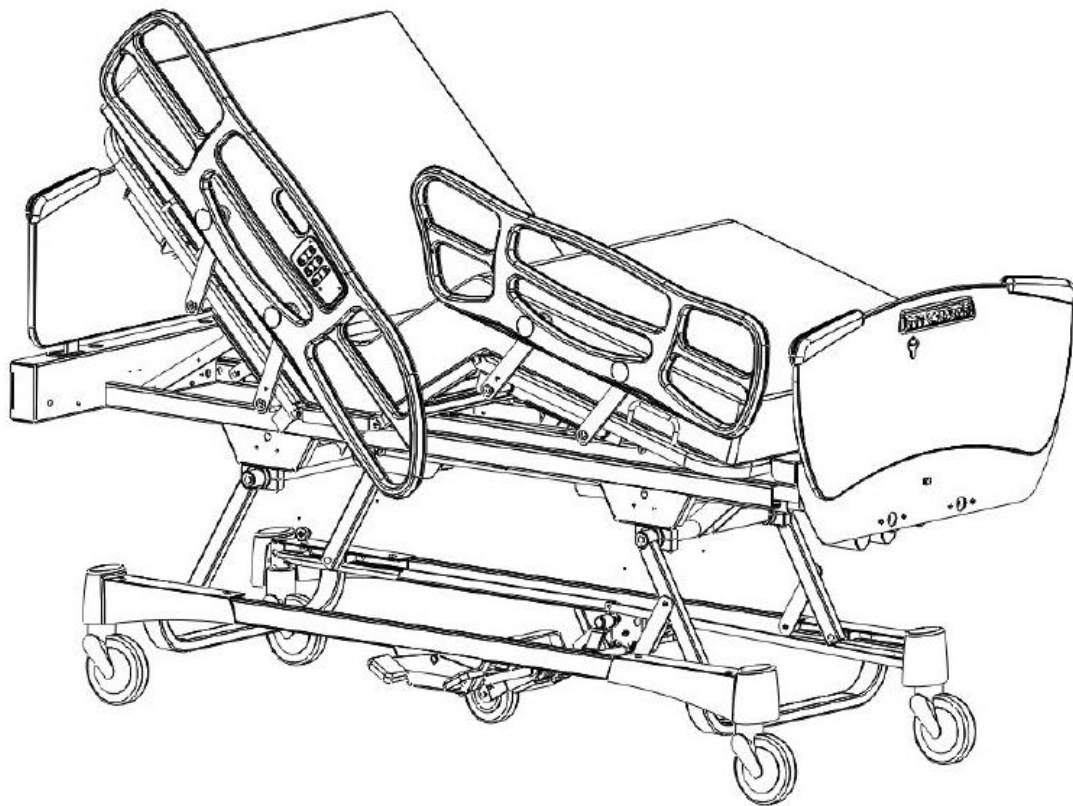


The GOBED™
ELECTRIC ACUTE CARE BED
Product Number: FL17E
Product Number for the United States: 2500



GOBED™

TECHNICAL ASSISTANCE AND PARTS

1 800 327- 0770 (US)

1 800 428- 5025 (Canada)

E-Mail (Canada): service@bertec.strykercorp.com

Manufactured by Stryker Bertec Medical Inc

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1. INTRODUCTION

This manual is designed to assist you with the operation of the model FL17E GOBED. Read it thoroughly before operating the bed. Hospital staff should be able to refer to this guide at all time when using the bed.

This Operations Manual is an integral part of the bed and should be included if the bed is sold or transferred.

1.1 TECHNICAL SPECIFICATIONS *

Safe lifting Load	500 lb (227 kg) including 100 lb (45.5 kg) of boards and accessories.
Overall Length/Width: :	
- with steel siderails up	93" x 41 9/16" (236.2 cm x 105.5 cm)
- with steel siderails down	93" x 38 3/8" (236.2 cm x 97.5 cm)
- with plastic siderails up	93" x 42 9/16" (236.2 cm x 108.1 cm)
- with plastic siderails down	93" x 38 3/4" (236.2 cm x 98.4 cm)
Overall Weight (w/o boards and accessories)	385 lb - 175 kg
Sleep surface	35" (89 cm) x 80" (203 cm) extendable to 82" (208 cm) and 84" (213 cm)
Minimum/Maximum Bed Height	14" to 29" - 35.5 cm to 73.7 cm
Sound Level	< 58 dBa
Fowler Angle	0° to 65°
Knee Gatch w/o Contour Positioning	0° to 32°
Knee Gatch w/Contour Positioning	0° to 24°
Trendelenburg/Reverse Trendelenburg	-14° to +14°
Electrical Requirements	100 V~, 50-60 Hz, 7.5 A 120 V~, 50-60 Hz, 4.8 A 120 V~, 50-60 Hz, 9.8 A w/auxiliary outlet 200 V~, 50-60 Hz, 3.2 A 220 V~, 50-60 Hz, 2.9 A 240 V~, 50-60 Hz, 2.7 A

* Stryker Bertec pays special attention to product improvement and reserve the right to change specifications without notice.

1.2 TECHNICAL SUPPORT

For questions regarding this product, contact one of the following Technical Service departments or your local representative:

In Canada:

Stryker Bertec
Service in English: 1 800 428-5025
E-mail (Canada): service@bertec.strykercorp.com
70, 5th Avenue, P.O. Box 128
L'Islet (Québec), G0R 2C0, Canada

In the United States:

Stryker Medical
1 800 327-0770
6300, South Sprinkle Road
Kalamazoo, MI 49001-9799
USA

1.3 WARNING / CAUTION / NOTE DEFINITIONS

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

**WARNING**

The personal safety of the patient or user may be involved. Disregarding this information could result in injury to the patient or user.

**CAUTION**

These instructions point out special procedures or precautions that must be followed to avoid damaging the equipment.

NOTE

Notes provide special information to make maintenance easier or important instructions clearer.

1.4 SAFETY TIPS AND GUIDELINES

Before operating the GOBED, it is important to read and understand all information in this manual. Carefully read and strictly follow the safety guidelines listed on this page.

It is important that all users have been trained and educated on the inherent hazards associated with the usage of electric beds.

**WARNING**

- The GOBED is not intended for pediatric use.
- Serious injury can result if caution is not used when operating the bed. Operate the bed only when all persons and equipment are clear of the electrical and mechanical systems.
- This bed is equipped with a hospital grade plug for protection against shock hazard. It must be plugged directly into a properly grounded receptacle. Grounding reliability can be achieved only when a hospital grade receptacle is used.
- To help reduce the number and severity of falls by patients, always leave the bed in the lowest position when the patient is unattended.
- Leave the siderails fully up and locked when the patient is unattended. When raising the siderails, be sure you hear the click that signals the up and locked position. Pull firmly on the siderail to ensure it is locked into position.
- Always apply the brakes when a patient is on the bed (except during transport). Serious injury could result if the bed moves while a patient is getting on or off the bed. After the brake pedal is engaged, push on the bed to ensure the brakes are securely locked.
- Keep siderails in the fully raised position and the sleep surface horizontal in its lowest position when the patient is sleeping unless the patient's medical conditions dictates otherwise.
- Siderails, with or without their padded covers or nets, are not intended to serve as restraint devices to keep patient from exiting the bed. Siderails are designed to keep a patient from inadvertently rolling off the bed. It is the responsibility of the attending medical personnel to determine the degree of restraint necessary to ensure a patient will remain safely in bed. Failure to utilize the siderails properly could result in serious patient injury.
- To avoid injury to the patient, ensure that the sleep surface is in the lowest position with siderails fully raised and securely locked when moving the bed with a patient in it.

- To avoid injury to the patient and/or user, do not attempt to move the bed laterally with the steer pedal engaged. **The fifth steer wheel cannot swivel.**
- When the sleep surface sections are articulated, ensure that all patient's extremities are within the raised siderails to avoid patient injury.
- When a patient's condition requires greater safety measures for his security, use the lockout switches in the foot board control panel to deactivate the siderail or pendant control commands and install protective pads on the siderails.
- The instant CPR release is for emergency use only. Before activating the CPR release, all people and equipment must be removed from the area below and around the head and foot sections of the bed or serious personal injury or damage to equipment could occur.
- Possible fire hazard exists when this bed is used with oxygen administering equipment other than nasal, mask type or half bed-length tent type. It is recommended to unplug the bed power cord from the wall when oxygen-administering equipment is used. When using a half bed-length tent type, ensure the siderails are outside the oxygen tent and oxygen tent should not extend below the mattress support level.
- When large fluid spills occur in the area of the circuit board, cables and motors, immediately unplug the bed. Remove the patient from the bed and clean up the fluid. Have maintenance completely check the bed. Fluids can have an adverse effect on operational capabilities of any electrical product. **DO NOT** put the bed back into service until it is completely dried and has been thoroughly tested for safe operation.
- Do not steam clean, hose off or ultrasonically clean the bed. Do not immerse any part of the bed. The internal electrical parts may be damaged by exposure to water. Hand wash regularly all surfaces of the bed with warm water and a mild detergent. Wipe cleaned surfaces dry to avoid build up of cleaning substance. Inspect the mattress after each use. Discontinue use if any cracks or rips are found in the mattress cover that may allow fluid to enter the mattress. Failure to properly clean mattress or dispose of defective mattress will increase the risk of exposure to pathogenic substances and may cause injury to the patient and/or user.
- Preventive maintenance should be performed periodically to ensure all bed features are functioning properly. Ensure that any bed malfunction is promptly reported to service personnel for immediate attention.
- Always unplug the bed power cord from the wall outlet when cleaning or servicing the bed. When working under the bed with the bed in the high position, always place blocks under the frame and lock the casters to prevent injury in case the "Bed Down" switch is accidentally pressed.
- To avoid damage to the siderail mechanisms, do not move the bed using the raised siderails. Use the push/pull handles integrated to the boards to move the bed.
- When using the emergency crank during a power failure, unplug the power cord from the wall receptacle so that unexpected resumption of power will not rotate handle. Remove and store the crank before reconnecting the bed.
- When servicing use only identical replacement parts provided by Stryker Bertec.

NOTE

Throughout this operations manual, the words "right" and "left" refer to the right and left sides of a patient lying face up on the bed

1.5 WARRANTY

LIMITED WARRANTY

All Stryker Bertec products are guaranteed against material or manufacturing defects, improper operation of mechanisms, and premature wear of bed components under normal use conditions.

For questions regarding warranty, please contact Stryker Bertec Technical Service department (see section 1.2) or your local representative.

TO OBTAIN SERVICE AND/OR PARTS

For an on-site diagnosis and/or repair of a bed malfunction by a Stryker Field Service Representative or to order replacement parts (see section 1.4, "To Order Parts" in the *GOBED Maintenance Manual*), simply contact Stryker Bertec Technical Service department or your local representative.

RETURN AUTHORIZATION

Merchandise cannot be returned without approval from the Stryker Bertec Technical Service department. An authorization number will be provided which must be clearly printed on the returned merchandise. Stryker Bertec reserves the right to charge shipping and restocking fees on returned items.

DAMAGED MERCHANDISE

Claims for damaged merchandise must be made with the carrier within fifteen (15) days of receipt of merchandise. **DO NOT ACCEPT DAMAGED SHIPMENTS UNLESS SUCH DAMAGE IS NOTED ON THE DELIVERY RECEIPT AT THE TIME OF RECEIPT.** Upon prompt notification, Stryker Bertec will file a freight claim with the appropriate carrier for damages incurred. Claims will be limited in amount to the actual replacement cost. In the event that this information is not received by Stryker Bertec within the fifteen (15) days period following the delivery of the merchandise, or the damage was not noted on the delivery notice at the time of receipt, the customer will be responsible for payment of the original invoice in full.

Claims for any short shipment must be made within 5 days of invoice.

1.6 BED POSITION PICTOGRAMS

The following pictograms illustrate the bed basic positions.

Not illustrated here is the Cardiac Chair position that is obtained through combining the Reverse Trendelenburg and the Auto Contour positions.

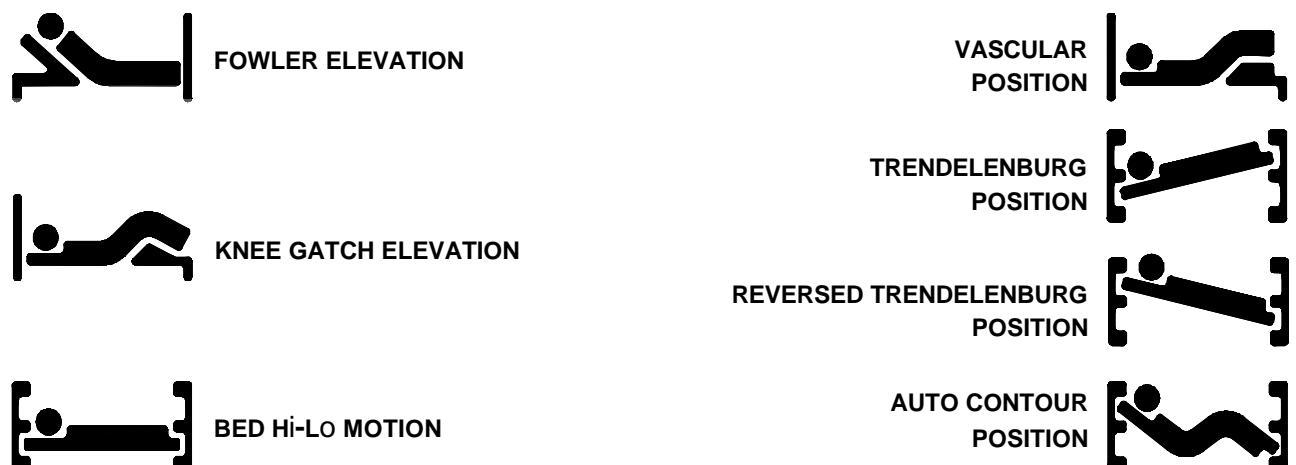


Figure 1.6

1.7 SET-UP PROCEDURE

CHECKLIST

It is important to ensure that the bed is working properly before putting it into service. The following list will help ensure that each part of the bed is verified.

- ___ Install the foot and head boards on the bed. Insert the foot board carefully so that the board connector connects smoothly to the foot end casing connector.
- ___ Plug the power cord into a properly grounded hospital grade wall receptacle and ensure that the Power LED light at the foot end of the bed comes on when the "On/Off" switch is turned on.



WARNING

The bed is equipped with a hospital grade plug for protection against shock hazard. It must be plugged directly into a properly grounded receptacle. Grounding reliability can be achieved only when a hospital grade receptacle is used.

- ___ Depress the red "TOTAL BRAKE" side of the pedal at either side of the bed to set the brakes. Make sure the bed is immobilized by pushing on it. Ensure brakes disengage when the pedal is toggled to neutral position.
- ___ Depress the green "AXIAL STEER" side of the pedal on either side of the bed to engage the 5th wheel. Ensure the 5th wheel is functional. Ensure the 5th wheel disengages when the pedal is toggled to neutral position.
- ___ Ensure the siderails raise and lower smoothly and lock in the up position.
- ___ Run through each function on the foot board control panel and ensure that each function is working properly.
- ___ Ensure all functions are working properly on the siderail control panels (inner and outer sides). Also check the optional nurse call function.
- ___ Raise the bed fully up and activate the Trendelenburg function (see "Trendelenburg Switch (E)", page 16). Ensure the head end lowers to the full down position.
- ___ Raise the bed fully up and activate the reverse Trendelenburg function (see "Trendelenburg Switch (E)", page 16). Ensure that the foot end lowers to the full down position.
- ___ Ensure that the optional Auto Contour function works properly (see "Auto Contour", page 16).
- ___ Leaving the bed in the Auto Contour position, pull the instant CPR release handle (optional equipment) and ensure the Fowler and Knee Gatch will drop with minimal effort. Wait and listen for the typical noise indicating that the Fowler motor has reset itself (during the resetting period, no bed functions are available).
- ___ Verify the following optional equipment for proper operation: 120V auxiliary outlet, photoelectric night light, two or three function pendant control, etc.

If any problems are found during bed set-up, contact our Technical Service department (see section 1.2).

1.8 BED CLEANING AND PREVENTATIVE MAINTENANCE

**WARNING**

Always unplug the bed power cord from the wall outlet when cleaning or servicing the bed.

BED CLEANING AND MATTRESS CARE

**CAUTION**

Do not use harsh cleaners, solvents or detergents. Do not steam clean, hose off or ultrasonically clean the bed. Do not immerse any part of the bed. The bed electrical parts may be damaged by exposure to water.

Germicidal disinfectant, used as directed, and/or Chlorine Bleach products are not considered mild detergents. These products are corrosive in nature and may cause damage to your bed if used improperly. If these types of products are used, ensure the beds are rinsed with clean water and thoroughly dried following cleaning. Failure to properly rinse and dry the beds will leave a corrosive residue on the surface of the bed, possibly causing premature corrosion of critical components. Failure to follow the above directions when using these types of cleaners may void this product warranty.

Bed Cleaning

Hand wash all surfaces of the bed with a soft cloth moistened with a solution of lukewarm water and a mild detergent.

Wipe the bed clean and dry thoroughly to avoid build up of cleaning solution.

Mattress Care

**WARNING**

Inspect the mattress after each use. Discontinue use if any cracks or rips are found in the mattress cover, which may allow fluid to enter the mattress. Failure to properly clean the mattress, or dispose of it if defective, may increase the risk of exposure to pathogenic substances and may cause injury to the patient and/or user.

• Inspection

Implement local policies to address regular care, maintenance, and cleaning of mattresses and covers. The cover cleaning procedure can be found below and on the bed label.

Inspect mattress cover surface (also zip fasteners and cover inner surface if mattresses have zip fasteners) regularly for signs of damage. If the mattress cover is heavily stained or soiled, or torn, remove the mattress from service.

• Cleaning

Stains: Wash with lukewarm water using a mild detergent. Rinse with water and let dry. For tough stains, use bleach diluted with ten parts of water.

PREVENTATIVE MAINTENANCE PROGRAM

Annual Checklist

- ___ Inspect for excessive wear the oil-impregnated bronze shoulder spacers found at the bed hinge points. Replace as needed. **Do not** lubricate these spacers.
- ___ Inspect and lubricate when needed the bed lubrication points described in section 2.2 of the GOBED Maintenance Manual.
- ___ Inspection of all bolt, locknut and screw tightening, tighten if necessary.
- ___ Engage the brake pedal on both sides of the bed (see page 12) and push on the bed to ensure it is completely immobilized.
- ___ Engage the steer pedal on both sides of the bed (see page 12) and ensure the 5th wheel operates properly.
- ___ Siderails move, latch and stow properly (see page 13).
- ___ All functions on the foot board control panel (see page 15) working properly (give special attention to lockout switch LED's).
- ___ All functions of the siderail outer/inner control panels (see page 14) working properly. Ensure the nurse call signal (if present) reaches the nurse station.
- ___ Optional instant CPR release handles working properly (see page 18) . The motor resets itself once the Fowler is down.
- ___ Verify the Fowler and Knee Gatch movements to ensure the motor course is properly adjusted. Refer to Caution following step 11 of the "Thigh actuator" and the "Head actuator" replacement procedures found at page 38 and 39 respectively of the GOBED Maintenance manual.
- ___ Optional 120 volt auxiliary outlet working properly.
- ___ Optional photoelectric night light working properly.
- ___ Optional Auto Contour working properly.
- ___ Foot prop rod working properly when Knee Gatch or Auto Contour function is activated.
- ___ No cracks or splits in head and foot boards.
- ___ On/Off switch and associated LED working properly.
- ___ Head end bumpers tightly secured to frame and working properly.
- ___ No rips or cracks in mattress cover. Remove from service if damaged.
- ___ Power cord not frayed.
- ___ No cables worn or pinched.
- ___ All electrical connections tight.
- ___ All ground secure to the frame.
- ___ All casters roll properly. Verify caster tire for cuts, wear.
- ___ Ground chain intact and in place.
- ___ Measure current leakage and grounding continuity of the bed and the optional 120V auxiliary outlet. Verify with our Technical Service department (see section 1.2) for the acceptable values for this bed.

NOTE

Preventive maintenance may need to be performed more frequently based on the usage level of the bed.

Bed serial number: _____

Completed by: _____ **Date:** _____

1.9 BED ILLUSTRATION (Bed may differ from illustration)

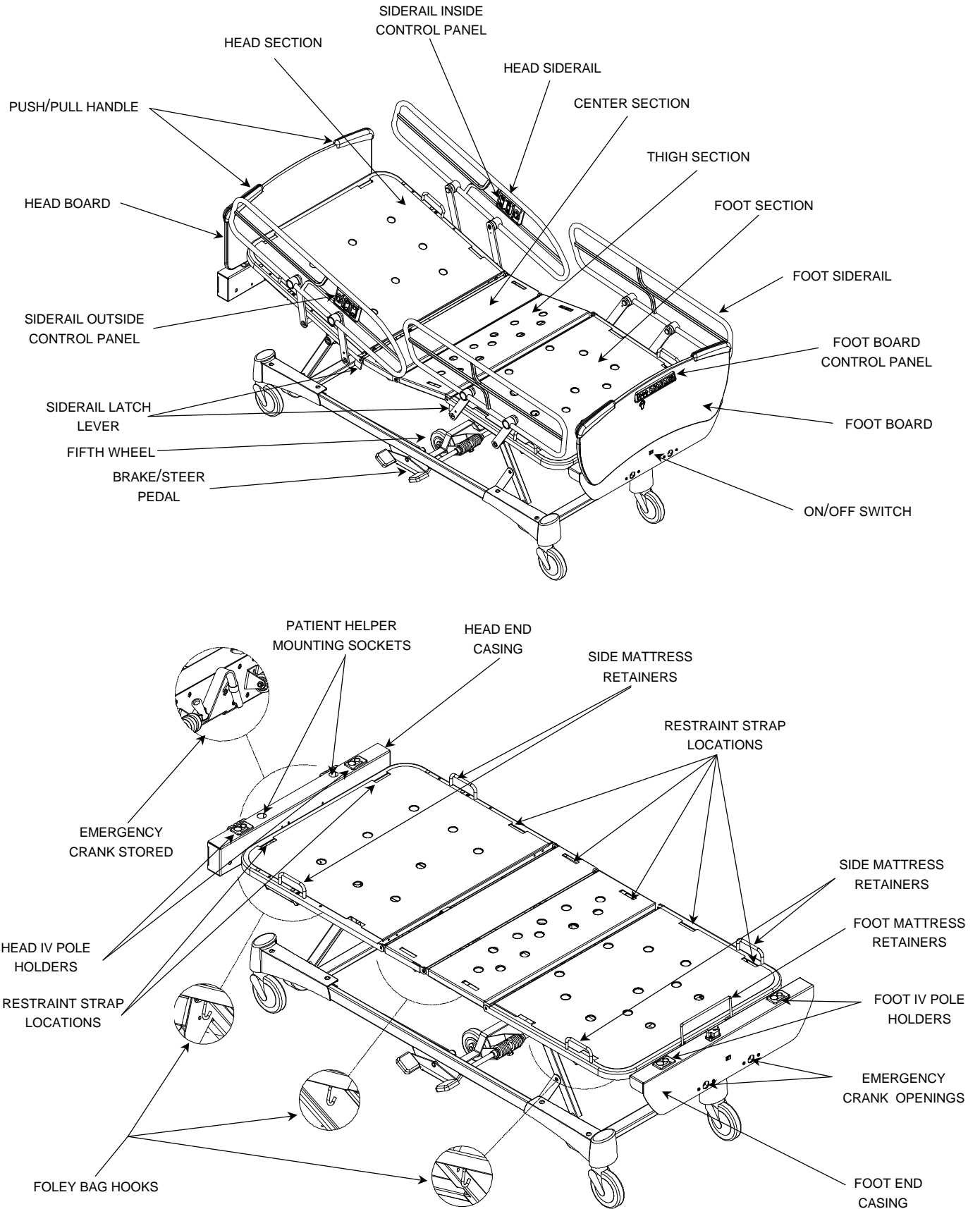


Figure 1.9

2. OPERATION GUIDE

2.1 SWITCHING ON POWER

The main power switch, located beneath the foot board in the middle of the foot end case, enables the bed functions to be activated or deactivated at any time. When the switch is turned on, its green status indicator LED will light up indicating that the bed electric commands are available. Note that siderail controls are automatically shut off when the main power switch is turned off.

2.2 APPLYING THE BRAKE

The GOBED is equipped with a central locking system activated by a brake/steer pedal (see page 11, "Bed Illustration") located at the midpoint of the bed on both sides.



WARNING

Always apply the brakes when a patient is on the bed (except during transport) or when entering/exiting the bed. Serious injury could result if the bed moves while a patient is getting on or off the bed. After the brake pedal is engaged, push on the bed to ensure the brakes are securely locked.

Brake Pedal Operation

To engage the wheel brakes, press the red "TOTAL BRAKE" side of the brake/steer pedal fully down on either side of the bed.

To disengage the wheel brakes, toggle the pedal to neutral position.

2.3 MOVING THE BED

The GOBED is equipped with a 5th wheel steer mechanism (see page 11, "Bed Illustration") activated by a brake/steer pedal located at midpoint of the bed on both sides.

The 5th wheel helps guiding the bed along a straight line and also for pivoting at corners.



WARNING

To reduce risk of injury, ensure the sleep surface is horizontal and in the lowest position with the siderails fully raised and locked when moving the bed with a patient in it.

To avoid injury to the patient and/or user, do not attempt to move the bed laterally with the steer pedal engaged. **The fifth steer wheel cannot swivel.**

To avoid damage to the siderail mechanisms, do not move the bed using the raised siderails. Use the push/pull handles integrated to the boards to move the bed

Steer Pedal Operation

To engage the 5th wheel, press the green "AXIAL STEER" side of the brake/steer pedal fully down on either side of the bed.

To disengage 5th wheel, toggle the pedal to neutral position.

2.4 POSITIONING SIDERAILS

**WARNING**

To help reduce the number and severity of falls by patients, always leave the bed in the lowest position and siderails fully up when the patient is unattended. After raising a siderail, pull firmly on the siderail to ensure it is securely locked into position.

Siderails, with or without their padded covers or nets, are not intended to serve as restraint devices to keep patient from exiting the bed. Siderails are designed to keep a patient from inadvertently rolling off the bed. It is the responsibility of the attending medical personnel to determine the degree of restraint necessary to ensure a patient will remain safely in bed. Failure to utilize the siderails properly could result in serious patient injury.

Keep siderails in the fully raised position and the sleep surface horizontal in its lowest position when the patient is sleeping unless the patient's medical conditions dictates otherwise.

**CAUTION**

To avoid damage to siderail mechanisms, do not pull up a lowered siderail tucked away. To engage a stored siderail, remove it first from its stored position by pulling it towards you.

To **engage** a head end siderail, grasp the rail, pull it towards you and swing it upward towards the head end of the bed until it latches in the up position.

To **engage** a foot end siderail, the same procedure is required as for the head end siderail; however, the siderail swings to the foot end of the bed.

To **disengage** a siderail, lift it up slightly, push in the latch lever located under the sleep surface (see page 11, "Bed Illustration") and hold it as it rotates down to low position. Push the siderail against the sleep surface to store it.

2.5 Head and Foot Boards

The head board and the foot board slide down into two mounting sockets located at each end of the bed.

Removing Boards

Seize both ends of the board and lift it up until posts come out of the mounting sockets.

Replacing Boards

Head board: Insert board with the laminated finish facing the outer side of the bed.

Foot board: Insert the board with the laminated finish facing the inner side the bed. Be cautious when inserting the foot board to avoid damaging the board and foot end casing connectors.

The boards can be mounted permanently. See annex A for the permanent installation procedure.

NOTE

If the the bed electric functions have to remain available when the foot board is removed, ensure the siderail controls are accessible by activating all three lockout switches before removing the foot board.

2.6 SIDERAIL FUNCTION GUIDE

NOTE

Siderail control panel may differ in shape depending on the type of siderail equipping the bed.

OUTER CONTROL PANEL

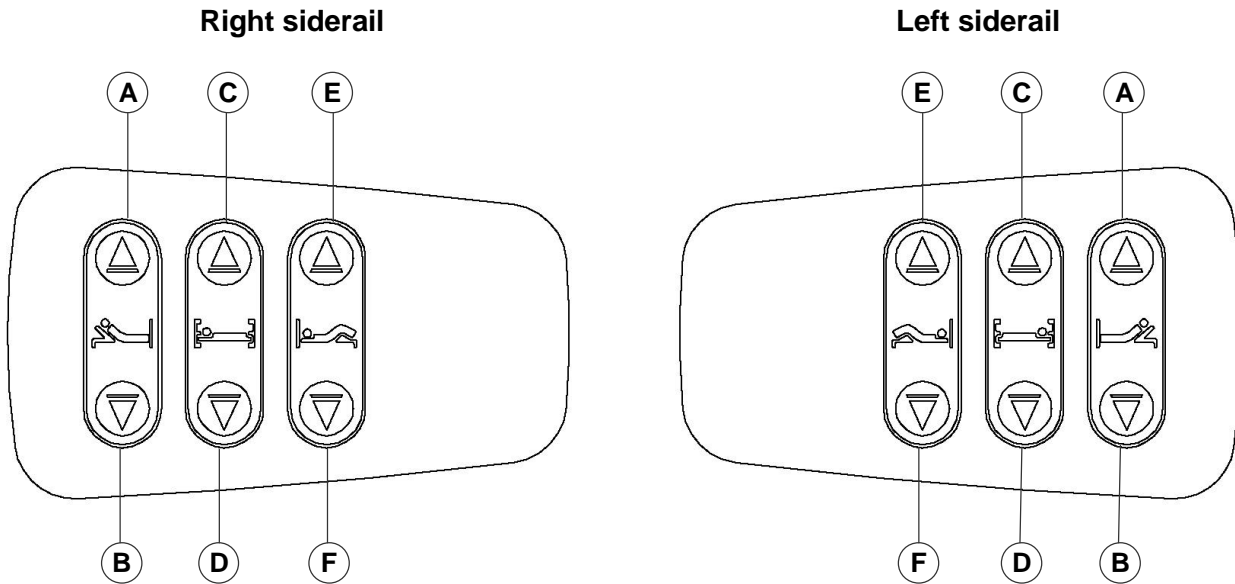


Figure 2.14A

- | | | |
|--------------------------------|---------------------------------------|------------------------------------|
| A: Push to raise Fowler | C: Push to raise sleep surface | E: Push to raise Knee Gatch |
| B: Push to lower Fowler | D: Push to lower sleep surface | F: Push to lower Knee Gatch |

INNER CONTROL PANEL

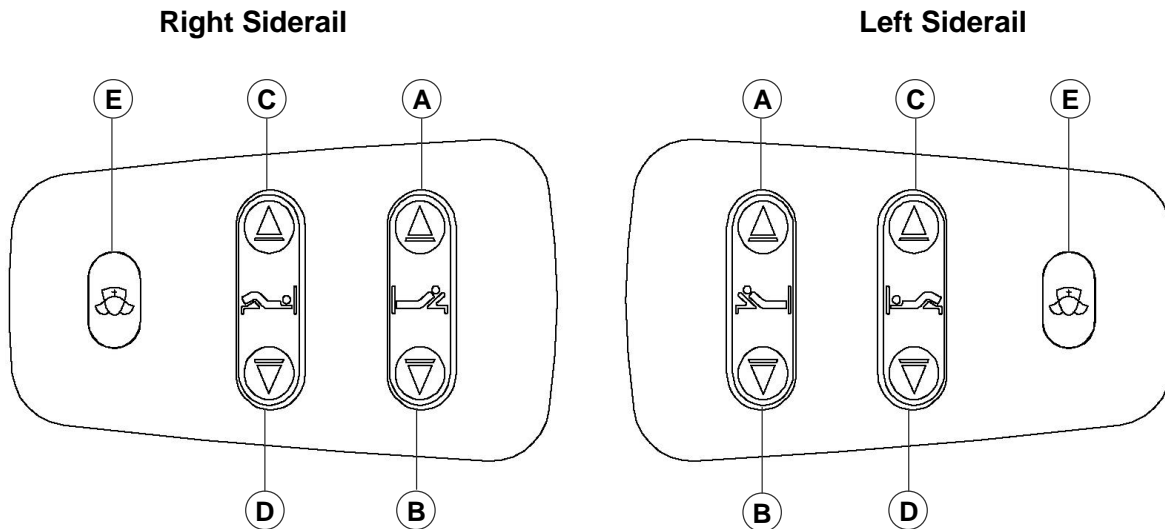
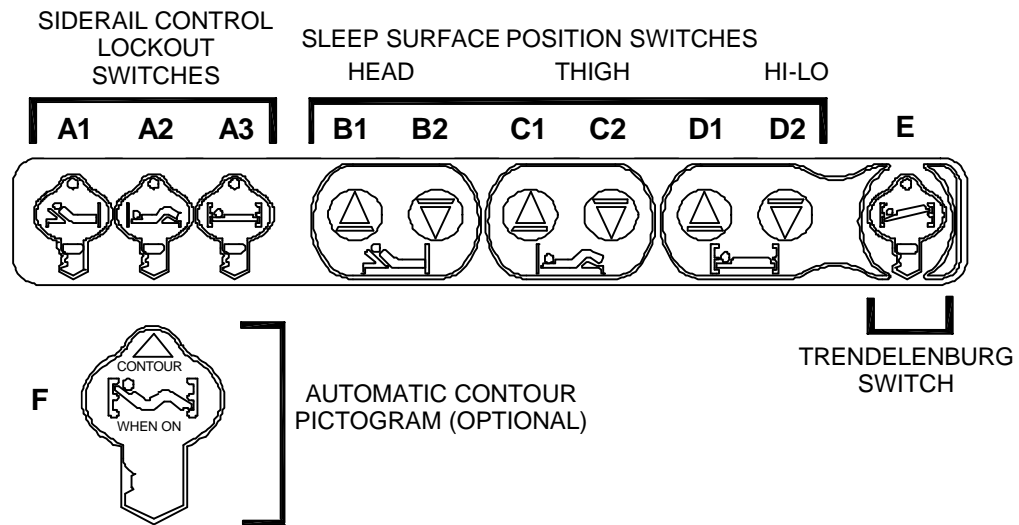


Figure 2.14B

- | | |
|---|------------------------------------|
| A: Push to raise Fowler | C: Push to raise Knee Gatch |
| B: Push to lower Fowler | D: Push to lower Knee Gatch |
| E: Push for nurse assistance (optional Nurse Call function, see section 2.14, page 18) | |

2.7 FOOT BOARD CONTROL PANEL GUIDE



- **Lockout Switches (A1 to A3)**

These three switches enable the selective lock out of the bed functions available to patient and nursing staff through the siderail control panels (inside and outside).

A1: Push to give access to Fowler adjustment from both interior and exterior siderail control panels. The LED of the lockout switch used will light up.

A2: Push to give access to Knee Gatch adjustment from both interior and exterior siderail control panels. The LED of the lockout switch used will light up.

A3: Push to give access to bed Hi-Lo control at the exterior siderail control panel. The LED of the lockout control used will light up.

NOTE

When a lockout switch is used to inhibit a specific function of the siderail control panels, the function is inhibited on both sides of the siderail control panel. The foot board controls are not affected by the lockout switches.

Lockout settings are automatically saved in the event of a power failure and restored following resumption of power.

- **Fowler Control Switches (B1 and B2)**

These two switches enable the adjustment of the Fowler angle.

B1: Push to raise Fowler.

B2: Push to lower Fowler.

- **Knee Gatch Control Switches (C1 and C2)**

These two switches enable the adjustment of the Knee Gatch angle.

C1: Push to raise Knee Gatch.

C2: Push to lower Knee Gatch.

- **Hi-Lo Switches (D1 and D2)**

These two switches enable adjustment of the sleep surface height (Hi-Lo).

D1: Push to raise the sleep surface

D2: Push to lower the sleep surface.

- **Trendelenburg Switch (E)**

This switch, when activated, enables both Trendelenburg positions through the Hi-Lo switches. A lighted green LED on the pictogram indicates that Trendelenburg positioning is available.

E: Push to activate the Trendelenburg positions, which then become available through the Hi-Lo switches.

Trendelenburg: Push switch **D1** to lower head end/raise foot end of the bed.

Reverse Trendelenburg: Push switch **D2** to lower foot end/raise head end of the bed.

NOTE

To replace the sleep surface in horizontal position after Trendelenburg positioning, simply press the Trendelenburg switch to deactivate the function (green LED will go out) and lower or raise the sleep surface to its limit. Then position the bed to the desired height.

- **Auto Contour (optional) Pictogram (F)**

This figure, illustrating the Contour position, points to the lockout switch to activate in the foot board control panel to position the bed automatically to the Contour position.

Contour positioning automatically raises the Knee Gatch as the Fowler is raised. This position prevents the patient from slipping towards the foot of the bed when the Fowler is inclined.

F: As indicated by the pictogram arrow, push the Knee Gatch lockout switch (**A2**) to enable the Auto Contour positioning.

NOTE

To obtain the Auto Contour position when raising the Fowler from a siderail control panel, both Knee Gatch and Fowler functions must be made available to siderail control panels through activating their respective lockout switches (**A1 and A2**) in the foot board control panel.

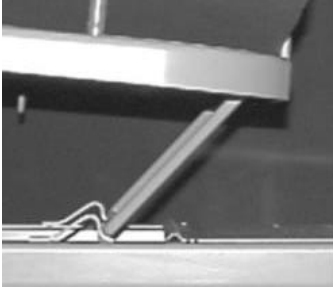
2.8 FOLEY BAG HOOKS

Foley bag hooks (see page 11, "Bed Illustration") are found at three locations on both sides of the bed, under the edges of the mattress support head, seat and foot sections.

NOTE

The Foley bag hooks move when the Fowler is raised or lowered. Fowler motion must be locked out when using these hooks to avoid inadvertent movement of the hooks. To do so, use the Fowler lockout switch at the foot end control panel.

2.9 FOOT PROP ROD



A foot prop rod, integrated to the foot section, is automatically engaged when the Knee Gatch is raised. The foot prop rod maintains the foot section nearly horizontal as the Knee Gatch raises, thus positioning the sleep surface into the vascular position (see page 7, "Bed Positions").

Since the foot prop rod automatically engages when the Knee Gatch is raised, it must be disengaged manually whenever a simple Knee Gatch raise is required. To do so, perform the following steps:



- Reach under the foot section, lift the prop rod and hold it while raising the Knee Gatch using the control located on the foot board control panel.
- As the Knee Gatch raises, the rod will come to pass the catches. Release it then and continue to raise the Knee Gatch. The foot section will then simply follow the move of the Knee Gatch without being propped.

2.10 BALKAN FRAME INSTALLATION

A standard Balkan frame can be installed on the bed using the IV sockets (see page 11, "Bed Illustration") located on all four corners of the bed. The GOBED IV pole sockets enable the use of IV poles in conjunction with a Balkan frame.

2.11 PATIENT RESTRAINT STRAP LOCATIONS

The GOBED is equipped with 12 separate locations for installing patient restraint straps. Ten of them are located on the mattress support edges directly across from each other whereas the remaining two are located on the top part of the head section, parallel to the head board (see page 11, "Bed Illustration").



WARNING

Improperly adjusted restraint straps can cause serious injury to a patient. It is the responsibility of the attending medical personnel to determine proper use of restraint straps and restraint strap locations.

2.12 CPR EMERGENCY RELEASE (OPTIONAL)



WARNING

The instant CPR release is for emergency use only. When activating the CPR release, all people and equipment must be removed from the area below and around the head and foot sections of the bed or serious personal injury or damage to equipment could occur.



If the Fowler and the Knee Gatch are raised and quick access to the patient is needed, pull outward one of the two emergency release handles, located under both top corners of the Fowler, to lower the Fowler and the Knee Gatch to flat position.

NOTE

Once the Fowler is completely down, the Fowler motor will reset itself. During this short period of time, the bed electrical functions will not be available

2.13 NIGHT LIGHT (OPTIONAL)

The GOBED may be equipped with an optional photoelectric night light to illuminate the floor area around the bed. The night light turns on as the room lights dim. It is located on the left side of the frame at the foot end of the bed.

2.14 NURSE CALL (OPTIONAL)

The bed may be equipped with an optional Nurse Call function allowing the patient to call for nurse assistance by simply pressing the Nurse Call red button.

The Nurse Call module is integrated to both siderail panel controls, next to the control switches (see page 14).

Included with this option are two Ø1/4" phono jacks located on both sides of the head end case. The phono jacks enable the use of a nurse call cord which can be placed within reach of a patient who is not in bed.

An optional cord with a Ø1/4" phono plug enables the linking of the bed to the hospital nurse call system.

2.15 120V AUXILIARY POWER OUTLET (OPTIONAL ONLY WITH 120V GOBED)



The North American version (120V electrical system) of the GOBED may be equipped with an optional auxiliary power outlet with a 5A breaker. Located on the left side at the foot end of the bed, this feature provides nursing staff with a convenient power source for small electrical equipments.

NOTE

Use only equipment with a current consumption of 5 amp or less.



WARNING

Use only hospital grade electric equipments with the auxiliary power outlet. The use of normal electric equipments may bring the current leakage to a level unacceptable for an hospital equipment.

3. OPTIONAL ACCESSORIES

Listed below are all the accessories that may be attached to the GOBED as well as their safe working load when applicable.

- 5/8"Ø removable anodized aluminum IV pole.
- 1"Ø removable removable anodized aluminum IV pole.
- 1"Ø fixed anodized aluminium IV pole.
- Two-function pendant control with or without hook (Product & Design).
- Three-function pendant control with or without hook (Product & Design)
- Emergency crank.
- Mattress support extension.
- 10" cushion for the mattress support extension.
- Overhead trapeze. Safe working load: 150 lb (68 kg).
- Oxygen bottle holder. Safe working load: 75 lb (34 kg).
- Flip type bed shelf. Safe working load: 40 lb (18 kg).
- Bed cradle.
- Chart holder.
- Siderail protective pads - set of two (head siderails) or four (all four siderails).

Annex A: Fixing Board Permanently

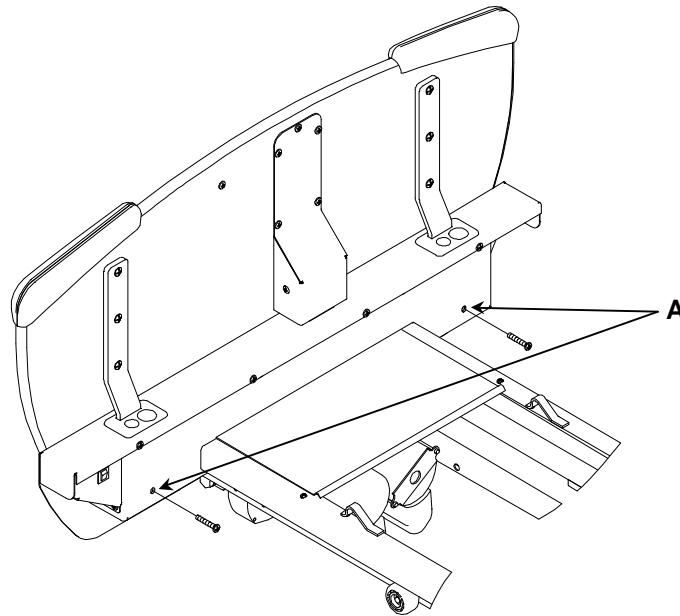


Figure annex A

One or both boards can be fixed permanently to the bed frame.

Two 1/4" flat washers, two 1/4" spring washers and two 1/4-20 x 1 3/4" hexagon bolts are needed for the head board. Two 1/4" flat washers, two 1/4" spring washers and two 1/4-20 x 2 1/4" hexagon bolts are needed for the foot board.

Simply insert the appropriate bolt and the two washer types in the factory-installed nut accessible through holes (**A**) located on the inner sides of the foot end and the head end casings.

NOTE

Do not permanently install boards when beds are used in care units where patient may require emergency treatments.