COMPLIANCE CHECKLIST

OP11: 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 2014 Edition of the FGI Guidelines for Design and Construction of Hospitals and Outpatient Facilities. Applicants must verify compliance of the plans submitted to the Department with all referenced requirements from the Licensure Regulations and FGI Guidelines when completing this Checklist. A separate Checklist must be completed for each 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:

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

Instructions:

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

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

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

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

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

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

Facility Name: ________________________________

DoN Project Number: (if applicable) ________________________________

Facility Address: ________________________________

Building/Floor Location: ________________________________

Satellite Name: (if applicable) ________________________________

Satellite Address: (if applicable) ________________________________

Project Description: ________________________________

Submission Dates:

Initial Date: __________
Revision Date: __________

MDPH/DHCFLC 05/15 OP11
<table>
<thead>
<tr>
<th>Architectural Requirements</th>
<th>Building Systems Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>APPLICATION</strong></td>
<td></td>
</tr>
<tr>
<td>145.010(A)</td>
<td>This checklist applies to a chronic dialysis clinic to be licensed separately from a hospital</td>
</tr>
<tr>
<td>145.020</td>
<td></td>
</tr>
<tr>
<td><strong>PATIENT PRIVACY</strong></td>
<td></td>
</tr>
<tr>
<td>3.1-1.2.2</td>
<td>Each facility design ensures appropriate levels of patient acoustic &amp; visual privacy &amp; dignity throughout care process</td>
</tr>
<tr>
<td><strong>SHARED/PURCHASED SERVICES</strong></td>
<td>check if not included in project</td>
</tr>
<tr>
<td>3.1-1.2.3</td>
<td>Details of shared or purchased space and/or services indicated in Project Narrative</td>
</tr>
<tr>
<td></td>
<td>Waiver requests have been submitted for shared or purchased space (except as explicitly allowed below)</td>
</tr>
<tr>
<td><strong>PARKING</strong></td>
<td></td>
</tr>
<tr>
<td>1.3-3.3.1.1</td>
<td>Parking capacity sufficient to satisfy needs of patients, personnel &amp; public</td>
</tr>
<tr>
<td><strong>ENTRANCE</strong></td>
<td></td>
</tr>
<tr>
<td>3.1-1.3.2</td>
<td>At grade level</td>
</tr>
<tr>
<td></td>
<td>Clearly marked</td>
</tr>
<tr>
<td></td>
<td>Located so patients need not go through other activity areas (public lobbies may be shared)</td>
</tr>
<tr>
<td><strong>FACILITY LAYOUT</strong></td>
<td></td>
</tr>
<tr>
<td>3.1-1.4</td>
<td>Precludes unrelated traffic in facility</td>
</tr>
<tr>
<td>145.200</td>
<td>Location of dialysis area separate from other patient care activities</td>
</tr>
<tr>
<td></td>
<td>Location of dialysis area separate from administrative activities</td>
</tr>
<tr>
<td></td>
<td>No access to other patient care activities or administrative activities through dialysis area</td>
</tr>
<tr>
<td><strong>DIAGNOSTIC &amp; TREATMENT AREAS</strong></td>
<td>Examination room</td>
</tr>
<tr>
<td>3.10-3</td>
<td>at least one examination room</td>
</tr>
<tr>
<td>3.10-3.1</td>
<td>min. clear floor area 100 sf</td>
</tr>
<tr>
<td>3.10-3.1.2.1</td>
<td>handwashing station</td>
</tr>
<tr>
<td>3.10-3.1.2.2</td>
<td>accommodations for written or electronic documentation</td>
</tr>
</tbody>
</table>
Architectural Requirements

3.10-3.2  __ Hemodialysis treatment area
           (may be an open area)

3.10-3.2.1.1  __ separate from administrative & waiting areas

3.10-3.2.1.4  __ individual dialysis treatment bays clear of cabinetry

3.10-3.2.2  Space Requirements:

3.10-3.2.2.1  (1) __ individual treatment bays min. clear floor area 80 sf where dialysis chairs are used
               [ ] check if not included in project
               (2) __ individual treatment bays min. clear floor area 90 sf where beds are used
                    [ ] check if not included in project

3.10-3.2.2.2  __ min. clearance 4'-0" between beds and/or dialysis chairs

145.210  __ space between lounge chairs in addition to that necessary for associated equipment must be sufficient to allow access to patient by at least two persons

3.10-3.2.4  Patient Privacy:

3.10-3.2.5  __ Handwashing stations

3.10-3.2.5.2  __ located at entry to dialysis treatment area (may contribute to total number of handwashing stations required)

3.1-3.6.5.1  __ located in each room where hands-on patient care is provided

3.1-3.6.5.3  Handwashing Stations Serving Multiple Patient Care Stations:
               [ ] check if not included in project

(1) __ min. 1 handwashing station for every 4 patient care stations or fewer & for each major fraction thereof

(2) __ evenly distributed & provide uniform distance from two patient care stations farthest from handwashing station

Building Systems Requirements

Ventilation:

3.10-3.2.2.2  __ Min. 6 air changes per hour

Lighting:

3.10-3.2.2.2  __ Connected to emergency power

Power:

3.10-3.2.2.2  __ At least one duplex receptacle on each side of patient lounge chair is connected to emergency power

Table 7.1

145.291(C)(2)
Architectural Requirements

3.10-3.3
___ Home training room
☐ check if not included in project

145.340 (only if home training is offered to patients through contract with another dialysis facility)

3.10-3.3.1
___ private treatment room
___ min. 120 sf

3.10-3.3.3.1
___ counter

3.10-3.3.2.1
___ handwashing station

3.10-3.3.3.2
___ separate drain for fluid disposal

3.10-3.4

SPECIAL PATIENT CARE ROOMS

3.10-3.4.1
___ Airborne infection isolation (AII) room
☐ check if not included in project

3.1-3.4.2.2
___ accommodates only one patient at one time

(1) ___ handwashing station

(2) ___ provision made for personal protective equipment storage at entrance to room

3.1-7.2.3.1(5)
___ monolithic floors & wall bases
___ integral coved base min. 6” high

Ventilation:
___ Min. 12 air changes per hour
___ Exhaust
___ Negative pressure
___ No recirculating room units

___ Exhaust air from All rooms, associated anterooms & toilet rooms discharged directly to outdoors

___ Exhaust grilles or registers in patient room located directly above patient bed on ceiling or on wall near head of bed

___ Space ventilation & pressure relationship requirements of Table 7.1 is maintained in event of loss of normal electrical power

___ Ductwork under negative pressure (except in mechanical room)

___ Discharge in vertical direction at least 10'-0" above roof level

___ Located not less than 10'-0" horizontally from air intakes & operable windows/doors

___ Permanent device monitoring differential air pressure between All room & corridor

Lighting:
___ Connected to emergency power

Power:
___ Min. one duplex receptacle on each side of patient lounge chair is connected to emergency power

145.291(C)(1)
145.291(C)(2)
### Architectural Requirements

3.1-3.4.2.3
- **Anteroom**
  - [ ] check if not included in project
  - (1) space for persons to don personal protective equipment before entering patient room
  - (2) all doors to anteroom self-closing devices or an audible alarm arrangement that can be activated when in use as an isolation room
  - (3)
    - (a) handwashing station
    - (b) storage for unused personal protective equipment
    - (c) disposal/holding container for used protective equipment

3.1-3.4.2.4
- **Architectural Details:**
  - (1)
  - (b) self-closing devices on all room exit doors
  - (c) doors edge seals

### Building Systems Requirements

#### Ventilation:
- Min. 10 air changes per hour
- Min. 6 air changes per hour

#### Exhaust
- Negative pressure to corridor
- No recirculating room units
- All room under negative pressure to anteroom
- Anteroom under negative pressure to corridor

#### Table 7.1

145.220
- **Bloodborne infection isolation room**

3.10-3.4.2.1
- min. clear floor area 120 sf

3.10-3.4.2.2
- **Handwashing station**

3.10-3.4.2.3
- room located for direct observation of patient by staff during treatment

#### Lighting:
- Connected to emergency power

#### Power:
- Min. one duplex receptacle on each side of patient lounge chair is connected to emergency power

#### Table 2.1-2

145.291(C)(1)
- **Nurse station**
  - located in dialysis treatment area
  - designed to provide visual observation of all dialysis treatment bays

#### Lighting:
- Connected to emergency power

#### Support Areas for Renal Dialysis Center

3.10-3.6

#### Nurse station
- located in dialysis treatment area
- designed to provide visual observation of all dialysis treatment bays

#### Medication safety zones

3.1-3.6.1(2)
- medication preparation room/area
  - or
  - self-contained medication dispensing unit

3.10-3.6.2
- centrally located in dialysis center
- located at least 6'-0" from any individual dialysis treatment chair or bed

3.1-3.6.1(2)
- (a) located out of circulation paths to minimize distraction & interruption
- (c) work counters
- (d) task lighting
### Architectural Requirements

**3.1-3.6.6.2**  
(1) medication preparation room/area  
   □ check if not included in project  
   (a) work counter  
   □ handwashing station  
   □ lockable refrigerator  
   □ locked storage for controlled drugs  
   (b) Sharps Containers:  
      □ check if not included in project  
      □ placed at height that allows users to see top of container  
   (c) space to prepare medicines in addition to any self-contained medicine-dispensing unit  
(2) self-contained medication dispensing units  
   □ check if not included in project  
   (a) located at nurse station, in clean workroom or in an alcove lockable unit to secure controlled drugs  
   (b) handwashing station or hand sanitation located next to stationary medication-dispensing units

### Building Systems Requirements

**Ventilation:**  
   □ Min. 4 air changes per hour  
   □ Min. 2 air changes per hour  
   □ Min. 4 air changes per hour  
   □ Ventilation:  
   □ Positive pressure  
   □ Positive pressure  
   □ Ventilation:  
   □ Positive pressure

**Lighting:**  
   □ Connected to emergency power  
   □ Connected to emergency power

**Power:**  
   □ Receptacle for refrigerator is connected to emergency power  
   □ Receptacle for refrigerator is connected to emergency power

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**3.10-3.6.7**  
Nourishment area  
   □ check if not included in project

**3.1-3.6.7**  
(1) handwashing station located in or directly accessible  
   □ check if not included in project  
(2) food preparation sink  
   □ check if not included in project  
   ( only when meals are not prepared in nourishment area)
(3) work counter  
(4) storage  
(5) fixtures & appliances for beverages and/or nourishment

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**3.10-3.6.9**  
Clean workroom or clean supply room

**3.10-3.6.9.1**  
Clean workroom  
   □ used for preparing patient care items  
   □ work counter  
   □ handwashing station  
   □ storage facilities for clean & sterile supplies  
   ( or )  
   □ clean supply room  
   □ used only for storage & holding as part of system for distribution of clean & sterile supplies

**3.10-3.6.9.2**  
Clean supply room  
   □ used only for storage & holding as part of system for distribution of clean & sterile supplies

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**Table 7.1**

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<tr>
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</tr>
<tr>
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</tr>
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<tr>
<td>or</td>
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<td>3.10-3.6.10.2 Soiled holding room</td>
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</tr>
<tr>
<td>(1) Min. floor area 50 sf</td>
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<tr>
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<td>3.10-3.6.11.2 Equipment supply facilities</td>
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</tr>
<tr>
<td>(1) Supply areas or supply carts</td>
<td></td>
</tr>
<tr>
<td>3.10-3.6.11.3 Wheelchair storage space</td>
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</tr>
<tr>
<td>(1) Ratio of no fewer than one wheelchair storage space for 4 patient care stations</td>
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<tr>
<td>3.10-3.6.12 Environmental services room</td>
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</tr>
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<td>3.1-5.5.1.1 Min. one ES room per floor</td>
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<tr>
<td>Exhaust</td>
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</tr>
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<td>Lighting:</td>
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</tr>
<tr>
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<td>145.291(C)(1)</td>
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## Support Areas for Staff

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<thead>
<tr>
<th>Requirement</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.10-3.7.1 Lockers</td>
<td></td>
</tr>
<tr>
<td>3.10-3.7.2 Staff toilet room</td>
<td></td>
</tr>
<tr>
<td>(1) Handwashing station</td>
<td></td>
</tr>
<tr>
<td>3.10-3.7.3 Refrigerator</td>
<td></td>
</tr>
</tbody>
</table>

## Support Areas for Patients

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.10-3.8.1.1 Patient toilet room</td>
<td></td>
</tr>
<tr>
<td>(1) Handwashing station</td>
<td></td>
</tr>
<tr>
<td>(2) Toilet room doors swing outward or equipped with emergency rescue hardware</td>
<td></td>
</tr>
<tr>
<td>Nurse Call System:</td>
<td></td>
</tr>
<tr>
<td>Emergency call station</td>
<td></td>
</tr>
</tbody>
</table>

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Architectural Requirements

3.10-3.8.2  ___ Patient storage space
            ___ storage for patient belongings

3.10-5.1  DIALYSIS SUPPORT FACILITIES

3.10-5.11  ___ Dialyzer reprocessing room
            □ check if not included in project

3.10-5.1.1.1  ___ layout dialyzer reprocessing room
               includes one-way flow of materials from soiled to clean

3.10-5.1.1.2  Equipment:
(1)  ___ refrigeration for temporary storage of dialyzers
(2)  ___ decontamination/cleaning areas
(3)  ___ sinks
(4)  ___ processors
(5)  ___ computer processors & label printers
(6)  ___ packaging area
(7)  ___ dialyzer storage cabinets

3.10-5.1.2  ___ Dialysate preparation area
            □ check if not included in project

3.10-5.1.2.1  ___ accommodates mixing & distribution equipment

3.10-5.1.2.2  (1)  ___ handwashing station
               (2)  ___ storage space
               (3)  ___ work counter for mixing & distribution equipment
               (4)  ___ floor drain
               (5)  ___ treated water outlet

3.10-5.1.3  ___ Equipment repair room

3.10-5.1.3.1  ___ handwashing station

3.10-5.1.3.2  ___ treated water outlet for equipment maintenance
               ___ drain or clinical service sink for equipment connection & testing

3.10-5.1.3.3  ___ work counter

3.10-5.1.3.4  ___ storage cabinet

3.10-5.1.4  ___ eyewash station
            ___ emergency shower

3.1-5.4.1.3  ___ Infectious waste holding room

Building Systems Requirements

Ventilation:
___ Min. 10 air changes per hour      Table 7.1
___ Exhaust
___ Negative pressure

Lighting:
___ Connected to emergency power 145.291(C)(1)

Power:
___ Central batch delivery
    equipment & related systems connected to emergency power 145.291(C)(2)

145.280  ___ Infectious waste holding room

(1)  ___ cleanable floor & wall surfaces
        ___ lighting
        ___ exhaust ventilation
        ___ protected from weather, animals & unauthorized entry

Ventilation:
___ Min. 10 air changes per hour      Table 7.1
___ Negative pressure
___ Exhaust

Lighting:
___ General lighting 145.291(C)(1)
___ Connected to emergency power
### Architectural Requirements

**PUBLIC AREAS**
3.10-6.2
- [x] Waiting room
- [x] Toilet room
  - [ ] handwashing station

3.10-6.2.3
- [x] Provisions for drinking water
3.10-6.2.4
- [x] Access to make local phone calls
3.10-6.2.5
- [x] Seating accommodations for waiting periods

### Building Systems Requirements

- Ventilation:
  - [ ] Min. 10 air changes per hour (Table 7.1)
  - [ ] Exhaust

### Architectural Details & MEP Requirements

#### ARCHITECTURAL DETAILS

<table>
<thead>
<tr>
<th>3.1-7.2.1 Corridor Width:</th>
<th>(b)</th>
<th>Sliding doors</th>
</tr>
</thead>
<tbody>
<tr>
<td>IBC 1018.2</td>
<td>[ ] Check if not included in project</td>
<td></td>
</tr>
<tr>
<td>Min. 44” except in corridors used to transport patients on stretchers</td>
<td>[ ] No floor tracks in patient care areas</td>
<td></td>
</tr>
<tr>
<td>or</td>
<td>[ ] Compliance of corridor width with State Building Code is established in submitted Code Review Sheet</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>421 CMR 6.00 Corridors include turning spaces for wheelchairs</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>3.1-7.2.2 Ceiling Height:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Min. 7'-10” (except in spaces listed below in this section)</td>
</tr>
<tr>
<td>Min. 7'-6” in corridors</td>
</tr>
<tr>
<td>Min. 7'-6” in normally unoccupied spaces</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3.1-7.2.3 Doors &amp; Door Hardware:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Door Type:</td>
</tr>
<tr>
<td>[ ] all doors between corridors, rooms, or spaces subject to occupancy of swing type or sliding doors</td>
</tr>
</tbody>
</table>

(b) [ ] Doors do not swing into corridors except doors in behavioral health units & doors to non-occupiable spaces |

- [ ] Lever hardware |

<table>
<thead>
<tr>
<th>3.1-7.2.8 Handwashing Stations:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(3) [x] Anchored to support vertical or horizontal force of 250 lbs.</td>
</tr>
<tr>
<td>(4) [x] Countertop-Mounted Sinks:</td>
</tr>
<tr>
<td>(a) Countertops made of porcelain, stainless steel, or solid surface materials</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>421 CMR 26.00 Door Opening:</th>
</tr>
</thead>
<tbody>
<tr>
<td>[x] Door to room used by patients</td>
</tr>
<tr>
<td>Min. clear width 32”</td>
</tr>
</tbody>
</table>

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</tr>
</tbody>
</table>
(b) plastic laminate countertops
   □ check if not included in project
   at minimum substrate
   marine-grade plywood with
   impervious seal

(5) no storage casework beneath
    sink

(6) provisions for drying hands at
    all handwashing stations
    except hand scrub facilities

(a) hand-drying device does
    not require hand contact

(b) hand-drying provisions
    enclosed to protect
    against dust or soil

(7) liquid or foam soap dispensers

3.1-7.2.2.9 Grab Bars:
(2) anchored for concentrated load of
    250 lbs.

(3) bariatric design
    □ check if not included in project
    length of rear wall grab bars 44”

3.1-7.2.3 SURFACES

3.1-7.2.3.1 Flooring & Wall Bases:
(1) Selected flooring surfaces cleanable
    & wear-resistant for location

(2) Smooth transitions between
    different flooring materials

(3) Flooring surfaces, including those
    on stairways, stable, firm & slip-
    resistant
    Carpet provides stable & firm surface

(4) Floors & wall bases materials in all
    areas subject to frequent wet
    cleaning are not affected by
    germicidal cleaning solutions

3.1-7.2.3.2 Walls & Wall Protection:
(1) Wall finishes washable

(a) Wall finishes in vicinity of plumbing
    fixtures smooth, scrubbable &
    water-resistant

(b) Wall surfaces in areas routinely
    subjected to wet spray or splatter are
    monolithic or have sealed seams

(2) No sharp protruding corners

(5) Corner guards durable & scrubbable

3.1-8.2 HVAC SYSTEMS

4/6.3.1 Outdoor Air Intakes:
□ Located min. 25 feet from cooling
  towers & all exhaust & vent discharges

□ Bottom of air intake is at least 6'-0”
  above grade

Roof Mounted Air Intakes:
□ check if not included in project
  bottom min. 3'-0” above roof level

4/6.4 Filtration:
□ Filter banks conform to Table 6.4

4/6.7 Air Distribution Systems:
□ Ducted return or exhaust systems in
  spaces listed in Table 7.1 with
  required pressure relationships

4/7 Space Ventilation:
□ Spaces ventilated per Table 7.1

□ Air movement from clean areas to
  less clean areas

□ Min. number of total air changes
  indicated either supplied for positive
  pressure rooms or exhausted for
  negative pressure rooms

□ Recirculating room HVAC units
  □ check if not included in project
  □ each unit serves only single
  space
  □ min. MERV 6 filter for airflow
  downstream of cooling coils

3.1-8.2.1.1(5) Acoustical Considerations:
□ Equipment location or acoustic
  provisions limit noise associated with
  outdoor mechanical equipment to
  65 dBA at building façade

3.1-8.2.1.2 Ventilation & Space-Conditioning:
(1) All rooms & areas used for patient
    care have provisions for ventilation

(2) Natural ventilation only allowed for
    non sensitive areas via operable
    windows

□ Mechanical ventilation provided for
  all rooms & areas in facility in
  accordance with Table 7.1 of Part 4

3.1-8.3 ELECTRICAL SYSTEMS

3.1-8.3.2 ELECTRICAL DISTRIBUTION &
    TRANSMISSION

3.1-8.3.2.1 Switchboards Locations:
(1) located in areas separate from
    piping & plumbing equipment
not located in rooms they support
accessible to authorized persons only
easily accessible
located in dry, ventilated space free of corrosive gases or flammable material
Emergency electrical service conforms with NFPA 70, NFPA 99, NFPA 101, NFPA 110 & NFPA 111
Emergency electrical service conforms with NFPA 70, NFPA 99, NFPA 101, NFPA 110 & NFPA 111
Portable or fixed examination light in exam rooms & treatment rooms
Receptacles in patient care areas conform to Table 3.1-1
Hemodialysis/Hemoperfusion Water Distribution:
Separate treated water distribution system
check if not included in project (only if dialysis equipment used includes water treatment)
treated water outlet for each individual hemodialysis treatment bay, hemodialysis equipment repair area & dialysate preparation area
Drainage system independent from tap water
Liquid waste system for hemodialysis treatment area designed to minimize odor & prevent backflow
All hemodialysis distribution piping readily accessible for inspection & maintenance
Heated Potable Water Distribution Systems:
Systems serving patient care areas are under constant recirculation
Non-recirculated fixture branch piping does not exceed 25'-0" in length
No dead-end piping
Water-heating system has supply capacity at minimum temperatures & amounts indicated in Table 2.1-3
(5) Handwashing stations supplied as required above or
(5) Handwashing stations supplied at constant temperature between 70°F & 80°F using single-pipe supply
Materials material used for plumbing fixtures non-absorptive & acid resistant
Basins reduce risk of splashing to areas where direct patient care is provided, sterile procedures are performed & medications are prepared
Basin min. 144 square inches
Min. dimension 9 inches
Made of porcelain, stainless steel, or solid-surface materials
Water discharge point of faucets at least 10 inches above bottom of basin
Anchoring for sinks withstands min. vertical or horizontal force of 250 lbs
Fittings operated without using hands for sinks used by staff, patients & public
blade handles or single lever min. 4 inches long provide clearance required for operation or
sensor-regulated water fixtures meet user need for temperature & length of time water flows designed to function at all times & during loss of normal power
Trimmed with valves that can be operated without hands
Handles min. 6 inches long
Integral trap wherein upper portion of water trap provides visible seal
Outpatient facility located on more than one floor or on floor other than an entrance floor at grade level at least one elevator or
Outpatient facility located on entrance floor at grade level