COMPLIANCE CHECKLIST

OP14_Renal Dialysis Centers

The following checklist is intended to be used in the plan review applications for health care facilities submitted to the Massachusetts Department of Public Health. This checklist summarizes and references the applicable requirements from the Licensure Regulations and the 2022 Edition of the FGI Guidelines for Design and Construction of Outpatient Facilities. Applicants must verify compliance of the plans submitted to the Department with all referenced requirements from the Licensure Regulations and FGI Guidelines when completing this Checklist. A separate Checklist must be completed for each nursing unit, hospital or clinic department, or clinical suite.

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

- NFPA 101 Life Safety Code (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.

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 <u>not</u> be used for an existing required support space associated with a new patient care room or area.

☒ = Check box under section titles or individual requirements lines for optional services or functions that are not included in the project 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 <u>same name labels</u> 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 & patient care station requirements including asterisks (*) refer to the definitions of the Glossary in the beginning section of the FGI Guidelines and reproduced in this checklist.

Facility Name:

DoN Project Number: (if applicable)

Facility Address:

Satellite Name: (if applicable)

Building/Floor Location:

Satellite Address: (if applicable)

Submission Dates:

Project Description:

Initial Date:

Revision Date:

Architectural Requirements **Building Systems Requirements**

2.10 **RENAL DIALYSIS CENTERS**

2.10-1.1 Application:

2.10-1.1.1 ___ renal dialysis centers that treat patients with chronic renal disease

145.200 Location:

___ dialysis area is separate from other patient care & administrative activities

___ dialysis area not located in area that provides access to such other areas

2.10-2 **ACCOMMODATIONS FOR CARE OF PATIENTS OF SIZE**

2.1-2.1.1.2 ☐ check if not included in project (only if a Patient Handling & Movement Assessment that determines that the outpatient service does not have a need for expanded-capacity lifts & architectural details that support movement of patients of size in patient areas is attached to the Project Narrative)

2.1-2.1.2 Location:

___ spaces designated for care of or use by patients of size are provided in locations to accommodate population expected to be served by facility

2.1-2.5 ___ Handwashing stations

2.1-2.5.2 ___ downward static force required for handwashing stations designated for patients of size accommodates maximum patient weight of patient population

2.1-2.6 ___ Patient toilet room

2.1-2.6.1.1 ___ expanded-capacity toilet

___ mounted min. 36” from finished wall to centerline of toilet on both sides (for caregiver assistance and/or use of floor-based lift)

or

2.1-2.6.1.2 ___ regular toilet

___ mounted Min. 44” from centerline of toilet on both sides to finished walls to allow for positioning of expanded-capacity commode over toilet

2.1-2.6.1.3 ___ rectangular clear floor area Min. 46” wide extends 72” from front of toilet

2.1-2.6.2.1 ___ grab bars in toilet rooms intended for use by individuals of size are anchored to sustain concentrated load of 800 pounds

2.1-2.6.2.2 ___ adjustable/foldable grab bar mounted on horizontally movable track is provided

Ventilation:

___ Min. 10 air changes per hour Table 8-1

___ Exhaust

___ Negative pressure

___ No recirculating room units

Nurse Call System:

___ Toilet room call station Table 2.1-3

Architectural Requirements **Building Systems Requirements**

2.1-2.7 ___ Single-patient examination room
2.1-2.7.1 Space Requirements:
2.1-2.7.1.1(1) ___ min. 5'-0" clearance at foot of expanded-capacity exam table
(2) ___ min. 3'-0" clearance on non-transfer side of expanded- capacity exam table
(3)(a) ___ min. 5'-0" on transfer side of expanded-capacity exam table with ceiling- or wall-mounted lift
or
(3)(b) ___ min. 7'-0" on transfer side of expanded-capacity exam table in rooms without ceiling- or wall-mounted lift

Ventilation:
___ Min. 4 air changes per hour Table 8-1
Lighting:
___ Portable or fixed exam light 2.1-8.3.4.2(1)
Power:
___ Min. 8 receptacles Table 2.1-1
___ 4 convenient to head of exam table or gurney

2.1-2.8 ___ Equipment & supply storage

2.1-2.9 ___ Waiting areas
2.1-2.9.1 ___ seating for persons of size be provided in waiting areas in outpatient facilities
2.1-2.9.2 ___ waiting areas be sized to accommodate expanded-capacity furniture required for patients & visitors of size

2.1-2.10.1 ___ All plumbing fixtures, handrails, grab bars, patient lift, equipment, built-in furniture & other furnishings designed to accommodate maximum patient weight

2.1-2.10.2 Door Openings:
2.1-2.10.2.1 ___ door openings used for path of travel to public areas & areas for care of patients of size have min. clear width of 45.5"
2.1-2.10.2.2 ___ door openings to toilet rooms designated for patients of size have min. clear width of 45.5"

2.10-3 **PATIENT CARE & DIAGNOSTIC AREAS**
2.10-3.1 ___ Examination room
☐ check if not included in project
2.1-3.2.2.1(1)(b) ___ Provisions to preserve patient privacy from observation from outside exam room

Space Requirements:
(2)(a) ___ min. clear floor area 80 sf
___ room size allows min. clearance 2'-8" at each side & at foot of exam table or recliner
___ room arrangement shown in the plans for each exam room (Layout #1)

Ventilation:
___ Min. 4 air changes per hour Table 8-1
Lighting:
___ Portable or fixed exam light 2.1-8.3.4.2(1)
Power:
___ Min. 8 receptacles
___ 4 convenient to head of exam table or gurney Table 2.1-1

(3) Exam Room Features:
(a) ___ portable or fixed exam light
(b) ___ storage for supplies
(c) ___ accommodations for written or electronic documentation
(d) ___ space for visitor's chair
(e) ___ handwashing station

	Architectural Requirements	Building Systems Requirements
2.10-3.2	**Hemodialysis Treatment Area:**	
2.10-3.2.1.2	___ Treatment area separate from administrative & waiting areas	
2.10-3.2.1.3	___ Patient scale ___ dedicated space for patient scale	
2.10-3.2.2	___ Hemodialysis patient care stations	
2.10-3.2.2.1	___ no built-in cabinetry or casework for other than concealment of infrastructure (e.g., piping, cables)	
2.10-3.2.2.1	Space Requirements:	
(1)	___ min. clearance 4'-0" between sides of dialysis chairs	
(2)	___ min. clearance 3'-0" between sides of dialysis chairs & adjacent walls or partitions	
(3)	___ min. clearance 2'-0" at foot of dialysis chair in its fully open position	
	___ dimensional specifications of dialysis chairs in fully open position are attached to Project Narrative	
145.210	Space between dialysis stations: ___ sufficient for equipment & patient care ___ sufficient to prevent cross contamination ___ accommodates medical emergency equipment & staff access to patient by at least two persons ___ space between dialysis stations is documented in Project Narrative according to above criteria	
2.10-3.2.4	Patient Privacy: ___ space available to accommodate provisions for patient privacy (including privacy curtains or privacy screens)	
2.10-3.2.5	Handwashing Stations:	
2.1-3.8.7.1	___ located in each room where hands-on patient care is provided	
2.1-3.8.7.3	___ handwashing station serves multiple patient care stations ☐ check if not included in project	
(1)	___ at least one handwashing station provided for every four patient care stations or fewer & for each major fraction thereof	

Ventilation:		
___ Min. 6 air changes per hour	Table 8-1	
Lighting:	145.291(C)(1)	
___ connected to emergency power	(b)	
Power:		
___ Min. 8 receptacles	Table 2.1-1	
___ 4 on each side of patient bed or lounge chair		
___ 2 on each side of the bed connected to emergency power		
Nurse Call:		
___ Patient call station	Table 2.1-3	
___ Emergency call station		
Plumbing:		
___ Treated water outlet	2.10-3.2.2.3	

Architectural Requirements **Building Systems Requirements**

(2) ___ evenly distributed based on arrangement of patient care stations

2.10-3.2.5.1 ___ one of these handwashing stations is located at entry to hemodialysis treatment area

2.10-3.2.6 ___ Fluid disposal sink (intended for disposal of dialysate & other byproducts of dialysis)

2.10-3.2.6.1 ___ at least one dedicated sink provided in treatment area for fluid waste disposal

2.10-3.2.6.2 ___ deep enough to avoid potential splash of biological waste & cross-contamination to areas w/ stored or prepared clean items

2.10-3.2.6.3 ___ located to prevent cross-contamination of handwashing stations

2.10-3.2.6.4 ___ hands-free faucets or fittings that are non-sensor-operated

2.10-3.3 ___ Home training room

145.340 ☐ check if not included in project (only if clinic has affiliation agreement with hospital or out-of-hospital dialysis unit for provision of home dialysis training program)

2.10-3.3.1 ___ private treatment room of at least 120 sf

2.10-3.3.2 ___ designed to mimic residential environment

2.10-3.3.2.1 ___ counter

2.10-3.3.2.2 ___ handwashing station

2.10-3.3.2.3 ___ separate drain for fluid disposal

2.10-3.3.2.3 ___ fluid disposal fixture, e.g. residential-style toilet

Ventilation	
___ Min. 6 air changes per hour	Table 8-1
Lighting:	
___ connected to emergency power	145.291(C)(1)
Power:	
___ Min. 4 receptacles on each side of patient bed or lounge chair	Table 2.1-1
___ 2 on each side of bed connected to emergency power	
Nurse Call:	
___ Patient call station	Table 2.1-3
___ Emergency call station	

2.10-3.4 **Special Patient Care Rooms:**

2.10-3.4.1 ___ Dedicated hemodialysis room for patients with special precaution needs

___ provided to prevent contact transmission of infectious microorganisms (e.g., Hepatitis B)

2.10-3.4.1.1(1) ___ dedicated single-patient room

2.10-3.4.1.1(2) ___ allows for direct staff observation of patient's face & vascular access during treatment

2.10-3.4.1.2(1) ___ min. clear floor area 120 sf

2.10-3.4.1.2(2) ___ handwashing station

2.10-3.4.1.2(3) ___ fluid disposal sink (intended for disposal of dialysate & other byproducts of dialysis)

2.10-3.2.6.2 ___ deep enough to avoid potential splash of biological waste & cross-contamination to areas w/ stored or prepared clean items

2.10-3.2.6.3 ___ located to prevent cross-contamination of handwashing station

2.10-3.2.6.4 ___ hands-free faucets or fittings that are non-sensor-operated

	Architectural Requirements	Building Systems Requirements	
2.10-3.4.1.2(4)	___ personal protective equipment (PPE) storage		
2.10-3.4.1.3	Architectural details: ___ door & walls allow for visual monitoring of patient		
2.10-3.8	**Support Areas for Renal Dialysis Center:**		
2.10-3.8.2	___ Nurse station		
2.10-3.8.2.2	___ designed so that each dialysis patient care station is visible from at least one nurse station location	Lighting: ___ connected to emergency power	145.291(C)(1) (b)
(1)	___ visual observation includes direct observation of patient's face & vascular access		
(2)	___ casework & fixed obstructions in hemodialysis treatment area are no higher than 3'-8" in sight lines that would impair visual observation of patient care stations		
2.1-3.8.2.1	___ work counter		
2.1-3.8.2.2	___ means for facilitating staff communication		
2.1-3.8.2.3	___ space for supplies		
2.1-3.8.2.4	___ accommodations for written or electronic documentation		
2.1-3.8.2.5	___ hand sanitation dispenser		
2.10-3.8.8	___ Medication safety zone		
2.10-3.8.8.2	___ dedicated medication safety zone centrally located in dialysis center ___ located at least 6'-0" from any individual gurney/dialysis chair		
2.1-3.8.8.1(2)	Design Promotes 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	Lighting: ___ Task-specific lighting level min. 100 foot-candles	2.1-3.8.8.1(2)(d)
(c)	___ work counters provide space to perform required tasks		
(e)	___ sharps containers placed at height that allows users to see top of container		
2.1-3.8.8.2(1)	___ medication preparation room	Ventilation: ___ Min. 4 air changes per hour Lighting: ___ Task lighting ___ Connected to emergency power	Table 8-1 2.1-3.8.8.1(2)(d) 145.291(C)(1) (b)
(a)	___ work counter ___ handwashing station ___ lockable refrigerator ☐ check if not included in project (only if no medications requiring refrigeration are stored) ___ locked storage for controlled drugs ___ sharps containers ☐ check if not included in project		

	Architectural Requirements	Building Systems Requirements	
(b)	___ self-contained medication dispensing units ☐ check if not included in project		
	___ room designed with space to prepare medications		
	or		
2.1-3.8.8.2(2)	___ automated medication-dispensing unit		
2.1-3.8.8.2(2)(a)	___ located at nurse station, in clean workroom or in alcove	Lighting: ___ connected to emergency power	145.291(C)(1)(b)
2.1-3.8.8.2(2)(b) 145.230(E)	___ handwashing station provided next to stationary medication-dispensing units	___ Task lighting	2.1-3.8.8.1(2)(d)
2.1-3.8.8.2(2)(c)	___ countertop or cart provided adjacent to stationary medication-dispensing units		
2.10-3.8.9	___ Nourishment area ☐ check if not included in project		
2.1-3.8.9.1	___ handwashing station in or directly accessible	Ventilation: ___ Min. 2 air changes per hour	Table 8-1
2.1-3.8.9.2	___ work counter		
2.1-3.8.9.3	___ storage		
2.1-3.8.9.4	___ fixtures & appliances for beverages & nourishment		
2.10-3.8.11	___ Clean workroom or clean supply room		
2.1-3.8.11.1	___ separate from & have no direct connection with soiled workrooms or soiled holding rooms		
2.1-3.8.11.2	___ clean workroom	Ventilation: ___ Min. 4 air changes per hour ___ Positive pressure Lighting: ___ Connected to emergency power	Table 8-1 145.291(C)(1)(b)
(1)	___ work counter		
(2)	___ handwashing station		
(3)	___ storage facilities for clean & sterile supplies		
	or		
2.1-3.8.11.3	___ clean supply room ___ used only for storage & holding as part of system for distribution of clean & sterile materials	Ventilation: ___ Min. 4 air changes per hour ___ Positive pressure Lighting: ___ Connected to emergency power	Table 8-1 145.291(C)(1)(b)
2.1-3.8.12.2	___ Soiled workroom		
2.1-3.8.12.1	___ does not have direct connection with clean workrooms or clean supply rooms		
2.1-3.8.12.2(1)(a)	___ handwashing station	Ventilation: ___ Min. 10 air changes per hour ___ Exhaust ___ Negative pressure ___ No recirculating room units Lighting: ___ Connected to emergency power	Table 8-1 145.291(C)(1)(b)
145.230(G)	___ flushing-rim clinical service sink		
2.1-3.8.12.2(1)(c)	___ work counter		
2.1-3.8.12.2(1)(d)	___ space for separate covered containers for waste & soiled linen		
2.1-3.8.12.2(2)	___ fluid management system ☐ check if not included in project		

	Architectural Requirements	Building Systems Requirements	
(a)	___ electrical & plumbing connections that meet manufacturer requirements		
(b)	___ space for docking station		
145.230(G)	___ storage cabinets		
2.10-3.8.13.1	___ Clean linen storage ☐ check if not included in project (only if no blankets or other linens are used)		
(1)	___ clean linen storage closet **or** ___ covered cart		
(2)	___ covered linen cart is out of path of normal traffic ___ covered linen cart is under staff control		
2.10-3.8.13.2	___ Clinical equipment & supply ___ storage areas or space for supply carts		
2.10-3.8.13.3	___ Storage space for wheelchairs & motorized chairs		
(2)	___ min one wheelchair storage or wheelchair parking space provided for every four patient care stations		
2.1-3.8.13.3			
2.1-6.2.7.1	___ Wheelchair storage ☐ check if not included in project ___ designated area located out of required corridor width ___ directly accessible to entrance ___ provided for at least one wheelchair		
2.1-6.2.7.2	___ Wheelchair parking space ___ designated area provided for parking at least one patient-owned wheelchair in non-public area ___ located out of any required egress width or other required clearance		
2.10-3.8.13.4	___ Emergency equipment storage ___ adjacent to hemodialysis treatment area		
2.10-3.9	**Support Areas for Staff:**		
2.10-3.9.1	___ Lockers		
2.10-3.9.2	___ Staff toilet room ___ handwashing station	Ventilation: ___ Min. 10 air changes per hour ___ Exhaust ___ Negative pressure ___ No recirculating room units	Table 8-1
2.10-3.10	**Support Areas for Patients:**		
2.10-3.10.2	___ Patient toilet room ___ handwashing station	Ventilation: ___ Min. 10 air changes per hour ___ Exhaust ___ Negative pressure ___ No recirculating room units Nurse Call System: ___ Toilet room call station	Table 8-1 Table 2.1-3
2.10-3.10.3	___ Storage for patient belongings		

	Architectural Requirements	Building Systems Requirements	
2.10-4	**PATIENT SUPPORT FACILITIES**		
2.10-8.4.2	___ Hemodialysis water treatment equipment area		
2.10-8.4.2.1	___ water treatment purification equipment located in dedicated area		
	___ space to access all components of equipment		
(1)	___ includes drain		
(2)	___ located in secured space or room		
2.10-4.5.1	___ Dialyzer reprocessing room		
	☐ check if not included in project		
2.10-4.5.1.1	___ layout design provides for one-way flow of materials from soiled to clean		
2.10-4.5.1.2(1)	___ refrigeration for temporary storage of dialyzers		
2.10-4.5.1.2(2)	___ decontamination/cleaning areas		
2.10-4.5.1.2(3)	___ handwashing station		
2.10-4.5.1.2(4)	___ processors		
2.10-4.5.1.2(5)	___ computer processors & label printers		
2.10-4.5.1.2(6)	___ packaging area		
2.10-4.5.1.2(7)	___ dialyzer storage cabinets		
2.10-4.5.2	___ Dialysate preparation area		
2.10-4.5.2.2	☐ check if not included in project		
(1)	___ handwashing station		
(2)	___ storage space		
(3)	___ work counter for mixing & distribution equipment		
(4)	___ floor drain		
(5)	___ treated water outlet		
2.10-4.5.3	___ Equipment repair room		
2.10-4.5.3.1	___ handwashing station	Lighting:	
2.10-4.5.3.2	___ treated water outlet for equipment maintenance	___ Connected to emergency power	145.291(C)(1)(b)
		Power:	
	___ drain or sink for equipment connection & testing	___ Min. one duplex receptacle	145.291(C)(2)(c)
2.10-4.5.3.3	___ work counter		
2.10-4.5.3.4	___ storage cabinet		
2.10-4.5.4	___ Emergency first-aid equipment		
2.1-8.4.3.8	___ quick- drench emergency deluge shower		
	___ face & eyewash devices		
2.10-5	**BUILDING SUPPORT FACILITIES**		
2.10-5.3	___ Environmental services room		
	___ for exclusive use of dialysis center		
2.1-5.3.1.2(1)	___ service sink or floor-mounted mop sink		
2.1-5.3.1.2(2)	___ provisions for storage of supplies & housekeeping equipment	Ventilation:	
		___ Min. 10 air changes per hour	Table 8-1
		___ Exhaust	
2.1-5.3.1.2(3)	___ handwashing station or hand sanitation dispenser	___ Negative pressure	
		___ No recirculating room units	

	Architectural Requirements	Building Systems Requirements	
2.10-6.2	**PUBLIC AREAS**		
2.1-6.2.1	___ Vehicular drop-off & pedestrian entrance		
2.1-6.2.1.1	___ min. of one building entrance reachable from grade level		
2.1-6.2.1.2	___ building entrances used to reach outpatient services are clearly marked		
2.1-6.2.1.3	___ building entrances used to reach outpatient services located so patients need not go through other activity areas (except for shared lobbies in multi-occupancy buildings)		
2.1-6.2.2	___ Reception		
	___ reception & information counter, desk or kiosk provided either at main entry or at each clinical service		
2.1-6.2.3	___ Waiting area		
2.1-6.2.3.2	___ visible from staff area either by camera or direct staff sight line		
2.1-6.2.4	___ Public toilet room		
2.1-6.2.4.2	(may be located off public corridor in multi-tenant building)		
2.1-6.2.4.1	___ readily accessible from waiting area without passing through patient care or staff work areas	Ventilation: ___ Min. 10 air changes per hour ___ Exhaust ___ Negative pressure ___ No recirculating room units	Table 8-1
2.1-6.2.5	___ Provisions for telephone access		
	___ access to make local phone calls		
2.1-6.2.6	___ Provisions for drinking water		
2.10-6.3	**ADMINISTRATIVE AREAS**		
2.1-6.3.3	___ Office space for business, administrative & professional staffs		
2.10-6.3.5	___ Medical records space		
	___ provisions for securing medical records of all media types used by facility		
2.1-6.3.5.1	___ location restricted to staff access to maintain confidentiality of record		
2.1-6.3.5.2	Space Requirements:		
(1)	___ space provided for medical records management		
(2)	___ physical space for electronic storage of forms or documents		

LOCATION TERMINOLOGY:

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

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

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

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

Architectural Details & MEP Requirements

2.1-7.2.2 **ARCHITECTURAL DETAILS**

CORRIDOR WIDTH:

2.1-7.2.2.1 IBC 1018.2
___ Min. 44”
or
___ Detailed code review incorporated in Project Narrative

421 CMR 6.00
___ Corridors include turning spaces for wheelchairs

2.10-7.2
___ At least one path of travel that serves dialysis facility be sized for passage of emergency medical personnel who are transporting patient by gurney or stretcher

(2)
___ Corridors used for stretcher & gurney transport have min. corridor or aisle width of 6’-0”
☐ check if not included in project

2.1-7.2.2.2 CEILING HEIGHT:
(1)
___ Min. height 7'-6” in corridors & normally unoccupied spaces
(2)
___ Min. height 7’-6” above floor of suspended tracks, rails & pipes located in traffic path
___ 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. 32” clear door width
___ min. 83.5” clear door height

(b) Rooms with Gurney Access:
☐ check if not included in project
___ 41.5” min. clear door width
___ 79.5” min. clear door height

(3) Door Swing:
(a)
___ doors do not swing into corridors except doors to non-occupiable spaces (e.g. environmental services rooms & electrical closets) & doors with emergency breakaway hardware

(4)
___ Lever hardware or push/pull latch hardware

(5) Doors for Patient Toilet Facilities:
(a)
___ door that swings outward
or
___ door equipped with emergency rescue hardware (permits quick access from outside room to prevent blockage of door)
or
___ sliding door other than pocket door

(b)
___ toilet room opens onto public area or corridor
☐ check if not included in project
___ visual privacy is maintained

2.1-7.2.2.8 HANDWASHING STATIONS:
(3)(a)
___ Handwashing station countertops made of porcelain, stainless steel, solid-surface materials or impervious plastic laminate assembly
(3)(b)
___ Countertops substrate
☐ check if not included in project
___ marine-grade plywood (or equivalent material) with impervious seal
(4)
___ Handwashing station casework
☐ check if not included in project
___ designed to prevent storage beneath sink
(5)
___ Provisions for drying hands
☐ check if not included in project
(only at hand scrub facilities)
(a)
___ hand-drying device does not require hands to contact dispenser
(b)
___ hand-drying device is enclosed to protect against dust or soil
(6)
___ Liquid or foam soap dispensers

2.1-7.2.2.9 GRAB BARS:
(1)
___ Grab bars anchored to sustain concentrated load 250 pounds
(3)
___ Ends of grab bars constructed to prevent snagging clothes of patients staff & visitors

2.1-7.2.2.10 HANDRAILS:
☐ check if not included in project
(1) ___ Rail ends return to wall or floor
(2) ___ Handrail gripping surfaces & fasteners are smooth (free of sharp or abrasive elements) with 1/8-inch min. radius
(3) ___ Handrails have eased edges & corners
(4) ___ Handrail finishes are cleanable

2.1-7.2.2.14 ___ Decorative water features
☐ check if not included in project
(1) ___ no indoor unsealed (open) water features in confines of outpatient suite
(2) ___ no covered fish tanks in other than public areas of outpatient suite

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 all areas subject to frequent wet cleaning are constructed of materials that are not physically affected by germicidal or other types of cleaning solutions
(6)(a) ___ Floors are monolithic & integral coved wall bases are at least 6" high & tightly sealed to wall in rooms listed below:
- soiled workroom & soiled holding room
- Airborne Infection Isolation (AII) Rooms

2.1-7.2.3.2 WALLS & WALL PROTECTION:
(1)(a) ___ Wall finishes are washable
(1)(b) ___ Wall finishes near plumbing fixtures are smooth, scrubbable & water-resistant
(2) ___ Wall surfaces in areas routinely subjected to wet spray or splatter (e.g. environmental services rooms) are monolithic or have sealed seams that are tight & smooth
(4) ___ 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

2.1-7.2.4.3 ___ Privacy curtains in 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 UTILITIES:
Part 3/6.1.1 Ventilation Upon Loss of Electrical Power:
___ space ventilation & pressure relationship requirements of Table 8-1 are maintained for AII Rooms in event of loss of normal electrical power
☐ check if not included in project

Part 3/6.1.2 Heating & Cooling Sources:
Part 3/6.1.2.1 ___ heat sources & essential accessories provided in number & arrangement sufficient to accommodate facility needs (reserve capacity) even when any one of heat sources or essential accessories is not operating due to breakdown or routine maintenance

Part 3/6.1.2.2 Central cooling systems greater than 400 tons (1407 kW) peak cooling load
☐ check if not included in project
___ number & arrangement of cooling sources & essential accessories is sufficient to support owner's facility operation plan upon breakdown or routine maintenance of any one of cooling sources

Part 3/6.2 AIR-HANDLING UNIT (AHU) DESIGN:
Part 3/6.2.1 ___ AHU casing is designed to prevent water intrusion, resist corrosion & permit access for inspection & maintenance

.
Part 3/6.3 OUTDOOR AIR INTAKES & EXHAUST DISCHARGES:
Part 3/6.3.1 Outdoor Air Intakes:
Part 3/6.3.1.1 ___ located such that shortest distance from intake to any specific potential outdoor contaminant source be equal to or greater than separation distance listed in Table 6-1
___ located min. of 25'-0" from cooling towers & all exhaust & vent discharges

___ outdoor air intakes located such that bottom of air intake is at least 6'-0" above grade
___ air intakes located away from public access
___ all intakes are designed to prevent entrainment of wind-driven rain

Part 3/6.3.1.4 ___ intake in areaway
☐ check if not included in project
___ bottom of areaway air intake opening is at least 6'-0" above grade
___ bottom of air intake opening from areaway into building is at least 3'-0" above bottom of areaway

Part 3/6.3.2 Contaminated Exhaust Discharges:
☐ check if not included in project

Part 3/6.3.2.1 ___ ductwork within building is under negative pressure for exhaust of contaminated air (i.e. air from AII rooms or HD sterile compounding pharmacy)
___ 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 located not less than 25'-0" horizontally from outdoor air intakes, openable windows/doors & areas that are normally accessible to public

Part 3/6.4 FILTRATION:

a. ___ Particulate matter filters, min. MERV-8 provided upstream of first heat exchanger surface of any air-conditioning system that combines return air from multiple rooms or introduces outdoor air.

b. ___ Outdoor air filtered in accordance with Table 8-1

c. ___ Air supplied from equipment serving multiple or different spaces is filtered in accordance with Table 8-1

d. ___ Air recirculated within room is filtered in accordance with Table 8-1

e. ___ Design includes all necessary provisions to prevent moisture accumulating on filters located downstream of cooling coils & humidifiers

h. ___ For spaces that do not permit air recirculated by means of room units & have min. filter efficiency of MERV-14, MERV-16 or HEPA in accordance with Table 8-1, the min. filter requirement listed in Table 8-1, is installed downstream of all wet-air cooling coils & supply fan

Part 3/6.4.1 ___ Filter Bank No. 1 placed upstream of heating & cooling coils

Part 3/6.4.2 ___ Filter Bank No. 2 placed downstream of all wet-air cooling coils & supply fan

Part 3/6.7 AIR DISTRIBUTION SYSTEMS:

Part 3/6.7.1 ___ Maintain pressure relationships required in Table 8-1 in all modes of HVAC system operation
___ Spaces that have required pressure relationships are served by fully ducted return systems or fully ducted exhaust systems
___ Recovery rooms are served by fully ducted return or exhaust systems

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

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 filters required by Part 3/6.8.4

Part 3/6.8.2 ___ AII room exhaust systems 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
___ not used from these exhaust airstream sources: soiled or decontamination room, dialyzer reprocessing room

Part 3/7 SPACE VENTILATION:
Part 3/7.1.a ___ Complies with Table 8-1
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 3/7.1.a.4 ___ Entire min. outdoor air changes per hour required by Table 8-1 for each space meet filtration requirements of Section 6.4

Part 3/7.1a.5 ___ Air recirculation through room unit
☐ check if not included in project
___ complies with Table 8-1
___ room unit receive filtered & conditioned outdoor air
___ serve only single space
___ provides min. MERV 8 filter located upstream of any cold surface so that all of air passing over cold surface is filtered

Part 3/7.2 ADDITIONAL ROOM-SPECIFIC REQUIREMENTS:
Part 3/7.2.1 Airborne Infection Isolation (AII) Rooms
☐ check if not included in project
___ AII rooms have permanently installed device and/or mechanism to constantly monitor differential air pressure between room & corridor
___ Local visual means is provided to indicate whenever negative differential pressure is not maintained
___ Air from AII room is exhausted directly to outdoors
___ Exhaust air from AII rooms, associated anterooms & toilet rooms is discharged directly to outdoors without mixing with exhaust air from any other non-AII room or exhaust system
___ 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

2.1-8.3 **ELECTRICAL SYSTEMS**

2.1-8.3.2 **ELECTRICAL DISTRIBUTION & TRANSMISSION**
2.1-8.3.2.2 Panelboards:
(1) ___ all panelboards accessible to health care tenants they serve
(2) ___ panelboard serving critical branch circuits serve floors on which they are located
(3) ___ panelboards serving life safety branch circuits serve floors on which they are located & floors immediately above & below
(4) ___ 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

145.291(C)(1) Lighting on Emergency Power:
___ task lighting
___ exitways exit signs
___ exit directional signs
___ exit doorways, stairways, corridors & lobby
___ generator set location & switchgear location
145.291(C)(2) Equipment on Emergency Power:
___ dialysis distribution systems & related equipment & if provided water treatment system
___ corridor receptacles in patient treatment area
___ telephone equipment, nurses call & intercom systems
___ central batch delivery equipment & related systems if provided
___ HVAC systems
___ fire alarm & extinguishing systems

2.1-8.3.5 **ELECTRICAL EQUIPMENT**
2.1-8.3.5.1 ___ 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**
___ Receptacles in patient care areas are provided according to Table 2.1-1

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

2.10-8.4.1.2 Hemodialysis Water Distribution:

(1)(a) ___ separate treated water distribution system

(2)(b) ___ outlet at each individual dialysis patient care station

___ outlet at hemodialysis equipment repair area

___ outlet at dialysate preparation area

(1)(b) ___ drainage system independent from tap water

(4) ___ liquid waste & disposal system for hemodialysis treatment area are designed to minimize odor & prevent backflow

(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 not more than 25'-0" long

(3)(a) ___ no installation of dead-end piping (except for empty risers

(3)(c) mains & branches for future use)

(3)(b) ___ any existing dead-end piping is removed

☐ check if not included in project

(4)(a) ___ water-heating system supplies water at following range of temperatures: 105–120°F

2.1-8.4.2.6 Drainage Systems:

(1)(a) ___ drainage piping installed above ceiling of or exposed in rooms listed below piping have special provisions (e.g. double wall containment piping) to protect space below from leakage & condensation

- electronic data processing areas
- electrical rooms

(1)(b) ___ drip pan for drainage piping above ceiling of sensitive area

☐ check if not included in project

___ accessible

___ overflow drain with outlet located in normally occupied area that is not open to restricted area

2.1-8.4.3 **PLUMBING FIXTURES**

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

2.1-8.4.3.2 Handwashing Station Sinks:

(1) ___ sinks are designed with basins & faucets that will reduce risk of splashing to areas where direct patient care is provided & medications are prepared

(2) ___ sink basins have nominal size of no less than 144 square inches

___ sink basins have min. dimension 9 inches in width or length

(3) ___ sink basins are made of porcelain, stainless steel or solid-surface materials

(5) ___ water discharge point of faucets is at least 10" above bottom of basin

(7) ___ anchored so that allowable stresses are not exceeded where vertical or horizontal force of 250 lbs. is applied

(8) ___ sinks used by staff, patients, & public have fittings that can be operated without using hands (may be single-lever or wrist blade devices)

(a) ___ blade handles

☐ check if not included in project

___ at least 4 inches in length

___ provide clearance required for operation

(b) ___ sensor-regulated water fixtures

☐ check if not included in project

___ meet user need for temperature & length of time water flows

___ designed to function at all times & during loss of normal power

2.1-8.4.3.5 Clinical sinks:

(1) ___ trimmed with valves that can are operated without hands

(a) (may be single-lever or wrist blade devices)

(b) ___ handles are at least 6 in. long

(2) ___ integral trap wherein upper portion of water trap provides visible seal

2.1-8.5.1 **CALL SYSTEMS**

2.1-8.5.1.1(1) ___ Nurse call stations provided as required in Table 2.1-3

2.1-8.7 **ELEVATORS**

☐ check if not included in project

2.1-8.7.3 Dimensions of Elevators Used for Transport of Outpatients on Gurneys:

___ elevator cars have min. inside floor dimension of 5'-8" wide by 7'-9" deep

2.1-8.7.4 ___ Elevators are equipped with two-way automatic level-maintaining device with accuracy of ± 1/4 inch

2.1-8.7.5 Elevator Controls:

2.1-8.7.5.1 ___ elevator call buttons & controls not activated by heat or smoke

2.1-8.7.5.2 ___ light beams if used for operating door reopening devices without touch are used in combination with door-edge safety devices & are interconnected with system of smoke detectors

2.1-8.7.5.3 ___ elevator controls, alarm buttons & telephones are accessible to wheelchair occupants & usable by the blind