USER MANUAL

The TotalCare® Bed System
From Hill-Rom®
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## FOR SPECIAL ASSISTANCE

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<td>Hill-Rom Account Manager</td>
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SAFETY TIP:
Do not use the product outside the recommended patient height, width and weight ranges.

SAFETY TIP:

**INTENDED USE**

**Patient Characteristics:**
- Height: 74" (188 cm) maximum, 54" (137.2 cm) minimum
- Width: 36" (91.4 cm) maximum
- Weight: *500 lbs. (226.8 kg) maximum, 70 lbs. (32.0 kg) minimum*

*Includes mattress, IV pumps, poles, bags, etc. Scale accuracy may be diminished if patient weight exceeds 400 lbs. (181.4 kg). Mattress interface pressure performance may be diminished if patient weight exceeds 300 lbs. (136.1 kg).

**SAFETY TIP:**

⚠️ Do not use the product outside the recommended patient height, width and weight ranges.
**DIMENSIONS**

**CHAIR POSITION**

- 50° to 65°
- 65° to 75°
- 10° to 70°
- 70° to 85°
- 21.5" (54.6 cm)
- 17.5" (44.5 cm)

**CHAIR EGRESS POSITION**

- With roller bumpers 93.5" (237.5 cm)
- With transport shelf add 1° (2.5 cm)
- 17.75' (45.09 cm)
- 36.5' (92.7 cm)
- 4.75" (12.1 cm)
- 5" (13 cm)
- 42" (107 cm)
- 40" (102 cm) siderails up
- 36" (91 cm) siderails down
- 25.75" (65.4 cm) foot end
- 23.5" (59.7 cm) head end

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**Mattress Size**
- 35" x 84" (89 cm x 213.4 cm)

**Foot Retraction**
- 12" (30.5 cm)

**Trendelenburg/Reverse Trendelenburg**
- 15°/15°

**Emergency Trendelenburg**
- 20°

**Head Section**
- 75°

**Knee**
- 20°

**Automatic Knee Contour**
- 10°

**Foot**
- 85° Down

**Preliminary Tilt Table**
- 20°

**Articulating Deck**
- 32.5" x 84" (82.6 cm x 213.4 cm)

**Weighing Capacity**
- 400 lbs (181.4 kg)

**Maximum Safe Working Load**
- 500 lbs (226.8 kg)
CAREGIVER CONTROLS

STANDARD POINT-OF-CARE SIDERRAIL CONTROLS
Caregiver Point-of-Care Siderail Controls are located on the outboard side of the intermediate siderails.

SAFETY TIP:
△ Instruct visitors not to use caregiver controls at any time. Visitors may assist patients in the use of patient controls.

ENABLE CONTROL
The Enable control deters unauthorized operation of certain user panel controls. The Enable control must be pressed and the indicator light illuminated before the intended caregiver control will operate. The Enable indicator will stay on for 20 seconds when the Enable control has been pressed. While this indicator light is on, the caregiver can activate all caregiver controls except for those that have been locked out.

To Activate:
- Press the Enable control, the Enable indicator light will come on for 20 seconds.
- During the 20 second period, the caregiver may activate other caregiver controls without pressing the Enable control again. The 20 second period will start over when another control is pressed.

NOTE The following patient controls, located on the outside of the rail in the caregiver control panel, do not require activation of the Enable control: Bed Up/Down, Head Up/Down, Knee Up/Down, and NURSE controls.

NOTE See Lockout Controls for instruction on lockouts.

BED UP/DOWN CONTROL
L (Located on upper rail)

HEAD UP/DOWN CONTROL;
KNEE UP/DOWN CONTROL

NURSE CONTROL
**LOCKOUT CONTROLS**
The Lockout Controls located on the caregiver siderail control panel disable the bed system articulating functions.

**To Activate:**
- Simultaneously press the Enable control and the specific lockout control desired. Both patient and caregiver controls will be locked out. An audible alarm sounds when a lockout is activated.
- Disable any lockout by simultaneously pressing the Enable control and the respective lockout control.

**NOTE** The master lockout will disable all articulation controls. No movement of the system is allowed, except for emergency CPR and Trendelenburg functions.

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**BED UP/DOWN (HI-LO) CONTROL**
The TotalCare Bed System adjusts in height from a low position for patient egress to a high position for examination. Use the Bed Up/Down controls to raise or lower the system.

**To Activate:**
- Press and hold the Bed control to raise the system. Press and hold the Bed control to lower the system.
- Disable Bed Hi-Lo – Activate the Hi-Lo lockout control to disable hi-lo bed movement.

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**HEAD UP/DOWN CONTROL**
The caregiver can raise or lower the head section using the Head Up/Down controls. Using the Line-of-Site angle indicators, the caregiver can articulate the head section to specific angles.

**To Activate:**
- Press and hold the Head control to raise the head section. Press and hold the Head control to lower the head section.

Additionally, the TotalCare Bed System is equipped with an automatic contour operating mode. When the Head Up control is pressed, the automatic contour mode is enabled and the knee section raises to a maximum of 10°.

- Automatic Contour Feature – Press and hold Head control. The head and knee sections raise together to reduce patient migration toward the foot end of the system.
- Disable Automatic Contour – Activate the Head lockout control to disable the automatic contour mode.

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**KNEE UP/DOWN CONTROL**
The caregiver can raise or lower the knee section using the Knee Up/Down controls. Additionally, the TotalCare Bed System is equipped with an automatic contour operating mode. When the Head Up control is pressed, the automatic contour mode is enabled and the knee section raises to a maximum of 10°.

**To Activate:**
- Basic Knee Up/Down – Press and hold Knee control to raise the knee section. Press and hold Knee control to lower knee section.
- Automatic Contour Feature – Press and hold Head control. The head and knee sections raise together to reduce patient migration toward the foot end of the system.
- Disable Automatic Contour – Activate the Knee lockout control to disable the automatic contour mode.

**NOTE** The automatic contour feature can also be disabled by pressing and holding the Knee Down control while raising the head section.
FOOT UP/DOWN CONTROLS
The foot section can be lowered and raised using the foot Up/Down controls.

To Activate:
- Press the Enable \( \square \) control.
- Press and hold the Foot \( \downarrow \) control to lower the foot section. Press and hold the Foot \( \uparrow \) control to raise the foot section.

SAFETY TIPS:
- Before activating the foot section controls, make sure the area around the foot section is clear of equipment.
- Keep the optional transport shelf horizontal during patient transport. This requires that the foot section be in the horizontal position.
- Do not use ankle restraints when activating this feature.

FLEXAFOOT RETRACTABLE FOOT CONTROL
The foot section can be extended or retracted using the foot retraction In/Out controls. This feature allows the TotalCare Bed System to customize the length of the sleep surface to the patient. The foot section can be retracted 12" (30.5 cm).

To Activate:
- Press the Enable \( \square \) control.
- Press and hold the Foot \( \uparrow \) control to extend the foot section. Press and hold the Foot \( \downarrow \) control to retract the foot section.

NOTE Patient comfort can be affected by an improperly adjusted foot section. See Heel Suspension for additional information.

SAFETY TIP:
- Do not use ankle restraints when activating this feature.

TRENDELENBURG AND REVERSE TRENDELENBURG CONTROLS
The TotalCare Bed System is capable of 15° Trendelenburg and 15° Reverse Trendelenburg. The powered Trendelenburg and Reverse Trendelenburg controls can be activated at any bed height.

The Trendelenburg feature includes Line-of-Site angle indicators located in the intermediate siderails for determining Trendelenburg angles.

To Activate:
- Press the Enable \( \square \) control.
- Press and hold the Trendelenburg \( \leftarrow \) control. The foot end of the bed system articulating frame raises relative to the head end.
- Press and hold the Reverse Trendelenburg \( \rightarrow \) control. The head end of the bed system articulating frame raises relative to the foot end.
- Return to flat position – Press the opposite control. (If in Trendelenburg – press Reverse Trendelenburg, If in Reverse Trendelenburg – press Trendelenburg.) When the level position is reached, the bed system will pause.

NOTE If the head section is in the up position when Reverse Trendelenburg is activated, the head section will automatically lower. This prevents patients from gravitating toward the foot end of the bed.

NOTE If the foot section is in the down position when Reverse Trendelenburg is activated, the foot section will automatically raise. This prevents the articulated foot section from interfering with the floor.
CAREGIVER CONTROLS

**BED FLAT CONTROL**

Bed Flat controls are provided so that a caregiver can easily return the patient deck to the level position from any articulated position.

**To Activate:**

- Press the Enable control.
- Press and hold the Bed Flat control. The patient deck will move to the flat position in a two-step motion, first the articulating frame and then the individual sections. When all sections are flat, the system will stop.

**CHAIR POSITIONING**

**FullChair Position**

Using the FullChair patient position control, the caregiver can place the TotalCare Bed System in one of three basic chair positions. The available chair positions are chair, chair egress, and recliner.

**NOTE** Chair positioning can only be accessed through the caregiver control panel.

**NOTE** Patient articulation controls are automatically locked out while the system is in the chair or chair egress positions. The chair indicator on the caregiver control panel illuminates when the chair position is entered.

**Chair**

The head section raises 65°, knee section raises 10°, and the foot section lowers 70°.

The chair feature allows the caregiver to place the patient in a fully seated position without having to remove the patient from the TotalCare Bed System. The chair feature also provides a means to support the patient’s feet for comfort and security.

**To Activate:**

- Set the brake.
- Press the Enable control.
- Press the Chair control. The patient deck will transition to the chair position.
- If the footboard is installed, when the articulation stops and an audible tone sounds, the system has reached the full chair position.

**To Support Patient’s Feet:**

- Check for support in the full chair position. Many patients will be adequately supported with no action required.
- For shorter patients, reverse the footboard so that the product label is up.
- Move the mattress foot section up to remain within the footboard.
- Adjust the foot section angle using the “foot in” control to position the legs correctly while maintaining foot support.

**NOTE** Many shorter patients may not require that the footboard be reversed. Use of pillows, blankets, or optional foot bolster may provide adequate support.

**NOTE** Extremely short patients may require use of pillows, blankets, or optional foot bolster in addition to reversing the footboard for adequate foot support.

**NOTE** When the brake is not set and the bed system is in the chair or chair egress positions, the brake not set and chair indicator will flash and an audible alarm will sound.

**NOTE** If the footboard is present with the bed in the maximum FullChair position and the chair control or foot down control is pressed, the remove ft board and chair indicators will flash and an audible alarm will sound.

**SAFETY TIPS:**

- Check periodically to ensure that the patient remains properly positioned. If necessary, use the optional seat belt to prevent patients from sliding or falling forward while in a chair position. Use of pillows can maintain side-to-side positioning.
- The patient’s feet must be supported at all times while in the chair position. Extended periods of time without support can cause discomfort or reduced circulation. Refer to page 6, the FlexAfoot Retractable Foot Control, and/or move the patient down in bed until the patient’s feet are supported.
- Do not transport a patient with the TotalCare System in a chair position.
- Do not stand or sit on the footboard.
- For large patients or patients at risk for skin breakdown, use of the Trendelenburg control to “tilt” the chair position back will optimize interface pressure performance.
Chair Egress
The head section raises 75°, the knee section lowers to 0°, the foot section lowers to 85°, and the Hi-Lo lowers to low. The foot section fully retracts automatically.

The caregiver can use this feature to easily position a patient to egress from the foot end of the TotalCare Bed System.

To Activate:
- Set the brake.
- Remove the footboard.
- Press the Enable control.
- Press the Chair control. The patient deck will transition to the chair egress position. Monitor the patient as the system moves to the egress position.
- Assist the patient with egress.

NOTE When the brake is not set while the bed system is in the chair egress position, the brake not set and chair indicators will flash and an alarm will sound.

NOTE To achieve the FullChair egress position, the front casters must be in a trailing position.

NOTE The TotalCare Bed System will not move to the FullChair egress position until the footboard is removed. When the footboard is removed the remove ft board indicator light goes out.

NOTE FullChair egress is intended to facilitate patient egress and not long-term sitting.

SAFETY TIPS:
- If the patient is left sitting in the chair egress position, a thigh angle of 10° should be maintained, except during actual patient egress. The patient’s feet must be supported by the floor at all times while in the egress chair position.
- Do not transport a patient with the TotalCare System in a chair position.
- Do not use ankle restraints when activating this feature.
- Do not install the footboard in the chair egress position. The remove ft board and chair indicators will flash and an alarm will sound.
- If bed sheets contact the floor during chair egress use, standard infection control procedures should be followed.

Recliner
The head section raises 50°, knee section raises 10°, and the foot section lowers 30°.

The recliner feature allows the patient to be placed in a customized semi-seated position.

To Activate:
- Set the brake.
- Press the Enable control.
- Press the Chair control. The patient deck will transition to the reclined position.
- When the system has reached the approximate desired position, release the Chair control. If desired, use the head, knee, foot, or foot retract controls to make custom recliner position adjustments.

SAFETY TIPS:
- Do not transport a patient with the TotalCare System in a recliner position.
- Do not use ankle restraints when using this feature.
- The patient’s feet must be supported at all times while in the recliner position. Extended periods of time without support can cause discomfort or reduced circulation.
The overall angle of emergency Trendelenburg is directly proportional to the height of the bed. To ensure that a maximum of 15° can be achieved, the bed system should always be transported in a mid-height position. If the bed is in low position and AC power is not available, use pillows to elevate the patient’s feet until Trendelenburg can be achieved.

NOTE In the event that the bed is equipped with Optional Manual Controls, system articulation including Trendelenburg and Reverse Trendelenburg positions can be achieved. See page 14, Optional Manual Controls.
When the nurses station acknowledges the nurse call, the indicator light on the NURSE control will flash and an audible beep will sound. When the nurses station's communication line is open, the indicator stops flashing and illuminates continuously. Speak into the speaker/microphone located on the inboard side of the head end siderails.

NOTE: You do not need to press the Enable control prior to pressing a NURSE control. The NURSE controls are always active. The NURSE controls cannot be locked out by the Master lockout control.

NOTE: A nurse call will be placed automatically one minute after the loss of AC power.

OPTIONAL CAREGIVER CONTROLS

HANDSFREE EMERGENCY CPR RELEASE

When connected to AC power, the CPR release lowers the head and knee sections, and raises the foot section. The head section moves to a flat position within 10 seconds. Emergency CPR is also functional in the FullChair, chair egress, or recliner positions. When the pedal is held down for four seconds, an audible tone will sound and the foot section will rise. The foot section moves to a flat position within a maximum of 25 seconds if fully articulated. If the power cord is unplugged, only the head section will lower. To stop the automatic foot up articulation, press any control except for Hi-Lo (Bed Up/Down) and the foot section will stop.

The optional treatment surface will max inflate providing a firm surface to support a CPR board. The headboard can be used as a CPR board in emergency situations. Should AC power be lost, the treatment surface will maintain the level of pressure that existed at the time of power loss.

To Activate:

- Hold the CPR Pedal down with your foot until the head section reaches the flat or desired position and the audible tone is heard. Release the CPR Pedal to stop head section movement. The foot and knee sections will automatically move to a flat position.

SAFETY TIP:

⚠️ When the AC power is lost, only the head section will lower. The optional Treatment Surface will not max-inflate. CPR board effectiveness may be reduced.

⚠️ If the master lockout is enabled, it must be deactivated to allow other controls to stop the foot section.

NOTE: The Bed Up/Down Caregiver controls are usable when the CPR function is activated.

NOTE: To stop foot section movement simply press any other siderail control.

NOTE: The system will sound an audible reminder alarm periodically when the treatment surface has been in the CPR mode for 60 minutes.
OPTIONAL CAREGIVER CONTROLS

OPTIONAL GRAPHICAL CAREGIVER INTERFACE (GCI) CONTROL

The Graphical Caregiver Interface (GCI) Control is an optional feature located on an intermediate siderail at the caregiver control panel.

The Graphical Caregiver Interface module utilizes a graphic display to provide for full caregiver interaction. Menu choices appear on the right side of the screen. The left side of the screen provides unique information or instructions for the menu item highlighted on the right side of the screen.

Optional features that are present on the TotalCare Bed System will appear on the screen menus.

The caregiver interacts with the module by using three controls located at the bottom of the module: scroll Up arrow, ENTER, and scroll Down arrow.

Generally, to operate system functions, selections are made through the Home screen. Through the Home screen the caregiver can also quickly access standard system functions (i.e. Bed Exit alarm, weigh patient, change lbs/kg).

Specific system setup or configuration functions are selected through the Main Menu.

To Activate:

- Using the Up /Down controls, select the desired menu function and then press the ENTER control.
- Begin selection at either the home screen or the main menu.

NOTE After a menu selection has been made, and the system receives no further input, the module will eventually return to the Home Screen and the screen will turn off. To reactivate the Graphical Caregiver Interface, press any one of the three controls.

NOTE Master lockout will also turn off the screen.

HOME SCREEN

Change LBS/KGS

- From the home screen, scroll to Change LBS/KGS. Press ENTER.
- For additional scale functions, scroll to Main menu. Press ENTER.
- Scroll to Scale functions. Press ENTER.
- Follow the on-screen instructions.

Weigh Patient

- Center the patient on the surface.
- Raise the siderails.
- Ensure the TotalCare Bed System is clear of all obstructions: lines, tubing, walls, etc.
- From the Home screen, scroll to Weigh patient. Press ENTER.
- For additional Scale functions, scroll to Main menu. Press ENTER.
- Scroll to Scale functions. Press ENTER.
- Follow the on-screen instructions.

NOTE To obtain accurate patient weight, the head and foot sections must be flat to a maximum 30° articulation and the bed must be flat. Failure to place the bed within these limits will affect scale accuracy.
CAREGIVER CONTROLS

OPTIONAL CAREGIVER CONTROLS Continued

Bed Exit Alarm
To Activate:
- At the home screen, scroll to Bed exit alarm. Press ENTER. This activates the Bed Exit detection feature.
- The Bed Exit ON indicator comes on to indicate that the Bed Exit detection feature is activated.
- For additional Bed Exit alarm functions, scroll to Main menu. Press ENTER.
- Scroll to Config. Bed exit alarm. Press ENTER.
- Follow the on-screen instructions.

NOTE The Bed exit alarm will not activate if the patient is not on the bed.

To Deactivate:
- At the home screen, scroll to Bed exit alarm. Press ENTER. This deactivates the Bed Exit detection feature.
- The Bed Exit ON indicator goes off to indicate that the Bed Exit detection feature has been deactivated.

SAFETY TIPS:
△ The Bed Exit system is not intended as a substitute for good nursing practices. The Bed Exit system must be used in conjunction with a sound risk assessment and protocol.
△ The addition of a significant weight to the bed (i.e. a visitor sitting on the bed) may allow the patient to exit without the Bed Exit system alarming.

Normal Mattress Mode
- From the home screen, scroll to Normal mattress mode. Press ENTER. Follow the on-screen instructions.

NOTE See Treatment Surface for additional information.

Max-Inflate
- From the home screen, scroll to Max-inflate. Press ENTER.

NOTE See Treatment Surface for additional information.

NOTE The Bed exit alarm can also be activated through the Bed exit alarm panel located on the siderail opposite to the Graphical Caregiver Interface control.

To Activate:
- Press the Enable control.
- Press the Alarm ON-OFF control.

Panel options include Audible Alarm control.

To Activate:
- Press the Enable control.
- Press Sound control.

Alarm Delay control
To Activate:
- Press the Enable control.
- Press Alarm delay control.
- Continue to press Alarm delay control until LED indicates desired station (0, 2, 4, 6 seconds).
OPTIONAL CAREGIVER CONTROLS Continued

MAIN MENU SCREEN
At the home screen, scroll to GO TO Main Menu. Press ENTER. The Caregiver Interface control displays the main menu screen.

Scale Functions
- From the Main menu, scroll to Scale functions. Press ENTER. The module displays the scale menu.
- Scroll to desired function. Press Enter.

Example: Weigh Patient
- At the scale menu, scroll to Weigh patient. Press ENTER. The left side of the display screen becomes active.
- Follow the on-screen instructions.
- To return to the scale menu for another selection, press the Cancel/exit function.
- At the scale menu, scroll to applicable function. Press ENTER. Scale menu functions include Zero, Delayed Weigh, Tare List, Change Lbs/Kgs, Access Weight History, Add/Remove Items, or Set Weight.
- Follow the on-screen instructions for each selected function.

NOTE Scale accuracy: 1% of patient weight
Scale repeatability: *+/- .3% 70.5 to 175 lbs (32.0 to 79.4 kg),
*+/- 1% 175 to 400 lbs (79.4 to 181.4 kg)

Config. Bed Exit Alarm
- From the Main menu, scroll to Config. Bed exit alarm. Press ENTER.

Bed Exit Alarm Delay
- Scroll to Change delay. Press ENTER.
- On the left side of the screen, scroll to either a 0, 2, 4, or 6-second alarm delay. Press ENTER. The filled circle indicates the selected delay duration.

Bed Exit
- Scroll to Bed exit: On/Off. Press ENTER.
- Select either On to activate the Bed Exit detection feature or Off to cancel the Bed Exit functions.

Sound On/Off
- Scroll to Sound On/Off. Press ENTER.
- Select either On for active audible indication or Off to cancel audible indication. This only affects the audible alarm on the bed. A nurse call is still placed.

NOTE If the bed does not have nurse call capabilities, the audible alarm is always active.

SAFETY TIPS:
⚠️ The Bed Exit system is not intended as a substitute for good nursing practices. The Bed Exit system must be used in conjunction with a sound risk assessment and protocol.
⚠️ The activation of 2, 4, or 6-second delay of the Bed Exit alarm feature will reduce the effectiveness of the Bed Exit feature.

Bed Setup/Reset
The Bed setup/reset control clears the weight history.
- From the Main menu, scroll to Bed setup/reset. Press ENTER.

Set Time and Date
- Scroll to Set Time and Date. Press ENTER.
- Move the up and down arrows to change the time and date. Press ENTER.

Screen Contrast
- Scroll to Screen contrast. Press ENTER. An arrow is highlighted on the left side of the screen.
- Move the arrow up and down for lighter or darker settings. Press ENTER.
OPTIONAL CAREGIVER CONTROLS Continued

PRESET BED OPTIONS
The Graphical Caregiver Interface module is equipped with two preset system positions, Foot elevation and Preliminary tilt table. Both positions can be activated through the module.

FOOT ELEVATION
The preset Foot elevation feature raises the patient's feet while lowering the head position.
- From the Main menu, scroll to Preset bed positions. Press ENTER.
- Select Foot elevation and then press and hold ENTER until the patient is in the desired position.

PRELIMINARY TILT TABLE
The preset Preliminary tilt table feature will articulate the system to a maximum 20° Reverse Trendelenburg position.
- From the Main menu, scroll to Preset bed positions. Press ENTER.
- Select Preliminary tilt table and then press and hold ENTER until the patient is in the desired position.

MANUAL CONTROLS
Manual Foot Pedal
In the absence of AC power the optional manual control can be used to operate all bed system articulation functions.

To Activate:
- Press and hold the appropriate caregiver control while stepping down on the blue Manual Foot Pedal repeatedly. Continue until the desired position is achieved.

NOTE The following user panel controls require use of the bed systems Enable Control (see page 4, Enable Control): Foot Retraction, Foot Up/Down, Chair, Trendelenburg, and Reverse Trendelenburg controls.

NOTE It is not necessary to use the hydraulic foot pump for any down functions except for Foot Down. Activate the appropriate caregiver control to activate down functions.

NOTE With the Treatment Surface option there is a 30 second delay in activating manual foot pedal controls once AC power has been removed.
With the Patient Positioning Control option, patient controls are located on the inboard side of the intermediate siderails.

**NOTE** The patient controls do not operate when AC power is unavailable. If the communication cable is plugged in, a Nurse Call will be placed approximately 45 seconds after AC is removed.

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**NURSE CALL**

On systems equipped with the Nurse Call option, NURSE controls are located on both the inboard and outboard sides of the intermediate siderails. Operation of this feature is the same as that for the caregiver control previously described in this manual.

After transport, the Nurse Call system connections are to be made according to the applicable Hill-Rom service manual. Use only Hill-Rom communications cables to ensure proper operation of the Nurse Call system.

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**HEAD UP/DOWN CONTROL**

The patient can raise or lower the head section using the Head Up/Down controls. Operation of this feature is the same as that for the caregiver control previously described in this manual except head elevation is restricted to 55°.

**NOTE** When in chair mode, as indicated by an illuminated chair position indicator, the optional patient positioning controls are disabled.

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**KNEE UP/DOWN CONTROL**

The patient can raise or lower the knee section using the Knee Up/Down controls. Operation of this feature is the same as that for the caregiver control previously described in this manual.

**NOTE** When in chair mode, as indicated by an illuminated chair position indicator, the optional patient positioning controls are disabled.
VOLUME CONTROL
Speaker volume is controlled using the volume slide bar located below the entertainment controls on the inside of the intermediate siderails.

To Activate:
- Slide the volume control bar in the desired direction to either increase or decrease speaker volume.
STANDARD FEATURES

HEAD AND INTERMEDIATE SIDERAISLS
TotalCare Bed System siderails have been designed for one-step operation.

Siderails in the raised position are intended to make the patient aware of the proximity of the edge of the sleep surface.

Siderails in the down position, below the patient surface, facilitates a patient’s entry or exit from the bed system. This design feature also facilitates unobstructed access to the patient.

To Raise:
- To raise a siderail, pull the siderail up until it latches into the locked position.

To Lower:
- To lower a siderail, grasp the release handle and pull out. The siderail will automatically lower and tuck under the sleep surface perimeter.

SAFETY TIPS:
⚠️ Siderails are not intended to be used as restraint devices. The appropriate medical personnel should determine the level of restraint necessary to ensure that a patient will remain safely in the bed system.

⚠️ Patients should be checked periodically to ensure correct use of siderails and patient placement on the system.

HEADBOARD
The headboard is located at the head end of the system. It attaches to the head end of the frame and it articulates with the frame during system articulation.

The headboard can be removed for increased access to the patient’s head. It also can be used as a back board during emergency CPR procedures.

A caregiver can quickly remove or attach the headboard in a single step without the use of tools.

To Remove/Install:
- Removal - Grasp the headboard and lift straight up.
- Installation - Position the headboard sockets over the pins on the frame. Then lower the headboard onto the pins. Push the headboard down until the bottom rests on the frame.
FEAT URES

FOOTBOARD
The footboard is located at the foot end of the system. It attaches to the articulating foot section and it remains perpendicular to the surface of the foot section at all times. The footboard provides patient protection during transport and room docking.

A caregiver can quickly remove or attach the footboard in a single step without the use of tools.

To Remove/Install:
- Removal - Grasp the handles on the footboard and lift straight up.
- Installation - Insert the pins of the footboard into the blue sockets in the articulating frame. Push the footboard down until it rests on the deck.

STANDARD CASTERS
The TotalCare Bed System comes equipped with 5" (12.7 cm) casters. The casters are integral components of the brake and steer system.

TRANSPORT HANDLES
Transport handles are provided at the head end of the TotalCare Bed System. The handles provide the caregiver easy-to-grasp grips for steering and positioning the bed.

To Use:
- Grasp the handles and rotate them from their stored position.
- When the handles drop and lock into position they are ready for use.

To Store:
- Grasp the handles and lift.
- Rotate the handles to their stored position. The handles will drop slightly when they have reached the stored position.

SAFETY TIP:
Δ Do not push or pull the TotalCare Bed System by IV poles or other equipment. Use the transport handles or footboard.

EQUIPMENT SOCKETS
Equipment sockets are provided at each corner of the deck for equipment such as IV poles and infusion support.

SAFETY TIPS:
Δ The equipment sockets are not to be used for overhead fracture frame equipment.
Δ Before moving the TotalCare Bed System into any of the chair positions, remove all equipment from the sockets at the foot end of the articulating deck.
Δ While articulating into a Trendelenburg position, ensure adequate headwall clearance.
SAFETY AND INFORMATION INDICATORS
Safety and Information Indicators provide the caregiver with visual and audio indication regarding Brake Status, Chair Position, Remove Ft board Alarm, AC Power, Bed Exit Alarm, and Battery Status.

Brake Not Set
If the brake is not engaged, the brake not set indicator flashes.

If the system is in the chair or chair egress positions and the brake is not engaged, the brake not set indicator will flash and an audible alarm will sound.

Chair Position
The Chair position indicator comes on when the system is in the chair or chair egress position.

If the bed system is in the chair or chair egress positions and the brake is not engaged, the chair indicator will flash and an audible alarm will sound. If the bed system is in the chair egress position and the footboard is installed, the chair indicator will flash and an alarm will sound.

Remove Ft Board
If the bed system is in the chair egress position and the footboard is installed, the remove ft board indicator will flash and an audible alarm will sound.

Unplugged AC
The Unplugged AC indicator flashes when the AC power cord is disconnected and a battery is present.

Bed Exit (Optional)
The Bed exit ON indicator comes on when the Bed Exit detection feature has been activated.

Battery Power (Manual Control Option)
Charged – If the system is equipped with the manual control option, the Charged indicator comes on when the battery is charged.

Low – If the system is equipped with the manual control option, the Low indicator flashes when the battery is low. An intermittent audible tone will sound every two minutes when the battery reaches low condition and AC is unplugged.

Off – If the battery is too low to operate the bed.

SAFETY TIP:
\(\Delta\) Although a fully-charged battery is preferred, transport may be done when the battery charge is low. The bed should be reconnected to AC power as soon as possible.

NOTE: If the Battery Indicator changes from Charged to Low consistently within four hours of being disconnected from AC power, the battery should be replaced.

Service Required
The Service required indicator flashes when the system detects a malfunction. Refer to service manual.

LINE-OF-SITE TRENDELENBURG ANGLE INDICATOR
The Line-of-Site Trendelenburg angle indicator mechanically indicates up to 15° of Trendelenburg and 15° of Reverse Trendelenburg in 5° increments. The degree number at which the indicator ball rests is the correct Trendelenburg angle with respect to the floor.
FEATURES

PATIENT POSITION LOCATOR
A patient locator has been molded into the intermediate siderails for the purpose of indicating the correct position of the patient’s hips while on the bed system. The locators are on the inside of the intermediate siderail just below the Head Up/Down controls on the patient control panel.

Proper placement of the patient increases the effectiveness of the Shearless Pivot™ frame and minimizes gravitation of the patient to the foot end of the bed when raising the head section.

Traditional Bed
Patient placement towards the head end of the bed

TotalCare Bed
Patient position locator indicates correct position of patient’s hips

LINE-OF-SITE HEAD ANGLE INDICATOR
The head angle indicators mechanically indicate the angle of the head section from -15° to +80° (at which the indicator ball rests) with respect to the floor. The head siderails contain head angle indicators on their outboard sides.

WALLGUARD BUMPER SYSTEM
The WallGuard™ bumper system protects the perimeter of the TotalCare Bed System when it is being moved or transported.

Roller bumpers protect the headwall system when the system is docked in the patient room.

IV SOCKETS
The TotalCare Bed System comes with six standard IV sockets. Four are located at the head end and two are located at the corners of the foot end.
DRAINAGE BAG HOLDERS
The TotalCare Bed System is equipped with six drainage bag holders, four centrally located at the side of the bed and two at the foot. Drainage bags should be placed on these holders. The holders accommodate any combination of the following drainage devices:
- Fecal incontinence bag
- 250/2000 ml Foley collection bag
- PLEUR-EVAC on foot-end holders (during transport only)

NOTE When the bed system is docked, place the PLEUR-EVAC or other chest drainage devices on the floor clear of the bed system to allow space for articulation.

NOTE The primary drainage bag holders are not located on the weigh frame. Secondary drainage bag holders, located on the sides of the foot section, are located on the weigh frame.

SAFETY TIP:
△ Do not tie restraints to the primary drainage bag holders.

PATIENT RESTRAINT INTERFACE
The TotalCare Bed System facilitates vest, wrist, waist, and ankle restraints.

SAFETY TIPS:
△ Patient restraints are not intended as substitutes for good nursing practices.
△ Restraints must be attached to the articulating sections of the system at the proper attachment points to prevent injury to the patient.
△ Never use ankle restraints in a chair position or when foot section is retracted.
A sound risk assessment and protocol is necessary to determine the appropriate surface for the patient's condition. Sleep surface impermeability and pressure relieving capabilities of the Treatment Surface could be affected by needle sticks or other bladder punctures. Caregivers should be instructed to AVOID bladder punctures caused by improper use of X-ray Cassette Holders and/or NEEDLE STICKS. The sleep surface should be regularly inspected for such damage.

SAFETY TIPS:
△ A sound risk assessment and protocol is necessary to determine the appropriate surface for the patient's condition.

TREATMENT SURFACE

TREATMENT MODES

Normal Treatment Mode
The normal mode of the optional Treatment Surface provides continuous full-body pressure relief management. The surface provides pressure relief management by automatically adjusting the air system to accommodate changes in weight distribution. Additional pressure relief can be provided in the heel section (see Heel suspension mode).

 Loose fitting sheets (preferably knitted) must be used for correct operation of the sleep surface.

The normal treatment mode is always active unless:
• Max-inflate has been activated
• AC power is not available or power failure has occurred

SAFETY TIPS:
△ A sound risk assessment and protocol is necessary to determine the appropriate surface for the patient's condition.
△ Sleep surface impermeability and pressure relieving capabilities of the Treatment Surface could be affected by needle sticks or other bladder punctures. Caregivers should be instructed to AVOID bladder punctures caused by improper use of X-ray Cassette Holders and/or NEEDLE STICKS.

The sleep surface should be regularly inspected for such damage.
Refer to the Mattress control panel to determine the active Treatment Surface mode. An illuminated control switch indicator will indicate the active mode.

NOTE The optional Treatment Surface is not a substitute for good nursing practices. The treatment mode should be used in conjunction with good assessment and protocol.

To Activate:
- Press the Enable control.
- Press the Normal control on the Mattress control panel.

SAFETY TIPS:
△ Patients with body weight or length near the recommended limits (see page 2) should be monitored more frequently for desired results. Lower the head section to optimize pressure performance if necessary.
△ If a patient is at risk for heel breakdown, use the Heel suspension mode.

Max-Inflate Mode
The Max-Inflate mode maximizes the firmness of the primary section of the patient surface. This assists in patient surface-to-surface transfers and/or repositioning. If the bed system is not equipped with a Graphical Caregiver Interface (GCI) Control, the Max-Inflate mode can be activated through the optional Mattress control panel.

NOTE The Treatment Surface will automatically exit the Max-Inflate mode after a period of 30 minutes.

To Activate:
- Press the Enable control.
- Press the Max-Inflate control on the Mattress control panel.

Heel Suspension Mode
The Treatment Surface mode also provides optimal pressure relief for the patient’s heels. This mode is active when the foot section is retracted and the bed is not in chair or chair egress position. The patient’s feet must always be positioned against the footboard for proper heel relief. When the foot section has been retracted the heel suspension indicator will illuminate. Heel relief can only be activated using the Foot Retract control.

To Activate:
- Press the Enable control.
- Press the Foot Retract control on the Point-of-Care Siderail Controls.

SAFETY TIPS:
△ The caregiver should personally assess the patient, and reposition the patient’s feet to insure that suspension of the heels is optimized.
△ Patients with a height of 54” (137.2 cm) or less may not be supported with the foot section fully retracted. Move the patient down in bed until the patient’s feet contact the footboard.
OPTIONAL FEATURES

ALARM SILENCE CONTROL
In the event of excessive air loss, pressure changes, or air system failure, the optional Treatment Surface will initiate a continuous audible alarm. The Service Required Indicator located on the caregiver control panel will also illuminate providing the caregiver with both a visual and audible indication of a potentially hazardous condition.

SAFETY TIP:
△ Hospital service personnel should be contacted immediately to assess and, if necessary, correct the failure mode.

To Silence the Alarm:
• Press the Enable Control
• Press the Alarm Silence Control

Once activated, the Alarm Silence control will silence the audible alarm for eight hours. Continuous patient assessment and protocol is necessary to determine if the patient should be removed from the bed. The Service Required Indicator will remain illuminated until the failure has been corrected. The audible alarm will re-activate after eight hours until failure mode has been corrected.

SAFETY TIP:
△ Excessive mattress pressure changes or air system failures could impact the pressure-relieving capability of the Treatment Surface. The Alarm Silence feature is not a substitute for good caregiving practice and the patient should be constantly monitored and, if necessary, removed from the bed.

FLUOROSCOPY OPTION
The fluoroscopy option provides a radiolucent head section that measures 23"L x 22"W (58.4 cm x 55.9 cm).

The radiolucent head section allows a caregiver to perform fluoroscopy of patients from head to waist when the patient is lying flat. Fluoroscopy of the patient’s head and chest cavity is possible when the head section angle is at 75°.

X-RAY CASSETTE SLEEVE
(LARGE 20" x 17" - 50.8 cm x 43.2 cm)
(SMALL 19" x 17" - 48.3 cm x 43.2 cm)
The optional X-Ray Cassette Sleeve improves placement of x-ray film when used in conjunction with the optional max-inflate mode. The x-ray cassette sleeve is available for use on a TotalCare Bed System with Fluoroscopy Option.
OPTIONAL FEATURES

PERMANENT IV POLES OPTION
The Permanent IV Poles option consists of two IV poles that support up to two IV pumps plus bags. The IV poles are attached to the frame near the corners of the headboard. Up to 40 lbs. (18.1 kg) of total weight can be supported per pole.

To Deploy:
- Lift the IV pole from its stored position from behind the headboard.
- Make sure that the pole drops and locks into position.
- Raise the upper section of the pole to the desired height. The pole is ready for use.

To Store:
- Grasp and hold the upper section of the pole. Push the upper collar down and lower the upper pole section.
- Lift the lower section of the pole up and rotate the pole down to the stored position between the transport handles and the headboard. The poles should rest in the storage slots provided on the frame.

SAFETY TIPS:
△ Do not exceed 40 lb. (18.1 kg) IV pole weight capacity.
△ Do not mount infusion pumps on the lower section of an IV pole. Interference with head section articulation could result.

OPTIONAL 5” (12.7 cm) DUAL WHEEL CASTERS
These casters are a dual wheel design providing a smooth rolling action.

ACCESSORY AC RECEPTACLE OPTION (120V VERSION ONLY)
The accessory receptacle option is a convenient source of AC power for accessory devices. It is located at the foot end of the base frame. When AC power is present at the receptacle, the indicator light on the receptacle will illuminate.

The accessory receptacle has a surge suppression feature. If the receptacle indicator light will not illuminate or a continuous audible beep occurs while the receptacle power cord is plugged in, the accessory receptacle is no longer providing electrical surge protection. Replace the receptacle to restore surge protection.

The accessory receptacle provides up to 12 amps of AC current. TotalCare Bed Systems that have this option are equipped with two power cords, one for the accessory receptacle and one for the TotalCare Bed System. The receptacle is isolated from the bed system’s AC supply voltage power cord.

The accessory outlet is not intended for life support equipment.

SAFETY TIP:
△ Do not plug both power cords into the same wall receptacle. Plug the power cords into different receptacles on separate circuits.
ACCESSORIES

Accessories may be added or removed at the point of patient care by a caregiver without the use of tools. Accessories are interchangeable within a product configuration.

INFUSION SUPPORT SYSTEM
The Infusion Support System accessory consists of a movable and adjustable IV pole. The pole will support IV pumps or bags in a vertical orientation and raises or lowers the pumps or bags with respect to the system frame.

The head end of the system has attaching points for two mobile infusion support systems. Each Infusion Support System can support one infusion pump plus two liters of intravenous solution.

SAFETY TIPS:
△ Do not exceed 40 lb. (18.1 kg) IV pole weight capacity.
△ Do not mount infusion pumps on the lower section of an IV pole. Interference with head section articulation could result.
△ When lowering the upper section of an IV pole, always grasp and hold the upper section of the pole before pulling the release knob.

OPTIONAL INFUSION SUPPORT SYSTEM BRACKET
When using the ISS Off-Set Bar (pictured) it is necessary to utilize the 1\(\frac{1}{16}\)" Adapter Bracket.

VERTICAL OXYGEN TANK HOLDER
The Oxygen Tank Holder accessory attaches to the head end of the articulating frame in a vertical position. The Oxygen Tank Holder accommodates one "E" size oxygen tank with a regulator. The mounting points are located to allow the affixed oxygen tank holders to pivot.

To Install:
• Install the mounting bar vertically into a mounting socket at the head end of the articulating frame.
• Place the tank in the holder and tighten the holder thumbscrew. The thumbscrew prevents the oxygen tank from rotating in the holder.

To Remove:
• Loosen the thumbscrew that holds the tank secure in the holder.
• Lift the tank out of the holder.
• Lift up on the tank holder and remove it from the mounting sockets.

TRANSDUCER HOLDER
Use of the Infusion Support System (ISS) is required to use the Transducer Holder.
ACCESSORIES

TRANSPORT SHELF/CHARTING TABLE
The Transport Shelf/Charting Table option provides a platform for small equipment during patient transfer and also serves as a writing surface during patient charting. The shelf has a vertical load capacity of 45 lbs. (20.4 kg).

With the shelf stowed, the Transport Shelf/Charting Table option performs all of the functions of the standard footboard.

A caregiver can quickly remove or install the Transport Shelf/Charting Table in a single step.

To Deploy:
• Grasp the shelf and rotate it to a horizontal position above the foot section of the sleep surface.

To Store:
• Remove all items and equipment from the shelf.
• Grasp the shelf and rotate it away from the sleep surface to the vertical position.

Removal/Installation:
• To remove the Transport Shelf/Charting Table, grasp the handles on the footboard and lift straight up.
• To replace the Transport Shelf/Charting Table, insert the pins of the Transport Shelf/Charting Table into the sockets in the articulating foot section. Push the Transport Shelf/Charting Table down until it rests on the articulating foot section.

NOTE During normal operation the shelf will be at a slight angle.

SAFETY TIPS:
△ Equipment placed on the shelf must be secured with straps.
△ Do not lower the foot section while the shelf is in use, equipment could fall.
△ Do not exceed the 45 lb. (20.4 kg) rated capacity of the transport shelf.

SEAT BELT
The Seat Belt accessory is adjustable which allows the caregiver to adjust the Seat Belt to the size of the patient. Holes, located on both sides of the system near the center, accommodate installation of the Seat Belt.

SAFETY TIP:
△ Do not use the Seat Belt as a restraint device. The Seat Belt is only to maintain correct patient positioning in chair position.
△ Do not articulate head section with patient buckled in Seat Belt.

OPTIONAL REMOVABLE IV POLE
The IV pole is a removable, telescopic pole that installs at any of the four corners of the system in the holes provided.

To install the standard IV pole, insert and rotate a quarter-turn clockwise. Removal is opposite of installation.

SAFETY TIPS:
△ Do not exceed 25 lb. (11.3 kg) IV pole weight capacity.
△ When lowering the upper section of an IV pole, always grasp and hold the upper section of the pole before pulling the release knob.

NOTE Added height recommended for gravity drain applications.
Devices

Fracture Frame Adapter Brackets

Installation
1. The mount holes for the adapter brackets are located on the weigh frame, under the head section and the thigh section.
2. Raise the head section and the thigh section about 20°.
3. Slide the mount plate of the adapter bracket over the tube of the weigh frame.
4. Align the square holes in the adapter bracket mount plate with the round holes in the weigh frame.
5. Insert the carriage bolts from the top of the weigh frame, and tighten the wing nut on the bottom of the weigh frame. See the photos of the installed adapter brackets below.
6. Repeat steps 2-5 at all four corners of the bed.
7. Install the fracture frame following the manufacturer’s instructions.

Safety Tips:
- A fracture frame is not to be used with the TotalCare bed without the use of the fracture frame adapter brackets. Use of a fracture frame without the use of the fracture frame adapter brackets may result in structural failure of the bed and/or the traction equipment, loss of egress chair capability, and scale inaccuracy.
- When a fracture frame is used for mounting Buck’s traction, the knee controls should be locked out.
- When a fracture frame is used for cervical traction, the head and knee controls should be locked out.
- To avoid injury, the bed should not be operated until all persons are clear of mechanisms and the fracture frame adapter brackets.
- Do not use the fracture frame to push, pull, or steer the bed. Use the transport handles or the footboard.
- After the fracture frame is installed, check the thigh section for proper, unobstructed movement, and check the siderails to ensure latching in the up position, and proper operation.
- Refer to the fracture frame equipment manufacturer’s user’s manual for proper installation and setup of the fracture frame.
- Fracture frames used with these brackets are to be no taller than 54 inches (137.2 cm) from the top of the brackets.
- Fracture frames used with the TotalCare bed are not to extend beyond the head end, foot end, or sides of the bed.
- Safe working load to be 300 lbs. (136.1 kg) with the bed in normal bed positions and 200 lbs. (90.7 kg) with the bed in chair position as described in the User Manual, or that specified by the fracture frame manufacturer, whichever is lower.
SAFETY NOTES

BED POSITIONS
Always leave the bed system in the low position when a patient is unattended.

SIDERAILS
Siderails are not intended to be used as restraint devices. Medical personnel should determine the appropriate use of siderails and ensure patient safety.
Observe lines closely during articulations. Always use good line management techniques, particularly as the head section rises.

BRAKES
Always set the brakes when the bed system is occupied except during patient transport. Push and pull the bed system sideways to ensure that the brakes have engaged.

FLUIDS
When massive fluid spills occur on system controls, immediately:
- Unplug the system from its power source.
- Take care of the patient.
- Clean the fluid spill from the system.
- Have maintenance inspect the system completely.
- Do not put the system back into service until it is thoroughly dry, tested and determined safe to operate.

ELECTRICAL SAFETY
Do not plug the system power cord and accessory power cords into the same duplex receptacle. To prevent overloading one supply circuit, plug the power cords into receptacles on separate circuits.

Take care to prevent damage to AC power cords. An electrical shock hazard exists. When a system is being cleaned it should be unplugged from its power source.

Establish policies and procedures to train and educate your staff on the risks associated with electrical equipment.

Significant fluid spills onto the system electronics can result in a hazard. If such a spill occurs, the system should be unplugged, removed from service, thoroughly cleaned, allowed to completely dry, and checked by service personnel.

LOCKOUT CONTROLS (HI-LO, HEAD, KNEE, MASTER)
Activate the lockout controls on the Point-of-Care Siderail Controls to restrict a patient or visitor from operating the applicable patient controls.

PARTS AND ACCESSORIES
Use only Hill-Rom parts and accessories. Do not modify the bed system without authorization from Hill-Rom.

OPERATING BED/SURFACE PRECAUTIONS
Do not use the electric system/surface configuration in the presence of flammable gas or vapors.

Use oxygen administering equipment of the nasal, mask, or ventilator type only. Not to be used with oxygen tents.

TRANSPORT MODE
The TotalCare Bed System is intended to be used to transport patients with the foot end of the system forward. Prior to transport, properly store the power cords to prevent tripping. Take care to prevent damage to AC power cords. An electrical shock Hazard exists. Use only transport handles or footboard to move the bed during transport.

Make sure that the patient, equipment, and all lines are securely placed within the perimeter of the system for intra-hospital transport. The TotalCare Bed System is not intended to be used to transport a patient in the recline chair, chair, or chair egress modes.

If equipped with the Transport Shelf/Charting Table, secure all of the equipment with the straps provided and observe the 45 lbs. (20.4 kg) weight limit. Keep the Transport Shelf/Charting Table accessory horizontal during patient transport. This requires that the foot section be in the horizontal position during patient transport.

Fully extended IV poles could impact doorways or ceiling fixtures. Lower poles prior to patient transport.

Ensure Nurse Call system cables are properly connected after transport.

SAFETY TIP:
- Although a fully-charged battery is preferred, transport may be done when the battery charge is low. The bed should be reconnected to AC power to charge as soon as possible.

SLEEP SURFACE/MATTRESS
Do not use mattresses, mattress overlays, mattress replacements, or specialty mattress products that have not been designed by Hill-Rom for the TotalCare Bed System. Use of surface products other than those designed for the TotalCare Bed System could substantially reduce the effectiveness of the safety features incorporated into the system.

- Sleep surface impermeability and pressure relieving capabilities of the Treatment Surface could be affected by needle sticks or other bladder punctures. Caregivers should be instructed to AVOID bladder punctures caused by improper use of X-ray Cassette Holders and/or NEEDLE STICKS.

The sleep surface should be regularly inspected for such damage.
SAFETY NOTES

FLAMMABILITY
Reduce the possibility of fires by observing fire prevention rules and regulations.
The sleep surface mattress meets the following specifications:

BED ARTICULATIONS
Do not operate system controls until all persons and equipment are clear of mechanisms. To stop a function: release the control, and/or activate the opposite function, and/or immediately unplug the power cord.
Observe lines closely during articulations. Always use good line management techniques, particularly as the head section rises.

CHAIR POSITIONING
Always set the brakes before placing the system in a chair position. Observe lines closely during head up/down and chair articulation.

VISITOR NOTIFICATION
Instruct patient visitors not to attempt operation of caregiver controls. They may assist the patient with patient controls.

PREVENTIVE MAINTENANCE
Perform annual preventive maintenance procedures to ensure all TotalCare Bed System components are functioning as originally designed. Pay particular attention to safety features, including but not limited to:
- Siderail latching mechanisms
- Caster braking systems
- Electrical system components
- Electrical power cords for fraying, damage, and proper grounding
- Current leakage at the Nurse Call system communication connections
- All controls return to off or neutral position when released
- Controls or cabling entanglement in system mechanisms or siderails
- Proper operation of the lockout controls
- Integrity of sleep surface ticking
- Operation and accuracy of the optional scale system

Visually inspect the inside of the siderails for fluids or other infection hazards. Clean as necessary.

Replace the battery if any of the following conditions exist:
- The battery indicator does not light within three (3) minutes of bed connection to AC mains
- The battery indicator does not stop flashing (low condition) within twelve (12) hours of bed connection to AC mains
- Successive transports of four (4) hours or less cause the battery to discharge to low condition as indicated by a flashing battery indicator.

NOTE A battery is present on any TotalCare System with the nurse call option, Treatment Surface option, or manual control option.

NOTE Follow instructions on battery for proper disposal or recycling.

CLASSIFICATIONS
Type of protection against electric shock: Class I
Degree of protection against electric shock: Type B
Degree of protection against harmful ingress of water: IPX0
Intermittent operation: 3 minutes on/30 minutes off
GENERAL
SAFETY TIPS:
△ Unplug the system from its power source before cleaning or servicing. An electrical shock hazard exists.
△ Do not expose the unit to excessive moisture or equipment damage could occur.
△ Always follow established hospital protocol for cleaning body fluids from bed surfaces.

NOTE Use only approved cleaners, solvents, or detergents. Equipment damage could occur.

General Cleaning
Clean the unit with a lightly dampened cloth and ordinary disinfectants. Do not use excessive liquid. While cleaning, always check for and report any damage to the product.

Steam Cleaning
Do not use any steam cleaning device on the TotalCare Bed System. Excessive moisture can damage mechanisms in this unit.

Hard To Clean Spots
To remove difficult spots or stains, use standard household cleaners and a soft bristle brush. To loosen heavy, dried-on soil or excreta, you may first need to saturate the spot.

Disinfection
Dilute disinfectants and germicides as specified on the manufacturer’s label.

CLEANING SHORT STAY AND TREATMENT SURFACES
Additional instruction for cleaning the Short Stay or Treatment Surfaces.

NOTE Never remove the Treatment Surface without disconnecting hoses from the manifold assembly.
• Press Max-Inflate prior to cleaning.
• Unplug the system from its power source.
• To clean directly beneath the sleeping surface at the head end, lift the head end of the mattress.
• To clean directly beneath the sleeping surface at the foot end, lift the foot end of the mattress.

To remove the sleep surface mattress:
• Make sure that the seat belt is unlatched.
• Raise the head section for easier access to the air hose connectors on the manifold assembly.
• Disconnect the quick-disconnect air hose(s). Air hoses are color-coded for proper installation.
• To remove the sleep surface, lift up on the foot and head ends of the sleep surface until the magnets inside the ticking release the frame. Slide the sleep surface off of the articulating deck.

To replace the sleep surface mattress, do the following:
• Return the patient deck to the level position and fully extend the foot section.
• Position the sleep surface on the system frame with air hoses pointing towards the head of the system.
• Connect applicable quick-disconnect connectors at the system head end to the manifold assembly. Match the color of an air hose with the same-colored connector.
• Insure that the foot section of the sleep surface is extended completely to the foot board.

CLEANING MEDICAL FLUID SPILLS
Fluid spills should be wiped up as soon as possible. Always disconnect the product from AC mains before cleaning up major fluid spills. Some fluids used in the hospital environment, such as betadine and zinc oxide creams, can cause permanent stains.
Temporary stains can be removed by wiping vigorously with a lightly-dampened sponge or rag and an approved cleaner/disinfectant solution.

CLEANING BLOOD AND EXCRETA
If possible, wipe up excess blood and excreta when wet, since the cleaning process is more difficult after these substances dry on the surface.

DAMAGE/REPAIR SURFACE TICKING
Tears, holes, and cracks in the sleep surface ticking will compromise surface impermeability and infection resistance. Repairs to the ticking are not recommended.

SAFETY TIP:
△ Surfaces should be periodically checked to assure that ticking impermeability is not compromised.