



Multispecialty Ultrasound Exam Table Product Evaluation

Evaluated by: Carolyn T. Coffin, MPH, RDMS, RVT, RDCS
CEO & Consultant,
Sound Ergonomics, LLC



Ultrasound Product Evaluation for Oakworks Medical



Product: Multispecialty Ultrasound Exam Table with Cardiac Slide

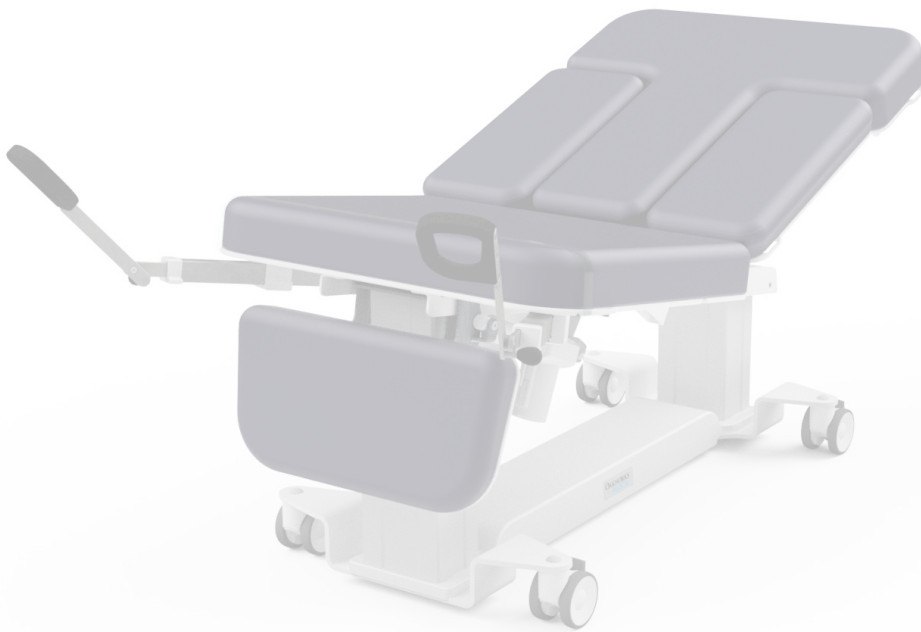
Discussion

To accommodate multiple users, equipment should be adjustable to fit the physical dimensions of 90% of the user population with the lower limits of adjustability chosen to fit the 5th percentile female and the upper limits to fit the 95th percentile male. The largest differences in physical dimensions are related to gender, age, and ethnicity.¹ A broad range of adjustability will fit the largest population of users. The majority of data from the United States have been collected on military personnel and are used for the basis of design comparisons.² For the purposes of equipment design, the differences in anthropometric data from this population to other user populations may not be significant.

Overall design of an ultrasound exam table should incorporate features that allow for multiple adjustments, ease of mobility and accessible brakes that are quickly activated. Ultrasound exam tables are not designed to be transport stretchers; however, the features of the table should allow the sonographer to quickly position the exam table within the exam room in order to achieve the most comfortable work position. There should be no features that interfere with positioning the patient close to the user or positioning the ultrasound system close to the table. The table should be designed to be used by the sonographer in both seated and standing positions with a wide range of height adjustability. Additional, exam-specific features should be available which will allow the user to adapt the table for a variety of different exam specialties.

Product Evaluation

An ergonomic evaluation of the newly redesigned multispecialty ultrasound exam table by Oakworks was performed using The Industry Standards for the Prevention of Work-Related Musculoskeletal Disorders in Sonography.¹ This allows for an objective review of exam table features as they relate to the accepted standards for this profession and not as they compare to other exam tables in the industry. Additional advanced ergonomic standards have also been included, which can serve as a guide for future development.



Exam Table Assessment

EVALUATION FACTOR	Yes	No	N/A or Not eval'd
HEIGHT ADJUSTABILITY			
1. Low enough to allow patients to get on & off unassisted	X		
2. Height range allows user to maintain arm abduction less than 30 degrees	X		
3. Allows user to alternate sitting & standing during the exam	X		
4. Maneuverable and full-wheel mobility	X		
LOCKING OPTIONS			
5. Easily operated wheel locks	X		
6. Central locking casters available (important for labs that often reposition the table in the exam room)	X		
ACCESSIBILITY			
7. Open access from all sides	X		
8. Table support & frame do not interfere with minimal user reach/arm abduction	X		
9. Side rails do not extend beyond the table top	X		
10. User can place knees and/or feet underneath the table	X		
11. Dropping footboard & retractable foot rests (stirrups)	X		
12. Electrically dropping footboard	X		
13. Adjustable footboard, preferably split to allow for non-weight bearing studies	\		N/A
14. Cut-out section for cardiac apical access			N/A
15. Electrically controlled cardiac panel			N/A
16. Right and/or left back access panel	X		
17. Electrically controlled back access panel	X		
18. Controls are electronic	X		
19. Option for both hand and foot controls	X		
20. Controls and accessible	X		
21. Controls are easy to use	X		
OTHER OPTIONS			
22. Trendelenburg/reverse Trendelenburg	X		
23. Option for at least 40° table tilt			N/A
24. Fowler capability	X		
25. Removable armboard	X		
26. Side rails (preferably attached rather than removable)	X		
27. Side rails tuck completely under the table	X		
28. Option for table extender	X		
29. Patient safety devices	X		

In addition to the above, the exam table was also evaluated for appearance, patient comfort and safety and user interface.

Observations

The multispecialty exam table exceeds all the industry standards as defined above. In addition, the table met the advanced standards that have been added. A number of additional observations are discussed below.

Overall appearance/design:

This table has a very sleek and uncluttered appearance. One feature that is impressive is the dual tower design, which ensures stability of the table and flexibility in its range of adjustability. The mattress extends to the edge of the table top frame and does not taper down to the frame. This feature allows the user to position patients on the edge of the table and allows room for arm support cushions for the sonographer.

Locking mechanisms:

This table has individual wheel locks (all operated by foot) as a standard feature. A central locking system can be added as an option and is electrically engaged from the hand control. For departments that reposition the exam table within the scanning room on a regular basis, this feature is desirable. If the table is not moved very often, individual wheel locks work well.

Height range:

This range is from 19” to 33”. The lowest position allows for easy patient access, both from a standing position and from a wheelchair and complies with ADA requirements of equal access to care. The upper range, although lower than the original design, still allows the sonographer to position the table to reduce his/her arm abduction regardless of the type of exam. A wide height range allows sonographers to alternate between standing and sitting throughout each exam. It also accommodates the height range of 95th percentile of sonographers working in a facility.

Electric controls:

Table height, Trendelenburg and reverse Trendelenburg and Fowler are all controlled electrically with both the hand and foot controls. Table height adjustability, available on both controls, is the most important for sonographer access to the patient and for reducing injury risk factors. If this control is manual or is not easy to reach, sonographers will not take the time to make height adjustments, and this feature no longer contributes to the ergonomics of an exam table. The electric adjustability for the cardiac access panel and the back access panel is especially important for echocardiography labs since some sonographers scan these exams right-handed and cannot reach across the patient to manually adjust the cardiac slide panel. If the sonographers scan left-handed, the electric back access panel is easier for them to use when positioning the patient on his/her left side. All the adjustable features of the table are present on the hand control, customized to each the exam specialty.

Observations (continued)

The back access panel is longer than the one on the original design. This provides more support for patients when lying on their side and provides more space for the sonographer to step in closer to the patient when scanning an abdomen and/or pelvis. This feature is available either on right only or on both sides.

There are 2 presets on the hand control – one is the Loading Position, with the table flat and at appropriate height for patient access, footboard up and cardiac access and back access panels closed. The other is the Working Position which positions the table at a working height of 30”.

Sonographers should be given clear instructions for using the hand control initially until it becomes intuitive. They have often been using stretchers or other similar exam tables that have to be manually adjusted. Understanding the functions of the hand control and reasons for those functions will prevent frustration on the part of the users.

Mobility:

The exam table was moved around within a simulated exam room space on carpet only, with and without a “patient” on it. The table moves freely on carpet without weight on it but is much more difficult to move with weight. However, carpet is not common in hospital and clinic ultrasound departments; and moving the table in the room is generally done before bringing the patient in.

Patient positioning/accommodation:

The table width comes in 26” and 30” (with the exception of the echocardiography table, which is 30”) These widths will accommodate a wide range of patient sizes and a range of exam room sizes. The table lift and load capacities are the same at 550 lbs. This is an extremely important feature since a table that will not lift as much weight as it can hold, cannot be adjusted in height during the ultrasound exam to reduce either sonographer arm abduction or trunk bending to reach the patient. A load capacity that is higher than the lift capacity detracts from the ergonomic design of an exam table used for ultrasound and/or interventional procedures.

Side rails:

These are optional on this table and are designed to fold under the table frame so that they do not obstruct access to the patient. They are low enough so that they can be up in place during an exam and not cause excessive sonographer reaching and/or arm abduction. The design of the side rails and their position on the table frame allow the patient to use them for support when the table is moved into reverse Trendelenburg. The rails tuck far under the table and “lock” in place giving sonographers and/or physicians seated access to the patient during procedures.

Padding can also be added to the siderails for patient comfort; it is easy to detach and clean.

Observations (continued)

Footboard:

The footboard on this exam table is controlled electrically and narrow enough to fit between the stirrups when extended. The patient can be positioned in the stirrups and the footboard can then be dropped. The footboard can also be raised while the stirrups are extended. This is important for getting the patient back into a comfortable position once the stirrups are retracted since the footboard can be raised prior to that.

Table padding:

The 3” thickness of the padding makes the table very comfortable. The pads can be removed easily for cleaning or for any upholstery repairs that might be necessary.

Other Features

- a) Paper roll holder – This feature is a good design. It is recessed under the head of the table frame which eliminates any obstruction to patient access from the head of the table. The holder can also be folded down against the table and, thus, be completely out of the way if it were not in use.
- b) Head rest – This item can easily be attached to the head of the table, both for patient comfort and for access to the patient’s neck. Its design allows it to be used when the patient is in either a supine or prone position.
- c) T-rails – This feature can be attached at a number of locations on the table frame and can support the addition of different items, such as an I.V. pole. Another possibility is the attachment of a stand (or shelf) that could be positioned partially over the patient and used to hold a hand-carried ultrasound system or a procedure tray. The sonographer or physician could position this stand so as to reduce or eliminate the need to reach or twist to access the ultrasound system or the tray. Because the t-rail can be easily removed, these items can be added only when needed and do not have to be permanently attached to the table frame.
- d) Battery backup – This optional feature might be important for outpatient clinics and private offices. Hospitals generally have back-up generators for use in power failures; however, they may choose to add this just for more patient safety.

Other Features (continued)

Additional comments:

The stirrups were easier to pull out than those of initial prototype. They may also get easier to move in and out with repeated use.

The knob used to release the side rails is now easier to pull out. Again, repeated use may make this even easier.

The user manual is thorough and clear. It has been clearly divided into each specialty with all the instructions specific to that table grouped together.

Conclusions

We found this exam table to be outstanding in its design, ergonomic features and user interface.

An ergonomic exam table is a pivotal piece of the ultrasound exam room workstation and should be easy and quick to adjust, factors which ensure that it will be used to its full capacity. We found the features of this exam table exceeded not only the industry standards but our proposed advanced standards and our expectations of how we could position this table for a variety of ultrasound exams. This table meets the requirements for inclusion in our Sound Work Environments® certification program.

Submitted by: Carolyn T. Coffin, MPH, RDMS, RVT, RDCS
CEO & Consultant, Sound Ergonomics, LLC
6830 NE Bothell Way, #C-236, Kenmore, WA 98028
425-489-3839 www.soundergonomics.com

References:

1. Society of Diagnostic Medical Sonography, Industry Standards for the Prevention of Musculoskeletal Disorders in Sonography, 2003, updated 2016.
2. Kroemer K, Grandjean E. Fitting the Task to the Human. A Textbook of Occupational Ergonomics. 2nd ed. Philadelphia: Taylor & Francis, Inc; 1997.
3. Salvendy G. Handbook of Human Factors and Ergonomics. New York; John Wiley & Sons, Inc; 1997.

