remove any wax or debris which may have collected on the caster or braking mechanism
- _____ Body restraints working properly
- _____ I.V. pole intact and operating properly
- _____ Oxygen bottle holder intact and operating properly
- _____ Fowler operating and latching properly
- _____ Trendelenburg/reverse Trendelenburg operating properly
- _____ No rips or cracks in mattress cover
- _____ Transfer boards intact and operating properly
- _____ Ground chain intact
- _____ No leaks at hydraulic connections
- _____ Hydraulic jacks holding properly
- _____ Hydraulic drop rate set properly
- _____ Hydraulic oil level sufficient
- _____ Lubricate where required
- _____ X-ray tray slide tracks cleaned of dust and debris
- _____ Accessories and mounting hardware in good condition and working properly

Product Serial Number:		

Completed by: _____ Date: _____

Warranty

LIMITED WARRANTY

Stryker Medical Division, a division of Stryker Corporation, warrants to the original purchaser of the Stryker Model 1037 Trauma Stretcher 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 Stretcher 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 Stretcher products will be free from structural defects for the expected 10 year life of the Stretcher product as long as the original purchaser owns the product.

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

Warranty does not include any disposable items, I.V. poles (except for Stryker permanently attached poles), mattresses, batteries, or damage resulting from abuse.

TO OBTAIN PARTS AND SERVICE

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

SERVICE CONTRACT COVERAGE

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

A Service Contract helps to:

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

Warranty

SERVICE CONTRACT PROGRAMS

Stryker offers the following service contract programs:

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

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

** Does not include any disposable items, I.V. poles (except for Stryker permanently attached poles), mattresses, batteries, or damage resulting from abuse.

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

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

RETURN AUTHORIZATION

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

DAMAGED MERCHANDISE

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

INTERNATIONAL WARRANTY CLAUSE

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



United States

Stryker Medical
3800 E. Centre Ave.,
Portage, Michigan USA
49002

EC	REP
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European Representative

Stryker France S.A.S.
ZAC - avenue Satolas Green
69881 MEYZIEU Cedex
France



stryker[®]