

PLEASE SPECIFY (IF NOT SPECIFIED AMICO WILL PROVIDE DEFAULTS LISTED BELOW):

STUD LENGTH (12'-0"):

STUD SIZE (3/8" TYP.):

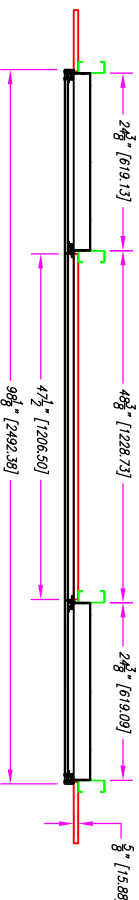
STUD GAUGE: #16 TYP.

WALL THICKNESS (5/8" TYP.):

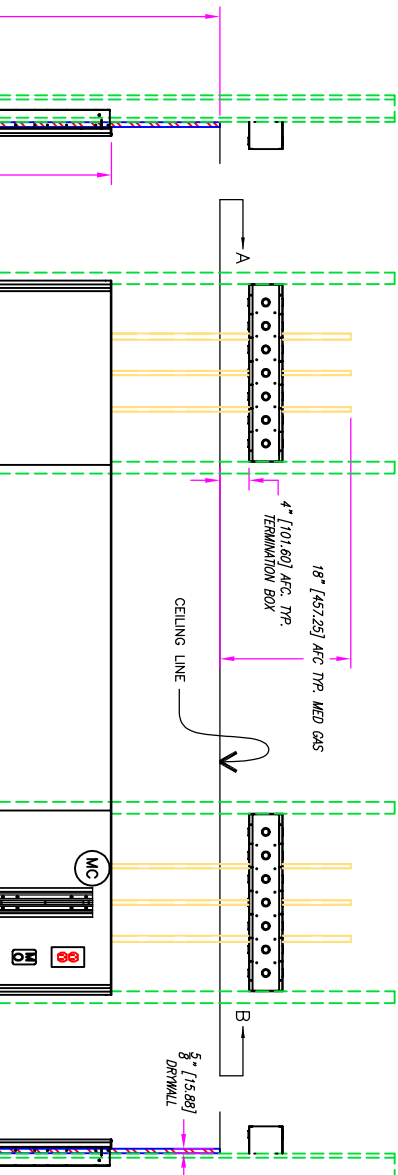
SERENITY SERIES RECESSED 24" PANEL WALL

FULL LENGTH GENERAL CARE
(M/N: FW2448-PR-GEN-P)

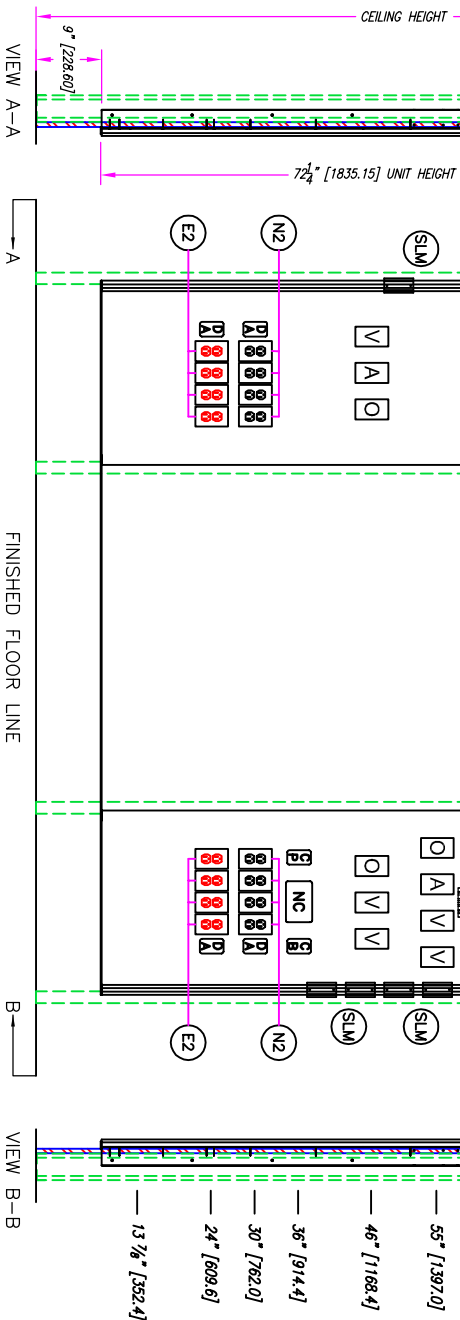
DRAWING # 0X



TYPE:
QUANTITY:
IF MIRRORED UNITS ARE REQUIRED THE CUSTOMER MUST INDICATE THE QUANTITY OF UNITS BELOW AND AMICO WILL PROVIDE A SEPARATE DRAWING SHOWING THE MIRRORED LAY OUT AND QUANTITY
QUANTITY MIRRORED: _____



SYSTEM DETAILS	
SYMBOL	QTY.
1	PANEL WALL
O	3 AMICO GAS OUTLET, OXYGEN
A	2 AMICO GAS OUTLET, MED AIR
V	5 AMICO GAS OUTLET, VACUUM
E2	9 RECEPTACLE - DUPLEX RED
N2	8 RECEPTACLE - DUPLEX IVORY
NC	1 PROVISION - NURSE CALL 1G
CB	1 PROVISION - CODE BLUE 1G
CP	1 PROVISION - CODE PINK 1G
DA	4 PROVISION - DATA 1G
MO	1 PROVISION - MONITOR OUT. 1G
MC	2 MONITOR CHANNEL
SLM	5 VACUUM SLIDE
2	STUD ASSEMBLY



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

APPROVAL SIGNATURE _____ DATE _____ PHONE NO. _____

85 Fulton Way Richmond Hill, Ontario L4B 2N4, CANADA Tel: (905) 877-462-6426(T) Toll-Free: 1-877-462-6426(T) Tel: (905) 1-866-440-4986(F) Fax: (905) 764-0800 www.amico.com	HOSPITAL LOCATION HOSPITAL LOCATION UNITS AS SHOWN	A. NURSE CALL MFR: TBC B. MEDICAL GAS MFR: AMICO TYPE CONNECTION: TBC C. FINISH: TBC	MODEL NO.: TBC TYPE CONNECTION: TBC CEILING HEIGHT: TBC	DRG. NO. MADDY-01 DRAWN BY: CHECKED BY: REV. NO.: 00 DATE:
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