



OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT
FACILITIES DEVELOPMENT DIVISION

APPLICATION FOR OSHPD PREAPPROVAL OF MANUFACTURER'S CERTIFICATION (OPM)

OFFICE USE ONLY
APPLICATION #: OPM-0047-13

OSHPD Preapproval of Manufacturer's Certification (OPM)

Type: [] New [] Renewal [] Update to Pre-CBC 2013 OPA Number: _____

Manufacturer Information

Manufacturer: Skyline Medical, Inc.

Manufacturer's Technical Representative: Dave Johnson

Mailing Address: 2915 Commers Drive, Suite 900, Eagan, MN 55121

Telephone: 651-389-4804 Email: djohnson@skylinemedical.com

Product Information

Product Name: STREAMWAY Fluid Management System

Product Type: Automated Fluid Waste Disposal

Product Model Number: 4501.3000 Gen2

General Description: Wall mounted or recessed mounted automated surgical waste fluid disposal system that collects, measures, and disposed of the surgical waste.

Applicant Information

Applicant Company Name: Skyline Medical, Inc.

Contact Person: Dave Johnson

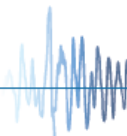
Mailing Address: 2915 Commers Drive, Suite 900, Eagan, MN 55121

Telephone: 651-389-4804 Email: djohnson@skylinemedical.com

I hereby agree to reimburse the Office of Statewide Health Planning and Development review fees in accordance with the California Administrative Code, 2013.

Signature of Applicant: [Signature] Date: 12/12/2013

Title: Chief Operating Officer Company Name: Skyline Medical, Inc.





OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT FACILITIES DEVELOPMENT DIVISION

STATE OF CALIFORNIA – HEALTH AND HUMAN SERVICES AGENCY
OSH-FD-700 (REV 5/30/13)

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Registered Design Professional Preparing Engineering Recommendations

Company Name: Firouzi Consulting Engineers, Inc.

Name: Masoud Firouzi California License Number: C36433

Mailing Address: PO Box 1973, Orinda, CA 94563

Telephone: 415-997-9560 Email: mikefirouzi@gmail.com

OSHPD Special Seismic Certification Preapproval (OSP)

- Special Seismic Certification is preapproved under OSP- (Separate application for OSP is required)
- Special Seismic Certification is no preapproved

Certification Method(s)

- Testing in accordance with: ICC-ES AC156 FM 1950-10
- Other* (Please Specify): _____

OPM-0047-13

*Use of criteria other than those adopted by the California Building Standards Code, 2013 (CBSC 2013) for component supports and attachments are not permitted. For distribution system, interior partition wall, and suspended ceiling seismic bracings, test criteria other than those adopted in the CBSC 2013 may be used when approved by OSHPD prior to testing.

DATE: 01/31/2014

- Analysis
- Experience Data
- Combination of Testing, Analysis, and/or Experience Data (Please Specify): _____

List of Attachments Supporting the Manufacturer's Certification

- Test Report Drawings Calculations Manufacturer's Catalog
- Other(s) (Please Specify): OPA-2246-07 and OPA-2247-07

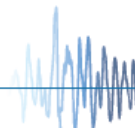
OFFICE USE ONLY – OSHPD APPROVAL VALID FOR CBC 2013 ONLY

Signature:  Date: January 31, 2014

Print Name: William Staehlin

Title: Senior Structural Engineer

Condition of Approval (if applicable): _____



FIROUZI CONSULTING ENGINEERS, INC.

Manufacturer: SkyLine Medical, Inc.

DES. BY: SS PAGE 1 OF 3

Streamway Automated Fluid Waste Disposal, Model:

FCE JOB NO.:

DATE

4501.3000 Gen2 Steamway, Surfaced Mounted and Partially Recessed

1119

01-08-14

GENERAL NOTES

This OSHPD Preapproval of Manufacturer's Certification (OPM) is based on the CBC 2013. The demand (design forces) for use with this OPM shall be based on the CBC 2013

SCOPE OF PRE-APPROVAL:

Scope of pre-approval covers only the supports & attachments of the unit to the hospital building's structure.

DESIGN CRITERIA:

- 1) Governing code: 2013 California Building Code, and ASCE 7-10.
- 2) Allowable Stress design is used; strength stress values used to obtain capacities, subsequently converted to ASD to obtain allowable.:
Vertical Force (Ev)=0.500 Wp and Horizontal Forces(Eh)=1.800 Wp (strength level coefficients)
SDS=2.5, ap=1.5, lp=1.5, Rp=2.5, z/h <=1.0, Category IV, ASCE 7-10, Table 13.6.1
- 3) Center of gravity shown represents the load from fully loaded equipment weight.
- 4) Design assumptions made for this equipment to be installed at any location in State of California and in any floor height where SDS is not greater than 2.5.
- 5) Approval of Structural Engineer of Record for Support Structure Design is not part of this Pre-Approval.
- 6) All equipment base material shall be 16 ga. minimum 5052 aluminum ASTM B209 (Fy=28 ksi)

Responsibilities of Structural Engineer of Record of the Building

- 1) Verify that project specific values of SDS & z/h result in seismic forces (Eh, Ev) that do not exceed the values on the details.
- 2) Verify that all new or existing anchors are an adequate distance from the anchors shown in this pre-approval. SEOR shall verify that there is no adverse interaction where other anchors are within 6" from this unit's anchors.
- 4) Verify that the installation is in conformance with the 2013 CBC & with the details shown in this pre-approval. Verify that the actual equipment's wt, CG location, anchor locations, anchor details, and the material and gage of the unit where attachments are made agree with the information shown on the pre-approval documents.



6-30-2014

FIROUZI CONSULTING ENGINEERS, INC.

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DES. BY: SS PAGE 2 OF 3

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4501.3000 Gen2 Steamway, Surfaced Mounted and Partially Recessed

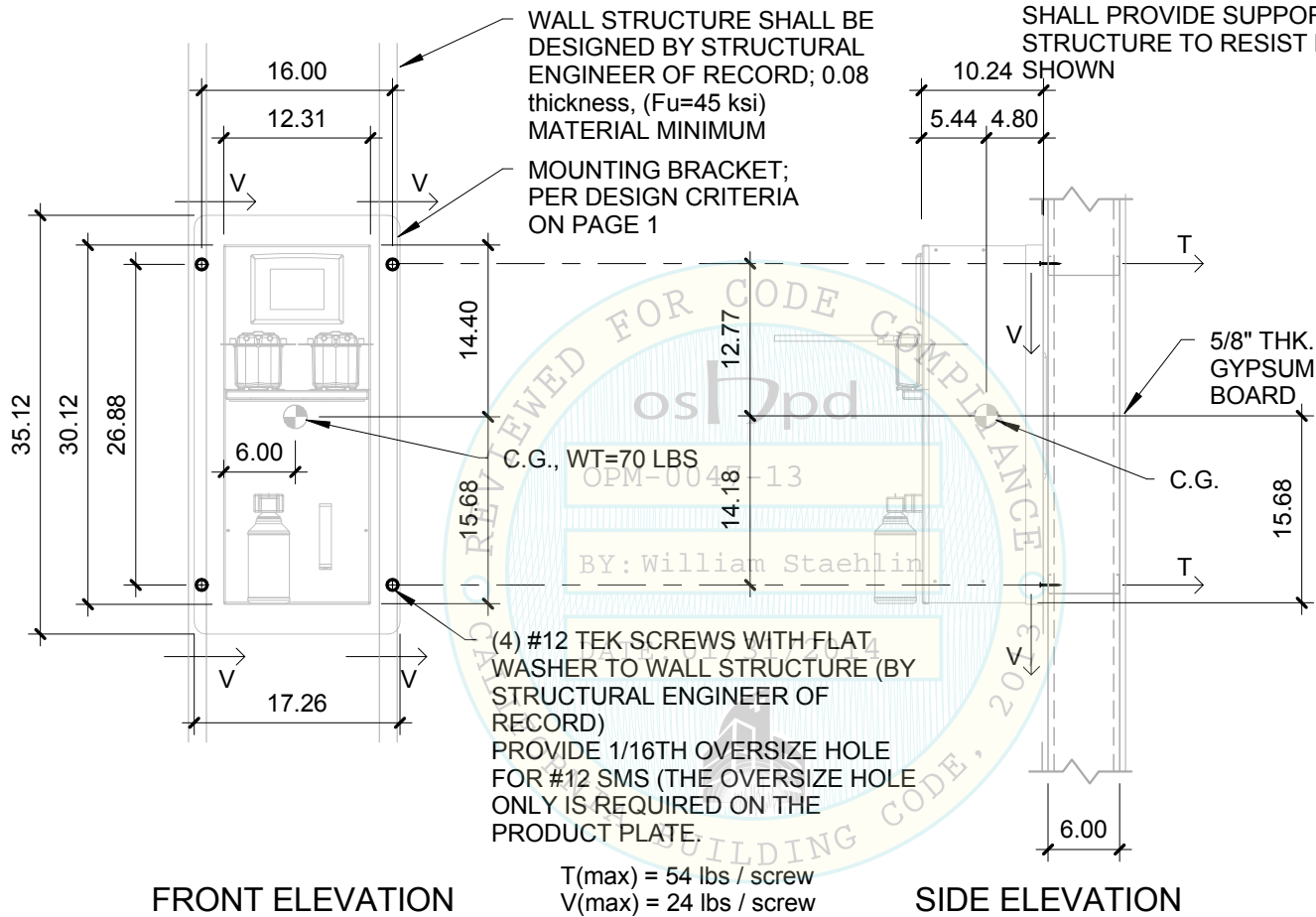
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01-08-14

① surfaced mounted
3/4" = 1'-0"

NOTES:

1. SEE PAGE 1 FOR DESIGN CRITERIA
2. STRUCTURAL ENGINEER OF RECORD SHALL PROVIDE SUPPORT STRUCTURE TO RESIST LOADS SHOWN



FIROUZI CONSULTING ENGINEERS, INC.

Manufacturer: SkyLine Medical, Inc.

DES. BY: SS

PAGE 3 OF 3

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NOTES:

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① Partially Recessed
3/4" = 1'-0"

