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**NOTE:** DJO Surgical® has no control over the conditions in which this product is used. DJO® is not liable for any direct, indirect, incidental loss, consequential loss, damage, or expense arising from or related to the use or incorrect use of this device.
Indications

The Adaptable™ Beach Chair is intended for use when conducting an upper extremity procedure that requires the placement of the patient in the "beach chair" position. The Beach Chair is indicated for use on a standard operating table 16" to 26" wide. The Adaptable™ Beach Chair is only indicated for use on a surgical table with a powered articulating leg section (required for the lift intended when elevating the patient from a supine to beach chair position). Maximum patient weight is 400 lbs.
Unpacking and Storage

Carefully remove the storage cart, placing it wheels down on the floor. Place the back pad facing the ceiling and lay it on top of the cart. The knee bolster rest and neck pad can be rested on the bottom of the cart (FIGURE 1). The cart can now be wheeled to a storage location.

FIGURE 1
Surgical Table Preparation

Turn the table 180 degrees from the operating position (such that the leg section of the table is closest to anesthesia). Remove all X-Ray platforms that may come into contact with the chair or table. Remove the pad from the leg section of the surgical table. Press the “leg down” button on the surgical table to lower the leg section of the surgical table to –90 degrees, such that the leg section of the surgical table is perpendicular to the floor.

Next, ensure that the mounting pins are in their storage holes. Roll the Beach Chair up to the leg section of the surgical table, aligning the mounting forks of the Beach Chair with the side rails of the operating table. If this is your first time using the Beach Chair, the width of the Beach Chair mounting feet will need to be set to the width of the operating table.

To do this, loosen the two black 4-lobe knobs on the back of the Beach Chair (at the centerline of the base bar on the back of the Beach Chair). Once the width of the mounting feet are matched to the table, the knobs can then be tightened permanently (FIGURE 2).
Mounting the Beach Chair to the Surgical Table

After setting the width of the mounting forks, engage them with the side rails, such that the U-shaped slot in the mounting plate will engage the surgical table’s side rail mounting stud (FIGURE 3). Then, insert the mounting pins into each mounting hole (FIGURE 4). While doing this, ensure that the mounting pins are inserted completely into the mounting holes on the surgical table, on both sides, of the table and Beach Chair.

After this step, check to make sure that the backrest height adjustment knob and head support height locking knob on the Beach Chair are unlocked.

Adjust the height of the operating table using the operating table’s controller so the backrest surface of the Beach Chair is even with the surface of the operating table’s pad (FIGURE 5).
Attaching Disposable Padding

Next, remove the disposable halo forehead pad and neck pads from their packaging and attach them to the Beach Chair (FIGURE 6).

**NOTE:** There are two sizes of neck pads provided in the Beach Chair disposable kit. If there is any question regarding patient sizing, to ensure proper fit, trial both pads on the patient prior to placing the patient in the Beach Chair.

Rotate the forehead halo posteriorly to prevent obstruction of the Beach Chair’s neck and head pads. At this time, check that head-neck support is positioned maximally posteriorly, and that the lumbar supports are removed.

Positioning the Patient

Insert the lateral supports and adjust to the patient’s size. Next, insert the non-operative armrest into the receiver and lock into position using the height armrest lock knob (FIGURE 7).

Place the gurney next to the operating table, matching the height of the operating table to the gurney. Position the patient onto the operating room table, ensuring that the patient’s hips are located in the gap between the Beach Chair and operating table (FIGURE 8). In an awake patient, the patient can slide onto the operating room table in a sitting position.

**NOTE:** Failure to align the patient’s hips will result in inaccurate patient positioning.

**NOTE:** Awake patients can slide onto the operating table, with the non-operative arm in the arm holder. The operative arm can then be managed by staff and tucked into the outstretch hip support or lateral support pads.
Patient Anesthesia

Using the surgical table’s controller, raise the table to about 30 degrees. Again, make sure that the neck rest knob is unlocked (FIGURE 9). Ensure that the backrest of the Beach Chair is positioned on the lumbar area of the patient, and the neck pad of the Beach Chair sits just inferior to the patient’s occiput.

**NOTE:** The inclination of the backrest might need to be changed by a few degrees to allow for comfortable patient positioning prior to the induction of anesthesia.

To prevent patient sliding, place the knee bolster pad under the patient’s knees, with the bend of the knees aligned with the bend on the knee bolster pad. Continue the induction of anesthesia.

**NOTE:** If the Knee Bolster Support is too large, it might cause impingement on the diaphragm. To correct this, only use the top half of the Knee Bolster support.

**NOTE:** If the neck pad of the Beach Chair does not allow for intubation, temporarily place a pillow under the head of the patient, or, remove the neck pad of the Beach Chair and reinsert it once intubation is complete.

**NOTE:** For maximum visualization of the airway for the anesthesiology team during endotracheal intubation, move the neck pads anteriorly, with the occipital plate positioned posteriorly.
Locking the Beach Chair

Press “leg up” on the table controller to raise the patient using the surgical table controls. Again, make sure that the neck rest knob is fully unlocked.

Once the patient is in the desired position, lock the backrest in position using the backrest lock knob. Lock the head support in position using the head support lock knob (FIGURE 10).

Rotate the halo pad so that it is comfortably but firmly against the patient’s forehead. Then lock the halo pad into position using the halo lock knobs.

**NOTE:** There are three adjustments to consider regarding the head/neck airway position.

1. **Superior/inferior:** with anesthesia controlling the head and airway, raise the leg of the table using the table’s power. The head cradle will self adjust in the superior direction as it is pushed up by pressure of the trapezius on the neck pads. Once in the correct position, move the head cradle up 2-3 cm manually to engage the occiput. Then lock the superior/inferior position with the lock knob (FIGURE 10).

2. **Anterior/posterior plane:** once the Superior/inferior plane has been placed at the occiput, adjust the neck pads in the anterior/posterior direction until it matches the patient’s natural cervical lordosis. Adjust the occipital plate to create the best support of the occiput and neck. Although the head cradle is secured at this time, a chin strap may be applied for additional control of extension.

3. **Coronal plane:** minor adjustments can be made with the medial/lateral adjustments of the neck pads. Minor adjustments can be made to the lateral pads as well.

**NOTE:** Neck pad position up or down and front or rear can be adjusted by turning their respective knobs on the back of the Beach Chair (FIGURE 11). The head support can be adjusted into neutral head position using the head support knob.
Patient Removal

**CAUTION:** Do not remove halo support if the patient is under anesthesia in the upright sitting position. This may cause the patient to fall over, jeopardizing the patient’s safety.

Unlock the head support and backrest using the Beach Chair’s head support and backrest knobs. Lower the patient using the controls on the operating table. Unlock the halo headrest and rotate it off the patient’s head. The patient can now be slid off the Beach Chair.

Post-Operative Cleaning and Storage

Remove and discard the halo forehead pad and neck pad disposable padding. Clean and disinfect the beach chair using hospital grade cleaning wipes.

Roll the Beach Chair Cart under the Beach Chair while the Beach Chair is attached to the surgical table. Adjust the height of the surgical table as necessary, positioning the Beach Chair just above the cart. Check that the surgical table, Beach Chair, and cart pad are aligned properly. Then, remove the mounting pins from the mount holes, and place the mounting pins in the storage holes. The cart is now ready to be placed in storage (FIGURE 12).
Instrument Guide

1. Adaptable™ Beach Chair*
2. Knee Bolster
3. Disposable Thorax Pad
4. Non-operative Arm Holder (left and right)
5. Beach Chair Cart
6. Beach Chair Disposables Kit

*Beach Chair components available upon request for use with the Adaptable™ Arm

<table>
<thead>
<tr>
<th>Part Numbers</th>
<th>Description</th>
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<tbody>
<tr>
<td>804-33-300</td>
<td>BEACH CHAIR, POSITIONER KIT</td>
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<td>BEACH CHAIR, DISPOSABLE THORAX PAD</td>
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<td>BEACH CHAIR, BACKREST PAD</td>
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<td>BEACH CHAIR, NON-OPERATIVE ARM HOLDER ASSEMBLY, LEFT</td>
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<td>BEACH CHAIR, NON-OPERATIVE ARM HOLDER ASSEMBLY, RIGHT</td>
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<td>804-33-302</td>
<td>BEACH CHAIR, CART</td>
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<td>804-33-303</td>
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BEACH CHAIR POSITIONER
SURGICAL TECHNIQUE

Individual results may vary. This workbook represents the surgical technique and post-op protocol utilized by a healthcare professional. DJO Surgical®, as the manufacturer, does not practice medicine or recommend any particular product or technique for a specific patient. Only an orthopedic surgeon can determine what treatment is appropriate. Individual results of total joint replacement may vary. The life of any implant will depend on the patient's weight, age, activity level, and other factors. For more information on risks, warnings, and possible adverse effects please speak with your doctor directly; you should always ask your doctor if you have any questions regarding your particular condition or treatment options.

DJO Surgical® is a manufacturer of orthopedic implants and does not practice medicine. This surgical technique was prepared in conjunction with licensed health care professionals. The treating surgeon is responsible for determining the appropriate treatment, technique(s), and product(s) for each individual patient.