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**Riley et al.**

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(54) **PERSON SUPPORT APPARATUS HAVING  
PHYSIOLOGICAL SENSOR**

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**A61G 7/005** (2006.01)

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(56) **References Cited**

U.S. PATENT DOCUMENTS

2,194,809 A 3/1940 Powell, Jr.

3,325,799 A 6/1967 Farris

(Continued)

FOREIGN PATENT DOCUMENTS

EP 2 417 908 2/2012

EP 2 335 232 B1 8/2012

(Continued)

OTHER PUBLICATIONS

European search report from related Ep 1- 17 6767 dated Jun. 30,  
2011, 10 pp.

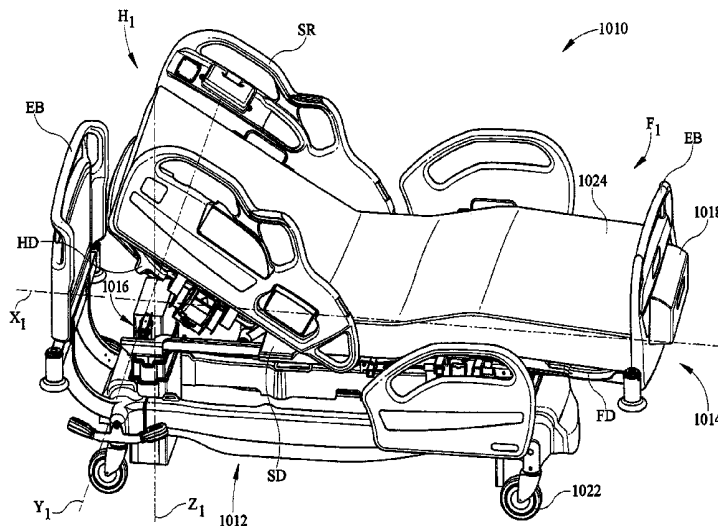
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(57) **ABSTRACT**

A person support apparatus includes a frame and a support  
surface cooperating with the frame to support a person. The  
person support apparatus also has a sensor coupled to one of  
the frame and the support surface. The sensor detects at least  
one characteristic associated with the person. A controller is  
coupled to the sensor. In response to at least one of a  
condition of the frame, a condition of the support surface, a  
position of the person, or a condition of the person, the  
controller operates to control the sensor by at least one of  
changing a gain of the sensor and changing a manner in  
which a signal from the sensor is filtered. In some instances,  
the controller turns the sensor off.

**20 Claims, 11 Drawing Sheets**



<b>Related U.S. Application Data</b>					
	continuation of application No. 14/686,244, filed on Apr. 14, 2015, now Pat. No. 9,549,675, which is a continuation of application No. 14/014,875, filed on Aug. 30, 2013, now Pat. No. 9,013,315, which is a continuation of application No. 12/881,252, filed on Sep. 14, 2010, now Pat. No. 8,525,679.			5,052,067 A	10/1991 Thomas et al.
				5,057,819 A	10/1991 Valenti
				5,060,174 A	10/1991 Gross
				5,101,828 A	4/1992 Welkowitz et al.
				5,117,518 A	6/1992 Schild
				5,170,364 A	12/1992 Gross et al.
				5,182,826 A	2/1993 Thomas et al.
				5,184,112 A	2/1993 Gusakov
				5,276,432 A	1/1994 Travis
				5,283,735 A	2/1994 Gross et al.
				5,539,942 A	7/1996 Melou
				5,588,167 A	12/1996 Pahmo et al.
				5,664,270 A	9/1997 Bell et al.
				5,794,288 A	8/1998 Soltani et al.
				5,796,059 A	8/1998 Boon
				5,815,864 A	10/1998 Sloop
				5,817,146 A	10/1998 Augustine
				5,829,081 A	11/1998 Pearce
				5,873,137 A	2/1999 Yavets-Chen
				5,934,280 A	8/1999 Viard et al.
				5,964,720 A	10/1999 Pelz
				5,970,789 A	10/1999 Meyer et al.
				6,009,580 A	1/2000 Caminade et al.
				6,011,477 A	1/2000 Teodorescu et al.
				6,034,526 A	3/2000 Montant et al.
				6,067,019 A	5/2000 Scott
				6,079,068 A	6/2000 Viard
				6,094,762 A	8/2000 Viard et al.
				6,208,250 B1	3/2001 Dixon et al.
				6,212,718 B1	4/2001 Stolpmann et al.
				6,386,051 B1	5/2002 Yoshimi et al.
				6,493,568 B1	12/2002 Bell et al.
				6,560,804 B2	5/2003 Wise et al.
				6,721,980 B1	4/2004 Price et al.
				6,739,006 B2	5/2004 Borders et al.
				6,813,790 B2	11/2004 Flick et al.
				6,984,207 B1	1/2006 Sullivan et al.
				7,077,810 B2	7/2006 Lange et al.
				7,127,948 B2	10/2006 Tavares et al.
				7,183,930 B2	2/2007 Basir et al.
				7,242,306 B2	7/2007 Wildman et al.
				7,245,956 B2	7/2007 Matthews et al.
				7,248,933 B2	7/2007 Wildman
				7,253,366 B2	8/2007 Bhai
				7,296,312 B2	11/2007 Menkedick et al.
				7,304,580 B2	12/2007 Sullivan et al.
				7,306,564 B2	12/2007 Nakatani et al.
				7,314,451 B2	1/2008 Halperin et al.
				7,315,535 B2	1/2008 Schuman
				7,316,171 B2	1/2008 Nemoto
				7,319,386 B2	1/2008 Collins, Jr. et al.
				7,330,127 B2	2/2008 Price et al.
				7,459,645 B2	12/2008 Skinner et al.
				7,472,439 B2	1/2009 Lemire et al.
				7,513,163 B2	4/2009 Fukutomi et al.
				7,515,059 B2	4/2009 Price et al.
				7,629,890 B2	12/2009 Sullivan et al.
				7,656,299 B2	2/2010 Gentry et al.
				7,714,238 B2	5/2010 Skinner et al.
				7,926,131 B2	4/2011 Menkedick et al.
				8,159,214 B2	4/2012 Uchiyama et al.
				8,258,963 B2	9/2012 Dixon et al.
				8,281,433 B2	10/2012 Riley et al.
				8,525,679 B2	9/2013 Riley et al.
				8,525,680 B2	9/2013 Riley et al.
				8,525,682 B2	9/2013 Dixon et al.
				8,752,220 B2 *	6/2014 Soderberg ..... A61G 7/0527 5/424
				9,013,315 B2	4/2015 Riley et al.
				9,549,675 B2	1/2017 Riley et al.
				9,775,758 B2	10/2017 Riley et al.
				2001/0001235 A1	5/2001 Menkedick et al.
				2001/0004778 A1	6/2001 Heimbrock et al.
				2004/0111045 A1	6/2004 Sullivan et al.
				2005/0027416 A1	2/2005 Basir et al.
				2005/0168341 A1	8/2005 Reeder et al.
				2005/0190062 A1	9/2005 Sullivan et al.
				2005/0190068 A1	9/2005 Gentry et al.
				2006/0101581 A1	5/2006 Blanchard et al.
(60)	Provisional application No. 61/243,714, filed on Sep. 18, 2009, provisional application No. 61/243,741, filed on Sep. 18, 2009, provisional application No. 61/243,806, filed on Sep. 18, 2009, provisional application No. 61/243,825, filed on Sep. 18, 2009.				
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	<i>A61B 5/00</i> (2006.01)				
	<i>A61B 5/11</i> (2006.01)				
	<i>A61B 5/08</i> (2006.01)				
	<i>A61B 5/024</i> (2006.01)				
(52)	<b>U.S. Cl.</b>				
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	See application file for complete search history.				
(56)	<b>References Cited</b>				
	U.S. PATENT DOCUMENTS				
	3,631,438 A	12/1971	Lewin		
	3,644,950 A	2/1972	Lindsay, Jr.		
	3,727,606 A	4/1973	Sielaff		
	3,836,900 A	9/1974	Mansfield		
	3,996,928 A	12/1976	Marx		
	4,146,885 A	3/1979	Lawson, Jr.		
	4,195,287 A	3/1980	McCoy et al.		
	4,245,651 A	1/1981	Frost		
	4,422,458 A	12/1983	Kravath		
	4,481,686 A	11/1984	Lacoste		
	4,483,029 A	11/1984	Paul		
	4,485,505 A	12/1984	Paul		
	4,525,885 A	7/1985	Hunt et al.		
	4,559,656 A	12/1985	Foster		
	4,564,965 A	1/1986	Goodwin		
	4,595,023 A	6/1986	Bonnet		
	4,602,643 A	7/1986	Dietz		
	4,637,083 A	1/1987	Goodwin		
	4,657,026 A	4/1987	Tagg		
	4,677,857 A	7/1987	Feldmann		
	4,681,098 A	7/1987	Lee		
	4,694,520 A	9/1987	Paul et al.		
	4,757,825 A	7/1988	Diamond		
	4,799,276 A	1/1989	Kadish		
	4,838,309 A	6/1989	Goodwin		
	4,889,131 A	12/1989	Salem et al.		
	4,907,845 A	3/1990	Wood		
	4,934,468 A	6/1990	Koerber, Sr. et al.		
	4,935,968 A	6/1990	Hunt et al.		
	4,942,635 A	7/1990	Hargest et al.		
	4,949,412 A	8/1990	Goode		
	4,949,414 A	8/1990	Thomas et al.		
	4,971,065 A	11/1990	Pearce		
	5,010,772 A	4/1991	Bourland et al.		

(56)

**References Cited**

U.S. PATENT DOCUMENTS

2006/0179952 A1 8/2006 Tavares et al.  
2007/0083125 A1 4/2007 Ouchi et al.  
2007/0118054 A1 5/2007 Pinhas et al.  
2007/0272450 A1 11/2007 Skinner et al.  
2008/0010748 A1 1/2008 Menkedick et al.  
2008/0039736 A1 2/2008 Nemoto  
2008/0060138 A1 3/2008 Price et al.  
2008/0114260 A1 5/2008 Lange et al.  
2008/0169931 A1 7/2008 Gentry et al.  
2008/0269625 A1 10/2008 Halperin et al.  
2008/0275349 A1 11/2008 Halperin et al.  
2011/0234408 A1 9/2011 Dixon et al.  
2014/0002267 A1 1/2014 Riley et al.  
2015/0216451 A1 8/2015 Riley et al.  
2017/0095162 A1 4/2017 Riley et al.

FOREIGN PATENT DOCUMENTS

JP 06315424 A2 11/1994  
WO WO 86/05965 10/1986  
WO WO 2004/045407 6/2004  
WO WO 2008/153912 12/2008

\* cited by examiner



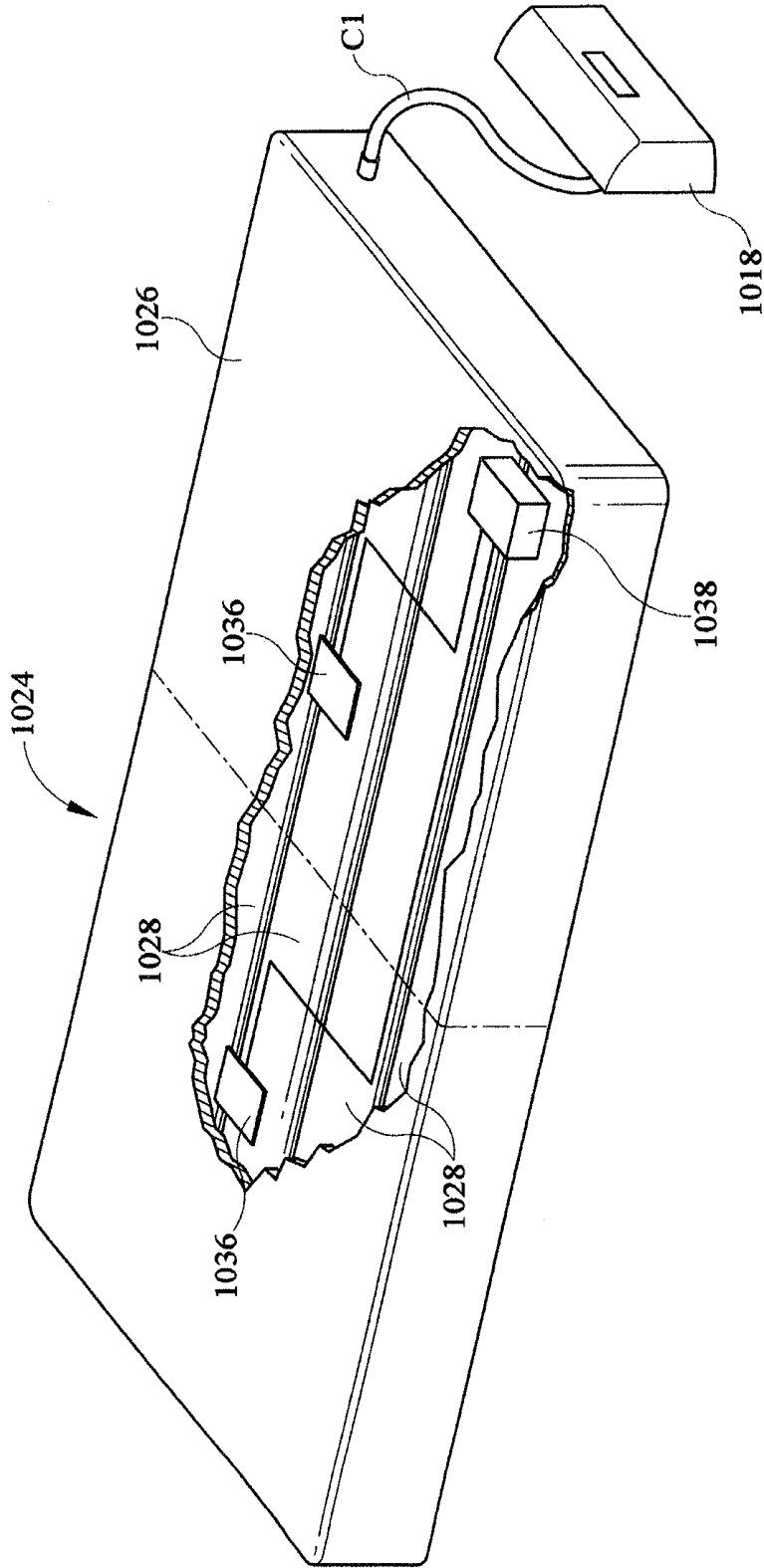


FIG. 2

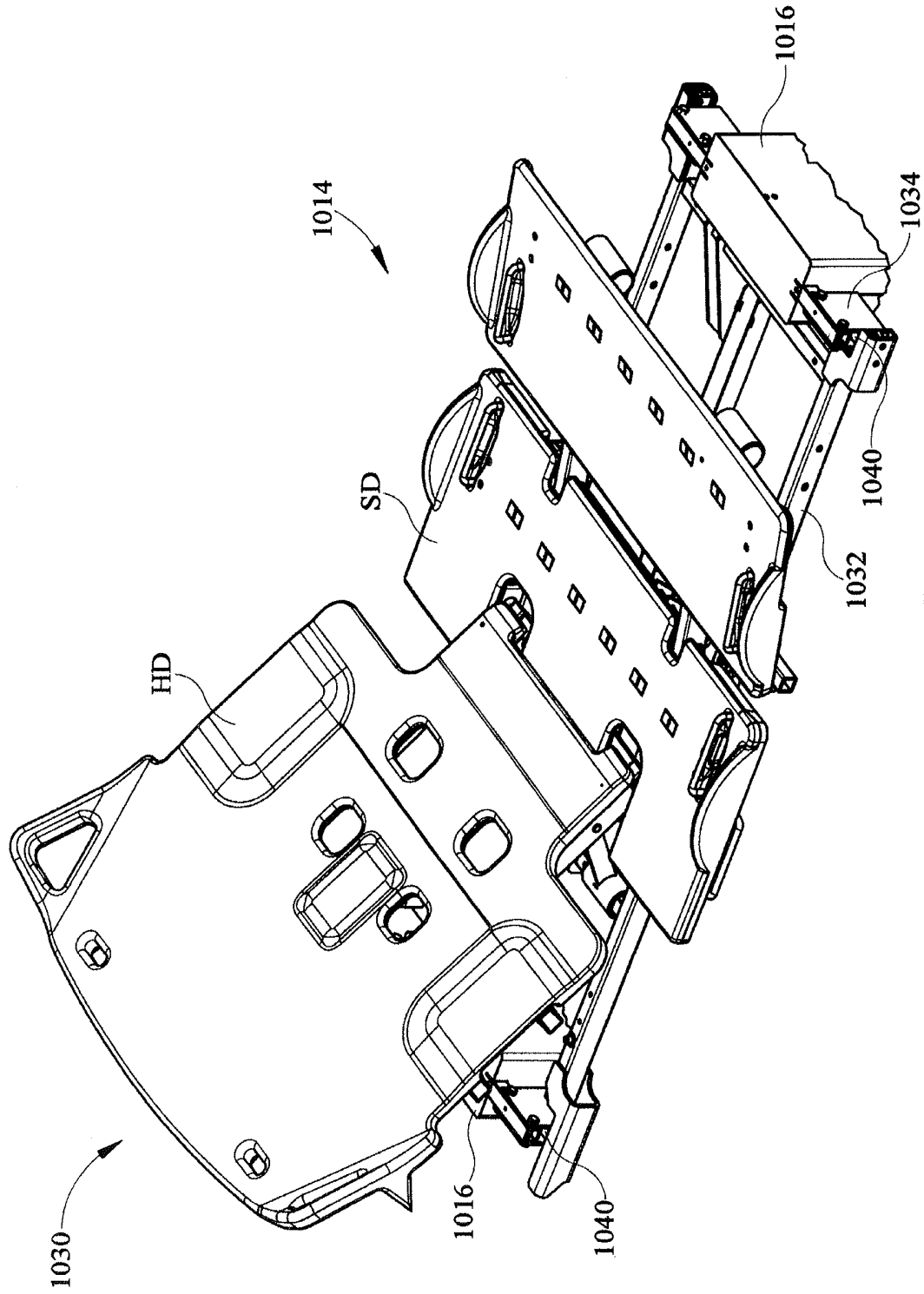


FIG. 3

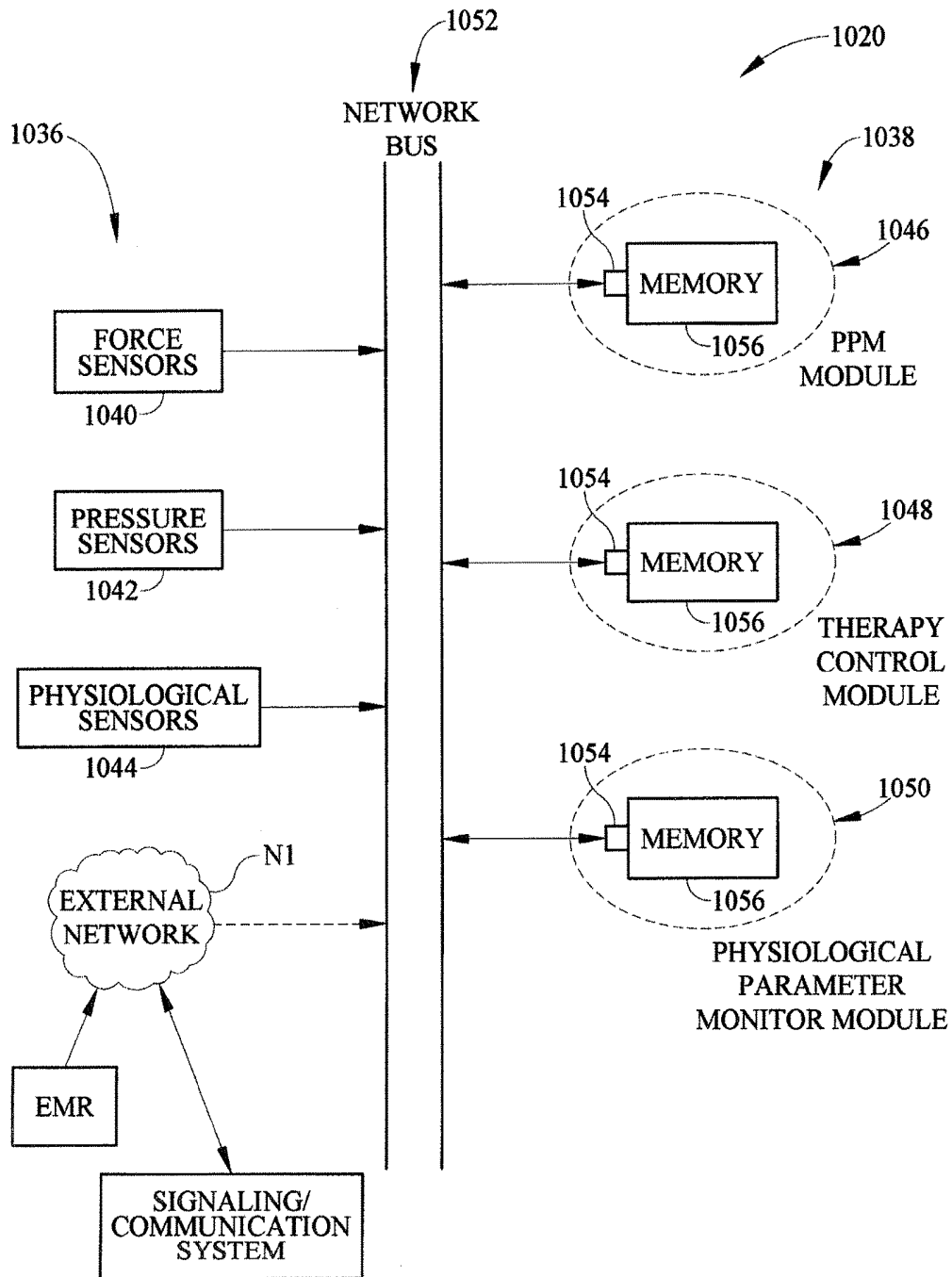


FIG. 4

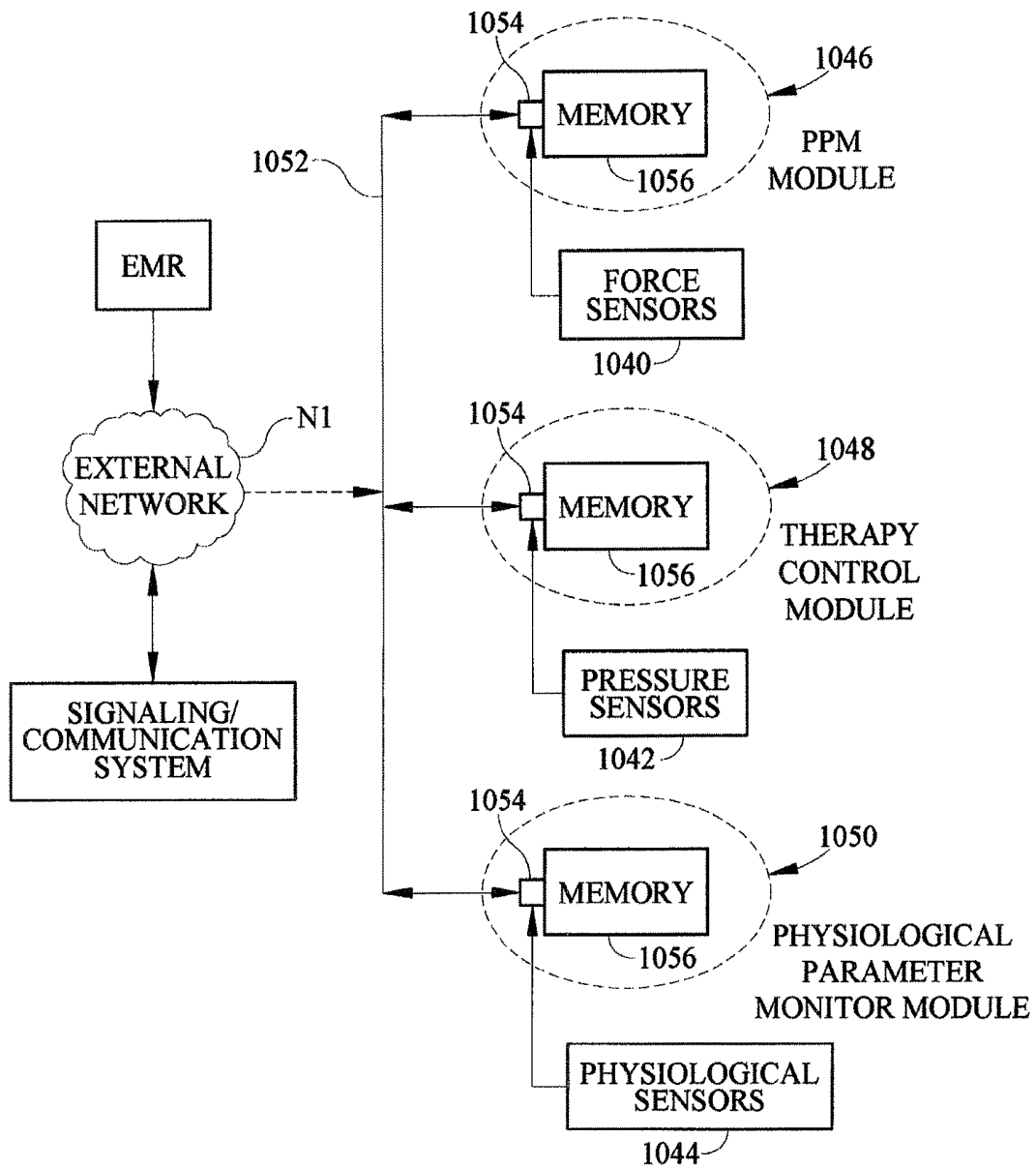


FIG. 5

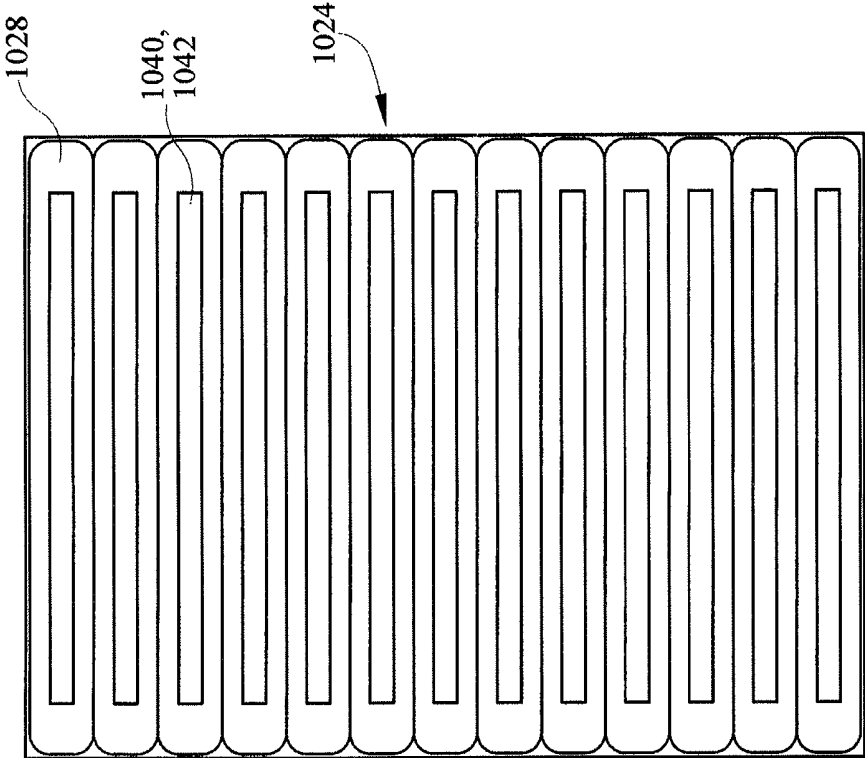


FIG. 7

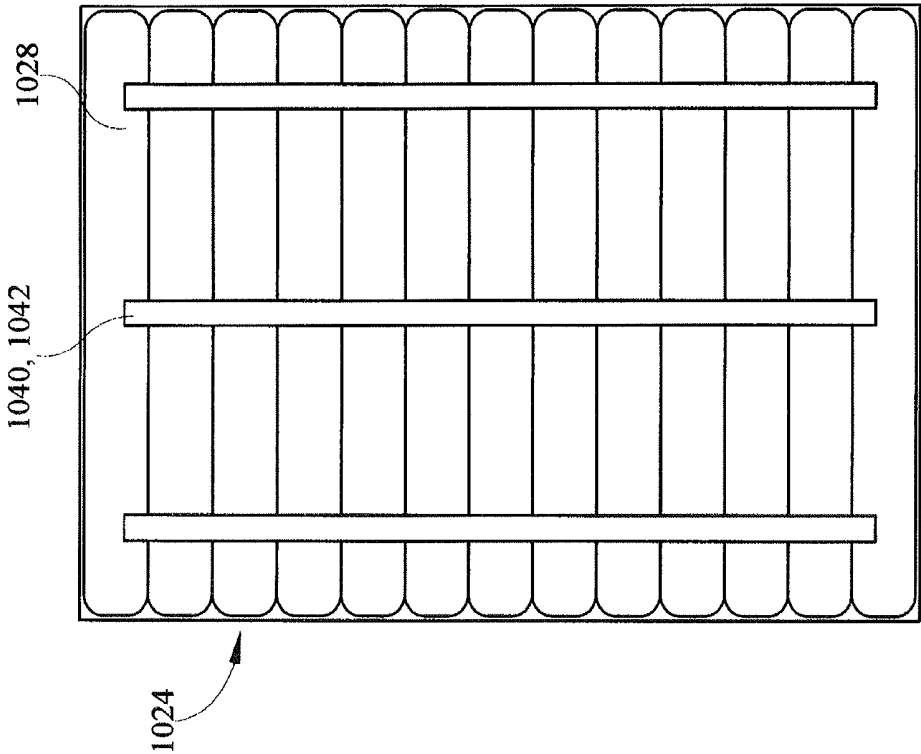


FIG. 6

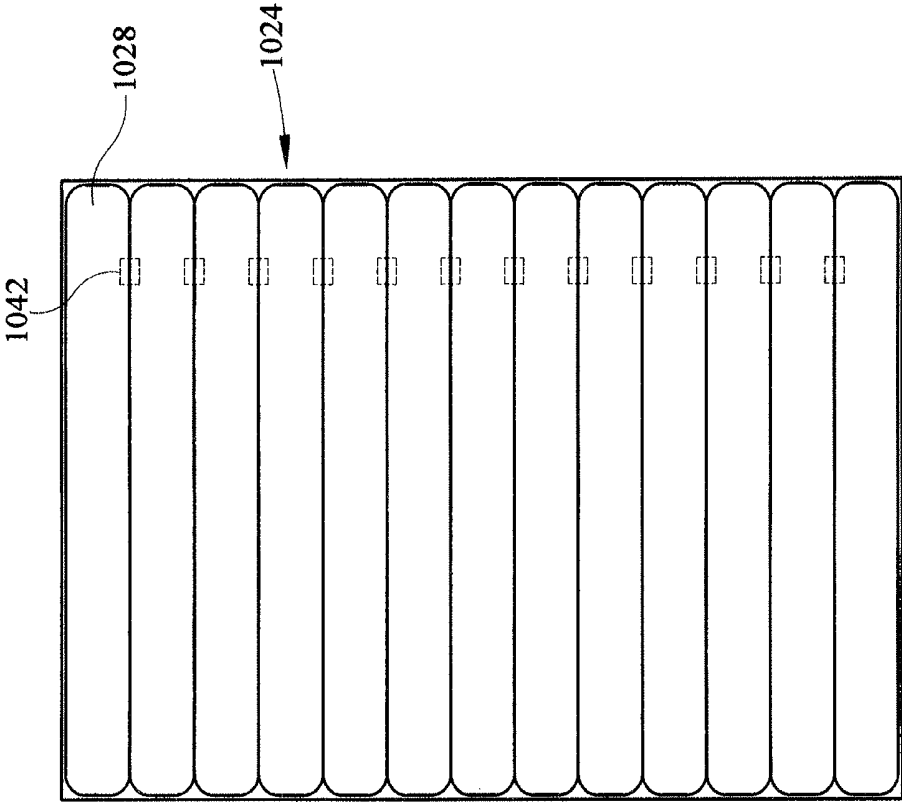


FIG. 8

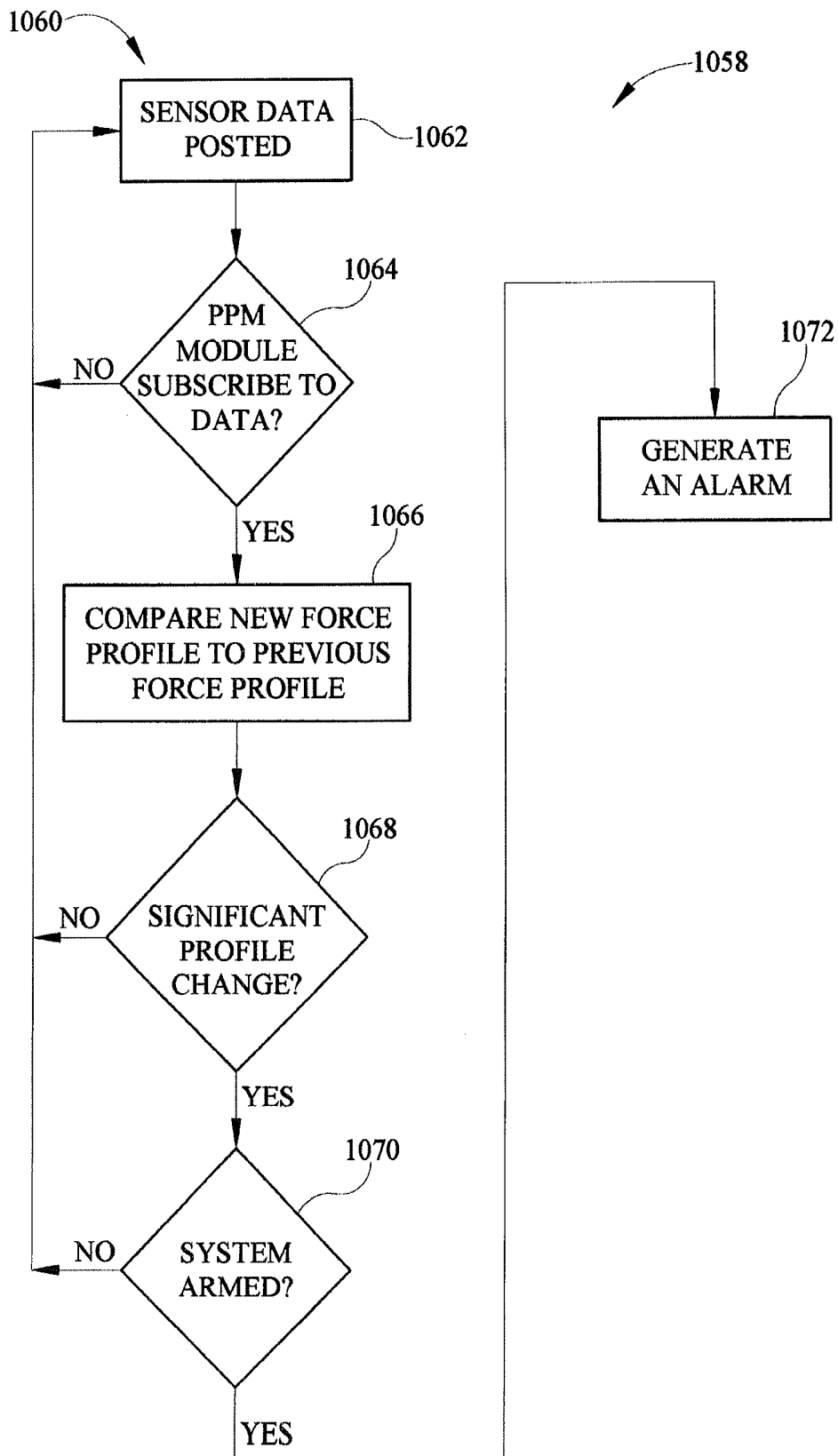


FIG. 9

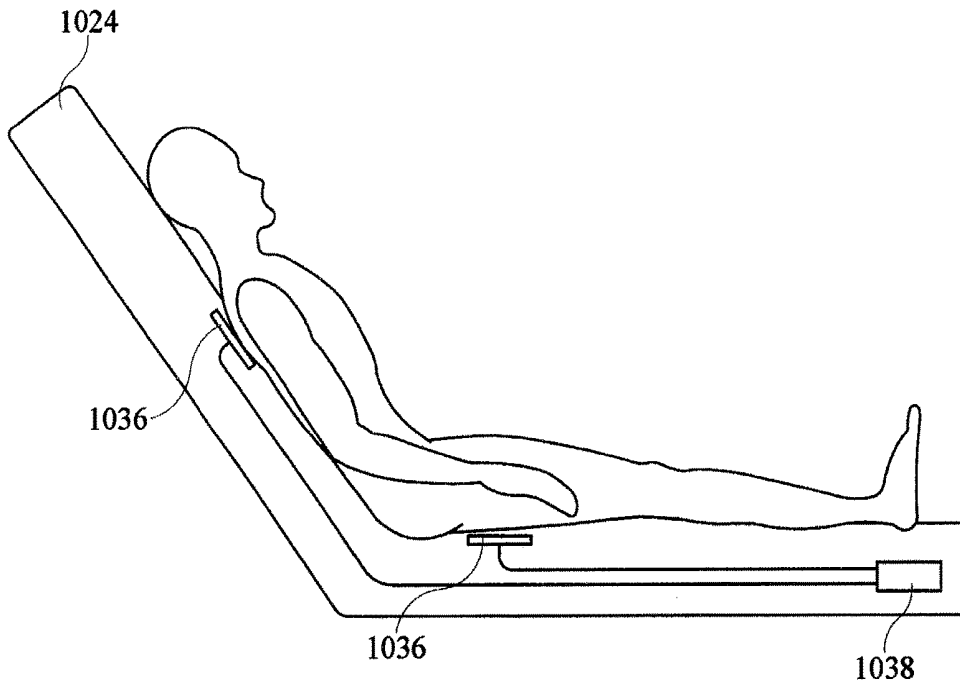


FIG. 10

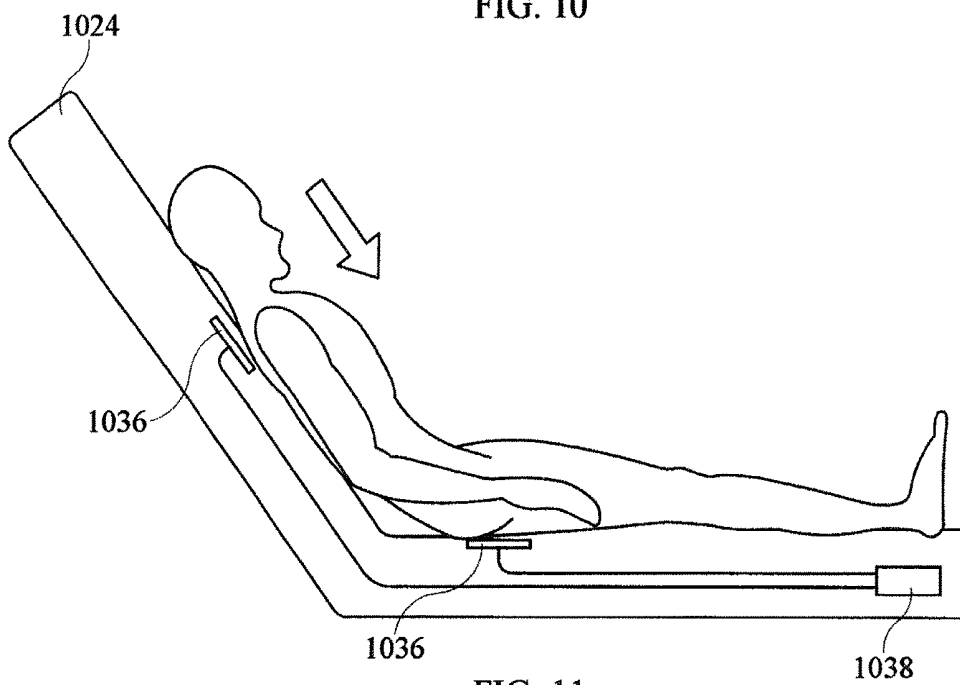


FIG. 11

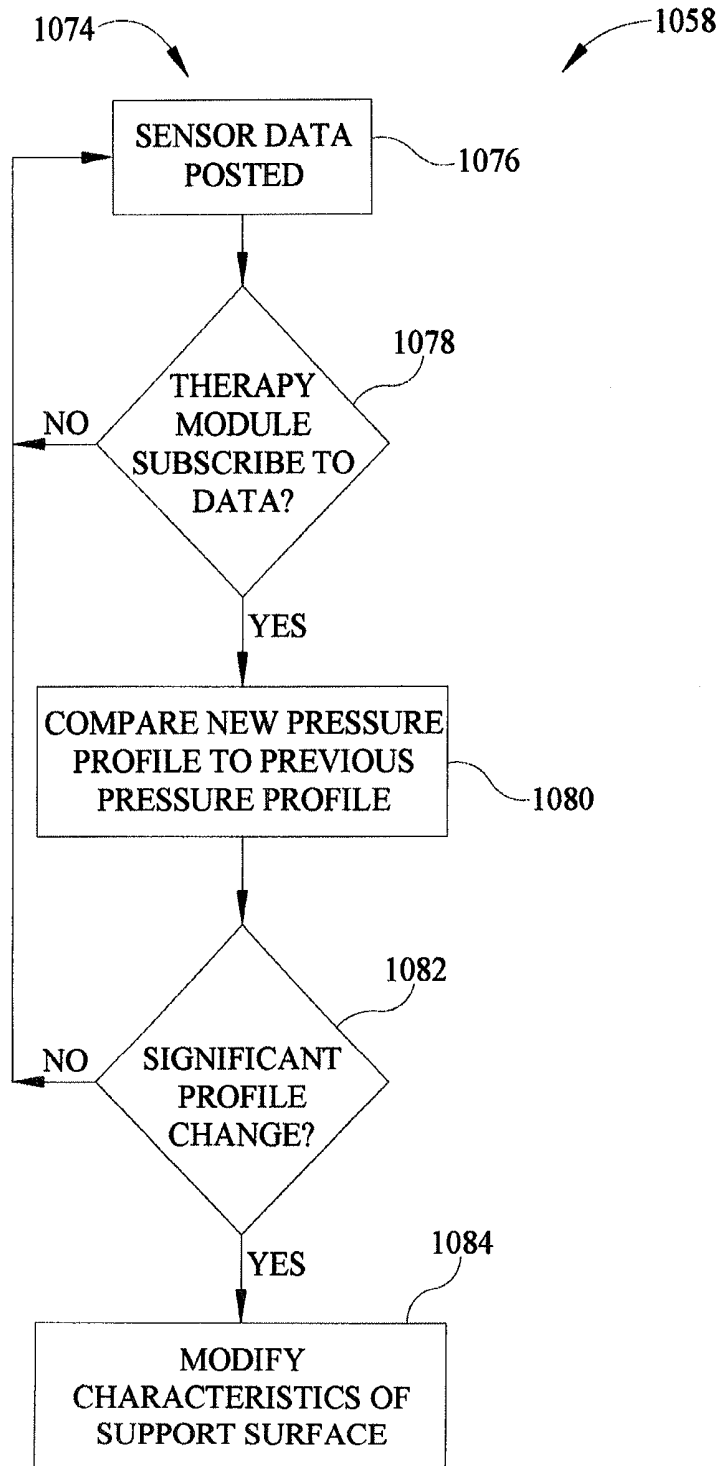


FIG. 12

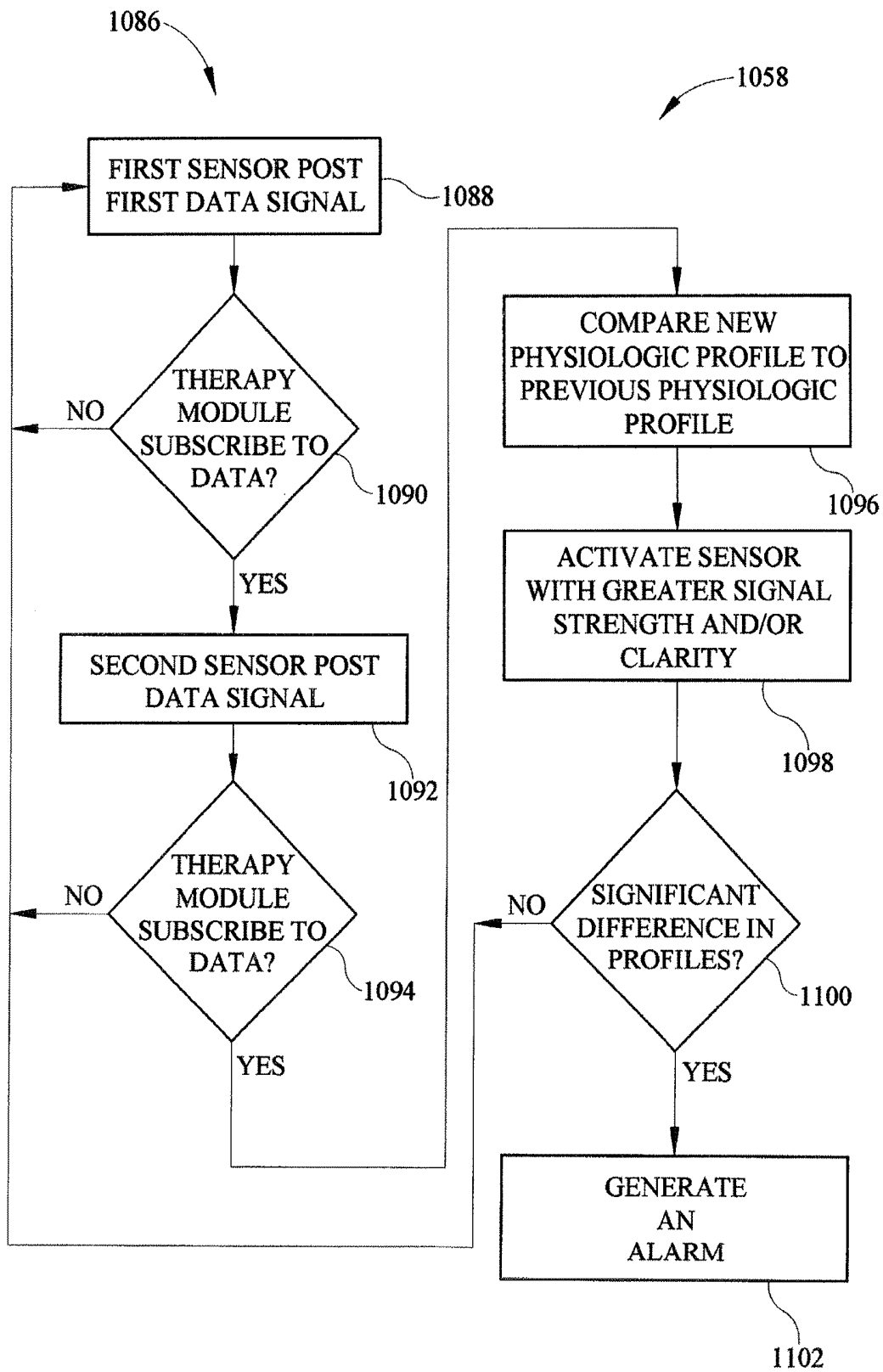


FIG. 13

## PERSON SUPPORT APPARATUS HAVING PHYSIOLOGICAL SENSOR

### CROSS-REFERENCE TO RELATED APPLICATIONS

This application is a continuation of U.S. application Ser. No. 15/379,578, filed Dec. 15, 2016, now U.S. Pat. No. 9,775,758, which is a continuation of U.S. application Ser. No. 14/686,244, filed Apr. 14, 2015, now U.S. Pat. No. 9,549,675, which is a continuation of U.S. application Ser. No. 14/014,875, filed Aug. 30, 2013, issued as U.S. Pat. No. 9,013,315 on Apr. 21, 2015, which is a continuation of U.S. application Ser. No. 12/881,252, filed Sep. 14, 2010, issued as U.S. Pat. No. 8,525,679 on Sep. 3, 2013, which claims the benefit, under 35 U.S.C. § 119(e), of U.S. Provisional Application Nos. 61/243,714; 61/243,741; 61/243,806; and 61/243,825; each of which was filed Sep. 18, 2009 and each of which is hereby incorporated by reference herein.

The present application relates to U.S. application Ser. No. 12/881,285, filed Sep. 14, 2010, issued as U.S. Pat. No. 8,525,680 on Sep. 3, 2013, and titled "Apparatuses for Supporting and Monitoring a Condition of a Person."

### BACKGROUND

This disclosure relates to person support apparatuses such as hospital beds. More particularly, the present disclosure relates to person support apparatuses having sensors that sense one or more conditions of the person or of the apparatus.

Person support apparatuses include beds, chairs, stretchers, seats, mattresses, therapy surfaces, furniture, and the like, or other apparatuses that support a person. Hospital beds and stretchers, hospital mattresses, and wheelchairs are examples of such apparatuses that support persons. Consumer beds, chairs, and furniture are also examples of such person support apparatuses, as are seats for vehicles, businesses, and venues.

Vital signs monitors monitor one or more physiological parameters of a person, such as body temperature, pulse rate, heart rate, blood pressure, and respiratory rate, as well as other body signs, such as end-tidal CO<sub>2</sub>, SpO<sub>2</sub> (saturation of oxygen in arterial blood flow), and other indicators of the person's physiological state. Position and movement detection systems monitor the position and/or movement of a person to determine if they are attempting to exit the support apparatus.

While various person support apparatuses have been developed, there is still room for development. Thus, a need persists for further contributions in this area of technology.

### SUMMARY

The present disclosure includes one or more of the features recited in the appended claims and/or the following features which, alone or in any combination, may comprise patentable subject matter.

A person support apparatus may include a frame and a support surface cooperating with the frame to support a person. The person support apparatus may also have a sensor coupled to one of the frame and the support surface, the sensor detecting at least one characteristic associated with the person. A controller may be coupled to the sensor. In response to at least one of a condition of the frame, a condition of the support surface, a position of the person, or a condition of the person, the controller may operate to

control the sensor by at least one of changing a gain of the sensor and changing a manner in which a signal from the sensor is filtered.

The controller may also be operable to turn the sensor on and off. The sensor may include a plurality of sensors and the controller may operate to control each of the plurality of sensors by at least one of changing a gain of each of the plurality of sensors and changing a manner in which signals from each of the plurality of sensors is filtered. The controller may operate to turn off some of the plurality of sensors and to turn on others of the plurality of sensors. The determination by the controller as to which sensors may be turned off and which sensors may be turned on may be based on a position of the person relative to the support surface or relative to the frame. Alternatively or additionally, the determination by the controller as to which sensors may be turned off and which sensors may be turned on may be based on movement of a first portion of the frame relative to a second portion of the frame.

The controller may be operable to implement via software at least one of a high pass filter, a low pass filter, and a band pass filter and/or the controller may be operable to selectively switch the sensor between being coupled to a high pass filter, a low pass filter, and a band pass filter. The controller may be operable to filter out noise associated with at least one of a first electric component associated with the support surface and a second electric component associated with the frame. The controller may be operable to filter out noise associated with separate medical equipment in a person's room based on information received from an electronic medical record (EMR) system.

The sensor may comprise a force sensing load cell coupled to the frame or a pressure sensing strip coupled to the support surface or both. The support surface may comprise a mattress that may have inflatable bladders and the sensor may include a pressure sensor that measures pressure in at least one of the bladders. The sensor may sense at least one of the person's weight, heart rate, respiration rate, and temperature. The at least one characteristic associated with the person and sensed by the sensor may include at least one of a force profile, a pressure in a bladder, and a physiological characteristic.

The controller may adjust the gain of the sensor as a function of a difference between a first position of the person relative to one of the frame and the support surface and a second position of the person relative to one of the frame and the support surface. The controller may be operable to prevent a user from accessing predetermined functions of the person support apparatus based on at least one of signal strength and clarity of a signal from the sensor.

The sensor may include a plurality of sensors and the controller may control the gain of each of the plurality of sensors such that signal strength of an output signal of each of the plurality of sensors may be substantially equal. The sensor may include a first sensor and a second sensor and the controller may operate to amplify a signal from the first sensor when signal strength of the signal from the first sensor is less than that of the second sensor. Alternatively or additionally, a signal from the first sensor may be filtered when signal clarity of the signal from the first sensor is less than that of the second sensor.

According to the present disclosure a system may be configured to select between a first sensor and a second sensor based on at least one of the position of a person on a person support surface, the pressure in support surface fluid bladders, a difference between the signal strength and/or clarity of the first sensor and a signal strength and/or

clarity of a second sensor, and person support apparatus status information. Also according to the present disclosure, a system may be configured to amplify and/or filter a signal from a first sensor as a function of at least one of a difference between the signal strength and/or clarity of the first sensor and a signal strength and/or clarity of a second sensor, the position of a person on a person support surface, the pressure in support surface fluid bladders, a comparison between a first sensor and second sensor, and person support apparatus status information.

Additional features alone or in combination with any other feature(s), including those listed above and those listed in the claims and those described in detail below, may comprise patentable subject matter. Others will become apparent to those skilled in the art upon consideration of the following detailed description of illustrative embodiments exemplifying the best mode of carrying out the invention as presently perceived.

### BRIEF DESCRIPTION OF THE DRAWINGS

Referring now to the illustrative examples in the drawings, wherein like numerals represent the same or similar elements throughout:

FIG. 1 is a perspective view of an embodiment of a person support apparatus according to one illustrative embodiment;

FIG. 2 is perspective view of the person support surface of FIG. 1 according to one illustrative embodiment partially cut away to reveal sensors integrated therein;

FIG. 3 is a perspective view of the upper frame according to one illustrative embodiment of the person support apparatus of FIG. 1;

FIG. 4 is a diagrammatic view of a control system for the person support apparatus of FIG. 1 according to one illustrative embodiment;

FIG. 5 is a diagrammatic view of a control system for the person support apparatus of FIG. 1 according to another illustrative embodiment;

FIG. 6 is a top view of the fluid bladders within the person support surface of FIG. 2 with pressure sensors coupled across the bladders according to one illustrative embodiment;

FIG. 7 is a top view of the fluid bladders within the person support surface of FIG. 2 with pressure sensors coupled along the bladders according to another illustrative embodiment;

FIG. 8 is a top view of the fluid bladders within the person support surface of FIG. 2 with pressure sensors integrated in the bladders according to yet another illustrative embodiment;

FIG. 9 is a flowchart for a procedure that can be executed by the control system of FIGS. 4 and/or 5 according to one illustrative embodiment;

FIG. 10 is a partial diagrammatic view of a person in a first position with respect to the person support surface of FIG. 1 according to one illustrative embodiment;

FIG. 11 is a partial diagrammatic view of a person in a second position with respect to the person support surface of FIG. 1;

FIG. 12 is a flowchart for a procedure that can be executed by the control system of FIGS. 4 and/or 5 according to one illustrative embodiment; and

FIG. 13 is a flowchart for a procedure that can be executed by the control system of FIGS. 4 and/or 5 according to one illustrative embodiment.

### DETAILED DESCRIPTION

While the present disclosure can take many different forms, for the purpose of promoting an understanding of the

principles of the disclosure, reference will now be made to the embodiments illustrated in the drawings, and specific language will be used to describe the same. No limitation of the scope of the disclosure is thereby intended. Various alterations, further modifications of the described embodiments, and any further applications of the principles of the disclosure, as described herein, are contemplated.

One illustrative embodiment of the present disclosure includes a system configured to select between a first sensor and a second sensor based on at least one of the position of a person on a person support surface, the pressure in support surface fluid bladders, a difference between the signal strength and/or clarity of the first sensor and a signal strength and/or clarity of a second sensor, and person support apparatus status information. Another illustrative embodiment includes a system configured to amplify and/or filter a signal from a first sensor as a function of at least one of a difference between the signal strength and/or clarity of the first sensor and a signal strength and/or clarity of a second sensor, the position of a person on a person support surface, the pressure in support surface fluid bladders, a comparison between a first sensor and second sensor, and person support apparatus status information.

A person support apparatus **1010** according to an illustrative embodiment of the current disclosure is shown in FIG. 1. The person support apparatus **10** includes a head section **H1**, where the head and a portion of the torso of a person (not shown) can be positioned, and a foot section **F1**, where the feet of a person (not shown) can be positioned. The person support apparatus **1010** includes a lower frame **1012** or base **1012**, an upper frame **1014**, a plurality of supports **1016**, a fluid supply **1018**, and a control system **1020**. In some embodiments, the person support apparatus **1010** includes only one support **1016**. The lower frame **1012** includes at least one lower frame section that is supported by casters **1022** as shown in FIG. 1.

The person support apparatus **1010** supports a person support surface **1024** or mattress **1024** on the upper frame **1014** as shown in FIGS. 1, 2, & 6-8. The person support surface **1024** is configured to support a person (not shown) in multiple articulated positions. The person support surface **1024** includes a back portion **B1** and a main portion **M1**. The person support surface **1024** includes a cover **1026** or ticking **1026** that envelopes one or more support sections and/or layers having foam and/or fluid bladders **1028**. The person support surface **1024** is configured to deliver therapy to the person, such as, for example, through sequential inflation/deflation of the fluid bladders **1028**, rapid changes in pressure of the fluid in the fluid bladders **1028**, and/or passing fluid through the person support surface **1024**. For example, one or more portions of the surface **1024** provides alternating pressure therapy, continuous lateral rotation therapy, low air loss therapy, boost assistance, percussion/vibration therapy, and/or other therapies. In some contemplated embodiments, the person support surface **1024** includes a coverlet (not shown) that overlies another person support surface **1024** and that is configured to deliver therapy to a person supported thereon.

The supports **1016** are coupled with the upper frame **1014** and the lower frame **1012** and define a vertical axis **Z1** that extends through the lower frame **1012** and the upper frame **1014** substantially perpendicular when the lower frame **1012** and the upper frame **1014** are parallel one another as shown in FIG. 1. In the illustrative example, the supports **1016** are lift mechanisms **1016** with a lift driver (not shown) that causes the lift mechanisms **1016** to expand and/or contract to raise and/or lower the upper frame **1014** with respect to

the lower frame **1012**. In some embodiments, the supports **1016** include at least one of telescoping towers, scissor lifts, rotational lifts, hydraulic lifts or actuators, pneumatic lifts or actuators, linear actuators, electronic actuators, chain lifts, or other lift mechanisms. In some embodiments, the supports **1016** comprise at least one fixed column (not shown). According to some embodiments, the supports **1016** move the upper frame **1014** to a Trendelenburg/reverse Trendelenburg position and/or rotate the upper frame **1014** from side to side with respect to the lower frame **1012**.

The upper frame **1014** defines a longitudinal axis X1 that extends at least the length of the person support apparatus **1010** through the head end H1 and the foot end F1 along the lateral center of the upper frame **1014**, and a lateral axis Y1 that is perpendicular to the longitudinal axis X1 and extends at least the width of the person support apparatus **1010** through the longitudinal center of the upper frame **1014** as shown in FIGS. 1 and 3. The upper frame **1014** includes a deck **1030**, an intermediate frame **1032**, and an upper frame base **1034** coupled to the supports **1016** which support the deck **1030** and the intermediate frame **1032**. In some embodiments, the upper frame **1014** also includes a foot-board FB, a head board HB, and/or siderails SR supported by the intermediate frame **1032**. In some embodiments, the upper frame **1014** only includes a deck **1030**. The deck **1030** has multiple sections, such as, a head deck section HD, a seat deck section SD, and a foot deck section FD, that are pivotably coupled to one another and/or the deck **1030** and articulate about the lateral axis Y1.

The fluid supply **1018** couples to the person support surface **1024** through a conduit C1 and is configured to supply fluid to the fluid bladders **1028** of the person surface **1024** as shown in FIG. 3. In some embodiments, the fluid supply **1018** also supplies fluid to the coverlet (not shown). In some embodiments, the fluid supply **1018** supplies gas to the person support surface **1024**. The fluid supply **1018** includes a fluid source (not shown) such as an air blower (not shown) or an air compressor (not shown). The fluid supply **1018** includes a user interface (not shown) and/or a controller (not shown) that controls the operation of the fluid source in response to an input from a user or control system, such as, control system **1020**.

The control system **1020** includes a plurality of sensors **1036** and control modules **1038** as shown in FIGS. 5 and 6. In some embodiments, the control system **1020** is configured to control various functions of the person support apparatus **1010** including, but not limited to, for example, articulating the deck **1030** with respect to the intermediate frame **1032**, administering therapy to a person supported on the person support apparatus **1010**, alerting caregivers when a person is exiting the person support apparatus **1010**, alerting caregivers when a person is out of a desired position relative to the person support surface **1024**, output information processed by the control system **1020** to a display (not shown), etc. The control system **1020** is coupled to the upper frame **1014** in some instances. In other instances, the control system **1020** is coupled to the lower frame **1012**, supports **1016**, a siderail, and/or elsewhere on the person support apparatus **1010**. In further embodiments, the control system **1020** is incorporated within or coupled to the person support surface **1024**. In some embodiments, the control modules **1038** are integrated into a graphical user interface (not shown). In other embodiments, the control system **1020** is integrated into an external network (not shown), such as, a hospital network, in communication with the person support apparatus **1010**.

The sensors **1036** are operatively coupled to the control modules **1038** and are configured to sense various param-

eters, including, but not limited to, for example, a person's physiological information, a position of a person on the person support apparatus **1010** and/or person support surface **1024**, a pressure of the fluid inside the bladders **1028** in the person support surface **1024**, or other various parameters. In some embodiments, the sensors **1036** comprise force sensors **1040** that are coupled to the upper frame **1014** and that are configured to measure force on the upper frame **1014** as shown in FIGS. 5 and 6. In some embodiments, the sensors **1036** are force sensors **1040** that are configured to measure force on the upper frame **1014** and that are positioned between the intermediate frame **1032** and the upper frame base **1034** so as to couple the intermediate frame **1032** and deck **1030** to the upper frame base **1034**.

In some contemplated embodiments, the sensors **1036** are force sensors **1040** that are integrated into the person support surface **1024** and that are configured to measure changes in force on the person support surface **1024** as shown in FIG. 2. In some embodiments, the force sensors **1040** are coupled to the supports **1016** and/or the lower frame **1012**. In further embodiments, the sensors **1036** are integrated into the casters **1022** and/or are engaged by the casters **1022**. It is within the scope of this disclosure for the sensors **1036** to be integrated into the ticking **1026** such as being between the layers of the ticking **1026**. In some embodiments, the force sensors **1040** are load cells **1040** that are coupled proximate the corners of the intermediate frame **1032**. In some embodiments, the force sensors **1040** are piezoelectric sensors and/or elongated sensor strips or arrays. In other embodiments, the force sensors **1040** are other types of force sensors **1040** and are positioned in other locations on the upper frame **1014** and/or within the person support surface **1024**.

In some embodiments, the sensors **1036** are pressure sensors **1042** that are integrated into the person support surface **1024** and that are configured to measure the pressure in/among the fluid bladders **1028** in the person support surface **1024** as shown in FIGS. 6-8. In some embodiments, the pressure sensors **1042** are coupled between the bladders **1028** such that they allow communication between adjacent bladders **1028**. In some embodiments, the pressure sensors are situated within the bladders **1028** and measure the pressure within the bladder **1026**.

In some embodiments according to this disclosure, the sensors **1036** are physiological sensors **1044** that are integrated into the person support surface **1024** and that are configured to measure one or more physiological parameters of a person supported on the person support surface **1024** as shown in FIG. 2. For example, one or more of the force sensors **1040** and one or more of the pressure sensors **1042** sense different physiological parameters in some embodiments. In some embodiments, the physiological sensors **1044** are used to sense the heart rate and/or respiration rate of a person supported on the person support surface **1024**. Alternatively or additionally, one or more of the physiological sensors **1044** sense the temperature of the person. It also contemplated by this disclosure for the physiological sensors **1044** to be configured to sense the movement and/or weight of the person on the person support surface **1024**. In some embodiments, one or more of the physiological sensors **1044** are configured to sense the relative humidity of a tissue on the person support surface **1024**. In some embodiments, the physiological sensors **1044** are pressure-strip sensors disposed on the fluid bladders **1028** along an axis parallel with the lateral axis Y1 and/or along an axis parallel with the longitudinal axis X1.

The control modules **1038** are each configured to perform different operations in the illustrative example. However, in some embodiments, a single control module **1038** is configured to perform the multiple different operations. In some embodiments, a single control module **1038** is configured to perform operations independently or in conjunction with at least one other control module **1038**. In some embodiments, a first control module **1038**, such as, a person position monitor module **1046** (PPM), is configured to detect the position of a person on the person support apparatus **1010**. In some such embodiments, a second control module **1038**, such as a therapy control module **1048**, is configured to sense and/or modify the pressure within the fluid bladders **1028**. In further such embodiments, a third control module **1038**, such as a physiological parameter monitor module **1050**, is configured to detect a person's physiological information.

In some embodiments, the control modules **1038** are operatively coupled together through a network **1052** as shown in FIGS. **4** and **5**. The network **1052** facilitates communication between the various modules and/or equipment connected to the network **1052**. In some embodiments, the network **1052** is a CAN network on a person-support apparatus **1010**. Alternatively or additionally, the network **1052** comprises a hospital network (not shown). In some embodiments, the network **1052** includes other types of networks or communication protocols that facilitate communication between two or more devices. It is contemplated by this disclosure that the modules **1038** can be configured to connect to the network **1052** wirelessly, if desired. In some embodiments, the control modules **1038** negotiate with the network **1052** to be a network node. In some embodiments, the control modules **1038** are located at or on any node on the network **1052** and/or distributed across multiple nodes on the network **1052**.

The control modules **1038** are implemented using software and/or hardware. In some embodiments, the control modules **1038** are implemented in software and are configured to perform one or more operations as shown in FIGS. **4** and **5**. In some embodiments, the modules **1038** are configured to communicate via a memory mailbox where information from one module is sent to the memory address of a recipient module. In other embodiments, the software modules are configured to push information to a memory location, such as, a stack, that the control modules **1038** monitor or periodically check for information that the software modules subscribe to.

In some embodiments, the control modules **1038** are implemented using hardware. In some such embodiments, the control modules **1038** include a controller **1054** or processor **1054** and memory **1056** as shown in FIGS. **4** and **5**. The controller **1054** is provided as a single component or a collection of operatively coupled components; and is comprised of digital circuitry, analog circuitry, or a hybrid combination of both of these types. When of a multicomponent form, controller **1054** has one or more components remotely located relative to the others in some instances. The controller **1054** includes, for example, multiple processing units arranged to operate independently, in a pipeline processing arrangement, in a parallel processing arrangement, and/or such different arrangement as would occur to those skilled in the art. In some embodiments, processor **1054** is a programmable microprocessing device of a solid-state, integrated circuit type that includes one or more processing units and memory. It is within the scope of this disclosure for the controller **1054** to include one or more signal conditioners, modulators, demodulators, Arithmetic

Logic Units (ALUs), Central Processing Units (CPUs), limiters, oscillators, control clocks, amplifiers, signal conditioners, filters, format converters, communication ports, clamps, delay devices, memory devices, and/or different circuitry or functional components as would occur to those skilled in the art to perform the desired communications. In some embodiments, the controller **1054** includes a computer network interface to communicate among various system components and/or components not included in the depicted system, as desired. The listed examples are not intended to be an exhaustive list of structures that are within the scope of controller **1054**, but are instead only a non-exhaustive list of such structures which can have substantial differences in the manner in which they are implemented and/or operate.

The controller **1054** is operatively coupled with the sensors **1036** and receives information from the sensors **1036**. In some embodiments, one or more of the sensors **1036** are operatively coupled to the network **1052** and the controller **1054** receives the information from the sensors **1036** and outputs from other modules **1038** via the network **1052**. In some embodiments, one or more of the sensors **1036** are configured to produce an analog data signal and are connected directly to the controller **1054**. Alternatively or additionally, one or more of the sensors **1036** are configured to produce a digital data signal, e.g., a serial digital data signal, that is transmitted to the network **1052**, e.g., a Serial Peripheral Interface (SPI) network **1052**, to communicate with the controller **1054**. The signals are stored in the memory **1056**, which is operatively coupled with the controller **1054**. In some embodiments, the memory **1056** is integrated into the controller **1054**.

The controller **1054** is configured to execute operating logic **1058** that defines various control, management, and/or regulation functions as shown in FIGS. **9**, **12** and **13**. In some embodiments, the software implemented modules include operating logic **1058**. The operating logic **1058** is in the form of software, firmware, and/or dedicated hardware, such as, a series of programmed instructions, code, electronic files, or commands using general purpose or special purpose programming languages or programs executed on one or more general purpose or special purpose computers, processors, other control circuitry, or networks; a hardwired state machine; and/or a different form as would occur to those skilled in the art.

In some embodiments, one of the control modules **1038** is a patient position monitoring (PPM) module **1046**. The memory **1056** of the controller **1054** includes operating logic **1058** with a number of software algorithms and other data that is executed by the controller **1054** to monitor patient movement relative to a reference load cell **1040** distribution, impending exit from the person support surface **1024** and/or exit therefrom. In some embodiments, the operating logic **1058** for managing such functions is in accordance with FIG. **5** in the form of a combined flowchart and/or state machine. The operating logic **1058** is executed periodically by the controller **1054**, e.g., once every 200 ms, to monitor patient movement relative to a reference load cell **1040** distribution, impending exit from the mattress **1024** and/or exit from the mattress **1024**. Referring to FIG. **5**, the operating logic **1058** begins with the controller **1054** determining whether the person position monitor module **1046** is armed, i.e., whether one of the patient monitoring modes was active, before the last power down of the person position monitor module **1046**.

The patient monitoring modes includes a patient movement (PM) mode wherein the person position monitor module **1046** is operable to monitor movement of a patient

on the mattress **1024** by monitoring weight distribution among two or three of the four load cells **1040** relative to a predefined set of PM load cell threshold data, a patient exit (PE) mode wherein the person position monitor module **1046** is operable to monitor impending exit from the mattress **1024** by monitoring weight distribution of the four load cells **1040** relative to a predefined set of PE load cell threshold data, and a patient out-of-bed (OOB) mode wherein the person position monitor module **1046** is operable to monitor exit of the patient from the mattress **1024** by monitoring the patient weight distributed over the four load cells **1040** relative to an armed patient weight, wherein the armed weight corresponds to the patient weight distributed over the four load cells **1040** when the patient monitoring mode was armed as will be described in greater detail hereinafter. In any case, if the controller **1054** determines that the person position monitor module **1046** was not armed before the last system power down, execution of the operating logic **1058** causes the controller **1054** to execute a state machine preparation routine. If the controller **1054** instead determines that the person position monitor module **1046** was armed before the last system power down, execution of the operating logic **1058** advances to an Arming From Power Up Transition State of the state machine where the patient weight is processed to determine whether it is contained within a defined armed range prior to advancing to the PM Active State of the state machine to resume operation of the patient monitoring mode that was active at the last system power down. One example of such a system can be found in U.S. Pat. No. 7,253,366 to Bhai, issued on Aug. 7, 2007.

In some embodiments, the controller **1054** detects the ingress/egress of a person to/from the person-support apparatus **1010** by determining the center of gravity of the weight thereon. One example of such a system can be found in U.S. Pat. No. 5,276,432 to Travis, issued on Jan. 4, 1994. In still another illustrative embodiment, the controller **1054** treats the upper frame **1014** as though it were disposed within a horizontal plane, extracts from the weight value measured by each load cell **1040** a portion which represents the weight of a patient, uses the extracted portions to calculate the location within the plane of a center of gravity of the patient, determines whether the location of the center of gravity is inside or outside a predetermined region which is a portion of the plane, and initiates an alarm when it is found that the center of gravity is located outside the predetermined region. One example of such a system can be found in U.S. Pat. No. 5,276,432.

In some embodiments, the controller **1054** of the PPM module **1046** includes operating logic **1058** in the form of procedure **1060**, for example, as shown in the flowchart of FIG. 9. Procedure **1060** includes operations/conditionals shown in blocks **1062**, **1064**, **1066**, **1068**, **1070**, and **1072**. Procedure **1060** evaluates changes in the force profile (FP) for the surface **1024** as a function of the difference between the last sensed force values (LSFV) and the newly sensed force values (NSFV) as represented by the following equation:

$$\Delta FP \begin{bmatrix} A & B \\ C & D \end{bmatrix} = LSFV \begin{bmatrix} A_L & B_L \\ C_L & D_L \end{bmatrix} - NSFV \begin{bmatrix} A_N & B_N \\ C_N & D_N \end{bmatrix}$$

Procedure **1060** begins with the operation of block **1062** where, in some embodiments, the force sensors **1040** post an electronic data signal representing at least one of an event and an amount of force on the network **1052**. In some

embodiments, the force sensors **1040** post data signals continuously and/or over at predetermined intervals. Alternatively or additionally, the force sensors **1040** post data signals in response to a query from a PPM module **1046**. In some embodiments, the data signals include information that identifies what operations and/or control modules **1038** the data can be utilized by. It should also be appreciated that posting can mean sending data out on a network. In some embodiments, the sensors **1036** are operatively coupled directly to specific control modules **1038**, for example, the force sensors **1040** being operatively coupled to the PPM module **1046**, the pressure sensors **1042** being operatively coupled to a therapy control module **1048**, and the physiological sensors **1044** being operatively coupled to a physiological parameter monitor module **1050**.

In the conditional of block **1064**, the PPM module **1046** examines the data signal posted by the force sensors **1040** on the network **1052** and determines whether or not the PPM module **1046** performs any operations that utilize the data as an input, i.e., whether or not the PPM module **1046** subscribes to the data signal. Other control modules **1038**, such as, the therapy control module **1048** and/or the physiological parameter monitor module **1050**, also subscribe to the force sensor **1040** data signal and receives the data as an input, while control modules **1038** that do not subscribe to the data disregard the data and wait for data signals to be posted that they do subscribe to.

In the operation of block **1066**, the controller **1054** of the PPM module **1046** inputs the data into the control logic **1058** that utilizes the data as an input. In the PPM control logic **1058**, the controller **1054** stores the posted data in the memory **1056** and compares previously posted data and newly input data to determine changes in the force profile of a person on the surface **1024**, i.e., determine if and where a person has moved with respect to the surface **1024**.

In the conditional of block **1068**, the controller **1054** determines if changes in the force profile are greater than a predetermined threshold. Changes in the force profile can potentially signify that the person is positioned higher on the surface **1024**, i.e., more toward the head end H1 of the person support apparatus **1010**, than desired; or that the person is positioned lower on the surface **1024**, i.e., more toward the foot end F1 of the person support apparatus **1010**, than desired. See FIGS. 10 and 11. In some embodiments, changes in the force profile is used to determine whether the person has moved to a side of the surface **1024** and/or how much they have moved with respect to the surface **1024**. Such a determination is helpful in predicting whether the person is going to exit the person support apparatus **1010**, adjusting the sensitivity of the sensors **1036** to compensate for movement, when a person is beginning to wake up, and/or whether continued therapy in the new/current position is desirable, or various other situations.

In the conditional of block **1070**, if the controller **1054** determined in the conditional of block **1068** that the change in the force profile exceeded the predetermined threshold, the controller **1054** proceeds to determine whether or not the PPM system is armed, i.e., whether or not the PPM module **1046** is set to monitor the position of the person on the person support apparatus **1010**. In some embodiments, a caregiver and/or the person on the person support apparatus **1010** activates and deactivates the PPM system locally through a caregiver interface on the person support apparatus **1010** or remotely. If the PPM system is armed, then the controller **1054** generates an alert signal in the operation of block **1072** to alert a caregiver that the person on the person support apparatus **1010** is about to exit the person support

apparatus **1010**. In some embodiments, the controller **1054** also communicates the amount the person has moved with respect to the person support apparatus **1010**. The controller **1054** communicates the alert signal wirelessly or over a hospital network or an adverse condition alert system, such as, the Navicare® system sold by Hill-Rom Company, Inc., a caregiver station, a mobile paging device, a cellular phone, a pendant, over an intercom, or through other caregiver notification methods and devices. If the PPM system is not armed, then the controller **1054** returns to the operation of block **1062**. In some embodiments, the controller **1054** generates signals representative of an event, e.g., the person has moved toward the head section H1, and/or an amount that the person has moved with respect to the person support apparatus **1010** and post the signals back on the network **1052** before returning to operation **1062** since other control modules **1038** can subscribe to the output of the PPM module **1046**. In some embodiments, the controller **1054** prevents a user from accessing specific features on a user interface (not shown) based on the movement/positioning of the person on the person support surface **1024**.

In some embodiments, one of the control modules **1038** is a therapy control module **1048**. The therapy control module **1048** is operatively coupled to the pressure sensors **1042** and the fluid supply **1018**. In some embodiments, the therapy control module **1048** controls various therapies that are administered to the person, such as, lateral rotation, percussion vibration, low air loss, or other therapies. The therapy control module **1048** includes operating logic **1058** in the form of procedure **1074**, for example, as shown in the flowchart of FIG. **12**. Procedure **1074** includes the operations/conditionals of blocks **1076**, **1078**, **1080**, **1082**, and **1084**. Procedure **1074** evaluates changes in the pressure profile (PP) for the surface **1024** as a function of the difference between the last sensed pressure values (LSPV) and the newly sensed pressure values (NSPV) as represented by the following equation:

$$\Delta PP[P] = LSPV[P_L] - NSPV[P_M]$$

Procedure **1074** begins with the operation of block **1076** where, in some embodiments, the pressure sensors **1042** post an electronic data signal representing at least one of an event and an amount on the network **1052**. In the conditional of block **1078**, the therapy control module **1048** examines the data signal posted by the pressure sensors **1042** on the network **1052** and determines whether or not the therapy control module **1048** performs any operations that utilize the data as an input, i.e., whether or not the therapy control module **1048** subscribes to the data signal.

In the operation of block **1080**, the controller **1054** of the therapy control module **1048** inputs the data into the control logic that utilizes the data as an input. In some embodiments, the controller **1054** of the therapy control module **1048** inputs the data into the therapy control logic **1058**. In the therapy control logic **1058**, the controller **1054** stores the posted data in the memory **1056** and compares previously posted data and newly input data to determine changes in the pressure profile of a person on the surface **1024**, i.e., determine if, where, and by how much a person has moved with respect to the surface **1024**.

In the conditional of block **1082**, the controller **1054** determines if changes in the force profile are greater than a predetermined threshold. Changes in the pressure profile can potentially signify that the person is positioned higher on the surface **1024**, i.e., more toward the head end H1 of the person support apparatus **1010**, than desired; or that the person is positioned lower on the surface **1024**, i.e., more

toward the foot end F1 of the person support apparatus **1010**, than desired. In some embodiments, changes in the pressure profile is used to determine whether the person has moved toward a side of the surface **1024** and/or how much they have moved with respect to the surface **1024**. Such a determination is helpful in predicting whether the person is going to exit the person support apparatus **1010** and/or whether therapy in the current position or a new position is desirable.

In the operation of block **1084**, if the controller **1054** determined in the conditional of block **1082** that the change in the force profile exceeded the predetermined threshold, the controller **1054** cooperates with the fluid supply **1018** to modify various characteristics of the support surface **1024**. In some embodiments, the controller **1054** cooperates with the fluid supply **1018** to adjust the pressure of the fluid within the fluid bladders **1028** as a function of the movement. In some embodiments, the pressure in the fluid bladders **1028** is changed to maintain a comfort level of a person by reducing the pressure in some bladders **1028** and increasing the pressure in other bladders **1028** to compensate for the movement of the person. In some embodiments, the controller **1054** cooperates with the fluid supply **1018** to adjust a therapy, such as, continuous lateral rotation, percussion vibration, or other therapies, as a function of the movement. In some embodiments, the therapy is stopped completely or at least until the person moves back to within a predetermined range of the previous position. In some embodiments, the controller **1054** generates signals representative of an event, e.g., the pressure profile has changed, which can potentially signify movement of the person with respect to the surface **1024**, and/or an amount that the pressure has increased, or an amount the pressure profile has changed and post the signals back on the network **1052** before returning to operation **1076**, since other control modules **1038** subscribe to the output of therapy control module **1048** in some instances.

In some embodiments, one or more of the control modules **1038** are a physiological parameter monitor module **1050**. The physiological parameter monitor module **1050** is operatively coupled with the physiological sensors **1044**. The physiological parameter monitor module **1050** includes operating logic **1058** in the form of procedure **1086**. In some embodiments, procedure **1086** evaluates changes in the physiological sensor signal strength and/or clarity (PS) for the surface **1024** to determine whether a first physiological sensor **1044** would provide a more desirable signal and should be used instead of a second physiological sensor **1044**. Thus, according to this disclosure, one or more of some sensors **1044** are turned on and one or more of others are turned off depending upon which sensors have or are expected to have the best quality data signals. Information from the PPM system of the person support apparatus, for example, may be used to determine that the sensors **1044** on the left half of the apparatus should be turned on and the sensors on the right half **1044** should be turned off based on the position of the patient being more toward the left half of the apparatus, or vice versa. Other subsets of the sensors may be turned on and off in other scenarios such as, for example, turning on sensors in a seat section if the PPM system indicates that the patient is likely sitting up while turning off sensors in zones or sections of the person support apparatus that are no longer supporting a person.

In some embodiments, procedure **1086** evaluates the changes in the PS as a function of the difference between a first physiological sensor signal strength and/or clarity (FPS)

and a second physiological sensor signal strength and/or clarity (SPS) as represented by the following equation:

$$\text{APS}[S]=\text{FPS}[S_L]-\text{SPS}[S_M]$$

In other embodiments, procedure **1086** subscribes to data on the network **1052** and uses the data to determine what sensor **1036** or sensor array **1036**, i.e., physiological sensor **1044** or sensor array **1044**, should be activated or turned on to obtain the most desirable physiological signal. In some embodiments, procedure **1086** subscribes to output signals from the PPM module **1046** regarding the position of the person with respect to the surface **1024** and causes the physiological parameter monitor module **1050** to activate and/or receive input signals from different sensors **1036** as a function of the position of the person. In some embodiments, procedure **1086** subscribes to data on the network **1052** corresponding to the angle of articulation of the head deck section HD and causes the physiological parameter monitor module **1050** to activate and/or receive input signals from different sensors **1036** as a function of the angle of articulation of the head deck section HD. For example, depending upon the angle of articulation of the head deck section HD, the physiological parameter monitor module **1050** activates and/or receives input signals from a first sensor when the angle of articulation of the head deck section HD is less than a first angle and activates and/or receives input signals from a second sensor when the angle of articulation of the head deck section HD is greater than or equal to a second angle. In some embodiments, the angle is about 30°.

According to this disclosure, procedure **1086** includes the operations/conditionals of blocks **1088**, **1090**, **1092**, **1094**, **1096**, and **1098** as shown in the flowchart of FIG. **13**. Procedure **1086** begins with operation **1088** where, in some embodiments, a first physiological sensor **1044** posts an electronic data signal representing at least one of an event and an amount on the network **1052**. In the conditional of block **1090**, the controller **1054** examines the data signal posted by a first physiological sensor **1044** and determines whether or not the physiological parameter monitor module **1050** performs any operations that utilize the data as an input, i.e., whether or not the physiological parameter monitor module **1050** subscribes to the data signal. If the controller determines that the module **1050** subscribes to the data, the first signal is stored in the memory **1056**.

In the operation of block **1092**, the controller **1054** deactivates the first physiological sensor **1044** and activates a second physiological sensor **1044**. In some instances, the first physiological sensor **1044** and the second physiological sensor **1044** can both be active. Deactivating or turning off a sensor within the scope of this disclosure includes at least one of receiving information from the sensor but not using it, blocking and/or breaking communication with the sensor, and/or cutting power to the sensor. The second physiological sensor **1044** posts an electronic data signal representing at least one of an event and an amount on the network **1052** in some instances.

In the conditional of block **1094**, the controller **1054** examines the data signal posted by a second physiological sensor **1044** and determines whether or not the physiological parameter monitor module **1050** subscribes to the data signal. If the controller **1054** determines that the module **1050** subscribes to the data, the first signal is stored in the memory **1056**. In the conditional of block **1096**, the controller **1054** compares the first sensed signal with the second sensed signal.

In the operation of block **1098**, if the controller **1054** determines that the signal from the first physiological sensor **1044** has a higher signal strength, i.e., amplitude, and/or clarity than the signal generated by the second physiological sensor **1044**, the controller deactivates the second physiological sensor **1044** and re-activate the first physiological sensor **1044**. In some instances, both physiological sensors **1044** are simultaneously active. If the controller **1054** determines that the signal from the first physiological sensor **1044** has a lower signal strength and/or clarity than the signal generated by the second physiological sensor **1044**, the controller **1054** continues to receive signals from the second physiological sensor **1044** in some embodiments. In some embodiments, if the controller **1054** determines that the signal from the first physiological sensor **1044** has a lower signal strength and/or clarity than the signal generated by the second physiological sensor **1044**, the controller **1054** amplifies and/or filters the signal generated by the first physiological sensor **1044** to increase the signal strength and/or clarity of the first physiological sensor **1044**.

In the conditional of block **1100**, the controller determines if the difference between the first physiological sensor signal strength and/or clarity and the second physiological sensor signal strength and/or clarity is greater than a predetermined threshold. If the difference is greater than the predetermined threshold, then the controller **1054** generates an alert signal in operation **1102** to alert a caregiver. In some embodiments, the controller **1054** also communicates the value of the physiological sensor **1044** and posts back the value on the network **1052**. In some embodiments, the controller **1054** communicates the alert signal wirelessly or over a hospital network or an adverse condition alert system, such as, the Navicare® system sold by Hill-Rom Company, Inc., a caregiver station, a mobile paging device, a cellular phone, a pendant, over an intercom, or through other caregiver notification methods and devices. If the difference between the first physiological sensor signal strength and/or clarity and the second physiological sensor signal strength and/or clarity is not significant, then the controller **1054** returns to the operation of block **1088**.

In some embodiments, the controller **1054** generates signals representative of the difference between the first physiological sensor signal strength and/or clarity and the second physiological sensor signal strength and/or clarity and posts the signals back on the network **1052** before returning to the operation of block **1088** because other control modules **1038** subscribe to the output of the physiological parameter monitor module **1050** in some instances. In some embodiments, the controller **1054** prevents a user from accessing specific features on a user interface (not shown) based on the first physiological sensor signal strength and/or clarity and the second physiological sensor signal strength and/or clarity of the person on the person support surface **1024**.

As mentioned above, the sensitivity of a signal from a sensor, such as sensors **1040**, **1042**, **1044**, is adjusted to improve its signal strength and/or clarity. One way of accomplishing this is to change the gain of the sensor **1040**, **1042**, **1044**. One gain change technique is to use switches, such as transistors or micro-switches to selectively open circuit or close circuit various parallel resistors in a feedback loop of a respective operational amplifier circuit to which signals from sensors **1040**, **1042**, **1044** are input. Thus, the operational amplifier circuit in such embodiments is considered to be part of the sensor. Use of transistors or micro-switches that are selectively activated or deactivated to couple the signals from sensors **1040**, **1042**, **1044** to one

or more filters, such as a high pass filter, a low pass filter and/or a band pass filter is also contemplated by this disclosure. Digital signal processors that are programmable to implement one or more high pass filters, low pass filters, and/or band pass filters are also within the scope of this disclosure.

According to this disclosure, sensors that are included in person support apparatus 1010 and that have gain change and filtering capabilities associated therewith include moisture sensors, acoustic sensors, flow rate sensors, temperature sensors, force sensors, and pressure sensors, just to name a few. The frequency or frequencies that are filtered out from the signals of sensors 1040, 1042, 1044 include, for example, those associated with a motor that moves one portion of apparatus 1010 relative to another portion (e.g., deck articulation motors, such as linear actuators, or lift system motors), those associated with components of a pneumatic system of apparatus 1010 (e.g., blowers or compressors used to inflate mattress 1024), those associated with room ventilation equipment or fans, those associated with mechanical noise (e.g., bearing noise curing deck articulation), and those associated with separate medical equipment such as patient ventilators, IV pumps, passive motion machines, and the like.

In some embodiments, control system 1020 of apparatus 1010 receives information from a remote computer, such as a computer associated with an electronic medical records (EMR) system to determine what types of separate medical equipment is being used with a particular person. Based on that information, system 1020 determines the appropriate frequency or frequencies to filter out from the signals from one or more of sensors 1040, 1042, 1044. A look-up table, for example, is provided in memory of control system 1020 with a list of "noise" frequencies associated with various types of medical equipment that are commonly used with persons to be supported on apparatus 1010. Alternatively or additionally, system 1020 performs its own analysis of signals from sensors 1040, 1042, 1044 before and after a particular component or piece of equipment starts operating or running and then determines the frequency or frequencies of the noise introduced into the signal as a result of the operation of the component or equipment. Thereafter, the appropriate frequency or frequencies is/are filtered out of the signals from sensors 1040, 1042, 1044. Alternatively or additionally, system 1020 adjusts the threshold criteria for sending alerts to caregivers depending upon whether particular components or pieces of equipment are being used.

In some embodiments, the control system 1020 is configured to change its operational characteristics based on the status of the person-support apparatus 1010 and/or the status of devices (not shown) coupled to the person-support apparatus 1010 and/or coupled to the person supported on the person-support apparatus 1010. In one example, the controller 1054 receives an input indicative that the angle of the head section of the deck has changed. In this example, the controller 1054 is configured to stop receiving input signals from a sensor coupled to the head section and start receiving signals from a sensor in the seat section, apply various filters, such as, band-pass, low-pass, and/or high-pass filters, to the input signal to eliminate undesired noise, or increases/decreases the gain of the sensor as a function of the angle of the head section. In some instances, the sensor coupled to the head section is deactivated and the sensor in the seat section is activated. In some embodiments, the controller looks up a device in a look-up table and/or compares the signal prior to a change in status of the signal with the signal after the

change in status to determine what noise the change in status might have introduced into the signal to determine the appropriate filter(s) to apply.

In another example, the controller 1054 receives an input indicative that continuous lateral rotation therapy is being administered by the person support apparatus 1010. Continuous lateral rotation therapy is used to rotate an occupant side to side to help reduce the risk of developing pressure ulcers. In some embodiments, continuous lateral rotation is implemented through the inflation and/or deflation of fluid bladders in the mattress and/or by rotating the upper frame about the longitudinal axis X1. In this example, the controller 1054 is configured to stop receiving input signals from a sensor coupled to one of the lateral sides of the person-support apparatus and start receiving signals from a sensor coupled to the other of the lateral sides of the person-support apparatus, apply various filters, such as, band-pass, low-pass, and/or high-pass filters, to the input signal to eliminate undesired noise, and/or increase/decrease the gain of the sensor as a function of the lateral rotation. Thus, the sensor coupled to or adjacent one of the lateral sides is deactivated and the sensor coupled to or adjacent the other of the lateral sides is activated. According to this disclosure, the activation/deactivation, filtering, and/or gain increase/decrease is applied to individual sensors in an array of sensors where more than one sensor is communicating signals to the controller.

In another example, the controller 1054 receives an input indicative of the status of a device coupled to the person-support apparatus and/or the person on the person-support apparatus. The information that another device is coupled to the person and/or person-support apparatus is sometimes available from the EMR or is sometimes input by a caregiver. In some instances, the device is in electronic communication, such as wireless or wired communication, with the person support apparatus 1010. In this example, the controller 1054 is configured to apply various filters, such as, band-pass, low-pass, and/or high-pass filters, to the input signal to eliminate undesired noise and/or change the gain of the sensors as a function of the device. As mentioned above, the controller looks up the needed information concerning the device in a look-up table and/or compares the signal prior to change in status with the signal after the change in status to determine what noise the change in status might have introduced to the signal to determine the appropriate filter(s) to apply. The controller 1054 also adjusts the parameters for any alarms that have been activated on the person-support apparatus, such as, PPM. In some embodiments, the controller 1054 modifies the operation of a single sensor or individual sensors in an array of sensors.

Any theory, mechanism of operation, proof, or finding stated herein is meant to further enhance understanding of principles of the present disclosure and is not intended to make the present disclosure in any way dependent upon such theory, mechanism of operation, illustrative embodiment, proof, or finding. It should be understood that while the use of the word preferable, preferably or preferred in the description above indicates that the feature so described can be more desirable, it nonetheless can not be necessary and embodiments lacking the same can be contemplated as within the scope of the disclosure, that scope being defined by the claims that follow.

In reading the claims it is intended that when words such as "a," "an," "at least one," "at least a portion" are used there is no intention to limit the claim to only one item unless specifically stated to the contrary in the claim. When the language "at least a portion" and/or "a portion" is used the

item can include a portion and/or the entire item unless specifically stated to the contrary.

While embodiments of the disclosure have been illustrated and described in detail in the drawings and foregoing description, the same are to be considered as illustrative and not restrictive in character, it being understood that only the selected embodiments have been shown and described and that all changes, modifications and equivalents that come within the spirit of the disclosure as defined herein or by any of the following claims are desired to be protected.

The invention claimed is:

1. A patient support apparatus comprising
  - a lower frame,
  - an upper frame adjustable relative to the lower frame and comprising a support deck having a head deck section, a vital signs sensor coupled to the head deck section and configured to detect at least one of heart rate and respiration rate,
  - at least one load sensor configured to detect a patient supported by the deck;
  - a controller configured to control movements of the patient support apparatus and in electrical communication with the vital signs sensor and the load sensor, and a user interface coupled to the controller and configured to display information regarding the patient support apparatus, wherein the controller is included as part of a CAN network of the patient support apparatus.
2. The patient support apparatus of claim 1, further comprising a network communication interface coupled to the controller and configured to communicate data from the patient support apparatus to a remote electronic system.
3. The patient support apparatus of claim 1, further comprising a pressure sensor configured to detect the pressure of an inflatable bladder.
4. The patient support apparatus of claim 1, wherein the controller is configured to adjust a sensitivity of the vital signs sensor.
5. The patient support apparatus of claim 4, wherein the controller adjusts the sensitivity of the vital signs sensor in response to information from the force sensor.
6. The patient support apparatus of claim 4, wherein the controller adjusts the sensitivity of the vital signs sensor by changing a gain of the vital signs sensor or by changing a manner in which a signal from the vital signs sensor is filtered.
7. The patient support apparatus of claim 1, wherein the controller is configured to turn power to the vital signs sensor on and off.
8. The patient support apparatus of claim 7, wherein the controller is configured to turn power to the vital signs sensor on and off in response to information from the force sensor such that power to the vital signs sensor is turned on by the controller in response to the force sensor sensing that the patient is present on the patient support apparatus and such that power to the vital signs sensor is turned off by the controller in response to the force sensor sensing that the patient is absent from the patient support apparatus.
9. A patient support apparatus comprising
  - a lower frame,
  - an upper frame adjustable relative to the lower frame and comprising a support deck having a head deck section, a vital signs sensor coupled to the head deck section and configured to detect at least one of heart rate and respiration rate,
  - at least one load sensor configured to detect a patient supported by the deck,

- a controller configured to control movements of the patient support apparatus and in electrical communication with the vital signs sensor and the load sensor,
- a user interface coupled to the controller and configured to display information regarding the patient support apparatus, and
- a network communication interface coupled to the controller and configured to communicate data from the patient support apparatus to a remote electronic system.
10. The patient support apparatus of claim 9, further comprising a pressure sensor configured to detect the pressure of an inflatable bladder.

11. The patient support apparatus of claim 9, wherein the controller is configured to adjust a sensitivity of the vital signs sensor.

12. The patient support apparatus of claim 11, wherein the controller adjusts the sensitivity of the vital signs sensor in response to information from the force sensor.

13. The patient support apparatus of claim 11, wherein the controller adjusts the sensitivity of the vital signs sensor by changing a gain of the vital signs sensor or by changing a manner in which a signal from the vital signs sensor is filtered.

14. The patient support apparatus of claim 9, wherein the controller is configured to turn power to the vital signs sensor on and off.

15. The patient support apparatus of claim 14, wherein the controller is configured to turn power to the vital signs sensor on and off in response to information from the force sensor such that power to the vital signs sensor is turned on by the controller in response to the force sensor sensing that the patient is present on the patient support apparatus and such that power to the vital signs sensor is turned off by the controller in response to the force sensor sensing that the patient is absent from the patient support apparatus.

16. A patient support apparatus comprising
  - a lower frame,
  - an upper frame adjustable relative to the lower frame and comprising a support deck having a head deck section, a vital signs sensor coupled to the head deck section and configured to detect at least one of heart rate and respiration rate;

at least one load sensor configured to detect a patient supported by the deck;

- a controller configured to control movements of the patient support apparatus and in electrical communication with the vital signs sensor and the load sensor;
- a user interface coupled to the controller and configured to display information regarding the patient support apparatus, and
- a pressure sensor coupled to the controller and configured to detect a pressure of an inflatable bladder.

17. The patient support apparatus of claim 16, wherein the controller is configured to adjust a sensitivity of the vital signs sensor.

18. The patient support apparatus of claim 17, wherein the controller adjusts the sensitivity of the vital signs sensor in response to information from the force sensor or from the pressure sensor.

19. The patient support apparatus of claim 17, wherein the controller adjusts the sensitivity of the vital signs sensor by changing a gain of the vital signs sensor or by changing a manner in which a signal from the vital signs sensor is filtered.

20. The patient support apparatus of claim 16, wherein the controller is configured to turn power to the vital signs sensor on and off in response to information from the force

sensor such that power to the vital signs sensor is turned on by the controller in response to the force sensor sensing that the patient is present on the patient support apparatus and such that power to the vital signs sensor is turned off by the controller in response to the force sensor sensing that the patient is absent from the patient support apparatus. 5

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专利名称(译)	具有生理传感器的人支持装置		
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摘要(译)

一种人支撑装置包括框架和与框架配合以支撑人的支撑表面。人支撑装置还具有耦合到框架和支撑表面中的一个的传感器。传感器检测与人相关的至少一个特征。控制器耦合到传感器。响应于框架的状况，支撑表面的状况，人的位置或人的状况中的至少一个，控制器操作以通过改变增益的至少一个来控制传感器。传感器并改变过滤传感器信号的方式。在某些情况下，控制器关闭传感器。

