

**PLUMBING SPECIFICATIONS**

| QUANTITY | SPEC. NUMBER | DESCRIPTION  | UTILITIES  |           |                |             |        |     |        | DETAIL |
|----------|--------------|--|------------|-----------|----------------|-------------|--------|-----|--------|--------|
|          |              |  | COLD WATER | HOT WATER | COMPRESSED AIR | NATURAL GAS | VACUUM | N2O | OXYGEN |        |
| 2        | 3A           | ADEC 411 CHAIR UTILITY CENTER - SELF-CONTAINED WATER.  |            |           |                |             |        |     |        | 3A     |
| 2        | 3A           | ADEC CASCADE CHAIR UTILITY CENTER - SELF-CONTAINED WATER.  |            |           |                |             |        |     |        | 3A     |
| 8        | 3A           | ADEC 5580 CABINET UTILITY CENTER - SELF-CONTAINED WATER.   |            |           |                |             |        |     |        | 3A     |
| 4        | 3A           | ADEC 311 CHAIR UTILITY CENTER - SELF-CONTAINED WATER.  |            |           |                |             |        |     |        | 3A     |
| 8        | 7C           | N2O, O2 CHECK VALVES & VACUUM LINE - CHECK VALVES SUPPLIED BY HENRY SCHEIN DENTAL. GAS LINES & CHECK VALVES INSTALLED BY ASSE 6010 CERTIFIED PLUMBER. SILVER SOLDERED TYPE K OR L COPPER GAS LINES RUN TO LOCATION SHOWN FROM MANIFOLD (23) OR SHUT-OFF VALVE (3A) DEPENDING ON APPLICATION. 1/2" VACUUM BRANCH LINE FROM MAIN TRUNK LINE BY PLUMBER. LOCATIONS SHOWN ON UTILITY CENTER DETAILS. VERIFIED BY HENRY SCHEIN REP. ALL ASPECTS OF SYSTEM MUST CONFORM WITH NFPA 99 CODES RELATING TO CATEGORY 3 DENTAL FACILITIES. |            |           |                |             |        |     |        | 7C     |
| 12       | 11           | MODULAR SINKS & FAUCETS - SINK AND FAUCET SUPPLIED BY HENRY SCHEIN DENTAL. INSTALLED BY CONTRACTOR. FINAL CONNECTIONS BY CONTRACTOR.   |            |           |                |             |        |     |        |        |
| 1        | 11A          | STANDARD SINK & FAUCET - CONTRACTOR TO PROVIDE AND INSTALL SINK AND FAUCET. MANUFACTURER AND STYLE DETERMINED BY OWNER. FINAL CONNECTIONS BY CONTRACTOR.   |            |           |                |             |        |     |        |        |
| 12       | 12           | AIR POWERED SINK CONTROL - FROM (12) TO (11). SUPPLIED BY HENRY SCHEIN DENTAL. INSTALLED BY CONTRACTOR.  |            |           |                |             |        |     |        |        |
| 1        | 13           | COMPRESSED AIR LINE AND VALVE - 1/2" AIR LINE FROM COMPRESSOR (25) BY CONTRACTOR. TERMINATE WITH A 3/8" ANGLE VALVE.   |            |           |                |             |        |     |        | 13     |
| 1        | 14C          | STERI-CENTER UTILITIES - CONTRACTOR TO PROVIDE REQ'D UTILITIES PER MFR'S SPECS. STERI-CENTER SUPPLIED AND INSTALLED BY HENRY SCHEIN DENTAL. EXACT LOCATIONS TO BE CONFIRMED ON-SITE BY HENRY SCHEIN EQUIPMENT SPECIALIST. FINAL CONNECTIONS OF CABINET UTILITIES BY CONTRACTOR.  |            |           |                |             |        |     |        | 14C    |
| 1        | 15           | ULTRASONIC CLEANER - FOR EQUIPMENT LOCATION ONLY. CONTRACTOR TO PROVIDE REQ'D UTILITIES FOR STERILIZATION CENTER AT 14C LOCATION. CLEANER SUPPLIED AND INSTALLED BY HENRY SCHEIN DENTAL. CONNECTS TO SINK DRAIN.   |            |           |                |             |        |     |        | 14C    |
| 1        | 15B          | HANDPIECE MAINTENANCE SYSTEM - FOR EQUIPMENT LOCATION ONLY. CONTRACTOR TO PROVIDE REQ'D UTILITIES FOR STERILIZATION CENTER AT 14C LOCATION. SYSTEM SUPPLIED AND INSTALLED BY HENRY SCHEIN DENTAL.  |            |           |                |             |        |     |        | 14C    |

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|          |              |  | COLD WATER | HOT WATER | COMPRESSED AIR | NATURAL GAS | VACUUM | N2O | OXYGEN |        |     |
| 1        | 16           | MODEL TRIMMER - SUPPLIED AND INSTALLED BY HENRY SCHEIN DENTAL. DO NOT TIE INTO COLD WATER LINE FOR SINK. BACK FLOW PREVENTION AS REQUIRED PER CODE. SEE DETAIL.  |            |           |                |             |        |     |        |        | 16  |
| 1        | 17           | PLASTER TRAP - SUPPLIED BY HSD, INSTALLED BY CONTRACTOR ON SINK DRAIN LINE. DRAIN LINE MUST BE 21" A.F.F.  |            |           |                |             |        |     |        |        | 16  |
| 1        | 25           | DENTAL AIR COMPRESSOR - SUPPLIED BY HENRY SCHEIN DENTAL. INSTALLED BY CONTRACTOR. FOR DENTAL AIR DRIVEN DEVICES. 1/2" I.D. COPPER TYPE K OR L SUPPLY LINES TO LOCATIONS THAT REQUIRE AIR. BUCK BOOST TRANSFORMER SUPPLIED AND INSTALLED BY CONTRACTOR (IF REQ'D). FINAL CONNECTIONS BY CONTRACTOR. REFER TO NFPA 99 CODES RELATING TO CATEGORY 3 DENTAL FACILITIES.                              |            |           |                |             |        |     |        |        | 25  |
| 1        | 27           | VACUUM PUMP (DRY) - SUPPLIED BY HENRY SCHEIN DENTAL. INSTALLED BY CONTRACTOR. 1.5"-2" MAIN TRUNK LINES. VERIFY TRUNK & BRANCH LINE SIZES WITH MFR RECOMMENDATIONS. USE SCH 40 PVC WHERE PERMITTED BY CODE. EXHAUST PUMP TO OUTSIDE. BUCK BOOST TRANSFORMER SUPPLIED AND INSTALLED BY CONTRACTOR (IF REQ'D). FINAL CONNECTIONS BY CONTRACTOR. PROVIDE WATER LINE WITH HOSE BIB NEAR UNIT.         |            |           |                |             |        |     |        |        | 27  |
| 1        | 29A          | AMALGAM SEPARATOR - SUPPLIED BY HENRY SCHEIN DENTAL. INSTALLED BY PLUMBER. VERIFY LOCATION WITH HENRY SCHEIN DENTAL EQUIPMENT SPECIALIST. CONNECT TO VACUUM LINE COMING IN FROM TREATMENT ROOMS.   |            |           |                |             |        |     |        |        | 29A |
| 1        | 30           | REMOTE WATER CONTROL VALVE - SUPPLIED BY HENRY SCHEIN DENTAL. INSTALLED BY CONTRACTOR ON COLD WATER SUPPLY LINE.   |            |           |                |             |        |     |        |        | 30  |
| 1        | 33           | NITROUS OXIDE & OXYGEN SYSTEM/MANIFOLD - MANIFOLD SUPPLIED BY HENRY SCHEIN DENTAL. INSTALLED BY ASSE 6010 CERTIFIED CONTRACTOR. SILVER SOLDERED TYPE K OR L COPPER GAS LINES TO ALL (7) AND/OR (7C) LOCATIONS ON SHEET DP.1. IF (34A) IS CALLED FOR ON PLAN, GAS LINES MUST RUN THERE FIRST. ALL ASPECTS OF SYSTEM & CYLINDER CLOSET MUST FOLLOW NFPA 99 CODES FOR CATEGORY 3 DENTAL FACILITIES. |            |           |                |             |        |     |        |        | 33  |
| 1        | 45           | WASHER & DRYER - CONTRACTOR TO PROVIDE UTILITIES FOR OWNER SUPPLIED APPLIANCES. (NATURAL GAS OPTION IF REQUIRED FOR DRYER).  |            |           |                |             |        |     |        |        | 45  |

**VACUUM NOTES**

THE VACUUM PIPING LAYOUT HAS A LARGE EFFECT ON THE EFFICIENCY AND RELIABILITY OF THE DENTAL VACUUM SYSTEM. REFER TO MANUFACTURER'S PRE-INSTALLATION GUIDE PROVIDED BY HENRY SCHEIN EQUIPMENT SPECIALIST FOR SPECIFIC SIZING OF SUB-UP, TRUNK, AND BRANCH LINES.

IT IS HIGHLY RECOMMENDED THAT VACUUM LINES RUN UNDERNEATH DENTAL EQUIPMENT BY MEANS OF TRENCHING/ CORING (CONCRETE SLAB) OR IN SUB FLOOR (BASEMENT/ CRAWL SPACE). ALL LINES ARE TO BE DESIGNED WITH PVC PIPING UNLESS DICTATED BY LOCAL CODES TO USE COPPER OR CAST IRON.

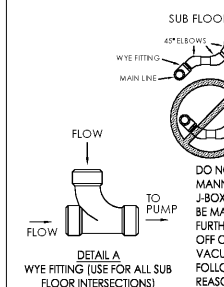
TO ENSURE OPTIMUM VACUUM PERFORMANCE, INSTALL MAIN LINE DIRECTLY BELOW THE DENTAL CHAIR, CABINET OR WALL JUNCTION BOX TO REDUCE OR ELIMINATE BRANCH LINE RUNS WHEREVER POSSIBLE.

TERMINATION: TERMINATE VACUUM MAIN LINE IN MECHANICAL ROOM. PLUMBING CONTRACTOR TO PROVIDE PLASTER TRAP AND END OF SUB-UP FROM FLOOR OR WALL TO END OF VACUUM LINE. DETERMINED BY TRUNK AND PUMP INTAKE PIPE SIZE. SEE DETAIL A. MANUFACTURER'S PRE-INSTALLATION GUIDE PROVIDED BY HENRY SCHEIN EQUIPMENT REP. IN THE CASE OF EQUAL TRUNK LINE SYSTEM PROVIDE ENOUGH SPACE BETWEEN STUB-UPS TO INSTALL THEM ON BOTH LINES.

2. TRUNK LINE(S): VACUUM TRUNK LINE(S) TO BE SUPPORTED EVERY 4'-0" TO PREVENT SAG AND SLOPED A MINIMUM OF 1/4" PER 10'-0" TOWARD THE VACUUM PUMP.

3. BRANCH LINE(S): BRANCH LINES ARE TO HAVE "SWEEPING" 90 DEGREE TURNS TO AVOID VACUUM LOSS. A "WYE" FITTING SHOULD BE USED TO JOIN BRANCH LINES TO THE TRUNK LINE.

**BRANCH LINE CONFIGURATION**



DO NOT PIPE TRUNK LINE IN A SERIES MANNER LOOPING FROM J-BOX TO J-BOX. A CONTINUOUS TRUNK LINE MUST BE MAINTAINED FROM THE PUMP TO THE FURTHEST J-BOX USING BRANCH LINES OFF OF THE TRUNK LINE TO PICK UP EACH VACUUM OUTLET. TRUNK LINE MAY FOLLOW DRAIN LINE TRENCHES WITHIN REASON. USE ONLY 45 DEGREE EL'S. DO NOT USE ANY 90 DEGREE EL'S. ALL SUB FLOOR SCH 40 PVC CONNECTIONS ARE TO BE PLUMBED WITH 45 DEGREE EL'S USING DETAIL A FOR TEEING BRANCH LINE CONNECTIONS INTO TRUNK LINE.

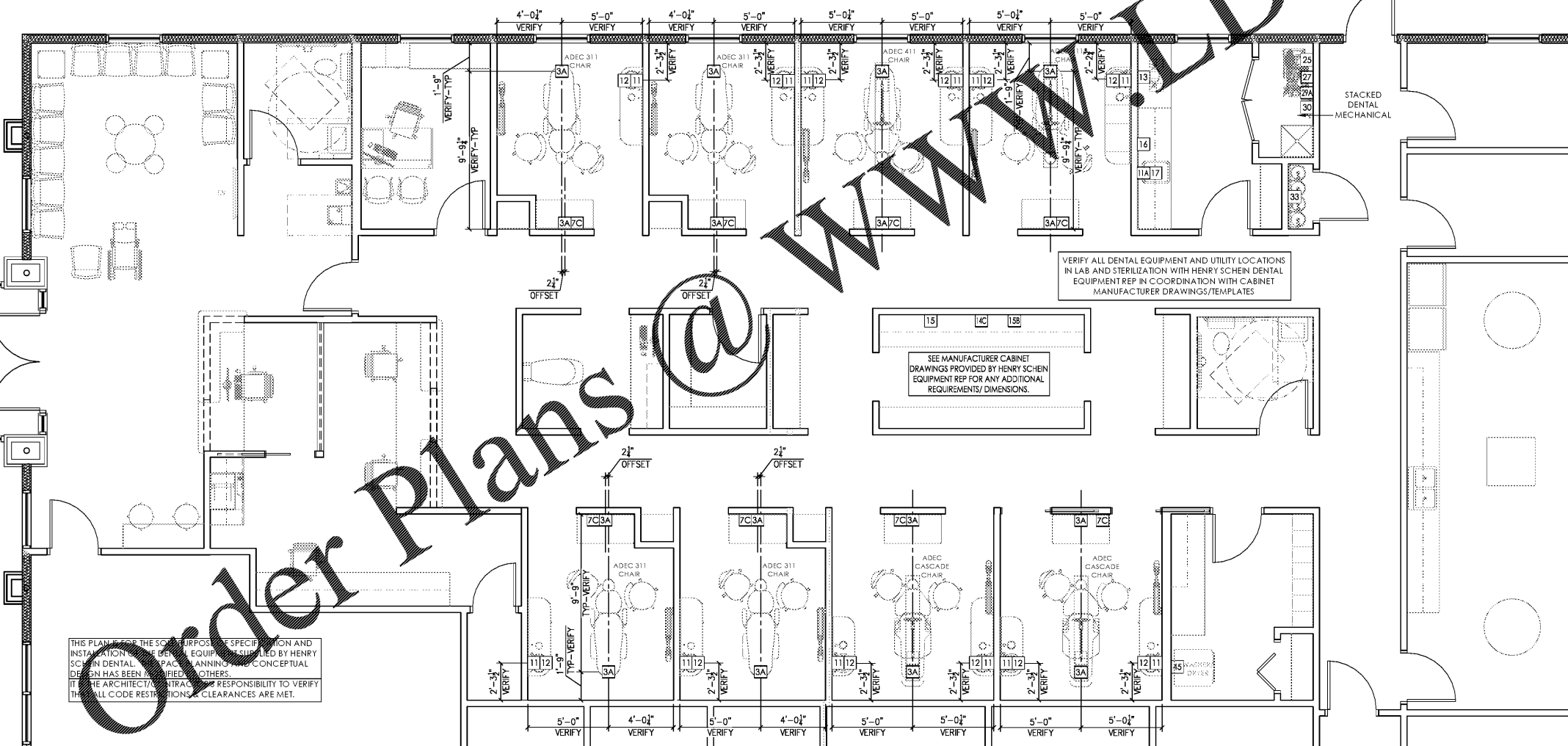
SPECIAL NOTE: IF VACUUM LINES ENCRUSH ON EITHER A WALL OR COLUMN FOOTING, USE 45 DEGREE ELBOWS TO PIPE AROUND FOOTING SO PIPE REACHES PROPER LOCATION.

**PLUMBING NOTES**

- THIS SPECIFICATION SHEET IS INTENDED AS A GUIDE FOR TRADESMEN. THE FLOOR PLANS ENCLOSED HEREIN ARE SUGGESTIONS FOR THE PLACEMENT OF DENTAL EQUIPMENT. THEY ARE NOT INTENDED FOR CONSTRUCTION.
- EXACT EQUIPMENT LOCATIONS MUST BE JOB SITE VERIFIED BY THE HENRY SCHEIN DENTAL EQUIPMENT SPECIALIST.
- FOLLOW MANUFACTURER'S TEMPLATES FOR EXACT REQUIREMENTS FOR ANY EQUIPMENT SUPPLIED BY HENRY SCHEIN DENTAL. CONSULT WITH HENRY SCHEIN DENTAL REP FOR ADDITIONAL INFORMATION.
- ANY REFERENCE TO "AIR", "COMPRESSED AIR" OR "AIR COMPRESSOR" REFER TO THE UNIT AND ALL COMPONENTS WHICH ARE CONSIDERED A CATEGORY 3 DENTAL AIR SUPPLY SYSTEM. REFER THE LOCALLY ACCEPTED VERSION OF NFPA 99 FOR CODE REQUIREMENTS. THIS SHOULD NOT BE CONFUSED WITH "AIR" AS IT IS DEFINED IN CATEGORY 1 OR 2 MEDICAL FACILITIES.
- WATER PRESSURE MUST NOT EXCEED 50 PS1 AT ALL DENTAL UNITS.
- BACK-FLOW PREVENTION IS REQUIRED ON ALL LINES AS PER LOCAL CODE.
- REFER TO ARCHITECTS DRAWINGS FOR PLUMBING REQUIREMENTS IN ALL AREAS NOT INDICATED ON THIS PLAN.

ALL DIMENSIONS NOTED ON PLAN ARE TO THE CENTERLINE OF PLUMBING OR UTILITY CENTER (UNLESS SHOWN OTHERWISE)

SEE SHEETS DED.1 - DED.3 FOR DENTAL EQUIPMENT DETAILS



THIS PLAN IS FOR THE SCHEMATIC PURPOSES OF SPECIFICATION AND INSTALLATION OF THE DENTAL EQUIPMENT SUPPLIED BY HENRY SCHEIN DENTAL. THE PACKAGING AND CONCEPTUAL DESIGN HAS BEEN VERIFIED BY OTHERS. THE ARCHITECT/CONTRACTOR HAS RESPONSIBILITY TO VERIFY THAT ALL CODE RESTRICTIONS & CLEARANCES ARE MET.

**PROPOSED PLUMBING PLAN**  
1/4"=1'-0"



**GEORGIA MOUNTAINS HEALTH**

PROJECT: GEORGIA MOUNTAINS HEALTH  
LOCATION: ELLIJAY, GA.

HENRY SCHEIN REP: JOE WILSON

CENTER: ATLANTA, GA.

PHONE #: (404)-226-8821

**-IMPORTANT NOTE-**  
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**ALL DIMENSIONS ARE SUBJECT TO JOB-SITE VERIFICATION.**

PROJECT NUMBER: 20-0565

PROJECT START DATE: 4/3/2020

FINALS START DATE: 7/9/2020

DRAWN BY: ARCH  
FINALS BY: TJK  
CHECKED BY: LBS

| REVISIONS:  |     |
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INT.SQ.FT.= PER ARCH

SCALE: 1/4"=1'-0" SHT. SIZE: 24 x 36

DENTAL PLUMBING PLAN

**DP.1**