

# MAQUET

Alphaclassic

1118.02

A0/B0/E0/G0/J0/K0

Operating Instructions

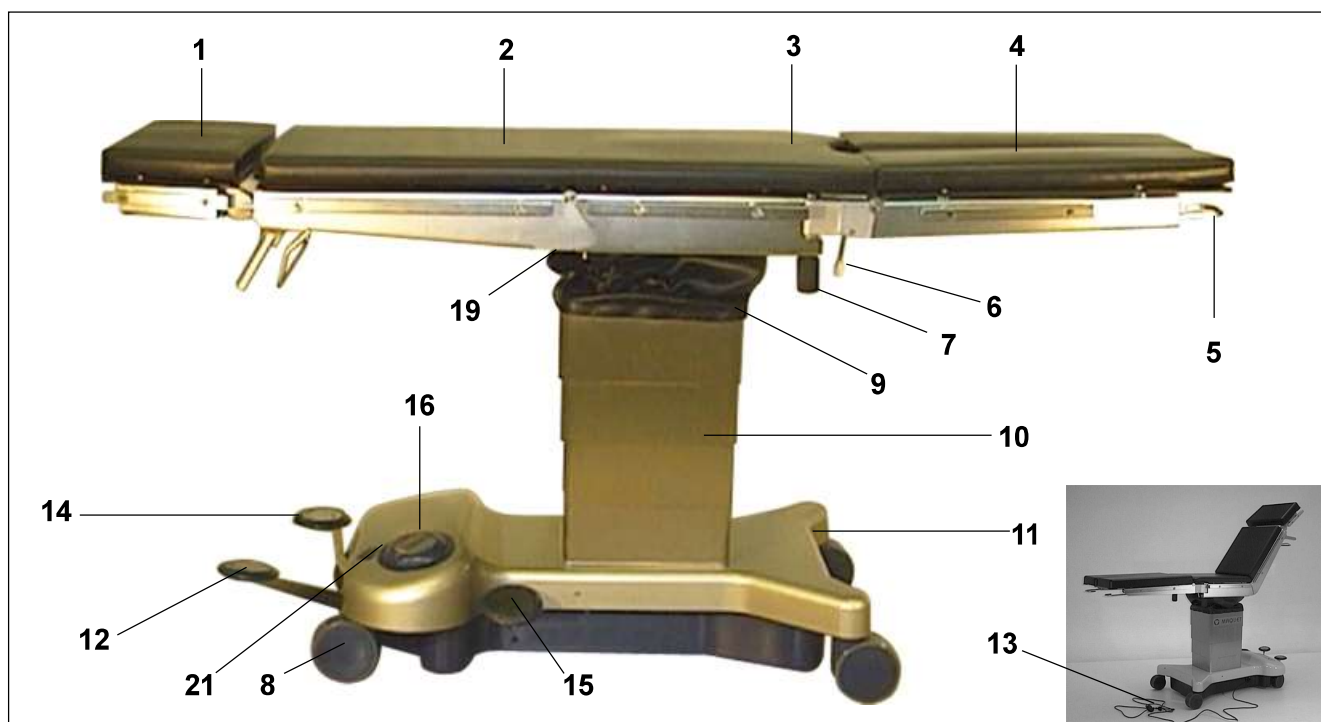
Mobile Operating Table  
for general surgery



Englisch

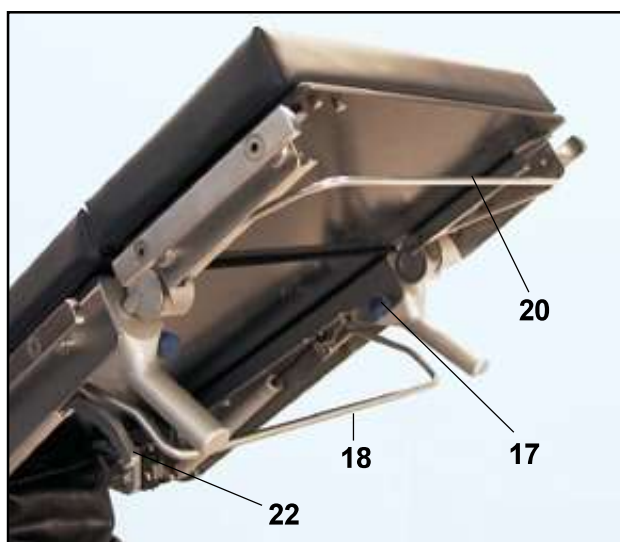
CE

GA111802GB09



## Overview


















- 1 Head rest 1130.64C0/D0
- 2 Back plate
- 3 Seat plate
- 4 Leg plates 1118.50A0/B0
- 5 Lever (leg plate up/down)
- 6 Locking lever (leg plate)
- 7 Grip screw (abduct leg plates)
- 8 Castors
- 9 Bellows
- 10 Column casing
- 11 Base cover
- 12 Pump pedal
- 13 Mains power cord
- 14 Locking pedal (table locking)
- 15 Lowering pedal (lower table top)
- 16 Foot selector
- 17 Locking screw (head rest)
- 18 Operating bar (back plate)
- 19 Connecting pin for equipotential bonding (located below table top)
- 20 Operating lever for head rest
- 21 Display:
  - Mains supply
  - Battery charge level
  - Pump function ON
- 22 Release handle for longitudinal shift
- 23 Hand crank for body elevator

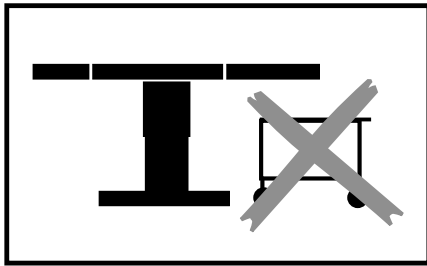


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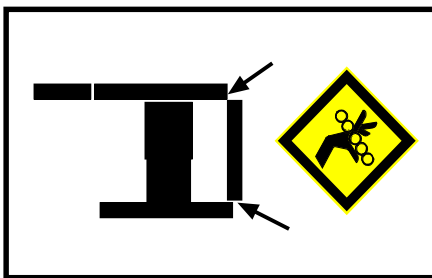
## I. Important safety instructions

-  The operating table is designed for a patient weight limit of 135 kg (300 lb), surgical interventions may only be performed using defined patient positions.
-  Make sure that the patient lies in the specified position. Never place the patient's torso on the leg plates.  
**Danger of operating table tipping over.**
-  Do not move an operating table with an add-on extension or rectal unit attached when a patient is lying on the table. **Danger of operating table tipping over.**
-  Make sure that the operating table is positioned horizontally and is stable.
-  Secure the operating table before use.
-  Secure the operating table in position before transferring the patient.
-  Secure the patient before re-adjusting the operating table
-  The table top may not be shifted longitudinally when the extension plate or the rectal positioning unit is mounted. Hazard of collision!
-  Actuating the longitudinal shift feature is only permissible when the table top is in the 0-position.
-  When using high-frequency equipment, defibrillators and defibrillator monitors, avoid contact between the patient and metal parts of the operating table, the table tops and accessories, and do not position patients on wet or damp surfaces or electrically conductive pads.  
**This may result in the patient sustaining burns.**  
It is absolutely essential to comply with the manufacturer's Directions for Use.
-  Make sure that table top accessories are fixed properly.  
When adjusting the operating table, take care to avoid collisions between accessories and the operating table.
-  Do not use worn or damaged accessories.  
**This may result in injury to the patient.**
-  Non-original accessories which affect the longitudinal geometry of the table top may only be used after consultation with MAQUET.
-  There is no explosion protection during the battery charging cycle or when operating the table top system powered from the mains.
-  Avoid endangering the patient's respiratory system, nerve pathways and circulatory system by ensuring the patient's proper positioning and observing the patient's condition.
-  Check the electrical conductivity of the operating table once a year. This check should be performed by trained servicing personnel only.
-  Unplug the mains cable before opening the unit.



Remove possible obstacles before lowering or tilting the operating table.

**Danger of operating table tipping over.**

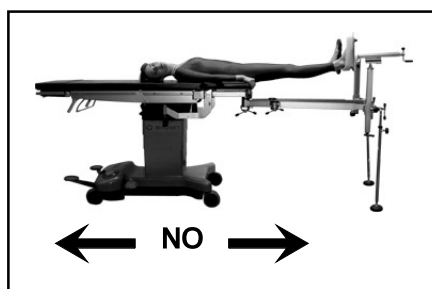


Do not reach below the table top or between the components of the table top when making adjustments.

**Pinching hazard**

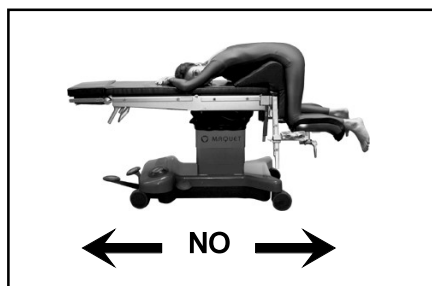


When adjusting the table top (e.g. Trendelenburg/ reverse Trendelenburg position, height down, leg plate down), avoid collisions between table top components and the operating table base!



Do not move an operating table with an add-on extension attached when a patient is lying on the table.

**Danger of operating table tipping over.**



Do not move an operating table with a rectal unit attached when a patient is lying on the table.

**Danger of operating table tipping over.**

## II. Important information

First of all, we should like to thank your clinic for choosing our mobile operating table 1118.

### 1. Important information on these Directions for Use:

- Please read these Directions for Use carefully. We have prepared them for you so that you can familiarize yourself with the system's characteristics.
- Always follow the instructions contained here.
- Keep these Directions for Use near by the equipment at all times.
- In these Directions for Use, we have used the following symbols:

→ **Note**

This symbol is displayed with all notes which help you to avoid equipment malfunctions.



This symbol indicates safety instructions in accordance with the prevailing international standard for medical equipment.

### 2. Use of an operating table in the manner intended

The operating tables which MAQUET sells are intended for human medicine purposes only. Prior to use, the user must be given instructions for operation of the equipment in the manner intended. The provision of instruction must be verified in the form of a hand-over report. The chosen place of use for the equipment must conform to the applicable standards and guidelines. A compulsory requirement for use is proper installation and maintenance of the equipment.

### 3. Purpose:

The purpose of the operating table is to position patients for surgery

- directly before, during and after the operative phase
- in rooms which are used for medical purposes and fulfil the following conditions:
  - they are equipped with electric shock protection devices
  - additional equipotential bonding
  - electrically conductive floor covering (as per Groups 1 or 2 according to VDE 0107)
- under medical surveillance

Due to the design of the table top, the operating table is suitable for all surgical disciplines. The range of possible positionings is listed in the Directions for Use.

Movements are initiated manually; they are executed electrohydraulically by means of pedals and handles, otherwise they are executed hydraulically. Side rails are provided for securing accessories in accordance with the manufacturer's specifications.

The translucent table top of the operating table permits intraoperative use of X-ray equipment.

### 4. Basic safety aspects



„CLASSIFIED BY UNDERWRITERS LABORATORIES INC: WITH RESPECT TO ELECTRIC SHOCK; FIRE AND MECHANICAL HAZARDS ONLY IN ACCORDANCE WITH UL 2601-1“

This operating table meets the provisions of the international IEC 601-1 standard and IEC 60601-2-46.

The operating table is classified as Class I equipment under the Medical Device Directive. You should include it in your inventory.

For your maintenance work, please remember that the MAQUET Customer Service is the right address as far as quality of work and warranty are concerned. We are sure you will appreciate that MAQUET can only accept responsibility for the safety of your equipment if installation, extension work, adjustments, modifications and repairs to your equipment have been carried out exclusively by our Customer Service or by technical experts authorised by us and also if the equipment has been operated strictly in accordance with our Directions for Use.



### III. General description

#### 1. General description

The **1118.02** is a mobile operating table for general surgery.

Depending on the leg plate type selected, the operating table top can have up to 5 subdivisions: Located beneath the table top are guide rails for inserting X-ray cassettes at the head end.

X-ray cassettes can be inserted below the table top in the head, back and seat areas.

The lateral side rails are for fixing accessories to the operating table.

#### Versions of the operating table:

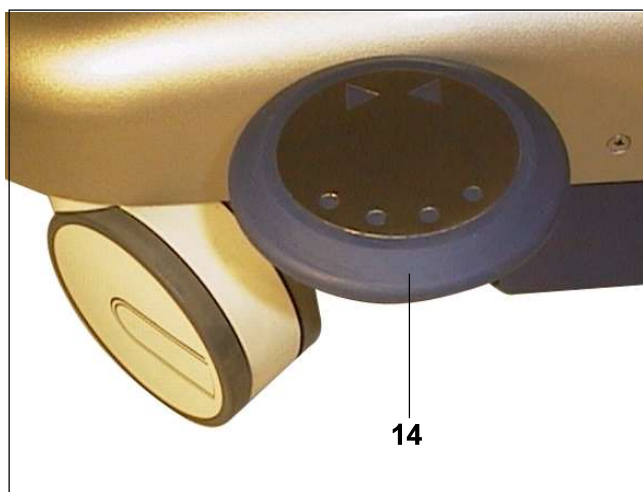
1118.02A0	Operating table with PUR pads, European side rails
1118.02B0	Operating table with Kaliko pads, European side rails
1118.02E0	Operating table with Kaliko pads, U.S. side rails
1118.02G0	Operating table with SFC padding, European side rails and body elevator
1118.02J0	Operating table with PUR padding, European side rails, longitudinal shift
1118.02K0	Operating table with SFC padding, European side rails, longitudinal shift

The operating table can be enabled by releasing or fixing a foot lever.

→ The operating table is designed to handle safety patients weighing up to 135 kg as per IEC 601-1 standard. The operating table may only be equipped with original MAQUET accessories (observe the Operating Instructions). Non-original accessories may only be used with the manufacturer's express prior approval and must be examined carefully prior to use to make absolutely sure that they do not represent a hazard to patients or personnel and cannot damage the operating table.

#### → Note:

On the immobilised operating table, all surgical procedures may be performed on patients weighing up to 135 kg (300 lb.).



#### 2. Moving/locking the operating table:

→ Before starting patient positioning and during the operation, the operating table must always be immobilised by operating the locking pedal (**14**).

To move the operating table in a longitudinal direction,

- move the locking pedal (**14**) up.

To immobilise the operating table,

- move the locking pedal (**14**) down.

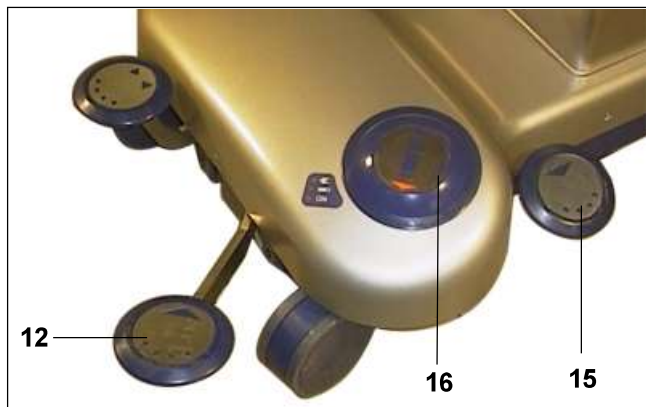
## 3. Activating the functions

### 3.1. Functions

The hydraulic functions of the operating table:

- height function
  - inclination function
  - lateral tilt function
- are foot-activated via the following operating elements.

- Foot selector (16)
- Pump pedal (12)
- Lowering pedal (15)

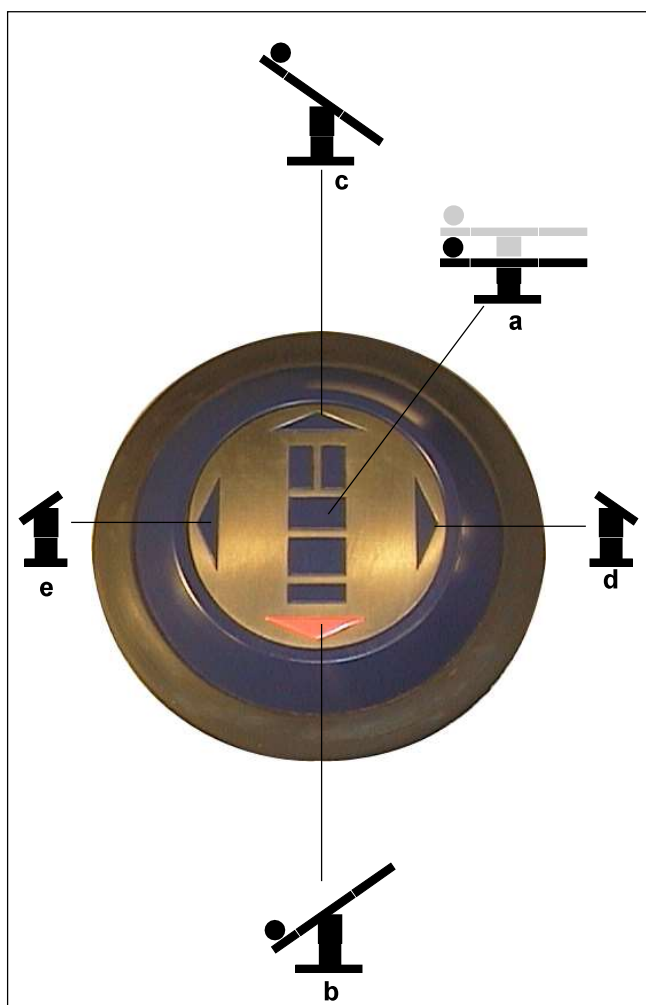


### 3.2 Functions of foot selector

The desired function is activated by pressing the selector as shown.

- a) Table top up
- b) Trendelenburg position
- c) Reverse Trendelenburg position
- d) Lateral tilt right
- e) Lateral tilt left

- a) Pressing foot selector in the middle = height function
- b) Tilting the foot selector in the direction of the ▼ arrow = Trendelenburg position
- c) Tilting the foot selector in the direction of the ▲ arrow = reverse Trendelenburg position
- d) Tilting the foot selector in the direction of the ► arrow = lateral tilt right
- e) Tilting the foot selector in the direction of the ◀ arrow = lateral tilt left





### 3.3 Pump pedal

The function set at the foot selector (16) is released by actuating the Pump pedal (12): press the pump pedal (12) down as far as it will go. Let go of the pump pedal (12) to stop the function. The yellow LED next to the ON symbol lights up during the adjustment procedure

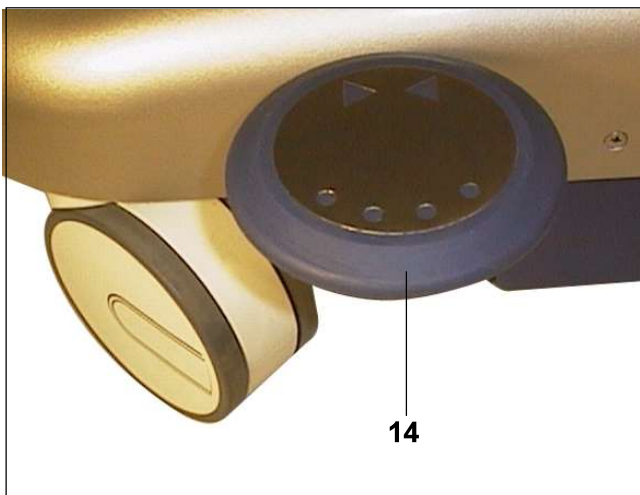
#### → Note

If the LED still lights up after completion of the adjustment procedure, please contact the MAQUET Customer Service. For safety reasons, do not use the table any further.



### 3.4 Lowering pedal function

The sole purpose of the lowering pedal (15) is to reduce the height of the table top. The position of the foot selector has no relevance to this function.



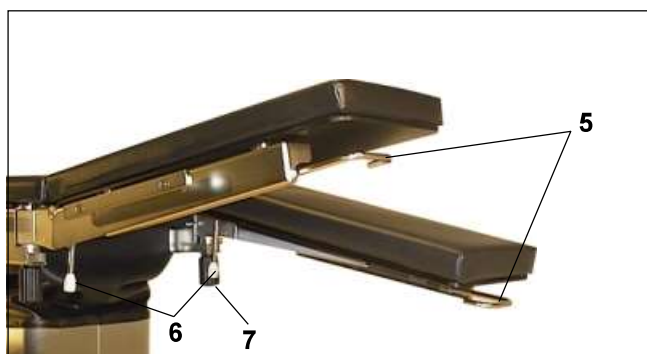
### 3.5 Locking pedal function

When the locking pedal (14) is pressed, the two swivel castors are locked. Operations and patient positioning shall only be performed when the operating table is locked.

### 3.6 Table top functions

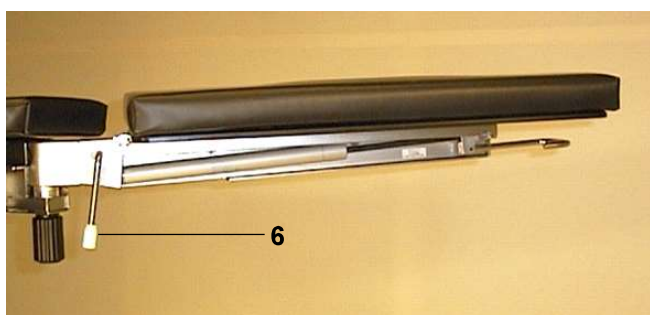
The manual functions are activated via the controls on the table top.

- Operating bar for back plate (18).
- Operating lever for head rest (20)
- Locking screw for head rest (17)
- Lever for leg plate (5)
- Locking lever for leg plate (6)
- Grip screw (abduct leg plate) (7)
- Release handle for longitudinal shift (22)
- Hand crank for body elevator (23)



**!** Remove any possible obstacles before lowering or tilting the operating table.  
**Danger of operating table tipping over.**

**!** Do not reach below the table top or between the components of the table top when making adjustments.  
**Pinching hazard.**



**!** If table tops are adjusted downwards, avoid collisions with the base of the operating table when making adjustments.





### 3.7 Body elevator (Version G)

The hand crank (23) and its mount (23a) used to actuate the body elevator are located at the back section of the table top. In the top position the two hard paper plates of the back section are set to the body elevator position.

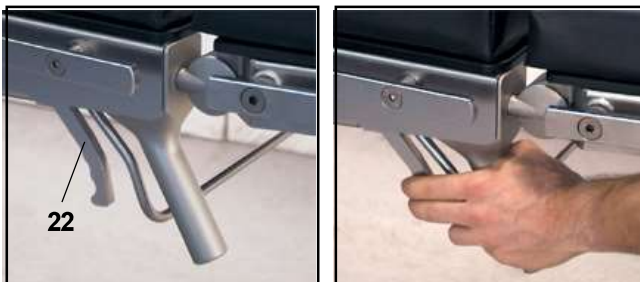
- ⚠ The hand crank should always be engaged in the clips when not in use.
- ⚠ Be careful when inserting the hand crank in the mount at the back plate supporting bar or engaging it in the clips, in order to prevent injury caused by the crank.
- ⚠ Ensure that the patient's nerve pathways and circulation are not compromised by the body elevator adjustment.
- ⚠ Do not reach between the moving parts of the body elevator during adjustment procedures. Moreover, ensure that the patient's limbs do not come between the moving parts of the body elevator.



### 3.8 Longitudinal shift (Versions J and K)

The release handle (22) for the longitudinal shift is located at the head end on the table top. When pulled towards the head end, this handle releases the locking mechanism for the longitudinal shift; the table top can be shifted manually to the desired position. When shifting the table top, hold it with both hands at the head end. When the handle (22) is released, the table top is locked automatically (9 positions, spacing 36.5 mm).

- ⚠ Actuating the longitudinal shift feature is only permissible when the table top is in the 0-position.
- ⚠ Check to ensure that the table top is properly locked before displacing the table in the longitudinal direction or before actuating the Trendelenburg adjustment feature.



### 3.9 Light signals (21)

**Green LED:** The operating table is connected to the mains supply via the mains cable. The batteries are being charged.

**Red LED:** Recharge the batteries.

**Yellow LED:** The adjustment is being made.



### 3.10 Charging the batteries

Connect the mains cable of the operating table to the mains supply to charge the batteries. A full charge takes about 15 hours. The electronic circuitry prevents overcharging. We recommend to recharge the batteries overnight or at the weekend.



- ⚠ New and old batteries shall not be combined!  
Always replace the complete set of batteries

## IV. Operating the operating table



### 1. Equipotential bonding:

Connect the equipotential bonding pin (19) and the equalization wire to an equipotential bonding system in the operating room (in accordance with VDE-0107 or the prevailing national regulations).

### 1.2 Operating table adjustments

Height, Trendelenburg/reverse Trendelenburg positions and lateral tilt are set at the foot selector (16) and released by means of the pump pedal (12) (see Chapter III, Section 3). The adjustments of the individual table top sections are described in Chapter IV, Section 5.

### 2. Mains operation

Use the mains power cord (13) to connect the operating table to the mains supply. To do so, connect the mains power cord (about 4.5 m long) to the socket at the operating table base and the mains supply. The green LED (a) at the operating table base 21 will light up during this procedure.



The separation of the OR-table from the mains is made by the power plug

#### → Note

Damaged mains power cords will have to be replaced!  
Disconnect the operating table immediately from the mains supply!

### 3. Battery powered operation

Unplug the mains power cord of the operating table. The capacity of the fully charged batteries allows use of the operating table for at least 6 operations. Recharge the batteries when the red LED (b) at the table base lights up.

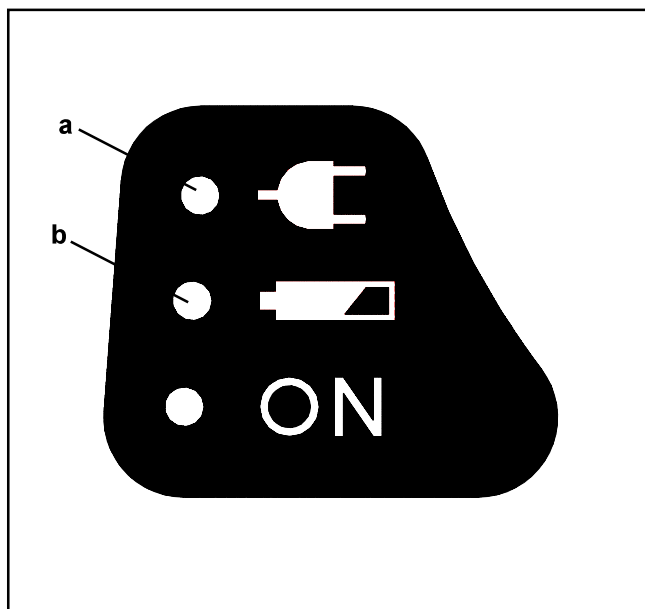
Connect the mains power cord of the operating table to the mains supply to charge the batteries. A full charge takes about 15 hours. The electronic circuitry prevents overcharging. We recommend to recharge the batteries overnight or at the weekend.

#### → Note

New and old batteries shall not be combined!  
Always replace the complete set of batteries.

#### → Note

Battery powered operation of the operating table is generally preferable to mains operation.  
If the batteries are discharged, the operating may be adjusted manually by means of the release pedal.



#### 4. Explosion protection regulations:

The blue 1118.11A0 pads are not electrically conductive. These pads must not be employed when using inflammable detergents and disinfectants – there is no explosion protection!

You can find details of the classification of areas subject to explosion hazards into zones in Information Leaflet M 639, which is issued by the Professional Association for Health and Welfare.



#### 5. Table top components

##### 5.1 Head rest 1130.64A0/B0/C0

To fix the head rest (1), insert the two pins into the locating holes until they fully engage. Then tighten the two locking screws (17).



Check to see if the head rest is attached securely by pulling it.

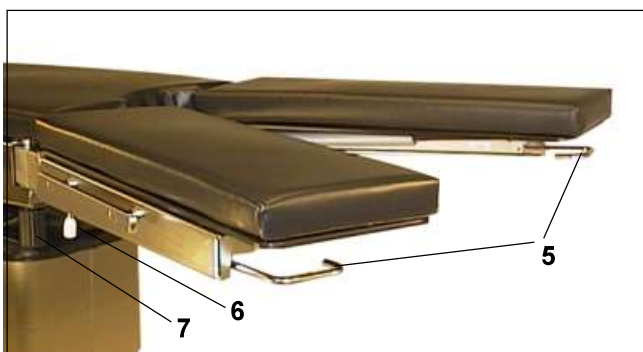
##### 5.2 Adjusting the head rest

The head rest can be inclined downwards by pulling the end of the plate up. The head rest engages automatically step by step.

To incline the head rest upwards, pull the operating bar (20) towards the padding. The head rest is automatically located in the next ratchet after you release the operating lever (20).

➔ Make sure you comply with the Directions for Use for the head rest.

##### 5.3 Leg plates 1118.50X0



- To attach the leg plate **1118.50X0**, insert the pin into the locating hole up to the stop. Pull the locking lever (6) towards the foot end up to the stop. Insert the pin fully into the locating hole, with the locking lever still pulled. Release the locking lever so that it returns to its original position.
- The leg plate can be folded down and into the horizontal position by pressing down lever (5) at the foot end of the operating table.
- The leg plates can be abducted by slackening the grip screw (7). To secure the leg plate in a detent position, re-tighten the grip screw (7).
- To remove the leg plate, pull the locking lever (6) towards the foot end of the operating table and pull the leg plate out from the locating holes.



#### 5.4 Table top covering

The SFC table top padding is affixed to the paper base laminate plates by Velcro fasteners.

The PUR pads are also attached to the frame by means of bolts.

#### 5.5 Back plate adjustment:

The table top is equipped with a manually adjustable back section with gas-filled spring support and is activated by means of the bar (**18**).


When a patient of normal weight is lying on the table top, the motion of the back plate is normally compensated.

When the back plate is not bearing any load, it moves up after you release the bar.

The back plate is automatically immobilised after you release the bar.

## V. Positionings

### 1. General

- The operating table must be integrated in the equipotential bonding system of the operating room. For this purpose, connect the equipotential bonding pin  and the equalisation wire to an equipotential bonding of the operating room near the patient. An equalisation cable (5 m long) with connectors at either end is supplied with the operating table.
- After positioning the patient, check to see if all the excentric levers are closed and if all clamping screws on the operating table as well as the accessories are fastened tightly.

#### → Note

According to generally recognized hygiene regulations, the table top must be draped prior to use.



#### HF surgery

**Use of defibrillators and defibrillator monitors**  
When using HF equipment, defibrillators and defibrillator monitors, it is imperative that you observe the equipment manufacturer's Directions for Use, since ignoring the prescribed safety precautions can result in serious damage to equipment or personal injury. Contact between the patient and metal parts of the operating table or operating table accessories can cause burns. There is also a risk of burning if the patient is placed on damp or wet surfaces or drapes on the electrically conductive padding of the operating table.



### 2. Lithotomy position

- Immobilize the operating table.
- Attach the leg supports to the side rails near the leg plate mounts using the radial setting clamp.
- Position the patient's legs and remove the leg plates.
- Move the back plate upwards with the bar (18).
- Tilt the table top slightly into the Trendelenburg position; set the dome-shaped selector switch (16) to b. Adjust the inclination by pressing pedal (12).
- Move the leg supports into position.

#### Recommended equipment

1001.65A0	Goepel knee crutch (2 pcs.)
1003.23C0	Radial setting clamp (3 pcs.)
1002.57A0	Anaesthesia screen
1002.59A0	Elongation tubes for anaesthesia screen
1001.44D0	Arm posturing device
1002.24C0	Wristlet

#### Alternative:

1002.2300	Leg holder with straps
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### 3. Thyroid

- Immobilise the operating table
- Tilt the table top into the Trendelenburg position
- Move the back plate upwards
- Align the leg plate
- Adapt the head rest

#### Recommended equipment

1132.64X0	Head rest
1002.57A0	Anaesthesia screen
1003.23C0	Radial setting clamp
1001.44D0	Arm posturing device
1002.24C0	Wristlet
1001.56A0	Body strap
1002.59A0	Elongation tubes for anaesthesia screen

#### → Note:

Be sure to comply with the Directions for Use for all accessories used.



### 4. Maxillo-facial surgery

- Immobilize the operating table
- Attach the required head positioning accessories to the table top using the connecting bracket 1130.54B0
- Tilt the table top into the Trendelenburg position
- Move the back plate upwards
- Align the leg plate
- Adapt the head positioning accessories

#### Recommended equipment

1130.54B0	Connecting bracket
1002.64A0	Connecting fixture
1002.7000	Horseshoe-shaped head rest, split
1002.57A0	Anaesthesia screen
1003.23C0	Radial setting clamp
1001.44D0	Arm posturing device
1002.24C0	Wristlet
1002.59A0	Elongation tubes for anaesthesia screen

#### → Note:

Be sure to comply with the Directions for Use for all accessories used.



### 5. Lateral positioning (e.g. kidney, thorax)

- Immobilize the operating table
- Tilt the table top into the reverse Trendelenburg position
- Move the back plate downwards
- Adapt the head rest

#### Recommended equipment

1130.53B0	Double articulation head rest
1002.57A0	Anaesthesia screen
1003.23C0	Radial setting clamp
1001.44D0	Arm posturing device
1001.56A0	Body strap
1001.4600	Arm restraint cuff
1002.21C0	Lateral support
1002.19C0	Fixture for body supports
1002.11A0	Back-buttocks support
1002.59A0	Elongation tubes for anaesthesia screen

#### → Note:

Be sure to comply with the Directions for Use for all accessories used.



### 6. Neurosurgical procedures (patient in prone or supine position)

- Immobilize the operating table
- Now attach the neurosurgical head positioning accessories using the connecting bracket 1130.54B0
- Lay the patient in the prone or supine position
- Set the head positioning accessories

#### Recommended equipment

1130.54B0	Connecting bracket
1005.2900	Basic unit
1005.3400	Clamp adapter
1005.3500	Mayfield skull clamp
1002.57A0	Anaesthesia screen
1003.23C0	Radial setting clamp
1101.44D0	Arm posturing device
1002.59A0	Elongation tubes for anaesthesia screen

#### → Note:

Be sure to comply with the Directions for Use for all accessories used.



## 7. Orthopedic extension

- Immobilize the operating table
- Attach extension unit 1419 and secure the supports
- Remove the head rest
- Place patient on table and position legs

### Recommended basic equipment

1419.01X0	Extension unit
1003.23C0	Radial setting clamp (3 pcs.)
1002.57A0	Anaesthesia screen
1001.44D0	Arm posturing device
1002.59A0	Elongation tubes for anaesthesia screen



## 8. Gall bladder

- Immobilize the operating table
- Tilt the table top into the reverse Trendelenburg position
- Move the back plate downwards
- Adapt the head rest

### Recommended equipment

1130.64C0	Head rest
1002.57A0	Anaesthesia screen
1003.23C0	Radial setting clamp
1001.44D0	Arm posturing device
1002.24C0	Wristlet
1001.56A0	Body strap
1002.59A0	Elongation tubes for anaesthesia screen

## VI. Maintenance and servicing

We recommend you cover the operating table with drapes when it is not in use.

- Where the "lateral tilt" and "Trendelenburg/reverse Trendelenburg" functions have not been used for an extended period of time, play may occasionally develop in the universal joint suspension.

Rectification:

Move the table top to the final position in each direction, e.g. tilt to the left and right, to the Trendelenburg and reverse Trendelenburg positions.

The hydraulic system should be serviced by MAQUET Customer Service staff only.

### 1. Cleaning

Avoid excessive use of water on the surfaces of the mobile operating table.

Also avoid spraying joints with spray cleaning or disinfection equipment.

Pressurized jets of water or detergent can result in liquid entering the gaps between joints and causing corrosion. To clean the operating table and accessories, we recommend you use a weak alkaline detergent (soap solution) containing tensides and phosphates as active agents.

To clean the table, align the operating table horizontally and move it to its highest position.

If surfaces are heavily soiled, use the detergent in concentrated form. Afterwards, wipe the surfaces with clean water and remove any excess water with a dry cloth.

### 2. Disinfecting

To disinfect the operating table, we recommend you use commercially available surface disinfectants on an aldehyde base in aqueous solution. Make sure you use an agent that appears in the DGHM\* list. Here, you can find additional information on the individual constituents in the disinfectants.

→ **Note:**

The disinfectant should not contain the following components:

- Chlorine or chlorine-splitting compounds  
These agents attack the metallic surface.
- Alcohol or compounds of alcohol.

**Hand disinfectants contain alcohol.**

These agents attack plastic parts, e.g. operating table padding, operating levers.

These agents form flammable mixtures.

### 3. Disinfecting the castors

Turn the castors outwards. Wipe the castors with surface disinfectants.

\* Deutsche Gesellschaft für Hygiene und Mikrobiologie DGHM (German Society for Hygiene and Microbiology),  
c/o Institut für Hygiene und Mikrobiologie  
Universität Würzburg  
Josef-Schneider-Str. 2  
97080 Würzburg  
<http://www.dghm.org>

#### 4. Maintenance

The operating table will have to be serviced once a year by the MAQUET factory service department or by service technicians authorized by MAQUET to do so.

Please adhere to prescribed maintenance intervals as otherwise guarantee coverage will lapse.

In so doing you also make a contribution to patient and staff safety and extend the useful life of your costly equipment.

We recommend concluding a maintenance contract with MAQUET.

Outside Germany please contact your local representative in all matters relating to service.

#### 5. Troubleshooting

If you are having trouble with your equipment, please contact your local MAQUET representative or our factory. Please give us detailed information regarding the symptoms of the trouble and state the serial number of the equipment. This will enable us to remedy your problem more quickly.

#### 6. Nature and scope of maintenance work

Inspect components and joints critical to the functioning of your equipment for wear and corrosion.

Pay special attention to the following parts:

- Connecting bolts of the table top
- Fastening bolts of the column guide
- Pump and pump pedal suspension

For your patients' safety, you are strongly advised to comply with the yearly maintenance intervals.

➔ **Note:**

Non-observance of the prescribed maintenance intervals will render the warranty on the equipment null and void. Special tools are required to perform maintenance work on the equipment.

However, servicing and repair work should always be referred to the trained technicians of MAQUET's Customer Service.

➔ **Note:**

Do not attempt to perform any repairs if the equipment malfunctions, and never use force.

#### 7. Protection of the environment

**Please note the following:**

• **Packaging materials:**

The materials used for packaging MAQUET products are environmentally friendly. They are made of untreated wood, cardboard, recyclable plastics or other reusable materials.

• **MAQUET-Products:**

MAQUET takes used and not recyclable Products back. All parts will be deposited environmentally. Please call your MAQUET-Service to get more information.

• **Plastic components:**

Large plastic components have a symbol to indicate what type of plastic they are made of in order to make recycling easier. Padding can be disposed of through the hospital waste system.

• **Batteries:**


Batteries can be sent to the lokal recycling system. You can also get information from your MAQUET Service. MAQUET will take the batteries back also.

## VII. Technical specification

Operating table type: **1118.02**

Length without head rest:	1790 mm
Length with head rest:	2075 mm
Width of table top:	510 mm
Width across side rails:	570 mm
Height:	650 - 1000 mm
Inclination in Trendelenburg adjustment:	25°
Reverse Trendelenburg adjustment:	25°
Lateral tilt, either side:	15°
Back up:	60°
Back down:	50°
Body elevator (Version G):	100 mm
Longitudinal shift (Versions J and K):	290mm
Leg plates up:	0°
Leg plates down:	95°
Weight:	approx. 186 kg
Max. weight of patient:	135 kg
For heavier loads, consult the manufacturer	

### Electrical specifications

Nominal voltage:	AC 100/110-115/127 200/220/230-240VCA
Frequency:	50/60 HZ
Power consumption:	max. 400 VA
Protection class:	<input type="checkbox"/> II, (Double Insulated)
Degree of protection against electric shock:	 Type B

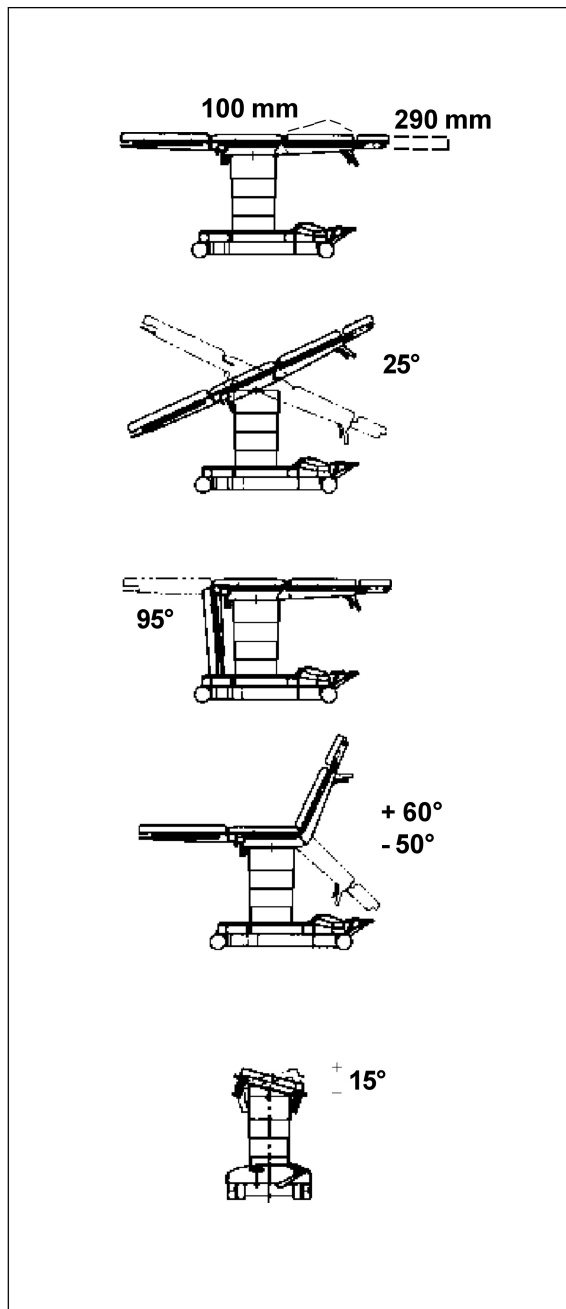
Enclosure leakage current meets requirements of patient leakage current of IEC 601-1 for CF applied parts.

IPX4\* IPS\*\* SELV\*\*\* DC 24V

Duty cycle:	int. 10 min. on/20 min. off
Explosion-protection:	AP during battery operation Use in potentially explosive atmospheres of types AP-M with mains connections not allowed.

Rechargeable batteries: 2 batteries 12V / 6,5 Ah  
Typ: A512 / 6,5 S

Classification: Class I as per Medical Device Directive



\*IPX = Protection against ingress of liquids (splashproof)

\*\*IPS = Internal power source

\*\*\*SELV= Safety extra low voltage


## VIII. List of accessories

 Non-original accessories which affect the longitudinal geometry of the table top may not be used without the express prior approval of MAQUET.

**Always read the Directions for Use prior to use of accessories.**

→ **Note**

Non-original accessories (for fixing to the side rails) must be examined carefully prior to use to make absolutely sure that they do not represent a hazard to patients or personnel and cannot damage the operating table (e.g. as a result of possible collisions).

 In particular, heavy accessories or accessories with a long leverage (retractor systems and the like) can cause damage and therefore require close examination.

Listed below are all the accessories that may be attached to the operating table 1118.02X0.

This list has been sub-divided as follows:

1. Accessories for attachment to the side rails
2. Accessories for attachment to the head-end interface
3. Accessories for attachment to the foot-end interface
4. Pad
5. Other accessories
6. Accessories for versions 1118.02E0 only

### 1. Accessories for attachment to the slide rails

1001.44C0	Arm posturing device, 300 mm long
1001.44D0	Arm posturing device, 450 mm long
1001.56A0	Body strap, washable
1002.24C0	Wristlet
1002.19C0	Fixture for body supports
1002.11A0	Back-buttocks support
1002.11B0	Pubis-sacrum-sternum support
1002.11C0	Lateral support
1002.11D0	Support roll
1001.6000	Arm board, adjustable via ball-and-socket joint
1001.85B0	Foot plate
1002.09C0	Shoulder supports
1003.23C0	Radial setting clamp
1001.65A0	Goepel knee crutch
1003.1000	Iliac support
1005.86A0	Leg holders with lower leg stirrups and gas-damped spring adjustment
1005.8700	Pair of leg holders, with adjustable lower leg support
1002.2300	Leg holder with straps
1009.02C0	Meniscus-positioning device
1002.57A0	Anaesthesia screen, "L" shaped
1001.4600	Arm restraint cuff
1002.59A0	Elongation tubes for anaesthesia screen
1005.2300	Cross-bar attachment (for NEURO positioning, patient seated)
1005.2900	Basic unit Mayfield
1005.3400	Clamp adapter for Mayfield skull clamp
1005.3500	Mayfield skull clamp
1005.2500	Connecting element
1002.21C0	Lateral support
1003.32C0	Mayo instrument table
1003.3300	Knee supports, pair
1009.01C0	Infusion Holder washable

**2. Accessories for head-end interface**

1130.53A0	Head rest with double articulation, can be folded down, PUR
1130.53D0	Head rest, with double articulation, washable, PUR
1130.64A0/B0/C0	Head rest
1130.54B0	Connecting bracket

**3. Accessories for foot-end interface:**

1005.78C0	Operating table top for babies and infants
1118.50A0/B0/E0	Pair of leg plates, can be folded down and abducted
1117.01A0/C0	Pair of leg plates, can be folded down and abducted
1117.01B0/EU	Pair of leg plates, can be folded down and abducted, SFC
1130.50A0	Pair of leg plates, can be folded down and abducted, PUR
1130.50D0	Pair of leg plates, can be folded down and abducted, PUR, washable
1130.55A0/B0/C0	Seat plate extension
1130.56A0	Rectal positioning device
1130.58A0/B0/C0	Transfer board, one-piece design
1130.60F0/G0	One piece folding leg plates
1132.65A0	Transfer board
1130.65A0/B0	Transfer board, one-piece design, lightweight model
1419.01C0	Extension device

**4. Pad**

1000.5700	Head ring, Pu
1000.6800	Pad, segmented
1003.7400	Cushion, semi-circular

**5. Other accessories**

1117.45A0	Drainage bowl incl. plastic guide frame
1002.8900	Cassette slide

**6. Accessories for versions 1118.02E0 only**

1118.80A0	X-ray top
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**IX. Replacement parts list**

Component parts which belong to the operating table 1118.02 or which may be used in combination with the operating table.

Spare parts can be ordered under the specified numbers. For details of further parts and information, refer to the replacement parts list EL111802DE01 and the accessories replacement parts lists.

**1. Operating table replacement parts**

SFC-pad 1000.66D0	9092.3074
Back plate pad, PUR	3112.6852
Seat plate pad, PUR	3112.2982
Rechargeable batteries (for 1118.02AE/BE, two batteries required)	0 227 009 4.
Mains cable for 1118.02AE	1004.51A0
Mains cable for 1118.02BE	1004.51B0

**2. Accessories replacement parts list**

Leg plate pad	1118.50A0	right	3112.4693	PUR
		left	3112.4683	PUR
Leg plate pad	1118.50B0	SFC-pad	9092.0204	
Head rest	1130.64C0	SFC- pad	9092.0104	
	1130.64D0	PUR padded	3 113.300 3.	

Use only spare parts approved by MAQUET.

All information and technical specifications contained in these Operating Instructions apply at the time of going to press. In keeping with our policy of continuous product improvement, however, we reserve the right to change specifications without prior notice.

MAQUET GmbH & Co. KG  
Kehler Strasse 31  
D-76437 Rastatt

Surgical Tables Division  
Phone ++49 7222 932-0  
Telefax ++49 7222 932-838

Service hotline ++49 7222 932-745  
e-mail: [info.sales@maquet.de](mailto:info.sales@maquet.de)  
Internet: <http://www.maquet.com>

  
Surgical Systems

We reserve the right to make technical and design changes.