

ADVANCED PROFILING BED

# **Total Lift Bed™**

Upright positioning in bed for highly dependent patients



# Progressive upright positioning at the touch of a button

Prolonged bed rest and immobility of critically ill patients can lead to severe physical deconditioning, significant loss of muscle mass and increased muscle weakness that can result in extended time spent in both the ICU and the hospital.<sup>1</sup> Recognition of the long term physical and psychological

consequences of prolonged immobility has resulted in early mobilisation being advocated for ICU patients.<sup>2</sup>

While early standing and weight bearing is a desirable goal, achieving this consistently with critically ill patients can be a challenge for caregivers.



#### Patented weight bearing control system

As the bed tilts the change in weight bearing achieved by the patient is displayed on the Foot Lifter footboard. This visual feedback helps caregivers to monitor progress, and set milestones against rehabilitation and mobility objectives.

#### Flexible positioning

In addition to progressive standing and weight bearing, the Total Lift Bed offers flexible patient positioning to help with care procedures and patient mobilisation. It also allows for Tredelenburg position which provides head down positioning for selected care procedures.

#### Skin protection

The integrated five zone pressure redistribution surface provides caregivers with a choice of low air loss or alternating pressure options to help in the prevention and management of pressure injury. Mattress firmness can be altered using the comfort controls.

#### In bed chair position

The in bed chair facility helps orientate the patient to a more upright position with legs down between standing episodes. The foot board's position can be adjusted from the handset to accommodate different patient needs.



Using only one or two caregivers, the Total Lift Bed<sup>™</sup> can progressively move patients to full standing and weight bearing to aid rehabilitation early in the acute phase of critical illness.

#### Complying with early mobility protocols

Without leaving the bed patients who need a graded transition from bed rest to supporting their full body weight, can be progressively moved to the standing position.

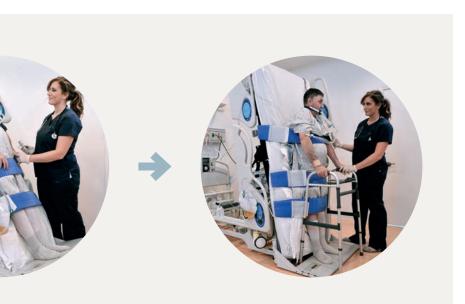
#### Patented Foot Lifter™ Footboard

When the tilt function is activated, the patented Foot Lifter moves towards the patient's feet. When contact is made the

bed begins gently tilting to the desired angle or weight bearing ratio while maintaining the patient in position to help avoid the need for repositioning. The Foot Lifter will automatically adjust to become flush with the floor for patient egress from the bed if appropriate.

# Securing the patient during movement and while standing

A flexible strap system helps secure the patient in position during movement to the upright position.





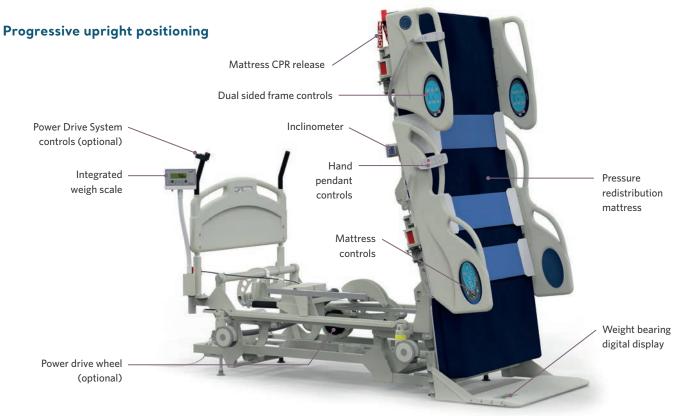
## Synergy: Total Lift Bed and Sara Combilizer®

Early in bed tilting and standing can be enhanced with daily out of bed tilting, standing and chair position sessions with Sara Combilizer.

Moving patients out of bed helps generate many positive psychological benefits as patients and their families perceive progress towards life outside ICU.



Arjo Sara Combilizer



### **Specifications**

TECHNICAL INFORMATION	
Length	
Overall length (in regular position)	85.83 in (218 cm)
Overall length - Fully extended (foot lifter out)	89.76 in (228 cm)
Width	
Overall width - With side rails	40.95 in (104 cm)
Height	
Low position – deck to floor	20.67 in (52.5 cm)
High position - deck to floor	29.72 in (75.5 cm)
From top of bed to floor (standing position)	80 in (204 cm)
Clearance	
From under frame to floor	1.38 in (3.5 cm)
Caster diameter	5 in (12.7 cm)

#### FOOT LIFTED

Moves over mattress 7.9 in (20 cm) towards Head Rest

Moves out of bed - 3.95 in (10 cm)

Moves up in chair position until contact with feet or max of 7.9 in (20 cm).

Safe working load is 616 lb (280 kg)

Max patient weight capacity is 425 lb (193 kg)

#### **Standards**

CE according to MDD 93/42 EEC, IEC 60601-1 3rd Ed. IEC 60601-2-52, IEC606-1-6, IEC62366, FDA Registration (CFR21 Part 820).

#### References:

- 1. Truong AD, Fan E, Brower RG, Needham DM. Mobilizing patients in the intensive care unit from pathophysiology to clinical trials. Crit Care. 2009;13:216.
- 2. Morris PE, Goad A, Thompson C, et al: Early intensive care unit mobility therapy in the treatment of acute respiratory failure. Crit Care Med. 2008;36(8):2238-2243.

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At Arjo, we believe that empowering movement within healthcare environments is essential to quality care. Our products and solutions are designed to promote a safe and dignified experience through patient handling, medical beds, personal hygiene, disinfection, diagnostics, and the prevention of pressure injuries and venous thromboembolism. With over 6000 people worldwide and 60 years caring for patients and healthcare professionals, we are committed to driving healthier outcomes for people facing mobility challenges.

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