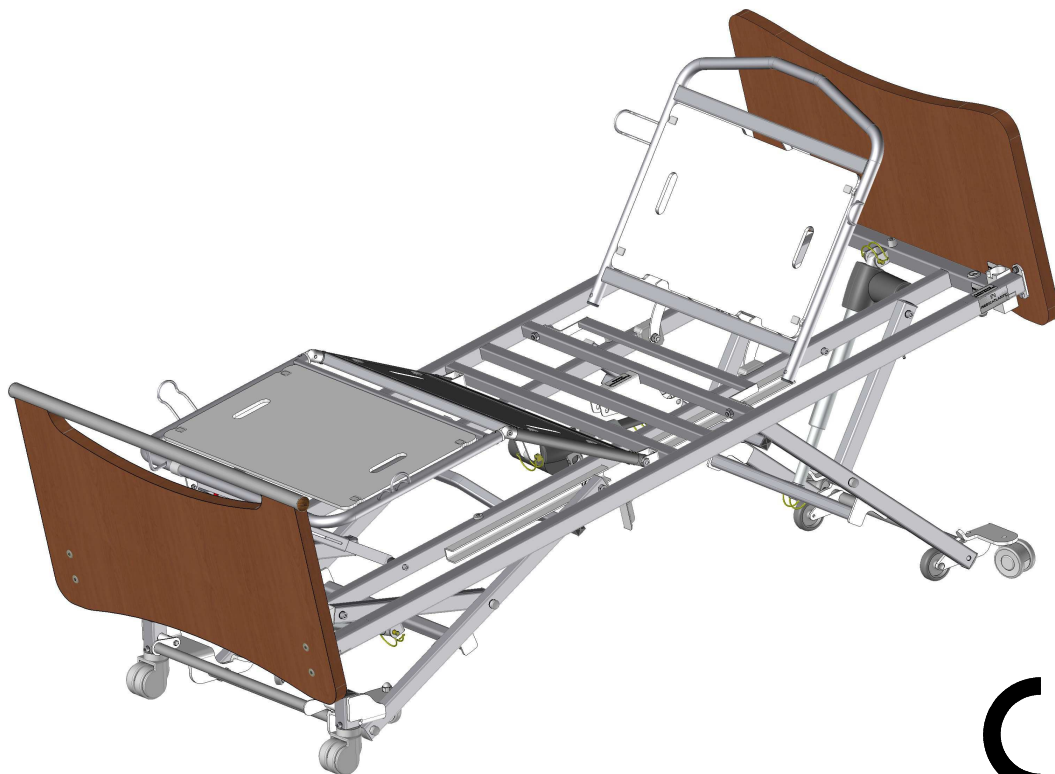



MÉDICATLANTIC

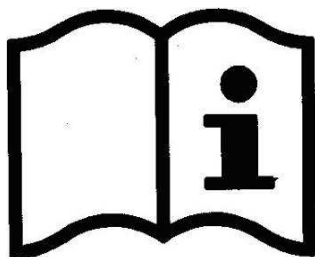
WINCARE
g r o u p

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FAX : 02-51-98-59-07
Email : info@medicatlantique.fr
Site Internet : <http://www.winnicare.fr>

AERYS II



CE



IAE2L08/11



1. <u>TRANSPORT AND STORAGE</u>	3
2. <u>BED ENVIRONMENT CONDITIONS</u>	3
3. <u>GENERAL USE</u>	3
3.1. <u>Precautions for use</u>	3
3.2. <u>First use</u>	5
3.3. <u>Use</u>	6
3.3.1. <u>Easy Move boards</u>	6
3.3.2. <u>Metal side rails</u>	7
3.3.3. <u>Wooden barriers</u>	8
3.3.4. <u>Angled lifting pole and IV stand</u>	8
3.3.5. <u>Separate braking</u>	9
3.3.6. <u>Remote control</u>	9
3.3.7. <u>Leg rest</u>	10
3.4. <u>Technical characteristics</u>	10
3.4.1. <u>Electrical data</u>	10
3.4.2. <u>Equipotentiality</u>	12
3.5. <u>Putting the back rest flat</u>	13
➤ <u>If the bed is fitted with an emergency release for the back rest (Cardio Pulmonary Resuscitation)</u>	13
4. <u>MAINTENANCE</u>	14
4.1. <u>Instructions for dismantling the motors</u>	14
4.2. <u>Maintenance</u>	14
4.3. <u>Cleaning and disinfection</u>	17
4.4. <u>Warranties</u>	19
4.5. <u>Identification</u>	19
5. <u>CONDITIONS FOR SCRAPPING</u>	19
6. <u>Easy Move BED BOARDS - 90cm WIDTH - COMPATIBLE</u>	20
6.1. <u>Bed board references for application environments 1 and 2</u>	20
7. <u>COMPATIBLE ACCESSORIES</u>	21
8. <u>SPECIFIC USE</u>	23
8.1. <u>Purpose of bed</u>	23
8.2. <u>General description</u>	23
8.3. <u>Specific precautions for use</u>	23
8.4. <u>Electrical connection diagram</u>	23
8.5. <u>AERYS specific use of remote control</u>	24
8.5.1. <u>Custom Variable height position</u>	24
8.5.2. <u>Option U(without back slant/forward-slant)</u>	24
8.5.3. <u>Standard version (without options)</u>	24
8.5.4. <u>Option I (Remote control Infrared)</u>	24
8.5.5. <u>Option R (Mobile carer control ACO)</u>	25
8.5.6. <u>Option R (Flexible arm control)</u>	25
8.6. <u>Battery (option)</u>	26
8.7. <u>Use of specific elements</u>	27
8.7.1. <u>Centralised breaking</u>	27
8.7.2. <u>Lateral head displacement</u>	27
8.7.3. <u>Trendelenburg / back tilt</u>	28
8.7.4. <u>Wall stop without breaking</u>	29
8.7.5. <u>Wall stop with cross slide</u>	29
8.7.6. <u>In case of malfunction</u>	29
8.7.7. <u>Electrical system initialization(all options without side shift option)</u>	29
8.7.8. <u>Electrical system initialization(Only optional side shift)</u>	29
8.8. <u>Specific technical data</u>	29
8.8.1. <u>Noise</u>	29
8.8.2. <u>Weight</u>	29
8.8.3. <u>Dimensional</u>	30

Dear Sir/Madam,

You have acquired a MEDICATLANTIC medical bed equipped with its accessories, and we thank you for your custom.

Our beds and their accessories are designed and manufactured in compliance with the essential requirements of the European Directive 93/42/EEC and 2007/47/EEC.

They are tested in conformity with standard EN 60601-2-52 (2010) in their commercial configurations, including the boards and accessories that we manufacture, so as to ensure you maximum safety and performance.

As a result, maintenance of the contracted good's warranty depends on compliance with the conditions for use recommended by MEDICATLANTIC and the use of original accessories, which also guarantees you safe use of the medical bed and its accessories.

1. TRANSPORT AND STORAGE

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

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

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

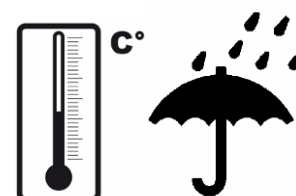


It is strictly forbidden to stack packages weighing over 60kg/m², whatever position they are in.
Before transporting or dismantling the bed, make sure the back and leg rests are fixed to the frame of the bed base.

2. BED ENVIRONMENT CONDITIONS

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

Atmospheric pressure between 700hPa and 1060hPa



Observe the specified environmental conditions

3. GENERAL USE

3.1. Precautions for use

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



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

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

The bed is a medical device and must not be modified under any circumstances. You must ensure its traceability, including that of the boards and its accessories.

If you assemble different types of medical devices, you must conduct a risk analysis and make the **CE** declaration.

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

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

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

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

After each use and while care is being administered to the patient, the brakes must be activated.

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

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

Do not sit down on the side of the back rest or leg rest if this is not flat.

In the case of a prolonged more than 50 °tilt bust semi-sitting position, it is recommended to vary the position of the person in bed every 2 hours.

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

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

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

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

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

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

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

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

If repairs are required, the person in charge of maintenance must be contacted.

Moreover, the telephone number of the company to be contacted for any repairs is given in this document.

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

For greater safety, the side rails can be adapted (see accessories).

To assist patient mobility, it is possible to fit a Mobility Aid System (S.A.M.™).

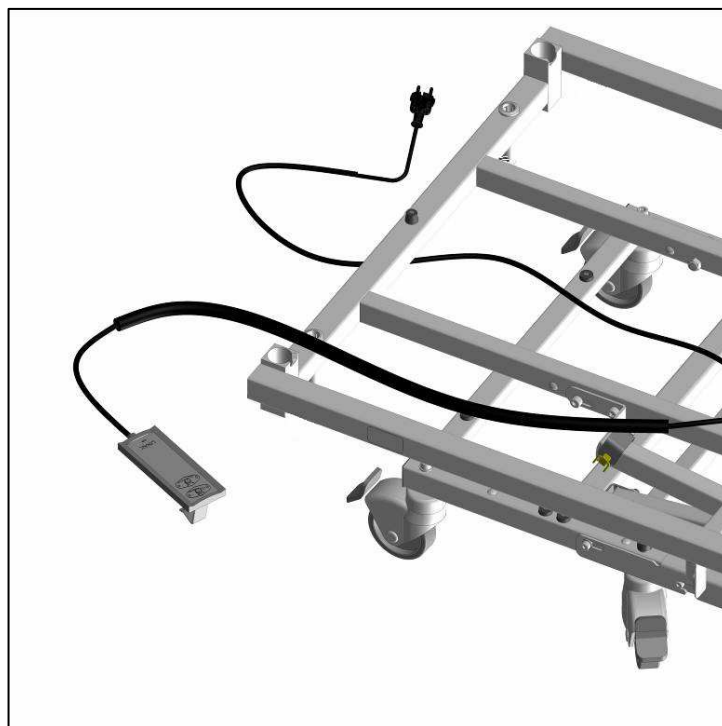
The cleaning instructions recommended must be complied with.

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

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

3.2. First use

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

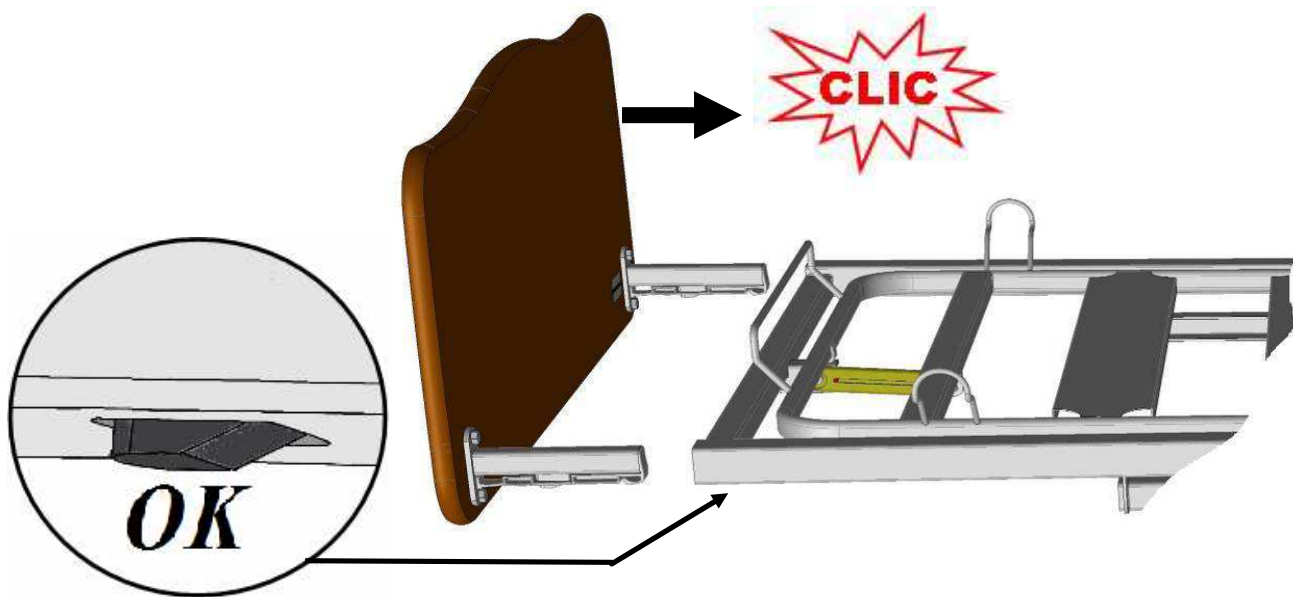


- Check that the bed operates properly after installing it in accordance with the check-list appended in this document. (Test all of its functions)
 - Users must be trained in how to use the equipment.
- Inform the patient and his visitors of the safety instructions to be observed.

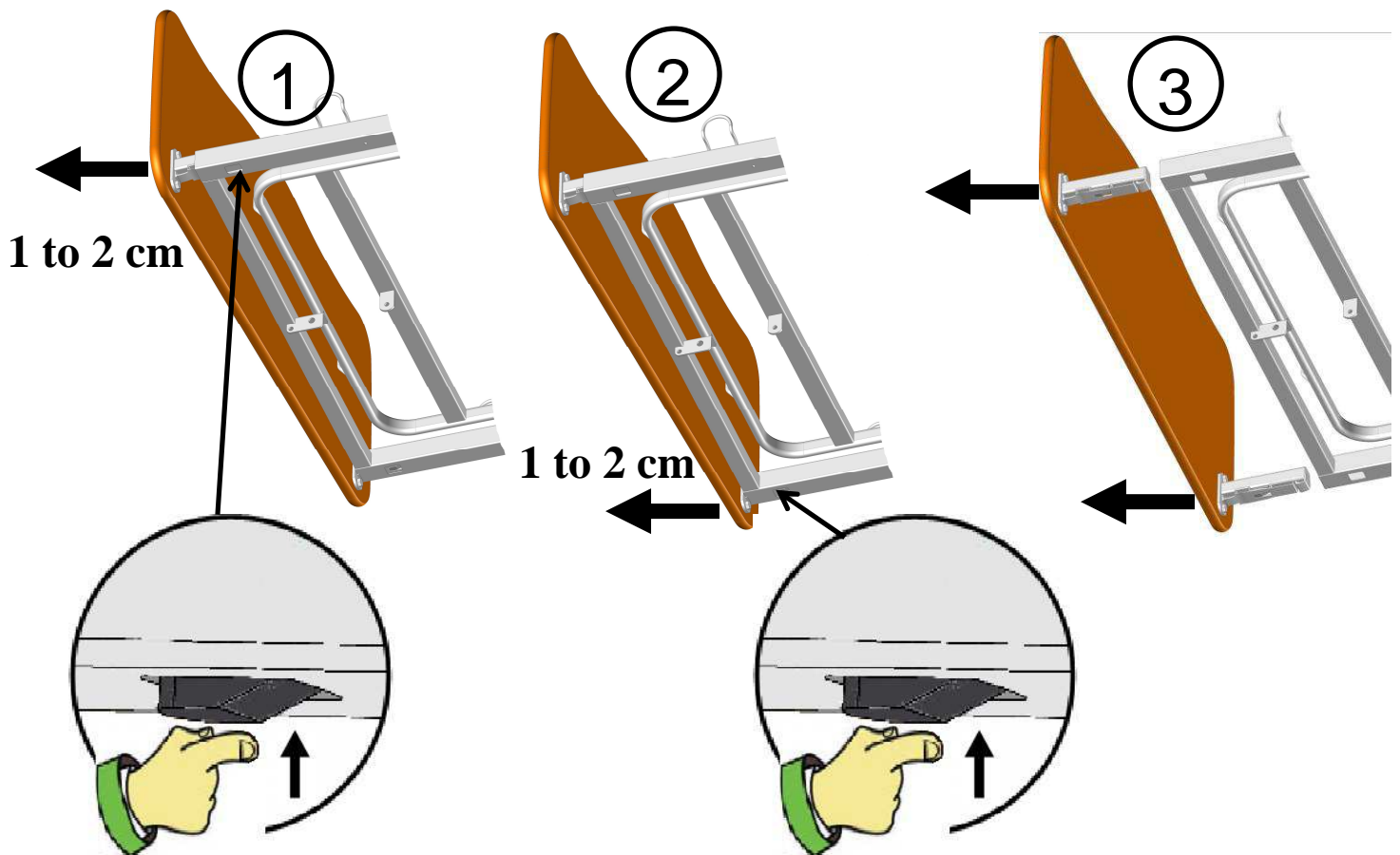
3.3. Use

3.3.1. Easy Move boards

➤ Installing an Easy Move bed board :



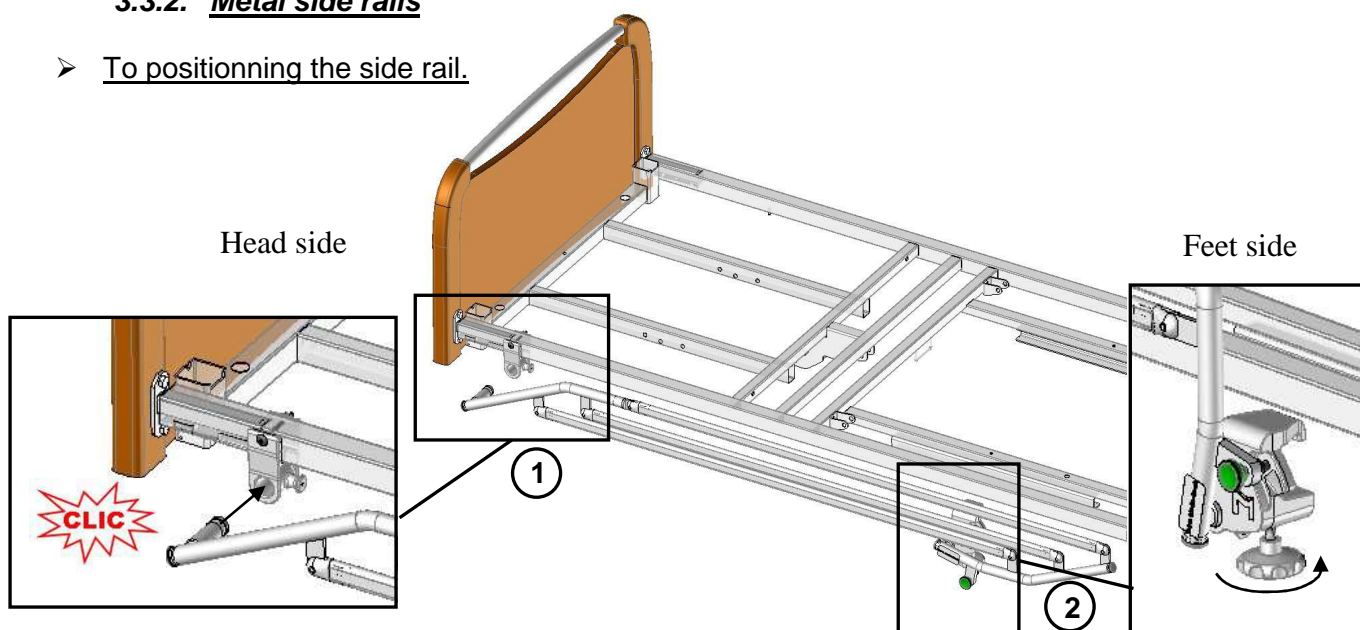
➤ Removing an Easy Move bed board :



 **Assemble the highest board on the head side.**

3.3.2. Metal side rails


➤ To positioning the side rail.



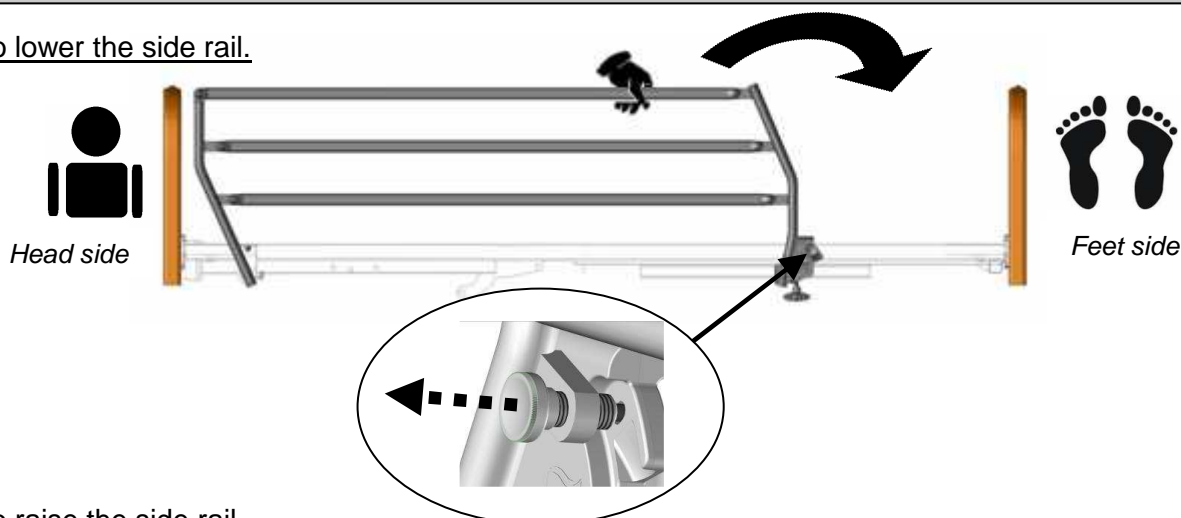
① Insert amount of the side rail in the grip jaw on the head side of the bed.

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

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


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

➤ To lower the side rail.



➤ To raise the side rail.



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

3.3.3. Wooden barriers

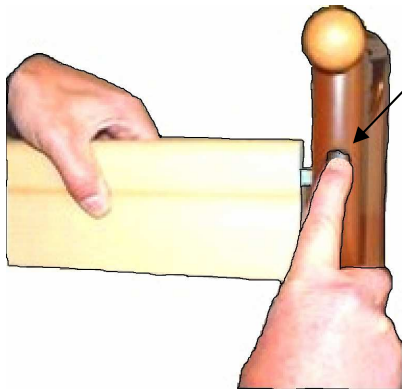
See the attached instructions for fitting the wooden side rail.

➤ To raise the side rail.

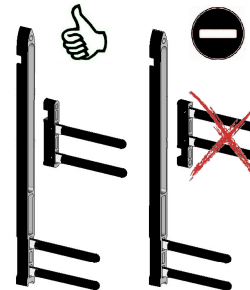
- ① Raise the top side rail with both hands until it locks.
- ② Check that it is properly slot in.

➤ To lower the side rail.

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

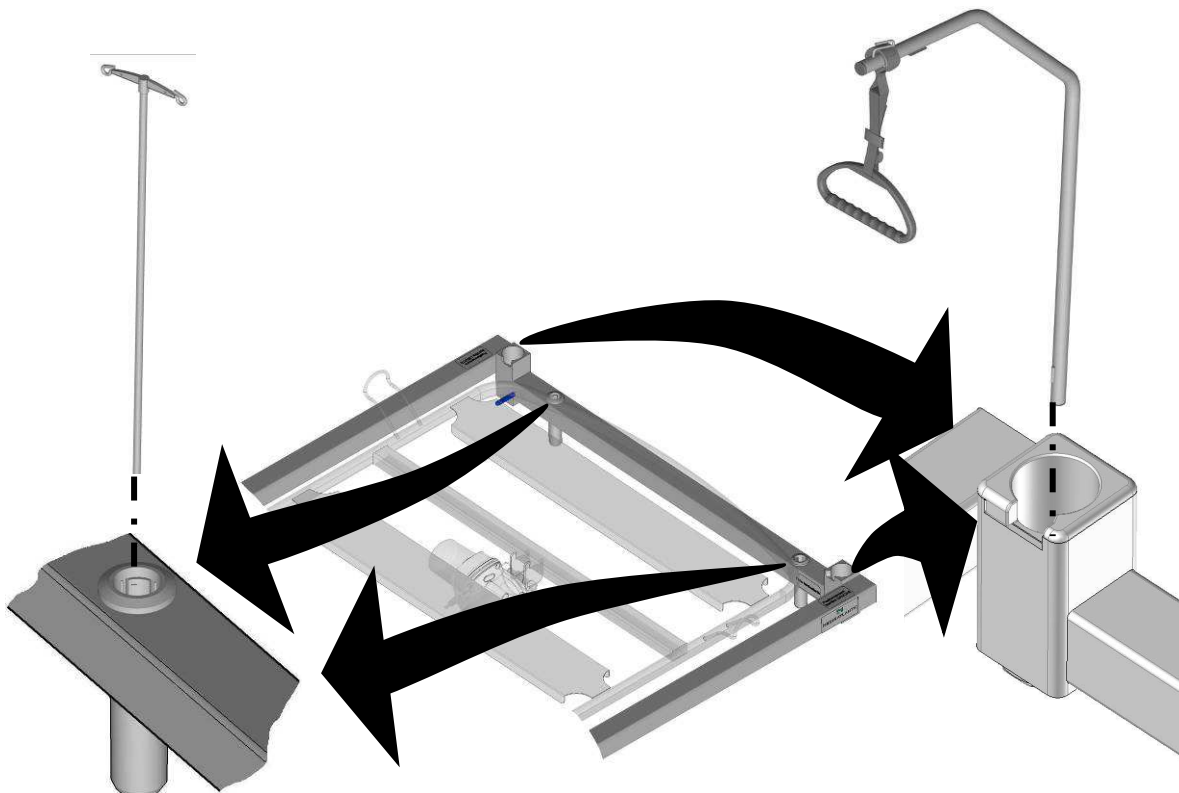


Check that the high guide engage in the right direction in the low guide.



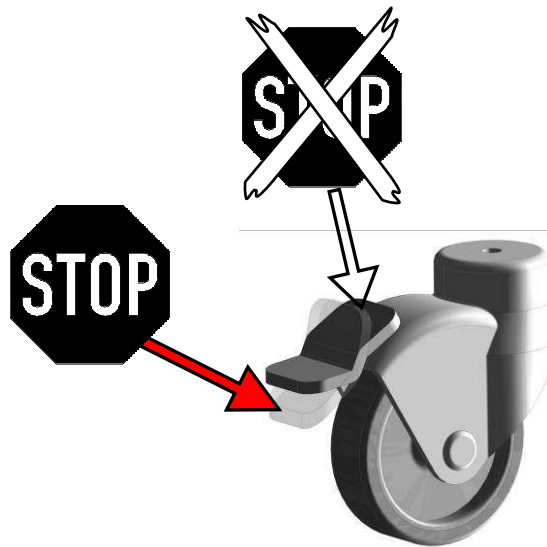
3.3.4. Angled lifting pole and IV stand

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



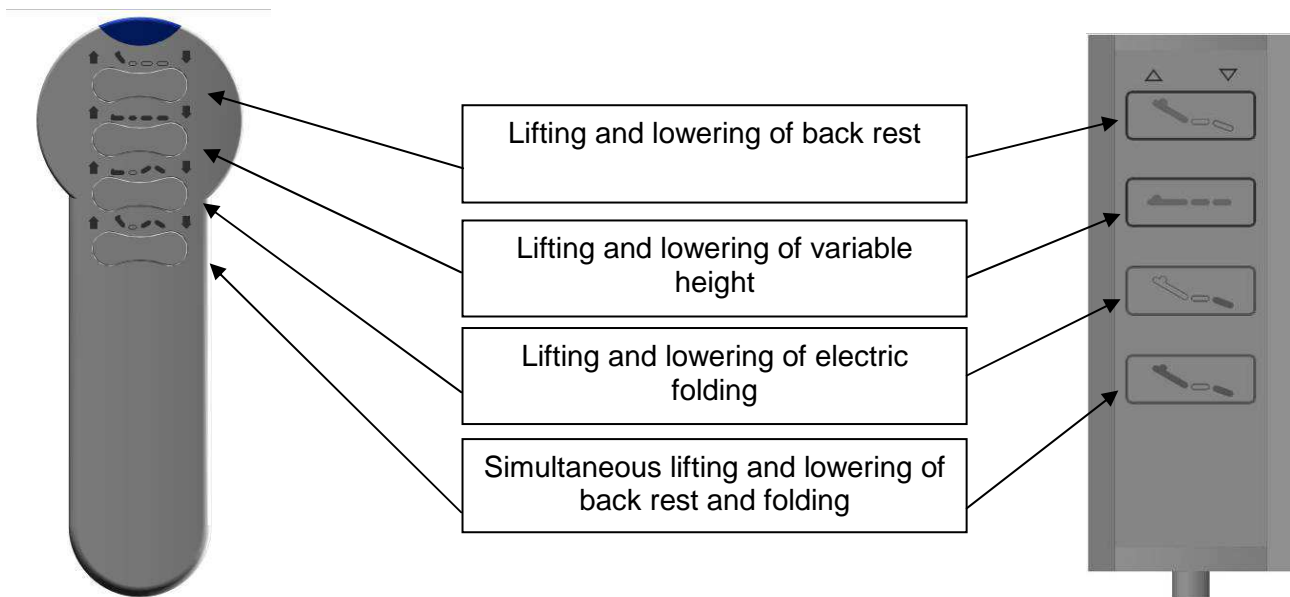
3.3.5. Separate braking

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

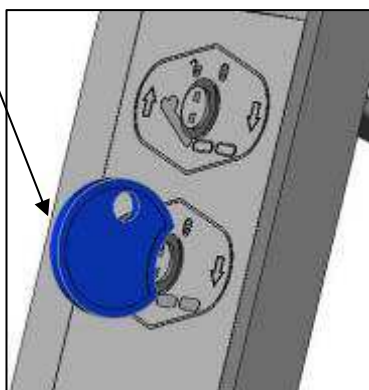


3.3.6. Remote control

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

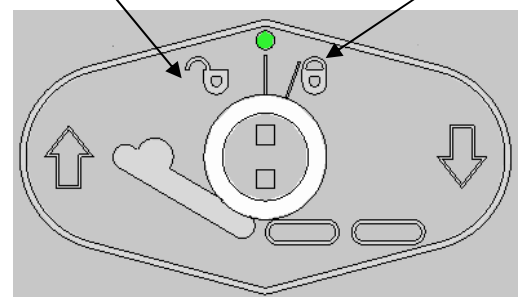


Key to lock a function



KEY IN VERTICAL POSITION: THE FUNCTION IS UNLOCKED

TURN THE KEY SLIGHTLY TO THE RIGHT TO LOCK THE FUNCTION



3.3.7. Leg rest

➤ Manual crank version (11):

To lift, lift the leg rest using the wire handle at the end.

To lower, relieve the leg rest slightly or to its maximum with the hand to release the catch, then lower the leg rest.

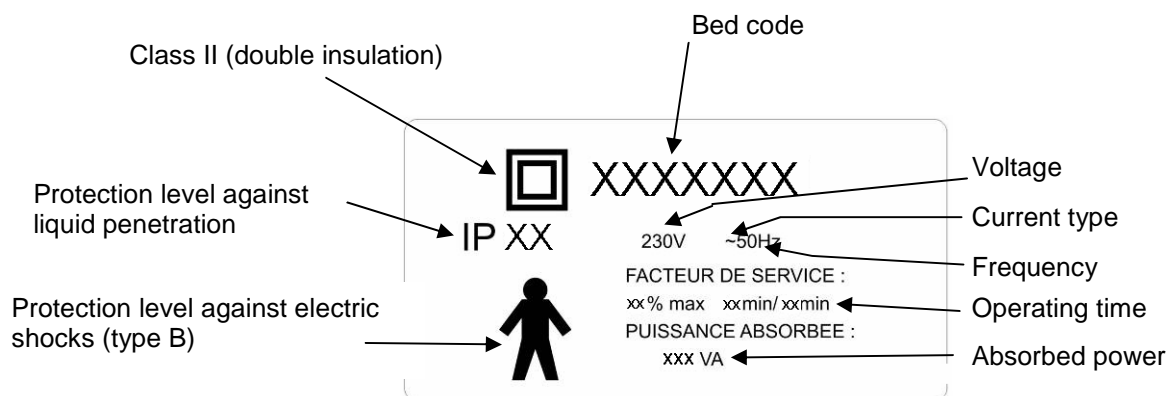
➤ Version with electric folding (08):

Memory folding: This function keeps a position of the tibia section horizontal when the jack is activated upwards. To use this function, the 1st crank catch must be engaged when the leg rest is flat.

Folding without memory: the end of the tibia section stays in contact with the bed base.

3.4. Technical characteristics

3.4.1. Electrical data



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



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

Essential performances


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

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

Manufacturer's declaration and guide - electromagnetic immunity			
The medical bed (see references in contents) has been designed for use in the electromagnetic environment specified below. The user should ensure that it is used in such an environment.			
Immunity test	IEC 60601 Severity level	Compliance level	Electromagnetic environment - Guide L
Electrostatic discharge EN 61000-4-2	± 6 kV contact ± 8 kV air	± 6 kV contact ± 8 kV air	Floors should be wood, concrete, or ceramic tile. If floors are covered with synthetic material, the relative humidity should be at least 30%.
Electrical fast transients EN 61000-4-4	±2 kV for feeders ±1 kV for input/output lines	±2 kV for feeders ±1 kV for input/output lines	The quality of the main power supply must be the same as for a typical commercial or hospital environment.
Surges EN 61000-4-5	Differential mode ± 1 kV Common mode ± 2 kV	Differential mode ± 1 kV /	The quality of the main power supply must be the same as for a typical commercial or hospital environment.
Voltage dips, short interruptions and voltage variations EN 61000-4-11	<ul style="list-style-type: none"> • <5% U_T - for 10 ms • 40% U_T - for 100 ms • 70% U_T - for 500 ms • <5% U_T - for 5 s 	<ul style="list-style-type: none"> • <5% U_T - for 10 ms • 40% U_T - for 100 ms • 70% U_T - for 500 ms • <5% U_T - for 5 s 	The quality of the main power supply must be the same as for a typical commercial or hospital environment. If the user of the medical bed (see references in contents) wants to be able to continue to use the bed during interruptions in the main power supply, it is recommended that the bed be powered by a converter or battery.
Power frequency magnetic field (50/60 Hz)	3 A/m	3 A/m	Power frequency magnetic fields should be at levels characteristic of a location in a typical commercial or hospital environment.

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

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

		800 MHz to 2 GHz	<p>the transmitter manufacturer and <i>d</i> the recommended separation distance in meters (m). The field strengths transmitted by fixed RF transmitters, determined by an electromagnetic measurement of the site ^a, must be less than the conformity level in each range of frequencies.</p> <p style="text-align: right;"></p> <p>Disturbances can occur near devices marked with this symbol:</p>
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Note 1 At 80 MHz and 800 MHz, the upper frequency range applies.
 Note 2 These guidelines may not apply in all situations. Electromagnetic propagation is affected by absorption and reflection from structures, objects and people.

A Field strengths from fixed transmitters, such as base stations for radio (cellular/cordless) telephones and land mobile radios, amateur radio, AM and FM radio broadcast and TV broadcast cannot be predicted theoretically with accuracy. To assess the electromagnetic environment due to fixed RF transmitters, an electromagnetic site survey should be considered. If the measured field strength in the location in which the medical bed (see references in contents) is used exceeds the applicable RF compliance level above, the normal operation of the bed must be checked. If abnormal performance is observed, additional measures may be necessary, such as re-orienting or relocating the medical bed.

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

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

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

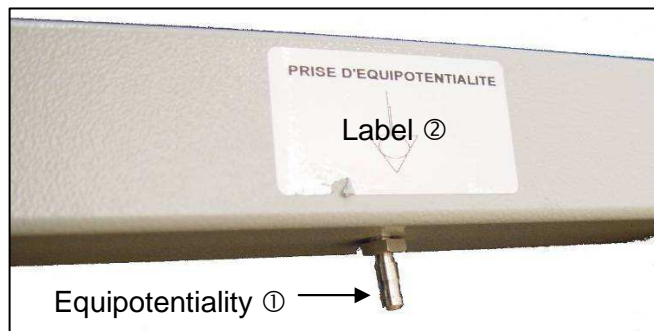
Rated maximum power of transmitter W	Separation distance according to frequency of transmitter m		
	150 kHz to 80 MHz	80 MHz to 800 MHz	800 MHz to 2.5 GHz
	$d = 1,17\sqrt{P}$	$d = 1,17\sqrt{P}$	$d = 2,33\sqrt{P}$
0.01	0.12 / 0.116	0.12 / 0.116	0.23 / 0.233
0.1	0.37 / 0.316	0.37 / 0.366	0.74 / 0.736
1	1.17 / 1.16	1.17 / 1.16	2.33 / 2.33
10	3.70 / 3.66	3.70 / 3.66	7.37 / 7.36
100	11.70 / 11.6	11.70 / 11.6	23.30 / 23.3

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

Note 1 At 80 MHz and 800 MHz, the separation distance for the higher frequency range applies.
 Note 2 These guidelines may not apply in all situations. Electromagnetic propagation is affected by absorption and reflection from structures, objects and people.

3.4.2. Equipotentiality

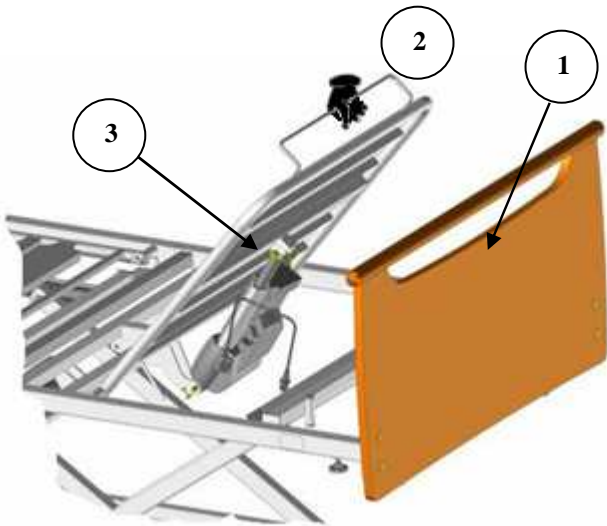
Under the head-half of the bed base you will find an equipotentiality socket ①, identified by the label ②, enabling you to connect any electromedical devices. The leads of these devices must pass through the head end and not the sides.



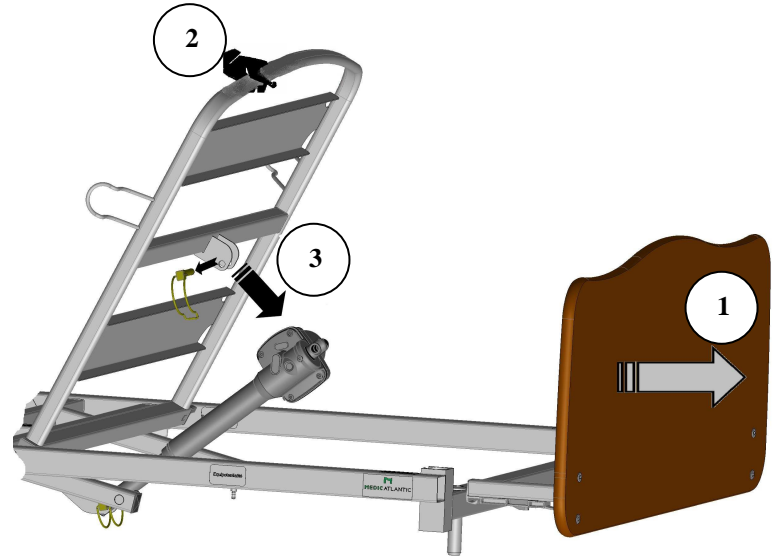
3.5. Putting the back rest flat

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

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



Version with handle on the back rest



Version without handle on the back rest

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



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

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



Release handles

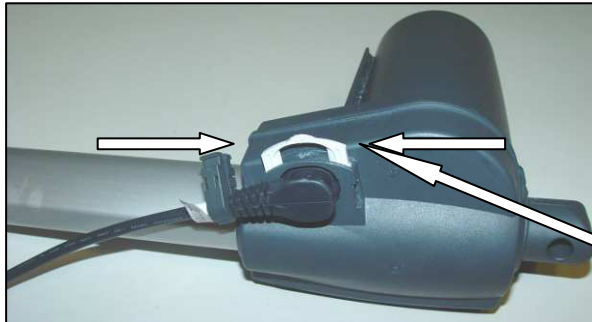
4. MAINTENANCE

4.1. Instructions for dismantling the motors



Disconnect the 230 volts connection before dismantling.

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



① Safety clip

4.2. Maintenance

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

RECOMMENDATIONS FOR PREVENTIVE MAINTENANCE:

Preventive maintenance should be carried out in accordance with our specifications and at least once a year by the organisation or person who installed the bed.

Between two maintenance sessions and at least once a year, the following should be carried out:

- Verification that the electrical leads are connected all along the metal jambs to prevent shearing of these leads when the variable height is being activated.
- Verification that all of the electrical leads and plugs are in good condition. Replacement if there is the slightest alteration (wear, shearing, damage, etc.).
- Verification of the external appearance (traces of damp and good overall condition of protective covers in particular) and that the motors and jacks function properly.
- Verification that the bed is in good working order (test all functions).
- Verification that the frame, bed base and mechanical joints are all in good condition.

When maintenance is carried out at the patient's home as part of a long-term contract, the installer must also:

- Check that the bed is properly installed (check to see that there hasn't been any modification contrary to the safety instructions made by the user since the bed's installation).
- Remind the users of the safety instructions.
- All installation and preventive maintenance operations must be recorded. See table model below. This record must be kept in a designated area throughout the bed's lifetime.

QUALITY INSPECTION OF MEDICAL BEDS

IDENTIFICATION OF MEDICAL BED		ESTABLISHMENT
CATEGORY		
TYPE MODEL TRADEMARK		
SERIAL NO.		SERVICE SITE
INVENTORY NO.		
DATE OF MANUFACTURE		
TEST DEVICES CHECKED AND CONFORMING WITH STANDARDS		
Description	<u>Type/model</u>	<u>Identification/serial no.</u>
Mass continuity tester		
Dielectrimeter		
Fault current to patient		

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

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

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

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

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

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

Comments

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

1 Not Applicable

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

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

4.3. Cleaning and disinfection

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

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

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

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

➤ **AIM**

To recondition the bed and prevent the transmission of germs from one patient to another.

To eliminate all organic soiling by:

- physical action (cleaning)
- chemical action (disinfection)

➤ **INDICATION**

Physical and bacteriological cleanliness of the bed and its accessories

➤ **EQUIPMENT**

Microfiber wipes

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

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

SANIVAP steam appliance with accessories

➤ **TECHNICAL**

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

Do not rinse or wipe.

Check the operation of all the bed functions

Repair if necessary

Pack in thermoplastic film

Attention:

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

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

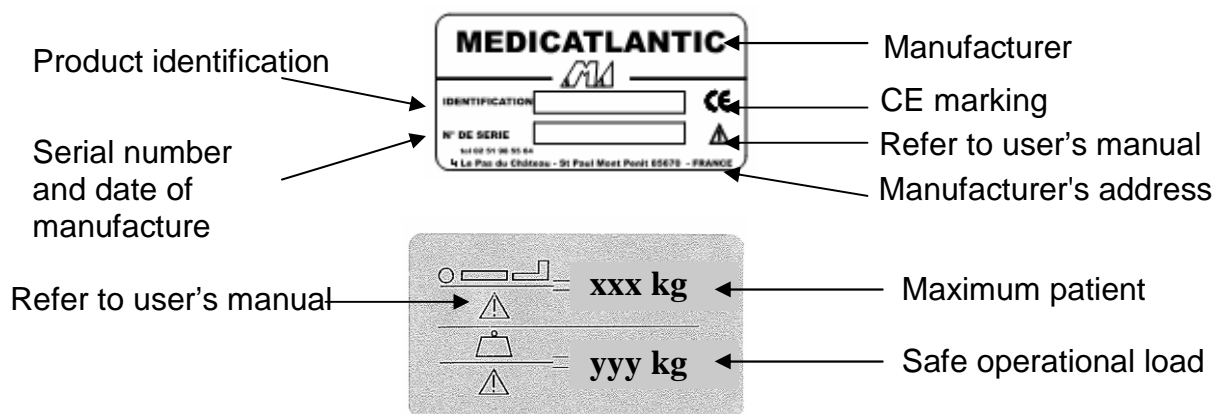


Product for external use. Do not swallow, keep away from heat sources and avoid contact with eyes.

4.4. Warranties

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

4.5. Identification



5. CONDITIONS FOR SCRAPPING

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

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

6. Easy Move BED BOARDS - 90cm WIDTH - COMPATIBLE

Item	Reference
MEDIDOM II Easy move (2) (4)	P318-00
COTE DE LUMIERE Easy Move	P360-00
DAGONE Easy Move	P388-00
ELEGANTTI Easy Move	P414-00
LOUIS PHILIPPE Easy Move (1)(2)	P415-00
CARMEN with Easy Move wooden barriers (2)	P506-00
COTE DE LUMIERE with Easy Move wooden barriers (2)	P549-00
VAL DE VIE with Easy Move wooden barriers (2)(4)	P552-00
MEDIDOM Easy Move (2) (4)	P600-00
WINNEA® Easy Move (3)	P609-00
AUZENCE II Easy Move	P611-00
WINNEA® CIC Easy Move (1)	P615-00
ABELIA II Easy Move	P616-00
CARMEN II with Easy Move wooden barriers (2)	P620-00
MADELIA II Easy Move	P624-00
CARMEN II Easy Move	P625-00
VAL DE VIE Easy Move (4)	P704-00

- (1) Bed board incompatible with the XPRESS transport kit
(2) Long pan option incompatible with the XPRESS transport kit
(3) Emergency removable option incompatible with the XPRESS transport kit
(4) Board incompatible with the centralised brake option of the ALDRYS bed

The blanket hoop option is incompatible with the XPRESS transport kit, XPRIM III and AERYYS bed

6.1. Bed board references for application environments 1 and 2

Item	Reference
WINNEA HAND RAILS (Easy move)	P609-00
WINNEA CIC BOARDS (Easy Move)	P615-00



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

7. COMPATIBLE ACCESSORIES

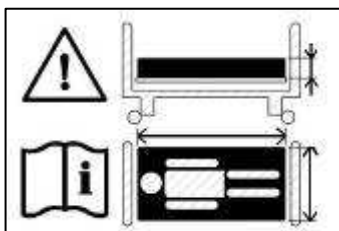
Ref.	Des.	Charge maxi (kg)	XPRIM III	XPRESS 2 nd G	OSIRYS	ALDRYS	EXCELYS	AERYS	MEDICALYS 2 nd G	PITCHOUNE	AERYS-120	IXL-IXX 120	IXL-IXX-DUO 140	DUO 160
A1700xx	IV stand, 2 hooks	8	●	●	●	●	●	●	●	●	●	●	●	●
A5800	Chrome-plated urine bottle	NA	●	●	●		●		●	●		●	●	●
A8400xx	Telescopic IV stand, 2 hooks	8	●	●	●	●	●	●	●	●	●	●	●	●
A165-00	Lifting pole for Kalin Pitchoune	75								●				
A193-00	Chrome-plated wall-mounted	NA	●	●	●	●	●	●	●	●	●	●	●	●
A230-00	Remote-control lead holder	NA	●	●	●	●	●	●	●	●	●	●	●	●
A260-00	Epoxy urinal holder	NA	●	●	●		●		●	●		●	●	●
A551-00	Excelys wall stop	NA	●				●							
A552/557-	Skirt for Excelys and L.P. bed	NA					●							
A553/555-	Skirt for 120/140 and L.P. beds	NA										●	●	
A554/556-	Skirt for 160 and L.P. beds	NA												●
A562-00	Full length KALIN side rails	NA								●				
A563-00	KALIN bed skirt	NA								●				
A564/565-	KALIN EPOXY side rail	NA								●				
A575-00	Support handle	NA	●	●	●	●	●	●	●		●	●	●	●
A579-00	PVC-wrapped wooden side rails	NA	●2	●2	●2	●2	●2	●2	●2		●2	●2	●2	●2
A580-00	Solid wood side rails (2)	NA	●2	●2	●2	●2	●2	●2	●2		●2	●2	●2	●2
A613-00	S.A.M. EVOLUTION PLUS	NA	●	●	●	●1	●	●	●		●	●	●	●
A616/617-	S.A.M. ACTIV	NA	●	●	●	●	●	●	●		●	●	●	●
A621-00	Easy Move base extension	NA	●	●	●	●	●	●	●					
A622-00	Angled lifting pole	75	●	●	●	●	●	●	●		●	●	●	●
A623-00	Chromed angled lifting pole	75	●	●	●	●	●	●	●		●	●	●	●
A626-00	Bed loading kit	NA		●										
A627-00	Transport kit Transtolit	NA		●										
A630-00	Bed base extension (width	NA									●	●		
A631-00	Bed base extension (width	NA											●	
A632-00	Bed base extension (width	NA												●
A633-00	Médicalys wall stop	NA							●					
A634-00	Kit for side loading bed	NA	●		●	●	●	●	●	●				
A636-00	AERYS wall stop	NA						●						
A637/638-	EPOXY side rail	NA	●	●	●	●	●	●	●		●	●	●	●
A639/640-	Chrome barrier	NA	●	●	●	●	●	●	●		●	●	●	●
A645/646-	S.A.M. EVOLUTION	NA	●	●	●	●1	●	●	●		●	●	●	●
A647/648-	S.A.M. ERGONOM PLUS	NA	●	●	●	●1	●	●	●		●	●	●	●
A649/650-00	S.A.M. ERGONOM	NA	●	●	●	●1	●	●	●		●	●	●	●
A651/652-	S.A.M. ERGONOM LIGHT	NA	●	●	●	●1	●	●	●		●	●	●	●
A653-00	Kit for side loading bed AERYS	NA									●			
A654-00	Skirt for 90cm bed	NA	●											
A655-00	Skirt for 90 cm bed FC	NA	●1											
A656-00	Skirt for 90 cm bed LP	NA	●											
A657-00	Skirt for 90 cm bed FC LP	NA	●1											
Pxxx	Blanket hoop (2)	15				●2	●2		●2					
S0200	Stainless steel intravenous stand on base	8	●	●	●	●	●	●	●	●	●	●	●	●
Y0200	Lifting pole on U shaped base, fixed height	75	●	●	●	●	●	●	●	●	●	●	●	●

1 requires the centralised braking kit 2 incompatible with Bed base extension



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

➤ **Mattress**



Observe the mattress dimensions prescribed. See user guide

Width of base in cm	Characteristics of compatible mattresses
80	Width 76 cm minimum with a high-resilience foam of 34 kg/m³ minimum , height between 14cm min. and 15 to 17cm max.
90	Width 86 cm minimum with a high-resilience foam of 34 kg/m³ minimum , height between 14cm min. and 15 to 17cm max.
120	Width 116 cm minimum with a high-resilience foam of 34 kg/m³ minimum , height between 14cm min. and 15 to 17cm max.
140 IXL	Width 136 cm minimum with a high-resilience foam of 34 kg/m³ minimum , height between 14cm min. and 15 to 17cm max.
140 DUO	Width 68 cm minimum with a high-resilience foam of 27 kg/m³ minimum , height between 14cm min. and 15 to 17cm max.
160 DUO	Width 78 cm minimum with a high-resilience foam of 27 kg/m³ minimum , height between 14cm min. and 15 to 17cm max.



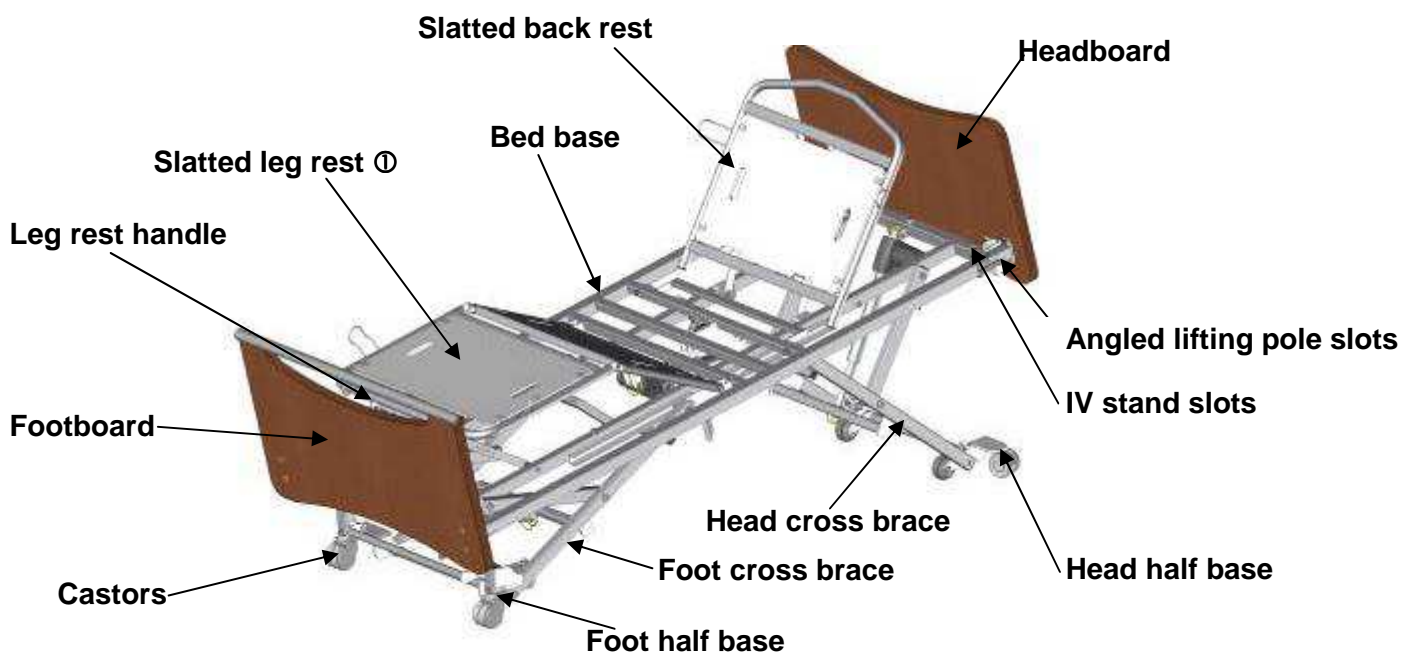
Incompatible mattresses can pose RISKS.

8. SPECIFIC USE

8.1. Purpose of bed

- Aerys beds are not designed for children under 12, or for any other purpose apart from those stipulated below.
- Depending on their configuration, the beds are intended for home use HAD – MAD (application environment 4) (only with option u), EPHAD and HPA (application environment 3).

8.2. General description

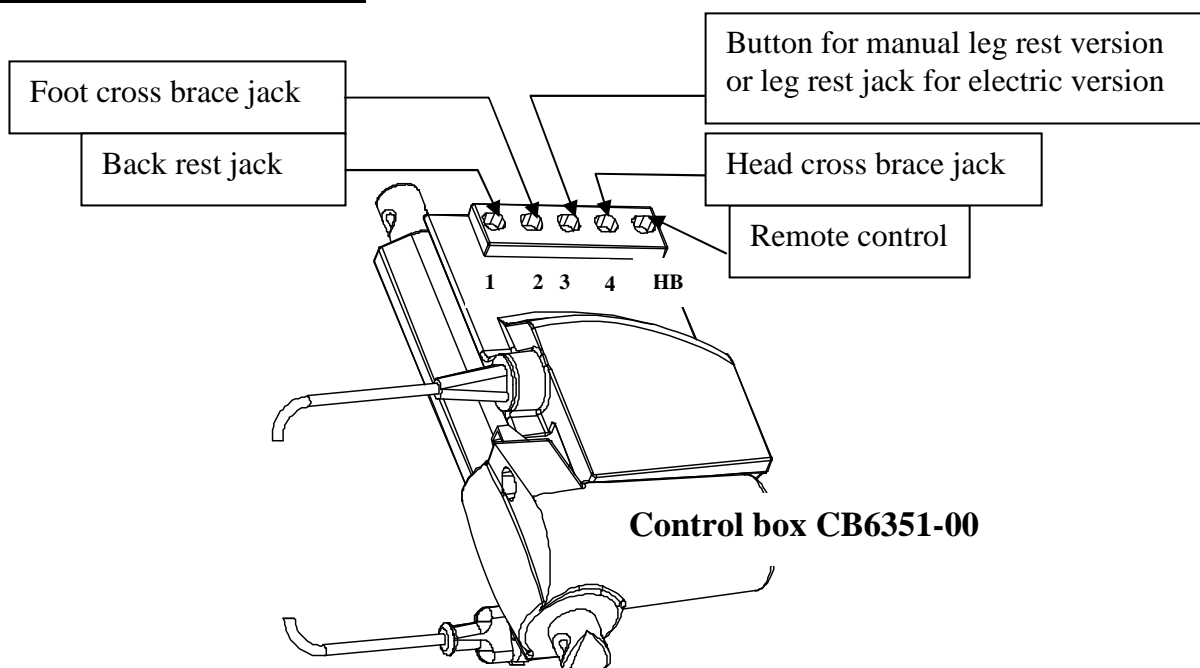


① Manual crank or electric folding leg rest depending on version.

8.3. Specific precautions for use

The bed should not be used as a stretcher.

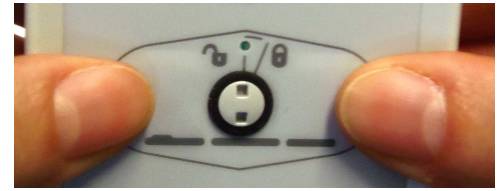
8.4. Electrical connection diagram



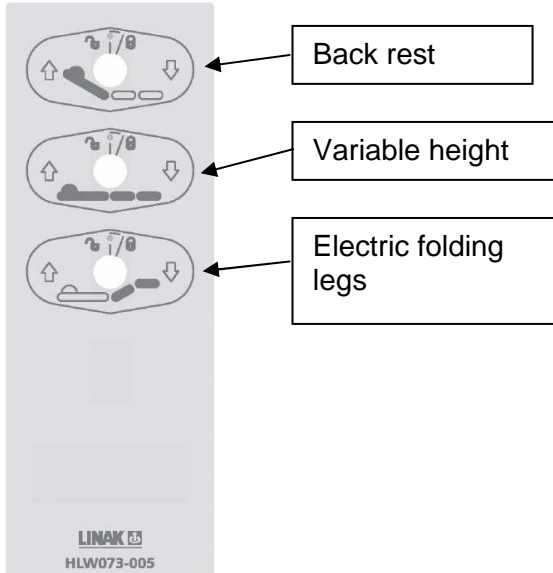
8.5. AERYS specific use of remote control

8.5.1. Custom Variable height position

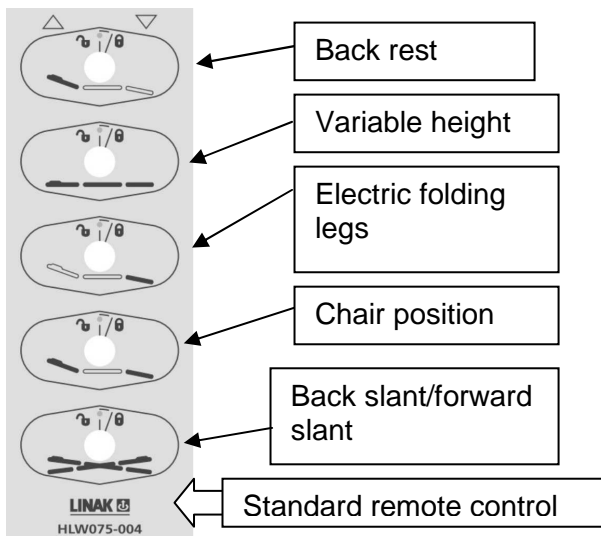
Possibility on all remote control of Aerys bed (except IR, use the wired caregiver case) to store a stop on a custom position of the variable height (factory floor position / box spring 340mm) by simultaneously pressing the 2 keys variable height (continuous beep 5s).



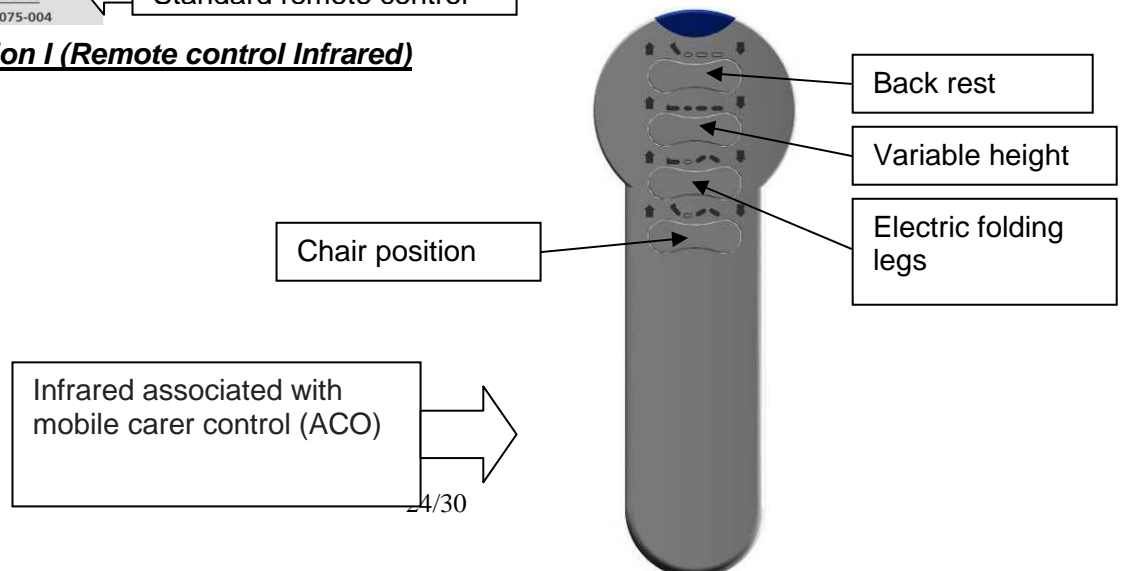
8.5.2. Option U (without back slant/forward-slant)



8.5.3. Standard version (without options)



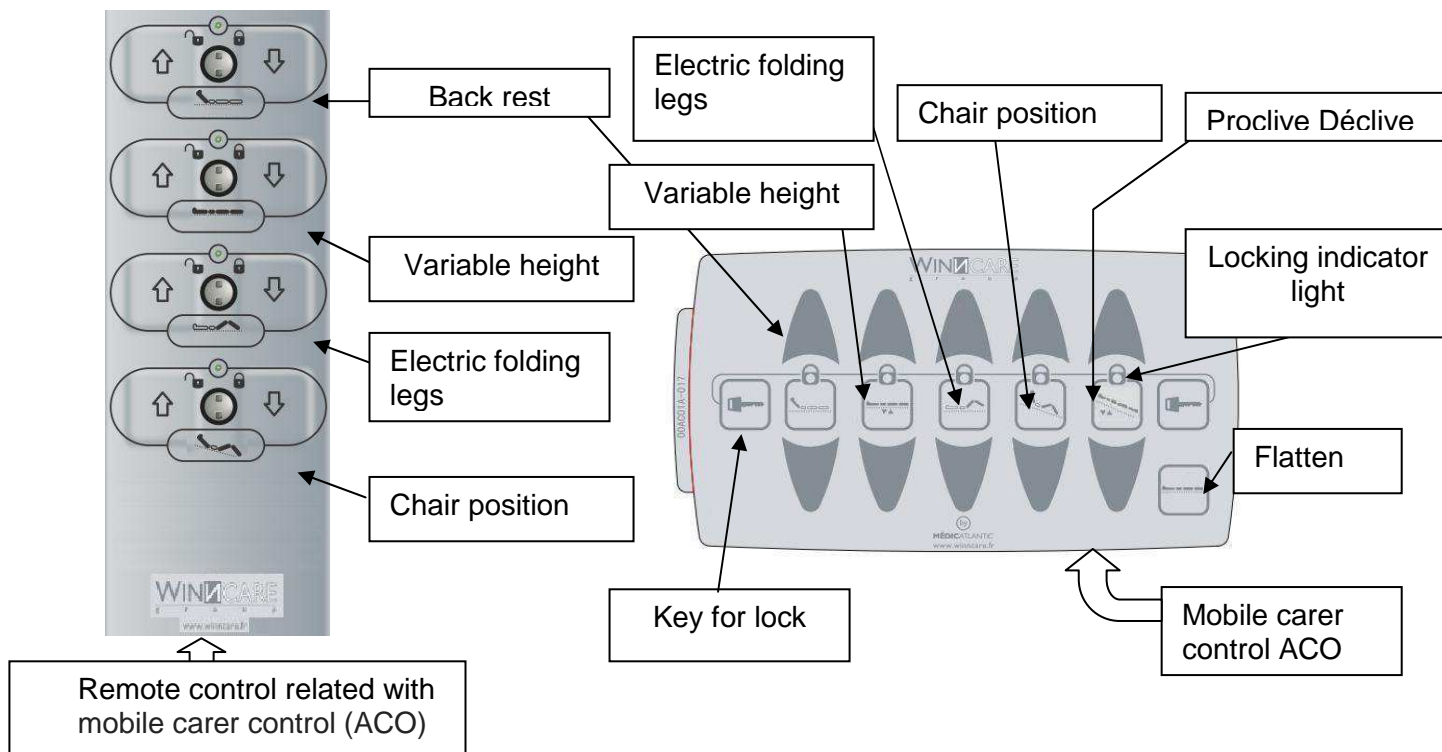
8.5.4. Option I (Remote control Infrared)



8.5.5. Option R (Mobile carer control ACO)

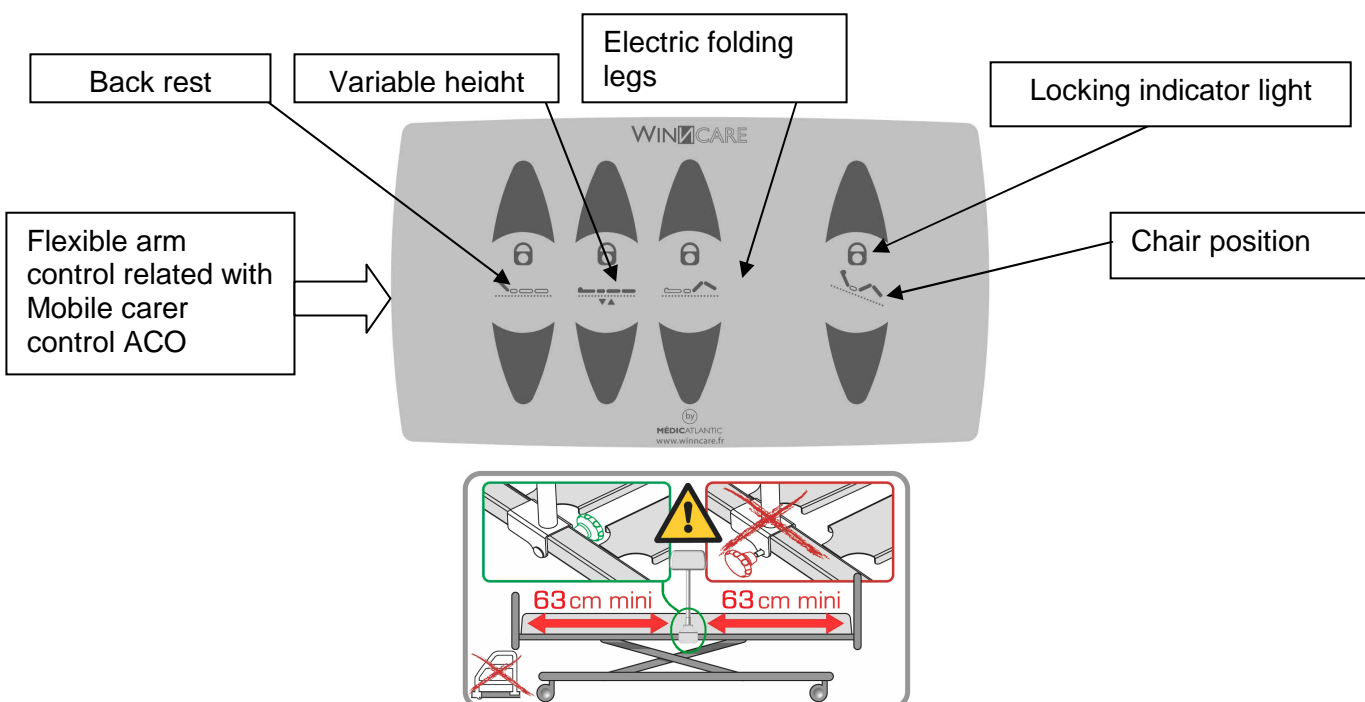
To activate the function, press the « arrow » key (up or down) of the desired function.

To lock functions (raise back, variable height, leg rest, back tilt, forward tilt), press the « key » key and the key for the function to be locked. Make the same thing to unlocked a function.



8.5.6. Option R (Flexible arm control)

The flexible arm option is always combined with the mobile carer control (ACO)



The flexible arm is fixed to one of the long sides of the bed observing a minimum distance of 63 cm from the panels or any accessory. The arm should not make more than 2 turns in relation to its support to avoid

damaging the connecting cable. Fitting a lifting handle on the same side as the flexible arm control is not allowed.

8.6. Battery (option)

The (optional) back-up battery enables you to perform 3 complete cycles when the bed is not connected to the mains.

After these 3 cycles, a beep warns you that you need to to re-connect the bed to the mains to recharge the battery. However, you still have one more complete cycle of autonomy without reconnecting.

Operating instruction:

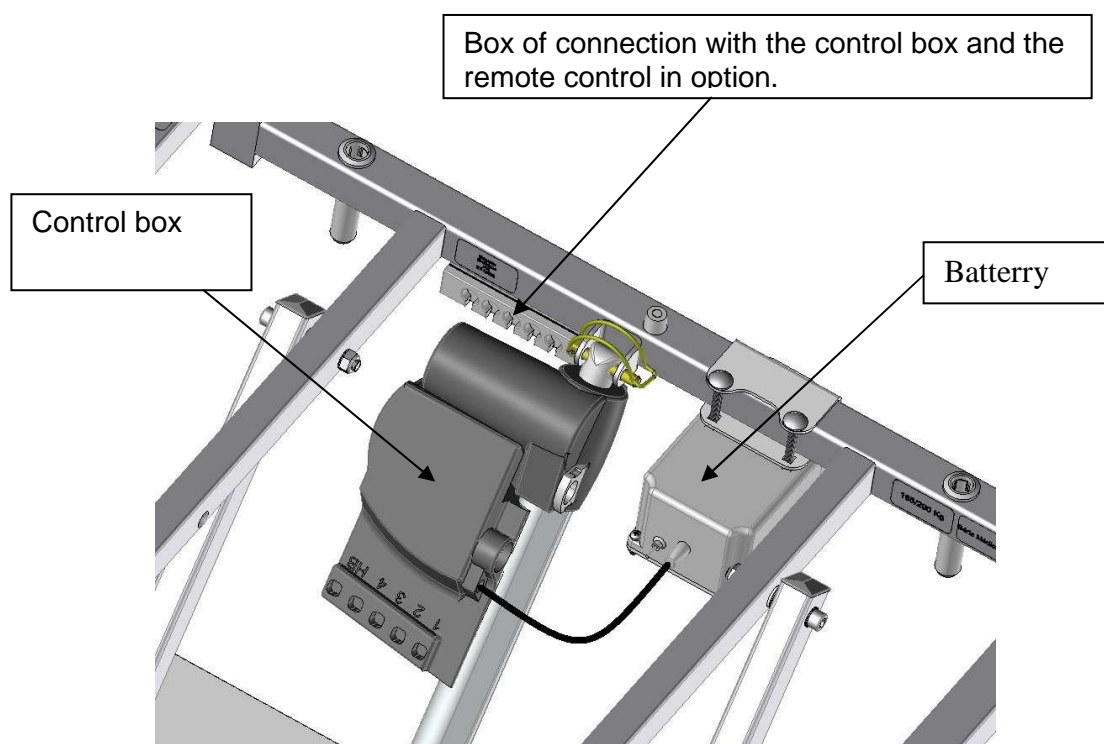
A new battery needs to be charged for 24 hours before using it for the first time.

The purpose is to have batteries in their maximum state of charge and hence increase their service life.

Storage conditions:

Batteries should be charged every 3, 6 or 9 months depending on the storage temperatures.

Storage temperature	Charging interval
20°c or less	Every 9 months
20 – 30°c	Every 6 months
30 – 40°c	Every 3 months



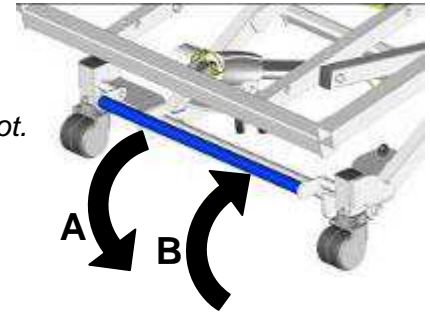
8.7. Use of specific elements

8.7.1. Centralised breaking

The centralised braking of the bed must be activated when the bed does not need to be moved.

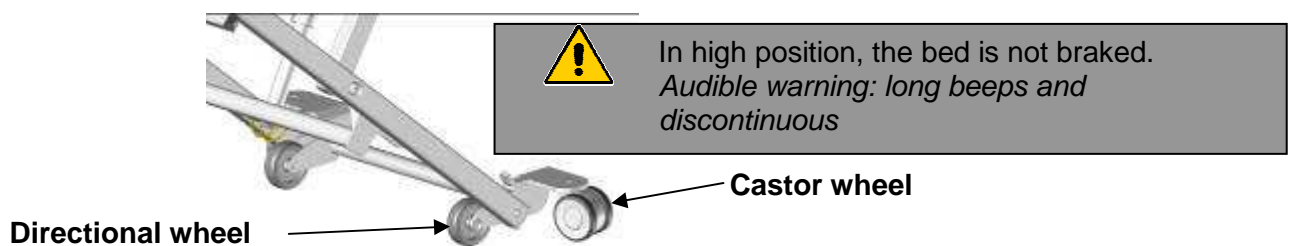
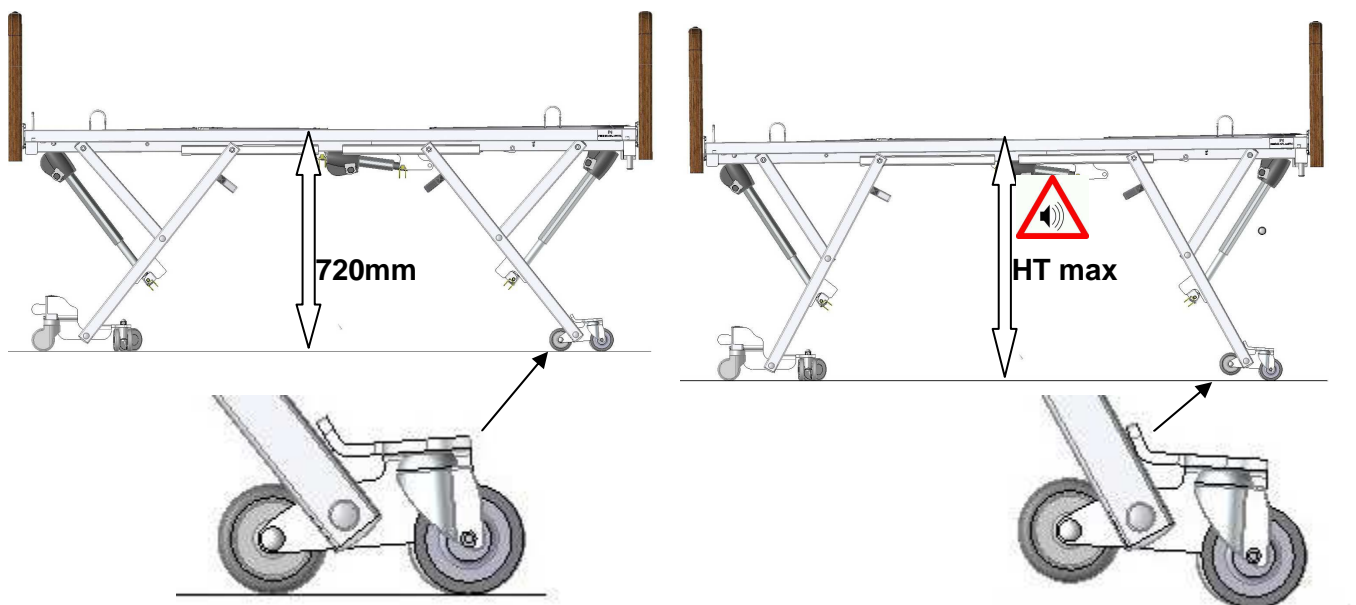
A. Braking: Push the pedal to the bottom of the bed with your foot.

B. Releasing the brake: bring the pedal to the top of the bed with your foot.



8.7.2. Lateral head displacement

To allow lateral movement of the bed, lift the bed in the high position.



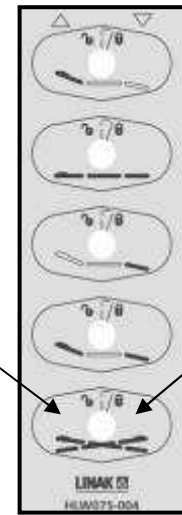
8.7.3. Trendelenburg / back tilt


To activate the Trendelenburg or forward tilt position, press the corresponding button on the remote control of the bed.

When you pass to forward tilt in Trendelenburg or conversely, a stop is made in a horizontal position. To resume the movement, release the button and press again or staying press 3s.

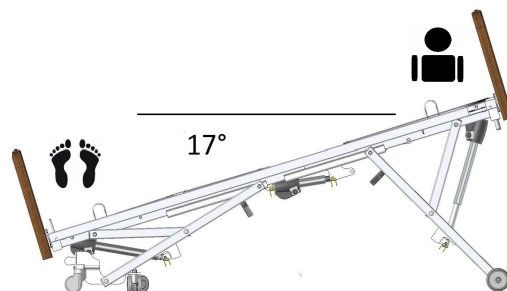
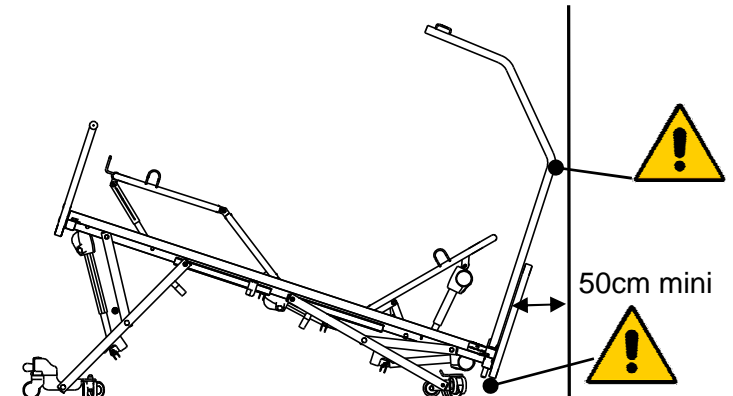
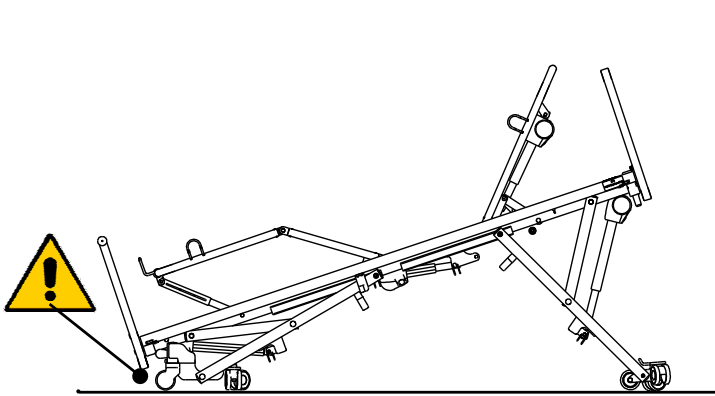
MEDICATLANTIC recommends leaving a space of at least 50cm between the headboard and the wall in the case of use of the Trendelenburg position with a bracket or IV pole.

Forward tilt key Trendelenburg key

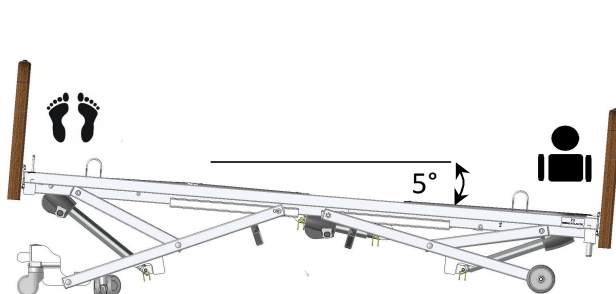




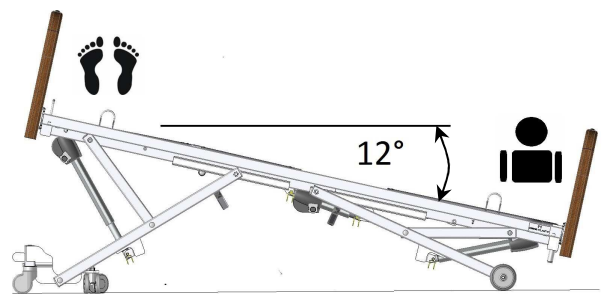
The Trendelenburg position should always be prescribed and under medical supervision.
When the bed is placed in low position, make sure that there are no objects and no parts of the patient's or carer's body caught between the bed, the boards, the accessories and the ground or between the boards and half bases or between the half cross braces.



Forward tilt 17°



Trendelenburg 5°



Trendelenburg 12°

Upon activation of the function Trendelenburg, 1 stop occurs 5°, to reach the position Trendelenburg 12°. To resume the movement, release the button and press again or staying press 3s.

8.7.4. Wall stop without breaking



8.7.5. Wall stop with cross slide



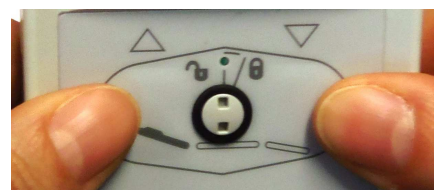
Always put the wall stop on the bed in lowest position to ensure the movement of the head half base during elevation of the bed and avoid any deterioration.

8.7.6. In case of malfunction

The control box can put itself in default (bad connection, cable fault, actuator fault ...). In this case the movements are impossible and the control box makes short and discontinuous beeps at the push of a button the remote control. It is necessary to reset the electrical assembly :

8.7.7. Electrical system initialization(all options without side shift option).

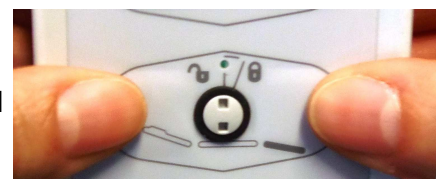
Simultaneously press the two buttons of back rest and hold until the end of a long and discontinuous beep (all options without side shift option). Return the height variable actuators to the maximum (initialization of actuators).



Or

8.7.8. Electrical system initialization(Only optional side shift).

. Simultaneously press the two buttons on the Electric folding legs and hold until the end of a short and intermittent beep. (Only optional side shift). Return the height variable actuators to the maximum (initialization of actuators).



8.8. Specific technical data

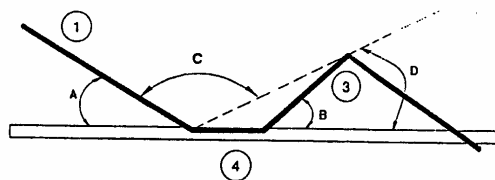
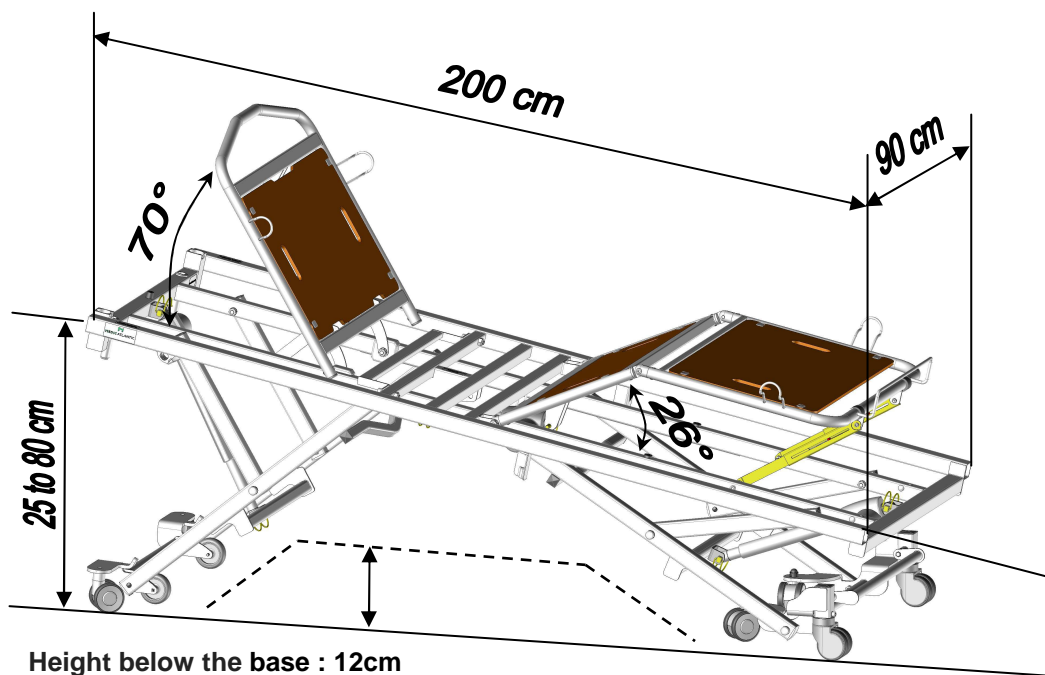
8.8.1. Noise

The maximum sound level is measured at 53 dBa.

8.8.2. Weight

Normal load in use: **200 kg** (Patient 165 kg, Mattress 20kg. Accessories 15kg)
 Bed, version electric folding leg rest (without boards)..... 75 kg
 Bed, version manual crank leg rest (without boards)..... 71 kg

8.8.3. Dimensional



- A = 0 – 70 °
- B = 0 – 26 °
- C = 90 – 180 °
- D = 0 – 15 °



Raise the Aerys bed to a minimum height of 30 cm when using a patient lift or dining table.

MEDICATLANTIC recommends the use of a patient lift or a dining table bases with less than 120 mm high.

