KOLBI PIPE MARKER CO.

PRODUCT SPECIFICATION SHEET

Medical Gas Labels

Product Specifications

Kolbi Medical Labels meet NFPA 99C/CGA C-9 standards. Available in the 16 most commonly requested wordings and color combinations, or fully customizable as required. Labels come in two sizes: ¾" x 2 and 3" x 3" (when needed to fully wrap around pipes).

Medical Gas Label Examples

3" X 3" LABELS

3/4" X 2" LABELS

3" X 3" LABELS

3/4" X 2" LABELS

MEDICAL GAS LABELS ON A ROLL

These images are for approximate representation only.

Style	Pipe Outer Diameter		Length of Color Field		Letter Height	
☐ 3"X3"	1" and less	25.4 mm	3"	76.2 mm	3/8"	9.525mm
☐ 3"X3" (roll of 250)	1" and less	25.4 mm	3"	76.2 mm	3/8"	9.525mm
☐ 3/4"x2" (cards of 10)	1" and less	25.4 mm	2"	50.8 mm	3/8"	9.525mm

☐	CARBON DIOXIDE	☐	CARBON DIOXIDE
☐	HELIUM	☐	INSTRUMENT AIR
☐	NON-MEDICAL AIR	☐	NON-MEDICAL VACUUM
☐	MEDICAL AIR	☐	MEDICAL SURGICAL VACUUM
☐	NITROGEN	☐	NITROUS OXIDE
☐	LABORATORY AIR	☐	LABORATORY VACUUM
☐	OXYGEN	☐	OXYGEN
☐	OXYGEN / CARBON DIOXIDE	☐	WAGD

Physical Properties

Standards Met	ANSI/ASME A13.1-2015 Scheme for Identification of Piping Systems ANSI Z535.1 Safety Color Code, NFPA 99C/CGA C-9
Installation Instructions	Applied to a clean dry surface above 32°F (0°C)
Service Temp	-40°F to 176°F (-40°C to 80°C)
Water Resistance	Good, Product has passed submersion tests
Finish	High Gloss
Material Properties	4 Mil vinyl with pressure sensitive adhesive backing
Adhesive Properties	Aggressive permanent acrylic adhesive Stainless Steel 54 oz/in (594 N/m), Acrylic 56 oz/in (616 N/m) Glass 53 oz/in (599 N/m), Polypropylene 51 oz/in (561 N/m) Expected Shear: 5 hours, Tack gm (740)
Ink Properties	Inks resistant to fading with UV exposure, Semi-Gloss Finish
Storage Stability	2 years stored at 70°F (21°C) and 50% RH
Outdoor Durability	4 to 6 years
Abrasion Resistance	Good
Chemical Resistance	Resistant to Acids, Alkalis and Salts
Equivalent To	Seton Medical Gas Pipe Markers, Brady Medical Gas Pipe Markers, Marking Services Medical Gas Markers, Brimar Medical Gas Markers

Project

DATE _____ / _____ / _____ (MM DD YYYY) JOB _____

CONTRACTOR NAME _____