

### OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT FACILITIES DEVELOPMENT DIVISION

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

OFFICE USE ONLY

APPLICATION #: OPM-0646

Type:	Х	New	Renewal

Renewal/Update

**OSHPD** Preapproval of Manufacturer's Certification (OPM)

### Manufacturer Information

Manufacturer: Carestream Health

Manufacturer's Technical Representative: Christopher Kralles

Mailing Address: 1049 Ridge Road West, Rochester, NY 14615

Telephone: () - Email:	christopher.kralles@carestreamhealth.com
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#### Product Information

Product Name: DRX-Compass Patient Table

Product Type: Other Electrical & Mechanical Components

Product Model Number: N/A General Description: Fluoroscopy & General Radiology Imaging

# **Applicant Information**

Contact Person: Tiffany Tonn

Applicant Company Name: EASE LLC.

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

Telephone: (406) 541-3273

Email: tiffany@easeco.com

Title: Office Manager

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

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

OSHP



## OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT FACILITIES DEVELOPMENT DIVISION

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)						
X Special Seismic Certification is preapproved under OSP OSP Number: OSP-0703						
OB CODE						
Certification Method						
Testing in accordance with: ICC-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						
Experience Data						
Combination of Testing, Analysis, and/or Experience Data (Please Specify):						
Pop.						
CON						
OSHPD Approval						
Date: 10/6/2021						
Name: William Staehlin Title: Senior Structural Engineer						
Condition of Approval (if applicable):						



		EQUIRMENT ANCHORAGE & SEISMIC ENGINEERING Office of Statewide Health Planning and Development PREAPPROVAL OF MANUFACTURER'S CERTIFICATION OPM-0646 THIS PREAPPROVAL CONFORMS TO THE 2019 CALIFORNIA BUILDING CODE	5877 Pine Ave, Ste. 210 Chino Hills, CA. 91709 Phn: (909) 606-7622					
		FACTURER: CARESTREAM HEALTH, INC MENT NAME: COMPASS SYSTEM PATIENT TABLE	Sheet: <u>1 of 8</u> Date: 10/1/21					
	TH	IIS OSHPD PREAPPROVAL OF MANUFACTURER'S CERTIFICATION (OPM) IS BASED ON THE 2019 CBC. THE DE	EMANDS					
2.	ŤН	ESIGN FORCES) FOR USE WITH THIS OPM SHALL BE BASED ON THE 2019 CBC IIS DOCUMENT MAY ONLY BE USED WITH THE EXPRESS WRITTEN CONSENT OF THE MANUFACTURER LISTE						
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 0.90, 2.00 & 2.30.								
4.	SE FO	EE DETAIL FOR APPLICABILITY PRCES PER ASCE 7-16 SECTION 13.3,1, EQUATIONS 13.3-1, 13.3-2 & 13.3-3,						
		HERE SDS = 0.90, $a_p = 1.0$ , $I_p = 1.5$ , $R_p = 1.5$ , $z/h = 0$ AT CONCRETE SLAB. SEE FOLLOWING SHEETS FOR $\Omega_0$						
	WH	HERE SDS = 2.30, $a_p = 1.0$ , $I_p = 1.5$ , $R_p = 1.5$ , $z/h = 0$ AT CONCRETE SLAB. SEE FOLLOWING SHEETS FOR $\Omega_0$						
	WHERE SDS = 2.00, $a_p = 1.0$ , $I_p = 1.5$ , $R_p = 1.5$ , $z/h = 0$ AT CONCRETE SLAB & $z/h \le 1$ AT CONCRETE SLAB ON METAL DECK.							
SEE FOLLOWING SHEETS FOR Ω. 5. THIS PREAPPROVAL COVERS ONLY THE SUPPORTS AND ATTACHMENTS OF THE EQUIPMENT TO THE STRUCTURE.								
5. 6.		L DESIGN FORCES SHOWN ON THE DRAWINGS ARE FACTORED LOADS THAT SHALL BE USED FOR STRENG						
7. CONCRETE SLAB ON METAL DECK DETAIL VALID FOR DEMANDS SHOWN AT ANY ELEVATION IN THE BUILDING. (i.e. $z/h \le 1$ )								
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 O	THER LOADS.					
	В.	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 SH PREAPPROVAL DOCUMENTS.	IOWN ON THE					
	C.	VERIFY THAT PROJECT SPECIFIC VALUES OF SDS & Z/h RESULT IN SEISMIC FORCES (Eh, Ev ) NAT 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.	HAN ROBALL					
	E.	VERIFY THAT THE ANCHORS ARE AN ADEQUATE DISTANCE FROM ANY SLAB	No. 4197					
	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.	EXP. 6-30-2022					













