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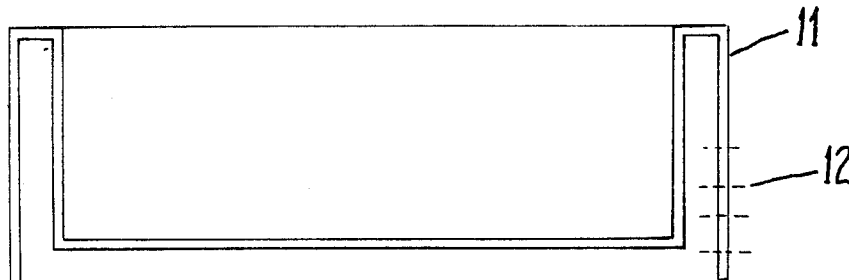
[54] **INTENSIVE CARE APPARATUS**
2 Claims, 5 Drawing Figs.

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312/242

[51] Int. Cl..... **A47F 5/08**

[50] Field of Search..... **211/87, 88,**
90; 312/242; 248/345.1

ABSTRACT: Medical intensive care apparatus, capable of versatile accommodation to different spacial configurations which, as a unit, provides an adequate source of oxygen and a variety of complete suction requirements for installation adjacent to or within a wall at a position of convenience for a patient and medical personnel.



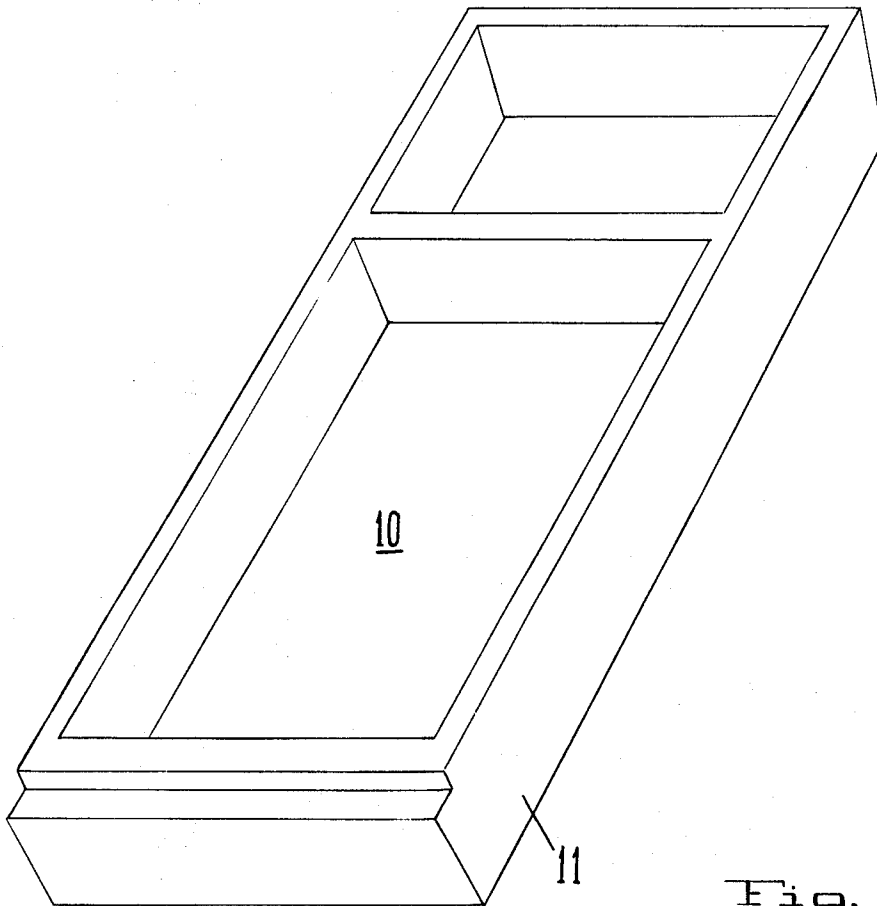


Fig. 1

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Fig. 4

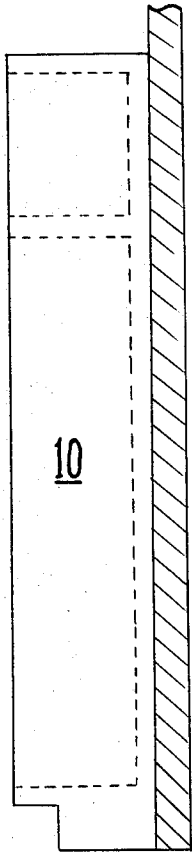
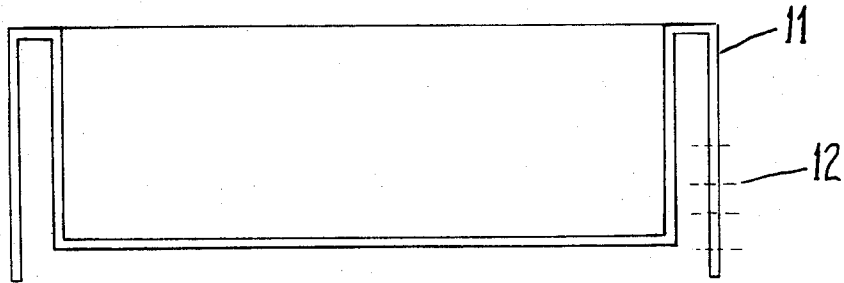


Fig. 3

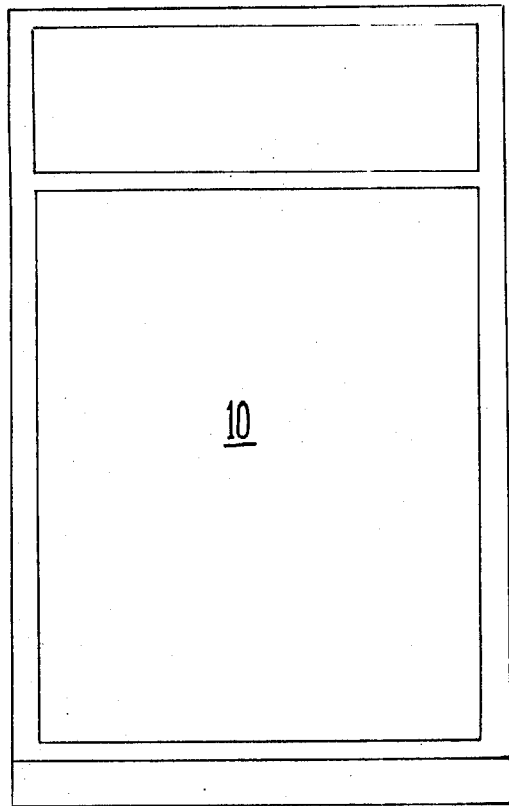


Fig. 2

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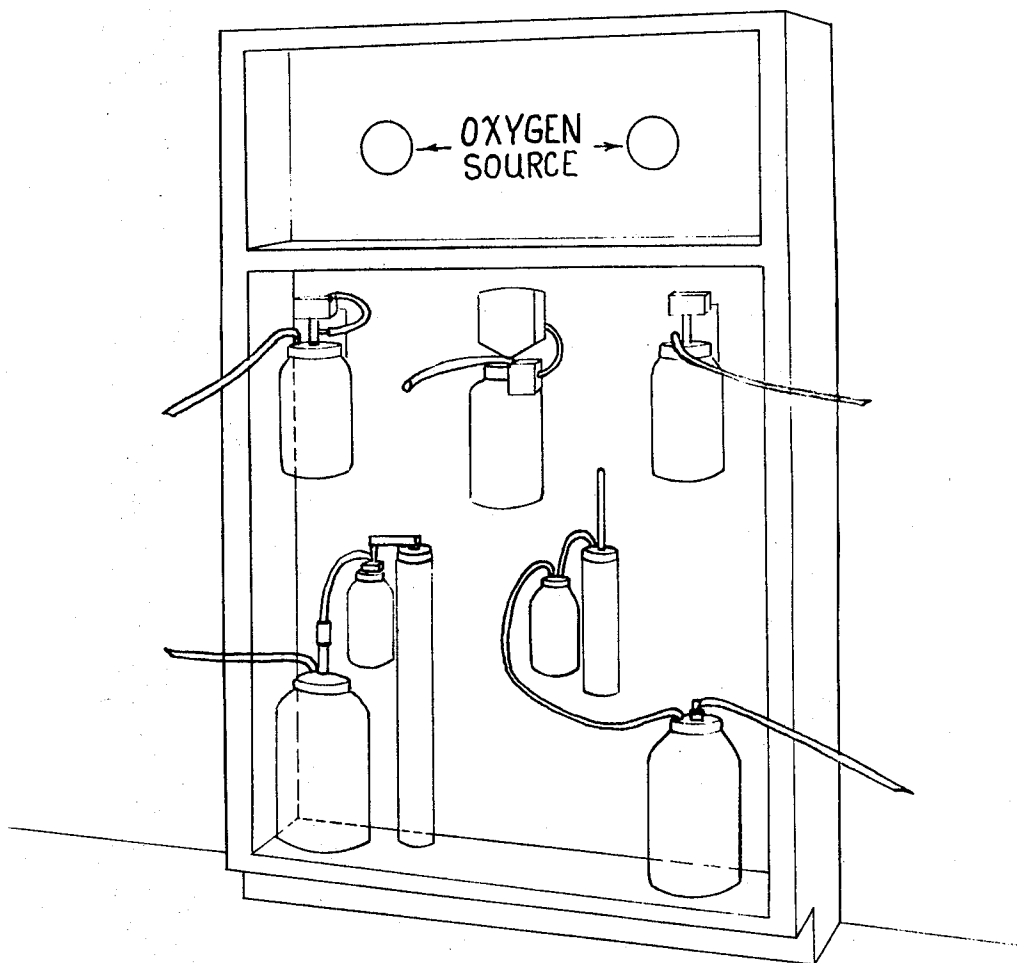


Fig. 5

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INTENSIVE CARE APPARATUS

SUMMARY

The present invention relates to a compact apparatus which supplies all the necessary components of an intensive care area. Accordingly, the present invention is directed at the removal of all that is superfluous or elaborative in an intensive care room where space, convenience, expedience are of the absolute necessity.

The present invention provides a variety of suction, along with an adequate source of oxygen now required in advanced procedures. Special or distinctive needs that arise in hospital intensive care wards require equipment, instrumentation or appliance designed for a particular serviceability that is respectively applied to appease or satisfy said needs or requirements. This means that a patient requiring vacuum for pleural drainage; regulated vacuum for aspiration; intermittent vacuum for gastrointestinal drainage; or oxygen for breathing, needs a plurality of equipment designed for each of the aforementioned specific operations. The result is a jungle of appliances and equipment in an area where space, convenience, and expedience are most essential. Therefore, the primary object of the present invention is to provide a compact apparatus which is a multifarious one-piece functional equipment by means of which the varied systematized activity is carried out with moderate or no loss of valuable space and inconvenience.

Because of its compact construction, the present invention is easily installed adjacent to the wall of the head of the bed in the intensive care area. Its plastic structure or housing can be sectioned or cut to adjust to any wall or recess therein. That is, the present invention may be installed into a wall presently under construction or may be installed into a wall already constructed with little or no difficulty. Thus to conform to a particular configuration of an allotted space without substantial modification thereto.

Another general object is to provide an improvement over the growing array of plug-in appliances that accumulate in an intensive care room. Electrical hazards in hospitals fall into two main categories: (1) Those resulting from the complexity of the equipment, which may be made by different manufacturers and thus have incompatible grounding systems, and (2) those arising from simple causes, such as worn cords and broken plugs which could in turn result in fire or explosion in a heavily oxygenated environment. The present invention eliminates the accumulated array of appliances by providing all needed equipment in one compact unit with no multitudinous and complex electrical configurations that could initiate said hazards.

The present invention is characterized by other objects, features and advantages, and is described hereinbelow in conjunction with the accompanying drawings, wherein:

DRAWING DESCRIPTION

- FIG. 1 is a perspective view showing the apparatus housing.
 FIG. 2 is a frontal view of the apparatus housing.
 FIG. 3 is a schematic side view of the apparatus housing.
 FIG. 4 is a sectioned view showing the apparatus housing with bottom portion removed.
 FIG. 5 is the complete unit as it would look installed into a wall with equipment added.

DETAILED DESCRIPTION

Referring first to FIG. 1, there is shown the framework unit or housing 10 as it looks without extra equipment before assembly. This housing 10 is constructed in such a manner as to allow the outer wall, or laterality 11 of said housing 10 to be segmented or sectioned. This means that if the unit is to be

recessed into a wall of an enclosure such as a hospital room, the outer wall or laterality 11 is cut to the desired depth thereby giving a flush appearance. It will be apparent that recession of the unit is not its only means of installation. As shown in FIG. 3 the unit 10 may be placed against a room wall as an alternative to recessing said unit 10, should it be so desired.

Referring now to FIG. 4 which diagrammatically illustrates the principle or method aforementioned to segment or section the housing 10. The outer wall or laterality 11 may be cut along section lines 12 to obtain desired depth.

FIG. 5 shows the complete apparatus recessed into a wall with oxygen and suction equipment added or inserted. It will be appreciated that the features of the various embodiments described in FIG. 5 may be used in any combination or with any variation of equipment without departing from the invention.

Currently, contractors who are given the task of either remodeling existing hospital facilities or alternatively are in the business of installing intensive care apparatus in newly constructed hospitals and the like, they or their suppliers have to maintain a rather large inventory of intensive care housings shown herein in order to accommodate particular space and configuration requirements therein. Utilizing the present invention it will be obvious that a single housing 10 of this invention will permit a contractor to maintain a relatively small inventory for the above purposes in for example, given an area which requires a rather shallow housing 10 the contractor may break off sections of the outer wall 11 along the lines 12 in order to recess said housing within an opening in a wall. In some cases access to the apparatus is desired from behind the housing and via another room to prevent access thereto by patients while permitting attention thereto by hospital personnel. Also it may be deemed desirable to have the housing 10 mounted as shown in FIG. 5 in its entirety without breaking off sections along the lines 12, solely at the discretion and necessity required by the physical conditions then existing in the hospital area. It will be further obvious that the section lines 12 may be continued for the full length and width of the outer wall 11 so as to permit the housing 10 to be completely flush mounted within an opening in a wall so as to present no outward projection within an intensive care room. Further modifications may be made, depending upon the particular requirements existing within present buildings or adapted to new construction as the conditions warrant such changes.

From the foregoing, it is believed that the invention may be readily understood by those skilled in hospital care without further description, it being borne in mind that numerous changes may be made in the details disclosed without departing from the spirit of the invention as set forth in the following claims.

What I claim is:

1. A medical equipment cabinet for mounting in a wall of a room comprising,
 - a preformed housing having a plurality of walls on the periphery thereof, the outer wall of said plurality of walls having a plurality of parallel segments defined therein to permit breakoff sections of said outer wall for purposes of obtaining variable depth between said cabinet and said wall of a room.
2. A medical equipment cabinet for mounting in a wall of a room comprising,
 - a preformed housing having an outer wall and an inner wall, said inner wall adapted for framing and enclosing medical equipment, said outer wall having parallel section lines on the periphery thereof for permitting the removal of sections of said outer wall to vary the mounting depth between said cabinet and said wall of said room.