MEDICAL POSITIONING
INCORPORATED

Owner's Manual

UltraScan™ Table

Owner _____

Model _____

Serial # _____

Date _____

Medical Positioning, Inc.
1717 Washington St. Kansas City, MO 64108 | T: 816-474-1555 | 1-800-593-3246
www.MedicalPositioning.com

072009

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MEDICAL POSITIONING, INC.
1717 Washington Street
Kansas City, MO 64108

UltraScan ™ Table

Maximum Distributed Load:	1000 Lbs
Voltage:	120 VAC
Amperage:	1.6 Amps
Leakage Current:	<100 uA
Cycle:	60 Hz
Duty Cycle:	10%

UL 60601-1 CLASSIFICATIONS:

-Class 1 Equipment
-Type B Applied part
-Degree Of Protection Against Ingress Of Water / IPX0
-Equipment Not Suitable For Use In Flammable Anesthetic Mixture

All electrical circuitry is isolated from chassis.

Grounding reliability can only be achieved when the equipment is connected to an equivalent receptacle marked “Hospital Only” or Hospital Grade”. The power cord is to be used for mains disconnection.

3KA7


Type B
Applied Part


Attention
Consult Accompanying
Documents


Protective Earth

MEDICAL EQUIPMENT WITH RESPECT TO ELECTRICAL SHOCK, FIRE AND MECHANICAL HAZARDS ONLY IN ACCORDANCE WITH UL 60601-1 AND CAN/CSA c22.2 NO. 601.1

Grounding reliability can only be achieved when the equipment is connected to an equivalent receptacle marked “Hospital Only” or Hospital Grade”

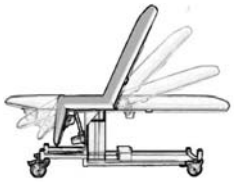
Transportation and storage:
Temperature range within -40 to +70 degrees C
Relative humidity range within 10% to 100%
Atmospheric pressure range within 500 to 1060 hPa

Section I

UltraScan Table™ Set Up

Introduction

Your UltraScan™Table has been pre-assembled and tested to ensure perfect operation on day one. Please closely inspect it when you receive it to ensure no damage has occurred during shipment. Because it is a complex piece of equipment you are offered the following precautions.



UltraScan™ Table

To Avoid Injury or Damage

Foot-Drop Section: The Foot-drop section is designed to comfortably and safely support the patient's legs at times when the foot stirrups are not used.

CAUTION

The foot-drop section is designed to support more weight than patient's legs alone but it is a collapsible and/or removable section and is not designed to support full patient body weight. Never allow the patient to apply full body weight to the extended foot-drop section portion of the table while entering or exiting the table. Have the patient enter and exit the table from the side or from the foot end with the foot-drop section lowered.

REVERSE TRENDELENBURG (foot end down) SAFETY NOTICE - PLEASE READ

Certain models are capable of more than a 15 degree reverse Trendelenburg. These models are supplied with a folding footboard that MUST BE USED IN THE UPRIGHT POSITION WHEN TILTING THE TABLE MORE THAN 15º REVERSE TRENDELENBURG (foot end down) to prevent patient from sliding off of table surface.

- To reduce the risk of electrical shock, do not remove secured covers. Refer servicing to qualified personnel.
- Lock all casters before using equipment.
- Place hand wand on hook or holder when not in use. Keep cable clear of moving parts.
- Grounding reliability can only be achieved when the equipment is connected to an equivalent receptacle marked "hospital only" or "hospital grade".
- Protect vinyl upholstery from sharp objects and abrasion to avoid damage.
- Refer to instructions located in this manual for vinyl cleaning recom mendations.
- Do not use abrasives to clean painted surfaces.
- Risk class is 2G.--120 VAC, 50 to 60hz

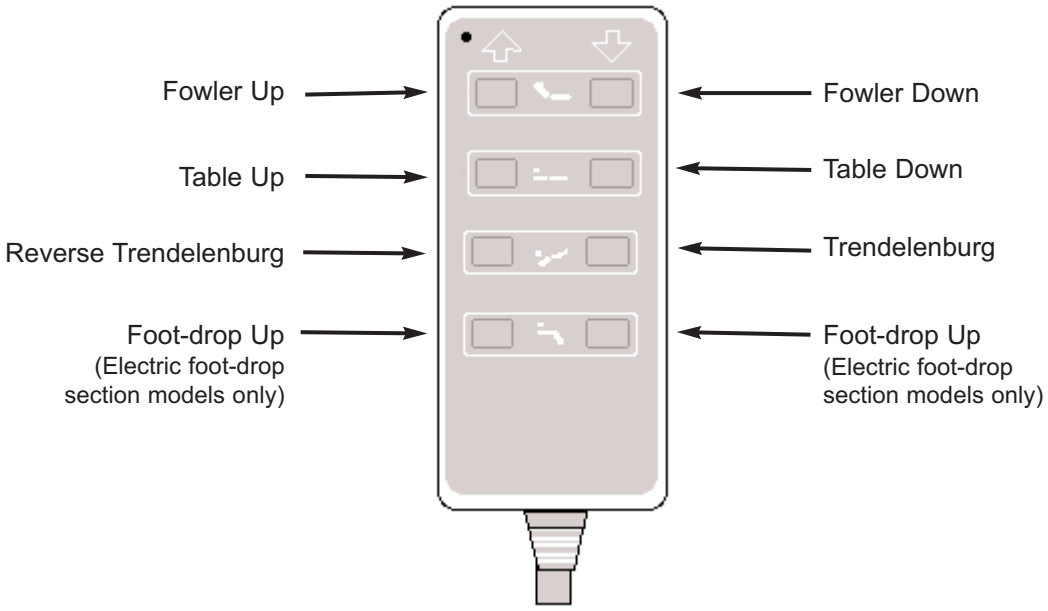
In This Section

Your UltraScan™Table has been shipped to you in “plug and play” condition. In this section you will learn how to use the handwand and perform an initial test of your UltraScan™Table to ensure that each function is in correct working order. After reviewing this manual you are ready to begin using your UltraScan™Table.

System Test Procedure

The hand-wand is a low voltage, DC operated device. The cable begins at the hand wand and plugs into the control box.

Step	Action
1	After removing padding and packaging materials, locate primary power supply cord and attach to suitable grounded 120 VAC outlet.
2	To test actuator function, locate the hand-wand and depress each function button one at a time. (Depressing multiple buttons simultaneously will prevent the motor from operating.) Figure 1.
3	If any function does not operate, perform the test procedures listed in the “Troubleshooting Guide” located in this manual.



UltraScan™ Table
Hand Wand
Figure 1

Safety Features

In This Section

This section lists the safety features built into your UltraScan™ Table.

Safety Features

This product is equipped with multiple automated safety features to prevent danger or damage during use. The entire system is electrically isolated to UL/IEC 60601-1 and CAN/CSA c22.2 No. 601.1 hospital safety standards

The actuator assemblies are current overload protected. If overloaded, the actuators will stop and reset automatically.

The sealed hand-wand operates the actuators by directing small amounts of low voltage D.C. current to the control box. All of the actuator drives are equipped with internal limit switches which automatically prevent over-extension.

The tables are equipped with total locking, sealed bearing, braking casters at all four corners.

A level indicator is located on the sides of the table surface allow quick repositioning to level after Trendelenburg procedures.

Operation

Introduction

Your UltraScan™ Table is shipped assembled and resdy for use. Each function has been pre-tested to ensure perfect working order on day one. A **"Troubleshooting Guide"** is included to instruct you in the event of a malfunction.

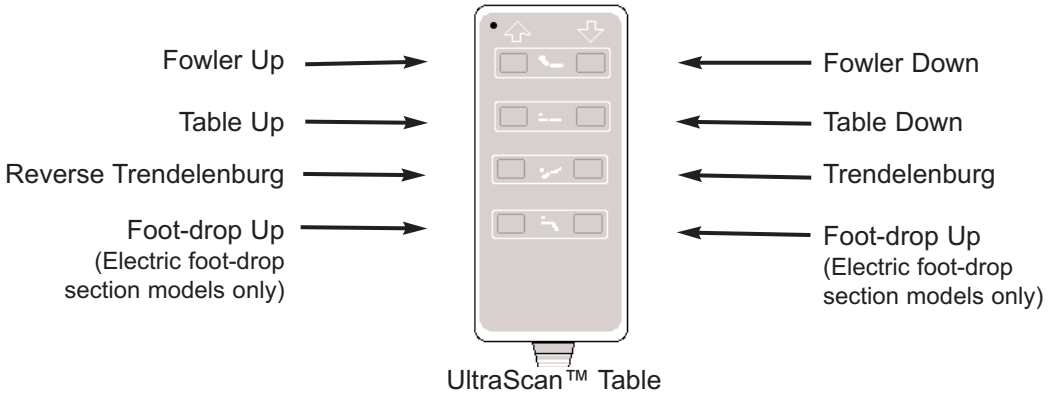
In This Section

You will be provided with a basic understanding of the UltraScan™ Table including:

- Using the hand-wand
- Foot stirrups
- Caster use

Hand-Wand Procedure

The hand wand is a low voltage device. The cable begins at the hand wand and plugs into the control box on the other end.



UltraScan™ Table
Hand Wand
Figure 2

The hand-wand attaches to the table in one of the two (2) following ways: Tables with safety rails - The hand wand has a hook installed on the back which is designed to hang on the safety rails.

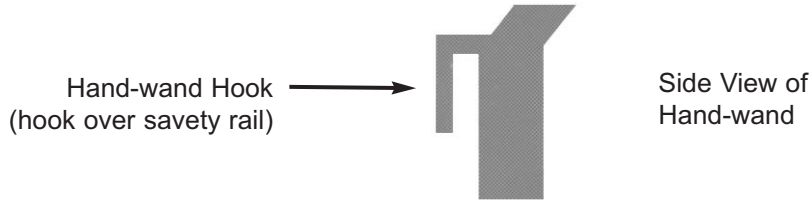


Figure 3

Tables without safety rails - The hand-wand has a Velcro strip on the back and the table has Velcro on the side. Additional Velcro can be used to place the hand-wand in the most convenient place for the end user.

Stirrup Use and Storage

The stirrup assemblies are conveniently stored on the underside of middle section of the UltraScan™ Table when not in use. When needed, they are horizontally adjustable and will lock in place anywhere along the travel of the support bars. The stirrup itself is folded down for storage and, when the support bar is extended, is easily rotated up for use. The stirrup assemblies also have two locking, horizontal positions, inward and outward, that may be accessed by slightly lifting the outer part of the assembly and moving it closer to or farther from the center of the table. The following instructions will guide you through the operation of the stirrup assembly.

Stirrup Use

NOTE: The stirrup assemblies are equipped with a simple locking feature to avoid unwanted extension on tables equipped with reverse Trendelenburg when the table is placed in the foot-down position.

If the stirrup assemblies are in the storage position, grasp the end of the assembly and apply slight downward pressure before pulling the assembly from the storage position. This releases the locking feature and allows you to pull the assembly from beneath the tables' surface.

Pull one of the assemblies to it's full extension and rotate the stirrup to it's upright position. Repeat this procedure with the other stirrup assembly. The stirrup assembly may be used in this position or adjusted as desired.

If it is desirable to place the stirrup closer to the end of the table, simply slide the support bar to the desired position. Placing weight (the patient's foot) on the assembly will frictionally hold it in place.

If it is desirable to place the two stirrups closer together or farther apart, slightly lift the end of the support bar and rotate it inwardly or outwardly to one of the two locking positions.

Stirrup Storage

The stirrup assemblies store under the middle section of the UltraScan™ Table when not in use. The following instructions will guide you through the storage of the stirrup assembly.

Rotate the stirrup forward to it's lowered position. Grasping the end of the assembly, slide the assembly under the middle section of the table.

Manually Operated-Removable foot-drop section (select models)

The foot-drop section is designed to comfortably and safely support the patient's legs at times when the Foot Stirrups are not used.

CAUTION

The foot-drop Section is designed to support more weight than patient's legs alone but it is a collapsible and or removable section and is not designed to support full patient body weight. Never allow the patient to apply full body weight to the extended foot-drop section portion of the table while entering or exiting the table. Have the patient enter and exit the table from the side or from the foot end with the foot-drop section lowered.

REVERSE TRENDELENBURG (foot end down) SAFETY NOTICE - PLEASE READ

Certain models are capable of more than a 15 degree reverse Trendelenburg. These mod els are supplied with a folding footboard that MUST BE USED IN THE UPRIGHT POSITION WHEN TILTING THE TABLE MORE THAN 15º REVERSE TRENDE LENBURG (foot end down) to prevent patient from sliding off of table surface.

The manually operated / Removable foot drop section is easily operated in the following manner. Keep fingers away from the detachable pivot area. Use caution to not drop the foot section when removing from the table.

Step	Action
Lowering:	Slightly lift the foot end of the foot-drop section and pull back approximately 1 inch. Carefully lower the foot-drop section until it is in a Vertical position.
Raising:	Grasp the foot-drop Section near the bottom and swing it up to a position slight ly above horizontal. While in this position, push the foot-drop section in to engage the pivot locks.
Removal:	Begin by placing the foot-drop section in the lowered position. Grasp the foot-drop section on the sides and lift straight up. Use caution to not drop when removing from the table.
Installation:	Grasp the foot-drop section on the sides and hold it vertical with the pivot brackets pointing up. While in this position, carefully place the foot-drop section's pivot brackets onto the receivers mounted to the sides of the table frame and allow the Foot Drop Section to hang in a vertical position. Raise the Foot Drop Section following the Raising instructions above.

Removable Collection Tray (select models)

The removable collection tray is included on UltraScan™ Tables equipped with the Manually Operated/Removable foot-drop section and posterior cut-out. The tray is easily removed and replaced when the foot-drop section has been removed from the table. The tray may be cleaned and sterilized using normal methods. A disposable, plastic head bonnet may be used as a disposable liner for the tray.

Caster Use for Individual Lock Casters

The casters installed on your UltraScan™ Table are total locking casters. When in the locked position, the caster is prevented from both rolling and swiveling. Before beginning any procedure involving a patient, be sure the casters are in the locked position.

Step	Action
1	To lock the caster, step down on the outermost edge of the black locking tab located at the top of the caster wheel. (See Figure 4)

To lock

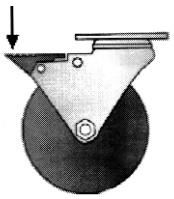


Figure 4

2	To unlock the caster step down on the top, innermost edge of the locking tab OR lift up on the outermost edge of the tab. (See Figure 5)

To unlock

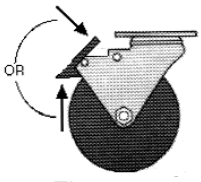


Figure 5

Drop-Section (select models)
Imaging Window Only

The drop-section is designed to be opened or closed easily with one hand. ***Do not place other hand within the drop-section area during operation.***

Step	Action
1	To open the drop-section, locate the metal handle mounted on the bottom of the drop-section at the front edge. (See Figure 6)

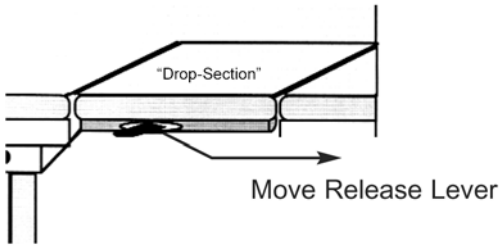


Figure 6

2	Pulling the handle outward, from under the drop-section, will release the latch mechanism and allow the drop-section to swing open. Do not abruptly yank or jerk on handle, it is designed to work with a smooth, steady pull.
3	To close the drop-section, grasp the pull tab (fabric loop) located on the front edge of the drop-section and lift the drop-section smoothly until it is securely in the full, upright and locked position. (See Figure 7)

Figure 7

I*t is not necessary to "slam" the drop-section closed. Slamming the drop-section closed will startle the patient and may result in damage to the mechanism*. After closing, always lift up on the drop-section to assure that is totally locked before patient entry or exit

Dual Drop-Sections / Remote Drop-Section Operation

The imaging window drop-section and the Sonographer's entry drop-section are designed to be opened or closed easily with one hand. Additionally, the imaging window drop-section may be opened remotely by using the remote release handle conveniently located adjacent to the Sonographer's entry drop-section. Follow Steps 1 and 2 for manual operation of either drop-section, and proceed to Step 3 for remote operation of the imaging window drop-section. ***Do not place hands within the drop-section area during operation.***

Step	Action
1	To open the drop-section, locate the metal handle mounted on the bottom of the drop section at the front edge. (See Figure 8)

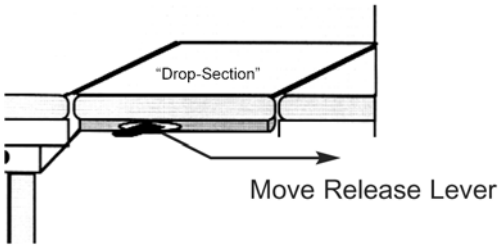


Figure 8

2	Pulling the handle outward, from under the drop-section, will release the latch mechanism and allow the drop-section to swing open. Do not abruptly yank or jerk on handle, it is designed to work with a smooth, steady pull. *To close either drop-section, proceed to Step 4*
3	**To use the remote release for the imaging window drop-section**, position the patient in left lateral decubitus position, pull out on the lever handle far enough to allow the imaging window drop-section to open. You can accomplish this step while seated. (See Figure 9)

Figure 9

Dual Drop-Sections / Remote Drop-Section Operation (cont')

Step	Action
4	To close the drop-section, grasp the pull tab (fabric loop) located on the front edge of the drop section and lift the drop-section smoothly until it is securely in the full, upright and locked position. (See Figure 10)

Figure 10

I*t is not necessary to "slam" the drop-section closed. Slamming the drop-section closed will startle the patient and may result in damage to the mechanism*. After closing, always lift up on the drop-section to assure that is totally locked before patient entry or exit

Maintenance and Cleaning

Preventative Maintenance

The following Preventative Maintenance should be performed annually:

- Visually inspect all mechanical assemblies and moving parts on the product insuring smooth, steady operation
- Visually inspect all fasteners (bolts, nuts, screws, etc.) to insure all are fully installed. Tighten as necessary.
- Visually inspect all electrical cables and wires for signs of abrasion or other damage. If damaged, replace.
- Visually inspect all electrical connections to insure they are fully and properly connected. Reconnect as necessary.
- Visually inspect the hand wand or foot control. If damaged, replace.
- Operate all drop-section latch mechanisms to insure proper engagement of latch into receiver. Adjust if necessary.
- Operate all motors to insure full extension, retraction and correct operation. The motors are permanently lubricated and require no maintenance.
- Operate all accessories to insure proper attachment and operation. Tighten, adjust or replace if necessary

Remote Release Maintenance

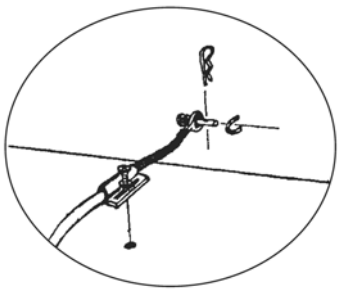
The UltraScan™ Table has a remote release drop-section for right-handed scanners. The remote release mechanism may require minor adjusting after use. If you find that the remote release is not working as it should, please proceed with these instruc tions.

Tools Required

Phillips Head Screwdriver

Procedure

This procedure is performed with the drop-section closed. Located under the imaging window drop-section is the control cable for the remote release handle. (See Figure 11) The cable is equipped with an adjustable mounting tab. Should it be necessary, adjustment is performed in the following manner.



View of Remote Release Cable Installation

Figure 11

Remote Release Maintenance (cont.)

The following may help you determine whether you need to tighten the cable or loosen the cable.

Tighten the cable: When opening the imaging window using the remote release, the drop-section does not respond properly. In this event, follow steps 1, 2, and 4.

Loosen the cable: When closing the drop-section after use, one or both sides of the drop-section do not fully engage or latch securely. In this event, follow steps 1, 3, and 4.

Step	Action
1	Locate and loosen the Phillips Head screw that holds the mounting tab in place. (See Figure 12)

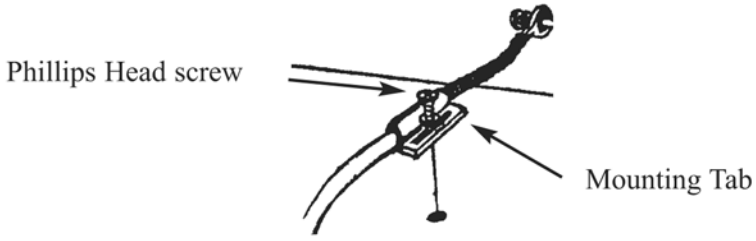


Figure 12

2	To tighten the cable, (take up the slack in the cable) slide the mounting tab towards the center of the bed. (See Figure 13) ***Be careful when tightening the cable, (moving the mounting tab). Only tighten enough to take-up slack in the cable. Taking up too much slack in the cable may prevent the drop section latch from fully engaging.***
3	To loosen the cable, (increase slack to allow more secure closure) slide the mounting tab away from the center of the bed. (See Figure 13)
4	Re-tighten the Phillips head screw in the mounting tab to lock-in the adjustment.

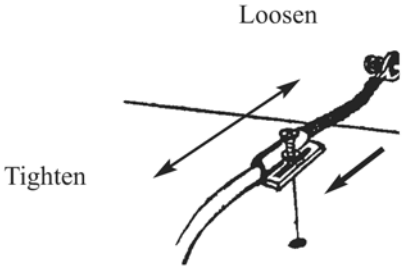


Figure 13

Non-Pinch Closure

The non-pinch closure flaps, located at the back edge of both the imaging window drop-section, and the Sonographer's entry drop-section prevent the patient from being pinched when either drop section is closed after imaging.

Examine the non-pinch closure flap with the drop-section open and closed. The flap attaches to the bed surface with hook and loop tape that has been permanently attached to the surface.

The drop-section should not be operated without the non-pinch closure flap in place. The flap is attached to the bed with hook and loop tape and can easily be adjusted whenever necessary. (See Figure 14)

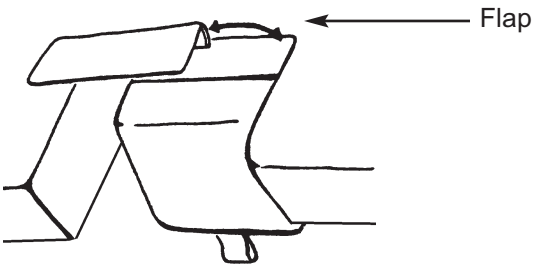


Figure 14

Occasionally the flap may become bent or creased. When that occurs, remove the flap from the bed surface by separating the hook and loop tapes. Next, return the flap back to original shape by bending it farther in the opposite direction of the bend or crease and allowing it to spring back to flat.

Should the flap require replacement, you may order one through Medical Positioning, Inc. at 1-800-593-ECHO (3246).

Cleaning Instructions

Please note that substances such as imaging gels and alcohol will not damage the vinyl surface when immediately removed. Studies have shown that exposure for longer than a few minutes can damage the top coat and will eventually discolor vinyl.

The painted metal and plastic surfaces can be cleaned with normal cleaners and disinfectant.

Step	Action
1	Clean and/or disinfect with liquid cleaner of choice being careful to follow label instructions provided with cleaner. (Always test a small area first to determine suitability of solution)
2	Wipe the surface clean with a wet cloth after applying cleaners and disinfectant to remove excess residue buildup.

ALWAYS READ MANUFACTURERS INSTRUCTIONS AND WARNINGS BEFORE USING ANY CLEANING PRODUCT OR DISINFECTANT.

The vinyl upholstered surfaces can be cleaned in one of the following ways:

Step	Action
1	When caught quickly, most everyday stains like grease, blood and black felt tip pens can be wiped right off. Use mild soap and water. For more stubborn stains, a variety of concentrated and solvent type cleansers may be used without damaging the surface (including alcohol, naphtha and bleach), as long as they are thoroughly rinsed off with water. Abrasive household cleaners and steel wool should be avoided - see the guide for complete care and cleaning procedures
2	Everyday soil can usually be removed using a soft cloth or sponge with mild soap and water. Spills and accidents require immediate attention for best results. In many cases, stains may be cleaned simply with warm water alone. If the stain is allowed to set, more concentrated cleaners may be required.

Cleaning Instructions (cont.)

The following guide covers many of the most common staining agents. During independent laboratory testing, many were allowed to stand for up to 40 hours with excellent cleaning results.

Generally speaking, always start with the mildest cleaning agents first. **Never use harsh powdered abrasive cleansers or steel wool.** Products containing bleach, ammonia or alcohol (Lysol™) should be wiped from the surface with a wet cloth after use. Residue from these products will damage vinyl surfaces

Step	Action
1	Remove excess spill with damp cloth. Clean with 1:1 mix of Ivory™ soap and water. Rinse with clean water and dry.
2	Use straight application of concentrated cleaners such as Formula 409™ or Fantastik™ Spray Cleaner. Then wipe with clean cloth.
3	Use a 1:1 mix of ammonia and water or a 1:4 mix of bleach and water. Rinse with clean water and dry.
4	Use straight application of naphtha (lighter fluid). Rinse thoroughly with clean water and pat surface dry. (see note below)
5	Use 1:1 mix of isopropyl alcohol and water. If stain persists, use straight alcohol. Rinse thoroughly with clean water pat surface dry. If stains remain, use a 1:1 mix of acetone and water. Rinse with clean water and pat sur face dry. (see note below)

Note: For cleaning that requires steps 4 or 5 - use a soft cotton cloth saturated with the cleaning material, rub the stain in circles 10 times. Pat dry with another soft cotton cloth and check results.

This information is not a guarantee and does not relieve the user from the responsibility of the proper and safe use of the product and all cleaning agents.

Formula 409™ is a trademark of the Clorox Company.
Fantastik™ Spray Cleaner is a trademark of the Texize Division of Dow consumer Products, Inc.
Ivory™ is a trademark of Procter and Gamble
Lysol™ is a trademark of Reckitt & Colman Inc.

Warranty

UltraScan™ Table

1 Year - Parts and Labor

This product is fully guaranteed against defects in material or workmanship, for the period indicated above commencing with receipt by the original end user. If a product fails due to a manufacturing defect, we will repair or authorize repairs to the product without charge or replace it at our option.

We use only the finest materials available, but even these premium quality materials will not last forever. Repairs due to normal wear, accident, improper care, or negligence, where we are not at fault, will be performed for a reasonable charge. The warranty does not apply if the product has been modified without the advance written permission of Medical Positioning, Inc.

Medical Positioning, Inc. makes no other warranty, either expressed or implied, with respect to this product. Medical Positioning, Inc. specifically disclaims the implied warranties of merchantability and fitness for a particular purpose.

The remedies provided herein are customer's sole and exclusive remedies. In no event shall Medical Positioning be liable for any direct, indirect, special, incidental, or consequential damages, whether based on contract, tort, or any other legal theory.

Product shall not be returned to Medical Positioning Inc. without prior written authorization from Medical Positioning, Inc. If a product is returned without prior authorization, customer is responsible for all shipping charges and any applicable duties and/or taxes. When a repair is made on site, (solely) at the request of the customer, the customer is responsible for all travel costs.

FDA Registered Establishment **FDA Listed**

U.S. Patents: 6,353,949 B1; 5,950,262; 5,919,131; 347,691; ,184,363; 5,461,739; 6,367,104 B1; 5,250,262; 5,367,104 B1; 6,832,399 B2; 6,557,196 B2; 7,082,268: **International Patents:** 195 81 706; 2,304,568; Additional Patents Pending

WARR1098

Medical Positioning, Inc.
1717 Washington St. Kansas City, MO 64108 | T: 816-474-1555 | 1-800-593-3246
www.MedicalPositioning.com

Troubleshooting Guide

A **"Troubleshooting Guide"** is included to instruct you in the event of a malfunction. If you are experiencing any of the following symptoms, this guide may help you quickly solve the problem. If, after consulting this guide, you are still unable to operate your Table please contact Medical Positioning at 1-800-593-3246. Please have the following information ready when you call:

1. Model Number or Name of Product
2. Date Received
3. Condition When Received
4. Symptom (or problem) Encountered & Result of Troubleshooting Procedure

Product Incident Reporting Procedure

In the event of a product malfunction or patient injury, please immediately report the incident to:

1._____
(The distributor you purchased the product from)

2. Medical Positioning, Inc.
www.medicalpositioning.com
011-816-474-1555 or
Medical Positioning, Inc 1717 Washington Kansas City, MO 64108

Symptom	Probable Cause	Suggestion
No Actuator Function Actuator(s) Not Running	Power cord not plugged all the way in wall receptacle	Push power cord securely into receptacle.
	Power outlet receptacle not supplying 120 VAC power	Check power availability or plug unit into another receptacle
	The power cord may be separated from the control box	Inspect power availability light on control box (See Figure 26)
	On supine ergometer units, the power strip circuit protector may be tripped	Check circuit protector to ensure that it is not tripped
	Hand wand not properly connected to control box	Securely press end of hand-wand power cord into control box. Inspect control box continuity light on hand wand.
	Actuator power cord not fully connected to control box	Securely press end of actuator power cord receiver (figure 26)

Illustrations

The following illustrations correspond with the instructions outlined in the **“Troubleshooting Guide”**

Figure 15

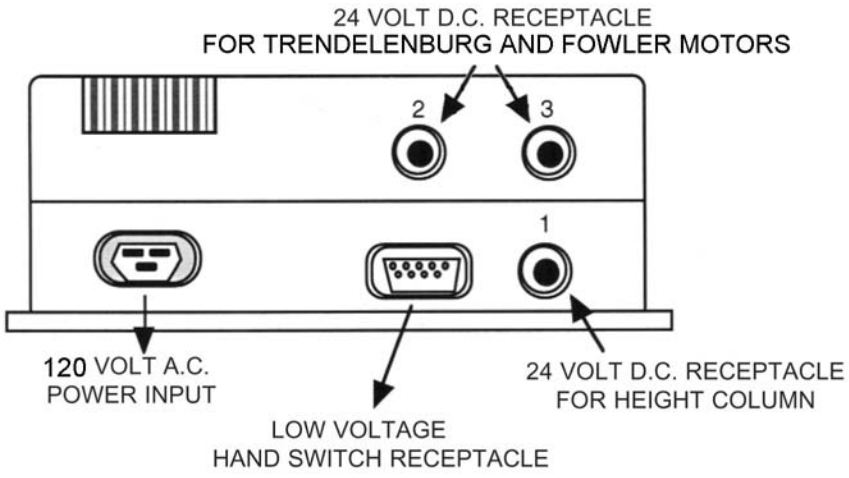


Figure 16

Section II

UltraScan™ Table Parts List

INVENTORY #	DESCRIPTION
11881	ULTRASCAN BASE FRAME
11848	ULTRASCAN TABLE FOOT DROP DOWN SWITCH BRACKET
11849	ULTRASCAN TABLE TOP PLATE 11956 FOWLER ADJ. SCREW
11973	ULTRASCAN TABLE 15º/25º FOOTBOARD HINGE BRACKET, LOWER
11974	ULTRASCAN TABLE 15º/25º FOOTBOARD HINGE BRACKET, UPPER
11836	ULTRASCAN TABLE STATIONARY FRAME
11802	ULTRASCAN TABLE FOOT DROP SECTION
10845	CALF REST POLE
10710	LATCH COVER
10689	WASHER CLAMP
10220	TRENDELENBURG SHAFT
10691	500 SERIES DUAL D.S. RELEASE LEVER BRACKET
10373	COLUMN BRACKET
11026	VAS SCAN & MULTI SCAN TABLE UPPER FRAME
10752	FOWLER S.D.S. UPPER TABLE FRAME
10770	DROP SECTION STOP BAR
10454	HINGE PIN
10956	FOWLER UPPER D.D.S. TABLE FRAME
11936	ULTRASCAN TABLE ELECTRIC FOOT D.S. CIRCUIT BOX ASSEMBLY
11049	ACTUATOR, TLG10-ADXXA-022 (HEIGHT)
10729	ACTUATOR, MAX30-A130345A1710A-000 (TREND)
10729	ACTUATOR, MAX30-A130345A1710A-000 (FOOT DROP)
11976	ACTUATOR, MAX30-A110325A///00
11869	CONTROL BOX, KOM14-020A-000 (W/ TREND)
10728	CONTROL BOX, KOM33-20a-000 (NON-TREND)
10867	LEGREST, PAD#440p2=1-7
11090	KNOB, BLACK PLASTIC #CL-10-PPK-2
11737	PLUG, 1 1/4” SQUARE BLACK PLASTIC #9565K15
10239	LEVEL 5” 10350 LATCH, #AE3/22388
10351	HANDLE, #PIN100
10598	HINGE, DROP SECTION
10376	CHAIN, #10 STAINLESS STEEL BEAD
10349	SPRING, LATCH #C28S/C28C
10377	COUPLING, CHAIN END
10582	REMOTE D.S. RELEASE LEVER
10378	CLEVIS PIN, 3/16 X 3/4” 10379 COTTER, HAIRPIN
10637	I.D.TAG
10969	BEARING, BRONZE .875 ID
10271	ACTUATOR BUSHING SET
10528	PUSHNUT 1/2” #94803A033
10277	COLLAR, SET SCREW 7/8” ID
11878	UPHOLSTERY, ULTRA SCAN TABLE-NO D.S.
11879	UPHOLSTERY, ULTRA SCAN TABLE S.D.S.
11880	UPHOLSTERY, ULTRA SCAN TABLE, D.D.S
41900	UPHOLSTERY, ULTRA SCAN TABLE, 3 PIECE FOOT BOARD UPHOLSTERY

Section III

Accessories

Collapsible Safety Rail Operation

Introduction

Collapsible Safety Rails are an accessory item that may have been purchased on your Stress EchoBed® or may be installed at a later date.

In This Section

You will be instructed on how to operate the collapsible safety rails.

Collapsible Safety Rail Operation Procedure

Step	Action
1	To remove the safety rail, hold the safety rail with one hand (to prevent it from dropping) while you pull the release button with the other hand. (See Figure 8)
2	To lower or replace the safety rail, pull the release button, insert and lower the safety rail all the way down. Let go of the release button.
3	To raise the rail, lift the safety rail until the locking tab of the release button engages the locking hole in the safety rail preventing it from further movement.

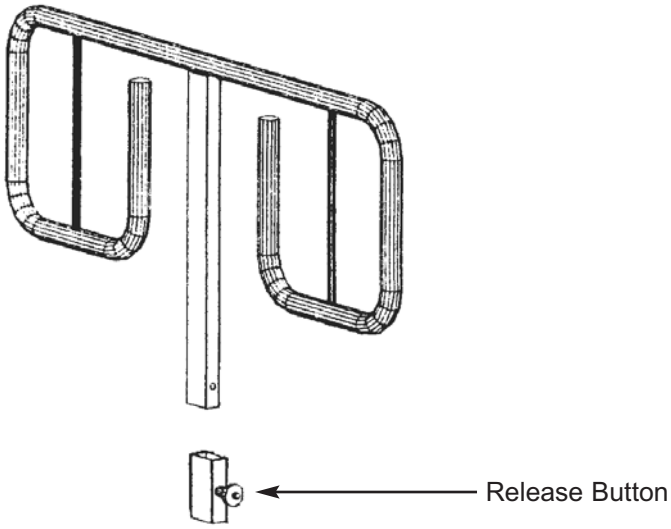


Figure 8

Arm-board (Optional on UltraScan™Table)

The arm-board is packaged separately during shipment to avoid possible damage.

To install the armboard:

Step	Action
1	Loosen the handwheel (located on the side of the arm-board receiver by rotating it counter-clock wise).
2	Insert the arm-board support tube into the arm-board receiver as shown above and secure the arm-board by rotating the handwheel clock-wise.
3	The angle of the armboard can be adjusted by loosening the handwheel and rotating the arm board. Always tighten the armboard before use.

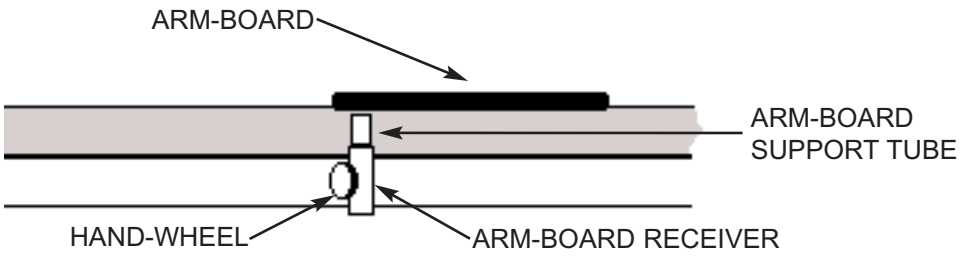


Figure 9

Carotid Head-rest Assembly (Optional on Ultrascan™Table)

The headrest is packaged separately during shipment to avoid possible damage.

To install the headrest:

Step	Action
1	Loosen the horizontal adjusting hand (located on the bottom of the upper bed frame, near the head of the bed).
2	Insert the horizontal support tube into the mounting bracket as shown above and secure the head-rest in place by rotating the horizontal adjusting handle in a clock-wise direction.
3	Vertical adjustment of the head-rest can be achieved by loosening the vertical adjusting knob and lifting the head-rest to the desired height.
4	The angle of the head-rest can be adjusted by rotating it at the point it is joined to the vertical support tube. The tension of the swivel mechanism can be adjusted by tightening or loosening the three (3) tension adjusting bolts shown above. (4mm Allen Wrench required).

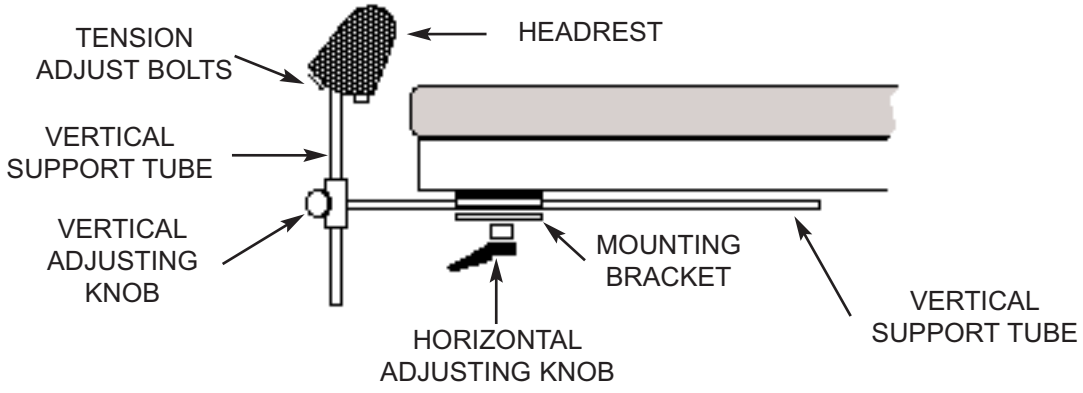


Figure 10

Leg-rests (optional on UltraScan™ Table)

The Leg-rests are packaged separately during shipment to avoid possible damage. The leg-rests are designed to be installed on the support bars of the stirrup assemblies through the use of a special clamp bracket and hand wheel. Once installed, the clamp bracket may be left in place when the leg rests are removed or the complete leg-rest assembly may be removed. The following instructions will guide you through installation, use and removal of the leg-rests.
To install the Leg-rests:

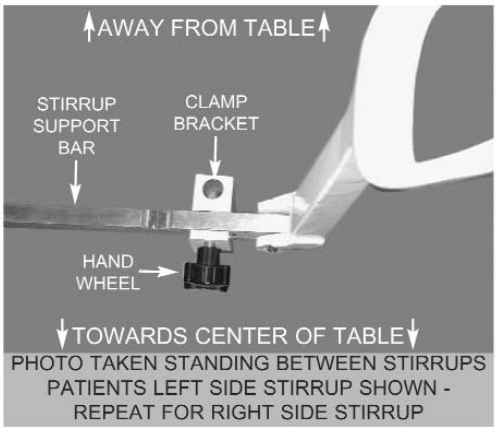
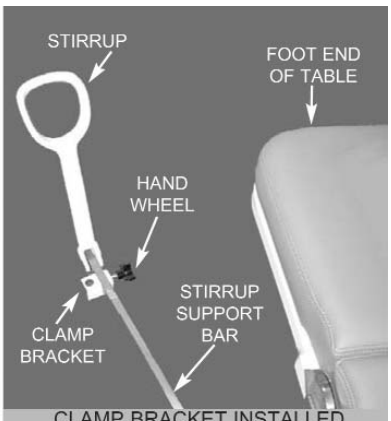


PHOTO TAKEN STANDING BETWEEN STIRRUPS
PATIENTS LEFT SIDE STIRRUP SHOWN -
REPEAT FOR RIGHT SIDE STIRRUP



CLAMP BRACKET INSTALLED
ON STIRRUP SUPPORT

Steps	Action
1	The stirrup assembly support bars have a 5/16" diameter threaded hole located 3 inches from the stirrup end of the bar. Slide the clamp bracket onto the bottom of the bar in line with the hole and place the threaded stud of the hand wheel through the hole in the clamp bracket as shown in Diagram 1. Rotate the hand wheel clockwise to engage the threads in the support bar. Continue rotating the hand wheel until you can see the end of the threaded stud entering the smooth, round hole in the top of the clamp bracket and stop. Slightly rotate the hand wheel counter-clockwise enough so the threaded stud is not protruding into the smooth, round hole (see Diagram 2).
2	Insert the leg-rest rod into the smooth, round hole in the top of the clamp bracket and place the Leg-rest at the desired height and angle.
3	While holding the leg-rest in the desired position, tighten the hand wheel by rotating it clockwise causing the end of the threaded stud to tighten against the leg-support rod.

Leg Rests (continued)

Use

The leg-rest can be adjusted vertically and horizontally by loosening the hand wheel, repositioning the leg-rest and re-tightening the hand wheel.

The pad of the leg-rest can be adjusted for patient comfort by tilting or rotating the pad to the desired position.

Removal

When not in use, or when you desire to use the stirrups, the leg-rest is easily removed by slightly loosening the hand wheel and pulling the leg-rest rod out of the clamp bracket. Once installed it is not necessary to remove the clamp bracket, but it can be removed by rotating the hand wheel counter-clockwise until it is disengaged from the threaded hole in the stirrup support bar.

I.V. Pole Holder

Introduction

The I.V. Pole Holder is mounted near the head-end of the bed. If an alter native mounting position is desired, it can be repositioned by removing the two(2) phillips head screws from the bottom of the bracket, moving to the alternative position and re-installing the two(2) phillips head screws.

I.V. Pole Holder Procedure

Step	Action
1	Insert 1/2” diameter I.V. Pole base into holder

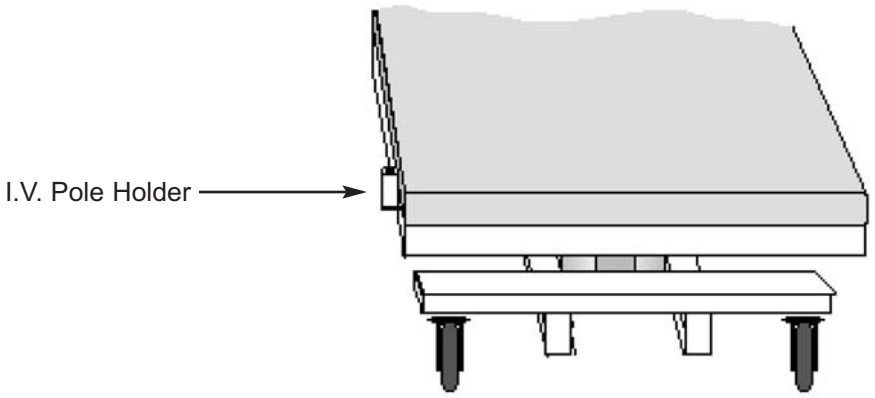


Figure 40

Section IV

UltraScan™ Table Specifications

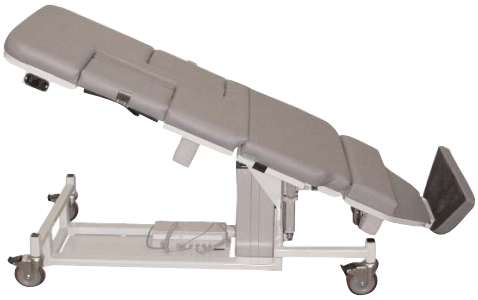
All models with electric foot drop section

Model

8088 - No Drop Section
8188 - Single Drop Section
8288 - Dual Drop Sections

8090, 8190, 8290
Includes 25º Reverse Trendelenburg

8093, 8193, 8293
Includes Trendelenburg ±15º



Model 8290

Model 8093

GENERAL & VASCULAR ULTRASOUND

- Ideal platform for all ultrasound procedures including cardiac echo
- Electrically Height adjustable 24.5" - 34.5"
- Electric Fowler positioning (0 - 70°)
- 15° Trendelenburg/ **15° Reverse Trendelenburg** - electrically adjustable
  (models 8093, 8193, and 8293 only)
- 15° Trendelenburg/ **25° Reverse Trendelenburg** - electrically adjustable
  (models 8090, 8190, 8290 only)
- Footboard (models 8090, 8190, 8290 only)
- Foot Drop Section - Electrically adjustable
- Self-Storing adjustable stirrups
- 24 V DC Hand controller - electrically isolated
- Paper holder/cutter
- Storage Tray

ECHO

- Proven faster image acquisition
- Anatomically/Ergonomically correct imaging area
- 14" x 8.5" Exam drop section (Models 8188, 8288, 8190, 8290, 8193 & 8293 only)
- 14" x 11.5" Right sided sonographers 2 Way drop section w/ Exam side remote release (Model 8288, 8290 & 8293 Only)
- One hand rapid release
- Patented non-pinch closure

SPECIFICATIONS

- 1000 lb. Load capacity
- 500 lb. Lift capacity
- 5 inch, 2-way locking casters

LENGTH	72"
WIDTH	28"
WEIGHT	290 lbs.
FOAM	Cal. B.F.T.B. #117
VINYL	Fed. Spec. Cec-A-680A D.O.T. FAR 25.8536, M.V.S. 302 Port of NY/ Boston F.D. Code
ELECTRICAL	120 VAC, 1.6 amps max, 50/60 Hz, UL 601, CSA 222.2 No. 601.1, IEC 60601-1

OPTIONS

- IV Pole holder
- Padded Armboard
- Carotid/Thyroid head support
- Adjustable leg supports
- Foot Switch
- Collapsible/Removable Safety Rails

WARRANTY

1 Year - Electrical, mechanical & vinyl fabric
(see Warranty for complete details)

FDA Registered Establishment **FDA Listed**

U.S. Patents: 6,353,949 B1; 5,950,262; 5,919,131; 347,691; ,184,363; 5,461,739; 6,367,104 B1; 5,250,262; 5,367,104 B1; 6,832,399 B2; 6,557,196 B2; 7,082,268: **International Patents:** 195 81 706; 2,304,568; Additional Patents Pending

UltraScan™ Table Specifications

All models with removable foot drop section

Model

8087 - No Drop Section
8187 - Single Drop Section
8287 - Dual Drop Sections

8092, 8192, 8292
Includes 25º Reverse Trendelenburg

8095, 8195, 8295
Includes Trendelenburg ±15º

Model 8295 shown

GENERAL & VASCULAR ULTRASOUND

- Ideal platform for all ultrasound procedures including cardiac echo
- Electrically Height adjustable 24.5” - 34.5”
- Electric Fowler positioning (0 - 70°)
- 15° Trendelenburg/ **15° Reverse Trendelenburg** - electrically adjustable (models 8095, 8195, and 8295 only)
- 15° Trendelenburg/ **25° Reverse Trendelenburg** - electrically adjustable (models 8092, 8192, 8292 only)
- Footboard (models 8092, 8192, 8292 only)
- Foot Drop Section - Manually adjustable/removable
- Self-Storing adjustable stirrups
- 24 V DC Hand controller - electrically isolated
- Paper holder/cutter
- Pelvic cutout
- Liquids tray
- Storage Tray

ECHO

- Proven faster image acquisition
- Anatomically/Ergonomically correct imaging area
- 14” x 8.5” Exam drop section (Models 8187, 8287, 8192, 8192 8195 & 8295 only)
- 14" x 11.5" Right sided sonographers 2 Way drop section w/ Exam side remote release (Model 8287, 8192 & 8295 only)
- One hand rapid release
- Patented non-pinch closure

SPECIFICATIONS

- 1000 lb. Load capacity
- 500 lb. Lift capacity
- 5 inch, 2-way locking casters

LENGTH	72”
WIDTH	28”
WEIGHT	290 lbs.
FOAM	Cal. B.F.T.B. #117
VINYL	Fed. Spec. Cec-A-680A D.O.T. FAR 25.8536, M.V.S. 302 Port of NY/ Boston F.D. Code
ELECTRICAL	120 VAC, 1.6 amps max, 50/60 Hz, UL 601, CSA 222.2 No. 601.1, IEC 60601-1

OPTIONS

- IV Pole holder
- Padded armboard
- Carotid/Thyroid head support
- Adjustable leg supports
- Foot Switch
- Collapsible/Removable Safety Rails

WARRANTY

1 Year - Electrical, mechanical & vinyl fabric (see Warranty for complete details)

FDA Registered Establishment — **FDA Listed**

U.S. Patents: 6,353,949 B1; 5,950,262; 5,919,131; 347,691; ,184,363; 5,461,739; 6,367,104 B1; 5,250,262; 5,367,104 B1; 6,832,399 B2; 6,557,196 B2; 7,082,268: **International Patents:** 195 81 706; 2,304,568; Additional Patents Pending

UltraScan™ Table Specifications

All models with removable foot drop section and liquids tray

Model

8089 - No Drop Section
8189 - Single Drop Section
8289 - Dual Drop Sections

8091, 8191, 8291
Includes 25º Reverse Trendelenburg

8094, 8194, 8294
Includes Trendelenburg ±15º

Model 8294 shown

GENERAL & VASCULAR ULTRASOUND

- Ideal platform for all ultrasound procedures including cardiac echo
- Electrically Height adjustable 24.5” - 34.5”
- Electric Fowler positioning (0 - 70°)
- 15° Trendelenburg/ **15° Reverse Trendelenburg** - electrically adjustable (models 8094, 8194, and 8294 only)
- 15° Trendelenburg/ **25° Reverse Trendelenburg** - electrically adjustable (models 8091, 8191, 8291 only)
- Footboard (models 8091, 8191, 8291 only)
- Foot Drop Section - Manually adjustable/removable
- Self-Storing adjustable stirrups
- 24 V DC Hand controller - electrically isolated
- Paper holder/cutter
- Pelvic cutout
- Liquids tray
- Storage Tray

ECHO

- Proven faster image acquisition
- Anatomically/Ergonomically correct imaging area
- 14” x 8.5” Exam drop section (Models 8189, 8289, 8191, 8191 8194 & 8294 only)
- 14" x 11.5" Right sided sonographers 2 Way drop section w/ Exam side remote release (Model 8289, 8191 & 8294 only)
- One hand rapid release
- Patented non-pinch closure

SPECIFICATIONS

- 1000 lb. Load capacity
- 500 lb. Lift capacity
- 5 inch, 2-way locking casters

LENGTH	72”
WIDTH	28”
WEIGHT	290 lbs.
FOAM	Cal. B.F.T.B. #117
VINYL	Fed. Spec. Cec-A-680A D.O.T. FAR 25.8536, M.V.S. 302 Port of NY/ Boston F.D. Code
ELECTRICAL	120 VAC, 1.6 amps max, 50/60 Hz, UL 601, CSA 222.2 No. 601.1, IEC 60601-1

OPTIONS

- IV Pole holder
- Padded armboard
- Carotid/Thyroid head support
- Adjustable leg supports
- Foot Switch
- Collapsible/Removable Safety Rails

WARRANTY

1 Year - Electrical, mechanical & vinyl fabric (see Warranty for complete details)

FDA Registered Establishment — **FDA Listed**

U.S. Patents: 6,353,949 B1; 5,950,262; 5,919,131; 347,691; ,184,363; 5,461,739; 6,367,104 B1; 5,250,262; 5,367,104 B1; 6,832,399 B2; 6,557,196 B2; 7,082,268: **International Patents:** 195 81 706; 2,304,568; Additional Patents Pending