**COMPLIANCE CHECKLIST**

**IP12\_Emergency 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 2022 Edition of the FGI Guidelines for Design and Construction of Hospitals. 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:

1. NFPA 101 Life Safety Code (2012) and applicable related standards contained in the appendices of the Code
2. State Building Code (780 CMR)
3. Accreditation requirements of The Joint Commission
4. CDC Guidelines for Preventing the Transmission of Mycobacterium Tuberculosis in Health Care Facilities
5. USP 797 & Regulations of the Massachusetts Board of Registration in Pharmacy
6. Occupational Safety & Health Standards (OSHA)
7. Accessibility Guidelines of the Americans with Disabilities Act (ADA)
8. Architectural Access Board Regulations (521 CMR)
9. 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 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 marks, unless otherwise directed in the checklist. If a functional space is not affected by a renovation project, the mark “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. “E” must not be used for an existing required support space associated with a new patient care room or area. | **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). An explicit floor plan or plan detail must be attached to each waiver request. |

1. All room functions marked with "X" must be shown on the plans with the same name labels as in this checklist.
2. 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.
3. Oxygen, vacuum, medical air, waste anesthesia gas disposal and instrument air outlets (if required) are identified respectively by the abbreviations "OX", "VAC", "MA", “WAGD” & “IA”.
4. Requirements referenced with “FI” result from formal interpretations from the FGI Interpretations Task Group.
5. The location requirements including asterisks (\*) refer to the definitions of the Glossary in the beginning section of the FGI Guidelines and reproduced in this checklist.

|  |  |  |
| --- | --- | --- |
| 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** |  |
| --- | --- | --- | --- |
| 2.2-3.1 | **EMERGENCY SERVICES** |  |  |
|  |  |  |  |
| 2.2-3.1.3.1(2) | Security:  \_\_\_ Emergency department (ED) is designed to assure that access control can be maintained at all times |  |  |
|  |  |  |  |
| 2.2-3.1.3.2 | **ENTRANCE** |  |  |
| 2.1‑6.2.1 | \_\_\_ Vehicular drop‑off & pedestrian entrance |  |  |
|  | \_\_\_ at least one entrance is reachable from grade level |  |  |
|  |  |  |  |
| 105 CMR 130.127(A) | Signage and Wayfinding: |  |  |
| (1) | \_\_\_ public entrances to the ED are clearly marked from external approaches and identified by exterior signage & visible from public thoroughfares  \_\_\_ signs identifying the ED read "EMERGENCY" in all caps in red on a white background or white on a red background  \_\_\_ public entrances to ED are distinguishable from ED ambulance entrance |  |  |
|  |  |  |  |
| (2) | \_\_\_ ED patient drop off & entry areas & hospital perimeter doors, which include, but may not be limited to, doors that are locked at night, main entrance doors, ED entrance doors, ambulance entrances & any door a patient may typically use to enter the hospital, are well lit & include directions to the ED.  \_\_\_ emergency patient vehicle drop off & external & internal entry areas are lit to be distinguishable from other entrances |  |  |
|  |  |  |  |
| (3) | \_\_\_ exterior hospital entry points are clearly identified from all major exterior routes including roadways, public transportation stops & vehicular parking |  |  |
|  |  |  |  |
| (4) | \_\_\_ exterior hospital ED identification & directional signs are sufficiently lit to allow drivers & pedestrians to see signage after dark & during inclement weather  \_\_\_ directional signs leading to the ED are placed in such a manner as to ensure visual continuity |  |  |
|  |  |  |  |
| (5) | \_\_\_ exterior wayfinding clearly defines the access pathways from public thoroughfares to the hospital main entrance & ED entrance |  |  |
|  |  |  |  |
| 105 CMR 130.127(B) | Security & Communications: |  |  |
| (1) | \_\_\_ lighted communications technology with duress alarm features across the grounds of the hospital facility to communicate with on-duty personnel  \_\_\_ includes communication devices at the hospital main entrances, ED entrance, ambulance entrances, & any exterior door a patient may typically use  \_\_\_ includes communication devices in strategic locations around hospital grounds  \_\_\_ such technology are accessible to people with low vision, hearing loss, difficulties with speech & cognitive processing  \_\_\_ system includes emergency duress button stations that are well marked & lit |  |  |
| 2.2-3.1.3.2 |  |  |  |
| (1) | \_\_\_ Public thoroughfares signs direct ambulance traffic to ambulance entrance to ED  \_\_\_ Vehicle traffic to public entrance |  |  |
| (2) | \_\_\_ Paved emergency access to permit discharge of patients from automobiles & ambulances be provided |  |  |
| (3) | \_\_\_ ED entrance is clearly marked |  |  |
|  |  |  |  |
| (4) | \_\_\_ Raised platform/dock used for ambulance discharge  check if not included in project  \_\_\_ ramp or elevator/lift to grade level provided for pedestrian & wheelchair access |  |  |
|  |  |  |  |
| (5) | \_\_\_ Emergency vehicle entry cover/canopy  \_\_\_ provides shelter for both patient & emergency medical crew during transfer between emergency vehicle & building |  |  |
| (6) | \_\_\_ Emergency bays sized to be compatible with horizontal & vertical vehicle clearances of EMS providers |  |  |
|  |  |  |  |
| (7) | \_\_\_ ED ambulance entrances provide min. 6’‑0” in clear width to accommodate stretchers/ gurneys & expanded-capacity stretchers/ gurneys, mobile patient lift devices & accompanying attendants |  |  |
|  |  |  |  |
| (9) | \_\_\_ Video surveillance system for each ED public entrance |  |  |
|  |  |  |  |
| (10) | \_\_\_ Duress alarm system outside each public entrance |  |  |
|  | \_\_\_ conspicuously located |  |  |
|  | \_\_\_ readily accessible |  |  |
|  | \_\_\_ immediately available |  |  |
|  |  |  |  |
| 2.2-3.1.3.8 | \_\_\_ Diagnostic service areas  \_\_\_ access to imaging & laboratory services is provided |  |  |
|  |  |  |  |
| 2.2-3.1.3.3 | **RECEPTION & TRIAGE AREAS** |  |  |
|  | \_\_\_ Emergency department designed to ensure that access control is maintained at all times |  |  |
| (1) | \_\_\_ Reception or triage areas located to provide means for observation of main entrance to department & public waiting area |  |  |
| (2) | \_\_\_ Public access points to treatment area are under direct observation of reception & triage areas |  |  |
| (3) | \_\_\_ Triage area |  |  |
| (b) | \_\_\_ provisions for patient privacy  \_\_\_ handwashing station provided in each triage room | Ventilation:  \_\_\_ Min. 12 air changes per hour  \_\_\_ Exhaust  \_\_\_ Negative pressure | Table 7-1 |
| (d) | \_\_\_ one handwashing station provided for every 4 triage bays or cubicles  \_\_\_ hand sanitation station provided for each triage bay or cubicle | Power:  \_\_\_ Min. 6 receptacles in total  \_\_\_ convenient to head of gurney or bed  \_\_\_ At least 50% of receptacles connected to emergency power | Table 2.1-1 |
| (e) | \_\_\_ access to duress alarm for security emergencies | Nurse Call System:  \_\_\_ Patient station | Table 2.1-2 |
|  |  | Medical Gases:  \_\_\_ 1 OX, 1 VAC per station | Table 2.1-3 |
| 2.2-3.1.3.4 | **PUBLIC WAITING AREA** |  |  |
| (1) | \_\_\_ Seating | Ventilation:  \_\_\_ Min. 12 air changes per hour  \_\_\_ Exhaust  \_\_\_ Negative pressure | Table 7-1 |
|  |  |  |  |
| (2) | \_\_\_ Toilet room  \_\_\_ immediately accessible\*  \_\_\_ handwashing station | Ventilation:  \_\_\_ Min. 10 air changes per hour  \_\_\_ Exhaust  \_\_\_ Negative pressure  \_\_\_ No recirculating room units | Table 7-1 |
| (3) | \_\_\_ access to drinking water |  |  |
| (4) | \_\_\_ access to public communication services |  |  |
|  |  |  |  |
| 2.2-3.1.3.5 | **COMMUNICATIONS WITH EMS** |  |  |
| (1) | \_\_\_ Communication connections to emergency medical services (EMS) |  |  |
| (2) | \_\_\_ EMS base station is provided  check if not included in project  \_\_\_ designed to reduce noise distractions & interruptions during communications |  |  |
|  |  |  |  |
| 2.2-3.1.3.6 | **GENERAL TREATMENT ROOMS OR AREAS** |  |  |
| 2.2-3.1.3.6(1) | \_\_\_ Single-patient treatment rooms |  |  |
| 2.1‑3.2.2.1 | Space Requirements: | Ventilation: |  |
| (1) | New Construction:  \_\_\_ min. clear floor area 120 sf  \_\_\_ min. clear dimension 10’‑0”  **or**  Renovation:  \_\_\_ min. clear floor area 100 sf | \_\_\_ Min. 6 air changes per hour  Lighting:  \_\_\_ Portable or fixed exam light  Power:  \_\_\_ Min. 8 receptacles in total  \_\_\_ Min. 4 receptacles convenient to head of gurney or bed | Table 7-1  2.1‑8.3.4.3(3)  Table 2.1-1 |
| (2)(a) | \_\_\_ room size permits room arrangement with min. clearance 3’‑0” at each side & at foot of exam table, recliner or chair | Nurse Call System:  \_\_\_ Patient station  Medical Gases:  \_\_\_ 1 OX, 1 VAC, 1 MA per gurney | Table 2.1-2  Table 2.1-3 |
| 2.1‑3.2.2.2(2) | \_\_\_ storage for supplies |  |  |
| 2.1‑3.2.2.2(3) | \_\_\_ accommodations for written or electronic documentation |  |  |
| 2.1‑3.2.2.2(4) | \_\_\_ space for visitor’s chair |  |  |
| 2.1‑3.2.2.2(5) | \_\_\_ handwashing station |  |  |
| 2.2-3.1.3.6(2)(b) | \_\_\_ space for medical equipment |  |  |
|  | \_\_\_ view panel designed for patient visual privacy adjacent\* to and/or in door |  |  |
|  |  |  |  |
| 2.2-3.1.3.6(3) | \_\_\_ Multiple-patient treatment rooms  check if not included in project |  |  |
| 2.1‑3.2.3.1 | Space Requirements: | Ventilation: |  |
| (1) | \_\_\_ separate patient bays or cubicles with min. clear floor area 80 sf per patient care station | \_\_\_ Min. 6 air changes per hour  Lighting:  \_\_\_ Portable or fixed exam light | Table 7-1  2.1‑8.3.4.3(3) |
| (2)(a) | \_\_\_ min. 5’‑0” between sides of adjacent\* patient beds | Power:  \_\_\_ Min. 8 receptacles in total | Table 2.1-1 |
| (2)(b) | \_\_\_ min. 4’‑0” between sides of patient beds & adjacent\* walls or partitions | \_\_\_ Min. 4 receptacles convenient to head of gurney or bed  Nurse Call System: |  |
| 2.1‑3.2.3.2(2) | \_\_\_ accommodations for written or electronic documentation | \_\_\_ Patient station  Medical Gases: | Table 2.1-2 |
| 2.1‑3.2.3.2(3) | \_\_\_ space for visitor’s chair | \_\_\_ 1 OX, 1 VAC, 1 MA per gurney | Table 2.1-3 |
| 2.1‑3.2.3.3 | \_\_\_ handwashing station |  |  |
| (1) | \_\_\_ at least one handwashing station in each multiple‑patient examination room |  |  |
| 2.1‑2.8.7.3(1) | \_\_\_ at least 1 handwashing station for every 4 patient care stations or fewer & for each major fraction thereof |  |  |
| 2.1‑2.8.7.3(2) | \_\_\_ handwashing stations evenly distributed |  |  |
| 2.1‑3.2.3.4 | \_\_\_ supply storage |  |  |
| 2.1‑3.2.4 | \_\_\_ Sexual assault forensic examination room  check if not included in project |  |  |
| 2.1‑3.2.2.1 | Space Requirements: | Ventilation: |  |
| (1) | \_\_\_ min. clear floor area 120 sf  \_\_\_ min. clear dimension 10’‑0” | \_\_\_ Min. 6 air changes per hour | Table 7-1 |
| (2)(a) | \_\_\_ room size permits room arrangement with min. clearance 3’‑0” at each side & at foot of exam table | Lighting:  \_\_\_ Portable or fixed exam light  Power: | Table 2.1-1 |
|  | \_\_\_ room arrangement (layout #1) shown in the plans | \_\_\_ Min. 8 receptacles in total |  |
| (2)(b) | \_\_\_ exam table, recliner or chair is placed to accommodate type of patient being served | \_\_\_ Min. 4 receptacles convenient to head of gurney or bed  Nurse Call System: |  |
|  | check if not included in project  \_\_\_ room arrangement (layout #2) shown in the plans | \_\_\_ Patient station  Medical Gases:  \_\_\_ 1 OX, 1 VAC, 1 MA | Table 2.1-2  Table 2.1-3 |
| 2.1‑3.2.2.2 |  |  |  |
| (2) | \_\_\_ storage for supplies |  |  |
| (3) | \_\_\_ accommodations for written or electronic documentation |  |  |
| (4) | \_\_\_ space for visitor’s chair |  |  |
| (5) | \_\_\_ handwashing station |  |  |
| 2.1‑3.2.4.1(1) | \_\_\_ pelvic examination bed/table |  |  |
| 2.1‑3.2.4.1(2) | \_\_\_ lockable storage areas for forensic collection kits laboratory supplies & equipment |  |  |
| 2.1‑3.2.4.1(3) | \_\_\_ private toilet & shower with storage space for clothing shoes linens & bathing products  \_\_\_ immediately accessible\* to sexual assault forensic examination room | Ventilation:  \_\_\_ Min. 10 air changes per hour  \_\_\_ Exhaust  \_\_\_ Negative pressure  \_\_\_ No recirculating room units |  |
| 2.1‑3.2.4.2 | \_\_\_ room for consultation family support services & law enforcement  \_\_\_ readily accessible\* to sexual assault forensic examination room |  |  |
|  |  |  |  |
| 2.2-3.1.3.7 | \_\_\_ Patient toilet room  \_\_\_ at least one for each 6 treatment rooms/ spaces & for each fraction thereof  \_\_\_ handwashing station | Ventilation:  \_\_\_ Min. 10 air changes per hour  \_\_\_ Exhaust  \_\_\_ Negative pressure | Table 7-1 |
|  |  | \_\_\_ No recirculating room units |  |
| 2.2-3.1.3.6(2) | **GENERAL TRAUMA/RESUSCITATION ROOMS** |  |  |
|  | \_\_\_ Designed for emergency procedures | Ventilation: |  |
| (a) | \_\_\_ Single-patient T/R room | \_\_\_ Min. 15 air changes per hour  \_\_\_ Positive pressure | Table 7-1 |
|  | Space Requirements: | \_\_\_ No recirculating room units |  |
|  | \_\_\_ min. clear floor area 250 sf | Lighting: |  |
|  | \_\_\_ min. clearance 5’-0” provided around all sides of gurney | \_\_\_ Portable or fixed exam light  Power: | 2.1‑8.3.4.3(3) |
| (b) | **or**  \_\_\_ Multiple-patient T/R room | \_\_\_ Min. 16 receptacles in total  \_\_\_ convenient to head of gurney or bed | Table 2.1-1 |
|  | Space Requirements: | Nurse Call System: |  |
|  | \_\_\_ min. clear floor area 200 sf for each patient bay defined by privacy curtains | \_\_\_ Emergency call station | Table 2.1-2 |
|  | \_\_\_ min. clearance 5’-0” on all sides of gurney  \_\_\_ min. clearance 10’-0” between each patient bed or gurney | Medical Gases:  \_\_\_ 1 OX, 3 VAC, 1 MA per gurney | Table 2.1-3 |
|  |  |  |  |
| (c) | \_\_\_ space for storage of supplies |  |  |
|  | \_\_\_ PACS film illuminators or other systems to allow viewing of images & films in room |  |  |
|  | \_\_\_ handwashing station |  |  |
|  | \_\_\_ space for code cart |  |  |
|  | \_\_\_ examination lights |  |  |
|  | \_\_\_ accommodations for written or electronic documentation |  |  |
|  | \_\_\_ physiological monitoring equipment |  |  |
|  | \_\_\_ storage for personal protective equipment |  |  |
| (d) | \_\_\_ doorways leading from ambulance entrance to trauma/resuscitation room have min. clear width 72 inches & min. height 83.5 inches |  |  |
|  |  |  |  |
| (f) | \_\_\_ Trauma room subdivided with cubicle curtains or movable partitions to provide multiple patient care stations  check if not included in project |  |  |
| 2.1‑3.2.3.1(1) | \_\_\_ separate patient bays or cubicles with min. clear floor area 80 sf per patient care station | Ventilation:  \_\_\_ Min. 6 air changes per hour | Table 7-1 |
| 2.1‑3.2.3.1(2)(a) | \_\_\_ min. 5’‑0” between sides of adjacent\* patient beds | Lighting:  \_\_\_ Portable or fixed exam light | 2.1‑8.3.4.3(3) |
| 2.1‑3.2.3.1(2)(b) | \_\_\_ min. 4’‑0” between sides of patient beds & adjacent\* walls or partitions | Power:  \_\_\_ Min. 8 receptacles in total | Table 2.1-1 |
| 2.1‑3.2.3.2(2) | \_\_\_ accommodations for written or electronic documentation | \_\_\_ Min. 4 receptacles convenient to head of gurney or bed |  |
| 2.1‑3.2.3.2(3) | \_\_\_ space for visitor’s chair  \_\_\_ Direct access to handwashing station in trauma room or a scrub sink outside trauma room | Nurse Call System:  \_\_\_ Staff assistance station  \_\_\_ Emergency call station | Table 2.1-2 |
|  | \_\_\_ Physical space & operational plan accommodate conversion back to trauma room | Medical Gases:  \_\_\_ 1 OX, 1 VAC, 1 MA per gurney | Table 2.1-3 |
|  |  |  |  |
|  | \_\_\_ Cubicle curtains or movable partitions will not impinge on required trauma room area or clearances when in the stowed position |  |  |
| 2.2-3.1.3.6(2)(g) | \_\_\_ Trauma/resuscitation room used as treatment room for individuals of size  check if not included in project |  |  |
|  | \_\_\_ meets requirements in section 2.2‑3.1.3.6(3) below |  |  |
|  |  |  |  |
| 2.2-3.1.3.6(3) | **TREATMENT ROOM FOR PATIENTS OF SIZE** |  |  |
| 2.1‑2.3.1 | \_\_\_ Need to provide spaces designed for safe care of Patients of Size described in Project Narrative |  |  |
| 2.1‑2.3.1.1(2) | \_\_\_ Patient Handling & Movement Assessment (PHAMA) including need for expanded capacity lifts & architectural details supporting movement of patients of size is attached to Project Narrative |  |  |
| 2.1‑2.3.1.3 | Patient Lift System: |  |  |
| (1) | \_\_\_ accommodations for patient handling provided by either overhead lift system or floor‑based full‑body sling lift & standing‑assist lifts |  |  |
| (2) | \_\_\_ lifts capable of accommodating projected weight of patients of size |  |  |
|  |  |  |  |
| 2.1‑2.3.7 | \_\_\_ Single‑patient examination or treatment room (may be subdivided with cubicle curtains when not in use for patient of size) |  |  |
|  |  |  |  |
| 2.1‑2.3.7.2 | Space Requirements: | Ventilation: |  |
| (1)(a)  (1)(b) | \_\_\_ min. 5'‑0" clearance at foot of expanded‑capacity exam table  \_\_\_ min. 5'‑0" clearance on non‑transfer side of expanded‑capacity exam table | \_\_\_ Min. 6 air changes per hour  Lighting:  \_\_\_ Portable or fixed exam light  Power: | Table 7-1  2.1‑8.3.4.3(3) |
|  |  | \_\_\_ Min. 8 receptacles in total | Table 2.1-1 |
|  | Clearance on Transfer Side of Expanded Capacity Exam Table: | \_\_\_ Min. 4 receptacles convenient to head of gurney or bed |  |
| (1)(c) | \_\_\_ ceiling‑ or wall‑mounted lift is provided: min. 5’‑0” clearance | Nurse Call System:  \_\_\_ Emergency call station | Table 2.1-2 |
|  | **or**  \_\_\_ no ceiling‑ or wall‑mounted lift is provided: min. 7’‑0” clearance | \_\_\_ 1 OX, 1 VAC, 1 MA | Table 2.1-3 |
| 2.1‑3.2.2.2 |  |  |  |
| (2) | \_\_\_ storage for supplies |  |  |
| (3) | \_\_\_ accommodations for written or electronic documentation |  |  |
| (4) | \_\_\_ space for visitor’s chair |  |  |
| (5) | \_\_\_ handwashing station |  |  |
|  |  |  |  |
| 2.2-3.1.3.6(2)(b) | \_\_\_ space for medical equipment |  |  |
|  | \_\_\_ view panel designed for patient visual privacy adjacent\* to and/or in door |  |  |
|  |  |  |  |
| 2.1‑2.3.8 | \_\_\_ Equipment & Supply Storage |  |  |
|  | \_\_\_ accommodates size of expanded‑capacity equipment (e.g. floor‑based lifts lift, slings & accessories etc.) |  |  |
|  |  |  |  |
| 2.1‑2.3.10 | Special Design Elements for Spaces for Care of Patients of Size: |  |  |
| 2.1‑2.3.10.1 | \_\_\_ all plumbing fixtures, handrails, grab bars, patient lift equipment, built‑in furniture & other furnishings & equipment designed to accommodate maximum planned patient weight |  |  |
|  |  |  |  |
| 2.1‑2.3.10.2 | Door Openings: |  |  |
| (1) | \_\_\_ min. clear width 45.5” for path of travel of expanded‑capacity wheelchairs to public areas & patient care areas |  |  |
| (2) | \_\_\_ min. clear width 57” to patient rooms |  |  |
| (3) | \_\_\_ min. clear width 45.5” to toilet rooms |  |  |
|  |  |  |  |
| 2.2-3.1.3.6(3)(b) | \_\_\_ Ceiling-lift or wall-mounted lifts  check if not included in project  \_\_\_ min. clearance 5’-6” from edge of expanded-capacity patient table or bed provided on transfer side |  |  |
|  |  |  |  |
| 2.2-3.1.3.6(3)(c) | \_\_\_ Alternate use for multiple patient treatment stations when not in use for individual of size  check if not included in project |  |  |
|  | \_\_\_ this treatment room is subdivided with cubicle curtains or movable partitions to accommodate more than one patient  \_\_\_ each resulting bay or cubicle meets all electrical & medical gas requirements for emergency department treatment areas |  |  |
|  |  |  |  |
| 2.2-3.1.3.6(5) | **FAST-TRACK AREA**  check if not included in project |  |  |
| (2) | \_\_\_ Single-patient treatment rooms |  |  |
|  | Space Requirements: | Ventilation: |  |
| 2.2-3.1.3.6(5)(a)  2.1‑3.2.2.1(2)(a) | \_\_\_ min. clear floor area 100 sf  \_\_\_ room size permits room arrangement with min. clearance 3’‑0” at each side & at foot of exam table | \_\_\_ Min. 6 air changes per hour  Lighting:  \_\_\_ Portable or fixed exam light  Power:  \_\_\_ Min. 8 receptacles in total | Table 7-1  2.1‑8.3.4.3(3)  Table 2.1-1 |
| 2.1‑3.2.2.2(2) | \_\_\_ storage for supplies | \_\_\_ Min. 4 receptacles convenient |  |
| 2.1‑3.2.2.2(3)  2.1‑3.2.2.2(4) | \_\_\_ accommodations for written or electronic documentation  \_\_\_ space for visitor’s chair | to head of gurney or bed  Nurse Call System:  \_\_\_ Emergency call station | Table 2.1-2 |
| 2.1‑3.2.2.2(5)  2.2-3.1.3.6(2)(b) | \_\_\_ handwashing station  \_\_\_ space for medical equipment | Medical Gases:  \_\_\_ 1 OX, 1 VAC | Table 2.1-3 |
|  | \_\_\_ view panel designed for patient visual privacy adjacent\* to and/or in door |  |  |
| 2.2-3.1.3.6(5)(b) | \_\_\_ Waiting area  check if not included in project |  |  |
|  | \_\_\_ located for immediate access to patient toilet room |  |  |
|  |  |  |  |
| 2.2-3.1.3.6(6) | **LOW-ACUITY PATIENT TREATMENT AREA**  check if not included in project |  |  |
| 2.2-3.1.3.6(6)(a) | \_\_\_ Low-acuity patient treatment stations are not be permitted to replace other emergency facility treatment room types in their entirety |  |  |
|  |  |  |  |
| 2.2-3.1.3.6(6)(b) | \_\_\_ Low-acuity patient treatment station  \_\_\_ patient bay or patient cubicle | Ventilation:  \_\_\_ Min. 6 air changes per hour | Table 7-1 |
|  | Space requirements: | Power: |  |
|  | \_\_\_ min. clear floor area 40 sf  \_\_\_ min. clear dimension 5’-6” | \_\_\_ 4 receptacles convenient to patient chair | 2.1-1 |
|  | \_\_\_ bay or cubicle accommodates min. clearance of 3’-0” at side, head, or foot of patient chair that corresponds with care providers expected work positions | Nurse Call System:  \_\_\_ Patient station | 2.1-2 |
| 2.1-3.2.3.2 | Treatment station features: |  |  |
| (1)  (2) | \_\_\_ examination light in each bay or cubicle  \_\_\_ accommodations for written or electronic documentation in each bay or cubicle |  |  |
| (3) | \_\_\_ space for visitor's chair in each bay or cubicle |  |  |
|  |  |  |  |
| 2.2-3.1.3.6(6)(c) | \_\_\_ Supply storage  \_\_\_ immediately accessible\* to low-acuity patient treatment area |  |  |
| 2.2-3.1.3.6(6)(d) | \_\_\_ Provisions be made to address patient visual & speech privacy |  |  |
|  |  |  |  |
| 2.2-3.1.3.6(6)(e) | \_\_\_ Handwashing station |  |  |
|  | \_\_\_ at least one handwashing station provided in each low-acuity patient treatment area |  |  |
|  | \_\_\_ at least one handwashing station for every four patient care stations & for each major fraction thereof |  |  |
|  | \_\_\_ handwashing stations are evenly distributed based on arrangement of patient care stations |  |  |
|  |  |  |  |
| (7) | **HUMAN DECONTAMINATION FACILITIES** |  |  |
| (a) | \_\_\_ Interior decontamination room |  |  |
| (i) | Location:  \_\_\_ internal door of this room provides direct access into corridor of emergency department or treatment room  \_\_\_ internal door of this room swings into decontamination room  \_\_\_ internal door of this room is lockable against ingress from corridor or treatment room |  |  |
| (ii) | Entrance:  \_\_\_ dedicated & secured outside entry door  \_\_\_ located no less than 10’-0” in any direction from next closest entrance  \_\_\_ entrance is lighted & protected from environment  \_\_\_ entrance has contrasting boundary line on ground that is 3’-0” from each side of door & extends 6’-0” out from exterior wall  \_\_\_ word “DECON” be marked on ground within these boundaries. |  |  |
|  |  |  |  |
| (iii) | Space requirements:  \_\_\_ min. clear floor area 100 sf  \_\_\_ means for patient privacy | Ventilation:  \_\_\_ 12 air changes per hour  \_\_\_ Exhaust | Table 7-1 |
|  |  | \_\_\_ Negative pressure |  |
| (iv) | Architectural detail & surface requirements:  \_\_\_ smooth, nonporous, scrubbable, nonabsorptive, nonperforated surfaces  \_\_\_ floor of decontamination room is seamless & self-coving to height of not less than 6 inches | \_\_\_ No recirculating room units  Power:  \_\_\_ 4 receptacles (wet location)  Nurse Call:  \_\_\_ 1 patient station  \_\_\_ 1 emergency call station | Table 2.1-1  Table 2.1-2 |
|  |  |  |  |
| (v) | Plumbing system requirements:  \_\_\_ min. of two hand-held shower heads, temperature controls, & floor drain | Medical Gases:  \_\_\_ 1 OX (may be portable) | Table 2.1-3 |
|  | \_\_\_ dedicated holding tank  check if not included in project  (only if allowed by local codes or other jurisdictional authorities) |  |  |
|  | \_\_\_ contaminated rinsate is prevented from leaving decontamination room  \_\_\_ acid-resistant fixtures |  |  |
|  |  |  |  |
| (b) | \_\_\_ Exterior decontamination structures  check if not included in project |  |  |
|  |  |  |  |
| (i) | Location: |  |  |
|  | \_\_\_ exterior decontamination structure is located no less than 30’-0” from entrances & operable windows |  |  |
|  | **or** |  |  |
|  | \_\_\_ exterior decontamination shower equipment is permanently attached to exterior walls & under canopies  \_\_\_ exterior decontamination structure is located no less than 20’-0” from entrances & operable windows |  |  |
|  | \_\_\_ exterior decontamination structure is located no less than 30’-0” from outdoor air intakes |  |  |
|  |  |  |  |
| (ii) | Exterior decontamination structures provide following:  \_\_\_ at least two temperature-controlled shower heads, separated by at least 6’-0”, with separate spigot for attachment of hose  \_\_\_ shelter from environment  \_\_\_ patient privacy  \_\_\_ provision for containment of contaminants/infectious agents  \_\_\_ lighting for patient care & staff safety  \_\_\_ water runoff capability to prevent contaminated water from entering community drainage systems |  |  |
|  |  |  |  |
| 2.2-3.1.3.7  2.2-3.1.3.7(1) | **PATIENT TOILET ROOM**  \_\_\_ At least one for each 6 treatment rooms/ spaces & for each fraction thereof  \_\_\_ handwashing station | Ventilation:  \_\_\_ Min. 10 air changes per hour  \_\_\_ Exhaust  \_\_\_ Negative pressure | Table 7-1 |
|  |  | \_\_\_ No recirculating room units |  |
| 2.2-3.1.3.7(2) | \_\_\_ Patient toilet room for secure holding room  check if not included in project  (only if no secure holding room is provided) |  |  |
|  | \_\_\_ readily accessible to secure holding room |  |  |
| 2.2-3.1.3.7(2)(a) |  |  |  |
| 2.5-2.2.2.6(3) | \_\_\_ toilet room contains toilet & handwashing station |  |  |
|  |  |  |  |
| 2.5-2.2.2.6(4) | Toilet room door: |  |  |
| (a) | \_\_\_ equipped with keyed locks that allow staff to control access to toilet room  check if not included in project |  |  |
|  | (only if allowed by Safety Risk Assessment) |  |  |
| (b) | \_\_\_ door swings outward or is double-acting  \_\_\_ door does not create positive latching condition that may create ligature condition |  |  |
| 2.5-2.2.2.6(5) | ADA-compliant toilet room: |  |  |
| (a) | \_\_\_ thresholds designed to facilitate use & prevent tipping of wheelchairs & other portable wheeled equipment |  |  |
| (b) | \_\_\_ grab bars designed to be ligature resistant & facilitate use (i.e., be graspable) |  |  |
| (c) | \_\_\_ each entry door provides space for health care providers to transfer patients to toilet using portable mechanical lifting equipment |  |  |
| 2.2-3.1.3.7(2)(b) |  |  |  |
| 2.5-7.2.2.6(1) | \_\_\_ grab bars anchored to sustain a concentrated load of 250 pounds |  |  |
| 2.2-3.1.3.7(2)(c) |  |  |  |
| 2.5-7.2.3.3 | Ceilings: |  |  |
| (1) | \_\_\_ monolithic ceilings |  |  |
| (a) | \_\_\_ secured from patient access |  |  |
| (b) | \_\_\_ mechanical, electrical, & plumbing systems concealed above ceiling |  |  |
| (2) | \_\_\_ ventilation grilles of tamper- & ligature-resistant type. |  |  |
| (3) | \_\_\_ ceiling access doors are without gaps & secured with keyed lock and/or tamper-resistant fasteners |  |  |
| 2.2-3.1.3.7(2)(d) |  |  |  |
| **2.5-8.1.2** | **Tamper & ligature resistance:**  \_\_\_ electrical receptacles & other appurtenances are of tamper- & ligature-resistant |  |  |
| 2.2-3.1.3.7(2)(e) |  |  |  |
| **2.5-8.3.4.1** | **\_\_\_ l**uminaires tamper- & ligature-resistant & engineered for specific application |  |  |
|  |  |  |  |
| **2.2-3.1.3.8** | **\_\_\_ Patient shower room**  **check if not included in project** |  |  |
| (2) | (may be combined with patient toilet room) |  |  |
| (1) | \_\_\_ provisions for patient dressing |  |  |
|  |  |  |  |
| 2.2-3.1.4.2 | **AIRBORNE INFECTION ISOLATION (AII) ROOM** |  |  |
|  | Location: |  |  |
| (3) | \_\_\_ AII room visible from nurse station |  |  |
| 2.1‑2.4.2.4 | Architectural Details & Furnishings: |  |  |
| (1)(a) | \_\_\_ perimeter walls ceiling & floor including penetrations constructed to prevent air exfiltration |  |  |
| (1)(b) | \_\_\_ self‑closing devices on all room exit doors  **or**  \_\_\_ activation of audible alarm when AII room is in use as isolation room |  |  |
|  |  |  |  |
|  | \_\_\_ edge seals provided along sides & top of doorframe for any door into AII room |  |  |
| 2.2-3.1.3.6(2) |  |  |  |
| 2.1‑3.2.2.1 | Space Requirements: | Ventilation: |  |
| (1) | New Construction:  \_\_\_ min. clear floor area 120 sf  \_\_\_ min. clear dimension 10’‑0”  **or**  Renovation:  \_\_\_ min. clear floor area 100 sf | \_\_\_ Min. 12 air changes per hour  \_\_\_ Exhaust  \_\_\_ Negative pressure  \_\_\_ No recirculating room units  \_\_\_ Exhaust register located directly above patient bed on ceiling or on wall near head of bed | Table 7-1  Part 3/7.2.1 |
| (2)(a) | \_\_\_ room size permits arrangement with min. clearance 3’‑0” at each side & at foot of exam table | Lighting:  \_\_\_ Portable or fixed exam light  Power:  \_\_\_ Min. 8 receptacles in total | 2.1‑8.3.4.3(3)  Table 2.1-1 |
| 2.1‑3.2.2.2(2) | \_\_\_ storage for supplies |  |  |
| 2.1‑3.2.2.2(3) | \_\_\_ accommodations for written or electronic documentation | \_\_\_ Min. 4 receptacles convenient to head of gurney or bed |  |
| 2.1‑3.2.2.2(4)  (5) | \_\_\_ space for visitor’s chair  \_\_\_ handwashing station | Nurse Call System:  \_\_\_ Emergency call station | Table 2.1-2 |
| 2.2-3.1.3.6(2)(b) | \_\_\_ space for medical equipment | Medical Gases: |  |
|  | \_\_\_ view panel designed for patient visual privacy adjacent to and/or in door | \_\_\_ 1 OX, 1 VAC, 1 MA per patient | Table 2.1-3 |
|  |  |  |  |
| 2.2-3.1.4.3 | **ROOMS SERVING BEHAVIORAL AND MENTAL HEALTH PATIENTS**  check if not included in project |  |  |
|  |  |  |  |
| 2.2-3.1.4.3(1)  (b) | Location:  \_\_\_ locations of designated behavioral & mental health rooms facilitate staff observation & monitoring of patients in these areas |  |  |
|  |  |  |  |
| 2.2-3.1.4.3(2) | \_\_\_ Secure holding room  check if not included in project |  |  |
| 2.2-3.1.4.3(2)(a) | \_\_\_ min. clear floor area of 60 sf  \_\_\_ min. wall length 7’-0”  \_\_\_ maximum wall length 12’-0” | Ventilation:  \_\_\_ Min. 6 air changes per hour | Table 7-1 |
|  |  |  |  |
| 2.2-3.1.4.3(2)(b) | \_\_\_ designed to prevent injury to patients |  |  |
| (i) | \_\_\_ min. ceiling height 9’-0” |  |  |
| (ii) | \_\_\_ finishes, light fixtures, vents & diffusers, & sprinklers are impact-, tamper-, & ligature-resistant |  |  |
| (iii) | \_\_\_ no electrical outlets, medical gas outlets, or similar devices |  |  |
| (iv) | \_\_\_ no sharp corners, edges, or protrusions, & walls be free of objects or accessories of any kind |  |  |
| (v) | \_\_\_ doors swing out & have hardware on exterior side only |  |  |
|  |  |  |  |
| (vi) | \_\_\_ small impact-resistant view panel or window provided in wall adjacent to door or in door for staff observation of patient |  |  |
|  | \_\_\_ glazing in view panel or window fabricated with polycarbonate or laminate on inside of glazing or tempered glass (or with any glazing that meets or exceeds requirements for Class 1.4 per ASTM F1233) |  |  |
| 2.2-3.1.4.3(2)(c) |  |  |  |
| 2.1-7.2.2.3(2)(a) | \_\_\_ min. clear door opening 44.5” in width & 83.25” in height |  |  |
|  |  |  |  |
| 2.2-3.1.4.3(3) | \_\_\_ Flexible secure treatment room  check if not included in project |  |  |
|  |  |  |  |
| 2.2-3.1.4.3(2)(a) | \_\_\_ min. wall length 7’-0”  \_\_\_ maximum wall length 12’-0” | Ventilation:  \_\_\_ Min. 6 air changes per hour | Table 7-1 |
| 2.2-3.1.4.3(2)(b) | \_\_\_ designed to prevent injury to patients |  |  |
| (i) | \_\_\_ min. ceiling height 9’-0” |  |  |
| (ii) | \_\_\_ finishes, light fixtures, vents & diffusers, & sprinklers are impact-, tamper-, & ligature-resistant |  |  |
| (iv) | \_\_\_ no sharp corners, edges, or protrusions, & walls be free of objects or accessories of any kind |  |  |
| (v) | \_\_\_ doors swing out & have hardware on exterior side only |  |  |
| (vi) | \_\_\_ small impact-resistant view panel or window provided in wall adjacent to door or in door for staff observation of patient |  |  |
|  | \_\_\_ glazing in view panel or window fabricated with polycarbonate or laminate on inside of glazing or tempered glass (or with any glazing that meets or exceeds requirements for Class 1.4 per ASTM F1233) |  |  |
| 2.2-3.1.4.3(2)(c) |  |  |  |
| 2.1-7.2.2.3(2)(a) | \_\_\_ min. clear door opening 44.5” in width & 83.25” in height |  |  |
| 2.2-3.1.3.6(1) |  |  |  |
| 2.1‑3.2.2.1 | Space requirements: | Ventilation: |  |
| (1) | New Construction:  \_\_\_ min. clear floor area 120 sf  \_\_\_ min. clear dimension 10’‑0”  **or**  Renovation:  \_\_\_ min. clear floor area 100 sf | \_\_\_ Min. 6 air changes per hour  Lighting:  \_\_\_ Portable or fixed exam light  Power:  \_\_\_ Min. 8 receptacles in total  \_\_\_ Min. 4 receptacles convenient to head of gurney or bed | Table 7-1  2.1‑8.3.4.3(3)  Table 2.1-1 |
|  |  |  |  |
| (2)(a) | \_\_\_ room size permits room arrangement with min. clearance 3’‑0” at each side & at foot of exam table, recliner or chair | Nurse Call System:  \_\_\_ Patient station  Medical Gases:  \_\_\_ 1 OX, 1 VAC, 1 MA per gurney | Table 2.1-2  Table 2.1-3 |
| 2.1‑3.2.2.2(2) | \_\_\_ storage for supplies |  |  |
| 2.1‑3.2.2.2(3) | \_\_\_ accommodations for written or electronic documentation |  |  |
| 2.1‑3.2.2.2(4) | \_\_\_ space for visitor’s chair |  |  |
| 2.1‑3.2.2.2(5) | \_\_\_ handwashing station |  |  |
| 2.2-3.1.3.6(2)(b) | \_\_\_ space for medical equipment |  |  |
|  | \_\_\_ view panel designed for patient visual privacy adjacent\* to and/or in door |  |  |
|  |  |  |  |
|  | Additional requirements: |  |  |
| 2.2-3.1.4.3(3)(a) | \_\_\_ handwashing station located outside flexible secure treatment room  \_\_\_ adjacent to room |  |  |
|  | **or** |  |  |
| 2.2-3.1.4.3(3)(b) | \_\_\_ handwashing station located in flexible secure treatment room  \_\_\_ means for covering & securing handwashing station are provided & are controlled by staff |  |  |
|  |  |  |  |
|  | \_\_\_ means for covering & securing electrical receptacles, medical gas outlets, vacuum inlets, & similar features are provided & are controlled by staff |  |  |
|  |  |  |  |
| 2.2-3.1.4.3(4) | \_\_\_ Behavioral & mental health treatment room  check if not included in project |  |  |
| 2.2-3.1.3.6(1) |  |  |  |
| 2.1‑3.2.2.1 | Space requirements: | Ventilation: |  |
| (1) | New Construction:  \_\_\_ min. clear floor area 120 sf  \_\_\_ min. clear dimension 10’‑0”  **or**  Renovation:  \_\_\_ min. clear floor area 100 sf | \_\_\_ Min. 6 air changes per hour  Lighting:  \_\_\_ Portable or fixed exam light  Power:  \_\_\_ Min. 8 receptacles in total  \_\_\_ Min. 4 receptacles convenient to head of gurney or bed | Table 7-1  2.1‑8.3.4.3(3)  Table 2.1-1 |
| (2)(a) | \_\_\_ room size permits room arrangement with min. clearance 3’‑0” at each side & at foot of exam table, recliner or chair | Nurse Call System:  \_\_\_ Patient station  Medical Gases:  \_\_\_ 1 OX, 1 VAC, 1 MA per gurney | Table 2.1-2  Table 2.1-3 |
| 2.1‑3.2.2.2(2) | \_\_\_ storage for supplies |  |  |
| 2.1‑3.2.2.2(3) | \_\_\_ accommodations for written or electronic documentation |  |  |
| 2.1‑3.2.2.2(4) | \_\_\_ space for visitor’s chair |  |  |
| 2.1‑3.2.2.2(5) | \_\_\_ handwashing station |  |  |
| 2.2-3.1.3.6(2)(b) | \_\_\_ space for medical equipment |  |  |
|  | \_\_\_ view panel designed for patient visual privacy adjacent\* to and/or in door |  |  |
|  |  |  |  |
|  | Additional requirements: |  |  |
| 2.2-3.1.4.3(4)(a) | \_\_\_ all door hardware, sinks, finishes, light fixtures, sprinklers, & outlets are tamper- & ligature-resistant |  |  |
| 2.2-3.1.4.3(4)(b) | \_\_\_ locks are provided on storage devices & cabinetry to prevent patient access |  |  |
| 2.2-3.1.4.3(4)(c) | \_\_\_ room provided with features to limit patient ability to convert equipment into weapons, as follows: |  |  |
| (i) | \_\_\_ cabinetry to enclose or store treatment equipment when this room is used for behavioral patient |  |  |
| (ii) | \_\_\_ any devices are designed to prevent removal through tamper-resistant hardware & structural attachments |  |  |
|  |  |  |  |
| 2.2-3.1.8 | **SUPPORT AREAS FOR EMERGENCY DEPARTMENT** |  |  |
| 2.2-3.1.8.2 | \_\_\_ Administrative center or nurse station |  |  |
| (2) | \_\_\_ nurse master station & central monitoring equipment be provided |  |  |
| (3) | \_\_\_ Decentralized nurse stations near clusters of treatment rooms  check if not included in project |  |  |
| (4) | \_\_\_ Visual observation of traffic into ED & traffic within ED is provided |  |  |
| 2.1‑2.8.2.1(1) | \_\_\_ space for counters |  |  |
| 2.1‑2.8.2.1(2) | \_\_\_ handwashing station next to or directly accessible  **or**  \_\_\_ hand sanitation dispenser next to or directly accessible |  |  |
|  |  |  |  |
| 2.1‑2.8.2.2 | \_\_\_ Center for reception & communication |  |  |
|  | \_\_\_ self‑contained  **or**  \_\_\_ combined with administrative center or nurse station |  |  |
|  |  |  |  |
| 2.2-3.1.8.11 | \_\_\_ Clean supply room |  |  |
| 2.1‑2.8.11.3 | \_\_\_ used only for storage & holding as part of system for distribution of clean & sterile supplies | Ventilation:  \_\_\_ Min. 4 air changes per hour  \_\_\_ Positive pressure | Table 7-1 |
|  |  |  |  |
| 2.2-3.1.8.12 | \_\_\_ Soiled workroom | Ventilation: |  |
| 2.1‑2.8.12.2 |  | \_\_\_ Min. 10 air changes per hour | Table 7-1 |
| (1)(a) | \_\_\_ handwashing station | \_\_\_ Exhaust |  |
| (1)(b) | \_\_\_ flushing‑rim clinical service sink with bedpan‑rinsing device or equivalent flushing‑rim fixture | \_\_\_ Negative pressure  \_\_\_ No recirculating room units |  |
| (1)(c) | \_\_\_ work counter |  |  |
| (1)(d) | \_\_\_ space for separate covered containers for waste & soiled linen |  |  |
| (2) | \_\_\_ fluid management system is used  check if not included in project |  |  |
| (a) | \_\_\_ electrical & plumbing connections that meet manufacturer requirements |  |  |
| (b) | \_\_\_ space for docking station |  |  |
| 2.2-3.1.8.13 |  |  |  |
| (1) | \_\_\_ Wheelchair & gurney storage area for arriving patients |  |  |
|  |  |  |  |
| (2) | \_\_\_ Emergency equipment storage |  |  |
| 2.1‑2.8.13.4(2) | \_\_\_ provided under visual observation by staff |  |  |
| (3) | \_\_\_ storage locations in corridors do not encroach on min. required corridor width |  |  |
|  |  |  |  |
| 2.2-3.1.8.14 | \_\_\_ Environmental services room  \_\_\_ directly accessible from ED |  |  |
| 2.1‑2.8.14.2(1) | \_\_\_ service sink or floor‑mounted mop sink | Ventilation:  \_\_\_ Min. 10 air changes per hour | Table 7-1 |
| 2.1‑2.8.14.2(2) | \_\_\_ provisions for storage of supplies & housekeeping equipment | \_\_\_ Exhaust  \_\_\_ Negative pressure  \_\_\_ No recirculating room units |  |
| 2.1‑2.8.14.2(3) | \_\_\_ handwashing station  **or**  \_\_\_ hand sanitation station |  |  |
|  |  |  |  |
| 2.2-3.1.8.16 | \_\_\_ Security station |  |  |
|  | \_\_\_ located near emergency entrances & triage/reception area  \_\_\_ means of observing public waiting areas  \_\_\_ means of observing ED pedestrian ambulance entrance  \_\_\_ means of observing ED ambulance entrance  \_\_\_ means of controlling access |  |  |
|  |  |  |  |
| 2.2-3.1.9 | **SUPPORT AREAS FOR EMERGENCY DEPARTMENT STAFF** |  |  |
|  | Location:  \_\_\_ staff support areas immediately accessible to Emergency Department |  |  |
| 2.1‑2.9.1 | \_\_\_ Staff lounge |  |  |
|  | \_\_\_ min.100 sf |  |  |
| 2.1‑2.9.2 | \_\_\_ Staff toilet room (permitted to be unisex) |  |  |
| 2.1‑2.9.2.1 | \_\_\_ readily accessible to patient care areas | Ventilation:  \_\_\_ Min. 10 air changes per hour | Table 7-1 |
| 2.1‑2.9.2.2 | \_\_\_ toilet & handwashing station | \_\_\_ Exhaust  \_\_\_ Negative pressure  \_\_\_ No recirculating room units |  |
| 2.1‑2.9.3 | \_\_\_ Staff storage facilities |  |  |
| 2.1‑2.9.3.1 | \_\_\_ securable closets or cabinet compartments for personal staff articles  \_\_\_ located in or near nurse station |  |  |
|  |  |  |  |

LOCATION TERMINOLOGY:

Directly accessible: Connected to the identified area or room through doorway, pass-through, or other opening without going through intervening room or public space

Adjacent: Located next to but not necessarily connected to the identified area or room

Immediately accessible: Available either in or adjacent to the identified area or room

Readily accessible: Available on the same floor or in the same clinic as the identified area or room

Architectural Details & MEP Requirements

|  |  |
| --- | --- |
| 2.1‑7.2.2 | **ARCHITECTURAL DETAILS** |
|  |  |
| 2.1‑7.2.2.1  NFPA 101, 18.2.3.3 | CORRIDOR WIDTH:  \_\_\_ Aisles, corridors & ramps required for exit access in hospital not less than 8'‑0" in clear & unobstructed width  **or**  \_\_\_ Detailed code review incorporated in Project Narrative |
|  | \_\_\_ Aisles, corridors & ramps in adjunct areas not intended for the treatment or use of inpatients not less than 44” in clear & unobstructed width |
|  |  |
| 2.1‑7.2.2.2 | CEILING HEIGHT: |
| (1) | \_\_\_ Min. ceiling height 7’-6” in corridors & in normally unoccupied spaces |
| (2) | \_\_\_ Min. ceiling height 9'-0" in seclusion rooms & secure holding rooms |
| (3) | \_\_\_ Min height 7’‑6” above floor of suspended tracks rails & pipes located in traffic path for patients in beds & on stretchers |
|  | \_\_\_ Min ceiling height 7’‑10” in other areas |
|  |  |
| 2.1‑7.2.2.3  (1)  (a)  (b) | DOORS & DOOR HARDWARE:  Door Type:  \_\_\_ doors between corridors, rooms, or spaces subject to occupancy swing type or sliding doors  \_\_\_ sliding doors  check if not included in project |
|  | \_\_\_ manual or automatic sliding doors comply with NFPA 101  \_\_\_ detailed code review incorporated in Project Narrative  \_\_\_ no floor tracks |
| (2)  (a) | Door Opening:  \_\_\_ 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  \_\_\_ min. clear width 34.5” |
|  |  |
| (3) | Door Swing: |
| (a) | \_\_\_ doors do not swing into corridors except doors to non‑occupiable spaces (e.g. environmental services rooms & electrical closets) & doors with emergency breakaway hardware |
|  |  |
| (4) | \_\_\_ Lever hardware or push/pull latch hardware |
|  |  |
| (5) | Doors for Patient Toilet Facilities: |
| (a) | \_\_\_ two separate doors  **or** |
|  | \_\_\_ door that swings outward  **or** |
|  | \_\_\_ door equipped with emergency rescue hardware (permits quick access from outside the room to prevent blockage of the door)  **or** |
|  | \_\_\_ sliding door other than pocket door |
|  |  |
| (b) | \_\_\_ toilet room opens onto public area or corridor  check if not included in project |
|  | \_\_\_ visual privacy is maintained |
| 2.1‑7.2.2.7 | GLAZING MATERIALS:  \_\_\_ Glazing within 1 foot 6 inches of floor  check if not included in project |
|  | \_\_\_ must be safety glass, wire glass or plastic break‑resistant material |
| 2.1‑7.2.2.8 | HANDWASHING STATIONS: |
| (1)(c) | \_\_\_ Handwashing stations in patient care areas located so they are visible & unobstructed |
| (3)(a) | \_\_\_ Handwashing station countertops made of porcelain, stainless steel, solid‑surface materials or impervious plastic laminate assembly |
| (3)(b) | \_\_\_ Countertops substrate  check if not included in project  \_\_\_ marine‑grade plywood (or equivalent material) with impervious seal |
| (4) | \_\_\_ Handwashing station casework  check if not included in project  \_\_\_ designed to prevent storage beneath sink |
| (5) | \_\_\_ Provisions for drying hands  check if not included in project  (only in the case of hand scrub facilities) |
| (a) | \_\_\_ hand‑drying device does not require hands to contact dispenser |
| (b) | \_\_\_ hand‑drying device is enclosed to protect against dust or soil & to ensure single‑unit dispensing |
| (6) | \_\_\_ liquid or foam soap dispensers |
| (7) | \_\_\_ No mirror at hand scrub stations or at handwashing stations in clean & sterile supply areas |
|  |  |
| 2.1‑7.2.2.9 | GRAB BARS: |
| (1) | \_\_\_ Grab bars anchored to sustain concentrated load 250 pounds |
| (3) | \_\_\_ Ends of grab bars constructed to prevent snagging clothes of patients staff & visitors |
|  |  |
| 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) | \_\_\_ Handrail gripping surfaces & fasteners are smooth (free of sharp or abrasive elements) with 1/8‑inch min. radius |
| (5) | \_\_\_ Handrails have eased edges & corners |
| (6) | \_\_\_ Handrail finishes are cleanable |
| 2.1‑7.2.2.12 | NOISE CONTROL: |
| (1) | \_\_\_ Recreation rooms, exercise rooms equipment rooms & similar spaces where impact noises may be generated are not located directly over operating suites  **or**  \_\_\_ Special provisions are made to minimize impact noise |
| (2) | \_\_\_ Noise reduction criteria in Table 1.2‑6 applicable to partitions, floors & ceiling construction are met in patient areas |
| 2.1‑7.2.3 | **SURFACES** |
| 2.1‑7.2.3.1 | FLOORING & WALL BASES: |
| (1) | \_\_\_ Flooring surfaces cleanable & wear‑resistant for location |
| (3) | \_\_\_ Smooth transitions provided between different flooring materials |
| (4) | \_\_\_ Flooring surfaces including those on stairways are stable, firm & slip‑resistant |
| (5) | \_\_\_ Floors & wall bases of soiled workrooms, toilet rooms & other areas subject to frequent wet cleaning are constructed of materials that are not physically affected by germicidal or other types of cleaning solutions |
| (7)(a) | Floors are monolithic & integral coved wall bases are at least 6” high & tightly sealed to wall in rooms listed below: |
|  | \_\_\_ airborne infection isolation (AII) room |
|  | \_\_\_ soiled workroom & soiled holding room |
|  | \_\_\_ trauma rooms |
| 2.1‑7.2.3.2 | WALLS & WALL PROTECTION: |
| (1)(a) | \_\_\_ Wall finishes are washable |
| (1)(b) | \_\_\_ Wall finishes near plumbing fixtures are smooth, scrubbable & water‑resistant |
| (2) | \_\_\_ Wall surfaces in areas routinely subjected to wet spray or splatter (e.g. environmental services rooms) are monolithic or have sealed seams that are tight & smooth |
|  |  |
| (5) | \_\_\_ Wall protection devices & corner guards durable & scrubbable |
|  |  |
| 2.1‑7.2.3.3 | CEILINGS: |
| (1) | \_\_\_ Ceilings provided in all areas except mechanical, electrical & communications equipment rooms |
| (a) | \_\_\_ Ceilings cleanable with routine housekeeping equipment |
| (b) | \_\_\_ Acoustic & lay‑in ceilings where used do not create ledges or crevices |
|  |  |
| (2) | Semi‑Restricted Areas:  check if not included in project |
| (a) | \_\_\_ ceiling finishes are scrubbable, non absorptive, non perforated, & capable of withstanding cleaning with chemicals |
| (b) | \_\_\_ lay‑in ceilings  \_\_\_ gasketed or each ceiling tile weighs at least one pound per square foot |
| (c) | \_\_\_ use of perforated tegular serrated or highly textured tiles not are permitted in semi‑restricted areas |
|  | **or**  \_\_\_ ceilings of monolithic construction |
|  |  |
| 2.1‑7.2.4 | FURNISHINGS: |
| 2.1‑7.2.4.1 | \_\_\_ built‑in furnishings upholstered with impervious materials in patient treatment areas with risks of exposure & contamination from bodily fluids & other fluids |
| 2.1‑7.2.4.3 | \_\_\_ Privacy curtains in patient care areas are washable |

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| 2.1‑8.2 | **HEATING VENTILATION & AIR‑CONDITIONING (HVAC) SYSTEMS** |
| Part 3/6.1 | UTILITIES: |
| Part 3/6.1.1 | Ventilation Upon Loss of Electrical Power:  \_\_\_ space ventilation & pressure relationship requirements of Table 7-1 are maintained for AII Rooms PE Rooms Operating Rooms in event of loss of normal electrical power |
|  |  |
| Part 3/6.1.2 | Heating & Cooling Sources: |
| Part 3/6.1.2.1 | \_\_\_ heat sources & essential accessories provided in number & arrangement sufficient to accommodate facility needs (reserve capacity) even when any one of heat sources or essential accessories is not operating due to breakdown or routine maintenance  \_\_\_ capacity of remaining source or sources is sufficient to provide heating for operating rooms & recovery rooms |
|  |  |
| Part 3/6.1.2.2 | Central cooling systems greater than 400 tons (1407 kW) peak cooling load  check if not included in project  \_\_\_ number & arrangement of cooling sources & essential accessories is sufficient to support owner’s facility operation plan upon breakdown or routine maintenance of any one of cooling sources. |
| Part 3/6.2 | AIR-HANDLING UNIT (AHU) DESIGN: |
| Part 3/6.2.1 | \_\_\_ AHU casing is designed to prevent water intrusion resist corrosion & permit access for inspection & maintenance |
| . |  |
| Part 3/6.3 | OUTDOOR AIR INTAKES & EXHAUST DISCHARGES: |
| Part 3/6.3.1 | Outdoor Air Intakes: |
| Part 3/6.3.1.1 | \_\_\_ located such that shortest distance from intake to any specific potential outdoor contaminant source be equal to or greater than separation distance listed in Table 6-1 |
|  | \_\_\_ located min of 25’-0” from cooling towers & all exhaust & vent discharges  \_\_\_ air intakes located away from public access  \_\_\_ all intakes are designed to prevent entrainment of wind-driven rain  \_\_\_ contain features for draining away precipitation  \_\_\_ equipped with birdscreen of mesh no smaller than 0.5 in |
|  |  |
| Part 3/6.3.1.4 | \_\_\_ intake in areaway  check if not included in project  \_\_\_ bottom of areaway air intake opening is at least 6’-0” above grade  \_\_\_ bottom of air intake opening from areaway into building is at least 3’-0” above bottom of areaway |
|  |  |
| Part 3/6.3.2 | Exhaust Discharges: |
| Part 3/6.3.2.1 | \_\_\_ ductwork within building is under negative pressure for exhaust of contaminated air (i.e. air from AII rooms) |
|  | \_\_\_ exhaust discharge outlets with contaminated air located such that they reduce potential for recirculation of exhausted air back into building |
| Part 3/6.3.2.2 | \_\_\_ exhaust discharge outlets with contaminated air additionally is arranged to discharge to atmosphere in vertical direction at least 10’-0” above adjoining roof level |
|  | \_\_\_ exhaust discharge outlets from AII rooms, bronchoscopy & sputum collection exhaust are located not less than 25’-0” horizontally from outdoor air intakes openable windows/ doors & areas that are normally accessible to public |
|  |  |
| Part 3/6.4 | FILTRATION: |
| a. | \_\_\_ Particulate matter filters, min. MERV-8 provided upstream of first heat exchanger surface of any air-conditioning system that combines return air from multiple rooms or introduces outdoor air. |
| b. | \_\_\_ Outdoor air filtered in accordance with Table 7-1 |
| c. | \_\_\_ Air supplied from equipment serving multiple or different spaces is filtered in accordance with Table 7-1 |
| d. | \_\_\_ Air recirculated within room is filtered in accordance with Table 7-1, or Section 7.1(a)(5) |
| e. | \_\_\_ Design includes all necessary provisions to prevent moisture accumulating on filters located downstream of cooling coils & humidifiers |
| h. | \_\_\_ For spaces that do not permit air recirculated by means of room units & have min. filter efficiency of MERV-14, MERV-16 or HEPA in accordance with Table 7-1, the min. filter requirement listed in Table 7-1, is installed downstream of all wet-air cooling coils & supply fan |
|  |  |
| Part 3/6.5 | HEATING & COOLING SYSTEMS: |
| Part 3/6.5.3 | \_\_\_ Radiant heating systems  check if not included in project  \_\_\_ ceiling or wall panels with exposed cleanable surfaces or radiant floor heating are provided in AII room, PE room, operating room or procedure room |
|  |  |
| Part 3/6.7 | AIR DISTRIBUTION SYSTEMS: |
| Part 3/6.7.1 | \_\_\_ Maintain pressure relationships required in tables 7.1 in all modes of HVAC system operation  \_\_\_ Spaces that have required pressure relationships are served by fully ducted return systems or fully ducted exhaust systems  \_\_\_ Inpatient facilities & recovery rooms are served by fully ducted return or exhaust systems |
|  |  |
| Part 3/6.7.2 | Air Distribution Devices: |
|  | \_\_\_ supply air outlets comply with Table 6-2 |
| Part 3/6.7.3 | Smoke Barriers:  \_\_\_ HVAC zones coordinated with compartmentation to minimize ductwork penetrations of fire & smoke barriers. |
|  |  |
| Part 3/6.8 | ENERGY RECOVERY SYSTEMS:  check if not included in project |
| Part 3/6.8.1 | \_\_\_ Located upstream of filters required by Part 3/6.8.4 |
| Part 3/6.8.2 | \_\_\_ AII room exhaust systems or combination AII/PE rooms are not used for energy recovery |
|  |  |
| Part 3/7 | SPACE VENTILATION—HOSPITAL SPACES: |
| Part 3/7.1.a  Part 3/7.1.a.1 | \_\_\_ Spaces ventilated according to Table 7-1  \_\_\_ Air movement is from clean to less-clean areas |
|  |  |
| Part 3/7.1.a.3 | \_\_\_ Min number of total air changes required for positive pressure rooms is provided by total supply airflow  \_\_\_ Min number of total air changes required for negative pressure rooms is provided by total exhaust airflow |
| Part 3/7.1.a.4 | \_\_\_ Entire min. outdoor air changes per hour required by Table 7-1 for each space meet filtration requirements of Section 6.4 |
|  |  |
| Part 3/7.1a.5 | \_\_\_ Air recirculation through room unit  check if not included in project  \_\_\_ complies with Table 7-1 |
|  | \_\_\_ room unit receive filtered & conditioned outdoor air  \_\_\_ serve only single space |
|  | \_\_\_ provides min MERV 8 filter located upstream of any cold surface so that all of air passing over cold surface is filtered |
|  |  |
| Part 3/7.2 | ADDITIONAL ROOM-SPECIFIC REQUIREMENTS: |
| Part 3/7.2.1 | Airborne Infection Isolation (AII) Rooms  check if not included in project |
|  | \_\_\_ AII rooms have permanently installed device and/or mechanism to constantly monitor differential air pressure between room & corridor  \_\_\_ Local visual means is provided to indicate whenever negative differential pressure is not maintained |
|  | \_\_\_ Air from AII room is exhausted directly to outdoors |
|  | Exhaust air from AII rooms, associated anterooms & toilet rooms:  \_\_\_ is discharged directly to outdoors without mixing with exhaust air from any other non-AII room or exhaust system |
|  | **or** |
|  | \_\_\_ is discharged into the general exhaust stream, provided the All room exhaust air first passes through HEPA filter (all exhaust ductwork kept under negative pressure) |
|  | \_\_\_ Exhaust air grille or register in patient room is located directly above patient bed on ceiling or on wall near head of bed |
|  | \_\_\_ Anteroom  check if not included in project  \_\_\_ AII room is at negative pressure with respect to anteroom  \_\_\_ Anteroom is at negative pressure with respect to corridor |

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| 2.1‑8.3 | **ELECTRICAL SYSTEMS** |
| 2.1‑8.3.2 | **ELECTRICAL DISTRIBUTION & TRANSMISSION** |
| 2.1‑8.3.2.2 | Panelboards: |
| (1) | \_\_\_ panelboards serving life safety branch circuits serve floors on which they are located & floors immediately above & below |
| (2) | \_\_\_ panelboard critical branch circuits serve floors on which they are located |
| (3) | \_\_\_ panelboards not located in exit enclosures or exit passageways |
| 2.1-8.3.3 | **POWER-GENERATING & -STORING EQUIPMENT** |
| 2.1-8.3.3.1 | \_\_\_ Essential electrical system or emergency electrical power |
| (1) | \_\_\_ essential electrical system complies with NFPA 99 |
| (2) | \_\_\_ emergency electrical power complies with NFPA 99 |
| 2.1‑8.3.4 | **LIGHTING** |
| 2.1-8.3.4.1(1) | \_\_\_ Luminaires in patient areas have smooth, cleanable, impact-resistant lenses concealing light source |
| 2.1-8.3.4.1(2) | \_\_\_ Luminaires designed to dissipate heat such that touchable surfaces will not burn occupants or ignite materials. |
| (3) | Exam/treatment/trauma rooms:  \_\_\_ portable or fixed exam light |
| (7) | \_\_\_ Uplight fixtures installed in patient care areas are covered |
| 2.1‑8.3.5 | **ELECTRICAL EQUIPMENT** |
| 2.1‑8.3.5.1 | \_\_\_ Handwashing sinks & scrub sinks that depends on building electrical service for operation are connected to essential electrical system |
| 2.1‑8.3.5.2 | \_\_\_ Electronic health record system servers & centralized storage provided with uninterruptible power supply |
|  |  |
| 2.1‑8.3.6 | **ELECTRICAL RECEPTACLES** |
| 2.1‑8.3.6.1 | Receptacles In Corridors: |
| (1) | \_\_\_ duplex‑grounded receptacles for general use installed 50’‑0” apart or less in all corridors  \_\_\_ duplex‑grounded receptacles for general use installed within 25’‑0” of corridor ends |
| 2.1‑8.3.6.3 | Essential Electrical System Receptacles: |
| (1) | \_\_\_ cover plates for electrical receptacles supplied from essential electrical system are distinctively colored or marked for identification |
| (2) | \_\_\_ same color is used throughout facility |
|  |  |
| 2.1‑8.4 | **PLUMBING SYSTEMS** |
| 2.1‑8.4.2 | Plumbing & Other Piping Systems: |
| 2.1‑8.4.2.1(3) | \_\_\_ no plumbing piping exposed overhead or on walls where possible accumulation of dust or soil may create cleaning problem |
|  |  |
| 2.1‑8.4.2.5 | Heated Potable Water Distribution Systems: |
| (2) | \_\_\_ heated potable water distribution systems serving patient care areas are under constant recirculation  \_\_\_ non‑recirculated fixture branch piping does not exceed 25’‑0” in length |
| (3)(a)  (3)(c) | \_\_\_ no installation of dead‑end piping (except for empty risers mains & branches for future use) |
| (3)(b) | \_\_\_ any existing dead‑end piping is removed  ☐ check if not included in project |
| (4)(a) | \_\_\_ water‑heating system supplies water at temperatures & amounts indicated in Table 2.1‑4 |
|  |  |
| 2.1‑8.4.2.6 | Drainage Systems: |
| (1)(a) | \_\_\_ drainage piping installed above ceiling of or exposed in rooms listed below piping have special provisions (e.g.double wall containment piping or oversized drip pans) to protect space below from leakage & condensation |
|  | * operating rooms * delivery rooms * procedure rooms * trauma rooms * nurseries * central kitchens * one-room sterile processing facilities * clean workroom of two-room sterile processing facilities * pharmacies * Class 2 & 3 imaging rooms * electronic mainframe rooms (EFs & TERs) * main switchgear * electrical rooms * electronic data processing areas * electric closets |
| (1)(b) | \_\_\_ drip pan for drainage piping above ceiling of sensitive area  ☐ check if not included in project  \_\_\_ accessible  \_\_\_ overflow drain with outlet located in normally occupied area that is not open to restricted area |
|  |  |
| 2.1‑8.4.3 | **PLUMBING FIXTURES** |
| 2.1‑8.4.3.1(1) | \_\_\_ Materials used for plumbing fixtures are non‑absorptive & acid‑resistant |
|  |  |
| 2.1‑8.4.3.2 | Handwashing Station Sinks: |
| (1) | \_\_\_ designed with basins & faucets that reduce risk of splashing to areas where direct patient care is provided, sterile procedures are performed, medications are prepared or food is prepared |
| (2) | \_\_\_ sink basins have nominal size of no less than 144 square inches  \_\_\_ sink basins have min dimension 9 inches in width or length |
| (3) | \_\_\_ sink basins are made of porcelain stainless steel or solid‑surface materials |
| (5) | \_\_\_ water discharge point of faucets is at least 10” above bottom of basin |
| (7) | \_\_\_ anchored so that allowable stresses are not exceeded where vertical or horizontal force of 250 lbs is applied |
| (8) | \_\_\_ sinks used by medical & nursing staff patients & public have fittings that can be operated without using hands (may be single‑lever or wrist blade devices) |
| (a) | \_\_\_ blade handles  ☐ check if not included in project  \_\_\_ at least 4 inches in length |
|  | \_\_\_ provide clearance required for operation |
| (b) | \_\_\_ sensor‑regulated water fixtures  check if not included in project |
|  | \_\_\_ meet user need for temperature & length of time water flows |
|  | \_\_\_ designed to function at all times & during loss of normal power |
| 2.1‑8.4.3.4 | Ice‑Making Equipment:  \_\_\_ copper tubing provided for supply connections to ice‑making equipment |
| 2.1‑8.4.3.5 | Clinical Flushing-Rim Sinks: |
| (1)  (a) | \_\_\_ trimmed with valves that can are operated without hands (may be single‑lever or wrist blade devices) |
| (b) | \_\_\_ handles are at least 6 in long |
| (2) | \_\_\_ integral trap wherein upper portion of water trap provides visible seal |
| 2.1‑8.4.3.6 | Scrub Sinks:  check if not included in project |
| (1) | \_\_\_ freestanding scrub sinks are trimmed with foot knee or electronic sensor controls |
| (2) | \_\_\_ no single‑lever wrist blades except for temperature pre‑set valve |
|  |  |
| 2.1‑8.4.4 | **MEDICAL GAS & VACUUM SYSTEMS** |
|  | \_\_\_ Station outlets provided as indicated in Table 2.1‑3 |
| 2.1‑8.5.1 | **CALL SYSTEMS** |
| 2.1‑8.5.1.1(1) | \_\_\_ Nurse call stations provided as required in Table 2.1‑2 |
| 2.1‑8.5.1.1(2) | \_\_\_ Nurse call systems report to attended location with electronically supervised visual & audible annunciation as indicated in Table 2.1‑2 |
| 2.1‑8.5.1.1(4) | \_\_\_ Call system complies with UL 1069 “Standard for Hospital Signaling & Nurse Call Equipment” |
| 2.1‑8.5.1.1(5) | \_\_\_ Wireless nurse call system  ☐ check if not included in project |
|  | \_\_\_ complies with UL 1069 |
| 2.1‑8.5.1.2(4) | \_\_\_ Nurse call system provided in each patient care area as required in Table [2.1‑2](http://www.madcad.com/library/230687/664174/#table-2.1-2) |
| 2.1‑8.5.1.3 | Bath Stations:  \_\_\_ bath station that can be activated by patient lying on floor provided at each patient toilet |
| (1) | \_\_\_ alarm in these areas can be turned off only at bath station where it was initiated |
| (3) | \_\_\_ toilet bath stations located on the side of toilets within 12” of front of toilet bowl & 3'-0" to 4’‑0” above floor |
| 2.1‑8.5.1.5 | \_\_\_ Emergency call stations are equipped with continuous audible or visual confirmation to person who initiated the code call |
|  |  |
| 2.1‑8.5.3 | **EMERGENCY COMMUNICATION SYSTEM** |
|  | \_\_\_ Emergency‑radio communication system provided in each facility |
| 2.1‑8.5.3.1 | \_\_\_ operates independently of building’s service & emergency power systems during emergencies |
| 2.1‑8.5.3.2 | \_\_\_ frequency capabilities to communicate with state emergency communication networks |
|  |  |
| 2.1‑8.6.2 | **ELECTRONIC SURVEILLANCE SYSTEMS**  ☐ check if not included in project |
| 2.1-8.6.2.1 | \_\_\_ Display screens in patient areas are mounted in tamper-resistant enclosure that is unobtrusive |
| 2.1-8.6.2.2 | \_\_\_ Display screens are located so they are not readily observable by general public or patients |
| 2.1‑8.6.2.3 | \_\_\_ Electronic surveillance systems receive power from essential electrical system |