MEDPAGE EPILEPTIC BED SEIZURE MONITOR INSTRUCTION MANUAL FOR MODEL MP5

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The MEDPAGE MP5, is a movement and sound monitor that can detect movements resulting from an epileptic seizure from the bed where a person sleeps. When used in accordance with this manual the monitor will detect a high percentage of epileptic seizures. The monitor is for the detection of Tonic/Clonic (Grand Mal) seizures and will only detect the seizure if there are muscular spasms (convulsions) during the seizure. The monitor is equipped with sensitivity controls for the bed sensor and the built in microphone. An adjustable delay control can be used to help minimise false alarms resulting from normal movements during sleep.

The environment must be controlled to eliminate the immediate danger posed by hard surfaces and sharp edges as a result of sudden movement during an epileptic seizure. Where there is an additional risk of immediate danger as a result of apnoea then this monitor should be used in conjunction with a Nany BM02 monitor available from Easylink.

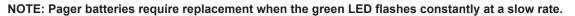
Setting up the monitor console. First unpack the parts. You will have:

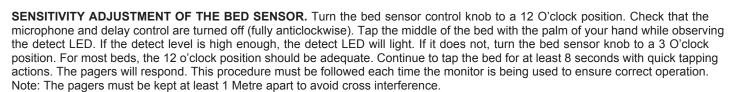
1 x MEDPAGE SEIZURE MONITOR CONSOLE 2 X BATTERY OPERATED RADIO PAGERS 2 x TRIAL BATTERIES 1 X INSTRUCTION MANUAL. Damaged units should not be used.

First, position the seizure monitor console on a bedside table or in a safe position where it is not likely to be accidentally damaged. Position the sensor box between the base of the bed and the mattress in a central position. Turn bed sensor, microphone and delay controls to "min" (fully anticlockwise). Plug the mains adapter into a mains socket and switch the monitor on by pushing in the power switch. The power LED will glow green to indicate power is on if the power adaptor is not plugged into the mains, the LED will be red, indicating operation from battery backup. To switch the unit off, push in and release the switch.

PREPARING THE RADIO PAGERS FOR USE.

- 1 Undo the screw on the belt clip. Install the two AA batteries observing the polarity markings. Replace the cover.
- 2 Slide the on/off switch on the side of the pager to on (o = off = on)
- 3 Select your choice of alert using the selector switch on front of the pager. Position O = vibration only, position (O = vibration and low volume tone, position ((O = vibration and high volume tone. Green LED will flash for 10 seconds after each cycle, vibrate, tone.
- Do not touch the switches between the batteries. Factory setting is all switches set to off.





SENSITIVITY ADJUSTMENT OF THE CONSOLE MICROPHONE. It is advisable only to use the built in microphone if prolonged regular groans or verbal sounds are made during a seizure, otherwise, leave the MIC sensor knob turned to min. Short duration sounds will not activate the alarm. Adjust the control so that each time you make a loud groan sound (like clearing your throat) the detect LED lights. Like the bed sensor, the alarm will only be triggered after approximately 5 seconds of detected sounds. This is a default delay setting, even when the delay is set to minimum.

USING THE DELAY CONTROL. If seizures are mild in terms of jerking movements, or detecting a seizure early on is critical, minimum or no delay at all should be used. A restless sleeper however, may cause the alarm to operate when little or no delay is used. To test the delay interval, start with no delay (set to min) tap the bed until the receiver responds. Slightly rotate the delay control towards a 9 O'clock position, wait for 30 seconds (this is to allow the delay to discharge) then, tap the bed until the receiver responds. Repeat this process until you are happy with the delay setting. Note: If using the built in microphone, the delay also affects the response time of the microphone. IF THE RECEIVER FAILS TO RESPOND TURN THE DELAY TO MINIMUM AND RETEST BY TAPPING THE BED AGAIN. DO NOT USE MORE THAN A QUARTER TURN OF DELAY UNLESS IT IS KNOWN SEIZURE MOVEMENTS ARE PROLONGED AND VIOLENT.

INTERFERENCE FROM OTHER DEVICES. Occasionally, other devices that use radio signals to transmit alarm signals or broadcast audio can interfere with the MEDPAGE transmitter signal. The main culprits are baby monitors that allow you to listen in on a baby or person from another room. Some of these devices produce such a distorted signal that nothing will get through. If you do experience such a problem, first, move the baby monitor to the other side of the bed. Do not sit it next to your epilepsy alarm. Try switching off the baby monitor, then retest the epilepsy alarm. Did this cure the problem? If you experience operation of the pager with the monitor console switched off or other unusual changes in performance contact the help-line number for further instruction. The sensor and console case can be disinfected by wiping with a cloth permeated with normal dilutions of disinfectant.

