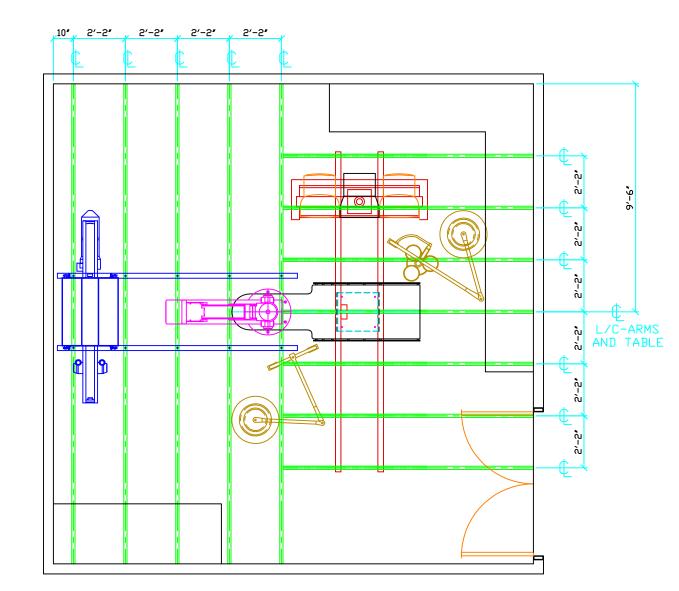
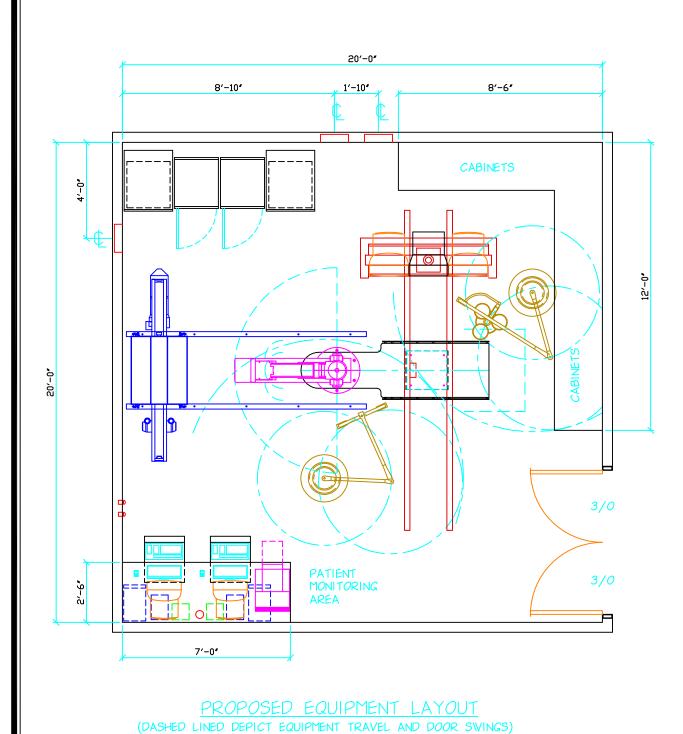
# 8′-11 1/4**″**

## PROPOSED EQUIPMENT LAYOUT



RECOMMENDED UNISTRUT GRID



# EQUIPMENT SCHEDULE

	EQUIPMENT IDENTIFICATION NUMBER						
			BTU / HOUR	WEI	GHT	(LBS.)	
IDTES			DESCRIPTION	DIMENS	_	(IN.)	
OFOI	1	50	OMEGA MEDICAL IMAGING, INC. (O-PIC 100 C/V) A-370 100kw AP X-RAY GENERATOR OPERATOR CONSOLE (COUNTER MOUNTED)	17. 06			
OFOI	2	600	DMEGA MEDICAL IMAGING, INC. (D-PIC 100 C/V) A-370 100kw AP X-RAY GENERATOR POWER SUPPLY	24. 25	30. 37	65, 31	160
OFOI	3	350	DMEGA MEDICAL IMAGING, INC. B-200 AP EPS L/C POSITIONER (FLOOR MOUNTED)	23. 00	62. 50	84. 25	63
OFOI	4	100	OMEGA MEDICAL IMAGING, INC. C-400 TILTING/ELEVATING TABLE	27. 00	94. 00	43. 00	62
OFOI	5	1000	OMEGA MEDICAL IMAGING, INC. I-100 AP L/C AND TABLE ELECTRONICS RACK CABINET	22. 00	25. 50	76. 00	40
OFOI	6	50	OMEGA MEDICAL IMAGING, INC. (O-PIC 60 F) A-340 60kw LAT X-RAY GENERATOR OPERATOR CONSOLE (COUNTER MOUNTED)	17. 06	8. 69	2. 63	
OFOI	7	600	OMEGA MEDICAL IMAGING, INC. (O-PIC 60 F) A-340 60kw LAT X-RAY GENERATOR POWER SUPPLY	24. 25	30. 37	65. 31	160
OFOI	8	500	DMEGA MEDICAL IMAGING, INC. B-350 LATERAL EPS POSITIONER (CEILING MOUNTED)	96. 25	120. 00	96. 00	75
OFOI	9	1000	DMEGA MEDICAL IMAGING, INC. I-105 LAT L/C AND INTERFACE BI-PLANE RACK CABINET	22. 00	25. 50	76. 00	40
OFOI	10	N/A	DMEGA MEDICAL IMAGING, INC. D-601 3 DVER 3 MONITOR SUSPENSION SYSTEM (CEILING SUSPENDED FIXED POST)	160. 00	49. 00	68. 00	62
OFOI	11	1200	DMEGA MEDICAL IMAGING, INC. D-500 21" FIMI IMAGE MONITOR (x4) (CEILING SUSPENDED)	19. 60	21. 93	19. 09	
OFOI	12	800	OMEGA MEDICAL IMAGING, INC. E-500 AP PC CABINET (BENEATH CABINET)	11. 00	18. 00	26. 00	6
OFOI	13	300	DMEGA MEDICAL IMAGING, INC. AP D-501 AP 17" FIMI IMAGE MONITOR (COUNTER MOUNTED)	16. 77	19. 29	17. 44	5
OFOI	14		OMEGA MEDICAL IMAGING, INC. E-500 AP PC KEYBOARD (ON SLIDING SHELF)	19. 00	8, 00	3, 00	
OFOI	15		OMEGA MEDICAL IMAGING, INC. AP E-500 POWER CONDITIONER (UPS) (BENEATH COUNTER)	8. 50	8, 00	4. 25	3
OFOI	16		OMEGA MEDICAL IMAGING, INC. E-500 AP ISOLATION TRANSFORMER	8. 50	12. 25	7. 25	3
OFOI	17	800	OMEGA MEDICAL IMAGING, INC. E-502 LAT PC CABINET (BENEATH CABINET)	11. 00	18. 00	26. 00	6
OFOI	18	300	DMEGA MEDICAL IMAGING, INC. LAT D-501 AP 17" FIMI IMAGE MONITOR (COUNTER MOUNTED)	16. 77	19. 29	17. 44	5
OFOI	19		OMEGA MEDICAL IMAGING, INC. E-502 LAT PC KEYBOARD (ON SLIDING SHELF)	19. 00	8, 00	3, 00	
OFOI	20		OMEGA MEDICAL IMAGING, INC. LAT E-502 POWER CONDITIONER (UPS) (BENEATH COUNTER)	8. 50	8. 00	4. 25	3
OFOI	21		OMEGA MEDICAL IMAGING, INC. E-502 LAT ISOLATION TRANSFORMER	8. 50	12. 25	7. 25	3
OFOI	22	1200	CODONICS (OPTIONAL) NP-1660M MEDICAL PRINTER	17. 00	23, 50	12. 00	6
OFOI	23	300	OMEGA MEDICAL IMAGING, INC. OPTIONAL SURGICAL SPOT LIGHT (CEILING SUSPENDED)	R86″ MAX.	SWING	68. 00	25
OFOI	24	N/A	OMEGA MEDICAL IMAGING, INC. OPTIONAL RADIATION SHIELD (CEILING SUSPENDED)	R86″ MAX.	SWING	68. 00	25
			NULL EXPLANATION:	· · · · · ·			

THESE DRAWINGS ARE CONTROLLED.

THEY ARE RESTRICTED TO THE SOLE USE OF DMEGA MEDICAL IMAGING, INC.

THESE DRAWINGS ARE FOR CONCEPTUAL INTERPRETATION ONLY AND ARE NOT INTENDED FOR CONSTRUCTION.

CFCI = CONTRACTOR FURNISHED - CONTRACTOR INSTALLED

OFCI = OWNER FURNISHED - CONTRACTOR INSTALLED

OFOI = OWNER FURNISHED - OWNER INSTALLED

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> RECOMMENDED ROOM SIZES: 18'-0" × 18'-0" 20'-0" × 20'-0" 22'-0" × 22'-0" NOMINAL IDEAL

HEATING, VENTILATING AND AIR CONDITIONING REQUIREMENTS OPERATING TEMPERATURE RANGE: 68° F (20° C) - 75° F (24° C).
INTAKE AIR TO ALL EQUIPMENT SHALL BE MAINTAINED WITHIN THIS RANGE. RELATIVE HUMIDITY RANGE: 30% - 70% NON CONDENSING. REFER TO EQUIPMENT SCHEDULE FOR INDIVIDUAL EQUIPMENT BTU/HR RATING.

# TERMINAL SCHEDULE

( CONTRACTOR FURNISHED - CONTRACTOR INSTALLED )

DESCRIPTION FACILITY TO DETERMINE 75KVA, 480VAC, 3-PHASE, POWER SOURCE LOCATION FOR X-RAY GENERATOR. NEMA 1, 480VAC, THREE PHASE, 5-WIRE, FRONT OPERATED, CIRCUIT BREAKER ENCLOSURE WITH GROUND ACCESSORIES. ENCLOSURE SHALL CONTAIN ONE 70AMP, 3-POLE, THERMAL MAGNETIC CIRCUIT BREAKER WITH SHUNT TRIP DEVICE. FLUSH MOUNT IN WALL WHERE SHOWN, LOCATE ENCLOSURE CENTER LINE 5'-6" A.F.F. NOTE: EC SHALL ENSURE THAT LUGS ARE LARGE ENOUGH TO FACILITATE OVERSIZED INCOMING CABLES REQUIRED BY X-RAY EQUIPMENT. REFER TO "INCOMING WIRE SIZE" NOTES. NEMA 1, 480VAC, THREE PHASE, 5-WIRE, FRONT OPERATED, CIRCUIT BREAKER ENCLOSURE WITH GROUND ACCESSORIES. ENCLOSURE SHALL CONTAIN ONE 70AMP, 3-POLE, THERMAL MAGNETIC CIRCUIT BREAKER WITH SHUNT TRIP DEVICE. FLUSH MOUNT IN WALL WHERE SHOWN, LOCATE ENCLOSURE CENTER LINE 5'-6" A.F.F. NOTE: EC SHALL ENSURE THAT LUGS ARE LARGE ENDUGH TO FACILITATE OVERSIZED INCOMING CABLES REQUIRED BY X-RAY EQUIPMENT. REFER TO "INCOMING WIRE SIZE" NOTES. NEMA 1, 240/120VAC, SINGLE PHASE, 4-WIRE, COMMERCIAL GRADE, GENERAL PURPOSE, LOADCENTER.
LOADCENTER SHALL CONTAIN FRONT OPERATED, THERMAL MAGNETIC, CIRCUIT BREAKERS WITH THE FOLLOWING RATINGS: DNE 100AMP, 2-POLE, MAIN;

DNE 30AMP, 2-POLE, CIRCUIT BREAKER FOR THE ELECTRONICS RACK CABINET; IDENTIFY CB AS "I-100" POWER. ONE 15AMP, 2-POLE, CB FOR THE AP X-RAY CONTROL; IDENTIFY CB AS "AP CONTROL VOLTAGE" POWER. ONE 15AMP, 2-POLE, CB FOR THE LAT X-RAY CONTROL; IDENTIFY CB AS "LAT CONTROL VOLTAGE" POWER.

ONE 20AMP, 1-POLE, CB FOR THE MONITOR CARRIER; IDENTIFY CB AS "MONITOR STRIP" POWER. ONE 20AMP, 1-POLE, CB FOR THE AP DIGITAL SYSTEM; IDENTIFY CB AS "AP DIGITAL RECEPTACLE" POWER. ONE 20AMP, 1-POLE, CB FOR THE AP DIGITAL SYSTEM; IDENTIFY CB AS "LAT DIGITAL RECEPTACLE" POWER. ONE 15AMP, 1-POLE, CB FOR THE PRINTER; IDENTIFY CB AS "PRINTER RECEPTACLE" POWER. ONE 15AMP, 1-POLE, CB FOR THE SPOT LIGHT; IDENTIFY CB AS "SPOT LIGHT" POWER. THREE 15AMP, 1-POLE SPARES.

FLUSH MOUNT IN WALL WHERE SHOWN, LOCATE ENCLOSURE CENTER LINE 5'-6" A.F.F.

### INCOMING WIRE SIZE NOTES ( CONTRACTOR FURNISHED - CONTRACTOR INSTALLED )

LISTED BELOW IS THE RELATIONSHIP BETWEEN THE LENGTH AND SIZE OF EACH INCOMING WIRE, WITH THE ASSUMPTION THAT THE POWER SOURCE HAS THE REQUIRED CAPACITY, THE VOLTAGE REGULATION UNDER LOAD VARIATION IS CALCULATED TO BE WITHIN ±5%. BE SURE TO USE WIRE SIZES INDICATED OR GREATER.

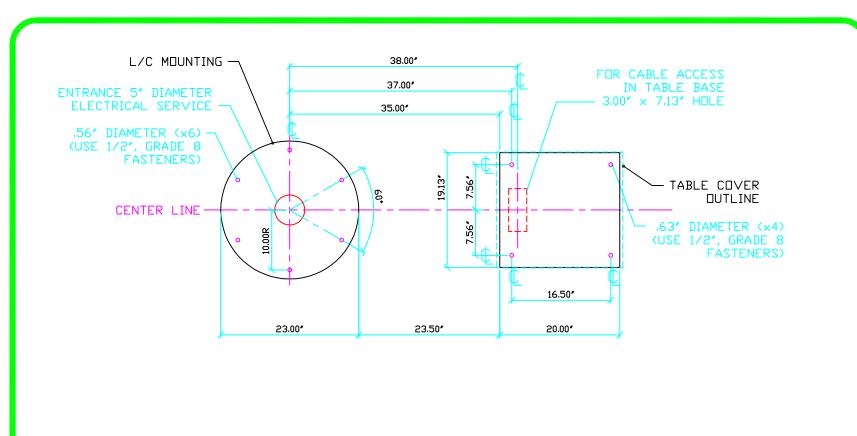
RECOMMENDED POWER TO THE MAIN DISCONNECT: 480VAC, THREE PHASE, 75KVA MAIN CIRCUIT BREAKER: 70AMP, 3-POLE

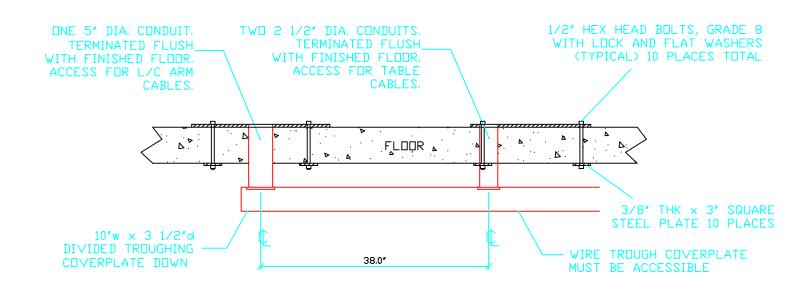
X-RAY GENERATOR: OMEGA A-340(0-PIC 60F), A-350(0-PIC 60RF), A-370(0-PIC 100C/V)

PROVIDE THE APPROPRIATE WIRE SIZE FROM POWER SOURCE TO MAIN DISCONNECT: WIRE LENGTH 300' FEEDER SIZE

LINE: #1AWG **NEUTRAL:** #6AWG #4AWG #2AWG #1AWG GROUND: #8AWG #8AWG #8AWG #6AWG

PATIENT SAFETY GROUNDING CONSIDERATIONS: A SPECIAL GROUNDING SYSTEM IS REQUIRED IN ALL DIAGNOSTIC ROOMS BY SOME STATE AND LOCAL CODES. THIS GROUNDING SYSTEM IS STRONGLY RECOMMENDED IN AREAS WHERE ELECTRICALLY SUSCEPTIBLE PATIENTS MIGHT BE EXAMINED OR TREATED UNDER PRESENT, FUTURE OR EMERGENCY CONDITIONS, CONSULT WITH THE GOVERNING ELECTRICAL CODES AND CONFER WITH APPROPRIATE HOSPITAL ADMINISTRATIVE PERSONNEL AND CONSULTING ENGINEERS TO DETERMINE THE AREAS REQUIRING THIS GROUNDING SYSTEM, IF SUCH A GROUNDING SYSTEM IS REQUIRED, THE RESPONSIBLE CONSTRUCTION PARTICIPANTS SHALL DESIGN AND INSTALL GROUNDING SYSTEM TO INCLUDE ALL METAL OBJECTS AND FIXTURES.





GENERAL CONTRACTOR SHALL DRILL ANCHOR HOLES FOR MOUNTING OF B-200 L/C C-ARM AND C-400 TABLE.

B-200 L/C POSITIONER AND C-400 TABLE BASE BENEATH FLOOR MOUNTING DETAIL

# $\vdash$



FILE NAME: DMEGACS40

DRAWING SET NO. NOTED  $\square$ SCALE:

ISSUED OR REVISED DATE CDNCEPTUAL 08-14-2000

REVISED 10-20-2000

REVISED 12-20-2001 -----

DRAWN BY: <u>S.M. PULAR</u>

APPROVED BY: \_DM\_\_\_\_\_

SHEET TITLE: ROOM AND EQUIPMENT LAYOUT PLAN SHEET NO.:

CHMMA

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