



*Operating / Service
Manual*

IMPORTANT: Read all instructions before assembling or using this device.

For decades, JEDMED has built its reputation on principles of quality, integrity, innovation and value. Continuous research and development coupled with exceptional customer service and a world-class quality system has placed JEDMED as an industry leader.

As always, our focus remains on you, our valued customer. Building rewarding and lasting relationships is the cornerstone of JEDMED's business philosophy. JEDMED is committed to delivering reliable and cost-effective solutions to medical professionals everywhere.

The employee-owners of JEDMED would like to take this opportunity to thank you for all your support. We are pleased and proud to serve the ever-changing medical community.

Sincerely,

JEDMED

CONTENTS

Section	Page
OPERATING	
Introduction.....	4
Safety.....	5-7
Commissioning.....	8-11
Operation.....	12-32
Accessories.....	33-35
Cleaning / Disinfection.....	36-37
Troubleshooting.....	38-42

***Note:** Specifications subject to change without notice.*

INTRODUCTION**1. Introduction**

With this instruction manual (hereinafter also referred to as the “manual”) we would like to provide the user and operator with useful information for safe and proper operation of the OS1 Mobile Operating Chair (hereinafter also referred to as the “chair”). This manual also describes functions or features that may not be included in your chair. This manual contains information on the safe use of the chair according to its intended use (see 2.4 Intended use). Observance of the instructions helps to:

- avoid risks
- reduce downtime
- reduce ongoing operating costs
- increase the reliability and service life of the chair

We reserve the right to make technical changes without notice within the scope of further development of the chair described in this manual.

1.1 Validity

This manual applies only to the chair and accessories supplied by JEDMED

1.2 Manufacturer

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1.3 Note on Pictorial Representations

The photos/illustrations are general illustrations and may differ from the actual conditions or from the components actually used.

1.4 Warranty and Liability

Our General Terms and Conditions (GTC) apply in the currently valid version at www.jedmed.com. In the event of a complaint (damage, defects, or other reasons for complaint), your authorized specialist distributor is the appropriate contact person. Please provide the data of the type plate (and possibly a photo). The more accurate and better the data, the better and more targeted the remedy can be provided.

SAFETY**2. Safety**

The main objective of the safety instructions is to prevent injury to persons. In addition, observation of the safety instructions helps to avoid material damage. As the operator you have purchased an OS1 Mobile Operating Chair from JEDMED. As a result, you are also responsible for its proper and intended operation.

2.1 Signal Words

In order to point out dangers, prohibitions and important information, the following signal words and symbols are used in this manual. These must be read and strictly observed.



DANGER This signal word indicates an **imminent danger** resulting in **serious injuries**, and in some cases death.



WARNING This signal word indicates a **potential imminent danger**, which can result in **serious injuries**, and in some cases death.



CAUTION This signal word indicates a **potential imminent danger**, which can result in **light to serious injuries**.



NOTE This signal word indicates a **potential imminent danger**, which can result in **damage to property and the environment**.



TIP Indicates tips for use or other particularly important information when handling the chair.

2.2 Device Safety

JEDMED Chairs were built in accordance with the applicable national and international standards and regulations according to the current state of the art and tested by an independent body. This chair meets the requirements for safety and functionality.

The validity of the declaration of conformity expires if changes are made to the chair by the customer or third parties, e.g. modifications of any kind, use of external accessories, changes to the software, removal of warning and information signs (no claim to completeness).

Due to the chosen robust, interference-proof design of the electrical adjustment devices, the chair is largely tolerant to EMC interference from other electrical equipment operated in the vicinity.

Despite comprehensive EMC testing, it is possible that other devices may be disturbed by the chair. In such cases, either switch off the chair completely by removing the battery or unplugging the mains plug or disconnect it from the mains, or, if necessary, keep a larger distance from the disturbed device and change the orientation to each other. If possible, do not use the same outlet.

This applies in particular to the simultaneous use of highly sensitive measuring instruments. Their measurement results may be influenced under certain circumstances.

The chair can be equipped with accessories on delivery (See Accessories).

If necessary, observe the instruction manual for the accessories. For further information, please contact your authorized specialist distributor.

All prohibition, warning, and message symbols or instructions on the chair must be observed. The symbols and notes must always be legible and complete. Damaged or lost symbols or notes must be replaced true to the original.

The chair is made mainly of steel tubes or steel profiles. The surfaces are either powder-coated with zinc or chrome.

All surfaces are harmless against skin contact.

SAFETY CONTINUED**2.3 Personal Safety**

To avoid errors and to ensure trouble-free operation of the chair, the safety instructions in this instruction manual must be read and understood completely and must always be made available to the user at all times (in printed or electronic form).

Basic instructions for the user can be given by JEDMED or its authorized specialist distributor at the request of the operator.

Patients must be instructed in the use of the chair before activating the hand control.

Operation allowed only by qualified personnel.

Notes to the operator

- Do not leave device(s) in operating state while unattended
- Always use "Universal Precautions" when handling potentially infectious material(s)
- Always clean, disinfect and sterilize equipment between patients
- Use care when introducing pressurized medications to patients
- When using fiberoptic light sources, keep flammables away from light port, fiberoptic cable ends, and endoscope tip
- Disconnect cable ends and endoscope tip
- Do not allow liquid to enter any parts of this device
- Specula and other instruments may pose choking hazard for small children
- Always replace fuse(s) with same type and rating

2.4 Intended Use

The OS1 Operating Chair from JEDMED is a medical chair for use by patients in health facilities such as hospitals, clinics, and medical practices. It is intended exclusively for use inside buildings and under normal environmental conditions. The OS1 chair was specially developed for use in outpatient surgery. The chair allows the convenient and comfortable positioning of the patient before, during, and after treatment or examination. The use is supported in his or her work with regard to the ergonomics and quality.

- The maximum patient weight of the chair is 485 lbs.
- The chair is mainly used to prepare the patient for surgery and postoperative treatment of the patient, e.g. in the recovery room. Absolute prerequisite is the compliance with the hygiene standards regarding disinfection of the chair before and after the procedure
- As a treatment chair for sitting and lying treatments or examinations
- The chair can be used for patient transport under certain conditions within buildings
- The intended users are trained and instructed medical personnel of the relevant department (e.g.: nurses, carers, doctors, assistants, etc.)
- Installation and commissioning by technical personnel of the operator or authorized specialist distributors, if necessary

SAFETY CONTINUED**2.4.1 Reasonably Foreseeable Misuse**

Reasonably foreseeable misuse can lead to hazards. Some examples of “reasonably foreseeable misuse” are given below. (no claim to completeness)

- Use in the vicinity of high-frequency surgical units, MRI units, or defibrillators
- Use in an environment where flammable or explosive gases or vapors (e.g. anesthetic) are to be expected
- Overloading of the chair above the specified maximum patient weight
- Use in the operating theater
- Use as a work chair
- Use as a spare hospital bed or spare bed
- Operation of the chair by patients without prior instruction
- Improper operation of electrical functions and uncontrolled positioning
- Outdoor use
- Use in wet areas, e.g. bathing establishments
- Use as a climbing aid (ladder)
- Use as a children's toy, e.g. gymnastics or sports equipment
- Use as a vehicle or for the transport of goods
- Try to move the chair although the casters are in the braked position
- Pull on cables to move the chair
- Disconnect electrical connectors by pulling on the cables
- Cleaning in washing facility
- Cleaning with a spray hose of a high-pressure cleaner or water jet

COMMISSIONING**3 Commissioning**

The chapter commissioning describes the preparation of the chair for use including a final check of the functional safety.

The use of specially trained and instructed service personnel during commissioning is neither necessary or intended

3.1 Safety Instructions for Commissioning

Before commissioning the chair, the user must be instructed in the handling of the chair using the instruction manual, having previously read it in detail. In addition, the potential dangers that may occur despite proper operation of the chair must be pointed out in detail.

Operator's obligation - instruction

- The operator must observe the respective valid national specifications and legal regulations
- The operator must ensure that the users are instructed before using the chair
- The instruction can be given either by an authorized person of an authorized specialist distributor or directly by the manufacturer

TIP If the delegated person or the operator, e.g. the person responsible for medical devices, has been instructed by an authorized person of an authorized specialist distributor or by the manufacturer, we would like to point out that we authorize the person responsible for medical devices of the operation within the scope of the purpose for the instruction of the chair on the basis of training, experience and knowledge.

- The operator must ensure that the instruction manual has been read and understood completely by the users. The operator must disclose the place where the instruction manual is stored and make it accessible at all times.
- The operator must ensure that representative personnel also receive adequate instruction in the operation of the chair
- The operator must ensure that the chair is operated exclusively by trained users
- The operator must inform the users that the patients may only operate the chair after their instruction, if necessary only under supervision

TIP Electrical testing before commissioning

A further electrical inspection of the chair before the first commissioning is not necessary, as the chair has been tested for electrical safety in accordance with EN 60601 (test report in instruction manual) and has left our factory in perfect condition. In other countries, the applicable national regulations and laws must be observed. Additional commissioning specifications of the operator must always be observed.

DANGER**Danger of suffocation from packaging material**

Packaging material is not a toy and must be kept away from babies and small children. In particular, do not pull the plastic bags or sacks over your head or crawl into them.

COMMISSIONING CONTINUED**3.2 Installation Requirements**

The chair is only approved for use in buildings and under normal ambient conditions, or for use in dry rooms (see Technical Data)

The following environmental conditions must be observed on site.

Operating temperature [C]:

+5°C  +40°C

Air humidity [rH] (non-condensing):

20%  90%

Air pressure [hPa]:

700 hPa  1060 hPa

Operation at estimated altitude [m]:


≤ 2000 m

3.3 Disposal of the Packaging Material

The packaging material must be separated according to substance groups and disposed of properly in accordance with national regulations. If you have any questions, please contact your operator, your local municipalities, or waste disposal companies.

3.4.3 Electrical Commissioning**Personnel Requirements**

- 1 User

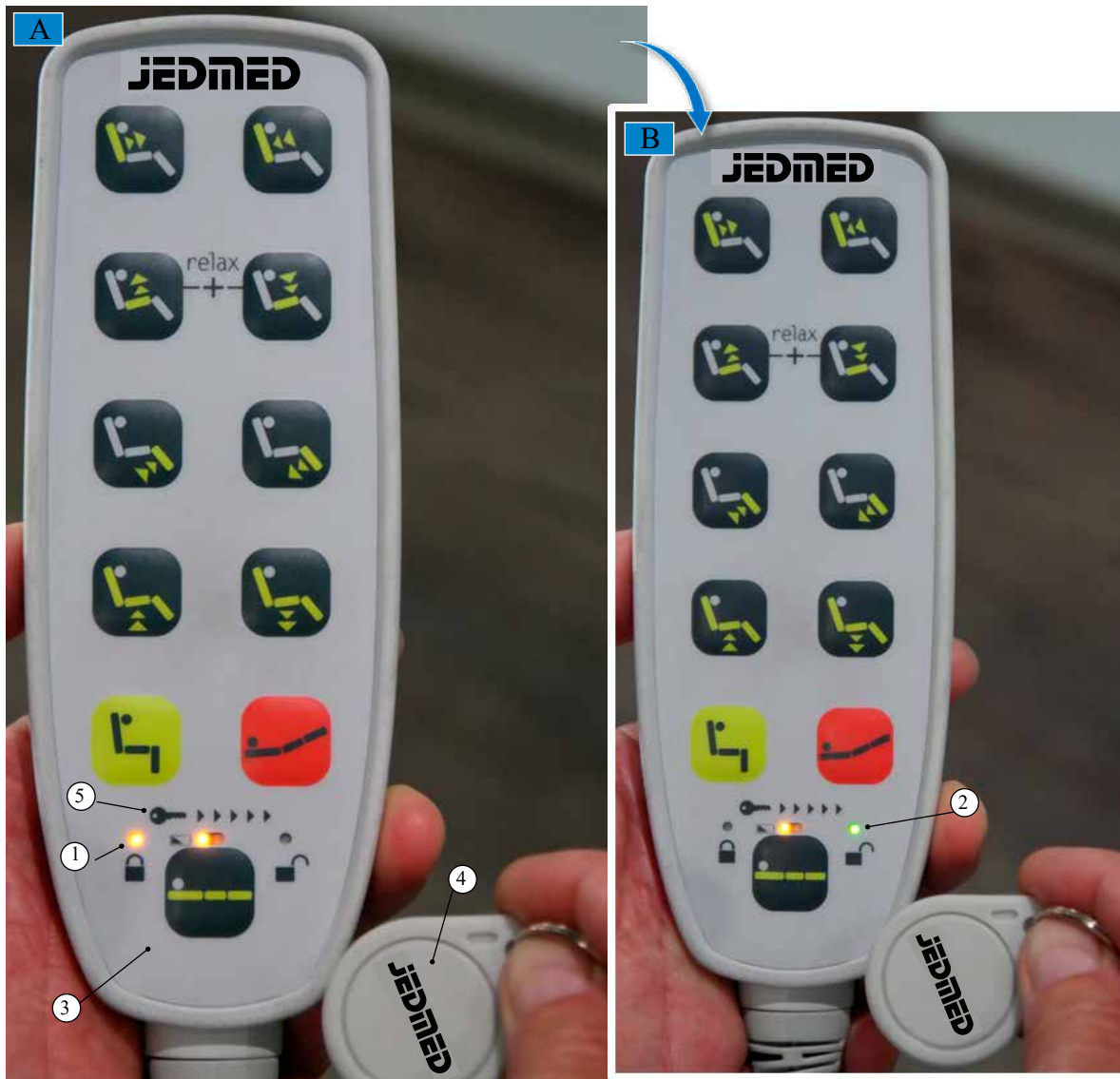
Required Tools and aids

- None

Operating Statuses

- When the chair is equipped with a quick-change battery [BATTERY] and the hand control is disabled, the yellow operation control LED (1) lights up.
- When the chair is equipped with a battery and the hand control is enabled with the magnetic key, the green operation LED (2) lights up to indicate that the chair is ready for operation

Way of Proceeding



1. Insert the mains plug into a socket

Unlocking the Hand Control

2. To unlock the hand control (3), swipe the magnetic key (4) over the key symbol (5) (see figure above)
3. Carry out a functional check

COMMISSIONING CONTINUED**3.5 Requirements on the Place of Operation**

For the operation of the chair, an appropriate mains supply and, if applicable, an equipotential bonding connection is required at the place of use. If this is available and the building's wiring permits it, the chair must always be connected to the equipotential bonding system.

Battery

TIP Charge the battery for at least 24 hours before first use. The battery is then available for normal operation without restriction.

3.6 Check Before Commissioning and Reassignment

After the commissioning work has been completed, and before any occupation by a new patient, the chair must be cleaned and disinfected (See Cleaning and Disinfection).

CAUTION**Risk of infection from contaminated chair**

The chair must be cleaned and then disinfected before the first use. This also applies before each use (occupation by a new patient).

WARNING**Risk of injury for patient, user, and third parties**

The chair must be checked for functional safety after first commissioning and every occupation by a new patient. It must be ensured that the chair can be used as intended without endangering the patient, the user, or third parties.

If the chair is put into operation for the first time or before any occupation by a new patient, the same functional check must be carried out as for recommissioning after storage.

- General check of the overall condition of the chair for soiling, condition and damage, completeness and legibility of stickers, symbols, and instructions, clean if necessary in accordance with the manufacturer's specifications or those of the operator and repair if necessary.
- Visually inspect the mains cable and plug, hand control, as well as all other electrical cables and connectors for breakage, proper installation (e.g. strain relief), clamping or friction points etc. and repair if necessary.
- Functional check of the electrical adjustment devices and the control system. All electric actuators must be operated once up to their end positions. Pay particular attention to changed operation behavior, unusual noises, speed, smooth running, odors and increased temperature and repair if necessary.
- Carry out a functional check according to the installed brake system for the casters (locking, freewheel) and repair if necessary.
- Any defects or damage found must be remedied immediately. The chair must not be used before the defects or damage have been remedied.

WARNING**Risk of injury due to defective chair**

The chair must **not** be operated in a defective or faulty condition in which the chair could endanger patients, users, or third parties. A defective or faulty chair must be clearly marked "**DEFECT**". The marking must be done in such a way that the defective condition is clearly identifiable for everyone. Inform the operator for intensive inspection during repair.

OPERATION**4 Operation**

The chapter operation describes the functions of the chair and its performance features.

Prerequisites for operation

The chair may only be operated and used in accordance with its intended use, the generally recognized rules of technology and the national occupational safety and accident prevention regulations valid at the place of use (see Intended Use).

To ensure safe operation, the following points must be strictly observed.

- Before using the chair, the user must familiarize him or herself with the contents of this manual and observe the safety instructions for the individual points of danger.
- The chair must be cleaned first and then disinfected (see Cleaning and Disinfecting) before commissioning and before any further use (occupation by a new patient). A functional check must be then carried out afterwards.
- The chair does not have an EMERGENCY STOP command device. Access to the mains plug must therefore be guaranteed at all times in order to allow the deactivation of the chair in an emergency situation by disconnecting the mains plug.
- Avoid mechanical stress on the mains cable or plug. Do not crush or trap the mains cable anywhere. Carry out an immediate visual check after each mechanical load on the mains cable or plug.
- Tighten all handwheels, clamping levers and clamping screws etc., including those on accessories before use.

4.1 Safety Instructions for Operation

When adjusting the chair, ensure that there are no limbs of the patient, user, or other persons, especially children playing between the lower and upper sections, as well as between the back or armrest(s) or the leg section and the floor, which could cause entrapment or injury. Pets should generally be kept away from the chair and no other objects should be stored under the chair.



Ensure that the chair does not get caught on walls or furniture.

DANGER**Risk of injury due to unintentional movements of the chair**

The chair is not intended for unsupervised use by children or handicapped persons. In such situations, always ensure that the electrical adjustment functions are disabled as long as there is no trained user on site. Keep the magnetic key separate from the hand control at all times. (see Unlocking and locking the hand control).

The chair may only be occupied by one person at a time. The maximum patient weight must not be exceeded and must be evenly distributed on the lying surface. Do not sit or rest on the backrest upholstery, the legrest upholstery, the arm support or the foot support.

CAUTION**Risk of falling or injury if lying position is set too high**

In order to avoid or reduce injuries caused by falling, we recommend (except when carrying out care measures on the patient) moving the chair to the lowest position. This generally applies when moving the chair (see Driving) and in particular when transporting and sitting down and standing up of the patients (see Patient transportation and Sitting down and standing up of the patients).

When operating other devices on or near the chair, that are equipped with cables, air hoses, or similar, make sure that these lines cannot get trapped in the moving parts of the chair or be damaged in any other way.

WARNING**Risk of injury due to the use of unsuitable accessories**

Only original accessories from JEDMED may be used. The attachment of accessories from other manufacturers (e.g. fixing belts etc.) lies within the responsibility and duty of care of the operator.

OPERATION CONTINUED

4.2 Hand Control

The hand control enables the user or patient to make continuous adjustments using electric drives. Patients must be instructed in the functions of the hand control in any case. When adjusting the chair, the patient's forearms must be in the normal position on the arm supports.

General information on operating the hand control

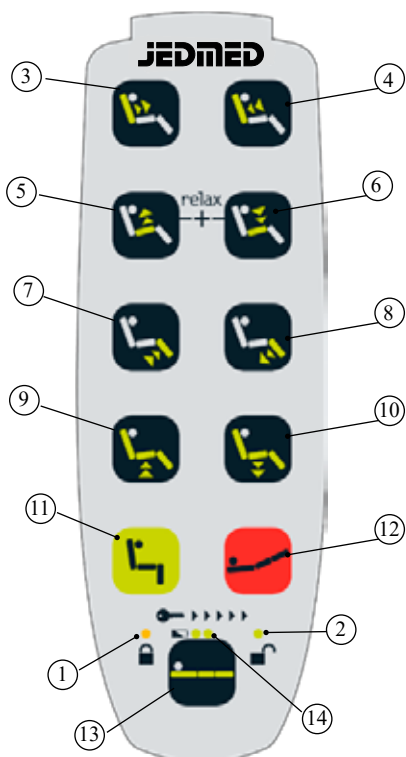
- The drives run as long as the buttons are pressed.
- Each adjustment stops if more than one button is pressed simultaneously, except for the button combination for Relax position (see Relax position).
- Always hang the hand control on the brackets at the front end of the arm supports. In this way, the patient cannot accidentally sit or lie down on the hand control and thus trigger unwanted movements of the chair. The spiral cable provides plenty of freedom for movement.

The yellow (1) and the green LEDs (2) indicate the actual operating status (see Unlocking and locking the hand control).

Operation

- | | |
|---|--------------------|
| • Backrest | up (3) - down (4) |
| • Seat inclination | up (5) - down (6) |
| • Leg section | up (7) - down (8) |
| • Seat height | up (9) - down (10) |
| • Basic position | (11) |
| • Shock position (Trendelenburg position) | (12) |
| • Bed (flat position) | (13) |
| • Relax | (5 + 6) |

Both the yellow and red buttons (11) + (12) for basic position and shock position (Trendelenburg position) and the button for bed position (13) as well as the button combination for relax position are described separately (see Basic position, Shock position, Bed position (flat position), and Relax position). The battery indicator (14) is described in more detail in a separate section (Battery indicator).



1. Yellow operation control LED (hand control locked)
2. Green operation control LED (hand control unlocked)
3. Backrest - up
4. Backrest - down
5. Seat inclination - up
6. Seat inclination - down
7. Leg section - up
8. Leg section - down
9. Seat height - up
10. Seat height - down
11. Basic position
12. Shock position (Trendelenburg position)
13. Bed position (flat position)
14. Battery indicator

OPERATION CONTINUED

4.3.1 Unlocking and Locking the Hand Control

The unlocking and locking of the hand control of an OS1 Mobile Operating Chair is shown here. Locking the hand control prevents the chair from moving accidentally or unintentionally.

TIP

After removing the quick-change battery [BATTERY] and then reinserting it, the chair remains in the previous operating status. This means, for example, that the hand control was locked before disconnecting the battery supply, so the hand control remains locked even after the battery supply has been restored. The control unit remembers the current operating status even without a quick-change battery. Depending on the charging status of the quick-change battery, the control unit changes to stand-by either after 120 minutes (charging status > 40%) or 10 minutes (charging status < 40%). The corresponding operation control LED and the battery indicator on the hand control switch (see Battery indicator) turns off. A chair in stand-by mode cannot be activated by the magnetic key. Press any button on the hand control to activate. Now the chair can be unlocked or locked.

Operating statuses

- When the chair is equipped with a quick-change battery and the hand control is disabled, the yellow operation control LED (1) lights up.
- When the chair is equipped with a battery and the hand control is enabled with the magnetic key, the green operation control LED (2) lights up to indicate that the chair is ready for operation.



Unlocking the hand control

To unlock the hand control (3), swipe the magnetic key (4) over the key symbol (5)

Locking the hand control

To lock the hand control, swipe the magnetic key over the key symbol again

TIP

When the hand control is locked, the foot switch for moving to the shock position (Trendelenburg position) is also locked (see Foot switch).

OPERATION CONTINUED**4.3.2 Basic position**

If patients want to sit down or get up from the chair, as well as before driving, the chair must be brought into the basic position by pressing the yellow button (11). Pressing the button for basic position requires increased attention from the user, as different actuators are activated simultaneously. All lying surfaces (backrest, seat surface, and leg section) move simultaneously to the basic position at maximum speed. In addition, the seat height is lowered completely.

- The backrest is fully upright
- The seat surface is placed horizontally
- The leg section is swivelled all the way down
- The seat height may be lowered completely

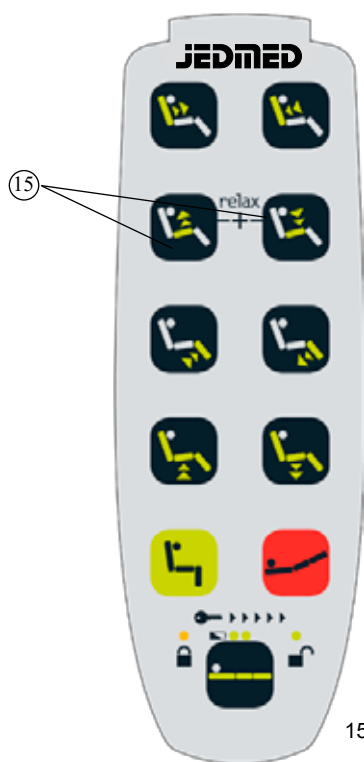


OPERATION CONTINUED**4.3.3 Relax position**

Pressing the two seat inclination adjustment buttons (15) simultaneously brings the chair to a comfortable reclining position for the patient. Pressing the button for the relax position requires increased attention from the user, as different actuators are activated simultaneously. All lying surfaces (backrest, seat surface, and leg section) move simultaneously to the fixed position at maximum speed.

- The backrest lowers slightly
- The seat surface is slightly raised
- The leg section swivels upwards by a predetermined amount
- Careless handling can endanger the patient and third parties or lead to damage to objects or the chair

TIP The seat height remains in the existing position
The position is permanently stored in the control unit and cannot be changed



15. Relax position: seat inclination - up+down

OPERATION CONTINUED**4.3.4 Bed position (flat position)**

Pressing the button (13) brings the chair into the bed position (flat position).

Pressing the button for the bed position requires increased attention from the user, as different actuators are activated simultaneously. All lying surfaces (backrest, seat surface, and leg section) move simultaneously to the fixed position at maximum speed.

- The backrest is brought into a flat position
- The seat surface is placed horizontally
- The leg section is swivelled all the way up
- Careless handling can endanger the patient and third parties or lead to damage to objects or the chair

TIP

The seat height remains in the existing position.

The position is permanently stored in the control unit and cannot be changed.



13. Bed position (flat position)

OPERATION CONTINUED**4.3.5 Shock position****WARNING****Risk of injury due to patient slipping off the chair**

This function is intended for medical emergencies only and not for daily use. The patient position known as the shock position (Trendelenburg position), is also referred to by others as the low head position. Pressing the button (12) for shock position or the foot switch requires maximum attention from the user, as different actuators are activated simultaneously. All lying surfaces (backrest, seat surface, and leg section) move simultaneously, at maximum speed, in shock position.

- The backrest lowers to the head-down position
- The seat surface and the leg section are swivelled all the way up
- When pressing the button or the foot switch (Trendelenburg position), make sure that the patient does not slip off the chair
- Careless handling can endanger the patient and third parties or lead to damage to objects or the chair.

TIP

The seat height remains in the existing position.



12. Shock position (Trendelenburg position)

OPERATION CONTINUED

4.3.6 Battery indicator

The regular indicator (14) on the hand control shows the current charge level of the quick-change battery. The indicator turns off when the chair is in stand-by mode.

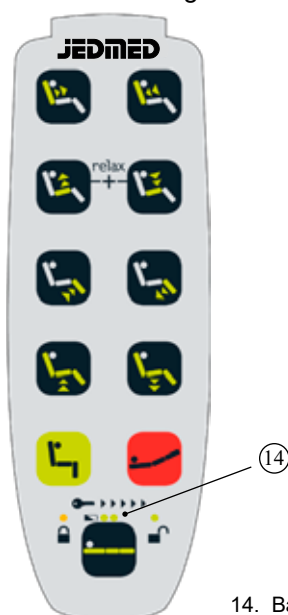
TIP Depending on the charging status of the quick-change battery, the control unit changes to stand-by either after 120 minutes (charging status > 40%) or 10 minutes (charging status < 40%). The corresponding operation control LED and the battery indicator on the hand control switch turns off. A chair in stand-by mode cannot be activated by the magnetic key (see Unlocking and locking the hand control). Press any button on the hand control to activate. The current charge level is now displayed.

A green LED (left) and a yellow LED (right) in combination indicate the current charging level. If the charge level is below 30%, a short beep will also sound when a button is pressed. During charging, the two LEDs are flashing alternately. The fully charged battery is indicated by the permanent lighting of the two LEDs.

The control unit distinguishes between the following charging levels:

Charge level	Yellow LED (left)	Green LED (right)	Sound signal
100 - 50%	on	on	none
49 - 30%	on	off	none
< 30%	flashes	off	short
During charging	alternate flashing		none
Charging completed	on	on	none

NOTE If the battery falls below the 30% limit (yellow LED (left) flashes), the battery should be charged immediately or replaced with a fully charged battery in order to achieve the best possible service life (see Charging the battery). When the charge level reaches the critical level, the control unit immediately deactivates all movements. There is a danger that the initiated movement cannot be finished or that the processor in the control unit can no longer detect the position of the drives.



14. Battery indicator

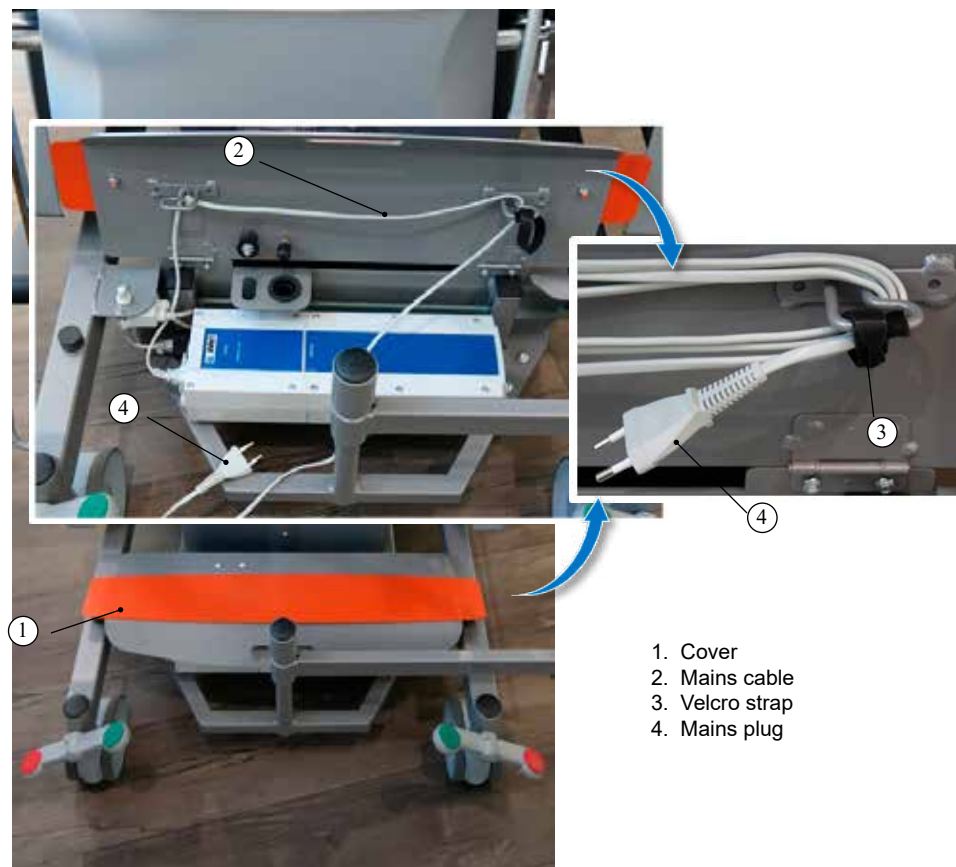
OPERATION CONTINUED**4.4 Charging the battery****Notes on handling the battery**

TIP Charge the battery for at least 24 hours before first use. The battery is then available for normal operation without restriction. It is not possible to overcharge the battery. The chair can be adjusted during the charging process.

NOTE Proper handling increases the service life of the battery. Avoid deep discharge of the battery. Deeply discharged batteries can be damaged to such an extent that premature replacement is necessary. In order to guarantee the electrical functionality at all times or the longest battery life, the battery should be charged < 30% or replaced with a fully charged battery (see Battery indicator). Fully charged batteries should not be stored for longer than 3 months without recharging. The battery must be fully charged or replaced with a fully charged battery every 3 months at the latest, otherwise it will be damaged due to self-discharge. The battery is a wearing part and must be replaced after 4 years at the latest, or even earlier, depending on the intensity of use.

Insert the mains plug

Fold up the cover (1). Uncoil the mains cable (2) to the required length. If necessary, loosen the Velcro® strap (3) beforehand. Insert the mains plug (4) into a socket.



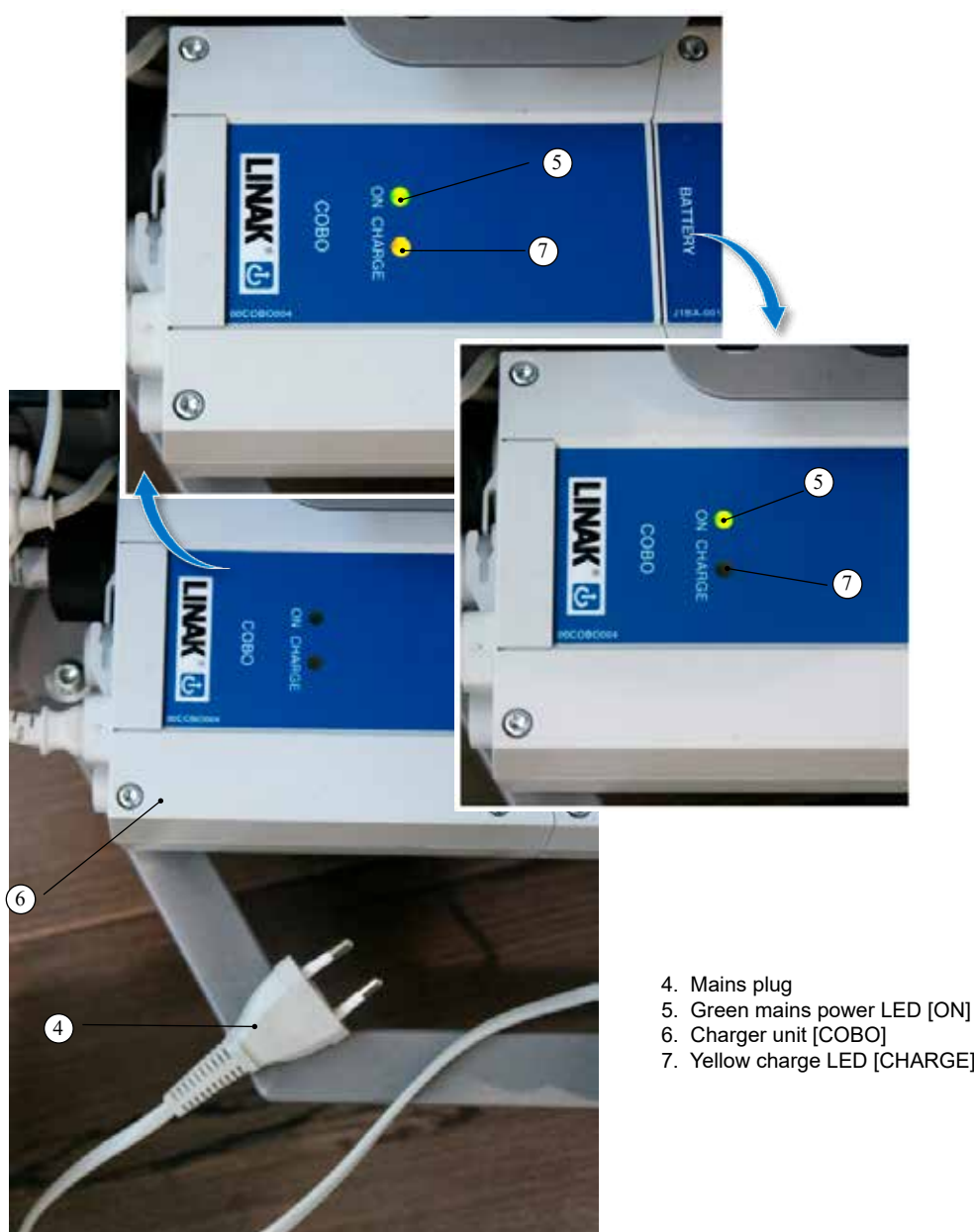
1. Cover
2. Mains cable
3. Velcro strap
4. Mains plug

OPERATION CONTINUED**Control indicators**

The green mains power LED [ON] (5) on the charger unit [COBO] (6) indicates an active mains connection. The yellow charge LED [CHARGE] (7) is permanently lit during charging and turns off when the battery is fully charged. The charging process can also be monitored at the hand control (see Battery indicator).

Folding down the cover

When charging is complete, unplug the mains plug and wind up the mains cable. Fasten the mains plug or cable with the Velcro® strap. Fold down the cover and hold it firmly when lowering. Do not let the cover fall freely, and snap in under slight pressure. Check the function of the foot switch for shock position (Trendelenburg position) (see Foot switch).



OPERATION CONTINUED**4.5 Changing the battery**

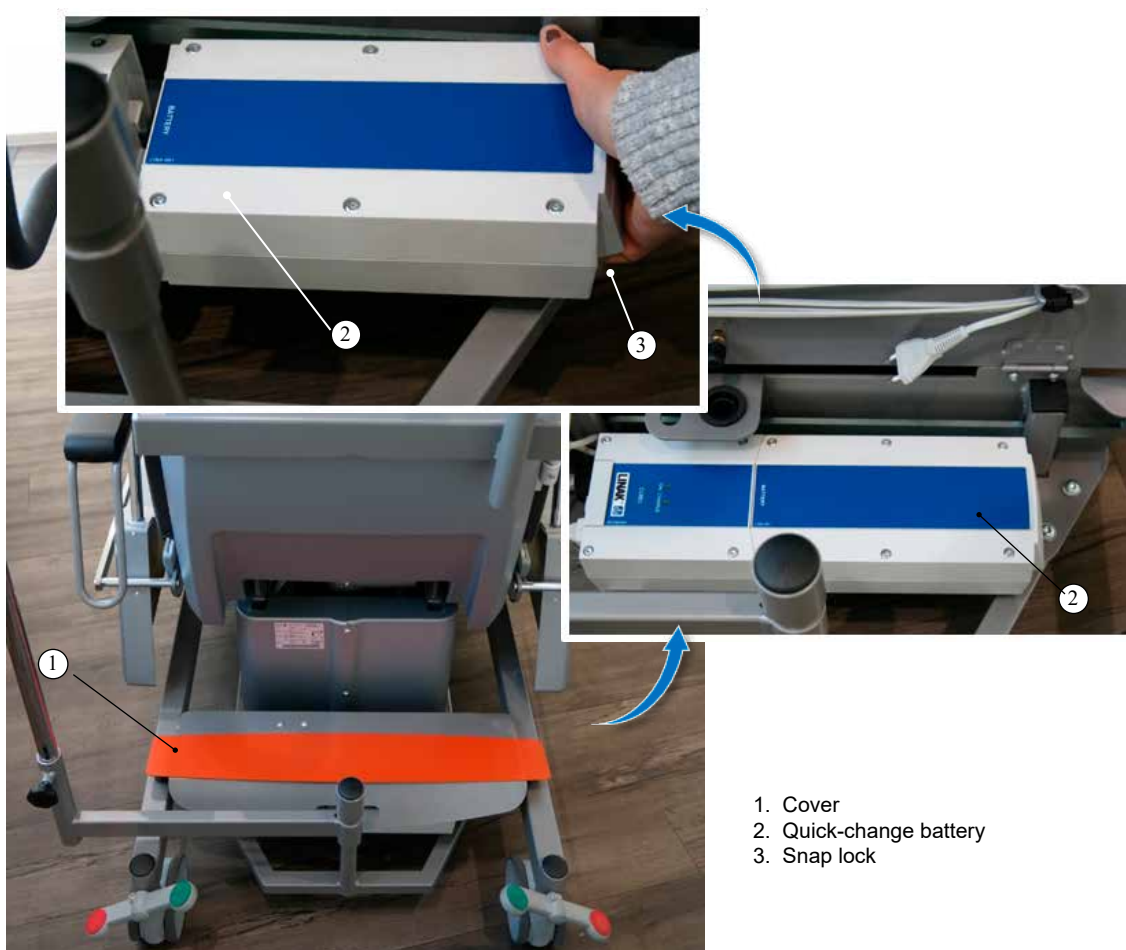
The chair cannot be operated without a battery. Due to the mobility requirements for the OS1 Mobile Operating Chair, a stand-alone power supply via the charger unit [COBO] is not possible. The chair is always and exclusively powered by the battery. The charger unit [COBO] continuously recharges the battery when the mains plug is plugged in (see Charging the battery).

Removing and reinserting the battery

Fold up the cover (1). Remove the quick-change battery (2). To do this, pull up the snap lock (3) integrated on the right side of the battery with your fingertips. The battery must snap in with a clearly audible noise when reinstalled (see Replacement of battery).

Folding down the cover

Fold down the cover after changing the battery. Make sure to hold on to the cover when lowering. Do not let the cover fall freely, and snap in under slight pressure. Check the function of the foot switch for shock position (Trendelenburg position) (see Foot switch).



OPERATION CONTINUED**4.6 Foot switch**

Pressing the orange foot switch (1) brings the chair directly into the shock position (Trendelenburg position) (see Shock position). By using the footswitch, the user has both hands free right from the start for important, possibly life-saving, measures on the patient - saving time. In an emergency, every second counts.

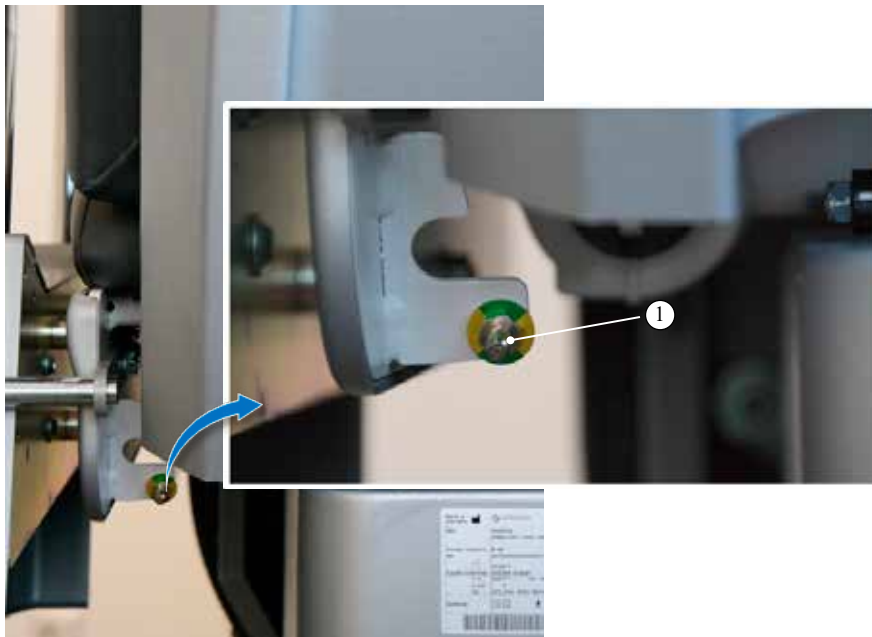
TIP When the hand control is locked, the foot switch for moving to the shock position (Trendelenburg position) is also locked (see Unlocking and locking the hand control).



1. Foot switch

4.6 Equipotential bonding pin

The equipotential bonding cable connects the connection pin (1) on the chair to the connection on the wall strip. To do this, place the plug completely onto the corresponding connection pin against the noticeable resistance. To remove, simply disconnect the plug.



OPERATION CONTINUED

4.9 Double foot switch

The chair can be equipped with a double foot switch in addition to the hand control. By using the double foot switch, the user has both hands free for important measures on the patient - improvement of ergonomics and prevention of contamination. The spiral cable allows plenty of freedom of movement.

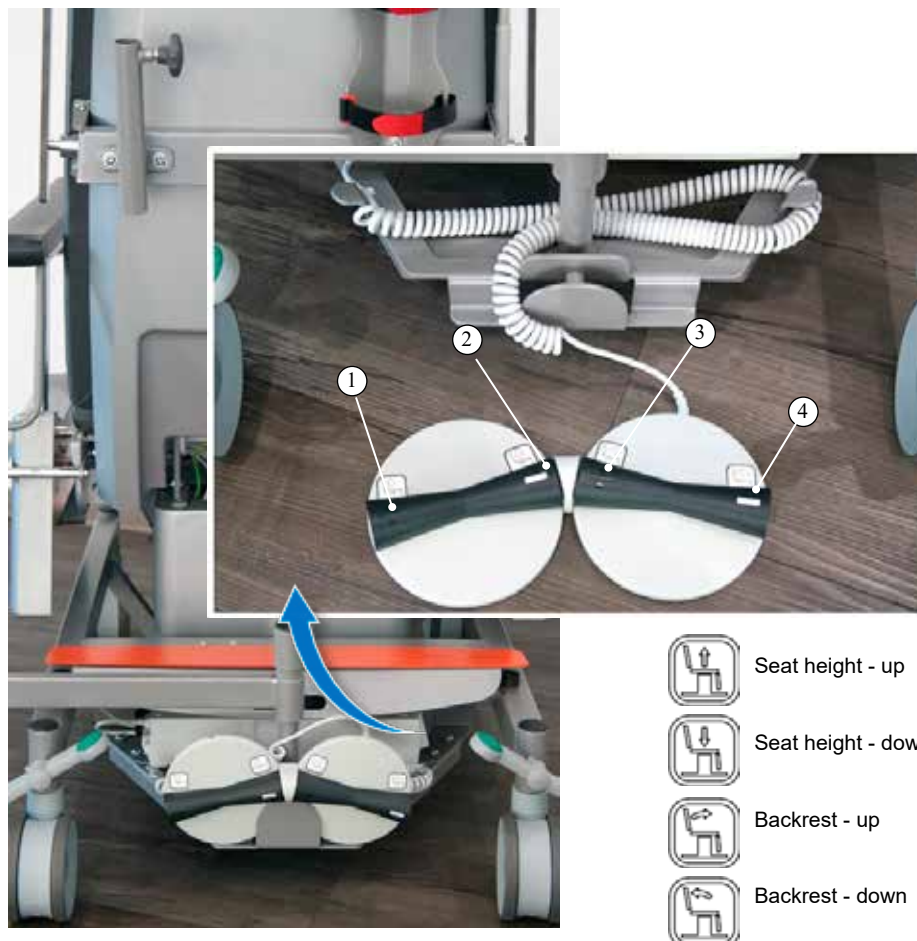
General information on operating the double foot switch

- The drives run as long as the switches are pressed
- Each adjustment stops if more than one switch is pressed simultaneously, except for the switch combinations for basic position or bed position (flat position). The same safety instructions apply here as for the operation by the hand control (see Basic position and Bed position (flat position)).
- Always hang the double foot switch on the bracket before moving the chair. The cable of the double foot switch must be wound up on the bracket, as it is not resistant to being run over.

When the hand control is locked, the double foot switch is also locked (see Unlocking and locking the hand control).

Operation

Seat height	up (1) - down (2)
Backrest	up (3) - down (4)
Basic position	(2+3)
Bed (flat position)	(1+4)



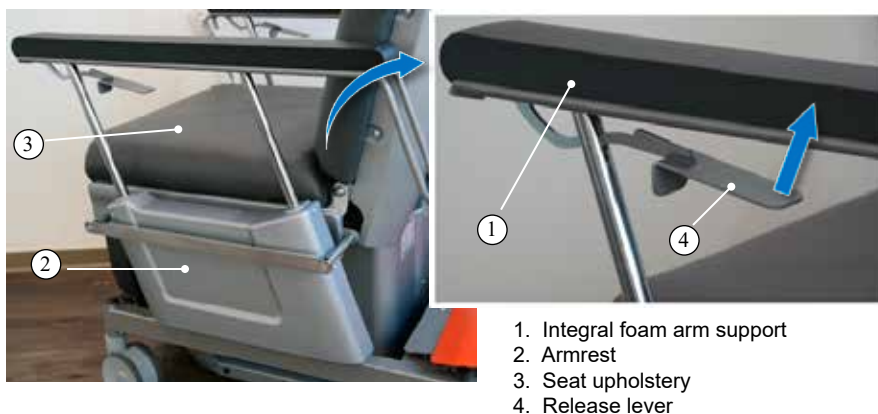
OPERATION CONTINUED**4.11 Armrests**

The integral foam arm support (1) of the armrest (2) can be lowered completely to the height of the upper edge of the seat upholstery (3). This ensures a simple and safe transfer of the patient, e.g. from the bed to the chair or in the opposite direction.

TIP The left and right arm supports can be adjusted independently of each other.

Lowering

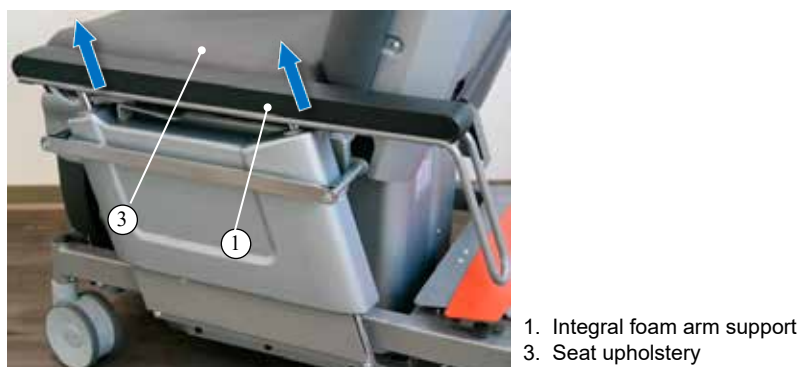
Pull and hold the release lever (4). Now push the arm support into the lowest position. The arm support must be actively pressed down. In the fully recessed position the armrest is slightly pulled down.

**Pulling out**

Simply pull on the arm support to return to the highest position. The arm support must engage in the highest position (completely pulled out) with a clearly audible noise.

CAUTION**Risk of falling or accident due to moving armrests**

Check that the arm supports have snapped in securely when they are completely pulled out by briefly supporting yourself on them. This is especially true when sitting down, standing up and transporting patients. Patients could slip and possibly fall. There are only two permitted operating positions. Either completely pulled out or completely lowered. Intermediate positions represent a danger and must therefore be avoided at all costs. This also applies to a table standing around unused. Patients and third parties have no way of detecting the unsafe intermediate position of the arm supports and of assessing the resulting danger.



OPERATION CONTINUED

4.12 Headrests

Each OS1 Mobile Operating Chair has a headrest and can be supplemented with additional headrests with exchangeable upholstery by using the Quick Assist.

Headrest Ergo with Vario-double joint - adjusting the inclination

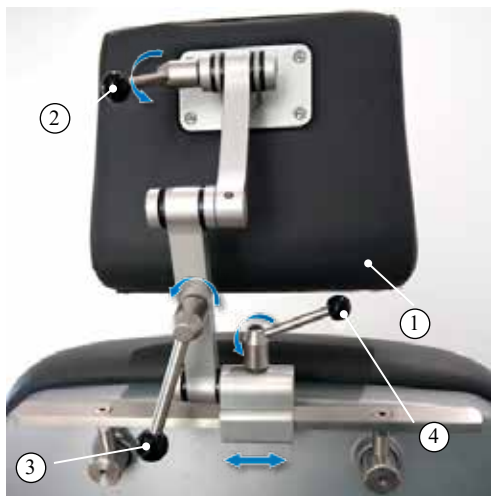
The inclination of the headrest upholstery (1) is continuously adjustable. Loosen the clamping lever (2) and adjust the upholstery as desired, then retighten the clamping lever.

Headrest Ergo with Vario-double joint - positioning

The Vario-double joint allows the headrest upholstery to be positioned continuously, very flexibly and quickly. To do this, release the clamping lever (3) and adjust the upholstery as desired. Then tighten the clamping lever again.

Headrest Ergo with Vario-double joint - shifting sideways

The sideways position of the entire headrest is continuously adjustable. To do this, release the clamping lever (4) and slide the headrest to the left or right. Then tighten the clamping lever again.



TIP

The position of the clamping levers can be changed by pulling them out. After releasing, the clamping levers engage again automatically.

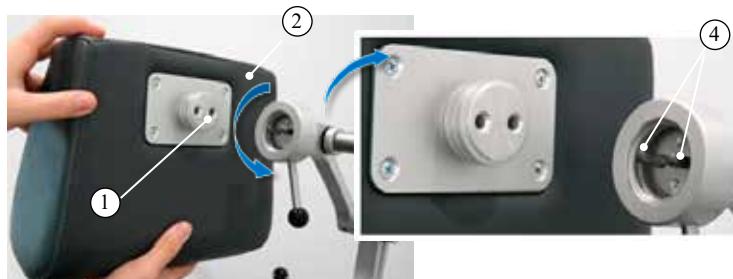
1. Headrest upholstery
2. Clamping lever (inclination)
3. Clamping lever (positioning)
4. Clamping lever (sideways)

Exchangeable HEADREST - replacing with Quick Assist

The Vario-double joint can be supplemented with a Quick Assist (1) (quick coupling). This enables the quick exchange of exchangeable upholstery (2). To release, turn the coupling nut (3) on the Quick Assist counter-clockwise. Remove the mounted exchangeable upholstery. Attach the desired exchangeable upholstery in the correct position. Pay attention to the position of the guide pins (4). To tighten, turn the coupling nut clockwise.

The following exchangeable upholstery items are available:

- Ergo (see Exchangeable headrest)
- Stretch (see Exchangeable headrest - Stretch)
- Full-calotte (see Exchangeable upholstery - Full-spherical)
- Half-colette (see Exchangeable upholstery - Half-spherical)



1. Quick Assist
2. Exchangeable upholstery
3. Coupling nut
4. Guide pins

OPERATION CONTINUED

4.1.3 Foot support**Folding out and in**

The foot support (1) is located on the back of the swivelling heel upholstery. The foot support can be folded out and in manually as required. It is used for safe positioning of the patient's feet during transportation and, if necessary, during treatment. Fold out and in the foot support, together with the heel upholstery, on the right or left metal bracket (2). An anti-slip mat (3) prevents the feet from slipping off accidentally.

CAUTION**Risk of falling or tripping when foot support is folded out**

The foot support must be folded in when the patient sits down or stands up. This is the only way to ensure that the patients can approach the chair as close as possible with their heels. This gives handicapped patients in particular a feeling of safety when sitting down or standing up. The mechanics of the foot support cannot withstand the loads when sitting down and standing up of the patients (see Sitting down and standing up of the patients).

Risk of trapping or injury due to uncontrolled foot movements during patient transport

The foot support must always be folded out during patient transportation. For safety reasons, the feet must always be placed on the foot support (see Patient transportation).



OPERATION CONTINUED**4.14 Driving**

The chair may only be moved over a solid surface. Before moving the chair, it must be brought into the basic position by pressing the yellow button (11) on the hand control (see Basic position).

- Manually fold in the foot support completely (see Foot support)
- Always hang the hand control on the backrest at the front end of the arm supports. The cable of the hand control must not touch or run over the floor, as it is not resistant to being run over. If necessary, the cable of the hand control must be wound up or hung up. Running over or crushing the hand control cable will result in damage which can lead to malfunctions.
- If necessary, unplug the mains plug and wind the mains cable under the battery cover. Fasten the mains plug or cable with a Velcro® strap. Fold down the cover and hold it firmly when lowering. Do not let the cover fall freely and snap in under slight pressure (see Charging the battery).

Risk of electric shock / fire and malfunction

Make sure that the mains cable cannot be run over or damaged in any other way. The mains cable must be wound up under the battery cover and fastened with a Velcro® strap, and must not touch or run over the floor as it is not resistant to being run over. Running over or crushing the mains cable will result in damage which can lead to electrical hazards and malfunctions.

- The arm supports must be brought into the normal position (completely pulled out) and engaged in the highest position with a clearly audible noise (see Armrests).
- Do not use any existing infusion rod etc, as a push handle
- Additional attached or suspended objects must not cause any danger to the user or third parties. Possible damage (e.g. to door frames etc.) must be avoided
- Do not drive faster than walking speed and slow down when turning corners and curves
- Drive carefully over obstacles on the ground, e.g. thresholds, and do not brake abruptly
- The use of stairs is strictly prohibited
- When driving on slopes or inclines, e.g. ramps, a second user must additionally secure the chair at the front due to its weight.

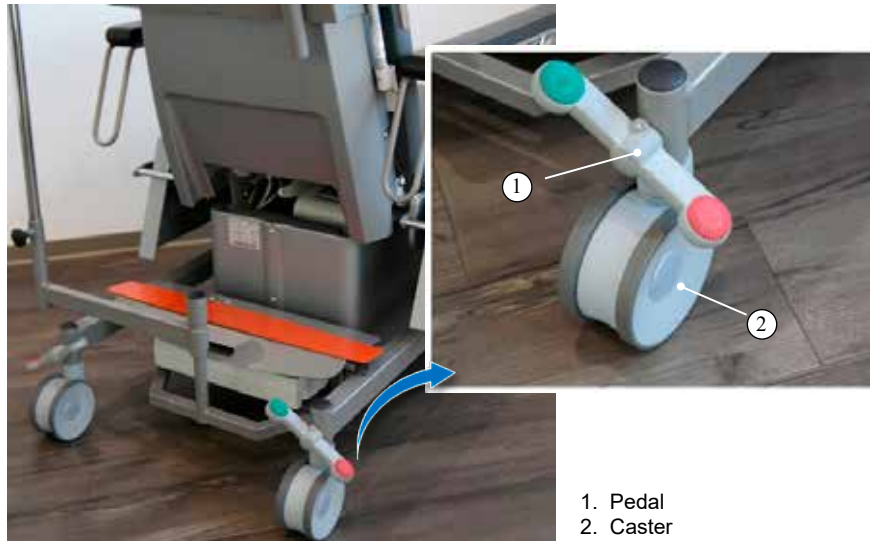
The chair is equipped with four lockable casters. Move the right front roller into driving position and engage (see Braking). All casters must be braked at all times when the chair is parked (see Braking).

OPERATION CONTINUED**4.15 Braking**

The chair has a braking system with central locking. In order to allow the chair to move smoothly, the right front caster (marked yellow) can be locked in the direction of travel. The electrical conductivity of the right front caster additionally prevents possible electrostatic charging of the chair.

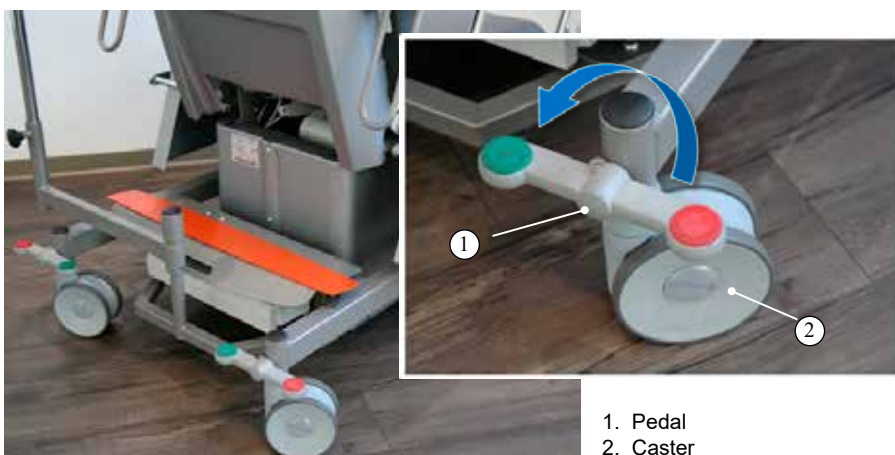
Braking

To brake the chair, step down on the red side of one of the two pedals (1) completely. When braked, the red side of both pedals points downwards. All casters (2) are locked simultaneously. Make sure that the chair cannot move on its own.

**Maneuvering**

To release the brakes and bring the chair into the maneuvering position, step on the green side of one of the two pedals (1). In the maneuvering position, both pedals are horizontal. All casters (2) are released simultaneously.

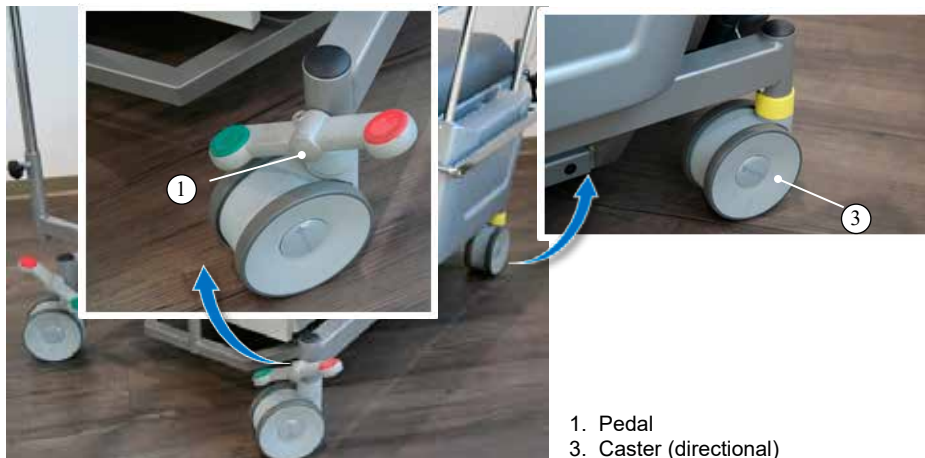
TIP In the maneuvering position, all casters are completely free to move. This means that the chair can be maneuvered in the tightest of spaces.



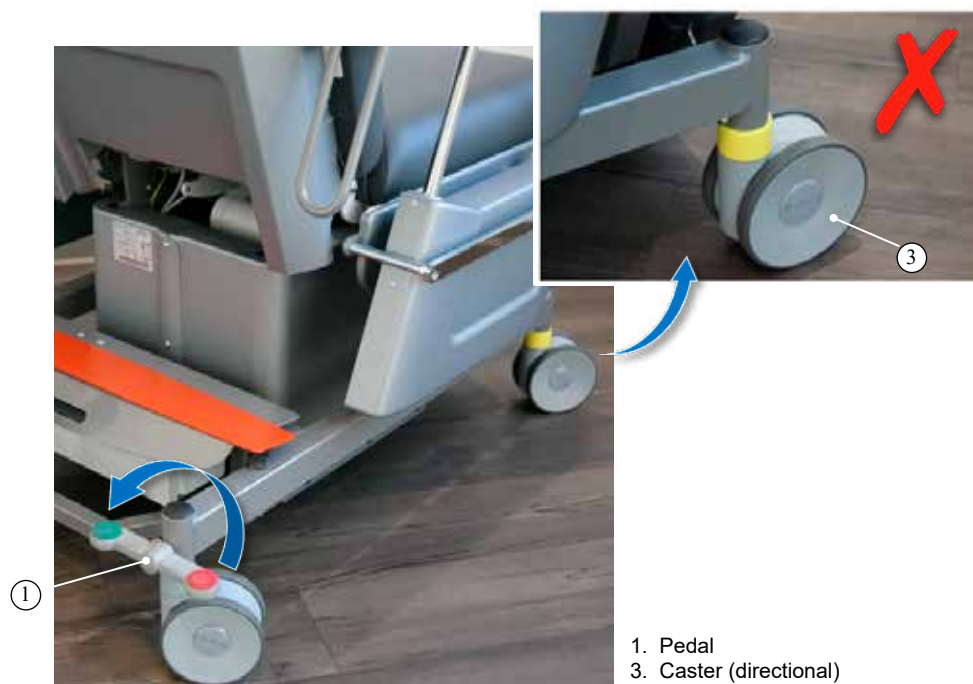
OPERATION CONTINUED

Driving

To release the brakes and bring the chair into the driving position, step down on the green side of one of the two pedals (1) completely. In the driving position, the green side of both pedals points downwards. All casters are released simultaneously. The right front caster (marked yellow) (3) can now be engaged in the direction of travel.



TIP The right front caster can engage in two positions offset by 180°. A caster that is locked in for the forward position starts to wobble when pushed, which makes you feel unpleasant and unsafe to drive. To lock the right front caster correctly in the driving position, always push the chair forward a short distance first. Ensure that the directional caster is locked in the retracted position.



OPERATION CONTINUED**4.16 Sitting down and standing up of the patients**

If patients want to sit down or stand up from the chair, it must first be brought into the basic position. Therefore press the yellow button (11) on the hand control (see Basic position) which will lock the chair by activating the brake system. When the patient sits down or stands up, all casters must be braked (see Braking)

CAUTION**Risk of falling or accident due to insufficiently braked chair**

If the chair is not being moved, the casters must be locked at all times, as the chair may be used by patients as a support when sitting down or standing up. Rolling the unbraked chair away can lead to serious falls. After activating the central locking, check whether the chair is actually fixed, i.e. the casters are sufficiently braked. The chair may be in an unbraked position before each new use and must therefore be checked immediately for properly locked casters.

- Fold in the foot support (see Foot support)

CAUTION**Risk of falling or tripping when foot support is folded out**

The foot support must be folded in when the patient sits down or stands up. This is the only way to ensure that the patients can approach the chair as close as possible with their heels. This gives handicapped patients in particular a feeling of safety when sitting down or standing up. The mechanics of the foot support cannot withstand the loads when sitting down and standing up of the patients.

- Pull out both arm supports completely when patients want to sit down or stand up. The arm supports must engage in the highest position (completely pulled out) with a clearly audible noise (see Arm rests).
- Lower the arm support completely if patients want to sit down or stand up always.
- Provide support as needed

CAUTION**Risk of falling or accident due to moving arm supports**

Check that the arm supports have snapped in securely when they are completely pulled out by briefly supporting yourself on them. Patients could slip and possibly fall.

4.1.7 Patient transportation

When transporting patients, proceed in principle in the same way as when moving the unoccupied chair (see Driving). In addition, the following requirements must be observed.

TIP

The casters are essentially used only to move the chair when it is unoccupied. The chair can be used for patient transportation within buildings under certain conditions.

- The patient may be transported in both a sitting and lying position
- The forearms of the patient lie in normal position on the arm supports
- In the seated position, the foot support is folded out and the patient's feet are on the foot support (see Foot support)

CAUTION**Risk of trapping or injury due to uncontrolled foot movements during seated patient transport**

The foot support must be folded out at all times during seated patient transportation. At the same time, for safety reasons, always place your feet on the foot support.

- When transporting the patient, pull out both arm rests completely. The arm supports must engage in the highest position (completely pulled out) with a clearly audible noise (see Armrests).

OPERATION CONTINUED

CAUTION**Risk of falling or accident due to moving arm supports**

Check that the arm supports have snapped in securely when they are completely pulled out by briefly supporting yourself on them. Patients could slip and possibly fall.

- When driving on slopes or inclines, e.g. ramps, a second user must additionally secure the chair at the front due to its weight and for the safety of the patient.

4.18 Infusion rod holder and infusion rod

The chair can also be equipped with an infusion rod holder and the infusion rod.

Swivel the infusion rod holder

The infusion rod holder (1) or the infusion rod (2) can be simply swivelled from left to right or in the opposite direction. The infusion rod holder sensitively snaps into the relevant end position.

CAUTION**Risk of trapping due to infusion rod**

Never leave the infusion rod holder in an intermediate position. When lowering the back, there is a risk of trapping between the infusion rod and the back cover. The infusion rod will definitely be damaged. The infusion rod holder may also be bent and will have to be repaired. Intermediate positions represent a danger and must therefore be avoided at all costs. This also applies to chairs that appear to be standing around unused. Patients and third parties have no way of detecting unsafe intermediate positions of the infusion rod holder and will face the resulting danger.

Inserting and adjusting the infusion rod

After inserting the infusion rod, tighten the handwheel (3) on the infusion rod holder. Make sure that the infusion rod has also been pushed into the infusion rod holder as far as it will go. The height of the infusion rod can be continuously adjusted. To do this, loosen the clamping screw (4) on the infusion rod, hold the upper pull-out part of the infusion rod, while doing this, adjust the height as desired or required and retighten the clamping screw.

NOTE Do not use the infusion rod as a push handle - risk of damage (see Driving).



1. Infusion rod holder
2. Infusion rod
3. Handwheel
4. Clamping screw

ACCESSORIES**5 Accessories****5.1 Double foot switch**

The double foot switch allows the user to move the electric adjustment drives without using the hand control. The alternative operation improves the ergonomics during important measure on the patient and avoids a possible contamination of the hands. For handling the double foot switch (see Double foot switch).

NOTE Observe the safety aspects when moving the electric actuators. Take particular care to check for possible trapping points, both on the patient first and foremost, and with regard to the chair itself.

**TIP**

The non-slip double foot switch has an extra-long spiral cable and thus allows plenty of freedom of movement. The double foot switch and the spiral cable can be stowed away safely when the chair is moved.

5.2 Headrest Ergo with Vario-double joint

The chair can be ordered with a headrest Ergo with Vario-double joint. For handling the headrest Ergo with Vario-double joint (see Headrest).

**TIP**

The Vario-double joint allows a quick and very flexible adjustment. Of course, a headrest Ergo with Vario-double joint, in licorice, can be re-ordered at any time.

ACCESSORIES CONTINUED**5.3 Quick Assist (quick coupling)**

The Quick Assist ensures the use of exchangeable headrest. The Quick Assist can only be used on the Vario-double joint. For handling the Quick Assist (see Headrest).

**TIP**

The Quick Assist can also be retrofitted to the Vario-double joint

5.4 Exchangeable headrest - Ergo

The exchangeable upholstery Ergo in combination with the Quick Assist (quick coupling) allows quick and easy exchange of headrest on the Vario-double joint. For handling the exchangeable headrest Ergo (see Headrest).

**TIP**

Of course, an exchangeable upholstery Ergo, in the licorice color, can be re-ordered at any time.

5.5 Exchangeable headrest - Stretch

The exchangeable headrest Stretch in combination with the Quick Assist (quick coupling) allows quick and easy exchange of upholstery on the Vario-double joint. For handling the exchangeable headrest Stretch (see Headrest).

**TIP**

Of course, an exchangeable upholstery Stretch, in the licorice color, can be re-ordered at any time.

ACCESSORIES CONTINUED**5.6 Exchangeable headrest - Full-spherical**

The exchangeable headrest Full-spherical in combination with the Quick Assist (quick coupling) allows quick and easy exchange of upholstery on the Vario-double joint. For handling the exchangeable headrest Full-spherical (see Headrest).

**TIP**

Of course, an exchangeable upholstery Full-spherical, in the licorice color, can be re-ordered at any time.

5.7 Exchangeable headrest - Half-spherical

The exchangeable headrest Half-spherical in combination with the Quick Assist (quick coupling) allows quick and easy exchange of upholstery on the Vario-double joint. For handling the exchangeable headrest Half-spherical (see Headrest).

**TIP**

Of course, an exchangeable upholstery Half-spherical, in the licorice color, can be re-ordered at any time.

CLEANING AND DISINFECTION**6 Cleaning and Disinfection**

This chapter describes all regular cleaning and disinfection activities. To ensure that the chair is always functional and usable, it should be cleaned and disinfected as soon as possible after each use so that it can be used again immediately. Improper cleaning or disinfection may cause hazards.

WARNING**Risk of electric shock / fire and malfunction**

The chair must always be disconnected from the mains supply by unplugging the mains plug before performing any maintenance work. Before recommissioning, ensure that no residual moisture remains on the electrical contacts by drying or blowing off the mains plug. None of the electrical components may have external damage. Failure to observe these instructions may result in the penetration of cleaning agents or disinfectants, resulting in malfunctions or damage.

DANGER**Risk of electric shock / fire as well as functional failure due to penetration of liquids**

If liquids are suspected to have penetrated electrical components, immediately unplug the mains plug or do not reconnect it. Take the chair out of operation immediately and clearly mark it with “DEFECT”. Inform the operator for intensive inspection during repair.

NOTE

The information contained in the instructions of the manufacturer of the relevant detergent or disinfectant must be strictly observed. The dilution ratio recommended by the manufacturers in the respective instructions must be observed. The specific concentrations must not be exceeded or undershot. Failure to observe these instructions may result in material damage or personal injury.

TIP

Before the extensive use of cleaning agents and disinfectants, we always recommend resting the surface compatibility on a non-visible area. As a rule, the solutions should be freshly prepared.

TIP

Do not use a brush and high pressure to clean or disinfect type plates, stickers, symbols and notes. Readability must always be guaranteed and compatibility tested over a small area if necessary.

- Cleaning and disinfecting agents must not contain any corrosive components
- They must not contain substances that alter the surface structure or the adhesive properties of the materials
- The lubricants used on the chair must not be harsh
- The pH value of the water must not exceed or fall below 6-8
- The total water hardness of 0.9 mmol/l (corresponding to 5°dH) must not be exceeded

TIP

The information provided by us does not exempt the user from carrying out her or his own tests and trials, as the conditions (e.g. water hardness) can vary greatly from place to place. A legally binding assurance of certain characteristics cannot be derived from this information.

NOTE

The use of unsuitable cleaning agents and disinfectants, the wrong mixing ratio and insufficient care of the chair can cause damage to the surface coating for which JEDMED is not liable

TIP

Ensure that no liquid residues remain on the metallic parts of the chair after cleaning and disinfection (avoid droplet formation on edges). Otherwise corrosion cannot be excluded in these areas in the long term

TIP

To avoid degreasing of the piston rods, all electric actuators should be moved to the smallest stroke position before cleaning or disinfection. Dry-running piston rods should be greased thinly with industrial Vaseline®.

CLEANING AND DISINFECTION CONTINUED**6.1 Cleaning**

Cleaning and subsequent disinfection must be carried out at regular intervals. The following times are usually to be observed

- If required
- After each patient change
- In accordance with the guidelines of the operator's hygiene plan

Depending on the degree of soiling, we recommend cleaning the chair with a damp cloth (microfiber cloth or similar). Oil, grease, sweat, urine, and blood must be removed immediately. Use a warm, mild soapy water. A soft hand brush can also be used for stubborn dirt or stains. Do not use excessive amounts of water to clean the chair.

NOTE

The upholstery materials must be protected from the effects of intense heat and cleaned regularly. Take care that the upholstery is not soaked. Do not use organic solvents (e.g. petrol, benzene, turpentine, toluene, xylene, or acetone etc.), chlorides, polishes, chemical cleaning agents or wax polishes to clean the upholstery. Do not use agents containing oil, grease, or alcohol. The upholstery materials are not resistant to dry cleaning. Under no circumstances should scouring sponges or cleaning agents containing abrasive particles, abrasives, or other blunting substances be used to clean the steel parts.

For cleaning the plastic parts also use a warm, mild soapy water or, if necessary, commercially available plastic cleaner. Use commercially available plastic cleaners to clean the electrical components.

The chair may not be cleaned in washing facilities, by means of spray lances or a high-pressure cleaner or water jet.

6.2 Disinfection

For wipe and spray disinfection, the disinfectants can be used in their intended concentration. The dilution ratio recommended by the manufacturers in the respective instructions must be observed.

NOTE

The concentrations indicated should not be exceeded or undershot. Under no circumstances may the user add cleaning agents such as soap or detergents to a disinfectant at his own discretion. Do not allow the disinfectant to penetrate into the upholstery beyond the prescribed contact time. Disinfectants are aggressive and can change the surface.

DANGER**Fire and explosion hazard due to wiping / spraying disinfection containing alcohol**

There is a fire and explosion hazard when wiping or spraying disinfectants containing alcohol when used over large areas.

TROUBLESHOOTING**7 Troubleshooting**

The chapter troubleshooting contains information about possible malfunctions that can be corrected by the user.

TIP The use of specially trained and instructed service personnel is neither necessary nor intended for troubleshooting.

Safety Instructions for Troubleshooting**DANGER****Fatal risk of electric shock**

Under no circumstances may the user attempt to rectify faults in electrical components.

In the event of a defect, the chair must be disconnected from the mains. Mark the chair as defective and separate it. A new use may only take place after prior, proper repair by specialist personnel.

General troubleshooting tips

TIP Before each troubleshooting, check whether the chair is connected to the mains (mains plug in a live socket).

Voltage test for everyone

At the appropriate mains outlet, perform a simple test with another functioning electrical device. Device works when switched on - mains voltage is present. Device does not function when switched on - no mains voltage is present.

When the chair is connected to the mains and the hand control is enabled with the magnetic key, the green operation control LED (2) lights up to indicate that the chair is ready for operation (see Unlocking and locking the hand control).

TROUBLESHOOTING CONTINUED**7.1 Initializing of actuators**

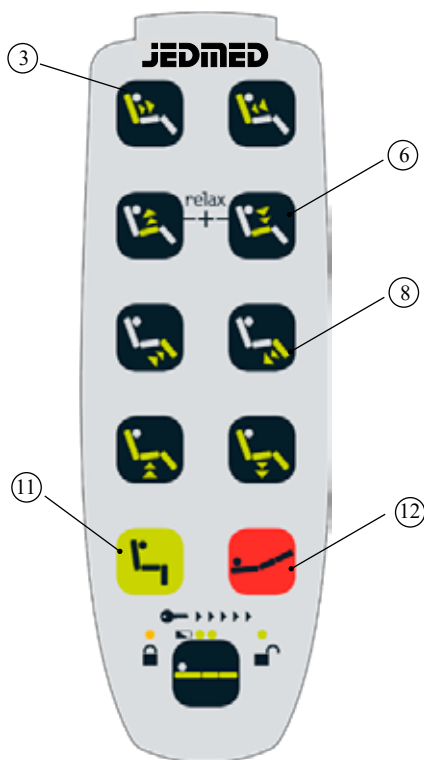
If a signal sounds when the buttons on the hand control (see Hand control) are pressed to adjust the backrest, seat inclination or leg section, the control unit does not know the current position of the corresponding actuator. In this case, you must move the affected actuator completely to the end position indicated below. Do not press any other keys until the process is complete.

Carry out the initialization as follows

- Raise the backrest completely (3)
- Swivel the seat all the way down (6)
- Swivel the leg section all the way down (8)

The signal tone stops and the current position of the corresponding actuator is reinitialized. The actuator is ready for operation again.

TIP First bring the chair completely into the shock position (Trendelenburg position) (12) (see Shock position). Immediately afterwards, move the chair completely to the basic position (11) (see Basic position) - safely initializes any faulty actuator(s). This procedure is only recommended for an occupied chair.



- 3. Backrest - up
- 6. Seat inclination - down
- 8. Leg section - down
- 11. Basic position
- 12. Shock position (Trendelenburg position)

TROUBLESHOOTING CONTINUED**7.2 Control unit RESET**

Fluctuations in the mains voltage or similar can lead to the control unit of the chair no longer reacting to the activation of any buttons on the hand control (see Hand control) and a pulsing signal tone being heard. In this case, the control unit must be "RESET".

Carry out the control RESET as follows:

- Press and hold the two top buttons (3) and (4) simultaneously. After a short time, a pulsating signal tone sounds.
- Continue to press and hold the two buttons until the sound stops.

A "RESET" has been carried out on the control unit and the chair is ready for operation again.

TIP In some cases, the actuators may have been reinitialized after a "RESET" of the control unit (see Initialization of actuators).



- 3. Backrest - up
- 4. Backrest - down

TROUBLESHOOTING CONTINUED**7.3 Troubleshooting table**

The following table provides assistance in remedying malfunctions.

Electrical Malfunctions

Problem / Condition	Possible Cause	Solution
Chair completely without electrical function	Quick-change battery not inserted properly Quick-change battery discharged Defective hand control, quick-change battery or control unit	Properly insert the quick-change battery. The green or yellow operating control LED on the hand control must light up. Charge the quick-change battery or replace it with a fully charged battery. Inform the operator for intensive inspection during repair. If necessary, replace the hand control, quick-change battery or control unit
Green mains power indicator LED [ON] on the charger unit does not light up	Socket without mains voltage Mains cable or plug defective Defective charger unit [COBO]	Use an intact mains socket Inform the operator for intensive inspection during repair If necessary, replace the mains cable or charger unit [COBO]
Yellow charge LED [CHARGE] on the charger unit [COBO] does not light up during charging	Quick-change battery not inserted properly Defective quick-change battery Defective charger unit [COBO]	Insert the quick-change battery properly Inform the operator for intensive inspection during repair If necessary, replace the charger unit [COBO]
Hand control without function	Hand control locked Defective hand control	Unlock the hand control Inform the operator for intensive inspection during repair If necessary, replace the hand control
Foot switch without function	Hand control locked (the corresponding function of the foot switch is also locked) Defective foot switch	Unlock the hand control Inform the operator for intensive inspection during repair If necessary, replace the foot switch

TROUBLESHOOTING CONTINUED**Electrical Malfunctions**

Problem / Condition	Possible Cause	Solution
Operation with sufficient charge is only possible for a short time	Quick-change battery life limit reached	Inform the operator for intensive inspection during repair If necessary, replace the quick-change battery
Although the quick-change battery is perfectly charged, operation is not possible	Control unit has switched off due to overheating Defective control unit	Max. duty cycle: OP: 2 / 18 min note Inform the operator for intensive inspection during repair If necessary, replace the control unit
Actuator only starts briefly, then stops	Actuator overloaded	Remove overload Retest
An acoustic signal sounds when the actuators for the backrest, seat inclination or leg section are activated	The control unit does not have the current position of the corresponding actuator	Recalibrate the actuator(s)
The control unit does not respond and a pulsing signal tone sounds when any button on the hand control is pressed	Fluctuations in the mains voltage etc. lead to a total failure of the unit	Carry out a "RESET" of the control unit

Mechanical Malfunction

Problem / Condition	Possible Cause	Solution
Central locking of the 4 casters does not function properly	Defective caster(s) Brake linkage bent or defective	Inform the operator for intensive inspection during repair If necessary, replace the caster(s)

NOTES



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