

Operations/Maintenance Manual



Symbols

$\bigcap_{\mathbf{i}}$	Operating instructions / Consult instructions for use
٠	
	General warning
\triangle	Caution
REF	Catalogue number
SN	Serial number
LOT	Batch code
US Patents	For US Patents see www.stryker.com/patents
	Manufacturer
<u>^</u>	Safe working load
ũ	Mass of product
	Class II with the powered low air loss (LAL)
Land .	Wash by hand
Ø	Do not tumble dry
\boxtimes	Do not dry clean
₹	Do not iron
	Allow to completely air dry
a	Chlorinated bleach
7	Keep dry

2860-109-001 REV C

www.stryker.com

Symbols

07	Do not stack more than 7 high
	Do not use sharp object to cut open the package

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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.

Summary of safety precautions

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



WARNING

- Always check patient's skin regularly. Consult a physician if erythema or skin breakdown occurs. Serious injury could result if the patient's skin condition is left untreated.
- Always use extra caution and supervision to help reduce the risk of a patient fall. Patient stability and siderail coverage may be compromised with the use of an overlay.
- Always leave the bed frame in the lowest position when the patient is unattended to help reduce the number and severity of falls.
- Always consider the use of siderails. The safe use of the support surface is maximized when used in conjunction with siderails and there may be an increased risk of falls when siderails are not present. Serious injury or death can result from the use (potential entrapment) or non-use (potential patient falls) of siderails or other restraints. Consider local policies regarding the use of siderails. The physician, operator, or responsible parties should determine whether and how to use siderails based on each patient's individual needs.
- Always use extra caution with a patient at risk of a fall (such as agitated or confused) to help reduce the likelihood
- Always use extra caution when reading radiology images taken of a patient on this support surface as internal components can cause artifacts and distort readings.
- Always install the IsoFlex LAL support surface on Stryker bed frames. See compatible frames in the specification table. This is to avoid the risk of a safety hazard including but not limited to bodily injury.
- Do not use the support surface when gaps are present. The risk of entrapment can develop when the support surface is placed on bed frames that leave gaps of even a few inches, between the support surface and the headboard, footboard, and siderails.
- Do not stick needles into a support surface through the support surface cover. Holes may allow body fluids to enter the inside (inner core) of the support surface and could cause cross-contamination, product damage, or product malfunction.
- Always evaluate the appropriate CPR protocol to use with this product.
- Always be aware of devices or equipment that are placed on the top of the support surface. Damage to the surface may occur due to the weight of the equipment, heat generated by the equipment, or sharp edges on the equipment.
- Do not use the support surface as a transfer device.
- Do not use the support surface handles to lift or move the support surface with a patient on board.
- Do not transfer patient from one bed to another using the support surface with a patient on it.
- Do not exceed the safe working load of the hospital bed frame when supporting both the patient and the support surface. Excess weight could cause unpredictable safety and performance of this product.
- Always make sure that the patient support platforms and their respective transfer gaps are adequate to support the patient. If the space between the two patient support platforms is greater than 3 in. (7,62 cm), use the transfer bridge to fill the gap. The transfer bridge is meant to ease transfer of a patient from one patient support platform to another.
- Always make sure that the opposite siderail is raised when placing a patient on the support surface to reduce the risk of patient fall.
- Always monitor the patient condition at regular intervals for patient safety.
- Do not immerse the support surface in cleaning or disinfectant solutions.
- Always inspect support surface covers (top and bottom) for tears, punctures, excessive wear, and misaligned zippers each time the covers are cleaned. If compromised immediately remove the support surface covers from service and replace the covers to prevent cross-contamination.
- Do not iron, dry-clean, or tumble dry the support surface covers.
- Always disinfect the support surface between patients to avoid the risk of cross-contamination and infection.

Summary of safety precautions

MARNING (CONTINUED)

- Always make sure that you wipe each product with clean water and thoroughly dry each product after cleaning. Some cleaning agents 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 degradation of critical components. Failure to follow these cleaning instructions may void your warranty.
- Do not allow liquids to pool on the support surface.
- Always completely dry the support surface covers before storing, adding linens, or placing a patient on the surface. Drying the product helps to prevent the performance of the product from being impaired.

CAUTION

- 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.
- Do not put overlays or accessories inside the cover to avoid the risk of reducing pressure redistribution performance.
- Do not allow liquid to seep into the zipper area or watershed cover barrier when cleaning the underside of the support surface. Fluids allowed to come in contact with the zipper may leak into the support surface.
- Do not over expose the covers to higher concentration disinfectant solutions as these may degrade the covers.
- Do not use accelerated hydrogen peroxides or quaternaries that contain glycol ethers as they may damage the cover and reduce the legibility of the artwork.

Introduction

This manual assists you with the operation or maintenance of your Stryker product. Read this manual 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.

♠ CAUTION

- 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 is a permanent part of the product and should remain with the product even if the product is sold.
- Stryker continually seeks advancements in product design and quality. 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

The non-powered Stryker model 2860 **IsoFlex LAL**® support surface assists in improving human patient outcomes by equalizing pressure and enhancing comfort. **IsoFlex LAL** is available in different dimensions see the specifications table. **IsoFlex LAL** has a breathable cover to assist in moisture management of the skin. There is an optional low air loss (LAL) pump.

Intended use

The **IsoFlex LAL** support surface assists in the prevention and treatment of all pressure injuries (including stages 1,2,3,4, unstageable injury, and deep tissue injury) and is recommended to be implemented in combination with clinical evaluation of risk factors and skin assessments made by a health care professional.

This support surface is for use with human patients with existing or at risk of incurring pressure injuries. The patient must not exceed the safe working load as specified by the support surface. A healthcare professional should determine the use of this support surface by patients outside of the therapeutic weight range. The minimum patient age requirement for this support surface is two years.

IsoFlex LAL shall be used with a support surface cover at all times. The support surface cover can interact with all external skin.

This support surface is for use by patients in an acute care setting. This may include critical care, step down, progressive care, med/surg, subacute care, and post anesthesia care unit (PACU), or other locations as prescribed by a physician. Operators of this support surface include healthcare professionals (such as nurses, nurse aids, or doctors).

IsoFlex LAL support surface is not intended to:

- · be used in a home health environment setting
- be used as a sterile product
- · include a measuring function
- be used with a patient less than two years of age

Stryker promotes the clinical assessment of each patient and appropriate usage by the operator.

Introduction

Expected service life

The **IsoFlex LAL** support surface has a ten year expected service life under normal use, conditions, and with appropriate periodic maintenance.

The **IsoFlex LAL** covers have a three year expected service life under normal use, conditions, and with appropriate periodic maintenance.

Contraindications

None known.

Specifications

Model mattress with Equilibrium cover by Dartex®1	2860-000 2860-000		2860- 2860- 2860-			2860-000 2860-000		
Model mattress with alternative END406 cover by Dartex ®	2860-000 2860-000					2860-000-021 2860-000-022		
Compatible pump	without p	ump	Stryker	Stryker AIR™ pump			without pump	
Length	84 in	213,4 cm	84 in	213,4 cm	80 in	203,2 cm	80 in.	203,2 cm
Width	35 in.	88,9 cm	35 in.	88,9 cm	35 in.	88,9 cm	35 in.	88,9 cm
Thickness	6 in.	15,2 cm	6 in.	15,2 cm	6 in.	15,2 cm	6 in.	15,2 cm
Weight	57 lb	25,9 kg	56 lb 25,4			25,4 kg		
Compatible frames		InTouch®, GoBed® II, 3002 S3, 3005 S3, and the Epic® II				-		
		Bed frames that support 84 in. x 35 in. (213,4 cm x 88,9 cm) support surface Bed frames that support 80 in. x 35 in. (203,2 cm x 88,9 cm) support surfaces.						
	An assessment by the healthcare facility or end user is to be completed if the support surface is used with other flat deck (35" x 84" or 35"x 80") bed frames. The combination of the support surface installed on a flat deck bed frame must meet the applicable IEC bed standards.							
Safe working load	500 lb (2	500 lb (226,8 kg)						
Therapeutic weight	50 lb - 3	50 lb - 350 lb (22,7 kg - 158,7 kg)						

Stryker reserves the right to change specifications without notice.

For more information about **Stryker AIR™** pump, see the manufacturer's instructions for use.

¹Dartex is a registered trademark of Dartex Coatings, Ltd.

Specifications (Continued)

Environmental conditions	Operation	Storage and transportation
Ambient temperature	104 °F (40 °C) 50 °F- (10 °C)	-40 °F- (-40 °C)
Relative humidity (non-condensing)	30% 75%	10%
Atmospheric pressure	700 hPa	1060 hPa

Contact information

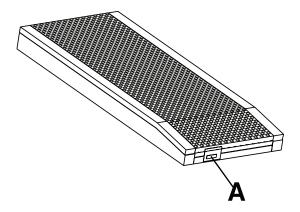
Contact Stryker Customer Service or Technical Support at: 1-800-327-0770.

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

To view your operations or maintenance manual online, see https://techweb.stryker.com/.

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



Date of manufacture

The year of manufacture is the first four digits of the serial number.

Serial number key

SN

YYYYMMZZZZXXNNNNN

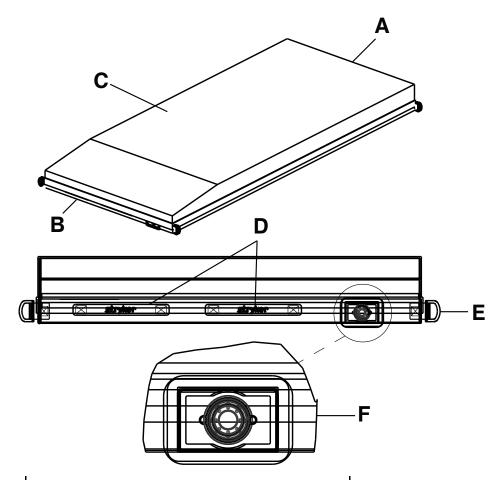
YYYY Year MM Month

ZZZZ First four digits of Stryker part number

XX Last two digits of Stryker part number

NNNNN Sequential numbering (00001-99999)

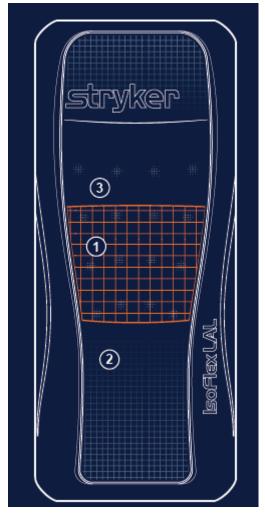
Product illustration

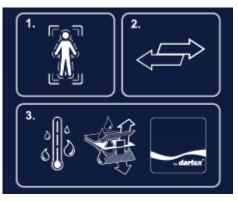


Α	Head end	D	Strap handles (located at the head end and the foot end)
В	Foot end	E	D-ring (located on each corner of the bottom cover)
С	Support surface	F	Pump air attachment

Introduction

Product features





1	Pressure redistribution	Redistributes pressure in the sacral region with its CoreGel ™ technology by allowing immersion and envelopment to occur
2	Shear management	Moves freely with the patient to assist in the reduction of shear forces at the interface between the surface and the patient with ShearGeI™ support layer
3	Moisture management	Provides air flow with the LAL system to assist managing the heat and humidity of the patient's skin

This product is made with Intelli-Gel®* hollow column configuration and Duragel™ elastomeric material.

*Intelli-Gel® is a registered trademark of EdiZONE, LLC of Alpine, UT

 $\mathsf{Duragel^{\mathsf{TM}}} \ \mathsf{is} \ \mathsf{a} \ \mathsf{trademark} \ \mathsf{of} \ \mathsf{EdiZONE}, \ \mathsf{LLC} \ \mathsf{of} \ \mathsf{Alpine}, \ \mathsf{UT}$

Operation

Installing the support surface



WARNING

- Always check patient's skin regularly. Consult a physician if erythema or skin breakdown occurs. Serious injury could result if the patient's skin condition is left untreated.
- Always use extra caution and supervision to help reduce the risk of a patient fall. Patient stability and siderail coverage may be compromised with the use of an overlay.
- Always leave the bed frame in the lowest position when the patient is unattended to help reduce the number and severity of falls.
- Always consider the use of siderails. The safe use of the support surface is maximized when used in conjunction with siderails and there may be an increased risk of falls when siderails are not present. Serious injury or death can result from the use (potential entrapment) or non-use (potential patient falls) of siderails or other restraints. Consider local policies regarding the use of siderails. The physician, operator, or responsible parties should determine whether and how to use siderails based on each patient's individual needs.
- Always use extra caution with a patient at risk of a fall (such as agitated or confused) to help reduce the likelihood of a fall.
- Always use extra caution when reading radiology images taken of a patient on this support surface as internal components can cause artifacts and distort readings.
- Always install the IsoFlex LAL support surface on Stryker bed frames. See compatible frames in the specification table. This is to avoid the risk of a safety hazard including but not limited to bodily injury.
- Do not use the support surface when gaps are present. The risk of entrapment can develop when the support surface is placed on bed frames that leave gaps of even a few inches, between the support surface and the headboard, footboard, and siderails.
- Do not stick needles into a support surface through the support surface cover. Holes may allow body fluids to enter the inside (inner core) of the support surface and could cause cross-contamination, product damage, or product malfunction.
- Always evaluate the appropriate CPR protocol to use with this product.
- Always be aware of devices or equipment that are placed on the top of the support surface. Damage to the surface may occur due to the weight of the equipment, heat generated by the equipment, or sharp edges on the equipment.

CAUTION

Do not put overlays or accessories inside the cover to avoid the risk of reducing pressure redistribution performance.

Prerequisite: A minimum of two operators is required for this task.

To install the support surface:

- 1. Make sure that the support surface properly fits on the bed frame where you are placing the product.
- 2. Make sure that you install the dedicated sloped heel section at the foot end of the bed frame.
- 3. Place the linens on the support surface per hospital protocol.

Applying the linens

To apply the linens:

1. Apply the linens using the "D" rings for a flat sheet.

Applying the linens (Continued)

2. Thread the four linen corners through the "D" rings (C) on the bottom cover to secure the linens (A) to the support surface (B).

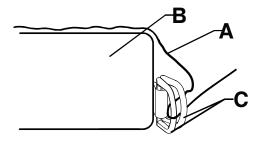


Figure 1: Apply linens

Transferring a patient from one patient support platform to another



WARNING

- Always check patient's skin regularly. Consult a physician if erythema or skin breakdown occurs. Serious injury
 could result if the patient's skin condition is left untreated.
- · Do not use the support surface as a transfer device.
- · Do not use the support surface handles to lift or move the support surface with a patient on board.
- · Do not transfer patient from one bed to another using the support surface with a patient on it.
- Do not exceed the safe working load of the hospital bed frame when supporting both the patient and the support surface. Excess weight could cause unpredictable safety and performance of this product.
- Always make sure that the patient support platforms and their respective transfer gaps are adequate to support the
 patient. If the space between the two patient support platforms is greater than 3 in. (7,62 cm), use the transfer
 bridge to fill the gap. The transfer bridge is meant to ease transfer of a patient from one patient support platform to
 another.
- Always make sure that the opposite siderail is raised when placing a patient on the support surface to reduce the risk of patient fall.

To transfer the patient from one patient support surface to another:

Prerequisite: Follow hospital protocols required to transfer a patient from one patient support platform to another.

- 1. Position one patient support platform alongside the other patient support platform while minimizing the gap between the two platforms.
- 2. Set the brakes for both patient support platforms.
- 3. Adjust the patient support platform heights so that they are level with one another.
- Transfer the patient following all applicable safety rules and institution protocols for patient and operator safety.
 Note: Do not use the IsoFlex LAL support surface to transfer the patient to other surfaces.
- 5. Center the patient on the support surface (Figure 2 on page 12).

Operation

Transferring a patient from one patient support platform to another (Continued)



Figure 2: Center patient

Managing incontinence and drainage



MARNING

Always monitor the patient condition at regular intervals for patient safety.

You can use disposable diapers or incontinence pads to manage incontinence. Always provide appropriate skin care after each incontinence episode.

Cleaning



MARNING

- Do not immerse the support surface in cleaning or disinfectant solutions.
- Do not allow liquid to pool on the support surface.
- Always inspect support surface covers (top and bottom) for tears, punctures, excessive wear, and misaligned zippers each time the covers are cleaned. If compromised immediately remove the support surface covers from service and replace the covers to prevent cross-contamination.
- Always make sure that you wipe each product with clean water and thoroughly dry each product after cleaning. Some cleaning agents 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 degradation of critical components. Failure to follow these cleaning instructions may void your warranty.
- Do not iron, dry-clean, or tumble dry the support surface covers.
- Always completely dry the support surface covers before storing, adding linens, or placing a patient on the surface. Drying the product helps to prevent the performance of the product from being impaired.



CAUTION

Do not allow liquid to seep into the zipper area or watershed cover barrier when cleaning the underside of the support surface. Fluids allowed to come in contact with the zipper may leak into the support surface.

Note: If the optional pump is installed, unplug the product before cleaning.

Always follow hospital protocol for cleaning and disinfecting.

To clean the support surface covers between patient uses, follow these steps in order:

- 1. Using a clean, soft, damp cloth, wipe the support surface covers with a mild soap and water solution to remove foreign material.
- 2. Wipe the support surface covers with a clean, dry cloth to remove any excess liquid or cleaning agent.
- 3. Dry thoroughly.

Disinfecting

WARNING

- Always disinfect the support surface between patients to avoid the risk of cross-contamination and infection.
- Always make sure that you wipe each product with clean water and thoroughly dry each product after cleaning. Some cleaning agents 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 degradation of critical components. Failure to follow these cleaning instructions may void your warranty.
- Do not immerse the support surface in cleaning or disinfectant solutions.
- Do not allow liquids to pool on the support surface.
- Always completely dry the support surface covers before storing, adding linens, or placing a patient on the surface. Drying the product helps to prevent the performance of the product from being impaired.

⚠ CAUTION

- Do not over expose the covers to higher concentration disinfectant solutions as these may degrade the covers.
- Do not use accelerated hydrogen peroxides or quaternaries that contain glycol ethers as they may damage the cover and reduce the legibility of the artwork.

Suggested disinfectants:

- Quaternaries
- Phenolic disinfectants
- Chlorinated bleach solution (5.25% bleach diluted 1 part bleach to 100 parts water)
- 70% isopropyl alcohol

Note: If the optional pump is installed, unplug the product before cleaning.

To disinfect the support surface covers after each patient use, follow these steps in order:

- 1. Thoroughly clean and dry the support surface covers before you apply disinfectants (See Cleaning on page 13).
- 2. Apply recommended disinfectant solution by spray or pre-soaked wipes. Do not soak the support surface.
 - Note: Make sure that you follow the disinfectant's instructions for appropriate contact time and rinsing requirements.
- 3. Wipe the support surface covers with a clean, dry cloth to remove any excess liquid or disinfectant.
- 4. Allow the support surface covers to dry completely before returning to service.

Preventive maintenance

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.

Note: Clean and disinfect the exterior of the support surface before inspection, if applicable.

Inspect the following items:

 . Zipper, covers (top and bottom), and fire barriers are free of tears, cuts, holes, or other openings
Note: If excessive wear is observed, replacement is recommended.
. Internal components for signs of staining from fluid ingress or contamination by fully unzipping the covers
 . Labels for legibility, proper adherence, and integrity
 . Handles are free of rips or cracks and stitching is intact
 . Foam and other components have not degraded or come apart
 . Compression set of the gel is less than 1.25" (3.2 cm) (see Checking the tolerance of the gel compression set
on page 15)
Optional LAL connections for cracks, disconnection, or other visible signs of damage

Notes

- · The fire barrier will contain a hole for the LAL tubing, which is acceptable.
- Foam discoloration is normal due to oxidation. This does not affect the performance or integrity of the support surface. The discoloration may be greater in areas of adhesive application due to chemical interaction.
- During the molding process, the gel forms a grid pattern. The cosmetic appearance of the corners may look like an issue, but are not defects in the product.

Product serial number:	
Completed by:	
Date:	

Checking the tolerance of the gel compression set

Tools required:

- 35" + Straight Edge
- Tape Measure

Procedure:

- 1. Raise the bed height to the full up position.
- 2. Lower the fowler and gatch sections to the full down position.

Note: Before taking the compression set measurement, make sure that there has not been a patient on the support surface for a minimum of one hour.

- 3. Unzip the cover. Start at the foot end patient right corner of the support surface and stop at the head end patient right corner.
- 4. Fold the top of the cover to the patient's right side.

Note: Work from side to side, a little at a time, to move the fire barrier to the top of the support surface.

5. Place a straight edge (at least 35 in. (88.9 cm) long) across the gel from left to right at the sacral region (patient seat section) of the support surface (Figure 3 on page 16).

Preventive maintenance

Checking the tolerance of the gel compression set (Continued)

6. Using a tape measure, measure the maximum depth (lowest point) from the bottom of the straight edge to the top of the foam (Figure 4 on page 16).

Note: Do not push down on the tape measure when taking the measurement. The tape measure should just lightly touch the top of the gel grid.



61 81 ZI 91 17 18 19 20

Figure 3: Position straight edge

Figure 4: Measure maximum depth

7. Document the measurement, serial number, and date the measurement was taken. This information will be required for warranty information, if applicable.

Note: If the measurement is greater than 1.25" (3.2 cm), the compression set is out of tolerance and you should replace the support surface. See the warranty page for replacement requirements. Call Customer Service at 1-800-327-0770 with the information recorded above for a replacement support surface.

- 8. Reverse steps to reinstall.
- 9. Verify proper operation before returning the product to service...

Quick reference replacement parts

These parts are currently available for purchase. Call Stryker Customer Service: 1-800-327-0770 for availability and pricing.

84" support surface	Part number
Kit, 360 cover assembly (for Models 2860-000-011 and 2860-000-012), Equilibrium	2860-700-003
Kit, 360 cover assembly (for Models 2860-000-019 and 2860-000-020), END406	2860-700-007
80" support surface	Part number
Kit, cover assembly (for Models 2860-000-013 and 2860-000-014), Equilibrium	2860-700-004
Kit, cover assembly (for Models 2860-000-021 and 2860-000-022), END406	2860-700-008
Common components	
Fire barrier sleeve	2860-030-427
Cable tie fitting	7600-001-405
Cap screw with tether	2860-030-425
Kit, cap screw with tether (includes 2860-030-425 quantity of 10)	2860-700-001
Kit, O-Ring fitting, quantity 10	2860-700-011
O-ring fitting	2860-030-430
Reduction coupler fitting	7600-001-404
Stryker AIR™ pump	2861-000-026

Top 360 cover replacement

Tools required:

None

Procedure:

- 1. Raise the bed height to the full up position.
- 2. Lower the fowler and gatch sections to the full down positions.
- 3. Unzip the cover. The zipper starts in the middle of the patient right side of the support surface.

Note: Use caution not to damage the fire barrier.

- 4. Remove the top cover.
 - Wash the top 360 cover, see Cleaning on page 13 or;
 - Discard the top 360 cover per hospital protocols, see Preventive maintenance on page 15
- 5. Reverse to install.
- 6. Verify proper operation before returning the product to service.

Bottom 360 cover replacement

Tools required:

- · Diagonal pliers
- Zip tie gun

Procedure:

- 1. Raise the bed height to the full up position.
- 2. Lower the fowler and gatch sections to the full down positions.
- 3. Unzip the cover. The zipper starts in the middle of the patient right side of the support surface.
- 4. Remove and set aside the top cover.
- 5. Using the diagonal pliers, carefully cut the cable tie (C) closest to the foot end of the mattress cover that secures the LAL hose and reduction coupler fitting (A) to the valve body (B) (Figure 5 on page 18).

Note: Use caution not to damage the fire barrier by cutting or snagging with the diagonal pliers.

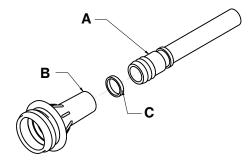


Figure 5: Reduction coupler fitting

- 6. Remove the reduction coupler fitting from the valve body.
- 7. Remove the foam crib assembly from the bed. Save the foam crib assembly.
- 8. Discard the bottom cover per hospital protocol.
- 9. Place the supplied cover on the bed with the black bottom cover on the litter.
- 10. Place the foam crib assembly on top of the black bottom cover. Align the foam crib to the cover.
- 11. Install the reduction coupler fitting by pushing firmly until the fitting is fully seated into the valve body.

Bottom 360 cover replacement (Continued)

Note: Make sure that the flame barrier is tight around the hose assembly.

12. Using a zip tie gun, center the supplied cable tie (E) around the valve body (D) and the reduction coupler fitting (Figure 6 on page 19).

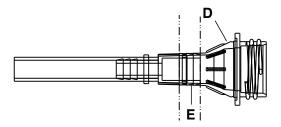


Figure 6: Install the cable tie to the valve body

- 13. Place the top cover over the top of the foam crib assembly. Make sure that the top cover aligns with the foam crib assembly.
- 14. Zip the cover to close. The zipper starts in the middle of the patient right side of the support surface.
- 15. Verify proper operation before returning the product to service.

Fire barrier replacement

Tools Required:

- · Diagonal pliers
- Utility knife
- · Zip tie gun

Procedure:

- 1. Raise the bed height to the full up position.
- 2. Lower the fowler and gatch sections to the full down positions.
- 3. Unzip the cover. The zipper starts in the middle of the patient right side of the support surface.
- 4. Fold the top of the cover to the patient's right side.
- 5. Using the diagonal pliers, carefully cut the cable tie (C) closest to the foot end of the mattress cover that secures the LAL hose and reduction coupler fitting (A) to the valve body (C) (Figure 5 on page 18).

Note: Use caution not to damage the fire barrier by cutting or snagging with the diagonal pliers.

- 6. Remove the reduction coupler fitting from the valve body.
- 7. Starting at the foot end, roll up the fire barrier on the foam crib assembly.

Note: Work from side to side, a little at a time, to move the fire barrier to the top of the support surface.

- 8. Discard the fire barrier.
- 9. Starting at the head end, roll the new fire barrier down and slide the fire barrier over the foam crib assembly.

Note: Align the fire barrier on the foam crib before sliding over the foam crib assembly.

- 10. Carefully slide the fire barrier down the foam crib assembly, working from side to side, to make sure that the fire barrier is tight on the foam crib assembly.
- 11. Align the foam crib assembly on top of the bottom part of the cover.

Note: Spread the excess fire barrier material equally below the foam crib assembly at the foot end.

12. Locate the LAL tubing and, using a utility knife, cut a hole through the fire barrier to make sure that you do not obstruct the connection point for the hose.

Note: Spread the excess fire barrier material equally below the foam crib assembly at the foot end.

Fire barrier replacement (Continued)

- 13. Install the reduction coupler fitting by pushing firmly until the coupler is fully seated into the vale body.
 - Note: Make sure that the flame barrier is tight around the hose assembly.
- 14. Using a zip tie gun, center the supplied cable tie (E) around the valve body (D) and the reduction coupler fitting (Figure 6 on page 19).
- 15. Fold and align the top cover over the top of the foam crib assembly.
- 16. Zip the cover to close.
- 17. Verify proper operation before returning the product to service.

Cap with tether replacement

Tools required:

None

Procedure:

- 1. Disconnect the air pump hose from the patient right side foot end of the support surface, if attached.
- 2. Grasp the body valve (C) and pull outward so the air attachment box (B) extends outside the support surface cover (A) (Figure 7 on page 20).
- 3. Push the tether (E) (Figure 8 on page 20) over the body valve (C) (Figure 7 on page 20). Turn the tether (E) in a clockwise motion until it is past the threads on the body valve (C).
- 4. Make sure that the cap (D) (Figure 8 on page 20) threads onto the body valve (C) (Figure 7 on page 20).
- 5. Push the air attachment box (B) back inside the support surface.

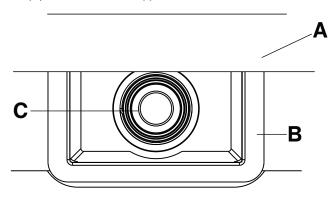


Figure 7: Air attachment box and body valve

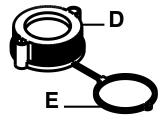


Figure 8: Cap and tether

Warranty

Stryker Medical, a division of Stryker Corporation ("Stryker"), warrants that its Model 2860 **IsoFlex LAL** support surface Product will be free from defects in material and workmanship. This Stryker warranty covers only the following items of the Stryker **IsoFlex LAL** Product (each known individually as a "Part" and collectively as the "Product" or "**IsoFlex LAL** Product") during normal use* as follows:

Mattress (foam assembly and gel) warranty period: ten years

Notes

- The Mattress will naturally compress over time. Should a body indentation or compression set measurement greater than 1 1/4" (3,2 cm), as measured by an authorized Stryker representative, be realized within the warranty period noted above, Stryker will provide a replacement Product. Any normal body indentations or compression set of less than 1 1/4" (3,2 cm) will not be replaced.
- Any damage to the foam assembly or gel which results due to usage of a cover assembly beyond its warranty
 period of three years, or is a result of abnormal wear and tear which may include cleaning processes which are
 inconsistent with those recommended in this Operations/Maintenance manual, shall invalidate the warranty on
 the mattress at Stryker's sole discretion.
- · Cover assemblies warranty period: three years
- · Fire barrier sleeve warranty period: three years

The above noted warranty periods apply only to the original purchaser of the **IsoFlex LAL** Product and begin on the date of delivery to such original purchaser.

If Stryker determines, in its sole discretion, that one or more Parts is defective within the above noted warranty periods, then Stryker may, at its option, either repair or replace the **IsoFlex LAL** Product or Part.

In addition, if requested by Stryker, the Part of the **IsoFlex LAL** Product subject to a warranty claim shall be returned prepaid to Stryker, as noted under the return authorization section below. No employee or representative of Stryker is authorized to change the warranty on the **IsoFlex LAL** Product in any way.

The warranty set forth above does not include or cover the following:

- Abnormal wear and tear on the Product, or wear which indicates that the Product was not properly maintained in accordance with this Operations/Maintenance manual, or which Product has been subject to unusual stress; or
- Product that has been misused, modified, refurbished or repaired without the prior written consent of Stryker; or damage or Product failure due to causes beyond Stryker's control, including but not limited to, abuse, theft, fire, flood, wind, lightning, freezing, clogging of mattress pores due to tobacco smoke, unusual atmosphere conditions, or material degradation due to exposure to moisture; or
- · Damage which is determined to have resulted through the use of the Product for patient transfer or transport; or
- · Product which serial numbers or other identification marks have been removed or destroyed.

*"Normal use" is defined as use of the Product in typical or normal use settings in a hospital or medical facility under normal conditions. Damage to the Product which arises from abnormal use, which may include but is not limited to, damage to the Product that may be caused by needle punctures, burns, chemicals, negligent use or improper care or improper cleaning (proper cleaning to help sustain the life of the Product is as detailed in this Operations/Maintenance manual) or staining resulting from such abnormal uses are exempt from the above noted warranty coverage.

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.

Warranty

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 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.



