# NOTKEB



Instructions for use Models S 962-2, S 962-2W

### Version, Imprint

Instructions for use G92 CE HB-RD-000061 Rev.1 for Völker bed models S 962-2, S 962-2W from year of construction May 2009

## These instructions for use are valid from 05/2021

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We reserve the right to make changes to reflect technical advances.

The contents of this document are subject to change without prior notification.

Customers are advised to contact the responsible area sales representative before placing an order.

Technical documentation can be made available on request.

You will find the electronic version of these instructions for use in PDF format online at <u>www.voelker.de</u>.

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Völker bed models S 962-2, S 962-2W from year of construction May 2009 – Instructions for use G92

### Notes | General information

#### **General notes**

You have purchased a bed from Völker GmbH. This bed has been built in accordance with the applicable national and international standards and the regulations reflecting the current state of technology.

Völker beds satisfy requirements in terms of safety and functionality. They are tested in accordance with international standards and bear the CE mark, which documents the beds' compliance with essential requirements for medical products.

Please read the general safety notes. Please also note (with particular attention to any warranty claims) the further notes on the following pages.

#### Versions

The bed can be realised in various versions. For a description of these variants, please refer to the "versions" chapter.

These instructions for use also contain notes at certain points regarding various operating variants or different technical data for the various models or the S 962-2 model with the two motor variants DA01 and DA02. If areas of text are not universally valid, but instead specify a definite model or a definite motor variant, these text areas will begin by naming the model or variant with a grey background:

Example: S 962-2: ...., S 962-2W: ...., S 962-2 (DA02): ..., S 962-2 (DA01): ....

You can recognise the variant of your bed based on the type label.

### **Copyright protection**

These instructions for use may only be transferred to third parties with the written consent of Völker GmbH. All documents are protected under copyright.

#### Warranty and liability

Völker beds are supplied under an extensive warranty as exclusively described in the order confirmation. For details please contact Völker.

We reserve the right to make technical modifications without notice as part of the further development of the beds which form the subject of these instructions for use. All specifications are non binding. Printing errors excepted.

We accept no liability for damage and operational faults caused as a result of misuse and/or non-observance of these instructions for use.

The portrayal of the accessories does not necessarily match the actual product.

### Notes | Designated purpose 1/2

#### Intended use

Völker bed models S 962-2 and S 962-2W are beds for medical use and are intended for use for patients in hospital wards, clinics and care institutions.

The bed is intended to be used for patients with a physical height of 146 cm or above, a body weight of 40 kg or above, and a body mass index (BMI) of 17 or above.

The bed may only be operated under the conditions described in these instructions for use. Any other use is considered improper.

In all care environments, the operator shall consider the patient's mental and physical condition and the resulting risks to the operation of this medical device before using the bed.

The beds safe working load is 250 kg. To calculate the maximum patient weight, 20 kg for the weight of the mattress and 45 kg for accessories as well as the weight borne by the accessories must be deducted from the safe working load when using the bed in application environments 1 and 2 (intensive and acute care) according to DIN EN 60601-2-52. When using the bed in application environments 3 and 5 (long-term and outpatient care), the values to be accounted for are 20 kg for the mattress and 15 kg for accessories as well as the weight borne by the accessories.

### Contraindications

This bed is only suitable for patients who do not fall below the following body

Model	Safe working load	Maximum patient weight	
		in application environment 1, 2*	in application environment 3, 5*
S 962-2, S 962-2W	250 kg	185 kg	215 kg

Distribution of the safe working load onto the lying surface		
Lying surface section	Share of the safe working load in %	Share of the safe working load in kg
Back section	45 %	112,5 kg
Seat section	25 %	62,5 kg
Upper leg + lower leg section	30 %	75 kg

\* Except in the vicinity of high-frequency surgical equipment and in rooms containing magnetic resonance imaging (MRI) equipment.

dimensions/weights:

Height: 146 cm

Body weight: 40 kg

BMI = <u>body weight</u>

BMI is calculated using this formula:

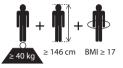
The maximum patient weight can therefo-

Height<sup>2</sup>

rebe taken from the following table:

Body Mass

Index (BMI): 17



kg

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### Notes | Designated purpose 2/2

#### Side effects

If the patient lies down for a longer period of time, pressure ulcers can occur without appropriate countermeasures.

#### Non intended use

Non intended use can be dangerous. This includes, but is not limited to:

- Incorrect actuation of electrical functions and uncontrolled positioning
- Operation of the care bed by the patient without having received prior instruction in how to do so
- Use of other electrical equipment on the bed
- Pulling on cables to move the bed
- Removing electrical plug connections by pulling on the cable
- Use of the bed on a slope of more than ten degrees of inclination (the bed's brakes are designed for an angle of inclination of no more than ten degrees)
- Any attempt to move the bed while it is in braked position
- Use of the bed for transport within a vehicle
- Overloading of the bed beyond the specified safe working load



 $\mathbb{A}$ 

**CAUTION** If, in an emergency situation, it is impossible to avoid putting people who are less than 146 cm tall in the bed, protective covers must be placed on the side rails. This also applies to the use of the bed by weak or confused patients.

**WARNING** The bed may not be placed right next to or stacked up with other equipment. If operation near to or stacked up with other equipment is necessary, it must be ensured that the operation of the bed is observed and correct use in this arrangement is checked.

### Notes | General regulations, user training / instruction, further requirements

#### **General regulations**

The bed must only be operated and used in accordance with its designated purpose, in line with the applicable regulations, the generally-acknowledged rules of technology and the stipulations of occupational safety and accident protection guidelines. The bed may **not** be operated in a faulty state that could endanger the patient, care staff or third parties.

#### **User training**

The bed may only be operated by individuals whose training or understanding and experience offer surety for correct handling.

#### **User instruction**

The thorough induction of care personnel in the operation of the bed can be provided by Völker or its representative at the customer's request.

Attendance of such training can be certified and confirmed by Völker using the form provided for this purpose, specifying the name, date and signature.

Patients must be instructed in the use of the bed before care personnel hand over the hand control to them.

### Other requirements

Whoever is in charge of the activation, operation or preparation of the bed must have been given a copy of these instructions for use (in printed or electronic form) and have read them.

To avoid operating errors and to safeguard the smooth operation of the bed, care personnel must always have access to the safety notes below.

#### **Flooring requirements**

Increasingly overweight patients and occupants have caused a consistent increase in demands on hospital and care beds in recent years. Völker has addressed this topic by increasing the "safe working load" for the bed. The higher strain requirements are not limited to beds only they apply also to static and floor requirements. For this reason, we recommend that flooring designed for these loads is used in areas where the beds are situated. This means flooring that is classified in accordance with DIN EN ISO 10874 and that has been laid by professionals (flooring for public or commercial areas that are subject to medium or heavy traffic).

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### Notes | General safety notes 1/5



Warning symbols Information marked with this symbol must be read and its content strictly observed.



**DANGER** represents an immediate threat of danger that can cause serious physical injury or death.

WARNING represents potentially dangerous situations that can lead to serious physical injury or death.



**CAUTION** represents potentially dangerous situations that can cause slight physical injuries.



**NOTE** warns of potential damage to objects or property.

#### Before first activation

Before the bed is put into action for the first time, care personnel must read

these instructions for use in full and with care.

Before the bed is activated for the first time, care personnel must be instructed in the handling of the bed using the instructions for use. The potential dangers that can arise despite correct operation of the bed must also be pointed out in full.

### Before and during use

Before each use of the bed, the user must be sure that the bed is in a good, safe condition and that safe use is ensured (Functional check).



**WARNING** No adjustments or modifications may be made to Völker products without the permission of the manufacturer. This automatically voids all warranty claims and CE conformity. **WARNING** If other equipment which has cables, air pipes or the like is to be operated on the bed, it must be ensured that these cables are routed so that they cannot become trapped in the movable parts of the beds and thus be damaged.

WARNING Head and foot section are not connected to the potential equalisation. Electrical additional units should not be connected here.

## Notes | General safety notes 2/5



**CAUTION** To avoid injury from falls, we recommend always moving the bed to its lowest position with the castors fixed when the patient is sleeping in the bed (except when undertaking care measures).

- 0
- **NOTE** When installing the bed, position it with the headboard facing the wall.

### Transporting the bed

**CAUTION** When transporting the bed, the mains cable must be secured in such a way that it cannot be rolled over, damaged in any other way or cause a tripping hazard. The bed should only be moved over a solid floor. Never attempt to push it over obstacles of over 2 cm in height. The maximum angle of inclination of the floor must not exceed 10°. CAUTION "Risk of accident"

If the bed is not being transported, the castors must always be fixed, since the bed may be required as a support for when the patient stands up or lies down. If the bed rolls away while unbraked, this can lead to a serious fall. After activating the central holding brake p. 45 it must be checked that the bed is actually fixed, i.e. the castors are adequately braked. The bed can be in non-braked position even after first activation or reactivation, and consequently it must be checked that the castors are correctly fixed.

#### One-sided load on the bed

**NOTE** In order to prevent one-sided loads on the bed, it must not be used as a seat for persons other than the patient (i.e. visitors must not sit on the edge of the bed).

#### Side rails



WARNING "Risk of entrapment"

In the case of patients whose physical or mental condition makes necessary to use side rails to protect them from falling out of bed, the following safety measures must be observed:

- The legal permissibility of using side rails must be ascertained.
- The side rails may only be operated by trained care personnel.
- Ensure that the side rails (or parts thereof) are either fully raised and locked in position or completely lowered.
- It must be ensured that the patient does not come into contact with the side rail elements when the electrical lying surface adjustment mechanism is actuated. It is also important to ensure that no part of the body is sticking out through the side rails.

### Notes | General safety notes 3/5

 If the side rails are used with a person whose psychological condition makes their use necessary, then it must be ensured that the hand control is kept out of their reach or its functions are locked. It is strongly recommended that side rail covers are used.



**DANGER** If these safety measures are not observed by care personnel, injuries can be caused to hands, knees, fingers, feet, legs and hips, along with haematomas and other injuries as a result of entrapment. In children or people who are less than 146 cm tall, non-observance of these guidelines can lead to death.

### WARNING "Danger of injury"

If the side rails are damaged, the bed must not be used and must be repaired.

#### Height adjustment



DANGER "Risk of entrapment between the lower frame and/ or floor and the bed frame when the bed is lowered" It must be ensured that no people, limbs, pets, bed linen or other objects are caught between the bed frame and the lower frame and/or floor.



#### DANGER "Danger of movement"

If any movement of the bed could represent a danger to the patient, all functions must be locked.

#### Accessories



**WARNING** Only original Völker accessories should be used! The installation of additional accessories (restraints etc.) is subject to the responsibility and due diligence of the operator.

### Notes | General safety notes 4/5

#### Use of lifting devices



#### WARNING "Risk of injury"

Only lifting devices approved by Völker may be used.

The lifting devices specified are appliances that can be attached to the bed for transport purposes. Patient lifters can be used.

#### Use of oxygen equipment



DANGER "Risk of fire"

Never use the bed in an oxygen tent or in potentially explosive atmospheres (possible presence of flammable gases or vapours). Provided it has been excluded (e.g. based on information in the instructions for use of the equipment being used) that the use of the equipment may cause the  $O_2$ concentration to rise to such a degree that there is an explosion risk, then the equipment can be used).

#### **Rail spacers**

When using the rail spacer, please read the separate instructions for use for this accessory. During technical checks, the rail spacers should also be checked to ensure they are suitable for the size of side rail used.

### **Cleaning and disinfection**

In order to maintain consistent functioning, the bed should be cleaned, disinfected and tested as soon as possible following each use, so that it can be reused immediately without risk.

Incorrect cleaning/disinfection of the bed can cause danger.

#### Maintenance and repair

Anyone responsible for carrying out maintenance and servicing must at least have read the safety notes for the respective bed model and be qualified in accordance with the relevant national regulations. The following applies for Germany: the staff requirements defined by the regulations governing the installation, operation, use and maintenance of medical devices must be ensured by the operator of the beds.

To guarantee a trouble-free operation of the beds, the instructions for use of the bed must always be accessible to the servicing staff.

After maintenance work or repairs have been carried out, an inspection/check corresponding to the work performed must be conducted. During this check, it must be determined that the bed can be used in accordance with the specifications without risk to patients, users or third parties.

The technical check must be carried out at least once a year and after every lengthy period of non-use.

Any discernible damage must be eliminated immediately.

### Notes | General safety notes 5/5

#### Electromagnetic / static interference

The beds of the S 962-2 and S 962-2W models satisfy the EMC\* requirements in accordance with the international requirements. The basis for testing is standard DIN EN 60601-1-2.

Only original Völker replacement parts, cables and accessories may be used on the bed. Otherwise the EMC behaviour may be impaired, which may result in the bedand other devices in the area around the bed malfunctioning.

\* The German Electromagnetic Compatibility of Equipment Act

#### Serious incidents

Any serious incidents that occur in conjunction with operation of the bed must be reported immediately to the appropriate authorities in the relevant country and to Völker GmbH.

#### **Application parts**

An application part is a part of a medical electrical device (ME device) which of necessity comes into physical contact with the patient under normal conditions of use, so that the ME device or an ME system can fulfil its function (DIN EN 60601-1).

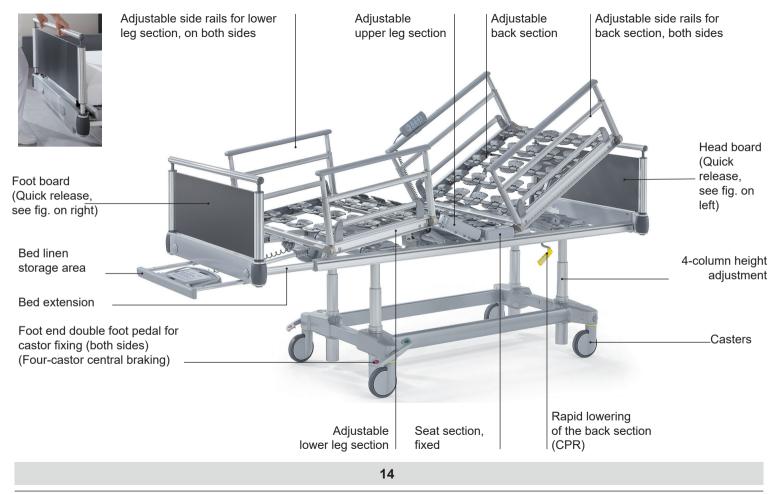
For the S 962-2(W) hospital bed, these are:

- · hand control
- side rails
- head/foot ends
- · lying surfaces
- frame



A schematic representation of the application area.

### Functional description | Overview



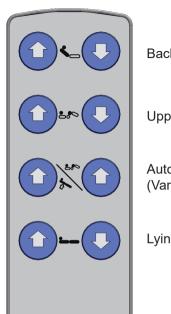
### Functional description | Hand control with hook (version) 1/2

Back section up 1

Upper leg section up

Anti-Trendelenburgpositioning<sup>2</sup>

Lying surface up 4



Back section down 1

Upper leg section down

Auto-Contour<sup>2</sup> (Variant specific)<sup>3</sup>

Lying surface down 4

Reverse:



Hand control locked



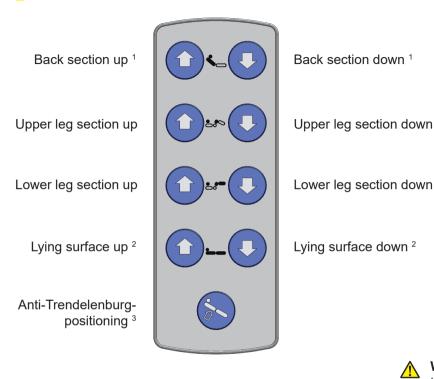
Hand control unlocked

- <sup>1</sup> The Völker diagnostics system (optional) allows a time between 0 and 5 seconds delay to set the back rest movement to the 30° position p. 49 (Function is variant specific).
- <sup>2</sup> Leg end lowered
- <sup>3</sup> Back and upper leg section raised simultaneously
- <sup>4</sup> Pressing the "Lying surface up" and "Lying surface down" buttons simultaneously brings the bed into the horizontal position (Function is variant specific).



**WARNING** When actuating motorised adjustments with the side rails raised. Ensure that the occupant does not have any contact with the side rails, and that no parts of his or her body or that of other people are sticking through the side rails or are trapped between the lying surface and the lower frame and/or floor.

### Functional description | Hand control with hook (version) 2/2



Reverse:



Hand control locked



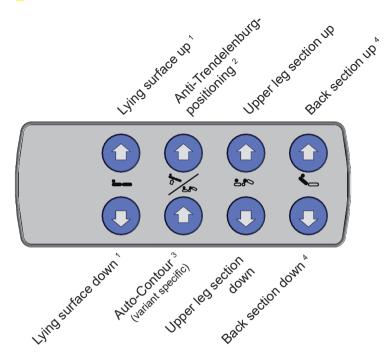
Hand control unlocked



**WARNING** When actuating motorised adjustments with the side rails raised. Ensure that the occupant does not have any contact with the side rails, and that no parts of his or her body or that of other people are sticking through the side rails or are trapped between the lying surface and the lower frame and/or floor.

- <sup>1</sup> The Völker diagnostics system (optional) allows a time between 0 and 5 seconds delay to set the back rest movement to the 30° position p. 49 (Function is variant specific).
- <sup>2</sup> Pressing the "Lying surface up" and "Lying surface down" buttons simultaneously brings the bed into the horizontal position (Function is variant specific). <sup>3</sup> Lea end lowered

### Functional description | Transverse hand control (version) 1/2



Reverse:



Hand control locked



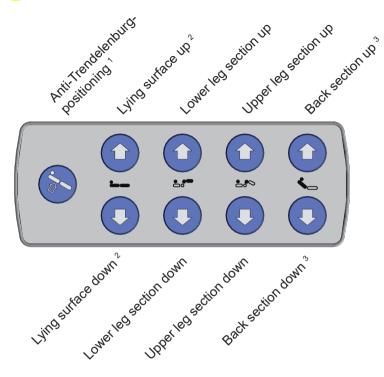
Hand control unlocked



**WARNING** When actuating motorised adjustments with the side rails raised. Ensure that the occupant does not have any contact with the side rails, and that no parts of his or her body or that of other people are sticking through the side rails or are trapped between the lying surface and the lower frame and/or floor.

- <sup>1</sup> Pressing the "Lying surface up" and "Lying surface down" buttons simultaneously brings the bed into the horizontal position (Function is variant specific).
  <sup>2</sup> Leg end lowered
- <sup>3</sup> Back and upper leg section raised simultaneously
- <sup>4</sup> The Völker diagnostics system (optional) allows a time between 0 and 5 seconds delay to set the back rest movement to the 30° position p. 49 (Function is variant specific).

### Functional description | Transverse hand control (version) 2/2



- <sup>1</sup> Leg end lowered
- <sup>2</sup> Pressing the "Lying surface up" and "Lying surface down" buttons simultaneously brings the bed into the horizontal position (Function is variant specific).
- <sup>3</sup> The Völker diagnostics system (optional) allows a time between 0 and 5 seconds delay to set the back rest movement to the 30° position p. 49 (Function is variant specific).

Reverse:



Hand control locked



Hand control unlocked



**WARNING** When actuating motorised adjustments with the side rails raised. Ensure that the occupant does not have any contact with the side rails, and that no parts of his or her body or that of other people are sticking through the side rails or are trapped between the lying surface and the lower frame and/or floor.

### Functional description | Nurse hand control / nurse keypad 1/7

**NOTE** Please note that all nurse keypads have to be switched on by pressing the "ON" button in order to operate the bed. If no electric function can be activated, press the Reset button on the motor housing.

→ S 962-2 (DA01), S 962-2W: Then press the green button on the mains isolation after 10 seconds in order to reactivate the bed.

Never press both green buttons at the same time.  $\leftarrow$ 





Reset button on the S 962-2 (DA02)



Reset button on the S 962-2 (DA01)



**NOTE** The mains voltage is connected for the duration of the active time of the nurse keypad (120 sec.), so that the LED of the mains voltage display also lights up whenever the nurse keypad is active. If the keypad switches over the inactive state, the mains power is switched off.

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WARNING When actuating motorised adjustments with the side rails raised. Ensure that the occupant does not have any contact with the side rails, and that no parts of his or her body or that of other people are sticking through the side rails or are trapped between the lying surface and the lower frame and/ or floor.

### Functional description | Nurse hand control / nurse keypad 2/7



WARNING If using a nurse hand control, it is strictly necessary to attach this so that the patient cannot reach it from the normal lying position (Völker recommends the accessories rail in the lower leg or foot section). If this is not possible, the nurse hand control must be locked when not in use and the key kept in a location inaccessible to the patient.

DANGER "Risk of entrapment between the lower frame and/or floor and the bed frame when the bed is being lowered"

It must be ensured that: no people, limbs, pets, bed linen or other objects are trapped between the bed frame and lower frame and/or floor during adjustment manoeuvres.



**CAUTION** The functions

- automatic washing system position
- manual washing
- bed preparation

are purely service functions and may only be executed if the bed is unoccupied.

### **Double-click function**

The nurse keypad can be equipped with an automatic function (doubleclick) on a country-by-country basis. Keys that can be assigned this function are marked with a double black arrow

symbol 🖲 .

With a double-click on the "Lying surface up" or "Lying surface down" button, for example, the lying surface moves to the highest or lowest position, respectively. This function can be stopped at any time by pressing any button.

The automatic function can be deactivated by pressing the "Lock automatic function" button 🙄 . If the function is locked, the LED above the button will light up red. If the double-click function is permanently locked at the factory, the LED will always light up red when the nurse keypad is switched on.

A double-click function is not possible with the nurse hand control with total lock-out (Easy-Lock).

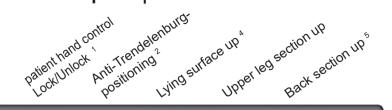


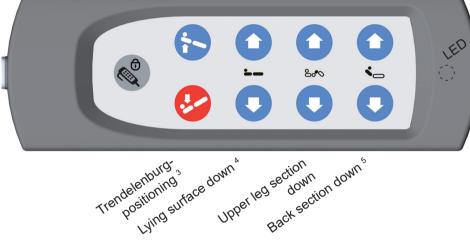
### WARNING

**"Risk of entrapment"** If the double-click function is being used, the care giver must supervise the patient until the adjustment procedure has completed.

 NOTE When the lying surface height is approached using the double-click function, a warning signal sounds, which indicates that the bed is in automatic operation.

### Functional description | Nurse hand control with total lock-out (Easy-Lock) (version) 3/7





Reverse:

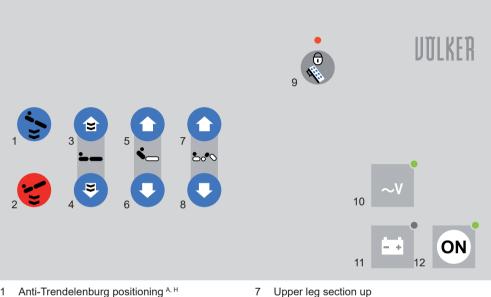
Nurse hand control locked



Nurse hand control unlocked

- <sup>1</sup> If the function is activated (a red LED lights up on the nurse hand control), all functions on the patient hand control will be locked.
- <sup>2</sup> Leg end lowered
- <sup>3</sup> Head end lowered
- <sup>4</sup> Pressing the "Lying surface up" and "Lying surface down" buttons simultaneously brings the bed into the horizontal position (Function is variant specific).
- <sup>5</sup> The Völker diagnostics system (optional) allows a time between 0 and 5 seconds delay to set the back rest movement to the 30° position p. 49 (Function is variant specific).

### Functional description | Nurse keypad with complete lock (version) 4/7



- <sup>A</sup> Lea end lowered
- <sup>B</sup> Head end lowered
- <sup>c</sup> Pressing buttons 3 and 4 simultaneously brings the bed into the horizontal position (Function is variant specific).
- <sup>D</sup> The Völker diagnostics system (optional) allows a time between 0 and 5 seconds delay to set the back rest movement to the 30° position p. 49 (Function is variant specific).
- <sup>E</sup> green: mains voltage is on
- <sup>F</sup> green: >80% charged; yellow: 30-80% charged; red: discharged; flashing: charging
- <sup>G</sup> After pressing the "on" button, the keypad is available for up to 120 seconds after the last action, then it goes into stand-by mode.
- <sup>H</sup> automatic function with double click possible on a country-by-country basis

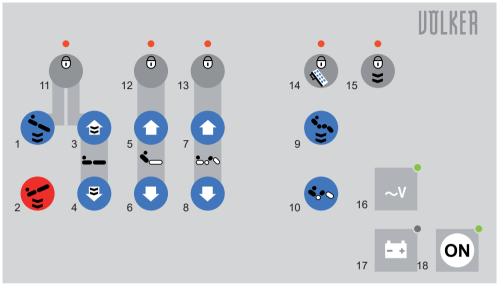
- 1
- 2 Trendelenburg positioning <sup>B, H</sup>
- Lying surface up C, H 3
- Lving surface down C, H
- Back section up<sup>D</sup> 5
- Back section down D 6

- Upper leg section down 8
- Lock hand control 9
- 10 Mains voltage display E

22

- Battery display F 11
- 12 On switch G

### Functional description | Nurse keypad with individual lock (version) 5/7

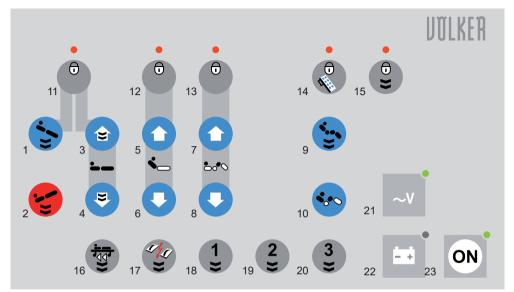


- <sup>A</sup> Leg end lowered
- <sup>B</sup> Head end lowered
- <sup>c</sup> Pressing buttons 3 and 4 simultaneously brings the bed into the horizontal position (Function is variant specific).
- <sup>D</sup> The Völker diagnostics system (optional) allows a time between 0 and 5 seconds delay to set the back rest movement to the 30° position p. 49 (Function is variant specific).
- <sup>E</sup> Back and upper leg section raised simultaneously
- F green: mains voltage is on
- <sup>G</sup> green: >80% charged; yellow: 30-80% charged; red: discharged; flashing: charging
- <sup>H</sup> After pressing the "on" button, the keypad is available for up to 120 seconds after the last action, then it goes into stand-by mode.
- automatic function with double click possible on a country-by-country basis

- 1 Anti-Trendelenburg positioning A, I
- 2 Trendelenburg positioning <sup>B, I</sup>
- 3 Lying surface up C, I
- 4 Lying surface down C, I
- 5 Back section up D
- 6 Back section down D
- 7 Upper leg section up
- 8 Upper leg section down
- 9 Cardiac chair position
- 10 Auto-Contour E

- 11 Lock lying surface lift and Anti-Trendelenburg positioning
- 12 Lock back section
- 13 Lock upper leg section
- 14 Lock hand control
- 15 Lock automatic function
- 16 Mains voltage display F
- 17 Battery display G
- 18 On switch H

### Functional description | Nurse keypad with individual lock/automatic functions (version) 6/7



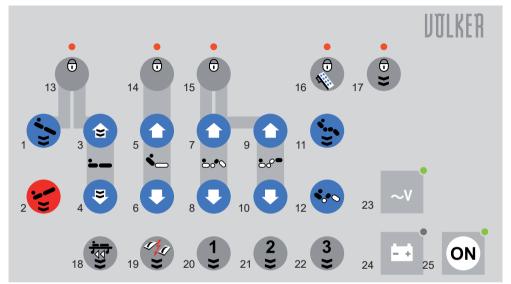
- 1 Anti-Trendelenburg positioning A, L
- 2 Trendelenburg positioning <sup>B, L</sup>
- 3 Lying surface up C, L
- 4 Lying surface down C, L
- 5 Back section up D
- 6 Back section down D
- 7 Upper leg section up
- 8 Upper leg section down
- 9 Cardiac chair position L
- 10 Auto-Contour E
- 11 Lock lying surface lift and anti-Trendelenburg positioning

- 12 Lock back section
- 13 Lock upper leg section
- 14 Lock hand control
- 15 Lock automatic function
- 16 Transport position L
- 17 Resuscitation position L
- 18 Automatic washing system position F, L
- 19 Manual washing G, L
- 20 Bed preparation H, L
- 21 Mains voltage display
- 22 Battery display J
- 23 On switch  $^{\kappa}$

24

- <sup>B</sup> Head end lowered
- <sup>C</sup> Pressing buttons 3 and 4 simultaneously brings the bed into the horizontal position (Function is variant specific).
- <sup>D</sup> The Völker diagnostics system (optional) allows a time between 0 and 5 seconds delay to set the back rest movement to the 30° position p. 49 (Function is variant specific).
- <sup>E</sup> Back and upper leg section raised simultaneously
- <sup>F</sup> Height 80 cm, Anti-Trendelenburg-positioning 5°, back section 25°
- <sup>G</sup> Height 80 cm, back and upper leg section max. engaged
- <sup>H</sup> Height 80 cm, back and upper leg section in zero position
- green: mains voltage is on
- <sup>J</sup> green: >80% charged; yellow: 30-80% charged; red: discharged; flashing: charging
- <sup>K</sup> After pressing the "on" button, the keypad is available for up to 120 seconds after the last action, then it goes into stand-by mode.
- <sup>L</sup> automatic function with double click possible on a country-by-country basis

### Description of function | Nurse keypad with individual lock/automatic/low leg section functions (version) 7/7



- 1 Anti-Trendelenburg positioning A, L
- 2 Trendelenburg positioning <sup>B, L</sup>
- 3 Lying surface up C, L
- 4 Lying surface down C, L
- 5 Back section up D
- 6 Back section down D
- 7 Upper leg section up
- 8 Upper leg section down
- 9 Lower leg section up
- 10 Lower leg section down
- 11 Cardiac chair position <sup>L</sup>
- 12 Auto-Contour E
- 13 Lock lying surface lift and Anti-Trendelenburg

positioning

- 14 Lock back section
- 15 Lock upper and lower leg sections
- 16 Lock hand control
- 17 Lock automatic function
- 18 Transport position L
- 19 Resuscitation position L
- 20 Automatic washing system position F, L
- 1 Manual washing G, L
- 22 Bed preparation H, L
- 23 Battery display
- 24 Battery display J
- 25 In switch <sup>κ</sup>

<sup>A</sup> Leg end lowered

- <sup>B</sup> Head end lowered
- <sup>C</sup> Pressing buttons 3 and 4 simultaneously brings the bed into the horizontal position (Function is variant specific).
- <sup>D</sup> The Völker diagnostics system (optional) allows a time between 0 and 5 seconds delay to set the back rest movement to the 30° position p. 49 (Function is variant specific).
- <sup>E</sup> Back and upper leg section raised simultaneously
- <sup>F</sup> Height 80 cm, Anti-Trendelenburg-positioning 5°, back section 25°
- <sup>G</sup> Height 80 cm, back and leg sections max. engaged
- <sup>H</sup> Height 80 cm, back and leg sections in zero position
- green: mains voltage is on
- J green: >80% charged; yellow: 30-80% charged; red: discharged; flashing: charging
- <sup>K</sup> After pressing the "on" button, the keypad is available for up to 120 seconds after the last action, then it goes into stand-by mode.
- <sup>L</sup> Automatic function with double click possible on a country-by-country basis

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### Functional description | Trapeze bar and accessory holders, accessory rail

Depending on the variant, a single trapeze bar holder (external) or a double trapeze bar holder (internal) is located on the head panel. Holders for drip stands/ accessories are also located on both sides next to the protective wheels at the head panel (external) as well as at the foot panel (internal).

The trapeze bar and other accessories must be slotted into the holders until they engage to be anti-twist.

Völker provides a wide selection of accessories for the greatest possible flexibility. The beds are fitted with accessory holders as standard, e.g. for drip stands and trapeze bars.

For more information regarding accessories, please refer to our current brochures or our website at www.voelker.de. Our staff will be happy to inform you of the accessories available for your model of bed.





There is an accessory rail on either side of the bed to accommodate accessories.

WARNING "Risk of injury" Ensure that the trapeze bar is completely slotted to be anti-twist into the holder and securely seated.

Note: the safe working load of the trapeze bar is max. 75 kg.

WARNING Should the bed be moved or adjusted, the infusion tubing or cables must be closely monitored by the care personnel.

Note: the safe working load of the trapeze bar is max. 75 kg.

Accessories holder ø25 mm (e.g. for drip stands, etc)

Single trapeze bar holder ø40 mm

Accessory (e.g. for urine bottle basket, universal hook, etc.)

WARNING The trapeze bars must not protrude beyond the outer bed boundary.

<u>^</u> <u>v</u>

- **WARNING** Only the trapeze bars specified in the list of accessories may be used.
- **WARNING** No potential equalisation is provided at the trapeze bar.

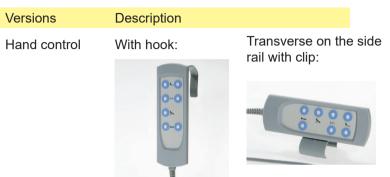


**WARNING** The trapeze bar and drip stand must never be used by the patient as an entry or egress aid (e.g. when getting out of a wheelchair).

## Functional description | Versions 1/2

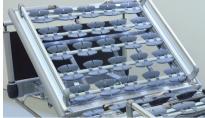
The bed can be supplied in various versions.

Hand controls and nurse hand controls / nurse controls are available with various function buttons independently of the fastening option.

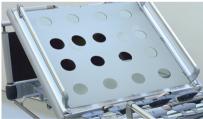


Versions	Description
MiS® lying sur- faces	Völker MiS® is a positioning system featuring different elements that main-

tain and promote the patient's spontaneous movement.



HPL lying surfaces The 4-part HPL (high pressure laminate) lying surface is composed of moisture-resistant high-pressure laminate.



The lying surfaces are easy to remove and can thus be cleaned quickly and thoroughly.

Nurse hand control / nurse keypad

Nurse hand control with total lock-out (Easy-Lock) with clip (for fastening in the accessories rail or at the foot section):

Nurse keypad in bed linen storage area:

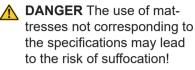


### Functional description | Versions 2/2

Versions	Description	These instructions for use cover all of the versions listed.
Trapeze bar Bed linen sto-	<ol> <li>One trapeze bar holder Ø 40 mm at the head end, external, middle or trapeze bar holders Ø 40 mm, at the head end, inside, to the side</li> <li>Two trapeze bar holders Ø 34.2 mm at the head end, internal, side</li> <li>A pull-out bed linen storage area is possible at the foot end.</li> </ol>	Precise details of the supplied bed designs can be found in the order specifications for your beds. If the original bed specification is no longer available, please contact Völker Customer Services. Please make a note of the Völker serial number (ID No.) on the type label before you call.
rage area Side rails	The bed can be equipped with various side rail versions: Back/lower leg section*:	<ul> <li><b>NOTE</b> The load of the bed- ding tray may not exceed 20 kg.</li> </ul>
	1. Can be pulled out up to 34 cm*	
	<ol> <li>Can be pulled out up to 37 cm* (not possible with MA and MB design)</li> </ol>	
	<ol> <li>Can be pulled out up from 43,5 to 45 cm* (not possible with MA and MB design)</li> </ol>	
	<ul> <li>Measured from the top edge of the side rail to the lying surface (without the mattress).</li> </ul>	
Castors	The bed has 150 mm castors in various versions.	
Bed extension	Das Bett kann mit einer teleskopierbaren Bettverlängerung ausge- stattet sein. Verlängerung nach - DIN EN 60601-2-52: ca. 28 cm	
	28	

### Functional description | Accessories 1/3

To minimise the risk of injury, use only Völker mattresses whose dimensions are matched to Völker lying surfaces.



**DANGER** Make sure that the dimension between the upper edge of the inserted mattress and the upper edge of the side rails is always greater than or equal to 220mm, see also topic 1. mattresses. The lengths and arrangements of the side rails comply with the requirements of the European standard 60601-2-52 in the current version and thus ensure that patients cannot become trapped.

Therefore, the use of side rails from other manufacturers with Völker beds is not permitted, nor is the independent modification of the attached side rails. Völker beds of the S 962 series are equipped with permanently attached, non-removable side rails which can be folded down in the standard version and pushed into the lying surface, see also page 43. These side rails can be extended in heights between 34 cm and 45 cm (dimension of upper edge of side rail to lying surface without mattress) depending on the equipment and design variant you have chosen.



The Völker bed series S 962 offers lying surfaces of different sizes, depending on the equipment and design variant you have chosen, to which the mattress size must be matched. You will find an overview of possible lying surface sizes on page 68. The correct mattress size

is usually 2 cm smaller in width, whereas it is the same in length as the lying surface size. If your lying surface size is not listed, or if you are unsure about the correct mattress size, please contact Völker. The volumetric weight of the mattress material must also correspond to the specifications on page 68.

### Functional description | Accessories 2/3

### Side rail spacers

The sidet rail spacers close the central gap between the moving split side rails on Völker beds to create acontinuous side rail solution.



The side rail spacers are inserted into the support sleeves on the upper leg section. Check whether the pendulum lock is fully engaged by attempting to pull the side rail spacers out upwards.

If this succeeds, push the side rail spacer completely down again and adjust the pendulum until the side rail spacer can no longer be pulled out.



To remove the side rail spacer from the holder, move the pendulum into a vertical position and at the same time pull the side rail spacer upwards and out.

- NOTE Please follow the detailed instructions for use of the side rail spacers.
  - WARNING Make sure that the side rails are fully raised and engaged. When operating the electric lying surface adjustment function or the side rails, ensure that the patient is not in contact with the side rails and that no body parts are protruding through the side rails. Locking the hand control unit functions is strongly recommended.

#### Accessory rails on both sides

Accessory rails are available for the bed in two different lengths.

- Length 40 cm
- Lenght 60 cm



Both rails can be individually attached to the longitudinal profiles on either side of the bed.



Hook the accessory rail into the side panel. Turn the two clamping levers inwards by 180° to lock the accessory rail in place.

### Functional description | Accessories 3/3

WARNING If the bed needs to be moved or adjusted, the infusion lines and cables must beclosely monitored by care staff.

You should also note that drainage devices could touch the floor when the bed is lowered. This also applies to the Trendelenburg and reverse Trendelenburg position.

The safe working load of each accessory rail is 20 kg.

 NOTE If the lying surface height is lowered to below 40 cm, any objects attached to the accessory rail must be removed.

### **Restraint holders**

The bed can be equipped with restraint holders. These can be attached to the side panels. The restraint holders are mounted on the side panels and have the same type of fasteners as the accessory rails, which also allows them to be attached in variable positions.



Restraint holder for side panel

#### Use of securing systems

Securing systems such as belts or straps should only be used exactly as specified by the manufacturer.

If securing systems in the form of abdominal belts are used, then it must be ensured that the side rails are completely raised. In this case, the gap in the middle of the rails must be closed using a rail spacer.

> **DANGER** When using securing systems and rail spacers, please note the separate instructions for use pertaining to these accessories. If the patient is restrained with the help of restraint holders, the lying surfaces must **never** be adjusted while the patient is restrained **and** must always be in the lowest position!

**DANGER** The lying surface adjustment functions must be locked when a patient is secured, and the hand control must be kept out of the patient's reach.

Restraints may be fastened directly onto beds built after 08/2009.

To do this, fasten the restraints on the corresponding longitudinal section of the lying surface frame. Make sure that the restraint is passed between the mattress holder and the mattress.





## Activation | General operating instructions

#### **On-time**

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The maximum On-time for the electromotive bed functions is specified on the bed (type labe) and in the technical data sheet (p.68).

*x* min/10 min. means that each electromotive adjustment may be operated for a maximum of x minutes in 10 minutes and then there must be a pause of 10 minutes (protection against overheating).

**NOTE** Should the maximum ontime of *x* minutes be exceeded repeatedly or for longer periods, safety cut-out devices on the bed may cause the electromechanical motor system to fail. The bed must not be manoeuvred using the motors until it has cooled down sufficiently! For a general Definition of duty cycle see page 68.

### **Battery pack**

The battery pack has a charge capacity when supplied that permits a theoretical constant operation of at least 10 lifting and lying surface adjustments with a working load of 250 kg.

• **NOTE** If the bed is parked at its location and the mains plug is not connected, this will cause the battery pack to discharge due to the buffering of the electronic components!

Deep-discharged battery packs can be damaged to the extent that premature replacement is needed!

To increase the service life of the battery pack, we recommend disconnecting the bed from the mains when putting it into storage (Taking out of service). You can find notes on reactivation in the "Electrical activation" chapter". Appropriate and correct use of the battery pack is essential for it to have a long service life!

In order to guarantee electrical functionality at all times, the bed should be connected to the mains as much as possible.

#### Safety cut-out device

The bed is equipped with an electrical, self-resetting safety cut-out device that prevents overloading of the motor systems. In the event of very severe overloading, the bed is automatically switched off.

### Activation | Preparation 1/2

#### Conditions for set-up

The bed is only approved for use in dry rooms (technical data sheet). A mains power supply and possibly a potential connector are required for operation of the bed in any suitable room. When this is available and the building installation permits it, the bed should always be connected to the potential equalisation. Please note that the mains socket for the bed must be freely accessible and not impeded by a piece of furniture, for example.

#### **Mechanical activation**

The supplied head and foot sections must be slotted into the corner connectors on the bed frame.

#### Hand control connection

The hand control should be connected to the socket provided, where appropriate. The spiral cable must be routed so that it is not under tension.

### → S 962-2 (DA02):

**NOTE** You must first loosen both screws in the cover in order to loosen a hand control plug on the dual drive.



Strain relief for the hand control cable in the cover

→ S 962-2 (DA01), S 962-2W: The hand control should be connected to the socket provided, where appropriate. The spiral cable must be routed so that it is not under tension.



### Activation | Preparation 2/2

The equipotential bonding connection is located in the middle of the head bar outside for beds with an external trapeze bar bracket. For beds with 2 internal trapeze bar brackets (one bracket in each inside corner of the head bar), the connection for equipotential bonding is located on the underside of the head bar. The connection is marked by a sticker.



#### **Bed transport**

The bed can be moved without auxiliary transportation devices. If necessary, release the brakes.

**CAUTION** The bed should only be moved on a solid floor. Never attempt to push it over obstacles of over 2 cm in height. The maximum angle of inclination of the floor must not exceed 10°. The bed can be transported by one person on even surfaces. If the bed has to be moved over sloping or rising surfaces, the bed may only be transported by at least two people holding the bed at the head and foot ends due to its weight and for the safety of the patient and nursing staff.



### **Activation | Electrical activation**



- **WARNING** Check the mains cable for damage. If the cable is damaged, the bed must not be used and must be taken out of service immediately!
- WARNING Please be aware that incorrect handling of the mains cable can lead to the battery pack no longer charging. Incorrect handling can include dropping the mains isolation switch, pulling the mains plug cable to release it from the socket, clipping the mains cable between the lying surface and the lying surface frame and driving over the cable when transporting the bed.

- 1. Connect the mains plug to the mains power socket.
- 2. Press the green mains isolation button for a second to establish the mains connection



3. Unlock the locking switch on the reverse of the hand control (open lock visible) in order to activate the bed's electrical functions.



**NOTE** The mains isolation ensures that the bed is only supplied with mains voltage when an electrical function is actuated or the battery is being charged.

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## Activation | Using the battery pack 1/2

The battery pack allows the bed to be operated independently of the mains supply for at least 10 adjustment cycles under full load when delivered.

The battery status can be monitored by connecting a nurse keypad with an LED for the battery display.

The light emitting diode of the battery

display on the nurse keypad shows the charge status of the battery pack after switching on the keypad:

Green	The battery pack is more than 80% charged.
Yellow	The battery pack is 30- 80% charged.
Red	DANGER ZONE. Battery pack is discharged.
flashing	The battery charger is being charged.

If the LED is red or yellow, the battery pack needs to be recharged. The battery pack is switched off shortly before deep discharging. After the bed is connected to the mains supply, press any button on the hand control to render it fully functional again. The battery pack is charged when it is connected to the mains after every use or if the charge has fallen too low.

**NOTE** If the bed is stored for a long period without being connected to the mains supply, the battery pack can discharge. The degree of discharge depends on environmental conditions.

→ S 962-2 (DA02): To increase the service life of the battery pack, we recommend disconnecting the bed from the mains when putting it into storage. For this, press the "Back section down", "Upper leg section down" and "Lying surface down" buttons simultaneously on the hand control or nurse hand control or the "Back section down", "Upper leg section down" and "ON" buttons on the nurse keypad. ← S 962-2 (DA01), S 962-2W: To increase the service life of the battery pack, we recommend that you press the Reset button on the motor housing and disconnect the bed from the mains when putting the bed into storage.

NOTE The LED of the battery

display shows the charge status of the battery pack. The mains isolation is deactivated during the load cycle and current flows to the bed, the LED of the

mains voltage display

the battery display flashes, the battery pack is charging.

**NOTE** If the red LED lights up but the bed cannot be electrically adjusted, press the mains isolation button. ←

### Activation | Using the battery pack 2/2

The bed should not be stored for a period longer than 6 months with a fully charged battery pack without recharging it.

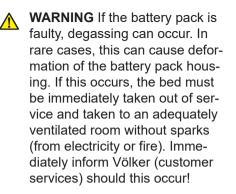
**WARNING** If electromagnetic interference occurs with other equipment in the area around the bed, please refrain from using these devices.

The bed should always be handled carefully during transport and protected from damp.

 **NOTE** The bed is designed for use in an ambient temperature range from 10 °C to 40 °C, with a relative humidity of 30% to 75% and an air pressure of 700 to 1060 hPa as well as an operating height of maximum 3000 m.



**WARNING** The battery pack must only be replaced by personnel trained by Völker GmbH.



WARNING The battery pack must be disposed of in an environmentally responsible manner using the appropriate services. You can also send it back to Völker GmbH.

To activate the hand control and the nurse hand control / nurse keypad once the bed has been activated, the function key lock must be disabled, if applicable.

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### Activation | Taking out of service

#### Taking out of service

→ S 962-2 (DA02): If the bed is to be taken out of service for a longer period of time, pull out the mains plug and press the "Back section down", "Upper leg section down" and "Lying surface down" buttons simultaneously on the hand control or nurse hand control or the "Back section down", "Upper leg section down" and "ON" buttons on the nurse keypad in order to disconnect the bed from its power supply.

Before repair work, you must also press the "Back section down", "Upper leg section down" and "Lying surface down" buttons simultaneously on the hand control or nurse hand control or keep the "Back section down", "Upper leg section down" and "ON" buttons on the nurse keypad pressed simultaneously. €

→ S 962-2 (DA01), S 962-2W: If the bed is to be taken out of service for a longer period of time, press the Reset button on the motor housing to discon-

nect the bed from its power supply.

The mains plug must also be pulled out and the Reset button pressed before repair work. ←

### **Activation | Functional check**

#### **Visual inspection**

Before each new occupancy of the bed, the following checks must be carried out:

- 1. Ensure the bed exhibits no visible signs of damage.
- 2. Ensure that the insulation of the electrical cables is intact.
- 3. Ensure that the next testing date has not been missed (see testing label).
- 4. Check the mains cable for damage at regular intervals.



**WARNING** Only undamaged beds that are still within their testing interval periods may be used!

#### **Functional check**

A functional check must be carried out before each new occupancy:

- 1. All electrical functions must be actuated to their terminal positions once.
- 2. The braking function of the bed must be checked.

Once a fault-free functional check has been carried out, the bed is ready for use.

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## **Operation | Key lock**

Activating the key lock of the nurse control element disables its functions completely.

The hand control can be locked either on the hand control itself or on the nurse control element.

The locking switch is located on the reverse of the hand control as well as the nurse hand control with complete lock (Easy-Lock). It is unlocked and locked with the key (open lock visible). The patient hand control can also be locked

via the "lock hand control"

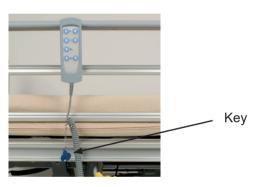
🔹 on the

nurse hand control or



nurse keypad. This lock only affects the patient hand control and can be recognised by the red LED on the nurse control element. The nurse keypad must be switched on by pressing the on switch to operate the bed. It goes into stand-by mode 120 seconds after the last activation.

If the bed functions cannot be actuated, check whether the key lock is activated.



The key should be removed from the bed when it is not required.



Hand control or nurse hand control locked

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Hand control or nurse hand control unlocked

### **Operation | Central castor adjustment**

To brake the bed, step on the **red spot** on the double foot pedal. As soon as the double foot pedal is engaged in a  $30^{\circ}$  position, the bed is braked.

To move the bed into the desired position, move the double foot pedal into a horizontal position.

To angle the steering castor in the direction of travel, step on the **green spot** on the double foot pedal. As soon as the double foot pedal is engaged in a 30° position, the steering castor is fixed and the bed can be controlled safely.

To move the bed, the roller fixing must be released by operating the dual foot pedal.



### CAUTION "Risk of accident"

If the bed is not being transported, the castors must always be in the braked position, since the bed may be required as a support for when the patient stands up or lies down. If the bed rolls away while unbraked, this can lead to a serious fall. After activating the central holding brake, it must be checked that the bed is actually fixed, i.e. the castors are adequately braked.

The bed can be in a non-fullybraked status even after first activation or reactivation, and consequently it must be checked that the castors are correctly braked.



Bed braked

Everything free



Moving position (castors engaged)

### **Operation | Side rails | General safety notes**



**WARNING** All people whose duties involve manoeuvring of the side rails must have read and understood the following information:

- During actuation of the back, upper leg or lower leg section adjustment, of the lift or of the side rails, it must always be ensured that the patient is not touching the side rails, and that no part of their body is sticking out through the side rails.
- If the side rails are used for an individual whose psychological condition necessitates their use, it must be ensured that the hand control is stored completely out of their reach or its functions are completely locked. In all cases, care must be taken to ensure that entrapment risks are minimized.

- Protective covers (cot side pads) are available as an accessory for the side rails. These provide additional protection against injury from contact with the side rails. The use of these protective covers is recommended for all persons for whom the risk of injury from unavoidable contact with the side rails is very high. Even with the covers, the care staff or patient must still take the necessary care when operating the bed.
- If the side rails are used, they must always be either completely raised and securely engaged, or completely lowered to the end stop. Because of the risk of entrapment, they must **never** be left in a position where they are not completely engaged.

- If the side rails are damaged, there is a risk that the patient will fall out of bed.
- The legal admissibility of using the side rails must be ensured.
- The side rails must only be operated by trained care staff.
- Ensure that no body parts are protruding through the side rails when the electrical lying surface adjustment function is activated.
- Ensure that the side rails (or parts thereof) are either fully raised and locked or fully lowered.

All types of Völker side rails can only be replaced with tools.Only Völker GmbH approved side rails may be used for the bed



**DANGER** Failure on the part of care staff to observe the above safety measures may result in injury.

### Operation | Side rails | 1/2

#### Raising the side rails

- 1. Pull the side rail element out horizontally until the end stop, and fold it upwards.
- 2. To adjust the height of the side rail, pull the telescopic section upwards until it reaches its end stop.

### Lowering the side rails

 Press both buttons on the outside of the frame, right under the crossmember, to bring the height-adjustable rail element to its lowest position.



2. Press the "Drücken / Press" trigger at the lower edge of the side rail element and tilt it sideways into the horizontal plane, so that it lies parallel to the floor.



3. Push the rail element completely underneath the lying surface.



The side rail elements can be used individually or together as required to protect the patient.

Raising all four rail elements offers the patient maximum protection.

- NOTE The side rails should always be gripped with two hands at the ends of the element in question and guided upwards or downwards.
  - CAUTION Any weight on side rail elements that are pulled out horizontally must not exceed 15 kg!
  - **NOTE** Due to their exceptional stability, the side rail elements can also be used as a surface for storing bed linen (max. 15 kg) or as an additional supporting surface for care-related positions, such as Bobath treatments, or for the delivery of physiotherapyrelated treatments.

## Operation | Side rails 2/2 | Fixed split side rails

### A. Raising the side rail

1. With one hand on either end of the handrail, pull the side rail upwards until it locks into place in the middl position.



2. Then pull the handrail all the way up until it engagesto extend the side rail to its full height.



### B. Lowering the side rail

1. To lower the side rail, hold the andrail by the end caps and raise it slightly to release the upper catches. At the same time, push the two front locking knobs in and slide the upper section back down into the middle position.



2. To lower the side rail further, raise the side rail slightly using the longitudinal profiles to release the lower catch. At the same time, push the two outer locking knobs in and slide the middle section down into the lowest position.



**NOTE** The side rails must always be handled and moved up or down by placing two hands at the ends of the respective element.

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the upper edge of the mattress. If the side rail is only extended as far as the middle position, the side rail is not performing its protective function! 44

WARNING Fixed split side rails

in order to ensure the required

must be extended to their full height

minimum height of 220 mm above

### **Operation | Back section**

The back lying surface can be adjusted using the nurse control element.

If necessary, disable the hand control lock or nurse control element lock.

The back section of the lying surface can be raised up to an angle of max. 70°.



**WARNING** When the back section is being raised with the side rails up, it must be ensured that none of the patient's or any other person's body parts are sticking out through the side rails or are on top of them!



Back section up/down

Hand control



Back section up/down



Nurse hand control

**NOTE** The Völker diagnostics system (optional) allows a time between 0 and 5 seconds delay to set the back rest movement to the 30° position If this function is installed, the back section automatically stops in the 30° position during the adjustment procedure. Now stop pressing the button if you desire this position or keep the button pressed so that the back section continues moving after the end of the delay time.

### **Operation | Upper leg section**

The upper leg lying surface can be adjusted using the nurse control element.

If necessary, disable the hand control lock or nurse control element lock.

The upper leg section of the lying surface can be raised up to an angle of max.  $45^{\circ}$ .



**WARNING** When the upper leg section is being raised with the side rails up. Ensure that none of the patient's or any other person's body parts are sticking out through the side rails or are on top of them!

Note that the lower leg section can also be adjusted (see also next page).

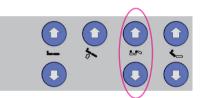


#### WARNING "Risk of entrap-

**ment"** When the position of the upper leg section is being adjusted, there is a risk of entrapment between the raised side rail and the foot section.



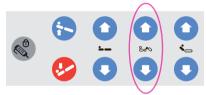
Upper leg section up/down



Hand control



Upper leg section up/down



Nurse hand control

### **Operation | Lower leg section**

The lower leg section can be moved manually to any position of maximum 16° by pulling on the mattress holder.

To lower the lower leg section, press down on the mattress holder.

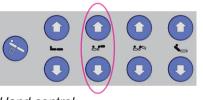
In the case of beds with a lying surface length of at least 2.10 m, it is possible to adjust the lower leg section using the hand control or nurse keypad (variant specific).

If necessary, disable the keypad lock.

WARNING When the lower leg section is being raised with the side rails up. Ensure that none of the patient's or any other person's body parts are sticking out through the side rails or are on top of them!



Lower leg section up/down



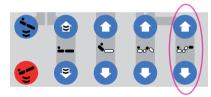
Hand control

#### Version:

Hand control or nurse keypad for the adjustment of the lower leg section (only possible for beds with lying surface length of at least 2.10m):



Lower leg section up/down



Nurse keypad

### **Operation | Lying surface height**

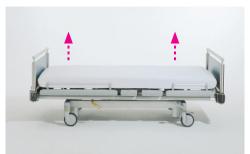
The entire lying surface can be adjusted using the nurse control element.

If necessary, disable the hand control lock or nurse control element lock.

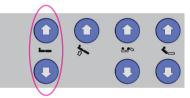
The lying surface height can be adjusted from approx. 40 cm to 80 cm.

**WARNING** To avoid danger to the patient from falling, we recommend that the bed be lowered all the way except when delivering care.

**DANGER** Before lowering the bed, it must be ensured that no people, limbs, pets, bed linen or other objects are trapped between the lying surface and the lower frame or floor. The bed's position must be stable (castors braked) when the patient is getting in and out of the bed!



Lying surface up/down



Hand control

WARNING When the height adjustment mechanism is actuated with the side rails up, it must be ensured that the patient does not have any contact with the side rails and that no parts of either the patient's body or those of other persons are sticking through the side rails!



Lying surface up/down



Nurse hand control

### Operation | Mechanical rapid lowering of the back section / CPR function is an emergency position

The bed is fitted with a mechanical rapid lowering function of the back section for resuscitation.



**WARNING** The CPR function (cardiopulmonary resuscitation function) must only be used in emergencies and by trained, qualified staff!

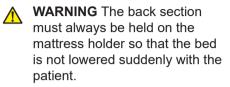


**WARNING** The CPR function must not be used instead of the hand control unit to lower the back section!

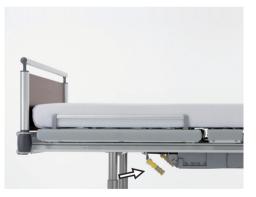


**WARNING** It is essential to hold the back section firmly by the mattress holder to avoid sudden lowering with the patient!

Hold the back section on the mattress holder and pull the yellow lever located at the left or right underneath the back section upwards to lower the back section rapidly. The back section can now be moved quickly downwards. The lowering process can be interrupted by letting go of the yellow lever.



Yellow lever for mechanical rapid lowering of the back section for resuscitation:



### **Operation | Anti-Trendelenburg<sup>1</sup> and Trendelenburg positioning<sup>2</sup>**

Trendelenburg positioning can only be set using the nurse control element.

If necessary, disable the hand control lock or nurse control element lock.

The Trendelenburg position can be adjusted up to an angle of 12°.



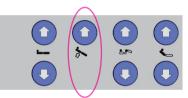
**CAUTION** If a fault occurs with the lifting function, or the mains power supply fails and the battery pack is completely discharged, the Trendelenburg function cannot be engaged. The occupant/ patient may have to be placed in a different bed.



**WARNING** Since the Trendelenburg position depends on clinical indications, it must only be used with appropriate clinical approval. The Trendelenburg position is a shock position and should only be used in an emergency



Anti-Trendelenburg positioning <sup>1</sup>



#### Hand control

The lying surface is automatically returned to the horizontal position if it is moved to its highest or lowest position. Depending on the variant, the lying surface can be moved into the horizontal position by pressing both buttons for the lying surface adjustment simultaneously.



Anti-Trendelenburg positioning <sup>1</sup> Trendelenburg positioning <sup>2</sup>



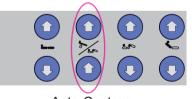
Nurse hand control

<sup>1</sup>Leg end lowered <sup>2</sup>Head end lowered

### **Operation | Comfort seating position**



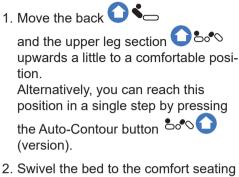
Patients who are unable to leave the bed either because their circulatory system is too unstable or they first have to be "taught" how to sit can gain a lot of benefit from the comfort seating positionas it provides an active sitting position in the bed. Anti-Trendelenburg positioning



Auto-Contour

Hand control with anti-Trendelenburg positioning and Auto-Contour (version)

### Adjusting the comfort seating position



 Swivel the bed to the comfort seating position by pressing the Anti-Trendelenburg button .

#### Restoring the straight lying surface

To return to a horizontal lying position, move the lying surface and the back and upper leg section boot in any preferred order to their lowest position.

### **Operation | Bed extension (version)**

The bed can be fitted with a telescopic bed extension.

Extension according to

- DIN EN 60601-2-52: approx. 28 cm.

To pull out the bed extension, press the two lever buttons simultaneously downwards.



### Cleaning and disinfection 1/3

To maintain the bed's functionality, it should be cleaned, disinfected and tested

- at regular intervals
- · as required
- · after every change of patient
- in accordance with the guidelines of the respective hygiene schedule

so that it can be used again immediately and without risk. Hazards may arise due to improper cleaning/disinfection of the bed. The degree of disinfection must be determined by the user!

As a general rule, only state-of-the-art disinfectants should be used.

The current healthcare standard can be found, for example, in the VAH List [from the German Association of Applied Hygiene], RKI [Robert Koch Institute] guidelines or also in the IHO List [from the German Industrial Association for Hygiene and Surface Protection]. Unless any specific ingredients which may NOT be used are given in the respective instructions for use, the disinfectants listed there may be used. The disinfectants themselves should be used in accordance with the disinfectant manufacturer's instructions.

Therefore it is worth checking in-house hygiene protocols.

Due to the large number of available products, Völker GmbH cannot approve specific products and list them in the instructions for use.

Please observe the information provided by the cleaning product manufacturer.

Not following these instructions may lead to personal injury and material damage.

#### 

**"Danger of electric shock/fire and loss of function**" The bed must always be disconnected from the power supply before being cleaned and disinfected.

### Cleaning

Depending on the degree of soiling, we recommend cleaning the bed with a damp cloth or similar. For stubborn dirt or stains, a <u>soft</u> brush may also be used. Do not moisten the bed too much when cleaning.

#### **Disinfection by wiping**

The dilution ratio recommended in the relevant instructions for use by the cleaning product manufacturers must be used.

**NOTE** Solvents are not permitted.

- Abrasives, scouring pads or other scouring agents must **not** be used.
- Chlorine, formaldehyde, phenol-based products and other solvents (toluene, xylene or acetone) are **not** allowed.

The following information regarding cleaning products and disinfectants must be observed:

- the solutions for use must as a rule be freshly prepared.
- the concentrations quoted should be neither exceeded nor undershot. the so-called "shot" method must not

### **Cleaning and disinfection 2/3**

be used under any circumstances. Under no circumstances may users add cleaning products such as soap or surfactants at their own discretion (protein-related faults).

- with spray disinfectants containing alcohol, there is the danger of explosion and fire when used over a large surface.
- cleaning products must not contain corrosive or caustic ingredients.
- they must not contain any substances that will change the surface structure or the gripping properties of materials.
- lubricants must not be affected.
- the pH of the water must not be higher or lower than 6-8.
- the water must not exceed a total water hardness of 0.9 mmol/l (corresponding to 5 °dH).

The information provided by us does not exempt users from conducting their own investigations and tests, since the conditions (e.g. water hardness) can be different locally. No legally binding assurance of certain properties can be deduced from this information.

Cable plugs and the sockets of the control box, distributor box and battery are protected against splashes only when connected and when protected by the covers and blind plugs provided.

- Avoid the ingress of water and cleaning agents into unused connections.
- Labels and markings must not be cleaned with a brush or with high pressure.
- Dry the bed with special care and test it before re-use.
- Stubborn dirt or stains should be soaked before cleaning (please test first).

#### Spray lances and washing systems\*

**WARNING** Cleaning and disinfection using spray lances from high-pressure cleaning equipment is **not** permissible.

\*Please refer to the information on the type label to ascertain whether your bed is suitable for the washing system.

Völker GmbH accepts no liability for damage sustained to the surface coating through the use of unsuitable detergents and disinfectants, incorrect mixing ratios or insufficient care of the beds.

#### Preparation for manual washing

To put the bed in the best position for manual washing, move

- the back section to the highest position
- · the leg sections to the highest position

○ ... and ○ ... ...

(in the case of beds without a function button for the lower leg section adjustment, the lower leg section must be raised manually).

or:

press the manual washing button (only for nurse keypads with automatic function)

### Cleaning and disinfection 3/3

# Preparing the bed for the automatic washing system

Bed washing systems are only permissible for the model S 962-2W, **not** for the S 962-2.

Check that:

- the bed exhibits no visible signs of damage
- the insulation of the electrical cables is intact
- all electrical functions can be actuated to their terminal positions

Once these conditions have been met, carry out the following steps:

- Bring the lower leg section of the bed to a horizontal position, manually if necessary,
- Put up the side rails,Press the automatic



washing system button (Lying surface moves into 5° Anti-Trendelenburg position and back section moves into 25° position). Observe the following specifications for machine decontamination:

• The requirements according to DIN EN 60601-2-52

2 minutes washing with 70 °C 20 seconds rinsing with 80 °C 10 minutes cooling at 20 °C

- the spray pressure at the outlet nozzle does not exceed 6 bar
- Specifications for surface disinfection by the Robert-Koch Institute in the current edition are to be regarded as a guideline
- A washing procedure in 6 days is regarded as a normal load.

There are requirements on the quality of the water and the chemical used, as described above. Allow the bed to stand in the automatic washing system position for a short time after the washing process, so that the water can drip off, and then check that all the bed functions are working correctly.



**CAUTION** The functions

- automatic washing system position 1
- manual washing
- bed preparation

are purely service functions and may only be executed if the bed is unoccupied.

 NOTE After about 20 washing procedures the 4 lifting columns should be sprayed with Teflon. This should be done earlier if any squeaking noises occur.



**WARNING** Only undamaged beds that are still within their testing interval periods may be used!

### Maintenance | Staff training, safety notes 1/2

#### Staff training

Every person involved with maintenance or servicing must at least have read the safety notes for the respective bed model and be qualified in accordance with the relevant national regulations. The following applies for Germany: the staff requirements defined by the regulations governing the installation, operation, use and maintenance of medical devices must be ensured by the operator of the beds.

To guarantee a trouble-free operation of the beds, the instructions for use of the bed must always be accessible to the servicing staff.

#### Safety notes

During maintenance and technical checks, the following specifications must be strictly observed:

- The room's electrical installations must satisfy current technical requirements and the bed must be used accordingly.
- The castors must be placed in the "brake position".
- The beds are not protected against explosion and must therefore only be maintained in an environment free from flammable substances and materials.

**WARNING** Before carrying out repair work, always pull out the mains plug **and** ...

→ S 962-2 (DA02): ...disconnect the bed from the battery pack by pressing the "Back section down", "Upper leg section down" and "Lying surface down" buttons simultaneously on the hand control or nurse hand control or the "Back section down", "Upper leg section down" and "ON" buttons on the nurse keypad! ←

→ S 962-2 (DA01), S 962-2W: ...disconnect the bed from the power supply by pressing the Reset button  $\leftarrow$ 

WARNING Maintenance and repair work should only be carried out after the bed has been disinfected.

### Maintenance | Safety notes 2/2



**WARNING** Maintenance and repair work should only be carried out on an unoccupied bed. The patient may also have to be transferred to another bed before the work.

WARNING After maintenance (repair) work is completed, always check that the bed is functioning correctly. It must be checked that the bed can be used correctly without risk to the patient or care personnel.



S 962-2 (DA01), S 962-2W:
WARNING When working on the open motor, it must be ensured that there is no contact with the power supply board for at least 20 minutes after disconnecting it from the power supply and the battery. The reason for this is to allow self-discharge of the smoothing capacitor, which would represent a risk to persons. €

S 962-2 (DA01), S 962-2W: WARNING When connecting a motor to the extension board, it must be noted that only one motor may be connected. ←

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### Maintenance | Maintenance schedule

The bed requires little maintenance. All movable parts for the height adjustment mechanism, the lying surface motor systems and the side rails are provided with long-lasting lubricant at the factory. It is recommended that the bed is subjected to a regular, or at least once a year, **technical check incl. visual inspection and functional check) as described in the checklist**. Any damage that is determined must be remedied immediately.

After every lengthy period of non-use, a visual and functional check must be carried out.

The section entitled **Technical check** contains all the information needed to carry out the technical check in accordance with MPBetreibV, DGUV V3, UVV on care beds and measurement as per DIN EN 62353. Other (e.g. country-specific) specifications have not been included here. This does not absolve the operator from the obligation to observe any such specifications.

Period	Work to be carried out
Annually	Technical check, p. 59 f.
After lengthy periods of non-use	Visual and functional check, p. 39
As required	Lubricate mechanical parts Replace the battery pack in case of defect Replace parts subject to wear in case of defect • Wings (if fitted) • Spring elements (if fitted)

### Technical check 1/2

#### 1. Visual inspection

Check the frame parts for plastic deformations and/or wear and tear. This includes the lower frame, the lifting mechanism, all parts of the lying surface (back, seat, upper leg and lower leg sections, wing and spring elements (if present)), trapeze bar, trapeze bar holder and castors. Likewise, both timing belts should be serviced annually.

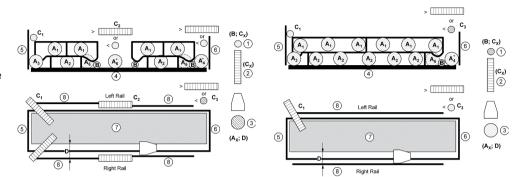
#### 2. Functional check of the side rails

The side rails must be inspected for trapping and pinching points in accordance with DIN EN 60601-2-52.

# Inspection in accordance with DIN EN 60601-2-52

Check that the locking mechanism for the side rails is working correctly and that there are no visible deformations or signs of wear and tear on the side rails.

Check that the prescribed distances are maintained, even when the side rails areplaced under load. favourable conditions.



Letter	Description	Dimension
A <sub>x</sub>	The distance between elements within the scope of the SIDE RAIL in its raised/engaged position or of the area formed by the SIDE RAILS and the fixed parts of the BED or ACCESSORIES.	< 120 mm
В	Not applicable!	-
C <sub>1</sub>	Distance between HEAD BOARD and SIDE RAIL	< 60 mm
C <sub>2,3</sub>	Distance between divided SIDE RAIL and distance between SIDE RAIL and FOOT BOARD	< 60 mm or > 318 mm
D	Area between SIDE RAIL and MATTRESS	120 mm cone may sink max. 60 mm under the mattress surface without pressure
G	Height of the upper edge of the SIDE RAILS over the mattress over at least 1/2 of the length of the LYING SURFACE	≥ 220 mm

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### Technical check 2/2

#### 3. Functional check of the brakes

Check that the brake is functioning correctly (brake, steer, free running).

#### 4. Functional check of the motors

Travel through the full adjustment range of each motor. Look out for any unusual noises, watch the speed, ease of running etc., and check that the selected function travels in the correct direction. Particularly ensure that the motor switches off automatically when it reaches its terminal position\*.

#### 5. Mains connection cable

Check

- the mains connection cable, incl. cable guides,
- the strain relief, including kink protection sleeve,
- the mains connection plug
- · the cable hooks

#### for damage.

\* Please note that the terminal position can vary from bed model to bed model. Please consult the technical specifications for this, or if in doubt, contact our service department.

### 6. Cabling

Check the cable guides and that the plug connectors are correctly seated and do not exhibit any damage.Check the cables for damage.

#### 7. Housing

Check all housings for damage. All screws must be firmly tightened and seals must not exhibit any visible damage.

#### 8. Mechanical check

Check the function of the Hydrolift by manually moving the lower leg section to the individual positions (if there is no electric adjustment available).

#### 9. Measuring in accordance with DIN EN 62353

The bed must be checked electrically in accordance with DIN EN 62353.The leakage current should be measured via an alternative measurement. The maximum measured value must be less than or equal to 500  $\mu$ A. Note that the green mains isolation button must be pressed during the entire measurement. On beds with a potential equalisation connection (see sketch below), the impedance of the potential equalisation within the bed must <u>also</u> be measured. The impedance must be less than 0.2  $\Omega$ (I=5...25 A, R=U/I < 0.2  $\Omega$ ).

### 10. Grab handle

Check whether the plastic and holding frame of the grab handle exhibit any damage and that the fixing rods on the trapeze bar are intact. The handle of the trapeze bar and the fastening strap, must be replaced in the following cycle:

- Every 5 years: handles and handles with roll function in nursing homes
- Every 3 years: handles with roll function in hospitals
- Every 2 years: Grab handle and grab handle with roll function in automatic bed washing systems (only possible with S 962-2W model).

#### 11. Further accessories

Further accessories must always be checked in accordance with the manufacturer's instructions.

### Troubleshooting | Table of faults 1/5

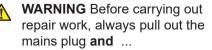
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The following table contains information on possible functional problems that the users can resolve themselves.

Anyone responsible for carrying out maintenance and servicing must at least have read the safety notes for the respective bed model and be qualified in accordance with the relevant national regulations. The following applies for Germany: the staff requirements defined by the regulations governing the installation, operation, use and maintenance of medical devices must be ensured by the operator of the beds.

To guarantee a trouble-free operation of the beds, the instructions for use of the bed must always be accessible to the servicing staff. **NOTE** Before carrying out any troubleshooting, check that the bed is connected to the power supply (the mains plug is in a live socket). Continue by pressing the nurse keypad, and check whether the battery pack is charged (observe LED of the battery display on the nurse keypad).

If the same fault occurs repeatedly, the error memory should be read out by the optional Völker Diagnostic System (VDS) before resetting again. When doing this, the bed must always be connected to the power supply. Also follow the instructions for use of the VDS.



→ S 962-2 (DA02): ...disconnect the bed from the battery pack by pressing the "Back section down", "Upper leg section down" and "Lying surface down" buttons simultaneously on the hand control or the nurse hand control or the "Back section down", "Upper leg section down" and "ON" buttons on the nurse keypad! ←

→ S 962-2 (DA01), S 962-2W: ...disconnect the bed from the power supply by pressing the Reset button!  $\leftarrow$ 

## Troubleshooting | Table of faults 2/5

Fault	Possible cause	Troubleshooting	
Adjustment of the back,	(1) Hand control locked.	(1) Unlock hand control	
upper leg or lower leg section (electronically adjustable) not	(2) Nurse hand control / nurse keypad	(2) Unlock nurse hand control / nurse keypad.	
functioning.	locked.	(3) Connect the plug or check the socket. Now	
	(3) The mains plug is not plugged in or there is no power to the socket and battery pack is discharged.	press green mains isolation button, → S 962-2 (DA01), S 962-2W:and then activate any hand control function ←	
	(4) Bed taken out of service.	<ul> <li>(4) Press green mains isolation button</li> <li>→ S 962-2 (DA01), S 962-2W:and then activate any hand control function. </li> </ul>	
	(5) Fault or communication error in the electronics.	<ul> <li>(5) Press Reset button on the motor housing.</li> <li>→ S 962-2 (DA02):and then activate any hand control function. </li> </ul>	

<sup>CP</sup> Continued on next page.

## Troubleshooting | Table of faults 3/5

Fault	Possible cause	Troubleshooting	
Adjustment of the back, upper leg or lower leg section (electronically adjustable) not functioning.	<ul><li>(6) Hand control faulty.</li><li>(7) Nurse hand control / nurse keypad</li></ul>	<ul> <li>→ S 962-2 (DA01), S 962-2W: and after about 10 seconds press the green button of the mains isolation, and then activate any hand control function. Never press both green buttons at the same time! </li> <li>(6) Replace hand control.</li> <li>(7) Replace nurse hand control / nurse keypad.</li> </ul>	
	faulty.		
Adjustment of back section not functioning.	(1) CPR lever blocked.	(1) Check CPR lever for blockage and remedy, if necessary.	
Adjustment of the mechanically adjustable lower leg section not functioning.	(1) Lower leg section must be adjusted manually.	(1) Adjust lower leg section manually.	
The bed cannot be adjusted	(1) Hand control locked.	(1) Unlock hand control.	
in height.	(2) Nurse hand control / nurse keypad locked.	(2) Unlock nurse hand control / nurse keypad.	

<sup>CP</sup> Continued on next page.

## Troubleshooting | Table of faults 4/5

Fault	Possible cause	Troubleshooting
The bed cannot be adjusted in height.	(1) The mains plug is not plugged in or there is no power to the socket and battery pack is discharged.	<ul> <li>(1) Connect the plug or check the socket. Now press green mains isolation button,</li> <li>→ S 962-2 (DA01), S 962-2W:and then activate any hand control function </li> </ul>
	(2) Bed taken out of service.	Press green mains isolation button. → S 962-2 (DA01), S 962-2W:and then activate any hand control function. ←
	(3) Fault or communication error in the electronics.	<ul> <li>Press Reset button p. 45 on the motor housing.</li> <li>→ S 962-2 (DA02):and then activate any hand control function. </li> <li>→ S 962-2 (DA01), S 962-2W: and after about 10 seconds press the green button of the mains isolation, and then activate any hand control function.</li> <li>Never press both green buttons at the same time! </li> </ul>
	(4) Hand control faulty.	(2) Replace hand control.

<sup>CP</sup> Continued on next page.

# Troubleshooting | Table of faults 5/5

Fault	Possible cause	Troubleshooting	
The bed cannot be adjusted in height.	(5) Nurse hand control / nurse keypad faulty.	(5) Replace nurse hand control / nurse keypad.	
→ S 962-2 (DA02): Height adjustment upwards occurs	(1) Lying surface has not been adjusted in respect to height for a long time.	<ol> <li>Adjust laying surface several times in respect to height.</li> </ol>	
in oscillation mode (reciprocal height adjustment).	(2) Bed is overloaded.	(2) Ensure safe working load. If necessary, transfer less weight onto the bed.	
<ul> <li>NOTE The bed has an oscillation mode as a protective function, this serving quality improvement in the sense of availability.</li> <li>Please first contact our Service department if the oscillation occurs continuously.</li> </ul>			

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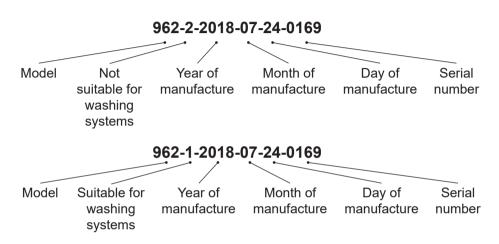
### Appendix | Type labels

The type plates are located on the inside of the head panel.



Raise the back section to read the type plates. See below for the symbols used.

Each bed can be clearly identified from the unique ID number on its type plate. The structure of this ID number is as follows:

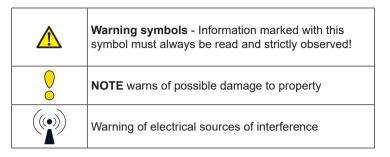


## Appendix | Symbols used

Symbols used on the type labels

	Manufacturer
REF	Model name
SN	Serial number
MD	Medical Device
	Max. permissible weight of the patient 185 kg (in application environments 1 and 2)
_ <u> </u>	Safe working load 250 kg
CE	The product meets the essential requirements of Annex 1 of EU-Regulation 2017/745.
×	Type B-application part as per DIN EN 60601-1
	Protection class II device, protection-insulated
8	Note the information in the instructions for use!
X	The product must be disposed of in accordance with EU Directive 2002/96 EC pertaining to old electrical and electronic equipment
	TÜV SÜD certified (Technical Inspection Authority SOUTH)

#### Warning and information signs in the text



#### Stickers

	Mass of the mobile medical device inc. safe working load
* 146 cm EMI 2 17	Description of an adult: Weight: min. 40 kg Height: min. 146 cm BMI: min. 17
	Bitte die Hinweise und Gebrauchsanweisungen für die Matratzen beachten
	Warning of crushing and clamping hazard!

### Appendix | Technical data (standard design) 1/2

The details marked below with \* are dependent on the length, width or model of the bed. The values specified relate to model S 962-2 in design variant S.

External dimensions (W x L)	
for lying surface 90 x 190 cm * for lying surface 90 x 200 cm * for lying surface 90 x 210 cm * for lying surface 90 x 220 cm * for lying surface 100 x 200 cm * for lying surface 100 x 210 cm * for lying surface 100 x 220 cm *	approx. 99 x 210 cm approx. 99 x 220 cm approx. 99 x 230 cm approx. 99 x 240 cm approx. 109 x 220 cm approx. 109 x 230 cm approx. 109 x 240 cm
for lying surface 110 x 200 cm * Clearance height	approx. 119 x 220 cm approx. 18.5 cm
Height of the lower edge of ly- ing surface frame (min./max.)*	approx. 28 cm / 68 cm
Height of the upper edge of the lying surface (min./max) *	approx. 40 cm / 80 cm
Height of upper edge of head and foot section (min./max.) *	approx. 78 cm / 118 cm
Height centre of wall spacing roll	approx. 35 cm / 75 cm
Lying surface (4-part) *	approx. 90 x 190/200/210/220 cm approx. 100 x 200/210/220 cm approx. 110 x 200 cm

Volumetric weight of the mattress material	40 - 50 kg/m	3
Unladen weight S 962-2 (DA02) * S 962-2 (DA01) * S 962-2W *	approx. 143 kg approx. 150 kg approx. 164 kg	
Safe working load for the bed	250 kg	
Max. patient weight, p. 8	in applica- tion envi-in application environmentronment3, 5	
S 962-2, S 962-2W	<u>1, 2</u>	215 kg
	185 kg	
Safe working load for the tra- peze bar holder	75 kg	
Safe working load for drip stands	2 kg / hook	
Castors	4 pcs, Ø 150 mm	
Max. castor load steel castors: S 962-2	100 kg (dynamic)	
Max. castor load integrated castors: S 962-2, S 962-2W	150 kg (dynamic)	

## Appendix | Technical data (standard design) 2/2

Energy supply fuse	slow-acting, 375 mA Type: Miniature fuse,	Operating height	Maximum 3000 m
	slow acting 375 mA		
Hand control fuse	(EU-, UK-, US version) Type: Miniature fuse,	S 962-2 (DA02) S 962-2 (DA01) S 962-W	52 dB(A) 52 dB(A) 45 dB(A)
Overload protection	6,3 A (US version) Thermal switch 100 °C	Atmosphere range Operating volume	700 hPa to 1060 hPa
5 902-2 (DAUT), 5 902-2W.	3,15 A (EU version) 5,0 A (UK version)	Air humidity	30 % to 75 % rel.
S 962-2 (DA01), S 962-2W:	3,15 A (US version)	Transport / storage temperature range	- 20 °C to + 60 °C
S 962-2 (DA02):	1,6 A (EU-, UK version)	Operating temperature range	+ 10 °C to + 40 °C
S 962-2 (DA02): S 962-2 (DA01), S 962-2W: Primary fuse	50 Hz / 60 Hz 50 Hz (EU-, UK version) 60 Hz (US version)	Battery pack S 962-2 (DA02): S 962-2 (DA01), S 962-2W:	Typ: 2 x 12 V block battery (lead gel) 5,4 Ah (lead gel) 7,2 Ah
Power consumption S 962-2 (DA02): S 962-2 (DA01), S 962-2W: Rated frequency	n 220 W	S 962-2 (DA01), S 962-2W:	Current monitoring, overcurrent deactivation at 20 A (hardware) or 15 A (software)
Mains voltage S 962-2 (DA02): S 962-2 (DA01), S 962-2W:	AC 230 V (EU-, UK version) AC 115 V (US version) AC 230 V (EU version) AC 240 V (UK version)	Lifting motor fuse S 962-2 (DA02):	Current monitoring, overcurrent deactivation at 18,3 (hardware) or 15 A (software)

S 962-2 mit UG4	51,9 dB (A)
S 962-2 mit UG5	53,6 dB (A)
S 962-2W	49,9 dB (A)

## Appendix | Classification

Protection against electric shock	Protection class II or device with internal electrical current source	Degree of protection against explosive substan- ces and mixtures	The bed is not protected against explosion and should not be used in an environ- ment in which flammable anaesthetics or flammable
Protection type by housing as per EN 60529 S 962-2:	IPX4		cleaning agents are present (see relevant national regu- lation)
(splash-proof) not suitable for cleaning in automatic washing systems IPX6	Grouping/Classification as per Regulation (EU) 2017/745 Appendix VIII Rule 13	Class I	
S 962-2W:If No (highly spray-proof) suitable for cleaning in auto- matic washing systemsDegree of protection of the applied part against electric shock as per DIN EN 60601-1Type B		Mode of operation S 962-2 (DA02)	16% (2 min./10 min.) (on-time maximum 2 minutes
		S 962-2 (DA01), S 962-2W	/ off-time 10 minutes) 28% (4 min./10 min.) (on-time maximum 4 minutes / off-time 10 minutes)
		Technical check	1x yearly

### Appendix | Service life / disposal

#### Service life

The bed's expected service life is approx. 10 years.

#### **Disposal information**

- For all components to be disposed of, the operator must ensure that these are not infectious/contaminated.
- If the bed is scrapped, the wood, plastic and metal parts used must be separated and disposed of properly.
- If you have any questions, contact your local authorities, waste disposal companies or our service department.

#### **Disposal of electrical parts**

- This bed is electrically adjustable and classified as a commercial (b2b) electrical device in accordance with WEEE Directive 2012/19/EU (implemented in Germany in the Electrical and Electronic Equipment Act).
- The electrical components used are free of prohibited harmful constituents

pursuant to the Restriction of Hazardous Substances II Directive 2011/65/EU.

- Replaced electrical components (drives, control units, hand control units, etc.) from these beds are to be treated and disposed of as electrical scrap in accordance with the WEEE Directive.
- The bed operator is legally obliged not to dispose of its electrical components in municipal collection points, but to send them directly to the manufacturer. Völker GmbH and its service partners will accept the return of these parts. Please contact our sales team in this regard.
- Our general terms and conditions apply to these returns.

#### **Disposal of batteries**

- Any individual batteries which have been removed but are no longer usable must be professionally disposed of in accordance with Directive 2006/66/EC (implemented in Germany in the Batteries Act); they do not belong in household waste.
- Contact your local waste disposal companies or our service department.

In other countries outside Germany/the EU, observe the national regulations in force there.

Guidelines and manufacturer's declarations — elec	stromagnetic interference

The bed is intended for use in an environment as specified below. The customer or the user of the bed must ensure that it is used in an environment of this type.

		· · · · · · · · · · · · · · · · · · ·
Emitted interference measurements	Compliance	Electromagnetic environment — guidelines
HF emissions in accordance with CISPR 11	Group 1	The bed uses HF energy exclusively for its internal functions. Its HF emissions are therefore very low and it is unlikely that neighbouring electronic devices will be affected by interference.
HF emissions in accordance with CISPR 11	Class B	The bed is suitable for use in all facilities, including households and facilities directly connected to a public power grid that also supplies residential buildings.
Emissions of harmonics in accordance with IEC 61000-3-2	Class A	
Emissions of voltage fluctuations/flicker in accordance with IEC 61000-3-3	Compliant	

#### Guidelines and manufacturer's declaration - electromagnetic immunity

The bed is intended for use in the electromagnetic environment specified below. The customer or the bed user must ensure that it is used in an environment of this kind.

Immunity tests	IEC 60601 test level	Compliance level	Electromagnetic environment — guidelines	
Discharge of static electricity (ESD) in accordance with IEC 61000-4-2	± 8 kV contact discharge ± 2 kV, ± 4 kV, ± 8 kV, ± 15 kV air discharge	± 8 kV contact discharge ± 2 kV, ± 4 kV, ± 8 kV, ± 15 kV air discharge	Floors must be made of wood or concrete, or should be covered with ceramic tiles. If the floor is covered with synthetic material, relative humidity must be at least 30%.	
Electrical fast transients/ bursts in accordance with IEC 61000-4-4	± 2 kV 100 kHz repetition frequency	± 2 kV 100 kHz repetition frequency	The quality of the supply voltage must be that of a typical commercial, clinical or residential environment.	
Surges in accordance with IEC 61000-4-5	± 0.5 kV, ± 1 kV differential mode ± 0.5 kV, ± 1 kV, ± 2 kV common mode	$\pm$ 0.5 kV, $\pm$ 1 kV differential mode $\pm$ 0.5 kV, $\pm$ 1 kV, $\pm$ 2 kV common mode	The quality of the supply voltage must be that of a typical commercial, clinical or residential environment.	
Voltage dips, short interruptions and fluctuations in the supply voltage in accordance with	0% UT for ½ cycle at 0°, 45°, 90°, 135°, 180°, 225°, 270° and 315°	1% UT for ½ cycle at 0°, 45°, 90°, 135°, 180°, 225°, 270° and 315°	The quality of the supply voltage must be that of a typi commercial, clinical or residential environment. If the b user requires continued function even in the event of interruptions to the energy supply, it is recommended	
IEC 61000-4-11	0% UT for 1 cycle at 0° 70% UT for 25 cycles at 50 Hz at 0°	0% UT for 1 cycle at 0° 70% UT for 25 cycles at 50 Hz at 0°	the bed be powered by an uninterruptible power supply or a battery.	
	0% UT for 250 cycles at 50 Hz	0% UT for 250 cycles at 50 Hz		
Magnetic field at the supply frequency (50/60 Hz) in accordance with IEC 61000-4-8	30 A/m 50 Hz	30 A/m 50 Hz	Magnetic fields at mains frequency should correspond to the typical values found in the commercial, clinical or residential environment. Devices that generate magnetic fields should be used at a distance of at least 15 cm from the bed.	

COMMENT: UT IS the AC mains voltage before application of the test level.

	Guidelines and manufacturer's declaration — electromagnetic immunity				
	The bed is intended for use in the electromagnetic environment specified below. The customer or the bed user must ensure that it is used in an environment of this kind.				
Immunity tests	IEC 60601 test level	Compliance level	Electromagnetic environment — guidelines		
Conducted HF inter- ference on the power cable in accordance with IEC 61000-4-6 (no patient connections, DC connections or signal connections are present near the bed)	3 Vrms 150 kHz to 80 MHz 6 Vrms in ISM and amateur radio frequency bands between 150 kHz and 80 MHz 80% AM at 1 kHz	3 Vrms 150 kHz to 80 MHz 6 Vrms in ISM and amateur radio frequency bands between 150 kHz and 80 MHz 80% AM at 1 kHz	The bed is suitable for use in industrial, clinical and residential environments, but not in rooms containing magnetic resonance imaging (MRI) equipment or high-frequency surgical equipment. Electronic devices must be used at a distance of at least 30 cm from the bed. The field strength of fixed radio transmitters must be lower than the compliance level for all frequencies in accordance		
Radiated HF interference in accordance with IEC 61000-4-3	10 V/m 80 MHz to 2.7 GHz 80% AM at 1 kHz	10 V/m 80 MHz to 2.7 GHz 80% AM at 1 kHz	with an on-site evaluation. Interference may occur near devices bearing this symbol.		

### Manufacturer's declarations 4/4

High-frequency electromagnetic fields in	TETRA 400 (380 to 390 MHz, 27 V/m)	TETRA 400 (380 to 390 MHz, 27 V/m)	Devices that use the listed radio services must be operated at a distance of at least 30 cm from the bed.
the immediate vicinity of wireless communication	GMRS 460; FRS 460 (430 to 470 MHz, 28 V/m)	GMRS 460; FRS 460 (430 to 470 MHz, 28 V/m)	
devices in accordance with IEC 61000-4-3	LTE Band 13, 17 (704 to 787 MHz, 9 V/m)	LTE Band 13, 17 (704 to 787 MHz, 9 V/m)	
	GSM800/900; TETRA 800; iDEN 820; CDMA 850; LTE Band 5 (800 to 960 MHz, 28 V/m)	GSM800/900; TETRA 800; iDEN 820; CDMA 850; LTE Band 5 (800 to 960 MHz, 28 V/m)	
	GSM 1800; CDMA 1900; GSM 1900; DECT; LTE Band 1,3,4,25; UMTS (1700 to 1990 MHz, 28 V/m)	GSM 1800; CDMA 1900; GSM 1900; DECT; LTE Band 1,3,4,25; UMTS (1700 to 1990 MHz, 28 V/m)	
	Bluetooth; WLAN 802.11 b/g/n; RFID 2450; LTE Band 7 (2400 to 2570 MHz, 28 V/m)	Bluetooth; WLAN 802.11 b/g/n; RFID 2450; LTE Band 7 (2400 to 2570 MHz, 28 V/m)	
	WLAN 802.11 a/n (5100 to 5800 MHz, 9 V/m)	WLAN 802.11 a/n (5100 to 5800 MHz, 9 V/m)	

COMMENT 1: The higher frequency range applies at 80 MHz and 800 MHz.

COMMENT 2: These guidelines may not be applicable in all cases. The propagation of electromagnetic variables is affected by the absorbent and reflective properties of buildings, objects and people.

a The field strength of fixed transmitters, e.g. base stations for cordless phones and mobile radios, amateur radio stations, AM and FM radio and TV broadcasters, cannot in theory be predicted with any accuracy. A study of the site should be considered to determine the electromagnetic environment with regard to the location of the fixed transmitter. If the field strength measured in the location in which the bed is used exceeds the aforementioned compliance level, the bed must be monitored in order to verify that it is working as intended. If abnormal performance characteristics are observed, additional measures, such as reorientation or relocation of the bed, may be required.

### Information on electromagnetic compatibility (EMC)

Electromagnetic compatibility (EMC) refers to the ability of a technical device to refrain from affecting other devices with unwanted electrical or electromagnetic effects and to resist interference from other devices.

Appropriate construction and design are key to ensuring the electromagnetic compatibility of electrical equipment. The documentation and confirmation of resistance to interference and sufficiently low levels of emitted interference are regulated by EMC guidelines and EMC standards.

To ensure fault-free operation of the bed, please note the following:

 In isolated cases, strong interference can cause failure of adjustment functions, unwanted bed movements, continued adjustment even after release of a button, unwanted changes to the lock status or loss of height information. If effects of this nature are observed, try to increase the distance between the bed and the source of the interference, and to power the device causing the interference and the bed from different circuits. Unwanted movements can be stopped by pressing any button on a control unit (provided it is unlocked). Incorrect locking statuses can be corrected by pressing the appropriate buttons. A loss of height Information indicates a failure of the height adjustment function. In this case, press the "Frame up" and "Frame down" buttons simultaneously and hold for more than 10 seconds until movement ceases. This reference run updates the height information.

WARNING The bed must not be placed directly adjacent to or stacked with other devices. If operation near to or stacked with other devices is necessary, bed operation must be monitored. Intended function in the employed arrangement must also be verified.

- Only Völker original electrical spare parts must be used for repair and service work. Otherwise the aforementioned requirements may not be met. A list of electrical components can be found in the service handbook.
- Devices that emit radiation, such as mobile phones, must only be used at a minimum distance of 30 cm from the bed.
- Please also note the guidelines in the manufacturer's instructions.

5	
check of Völker hospital and healthcare beds in accordance to	rman standards and safety regulations incl. measurements required
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Type of bed, product, location of the bed:					
Bed Identification (e.g. facilities own identification or Völker ID-no.):					
Date of check:	Name of technician:				
Kind of check	Component to be checked	Anually	Accepted	Not accepted	Not applicable
Visual inspection	Inscription on device readable				
	instructions for use available Base frame	6			
	Lying surface, wing and spring elements (if existing)	å			
	Trapeze bar adapter, infusion bar adapter	*			
	Power supply cable, plug or charger, charging connection	æ			
	Strian relieve, bend protection, cable hook	B*/S*			
	Connecting cable, plug-in contacts, blind plugs	B*/S*			
	Positioning (spacing 1 mm) and sensor cabling (only Vis-a-Vis-bed) Housing (motor control electronice)	B"/S"			
	Hand control (housing, cable)	5 m			
	Nurse keypad, nurse hand control (housing, cable)	*			
	Trapeze bar, assist rail infill panel (side rail centre), additional accessories	B*/F*			
	Transverse motors and cover, head and foot ends	å			
	Castors	<u>ئ</u>			
	waii burrer wreei (ir exisung) Side rails including telescopic section if applicable	in in			
	HilLow-elevation: check screw locking (only for 5380)	5			
Functional inspection of side rails	Locking devices	*			
ciuaing telescopic section, if applicable	Deformation	×			
	Abrasions	×			
Functional inspection of drives with hand control and nurse keypad/nurse hand control	Back section, upper leg section, tower leg section, height adjustment, Trende- tenburg position, reverse Trendelenburg position, length adjustment (only for Vis-a-Vis-bed) - approach all end positions	-W/-X			
	Angle limitation (back section to upper leg section >90°)	*			
	Adjustment lower leg section (rastomat/hydrolift/support plate)	×			
		×			
	Brake (electrical or mechanical) - brake applied	*			
	- free running				
	(only for hospital beds and - steering position \$ 280/\$ 310/\$ 380/\$ 282/\$ 382 (Vis-a-Vis))				
	Mechanical release (only for electrical brakes of hospital beds)	×			
Functional inspection replacement	9 V battery (only for beds with Oki-/IIcomat except S 960-1W/S 961) Replaced (yes/no)	A2"			
	Trapeze bar handle and belt (if existing) Replaced (yes/no)	*			
Functional inspection	Bed extension (if existing)	å			
scellaneous	Bedding storage/bedding drawer (if existing)	<b>*</b>			
	Inspection of the adhesive joints on headboard and footboard (if existing)	'n			
Comment					
λμ.		Ч			
Potential equalization impedance		a			
DIN (ju sc					
Total result of the inspection:					
Signature of technician:	Next regula	Next regular inspection:			

Info You can find a printable version of this document on the Internet at www.voelker.de.

Spare part order

Page _	of		
		_	-

MODEL	SERIAL NO.	SPARE PART DESCRIPTION		ITEM NUMBER	QUANTITY
		nplete the form in its entirety, otherwise we may have probler	ns in delivering and processing this order.	Zip code/city/country:	
Signature:	form use block letters)			Street address:	
Purchase or	der date:			Attention of:	
Customer or	der number:				
Customer nu	imber:			Address:	
Telephone n	umber:		Stamp	Billing address, if different from the	e shipping address
Zip code/city	/country:			Shipping address, if different from	Ū.
Street addres	ss:			E-Mail: service@voelker.de	
Name of the	ordering party:			Tel.: +49 2302 96096-62 Fax: +49 2302 96096-66	
Address:				Völker GmbH Service Wullener Feld 79 58454 Witten/Germany	DOTKER

MODEL	SERIAL NO.	SPARE PART DESCRIPTION	ITEM NUMBER	QUANTITY
MODEL (Bed-type)	(Identifaction label inside of the bed-head)			

Info You can find a printable version of this document on the Internet at www.voelker.de.

### **Available accessories**

Available accessories If you have any questions about accessories for this bed or if you wish to order accessories, please contact Völker GmbH



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