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# ENTERPRISE 8000X (E8X)

## Instructions for Use

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**ARJOHUNTLEIGH**  
GETINGE GROUP



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## Warnings, Cautions and Notes

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### **WARNING**

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

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### **Caution**

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

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Explains or amplifies a procedure or condition.

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Indicates an optional item or feature.

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## 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. Caregivers 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 caregivers.**

**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.**



## **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 when the patient is unattended.

It is recommended to use the *Function Lockout* facility on the Attendant Control Panel to prevent unintended movement in situations where objects may press against the patient's controls.

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 accessories attached to it (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 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.

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

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These instructions contain information for the installation, use and maintenance of the ArjoHuntleigh Enterprise® 8000X acute care hospital bed. These beds have multiple functions to provide the optimum nursing position for both patient and caregiver.

## *Standard features:*


- Folding split side rails with integrated controls
- 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
- Underbed lights
- 125mm single wheel castors

## *Optional features:*

- ★ 150mm (single or dual wheel) castors
- ★ Bedstripper (linen shelf)
- ★ Additional brake pedals at head end
- ★ DIN accessory rails
- ★ Lockable foot board
- ★ Full width brake bar
- ★ Radio translucent backrest with X-ray cassette tray

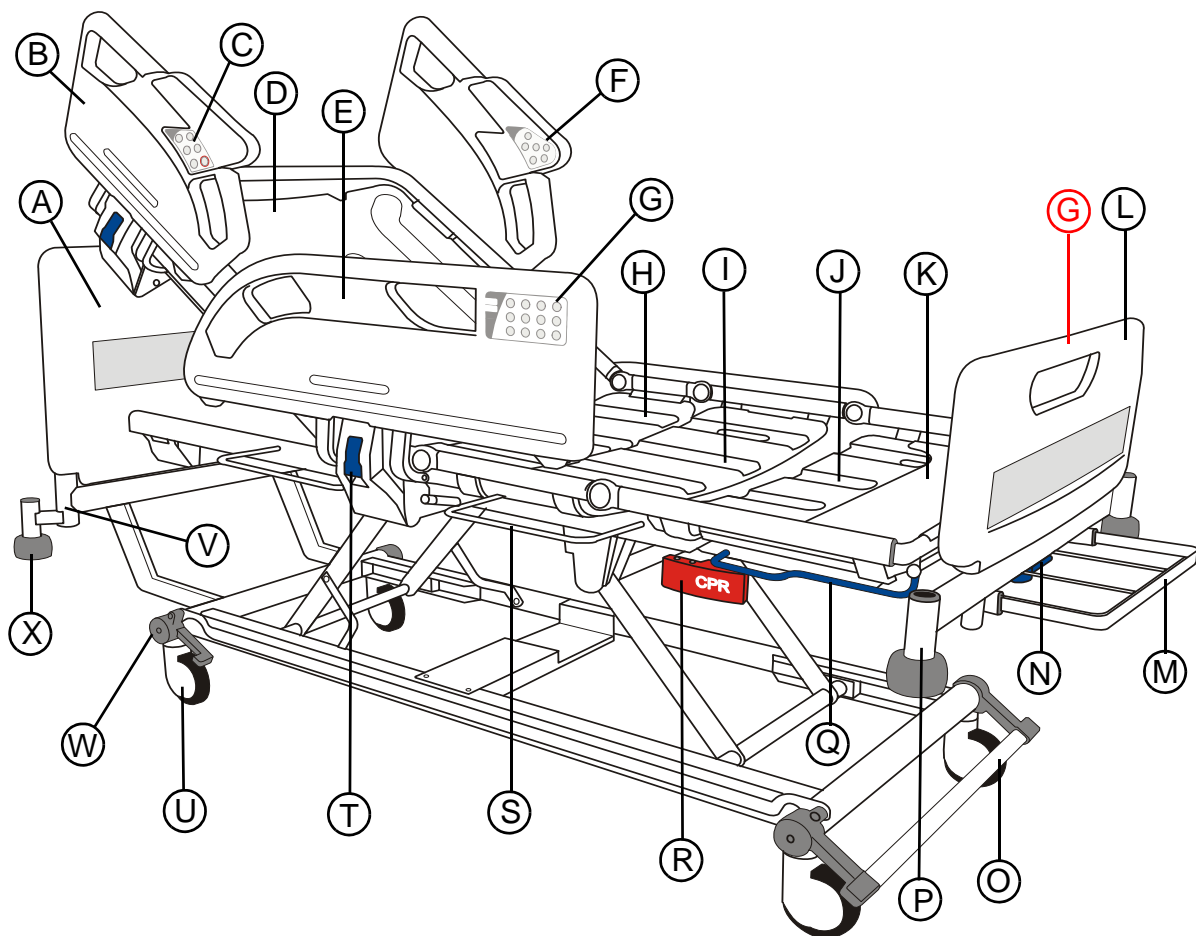
Optional features are specified by the customer at the time of ordering. The chosen options are indicated by the equipment model number.

[illegible]

 **Caution**  
Before using the bed, ensure that the “Power in” rating on the specification label is compatible with the local electricity supply.



## Product overview



- |                                  |                            |
|----------------------------------|----------------------------|
| A. Head board                    | O. Brake pedal / bar ★     |
| B. Head end side rail            | P. Accessory socket        |
| C. Caregiver controls            | Q. Extension catch bar     |
| D. Backrest section              | R. CPR release handle      |
| E. Foot end side rail            | S. Drainage bag rail       |
| F. Patient controls              | T. Side rail release lever |
| G. Attendant Control Panel (ACP) | U. Castor                  |
| H. Seat section                  | V. Lifting pole socket     |
| I. Thigh section                 | W. Head end brake pedal ★  |
| J. Calf section                  | X. Roller buffer           |
| K. Calf extension sheet          |                            |
| L. Foot board                    |                            |
| M. Bedstripper (linen shelf) ★   |                            |
| N. Extension locking handle      |                            |



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

## 2. Clinical Applications

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### **WARNING**

**To ensure the patient can use the bed safely, their age 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** This product is intended to provide support to patients during a stay in hospital or other care facility and allows positioning for CPR and Trendelenburg.

The bed is suitable for use in the following situations:

- Intensive/critical care provided in a hospital where 24-hour medical supervision and constant monitoring is required, e.g. ITU, ICU and CCU (\*Application Environment 1).
- 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 2).
- 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 (\*Application Environment 3).

\* Application Environments are defined in IEC 60601-2-52:2009.

**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 caregiver's discretion, use the controls to adjust their own position.

The mattress platform can be positioned to assist with such clinical procedures as may be required in the Application Environments defined above.

## Contra-indications

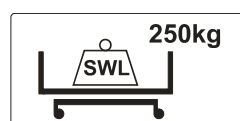
The bed is not suitable for use in the following situations:

- A domestic area, i.e. home healthcare (\*Application Environment 4).
- Outpatient care (\*Application Environment 5).

\* Application Environments are defined in IEC 60601-2-52:2009.

The bed is not suitable for patients under 40kg in weight.

The maximum recommended patient weight is 185kg.



The safe working load (SWL) of the bed is 250kg.

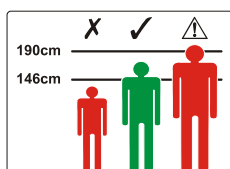
The safe working load is calculated as follows (in accordance with IEC 60601-2-52):

Maximum patient weight.....	185kg
Mattress .....	20kg
Accessories (including attached loads) .....	45kg
TOTAL .....	250kg



## 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 caregiver, patients taller than 190cm may be accommodated by extending the bed - refer to **Bed length adjustment** on page 17. Ensure that the patient's height does not exceed the *In-bed length* shown on page 43.

### 3. Installation

---

The following chapter describes how to install the bed.



#### **WARNING**

**If the power supply cord or plug is damaged, the complete assembly must be replaced by authorised service personnel. Do not remove the fitted plug, or use a rewirable 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 or trapped between the bed frame and head board.**

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

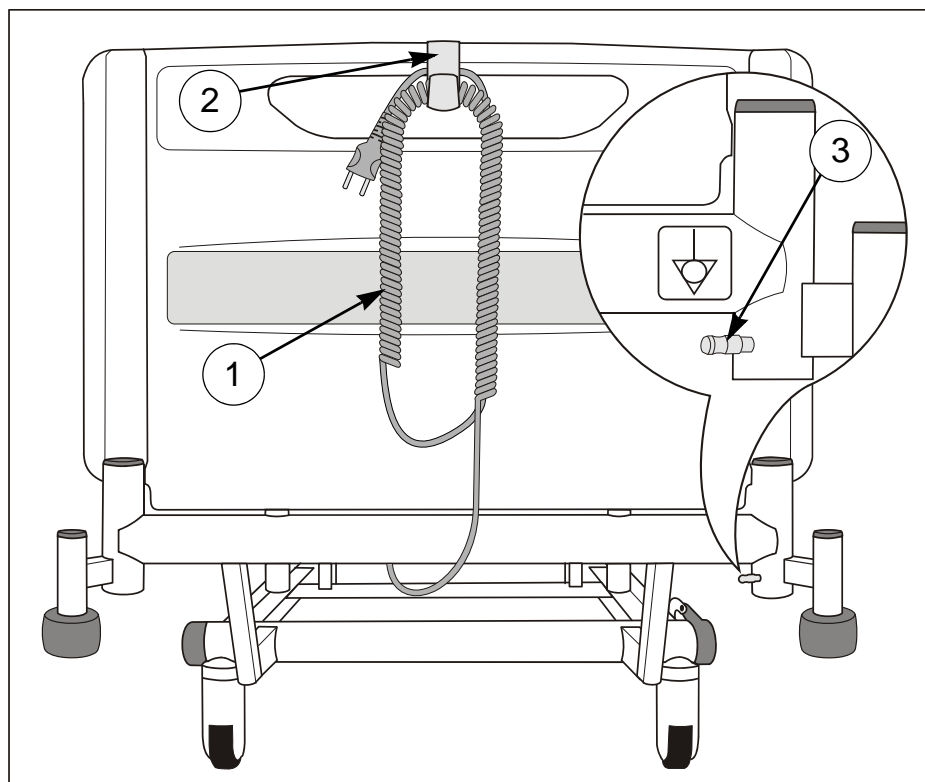


#### **Caution**

**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. After charging, check that the battery is fully serviceable by carrying out a battery test as shown on page 38.**

## Electricity supply

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



**Power supply cord and potential equalisation terminal**

When the bed is connected to the electricity supply, an indicator will light on the Attendant Control Panel (see page 27).

The power supply cord (1) is fitted with a plastic hook (2). 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.

A potential equalisation terminal (3) is located at the head end of the bed.

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



## Underbed light

The underbed light illuminates the floor on either side of the bed.

The underbed light is always on unless the bed is in its low power state; refer to the section “Low power mode” on page 32.

## Mattresses



### WARNING

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

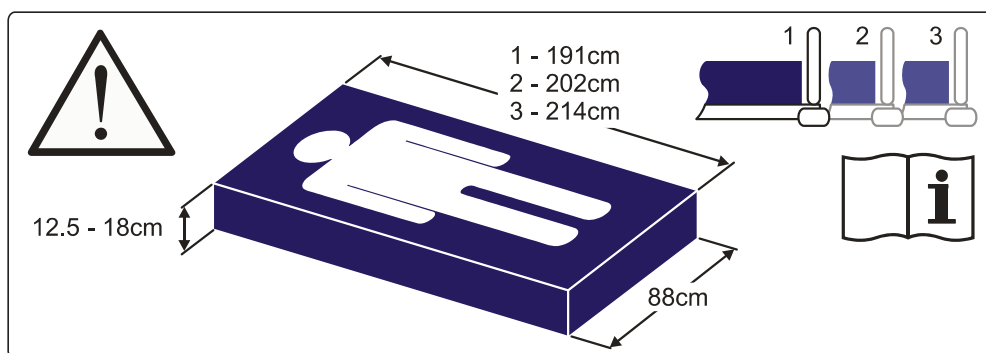
**Entrapment hazards may exist when using a very soft mattress, even if it is the correct size.**

**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.**

A label on the calf extension sheet indicates the correct mattress size:



**Mattress size label**



*The numbers 1, 2 and 3 on the label indicate different mattress platform lengths; refer to **Bed length adjustment** on page 17.*

***Mattresses and  
side rails***

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 IEC 60601-2-52, 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

The following chapter describes how to operate the bed.



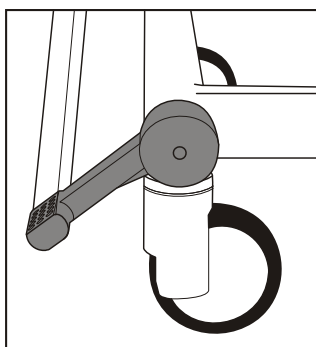
### WARNING

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

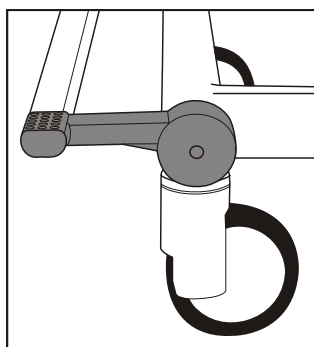
### Brakes and steering

The pedals have three positions as shown below:

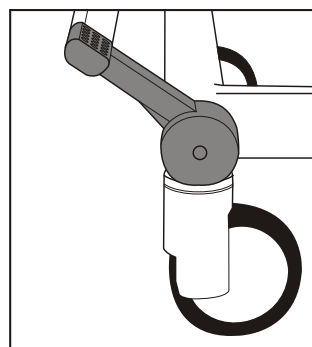
- **BRAKE:** brakes are applied on all four castors.
- **FREE:** all four castors are free to rotate and swivel.
- **STEER:** all four castors can rotate, but the steering castor (see below) is locked so that it cannot swivel. This helps to keep the bed on a straight line.



**BRAKE**

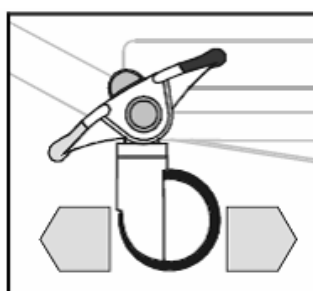
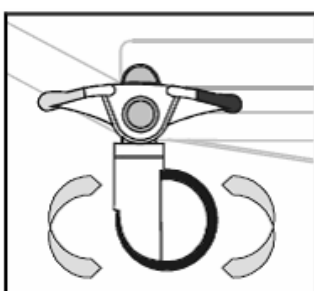
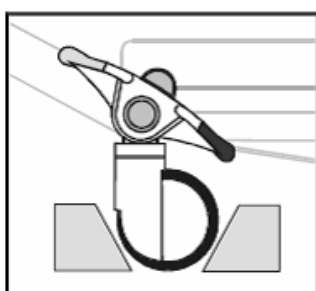


**FREE**



**STEER**

### Old Brake System



#### **Brake pedal bar★**

The brake pedals at the foot end of the bed can be linked by a full width bar.

#### **Using the steering castor**

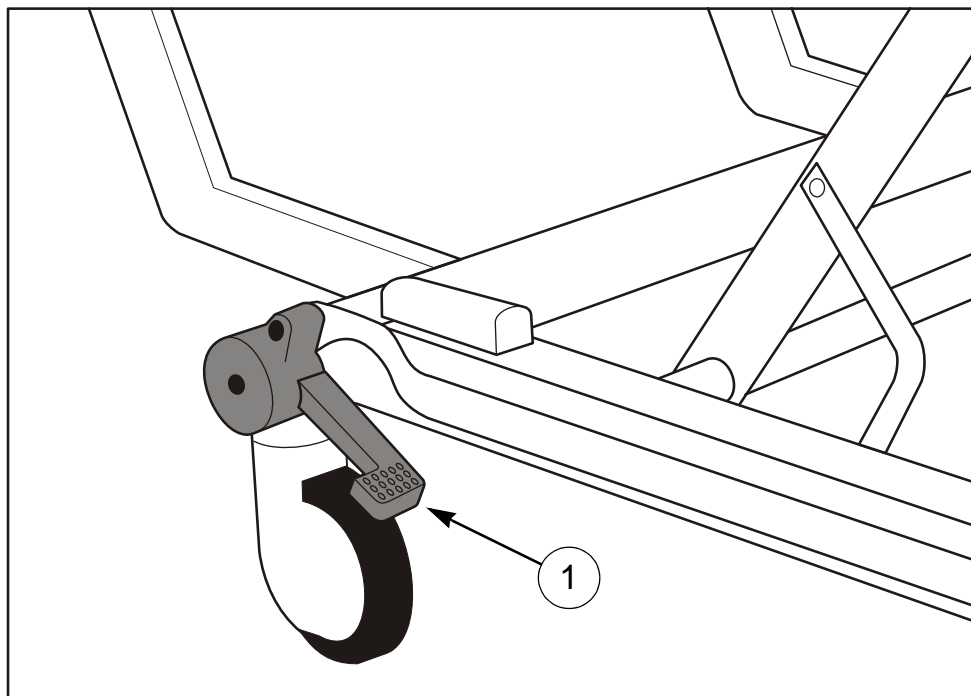
Position the bed so that all the castors line up in the direction of travel. Raise the pedals to lock the steering castor and move the bed by pushing it from the opposite end.



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



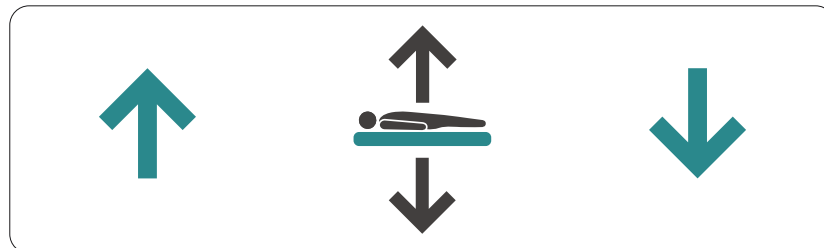
**Head end brake pedals★** Additional brake pedals (1) may be fitted at the head end of the bed. These operate in the same way as the foot end pedals.



Head end brake pedal

### Foot Pedal for Adjustment of Bed Height (Optional)

Bed height can be adjusted from bed control panels and from the foot pedal located near the foot end of the bed.



Lift cover of pedal with foot and press left side to raise the bed height. Press right side of pedal to lower the bed height.

## Side rails



### **WARNING**

**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.**

**Ensure that the mattress is suitable for use with side rails - see *Mattresses and side rails* on page 9.**

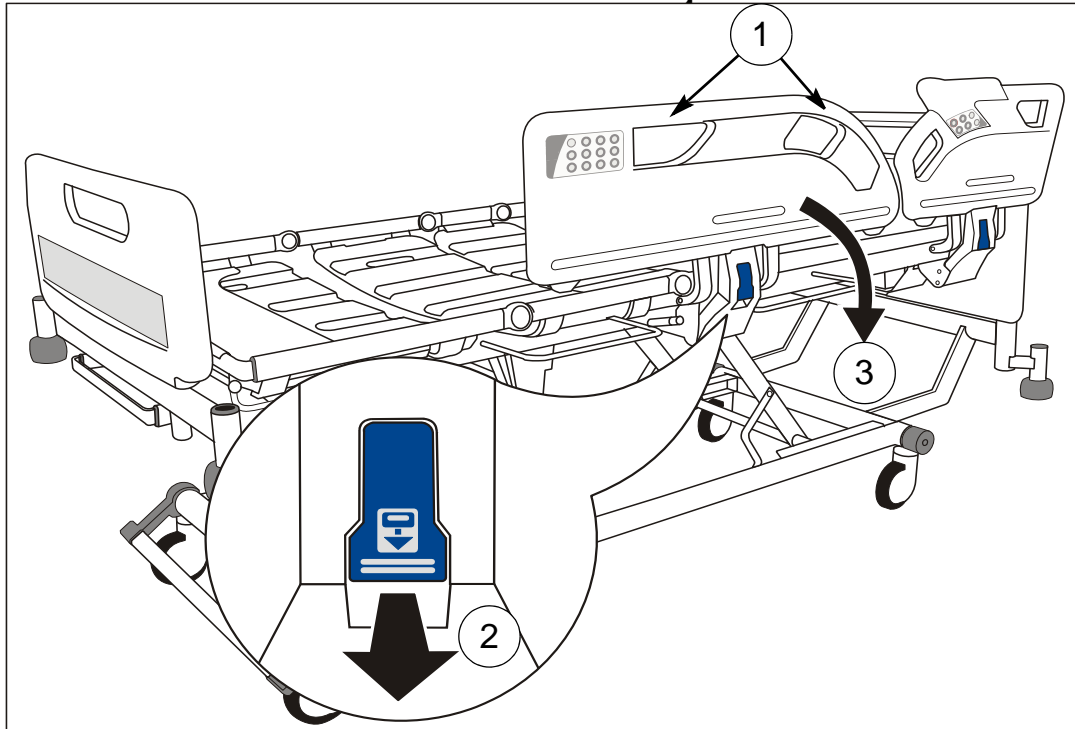
**To prevent possible entrapment, make sure the patient's head and limbs are clear of the side rails when adjusting the mattress platform.**



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

### To lower the side rail:

Hold either side rail handle (1). Pull the blue release lever (2) and lower the side rail (3), holding the side rail until it is completely lowered. The side rail folds down below the mattress platform.



**Side rail operation**



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

### 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.



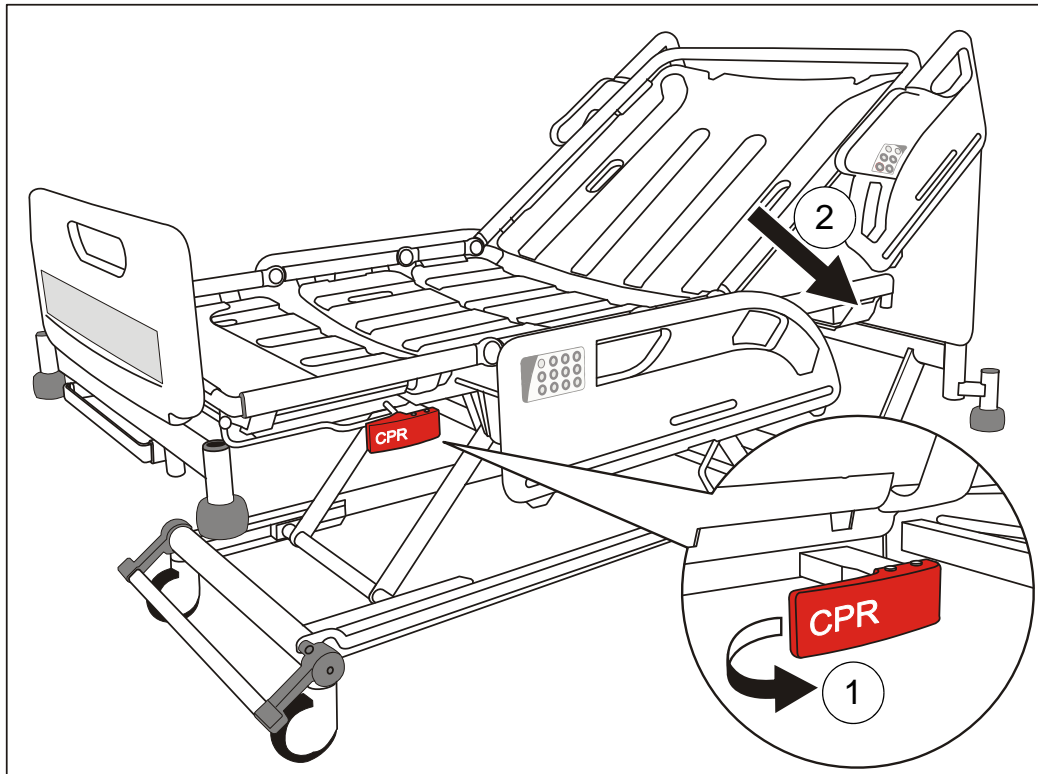
### **WARNING**

**Make sure the locking mechanism is securely engaged when the side rails are raised.**

## CPR backrest release

Manual CPR release handles are located below the calf 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 (2) to enable cardio-pulmonary resuscitation to be carried out.



CPR backrest release



### WARNING

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 tray (Optional)

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



### WARNING

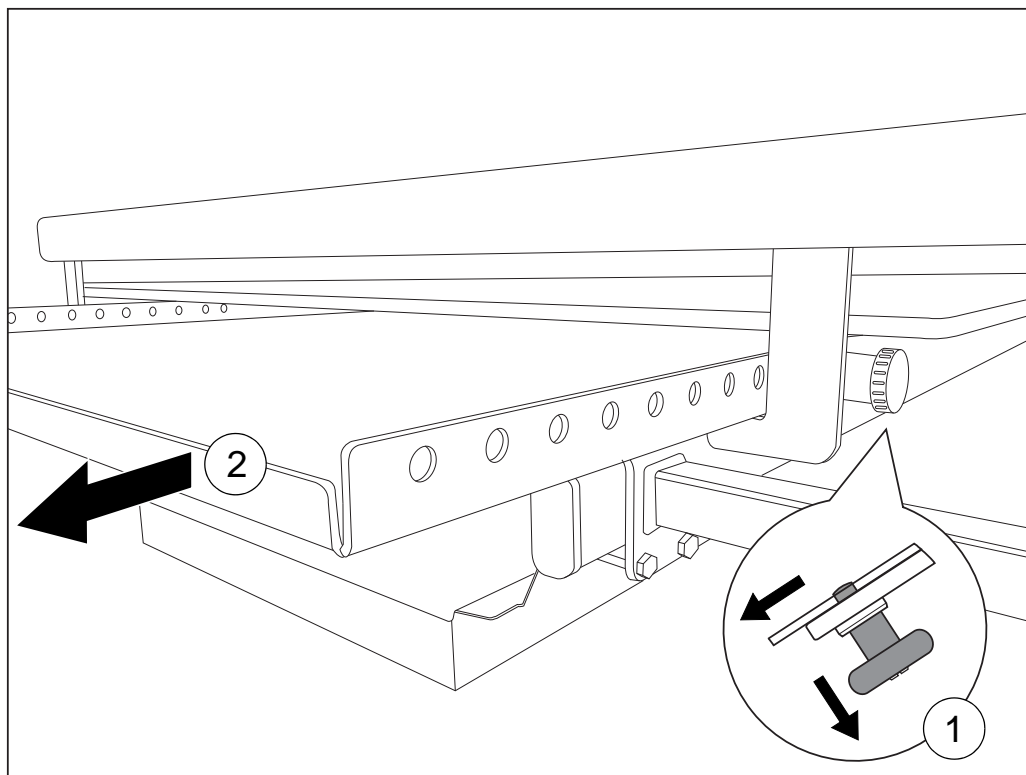
**Position the mattress platform at an ergonomic height to allow easy loading and removal of X-ray cassettes.**

**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.**

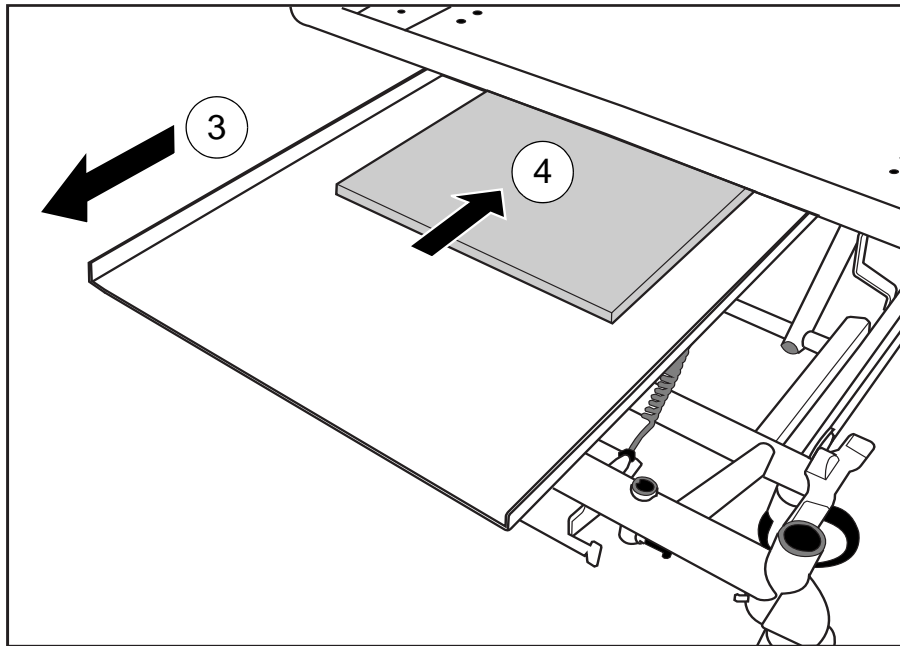
**Ensure the X-ray cassette tray is held securely in place by the catch at all times.**

**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.



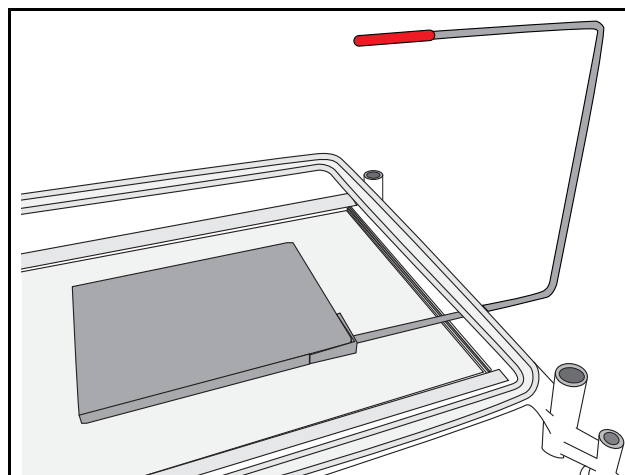
**X-ray cassette tray operation**

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 adjustment

The length of the bed is adjustable to three set positions. 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



### WARNING

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

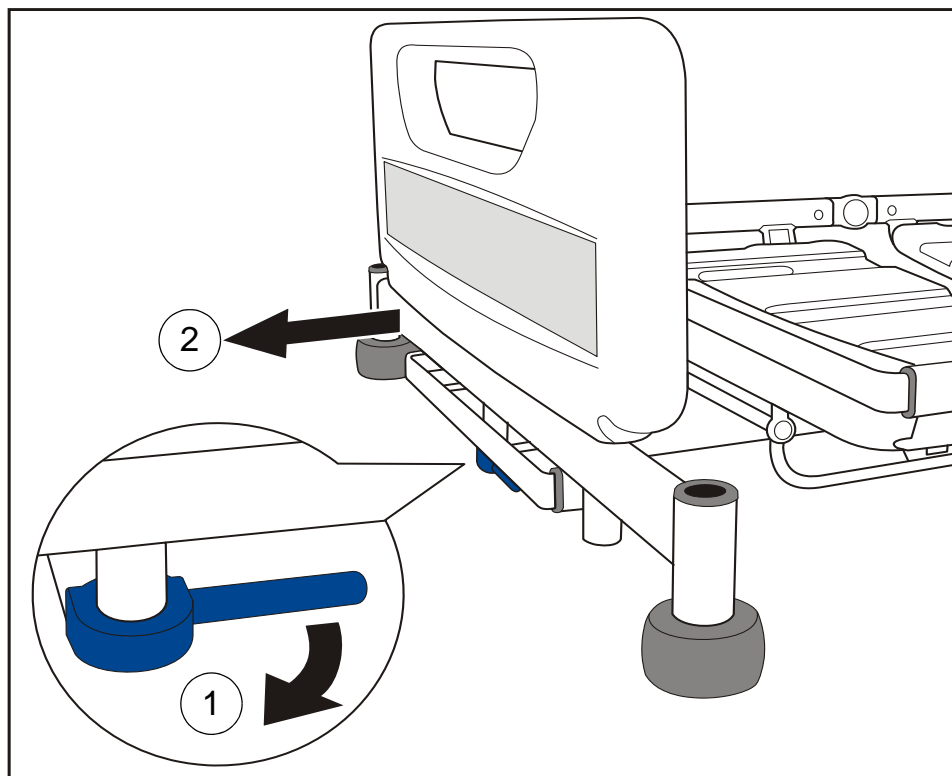
**Always adjust the bed frame and mattress platform to the same length and make sure both are latched securely in position.**

**Level the mattress platform before adjusting the bed length.**

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

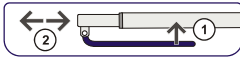
#### To extend the bed frame:

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

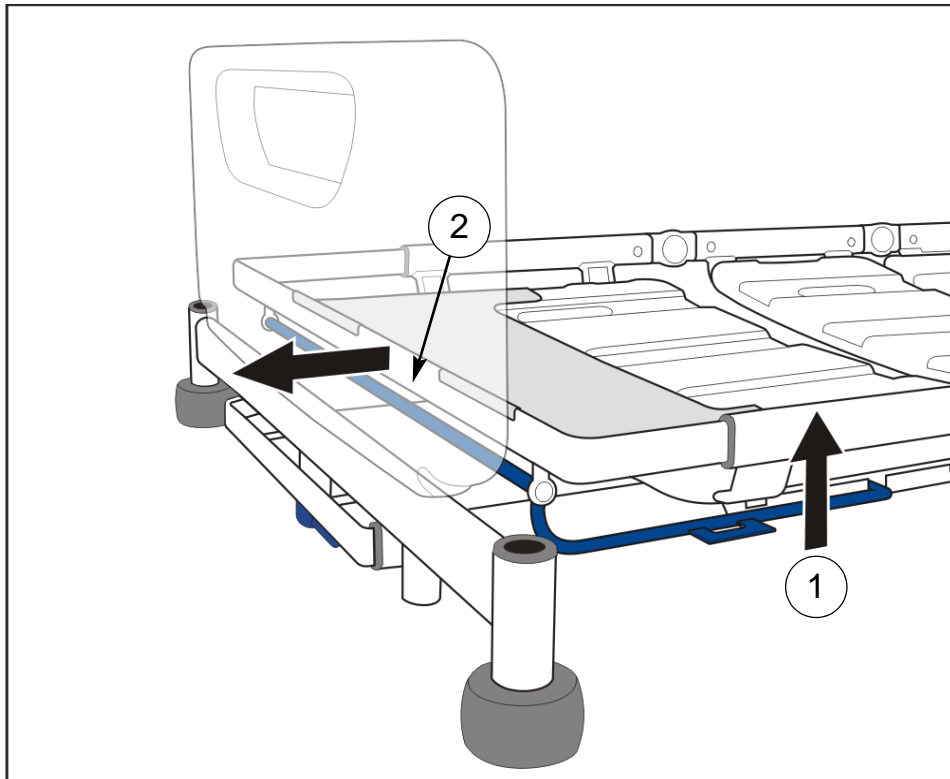


**Extending the bed frame**

**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**



**WARNING**

After extending the mattress platform make sure the calf extension sheet is clipped over the end of the mattress platform frame.

**To shorten the bed:**

Reverse the above procedure.

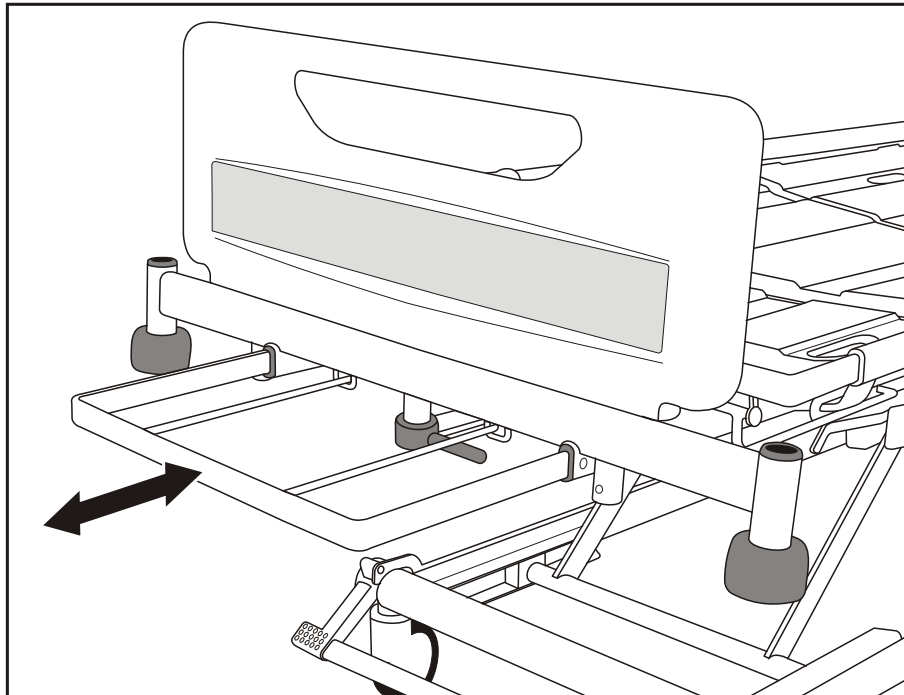


## Bedstripper (linen shelf) (Optional)

The bedstripper is used for supporting clean linen when 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**

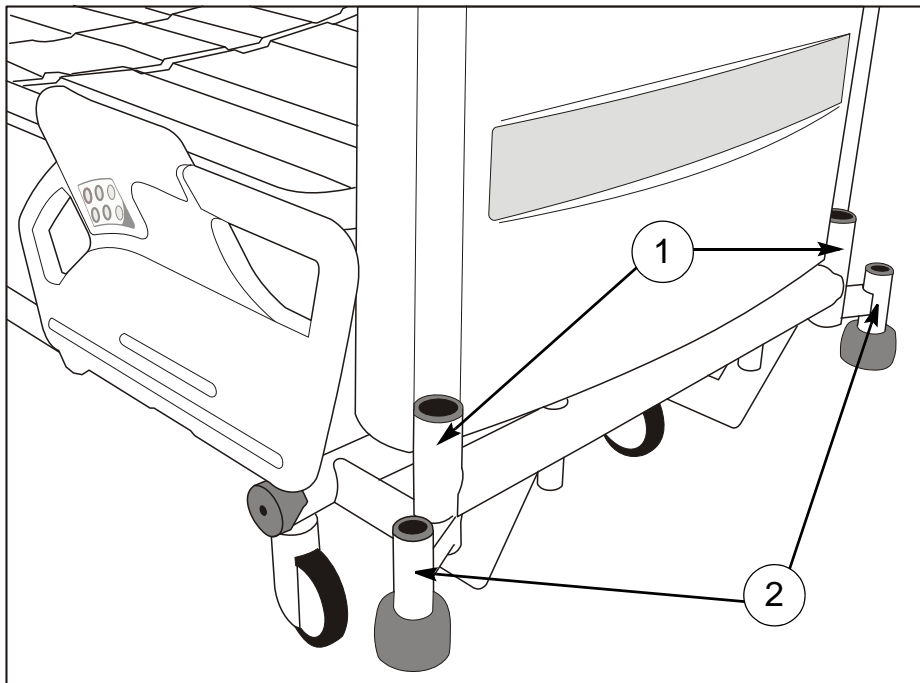
**The safe working load of the bedstripper is 20kg.**

**Level the mattress platform before using the bedstripper.**

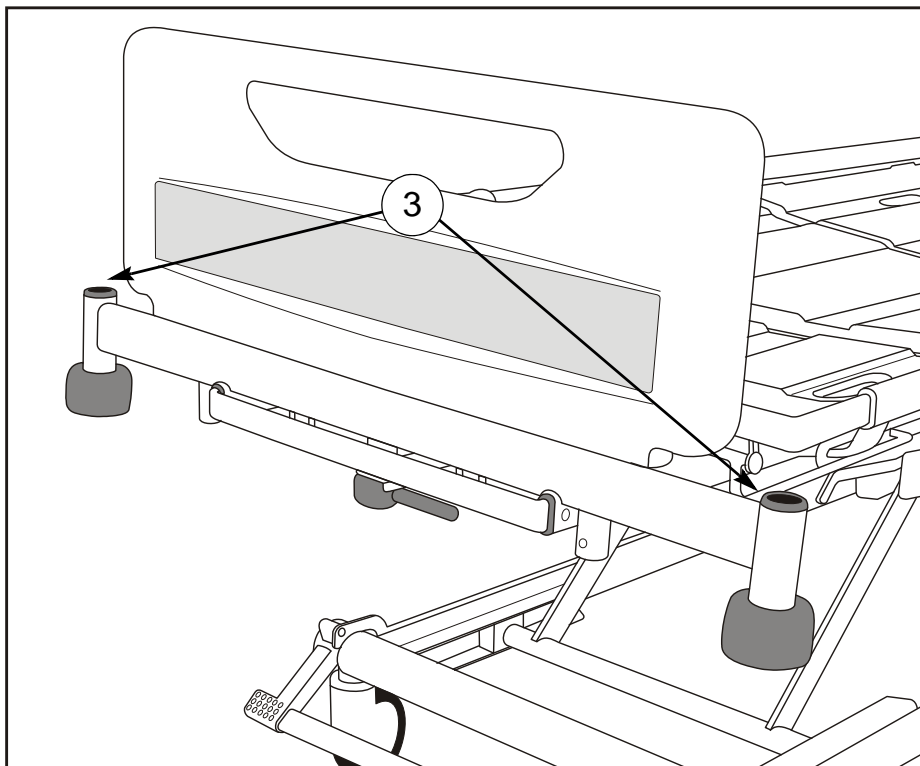
## Lifting pole and accessory sockets

Lifting pole sockets (1) are located at the head end of the mattress platform.

Sockets 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)**

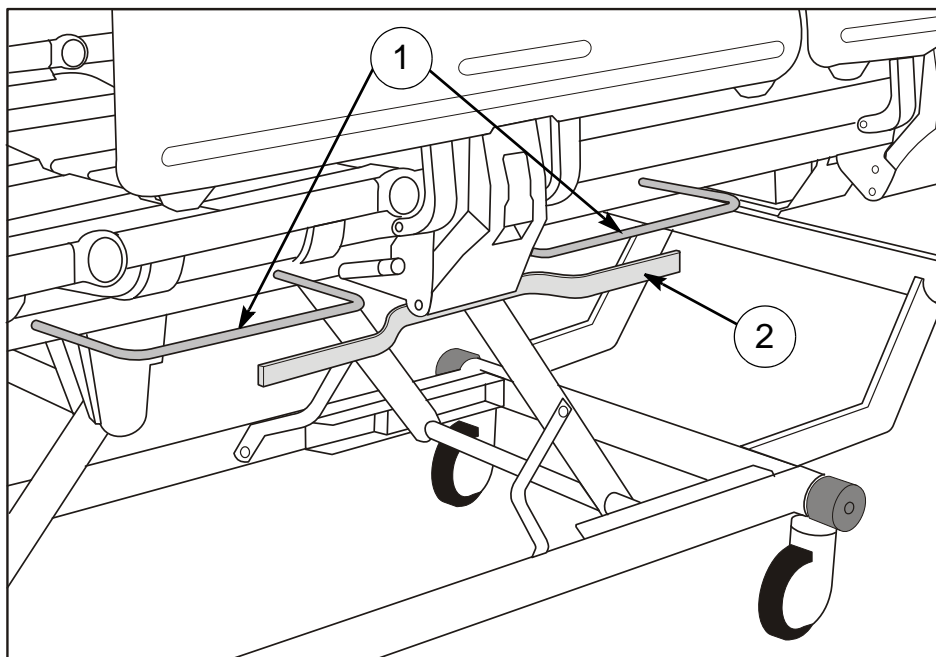


**Accessory sockets (foot end)**

## Drainage bag rails

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

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



Drainage bag rails and DIN rail



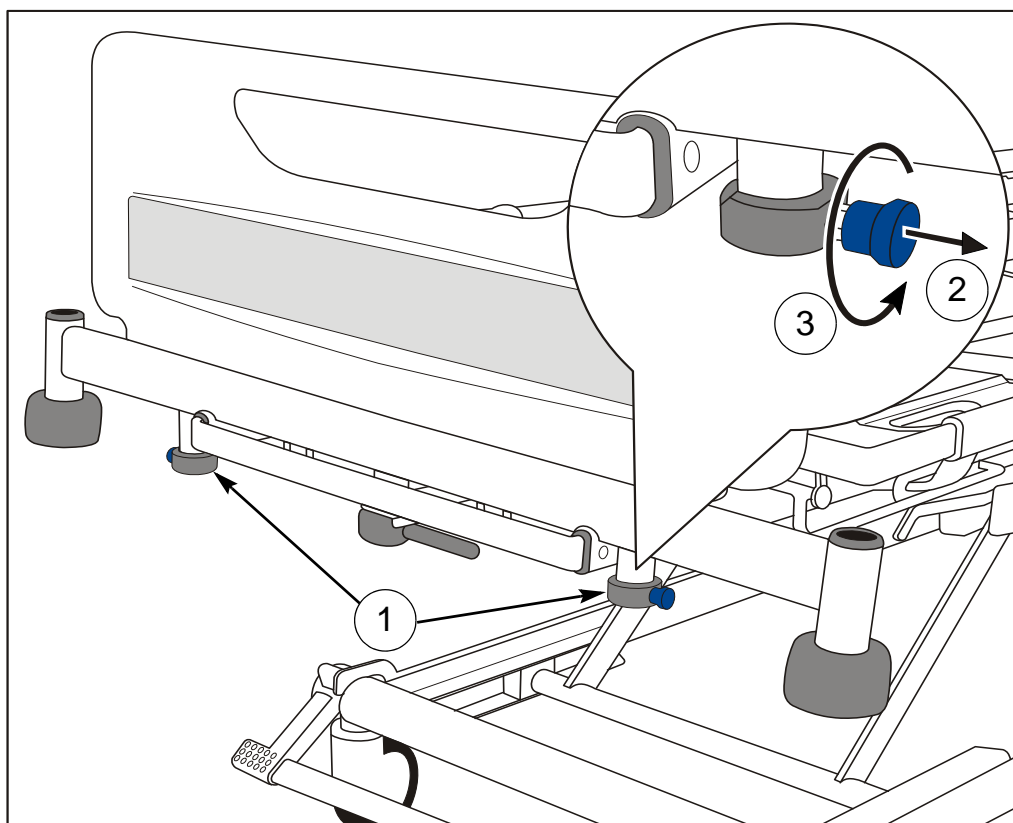
### Caution

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

## Head and foot boards

The 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.

## Adjusting the mattress platform



### WARNING

The controls require only a single press to activate. To prevent unwanted movement of the mattress platform, avoid leaning against the side rails and keep equipment on and around the bed clear of the controls.

Controls for use by the patient and caregiver are built into the head end side rails. These operate the bed's basic functions. For patients who find it difficult to use the side rail controls, a separate handset is available as an optional extra.

An Attendant Control Panel (ACP) for use only by the caregiver is built into the foot end side rails. This provides full control of all the bed's functions.

The functions of the patient and caregiver controls, and the ACP, are described 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.



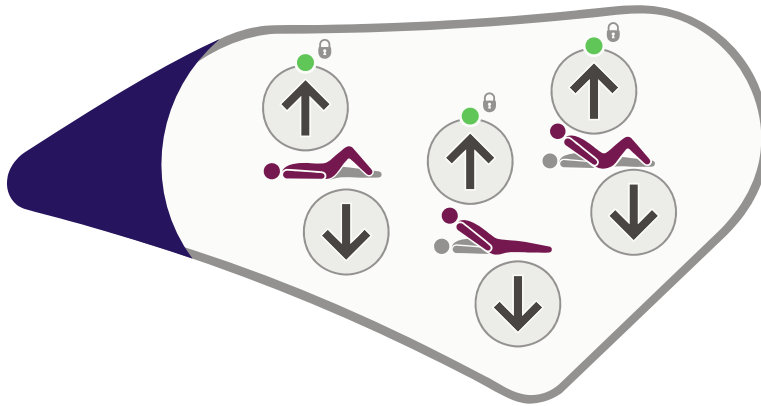
*If a warning tone (beep) sounds when pressing a button, this indicates that the bed is operating on the backup battery - refer to the section **Backup battery** on page 31.*



*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** on page 29.*

## Patient controls

The patient controls are located on the inside panel of both head end side rails.



Patient controls (patient's left hand side)

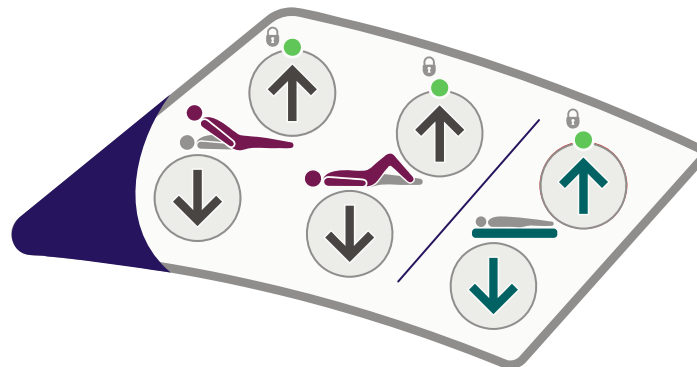


## WARNING

The patient should be shown how to use these controls by the caregiver.

## Caregiver controls

The caregiver controls are located on the outside panel of both head end side rails.



Caregiver controls (patient's right hand side)

### Thigh section

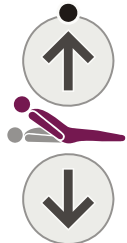


These buttons raise and lower the thigh section.

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** on page 30.

### Backrest angle



These buttons raise and lower the backrest.

### 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.

### 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.)



## WARNING

**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.**

**Patient  
handset  
(Optional)**

The controls on this handset operate in the same way as those on the side rails (see page 25).

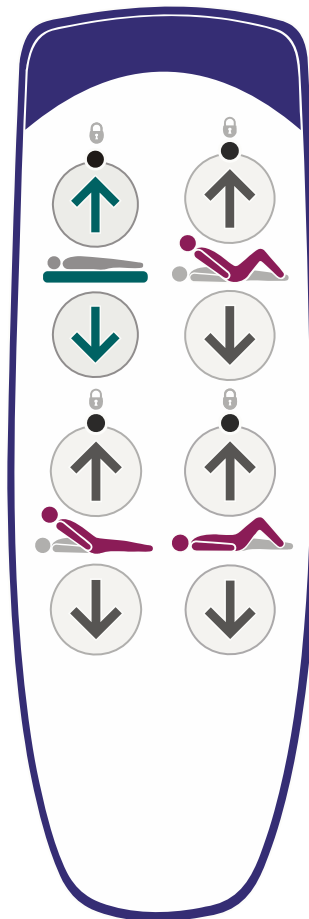


**WARNING**

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 caregiver.

Take care not to squeeze or trap the handset cable between moving parts of the bed.



**Patient handset**

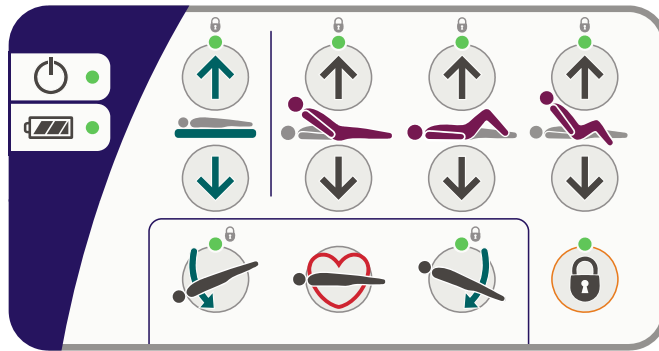


*On some models the patient handset does not have mattress platform height, backrest or thigh section controls.*



## Attendant Control Panel (ACP)

Attendant Control Panels are located on the outside panels of both foot end side rails. The ACP on the left side and right side of the bed have different button layouts. Additionally, an ACP can be mounted at the foot-end of the bed, either clipped onto the foot board or using an ACP holder (ENT-ACC11) in an accessory socket. The foot-end mounted ACP has the same button layout as the right side rail mounted ACP.



Attendant Control Panel (patient's right hand side)



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



Battery indicator - refer to the section **Backup battery** on page 31.

### Mattress platform height



These buttons raise and lower the mattress platform.

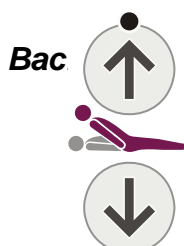
When the mattress platform is lowered to 38cm\* above the floor, it will pause then continue to lower until it reaches its minimum height.

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



### WARNING

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.



These buttons raise and lower the backrest.

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

### 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** on page 30.

### Auto-Chair



The *Auto-Chair up* button simultaneously raises the backrest and thigh sections, pausing when the backrest reaches 45°. Continue to hold the up button to lower 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.

## 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.



### To lock (prevent) or unlock (allow) 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 or unlocked. The “lock” indicator LED above each function button shows its current status:

LED on = function locked

LED off = function unlocked.

When all functions are locked or unlocked as required, press the Function Lock button again or wait for 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.*



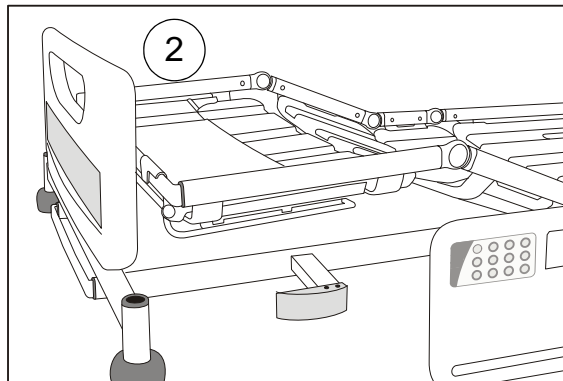
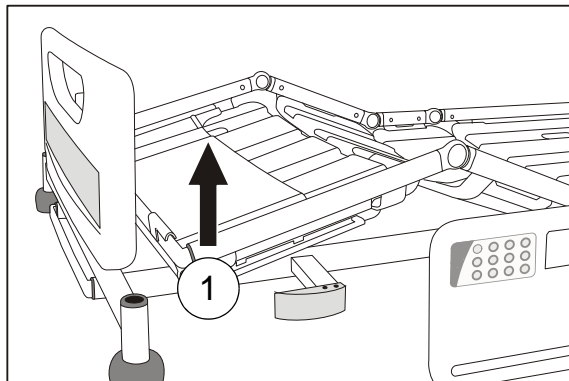
*Function lockout settings are retained if the bed is disconnected from the electricity supply.*

## 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 (1) until it latches (2).



**Changing from Fowler position (left) to vascular**

**To return the calf section to the Fowler position:**

Use the caregiver controls 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.**

## 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 short term use only. 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.

***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.



**WARNING**

**If the battery is left discharged for long periods, its operational life will be reduced.**

**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 vent hole or obstruct the area around it.**

***Low power mode***

When the bed is disconnected from mains power, it enters a low power mode to conserve battery power. In this state, the underbed lights and the indicators on the control panels are turned off.

Pressing any of the control buttons brings the bed out of low power mode. The bed will return to low power mode two minutes after the last control button was pressed.

***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" on page 29.

## 5. Product Care

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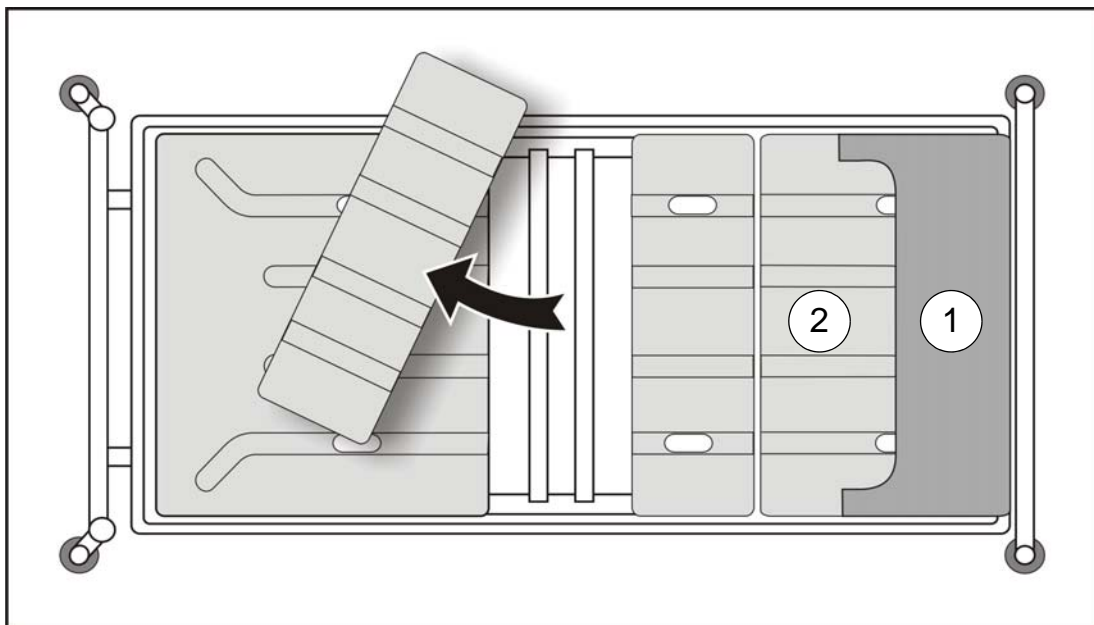
### WARNING

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.

### Mattress platform 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.

## Decontamination



### WARNING

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



*These instructions also apply to accessories but not to mattresses. For lifting straps and handles, refer to the manufacturer's instructions supplied with the product.*

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

### **Cleaning**

Remove the mattress and all 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.

### **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 disinfectants**

ArjoHuntleigh recommends sodium dichloroisocyanurate (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 manufacturer's instructions.



### **Caution**

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

**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.



### WARNING

**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 caregiver. Preventive maintenance can help to prevent accidents.**

Actions to be done by caregiver	Daily	Weekly
Check operation of side rails	✓	
Visually check castors		✓
Check operation of the manual CPR release handles on both sides of the bed		✓
Visually check power supply cord and mains plug		✓
Carry out a full test of all electrical bed positioning functions (backrest, height, tilt, etc.)		✓
Check that the patient controls, caregiver controls and Attendant Control Panels operate correctly		✓
Check the mattress for damage and fluid ingress		✓
Examine the lifting pole, strap and handle ★	✓	

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



## WARNING

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
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 section <b>Battery test</b> on page 38.	✓
Check operation of the castors, paying special attention to braking and steering functions	✓
Check that the calf section moves to the Fowler position when the thigh section is raised	✓
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 rewirable 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	✓

### **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 flatten and lower to a 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; then 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
Bed is difficult to manoeuvre	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 the section <b>Duty cycle lockout</b> on page 32
Mattress platform cannot be lowered	Height control software error	Raise the mattress platform to maximum height to reset software
All functions remain locked after connecting mains power after a near flat battery (ACP battery indicator was red before mains power was connected)	Function(s) locked on all controls due to a low power state	To unlock all functions connect mains power and then press the Function Lock button twice in quick succession then select the function(s) to unlock
Bed movement function buttons do not respond	Control software error	Disconnect and then reconnect the mains power to clear bed software errors

## 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, head down 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 bed 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
IV pole steel hooks	ENT-ACC02 SH
Angled IV pole	ENT-ACC04
Fracture frame	ENT-ACC05
Syringe pump holder	ENT-ACC07
Oxygen bottle holder (for CD, D, E & PD cylinder)	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 <sup>®</sup> equipment bracket	ENT-ACC40
Bed pan holder	ENT-ACC56
Oxygen bottle holder	ENT-ACC58
Monitor shelf	ENT-ACC64
Lifting pole mounted IV fluid bag holder	ENT-ACC65
Foot end infill panels	ENT-ACC66
Urine bottle holder	ENT-ACC69
IV pole	ENT-ACC71
Integrated IV Pole	ENT-ACC89

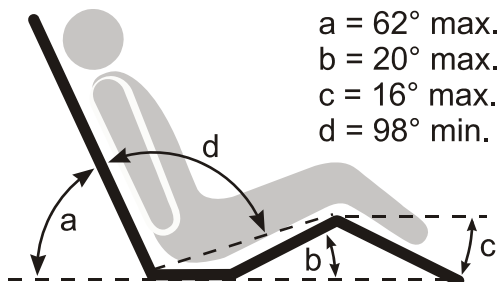
Oxylog is a registered trademark of Dräger Medical.

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

## 7. Technical Data

General	
Safe working load	250kg
Maximum patient weight	185kg
Product weight (approx.)	150kg
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 1.25A max. at 230V a.c. 60Hz (KSA) 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 60601-1:1990 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 tolerances)	
Overall length	
Position 1 (Short)	224cm
Position 2 (Standard)	235cm
Position 3 (Extended)	247cm
In-bed length	
Position 1 (Short)	192cm
Position 2 (Standard)	203cm
Position 3 (Extended)	215cm
Overall width	103cm
Height of mattress platform (centre of seat section to floor)	
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 the section <b>Mattresses</b> on page 8)	
Position 2 (Standard)	202cm x 88cm, 12.5 to 18cm thick
Mattress platform angles	 <p> <math>a = 62^{\circ} \text{ max.}</math>  <math>b = 20^{\circ} \text{ max.}</math>  <math>c = 16^{\circ} \text{ max.}</math>  <math>d = 98^{\circ} \text{ min.}</math> </p>

## Environmental protection

Incorrect disposal of this equipment and its component parts, particularly gas springs, actuators, batteries and other electrical devices, may produce substances that are hazardous to the environment. To minimise these hazards, contact ArjoHuntleigh for information on correct disposal.

## Transport 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:

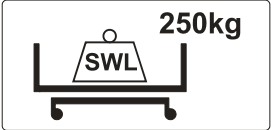




Temperature	-10°C to 50°C
Relative humidity	20% to 90% at 30°C, non-condensing
Atmospheric pressure	700hPa to 1060hPa









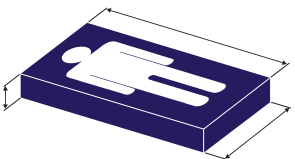
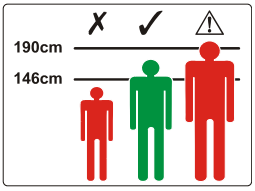




### Caution

**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

	Safe working load
	Maximum patient weight
	Alternating current (a.c.)
	Caution
	Refer to instructions for use

Symbols (continued)	
	Type B applied part Applied parts are considered to be: Upper frame section, Bed controls, Safety Sides, Head and Foot Boards
	Manufacturer / date of manufacture
	Complies with the European Medical Device Directive 93/42/EEC
	Serial number
	Model number
	Waste Electrical and Electronic Equipment (WEEE) - do not dispose of this product in general household or commercial waste
	Potential equalisation terminal
	Protective earth (ground)
	Recommended mattress size
	Recommended patient height
	Calf section vascular position
	Mattress platform extension

## **8. Warranty and Service**


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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

	<p><i>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.</i></p> <p><i>Portable and mobile frequency communication equipment may affect the normal use of E8000X, please use E8000X under the recommended electromagnetic environment.</i></p>
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	<p><b>Caution</b></p>
<p><b>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.</b></p> <p><b>When this equipment is used adjacent to other electronic devices, the user should observe the equipment to verify normal operation.</b></p>	

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	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 buildings used for domestic purposes.
Harmonic emissions IEC 61000-3-2	Class A	
Voltage fluctuations/ flicker emissions IEC 61000-3-3	Complies	

<b>Guidance and manufacturer's declaration – electromagnetic immunity</b>			
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.			
<b>Immunity test</b>	<b>IEC 60601 test level</b>	<b>Compliance level</b>	<b>Electromagnetic environment - guidance</b>
Electrostatic discharge (ESD) IEC 61000-4-2	$\pm 6\text{kV}$ contact $\pm 8\text{kV}$ air	$\pm 6\text{kV}$ contact $\pm 8\text{kV}$ 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	$\pm 2\text{kV}$ for power supply lines $\pm 1\text{kV}$ for input/output lines	$\pm 2\text{kV}$  Not applicable	Mains power quality should be that of a typical commercial or hospital environment.
Surge IEC 61000-4-5	$\pm 1\text{kV}$ line to line $\pm 2\text{kV}$ line to earth	$\pm 1\text{kV}$  $\pm 2\text{kV}$	Mains power quality should be that of a typical commercial or hospital environment.
Voltage dips, short interruptions and voltage variations on power supply input lines IEC 61000-4-11	$70\% U_T$ (30% dip in $U_T$ ) for 25 cycles $40\% U_T$ (60% dip in $U_T$ ) for 5 cycles $<5\% U_T$ ( $>95\%$ dip in $U_T$ ) for 0.5 cycle $<5\% U_T$ ( $>95\%$ 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 environment.  If the user of the bed requires continued operation during power mains interruptions, 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.
NOTE $U_T$ is the a.c. mains voltage prior to the application of the test level			

Guidance and manufacturer's declaration – electromagnetic immunity			
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.			
Immunity test	IEC 60601 test level	Compliance level	Electromagnetic environment - guidance
<p>Conducted RF IEC 61000-4-6</p> <p>Radiated RF IEC 61000-4-3</p>	<p>3V rms 150kHz to 80MHz</p> <p>3V/m 80MHz to 2.5GHz</p>	<p>3V</p> <p>3V/m</p>	<p>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.</p> <p><b>Recommended separation distance</b></p> $d = 1.2\sqrt{P}$ $d = 1.2\sqrt{P} \quad 80 \text{ MHz to } 800\text{MHz}$ $d = 2.3\sqrt{P} \quad 800\text{MHz to } 2.5\text{GHz}$ <p>Where <math>P</math> is the maximum output power rating of the transmitter in watts (W) according to the transmitter manufacturer and <math>d</math> is the recommended separation in metres (m).</p> <p>Field strengths from fixed RF transmitters, as determined by an electromagnetic site survey,<sup>a</sup> should be less than the compliance level in each frequency range.<sup>b</sup></p> <p>Interference may occur in the vicinity of equipment marked with the following symbol: </p>
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.			
<p><sup>a</sup> Field strengths from fixed transmitters, such as base stations for radio (cellular/cordless) 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.</p> <p><sup>b</sup> Over the frequency range 150kHz to 80MHz, field strengths should be less than 3V/m.</p>			

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 <b>W</b>	Separation distance according to frequency of transmitter <b>m</b>		
	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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## GETINGE GROUP

**Getinge Group** is a leading global provider of products and systems that contribute to quality enhancement and cost efficiency within healthcare and life sciences. We operate under the three brands of **ArjoHuntleigh**, **Getinge** and **Maquet**. **Getinge** provides solutions for infection control within healthcare and contamination prevention within life sciences. **Maquet** specializes in solutions, therapies and products for surgical interventions, interventional cardiology and intensive care.

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ArjoHuntleigh focuses on patient handling and hygiene, disinfection, DVT prevention, medical beds, therapeutic surfaces and diagnostics.



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