



# BellevueHealthcare

## INSTRUCTION MANUAL

TO HELP ENSURE THE SAFE USE OF YOUR MEDICAL EQUIPMENT

The Joint Commission  
National Quality Approval



Accredited Since 2002

# At Bellevue Healthcare...

*...it is our Mission to enhance the quality of life for people who need medical equipment by providing excellent products and unmatched service. We serve with honesty, integrity and reliability. Through each interaction with Bellevue Healthcare, our customers know we care.*

Bellevue Healthcare provides Home Medical Equipment, including Mobility Products, Ambulatory Aids, Patient Aids and Lifts, Respiratory Products and Bath Safety Items, as well as the following services:

- **Delivery:** Equipment delivery service is available to all patients and clients who live in our service area.
- **Training:** Bellevue Healthcare will train all clients in the proper use and care of equipment we provide.
- **Billing:** Contracts with major insurance companies allow us to collect direct payment for services provided.
- **Repair and Maintenance:** Bellevue Healthcare is committed to making sure the equipment you receive from us remains in good working order.

Bellevue Healthcare is committed to making your experience with us a comfortable one. By now our representative should have set up the equipment in your home, given you verbal directions and a demonstration on how to use the equipment we provided, and asked you to repeat these directions; however, to further our commitment to you, we are providing this direction booklet to assist you with any questions that you may have while using this equipment.

This booklet is intended to help you safely use the equipment we provided. The directions for each piece of equipment are divided into distinct sections thereby helping you find the information you need quickly and easily. Please read this booklet before using the equipment as it includes important safety information that you will need to understand and apply.

At Bellevue Healthcare, we strive to make your experience satisfying and hassle free. If there is a problem with our services or equipment, please contact us and speak with a customer service representative. We will work with you to create a solution.

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## BHC Video Resources

Watch our instructional videos by scanning the QR code  
or by visiting <https://bellevuehealthcare.com/videos>

# BellevueHealthcare

## Notice of Privacy Practices

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

This “Notice of Privacy Practices” describes how we may use and disclose your protected health information to carry out treatment, payment or health care operations and for other purposes that are permitted or required by law. It also describes your rights to access and control your protected health information. “Protected health information” is information about you, including demographic information, that may identify you and that relates to your past, present or future physical or mental health or condition and related health care services.

We are required to abide by the terms of this “Notice of Privacy Practices.” We may change the terms of our notice, at any time. The new notice will be effective for all protected health information that we maintain at that time. Upon your request, we will provide you with a revised copy of any “Notice of Privacy Practices.” Such a request may be made by calling our office and asking that a revised copy be sent to you in the mail or by asking for one at the time of your next appointment.

### Understanding Your Health Record/Information

Each time you visit a healthcare provider, a record of your visit is made. Typically, this record contains your symptoms, examination and test results, diagnoses, treatment, and a plan for future care or treatment. This information, often referred to as your health or medical record, serves as a:

- basis for planning your care and treatment
- means of communication among the many health professionals who contribute to your care
- legal document describing the care you received
- means by which you or a third-party payer can verify that services billed were actually provided
- tool in educating health professionals
- source of data for medical research
- source of information for public health officials charged with improving the health of the nation
- source of data for facility planning and marketing
- a tool with which we can assess and continually work to improve the care we render and the outcomes we achieve.

Understanding what is in your record and how your health information is used helps you to:

- ensure its accuracy
- better understand who, what, when, where, and why others may access your health information
- make more informed decisions when authorizing disclosure to others.

### Your Health Information Rights

Although your health record is the physical property of the healthcare practitioner or facility that compiled it, the information belongs to you. You have the right to:

- request a restriction on certain uses and disclosures of your information
- obtain a paper copy of the notice of information practices upon request
- inspect and obtain a copy of your health record
- amend your health record
- obtain an accounting of disclosures of your health information
- request communications of your health information by alternative means or at alternative locations
- revoke your authorization to use or disclose health information except to the extent that action has already been taken.

### Our Responsibilities

This organization is required to:

- maintain the privacy of your health information
- provide you with a notice as to our legal duties and privacy practices with respect to information we collect and maintain about you
- abide by the terms of this notice
- notify you if we are unable to agree to a requested restriction
- accommodate reasonable requests you may have to communicate health information by alternative means or at alternative locations

We will not use or disclose your health information without your authorization, except as described in this notice.

If you believe your privacy rights have been violated, you can file a complaint with our Store Manager or with the Secretary of Health and Human Services. There will be no retaliation for filing a complaint. You may contact our Store Manager at any store for further information about the complaint process.



## **Examples of Disclosures for Treatment, Payment and Health Operations**

### We will use your health information for treatment.

For example: Information obtained by a therapist or other member of your healthcare team will be recorded in your record and used to determine the course of treatment that should work best for you. We may provide your physician or a subsequent healthcare provider with copies of various reports that should assist him or her in treating you.

### We will use your health information for payment.

For example: A bill may be sent to you or a third-party payer. The information on or accompanying the bill may include information that identifies you, as well as your diagnosis, procedures, and supplies used.

### We will use your health information for regular health operations.

For example: Members of our quality improvement team may use information in your health record to assess the care and outcomes in your case and others like it. This information will then be used in an effort to continually improve the quality and effectiveness of the healthcare and services we provide.

Business associates: There are some services provided in our organization through contracts with business associates. An example is our billing service. When these services are contracted, we may disclose your health information to our business associate so that he or she can perform the job we have asked them to do and bill you or your third-party payer for services rendered. To protect your health information, however, we require the business associate to appropriately safeguard your information.

Notification: We may use or disclose information to notify or assist in notifying a family member, personal representative, or another person responsible for your care, your location and general condition.

Communication with family: Health professionals, using their best judgment, may disclose to a family member, other relative, close personal friend or any other person you identify, health information relevant to that person's involvement in your care or payment related to your care.

Research: We may disclose information to researchers when their research has been approved by an institutional review board that has reviewed the research proposal and established protocols to ensure the privacy of your health information.

Organ procurement organizations: Consistent with applicable law, we may disclose health information to organ procurement organizations or other entities engaged in the procurement, banking, or transplantation of organs for the purpose of tissue donation and transplant.

Marketing: We may contact you to provide appointment reminders or information about treatment alternatives or other health-related benefits and services that may be of interest to you.

Food and Drug Administration (FDA): We may disclose to the FDA health information relative to adverse events with respect to food, supplements, and product defects, or post marketing surveillance information to enable product recalls, repairs, or replacement.

Workers compensation: We may disclose health information to the extent authorized by and to the extent necessary to comply with laws relating to workers compensation or other similar programs established by law.

Public health: As required by law, we may disclose your health information to public health or legal authorities charged with preventing or controlling disease, injury, or disability.

Correctional institution: Should you be an inmate of a correctional institution, we may disclose to the institution or agents thereof health information necessary for your health and the health and safety of other individuals.

Law enforcement: We may disclose health information for law enforcement purposes as required by law or in response to a valid subpoena.

Federal law makes provision for your health information to be released to an appropriate health oversight agency, public health authority or attorney, provided that a work force member or business associate believes in good faith that we have engaged in unlawful conduct or have otherwise violated professional or clinical standards and are potentially endangering one or more patients, workers or the public.

This notice was published and becomes effective on 1 January 2003.

# **OXYGEN CONCENTRATOR (INVACARE & RESPIRONICS)**

## **SAFETY SUMMARY**

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CAUTION: Federal Law restricts this device to sale by or on order of a physician, or any other practitioner licensed by the law of the State in which he practices to use or order the use of this device.

### **READ THE FOLLOWING WARNINGS BEFORE USING THIS PRODUCT**

- The use of oxygen therapy requires that special care be taken to reduce the risk of fire. Any materials that will burn in air, and some that will not, are easily ignited and burn rapidly in high concentrations of oxygen. For safety concerns, it is necessary that all sources of ignition be kept away from the product and preferably out of the room in which it is being used. NO SMOKING signs should be prominently displayed.
- A spontaneous and violent ignition may occur if oil, grease or greasy substances come in contact with oxygen under pressure. These substances MUST be kept away from the oxygen concentrator, tubing and connections, and all other oxygen equipment. DO NOT use any lubricants unless recommended by Bellevue Healthcare.
- For optimum performance Bellevue Healthcare recommends that each concentrator be on and running for a minimum of 30 minutes at a time. Shorter periods of operation may be harmful to maximum product life.
- Connect this product to a properly grounded outlet only.  
If the oxygen concentrator has a damaged cord or plug, if it is not working properly, if it has been dropped or damaged, or if it has been dropped into water, call Bellevue Healthcare for examination and repair.  
Keep the cord away from HEATED or HOT surfaces.
- NEVER drop or insert any object into any openings of the concentrator.
- NEVER block the air openings of the product or place it on a soft surface, such as a bed or couch, where the air openings may be blocked. Keep the openings free from lint, hair and the like.  
Fill humidifier with water to the level shown by the manufacturer. DO NOT overfill.
- It is recommended to use crush-proof oxygen tubing with this product.
- Close supervision is necessary when this product is used by, on, or near children or bed confined individuals.
- Use this product only for its intended use as described by this manual.
- DO NOT use unauthorized parts, accessories or adapters.
- Use of some administration accessories or certain humidifiers not specified for the use with oxygen concentrator may impair the performance. Under certain circumstances oxygen therapy can be hazardous. Seek medical advice before using this machine.  
This equipment is to be used as an oxygen supplement and is not considered life supporting or life sustaining.
- Avoid creation of any spark near medical oxygen equipment. This includes sparks from static electricity created by any type of friction.

### **MAINTENANCE**

- The concentrator was specifically designed to minimize routine preventative maintenance at intervals of once per year. Only professionals of the healthcare field or persons fully conversant with this product, such as authorized factory trained personnel should perform preventative maintenance or performance adjustments on the oxygen concentrator.

### **RADIO FREQUENCY INTERFERENCE**

- Radio Frequency Interference (RFI) influences most electrical equipment. Caution should be exercised with regard to the use of portable communications equipment in the area around such equipment.

### **TO REDUCE THE RISK OF ELECTROCUTION AND BURNS**

- Always unplug this product immediately after using.
- A product should NEVER be left unattended when plugged in.
- Avoid using while bathing. If continuous usage is required by a physician's prescription, the concentrator must be located in another room at least seven feet away from the bath.
- DO NOT come into contact with the concentrator while wet.
- DO NOT place or store product where it can drop into water or other liquid.
- DO NOT reach for product that has fallen into water, UNPLUG IMMEDIATELY.

### **TO REDUCE THE RISK OF INJURY**

- This device is to be used only in accordance with the prescription of a physician and this procedure sheet. If at any time the patient or attendant concludes that the patient is receiving an insufficient amount of oxygen, the supplier and/or physician should be contacted immediately. No adjustments should be made to flow rate unless prescribed by a physician.

## OPERATION (INVACARE)

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### 1. SELECT A LOCATION

Select a room in your house where using the oxygen concentrator will be most convenient. The concentrator can be easily rolled from room to room on its casters.

Please note, your oxygen concentrator will perform best when operated under the following conditions:

- a. Temperature: 50°F-90°F
- b. Electrical: No extension cords
- c. Placement: No closer than 3 inches from the wall
- d. Tubing and cannula: 57 feet maximum of crush free tubing
- e. Environment: Smoke and soot-free, no confined spaces
- f. Relative humidity: 20-60%
- g. Time of operation: Up to 24 hours per day
- h. Flow rate: From 2 L/min. to 10 L/min.
- i. Minimum operating time: 30 minutes

Scan to watch video:



Usage in environments other than those described above may result in the need for increased equipment maintenance. Avoid placing the unit near loose curtains which may block the air intake. The air intake of the unit should not be blocked and should be located in a well-ventilated area to avoid airborne pollutants and/or fumes.

### 2. PLUG IN THE CORD

Plug the power cord into a properly grounded outlet as described in this manual. It is the customer's responsibility to make sure that the oxygen concentrator is connected to a properly grounded outlet.

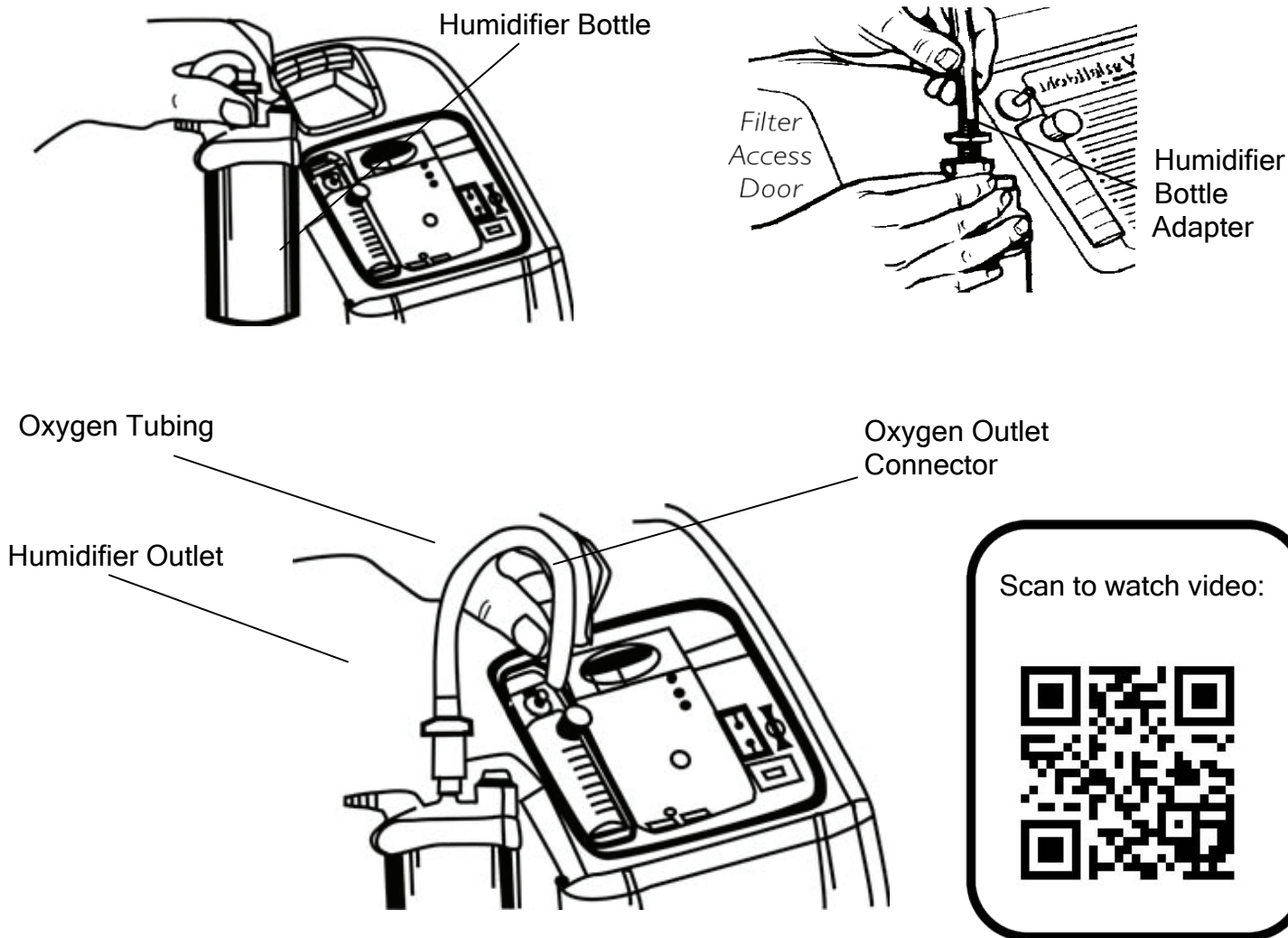
### 3. CONNECT THE HUMIDIFIER (If prescribed)

NOTE: Oxygen tubing connects directly to the oxygen outlet on the concentrator if a humidifier is not prescribed.

- a. Fill humidifier with filtered water to the level indicated by the manufacturer.
- b. Replace the humidifier cap and retighten.
- c. Place the humidifier in the humidifier compartment using the elastic strap to secure bottle (Figure 1).
- d. Attach the black humidifier adapter to the humidifier bottle by turning the wing nut on the humidifier bottle until it securely fastens (Figure 2).
- e. Attach oxygen tubing from the humidifier bottle to the oxygen outlet connector on the oxygen concentrator (Figure 3).
- f. Attach the patient supply tubing (cannula or mask) to the humidifier bottle.
- g. After assembly, ensure that oxygen is flowing through the cannula or mask.

**WARNING:** DO NOT overfill the humidifier.

**WARNING:** DO NOT reverse the oxygen input and output connections. Water from the humidifier bottle WILL travel through the cannula back to the patient.



#### 4. POWER SWITCH

Press power switch to the ON position. The power light located on the control panel will illuminate a GREEN light. The alarm will “beep” indicating the system is functioning properly.

#### 5. FLOWRATE

Turn the flow rate knob to the setting prescribed by your physician or therapist. Do this by bisecting the black ball on the L/min. line prescribed.

**WARNING: DO NOT** change the L/min. setting on the flow meter unless a change has been prescribed by your physician.

#### 6. OXYGEN PURITY INDICATORS (not on every concentrator)

- This feature monitors the purity of the oxygen generated by the concentrator.
- When the unit is initially turned on, the GREEN power light will illuminate. Within 5 to 30 minutes a GREEN light will illuminate in the “Oxygen Purity” section of the control panel if the concentrator is within set specifications. Call Bellevue Healthcare if any other light is illuminated in this area.

## EXPLANATION OF INDICATOR LIGHTS (only if equipped):

**Green Light:** Normal operation.

**Yellow Light:** Call Bellevue Healthcare IMMEDIATELY. You may continue to use the concentrator unless instructed otherwise by Bellevue Healthcare. Be certain that BACKUP OXYGEN tanks are nearby.

**Red Light:** Total unit shutdown. Switch to BACKUP OXYGEN and call Bellevue Healthcare IMMEDIATELY.

**Green Light with Yellow Light blinking:** Oxygen sensor is malfunctioning; you may continue to use the concentrator. Call Bellevue Healthcare IMMEDIATELY.

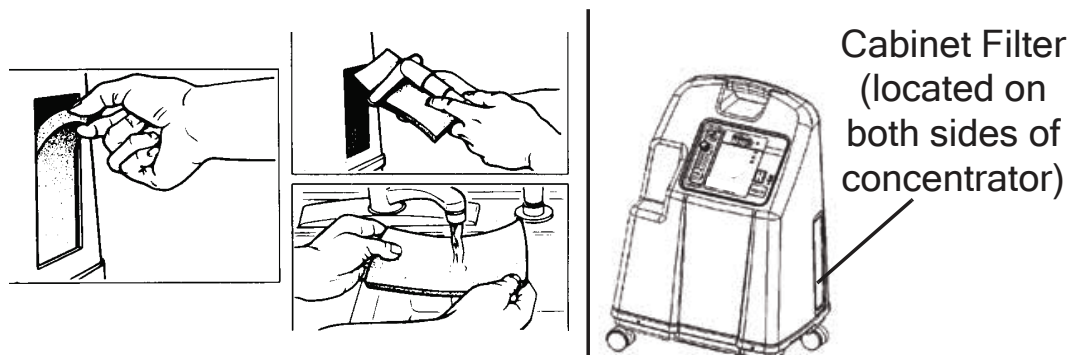
## MAINTENANCE

### **CLEANING CABINET FILTERS**

CAUTION: DO NOT operate the concentrator without the filters installed.

NOTE: Switch to back up cylinders before you begin cleaning the concentrator. See (Figure 1) on page 11 for a detailed diagram.

1. Remove each filter and CLEAN AT LEAST ONCE A WEEK depending on environmental conditions (Figure 4).
2. Clean cabinet filters with a vacuum cleaner or wash in warm soapy water (Figure 4).
3. Dry filters thoroughly before reinstalling.



**FIGURE 4- Cleaning Cabinet Filters**

### **CLEANING OUTSIDE OF CONCENTRATOR (Cabinet)**

WARNING: Unplug the concentrator when cleaning to avoid electrical shock. DO NOT remove the cabinet.

- Clean the cabinet with a mild household cleaner and a non-abrasive cloth or sponge.

### **CLEANING HUMIDIFIER**

NOTE: Follow manufacturer's instructions. If none are given do the following:

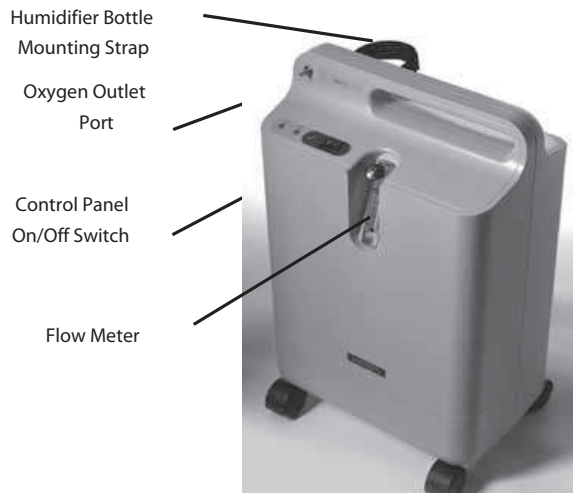
1. Clean the humidifier every day.
2. Wash it in soapy water and rinse it with a solution of 10 parts water and 1 part white vinegar.
3. Rinse again with hot water and refill with distilled water to the level shown on the humidifier. DO NOT overfill.

## TROUBLESHOOTING - INVACARE

SYMPTOM	PROBABLE CAUSE	SOLUTION
<b>Alarm</b>	<b>Main Power Loss</b>	
Short Beep, Long Pause, Short Beep: (Power switch is ON, but concentrator is not operating.)	1. Power cord not plugged in 2. No power at outlet 3. Tripped Circuit Breaker	1. Insert plug into outlet. 2. Inspect house circuit breaker for fuses. If problem recurs, use a different outlet 3. Press reset button on control panel.
<b>Alarm</b>	<b>System Failure</b>	
Continuous Beep (Power switch is ON, but concentrator is not operating.)	1. Unit overheating due to blocked air intake 2. Insufficient power at outlet 3. Internal repairs required	1. (a) Remove and clean cabinet filters (b) Move concentrator at least 3 inches from walls, draperies or furniture. 2. Don't use extension cords. Move to another outlet or circuit. 3. Call Bellevue Healthcare for service.
<b>Yellow or Red Light Illuminated</b>		
	1. Low oxygen purity 2. (a) kinked or blocked tubing or cannula (b) Flowmeter set at or below 1/2 L/min or 2 L/min on a 10 L/min machine 3. Unit overheating due to blocked air intake 4. Insufficient power at outlet 5. Internal repairs required	1. Clean or replace filters 2. (a) Inspect for kinks or blocks and correct or replace. Once corrected, turn power OFF for 60 seconds, then turn back ON (b) Reset flowmeter to prescribed rate. If prescribed flow is 1/2 L/min. or below, use a pediatric flowmeter. 3. (a) Remove and clean filters. (b) Move concentrator at least 3 inches from walls, draperies or furniture. 4. Don't use extension cords. Move to another outlet or circuit. 5. Call Bellevue Healthcare for service
<b>Green light with Yellow light blinking</b>		
	1. Internal repairs required	1. Call Bellevue Healthcare for service.

## OPERATION (RESPIRONICS)

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Scan to watch video:



### 1. SELECT A LOCATION

Select a room in your house where using the oxygen concentrator will be most convenient. The concentrator can be easily rolled from room to room on its casters.

Please note, your oxygen concentrator will perform best when operated under the following conditions:

- |                            |   |
|----------------------------|---|
| a. Temperature:            | 50°F-90°F                               |
| b. Electrical:             | No extension cords                      |
| c. Placement:              | No closer than 3 inches from the wall   |
| d. Tubing and cannula:     | 57 feet maximum of crush free tubing    |
| e. Environment:            | Smoke and soot-free, no confined spaces |
| f. Relative humidity:      | 20-60%                                  |
| g. Time of operation:      | Up to 24 hours per day                  |
| h. Flow rate:              | From 2 L/min. to 10 L/min.              |
| i. Minimum operating time: | 30 minutes                              |

Usage in environments other than those described above may result in the need for increased equipment maintenance. Avoid placing the unit near loose curtains which may block the air intake. The air intake of the unit should not be blocked and should be located in a well-ventilated area to avoid airborne pollutants and/or fumes.

### 2. PLUG IN THE CORD

Plug the power cord into a properly grounded outlet as described in this manual. It is the customer's responsibility to make sure that the oxygen concentrator is connected to a properly grounded outlet.

**WARNING:** DO NOT overfill the humidifier.

**WARNING:** DO NOT reverse the oxygen input and output connections. Water from the humidifier bottle WILL travel through the cannula back to the patient.



### 3. DO EITHER STEP A or B BELOW

a. If you are not using a humidifier, connect your nasal cannula to the Oxygen Outlet Port, as shown in the top illustration on the right.

b. If you are using a humidifier, follow the steps below:

4. Fill your humidifier bottle according to the manufacturer's instructions

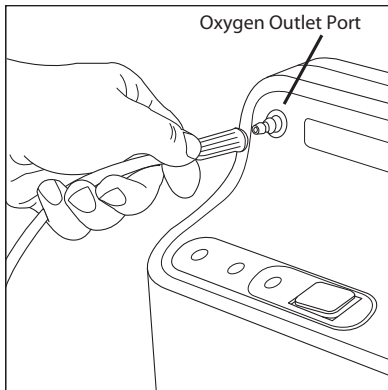
5. Mount the filled humidifier on the top of the EverFlo / EverFlo Q device inside the velcro strap, as shown in the illustration below and on the right.

6. Tighten the velcro strap around the bottle and secure it so it is held firmly in place.

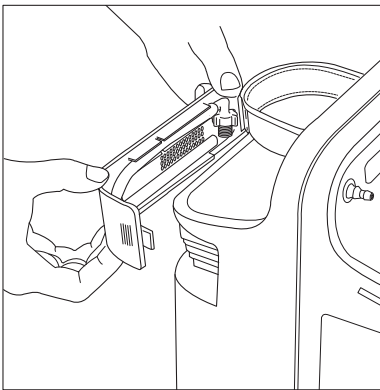
7. Connect the humidifier connector tube (that you retrieved from the filter door) to the Oxygen Outlet Port (as shown in Step 3-A above).

8. Connect the other end of the humidifier connector tube to the top of the humidifier with the elbow in the tubing facing the front, as shown here.

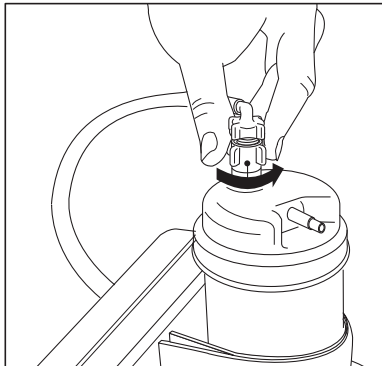
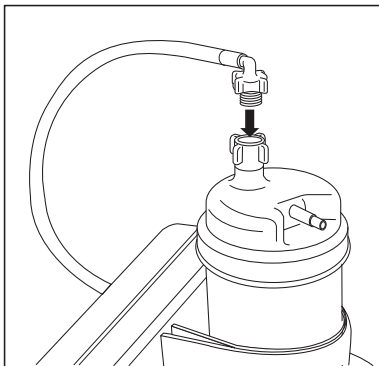
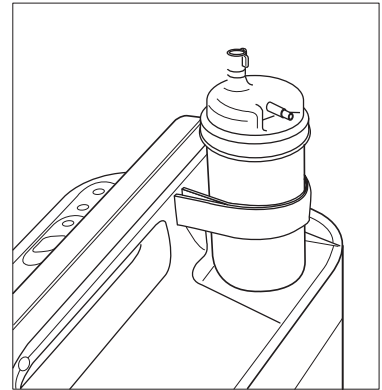
9. Connect your cannula to the humidifier bottle according to the humidifier bottle manufacturer's specifications.



Step 3-A



Step 3-B1

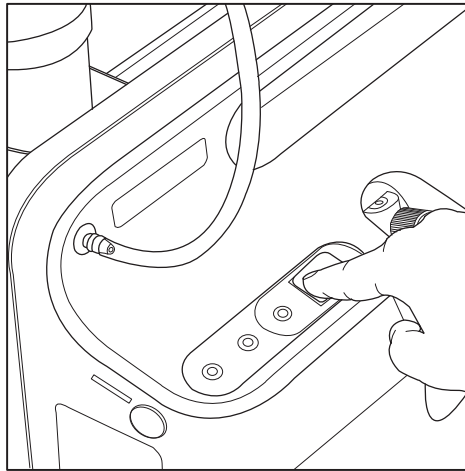


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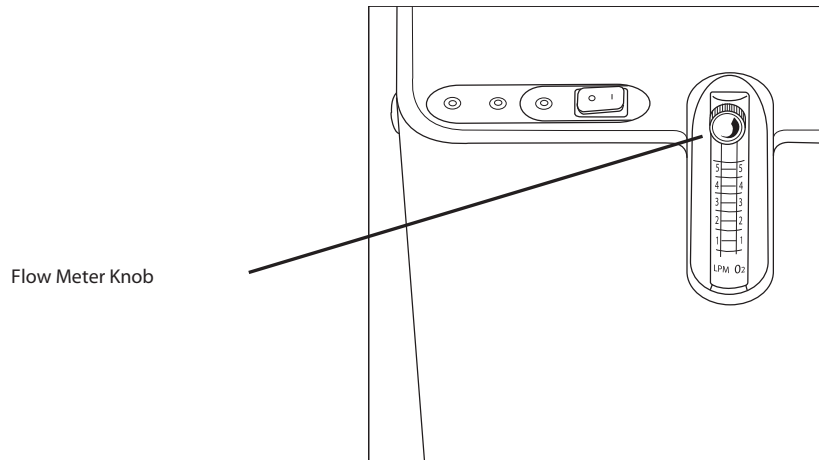




**10.** Press the power switch to the On [I] position. Initially, all the LEDs will illuminate and the audible alert will beep for a few seconds. After that time, only the green LED should remain lit. You can begin breathing from the device immediately even though it typically takes 10 minutes to reach oxygen purity specifications.



**11.** Adjust the flow to the prescribed setting by turning the knob on the top of the flow meter until the ball is centered on the line marking the specific flow rate.



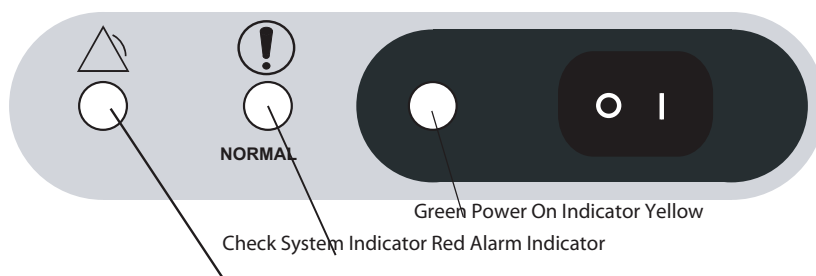
**12.** Be sure oxygen is flowing through the cannula. If it is not, refer to the Troubleshooting Guide in this manual on the next page.

**13.** Put on the cannula as directed by your home care provider.

**14.** When you are not using the oxygen concentrator, press the power switch to the Off [O] position.

## RESPIRONICS Alarms and Troubleshooting

**Alarm and Indicators** The device has an audible alarm and three LED indicators, as shown below.



Audible Alarm / Colored LED	Possible Cause	Your Action
All 3 LEDs illuminate continuously and the Audible Alarm is sounding continuously.	The device has detected a system malfunction.	Immediately turn off the device, connect to a back up oxygen source, and call your home care provider.
The Audible Alarm is sounding continuously. None of the LEDs are illuminated.	The device is turned on but is not operating. Often this indicates that the device is not plugged in or there is a power failure.	Check the power outlet and verify that the device is plugged in. If the problem continues, connect to a back up oxygen source and call your home care provider.
Red LED illuminates continuously and the Audible Alarm is sounding continuously.	The device has detected a system malfunction.	Immediately turn off the device and wait 5 minutes. Restart the device. If the condition persists turn the unit off, connect to a back up oxygen source, and call your home care provider.
Yellow LED illuminates continuously. The Red LED is blinking and the Audible Alarm is beeping periodically.	The device has detected an impeded oxygen flow condition.	Follow the troubleshooting guide on the next page. Connect to a back up oxygen source and call your home care provider if your troubleshooting actions fail to end this alert condition.
Yellow LED illuminates continuously. The Red LED is off and the Audible Alarm is silent.	The device has detected a low oxygen condition (OPI units only).	Continue using the unit but call your home care provider about this condition.

## TRANSPORTATION (INVACARE & RESPIRONICS)

1. The concentrator can be transported in a motor vehicle. If transportation is necessary, secure the concentrator upright in a seat –using the seatbelt to strap the concentrator down. If a seat or seatbelt are not able to be used, secure the concentrator in an upright position placed on the floorboard behind one of the front seats.
  - a. Never turn the concentrator on its side or turn up side down. This could damage internal mechanisms.

# COMPRESSED OXYGEN SYSTEM (TANKS)

## SAFETY SUMMARY

### INTENDED USE

- Federal (U.S.A.) law restricts the use of this device by or on the order of a physician.
- Portable/compressed oxygen systems are designed to provide the user additional mobility with a self contained supply of oxygen. The basic system consists of a valved cylinder pressurized with oxygen when filled, a regulator to deliver the oxygen, and cannula, mask or some other device to transfer the oxygen from the regulator to the patient. Please refer to the instructions supplied with the cannula or mask for their proper use.

### WARNINGS

- This is a portable/compressed oxygen therapy unit and is useful only to persons who are breathing. On apneic (non-breathing) persons, call a physician or paramedic unit to resuscitate the person, as this is an emergency.
- Keep cylinder, cylinder valve, all equipment and connections free of oil and grease to avoid violent ignition. Use only with equipment cleaned for oxygen use.

### WARNINGS

- When filled, contents will be under pressure and can vigorously accelerate combustion.
- Use only with pressure reducing equipment and apparatus designed for use with oxygen.
- Use oxygen only as directed by physician.
- DO NOT smoke in area where the oxygen is in use.
- DO NOT attempt to operate this equipment unless you have been trained in its proper use or are under competent supervision.
- DO NOT use or store near heat, flame, electric or gas heaters of any kind, or stoves.
- DO NOT expose to temperatures above 130°F.
- DO NOT use in temperatures greater than 104°F or below 41°F.
- Keep the equipment at least seven feet from radios, television sets, window air conditioners, fans, electric razors, hair dryers, and all electrical appliances.
- NEVER use aerosol sprays near the equipment.
- DO NOT puncture the cylinder in any way.
- NEVER throw cylinders into fire or incinerator.
- DO NOT immerse in water.
- Federal law requires that the cylinder be filled or refilled with U.S.P. (United States Pharmacopeia) grade oxygen, only by establishments registered as a drug producer in accordance with the Federal Food, Drug and Cosmetic Act.
- Keep out of reach of children.
- Oxygen is a non-flammable gas; it will however substantially increase the rate at which flammable materials burn. Oil, grease, and other hydrocarbons, when combined with oxygen, will become highly combustible and should never be used on any part of the oxygen cylinder, cylinder valve, regulator, or other equipment used with oxygen.
- Oxygen therapy and emergency oxygen regulators are pressure-reducing devices which lower the pressure of the oxygen from a cylinder to a level which can be used by the user. When it is necessary to control and monitor the amount of oxygen being delivered, a flow gauge type regulator is utilized. These regulators can be used with a variety of user delivery devices including cannula and masks that are especially designed for use with this equipment. Do not use with cannula and masks designed for use with gas powered equipment.

### NOTE

- Backpressure in excess of 2 psi (pounds per square inch) will cause inaccuracy of the delivery gauge reading in flow gauge regulators. Common causes of backpressure are kinked or very long amounts of tubing between the regulator outlet and user, or any restrictions of flow occurring in that area.

## TERMINOLOGY

1. **Regulator:** The small device that fits over the cylinder and reduces the pressure of the oxygen so it can be breathed. It also contains the gauge indicating how much oxygen is in the cylinder.
2. **Guide Pins:** The two small pins located in the center opening of the regulator.
3. **Bolt:** The screw that goes through one end of the regulator. It is used to secure the regulator to the cylinder.
4. **T-Bar:** The small bar going through the outside end of the bolt so it can be easily turned.
5. **Cylinder:** The aluminum cylinder with a green top that contains the oxygen. It has a valve on top allowing the release of oxygen.
6. **Toggle switch:** The aluminum pin on top of the cylinder that turns to open and close the cylinder's valve.
7. **System:** The combination of cylinder and regulator.

## OPERATION

### 1. FITTING REGULATOR ON THE CYLINDER (Figure 1)

- Remove the safety seal from the top of the *cylinder* to reveal three holes: two small ones and one larger one.
- Unscrew the *bolt* in the *regulator*, using the *T-Bar*, so it fits over the top of the *cylinder*. The *toggle switch* needs to be in a vertical position for the *regulator* to fit over it.
- Using the *guide pins*, fit the *regulator* onto the *cylinder*. The *guide pins* insert into the two small holes on the *cylinder*.
- Tighten the *bolt* so that the *regulator* stays on the *cylinder*. Make sure it is tight and makes a good seal.

### 2. TURNING THE SYSTEM ON

- Turn the *toggle switch* counter-clockwise to open *tank*. Oxygen is now in the *regulator* and the gauge should read "Full."
- Turn the black flow adjustment knob at the end of the *regulator* from "off or 0" to the desired number of liters per minute (i.e. 2).
- Oxygen begins to flow out of the *regulator*. Connect the nasal tubing to the metal fixture under the black flow adjustment knob.

### 3. TURNING THE SYSTEM OFF

- Simply turn the black knob at the end of the *regulator* to "off or 0."
- If the *system* needs to be off for an extended period of time, close the *cylinder* also. Do this by turning the *toggle switch* clockwise until it is tight.

### 4. SWITCHING TO A NEW CYLINDER

- Use a new cylinder when the regulator gauge reads "Refill" while the *cylinder* is open.
- Close the *cylinder* by tuning the *toggle switch* clockwise.
- Turn the black knob to "10." This allows all excess oxygen trapped in the *regulator* to escape.
- Once the oxygen has escaped, turn the black flow adjustment knob to the "off or 0" position
- Unscrew the *bolt*, using the *T-bar*, and lift off the *regulator*.
- Repeat the steps in "FITTING REGULATOR ON THE CYLINDER."

## CYLINDER DURATION CHART

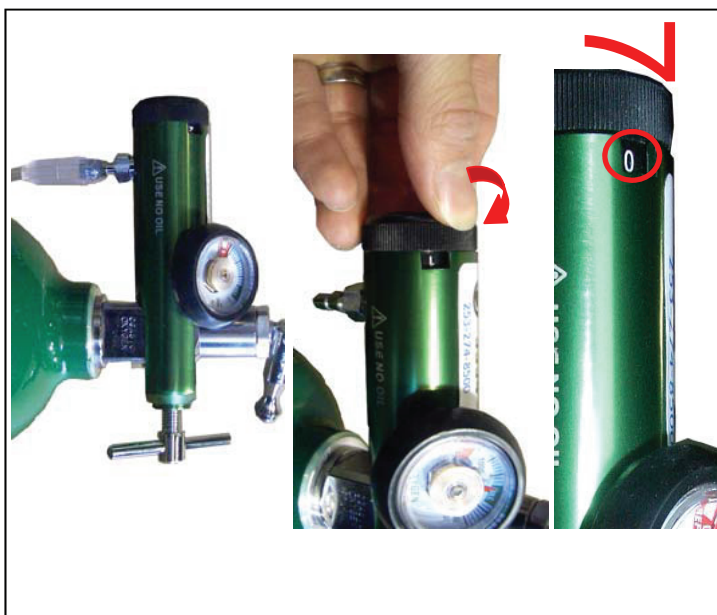
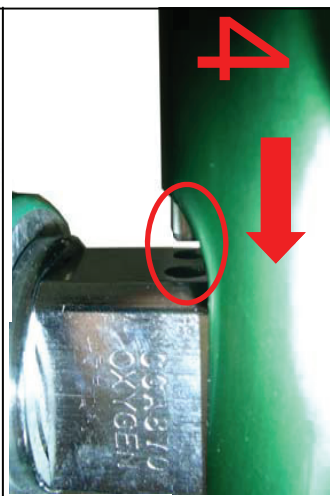
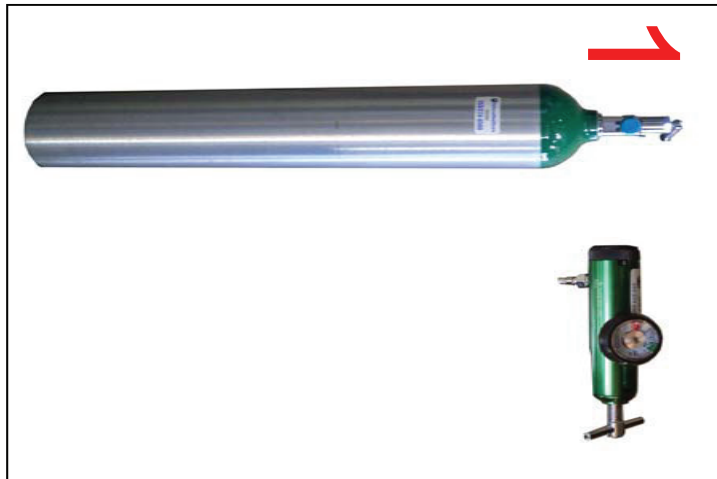
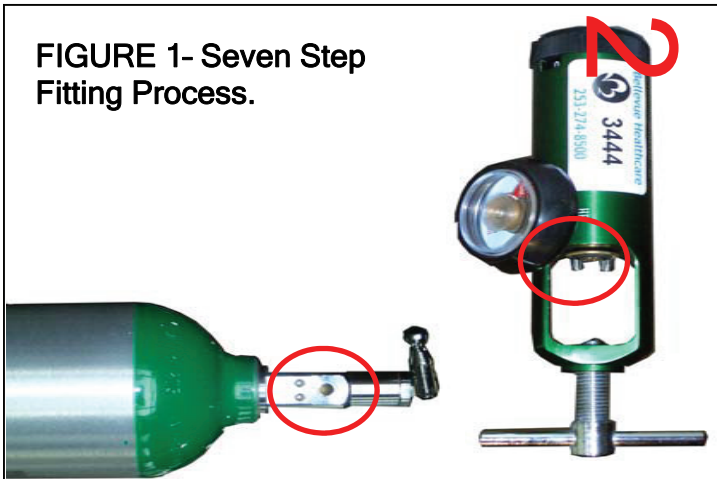
Duration of Use (in Hours) at Different Regulator Flow Rates

Cylinder Name	BHC Term	M6	D	E	M90	A	M4	C
Cylinder Height	in	11.8 in	16.7 in	25.4 in	32.6 in	5.7 in	8.7 in	10.9 in
Cylinder Diameter	in	3.2 in	4.38 in	4.38 in	7.25 in	2.51 in	3.21 in	4.38 in
Continuous Flow Cylinder Duration (l/min)	0.5 l/min	5:39	14:09	22:39	12:57	1:25	3:46	8:30
	1 l/min	2:49	7:04	11:19	18:28	0:42	1:53	4:15
	2 l/min	1:25	3:32	5:39	21:14	0:21	0:56	2:07
	3 l/min	0:56	2:21	3:46	14:09	0:14	0:37	1:25
	4 l/min	0:42	1:46	2:49	10:37	0:10	0:28	1:03
	5 l/min	0:34	1:25	2:16	8:30	0:08	0:22	0:51
	6 l/min	0:28	1:10	1:53	7:04	0:07	0:18	0:42
	8 l/min	0:21	0:53	1:25	5:18	0:05	0:14	0:31
	10 l/min	0:16	0:42	1:07	4:15	0:04	0:11	0:25
	15 l/min	0:11	0:28	0:45	2:49	0:03	0:07	0:16
Pulse Dose Cylinder Duration (l/min)	1 l/min	8:18	21:00	10:24	-	-	5:42	-
	2 l/min	4:06	10:30	17:12	-	-	2:54	-
	3 l/min	2:48	7:00	11:30	-	-	1:54	-
	4 l/min	2:06	5:12	8:36	-	-	1:24	-
	5 l/min	1:42	4:12	6:54	-	-	1:06	-
	6 l/min	1:24	3:30	5:48	-	-	9:00	-

Bellevue Healthcare Common Tank: Times are approximate

\* \*

**FIGURE 1- Seven Step Fitting Process.**



## CARE AND MAINTENANCE

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1. Leave the safety seal on full tanks until they are to be used.
2. The EXTERIOR surface of the regulator may be cleaned by wiping it with a clean, lint-free cloth and alcohol.
3. Take care to minimize abuse to compressed oxygen systems, this will ensure the accuracy and longevity of your system. Avoid dropping your system as this may cause damage to the regulator or loosen the connection between the regulator and cylinder. If a system is jarred, dropped, or knocked over, it should be checked to ensure that the regulator to cylinder connection is secure and that the proper flow rate is maintained.
4. NEVER attempt to repair any part of the regulator or cylinder valve.

## STORAGE

---

NOTE: It is generally not necessary to remove the regulator when storing the system for short periods of time, if stored properly.

1. Store compressed systems in a well-ventilated area.
2. Store cylinders with a regulator in a portable cart provided by Bellevue Healthcare. Store extra cylinders where they can be secured in an upright position. If this is not possible, store the cylinders lying down.
3. Systems provided with a carrying case should be stored where they will not fall over or be subject to damage from objects falling on or against them.
4. Never store a system in an elevated place. A dropped system could result in serious damage being done to the regulator, valve or cylinder.
5. Never store a compressed system near heat or open flame, avoid temperatures at or above 130° F.
6. Turn off oxygen supply when not in use.

## TRANSPORTATION

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1. Cylinders can be transported in a motor vehicle only if secured so they will not roll or fall over (not in trunk of car).
2. Make sure that the area is well ventilated.

## TROUBLESHOOTING

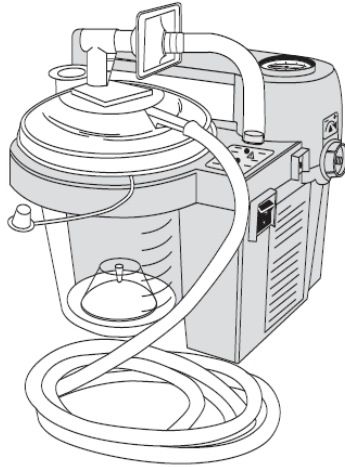
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1. If any leakage of the oxygen cylinder is detected, check the connection between the regulator and the cylinder ensuring that it is secure. If leakage persists, put the regulator on a new tank following the operations above. Contact Bellevue Healthcare if more cylinders are needed.
2. If the cylinder itself is leaking, place cylinder outside and contact Bellevue Healthcare.
3. If oxygen is not flowing, ensure that the compressed system is turned ON.



## ASPIRATOR (Suction Unit)

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### OPERATION

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**WARNING:** Proper operation of this product is necessary to avoid physical harm. Improper use can cause personal injury and/or tissue damage. This product should not be used unless a physician or other qualified health care professional has instructed the operator.

1. Familiarize yourself with the Aspirator. (Figure 1)
2. Attach the suction tubing to the Suction Inlet.
3. Check to see that the Hydrophobic Filter Tubing Assembly is secure.
4. Check to see that the ON/OFF Switch is in the OFF position.
5. Turn the Control Knob fully counter-clockwise.
6. Plug power cord into electrical outlet.
7. Turn the ON/OFF Switch to the ON position.
8. Turn the Control Knob clockwise to adjust the Vacuum Gauge to the setting specified by your physician or qualified health care professional.

**NOTE:** As the knob is turned counter-clockwise the vacuum will decrease, as the knob is turned clockwise the vacuum will increase.

**CAUTION:** The Collection Jar must be emptied after every use. NEVER let the fluid level exceed the “Safe Full” line. Overflow can damage the aspirator.

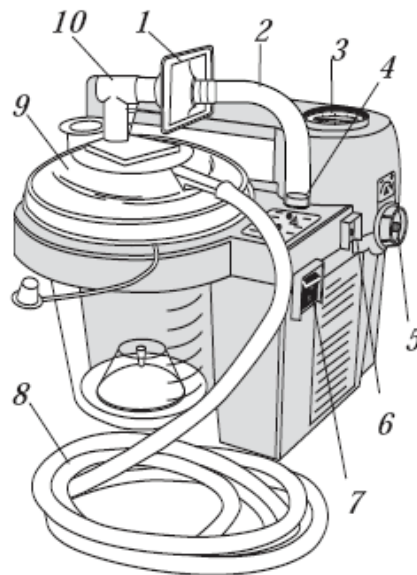
### REPLACING THE HYDROPHOBIC FILTER (Figure 1)

**NOTE:** Either of the following conditions may require replacement of the Hydrophobic Filter: a) the filter is dirty and the aspirator has lost suction; b) there is liquid in the filter and or tubing assembly.

1. Remove the filter by disconnecting it from the suction unit and lid assembly.
2. Replace with a clean hydrophobic filter and remount to suction unit and lid.

**NOTE:** Hand tighten the NEW filter to the Vacuum Gauge. A loose filter may decrease suction.

**FIGURE 1- SUCTION UNIT**



### IMPORTANT PARTS OF YOUR SUCTION UNIT

Description	Factory equipped on models:
1 Hydrophobic Filter (non-sterile)	
2 4" Connection tubing	8mmID FDA approved Silicone tubing.
3 Vacuum gauge	Use only specified connection tubing
4 Tubing connector	for replacement.
5 Vacuum regulator knob	
6 DC power input (on side)	
7 Power switch	
8 6' patient tubing	.25"ID x 6' FDA approved PVC tubing
9 800 cc disposable canister w/lid (float shut off incorporated into lid)	with connecting couplers. Use only specified patient tubing for replacement.
10 90° connection elbow	
Switch mode adapter	

## CARE AND MAINTENANCE

### EMPTYING THE COLLECTION JAR

**CAUTION:** the collection jar must be emptied after every use. Never let the fluid level exceed the "Safe Full" line. **OVERFLOW CAN DAMAGE THE ASPIRATOR.**

1. Turn the aspirator OFF and allow for vacuum to return to zero (0).
2. Disconnect the tubing from the top of the collection jar.
3. Lift jar out of support bracket.
4. Remove lid. Empty jar.
5. To reinstall collection jar, reverse steps 1-4.

### CLEANING THE COLLECTION JAR

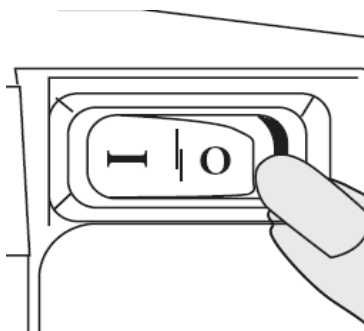
1. Vigorously wash separated collection jar and lid in detergent and water solution.  
**NOTE:** When cleaning collection jar lid, make sure the check valve is clean and freely moves to operate.
2. Soak for 20 minutes in a solution of 2% vinegar water. A 2% vinegar water solution may be made by using 4 teaspoons white vinegar in 1 quart of cool water.
3. Remove jar and lid. Air dry on a piece of paper towel.



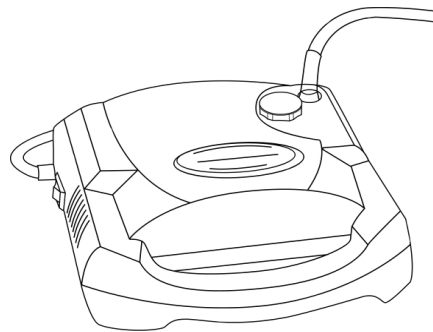
# AEROSOL COMPRESSOR WITH NEBULIZER

## OPERATION

1. Make sure the power switch is in the "Off" (O) position.
2. Unwrap power cord.
3. Place compressor so that the rubber feet are resting on a level, sturdy surface and upon which the controls can be easily reached when seated. Never block the air openings of the product or place it on a soft surface, such as a patient's lap or a bed or couch where the air openings may be blocked.
4. Plug power cord into an appropriate wall outlet.
5. Wash hands.
6. Connect one end of the nebulizer tubing to the compressor air-outlet connector **Note:** During high-humidity weather conditions, condensation (water build up) can occur in the nebulizer tubing.
7. Assemble clean nebulizer parts by placing baffle down in medication cup. Add prescribed medication into the medication cup.
8. Holding cup stationary, screw on nebulizer cap.
9. Assemble mouthpiece and t-piece (if applicable) and insert into the top of the nebulizer cap. If using an aerosol mask, insert the bottom part of the mask directly into the top of the nebulizer cap.
10. Attach tubing to nebulizer air-inlet connector.
11. Press the power switch "On" (I) to start the compressor.
12. Begin treatment by placing the mouthpiece between teeth. With mouth closed, inhale deeply and slowly through mouth as aerosol begins to flow, hold for 2-3 seconds, then exhale slowly through the mouthpiece. If treatment needs to be interrupted, simply press power switch "Off" (O).
13. If an aerosol mask is used, place the mask over mouth and nose. As aerosol begins to flow, inhale deeply and slowly through mouth, then exhale slowly.
14. When treatment is complete, turn unit off by pressing the power switch to the "Off" (O) position. Unplug the unit from the wall power outlet.



Compressor on/off



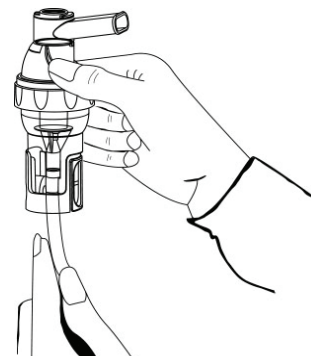
Unit Flat on rubber feet



Adding Medication



Attaching cup



Attach Tubing

## CARE AND MAINTENANCE

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### NEBULIZER CLEANING

All parts of the nebulizer, except tubing, should be cleaned according to the following instructions. Your physician and/or provider may specify a certain cleaning procedure. If so, follow their recommendations. Warning: To prevent possible risk of infection from contaminated medication, cleaning of the nebulizer is recommended after each aerosol treatment. Disinfecting is recommended once a day.

#### **CLEAN AFTER EVERY USE:**

1. With power switch in the "Off" (O) position, unplug power cord from wall outlet.
2. Disconnect tubing from the air-inlet connector and set aside.
3. Disassemble mouthpiece or mask from cap. Open nebulizer by turning cap counterclockwise and removing baffle.
4. Wash all items, except tubing, in a hot water/dishwashing detergent solution. Rinse under hot tap water for 30 seconds to remove detergent residue. Allow to air dry.
5. For reusable nebulizer only, clean daily in dishwasher using top shelf.

#### **NOTE- Bellevue Healthcare Provides Disposable Nebulizers**

**CAUTION-** A reusable nebulizer is dishwasher safe, a disposable nebulizer is not dishwasher safe.

### DISINFECT DAILY

1. Using a clean container or bowl, soak items in three parts hot water to one part white vinegar for 30 minutes OR use a medical bacterial-germicidal disinfectant available through your provider. Be sure to follow manufacturer's instructions carefully.
2. With clean hands, remove items from disinfectant solution, rinse under hot tap water, and air dry on a clean paper towel. Store in a zip-lock bag.

**Note:** Do not towel dry nebulizer parts; this could cause contamination.

### FILTER CHANGE

1. Filter should be changed every 6 months or sooner if filter discolors.
2. Remove filter by grasping it firmly and pulling out of the unit. Discard old filter.
3. Replace with a new filter. Additional filters should be purchased from Bellevue Healthcare.
4. Push new filter into position.

### TROUBLESHOOTING

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- If the compressor is running, but medication is not nebulizing please refer to cleaning and maintenance section for care of nebulizer
- If the compressor is not running at all, check to make sure it is plugged in and the outlet is working. If the compressor still does not work call Bellevue Healthcare.

# FULL-ELECTRIC HOSPITAL BED

## OPERATION

### Raising and Lowering Head and Foot Section

1. To Raise the Head Section (G): Depress the “HEAD UP (A)” button on the control pendant.
2. To Lower the Head Section (G): Depress the “HEAD DOWN (B)” button on the control pendant.
3. To Raise the Foot Section (H): Depress the “FOOT UP (E)” button on the control pendant.
4. To Lower the Foot Section (H): Depress the “FOOT DOWN (F)” button on the control pendant.
5. To Raise the Entire Bed: Depress "BED HEIGHT UP" (C)
6. To lower the Entire Bed: Depress "BED HEIGHT DOWN (D)"
7. WHEEL LOCKS: Two out of the four wheels have locks. These wheels have a little tab on them. When the tab is up, the wheels are UNLOCKED. When the tab is down, the wheels are LOCKED.
8. Manual Override: In the event that there is a power outage, this bed is equipped with an emergency crank. Underneath the mattress, there is a brown metal crank stuck in the springs. This crank is about 1.5 ft. long, and has two 90° angles. One end is also larger than the other. The large end fits onto the end of the motors located at the foot of the bed. Once on, this crank can be used to move the head and foot of the bed up or down without electricity.
9. Side Rails: Full side rails are adjustable by pulling the pin located at each end of the rail where it is connected to the bed. Half side rails can be lowered by lifting up the brown bar located at the bottom of the rail. (Figure 3)

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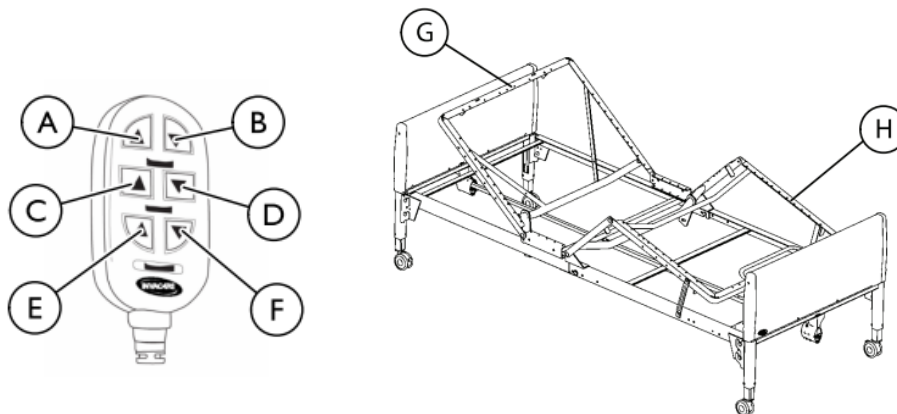


FIGURE 2-Full-Electric Bed



FIGURE 3 -Adjustable 1/2 rails

## CARE AND MAINTENANCE

1. Unplug the power cord of the electrical bed before performing any maintenance.
2. Wipe down the bed frame, foot and headboards, and mattress with disinfectant.
3. Allow the electric bed to dry completely before further use.

## TROUBLESHOOTING

NOTE: The motors do not always instantly respond to the control pendant.

1. If any problems arise during use, recheck all the electrical connections.
2. If any further problems arise, contact Bellevue Healthcare.

# ALTERNATING PRESSURE PUMP WITH PAD (APP)

## OPERATION

1. Plug power cord into outlet.
2. Turn power switch to the ON position.

NOTE: The green light will be illuminated when the pump is in the ON position.

3. Turn knob on pump to the maximum setting (clockwise). NOTE: It will take approximately 15 minutes for the pad to be fully inflated at the maximum p.s.i. NOTE: Keep hose attached to the pad and the pump, otherwise, deflation will occur.

4. Adjust the pump by doing the following:

NOTE: The pressure of the pump can be adjusted to provide maximum effectiveness and pressure relief for the patient.

NOTE: The pressure can be adjusted with a range from 1 to 8, with 1 being the lowest setting.

NOTE: The pump will cycle air through the two chambers every five minutes.

- a. Put the patient on the pad.
- b. Set the pressure, using the pressure control dial, to the desired setting.
- c. Slide the flat portion of your hand between the pad and the bed's mattress.

NOTE: There should be a cushion of air between the pad and the mattress of the bed. If not, check the pump and pad for leaks, tears, kinks, or breaks. If damage is found, DO NOT use. Contact Bellevue Healthcare for further instructions.

- d. If the pressure is unacceptable for the patient, repeat STEP 4b until desired pressure is reached.

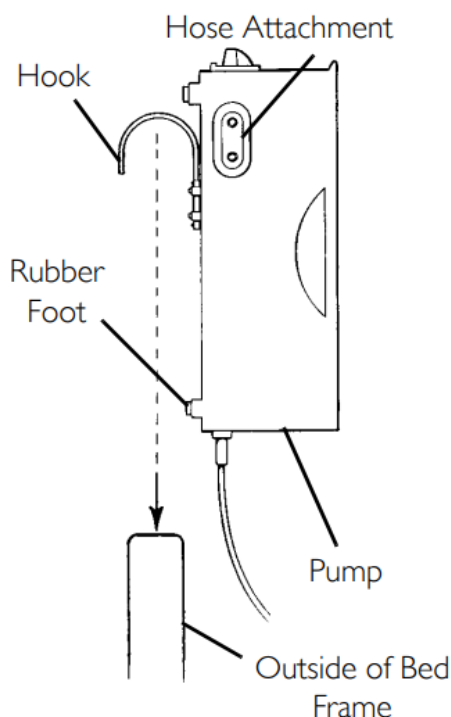
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## CARE AND MAINTENANCE

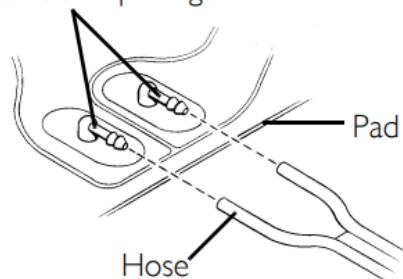
1. If pad does not inflate check the air tubing and make sure all connections are secure.
2. The pad can be cleaned by wiping it with a germicidal disinfectant solution.

### DETAIL A - ATTACHING THE PUMP TO THE BED



### DETAIL B - ATTACHING THE HOSE

Air Chamber Openings



### DETAIL C - CONTROL PANEL

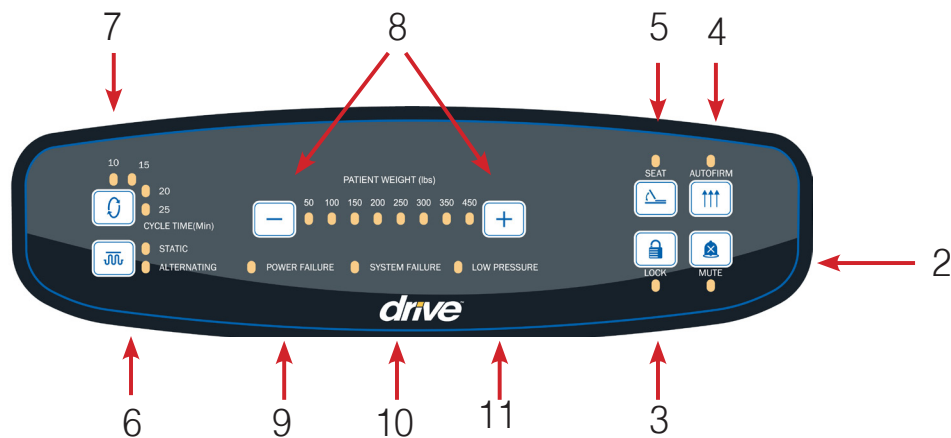


# LOW AIR LOSS MATTRESS (LAL)

## BASIC INFORMATION

### Control unit

Below are the functions of the 14029XP Control unit to be used with your Pressure Redistribution Mattress.



1. Power ON/OFF Switch
2. MUTE Button
3. PANEL LOCK Button
4. AUTOFIRM Button
5. SEAT Button
6. STATIC/ALTERNATING Button
7. CYCLE TIME Button
8. WEIGHT SETTING SELECTION Keys
9. POWER FAILURE indicator
10. SYSTEM FAILURE indicator
11. LOW PRESSURE indicator



### Power Switch (1)

The POWER switch is at the lower right side of the control unit. Turning the POWER switch ON/OFF will start/stop the control unit. The switch lights up when the power is ON, and extinguishes when the power is OFF.

### MUTE Button (2)

The audible/visible alarm turns on either when the pressure is low or the system fails to alternate. Press the Mute button to mute the audible alarm, and the MUTE indicator will light up (amber). The alarm indicator will continue flickering. Re-press the Mute button to re-activate the audible alarm and to extinguish the MUTE indicator.

### PANEL LOCK Button (3)

Press the PANEL LOCK button and hold it for 3 seconds to LOCK or UNLOCK the panel. The PANEL LOCK indicator lights up (amber) when the panel is locked. The panel will automatically lock up if no operations are used for over 30 seconds.

**AUTOFIRM Button (4)**

Press the AUTOFIRM button to set AUTOFIRM mode to quickly inflate the air mattress to the maximum pressure which facilitates nursing and caring. The AUTOFIRM indicator lights up (amber) when the system is in AUTOFIRM mode. The system will automatically return to the previous mode 30 minutes after the AUTOFIRM mode is in operation. It is also possible to cancel AUTOFIRM mode by pressing the AUTOFIRM button.

**SEAT Button (5)**

Press the SEAT button to set SEAT (FOWLER) mode to inflate all cells and increase the pressure by 10mmHg. The SEAT indicator lights up (amber) when the system is in SEAT (FOWLER) mode. To cancel SEAT (FOWLER) mode, press the SEAT button.

**STATIC/ALTERNATING Button (6)**

Press the STATIC/ALTERNATING button to operate the air mattress in STATIC mode or ALTERNATING PRESSURE mode. The amber STATIC indicator (or the green ALTERNATING indicator) turns on to indicate the corresponding operation mode.

**CYCLE TIME Button (7)**

The CYCLE TIME button can be used to select the appropriate cycle time of the inflation modes. There are 4 different cycle times available: 10, 15, 20 and 25 minutes.

**WEIGHT SETTING Buttons (+) and (-) (8)**

The WEIGHT SETTING Buttons (+) and (-) can be used to adjust the pressure of the inflated cells based on the patient's weight. As the weight setting increases, the pressure level indicator lights up (green) with each added level of pressure. Eight pressure levels are available and indicated by the increasing green light indicator.

**NOTE!!** Weight capacities vary between models. Please refer to your item number below for corresponding weight capacity.

Item #	Weight Capacity
14029	450 lbs
14029-84	450 lbs
14029DP	450 lbs

**POWER FAILURE indicator (9)**

This indicator light (red) flickers when there is no power input to control unit.

**SYSTEM FAILURE indicator (10)**

This indicator light (red) flickers when the system fails to alternate.

**LOW PRESSURE indicator (11)**

This indicator light (red) flickers when the pressure is below the pre-defined level.

# LOW AIR LOSS MATTRESS (LAL)

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## OPERATION

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### 14029XP

- **Turn the power ON**

A BEEP sound will begin the operation. The indicator of the power switch will light up (green), and the control unit will begin to pump air into the mattress. The LOW PRESSURE indicator (red) will flicker as the inflation of the mattress begins.

**NOTE:** The audible alarm will not be heard when inflating the mattress for the first time.

- **Automatic STATIC mode**

The control unit will automatically enter STATIC mode when it is turned on. Once the pressure reaches 50 mmHg, the unit will return to the previously selected mode, if applicable.

**NOTE:** If the pressure does not reach 50 mmHg 40 minutes after the control unit is turned on, the audible alarm will start to beep, and the LOW PRESSURE indicator will continue flickering.

- **Mode selection**

Press the STATIC/ALTERNATING button to change the function mode to ALTERNATING PRESSURE or STATIC as desired.

**NOTE:** It is recommended to always keep the control unit in the ALTERNATING PRESSURE mode when the patient is in a lying position for more efficient pressure ulcer prevention and treatment.

**NOTE:** The STATIC mode provides an even support surface that will make the patient transfer or reposition easier. The STATIC mode or SEAT (FOWLER) mode also prevents the patient from bottoming out when in the seated position.

- **Weight Setting Selection**

The pressure of the mattress can be adjusted by choosing the patient's corresponding weight setting using the weight setting buttons (+) and (-). Use the weight setting buttons to select the desired level. Pressure levels will range from 10 to 50 mmHg.

**NOTE:** Pressing the [+] key will bring the pressure one level higher and the [-] key will bring the pressure one level lower. It is recommended to follow the HAND CHECK procedure as demonstrated in page 10 to decide the appropriate pressure level.

- **Automatic pressure control**

During normal operation, 14029XP control unit will monitor pressure changes and keep it constant at the set level. When the pressure is below the set pressure level, the control unit will automatically start to inflate the mattress. The control unit will stop when the set pressure level is reached.

**NOTE:** If the pressure is consistently low, the audible alarm will beep and its indicator will light up to attract attention. If there should be obvious leakage, for example caused by loose connection of tubes, the audible/visible alarm will be activated.



# LOW AIR LOSS MATTRESS (LAL)

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## OPERATION

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- **For nursing and caring convenience**  
Press the AUTOFIRM button to automatically inflate the mattress to the maximum level (above 50 mmHg) for about 30 minutes. After 30 minutes, the control unit will return to the previously set weight setting and pressure level.
- **Placing the patient in the seated (Fowler) position**  
Press the SEAT button for support while in the seated position. Air pressure will increase by 10mmHg to prevent the patient from bottoming out when in a seated position.
- **To silence the alarm**  
If the pressure drops below the pre-set level, the LOW PRESSURE indicator will light up accompanied by a BEEP alarm tone. If the control unit fails to alternate in the ALTERNATING PRESSURE mode, the SYSTEM FAILURE indicator will light up accompanied by a BEEP alarm tone. For either scenario, pressing the MUTE button will silence the alarm, but the indicator will continue to flash until the correction is made. Pressing the MUTE button again will reactivate the audible alarm. If the control unit loses power input, the POWER FAILURE indicator will light up accompanied by a BEEP alarm tone. To disarm this alarm press the power switch button to off.

### CPR function

When there is an emergency and CPR must be performed on the patient, pull the CPR strap to release the air immediately from the mattress.

The CPR strap is located at the head end right-hand side of the mattress as you are lying down.

CPR Strap at Head End



Control unit at Foot End





# TRAPEZE UNIT

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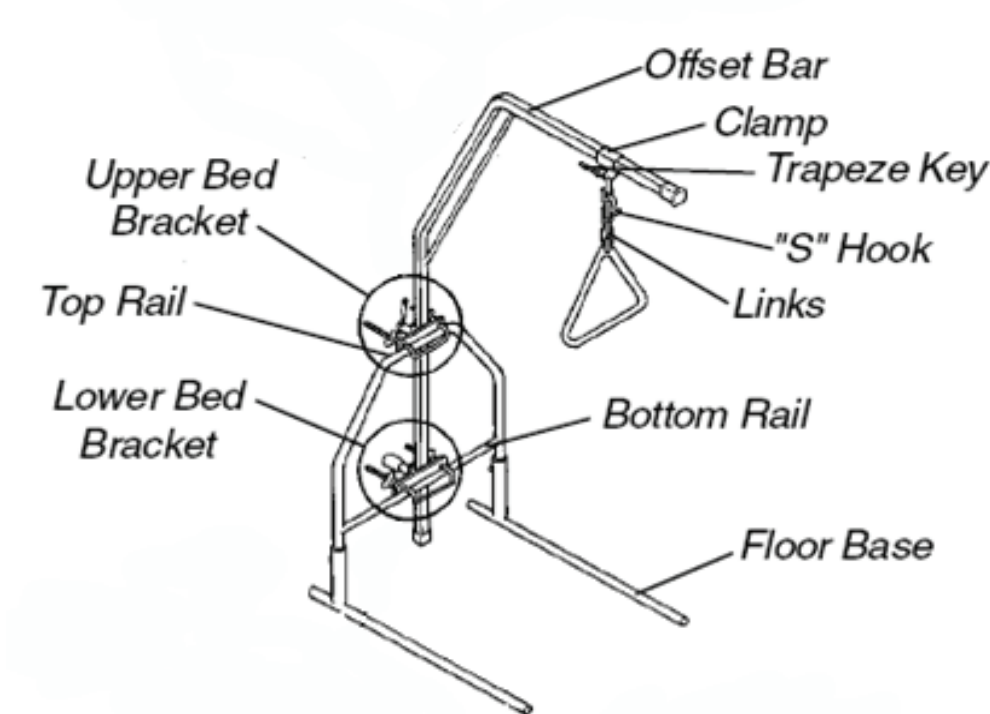
## OPERATION

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### ADJUSTING THE TRAPEZE (Figure 1)

1. Changing Height.
  - a. Position any of the lower chain links onto the "S" hook.
2. Changing Position of Triangle Grip.
  - a. Loosen trapeze key by turning counterclockwise.
  - b. Slide the clamp to desired position on the offset bar.
  - c. Secure the trapeze clamp to the offset bar by turning the key clockwise.

Note: Adjustments are the same for bed-mounted trapeze as well as free standing trapeze.



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FIGURE 1 - Adjusting the Trapeze

## CARE AND MAINTENANCE / TROUBLESHOOTING

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1. Periodically clean offset bar and trapeze triangle to ensure optimal performance.
2. Periodically check to make sure the wing nuts and clamps are secure.

# PATIENT LIFTS

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## OPERATION

### LIFT PREPARATION

1. Before each lift, ensure that the lift is working correctly and that you have the sling attached correctly.
2. Ensure the surrounding area is cleared and ready for patient transport.

### GENERAL LIFT, TRANSPORT AND LOWERING

1. Prepare the Sling:
  - a. Position the sling under the patient by rolling patient toward you and then slip the half folded sling under the patient (if patient is lying down). Or, stand in front of the patient and slide the sling behind the patient's back by having the patient lean forward (if seated).
2. Prepare the Lift:
  - a. Position the base of the lift as close to the bed or chair as possible so the cradle of the lift is situated directly above the patient.
  - b. Use the adjusting lever handle to widen the base before attaching the sling. The base of the lift must be spread to widest possible position to maximize stability.
  - c. Tighten the hydraulic pressure release knob (HML-400 only) by turning it clockwise. This will allow the boom arm to raise when you pump the hydraulic handle.
3. Lifting the Patient:
  - a. Lower the boom arm and cradle so the straps of the sling are close enough to be attached.

**Caution:** Before lifting patient, be sure the lifter arm is centered over patient. Remember, when lifting patient, the brake should NOT be used.

- b. When both sides of the sling are attached to their respective sides, raise the patient slowly. Repositioning of the patient may be needed to ensure that a safe sitting position is attained as the patient is raised.
- c. Once the patient is in a safe seated position, slowly rotate the patient so he or she is facing the operator of the lift.
- d. Grasp the steering handles and carefully maneuver the patient into position over the desired location (Bed, Chair, Wheelchair, Toilet, Bath etc.).

**Note:** If transferring patient a short distance, ensure that patient is facing the attendant and keep patient as low as possible so that their feet rest on the base of the lift (straddling the mast).

**Lower center of gravity reduces the risk of tipping over.**

**DO NOT transport patient on shag or deep pile carpeting, thresholds, unpaved surfaces, outdoors or on any other obstructions.**

4. Lowering the Patient
  - a. Open the hydraulic pressure release knob turning it counter-clockwise, not more than one full turn.
  - b. Guide the descent. Push gently on knees to attain correct sitting posture while lowering.

**Note:** Wheel locks are provided for parking only. To lock casters, step on cam lever on side of casters. To unlock, step on highest cam lever.



**\*\*For Additional Instruction on Patient Transfer / Lift, Please Contact Your Authorized Healthcare Provider \*\***

## OVERBED TABLE

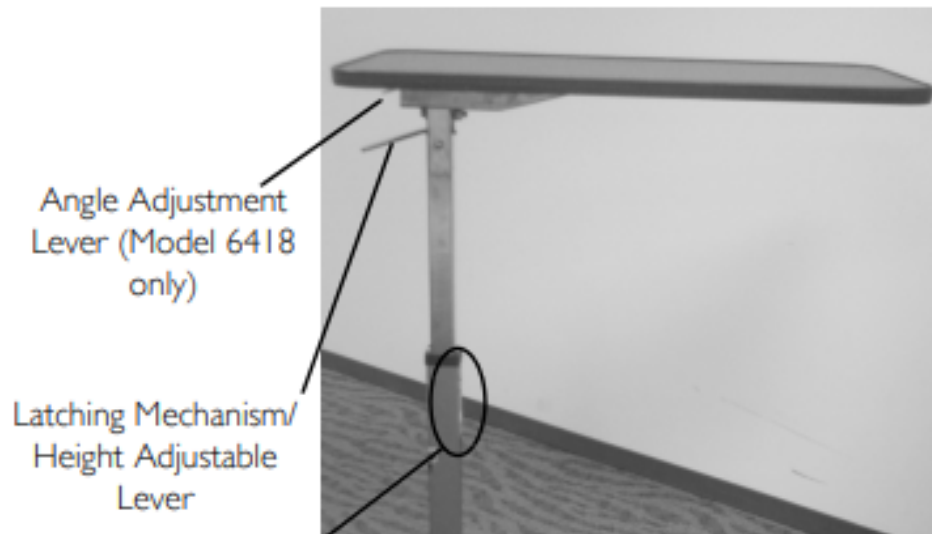
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### OPERATION

#### ADJUSTING THE OVERBED TABLE (Figure 1)

1. Overbed Table with adjusting levers
  - a. TO RAISE: Pull up on the tabletop assembly to the desired height.
  - b. TO LOWER: Pull up on the release lever and adjust the table top DOWN to the desired height.
  - c. TO TILT TOP: Pull up on the release lever above the height adjustment lever and tilt as desired.

NOTE: The tabletop assembly will remain in the position when the release lever is released.



**FIGURE 1-**Adjusting the Overbed Table

### CARE, MAINTNENACE and TROUBLESHOOTING

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1. Periodically clean surface and metal base for increased performance.
2. If the locking mechanism on the adjustable base is not working properly call Bellevue Healthcare.

# WHEELCHAIRS

## OPERATION

**FOLDING AND UNFOLDING WHEELCHAIR (Figure 1) WARNING:**  
Keep hands and fingers clear of moving parts to avoid injury.

### OPENING

1. Open the wheelchair by grasping the push handle of the wheelchair closest to you.
2. Tilt the wheelchair towards you. This raises the opposite wheel and caster off the ground or floor.
3. Push downward on the TOP of the seat rail closest to you where the seat upholstery is attached until the wheelchair is fully open.
4. Engage both wheel locks, open footrests/legrests for clearance and transfer into the wheelchair.

### CLOSING

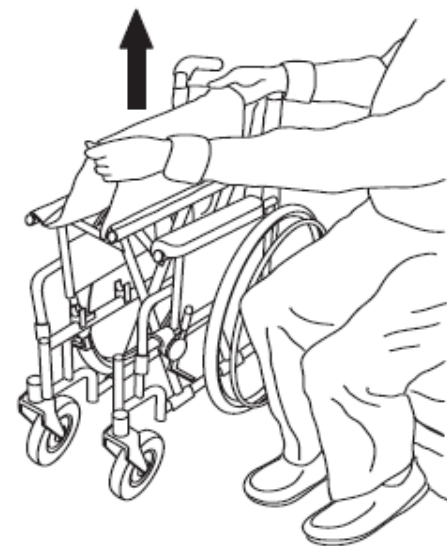
1. Swing footrests/legrests in locked position to the front of the wheelchair.
2. Pivot footplates upward to vertical position.
3. With both hands, grasp the middle of the seat upholstery at the front and back edge and lift up.

### ENGAGING/DISENGAGING WHEEL LOCKS

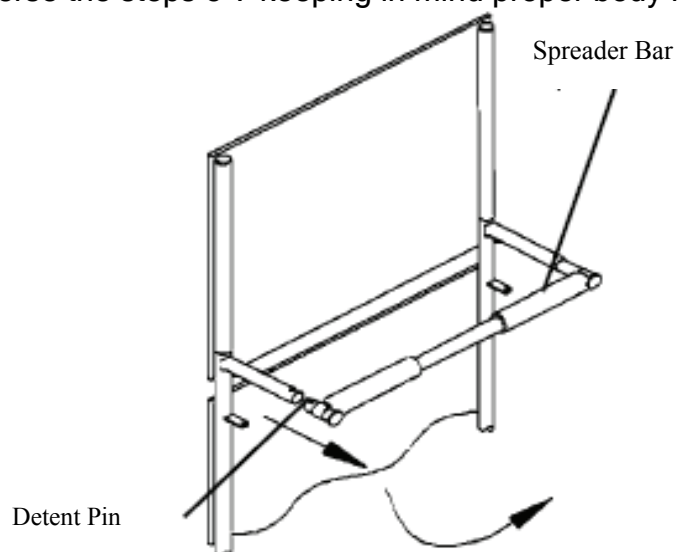
1. To engage: grasp the wheel lock handle and push towards the front of the chair. NOTE: The wheel lock shoe will push into the rear wheel.
2. To disengage: grasp the wheel lock handle and pull towards the back of the chair.

### RECLINING WHEELCHAIRS

1. Refer to above section "FOLDING AND UNFOLDING WHEELCHAIR."
2. Attach spreader bar to detent pin. (Figure 2)
3. Inform the occupant of the wheelchair that the wheelchair is about to be reclined.
4. Make sure the wheelchair is occupied and on a level surface before reclining.
5. Stand behind the wheelchair and grasp both handles firmly.
6. Lifting up on handles, squeeze release levers.
7. SLOWLY, pull back on the back assembly while squeezing the release levers.
8. When the back reaches the desired angle, SLOWLY let go of the release levers.
9. To return back to the upright position, reverse the steps 5-7 keeping in mind proper body mechanics.



**FIGURE 1–** Folding the Wheelchair



**Figure 2–** Attaching the Spreader Bar

Scan to watch video:



## **INSTALLING/REMOVING THE SWINGAWAY FOOTREST ASSEMBLY (Figure 3)**

### **INSTALLING**

1. Position the swingaway footrest assembly to the side, perpendicular to the wheelchair.
2. Install the hinge plates on the swingaway footrest assembly onto the hinge pins on the wheelchair frame.
3. Push the swingaway footrest assembly towards the inside of the wheelchair until it locks into place.
4. Repeat this procedure for the other footrest assembly.

NOTE: The footplates will be facing each other when locked into place.

### **REMOVING**

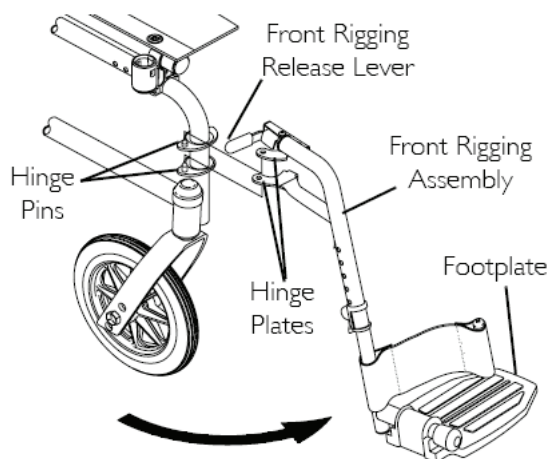
1. Push the footrest release lever inward.
2. Rotate the swingaway footrest assembly outward.
3. Lift the swingaway footrest assembly off of the hinge pins.

## **SWINGAWAY FOOTREST HEIGHT ADJUSTMENT (Figure 4)**

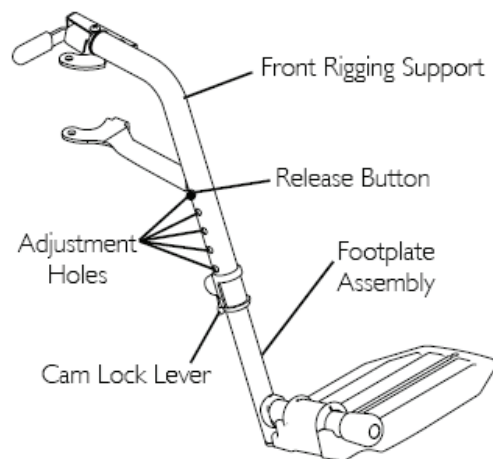
1. Remove the swingaway footrest assembly. Refer to “INSTALLING/REMOVING THE SWINGAWAY FOOTREST ASSEMBLY” above.

NOTE: Lay the assembly on a flat surface to simplify the procedure.

2. Remove the impact guard and/or calf strap, if necessary.
3. Loosen, but do not remove the bolt and locknut that secure the footrest assembly to the upper footrest support.
4. Reposition the lower footrest assembly to the desired height.
5. Securely tighten the bolt and locknut.
6. Repeat this procedure for the other footrest, if necessary.
7. Replace impact guards and/or calf strap, if necessary.
8. Reinstall the swingaway footrest assembly. Refer to “INSTALLING/REMOVING THE SWINGAWAY FOOTREST ASSEMBLY” above.



**Figure 3— Footrest Installation**



**Figure 4— Adjusting Footrest Height**

## ADJUSTING THE ELEVATING LEGREST ASSEMBLY (Figure 5)

1. To raise the elevating legrests perform the following:
  - a. Assistant should grab hold of the support tube and raise elevating legrest until the desired height is obtained.
2. To lower the elevating legrests, perform the following:
  - a. Support user leg with one hand.
  - b. Push release lever downward with the other hand.
  - c. Gently, lower user leg down and rest against the legrest.
3. To adjust the calf pad perform the following:
  - a. Turn the pad towards the outside of the wheelchair.
  - b. Slide the calf pad up or down until the desired position is obtained.
  - c. To secure the calf pad, turn the calf pad towards the inside of the wheelchair.

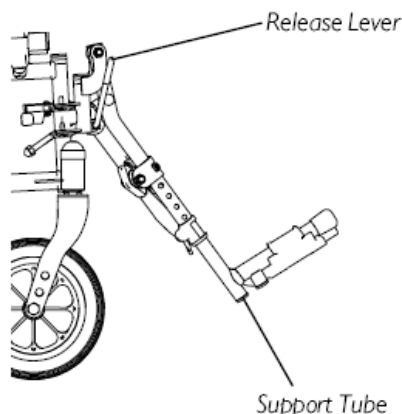


FIGURE 5- Adjusting Legrests

## WHEELCHAIRS WITH ADJUSTABLE HEIGHT ARMS (Figure 6)

**WARNING:** Make sure the armrest lever is in the locked position before using the wheelchair.

1. Unlock the armrest by flipping the height adjustment lever the top front of the armrest to the UP (Horizontal) position.
2. Adjust the armrest to one of the five positions.
3. Lock the armrest by pressing the height adjustment lever into the DOWN (Vertical) position when desired armrest height is achieved.
4. Repeat steps 1-3 for the other armrest.

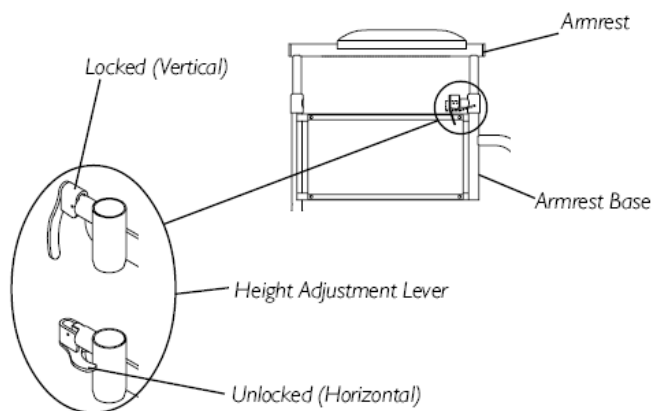


FIGURE 6– Adjusting the Arm Height

## WHEELCHAIRS WITH SWING BACK ARMRESTS (Figure 7)

1. Unlock the swing-back arms by rotating the armrest release lever towards the outside of the wheelchair.
2. Pull the front of the swing-back arm straight up/out of the arm socket and towards the rear of the wheelchair.
3. To use the swing-back arm, push the swing-back arm towards the front of the chair and then down into the arm socket.

NOTE: Armrest release lever MUST be in the unlocked position when placing armrest into the arm socket.

4. Lock the swing-back arms by rotating the armrest release lever towards the inside of the wheelchair.

## WHEELCHAIRS WITH REMOVING ARMRESTS (Figure 8)

1. Unlock the armrest by turning the armrest release levers (front and back) towards the outside of the wheelchair.
2. Lift the armrests completely out of arm sockets from the wheelchair.
3. To replace armrests: Place armrests into arm sockets and lock armrests by turning arm release levers toward the inside of the wheelchair.
4. If armrests have release buttons instead of levers perform the following:
  - a. Press in armrest release button located on armrest.
  - b. Pull armrests straight up to remove armrest from arm sockets.
  - c. Replace armrests by repeating steps A-B.

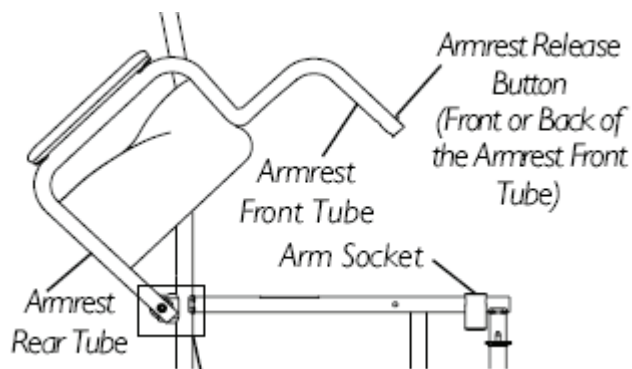


FIGURE 7– Swing Back Arms

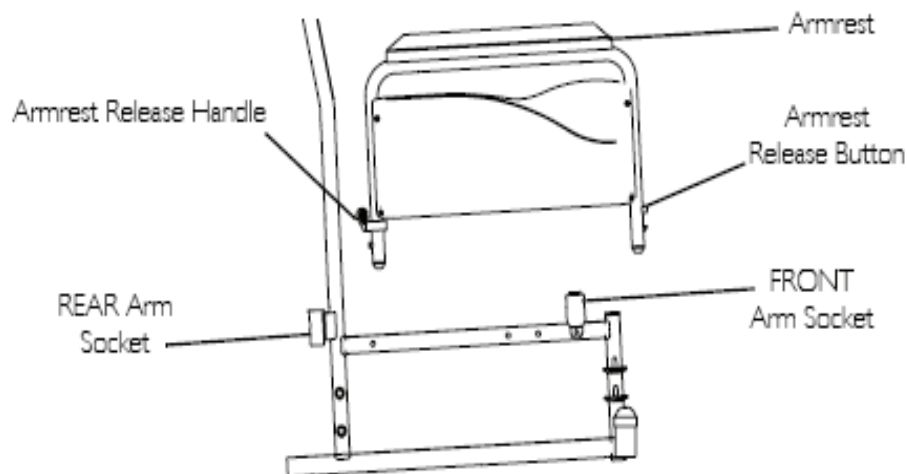


FIGURE 8– Removing Arms with Buttons



## **CARE AND MAINTENANCE**




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1. Before and periodically during use, make sure all nuts and bolts are tight. Check all parts for damage or wear and replace. Check all parts for proper adjustment.
2. The wheels and tires should be checked periodically for cracks and wear and should be replaced when necessary by Bellevue Healthcare.
3. Periodically check the hand rims to ensure they are securely attached to the rear wheels.
4. Periodically adjust the wheel locks in correlation with tire wear.
5. Periodically check front caster and wheel hubs to make sure they are clean. Use a Teflon lubricant if necessary.
6. If using a wheelchair with pneumatic tires, DO NOT use if tires have different amounts of pressure.
7. When using a reclining wheelchair, periodically check the reclining mechanism to ensure they are clean and working freely.

## **TROUBLESHOOTING**



















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1. If a chair with pneumatic tires veers right or left, is sluggish in turning or its casters flutter, check and make sure equal air is in each tire.
2. If the chair is sluggish in turning, squeaks and rattles or there is looseness in the chair and it does not have pneumatic tires, check for loose bolts and nuts.
3. If the chair veers to the right or left and its casters flutter, check and make sure that the casters both contact the ground at the same time.

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**Other Important Numbers:****DOH Home Health Hotline:** 8am to 5pm, Monday-Friday: 1-800-633-6828

(for complaints or questions regarding care provided by Home Care Companies)

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(for complaints or questions regarding care of persons in nursing homes, retirement homes or adult family homes)

**Adult Protective Services:** 8am to 5pm, Monday-Friday: 206-341-7660

(for complaints or questions regarding care of persons living alone or in a family setting)

**Medicare Beneficiary "800" Hot Line Numbers:**

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