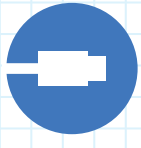


# Interconnect Requirements Checklist

Name: \_\_\_\_\_  
Company Name: \_\_\_\_\_  
Project: \_\_\_\_\_  
Contact Info (email / phone): \_\_\_\_\_



## Connectors

### Electrical

- Number of low voltage (<600V) power connections: \_\_\_\_\_
- High voltage power connections: \_\_\_\_\_
- Data connections: \_\_\_ Analog \_\_\_ Digital \_\_\_  
If digital, frequency: \_\_\_\_\_
- Current: \_\_\_\_\_ Amperes
- Additional load information: \_\_\_\_\_
- Impedance matching (if yes, ohms) \_\_\_\_\_ which circuits? \_\_\_\_\_

### Shielding required through connector?

- Y / N (full or ground pin pass-through)? \_\_\_\_\_

### Usage profile

- Single use disposable (30 mating cycles) Y / N
- Permanent Installation (connected once and only disconnected for installation/service/repair Y / N
- High cycle life (frequent connecting and disconnecting).  
Number of cycles \_\_\_\_\_

### Environment

- Harsh Environment (outdoors, etc.) \_\_\_\_\_ Indoor (office, household, hospital) \_\_\_\_\_ Other \_\_\_\_\_
- Sealed? Y / N. If Sealed:  
• IP 50 (dust) \_\_\_ IP64 (splash)\_\_\_ IP65 Spray\_\_\_ IP66 (high pressure spray) \_\_\_  
• IP 67 (submersible) \_\_\_\_\_

### Regulatory requirements

- UL/CSA \_\_\_ EU/VDE \_\_\_ IEC 60601 (Medical) \_\_\_  
Other \_\_\_\_\_

## Cable

### Shielding required in cable? Y / N data pairs? \_\_\_\_\_

Overall shield \_\_\_\_\_

### Twisted pair(s)? Y / N Details: \_\_\_\_\_

### Shield options

- Spiral (flexible, not full coverage) \_\_\_ Foil (full coverage, less flex) \_\_\_
- Braid (high coverage percentage and flexible; highest cost) \_\_\_

### Durability High flex cycles (specify number of cycles): \_\_\_\_\_

### Jacket requirements Chemical exposure (list): \_\_\_\_\_

### Flexibility is critical Limp cable; no memory Y / N

Sterilization/cleaning Autoclave: \_\_\_ Gamma/Ebeam: \_\_\_ EtO: \_\_\_  
None: \_\_\_ Other: \_\_\_\_\_



## Cable Assembly

### Connector requirements at end "A"

• Gender (contacts M/F) \_\_\_ Part number or description \_\_\_\_\_  
Other details: \_\_\_\_\_

### •Connector requirements at end "B"

• Gender (contacts M/F) \_\_\_ Part number or description \_\_\_\_\_  
Other details: \_\_\_\_\_  
• Length overall (with connectors) \_\_\_\_\_ Color: \_\_\_\_\_  
Jacket material: \_\_\_\_\_