

Operating Table MOT-VS600 Operator's Manual



This operating table is designed for medical operations. Using this operating table for any other purpose other than this intended use may cause serious injury.

The operator and the person in charge of the maintenance of this operating table must read this operator's manual thoroughly and understand the contents before operating, inspecting, adjusting and maintaining it.

Keep this manual for reference in a place where is readily accessible.

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1. Introduction

1.1 This manual

This manual contains information for safely and effectively using this product.

Before operating this product, read this manual thoroughly to understand how to operate and inspect the product.

Failure to follow these instructions could lead to serious injury.

The safety information is categorized as per the following so that the contents of warnings and cautions, and the details of warnings and cautions which are labeled on the product may be comprehended.



If this indication is ignored and the product is incorrectly used, serious injury or death may result.



If this indication is ignored and the product is incorrectly used, injury and/or damage to property may result.

NOTE

This notice notes additional information on the product's functions.

The warning and caution notices on this manual relating to operating and inspecting, apply to the intended use (surgical operations) of this product.

If the product is used for purposes other than surgery, the user is responsible in regard to safety for performing operations and inspections which are not contained in this manual.

1.2 Intended use and this product

This product is the operating table on which a patient is placed for surgical operations.

The product is intended to support a patient during surgical operations.

In conforming with the objectives of surgery, the product is equipped with features for adjusting its height, and for freely changing and setting the patient's body position.

The product uses both medical grade outlets and batteries as power sources.

This product is to be used by health care professionals, including but not limited to surgeons, nurses and biomedical technicians.

1.3 Accessories





Operator's manual

Optional parts

• Cordless hand controller



• Foot switch



Flame-Retardant and Waterproof Pads (SUSANO Pad)



2. Safety precaution

2.1 Read thoroughly before using

In using this product, carefully read the following warnings and cautions, and make sure to observe them. Any serious incident that has occurred in relation to the device should be reported to the manufacturer and the competent authority in which the user and/or patient is established.



(1) Head section and leg section



Do not step or sit on the head section or the leg section(s).

The operating table may tip over resulting in injury.





Before lowering the table or placing it in a reverse Trendelenburg position, check if there are any devices under the leg section.

If the leg section comes in contact with devices and it is subjected to excessive force, the operating table may be damaged.





When transferring a patient from the operating table (Fig. a) or changing a patient's body position (Fig. b), do not apply excessive force on the head section or leg section. The operating table may get deformed or damaged.

(2) Hand controller



- Do not forcibly pull the hand controller cord.
- Do not subject the hand controller to strong shocks. The hand controller may get damaged.

(3) Base



Do not place any objects on the base. An object may get caught and the operating table may get damaged.

(4) Power cord and power connector



- Do not place any heavy objects on the power cord.
- Do not roll over the power cord with a castered device.
- Do not forcibly pull the power cord.
- Do not place any objects in the place where the power cord is to be unplugged from the medical grade outlet, which would obstruct it from being unplugged.
- Take waterproofing measures such as covering the power connector with a plastic sheet, etc. so that liquids do not infiltrate inside of the power connector. If liquids infiltrate inside of the power connector, it may cause fire or damage.



(5) Installation of the operating table



- Do not install the operating table on an uneven floor.
- Do not place a pad under the base for raising the operating table. The operating table may tip over resulting in injury.



(6) Table pad



Make sure to securely attach the table pads to the operating table so that they do not come off. The table pads may come off, and the patient may get injured.





- Attach the table pads straight along the Velcro fastenings from the edges. Especially, attach long table pads while holding them with your hands so that the surfaces do not get wrinkled. If the table pads rise up or buckle, they may get deformed or damaged.
- Do not apply tape, etc. directly on the table pads. Otherwise, they may get damaged.
- Place and store the table pads in flat places. Leaning or bending may get deformed or damaged.
- Do not store operating table accessories or other medical devices, etc. on the table pads. Otherwise, they may get deformed or damaged.
- The table pads maintain waterproofness when they are properly attached in their usage. If the table pads are attached other than the proper placement method in their usage, and liquids infiltrate inside, it may cause degradation.
- If liquids get on the table pads waterproof fastener, wipe them off quickly. If the waterproof fastener gets wet and the liquids infiltrate inside, it may cause degradation.
- Do not open the table pads waterproof fastener. If liquids infiltrate inside, it may cause degradation.



Patient's position during surgical operation



Position the patient's body 10 mm (0.39 in) or more away from the metal side rail. The side rail may produce high temperatures due to the usage of electric scalpels, etc., which may result in a burn injury.

Positioning the patient

Follow the steps below to position the patient.

- **1.** Attach the accessory table pads onto the tabletop with their Velcro fastenings aligned with each other.
- **2.** Put the patient on the table pads.
- **3.** Position the patient according to the purpose of the surgical operation.



Have the person who operates the operating table to operate it in a position where the emergency stop switch can be immediately pressed, and the patient's condition can constantly observed.







• Prohibited

• Do not disassemble and/or modify the operating table. Otherwise, malfunction may occur.

Patient position

- When using the tabletop or accessories to secure a patient's body position, always observe the patient's condition. Being in the same position for long periods of time causes neuroparalysis or bedsores.
- Other medical electrical equipment to be used together with the operating table
- When using a high-frequency surgical equipment and/or a cardiac defibrillator etc. with the operating table, refer to their operator's manual provided by the manufacturers and observe the precautions and usage. Improper precautions and usage may cause the operator or the patient to get burned and/or devices to malfunction.
- When using medical electrical equipment etc. with the operating table, check that the operating table does not malfunction before using it. Electromagnetic interference may result in malfunctioning of the operating table.

• Weight capacity

- Do not apply loads which exceed the weight capacity (total of the patient and accessories)*. The operating table may not function, which may result in failures.
 * Elevation: 450 kg (1000 lbs) / Operations other than elevation: 360 kg (800 lbs)
- Preventive maintenance and inspections
- Make sure to inspect and maintain the operating table before and after use. The operating table may require replacement of the parts due to significant wear, deterioration, and/or breakage depending on the usage period and frequency of use.
- For preventive maintenance and inspections, contact your distributor or MIZUHO directly.

Antistatic measure

• Do not use the operating table on floors and/or with accessories that do not possess static electricity countermeasures. This may impede surgical operations.



• Devices and accessories used together with this product

- Before using other devices or accessories, thoroughly read the instruction manual of the devices and make sure that the operating table is not affected adversely. Before fitting on accessories from third party companies, contact your distributor or MIZUHO. Some accessories cannot be fitted on.
- While operating the operating table, check the position of other devices or the accessories used with them. They may come in contact with each other during the operation, the operating table, devices and/or accessories may get damaged.
- For hygiene, be sure to use sterilized drapes on the areas on this product where the patient comes into contact with it.

• Moving and transporting

- Do not move the operating table with a patient on it.
- Follow the procedures below to move the operating table.
 - * Before moving the operating table, disinfect the entire operating table in order to prevent infection.
 - 1. Turn off the power and disconnect the power cord from the medical grade outlet.
 - 2. Check if the handles and levers are in fixed positions, and each section is fixed firmly.
 - 3. Unlock the brakes, and move the operating table.
 - * Do not move the operating table by pulling on the head section or the leg section.
- The operating table should be transported with the following conditions met.
 - 1. Disinfect the entire operating table before transporting it.
 - 2. Take measures to prevent it from tipping over, such as lowering the tabletop to the bottom position.
 - 3. Actuate the brake.
 - 4. Suitably position cushioning on the product to prevent it from getting damaged during transport.
 - 5. Store the product in a container so that it does not get exposed to dust, and the weather.

Disposal

- In accordance with the European Union Waste Electrical and Electronic Equipment (WEEE) Directive, all electrical components and batteries must be disposed of in accordance with local regulations. Please contact your local distributor for proper disposal.
- Pay special attention to the following disposals:
 - a) Hydraulic Fluid
 - b) Lead Acid Batteries

2.2 Labeling

The operating table is labeled at the locations shown as below. Before use, make sure to understand the contents of the labels.

Warning and Caution labels (2)(6) $(3)^{*}$ -1 1 (8)(9) $(1)^{*}$ mto $(4)^{*}$ (5)0 0 *: Applied on both sides. · (7) (1) C655740 (2) C643029 A WARNING **MISE EN GARDE** A WARNING 🛕 MISE EN GARDE Ť. A LEG PLATE WEIGHT 8kg. POIDS D'UN REPOSE JAMBE 8kg DO NOT SIT OR STEP ON THE LEG PLATE. NE PAS S'ASSEOIR OU MONTER SUR LES PAY SPECIAL ATTENTION WHEN ACCORDEZ UNE ATTENTION PLAQUES JAMBIÈRES, SINON LA TABLE THE TABLE MAY FALL OR THE PLATE MAY BANDING IT. PARTICULIÈRE LORS DU SANGLAGE. PEUT BASCULER OU LES PLAQUES COME DOWN AND CAUSE INJURY. JAMBIÈRES PEUVENT SE DÉCLENCHER CE QUI PEUT PROVOQUER DES BLESSURES. (3) C653624 (4) C655732 (5) C653614 **A** WARNING A MISE EN GARDE **A** MISE EN GARDE KEEP YOUR FINGERS AND MAINTENEZ VOS DOIGTS ET VOS A Patient shall be set up Un malade sera mis loin HANDS AWAY FROM A MOVING MAINS ÉLOIGNÉS DE TOUTE PARTIE du rail du côté plus que to more than 1cm apart from a side rail so that a 1cm afin qu'unmalade PART OF THE UNIT DURING THE MOBILE DE L'UNITÉ DURANT LE OPERATION ON THE TABLE. FONCTIONNEMENT DE LA TABLE. patient does not touch ne touche pas le rail du OTHERWISE THEY MAY GET DANS LE CAS CONTRAIRE, VOUS on side rails. côté. HURT. RISQUEZ D'ÊTRE HEURTÉ. (7) C656740 (6) C656310 (MOT-VS600DK/MOT-VS600DHK only) **MISE EN GARDE** NE PAS RETIRER LE COUVERCLE OU TO REDUCE THE RISK OF ELECTRIC A WARNING OMAGE OSIBLE TABLE DAMAGE DOMMAGE POSSIBLE À LA TABLE BETRACT KIDRY LIFT COMPLETELY BEFORE RAISING BACK SECTION LEVAGE AVANT DE LEVER LA PARTIR ARRIÈRE SHOCK, DO NOT REMOVE COVER LA FACE ARRIÈRE AFIN DE RÉDUIRE OR BACK. LE RISQUE D'ÉLECTROCUTION. REFER SERVICING TO QUALIFIED SERVICE PERSONNEL. CONFIER L'ENTRETIEN AU PERSONNEL DE SERVICE QUALIFIÉ. REFER TO ACCOMPANYING SE RÉFÉRER AUX DOCUMENTS (3) DOCUMENTS D'ACCOMPAGNEMENT (8) C655803 (9) C657333 CAUTION ATTENTION CAUTION CAUTION CAUTION CAUTION CAUTION CAUTION CAUTION CONTROL UNIT SERVICE SERVICES SE LE COMMUTATEUR DE SECOURS EST PREVU POUR ÊTRE UTILISÉ LORSQUE LE BOTTIER DE COMMUNDE EST DEFECTUEIX. UTILISE TOUJORS LE BOTTIER DE COMMUNDE DES LORS QU'ILES ET EN ETAT NORMAL LE COMMUTATEUR DE SECOURS N'AYANT AUCINE FONCTION LUI PERMETTANT DE LIMITER LE FONCTIONNEMENT DE LA TABLE. CELLE-OF PUET FERE ENDOMMAGÉE LORSQU'ELLE EST UTILISEE AVEC LE COMMUTATEUR DE SECOURS. OURSQUE VOUS DE CONTINUELLEMENT SURVEILLER LE MOUVEMENT DU PLATEAU. SI LE PLATEAU VIENT À TOUCHER QUELQUE CHOSC QU'ENDEMENT DE VIENT SI LE PLATEAU VIENT À TOUCHER QUELQUE CHOSC QU EST ENDOMMAGE D'UNE QUELCONQUE MANIÈRE DURANT L'OPERATION. CESSEZ IMMEDIATEMENT D'UTILISER LA TABLE.

LA TABLE.

Other labels (1/2)



(1000

交換部品 REPLACEMENT PART

BATTERIES 6V10Ah

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EC REP

SN ZUHO Corpora Hz VA



Symbol mark for labeling

Symbol	Description	Label no.
	Indicates a possibility of injury or even death if operates the table without following the warning	(1) (2) (3) (4) (6) (7) (8) (9)
\bigcirc	General prohibition sign	(2) (7)
	No sitting	(2)
	No stepping on surface	(2)
	General mandatory action sign	(7)
V	Emergency stop	(5)
E	Refer to the operator's manual	(5) (7) (20) (22) (23)
\sim	Indicates AC power supply	(20)
IPX4	Enclosure Class (Splash-proof)	(20)
SN	Serial Number	(20)
REF	Catalogue Number	(20)
X	Indicates waste disposal information	(20)
EC REP	European authorized representative	(20)
MD	Medical Device	(20)
Å	Equalization terminal	(21)
*	Indicates protection against electric shock and defibrillator (Class B)	(24)
۲ ۲ ۲۰	Defibrillation - proof Type B applied part	(29) (30) (31) (32)
	Date of manufacture	(20)
	Manufacturer	(20) (29) (30) (31) (32)
	Conforms to BS 7177:2008 for medium hazard	(29) (30) (31) (32)

3. Section Introduction

3.1 Main unit



- * 1: The cordless hand controller and the foot switch are optional.
- * 2: The head section, the back section and the leg section can be detached.
- * 3: Only the MOT-VS600DK and MOT-VS600DHK.

3.2 Hand controller



NOTE

- If $\underline{\mathbb{E}}$ is pressed, the pilot lamp lights up. Pressing any function switch while the pilot lamp is lighting up, that function will operate while the switch is pressed.
- About 7 minutes of halting will be needed when operating the table continuously for about 3 minutes. If the motor gets overheated you will not be able to operate the table. When overheat occurs, about 60 minutes of rest will be needed to operate the table as usual.

3.3 Cordless hand controller (optional)



Section Introduction

3

NOTE

- If *E* is pressed, the pilot lamp lights up. Pressing any function switch while the pilot lamp is lighting up, that function will operate while the switch is pressed.
- About 7 minutes of halting will be needed when operating the table continuously for about 3 minutes. If the motor gets overheated you will not be able to operate the table. When overheat occurs, about 60 minutes of rest will be needed to operate the table as usual.
- Up to 3 channels can be set on the cordless hand controller. If you need the setting, contact your distributor or MIZUHO.

3.4 Foot switch (optional)

Common to MOT-VS600



4. Operation

4.1 Installation and battery charging



- Use the equipotential wire to ground the equipotential terminal to the medical grounding terminals.
 Prepare the equipotential wire yourself.
- When moving this product, carry it out with two or more persons.



Installing the operating table

1. Move the operating table to a flat area.

2. Check the battery lamp.

If the battery lamp (orange) on the hand controller flashes, battery charging is required.



→Battery lamp (Orange • flash)

3. If the battery indicator shows empty (red), battery charging is required.



Installation space

This product requires the installation space shown as below.



Charging the battery



- Connect the product to the power source provided with the protective grounding to prevent the risk of an electrical shock.
- Make sure to use the dedicated power cord with the "MIZUHO" logo.
- Before inserting the power cord into the power connector, check that the power connector does not have any fluid in it nor is dusty.
- If the battery deteriorates, it will not be available for the operating table when AC power is not supplied due to power outage etc.

1. Connect the power connector of the product and the medical grade outlet with the power cord.



- **2.** When turning on the power switch, battery charging starts. While charging, the battery indicator sequentially lights up orange.
- **3.** When the battery indicator sequentially lights up orange and green, charging is completed.



NOTE

- Make sure to charge the battery when initially using the purchased product, or when it has not been used for a long time. The battery naturally discharges itself when it is not being used and is being stored.
- If the battery lamp on the hand controller flashes or the battery indicator on the lower part of the operating table lights up only red while using the operating table with the battery power, charge the battery immediately. When the battery is discharged, only the AC power is available and will not be able to use the battery power.
- The operating table battery replacement time is about 2 years. Once it reaches its replacement time, request your distributor or MIZUHO for a battery replacement.
- The lifespan for the battery varies greatly depending on operating conditions. The battery could degrade quicker if charging and discharging the battery are repeated frequently after using the operating table for short operations.
- It is recommended that you charge the battery once a week on weekends, since it takes about 10 hours to fully charge the battery.
- If the battery is discharged soon even after charging, the battery may be degraded. Request repairs from your distributor or MIZUHO.
- While the battery is being charged, you can operate the operating table by using and the hand controller.

Attaching the hand controller

1. Align the connector with the guide and insert it into the receptacle properly.



Detaching the hand controller

- **1.** Turn the connector ring in the direction of the arrow until it stops.
- 2. Once it stops, pull out the connector.



Using the self-diagnostic function

This product is equipped with an embedded self-diagnostic function capable of checking the communication status between the main unit and the hand controller.

- **1.** Connect the power connector of the product and the medical grade outlet with the power cord.
- **2.** Press $\begin{bmatrix} \sqrt{3}/7 \\ 0/6 \end{bmatrix}$ on the hand controller.
- **3.** Press $\underbrace{\mathbb{P}}_{\mathbb{E}}$ and one of the function switches on the hand controller at the same time.

If two lines of green on the battery indicator light up, the hand controller is functioning properly.



Operating the cordless hand controller (optional)



- · Do not mix old and new batteries, nor different battery types.
- · Do not subject the cordless hand controller to shocks or get it wet. Malfunction may occur.
- When using the cordless hand controller, an operating failure may occur, such as an interrupted connection caused by infrared and ambient light from peripheral medical devices.

Preparation

- 1. Use a flat-blade screwdriver to remove the battery lid of the cordless hand controller.
- 2. Insert three AA batteries.
- **3.** Attach the battery lid.



Operation

1. Aim the cordless hand controller toward the light receiving section on the operating table and operate the cordless hand controller.



NOTE

- The average battery lifespan is 1 year (depending on usage conditions). Replace the batteries if operation via the cordless hand controller becomes unstable.
- If the power cord is disconnected and the operating table is left unpowered for 6 days or more, the power switch on the cordless hand controller will not function in order to save batteries. To restart the operating table which has been unpowered for 6 days or more, turn on the operating table via the hand controller connected to the table.
- To turn on/off the power with the cordless hand controller, check that the battery of the operating table is fully charged.

NOTE

- Objects such as linen or devices between the cordless hand controller and the light receiving section on the operating table will block the transmission from the cordless hand controller.
- If operation of the cordless hand controller causes other electric devices to start, or the operating table is started by another remote control, contact your distributor or MIZUHO.

4.2 Turning on/off the power

When the medical grade outlet is used

• Turning on the power

1. Turn on the power switch on the base.

The power switch (green) and the battery indicator will be lighted on.



Power switch (Green·light up)

2. Press $\bigcirc \bigcirc \bigcirc \bigcirc \bigcirc$ on the hand controller.

The power lamp (green) on the hand controller lights up and the power is turned on.



NOTE

- In an emergency or when turning off the power completely, disconnect the power cord from the medical grade outlet.
- If you press an on the hand controller before turning on the power switch on the base, the battery power will be turned on.

Operation

• Turning off the power

1. When the power is turned on, press ()) on the hand controller.

Power lamp (Green · go out)

The power lamp (green) on the hand controller goes out.



NOTE

If you turn off the power switch on the base before pressing $\underbrace{\textcircled{ob}}{\textcircled{ob}}$ on the hand controller, the battery power will be turned on.

2. Turn off the power switch on the base.

The power switch (green) and battery indicator go out, and the power is turned off.



When the battery is used

• Turning on the power

1. When the power cord is not connected to the power connector or the power switch on the base is turned off, press on the hand controller.

The power lamp (green) and battery lamp (orange) light up, and the power is turned on.



• Turning off the power

1. When the power switch on the base is turned off, press on the hand controller.

The power lamp (green) and battery lamp (orange) go out, and the power is turned off.



NOTE

When using the battery, the power is turned off automatically 15 minutes after the last operation.

Operation

4.3 Operating the emergency stop switch

In an emergency, you can stop the operating table from moving by pressing the emergency stop switch.



The emergency stop switch must be used only in an emergency.

Operating in an emergency

1. Press the emergency stop switch.

The buzzer sounds and the operating table stops.



NOTE

The emergency stop switch is located on the lower side of the auxiliary switch.

Canceling operations



To reset the operating table to the original position in an emergency where, for example, an operator's hand is caught in a gap of the operating table, press the switch on the hand controller to move the table in the opposite direction.

1. After the operating table stops, turn the emergency stop switch in the direction of the arrow or pull it forward to cancel the emergency stop switch.

The buzzer stops sounding.



4.4 Fixing and unfixing the operating table

Fixing the operating table



After activating the brake, check that the operating table is fixed securely.

1. Press $\begin{bmatrix} \text{IMENSIZE} \\ \end{bmatrix}$ first and then $\begin{bmatrix} \text{IMEE } P \\ 0 \end{bmatrix}$.

The brake is activated to fix the operating table, and the power lamp on the base turns green. Operations such as raising the tabletop will not operate until the fixing of the operating table is completed.



NOTE

- The operating table can be fixed or unfixed once
 and are pressed.
- It takes about 12 seconds until the operating table is fixed or unfixed.
- If the brake cannot be activated and the operating table is not fixed, refer to "Troubleshooting." (→ Page 56)

Unfixing the operating table



Do not unfix the operating table with a patient on it. The patient may fall from the operating table.

NOTE

Before placing the patient on the operating table, fix the operating table with the slide at the center position.

1. Press $\begin{bmatrix} \text{BESS} \\ \text{E} \end{bmatrix}$ first and then $\begin{bmatrix} \text{BESS} \\ \text{B} \end{bmatrix}$ for 1 second or more.

The brake is released for unfixing the operating table. The power lamp on the base turns orange, and the operating table can be moved.



Operation

4.5 Tilting the tabletop laterally



When you tilt the tabletop laterally with a patient on the operating table, make sure to use the fixing accessory for the MIZUHO operating table. The patient may fall from the operating table.

Tilting to the left

1. Press \mathbb{E} first and then \mathbb{E} .

The tabletop tilts to the left in the view from the head side.









620 mm (24.41 in) or less

Operation

4

Tilting to the right

1. Press $\overset{\text{(HEM)}\mathcal{I}}{\mathbb{E}}$ first and then $\overset{\text{(HL RIM)}}{\overset{\text{(HL RIM)}}{\overset{(HL RIM)}}{\overset{(HL RIM)}}}}}}}}}}}}},$

The tabletop tilts to the right in the view from the head side.



NOTE

• The maximum angle achieved in the right down position is 35° from the level position.



• When the height from the floor to the tabletop is in the range of 620 mm (24.41 in) to 720 mm (28.35 in), the maximum angle of the right down position is 30°.





4.6 Trendelenburg



When you operate the Trendelenburg operation with a patient on the operating table, make sure to use the fixing accessory for the MIZUHO operating table. The patient may fall from the operating table.

Reverse Trendelenburg (Head up)

1. Press $\begin{bmatrix} \text{DERVIZE} \\ \end{bmatrix}$ first and then $\boxed{\textcircled{}}$.

The tabletop moves to the head up position.





NOTE

• The maximum angle achieved in the head up position is 30° from the level position.



- When Trendelenburg is operated in the opposite direction from the current Trendelenburg position, it will stop in the level position. Once it stops, release the switch and press it once again; it will be tilted to the maximum angle.
- When the height from the floor to the tabletop is in the range of 620 mm (24.41 in) to 720 mm (28.35 in), the maximum angle of the reverse Trendelenburg (head up) position is 20° (*1) or 15° (*2).



(24.41 in) or less

Trendelenburg (Head down)



- · Do not operate until the tip of the head section contacts the floor. It may get damaged.
- · Do not operate until the head section fixing handle contacts the base. It may get damaged.



Head section fixing handle

1. Press $\begin{bmatrix} \text{REROIZE} \\ \end{bmatrix}$ first and then $\begin{bmatrix} \text{TEROIL} \\ \bullet \end{array}$.

The tabletop moves to the head down position.





NOTE

• The maximum angle achieved in the head down position is 40° from the level position.



· When the height from the floor to the tabletop is in the range of 620 mm (24.41 in) to 720 mm (28.35 in), the maximum angle of the Trendelenburg (head down) position is 20° (*1) or 18° (*2).



4.7 Back section up/down



Keep your hands away from the following gap during the operation of the table. Otherwise you may get injured.

- Gap between the back section and seat section
- Gap between the back section gear and rack



Operation

Moving up the back section

1. Press $\begin{bmatrix} \text{ERGUZE} \\ \mathbb{E} \end{bmatrix}$ first and then $\begin{bmatrix} \text{MAX} & \text{W} \\ \textbf{L} \end{bmatrix}$.

The back section moves up.



Moving down the back section

1. Press $\begin{bmatrix} \text{PREGIZE} \\ \textbf{E} \end{bmatrix}$ first and then $\begin{bmatrix} \text{ACK DOWN} \\ \textbf{F} \end{bmatrix}$.

The back section moves down.



NOTE

- The maximum angle achieved in the back section up position is 90° from the level position.
- The maximum angle achieved in the back section down position is 40° from the level position.
- When the tabletop center point is slid in the foot direction beyond the center position, the back section will not move down beyond the level position and the buzzer will sound. If the tabletop center point is slid in the head direction beyond the center position, the back section will move down.


4.8 Changing the tabletop height



Do not move down the tabletop with the leg section bent down at 90°. The tip of the leg section may come in contact with the floor or the base and get damaged.



Moving up the tabletop

1. Press $\begin{bmatrix} \text{Definition} \\ \textbf{B} \end{bmatrix}$ first and then $\begin{bmatrix} \text{MAE } \textbf{B} \\ \textbf{B} \end{bmatrix}$.

The tabletop moves up.



NOTE

- The maximum height from the floor to the tabletop upper surface is 1060 mm (41.73 in) (*1) or 1000 mm (39.37 in) (*2).
- *1: MOT-VS600DH/ MOT-VS600DHK *2: MOT-VS600D/MOT-VS600DK

Operation

Moving down the tabletop

1. Press \mathbb{E} first and then \mathbb{H} .

The tabletop moves down and stops at the height of 620 mm (24.41 in) from the floor.

Once it stops, release the switch and press it once again; the tabletop will move down to the minimum height.



NOTE

- The minimum height from the floor to the tabletop upper surface is 580 mm (22.83 in)(*1) or 520 mm (20.47 in)(*2).
- *1: MOT-VS600DH/MOT-VS600DHK
- *2: MOT-VS600D/MOT-VS600DK

NOTE

[MOT-VS600D/VS600DH]

- If the reverse Trendelenburg angle is 15° or more, or the Trendelenburg angle is 18° or more, or if the lateral tilt angle is 30° or more, the tabletop will stop at a height of 720 mm (28.35 in) from the floor.
- If the Trendelenburg (head up or down) angle is 5° or more, or if the lateral tilt angle is 10° or more, the tabletop will stop at a height of 620 mm (24.41 in) from the floor.

[MOT-VS600DK/VS600DHK]

- If the Trendelenburg (head up or down) angle is 20° or more, or if the left down angle is 15° or more, or the right down angle is 30° or more, the tabletop will stop at a height of 720 mm (28.35 in) from the floor.
- If the Trendelenburg (head up or down) angle is 5° or more, or if the left down angle is 10° or more, or the right down angle is 15° or more, the tabletop will stop at a height of 620 mm (24.41 in) from the floor.

4.9 Sliding the tabletop



1. Press $\begin{bmatrix} \text{EHERBIZE} \\ \blacksquare \end{bmatrix}$ first and then $\begin{bmatrix} \text{SLIDE FOOT} \\ \bullet \blacksquare \end{bmatrix}$.

The tabletop slides in the foot direction.



Sliding in the head direction

1. Press $\left[\stackrel{\text{DERMIZE}}{\mathbb{E}} \right]$ first and then $\left[\stackrel{\text{SLIDE HEAD}}{\longleftarrow} \right]$.

The tabletop slides in the head direction.



NOTE

- The slide's maximum travel from the center position of the tabletop is as follows.
 - Foot direction: 415 mm (16.34 in)
 - Head direction: 250 mm (9.84 in)
- When sliding is operated in the opposite direction, it will stop at the center position. Once it stops, release the switch and press it once again; it will be slid to the maximum range.

[MOT-VS600DK/600DHK]

- If the Trendelenburg (head up or down) angle exceeds 20°, the tabletop cannot be slid to the head direction or the foot direction beyond the center position, and the buzzer will sound.
- If the lateral tilt (left down or right down) angle exceeds 15°, the tabletop cannot be slid to the head direction or the foot direction beyond the center position, and the buzzer will sound.
- If the back section is lower than the level position, the tabletop cannot be slid to the foot direction beyond the center position and the buzzer will sound. When moving up the back section higher than the level position, the tabletop can be slid to the foot direction.



Operation

4.10 Flexing or reflexing the tabletop



Keep your hands away from the following gap during the operation of the table. Otherwise you may get injured.

- Gap between the back section and seat section
- Gap between the back section gear and rack



Flexing the tabletop



Do not flex the tabletop with the leg section bent down. The leg section may come in contact with the floor and get damaged.

1. Press \mathbb{E} first and then \mathbb{E} .

The back section bends downward and the seat section turns to the reverse Trendelenburg (head up) position.



NOTE

• When the tabletop center point is slid in the foot direction beyond the center position, flexing will not operate and the buzzer will sound. If the tabletop center point is slid in the head direction beyond the center position, flexing will operate.



• When the tabletop in the flex or reflex position is bent in the opposite direction, it will stop in the level position. Once it stops, release the switch and press it once again; it will bend to the flex or reflex position.

4

Operation

Reflexing the tabletop



Do not reflex the tabletop with the operating table lowered. The tabletop including the slide cylinder may come in contact with the base and get damaged.

1. Press \mathbb{E} first and then \mathbb{E} .

The back section bends upward and the seat section turns to the Trendelenburg (head down) position.



NOTE

[MOT-VS600DK/VS600DHK] When the kidney bridge is moved up, the reflexing position will stop at the position the back section is bent at 45°. If the kidney bridge is moved down, the back section will be bent to 90°.



4.11 Change height of the kidney bridge (MOT-VS600DK/MOT-VS600DHK only)

Moving up the kidney bridge

1. Press $\begin{bmatrix} \text{Element} \\ \textbf{E} \end{bmatrix}$ first and then $\begin{bmatrix} \text{KINEY } \\ \textbf{P} \end{bmatrix}$.

The kidney bridge moves up.





Moving down the kidney bridge

The kidney bridge moves down.



NOTE

- The highest position is 150 mm (5.91 in) from the surface of the tabletop.
- The lowest position is the same level of the surface of the tabletop.
- When the back section is bent up to 45° or more above the level, the kidney bridge will not move up and the buzzer will sound. If the back section is bent down to 45° or less the level, the kidney bridge will move up.



- When the back section is bent up to 45° or more above the level at the reflexing position, the kidney bridge will not move up and the buzzer will sound. If the back section is bent down to 45° or less the level, the kidney bridge will move up.
- When the back section is bent up to 45° or more above the level at the beach chair position, the kidney bridge will not move up and the buzzer will sound. If the back section is bent down to 45° or less the level, the kidney bridge will move up.

4.12 Return to level

Return the tabletop to the level position

1. Press $\begin{bmatrix} \text{DERNIZZ} \\ E \end{bmatrix}$ first and then $\boxed{\bullet}$.

The tabletop from the Trendelenburg, lateral tilting, back section up/ down, flexing and *kidney bridge lifting positions will return to the level position.

* MOT-VS600DK/MOT-VS600DHK only



NOTE

Elevation, sliding and braking do not function.

4.13 Adjusting the head section

The head section can be bent in 15° increments, to 4 different positions upward (maximum 60°) and to 6 different positions downward (maximum 90°). The head section can also be detached.



The head section weighs 7 kg (15.4 lbs). Pay special attention when handling it. It may drop and cause damage or injury.

Head section up/down

1. Pull the head section flexing lever toward the head direction. The head section can be bent upward and downward. When releasing the lever, the head section is fixed in that position.

NOTE

When bending upward, the head section can be lifted and bent without pulling the head section flexing lever.



Detaching the head section

- **1.** Loosen the two head section fixing handles located on the lower side of the back section.
- 2. Hold both sides of the head section firmly and pull straight.



Operation

Attaching the head section



Make sure to tighten the head section fixing handles securely. If the head section moves with the handles in a loosened state, the patient may get injured.



- Make sure to insert the head section into the back section completely. If the operating table is used with the head section inserted incompletely, it may get damaged.
- Do not move the operating table by pulling on the head section. It may drop and cause damage or injury.
- Hold both sides of the head section firmly and align the head section insertion shafts with the back section reception holes, and insert.
- 2. After checking that the head section is completely inserted, tighten the two head section fixing handles located on the lower side of the back section to fix it.



4.14 Attaching/Detaching the back section

The back section can be detached.



The back section weighs 10 kg (22 lbs). Pay special attention when handling it. It may drop and cause damage or injury.

Detaching the back section



Do not detach the back section while the head section is inserted into it. If the back section with the head section inserted is detached, it may drop and cause injury.

- Pull up the back section attaching/detaching levers on both sides of the lower side of the back section at the same time.
- 2. While still pulling up the back section attaching/detaching levers, hold the back section firmly and pull straight.



4

Attaching the back section



- Make sure that the back section is inserted completely. If the operating table is used without the back section being completely inserted into it, the patient may get injured by the back section being moved.
- When fastening the belt to secure the patient, make sure to avoid the back section attaching/detaching levers. If the belt is fastened over the back section attaching/detaching levers, they may be pressed and the back section may become detached.
- **1.** Check that the right and left positions of the back section insertion shafts are not misaligned.



Back section insertion shafts

2. Hold the back section firmly and align the back section reception holes with the insertion shafts, and insert.



3. Pull the back section, and make sure that the back section is inserted completely.

NOTE

You can install the optional dedicated accessories to the back section insertion shafts. For details, refer to the instruction manual of the accessories.

Operation

NOTE

- If the back section is operated with it detached, the back section insertion shaft's right and left positions are misaligned, with the result that the back section cannot be attached. If the back section insertion shaft's right and left positions are misaligned, attach the back section according to the procedures that are described on the next page.
- If the back section does not feel right when it is attached, the back section insertion shaft's right and left positions might be misaligned. If it is forcibly attached, then that may cause it to be faultily installed or get damaged. Attach the back section according to the procedures that are described on the next page.

Attaching the back section

If the back section insertion shaft's right and left positions are misaligned, attach the back section according to the following procedures.



Make sure that the back section is inserted completely. If the operating table is used without the back section being completely inserted into it, the patient may get injured by the back section being moved.

NOTE

You can install the optional dedicated accessories to the back section insertion shafts. For details, refer to the instruction manual of the accessories.

1. Press First and then on the hand controller until the back section insertion shafts stop.



2. Press $\underbrace{\mathbb{E}}_{\mathbb{E}}$ first and then $\underbrace{\mathbb{E}}_{\mathbb{E}}$ on the hand controller until the tabletop stops.



3. Insert the back section into the back section insertion shafts.



4. Pull the back section, and make sure that the back section is inserted completely.

4.15 Adjusting the leg section

The leg section can be bent, stretched outward and detached separately on the left and right side. The leg section can be bent downwards by up to 90° and stretched outwards by up to 50° (center of the first joint) or 40° (center of the second joint).



The leg section weighs 8 kg (17.6 lbs) (each). Pay special attention when handling it. It may drop and cause damage or injury.

Leg section up/down



Make sure to lock the leg section flexing lever. If it is not sufficiently locked, the leg section will move, and the patient or operator may get injured.



- Pull the lever slowly. Otherwise you may pinch your fingers and get injured.
- Do not move down the tabletop or operate reverse Trendelenburg position with the leg section bent down at 90°.The tip of the leg section may come in contact with the floor or the base and get damaged.





NOTE

Depending on the sliding position, the leg section may come in contact with the slide cylinder when bending the leg section downwards.

- **1.** Hold the tip of the leg section and grab the leg section flexing lever.
- **2.** Lower the lock while pressing the leg section flexing lever and pull the lever slowly toward you.



- 1) Press the lever
- 2) Lower the lock
- 3) Pull the lever slowly
- **3.** Bend the leg section.
- **4.** At the setting position, press the leg section flexing lever until it clicks and locks.

NOTE

If a yellow mark can be seen on the lock of the leg section flexing lever, it has not been locked properly. Press the leg section flexing lever until the yellow mark cannot be seen to completely lock. Operation

Outstretching the leg section



Make sure to tighten the leg section outstretching handle securely. If the leg section moves with the handle in a loosened state, the patient may get injured.

- **1.** Hold the tip of the leg section and loosen the leg section outstretching handle.
- **2.** Pull the leg section outward.
- **3.** At the setting position, tighten the leg section outstretching handle to fix the leg section.



NOTE

The handgrip can be changed to any direction by turning the leg section outstretching handle while pulling it downward.

Detaching the leg section



Attach and detach the leg section with it horizontally positioned. Otherwise it may drop and cause damage or injury.

1. Hold the leg section firmly and pull the leg section out while pressing the leg section fixing lever.



Attaching the leg section



After attaching the leg section, check that the leg section is inserted completely by shaking the leg section back and forth. If the operating table is used without the leg section being completely inserted into it, the patient may get injured by the leg section being moved.

1. Hold the leg section firmly and align the leg section insertion shafts (large and small) with each leg section reception holes (large and small), and insert.



5.1 Inspection before and after use



Make sure to inspect the items below before and after use. If there are any abnormalities, request your distributor or MIZUHO for repairs. Otherwise it may cause problems during surgery.

Inspect the items below. If there is any problem, request your distributor or MIZUHO for repair.



(1) Table pads

Before use

• Check all the table pads for any damage.

• After use

Check all the table pads for any damage or dirt.

(2) Backlash of the tabletop

Before use

• Check all the tabletops for any backlash when jiggling both sides of the back section.

(3) Tabletops

Before use

Check all the tabletops for any damage.

• After use

Check all the tabletops for any damage or dirt.

(4) Hand controller

Before use

- Press the power ON/OFF switch on the hand controller to see if the power lamps on the hand controller and the base light up.
- Press the switches on the hand controller to see if all functions are working properly.

(5) Oil leakage

Before and after use

Check the floor or the base surface for any hydraulic oil.

(6) Battery

Before use

Check if the battery has been charged.

(7) Power cord and plug

Before use

• Check the power cord for any exposed wire and the plug for any damage.

(8) Auxiliary switch

Before use

• Press the auxiliary switch to see if all functions are working properly.

(9) Emergency stop switch

Before use

• Check if the emergency stop switch is working properly.

Cleaning and disinfection 5.2



- In order to prevent infections, make sure to clean and disinfect the operating table after using it.
- Make sure to unplug the power cord and turn off the main power when cleaning and disinfecting the operating table. The operating table may actuate and cause injury.



- · Make sure to use MIZUHO authorized disinfectants. Failure to do so may cause the operating table to become discolored or deformed.
- When cleaning the table pads, take care not to get liquids on the fasteners. If liquids get on the waterproof fasteners, wipe them off quickly. If the waterproof fastener gets wet and the liquids infiltrate inside, it may cause degradation.

Cleaning and disinfection procedures

- **1.** Turn off the power and disconnect the power cord from the medical grade outlet.
- 2. Detach all the table pads from the operating table.
- **3.** Use a lint-free cloth soaked with proper volume of disinfectant to wipe off the upper, sides, and back side of the table pads.
- **4.** As with step 3, disinfect the surfaces of the tables and side rails.
- 5. Wipe off the operating table with a clean dry cloth within 15 minutes after disinfecting it.

Disinfectants

Authorized disinfectants are as shown below.

	Disinfectant name	Concentration
а	Sodium hypochlorite	0.1%
b	Hypo Alcohol	10%
С	Chlorhexidine gluconate	0.5%
d	Benzalkonium chloride 10	
е	Ethanol	80%
f	Isopropyl alcohol	99.5%

NOTE

Use the disinfectant according to the operator's manual and instructions for disinfectant use.

Maintenance by providers 5.3

For safety use of this product, make sure to perform the periodical inspection by MIZUHO or the certified provider once a year.

Inspections and maintenances by other than MIZUHO or the certified provider could cause any adverse event such as deterioration of the performance and functions.

For request for the periodical inspection, contact your distributor or MIZUHO.

5.4 Periodic replacement parts

MIZUHO specifies that the following parts need to be periodically replaced for safety use.

The replacement time is a rough standard. Earlier replacement may be required depending on the usage condition and/or usage frequency.

Request your distributor or MIZUHO for replacements.



Parts	Replacement time (years)
Battery	2
Hand controller	4 to 6
Caster	5 to 7
Brake rubber	3 to 5
Power cord	5 to 7

The aforementioned are estimated times. The replacement time may depend on usage condition and/or usage frequencies.

5.5 Version information of the software

The version information for the control software which is installed in the operating table can be verified via the label that is directly applied on the on-board microcomputer.



The version information of the software is mainly for the service and maintenance personnel as needed. For confirmation, open the base cover to access the control board.

6.1 Specification table

VerticityMathematical StatesKidney bridge : Note 9Control devicesCordless hand controller : Note 2Elevation, Trendelenburg, Lateral tilt, Back section up/down, Sliding, Flexing, Return to level, Brake, E switch, Power ON/OF Kidney bridge : Note 9Control devicesAuxiliary switchElevation, Trendelenburg, Lateral tilt, Back section up/down, Sliding, Flexing, Return to level, Brake, E switch, Power ON/OF Kidney bridge : Note 9Foot switch: Note 2Foot switch: Note 2Foot switch: Note 2Elevation, Trendelenburg, Lateral tiltBenergency stop switchElevation, Trendelenburg, Lateral tiltUp60°Up60°Leg section up/ down angleDownLeg section outstretchingDownEach for left and right50°: Center of the first joint / 40°: Center of the second joint	Product description		MOT-VS600D	MOT-VS600DH	MOT-VS600DK	MOT-VS600DHK		
Image: Second			Highest					
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Find controller Sliding, Flexing, Return to level, Brake, E switch, Power ON/OF Kidney bridge : Note 9 Cordless hand Control devices Cordless hand Auxiliary switch Elevation, Trendelenburg, Lateral tilt, Back section up/down, Sliding, Flexing, Return to level, Brake, E switch, Power ON/OF Kidney bridge : Note 9 Control devices Auxiliary switch Foot switch: Note 2 Emergency stop switch Head section Up Gow Up Gow Q0°	fun	Kidney bridge	Highest	-	_	150 mm	(5.91 in)	
Find controller Sliding, Flexing, Return to level, Brake, E switch, Power ON/OF Kidney bridge : Note 9 Cordless hand Control devices Cordless hand Auxiliary switch Elevation, Trendelenburg, Lateral tilt, Back section up/down, Sliding, Flexing, Return to level, Brake, E switch, Power ON/OF Kidney bridge : Note 9 Control devices Auxiliary switch Foot switch: Note 2 Emergency stop switch Head section Up Gow Up Gow Q0°	iotive .	Return to level		Trendelenbu		•	own, Flexing,	
Find controller Sliding, Flexing, Return to level, Brake, E switch, Power ON/OF Kidney bridge : Note 9 Cordless hand Control devices Cordless hand Kontroller : Note 2 Elevation, Trendelenburg, Lateral tilt, Back section up/down, Sliding, Flexing, Return to level, Brake, E switch, Power ON/OF Kidney bridge : Note 9 Control devices Auxiliary switch Foot switch: Note 2 Emergency stop switch Head section Up Gown	οu	Brake						
Control devices Controller : Note 2 Sliding, Flexing, Return to level, Brake, E switch, Power ON/OF Kidney bridge : Note 9 Control devices Auxiliary switch Elevation, Trendelenburg, Lateral tilt, Back section up/down, Sliding, Flexing, Return to level, Brake, E switch, Power ON/OF Kidney bridge : Note 9 Foot switch: Note 2 Elevation, Trendelenburg, Lateral tilt Emergency stop switch Emergency stop switch Stop Head section Up 60° Up 90°	Elect		Hand controller	Elevation, Trendelenburg, Lateral tilt, Back section up/down, Sliding, Flexing, Return to level, Brake, E switch, Power ON/OFF,				
Auxiliary switch Sliding, Flexing, Return to level, Brake, E switch, Power ON/OF Kidney bridge : Note 9 Foot switch: Note 2 Elevation, Trendelenburg, Lateral tilt Emergency stop Stop witch Up Up 60° 90°		Control devices		Sliding, Flexing, Return to level, Brake, E switch, Power ON/OFF,				
Note 2 Elevation, Trendelenburg, Lateral tilt Emergency stop switch Stop Head section Up Up/down angle Down			Auxiliary switch	Sliding, Flexing, Return to level, Brake, E switch, Power ON/OFF			•	
Head section Up 60° up/down angle Down 90°				Elevation, Trendelenburg, Lateral tilt			tilt	
up/down angle				Stop				
section up down angleDown90°Leg section up/ down angleDown90°Leg section outstretching angleDown90°Section outstretching angleEach for left and right50°: Center of the first joint / 40°: Center of the second joint	Head section Up		60°					
Leg section up/ down angle Down 90° Leg section outstretching angle Down 90° Each for left and right 50°: Center of the first joint / 40°: Center of the second joint	S	up/down angle	Down	90°				
Leg section outstretching angle Bach for left and right 50°: Center of the first joint / 40°: Center of the second joint	nction		Down	90°				
	⁄lanual fu	-		50°: Center of the first joint / 4		40°: Center of the second joint		
Detachment Head section / Back section / Leg section (left/right)	~	Detachment						
Others Emergency brake release knob		Others						
Classification as per 60601-1 Class I Equipment / Type B Applied Parts / IPX4 Rated (internal power source device: Note 3)	ating	Classification as	per 60601-1					
Supply voltage AC 100 - 240 V	Ř	Supply voltage						

	Rated supply frequency	50/60 Hz			
	Battery power	DC 24 V			
0	Battery charging time	Up to 10 hours (cumulative operation time when fully charged: up to 40 min.): Note 14			
Rating	Power consumption	450 VA			
Ĕ	Operating voltage	DC 5 V , 24 V			
	Duty cycle (per 1 cycle)	3 min on, 7 min off: Note 4			
	Others	Recovery from defibrillator is within 5 seconds. Conformity to EMC Standard IEC 60601-1-2: 2020			
Dimension	Tabletop	2124 mm (83.62 in) (L) x 500 mm (19.69 in) (W): Note 5			
Dime	Base	1133 mm (44.61 in) (L) x 483 mm (19.02 in) (W): Note 6			
Wei	ght	390 kg (860 lbs) 400 kg (880 lbs) 410 kg (900 lbs)			
		Elevation: 450 kg (1000 lbs)			
vvei	ght capacity: Note 11	Operations other than elevation: 360 kg (800 lbs)			
Tran	sitable height and width	Height: 10 mm (0.39 in) / Width: 80 mm (3.15 in)			
		Anti-defibrillation device			
		Flame resistance: BS 7177 Fire Test on Mattresses, Sofas and Bases			
T-1-1		Classification: Conforms to BS 7177:2008 for medium hazard (Medium Hazard [5])			
Iabi	e pad	Manufacturing method via waterproofing:			
		Wanutacturing method via waterproofing: Welder processing: Note 12			
		Waterproof fasteners: Note 12			
	Temperature	10 to 40°C (50 to 104°F): Note 10			
		30 to 75%: Note 10			
Dera	Atmospheric pressure	700 to 1060 hPa: Note 10			
O E Others Allowable altitude for use is 3000 m or lo		Allowable altitude for use is 3000 m or lower.: Note 10			
		10 to 85% (without moisture condensation): Note 7			
Trans	Atmospheric pressure	700 to 1060 hPa: Note 7			
Serv	<i>r</i> ice life	Under the specified maintenance and proper storage, 10 years: Note 8			

Note 1: From the center position (where the side frame and the slide cylinder's line are aligned)

Note 2: Optional

- Note 3: When the battery power is used
- Note 4: Operating tables operating possible time and halting time per 1 cycle
- Note 5: Excluding the side rail

Note 6: Rough dimension

- Note 7: Company standard (in case that appropriate maintenance and inspection is done)
- Note 8: Based on MIZUHO's own validation data
- Note 9: MOT-VS600DK/MOT-VS600DHK only
- Note 10: IEC 60601-1: 2020, Medical electrical equipment Part1: General requirements for basic safety and essential performance
- Note 11: Total of the patient and accessories
- Note 12: Process that seamlessly welds via heat
- Note 13: Fastener with high waterproofness
- Note 14: Depending on the usage conditions

6.2 External view







7.1 When the hand controller cannot be used

Use the auxiliary switch to operate the operating table



- The auxiliary switch should be used only in an emergency.
- Always watch movement of the operating table when you operate the auxiliary switch. The auxiliary switch has no operational restrictions and may come in contact with other parts.
- If any parts come in contact with each other, immediately stop the operation. Otherwise, the operating table may get damaged.







*1: MOT-VS600DK/MOT-VS600DHK only

NOTE

- If <u>E</u> is pressed, the pilot lamp lights up. Pressing any function switch while the pilot lamp is lighting up, that function will operate while the switch is pressed.
- The operating table stops once the maximum angle is achieved at each operation.

7.2 When the brake cannot be released



Do not operate the emergency brake release knob with a patient on the operating table. The operating table may tip over resulting in injury.



After turning the emergency brake release knob in the UNLOCK direction, make sure to return it in the LOCK direction.

If it is not returned, none of the functions including the fixing of the operating table will be able to work.

Brake release with the emergency brake release knob

In case of electrical trouble, the operating table can be moved by using the emergency brake release knob.

Follow the procedure below to release the brake.

1. Turn the emergency brake release knob clockwise (to the right).

The brake will be released.



Refixing the operating table

When you want to use it again after the electrical trouble been fixed, follow the procedure below to fix the operating table.

1. Turn the emergency brake release knob counterclockwise (to the left).



8. Before contacting for repairs

Checking causes and countermeasures

The following problems can occur even if the operating table is not malfunctioning. Check the following points before requesting repairs.

Status	Possible cause	Measures		
The table cannot be turned on.	The connector of the hand controller is not connected properly.	Insert the connector completely. (→Page 20)		
A function switch on the hand controller does not	The connector of the hand controller is not connected properly.	Insert the connector completely. $(\rightarrow$ Page 20)		
function.	You did not press the E switch before the function switch.	Press E switch first and then the function switch. (\rightarrow Page 27 to 39,44)		
	Motor may be overheated.	Wait for about 60 minutes to operate. (→Page 14,15)		
The table cannot be	The battery may be low.	Charge the battery. (\rightarrow Page 19)		
turned on with the cordless hand controller.	It has been 6 or more days without turning on the table.	Battery protection function is working. Turn on the operating table via the hand controller. (\rightarrow Page 22)		
	The lifespan of the cordless hand controller's batteries has been reached.	Replace the cordless hand controller's batteries. (→Page 22)		
The cordless hand controller does not function.	The lifespan of the cordless hand controller's batteries has been reached.	Replace the cordless hand controller's batteries. (→Page 22)		
The operating table cannot be fixed.	The emergency brake release knob is in "UNLOCK" position.	Turn the emergency brake release knob toward "LOCK." (\rightarrow Page 56)		
The power lamp on the column is flashing red.	The emergency brake release knob is in "UNLOCK" position.	 Turn the emergency brake release knob toward "LOCK." (→Page 56) Turn off the power. (→Page 24) Turn on the power again. (→Page 23) 		
The back section cannot be bent down below the level position.	The tabletop is slid in the foot direction beyond the center position.	Slide the tabletop center point in the head direction beyond the center position. (→Page 35)		
The tabletop cannot be slid in the foot direction beyond the center position.	The back section is bent down below the level position.	Move up the back section from the level position. (\rightarrow Page 32)		
The flexing cannot be operated.	The tabletop is slid in the foot direction beyond the center position.	Slide the tabletop center point in the head direction beyond the center position. (→Page 35)		
The battery indicator is flashing red.	The battery is fully charged.	 Unplug the power cord, then after operating the elevation function with battery power, turn the power switch back on. (→ Page 25, 33) 		
		 Turn off the power switch, then after operating the elevation function with battery power, turn the power switch back on. (→ Page 25, 33) 		
	If the situation does not improve even if countermeasures 1. and 2. are implemented.			
	The battery's fuse is blown.	Request repairs from your distributor or MIZUHO.		

If the situation does not improve even if the above countermeasures are implemented, request repairs from your distributor or MIZUHO.

In case of malfunction



- The operating table should only be serviced or maintained by MIZUHO or the certified providers. Make sure to contact your distributor or MIZUHO for maintenance or repairs.
- Do not disassemble the operating table. Unauthorized disassembling may cause a fire, electrical shock or malfunction.
- In order to prevent infections, make sure to clean and disinfect the operating table when requesting to have it repaired.

Implement the follow measures when the operating table malfunctions.

- **1.** Turn off the power and disconnect the power cord from the medical grade outlet.
- **2.** Place an "Out of Order" or "Do Not Use" sign on the operating table.

Replacement of the hand controller's cord

If the hand controller's cord is damaged, replace it with a new one.

- **1.** Turn the rubber cover and remove it.
- **2.** Pull out the connector ring (red mark) inside.
- **3.** Insert the new cord with its connector ring (red mark) facing upwards.
- **4.** Turn the rubber cover and tighten it.



Warranty

MIZUHO Corporation will repair defective parts of this product without charge for one year from the date of delivery/installment except for cases of damage caused by a third party's repair, act of nature, improper use or intentional damage. All other warranty terms and conditions are subject to regulations of MIZUHO Corporation.

App.-1 Electromagnetic Compatibility

Install and operate according to the EMC information provided in this manual.



- Do not use any accessories other than those specified by MIZUHO This can result in increased emissions and reduced immunity.
- Do not use it adjacent to or stacked with other equipment. Normal operation may not be possible due to electromagnetic interference.
 Before using other medical electronic devices (especially life support devices) to be
- used together, make sure that they will not malfunction due to electromagnetic interference.
- Normal operation may not be possible due to electromagnetic interference.

Guidelines and manufacturer declaration – electromagnetic emissions
The MOT-VS600D/VS600DK/VS600DH/VS600DHK is intended for use in the electromagnetic
environment specified below.
The customer or user of the MOT-VS600D/VS600DK/VS600DH/VS600DHK must ensure that it is

The customer or user of the MOT-VS600D/VS600DK/VS600DH/VS600DHK must ensure that it is operated in suchlike environments.

Electromagnetic interference measurements	Compliance	Electromagnetic environment – guideline	
Harmonic emissions IEC 61000-3-2	Class A	The MOT-VS600D/VS600DK/VS600DH/VS600DHK is suitable for use in all establishments, other than domestic	
Voltage fluctuations/ flicker emissions IEC 61000-3-3	Complies	establishments and those directly connected to the public low-voltage power supply network that supplies buildings used for domestic purposes.	
RF emissions CISPR 11	Class A		
RF emissions CISPR 11	Group 1	The MOT-VS600D/VS600DK/VS600DH/VS600DHK uses RF energy only for its internal function. Therefore, its RF emissions are very low and are not likely to cause any interference in nearby electronic equipment.	

Guidelines and manufacturer declaration - electromagnetic interference immunity

The MOT-VS600D/VS600DK/VS600DH/VS600DHK is intended for use in the electromagnetic environment specified below.

The customer or user of the MOT-VS600D/VS600DK/VS600DH/VS600DHK must ensure that it is operated in suchlike environments.

Interference immunity tests	IEC 60601 test level	Compliance level	Electromagnetic environment – guidelines
Electrostatic discharge (ESD) IEC 61000-4-2	± 8 kV contact discharge ± 2; 4; 8; 15 kV	± 8 kV contact discharge ± 2; 4; 8; 15 kV	Floors should be wood, concrete or ceramic tile. If floors are covered with synthetic material, the
	air discharge	air discharge	relative humidity should be a least 30%.
Electrical fast transient/burst IEC 61000-4-4	± 2 kV for power supply lines	± 2 kV for power supply lines	Power supply voltage quality should be that of a typical commercial or hospital
	± 1 kV for input and output lines	± 1 kV for input and output lines	environment.
Surge IEC 61000-4-5	± 0.5; 1 kV differential mode voltage	± 0.5; 1 kV differential mode voltage	Power supply voltage quality should be that of a typical commercial or hospital environment.
	± 0.5; 1; 2 kV common mode voltage	± 0.5; 1; 2 kV common mode voltage	
Voltage drops, short interruptions and fluctuations in power	0% U _⊤ for 0.5 cycles	0% U _τ for 0.5 cycles	Power supply voltage quality should be that of a typical commercial or hospital
supply voltage IEC 61000-4-11	0% U _τ for 1 cycles	0% U _τ for 1 cycles	environment. If the user of the MOT-VS600D/VS600DK VS600DH/VS600DHK need
	70% U _T for 25/30 cycles	70% U _T for 25/30 cycles	to continue operation during a main power interruption, it is recommended that the
	0% U _T for 250/300 cycles	0% U _T for 250/300 cycles	MOT-VS600D/VS600DK/ VS600DH/VS600DHK be powered by an uninterruptible power supply or battery.
Power frequency (50/60 Hz) magnetic field IEC 61000-4-8	30 A/m	30 A/m	Power frequency magnetic fields should be at levels characteristic of a typical location in a typical commercial or hospital environment.

Conducted disturbances induced by radiated RF	150 kHz 3 V			z to 80 MHz	Portable and mobile RF communications equipment
IEC 61000-4-6					(radio devices, incl. antennas or
	ISM frequencies 6 V		ISM frequencies 6 V		cables) should be used no closer to any part of the MOT-VS600D/
Interference due to radiated RF IEC 61000-4-3	80 MHz 3 V/m	to 2.7 GHz	80 MHz to 2.7 GHz 3 V/m		VS600DK/VS600DH/VS600DHK than the recommended safety distance of 300 mm (12 in).
	Wireles	S	Wireles	s	
	commu	nication	commu	nication	
	frequen	17	frequen	cy band	The field strengths from fixed RF
	V/m	MHz	V/m	MHz	transmitters, as determined by
	_27	385	27	385	field surveys of electromagnetic
	_28	450	28	450	fields, should be less than a
	9	710	9	710	compliance level of 3 V/m in
	9	745	9	745	each frequency range.
	9	780	9	780	
		810	28	810	
		870	_28	870	Interference may occur in the
		930	28	930	vicinity of equipment marked
		1720	_28	1720	with the following symbol:
	_28	1845	28	1845	
		1970	_28	1970	$((\cdot, \cdot))$
		2450	28	2450	
	9	5240	9	5240	
	9	5500	9	5500	
	9	5785	9	5785	

Info: These guidelines may not apply in all situations. Electromagnetic propagation is affected by absorption and reflection from buildings, objects and people.

The field strengths from fixed transmitters, such as wireless (cellular/cordless) telephones and mobile terrestrial radio base stations, amateur radio, AM/FM radio broadcasts and TV broadcasts cannot be accurately and theoretically predicted. In order to confirm the electromagnetic environment caused by the fixed RF transmitter, it is desirable to consider an electromagnetic field survey. If the measured field strength exceeds the compliance level as specified above at the location where the MOT-VS600D/VS600DH/VS600DH/VS600DHK is used, the MOT-VS600D/VS600DK/VS600DH/VS600DHK should be observed to verify correct functionality. If abnormal performance is observed, additional measures may be necessary, such as re-orienting or relocating the MOT-VS600D/VS600DK/VS600DH/VS600DHK.

App.-2 Glossary

Base

The light-blue portion of the figure below.



Flex/Reflex

The back section is bent upward or downward, the seat section moves to the head-up or the head-down position, and the entire tabletop moves to the "Center up" or "Center down."

Lateral tilt

Tabletop of the operating table moves to the left-down or the right-down position.

Tabletop

The light-blue portion of the figure below.



Trendelenburg

Tabletop of the operating table moves to the head-up or the head-down position.

Revision Record

2017-05-11	Ver.1	New release
2017-06-12	Ver.2	Revision
2017-10-05	Ver.3	Revision
2017-10-24	Ver.4	Revision
2019-05-20	Ver.5	Revision
2019-11-12	Ver.6	Revision
2020-12-24	Ver.7	Revision
2021-07-05	Ver.8	Revision
2023-07-27	Ver.9	Revision
2023-10-02	Ver.10	Revision
2024-07-26	Ver.11	Revision
2024-11-01	Ver.12	Revision



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