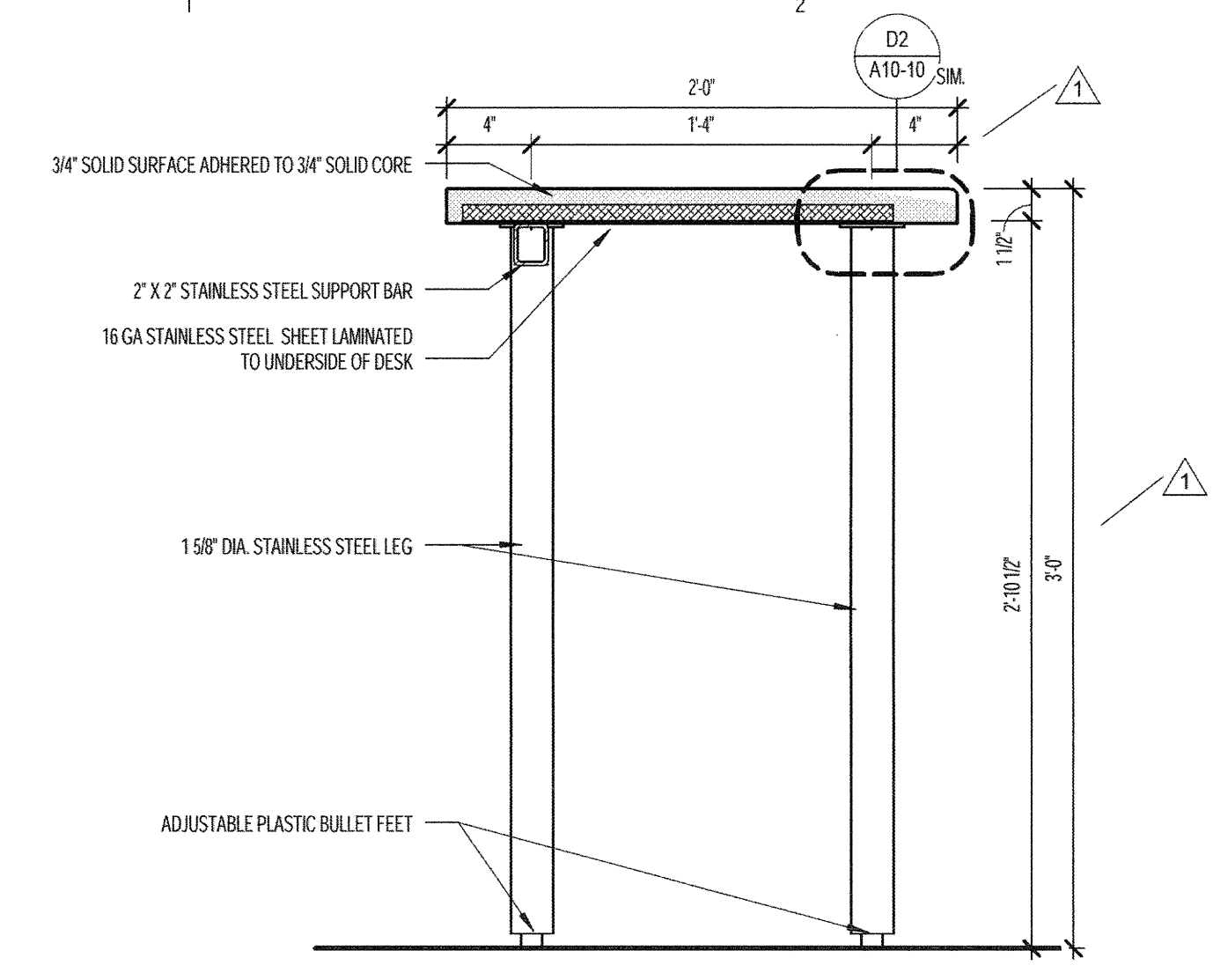
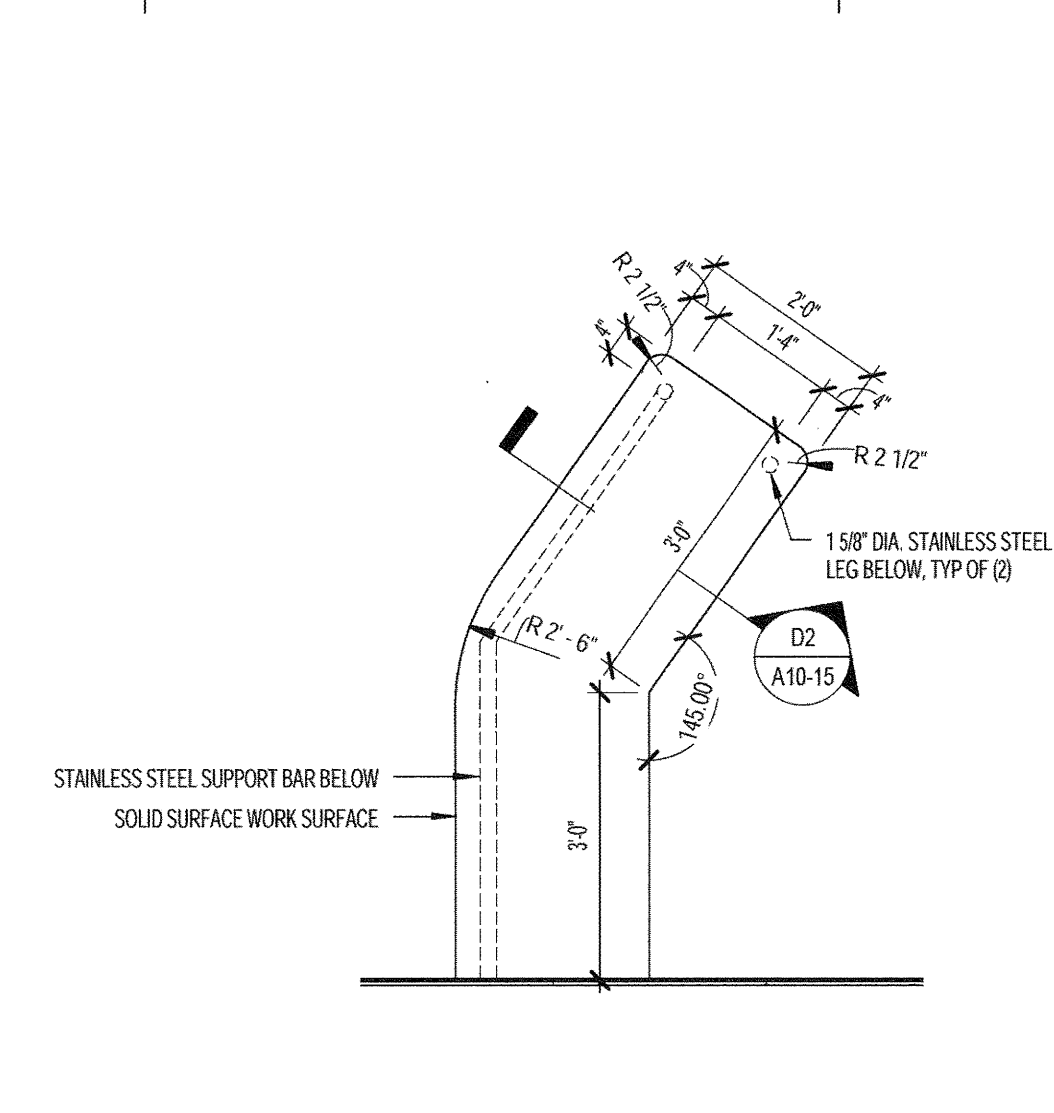


Revisions

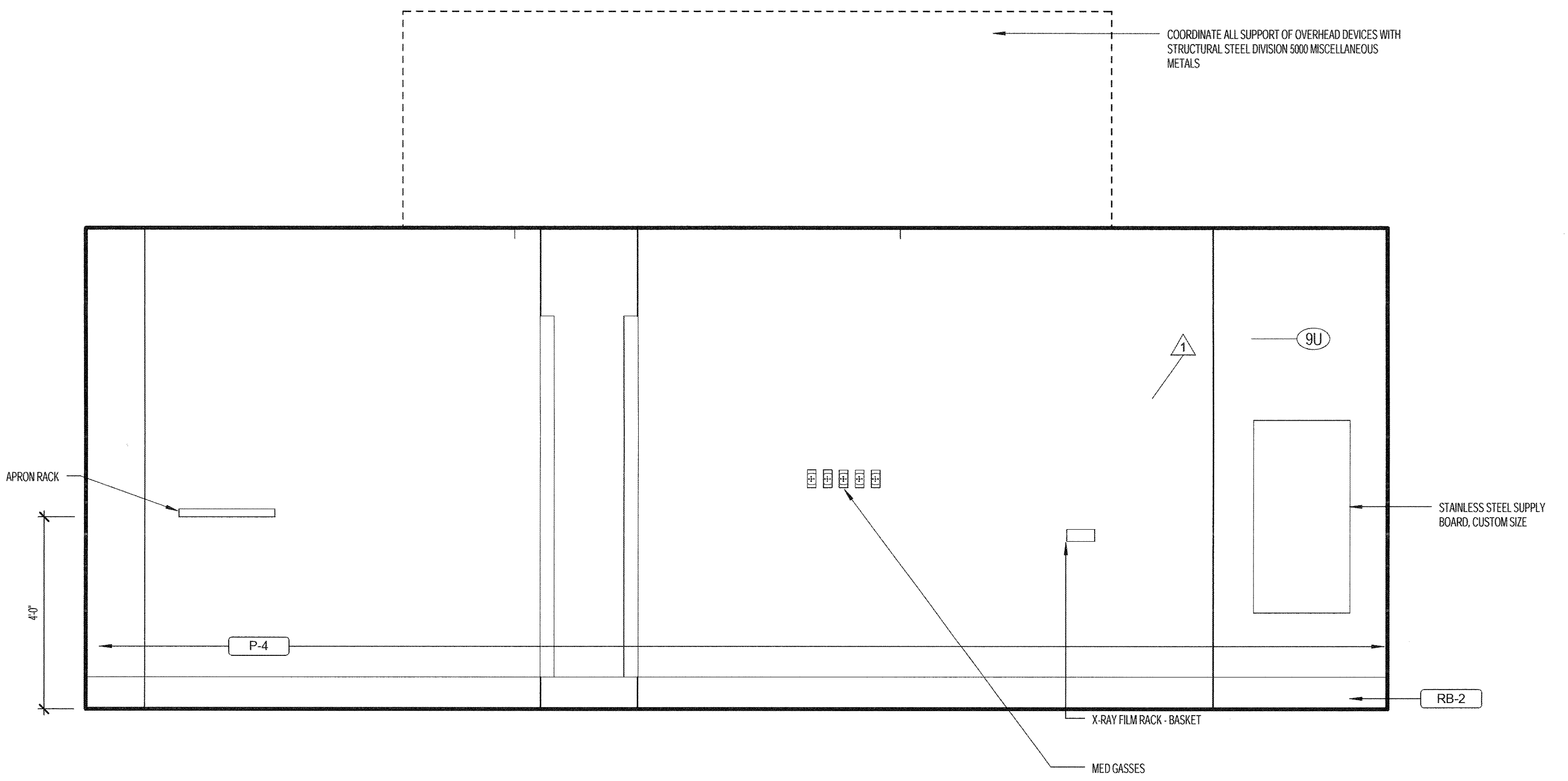
Issued for Permit	02/07/2014
1 Addendum #3	01/17/2014
NO	ISSUE DATE
Sheet Information	
Date	SEPTEMBER 10, 2013
Job #	C140135461 (MMC) 152168.000
Drawn	M PIERCE
Checked	Checker
Approved	Approver
Title	
TYPICAL OR INTERIOR ELEVATIONS	
Sheet	
A10-15	



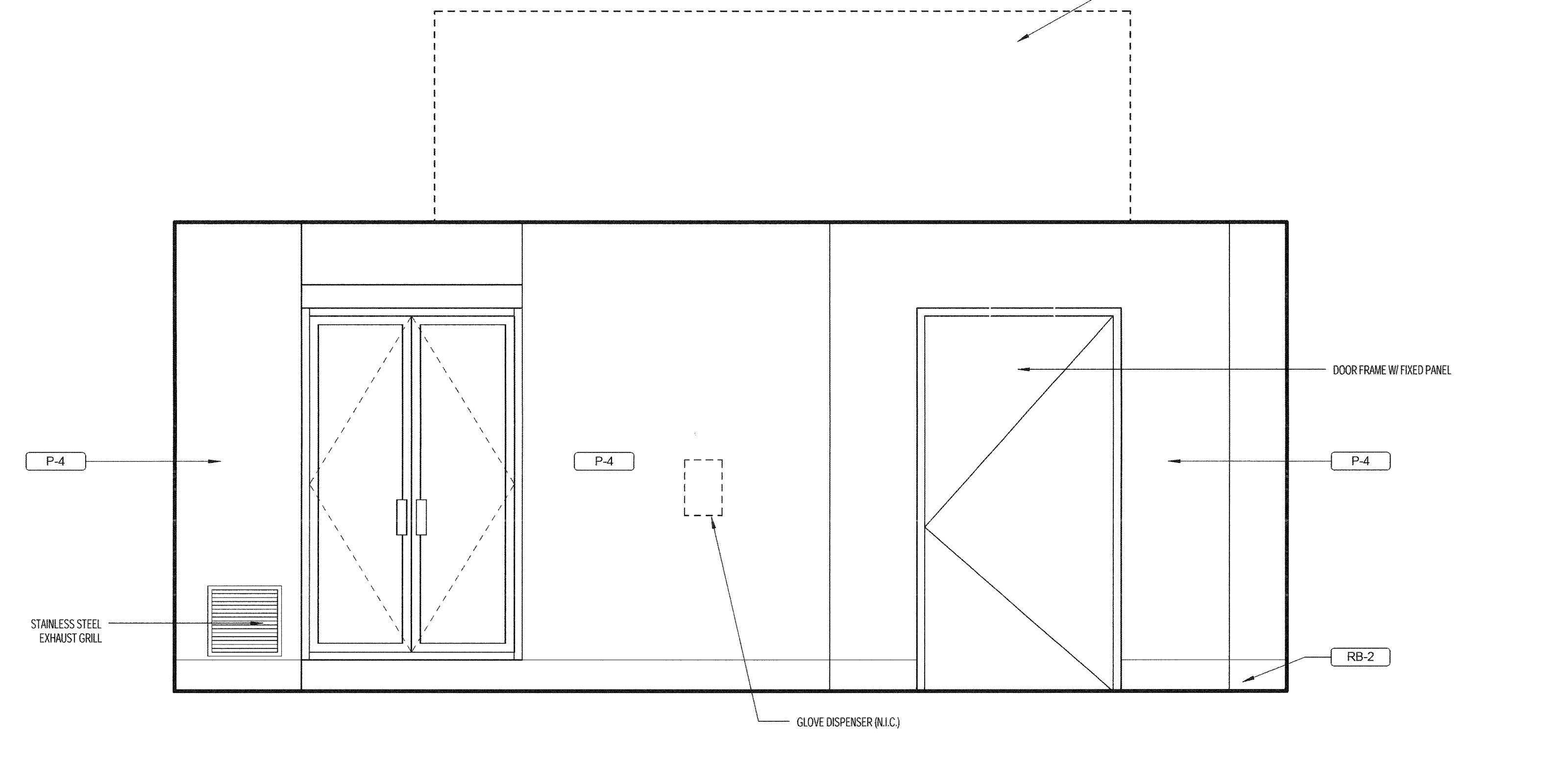
D2 SECTION - CIRCULATING NURSE STATION
1 1/2" = 1'-0"



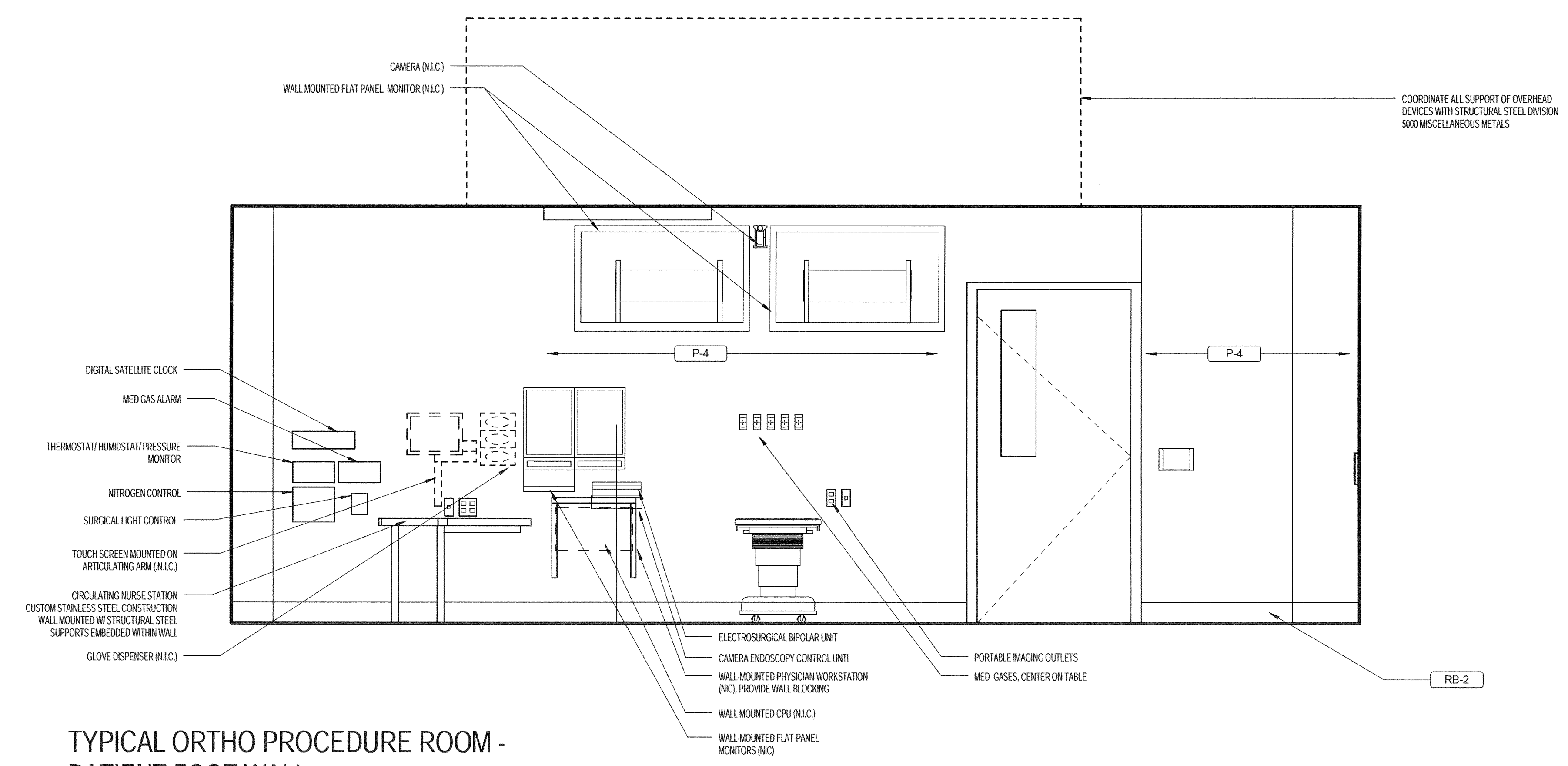
D1 PLAN DETAIL - CIRCULATING NURSE STATION
1/2" = 1'-0"



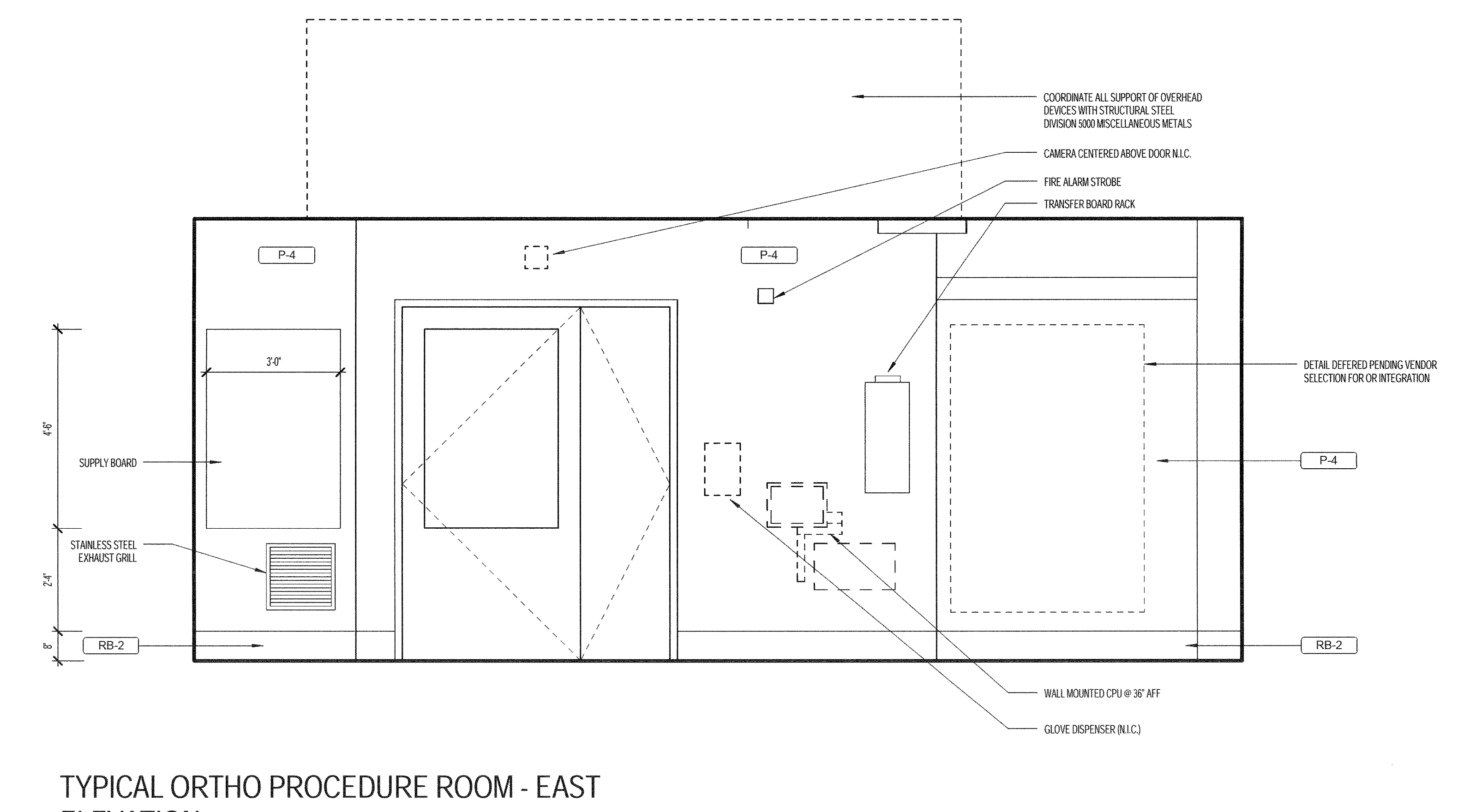
B5 TYPICAL ORTHO PROCEDURE ROOM - PATIENT HEAD WALL
1/2" = 1'-0"



B3 TYPICAL ORTHO PROCEDURE ROOM - WEST ELEVATION
1/2" = 1'-0"



A5 TYPICAL ORTHO PROCEDURE ROOM - PATIENT FOOT WALL
1/2" = 1'-0"



A3 TYPICAL ORTHO PROCEDURE ROOM - EAST ELEVATION
1/2" = 1'-0"