March 29, 1927. 1,622,313

G. GELLHORN

OBSTETRICAL BED

Filed June 13, 1925 2 Sheets-Sheet 1

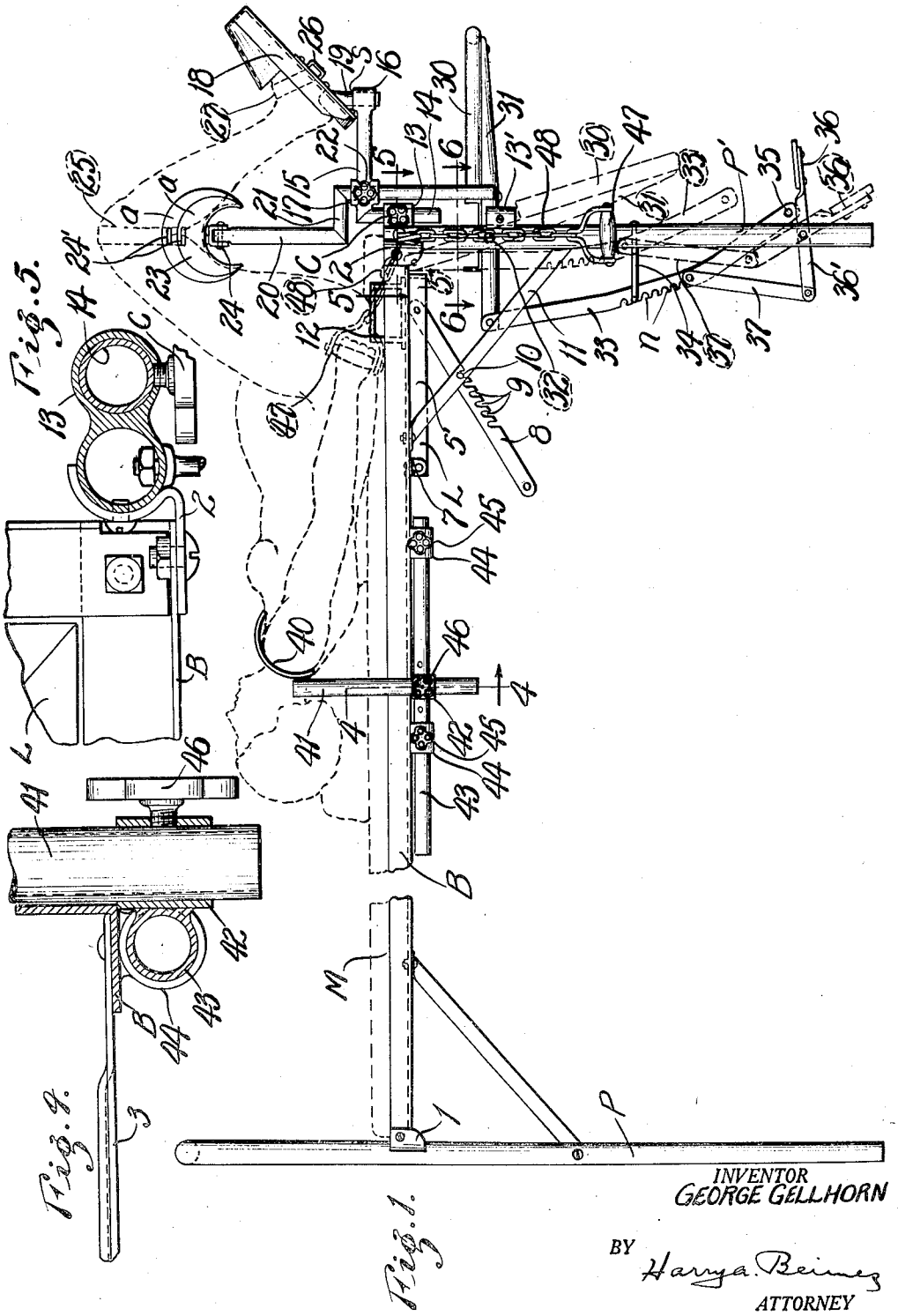


Fig. 1.

Fig. 3.

Fig. 4.

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Fig. 2.

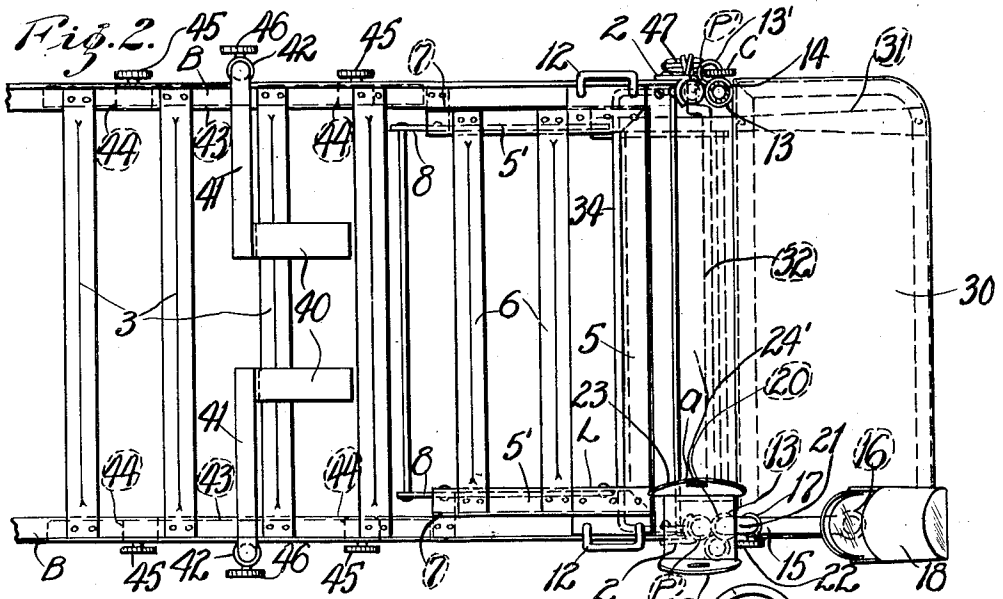


Fig. 3.

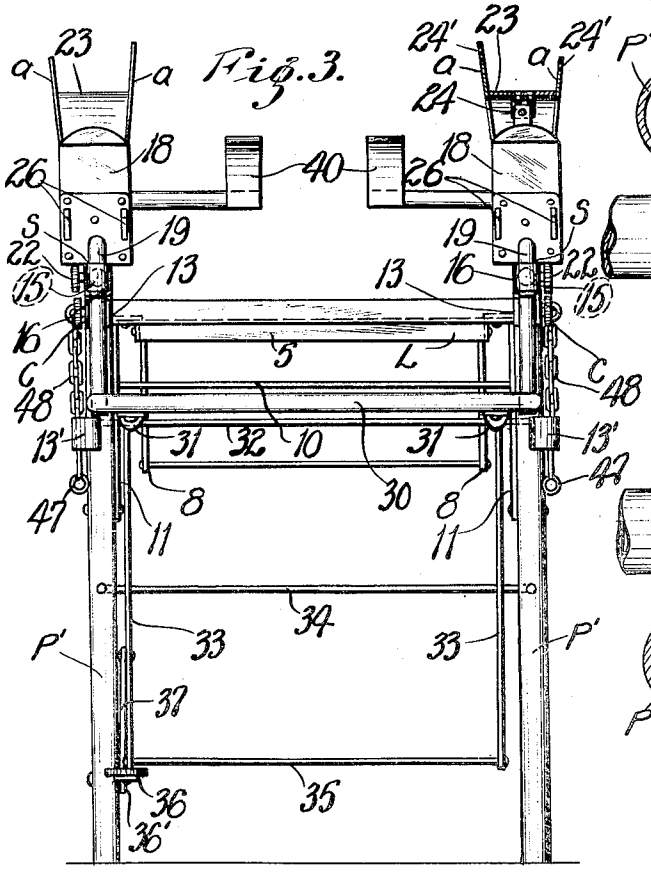
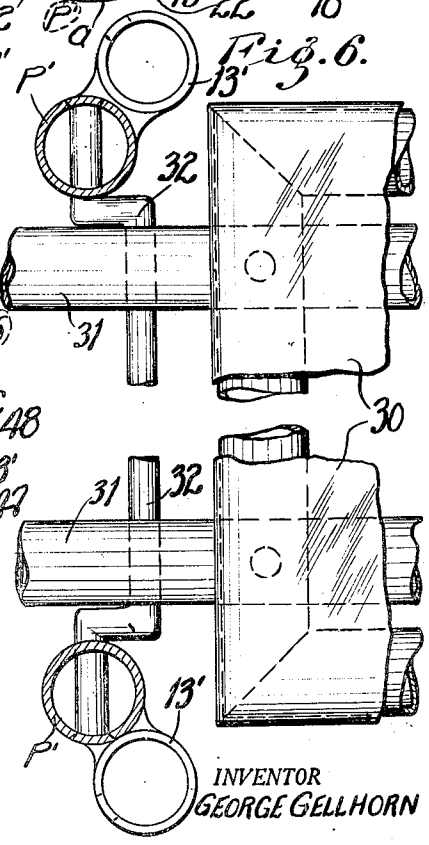


Fig. 6.



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UNITED STATES PATENT OFFICE.

GEORGE GELLHORN, OF ST. LOUIS, MISSOURI.

OBSTETRICAL BED.

Application filed June 13, 1925. Serial No. 36,919.

My invention has relation to improvements in obstetrical beds and consists in the novel features of construction more fully set forth in the specification and pointed out in the claim.

The object of the present invention is to provide a bed that is equipped with suitable devices for supporting the patient in a recumbent position and also for retaining the members of the body against movement while in such position. The supporting and retaining devices are also disposed in such positions as to inhibit the patent to lie in an attitude most favorable to the anatomical structure for child delivery. A further object is to provide the necessary adjustment for the retaining devices so that they may be made to conform to the size and proportion of different patients.

Further objects will be better apparent from a detailed description of the invention in connection with the accompanying drawings, in which—

Figure 1 is a side elevation of my improved obstetrical bed, a patient being indicated thereon in dotted outline; Fig. 2 is a top plan of the invention with parts broken away; Fig. 3 is an elevation of the foot end of the bed; Figs. 4, 5 and 6 are cross-sectional details taken on the lines 4—4, 5—5, and 6—6 respectively.

Referring to the drawings, B represents the bed bottom secured to the posts P, P of the head end frame and posts P′, P′ of the foot end frame by suitable corner brackets 1, 1, and 2, 2, respectively. A series of cross slats 3, 3 extend across the bed bottom, having their ends secured to the side rails 4, 4 of said bed bottom and a mattress M is laid over the slats. Near the foot end the slats 3 are omitted and in lieu of them is provided a hip lift L comprising a U-frame 5 between the sides 5′, 5′ of which extend slats 6, 6. The ends of side members 5′, 5′ are pivotally connected to angle brackets 7, 7 secured on the under side of the side rails 4, 4. The free end of the hip lift L is supported in the desired position by a pair of props 8, 8, one being pivotally connected at its upper end to each side member 5′, said props having a plurality of notches 9, 9, adapted to engage an anchor rod 10 secured between a pair of inclined braces 11, 11 each being secured at one end to the under side of a side rail 4 and at the other end to a post P. A pair of handles 12, 12 are provided on the hip lift to facilitate raising and lowering it.

Extending outwardly from the corner posts 2, 2, at the foot end of the bed are sockets 13 13 into each of which is inserted the depending part 14 of a bracket 15, said bracket having a terminal socket 16, and an intermediate socket 17 spaced therefrom. A screw clamp *c* is provided for holding the bracket rigidly in the socket. A foot rest 18 formed in the shape of a slipper has a shouldered stem 19 projecting from its under side and said stem is inserted into socket 16, the shoulder *s* engaging the top of the socket. It is thus apparent that the foot rest is freely revoluble in the socket 16. A pipe standard 20 having an offset 21, is mounted in socket 17 and is adapted to be secured against movement therein by a screw clamp 22, said standard 20 having a saddle 23 secured on its upper end by a universal joint 24. The saddle is adapted to support the limbs of the patient and is therefore shaped to conform to the shape of the underside of the knee. The sides *a*, *a*, of the saddle 23 are provided with slots 24′, 24′ to receive a strap 25 when necessary to strap the patient against undue movement. A loop 26 is secured on the bottom of the foot rest 18 for receiving a strap 27 when it is necessary to strap the feet in the foot rest. Sockets 13′, 13′ corresponding to sockets 13, 13 are secured to posts P′, P′, somewhat below sockets 13, 13, to effect a lower mounting of bracket 15 and standard 20 should the size of the patient require it.

A work shelf or tray 30 is provided at the foot end of the bed, said tray being secured onto a pair of arms 31, 31 which are pivotally mounted, intermediate their ends, on a rod 32 extending between and secured to bed posts P′, P′ a short distance below the bed bottom. The inner ends of arms 31, 31 are connected to the upper ends of a pair of downwardly extending brace bars 33, 33, each of which are provided with a series of notches *n*, *n* intermediate their extremities adapted to engage a rod 34 secured to posts P′, P′. Since the bars 33 do not lie in a common plane with posts P′, P′ but are somewhat inwardly of this plane, the rod 34 has its ends bent over at right angles so as to extend the main part of the rod inwardly to more readily engage the notches on the bars 33 and hold them firmly, the bars 33 in turn holding the tray 30 in the

desired position. The lower ends of the bars 33 are connected by a rod 35 so that they will move together as one member.

To facilitate changing the position of the tray 30, a release pedal 36 is provided, said pedal being pivoted at about the middle of its lever arm 36′ to the left hand post P′, and connected to left hand bar 33 by a link 37, one end of said link being connected to the bar just below the notches *n* and the other end of the link being pivotally connected to the end of lever arm 36′.

I also provide a pair of shoulder restraining devices 40, 40, bow-shaped to engage the shoulders of the patient, each of which is carried by a rod or tube 41, mounted in a socket 42 secured on a horizontally disposed bar 43. The bar 43 is mounted in sockets 44, 44 secured in spaced relation to the under side of a side rail 3, and is slidable therein to effect longitudinal adjustment, the bar being secured in adjusted position by clamp screws 45, 45 passing through the sockets 44, 44. The rod 41 is also slidable in the socket 42 for purpose of vertical adjustment, and a clamp screw 46 holds said rod in the selected position.

The operation of the invention is readily apparent by referring to Fig. 1, wherein a patient is positioned on the bed, and held in the proper attitude by the various restraining devices, which have been adjusted to comfortably accommodate the particular patient. It will be observed that the footrests 18 are movable in their sockets in order that the patient may find some measure of relief by moving the foot a limited amount. Hand-holds 47 are also provided for the patient who obtains relief from pain by gripping and pulling them. The hand-holds are connected to the bed corners 2, 2 by chains 48, 48. In the drawing (Fig. 1) the patient is shown lying flat on the bed, the hip lift L being in the same plane with the bed-bottom B. However, should the anatomical structure of the patient require it the hips may be elevated by raising the hip lift the desired extent (the handles 12, 12 being provided for this purpose) to cause a lower notch 9 on each prop 8 to engage the anchor rod 10.

Having described my invention, I claim:

An obstetric bed comprising head and foot frames, a bed-bottom supported thereby, a pair of brackets adjustably mounted in spaced relation on the foot frame, each of said brackets being provided with a pair of sockets in spaced relation, a foot-rest revolubly mounted in one of said sockets and a limb-support adjustably mounted in the other socket, said limb support comprising a standard and a saddle movably mounted on the upper end thereof, the vertical axis of said saddle being offset from the socket carrying the standard.

In testimony whereof I hereunto affix my signature.

GEORGE GELLHORN.