COMPLIANCE CHECKLIST

IP22: Endoscopy Services

The following checklist is intended to be used in the plan review applications for health care facilities submitted to the Massachusetts Department of Public Health. This checklist summarizes and references the applicable requirements from the Licensure Regulations and the 2014 Edition of the FGI Guidelines for Design and Construction of Hospitals and Outpatient Facilities. Applicants must verify compliance of the plans submitted to the Department with all referenced requirements from the Licensure Regulations and FGI Guidelines when completing this Checklist. A separate Checklist must be completed for each nursing unit, hospital or clinic department, or clinical suite.

Other jurisdictions, regulations and codes may have additional requirements which are not included in this checklist, such as:

- NFPA 101 Life Safety Code (2000) and applicable related standards contained in the appendices of the Code
- State Building Code (780 CMR)
- Joint Commission on the Accreditation of Health Care Organizations
- CDC Guidelines for Preventing the Transmission of Mycobacterium Tuberculosis in Health Care Facilities
- USP 797
- Accessibility Guidelines of the Americans with Disabilities Act (ADA)
- Architectural Access Board Regulations (521 CMR)
- Local Authorities having jurisdiction.

Instructions:

1. All requirement lines must be completed according to the following instructions and included in the plan submissions for Self-Certification Process or Part II of the Abbreviated Review Process.
2. This checklist must be completed by the project architect or engineer based on the design actually reflected in the plans at the time of completion of the checklist.
3. Each requirement line (___) of this Checklist must be completed exclusively with one of the following symbols, unless otherwise directed in the checklist. If a functional space is not affected by a renovation project, the symbol "E" may be indicated on the requirement line (___) before the name of the functional space (associated requirements on indented lines below that name, or associated MEP requirements do not have to be completed in this case). If more than one functional space serves a given required function (e.g. patient room or exam room), that clarification should be provided in the Project Narrative, and the requirement lines are understood to only address the functional spaces that are involved in the project.

X = Requirement is met, for new space, for renovated space, or for existing direct support space for an expanded service.

☒ = Check box under section titles or individual requirements lines for optional services or functions that are not included in the project area.

E = Requirement relative to an existing suite or area that has been *licensed* for its designated function, is *not affected* by the construction project and *does not pertain to a required direct support space* for the specific service affected by the project.

W = Waiver requested for specific section of the Regulations or FGI Guidelines, where hardship in meeting requirement can be demonstrated (a Physical Plant Waiver Form must be completed for each waiver request).

4. All room functions marked with "X" must be shown on the plans with the same name labels as in this checklist.
5. Mechanical, electrical & plumbing requirements are only partially mentioned in this checklist. The relevant section of the FGI Guidelines must be used for project compliance with all MEP requirements and for waiver references.
6. Oxygen, vacuum, medical air, and waste anesthesia gas disposal outlets (if required) are identified respectively by the abbreviations "OX", "VAC", "MA", & "WAGD".
7. Requirements referenced with "FI" result from formal interpretations from the FGI Interpretations Task Group.
8. The location requirements including asterisks (*) refer to the definitions of the Glossary in the beginning section of the FGI Guidelines.

Facility Name: _____

DoN Project Number: (if applicable) _____

Facility Address: _____

Satellite Name: (if applicable) _____

Building/Floor Location: _____

Satellite Address: (if applicable) _____

Submission Dates:

Project Description: _____

Initial Date:

Revision Date:

	Architectural Requirements	Building Systems Requirements	
2.2-3.11	**ENDOSCOPY SERVICES**		
2.2-3.11.1.1	___ Provisions made for patient examination, interview, preparation & testing & for obtaining vital signs of patients		
2.2-3.11.1.2			
(1)	Facility Layout:		
(a)	___ procedure room		
(b)	___ instrument processing room		
(c)	___ patient holding/preparation & recovery room or area		
(2)	Circulation & Restricted Access:		
(a)	___ suite designed to facilitate movement of patients & personnel into, through & out of defined areas in suite		
2.2-3.11.2	**ENDOSCOPY PROCEDURE ROOMS**		
2.2-3.11.2.2	Space Requirements:	Ventilation:	
(1)	___ room min. clear floor area 200 sf	___ Min. 6 air changes per hour	Table 7.1
(2)	___ permit min. clearance 3'-6" at each side, head & foot of stretcher/table	___ No recirculating room units	
		Power:	
		___ 8 electrical receptacles	Table 2.1-1
		Nurse Call System:	
		___ Emergency staff assistance station	Table 2.1-2
		Medical Gases:	
		___ 1 OX, 3 VAC	Table 2.1-4
2.1-7.2.3.1(6)	___ Monolithic floor with integral coved 6" high wall base		
2.2-3.11.2.4	___ Provisions made for patient privacy		
2.2-3.11.2.5	___ Handwashing station		
2.2-3.11.2.6	___ Patient toilet room	Ventilation:	
	___ located to be readily accessible* from procedure room	___ Min. 10 air changes per hour	Table 7.1
	___ separate from public use toilet	___ Exhaust	
2.2-3.11.3	**PRE-PROCEDURE & RECOVERY PATIENT CARE AREAS**		
2.2-3.11.3.2	___ Pre-procedure patient care area		
(1)			
(b)	___ located under observation of nursing staff		
(c)	___ at least one pre-procedure patient care station per procedure room		
2.2-3.3.4.2(2)	Space Requirements:		
	___ patient bays*		
	☐check if <u>not</u> included in project		
	___ min. clear floor area 60 sf	Nurse Call System:	
	___ 5'-0" between sides of patient beds/stretchers	___ Patient station	Table 2.1-2
	___ 4'-0" between sides of patient beds/ stretchers & adjacent walls or partitions	___ Emergency staff assistance station	
	___ min. clearance 3'-0" between foot of bed & cubicle curtain		

	Architectural Requirements	Building Systems Requirements	
	___ 8'-0" wide clear aisle independent of foot clearance between patient stations or other fixed objects		
	___ patient cubicles* ☐check if not included in project		
	___ min. clear floor area 80 sf ___ min. clearance 3'-0" between sides & foot of lounge chairs/stretchers & adjacent walls or partitions		
	___ single-bed rooms ☐check if not included in project		
	___ min. clear floor area 100 sf ___ min. clearance 3'-0" between sides & foot of lounge chairs/stretchers & adjacent walls or partitions		
(4)	___ provisions made for patient privacy		
(5)	Handwashing Stations:		
2.1-7.2.2.8(1)	___ handwashing stations in patient care areas located to be visible & unobstructed		
2.1-2.6.5.3	___ handwashing stations that serve multiple patient care stations ☐check if not included in project:		
(1)	___ at least one handwashing station for every 4 patient care stations or fewer & for each major fraction thereof		
(2)	___ evenly distributed ___ provide uniform distance from two patient care stations farthest from handwashing station		
2.2-3.11.2.6	___ Patient toilet room ___ located to be directly accessible* from pre-procedure & recovery patient care areas ___ separate from public use toilet	Ventilation: ___ 10 air changes per hour ___ Exhaust	Table 7.1
2.2-3.11.3.3 (1) (2)	___ Recovery area ___ located under observation of nursing staff ___ at least one patient care station per procedure room	Ventilation: ___ Min. 6 air changes per hour ___ No recirculating room units	Table 7.1
2.2-3.3.4.3(2) (a) (b)	Space Requirements: ___ min. clear floor area 80 sf for each bay or cubicle ___ min. clearance 5'-0" between patient stretchers or beds ___ min. clearance 4'-0" between patient stretchers or beds & adjacent walls or other fixed elements (sides & foot) ___ min. clearance 3'-0" from foot of stretcher or bed to closed cubicle curtain	Power: ___ 8 receptacles convenient to head of each bed ___ Selected receptacles on emergency power Nurse Call System: ___ Emergency staff assistance station ___ Code call station Medical Gases: ___ Portable oxygen & vacuum available	Table 2.1-1 NFPA 99 Table 2.1-2 Table 2.1-4
(4)	___ Provisions made for patient privacy		

	Architectural Requirements	Building Systems Requirements	
(5)	Handwashing Stations:		
2.1-7.2.2.8(1)	___ handwashing stations in patient care areas located to be visible & unobstructed		
2.1-2.6.5.3	___ handwashing stations that serve multiple patient care stations ☐ check if not included in project:		
(1)	___ at least one handwashing station for every 4 patient care stations or fewer & for each major fraction thereof		
(2)	___ evenly distributed ___ provide uniform distance from two patient care stations farthest from handwashing station		
2.2-3.11.4	**INSTRUMENT PROCESSING ROOM**		
2.2-3.11.4.1			
(4)	___ Instrument processing room allows for flow of instruments from decontamination area to clean work area & then to storage in separate location	Ventilation: ___ Min. 10 air changes per hour ___ Exhaust ___ Negative pressure	Table 7.1
(b)	___ Min. clearance 3'-0" between decontamination area & clean work area		
(6)			
(a)	___ Countertops & casework ___ made of materials that are impervious to staining & cleaning chemicals		
(b)	___ backsplashes min. 12 inches high		
2.2-3.11.4.2	___ Decontamination area		
(1)	___ work counter		
(2)	___ handwashing station		
(3)	___ utility sink		
2.2-3.11.4.3	___ Clean work area		
(1)			
(a)	___ countertop with space for equipment		
(b)	___ handwashing station		
(c)	___ storage for supplies		
(3)	___ endoscope storage in instrument processing room ___ storage cabinet with doors ___ cabinet located at least 3'-0" from		
(a)	any sink		
(b)	___ cabinet located for access separate from decontamination area		
(c)	**or** ___ separate endoscope storage closet		
2.1-7.2.3.1(6)	___ Monolithic floor with integral coved 6" high wall		

	Architectural Requirements	Building Systems Requirements	
2.2-3.11.6	**SUPPORT AREAS FOR ENDOSCOPY PROCEDURE SUITE**		
2.2-3.11.6.1	___ Nurse station		
2.2-3.11.6.2	___ Documentation area ___ located in procedure room & pre-procedure & recovery patient care areas		
2.2-3.11.6.6	___ Medication safety zone		
2.1-2.6.6.1 (2)	___ medication preparation room **or** ___ self-contained medication dispensing unit		
(a)	___ located out of circulation paths to minimize distraction & interruption		
(c)	___ work counters		
(d)	___ task lighting		
(e)	___ meet acoustic design criteria per 1.2-5.1		
2.1-2.6.6.2 (1)	___ medication preparation room ☐check if not included in project	Ventilation:	
(a)	___ under visual control of nursing staff	___ Min. 4 air changes per hour	Table 7.1
(b)	___ work counter ___ handwashing station ___ lockable refrigerator ___ locked storage for controlled drugs	Nurse Call System: ___ Duty station	Table 2.1-2
(c)	Sharps Containers: ☐check if not included in project ___ sharps containers placed at height that allows users to see top of container		
(d)	___ space to prepare medicines in addition to any self-contained medicine-dispensing unit		
(2)	___ self-contained medication dispensing units ☐check if not included in project		
(a)	___ located at nurse station, in clean workroom or in an alcove ___ lockable unit to secure controlled drugs		
(b)	___ handw. located next to stationary medication-dispensing units		
2.2-3.11.6.10	___ Soiled workroom ☐check if not included in project		
(1)	___ physically separated from all other areas of department	Ventilation: ___ Min. 10 air changes per hour	Table 7.1
(2)		___ Exhaust	
(a)	___ handwashing station	___ Negative pressure	
(b)	___ flushing-rim clinical service sink		
(c)	___ work surface		
(d)	___ holding areas for trash, linen & contaminated waste		
2.2-3.11.6.11 (2)	___ General equipment & supply storage room ___ min. 25 sf per procedure room		

	Architectural Requirements	Building Systems Requirements	
(3)	___ Stretcher & wheelchair storage		
(5)	___ Anesthesia equipment & supply storage		
(4)	___ Emergency equipment storage		
2.1-2.6.11.4			
(1)	___ at least one emergency equipment storage location		
(2)	___ under visual observation of staff		
(3)	___ storage locations in corridors do not infringe on min. required corridor width		
2.2-3.11.6.12	___ Environmental services room		
	___ exclusively for endoscopy procedure suite		
2.1-2.6.12.2		Ventilation:	
(1)	___ service sink or floor-mounted mop sink	___ 10 air changes per hour	Table 7.1
(2)	___ provisions for storage of supplies & housekeeping equipment	___ Exhaust	
(3)	___ handwashing station or hand sanitation station		
2.2-3.11.6.13	___ Fluid waste disposal facilities		
	___ immediately accessible* to procedure rooms (clinical sink)		
	___ immediately accessible* to recovery stations (toilet equipped with bedpan washer)		
2.2-3.11.7	**SUPPORT AREAS FOR STAFF**		
2.2-3.11.7.1 (1)(2)	___ Staff changing areas (may be shared with surgery department)		
	___ locker area with one or more private changing rooms		
(3)			
(a)	___ lockers	Ventilation:	
(b)	___ toilets	___ Min. 10 air changes per hour	Table 7.1
(c)	___ handwashing stations	___ Exhaust	
(d)	___ space for changing clothes		
(e)	___ provision for separate storage of clean & soiled surgical attire		
2.2-3.11.7.2	___ Lounge & toilet facilities (may be shared with other departments)		
2.2-3.11.8	**SUPPORT AREAS FOR PATIENTS**		
2-2-3.11.8.1 (1)(2)	___ Patient changing areas ☐check if <u>not</u> included in project (only if pre-procedure area has all private room or cubicles*)		
	___ provisions for storing patient belongings		
	___ toilet		
	___ changing or gowning area		

Architectural Details & MEP Requirements

2.1-7.2.2 ARCHITECTURAL DETAILS

2.1-7.2.2.1 NFPA 101
___ Aisles, corridors & ramps required for exit access in a hospital not less than 8'-0" in clear & unobstructed width
or
___ Code Review Sheet establishing compliance with NFPA 101 has been submitted

___ Aisles, corridors & ramps in adjunct areas not intended for the housing, treatment, or use of inpatients not less than 44" in clear width

2.1-7.2.2.2 CEILING HEIGHT:

(1) ___ Min. ceiling height 7'-6" in corridors & normally unoccupied spaces

(2) ___ Min. height 7'-0" in radiography, procedure & operating rooms from floor to lowest protruding element of equipment or fixture in stowed position

(4) ___ Min. height 7'-6" above floor of suspended tracks, rails & pipes located in traffic path for patients in beds and/or on stretchers

___ Min. ceiling height 7'-10" in other areas

2.1-7.2.2.3 DOORS & DOOR HARDWARE:

(1)

(a) ___ Doors between corridors, rooms, or spaces subject to occupancy swing type or sliding doors

(b) ___ Sliding doors
☐check if not included in project
___ manual or automatic sliding doors comply with NFPA 101
___ code review sheet attached
___ no floor tracks

(2)

(a) ___ Min. 45.5" clear door width for diagnostic/treatment areas
___ Min. 83.5" clear door height for diagnostic/treatment areas

(b) ___ Swinging doors for personnel use in addition to sliding doors
☐check if not included in project

(3) ___ min. clear width 34.5"
___ Doors do not swing into corridors (except doors to non-occupiable spaces & doors with emergency breakaway hardware)

(4)

(b) ___ Lever hardware

(5) ___ Doors for patient toilet facilities

(a) ___ 2 doors separated by horizontal distance equal to one-half length of max. diagonal room dimension
or
___ door that swings outward
or
___ door equipped with emergency rescue hardware
or

(b) ___ sliding door

___ toilet room door opening in public area or corridor maintains visual privacy

2.1-7.2.2.7 GLAZING MATERIALS:

(4) ___ Glazing within 18" of floor
☐check if not included in project
___ safety glass, wire glass or plastic break-resistant material

2.1-7.2.2.8 HANDWASHING STATIONS:

(1) ___ Handw. stations in patient care areas located to be visible & unobstructed

(3) ___ Anchoring suitable for vertical or horizontal force of 250 lbs.

(4) Handwashing Station Countertops:
☐check if not included in project

(a) ___ porcelain, stainless steel or solid surface materials

(b) ___ plastic laminate countertops
☐check if not included in project
___ substrate marine-grade plywood (or equivalent) with impervious seal

(5) ___ Designed to prevent storage beneath sink

(6) ___ provisions for drying hands

(a) ___ hand-drying device does not require hands to contact

(d) dispenser

(7) ___ directly accessible* to sinks

___ Liquid or foam soap dispensers

2.1-7.2.2.9 GRAB BARS:

(2) ___ Grab bars anchored to sustain concentrated load of 250 lbs.

2.1-7.2.2.10 HANDRAILS:

(1) ___ Handrails installed on both sides of patient use corridors

(3) ___ Rail ends return to wall or floor

(4) ___ Smooth non-textured surface free of rough edges

(5) ___ Eased edges & corners

(6) ___ Finishes cleanable

2.1-7.2.2.12 NOISE CONTROL:
(1) ___ Recreation rooms, exercise rooms, equipment rooms & similar spaces with potential impact noises are not located directly over operating suites
(2) ___ Partitions, floors & ceiling construction in patient areas conform to Table 1.2-6

2.1-7.2.3 SURFACES
v

2.1-7.2.3.1 FLOORING & WALL BASES:
(1) ___ Selected flooring surfaces cleanable & wear-resistant for location
(2) ___ Smooth transitions between different flooring materials
(3) ___ Flooring surfaces, including those on stairways, stable, firm & slip-resistant
(b) ___ Carpet
☐check if not included in project
___ provides stable & firm surface
(4) ___ Floors & wall bases of soiled workrooms, toilet rooms & other wet cleaned areas are not physically affected by cleaning solutions

2.1-7.2.3.2 WALLS & WALL PROTECTION:
(1)
(a) ___ Washable wall finishes
(b) ___ Wall finishes near plumbing fixtures smooth, scrubbable & water-resistant
(2) ___ Monolithic wall surfaces in areas routinely subjected to wet spray or splatter
(5) ___ No sharp, protruding corners
(6) ___ Wall protection devices & corner guards durable & scrubbable

2.1-7.2.3.3 CEILINGS:
(1) Ceilings in areas occupied by patients & in clean rooms & soiled rooms:
(a) ___ cleanable with routine housekeeping equipment
(b) ___ acoustic & lay-in ceilings
☐check if not included in project
___ do not create ledges or crevices
(2) Ceiling finishes in endoscopy procedure rooms & endoscopy instrument processing:
___ capable of withstanding cleaning with chemicals
(a) ___ lay-in ceiling
☐check if not included in project
___ gasketed or clipped down
___ cleanable
(b) ___ no perforated, tegular, serrated, cut, or textured tiles

2.1-8.2 **HEATING, VENTILATION, & AIR-CONDITIONING (HVAC) SYSTEMS**

4/6.3.1 Outdoor Air Intakes:
4/6.3.1.1 ___ Located min. 25 feet from cooling towers & all exhaust & vent discharges
___ Bottom of air intake is at least 6'-0" above grade
4/6.3.1.2 Roof Mounted Air Intakes:
☐ check if not included in project
___ bottom min. 3'-0" above roof level
4/6.4 Filtration:
___ Filter banks conform to Table 6.4
4/6.4.1 ___ Filter Bank #1 placed upstream of heating & cooling coils
4/6.4.2 ___ Filter Bank No. 2 installed downstream of cooling coils & supply fan
4/6.7 Air Distribution Systems
4/6.7.1 ___ Ducted return or exhaust systems in spaces listed in Table 7.1 with required pressure relationships
___ Ducted return or exhaust systems in recovery rooms
___ Ducted return or exhaust systems in inpatient care areas
4/6.7.3 Smoke & Fire barriers:
___ HVAC zones coordinated with compartmentation to minimize ductwork penetrations of fire & smoke barriers
4/6.9 Duct Lining:
___ No duct lining in ductwork located downstream of Filter Bank #2
4/7. Space Ventilation:
4/7.1 ___ Spaces ventilated per Table 7.1
___ Air movement from clean areas to less clean areas
___ Min. number of total air changes indicated either supplied for positive pressure rooms or exhausted for negative pressure rooms
___ Recirculating room HVAC units
☐check if not included in project
___ each unit serves only single space
___ min. MERV 6 filter for airflow downstream of cooling coils

2.1-8.2.1.1 Acoustic Considerations:
(5) ___ Equipment location or acoustic provisions limit noise associated with outdoor mechanical equipment to 65 dBA at building façade

2.1-8.2.1.2 Ventilation & Space-Conditioning:
(1) ___ All rooms & areas used for patient care have provisions for ventilation
(2) ___ Mechanical ventilation provided for all rooms & areas in facility in accordance with Table 7.1 of Part 4

2.1-8.2.3.1 Exhaust Systems:
(1) ___ Room routinely used for
(a) administering inhalation anesthesia & inhalation analgesia
☐check if not included in project
(b) ___ anesthesia scavenging system with air supply at or near ceiling & exhaust air inlets near floor level
or
(c) ___ gas-collecting system arranged so as not to disturb patients respiratory systems

___ gases from scavenging system exhausted directly to outside

2.1-8.3 **ELECTRICAL SYSTEMS**

2.1-8.3.2 **ELECTRICAL DISTRIBUTION & TRANSMISSION**

2.1-8.3.2.1(1) Switchboards Locations:
(a) ___ Located in areas separate from piping & plumbing equipment
(b) ___ Not located in rooms they support
___ Accessible to authorized persons only
(c) ___ Located in dry, ventilated space free of corrosive gases or flammable material

2.1-8.3.2.2 Panelboards:
(1) ___ Panelboards serving life safety branch emergency circuits only serve same floor, floor above & floor below
(2) ___ Panelboards serving critical branch emergency circuits only serve same floor
(3) ___ New panelboards not located in exit enclosures

2.1-8.3.3.1 **EMERGENCY ELECTRICAL SERVICE**
(1) ___ Emergency power per NFPA 99, NFPA 101 & NFPA 110

2.1-8.3.5 **ELECTRICAL EQUIPMENT**
2.1-8.3.5.2 ___ Required handwashing station or scrub sink tied to building electrical service
☐check if not included in project
___ connected to essential electrical system

2.1-8.3.6 **ELECTRICAL RECEPTACLES**
2.1-8.3.6.2 Receptacles in Patient Care Areas:
___ receptacles provided according to Table 2.1-1

2.1-8.3.7 **CALL SYSTEMS**
___ Nurse call equipment legend includes patient stations, bath stations, staff emergency stations & code call stations

2.1-8.3.7.1
(1) ___ Nurse call system locations provided as required in Table 2.1-2
(2) ___ Nurse call systems report to attended location with electronically supervised visual & audible signals
(4) ___ Call systems meet requirements of UL 1069 *Standard for Hospital Signaling & Nurse Call Equipment*
(5) ___ Wireless system
☐check if not included in project
___ meet requirements of UL 1069

2.1-8.3.7.3 Bath Stations:
___ provided at each patient toilet
(1) ___ alarm turned off only at bath station where it was initiated
(3) ___ located to side of toilets within 12” of front of toilet bowl & 3'-0" to 4’-0” above floor

2.1-8.3.7.4 ___ Staff emergency stations for summoning local staff assistance for non-life-threatening situations at each patient care location

2.1-8.3.7.5 ___ Code call station equipped with continuous audible or visual signal at point of origin

2.1-8.4.2 **PLUMBING & OTHER PIPING SYSTEMS**

2.1-8.4.2.5 Heated Potable Water Distribution Systems:
(2) ___ systems serving patient care areas are under constant recirculation
___ non-recirculated fixture branch piping does not exceed 25'-0" in length
(3) ___ no dead-end piping
(4) ___ water-heating system has supply capacity at minimum temperatures & amounts indicated in Table 2.1-3

(5) ___ handwashing stations supplied as required above
or
___ handwashing stations supplied at constant temperature between 70°F & 80°F using single-pipe supply

2.1-8.4.2.6 Drainage Systems:
(1) ___ drainage piping above ceiling of, or exposed in electric closets
☐check if not included in project
___ special provisions to protect space below from leakage & condensation

2.1-8.4.3 **PLUMBING FIXTURES**

2.1-8.4.3.1
(1) ___ Materials material used for plumbing fixtures non-absorptive & acid resistant

2.1-8.4.3.2 Handwashing Station Sinks:
(1) ___ basins reduce risk of splashing to areas where direct patient care is provided, sterile procedures are performed & medications are prepared
(2) ___ basin min. 144 square inches
___ min. dimension 9 inches
(3) ___ made of porcelain, stainless steel, or solid-surface materials
(5) ___ water discharge point of faucets at least 10 inches above bottom of basin
(7) ___ anchoring for sinks withstands min. vertical or horizontal force of 250 lbs.
(8) ___ fittings operated without using hands for sinks used by medical & nursing staff, patients, public & food handlers

(a) ___ blade handles or single lever
___ min. 4 inches long
___ provide clearance required for operation
or
(b) ___ sensor-regulated water fixtures
___ meet user need for temperature & length of time water flows
___ designed to function at all times & during loss of normal power

2.1-8.4.3.5 Clinical Sinks:
☐check if not included in project
(1) ___ trimmed with valves that can be operated without hands
(2) ___ handles min. 6 inches long
___ integral trap wherein upper portion of water trap provides visible seal

2.1-8.4.4 **MEDICAL GAS & VACUUM SYSTEMS**

___ Station outlets provided as indicated in Table 2.1-4

2.1-8.4.4.2
(2) ___ Vacuum discharge at least 25'-0" from all outside air intakes, doors & operable windows

2.1-8.6.2 **ELECTRONIC SURVEILLANCE SYSTEMS**
☐check if not included in project
2.1-8.6.2.1 ___ Devices in patient areas mounted in unobtrusive & tamper-resistant enclosures
2.1-8.6.2.2 ___ Monitoring devices not readily observable by general public or patients
2.1-8.6.2.3 ___ Receive power from emergency electrical system