

Operating instructions and
Technical manual
Olympia Hospital XLow



Version : A 28/11/2013

ACTIVATION: SUMMARY

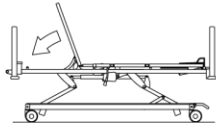


Olympia Hospital XLow

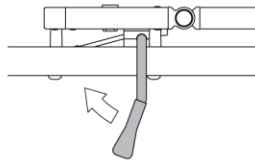
Manipulation		Hand switch HD	Satellite Control FPP
BACKREST			
KNEEREST			
RELAXPOSITION			
HIGH/LOW			
SLEEPING POSITION			
ANTI-TREND			
Emergency operations			
TREND			
CPR			
Lock/Unlock			
Nightlight under the bed on/off			

Olympia Hospital XLow

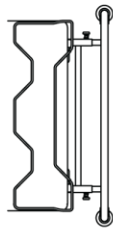
Quick release



Lever



Bed extension



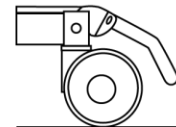
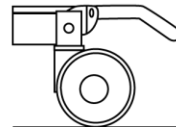
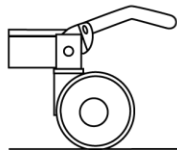
1. lift the footrest
2. pull out both pull knobs
3. pull out the bed extension
4. lock the buttons
5. pull out the foot extension

Central brake mechanism

1 directional castor, fixed

4 castors unbraked

4 castors braked



The available bed functionality is in line with the chosen and ordered configuration.

PREFACE

Dear user,

Haelvoet would like to thank you for the confidence you have put in our company by opting for a Haelvoet product. You have chosen a high-end product resulting from our inexhaustible experience in the development and production of hospital beds. Our continuous pursuit of improvement and optimisation aims at increasing our customer satisfaction even more. All our products are fully checked before they leave our company. If you face a problem, however, please do not hesitate to contact us.

This manual has been written to make you familiar with the installation, the electric and mechanical aspects, and the maintenance of this Haelvoet product. Therefore, we strongly advise you to go through this document before using or servicing the product. Please do not hesitate to ask for extra manuals at Haelvoet NV in case this may seem necessary. We kindly request you to make sure that all users and maintenance technicians have the necessary information at their disposal and have access to it at all times.

The purpose of this manual is to offer you a clear and transparent overview of the functional and technological aspects of the bed. Consequently, Haelvoet NV cannot be held liable for any damage or injuries that result from incorrect product usage, incorrect bed interventions or any possible unclear descriptions in this document. Since Haelvoet NV continually aims at making technological progress, Haelvoet reserves the right to modify the product as well as this manual, and all this without prior notice.

Nothing from this edition may be multiplied and/or made public in any form or manner, either mechanically or electronically, without prior written consent of Haelvoet NV.

TABLE OF CONTENTS

ACTIVATION: SUMMARY	2
PREFACE.....	4
TABLE OF CONTENTS.....	5
LIST OF FIGURES	8
I. SAFETY INSTRUCTIONS	10
1.1 General instructions.....	10
1.2 Moving sections	13
1.3 Sideguards	14
1.4 Bed / foot extension.....	14
1.5 Preventive maintenance	15
1.6 Mains cable	15
1.7 Battery	15
1.8 Spare parts and options	15
1.9 Alarm signals	15
1.10 Applied parts.....	16
II. OPERATING INSTRUCTIONS	17
2.1 Electric functions	17
2.1.1 Electric function possibilities	18
2.1.2 Extra nursing functionalities on the hand switch HD with magnet key	21
2.1.3 Battery.....	22
2.1.4 Nightlight under the bed (option)	22
2.1.5 Reset Procedure	22
2.2 Mechanical functions	24
2.2.1 CPR: manual + electric.....	24
2.2.2 Leg- and footrest adjustment: manual	24
2.2.3 Head and foot panel	25
2.2.4 Mattress platform	26
2.2.5 Central brake	26
2.2.6 Moving the bed	27
2.2.7 Telescopic bed extension	28
2.2.8 Drawer/blanket rack (option).....	30
III. POSSIBLE OPTIONS	32

3.1 Sideguards	32
3.1.1 Type Trix	32
3.1.2 Type Trix heightened (option)	33
3.2. Lifting pole	35
3.3 IV rod	35
3.4 IV holder for a lifting pole	36
3.5 Flexible hand switch holder	37
3.6 Traction frame	37
3.7 Patient restraint straps	37
3.8 Accessory hooks	37
3.9 Equipotential connection	38
IV. CLEANING AND DISINFECTION OF THE BED	39
4.1 General information	39
4.2 Standard IPX4 bed	39
4.2.1 Cleaning	39
4.2.2 Disinfection	40
TECHNICAL MANUAL	41
V. GENERAL TECHNICAL DESCRIPTION	42
VI. ELEKTRISCHE TECHNISCHE GEGEVENS	45
6.1 Control box	45
6.2 Hand switch	45
6.3 Satellite control	45
6.4 Battery	45
6.5 Backrest actuator with quick release	46
6.6 Knee rest actuator	46
6.7 High-low actuators	46
6.8 CPR	47
6.9 High/low footpedal	47
6.10 Specifications of the CB 06 control box	47
6.11 Ambient conditions for the actuators	48
6.12 Precautions for cable connections	48
VII. MECHANICAL TECHNICAL DATA	49
VIII. TECHNICAL DATA CASTORS	49

IX. STORAGE OF THE BED.....	50
X. PREVENTIVE AND CURATIVE MAINTENANCE	51
10.1 Safety responsibility.....	51
10.2 Preventive maintenance Trix.....	52
10.3 Spare parts	53
10.4 Used fastening methods.....	54
10.5 Assembly of the Jaro panel and Trix sideguards	54
10.6 Replacement of a high/low actuator	56
10.7 Replacement of a mattress platform actuator	56
10.8 Readjustment of the CPR lever	57
10.9 Battery	57
10.9.1 Technical specifications.....	57
10.9.2 Description	57
10.9.3 Annual preventive battery check	58
10.10 Replacement of the mains cable	58
10.11 Replacement of a control box.....	60
XI. POSSIBLE PROBLEMS.....	61
XII. ACCESSORIES	62
XIII. GARANTIE	62
XIV. RESIDUAL WASTE AND THE ENVIRONMENT	63
XV. SYMBOLEN	65
XVI. CONFORMITY.....	66
16.1 Explanation CE-label and Identification-label.....	66
16.2 Used Symbols	67
APPENDIX 1: EC-DECLARATION	69
APPENDIX 2: CHECKLIST MAINTENANCE.....	70
APPENDIX 3: EMC-TABLES	72
APPENDIX 4: TRAINING CERTIFICATE.....	76

LIST OF FIGURES

Figure 1.1: Bariatric graph	11
Figure 1.2: Clamping zones moving parts	13
Figure 1.3: Applied parts	16
Figure 2.1: Hand switch HD with magnet key	17
Figure 2.2: Satellite control FPP (optional)	17
Figure 2.3: High/Low foot pedal (optional)	17
Figure 2.4: Depiction of an electric High-low adjustment	19
Figure 2.5: Extra functionalities on hand switch HD with magnet key	21
Figure 2.6: Indication LED on the battery	22
Figure 2.7: Nightlight under the bed	22
Figure 2.8: Reset procedure Olympia Hospital XLow	23
Figure 2.9: CPR lever	24
Figure 2.10: Legrest	24
Figure 2.11: Footrest	25
Figure 2.12: Removable head and foot panel Jaro	25
Figure 2.13: How to lock the Jaro head and foot panel	25
Figure 2.14: Removable synthetic or solid laminate mattress platform sections	26
Figure 2.15: The 4 castors braked	26
Figure 2.16: The 4 castors unbraked	27
Figure 2.17: One directional castor	27
Figure 2.18: Suspension hooks for the mains cable	28
Figure 2.19: Access to the bed extension	29
Figure 2.20: How to extend the bed	29
Figure 2.21: Extension of the foot end (option)	30
Figure 2.22: Opening of the drawer	30
Figure 2.23: Linen holder	31
Figure 3.1: Sideguards Trix: dimensions	32
Figure 3.2: Manipulation of the sideguards type Trix	33
Figure 3.3: Sideguards Trix heightened: dimensions	33
Figure 3.4: How to lower the upper part of the heightened sideguards type Trix	34
Figure 3.5: Exterior limits of the lifting pole	35
Figure 3.6: Adjustment of an IV rod	36
Figure 3.7: IV holder on the lifting pole	36
Figure 3.8: Installation of the flexible hand switch holder	37
Figure 3.9: Accessory hooks	37
Figure 3.10: Equipotential connection at a standard head panel	38
Figure 5.1: Mattress platform dimensions Olympia Hospital XLow bed	43
Figure 5.2: Dimensions of the Olympia Hospital XLow bed	43
Figure 5.3: Most important manipulation data of the Olympia Hospital XLow bed	44
Figure 6.1: Circuit diagram of the control box Olympia Hospital XLow	48

Figure 10.1: Greasing of the sideguards Trix	52
Figure 10.2: Maintenance sideguards Trix (1)	52
Figure 10.3: Maintenance sideguards Trix (2)	52
Figure 10.4: Maintenance sideguards Trix (3)	53
Figure 10.5: Axle and axle retaining ring	54
Figure 10.6: Cable clamp	54
Figure 10.7: Assembly of Jaro panel and Sideguards Trix (1)	54
Figure 10.8: Assembly of Jaro panel and Sideguards Trix (2)	55
Figure 10.9: Assembly of Jaro panel and Sideguards Trix (3)	55
Figure 10.10: Assembly of Jaro panel and Sideguards Trix (4)	55
Figure 10.11: Quick release.....	57
Figure 10.12: Release of the strain relief type 1	59
Figure 10.13: Release of the strain relief type 2	59
Figure 10.14: Replacement of a mains cable in the control box	59
Figure 10.15: Fixing of the strain relief, both types	60
Figure 10.16: How to replace the control box CB06	60

I. SAFETY INSTRUCTIONS

1.1 General instructions



We strongly advise you again to read the entire manual, so that the instructions for an optimal use as well as those for a preventive and curative bed maintenance are carefully followed. The bed should be installed, maintained and used in accordance with this manual. Please inform all readers about the possible risks that can be run when not reading or following this manual.

The manufacturer, installer, importer or distributor of this product can only be held liable and stand surety for the basic safety, reliability and required qualities of the product if:

- decently trained technicians perform assembly tasks (e.g. assembly of accessories), adjustments, modifications, repairs and/or maintenance work.
- the bed is connected to electric installations that meet the requirements of the bed.
- the bed is used and maintained in accordance with the instructions in this manual and in a way that is considered a normal use of a hospital bed.
- the user, patient and technician have become acquainted with this manual and/or have received a good training of a qualified person.

By doing so, the risks for both the nursing staff and the patient are reduced considerably, whereas the product life of the bed is increased. At all times, the reader of this manual should be aware of the fact that this is an electric bed, and that the nursing staff and patient should be informed of the risks involved. Furthermore, all bed functions should be checked annually. Haelvoet NV even recommends that the bed is checked every six months, so that the safety of the patient is guaranteed even more.

The hospital bed is intended and made to treat, guard, alleviate or compensate diseases, injuries or handicaps of an **adult**.

The bed is not developed for people smaller than 146 cm.

Appropriate precautions have to be taken to treat small or very fragile patients. Small children have to be put in a cot or child's bed. Furthermore, it is very dangerous for children to operate the bed or to use it as a toy.

The Olympia Hospital XLow bed can be used in the application environments 2, 3 and 5, as defined in IEC 60601-2-52:2009.

The maximum safe working load of the bed is 230 kg. If used in environments 1 and 2, the maximum safe patient weight is 165 kg. If used in environments 3 and 5, the maximum safe patient weight is 195 kg.

The maximum safe working load of the Olympia Hospital XLow bed was stipulated to 230 kg. After deduction of the weight of accessories (45 kg) and mattress (20 kg), you become a maximum safe patient weight of 165 kg.

Based on the graph here below, we consider the Olympia Hospital XLow bed with a safe patient weight of 165 kg, a bed that is suitable for bariatric patients.

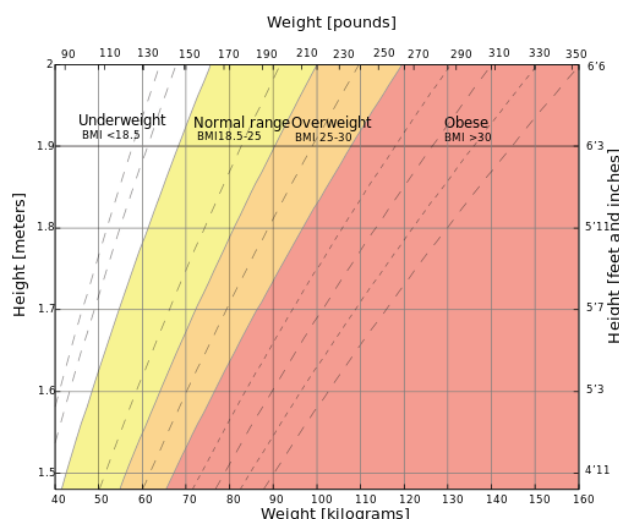


Figure 1.1: Bariatric graph

Please inform every user about the possible risks when the bed is used incorrectly, especially when the actuators and the sideguards have to be used.

Before you start using the bed, please make sure that the bed functions properly. That is why you have to check the following elements *before* you use it:

- Remove all packing material and recycle it environment-friendly.
- Please check if the bed and all its parts have been delivered in accordance with the delivery note.
- Please check if the bed has not been damaged during transport and delivery.
- In case huge temperature differences have to be overcome: let the bed adapt itself to the room temperature for 24 hours before using it and connecting it to the net.
- Make sure that the brakes of the bed have been activated.
- Read the entire manual.
- Please check if the power cable and the bed are compatible with the mains current of the room.
- Please check if the power cable, actuator cables and hand switch cable have not been damaged. Make sure that they have been installed in such a way that they cannot be damaged.
- Make sure that no obstacles hinder the free movement of the bed.
- Equip the bed with its mattress, sheets and/or blankets, and make sure that they cannot obstruct the handles, the CPR lever and sideguards.
- Check the bed functionality by means of the check list. (see appendix)
- Connect the bed only to a correctly installed socket in the vicinity of the bed.



Only use electric appliances that function perfectly in the vicinity of the bed. Make sure that these appliances are never connected by means of a multi-socket under the bed (risk of electrocution and fire because of the fluids). You should avoid using extension cords and multi-sockets.

This bed complies with the 93/42/EEC directive about medical devices and is categorized as a class I product. Keep in mind that every technical product, whether it is mechanical or electric, can be dangerous when it is used incorrectly. You should give priority to the interest and safety of the patient, visitor and manipulator at all times. Make sure that all users have access to this manual.

It is the responsibility of the distributor to inform the customer about the bed's functionality, maintenance and disinfection. The customer has to contact the distributor in case of uncertainties or insufficient user information. He also has to address himself to the distributor if he wants additional training.

Persons (playing children in particular) or obstacles may never be under the bed. Please make sure that all other equipment is put in safe conditions, before the bed is lowered, raised or removed. Take also care of the patient's safety during any bed manipulation. No bed function may be activated if there are obstacles of any kind in the vicinity of the bed.

Please make sure that the patient is put in the bed in the correct position. His head should be placed at the head end, whereas his feet should be at the bed's foot end.

Load the bed and its actuators only to the extent as described in the technical file. Always contact the technical service when the bed makes strange noises or movements.

Activate the brakes when the bed does not have to be moved. Please ascertain yourself of this by trying to move the hospital bed afterwards. By doing so, you minimize the risk of having unwanted accidents when the patient tries to leave the bed. In order to increase the patient's safety, it is advisable to put the bed in its lowest position, especially when the patient is sleeping. Make also sure that the bed has been put in its lowest position before you leave the patient alone. Furthermore, the bed has to be put on a flat, horizontal surface.

Never remove the bed when the castors are braked. You should also make sure that certain bed accessories (lifting pole, IV rod...) do not hinder a safe and fluent passage through doors and the like. Please be careful when moving the bed and avoid collisions, especially with other persons.



Never take place on a mattress platform without a mattress. To guarantee the safety, the bed has to be equipped with a mattress that complies with the following specifications:

Mattress dimensions: 85 x 195 cm

Minimum mattress thickness: 12 cm

Maximum mattress thickness, depending on the type of sideguards:

Trix: 16 cm

Trix heightened: 31 cm

Atmosphere: 14 cm

Atmosphere increased: 22 cm

Minimum stiffness of the foam: 2,8 kPa in accordance with ISO 3386 (CLD/40%)

Fire retardant material

In case visco-elastic foam is used, a supportive layer of minimum 7 cm with a minimum stiffness of 3,6 kPa in accordance with ISO 3386 (CLD/40%) has to be used.

In case the customer has ordered a special mattress platform, the mattress dimensions have to be adjusted accordingly.

The Trendelenburg-position may only be activated by persons that have received a medical training. Please switch off all electric functions that may not be used by the patient (optional) or place the hand control out of reach of the patient..

When you use additional or peripheral equipment, you have to make sure that everything has been installed correctly and that everything functions properly. Please avoid using loose cables or wires and do not use multi-sockets. Contact your supplier or Haelvoet NV if you have any questions about peripheral equipment.

Devices that create strong electromagnetic fields and that may possibly influence the control of the bed are not permitted in the direct vicinity of the bed. Take also into account that the bed creates electromagnetic fields and may possibly influence the (measure) equipment used near the bed. However the bed is approved according to EN 60601-1-2, residual risks are possible.

The bed may not be used when there is a risk of explosion, or in the vicinity of inflammable, volatile anaesthetic gases.

When you think that there is some damage or that the bed does not function properly, you have to disconnect the bed immediately. You also have to indicate clearly on the bed that it is OUT OF USE. Contact the person who is in charge of the beds as soon as possible.

The bed may only be used when the following ambient conditions are present:

- Temperature: between 5°C and 40°C.
- Humidity of 20% to 90% at 30°C without condensation.
- Atmospheric pressure between 700 and 1060 hPa.

1.2 Moving sections



Make sure that you can't get stuck between or in the moving sections, even if these sections are not activated.

All sections should be able to move freely (do not install the bed near a windowsill or other obstacles). Make sure that the mains cables of peripheral equipment (patient lift, compressors, reading lamp,...) can never get stuck or damaged during a bed manipulation.

Since the bed can be lowered close to the ground, additional risks are involved for the nursing staff. Pay especially attention for clamping of the feet of the operator and for the hands of the operator and/or patient, when the bed is placed in its lowest position. The clamping zones for feet and hands are marked with the following icons:

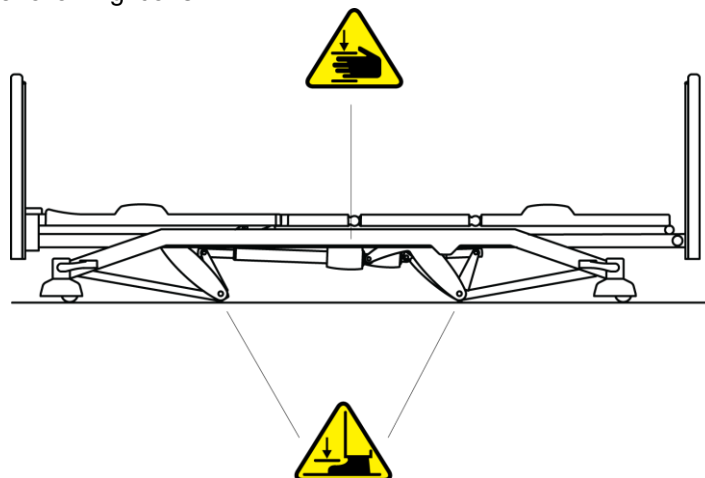


Figure 1.2: Clamping zones moving parts

1.3 Sideguards



If the bed is moved with the patient still in it, the sideguards must always be put in their highest position. The same instruction applies when the patient is sleeping, or for all other circumstances, during which the nursing staff deems this necessary. Always check if the sideguards are locked properly.

Always put the different mattress platform sections and mattress platform inclination in the lowest horizontal position. Of course, this can only be done when the medical condition of the patient is not jeopardized. The aim of this action is to prevent that the patient gets stuck or can fall out of the bed. After all, this bed position guarantees the best patient protection.

It should, however, be stressed that the sideguards do not constitute an obstacle to stop people that wish to leave the bed wilfully. If the medical staff thinks this will happen, they should take the necessary precautions.

Never remove the bed by pulling at the sideguards. Only use undamaged, and technically perfect sideguards, of which the distances between the siderails comply with the statutory standards.

Only use original Haelvoet sideguards, since these have been tested in accordance with the official standards. Regularly check if the sideguards still function properly.

Only use fitting, fire-retardant mattresses that have the correct dimensions and a sufficient hardness. Never use mattresses that are too thick. In order to protect the patient sufficiently, there always has to be a distance of 22 cm between the non-compressed mattress and the upper side of the sideguards. Mattresses that are too thick cause an efficiency loss of the sideguards. If the required distance is not obtained, you have to opt for another mattress or extra aids, so that this safe height is always guaranteed.

Always check if the sideguards and the distances between the siderails guarantee enough protection for the patient. Do not forget to keep the patient's figure in mind. It may be necessary to use additional protection equipment – such as a protective cover – for thinner and more fragile patients. Such accessories can be the only alternative to reduce the patient's risk from falling through the sideguards or getting stuck. Always pay attention to the physical and mental state of the patient and always take the necessary precautions.



If you don't keep the above-mentioned guidelines in mind, a patient can run the risk of getting stuck between the siderails. If the distances between the siderails are too big, the patient can also fall out of the bed. These distances can be caused by damage, incorrect usage or faulty sideguards. It is also possible that this has happened because the sideguards have been locked incorrectly.

1.4 Bed / foot extension

The bed is standard equipped with a bed extension and can be optionally equipped with a foot extension. If the bed extension is used, the gap created between the footrest and the foot panel has to be filled. This can be done by means of the optional telescopic foot extension or removable foot extension, so that there is no gap larger than Ø 11 cm between the mattress platform, panel and the sideguards.

1.5 Preventive maintenance



All bed functions should be checked at least annually. For this purpose we refer to chapter X of this manual.

The bed may only be repaired by a qualified technician in case of a malfunction or defect. Disconnect the bed immediately and clearly indicate on the bed that it is “OUT OF USE”. Contact the person who is in charge of the bed as soon as possible. Repairs by unqualified persons may cause severe damage or injuries.

1.6 Mains cable



When installing or removing the bed, please ascertain yourself of the fact that the bed does not stand on the connecting cable or that the cable is not jammed between the moving sections. Never ride with the bed over the connecting cable or pull at it.

Please check the mains cable at regular times. Pay attention to any damage (e.g. compressed, a kink, open wires, etc.). Make sure that the cable is not jammed, and never ride with the bed over the mains cable. Never remove the bed without first disconnecting the mains cable. Also ascertain yourself of the fact that the strain relief sufficiently clamps the mains cable.

Pull the plug out of the socket when you want to clean the bed or perform an intervention on it.

1.7 Battery



Never try to bore the battery. Never throw it in a fire. Please return the replaced batteries to the manufacturer or dealer for recycling.

If a bed or control box with internal batteries has not been used and/or connected to the net for a long period, it is recommended to remove the batteries. By doing so, you avoid problems with leaking batteries.

1.8 Spare parts and options



Only use spare parts or options that have been approved by Haelvoet NV.

Haelvoet NV cannot be held liable for any damage or injuries resulting from modifications to the bed, and/or the use of non-original spare parts or options without the knowledge and written consent of the manufacturer.

1.9 Alarm signals



The Olympia hospital XLow bed is equipped with an alarm signal that warns the user for a potential risk situation.

If the capacity of the battery is going below a safe level to guarantee the electric functions of the bed, a warning signal will sound at the moment when one of these functions is activated. Connect the bed to the net as soon as this warning signal sounds.

1.10 Applied parts

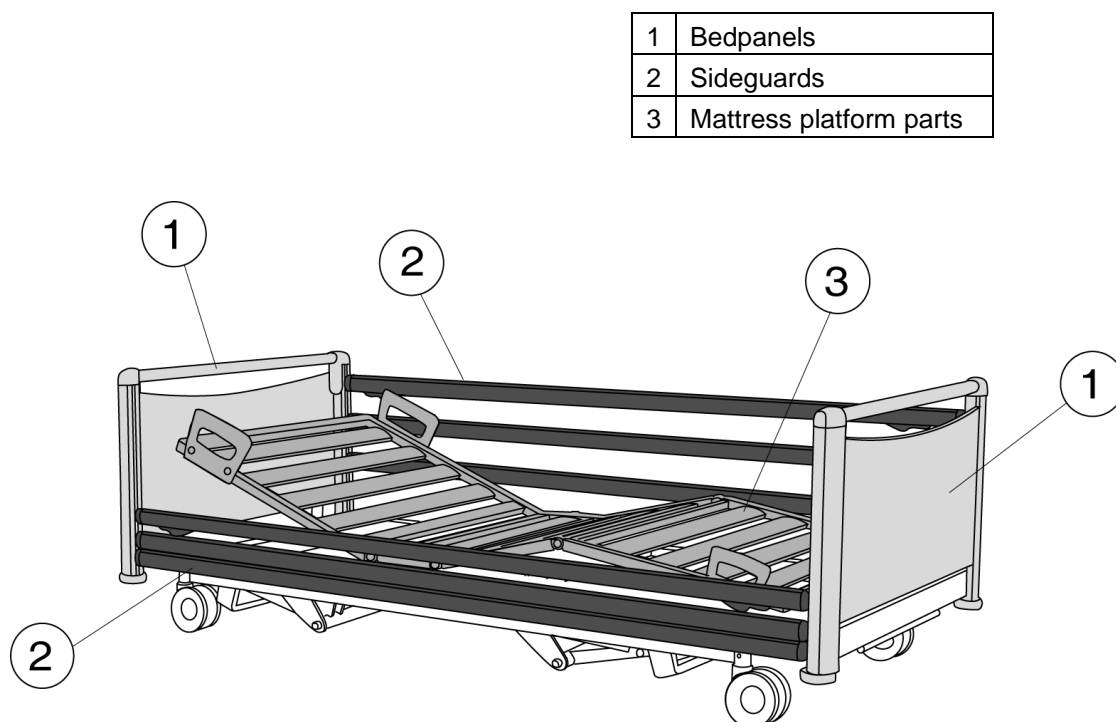


Figure 1.3: Applied parts

II. OPERATING INSTRUCTIONS

2.1 Electric functions



Please always explain the electric functions to the patient, and inform him about the possible risks while using the bed. Users may only operate the bed when they have sufficient knowledge or experience with the bed. Patients with impaired physical or mental capabilities may only manipulate the bed when there is sufficient supervision.

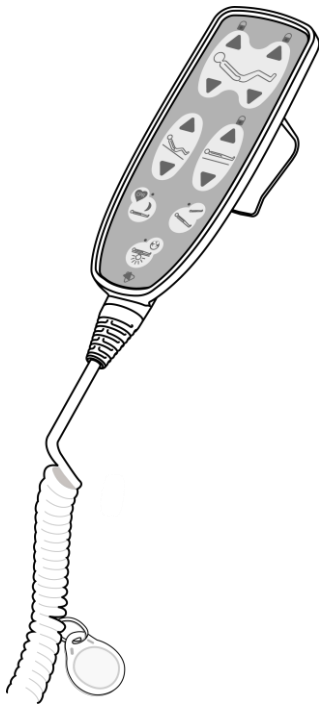


Figure 2.1: Hand switch HD with magnet key

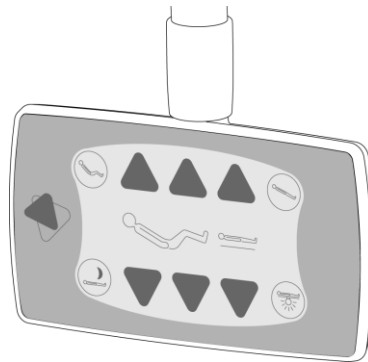


Figure 2.2: Satellite control FPP (optional)

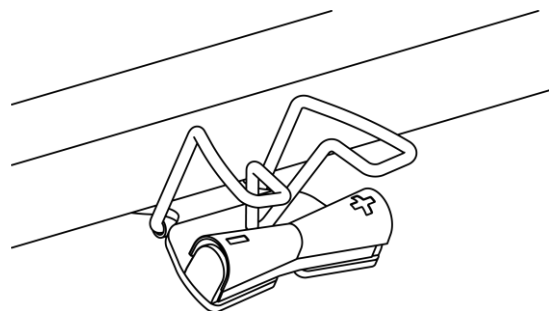


Figure 2.3: High/Low foot pedal (optional)

All electric control buttons are *Momentary Touch buttons*. The number of bed functions depends on the ordered bed configuration.

When 2 function buttons are touched simultaneously, the control will consider this an error. All electric bed manipulations will be stopped immediately.

The hand switch HD can optionally be put in a flexible holder, which results in an optimal accessibility of the hand switch for the patient (see 3.5)



Make sure that the patient and especially children cannot reach the hand switch, or block the electric bed functions in order to guarantee the patient's safety. This applies for the following cases:

- **When children are near the bed without supervision**
- **If a bed manipulation can be dangerous for the patient**
- **If the sideguards are put in their highest position. In this case, the patient can run the risk of getting stuck in the sideguards during a bed manipulation**
- **If the patient is not capable of operating the bed safely, or when he can put himself in danger by operating the bed**
- **If additional equipment or accessories can be dangerous or harm the patient.**

Only qualified and trained personnel are allowed to operate the bed in the above-mentioned cases.

Please keep the 10% rule in mind. Never operate the bed continuously longer than 2 minutes. When you have used the bed continuously for 2 minutes, you have to make sure that the bed is not activated for at least 18 minutes.

Despite the fact that the electric bed equipment complies with all regulatory obligations, there is still a chance that there is an interference on another device during a bed manipulation. If this is the case, you have to put the other equipment further away from the bed and connect it to another net. If it is possible, you have to connect the bed and its equipment with the equipotential connection.

2.1.1 Electric function possibilities



Make sure that no part of the body is situated between the moving parts.

a. Backrest adjustment: electric



This function can be activated by means of the hand switch HD or satellite control (option).

Maximum angle of inclination = 70°. The angle between the backrest and knee rest is always at least 90°.

b. Knee rest adjustment: electric (option)



This function can be activated by means of the hand switch HD or satellite control (option).

Maximum angle of inclination = 34°. The angle between the backrest and knee rest is always at least 90°.

c. High-low adjustment: electric



This function can be activated by means of the hand switch HD, satellite control (option) or the foot pedal (option).

To maximize the life span of the bed, the high-low adjustment is limited to a safe weight of 230 kg. An electronic protection will switch off this function automatically in case of overload.

The mattress platform can be adjusted in height, even when it is put in a Trendelenburg or Reverse-Trendelenburg position. When the mattress platform is activated upwards or downwards, it will take a horizontal position as soon as the front or back of the mattress platform reaches its highest or lowest position.

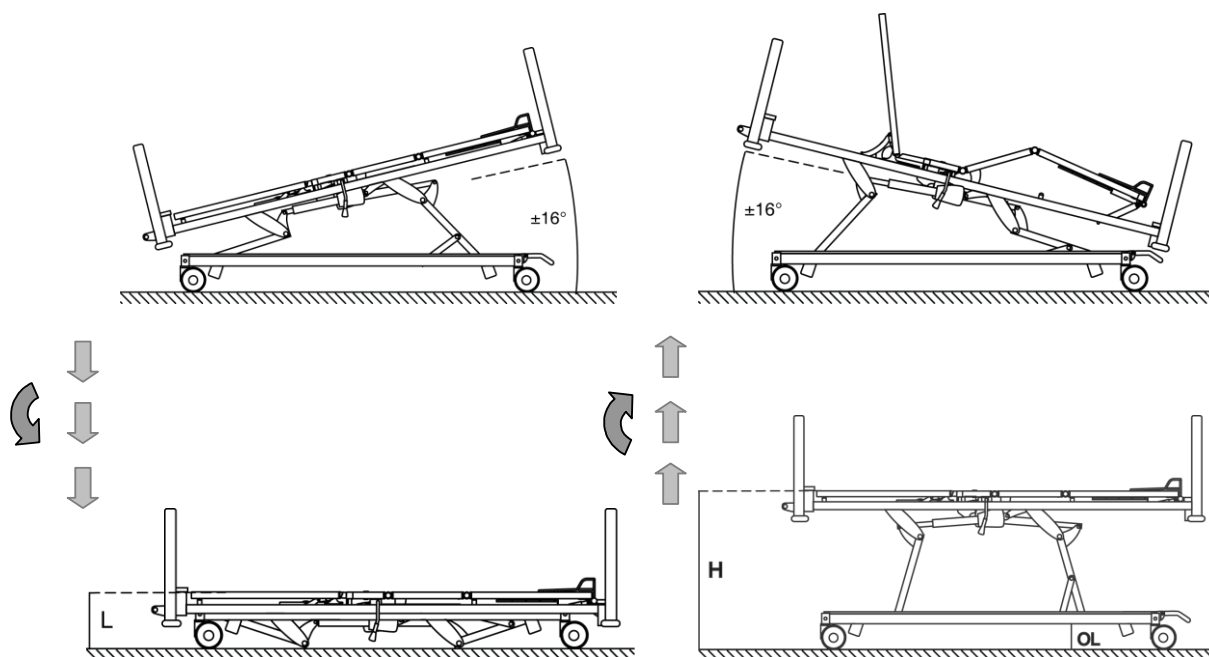


Figure 2.4: Depiction of an electric High-low adjustment

Castor version:	L in mm	H in mm	OL in mm*
Hidden twin castors Linea Ø125mm	250 mm	800 mm	137 mm

* OL : clearance height for a mattress platform height of 42 cm



Please make sure that nobody is under the mattress platform before you activate this manipulation! Make sure that there are no objects on or around the carriage that can block a height variation.

Put the bed in its highest/lowest position on a regular basis, so that it can reset itself.

d. Trendelenburg/Reverse-Trendelenburg: electric

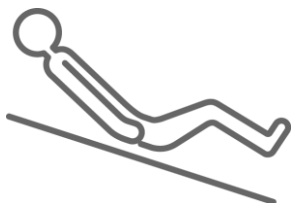


The Reverse-Trendelenburg position can be activated by means of the hand switch HD or the satellite control (option), whereas the Trendelenburg position can only be activated by means of the hand switch HD. The Trendelenburg position may only be activated by persons who have had a medical training. These persons should take the medical condition of the patient into.



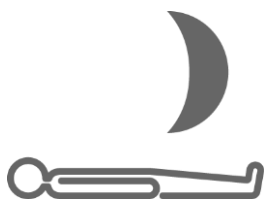
Make sure that nobody is under the bed before activating this function!

e. Relax/seat position: electric



This function is only available on the hand switch HD or satellite control (option). When activating this function, the backrest and knee rest are inclined simultaneously, whereas the head end is put in its highest position. To maximize the life span of the transformer, the seat function is limited to ± 140 kg. An electric overload protection will automatically switch off this function in case of overload.

f. Sleeping position: electric




This function can also be activated by means of the hand switch HD or satellite control (option). All mattress platform sections are put horizontally, whereas the bed is placed in its lowest position, by pressing one single button.



Never overload the bed, not even for a short period. In case you have no other option owing to circumstances, please put all mattress platform sections in a horizontal position. Also put the bed in its lowest position.

2.1.2 Extra nursing functionalities on the hand switch HD with magnet key

With a magnet key  the extra nursing functionalities of the hand switch are activated during 5 seconds.

If during these 5 seconds, no action has been taken, the hand switch turns back to the standard functionalities.

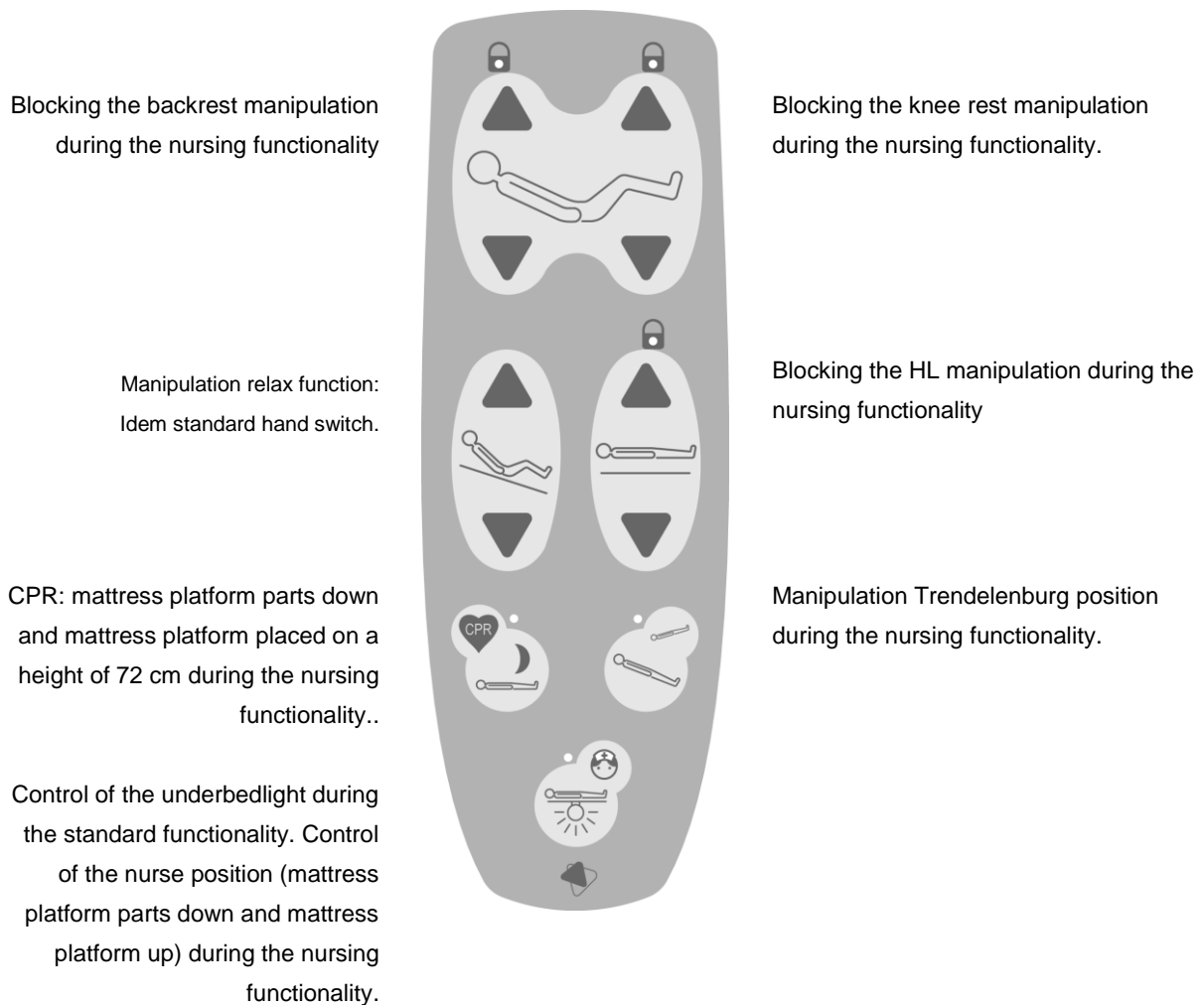


Figure 2.5: Extra functionalities on hand switch HD with magnet key

Always put the hand switch outside the reach of the patient, or block the electric functions, if these functions constitute a danger for the patient. This rule also applies for transport, maintenance,...

2.1.3 Battery

Charge the battery completely (at least 12 hours) before you start using the bed. Always connect the bed to the net, because frequent, high and long discharges can influence the battery's life span negatively.

The battery's life span by correct use is minimum 2 years and depends on how much you use it.

Only use the battery when there is an electricity breakdown or when you transport the patient. An alarm signal warns you when the battery capacity is not sufficient enough anymore during an electric manipulation. If this is the case, you have to connect the bed to the net immediately.



Figure 2.6: Indication LED on the battery

2.1.4 Nightlight under the bed (option)

A nightlight is installed under the mattress platform. Thanks to this, the patient can find his way in a dim room, without having to contact the nursing staff or the patients.

The nightlight is activated by pressing the function button on the satellite control or mini nurse box or nurse box.



Figure 2.7: Nightlight under the bed

2.1.5 Reset Procedure

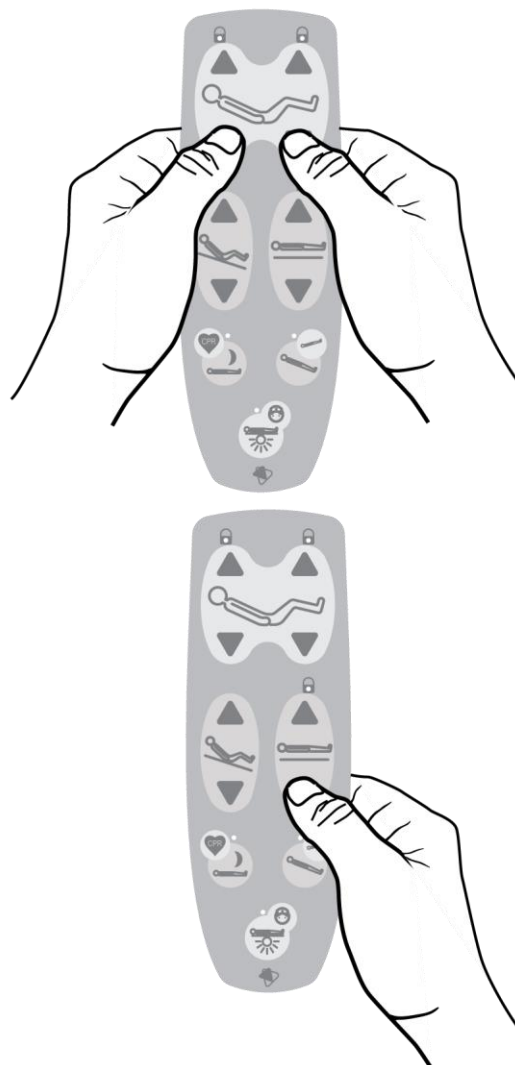
A fault of the control of the bed is visible in following cases:

- The green LEDs on the hand switch flash
- A signal sounds when pressing a function

The control of the bed needs to be reset as described in Fig 2.8

Reset Procedure Olympia Hospital XLow

Push both functions on the 2nd row at the same time. An acoustic signal confirms the start of the reset procedure. Keep the buttons pressed till the signal has stopped.



Bring the bed to its lowest position to initialize the software.

Figure 2.8: Reset procedure Olympia Hospital XLow

2.2 Mechanical functions

2.2.1 CPR: manual + electric

A red CPR lever is installed on both sides of the fixed mattress platform section.

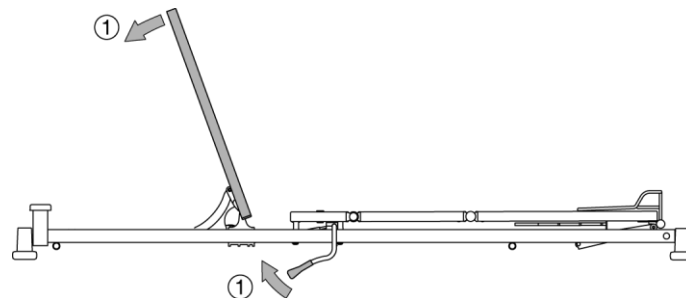


Figure 2.9: CPR lever

The backrest can be manually brought downwards by activating the CPR lever towards the headrest. Furthermore, a CPR programme (**option**) will be activated simultaneously. The mattress platform will reach its lowest position, and the knee rest is lowered electrically. This movement will stop as soon as the lever is put in its neutral position.



In order to maximize the product life of the actuators and the quick release, it is of the utmost importance that this lever is only used in EMERGENCY SITUATIONS.

Make sure that there are no objects that hinder the free movement of the backrest. Please take all necessary measures to prevent that the patient or nurse can get stuck. For this reason, you first always have to put the sideguards in their lowest position.

2.2.2 Leg- and footrest adjustment: manual

- The leg/footrest is equipped with two telescopic adjusts. Six different positions can be obtained. The leg/footrest can always be put in its lowest position by raising it a little. Hold the leg/footrest tight, so that it cannot fall suddenly.
 - Legrest: up to 14°

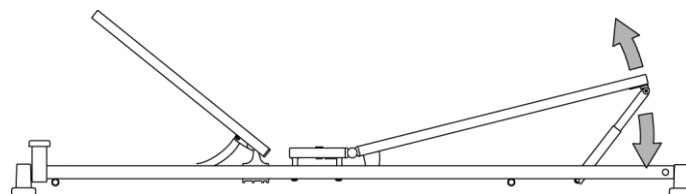


Figure 2.10: Legrest

- Footrest: at a knee rest adjustment of 34°

From 2° till circa -17°

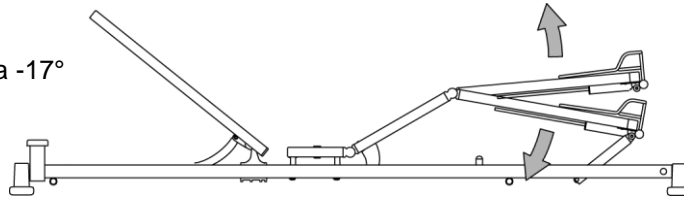


Figure 2.11: Footrest

2.2.3 Head and foot panel

The Olympia Hospital XLow provided of a Jaro panel. The Jaro panel can only be installed in combination with the Trix sideguards.

The head and foot panel can be removed and put back very easily without needing any tools.

When removing the Jaro panel, both block buttons have to be pressed before it can be removed.

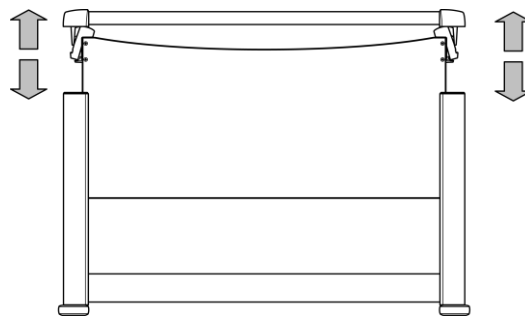


Figure 2.12: Removable head and foot panel Jaro

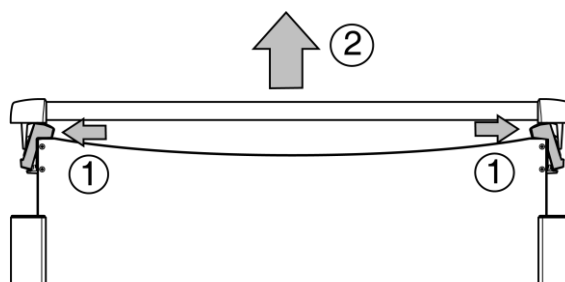


Figure 2.13: How to lock the Jaro head and foot panel

2.2.4 Mattress platform

The mattress platform of the Olympia Hospital XLow bed consists of 4 sections. These sections are made of a steel frame with rounded laths of bent steel plate. The mattress platform can be optionally equipped with synthetic vacuum or solid laminate sections. These sections can be easily cleaned, thanks to their excellent design and fluent detachability.

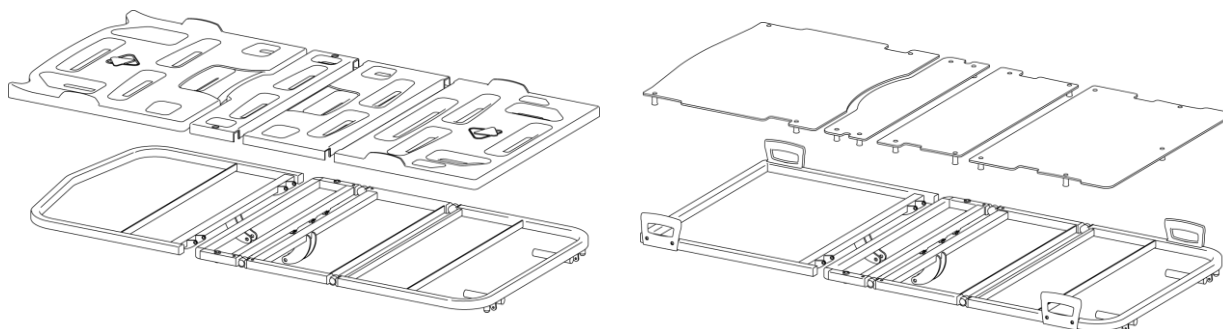


Figure 2.14: Removable synthetic or solid laminate mattress platform sections

2.2.5 Central brake

At the foot end, the carriage is equipped with a design brake pedal. This pedal activates all 4 castors simultaneously, and can be set in three positions. By putting the brake pedal horizontally, the brake is activated. The brake function is deactivated by putting the brake pedal in the highest position.

- The 4 castors braked

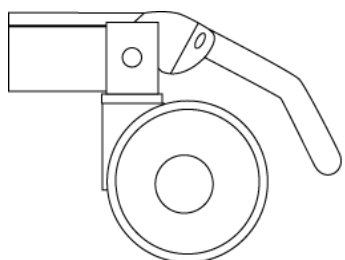


Figure 2.15: The 4 castors braked



Disconnect the bed from the net, and put the mains cable on the suspension hooks. Always put the sideguards in their highest position, and release the brake before moving the bed.

- 4 unbraked castors: This position makes it possible to move the bed in all possible directions.

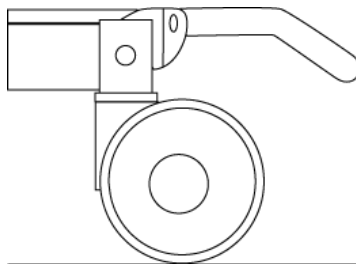


Figure 2.16: The 4 castors unbraked

- Directional castor: This position guarantees that one castor cannot swivel, which makes it easier to move the bed in a straight line.

Always make sure that the directional castor is set in the same position as the other castors. If this is not the case, a stable and straight-lined bed course cannot be guaranteed.

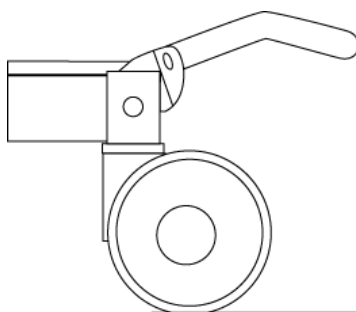


Figure 2.17: One directional castor



Never pull or push at the side of the bed when the directional castor has been activated.

The castors leave no marks on tiles, carpets, linoleum or laminate floors. Please check if the castors leave marks on parquet floor because of the use of parquet cleaning products.

The castors have been developed to be used on smooth and cleaned floors. The castors can be damaged when you use them on rough, uneven and dirty floors.

2.2.6 Moving the bed

The following steps must be followed to remove the bed in a safe and durable way:

- Put the sideguards in their highest position.
- Put the bed in a transport height that suits you.
- Disconnect the plug from the net and hang the mains cable to the suspension hooks at the head end.



Never pull the mains cable, and never remove the bed without disconnecting it from the net.



When the mains cable has not been stored properly during transport, the risk of mains cable damage or electrocution increases substantially. Please make sure that the mains cable is not torn off, squeezed or crushed. Do not ride the bed over the mains cable.

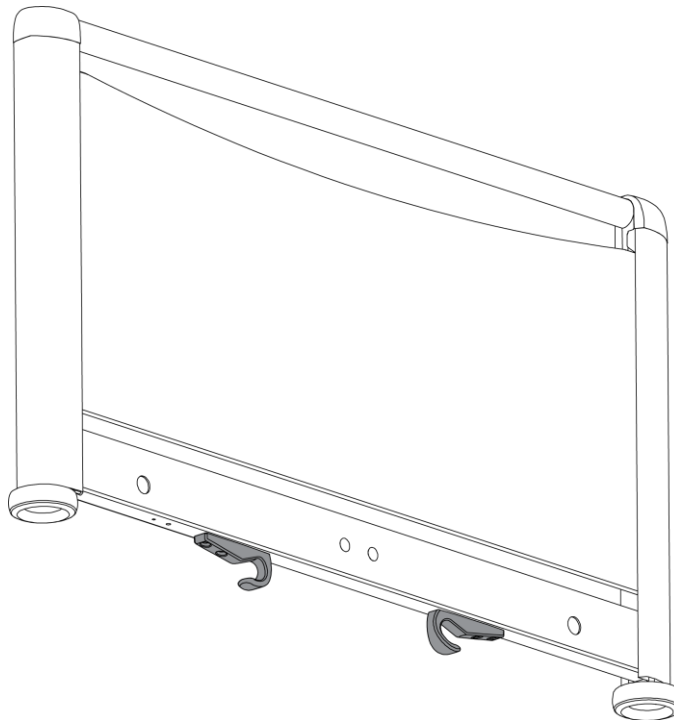


Figure 2.18: Suspension hooks for the mains cable

- Take the foot panel with both hands at the push rod.
- Release the central brake and activate, if necessary, the directional castor.
- Make sure that the bed and all its accessories (lifting pole, IV rod,...) can pass through the doors without any problems.
- Please be careful, when moving the bed, not to hit other persons.
- Activate the central brake as soon as the bed has been brought to a standstill.

2.2.7 Telescopic bed extension

The telescopic bed and foot extension (optional) is part of a possible bed configuration. This mechanism is installed at the foot end and has to be activated as follows:

- Put the sideguards in their highest position to have a better access to the block buttons and the foot extension.
- Pull the block buttons at the exterior of the right and left side beams and rotate them a little.

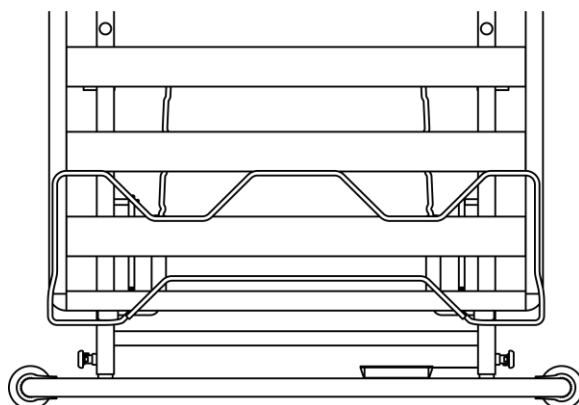


Figure 2.19: Access to the bed extension

- Pull the cross beam until the desired extension has been obtained. The bed can be extended to maximum 20 cm. The extension happens in steps of 5 cm.

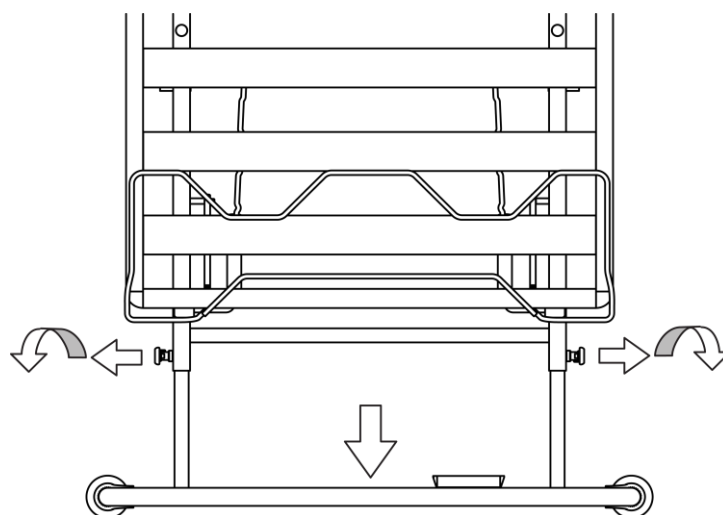


Figure 2.20: How to extend the bed

- Put the block buttons back in their original position and make sure that they lock the mechanism. Check this by trying to extend or shorten the bed.
- Extend the telescopic foot extension in the same distance (optional) or install the removable mattress platform extension.

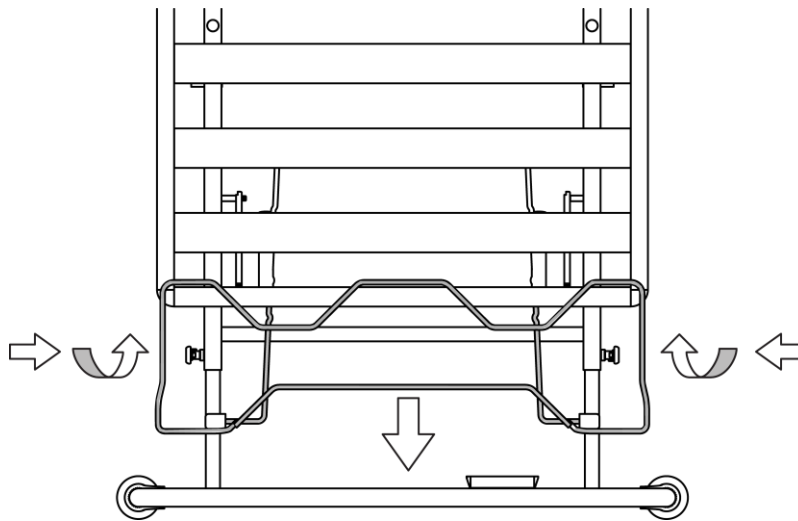


Figure 2.21: Extension of the foot end (option)

- Make sure that the mattress reaches the foot panel, and put the mattress extender at the head end.



Always fill the created gap with a suitable mattress, so that the patient cannot get stuck.

2.2.8 Drawer/blanket rack (option)

You can opt for the optional extendable drawer/blanket rack.

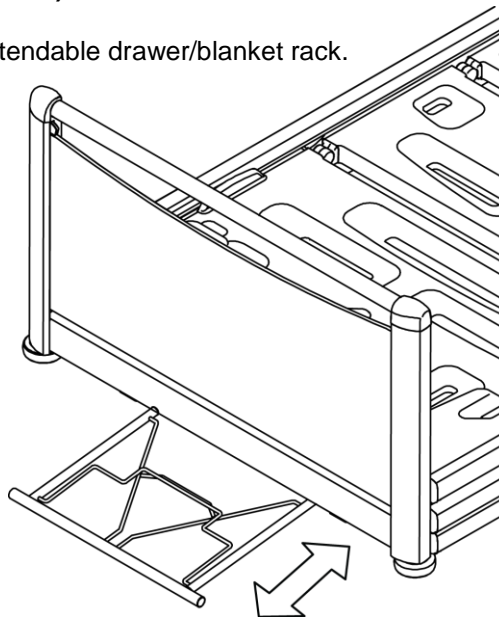


Figure 2.22: Opening of the drawer

When the drawer is opened, you can also tilt over the linen holder, so that the pillow or linen can be laid on it. The maximum load on the drawer is 5 kg.



Make sure that you lock the drawer properly (on the left and right side) after you have used it.

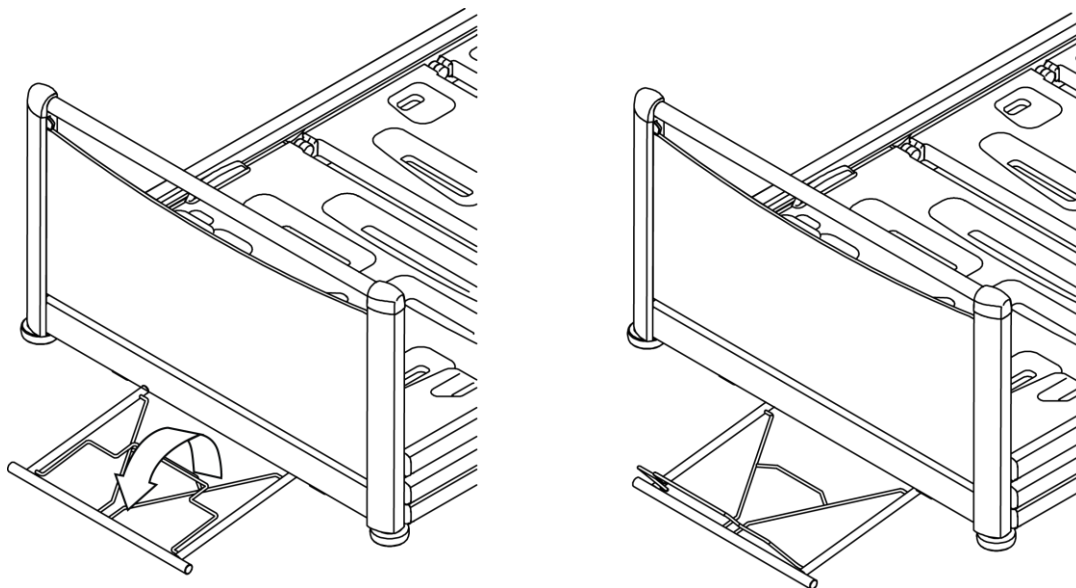


Figure 2.23: Linen holder

III. POSSIBLE OPTIONS

The Olympia hospital XLow bed can be equipped with:

- Sideguards Trix
- Telescopic foot extension
- Electromechanical quick release (CPR)
- Extendible blanket rack
- High/low foot switch
- Nightlight under the bed
- Wall spacer
- Wall spacer on the undercarriage

Accessories

<i>IDnr</i>	<i>Description</i>	<i>IDnr</i>	<i>Description</i>
00441	Flexible hand switch holder	05878	Bowl Holder
01840	Lifting Pole	05947	Monitor holder
01856	IV hook	06366	Oxygen bottle holder
01862	Name card holder	07180	Raising aid
01863	Synthetic file holder A4 (horizontal)	08004	IV hook to attach on the lifting pole
01864	Synthetic file holder A4 (vertical)	09242	Bed pan holder
03576	Synthetic file holder A3 (horizontal)	09678	Traction frame
03272	Traction brace	09723	X-ray cassette holder (only possible with solid laminate mattress platform)
03296	Urine bottle holder (vertical)	09945	Removable mattress platform
05876	Urine bottle holder (horizontal)		
03799	Writing table		

3.1 Sideguards



Please follow all safety instructions of paragraph 1.3 at all times!

3.1.1 Type Trix

Weight: set of sideguards: 12 kg

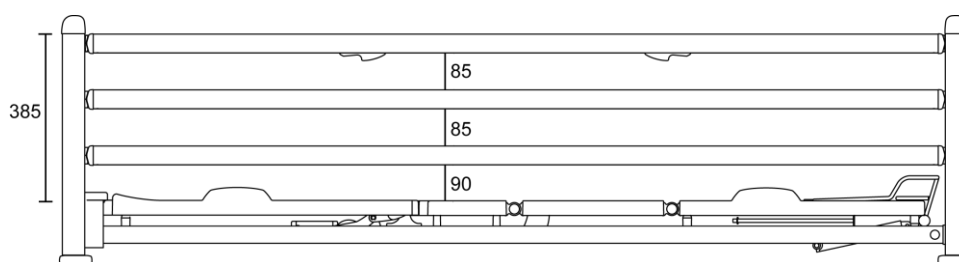


Figure 3.1: Sideguards Trix: dimensions

These sideguards are attached to an integrated rail of the aluminium stands of the Jaro front panels. The sideguards consist of three laths. Thanks to the use of three laths combined with an ingenious lock mechanism, these sideguards comply with the strictest regulations.

The Trix sideguards cover the bed sides over the entire length. An integrated telescopic system makes sure that the Trix sideguards – even when the bed is extended – cover the bed sides over the entire length. The sideguards can only be lowered by using your both hands; a safety system has been developed to prevent the sideguards from being lowered unintentionally.

The following steps must be followed to lower the sideguards:

- Take the handles under the upper lath with both hands.
- Pull these handles towards the middle of the bed while lifting the lath a little.
- Hold the handles towards the middle and lower the sideguards.

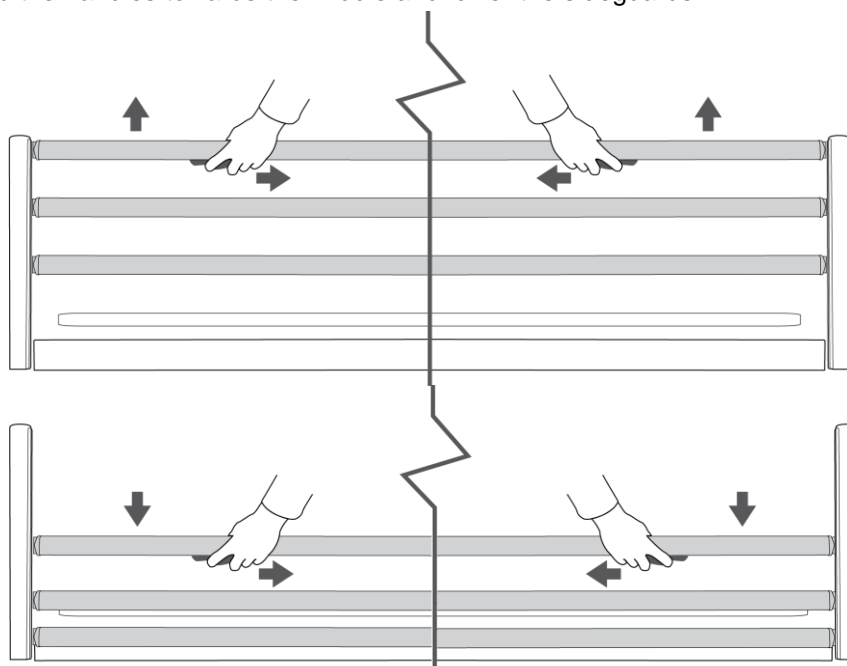


Figure 3.2: Manipulation of the sideguards type Trix

3.1.2 Type Trix heightened (option)

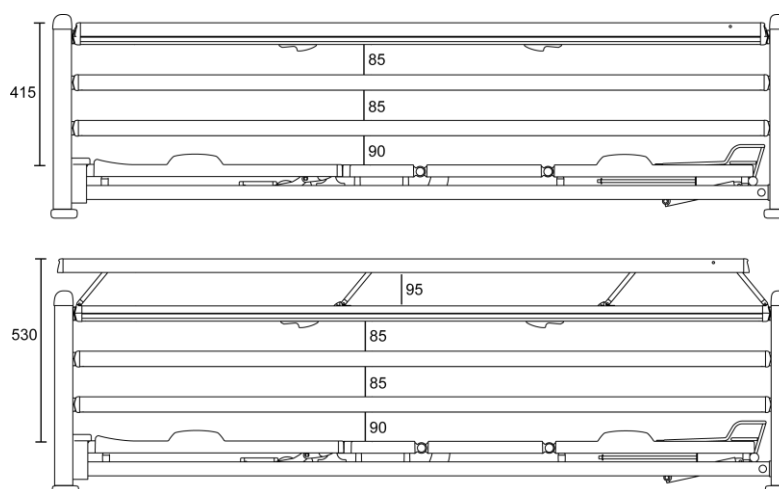


Figure 3.3: Sideguards Trix heightened: dimensions

The sideguards Trix with a heightened lath are made of the standard Trix version, in which the upper lath consists of 2 parts.

The lower part is equipped with an integrated synthetic bumper profile that protects the outside of the bed over its entire length. The upper part can be easily folded and clicked in its highest position. It perfectly fits in the lowest part, making it almost invisible when it is not used.

The following steps have to be followed to lower the upper part:

- Press the lock mechanism (at the foot of the bed).
- Move the upper part towards the foot end while exerting some pressure on the lath.

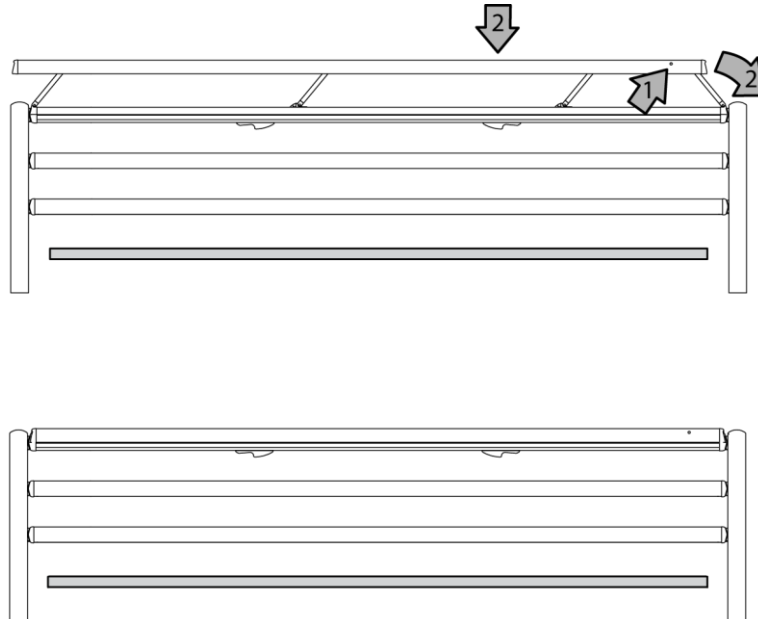


Figure 3.4: How to lower the upper part of the heightened sideguards type Trix



Please always make sure that the sideguards are locked after having raised them. Please make sure that no part of the body or objects can get stuck between the sideguards. Always put the sideguards in their highest position when you intend to leave the patient alone.



The mattress platform should always be put in its lowest and most horizontal position, when the medical condition of the patient allows this (e.g. state of health at that moment or disorientation because of medicines). When taking the patient's condition into account, the medical staff can exceptionally opt for a different lying position of the patient.



Never let the sideguards fall. Provide sufficient support while lowering them.



Pay enough attention to preventive maintenance, as described in the technical chapter of this manual.

3.2. Lifting pole

The lifting pole may only be installed in the right or left synthetic case **at the head end**. The lifting pole can be adjusted per 30°, but may **never** be swung outside the lying surface!



Taking a large safety margin into account, the maximum static load is 75 kg

It is recommended to check the suspension ribbon on a regular basis. It is also advised to replace the handle preventively every 4 to 5 years.

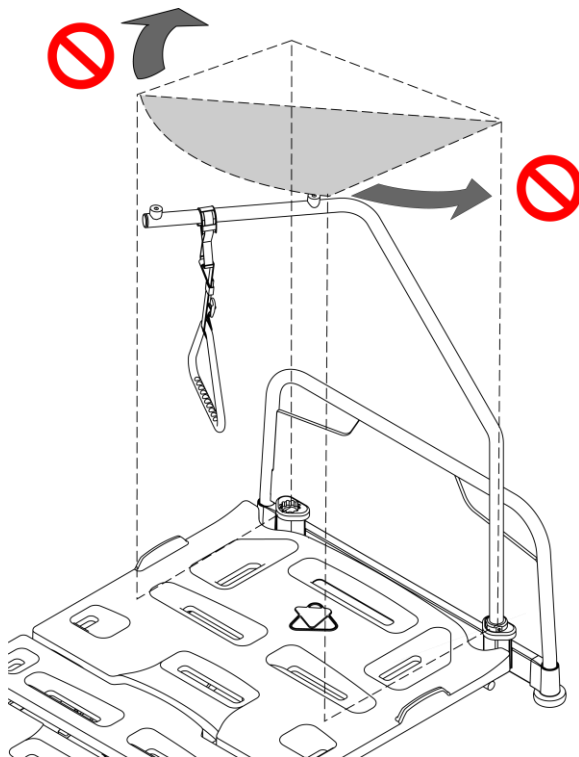


Figure 3.5: Exterior limits of the lifting pole

Weight : 4.5 kg



If the bed has been equipped with a lifting pole or an IV rod, it is strongly recommended to pay attention to the zone surrounding the lifting pole and IV rod, especially when you manipulate the bed. By doing so, you prevent that the bed equipment or devices get damaged. Always make sure that the patient cannot get stuck.

3.3 IV rod

The IV rod can be placed in the synthetic cases of the 2 bed corners at the head end of the bed. The extending part should be held very firmly, before the turn knob is loosened to adjust the height of the IV rod. By doing so, you avoid that the IV rod glides unwantedly into the fixed part!

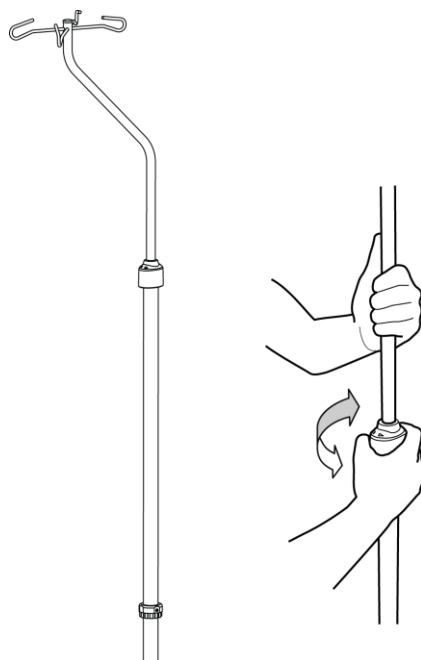


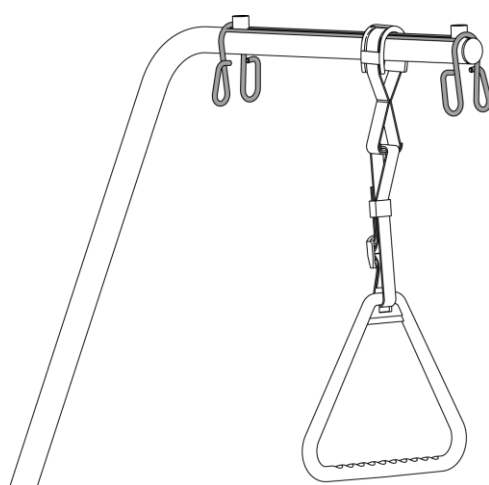
Figure 3.6: Adjustment of an IV rod

Weight of the IV rod: 3 kg

Maximum load on the hook: 2 kg

Maximum load on the IV rod: 8 kg

3.4 IV holder for a lifting pole



The lifting pole can optionally be equipped with an IV holder with 4 hooks. Always first install the IV rod on the lifting pole before hanging the handle and the ribbon on both devices.

Figure 3.7: IV holder on the lifting pole

Weight of the IV holder: 0,37 kg.

Maximum load on the IV holder: 8 kg.

Maximum load on the hook: 2 kg.

3.5 Flexible hand switch holder

The flexible hand switch holder has to be placed in the provided left or right case near the fixed mattress platform section.

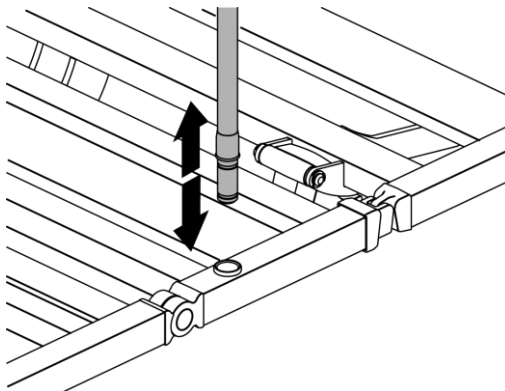


Figure 3.8: Installation of the flexible hand switch holder

Weight: 0,46 kg

3.6 Traction frame

The traction frame makes it possible to use traction materials on the Olympia bed. Two standard brackets were designed for this purpose. Haelvoet NV can optionally always develop brackets in function of the traction material used in the hospital.

Weight: 2.2 kg/piece

3.7 Patient restraint straps

Thanks to its open structure, the metal mattress platform can be equipped with patient restraint straps over the entire length of the bed. For this purpose, the optional synthetic mattress platform is equipped with several reinforced cut-outs on the left and right side for patient restraint straps.

3.8 Accessory hooks

The side beams are equipped with 3 Accessory hooks made of stainless steel on both sides of the bed. Several accessories can be optionally bought to attach to/in these hooks.

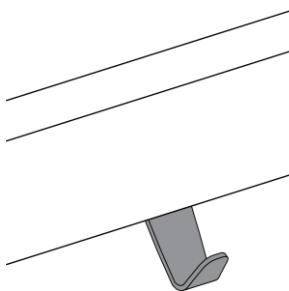


Figure 3.9: Accessory hooks

Maximum load: 10kg per hook

3.9 Equipotential connection

Electric appliances that are directly connected to the patient should be handled with the utmost care. In order to avoid an equipotential difference between the metal bed parts and the floor or other electric appliances connected to the patient, you have to connect all these appliances to a functioning equipotential net.

We would like to refer to the IEC 60601-1:2005; 8.6.7 for more information.

The bed can be connected to the equipotential net by means of the connecting pin, type DIN 42801 under the head end panel.

The equipotential connection is indicated with the following symbol:

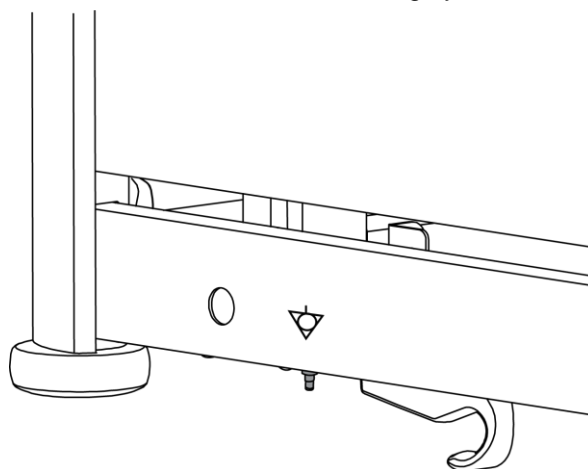


Figure 3.10: Equipotential connection at a standard head panel



The equipotential connection cannot be used as earthing. It can only be connected to an equipotential net that complies with the statutory regulations.



Furthermore, you have to opt for an equipotential connection, if the patient can be connected intravascularly or intracardially to medical equipment.

IV. CLEANING AND DISINFECTION OF THE BED

4.1 General information

You have to check the following items before you start cleaning or disinfecting the bed:

- Have the bed brakes been activated?
- Have the backrest and knee rest been put in a horizontal position? By doing so, you make sure that the interior shaft of the actuator remains greased.
- Have all electric functions been switched off?
- Has the bed been disconnected from the net?
- Have all plugs been put correctly in the control box?
- Have you checked that all cables and electric parts are undamaged?
- Have you made sure that the personnel have appropriate outfits and material? (water-proof aprons and gloves, correct cleaning products,...)



Ascertain yourself of the fact that the mains cable or electric components are not wet before connecting the bed to the net. If you think that water or disinfectants have seeped into an electric component, you have to disconnect the bed immediately and clearly indicate on the bed that it is “OUT OF USE”. Contact the person who is in charge of the beds as soon as possible. Repairs by unqualified persons may cause severe damage or injuries!



All metal protective layers have a high abrasive resistance. Nonetheless, a metal component can have scratches that expose the underlying layer. Always repair this damage to avoid corrosion.

After having cleaned and disinfected the bed, it is important to disinfect your hands before going to another area or room.

Haelvoet NV cannot be held liable for any damage, injuries and impairments resulting from improper use of cleaning products or disinfectants.

4.2 Standard IPX4 bed



Keep in mind that the bed is not standard wash tunnel-proof. Do not abundantly sprinkle the bed with water. It is absolutely forbidden to use a high-pressure cleaner.

4.2.1 Cleaning

Remove the linen and wash it. Use a soft cloth - that is moistened with cold or tepid water - and a mild cleaning product or an all-purpose cleaner to clean the bed. Clean the bed afterwards with a moist cloth (without cleaning products) and wipe the bed carefully after the entire cleaning process. Make sure that the mattress platform is completely dry before the mattress is put back.

Avoid:

- Alcoholic cleaning products
- Corrosion-stimulating or aggressive cleaning products
- Cleaning products containing harmful substances
- Scourers
- The composition of your used products may not affect the structure or surface of the synthetic parts. Moreover, the polyester epoxy coating may not be affected as well.

Always read the product information and follow the directions of the cleaning products and disinfectants.

4.2.2 Disinfection

A good chemical disinfection of the bed can only be obtained by cleaning the bed thoroughly. Always disinfect the bed before a new patient is put in the bed. Take the clinical picture of the patient and the potential presence of infected bed parts into account, and adjust the number of disinfections accordingly. Only qualified and trained personnel, familiar with the effects and use of disinfectants, are allowed to disinfect the bed. Always wear appropriate working clothes, since disinfectants may cause irritations. Always follow the directions of the used product.

- Always use cold or tepid water to dilute the product. Do not use warm water, as this causes vapour. Always seal the dilution.
- Do not use alcoholic products to disinfect large surfaces.
- Avoid skin contact and always wear gloves.
- Always check if the correct quantity has been used.
- Always make sure that there is enough ventilation during and/or after the disinfection.
- Always use a cloth or a rag to disinfect. Do not use spray products (risk of inhalation!).

We would like to refer to the website of the Robert-Koch-Institut (www.rki.de) to choose the correct disinfectant. Keep a disinfection journal for each bed and note down when and why the disinfection has taken place. Also write down which disinfectant and which quantity has been used, and do not forget to mention the name and signature of the cleaning person.

TECHNICAL MANUAL

V. GENERAL TECHNICAL DESCRIPTION

The design of this hospital bed is the answer to the demand of the hospital and health care sector for a bed providing optimal qualities in the fields of functionality, aesthetics and maintenance. The Olympia Hospital XLow bed is a multifunctional, height-adjustable bed that maximizes both the comfort of the patient and the user-friendliness.

All steel elements are protected by an epoxy coating or a chromium-plated layer, whereas the hinge points have self-lubricating synthetic bearings (= maintenance-free). Rough surfaces, sharp corners and edges which may cause injuries or damage have been avoided or covered.

A well and preventively maintained bed that is used in accordance with the specifications of this manual can be used for 10 to 25 years (or at least 10,000 cycles per bed function) without any problems. An incorrect or very intensive use of the bed affects its lifespan very negatively. The same goes for bad preventive or curative maintenance. While maintaining the bed curatively or preventively, the technician always has to check if the bed still guarantees the basic safety of the patient or its user. If this is not the case anymore, the bed has to be put out of use.

Do not modify the bed without the explicit permission of Haelvoet NV. After a permitted modification, the bed always has to be inspected correctly. Furthermore, the bed has to be submitted to a thorough test to make sure that the bed still functions safely.

The bed consists of 3 major parts:

- carriage
- bed frame
- mattress platform

Recommend mattress dimensions:

- Mattress dimensions: 85 x 195 cm
- Minimum mattress thickness: 12 cm
- Maximum mattress thickness, depending on the type of sideguards:
 - Trix: 16 cm
 - Trix heightened: 31 cm

Minimum stiffness of the foam: 2,8 kPa in accordance with ISO 3386 (CLD/40%)

Only use a mattress made of fire retardant material

In case visco-elastic foam is used, a supportive layer of minimum 7 cm with a minimum stiffness of 3,6 kPa in accordance with ISO 3386 (CLD/40%) has to be used.



If the customer has ordered a specific mattress platform dimension, then the mattress dimensions have to be adjusted accordingly.

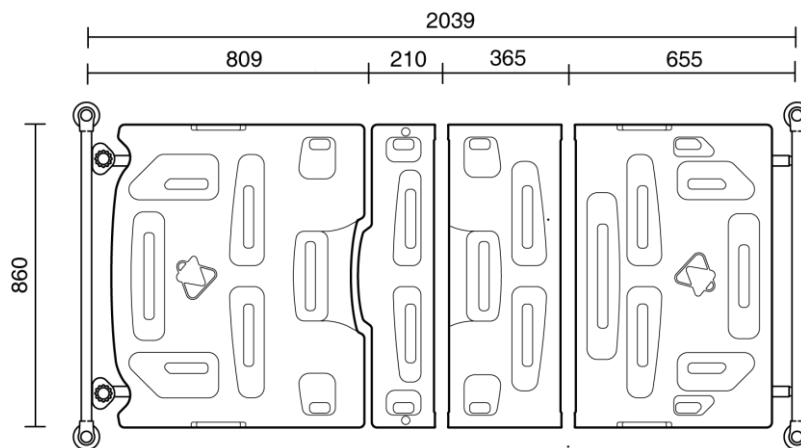
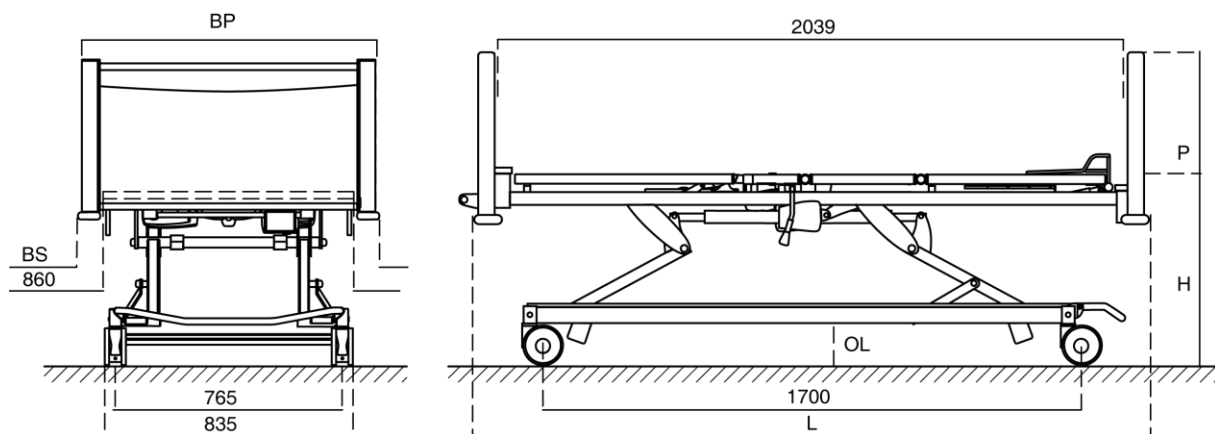


Figure 5.1: Mattress platform dimensions Olympia Hospital XLow bed



Castor version :	H in mm	OL in mm*
Hidden twin castors Linea Ø125mm	385 – 800 mm	137 mm
* OL : clearance height for a mattress platform height of 42 cm		

Panel version :	L in mm	BP in mm	BS in mm	P in mm
Panel Jaro	2060 mm	998 mm	1022 mm	433 mm

Figure 5.2: Dimensions of the Olympia Hospital XLow bed

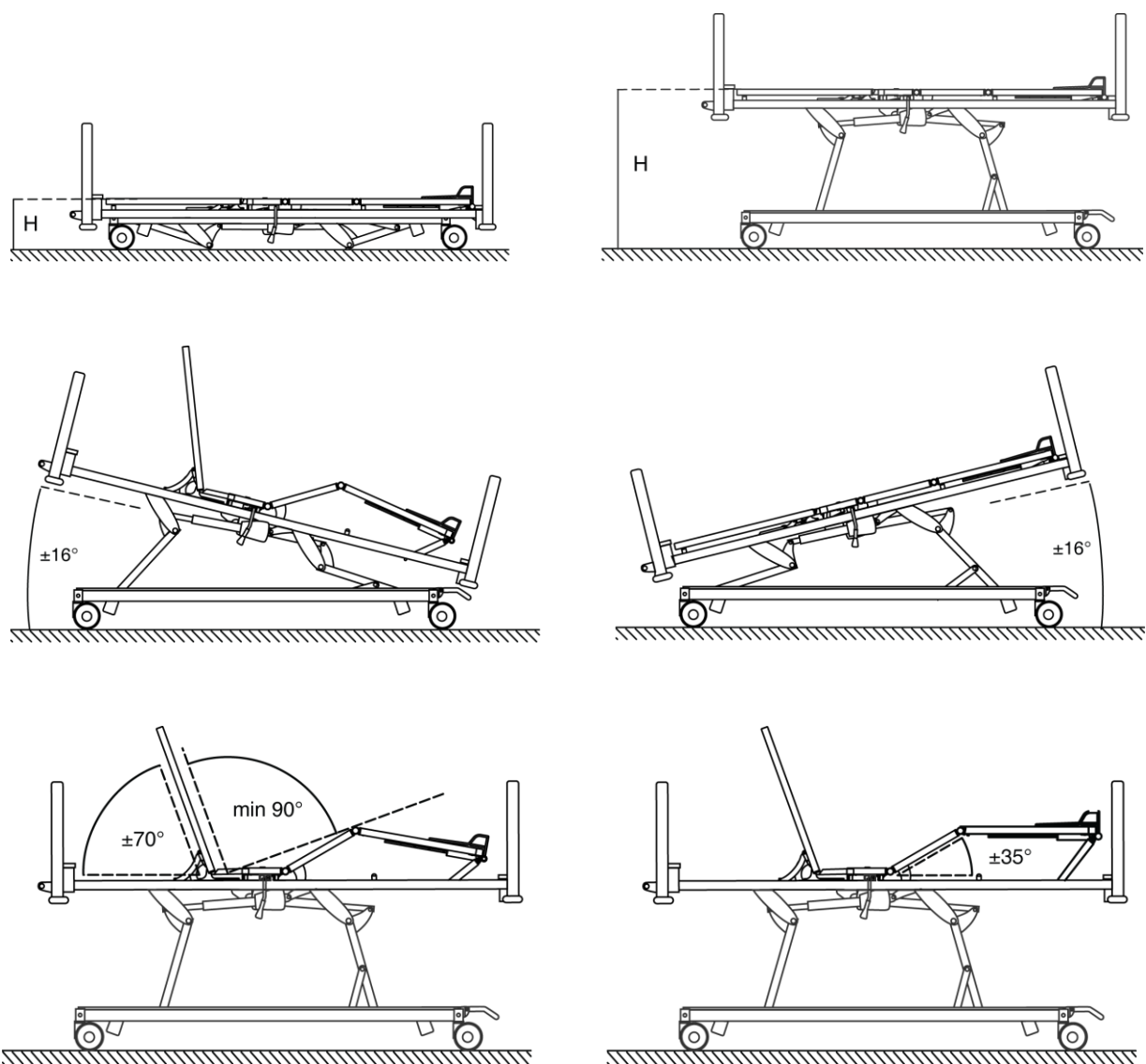


Figure 5.3: Most important manipulation data of the Olympia Hospital XLow bed

VI. ELEKTRISCHE TECHNISCHE GEGEVENS

6.1 Control box

Type	CB 06 OBM
Manufacturer	LINAK
Country of production	Denmark
Degree of protection	IPX6
Primary power supply / Max. current intensity	230 VAC / 2 A
Frequency	50 Hz
Secondary power supply	24 VDC
Duty cycle	Max. 10 % of 2 min/18 min
Mains cable length	3 m (spiral cable with strain relief)
Plug type	Moulded two-pin Euro plug

The control box generates a direct current of 24V by means of a transformer. This direct current of 24 V drives the actuators and is not dangerous for the patient and its user.

The control box may only be connected to the mains, as mentioned on the control box label.

6.2 Hand switch

Type	HD 8X
Manufacturer	LINAK
Country of production	Denmark
Degree of protection	IPX6
Max. current intensity	30 mA

6.3 Satellite control

Type	FPP
Manufacturer	LINAK
Country of production	Denmark
Degree of protection	IPX6
Max. current intensity	5 mA

6.4 Battery

Type	Closed lead-acid battery
Manufacturer	Linak
Country of production	Denmark
Degree of protection	IP54
Input/output voltage	24 VDC
Minimum charge duration (empty)	12 to 16 hours
Capacity	1,2 Ah
Max. storage duration (not connected to the control box)	3 months without recharging

Battery operation:

- If the battery voltage is at 'low level', a battery alarm beeps constantly (Low level means that battery charging is necessary to maintain the best possible lifetime. The low level battery limit corresponds to approx. 19 V (+/- 5%).
- If the battery voltage is at 'critical level', the battery alarm function immediately shuts down all operation. (If trying to operate the system anyway, the battery could start leaking or the actuator system could get damaged).
- A battery stored at 25° C has to be recharged every 3 months.
- Prior to the first use of the battery, please make sure that the battery has been charged for at least 12 hours. By doing so, you also prolong the lifetime of the battery.
- The longest lifetime is obtained when the battery has always been fully charged.

6.5 Backrest actuator with quick release

Type	LA 27C
Manufacturer	Linak
Country of production	Denmark
Degree of protection	IPX4
Input voltage	24 VDC
Length of stroke	200 mm
Speed	16,7/11,6 mm/s
Sound level	Max. 45 dB(A) DS/EN ISO 3746
Duty cycle	Max. 10 % or 2 min/20 min
Thrust	3500 N
Including	Quick release, clamp safety

6.6 Knee rest actuator

Type	LA 27C
Manufacturer	Linak
Country of production	Denmark
Degree of protection	IPX4
Input voltage	24 VDC
Length of stroke	60 mm
Speed	8,2/4,3 mm/s
Sound level	Max. 45 dB(A) DS/EN ISO 3746
Duty cycle	Max. 10 % or 2 min/20 min
Thrust	6000 N
Including	Clamp safety

6.7 High-low actuators

Type	LA 43
Manufacturer	LINAK
Country of production	Denmark

Degree of protection	IPX4
Input voltage	24 VDC
Length of stroke	146 mm
Speed	4,4 – 5,8 mm/sec
Sound level	Max. 45 dB(A) DS/EN ISO 3746
Duty cycle	Max. 10 % of 2 min/18 min
Thrust	8.000 N
Including	Clamp safety

6.8 CPR

Type	SLS for CPR
Degree of protection	IPX4
Max. current intensity	13 mA

6.9 High/low footpedal

Type	FS 3
Degree of protection	IPX4

6.10 Specifications of the CB 06 control box

a. Short circuit check

The CB06 control box is equipped with a safety device that indicates the 'first error'. This 'first error' is checked by the hardware of the control box.

When functioning properly (no error has been detected), the power LED turns yellow when a control button is activated.

If the power LED turns yellow without having activated a control button, this means that an error has occurred. (1st error)

The control box can function without any problem, even when the power LED is yellow *before* a control button is activated. However, the '1st error' still is present and has to be removed to prevent that this causes a dangerous situation.

b. Energy-saving standby mode

A few seconds after a manipulation, the control box is set in an energy-saving standby mode. As soon as a function has been manipulated, the control box is activated automatically. The energy consumption of the standby mode is 0.3W.

c. Internal protection of the control box

The control box is internally protected by a safety fuse.

At the customer's request, the bed can be delivered with the corresponding electric parameters that are statutory in the respective country (Voltage, mains cable plug)

6.11 Ambient conditions for the actuators

Temperature:	5°C to 40°C
Relative humidity:	20 % to 90 % at 30°C without condensation (for IP X4)
Atmospheric pressure:	700 to 1060 hPa

6.12 Precautions for cable connections



Never install/remove a cable or actuator when the control box is connected to the net and/or a bed function has been activated !

The following procedure has to be followed when replacing a cable or an actuator:

1. disconnect the bed from the net and wait for 5 seconds.
2. remove/install the necessary cables and/or actuator.
3. check if all cable fittings have been equipped with a rubber O-ring. Install the cables and fasten them by means of the appropriate lock mechanism.
4. connect the bed with the net and test its functionality.

Ignoring this procedure can result in a damaged control box.

Connections that are not used have to be closed with the correct cover to guarantee the mentioned IP degree.

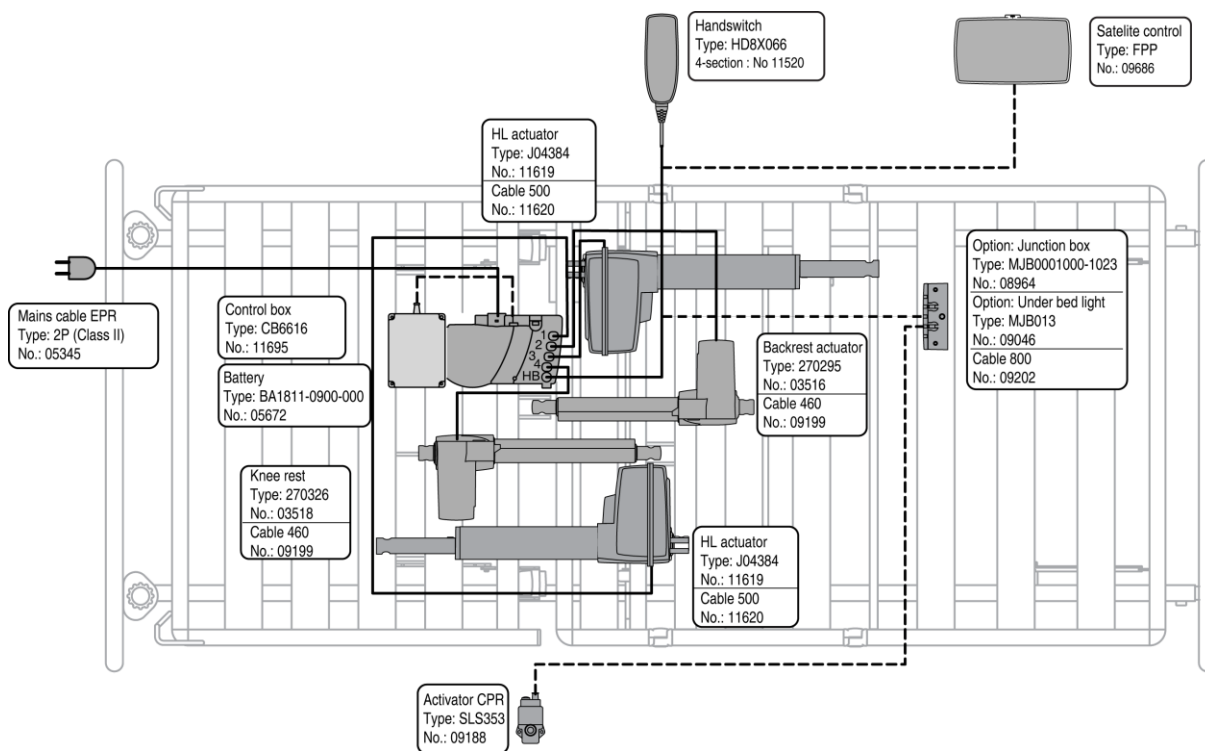


Figure 6.1: Circuit diagram of the control box Olympia Hospital XLow

VII. MECHANICAL TECHNICAL DATA

Bed type	Olympia Hospital XLow
Weight of an empty bed without options	125 kg
Degree of protection	IP X4
Safe working load	230 kg*
Safe patient weight	165 kg*
Maximum load on the backrest	80 kg
Max. sound level during a manipulation	max 50dB(A)

* It should be taken into consideration that the safe working load can only be realised, if the bed is loaded as mentioned in the norm EN 60601-2-52 (i.e. backrest 45 %, fixed section 25 %, knee rest and footrest 30 %). The bed may never be overloaded dynamically, in case all lifting power is concentrated at one bed end. In this way, the bed is protected against structural deformation. This lifting capacity applies to a bed load, with a patient in it, and without accessories, mattress and options.

VIII. TECHNICAL DATA CASTORS

Type	Linea Ø 125mm central braked		
Manufacturer	Tente		
Country of production	Germany		
Castor diameter	125 mm		
Castor width	71 mm		
Bearing	Precision ball bearings		
Dynamic load capacity	150 kg		
Static load capacity	300 kg		
Load	500 N	1100 N	1500 N
Swivelling resistance	23 N	50 N	75 N
Rolling resistance	4 N	10 N	18 N
Tread	Polyurethane		
Operating angle of the central brake	35°		

IX. STORAGE OF THE BED

Before storing the bed, you have to make sure that:

- the bed and the mattress platform sections have been put in their lowest position.
- the central brake has been activated.
- all electric functions have been switched off.
- all accessories have been removed.
- ***the internal battery has to be charged every week, in case the bed is stored for more than one week.***
- the bed has been covered.
- the storage space is dry and dust-proof (relative humidity of 20 to 90% without condensation).
- the temperature remains relatively constant and lies between -10 and +50°.
- the atmospheric pressure lies between 700 hPa and 1060 hPa



You have to check all functions before you want to use the bed again (see checklist in appendix).

X. PREVENTIVE AND CURATIVE MAINTENANCE

10.1 Safety responsibility

It is the responsibility of the institute to make sure that the bed guarantees the patient's safety during its entire life span. For this reason, the safety of the bed has to be checked regularly. Moreover, the bed has to be maintained preventively. The bed has been developed in such a way that it can be used safely for many years, on the condition that it is manipulated correctly and checked regularly. It also has to get at least one preventive maintenance a year.

It is the nurses' task to perform a routine check at regular times, especially when a new patient has to be put in the bed.



The maintenance of the bed may only be carried out by qualified and technically trained personnel. The guarantee is nullified, if the maintenance of the bed has been carried out unprofessionally and causes damage to the bed functions.



All repairs to actuators, control boxes and actuator accessories have to be carried out by an authorised Linak service shop or by a technician that has been acknowledged by Linak. All guarantee conditions are nullified, if Linak parts have been opened. An acknowledged Linak technician can always obtain further information about Linak parts from Haelvoet or Linak.



Never perform maintenance work or repairs while the patient is still in the bed.



In order to optimize the life span of the bed and to avoid accidents, the European regulation obliges an annual preventive and registered maintenance. Use the checklist in appendix during this annual preventive maintenance. If necessary, consult this manual as well.

The standard IEC EN 62353 - Medical electrical equipment - Recurrent test and test after repair of medical electrical equipment - can be used as a guide for a good maintenance procedure.

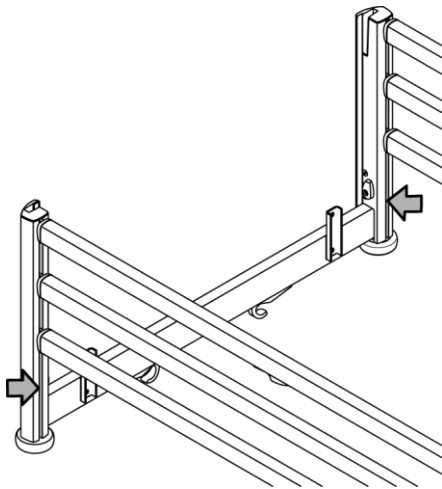
In addition to the annual registered preventive maintenance, we strongly recommend you to check the following items regularly:

- All electric functions.
- All mechanical functions (sideguards, castors,...).
- All cables and especially the mains cable.
- The hand switch and the connection cables
- Always check the mains cable when the bed has been moved and before connecting it to the net again.

When you think that there is some damage or that the bed does not function properly, you have to stop using the bed immediately. You also have to indicate clearly on the bed that it is OUT OF USE. Contact the person who is in charge of the beds as soon as possible.

The checklist in appendix can serve as a guideline during controls.

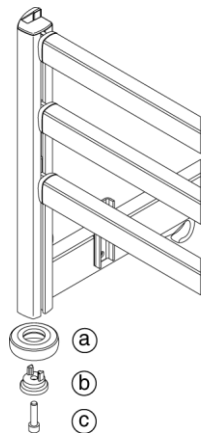
10.2 Preventive maintenance Trix



Grease the posts of the Trix sideguards annually with 'ZEP45' or an equivalent (with a base of PTFE) to reduce internal wear. Please do not use a product with a base of silicone, because this dries

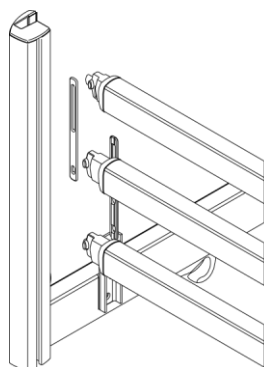
Figure 10.1: Greasing of the sideguards Trix

When used normally (i.e. an average of 2 cycles a day), it is advised to replace the clamps and the lock pin every 10 years. When used intensely (i.e. on average more than 2 cycles a day), the clamps and lock pin have to be replaced every 5 years. The procedure hereunder has to be followed:



Unscrew the bolts (c) and remove the bumpers (a) and bumper holders (b) at the head and foot end. Carefully lower and remove the siderails from the posts. Replace the clamps and locking pins.

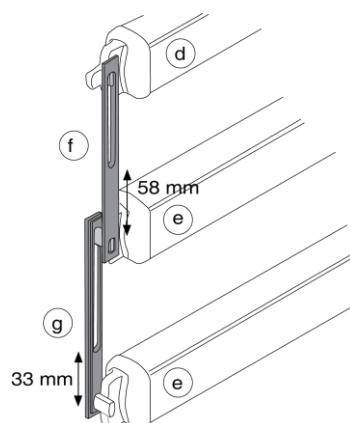
Figure 10.2: Maintenance sideguards Trix (1)



Put the aluminium profiles and the new synthetic clamps in the aluminium posts.

Figure 10.3: Maintenance sideguards Trix (2)

Please pay attention to the right assembly order:



- d) upper profile: guiding plug in front with an extending pin and suspension pin on 1 side
- e) middle profile and profile at the bottom: guiding plug with a suspension pin on both sides
- f) upper clamp : solid piece of 58mm.
- g) bottom clamp : solid piece of 33 mm.

Figure 10.4: Maintenance sideguards Trix (3)

Reassemble the bumpers and check the functionality.



A thorough preventive maintenance of the sideguards is of paramount importance to guarantee the patient's safety.

10.3 Spare parts

Haelvoet NV can provide all necessary spare parts. All you have to do, is to specify the article number, the sales order number and the serial number of the respective product. This information can be read on the identification label. This label is to be found on the side beam of the bed frame at the head end.



In order to keep the right to the guarantee, you are only allowed to use original Haelvoet NV spare parts. This instruction also applies to further maintain the safety of the bed.

Do not hesitate to contact Haelvoet NV if you have specific questions or if you want to order spare parts:

Haelvoet nv
Leon Bekaertstraat 8
B-8870 Ingelmunster
Tel: +32 (0) 51 48 66 95
Fax: +32 (0) 51 48 73 19
Email: info@haelvoet.be
www.haelvoet.be

10.4 Used fastening methods

- axle retaining ring: This ring is used to fasten the control box, the mattress platform actuators and the metal parts. It can be easily removed by just pulling the clip. The axle can be locked again by pushing the retaining ring back in the groove.

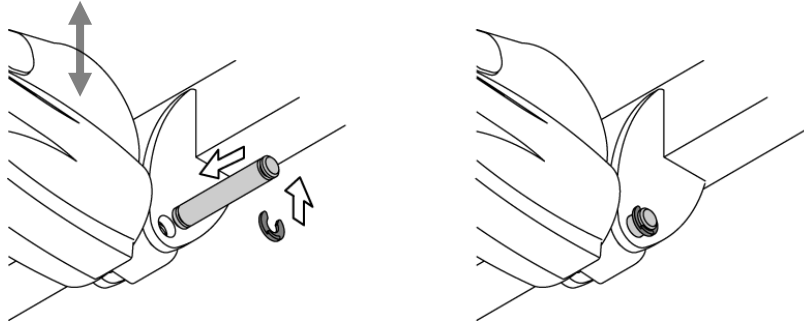


Figure 10.5: Axle and axle retaining ring

- cable clamp: All cables are fastened by means of clamps that can be removed and locked without needing any tools.

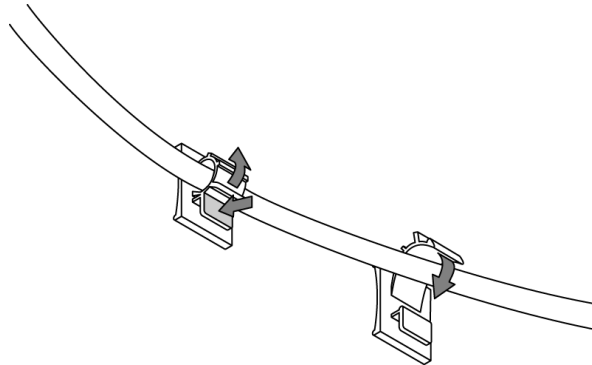
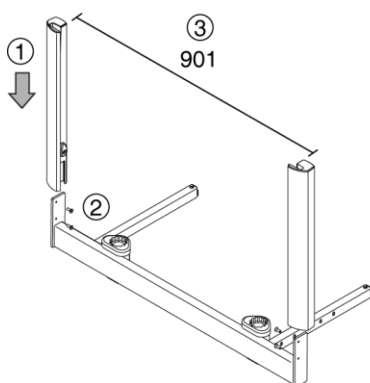


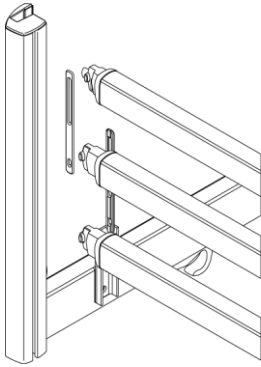
Figure 10.6: Cable clamp

10.5 Assembly of the Jaro panel and Trix sideguards



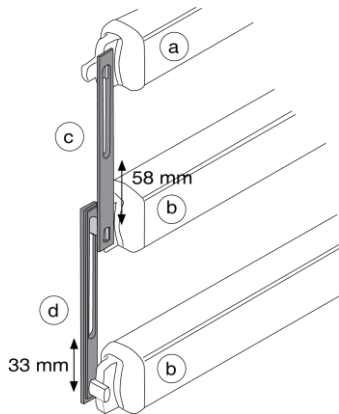
Slide the aluminium posts on the front support forks (1) and screw the bolts (2). Check the distance between both posts. Make sure that this distance is 901 mm at the top.

Figure 10.7: Assembly of Jaro panel and Sideguards Trix (1)



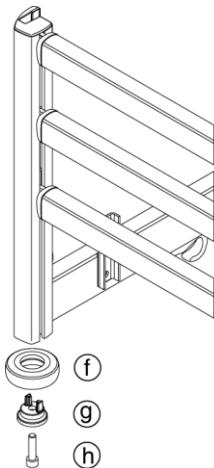
Put the aluminium profiles and the synthetic clamps in the aluminium posts. Please pay attention to the right assembly order:

Figure 10.8: Assembly of Jaro panel and Sideguards Trix (2)



- a) upper profile: guiding plug in front with an extending guiding pin and a suspension pin on one side.
- b) middle profile and profile at the bottom: guiding plug with a suspension pin on both sides
- c) upper clamp: solid piece of 58 mm.
- d) bottom clamp: solid piece of 33 mm

Figure 10.9: Assembly of Jaro panel and Sideguards Trix (3)



Install the bumpers (f) by using the bumper holders (g) and the bolts M10 (h).

Figure 10.10: Assembly of Jaro panel and Sideguards Trix (4)



Check the functionality of the sideguards. Make sure these are in accordance with the norms and regulations of IEC 60601-2-52.

10.6 Replacement of a high/low actuator

1. Put the bed in a position as high as possible.
2. Support the mattress platform at the head and foot end so that it cannot fall suddenly.
3. Disconnect the actuator cable from the actuator. It is advisable to check if the actuator you have to replace is really damaged. This is possible by plugging a new actuator in the control box without actually building it in, and checking its functions.
4. First remove the axle at the side of the HL arm. Do not forget to support the actuator so that it cannot swivel downwards. After this, the second axle near the suspension point can be removed, making it possible to remove the actuator from the bed.

The opposite working method has to be followed to install an actuator in the bed.

10.7 Replacement of a mattress platform actuator

1. Disconnect the bed from the net.
2. Remove the load (e.g. mattress) from the mattress platform that exerts pressure on the actuator.
3. Disconnect the actuator from the control box. It is advisable to check whether the actuator is really damaged. This is possible by plugging a new actuator in the control box without actually building it in, and checking its functions.
4. First, you have to get the bar that activates the mechanical quick release (CPR) out of the quick release, before you remove the backrest actuator. This can be done by removing the cover of this mechanism.
5. Open all cable clamps and remove the axle retaining ring from both axles.
6. First remove the axle on the side of the moving mattress platform section, but make sure that the moving mattress platform section and/or the actuator cannot come loose and/or fall. Afterwards, the second axle can also be removed, making it possible to take the actuator out of the bed.

The opposite working method has to be followed to install an actuator into the bed.



When you want to put back a removed actuator cable in the actuator or the control box, you always have to make sure that this happens correctly. Always plug in the cable as deep as possible and fasten the protective cap again. This is necessary to guarantee a reliable sealing and functioning. Always make sure that the cables are fastened in such a way that they cannot be damaged (no loops, kinks or incisions).



Only persons that have been acknowledged by Linak are allowed to open and repair an actuator. Always replace the entire electric part without opening it. Only a qualified technician is allowed to replace an actuator.

10.8 Readjustment of the CPR lever

1. Put the backrest in a horizontal position.
2. The nut on the thread end has to be adjusted in such a way that the lever doesn't have any clearance. Do not pull the lever too tight, because this can trigger an unforeseen activation of the lever without any manipulation.
3. Put the backrest in an inclined position and check if the quick release functions properly when there is a person in the bed.



Figure 10.11: Quick release

10.9 Battery

10.9.1 Technical specifications

Type: closed lead-acid battery with a capacity of 1,2 Ah

Average life span at normal use: minimum 2 years. The way of use can shorten this life span considerably.

Operating time: depending on the kind of movement (HL, backrest or knee rest) and load. A height variation requires the largest amount of current (2 parallel actuators). 6 to 10 complete high/low cycles can be carried out when there is a load of 130 kg. Obviously, a lot more manipulations are possible for a backrest and knee rest adjustment. An alarm signal warns you during an electric manipulation, in case the capacity of the battery does not suffice anymore to manipulate the bed. Immediately connect the bed to the net as soon as this alarm signal is audible.

Charge the battery completely before you start using the bed (at least 12 hours). Multiple high discharges have a harmful effect on the life span of the battery.

10.9.2 Description

Linak uses *closed lead-acid batteries*. Given its long-time experience in using this type of battery, Linak considers the closed lead-acid battery as the safest battery available at the moment. To prevent potential problems, we strongly recommend you to follow the maintenance advice as described hereunder:

- The battery sets have an average life span of minimum 2 years. Frequent discharges have a harmful effect on the life span of the battery. It is recommended to connect the control box as much as possible to the net, so that a long life span of the battery is guaranteed. It is also necessary to charge a battery that is not built-in, and not used, at least every 3 months. In this way, you prevent a self-discharge of the battery.
- The sintered plug in the ventilation hole of the battery that is connected to the CB06 control box has to be replaced or pricked once a year to prevent it from being blocked with dirt, lime or other substances. This plug can be removed very easily by using a screwdriver. Furthermore, the ventilation hole can be cleared with a spill Ø 1 mm.

- Irrespective of its use, the battery must be replaced every 5 years. If you use the battery for a longer period, it can damage the controlbox and/or the battery.

Replaced batteries go via Linak or Haelvoet to the recycling cycle, or may be recycled in the same way as car batteries.

10.9.3 Annual preventive battery check

Make sure that the battery is completely charged before it is tested. Disconnect the bed from the net and put a weight of about 75 kg on the mattress. The battery should be able to carry out at least one or two complete high/low cycles without any problems. If this is not the case, it is advised to replace the battery immediately

The annual preventive battery check consists of:

1. Releasing of the ventilation hole of the battery cover
2. Testing the battery functions + replacement, if this is necessary



The battery compartment is hermetically sealed from the electronics housing. It is extremely important that this seal is not damaged during the replacement of the battery. The ventilation opening may not be covered! If you do this, you increase the risk of battery explosion!



It is very important that the lock ring of an IP66 control box is put back correctly in the groove. Afterwards, the screws have to be tightened with circa 1,5 – 1,6 Nm. A damaged lock ring always has to be replaced!



If the control box is damaged because of a shock (e.g. because it has fallen on the floor), it is important that the thermal seal between the battery and electronics compartment is verified by an officially acknowledged Linak technician.



The ventilation opening always has to be released by replacement of the battery.



As from the third year of use onwards, the battery should be inspected on leaks and oxidation annually.



Always replace a battery that is older than 5 years or of which the capacity is too low. Faulty or old batteries increase the risk of explosion.

10.10 Replacement of the mains cable

If the mains cable is damaged, you have to replace it immediately. You have to follow the instructions described hereunder to replace the mains cable correctly:

1. Disconnect the plug from the net.
2. Release the strain relief. The strain relief is situated at the head end, underneath the backrest.
The bed can be equipped with two different types of strain relief:

Strain relief type 1

Unscrew the metal nut and remove the mains cable from the fixing groove.

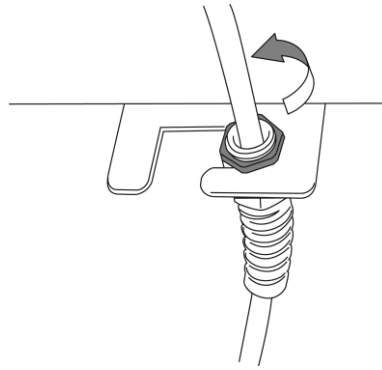


Figure 10.12: Release of the strain relief type 1

Strain relief type 2

Unscrew both screws from the synthetic strain relief and loosen the upper part. The mains cable can be removed now.

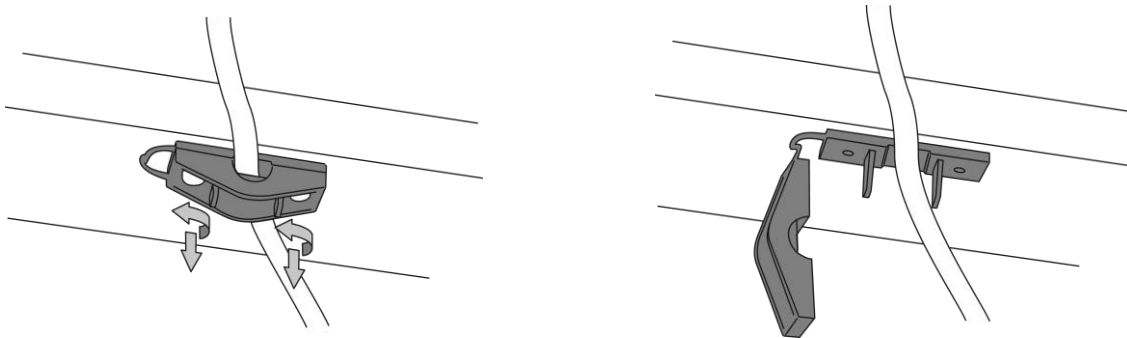


Figure 10.13: Release of the strain relief type 2

3. Disconnect the mains cable from the control box. To do this, you have to push in two red pins, while pulling the plug out of the control box. A flat screwdriver is the best tool to push in these red pins. To install the mains cable, you have to push in both pins while you plug in to the control box. Make sure that both pins are anchored properly in the control box. You can check this pulling the plug.

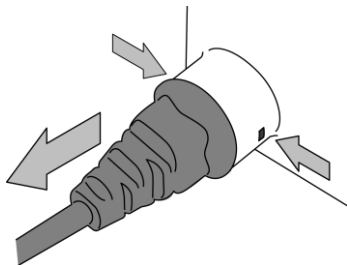


Figure 10.14: Replacement of a mains cable in the control box

4. Replacement of a mains cable in the control box.

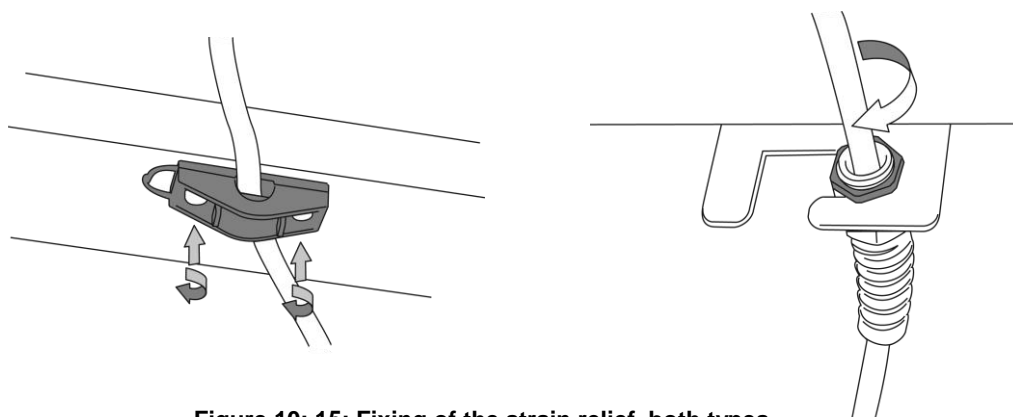


Figure 10.15: Fixing of the strain relief, both types

10.11 Replacement of a control box

Disconnect the control box CB06 OBM from the net. Unplug the control box. Remove the control box from its support plate. Install a new control box and connect all plugs again (see circuit diagram, figure 6.2).

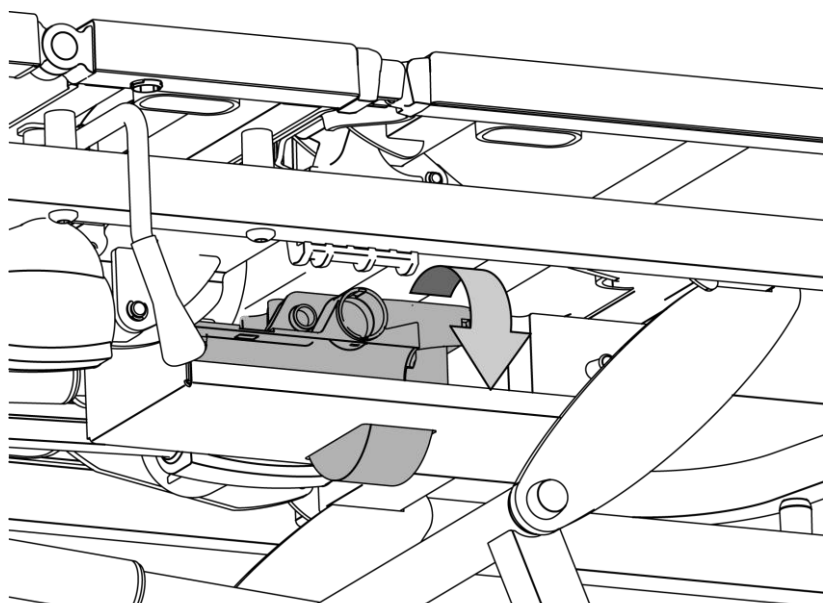


Figure 10.16: How to replace the control box CB06

XI. POSSIBLE PROBLEMS

Problem 1: The bed is acting slower than normal.

Is the bed connected to the (electricity) net?

- No -> The bed is functioning on its battery, which is slowing down the functions.
- Yes -> Please check if the bed is not too much charged/loaded (too much weight on the bed)?

Is overload the cause of reducing the speed of the operations ?

- Yes -> Please lower the charge/ the load of the bed and don't use the bed for a couple of hours.
- No -> Please check the voltage of the net.

Problem 2: Not all functions of the bed are working.

Are some functions on the nurse box not blocked?

- Yes-> Please unlock the blocked functions on the nurse box.

Are the lights on the nurse box not flashing ?

- Yes-> Please implement the reset procedure. (please ask for reset procedure document)
- No-> Please check if all cables are well plugged in, as well as please check the condition of the cable of the actuator that is not functioning. In the worse case a new cable have to be installed.

Is the problem solved?

- No-> Please connect a new actuator onto the control box and check it's functioning with the hand control.

Is the problem solved?

- Yes-> Install the new actuator on the bed.
- No-> Replace the hand control or the nurse box.

Problem 3: One of the hand control units are not working.

Please check if the hand controls are well plugged in as well as check the condition/ the functioning of their cables. Move the cable when activating a function of the hand control. If needed replace the hand control unit.

Problem 4: no functions are working at all.

Is the bed connected to the net?

- No-> The battery is completely empty. Please connect the bed to the net

Is the green light of the control box lighting up?

- Yes-> Please check if the functions are not blocked on the nursing box (ACO box) or check the hand control.
- No-> Check the condition of the feeding cable (in between net & control box) as well as check the voltage of the net.

***Reset: See Fig 2.8**

XII. ACCESSORIES

Only the following accessories that have been acknowledged by Haelvoet can be used for the bed. If you use other accessories, Haelvoet NV cannot be held liable for any possible accident, malfunction or damage.

<i>IDnr</i>	<i>Accessory</i>	<i>IDnr</i>	<i>Accessory</i>
00441	Flexible hand switch holder	05947	Monitor holder
01840	Lifting pole	06366	Oxygen bottle holder
01856	IV rod	07180	Raising aid
01862	Name card holder	08004	IV rod to attach on the lifting pole
01863	Synthetic file holder A4 (horizontal)	09242	Bed pan holder
01864	Synthetic file holder A4 (vertical)	09678	Traction frame
03576	Synthetic file holder A3 (horizontal)	09723	X-ray cassette holder (only possible with solid laminate mattress platform)
03272	Traction brace	09945	Removable mattress platform extension
03296	Urine bottle holder (vertical)		
05876	Urine bottle holder (horizontal)		
03799	Writing table		
05878	Bowl holder		



Keep the following information in mind when using the sideguards, IV rods,... on electrically adjustable beds:

When using the high/low function, or the backrest or knee rest, you have to make sure that the patient does not get stuck because of accessories. If this cannot be guaranteed, then the nurse has to prevent that the patient can use the high/low function, or backrest and knee rest.

This can be done by placing the hand switch outside the reach of the patient (e.g. at the foot end of the bed), or by blocking these functions

XIII. GARANTIE

The contractual guarantee is nullified, if spare parts are used that are not permitted, or if non-authorized interventions or actions are performed, such as:

- Opening an actuator, control box, hand switch, battery or any other electric or electronic part.
- Cleaning of an IPx4 bed in a wash tunnel or cleaning with unauthorized products.
- Incorrect use or incorrect assembly.
- Activations that conflict with the instructions in this manual.
- Activations that exceed the expectations of a standard hospital bed.

The stipulated guarantee period in the contract is only valid if a “registered” preventive check is performed annually. Spare parts that are covered by the guarantee will not be invoiced when the faulty parts are returned.

XIV. RESIDUAL WASTE AND THE ENVIRONMENT

Please sort the residual waste in accordance with the regulatory environmental requirements. Replaced electric parts such as actuators, control boxes and hand switches have to be processed as electronic waste. If you decide not to use the bed any longer and to destroy it, then the bed has to be disassembled and recycled in accordance with the environmental legislation.

This product contains recyclable aluminium, steel, synthetic material and electronic components. In order to recycle optimally at the end of the bed's life span, all parts have to be separated in such a way that the basic materials of this product can be used again.

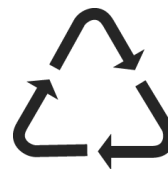
Haelvoet NV is fully aware of the fact that the environment has to be protected for the next generations. That is why we pay extra attention to development, innovation, production and the use of environment-friendly technologies and materials.



This logo wants to point out to the consumer that waste belongs in a dustbin and not in natural areas or on the public highway



This symbol – known as the möbius loop – can mean two things: “Recyclable” product or “This product contains recycled material”.
If the latter is the case, then the word ‘recycled’ has to be mentioned



Recyclable synthetic material. A number refers to the sort of plastic that is used to make the product. For the moment, only plastic types 1, 2 and 3 can be recycled.

Plastic types:

- 1 = PET
- 2 = HDPE
- 3 = PVC
- 4 = LDPE
- 5 = PP
- 6 = PS
- 7 = other types

This product is made of environment-friendly materials! It does not contain any dangerous substances such as cadmium, mercury, asbestos, PCBs or CFCs. The sound level of the bed complies with the regulatory demands to protect the public health against unwanted noise and vibrations in a protective interior area.

This product has a lead-acid battery. When the life span of the battery has come to an end, hand in this battery to a person or institute that is authorized for battery collection.

Information for the users of electric and electronic equipment.



This symbol on the product or supplied documentation means that the used electric or electronic components (waste of electric and electronic equipment = OEEZ/WEEE) may not be given or destroyed with domestic waste. Only specialised firms are authorized to process this waste. These firms will accept your waste without charge.

By removing and recycling these components properly, you protect valuable natural resources. You also prevent possible negative effects on public health. Further information can be obtained from the governmental agencies that are officially acknowledged for the protection of the environment, or from the nearest assembly point for the collection of separated waste.



If you don't follow the correct procedures for waste disposal, the national legislation can seriously fine you!

Information about the disposal of electric and electronic equipment for users in countries outside the European Union:

The symbol as showed above only applies for countries of the European Union. Please consult your local authorities or distributor for more information about the correct disposal of OEEZ/WEEE (waste of electric and electronic equipment) and lead-acid batteries.

Protect your health and the environment.

Protecting the environment is protecting the future. Thank you.

XV. SYMBOLEN



Backrest adjustment



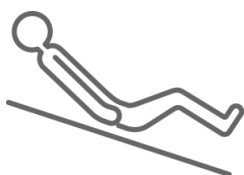
Kneerest adjustment



High-low adjustment



Trend – Reserve-Trend



Relax/seat-adjustment



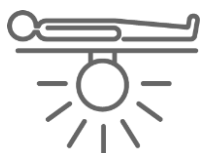
Sleeping function



Block function



Battery charge indicator



Nightlight under the bed



Magnetic key



Warning

Not following this instruction can lead to accidents with serious injuries.



Not following this instruction can lead to material damage to the bed and/or surroundings.



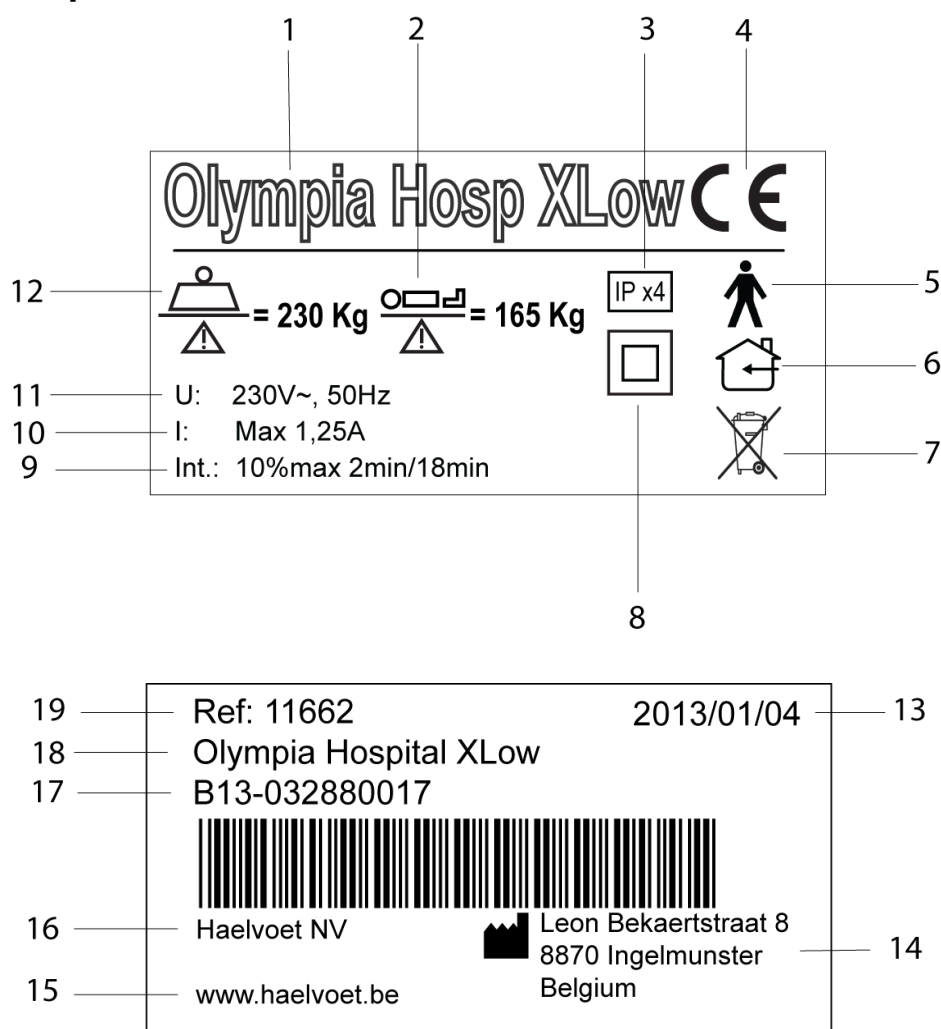
Forbidden

XVI. CONFORMITY

The Olympia hospital XLow bed is produced in accordance with ISO 9001:2008 and complies with the European Medical Devices directive 93/42/EEC and all applicable European harmonized norms:

- EN 60601-1** Medical electrical equipment. Part 1: General requirements for basic safety and essential performance.
- EN 60601-1-2** Medical electrical equipment. Part 1-2: General requirements for safety and essential performance – Secondary norm: Electromagnetic compatibility – Requirements and tests.
- EN 60601-2-52** Medical electrical equipment. Part 2-52: Particular requirements for basic safety and essential performance of medical beds.
- EN ISO 14971** Application of risk management to medical devices.

16.1 Explanation CE-label and Identification-label

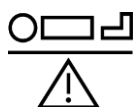


1	Name Article	10	Input current
2	Safe patient load	11	Input voltage
3	Protection against splashing water coming from all directions	12	Safe working load
4	Conformity mark in accordance with the directive for medical equipment 93/42/EEC	13	Date of manufacture
5	Type B equipment according to EN 60601-1	14	Address manufacturer
6	To be used indoors	15	Website manufacturer
7	Attention! Electronic waste	16	Manufacturer
8	For Olympia Hospital I: Class I equipment	17	Series number
9	For Olympia Hospital II: Class II equipment	18	Name article
		19	Article number

16.2 Used Symbols



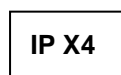
Safe working load



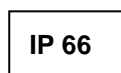
Safe patient weight



Type B equipment according to EN 60601-1



Protection against splashing water coming from all directions.



Protection against dust and powerful jets of water coming from all directions.



Class I equipment



Class II equipment



To be used indoors



Thermal switch off in the transformer



Double insulated transformer



Equipotential connection



Conformity mark in accordance with the directive for medical equipment 93/42 EEC



Obliged reading of the manual before using the bed



Consult the instructions for use



Warning



Incompatible mattresses can be dangerous, consult the instructions for use.



The used electric or electronic components may not be given or destroyed with domestic waste.



Direction of the head, obliged reading of the manual before using the bed



Clamping danger hands



Clamping danger feet

APPENDIX 1: EC-DECLARATION

EC- DECLARATION OF CONFORMITY

Following the EC Directive concerning medical devices 93/42/EEC, annex VII.

I, the undersigned, agent of the following manufacturer:

Haelvoet nv

Leon Bekaertstraat 8

8770 Ingelmunster

Belgium

Tel.:

+32 (0) 51 48 66 95

Fax:

+32 (0) 51 48 73 19

Email:

info@haelvoet.be

Declare hereby that the following product:

Olympia Hospital XLow

No.: 11662

Medical device class I (non-invasive device)

when installed, maintained and used in accordance with the manual, the rules of good craftsmanship, and the intended purpose complies with all necessary safety requirements and other relevant provisions of annex I of:

Medical Devices directive 93/42/EEC

The following norms have been applied to indicate the conformity:

- EN 60601-1** Medical electrical equipment. Part 1: General requirements for basic safety and essential performance.
- EN 60601-1-2** Medical electrical equipment. Part 1-2: General requirements for safety and essential performance – Secondary norm: Electromagnetic compatibility – Requirements and tests.
- EN 60601-2-52** Medical electrical equipment. Part 2-52: Particular requirements for basic safety and essential performance of medical beds.
- EN ISO 14971** Application of risk management to medical devices.

The conformity to the mentioned harmonised norms is certified by:

TÜV SÜD Product Service GmbH

Approval certificate Z1 15 02 84536 011



The above-mentioned product has been designed, produced and checked in accordance with the quality management system of **ISO 9001:2008**.

Ingelmunster, 08/07/2013

Signature:

A handwritten signature in blue ink, appearing to read 'Haelvoet Vincent', enclosed within a blue oval.

Haelvoet Vincent
Managing Director

APPENDIX 2: CHECKLIST MAINTENANCE

Customer:				
Address:				
Performed:	<input type="checkbox"/> check on delivery	<input type="checkbox"/> periodical check		
<input type="checkbox"/> other			<input type="checkbox"/> check after repair or maintenance	
Bed type:	<input checked="" type="checkbox"/> Hospital bed	<input type="checkbox"/> Nursing bed	<input type="checkbox"/> Protection class: I	<input type="checkbox"/> Protection class: II
Model:	Olympia Hospital XLow		Id nr.:	
Installation:				
Manufacturer:	Haelvoet nv			
Class:	Class I Medical Device			
I. Visual check		Good	Not good	Malfunction description
Visual check of the electric parts				
Stickers and identification plates	Present			
Housing of the control box	Correct position, damage			
Housing of the actuators	Correct position, damage			
Battery	Age			
Fixation of the actuator shafts	All fastening clips are present			
Hand switch	Damage			
Actuator, hand switch supply cables	Damage, because the cable is jammed or cut/incised. Check the cable route and fixation			
All plug connections with the control box	Plugged in correctly, bayonet lock is present + installed correctly			
Strain relief of the supply cable	Supply cable is fastened properly			
Equipotential connections (optional)	Damage, fastened properly			
Visual check of the mechanical parts				
Stickers and identification plates	Present			
Carriage	Damage, deformation			
Castors	Damage			
Mattress platform sections	Damage, deformation			
Welded joints	Broken joint			
Sideguards	Damage, deformation, compliance with the statutory norm			
Wear-sensitive parts, such as hinge points	Wear, breakage			
All nuts/bolts				
Lifting pole	Damage, deformation			
Lifting pole handle	Damage, deformation			
Lifting pole ribbon	Damage (fraying)			
II. Electric measurement in accordance with EN 62353		Good	Not good	Malfunction description

III. Performance check		Good	Not good	Malfunction description
Performance check of the electric parts				
Performance of all actuators and control box	Test as instructed by the manual			
Sound of all actuators and control box				
Battery	Performance			
Hand switch	Functioning, sound, lock functions Position and functioning of the magnet of the HD-Hand switch (option)			
Lock box, locking mechanism	Test as instructed by the manual			
Limit switch on the actuators	Automatic			
High/Low foot pedal (optional)	Functioning			
Brake buzzer (optional)	Functioning			
Performance check of the mechanical parts				
Complete bed functionality				
Hinges and virtual pivot points	Smooth, fluent movement Lubrication with vaseline			
Castors	Brakes, unblocking			
CPR lever	Functioning as mentioned in this manual			
Sideguards	Functioning, blocking			
Bed and foot extension	Fluent functioning			
Footrest or legrest adjustment	Telescopic adjust functions properly			
Bumpers	Functioning			
Lock box	Functioning of the slide Length of the cable			
Check results				
All check results are within the permitted limits	<input type="checkbox"/> yes <input type="checkbox"/> no		Next date of inspection:	
Successful check	<input type="checkbox"/> yes <input type="checkbox"/> no			
Unsuccessful check	<input type="checkbox"/> Malfunction, do not use the bed! ⇒ repair <input type="checkbox"/> Malfunction, do not use the bed! ⇒ put the bed OUT OF USE <input type="checkbox"/> Bed does not comply with the safety norm			
Test sticker is present	<input type="checkbox"/> yes <input type="checkbox"/> no			
Other remarks				
Comments				
Datum of inspection:	Inspector:	Signature:		

APPENDIX 3: EMC-TABLES

Guidance and manufacturer's declaration – electromagnetic emission		
The Olympia Hospital XLow bed is intended for use in the electromagnetic environment specified below. The customer or the user of the Olympia Hospital XLow bed should assure that it is used in such an environment.		
Emissions test	Compliance	Electromagnetic environment - guidance
RF emissions CISPR 11	Group 1	The Olympia Hospital XLow 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. The Olympia Hospital XLow 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.
RF emissions CISPR 11	Class B	
Harmonic emissions IEC 61000-3-2	Class A	
Voltage fluctuations / flicker emissions IEC 61000-3-3	Complies	

Guidance and manufacturer's declaration – electromagnetic immunity


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

Immunity test	IEC 60601 test level	Compliance level	Electromagnetic environment - guidance
Electrostatic discharge (ESD) IEC 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 %.
Electrostatic transient / burst IEC 61000-4-4	± 2 kV for power supply lines ± 1 kV for input/output lines	± 2 kV for power supply lines ± 1 kV for input/output lines	Mains power quality should be that of a typical commercial or hospital environment.
Surge IEC 61000-4-5	± 1 kV differential mode ± 2 kV common mode	± 1 kV differential mode ± 2 kV common mode	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	$< 5\% U_T$ ($>95\%$ dip in U_T) for 0,5 cycle $40\% U_T$ (60% dip in U_T) for 5 cycles $70\% U_T$ (30% dip in U_T) for 25 cycles $< 5\% U_T$ ($>95\%$ dip in U_T) for 5 sec	$< 5\% U_T$ ($>95\%$ dip in U_T) for 0,5 cycle $40\% U_T$ (60% dip in U_T) for 5 cycles $70\% U_T$ (30% dip in U_T) for 25 cycles $< 5\% U_T$ ($>95\%$ dip in U_T) for 5 sec	Mains power quality should be that of a typical commercial or hospital environment. If the user of the Olympia Hospital XLow bed requires continued operation during power mains interruptions, it is recommended that the Olympia Hospital XLow bed be powered from an uninterruptible power supply or a battery.
Power frequency (50/60 Hz) magnetic field IEC 61000-4-8	3 A/m	3 A/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 application of the test level.

Guidance and manufacturer's declaration – electromagnetic immunity

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

Immunity test	IEC 60601 test level	Compliance level	Electromagnetic environment - guidance
Conducted RF IEC 61000-4-6	3 V	3 V	Portable and mobile RF communications equipment should be used no closer to any part of the Olympia Hospital XLow bed, including cables, than the recommended separation distance calculated from the equation applicable to the frequency of the transmitter. Recommended separation distance $d = \left[\frac{3,5}{V_1} \right] \sqrt{P}$
Radiated RF IEC 61000-4-3	3 V/m 80 MHz to 2,5 GHz	3 V/m	$d = \left[\frac{3,5}{E_1} \right] \sqrt{P} \quad 80 \text{ MHz to } 800 \text{ MHz}$ $d = \left[\frac{7}{E_1} \right] \sqrt{P} \quad 800 \text{ MHz to } 2,5 \text{ GHz}$ where p is the maximum output power rating of the transmitter in watts (W) according to the transmitter manufacturer and d is the recommended separation distance in metres (m). ^b Field strengths from fixed RF transmitters, as determined by an electromagnetic site survey, ^a should be less than the compliance level in each frequency range. ^b Interference may occur in the vicinity of equipment marked with the following symbol: 

NOTE 1 At 80 MHz and 800 MHz, 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.

^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 Olympia Hospital XLow bed is used exceeds the applicable RF compliance level above, the Olympia Hospital XLow bed should be observed to verify normal operation. If abnormal performance is observed, additional measures may be necessary, such as reorienting or relocating the Olympia Hospital XLow 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 Olympia Hospital XLow bed

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

Rated maximum output 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
	$d = [\frac{3,5}{V_1}] \sqrt{P}$	$d = [\frac{3,5}{E_1}] \sqrt{P}$	$d = [\frac{7}{E_1}] \sqrt{P}$
0,01	0,12	0,12	0,23
0,1	0,37	0,37	0,74
1	1,17	1,17	2,33
10	3,69	3,69	7,38
100	11,67	11,67	23,33

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 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.

APPENDIX 4: TRAINING CERTIFICATE

Training Certificate

Customer & instructor specifications

Customer:	Company + Contact information :	Training followed by:
Instructor:	Company + Contact information :	Training given by:

Product specifications

Product name + description	Article number:
	Serial number:
	Sales order number:
	Delivery date:

Certificate of training

I hereby confirm that the user has received a training to become familiar with the use of this product.		
Remarks:		
Date:	Name + customer signature + stamp	Name + instructor signature + stamp
.....



HAELVOET NV | L. BEKAERTSTRAAT 8, 8770 INGELMUNSTER, BELGIUM | T +32 (0) 51 48 66 95 | F +32 (0) 51 48 73 19 | INFO@HAELVOET.BE | WWW.HAELVOET.BE

Written by:
Haelvoet NV
Leon Bekaertstraat 8
8770 Ingelmunster
Belgium
Tel. +32 51 48 66 95
Fax. +32 51 48 73 19
info@haelvoet.be
www.haelvoet.be



All rights reserved. Nothing from these operating instructions and this technical manual may be reproduced without the prior written consent of Haelvoet NV.