

OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT FACILITIES DEVELOPMENT DIVISION

| WINDLA | | | | |
|--|---|--|--|--|
| APPLICATION FOR OSHPD PREAPPROVAL OF | OFFICE USE ONLY APPLICATION #: OPM-0335 | | | |
| MANUFACTURER'S CERTIFICATION (OPM) | | | | |
| OSHPD Preapproval of Manufacturer's Certification (OPM) | | | | |
| Type: New X Renewal/Update | | | | |
| | | | | |
| Manufacturer Information | | | | |
| Manufacturer: Shimadzu Medical Systems | | | | |
| Manufacturer's Technical Representative: Jim Mekker | | | | |
| Mailing Address: 25101 Chagrin Blvd., Suite 240, Beechwood, OH 44122 | | | | |
| Telephone: (216) 288-0709 Email: mekker@shimadzu-u | sa.com | | | |
| FOR CODE COM | | | | |
| Product Information OSHPD | | | | |
| Product Name: BK-200CH-200 CABINETS (STACKED) | Y. | | | |
| Product Type: Instrumentation Cabinet | CH | | | |
| Product Model Number: BK-22/CH-200 | | | | |
| General Description: Subcomponent of RadSpeed System | | | | |
| DATE: 09/29/2021 | 5070 | | | |
| Applicant Information | 3 | | | |
| Applicant Company Name: EASE LLC. | | | | |

Contact Person: Tiffany Tonn

Mailing Address: 1515 FAIRVIEW AVE, STE 205, MISSOULA, MT 59801

Telephone: (406) 541-3273 Email: tiffany@easeco.com

Title: Office Manager

14/MM



"Access to Safe. Quality Healthcare Environments that Meet California's Diverse and Dynamic Needs"

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY



OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT FACILITIES DEVELOPMENT DIVISION

| Registered Design Professonal Preparing Engineering Recommendations | | | | | | | | |
|--|--|--|--|--|--|--|--|--|
| Company Name: EASE | | | | | | | | |
| Name: Jonathan Roberson California License Number: S4197 | | | | | | | | |
| Mailing Address: 5877 Pine Ave., Suite 210, Chino Hills, CA 91709 | | | | | | | | |
| Telephone: (951) 295-1892 Email: jon@EASECo.com | | | | | | | | |
| | | | | | | | | |
| OSHPD Special Seismic Certification Preapproval (OSP) | | | | | | | | |
| Special Seismic Certification is preapproved under OSP OSP Number: | | | | | | | | |
| | | | | | | | | |
| OR CODE | | | | | | | | |
| Certification Method | | | | | | | | |
| Testing in accordance with: CC-ES AC156 FM 1950-16 | | | | | | | | |
| Other(s) (Please Specify): | | | | | | | | |
| *Use of criteria other than those adopted by the California Building Standards Code, 2019 (CBSC 2019) 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 2019 may be used when approved by OSHPD prior to testing. | | | | | | | | |
| X Analysis BY: Hayne Kim | | | | | | | | |
| Experience Data DATE: 09/29/2021 | | | | | | | | |
| Combination of Testing, Analysis, and/or Experience Data (Please Specify): | | | | | | | | |
| TO THE CONTRACT OF THE CONTRAC | | | | | | | | |
| OSHPD Approval BUILDING | | | | | | | | |
| Date: 9/29/2021 | | | | | | | | |
| Name: Hayne Kim Title: Senior Structural Engineer | | | | | | | | |
| Condition of Approval (if applicable): | | | | | | | | |

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EQUIPMENT ANCHORAGE & SEISMIC ENGINEERING

5877 Pine Ave, Ste. 210 Chino Hills, CA. 91709 Phn: (909) 606-7622

Office of Statewide Health Planning and Development

PREAPPROVAL OF MANUFACTURER'S CERTIFICATION OPM-0335

THIS PREAPPROVAL CONFORMS TO THE 2019 CALIFORNIA BUILDING CODE

MANUFACTURER:

SHIMADZU MEDICAL SYSTEMS

EQUIPMENT NAME: CH-200/BK-200 CABINETS STACKED

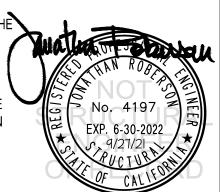
Sheet: <u>1 of 7</u> Date: 9/27/21

GENERAL NOTES

- 1. THIS OSHPD PREAPPROVAL OF MANUFACTURER'S CERTIFICATION (OPM) IS BASED ON THE 2019 CBC. THE DEMANDS (DESIGN FORCES) FOR USE WITH THIS OPM SHALL BE BASED ON THE 2019 CBC
- 2. THIS DOCUMENT MAY ONLY BE USED WITH THE EXPRESS WRITTEN CONSENT OF THE MANUFACTURER LISTED ABOVE FOR THE SPECIFIC PROJECT SITE AND INSTALLATION LOCATION. THIS DOCUMENT IS INVALID WITHOUT SUCH CONSENT.
- 3. THIS PREAPPROVAL CONFORMS TO THE 2019 CALIFORNIA BUILDING CODE WHERE SDS IS NOT GREATER THAN 2.30 & 2.00. SEE DETAIL FOR APPLICABILITY
- 4. FORCES PER ASCE 7-16 SECTION 13.3.1, EQUATIONS 13.3-1, 13.3-2 & 13.3-3,
 - WHERE SDS = 2.30, a_p = 1.0, I_p = 1.5, R_p = 2.5, z/h = 0 AT CONCRETE SLAB. SEE FOLLOWING SHEETS FOR Ω_0
 - WHERE SDS = 2.00, **a**_p = 1.0, **I**_p = 1.5, **R**_p = 2.5, z/h < 1 AT CONCRETE SLAB ON METAL DECK. SEE FOLLOWING SHEETS FOR Ω₀
- 5. THIS PREAPPROVAL COVERS ONLY THE SUPPORTS AND ATTACHMENTS OF THE EQUIPMENT TO THE STRUCTURE.
- ALL DESIGN FORCES SHOWN ON THE DRAWINGS ARE FACTORED LOADS THAT SHALL BE USED FOR STRENGTH DESIGN.
- 7. CONCRETE SLAB ON METAL DECK DETAIL VALID FOR DEMANDS SHOWN AT ANY ELEVATION IN THE BUILDING. (i.e. z/h < 1)
- 8. CONCRETE SLAB DETAIL VALID FOR DEMANDS SHOWN AT OR BELOW GRADE. (i.e. z/h = 0)

9. RESPONSIBILITIES OF THE STRUCTURAL ENGINEER OF RECORD OF THE BUILDING

- A. PROVIDE SUPPORTING STRUCTURE TO SUPPORT WEIGHTS AND FORCES SHOWN IN ADDITION TO ALL OTHER LOADS.
- B. VERIFY THAT THE INSTALLATION IS IN CONFORMANCE WITH THE 2019 CBC AND WITH THE DETAILS, MATERIAL AND GAGE OF THE UNIT WHERE ATTACHMENTS ARE MADE AGREE WITH THE INFORMATION SHOWN ON THE PREAPPROVAL DOCUMENTS.
- C. VERIFY THAT PROJECT SPECIFIC VALUES OF SDS & z/h RESULT IN SEISMIC FORCES (Eh, Ev) THAT DO NOT EXCEED THE VALUES ON THE DETAILS.
- D. VERIFY THAT THE CONCRETE SLAB TO WHICH THE EQUIPMENT IS ANCHORED MEETS THE REQUIREMENTS OF THE APPLICABLE ICC ESR REPORT AND THIS OPM.
- E. VERIFY THAT THE ANCHORS ARE AN ADEQUATE DISTANCE FROM ANY SLAB EDGES OR OPENINGS (SEE TYPICAL DETAIL ON SHEET 2).
- F. VERIFY THAT ALL NEW OR EXISTING ANCHORS ARE AN ADEQUATE DISTANCE FROM THE UNIT ATTACHMENTS AND CHECK FOR INTERACTION WHERE OTHER ANCHORS ARE WITHIN 18" OR 6hef FROM THIS UNIT'S ANCHORS.



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SHIMADZU MEDICAL SYSTEMS

CH-200/BK-200 CABINETS STACKED

JOB NO. 11-2101

DATE 9/27/21

SHEET 2

7 _{SHEETS}

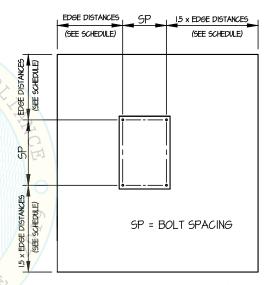
10. EXPANSION ANCHORS:

A. ATTACHMENT IS TO BE MADE WITH THE ANCHORS LISTED BELOW AND INSTALLED AS DESCRIBED IN THE CORRESPONDING ICC REPORT.

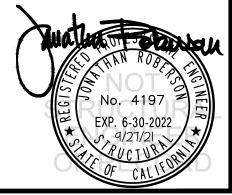
| Anchor Diameter | Concrete Type | Min. f'c (psi) | Anchor Type | ICC Report No. | Min. Embed. | Min. Spacing | Min. Edge Dist. | Min. Conc. Thickness | Torque Test | Direct Tension Test |
|-----------------|----------------------|-------------------|---------------------|-------------------|----------------|-----------------|--------------------|-------------------------|----------------|------------------------|
| 3/8" | Sand Light Weight | 3000 | Hilti Kwik Bolt TZ2 | ESR-4266 | 2" | 8" | 16" | 3.25" | 30 FT-LB | 1190 lb |
| 3/8" | Normal Weight | 3000 | Hilti Kwik Bolt TZ2 | ESR-4266 | 2" | 8" | 14" | 4" | 30 FT-LB | 1983 lb |

- B. THIS PREAPPROVAL ALLOWS FOR UP TO A MAXIMUM OF 2 ADJACENT CONCRETE SLAB EDGES, 14" OR 16" AWAY MINIMUM (i.e. CORNER).

 SEE ADJACENT DETAIL FOR ADDITIONAL MINIMUM ALLOWABLE CONCRETE EDGE DISTANCES.
- C. TESTING AND SPECIAL INSPECTION OF EXPANSION ANCHORS SHALL BE PERFORMED BY AN APPROVED INDEPENDENT AGENCY EMPLOYED BY THE FACILITY OWNER PER CBC 1704A & 1910A.5 AND CAC 7-149. ALL REPORTS SHALL BE SENT TO THE INSPECTOR OF RECORD, OWNER AND THE ARCHITECT OR ENGINEER IN RESPONSIBLE CHARGE.
 - (i) AFTER AT LEAST 24 HOURS HAVE ELAPSED SINCE INSTALLATION, DIRECT PULL TENSION TEST OR TORQUE TEST AT LEAST 50% OF THE ANCHORS.
 - (ii) ACCEPTANCE CRITERIA:
 - DIRECT TENSION TEST: THE ANCHOR SHOULD HAVE NO OBSERVABLE MOVEMENT AT THE TEST LOAD. A PRACTICAL WAY TO DETERMINE OBSERVABLE MOVEMENT IS THAT THE WASHER BECOMES LOOSE.
 - TORQUE TEST: THE APPLICABLE TORQUE MUST BE ACHIEVED WITHIN THE FOLLOWING LIMITS: WEDGE TYPE: 1/2 TURN OF THE NUT
 - (iii) IF ANY ANCHOR FAILS, TEST ALL ANCHORS.
- D. AVOID DAMAGING EXISTING STEEL REINFORCING IN CONCRETE SLAB WHEN INSTALLING CONCRETE EXPANSION ANCHORS.
- E. PROVIDE FOR FULL THREAD ENGAGEMENT OF NUT & WASHER.



TYPICAL CONCRETE EDGE DETAIL



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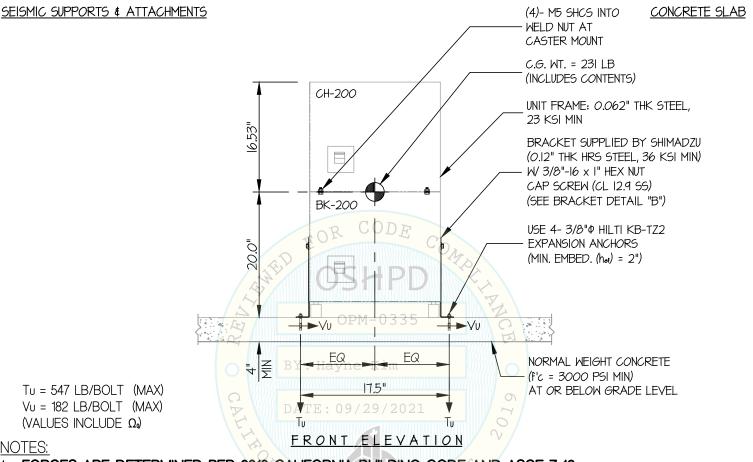
DES. J. ROBERSON

JOB NO. 11-2101

DATE 9/27/21

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1. FORCES ARE DETERMINED PER 2019 CALIFORNIA BUILDING CODE AND ASCE 7-16

STRENGTH DESIGN IS USED. (Sps = 2.30, 2p = 1.0, 2p = 1.5, 2p = 2.5, 2p = 2.0, 2p = 0.0

HORIZONTAL FORCE (Eh) = 1.035 Wp

HORIZONTAL FORCE (Emh) = 2.07 Wp (FOR CONCRETE ANCHORAGE)

VERTICAL FORCE (E_V) = 0.46 W_p

2. CENTER OF GRAVITY (C.G.) AND WEIGHT ARE THE GOVERNING PARAMETERS FOR DESIGN. THIS PREAPPROVAL ENCOMPASSES ALL WEIGHTS UP TO THE MAXIMUM WEIGHT SHOWN.

3. STRUCTURAL ENGINEER OF RECORD FOR THE BUILDING SHALL PROVIDE SUPPORT STRUCTURE DESIGNED TO SUPPORT WEIGHTS AND FORCES SHOWN IN COMBINATION WITH ALL OTHER

LOADS THAT MAY BE PRESENT.

4. CH-200/BK-200 CABINETS STACKED (UUT-2) HAS BEEN SHAKE TABLE TESTED OSP-0319-10 REV2 (PENDING).

5. SEE GENERAL NOTES: SHEET 1 AND 2



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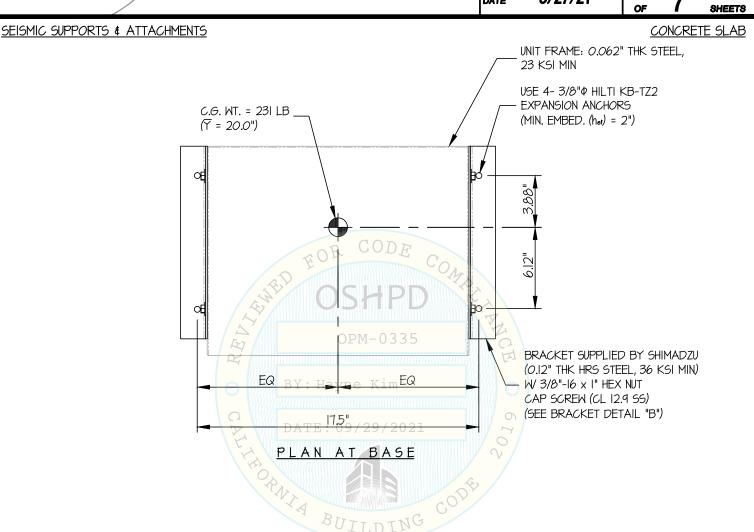
CH-200/BK-200 CABINETS STACKED

DES. J. ROBERSON

11-2101 JOB NO.

9/27/21 DATE

SHEET





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CH-200/BK-200 CABINETS STACKED

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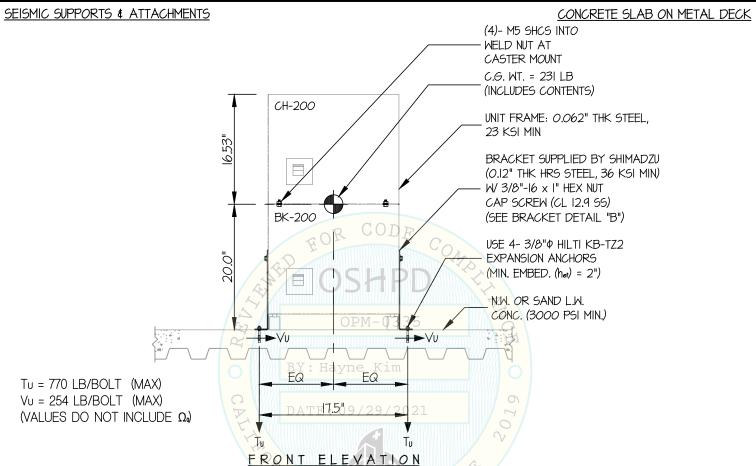
JOB NO. 11-2101

DATE 9/27/21

SHEET

5

OF SHEETS



NOTES:

1. FORCES ARE DETERMINED PER 2019 CALIFORNIA BUILDING CODE AND ASCE 7-16.

STRENGTH DESIGN IS USED. (SDS = 2.00, 2p = 1.0, 2p = 1.5, 2p = 2.5, 2p = 2.0, 2p

HORIZONTAL FORCE (En) = 1.44 Wp HORIZONTAL FORCE (Emh) = 2.88 Wp (FOR CONCRETE ANCHORAGE) VERTICAL FORCE (Ev) = 0.40 Wp

- 2. CENTER OF GRAVITY (C.G.) AND WEIGHT ARE THE GOVERNING PARAMETERS FOR DESIGN. THIS PREAPPROVAL ENCOMPASSES ALL WEIGHTS UP TO THE MAXIMUM WEIGHT SHOWN.
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SHEET

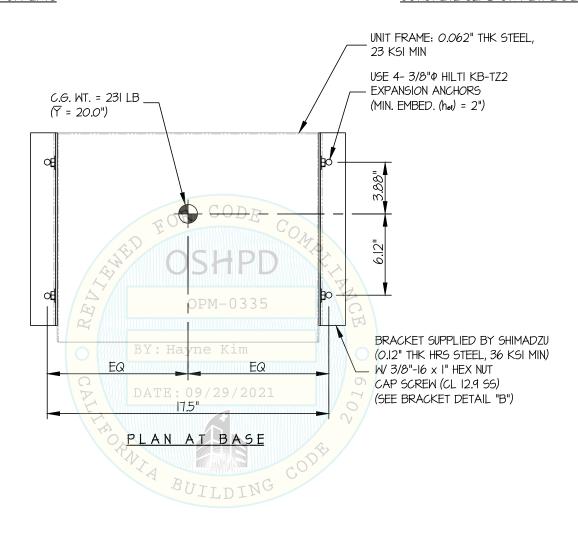
CH-200/BK-200 CABINETS STACKED

9/27/21 DATE

SHEETS

SEISMIC SUPPORTS & ATTACHMENTS

CONCRETE SLAB ON METAL DECK





EASE

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7 SHEETS

SHEET

