

REGAL SERIES SURFACE MOUNTED 28" FLATWALL

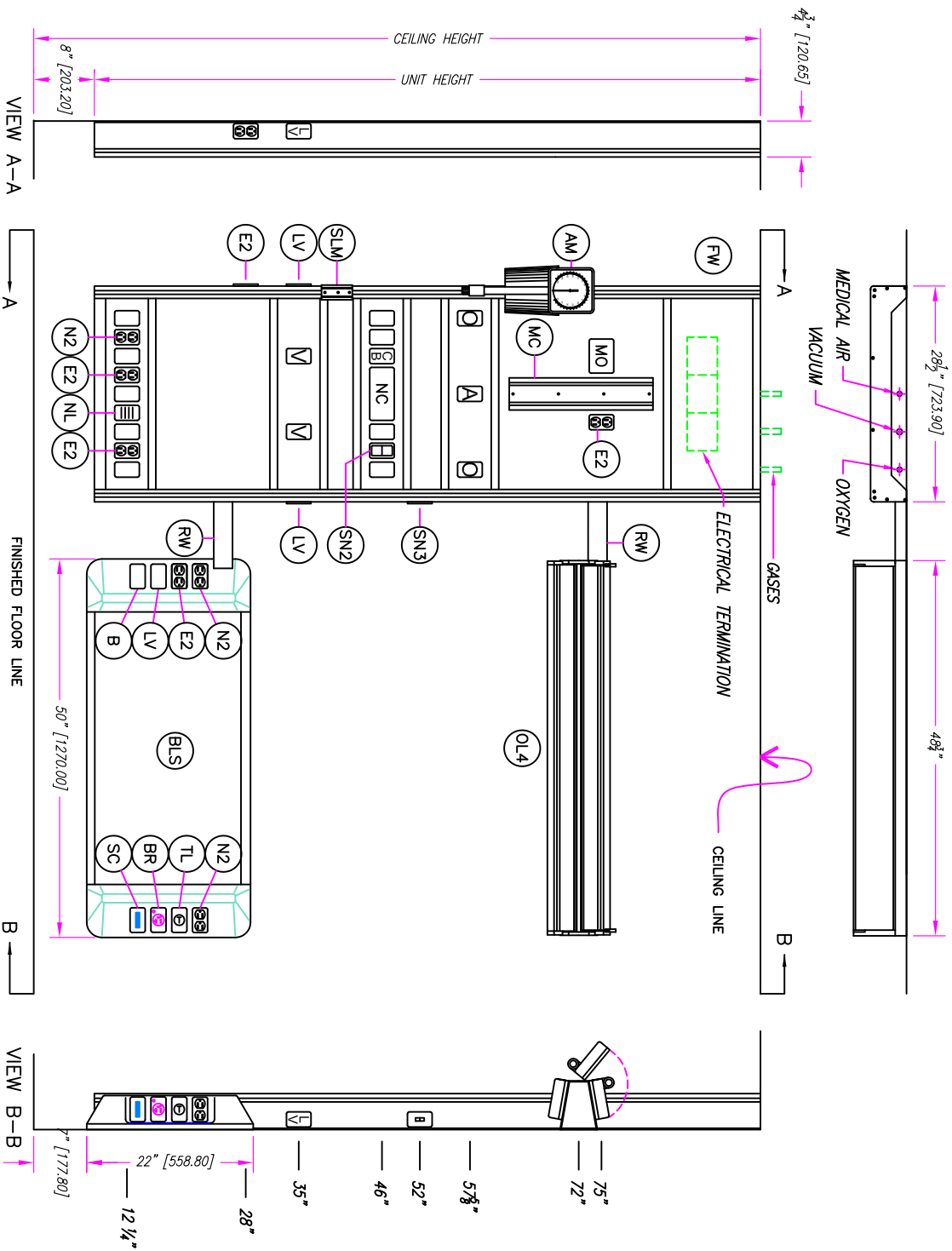
FULL LENGTH GENERAL CARE
(M/N: FW28FL-SM-GEN-P)

DRAWING # 16

TYPE:
QUANTITY:

SYSTEM DETAILS		
SYMBOL	QTY.	DESCRIPTION
FW	1	FLATWALL, 28" WIDTH
O	2	GAS, OXYGEN
A	1	GAS, MED AIR
V	2	GAS, VACUUM
N2	1	RECEPTACLE - DUPLEX IVORY
E2	4	RECEPTACLE - DUPLEX RED
SN2	1	SWITCH, SPST
SN3	1	SWITCH, 3 POSITION L.V.
NL	1	NIGHT LIGHT
NC	1	PROVISION - NURSE CALL 3G
CB	1	PROVISION - CODE BLUE 1G
MO	1	PROVISION - MONITOR OUT 2G
LV	2	PROVISION - LOW VOLTAGE 1G
SLM	1	VACUUM SLIDE - TRACK MTD.
RW	2	RACEWAY
OL4	1	4" OVERBED LIGHT
LVC*	1	LOW VOLTAGE CONTROLLER
MC	1	MONITOR CHANNEL, MOUNTED
AM	1	ANEROID MANOMETER w/ BSKT

*INSTALLED IN UNIT BY AMICO

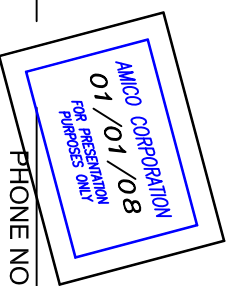


BED LOCATOR SYSTEM DETAILS		
SYMBOL	QTY.	DESCRIPTION
E2	1	RECEPTACLE - DUPLEX RED
N2	2	RECEPTACLE - DUPLEX IVORY
BR	1	RECEPTACLE - BED ONLY
TL	1	PROVISION - TELEPHONE 1G
LV	1	PROVISION - LOW VOLTAGE 1G
SC	1	37 PIN CONNECTOR
B	1	BLANK

IMPORTANT: PLEASE VERIFY THAT THE ABOVE INFORMATION IS CORRECT, AND PROVIDE THE REMAINING DETAILS.

APPROVAL - PRINT AND SIGNATURE _____

DATE _____ PHONE NO. _____



AMICO Corporation
85 Fulton Hwy, Ontario
Richmond Hill, Canada
L4B 2N4, CANADA
Tel: (905) 882-9800
Fax: (905) 764-0882
www.amico.com

HOSPITAL LOCATION	HOSPITAL LOCATION	A. NURSE CALL MFGR.:	MODEL NO.:	DRWG. NO.:
LOCATION	LOCATION	B. MEDICAL GAS MFGR.:	TYPE CONNECTION:	PRICEBOOK-19
QTY.:	(A) TYPE _____ UNITS AS SHOWN / (B) TYPE _____ UNITS OPPOSITE	C. FINISH:	CEILING HEIGHT:	DRAWN BY:
1				CHECKED BY:
				REV. NO.:
				DATE: