

DRAWN FOR:

DR. KEVIN DARR

X-RAY ROOM

APPROVED BY: _____

EQUIPMENT:

DEL MEDICAL
A **UMG** COMPANY

HIGH FREQUENCY GENERATOR
RADIOGRAPHIC SYSTEM SUITE

SUBMITTED BY:

CCX MEDICAL IMAGING, INC.



1824 INDUSTRIAL BLVD.
HARVEY, LA 70058
PHONE: 504.367.8028
FAX: 504.367.8023

DRAWN BY:



GAMMA TECH, INC.

1217 Hampton Place
Salem, OH 44460
dhenry@gammatech.net

David J. Henry (Designer)
Phone: (407) 556-3889

FILE NAME: KD260302c

ISSUED OR REVISED

DATE

SCALE: TO FIT

CONCEPTUAL #1

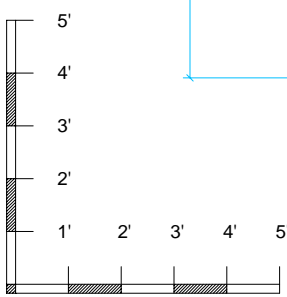
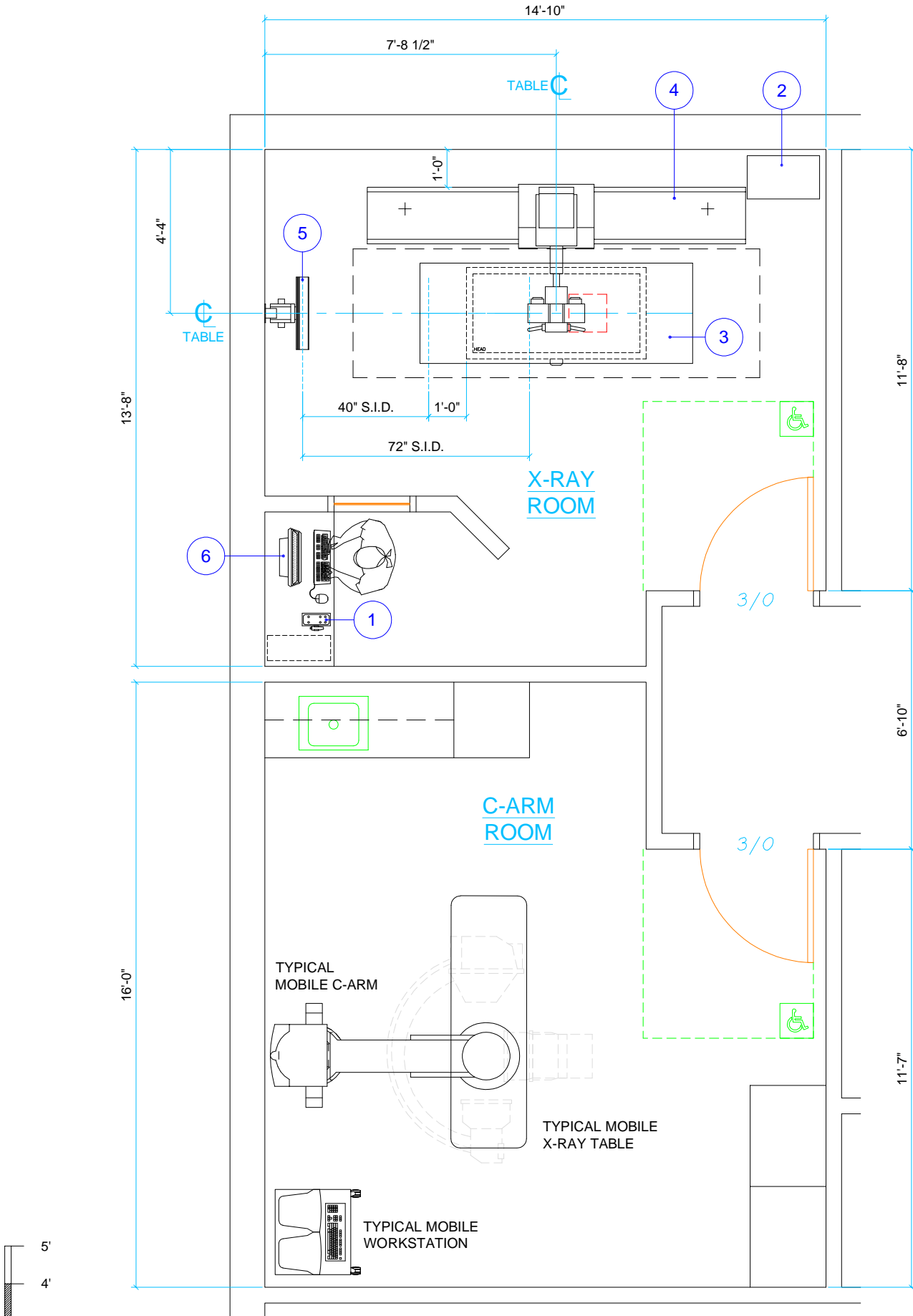
03.09.2026

DRAWN BY: DAVE HENRY

EQUIPMENT SCHEDULE

NOTES	EQUIPMENT IDENTIFICATION NUMBER								
			BTU / HOUR	WEIGHT (LBS.)					
			DESCRIPTION	DIMENSIONS (IN.)					
					W	x	D	x	H
OFOI	1	35	DEL MEDICAL SYSTEMS GROUP CMP-200 40KW HF GENERATOR MINI-CONSOLE (PART #90263400)	4.00	9.00	2.00			5
OFOI	2	1000	DEL MEDICAL SYSTEMS GROUP CMP-200 40KW HF GENERATOR GENERATOR CABINET	23.00	13.70	24.30			113
OFOI	3	300	DEL MEDICAL SYSTEMS GROUP EV-800 ELEVATING 4-WAY FLOAT TOP TABLE	86.50	31.90	34.25			563
OFOI	4	1200	DEL MEDICAL SYSTEMS GROUP DFMT (PLATFORM TUBE MOUNT - 10'-0" TRACK) FLOOR MOUNT TUBESTAND	120.00	47.00	85.00			673
OFOI	5	35	DEL MEDICAL SYSTEMS GROUP VS-100 (3546) UPRIGHT WALL STAND	23.00	14.00	86.00			250
OFOI	6	1000	VIEWWORKS VIVIX-S DR SYSTEM WORKSTATION PC	TYPICAL PC					

NOTE EXPLANATION:
 CFCI = CONTRACTOR FURNISHED - CONTRACTOR INSTALLED
 OFCI = OWNER FURNISHED - CONTRACTOR INSTALLED
 OFOI = OWNER FURNISHED - OWNER INSTALLED



SCALE

PROPOSED EQUIPMENT LAYOUT