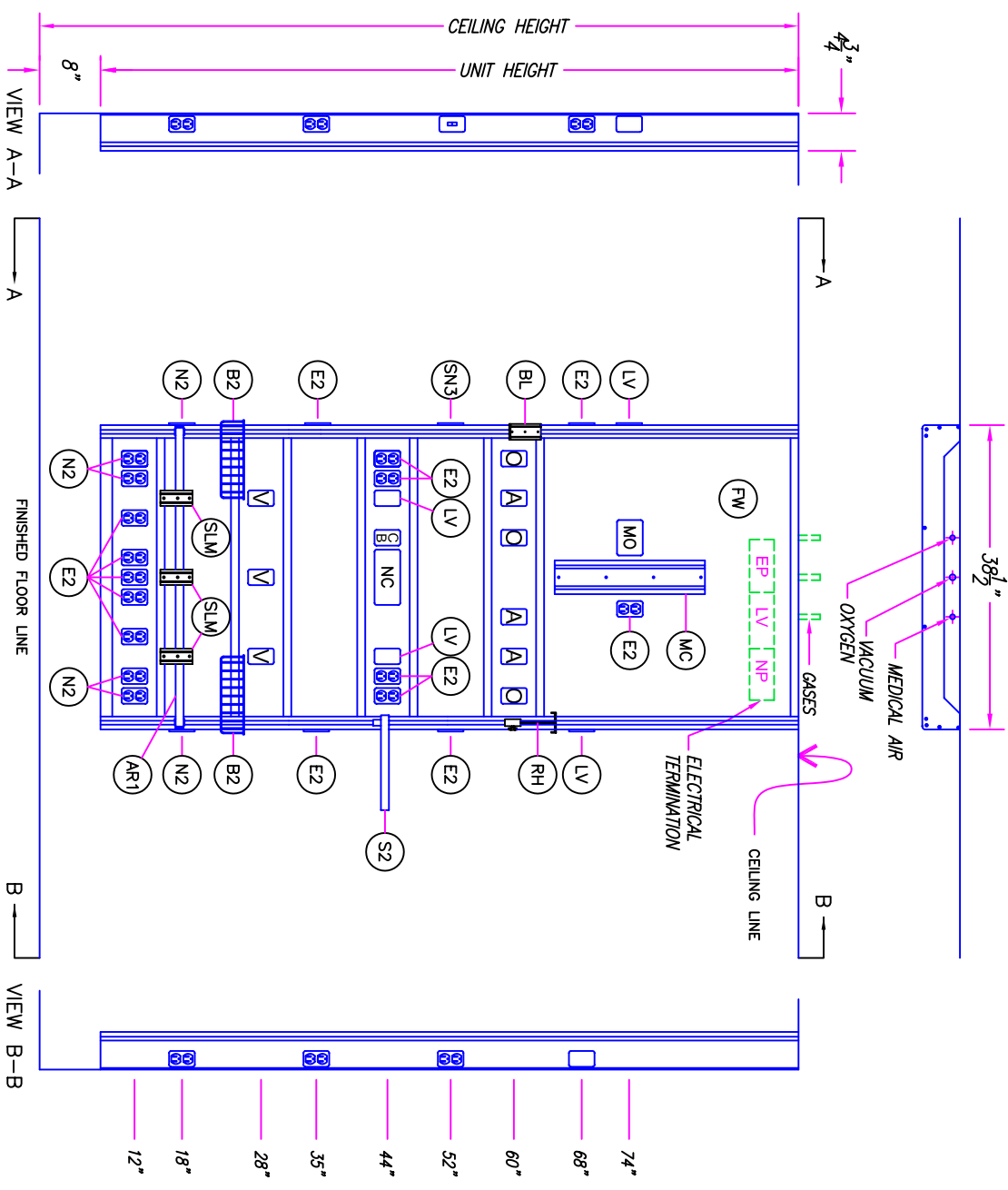


# REGAL SERIES SURFACE MOUNTED 38" FLATWALL

DRAWING # 22

FULL LENGTH GENERAL CARE  
(M/N: FW38FL-GEN-SP)



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

APPROVAL - PRINT AND SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_ PHONE NO. \_\_\_\_\_

SYSTEM DETAILS	
SYMBOL	DESCRIPTION
FW	FLATWALL, 38" WIDTH
N2	RECEPTACLE - DUPLEX IVORY
E2	RECEPTACLE - DUPLEX RED
NC	PROVISION - NURSE CALL
CB	PROVISION - CODE BLUE
MO	PROVISION - MONITOR
LV	PROVISION - LOW VOLTAGE
SN3	SWITCH, 3 POSITION L.V.
MC	MONITOR CHANNEL, MOUNTED
AR1	AMICO RAIL, ON TRACK
BL	BLENDER BRACKET, ON TRACK
AR1	RESUSCITATION BAG HOLDER
SLM	VACUUM SLIDE, ON TRACK
B2	10"x10"x4" SWIVEL BASKET
S2	12"x12" SWIVEL SHELF
O	GAS, OXYGEN
A	GAS, MED AIR
V	GAS, VACUUM

TYPE: \_\_\_\_\_  
QUANTITY: \_\_\_\_\_

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HOSPITAL \_\_\_\_\_  
LOCATION \_\_\_\_\_  
QTY: (A) TYPE \_\_\_\_\_ UNITS AS SHOWN / (B) TYPE \_\_\_\_\_ UNITS OPPOSITE

A. NURSE CALL MFGR.: \_\_\_\_\_ MODEL NO.: \_\_\_\_\_  
B. MEDICAL GAS MFGR.: \_\_\_\_\_ TYPE CONNECTION: \_\_\_\_\_  
C. FINISH: \_\_\_\_\_ CEILING HEIGHT: \_\_\_\_\_  
DRWG. NO. \_\_\_\_\_  
DATE \_\_\_\_\_  
DRAWN BY: \_\_\_\_\_  
CHECKED BY: \_\_\_\_\_  
REV. NO.: \_\_\_\_\_  
DATE \_\_\_\_\_