

5000 and 5000+ Ultra-Low Beds



medstrom
healthcare

SPECIALIST PRODUCTS • UNIQUE SERVICES

Improving outcomes in the patient environment

Caring for vulnerable patients

Falls and fractures are a common and serious problem affecting older patients, with over 250,000 falls and more than 1,000 fractures reported each year from hospitals in England and Wales alone. Indeed, inpatient falls are now the most commonly reported patient safety incident¹. With the significant associated personal and financial consequences, reducing the incidence of falls in hospitals is an important concern for patients, carers, providers and commissioners of NHS care. Falls prevention is a complex issue crossing the boundaries of health and social care, public health and accident prevention. The vision of a falls prevention programme is to reduce harm from falls without compromising dignity, independence and rehabilitation.

KEY FACT:

The direct cost of falls in hospitals is around £15 million a year, which is equivalent to approximately £92,000 for an 800-bed acute hospital trust.³

Effective Falls Prevention

A significant number of falls result in death or severe or moderate injury, and a significant number of falls in the hospital environment occur when the patient is trying to mobilise around the bed space.

Medstrom's focus is to select the most appropriate range of bed platforms to help prevent falls and patient injury. This bed will lower to an ultra-low height from the floor, a feature that offers several benefits to the patient and caregiver. Patients who are restless, confused and vulnerable whilst in the bed and are at risk of falling out the bed can be nursed at a lower height than any other hospital bed on the market, thus ensuring that risk of injury is minimised.

KEY FACT:

22% of patients who fall in hospital do so from their bed.⁴

Patients in today's healthcare arena are older and more vulnerable, yet clinicians still want to get patients mobilised at the earliest opportunity. The 5000 and 5000+ offer a platform that is low enough to create a safe environment that will encourage independent and safe mobilisation without the risk of falls.

- The 5000 range of beds can be positioned at the appropriate height for the mobilisation of every patient
- The range is capable of achieving an ultra-low sleep deck height of just 21cm. This ensures that should a patient fall from the bed, the potential for injury is significantly reduced
- The 5000 range will alarm 3cm before reaching its lowest height to enhance patient and caregiver safety
- The bed can also be easily pre-set to achieve a customised height that will suit each individual patient's needs. This ensures an accurate 'stop' at the right height, ensuring the patient's feet are on the floor, further enhancing patient safety when carers are not present

KEY FACT:

More than 2,500 hip fractures occurred during a hospital stay in 2012–13.²

Safer patient positioning

To prevent nosocomial infections it is important that the patient is mobilised both in the bed and out of the bed. It is well documented that head of bed positioning will prevent nosocomial pneumonia, therefore achieving the correct head of bed angle is vital. The 5000 and 5000+ incorporate a 'Safe Stop' positioning feature, eliminating the need for bending to check angle indicators and for guesswork.

- The backrest will automatically pause at the two most clinically beneficial positions of
 - **30° of head elevation**, allowing greater residual capacity of the lungs and therefore improving oxygenation levels. It will also enhance the wellbeing of a patient who is recovering after surgery or someone who has been very ill
 - **45° of head elevation**, a semi-recumbent position that enhances respiratory function, well-being and promotes the feeling of progress in mobilisation for the patient
- The electric backrest moves with an elliptical motion, providing 23cm of extension. This fully accommodates the lengthening of the patient's spine, eliminating patient migration and the risk of tissue damage from shear and friction⁷
- Trendelenburg and reverse Trendelenburg have an automatic 'back to flat' feature that removes guesswork, the need for angle indicators and unnecessary bending for caregivers
- A full cardiac chair position can be achieved via just one button operation. This position is a very important part of any patient's progress when mobilising. Often in busy clinical settings there are not enough nurses to assist patients into a chair, or there are simply not enough chairs. This stage of mobilisation is a key part of recovery – the earlier this is achieved the earlier patients will stand, then walk. This has obvious benefits for well-being, patient psychology and earlier discharge from hospital

- The 5000 and 5000+ incorporate a bed extension of 18cm as standard, allowing a greater range of patients to be safely nursed on the bed

NEW! 5000+, incorporating innovative split side rail design

The new, ergonomic split side rail design helps to maintain the safety of the patient without them feeling enclosed in the bed. The design of this new split side rail is key when helping the patient to safely mobilise from the side of the bed.

Split side rails can contribute to patient safety and falls prevention by enabling a useful directional prompt to be given if one rail is lowered on the side nearest to the bathroom. This can be particularly helpful for patients with cognitive impairment⁵.

The split side rails can be lowered smoothly with a dampened action and can either be raised and locked into place silently e.g. to accommodate patients who are sleeping or if a little more force is applied, a positive 'lock' sound will be heard.

Padded side rail covers are available to purchase as an option.

Platform technology across the range

The range of electric profiling beds incorporate platform technology with common functionality and controls. This delivers benefits for caregivers in terms of reducing the risks associated with medical device use through simplicity, familiarity and more standardised training. It can also deliver benefits in terms of reduced maintenance costs and down-time.

Create a safe environment that encourages independent mobilisation



Ultra-low height from just 21cm minimises potential for injury from falls.



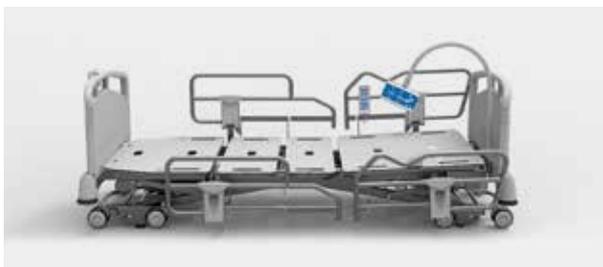
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Innovative split side rail design of the 5000+ maintains patient safety in bed and aids safe mobilisation from the side of the bed.



Four rail long folding side bars on the 5000 ensure patient safety even with deep therapy mattresses.



A custom height can be programmed for each patient to promote safe mobilisation.

KEY FACT:

A nine year study was conducted⁶ at the Northern Hospital in Victoria, Australia into the associations between the occurrence of serious fall-related injuries and the implementation of ultra-low beds. Serious fall-related injuries declined significantly throughout the period. When there was one ultra-low bed to nine or more standard beds there was no statistically different decrease in serious fall-related injuries.

However, a significant reduction did occur when there was one ultra-low bed to three standard beds.

Achieve safe and easy patient positioning, enhancing patient wellbeing



The backrest automatically pauses at the 'Safe Stop' head of bed angles of 30° and 45°, ensuring effective patient positioning for improved respiratory function and removing the need for guesswork.



The backrest regresses as it lifts to 70°, lengthening the platform by 12cm, which reduces slipping thus reducing shear and friction and maximising comfort.



A chair position can be easily achieved using one button. Manual adjustment of the calf section can enhance this position. This is an important first step towards early mobilisation.



Full cardiac chair position can then be achieved by using the same button. This is an important first step towards early mobilisation and helps patient wellbeing and psychology and further supports pulmonary function.



Trendelenburg and reverse Trendelenburg (-/+14°) has an automatic 'back to flat' feature, avoiding guesswork and the need for the caregiver to bend.



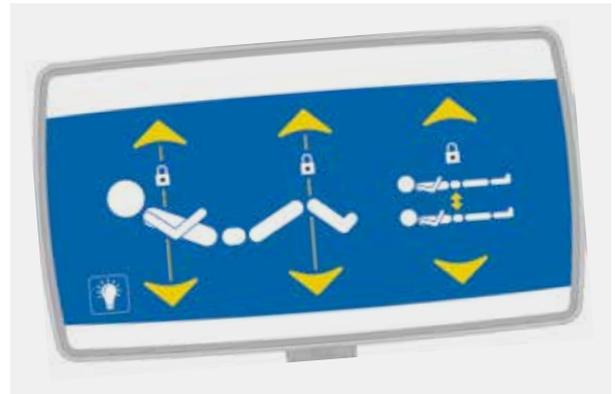
Electric CPR returns the patient quickly and smoothly to a position where cardiopulmonary resuscitation can be performed.

Simple and easy to use



Standardised controls across the entire range promotes familiarity and assists with caregiver training. The intuitive five-function hand control is simple to operate and encourages patient independence. Functions may be locked-out as required.

A patient handset and caregiver control are available as options.



Patient handset (top) and caregiver control panel (bottom) available as options.



Easy to use bilateral, manual CPR function in addition to electric option.



Two x twin 100mm castor design ensures smooth and easy movement of the bed even over uneven surfaces.



Excellent access for all designs of hoist.

Easy to clean



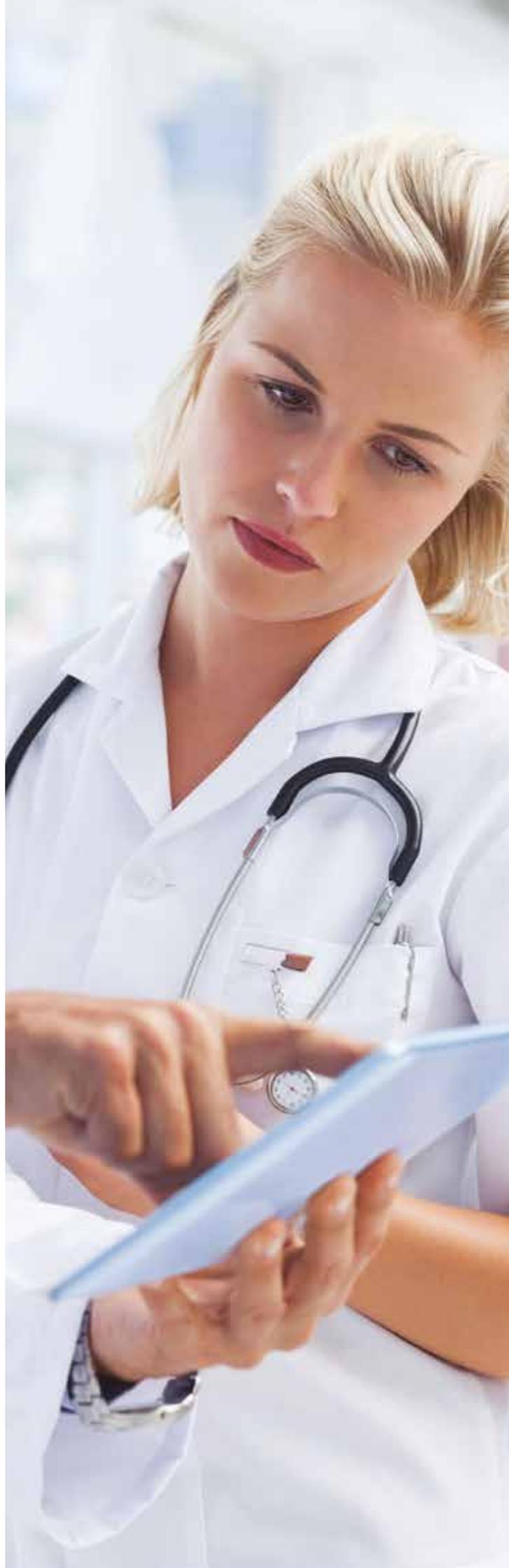
The plastic head and footboards and HPL sleep deck panels can be easily removed for cleaning.



The powder coated frame has an open design, giving superior access for cleaning.



High height of 83cm facilitates easy cleaning under the bed.



Technical Specification

Dimensions

Dimensions of sleep deck:	85cm x 200cm (218cm extended)
Dimensions of bed frame:	99.9cm x 214cm (236cm extended)
Minimum height (from top of sleep deck):	21cm
Maximum height (from top of sleep deck):	83cm
Safe working load:	250kg (215kg patient, 35kg mattress + accessories)
Electric, shear-reducing back angle adjustment:	to 70°
Electric thigh section angle adjustment:	to 30°
Manual calf section angle adjustment:	-20° to 20°
Electric Trendelenburg/ reverse Trendelenburg angle:	14°
CPR:	Electric, bi-lateral manual with dampened action
Headboards & Footboards:	Plastic, removable, tool-free
Weight 5000:	127kg
Weight 5000+:	136kg
Warranty:	10 years. Five years on motors and electrical components.

Options & Accessories:

- Caregiver control panel, five functions
- Night light (located under bed)
- Padded covers for side rails
- Patient helper
- Oxygen bottle holder
- IV poles
- Catheter bag holder

References

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