COMPLIANCE CHECKLIST

IP30: Rehabilitation Hospital

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 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:

- 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: ____________________________

Facility Address: ____________________________

Satellite Name: (if applicable) ____________________________

Satellite Address: (if applicable) ____________________________

Project Description: ____________________________

DoN Project Number: (if applicable) ____________________________

Nursing Unit Bed Complements: ____________________________

Current = ____________________________ Proposed = ____________________________

Building/Floor Location: ____________________________

Submission Dates: ____________________________

Initial Date: ____________________________

Revision Date: ____________________________
### Architectural Requirements

**Building Systems Requirements**

#### REHABILITATION HOSPITALS

<table>
<thead>
<tr>
<th>2.6-1.3.2</th>
<th>PARKING</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>2.6-1.3.2.2</strong></td>
<td></td>
</tr>
<tr>
<td>(1)</td>
<td>____ 1 space per 4 patient beds plus 1 space for each employee normally present on any single weekday shift</td>
</tr>
<tr>
<td>(2)</td>
<td>____ separate &amp; additional space for service delivery vehicles &amp; vehicles used for patient transfer</td>
</tr>
<tr>
<td>(3)</td>
<td>____ Additional parking to accommodate outpatient &amp; other service volumes on-site</td>
</tr>
</tbody>
</table>

#### NURSING UNIT - PATIENT ROOMS

**Capacity:**

- New Patient Room:
  - [ ] check if not included in project
  - 1 bed per room

- Existing Patient Room:
  - [ ] check if not included in project
  - maximum room capacity no more than present capacity, with maximum of 4 patients in each room

- (3) at least 2 single-bed rooms with private toilet rooms in each nursing unit

**Space Requirements:**

- single-bed rooms
  - [ ] check if not included in project

- (1) ____ min. clear floor area 140 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
  - ____ multiple bed rooms
  - [ ] check if not included in project

- (1) ____ min. clear floor area 125 sf per bed

- (2)(b) ____ min. 4'-0" clearance at foot of each bed for passage of beds & equipment

**Ventilation*:**

- Min. 4 air changes/hour

**Power*:**

- Min. 12 receptacles

- Min. 2 receptacles at each side of the head of the bed

- ____ Min. 2 receptacles on all other walls (may be omitted on exterior wall)

**Nurse Call System*:**

- Patient station

- Emergency staff assistance station

---

*Common requirements for all patient rooms

**Bed Size for Determining Clearances:**

- [ ] 40" wide by 96" long

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**Glossary**

- Bed Size for Determining Clearances:
  - 40" wide by 96" long

- Specifications of beds to be installed are attached to checklist
### Architectural Requirements

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.6-2.2.4.4</td>
<td>Patient Privacy:</td>
</tr>
<tr>
<td>2.1-2.2.4.1</td>
<td>Means to provide visual privacy from observation by other patients &amp; visitors available for each patient</td>
</tr>
<tr>
<td>2.1-2.2.4.2</td>
<td>Design for privacy does not restrict patient access to entrance, handw. station, or toilet</td>
</tr>
<tr>
<td>2.6-2.2.2.5</td>
<td>Handwashing station in patient room</td>
</tr>
<tr>
<td>2.1-2.2.5.1</td>
<td>Provided in patient room in addition to that in toilet room</td>
</tr>
<tr>
<td>(1)</td>
<td>adjacent* to entrance to patient room for use by health care personnel &amp; others</td>
</tr>
<tr>
<td>Multi-Patient Rooms:</td>
<td>check if not included in project</td>
</tr>
<tr>
<td>(2)</td>
<td>Handwashing station located outside patients' cubicle curtains</td>
</tr>
<tr>
<td>2.6-2.2.6.2</td>
<td>Patient toilet room</td>
</tr>
<tr>
<td>2.1-2.2.6.3</td>
<td>Serves no more than one patient room</td>
</tr>
<tr>
<td>(1)</td>
<td>toilet</td>
</tr>
<tr>
<td>(2)</td>
<td>Handwashing station</td>
</tr>
<tr>
<td>(3)</td>
<td>Bedpan washer</td>
</tr>
<tr>
<td>2.6-2.2.2.7</td>
<td>Patient bathing facilities</td>
</tr>
<tr>
<td>(1)</td>
<td>Access to bathing facilities in toilet room directly accessed from each patient room or in central bathing facility</td>
</tr>
<tr>
<td>(2)</td>
<td>Central bathing facilities</td>
</tr>
<tr>
<td>(a)</td>
<td>Each tub or shower in an individual room or privacy enclosure that provides space for bathing, drying/ dressing &amp; wheelchair &amp; assistant</td>
</tr>
</tbody>
</table>

### Building Systems Requirements

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.6-2.2.2.6</td>
<td>Wheelchair access</td>
</tr>
<tr>
<td>(2)</td>
<td>Portable mechanical lifting equipment is used</td>
</tr>
<tr>
<td>(3)</td>
<td>Check if not included in project</td>
</tr>
<tr>
<td></td>
<td>Each entry door into patient toilet room door opening wide enough to allow health care providers to transfer patients to toilet using portable mechanical lifting equip</td>
</tr>
<tr>
<td></td>
<td>Thresholds designed to facilitate use &amp; prevent tipping of wheelchairs &amp; other portable wheeled equip by patients &amp; staff</td>
</tr>
</tbody>
</table>

**Ventilation:**

- Min. 10 air changes per hour
- Exhaust
- Table 7.1
- Negative pressure
Architectural Requirements | Building Systems Requirements
--- | ---
(b) showers in central bathing facilities at least 4'-0" square, curb-free & designed for use by wheelchair patients | ( )
(c) toilet room that does not require travel through general corridor accessible to each central bathing area | ( )
(3) mobile lifts, shower gurney devices, wheelchairs & other portable wheeled equipment are used | ( )
(a) check if not included in project
(b) do not require travel through general corridor accessible to each central bathing area
(c) handwashing station for each toilet
(3) mobile lifts, shower gurney devices, wheelchairs & other portable wheeled equipment are used | ( )
check if not included in project

2.6-2.2.2.8 patient storage
(1) wardrobe, closet, or locker for each patient
(2) min. dimensions 1'-10" x 1'-8"
(2) adjustable clothes rod & adjustable shelf

2.6-2.2.4.2 NURSING UNIT - AIRBORNE INFECTION ISOLATION (AII) ROOM
(check if not included in project

2.1-2.4.2.2
(1) single-bed room
(2) provision made for personal protective equipment storage at entrance to room
(3) handwashing station in each patient room
(4) separate room with toilet, handwashing station & bathtub or shower

2.1-2.4.2.3 Anteroom:
(check if not included in project

(1) for persons to don personal protective equipment before entering patient room
(2) all doors to anteroom have self-closing devices

2.1-2.4.2.4(1)
(b) self-closing devices on all room exit doors
(c) doors has edge seals

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

Ventilation:
Min. 10 air changes per hour
Exhaust

Ventilation:
Min. 10 air changes per hour
Exhaust
Negative pressure to corridor
No recirculating room units
**Architectural Requirements**

2.6-2.2.6

**NURSING UNIT - SUPPORT AREAS**

2.6-2.2.5.3(2) (at least one such support area on each nursing floor, may serve more than one nursing unit)

2.1-2.6.1

___ Administrative center or nurse station

2.1-2.6.1.1

(1) ___ space for counters

(2) ___ at least one handwashing station located in, next to, or directly accessible*

2.1-2.6.2

___ Documentation area

2.1-2.6.2.1 ___ work surface to support documentation process for number of staff who will use it at same time

2.1-2.6.3

___ Nurse or supervisor office

2.1-2.6.6

___ Medication safety zones

2.1-2.6.6.1 ___ medication preparation room

or

___ self-contained medication dispensing unit

(a) ___ located out of circulation paths to minimize distraction & interruption

(c) ___ work counter

(d) ___ task lighting

(e) ___ meet acoustic design criteria per 1.2-5.1

2.1-2.6.6.2

___ medication preparation room

(1) __ check if not included in project

(a) ___ under visual control of nursing staff

(b) ___ work counter

(c) ___ handwashing station

(d) ___ lockable refrigerator

(e) ___ lockable storage for controlled drugs

Sharps Containers:

__ check if not included in project

___ sharps containers placed at height that allows users to see top of container

(d) ___ space to prepare medicines in addition to any self-contained medicine-dispensing unit

(e) ___ sterile preparations compounding

__ check if not included in project

___ room design complies with USP 797

2.1-2.6.6.3

(2) __ self-contained medication dispensing units

__ check if not included in project

(a) ___ located at nurse station, in clean workroom, in an alcove, or inpatient room

___ lockable unit to secure controlled drugs

**Building Systems Requirements**

Ventilation:

___ Min. 4 air changes per hour Table 7.1

Nurse Call System:

___ Duty station Table 2.1-2
Architectural Requirements

(b) handwashing station located next to stationary medication-dispensing units

Mobile Medication-Dispensing Carts:
☐ check if not included in project:

space in patient rooms to accommodate cart

Building Systems Requirements

2.6-2.2.6.7 __ Nourishment area or room

2.1-2.6.7.2
(1) handwashing station
(2) work counter
(3) refrigerator
(4) microwave
(5) storage cabinets
(6) space for temporary storage of unused & soiled food service implements

2.1-2.6.7.3 __ provisions & space for separate temporary storage of unused & soiled meal trays not picked up at mealtime

Ventilation:

2.6-2.26.8 __ Ice-making equipment

2.1-2.6.8.1 located in an enclosed space

(1) self-dispensing ice-making equipment
(2) check if not located in public area

2.6-2.2.6.9 __ Clean workroom or clean supply room

2.1-2.6.9.1 clean workroom used for preparing patient care items
(1) work counter
(2) handwashing station
(3) storage facilities for clean & sterile supplies

or

2.1-2.6.9.2 clean supply room used only for storage & holding as part of system for distribution of clean & sterile supplies

Ventilation:

2.6-2.2.6.10 __ Soiled workroom or soiled holding room

2.1-2.6.10.1 soiled workroom
(1) handwashing station
(2) flushing-rim clinical service sink with bedpan washer
(3) work counter
(4) space for separate covered containers

or

Ventilation:

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<table>
<thead>
<tr>
<th>Architectural Requirements</th>
<th>Building Systems Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1-2.6.10.2</td>
<td></td>
</tr>
<tr>
<td>(1) ___ soiled holding room</td>
<td>Ventilation:</td>
</tr>
<tr>
<td>(a) ___ handwashing station</td>
<td>___ Min. 10 air changes per</td>
</tr>
<tr>
<td>___ handwashing station or</td>
<td>hour</td>
</tr>
<tr>
<td>hand sanitation station</td>
<td>___ Exhaust</td>
</tr>
<tr>
<td>(b) ___ space for separate</td>
<td>___ Negative pressure</td>
</tr>
<tr>
<td>covered containers</td>
<td></td>
</tr>
<tr>
<td>(3) ___ toilet with bedpan</td>
<td></td>
</tr>
<tr>
<td>___ toilet with bedpan washer</td>
<td></td>
</tr>
<tr>
<td>located in each inpatient</td>
<td></td>
</tr>
<tr>
<td>toilet room</td>
<td></td>
</tr>
</tbody>
</table>

2.6-2.6.11
(1) ___ Clean linen storage
(2) ___ Equipment storage room for equipment
___ such as iv stands, inhalators, air mattresses
___ & walkers
(3) ___ Storage space for stretchers & wheelchairs
(4) ___ Storage for administrative supplies
(5) ___ Power outlets for charging equipment

2.6-2.6.12
___ Environmental services room

2.1-2.6.12.1
(1) ___ serves one or more than one nursing
___ unit on a floor
(2) ___ readily accessible* to unit it serves

2.1-2.6.12.2
(1) ___ service sink or floor-mounted mop sink
(2) ___ provisions for storage of supplies &
___ housekeeping equipment
(3) ___ handwashing station or hand sanitation
___ station

2.6-2.6.13
___ Examination room
___ check if not included in project
___ (only if all patient rooms in nursing unit are
___ single bed rooms or if exam room in evaluation
___ unit is readily accessible* to nursing unit)

2.1-3.2.2.1
Space Requirements:
(1) ___ min. clear floor area of 120 sf with min.
___ clear dimension of 10'-0"
(2) ___ room size permits min. clearance of 3'-0" ___ Nurse Call System:
___ at each side & at foot of exam table
___ emergency staff assistance station
___ room arrangement permits placement
___ of exam table, recliner, or chair at an
___ angle, closer to one wall than another,
___ or against wall to accommodate type of
___ patient being served

2.1-3.2.2.2
Room Features:
(1) ___ examination light
(2) ___ storage for supplies
(3) ___ accommodations for written or
___ electronic documentation
(4) ___ space for visitor’s chair
(5) ___ handwashing station

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**Architectural Requirements**

**2.6-2.7** **SUPPORT AREAS FOR STAFF**

2.1-2.7.1 **Staff lounge**
- **min.** 100 sf

2.1-2.7.2 **Staff toilet room**
- **readily accessible** to each nursing unit

2.1-2.7.3 **Staff storage facilities**
- Securable closets or cabinet compartments for personal articles of staff located in or near nurse station

**2.6-2.3** **PATIENT LIVING AREAS**

2.6-2.3.1 **Dining, recreation & day spaces**
- Daylight from exterior wall reach each dining, recreation & day space

2.6-2.3.1.2 **Space Requirements**
- Inpatient living spaces min. 55 sf per bed
- **Outpatient Day Treatment Program:**
  - Check if not included in project:
    - Dining is part of day treatment program
      - Min. 55 sf per person
    - Or
      - Dining is not part of program
      - Min. 35 sf per person for recreation & day spaces

2.6-2.3.1.3 **Handwashing station in each dining room**

2.6-2.3.1.4 **Storage spaces for recreational equipment & supplies**

2.6-2.32.1 **Activities of daily living unit (ADL)**
- **bedroom**
- **bathroom** in addition to other toilet & bathing requirements
- **kitchen**
- **Space for training stairs**
- Functional equipment & facilities similar to those in residential environment

**Building Systems Requirements**

Nurse Call System:
- **Duty station**

**Table 2.1-2**

Ventilation:
- **Min. 10 air changes per hour**
- **Exhaust**

**Table 7.1**
2.6-2.33  
___ Personal services (barber/beauty) room 
(may be combined with ADL room) 
___ appropriate fixtures & utilities for patient grooming

2.6-3.1  
MEDICAL EVALUATION UNIT
2.6-3.11  
___ Examination room
2.6-3.11.1  
Space Requirements:  
___ min. clear floor area 140 sf
___ min. room dimension 10'-0"

Ventilation:
___ Min. 6 air changes per hour  
Table 7.1

Nurse Call System:
___ Emergency staff assistance  
Table 2.1-2
(1)  
___ handwashing station
(2)  
___ work counter
(3)  
___ storage facilities
(4)  
___ accommodation for written or electronic documentation

2.6-3.12  
___ Evaluation room  
(may be combined with examination room in small rehabilitation facility)
2.6-3.12.1  
___ desk & work area for evaluators
___ writing & work space for patients
___ storage for supplies

2.6-3.1.6  
___ Offices for personnel

2.6-3.2.1  
PSYCHOLOGICAL SERVICES UNIT
___ Office & work space for testing, evaluation & counseling

2.6-3.2.2  
SOCIAL SERVICES UNIT
___ Office space for private interviewing & counseling

2.6-3.2.3  
VOCATIONAL SERVICES UNIT
___ Office & work space for vocational training, counseling & placement

2.6-5  
GENERAL SUPPORT FACILITIES
___ Compliance Checklist IP28 is attached

2.6-6  
PUBLIC & ADMINISTRATIVE AREAS
___ Compliance Checklist IP29 is attached
2.1-7.2.2 ARCHITECTURAL DETAILS

2.1-7.2.2.1 CORRIDOR WIDTH:

- NFPA 101
  - Aisles, corridors & ramps required for exit access in a hospital not less than 8'-0" in clear & unobstructed width
  - Code Review Sheet establishing compliance with NFPA 101 has been submitted

- Aisles, corridors & ramps in adjunct areas not intended for the housing, treatment, or use of inpatients not less than 44" in clear width

2.1-7.2.2.2 CEILING HEIGHT:

- Min. ceiling height 7'-6" in corridors & normally unoccupied spaces
- Min. height 7'-6" above floor of suspended tracks, rails & pipes located in traffic path for patients in beds and/or on stretchers
- Min. ceiling height 7'-10" in other areas

2.1-7.2.2.3 DOORS & DOOR HARDWARE:

- Doors between corridors, rooms, or spaces subject to occupancy swing type or sliding doors
- (a) Sliding doors
  - check if not included in project
  - manual or automatic sliding doors comply with NFPA 101
  - code review sheet attached
  - no floor tracks
- (b) Min. 45.5" clear door width for patient rooms & diagnostic/treatment areas
- Min. 83.5" clear door height for patient rooms & diagnostic/treatment areas
- (b) Swinging doors for personnel use in addition to sliding doors
  - check if not included in project
  - min. clear width 34.5"
- (3) Doors do not swing into corridors (except doors to non-occupiable spaces & doors with emergency breakaway hardware)
- (a) Lever hardware

2.1-7.2.2.5 WINDOWS IN PATIENT ROOMS:

- Natural light by means of window to outside
- Min. net glazed area no less than 8% of floor area of room served
- Operable windows
  - check if not included in project
  - operation limited with either stop limit/restrictor hardware or open guard/screen
- Insect screens

2.1-7.2.2.6 GLAZING MATERIALS:

- Safety glass-tempered or plastic glazing materials used for shower doors & bath enclosures
  - check if not included in project
- Glazing within 18" of floor
  - check if not included in project
  - safety glass, wire glass or plastic break-resistant material

2.1-7.2.2.8 HANDWASHING STATIONS:

- Handw. stations in patient care areas located to be visible & unobstructed
- Anchoring suitable for vertical or horizontal force of 250 lbs.
- Handwashing Station Countertops:
  - check if not included in project
  - porcelain, stainless steel or solid surface materials
  - plastic laminate countertops
  - check if not included in project
  - substrate marine-grade plywood (or equivalent) with impervious seal
- Designed to prevent storage beneath sink
Compliance Checklist: Rehabilitation Hospital

2.1-7.2.2.9 Provisions for drying hands
(a) Hand-drying device does not require hands to contact dispenser directly accessible* to sinks
(b) Liquid or foam soap dispensers

2.1-7.2.2.10 Grab bars anchored to sustain concentrated load of 250 lbs.

2.1-7.2.2.12 Grab bars anchored to sustain concentrated load of 250 lbs.

2.1-7.2.3.1 Flooring & wall bases:
(a) Selected flooring surfaces cleanable & wear-resistant for location
(b) Smooth transitions between different flooring materials
(c) Flooring surfaces, including those on stairways, stable, firm & slip-resistant
(d) Carpet check if not included in project provides stable & firm surface
(e) Floors & wall bases of soiled workrooms, toilet rooms & other wet cleaned areas are not physically affected by cleaning solutions

2.1-7.2.3.2 Walls & wall protection:
(a) Washable wall finishes
(b) Wall finishes near plumbing fixtures smooth, scrubbable & water-resistant
(c) Monolithic wall surfaces in areas routinely subjected to wet spray or splatter

2.1-7.2.3.3 Ceilings:
(a) Ceilings in areas occupied by patients, & in clean rooms & soiled rooms:
   - Cleanable with routine housekeeping equipment
   - Acoustic & lay-in ceilings check if not included in project do not create ledges or crevices

2.6-7.2.3.2 Acoustic ceilings for corridors in patient areas, nurse stations, day rooms, recreational rooms, dining areas & waiting areas

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

2.6-7.2.3.3(2) Acoustic ceilings for corridors in patient areas, nurse stations, day rooms, recreational rooms, dining areas & waiting areas

2.1-8.2 Heating, ventilation, & air-conditioning (HVAC) systems

4/6.3.1 Outdoor air intakes:
(a) Located min. 25 feet from cooling towers & all exhaust & vent discharges
(b) Bottom of air intake is at least 6'-0" above grade

4/6.3.1.2 Roof mounted air intakes:
   - check if not included in project
     - Bottom min. 3'-0" above roof level

4/6.3.2 Exhaust discharges for infectious exhaust air:
(a) Ductwork under negative pressure (except in mechanical room)
(b) Discharge in vertical direction at least 10'-0" above roof level
(c) Located not less than 10'-0" horizontally from air intakes & operable windows/doors

4/6.4 Filtration:
(a) Filter banks conform to Table 6.4

4/6.4.1 Filter bank #1 placed upstream of heating & cooling coils

4/6.4.2 Filter bank No. 2 installed downstream of cooling coils & supply fan

4/6.5 Heating & Cooling Systems:
(a) No radiators or convectors in special care areas

4/6.6 Heating & Cooling Systems:
(a) Ducted return or exhaust systems in spaces listed in Table 7.1 with required pressure relationships
(b) Ducted return or exhaust systems in inpatient care areas

4/6.7 Smoke & Fire barriers:
(a) HVAC zones coordinated with compartmentation to minimize ductwork penetrations of fire & smoke barriers

4/6.8 Energy Recovery Systems:
(a) Exhaust systems serving potentially contaminated rooms are not used for energy recovery

4/6.8.2 Energy Recovery Systems:
(a) Exhaust systems serving potentially contaminated rooms are not used for energy recovery
4/6.9 Duct Lining:
  - No duct lining in ductwork located downstream of Filter Bank #2

4/7. Space Ventilation:
4/7.1
  - 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

2.1-8.2.1.1 Acoustic Considerations:
(5) Equipment location or acoustic provisions limit noise associated with outdoor mechanical equipment to 65 dBA at building façade

2.1-8.2.1.2 Ventilation & Space-Conditioning:
(1) All rooms & areas used for patient care have provisions for ventilation
(2) Natural ventilation only provided in non-sensitive areas & patient rooms via operable windows check if not included in project

2.1-8.3 ELECTRICAL SYSTEMS

2.1-8.3.2 ELECTRICAL DISTRIBUTION & TRANSMISSION
2.1-8.3.2.1 Switchboards Locations:
(1)
(a) Located in areas separate from piping & plumbing equipment
(b) Not located in rooms they support
(c) Accessible to authorized persons only
(d) Located in dry, ventilated space free of corrosive gases or flammable material

2.1-8.3.2.2 Panelboards:
(1) Panelboards serving life safety branch emergency circuits only serve same floor, floor above & floor below
(2) Panelboards serving critical branch emerg. circuits only serve same floor
(3) New panelboards not located in exit enclosures

2.1-8.3.3.1 EMERGENCY ELECTRICAL SERVICE
(1) Emergency power per NFPA 99, NFPA 101 & NFPA 110

2.1-8.3.4 LIGHTING
2.1-8.3.4.2 Light fixtures in wet areas have smooth, cleanable, shatter-resistant lenses & no exposed lamps

2.1-8.3.4.3 Patient Rooms:
(1) General lighting
  - reading light for each patient controls accessible to patient in bed
  - light source covered by diffuser or lens
  - flexible light arms

(b) Night lighting
  - switch in patient room lights path from room entrance to bed
  - lights path from bed to toilet

2.1-8.3.5 NIGHT LIGHTING

2.1-8.3.5.2 ELECTRICAL EQUIPMENT

2.1-8.3.6 LIGHTING RECEPTACLES
2.1-8.3.6.1 Receptacles in Corridors:
(1) Duplex grounded receptacles installed approx. 50'-0" apart
duplex grounded receptacles installed approx. within 25'-0" of corridor ends

2.1-8.3.6.2 Receptacles in Patient Care Areas:
  - receptacles provided according to Table 2.1-1

2.1-8.3.6.3 Emergency System Receptacles:
  - distinctively colored or marked for identification

2.1-8.3.7 CALL SYSTEMS
  - Nurse call equipment legend includes patient stations, bath stations, staff emergency stations & code call stations
2.1-8.3.7.1 Nurse call system locations provided as required in Table 2.1-2
(1) Nurse call systems report to attended location with electronically supervised visual & audible signals
(2) Call systems meet requirements of UL 1069 Standard for Hospital Signaling & Nurse Call Equipment
(4) Wireless system check if not included in project
(5) meet requirements of UL 1069

2.1-8.3.7.2 Patient Call Stations:
(1) each patient sleeping bed provided with patient call station equipped for two-way voice communication
(2)
(a) visible signal once call station has been activated
(b) reset switch for canceling call
(3)
(a) visible signal in corridor at patient room door
 additional visible signals installed at corridor intersections
(b) visible & audible signal at nurse call duty stations in clean workroom, soiled workroom, medication preparation room, documentation area or other charting facilities, nourishment area, nurse master station of nursing unit or patient care area
(4) call stations in diagnostic & treatment areas per Table 2.1-2

2.1-8.3.7.3 Bath Stations:
(1) alarm turned off only at bath station where it was initiated
(2) located 5'-0" to 6'-0" above floor in shower stalls & tubs, within normal view of user
 within reach of staff without need to step into shower or tub
(3) located to side of toilets within 12" of front of toilet bowl & 3'-0" to 4'-0" above floor accessible to both toilet & shower

2.1-8.3.7.4 Staff emergency stations for summoning local staff assistance for non-life-threatening situations at each patient care location

2.1-8.3.7.5 Code call station equipped with continuous audible or visual signal at point of origin
 check if not included in project

2.1-8.4.2 PLUMBING & OTHER PIPING SYSTEMS
2.1-8.4.2.5 Heated Potable Water Distribution Systems:
(2) systems serving patient care areas are under constant recirculation
 non-recirculated fixture branch piping does not exceed 25'-0" in length
(3) no dead-end piping
(4) water-heating system has supply capacity at minimum temperatures & amounts indicated in Table 2.1-3
(5) handwashing stations supplied as required above
 or
 handwashing stations supplied at constant temperature between 70°F & 80°F using single-pipe supply

2.1-8.4.2.6 Drainage Systems:
(1) drainage piping above ceiling of, or exposed in electric closets
 special provisions to protect space below from leakage & condensation

2.1-8.4.3 PLUMBING FIXTURES
2.1-8.4.3.1 Materials material used for plumbing fixtures non-absorptive & acid resistant
2.1-8.4.3.2 Handwashing Station Sinks:
(1) 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 medical & nursing staff, patients & public
(a) blade handles or single lever
   □ min. 4 inches long
   □ provide clearance
   □ required for operation

or
(b) 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

2.1-8.4.3.3 Showers & Tubs:
□ check if not included in project
(1) □ nonslip walking surfaces

2.1-8.4.3.4 Ice-Making Equipment:
□ copper tubing provided for
□ supply connections

2.1-8.4.3.5 Clinical Sinks:
□ check if not included in project
(1) □ trimmed with valves that can
   □ be operated without hands
(2) □ handles min. 6 inches long
□ integral trap wherein upper
□ portion of water trap provides
□ visible seal

2.1-8.4.3.7 Bedpan Washers:
(1) □ bedpan washer provided in
   □ each inpatient toilet room

2.1-8.6.2 ELECTRONIC SURVEILLANCE SYSTEMS
□ check if not included in project
2.1-8.6.2.1 □ Devices in patient areas mounted in
□ unobtrusive & tamper-resistant
□ enclosures
2.1-8.6.2.2 □ Monitoring devices not readily
□ observable by general public or
□ patients
2.1-8.6.2.3 □ Receive power from emergency
□ electrical system