















Therapeutic Support Surface: Advanced Integrated Bed System Key Points	Therapulse ATP		
## For more detailed information and instructions refer to User Manual. ## To be discontinued and removed from rental fleet in 2023. Replace with Citadel and Skin IQ. ## Powered, integrated bed system with 4 air suspension zones. ## Advanced support surface ## Weight capacity: 136 kg (300 lb) ## Provides active support in addition to: ## Reduced friction and shear. ## Microdimate management. ## Continuous lateral rotation therapy up to 20° for comfort only (NOT for off-loading). ## Puls attorn therapy may reduce edema (NOT for off-loading). ## Puls attorn therapy may reduce edema (NOT for off-loading). ## Bedframe allows for chair position but NO chair egress. ## Bed exit alam. ## Integrated scale. ## Built in warmer. ## Powered transport. ## Patients with pressure injury (excluding heels) and 0-1 intact turning surfaces. ## Patients with severe or extensive burns, skin grafts or flaps. ## Patients with severe or extensive burns, skin grafts or flaps. ## Patients with edema may benefit from microdimate management. ## Patients with edema may benefit from pulsation therapy. ## Patients with edema may benefit from pulsation therapy. ## Patients with edema may benefit from pulsation therapy. ## Patients with edema may benefit from pulsation therapy. ## Patients with edema may benefit from pulsation therapy. ## Patients with edema may benefit from pulsation therapy. ## Patients with edema may benefit from pulsation therapy. ## Patients with edema may benefit from pulsation therapy. ## Patients with edema may benefit from pulsation therapy. ## Patients with edema may benefit from pulsation therapy. ## Patients with edema may benefit from pulsation therapy. ## Patients with edema may benefit from pulsation therapy. ## Patients with edema flated. ## Patients with ede	Classification	•	
Powered, integrated bed system with 4 air suspensionzones. Advanced support surface Weight capacity: 136 kg (300 lb) Provides active support in addition to: Reduced friction and shear. Microdimate management. Continuous lateral rotation therapy up to 20° for comfort only (NOT for off-loading). Turn assist turns and hold patient for provision of care (NOT for off-loading). Bedframe allows for chair position but NO chair egress. Seat deflate. Deflatable head cushion. CPR quick deflate. Bed exit alarm. Integrated scale. Built in warmer. Powered transport. Indications Patients with pressure injury (excluding heels) and 0-1 intact turning surfaces. Patients with severe or extensive burns, skin grafts or flaps. Patients with bedema may benefit from microdimate management. Patients with edema may benefit from pulsation therapy. Patients unable to reposition themselves may benefit from continuous lateral rotation therapy for comfort. Turn assist may be beneficial for staffif patient is unable to assist and hold turns for care. Consult OT / PT / NSWOC if under consideration for use outside of critical care unit. Caution with sharp objects as may puncture surface. No stability at edge, consider others surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Discontinuation of Therapy The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed.		For more detailed information and instructions refer to User Manual.	
Advanced support surface Weight capacity: 136 kg (300 lb) Provides active support in addition to: Reduced friction and shear. Microclimate management. Contrinuous lateral rotation therapy up to 20° for comfort only (NOT for off-loading). Turn assist turns and hold patient for provision of care (NOT for off-loading). Pulsation therapy may reduce edema (NOT for off-loading). Bedframe al lows for chair position but NO chair egress. Seat deflate. Deflatable head cushion. CPR quick deflate. Bed exit alarm. Integrated scale. Built in warmer. Powered transport. Indications Patients with pressure injury (excluding heels) and 0-1 intact turning surfaces. Patients with pressure injury (excluding heels) and 0-1 intact turning surfaces. Patients with noisture issues may benefit from microclimate management. Patients with edema may benefit from microclimate management. Patients with edema may benefit from pulsation therapy. Patients unable to reposition themselves may benefit from continuous lateral rotation therapy for comfort. Turn assist may be beneficial for staffif patient is unable to assist and hold turns for care. Precautions Consult OT / PT / NSWOC if under consideration for use outside of critical care unit. Caution with sharp objects as may puncture surface. No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Corrical traction of any type. Skel etal traction in continuous lateral rotation mode. Should not be used with full length oxygen tents. Support surface is discontinued or stepped down when: The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed.		·	
Weight capacity: 136 kg (300 lb) Provides active support in addition to:		·	
Provides active support in addition to: Reduced friction and shear. Microdimate management. Continuous lateral rotation therapy up to 20° for comfort only (NOT for off-loading). Turn assist turns and hold patient for provision of care (NOT for off-loading). Bedframe allows for chair position but NO chair egress. Seat deflate. Deflatable head cushion. CPR quick deflate. Bed exit alarm. Integrated scale. Built in warmer. Powered transport. Indications Patients with pressure injury (excluding heels) and 0-1 intact turning surfaces. Patients with severe or extensive burns, skin grafts or flaps. Patients with moisture issues may benefit from microdimate management. Patients with dedma may benefit from pulsation therapy. Patients with dedma may benefit from pulsation therapy. Patients with dedma may benefit from pulsation therapy. Precautions Precautions Consult OT / PT / NSWOC if under consideration for use outside of critical care unit. Caution with sharp objects as may puncture surface. No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensures ide rails are outside of half-bed length oxygen tent. Contraindications Discontinuation of Therapy The patient's pressure injury has healed to a point where active therapy is not needed. The patient's pressure injury has healed to a point where active therapy is not needed.		··	
Reduced friction and shear. Microclimate management. Continuous lateral rotation therapy up to 20° for comfort only (NOT for off-loading). Turn assist turns and hold patient for provision of care (NOT for off-loading). Pulsation therapy may reduce edema (NOT for off-loading). Bedframe allows for chair position but NO chair egress. Seat deflate. Deflatable head cushion. CPR quick deflate. Bed exit alarm. Integrated scale. Built in warmer. Powered transport. Patients with pressure injury (excluding heels) and 0-1 intact turning surfaces. Patients with pressure injury (excluding heels) and 0-1 intact turning surfaces. Patients with roisture issues may benefit from microclimate management. Patients with edema may benefit from pulsation therapy. Patients with edema may benefit from pulsation therapy. Patients unable to reposition themselves may benefit from continuous lateral rotation therapy for comfort. Turn assist may be beneficial for staff if patient is unable to assist and hold turns for care. Precautions Consult OT / PT / NSWOC if under consideration for use outside of critical care unit. Caution with sharp objects as may puncture surface. No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Corrical traction of any type. Skeletal traction in continuous lateral rotation mode. Should not be used with full length oxygentents. Discontinuation of Therapy The patient's pressure injury has healed to a point where active therapy is not needed.			
Microclimate management. Continuous lateral rotation therapy up to 20° for comfort only (NOT for off-loading). Turn assist turns and hold patient for provision of care (NOT for off-loading). Pulsation therapy may reduce edema (NOT for off-loading). Bedframe allows for chair position but NO chair egress. Seat deflate. Deflatable head cushion. CPR quick deflate. Bed exit alarm. Integrated scale. Built in warmer. Powered transport. Indications Patients with pressure injury (excluding heels) and 0-1 intact turning surfaces. Patients with severe or extensive burns, skin grafts or flaps. Patients with moisture issues may benefit from microclimate management. Patients with edema may benefit from pulsation therapy. Patients with edema may benefit from pulsation therapy. Patients with be beneficial for staffif patient is unable to assist and hold turns for care. Precautions Precautions Consult OT/PT/NSWOC if under consideration for use outside of critical care unit. Caution with sharp objects as may puncture surface. No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Contraindications Discontinuation of Therapy The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's Braden Score has improved and a point where active therapy is not needed.			
Continuous lateral rotation therapy up to 20° for comfort only (NOT for off-loading). Turn assist turns and hold patient for provision of care (NOT for off-loading). Pulsation therapy may reduce edema (NOT for off-loading). Bedframe allows for chair position but NO chair egress. Seat deflate. Deflatable head cushion. CPR quick deflate. Bed exit a larm. Integrated scale. Built in warmer. Powered transport. Patients at high risk (Braden Score 10-12) or very high risk (Braden Score 9 or less) for pressure injury. Patients with pressure injury (excluding heels) and 0-1 intact turning surfaces. Patients with severe or extensive burns, skin grafts or flaps. Patients with with edema may benefit from microclimate management. Patients unable to reposition themselves may benefit from continuous lateral rotation therapy for comfort. Turn assist may be beneficial for staffif patient is unable to assist and hold turns for care. Precautions Consult OT / PT / NSWOC if under consideration for use outside of critical care unit. Caution with sharp objects as may puncture surface. No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Unstable cervical / thoracic / lumbar fractures. Cervical traction of any type. Skeletal traction in continuous lateral rotation mode. Should not be used with full length oxygen tents. Discontinuation of Therapy The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's Braden Score has improved and an advanced support surface is not longer necessary.			
Turn assist turns and hold patient for provision of care (NOT for off-loading). Puls ation therapy may reduce edema (NOT for off-loading). Bedframe allows for chair position but NO chair egress. Seat deflate. Deflatable head cushion. CPR quick deflate. Bed exit al arm. Integrated scale. Built in warmer. Powered transport. Patients at high risk (Braden Score 10-12) or very high risk (Braden Score 9 or less) for pressure injury. Patients with pressure injury (excluding heels) and 0-1 intact turning surfaces. Patients with severe or extensive burns, skin grafts or flaps. Patients with moisture issues may benefit from microclimate management. Patients with dedema may benefit from pulsation therapy. Patients with edema may benefit from pulsation therapy. Patients unable to reposition themselves may benefit from continuous lateral rotation therapy for comfort. Turn assist may be beneficial for staffif patient is unable to assist and hold turns for care. Precautions Consult OT/PT/NSWOC if under consideration for use outside of critical care unit. Caution with sharp objects as may puncture surface. No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Unstable cervical / thoracic / lumbar fractures. Cervical traction of any type. Skeletal traction in continuous lateral rotation mode. Should not be used with full length oxygen tents. Discontinuation of The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed.			
Pulsation therapy may reduce edema (NOT for off-loading). Bedframe allows for chair position but NO chair egress. Seat deflate. Deflatable head cushion. CPR quick deflate. Bed exit alarm. Integrated scale. Built in warmer. Powered transport. Indications Patients at high risk (Braden Score 10-12) or very high risk (Braden Score 9 or less) for pressure injury. Patients with pressure injury (excluding heels) and 0-1 intact turning surfaces. Patients with severe or extensive burns, skin grafts or flaps. Patients with moisture issues may benefit from microclimate management. Patients with edema may benefit from pulsation therapy. Patients unable to reposition themselves may benefit from continuous lateral rotation therapy for comfort. Turn assist may be beneficial for staffif patient is unable to assist and hold turns for care. Precautions Consult OT / PT / NSWOC if under consideration for use outside of critical care unit. Caution with sharp objects as may puncture surface. No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Unstable cervical / thoracic / lumbar fractures. Cervical traction of any type. Skeletal traction in continuous lateral rotation mode. Should not be used with full length oxygen tents. Support surface is discontinued or stepped down when: The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed.			
Bedframe allows for chair position but NO chair egress. Seat deflate. Deflatable head cushion. CPR quick deflate. Bed exit alarm. Integrated scale. Built in warmer. Powered transport. Patients at highrisk (Braden Score 10-12) or very high risk (Braden Score 9 or less) for pressure injury. Patients with pressure injury (excluding heels) and 0-1 intact turning surfaces. Patients with severe or extensive burns, skin grafts or flaps. Patients with moisture issues may benefit from microclimate management. Patients with moisture issues may benefit from pulsation therapy. Patients unable to reposition themselves may benefit from continuous lateral rotation therapy for comfort. Turn assist may be beneficial for staffif patient is unable to assist and hold turns for care. Precautions Consult OT/PT/NSWOC if under consideration for use outside of critical care unit. Caution with sharp objects as may puncture surface. No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Contraindications Skeletal traction of any type. Skeletal traction in continuous lateral rotation mode. Should not be used with full length oxygen tents. Support surface is discontinued or stepped down when: The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necess ary. The patient's pressure injury has healed to a point where active therapy is not needed.		•	
CPR quick deflate. Bed exit alarm. Integrated scale. Built in warmer. Powered transport. Patients at high risk (Braden Score 10-12) or very high risk (Braden Score 9 or less) for pressure injury. Patients with pressure injury (excluding heels) and 0-1 intact turning surfaces. Patients with severe or extensive burns, skin grafts or flaps. Patients with moisture issues may benefit from microclimate management. Patients with edema may benefit from pulsation therapy. Patients unable to reposition themselves may benefit from continuous lateral rotation therapy for comfort. Turn assist may be beneficial for staffif patient is unable to assist and hold turns for care. Precautions Consult OT/PT/NSWOC if under consideration for use outside of critical care unit. Caution with sharp objects as may puncture surface. No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Unstable cervical / thoracic / lumbar fractures. Cervical traction of any type. Skeletal traction in continuous lateral rotation mode. Should not be used with full length oxygen tents. Discontinuation of Therapy The patient's Braden Score has i mproved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed.		• • • • • • • • • • • • • • • • • • • •	
Bed exit a larm. Integrated scale. Built in warmer. Powered transport. Patients at highrisk (Braden Score 10-12) or very high risk (Braden Score 9 or less) for pressure injury. Patients with pressure injury (excluding heels) and 0-1 intact turning surfaces. Patients with pressure or extensive burns, skin grafts or flaps. Patients with moisture issues may benefit from microclimate management. Patients with edema may benefit from pulsation therapy. Patients unable to reposition themselves may benefit from continuous lateral rotation therapy for comfort. Turn assist may be beneficial for staffif patient is unable to assist and hold turns for care. Precautions Consult OT/PT/NSWOC if under consideration for use outside of critical care unit. Caution with sharp objects as may puncture surface. No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Unstable cervical / thoracic / lumbar fractures. Cervical traction of any type. Skeletal traction in continuous lateral rotation mode. Should not be used with full length oxygen tents. Discontinuation of Therapy The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed.		Seat deflate. Deflatable head cushion.	
 Integrated scale. Built in warmer. Powered transport. Patients at highrisk (Braden Score 10-12) or very high risk (Braden Score 9 or less) for pressure injury. Patients with pressure injury (excluding heels) and 0-1 intact turning surfaces. Patients with severe or extensive burns, skin grafts or flaps. Patients with moisture issues may benefit from microclimate management. Patients with dedema may benefit from pulsation therapy. Patients unable to reposition thems elves may benefit from continuous lateral rotation therapy for comfort. Turn assist may be beneficial for staffif patient is unable to assist and hold turns for care. Precautions Consult OT / PT / NSWOC if under consideration for use outside of critical care unit. Cautionwith sharp objects as may puncture surface. No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Unstable cervical / thoracic / lumbar fractures. Cervical traction of any type. Skel etal traction in continuous lateral rotation mode. Should not be used with full length oxygen tents. Discontinuation The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed. 		CPR quick deflate.	
Built in warmer. Powered transport. Patients at high risk (Braden Score 10-12) or very high risk (Braden Score 9 or less) for pressure injury. Patients with pressure injury (excluding heels) and 0-1 intact turning surfaces. Patients with severe or extensive burns, skin grafts or flaps. Patients with moisture issues may benefit from microclimate management. Patients with edema may benefit from pulsation therapy. Patients unable to reposition themselves may benefit from continuous lateral rotation therapy for comfort. Turn assist may be beneficial for staffif patient is unable to assist and hold turns for care. Precautions Consult OT / PT / NSWOC if under consideration for use outside of critical care unit. Caution with sharp objects as may puncture surface. No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Unstable cervical / thoracic / lumbar fractures. Cervical traction of any type. Skel etal traction in continuous lateral rotation mode. Should not be used with full length oxygen tents. Discontinuation of Therapy The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed.		Bed exit alarm.	
Powered transport. Patients at highrisk (Braden Score 10-12) or very high risk (Braden Score 9 or less) for pressure injury. Patients with pressure injury (excluding heels) and 0-1 intact turning surfaces. Patients with severe or extensive burns, skin grafts or flaps. Patients with moisture issues may benefit from microclimate management. Patients with edema may benefit from pulsation therapy. Patients unable to reposition themselves may benefit from continuous lateral rotation therapy for comfort. Turn assist may be beneficial for staffif patient is unable to assist and hold turns for care. Precautions Consult OT / PT / NSWOC if under consideration for use outside of critical care unit. Caution with sharp objects as may puncture surface. No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Unstable cervical / thoracic / lumbar fractures. Cervical traction of any type. Skeletal traction in continuous lateral rotation mode. Should not be used with full length oxygen tents. Discontinuation of Therapy The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed.			
 Patients at highrisk (Braden Score 10-12) or very high risk (Braden Score 9 or less) for pressure in jury. Patients with pressure in jury (excluding heels) and 0-1 intact turning surfaces. Patients with severe or extensive burns, skin grafts or flaps. Patients with moisture issues may benefit from microclimate management. Patients with edema may benefit from pulsation therapy. Patients unable to reposition thems elves may benefit from continuous lateral rotation therapy for comfort. Turn assist may be beneficial for staffif patient is unable to assist and hold turns for care. Precautions Consult OT/PT/NSWOC if under consideration for use outside of critical care unit. Caution with sharp objects as may puncture surface. No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Unstable cervical / thoracic / lumbar fractures. Cervical traction of any type. Skel etal traction in continuous lateral rotation mode. Should not be used with full length oxygen tents. Support surface is discontinued or stepped down when: The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed. 			
injury. Patients with pressure injury (excluding heels) and 0-1 intact turning surfaces. Patients with severe or extensive burns, skin grafts or flaps. Patients with moisture issues may benefit from microclimate management. Patients with edema may benefit from pulsation therapy. Patients unable to reposition themselves may benefit from continuous lateral rotation therapy for comfort. Turn assist may be beneficial for staffif patient is unable to assist and hold turns for care. Precautions Consult OT / PT / NSWOC if under consideration for use outside of critical care unit. Caution with sharp objects as may puncture surface. No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Unstable cervical / thoracic / lumbar fractures. Cervical traction of any type. Skeletal traction in continuous lateral rotation mode. Should not be used with full length oxygen tents. Discontinuation The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed.			
 Patients with pressure injury (excluding heels) and 0-1 intact turning surfaces. Patients with severe or extensive burns, skin grafts or flaps. Patients with moisture issues may benefit from microclimate management. Patients with edema may benefit from pulsation therapy. Patients unable to reposition themselves may benefit from continuous lateral rotation therapy for comfort. Turn assist may be beneficial for staffif patient is unable to assist and hold turns for care. Precautions Consult OT / PT / NSWOC if under consideration for use outside of critical care unit. Caution with sharp objects as may puncture surface. No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Unstable cervical / thoracic / lumbar fractures. Cervical traction of any type. Skeletal traction in continuous lateral rotation mode. Should not be used with full length oxygen tents. Support surface is discontinued or stepped down when: The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed. 	Indications		
Patients with severe or extensive burns, skin grafts or flaps. Patients with moisture issues may benefit from microclimate management. Patients with edema may benefit from pulsation therapy. Patients unable to reposition themselves may benefit from continuous lateral rotation therapy for comfort. Turn assist may be beneficial for staffif patient is unable to assist and hold turns for care. Precautions Consult OT / PT / NSWOC if under consideration for use outside of critical care unit. Caution with sharp objects as may puncture surface. No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Unstable cervical / thoracic / lumbar fractures. Cervical traction of any type. Skel etal traction in continuous lateral rotation mode. Should not be used with full length oxygentents. Discontinuation of Therapy The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed.			
 Patients with moisture issues may benefit from microclimate management. Patients with edema may benefit from pulsation therapy. Patients unable to reposition thems elves may benefit from continuous lateral rotation therapy for comfort. Turn assist may be beneficial for staffif patient is unable to assist and hold turns for care. Precautions Consult OT/PT/NSWOC if under consideration for use outside of critical care unit. Caution with sharp objects as may puncture surface. No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Unstable cervical / thoracic / lumbar fractures. Cervical traction of any type. Skel etal traction in continuous lateral rotation mode. Should not be used with full length oxygen tents. Support surface is discontinued or stepped down when: The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necess ary. The patient's pressure injury has healed to a point where active therapy is not needed. 			
 Patients with edema may benefit from pulsation therapy. Patients unable to reposition themselves may benefit from continuous lateral rotation therapy for comfort. Turn assist may be beneficial for staffif patient is unable to assist and hold turns for care. Precautions Consult OT/PT/NSWOC if under consideration for use outside of critical care unit. Caution with sharp objects as may puncture surface. No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Unstable cervical / thoracic / lumbar fractures. Cervical traction of any type. Skel etal traction in continuous lateral rotation mode. Should not be used with full length oxygen tents. Support surface is discontinued or stepped down when: The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed. 		- · · · · · · · · · · · · · · · · · · ·	
 Patients unable to reposition thems elves may benefit from continuous lateral rotation therapy for comfort. Turn assist may be beneficial for staffif patient is unable to assist and hold turns for care. Precautions Consult OT / PT / NSWOC if under consideration for use outside of critical care unit. Caution with sharp objects as may puncture surface. No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Unstable cervical / thoracic / lumbar fractures. Cervical traction of any type. Skel etal traction in continuous lateral rotation mode. Should not be used with full length oxygen tents. Support surface is discontinued or stepped down when: The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed. 		•	
for comfort. Turn assist may be beneficial for staffif patient is unable to assist and hold turns for care. Precautions Consult OT / PT / NSWOC if under consideration for use outside of critical care unit. Caution with sharp objects as may puncture surface. No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Cervical traction of any type. Skel etal traction in continuous lateral rotation mode. Should not be used with full length oxygentents. Discontinuation of Therapy The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed.		·	
 Consult OT / PT / NSWOC if under consideration for use outside of critical care unit. Caution with sharp objects as may puncture surface. No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Unstable cervical / thoracic / lumbar fractures. Cervical traction of any type. Skel etal traction in continuous lateral rotation mode. Should not be used with full length oxygen tents. Discontinuation of Therapy The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed. 			
 Caution with sharp objects as may puncture surface. No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Unstable cervical / thoracic / lumbar fractures. Cervical traction of any type. Skel etal traction in continuous lateral rotation mode. Should not be used with full length oxygen tents. Support surface is discontinued or stepped down when: The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed. 		• Turn assist may be beneficial for staffif patient is unable to assist and hold turns for care.	
 No stability at edge, consider other surfaces for those who can roll/sit/transfer from edge of mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Contraindications Unstable cervical / thoracic / lumbar fractures. Cervical traction of any type. Skel etal traction in continuous lateral rotation mode. Should not be used with full length oxygen tents. Support surface is discontinued or stepped down when: The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed. 	Precautions	Consult OT / PT / NSWOC if under consideration for use outside of critical care unit.	
mattress. Stable edge when deflated. Ensure side rails are outside of half-bed length oxygen tent. Ontraindications Unstable cervical / thoracic / lumbar fractures. Cervical traction of any type. Skeletal traction in continuous lateral rotation mode. Should not be used with full length oxygen tents. Discontinuation of Therapy The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed.		Caution with sharp objects as may puncture surface.	
 Ensure side rails are outside of half-bed length oxygen tent. Unstable cervical / thoracic / lumbar fractures. Cervical traction of any type. Skeletal traction in continuous lateral rotation mode. Should not be used with full length oxygen tents. Discontinuation of Therapy The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed. 			
 Contraindications Unstable cervical / thoracic / lumbar fractures. Cervical traction of any type. Skel etal traction in continuous lateral rotation mode. Should not be used with full length oxygen tents. Discontinuation of Therapy The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed. 			
 Cervical traction of any type. Skel etal traction in continuous lateral rotation mode. Should not be used with full length oxygentents. Support surface is discontinued or stepped down when: The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed. 	0		
 Skeletal traction in continuous lateral rotation mode. Should not be used with full length oxygentents. Support surface is discontinued or stepped down when: The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed. 	Contraindications		
 Should not be used with full length oxygentents. Support surface is discontinued or stepped down when: The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed. 		,	
 Support surface is discontinued or stepped down when: The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed. 			
 The features of the support surface are no longer required (e.g. turn assist, pulsation). The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed. 	Discontinuation		
 The patient's Braden Score has improved and an advanced support surface is not longer necessary. The patient's pressure injury has healed to a point where active therapy is not needed. 			
necessary. • The patient's pressure injury has healed to a point where a ctive therapy is not needed.	ото.о.р,		
		· · · · · · · · · · · · · · · · · · ·	
 The patient does not tolerate the surface (e.g. noise, uncomfortable). 		·	
		The patient does not tolerate the surface (e.g. noise, uncomfortable).	
Consider surface with stable edge if client is independently a mbulating.			
Formats & Sizes • Weight Capacity: 136 kg (3001b)	Formats & Sizes		
Mattress & Frame Dimensions:			
Side rails up & frame extended			
(43 x 93 in)			
Side rails down & frame retracted (36.5 x 79 in)			
retracted (36.5 x 79 in) • Low Bed Height: 57 cm (21.5 in)			

















Skin and Wound Product Information Sheet				
Directions	Key Points			
Accessing the Therapulse ATP				
Order rental integrated bed system as per Health Authority process. Bedframe and support surface will be set up based upon the client's pressure redistribution needs by the Arjo Service Technician or as per Health Authority/site protocols.	Rental systems hould be delivered in 4-24 hours of placing the order. Delivery time may vary depending on site distance from warehouse.			
Linen Requirements				
Refer to client specific plan of care for linen needs that may be different than those outlined below.	Clients may have specific linen needs.			
Minimize layers of linen.	Each layer of linen reduces the pressure redistribution effect.			
No fitted or flat bottom sheet. However at patient request, flat sheet may be used.	Bottom sheet (fitted or flat) will decrease immersion and efficacy of microclimate management.			
Repositionings ling as needed. Should be left in place between turns if specifically designed to be left in place. Meshis preferable for microclimate management.	Mesh sling is preferable to promote optimal microclimate management. Not all slings are intended to be left beneath the client between turns.			
Dis posable air permeable linen protector underpad as needed.	Air permeable pad to promote optimal microclimate management.			
Daily Care				
Turn/reposition and offload heels as per care plan. If the mattress surface becomes soiled, cleanse with agency approved cleaner and allow to dry.	Surface does not does not adequately off-load heels nor does it replace turning therefore patients must be turned as per routine/patient specific protocols.			
Verify air pressure settings allow 40% depression into the cushions where patient lies, as shown at right				
Patient Transport Battery Back-up will be activated when power cord is unplugged and will provide up to 2 hours of static air support (pulsation will be suspended).				
Therapulse ATP Functions				
Squeeze red CPR Handle (found at underside of head of bed) to switch air off and to deflate mattress. If head of bed is elevated it will drop a bruptly.	Mattress must be deflated for CPR.			
Press CANCEL CPR on Main Display to inflate cushions and resume bed functions.) C5			
Home Display is found on the Main Control Panel at foot of bed. Home Display is used to access menus and activate/deactivate functions.	- CNURSE ASSIST MENU INSTAFLATES - COULSE ON OFF SEAT DEFLATES - COURM ASSIST! ON OFF HEADERING STATUS - COURM ASSIST! ON OFF STATUS - COURM ASSIST! ON OFF STATUS			
Select MENU on the Home Display to display the Main Menu to access Warmer Menu, Height / Weight Menu, Pulsation Menu, Turn Assist Menu and Time Menu	<pre></pre>			
Select WARMER on the Main Menu to display Warmer Menu to view and adjust Current Status and Warmer Setting.				
Select PULSATION on Main Menu to display Pulsation Menu to view and adjust Current Status, Intensity, Cycle Time, and Pulsation Hour Meter.	Pulsation is deactivated when the following functions are engaged: CPR, use of Scale, Nurse Assist, Instaflate or Seat Deflate, Battery Back-up or Turn Assist.			
Select TURN ASSIST on Main Menu to set Right, Center and Left Turn and Pause Times.	When turn assist is activated Pulsation, is deactivated.			
Select TIMER on Main Menu to access and view Continuous Turn Assist log for total turn hours for each setting.				

















Directions	Key Points
Nurse Assist is accessed by selecting Nurse Assist Menu on Home Display.	CANCEL CANCEL
Select RIGHT ASSIST to turn patient to their right side and hold. Select LEFT ASSIST to turn patient to their left side and hold. Select CANCEL to deactivate Nurse Assist.	When Nurse Assist is activated, Pulsation is deactivated.
Scale is accessed by selecting Scale Menu on Home Display.	SCALE MENU Patient Weight: xxx.xx lb/xxx.xx kg
Select SAVE IN WTTREND to view and enter patient's most recent weight reading into the Weight Trend Chart, with date and time reading was taken.	SAVE IN UT TREND > UT TREND CHART > EXIT >
Select WTTREND CHART to view patient's weight trend chart which shows initial weight and the four most recent weight readings, with date and time each reading was taken.	
Select HEIGHT/WEIGHT on Main Menu to display Height/Weight Menu to set air pressures in each section of cushions based on patient's height and weight.	
Select body image on Home Display to a ccess Air Pressures Display to view a bar graph representation of air pressures in each section of cushions (Head, Back, Seat, Leg). Current status of pulsation is also shown.	Warmer: OFF Pulsation: HI
Target pressure for cushion section based on manual adjustments is indicated by top line in bargraph. Actual air pressure for cushion section is indicated by arrows at edge of bar graph. Target pressure cushion section based on	SCALE CONTRACTOR OF THE PROPERTY OF THE PROPER
height/weight pre-set is indicated by dotted line on bar graph. Press Up or Down arrows to manually increase or decrease target pressure in a section of cushions (Head, Back, Seat, Leg).	
Bed Motion Control Panels are found on side rails.	SIDERAIL BED SIDERAIL CONTROL BED MOTION CONTROL MOTION LOCKOUTS
Press SIDE RAIL CONTROL LIGHTS sequentially to turn Patient Control Panel backlight on low, medium, high and off.	LIGHTS LOCK
Press BED MOTION LOCK to lock out all bed motion functions, including on Patient Control Panel.	OFF OFF
Press SIDERAIL CONTROL LOCKOUTS to lock out Siderail Control for Head Up / Down, Knee Gatch Up / Down, and Bed Up / Down functions.	
Press the appropriate BED POSTIONING BUTTONS to change bed position, including: moving bed up or down, moving bed into or out of Trendelenburg or reverse Trendelenburg, raising and lowering head of bed, raising and lowering knee Gatch.	
The functions below are found on the side rail control panel.	TA SCALE
Press SCALE to display patient weight in the Nurse Display.	
Press BOOST to increase air pressure in all seat cushions.	80031
Press INSTAFLATE to increase air pressure in all cushions to create a firm surface.	INSTALIATE SEAT DEFLATE
Press SEAT DEFLATE to reduce air pressure by 50% in seat section cushions.	ON

















Directions	Key Points		
Press CHAIR (found on side rail control panel) to move the bed into Cardiac Chair position (60 degree Fowlers, 40 degree Knee Gatch and minus 8 degrees Reverse Trendelenburg).	BRANE NOT SET		
 Bed Exit Alarm. Bed Exit Indicator Light illuminates when bed exit alarm is activated. Press Arm to activate bed exit alarm. Be sure to reactivate alarm each time patient returns to bed. Press Disarm to deactivate bed exit alarm. Scale displays hows patient weight and current Trendelenburg angle. Press MENU MODE to access patient weight change option and to view Trendelenburg and Fowler angles. Press TREND/FOWLER ANGLE alternately to display Trendelenburg/Fowler angles when MENU MODE is activated. 	Arm Disarm Bed exitalarm helps to monitor patient exit from bed by detecting dramatic decreases in patient weight.		
 Scale Press SCALE ON/OFF to display current patient weight and to toggle options in MENU MOD. Press ZERO to zero scale. Press CHANGE EQUIP to hold current patient weight during addition or removal of linens, equipment etc. Press LBS/KG to convert weight display from pounds to kilograms. Use as enter button in MENU MODE. 			
Alarms & Alerts			
 An audible alarm will sound when: Patient has exited bed. Press Disarm button Scale Control Panel to silence Exit Alarm. Instaflate or Seat Deflate has been activated. Alarm will sound again when feature has been activated for 20 minutes. Side rail is lowered during Turning Assist. Battery Back-Up is activated. 			
Expected Outcome			
Patient does not develop a pressure injury. Patient's existing pressure injury will heal. Product performs as expected.	If product does not perform as expected notify NSWOC/Wound Clinician and consider submitting a Product Concern form.		
For further information, please contact: OT, PT, NSWOC/ Wound Clinician			