

Drawing Index

These sheets are a document set and should not be separated. Electrical information and references are contained on all sheets.

SITE READINESS

C1

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A1

(Equipment locations, heat loads, component weights, environmental specs)

STRUCTURAL LAYOUT

S1

(Structural support/mounting locations for floor/wall/ceiling, wall support elevations)

STRUCTURAL DETAILS

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(Floor and Ceiling loading information)

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E1

(Contractor supplied wiring, interconnect methods, junction point locations and descriptions)

ELECTRICAL SPECIFICATIONS

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(Maximum wiring run lengths, interconnect diagram, system power specifications)

ELECTRICAL DETAILS

E3 THRU E4

EQUIPMENT DETAILS

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These equipment installation drawings indicate the placement and interconnection of the listed equipment components. These drawings are not construction or site preparation drawings. Customer remains ultimately responsible for preparing the site to accommodate the installation and operation of such equipment in compliance with GE Healthcare's written specifications and all applicable federal, state, and/or local requirements.

* REQUIRED REFERENCE *

Innova 2121–3131
Preinstallation Manual
5177951–100

A mandatory component of this drawing set is the GE Healthcare Preinstallation manual. Failure to reference the preinstallation manual will result in incomplete documentation required for site design and preparation.

Preinstallation documents for GE Healthcare products can be accessed on the web at:

<http://www.gehealthcare.com/company/docs/siteplanning.html>

GE Healthcare



Cardio-Vascular
Site Planning



imagination at work

Customer Site Readiness
Requirements

- Any deviation from these drawings must be communicated in writing to and reviewed by your local GE Healthcare Installation Project Manager prior to making changes.
- Make arrangements for any rigging, special handling, or facility modifications that must be made to deliver the equipment to the installation site. If desired, your local GE Healthcare Installation Project Manager can supply a reference list of rigging contractors.
- New construction requires the following; 1. Secure area for equipment, 2. Power for drills and other test equipment, 3. Capability for image analysis, 4. Restrooms.
- Provide for refuse removal and disposal (e.g. crates, cartons, packing)
- Contact a radiation physicist or consultant to specify radiation containment requirements.

GE Equipment Delivery
Requirements

Items 1 through 8 on the GE Healthcare Site Readiness Checklist are REQUIRED to facilitate equipment delivery to the installation site. Equipment will not be delivered if these requirements are not satisfied.

GE Healthcare Site Readiness Checklist

GEHC Global Order #:

Customer:

GEHC On-site Representative:

MI Supplier:

Name of customer reviewed with:

Lead Installer:

GEHC PMI:

Phone Number:

Target Site Prep Completion Date:

Helper:

The customer is responsible for proper site preparation and site readiness regardless of any GEHC inspections/assessments.

Item #	GEHC Minimum Requirements	Storage: Is item ready?	Predict (Pre-ship) Is this item ready?	Verify (Delivery): Is item ready?	Validate (Mech install): Is item ready?	Comments If "N", please enter in comments or action plan
1	Equipment installation drawings must match actual room size and must meet clearance requirements. Deviations that meet installation requirements may be red-lined, if red-lining is allowed by local code. Seismic requirements are identified on construction drawings.					
2	Delivery route to installation or storage area meets requirements and has been discussed and scheduled with the customer. Ensure floor protection is discussed, requirements identified, and will be available at time of delivery and installation.					
3	Rooms that will contain equipment, including storage areas, are dust free. Room security to prevent unauthorized access and theft has been discussed with customer. The customer is aware of these security issues, implications and responsibility.					
4	In room HVAC ductwork and units (in room) must be mechanically installed and dust free. Installation rooms appear to meet environmental conditions (see Further Definitions) and observed issues have been communicated to the customer. If being stored, storage area must meet PMI storage criteria.					
5	Ceiling grid is installed, Unistrut is located per the installation drawings, and permanent lighting is installed and operational.					
6	Floor is clean and prepared for final floor covering. Customer has verified floor leveling meets the equipment installation drawings and PMI specs and no visible defects are observed. Gantry and table baseplate are installed prior to delivery (if applicable)					
7	Access to a working phone at the facility for emergency use, including MR magnet delivery.					
8	All walls primed (final coat not needed on Day 1), and counter tops that will support equipment must be installed. No dust-producing cabinetry work in installation areas.					
9	Mechanical supplier has been provided with a set of equipment installation drawings for reference. For California, permitted construction drawings or PMI-specified installation drawings are required.					
10	Conduit/electrical cable ducting/dividers/ access flooring installed, with the exception of surface-mounted floor ducting. (Wiring to the main disconnect panel) is installed and compliant with equipment installation drawings or pre-installation manual.					

Issued Date: 7/9/07 Rev 11

GE EQUIPMENT LISTING									
EQUIPMENT ON ORDER FROM GE HEALTHCARE, INSTALLED BY GE HEALTHCARE, PER : NEITHER A QUOTE OR GON WAS ISSUED AT THE DATE OF THESE DRAWINGS NOTE: LOCAL CONDITIONS MAY DICTATE THAT ITEMS IDENTIFIED IN THIS CATEGORY BE INSTALLED BY OTHERS.								EQUIPMENT CROSS REFERENCE CHART	
								SEISMIC STATUS	P = PREAPPROVAL C = CALCULATIONS/ PENDING APPROVAL S = SPECIFICATIONS ONLY
ITEM NO.	QUANTITY ORDERED	REFER TO SHEET "D"	ITEM DESCRIPTION (* = EXISTING/REINSTALL)	WEIGHT	HEAT OUTPUT (PER HOUR)	DETAIL NO.	STRC PLAN	ELEC PLAN	
1	1		BOLUS CHASE HANDSWITCH	2 lbs					
2	1		IVUS VOLCAND SS: CONSOLE, INCLUDES FLAT PANEL MONITOR AND KEYBOARD (DESK MOUNTED)	68 lbs	1631 btu	BS51	---	WBBC	-
3	1		IVUS VOLCAND COLOR PRINTER						IVUS
4	1		WORKSTATION CART						
5	1		CARDIOLAB CONSOLE, INCLUDES MONITORS AND KEYBOARD	181 lbs	2935 btu		---	PC	S
6	1		TRAM NET RACK	8 lbs		B5047	---	TRAM	S
7	2		COUNTERBALANCED EYE AND THYROID SHIELD WITH LAMP	143 lbs		B5031E	B50 31F	LMP	S
8	2		LONGITUDINAL STATIONARY RAIL FOR LCD MONITOR SUSPENSION	68 lbs			B20 04N		C
9	1		UPS CABINET	1170 lbs	4050 btu	E4502SC	---	UPS	-
10	1		3 KVA UPS CABINET	81 lbs	546 btu			UPS1	-
11	1		AP FRONTAL CABINET (C1)	890 lbs	4413 btu	B0558B		C1	-
12	1		LC/LP CABINET (C2)	630 lbs	4570 btu			C2	-
13	1		LATERAL CABINET (C3)	705 lbs	2945 btu			C3	-
14	1		XR BUZZER (LOCATED ABOVE CEILING)	2 lbs		B5150H		XR8	-
15	1		OPERATORS CONSOLE	22 lbs	546 btu	C7617 C7502 B5030D		WBC1	C
16	1		AW WORKSTATION	81 lbs	1201 btu	M1013AW C7617	---		C
17	1		LATERAL WATER CHILLER	447 lbs	16320 btu	M0917B		CHLR	-
18	1		LATERAL DETECTOR CHILLER	33 lbs	709 btu	B5150A	-	DC	-
19	1		AP DETECTOR CHILLER	33 lbs	709 btu	B5150A	-	DC	-
20	1		AP TUBE CHILLER	447 lbs	18723 btu	M0917B		CHLR	-
21	1		EIGHT LCD MONITOR SUSPENSION ON 7 FT. 9 IN. XT INBOARD BRIDGE	630 lbs	1638 btu	B2004 B2010A	---	WBM1	C
22	1		OMEGA IV/V TABLE WITH ROTATING TOP	1750 lbs	600 btu		B50 04N	LU5	C
23	1		LATERAL POSITIONER BRIDGE MOUNT ASSEMBLY MOUNTED FROM CEILING SUPPORTS	1679 lbs	4126 btu	B5150B B5150C	-	LP4	C
24	2		LONGITUDINAL STATIONARY RAIL FOR LATERAL GANTRY INNOVA POSITIONER	68 lbs			B20 04A		C
25	1		INNOVA POSITIONER (REFERENCE TABLE BASE-PLATE DETAIL FOR FLOOR MOUNTING INFORMATION)	1653 lbs	2416 btu	B5150D B5150E B5150F B5150G	---	LC1	C
26	1		INJECTOR HEAD ON TABLE RAIL	15 lbs		B5030A	---	IH	S
27	1		REMOTE CONTROL FOR INJECTOR	4 lbs		B5028		IEC	S
28	1		INJECTOR ELECTRONICS	37 lbs	320 btu	B5028	---	IE	S
29	1		18 IN. MONITOR ON WALL SUPPORT (LATERAL - REFERENCE)	26 lbs	204 btu	C7617B	S18	WBM2	C
30	1		18 IN. MONITOR ON WALL SUPPORT (LATERAL - LIVE)	26 lbs	204 btu	C7617B	S18	WBM3	C
31	1		18 IN. MONITOR ON WALL SUPPORT (AP - REFERENCE)	26 lbs	204 btu	C7617B	S18	WBM4	C
32	1		18 IN. MONITOR ON WALL SUPPORT (AP - REFERENCE)	26 lbs	204 btu	C7617B	S18	WBM5	C
33	1		NURSE WORKSTATION	46 lbs	682 btu		---		-
34	1		LOGIQ I ULTRASOUND UNIT (ON CART)						

50	1	INNOVA MAIN DISCONNECT, REFERENCE JUNCTION POINT 'A' ON SHEET E1 FOR DETAILED DESCRIPTION.	899 lbs	2215 lbu	E4502BH	-	PDB	-
51	6	VITALINO SPEAKER				.		-
52	2	VITALINO MICROPHONE				.		-
53	1	VITALINO CONSOLE			B0566	.		-

INTERVENTIONAL RADIOLOGY (IR) LAB

SCRUB AREA

CONTROL ROOM

EQUIP ROOM

CATHETER CABINET

ANESTHESIA MACHINE

STERILE TABLE

ABLATION DEVICE

ANCILLARY EQUIPMENT

ISO CENTER

CL. TABLE PIVOT

UNIT CL.

NOTE: IF THIS DOOR LEADS INTO AN UNCONTROLLED AREA, A WARNING LIGHT WILL BE REQUIRED

Dimensions:

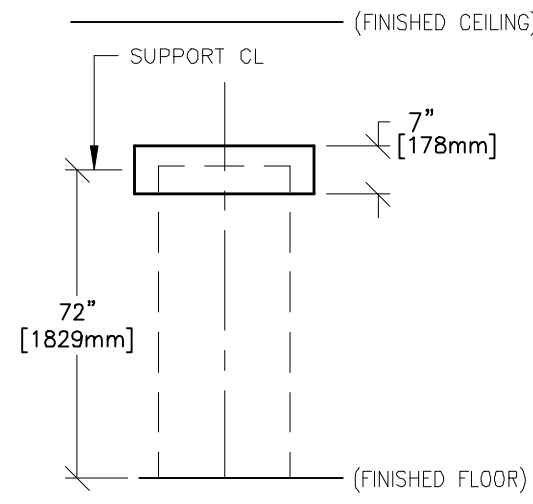
- 12'-0"
- 3'-0"
- 4'-8"
- 2'-4"
- 18'-2"
- 5'-1"
- 12'-0"
- 39'-1"
- 4'-2 5/8"
- 9'-7" (MIN) - 13'-6" (MAX)
- 11'-6"
- 16'-9"
- 5'-3"
- 6'-0"
- 19'-6"
- 25'-0"

Callouts:

- 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100

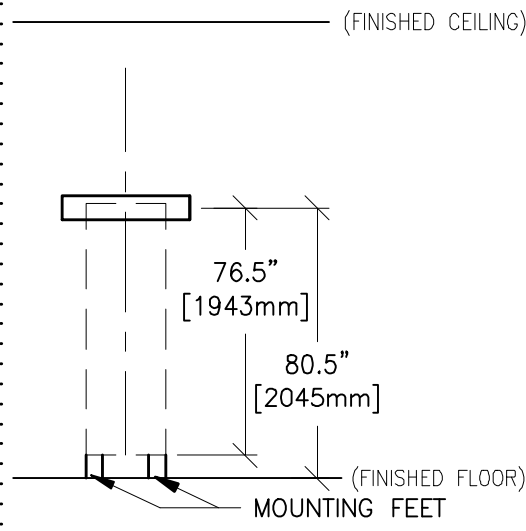
TYPICAL WALL SUPPORT ELEVATIONS

S100



SUPPORT FOR
ATLAS/SYSTEMS CABINET
(NOT TO SCALE)

S120

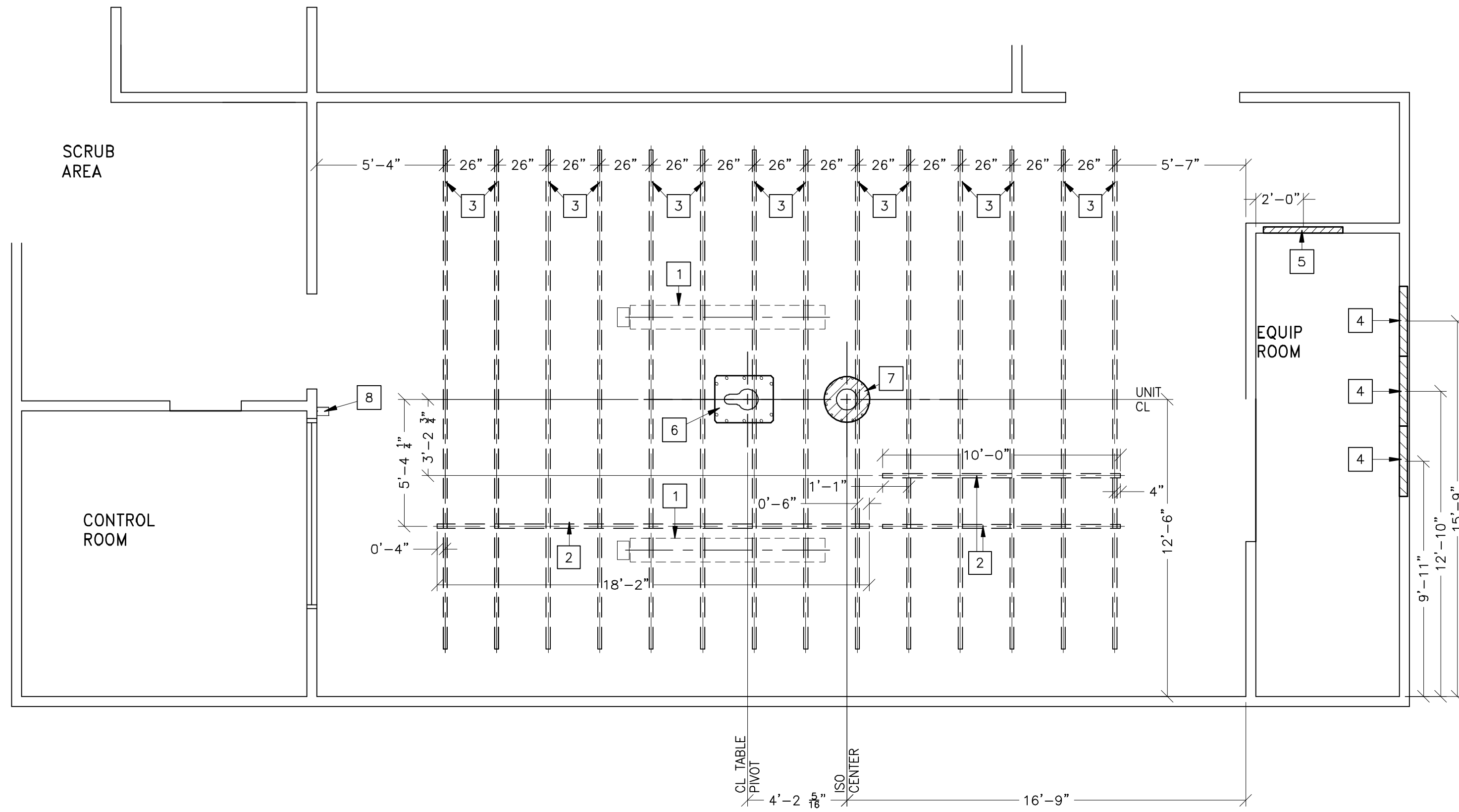


SUPPORT FOR
MAIN DISCONNECT CONTROL
(NOT TO SCALE)

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

STRUCTURAL LAYOUT

RECOMMENDED CEILING HEIGHT = 9'-4 +/– 0.2"



STRUCTURAL SUPPORT METHODS

CUSTOMER/CONTRACTOR SUPPLIED AND INSTALLED ITEMS

ITEM NO.	ITEM DESCRIPTION (* INDICATES EXISTING)
<input type="checkbox"/>	
1	AREA OF RADIATION SHIELD/ INJECTOR TRACK
2	>>COMPONENTS BELOW CEILING<< CABLE DRAPE RAIL, UNISTRUT CAT. NO. CPGE55 OR EQUIVALENT. TO ORDER, CALL UNISTRUT WISCONSIN AT 262-796-8710.
3	UNISTRUT OR EQUIVALENT SUPPORT IN CEILING FOR FASTENING CEILING SUPPORTED EQUIPMENT. 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'-2" AND REQUIRE 430 LBS. (197 LBS. IN SEISMIC REGIONS) PER BOLT LOAD. METHODS OF SUPPORT THAT PERMIT ATTACHMENT TO STRUCTURAL STEEL OR THROUGH BOLTS IN CONCRETE SHOULD BE FAYORED. DO NOT USE SCREW ANCHORS IN DIRECT TENSION.
4	SUPPORT BACKING. LOCATE AS SHOWN. REFER TO ELEVATION DETAIL S100, FOR ATLAS CABINET.
5	SUPPORT BACKING. LOCATE AS SHOWN. REFER TO ELEVATION DETAIL S120, FOR MAIN DISCONNECT CONTROL.
6	AREA OCCUPIED BY GE SUPPLIED TABLE BASEPLATE
7	AREA OCCUPIED BY GE SUPPLIED POSITIONER BASEPLATE
8	MOUNT XR BUZZER BRACKET ON WALL, ABOVE CEILING.

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 FAYORED. 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.
- CUSTOMERS CONTRACTOR MUST PROVIDE ALL PENETRATIONS IN POST TENSION FLOORS.
- CUSTOMERS CONTRACTOR MUST PROVIDE AND INSTALL ANY NON-STANDARD ANCHORING. DOCUMENTS FOR STANDARD ANCHORING METHODS ARE INCLUDED WITH GE EQUIPMENT DRAWINGS FOR GEOGRAPHIC AREAS THAT REQUIRE SUCH DOCUMENTATION.
- CUSTOMERS CONTRACTOR MUST PROVIDE AND INSTALL HARDWARE FOR "THROUGH THE FLOOR" ANCHORING AND/OR ANY BRACING UNDER ACCESS FLOORS. THIS CONTRACTOR MUST ALSO PROVIDE FLOOR DRILLING THAT CANNOT BE COMPLETED BECAUSE OF AN OBSTRUCTION ENCOUNTERED WHILE DRILLING BY THE GE INSTALLER SUCH AS REBAR ETC.

GE Healthcare Technologies



Installation Services Design Center
Milwaukee, Wisconsin

SHEET TITLE: STRUCTURAL LAYOUT

MODALITY TYPE: INNOVA 2121/3131 BIPLANE

THIS PLAN IS SUBMITTED TO SUGGEST LOCATION OF GE HEALTHCARE EQUIPMENT. GE HEALTHCARE MAKES NO WARRANTY, REPRESENTATION OR GUARANTEE 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 ANY OTHER PURPOSES WITHOUT THE WRITTEN APPROVAL OF GE HEALTHCARE. GE HEALTHCARE SHALL NOT BE RESPONSIBLE FOR ANY DAMAGES RESULTING THEREFROM.

INTERVENTIONAL
RADIOLOGY (IR) LAB
TYPICAL LAYOUT

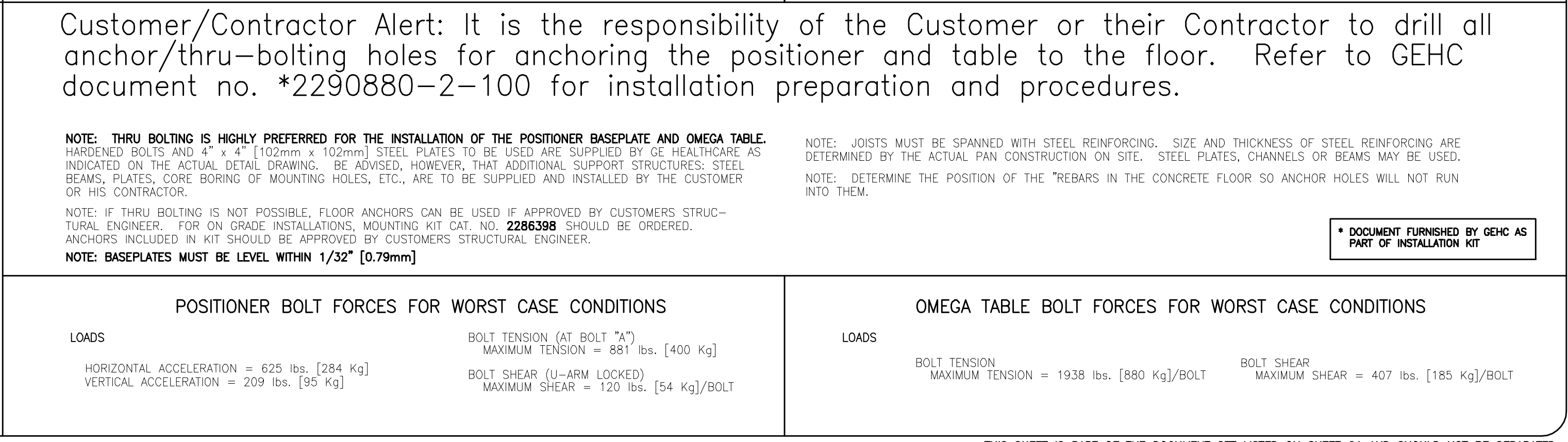
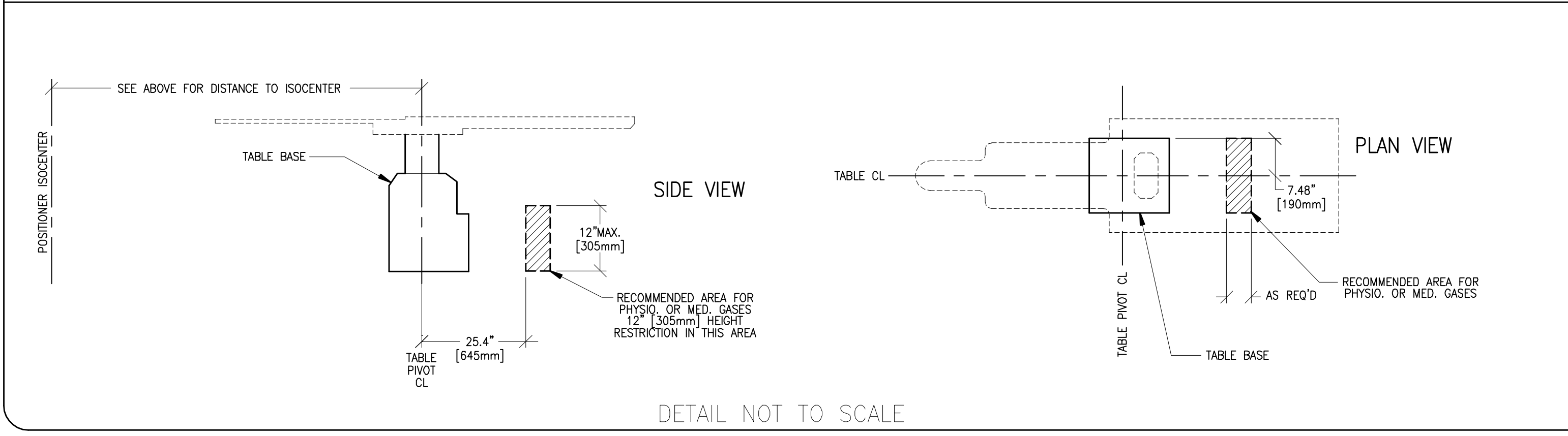
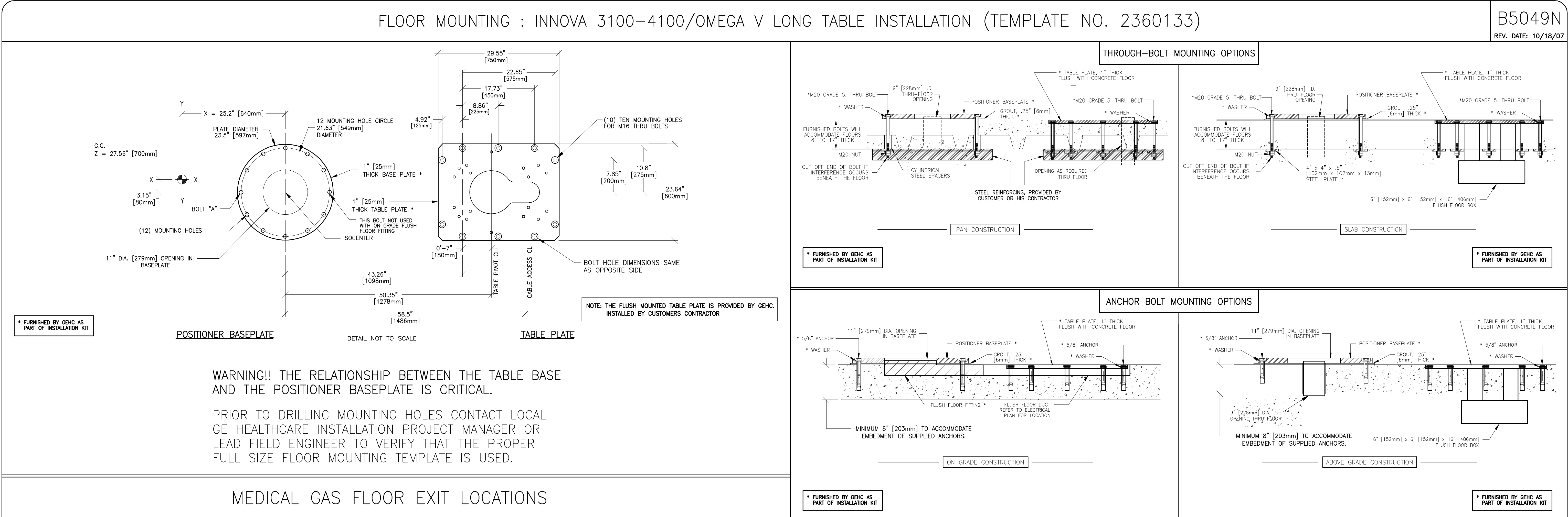
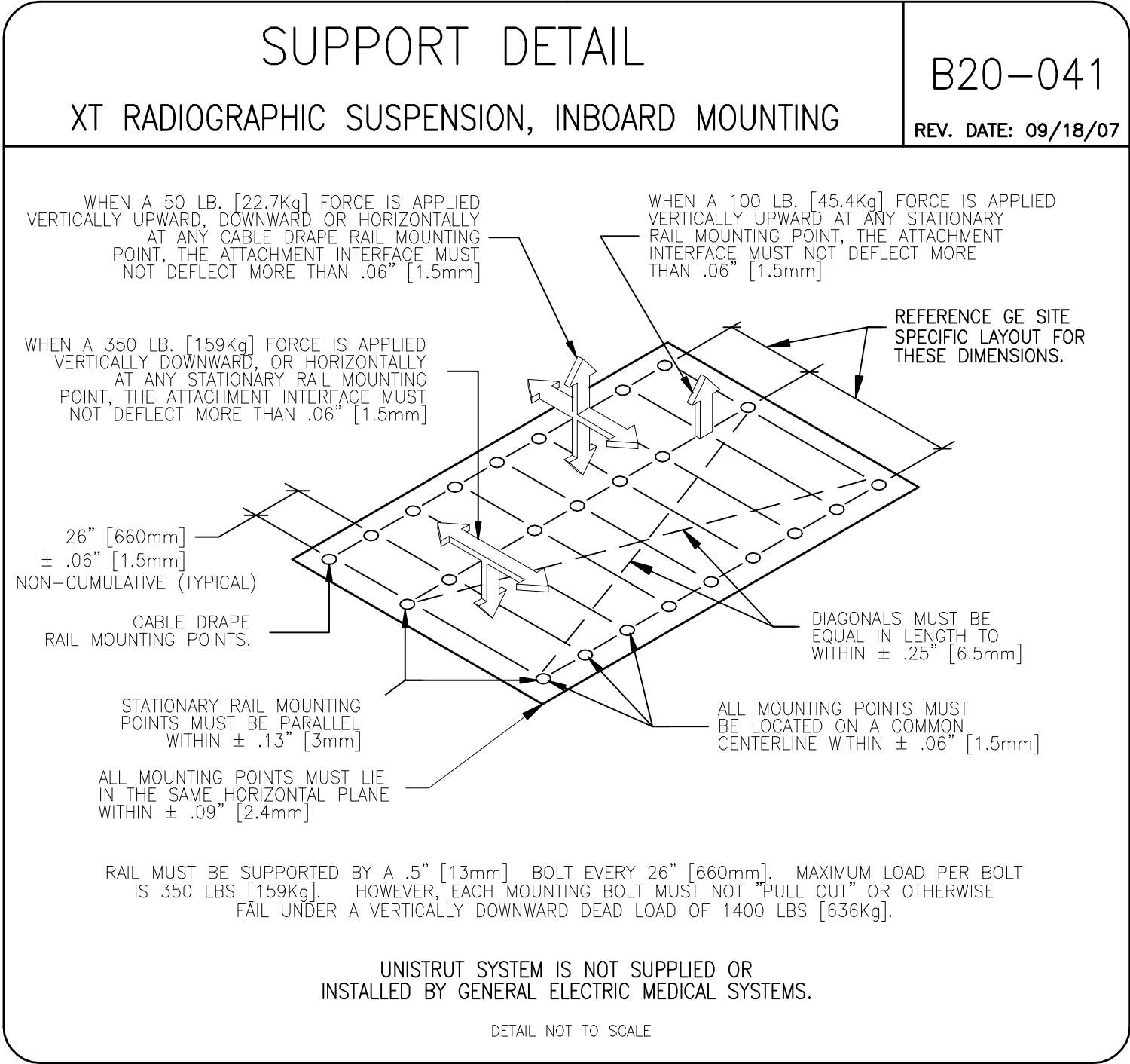
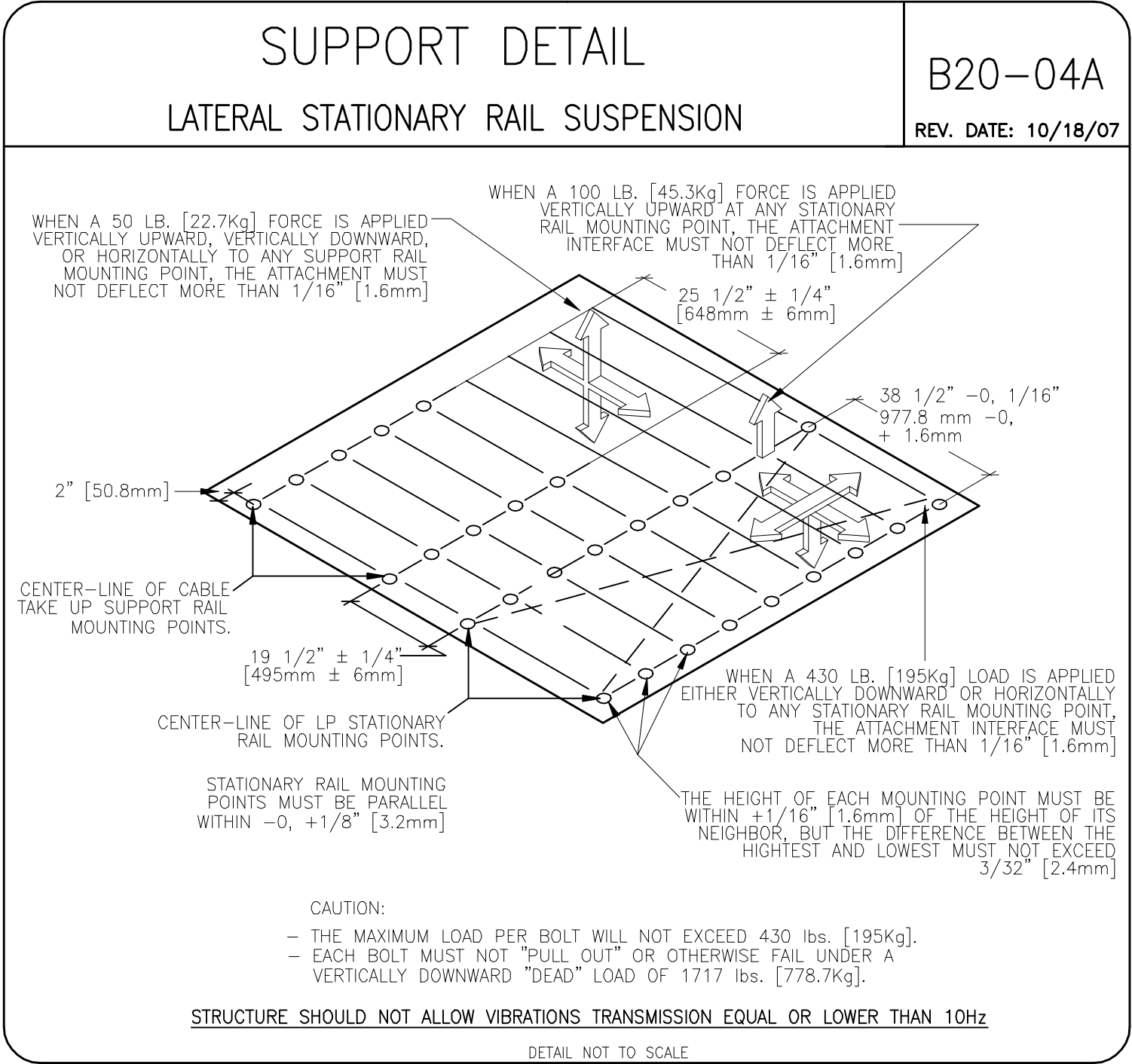
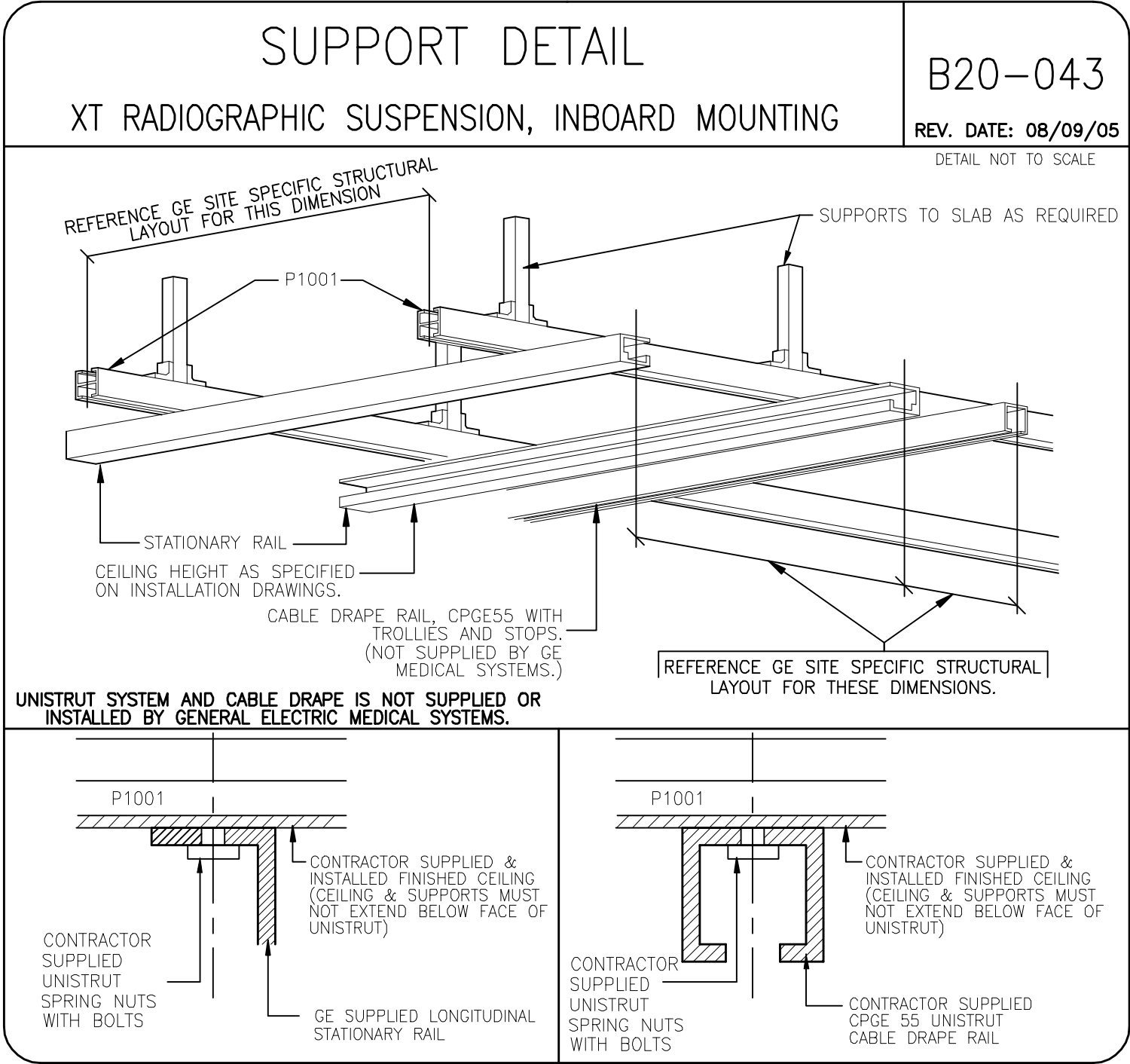
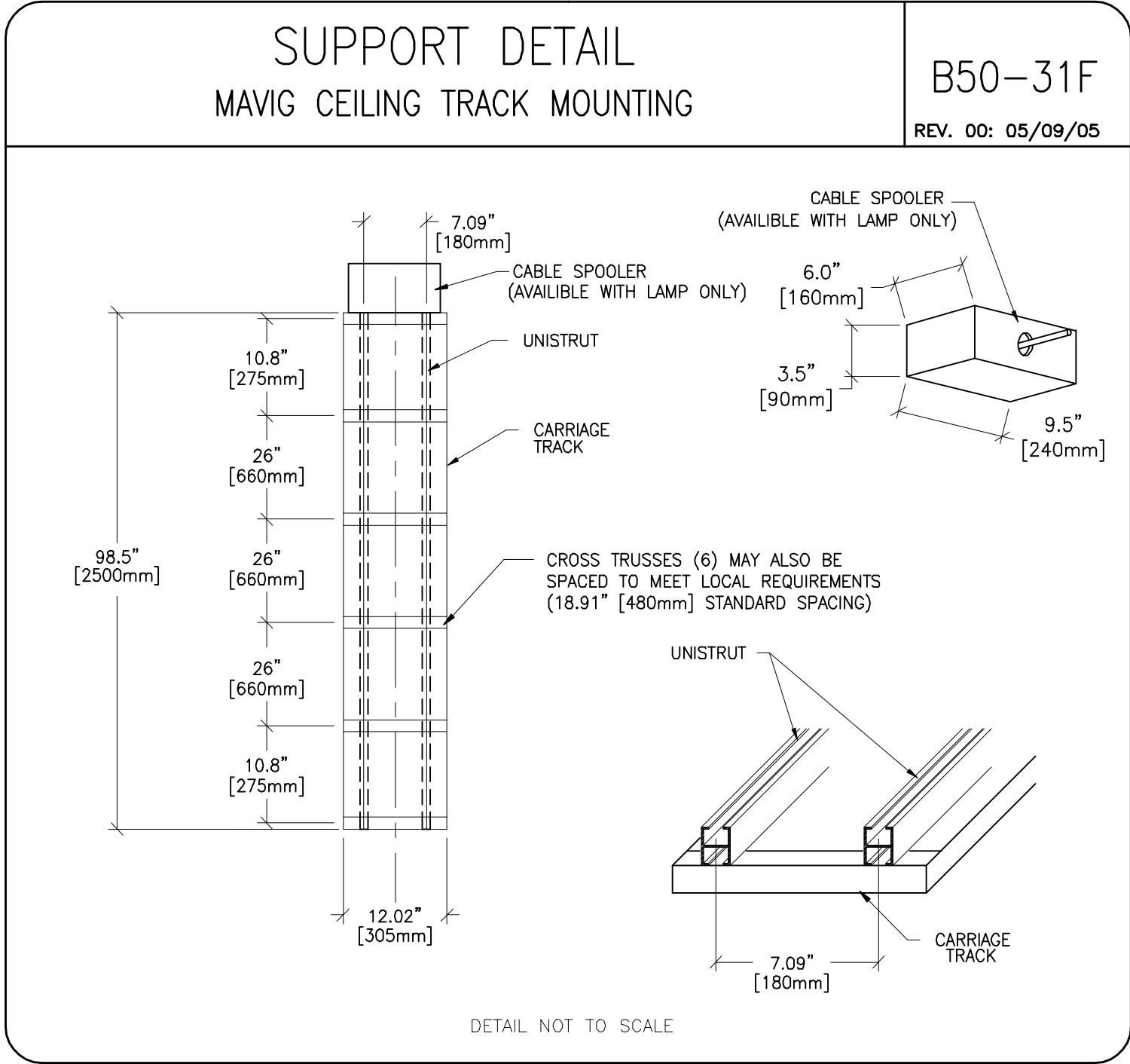
PROJECT TITLE:

PROJECT	REVISION
4-60	00

DATE: 11-18-08
DRAWN BY: LLM
CHECKED BY: TST

REVISION HISTORY:

SHEET
S1



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

ELECTRICAL PLAN

RECOMMENDED CEILING HEIGHT = 9'-4" +/- 0.2"

JUNCTION POINT DESCRIPTIONS

ELECTRICAL OUTLET LEGEND

- CUSTOMER/CONTRACTOR SUPPLIED AND INSTALLED ITEMS. HEIGHT ABOVE FLOOR DETERMINED BY LOCAL CODES UNLESS OTHERWISE SPECIFIED.
- DUPLEX HOSPITAL GRADE, DEDICATED WALL OUTLET 120-V, SINGLE PHASE POWER
 - NETWORK OUTLET (SEE ELECTRICAL DETAILS ELEC-83 AND ELEC-84 OR ELEC-87)
 - 5-15R NEMA RECEPTACLE, DEDICATED OUTLET 120-V, SINGLE PHASE POWER
 - DUPLEX HOSPITAL GRADE, DEDICATED OUTLET 120-V EMERGENCY, SINGLE PHASE POWER, 15A

DUCT HATCHING LEGEND

- ABOVE CEILING DUCT
- UNDER FLOOR DUCT
- TRENCH DUCT (FLUSH FLOOR)
- SURFACE FLOOR DUCT
- ABOVE CEILING CONDUIT
- BELOW FLOOR CONDUIT

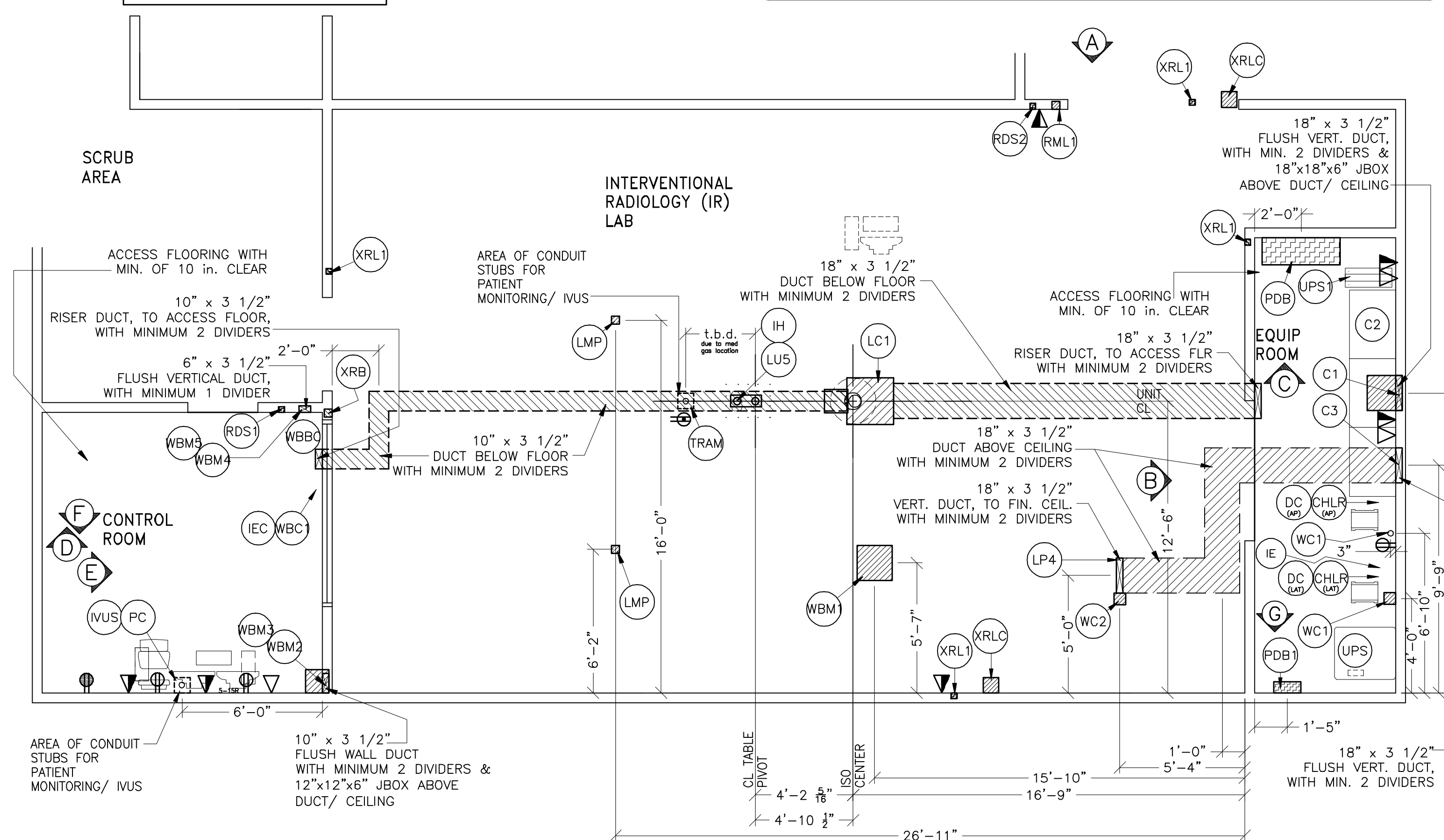
JUNCTION POINT NOTES

- 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.
- CEILING MOUNTED JUNCTION BOXES ILLUSTRATED ON THIS PLAN MUST BE INSTALLED FLUSH WITH FINISHED CEILING.
- 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.
- ALL OPENINGS IN ACCESS FLOORING ARE TO BE CUT OUT AND FINISHED OFF WITH GROMMET MATERIAL BY THE CUSTOMER'S CONTRACTOR.
- GENERAL CONTRACTOR TO INSERT PULL CORDS FOR ALL CABLE RUN CONDUITS BETWEEN THE EQUIPMENT ROOM AND THE OPERATORS CONTROL ROOM.
- 10 FOOT PITGALS AT ALL JUNCTION POINTS.
- ALL WIRING MUST BE THIN OR TFFN STRANDED COPPER THERMOPLASTIC 600 VOLT OR EQUIVALENT INSULATION. ALUMINUM OR SOLID WIRES ARE NOT ALLOWED.
- GROUNDING IS CRITICAL TO EQUIPMENT FUNCTION AND PATIENT SAFETY. SITE MUST CONFORM TO WIRING SPECIFICATIONS SHOWN ON THIS PLAN.

CONTACT YOUR LOCAL CARDIO VASCULAR PROJECT MANAGER, INSTALLATIONS (CVPM) FOR ANY MODIFICATIONS TO ROOM LAYOUT.

BEFORE PROCEEDING WITH INSTALLATION OF CEILING MOUNTED FIXTURES, PLEASE REFER TO STRUCTURAL SHEET S1 FOR LOCATIONS OF UNISTRUT AND OTHER STRUCTURAL SUPPORTED EQUIPMENT IN CEILING.

NOTE: SUGGESTION THAT COLOR CODED PHASE CABLING BE USED EITHER BY COLORED WIRES OR COLORED TAPE.



CONDUIT RUNS: INNOVA BIPLANE 2121/ 3131

CNDS. REQ'D. FOR BASE SYSTEM (LATERAL PLANE) (CONDUITS ARE LOCATED ABOVE CEILING)	
WC2	TO WC1 ONE EMPTY 3" CND. (FOR WATER LINES) (LOCATED ABOVE CEILING)

CONDUITS REQUIRED FROM POINT "XRLC" (CONDUITS ARE LOCATED ABOVE CEILING)

XRL1	TO PDB ONE 1/2" CND.
RML1	TO PDB ONE 1/2" CND.
XRLC	TO PDB ONE 1/2" CND.
XRLC	TO 120-V 15A POWER ONE 1/2" CND. AS REQ'D

CONDUITS REQUIRED FROM POINT "WBC" (CONDUITS ARE LOCATED BELOW FLOOR)

WBC1	TO LUS ONE 2 1/2" CND.
------	------------------------

CONDUITS REQUIRED FROM POINT "XRB" (CONDUITS ARE LOCATED ABOVE CEILING)

XRB	TO POWER STRIP IN CONTROL AREA ONE 1/2" CND.
-----	--

CONDUITS REQUIRED FROM POINT "LMP" (CONDUITS ARE LOCATED ABOVE CEILING)

LMP	TO 120-V 15A CND. AS REQ'D
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CONDUITS REQUIRED FROM POINT "WBM1" (CONDUITS ARE LOCATED ABOVE CEILING)

WBM1	TO C1 TWO 2 1/2" CNDs. -OR- FOR MAXIMUM OF 4 MONITORS
WBM1	TO C1 FOUR 2 1/2" CNDs. -OR- FOR MAXIMUM OF 8 MONITORS
WBM1	TO WBC1 ONE 2 1/2" CND.

CONDUITS REQUIRED FROM POINT "WC" (CONDUIT IS LOCATED IN OR BELOW FLOOR)

WC	TO LC1 ONE EMPTY 3" CND. (FOR WATER LINES) (RUN TO 12x12" BOX AT LC1)
----	---

CONDUIT RUNS, CONTINUED:

CONDUITS REQUIRED FOR "SKYTORN LAMP" (CONDUITS ARE LOCATED ABOVE CEILING)	
SL	TO SL ONE 3/4" CND.
SL	TO SCB ONE 3/4" CND.
SCB	TO SWC ONE 3/4" CND.
SWC	TO 120-V 15A POWER ONE 3/4" CND. AS REQ'D

CONDUITS REQUIRED FOR AN "INJECTOR" (CONDUITS ABOVE CEILING OR BELOW FLOOR)

IE	TO IH ONE 2 1/2" CND.
IE	TO IEC ONE 2 1/2" CND.

CONDUIT RUNS, CONTINUED:

CONDUITS REQUIRED FROM POINT "PDB" (CONDUITS ABOVE CEILING OR BELOW FLOOR)	
PDB	TO UPS1 EXTERNALLY CONNECTED
PDB	TO UPS TWO CNDs. AS REQ'D.
PDB	TO RDS1 ONE 1/2" CND.
PDB	TO RDS2 ONE 1/2" CND.
PDB	TO C1 ONE CND. AS REQ'D. FOR TWO CUSTOMER SUPPLIED POWER/ GROUND RUNS (JED/ CHLR).
PDB	TO C1 ONE 1 1/2" CND. FOR TWO GE SUPPLIED SIGNAL CABLES
PDB	TO C2 ONE CND. AS REQ'D. FOR ONE CUSTOMER SUPPLIED POWER/ GROUND RUN
PDB	TO C2 ONE 1 1/2" CND. FOR SIGNAL CABLES (RML1, XRL1, XRLC)
PDB	TO C3 ONE CND. AS REQ'D. FOR TWO CUSTOMER SUPPLIED POWER/ GROUND RUNS
PDB	TO LUS (TABLE POWER) RUN IN DUCT/ CONDUIT SYSTEM
PDB	TO PDB1 CONDUIT AS REQUIRED
PDB1	TO 480-V 3" POWER CONDUIT AS REQUIRED
PDB	TO IE (INJECTOR POWER) CONSULT MFG. (RUN IN DUCT/ CONDUIT SYSTEM)

CONDUITS REQUIRED FROM ROOM INTERLOCK (CONDUITS ARE LOCATED ABOVE CEILING)

ROOM INTERLOCK	TO C2 CND. AS REQ'D. (ONLY IF REQUIRED BY LOCAL CODE)
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CONDUIT RUNS: PHYSIO MONITORING/ IVUS (BY GE)

CONDUITS REQUIRED FOR CARDIO LAB	
PC/IVUS	TO WBM1 ONE 3" CND. (LOCATED ABOVE CEILING)
PC/IVUS	TO TRAM ONE 3" CND. (LOCATED IN/BELOW FLOOR)
IVUS	TO TRAM ONE 3" CND. (LOCATED IN/BELOW FLOOR)

A COMPLETE REVIEW OF ELECTRICAL OPTIONS MUST BE DISCUSSED WITH YOUR GE PROJECT MANAGER OF INSTALLATIONS, BEFORE BIDDING BEGINS.

FEEDER TABLE	
* CALCULATIONS BASED UPON NOMINAL VOLTAGE, WIRE SIZE IN AWG, * RECOMMENDED FEEDER SIZES FROM DIST. TRANS. TO ROOM DISCONNECT. CALCULATIONS ARE AT NOMINAL VOLTAGE BASED UPON 1/0 WIRE SIZE FROM ROOM DISCONNECT TO POWER CABINET WITH A MAXIMUM RUN OF 25 FT. * NEUTRAL MUST BE TERMINATED INSIDE THE MAIN DISCONNECT PANEL AND NOT AT ANY GE CABINET. * THE DISCONNECTING CONDUCTOR (C) MUST BE A 2 AWG MINIMUM. THIS GROUND WILL RUN FROM THE EQUIPMENT BACK TO THE POWER SOURCE/MAIN GROUNDING POINT AND ALWAYS TRAVEL IN THE SAME CONDUIT WITH THE FEEDER AND NEUTRAL. * MINIMUM WIRE SIZE FOR CIRCUIT BREAKER, BASED ON RECOMMENDED OVERCURRENT PROTECTION. * FOR A FULL SYSTEM UPS, REFER TO ELECTRICAL DETAILS FOR UPS FEEDER WIRES. * IF THE FEEDER IS BIGGER THAN 3/0, THE HOSPITAL MUST PROVIDE AND INSTALL A REDUCTION BOX	
RUN LENGTH IN FEET	POWER SUPPLY VOLTAGE
324-396 360	342-418 380
360-440 400	378-462 420
400-480 440	396-484 440
440-520 480	414-506 460
520-600 480	432-528 480
600-680 480	450-540 480
680-760 480	468-558 480
760-840 480	486-576 480
840-920 480	504-594 480
920-1000 480	522-612 480
1000-1080 480	540-630 480
1080-1160 480	558-648 480
1160-1240 480	576-666 480
1240-1320 480	594-684 480
1320-1400 480	612-702 480
1400-1480 480	630-720 480
1480-1560 480	648-738 480
1560-1640 480	666-756 480
1640-1720 480	684-774 480
1720-1800 480	702-792 480
1800-1880 480	720-810 480
1880-1960 480	738-828 480
1960-2040 480	756-846 480
2040-2120 480	774-864 480
2120-2200 480	792-882 480
2200-2280 480	810-900 480
2280-2360 480	828-918 480
2360-2440 480	846-936 480
2440-2520 480	864-954 480
2520-2600 480	882-972 480
2600-2680 480	900-990 480
2680-2760 480	918-1008 480
2760-2840 480	936-1026 480
2840-2920 480	954-1044 480
2920-3000 480	972-1062 480
3000-3080 480	990-1080 480
3080-3160 480	1008-1098 480
3160-3240 480	1026-1116 480
3240-3320 480	1044-1134 480
3320-3400 480	1062-1152 480
3400-3480 480	1080-1170 480
3480-3560 480	1098-1188 480
3560-3640 480	1116-1206 480
3640-3720 480	1134-1224 480
3720-3800 480	1152-1242 480
3800-3880 480	1170-1260 480
3880-3960 480	1188-1278 480
3960-4040 480	1206-1296 480
4040-4120 480	1224-1314 480
4120-4200 480	1242-1332 480
4200-4280 480	1260-1350 480
4280-4360 480	1278-1368 480
4360-4440 480	1296-1386 480
4440-4520 480	1314-1404 480
4520-4600 480	1332-1422 480
4600-4680 480	1350-1440 480
4680-4760 480	1368-1458 480
4760-4840 480	1386-1476 480
4840-4920 480	1404-1494 480
4920-5000 480	1422-1512 480
5000-5080 480	1440-1530 480
5080-5160 480	1458-1548 480
5160-5240 480	1476-1566 480
5240-5320 480	1494-1584 480
5320-5400 480	1512-1602 480
5400-5480 480	1530-1620 480
5480-5560 480	1548-1638 480
5560-5640 480	1566-1656 480
5640-5720 480	1584-1674 480
5720-5800 480	1602-1692 480
5800-5880 480	1620-1710 480
5880-5960 480	1638-1728 480
5960-6040 480	1656-1746 480
6040-6120 480	1674-1764 480
6120-6200 480	1692-1782 480
6200-6280 480	1710-1800 480
6280-6360 480	1728-1818 480
6360-6440 480	1746-1836 480
6440-6520 480	1764-1854 480
6520-6600 480	1782-1872 480
6600-6680 480	1800-1890 480
6680-6760 480	1818-1908 480
6760-6840 480	1836-1926 480
6840-6920 480	1854-1944 480
6920-7000 480	1872-1962 480
7000-7080 480	1890-1980 480
7080-7160 480	1908-1998 480
7160-7240 480	1926-2016 480
7240-7320 480	1944-2034 480
7320-7400 480	1962-2052 480
7400-7480 480	1980-2070 480
7480-7560 480	1998-2088 480
7560-7640 480	2016-2106 480
7640-7720 480	2034-2124 480
7720-7800 480	2052-2142 480
7800-7880 480	2070-2160 480
7880-7960 480	2088-2178 480
7960-8040 480	2106-2196 480
8040-8120 480	2124-2214 480
8120-8200 480	2142-2232 480
8200-8280 480	2160-2250 480
8280-8360 480	2178-2268 480
8360-8440 480	2196-2286 480
8440-8520 480	2214-2304 480
8520-8600 480	2232-2322 480
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8680-8760 480	2268-2358 480
8760-8840 480	2286-2376 480
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9080-9160 480	2358-2448 480
9160-9240 480	2376-2466 480
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9400-9480 480	2430-2520 480
9480-9560 480	2448-2538 480
9560-9640 480	2466-2556 480
9640-9720 480	2484-2574 480
9720-9800 480	2502-2592 480
9800-9880 480	2520-2610 480
9880-9960 480	2538-2628 480
9960-10000 480	2556-2646 480

CONTRACTOR SUPPLIED AND INSTALLED WIRING

ELECTRICAL CONTRACTOR SHALL RING OUT AND TAG ALL WIRES AT BOTH ENDS.

WIRE RUN, FROM - TO	QUANTITY, WIRE SIZE/COLOR
3 PHASE > PDB1	REFER TO FEEDER TABLE
PDB1 > PDB	REFER TO FEEDER TABLE
PDB > C1 (JED1)	3-NO. 1 BLACK, 1-NO. 1 GREEN
PDB > C2 (JED1)	3-NO. 8 BLACK, 1-NO. 8 GREEN
PDB > C3 (JED1)	3-NO. 1 BLACK, 1-NO. 1 GREEN
PDB > CHLR(LAT)	3-NO. 10 BLACK, 1-NO. 10 GREEN
PDB > RDS1	3-NO. 10 BLACK, 1-NO. 10 GREEN
PDB > RDS2	2-NO. 14 BLACK, 2-NO. 14 WHITE, 1-NO. 14 GREEN
PDB > XRLC	2-NO. 14 BLACK, 2-NO. 14 WHITE, 1-NO. 14 GREEN
PDB > XRL1	1-NO. 14 BLACK, 1-NO. 14 WHITE, 1-NO. 14 GREEN
PDB > RML1	1-NO. 14 BLACK, 1-NO. 14 WHITE, 1-NO. 14 GREEN
PDB > UPS	6-NO. 6 BLACK, 2-NO. 6 WHITE
PDB > UPS	2-NO. 4 GREEN
XRLC > 1 PHASE	1-NO. 14 BLACK, 1-NO. 14 WHITE, 1-NO. 14 GREEN
LMP > 120V	2-NO. 14 BLACK, 1 NO. 14 GREEN

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

GE Healthcare Technologies

Installation Services Design Center



SHEET TITLE: ELECTRICAL LAYOUT

MODALITY TYPE: INNOVA 2121/3131 BIPLANE

THIS PLAN IS SUBMITTED TO SUGGEST LOCATION OF GE HEALTHCARE EQUIPMENT. IT IS NOT TO BE USED FOR CONSTRUCTION. IN PREPARING THIS PLAN, EVERY EFFORT HAS BEEN MADE TO CONFORM TO THE DETAILS OF THE EQUIPMENT. TO THE EXTENT POSSIBLE, THE COMPANY CANNOT ACCEPT RESPONSIBILITY FOR ANY DAMAGES RESULTING THEREFROM.

INTERVENTIONAL RADIOLOGY (IR) LAB

TYPICAL LAYOUT

PROJECT TITLE:

PROJECT REVISION

4-60 00

DATE: 11-18-08

DRAWN BY: LLM

CHECKED BY: TST

REVISION HISTORY:

SHEET

E1

INTERCONNECT DIAGRAM

UPDATED: 11/08/07

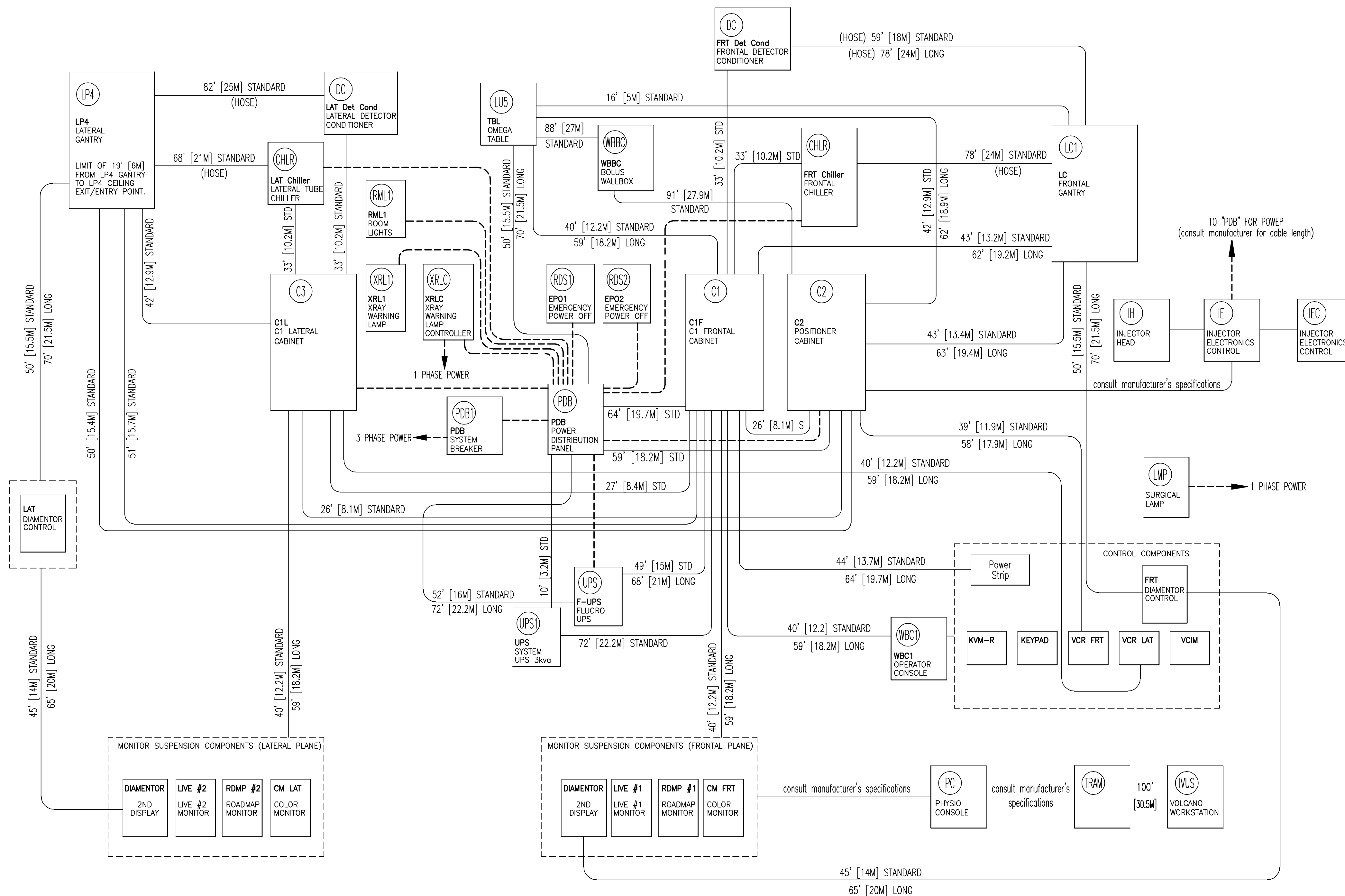


DIAGRAM KEY

----- CUSTOMER/CONTRACTOR SUPPLIED WIRING. ROUTE IN
ADEQUATE CONDUIT OR RACEWAY.

_____ GE FURNISHED CABLE RUNS. ROUTE IN EMPTY
CONDUIT OR RACEWAY.

POWER SPECIFICATIONS

INNOVA BIPLANE SYSTEMS

REV. DATE: 10/22/07

VOLTAGE PRIMARY SOURCE IS REQUIRED FOR ALL INSTALLATIONS.
RANGE OF LINE VOLTAGES :
NOMINAL LINE VOLTAGE OF 360 TO 480, 3 PHASE, 50 OR 60 Hz

REQUIRED POWER SUPPLY: WYE DISTRIBUTION

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)	
		MAX. MOMENTARY	CONTINUOUS
360	324–396	289	32
380	342–418	274	31
400	360–440	260	29
420	378–462	248	28
440	396–484	236	26
460	414–506	226	25
480	432–528	217	24

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-BALANCE. 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 = 20KVA. (MAX DEMAND = 171 KVA)

TABLE B
MAXIMUM
MOMENTARY
POWER
DEMAND.

DEMAND	INNOVA JEDI
kVa * POWER FACTOR AT	180 0.9
mA	1250
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**

ELECTRICAL NOTES

- NOTE 1: ALL WIRES SPECIFIED SHALL BE COPPER, STRANDED, FLEXIBLE, THERMO-PLASTIC, COLOR CODED, CUT 10 FOOT LONG AT OUTLET BOXES, DUCT TERMINATION POINTS OR STUBBED CONDUIT ENDS.
ALL CONDUCTORS, POWER, SIGNAL AND GROUND, MUST BE RUN IN A CONDUIT OR DUCT SYSTEM. ELECTRICAL CONTRACTOR SHALL RING OUT AND TAG ALL WIRES AT BOTH ENDS. WIRE RUNS MUST BE CONTINUOUS COPPER STRANDED AND FREE FROM SPLICES. **ALUMINUM OR SOLID WIRES ARE NOT ALLOWED.**
- 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., MUST RUN DIRECT AS POSSIBLE OTHERWISE 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 CUSTOMERS 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.

SHEET TITLE: ELECTRICAL SPECIFICATIONS

MODALITY TYPE: INNOVA 2121/3131 BIPLANE

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.

PROJECT TITLE:

INTERVENTIONAL RADIOLOGY (IR) LAB TYPICAL LAYOUT

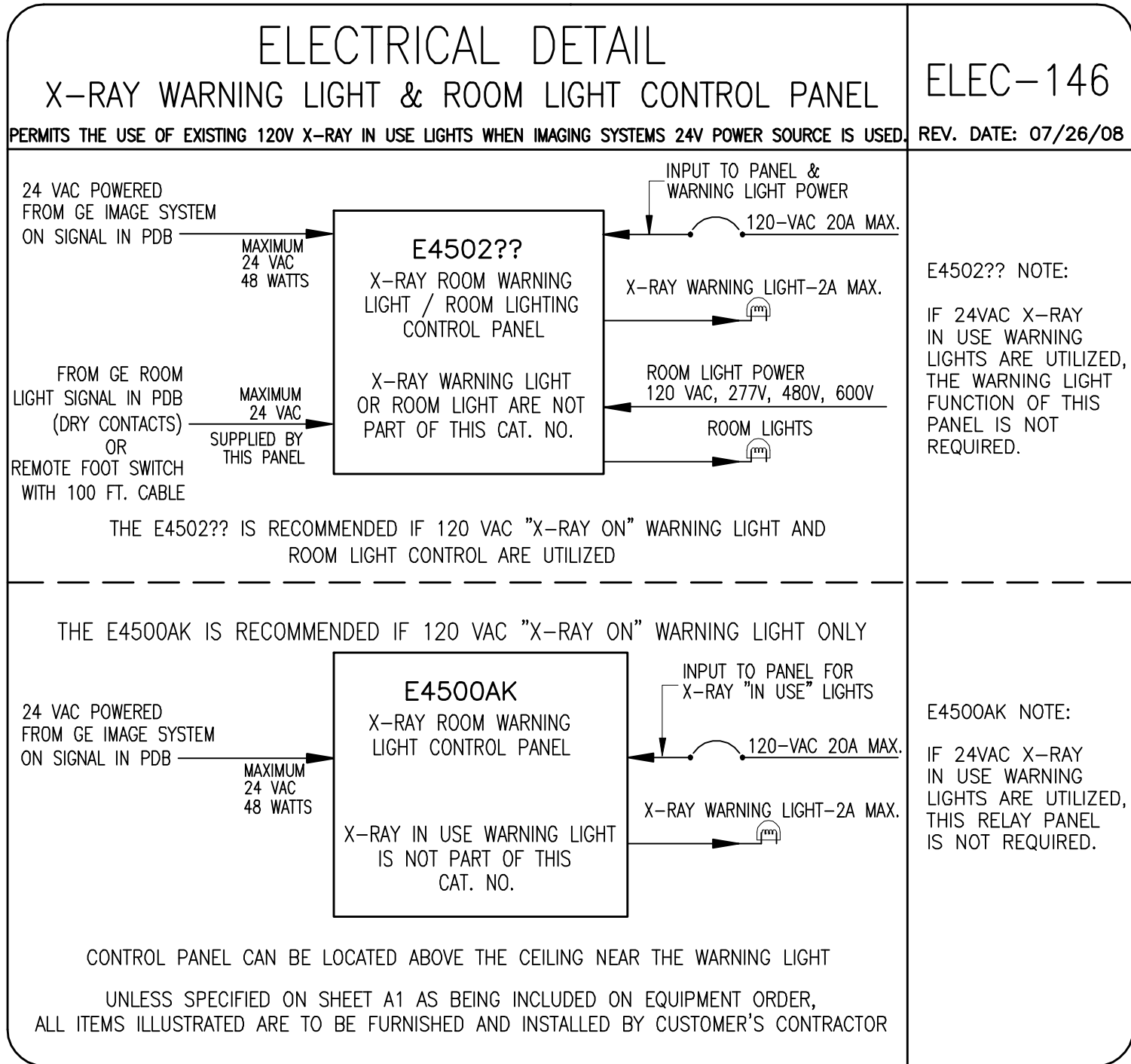
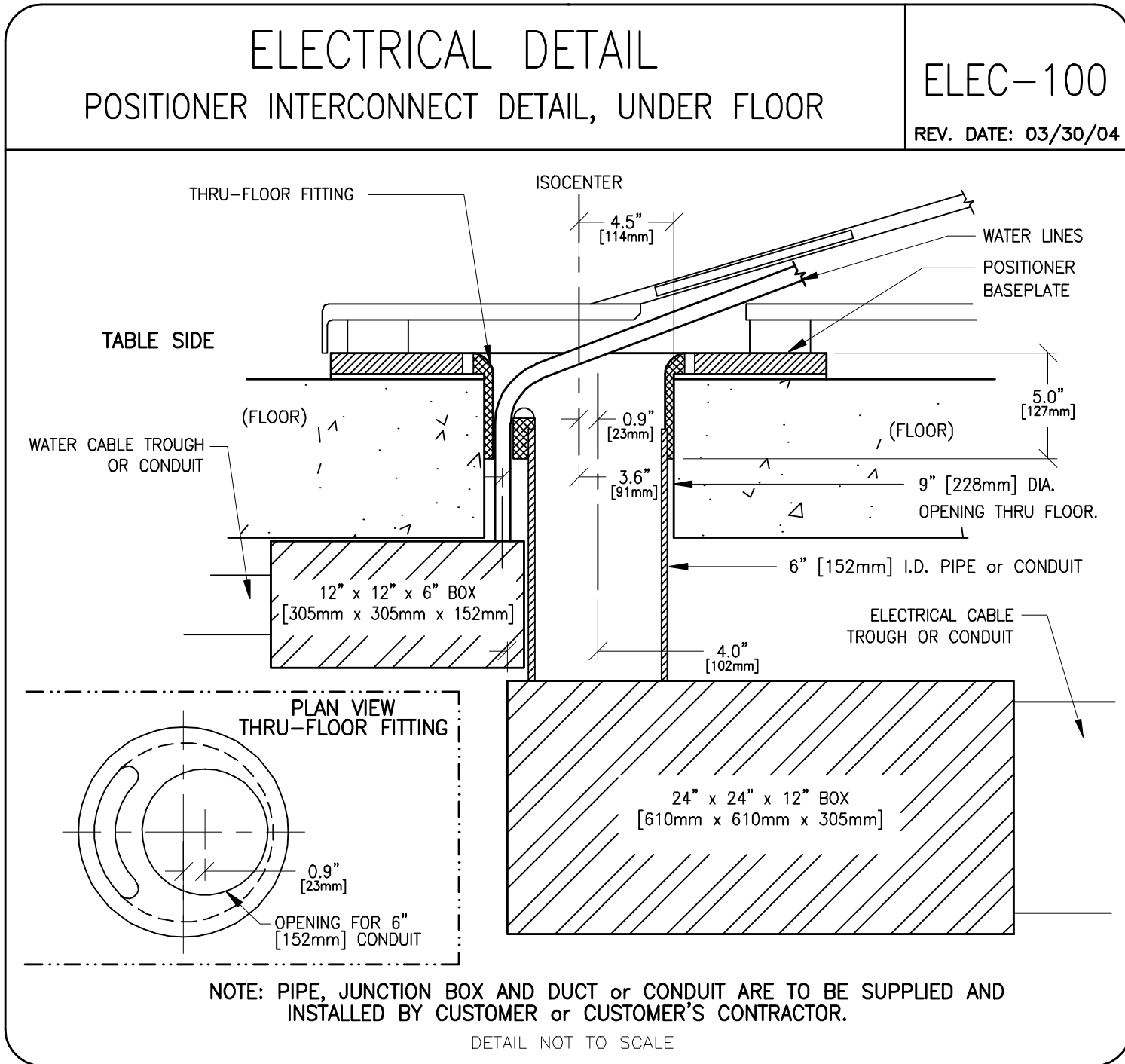
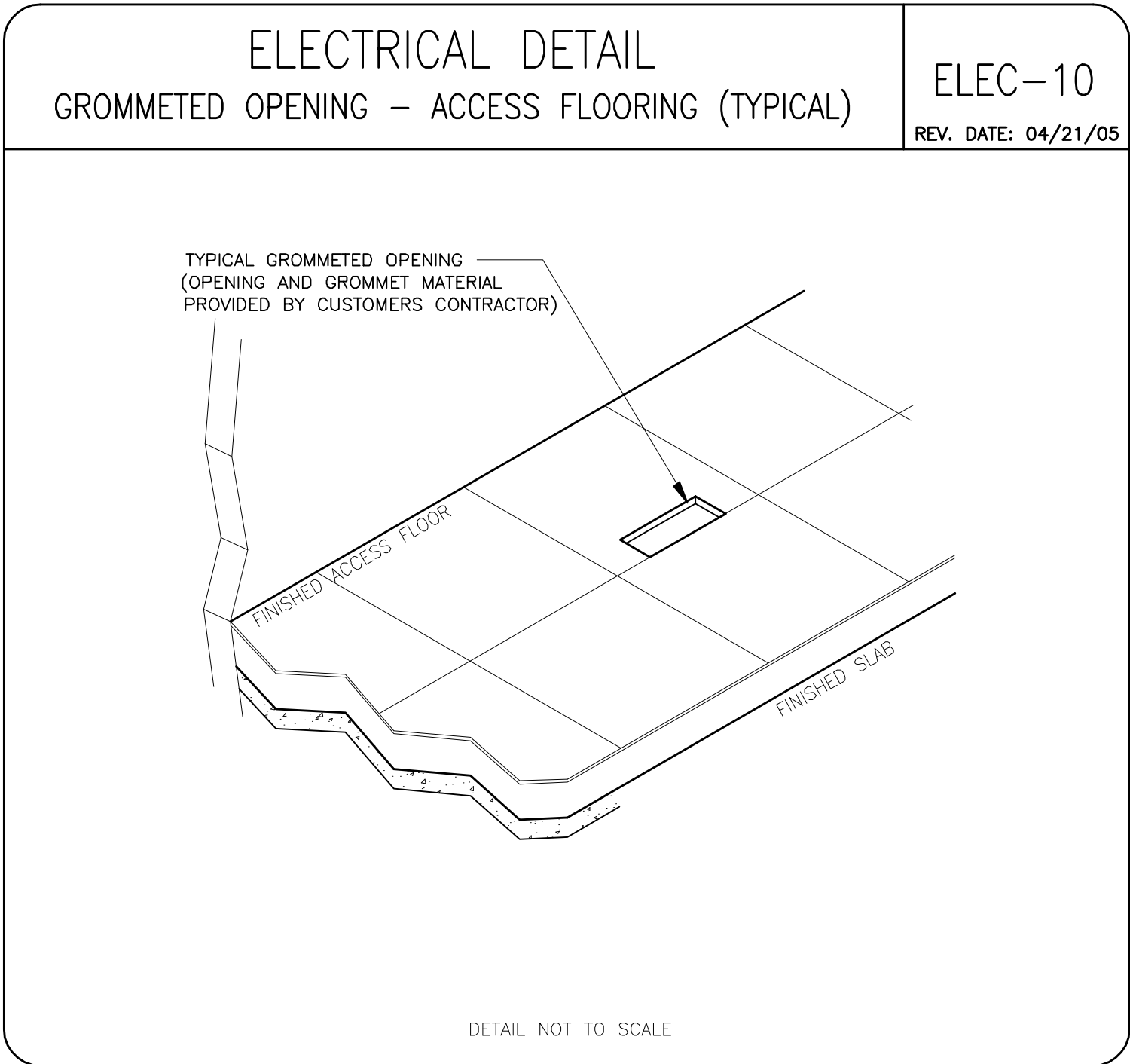
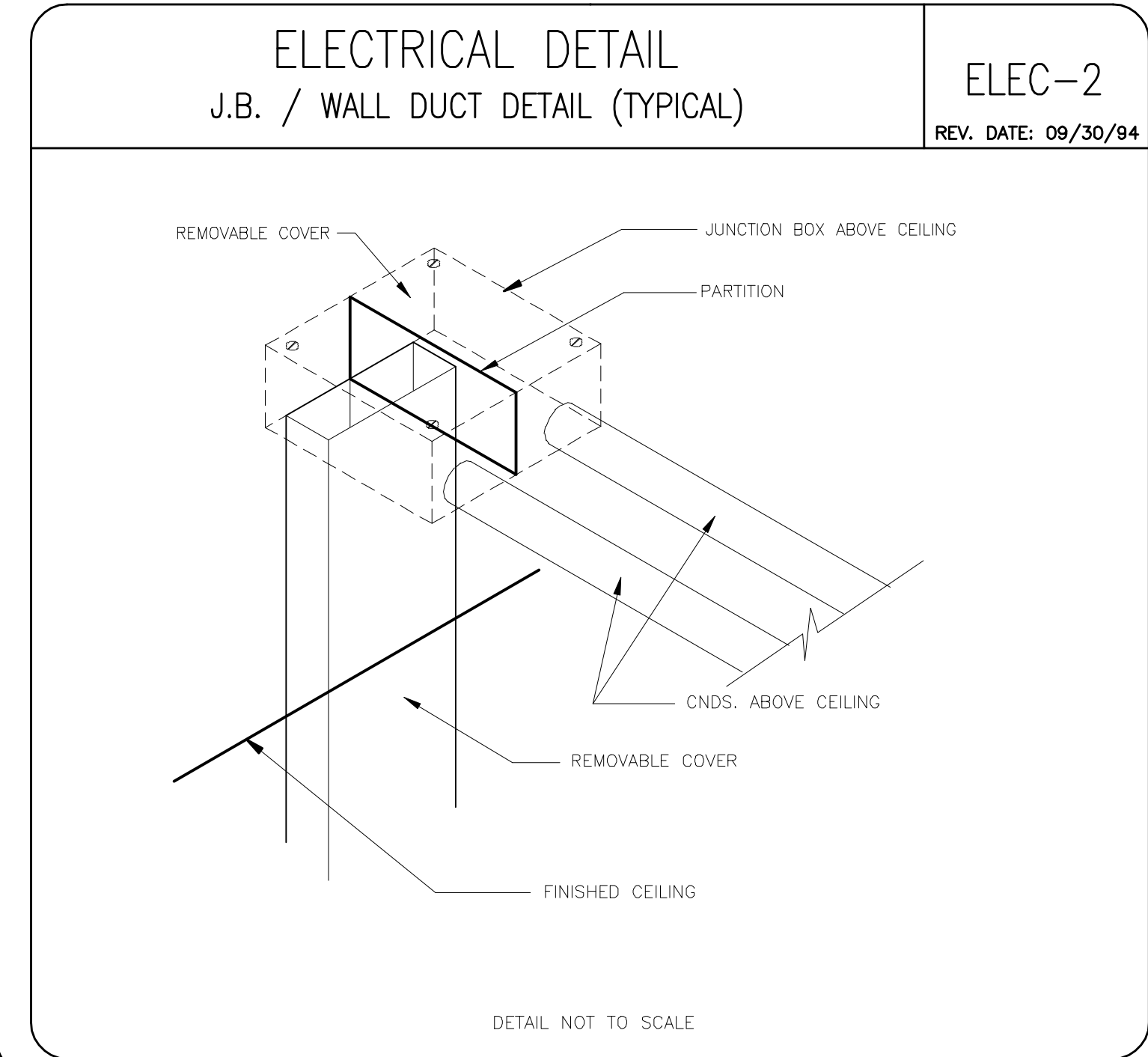
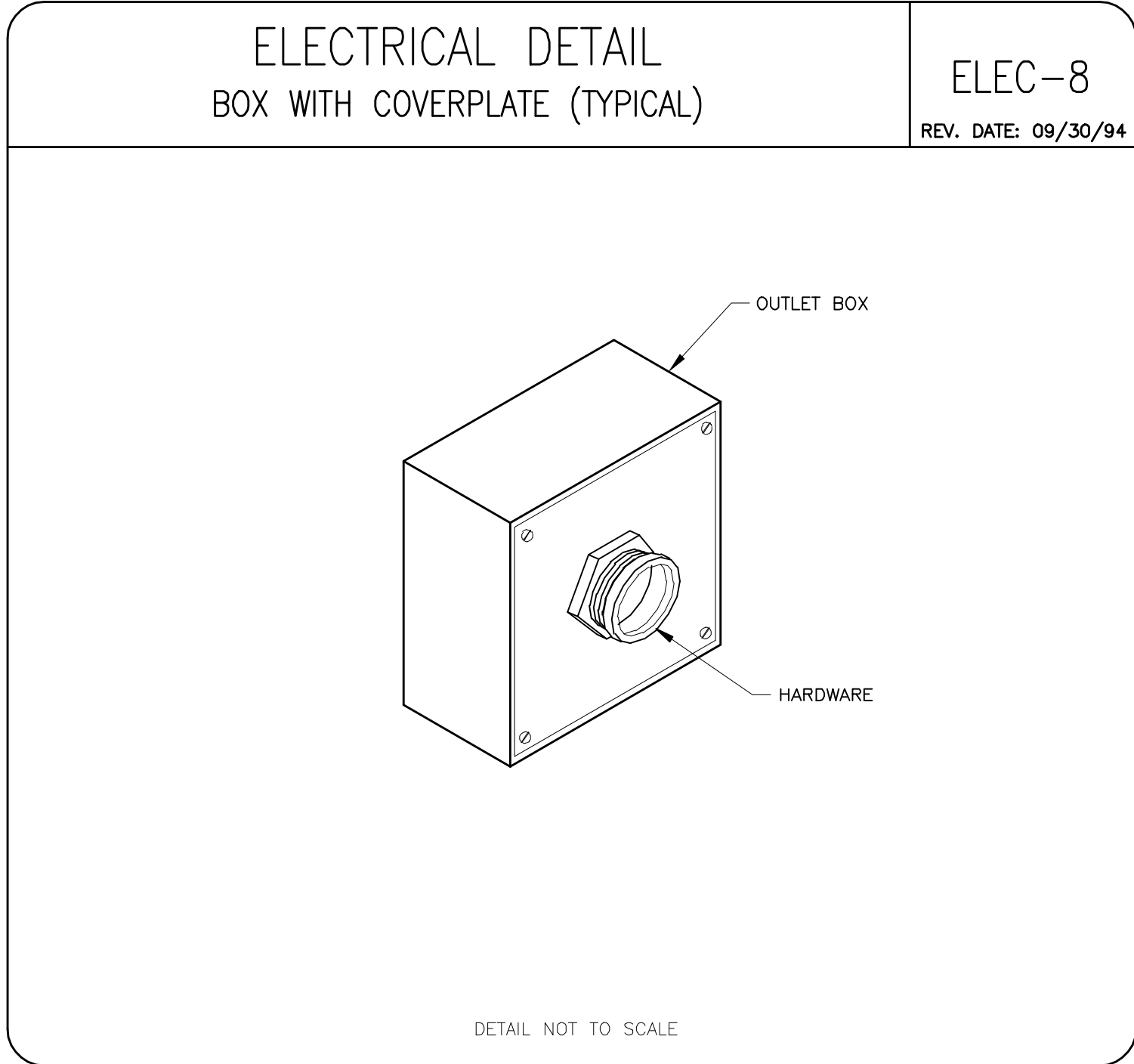
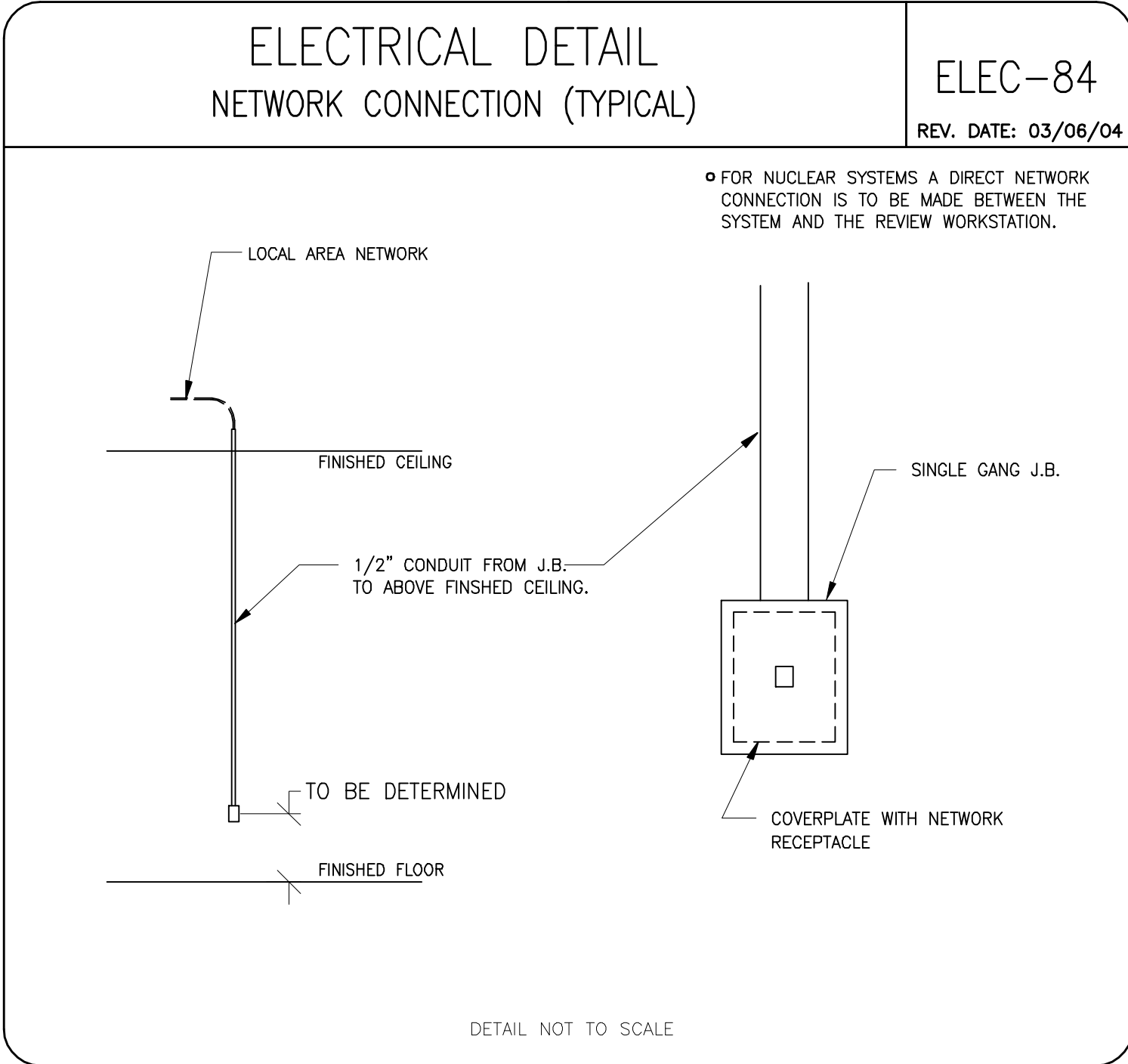
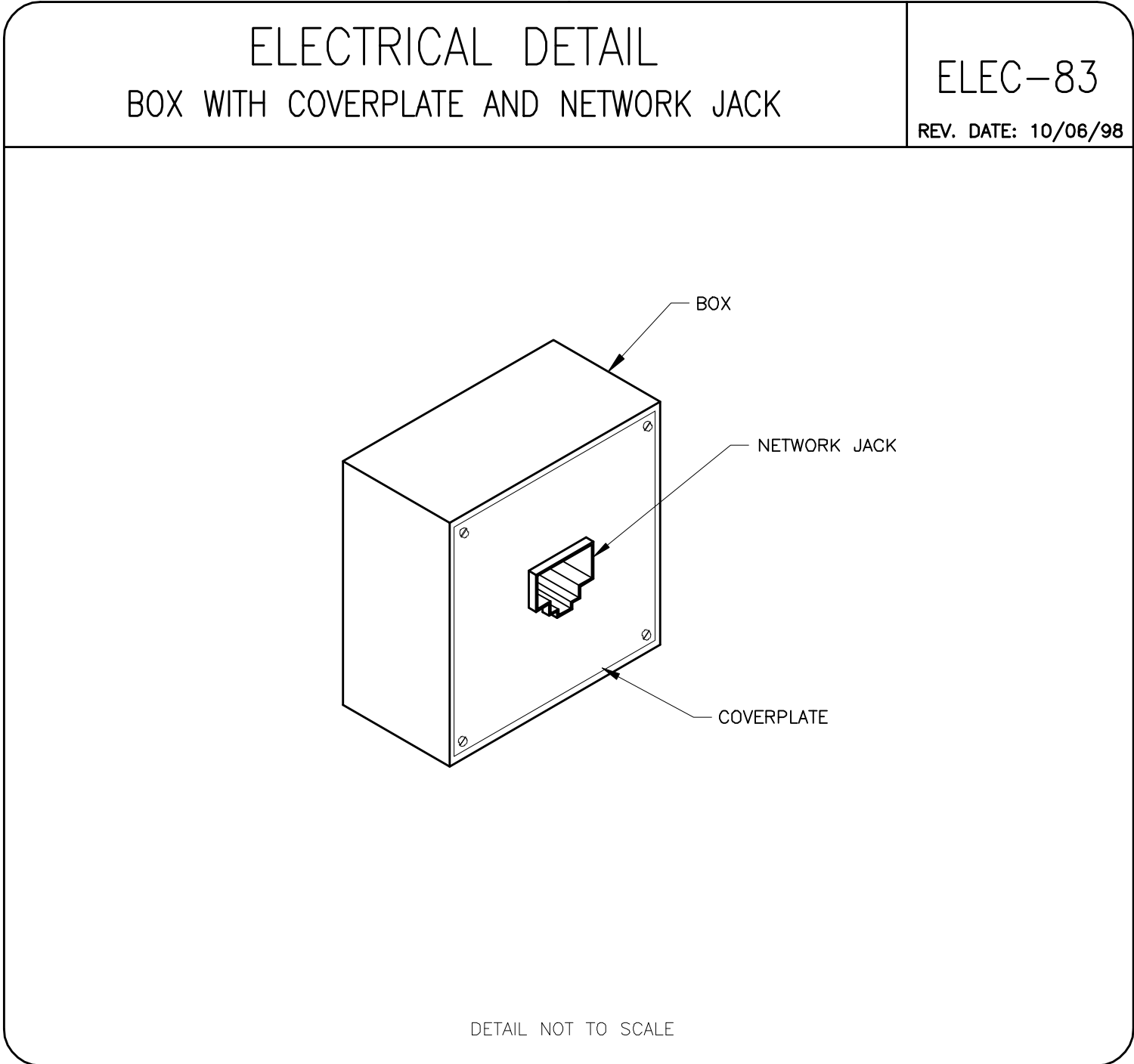
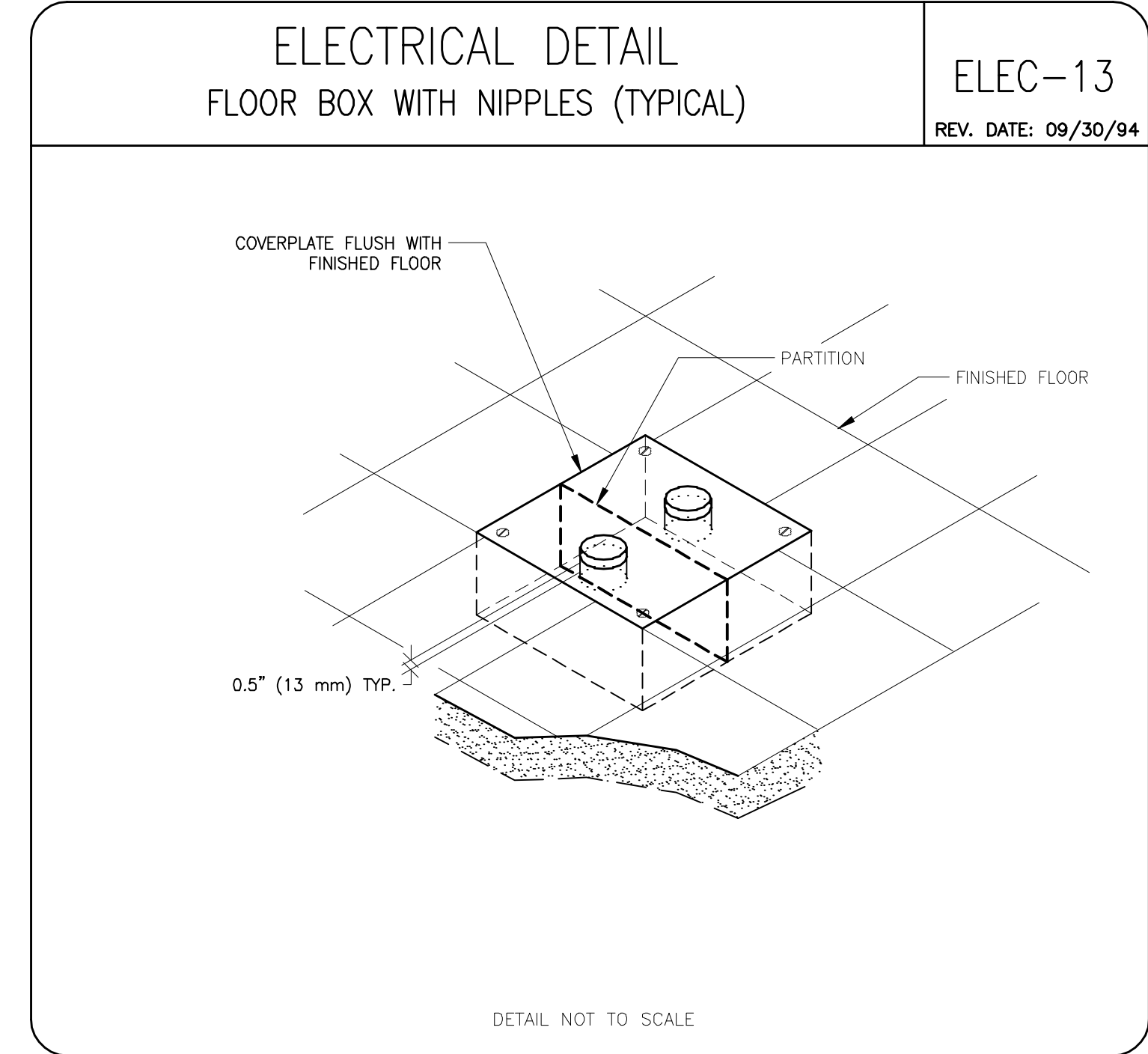
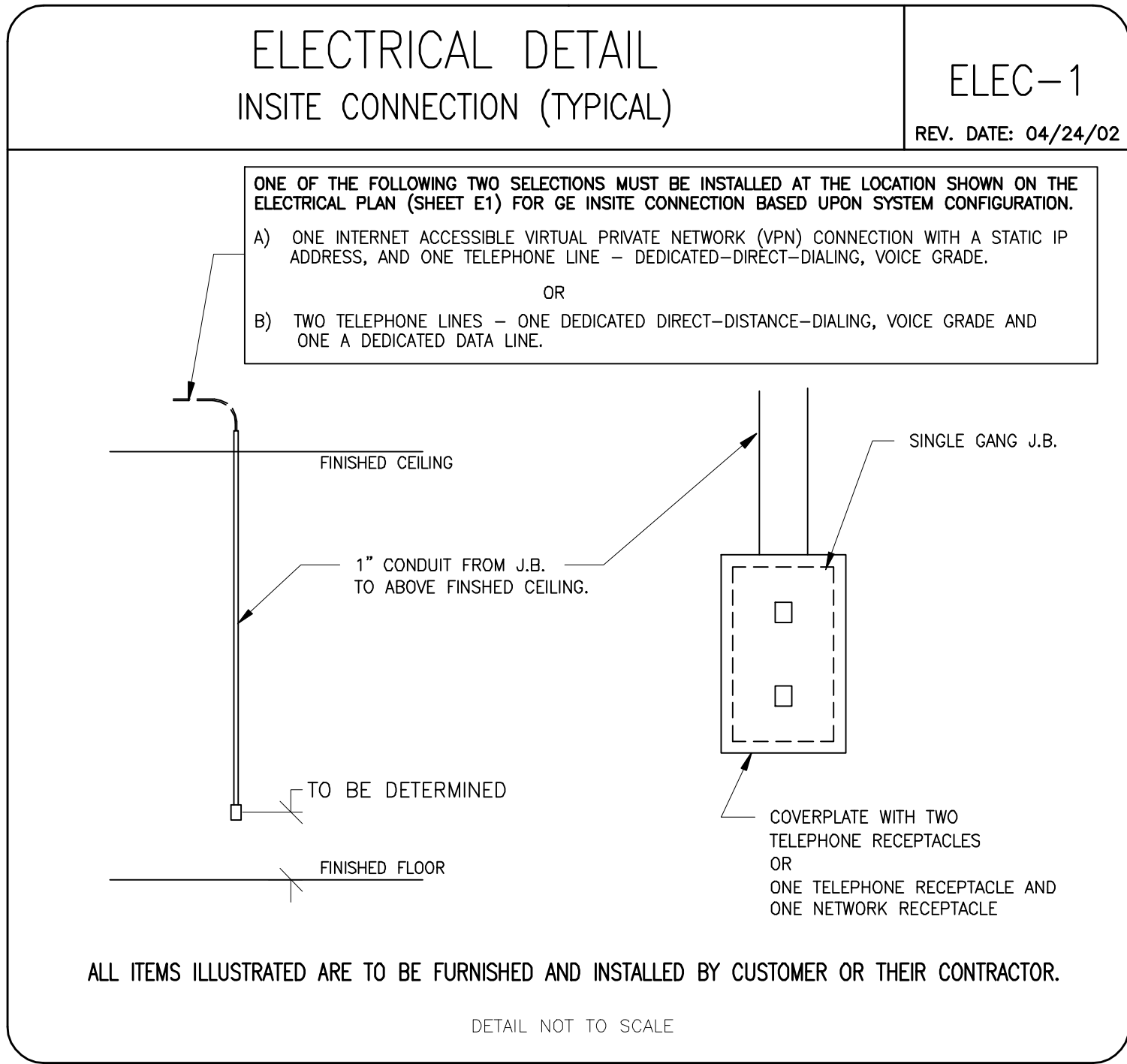
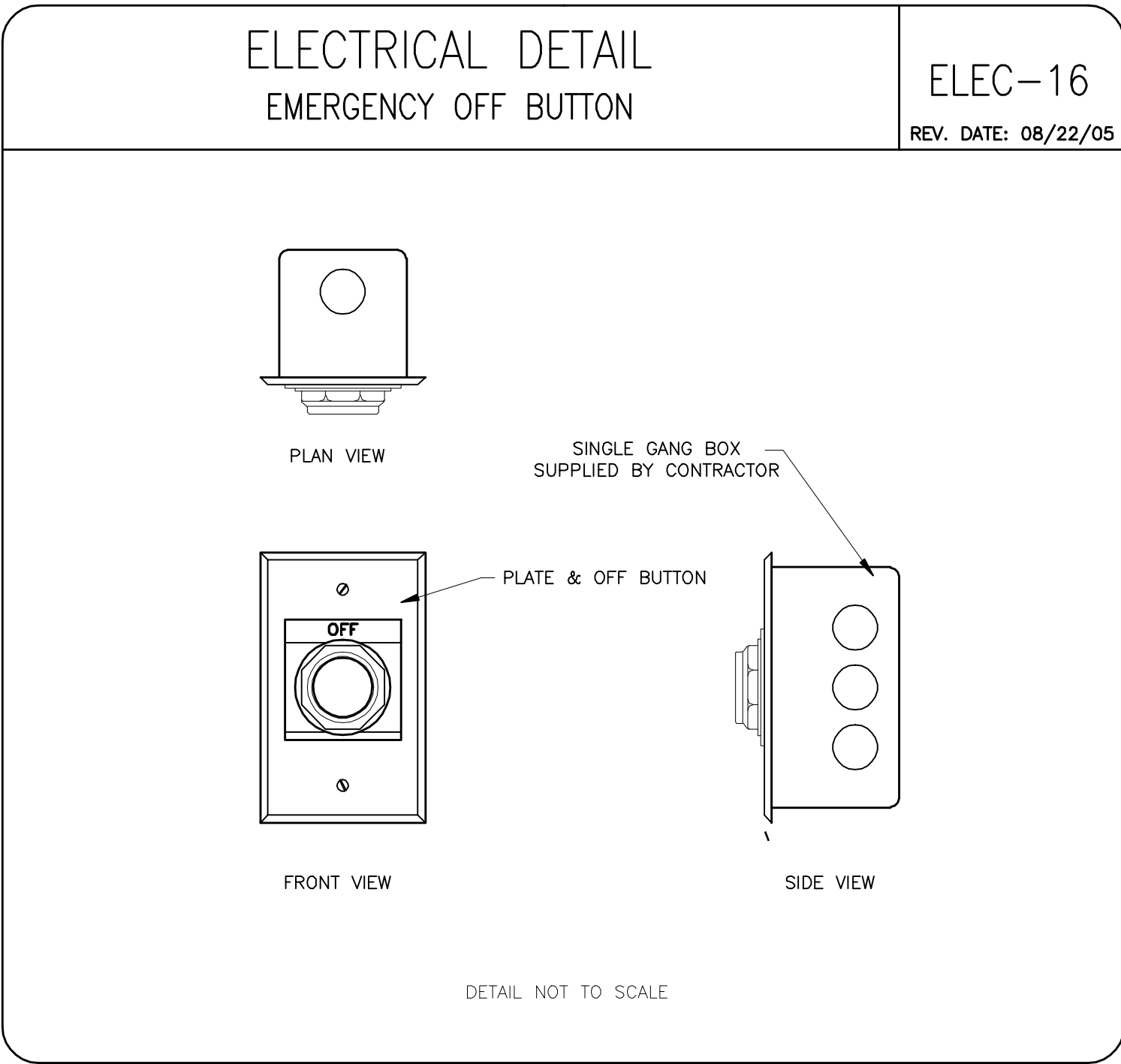
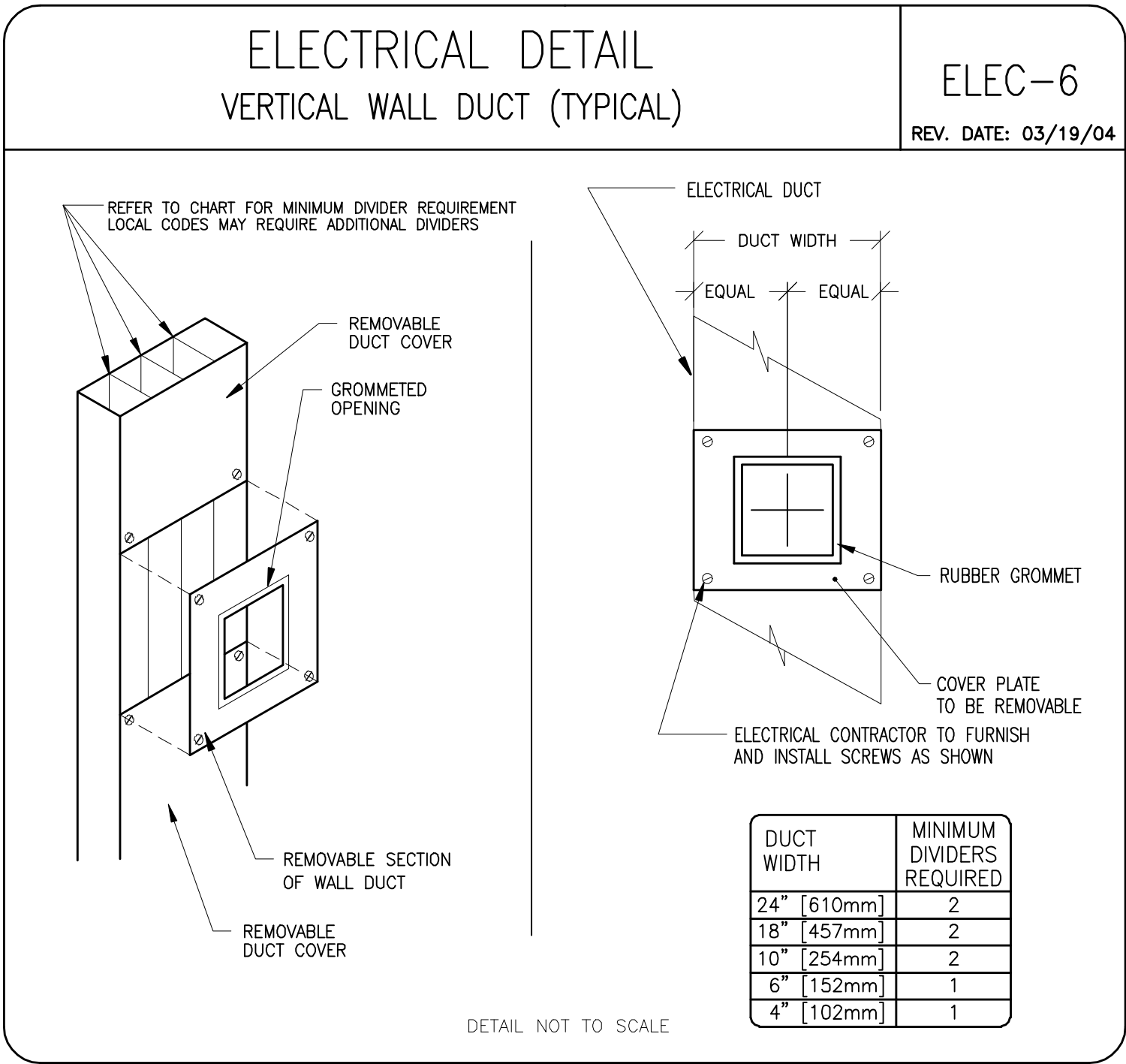
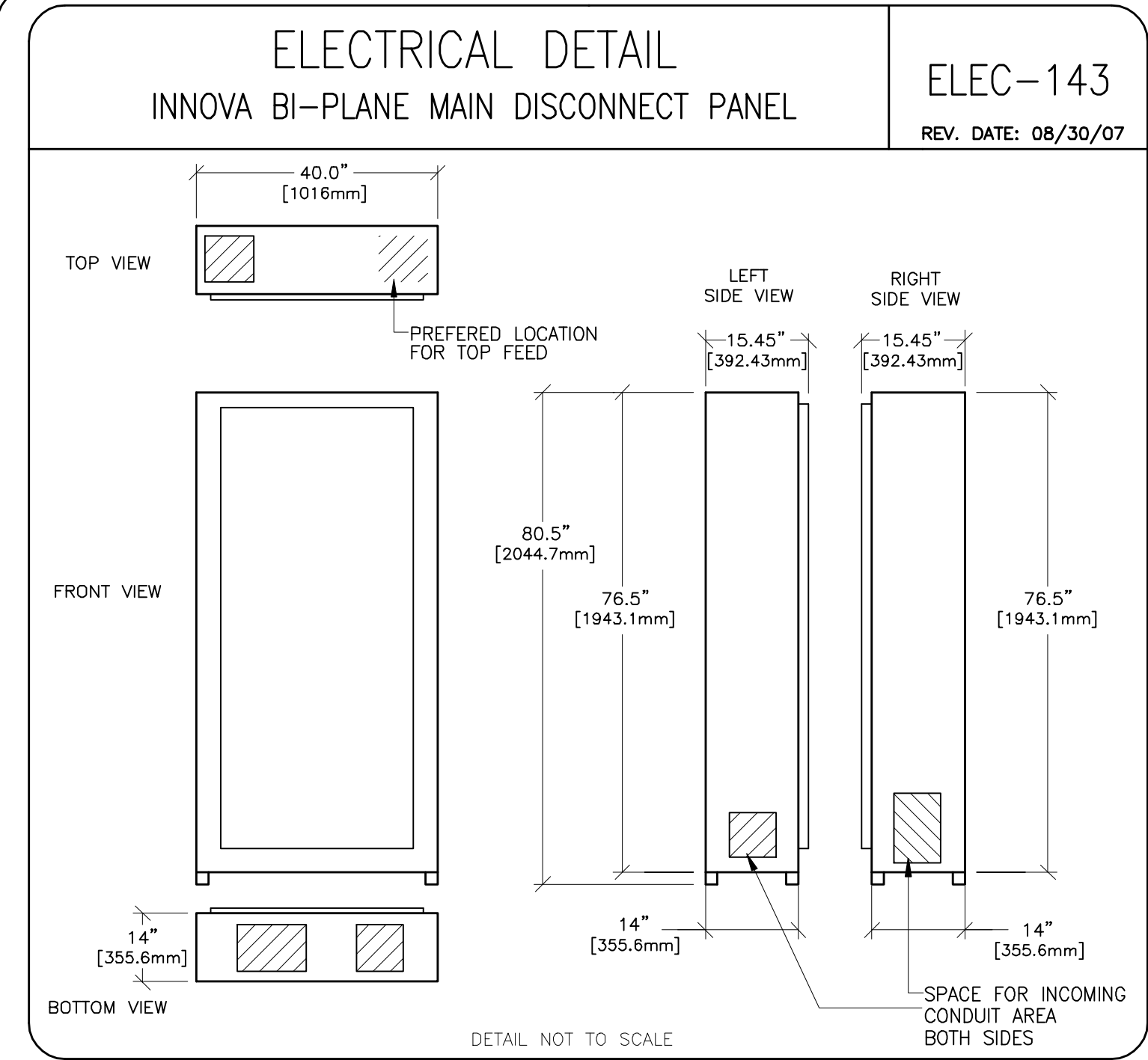
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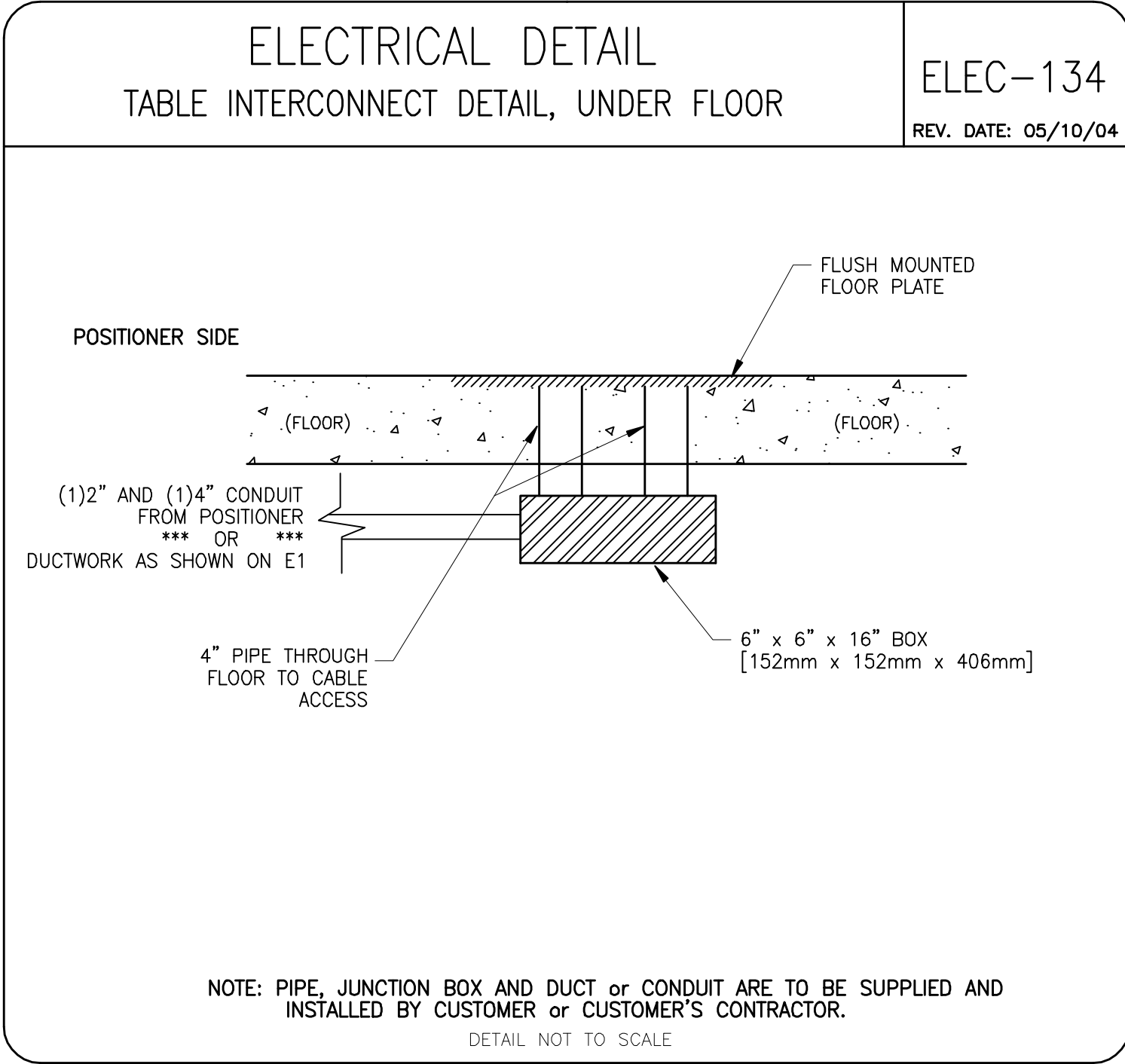
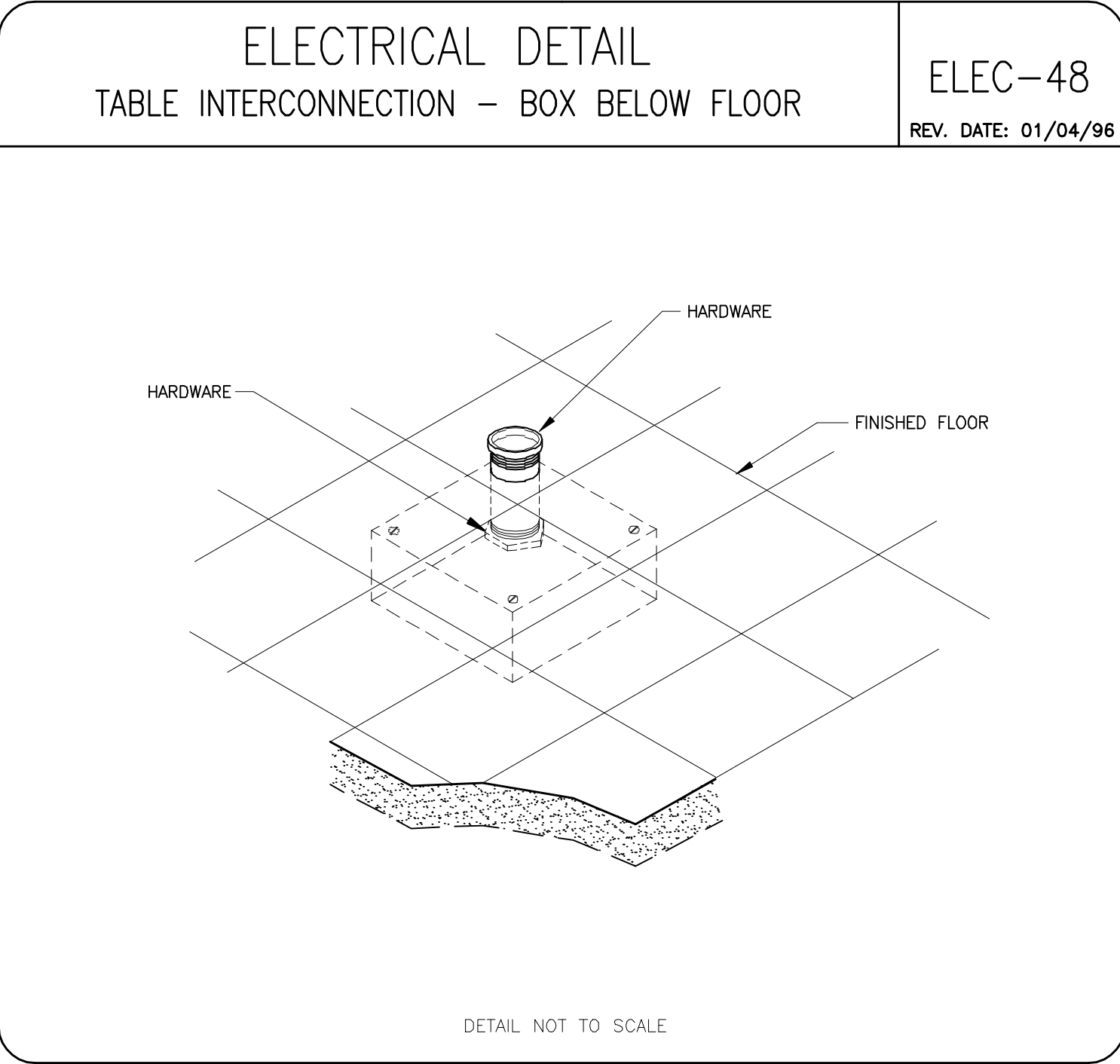
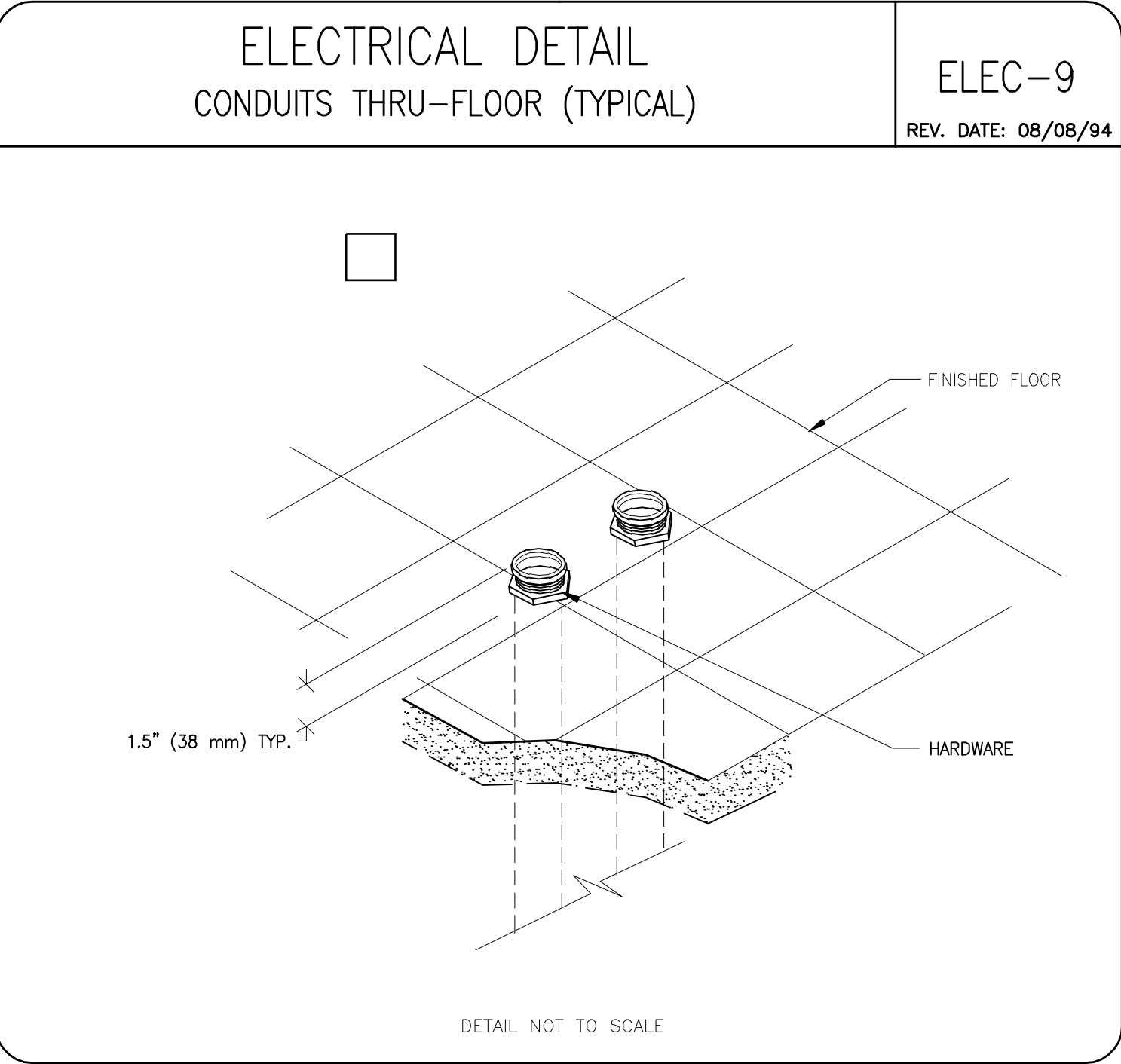
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DRAWN BY: LLM
CHECKED BY: TST

REVISION HISTORY:

SHEET

E2





SHEET TITLE: ELECTRICAL DETAILS

MODALITY TYPE: INNOVA 2121/3131 BIPLANE

THIS PLAN IS SUBMITTED TO SUGGEST LOCATION OF GE HEALTHCARE EQUIPMENT AND TO PROVIDE GENERAL INFORMATION TO THE ARCHITECT. IT IS NOT TO BE USED FOR THE DESIGN OF THE BUILDING OR FOR THE INSTALLATION OF THE EQUIPMENT. IN PREPARING THIS PLAN, EVERY EFFORT HAS BEEN MADE TO CONFORM TO THE ACTUAL EQUIPMENT EXPECTED TO BE INSTALLED. IT IS NOT TO BE USED FOR THE DESIGN OF THE BUILDING OR FOR THE INSTALLATION OF THE EQUIPMENT. GE HEALTHCARE ACCEPTS NO RESPONSIBILITY FOR ANY DAMAGES RESULTING THEREFROM.

GE

GE Healthcare Technologies

Installation Services Design Center

Milwaukee, Wisconsin

PROJECT TITLE:

INTERVENTIONAL RADIOLOGY (IR) LAB
TYPICAL LAYOUT

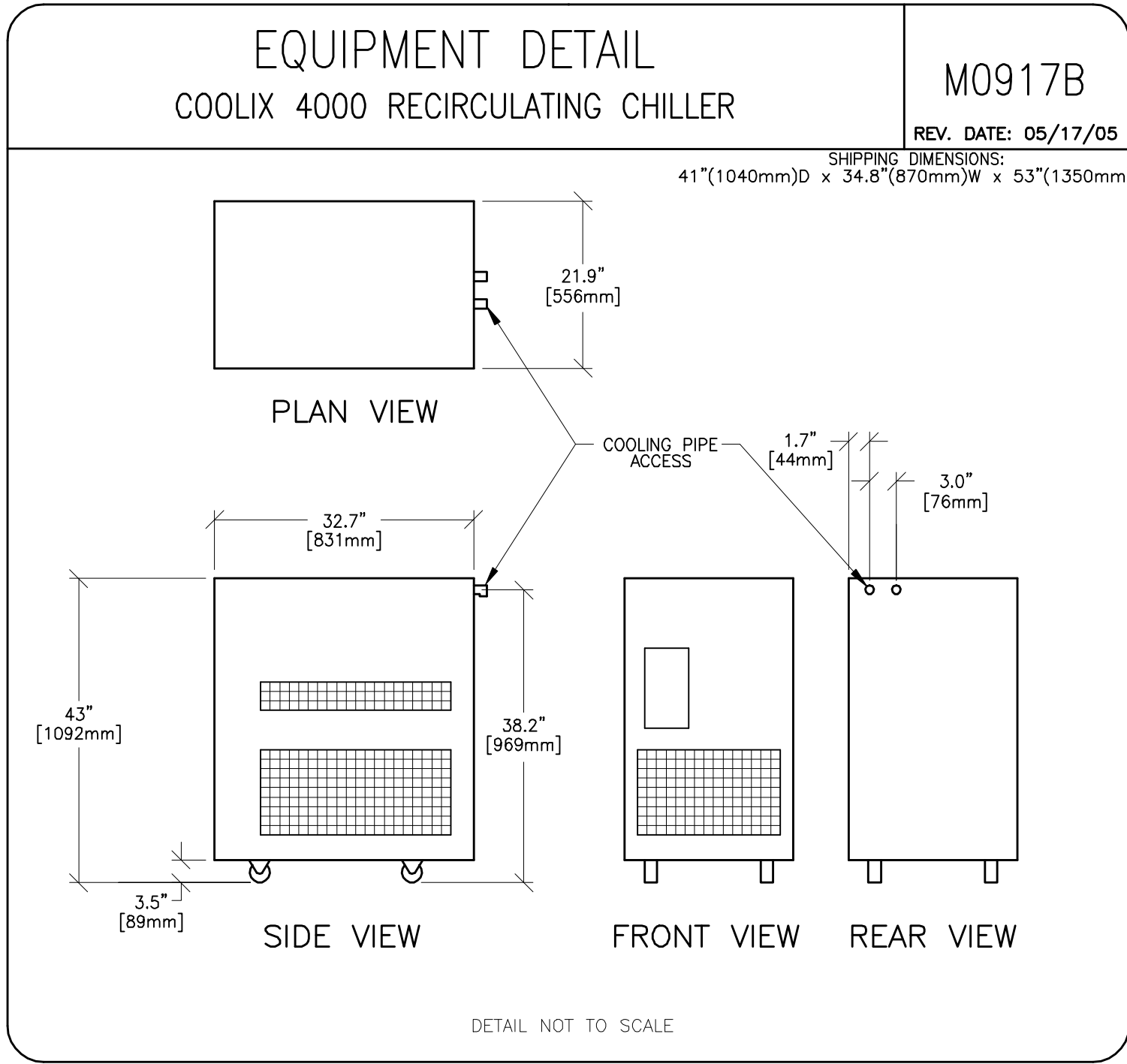
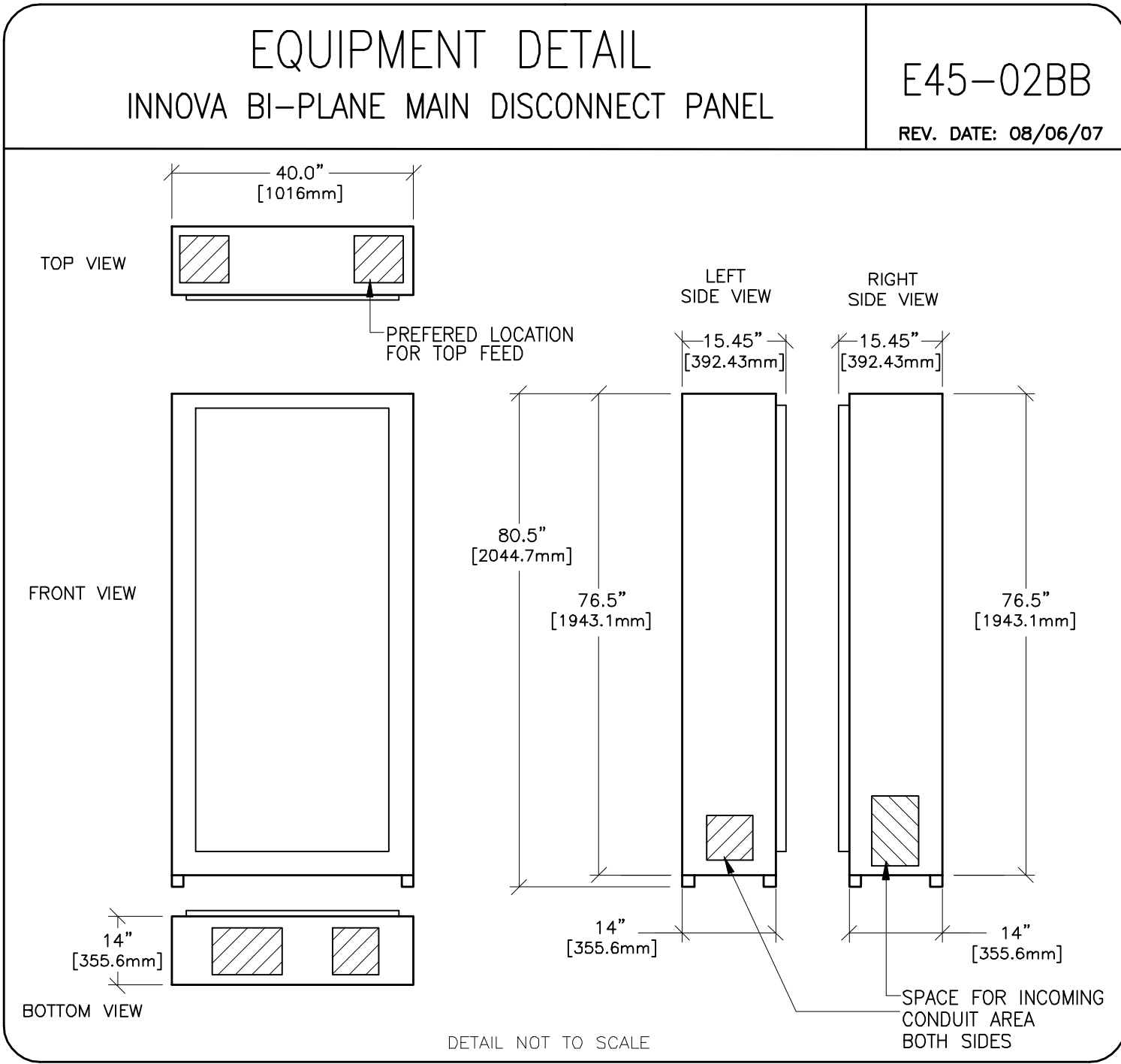
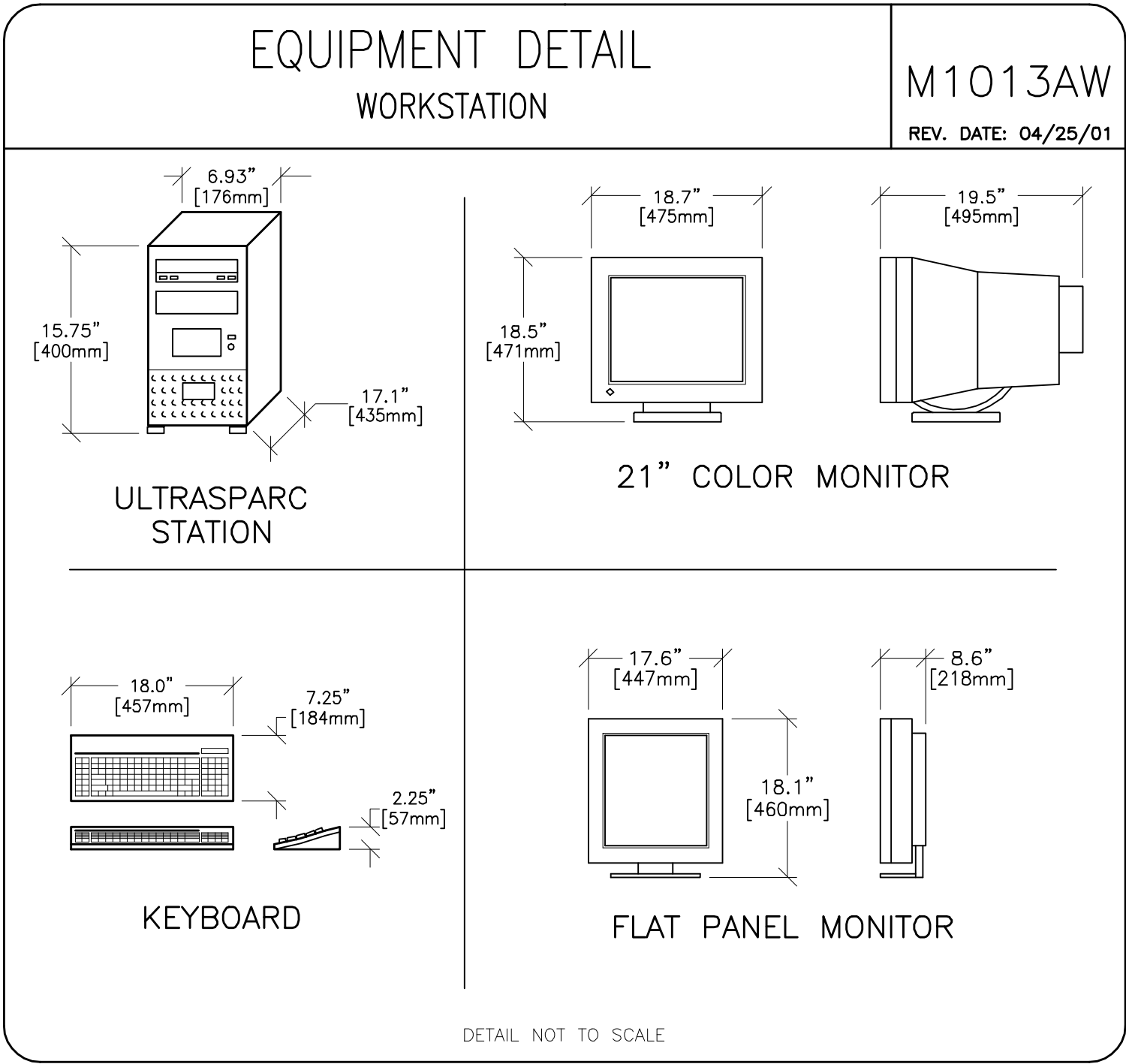
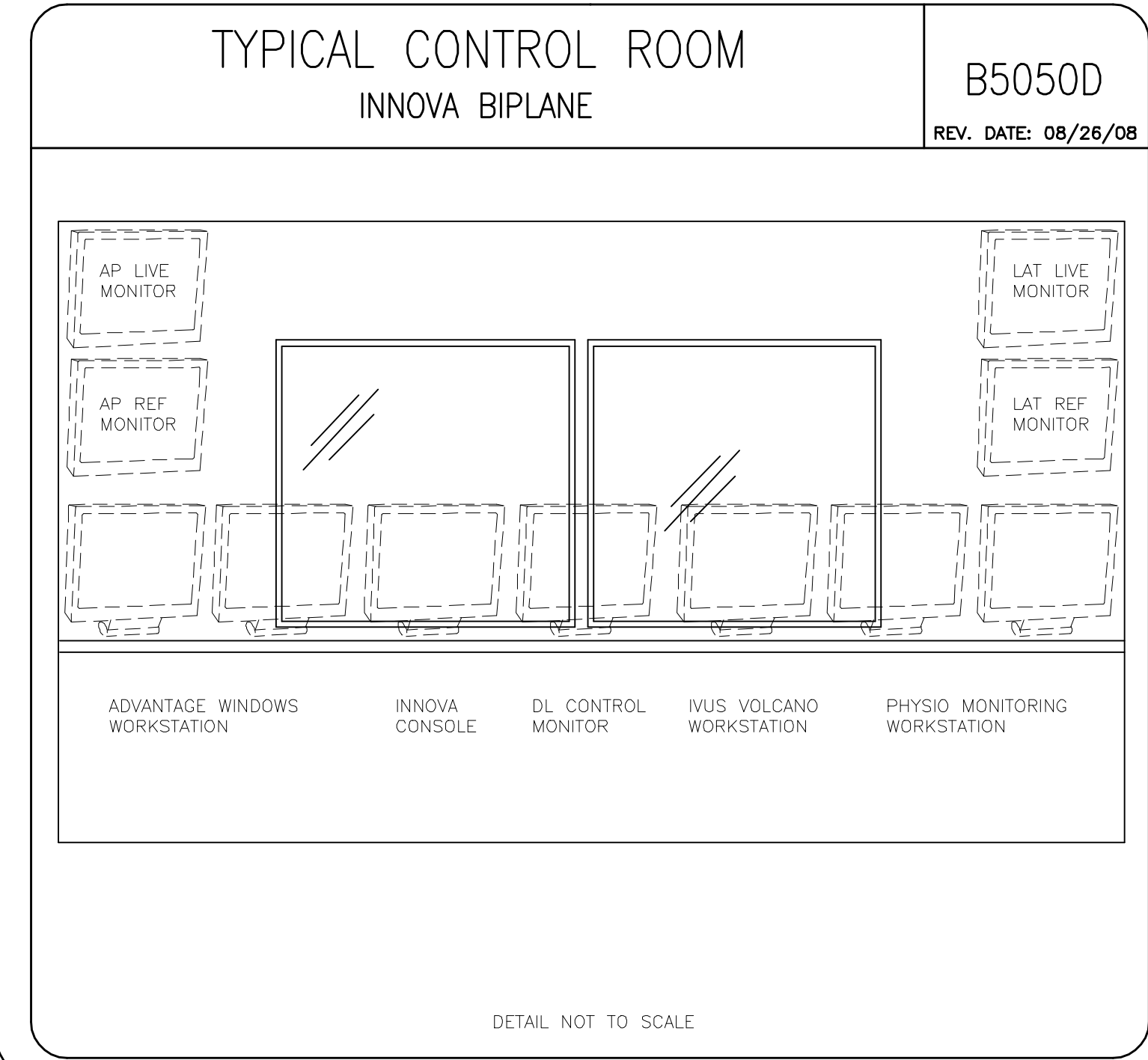
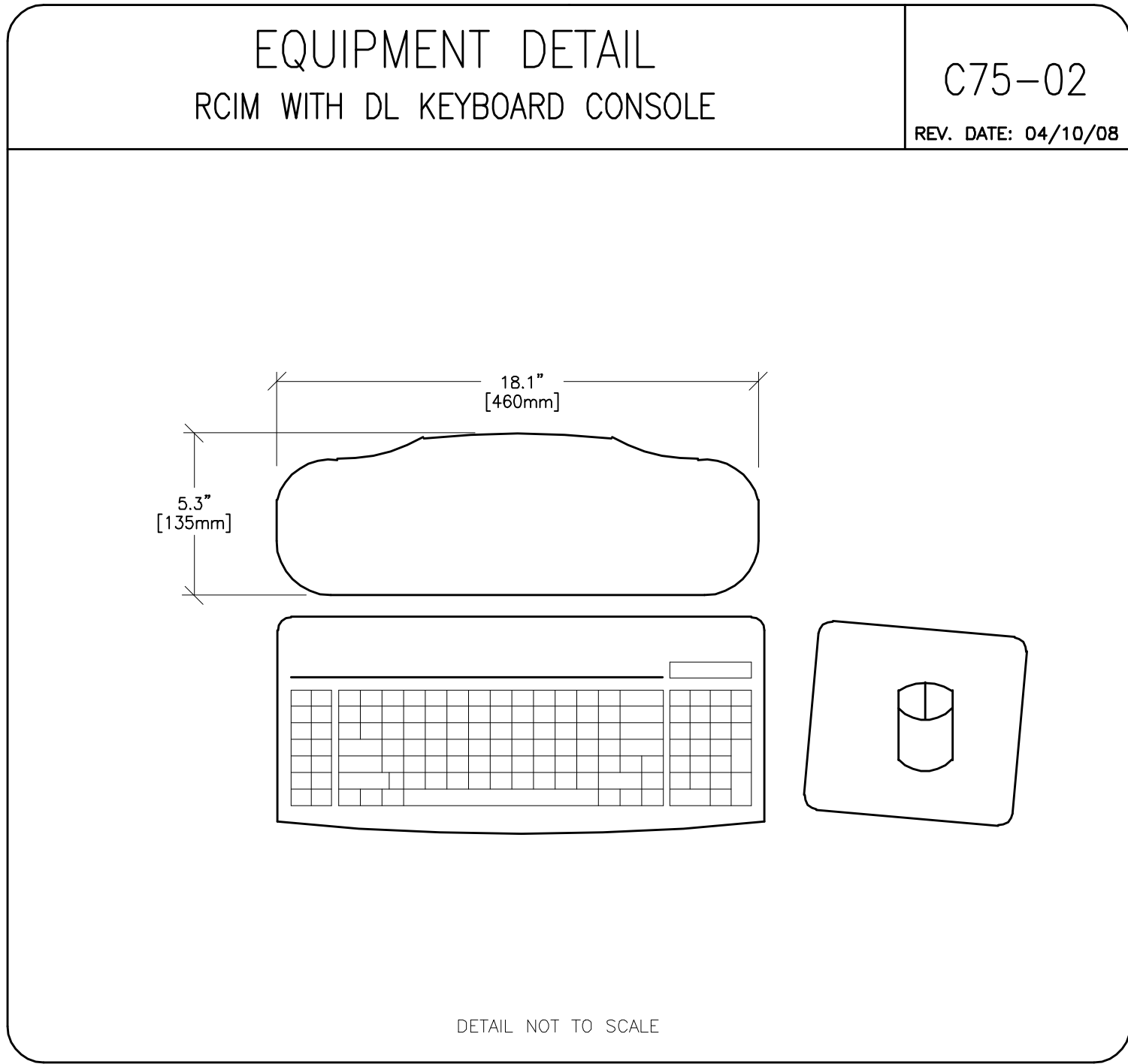
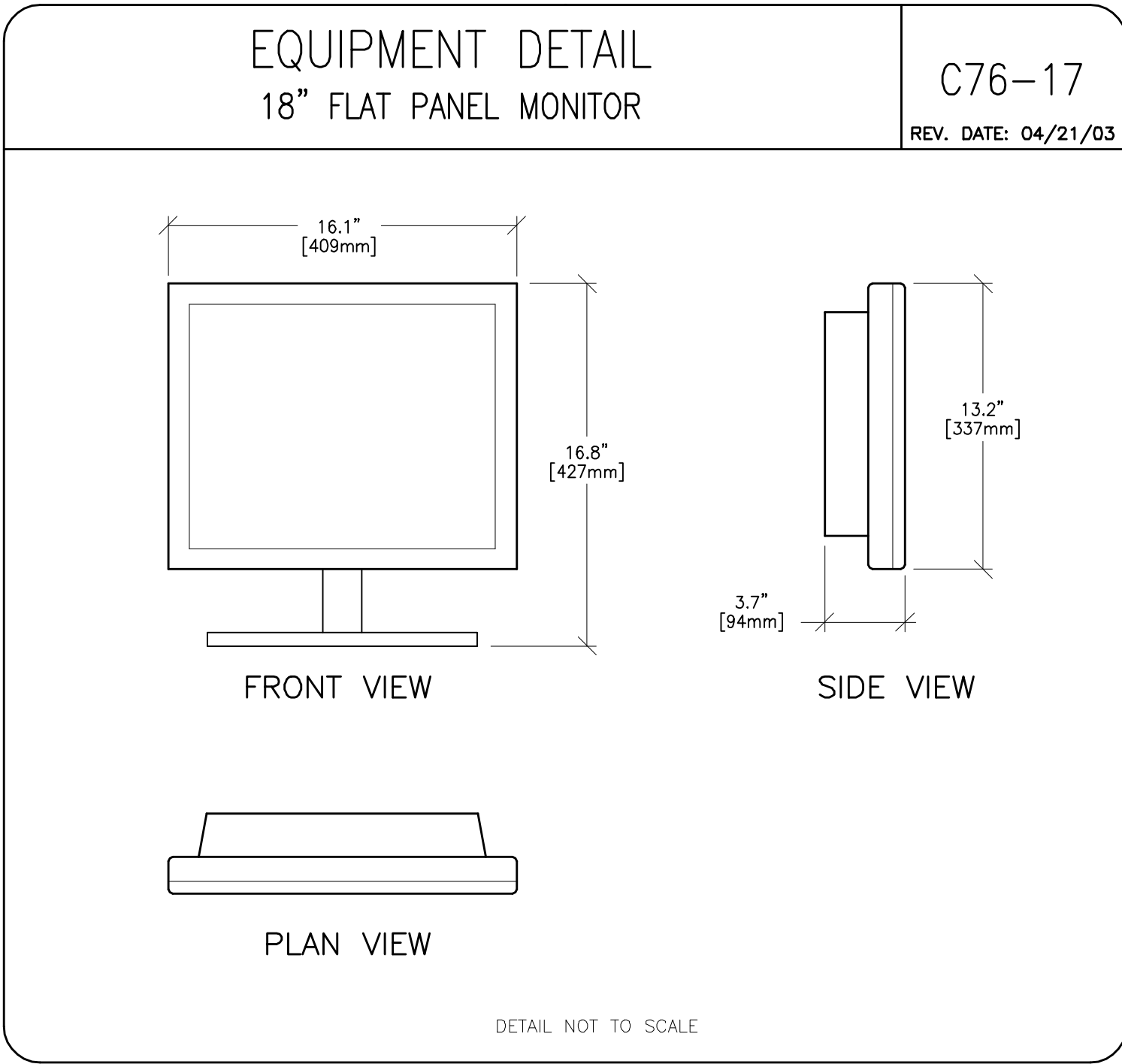
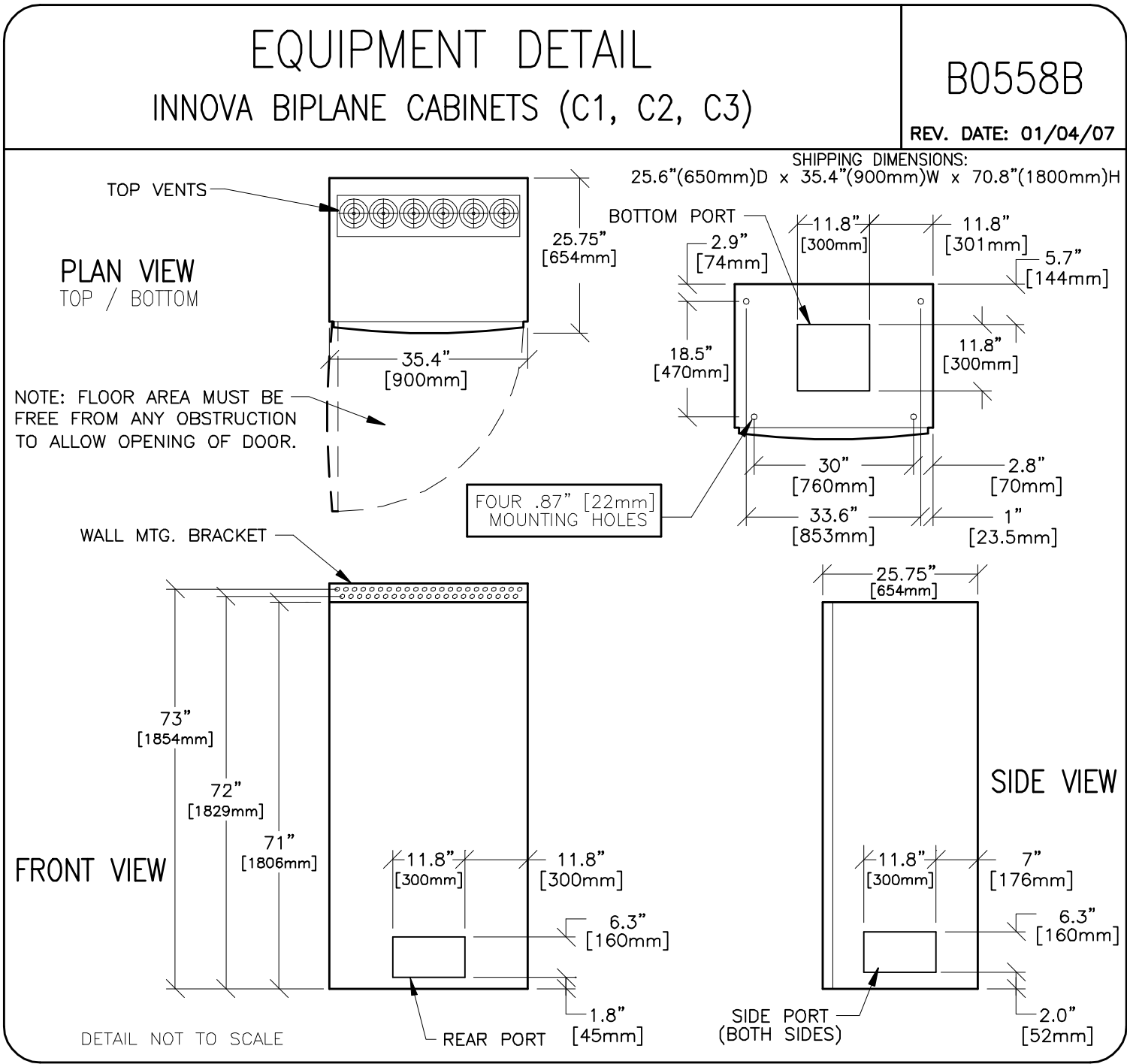
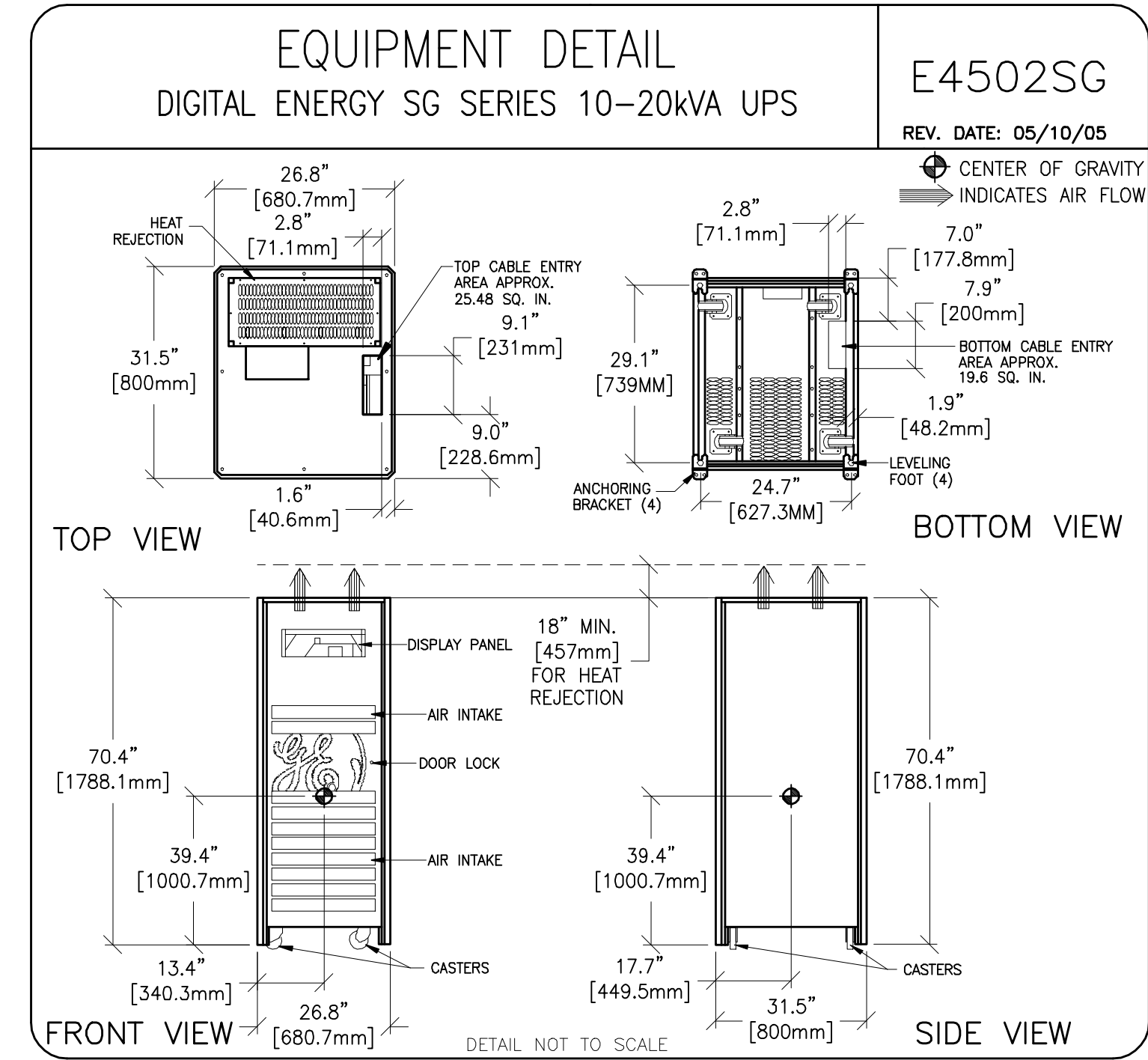
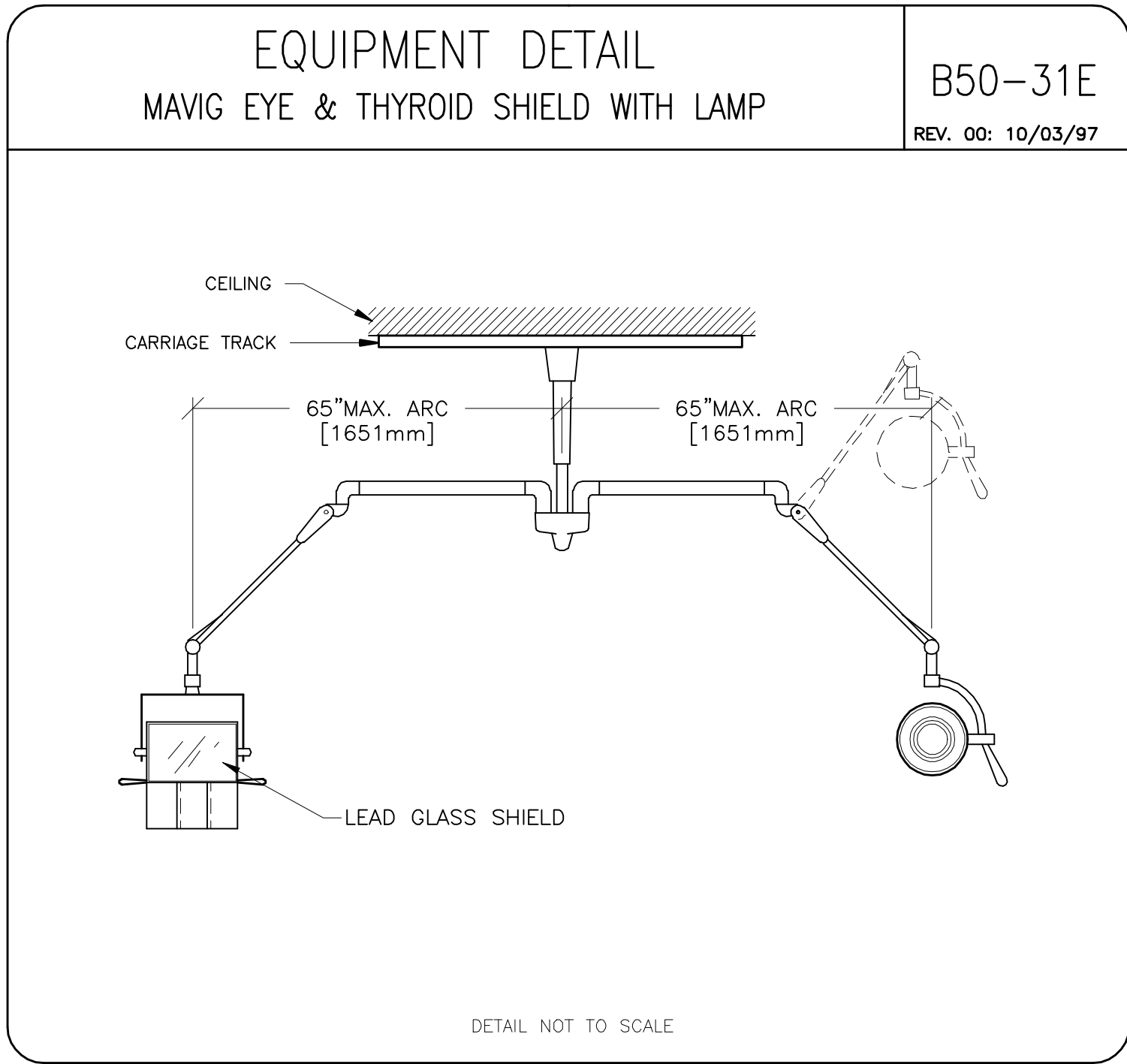
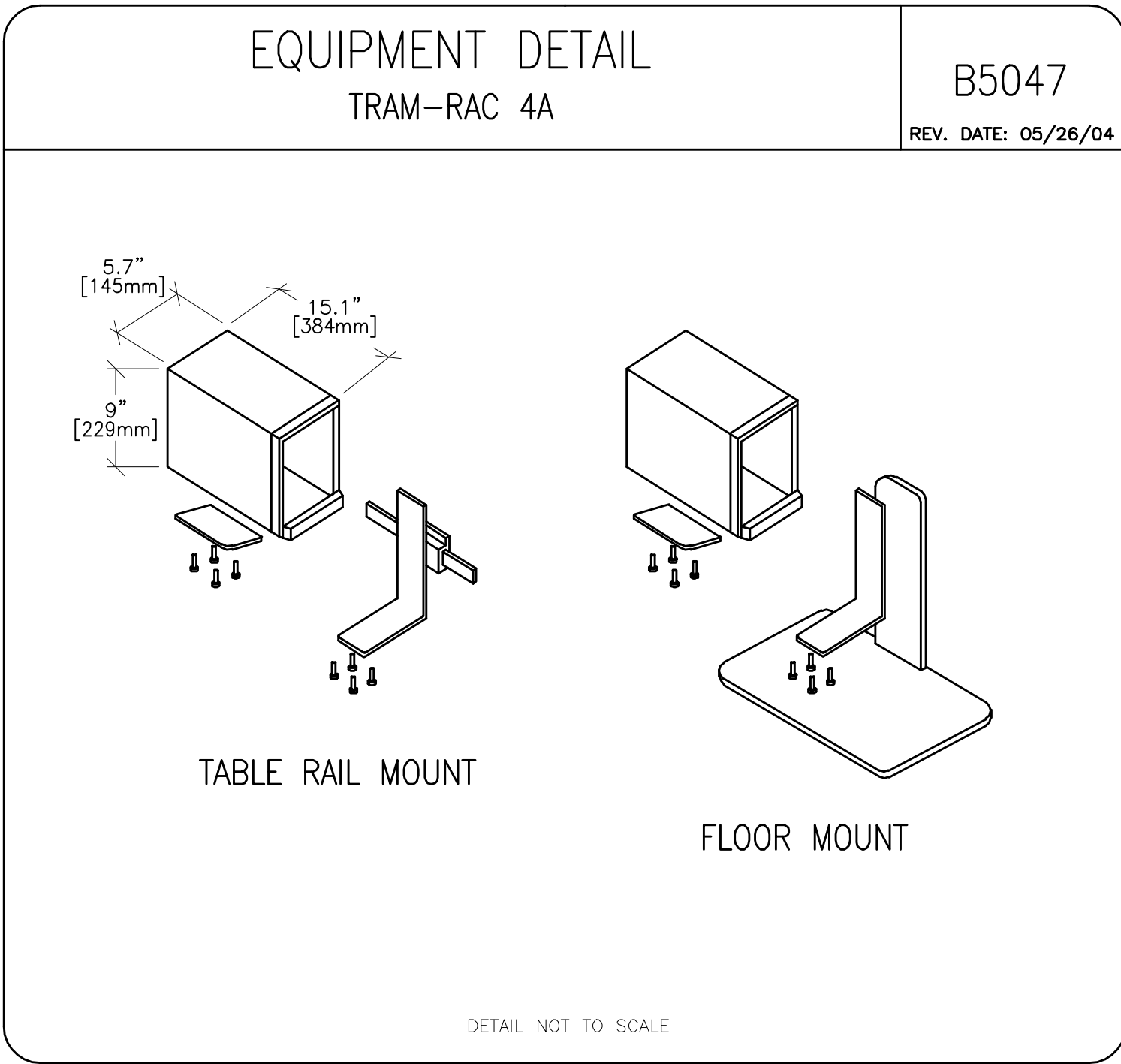
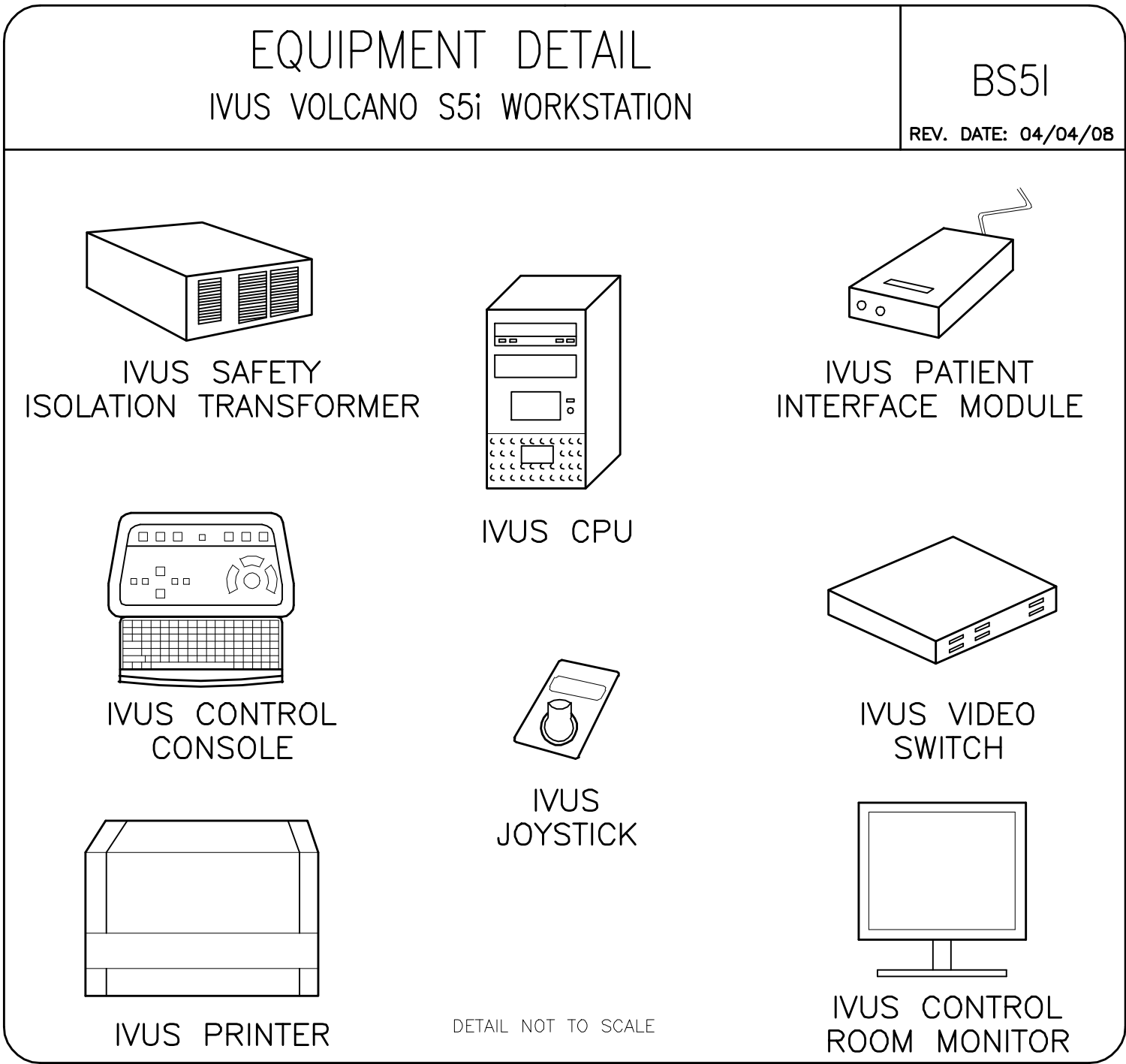
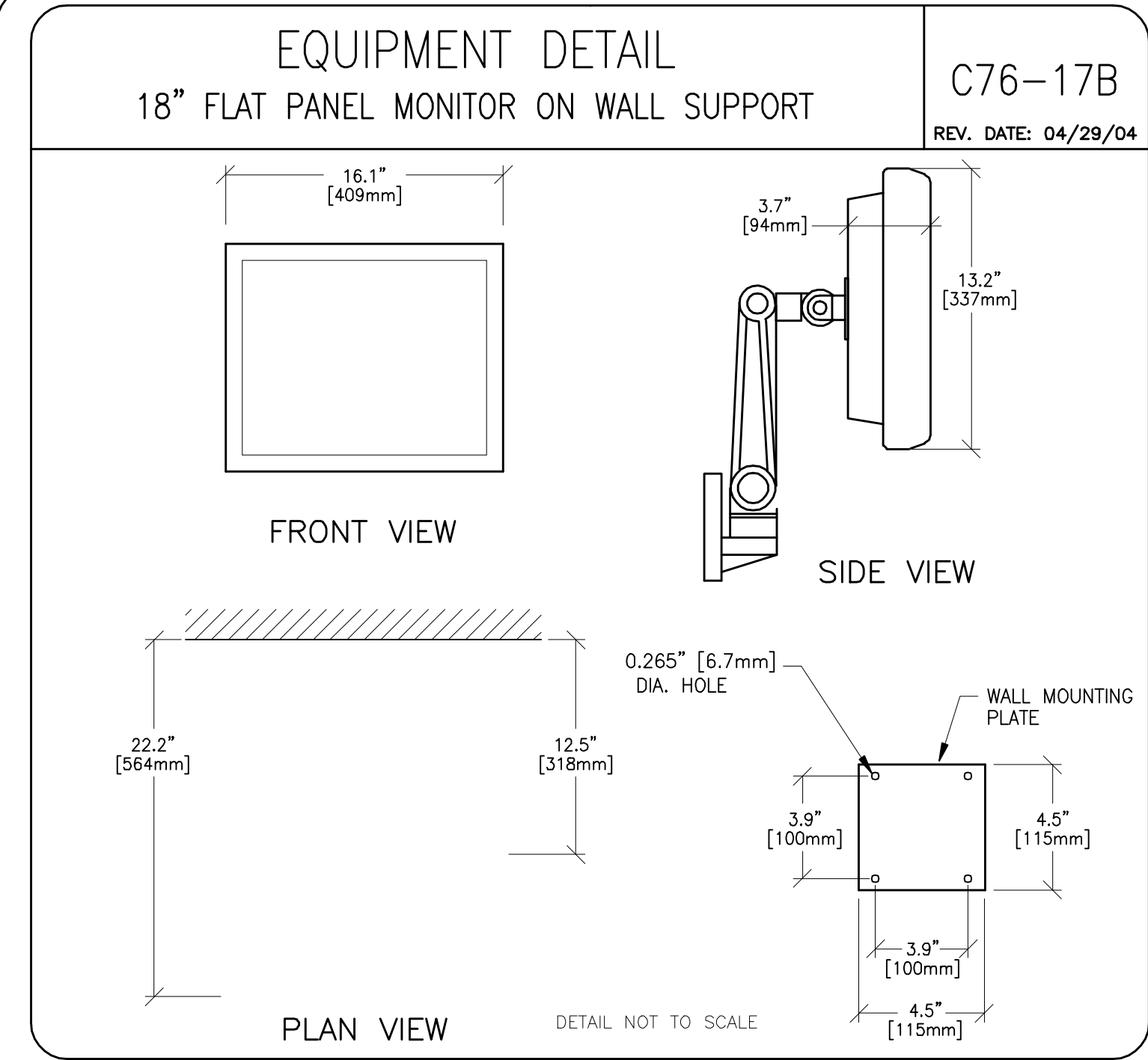
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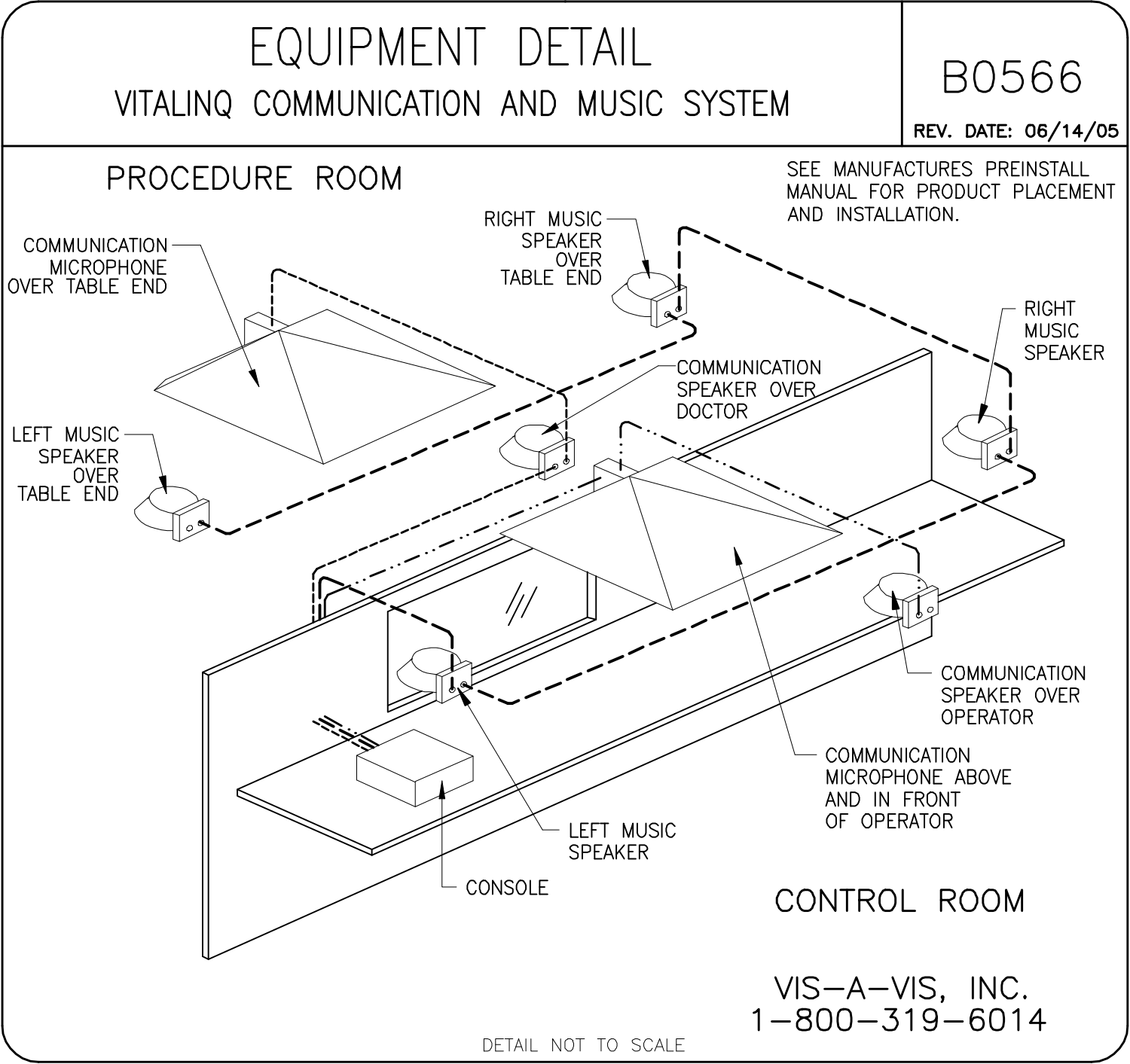
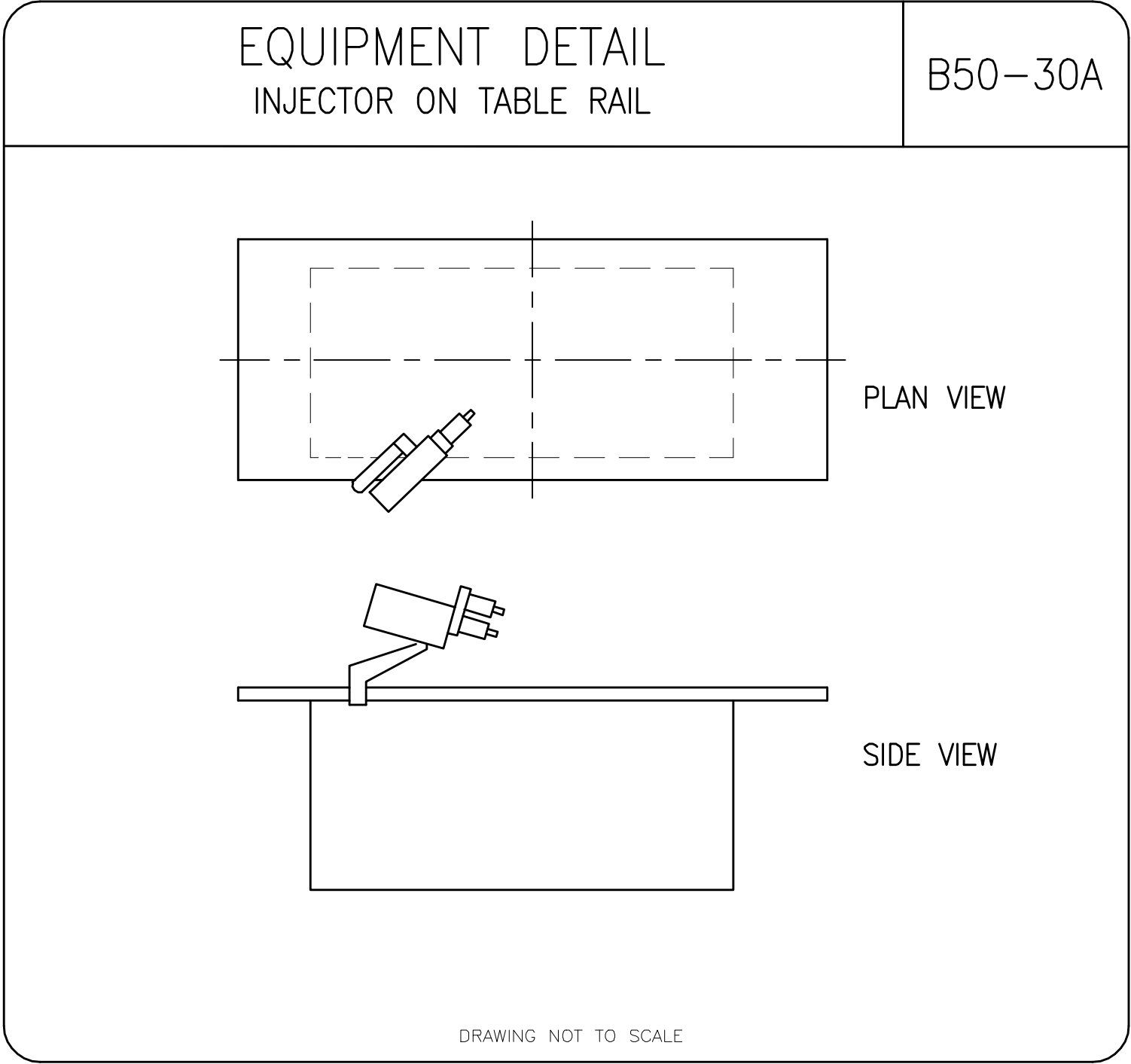
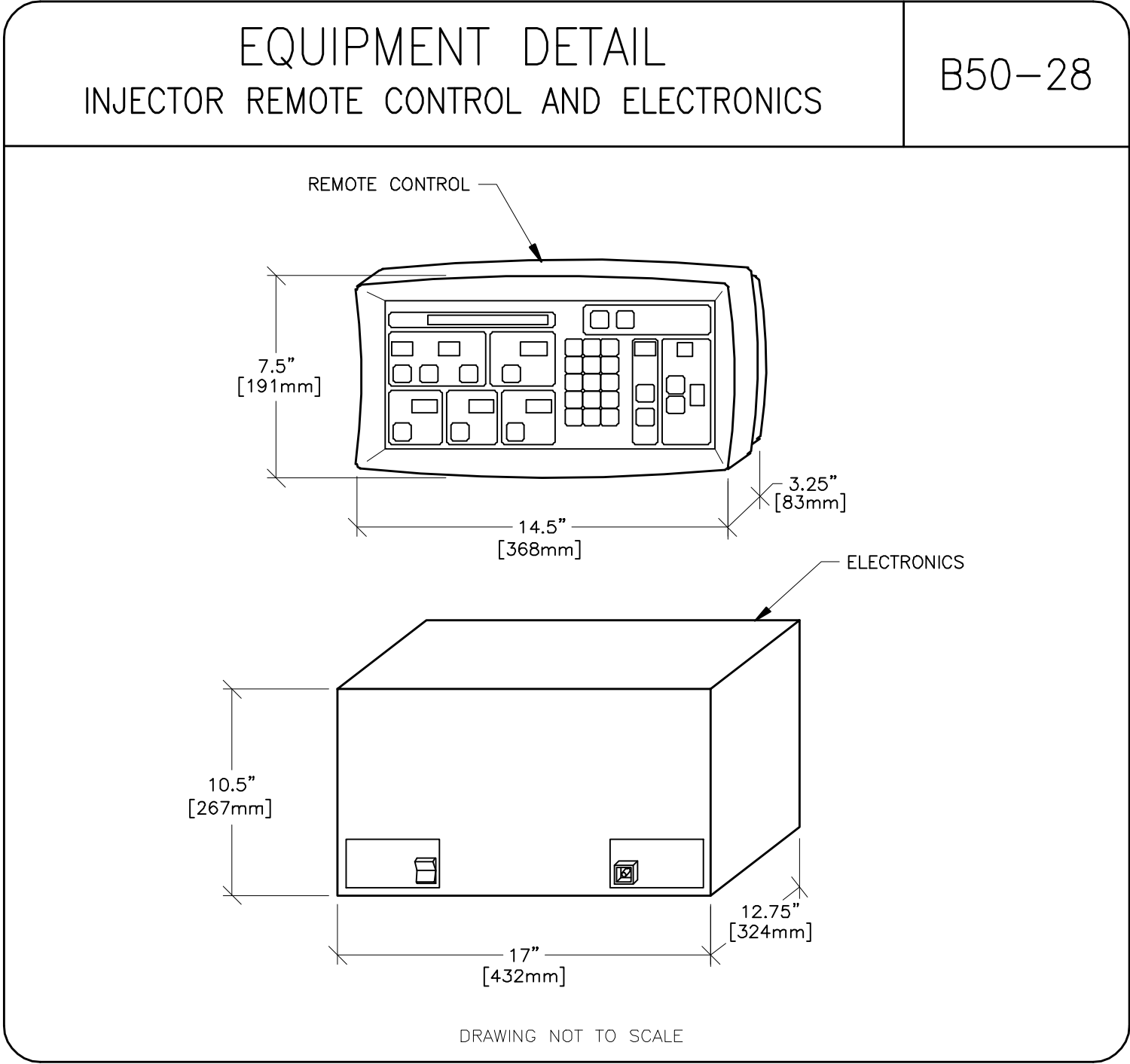
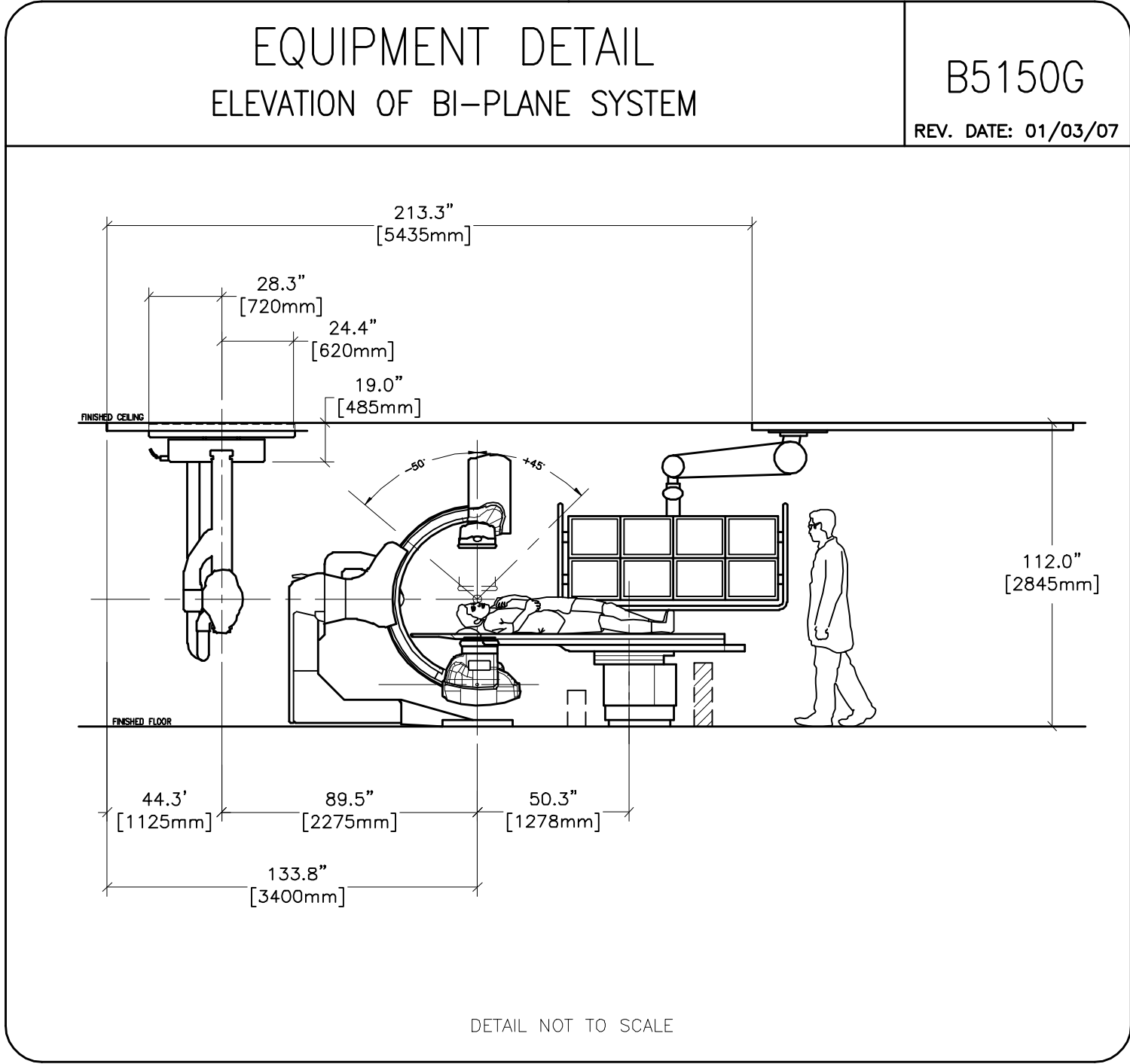
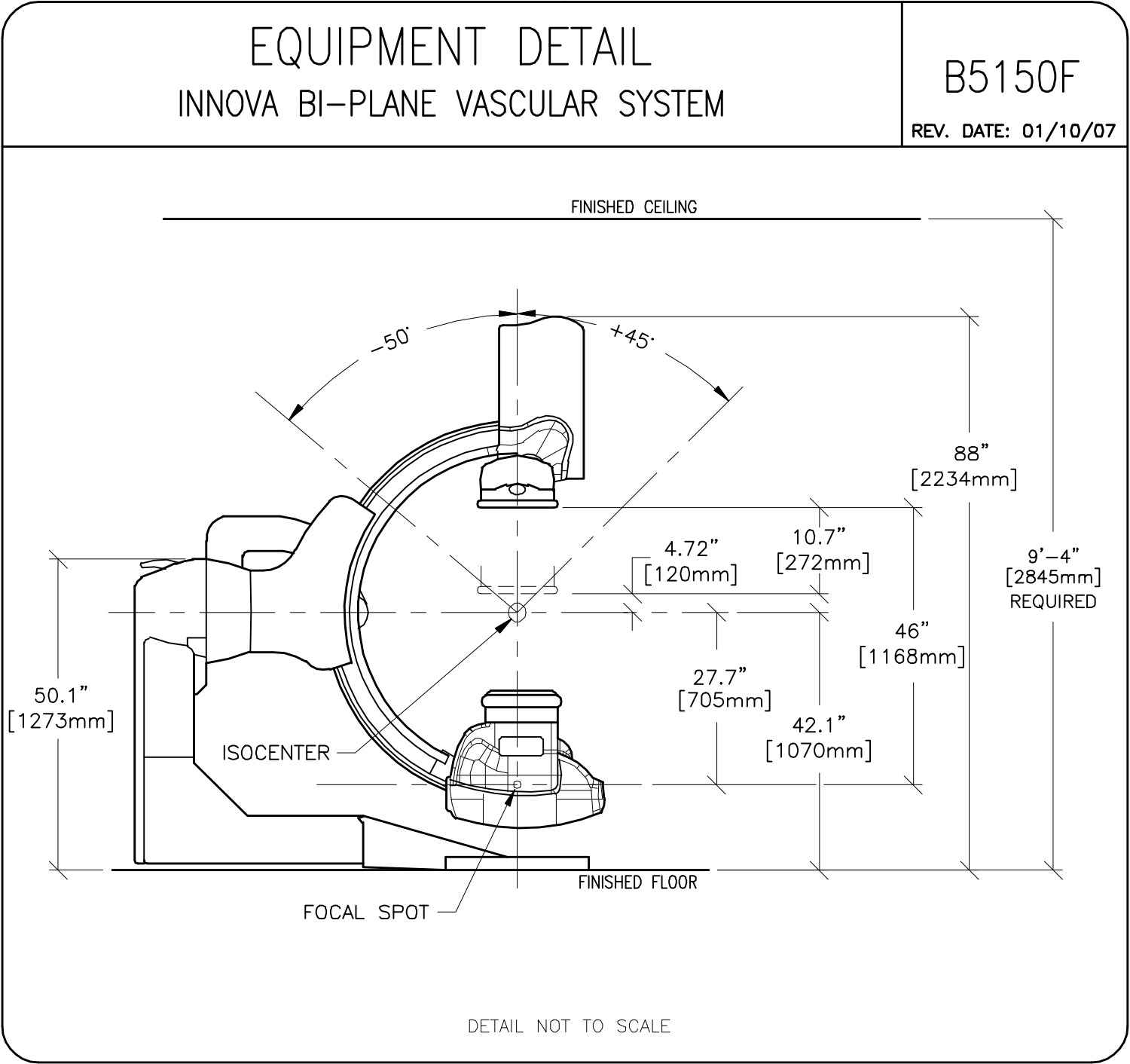
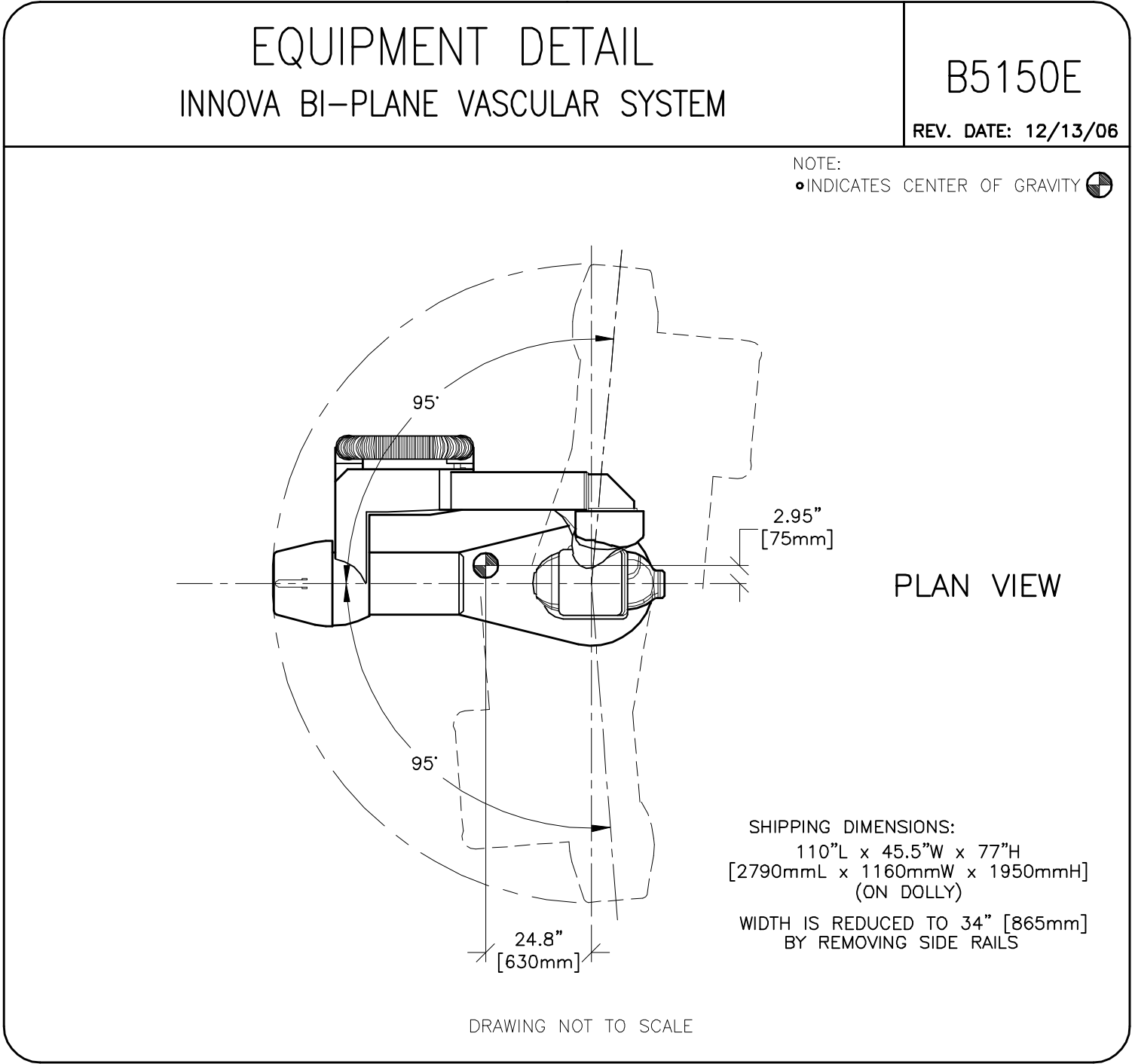
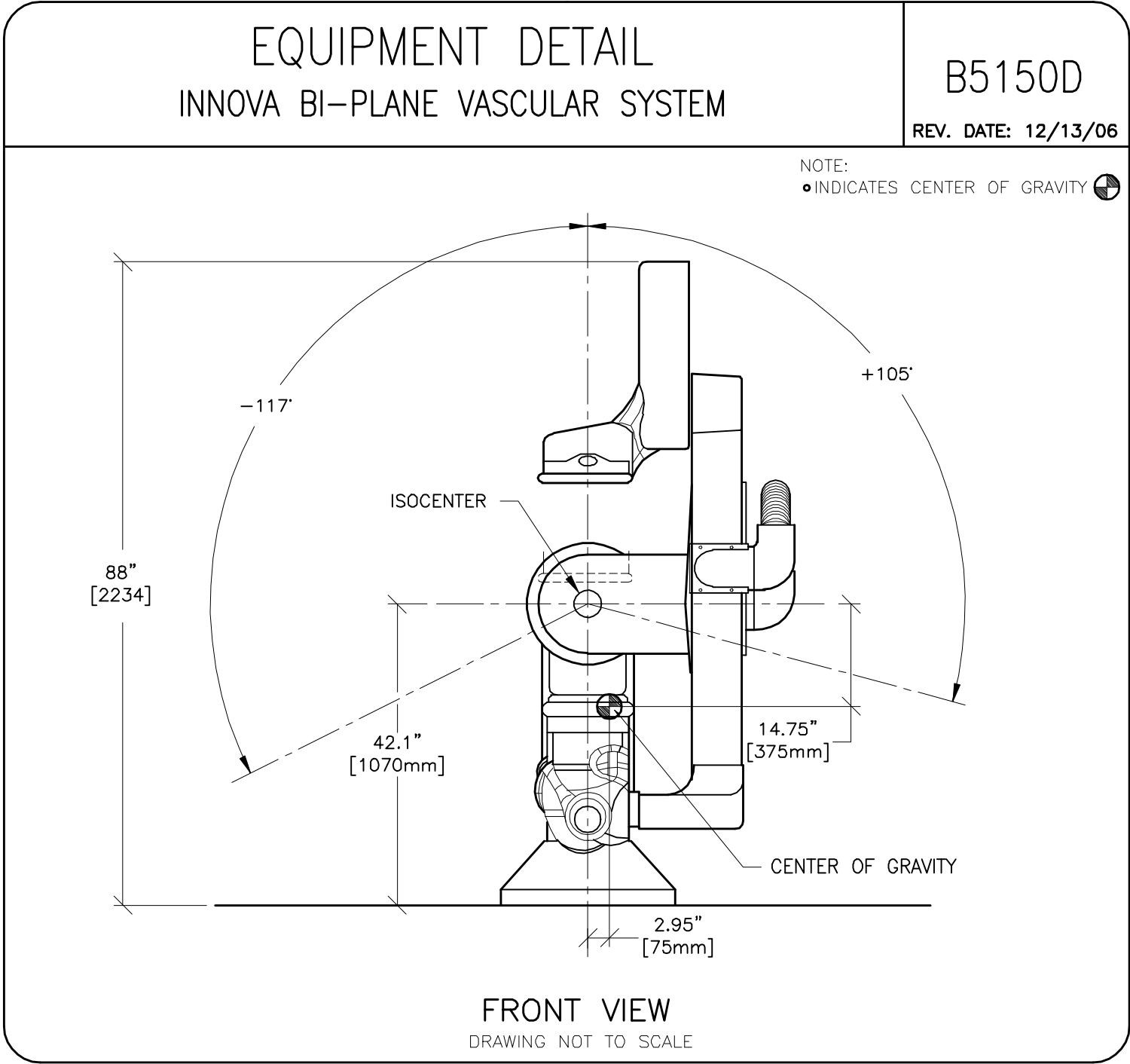
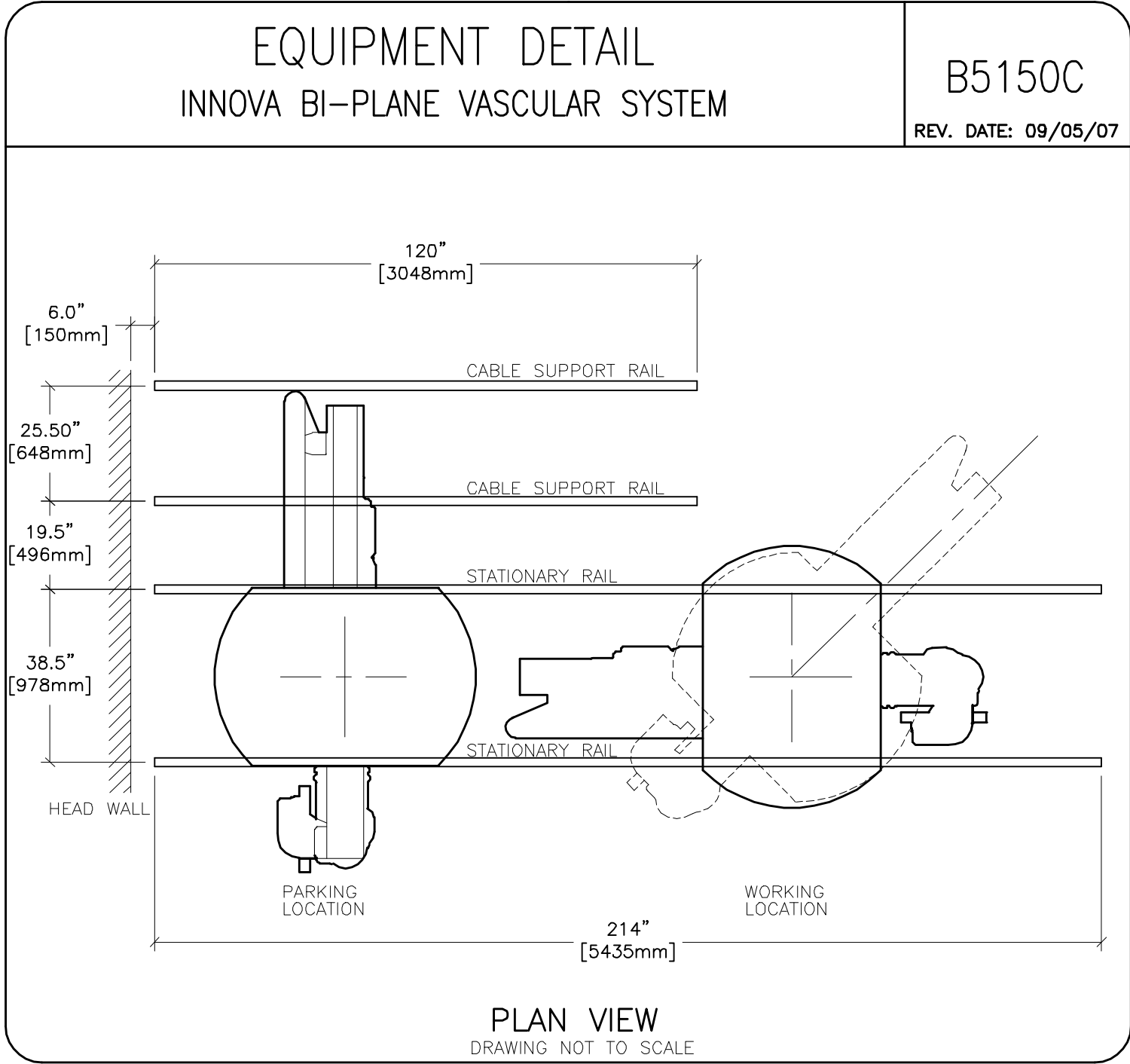
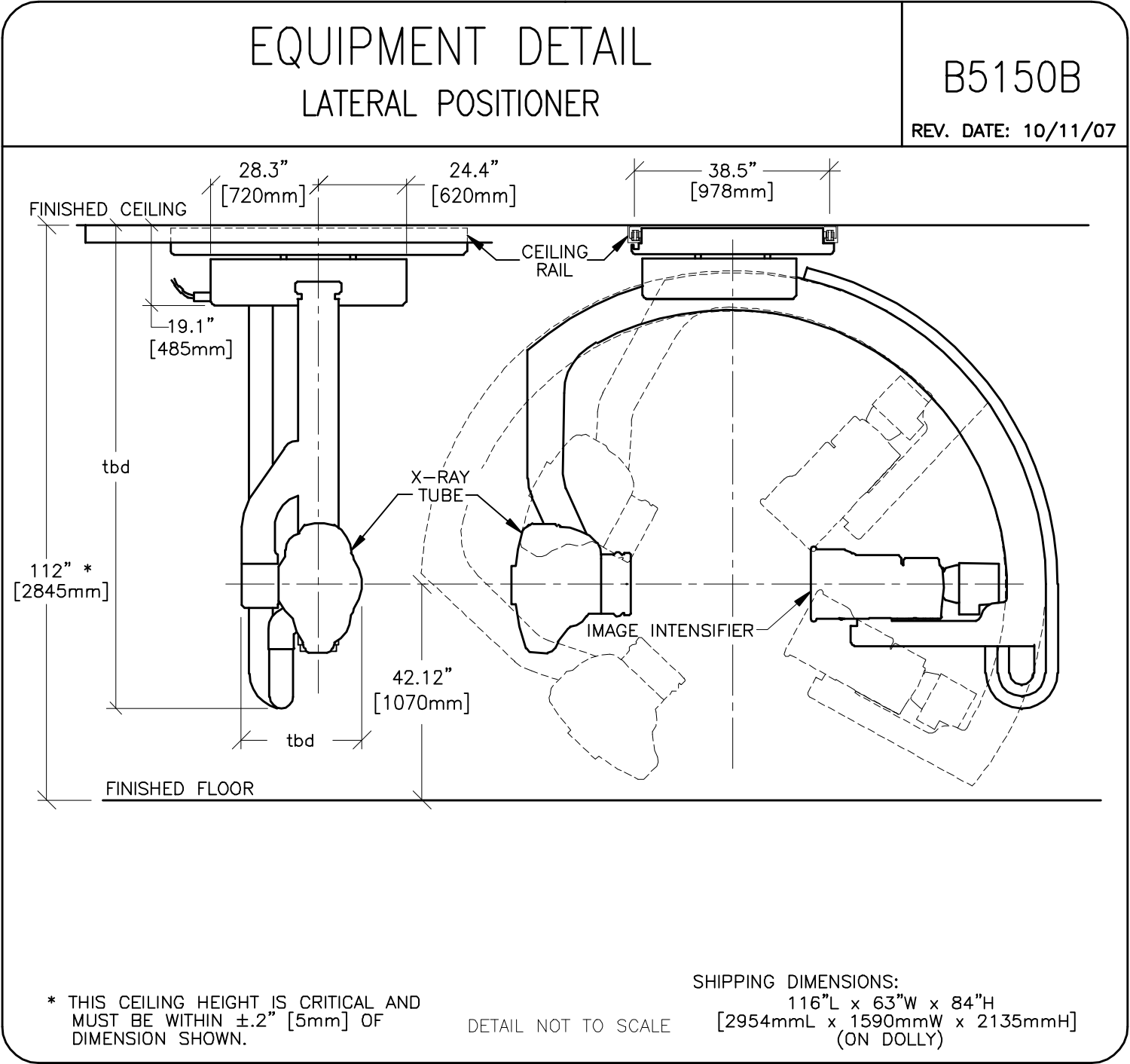
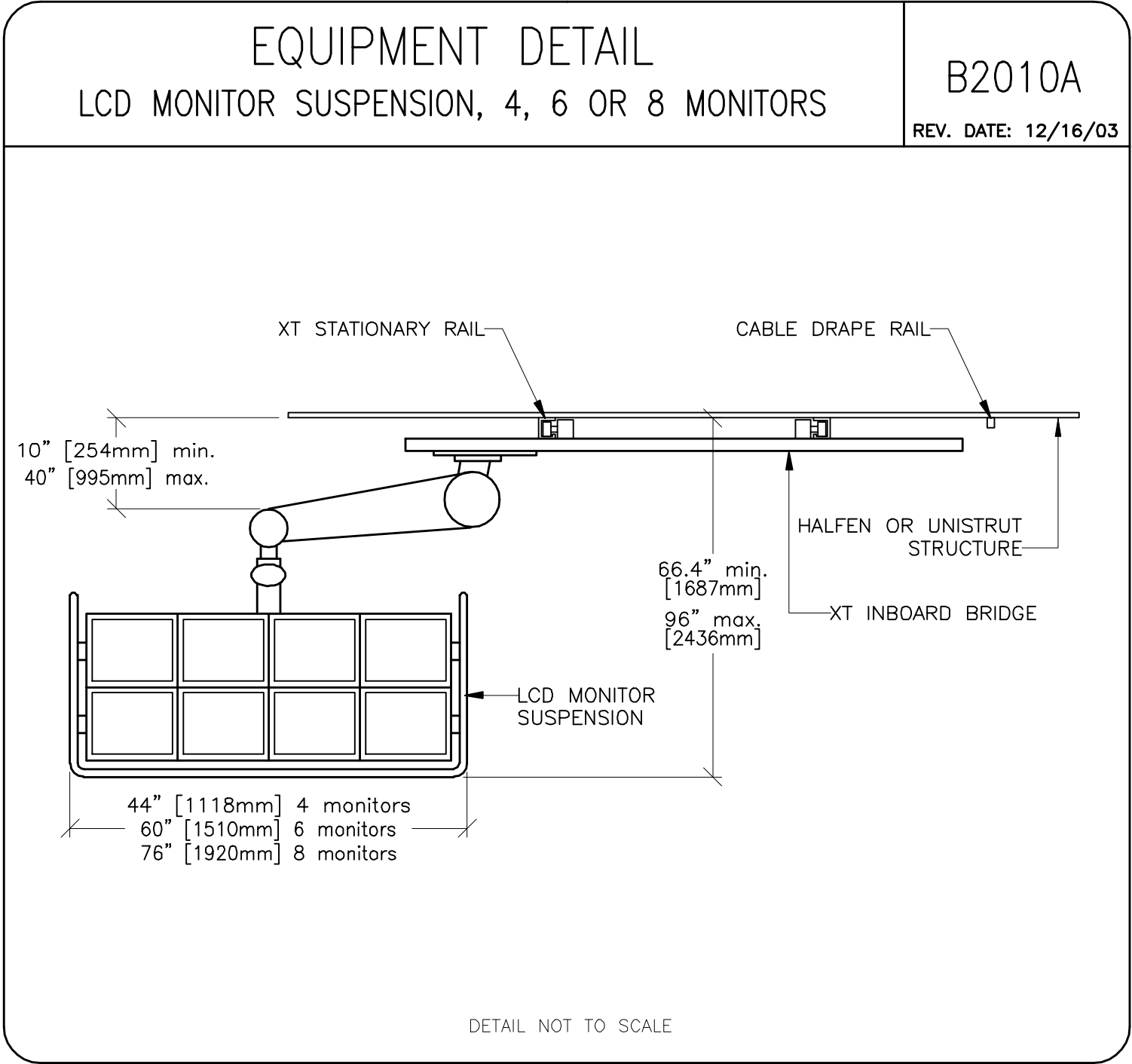
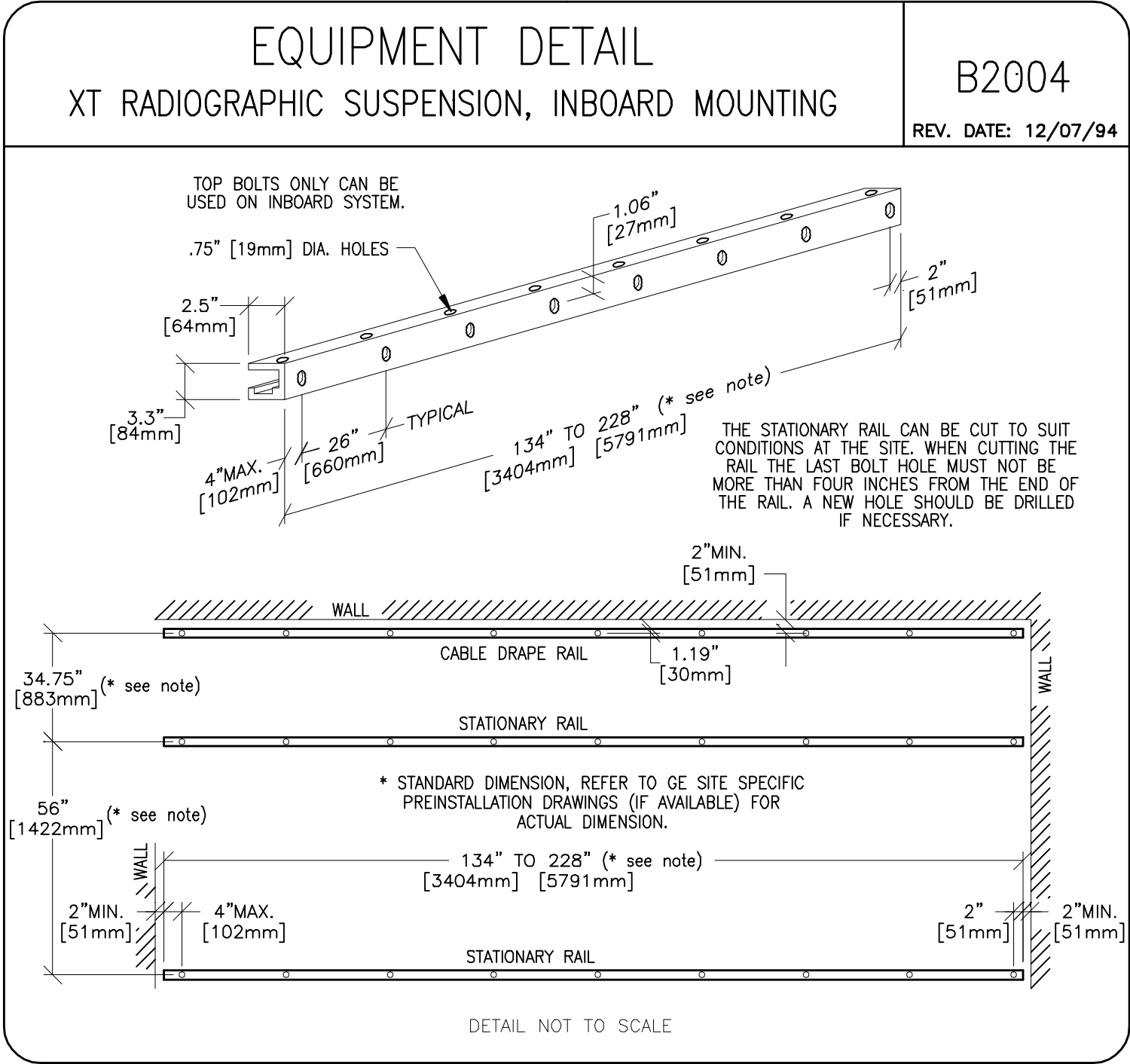
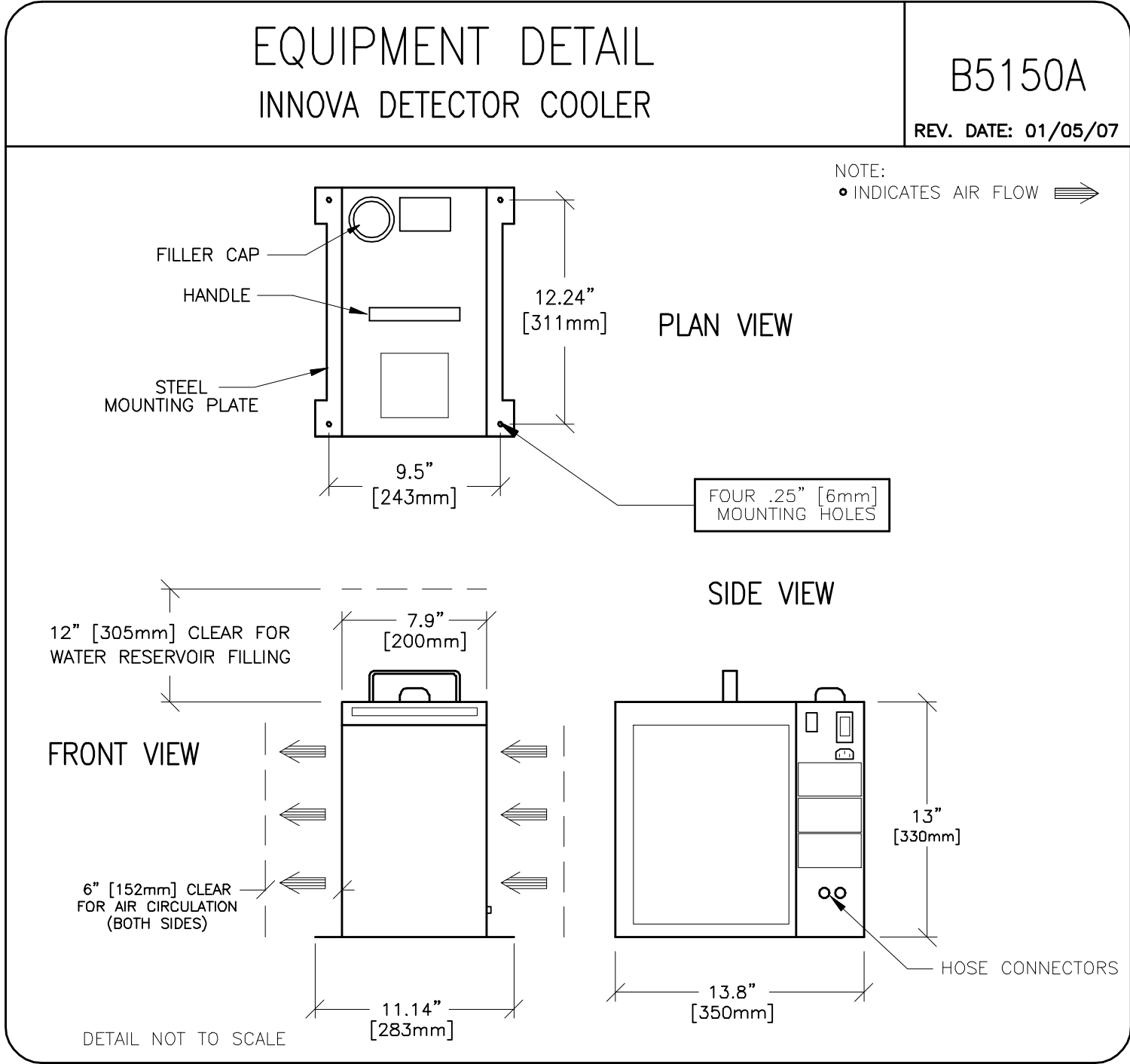
REVISION HISTORY:

SHEET

E4

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





GE Healthcare Technologies

Installation Services Design Center

Milwaukee, Wisconsin

SHEET TITLE: EQUIPMENT DETAILS

MODALITY TYPE: INNOVA 2121/3131 BIPLANE

THIS PLAN IS SUBMITTED TO SUGGEST LOCATION OF GE HEALTHCARE EQUIPMENT IN A FACILITY. IT IS NOT TO BE USED FOR CONSTRUCTION. IN PREPARING THIS PLAN, EVERY EFFORT HAS BEEN MADE TO CONFORM TO ACTUAL EQUIPMENT EXPECTED TO BE INSTALLED. IT IS NOT TO BE USED FOR ANY OTHER PURPOSES. GE HEALTHCARE TECHNOLOGIES, INC. CANNOT ACCEPT RESPONSIBILITY FOR ANY DAMAGES RESULTING THEREFROM.

PROJECT TITLE:

INTERVENTIONAL RADIOLOGY (IR) LAB

TYPICAL LAYOUT

PROJECT	REVISION
4-60	00
DATE:	11-18-08
DRAWN BY:	LLM
CHECKED BY:	TST

REVISION HISTORY:

SHEET

D2

B5150H

NOTE: XR-BUZZER BRACKET IS MOUNTED ON WALL, ABOVE CEILING. PLACE SPEAKER ABOVE GRILLED CEILING TILE FOR SOUND PENETRATION.

NOTE: XR-BUZZER BRACKET IS MOUNTED ON WALL, ABOVE CEILING. PLACE SPEAKER ABOVE GRILLED CEILING TILE FOR SOUND PENETRATION.

DETAIL NOT TO SCALE

MODALITY TYPE: INNOVA 2121/3131 BIPLANE

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.

PROJECT TITLE:

INTERVENTIONAL RADIOLOGY (IR) LAB TYPICAL LAYOUT

PROJECT	REVISION
4-60	00

DATE:	11-18-08
DRAWN BY:	LLM
CHECKED BY:	TST

REVISION HISTORY:

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