

**COMPLIANCE CHECKLIST****IP3 Pediatric & Adolescent Oncology Patient Care Unit**

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****2.2-2.3 PEDIATRIC & ADOLESCENT ONCOLOGY PATIENT CARE UNIT**

- 2.1-1.2.3 Shared Services:  
 \_\_\_ No combined functions unless specifically allowed in this checklist

**2.2-2.2.2 PATIENT ROOM**

- 2.2-2.4.2.2 \_\_\_ Pediatric patient rooms separated from adult populations

- 2.2-2.2.2.1 Capacity:  
 (1) \_\_\_ maximum number of beds per room is one bed  
 (2) **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

- 2.2-2.2.2.2 Space Requirements:  
 (1)(a) \_\_\_ single-patient rooms  
     \_\_\_ ☐ check if not included in project  
     \_\_\_ min. clear floor area 120 sf  
 (2)(a) \_\_\_ min. clearance 3'-0" between sides of bed & any wall or any other fixed obstruction  
     \_\_\_ min. clearance 3'-0" between foot of bed & any wall or any other fixed obstruction  
 (1)(b) \_\_\_ multiple-patient rooms  
     \_\_\_ ☐ check if not included in project  
 2.2-2.2.2.2 \_\_\_ min. clear floor area 100 sf per bed  
 (2)(a) \_\_\_ min. clearance 3'-0" between sides of bed & any wall or any other fixed obstruction  
 (2)(b) \_\_\_ min. clearance 4'-0" at foot of each bed to permit passage of equipment & beds

Ventilation:		
___ Min. 4 air changes per hour	Table 7.1	
Lighting:		
___ General lighting	2.1-8.3.4.3(1)	
___ Reading light for each patient bed	(a)	
___ controls accessible to patients in bed		
___ Night-light located in each patient room	(b)	
___ no central control of night-lights outside room		
___ night-light illuminates path from room entrance to bedside		
___ night-light illuminates path between bed & toilet room		
___ No light coves with non-flush surfaces & areas that collect dust	2.2-2.3.7.3(1)	
___ Lighting adjustable to meet standards for high visibility during procedures & still provides for sleep & comfort of patient	2.2-2.3.7.3(2)	

**Architectural Requirements**

- 2.2-2.2.2.3  
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  
\_\_\_\_\_ ☐ 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  
2.1-7.2.2.6 \_\_\_\_\_ insect screens
- 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
- 2.2-2.2.2.4  
2.1-2.1.2 \_\_\_\_\_ Patient Privacy:  
\_\_\_\_\_ provisions are made to address patient visual & speech privacy
- 2.1-2.2.5  
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
- (2) \_\_\_\_\_ Multiple-Patient Rooms:  
\_\_\_\_\_ ☐ check if not included in project  
\_\_\_\_\_ handwashing station located outside patients cubicle curtains
- 2.1-2.2.6  
2.1-2.2.6.2 \_\_\_\_\_ Patient toilet room  
\_\_\_\_\_ in patient care units patient toilet room serve no more than one patient room
- 2.1-2.2.6.3  
(1) \_\_\_\_\_ toilet  
(2) \_\_\_\_\_ handwashing station  
(3) \_\_\_\_\_ bedpan washer
- 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

**Building Systems Requirements**

- Power: Table 2.1-1  
\_\_\_\_\_ Min. 12 receptacles in total  
\_\_\_\_\_ Min. 2 receptacles at each side of the head of the bed  
\_\_\_\_\_ Min. 2 receptacles on all other walls (not including any TV receptacle)  
\_\_\_\_\_ Min. 1 receptacle for each motorized bed
- Nurse Call System: Table 2.1-2  
\_\_\_\_\_ Patient station  
\_\_\_\_\_ Staff assistance station  
\_\_\_\_\_ Emergency call station
- Medical Gases: Table 2.1-3  
\_\_\_\_\_ 1 OX, 1 VAC per bed

**Architectural Requirements****Building Systems Requirements**

- (2) Central Bathing Facilities:  
☐ check if not included in project
- (a) \_\_\_\_\_ each bathtub or shower in individual room or enclosure that 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) \_\_\_\_\_ following functions be provided  
 \_\_\_\_\_ 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
- (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 be designed to facilitate use & prevent tipping of wheelchairs & other portable wheeled equipment
- 2.2-2.2.2.8 Patient Storage:  
 2.1-2.2.8 \_\_\_\_\_ separate wardrobe, locker, or closet suitable for garments & for storing personal effects
- 2.2-2.2.3 **PATIENT/FAMILY-CENTERED CARE**  
 2.2-2.4.2.1 \_\_\_\_\_ Pediatric patient rooms include provisions for family support (e.g. hygiene sleeping & personal belongings)

## Ventilation:

\_\_\_\_\_ Min. 10 air changes per hour Table 7.1

\_\_\_\_\_ Exhaust

\_\_\_\_\_ Negative pressure

\_\_\_\_\_ No recirculating room units

## Nurse Call System:

\_\_\_\_\_ Bath station Table 2.1-2

## Ventilation:

\_\_\_\_\_ Min. 10 air changes per hour Table 7.1

\_\_\_\_\_ Exhaust

\_\_\_\_\_ Negative pressure

\_\_\_\_\_ No recirculating room units

## Nurse Call System:

\_\_\_\_\_ Bath station Table 2.1-2

**Architectural Requirements****Building Systems Requirements**

- (1) ☐ Space provided in patient room to support visitation by family members & others
- (a) ☐ space for movable seating with min. of one seat for family member or visitor & one seat for patient
- (b) ☐ space for at least one chair for long-term sitting
- (2) ☐ space provided for family sleeping accommodation
- (3) ☐ Public communication services be provided in each patient room

2.2-2.3.2.2

**SPECIAL PATIENT CARE ROOMS**

2.2-2.3.2.2(1)

- ☐ Combination airborne infection isolation/ protective environment (AII/PE) room

2.2-2.4.4

- ☐ at least one combination AII/PE 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
- (3) ☐ handwashing station

**Ventilation:**

- ☐ Min. 12 air changes per hour Table 7.1
- ☐ Exhaust
- ☐ Positive pressure
- ☐ No recirculating room units
- ☐ Exhaust register located directly above patient bed on ceiling or on wall near head of bed Part 3/7.2.1

- (4) ☐ patient toilet room
- ☐ serves only one AII room
- (5) ☐ bathtub or shower
- 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

**Ventilation:**

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

2.1-2.4.2.4

(1)(a)

**Architectural Details & Furnishings:**

- ☐ 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 PE room is in use as isolation room

- ☐ edge seals provided along sides & top of doorframe for any door into PE room

- (2) (a) ☐ window treatments do not include fabric drapes & curtains

2.1-7.2.3.1(7)(a)

- ☐ floors are monolithic & integral coved wall bases are at least 6" high & tightly sealed to wall

2.1-2.4.2.5

- ☐ room pressure visual or audible alarm

**Architectural Requirements****Building Systems Requirements**

2.2-2.2.4.4(5)	Special Design Elements:		
(a)	___ monolithic ceiling		
	___ surfaces are cleanable		
(b)	___ lighting fixtures have lenses & are sealed		
2.2-2.2.4.5(3)	___ anteroom		
(a)	___ provides space for persons to don personal protective equipment before entering patient room	Ventilation:	
		___ Min. 10 air changes per hour	Table 7.1
		___ Exhaust	
		___ No recirculating room units	
(b)	___ all doors to anteroom have self-closing devices		
	<b>or</b>		
	___ audible alarm activated when AII/PE room is in use as isolation room		
2.1-2.4.2.3			
(3)(a)	___ handwashing station		
(3)(b)	___ storage for unused PPE		
(3)(c)	___ disposal/holding container for used PPE		
2.2-2.3.2.2(2)	___ Protective environment (PE) room		
	<input type="checkbox"/> check if <u>not</u> included in project		
	(only if no hematopoietic cell transplantation patients are present in oncology unit)		
2.1-2.4.2.2	___ complies with requirements applicable to patient rooms	Ventilation:	
(1)	___ capacity one bed	___ Min. 12 air changes per hour	Table 7.1
(2)	___ personal protective equipment (PPE) storage at entrance to room	___ Positive pressure	
(3)	___ handwashing station	___ No recirculating room units	
(4)	___ patient toilet room	___ Supply air diffusers are located above patient bed	Part 3/7.2.2
	___ serves only one AII room	___ Exhaust grilles or registers located near patient room door	
(5)	___ bathtub or shower	Ventilation:	
2.1-2.2.6.3(1)	___ toilet	___ Min. 10 air changes per hour	Table 7.1
2.1-2.2.6.3(2)	___ handwashing station	___ Exhaust	
2.1-2.2.6.3(3)	___ bedpan washer	___ Negative pressure	
		___ No recirculating room units	
2.1-2.4.2.3	___ anteroom		
	<input type="checkbox"/> check if <u>not</u> included in project		
(1)	___ provides space for persons to don personal protective equipment (PPE) before entering patient room	Ventilation:	
		___ Min. 10 air changes per hour	Table 7.1
		___ No recirculating room units	
(2)	___ all doors to anteroom have self-closing devices		
	<b>or</b>		
	___ audible alarm activated when PE room is in use as isolation room		

**Architectural Requirements****Building Systems Requirements**

- (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 PE room is in use as isolation room
- \_\_\_\_\_ edge seals provided along sides & top of doorframe for any door into PE room
- (2) (a) \_\_\_\_\_ window treatments do not include fabric drapes & curtains
- 2.1-2.4.2.5 \_\_\_\_\_ room pressure visual or audible alarm
- 2.2-2.2.4.4(5) Special Design Elements:
- (a) \_\_\_\_\_ monolithic ceiling
- \_\_\_\_\_ surfaces are cleanable
- (b) \_\_\_\_\_ lighting fixtures have lenses & are sealed

2.2-2.3.4 **ADDITIONAL REQUIREMENTS FOR BONE MARROW/STEM CELL TRANSPLANT UNIT**

☐ check if not included in project

- 2.2-2.3.4.1(1)(a) \_\_\_\_\_ Patient rooms in allogeneic/autologous bone marrow/stem cell transplant units meet Protective Environment Room requirements
- 2.2-2.3.4.1(2) \_\_\_\_\_ Bone marrow transplant rooms are located in same building as diagnostic imaging & radiation therapy equipment
- 2.2-2.3.2.2(2) \_\_\_\_\_ Protective environment (PE) 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
- (3) \_\_\_\_\_ handwashing station
- (4) \_\_\_\_\_ patient toilet room
- \_\_\_\_\_ serves only one AII room
- (5) \_\_\_\_\_ bathtub or shower

**Ventilation:**

- \_\_\_\_\_ Min. 12 air changes per hour Table 7.1
- \_\_\_\_\_ Positive pressure
- \_\_\_\_\_ No recirculating room units

**Ventilation:**

- \_\_\_\_\_ Min. 10 air changes per hour Table 7.1
- \_\_\_\_\_ Exhaust

**Architectural Requirements****Building Systems Requirements**

- |                   |   |  |              |
|-------------------|---|--|--------------|
| 2.1-2.2.6.3(1)    | <input type="checkbox"/> toilet   | <input type="checkbox"/> Negative pressure   |              |
| 2.1-2.2.6.3(2)    | <input type="checkbox"/> handwashing station  | <input type="checkbox"/> No recirculating room units                                 |              |
| 2.1-2.2.6.3(3)    | <input type="checkbox"/> bedpan washer  | <input type="checkbox"/> Supply air diffusers are located above patient bed          | Part 3/7.2.2 |
|                   |   | <input type="checkbox"/> Exhaust grilles or registers located near patient room door |              |
| 2.1-2.4.2.3       | <input type="checkbox"/> anteroom   |  |              |
|                   | <input type="checkbox"/> check if <u>not</u> included in project  |  |              |
| (1)               | <input type="checkbox"/> provides space for persons to don personal protective equipment (PPE) before entering patient room | Ventilation:   |              |
|                   |   | <input type="checkbox"/> Min. 10 air changes per hour                                | Table 7.1    |
| (2)               | <input type="checkbox"/> all doors to anteroom have self-closing devices  | <input type="checkbox"/> No recirculating room units                                 |              |
|                   | <b>or</b>   |  |              |
|                   | <input type="checkbox"/> audible alarm activated when PE room is in use as isolation room                                   |  |              |
| (3)(a)            | <input type="checkbox"/> handwashing station  |  |              |
| (3)(b)            | <input type="checkbox"/> storage for unused PPE   |  |              |
| (3)(c)            | <input type="checkbox"/> disposal/holding container for used PPE  |  |              |
| 2.1-2.4.2.4       | Architectural Details & Furnishings:  |  |              |
| (1)(a)            | <input type="checkbox"/> perimeter walls ceiling & floor including penetrations constructed to prevent air exfiltration     |  |              |
| (1)(b)            | <input type="checkbox"/> self-closing devices on all room exit doors  |  |              |
|                   | <b>or</b>   |  |              |
|                   | <input type="checkbox"/> activation of audible alarm when PE room is in use as isolation room                               |  |              |
|                   | <input type="checkbox"/> edge seals provided along sides & top of doorframe for any door into PE room                       |  |              |
| (2)(a)            | <input type="checkbox"/> window treatments do not include fabric drapes & curtains  |  |              |
| 2.1-2.4.2.5       | <input type="checkbox"/> room pressure visual or audible alarm  |  |              |
| 2.2-2.2.4.4(5)    | Special Design Elements:  |  |              |
| (a)               | <input type="checkbox"/> monolithic ceiling   |  |              |
|                   | <input type="checkbox"/> surfaces are cleanable   |  |              |
| (b)               | <input type="checkbox"/> lighting fixtures have lenses & are sealed   |  |              |
| 2.2-2.3.4.3(1)(a) | <input type="checkbox"/> all windows in room have fixed sash & are sealed to eliminate infiltration                         |  |              |
| 2.2-2.3.4.3(1)(b) | <input type="checkbox"/> view panels provided in doors or walls for nursing staff observation                               |  |              |
| 2.2-2.3.4.3(2)    | <input type="checkbox"/> means provided to cover windows & view panels when patient requires visual privacy                 |  |              |



	<b>Architectural Requirements</b>	<b>Building Systems Requirements</b>
2.2-2.3.7	<b>SPECIAL DESIGN ELEMENTS FOR ONCOLOGY PATIENT CARE UNITS</b>	
2.2-2.3.7.1	Architectural Details:	
(1)	<input type="checkbox"/> no decorative water features	
(2)	<input type="checkbox"/> no fish tanks	
(3)	<input type="checkbox"/> no decorative plant boxes or containers inside or immediately adjacent* to oncology patient care unit	
2.2-2.3.7.2	Surfaces & Furnishings:	
(1)	<input type="checkbox"/> frequently touched surfaces in patient's environment of care designed to facilitate cleaning & disinfection	
(2)	<input type="checkbox"/> cabinetry, casework & countertops have flush surfaces that are smooth, nonporous, cleanable, wipeable & durable & that do not scratch easily	
(3)	<input type="checkbox"/> window treatments & privacy curtains provided in accordance with 2.1-7.2.4.2	
(a)	<input type="checkbox"/> no fabric drapes	
	<input type="checkbox"/> no fabric privacy curtains	
(b)	<input type="checkbox"/> window treatments & privacy curtains wipeable	
2.2-2.3.8	<b>SUPPORT AREAS FOR ONCOLOGY PATIENT CARE UNITS</b>	
2.1-2.8.1	<input type="checkbox"/> 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	<input type="checkbox"/> Administrative center or nurse station	Nurse Call System:
2.1-2.8.2.1(1)	<input type="checkbox"/> space for counters	<input type="checkbox"/> Nurse master station
2.1-2.8.2.1(2)	<input type="checkbox"/> handwashing station next to or directly accessible* <b>or</b> <input type="checkbox"/> hand sanitation dispenser next to or directly accessible*	Table 2.1-2
2.1-2.8.2.2	<input type="checkbox"/> Center for reception & communication	
	<input type="checkbox"/> self-contained	
	<b>or</b>	
	<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:
		<input type="checkbox"/> Duty station (light/sound signal)
2.2-2.2.8.4	<input type="checkbox"/> Nurse or supervisor office	2.1-8.5.1.2(3)(b)
2.2-2.2.8.5	<input type="checkbox"/> Multipurpose room	
2.1-2.8.5	<input type="checkbox"/> at least one multipurpose room for each facility for patient conferences, reports, education, training sessions & consultation (may serve several patient care units & departments)	

	Architectural Requirements	Building Systems Requirements
2.2-2.2.8.7	___ Handwashing station	
2.1-2.8.7.1	___ located in each room where hands-on patient care is provided	
2.2-2.2.8.8	___ Medication safety zones	
2.1-2.8.8.1(2)	Design Promoting Safe Medication Use:	
(a)	___ medication safety zones located out of circulation paths	
(b)	___ work space designed so that staff can access information & perform required tasks	
(c)	___ work counters provide space to perform required tasks	
(e)	___ sharps containers placed at height that allows users to see top of container	
(f)	___ max. 45 dBA noise level caused by building systems	
2.1-2.8.8.2(1)	___ medication preparation room	
(a)	___ under visual control of nursing staff	
(b)	___ work counter	Lighting:
	___ handwashing station	___ Task lighting 2.1-2.8.8.1(2)(d)
	___ lockable refrigerator	Ventilation:
	___ locked storage for controlled drugs	___ Min. 4 air changes per hour Table 7.1
	___ sharps containers	Nurse Call System:
	<input type="checkbox"/> check if <u>not</u> included in project	___ Duty station (light/sound signal) Table 2.1-2
(c)	___ self-contained medication-dispensing unit	
	<input type="checkbox"/> check if <u>not</u> included in project	
	___ room designed with space to prepare medications	
	<b>or</b>	
2.1-2.8.8.2(2)	___ automated medication-dispensing unit	
(a)	___ located at nurse station, in clean workroom or in alcove	
(c)	___ handwashing station located next to stationary medication-dispensing units or stations	Nurse Call System:
		___ Duty station (light/sound signal) Table 2.1-2
2.2-2.2.8.9	___ Nourishment area or room	Ventilation:
2.1-2.8.9.2(1)	___ handwashing station	___ Min. 2 air changes per hour Table 7.1
2.1-2.8.9.2(2)	___ work counter	Nurse Call System:
2.1-2.8.9.2(3)	___ refrigerator	___ Duty station (light/sound signal) 2.1-8.5.1.2(3)(b)
2.1-2.8.9.2(4)	___ microwave	
2.1-2.8.9.2(5)	___ storage cabinets	
2.1-2.8.9.2(6)	___ 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	

	Architectural Requirements	Building Systems Requirements
2.2-2.2.8.10	<input type="checkbox"/> Ice-making equipment <input type="checkbox"/> located in each patient care unit <input type="checkbox"/> equipment to provide ice for treatments & for nourishment	
2.2-2.2.8.11	<input type="checkbox"/> Clean workroom or clean supply room	
2.1-2.8.11.2	<input type="checkbox"/> clean workroom <input type="checkbox"/> used for preparing patient care items <input type="checkbox"/> work counter <input type="checkbox"/> handwashing station <input type="checkbox"/> storage facilities for clean & sterile supplies	Ventilation: <input type="checkbox"/> Min. 4 air changes per hour Table 7.1 <input type="checkbox"/> Positive pressure
(1)		
(2)		Nurse Call System: <input type="checkbox"/> Duty station (light/sound signal) Table 2.1-2
(3)	<b>or</b>	
2.1-2.8.11.3	<input type="checkbox"/> clean supply room <input type="checkbox"/> used only for storage & holding as part of system for distribution of clean & sterile supplies	Ventilation: <input type="checkbox"/> Min. 4 air changes per hour Table 7.1 <input type="checkbox"/> Positive pressure
2.2-2.2.8.12	<input type="checkbox"/> Soiled workroom or soiled holding room	
2.1-2.8.12.2	<input type="checkbox"/> soiled workroom <input type="checkbox"/> handwashing station	Ventilation: <input type="checkbox"/> Min. 10 air changes per hour Table 7.1 <input type="checkbox"/> Exhaust
(1)(a)		<input type="checkbox"/> Negative pressure <input type="checkbox"/> No recirculating room units
(1)(b)	<input type="checkbox"/> flushing-rim clinical service sink with bedpan-rinsing device or equivalent flushing-rim fixture	Nurse Call System: <input type="checkbox"/> Duty station (light/sound signal) Table 2.1-2
(1)(c)	<input type="checkbox"/> work counter	
(1)(d)	<input type="checkbox"/> space for separate covered containers for waste & soiled linen	
(2)	<input type="checkbox"/> fluid management system is used <input type="checkbox"/> check if <u>not</u> included in project	
(a)	<input type="checkbox"/> electrical & plumbing connections that meet manufacturer requirements	
(b)	<input type="checkbox"/> space for docking station	
	<b>or</b>	
2.1-2.8.12.3	<input type="checkbox"/> soiled holding room	Ventilation: <input type="checkbox"/> Min. 10 air changes per hour Table 7.1 <input type="checkbox"/> Exhaust
(1)	<input type="checkbox"/> handwashing station or hand sanitation station	<input type="checkbox"/> Negative pressure <input type="checkbox"/> No recirculating room units
(2)	<input type="checkbox"/> space for separate covered containers for waste & soiled linen	
2.1-2.8.13.1	<input type="checkbox"/> Clean linen storage	
(1)	<input type="checkbox"/> stored in clean workroom <b>or</b> <input type="checkbox"/> separate closet <b>or</b> <input type="checkbox"/> covered cart distribution system on each floor	
(2)	<input type="checkbox"/> storage of clean linen carts in designated corridor alcoves, clean workroom or closets	

	Architectural Requirements	Building Systems Requirements
2.1-2.8.13.2	<input type="checkbox"/> Equipment & supply storage room or alcoves <input type="checkbox"/> sized to provide min. 10 sf per patient bed	
2.1-2.8.13.3	<input type="checkbox"/> Storage space for gurneys, stretchers & wheelchairs	
2.1-2.8.13.4	<input type="checkbox"/> Emergency equipment storage	
(1)	<input type="checkbox"/> each patient care unit has at least one emergency equipment storage location	
(2)	<input type="checkbox"/> provided under visual observation of staff	
(3)	<input type="checkbox"/> storage locations in corridors do not encroach on min. required corridor width	
2.2-2.2.8.14	<input type="checkbox"/> Environmental services room	Ventilation:
2.1-2.8.14.1	<input type="checkbox"/> readily accessible* to unit or floor it serves (permitted to serve more than one patient care unit on floor)	<input type="checkbox"/> Min. 10 air changes per hour Table 7.1 <input type="checkbox"/> Exhaust <input type="checkbox"/> Negative pressure <input type="checkbox"/> No recirculating room units
2.1-2.8.14.2	<input type="checkbox"/> service sink or floor-mounted mop sink	
(1)	<input type="checkbox"/> provisions for storage of supplies & housekeeping equipment	
(2)	<input type="checkbox"/> handwashing station	
(3)	<input type="checkbox"/> <b>or</b> <input type="checkbox"/> hand sanitation station	
2.2-2.2.8.15	<input type="checkbox"/> Examination room	
(1)	<input type="checkbox"/> check if <u>not</u> included in project (only if all patient rooms in patient care unit are single-patient rooms) <input type="checkbox"/> designed for single patient	
(2)	<input type="checkbox"/> serves only one patient care unit <input type="checkbox"/> <b>or</b> <input type="checkbox"/> serves more than one patient care unit on same floor <input type="checkbox"/> centrally located	
2.1-2.1.2	Patient privacy: <input type="checkbox"/> provisions are made to address patient visual & speech privacy	
2.1-3.2.2.1	Space Requirements:	Ventilation:
(1)	<input type="checkbox"/> min. clear floor area 120 sf <input type="checkbox"/> min. clear dimension 10'-0"	<input type="checkbox"/> Min. 6 air changes per hour Table 7.1
(2)(a)	<input type="checkbox"/> room size permits room arrangement with min. clearance 3'-0" at each side & at foot of exam table <input type="checkbox"/> room arrangement (layout #1) shown in the plans	Lighting: <input type="checkbox"/> Portable or fixed exam light 2.1-8.3.4.3(3)
(2)(b)	<input type="checkbox"/> exam table, recliner or chair is placed at angle closer to one wall	Power: <input type="checkbox"/> Min. 8 receptacles in total Table 2.1-1 <input type="checkbox"/> Min. 4 receptacles convenient to head of gurney or bed

**Architectural Requirements**

than another or against wall to  
accommodate type of patient  
being served  
☐ check if not included in project  
\_\_\_\_ room arrangement (layout #2)  
shown in the plans

- 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  
(5) \_\_\_\_ handwashing station

**SUPPORT AREAS FOR PATIENTS**

- 2.2-2.4.10 \_\_\_\_ Patient play areas  
2.2-2.4.10.1 ☐ check if not included in project  
\_\_\_\_ play areas constructed of surfaces &  
materials that are easy to clean &  
durable (nonporous & smooth)

**SUPPORT AREAS FOR STAFF**

- 2.2-2.3.9 \_\_\_\_ Staff lounge  
2.1-2.9.1 \_\_\_\_ 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 personal articles of  
staff  
\_\_\_\_ located in or near nurse station

**SUPPORT AREAS FOR PATIENTS FAMILIES  
& VISITORS**

- 2.2-2.3.10 \_\_\_\_ Family & visitor lounge  
2.2-2.3.10.1 \_\_\_\_ each patient care unit provides access  
to lounge for family & visitors  
  
2.1-2.10.1.1 Size:  
(1) \_\_\_\_ accommodates at minimum 3  
chairs & 1 wheelchair space  
(2) \_\_\_\_ accommodates at least 1 person  
for every 4 beds in unit  
2.1-2.10.1.2 \_\_\_\_ immediately accessible\* to patient care  
units served (permitted to serve more  
than one patient care unit)  
2.1-2.10.1.4 \_\_\_\_ designed to minimize impact of noise &  
activity on patient rooms & staff functions  
2.2-2.3.10.2 \_\_\_\_ some portion of occupied space  
permits privacy for visitors  
2.2-2.3.10.3

**Building Systems Requirements**

Nurse Call System:  
\_\_\_\_ Staff assistance station  
\_\_\_\_ Emergency call station

Table 2.1-2

**Ventilation:**

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

**Communications:**

- \_\_\_\_ Public communication services provided in each  
family & visitor lounge 2.1-2.10.1.6

**Architectural Requirements****Building Systems Requirements**

- (1) ☐ area for communications (e.g. cell phones computers wireless Internet access)
- (2) ☐ patient-family information stations
- (3) ☐ access to beverages & nourishment

**2.2-2.2.10.2**

- (1) ☐ Toilet room
- ☐ handwashing station
- ☐ readily accessible\* to multipurpose room

**2.2-2.2.10.4**

- ☐ Place for meditation & prayer
- ☐ at least one dedicated quiet space to support meditation bereavement or prayer

**\*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** **CORRIDOR WIDTH:**
- NFPA 101, 18.2.3.4 ☐ 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

**or**

- ☐ Detailed code review incorporated in Project Narrative

**2.1-7.2.2.2****CEILING HEIGHT:**

- (1) ☐ Min ceiling height 7'-6" in corridors & in normally unoccupied spaces
- (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****DOORS & DOOR HARDWARE:**

(1)

**Door Type:**

(a)

- ☐ doors between corridors, rooms, or spaces subject to occupancy swing type or sliding doors

(b)

- ☐ sliding doors
- ☐ check if not included in project
- ☐ manual or automatic sliding doors comply with NFPA 101
- ☐ 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 & doors with emergency breakaway hardware

(4) _____ Lever hardware or push/pull latch hardware	(3) (a) _____ Handwashing station countertops made of porcelain, stainless steel, solid-surface materials or impervious plastic laminate assembly
(5) Doors for Patient Bathing/Toilet Facilities:	(b) _____ Countertops substrate
(a) _____ two separate doors <b>or</b> _____ door that swings outward	_____ <input type="checkbox"/> check if <u>not</u> included in project
<b>or</b> _____ door equipped with emergency rescue hardware (permits quick access from outside the room to prevent blockage of the door)	_____ marine-grade plywood (or equivalent material) with impervious seal
<b>or</b> _____ sliding door other than pocket door	(4) _____ Handwashing station casework
(b) _____ bathing area or toilet room opens onto public area or corridor <input type="checkbox"/> check if <u>not</u> included in project _____ visual privacy is maintained	_____ <input type="checkbox"/> check if <u>not</u> included in project _____ designed to prevent storage beneath sink
2.1-7.2.2.5 WINDOWS IN PATIENT ROOMS:	(5) _____ Provisions for drying hands
2.1-7.2.2.5(1) _____ Each patient room provided with natural light by means of window to outside	(a) _____ hand-drying device does not require hands to contact dispenser
2.1-7.2.2.5(2) _____ Operable windows in patient rooms or suites <input type="checkbox"/> check if <u>not</u> 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	(b) _____ hand-drying device is enclosed to protect against dust or soil & to ensure single-unit dispensing
2.1-7.2.2.6 _____ insect screens	(6) _____ Liquid or foam soap dispensers
2.1-7.2.2.5(3) Window Size In Patient Rooms:	2.1-7.2.2.9 GRAB BARS:
(a) _____ minimum net glazed area be no less than 8% of required min. clear floor area of room served	(1) _____ Grab bars anchored to sustain concentrated load 250 pounds
(b) _____ maximum 36 inches windowsill height above finished floor	(2) _____ Grab bars in toilet rooms used by patients of size anchored to sustain concentrated load 800 pounds
2.1-7.2.2.7 GLAZING MATERIALS:	(3) _____ Ends of grab bars constructed to prevent snagging clothes of patients, staff & visitors
_____ Glazing within 1 foot 6 inches of floor <input type="checkbox"/> check if <u>not</u> included in project _____ must be safety glass, wire glass or plastic break-resistant material	2.1-7.2.2.10 HANDRAILS:
2.1-7.2.2.8 HANDWASHING STATIONS:	(1) _____ Handrails installed on both sides of patient use corridors
(1)(c) _____ Handwashing stations in patient care areas located so they are visible & unobstructed	(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 <b>or</b> _____ 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

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 **FURNISHINGS**

- 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:**

- (1) ☐ patient-controlled window treatments allow for patient privacy & control light levels & glare  
 (2) ☐ window treatments do not compromise patient safety  
☐ easy for patients, visitors & staff to operate

- (3) ☐ window treatments selected for ease of cleaning, disinfection or sanitization

- 2.1-7.2.4.3 ☐ Privacy curtains in patient rooms & other patient care areas are washable  
☐ check if not included in project

## 2.1-8.2

**HEATING VENTILATION & AIR-CONDITIONING (HVAC) SYSTEMS**

## Part 3/6.1

## Part 3/6.1.1

**UTILITIES:****Ventilation Upon Loss of Electrical Power:**

- ☐ space ventilation & pressure relationship requirements of Tables 7.1 are maintained for AII Rooms, PE Rooms in event of loss of normal electrical power

**Heating & Cooling Sources:**

- ☐ heat sources 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 for domestic hot water & to provide heating for inpatient 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  
☐ cooling sources sufficient to support facility operation plan upon breakdown or routine maintenance of any one of cooling sources

## Part 3/6.2

## Part 3/6.2.1

**AIR-HANDLING UNIT (AHU) DESIGN:**

- ☐ AHU casing is designed to prevent water intrusion, resist corrosion & permit access for inspection & maintenance

## Part 3/6.3

**OUTDOOR AIR INTAKES & EXHAUST DISCHARGES:****Outdoor Air Intakes:**

- ☐ located min. of 25 ft from cooling towers & all exhaust & vent discharges  
☐ outdoor air intakes located such that bottom of air intake is at least 6'-0" above grade  
☐ air intakes located away from public access



Part 3/6.3.1.3 ☐ intakes on top of buildings  
☐ check if not included in project  
☐ located with bottom of air intake min. 3'-0" above roof level

Part 3/6.3.2 Exhaust Discharges for Infectious Exhaust Air:

Part 3/6.3.2.1 ☐ check if not included in project  
☐ 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 is 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:

☐ Two filter banks for inpatient care (see Table 6.4)  
☐ Filter Bank No. 1: MERV 7  
☐ Filter Bank No. 2: MERV 14  
☐ 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 3/6.4.1 ☐ Filter Bank No. 1 is placed upstream of heating & cooling coils

Part 3/6.4.2 ☐ Filter Bank No. 2 is placed 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 & burn unit

Part 3/6.7 AIR DISTRIBUTION SYSTEMS:

Part 3/6.7.1 ☐ pressure relationships required in tables 7.1 maintained 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 are served by fully ducted return or exhaust systems

Part 3/6.7.2 Air Distribution Devices:  
☐ supply air outlets comply with Table 6.7.2

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 Filter Bank No. 2  
 Part 3/6.8.2 ☐ AII room exhaust systems or combination AII/PE rooms are not used for energy recovery

Part 3/6.8.3 ☐ Energy recovery systems with leakage potential  
☐ check if not included in project  
☐ arranged to minimize potential to transfer exhaust air directly back into supply airstream  
☐ designed to have no more than 5% of total supply airstream consisting of exhaust air

Part 3/7 SPACE VENTILATION—HOSPITAL SPACES:

Part 3/7.1.a ☐ Spaces ventilated according to Table 7.1  
 Part 3/7.1.a.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 3/7.1a.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 a single space  
☐ provides min. MERV 6 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
- Part 3/7.2.1 \_\_\_ 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
- Part 3/7.2.2 **Protective Environment (PE) Rooms**  
☐ check if not included in project
- Part 3/7.2.2 \_\_\_ Supply air diffusers are located above patient bed  
 \_\_\_ Exhaust grilles or registers are located near patient room door.  
 \_\_\_ PE rooms have permanently installed device to constantly monitor differential air pressure between room & corridor local  
 \_\_\_ Visual means is provided to indicate whenever positive differential pressure is not maintained
- Part 3/7.2.3 **Combination Airborne Infectious Isolation/ Protective Environment Room (AII/PE)**  
☐ check if not included in project  
 \_\_\_ Supply air diffusers are located above patient bed  
 \_\_\_ Exhaust grilles or registers are located near patient room door.  
 \_\_\_ Anteroom  
☐ check if not included in project  
 \_\_\_ anteroom is at positive pressure with respect to both AII/PE room & corridor or common space

or

\_\_\_ anteroom is at negative pressure with respect to both AII/PE room & corridor or common space

- \_\_\_ First device monitors pressure differential between AII/PE room & anteroom  
 \_\_\_ Second device monitors pressure differential between anteroom & corridor or common space  
 \_\_\_ Local visual means are provided to indicate whenever differential pressures are not maintained

## 2.1-8.3

## 2.1-8.3.2.2

(1)

(2)

(3)

## 2.1-8.3.3

## 2.1-8.3.3.1

(1)

(2)

## 2.1-8.3.4

## 2.1-8.3.4.2

## 2.1-8.3.4.3(1)

(a)

## 2.1-8.3.4.3(2)

## 2.1-8.3.5

## 2.1-8.3.5.1

**ELECTRICAL SYSTEMS**

## Panelboards:

- \_\_\_ panelboards serving life safety branch circuits serve floors on which they are located & floors immediately above & below  
 \_\_\_ panelboard critical branch circuits serve floors on which they are located  
 \_\_\_ panelboards not located in exit enclosures or exit passageways

**POWER-GENERATING & -STORING EQUIPMENT**

\_\_\_ Essential electrical system or emergency electrical power

\_\_\_ essential electrical system complies with NFPA 99

\_\_\_ emergency electrical power complies with NFPA 99

**LIGHTING:**

\_\_\_ Luminaires in wet areas have smooth cleanable shatter-resistant lenses & no exposed lamps

- \_\_\_ Reading light for each patient bed  
☐ incandescent & halogen lights  
☐ check if not included in project  
 \_\_\_ placed or shielded to protect patient from injury  
 \_\_\_ light covered by diffuser or lens  
 \_\_\_ flexible light arms

☐ check if not included in project  
 \_\_\_ mechanically controlled to prevent lamp from contacting bed linen

\_\_\_ Patient care unit corridors have general illumination with provisions for reducing light levels at night

**ELECTRICAL EQUIPMENT:**

\_\_\_ Handwashing 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

**2.1-8.4.2.5 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"
- (3)(a) ☐ no installation of dead-end piping (except for empty risers mains & branches for future use)
- (3)(c) ☐ any existing dead-end piping is removed
- (3)(b) ☐ 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 electronic data processing areas & electric closets
- ☐ check if not included in project
- ☐ special provisions to protect space below from leakage & condensation
- (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

**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 that will reduce risk of splashing to areas for direct patient care & medication preparation
- (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 min. 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 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 and during loss of normal power

**2.1-8.4.3.3 Showers & Tubs:**

- (1) ☐ nonslip surfaces

**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:**

- ☐ check if not included in project
- (1) ☐ trimmed with valves that can be operated without hands (may be single-lever or wrist blade devices)
- (a) ☐ handles are at least 6 in. long
- (b) ☐ integral trap wherein upper portion of water trap provides visible seal
- (2) ☐

- 2.1-8.4.3.7 Bedpan-Rinsing Devices:  
 (1) ☐ bedpan-rinsing devices provided in each inpatient toilet room  
 (2) ☐ use cold water only

- 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) ☐ Nurse call systems report to attended location with electronically supervised visual & audible annunciation  
 (4) ☐ Call system complies with UL 1069 "Standard for Hospital Signaling & Nurse Call Equipment"  
 (5) ☐ Wireless nurse call system  
☐ check if not included in project  
☐ complies with UL 1069

- 2.1-8.5.1.2 Patient Call Stations:  
 (1) ☐ each patient sleeping bed provided with patient call station equipped for two-way voice communication  
 (2)(a) ☐ indicator light that remains lighted as long as voice circuit is operating  
 (2)(b) ☐ reset switch for canceling call  
 (3)(a) ☐ visible signal in corridor at patient's door  
 Multi-Corridor Patient Areas:  
☐ check if not 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