



# VISCOUNT300

## ACTIONASSIST

Specialist beds

Forward Exit

bed





## The concept Forward Exit Bed

Becoming mobile plays an essential role in the complex process of recovery or support of a dependent individual. Being able to get up, sit down and lie down are basic movements of our everyday life.

When everything stops working, a momentary or permanent dependency upon third party support takes over. It becomes crucial to allow an individual to be able to get up easily. It is essential for the person's health and healing or more simply to ensure respect for their dignity.

Care staff are accordingly in great demand for such individuals. Indeed, making a human being mobile, in a careful way, demands high physical effort and time.

Armed with this requirement, and its forever innovative values, EDENA MEDICAL is now entirely reinventing the medical bed to offer you a new concept of assistance for integrated raising.

### TESTIMONIALS FROM MEDICAL

"I have experience in a nursing capacity, but also in providing training in the handling of sick people, individuals with disabilities and older people.

I can thus give my testimonial around the new concept of FORWARD EXIT assistance in getting up, which has been developed by EDENA MEDICAL.

So as to deal with the given sick, aged or disabled individual being bedridden, the carer should, on a daily basis support the individual's autonomy. Such an individual is often, highly immobile and sometimes very heavy, so support should involve stimulating the individual and allowing the person to start undertaking all of his or everyday movements.

Carrying out the setting upright procedure, that is moving a person from the lying down to the sitting position, requires significant muscular work on the part of the caregiver. This may cause, by dint of repetition, serious musculoskeletal disorders and lead to carer sick leave.

Owing to the FORWARD EXIT concept, the individual is safely lifted, towards the front of the bed. Directly achieving the sitting position by a simple use of the remote provided for this purpose facilitates the work of the caregiver, who no longer has to set the person upright. The person is safely in the sitting position, both smoothly and comfortably.

The FORWARD EXIT concept is a real innovation which offers the caregiver and the patient safety, comfort, and respect all improve the quality of care and the relationship between the caregiver and the patient."

Christine D.

Action Assist

ORIGINE  
FRANCE®  
GARANTIE

AFNOR Certification 62368.

# ASSISTING WITH MOBILITY

1  
2  
3

Our studies have led us to conclude that an ideal lift trajectory for the bed must be able to occur in the same way as that when using an armchair, that is to say in the same axis.

There are thus three stages: lying down, sitting and then getting up. Rotating a person manually is a source of pain and backache for caregivers.

The FORWARD EXIT concept makes it possible to attend, without any effort, to the entire process of lifting an individual by naturally accompanying the person in his movements from the lying down position, then the sitting position, to the standing position.

Owing to a highly stable and reliable system, the FORWARD EXIT bed accompanies and allows for potential muscular weaknesses and compensates for balance disorders.

The entire process of getting up happens smoothly, in the greatest possible comfort. The speed of movement of the bed base and moving sections generally is adapted to avoid all risk of orthostatic hypotension. The process of moving from the lying down position to the sitting position thus happens both progressively and smoothly.

GETTING UP BECOMES COMMONPLACE.



## Balance Disorders

Statistics indicate that 90% of individuals over 80 years have a tendency for retropulsion when it is impossible to move to the antepulsion position in order to get up. The large majority of bed-related falls are due to an incorrect assessment of the height of the lying surface whilst getting off the bed, or the instability of the bed itself, in serving as a support for getting off the bed.

Walking and balance disorders.  
Falls by an older person.  
Dr Matthieu DEBRAY - January 2003.

## Muscle Weakness

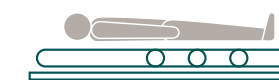
Muscle weakness in the form of tiredness, of musculoskeletal origin, or of neuromuscular origin affects all individuals who are hospitalised and causes difficulties moving. Muscle degeneration amongst bedridden individuals is very quick, all the more so amongst older people who are already weakened.

ROQUELAURE, Y., HA, C., SAUTERON, M. (2005).  
Experimental Epidemiological Disorders  
Monitoring Network  
Musculoskeletal disorders within the Pays de Loire;  
Monitoring companies during 2002,  
NVS. Report

## Orthostatic Hypotension

Orthostatic hypotension is defined by a very rapid decrease in blood pressure when moving from the lying down position to the standing position. It is a significant risk factor in cardiovascular complications. The prevalence of Orthostatic Hypotension is higher than 20% in the over 65s. The preventive measures are, amongst others, sleeping in a half-seated position and getting up by gradually changing positions.

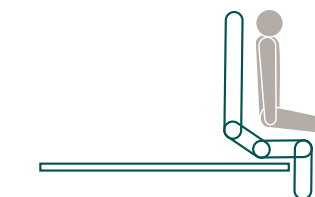
Orthostatic Hypotension Professor Alain FURBER,  
UHC and the University of Angers, 2011.



1  
LYING  
POSITION



2  
INTERMEDIATE  
POSITION



3  
POSITION  
UPRIGHT  
FRONT EXIT



# EVEN MORE AUTONOMY



Handles Ref.: CAL/FE with



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By becoming mobile in an autonomous way, the patient regains their independence slowly whilst facilitating the work of caregivers. The FORWARD EXIT thus empowers the patient to facilitate the care and rehabilitation of their functional capacities.

Brought automatically into the sitting position thanks to FORWARD EXIT, the patient can directly place their feet on the ground, which allows them to go from a sitting to a standing position in a more autonomous and safe way.

The additional FORWARD EXIT accessories with which the individual can support and reposition themselves are actual mobility aids.

Moving from the bed to the armchair position is far simpler. Spacing and distances between the various elements of the bed meet the requirements of safety standards. The bed is designed to avoid all risks of pinching or trapping, in compliance with French electro-medical safety standard NF EN 60601-2-52.



Adjustable sitting height

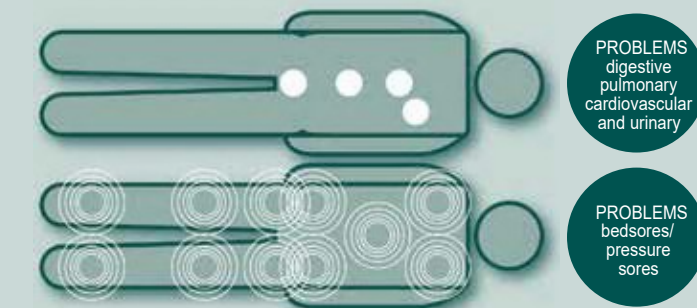
MOVEMENT FROM BED TO ARMCHAIR



## The damaging effects of immobility

Immobility is considered as a major obstacle to patient recovery since it has cardiovascular, bronchopulmonary, urinary and digestive consequences, and effects around the development of bedsores, otherwise known as pressure sores. Immobility thus disrupts the entire human physical equilibrium, aggravating the state of health of the individual, which leads to extended lengths of hospital stay and additional costs.

Study on bedsores, Dr Brigitte BARROIS of the PERSE association, 1998.



PROBLEMS digestive pulmonary cardiovascular and urinary

PROBLEMS bedsores/pressure sores

# FACILITATING CARE AND HANDLING

The FORWARD EXIT system makes it possible to avoid adopting deficient positions when making patients mobile which is the cause of numerous accidents at work.

Thus the automation of the upright, lying down and sitting processes eliminates delicate and painful manual handling being carried out on a daily basis by carer[s].

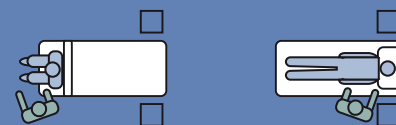
Once the individual is sitting up, it is easy to move them into an armchair or to lay them down with or without the need for technical assistance.

- Moving the patient with the aid of a transfer board.
- Moving the patient with the aid of a handling disc

The FORWARD EXIT concept is a mechanism to aid handling, which contributes to the range of technical aids for the combat the risk of the person lying in bed becoming bedridden.

The potential use of technical aids, such as the lift and the patient hoist, if necessary, is compatible with the FORWARD EXIT.

ACCESS BOTH WITH AND WITHOUT FRONT EXIT



MOVING THE PATIENT WITH A TRANSFER BOARD



MOVING THE PATIENT WITH A TRANSFER DISC



Handling difficulties for providing assistance to help a person get up when using a standard bed.

Helping a person getting up using a traditional medical bed is carried out in one of two ways. It is thus necessary to execute the movement off the patient on the side of the bed from the lying down to the seated position of the patient on the side of the bed. This is complicated, painful and time-consuming.

- 1 Approach the person
- 2 Raise the chest and swivel the person around
- 3 Place the person in the sitting position and support them to stand.



Corpulent patients that are difficult to handle

The percentage of obese and overweight people is forever increasing. In 2011, according to the OECD Organisation for Economic Cooperation and Development) around one person in ten are obese in France, and nearly 40% of the population is overweight.

Thus 79% of caregivers handle heavy patients weighing more than 100 kg up to 10 ten times a day.

BONNETERRE, V., ELHINGER, V., BALDUCCI, F., CAROLY, S., JOLIVET, A., SOBASZEK, A., DE GAUDEMARIS, R. LANG, T. (2009). Measuring organisational constraints among hospital workers. Validation of an extended version of the Revised Nursing Work Index-Organisation: the RNWI-F.

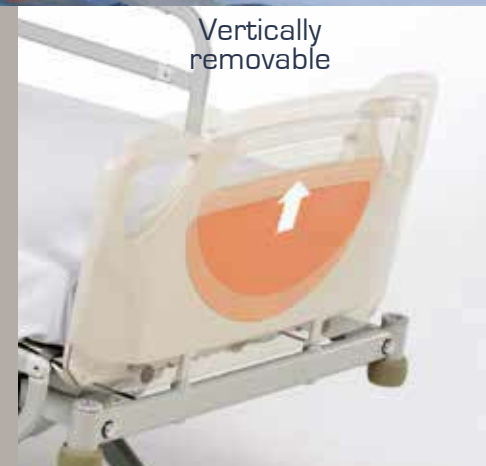
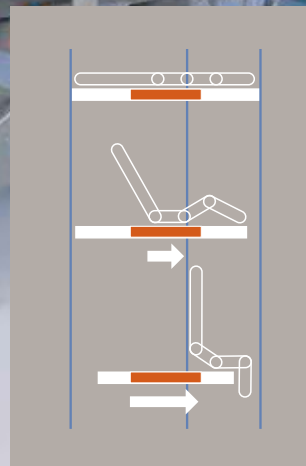


Handling: Cause of MSDs (Musculoskeletal disorders)

Studies indicate that 45% of accidents at work are linked to strain, these being and are "transfer" movements and "on-site handling", which present the greatest degree of risk of injury to the back, shoulders and the neck.

Manutention des patients : ergonomie des équipements et système mes d'aide à la manutention [this translates as "Patient handling: equipment and system ergonomics to assist handling"], BRINON C., 2010.

# OPTIMAL SAFETY



The innovative FORWARD EXIT system favours the patient getting up, via the front of the bed or more simply staying in a comfortable sitting position.

The FORWARD EXIT integrates specific safety measures. A FORWARD EXIT remote control makes it possible to depart from the traditional use of the bed. This makes it possible to allow or disallow its use by the resident.

The FORWARD EXIT system is designed and adapted for smooth lifts and to allow anybody to be handled and to move with a sense of security.

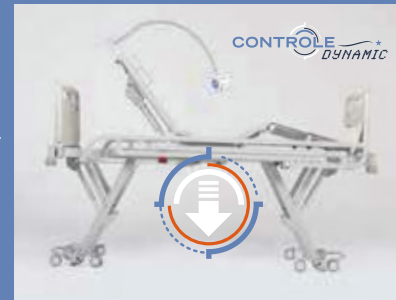
Smoothly brought into the sitting position, without twisting the body, the individual has no risk of falls or orthostatic hypotension. The process of raising the individual happens calmly. The ability to adjust the height of the seating makes it possible for the patient to position their feet perfectly in relation to the floor and to initiate standing up using stable supports, providing a feeling of increased safety.

The FORWARD EXIT bed if used conventionally maintains a position which is exceptionally low at 20 cm from the ground. It thus perfectly meets the necessary safety requirements linked to protecting against the risk of falls by older people and particularly those affected by Alzheimer's Disease.

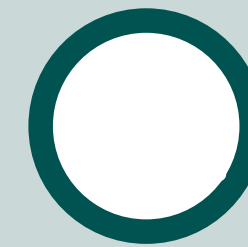
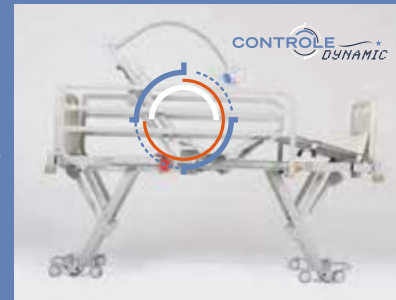
Locking the controls



Speed and safety sensor



Safety side bars



## The Risks of Older People Falling

The risk of falling increases with age and at 80, 50% of people studied fall at least once a year. Indeed 70% of patient in health facilities take place in the bedroom.

## Causes of falls

A total of 52% of falls in the bedroom occur when moving from the bed to the ground. The causes of these falls are due, for 37%, to an inadequate assessment of the height and, for 26% to a height disorientation. These falls lead to pains, sores, sutures and fractures.

Prevention of falls in hospital environments. Pascale LAYAT-JACQUIER and Sylvain GARNIER, 2010.



AFNOR Certification 62366.

# AN ACTUAL SITTING POSITION

As with a real recliner chair, the FORWARD EXIT system allows you to adopt a traditional sitting position, sitting horizontally with the torso in the vertical position.

It is possible to adjust the seat height according to the size of the individual.

This sitting position facilitates feeding and bowel function for those who cannot get up.

It is far simpler and pleasant to watch the television or welcome visitors, have human interaction. Moreover the perception of the person by others is, as a consequence, altered.

This concept, which is particularly innovative on a medical bed, is essential as part of ensuring dependency as it contributes strongly to reducing the apathy phenomena.

The individual can, once again, become involved in what is going on around them.



Maintaining dignity is an essential element of ensuring dependency.

# Control Viscount 300

The Viscount 300 possesses a control specifically dedicated to its operation.

It is different from the traditional remote control.

It is designed to complement the Memo-Control or the satellite control Easy Touch (option) which equips the base of the bed and which allows for its traditional use.

For safety reasons its activation automatically locks basic operation.

Its use may be made accessible or otherwise by a given patient.



## Specific mattress Viscount 300

The unique movements of the Viscount 300 bed necessitates the use of a specific mattress to optimise the resident's use of the bed and their comfort in the best possible conditions. The memory foam mattress is in a form which favours the comfort and the prevention of stage 2



Mattress technical specifications:

**MATTRESS**

- Upper part: visco-elastic foam 80 kg/m<sup>3</sup> - non-flammable M4
- Lower part: foam HR 35 kg/m<sup>3</sup> - non-flammable M4

**COVER**

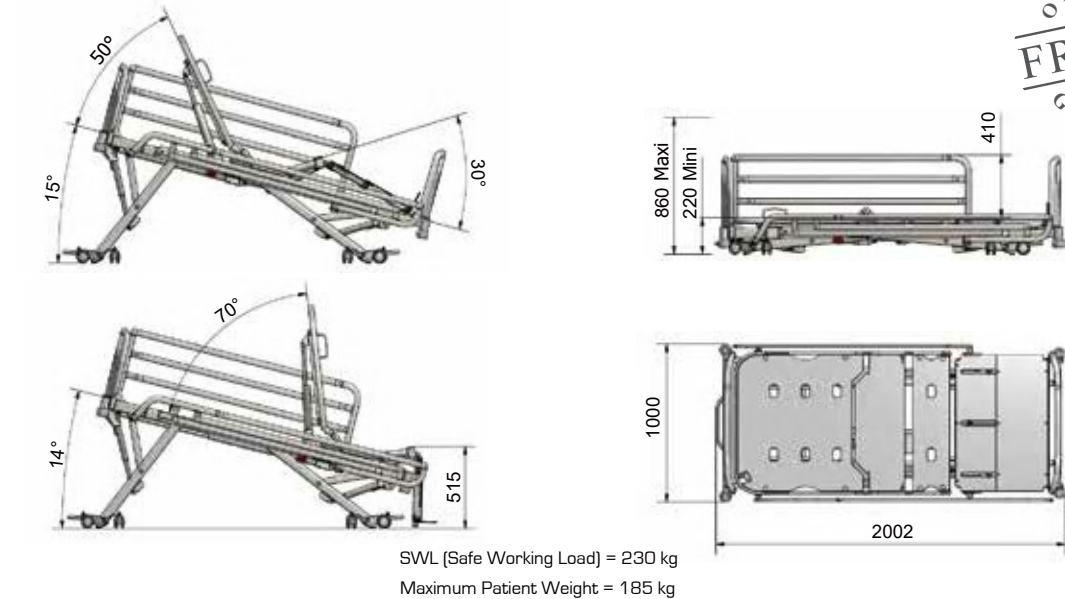
- Type DARTEX - non-flammable M1
- Impermeable to liquids, permeable to air
- Zips on 3 sides with flaps
- Fire standards: EN 597-1 and EN 597-2

**PREVENTION OF BEDSORES**

- Protection level 2 - risk average to high

## Technical Specifications:

Viscount 300 with panels P2 (dimensions mm)	B252A
Mattress Size	900 x 2000
Overall length	2202
Overall length with wall stops	2275
Overall of all PPS Panels with wall stops	2294
Overall width	1000
Lowest maximum position	220
Highest maximum position	860
Maximum head section angle	70°
Maximum head section meal position angle	80°
Maximum knee bend angle	30°
Trendelenburg Angle/Reverse-Trendelenburg Angle	15°
Height of protective side bars when raised from the level of the bed base	410
SWL (Safe Working Load) load for secure operation	230 kg
Maximum patient weight	185 kg



SWL (Safe Working Load) = 230 kg  
Maximum Patient Weight = 185 kg

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## Head & footboard Panel ranges



PPS



P1



P2



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Action Assist - specialist beds supplier



Supplier:  
Action Assist - specialist beds  
Unit 6 Moor Lane T/E  
Sherburn in Elmet  
Leeds, LS254 6ES  
tel: 01977 689400  
fax: 01977 689401

e-mail: [info@actionassist.co.uk](mailto:info@actionassist.co.uk)  
web: [www.actionassist.co.uk](http://www.actionassist.co.uk)