4 Le Pas du Château
85670 SAINT PAUL MONT PENIT
TEL : 02-51-98-55-64
FAX : 02-51-98-59-07
Email : info@medicatlantic.fr
Site Internet : http://www.winncare.fr

PITCHOUNE KALIN

IPO2L08

1. TRANSPORT AND STORAGE....3
2. BED ENVIRONMENT CONDITIONS....3
3. GENERAL USE....3
3.1. Precautions for use....3
3.2. First use....5
3.3. Use....6
3.3.1. Easy Move boards....6
3.3.2. Metal side rails....7
3.3.3. Wooden barriers....8
3.3.4. Angled lifting pole and IV stand....8
3.3.5. Separate braking....9
3.3.6. Remote control....9
3.3.7. Leg rest....10
3.4. Technical characteristics....10
3.4.1. Electrical data....10
3.4.2. Equipotentiality....12
3.5. Putting the back rest flat....13
➢ *If the bed is fitted with an emergency release for the back rest (**C**ardio **P**ulmonary **R**esuscitation)*....13
4. MAINTENANCE....14
4.1. Instructions for dismantling the motors....14
4.2. Maintenance....14
4.3. Cleaning and disinfection....17
4.4. Warranties....19
4.5. Identification....19
5. CONDITIONS FOR SCRAPPING....19
6. BED BOARDS - 80cm WIDTH - COMPATIBLE....20
7. COMPATIBLE ACCESSORIES....20
8. SPECIFIC USE....21
8.1. Purpose of bed....21
8.2. General description....21
8.3. Specific precautions for use....21
8.4. Electrical connection diagram....21
8.5. Use of specific elements....22
8.5.1. Centralised brake....22
8.5.2. Wooden side rails....22
8.5.3. Protective covers....22
8.6. Specific technical data....23
8.6.1. Noise....23
8.6.2. Weight....23
8.6.3. Dimensional....23

Dear Sir/Madam,

You have acquired a MEDICATLANTIC medical bed equipped with its accessories, and we thank you for your custom.
Our beds and their accessories are designed and manufactured in compliance with the essential requirements of the European Directive 93/42/EEC and 2007/47/EEC.

They are tested in conformity with standard EN 60601-2-52 (2010) in their commercial configurations, including the boards and accessories that we manufacture, so as to ensure you maximum safety and performance.
As a result, maintenance of the contracted good's warranty depends on compliance with the conditions for use recommended by MEDICATLANTIC and the use of original accessories, which also guarantees you safe use of the medical bed and its accessories.

1. TRANSPORT AND STORAGE

For transport, the bed should be in its low position, on a pallet, and strapped and protected. The wired control and supply lead should be attached to the bed base.

The head and footboards are protected and strapped to the sleeping surface.

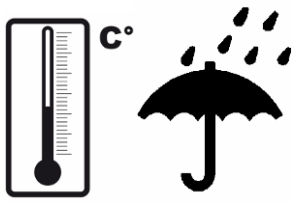
The bed should be transported upright when in its original packaging in compliance with the instructions printed on the packaging.

It is strictly forbidden to stack packages weighing over 60kg/m², whatever position they are in.
Before transporting or dismantling the bed, make sure the back and leg rests are fixed to the frame of the bed base.

2. BED ENVIRONMENT CONDITIONS

The bed, along with the boards and accessories, must be transported, stored and used at a room temperature of between -10℃ and +50℃, and relative humidity of between 30% and 75%.

Atmospheric pressure between 700hPa and 1060hPa



Observe the specified environmental conditions

3. GENERAL USE

3.1. Precautions for use

Before use, it is essential to read these instructions carefully. They contain advice on using and looking after the bed to guarantee optimum safety.

The user and staff must be trained and aware of the risks associated with using the bed, and children, confused or disorientated persons must not be allowed on it.

Although the bed is conforming with **Electromagnetic Compatibility**, some devices may alter how it functions, in which case they must be used at a distance or not used at all.

The bed is a medical device and must not be modified under any circumstances. You must ensure its traceability, including that of the boards and its accessories.
If you assemble different types of medical devices, you must conduct a risk analysis and make the **CE** declaration.

The electric parts (jack, supply box, wired control, etc.) shall only be repaired by the manufacturer Linak.

The bed is not suitable for use with an inflammable anaesthetic mixture with air or oxygen or nitrous oxide.

The loads permitted (see bed characteristics) must be distributed evenly over the bed base.

Do not activate all the motors at the same time when the patient is in the bed (only one motor is authorised at one time, except elevation by 2 motors or simultaneous function).

After each use and while care is being administered to the patient, the brakes must be activated.
We recommend putting the bed in its low position after every use and while the patient is resting, to reduce the height of falls by a confused or agitated person. Remember to lock the function(s) (if the option is available).

On change of height or angle of the parts of the bed, make sure that there are no objects and no parts of the patient's or carer's body caught between the bed, the boards, the accessories and the ground or between the boards and base or between the cross braces.

Do not sit down on the side of the back rest or leg rest if this is not flat.
In the case of a prolonged more than 50 ° tilt bust semi-sitting position, it is recommended to vary the position of the person in bed every 2 hours.

When the bed is being moved, keep the power lead well away from the ground and wheels.

When use of an adaptor, extension lead or connection plug proves necessary, you must check that its characteristics are suitable for the bed.

Connection to the supply box must be done using a mains complying with the standards in force and corresponding to a voltage of use of 230 V.

The mains plug must be disconnected before the bed is moved.

Do not pull on the mains leads to disconnect the mains plug.

During any handling, try not to catch the leads of the motors and remote control and do not get them knotted.

The wired control must be hooked to the headboard when not in use. MEDICATLANTIC prohibits the establishment of two beds in a room or in a too close environment as infrared remote command the two beds together.

The condition of the leads must be checked frequently. If the slightest modification is observed, the person in charge for maintaining the bed must be contacted to carry out the necessary repairs.

If repairs are required, the person in charge of maintenance must be contacted.
Moreover, the telephone number of the company to be contacted for any repairs is given in this document.

When using side rails, the distance between the top of the rail and the uncompressed top surface of the mattress should be at least 22 cm.

For greater safety, the side rails can be adapted (see accessories).
To assist patient mobility, it is possible to fit a Mobility Aid System (S.A.M.™).

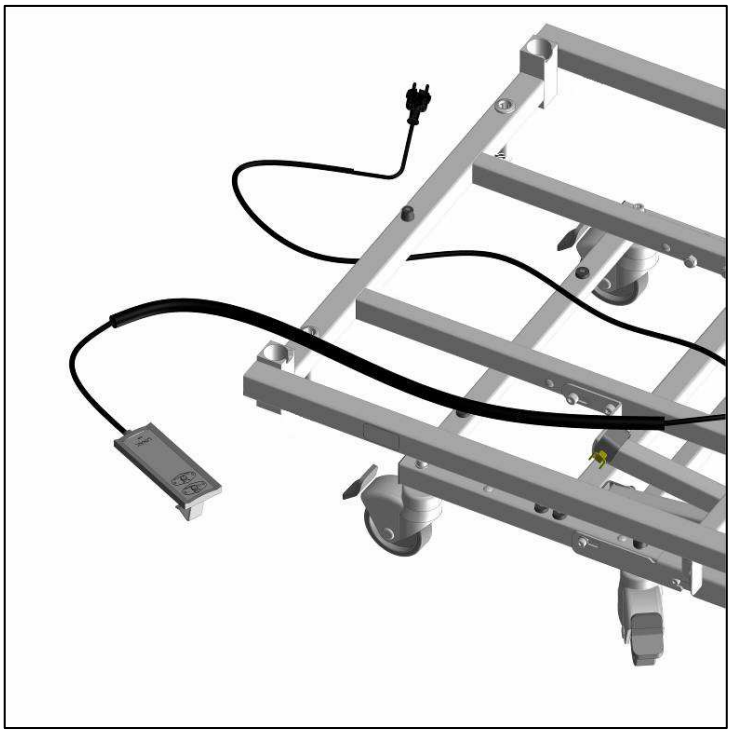
The cleaning instructions recommended must be complied with.

Only use original parts and accessories supplied by **MEDICATLANTIC** to guarantee safety and maintain product conformity. The bed must not be modified.

Abnormal use of the bed may damage it or cause accidents to users, in which case the warranty shall be annulled. Abnormal use means failure to comply with the precautions for use, maintenance instructions and other uses not related to the bed's normal purpose, such as: use of the bed by several people at the same time, use outdoors, moving the bed on a slope that is steeper than 10°, etc.

3.2. First use

- Remove the packaging protective devices, adhesive tape, packing straps and holding clamps (see unpacking instructions on the pallet).
- Put the bed in the designated room, foreseeing an appropriate perimeter of use for the different functions (variable height, TR, etc.), especially if the bed has a lifting pole or side rails. Check that there is sufficient ceiling height if a lifting pole is fitted.
- Brake the wheels.
- The mains socket should remain accessible to enable the bed to be disconnected quickly.
- Plug in the power lead, checking that the mains comply with the standards in force and that it is suitable for the supply box voltage.
- Also ensure that the power lead and the remote control lead are positioned correctly to prevent any risks of getting caught between the moving parts of the bed.



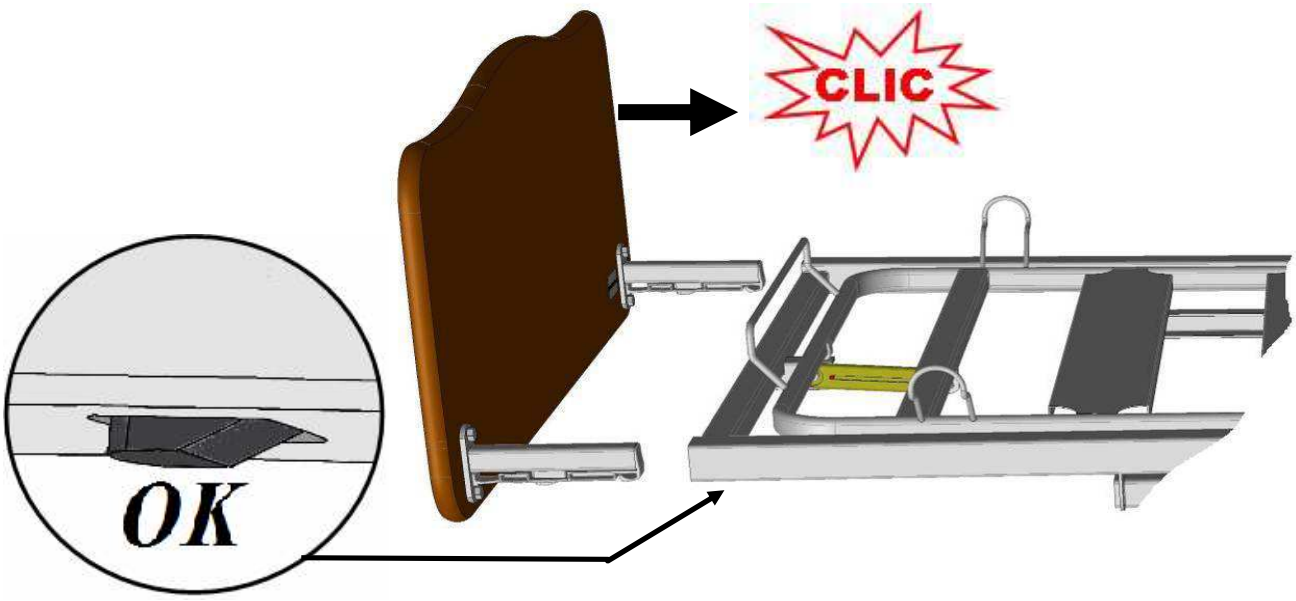
- Check that the bed operates properly after installing it in accordance with the check-list appended in this document. (Test all of its functions)
- Users must be trained in how to use the equipment.

Inform the patient and his visitors of the safety instructions to be observed.

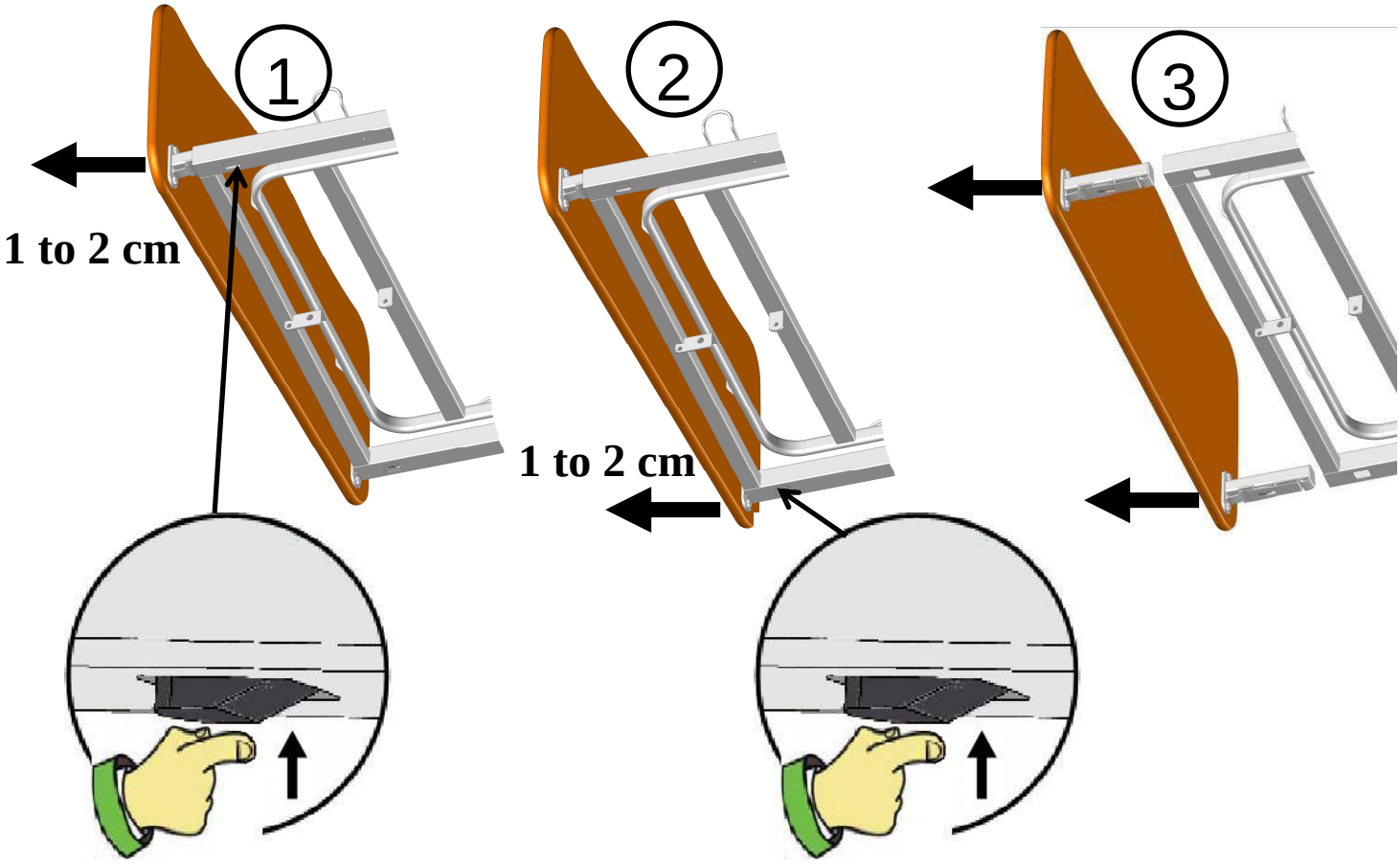
3.3. Use

3.3.1. *Easy Move boards*

- *Installing an Easy Move bed board :*



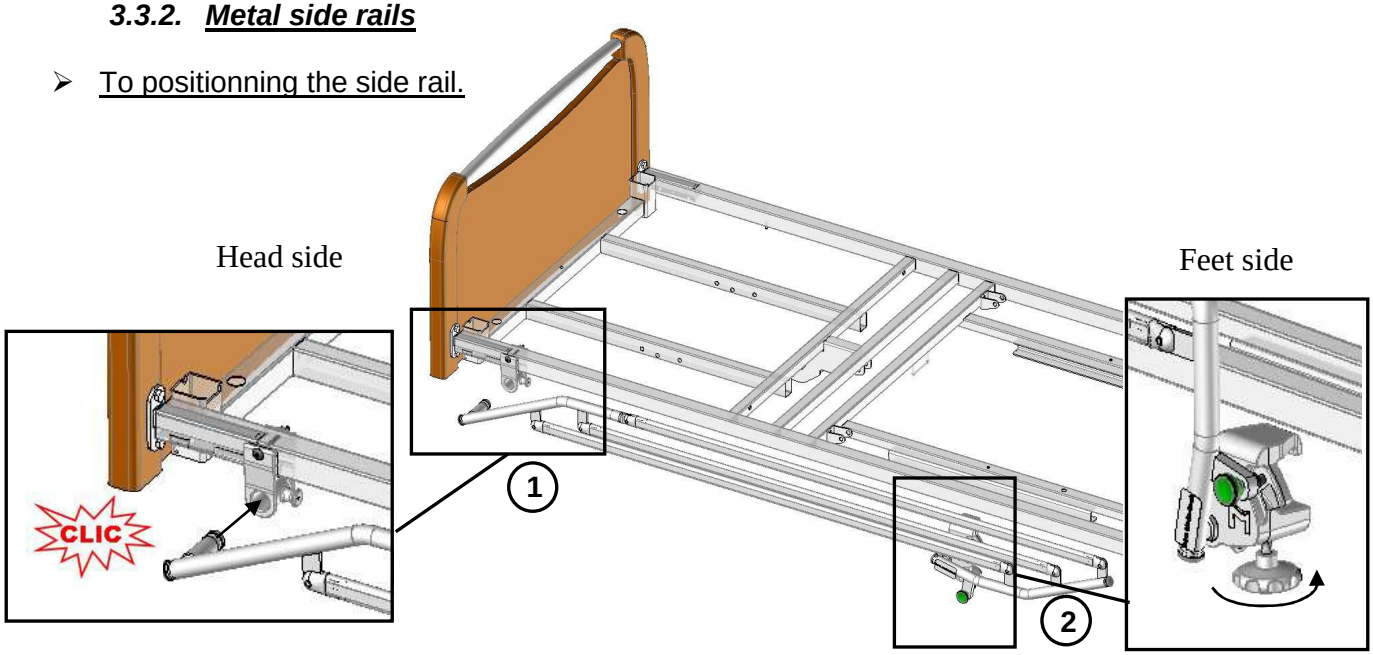
- *Removing an Easy Move bed board :*



Assemble the highest board on the head side.

3.3.2. Metal side rails

➢ To positionning the side rail.



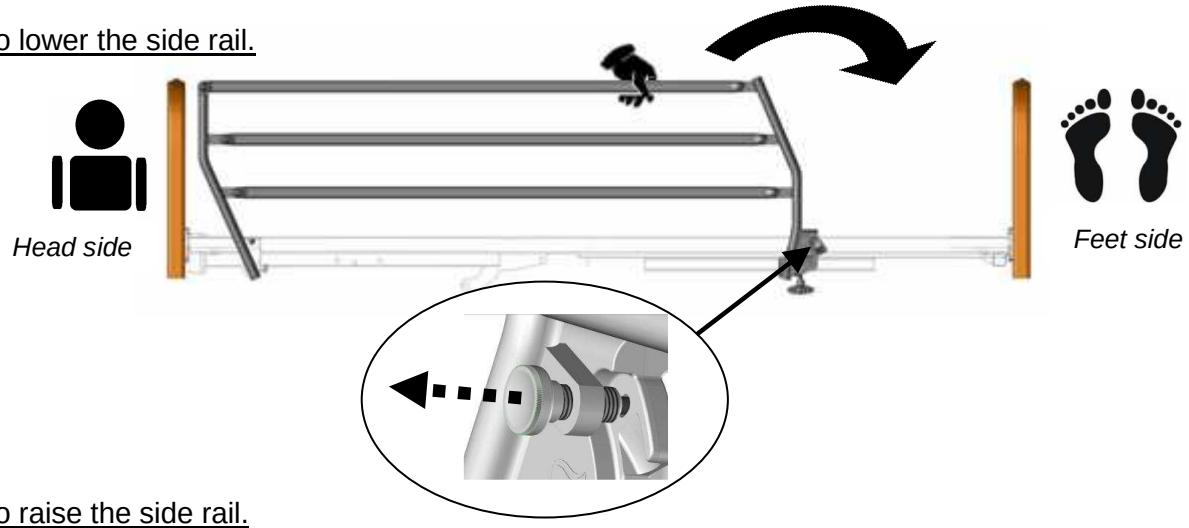
1 Insert amount of the side rail in the grip jaw on the head side of the bed.

2 Tighten the Rondo screws of the grip jaws on the bed base.

To remove the side rail, in reverse operation 2 and operation 1 by pulling the release pin on the grip jaw of the head side.

If the side rail is poorly positioned, safety of the patient may be endangered or a malfunctioning may occur. The side rails must not be used when the patient is a child (under 12) or if s/he is too small (≤ 146 cm).

➢ To lower the side rail.



➢ To raise the side rail.

Check that the side rail is locked by trying to fold it without using the release pin.
There must be at least 220 mm between the top of the side rail and uncompressed mattress surface.

3.3.3. Wooden barriers

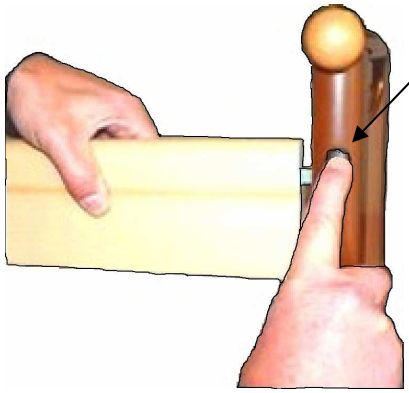
See the attached instructions for fitting the wooden side rail.

- To raise the side rail.

① Raise the top side rail with both hands until it locks.
② Check that it is properly slot in.

- To lower the side rail.

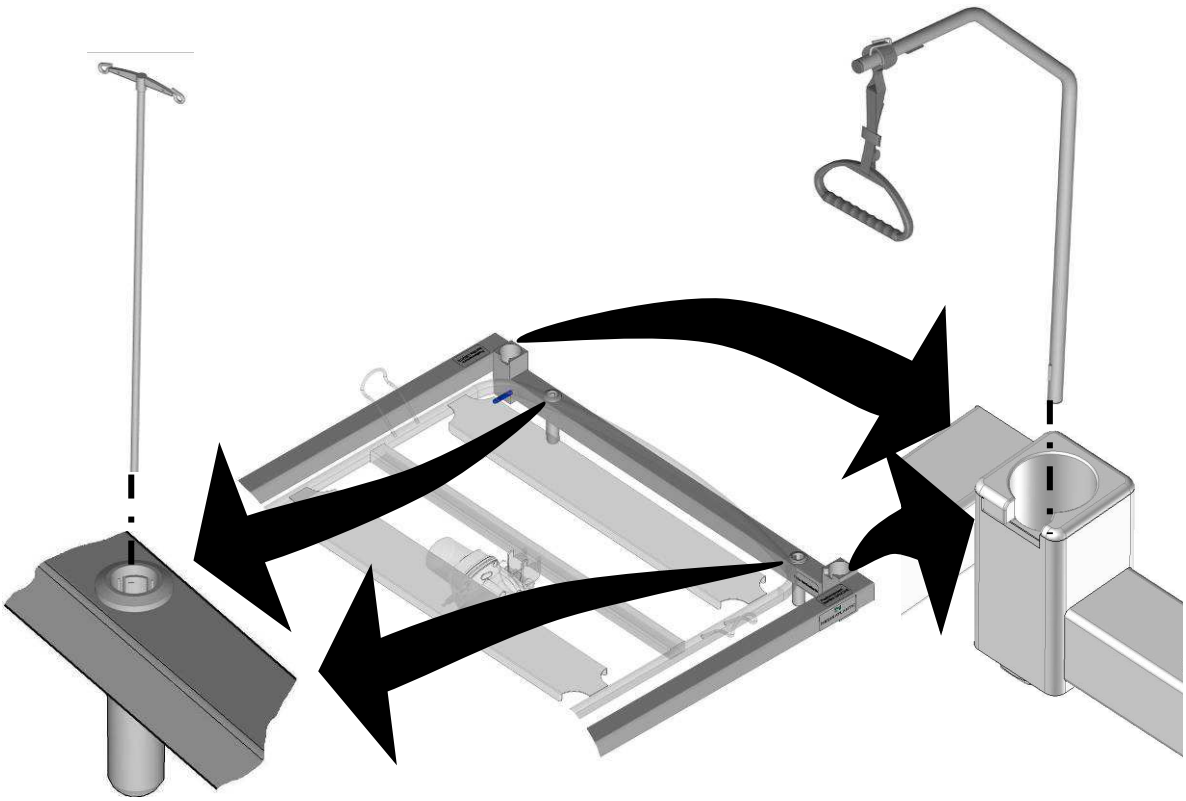
① Raise the top side rail with one hand.
②Press on the unlocking button with the other hand.
③ Support the rail as it lowers.
④ Repeat steps ① to ③ for the other side.



> Check that the high guide engage in the right direction in the low guide.

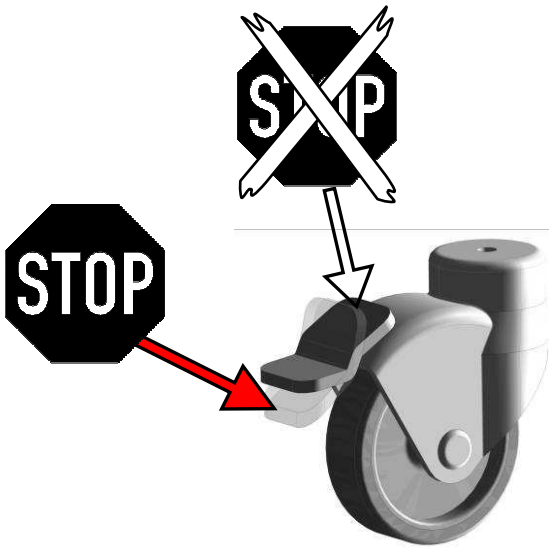
3.3.4. Angled lifting pole and IV stand

The lifting pole is intended to help the patient lift him/herself up and change position in the bed. It is not meant to help with transferring.



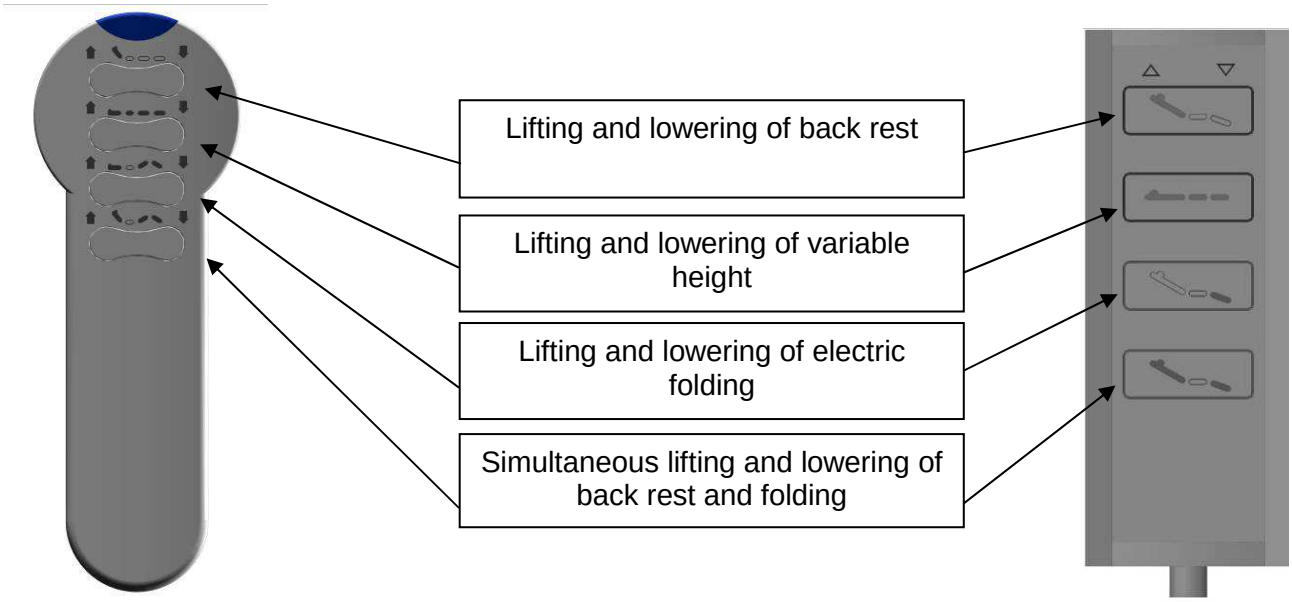
3.3.5. Separate braking

Check that the wheels are locked by trying to move the bed. If this is not done, the patient or another person who leans on the bed may fall.

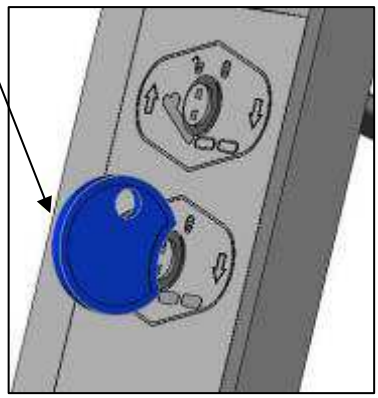


3.3.6. Remote control

- Carry out a test cycle when the bed is empty to familiarise yourself with the bed functions.

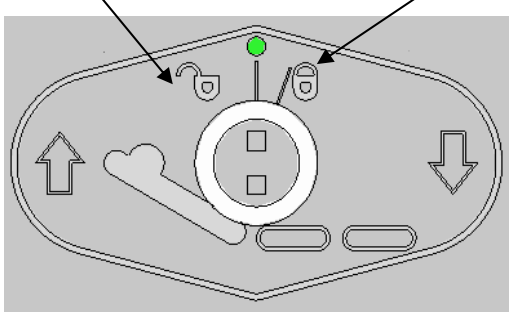


Key to lock a function



KEY IN VERTICAL POSITION: THE FUNCTION IS UNLOCKED

TURN THE KEY SLIGHTLY TO THE RIGHT TO LOCK THE FUNCTION



3.3.7. Leg rest

- Manual crank version (11):

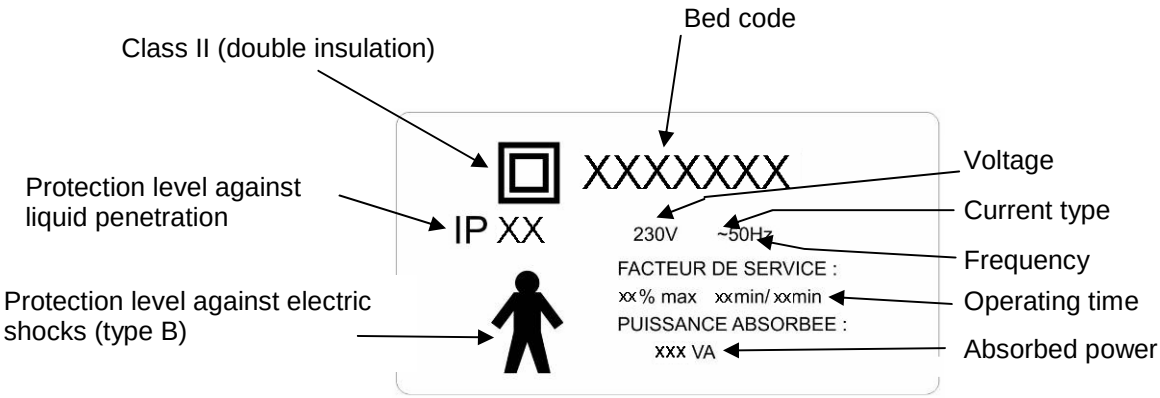
To lift, lift the leg rest using the wire handle at the end.
To lower, relieve the leg rest slightly or to its maximum with the hand to release the catch, then lower the leg rest.

- Version with electric folding (08):

Memory folding: This function keeps a position of the tibia section horizontal when the jack is activated upwards. To use this function, the 1st crank catch must be engaged when the leg rest is flat.
Folding without memory: the end of the tibia section stays in contact with the bed base.

3.4. Technical characteristics

3.4.1. Electrical data



	TYPE	*PROTECTION INDEX*	*VOLTAGE*	*FREQUENCY*
LINAK jack	LA27 / LA24 / LA34	IP 66	24V DC	-
Supply box	CB6 / CB16	IP 66	230 V AC	50 HZ
Connection box	MJB	IP 66	24V DC	-
Operator's side control console	ACC	IP 66	24V DC	-
Operator's mobile control console	ACO	IP 66	24V DC	-
Wired control	HB72 / HB74	IP 66	24V DC	-
Lockable wired control	HL72 / HL74	IP 54	24V DC	-
Flexible arm control	FPP	IP 66	24V DC	-
Battery	BA1812-	IP 66	24V DC	-
Infrared control	HB21	IP 21	3V DC	-

Maximum operating time: Read the recommendations on the electrical label on the bed.

Essential performances

The bed will not move automatically when subject to electromagnetic disturbances within the limit of the values indicated below.

Manufacturer's declaration and guide – electromagnetic emissions		
The medical bed (see references in contents) has been designed for use in the electromagnetic environment specified below. The user should ensure that it is used in such an environment.		
Emissions test	**Compliance**	**Electromagnetic environment - Guide**
RF emissions CISPR 11	Group 1	The medical bed (see references in contents) uses RF energy only for its internal functions. 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 medical bed (see references in contents) can be used in all domestic environments, including those directly connected to the public low-voltage power supply network that supplies buildings for domestic purpose. [ ]
Harmonic emissions EN 61000-3-2	Class A	
Voltage fluctuations / Flicker EN 61000-3-3	Applicable	
RF emissions CISPR 14-1	Compliant	The medical bed (see references in contents) has not been designed for connection to other equipment.

Manufacturer's declaration and guide - electromagnetic immunity			
The medical bed (see references in contents) has been designed for use in the electromagnetic environment specified below. The user should ensure that it is used in such an environment.			
Immunity test	**IEC 60601 Severity level**	**Compliance level**	**Electromagnetic environment - Guide L**
Electrostatic discharge EN 61000-4-2	± 6 kV contact ± 8 kV air	± 6 kV contact ± 8 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 transients EN 61000-4-4	±2 kV for feeders ±1 kV for input/output lines	±2 kV for feeders ±1 kV for input/output lines	The quality of the main power supply must be the same as for a typical commercial or hospital environment.
Surges EN 61000-4-5	Differential mode ± 1 kV Common mode ± 2 kV	Differential mode ± 1 kV /	The quality of the main power supply must be the same as for a typical commercial or hospital environment.
Voltage dips, short interruptions and voltage variations EN 61000-4-11	• <5% U_T - for 10 ms • 40% U_T - for 100 ms • 70% U_T - for 500 ms • <5% U_T - for 5 s	• <5% U_T – for 10 ms • 40% U_T - for 100 ms • 70% U_T - for 500 ms • <5% U_T - for 5 s	The quality of the main power supply must be the same as for a typical commercial or hospital environment. If the user of the medical bed (see references in contents) wants to be able to continue to use the bed during interruptions in the main power supply, it is recommended that the bed be powered by a converter or battery.
Power frequency magnetic field (50/60 Hz)	3 A/m	3 A/m	Power frequency magnetic fields should be at levels characteristic of a location in a typical commercial or hospital environment.

NB: U_T is the nominal value of power voltage applied during the test.

Manufacturer's declaration and guide - electromagnetic immunity			
The medical bed (see references in contents) has been designed for use in the electromagnetic environment specified below. The user should ensure that it is used in such an environment.			
Immunity test	**IEC 60601 Severity level**	**Compliance level**	**Electromagnetic environment - Guide**
Conducted RF EN 61000-4-6	3 Vrms 150 kHz to 80 MHz	3 V	Portable and mobile RF communications equipment should be used no closer to the medical bed (see references in contents), including leads, than the recommended separation distance, calculated using equations applicable to the frequency of the transmitter. **Recommended separation distance** $d = 1{,}17\sqrt{P}$
Radiated RF EN 61000-4-3	3 V/m 80 MHz to 2.5 GHz	3 V/m 80 to 800 MHz	$d = 1{,}17\sqrt{P}$ 80 MHz to 800 MHz $d = 2{,}33\sqrt{P}$ 800 MHz to 2.5 GHz
		2 to 2.5 GHz 10 V/m	where P is the maximum output power rating of the transmitter in watts (W) according to

		800 MHz to 2 GHz	the transmitter manufacturer and *d* the recommended separation distance in meters (m). The field strengths transmitted by fixed RF transmitters, determined by an electromagnetic measurement of the site [a], must be less than the conformity level in each range of frequencies. Disturbances can occur near devices marked with this symbol:

Note 1 At 80 MHz and 800 MHz, the upper 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.

A 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 medical bed (see references in contents) is used exceeds the applicable RF compliance level above, the normal operation of the bed must be checked. If abnormal performance is observed, additional measures may be necessary, such as re-orienting or relocating the medical bed.

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

Recommended separation distances between portable and mobile RF communications equipment and the medical bed (see references in contents)

The medical bed (see references in contents) is intended for use in the electromagnetic environment in which radiated RF disturbances are controlled. 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 power of transmitter W	**Separation distance according to frequency of transmitter m**		
	150 kHz to 80 MHz	80 MHz to 800 MHz	800 MHz to 2.5 GHz
	$d = 1{,}17\sqrt{P}$	$d = 1{,}17\sqrt{P}$	$d = 2{,}33\sqrt{P}$
0.01	0.12 / 0.116	0.12 / 0.116	0.23 / 0.233
0.1	0.37 / 0.316	0.37 / 0.366	0.74 / 0.736
1	1.17 / 1.16	1.17 / 1.16	2.33 / 2.33
10	3.70 / 3.66	3.70 / 3.66	7.37 / 7.36
100	11.70 / 11.6	11.70 / 11.6	23.30 / 23.3

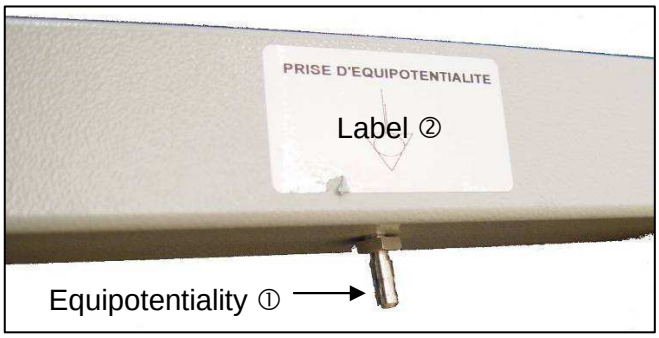
For transmitters rated at a maximum output power not listed above, the recommended separation distance ***d*** in meters (m) can be estimated using the equation applicable to the frequency of the transmitter, where ***P*** is the maximum output power rating of the transmitter in watts (W) according to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

Note 1 At 80 MHz and 800 MHz, the separation distance for 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.

3.4.2. Equipotentiality

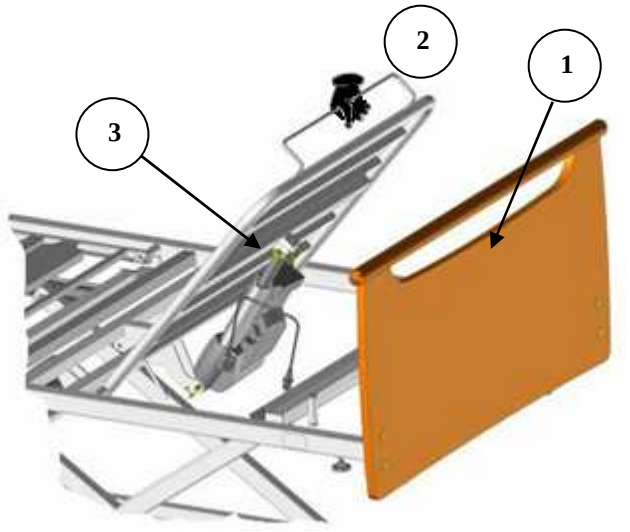
Under the head-half of the bed base you will find an equipotentiality socket ①, identified by the label ②, enabling you to connect any electromedical devices. The leads of these devices must pass through the head end and not the sides.



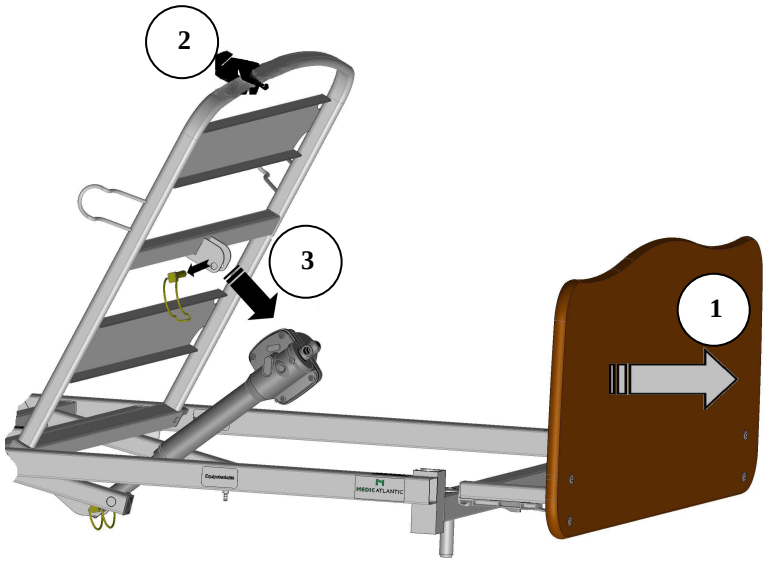
3.5. Putting the back rest flat

In the event of a power cut or failure, flatten the back rest as follows:

a) Disconnect the power supply.
b) Dismantle the headboard ①.
c) Stand at the head of the bed and take hold of the back rest handle ② with one hand. Push or lift to compensate the pressure exerted by the patient and unhook the clip ③ by the connecting rod with the other hand. The back rest jack will then pivot downwards.
d) Put the headboard back.



Version with handle on the back rest

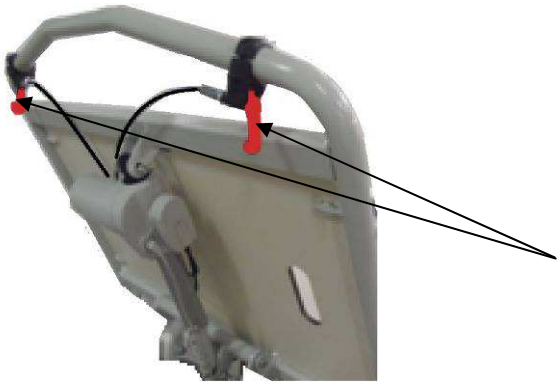


Version without handle on the back rest

➢ ***If the bed is fitted with an emergency release for the back rest (Cardio Pulmonary Resuscitation)***

1) Grasp the back rest with one hand.
2) With the other hand, activate one of the two handles on the back rest while lowering.

If the handle is released, the back rest will stop moving.



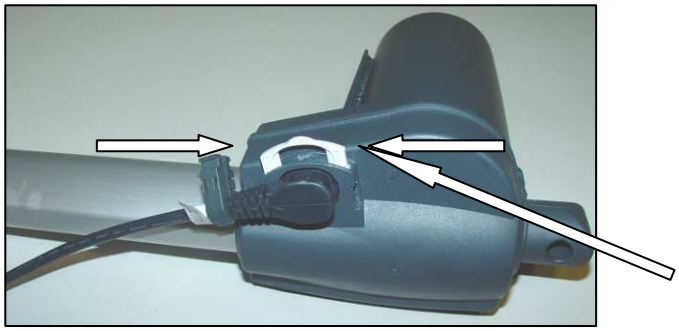
Release handles

4. MAINTENANCE

4.1. Instructions for dismantling the motors

Disconnect the 230 volts connection before dismantling.

- Dismantle when the bed is empty or in the side position.
- If dismantling in any other position, keep a firm hold of the moving parts to avoid any shearing.
- Unblock the safety clips ①, unplug the motor leads, and remove them from the securing seals.
- Put the motors back in place and put in the same direction as at the beginning.



①Safety clip

4.2. Maintenance

Quality control of medical beds will be made by technical staff or trained biomedical and taking into account the normal conditions of use specified in the user guide, on a bed with its specific security barriers.
The bed must be available to perform all quality control at least once a year, but also on special request and corrective maintenance on the performance that could be affected by the intervention. However, to save time this may be associated with preventive maintenance. In this case, it is not useful to make a further examination of already controlled performance.

RECOMMENDATIONS FOR PREVENTIVE MAINTENANCE:
Preventive maintenance should be carried out in accordance with our specifications and at least once a year by the organisation or person who installed the bed.
Between two maintenance sessions and at least once a year, the following should be carried out:
- Verification that the electrical leads are connected all along the metal jambs to prevent shearing of these leads when the variable height is being activated.
- Verification that all of the electrical leads and plugs are in good condition. Replacement if there is the slightest alteration (wear, shearing, damage, etc.).
- Verification of the external appearance (traces of damp and good overall condition of protective covers in particular) and that the motors and jacks function properly.
- Verification that the bed is in good working order (test all functions).
- Verification that the frame, bed base and mechanical joints are all in good condition.

When maintenance is carried out at the patient's home as part of a long-term contract, the installer must also:
- Check that the bed is properly installed (check to see that there hasn't been any modification contrary to the safety instructions made by the user since the bed's installation).
- Remind the users of the safety instructions.
- All installation and preventive maintenance operations must be recorded. See table model below. This record must be kept in a designated area throughout the bed's lifetime.

QUALITY INSPECTION OF MEDICAL BEDS

IDENTIFICATION OF MEDICAL BED	ESTABLISHMENT
CATEGORY	
TYPE MODEL TRADEMARK	
SERIAL NO.	SERVICE SITE
INVENTORY NO.	
DATE OF MANUFACTURE	

TEST DEVICES CHECKED AND CONFORMING WITH STANDARDS		
Description	Type/model	Identification/serial no.
Mass continuity tester		
Dielectrimeter		
Fault current to patient		

Qualitative aspects	NA **(1)**	YES	NO
VISUAL CHECKS			
General condition			
User's manual available			
Headboard and footboard present			
Good overall condition (head and footboards, bed corners, protective stops)			
General cleanliness			
Acceptable state of corrosion given the requirements of the user department			
Identification/label/serigraphy in good condition			
Mechanical condition			
Lifting pole in good condition (positioning and strap)			
Mechanical leads in good condition			
Sleeping surface in good condition (bed base)			
Boards lock and tighten well (head and footboards)			
Chest rest functions properly			
Leg rest functions properly			
Half-seated position functions properly			
Manual leg rest functions properly			
TR/RTR positions function properly			
Bed base extension functions properly			
Castors function properly (pivoting, rolling, etc.) including the steering castor where applicable.			
Bed immobilises properly (castor brakes, etc.)			
Verification of tightenings, diverse nuts and bolts, pins, pivot, IV stand			

Qualitative aspects	NA **(1)**	YES	NO
Verification that welds are in good condition			
Absence of sound disturbances (squeaking, lubrications)			
Electrics, hydraulics and pneumatics			
Electrical leads, plugs and connectors are in good condition (not sheared, not caught, etc.)			
Electrical parts in good condition (leads, motors, boxes, etc.)			
Hydraulic and pneumatic parts in good condition (pumps, compressors, jacks, dampers, etc.)			
Remote controls, displays and lights in good condition			

Bed-specific side rails	NA **(1)**	YES	NO
The rails in place and specific to the bed and/or comply with the manufacturer's specifications			
Properly positioned and secured			
Side rail locking functions properly in raised position			
Check that the height measured from the top of the barrier to the uncompressed mattress surface, excluding therapeutic mattresses, is more than or equal to 220 mm (complies with the standard in force) **2**			

Safety check		NA **(1)**	YES	NO
Locking of operational functions				
Inactivation of variable height control pedals				
Cardio Pulmonary Resuscitation (CPR) emergency flattening of the back rest	Check that the headboard extracts or retracts properly in an emergency			
	Check that the chest rest emergency flattening function works properly			
Withstands jack load well				
Visual and sound alarms in good working order				

Quantitative aspects	NA **(1)**	YES	NO
Bed functions properly using the battery			
Check the scale of movements			
Maximum angle when propped = Maximum angle of specifications claimed by the manufacturer (± 2°)			
Maximum height = Maximum height of specifications claimed by the manufacturer (± 20 mm)			
Minimum height = Minimum height of specifications claimed by the manufacturer (± 20 mm)			

Electrical safety			
Electrical safety inspection (Values comply with EN 60601-1)			

Comments

Conclusion	YES	NO
Operational (is the safety of the patient, carers and technical staff at risk?)		
Plan of action (see comments) **3**		
Recommended date of next quality inspection		

OPERATOR			
NAME		Establishment	
DATE		Signature	

1 Not Applicable

2 If the height measured does not comply with the standard, the health manager responsible for correct application must be informed. Failure to comply is not a criterion for a non-operational status.

3 The manager decides on the actions to take and which people to contact depending on the results of the quality inspection and the comments made.

4.3. Cleaning and disinfection

High-pressure cleaning is forbidden.
Unplug the mains lead.

Check that all the electrical parts are connected together. All the sockets of the supply box must be used, otherwise its watertightness is not guaranteed.

Clean the electric covers of the jacks and wired control straightaway if any bodily fluids, particularly urine, have sprayed on to them.

The medical bed is a non-critical appliance requiring “Low Level” disinfection.
We draw your attention to the fact that the recommendations below are drawn up according to the rules of good practice but are not a protocol. Contact the hospital hygiene department.

- **AIM**

To recondition the bed and prevent the transmission of germs from one patient to another.
To eliminate all organic soiling by:
- physical action (cleaning)
- chemical action (disinfection)

- **INDICATION**

Physical and bacteriological cleanliness of the bed and its accessories

➢ **EQUIPMENT**

Microfiber wipes

Detergent or Detergent-Disinfectant (Surface DD with CE mark) and surface Disinfectant (Chlorine substances, alcohol base < 30%)

Attention: DD products and Javel water must not be used undiluted. A remanence time must be applied according to the disinfectant manufacturer's instructions (the drying time without human presence is often the same as the remanence time)

SANIVAP steam appliance with accessories

➢ **TECHNICAL**

- Daily maintenance with a surface DD product in one operation.
- Maintenance when the patient leaves, or periodically, by the process known as *Bio cleaning* observing the 3 operations:
  - Cleaning is done by means of a cloth soaked in a surface detergent or Detergent-Disinfectant (DD) solution
  - Rinsing is done with cloth rinsed in clean water
  - Disinfection is done by means of a cloth soaked in a surface disinfectant solution.
- Specific maintenance by specialist contractors after removal of the bed from the establishment:
  - Dispose of the packaging after decontamination of the inside by spraying with a Detergent-Disinfectant solution
  - *Bio cleaning* operation, or,
  - Steam cleaning (accessory with microfiber band) of the flat surfaces and the base slats. Change the washing mops regularly to prevent water accumulating. Clean the parts that are difficult to access with a steam nozzle (wheels, hinges after opening, corners, etc.). For tubes, use the steam nozzle with a microfiber cloth. Never direct the nozzles onto electrical boxes or actuators.
  - Dry hinges with compressed air
  - Attention: Disinfect jacks, electrical boxes and remote controls with a microfiber cloth soaked in disinfectant.

Do not rinse or wipe.

Check the operation of all the bed functions

Repair if necessary

Pack in thermoplastic film

Attention:

- In the event of additional precautions (Contact precautions, Droplets or Air), apply the measures recommended by the hospital hygiene department
- The use of a Javel water solution of more than 5000ppm (0.5% of active chlorine) should be justified by a microbiological risk and only applied for the required time (Risk of ageing of some materials, especially their colour).
- The concentration of alcohol-based surface disinfectant solutions should be less than 30%.

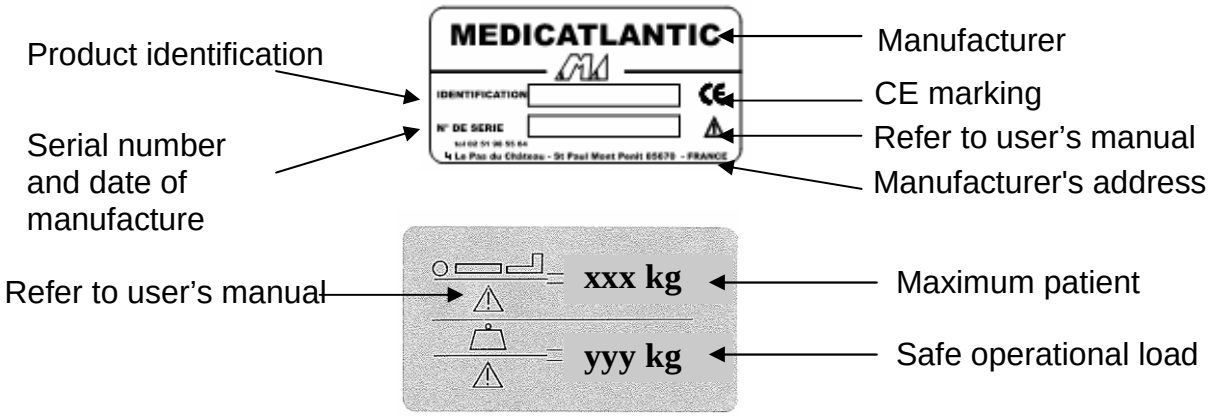
Note: The use of the terminal disinfection process is compatible with the medical bed and its accessories.

Product for external use. Do not swallow, keep away from heat sources and avoid contact with eyes.

4.4. Warranties

- All of our products carry a warranty against any manufacturing defect, provided the normal conditions for use and maintenance are complied with.
- Labour costs due to changes in structures or parts under warranty are not taken into account.
- Please refer to the standard terms of sale for the specific terms of warranty for each product.
- Every time you contact us for possible maintenance, you must quote us the information on the bed identification label and on the electric parts if these are concerned.
- Original parts shall be supplied for replacement, within the term of warranty, by our customer sales network determining the beginning of the term of warranty.
- Defective parts must be returned to ensure proper application of this warranty and also to avoid any invoicing.

4.5. Identification



5. CONDITIONS FOR SCRAPPING

The product must be scrapped if the main requirements are no longer met, particularly when the product no longer has its original characteristics and has not been subject to corrective action during the manufacturing process.

Measures should therefore be taken to ensure that the bed is no longer used for the purpose it was originally intended.

6. BED BOARDS - 80cm WIDTH - COMPATIBLE

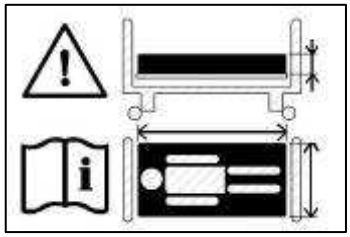
Item	Reference
PITCHOUNE wooden barriers	P605-00
PITCHOUNE steel barriers	P606-00

7. COMPATIBLE ACCESSORIES

Ref.	Des.	Charge maxi (kg)
A1700xx	IV stand, 2 hooks	8
A5800	Chrome-plated urine bottle holder	NA
A8400xx	Telescopic IV stand, 2 hooks	8
A165-00	Lifting pole for Kalin Pitchoune bed	75
A193-00	Chrome-plated wall-mounted basin holder	NA
A230-00	Remote-control lead holder	NA
A260-00	Epoxy urinal holder	NA
A562-00	Full length KALIN side rails	NA
A563-00	KALIN bed skirt	NA
A564/565-00	KALIN EPOXY side rail	NA
A634-00	Kit for side loading bed	NA
S0200	Stainless steel intravenous stand on base	8
Y0300	Lifting pole on U shaped base, fixed	75

Only accessories and boards supplied by ***MEDICATLANTIC*** guarantee safe use.

- **Mattress**



Observe the mattress dimensions prescribed. See user guide

Width of base in cm	Characteristics of compatible mattresses
80	Width ***76 cm minimum*** with a high-resilience foam of **34 kg/m³ minimum**, height between ***14cm min. and 15 to 17cm max.***

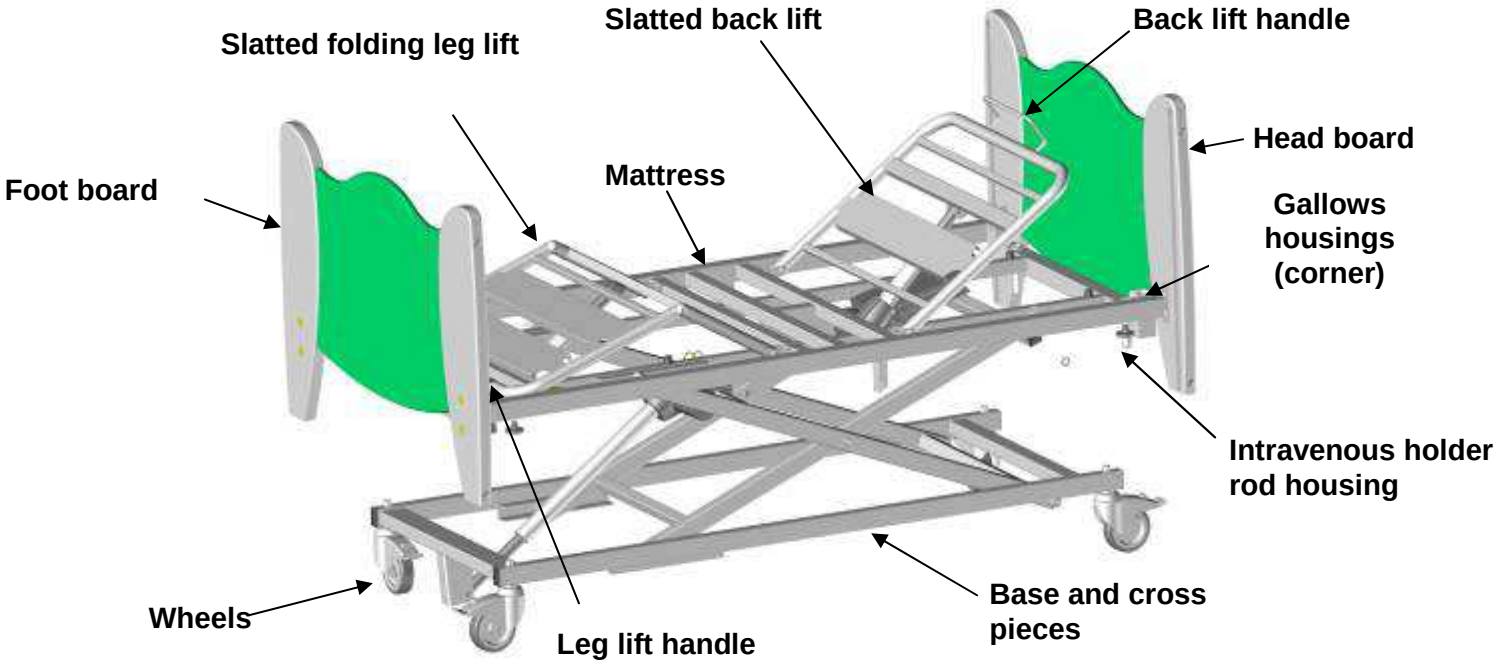
Incompatible mattresses can pose RISKS.

8. SPECIFIC USE

8.1. Purpose of bed

- These beds are intended for children aged 3 to 12 years old (height less than 146 cm) for Home Treatment and in establishments when they are fitted with the emergency back lift lowering option (CPR)

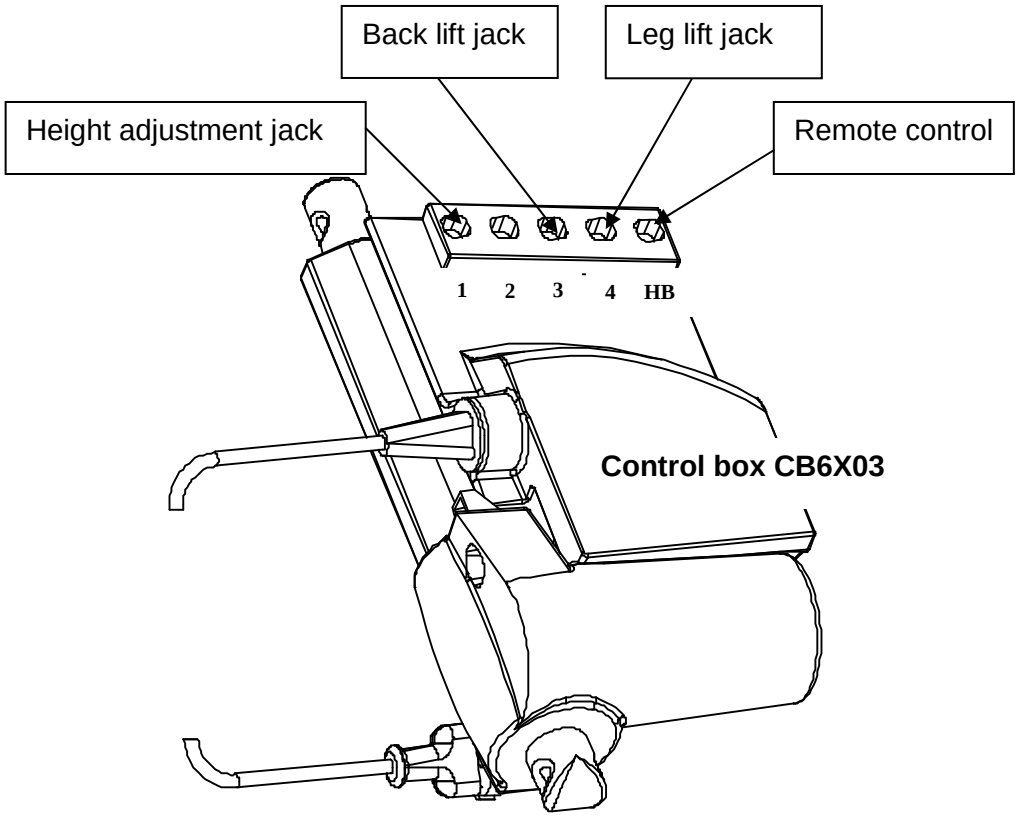
8.2. General description



8.3. Specific precautions for use

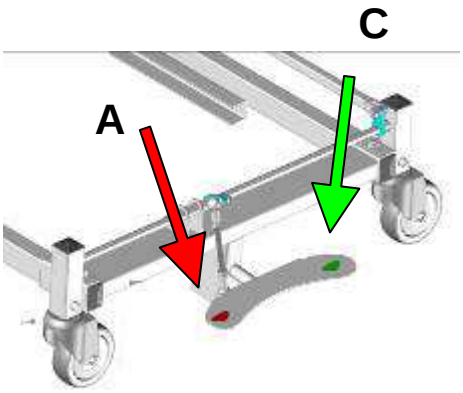
The bed should only be used for stretcher work if it is fitted with centralised brakes.

8.4. Electrical connection diagram



8.5. Use of specific elements

8.5.1. Centralised brake



***A.* Brakes applied:** *press the pedal (red side) with your foot.*

***B.* Brakes released**: *press the pedal (A or C) with your foot to obtain the middle position.*

***C.* Swivelling wheel:** *press the pedal (green side) with your foot.*

Before transporting or dismantling the bed, fix the back lift and the leg lift to the mattress base frame

8.5.2. Wooden side rails

Wooden gates are made to be used on beds MEDICATLANTIC with a length of 1600 mm and panels fitted reservations for their assembly.
These must be associated with mattresses whose specifications are given in the instructions of the bed.

Be sure to check the tightness of rondos guarantee the position of panels and smooth sliding of the barrier.

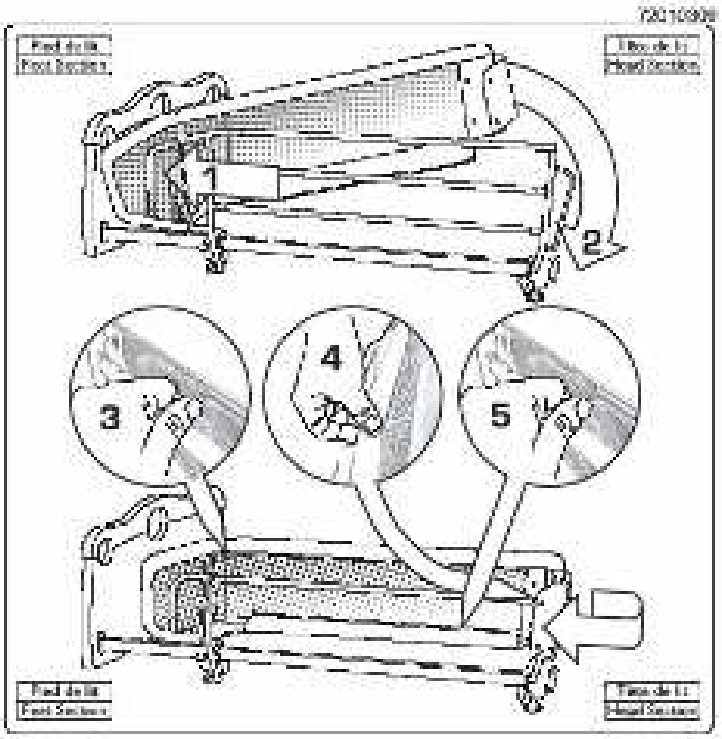
The part consisting of a wood and metal bar is always fitted at the bottom of the side rails.

The side rails have been tested in conformity with the test method NF EN 716-1 and 2 standard

8.5.3. Protective covers

Fit the protective covers by following the instructions below:

Wrong positioning of the side rails and/or absence of the protective cover is detrimental to patient safety and can cause malfunctioning.



8.6. Specific technical data

8.6.1. Noise

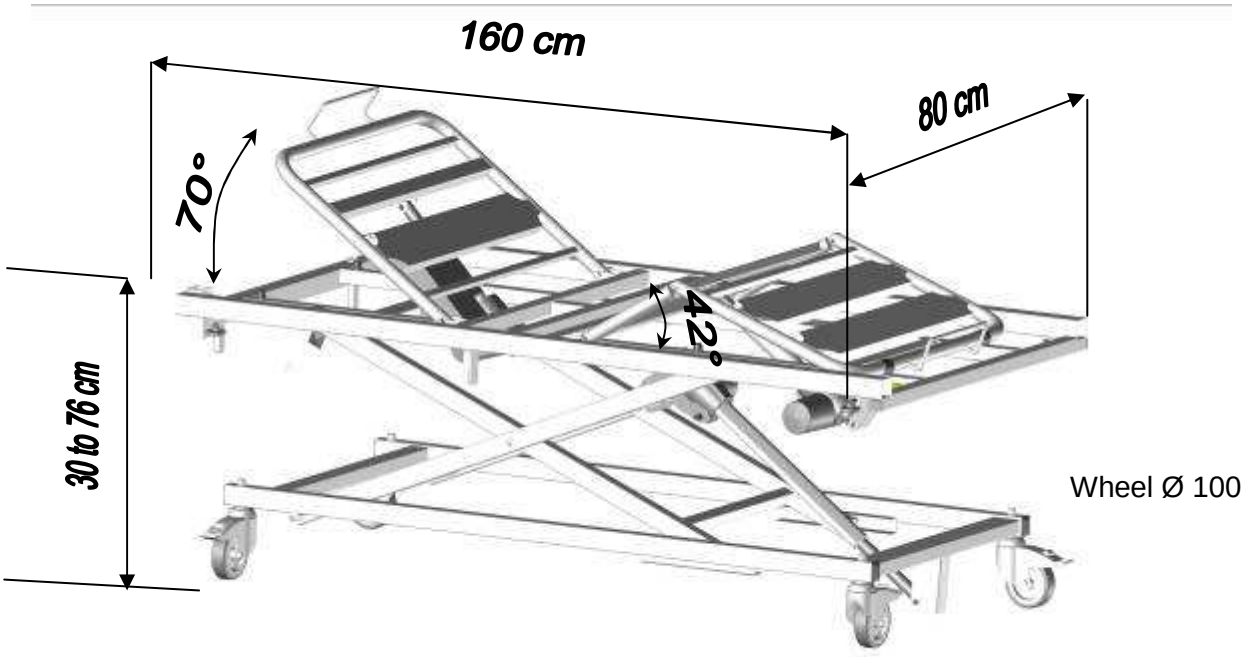
The maximum noise level measured on the bed is 48 dBa.

8.6.2. Weight

Bed safe working load: **170 kg** (Patient 135 kg, Mattress 20kg. Accessories 15kg)

Gallows safe working load *A1600 - A9300:*	75 kg
Intravenous post safe working load A1700 - A8400:	8 kg
Bed with electric knee break leg lift (without boards)	62 kg

8.6.3. Dimensional



Wheel Ø 100

MEDICATLANTIC recommend the use of the XS 150 patient lift.