

COMPLIANCE CHECKLIST**IP28 Rehabilitation Hospitals**

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 2018 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:

- NFPA 101 Life Safety Code (2012) and applicable related standards contained in the appendices of the Code
- State Building Code (780 CMR)
- Accreditation requirements of The Joint Commission
- CDC Guidelines for Preventing the Transmission of Mycobacterium Tuberculosis in Health Care Facilities
- USP 797 & Regulations of the Massachusetts Board of Registration in Pharmacy
- Occupational Safety & Health Standards (OSHA)
- 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 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.

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, waste anesthesia gas disposal and instrument air outlets (if required) are identified respectively by the abbreviations "OX", "VAC", "MA", "WAGD" & "IA".
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 and reproduced in this checklist.

Facility Name:

DoN Project Number: (if applicable)

Facility Address:

Patient Care Unit Bed Complements:

Current = Proposed =

Satellite Name: (if applicable)

Building/Floor Location:

Satellite Address: (if applicable)

Submission Dates:

Initial Date:

Revision Date:

Project Description:

Architectural Requirements**Building Systems Requirements**

2.6

REHABILITATION HOSPITALS

2.6-1.1

APPLICATION

2.6-1.1.1

___ facilities that provide acute rehabilitation hospital care & identify themselves to general public as rehabilitation hospitals, rehabilitation inpatient health care centers or rehabilitation centers of excellence

2.6-2.1.3

ACCOMMODATIONS FOR CARE OF PATIENTS OF SIZE

2.1-2.3.1.1

☐ check if not included in project (only if a Patient Handling & Movement Assessment that determines that the facility does not need expanded-capacity lifts & architectural details that support movement of patients of size in patient areas is attached to the 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

2.1-2.3.2

Patient Rooms:

(1)

___ Patient rooms designated for patients of size are single-patient rooms

(2)

___ Lift system (e.g. ceiling- or wall-mounted) in rooms designated for care of patients who weigh 600 lbs. or more
___ can transfer patient from bed to toilet

2.1-2.3.2.2

Space Requirements:

(2)(a)

___ min. clearance 5'-0" at foot of bed

(2)(b)

___ min. clearance 5'-6" on non-transfer side of bed from edge of expanded-capacity patient bed

(2)(c)

Clearance on Transfer Side of Bed:

___ patient room equipped with ceiling- or wall-mounted lifts
___ rectangular clear floor area min. 10'-6" long by 5'-6" wide measured beginning 2'-0" from headwall

or

___ patient room not equipped with ceiling- or wall-mounted lifts
___ rectangular clear floor area min. 10'-6" long by 7'-0" wide measured beginning 2'-0" from headwall

Architectural Requirements**Building Systems Requirements**

- 2.1-2.3.3 ☐ Airborne infection isolation (AII) room
- 2.1-2.3.3.1 ☐ at least one AII room that meets requirements listed on Page 8 of this Compliance Checklist is provided in facility
- 2.1-2.3.5 ☐ Patient toilet room
- ☐ designated for use by patients of size
- 2.1-2.2.6.2 ☐ serves only one patient room
- 2.1-2.2.6.3(1) ☐ toilet
- 2.1-2.2.6.3(2) ☐ handwashing station
- 2.1-2.2.6.3(3) ☐ bedpan washer
- 2.1-2.3.5.1 ☐ expanded-capacity toilet
- ☐ min. 36" from finished wall to toilet centerline on both sides
- or**
- 2.1-2.3.5.2 ☐ regular toilet
- ☐ min. 44" from finished wall to centerline of toilet on both sides to allow for positioning of expanded-capacity commode over toilet
- 2.1-2.3.5.3 ☐ 46" wide clear floor area extends 72" from front of toilet
- 2.1-2.3.6 ☐ Shower facilities for patients of size
- 2.1-2.3.6.1 ☐ shower stalls min. 4'-0" by 6'-0"
- 2.1-2.3.6.2 ☐ equipped with grab bars capable of supporting 800 lbs.
- 2.1-2.3.6.3 ☐ handheld spray nozzles mounted on side wall
- 2.1-2.3.7 ☐ Single-patient exam or treatment room
- 2.1-2.1.2 ☐ Patient Privacy:
- ☐ provisions to address patient visual & speech privacy
- 2.1-3.2.2.1 (1) ☐ Space Requirements:
- ☐ min. clear floor area 120 sf
- ☐ min. clear dimension 10'-0"
- 2.1-2.3.7.2(1)(a) ☐ min. 5'-0" clearance at foot of expanded-capacity exam table
- 2.1-2.3.7.2(1)(b) ☐ min. 5'-0" clearance on non-transfer side of expanded-capacity exam table
- ☐ Clearance on Transfer Side of Expanded-Capacity Exam Table:
- ☐ with ceiling- or wall-mounted lift
- ☐ min. 5'-0" clearance
- or**
- ☐ without ceiling- or wall-mounted lift
- ☐ min. 7'-0" clearance
- 2.1-3.2.2.2

Ventilation:

- ☐ Min. 10 air changes per hour Table 7.1
- ☐ Exhaust
- ☐ Negative pressure
- ☐ No recirculating room units

Ventilation:

- ☐ Min. 10 air changes per hour Table 7.1
- ☐ Exhaust
- ☐ Negative pressure
- ☐ No recirculating room units

Ventilation:

- ☐ Min. 6 air changes per hour Table 7.1

Lighting:

- ☐ Portable or fixed exam light 2.1-8.3.4.3(3)

Power:

- ☐ Min. 8 receptacles in total Table 2.1-1
- ☐ Min. 4 receptacles convenient to head of gurney or bed
- Nurse Call System:**
- ☐ Staff assistance station Table 2.1-2
- ☐ Emergency call station

Architectural Requirements**Building Systems Requirements**

- (2) ☐ storage for supplies
- (3) ☐ accommodations for written or electronic documentation
- (4) ☐ space for visitor's chair
- (5) ☐ handwashing station

- 2.1-2.3.8 ☐ Equipment & Supply Storage
 - ☐ accommodates size of expanded-capacity equipment
- 2.1-2.3.9 ☐ Waiting areas
- 2.1-2.3.9.1 ☐ sized to accommodate expanded-capacity furniture required for patients & visitors of size
- 2.1-2.3.9.2 ☐ min. 5 percent of seating accommodates person who weighs 600 pounds
- 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
 - ☐ meet requirements of Section 2.1-7.2.2.3 (2)
- (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

Architectural Requirements**Building Systems Requirements**

2.6-2.2.2

2.6-2.2.2.1

2.2-2.2.2.1(1)

2.2-2.2.2.1(2)

PATIENT CARE UNIT – PATIENT ROOM

Capacity:

☐ max. number of beds per room is 1 bed**or**☐ renovation work is undertaken☐ present capacity is more than one patient in each room☐ proposed room capacity is no more than present capacity☐ maximum 2 patients in each room

2.6-2.2.2.2

(1)

Space Requirements:

☐ min. clear floor area 140 sf in single-patient rooms☐ min. clear floor area 125 sf per bed in multiple-patient rooms☐ check if not included in project

(2)(a)

☐ dimensions & arrangement of rooms provide min. clearance 4'-0" between sides & foot of bed & any wall or any other fixed obstruction in both single- & multiple-patient rooms

(2)(b)

☐ turning space for wheelchairs

2.6-2.2.2.3

2.1-7.2.2.5(1)

2.1-7.2.2.5(2)

Windows in Patient Rooms:

☐ each patient room provided with natural light by means of window to outside☐ operable windows in patient rooms☐ check if not included in project☐ window operation is limited with either stop limit/restrictor hardware or open guard/screen☐ prevents passage of 4-inch diameter sphere through opening
☐ insect screens

2.1-7.2.2.6

2.1-7.2.2.5(3)

(a)

☐ min. net glazed area be no less than 8% of required min. clear floor area

(b)

☐ max. 36" windowsill height above finished floor

2.6-2.2.2.4

2.1-2.1.2

Patient Privacy:

☐ provisions are made to address patient visual & speech privacy

2.6-2.2.2.5

2.1-2.2.5.1

Handwashing Station in Patient Room:

☐ provided in patient room in addition to that in toilet room

(1)

☐ adjacent* to entrance to patient room for use by health care personnel & others

Multi-Patient Rooms:

☐ check if not included in project

(2)

☐ handwashing station located outside patients cubicle curtains

Ventilation:

☐ Min. 4 air changes per hour Table 7.1

Lighting:

☐ General lighting 2.1-8.3.4.3(1)☐ Reading light for each bed (a)
☐ controls accessible to patients in bed☐ Night-light located in each patient room (b)☐ no central control of night-lights outside room☐ illuminates path from room entrance to bedside☐ illuminates path between bed and toilet room

Power:

☐ Min. 12 receptacles in total Table 2.1-1☐ Min. 2 receptacles at each side of the head of the bed☐ Min. 2 receptacles on all other walls (not including any TV receptacle)

Nurse Call System:

☐ Patient station Table 2.1-2☐ Staff assistance station☐ Emergency call station

Architectural Requirements**Building Systems Requirements**

2.6-2.2.2.6

- (1) ☐ Patient toilet room
☐ bathing facility/shower located in patient toilet room
☐ space be provided for attendant
or
☐ shared bathing facility centrally located

- (2) ☐ toilet room be sized to provide access for patient in wheelchair

- (3) ☐ portable patient lifts are provided
☐ check if not included in project
☐ door opening into each patient toilet room wide enough to allow health care providers to transfer patients to toilet using portable lift

- (4) ☐ thresholds designed to facilitate use & prevent tipping of wheelchairs & other portable wheeled equipment by patients & staff

- ☐ toilet room serves only one patient room

2.1-2.2.6.2

2.1-2.2.6.3

- (1) ☐ toilet
(2) ☐ handwashing station
(3) ☐ bedpan washer

Ventilation:

- ☐ Min. 10 air changes per hour
☐ Exhaust
☐ Negative pressure
☐ No recirculating room units

Table 7.1

Nurse Call System:

- ☐ Bath station

Table 2.1-2

2.6-2.2.2.7

2.2-2.2.2.7

- (1)(a) ☐ Patient Bathing Facilities:
☐ located in toilet room directly accessible from each patient room

or

- (1)(b) ☐ located in central bathing facility

- (2) ☐ Central Bathing Facilities:
☐ check if not included in project

- (a) ☐ each tub or shower in individual room or enclosure provides privacy for bathing drying & dressing

- (b) ☐ at least one shower or bathtub provided for each patient care unit
☐ at least one bathing facility with space for attendant to accommodate patients on gurneys, carts & wheelchairs (may be shared with multiple patient care units located on separate floors)

- (c) ☐ toilet in separate enclosure in or directly accessible to each central bathing facility
☐ handwashing sink in or directly accessible to each central bathing facility
☐ storage for soap & towels in or directly accessible to each central bathing facility

Ventilation:

- ☐ Min. 10 air changes per hour
☐ Exhaust
☐ Negative pressure
☐ No recirculating room units

Table 7.1

Nurse Call System:

- ☐ Bath station

Table 2.1-2

Ventilation:

- ☐ Min. 10 air changes per hour
☐ Exhaust
☐ Negative pressure

Table 7.1

- ☐ No recirculating room units

Nurse Call System:

- ☐ Bath station

Table 2.1-2

Architectural Requirements**Building Systems Requirements**

- (3) Mobile Lifts, Shower Gurney Devices & Wheelchair Access:
- (a) _____ doorways designed to allow entry of portable/mobile mechanical lifts & shower gurney devices
- (b) _____ thresholds designed to facilitate use & prevent tipping of wheelchairs & other portable wheeled equipment
- (c) _____ patient shower rooms designed to allow entry of portable/mobile mechanical lifts & shower gurney devices
- (d) _____ floor drain grates designed to facilitate use & prevent tipping of wheelchairs & other portable wheeled equipment
- 2.6-2.2.2.7(2)(a) _____ each tub or shower in individual room or privacy enclosure includes space for wheelchair & attendant
- 2.6-2.2.2.7(2)(b) _____ bathtubs or showers provided at ratio of one bathing facility for every 8 beds not otherwise served by bathing facilities in patient toilet rooms
- 2.6-2.2.2.7(2)(c) _____ showers in central bathing facilities min. 16 sf
_____ showers are curb-free & designed for use by patients in wheelchairs
- 2.6-2.2.2.8 Patient Storage:
- _____ each patient provided with individual wardrobe or closet
- (1) _____ min. net depth 2'-0" min. net width 2'-6" & min. volume 25 cubic feet
- (2) _____ shelf in closet or wardrobe
- (3) **or**
_____ at least two accessible drawers or other storage compartments
- 2.6-2.2.4 **PATIENT CARE UNIT – AIRBORNE INFECTION ISOLATION (AII) ROOM**
- 2.6-2.2.4.2 ☐ check if not included in project (only if Infection Control Risk Assessment included in Project Narrative to support the omission of AII Room)
- 2.1-2.4.2.2 _____ Complies with requirements applicable to patient rooms
- (1) _____ Capacity one bed
- (2) _____ Personal protective equipment (PPE) storage at entrance to room

Architectural Requirements

- (3) ☐ Handwashing station
- (4) ☐ Patient toilet room
☐ serves only one AII room
- (5) ☐ bathtub or shower
- 2.1-2.4.2.3 ☐ Anteroom
☐ check if not included in project
- (1) ☐ provides space for persons to don personal protective equipment (PPE) before entering patient room
- (2) ☐ all doors to anteroom have self-closing devices
or
☐ audible alarm activated when AII room is in use as isolation room
- (3)(a) ☐ handwashing station
- (3)(b) ☐ storage for unused PPE
- (3)(c) ☐ disposal/holding container for used PPE
- 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) (a) ☐ window treatments do not include fabric drapes & curtains
- 2.1-2.4.2.5 ☐ room pressure visual or audible alarm

Building Systems Requirements

- Ventilation:
- ☐ Min. 10 air changes per hour Table 7.1
- ☐ Exhaust
- ☐ Negative pressure
- ☐ No recirculating room units
- Ventilation:
- ☐ Min. 10 air changes per hour Table 7.1
- ☐ Exhaust
- ☐ No recirculating room units

SUPPORT AREAS FOR REHABILITATION PATIENT CARE UNIT

- 2.1-2.8.1 ☐ Support areas provided on each patient care unit floor (permitted to be arranged & located to serve more than one patient care unit)
- 2.2-2.2.8.2 ☐ Administrative center or nurse station
- 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*

- Nurse Call System:
- ☐ Nurse master station Table 2.1-2

Architectural Requirements**Building Systems Requirements**

2.1-2.8.2.2	<input type="checkbox"/> Center for reception & communication <input type="checkbox"/> self-contained or <input type="checkbox"/> combined with administrative center or nurse station		
2.2-2.2.8.3	<input type="checkbox"/> Documentation area		
2.1-2.8.3.1	<input type="checkbox"/> work surface to support documentation process	Nurse Call System:	
2.6-2.2.8.4	Offices:	<input type="checkbox"/> Duty station (light/sound signal)	2.1-8.5.1.2(3)(b)
(1)	<input type="checkbox"/> office for nursing staff		
(2)	<input type="checkbox"/> office or other work space for staff who provide psychological & social services		
2.2-2.2.8.5	<input type="checkbox"/> Multipurpose room		
2.1-2.8.5	<input type="checkbox"/> at least one room in facility for patient conferences, reports, education, training sessions & consultation (may serve several patient care units & departments)		
2.2-2.2.8.7	<input type="checkbox"/> Handwashing station		
2.1-2.8.7.1	<input type="checkbox"/> located in each room where hands-on patient care is provided		
2.2-2.2.8.8	<input type="checkbox"/> Medication safety zones		
2.1-2.8.8.1(2)	Design Promoting Safe Medication Use:		
(a)	<input type="checkbox"/> medication safety zones located out of circulation paths		
(b)	<input type="checkbox"/> work space designed so that staff can access information & perform required tasks		
(c)	<input type="checkbox"/> work counters provide space to perform required tasks		
(e)	<input type="checkbox"/> sharps containers placed at height that allows users to see top of container		
(f)	<input type="checkbox"/> max. 45 dBA noise level caused by building systems		
2.1-2.8.8.2(1)	<input type="checkbox"/> medication preparation room		
(a)	<input type="checkbox"/> under visual control of nursing staff		
(b)	<input type="checkbox"/> work counter <input type="checkbox"/> handwashing station <input type="checkbox"/> lockable refrigerator <input type="checkbox"/> locked storage for controlled drugs <input type="checkbox"/> sharps containers <input type="checkbox"/> <input type="checkbox"/> check if <u>not</u> included in project	Lighting:	
		<input type="checkbox"/> Task lighting	2.1-2.8.8.1(2)(d)
		Ventilation:	
		<input type="checkbox"/> Min. 4 air changes per hour	Table 7.1
		Nurse Call System:	
		<input type="checkbox"/> Duty station (light/sound signal)	Table 2.1-2
(c)	<input type="checkbox"/> self-contained medication-dispensing unit <input type="checkbox"/> <input type="checkbox"/> check if <u>not</u> included in project <input type="checkbox"/> room designed with space to prepare medications		

Architectural Requirements		Building Systems Requirements	
2.1-2.8.8.2(2) (a) (c)	or ___ automated medication-dispensing unit ___ located at nurse station, in clean workroom or in alcove ___ handwashing station located next to stationary medication-dispensing units or stations	Nurse Call System: ___ Duty station (light/sound signal) Ventilation: ___ Min. 2 air changes per hour Nurse Call System: ___ Duty station (light/sound signal)	Table 2.1-2 Table 7.1 2.1-8.5.1.2(3)(b)
	___ Nourishment area or room		
	___ handwashing station ___ work counter ___ refrigerator ___ microwave ___ storage cabinets ___ space for temporary storage of food service implements		
2.1-2.8.9.3	___ provisions & space are included for separate temporary storage of unused & soiled meal trays		
2.2-2.2.8.10	___ Ice-making equipment ___ located in each patient care unit ___ equipment to provide ice for treatments & for nourishment		
2.2-2.2.8.11 2.1-2.8.11.2	___ Clean workroom or clean supply room ___ clean workroom ___ used for preparing patient care items ___ work counter ___ handwashing station ___ storage facilities for clean & sterile supplies	Ventilation: ___ Min. 4 air changes per hour ___ Positive pressure Nurse Call System: ___ Duty station (light/sound signal)	Table 7.1 Table 2.1-2
(1) (2)	___ work counter ___ handwashing station		
(3)	___ storage facilities for clean & sterile supplies		
2.1-2.8.11.3	or ___ clean supply room ___ 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
2.2-2.2.8.12 2.1-2.8.12.2	___ Soiled workroom or soiled holding room ___ soiled workroom	Ventilation: ___ Min. 10 air changes per hour ___ Exhaust ___ Negative pressure ___ No recirculating room units	Table 7.1
(1)(a) (1)(b)	___ handwashing station ___ flushing-rim clinical service sink with bedpan-rinsing device or equivalent flushing-rim fixture	Nurse Call System: ___ Duty station (light/sound signal)	Table 2.1-2
(1)(c)	___ work counter		

Architectural Requirements**Building Systems Requirements**

- (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
- or**
- 2.1-2.8.12.3 ☐ soiled holding room
- (1) ☐ handwashing station or hand sanitation station
- (2) ☐ space for separate covered containers for waste & soiled linen

Ventilation:

- ☐ Min. 10 air changes per hour Table 7.1
- ☐ Exhaust
- ☐ Negative pressure
- ☐ No recirculating room units

- 2.1-2.8.13.1 ☐ Clean linen storage
- (1) ☐ stored in clean workroom
- or**
- ☐ separate closet
- or**
- ☐ covered cart distribution system on each floor
- (2) ☐ storage of clean linen carts in designated corridor alcoves, clean workroom or closets

- 2.6-2.2.8.13(1) ☐ Clean linen storage
- 2.6-2.2.8.13(2) ☐ Equipment storage room storage room be provided for equipment such as IV stands inhalators air mattresses & walkers
- 2.6-2.2.8.13(3) ☐ Storage space for stretchers & wheelchairs
- 2.6-2.2.8.13(4) ☐ Equipment storage space with power outlets for charging equipment
- 2.6-2.2.8.13(5) ☐ Storage for administrative supplies

- 2.1-2.8.13.4 ☐ Emergency equipment storage
- (1) ☐ each patient care unit has at least one emergency equipment storage location
- (2) ☐ provided under visual observation of staff
- (3) ☐ storage locations do not encroach on minimum required corridor width

- 2.2-2.2.8.14 ☐ Environmental services room
- 2.1-2.8.14.1 ☐ readily accessible* to unit or floor it serves (permitted to serve more than one patient care unit on floor)
- 2.1-2.8.14.2(1) ☐ service sink or floor-mounted mop sink
- 2.1-2.8.14.2(2) ☐ provisions for storage of supplies & housekeeping equipment
- 2.1-2.8.14.2(3) ☐ handwashing station
- or**
- ☐ hand sanitation station

Ventilation:

- ☐ Min. 10 air changes per hour Table 7.1
- ☐ Exhaust
- ☐ Negative pressure
- ☐ No recirculating room units

Architectural Requirements**Building Systems Requirements**

- 2.2-2.2.8.15 ☐ Examination room
☐ check if not included in project
 (1) (only if all patient rooms in patient care unit are single-patient rooms)
☐ designed for single patient
 (2) ☐ serves only one patient care unit
or
☐ serves more than one patient care unit on same floor
☐ centrally located
 2.6-2.2.8.15(2) **or**
☐ located in evaluation unit
☐ readily accessible* to patient care unit

- 2.1-2.1.2 Patient privacy:
☐ provisions are made to address patient visual & speech privacy

- 2.1-3.2.2.1 Space Requirements:
 (1) ☐ min. clear floor area 120 sf
☐ min. clear dimension 10'-0"
 (2)(a) ☐ room size permits room arrangement with min. clearance 3'-0" at each side & at foot of exam table

- 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

- Ventilation:
☐ Min. 6 air changes per hour Table 7.1
 Lighting:
☐ Portable or fixed exam light 2.1-8.3.4.3(3)
 Power:
☐ Min. 8 receptacles in total Table 2.1-1
☐ Min. 4 receptacles convenient to head of gurney or bed
 Nurse Call System:
☐ Staff assistance station
☐ Emergency call station Table 2.1-2

2.6-2.2.9 SUPPORT AREAS FOR STAFF

- 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 each patient care unit
 2.1-2.9.2.2 ☐ toilet & handwashing station
 2.1-2.9.3 ☐ Staff storage facilities
 2.1-2.9.3.1 ☐ securable closets or cabinet compartments for staff personal articles
☐ located in or near nurse station

- Ventilation:
☐ Min. 10 air changes per hour Table 7.1
☐ Exhaust
☐ Negative pressure
☐ No recirculating room units

Architectural Requirements**Building Systems Requirements****2.6-2.3.1 DINING, RECREATION & DAY SPACES**

☐ Patient dining, recreation & day spaces are separate

or

☐ some or all of patient dining, recreation & day spaces are adjoining spaces

2.6-2.3.1.1 ☐ Glazed areas allow daylight from exterior wall to reach each dining, recreation & day space

2.6-2.3.1.2 Space Requirements for Inpatient Services:
(1) ☐ min. 55 sf per bed spaces

(2) Space Requirements for Outpatient Services:
(a) ☐ dining is part of day care program
☐ min. 55 sf per person

or

(b) ☐ dining is not part of day care program
☐ min. 35 sf per person

2.6-2.3.1.3 ☐ Handwashing station in each dining room

2.6-2.3.1.4 ☐ Storage spaces provided for recreational equipment & supplies

2.6-2.3.2 ACTIVITY AREAS

2.6-2.3.2.1 Activities of Daily Living Unit:

(1)(a) ☐ bedroom

(1)(b) ☐ bathroom in addition to other toilet & bathing requirements

(1)(c) ☐ kitchen

(1)(d) ☐ space for training stairs

(2) ☐ functional equipment similar to that in residential environment

2.6-3.1 REHABILITATION THERAPY DEPARTMENT

2.6-3.1.2 **Physical Therapy Areas:**

2.6-3.1.2.2 ☐ Individual therapy areas

(1) Space Requirements:

(a) ☐ space based on equipment used for therapeutic treatment

☐ space allows access by patient & therapist to equipment when in use

(b) ☐ min. clearance 2'-8" on at least three sides of therapy furniture (e.g. chairs recliners tables beds or mats) at each patient care station

Architectural Requirements**Building Systems Requirements**

- (2) Patient Privacy:
- (a) ☐ privacy screens or curtains at each individual patient care station
- (b) ☐ curtains or shades on windows in therapy areas
- (3) ☐ Handwashing stations
- 2.1-2.8.7.1 ☐ located in each room where hands-on patient care is provided
- 2.1-2.8.7.3 ☐ handwashing station serves multiple patient care stations
☐ check if not included in project
- (1) ☐ at least 1 handwashing station for every 4 patient care stations or fewer & for each major fraction thereof
- (2) ☐ handwashing stations evenly distributed
- 2.6-3.1.2.3 ☐ Exercise area & facilities
☐ layout of exercise area includes staff work area arranged so that staff can view all activities taking place in exercise area
- 2.6-3.1.2.8(1) ☐ Separate storage for soiled linen towels & supplies
- 2.6-3.1.2.8(2) ☐ Equipment & supply storage
- (a) ☐ Clean linen & towel storage
- (b) ☐ Storage for equipment & supplies
- 2.6-3.1.3 **Occupational Therapy Areas:**
☐ check if not included in project
- 2.6-3.1.3.2 ☐ Classroom/dining room
- (1) ☐ min. 30 sf per person plus additional 30 sf for instructor & instructional resources
- (2) ☐ min. 150 sf floor area
- 2.6-3.1.3.3 ☐ Work areas & counters
☐ suitable for wheelchair access
- 2.6-3.1.3.4 ☐ Teaching area for teaching activities of daily living
- 2.6-3.1.3.5 ☐ Handwashing stations
- 2.6-3.1.3.8 ☐ Equipment & supply storage

Architectural Requirements**Building Systems Requirements**

2.6-3.1.4.1

Prosthetic & Orthotic Work Areas:☐ check if not included in project

(1)

☐ Space for evaluation & fitting☐ provisions for privacy

Handwashing Station:

(2)

☐ staff required to work with wet

material or to handle caustic

(a)

material or chemicals

☐ handwashing station

(4)

☐ eyewash station**or**

(b)

☐ staff not required to work with wet

material or handle caustic

material or chemicals

☐ hand sanitation dispenser or

handwashing station

(3)

☐ Clinical sink☐ check if not included in project

(only if prosthetic & orthotic areas do not need running water for materials preparation)

2.6-3.1.4.2

Speech & Hearing Service Facilities:☐ check if not included in project

(1)

☐ Space for evaluation & treatment

(2)

☐ Handwashing station

(3)

☐ Therapy areas provided with speech privacy design that minimizes external sound from high-traffic public & similar noisy areas

2.6-3.1.8

SUPPORT AREAS FOR REHABILITATION THERAPY DEPARTMENT

2.6-3.1.8.3

☐ Documentation area for documenting, filing & retrieving patient records

2.6-3.1.8.5

☐ Multipurpose room

2.6-3.1.8.11

☐ Clean supply room

2.6-3.1.8.12

☐ Soiled holding room

2.6-3.1.8.13(2)

☐ Secure storage for potentially harmful supplies & equipment

2.6-3.1.8.13(3)

☐ Wheelchair lift & gurney storage

(a)

☐ space for storing wheelchairs lifts & gurneys out of traffic while patients are using services

(b)

☐ immediately accessible* to service area

Architectural Requirements

- 2.6-3.1.8.14 ☐ Environmental services room
- 2.1-2.8.14.1 ☐ readily accessible* to unit or floor it serves (permitted to serve more than one patient care unit on floor)
- 2.1-2.8.14.2 (1) ☐ service sink or floor-mounted mop sink
- (2) ☐ provisions for storage of supplies & housekeeping equipment
- (3) ☐ handwashing station
- or**
- ☐ hand sanitation station

Building Systems Requirements

- Ventilation:
- ☐ Min. 10 air changes per hour Table 7.1
- ☐ Exhaust
- ☐ Negative pressure
- ☐ No recirculating room units

2.6-3.1.9 **SUPPORT AREAS FOR STAFF**

- 2.6-3.1.9.2 ☐ Staff toilet room
- 2.6-3.1.9.3 ☐ Storage for staff belongings
- ☐ lockable storage readily accessible* to each work area for securing staff personal effects

- Ventilation:
- ☐ Min. 10 air changes per hour Table 7.1
- ☐ Exhaust
- ☐ Negative pressure
- ☐ No recirculating room units

2.6-3.1.10 **SUPPORT AREAS FOR PATIENTS**

- 2.6-3.1.10.1 ☐ Patient waiting area
- ☐ located out of traffic
- ☐ provision for wheelchairs
- 2.6-3.1.10.2 ☐ Patient toilet room
- ☐ toilet & handwashing station
- ☐ accessible to wheelchair patients

- Ventilation:
- ☐ Min. 10 air changes per hour Table 7.1
- ☐ Exhaust
- ☐ Negative pressure
- ☐ No recirculating room units

***LOCATION TERMINOLOGY:**

Directly accessible: Connected to the identified area or room through a doorway, pass-through, or other opening without going through an 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 a 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 housing, treatment, or use of inpatients not less than 44" in clear & unobstructed width

2.1-7.2.2.2
(4)**CEILING HEIGHT:**

___ 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)**DOORS & DOOR HARDWARE:****Door Type:**

___ 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

___ detailed code review incorporated in Project Narrative

___ no floor tracks

(2)

Door Opening:

(a)

___ min. 45.5" clear door width for patient rooms

___ min. 83.5" clear door height for patient rooms

(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 Bathing/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)

___ bathing area or toilet room opens onto public area or corridor

☐ check if not included in project

___ visual privacy is maintained

2.1-7.2.2.5
2.1-7.2.2.5(1)**WINDOWS IN PATIENT ROOMS:**

___ Each patient room provided with natural light by means of window to outside

2.1-7.2.2.5(2)

___ Operable windows in patient rooms or suites

☐ check if not included in project

___ window operation is limited with either stop limit/restrictor hardware or open guard/screen

___ prevents passage of 4-inch diameter sphere through opening

___ insect screens

2.1-7.2.2.6
2.1-7.2.2.5(3)**Window Size In Patient Rooms:**

(a)

___ minimum net glazed area be no less than 8% of required min. clear floor area of room served

(b)

___ maximum 36 inches windowsill height above finished floor

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
- (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
- 2.1-7.2.2.9 **GRAB BARS:**
- (1) ☐ Grab bars anchored to sustain concentrated load 250 pounds
- (2) ☐ Grab bars in toilet rooms used by patients of size anchored to sustain concentrated load 800 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 patient bed areas
- 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

- 2.1-7.2.2.14 **DECORATIVE WATER FEATURES:**
- (1) ☐ No indoor unsealed water features
- (2) ☐ Covered fish tanks
☐ check if not included in project
☐ restricted to public 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 & any anteroom
☐ check if not included in project
- 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
- 2.1-7.2.4.1 **Built-In Furnishings:**
- ☐ check if not included in project
☐ upholstered with impervious materials in patient treatment areas

2.1-7.2.4.2	Window Treatments in Patient Rooms & Other Patient Care Areas:	Part 3/6.2	AIR-HANDLING UNIT (AHU) DESIGN:
(1)	___ blinds, sheers or other patient-controlled window treatments provided to allow for patient privacy & to control light levels & glare	Part 3/6.2.1	___ AHU casing is designed to prevent water intrusion, resist corrosion & permit access for inspection & maintenance
(2)	___ window treatments do not compromise patient safety	Part 3/6.3	OUTDOOR AIR INTAKES & EXHAUST DISCHARGES:
(3)	___ window treatments do not compromise patient safety	Part 3/6.3.1	Outdoor Air Intakes:
	___ window treatments selected for ease of cleaning, disinfection or sanitization	Part 3/6.3.1.1	___ located min. of 25 ft from cooling towers & all exhaust & vent discharges
2.1-7.2.4.3	___ Privacy curtains in patient rooms & other patient care areas are washable □ check if <u>not</u> included in project		___ outdoor air intakes located such that bottom of air intake is at least 6'-0" above grade
2.1-8.2	HEATING VENTILATION & AIR-CONDITIONING (HVAC) SYSTEMS UTILITIES:		___ air intakes located away from public access
Part 3/6.1	Ventilation Upon Loss of Electrical Power:	Part 3/6.3.1.3	___ all intakes are designed to prevent entrainment of wind-driven rain
Part 3/6.1.1	___ space ventilation & pressure relationship requirements of Tables 7.1 are maintained for AII Rooms in event of loss of normal electrical power □ check if <u>not</u> included in project		___ intakes on top of buildings □ check if <u>not</u> included in project
Part 3/6.1.2	Heating & Cooling Sources:		___ located with bottom of air intake min. 3'-0" above roof level
Part 3/6.1.2.1	___ heat sources & essential accessories are 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	Part 3/6.3.1.4	___ intake in areaway □ check if <u>not</u> included in project
	___ capacity of remaining source or sources is sufficient to provide for domestic hot water & to provide heating for inpatient rooms		___ bottom of areaway air intake opening is at least 6'-0" above grade
Part 3/6.1.2.2	Central cooling systems greater than 400 tons (1407 kW) peak cooling load □ check if <u>not</u> included in project	Part 3/6.3.2	Contaminated Exhaust Discharges: □ check if <u>not</u> 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 3/6.3.2.1	___ 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	___ contaminated exhaust discharge outlets arranged to discharge to atmosphere in vertical direction at least 10'-0" above adjoining roof level
			___ exhaust discharge outlets from AII rooms is located not less than 25 feet horizontally from outdoor air intakes, openable windows/doors & areas that are normally accessible to public

Part 3/6.4	FILTRATION: <input type="checkbox"/> Two filter banks for inpatient care (see Table 6.4) <input type="checkbox"/> Filter Bank No. 1: MERV 7 <input type="checkbox"/> Filter Bank No. 2: MERV 14 <input type="checkbox"/> Each filter bank with efficiency of greater than MERV 12 is provided with differential pressure measuring device to indicate when filter needs to be changed	Part 3/7	SPACE VENTILATION—HOSPITAL SPACES: <input type="checkbox"/> Spaces ventilated according to Table 7.1
Part 3/6.4.1	<input type="checkbox"/> Filter Bank No. 1 is placed upstream of heating & cooling coils	Part 3/7.1.a	<input type="checkbox"/> Air movement is from clean to less-clean areas
Part 3/6.4.2	<input type="checkbox"/> Filter Bank No. 2 is placed downstream of all wet-air cooling coils & supply fan	Part 3/7.1.a.1	<input type="checkbox"/> Min. number of total air changes required for positive pressure rooms is provided by total supply airflow
Part 3/6.5	HEATING & COOLING SYSTEMS:	Part 3/7.1.a.3	<input type="checkbox"/> Min. number of total air changes required for negative pressure rooms is provided by total exhaust airflow
Part 3/6.5.3	<input type="checkbox"/> Radiant heating systems <input type="checkbox"/> check if <u>not</u> included in project <input type="checkbox"/> ceiling or wall panels with exposed cleanable surfaces or radiant floor heating are provided in AII room <input type="checkbox"/> check if <u>not</u> included in project	Part 3/7.1a.5	<input type="checkbox"/> Air recirculation through room unit <input type="checkbox"/> check if <u>not</u> included in project <input type="checkbox"/> complies with Table 7.1 <input type="checkbox"/> room unit receive filtered & conditioned outdoor air <input type="checkbox"/> serve only a single space <input type="checkbox"/> provides min. MERV 6 filter located upstream of any cold surface so that all of air passing over cold surface is filtered
Part 3/6.7	AIR DISTRIBUTION SYSTEMS:	Part 3/7.2	ADDITIONAL ROOM-SPECIFIC REQUIREMENTS:
Part 3/6.7.1	<input type="checkbox"/> pressure relationships required in tables 7.1 maintained in all modes of HVAC system operation <input type="checkbox"/> Spaces that have required pressure relationships are served by fully ducted return systems or fully ducted exhaust systems <input type="checkbox"/> Inpatient facilities are served by fully ducted return or exhaust systems	Part 3/7.2.1	Airborne Infection Isolation (AII) Rooms <input type="checkbox"/> check if <u>not</u> included in project <input type="checkbox"/> AII rooms have permanently installed device and/or mechanism to constantly monitor differential air pressure between room & corridor <input type="checkbox"/> Local visual means is provided to indicate whenever negative differential pressure is not maintained <input type="checkbox"/> Air from AII room is exhausted directly to outdoors <input type="checkbox"/> 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
Part 3/6.7.2	Air Distribution Devices: <input type="checkbox"/> supply air outlets comply with Table 6.7.2	Part 3/7.2.1	<input type="checkbox"/> Exhaust air grille or register in patient room is located directly above patient bed on ceiling or on wall near head of bed
Part 3/6.7.3	Smoke Barriers: <input type="checkbox"/> HVAC zones coordinated with compartmentation to minimize ductwork penetrations of fire & smoke barriers.		<input type="checkbox"/> Anteroom <input type="checkbox"/> check if <u>not</u> included in project <input type="checkbox"/> AII room is at negative pressure with respect to anteroom <input type="checkbox"/> Anteroom is at negative pressure with respect to corridor
Part 3/6.8	ENERGY RECOVERY SYSTEMS: <input type="checkbox"/> check if <u>not</u> included in project		
Part 3/6.8.1	<input type="checkbox"/> Located upstream of Filter Bank No. 2		
Part 3/6.8.2	<input type="checkbox"/> AII room exhaust systems or combination AII/PE rooms are not used for energy recovery		
Part 3/6.8.3	<input type="checkbox"/> Energy recovery systems with leakage potential <input type="checkbox"/> check if <u>not</u> included in project <input type="checkbox"/> arranged to minimize potential to transfer exhaust air directly back into supply airstream <input type="checkbox"/> designed to have no more than 5% of total supply airstream consisting of exhaust air		

2.1-8.3 ELECTRICAL SYSTEMS**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:

- 2.1-8.3.4.2** ☐ Luminaires in wet areas have smooth cleanable shatter-resistant lenses & no exposed lamps

2.1-8.3.4.3(1) Patient Rooms:

- (a) ☐ reading light for each patient bed
- ☐ incandescent & halogen light sources placed or shielded to protect patient from injury
- ☐ light source covered by diffuser or lens
- ☐ flexible light arms
- ☐ check if not included in project
- ☐ mechanically controlled to prevent lamp from contacting bed linen

- 2.1-8.3.4.3(2)** ☐ Patient care unit corridors have general illumination with provisions for reducing light levels at night

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
- ☐ check if not included in project

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

2.1-8.4.2.2**Hemodialysis/Hemoperfusion Water Distribution:**

- ☐ check if not included in project
- (1)(a) ☐ separate treated water distribution system
- (2)(b) ☐ outlet at each individual hemodialysis treatment bay
- ☐ outlet at hemodialysis equipment repair area
- ☐ outlet at dialysate preparation area
- or**
- (1)(b) ☐ dialysis equipment includes sufficient water treatment provisions for use of domestic cold water

(1)(a)

- ☐ drainage system independent from tap water drainage

(4)

- ☐ liquid waste system for dialysis treatment area is designed to minimize odor & prevent backflow
- ☐ hemodialysis distribution piping is readily accessible for inspection & maintenance

(5)

- ☐ hemodialysis distribution piping is readily accessible for inspection & maintenance

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 max. length 25'-0"
- ☐ no installation of dead-end piping (except for empty risers mains & branches for future use)
- ☐ any existing dead-end piping is removed

(3)(a)

- ☐ no installation of dead-end piping (except for empty risers mains & branches for future use)

(3)(c)**(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:	2.1-8.4.3.3	Showers & Tubs:
(1)(a)	___ drainage piping above ceiling of or exposed in electronic data processing areas & electric closets rooms have special provisions to protect rooms from leakage & condensation	(1)	___ nonslip surfaces
(1)(b)	___ drip pan for drainage piping above ceiling of sensitive area □ check if <u>not</u> included in project ___ accessible ___ overflow drain with outlet located in normally occupied area	2.1-8.4.3.4	Ice-Making Equipment: ___ copper tubing for supply connections to ice-making equipment
2.1-8.4.3	PLUMBING FIXTURES:	2.1-8.4.3.5	Clinical Flushing-Rim Sinks: □ check if <u>not</u> included in project ___ trimmed with valves that can be operated without hands (may be single-lever or wrist blade devices) ___ handles are at least 6 in. long ___ integral trap wherein upper portion of water trap provides visible seal
2.1-8.4.3.1(1)	___ Materials used for plumbing fixtures are non-absorptive & acid-resistant	2.1-8.4.3.7	Bedpan-Rinsing Devices: ___ bedpan-rinsing devices provided in each inpatient toilet room ___ use cold water only
2.1-8.4.3.2	Handwashing Station Sinks:	2.1-8.5.1	CALL SYSTEMS
(1)	___ designed with basins that will reduce risk of splashing to areas where direct patient care is provided & medications are prepared	2.1-8.5.1.1	(1) ___ Nurse call stations provided as required in Table 2.1-2
(2)	___ sink basins have nominal size of no less than 144 square inches	(2)	___ Nurse call systems report to attended location with electronically supervised visual & audible annunciation
(3)	___ sink basins have min. dimension 9 inches in width or length	(4)	___ Call system complies with UL 1069 "Standard for Hospital Signaling & Nurse Call Equipment"
(5)	___ sink basins are made of porcelain, stainless steel or solid-surface materials	(5)	___ Wireless nurse call system □ check if <u>not</u> included in project ___ complies with UL 1069
(7)	___ water discharge point min. 10" above bottom of basin	2.1-8.5.1.2	Patient Call Stations:
(8)	___ anchored so that allowable stresses are not exceeded where vertical or horizontal force of 250 lbs. is applied	(1)	___ each patient sleeping bed provided with patient call station equipped for two-way voice communication
(a)	___ sinks used by staff, patients, & public have fittings that can be operated without using hands (may be single-lever or wrist blade devices)	(2)(a)	___ indicator light that remains lighted as long as voice circuit is operating
(a)	___ blade handles □ check if <u>not</u> included in project ___ at least 4 inches in length ___ provide clearance required for operation	(2)(b)	___ reset switch for canceling call
(b)	___ sensor-regulated water fixtures □ check if <u>not</u> included in project ___ meet user need for temperature & length of time water flows ___ designed to function at all times and during loss of normal power	(3)(a)	___ visible signal in corridor at patient's door
			Multi-Corridor Patient Areas: □ check if <u>not</u> included in project ___ additional visible signals at corridor intersections

- 2.1-8.5.1.3 Bath Stations:
- _____ bath station that can be activated by patient lying on floor provided at each patient toilet, bathtub or shower stall
 - (1) _____ alarm in these areas can only be turned off at bath station where it was initiated
 - (2) _____ shower/tub bath stations located 3'-0" to 4'-0" above floor within view of user & within reach of staff without need to step into shower or tub
 - (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

2.1-8.6.2 **ELECTRONIC SURVEILLANCE SYSTEMS**

- ☐ check if not included in project
- 2.1-8.6.2.2 _____ monitoring devices 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