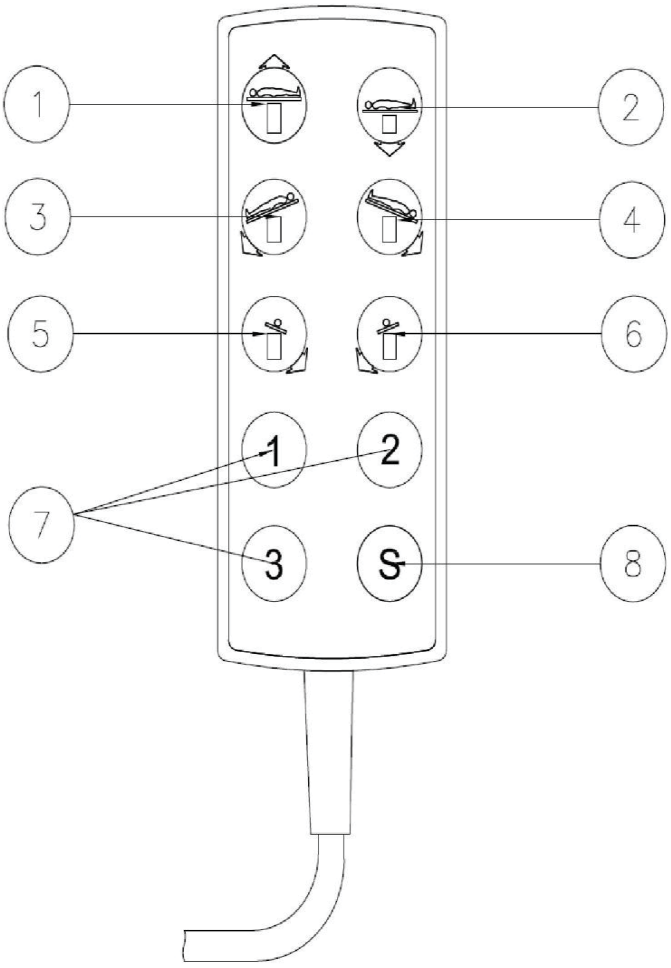
3 Operation and use

3.1 Controlling elements

3.1.1 Wire- connected control



1,2 – Height adjusting
3,4 – Longitudinal movement
5,6 – Side inclination
7 – Memory buttons
8 – Record for memory button

Fig.5 wire-connected control

The wire-connected control is permanently connected to the controlling box at the table basis. The table is switch on through place the switching in “I „position (Fig. 1, pos. 17). At this moment the table is activated and carrying out the movements through pushing the functioning control button is possible. The buttons [1] to [7] are functioning buttons. When the functioning button is pressed, the movement represented by button’ symbol is operated so long as the button is pressed.

The wire-connected controller is obligatory accessories for surgical tables.
The wire-connected controller must be on the hand of operating personnel.
To recommended use the operating table connected to net.

Caution!

3.2 Raising and levering of table top

The height of table top is changed within the range defined in technical data by pressing the button [1] or [2] of controller (wire-connected controller, wireless controller or side control panel). When the extreme position is reached, table top stops automatically.

3.3 Table top longitudinal inclination

In order to change longitudinal inclination of table top (trendelenburg and anti-trendelenburg) within the range indicated in technical data, one should press button [5] or [6] of controller (wire-connected controller, wireless controller or side control panel). The movement lasts as long as the button is being pressed. When an extreme position is reached, table top stops automatically.

Caution!

Angular couch position can be changed only by medical personnel. The Trendelenburg position is a rescue position.

When performing longitudinal and side tilting functions, patient should be secured against uncontrolled sliding down from the operating table. Use shoulder supports, supporting rollers, side supports, belts and grips as securing elements.

When trendelenburg function is performed, the backrest should be in zero position or above the horizontal level so that no collisions take place!

3.4 Table top side inclination

In order to change side inclination of table top within the range indicated in technical data, one should press button [5] or [6] of controller (wire-connected controller, wireless controller or side control panel). The movement lasts as long as the button is being pressed. When an extreme position is reached, table top stops automatically.

Caution!

When performing longitudinal and side tilting functions, patient should be secured against uncontrolled sliding down from the operating table. Use shoulder supports, supporting rollers, side supports, belts and grips as securing elements.

3.5 Memory of table top position (zero position)

The table controller enable writing 3 any table top position in this memory. Every table top position may have free height, longitudinal and side inclination. One of this changed position can be the zero position of table top.

In order to write the position in memory, first should place the required position by means of function buttons 1-6 on the controller (fig. 4). Press (just a while) the 8 function button of controller (fig. 4). Next press one of the changed memory buttons-7 (fig. 4), which writes the preset table top position. The proper writing of position is signalizing by meant of sound signal.

In order to receive the preset position should press one of the function buttons of controller- 7and keep until receiving the changed position, which is until moment when the table op has been stopped.

Caution!

In the case of finding the discrepancy between preset and receive position, one should again carry out the position preset procedure.

3.6 Change of angular position of the backrest segment

The angle of the backrest segment (fig. 1, item 2) is changed by the use of the force of muscles with support of gas spring. In order to adjust a segment position, press blockade (fig.1, pos.20), deviate the lever (fig. 1, pos.9) to up and then place a segment in a desired position and release a lever (fig.1, item 9). After releasing a lever, a backrest segment mechanism is blocked and further movement is prevented. **Remember to hold a segment with both hands while adjusting position**. Thanks to the

central position of the lever the backrest segment can be operated from the right, from the left and from behind the backrest segment.

Caution!

If a patient is very heavy, over 90 kg, the angle of backrest segment should be changed with particular care; one should be prepared that it would be necessary to use considerable force to move it up and to cushion lowering at the moment of lever release (drawing 1 and 2, item 9).

3.7 Change of angular position of the footrests

Angular position of the footrest inclination is changed within the range defined in technical data by rising of the lever (drawing 1, item 11) or pressing the lever (fig.1, item 22) (on the side removable footrests) or rising or lowering of the footrest segment to the required level. When the pressure is removed from the lever, the mechanism is locked and the position of the footrest determined.

The opening angle of leg rest segments can be adjusted within the range specified in the technical data by unlocking (lifting) the lever (Fig. 9, item 2). After setting the required angle of the leg rest segment (within the range specified in the technical data), move the lever downwards to its end position, towards the leg rest frame (Fig. 6).

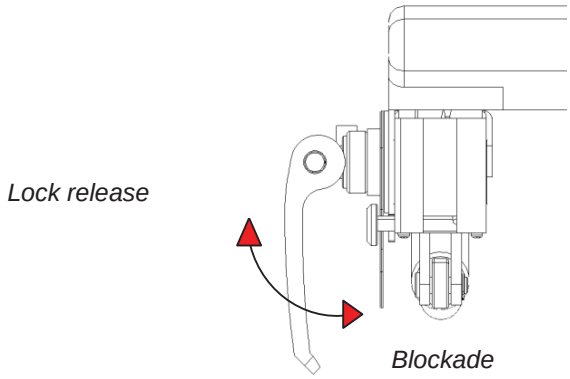


Fig. 6.Changing the footrest angular position

CAUTION !

The handles must be properly locked to ensure that the footrest will not move!

In case of loosening of the handle clamp, adjust the clamping force using the handle nut – it will secure the lock (fig. 7, pos. 2).

Use caution when adjusting the spread angle of the footrests.

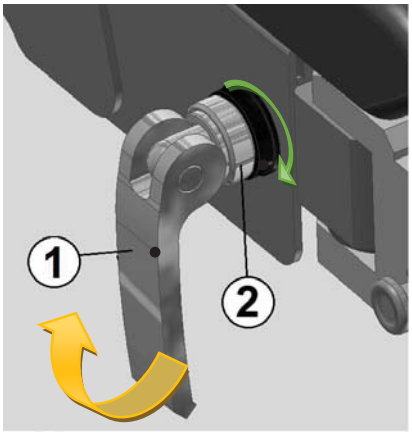


Fig.7. Adjusting the clamping force of the handle

Using the footrest may result in loosening of the clamping lever that blocks the sideways

movement of the footrest. Such loosening means that the footrest locking mechanism is not secure and poses potential danger when the operating table is in use. If a situation like this occurs, adjust the clamping force of the handle by following these steps: release the movement locking mechanism by lifting up the lever (fig. 10, pos. 1), set the clamping force by rotating the handle nut (fig. 10, pos. 2) and lock the handle by pushing its lever down towards the frame. The clamping force is set correctly when it is impossible to move the footrest with the handle closed.

3.8 Installing and operating the footrest plate

The footrest plate (fig. 8) is installed on the wedges found at the end of the seat. To install the footrest, put the footrest wedge socket on the wedge spigot in the seat. In order to do that the button does not have to be pushed (fig. 8, pos. 1) – the footrest will place itself in the correct position and lock itself on the spigot. It is advised to ask someone for help when disassembling the footrest. To take off the footrest, simultaneously push the two buttons on its sides and, with the buttons still pushed in, lift it up until it is taken off the wedge spigot in the seat. To change the angular position of the footrest, push the lever (fig. 8, pos. 2) triggering the gas spring mechanism. Releasing the lever locks the footrest in the set position.

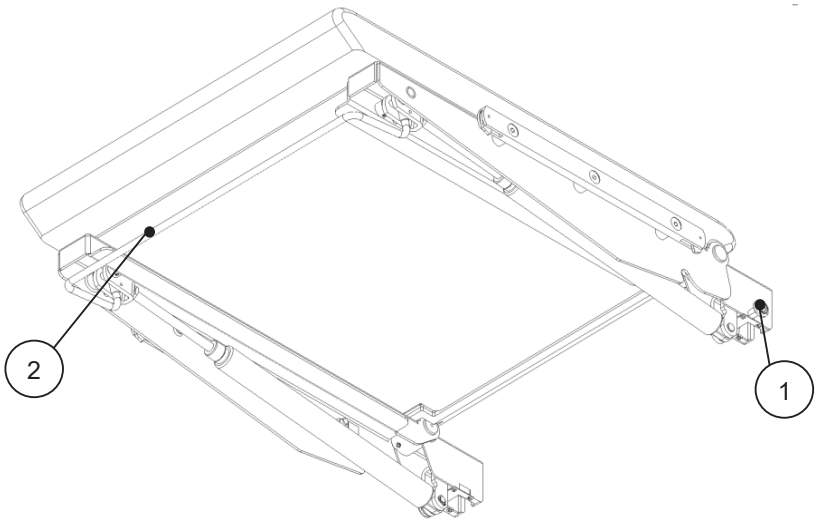


Fig. 8 Footrest plate

Caution!

When lowering the footrest, pay special attention do not put your hands between moveing parts.

Make sure that the footrest is installed correctly by trying to take it off when locked. A properly locked footrest cannot be removed from the seat.

3.9 Leg rest segment mounting and angle adjustment

Leg rest segments (Fig. 1, item 3) may be attached to and detached from the seat segment using a button-controlled mechanism (Fig. 10, item 1). To detach the leg rest segment, hold the underside of the segment, press and hold the button and lift the segment upwards until it is released from the seat segment spigot (Fig. 1, item 2). To attach the leg rest segment, mount the leg rest segment socket on the seat segment spigot. Do not press the button, the leg rest segment will set in appropriate position automatically and lock on the spigot. Leg rest angle can be adjusted within the range specified in the technical data by lifting the lever (Fig. 1, item 11) and moving the leg rest segment up or down to the

required position. When the lever is released, the mechanism locks and leg rest position is set.

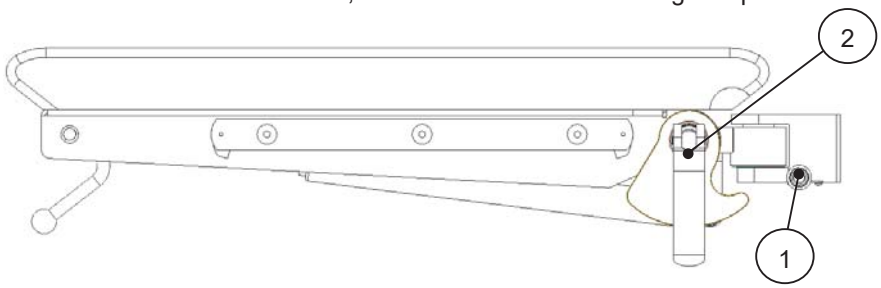


Fig. 9 Operating table leg rest segment

CAUTION!

With the Trendelenburg / reverse-Trendelenburg function, leg rest may collide with the table support!

Every time before table activation, ensure that patient's position corresponds to the orientation of the longitudinal tilt function (Trendelenburg / reverse-Trendelenburg) on the hand controller panel. If not, switch the orientation of the longitudinal tilt function on the hand controller.

Make sure that the leg rest is mounted properly by attempting to detach it. Properly locked leg rest will not detach from the seat segment.

Make sure that the lever is in proper position!

3.10 Installation and operation of the headrest

The headrest is fastened on installation wedges which are situated at the end of the backrest segment using a knob. When the headrest is put on the stripe, one should determine its position by screwing down the screw (fig.1, item 8). The headrest is dismounted by unscrewing of the screw and removal of the headrest from the stripe. The angle of the headrest is changed similarly to the backrest segment, that is, by the handle which moves the mechanism of the gas spring. When the lever is pressed (fig.1, item 6), the required angle of the headrest may be chosen. Its release locks the headrest in the chosen position.

Caution!

Make sure that the headrest is correctly locked!

3.11 Installation and disassembly of mattresses

All mattresses can be removed without any tools. They are fixed on fixing pegs

3.12 Table mobility

Wheels installed in the base of table make it possible to move it in every direction. The table is equipped with movement lock used during operations and treatments performed on the table.

The table is equiped with central blockades of wheels. The central blocking pedal has three position:
- Upper - direction blockade (fig.10, pos.3),
- Middle (horizontal) - blockade released (fig. 10, pos.1),
- Lower - all castors blocked (fig.10, pos.2).

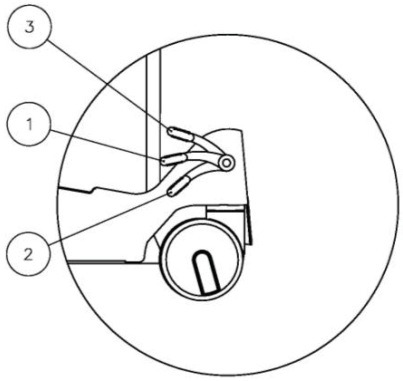


Fig.10

The direction blockade is used during the table movement on long, straight sections and makes it easy to turn the table. All castors brake causes a total bed immobilization.

Caution!

Throughout surgical procedures table wheels should be blocked.

Table should be move by 2 people at least.

Do not move table with workload (patient) through inclines and outside of buildings).

Table should be move in minimal height.

The floor under the table must be free from any obstacles!

When rolling the table avoid collisions!

Do not roll the table over electric cables!

3.13 Antistatic properties

A table structure allows for drainage of electrostatic charge through the following channels:

- By antistatic wheels to conducting floor,
- By potential equalisation clamp.

Operating table SU-14 should be used on antistatic floor. In case of lack of such floor, an electrostatic charge is drained through a potential equalization line. The potential equalising conductor is a standard table accessory.

Antistatic properties of the table shall be maintained if mattresses produced by FAMED Sp. z o.o. are used.

3.14 Potential equalising clamp

Operating table have inside system of potential equalization leading to the clamp (fig. 1, item pos. 16) marked by symbol .

Caution!

Throughout surgical procedures the table must be connected to the installation of potential equalization in the operations room.

The cable is provided in standard table accessories

3.15 Collisions

In some extreme positions of the table, in particular, when accessories installed on side stripes are used, mechanical collisions may take place. Because of that, one should protect the table and accessories from damages.

3.16 Battery charging

A charger built-in in the table makes it possible to charge the batteries in the table.

In order to charge batteries, connect a power supply cord to a socket in a table and set a switch (fig.1, item 17) in position „I”. The batteries are charge automatically.