DATE OF THIS VERSION (new)
June 1, 2013

TITLE OF DOCUMENT (new title if applicable):

DATE OF VERSION BEING SUPERSEDED (old):
January 1, 2010

DESCRIPTION OF DOCUMENT (previous title, number, other identifying data):
Nurse Call and Code Blue Systems, 27 52 23

SUMMARY OF CHANGES IN THIS VERSION:

1. The Guarantee Period of Service clause has been removed from this spec. section. It has been replaced with a requirement to comply with the FAR clause, Warranty. See Article 4.2
SECTION 27 52 23
NURSE CALL AND CODE BLUE SYSTEMS

SPEC WRITER NOTES:
Edit between BOLD BLUE //-----// Delete if not applicable to project. Refer to VA TVE (005OP3B – see Paragraph 1.3.D for specific contact info) for technical assistance.
Included throughout this specification are references to the System’s interface capability and various related features. The system designer shall verify availability of this System and coordinate associated requirements and subsequent interface(s).
It is the responsibility of the Spec Writer to select, edit and renumber the appropriate portions of this document to conform to the overall TIP requirements. Where deviations occur, the Spec Writer shall contact the appropriate authorities identified herein for technical assistance and approval(s) BEFORE THE FINAL CONTRACT DOCUMENT CAN BE APPROVED BY VA.

PART 1 - GENERAL

1.1  SECTION SUMMARY

A. Work covered by this document includes design, engineering, labor, material and products, equipment warranty and system warranty, training and services for, and incidental to, the complete installation of new and fully operating National Fire Protection Association (NFPA) – Life Safety Code 101.3-2 (a) Labeled and (b) Listed, Emergency Service Nurse-Call and/or Life Safety listed Code Blue Communication System and associated equipment (here-in-after referred to as the System) provided in approved locations indicated on the contract drawings. These items shall be tested and certified capable of receiving, distributing, interconnecting and supporting Nurse-Call and/or Code Blue communications signals generated local and remotely as detailed herein.

B. Work shall be complete, Occupational Safety and Health Administration (OSHA), National Recognized Testing Laboratory (NRTL – i.e. Underwriters Laboratory [UL]) Listed and Labeled; and VA Central Office (VACO), Telecommunications Voice Engineering (TVE 005OP3B) tested, certified and ready for operation.

C. The System shall be delivered free of engineering, manufacturing, installation, and functional defects. It shall be designed, engineered and installed for ease of operation, maintenance, and testing.
D. The term “provide”, as used herein, shall be defined as: designed, engineered, furnished, installed, certified, tested, and warranty by the Contractor.

E. Specification Order of Precedence: In the event of a conflict between the text of this document and the Project’s Contract Drawings outlined and/or cited herein; THE TEXT OF THIS DOCUMENT TAKES PRECEDENCE. HOWEVER, NOTHING IN THIS DOCUMENT WILL SUPERSEDE APPLICABLE EMERGENCY LAWS AND REGULATIONS, SPECIFICALLY NATIONAL AND/OR LOCAL LIFE AND PUBLIC SAFETY CODES. The Local Fire Marshall and/or VA Public Safety Officer are the only authorities that may modify this document’s EMERGENCY CODE COMPLIANCE REQUIREMENTS, on a case by case basis, in writing and confirmed by VA’s Project Manager (PM), Resident Engineer (RE) and TVE-005OP3B. The VA PM is the only approving authority for other amendments to this document that may be granted, on a case by case basis, in writing with technical concurrences by VA’s PM, RE, TVE-005OP3B and identified Facility Project Personnel.

F. The Original Equipment Manufacturer (OEM) and Contractor shall ensure that all management, sales, engineering and installation personnel have read and understand the requirements of this specification before the system is designed, engineered, delivered and provided. The Contractor shall furnish a written statement stating this requirement as a part of the technical submittal that includes each name and certification, including the OEMs. The Contractor is cautioned to obtain in writing, all approvals for system changes relating to the published contract specifications and drawings, from the PM and/or the RE before proceeding with the change.

1.2 RELATED SECTIONS
A. 01 33 23 – Shop Drawings, Product Data and Samples.
B. 07 84 00 – Firestopping.
C. 26 05 21 – Low – Voltage Electrical Power Conductors and Cables (600 Volts and Below).
D. 26 41 00 – Facility Lightning Protection.
E. 27 05 11 – Requirements for Communications Installations.
F. 27 05 26 – Grounding and Bonding for Communications Systems.
G. 27 05 33 – Raceways and Boxes for Communications Systems.
H. 27 10 00 – TIP Structured Communications Systems Cabling.
I. 27 11 00 – TIP Communications Interface and Equipment Rooms Fittings.
J. 27 15 00 – TIP Communications Horizontal and Vertical Cabling.
1.3 DEFINITION
A. Provide: Design, engineer, furnish, install, connect complete, test, certify and warranty.
B. Work: Materials furnished and completely installed.
C. Review of contract drawings: A service by the engineer to reduce the possibility of materials being ordered which do not comply with contract documents. The engineer's review shall not relieve the Contractor of responsibility for dimensions or compliance with the contract documents. The reviewer's failure to detect an error does not constitute permission for the Contractor to proceed in error.
D. Headquarters (aka VACO) Technical Review, for National and VA Communications and Security, Codes, Frequency Licensing Standards, Guidelines and Compliance:
   Office of Telecommunications
   Special Communications Team (005OP3B)
   1335 East West Highway - 3rd Floor
   Silver Spring, Maryland 20910,
   (O) 301-734-0350, (F) 301-734-0360
E. Engineer: // XXXXXXX //
   // XXXXXXX //
   // XXXXXXX //
   // XXXXXXX //
F. Owner: // XXXXXXX //
G. General Contractor (GC): // XXXXXXX //
H. Contractor: Systems Contractor; you; successful bidder.

1.4 REFERENCES
A. The installation shall comply fully with all governing authorities, laws and ordinances, regulations, codes and standards, including, but not limited to:
   1. United States Federal Law:
a. Departments of:

1) Commerce, Consolidated Federal Regulations (CFR), Title 15 – Under the Information Technology Management Reform Act (Public Law 104-106), the Secretary of Commerce approves standards and guidelines that are developed by the:

   b) Part 58 – Television Broadcast Service.
   c) Part 90 – Rules and Regulations, Appendix C.

3) Health, (Public Law 96-88), CFR, Title 42, Chapter IV Health & Human Services, CFR, Title 46, Subpart 1395(a)(b) JCAHO “a hospital that meets JCAHO accreditation is deemed to meet the Medicare conditions of Participation by meeting Federal Directives:”
   a) All guidelines for Life, Personal and Public Safety; and, Essential and Emergency Communications.

4) Labor, CFR, Title 29, Part 1910, Chapter XVII – Occupational Safety and Health Administration (OSHA), Occupational Safety and Health Standard:
a) Subpart 7 - Definition and requirements (for a NRTL - 15 Laboratory’s, for complete list, contact [http://www.osha.gov/dts/otpca/nrtl/faq_nrtl.html]):

1) UL:
   a) 44-02 – Standard for Thermoset-Insulated Wires and Cables.
   b) 65 - Standard for Wired Cabinets.
   c) 83-03 - Standard for Thermoplastic-Insulated Wires and Cables.
   d) 467-01 - Standard for Electrical Grounding and Bonding Equipment
   e) 468 - Standard for Grounding and Bonding Equipment.
   f) 486A-01 - Standard for Wire Connectors and Soldering Lugs for Use with Copper Conductors
   g) 486C-02 - Standard for Splicing Wire Connectors.
   h) 486D-02 - Standard for Insulated Wire Connector Systems for Underground Use or in Damp or Wet Locations.
   i) 486E-00 - Standard for Equipment Wiring Terminals for Use with Aluminum and/or Copper Conductors.
   j) 493-01 - Standard for Thermoplastic-Insulated Underground Feeder and Branch Circuit Cable.
   k) 514B-02 - Standard for Fittings for Cable and Conduit.
   l) 1069 - Hospital Signaling and Nurse Call Equipment.
   m) 1449 - Standard for Transient Voltage Surge Suppressors.
   n) 1479-03 - Standard for Fire Tests of Through-Penetration Fire Stops.
   o) 1666 - Standard for Wire/Cable Vertical (Riser) Tray Flame Tests.
   p) 1863 - Standard for Safety, Communications Circuits Accessories.
   q) 2024 - Standard for Optical Fiber Raceways.
   r) 60950-1/2 - Information Technology Equipment - Safety.

2) Canadian Standards Association (CSA): same tests as for UL.
3) Communications Certifications Laboratory (CCL): same tests as for UL.

4) Intertek Testing Services NA, Inc. (ITSNA formerly Edison Testing Laboratory [ETL]): same tests as for UL.
   c) Subpart 36 - Design and construction requirements for exit routes.
   d) Subpart 268 - Telecommunications.
   e) Subpart 305 - Wiring methods, components, and equipment for general use.

5) Department of Transportation, CFR, Title 49 (Public Law 89-670), Part 1, Subpart C - Federal Aviation Administration (FAA):
   b) Forms 7450 and 7460-2 - Antenna Construction Registration.

6) Veterans Affairs (Public Law No. 100-527), CFR, Title 38, Volumes I & II:
   a) Office of Telecommunications:
         b) Special Communications Proof of Performance Testing, VACO Compliance and Life Safety Certification(s).
   b) Office of Cyber and Information Security (OCIS):
   c) VA's National Center for Patient Safety - Veterans Health Administration Warning System, Failure of Medical Alarm Systems using Paging Technology to Notify Clinical Staff, July 2004.
   d) VA's Center for Engineering Occupational Safety and Health, concurrence with warning identified in VA Directive 7700.
   e) Office of Construction and Facilities Management (CFM):
      1) Master Construction Specifications (PG-18-1).
      2) Standard Detail and CAD Standards (PG-18-4).
4) Electrical Design Manual for VA Facilities (PG 18-10), Articles 7 & 8.

5) Minimum Requirements of A/E Submissions (PG 18-15):
   a) Volume B, Major New Facilities, Major Additions; and Major Renovations, Article VI, Paragraph B.
   b) Volume C - Minor and NRM Projects, Article III, Paragraph S.
   c) Volume E - Request for Proposals Design/Build Projects, Article II, Paragraph F.


8) Solicitation for Offerors (SFO) for Lease Based Clinics - (05-2009).

b. Federal Specifications (Fed. Specs.):
   1) A-A-59544-00 - Cable and Wire, Electrical (Power, Fixed Installation).

2. National Codes:

      1) 568-B - Commercial Building Telecommunications Wiring Standards:
         a) B-1 - General Requirements.
         b) B-2 - Balanced twisted-pair cable systems.
         c) B-3 - Fiber optic cable systems.
      2) 569 - Commercial Building Standard for Telecommunications Pathways and Spaces.
      3) 606 - Administration Standard for the Telecommunications Infrastructure of Communications Buildings.
      4) 607 - Commercial Building Grounding and Bonding Requirements for Telecommunications.
      5) REC 127-49 - Power Supplies.
      6) RS 270 - Tools, Crimping, Solderless Wiring Devices, Recommended Procedures for User Certification.
1.5 QUALIFICATIONS

A. The OEM shall have had experience with three (3) or more installations of Nurse Call systems of comparable size and interfacing complexity.
with regards to type and design as specified herein. Each of these installations shall have performed satisfactorily for at least one (1) year after final acceptance by the user. Include the names, locations and point of contact for these installations as a part of the submittal.

B. The Contractor shall submit certified documentation that they have been an authorized distributor and service organization for the OEM for a minimum of three (3) years. The Contractor shall be authorized by the OEM to pass thru the OEM’s warranty of the installed equipment to VA. In addition, the OEM and Contractor shall accept complete responsibility for the design, installation, certification, operation, and physical support for the System. This documentation, along with the System Contractor and OEM certifications must be provided in writing as part of the Contractor’s Technical submittal.

C. The Contractor’s Communications Technicians assigned to the System shall be fully trained, qualified, and certified by the OEM on the engineering, installation, operation, and testing of the System. The Contractor shall provide formal written evidence of current OEM certification(s) for the installer(s) as a part of the submittal or to the RE before being allowed to commence work on the System.

D. The Contractor shall display all applicable national, state and local licenses.

E. The Contractor shall submit copy (s) of Certificate of successful completion of OEM’s installation/training school for installing technicians of the System’s Nurse Call and/or Code Blue equipment being proposed.

1.6 CODES AND PERMITS

A. Provide all necessary permits and schedule all inspections as identified in the contract’s milestone chart, so that the system is proof of performance tested, certified and approved by VA and ready for operation on a date directed by the Owner.

B. The contractor is responsible to adhere to all codes described herein and associated contractual, state and local codes.

1.7 SCHEDULING

A. After the award of contract, the Contractor shall prepare a detailed schedule (aka milestone chart) using “Microsoft Project” software or equivalent. The Contractor Project Schedule (CPS) shall indicate detailed activities for the projected life of the project. The CPS
shall consist of detailed activities and their restraining relationships. It will also detail manpower usage throughout the project.

B. It is the responsibility of the Contractor to coordinate all work with the other trades for scheduling, rough-in, and finishing all work specified. The owner will not be liable for any additional costs due to missed dates or poor coordination of the supplying contractor with other trades.

1.8 REVIEW OF CONTRACT DRAWINGS AND EQUIPMENT DATA SUBMITTALS (AKA TECHNICAL SUBMITTAL[S])

(Note: The Contractor is encouraged, but not required, to submit separate technical submittal(s) outlining alternate technical approach(s) to the system requirements stated here-in as long as each alternate technical document(s) is complete, separate, and submitted in precisely the same manner as outlined herein. VA will review and rate each received alternate submittal, which follows this requirement, in exactly the same procedure as outlined herein. Partial, add-on, or addenda type alternates will not be accepted or reviewed.)

A. Submit at one time within 10 days of contract awarding, drawings and product data on all proposed equipment and system. Check for compliance with contract documents and certify compliance with Contractor's "APPROVED" stamp and signature.

B. Support all submittals with descriptive materials, i.e., catalog sheets, product data sheets, diagrams, and charts published by the manufacturer. These materials shall show conformance to specification and drawing requirements.

C. Where multiple products are listed on a single cut-sheet, circle or highlight the one that you propose to use. Provide a complete and through equipment list of equipment expected to be installed in the system, with spares, as a part of the submittal. Special Communications (TVE-005OP3B) will not review any submittal that does not have this list.

D. Provide four (4) copies to the PM for technical review. The PM will provide a copy to the offices identified in Paragraph 1.3.C & D, at a minimum for compliance review as described herein where each responsible individual(s) shall respond to the PM within 10 days of receipt of their acceptance or rejection of the submittal(s).
E. Provide interconnection methods, conduit (where not already installed), junction boxes (J-Boxes), cable, interface fixtures and equipment lists for the: ENR(s) (aka DMARC), TER, TCR, MCR, MCOR, PCR, ECR, Stacked Telecommunications Rooms (STR), Nurses Stations (NS), Head End Room (HER), Head End Cabinet (HEC), Head End Interface Cabinet (HEIC) and approved TCO locations TIP interface distribution layout drawing, as they are to be installed and interconnected to teach other (REFER TO APPENDIX B – SUGGESTED TELECOMMUNICATIONS ONE LINE TOPOLOGY pull-out drawing).

F. Equipment technical literature detailing the electrical and technical characteristics of each item of equipment to be furnished.

G. Engineering drawings of the System, showing calculated of expected signal levels at the headend input and output, each input and output distribution point, and signal level at each telecommunications outlet.

H. Surveys Required as a Part of The Technical Submittal:

1. The Contractor shall provide the following System surveys that depict various system features and capacities required in addition to the on-site survey requirements described herein (see Specification Paragraph 2.4.3). Each survey shall be in writing and contain the following information (the formats are suggestions and may be used for the initial Technical Submittal Survey requirements), as a minimum:

a. Nurse Call Cable System Design Plan:

1) An OEM and contractor designed functioning Nurse Call System cable plan to populate the entire TIP empty conduit/pathway distribution systems provided as a part of Specification 27 11 00 shall be provided as a part of the technical proposal. A specific functioning Nurse Call: cable, interfaces, J-boxes and back boxes shall coincide with the total growth items as described herein. It is the Contractor’s responsibility to provide the Systems’ entire Nurse Call cable and accessory requirements and engineer a functioning Nurse Call distribution system and equipment requirement plan of the following paragraph(s), at a minimum:

2) The required Nurse Call and/or Code Blue Equipment Locations:

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<tr>
<th>EQUIPPED ITEM</th>
<th>CAPACITY</th>
<th>GROWTH</th>
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<tr>
<td>Master Stations</td>
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<th>EQUIPPED ITEM</th>
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<td>Dome Lights</td>
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<td>Corridor</td>
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<td>Other</td>
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<td>Patient Stations</td>
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<td>Other</td>
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<td>Emergency Stations</td>
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<td>Bath</td>
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<td>Staff Stations</td>
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<td>Duty Stations</td>
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<td>Patient Locations</td>
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<td>Surgical Recovery Locations</td>
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<td>Medical Recovery Locations</td>
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<td>Other</td>
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<td>Emergency Room Locations</td>
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<td>Other</td>
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<td>Supervisory Locations</td>
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<td>Nurse Stations</td>
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<td>On-Call Rooms</td>
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<td>Other</td>
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<td>Remote Locations</td>
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<td>Telephone Operator’s Room</td>
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<td>Police Control Room</td>
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<td>Radio Paging Access <em>(when pre-approved by TVE-005OP3B)</em></td>
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<td>Audio Paging Access <em>(when pre-approved by TVE-005OP3B)</em></td>
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<td>Wireless Access <em>(when pre-approved by TVE-005OP3B)</em></td>
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<td>Maintenance/Programming Console</td>
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<td>Location(s)</td>
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<td>Central Control Cabinet/Equipment</td>
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<td>Location</td>
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<td>Power Supply(s)</td>
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<td>UPS(s)</td>
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3) The required Nurse Call and/or Code Blue Cable Plant/Connections:
   The Contractor shall clearly and fully indicate this category for each item identified herein as a part of the technical submittal. For this purpose, the following definitions and sample connections are provided to detail the system’s capability:

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<td>Central Control Cabinet/Equipment</td>
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<td>Essential Electrical Power Panel(s)</td>
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<td>Cable Plant</td>
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<td>Supply to Locations Identified in Paragraph 1.8.H.1.a.2)</td>
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<td>Remote Locations</td>
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<td>Police Control Room</td>
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<td>Maintenance/Program Console</td>
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<td>LAN (Local Facility) Access/Equipment/Location <em>(when pre-approved by TVE-0050P3B)</em></td>
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<td>Wireless Access/Equipment/Location <em>(when pre-approved by TVE-0050P3B)</em></td>
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<td>PA Access/Equipment/Location <em>(when pre-approved by TVE-0050P3B)</em></td>
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1.9 **PROJECT RECORD DOCUMENTS (AS BUILTS)**

A. Throughout progress of the Work, maintain an accurate record of changes in Contract Documents. Upon completion of Work, transfer recorded changes to a set of Project Record Documents.

B. The floorplans shall be marked in pen to include the following:
   1. Each device specific locations with UL labels affixed.
   2. Conduit locations.
   3. Each interface and equipment specific location.
   4. Head-end equipment and specific location.
   5. Wiring diagram.
   7. Warranty certificate.
   8. System test results.

1.10 **WARRANTIES / GUARANTRY**

A. The Contractor shall warrant the installation to be free from defect in material and workmanship for a period of two (2) years from the date of acceptance of the project by the owner. The Contractor shall agree to remedy covered defects within four (4) hours of notification of major failures or within twenty-four (24) hours of notification for individual station related problems.

B. The Contractor shall agree to grantee the system according to the guidelines outlined in Article 4 herein.

1.11 **USE OF THE SITE**

A. Use of the site shall be at the GC’s direction.

B. Coordinate with the GC for lay-down areas for product storage and administration areas.

C. Coordinate work with the GC and their sub-contractors.

D. Access to buildings wherein the work is performed shall be directed by the GC.
1.12 DELIVERY, STORAGE, AND HANDLING
A. Deliver, store, and handle products using means and methods that will prevent damage, deterioration, and loss, including theft.
B. Store products in original containers.
C. Coordinate with the GC for product storage. There may be little or no storage space available on site. Plan to potentially store materials off site.
D. Do not install damaged products. Remove damaged products from the site and replaced with new product at no cost to the Owner.

1.13 PROJECT CLOSE-OUT
A. Prior to final inspection and acceptance of the work, remove all debris, rubbish, waste material, tools, construction equipment, machinery and surplus materials from the project site and thoroughly clean your work area.
B. Before the project closeout date, the Contractor shall submit:
   1. OEM Equipment Warranty Certificates.
   2. Evidence of compliance with requirements of governing authorities such as the Low Voltage Certificate of Inspection.
   3. Project record documents.
   4. Instruction manuals and software that is a part of the system.
   5. System Guaranty Certificate.
C. Contractor shall submit written notice that:
   1. Contract Documents have been reviewed.
   2. Project has been inspected for compliance with contract.
   3. Work has been completed in accordance with the contract.

PART 2 – PRODUCTS / FUNCTIONAL REQUIREMENTS

2.0 GENERAL REQUIREMENTS FOR EQUIPMENT AND MATERIALS
A. Furnish and install a complete and fully functional and operable Nurse Call System for each location shown on the contract drawings and TCOs WHOSE EMPTY CONDUIT SYSTEM WAS PROVIDED AS A PART OF SPECIFICATION 27 11 00.
B. The specific location for each Nurse Call: Central Control Cabinet is // __________, // Power Supply is // ________, // Electrical Supervisor Panel is // ________, // UPS is // ________, // Two (2) Remote Annunciation Consoles is // ________, // Master Station is // ________, // Duty Station is // ________, // Staff Station is // ________, // Emergency Station is // ________, // Dome Light is // ________, // Code Blue Station is // ________, // and TCOs are //
C. Coordinate features and select interface components to form an integrated Nurse Call system. Match components and interconnections between the systems for optimum performance of specified functions.

D. Expansion Capability: The Nurse Call equipment interfaces and cables shall be able to increase number of enunciation points in the future by a minimum of 50 percent (%) above those indicated without adding any internal or external components or main trunk cable conductors.

E. Equipment: Active electronic type shall use solid-state components, fully rated for continuous duty unless otherwise indicated. Select equipment for normal operation on input power usually supplied between 110 to 130 VAC, 60 Hz supplied from the Facility’s Emergency Electrical Power System.

F. Meet all FCC requirements regarding equipment listing, low radiation and/or interference of RF signal(s). The system shall be designed to prevent direct pickup of signals from within and outside the building structure.

G. Weather/Water Proof Equipment: Listed and labeled by an OSHA certified NRTL (i.e. UL) for duty outdoors or in damp locations.

2.1 SYSTEM DESCRIPTION

A. Furnish and install a complete and fully functional and operable Nurse Call and/or Code Blue System WHOSE EMPTY CONDUIT SYSTEM WAS PROVIDED AS A PART OF SPECIFICATION 27 11 00.

B. The Contractor is responsible for interfacing the // PA // //, MATV // //, RED // //, Patient Bed Service Walls // // and ________ // systems with the System.

C. The Contractor shall continually employ interfacing methods that are approved by the OEM and VA. At a minimum, an acceptable interfacing method requires not only a physical and mechanical connection, but also a matching of signal, voltage, and processing levels with regard to signal quality and impedance. The interface point must adhere to all standards described herein for the full separation of Critical Care and Life Safety systems.

D. The System Contractor shall connect the System ensuring that all NFPA and UL Critical Care and Life Safety Circuit and System separation guidelines are satisfied. The System Contractor is not allowed to make any connections to the Telephone System. VA shall arrange for the
interconnection between the // PA // //, MATV // //, RED // //, Patient Bed Service Walls // // and _________ // Systems with the appropriate responsible parties.

E. System hardware shall consist of a **standalone (separate)** nurse call // **Code Blue** // patient communications network comprised of nurse consoles, control stations, staff and duty stations, room and corridor dome lights, pillow speakers/call cords, pull cord and/or emergency push button stations, wiring. And, other options such as, **pocket page interfaces**, computer interfaces, printer interfaces, wireless / telephone network interfaces, and nurse locating system interface (**when specifically approved first by TVE 005OP3B**) and as shown on drawings.

All necessary equipment required to meet the intent of these specifications, whether or not enumerated within these specifications, shall be supplied and installed to provide a complete and operating nurse call // **Code Blue** // patient communications network. **It is not acceptable to utilize the telephone cable system for the control and distribution of nurse call (code Blue) signals and equipment.**

F. System firmware shall be the product of a reputable firmware OEM of record with a proven history of product reliability and sole control over all source code. Manufacturer shall provide, free of charge, product firmware/software upgrades for a period of two (2) years from date of acceptance by VA for any product feature enhancements. System configuration programming changes shall not require any exchange of parts and shall be capable of being executed remotely via a modem connection (**when specifically approved first by TVE 005OP3B**).

G. The Nurse Call Head End Equipment shall be located in Telecommunications Room //_____//. The Nurse Call / Code Blue System may interface the PA system when specifically approved by VA Headquarters T VE 005OP3B during the project approval process prior to contract bidding.

H. The System shall utilize microprocessor components for all signaling and programming circuits and functions. Self contained or on board system program memory shall be non-volatile and protected from erasure from power outages for a minimum of 12 hours.

I. Provide a backup battery or a UPS for the System (including each distribution cabinet/point, CRT and Monitor) to allow normal operation and function (as if there was no AC power failure) in the event of an
AC power failure or during input power fluctuations for a minimum of 30 minutes.

J. The System is defined as Critical Service and the Code Blue functions is defined as Life Safety/Support by NFPA (re Part 1.1.A) and so evaluated by JCAHCO. Therefore, the system shall have a minimum of two (2) additional remote enunciation points in order to satisfy NFPA’s Life Safety Code 101 (the typical secondary locations are Telephone Operators Room, MAS ER Desk, Boiler Plant, etc; AND the primary location is required to be in the SCC Room //_____//.

1. These two (2) additional remote locations shall be fully manned:
   a. 24/7/365 for certified Hospital //Clinics// // other _______/.
   b. As long as other identified VA Medical / Servicing Facilities are open for servicing patients.
   c. At a minimum, Code Blue Functions shall be provided in all Recovery (Medical and Surgical) Rooms, Intensive Care Units (ICU), Cardiac Care Units (CCU), Step Down Room, Life Support / Monitoring Rooms, Oncology / Radiology Procedure Rooms, Dialysis // and _____ // Areas.
   d. The minimum remote enunciation locations shall be:
      1) The Telephone / PBX Operator Room.
      2) The Police Control / Operations Room.
      3) Other location(s) that is specifically approved by VA Headquarters TVE - 005OP3B DURING THE PROJECT DEVELOPMENT STAGES AND PRIOR TO EQUIPMENT PURCHASE.

2. In addition to the two (2) remote locations afore described, the following locations are the minimum required for additional Nurse Call /Code Blue Annunciation:
   b. Each Nurse Master Station.
   c. Each Staff Station.
   d. Each Duty Station.
   // e. _______________ //</

3. The MAXIMUM enunciation time period from placement of the Code Blue Call to enunciation at each remote locations is 10 seconds; and, 15 seconds to the subsequent enunciating media stations (i.e. PA, Radio Paging, Emergency Telephone or Radio Backup, etc.).

K. Each Code Blue System shall be designed to provide continuous electrical supervision of the complete and entire system (i.e. dome
light bulbs (each light will be considered supervised if they use any one or a combination of (UL) approved electrical supervision alternates, as identified in UL-1069, 1992 revision), wires, contact switch connections, circuit boards, data, audio, and communication busses, main and UPS power, etc.). All alarm initiating and signaling circuits shall be supervised for open circuits, short circuits, and system grounds. Main and UPS power circuits shall be supervised for a change in state (i.e. primary to backup, low battery, UPS on line, etc.). When an open, short or ground occurs in any system circuit, an audible and visual fault alarm signal shall be initiated at the nurse control station and all remote locations.

L. When the System is approved to connect to a separate communications system (i.e. LAN, WAN, Telephone, Public Address, radio raging, wireless systems, etc) the connection point shall meet the following minimum requirements for each hard wired / wireless connection (note each wireless system connection MUST BE APPROVED PRIOR TO CONTRACT BID BY VA HEADQUARTERS TVE - 005OP3B AND SPECTRUM MANAGEMENT - 005OP2B – hereinafter referred to as SM - 005OP2B):
1. UL 60950-1/2.
2. FIPS 142.
3. FCC Part 15 Listed Radio Equipment restriction compliance approved by SM - 005OP2B.

M. All passive distribution equipment shall meet or exceed -80 dB radiation shielding (aka RFI) shielding specifications and be provided with connectors specified by the OEM.

N. All equipment face plates utilized in the system shall be stainless steel, anodized aluminum or UL approved cycolac plastic for the areas where provided.

O. Noise filters and surge protectors shall be provided for each equipment interface cabinet, headend cabinet, control console and local and remote amplifier locations to insure protection from input primary AC power surges and to insure noise glitches are not induced into low voltage data circuits.

P. Plug-in connectors shall be provided to connect all equipment, except coaxial cables. Coaxial cable distribution points shall use coaxial cable connections recommended by the cable OEM and approved by the system OEM. Base band cable systems shall utilize barrier terminal screw type connectors, at a minimum. As an alternate, crimp type
connectors installed with a ratchet type installation tool are acceptable provided the cable dress, pairs, shielding, grounding, connections and labeling are the same as the barrier terminal strip connectors. Tape of any type, wire nuts or solder type connections are unacceptable and will not be approved.

R. Audio Level Processing: The control equipment shall consist of audio mixer(s), volume limiter(s) and/or compressor(s), and power amplifier(s) to process, adjust, equalize, isolate, filter, and amplify each audio channel for each sub-zone in the system and distribute them into the System’s RF interfacing distribution trunks and amplification circuits. It is acceptable to use identified Telephone System cable pairs designated for Two-Way Radio interface and control use or identified as spare telephone cable pairs by the Facility’s Telephone System Contractor. The use of telephone cable to distribute RF signals, carrying system or sub-system AC or DC voltage is not acceptable and will not be approved. Additionally, each control location shall be provided with the equipment required to insure the system can produce its designed audio channel capacity at each speaker identified on the contract drawings. The Contractor shall provide: a spare set of telephone paging modules as recommended by the OEM (as a minimum provide one spare module for each installed module); one spare audio power amplifier, one spare audio mixer, one spare audio volume limiter and/or compressor, and one spare audio automatic gain adjusting device, and minimum RF equipment recommended by the OEM.

S. Contractor is responsible for pricing all accessories and miscellaneous equipment required to form a complete and operating system. Unless otherwise noted in this Part, equipment quantities shall be as indicated on the drawings.

R. System Performance:

1. At a minimum, each distribution, interconnection, interface, terminating point and TCO shall be capable of supporting the Facility’s Nurse Call and/or Code Blue System voice and data service as follows:
   a. Shall be compliant with and not degrade the operating parameters of the Public Switched Telephone Network (PSTN) and the Federal Telecommunications System (FTS) at each PSTN and FTS interface (if attachment is permitted by TVE 005OP3B), interconnection and TCO terminating locations detailed on the contract drawings.
b. The System shall provide the following minimum operational functions:

1) Code Blue calls shall be cancelable at the calling station only. The nurse call master station(s) that a managing Code Blue functions shall not have the ability to cancel Code Blue calls.

2) Each Code Blue system shall be able to receive audio calls from all bedside stations simultaneously.

3) Calls placed from any Code Blue station shall generate Code Blue emergency type audible and visual signals at each associated nurse control and duty station, respective dome lights and all local and remote annunciator panels. Calls placed from a bedside station shall generate emergency type visual signals at the bedside station and associated dome light(s) in addition to the previous stated stations and panels.

4) Activating the silencing device at any location, while a Code Blue call or system fault is occurring shall mute the audible signals at the alarm location.
   a) The audible alarm shall regenerate at the end of the selected time-out period until the call or fault is corrected.
   b) The visual signals shall continue until the call is canceled and/or a fault is corrected. When the fault is corrected, all signals generated by the fault shall automatically cease, returning the System to a standby status.
   c) Audible signals shall be regenerated in any local or remote annunciator panel that is in the silence mode, in the event an additional Code Blue call is placed in any Code Blue system.
   d) The additional Code Blue call shall also generate visual signals at all annunciators to identify the location of the call.

2. Each System Nurse Call location shall generate a minimum of distinct calls:
   a. Routine: single flashing dome lights & master station color and audio tone,
b. Staff Assist: rapid flashing dome lights & master station color and audio tone,
c. Emergency: Red flashing dome lights & master station color and audio tone,
d. Code Blue (if equipped): Blue flashing dome lights and master station color and audio tone,
e. Each generated call shall be cancelable at ONLY the originating location,
f. Staff Locator: Green Flashing dome lights & master station color and audio tone, and
// g. __________: _____ Flashing dome lights & master station color and audio tone. //

2.3 MANUFACTURERS

A. The products specified shall be new, FCC and UL Listed, labeled and produced by OEM manufacturer of record. An OEM of record shall be defined as a company whose main occupation is the manufacture for sale of the items of equipment supplied and which:
1. Maintains a stock of replacement parts for the item submitted,
2. Maintains engineering drawings, specifications, and operating manuals for the items submitted, and
3. Has published and distributed descriptive literature and equipment specifications on the items of equipment submitted at least 30 days prior to the Invitation for Bid.

B. Specifications contained herein as set forth in this document detail the salient operating and performance characteristics of equipment in order for VA to distinguish acceptable items of equipment from unacceptable items of equipment. When an item of equipment is offered or furnished for which there is a specification contained herein, the item of equipment offered or furnished shall meet or exceed the specification for that item of equipment.

C. Equipment Standards and Testing:
1. The System has been defined herein as connected to systems identified as Critical Service performing various Emergency and Life Support Functions. Therefore, at a minimum, the system shall conform to all aforementioned National and/or Local Life Safety Codes (which ever are the more stringent), NFPA, NEC, this specification, JCAHCO Life Safety Accreditation requirements, and the OEM recommendations, instructions, and guidelines.
2. All supplies and materials shall be listed, labeled or certified by UL or a NRTL where such standards have been established for the supplies, materials or equipment.

3. The provided equipment required by the System design and approved technical submittal must conform with each UL standard in effect for the equipment, as of the date of the technical submittal (or the date when the RE approved system equipment necessary to be replaced) was technically reviewed and approved by VA. Where a UL standard is in existence for equipment to be used in completion of this contract, the equipment must bear the approved UL seal.

4. Each item of electronic equipment to be provided under this contract must bear the approved UL seal or the seal of the testing laboratory that warrants the equipment has been tested in accordance with, and conforms to the specified standards. The placement of the UL Seal shall be a permanent part of the electronic equipment that is not capable of being transportable from one equipment item to another.

2.4 PRODUCTS

A. General.

1. Contractor is responsible for pricing all accessories and miscellaneous equipment required to form a complete and operating system. The equipment quantities provided herein shall be as indicated on the drawings with the exception of the indicated spare equipment.

2. Contractor Furnished Equipment List (CFEs):

a. The Contractor is required to provide a list of the CFE equipment to be furnished. The quantity, make and model number of each item is required. Select the required equipment items quantities that will satisfy the needs of the system as described herein and with the OEM’s concurrence applied to the list(s), in writing.

CONTRACTOR NOTE: Select the required equipment items quantities that will satisfy the needs of the system and edit between the // - - //. Do not delete equipment items that are not required – place a "0" in the appropriate Item location. The two color coded sections for the Mental Health and Blind Rehabilitation Units are provided for use when these units are a part of the project. If these units are not a part of the project – retain each unit’s heading and place "0" in the respective
"as required" column and delete the remaining system items.

<table>
<thead>
<tr>
<th>Item</th>
<th>Quantity</th>
<th>Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Interface Panel(s)</td>
<td>Interface Panel(s)</td>
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<tr>
<td>1.a</td>
<td>Electrical Supervision</td>
<td>Electrical Supervision</td>
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<td>Equipment Back Box(s)</td>
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<td>1.b</td>
<td>Telephone</td>
<td>Telephone</td>
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<tr>
<td>1.c</td>
<td>Public Address</td>
<td>Public Address</td>
</tr>
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<td>1.d</td>
<td>Radio Paging / Equipment</td>
<td>Radio Paging / Equipment</td>
</tr>
<tr>
<td>1.e</td>
<td>Wireless / Equipment</td>
<td>Wireless / Equipment</td>
</tr>
<tr>
<td>1.f.</td>
<td>Radio Pager / Equipment</td>
<td>Radio Pager / Equipment</td>
</tr>
<tr>
<td>1.g</td>
<td>Wireless / Equipment</td>
<td>Wireless / Equipment</td>
</tr>
<tr>
<td>1.f.</td>
<td>Personal Communicator / Equipment</td>
<td>Personal Communicator / Equipment</td>
</tr>
<tr>
<td>2.</td>
<td>Lightning Arrestor</td>
<td>Lightning Arrestor</td>
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<td>3.</td>
<td>Head End Equipment/Locations</td>
<td>Head End Equipment/Locations</td>
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<td>Cabinet(s)</td>
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<td>AC Power Conditioner &amp; Filter</td>
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<td>AC Power Strip</td>
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<td>3.a.3</td>
<td>UPS</td>
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<td>3.a.4</td>
<td>Interconnecting Wire/Cables</td>
<td>Interconnecting Wire/Cables</td>
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<td>Wire / Cable Connector(s)</td>
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<td>Wire / Cable Terminator(s)</td>
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<td>3.b</td>
<td>Head End Function(s)</td>
<td>Head End Function(s)</td>
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<td>3.b.1</td>
<td>H7 Interface</td>
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<td>Nurse Locator</td>
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<td>Staff Locator</td>
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<td>5.</td>
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<td>Staff Station</td>
<td>Staff Station</td>
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<td>Equipment Back Box(s)</td>
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<td>5.b</td>
<td>Duty Station</td>
<td>Duty Station</td>
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<td>5.b.1</td>
<td>Equipment Back Box(s)</td>
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<td>Code Blue Station</td>
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<td>Equipment Back Box(s)</td>
<td>Equipment Back Box(s)</td>
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<tr>
<td>5.c.2</td>
<td>2 (MIN) Remote Station(s)</td>
<td>2 (MIN) Remote Station(s)</td>
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<td>5.d</td>
<td>Patient Station(s)</td>
<td>Patient Station(s)</td>
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<td>Equipment Back Box(s)</td>
<td>Equipment Back Box(s)</td>
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<td>5.d.2</td>
<td>Bed Interface(s)</td>
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<td>Pillow Speaker</td>
<td>Pillow Speaker</td>
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<td>5.d.4</td>
<td>Push Button Cordset</td>
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<td>Dummy Plugs</td>
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<td>5.d.6</td>
<td>Bed Integrated Control</td>
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<td>Lighting Interface Module</td>
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<td>5.d.9</td>
<td>TV Control Jack</td>
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<td>TV Interconnection Cables</td>
<td>TV Interconnection Cables</td>
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<td>HDTV Coaxial</td>
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<td>HDTV/Nurses Call Interface/Control</td>
<td>HDTV/Nurses Call Interface/Control</td>
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<td>Auxiliary Mounting Interface</td>
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5.e //As required// Emergency Station(s)
5.e.1 //As required// Equipment Back Box(s)
5.e.2 //As required// Toilet Emergency Station (waterproof)
5.e.3 //As required// Shower Emergency Station (waterproof)
5.e.4 //As required// Lavatory Emergency Station (waterproof)
5.f. //As required// Room Dome Light
5.f.1 //As required// Equipment Back Box(s)
5.g //As required// Other Dome Light(s)
5.g.1 //As required// Equipment Back Box(s)
5.g.2 //As required// Corridor Dome Light
5.g.3 //As required// Intersectional Dome Light
5.h //As required// System Cable(s)
5.h.1 //As required// Coaxial
5.h.2 //As required// System Pin
5.h.3 //As required// Audio
5.h.4 //As required// Control
5.h.5 //As required// Video
5.i //As required// System Connector(s)
5.i.1 //As required// Coaxial
5.i.2 //As required// System Pin
5.i.2 //As required// Audio
5.i.3 //As required// Control
5.i.4 //As required// Video
5.j //As required// Wire Management Required as described herein

//6. //As required// Mental Health Unit
6.a //As required// Head End Function(s)
6.a.1 //As required// H7 Interface
6.a.2 //As required// Nurse Locator
6.a.3 //As required// Staff Locator
6.b. //As required// Master Station(s)
6.b.1 //As required// Nurse Locator
6.b.2 //As required// Staff Locator
6.c //As required// Distribution System(s)
6.c.1 //As required// Staff Station
6.c.1.a //As required// Equipment Back Box(s)
6.c.2 //As required// Duty Station
6.c.2.a //As required// Equipment Back Box(s)
6.c.3 //As required// Patient Station(s)
6.c.3.a //As required// Equipment Back Box(s)
6.c.4 //As required// Security Room(s)
6.c.4.a //As required// Security Station(s)
6.c.4.b //As required// Equipment Back Box(s)
6.c.4.c //As required// Overhead Speaker/Microphone
6.c.4.d //As required// Equipment Back Box(s)
6.c.4.e //As required// TV Surveillance System
6.c.4.f //As required// Equipment Back Box(s)
6.c.4.g //As required// TV Interconnection Cables
6.c.4.h //As required// Audio Interconnection Cables
6.c.5 //As required// Emergency Station(s)
6.c.5.a //As required// Equipment Back Box(s)
6.c.5.b //As required// Toilet Emergency Station (waterproof)

27 52 23 - 25
6.c.5.c //As required// Shower Emergency Station (waterproof)
6.c.5.d //As required// Lavatory Emergency Station (waterproof)
6.c.6 //As required// Room Dome Light
6.c.7 //As required// Other Dome Light(s)
6.c.7.a //As required// Equipment Back Box(s)
6.c.7.b //As required// Corridor Dome Light
6.c.7.c //As required// Intersectional Dome Light
6.c.8 //As required// System Cable(s)
6.c.8.a //As required// Coaxial
6.c.8.b //As required// System Pin
6.c.8.c //As required// Audio
6.c.8.d //As required// Control
6.c.8.e //As required// Video
6.c.9 //As required// System Connector(s)
6.c.9.a //As required// Coaxial
6.c.9.b //As required // System Pin
6.c.9.c //As required// Audio
6.c.9.d //As required// Control
6.c.9.e //As required// Video
6.c.9.f //As required// Wire Management Required as described herein

7 //As required// Blind Rehabilitation Unit
7.a //As required// Head End Function(s)
7.a.1 //As required// H7 Interface
7.a.2 //As required// Nurse Locator
7.a.3 //As required// Staff Locator
7.b //As required// Master Station(s)
7.b.1 //As required// Nurse Locator
7.b.2 //As required// Staff Locator
7.c //As required// Distribution System(s)
7.c.1 //As required// Staff Station
7.c.1.a //As required// Equipment Back Box(s)
7.c.2 //As required// Duty Station
7.c.2.a //As required// Equipment Back Box(s)
7.c.3 //As required// Patient Station(s)
7.c.3.a //As required// Equipment Back Box(s)
7.c.4 //As required// Emergency Station(s)
7.c.4.a //As required// Equipment Back Box(s)
7.c.4.b //As required// Toilet Emergency Station (waterproof)
7.c.4.c //As required// Shower Emergency Station (waterproof)
7.c.4.d //As required// Lavatory Emergency Station (waterproof)
7.c.5 //As required// Room Dome Light
7.c.5.a //As required// Equipment Back Box(s)
7.c.6 //As required// Other Dome Light(s)
7.c.6.a //As required// Equipment Back Box(s)
7.c.6.b //As required// Corridor Dome Light
7.c.6.c //As required// Intersectional Dome Light
7.c.7 //As required// System Cable(s)
7.c.7.a //As required// Coaxial
7.c.7.b //As required// System Pin
7.c.7.c //As required// Audio
7.c.7.d //As required// Control
7.c.7.e //As required// Video
7.c.8 //As required// System Connector(s)
7.c.8.a //As required// Coaxial
7.c.8.b //As required// System Pin
7.c.8.c //As required// Audio
7.c.8.d //As required// Control
7.c.8.e //As required// Video
7.c.9 //As required// Wire Management Required as described herein

//8. //As required// Center for the Aging (aka Nursing Home Care Unit)
8.a //As required// Head End Function(s)
8.a.1 //As required// H7 Interface
8.a.2 //As required// Nurse Locator
8.a.3 //As required// Staff Locator
8.b //As required// Master Station(s)
8.b.1 //As required// Nurse Locator
8.b.2 //As required// Staff Locator
8.c //As required// Distribution System(s)
8.c.1 //As required// Staff Station
8.c.1.a //As required// Equipment Back Box(s)
8.c.2 //As required// Duty Station
8.c.2.a //As required// Equipment Back Box(s)
8.c.3 //As required// Patient Station(s)
8.c.3.a //As required// Equipment Back Box(s)
8.c.4 //As required// Security Room(s)
8.c.4.a //As required// Security Station(s)
8.c.4.b //As required// Equipment Back Box(s)
8.c.4.c //As required// Overhead Speaker/Microphone
8.c.4.d //As required// Equipment Back Box(s)
8.c.4.e //As required// TV Surveillance System
8.c.4.f //As required// Equipment Back Box(s)
8.c.4.g //As required// TV Interconnection Cables
8.c.4.h //As required// Audio Interconnection Cables
8.c.5 //As required// Emergency Station(s)
8.c.5.a //As required// Equipment Back Box(s)
8.c.5.b //As required// Toilet Emergency Station (waterproof)
8.c.5.c //As required// Shower Emergency Station (waterproof)
8.c.5.d //As required// Lavatory Emergency Station (waterproof)
8.c.6 //As required// Room Dome Light
8.c.7 //As required// Other Dome Light(s)
8.c.7.a //As required// Equipment Back Box(s)
8.c.7.b //As required// Corridor Dome Light
8.c.7.c //As required// Intersectional Dome Light
8.c.8 //As required// System Cable(s)
8.c.8.a //As required// Coaxial
8.c.8.b //As required// System Pin
8.c.8.c //As required// Audio
8.c.8.d //As required// Control
8.c.8.e //As required// Video
8.c.9 //As required// System Connector(s)
8.c.9.a //As required// Coaxial
8.c.9.b //As required// System Pin
8.c.9.c //As required// Audio
8.c.9.d //As required// Control
8.c.9.e //As required// Video
8.c.9.f //As required// Wire Management Required as described herein/

9. As required//

Oncology, Radiology, Dialysis, Units (These units are treated the same as Blind Rehabilitation Unit EXCEPT it does contains a CODE BLUE Function. If these units are provided as a part of the project, AT A MINIMUM – DUPLI-CATE THE BLINE REHABILITATION UNIT’S EQUIPMETN LISTE AND EDIT AND RENUMBER ACCORD-INGLY) //

10. On Hand Spares Provide a separate system spares list as indicated in each equipment description.

B. NS Room(s):
Refer to CFM Physical Security Manual (07-2007) for VA Facilities, Chapters 9.3 & 1) and PG 18-10, EDM, Chapters 7- Table 7-1, 8 & Appendix B, Telecommunications One Line Topology for specific Room and TIP Connection Requirements.

C. TER, SCC, PCR, STR, HER Rooms and Equipment:
Refer to CFM Physical Security Manual (07-2007) for VA Facilities, Chapters 9.3 & 1) and PG 18-10, EDM, Chapters 7- Table 7-1, 8 & Appendix B, Telecommunications One Line Topology for specific Room and TIP Connection Requirements.

D. Telecommunications Room(s) (TR):
1. Locate the Nurse Call and/or Code Blue floor distribution equipment as required by system design and OEM direction. Provide secured and lockable cabinet/rack(s) as required.
2. Head-End Equipment:
   a. Provide all required power supplies, communications hubs, network switches, intelligent controllers and other devices necessary to form a complete system. Head-end components may be rack mounted or wall mounted in an enclosed metal enclosure.
   b. Provide the head end equipment in the closest Telecommunications Room where the System is installed.
c. Provide the System UPS inside the cabinet or in a separate cabinet adjacent to the head end cabinet that shall maintain a minimum of 30 minute battery back-up to all system components.

d. Equipment Cabinet: Comply with TIA/EIA-310-D. Lockable, ventilated metal cabinet houses terminal strips, power supplies, amplifiers, system volume control, and other switching and control devices required for conversation channels and control functions. See Paragraph 2.5.E for the Cabinet’s minimum internal items that are in addition to the installed System equipment.

e. Vertical Equipment Rack, Wall Mounted (to be included inside of the Equipment Cabinet) containing the following minimum items:
   1) 36” (28RU) internal rack space, welded steel construction, minimum 20” usable depth, adjustable front mounting rails.
   2) Install the following products in rack provided by same manufacturer or as specified:
      a) Security screws w/ nylon isolation bushings.
      b) Textured blank panels.
      c) Custom mounts for components without rack mount kits.
      d) Security covers.
      e) Internal system ground copper buss (may be substituted with a bare #0 AWG copper wire or equivalent size copper mesh strip connected to ONLY THE FACILITY’S SIGNAL GROUNDING SYSTEM.
      f) Power Sequencer- rack-mounted power conditioner and (provide as-needed) delayed sequencer(s) with (2) unswitched outlets each and contact closure control inputs. Connect the conditioner to one of the dual duplex outlets.
      g) Two (2) each 120VAC @ 20A dual duplex outlets, connected via conduit to the nearest Electrical Service Panel that is supplied by the Facility’s Essential Electrical System.
      h) One (1) each 120VAC @ 15A Power Distribution Strip(s).
         Connect each strip to the unstitched outlet on the power conditioner.

3. HL7 Interface:
   a. The system may support downloading and updating of patient data from the hospital admission system (or other database) via the
HL7 standard. The data only has to travel one way, i.e. from the admission system to the nurse-call system.

b. Coordinate with the Owner the exact fields that will be populated from the admissions system in the nurse-call system.

c. The Facility’s LAN/WAN is not allowed for Nurses Call/Code Blue main wiring / function that must be a “stand alone primary cable infrastructure” as described herein.

d. Connections to the VA LAN/WAN for functional or operable conditions will be allowed ONLY when the LAN/WAN system has been demonstrated and NFPA (at a minimum by TVE-005OP3B) Certified meeting Life Safety Standards.

e. Provide one (1) spare HL Interface unit.

//4. Wireless:

a. Radio Paging Equipment / Systems

1) The nurse call/code blue system shall have the ability to interface ONLY with VA Certified and Licensed radio paging system (FCC Part 15 listed pagers and transmitters are not allowed for “Safety of Life” functions or installed in those specific areas – VA Headquarters TVE – 005OPB2 and SM – 005OPB2 are the ONLY approving authorities for this function) and must have the following minimum system features:

a) Ability to pass-through location information (such as a room number) and call-type as well as other text messages simultaneously to shift supervisor identified staff members

b) System shall allow the operator to select staff members by name and pager number and to select a message consisting of a room number and a condition code (aka priority level). Operator may also choose to type in a unique alpha-numeric text message (the text message shall meet or exceed all HIPA and VA OCIS Communications Security Guidelines for the transmission of Patient or Staff Specific information [aka PII] – VA Headquarters TVE – 005OP2B is the approving authority for this function) into the system to be read by the holder of the pager unit.

c) While a patient station is connected to the nurse’s master station, the system shall allow the operator to automatically page the staff member assigned to that room. An alternate staff member may be selected for paging
purposes in place of the primary staff member. The System must allow an alternate staff member to be paged when the primary staff member is unable to respond to patient’s needs within a specified period of time. The System must have the ability to assign any bed to any pager or pager group, and to assign an unlimited amount of pagers to any patient bed.

d) System shall have the ability to send all code blue calls to staff members by predetermined group (as required) automatically by simply pressing one “Code Blue” button. Pager shall indicate room number of code call, and state “Code Blue” in plain English format on pagers (FCC Part 15 listed pagers are not allowed to be use as “Safety of Life” functions or those specific locations – VA Headquarters TVE - 005OP2B is the approving authority for this requirement).

2) When pagers are approved, provide a minimum of ten (10) spare pagers with one spare pager for each 10 issued.//

//5. Personal Wireless Communicator

a. The System will only be allowed to connect to the personal wireless communications system, pass text data and provide a 2-way communication between the Telephone Interface and the personal wireless communicator as long as it is not a FCC Part 15 listed device(s), meets or exceeds UL 60950-1/2, meets OCIS Guide Lines for FIPS 140-2 certification and the using staff shows an extensive training program along with recertification(s) according to the Facility Emergency Plan concerning HIPA requirements.

b. VA Headquarters TVE - 005OP3B and SM - 005OP2B are the approving authority for this requirement.

c. When communicators are approved, provide a minimum of ten (10) spare communicators for each 10 communicators issued.//

//6. Other Wireless Equipment / Systems

a. Each proposed wireless system and/or equipment to be connected to or be a part of the System, each shall meet the minimum requirements outlines in Paragraph 2.7.A.

b. Contact TVE - 005OP3B and SM - 005OP2B for specific required PRE approvals (full or conditional) as described herein.
c. When approved, TVE-005OP3B and SM-005OP2B will provide the spare equipment requirements.

d. When other wireless components are approved, provide ten (10) components with one spare components for each 10 issued.

F. TIP Cable Systems:

Connect the system to the TIP system provided as a part of Speciation Section 27 15 00. Provide additional TIP equipment, interfaces and connections as required by System design. Provide secured pathway(s) and lockable cabinet/rack(s) as required.

G. Interface Equipment:

1. TCR:

   a. Code Blue Annunciation Station:

      1) The Code Blue Remote Annunciation Station shall be located in the Telephone Operators Room, Police Control Center // or _____ //.

      2) The Annunciation Station shall be connected to the System via hard wire connection(s) that shall contain all the electrical supervisory tone signals, visual bulbs, read out panel to indicate the location of the Code and system troubles.

      3) The System shall not be connected to the Telephone system unless specifically APPROVED BY VA HEADQUARTERS (005OP3B) and (005OP2B) PRIOR TO CONTRACT BID.

      4) The Annunciation Station shall be installed in a location directly viewable and the readout is completely readable from the Public Address Microphone Control Console.

      5) Provide one (1) spare panel.

   b. Electrical Supervision Trouble Annunciator Panel:

      1) The Electrical Supervision Trouble Annunciation Panel shall be located in the Telephone Operators Room, Police Control Center, associate Nurses Station(s) // and _____ //.

      2) The panel(s) shall be compatible with the generated electrical and/or electronic supervising signals to continuously monitor the operating condition for the System head-end processing equipment, master stations, staff stations, patient stations, duty stations, audio power amplifier(s), UPS, power supplies, dome lights and interconnecting trunks. The panels shall generate an audible and visual signal when the System’s
supervising system detects a system and equipment trouble or trunk-line is malfunctioning.

3) Provide one (1) spare panel.

2. Hospital Bed Interface (s):
   a. Provide a multi-pin receptacle for bed connection.
   b. Connect cable from the multi-pin receptacle to the nurse-call system, so that alarms, such as bed exit, shall be monitored by the nurse-call system.
   c. Connect cable from the multi-pin receptacle to the nurse-call system, so that the bedside control buttons, such as nurse call, and television controls are functional and monitored.
   d. The hospital uses the following beds:
      //1) Hill Rohm//
      //2) Stryker//
      //3) Other//
   e. Provide one (1) spare interface for each ten (10) interfaces installed.

3. Nurse (aka Staff) Locator Interface:
   a. The System must be capable of performing nurse-locator functions.
   b. The System must be capable of performing staff-locator functions.
   c. These functions may be combined into one operation.
   d. Provide two (2) spare interfaces.

4. Lighting Interface Module:
   a. Provide an interface module for the pillow speakers to control up to 2 lights. Coordinate with the electrical contractor the exact voltage requirements.
   b. Provide one (1) spare module for each ten (10) modules installed.

5. Pillow Speaker Interfaces:
   a. See functional requirements herein.
   b. Provide // (1) // // (2)/// pillow speaker for each patient station.
   c. Provide one (1) spare pillow speaker for each twenty (20) speakers installed.

6. TV Remote Control Interface:
   a. The pillow speaker shall have the following TV control capability:
      1) Play the TV audio through the pillow speaker.
      2) Change channels up and down.
3) Increase and decrease the volume.
4) TV audio mute.
5) UL Certified for direct patient contact.

b. Provide one (1) spare interface for each 20 interfaces installed.

7. TV Control Jack and Wiring:
   a. Provide connection from the pillow speaker to the TV location.
   Terminate wire on a jack in the TV low voltage faceplate.
   Coordinate faceplate opening with the cabling contractor.
   Coordinate jack type with the TV (typically it is a ¼” jack, but verify prior to installation).

b. Provide patch cord from the TV control jack to the TV.

c. Provide one (1) spare complete assembly for each twenty (20) assemblies installed.

8. Additional Functions / Interfaces:
The nurse-call system may perform ______________________________ additional services/ functions when specifically approved by TVE-005OP3B during the project design phases and prior to the bid process. //

9. TER
   a. Paging adaptor (When connections are specifically approved by TVE 005OP3B):

   1) The Contractor shall coordinate the installation of the paging adapter(s) designed for use with the Facility’s telephone system with the Facility Telephone Contractor or local telephone company.

   2) The Contractor shall provide and install a paging adapter(s) for each zone and sub zone. The paging adapter(s) shall be accessible by dialing a telephone number provided by the Facility’s Telephone Contractor. The Paging Adapter shall:
   a) Monitor each audio input and output on the unit.
   b) Be provided with an electrical supervision panel to provide both audio and visual trouble alarms.
   c) Be provided as part of the headend equipment and shall be located in the Telephone Switch Room.
   d) Be provide with Executive Paging Override of all routine paging calls in progress or being accessed to allow system “all call” (aka global) and radio paging calls designated as Code One Blue) functions.
e) Be capable of internal time out capability.
f) Function completely with the interface module.
g) Provide one spare adapter.

3) Time Out Device:
A time out device/capability shall be provided to prevent system “hang-up” due to an off-hook telephone. The device shall be able to be preset from 30 seconds to two (2) minutes. Its function shall not interfere with or override the required “all call” (aka global) operational capability.

H. Call Initiation, Annunciation and Response:

1. Light and Tones:
   a) Calls may be initiated through:
      1) Patient station.
      2) Staff station.
      3) Code Blue station.
      4) Toilet Emergency Station pull cord / push button.
      5) Shower Emergency Station pull cord.
      6) Bed Pillow speaker.
      7) Bed Push-button cordset.
      8) Hospital Bed Integrated controls.

   b) Once a call is initiated, it must be annunciated at the following locations:
      1) The Corridor, Intersectional and Room dome light associated with the initiating device.
      2) A local master control station indicating the call location and priority.
      3) Each duty station.
      4) Each staff station.
      5) Each remote location.

   c) All calls must be displayed until they are cleared by the nursing staff ONLY from the initiating device location.

2. Voice:
   a) Calls may be initiated through:
      1) Patient station.
      2) Staff station.
      3) Code Blue station.
      4) Toilet Emergency pull cord / push button station.
      5) Shower Emergency pull cord station.
6) Pillow speaker.
7) Push-button cordset.
8) Integrated bed controls.
9) Master Station.

//10. Mental Health (aka Psychiatric) Unit. //
//11. Blind Rehabilitation Unit. //

b. Once a call is initiated, it must be annunciated at the following locations:
   1) The Corridor, Intersectional and Room dome light associated with the initiating device.
   2) A master station indicating the call location and priority.
   3) Any duty stations associated with the unit.
   4) Any staff Stations associated with the unit.
   5) Each remote location.

c. All calls must be displayed until they are cleared by the nursing staff ONLY from the initiating device location.

3. Provide two-way voice communication between a master station and patient, staff, duty and each of the two (2) remote stations.

4. Failure of voice intercom portion of system shall not interfere with visual and audible signal systems.

5. All calls must be displayed on the master station until they are cleared by the nursing staff at ONLY the originating station. If multiple calls are received at the master station within a short period of time, they shall be stacked based on priority and wait time. If there are more calls than the master station screen can display at one time (four [4] minimum), the system must provide a simple scrolling feature. The nurse must be able to answer any call in any order at the master station. The nurse must also be able to forward calls to staff members. If a call is not answered within a programmable time period, then the system must forward the call to appropriate back-up staff identified by each shift supervisor in a manner technically approved by VA Headquarters 005OP3B.

//6. Radio pager (within the restrictions identified herein) //
//7. Wireless personal communicator (within the restrictions identified herein) //

I. Auxiliary Alarm Monitoring:

1. Each patient station must have the ability to connect a separate and isolated auxiliary alarm to it such as an infusion pump or data
tracking / recording device (patient life support units ARE NOT allowed to be connected to these units UNLESS APPROVED BY TVE - 005OP3B DURING THE PROJECT DEVELOPMENT PHASE AS DESCRIBED HEREIN.

The System must support naming the device that is being monitored as well as display its alarms at the master station and via the room / corridor dome light(s).

2. Provide // (2) // alarm jacks at each patient station.

3. The above requirements may ONLY be allowed when the system has been approved by VA Headquarters TVE - 005OP3B and TVE - 005OP2B and concurred by the appropriate Medical Service(s) indicates it meets the minimum guidelines and requirements of Paragraph 2.8.A.

J. Patient and Staff Assignment:

1. System may provide for transfer of one or more individual or groups of stations from one master station to another without mechanical switches or additional wiring of the stations. The transfer may be initiated manually be the nurse or automatically at certain times of the day.

2. The Facility’s LAN/WAN IS NOT ALLOWED for Nurses Call/Code Blue main wiring which must be a “stand alone primary cable infrastructure.”

   Connections to the VA LAN/WAN will be allowed ONLY when the LAN/WAN system has been demonstrated and certified by TVE - 005OP3B meeting the minimum guidelines and requirements of the Life Safety Code.

K. Reports:

1. The system’s generated reports logging all calls, alarms, response time, bed, and staff assignments may be allowed to transmit these reports to a central archiving entity.

2. Reports function shall be limited by passwords and security tier level access, so that only supervisors may access it when desired.

3. Provide instructions to the owner on how to enable/disable the reporting functions.

4. The Facility’s LAN/WAN IS NOT ALLOWED for Nurses Call/Code Blue main wiring that must be a “stand alone primary cable infrastructure.”

   Connections to the VA LAN/WAN will be allowed ONLY when the system has been demonstrated and certified by 005OP2B meeting the minimum guidelines and requirements of the Life Safety Code.

L. System/Management Software:

1. Provide and install system/management software on minimum of three (3) owner-provided computers.
a. The management software shall at a minimum provide all historical reporting features of the system as well as real-time monitoring of events.
b. The system software shall at a minimum provide the system’s operating and functioning parameters and script. The OEM shall provide VA with access to the software’s script writing and functions.

2. Provide two (2) spare CD’s with the software installed and operable.

3. Rights in Data: VA shall have the right to all script and programming language of system management software. If commercial off the shelf (COTS) or a memorandum of understanding (MOU) is required for follow-on maintenance, the Contractor is required to accomplish the COTS Survey document and the RE is required to accomplish the COTS Acquisition document supplied in Part 5 Attachments herein.

M. System Functional Station:

1. Master Control:
   a. Simple Tone and Light:

   1) A visual / aural (tone only) system shall be provided, protected and located in the Day Hospital, Mental Health & Blind Rehabilitation Areas, OPC where surgery or procedures are not performed and // _____ //. The System shall include a push-button emergency station (pull cord in Day Hospital and pushbutton in Mental Health & Blind Rehabilitation areas) with an associated corridor dome light in each dressing room (OPC) and toilet (OPC, Day Hospital, Mental Health, Blind Rehabilitation and // _____ //) and // _____ in the _____ //.

   2) The visual / aural (tone only) system shall also include a power supply and a visual / aural (tone only) display panel in the respective OPC receptionist / secretary's office and the Day Hospital // _____ // area and as shown on the drawings. The visual / tone display panel shall generate audible and visual emergency signals to indicate the location of a placed call.

   3) The Visual Display Panel shall be a digital readout touch screen to visually announce the location of incoming calls.
placed in the System including room and bed number and priority of the call. Identify each calling station with an individual display, including separate displays for each patient sharing a dual bedside station. If a digital readout touch screen standard is not required or approved by the Facility during the project design phase, an alpha-numeric scheme shall be provided that identifies the: ward, room and bed (i.e. Ward 2a, Room 201, Bed A (or 1) shall read 2A201A - or- 2A201-1. Equivalent readouts are acceptable as long as TVE 0050P3B and the Facility approve the readout).

a) Calls placed at emergency stations located in toilets and baths inside bedrooms shall be displayed for the bed closest to the nurse control station. Beds in multi-bed bedrooms shall be identified in a clock-wise pattern upon entering the bedroom.

b) It shall display a minimum of four incoming calls. Additional placed calls shall be stored in order of placement and priority.

4) The visual / aural (tone only) system shall be installed according to the same Procedures, guidelines and standards outlined for a regular Nurse Call System for emergency **NOT CODE BLUE OPERATION**.

5) Speakerphone and handset communication.

6) Provide one (1) spare station for each ten (1) stations installed.

b. Touch Screen:

1) Provide a touch screen master station with 15” minimum monitor size.

2) The master station shall have a full control capability over staff assignment to patients and beds as well as pagers and wireless personal communication devices (when specifically approved by 0050P3B on a case by case basis).

3) Speakerphone and handset communication.

4) Provide one (1) spare station for each ten (1) stations installed.

2. Staff:

a. Light and Tone Only.

b. Voice Communications Enabled.
c. Provide one (1) spare station for each twenty (20) stations installed.

3. Duty:
   a. Light and Tine Only.
   b. Voice Communications Enabled.
   c. Provide one (1) spare station for each twenty (20) stations installed.

4. Patient:
   a. Single & Dual:
      1) Provide each patient station with the following minimum feature.
         a) Call button.
         b) Call answered button.
         c) Pillow speaker jack.
         d) Auxiliary alarm monitoring jack.
         e) Hospital bed interface jack (when specially approved by TVE - 005OP3B).
         f) Provide one (1) spare station for each twenty (20) stations installed.

N. Distribution System: Refer to Specification Sections 27 11 00, Structured TIP Communications Cables; 27 11 00, TIP Communications Interface and Equipment Rooms Fittings and 27 15 00, HORIZONTAL and Vertical TIP Communications Cabling for additional specific TIP wire and cable standards and installation requirements used to install the Facility’s TIP network.

1. In addition to the TIP provided under the aforementioned Specification Sections, the contractor shall provide the following additional TIP installation and testing requirements, provide the following minimum additional System TIP requirements, cables & interconnections:
   a. Each wire and cable used in the System shall be specifically OEM certified by tags on each reel and recommended and approved for installation in the Facility.
   b. The Contractor shall provide the RE a 610 mm (2 foot) sample of each wire and/or cable actually employed in the System and each certification tag for approval before continuing with the installation as described herein.
c. Fiberoptic Cables: Refer to Specification Section 27 15 00, Horizontal and Vertical TIP Communications Cabling; Paragraph 2.4.C12.d. Fiberoptic Cables – for minimum technical standards and requirements for additional System cables.
d. Copper Cables: Refer to Specification Section 27 15 00, Horizontal and Vertical TIP Communications Cabling; Paragraph 2.4.C12.c. Copper Cables – for minimum technical standards and requirements for additional System voice and data cables.
e. Line Level Audio and Microphone Cable:
1) Line level audio and microphone cable for inside racks and conduit.
2) Shielded, twisted pair Minimum 22AWG, stranded conductors and 24AWG drain wire with overall jacket.
f. Speaker Level Audio (70.7Volt RMS):
1) For use with 70.7V speaker circuits.
2) 18AWG stranded pair, minimum.
g. All cabling shall be //plenum// or //riser (UL-1666)// rated.
h. Provide one (1) spare 1,000 foot roll of approved System (not microphone) cable only.

2. Raceways, Back Boxes and conduit:
a. In addition to the Raceways, Equipment Room Fittings provided under Specification Sections 27 15 00 TIP Communication Room Fittings and 27 15 00 - TIP Communications Horizontal and Vertical Cabling, provide the following additional TIP raceway and fittings:
b. Each raceway that is open top, shall be: UL certified for telecommunications systems, partitioned with metal partitions in order to comply with NEC Parts 517 & 800 to "mechanically separate telecommunications systems of different service, protect the installed cables from falling out when vertically mounted and allow junction boxes to be attached to the side to interface "drop" type conduit cable feeds.
c. Intercommunication System cable infrastructure: EMT or in J-hooks above accessible ceilings, 24 inches on center.
d. Junction boxes shall be not less than 2-1/2 inches deep and 6 inches wide by 6 inches long.
e. Flexible metal conduit is prohibited unless specifically approved by 005OP3B.
f. System Conduit:
   1) The PA system is NFPA listed as Emergency / Public Safety Communication System which requires the entire system to be installed in a separate conduit system.
   2) The use of centralized mechanically partitioned wireways may be used to augment main distribution conduit on a case by case basis when specifically approved by VA Headquarters (005OP3B).
   3) Conduit Sleeves:
      a) The AE has made a good effort to identify where conduit sleeves through full-height and fire rated walls on the drawings, and has instructed the electrician to provide the sleeves as shown on the drawings.
      b) While the sleeves shown on the drawings will be provided by others, the contractor is responsible for installing conduit sleeves and fire-proofing where necessary. It is often the case, that due to field conditions, the nurse-call cable may have to be installed through an alternate route. Any conduit sleeves required due to field conditions or those omitted by the engineer shall be provided by the cabling contractor.

g. Device Back Boxes:
   1) Furnish to the electrical contractor all back boxes required for the PA system devices.
   2) The electrical contractor shall install the back boxes as well as the system conduit. Coordinate the delivery of the back boxes with the construction schedule.

3. UPS:
   a. Provide a backup battery or a UPS for the System to allow normal operation and function (as if there was no AC power failure) in the event of an AC power failure or during input power fluctuations for a minimum of 30 minutes.
   b. As an alternate solution, the telephone system UPS may be utilized to meet this requirement at the headend location, as long as this function is specifically approved by the Telephone Contractor and the RE.
   c. The Nurse Call Contractor shall not make any attachments or connection to the telephone system until specifically directed to do so, in writing, by the RE.
d. Provide UPS for all active system components including but not limited to:
   1) System Amplifiers.
   2) Microphone Consoles.
   3) Telephone Interface Units.
   4) TER, TR & Headend Equipment Rack(s).

O. Patient Bedside Prefabricated Units (PBPU):

1. Where PBPU’s exist in the Facility; the Contractor shall identify the “gang box” location on the PBPU designated for installation of the telephone jack. This location shall here-in-after be identified as the unit’s TCO. The Contractor shall be responsible for obtaining written approval and specific instructions from the PBPU OEM regarding the necessary disassembly and reassembly of each PBPU to the extent necessary to pull wire from above the TIP ceiling junction box to the PBPU’s reserved gang box for the unit’s TCO. A Contractor provided stainless steel cover plate approved for use by the PBPU OEM and Facility IRM Chief shall finish out the jack installation.

2. Under no circumstances shall the Contractor proceed with the PBPU installations without the written approval of the PBPU OEM and the specific instructions regarding the attachment to or modifying of the PBPU. The RE shall be available to assist the Contractor in obtaining approvals and instructions in a timely manner as related to the project’s time constraints.

3. It is the responsibility of the Contractor to maintain the UL integrity of each PBPU. If the Contractor violates that integrity, it shall be the responsibility of the Contractor to obtain on site UL re-certification of the violated PBPU at the direction of the RE and at the Contractor’s expense.

P. Installation Kit:

1. General: The kit shall be provided that, at a minimum, includes all connectors and terminals, labeling systems, audio spade lugs, barrier strips, punch blocks or wire wrap terminals, heat shrink tubing, cable ties, solder, hangers, clamps, bolts, conduit, cable duct, and/or cable tray, etc., required to accomplish a neat and secure installation. All wires shall terminate in a spade lug and barrier strip, wire wrap terminal or punch block. Unfinished or unlabeled wire connections shall not be allowed. Turn over to the RE
all unused and partially opened installation kit boxes, coaxial, fiberoptic, and twisted pair cable reels, conduit, cable tray, and/or cable duct bundles, wire rolls, physical installation hardware. The following are the minimum required installation sub-kits:

2. System Grounding:
   a. The grounding kit shall include all cable and installation hardware required. All radio equipment shall be connected to earth ground via internal building wiring, according to the NEC.
   b. This includes, but is not limited to:
      1) Fiberoptic Optic Cable Armor/External Braid
      2) Coaxial Cable Shields.
      3) Control Cable Shields.
      4) Data Cable Shields.
      5) Equipment Racks.
      6) Equipment Cabinets.
      7) Conduits.
      8) Cable Duct.
      9) Cable Trays.
      10) Interduct
      11) Power Panels.
      12) Connector Panels.
      13) Grounding Blocks.

3. Fiberoptic Cable: The fiberoptic cable kit shall include all fiberoptic connectors, cable tying straps, interduct, heat shrink tubing, hangers, clamps, etc. required to accomplish a neat and secure installation.

4. Coaxial Cable: The coaxial cable kit shall include all coaxial connectors, cable tying straps, heat shrink tubing, hangers, clamps, etc., required to accomplish a neat and secure installation.

5. Wire and Cable: The wire and cable kit shall include all connectors and terminals, audio spade lugs, barrier straps, punch blocks, wire wrap strips, heat shrink tubing, tie wraps, solder, hangers, clamps, labels etc., required to accomplish a neat and orderly installation.

6. Conduit, Cable Duct, and Cable Tray: The kit shall include all conduit, duct, trays, junction boxes, back boxes, cover plates, feed through nipples, hangers, clamps, other hardware required to
accomplish a neat and secure conduit, cable duct, and/or cable tray installation in accordance with the NEC and this document.

7. Equipment Interface: The equipment kit shall include any item or quantity of equipment, cable, mounting hardware and materials needed to interface the systems with the identified sub-system(s) according to the OEM requirements and this document.

8. Labels: The labeling kit shall include any item or quantity of labels, tools, stencils, and materials needed to completely and correctly label each subsystem according to the OEM requirements, as-installed drawings, and this document.

9. Documentation: The documentation kit shall include any item or quantity of items, computer discs, as installed drawings, equipment, maintenance, and operation manuals, and OEM materials needed to completely and correctly provide the system documentation as required by this document and explained herein.

// Q. MENTAL HEALTH (aka PSYCHIATRIC) UNIT – when a Mental Health Unit is to be provided as a part of the project, provide each unit as follows:

1. EMERGENCY STATION:
   a. A push-button emergency station shall be provided in each toilet stall and each shower/bath facility in Mental Health Units. Shower emergency stations shall be installed inside the shower stall at the shower head end. They shall be installed approximately a minimum of 18 inches from the showerhead itself and at a maximum of 72 inches above the finished floor. Each station inside shower and toilet areas shall be equipped with a rubber gasket between the faceplate and wall or be rated by UL as waterproof. The gasket shall cover and water seal the entire back box opening and not extend beyond the sides of the associated faceplate by ¼” MAX. If the wall is tile or other uneven type material the gasket and associated faceplate shall be provided to completely seal the opening and uneven material surface.
   b. Fasten each emergency station faceplate to the back-boxes with tamperproof screws.

2. SECURITY ROOMS:
   a. Provide Security rooms in a Mental Health Unit with an emergency wall station containing a key activated switch. Provide four (4) emergency pushbutton stations and a four-inch flush mounted ceiling microphone/speaker.
b. Mount all equipment with tamperproof screws.
c. Activating the switch shall energize each emergency station in the security room.

d. Selection of the security room station at the nurse control station shall permit two-way voice communication within the room and nurse control station, through the ceiling microphone/speaker.
e. Pressing the push-button on any security room emergency station shall generate emergency visual signals in the corridor dome light and emergency audible and visual signals at the nurse control station.

f. Provide six (6) keys for each Mental Health Unit.

3. PATIENT STATION:

a. Provide a patient station with pushbutton, microphone/speaker.
b. Mount all equipment with tamperproof screws.
c. Selection of the patient room station at the nurse control station shall permit two-way voice communication within the room and nurse control station, through the ceiling microphone/speaker.
d. Pressing the push-button on any patient room station shall generate visual signals in the corridor dome light and routine audible and visual signals at the nurse control station.

e. The patient wall station shall be equipped with a method (aka separate push-button) to initiate an emergency call in the room and corridor dome lights and nurse call station.

4. NURSE CONTROL (aka MASTER) STATION – provide a station as described herein. //

// R. BLIND REHABILITATION UNIT – when a Blind Rehabilitation Unit is to be provided as a part of the project, provide each unit as follows with TVE 005OP3B reviewed and approved units designed specifically for service and functions in this type of unit (aka brail, audible and like recognition):

1. EMERGENCY STATION:

a. A push-button emergency station shall be provided in each toilet stall and each shower/bath facility in Psychiatric Units. Shower emergency stations shall be installed inside the shower stall at the shower head end. They shall be installed approximately a minimum of 18 inches from the showerhead itself and at a maximum
of 72 inches above the finished floor. Each station inside shower and toilet areas shall be equipped with a rubber gasket between the faceplate and wall or be rated by UL as waterproof. The gasket shall cover and water seal the entire back box opening and not extend beyond the sides of the associated faceplate by ¼” MAX. If the wall is tile or other uneven type material the gasket and associated faceplate shall be provided to completely seal the opening and uneven material surface.

b. Fasten each emergency station faceplate to the back-boxes with tamperproof screws.

c. Pressing the push-button on any emergency station shall generate visual signals in the room & corridor dome light(s) and emergency audible and visual signals at the nurse control station.

2. PATIENT STATION:

a. Provide a patient station with pushbutton, microphone/speaker.

b. Mount all equipment with tamperproof screws.

c. Selection of the patient room station at the nurse control station shall permit two-way voice communication within the room and nurse control station, through the patient wall microphone/speaker.

d. Pressing the push-button on any patient wall station shall generate visual signals in the Room & corridor dome light(s) and routine audible and visual signals at the nurse control station.

e. The patient wall station shall be equipment with a method (aka separate push-button) to initiate an emergency call in the room and corridor dome lights and nurse call station.

3. NURSE CONTROL (aka MASTER) STATION – provide a station as described herein. //

// P. ONCOLOGY, RADIOLOGY, DIALYSIS UNITS – when a these Units are to be provided as a part of the project, provide each unit as follows with TVE 005OP3B reviewed and approved units designed specifically for service and functions in this type of unit (aka brail, audible and like recognition:

1. CODE BLUE – provide a Code Blue System as described herein.

2. EMERGENCY STATION:

a. A push-button emergency station shall be provided in each toilet stall and each shower/bath facility in Psychiatric Units. Shower emergency stations shall be installed inside the shower stall at

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the shower head end. They shall be installed approximately a
minimum of 18 inches from the showerhead itself and at a maximum
of 72 inches above the finished floor. Each station inside
shower and toilet areas shall be equipped with a rubber gasket
between the faceplate and wall or be rated by UL as waterproof.
The gasket shall cover and water seal the entire back box opening
and not extend beyond the sides of the associated faceplate by ¼”
MAX. If the wall is tile or other uneven type material the
gasket and associated faceplate shall be provided to completely
seal the opening and uneven material surface.
b. Fasten each emergency station faceplate to the back-boxes with
tamperproof screws.
c. Pressing the push-button on any emergency station shall generate
visual signals in the room & corridor dome light(s) and emergency
audible and visual signals at the nurse control station.

3. PATIENT STATION:
a. Provide a patient station with pushbutton, microphone/speaker.
b. Mount all equipment with tamperproof screws.
c. Selection of the patient room station at the nurse control
station shall permit two-way voice communication within the room
and nurse control station, through the patient wall
microphone/speaker.
d. Pressing the push-button on any patient wall station shall
generate visual signals in the Room & corridor dome light(s) and
routine audible and visual signals at the nurse control station.
e. The patient wall station shall be equipment with a method (aka
separate push-button) to initiate an emergency call in the room
and corridor dome lights and nurse call station.

4. NURSE CONTROL (aka MASTER) STATION - provide a station as
described herein. //

PART 3 - EXECUTION

3.1 PROJECT MANAGEMENT

A. Assign a single project manager to this project who will serve as the
point of contact for the Owner, the General Contractor, and the
Engineer.

B. The Contractor shall be proactive in scheduling work at the hospital,
specifically the Contractor will initiate and maintain discussion with
the general contractor regarding the schedule for ceiling cover up and install cables to meet that schedule.

C. Contact the Office of Telecommunications, Special Communications Team (005OP2B) at (301) 734-0350 to have a VA Certified Telecommunications COTR assigned to the project for telecommunications review, equipment and system approval and co-ordination with VA’s Spectrum Management and OCIS Teams.

3.2 COORDINATION WITH OTHER TRADES

A. Coordinate with the cabling contractor the location of the TV faceplate and the faceplate opening for the nurse call TV control jack.

B. Coordinate with the cabling contractor the location of TIP equipment in the TER, TCR, PCR, SCC, ECR, STRs, NSs, and TCOS in order to connect to the TIP cable network that was installed as a part of Section Specification 27 11 00. Contact the RE immediately, in writing, if additional location(s) are discovered to be activated that was not previously provided.

C. Before beginning work, verify the location, quantity, size and access for the following:

1. Isolated ground AC power circuits provided for systems.
2. Primary, emergency and extra auxiliary AC power generator requirements.
3. Junction boxes, wall boxes, wire troughs, conduit stubs and other related infrastructure for the systems.
4. System components installed by others.
5. Overhead supports and rigging hardware installed by others.

D. Immediately notify the Owner, GC and Consultant(s) in writing of any discrepancies.

3.3 NEEDS ASSESSMENT

Provide a one-on-one meeting with the particular nursing manager of each unit affected by the installation of the new nurse call/code blue system. Review the floor plan drawing, educate the nursing manager with the functions of the equipment that is being provided and gather details specific to the individual units; coverage and priorities of calls; staffing patterns; and other pertinent details that will affect system programming and training.

3.4 INSTALLATION

A. General:
1. Execute work in accordance with National, State and local codes, regulations and ordinances.

2. Install work neatly, plumb and square and in a manner consistent with standard industry practice. Carefully protect work from dust, paint and moisture as dictated by site conditions. The Contractor will be fully responsible for protection of his work during the construction phase up until final acceptance by the Owner.

3. Install equipment according to OEM’s recommendations. Provide any hardware, adaptors, brackets, rack mount kits or other accessories recommended by OEM for correct assembly and installation.

4. Secure equipment firmly in place, including receptacles, speakers, equipment racks, system cables, etc.
   a. All supports, mounts, fasteners, attachments and attachment points shall support their loads with a safety factor of at least 5:1.
   b. Do not impose the weight of equipment or fixtures on supports provided for other trades or systems.
   c. Any suspended equipment or associated hardware must be certified by the OEM for overhead suspension.
   d. The Contractor is responsible for means and methods in the design, fabrication, installation and certification of any supports, mounts, fasteners and attachments.

5. Finishes for any exposed work such as plates, racks, panels, speakers, etc. shall be approved by the Architect, Owner and TVE 0050P3B.

6. Coordinate cover plates with field conditions. Size and install cover plates as necessary to hide joints between back boxes and surrounding wall. Where cover plates are not fitted with connectors, provide grommeted holes in size and quantity required. Do not allow cable to leave or enter boxes without cover plates installed.

7. Active electronic component equipment shall consist of solid state components, be rated for continuous duty service, comply with the requirements of FCC standards for telephone and data equipment, systems, and service.

8. Color code all distribution wiring to conform to the Nurse Call Industry Standard, EIA/TIA, and this document, whichever is the more stringent. At a minimum, all equipment, cable duct and/or conduit,
enclosures, wiring, terminals, and cables shall be clearly and permanently labeled according to and using the provided record drawings, to facilitate installation and maintenance.

9. Connect the System’s primary input AC power to the Facility’s Critical Branch of the Emergency AC power distribution system as shown on the plans or if not shown on the plans consult with RE regarding a suitable circuit location prior to bidding.

10. Product Delivery, Storage and Handling:
   a. Delivery: Deliver materials to the job site in OEM's original unopened containers, clearly labeled with the OEM's name and equipment catalog numbers, model and serial identification numbers. The RE may inventory the cable, patch panels, and related equipment.
   b. Storage and Handling: Store and protect equipment in a manner, which will preclude damage as directed by the RE.

11. Where TCOs are installed adjacent to each other, install one outlet for each instrument.

12. Equipment installed outdoors shall be weatherproof or installed in weatherproof enclosures with hinged doors and locks with two keys.

B. Equipment Racks/Cabinets:
   1. Fill unused equipment mounting spaces with blank panels or vent panels. Match color to equipment racks/cabinets.
   2. Provide security covers for all devices not requiring routine operator control.
   3. Provide vent panels and cooling fans as required for the operation of equipment within the OEM's specified temperature limits. Provide adequate ventilation space between equipment for cooling. Follow manufacturer’s recommendations regarding ventilation space between amplifiers.
   4. Provide insulated connections of the electrical raceway to equipment racks.
   5. Provide continuous raceway/conduit with no more than 40% fill between wire troughs and equipment racks/cabinets for all non-plenum-rated cable. Ensure each system is mechanically separated from each other in the wireway.
6. Ensure a minimum of 36 inches around each cabinet and/or rack to comply with OSHA Safety Standards. Cabinets and/or Racks installed side by side – the 36” rule applies to around the entire assembly.

C. Distribution Frames.

1. A new stand-alone (i.e., self supporting, free standing) PA rack/frame may be provided in each TR to interconnect the TCR, PCR, SCC, NS, STRs & ECRs. Rack/frames shall be wired in accordance with industry standards and shall employ "latest state-of-the-art" modular cross-connect devices. The PA riser cable shall be sized to satisfy all voice/digital requirements plus not less than 50% spare (growth) capacity in each TR which includes a fiber optic backbone.

2. The frames/racks shall be connected to the TER/MCR system ground.

D. Wiring Practice - in addition to the MANDATORY infrastructure requirements outlined in VA Construction Specifications 27 10 00 – TIP Structured Communications Cabling, 27 11 00 – TIP Communications Rooms Fittings and 27 15 00 – TIP Horizontal and Vertical Communicators Cabling, the following additional practices shall be adhered too:

1. Comply with requirements for raceways and boxes specified in Division 26 Section "Raceway and Boxes for Electrical Systems."

2. Execute all wiring in strict adherence to the National Electrical Code, applicable local building codes and standard industry practices.

3. Wiring shall be classified according to the following low voltage signal types:
   a. Balanced microphone level audio (below -20dBm) or Balanced line level audio (-20dBm to +30dBm)
   b. 70V audio speaker level audio.
   c. Low voltage DC control or power (less than 48VDC)

4. Where raceway is to be EMT (conduit), wiring of differing classifications shall be run in separate conduit. Where raceway is to be an enclosure (rack, tray, wire trough, utility box) wiring of differing classifications which share the same enclosure shall be mechanically partitioned and separated by at least four (4) inches. Where Wiring of differing classifications must cross, they shall cross perpendicular to one another.

5. Do not splice wiring anywhere along the entire length of the run. Make sure cables are fully insulated and shielded from each other and from the raceway for the entire length of the run.
6. Do not pull wire through any enclosure where a change of raceway alignment or direction occurs. Do not bend wires to less than radius recommended by manufacturer.

7. Replace the entire length of the run of any wire or cable that is damaged or abraided during installation. There are no acceptable methods of repairing damaged or abraided wiring.

8. Use wire pulling lubricants and pulling tensions as recommended by the OEM.

9. Use grommets around cut-outs and knock-outs where conduit or chase nipples are not installed.

10. Do not use tape-based or glue-based cable anchors.

11. Ground shields and drain wires to the Facility’s signal ground system as indicated by the drawings.

12. Field wiring entering equipment racks shall be terminated as follows:
   a. Provide OEM directed service loops at harness break-outs and at plates, panels and equipment. Loops should be sufficient to allow plates, panels and equipment to be removed for service and inspection.
   b. Line level and speaker level wiring may be terminated inside the equipment rack using specified terminal blocks (see “Products.”) Provide 15% spare terminals inside each rack. Microphone level wiring may only be terminated at the equipment served.
   c. If specified terminal blocks are not designed for rack mounting, utilize ¾” plywood or 1/8” thick aluminum plates/blank panels as a mounting surface. Do not mount on the bottom of the rack.
   d. Employ permanent strain relief for any cable with an outside diameter of 1” or greater.

13. Use only balanced audio circuits unless noted otherwise directed and indicated on the drawings.

14. Make all connections as follows:
   a. Make all connections using rosin-core solder or mechanical connectors appropriate to the application.
   b. For crimp-type connections, use only tools that are specified by the manufacturer for the application.
   c. Use only insulated spade lugs on screw terminals. Spade lugs shall be sized to fit the wire gauge. Do not exceed two lugs per terminal.
d. Wire nuts, electrical tape or “Scotch Lock” connections are not acceptable for any application.

15. Noise filters and surge protectors shall be provided for each equipment interface cabinet, switch equipment cabinet, control console, local, and remote active equipment locations to ensure protection from input primary AC power surges and noise glitches are not induced into low Voltage data circuits.

16. Wires or cables previously approved to be installed outside of conduit, cable trays, wireways, cable duct, etc:
   a. Only when specifically authorized as described herein, will wires or cables be identified and approved to be installed outside of conduit. The wire or cable runs shall be UL rated plenum and OEM certified for use in air plenums.
   b. Wires and cables shall be hidden, protected, fastened and tied at 600 mm (24 in.) intervals, maximum, as described herein to building structure.
   c. Closer wire or cable fastening intervals may be required to prevents sagging, maintain clearance above suspended ceilings, remove unsightly wiring and cabling from view and discourage tampering and vandalism. Wire or cable runs, not provided in conduit, that penetrate outside building walls, supporting walls, and two hour fire barriers shall be sleeved and sealed with an approved fire retardant sealant.
   d. Wire or cable runs to system components installed in walls (i.e.: volume attenuators, circuit controllers, signal, or data outlets, etc.) may, when specifically authorized by the RE, be fished through hollow spaces in walls and shall be certified for use in air plenum areas.
   e. Completely test all of the cables after installation and replace any defective cables.
   f. Wires or cables that are installed outside of buildings shall be in conduit, secured to solid building structures. If specifically approved, on a case by case basis, to be run outside of conduit, the wires or cables shall be installed, as described herein. The bundled wires or cables must: Be tied at not less than 460 mm (18 in.) intervals to a solid building structure; have ultra violet protection and be totally waterproof (including all connections).

The laying of wires or cables directly on roof tops, ladders,
drooping down walls, walkways, floors, etc. is not allowed and will not be approved.

E. Cable Installation - Cable Installation - In addition to the **MANDATORY** infrastructure requirements outlined in VA Construction Specifications 27 10 00 – Structured TIP Communications Cabling, 27 11 00 – TIP Communications Rooms and Fittings and 27 15 00 – TIP Communications Horizontal and Vertical Cabling and the following additional practices shall be adhered too:

1. Support cable on maximum 2’-0” centers. Acceptable means of cable support are cable tray, j-hooks, and bridal rings. Velcro wrap cable bundles loosely to the means of support with plenum rated Velcro straps. Plastic tie wraps are not acceptable as a means to bundle cables.

2. Run cables parallel to walls.

3. Install maximum of 10 cables in a single row of J-hooks. Provide necessary rows of J-hooks as required by the number of cables.

4. Do not lay cables on top of light fixtures, ceiling tiles, mechanical equipment, or ductwork. Maintain at least 2’-0” clearance from all shielded electrical apparatus.

5. All cables shall be tested after the total installation is fully complete. All test results are to be documented. All cables shall pass acceptable test requirements and levels. Contractor shall remedy any cabling problems or defects in order to pass or comply with testing. This includes the re-pull of new cable as required at no additional cost to the Owner.

6. Ends of cables shall be properly terminated on both ends per industry and OEM’s recommendations.

7. Provide proper temporary protection of cable after pulling is complete before final dressing and terminations are complete. Do not leave cable lying on floor. Bundle and tie wrap up off of the floor until you are ready to terminate.

8. Terminate all conductors; no cable shall contain unterminated elements. Make terminations only at outlets and terminals.

9. Splices, Taps, and Terminations: Arrange on numbered terminal strips in junction, pull, and outlet boxes; terminal cabinets; and equipment enclosures. Cables may not be spliced.
10. Bundle, lace, and train conductors to terminal points without exceeding OEM's limitations on bending radii. Install lacing bars and distribution spools.

11. Cold-Weather Installation: Bring cable to room temperature before dereeling. Heat lamps shall not be used.

12. Cable shall not be run through structural members or be in contact with pipes, ducts, or other potentially damaging items.

13. Separation of Wires: (REFER TO RACEWAY INSTALLATION) Separate speaker-microphone, line-level, speaker-level, and power wiring runs. Install in separate raceways or, where exposed or in same enclosure, separate conductors at least 12 inches apart for speaker microphones and adjacent parallel power and telephone wiring. Separate other intercommunication equipment conductors as recommended by equipment manufacturer.

14. Serve all cables as follows:
   a. Cover the end of the overall jacket with a 1" (minimum) length of transparent heat-shrink tubing. Cut unused insulated conductors 2" (minimum) past the heat-shrink, fold back over jacket and secure with cable-tie. Cut unused shield/drain wires 2" (minimum) past the Heatshrink and serve as indicated below.
   b. Cover shield/drain wires with heat-shrink tubing extending back to the overall jacket. Extend tubing ¼" past the end of unused wires, fold back over jacket and secure with cable tie.
   c. For each solder-type connection, cover the bare wire and solder connection with heat-shrink tubing.

F. Labeling: Provide labeling in accordance with ANSI/EIA/TIA-606-A. All lettering for Nurse Call and/or Code Blue circuits shall be stenciled using // laser printers // // thermal ink transfer process // //------- -//.

1. Cable and Wires (Hereinafter referred to as "Cable"): Cables shall be labeled at both ends in accordance with ANSI/EIA/TIA-606-A. Labels shall be permanent in contrasting colors. Cables shall be identified according to the System "Record Wiring Diagrams."

2. Equipment: System equipment shall be permanently labeled with contrasting plastic laminate or Bakelite material. System equipment shall be labeled on the face of the unit corresponding to its source.
a. Clearly, consistently, logically and permanently mark switches, connectors, jacks, relays, receptacles and electronic and other equipment.  
b. Engrave and paint fill all receptacle panels using 1/8” (minimum) high lettering and contrasting paint.  
c. For rack-mounted equipment, use engraved Lamacoïd labels with white 1/8” (minimum) high lettering on black background. Label the front and back of all rack-mounted equipment.  

3. Conduit, Cable Duct, and/or Cable Tray: The Contractor shall label all conduit, duct and tray, including utilized GFE, with permanent marking devices or spray painted stenciling a minimum of 3 meters (10 ft.) identifying it as the System. In addition, each enclosure shall be labeled according to this standard.  

4. Termination Hardware: The Contractor shall label TCOs and patch panel connections using color coded labels with identifiers in accordance with ANSI/EIA/TIA-606-A and the “Record Wiring Diagrams.”  

5. Where multiple pieces of equipment reside in the same rack group, clearly and logically label each indicating to which room, channel, receptacle location, etc. they correspond.  

6. Permanently label cables at each end, including intra-rack connections. Labels shall be covered by the same, transparent heat-shrink tubing covering the end of the overall jacket. Alternatively, computer generated labels of the type which include a clear protective wrap may be used.  

7. Contractor’s name shall appear no more than once on each continuous set of racks. The Contractor's name shall not appear on wall plates or portable equipment.  

8. Ensure each OEM supplied item of equipment has appropriate UL Labels / Marks for the service the equipment is performed permanently attached / marked to a non-removal board in the unit. EQUIPMENT INSTALLED NOT BEARING THESE UL MARKS WILL NOT BE ALLOWED TO BE A PART OF THE SYSTEM. THE CONTRACTOR SHALL BEAR ALL COSTS REQUIRED TO PROVIDE REPLACEMENT EQUIPMENT WITH APPROVED UL MARKS.  

G. Conduit and Signal Ducts: When the Contractor and/or OEM determines additional system conduits and/or signal ducts are required in order to meet the system minimum performance standards outlined herein, the contractor shall provide these items as follows:  

1. Conduit:
a. The Contractor shall employ the latest installation practices and materials. The Contractor shall provide conduit, junction boxes, connectors, sleeves, weather heads, pitch pockets, and associated sealing materials not specifically identified in this document as GFE. Conduit penetrations of walls, ceilings, floors, interstitial space, fire barriers, etc., shall be sleeved and sealed.

b. All cables shall be installed in separate conduit and/or signal ducts (exception from the separate conduit requirement to allow Nurse Call and/or Code Blue cables to be installed in partitioned cable tray with voice cables may be granted in writing by the RE if requested). Conduits shall be provided in accordance with Section 27 05 33, RACEWAYS AND BOXES FOR COMMUNICATIONS SYSTEMS, and NEC Articles 517 for Critical Care and 800 for Communications systems, at a minimum.

c. When metal, plastic covered, etc., flexible cable protective armor or systems are specifically authorized to be provided for use in the System, their installation guidelines and standards shall be as specified herein, Section 27 05 33, RACEWAYS AND BOXES FOR COMMUNICATIONS SYSTEMS, and the NEC.

d. When “interduct” flexible cable protective systems is specifically authorized to be provided for use in the System, it’s installation guidelines and standards shall be as the specified herein, Section 27 05 33, RACEWAYS AND BOXES FOR COMMUNICATIONS SYSTEMS, and the NEC.

e. Conduit fill (including GFE approved to be used in the system) shall not exceed 40%. Each conduit end shall be equipped with a protective insulator or sleeve to cover the conduit end, connection nut or clamp, to protect the wire or cable during installation and remaining in the conduit. Electrical power conduit shall be installed in accordance with the NEC. AC power conduit shall be run separate from signal conduit.

f. Ensure that Critical Care Nurse Call and/or Code Blue //, and _________ // Systems (as identified by NEC Section 517) are completely separated and protected from all other systems.

2. Signal Duct, Cable Duct, or Cable Tray:

a. The Contractor shall use GFE signal duct, cable duct, and/or cable tray, when identified and approved by the RE.
b. Approved signal and/or cable duct shall be a minimum size of 100 mm x 100 mm (4 in. X 4 in.) inside diameter with removable tops or sides, as appropriate. Protective sleeves, guides or barriers are required on all sharp corners, openings, anchors, bolts or screw ends, junction, interface and connection points.

c. Approved cable tray shall be fully covered, mechanically and physically partitioned for multiple electronic circuit use, and be UL certified and labeled for use with telecommunication circuits and/or systems. The RE shall approve width and height dimensions.

d. All cable junctions and taps shall be accessible. Provide an 8” X 8” X 4” (minimum) junction box attached to the cable duct or raceway for installation of distribution system passive equipment. Ensure all equipment and tap junctions are accessible.

3.5 PROTECTION OF NETWORK DEVICES

A. Contractor shall protect network devices during unpacking and installation by wearing manufacturer approved electrostatic discharge (ESD) wrist straps tied to chassis ground. The wrist strap shall meet OSHA requirements for prevention of electrical shock, should technician come in contact with high voltage.

3.6 CUTTING, CLEANING AND PATCHING

A. It shall be the responsibility of the contractor to keep their work area clear of debris and clean area daily at completion of work.

B. It shall be the responsibility of the contractor to patch and paint any wall or surface that has been disturbed by the execution of this work.

C. The Contractor shall be responsible for providing any additional cutting, drilling, fitting or patching required that is not indicated as provided by others to complete the Work or to make its parts fit together properly.

D. The Contractor shall not damage or endanger a portion of the Work or fully or partially completed construction of the Owner or separate contractors by cutting, patching or otherwise altering such construction, or by excavation. The Contractor shall not cut or otherwise alter such construction by the Owner or a separate contractor except with written consent of the Owner and of such separate contractor; such consent shall not be unreasonably withheld. The Contractor shall not unreasonably withhold from the Owner or a separate
Contractor the Contractor’s consent to cutting or otherwise altering the Work.

E. Where coring of existing (previously installed) concrete is specified or required, including coring indicated under unit prices, the location of such coring shall be clearly identified in the field and the location shall be approved by the Project Manager prior to commencement of coring work.

3.7 FIREPROOFING

A. Where Nurse Call and/or Code Blue wires, cables and conduit penetrate fire rated walls, floors and ceilings, fireproof the opening.

B. Provide conduit sleeves (if not already provided by electrical contractor) for cables that penetrate fire rated walls and Telecommunications Rooms floors and ceilings. After the cabling installation is complete, install fire proofing material in and around all conduit sleeves and openings. Install fire proofing material thoroughly and neatly. Seal all floor and ceiling penetrations.

C. Use only materials and methods that preserve the integrity of the fire stopping system and its rating.

D. Install fireproofing where low voltage cables are installed in the same manholes with high voltage cables; also cover the low voltage cables with arc proof and fireproof tape.

E. Use approved fireproofing tape of the same type as used for the high voltage cables, and apply the tape in a single layer, one-half lapped or as recommended by the manufacturer. Install the tape with the coated side towards the cable and extend it not less than 25 mm (one inch) into each duct.

F. Secure the tape in place by a random wrap of glass cloth tape.

3.8 GROUNDING

A. Ground Nurse Call and/or Code Blue cable shields and equipment to eliminate shock hazard and to minimize ground loops, commonmode returns, noise pickup, cross talk, and other impairments as specified in CFM Division 27, Section 27 05 26 – Grounding and Bonding for Communications Systems.

B. Facility Signal Ground Terminal: Locate at main room or area signal ground within the room (i.e. head end and telecommunications rooms) or area(s) and indicate each signal ground location on the drawings.

C. Extend the signal ground to inside each equipment cabinet and/or rack. Ensure each cabinet and/or rack installed item of equipment is
connected to the extended signal ground. Isolate the signal ground from power and major equipment grounding systems.

D. When required, install grounding electrodes as specified in CFM Division 26, Section 26 05 26 -Grounding and Bonding for Electrical Systems.

E. Do not use “3rd or 4th” wire internal electrical system conductors for communications signal ground.

F. Do not connect the signal ground to the building’s external lightning protection system.

G. Do Not “mix grounds” of different systems.

H. Insure grounds of different systems are installed as to not violate OSHA Safety and NEC installation requirements for protection of personnel.

PART 4 – TESTING / GUARANTY / TRAINING

4.0 SYSTEM LISTING

The Nurses Call System is NFPA listed as an “Emergency” Communication system. Where Code Blue signals are transmitted, that listing is elevated to “Life Support/Safety.” Therefore, the following testing and guaranty provisions are the minimum to be performed and provided by the contractor and Warranted by the OEM.

4.1 PROOF OF PERFORMANCE TESTING

A. Intermediate Testing:

1. After completion of 30 - 40% of the installation of a head end cabinet(s) //and interconnection to the corresponding System Patient Head Wall Units // and equipment, one master stations, local and remote stations, treatment rooms, and prior to any further work, this portion of the system must be pretested, inspected, and certified. Each item of installed equipment shall be checked to ensure appropriate UL Listing and Certification Labels are affixed as required by NFPA -Life Safety Code 101-3.2 (a) & (b), UL Nurse Call Standard 1069 and JCHCO evaluation guidelines, and proper installation practices are followed. The intermediate test shall include a full operational test.

2. All inspections and tests shall be conducted by an OEM-certified contractor representative and witnessed by TVE-005OP3B if there is no local Government Representative that processes OEM and VA approved Credentials to inspect and certify the system. The results of the inspection will be officially recorded by the Government
Representative and maintained on file by the RE, until completion of the entire project. The results will be compared to the Acceptance Test results. An identical inspection may be conducted between the 65 - 75% of the system construction phase, at the direction of the RE.

B. Pretesting:

1. Upon completing installation of the Nurse Call and/or Code Blue System, the Contractor shall align, balance, and completely pretest the entire system under full operating conditions.

2. Pretesting Procedure:
   a. During the System Pretest the Contractor shall verify (utilizing approved test equipment) that the System is fully operational and meets all the System performance requirements of this standard.
   b. The Contractor shall pretest and verify that all PSM System functions and specification requirements are met and operational, no unwanted aural effects, such as signal distortion, noise pulses, glitches, audio hum, poling noise, etc. are present. At a minimum, each of the following locations shall be fully pretested:
      1) Central Control Cabinets.
      2) Nurse Control Stations.
         a) Master Stations
         b) Patient Stations
         c) Staff Stations
         d) Emergency Stations
         e) Code Blue Stations
      3) Dome Lights.
         a) Patient Rooms
         b) Corridors
         c) Intersectional
      4) STRs
      5) Local and Remote Enunciation Panels (code blue).
      6) Electrical Supervision Panels/Functions/locations.
      7) All Networked locations.
      8) System interface locations (i.e. wireless, PA, telephone, etc.).
      9) System trouble reporting.
      10) System electrical supervision.
11) UPS operation.
12) Primary / Emergency AC Power Requirements
13) Extra Auxiliary Generator Requirements.
14) NSs.

3. The Contractor shall provide four (4) copies of the recorded system pretest measurements and the written certification that the System is ready for the formal acceptance test shall be submitted to the RE.

C. Acceptance Test:

1. After the Nurse Call and/or Code Blue System has been pretested and the Contractor has submitted the pretest results and certification to the RE, then the Contractor shall schedule an acceptance test date and give the RE 15 working days written notice prior to the date the acceptance test is expected to begin. The System shall be tested in the presence of a TVE 005OP3B and OEM certified representatives. The System shall be tested utilizing the approved test equipment to certify proof of performance and Life Safety / Critical Service compliance. The tests shall verify that the total System meets all the requirements of this specification. The notification of the acceptance test shall include the expected length (in time) of the test.

2. The acceptance test shall be performed on a "go-no-go" basis. Only those operator adjustments required to show proof of performance shall be allowed. The test shall demonstrate and verify that the installed System does comply with all requirements of this specification under operating conditions. The System shall be rated as either acceptable or unacceptable at the conclusion of the test. Failure of any part of the System that precludes completion of system testing, and which cannot be repaired in four (4) hours, shall be cause for terminating the acceptance test of the System. Repeated failures that result in a cumulative time of eight (8) hours to affect repairs shall cause the entire System to be declared unacceptable.

3. Retesting of the entire System shall be rescheduled at the convenience of the Government and costs borne by the Contractor at the direction of the SRE.

D. Acceptance Test Procedure:

1. Physical and Mechanical Inspection:
a. The TVE 005OP3B Representative will tour all major areas where the Nurse Call and/or Code Blue System and all sub-systems are completely and properly installed to insure they are operationally ready for proof of performance testing. A system inventory including available spare parts will be taken at this time. Each item of installed equipment shall be checked to ensure appropriate UL certification labels are affixed.

b. The System diagrams, record drawings, equipment manuals, TIP Auto CAD Disks, intermediate, and pretest results shall be formally inventoried and reviewed.

c. Failure of the System to meet the installation requirements of this specification shall be grounds for terminating all testing.

2. Operational Test:

   a. After the Physical and Mechanical Inspection, the central terminating and nurse call master control equipment shall be checked to verify that it meets all performance requirements outlined herein. A spectrum analyzer and sound level meter may be utilized to accomplish this requirement.

   b. Following the central equipment test, a pillow speaker (or on board speaker) shall be connected to the central terminating and nurse call master control equipment’s output tap to ensure there are no signal distortions such as intermodulation, data noise, popping sounds, erratic system functions, on any function.

   c. The distribution system shall be checked at each interface, junction, and distribution point, first, middle, and last intersectional, room, and bed dome light in each leg to verify that the nurse call distribution system meets all system performance standards.

   d. Each MATV outlet that is controlled by a nurse call pillow speaker shall be functionally tested at the same time utilizing the Contractor’s approved hospital grade HDTV receiver and TV remote control cable.

   e. The RED system and volume stepper switches shall be checked to insure proper operation of the pillow speaker, the volume stepper and the RED system (if installed).

   f. Additionally, each installed emergency, patient, staff, duty, panic station, intersectional, room, and bed dome light, power
supply, code one, and remote annunciator panels shall be checked
insuring they meet the requirements of this specification.

g. Once these tests have been completed, each installed sub-system
function shall be tested as a unified, functioning and fully
operating system. The typical functions are: nurse follower,
three levels of emergency signaling (i.e. flashing red emergency,
flashing white patient emergency, flashing white or combination
lights for staff emergency, separate flashing code blue), minimum
of 10 minutes of UPS operation, memory saving, minimum of ten
station audio paging, canceling emergency calls at each
originating station only, and storage and prioritizing of calls.

h. Individual Item Test: The TVE 005OP3B Representative will select
individual items of equipment for detailed proof of performance
testing until 100% of the System has been tested and found to
meet the contents of this specification. Each item shall meet or
exceed the minimum requirements of this document.

3. Test Conclusion:
   a. At the conclusion of the Acceptance Test, using the generated
      punch list (or discrepancy list) the VA and the Contractor shall
      jointly agree to the results of the test, and reschedule testing
      on deficiencies and shortages with the RE. Any retesting to
      comply with these specifications will be done at the Contractor's
      expense.
   b. If the System is declared unacceptable without conditions, all
      rescheduled testing expenses will be borne by the Contractor.

E. Acceptable Test Equipment: The test equipment shall furnished by the
   Contractor shall have a calibration tag of an acceptable calibration
   service dated not more than 12 months prior to the test. As part of the
   submittal, a test equipment list shall be furnished that includes the
   make and model number of the following type of equipment as a minimum:
   1. Spectrum Analyzer.
   2. Signal Level Meter.
   3. Volt-Ohm Meter.
   4. Sound Pressure Level (SPL) Meter.
   5. Oscilloscope.
   6. Pillow Speaker Test Set (Pillow Speaker with appropriate load and
cross connections in lieu of the set is acceptable).

4.2 WARRANTY

A. Comply with FAR 52.246-21, except that warranty shall be as follows:

B. Contractor’s Responsibility:

1. The Contractor shall warranty that all provided material and equipment will be free from defects, workmanship and will remain so for a period of one year from date of final acceptance of the System by the VA. The Contractor shall provide OEM’s equipment warranty documents, to the RE (or Facility Contracting Officer if the Facility has taken procession of the building), that certifies each item of equipment installed conforms to OEM published specifications.

2. The Contractor's maintenance personnel shall have the ability to contact the Contractor and OEM for emergency maintenance and logistic assistance, remote diagnostic testing, and assistance in resolving technical problems at any time. This contact capability shall be provided by the Contractor and OEM at no additional cost to the VA.

3. All Contractor maintenance and supervisor personnel shall be fully qualified by the OEM and must provide two (2) copies of current and qualified OEM training certificates and OEM certification upon request.

4. Additionally, the Contractor shall accomplish the following minimum requirements during the two year guaranty period:

a. Response Time during the Two Year Guaranty Period:

1) The RE (or Facility Contracting Officer if the system has been turned over to the Facility) is the Contractor’s ONLY OFFICIAL reporting and contact official for nurse call system trouble calls, during the guaranty period.

2) A standard work week is considered 8:00 A.M. to 5:00 P.M. or as designated by the RE (or Facility Contracting Officer), Monday through Friday exclusive of Federal Holidays.

3) The Contractor shall respond and correct on-site trouble calls, during the standard work week to:

a) A routine trouble call within one (1) working day of its report. A routine trouble is considered a trouble which causes a pillow speaker or cordset, one (1) master nurse
control station, patient station, emergency station, or dome light to be inoperable.

b) Routine trouble calls in critical emergency health care facilities (i.e., cardiac arrest, intensive care units, etc.) shall also be deemed as an emergency trouble call. The RE (or Facility Contracting Officer) shall notify the Contractor of this type of trouble call.

c) An emergency trouble call within four hours of its report. An emergency trouble is considered a trouble which causes a sub-system (ward), distribution point, terminal cabinet, or code one system to be inoperable at anytime.

4) If a Nurse Call and/or Code Blue/ component failure cannot be corrected within four (4) hours (exclusive of the standard work time limits), the Contractor shall be responsible for providing alternate nurse call equipment. The alternate equipment/system shall be operational within a maximum of 20 hours after the four (4) hour trouble shooting time and restore the effected location operation to meet the System performance standards. If any sub-system or major system trouble cannot be corrected within one working day, the Contractor shall furnish and install compatible substitute equipment returning the System or sub-system to full operational capability, as described herein, until repairs are complete.

b. Required On-Site Visits during the Two Year Guaranty Period

1) The Contractor shall visit, on-site, for a minimum of eight (8) hours, once every 12 weeks, during the guaranty period, to perform system preventive maintenance, equipment cleaning, and operational adjustments to maintain the System according the descriptions identified in this document.

2) The Contractor shall arrange all Facility visits with the RE (or Facility Contracting Officer) prior to performing the required maintenance visits.

3) Preventive maintenance shall be performed by the Contractor in accordance with the OEM's recommended practice and service intervals during non-busy time agreed to by the RE (or Facility Contracting Officer) and Contractor.
4) The preventive maintenance schedule, functions and reports shall be provided to and approved by the RE (or Facility Contracting Officer).

5) The Contractor shall provide the RE (or Facility Contracting Officer) a type written report itemizing each deficiency found and the corrective action performed during each required visit or official reported trouble call. The Contractor shall provide the RE with sample copies of these reports for review and approval at the beginning of the Acceptance Test. The following reports are the minimum required:
   a) The Contractor shall provide a monthly summary all equipment and sub-systems serviced during this warranty period to RE (or Facility Contracting Officer) by the fifth (5th) working day after the end of each month. The report shall clearly and concisely describe the services rendered, parts replaced and repairs performed. The report shall prescribe anticipated future needs of the equipment and systems for preventive and predictive maintenance.
   b) The Contractor shall maintain a separate log entry for each item of equipment and each sub-system of the System. The log shall list dates and times of all scheduled, routine, and emergency calls. Each emergency call shall be described with details of the nature and causes of emergency steps taken to rectify the situation and specific recommendations to avoid such conditions in the future.

6) The RE (or Facility Contracting Officer) shall convey to the Facility Engineering Officer, two (2) copies of actual reports for evaluation.
   a) The RE (or Facility Contracting Officer) shall ensure a copy of these reports is entered into the System’s official acquisition documents.
   b) The Facility Chief Engineer shall ensure a copy of these reports is entered into the System’s official technical record documents.

C. Work Not Included: Maintenance and repair service shall not include the performance of any work due to improper use; accidents; other vendor, contractor, or owner tampering or negligence, for which the Contractor is not directly responsible and does not control. The Contractor shall
immediately notify the RE or Facility Contracting Officer in writing upon the discovery of these incidents. The RE or Facility Contracting Officer will investigate all reported incidents and render

4.3 TRAINING

A. Provide thorough training of all nursing staff assigned to those nursing units receiving new networked nurse/patient communications equipment. This training shall be developed and implemented to address two different types of staff. Floor nurses/staff shall receive training from their perspective, and likewise, unit secretaries (or any person whose specific responsibilities include answering patient calls and dispatching staff) shall receive operational training from their perspective. A separate training room will be set up that allows this type of individualized training utilizing in-service training unit, prior to cut over of the new system.

B. Provide the following minimum training times and durations:
   1. //48// hours prior to opening for nursing staff (in 8-hour increments) – split evenly over 3 weeks and day and night shifts. Coordinate schedule with Owner.
   2. //32// hours during the opening week for nursing staff – both day and night shifts.
   3. //24// hours for supervisors and system administrators.

5.0 ATTACHMENTS

A. The following items are required as a part of the system:
   1. COTS Documents:
      a.
## Checklist for Software Licensing Agreements

For use in commercial item acquisition [COTS] conforming to – FAR Part 12

The Government may not be able to accept standard commercial licensing agreement without modification; you must negotiate terms and conditions so it is consistent with the FAR and the VAAR.

### Is the license (check all that apply):

- Exclusive
- Non-exclusive
- Perpetual
- Limited term
  - If limited term, state the period (months or years):
  - If limited term, is there an automatic renewal provision?
- CPU based
  - If CPU based, state number of machines and whether simultaneous use is permitted:
- Site license
  - If site license, state the site/location:
- Network license
- Other basis (e.g., # of users, # of transactions, etc.)
  - (state specifics)
- Applicable to only the current version (doesn’t apply to future versions)
- Software maintenance included at no extra cost
- Allow for office relocation or transfer
- Allow copying for backup or archival purpose
- Allow no cost copy at disaster recovery site
- Restricted on Use: (see note below)
  - Restricted on the processing of data by or for user’s subsidiaries and affiliates
  - Restricted on processing of third party data (or use in service bureau)
  - Restricted on network use
  - Restricted on site and equipment limitations
  - Restricted on number of users (e.g., cannot exceed # of users)

### Terms and Conditions that may need to be negotiated:

- Does the license prohibit use of the software outside of the Government?
  - If yes, this needs to be deleted/modified if other Government contractors need access to the software (as GFP) to fulfill obligations of their own contracts.
- Does license state that the software is Year 2000 compliant or include a Year 2000 warranty?
  - If no, must ensure it is compliant per FAR 39 or include a Y2K warranty.
- Does the license state that it provides no warranties or guarantees of any kind?
  - If yes, need to determine whether additional warranty would be in the best interest of the Government.
- Does the license warrant that the software does not contain any code (e.g., virus) that will disable the software, and if such code exists, that Licensor agrees to indemnify the licensee (user) for all damages suffered as a result of such code?
  - If no, need to negotiate for such warranty.
- Does the license allow access to source code?
  - If no, negotiate for access if software will be modified or customized for the Government’s needs or if the Government intends to maintain the software itself.
- Does the license require Licensor to deposit source code in escrow account?
  - If no and source code is needed, consider negotiating for this provision, and state what “release conditions” are.
- Does the license allow the Government to hold the rights to customized code and to the data that the software manipulates?
  - If no, negotiate for the rights if the Government (customer) requires them.
- Does the license authorize us to copy user manuals for internal purposes?
  - If no, negotiate for authorization if multiple copies must be made for our internal use or ensure that the vendor supplies adequate number of copies. May also negotiate for updated manuals at periodic intervals, e.g., with each major update.
- Does the license state that licensee modifications to the software void all warranties?
  - If yes, ensure that the vendor still warrants the unmodified portions.
- Does the license include clauses that prohibit needed uses of software, restrict the use of output from the software, or inappropriately burden the operation of the computer facilities?
  - If yes, need to negotiate better terms and conditions.
- Is the dispute clause in the license consistent with FAR 52.233-1, Disputes Clause?
  - If no, then need to modify license to be consistent with FAR.
- Does the default clause in the license allow for the Government to terminate for convenience or for cause, consistent with FAR 52.212-4(l) or FAR 52.212-4(m)?
  - If no, then need to modify license to be consistent with FAR Part 12 (not FAR Part 49).
<table>
<thead>
<tr>
<th>1. REQUISITION NUMBER</th>
<th>PAGE 1 OF 7</th>
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<tr>
<th>2. CONTRACT NO.</th>
<th>3. AWARD/EFFECTIVE DATE</th>
<th>4. ORDER NUMBER</th>
<th>5. SOLICITATION NO.</th>
<th>6. SOLICITATION ISSUE DATE</th>
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<tr>
<th>7. FOR SOLICITATION INFORMATION</th>
<th>a. NAME</th>
<th>b. TELEPHONE NUMBER</th>
<th>C. (No collect calls)</th>
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<th>8. OFFER DUE DATE/LOCAL TIME</th>
<th>9. ISSUED BY:</th>
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<td>CODE</td>
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10. THIS ACQUISITION IS
- UNRESTRICTED
- SETASIDE:
  - 100 % FOR SMALL BUSINESS
  - HUBZONE SMALL BUSINESS
  - 8(A)

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<th>11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED</th>
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<td>O SEE SCHEDULE</td>
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12. DISCOUNT TERMS
- 13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700)
- 13b. RATING

14. METHOD OF SOLICITATION
- RFQ
- IFB
- RFP

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<tr>
<th>15. DELIVER TO CODE</th>
<th>16. ADMINISTERED BY CODE</th>
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See #9 above

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<tr>
<th>17a. CONTRACTOR/ CODE</th>
<th>18a. PAYMENT WILL BE MADE BY CODE</th>
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<tr>
<td>OFFEROR FACILITY CODE</td>
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Department of Veterans Affairs
FMS
P.O. Box 149971
Austin, TX 78714-8971

TELEPHONE NO: 703.246-0392

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<tr>
<th>0 17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER</th>
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<tbody>
<tr>
<td>18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK UNLESS BLOCK BELOW IS CHECKED</td>
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27 52 23 - 71
25. ACCOUNTING AND APPROPRIATION DATA

26. TOTAL AWARD AMOUNT
(For Govt. Use Only)

27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4. DNA
27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4, 52.212-3, 52.212-5 ARE ATTACHED. ADDENDA

27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-14, 52.227-16, and 52.227-19. ADDENDA

28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN __1__ COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED HEREIN.

29. AWARD OF CONTRACT: REF. ___________ OFFER DATED ___________. YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS:

30A. SIGNATURE OF OFFEROR/CONTRACTOR

30b. NAME AND TITLE OF SIGNER (Type or Print)

30c. DATE SIGNED

31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER)

31b. NAME OF CONTRACTING OFFICER (Type or Print)

31c. DATE SIGNED

Contracting Officer

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION IS NOT USABLE

COMPUTER-GENERATED
STANDARD FORM 1449
(REV. 4/2002)
PREScribed By GSA
- FAR (48CFR) 53.212

19. ITEM NO.

20. SCHEDULE OF SUPPLIES/SERVICES

21. QUANTITY

22. UNIT

23. UNIT PRICE

24. AMOUNT
This Contract is Firm Fixed Price (FFP). The Contractor is required to provide the software, software license, and software maintenance services for the computer software identified below. Distribution of maintenance copies shall be accomplished by using an appropriate magnetic, electronic or printed media. Software maintenance includes periodic updates, enhancements and corrections to the software, and reasonable technical support, all of which are customarily provided by the Contractor to its customers.

The name of the software is: **Word 2008**
License Type: **Perpetual or Term????**
Software Manufacturer: **Microsoft**

**Governing Law.** Federal law and regulations, including the Federal Acquisition Regulations (“FAR”), shall govern this Contract or Order (Contract/Order). Commercial license agreements may be made a part of this Contract/Order but only if both parties expressly make them an addendum. If the commercial license agreement is not made an addendum, it shall not apply, govern, be a part of or have any effect whatsoever on this Contract/Order; this includes, but is not limited to, any agreement embedded in the computer software (clickwrap) or any agreement that is otherwise delivered with or provided to the Government with the commercial computer software or documentation (shrinkwrap), or any other license agreement otherwise referred to in any document. If a commercial license agreement is made an addendum, only those provisions addressing data rights regarding the Government’s use, duplication and disclosure of data (e.g., restricted computer software) are included and made a part of this Contract/Order, and only to the extent that those provisions are not duplicative or inconsistent with Federal law, Federal regulation or the incorporated FAR clauses; those provisions in the commercial license agreement that do not address data rights regarding the Government’s use, duplication and disclosure of data shall not be included or made a part of the Contract/Order. Federal law and regulation, including without limitation, the Contract Disputes Act (41 U.S.C. §601-613), the Anti-Deficiency Act (31 U.S.C. §1341 et seq.), the Competition in Contracting Act (41 U.S.C. §251, et seq), the Prompt Payment Act (31 U.S.C. §3901, et seq.) and FAR clauses 52.212-4, 52.227-14, 52.227-19 shall supersede, control and render ineffective any inconsistent, conflicting or duplicative provision in any commercial license agreement. In the event of conflict between this clause and any provision in the Contract/Order or the commercial license agreement or elsewhere, the terms of this clause shall prevail. Claims of patent or copyright infringement brought against the Government as a party shall be defended by the U.S. Department of Justice (DOJ). 28 U.S.C. § 516. At the discretion of DOJ, the Contractor may be allowed reasonable participation in the defense of the litigation. Any additional changes to the Contract/Order must be made by contract modification (Standard Form 30). Nothing in this Contract/Order or any commercial license agreement shall be construed as a waiver of sovereign
Microsoft Word 2008 Software License, Part No. 9891-7069.
Software may be installed on four separate personal computers and be used by any VA employee or support service contractor. Licenses are perpetual.

<table>
<thead>
<tr>
<th>No.</th>
<th>Description</th>
<th>Quantity</th>
<th>Price (EA)</th>
<th>Subtotal</th>
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<tr>
<td>1</td>
<td>12 months of Standard Microsoft Word Software Maintenance and Technical Support Services for the software being acquired under CLIN 1; Part No. 9891-7069.</td>
<td>4</td>
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Total $50,000.00

32a. QUANTITY IN COLUMN 21 HAS BEEN RECEIVED, INSPECTED, ACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS NOTED:

32b. SIGNATURE OF AUTHORIZED GOVT. REPRESENTATIVE
32c. DATE
32d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE
32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE
32f. TELEPHONE NO. OF AUTHORIZED GOVERNMENT REPRESENTATIVE
32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE

A.1 Federal Acquisition Regulation (FAR) Incorporated by Reference. The Contractor agrees to comply with the following FAR clauses, which the Contracting Officer has indicated as being incorporated in this Contract/Order by reference, to implement provisions of law or executive orders applicable to acquisitions of this nature, to implement department policy or to clarify the Government’s requirement. Copies of clauses in full text will be provided on request. FAR Clauses can be viewed at http://www.arnet.gov/far/.
A.2 Contracting Officer’s Authority. The Contracting Officer is the only person authorized to make or approve any changes in any of the requirements of this Contract, and notwithstanding any provisions contained elsewhere in this Contract/Order, the said authority remains solely within the Contracting Officer. In the event the Contractor makes any changes at the direction of any person other than the Contracting Officer, the changes will be considered to have been made without authority and no adjustment will be made in the contract price to cover any increase in costs incurred as a result thereof.

A.3 VAAR 852.270-1 Representatives of Contracting Officers (APR 1984). The Contracting Officer reserves the right to designate representatives to act for him/her in furnishing technical guidance and advice or generally supervise the work to be performed under this Contract/Order. Such designation will be in writing and will define the scope and limitations of the designee’s authority. A copy of the designation shall be furnished the Contractor.

A.4 VAAR 852.270-4 Commercial Advertising (NOV 1984). The Contractor will not advertise the award of this Contract/Order in his/her commercial advertising in such a manner as to state or imply that the Department of Veterans Affairs endorses a product, project or commercial line of endeavor.

A.5 VAAR 852.237-70 Contractor Responsibilities (APR 1984) The Contractor shall obtain all necessary licenses and/or permits required to perform this work. He/she shall take all reasonable precautions necessary to protect persons and property from injury or damage during the performance of the Contract/Order. He/she shall be responsible for any injury to himself/herself, his/her employees, as well as for any damage to personal or public property that occurs during the performance of the Contract/Order that is caused by his/her employees fault or negligence, and shall maintain personal liability and property damage insurance having coverage for a limit as required by the laws of the state where services are performed. Further, it is agreed that any negligence of the Government, its officers, agents, servants and employees, shall not be the responsibility of the Contractor hereunder with the regard to any claims, loss, damage, injury, and liability resulting there from.

A.6 Indemnification. The Contractor shall save and hold harmless and indemnify the Government against any and all liability claims, and cost of whatsoever kind and nature for injury to or death of any person or persons and for loss or damage to any Contractor property or property owned by a third party occurring in connection with or in any way incident to or arising out of the occupancy, use service, operation, or performance of work under the terms of the Contract/Order, resulting in whole or in part from the acts or omissions of the Contractor, any subcontractor, or any employee, agent, or representative of the Contractor or subcontractor.

A.7 Government’s Liability. The Government shall not be liable for any injury to the Contractor's personnel or damage to the Contractor's property unless such injury or damage is due to negligence on the part of the
Government and is recoverable under the Federal Torts Claims Act, or pursuant to other Federal statutory authority.

A.10 **Uniform Computer Information Transaction Act (UCITA).** UCITA is not applicable to the Contract/Order.

A.11 **Software License and Software Maintenance Subscription and Technical Support.**

(1) Definitions.

(a) Licensee. The term “licensee” shall mean the U.S. Department of Veterans Affairs (“VA”) and is synonymous with “Government.”

(b) Licensor. The term “licensor” shall mean the software manufacturer of the computer software being acquired. The term “Contractor” is the company identified in Block 17a on the SF1449. If the Contractor is a reseller and not the Licensor, the Contractor remains responsible for performance under this Contract.

(c) Software. The term “software” shall mean the licensed computer software product(s) cited in the Schedule of Supplies (Page 2).

(d) Maintenance. The term “maintenance” is the process of enhancing and optimizing software, as well as remedying defects. It shall include all new fixes, patches, releases, updates, versions and upgrades, as further defined below.

(e) Technical Support. The term “technical support” refers to the range of services providing assistance for the software via the telephone, email, a website or otherwise.

(f) Release or Update. The term “release” or “update” are terms that refer to a revision of software that contains defect corrections, minor enhancements or improvements of the software’s functionality. This is usually designated by a change in the number to the right of the decimal point (e.g., from Version 5.3 to 5.4). An example of an update is the addition of new hardware.

(g) Version or Upgrade. The term “version” or “upgrade” are terms that refer to a revision of software that contains new or improved functionality. This is usually designated by a change in the number to the left of the decimal point (e.g., from Version 5.4 to 6).

(2) License. Grant of License and Term.

(a) See also Addendum B.

(b) Unless otherwise stated in the Schedule of Supplies/Services, the software license provided to the Government is a perpetual, nonexclusive license to use the software.

(c) The license authorizes the Government to use the software in processing data for other federal agencies.

(d) If the licensed software requires a password (or license key) to be operational, it shall be delivered with the software media and have no expiration date.

(e) If the Government decides to outsource or contract its services, the Government may allow the outsourcer to use the licensed software solely to provide the services on its behalf. The outsourcer shall be bound by the provisions of this Contract relating to the use of the software.
(f) If the software is for use in a networked environment, as may be reflected by the number of servers or users described in the Contract/Order, the license grant provided by the Contractor includes the Government’s use of the software in such environment.

(g) Any dispute regarding the license grant or usage limitations shall be resolved in accordance with the Disputes Clause incorporated in FAR 52.212-4(d).

(h) If the Government purchases additional licenses, the terms and conditions for those additional licenses (including technical support and upgrade subscription) shall be the same as agreed to in this Contract/Order, unless negotiated otherwise by mutual agreement of the parties.

(i) The licensed software contains critical product functionality that meets the minimum needs of the Government and is the basis for the Government’s procurement of the software; consequently, the Contractor agrees that the Government has the right to successor products at no additional cost when functionality is later unbundled from the product licensed herein and bundled into a new or different product, provided the Government is current on maintenance.

(j) If the Contractor is a reseller for the computer software being acquired under this Contract/Order, it is permissible for the actual software manufacturer (Licensor) to deliver the software directly to the Government.

(k) All limitations of software usage are expressly stated in the SF 1449 and Addendum A and Addendum B.

(3) Software Maintenance Subscription and Technical Support.

(a) See also Addendum B.

(b) Software maintenance and technical support are included at the agreed upon price. However, if additional charges are assessed during the maintenance and technical support period as a result of negotiated changes in the license (e.g., CPU upgrades), the fee shall be by mutual agreement of the parties and any dispute thereof shall be resolved in accordance with the Disputes Clause incorporated herein at FAR 52.212-4(g).

(c) If the Government desires to continue software maintenance and support beyond the period identified in this Contract/Order, the Government will issue a separate contract or order to renew annual maintenance and technical support. Conversely, if an order or contract to renew software maintenance and technical support is not received, no assumption by the Contractor shall be made that it has been renewed. It shall not be automatically renewed.

(d) Unless otherwise agreed, for any new additional software that may be licensed, the Contractor shall provide for software maintenance and technical support for the first year of the license at no additional cost.

(e) Unless otherwise agreed, the Contractor shall provide VA with software maintenance, which includes periodic updates, upgrades, enhancements and corrections to the software, and reasonable technical support, all of which are customarily provided by the Contractor to its customers so as to cause the software to perform according to its specifications, documentation or demonstrated claims.
Any telephone support provided by Contractor shall be at no additional cost.

All technical support services will be provided in a timely manner in accordance with the Contractor's customary practice. However, prolonged delay in resolving software problems will be noted in the Government's various past performance records on the Contractor (e.g., www.ppirs.gov).

If the Government allows the maintenance and/or technical support to lapse and subsequently wishes to reinstate maintenance and technical support, any reinstatement fee charged shall not exceed the amounts that would have been charged if the Government had not allowed it to lapse.

A.12 Disabling Software Code. The Government requires delivery of computer software that does not contain any code that will, upon the occurrence or the nonoccurrence of any event, disable the software. Such code includes but is not limited to a computer virus, restrictive key, node lock, time-out or other function, whether implemented by electronic, mechanical, or other means, which limits or hinders the use or access to any computer software based on residency on a specific hardware configuration, frequency of duration of use, or other limiting criteria. If any such code is present, the Contractor agrees to indemnify the Government for all damages suffered as a result of a disabling caused by such code, and the Contractor agrees to remove such code upon the Government's request at no extra cost to the Government. Inability of the Contractor to remove the disabling software code will be considered an inexcusable delay and a material breach of contract, and the Government may exercise its right to terminate for cause. In addition, the Government is permitted to remove the code as it deems appropriate and charge the Contractor for consideration for the time and effort in removing the code.

A.13 Disaster Recovery Clause. Government hereby certifies to Contractor that it has a bona fide disaster plan with respect to the computer software programs used in its operations. The Contract/Order authorizes the Government's operation to maintain a second copy of software on tape for use at loading at sites that are not live (e.g. subscription-based disaster recovery services) for the sole purpose of duplicating or mirroring the software environment of the "primary" licenses at the designated licensed site and as described herein. Additionally, use of the software at the contingency sites must not include general access or any processing for program development or production. Contractor shall permit operation and testing of all licensed programs at the contingency sites as designated by the Government without prior approval and at no additional cost to the Government solely for the purpose of maintaining or implementing disaster recovery readiness including continuity of business operations. CPU’s, MIPS or MSU’s at these contingency sites are excluded from the total CPU’s, MIPS or MSU’s count included elsewhere in the Contract/Order and are not separately billable. Activation of operations at a contingency site shall be at Government's discretion. Government is authorized to install all software at the contingency sites for testing, problem resolution purposes, and to ensure there will be no operational delays in association with transition of workload from the designated licensed site to the contingency sites. Use of the software at the contingency sites in the event of a disaster shall continue until such time as normal processing can be resumed at the "primary" site regardless of the duration required. Nothing in the Contract/Order diminishes the Government's rights in accordance with the data rights clause(s). Any license keys, codes, or passwords required by the Contractor.
in order to use the software at the contingency sites shall be provided to the Government within 10 days of the Government’s request.

A.14 NOTICE OF THE FEDERAL ACCESSIBILITY LAW AFFECTING ALL ELECTRONIC AND INFORMATION TECHNOLOGY PROCUREMENTS (SECTION 508)

On August 7, 1998, Section 508 of the Rehabilitation Act of 1973 was amended to require that when Federal departments or agencies develop, procure, maintain, or use Electronic and Information Technology, that they shall ensure it allows Federal employees with disabilities to have access to and use of information and data that is comparable to the access to and use of information and data by other Federal employees.

Section 508 required the Architectural and Transportation Barriers Compliance Board (Access Board) to publish standards setting forth a definition of electronic and information technology and the technical and functional criteria for such technology to comply with Section 508. These standards have been developed and published with an effective date of December 21, 2000. Federal departments and agencies must develop all Electronic and Information Technology requirements to comply with the standards found in 36 CFR 1194. (Fill in Section Number and Title)

ADDENDUM B – STATEMENT OF WORK FOR CONTRACT #_____________________________ or ORDER#________________

B.1 License. BROADLY DESCRIBE COMPUTING ENVIRONMENT AND HOW VA INTENDS TO USE THE SOFTWARE, HOW ITS LICENSED, WHAT THE SOFTWARE IS EXPECTED TO DO, ETC. TO GET YOU STARTED: The Department of Veterans Affairs (VA) has a need for the computer software identified on the Schedule of Supplies/Services (page 2) (software media and license) and software support services. The software will be installed onto multiple servers at the ITAC in Austin Texas for support/training/staging of the _____________________ Project. These are processor-based licenses that allow for unlimited users utilizing the processor(s). Contractor shall grant the Government the necessary license to accommodate this need. VA may move the software to any other location or hardware at any time.

B.2 Maintenance. The Contractor will provide software maintenance services, which includes periodic updates, enhancements and corrections to the software, and reasonable technical support, all of which are customarily provided by the Contractor to its customers so as to cause the software to perform according to its specifications, documentation or demonstrated claims. Add detailed, specific maintenance and support information here. The Contractor will distribute maintenance updates or releases by using an appropriate magnetic, electronic, or printed media to the address in Block 15 of page one, but to the attention of Joe Smith. Alternatively, the Contractor may offer access to maintenance copies through its website. All maintenance services will be provided in a timely manner in accordance with the Contractor’s customary practice. However, prolonged delay in resolving software problems will be noted in the Government’s various past performance records on the Contractor (e.g., www.ppirs.gov).

2. MOU
Date: (Current Date)

From: Department of Veterans Affairs
Office of Telecommunications (005OP)
Spectrum Management (005OP2H3 – Room 047)
Telecommunications Voice Engineering (005OP2H2)
810 Vermont Avenue, NW
Washington, DC 20420

Subj: Memorandum of Understanding (MOU) for Non-VA Licensed Wireless Operations

To: Facility Director (00)
(Address)
(Address)

1. The following circumstances are the minimum necessary for conditional use of Wireless Equipment / System(s) in VA Owned or Leased Facilities (here-in after referred to as ‘the Facility’). VA Headquarters OI&T’s (005) Spectrum Management (005OP2H3), Telecommunications Voice Engineering, Special Communications (TVE - 005OP2H2) and Office of Cyber Security (OCIS – 0050P2) are the responsible entities insuring conformity of each requirement:

   a. Each item of equipment or system whose Radio Frequency (RF) equipment is listed under Consolidated Federal Regulations (CFR), Title 47 – Federal Communications Commission (FCC), Part 15, Chapter 7, *Use of Non Licensed Devices* must be installed and operated in a manner consistent with Part 15’s “Safety of Life” restrictions. This information is re-emphasized in CFR, Title 15 – Department of Commerce, Under the Information Technology Management Reform Act (Public Law 104-106), National Telecommunications Information Administration (NTIA) *Manual of Regulations and Procedures for Federal Radio Frequency Management* (aka ‘The Red Book’).

   b. FCC Part 15 listed RF devices *shall not* be installed or used in areas where “Safety of Life” functions / operations are accomplished or where a ‘Code Blue’ enunciation may occur. A list of the minimum areas affected by this statement is provided as Attachment One.

   c. If external or internal interference is detected and cannot be corrected, the FCC Part 15 Listed RF Equipment affected must be turned off until corrections and/or substitutions can be made. Contact VA’s Office of Spectrum Management (OSM – 005OP2H3), 202 461-5301 for specific conditional approval(s) concerning this issue.
3. Risk Assessment

Department of Veterans Affairs

Memorandum

Date: (current date)

From: Director (XXXXX)

Address

Address

Address


To: Department of Veterans Affairs
Office of Telecommunications (005OP)
Spectrum Management (005OP2H3)
Telecommunications Voice Engineering (005OP2H2)
1335 East West Highway, 3rd Floor
Silver Spring, Maryland 20420

1. We have received the subject VACO MOU (signed copy attached), and are pleased to provide the following information and comments for your review that includes our risks and risk-mitigation factors that prompted our Facility’s decision:

   a. RISK ASSESSMENT AND MITIGATION:

      (1) Background:

         (a) (name) VAMC (here-in-after referred to as “the Facility”) has used (OEM Mdl Nr©) for over 10 years to allow nurses in the telemetry studio to communicate with nurses at the patients’ bedside. This communication medium is a vital patient safety tool that allows for rapid response to the development of a potentially fatal arrhythmia such as ventricular tachycardia. The only information the telemetry technician states on the phone is “bed 109-2 Smith has an alarm for XXXXX.” Last four is never communicated. In terms of the pager we have limited the information on the pager to sector, bed number and last name. We must include the last name as occasionally the patients are moved without the knowledge of the telemetry technician, if we were to have a patient mix up the page must contain the last name for safety reasons. Facility Management Services (FMS) has restricted paging access to the telemetry system only. Because pager access is restricted, only an administrator from Technology and Information Management (TIM) or FMS can troubleshoot a pager malfunction.

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(b) Because the phones are used 24X7 and have exceeded their life expectancy, many of them have begun to fail which creates a need to purchase newer models that will continue to insure system integrity.

(c) Our Facility has been prevented from purchasing replacement phones because VACO now has updated security and Information Technology (IT) connection controls along with continuing FCC Part 15 restrictions (described in the attached MOU) on devices of which these wireless phones are but one example. These updated security and connection controls are in place to address risks related life safety, information security, personal privacy and IT system integrity. The FCC restrictions continue to warn against the use of “non-regulated radio / wireless based equipment in safety of life locations and functions.” Of note, these controls are intended to prevent use of these devices in areas especially where a code-blue annunciation might occur, yet our devices have been used in such areas for over 10 years and so far has not prevented a code-blue annunciation from happening.

(d) Because the Facility does not have a near-term alternative to the current wireless phones, it now faces a set of competing risks. On the one hand are the risks of privacy, connection and interference or security breach(s) that are behind the controls in place for these devices. On the other hand are risks to patient safety if the current phones were to fail and telemetry nurses would lose the ability to rapidly communicate with nurses at the bedside. Our Facility does have a Life Safety approved Nurses Call / Code Blue hardwired system that is installed in those affected areas as the primary Code Blue Enunciation media.

(2) SECURITY:

(a) NEC provides a proprietary scrambling algorithm that is applied to handset registration / authentication and all communications. Every time a (OEM Mdl Nr©) user enters a designated area within the systems’ coverage; an automatic user authentication process is performed to confirm the device is authorized for service on the system. This information is scrambled using a proprietary coding scheme to prevent duplication. All voice conversations are also scrambled to enhance security.

(b) The (OEM Mdl Nr©) has several built-in security features in each of the wireless handsets are administered through the Facility’s Telephone Private Branch Exchange (PBX) administration tool; therefore, the PBX Administrator has full control over the (OEM Mdl Nr©) wireless phones, if one gets lost or stolen it can be disabled immediately. Because of this feature you cannot purchase a similar wireless phone and have it work on our network. These phones have a 50 ft radius from the Zone radio frequency (RF) transceiver; they can only be used within the hospital as there is no handoff via other cellular networks.

(c) These items are not NIST FIPS compliant; but based on the aforementioned facts, we feel patient / staff privacy and HIPAA instructions have been and will continue to be met.
(d) Our Facility will work with (OEM) and VACO’s Office of Cyber Security (Name and Phone Nr) to secure the appropriate NIST FIPS certifications will allow VA to issue a Official Approvals from the onset in the IT equipment / system procurement process.

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(3) RADIO FREQUENCY (RF) INTERFERENCE:

(a) (OEM) engineers provided us with extensive information on the potential for RF along with electromagnetic (EM) interference to medical equipment within our Facility from the (OEM System) Wireless radio transceivers.

1) Field Experience: Since introduction of the (OEM System) Wireless product in 1996, NEC has installed this system at many health care institutions across the spectrum of medical departments. In all this time there have been zero reports of either suspected or actual RF and EM interference. This includes the experience using these devices at Portland VAMC and our continued testing documentation is available for review if requested.

2) Potential interference called Near Field Coupling: In these cases, an EM field emanating from one device may cause another device within its field area to malfunction. Typically the distances for these fields are less than six (6) inches. In attempts to mitigate these sources of interference, standards have been put in place, namely IEC 60601. This standard calls for devices susceptible to interference to provide shielding against fields of up to three (3) Volts per Meter. In contrast, the (OEM System) wireless products are classified under the FCC Part 15 rules as Class B unlicensed devices, and as such must meet very tight restrictions regarding field emissions of a maximum of from 100 to 500 micro (µ) Volts per Meter across the band of RFs from 30 Hz to 18 ghz. Thus, any medical device even marginally meeting the IEC Standard has not had problems with any near field emissions.

3) Potential phenomenon known as Far Field Induced RFI: should be considered when studying RF and EM interference sources. In this case, a part of the device subject to interference (e.g., a wire, probe, or the casing itself) can inadvertently act as a receiving antenna for a signal transmitted from another device within close proximity (within 6 to 18 inches, depending on the source power levels). To realize this type of interference, the source transmitter power must be fairly strong to conduct through the inefficient nature of the unintended antenna of the receiving device, and the material acting as the antenna must be of a shape and length that matches or is a near multiple of the wavelength of the transmitted RF signal. Finally, this unintentional antenna must not have the typical shielding between it and the subject device’s electronics, which if present would prevent such a received signal from causing interference. In the case of the (OEM System) Wireless transmission, which operates between 1,920 mHz and 1,930 mHz, a probe or such piece of any medical device measuring at about six (6) inches would match the wavelength of the RF carrier, and if not properly shielded from
the units electronics may indeed conduct the RF energy within. However, even in this case, one must consider the power level at the so-called antenna receiving the signal. The average output of the (OEM Mdl Nr®) handset is approximately 10 mili (m) Watts when in use. This very low power, even further reduced by the distance between any handset in use and the subject receiving equipment, considered along with the high loss of the “antenna”, results in a very low probability of actual interference. These facts, along with the standard procedures of your engineering department’s efforts to check the medical equipment for such shielding and filtering defects, should mitigate this potential source.

4) Potential interference between intentional radiators operating in the RF band. Known as either in-band or out-of-band interference, these are cases where a transmitter broadcasts a signal of significant power at the other device’s receiver to either overload the receiving radio or mix with the subject’s transmitted signal to cause an interfered signal to be received. In-band interference in the Unlicensed PCS band of which the (OEM System) Wireless system operates is prevented by the FCC rules requiring our equipment to monitor the carrier on which a device intends to transmit on before doing so, so as to sense any current use by another device. If such a signal is received during monitoring, we move to another carrier and try again. This protocol has been demonstrated many times within the FCC labs as well as at many industry trade shows where 5 or more vendors with U-PCS devices have operated in booths close to each other without interference. As for out-of-band interference, because of the extremely low power our devices operate with and the very strict out-of-band emission requirements placed upon the U-PCS devices, and the additional factor of a wide separation in the operating frequencies of our system and the typical radio telemetry equipment used in many hospital environments, such interference is very remote and would require extremely close proximity of the two devices.

5) All of our (OEM Mdl Nr®) are FCC listed and has not interfered with other traffic within the same band. We expect the FCC listed (OEM Mdl Nr®) equipment will perform in the same manner.

(b) Our Facility will work with (OEM) and VACO’s Spectrum Management (005OP2H3) to find a RF band that can be utilized for this operation that will allow VA to issue a formal and Official Radio Use Permit that will negate the “unregulated equipment use” issues.

(4) CONNECTION TO IT/CABLE NETWORKS:

(a) Each item or system that attaches to a VA IT Network (telephone or data) must be Department of Commerce’s National Recognized Testing Laboratory (NRTL) Underwriters Laboratory (UL) 60950-1/2; Information Technology Equipment - Safety listed and bears UL’s mark.
1) Paragraph 1.1.1; Equipment Covered by this Standard specifically identifies these systems / networks as one affected system.

2) Paragraph 1.1.2; Additional Requirements further identifies this requirement for electomedical applications with physical connections to the patient to be met.

(b) This requirement is paramount since the Facility’s Telephone PABX and associated system is listed by the National Fire Protection Association as Critical Service. Additionally, since it carries our Code Blue Radio and Overhead Audio Paging Signals, VA elevates it to Life Safety Service.

(c) Presently the (OEM Mdl Nr©) wireless phones are UL Listed but does not have the aforementioned specific UL certification. Our Facility is working with (The OEM) in this arena to have them meet or exceed this UL requirement. In the meantime we will abide within the confines outlined in the attached MOU for insuring an approved IT Network / System connection is maintained until the appropriate UL certification has been obtained allowing it to be directly connected to our telephone system.

b. The Facility Director after careful review of the attached MOU and consultation with the Facility’s CIO, (OEM) engineers, Biomedical and NFPA Engineers, ISO, HIPAA / Privacy Officer, Clinical Staff and JACHAO Officials has decided this risk-benefit analysis strongly favors purchasing replacement (OEM Mdl Nr) phones.

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2. Please feel free to contact me concerning the contents of this document.

DIRECTOR’s NAME IN CAPS

cc: Office of General Counsel
    Office of Telecommunications (05)
    VA Enterprise Infrastructure Engineering
    Telecommunications Engineering and Design
    Office of Cyber Security

Attachment: VACO MOU

- - - E N D - - -