

Type:

### DEPARTMENT OF HEALTH CARE ACCESS AND INFORMATION OFFICE OF STATEWIDE HOSPITAL PLANNING AND DEVELOPMENT

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

OFFICE USE ONLY

APPLICATION #: OPM-0745

HCAI Preapprova	I of Manufacturer's	Certification	(OPM
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X New Renewal/Update

#### **Manufacturer Information**

Manufacturer: BD

Manufacturer's Technical Representative: Jamie Garcia

Mailing Address: 10020 Pacific Mesa Blvd., San Diego, CA 92121

Telephone: (866) 488-1408

Email: jamie.garcia3@bd.com

#### **Product Information**

Product Name: BD PYXIS PRO STORAGE CABINETS

Product Type: Other electrical and mechanical components

Product Model Number: Medstation Main, 7-Drawer Auxiliary, Refrigerator Auxiliary, Secure Tower Auxiliary, 7-Drawer Auxiliary w/ Secure Tower, Refrigerator Auxiliary w/ Secure Tower

General Description: System provides easy access to needed supplies on nursing floors and throughout your healthcare facility. These secure storage devices provide staff with the ability to document supply usage, in real-time

### **Applicant Information**

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 Assistant

"A healthier California where all receive equitable, affordable, and quality health care"

STATE OF CALIFORNIA – HEALTH AND HUMAN SERVICES AGENCY





## DEPARTMENT OF HEALTH CARE ACCESS AND INFORMATION OFFICE OF STATEWIDE HOSPITAL PLANNING AND DEVELOPMENT

# Registered Design Professonal Preparing Engineering Recommendations

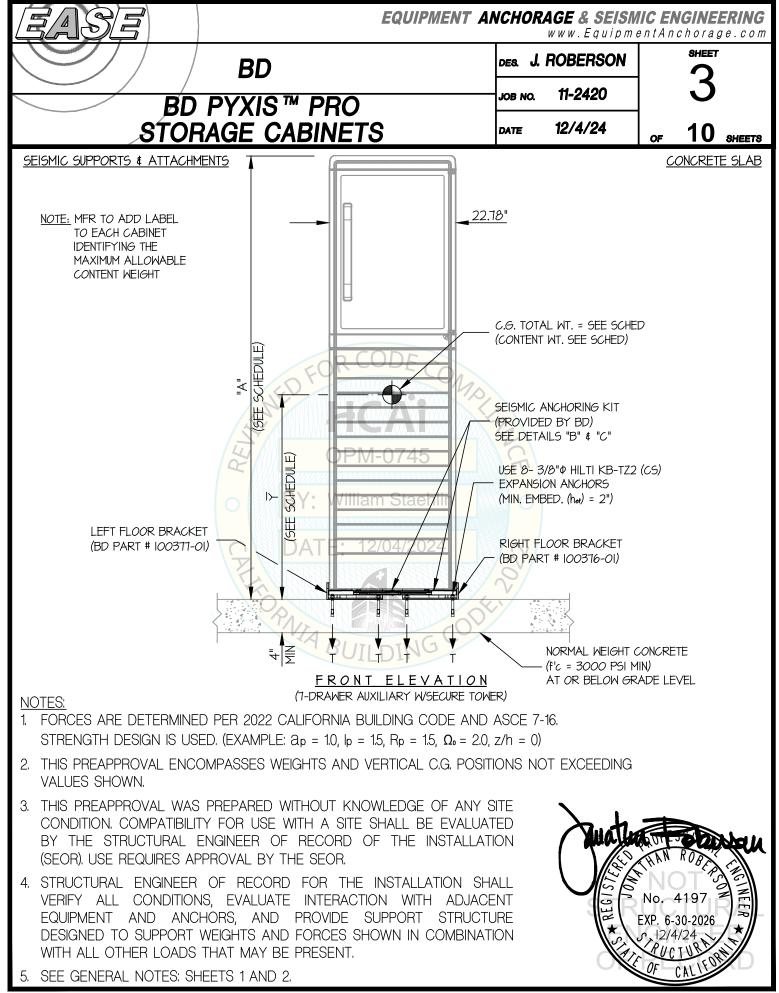
Company Name: EASE LLC		
Name: Jonathan Roberson		California License Number: S4197
Mailing Address: 5877 Pine Ave., Suite 210, Chind	o Hills, CA	91709
Telephone: (951) 295-1892	Email: jo	on@EASECo.com

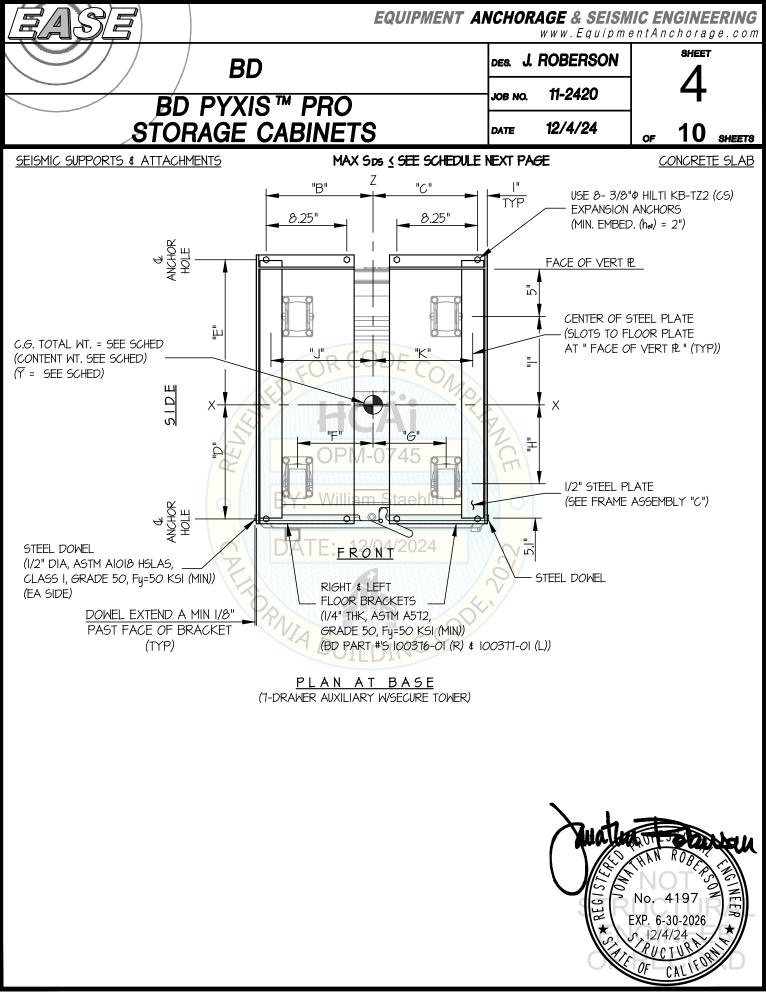
HCAI Special Seismic Certification Preapproval (OSP)
Special Seismic Certification is preapproved under OSP OSP Number:
EOR CODE COL
Certification Method
Testing in accordance with: ICC-ES AC156 FM 1950-16
Other(s) (Please Specify):
*Use of criteria other than those adopted by the California Building Standards Code, 2022 (CBSC 2022) 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 2022 may be used when approved by HCAI prior to testing.
X Analysis
Experience Data
Combination of Testing, Analysis, and/or Experience Data (Please Specify):
OP/VIA CODE
HCAI Approval
Date: 12/4/2024
Name:     William Staehlin     Title:     Senior Structural Engineer
Condition of Approval (if applicable):



	EQUIPMENT ANCHORAGE & SEISMIC ENGINEERING The Department of Health Care Access and Information PREAPPROVAL OF MANUFACTURER'S CERTIFICATION OPM-0745 THIS PREAPPROVAL CONFORMS TO THE 2022 CALIFORNIA BUILDING CODE	5877 Pine Ave, Ste. 210 Chino Hills, CA. 91709 Phn: (909) 606-7622
	NUFACTURER: BD JIPMENT NAME: BD PYXIS™PRO STORAGE CABINETS	Sheet: <u>1 of 10</u> Date: 12/4/24
1. 2. 3. 4. 5. 6. 7.	<b>NERAL NOTES</b> THIS HCAI PREAPPROVAL OF MANUFACTURER'S CERTIFICATION (OPM) IS BASED ON THE 2022 CBC. THE DEF (DESIGN FORCES) FOR USE WITH THIS OPM SHALL BE BASED ON THE 2022 CBC. THIS DOCUMENT MAY ONLY BE USED WITH THE EXPRESS WRITTEN CONSENT OF THE MANUFACTURER LIST SPECIFIC PROJECT SITE AND INSTALLATION LOCATION. THIS DOCUMENT IS INVALID WITHOUT SUCH CONSE THIS PREAPPROVAL CONFORMS TO THE 2022 CALIFORNIA BUILDING CODE WHERE SDS IS NOT GREATER TH SEE DETAIL FOR APPLICABILITY FORCES PER ASCE 7-16 SECTION 13.3.1, EQUATIONS 13.3-1, 13.3-2 & 13.3-3, WHERE SDS = 1.10, $a_p = 1.0$ , $l_p = 1.5$ , $R_p = 1.5$ , $z/h = 0$ AT CONCRETE SLAB. SEE FOLLOWING SHEETS FOR Ω <sub>0</sub> WHERE SDS = 1.70, $a_p = 1.0$ , $l_p = 1.5$ , $R_p = 1.5$ , $z/h = 0$ AT CONCRETE SLAB. SEE FOLLOWING SHEETS FOR Ω <sub>0</sub> WHERE SDS = 2.20, $a_p = 1.0$ , $l_p = 1.5$ , $R_p = 1.5$ , $z/h = 0$ AT CONCRETE SLAB & $z/h \le 1$ AT CONCRETE SLAB ON MET SEE FOLLOWING SHEETS FOR Ω <sub>0</sub> THIS PREAPPROVAL COVERS ONLY THE SUPPORTS AND ATTACHMENTS OF THE EQUIPMENT TO THE STRUCT ALL DESIGN FORCES SHOWN ON THE DRAWINGS ARE FACTORED LOADS THAT SHALL BE USED FOR STRENG CONCRETE SLAB ON METAL DECK DETAIL VALID FOR DEMANDS SHOWN AT ANY ELEVATION IN THE BUILDING CONCRETE SLAB DETAIL VALID FOR DEMANDS SHOWN AT OR BELOW GRADE. (i.e. $z/h = 0$ )	TED ABOVE FOR THE NT. IAN 1.10, 170 & 2.20 TAL DECK. CTURE. GTH DESIGN.
	<ul> <li>RESPONSIBILITIES OF THE STRUCTURAL ENGINEER OF RECORD OF THE BUILDING</li> <li>A. PROVIDE SUPPORTING STRUCTURE TO SUPPORT WEIGHTS AND FORCES SHOWN IN ADDITION TO ALL</li> <li>B. VERIFY THAT THE INSTALLATION IS IN CONFORMANCE WITH THE 2022 CBC AND WITH THE DETAILS, MATERIAL AND GAGE OF THE UNIT WHERE ATTACHMENTS ARE MADE AGREE WITH THE INFORMATION S PREAPPROVAL DOCUMENTS.</li> <li>C. VERIFY THAT PROJECT SPECIFIC VALUES OF SDS &amp; z/h RESULT IN SEISMIC FORCES (Eh, Ev) NAT DO NO EXCEED THE VALUES ON THE DETAILS.</li> <li>D. VERIFY THAT THE CONCRETE SLAB TO WHICH THE EQUIPMENT IS ANCHORED MEETS TH REQUIREMENTS OF THE APPLICABLE ICC ESR REPORT AND THIS OPM.</li> <li>E. VERIFY THAT THE ANCHORS ARE AN ADEQUATE DISTANCE FROM ANY SLAB EDGES OR OPENINGS (SEE TYPICAL DETAIL ON SHEET 2).</li> <li>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.</li> </ul>	HOWN ON THE

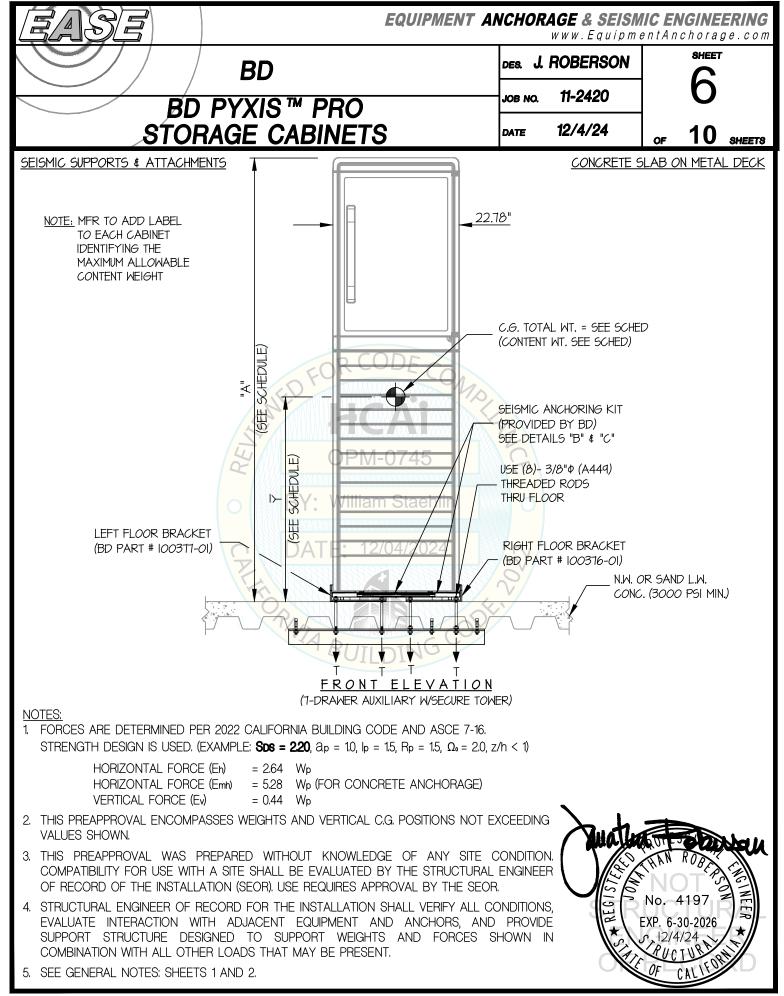
B	45					EQUIP	MENT	ANCHO			<b>CENGINEERING</b> ntAnchorage.com			
	9,			BD				DES.	J. ROBE	rson	SHEET			
									o. <b>11-24</b>	20	2			
				'YXIS™ F GE CABI		3		DATE	12/4/	24	OF 10 SHEETS			
10. <b>EXP</b>	ANSION AN					/					OF IU SHEETS			
А.		MENT IS TO ORRESPONE		E WITH THE ANCH REPORT.	ORS LISTED	) BELOW	and ins	TALLED AS	S DESCRIBE	D				
	Anchor Diameter	Concrete Type	Min. f'c (psi)	Anchor Type	Min. Embed.	Min. Edge Dist.	Min. Conc. Thickness	Torque Test	e Direct Tension Test					
	5/8"	Sand Light Weight	3000	Hilti Kwik Bolt TZ2	ESR-4266	2.75"	6.75"	12"	See Detail "A"	30 FT-LB	N/A			
	3/8"	Normal Weight	3000	Hilti Kwik Bolt TZ2	ESR-4266	2"	8"	14"	4"	30 FT-LB	1982 lb			
B. C.	CONCRE SEE ADJ EDGE DIS TESTING BE PERF EMPLOY AND CAC OF RECC RESPON (i) AFTE DIRE THE (ii) ACCE	TE SLAB EDO JACENT DETA STANCES. 3 AND SPECI 5 ORMED BY ED BY THE F C 7-149. ALL DRD, OWNEF ISIBLE CHAR ER AT LEAST CT PULL TEN ANCHORS. EPTANCE CR	Ges, 14" / All for a Al Inspe An Appr Facility Report: Rand th Ge. 24 Hour Ision te: Iteria:	FOR UP TO A MAXII AWAY MINIMUM (i.e. DDITIONAL MINIMU ECTION OF EXPANS OVED INDEPENDE OWNER PER CBC S SHALL BE SENT IE ARCHITECT OR S HAVE ELAPSED S ST OR TORQUE TES	- CORNER). M ALLOWAE SION ANCHO NT AGENCY 1704A & 19 TO THE INS ENGINEER I SINCE INSTA ST AT LEAST	DRS SHAI (10A.5 PECTOR IN Stae LLATION, 50% OF		21" SP 14" (MIN) SP MIN	- 14" (MIN)	<u>SP</u>	2 " (MIN)			
	(   	DBSERVABLE TO DETERMIN BECOMES LC FORQUE TES THE FOLLOW	E MOVEM NE OBSEF OSE. T: THE AF ING LIMIT	PPLICABLE TORQU S: WEDGE TYPE : '	OAD. A PRA T IS THAT TH BUT E MUST BE A	CTICAL V HE WASHE	WITHIN	SF1		<u>CONCRETE</u> AB ON GRA	<u>EDGE DETAIL</u> DE ONLY)			
D.				TEEL REINFORCING		ETE SLAB								
E.				NGAGEMENT OF N		ER.								
11. BOLT	TS THROU	GH CONCRE	TE ON ME	TAL DECK					_					
A.	tight (t Require	HE SNUG-TIC ED TO BRING	SHT CONI THE CON	Y 3/4 TURN OF THE DITION IS DEFINED INECTED PLIES INT ESS OTHERWISE N	AS THE TIGI	HTNESS	JG		R	inatu	HAN RODE			
В.				BE 1/16" LARGER <sup>·</sup> ) FOR CONCRETE.	THAN BOLT	SIZE				11SIO	No. 4197			
C.	THROUG TESTING TENSION	H-BOLTS IN ( (THROUGH ) DO NOT RE	CONCRET BOLTS W QUIRE TE	ITE SHALL RECEIVE ITH STEEL TO STEE INSION TESTING) IN STALLED ANCHOR	EL CONNECT N ACCORDAN	TION IN				TH + STAT	XP. 6-30-2026 12/4/24 PUCIVEN OF CALLED			

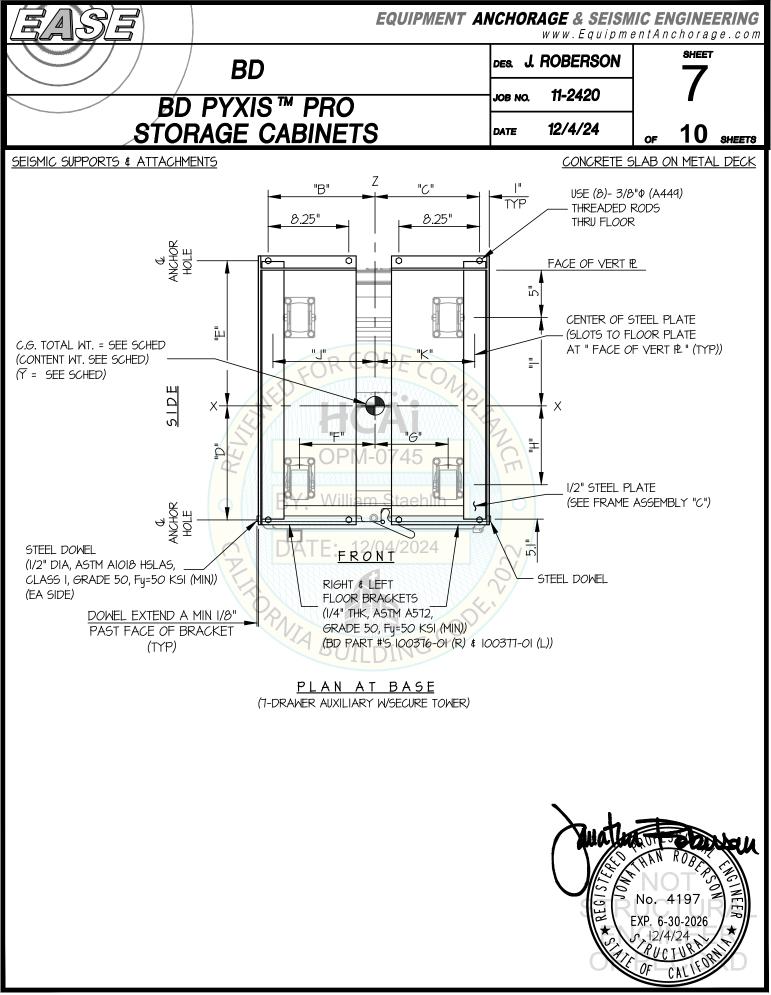




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BD								B NO.	11-242	5			
BD P										-			
STORA	<u>GE</u>	CA	BINE	TS			DA	TE .	12/4/2	4	OF	10	SHE
SMIC SUPPORTS & ATTACHMENTS	5										<u>CC</u>	DNCRET	E SL
BD PYXIS™ PRO CABINET	TOTA WT (		CONTENT WT (lb.)	7 (in.)	"A" (in.)	"B" (in.)	"C" (in.)	"D" (in.)	"E" (in.)	"F" (in.)	"G" (in.)	"H" (in.)	"\" (ir
MEDSTATION <sup>™</sup> MAIN	725		85	23.25	57.68	10.79	10.82	12.18	14.32	7.39	7.41	7.77	8.59
7-DRAXER AUXILIARY	740		94	23.61	47.53	10.80	10.82	11.85	14.65	7.39	7.41	7.41	8,9
REFRIGERATOR AUXILIARY	460		68	15.12	36.28	11.06	10.55	11.58	14.92	6.98	6.39	7.05	10.8
SECURE TOWER AUXILIARY	470		108	16.64	42.21	10.80	10.81	12.22	14.28	8.14	8.15	8.97	9.84
7- DRAWER AUXILIARY W/ SECURE TOWER	1170		175	36.79	79.77	10.91	10.71	11.75	14.75	7.50	7.30	7.36	9.00
REFRIGERATOR AUXILIARY W/ SECURE TOWER	890		150	34.35	74.45	10.94	10.67	11.88	14.62	8.29	8.00	8.69	10.1
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TABLE CONTINUED				12/0	4/201	24							
BD PYXIS <sup>™</sup> PRO CABINET	"J" (in.)	"K" (ir	n.) Tu (lb.)	τ Vu (lb.)	SDS	- ' 19999999							
MEDSTATION <sup>™</sup> MAIN	10.30	10.32	2 1141	544	220		54.1						
7-DRAXER AUXILIARY	10.30	10.32	1190	555	220		22						
REFRIGERATOR AUXILIARY	10.60	10.00	450	349	220	300							
SECURE TOWER AUXILIARY	10.27	10.27	439	337	2.20								
7- DRAWER AUXILIARY W/ SECURE TOWER	10.42	10.22	2 1408	434	1.10								
REFRIGERATOR AUXILIARY W/	10.41	10.13	1410	487	1.70								







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	BD	)					DE	a J.R	OBER	SON		SHEET	
BD P			DD	<u></u>			J	B NO.	11-242	0		8	
STORA	D	DATE 12/4/24 OF 10 SHEET											
EISMIC SUPPORTS & ATTACHMENT		•/ 11							<u>CON(</u>	RETE	5LAB <i>0</i>	N META	L DECK
						1							,
BD PYXIS™ PRO CABINET	TOT/		ONTEN WT (Ib.)	「   7 (in.)	"A" (in.)	"B" (in.)	"C" (in	)"D" (in.)	"E" (in.)	"F" (in.)	"G" (in.)	"H" (in.)	"1" (in.)
MEDSTATION <sup>™</sup> MAIN	725	;	85	23.25	57.68	10.79	10.82	12.18	14.32	7.39	7.41	7.77	8.59
7-DRAXER AUXILIARY	740	)	94	23.61	47.53	10.80	10.82	11.85	14.65	7.39	7.41	7.41	8.95
REFRIGERATOR AUXILIARY	460	)	68	15.12	36.28	11.06	10.55	11.58	14.92	6.98	6.39	7.05	10.81
SECURE TOWER AUXILIARY	470		108	16.64	42.21	10.80	10.81	12.22	14.28	8.14	8.15	8.97	9.84
7- DRAWER AUXILIARY W/ SECURE TOWER			175	36.79	79.77	10.91	10.71	11.75	14.75	7.50	7.30	7.36	9.00
REFRIGERATOR AUXILIARY W/ SECURE TOWER	890		150	34.35	74.45	10.94	10.67	11.88	14.62	8.29	8.00	8.69	10.12
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TABLE CONTINUED				12/0	4/202	24							
BD PYXIS <sup>™</sup> PRO CABINET	"J" (in.)	"K" (in.	) Tu (lb.)	Vu (lb.)	7222222			SV.					
MEDSTATION <sup>™</sup> MAIN	10.30	10.32	1606	725		0	$\sum_{i=1}^{n}$						
7-DRAXER AUXILIARY	10.30	10.32	1677	740		6	0V						
REFRIGERATOR AUXILIARY	10.60	10.00	664	465	INC								
SECURE TOWER AUXILIARY	10.27	10.27	640	450									
7- DRAWER AUXILIARY W/ SECURE TOWER	10.42	10.22	4183	1158									
REFRIGERATOR AUXILIARY W/ SECURE TOWER	10.41	10.13	2599	840									
+ (VALUES DO NOT INCLUDE $\Omega$ )													
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