



APPLICATION FOR PREAPPROVAL SPECIAL SEISMIC CERTIFICATION OF EQUIPMENT AND COMPONENTS

For Office Use Only

APPLICATION NO.

OSP – 0133-10

Check whether application is: NEW RENEWAL

1.0 Toshiba Medical Systems Greg Patterson
Manufacturer *Manufacturer's Technical Representative*
2441 Michelle Drive, Tustin, CA 92780
Mailing Address
(714) 669-2486
Telephone *E-mail Address*

2.0 Kalare R&F System X-Ray & Fluoroscopy Medical Imaging
Product Name *Product Type*
SEE ATTACHMENT 1
Product model No (List all unique product identification numbers and/or serial numbers)

General Description: A multi-component X-ray & fluoroscopy system used for medical imaging.

3.0 EQUIPMENTANCHORAGE.COM JONATHAN ROBERSON, S.E.
Applicant Company Name *Contact Person*
5877 Pine Ave, Suite 210, Chino Hills, CA. 91709
Mailing Address
(406) 541-EASE (3273) jon@easeco.com
Telephone *E-mail Address*

I hereby agree to reimburse the Office of Statewide Health Planning and Development for the actual costs incurred by the department for review.


Signature of Applicant
PRINCIPAL ENGINEER
Title

November 18, 2010

Date

EQUIPMENTANCHORAGE.COM
Company Name



Registered Design Professional Preparing the Report

4.0 **EQUIPMENTANCHORAGE.COM**

Company Name

Jonathan Roberson, S.E.

S4197

Contact Name

California License Number

5877 Pine Ave, Suite 210, Chino Hills, CA. 91709

Mailing Address

909-606-7622

jon@easeco.com

Telephone

E-mail Address

California Licensed Structural Engineer Review and Acceptance of the Report

5.0 **EQUIPMENTANCHORAGE.COM**

Company Name

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Anchorage Pre-Approval

6.0

Anchorage is pre-approved under OPA-
(Separate application for anchorage pre-approval is required)

Anchorage is not Pre-approved **SEE ATTACHMENT 1, Table # 3**

Certification Method

7.0 Testing in accordance with: ICC-ES AC-156 Other (Please Specify):

Analysis

Experience data

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

Testing Laboratory (if applicable)

8.0 **Environmental Testing Laboratory, Inc.**

Brady Richard

Company Name

Contact Name

11034 Indian Trail, Dallas, TX 75229-3513

Mailing Address

972-247-9657

brady@etldallas.com

Telephone

E-mail:



Approval Parameters

9.0

Design in accordance with ASCE 7-05 Chapter 13: Yes No

Design Basis of Equipment or Components (F_p/W_p) = **SEE ATTACHMENT 1, Table # 4**

S_{DS} (Spectral response acceleration at short period) = **2.0g**

a_p (In-structure equipment or component amplification factor) = **SEE ATTACHMENT 1, Table # 4**

R_p (Equipment or component response modification factor) = **SEE ATTACHMENT 1, Table # 4**

I_p (Importance factor) = **1.5**

z/h (Height factor ratio) = **1.0**

Equipment or Component fundamental frequency(s) = **SEE ATTACHMENT 1, Table # 2**

Building period limits (if any) = **NO LIMIT**

Overall dimensions and weight (or range thereof) = **SEE ATTACHMENT 1, Table # 1**

Equipment or Components @ grade designed in accordance with ASCE 7-05 Chapter 15: Yes No

Design Basis of Equipment or Components (V/W) =

S_{DS} (Spectral response acceleration at short period) =

S_1 (Spectral response acceleration at 1 second period) =

R (Response modification coefficient) = **1.0**

Ω_0 (System overstrength factor) = **1.0**

C_d (Deflection amplification factor) = **1.0**

I_p (Importance factor) = **1.5**

Height to Center of Gravity above base =

Equipment or Component fundamental period(s) = Sec

Overall dimensions and weight (or range thereof) =

Tank(s) designed in accordance with ASME BPVC, 2007: Yes No

10.0 List of attachments supporting the special seismic certification of equipment or components:

- Test Report Drawings Manufacturer's Catalog
 Calculations Others (Please Specify):

11.0 OSHPD Approval (For Office Use Only)

Signature & Date

Chris Tokas, SHFR

Name & Title

1/10/11

December 31, 2016

Approval Expiration Date

S_{DS} (g) = **2.0** z/h = **1.0**

Special Seismic Certification Valid Up to

Condition of Approval (if any):

APPLICATION FOR PREAPPROVAL

SPECIAL SEISMIC CERTIFICATION OF EQUIPMENT AND COMPONENTS

ATTACHMENT 1: Seismically Certified Components

Table 1: Seismic Certified Components: Kalare Radiography & Fluoroscopy System

| UUT NO. | COMPONENT | MODEL NO. | W (IN) | D (IN) | H (IN) | MAX. WT. (LBS) | MOUNT ^{B, C} |
|---------|---------------------------------------|---|--------|--------|-------------|--------------------|-----------------------|
| 1 | TABLE CONTROL UNIT | TA-450F | 9.5 | 17.75 | 49.125 | 130 | Floor |
| 2 | EPS CPU TOWER | ADR-1000A/PF MPU | 8.375 | 17.5 | 26.5 | 50 | Floor |
| 3 | SYSTEM CABINET | TA-450F | 22.5 | 15.875 | 75 | 468 | Wall/Floor |
| 4 | PULSED FLUOROSCOPY UNIT | XKGC-80XM | 26.5 | 15.75 | 75 | 238 | Wall/Floor |
| 5 | DTS 100S OVERHEAD TUBE CRANE | Bridge: DST-100S, Collimator: BLR-15AA Tube: DXR-3724HD | 126 | 202 | 32- 91 | 664 + 232 rails | Ceiling Suspension |
| 6 | GENERATOR CONTROL PANEL | DC-80XD | 13.625 | 5 | 13 | 17 | Wall |
| 7 | WALL STAND POWER SUPPLY | PS-8 | 8.5 | 4.2 | 10.5 | 14 | Wall |
| 8 | TW-420-T TILTING BUCKY STAND | TW-420-T | 32 | 33 | 83 | 388 | Wall/Floor |
| 9 | GENERATOR CABINET | KXO-80XD | 43.875 | 15.75 | 73.5 | 900 | Wall/Floor |
| 10 | EPS 21" MONITOR, | Chromamaxx Model: PLH2150-B1 | 18.375 | 8.25 | 22.25 | 23 | Countertop |
| 11 | IDI 1000F-1 SINGLE MONITOR SUSPENSION | IDI 1000F-1 | 80.5 | 197 | 39- 62.5 | 245 | Ceiling Suspension |
| 12 | KALARE X-RAY DIAGNOSTIC TABLE | TA-450F | 82.5 | 77.4 | 86.75 | 3820 ^A | Floor |
| 13 | TW-420 NON-TILTING BUCKY STAND | TW-420 | 33 | 12 | 83 | 292 | Wall/Floor |
| 14 | EPS KEYBOARD & MOUSE | --- | --- | --- | --- | 3 | Countertop |

Note:

- A) Listed weight does not include maximum patient load of 350 lb.
- B) "Wall/Floor" indicates a condition where the unit bears on, and is anchored directly to the supporting floor. In addition, lateral restraint anchoring the unit to an adjacent wall or other supporting structure is provided at the top of the equipment.
- C) "Countertop" refers to a condition where the unit sits atop but is not otherwise anchored to a counter, desk, or other piece of fixed furniture (unless otherwise noted).

Table 2: Test Specimen Lowest Resonant Frequencies

| PLATE NO. | UUT | CHANNEL | LOWEST RESONANT FREQUENCIES (HZ) | | |
|-----------|---|---------|----------------------------------|-------------------|--------------------|
| | | | FRONT-TO-BACK AXIS | SIDE-TO-SIDE AXIS | TOP-TO-BOTTOM AXIS |
| 1 | EPS CPU – Top Corner Table Control Unit | 2 | 6.4 | 15.0 | 32 |
| | | 4 | 3.4 | 5.0 | >50 |
| 2 | Kalare Table | 2 | 3.2 | 4.4 | 5.1 |

Table 3: Pending OSHPD Anchorage Pre-Approvals

| COMPONENT | OPA NO. | APPROVAL STATUS |
|-------------------------------|-------------|-----------------|
| GENERATOR CABINET | OPA-2590-10 | PENDING |
| GENERATOR CONTROL PANEL | OPA-2591-10 | PENDING |
| DTS 100S OVERHEAD TUBE CRANE | OPA-2592-10 | PENDING |
| KALARE X-RAY DIAGNOSTIC TABLE | OPA-2593-10 | PENDING |
| PULSED FLUOROSCOPY UNIT | OPA-2594-10 | PENDING |
| SYSTEM CABINET | OPA-2595-10 | PENDING |
| TABLE CONTROL UNIT | OPA-2596-10 | PENDING |
| TW-420 BUCKY STAND | OPA-2598-10 | PENDING |

Table 4: Example ASCE 7-05 Seismic Design Basis of Equipment

| COMPONENT | TYPE | F_p/W_p | z/h | S_{DS} | a_p | R_p |
|---------------------------------------|------|-----------|-------|----------|-------|-------|
| Table Control Unit | A | 1.50Wp | 1.0 | 2.00 | 2.5 | 6.0 |
| System Cabinet | | | | | | |
| Pulsed Fluoro Unit | | | | | | |
| Generator Cabinet | | | | | | |
| EPS CPU Tower | | | | | | |
| Wall Stand Power Supply | | | | | | |
| Kalare X-Ray Diagnostic Table | B | 2.40Wp | 1.0 | 2.00 | 1.0 | 1.5 |
| Generator Control Panel | | | | | | |
| TW-420 Non-Tilting Bucky Stand | | | | | | |
| TW-420-T Tilting Bucky Stand | | | | | | |
| EPS 21" Monitor, Keyboard & Mouse | C | 3.00Wp | 1.0 | 2.00 | 2.5 | 3.0 |
| DTS 100S Overhead Tube Crane | | | | | | |
| IDI 1000F-1 Single Monitor Suspension | | | | | | |

Type Key:

- A) Panel boards, instrumentation cabinets and other components constructed of sheet metal framing.
- B) Typical medical equipment.
- C) Suspended medical equipment conveyors.