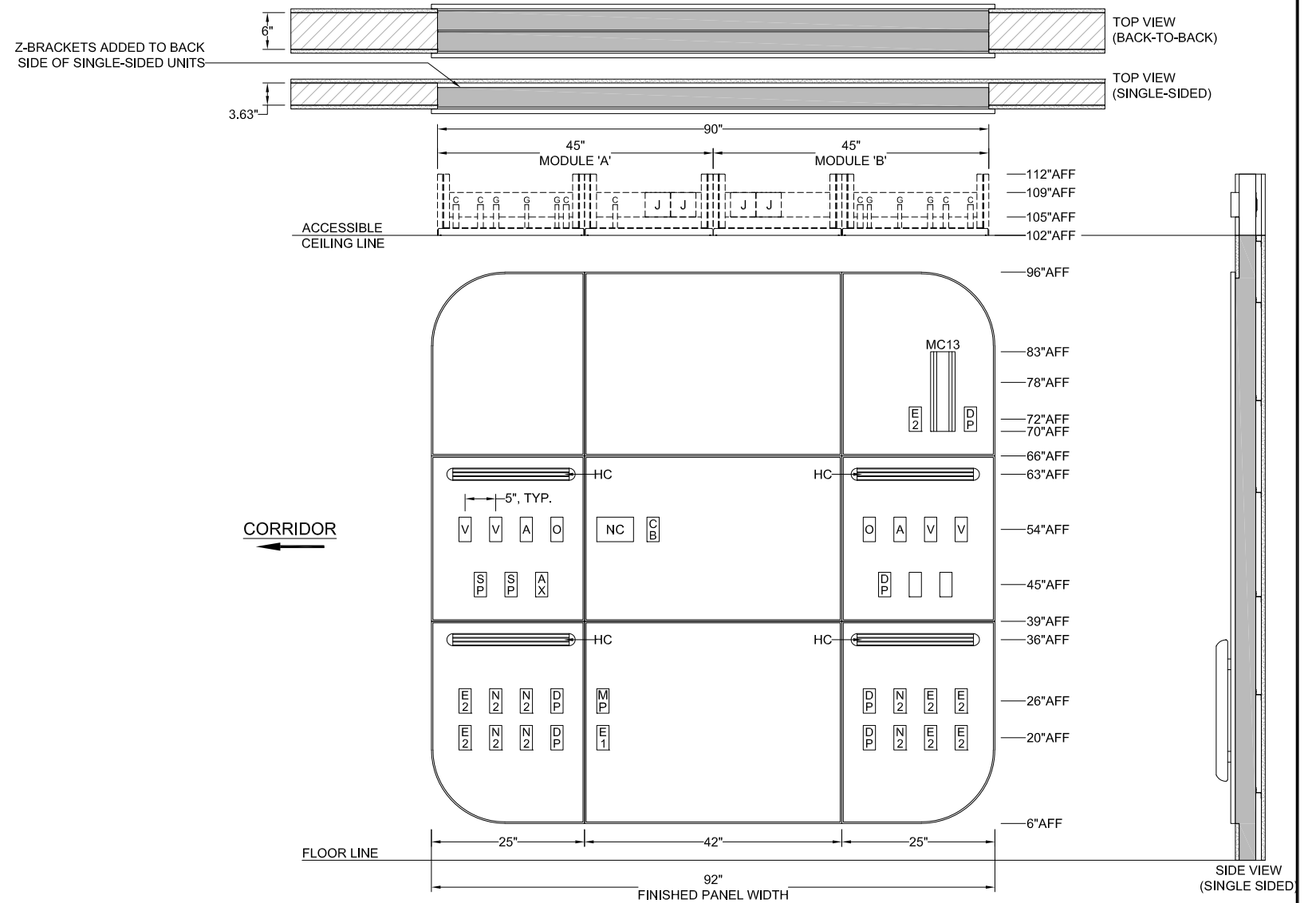


NOTES:

1. FORM UNIT IS SEMI-RECESSED. SERVICES ARE TOP FED. UNIT IS BUILT IN TWO VERTICAL SECTIONS.
2. THE ACTUAL LOCATIONS OF THE JUNCTION BOXES, CONDUIT TERMINATION POINTS AND MEDICAL GAS TERMINATION POINTS ARE SUBJECT TO CHANGE.
3. SINGLE SIDED UNITS INSTALL IN A 3-5/8" PARTITION; BACK TO BACK UNITS INSTALL IN A 6" PARTITION. ALL UNITS SET FOR A 5/8" GYPSUM BOARD FINISH.
4. INSET SURFACE PROVIDED ABOVE AND BELOW PANELS FOR GYPSUM BOARD TO BE PROVIDED AND INSTALLED BY OTHERS.
5. INTER CONNECTIONS MAY BE REQUIRED BETWEEN MODULES.
6. SERVICES TO BE REVERSED ON OPPOSITE HAND UNITS



GENERAL SPECIFICATIONS:

ELECTRICAL		PLUMBING		FINISHES	
NORMAL POWER JUNCTION BOX:	J	COPPER TUBING TYPE:	L	LAMINATE: L1	
EMERGENCY POWER JUNCTION BOX:	J	OXYGEN SIZE (I.D.):	1/2"	TYPE:	LAMINATE BRAND:
LIGHTING JUNCTION BOX:	J	MEDICAL AIR SIZE (I.D.):	1/2"	-	-
LV CONDUIT STUBS:	C	VACUUM SIZE (I.D.):	3/4"	BACK LIT LED RESIN PANEL: R1 OR LAMINATE: L2	
CONDUIT SIZE; LINE VOLTAGE:	1/2"			TYPE:	LAMINATE BRAND:
CONDUIT SIZE; LOW VOLTAGE:	3/4"			-	-
CONDUIT CONNECTORS:	STD. SET SCREW				
WIRE TYPE:	THHN, STRANDED			ELECTRICAL COVER PLATES:	STAINLESS OR NYLON TO MATCH DEVICE
WIRE SIZE:	12 AWG			HORIZONTAL CHANNELS:	ANODIZED ALUMINUM
GROUND WIRE COLOR:	GREEN			UNIT TRIM:	ANODIZED ALUMINUM

LEGEND:

REQ	SYM	DESCRIPTION	REQ	SYM	DESCRIPTION
2	O	OXYGEN OUTLET	6	DP	DATA OUTLET PROVISION
2	A	AIR OUTLET	4	FP	FUTURE PROVISION
4	V	VACUUM OUTLET	1	MP	MULTI-PIN BED RECEPT. PROVISION
6	N2	DUPLEX RECEPTACLE, 8300 IVORY 20A, 125V, H.G., NORMAL POWER	1	MC13	MONITOR CHANNEL ONLY, 13" LENGTH
1	E1	SINGLE RECEPTACLE, 8310 RED, 20A, 125V, H.G., EMER. POWER	4	HC	HORIZONTAL ACCESSORY CHANNEL
7	E2	DUPLEX RECEPTACLE, 8300 RED 20A, 125V, H.G., EMER. POWER			
1	NC	NURSE CALL PROVISION			
1	CB	CODE BLUE PROVISION			
1	AX	AUXILIARY ALARM PROVISION			
2	SP	SWITCH PROVISION			

ACCESSORIES NOT SHOWN (PER UNIT)

REQ	DESCRIPTION

<p>500 EAST BRITTON ROAD OKLAHOMA CITY, OK 73114 www.modularservices.com</p>	TOTAL QTY:	X	FORM® 7500 SERIES SEMI-RECESSED	
	AS SHOWN:	X	DRAWN BY:	XXX
PROJECT:	HOSPITAL PROJECT CITY, STATE	OPPOSITE:	DATE:	XX/XX/XX
		DRAWING #:	4XXXX	
		PROJECT #:	XXXX	SALES ORDER #:
				XXXXX