Enterprise 5000X (E5X) Instructions for Use

ARJOHUNTLEIGH GETINGE GROUP



...with people in mind

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Warnings, Cautions and Notes



Caution

Indicates possible hazards in procedures or conditions which, if not correctly followed, could result in death, injury or other serious adverse reactions.

Indicates possible hazards in procedures or conditions which, if not correctly followed, could result in equipment damage or failure.



Explains or amplifies a procedure or condition.



Indicates an optional item or feature.

General Warnings



WARNING

Keep these instructions in a safe place; you may need to refer to them later on.

Read and understand these instructions before operating the bed. Carers must be trained in the proper use of this product, its functions and controls, and any accessories.

These instructions are mandatory for the safe and effective use of this product, including the safety of patients and carers.

Unauthorised modifications or repairs to this product may affect its safety and will invalidate any warranty. ArjoHuntleigh accepts no liability for any incident, accident or reduction in performance that may occur as a result of such repairs or modifications.

To avoid the risk of electric shock, this product must only be connected to an electricity supply with a protective earth.

Do not smoke or use naked flames near this equipment and do not expose it to extremes of temperature.

Do not use electrically powered beds in the presence of flammable gases such as anaesthetic agents e.g. in operating theatres.

The bed is intended for indoor use only and should not be used outside a normal hospital environment.

Do not use accessories that have not been designed or approved for use with the bed.

The user should carry out a risk assessment before using the bed with equipment from other suppliers or manufacturers.

Always apply the brakes when the bed is stationary.

To reduce the risk of injury due to falls, lower the bed to minimum height when the patient is unattended.

Patients should not be left in the Trendelenburg position when unattended.

To reduce the risk of overbalancing, do not allow the patient to get on or off the bed when the mattress platform is in a tilted (head down or foot down) position.

Continued on next page



WARNING

Where risk assessment indicates that a patient is at high risk of entrapment owing to their medical condition or other circumstances, and where there is no medical benefit from their being left in a contoured position, place the mattress platform in the flat position and disable the controls (*Function lockout*) when the patient is unattended.

When the bed is operated, make sure that obstacles such as bedside furniture do not restrict its movement.

When moving or operating the bed, take care that any attached accessories (e.g. lifting pole) do not strike doors, ceilings, etc.

Hold the head board or foot board when pushing or pulling the bed; do not hold the side rails or any attached accessories.

Before operating the bed, make sure the patient is positioned correctly to avoid entrapment or imbalance.

Take care not to squeeze or trap trailing cables from the handset/ACP and other equipment between moving parts of the bed.

Take care not to allow clothing or bed linen to become snagged on moving parts of the bed.

Do not place the bed on an incline greater than 7° as this may, in extreme circumstances, cause the bed to overbalance.

This product complies with the requirements of applicable standards for electromagnetic compatibility (EMC). However, medical electrical equipment requires special precautions regarding EMC and should be installed and used in accordance with the EMC information in the product service manual.

Medical electrical equipment can be affected by portable and mobile radio frequency communications equipment e.g. cellular telephones.

1. Introduction

These instructions contain information for the installation, use and maintenance of the ArjoHuntleigh **Enterprise® 5000X** range of acute care hospital beds. These beds have multiple functions to provide the optimum nursing position for both patient and carer.

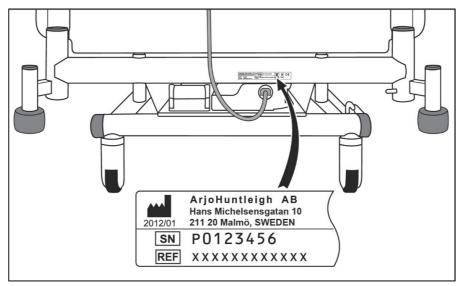
Standard features

- · Electrical adjustment of bed height and leg section elevation
- Electrically operated retracting backrest
- Bio-Contour® advanced profiling system
- Auto-Chair facility
- Electrical adjustment of head down tilt (Trendelenburg) and foot down tilt (reverse Trendelenburg)
- Manual selection of calf section vascular position
- Mattress support surface with removable panels
- Adjustable length mattress platform
- Drainage bag rails

Optional features

- ★ ¾ length folding side rails with 3 or 5 bar
- ★ Folding split side rails
- ★ 125mm (single wheel) or 150mm (single or dual wheel) castors
- ★ Bedstripper (linen shelf)
- ★ Underbed lights
- ★ Full width brake bar
- ★ Additional brake pedals at head end
- ★ DIN accessory rails
- ★ Radio translucent backrest with X-ray cassette tray
- ★ Flat or curved platform sections
- ★ Patient handset with optional functionality
- ★ Lockable foot board and head board

Optional features are specified by the customer at the time of ordering. The chosen options are indicated by the equipment model number. The model number **REF** and serial number **SN** can be found on the specification label; this is located on the bed frame below the head board.

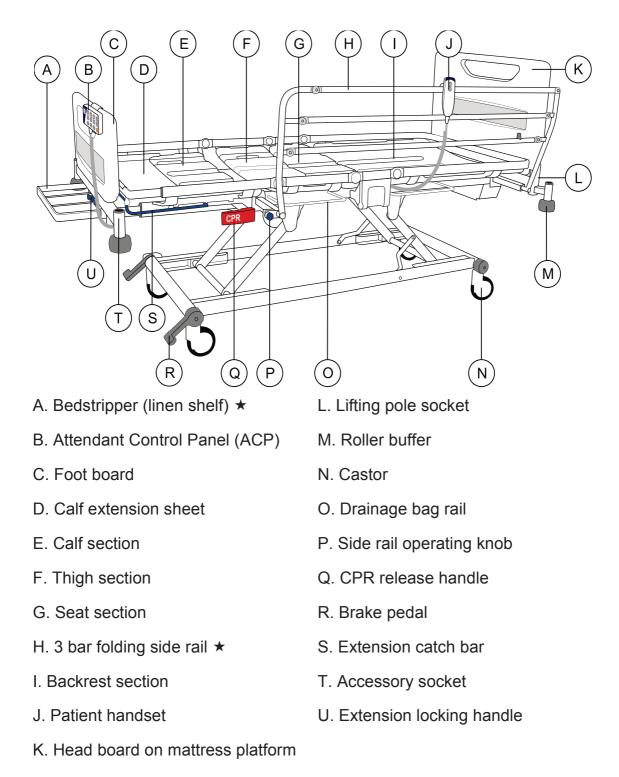


Specification label

Caution

Before using the bed, ensure that the "Power In" rating on the specification label is compatible with the local electricity supply.

Product overview – Head Board On Mattress Platform

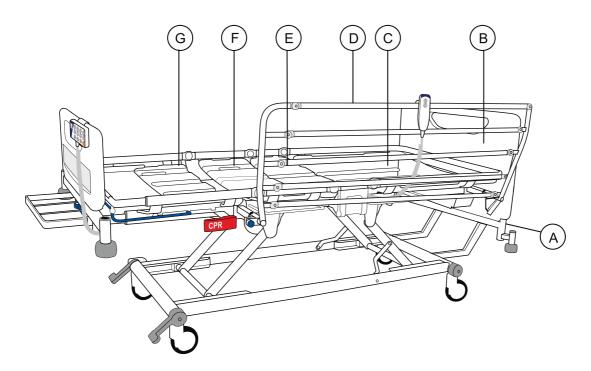


Head Board On Base★

The bed can be optionally configured with the head board mounted on the base of the bed.

The bed can also be configured with 3 or 5 bar easily removable side rails.

The easily removable side rails are described more in section "To remove and install the 3 bar or 5 bar $\frac{3}{4}$ length folding side rail:" in Chapter 4.



- A. Lifting pole socket on base frame
- B. Head board on base frame
- C. Backrest with X-ray cassette tray
- D. 3 or 5 bar removable side rails
- E. Flat deck for seat section
- F. Flat deck for thigh section
- G. Flat deck for calf section



Flat deck sheets are supplied as standard when the backrest with X-ray cassette tray is present.

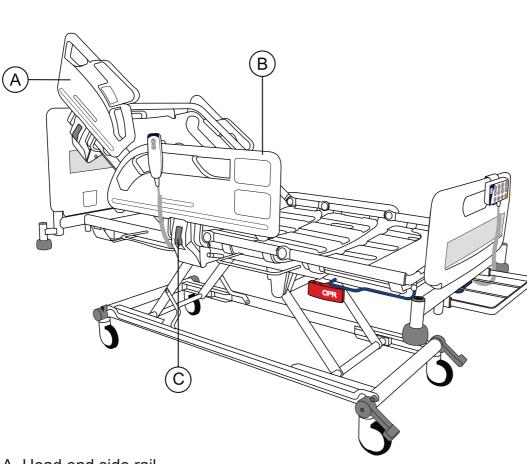
In this configuration all other functionality of the bed remains identical.

Folding split side rails★

13

The bed can be optionally configured to use folding split side rails. In this configuration a side rail release lever is located directly below the side rail. The release lever is described more in section "To lower the folding split side rails:" in Chapter 4.

Folding split side rails are not available in all countries.



- A. Head end side rail
- B. Foot end side rail
- C. Side rail release lever

In this configuration all other functionality of the bed remains identical.

2. Clinical Applications

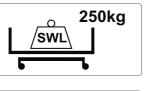


To ensure the patient can use the bed safely, their age, size and condition should be assessed by a clinically qualified person.

The use of head down tilt (Trendelenburg) or foot down tilt (reverse Trendelenburg) may be contraindicated for certain medical conditions. The tilt facility should only be used under the guidance of a clinically qualified person after assessment of the patient's condition.

Intended use The bed is suitable for use in Application Environments 1, 2 and 3 as defined in EN 60601-2-52:2010. **Application Environment 1** Intensive/critical care provided in a hospital where 24hour medical supervision and constant monitoring is required, e.g. ITU, ICU and CCU. **Application Environment 2** Acute care provided in a hospital or other medical facility where medical supervision and monitoring is required, e.g. general medical and surgical wards. **Application Environment 3** Long term care in a medical area where medical supervision is required and monitoring is provided if necessary, e.g. nursing homes and geriatric facilities. Indications The bed is appropriate for high dependency patients who pose a movement and handling risk and / or whose clinical condition requires that they are positioned with minimal physical handling. Patients with a moderate amount of independence can, at the carer's discretion, use the controls to adjust their own position. The mattress platform can be positioned to assist with treatment of a patient as required within the clinical settings defined in Application Environments 1, 2 and 3.

Contraindications



The safe working load of the bed is 250kg.

The maximum recommended 185kg

patient weight is 185kg.

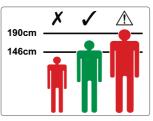
The safe working load is calculated as follows (in accordance with EN 60601-2-52:2010): Maximum nationt weight 185ka

org
kg
ikg
0kg



WARNING

If the combined weight of the mattress and accessories exceeds 65kg, the maximum patient weight must be reduced accordingly.



The recommended patient height is between 146cm and 190cm.

At the discretion of the carer, patients taller than 190cm may be accommodated by extending the bed - refer to "Bed length adjustment" in Chapter 4. Ensure that the patient's height does not exceed the "In-bed length" shown in Chapter 7.

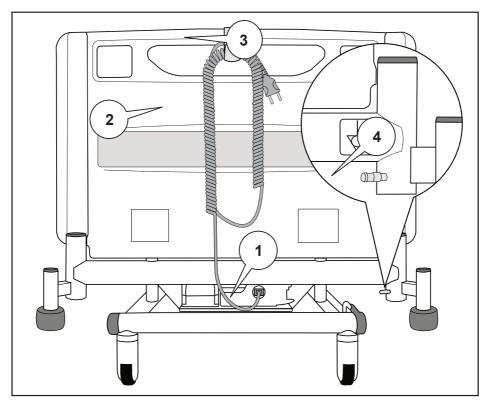
3. Installation

Connect the mains plug to a suitable socket outlet. Make sure the mains plug is easily accessible so it can be disconnected quickly in an emergency.

When the bed is connected to the electricity supply, indicators will light on the control box (1) and Attendant Control Panel.

The power supply cord (2) is fitted with a plastic hook (3). When not in use or before moving the bed, clip the hook onto the head board, coil up the cable and place it over the hook as shown.

To isolate the bed from the electricity supply, disconnect the mains plug from the socket outlet.



Cable storage and potential equalisation terminal



A potential equalisation terminal (4) is located at the head end of the bed.

When other electrical equipment is within reach of the patient or carer, potential differences between the equipment can be minimised by connecting together their potential equalisation terminals.



WARNING

If the power cord or mains plug is damaged, the complete assembly must be replaced by authorised service personnel. Do not remove the fitted plug, or use a rewireable plug or adapter.

Make sure the power supply cord is not stretched, kinked or crushed.

Do not allow the power supply cord to trail on the floor where it may cause a trip hazard.

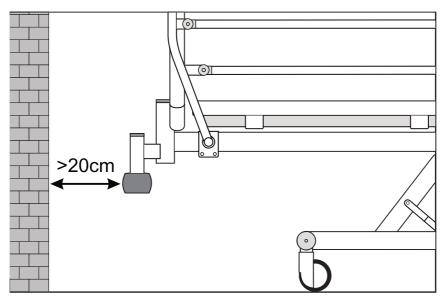
Make sure the power supply cord does not become entangled with moving parts of the bed.

Disconnect the power supply cord from the electricity supply, and store it as shown, before moving the bed.



Before the first use, or if the bed has been unused for more than three months, connect the bed to the electricity supply for at least 24 hours to allow the backup battery to recharge fully. Failure to do this may reduce the life of the battery.

The bed should be positioned with the roller buffers at least 20cm from the rear wall to prevent the head board striking the wall when the bed is in head down tilt (Trendelenburg).



Recommended positioning from rear wall

Mattresses



WARNING

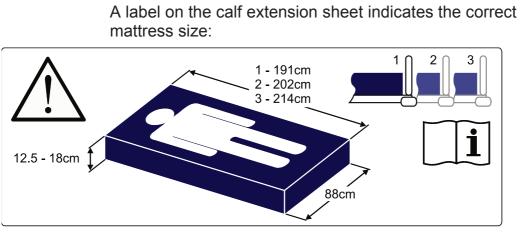
Always use a mattress of the correct size and type. Incompatible mattresses can create hazards.

Entrapment hazards may exist when using a very soft mattress, even if it is the correct size.

The maximum recommended mattress thickness for use with side rails is 18cm.

Read the instructions for use supplied with the mattress.

Where the maximum patient weight specified for the mattress is different to that specified for the bed, the lower value applies.



Mattress size label



The numbers 1, 2 and 3 on the label indicate different mattress platform lengths; refer to "Bed length adjustment" in Chapter 4.

Continued on next page

Mattresses and When choosing bed and mattress combinations, it is important to consider the use of side rails based on clinical assessment of each individual patient and in line with local policy.

When assessing the suitability of a mattress for use with side rails, the following factors should be considered:

- The bed is designed to provide an acceptable side rail height when used with a foam mattress up to 18cm thick.
- Specialist powered air / foam replacement mattresses will typically envelop the patient when loaded and can generally be deeper than a foam mattress without compromising safety. Other makes of specialist mattress replacement must be assessed individually prior to use to verify sufficient clearance is maintained.
- Mattress overlays are not recommended for use with this bed.
- To ensure compliance with EN 60601-2-52:2010, an approved ArjoHuntleigh mattress should be used. Compliance with this standard when using other mattresses must be validated by the user.
- For more information on suitable mattresses and mattress replacements, contact your local ArjoHuntleigh office or approved distributor. A list of ArjoHuntleigh offices can be found at the back of this manual.

4. Operation

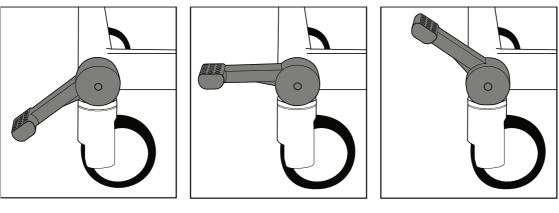


WARNING

Operate the brake pedals with your feet while wearing suitable shoes. Do not operate the pedals with your hands.

Brakes and
steeringThe brake pedals at the foot end of the bed have three
positions as shown:

- BRAKE: brakes are applied on all four castors.
- FREE: all four castors are free to rotate and swivel.
- STEER: all four castors can rotate, but the steering castor (see below) is locked so that it cannot swivel. This helps to keep the bed on a straight line.



BRAKE

FREE

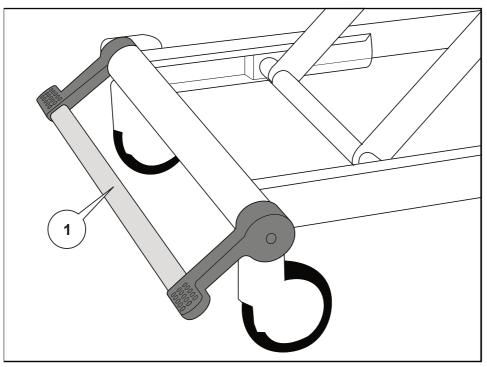
STEER

Using the steering castor Position the bed so that all the castors line up in the direction of travel. Raise the pedals to lock the steering castor and move the bed by pushing it from the opposite end.



The steering castor may be at either end of the bed, as specified by the customer.

Brake bar \star The brake pedals may be linked by a full width brake bar (1) which makes it easier to operate the pedals.



Brake bar

Head end brake Additional brake pedals may be provided at the head end of the bed. These operate in the same way as the foot end pedals.

Side rails ★

The bed can be fitted with ³/₄ length 3 bar or 5 bar side rails or folding split side rails.



> Folding split side rails are not available in all countries.

WARNING - beds supplied without side rails

The clinically qualified person responsible should consider the age, size and condition of the patient before allowing them to occupy the bed.



Do not install side rails (including those made by ArjoHuntleigh) on the bed.



WARNING - beds supplied with side rails

The clinically qualified person responsible should consider the age, size and condition of the patient before allowing the use of side rails.

Side rails are not intended to restrain patients who make a deliberate attempt to exit the bed.

The bed must only be used with the side rails supplied. Do not use another manufacturer's side rails.

Ensure that the mattress is suitable for use with side rails - refer to Chapter 3 for guidance.



Side rail contact points are identified by this symbol. Keep hands and fingers away from these areas.

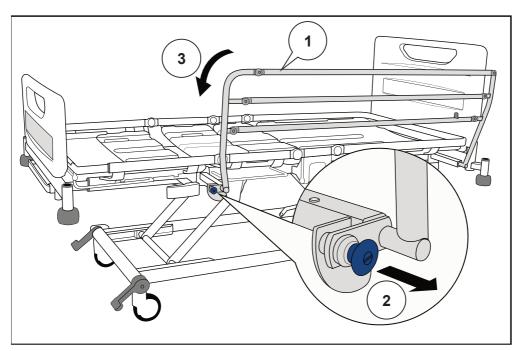


When using removable ³/₄ length side rails, do not fit different side rails to those originally supplied by ArjoHuntleigh with the bed. Make sure the serial number label on the side rail corresponds to the serial number on the bed – refer to page 7 for a description of the bed serial number.

When the removable side rails are fitted make sure the securing pin is assembled and fitted correctly.

To lower the ³/₄ length folding side rail:

Hold the top rail (1) just behind the hinge. Pull the blue operating knob (2) and lower the side rail towards the foot end of the bed (3).



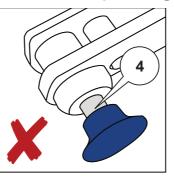
3/4 length folding side rail operation

To raise the side rail:

Hold the top rail (1) just behind the hinge. Pull the side rail up until it locks in the raised position with an audible "click".

Make sure the locking mechanism is securely engaged when the side rail is raised. Do not leave the side rail in the raised position if the locking bolt (4) is visible behind the blue operating knob.





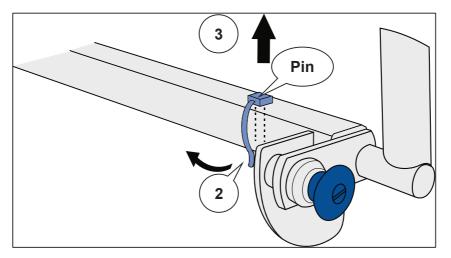
To remove and install the 3 bar or 5 bar ³/₄ length folding side rail:

Some beds are fitted with easy to remove folding side rails. Removable folding side rails are available in 3 bar or 5 bar configurations. Removable side rails are identical in operation to the fixed ³/₄ length side rails described on the previous page.

Make sure the side rails are in the raised position.

Locate the securing pins at both ends of the bed between the side rail and bed frame.

For each pin, pull the securing loop (2) away and lift the pin out of the frame (3).

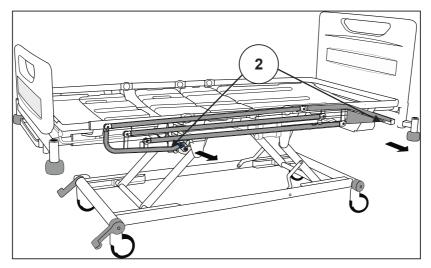


³/₄ length folding side rail securing pin

Lower the folding side rails (refer to page 22).

With the side rails lowered and the securing pins removed, the side rails can move unexpectedly. Take care during removal to avoid sudden movement of the rails that could cause entrapment of limbs. Be aware of contact points described on page 21.

Hold onto the side rail near the mounting points (2) and pull the side rail away from the bed frame.

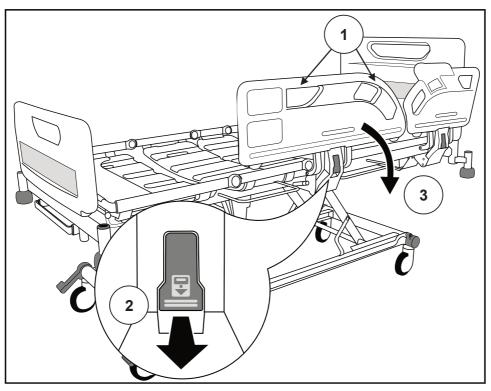


³/₄ length folding side rail removal

To install the side rails, slide the rail mounts into the bed frame mounting points (2) and secure with the securing pins.

To lower the folding split side rails:

Hold either side rail handle (1). Pull the release lever (2) and lower the side rail (3) so that it folds down below the mattress platform.



Folding split side rail operation

To raise the side rail:

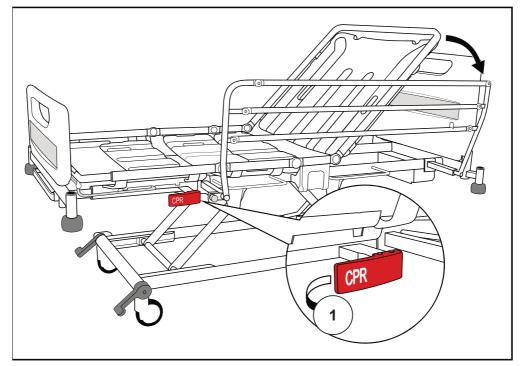
Hold either side rail handle (1). Pull the side rail up and away from the bed until it locks in the raised position with an audible "click".



The head end and foot end side rails both operate in the same way

CPR backrestManual CPR release handles are located below the calf**release**section on either side of the bed.

If the patient suffers a cardiac arrest, pull the CPR release handle (1). This will lower the backrest to enable cardio-pulmonary resuscitation to be carried out.



CPR backrest release

The backrest can fall quickly; keep hands clear to avoid trapping.

Caution

The manual CPR release should only be used in an emergency; repeated everyday use can cause premature wear.

X-ray cassette	The X-ray cassette tray allows thoracic X-ray
tray ★	photography with the backrest at any angle and without
	the patient moving from the bed.

WARNING

Position the mattress platform at an ergonomic height to allow easy loading and removal of X-ray cassettes.

Return the X-ray cassette tray to its closed position below the backrest before raising or lowering the backrest.

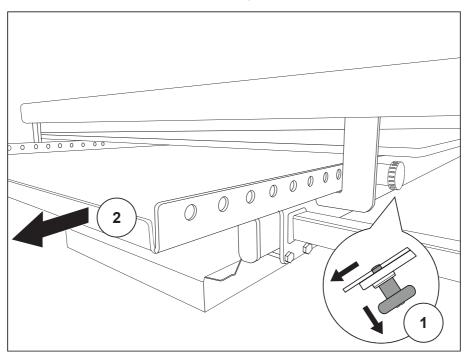
Do not sit or place heavy objects on the X-ray cassette tray.

Ensure the X-ray cassette tray is held securely in place by the catch at all times.

Operation

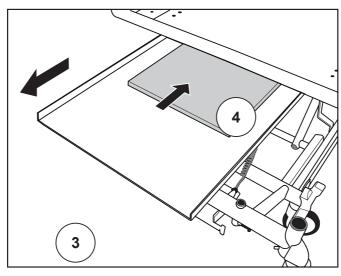
Apply the brakes. Remove the head board from the bed.

Pull the knob (1) to release the catch and slide the tray out (2) as far as will go.



X-ray cassette tray operation

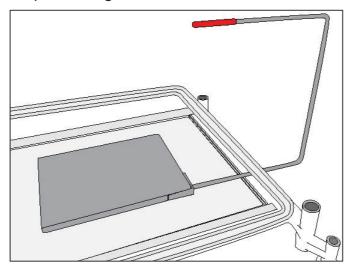
Release the knob to hold the tray in the fully open position (3). Position the X-ray cassette (4) on the tray with its bottom edge against the lip at the foot end of the tray.



Positioning the X-ray cassette

Pull the knob and slide the tray underneath the backrest.

The red moulding on the top of the X-Ray sitting tool indicates the top right hand corner of the X-Ray cassette. Use this feature to assist in accurate positioning.



X-Ray Sitting Tool

Release the knob to hold the tray in one of the latching positions.

After use, pull the tray out to the fully open position and remove the X-ray cassette. Return the tray to the closed position below the backrest and replace the head board.

Bed length	The length of the bed is adjustable to three set positions.	
adjustment	These are typically used as follows:	

- **1** Short, for manoeuvring the bed in confined spaces
- 2 Standard length, for normal use
- **3** Extended, to accommodate very tall patients

Install a suitable foam mattress extension (squab) at the head end when the bed is extended.

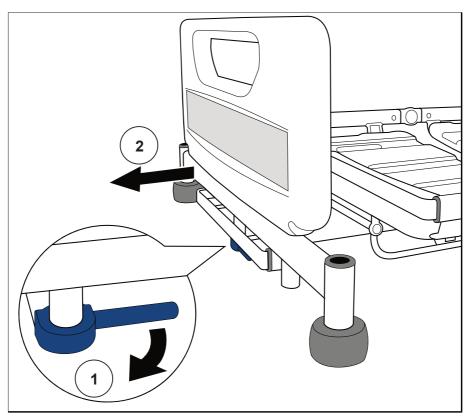
Always adjust the bed frame and mattress platform to the same length and make sure both are latched securely in position.

Level the mattress platform before adjusting the bed length.

Take care not to pinch your fingers when lifting the catch bar.

To extend the bed frame:

Pull the blue extension locking handle (1). Pull out the bed frame (2) to the required position and release the handle.

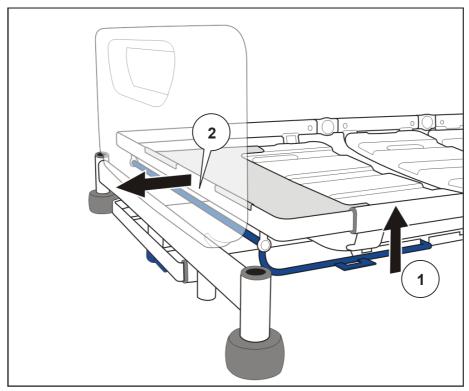


Extending the bed frame

To extend the mattress platform:



Lift the blue extension catch bar (1). Hold the middle of the end crossbar (2) and pull out the mattress platform to the required position. Release the catch bar.



Extending the mattress platform

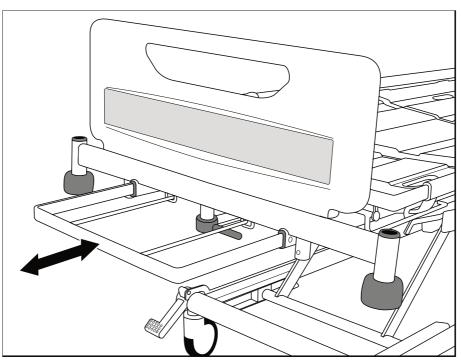
To shorten the bed:

Reverse the above procedure.

Bedstripper The bedstripper is used for supporting clean linen when (linen shelf) ★ the bed sheets are being changed.

Pull out the bedstripper from its closed position below the foot board.

After use, push the bedstripper back to its closed position.



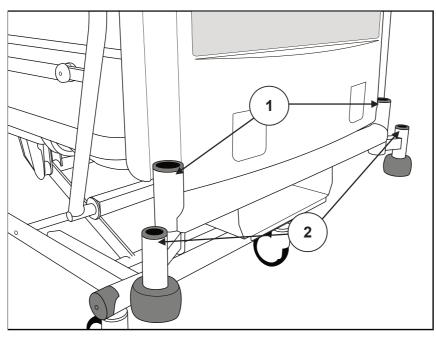
Bedstripper (linen shelf)

Caution

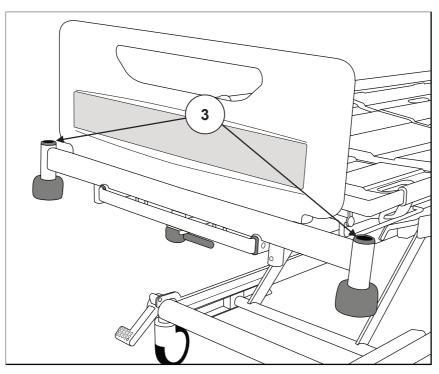
The safe working load of the bedstripper is 20kg.

Level the mattress platform before using the bedstripper.

Lifting poleLifting pole sockets (1) are located at the head end of the
mattress platform.accessory
socketsSockets to support compatible accessories are located at
the head end (2) and foot end (3) of the bed.



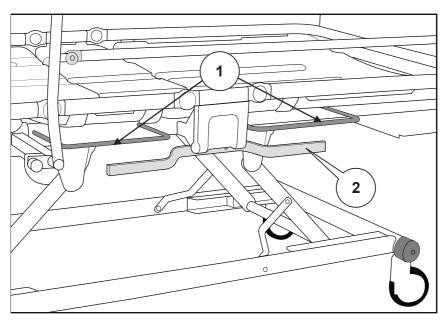
Lifting pole and accessory sockets (head end)



Accessory sockets (foot end)

Drainage bag rails Rails (1) to support drainage bags, etc. are located below the thigh and backrest sections on either side of the bed.

 \star The bed may also be fitted with DIN accessory rails (2).



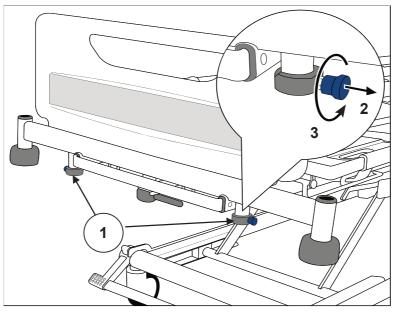
Drainage bag rails and DIN rail



The maximum weight that can be safely supported by each drainage bag rail and DIN rail is 5kg.

Head and footThe head and foot boards can be easily lifted off the bed
for access to the patient.

★ The head and foot boards can each be fitted with locking catches (1) to prevent accidental removal. **To unlock a board:** pull out the catches (2) and rotate them a quarter-turn (3); the board can now be lifted off the bed.



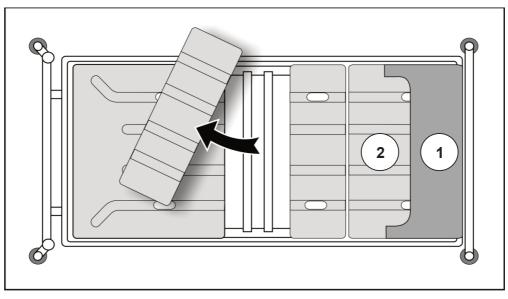
Locking foot board (foot end shown in this example)

After replacing a board on the bed, rotate the catches until they spring back into the locked position.

MattressAs standard the bed is supplied with curved platformplatformsections. Optional flat platform sections are available.

sections The four mattress platform sections (backrest, seat, thigh and calf) can be removed by pulling them upwards off the mattress platform frame.

Lift off the calf extension sheet (1) before removing the calf section (2).



Mattress platform sections (top view)

To replace each section, make sure it is correctly positioned on the mattress platform frame then press down firmly until it snaps into place.

Replace the calf extension sheet (1) by clipping it over the end of the mattress platform frame.

Do not combine flat and curved platform sections. Curved sections are lighter in colour than the dark grey flat platform sections to help differentiate between the two types.

Head and foot The head and foot boards can be easily lifted off the bed for access to the patient.

Underbed The underbed light illuminates the floor on either side of the bed. The light ★ The light is always on except when the bed is operating from the backup battery.

Adjusting the mattress platform

The bed is provided with two control handsets: a patient handset with basic controls only and a more comprehensive attendant control panel (ACP) for use by the carer. The functions on both handsets are described separately over the next few pages.

To adjust the mattress platform: press and hold the appropriate button until the required position is achieved. Movement will continue until the button is released or the limit of travel is reached.



If a warning tone (beep) sounds when pressing a button, this indicates that the bed is operating on the backup battery – refer to the section **Backup battery**.



If a button is held down for more than 90 seconds, the function will be automatically inhibited until the button is released. The function must then be unlocked as described in the section **Function lockout.**

If the patient handset or ACP is dropped onto a hard surface, check that all the buttons work correctly afterwards.

Patient handset

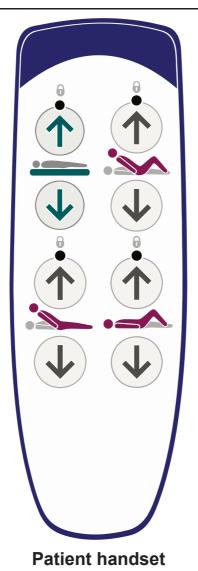
The patient handset can be positioned on either side of the bed.



WARNING

Store the handset on the side rail using the clip on the back; this will help to prevent accidental operation of the controls.

The patient should be shown how to use the handset by the carer.



R

On some models the patient handset does not have mattress platform height, backrest or thigh section controls.

Bio-Contour



The Bio-Contour up button simultaneously raises the backrest and thigh sections to provide upright patient profiling; the raised thigh section prevents the patient sliding down the bed.

The Bio-Contour down button returns the mattress platform to a flat position.

Backrest angle ★



These buttons raise and lower the backrest.

The backrest will pause when it reaches an angle approximately 30° above the horizontal.

Thigh section \star



These buttons raise and lower the thigh section.

When the thigh section is first raised from the flat position, the calf section will be in the Fowler position (angled downwards).

To change the calf section to the vascular (horizontal) position, refer to the section **Adjusting the calf position**.

Mattress Platform Height ★

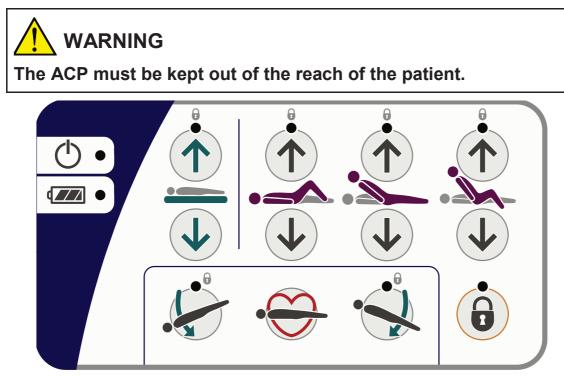


These buttons raise and lower the mattress platform. When the mattress platform is lowered to 38cm* above the floor, it will pause then continue to lower until it reaches its minimum height.

* 40cm on beds with 150mm castors.

Attendant Control Panel (ACP)

The ACP is located at the foot end of the bed.



Attendant Control Panel (ACP)

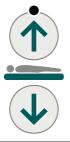


Power on indicator - lights when the bed is connected to the electricity supply



Battery indicator - refer to the section **Backup battery**.

Mattress platform height



These buttons raise and lower the mattress platform.

When the mattress platform is lowered to 38cm* above the floor, it will pause then continue to lower until it reaches its minimum height.

(* 40cm on beds with 150mm castors.)

At minimum height, clearance underneath the bed is reduced. Keep your feet away from the areas below the side rails and take extra care when using patient hoists or similar equipment.

Thigh section



These buttons raise and lower the thigh section.

When the thigh section is first raised from the flat position, the calf section will be in the Fowler position (angled downwards).

To change the calf section to the vascular (horizontal) position, refer to the section **Adjusting the calf position**.

Backrest



These buttons raise and lower the backrest.

The backrest will pause when it reaches an angle approximately 30° above the horizontal.

Auto-Chair



The *Auto-Chair up* button simultaneously raises the backrest and thigh sections, pausing when the backrest reaches 45°. Continue to hold the button down to lower the foot end of the mattress platform into a chair position.

When the backrest and thigh sections are raised, pressing the *Auto-Chair up* button again lowers the foot end of the mattress platform into a chair position; if the backrest angle is greater than 45°, it will return to 45° to prevent the patient from tipping forwards.

The *Auto-Chair down* button returns the mattress platform to a flat and level position.

Tilt angle



This button lowers the head end of the mattress platform (Trendelenburg position).



This button lowers the foot end of the mattress platform (reverse Trendelenburg position).



When returning from a tilted position, the mattress platform will pause at the level (no tilt) position.

CPR position



If the patient suffers a cardiac arrest, press and hold the CPR button. This will flatten the mattress platform (and lower it if necessary) to enable cardio-pulmonary resuscitation to be carried out.

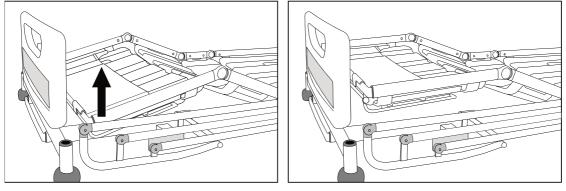
The CPR button overrides the function lockout settings.

Adjusting the calf position

When the thigh section is raised, the calf section can be manually changed to the vascular (horizontal) position:



Hold the side of the calf section frame. Lift the calf section upwards until it latches.



Changing from Fowler position (left) to vascular

To return the calf section to the Fowler position:

Use the patient handset or ACP to lower the thigh section to the flat position; then raise the thigh section again.

WARNING

Take care when lifting the calf section. Observe local manual handling guidelines.

Function lockout

Function lockout can be used to prevent operation of the controls, e.g. when inadvertent movement of the mattress platform could injure the patient.

The indicator above each function shows its status: on = function locked; off = function unlocked.



To lock (prevent) ALL functions: *press and hold* the Function Lock button for five seconds. The "lock" indicator above each function button will light.

To selectively lock (prevent) functions:



Press the Function Lock button. The indicator above the button will light.

Press the ACP button(s) corresponding to the function(s) to be locked. The "lock" indicator above the button will light.

After five seconds, the indicator above the Function Lock button will go out and the lockout settings are stored.



When a function is locked, any associated functions are automatically disabled, e.g. locking the backrest also disables Bio-Contour and Auto-Chair.



Function lockout settings are retained if the bed is disconnected from the electricity supply.

To unlock (allow) previously locked functions:



Press the Function Lock button. The indicator above the button will light.

Press the ACP button(s) corresponding to the function(s) to be unlocked. The "lock" indicator above the button will go out.

After five seconds, the indicator above the Function Lock button will go out and the lockout settings are stored.

Backup battery



Caution

To ensure the battery is kept fully charged and prevent damage to the battery, the bed should be connected to the electricity supply at all times during normal use.

The battery is intended for occasional short term use. Its life will be reduced if it is used to power the bed for long periods.

The backup battery allows operation of the bed for short periods when it is disconnected from the electricity supply or in emergency situations when the electricity supply is not available.

The battery's charge level is indicated as follows:



If an intermittent warning tone (*beep-beep-beep*) sounds when operating the bed, the battery is between 75% and 100% charged.

In this condition all bed functions remain operational.



If a continuous warning tone sounds when operating the bed, the battery is between 10% and 75% charged.

In this condition, all bed functions remain operational.



If the ACP battery indicator lights red, the battery is less than 10% charged.

In this condition, all functions are locked.

Continued on next page

Recharging the backup battery

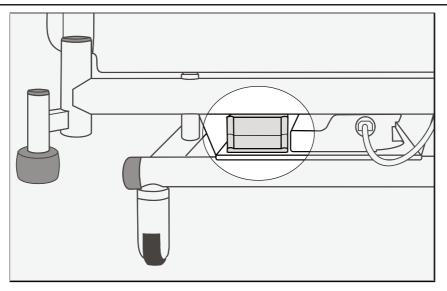
To recharge the battery, connect the bed to the electricity supply. Allow at least eight hours to recharge the battery when it is completely discharged.



While the battery is recharging, the ACP battery indicator lights yellow. The indicator will go out when the battery is fully charged.

The battery must only be recharged using the built-in charger. Do not use a separate charger or power supply.

The backup battery must be ventilated while recharging. Do not cover the battery or obstruct the area around it.



Location of backup battery

Duty cycle lockout

Continuous operation of the controls may exceed the duty cycle of the bed's electrical system, causing the indicators above the buttons to flash. After 30 seconds, the indicators will light and all functions are locked.

If this happens, wait for at least 18 minutes then follow the unlocking procedure described in the section **Function lockout**.

5. Product Care

Disconnect the bed from the electricity supply before starting any cleaning or maintenance activity. The bed will still operate on battery power if the function has not been locked on the ACP.

Decontamination



Do not allow the mains plug or power supply cord to get wet.



These instructions also apply to accessories but not to mattresses or side rail pads.

For lifting straps and handles, refer to the manufacturer's instructions supplied with the product.

Remove the side rails from the bed to allow better decontamination on beds with removable side rails.

The bed should be cleaned and disinfected weekly, and before a new patient uses the bed.

Cleaning Remove the mattress and any accessories from the bed.

The head/foot boards and mattress platform sheets should be removed from the bed for cleaning.

Wearing suitable protective clothing, clean all surfaces with a disposable cloth moistened in hand hot water and a neutral detergent.

Start by cleaning the upper sections of the bed and work along all horizontal surfaces. Work methodically towards the lower sections of the bed and clean the wheels last. Take extra care to clean areas that may trap dust or dirt.

Wipe over with a new disposable cloth moistened with clean water, and dry with disposable paper towels.

Allow the cleaned parts to dry before replacing the mattress.

Continued on next page

Disinfecting After cleaning the bed as described above, wipe all surfaces with sodium dichloroisocyanurate (NaDCC) at a concentration of 1,000 parts per million (0.1%) of available chlorine. In the case of pooling body fluids, e.g. blood, the concentration of NaDCC should be increased to 10.000 parts per million (1%) of available chlorine. Use of other ArjoHuntleigh recommends sodium dichloroisocyanurate disinfectants (NaDCC) as a disinfectant because it is effective, stable and has a fairly neutral pH. Many other disinfectants are used in healthcare facilities, and it is not possible for ArjoHuntleigh to test each one to determine whether it may affect the appearance or performance of the bed. If facility protocols require the use of a disinfectant other than NaDCC (e.g. diluted bleach or hydrogen peroxide), it should be used with care and in accordance with the



Caution

Do not use abrasive compounds or pads, or phenol-based disinfectants.

manufacturer's instructions.

Do not use jet stream cleaning or wash tunnels.

Do not remove grease from the actuator pistons.

Preventive maintenance

This product is subject to wear and tear during use. To ensure that it continues to perform within its original specification, preventive maintenance procedures should be carried out at the intervals shown.



This list indicates the minimum recommended level of preventive maintenance. More frequent inspections should be carried out when the product is subjected to heavy use or aggressive environments, or where required by local regulations.

Failure to carry out these checks, or continuing to use the product if a fault is found, may compromise the safety of both the patient and carer. Preventive maintenance can help to prevent accidents.

Actions to be done by carer	Daily	Weekly
Check operation of side rails	\checkmark	
Check patient handset and cable		✓
Check ACP and cable		✓
Visually check castors		✓
Visually check power supply cord and mains plug		✓
Check the mattress for damage and fluid ingress		✓
Examine the lifting pole, strap and handle \star	\checkmark	
Check for damage to the side rail pads \star		✓
Check for correct fitting of the locking pin on 3 bar and 5 bar removable side rails		✓
Check operation of manual CPR release handles on both sides of the bed		✓

If the result of any of these tests is unsatisfactory, contact ArjoHuntleigh or an approved service agent.



The procedures below must be carried out by suitably trained and qualified personnel. Failure to do so may result in injury or an unsafe product.

Actions to be done by qualified personnel	Yearly
Carry out a full test of all electrical bed positioning functions (backrest, height, tilt, etc.)	✓
Check that the bedstripper / linen shelf remains in its closed position when maximum foot down tilt is applied.	✓
Check that the bed operates correctly using the backup battery as described in the next section Battery test.	~
Check operation of the manual CPR release handles on both sides of the bed	✓
Check operation the of castors, paying special attention to braking and steering functions	✓
Check that the calf section latches securely in the horizontal (vascular) position when manually raised.	~
Check that the bed extension locks securely in all three positions	~
Examine the power supply cord and mains plug – if damaged, replace the complete assembly; do not use a rewireable plug	✓
Examine all accessible flexible cables for damage and deterioration	~
Check all accessible nuts, bolts and other fasteners are present and correctly tightened	✓
Check any accessories fitted to the bed, paying particular attention to fasteners and moving parts	\checkmark

Battery test

Check the condition of the backup battery by carrying out the following test.

1. Disconnect the bed from the electricity supply.



2. Raise the mattress platform to maximum height - ignore the battery warning tone.



3. Raise the backrest and thigh sections as far as they will go.



4. Press and hold the CPR button. The mattress platform will move to a flat, mid-height position.



5. Lower the mattress platform to minimum height.



6. Apply maximum head down tilt (Trendelenburg).



7. Return the mattress platform to the level position. Apply maximum foot down tilt (reverse Trendelenburg).

If this test is not completed successfully, connect the bed to the electricity supply for at least eight hours to recharge the battery then perform the test again. If the bed fails a second time, contact ArjoHuntleigh or an approved service agent.

To maintain best performance, the backup battery should be replaced every four years by an approved service agent.

Troubleshooting

If the equipment fails to operate correctly, the table below suggests some simple checks and corrective actions. If these steps fail to resolve the problem, contact ArjoHuntleigh or an approved service agent.

Symptom	Possible cause	Action
"Beeping" sound when using the bed	Bed is operating from the backup battery	Check the power supply cord is plugged in and the electricity supply is OK
		Check fuse in mains plug (where fitted)
One or more bed functions inoperative	Function(s) locked on ACP	Unlock function(s) on ACP
All functions inoperative except for raising mattress platform	Height control software error	Raise the mattress platform to maximum height to reset software
Bed is difficult to manoeuvre around corners	Brake pedals in "steer" position	Place brake pedals in the "free" position
All indicators on ACP lit or flashing	Duty cycle of electrical system exceeded	Refer to section Duty cycle lockout in Chapter 4

Fault indications

The bed's control software indicates problems in the electrical system by means of flashing indicators on the Attendant Control Panel (ACP). If you experience any of the indications below, contact ArjoHuntleigh or an approved service agent.

Indication	Possible cause
ACP mattress platform height and head down tilt indicators flashing	Height actuator fault (foot end)
ACP mattress platform height and foot down tilt indicators flashing	Height actuator fault (head end)
ACP backrest indicator flashing	Backrest actuator fault
ACP thigh section indicator flashing	Thigh section actuator fault
Mattress platform height, tilt, backrest and thigh section indicators flashing.	Control unit fault

Product lifetime

The lifetime of this equipment is typically ten (10) years. "Lifetime" is defined as the period during which the product will maintain the specified performance and safety, provided it has been maintained and operated in conditions of normal use in accordance with the requirements in these instructions.

6. Accessories and Cables

Recommended accessories for the **Enterprise 5000X** range are shown in the table below.

Note that some items may not be available in all countries.

Accessory	Product Code
Lifting pole with strap and handle	ENT-ACC01
IV pole	ENT-ACC02
Angled IV pole	ENT-ACC04
Fracture frame	ENT-ACC05
Side rail pads	ENT-ACC06
Syringe pump holder	ENT-ACC07
Oxygen bottle holder (for CD, D, E & PD cylinders)	ENT-ACC08
Small traction assembly	ENT-ACC10
ACP holder	ENT-ACC11
Additional hooks for IV pole	ENT-ACC14
Power supply cord storage hook (supplied with bed)	ENT-ACC15
Oxygen bottle holder (for B5 cylinder)	ENT-ACC18
Urine bottle holder	ENT-ACC19
Heavy duty IV pole	ENT-ACC24
Transducer mounting pole	ENT-ACC26
Head end traction assembly	ENT-ACC32
ITU head end panel (head board)	ENT-ACC34
Oxylog [®] equipment bracket	ENT-ACC40
Bed pan holder	ENT-ACC56
Drip cover	ENT-ACC63
Monitor shelf	ENT-ACC64
Lifting pole mounted IV fluid bag holder	ENT-ACC65
Foot end infill panels	ENT-ACC66
Safety side height extensions	ENT-ACC67

Oxylog is a registered trademark of Dräger Medical.

٢	No.	Name	Cable Length (m)	Whether shielding or not	Remark
1	1	Cable	2.895	No	/

7. Technical Data

General	
Safe working load	250kg
Maximum patient weight	185kg
Product weight	144kg approx.
Audible noise	50dB approx.
Operating conditions	
Temperature	5°C to 40°C
Relative humidity	20% to 90% at 30°C, non-condensing
Atmospheric pressure	700hPa to 1060hPa
Electrical data	
Power input	1.25A max. at 230V a.c. 50/60Hz 2A max. at 120V a.c. 50/60Hz
Duty cycle	10% (2 min. on, 18 min. off)
Safety Standards USA/Canada	Medical equipment classified in accordance with UL 60601-1 CAN/CSA C22.2 No.601.1M90 IEC 60601-2-38 and ANSI/AAMI ES60601-1:2005 CAN/CSA C22.2 No.60601-1:08 IEC 60601-2-52:2009
Other Safety standards	IEC 60601-1:1988+A1+A2 IEC 60601-2-38:1996+A1:1999 IEC 60601-1:2005 & IEC 60601-2-52:2009
Electric shock protection	Class I Type B
EMC	Complies with EN 60601-1-2:2002 and 2007
Potential equalisation terminal	Complies with EN 60601-1:2001 and 2006
Liquid ingress protection	IPX4
Backup battery	2 x 12V series connected, sealed, rechargeable lead/acid gel, 1.2Ah.

Dimensions Subject to normal	manufacturing variation	ns	
Overall length	Head end board on mattress platform	Head end board on base	
Position 1 (Short)	219cm	224cm	
Position 2 (Standard)	230cm	235cm	
Position 3 (Extended)	242cm	247cm	
In-bed length			
Position 1 (Short)	192cm		
Position 2 (Standard)	203cm		
Position 3 (Extended)	215cm		
Overall width	103cm		
Height of mattress platform (cen	tre of seat section to f	loor)	
With 125mm castors	32cm to 76cm		
With 150mm castors	34cm to 78cm		
Head down tilt angle	12° min.		
Foot down tilt angle	12° min.		
Mattress size (refer to Chapter 3	for details)		
Position 2 (Standard)	202cm x 88cm, 12.5	to 18cm thick	
Mattress platform angles	d	a = 62° max. b = 20° max. c = 16° max. d = 98° min.	
Environmental protection			
Incorrect disposal of this equipm gas springs, actuators, batteries substances that are hazardous t hazards, contact ArjoHuntleigh f	and other electrical d o the environment. To	evices, may produce minimise these	

Transportation and storage Handle with care. Do not drop. Avoid shock or violent impact. This equipment should be stored in a clean, dry and well-ventilated area which meets the following conditions: Temperature -10°C to 50°C Relative humidity 20% to 90% at 30°C, non-condensing Atmospheric pressure 700hPa to 1060hPa Caution If the bed is stored for a long time, it should be connected to the electricity supply for 24 hours every three months to recharge the backup battery, otherwise it may become unserviceable. **Symbols** 0 SWL Safe working load Maximum patient weight Alternating current (a.c.) Caution i Refer to instructions for use Type B applied part. Applied parts are considered to be: Upper frame section, Bed controls, Side Rails, Head and Foot Boards Manufacturer / date of manufacture

Symbols (continued)	
CE	Complies with the European Medical Device Directive 93/42/EEC
	Waste Electrical and Electronic Equipment (WEEE) - do not dispose of this product in general household or commercial waste
SN	Serial number
REF	Model number
	Potential equalisation terminal
	Protective earth (ground)
	Recommended mattress size
	Recommended patient height
	Calf section vascular position
	Mattress platform extension
	Do not install side rails on the bed \star
Carlos Carlos	Refer to manual

8. Warranty and Service

ArjoHuntleigh standard terms and conditions apply to all sales; a copy is available on request. These contain full details of warranty terms and do not limit the statutory rights of the consumer.

For service, maintenance and any questions regarding this product, please contact your local ArjoHuntleigh office or approved distributor. A list of ArjoHuntleigh offices can be found at the back of this manual.

Have the model number and serial number of the equipment to hand when contacting ArjoHuntleigh regarding service, spare parts or accessories.

9. Electromagnetic Compatibility

The bed is intended for use in the electromagnetic environment specified in the tables below. The customer or the user of the bed should ensure that it is used in such an environment. Failing to ensure that these tables are properly followed may result in the product not working properly.

Portable and mobile frequency communication equipment may affect the normal use of the E5000X, please use E5000X under the recommended electromagnetic environment.

Caution

The use of non-approved accessories may result in increased emissions or reduced immunity of the equipment. A list of approved accessories is included in the product instructions for use. See chapter 6 – Accessories and Cables.

When this equipment is used adjacent to other electronic devices, the user should observe the equipment to verify normal operation.

Guidance and manufacturer's declaration – electromagnetic emissions

The bed is intended for use in the electromagnetic environment specified below. The customer or the user of the bed should assure that it is used in such an environment.

Emissions test	Compliance	Electromagnetic environment - guidance
RF emissions CISPR 11	Group 1	The bed uses RF energy only for its internal function. Therefore its RF emissions are very low and are not likely to cause any interference in nearby electronic equipment.
RF emissions CISPR 11	Class B	
Harmonic emissions IEC 61000-3-2	Class A	The bed is suitable for use in all establishments, including domestic establishments and those directly connected to the public low-voltage power supply network that supplies
Voltage fluctuations/ flicker emissions IEC 61000-3-3	Complies	buildings used for domestic purposes.

			ironment specified below. The used in such an environment.
Immunity test	IEC 60601 test level	Compliance level	Electromagnetic environment - guidance
Electrostatic discharge (ESD) IEC 610000-4-2	± 6kV contact ± 8kV air	± 6kV contact ± 8kV air	Floors should be wood, concrete or ceramic tile. If floors are covered with synthetic material, the relative humidity should be at least 30%
Electrical fast transient/burst IEC 61000-4-4	± 2kV for power supply lines ± 1kV for	± 2kV	Mains power quality should be that of a typical commercial or hospital environmen
	input/output lines	Not applicable	
Surge	\pm 1kV line to line	$\pm 1 \text{kV}$	Mains power quality should be that of a
IEC 61000-4-5	$\pm 2kV$ line to earth	$\pm 2kV$	typical commercial or hospital environmen
Voltage dips, short interruptions and voltage variations on power supply input lines IEC 61000-4-11	$70\% U_T$ $(30\% \text{ dip in } U_T)$ for 25 cycles $40\% U_T$ $(60\% \text{ dip in } U_T)$ for 5 cycles $<5\% U_T$ $<>95\% \text{ dip in } U_T)$ for 0.5 cycle $<5\% U_T$ $<>95\% \text{ dip in } U_T)$ for 5 sec	70% of input voltage for 500ms 40% of input voltage for 100ms <5% of input voltage for 10ms <5% of input voltage for 5000ms	Mains power quality should be that of a typical commercial or hospital environmer If the user of the bed requires continued operation during power mains interruption it is recommended that the bed be powered from an uninterruptible power supply or battery.
Power frequency (50/60Hz) magnetic field IEC 61000-4-8	3A/m	3A/m	Power frequency magnetic fields should be at levels characteristic of a typical location in a typical commercial or hospital environment.

			ironment specified below. The used in such an environment.
Immunity test	IEC 60601 test level	Compliance level	Electromagnetic environment - guidance
			Portable and mobile RF communication s equipment should be used no closer to any part of the bed, including cables, than the recommended separation distance calculated from the equation applicable to the frequency of the transmitter. Recommended separation distance
Conducted RF IEC 61000-4-6	3V rms 150kHz to 80MHz	3V	$d = 1.2\sqrt{P}$
Radiated RF IEC 61000-4-3	3V/m 80MHz to 2.5GHz	3V/m	$d = 1.2\sqrt{P}$ 80 MHz to 800MHz
			$d = 2.3\sqrt{P}$ 800MHz to 2.5GHz
			Where <i>P</i> is the maximum output power rating of the transmitter in watts (W) according to the transmitter manufacturer and <i>d</i> is the recommended separation in metres (m). Field strengths from fixed RF transmitters, as determined by an electromagnetic site survey, ^a should be less than the compliance level in each frequency range. ^b Interference may occur in the vicinity of equipment marked with the following symbol:
NOTE 2 These gu	Hz and 800MHz, the high addelines may not apply on and reflection from s	in all situations. Ele	ctromagnetic propagation is affected by

⁴ Field strengths from fixed transmitters, such as base stations for radio (cellular/cordiess) telephones and land mobile radios, amateur radio, AM and FM radio broadcast and TV broadcast cannot be predicted theoretically with accuracy. To assess the electromagnetic environment due to fixed RF transmitters, an electromagnetic site survey should be considered. If the measured field strength in the location in which the bed is used exceeds the applicable RF compliance level above, the bed should be observed to verify normal operation. If abnormal performance is observed additional measures may be necessary, such as reorienting or relocating the bed.

b Over the frequency range 150kHz to 80MHz, field strengths should be less than 3V/m.

Recommended separation distances between portable and mobile RF communications equipment and the bed

The bed is intended for use in an electromagnetic environment in which radiated RF disturbances are controlled. The customer or the user of the bed can help prevent electromagnetic interference by maintaining a minimum distance between portable and mobile RF communications equipment (transmitters) and the bed as recommended below, according to the maximum output power of the communications equipment.

Rated maximum output power of transmitter W	Separation distance according to frequency of transmitter m		
	150kHz to 80MHz	80MHz to 800MHz	800MHz to 2.5GHz
	$d = 1.2\sqrt{P}$	$d = 1.2\sqrt{P}$	$d = 2.3\sqrt{P}$
0.01	0.12	0.12	0.23
0.1	0.38	0.38	0.73
1	1.2	1.2	2.3
10	3.8	3.8	7.3
100	12	12	23

For transmitters rated at a maximum output power not listed above, the recommended separation distance d in metres (m) can be estimated using the equation applicable to the power of the transmitter, where P is the maximum output power rating of the transmitter in watts (W) according to the transmitter manufacturer.

NOTE 1 At 80MHz and 800MHz, the higher frequency range applies.

NOTE 2 These guidelines may not apply in all situations. Electromagnetic propagation is affected by absorption and reflection from structures, objects and people.

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