


<i>PREINSTALLATION CHECKLIST</i>	<i>C1</i>
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THESE SHEETS ARE A DOCUMENT SET AND SHOULD NOT BE SEPARATED	

Preinstallation documents for GE Healthcare products can be found at: <http://www.gehealthcare.com/company/docs/siteplanning.html>

CUSTOMER	FACILITIES COORDINATOR	CONSTRUCTION COORDINATOR
<p>THESE DRAWING ARE PROVIDED TO ASSIST YOU IN PREPARING THE ROOM FOR INSTALLATION OF EQUIPMENT ACQUIRED FROM GE HEALTHCARE, AND ARE NOT TO BE USED AS CONSTRUCTION DOCUMENTS. GE HEALTHCARE RESERVES THE RIGHT TO MAKE CHANGES IN THE DRAWINGS OR SPECIFICATIONS SHOWN AT ANYTIME WITHOUT NOTICE OR OBLIGATION, AND HEREBY DISCLAIMS RESPONSIBILITY FOR ANY DAMAGES RESULTING THEREFROM.</p> <p>ALL REQUIREMENTS FOR THIS EQUIPMENT ARE NOT NOTED ON THIS SHEET. IT IS SUGGESTED THAT THESE DRAWINGS BE REVIEWED BY QUALIFIED PROFESSIONALS WHO CAN ASSIST WITH MAKING DECISIONS REGARDING RADIATION CONTAINMENT, MAGNETIC FIELD CONTAINMENT, ELECTRICAL, STRUCTURAL AND MECHANICAL REQUIREMENTS. ALTHOUGH THE EQUIPMENT MAY BE INSTALLED IN AN EXISTING ROOM OF SIMILAR FUNCTION, REQUIREMENTS STILL NEED TO BE CHECKED.</p> <p>– SITE PROGRESS CHECKLIST –</p> <ul style="list-style-type: none"><li>REVIEW EQUIPMENT ORDER FOR EXACT ITEMS PURCHASED. OPTIONAL/FUTURE ITEMS NOT ON ORDER MAY BE INDICATED ON THESE PLANS.</li><li>ALL ROOM DIMENSIONS ARE CRITICAL! IMMEDIATELY CONTACT GE HEALTHCARE IF CHANGES OCCUR OR DIMENSIONS ARE NOT CORRECT.</li><li>CONTACT A RADIATION PHYSICIST OR CONSULTANT TO SPECIFY REQUIREMENTS FOR RADIATION CONTAINMENT.</li><li>PROVIDE A LOCKABLE EQUIPMENT HOLDING AREA CLOSE TO THE INSTALLATION FOR STORING TOOLS AND TEST EQUIPMENT.</li><li>MAKE SURE A DUST FREE, TEMPERATURE AND HUMIDITY CONTROLLED ENVIRONMENT IS AVAILABLE FOR STORING THE EQUIPMENT IF YOUR SITE IS NOT READY FOR INSTALLATION AT THE TIME OF DELIVERY. ONCE THE SITE IS PREPARED, YOU ARE THEN RESPONSIBLE FOR DELIVERING THE EQUIPMENT TO THE SITE.</li><li>MAKE ARRANGEMENTS FOR ANY RIGGING, SPECIAL HANDLING, OR FACILITY MODIFICATIONS THAT MUST BE MADE IN ORDER FOR THE EQUIPMENT TO BE DELIVERED TO THE INSTALLATION SITE. IF DESIRED, YOUR LOCAL GEHC TEAM REPRESENTATIVE CAN SUPPLY A REFERENCE LIST OF RIGGERS.</li></ul>	<p>FACILITY PLANNING IS TO BE COMPLETED WELL IN ADVANCE OF EQUIPMENT DELIVERY. THESE DRAWINGS NEED TO BE REVIEWED FOR ELECTRICAL, STRUCTURAL AND MECHANICAL REQUIREMENTS AS WELL AS CONTAINMENT NEEDS (E.G. RADIATION, MAGNETIC FIELDS, RADIO FREQUENCY) TO DETERMINE ANY ADDITIONAL CONSTRUCTION REQUIREMENTS OR MODIFICATION TO THE FACILITY.</p> <p>– SITE PROGRESS CHECKLIST –</p> <ul style="list-style-type: none"><li>MAKE SURE THE ROOM MEETS POWER AND GROUNDING REQUIREMENTS INDICATED IN THE EQUIPMENT SPECIFICATIONS AND SUGGESTED LAYOUT.</li><li>THE FOLLOWING MUST BE INSTALLED PRIOR TO EQUIPMENT INSTALLATION AS DEPICTED ON THE ELECTRICAL PLAN (SHEET E1).<ul style="list-style-type: none"><li>A DEDICATED DIRECT-DISTANCE-DIALING, VOICE GRADE TELEPHONE LINE.</li><li>EITHER A SEPARATE TELEPHONE DATA LINE OR NETWORK CONNECTION AS SHOWN ON SHEET E1.</li></ul></li><li>MAKE SURE ALL CONSTRUCTION WORK HAS BEEN COMPLETED BEFORE THE EQUIPMENT DELIVERY AND INSTALLATION BEGINS.</li><li>MAKE SURE THE ROOM’S ENVIRONMENT IS CLEAN AND FREE OF DUST.</li><li>IF REQUIRED, HAVE STAMPED ARCHITECTURAL PLANS ON SITE.</li><li>PROVIDE AN ACCEPTABLE UNLOADING AREA WITH CLEAR ACCESS TO THE EQUIPMENT HOLDING AREA. COORDINATE DELIVERY ROUTE WITH YOUR LOCAL GE REPRESENTATIVE.</li><li>ON NEW CONSTRUCTION, MAKE SURE THERE ARE CLEAN REST ROOMS, POWER FOR DRILLS AND OTHER TEST EQUIPMENT, AND THE CAPABILITY FOR FILM DEVELOPMENT.</li><li>PROVIDE FOR REFUSE REMOVAL AND DISPOSAL. (E.G. CRATES, CARTONS, PACKING)</li><li>PROVIDE INSTALLER WITH PARKING CLOSE TO THE INSTALLATION SITE.</li><li>MAKE SURE ALL NATIONAL, STATE AND LOCAL CODES ARE MET.</li><li>ALL REQUIRED PERMITS ARE OBTAINED.</li><li>WHERE REQUIRED, SEISMIC DOCUMENTATION MUST BE AVAILABLE TO THE INSTALLERS.</li></ul>	<p>POWER IS CRITICAL FOR EQUIPMENT OPERATION. IF POWER SPECIFICATIONS ARE NOT UPHELD, THE UNIT MAY NOT MEET MANUFACTURER’S SPECIFICATIONS. MEETING CRITICAL POWER REQUIREMENTS IS THE RESPONSIBILITY OF THE OWNER/CUSTOMER AND THEIR ELECTRICIAN.</p> <p>ANY DEVIATION FROM THESE DRAWINGS MUST BE COMMUNICATED IN WRITING TO, AND REVIEWED BY YOUR LOCAL GE HEALTHCARE SERVICE REPRESENTATIVE PRIOR TO MAKING CHANGES.</p> <p>– SITE PROGRESS CHECKLIST –</p> <ul style="list-style-type: none"><li>MAKE SURE THE SUPPORT STRUCTURES FOR WALL, CEILING, AND FLOOR MOUNTED EQUIPMENT HAVE BEEN INSTALLED ACCORDING TO THE LAYOUT. REQUIRED NUTS, BOLTS, ANCHORS, AND OTHER HARDWARE SHOULD BE AVAILABLE ON SITE.</li><li>HAVE CEILINGS, WALLS AND FLOORS FINISHED AND PAINTED, EXCEPT AS REQUIRED BY THE LOCAL INSTALLATION TEAM. (YOUR LOCAL GE TEAM WILL PROVIDE YOU WITH THIS INFORMATION.)</li><li>MAKE SURE HEATING, VENTILATION, AIR CONDITIONING, PLUMBING AND LIGHTING ARE INSTALLED AND WORKING PROPERLY.</li><li>HAVE BASEPLATES INSTALLED ACCORDING TO THE SUGGESTED LAYOUT. (GE WILL ASSIST YOU WITH THIS.)</li><li>MAKE SURE THAT ALL WIRES, JUNCTION BOXES, ACCESS FLOORING, RACEWAYS AND CONDUIT HAVE BEEN INSTALLED WITH THE PROPER COVERS, SCREWS AND CHASE NIPPLES ACCORDING TO THE SUGGESTED LAYOUTS. THE FOLLOWING SPECIFICATIONS MUST BE MET:<ul style="list-style-type: none"><li>10 FOOT PIGTAILS AT ALL JUNCTION POINTS.</li><li>NO ALUMINUM OR SOLID WIRES.</li><li>ALL WIRING MUST BE THHN OR TFFN STRANDED COPPER THERMOPLASTIC 600 VOLT OR EQUIVALENT, UNLESS OTHERWISE STATED.</li><li>GROUNDING IS CRITICAL TO EQUIPMENT FUNCTION AND PATIENT SAFETY. SITE MUST CONFORM TO WIRING SPECIFICATIONS SHOWN ON PLAN.</li></ul></li></ul>



GE Healthcare Tech

Installation Services Design Cent  
Minneapolis

SHEET TITLE: PREINSTALLATION CHECKLIST

MODALITY TYPE: HF 80/LEGACY

THIS PLAN IS SUBMITTED TO SUPPORT LOCATION OF GE HEALTHCARE EQUIPMENT AND ASSOCIATED APPARATUS. ELECTRICAL WIRING DETAILS AND ROOM ARRANGEMENTS IN PREPARING THIS PLAN, EVERY EFFORT HAS BEEN MADE TO CONFORM DETAILS TO THE LATEST AVAILABLE CODES AND STANDARDS. THE COMPANY CANNOT ACCEPT LIABILITY FOR ANY DAMAGES RESULTING THEREFROM.

PROJECT TITLE:

TYPICAL R&F  
2-50F

TYPICAL INSTALLATION DRAWINGS

PROJECT	REVISION
2-50	01
DATE: 04/26/05	
DRAWN BY: SDB	
CHECKED BY: SDB	

REVISION HISTORY:

SHEET

C1

cssh1002

## GE EQUIPMENT LISTING

EQUIPMENT ON ORDER FROM GE HEALTHCARE, INSTALLED BY GE HEALTHCARE, PER _____: NEITHER A QUOTE OR CON/FDO WAS ISSUED AT THE DATE OF THESE DRAWINGS	EQUIPMENT CROSS REFERENCE CHART
NOTE: LOCAL CONDITIONS MAY DICTATE THAT ITEMS IDENTIFIED IN THIS CATEGORY BE INSTALLED BY OTHERS.	<p>P = PREAPPROVAL</p> <p>C = CALCULATIONS /</p> <p>SEISMIC PERMITS /</p> <p>STATUS APPROVAL</p> <p>S = SPECIFICATIONS.</p>

EQUIPMENT CROSS REFERENCE CHART	
P	= PREAPPROVAL
C	= CALCULATIONS/ PENDING APPROVAL
S	= SPECIFICATIONS ONLY

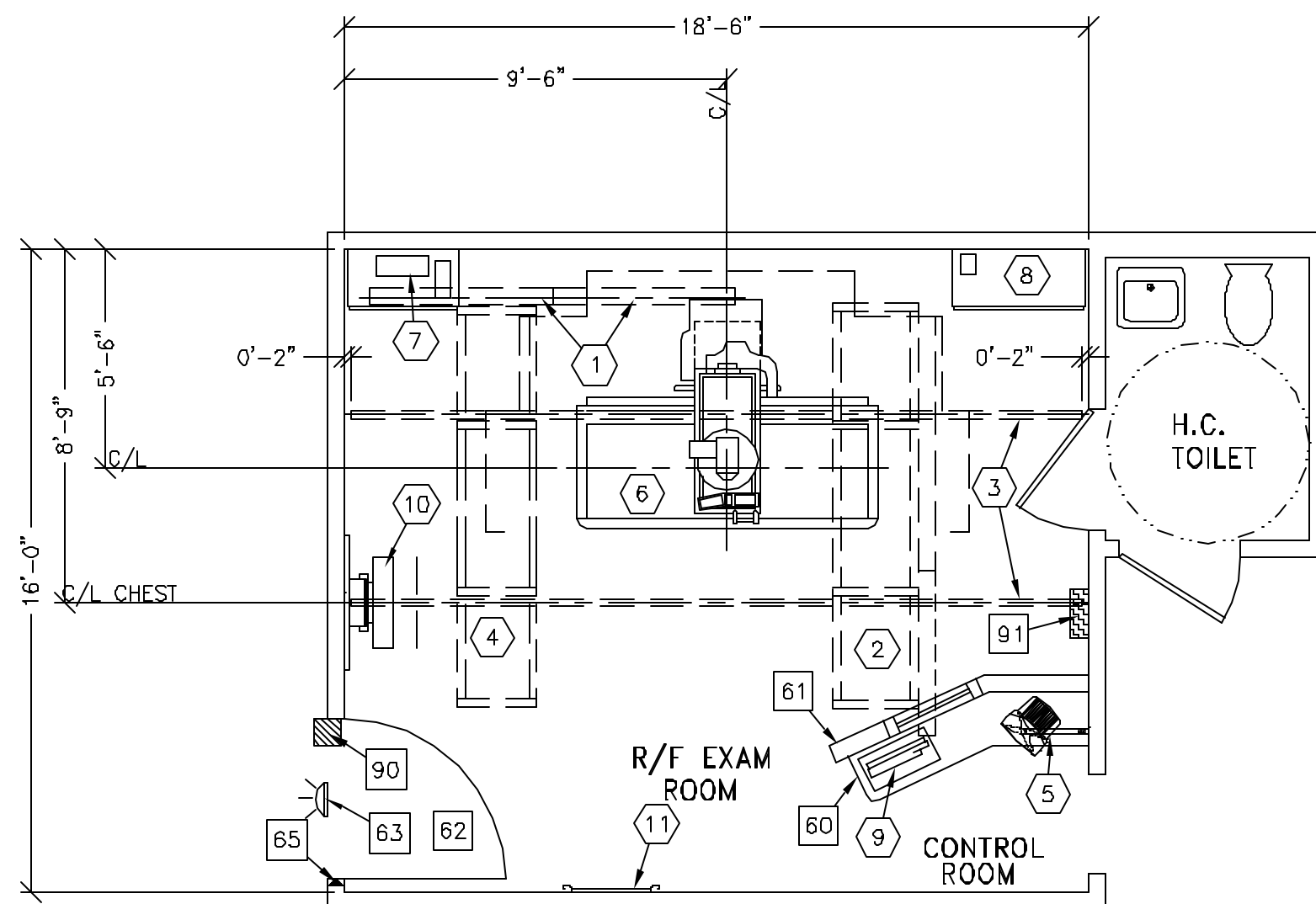
ITEM NO. ⬇	QUANTITY ORDERED	REFER TO SHEET "D"				UNIT		
		ITEM DESCRIPTION (* = EXISTING/REINSTALL)	WEIGHT	HEAT OUTPUT (PER HOUR)	DETAIL NO.	STR PLAN	ELEC PLAN	⬇
①	2	LONGITUDINAL CABLE SUPPORT	35 lbs			B20 078		C
②	1	XT RADIOGRAPHIC SUSPENSION WITH INBOARD MOUNTING (VHXA)	559 lbs		B2007	B20 041	XTS1	C
③	2	LONGITUDINAL STATIONARY RAIL FOR XT SUSPENSION	68 lbs			B20 041		C
④	1	XT SUSPENSION WITH TV MONITOR ON BOOM SUPPORT	275 lbs	215 btu			---	IRVP
⑤	1	15 in. MONITOR ON WALL SUPPORT	35 lbs		C7614	---		
⑥	1	LEGACY RKF TABLE WITH INTELLIGENT S443 FILM DEVELOPER	3443 lbs	204 btu	B0111 13B	B01 13B	RFP3	C
⑦	1	POSITIONER CABINET	695 lbs	3412 btu	A8008	S02	RFP1	C
⑧	1	ADVANTX HF 80 GENERATOR	910 lbs	1000 btu	A0720	S71	SKL	C
⑨	1	OPERATORS CONSOLE	15 lbs	194 btu	A80066	---	CBVP	C
⑩	1	SG-60 BUCKY STAND	264 lbs		R3503	S35	K	C
⑪	1	TABLE ACCESSORY RACK	90 lbs		B8130C	S38		C

THE FOLLOWING ITEMS, WHICH HAVE BEEN ORDERED FROM GE HEALTHCARE,  
ARE TO BE INSTALLED BY THE CUSTOMER OR HIS CONTRACTOR.

SCALE:  $1/4" = 1'-0"$

## EQUIPMENT LAYOUT

REQUIRED CEILING HEIGHT = 9'-6"



## ANCILLARY ITEMS

CUSTOMER/CONTRACTOR SUPPLIED AND INSTALLED  
ITEMS

ITEM NO.	ITEM DESCRIPTION (* INDICATES EXISTING)
[60]	COUNTER TOP FOR EQUIPMENT - PROVIDE GRODMETED OPENINGS AS REQUIRED TO ROUTE INTERCONNECT CABLES TO RACEWAY BELOW COUNTERTOP.
[61]	CONTROL WALL, 7 FT. HIGH WITH LEAD GLASS VIEWING WINDOW.
[62]	MINIMUM DOOR OPENING FOR EQUIPMENT DELIVERY IS 44 IN. W X 85 IN. H (118mm x 2108mm), CONTINGENT ON A 96 IN. (2438mm) CORRIDOR WIDTH
[63]	X-RAY ON WARNING LIGHT - AVAILABLE FROM GE SUPPLY CALL: 800-200-9760 EXTENSION 3985 GE CAT. NO. WX18AW-07-X1U
[64]	MAIN DISCONNECT, REFERENCE JUNCTION POINT 'A' ON SHEET E1 FOR DETAILED DESCRIPTION. (14.5 W X 24.4 H X 5.75 IN. D)
[65]	DOOR LIMIT SWITCH

THE FOLLOWING ITEMS ARE AVAILABLE FROM GE HEALTHCARE TECHNOLOGIES. CONTACT YOUR LOCAL GE HEALTHCARE SERVICE REPRESENTATIVE FOR PRICING AND AVAILABILITY.

90	X-RAY ROOM WARNING LIGHT/ROOM LIGHTING CONTROL PANEL REFERENCE JUNCTION POINT 'XRLC' ON SHEET 'E1' FOR DETAILED DESCRIPTION - CAT. NO. E4500AF FOR WARNING LIGHT & ROOM LIGHT CONTROL - E4500AM FOR WARNING LIGHT CONTROL ONLY.
91	MAIN DISCONNECT, REFERENCE JUNCTION POINT 'A' ON SHEET 'E1' FOR DETAILED DESCRIPTION. CAT. NO. E4502JB OR WITH AUTO RESTART E4502KJ. (14.5" W x 24" H x 5.75" IN. D)

## GENERAL SPECIFICATIONS

- o THE REQUIRED CEILING HEIGHT INDICATED ON THESE PLANS IS TO ENSURE EQUIPMENT FUNCTION IS NOT INHIBITED. CONSULT WITH YOUR LOCAL GEHC INSTALLATION SPECIALIST REGARDING ACCEPTABILITY OF OTHER CEILING HEIGHTS.
- o CHECK ALL DOOR OPENINGS AND HALLWAYS FROM DELIVERY LOCATION TO WHERE EQUIPMENT IS TO BE INSTALLED TO ENSURE THE ROUTE PHYSICALLY AND STRUCTURALLY WILL ACCOMMODATE THE EQUIPMENT AS SHIPPED.
- o RADIATION PROTECTION REQUIREMENTS ARE NOT INDICATED ON THIS PLAN. WHERE NEEDED PER NATIONAL OR LOCAL CODE THEY SHALL BE SPECIFIED BY A QUALIFIED RADIOLOGICAL PHYSICIST.
- o THE DEVELOPMENT OF THE EQUIPMENT LAYOUT, ROOM DIMENSIONS, MECHANICAL, AND ELECTRICAL IS SUGGESTED TO BE THE BEST INFORMATION OBTAINABLE FROM THE SITE, COUPLED WITH THE CUSTOMER'S KNOWN DESIRES. ARCHITECTURAL OR ELECTRICAL CHANGES INCLUDING RELOCATION OF EQUIPMENT ILLUSTRATED ON THIS DRAWING IS ALLOWED ONLY WITH NOTIFICATION, IN WRITING, AND REVIEW BY GEHC SERVICE DEPARTMENT. EQUIPMENT OPERATION, SERVICEABILITY, AND RESTRICTING CABLE LENGTH, ETC., MAKE THE ESSENCE FOR PROPER INSTALLATION. GEHC RESERVES THE RIGHT TO MAKE ON THE JOB CHANGES BECAUSE OF CUSTOMER REQUIREMENTS AND/OR OBSTACLES IN CONSTRUCTION, ETC..
- o ALL WORK TO BE IN COMPLIANCE WITH NATIONAL AND LOCAL BUILDING SAFETY CODES.
- o DIMENSIONS ARE TO FINISHED SURFACES OF ROOM

## SITE ENVIRONMENT SPECIFICATIONS

- o AMBIENT OPERATING TEMPERATURE: 59 TO 75 DEGREES (F), MAXIMUM ALLOWABLE TEMPERATURE CHANGE OF 15 DEGREES (F)/HOUR.
- o HUMIDITY: REFER TO PREINSTALLATION MANUAL FOR THE EQUIPMENT ILLUSTRATED ON THIS DRAWING.
- o ALTITUDE: NOT TO EXCEED 8,000 FT. ABOVE SEA LEVEL.
- o THE ENVIRONMENT FOR THE ELECTRONICS CABINET MUST BE CONTROLLED SO THAT ABOVE RESTRICTIONS ARE NOT EXCEEDED.
- o DO NOT RESTRICT THE AIR INTAKE AT THE LOWER FRONT OR AIR EXHAUST AT THE TOP OF THE ELECTRONICS CABINETS.

## MAGNETIC INTERFERENCE SPECIFICATIONS

IMAGE INTENSIFIERS MUST BE LOCATED IN AMBIENT STATIC MAGNETIC FIELDS OF LESS THAN 1 GAUSS TO GUARANTEE SPECIFIED IMAGING PERFORMANCE.

X-RAY TUBES MUST BE LOCATED IN AMBIENT STATIC MAGNETIC FIELDS OF LESS THAN 10 GAUSS TO GUARANTEE SPECIFIED PERFORMANCE.

SYSTEM ELECTRONICS MUST BE LOCATED IN AMBIENT STATIC MAGNETIC  
FIELDS OF LESS THAN 10 GAUSS TO GUARANTEE DATA INTEGRITY.

OPERATORS CONSOLE EQUIPMENT MUST BE LOCATED IN AMBIENT STATIC MAGNETIC  
FIELDS OF LESS THAN 10 GAUSS TO OBTAIN SPECIFIED GEOMETRIC LINEARITY.

THIS SHEET IS PART OF THE DOCUMENT SET LISTED ON SHEET C1 AND SHOULD NOT BE SEPARATED

SHEET TITLE: EQUIPMENT LAYOUT

MODALITY TYPE: HF 80/LEGACY

THIS PLAN IS SUBMITTED TO SUGGEST LOCATION OF GE HEALTHCARE EQUIPMENT AND ASSOCIATED APPARATUS, ELECTRICAL WIRING DETAILS AND ROOM ARRANGEMENTS. IN PREPARING THIS PLAN, EVERY EFFORT HAS BEEN MADE TO CONFORM DETAILS TO ACTUAL EQUIPMENT EXPECTED TO BE INSTALLED. IT IS NOT TO BE USED FOR ACTUAL CONSTRUCTION PURPOSES, HOWEVER, AND THE COMPANY CANNOT ACCEPT RESPONSIBILITY FOR ANY DAMAGES RESULTING THEREFROM.

TYPICAL R&F  
2-50F

TYPICAL INSTALLATION DRAWINGS

PROJECT TITLE:

PROJECT	REVISION
2-50	01

DATE:	04/26/05
DRAWN BY:	SDB
CHECKED BY:	SDB
_____	

## REVISION HISTORY

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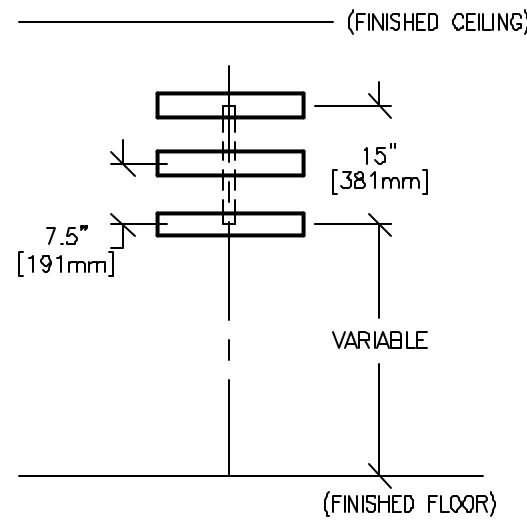
SHEE

A1

NFSH-100%

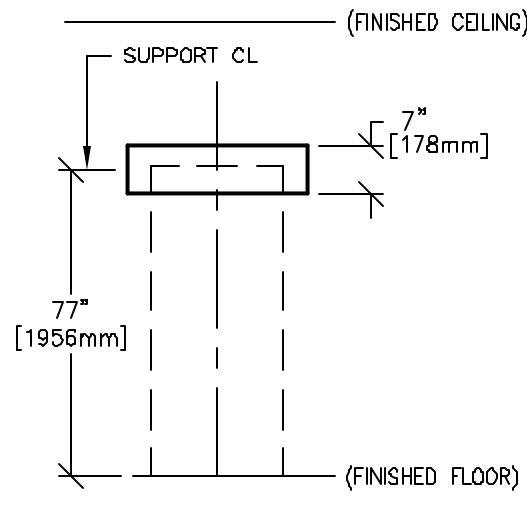
TYPICAL WALL SUPPORT ELEVATIONS

S77



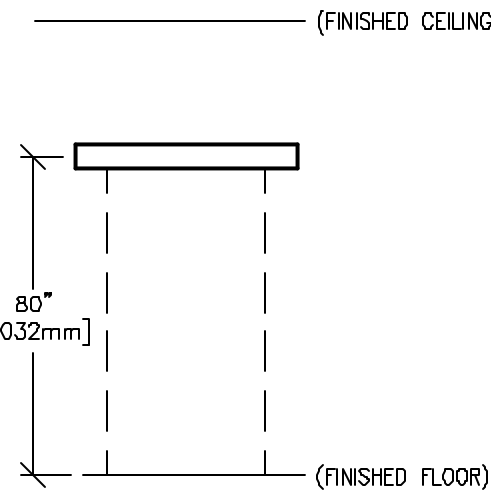
SUPPORT FOR ANGULATION MONITOR  
(NOT TO SCALE)

S02



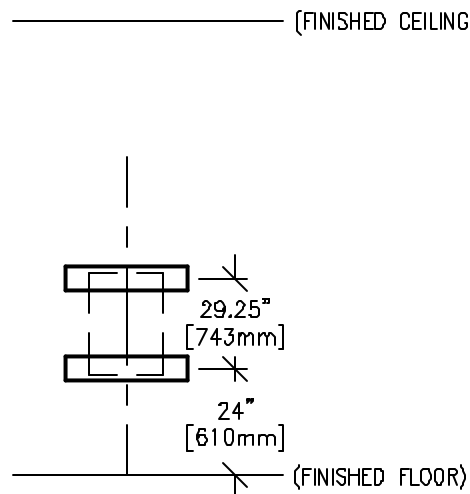
SUPPORT FOR ADVANTX  
ELECTRONICS CABINETS  
(NOT TO SCALE)

S71



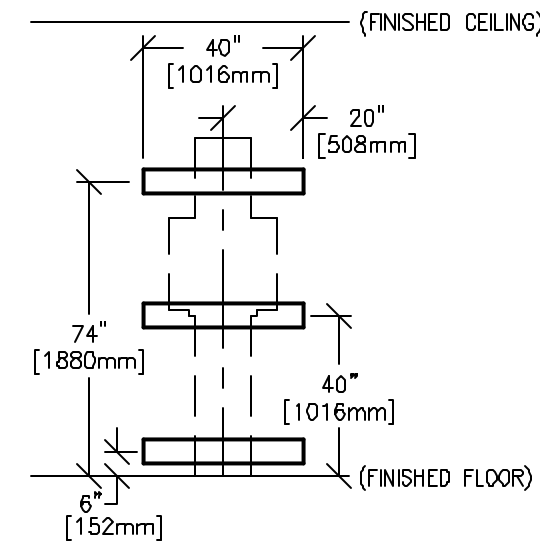
SUPPORT FOR  
GENERATOR CABINET  
(NOT TO SCALE)

S38



SUPPORT FOR TABLE  
ACCESSORY RACK  
(NOT TO SCALE)

S35

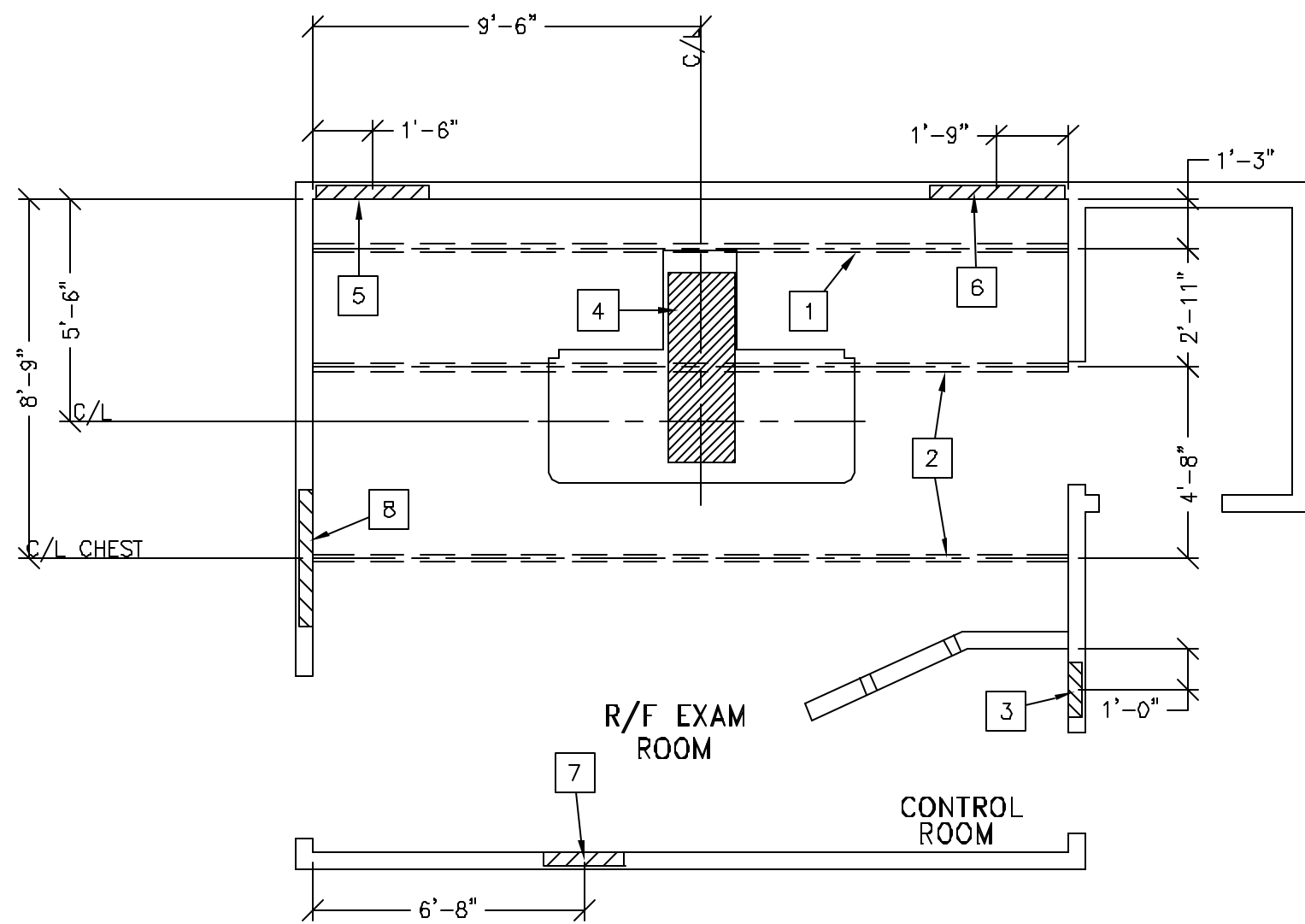


SUPPORT FOR SC-60  
BUCKY STAND  
(NOT TO SCALE)

SCALE: 1/4" = 1'-0"

STRUCTURAL LAYOUT

REQUIRED CEILING HEIGHT = 9'-6"



STRUCTURAL SUPPORT METHODS

CUSTOMER/CONTRACTOR SUPPLIED AND INSTALLED ITEMS

ITEM NO.	ITEM DESCRIPTION (* INDICATES EXISTING)
1	UNISTRUT OR EQUIVALENT SUPPORT IN CEILING FOR FASTENING AUXILIARY RAILS. SUPPORTS TO RUN CONTINUOUS WITH NO FITTINGS EXTENDING BELOW FACE OF UNISTRUT CHANNEL. RUN WALL TO WALL, BE PARALLEL, SQUARE, AND IN THE SAME HORIZONTAL PLANE FLUSH WITH THE FINISHED CEILING. RAILS ARE MOUNTED TO THESE SUPPORTS EVERY 2'-0" AND REQUIRE 50 LBS. PER BOLT LOAD. METHODS OF SUPPORT THAT PERMIT ATTACHMENT TO STRUCTURAL STEEL OR THROUGH BOLTS IN CONCRETE SHOULD BE FAVORED. DO NOT USE SCREW ANCHORS IN DIRECT TENSION.
2	UNISTRUT OR EQUIVALENT SUPPORT IN CEILING FOR FASTENING STATIONARY RAILS. SUPPORTS TO RUN CONTINUOUS WITH NO FITTINGS EXTENDING BELOW FACE OF UNISTRUT CHANNEL. RUN WALL TO WALL, BE PARALLEL, SQUARE, AND IN THE SAME HORIZONTAL PLANE FLUSH WITH THE FINISHED CEILING. RAILS ARE MOUNTED TO THESE SUPPORTS EVERY 2'-0" AND REQUIRE 350 LBS. (597 LBS. IN SEISMIC REGIONS) PER BOLT LOAD. METHODS OF SUPPORT THAT PERMIT ATTACHMENT TO STRUCTURAL STEEL OR THROUGH BOLTS IN CONCRETE SHOULD BE FAVORED. DO NOT USE SCREW ANCHORS IN DIRECT TENSION.
3	SUPPORT BACKING, LOCATE AS SHOWN, REFER TO ELEVATION DETAIL S77, FOR TV MONITOR ON WALL SUPPORT.
4	FLOOR CONTACT AREA FOR LEGACY TABLE
5	SUPPORT BACKING, LOCATE AS SHOWN, REFER TO ELEVATION DETAIL S02, FOR ELECTRONICS CABINETS.
6	SUPPORT BACKING, LOCATE AS SHOWN, REFER TO ELEVATION DETAIL S71, FOR GENERATOR CABINET
7	SUPPORT BACKING, LOCATE AS SHOWN, REFER TO ELEVATION DETAIL S38, FOR TABLE ACCESSORY RACK
8	SUPPORT BACKING, LOCATE AS SHOWN, REFER TO ELEVATION DETAIL S35, FOR CHEST UNIT

STRUCTURAL NOTES

- ALL STEEL WORK AND PARTS NECESSARY TO SUPPORT CEILING MOUNTED TUBE HANGER OR OTHER EQUIPMENT ARE TO BE SUPPLIED BY THE CUSTOMER OR HIS CONTRACTORS. THE UNISTRUT OR EQUIVALENT STRUCTURE SHOULD RUN CONTINUOUS WITH NO FITTINGS EXTENDING BELOW FACE OF UNISTRUT CHANNEL, RUN WALL TO WALL, BE PARALLEL, SQUARE AND IN THE SAME HORIZONTAL PLANE FLUSH WITH FINISHED CEILING. THE SYSTEM IS TO BE CROSS BRACED VERTICALLY, HORIZONTALLY AND DIAGONALLY TO ALLOW NO MOVEMENT AND A MAXIMUM OF 1,58mm(1/16") DEFLECTION. (10) 12,7mm (1/2") DIA. x 38,1mm (1 1/2") LONG BOLTS WITH UNISTRUT 12,7mm (1/2") NUTS WITH SPRINGS ARE TO BE PROVIDED BY CUSTOMER OR HIS CONTRACTORS FOR EACH STATIONARY AND AUXILIARY SUPPORT RAIL. CLOSURE STRIPS SHALL BE PROVIDED FOR AREAS OF UNISTRUT EXPOSED AND WITHOUT MOUNTING UNITS.
- METHODS OF SUPPORT FOR THE STEELWORK THAT WILL PERMIT ATTACHMENT TO STRUCTURAL STEEL OR THROUGH BOLTS IN CONCRETE CONSTRUCTION SHOULD BE FAVORED. DO NOT USE CONCRETE OR MASONRY ANCHORS IN DIRECT TENSION.
- ALL UNITS THAT ARE WALL MOUNTED OR WALL SUPPORTED ARE TO BE PROVIDED WITH SUPPORTS WHERE NECESSARY. WALL SUPPORTS ARE TO BE SUPPLIED AND INSTALLED BY THE CUSTOMER OR HIS CONTRACTORS. SEE PLAN AND DETAIL SHEETS FOR SUGGESTED LOCATIONS AND MOUNTING HOLE LOCATIONS.
- ALL CEILING MOUNTED FIXTURES, AIR VENTS, SPRINKLERS, ETC. TO BE FLUSH MOUNTED, OR SHALL NOT EXTEND MORE THAN 6,35mm (1/4") BELOW THE FINISHED CEILING.
- CONTROL WALLS WITH TUBE HANGER PASSAGE ABOVE SHALL BE CONSTRUCTED TO 2130mm (7'-0") HIGH.
- FLOOR SLABS ON WHICH EQUIPMENT IS TO BE INSTALLED MUST BE LEVEL TO 3,17mm (1/8") in 3050mm (10'-0")
- DIMENSIONS ARE TO FINISHED SURFACES OF ROOM.

SHEET TITLE: STRUCTURAL LAYOUT

MODALITY TYPE: HF 80/LEGACY

THIS PLAN IS SUBMITTED TO SUGGEST LOCATION OF GE HEALTHCARE EQUIPMENT AND ASSOCIATED APPARATUS, ELECTRICAL WIRING DETAILS AND ROOM ARRANGEMENTS. IT IS NOT TO BE USED FOR CONSTRUCTION PURPOSES. IT IS NOT TO BE USED FOR ACTUAL CONSTRUCTION PURPOSES. HOWEVER, AND THE COMPANY CANNOT ACCEPT RESPONSIBILITY FOR ANY DAMAGES RESULTING THEREFROM.

PROJECT TITLE:

TYPICAL R&F  
2-50F  
TYPICAL INSTALLATION DRAWINGS

PROJECT	REVISION
2-50	01

DATE: 04/26/05  
DRAWN BY: SDB  
CHECKED BY: SDB

REVISION HISTORY:

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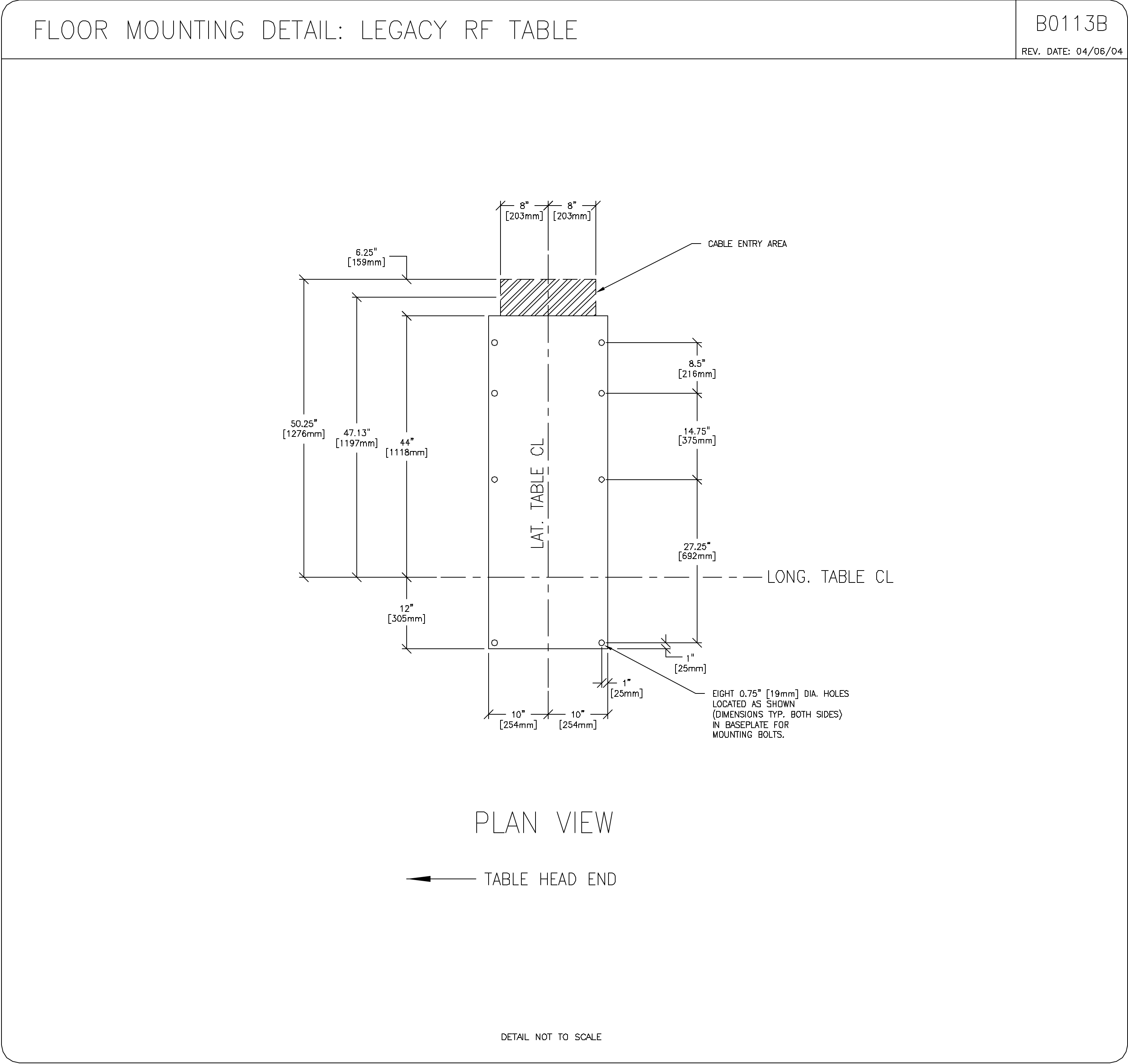
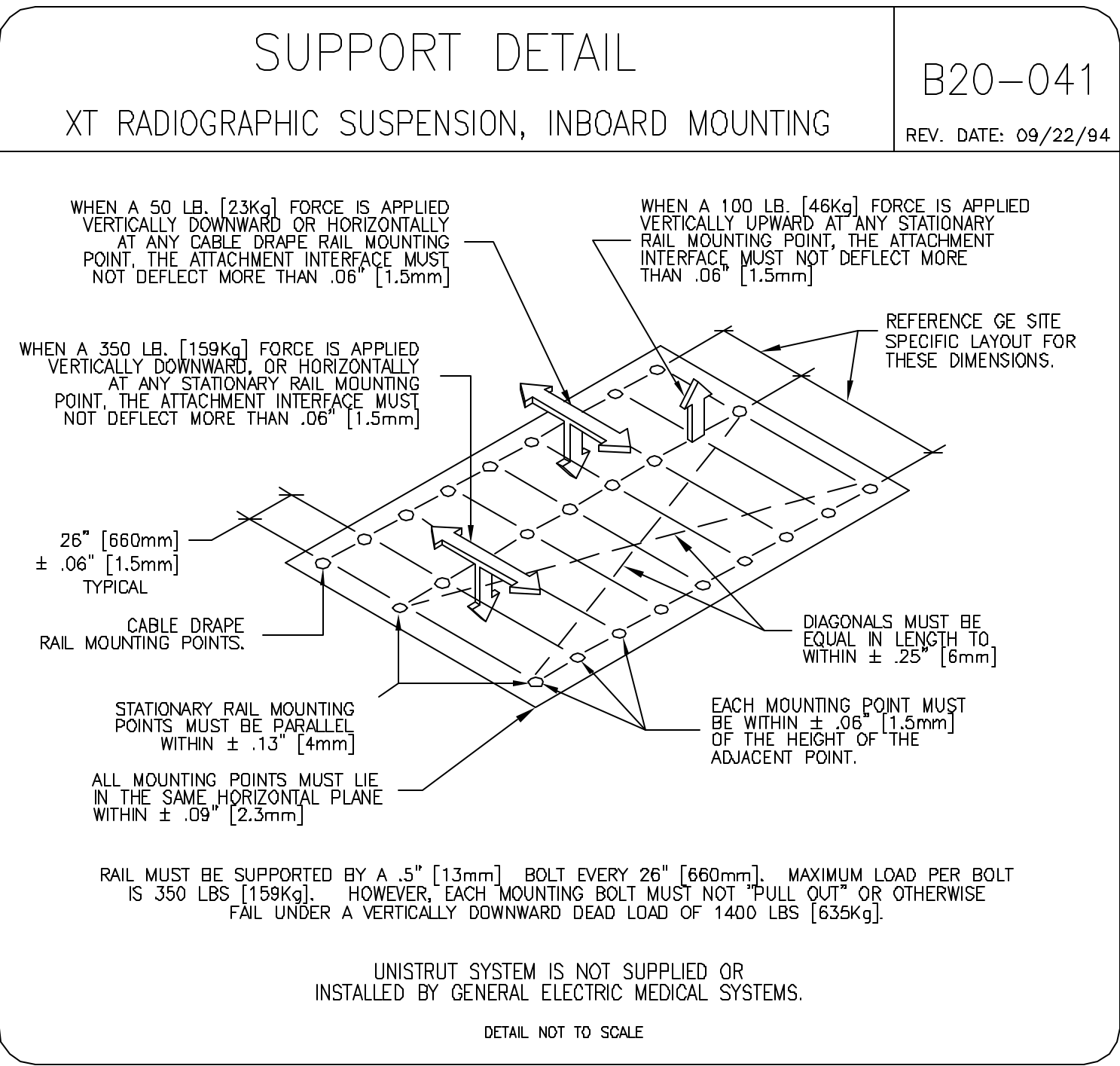
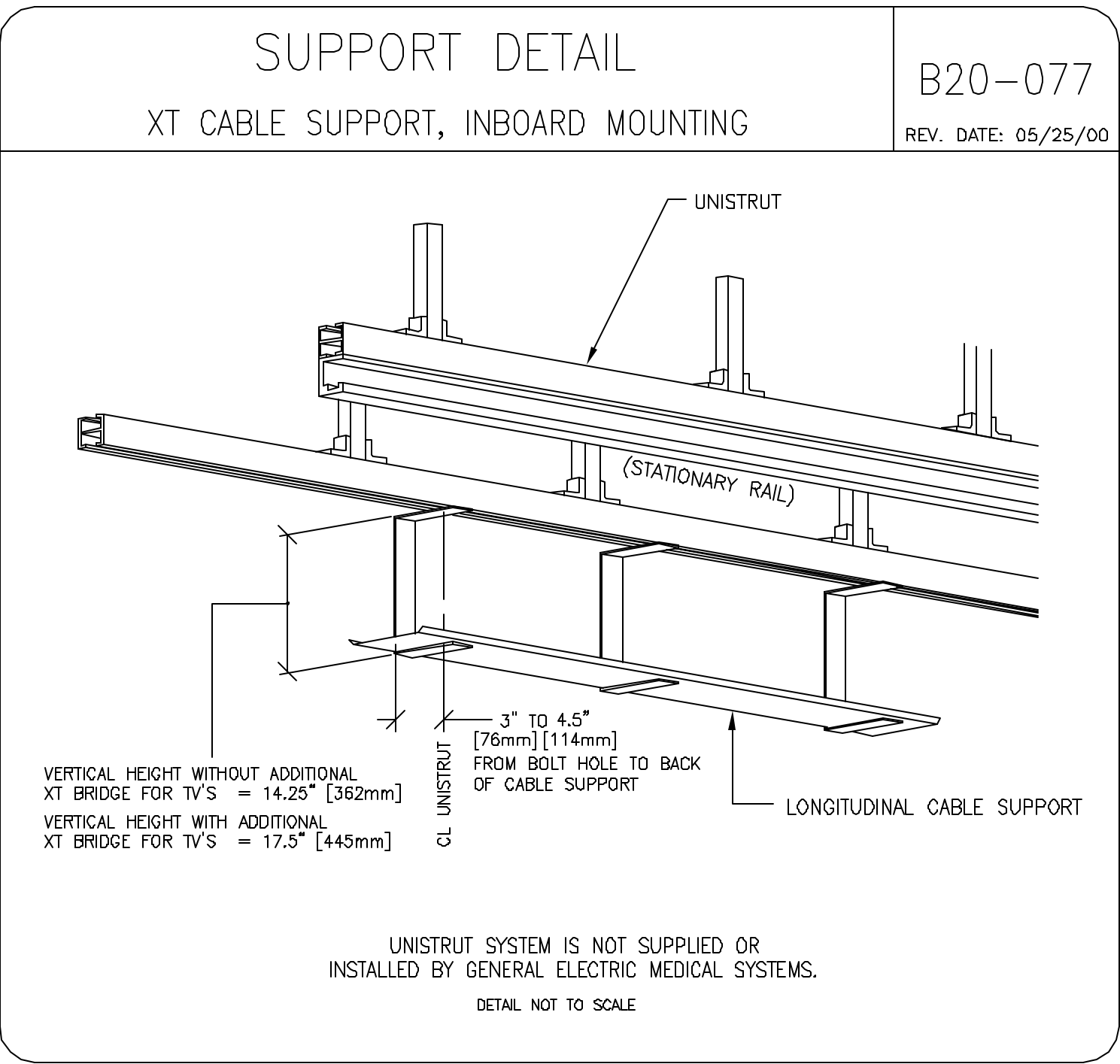
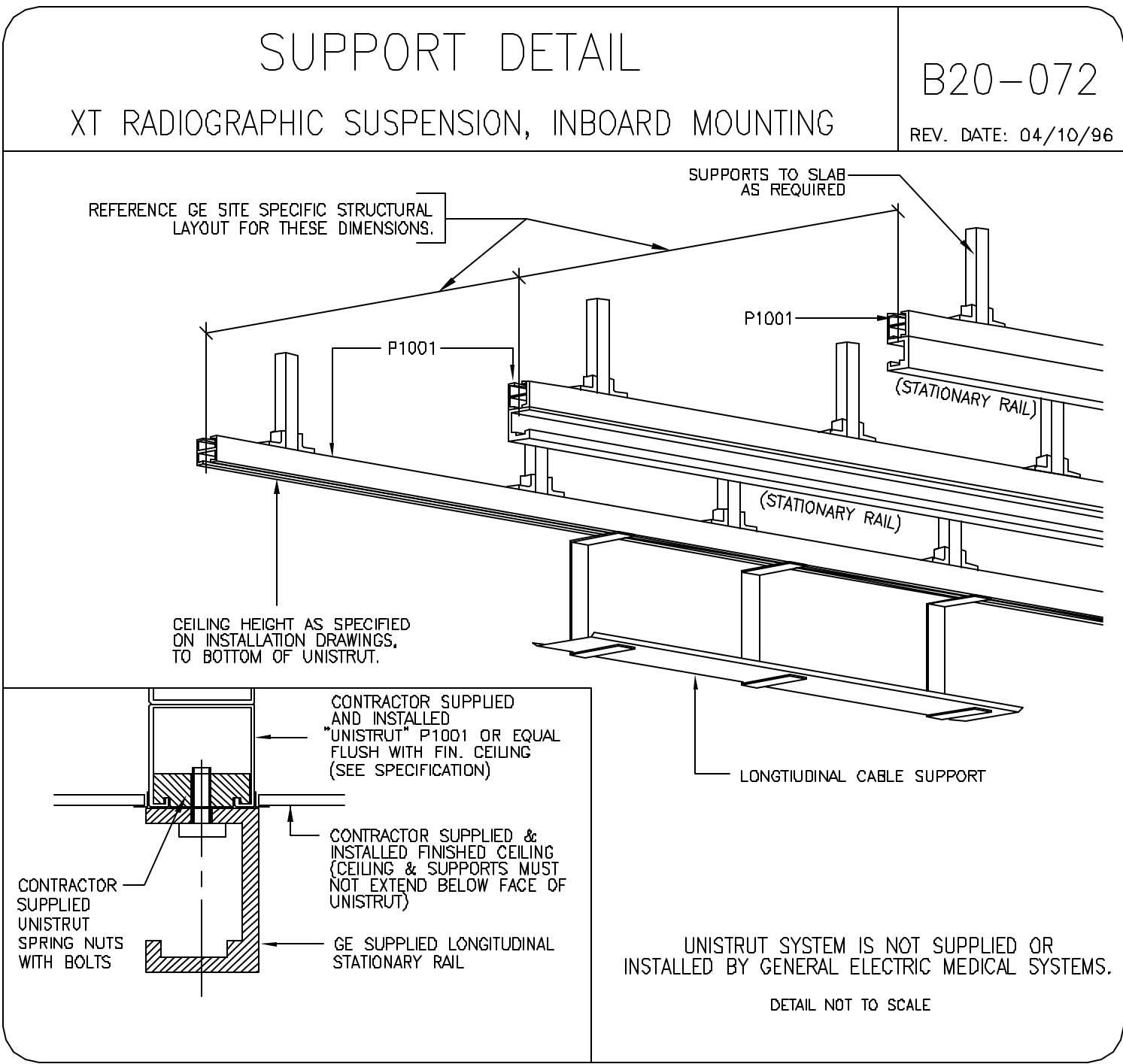
SHEET  
S1

THIS SHEET IS PART OF THE DOCUMENT SET LISTED ON SHEET C1 AND SHOULD NOT BE SEPARATED

NPSH-1002

GE Healthcare Technologies

Installation Services Design Center  
Milwaukee, Wisconsin



GE Healthcare Technologies

Installation Services Design Center

Wisconsin

Milwaukee

SHEET TITLE: STRUCTURAL DETAILS

MODALITY TYPE: HF 80/LEGACY

THIS PLAN IS SUBMITTED TO SUGGEST LOCATION OF GE HEALTHCARE EQUIPMENT AND ASSOCIATED APPARATUS, ELECTRICAL WIRING DETAILS AND ROOM ARRANGEMENTS. IT IS NOT TO BE USED FOR CONSTRUCTION PURPOSES. IT IS NOT TO BE USED FOR ACTUAL CONSTRUCTION PURPOSES. HOWEVER, AND THE COMPANY CANNOT ACCEPT RESPONSIBILITY FOR ANY DAMAGES RESULTING THEREFROM.

PROJECT TITLE:

TYPICAL R&F  
2-50F  
TYPICAL INSTALLATION DRAWINGS

PROJECT	REVISION
2-50	01
DATE:	04/26/05
DRAWN BY:	SDB
CHECKED BY:	SDB

REVISION HISTORY:

SHEET

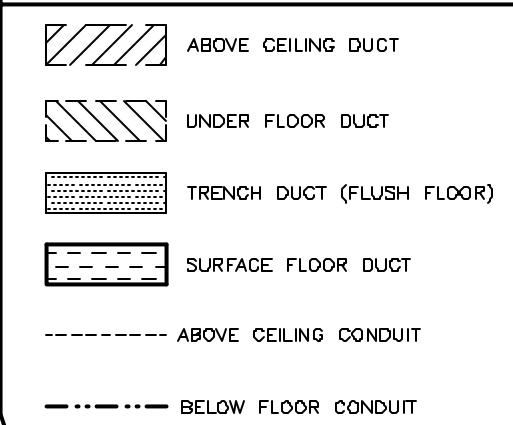
S2

SCALE: 1/4" = 1'-0"

ELECTRICAL PLAN

REQUIRED CEILING HEIGHT = 9'-6"

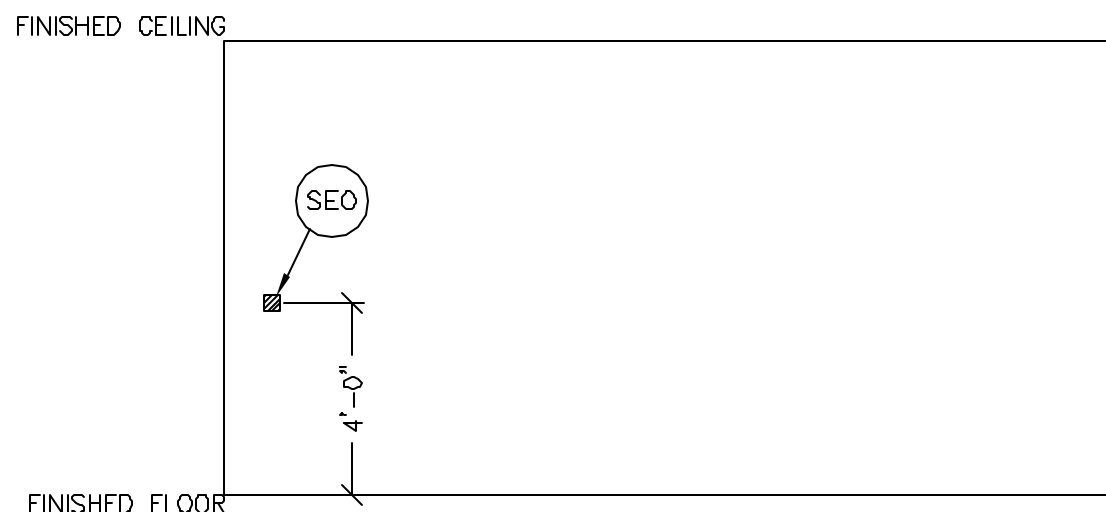
DUCT HATCHING LEGEND



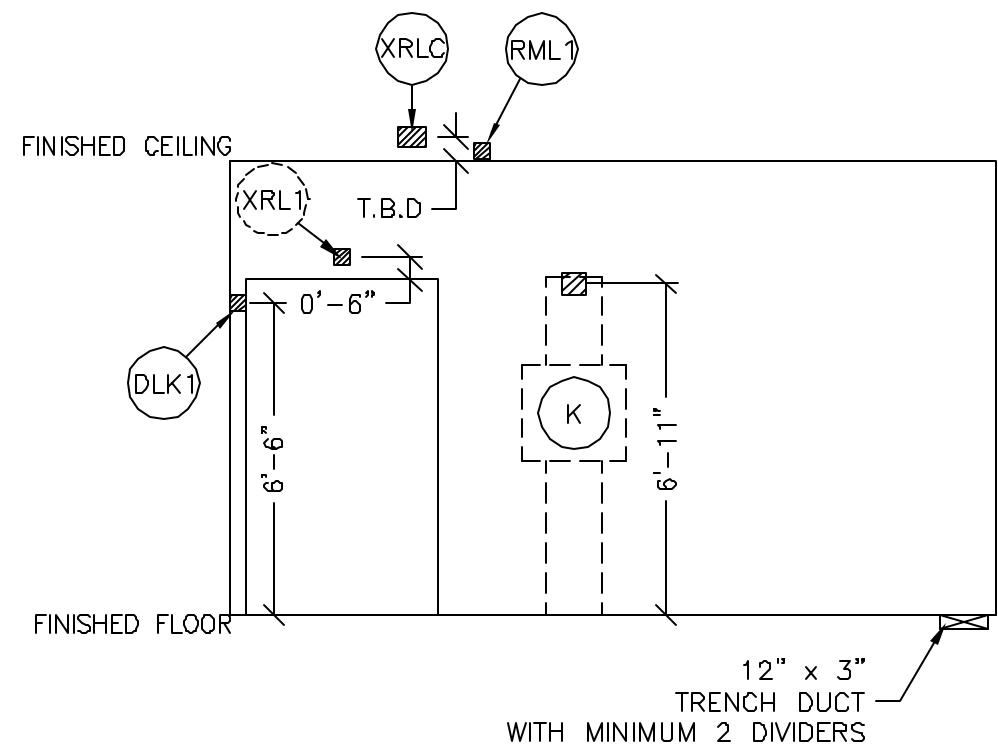
ELECTRICAL OUTLET LEGEND

CUSTOMER/CONTRACTOR SUPPLIED AND INSTALLED ITEMS.  
HEIGHT ABOVE FLOOR DETERMINED BY LOCAL CODES UNLESS OTHERWISE SPECIFIED.

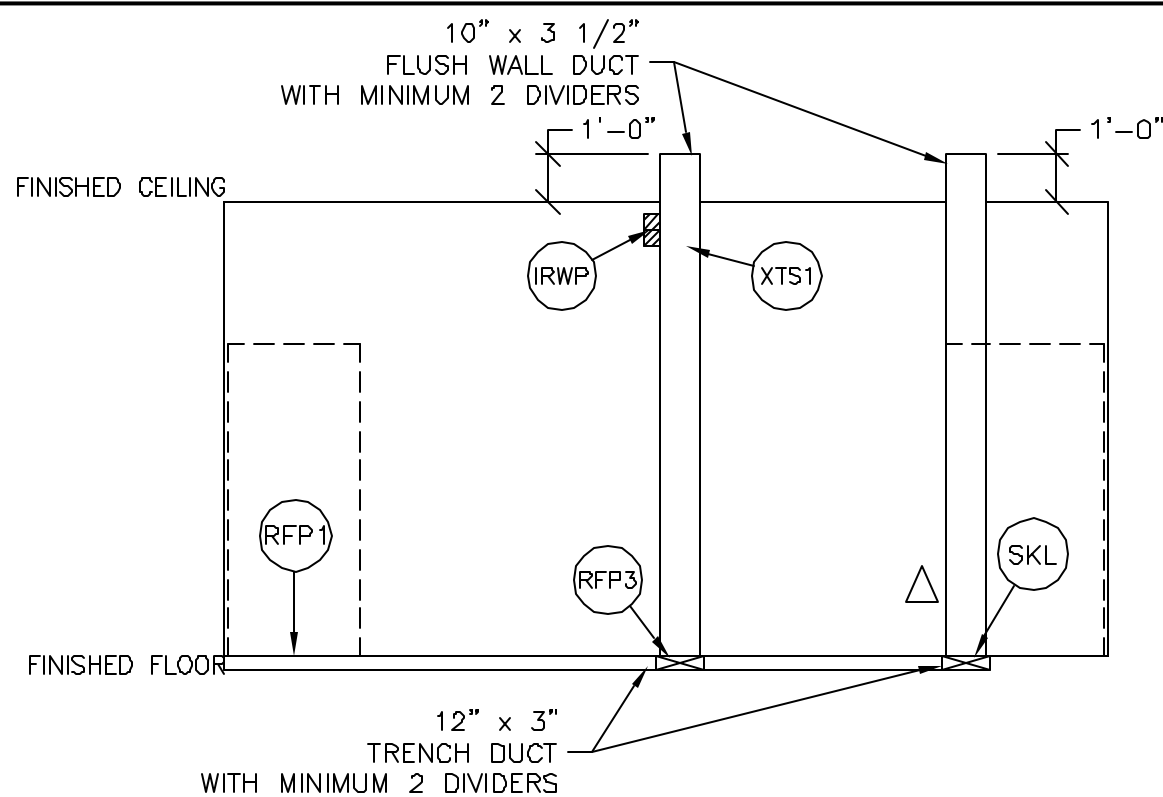
DEDICATED TELEPHONE LINE(S)  
(SEE ELECTRICAL DETAIL ELEC-1 OR ELEC-67)



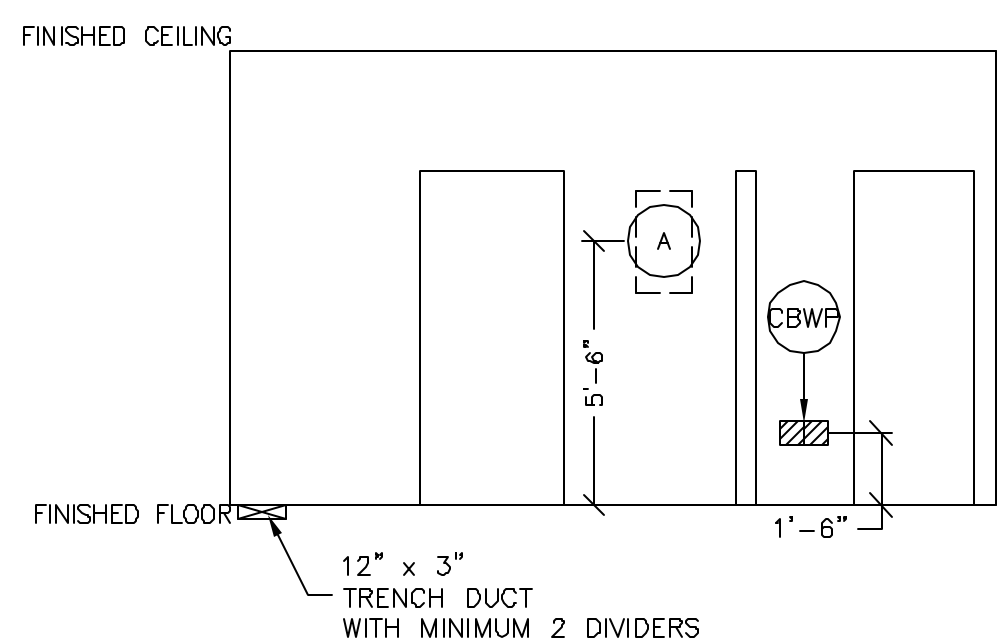
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B



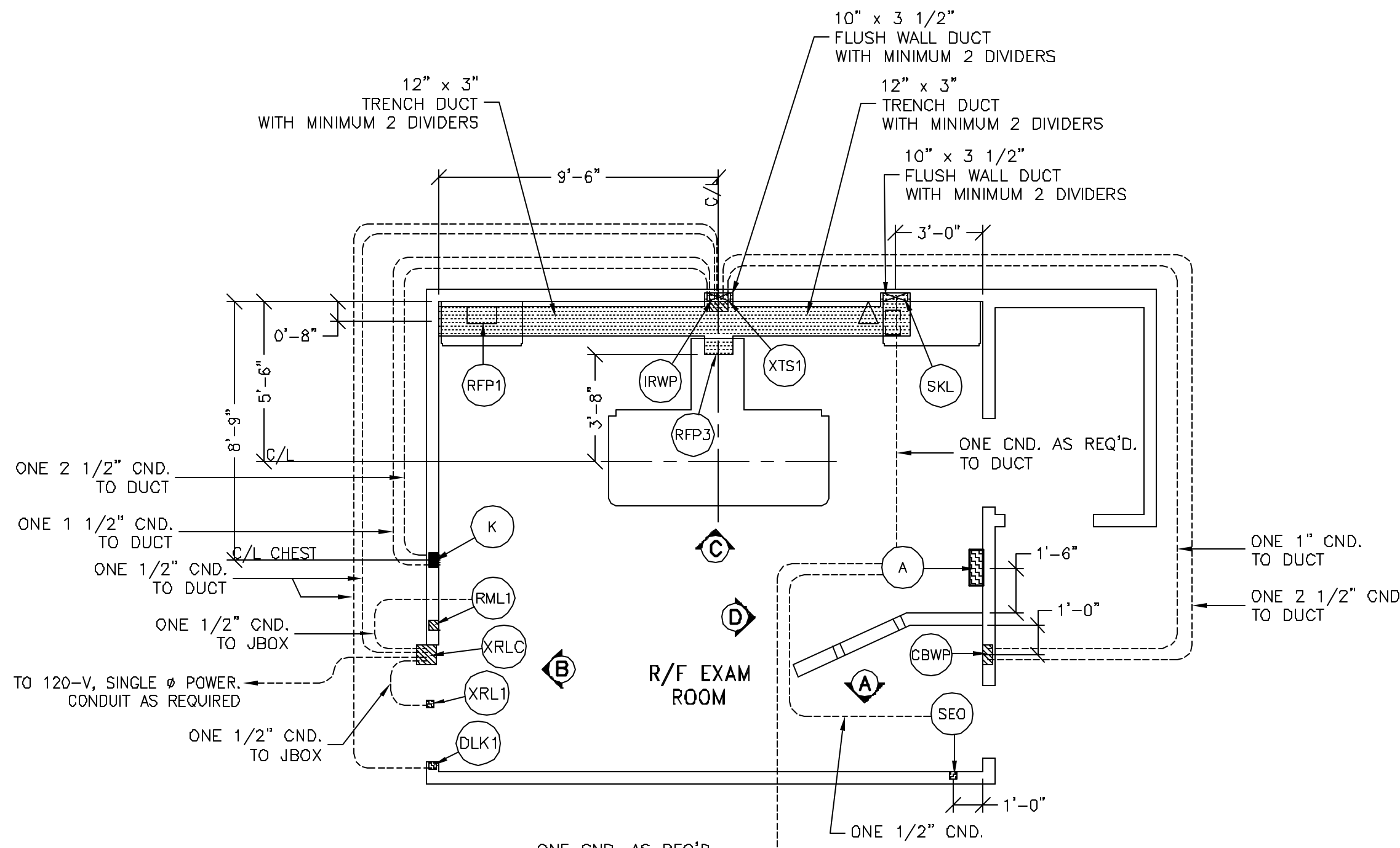
C



D

JUNCTION POINT NOTES

- ALL JUNCTION BOXES, CONDUIT, DUCT, DUCT DIVIDERS, SWITCHES, CIRCUIT BREAKERS, ETC., ARE TO BE SUPPLIED AND INSTALLED BY CUSTOMER'S ELECTRICAL CONTRACTOR.
- CONDUIT AND DUCT RUNS SHALL HAVE SWEEP RADIUS BENDS.
- CONDUITS AND DUCT ABOVE CEILING OR BELOW FINISHED FLOOR MUST BE INSTALLED AS NEAR TO CEILING OR FLOOR AS POSSIBLE TO REDUCE RUN LENGTH.
- ALL DUCTWORK MUST MEET THE FOLLOWING REQUIREMENTS:
  - DUCTWORK SHALL BE METAL WITH DIVIDERS AND HAVE REMOVABLE, ACCESSIBLE COVERS.
  - DUCTWORK SHALL BE CERTIFIED/RATED FOR ELECTRICAL POWER PURPOSES.
  - DUCTWORK SHALL BE ELECTRICALLY AND MECHANICALLY BONDED TOGETHER IN AN APPROVED MANNER.
  - PVC AS A SUBSTITUTE MUST BE USED IN ACCORDANCE WITH ALL LOCAL AND NATIONAL CODES.
- MR MAGNET ROOMS REQUIRE THAT ALL DUCTWORK, DIVIDERS, ACCESS FLOORING BE NON-FERROUS METAL TYPE.



FEEDER TABLE: ADVANTX HF 80/REVOLUTION 80  
REV. DATE: 08/28/03

- CALCULATIONS BASED UPON NOMINAL VOLTAGE, WIRE SIZE IN AWG.
- RECOMMENDED FEEDER SIZES FROM DISTRIBUTION TRANSFORMER TO THE POWER CABINET.
- NEUTRAL MUST BE TERMINATED INSIDE THE MAIN DISCONNECT PANEL AND NOT AT ANY SYSTEM CABINET.
- THE GROUNDING CONDUCTOR (1) WILL BE OF SAME SIZE AS THE FEEDER WIRE WITH A 1/0 MINIMUM. THIS GROUND WILL RUN FROM THE EQUIPMENT BACK TO THE FACILITY POWER SOURCE/MAIN GROUNDING POINT AND ALWAYS TRAVEL IN THE SAME CONDUIT WITH THE FEEDERS AND NEUTRAL.
- MINIMUM SIZE FOR CIRCUIT BREAKER, NEC ARTICLE 517-73.
- FOR A FULL SYSTEM UPS, REFER TO ELECTRICAL DETAILS FOR UPS FEEDER WIRES.

RUN LENGTH IN FEET	POWER SUPPLY VOLTAGE							
	342-418 350	360-440 400	378-460 420	396-484 440	414-506 460	432-598 480		
50	* 2 (1/0)	* 2 (1/0)	* 2 (1/0)	* 2 (1/0)	* 2 (1/0)	* 2 (1/0)		
100	2 (1/0)	* 2 (1/0)	* 2 (1/0)	* 2 (1/0)	* 2 (1/0)	* 2 (1/0)		
150	1 (1/0)	1 (1/0)	1 (1/0)	2 (1/0)	2 (1/0)	* 2 (1/0)		
200	2/0 (2/0)	1/0 (1/0)	1/0 (1/0)	1 (1/0)	1 (1/0)	2 (1/0)		
250	3/0 (3/0)	3/0 (3/0)	2/0 (2/0)	2/0 (2/0)	1/0 (1/0)	1/0 (1/0)		
300	4/0 (4/0)	4/0 (4/0)	3/0 (3/0)	3/0 (3/0)	3/0 (3/0)	2/0 (2/0)		
350	250M (250M)	250M (250M)	4/0 (4/0)	4/0 (4/0)	3/0 (3/0)	3/0 (3/0)		
400	300M (300M)	300M (300M)	250M (250M)	250M (250M)	4/0 (4/0)	3/0 (3/0)		

JUNCTION POINT DESCRIPTIONS

POINT	DESCRIPTION	QTY.	THE FOLLOWING MATERIALS ARE TO BE SUPPLIED AND INSTALLED BY THE CUSTOMER'S ELECTRICAL CONTRACTOR	
			HARDWARE	DETAIL NO., SHT. E3
A	MAIN DISCONNECT AVAILABLE FROM GEMS, CALL: 800-558-5102 EXTENSION 2 OR LOCAL INSTALLATION SPECIALIST	1	110-AMP CIRCUIT BREAKER PANEL, GEMS CAT. NO. E4502JD WITH AUTO RESTART FEATURE-E4502KJ. EMERGENCY OFF PUSHBUTTON STATION IS INCLUDED.	ELEC-15
CBWP	CONTROL BOOTH WALL PLATE	2	4 X 4 X 4 IN. BOX	ELEC-75
DLK1	DOOR SWITCH	1	ARROW-HART NO. 4030 LIMIT SWITCH OR EQUIVALENT	
IRWP	IN-ROOM WALL PLATE	1	4 X 4 X 4 IN. BOX	ELEC-28 ELEC-76
K	SG-60 CASSETTE HOLDER	1	SPLIT COVERPLATE 2 IN. DIA. CHASE NIPPLE 1 1/2 IN. DIA. CHASE NIPPLE 1 6 X 6 X 4 IN. BOX WITH DIVIDER	ELEC-79
RFP1	POSITIONER CABINET	2	3 1/2 IN. DIA. CHASE NIPPLE SUITABLE BUSHING & LOCKNUT	ELEC-25
RFP3	X-RAY TABLE	3	3 1/2 IN. NIPPLES, 1 1/2 IN. LONG	ELEC-25
RML1	ROOM LIGHTS AVAILABLE FROM GE, CALL: 800-558-5102 EXTENSION 2	1	WE4500AL 24V X-RAY ROOM WARNING LIGHT AND ROOM LIGHT CONTROLLER OR EQUIVALENT, SINGLE GANG BOX	ELEC-17
SEO	EMERGENCY OFF	1	PROVIDE A SINGLE GANG, 2 1/8 IN. DEEP, FLUSH MTD. WALL BOX.	ELEC-16
SKL	ADVANTX HF TRANSFORMER	1	3 1/2 IN. DIA. CHASE NIPPLE SUITABLE BUSHING & LOCKNUT	ELEC-25
XRL1	WARNING LIGHT	1	COVERPLATE SINGLE GANG BOX WE4500AL OR E4500AM AVAILABLE FROM GEMS, CALL: 800-558-5102 EXTENSION 2	ELEC-17
XRLC	WARNING LIGHT CONTROLLER AVAILABLE FROM GEMS, CALL: 800-558-5102 EXTENSION 2 OR LOCAL INSTALLATION SPECIALIST	1	E4500AL WARNING LIGHT & ROOM LIGHT CONTROL OR E4500AM WARNING LIGHT CONTROL OR EQUIVALENT MAX 24V CONTROLLER	ELEC-17
XTS1	X-RAY TUBE HANGER	1	32 IN. OF GROMMET MATERIAL FOR AN 8 X 8 IN. OPENING IN DUCT COVER	ELEC-5 ELEC-6

SHEET TITLE: ELECTRICAL LAYOUT

MODALITY TYPE: HF 80/LEGACY

THIS PLAN IS SUBMITTED TO SUGGEST LOCATION OF GE HEALTHCARE EQUIPMENT AND ASSOCIATED APPARATUS, ELECTRICAL WIRING DETAILS AND ROOM ARRANGEMENTS. IT IS NOT TO BE USED FOR CONSTRUCTION PURPOSES. IT IS NOT TO BE USED FOR ACTUAL CONSTRUCTION PURPOSES. HOWEVER, AND THE COMPANY CANNOT BE RESPONSIBLE FOR ANY DAMAGES RESULTING THEREFROM.

TYPICAL R&F  
2-50F

TYPICAL INSTALLATION DRAWINGS

PROJECT TITLE:

PROJECT 2-50  
REVISION 01

DATE: 04/26/05  
DRAWN BY: SDB  
CHECKED BY: SDB

REVISION HISTORY:

SHEET

E1

THIS SHEET IS PART OF THE DOCUMENT SET LISTED ON SHEET C1 AND SHOULD NOT BE SEPARATED

NFSH-1002

**Legacy Phase III System Interconnect Runs – Basic Systems**

GE Supplied In-Room Area Wiring

**Hospital Contractor Supplied & Pulled External-To-Room Wiring**

- PWR2 Hospital 480 VAC Three Phase Supply
- TTL Hospital Modern Line Connection for Inside
- ADWXR Advantage Windows Work Station
- XRL1 X-Ray "ON" Warning Lite (24 VDC)
- RML1 Room Light Dimmer
- 3M Laser Camera (HQ & HQ 969) with Analog Video & Laser Camera Keypad Control
- LCO Hospital 120/240 VAC Power (Laser Camera)

**Hospital Contractor Supplied & Pulled In-Room Wiring**

- A Main 480 VAC Three Phase Disconnect
- SEO System Emergency OFF Control
- EN Hospital Ethernet Network Connection
- PWR1 Hospital 120/240 VAC Power
- DLK1 Door Interlock Switch
- PWR1 Hospital 120/240 VAC Power

**GE Supplied Control Booth Area Wiring**

- CBWP Control Booth Wall Plate
- SCC1 Advantix System Operator Console
- MON2 Control Booth Monitor
- DXT DRS Exabyte Tape Drive
- DMC Dose Monitor
- DRS2 DRS Console
- KEYPAD 3M Laser Camera Keypad

**Legacy SCPU Systems Cabinets**

- SKL Legacy SCU Systems Cabinet
- WBV1 VCR/VTR Wall Plate
- RFP3 Legacy R&F Classical Table
- IRWP In-Room Wall Plate
- K (VBS) Legacy VMS SC-60 or SC-100 Vertical Bucky Stand
- DRS1 Legacy DRS Digital Cabinet

**In-Room Equipment**

- MON1 Fluoro In-Room Monitor
- MON3 DRS Subtraction In-Room Monitor
- DRSRR DRS Infrared Remote Receiver
- OMD Dose Monitor In-Room Display
- MNSUP Monitor Suspension or Cart Ground Point

**Cables and Connections:**

- Signal Cables (S), Power & Ground Wires (P), Video Cables (V), High Voltage Cables (H)
- Cable Run Numbers (e.g., 23, 32, 33)
- Cable Lengths (e.g., 48 ft (15 m), 30 ft (9 m))

**Legend:**

- S = Signal Cables
- P = Power & Ground Wires
- V = Video Cables
- H = High Voltage Cables
- (23) = Cable Run Numbers (including maximum Standard Run Lengths)
- [Box] = Optional Components

**Notes:**

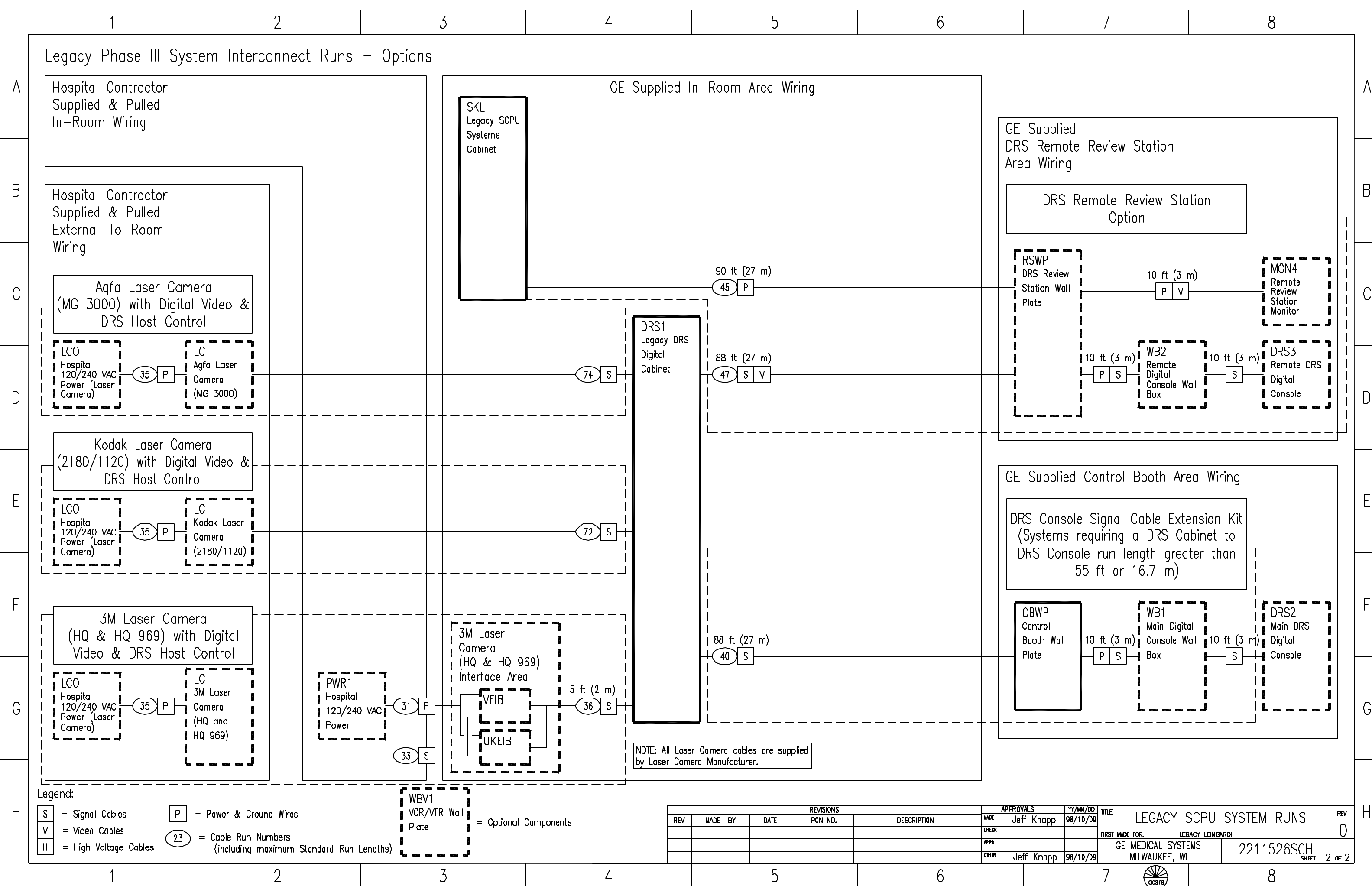
- NOTE: All Laser Camera cables are supplied by Laser Camera Manufacturer.
- NOTE: Monitor Suspensions and Monitor Carts are shipped with 35 ft (11 m) cables.
- NOTE: All sheets of this schematic will be at the same revision of this sheet. The revision of this sheet will be the revision of the entire document.

**REVISIONS**

REV	MADE BY	DATE	PCN NO.	DESCRIPTION	APPROVALS	DATE
1	JEFF KNAPP	08/10/99			JEFF KNAPP	08/10/99
2	JEFF KNAPP	08/10/99			JEFF KNAPP	08/10/99

**LEGACY SCPU SYSTEM RUNS**  
GE MEDICAL SYSTEMS  
MILWAUKEE, WI

2211526SCH  
Sheet 1 of 2



ADVANTX HF 80/REVOLUTION 80 REV. DATE: 08/28/03

VOLTAGE PRIMARY SOURCE IS REQUIRED FOR ALL INSTALLATIONS.  
RANGE OF LINE VOLTAGES  
NOMINAL LINE VOLTAGE OF 380 TO 480, 3 PHASE, 50 OR 60 Hz  
REQUIRED POWER SUPPLY: WYE-CONNECTED.

MAXIMUM DAILY VOLTAGE VARIATION MUST FALL WITHIN ONE OF  
THE RANGES IN TABLE A.

TABLE A ALLOWABLE INPUT VOLTAGES/ CURRENT DEMAND	NOMINAL VOLTAGE	NORMAL RANGE ±10 PERCENT	CURRENT (AMPS)		MINIMUM STANDARD OVERCURRENT PROTECTION
			MAX. MOMENTARY	CONTINUOUS	
	380	342-418	179	15.8	90-A
	400	360-440	171	15	90-A
	420	378-462	162	14.5	90-A
	440	396-484	155	13.6	80-A
	460	414-506	148	13	80-A
	480	432-528	142	12.5	80-A

ALL CALCULATIONS BASED UPON NOMINAL VOLTAGE

NOTE LOW LINE CONDITIONS MAY INHIBIT SOME HIGH KVp TECHNIQUES.  
THE GENERATOR AUTOMATICALLY ESTABLISHES THESE INHIBITS  
BASED ON ACTUAL LINE CONDITIONS AND SYSTEM REGULATION.

PHASE-TO-PHASE VOLTAGES MUST BE WITHIN +2 PERCENT OF THE LOWEST PHASE-TO-PHASE VOLTAGE. MAXIMUM ALLOWABLE TRANSIENT VOLTAGE EXCURSIONS ARE 2.5 PERCENT OF RATED LINE VOLTAGE AT A MAXIMUM DURATION OF 5 CYCLES AND FREQUENCY OF 10 TIMES PER HOUR.

POWER CONTINUOUS POWER DEMAND = 10.4 KVA. (MAX DEMAND = 118 KVA)

DEMAND	ADVANTAGE
kVp + POWER FACTOR AT	118 0.73
mA	1000
kVp	80

\* DEMAND INCLUDES POWER FOR ENTIRE ADVANTX SYSTEM  
LINE VOLTAGE REGULATION AT MAXIMUM POWER DEMAND  
MUST BE LESS THAN OR EQUAL TO 6 PERCENT.

DISTRI-  
BUTION

FOR A SINGLE UNIT INSTALLATION, THE MINIMUM TRANSFORMER SIZE  
IS 150 KVA.

IMPORTANT: REFER TO GEMS DOCUMENT NO. 46-019668 FOR ADDITIONAL FACILITY POWER AND GROUND REQUIREMENTS.

NOTE 1: ALL WIRES SPECIFIED SHALL BE STRANDED, FLEXIBLE, THERMO-PLASTIC, COLOR CODED, COPPER ONLY. CUT 10 FOOT LONG AT OUTLET BOXES, DUCT TERMINATION POINTS OR STUBBED CONDUIT ENDS, UNLESS OTHERWISE SPECIFIED. ALL CONDUCTORS, POWER, SIGNAL AND GROUND, MUST BE RUN IN CONDUIT OR DUCT SYSTEM. ELECTRICAL CONTRACTOR SHALL RING OUT AND TAG ALL WIRES AT BOTH ENDS. WIRE RUNS MUST BE CONTINUOUS COPPER AND FREE FROM SPLICES.

NOTE 2: WIRE SIZES GIVEN ARE FOR USE OF EQUIPMENT. LARGER SIZES MAY BE REQUIRED BY LOCAL CODES.

NOTE 3: IT IS RECOMMENDED THAT ALL WIRES BE COLOR CODED, AS REQUIRED IN ACCORDANCE WITH NATIONAL AND LOCAL ELECTRICAL CODES.

NOTE 4: CONDUIT SIZES SHALL BE VERIFIED BY THE ARCHITECT, ELECTRICAL ENGINEER OR CONTRACTOR, IN ACCORDANCE WITH LOCAL OR NATIONAL CODES.

NOTE 5: CONVENIENCE OUTLETS ARE NOT ILLUSTRATED. THEIR NUMBER AND LOCATION ARE TO BE SPECIFIED BY OTHERS. LOCATE AT LEAST ONE CONVENIENCE OUTLET CLOSE TO THE SYSTEM CONTROL, THE POWER DISTRIBUTION UNIT AND ONE ON EACH WALL OF THE PROCEDURE ROOM. USE HOSPITAL APPROVED OUTLET OR EQUIVALENT.

NOTE 6: GENERAL ROOM ILLUMINATION IS NOT ILLUSTRATED. CAUTION SHOULD BE TAKEN TO AVOID EXCESSIVE HEAT FROM OVERHEAD SPOTLIGHTS. DAMAGE CAN OCCUR TO CEILING MOUNTING COMPONENTS AND WIRING IF HIGH WATTAGE BULBS ARE USED. RECOMMEND LOW WATTAGE BULBS NO HIGHER THAN 75 WATTS AND USE DIMMER CONTROLS (EXCEPT MR). DO NOT MOUNT LIGHTS DIRECTLY ABOVE AREAS WHERE CEILING MOUNTED ACCESSORIES WILL BE PARKED.

**NOTE 7: ROUTING OF CABLE DUCTWORK, CONDUITS ETC., OTHER THAN SHOWN ON THIS DRAWING MAY RESULT IN THE NEED FOR GREATER THAN STANDARD CABLE LENGTHS (REFER TO THE INTERCONNECTION DIAGRAM FOR MAXIMUM USABLE LENGTHS POINT TO POINT).**

NOTE 8: CONDUIT TURNS TO HAVE LARGE, SWEEPING BENDS WITH MINIMUM RADIUS IN ACCORDANCE WITH NATIONAL AND LOCAL ELECTRICAL CODES.

NOTE 9: A SPECIAL GROUNDING SYSTEM IS REQUIRED IN ALL PROCEDURE ROOMS BY SOME NATIONAL AND LOCAL CODES. IT IS RECOMMENDED IN AREAS WHERE PATIENTS MIGHT BE EXAMINED OR TREATED UNDER PRESENT, FUTURE, OR EMERGENCY CONDITIONS. CONSULT THE GOVERNING ELECTRICAL CODE AND CONFER WITH APPROPRIATE CUSTOMER ADMINISTRATIVE PERSONNEL TO DETERMINE THE AREAS REQUIRING THIS TYPE OF GROUNDING SYSTEM.

NOTE 10: THE MAXIMUM POINT TO POINT DISTANCES ILLUSTRATED ON THIS DRAWING MUST NOT BE EXCEEDED.

NOTE 11: PHYSICAL CONNECTION OF PRIMARY POWER TO GE EQUIPMENT IS TO BE MADE BY A QUALIFIED ELECTRICAL CONTRACTOR WITH THE SUPERVISION OF A GE REPRESENTATIVE. THE GE REPRESENTATIVE WOULD BE REQUIRED TO IDENTIFY THE PHYSICAL CONNECTION LOCATION, AND INSURE PROPER HANDLING OF GE EQUIPMENT.



installed in Milwaukee.

SHEET TITLE: ELECTRICAL SPECIFICATIONS

MODALITY TYPE: HF 80/LEGACY

THIS PLAN IS SUBMITTED TO SUGGEST LOCATION OF HEALTHCARE EQUIPMENT AND ASSOCIATED APPARATUS, ELECTRICAL WIRING DETAILS AND ROOM ARRANGEMENTS. IN PREPARING THIS PLAN, EVERY EFFORT HAS BEEN MADE TO CONFORM DETAILS TO ACTUAL EQUIPMENT EXPECTED TO BE INSTALLED. IT IS NOT TO BE USED FOR ACTUAL CONSTRUCTION PURPOSES. HOWEVER, THE COMPANY CANNOT ACCEPT RESPONSIBILITY FOR ANY DAMAGES RESULTING THEREFROM.

PROJECT TITLE: TYPICAL R&F 2-50F TYPICAL INSTALLATION DRAWINGS

PROJECT	REVISION
2-50	01
DATE: 04/26/05	
DRAWN BY: SDB	
CHECKED BY: SDB	

REVISION HISTORY:

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SHEET

E2

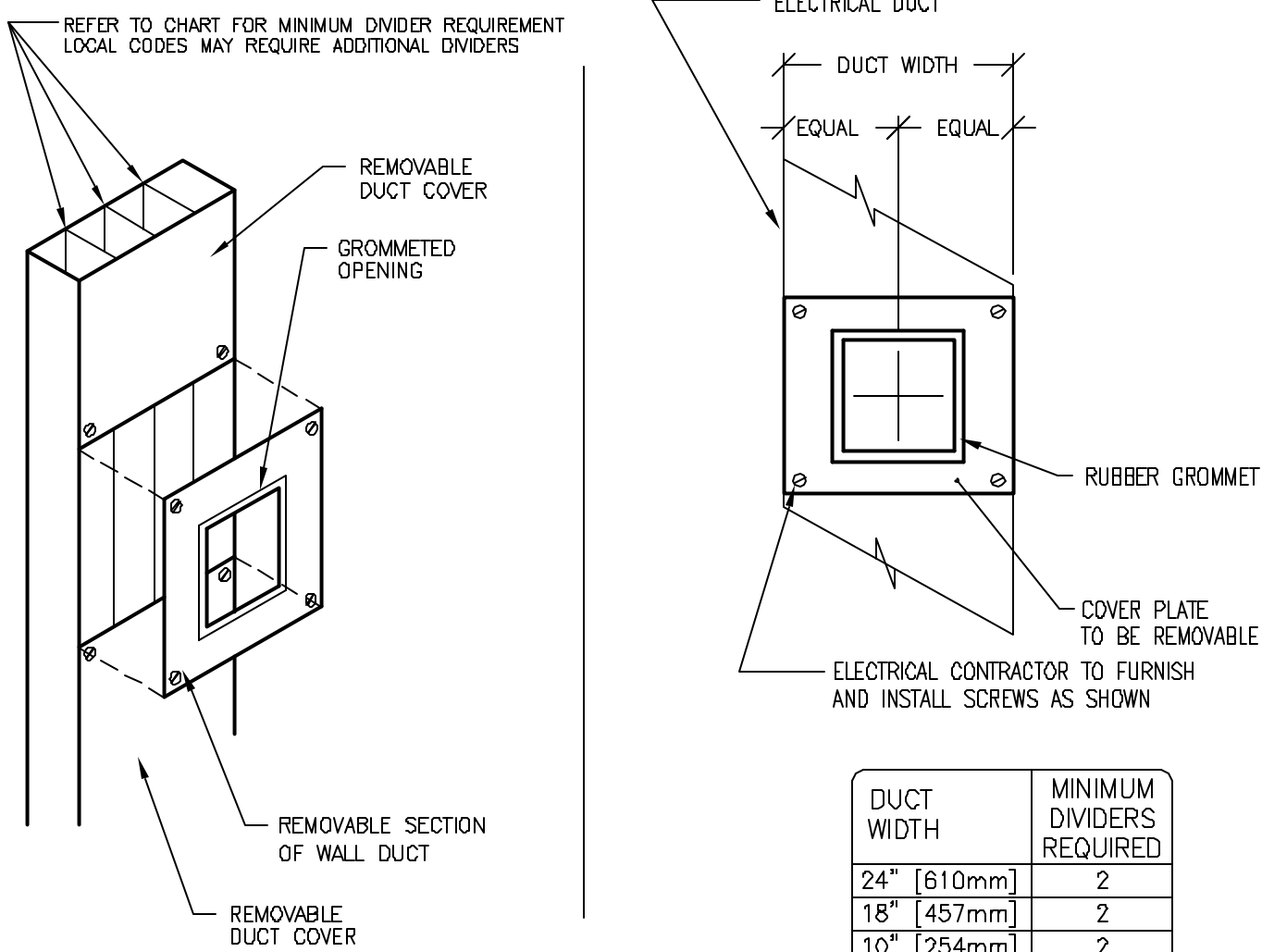




ELECTRICAL DETAIL  
VERTICAL WALL DUCT (TYPICAL)

ELEC-6

REV. DATE: 03/19/04



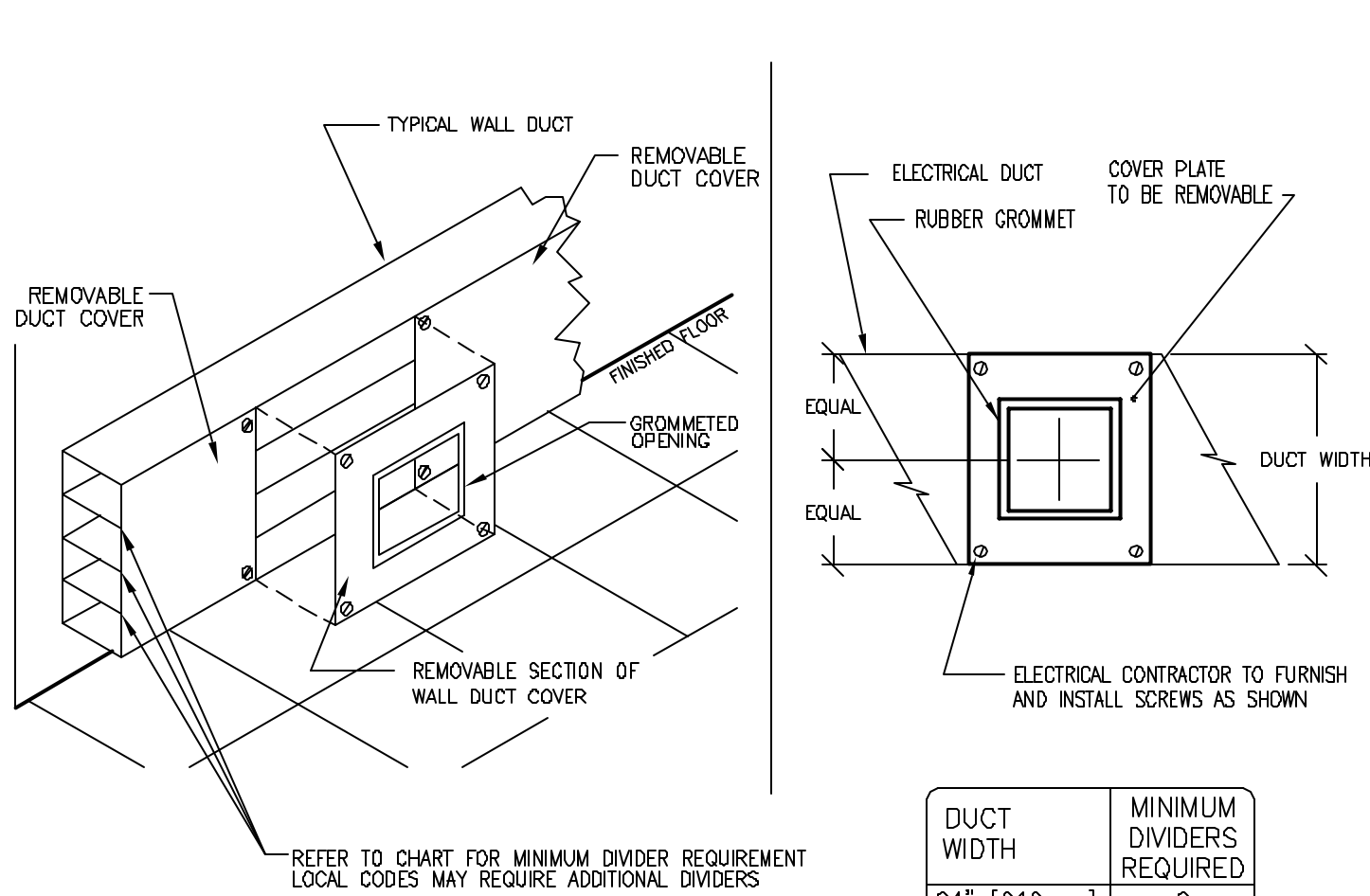
DETAIL NOT TO SCALE

DUCT WIDTH	MINIMUM DIVIDERS REQUIRED
24" [610mm]	2
18" [457mm]	2
10" [254mm]	2
6" [152mm]	1
4" [102mm]	1

ELECTRICAL DETAIL  
HORIZONTAL WALL DUCT (TYPICAL)

ELEC-5

REV. DATE: 03/19/04



DETAIL NOT TO SCALE

DUCT WIDTH	MINIMUM DIVIDERS REQUIRED
24" [610mm]	2
18" [457mm]	2
10" [254mm]	2
6" [152mm]	1
4" [102mm]	1

SHEET TITLE: ELECTRICAL DETAILS

MODALITY TYPE: HF 80/LEGACY

THIS PLAN IS SUBMITTED TO SUGGEST LOCATION OF GE HEALTHCARE EQUIPMENT AND ASSOCIATED APPARATUS. ELECTRICAL WIRING DETAILS AND ROOM ARRANGEMENTS ARE PRELIMINARY AND SUBJECT TO CHANGE. THE USER SHALL BE RESPONSIBLE FOR THE ACTUAL CONSTRUCTION PURPOSES. HOWEVER, AND THE COMPANY CANNOT ACCEPT RESPONSIBILITY FOR ANY DAMAGES RESULTING THEREFROM.

PROJECT TITLE:

TYPICAL R&F  
2-50F  
TYPICAL INSTALLATION DRAWINGS

PROJECT	REVISION
2-50	01
DATE:	04/26/05
DRAWN BY:	SDB
CHECKED BY:	SDB

REVISION HISTORY:

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\_\_\_\_\_  
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SHEET  
E4



GE Healthcare Technologies

Installation Services Design Center

Milwaukee, Wisconsin

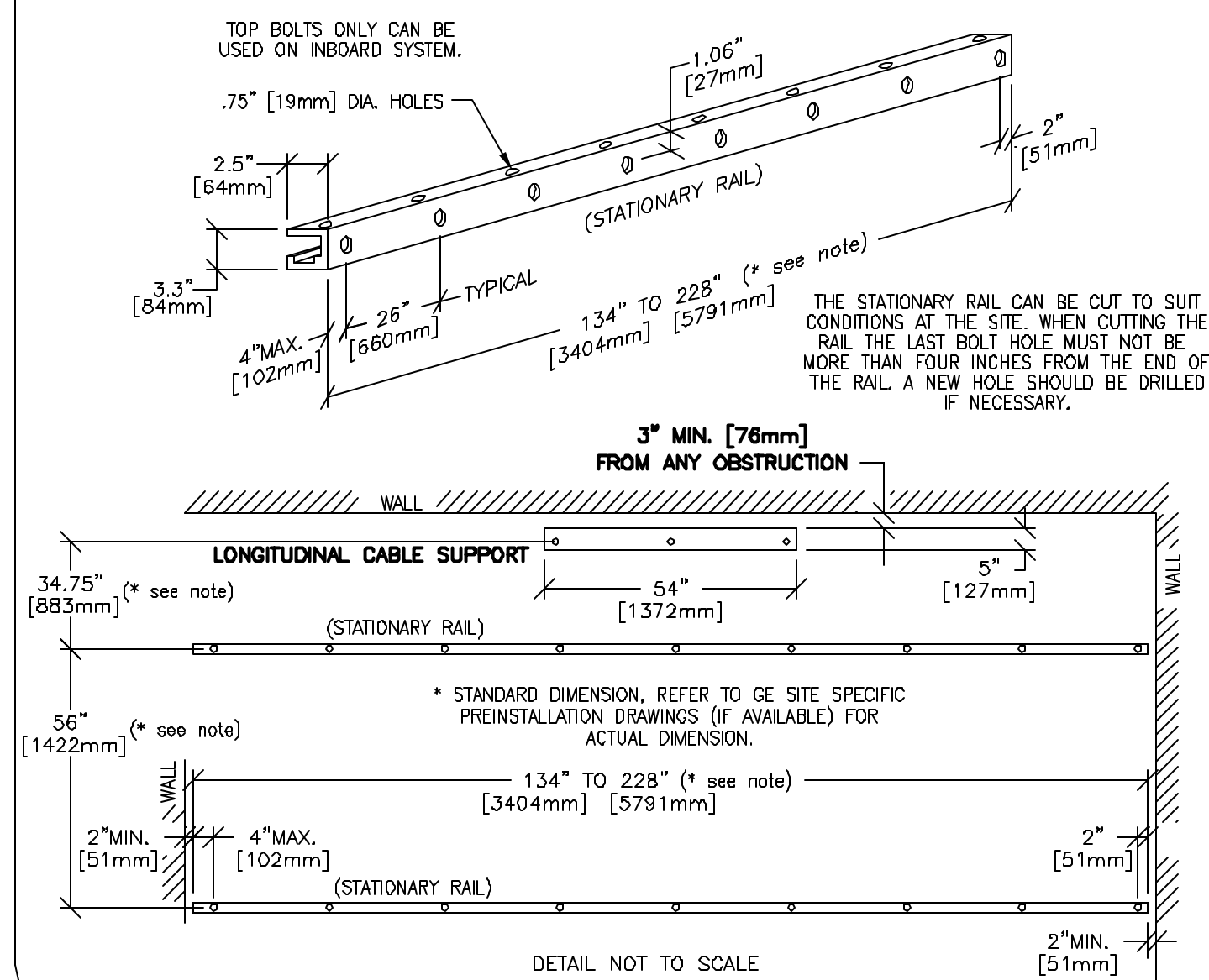


## EQUIPMENT DETAIL

### XT RADIOGRAPHIC SUSPENSION, INBOARD MOUNTING

B2007

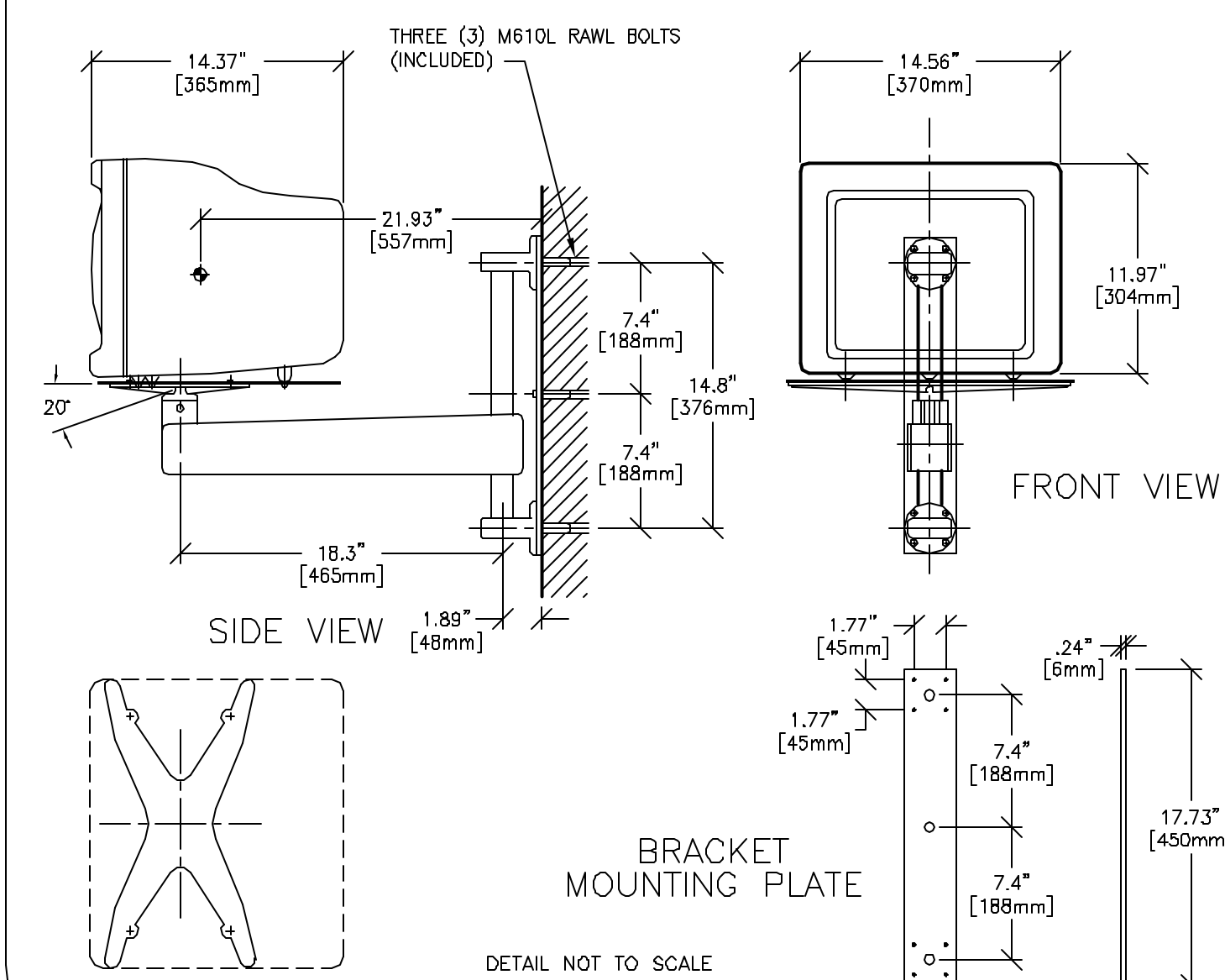
REV. DATE: 08/24/95



EQUIPMENT DETAIL  
DISTR 15" [381mm] MONITOR ON GYRO WALL SUPPORT

C76-14

REV. DATE: 05/22/98

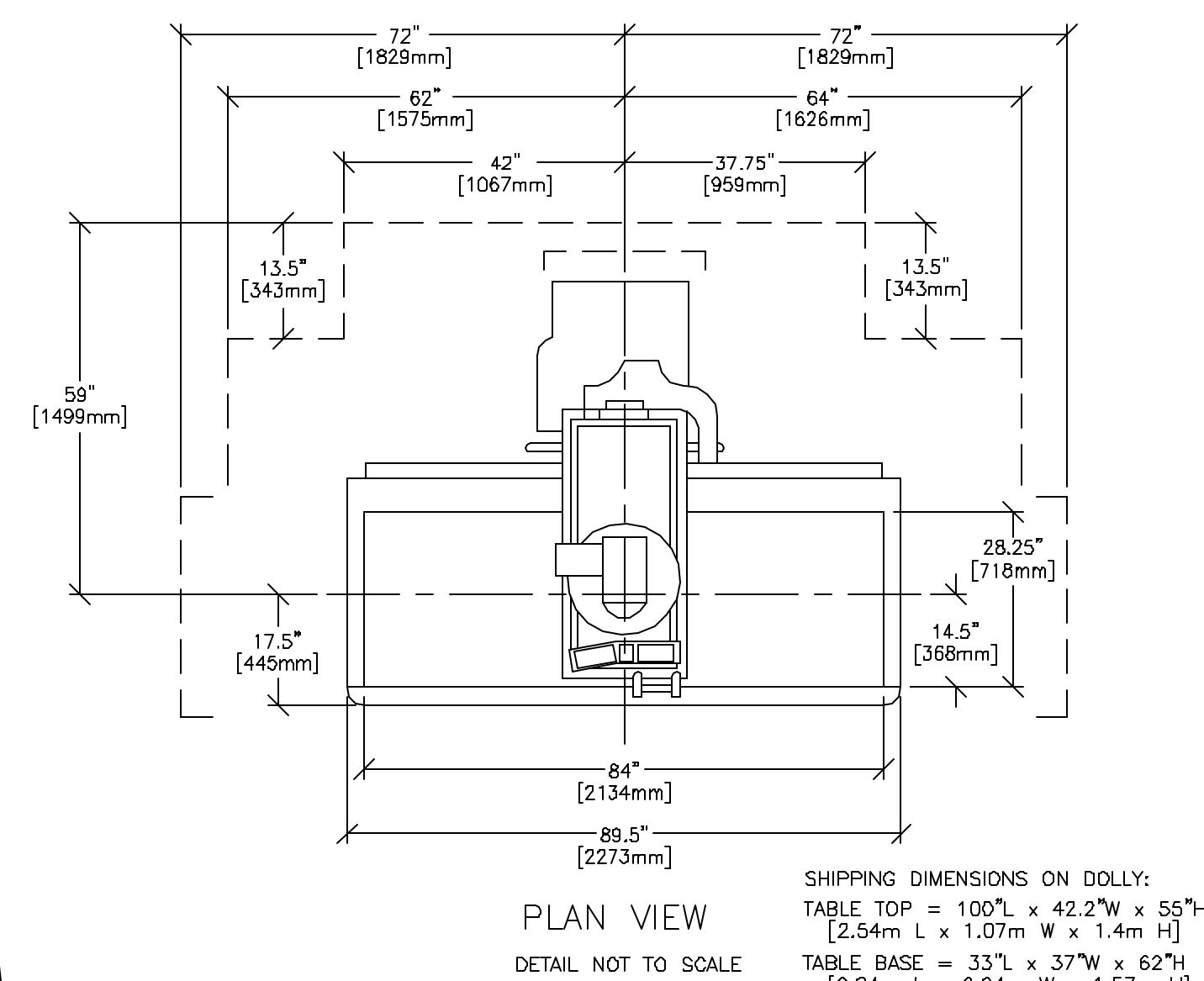


## EQUIPMENT DETAIL

### LEGACY RF TABLE

B01-13

REV. DATE: 03/18/99

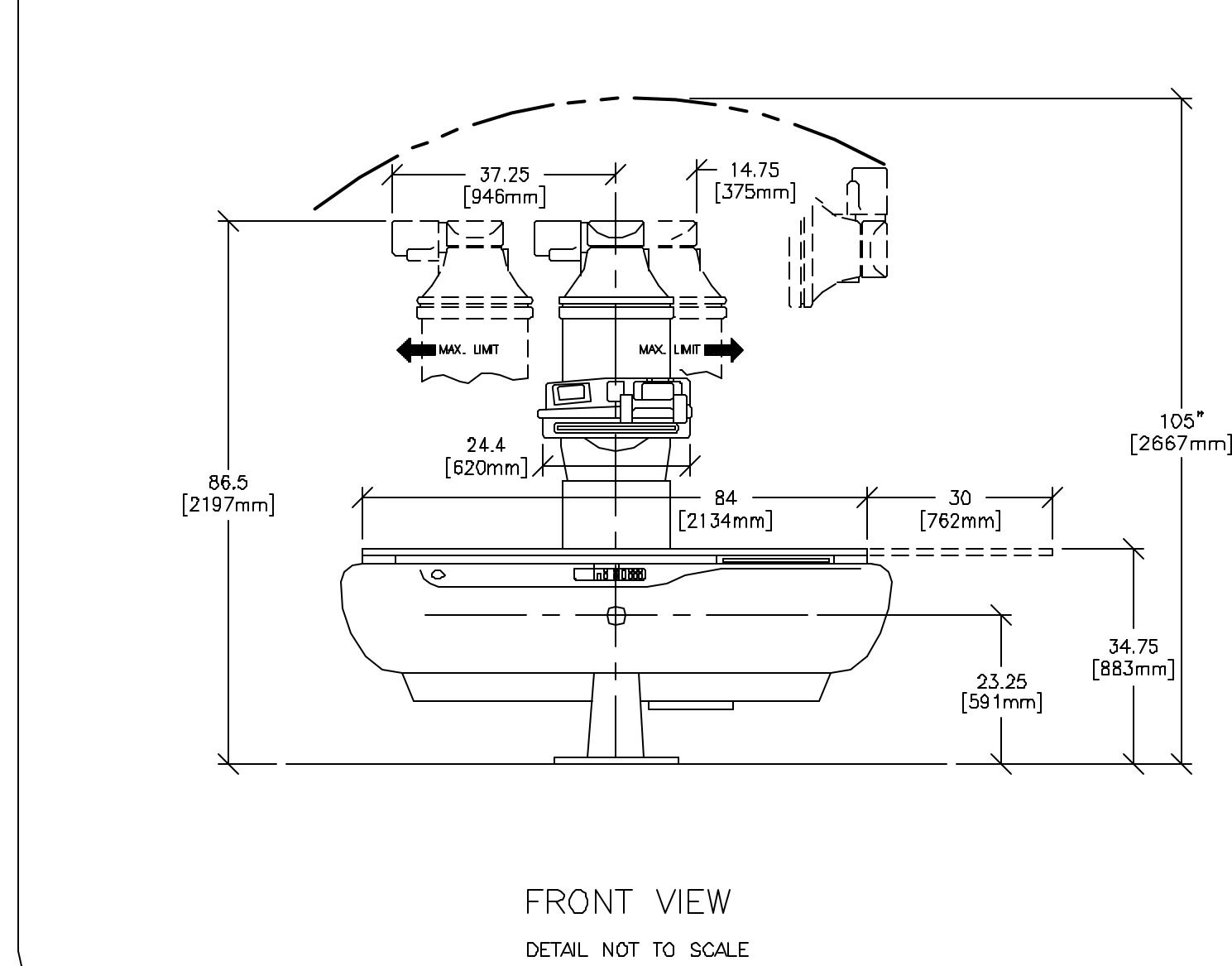


## EQUIPMENT DETAIL

### LEGACY RF TABLE

B0113A

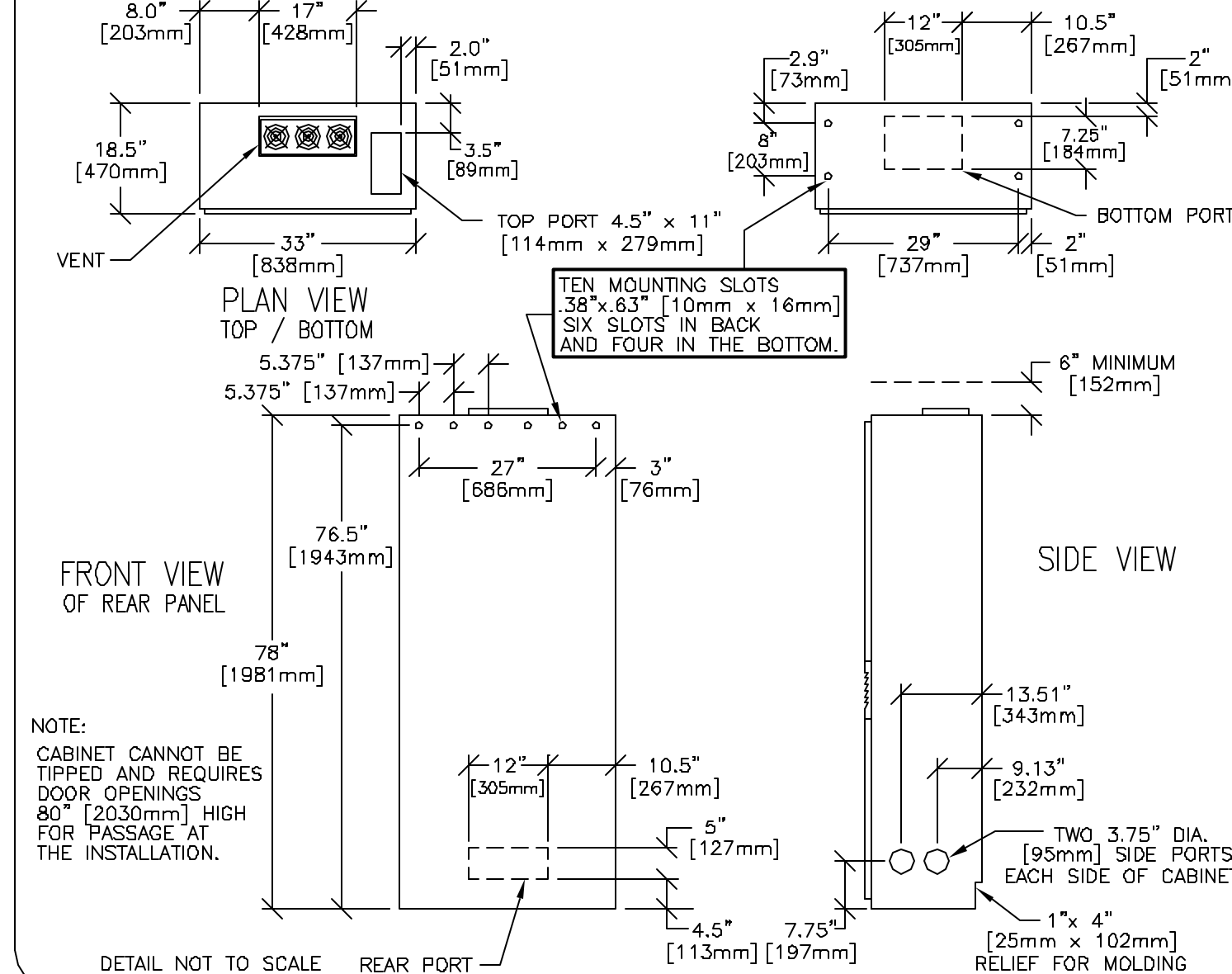
REV. DATE: 05/16/03



EQUIPMENT DETAIL  
ADVANTX-E SYSTEMS/POSITIONER CABINET

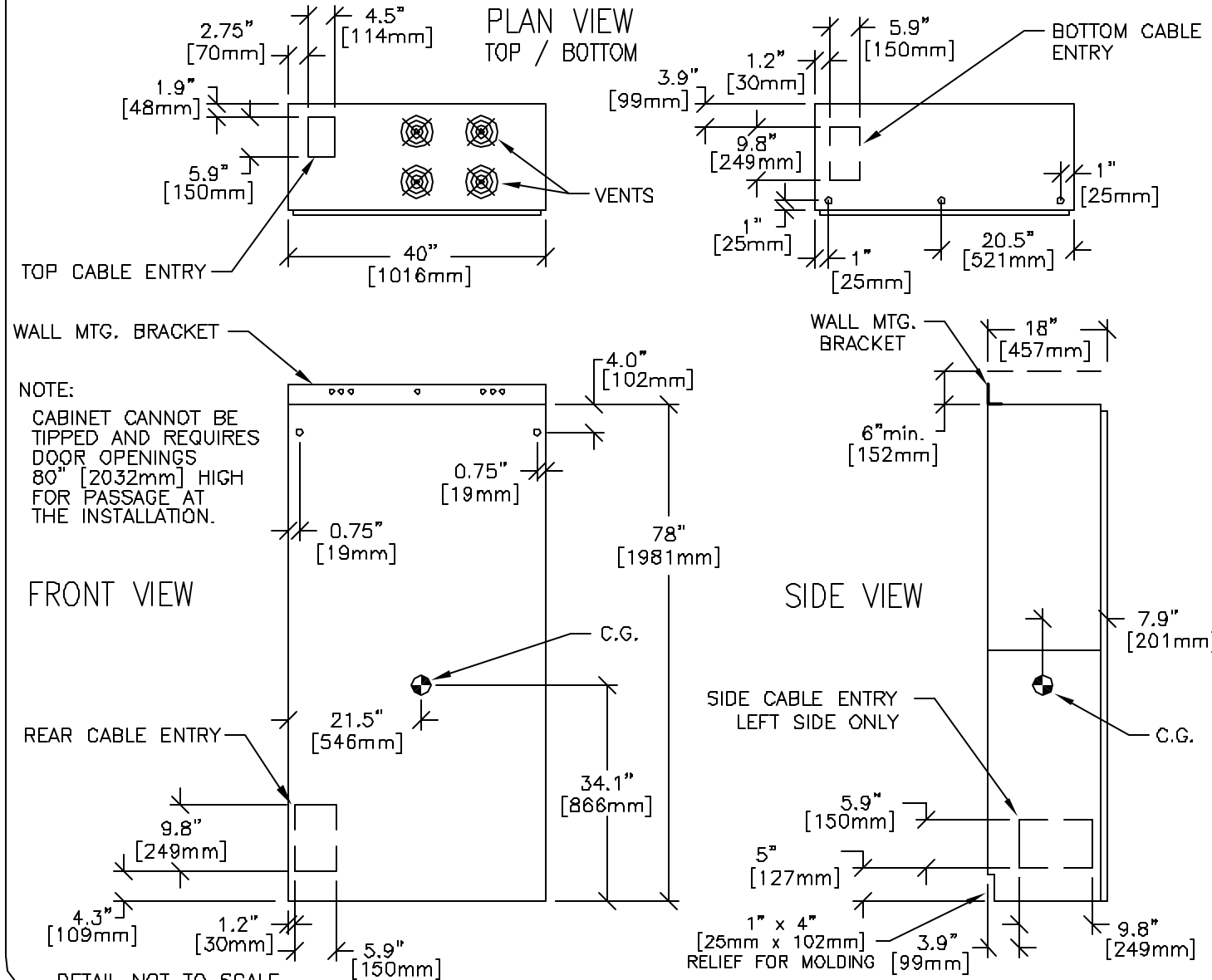
A8008

REV. DATE: 09/03/98

EQUIPMENT DETAIL  
ADVANTX HF GENERATOR

A07-20

REV. DATE: 09/03/98

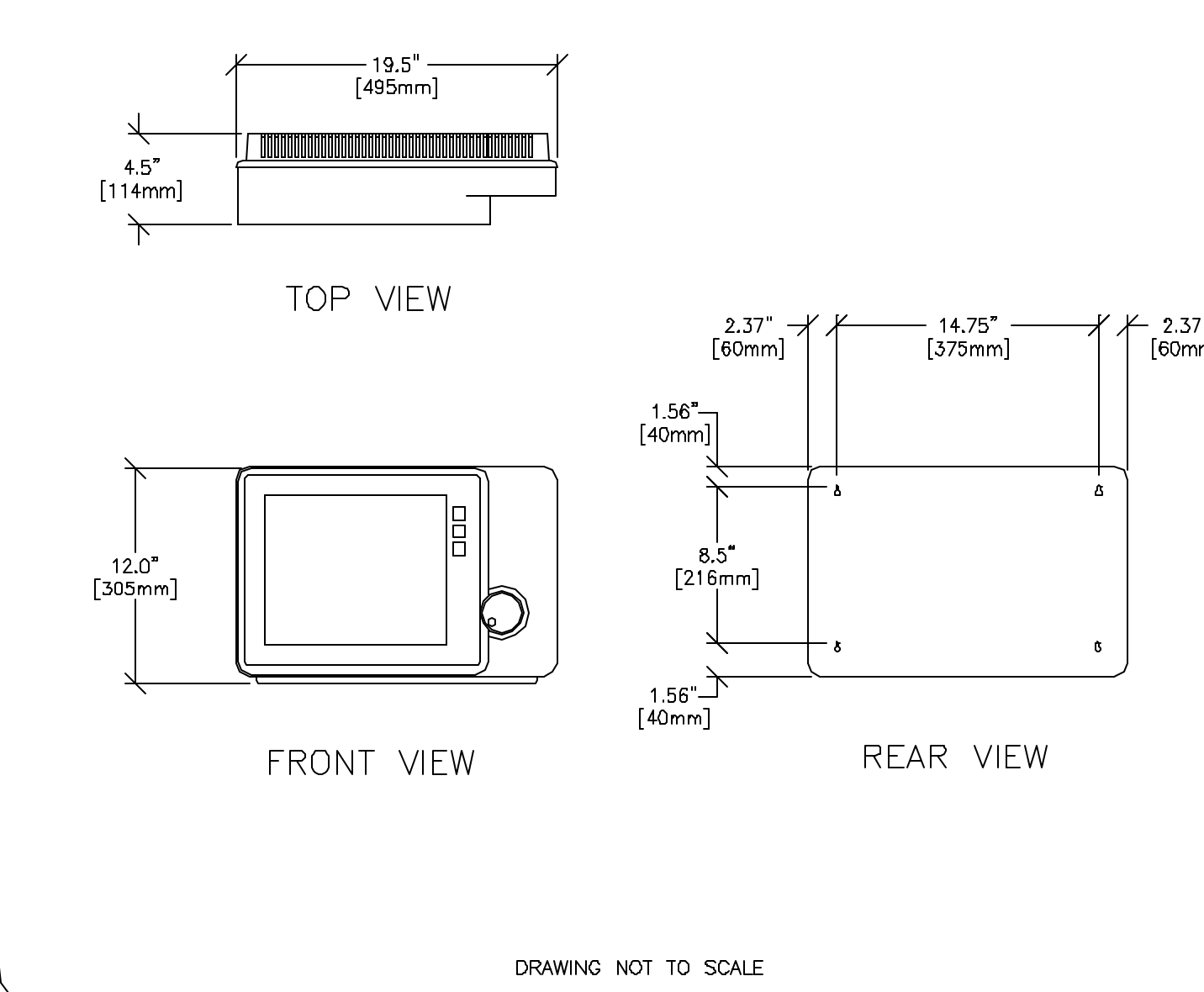


## EQUIPMENT DETAIL

### CONTROL CONSOLE

A80066

REV. DATE: 03/10/99

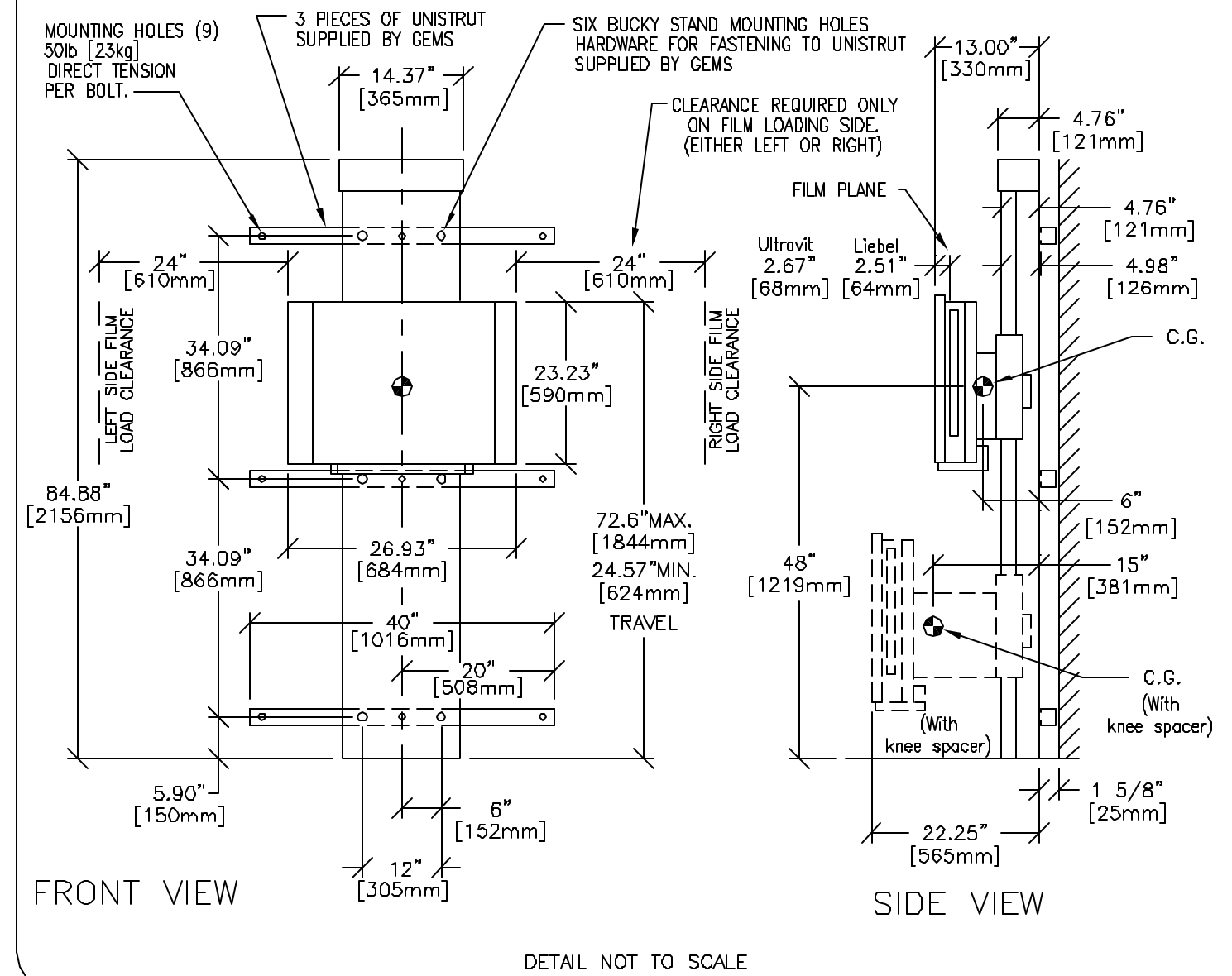


## EQUIPMENT DETAIL

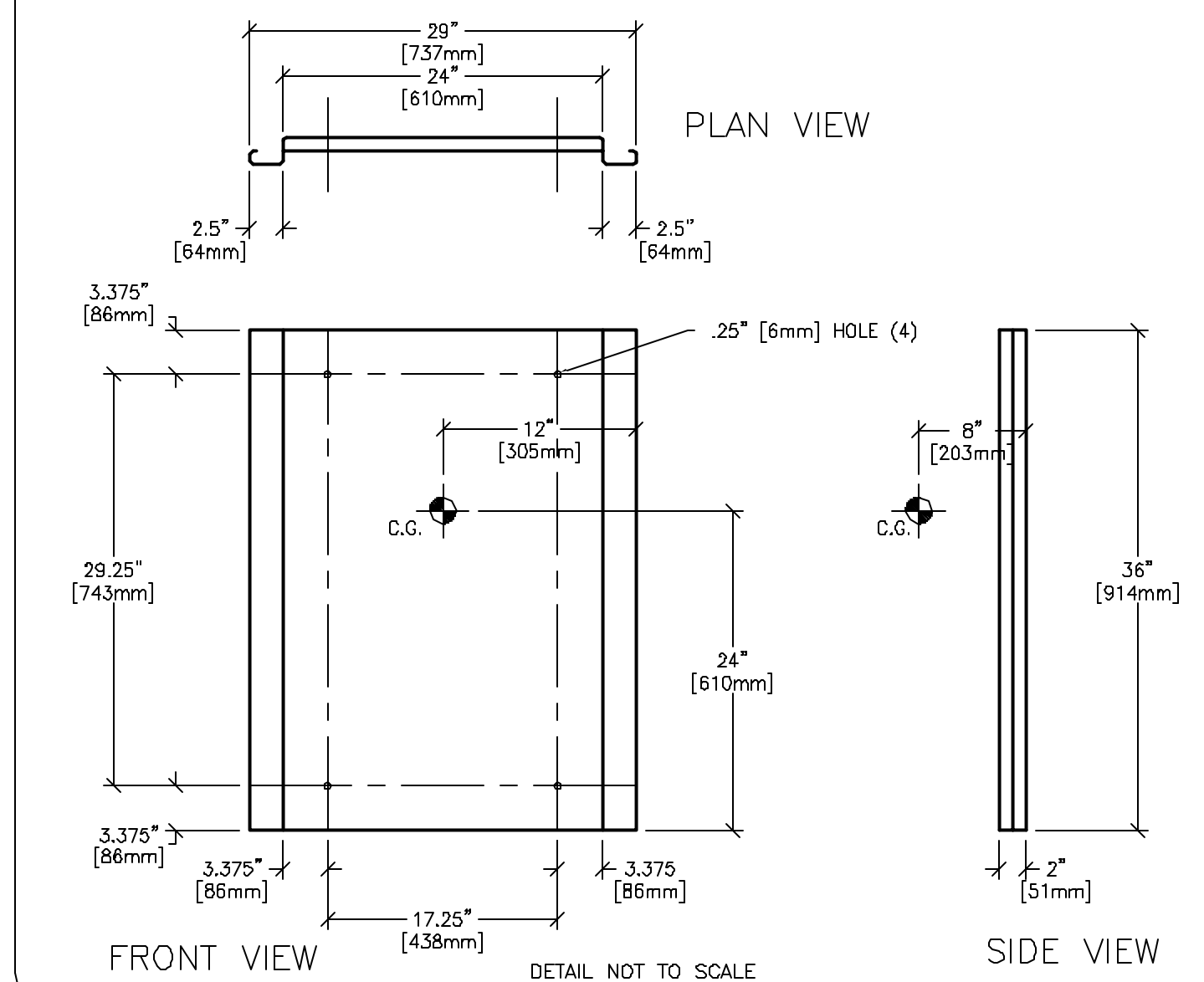
### SG-60 VERTICAL BUCKY STAND

B3503

REV. DATE: 02/19/99

EQUIPMENT DETAIL  
TABLE ACCESSORY RACK

B8130C



SHEET TITLE: EQUIPMENT DETAILS

MODALITY TYPE: HF 80/LEGACY

THIS PLAN IS SUBMITTED TO SUGGEST LOCATION OF CE HEALTHCARE EQUIPMENT AND ASSOCIATED APPARATUS, ELECTRICAL WIRING DETAILS AND ROOM ARRANGEMENTS. IN PREPARING THIS PLAN, EVERY EFFORT HAS BEEN MADE TO CONFORM DETAILS TO ACTUAL EQUIPMENT EXPECTED TO BE INSTALLED. IT IS NOT TO BE USED FOR ACTUAL CONSTRUCTION PURPOSES, HOWEVER, AND THE COMPANY CANNOT ACCEPT RESPONSIBILITY FOR ANY DAMAGES RESULTING THEREFROM.

TYPICAL R&F  
2-50F

PROJECT TITLE:

PROJECT	REVISION
2-50	01

DATE: 04/26/05  
DRAWN BY: SDB  
CHECKED BY: SDB

## REVISION HISTORY

SHEET

D 1