



OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT
FACILITIES DEVELOPMENT DIVISION

APPLICATION FOR OSHPD PREAPPROVAL
OF MANUFACTURER'S CERTIFICATION (OPM)

OFFICE USE ONLY
APPLICATION #: OPM-0346-13

OSHPD Preapproval of Manufacturer's Certification (OPM)

Type: [X] New [] Renewal [] Update to Pre-CBC 2013 OPA Number:

Manufacturer Information

Manufacturer: Omnicell, Inc.
Manufacturer's Technical Representative: Brian Arnold
Mailing Address: 590 E. Middlefield Road, Mountain View, CA 94043
Telephone: (650) 251-6140 Email: brian.arnold@omnicell.com

Product Information

Product Name: AUTOMATED MEDICATION DISPENSING CABINET
Product Type: Automated Medication Dispensing Cabinets
Product Model Number: One-cell, two-cell and three-cell cabinets
General Description: Medication storage and dispensing cabinets.

Applicant Information

Applicant Company Name: Omnicell, Inc.
Contact Person: Brian Arnold
Mailing Address: 590 E. Middlefield Road, Mountain View, CA 94043
Telephone: (650) 251-6140 Email: brian.arnold@omnicell.com

I hereby agree to reimburse the Office of Statewide Health Planning and Development review fees in accordance with the California Administrative Code, 2016.

Signature of Applicant: [Signature] Date: 5/11/2016
Brian Arnold
Engineer
Signed by: BRIAN ARNOLD

Title: Engineer Company Name: Omnicell, Inc.

"Access to Safe, Quality Healthcare Environments that Meet California's Diverse and Dynamic Needs"





**OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT
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Registered Design Professional Preparing Engineering Recommendations

Company Name: Degenkolb Engineers

Name: Adrian M. Nacamuli California License Number: S 4857

Mailing Address: 1300 Clay Street, Suite 900, Oakland, CA 94612

Telephone: (510) 250-1216 Email: nacamuli@degenkolb.com

OSHPD Special Seismic Certification Preapproval (OSP)

- Special Seismic Certification is preapproved under OSP-
(Separate application for OSP is required)
- Special Seismic Certification is not preapproved

Certification Method(s)

- Testing in accordance with: ICC-ES AC156 FM 1950-15
- Other* (Please Specify): _____

*Use of criteria other than those adopted by the California Building Standards Code, 2016 (CBSC 2016) for component supports and attachments are not permitted. For distribution system, interior partition wall, and suspended ceiling seismic bracings, test criteria other than those adopted in the CBSC 2016 may be used when approved by OSHPD prior to testing.

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

List of Attachments Supporting the Manufacturer's Certification

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

OFFICE USE ONLY – OSHPD APPROVAL VALID FOR CBC 2016 & ALL PRE-2016 CODE BASED PROJECTS

Signature: *J Enzler* Date: 07-29-2016

Print Name: Jeffrey Enzler

Title: DSE

Condition of Approval (if applicable): _____

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ONE-CELL CABINET MODELS
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TWO-CELL CABINET MODELS
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GENERAL NOTES:

1. THIS OSHPD PREAPPROVAL OF MANUFACTURER'S CERTIFICATION (OPM) IS BASED ON THE CBC 2013. THE DEMAND (DESIGN FORCES) FOR USE WITH THIS OPM SHALL BE BASED ON THE CBC 2013.
2. PRE-APPROVED DESIGN AND MATERIALS CONFORM WITH THE 2013 EDITION OF THE CALIFORNIA BUILDING CODE. DETAILS WITHIN THIS APPROVAL MAY BE USED ANYWHERE IN THE STATE OF CALIFORNIA WHERE $S_{DS} \leq 2.00$
3. SEISMIC FORCES ON EQUIPMENT DETERMINED PER THE 2013 CBC & ASCE 7-10 SECTION 13.3. ALL LOADS IN THIS PRE-APPROVAL ARE AT STRENGTH LEVEL AND SHALL BE USED FOR STRENGTH DESIGN.
CASE 1 (EQUIPMENT ABOVE GRADE TO ROOF): $S_{DS} \leq 2.00$, $a_p=1.0$, $R_p=1.5$, $I_p=1.5$, $\Omega_o=1.5$, $z/h \leq 1.0$
 i. $F_p=2.40W_p$, $F_v=0.40W_p$
CASE 2 (EQUIPMENT AT OR BELOW GRADE): $S_{DS} \leq 2.00$, $a_p=1.0$, $R_p=1.5$, $I_p=1.5$, $z/h = 0.0$, $\Omega_o=1.5$
 i. $F_p=0.90W_p$, $F_v=0.40W_p$
4. THE STRUCTURAL ENGINEER-OF-RECORD (S.E.O.R.) IS RESPONSIBLE FOR THE FOLLOWING:
 - a. VERIFY THAT THE ANCHORS ARE AN ADEQUATE DISTANCE FROM ANY SLAB OPENINGS OR EDGES.
 - b. VERIFY THAT THE ANCHORS ARE AN ADEQUATE DISTANCE FROM ANY NEW OR EXISTING ANCHORS.
 - c. DESIGN ANY SUPPLEMENTARY MEMBERS AND THEIR ATTACHMENTS WHICH THE UNIT IS ANCHORED TO. VERIFY THE ADEQUACY OF ANY EXISTING MEMBERS AND THEIR ATTACHMENTS WHICH THE UNIT IS ANCHORED TO FOR THE FORCES EXERTED ON THEM BY THE UNIT IN ADDITION TO ALL OTHER LOADS AND FORCES.
 - d. VERIFY THAT THE INSTALLATION IS IN CONFORMANCE WITH THE 2013 CBC AND WITH THE DETAILS SHOWN IN THIS PRE-APPROVAL. VERIFY THAT THE EQUIPMENT'S ACTUAL WEIGHT, CG LOCATION, ANCHOR LOCATIONS, ANCHOR DETAILS AND THE MATERIAL AND GAGE OF THE UNIT WHERE ATTACHMENTS ARE MADE AGREE WITH THE FORMATION SHOWN IN THIS PRE-APPROVAL.

5. THE MANUFACTURER SUPPLIED BASE BRACKETS HAVE BEEN EVALUATED FOR THE WORST CASE LOADING PER THE 2013 CBC. STRUCTURAL ENGINEER-OF-RECORD (S.E.O.R.) SHALL EVALUATE BRACKET ANCHORAGE FOR CONDITIONS THAT VARY FROM THIS PRE-APPROVAL.
6. CONTRACTOR/INSPECTOR OF RECORD MUST VERIFY ANCHOR SPACING TO ADJACENT EQUIPMENT IS TO BE GREATER THAN 12".
7. THIS OPM COVERS ONLY THE SUPPORTS AND ATTACHMENTS OF THE UNIT TO THE STRUCTURE.
8. EXPANSION OR WEDGE ANCHORS INTO CONCRETE: HILTI HSL-3 (ICC ESR-1545) AND HILTI KB-TZ (ICC ESR-1917). INSTALL ANCHORS IN ACCORDANCE WITH THE ICC REPORT AND MANUFACTURER'S RECOMMENDATIONS. TEST AT LEAST 50% OF ANCHORS NO SOONER THAN 24 HOURS AFTER INSTALLATIONS. TESTS SHALL BE CONDUCTED IN THE PRESENCE OF THE INSPECTOR OF RECORD (IOR) AND A REPORT OF THE TEST SHALL BE SUBMITTED TO OSHPD.
 TEST PER ONE OF THE FOLLOWING METHODS:
 BY: Jeffrey Enzler
 - a. DIRECT PULL TENSION TEST. ANCHOR IS ACCEPTABLE IF NO MOVEMENT IS OBSERVED AT THE TEST LOAD GIVEN IN TABLE BELOW. MOVEMENT MAY BE DETERMINED WHEN THE WASHER UNDER THE NUT BECOMES LOOSE.
 - b. TORQUE WRENCH TEST: TEST ANCHORS TO THE REQUIRED TORQUE LOAD GIVEN IN TABLE BELOW WITHIN THE LIMIT OF ONE-HALF TURN OF THE NUT.

10. A MANUFACTURER PROVIDED PERMANENT PLAQUE MUST BE AFFIXED ON THE UNIT STATING THE FOLLOWING: "WEIGHT OF CONTENTS SHALL NOT EXCEED 10 PCF". WEIGHT OF CONTENTS USED FOR DESIGN IS 10 PCF. VERIFY IN FIELD BEFORE INSTALLATION.
11. FOR BOLTS THROUGH CONCRETE ON METAL DECK
 - A. BOLTS SHALL BE TORQUED BY 3/4 TURN OF THE NUTS AFTER THE SNUG TIGHT CONDITION (SNUG TIGHT CONDITION IS DEFINED AS THE TIGHTNESS REQUIRED TO BRING THE CONNECTED PLIES INTO FIRM CONTACT) IS ACHIEVED.
 - B. THROUGH BOLTS IN CONCRETE SHALL RECEIVE SPECIAL INSPECTION AND TESTING IN ACCORDANCE WITH REQUIREMENTS FOR POST-INSTALLED ANCHORS.
12. INSTALLATION PROCEDURE:
 - a. MOUNT BASE BRACKET PROVIDED BY OMNICELL TO FLOOR WITH THROUGH BOLTS OR EXPANSION ANCHORS RESPECTIVELY.
 - b. ROLL UNIT ONTO BASE BRACKET WITH DOWEL PIN INSERTING INTO BACK CASING OF UNIT.
 - c. PIN UNIT AT FRONT WITH END PLATE, CONNECTING IT TO BOTH THE UNIT CASING AND THE CASE BRACKET.

ANCHOR TEST LOAD VALUES								
ANCHOR TYPE	ANCHOR DIAMETER	EMBED hef	TENSION LOAD (LBS)	TORQUE LOAD (FT-LBS)	f'c MIN (PSI)	MINIMUM EDGE DIST REQ.	MINIMUM SPACING REQ.	CONCRETE TYPE
HILTI HSL-3	M10	2-3/4"	2,640	50	3,000	36"	5"	NORMAL WEIGHT
HILTI KB-TZ	3/8"	2"	1,825	25	3,000	36"	5"	SAND LIGHT WEIGHT

9. IF ANY ANCHOR FAILS DURING TESTING, UNIT MUST BE MOVED SO THAT NO ANCHOR IS WITHIN 12" OF AN ABANDONED ANCHOR.



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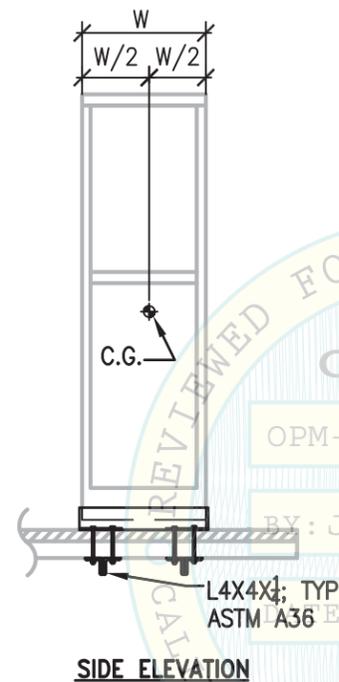
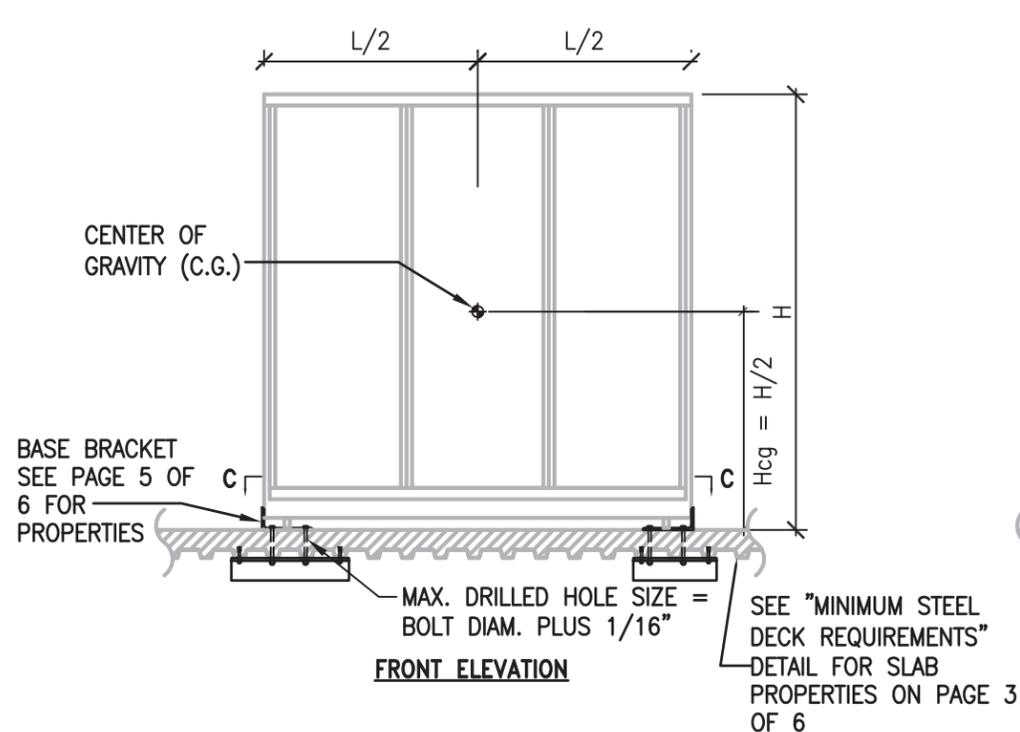
TWO-CELL CABINET MODELS

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THREE-CELL CABINET MODELS

MED-FRM-103, MED-AUX-103, SUP-AUX-103, SUP-FRM-103, CSM-FRM-103, CSM-FRM-106, CSM-FRM-109, CSM-FRM-112, MED-FRM-026, MED-FRM-027, MED-FRM-028, MED-FRM-033, MED-FRM-034, MED-FRM-035, MED-FRM-047, MED-FRM-048, MED-FRM-049, MED-FRM-050

CASE 1 – ONE, TWO AND THREE CELL TALL CABINETS ABOVE GRADE

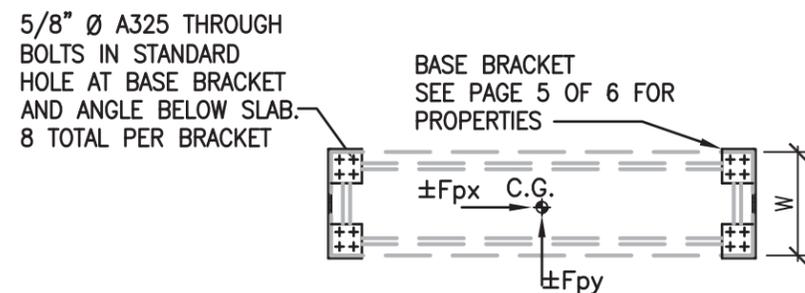


MODEL	Wp (LBS)	FORCES				CABINET PROPERTIES		
		Rult (LBS)	Vult (LBS/BOLT)	Ro Vult (LBS/BOLT)	Tult (LBS/BOLT)	L (in)	W (in)	H (in)
ONE-CELL CABINETS	1,365	2,013	408	613	2,094	26 1/2	26 1/8	78
TWO-CELL CABINETS	2,485	2,507	745	1,118	2,912	48 1/2	26 1/8	78
THREE-CELL CABINETS	3,650	3,412	1,095	1,642	3,992	76 1/2	26 1/8	78

$F_p = 2.40 W_p [S_{DS} \leq 2.00; I_p = 1.5, R_p = 1.5, a_p = 1.0, \Omega_o = 1.5, z/h \leq 1.0]$
 $F_v = 0.40 W_p$
 Rult = MAXIMUM BRACKET PIN UPLIFT FORCE AT STRENGTH LEVEL
 Vult = MAXIMUM SHEAR PER THROUGH BOLT AT STRENGTH LEVEL = $(F_p/8)$ ANCHORS
 Tult = MAXIMUM THROUGH BOLT TENSION FORCE AT STRENGTH LEVEL
 Wp = TOTAL WEIGHT; INCLUDES 10 pcf CONTENTS PER NOTE 8 ON PAGE 1 OF 6

NOTES:

1. THE DESIGN OF SUPPORTS AND ATTACHMENTS CONFORMS TO THE 2013 CALIFORNIA BUILDING CODE.
2. Rult, Vult AND Tult GIVEN ARE FACTOR LOADS AT STRENGTH LEVEL. FINAL DEMAND FORCES FOR BEARING ON CONCRETE AND BREAK OUT OF CONCRETE SHOULD INCLUDE OVERSTRENGTH FACTOR Ω_o AS DEFINED BY ASCE 7-10.
3. SEE GENERAL NOTES SECTION ON PAGE 1.
4. FOR THE SUPPORT AND ATTACHMENT DESIGN, THE MOST CRITICAL LOAD COMBINATION IS $(0.9 - 0.2S_{DS}) \times DL$
5. SEE PAGE 5 OF 6 FOR LOCATION OF APPLIED FORCES IN BASE BRACKET.
6. SEE PAGE 5 FOR MANUFACTURER BRACKET INFORMATION.
7. S.E.O.R. MAY RECALCULATE MAX. ANCHOR FORCES Rult, Vult AND Tult, AT THEIR DISCRETION, BASED ON PROJECT SPECIFIC SEISMIC DEMANDS SUBJECT TO OSHPD REVIEW/PERMIT.
8. TOTAL WEIGHT (Wp) IS A MAXIMUM. THIS PREAPPROVAL ENCOMPASSES ALL WEIGHTS UP TO THE MAXIMUM SHOWN.
9. EQUIPMENT MANUFACTURER MUST DESIGN UNIT TO MAKE Hcg EQUAL OR LESS THAN THE HEIGHT DIMENSION SHOWN.
10. SEE "MINIMUM STEEL DECK REQUIREMENTS" DETAIL FOR SLAB PROPERTIES ON PAGE 3 OF 6



PLAN SECTION C-C



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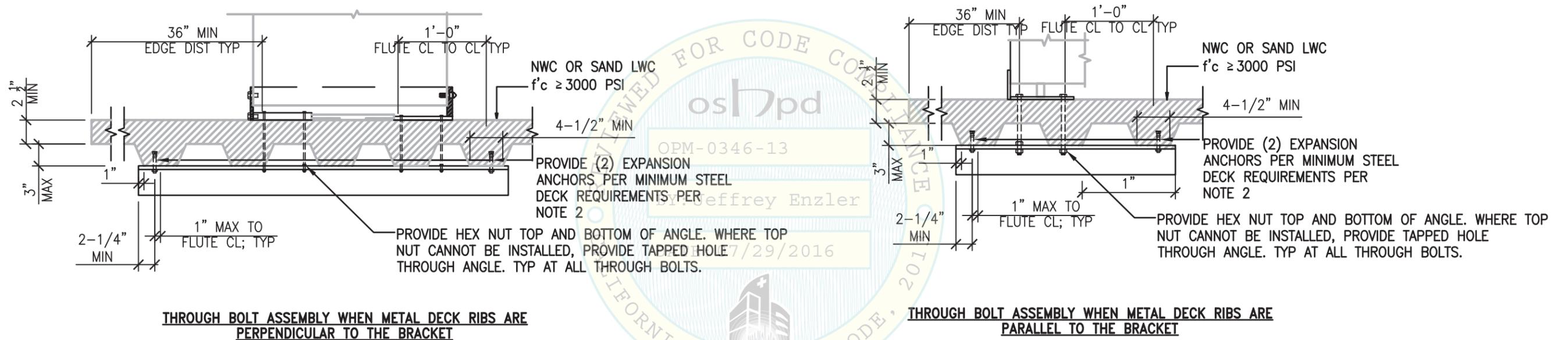


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MINIMUM STEEL DECK REQUIREMENTS



NOTES:

1. PROVIDE 12" MINIMUM DISTANCE TO EDGE OF SLAB, OPENINGS OR OTHER ATTACHMENTS
2. PROVIDE (2) 3/8" Ø HILTI KB-TZ W/ 2" EMBED EXPANSION ANCHORS TO SUPPORT ANGLE. INSTALL ON THE SLAB RIB INDEPENDENT FROM THROUGH BOLTS. EXTEND ANGLE AS REQUIRED. DO NOT INSTALL EXPANSION ANCHORS IN SLAB RIBS WHERE THROUGH BOLTS ARE PRESENT.
3. W- STEEL DECK TO BE 20 GAGE MIN.



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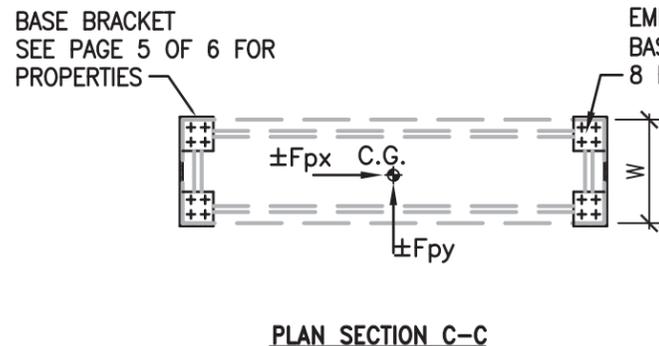
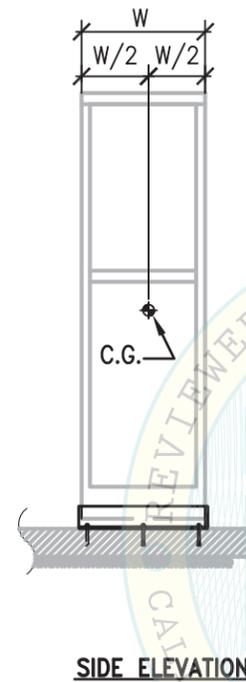
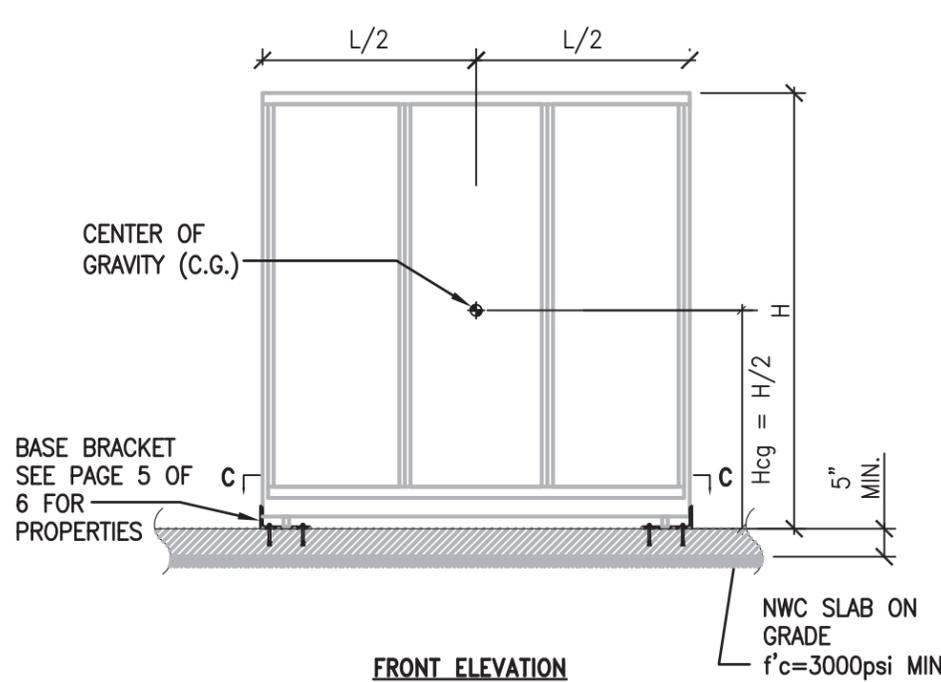
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CASE 2 – ONE, TWO AND THREE CELL TALL CABINETS ON GRADE



HILTI HSL-3 M10 EXPANSION ANCHORS W/ A MINIMUM HOLE DEPTH INTO CONCRETE OF 3-1/2" TO PROVIDE AN EFFECTIVE EMBEDMENT OF 2-3/4". INSTALL IN STANDARD SIZE HOLE AT BASE BRACKET.
8 EXPANSION ANCHORS TOTAL PER BRACKET

MODEL	Wp (LBS)	FORCES				CABINET PROPERTIES		
		Rult (LBS)	Vult (LBS/BOLT)	Ω_0 Vult (LBS/BOLT)	Tult (LBS/BOLT)	L (in)	W (in)	H (in)
ONE-CELL CABINETS	1,365	702	153	230	722	26 1/2	26 1/8	78
TWO-CELL CABINETS	2,485	843	280	419	978	48 1/2	26 1/8	78
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$F_p = 0.90 W_p$ [$S_{ps} \leq 2.00, I_p = 1.5, R_p = 1.5, a_p = 1.0, \Omega_0 = 1.5, z/h = 0$]
 $F_v = 0.40 W_p$
 Rult = MAXIMUM BRACKET PIN UPLIFT FORCE AT STRENGTH LEVEL
 Vult = MAXIMUM SHEAR PER EXPANSION ANCHOR AT STRENGTH LEVEL = $(F_p/8)$ ANCHORS
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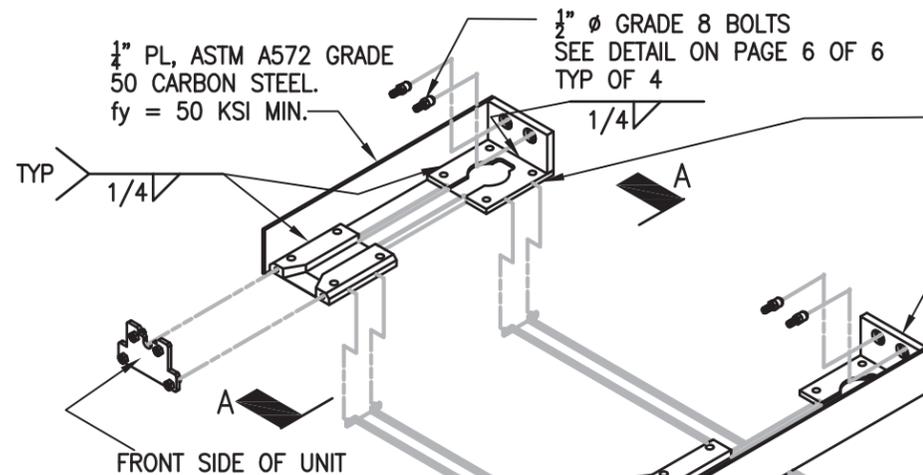
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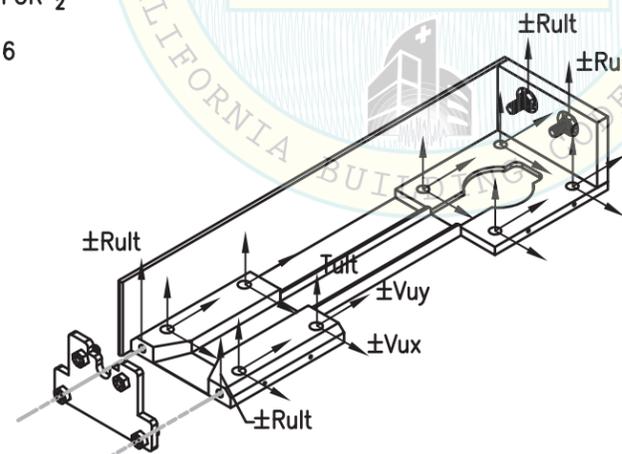
1/2" PL, ASTM A572 GRADE 50 CARBON STEEL.
fy = 50 KSI MIN. W/ (4) STANDARD SIZE HOLES FOR 5/8" Ø BOLTS
SEE PL DETAIL ON PAGE 6 OF 6

3/4" PL, ASTM A572 GRADE 50 CARBON STEEL.
fy = 50 KSI MIN.
SEE REAR PL DETAIL ON PAGE 6 OF 6

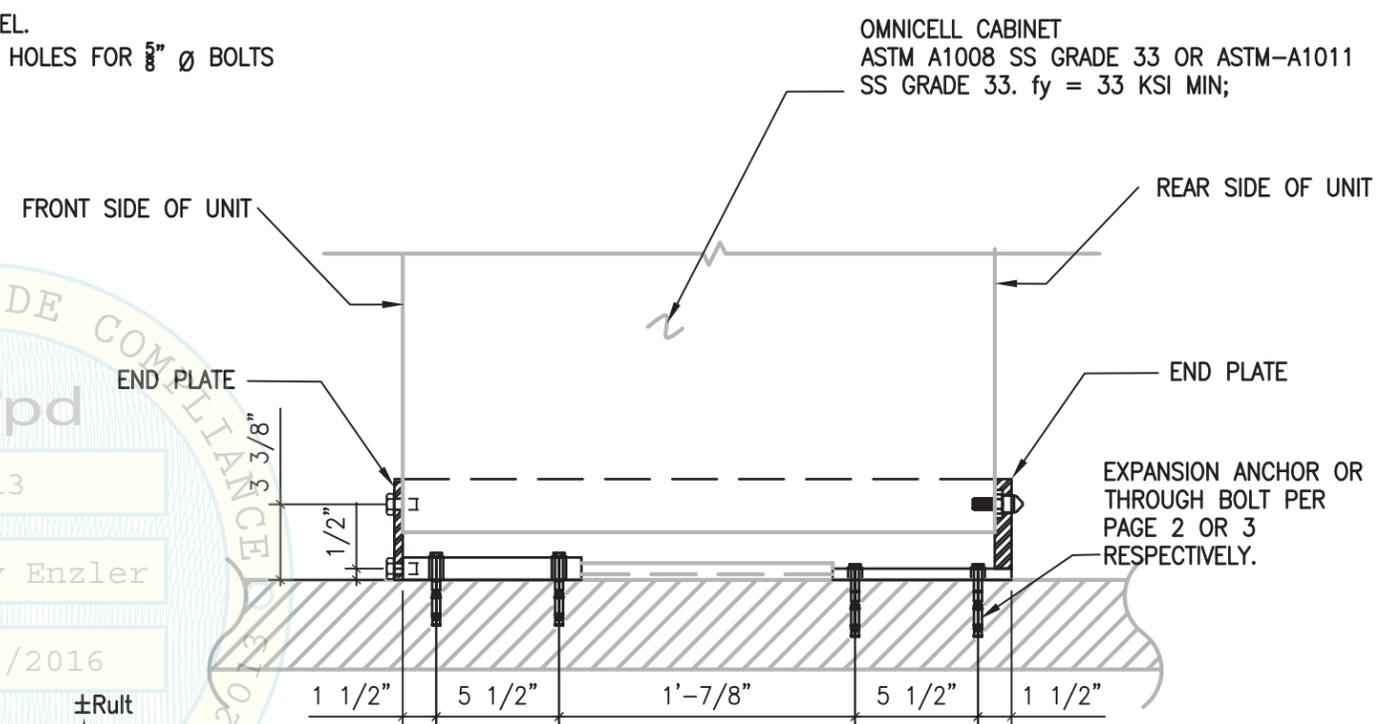
3/4" PL, ASTM A572 GRADE 50 CARBON STEEL.
fy = 50 KSI MIN. W/ (4) STANDARD SIZE HOLES FOR 5/8" Ø BOLTS. SEE PL DETAIL ON PAGE 6 OF 6

3/8" PL, ASTM A572 GRADE 50 CARBON STEEL. fy = 50 KSI MIN.
W/ (4) STANDARD SIZE HOLES FOR 1/2" Ø GRADE 8
SEE PL DETAIL ON PAGE 6 OF 6

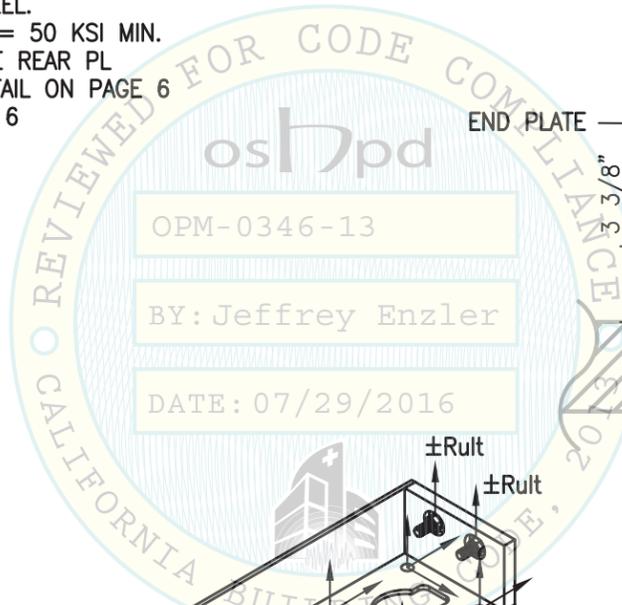
NOTE
AS DEFINED BY AISC 360-10, STANDARD THE DIAMETER OF STANDARD SIZE HOLES EQUALS THE BOLT DIAMETER + 1/16"



NOTE
SEE PAGES 2 AND 3 OF 5 FOR FORCE DESIGNATION
FORCE DISTRIBUTION IN BASE BRACKET



SECTION A-A





OSHPD PRE-APPROVAL OF MANUFACTURER CERTIFICATION

OPM-0346-13

OMNICELL ONE-, TWO- AND THREE-CELL CABINETS

DEGENKOLB ENGINEERS
 235 Montgomery Street, Suite 500
 San Francisco, CA 94104
 415.392.6952 Phone
 415.981.3157 Fax
 www.degenkolb.com



ONE-CELL CABINET MODELS

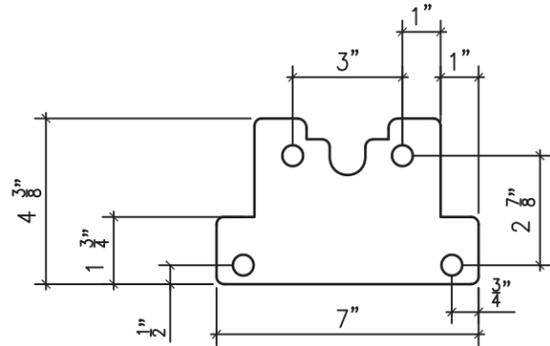
MED-FRM-101, MED-AUX-101, SUP-AUX-101, SUP-FRM-101, CSM-FRM-101, CSM-FRM-104, CSM-FRM-107, CSM-FRM-110, NAC-FRM-104, NAC-FRM-105, NAC-FRM-109, NAC-FRM-110, NAC-FRM-111, MED-FRM-022, MED-FRM-023, MED-FRM-030, MED-FRM-040, MED-FRM-041, MED-FRM-042

TWO-CELL CABINET MODELS

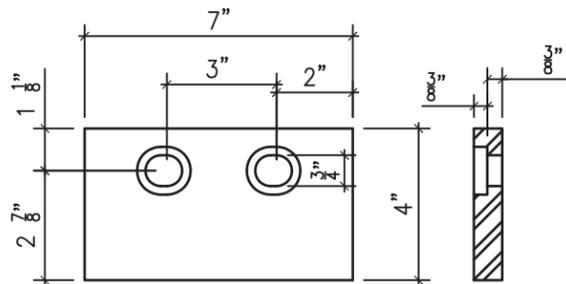
MED-FRM-102, MED-AUX-102, SUP-AUX-102, SUP-FRM-102, CSM-FRM-102, CSM-FRM-105, CSM-FRM-108, CSM-FRM-111, NAC-FRM-106, NAC-FRM-107, NAC-FRM-108, MED-FRM-024, MED-FRM-025, MED-FRM-031, MED-FRM-032, MED-FRM-036, MED-FRM-037, MED-FRM-043, MED-FRM-044, MED-FRM-045

THREE-CELL CABINET MODELS

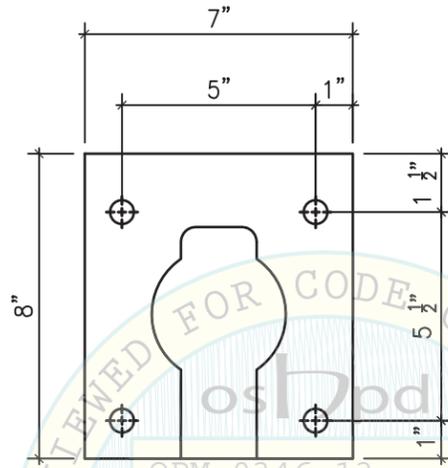
MED-FRM-103, MED-AUX-103, SUP-AUX-103, SUP-FRM-103, CSM-FRM-103, CSM-FRM-106, CSM-FRM-109, CSM-FRM-112, MED-FRM-026, MED-FRM-027, MED-FRM-028, MED-FRM-033, MED-FRM-034, MED-FRM-035, MED-FRM-047, MED-FRM-048, MED-FRM-049, MED-FRM-050



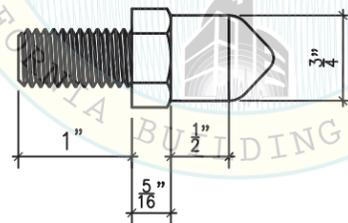
PL DETAIL ON FRONT SIDE OF THE UNIT



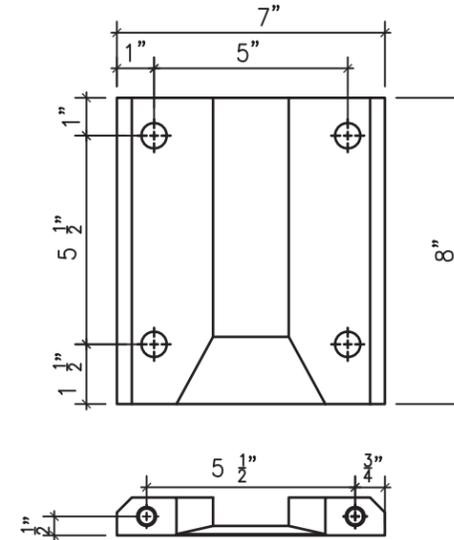
PL DETAIL ON REAR SIDE OF THE UNIT



FLOOR PL DETAIL ON REAR SIDE OF THE UNIT



BOLT ON REAR SIDE OF THE UNIT



FLOOR PL DETAIL ON FRONT SIDE OF THE UNIT

