

## CHAPTER 315: SPECIALTY MEDICAL CLINICS

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## 1 PURPOSE AND SCOPE

This chapter outlines space planning criteria for services and programs provided in the outpatient Specialty Medical Clinics. Outpatient clinics include both freestanding community-based facilities, as well as ambulatory clinics in or directly adjacent to hospital-based services. More specifically, the Specialty Medical Clinics chapter covers the departments of Dermatology, Endocrine, Gastroenterology, Hematology / Oncology, Infectious Disease, Internal Medicine, Nephrology, Neurology, and Rheumatology. Space planning criteria described in this chapter applies to each of the above clinic types generally. Any specialty room types that apply to limited clinical specialties are also noted.

The functional areas within this chapter that pertain to the Endoscopy Suite can be utilized by the planner to design this suite either in the inpatient or outpatient setting. It is imperative that the planner determine if the Endoscopy Suite with its procedure rooms will be co-located with the Surgery Department's operating rooms. This would allow for future flexibility and provide efficient use of staffing, equipment and space. The suite must be located in one place only, and the planner will coordinate with Surgery and the Gastroenterology Service. Gastroenterology Clinic Exam rooms are provided in this chapter in the space criteria functional area called Specialty Medical Clinics Patient Area.

The functional areas within this chapter that pertain to the Renal Dialysis Unit (also known as Hemodialysis Unit) can be utilized by the planner to design a Renal Dialysis Unit that will serve both inpatients and outpatients, depending on the facility type. The planner must coordinate with the Renal Dialysis / Nephrology Service. Nephrology Clinic exam rooms are provided in this chapter in the space criteria functional area called Specialty Medical Clinics Patient Area.

The functional areas within this chapter that pertain to the Hematology/Oncology Infusion Clinic provide space criteria for cancer patients receiving chemotherapy treatments as well as other intravenous treatments as an outpatient. It also includes space criteria for a decentralized Hematology/Oncology pharmacy. The Hematology/Oncology Clinic exam rooms are provided in this chapter in the space criteria functional area called Specialty Medical Clinics Patient Area.

This space planning criteria applies to all Military Medical Treatment Facilities (MTFs). Policies and directives, DoD's Subject Matter Experts (SMEs), established and/or anticipated best practice guidelines / standards, and TRICARE Management Activity (TMA) provides the foundation for the workload based space criteria and Net Square Footages (NSF) for each space. The latest version of DoD's *UFC-4-510-01, Appendix B* cites all Room Codes identified in this chapter.

## 2 DEFINITIONS

- A. Automated External Defibrillator (AED): An AED or automated external defibrillator is a computerized medical device which can check a person's heart rhythm. It can recognize a rhythm that requires a shock, and it can advise the rescuer when a shock is needed. AEDs are typically placed in targeted public areas such as outpatient clinics, doctor's offices, office complexes, sports arenas, gated communities, shopping malls, and many others. They are wall-mounted, highly visible, and accessible to everyone. The Americans with Disabilities Act requires that objects not protrude more than 4 inches into foot traffic areas of open aisles and walkways

(hallways) unless the object's bottom edge is no higher than 27 inches from the ground

- B. Average Length of Encounter (ALOE): In these space criteria, an encounter is defined as a face-to-face professional contact between a patient and a provider vested with responsibility for diagnosing, evaluating, and treating the patient's condition. The Length of Encounter is the time between set-up and clean-up of the Exam Room. The Average Length of Encounter is used to capture variations in Length of Encounter among similar clinical encounters that will take place in an Exam Room.
- C. Bariatrics: Bariatrics is the branch of medicine that deals with the causes, prevention, and treatment of obesity. A bariatric patient is one that is severely obese, overweight by 100 to 200 lbs, or having a body weight of greater than 300 lbs. A Body Mass Index (BMI) of greater than 40 is considered bariatric. FGI Guidelines for Healthcare Facilities provides guidelines for the design of bariatric care units.
- D. Bariatric Patient Exam Room: This room is sized and equipped to accommodate the bariatric patient and their family member(s). It is sized for easier access. Minimum door width should be 4' to accommodate bariatric wheelchairs, and a minimum of a 6' turning radius should be provided. When provided, these rooms should be located towards the front (entrance) of the clinical suite.
- E. Bariatric Patient Toilet: This space is the bathroom for the bariatric patient. Preferred bariatric design solutions for this space include oversized toilet seats and floor-mounted toilets with weight capacity of at least 1,000-lbs. Toilet seat height of 17" to 19" and reinforced grab bars that hold at least 750-lbs is preferred to aid the patient to rise. Toilet centered 24 inches from a wall allows space for caregivers on each side to assist. Space to provide a minimum turning radius of 6' in order to accommodate larger wheelchairs is preferred. Sink placement, further away from the toilet, is recommended to prevent patients using it for lift support.
- F. Chemotherapeutics Compounding Area Clean Room: This is part of the infusion clinic pharmacy. It is space where the IV Chemotherapeutic Drugs are mixed in a clean environment. A Clean Room follows strict standards, including the USP 797 Standards (Chapter 797 of the Guidebook to Pharmaceutical Compounding & Sterile Preparations, a set of standards issued by U.S. Pharmacopeia), the authority for all prescription and over-the-counter medicines. Air quality is controlled through the use of HEPA filters and hoods to ensure it is pure and clean. This helps the cancer patient who has a compromised immune system, which means they're more susceptible to infection
- G. Clean Utility Room: This room is used for the storage and holding of clean and sterile supplies. Additionally it may provide space to prepare patient care items. Clean linen may be stored in a designated area in the clean utility room if space is not provided in a separate room or in an alcove.
- H. Colonoscopy: Examination of the entire length of the colon, or large intestine, using an endoscope to detect early signs of cancer, inflamed tissue, abnormal growths, ulcers, and/or bleeding in the colon or rectum.
- I. Consult Room: This is a consultation room for family members to meet with physicians or other providers privately and is ideally located near the waiting room.
- J. Dialysate: A solution of water and chemicals used in renal replacement therapy which is used to provide an artificial replacement for lost kidney functions.

- K. Dialysis: A standard treatment for kidney disease. There are two main forms of dialysis: Hemodialysis and Peritoneal Dialysis, both of which are considered forms of life support treatment. Dialysis may be used for patients who have recently lost kidney functions (acute renal failure) or for stable patients who have permanently lost kidney functions (chronic or end-stage renal failure).
- L. Dialysis Center: A highly specialized program which provides facilities for the treatment of patients with irreversible renal insufficiencies. Treatment procedures require professional supervision by staff experienced in renal pathophysiology. The Dialysis Center may serve either or both inpatients and outpatients, depending upon the medical facility type, and may provide self-dialysis training for Peritoneal Dialysis in addition to on-site assisted dialysis.
- M. Electrocardiogram (EKG or ECG): A type of noninvasive cardiac diagnostic test that records the electrical activity and output of the heart using electrodes placed on a patient's chest, arms and legs. Electrocardiograms are used during routine physicals or to investigate and diagnose symptoms related to heart disease.
- N. Electroencephalograms (EEG): A form of neuro-diagnostic test that measures and records electrical activity in the brain using a series of electrodes attached directly to the patient's head.
- O. Electromyography (EMG): A type of diagnostic test to evaluate the electrical potential of muscle cells when such cells are electrically or neurologically stimulated. Two forms of EMG's are commonly used: intramuscular, where a needle and fine wire are inserted directly into the muscle tissue, and surface, where a noninvasive electrode is placed on the patient's skin.
- P. Endoscopic Retrograde Cholangiopancreatography (ERCP): A diagnostic procedure that enables the physician to diagnose problems in the liver, gallbladder, bile ducts, and pancreas. ERCP combines the use of X-Rays and an endoscope, which is a long, flexible, lighted tube. Through the endoscope, the physician can see the inside of the stomach and duodenum, and inject dyes into the ducts in the biliary tree and pancreas so they can be seen clearly on X-Rays. X-Rays are taken as soon as the dye is injected. ERCP procedures can take between 30 minutes to 2 hours.
- Q. Endoscopy: A medical examination that involves viewing a body cavity, such as the stomach, with a tube-like instrument called an endoscope. Endoscopy uses cameras and video recorders to make permanent records of the appearance of internal organs. Endoscopy procedures may be diagnostic and/or therapeutic and are generally performed under topical or general anesthesia. Most procedures are done in an outpatient setting.
- R. Esophageal Manometry: Also called Esophageal Motility Study, uses a catheter to measure esophageal pressure and records the duration and sequence of contractions in the esophagus.
- S. Esophageal Motility Study: See Esophageal Manometry.
- T. Esophagogastroduodenoscopy (EGD): Endoscopic examination of the esophagus, stomach and duodenum (the first part of the small intestine). Also called Upper Endoscopy.
- U. Evoked Potential: A form of neuro-diagnostic test used to measure electrical activity in specific pathways of the brain and spinal cord. Types of evoked potential testing

includes: Visual Evoked Potential, Auditory Evoked Potential, Median Nerve Sensory Evoked Potential, Posterior Tibial Nerve Sensory Evoked Potential, and Evoked Potential Back Averaging.

- V. Flexible Sigmoidoscopy: See Sigmoidoscopy.
- W. Fluoroscopy: The radiographic technique used to produce and evaluate real time motion. A non-ionic contrast material is injected or consumed by the patient to enhance visualization of various organs. A constant stream of radiation passes through the patient and strikes a fluorescent screen creating shadows of the opaque internal organs. Images produced by this modality include upper and lower gastrointestinal series, cystography, pyelography, and esophageal motility studies.
- X. Full-Time Equivalent (FTE): A staffing parameter equal to the amount of time assigned to one full time employee. It may be composed of several part-time employees whose total time commitment equals that of a full-time employee. One FTE equals a 40-hour a week workload.
- Y. Functional Area: The grouping of rooms and spaces based on their function within a clinical service. Typical Functional Areas are Reception Area, Patient Area, Support Area, Staff and Administrative Area, and Education Area.
- Z. Gastroenterology Laboratory: Used for performing tests such as gastric analysis and esophageal manometry. It would be included in the Endoscopy Suite when approved by the Using Military Department.
- AA. Graduate Medical Education (GME): After a physician completes 4 years of medical school, they must then complete an internship (also called PGY1 or Post Graduate Year 1) and then a residency (also termed GME or Graduate Medical Education). An internship typically lasts one year, and a residency can last from three to seven years depending on the specialty that is chosen.
- BB. Hemodialysis: The form of renal dialysis typically conducted in a Dialysis Center. Hemodialysis relies on convective transport of a dialysate and utilizes counter-current flow where the dialysate is flowing in the opposite direction to blood flow in an extracorporeal circuit.
- CC. Infection Control Risk Assessment (ICRA): An ICRA is a multidisciplinary, organizational, documented process that considers the medical facility's patient population and mission to reduce the risk of infection based on knowledge about infection, infectious agents, and the care environment, permitting the facility to anticipate potential impact.
- DD. Infusion Therapy: Refers to intravenous infusion (IV), which is the installation of a large amount of fluid and/or electrolytes, or nutrient substances into a vein. It is given to patients who require extra fluid or to those who cannot take fluids or nutrient substances orally. An IV is also a port for administration of medication.
- EE. Input Data Statement: A set of questions designed to elicit information about the healthcare project in order to create a Program for Design (PFD) based on the criteria parameters set forth in this chapter. Input Data Statements could be mission related, based on the project's Concept of Operations; and they could be workload or staffing related, based on projections for the facility.
- FF. Negative Pressure Isolation Room: A type of Airborne Infection Isolation Room that is provided for the isolation of patients with airborne contagious diseases such as

tuberculosis and is designed to direct air flow from outside corridors and rooms into the patient room, preventing the chance for contaminated air to flow to other parts of a building. An anteroom is not required in an outpatient setting.

GG. Net-to-Department Gross Factor (NTDG): This number, when multiplied by the programmed net square foot (NSF) area, determines the departmental gross square feet (DGSF).

HH. Observation / IV Hydration Room: This is the room where IV hydration and observation takes place. IV hydration is the replacement of necessary fluids via an IV infusion which consists of pre-packaged fluids and electrolytes. IV hydration occurs for more than 30 minutes, and the patient is observed until his/her disposition is determined.

II. Office:

1. Private Office: Generally speaking, a private office is needed for the supervisory and/or managerial role. It may be justified for a provider or a non-provider, depending upon the nature of their work. Private offices are needed where confidential communication in person or on the telephone takes place. When private offices are justified, they are typically 120 NSF.
2. Shared Office: Staff may be assigned to share an office space of 120 NSF, which amounts up to 60 NSF per person. This can be a good solution for staff for whom a quiet office environment is important for conducting confidential communication in person or on the telephone.
3. Cubicle: A cubicle is provided in an open room. Managers and other staff with no direct reports as well as part-time, seasonal and job-sharing staff may qualify for a cubicle environment. Cubicle environments can have the benefit of being more open, airy and light, and can make more efficient use of space. Such environments are particularly conducive to team-oriented office groupings. Cubicle environments work best when they contain adequate numbers of conference and small group meeting spaces, for confidential conversations and/or group tasks. A 60 square foot cubicle is the preferred size.

JJ. Outpatient Clinic: A clinic providing outpatient service in both freestanding community-based facilities, as well as ambulatory clinics in or directly adjacent to hospital-based services.

KK. Peritoneal Dialysis (PD): A form of renal dialysis typically conducted in the patient's home and/or workplace. PD is based on the principle that the peritoneal membrane which surrounds the intestine can act as a natural semi-permeable membrane and that if a dialysate is instilled within the membrane through a catheter, intracorporeal dialysis can occur by diffusion.

LL. Personal Property Lockers: This is a small-sized locker, commonly called purse or cell phone locker, and is generally used to secure purses and smaller valuables. Staff members who do not have an office or cubicle space where they can safely store belongings will be assigned these lockers.

MM. Phototherapy: The therapeutic use of ultraviolet light, either UVA or UVB, alone or in combination with a topical or oral medication to treat a variety of dermatological abnormalities. Phototherapy is most often delivered using a specially designed phototherapy booth.

- NN. Picture Archiving and Communication System (PACS) Viewing Room: A digital radiology reading room that consists of workstations for interpretation.
- OO. Program for Design (PFD): A listing of all of the spaces and rooms included within a service and the corresponding net square foot area of each space and room. This listing of spaces and rooms is based on criteria set forth in this chapter and specific information about mission, workload projections and staffing levels authorized.
- PP. Provider: A medical professional, such as a physician, nurse practitioner, or physician assistant, who examines, diagnoses, treats, prescribes medications, and manages the care of patients within the scope of their practice as established by the governing body of a healthcare organization.
- QQ. SEPS: Acronym for Space and Equipment Planning System, a digital tool developed by the Department of Defense (DoD) and the Department of Veterans Affairs to generate a Program for Design (PFD) and a Project Room Contents list (PRC) for a DoD healthcare project based on specific information entered in response to Input Data Statements.
- RR. Screening Room: After patients are checked in at reception they may proceed to the screening room for weights and vital signs prior to going to an exam room. However, activities such as screening, medical history, vitals, height and weight can also be conducted in the Exam Room. The inclusion of the Screening Room will depend upon the individual facility's model of care. Consideration should be given to models that facilitate gaining healthcare delivery efficiencies and an enhanced patient experience.
- SS. Sigmoidoscopy: A diagnostic procedure that allows the physician to examine the lower one-third of the large intestine. Sigmoidoscopy is helpful in identifying the causes of diarrhea, abdominal pain, constipation, abnormal growths, and bleeding. It may also be used to obtain biopsies and to perform procedures such as the removal of polyps or hemorrhoids. A short, flexible, lighted tube, called a sigmoidoscope, is inserted into the intestine through the rectum into the lower part of the large intestine. Air is injected into the intestine through the sigmoidoscope to inflate it for better viewing.
- TT. Soiled Utility Room: This space provides an area for cleanup of medical equipment and instruments, and for disposal of medical waste material. It provides temporary holding for material that will be picked up by Central Sterile or similar service. It should be accessible from the main corridor.
- UU. Sub-Waiting, Pre-Procedure: This space is for patients waiting in a chair prior to proceeding to the procedure room. It is similar to pre-procedure holding.
- VV. Sub-Waiting, Post-Procedure: Depending on the procedure performed, a patient may need extra time to sit up in a chair post-procedure prior to going home. This space is allocated for that purpose, as an option for short term recovery in addition to the recovery room.
- WW. Team Collaboration Room: This space provides staff with an environment conducive to collaboration. Room contains touchdown computer workstations for documentation and a table with chairs to hold meetings.
- XX. Telehealth: The use of technology, such as computers and mobile devices, to manage healthcare remotely. It includes a variety of health care services, including

but not limited to online support groups, online health information and self-management tools, email and online communication with health care providers, remote monitoring of vital signs, video or online doctor visits. Depending on the concept of operations for this space, it may be equipped as an exam room or as a consult room with video / camera capability.

- YY. Treadmill Stress Test: A type of dynamic electrocardiogram test in which a patient's cardiac function is monitored during exercise on a treadmill.
- ZZ. Water Treatment: Dialysis water treatment implies various levels of pre-treatment and a final purification module prior to distribution of purified water through a hydraulic circuit.
1. Deionization (DI) Water: Water which has been treated to remove contaminants. This system removes most mineral deposits, but microbial contaminants may remain.
  2. Feed Water: The untreated, potable water available throughout the facility through its water supply system.
  3. Permeate Water: Fully treated purified water, stored in a tank, which is used in the preparation of dialysate.
  4. Pre-treated Water: Partially treated water, sometimes available as feed water, which has had substantial reduction of mineral and/or microbial particles.
  5. Reverse Osmosis (RO) Water: Usually the final purification module in the treatment system, RO-based treatment modules produce water of optimal chemical and microbial quality.
- AAA. Workload: The anticipated number of encounters or procedures processed through a clinic. The projected Specialty Medical Clinic workload for a given location determines the number of Exam and Treatment Rooms in the Program for Design.

### 3 OPERATING RATIONALE AND BASIS OF CRITERIA

- A. Workload projections and planned services / modalities for a specific MHS facility project shall be sought by the planner in order to develop a project based on these Criteria. Healthcare and clinical planners working on military hospitals, medical centers and clinics shall utilize and apply the workload based criteria set forth herein for identified services and modalities to determine space requirements for the project.
- B. Space planning criteria have been developed on the basis of an understanding of the activities involved in the functional areas required for Specialty Medical Clinics and its relationship with other services of a medical facility. These criteria are predicated on established and/or anticipated best practice standards, as adapted to provide environments supporting the highest quality health care for Service Members and their dependents.
- C. These criteria are subject to modification relative to equipment, medical practice, vendor requirements, and subsequent planning and design. The final selection of the size and type of medical equipment is determined during the design process.
- D. The area for each room (NSF) in this chapter has been provided by the Military Health System (MHS) Space Template Board.



- E. Calculation of the Exam Rooms, Procedure Rooms, Dialysis Stations, and Infusion Stations in Functional Area 3: Specialty Medical Clinics Patient Area, Functional Area 8: Endoscopy Suite Patient Area, Functional Area 12: Renal Dialysis Unit Patient Area, Functional Area 16: Hematology-Oncology Infusion Clinic Patient Area is derived from workload projections via the workload Input Data Statements as outlined below. Most of the rooms in the remaining functional areas are determined based on the number of Exam Rooms generated by workload. Mission, Staffing and Miscellaneous Input Data Questions drive the rest of the spaces in this chapter.
- F. Section 4: Input Data Questions and Section 5: Space Planning Criteria have been implemented and tested in SEPS II.
- G. Exam room capacity calculation is based on the following formula / parameters:

Formula:

$$\frac{\text{Operating Days per Year} \times \text{Hours of Operation per Day}}{\text{Average Length of Encounter (ALOE) in Minutes} / 60 \text{ Minutes}} \times \text{Utilization Factor}$$

User-defined Value:

1. Operating Days per Year: 232, 240 or 250. (default in SEPS: 240)
2. Hours of Operation per Day: 6, 7, or 8 (default in SEPS: 8)

Fixed Value:

1. Utilization Factor: 80%

Calculation: Annual Workload for one Dermatology Exam Room:

$$\frac{240 \text{ Operating Days per Year} \times 8 \text{ Hours of Operation per Day}}{45 \text{ Minutes} / 60 \text{ Minutes}} \times 0.80 = 2,048$$

Minimum Annual Workload to generate an Exam Room: 20% of Annual Workload for one Exam Room.

H. Workload based room calculation examples:

1. Room Criteria Statement (Room 1):

*Minimum one if the projected annual clinic encounters is between 307 and 1,536; provide an additional one for every increment of 1,536 projected annual clinic encounters greater than 1,536; the minimum workload to generate an additional room is 307.*

- a. Input Data Statement 1, Answer 1:

*How many annual clinic encounters are projected? (W) = 4,700*

Step 1: Subtract the increment from the projected annual encounters to account for the "Minimum one" condition.

$$4,700 - 1,536 = 3,164$$

*One room generated*

Step 2: Divide the resulting value by the increment.

$$3,164 / 1,536 = 2.05$$

*Two additional rooms generated*

Step 3: Multiply the whole value ("2" in the previous step) by the increment.

$$2 \times 1,536 = 3,072$$

Step 4: Subtract Step 3 from Step 1.

$$3,164 - 3,072 = 92$$

Step 5: Compare Step 4 with the "minimum workload to generate an additional room" value; if higher, provide an additional room.

92 is less than 307

*No additional rooms generated.*

**Total number of rooms generated by 4,700 annual encounters: 3**

b. Input Data Statement 1, Answer 2:

*How many annual clinic encounters are projected? (W) = 15,000*

Step 1: Subtract the increment from the projected annual encounters to account for the "Minimum one" condition.

$$15,000 - 1,536 = 13,464$$

*One room generated*

Step 2: Divide the resulting value by the increment.

$$13,464 / 1,536 = 8.76$$

*Eight additional rooms generated*

Step 3: Multiply the whole value ("8" in the previous step) by the increment.

$$8 \times 1,536 = 12,288$$

Step 4: Subtract Step 3 from Step 1.

$$13,464 - 12,288 = 1,176$$

Step 5: Compare Step 4 with the "minimum workload to generate an additional room" value; if higher, provide an additional room.

1,176 is greater than 307

*One additional room generated.*

**Total number of rooms generated by 15,000 annual encounters: 10**

2. Room Criteria Statement (Room 2):

*Minimum two if the projected annual encounters is between 614 and 6,144; provide an additional one for every increment of 3,072 projected annual encounters greater than 6,144; the minimum workload to generate an additional room is 614.*

a. Input Data Statement 2, Answer 1:

*How many annual clinic encounters are projected? (W) = 12,500*

Step 1: Subtract the increment from the projected annual encounters to account for the "Minimum one" condition.

$$12,500 - 6,144 (3,072 \times 2) = 6,356$$

*Two rooms generated*

Step 2: Divide the resulting value by the increment.

$6,356 / 3,072 = 2.06$   
*Two additional rooms generated*

Step 3: Multiply the whole value (“2” in the previous step) by the increment.  
 $2 \times 3,072 = 6,144$

Step 4: Subtract Step 3 from Step 1.  
 $6,356 - 6,144 = 212$

Step 5: Compare Step 4 with the “minimum workload to generate an additional room” value; if higher, provide an additional room.  
 212 is less than 614  
*No additional rooms generated.*

**Total number of rooms generated by 12,500 annual encounters: 4**

b. Input Data Statement 2, Answer 2:

*How many annual clinic encounters are projected? (W) = 18,000*

Step 1: Subtract the increment from the projected annual encounters to account for the “Minimum one” condition.  
 $18,000 - 6,144 (3,072 \times 2) = 11,856$   
*Two rooms generated*

Step 2: Divide the resulting value by the increment.  
 $11,856 / 3,072 = 3.85$   
*Three additional rooms generated*

Step 3: Multiply the whole value (“3” in the previous step) by the increment.  
 $3 \times 3,072 = 9,216$

Step 4: Subtract Step 3 from Step 1.  
 $11,856 - 9,216 = 2,640$

Step 5: Compare Step 4 with the “minimum workload to generate an additional room” value; if higher, provide an additional room.  
 2,640 is greater than 614  
*One additional room generated.*

**Total number of rooms generated by 18,000 annual encounters: 6**

**TABLE 1: WORKLOAD PARAMETER CALCULATION**

<b>315: SPECIALTY MEDICAL CLINICS</b>				
<b>CLINICAL ENCOUNTERS / PROCEDURES</b>	<b>AVERAGE LENGTH OF CLINIC ENCOUNTER (minutes)</b>	<b>UTILIZATION RATE</b>	<b>ANNUAL WORKLOAD PER EXAM / PROCEDURE ROOM (*)</b>	<b>MINIMUM ANNUAL WORKLOAD TO GENERATE ONE ROOM (20%)</b>
Dermatology	45	80%	2,048	410
Endocrinology	45	80%	2,048	410
Gastroenterology	45	80%	2,048	410

Hematology-Oncology	45	80%	2,048	410
Infectious Diseases	45	80%	2,048	410
Internal Medicine	45	80%	2,048	410
Nephrology	45	80%	2,048	410
Neurology	45	80%	2,048	410
Rheumatology	45	80%	2,048	410
Dermatology Infusion	300	80%	307	61
Endocrinology Infusion	300	80%	307	61
Internal Medicine Infusion	300	80%	307	61
Neurology Infusion	300	80%	307	61
Rheumatology Infusion	300	80%	307	61
EKG	15	80%	6,144	1,229
Electroencephalography (EEG)	90	80%	1,024	205
Electromyography (EMG)	90	80%	1,024	205
Evoked Potential	60	80%	1,536	307
Gastroenterology Exam	30	80%	3,072	614
Endoscopy Procedure	50	80%	1,843	369
Colonoscopy / Proctoscopy / Sigmoidoscopy Procedure	60	80%	1,536	307
ERCP Procedure	120	80%	768	154
Esophageal Motility Procedure	45	80%	2,048	410
Dialysis Station	300	80%	307	61
Chemotherapy Infusion Treatment	120	80%	768	154

(\*) Values in this column are representative and are based on an 8-hour per day and a 240-day per year default value. SEPS calculates this value dynamically based on answers to the following Input Data Statements:

For Specialty Medical Clinics:

- (1) Is Specialty Medical Clinics authorized to operate outside the standard 8-hour per day shift? (Misc); if not:
  - (2) Is Specialty Medical Clinics authorized to operate a 6-hour per day shift? (Misc) (If not, a 7-hour per day shift will be used to calculate workload driven spaces), and
- (3) Is Specialty Medical Clinics authorized to operate outside the standard 240 days per year? (Misc); if not:
  - (4) Is Specialty Medical Clinics authorized to operate 232 days per year? (Misc) (If not, 250 days per year will be used to calculate workload driven spaces)

For Endoscopy Suite:

- (5) Is Endoscopy Suite authorized to operate outside the standard 8-hour per day shift? (Misc); if not:
  - (6) Is Endoscopy Suite authorized to operate a 6-hour per day shift? (Misc) (If not, a 7-hour per day shift will be used to calculate workload driven spaces), and
- (7) Is Endoscopy Suite authorized to operate outside the standard 240 days per year? (Misc); if not:
  - (8) Is Endoscopy Suite authorized to operate 232 days per year? (Misc) (If not, 250 days per year will be used to calculate workload driven spaces)

For Renal Dialysis Unit:

- (9) Is Renal Dialysis Unit authorized to operate outside the standard 8-hour per day shift? (Misc); if not:
  - (10) Is Renal Dialysis Unit authorized to operate a 6-hour per day shift? (Misc) (If not, a 7-hour per day shift will be used to calculate workload driven spaces), and
- (11) Is Renal Dialysis Unit authorized to operate outside the standard 240 days per year? (Misc); if not:
  - (12) Is Renal Dialysis Unit authorized to operate 232 days per year? (Misc) (If not, 250 days per year will be used to calculate workload driven spaces)

For Hematology-Oncology Infusion Clinic:

- (13) Is Hematology-Oncology Infusion Clinic authorized to operate outside the standard 8-hour per day shift? (Misc); if not:
  - (14) Is Hematology-Oncology Infusion Clinic authorized to operate a 6-hour per day shift? (Misc) (If not, a 7-hour per day shift will be used to calculate workload driven spaces), and
- (15) Is Hematology-Oncology Infusion Clinic authorized to operate outside the standard 240 days per year? (Misc); if not:
  - (16) Is Hematology-Oncology Infusion Clinic authorized to operate 232 days per year? (Misc) (If not, 250 days per year will be used to calculate workload driven spaces)

#### **4 PROGRAM DATA REQUIRED (Input Data Questions): SPECIALTY MEDICAL CLINICS: Dermatology, Endocrinology, Gastroenterology, Hematology-Oncology, Infectious Disease, Internal Medicine, Nephrology, Neurology or Rheumatology**

##### **A. Mission Input Data Statements**

- 1. Is one or more of the following Specialty Medical Clinics authorized: Dermatology, Endocrinology, Gastroenterology, Hematology-Oncology, Infectious Disease, Internal Medicine, Nephrology, Neurology or Rheumatology? (M)
  - a. Are Screening Rooms authorized? (M)
  - b. Is a Satellite Laboratory authorized? (M)
    - 1. Is a Laboratory Technician FTE position authorized? (M)
  - c. Is a Cardiology Clinic available in the MTF? (M)
  - d. Is a Dermatology Laboratory authorized? (M)
  - e. Is a Bariatric Exam Room authorized for the Specialty Medical Patient Area? (M)
  - f. Is an additional Negative Pressure Isolation Exam Room authorized? (M)
  - g. Is a Dermatology, Endocrinology, Gastroenterology, Hematology-Oncology, Infectious Disease, Internal Medicine, Nephrology, Neurology or Rheumatology Graduate Medical Education program for Specialty Medical Clinics authorized? (M)

1. How many Dermatology, Endocrinology, Gastroenterology, Hematology-Oncology, Infectious Disease, Internal Medicine, Nephrology, Neurology or Rheumatology Resident / Student FTE positions are authorized? (S)

B. Workload Input Data Statements

- a. How many annual Dermatology encounters are projected? (W)
- b. How many annual Endocrinology encounters are projected? (W)
- c. How many annual Gastroenterology encounters are projected? (W)
- d. How many annual Hematology-Oncology encounters are projected? (W)
- e. How many annual Infectious Disease encounters are projected? (W)
- f. How many annual Internal Medicine encounters are projected? (W)
- g. How many annual Nephrology encounters are projected? (W)
- h. How many annual Neurology encounters are projected? (W)
- i. How many annual Rheumatology encounters are projected? (W)
- j. How many annual Dermatology infusion encounters are projected? (W)
- k. How many annual Endocrinology infusion encounters are projected? (W)
- l. How many annual Internal Medicine infusion encounters are projected? (W)
- m. How many annual Neurology infusion encounters are projected? (W)
- n. How many annual Rheumatology infusion encounters are projected? (W)
- o. How many annual EKG encounters are projected? (W)
- p. How many annual Electroencephalography (EEG) encounters are projected? (W)
- q. How many annual Electromyography (EMG) encounters are projected? (W)
- r. How many annual Evoked Potential encounters are projected? (W)

Staffing Input Data Statements

- a. How many Specialty Medical Clinics provider FTE positions are authorized? (S)
  1. How many Specialty Medical Clinics provider FTEs are authorized to have a private office? (Misc)
  2. How many Specialty Medical Clinics provider FTEs are authorized to have a shared office? (Misc)
  3. How many Specialty Medical Clinics provider FTEs are authorized to have a cubicle? (Misc)
- b. How many Specialty Medical Clinics non-provider FTE positions are authorized? (S)
  1. How many Specialty Medical Clinics non-provider FTEs are authorized to have a private office? (Misc)
  2. How many Specialty Medical Clinics non-provider FTEs are authorized to have a shared office? (Misc)
  3. How many Specialty Medical Clinics non-provider FTEs are authorized to have a cubicle? (Misc)

C. Miscellaneous Input Data Statements

- a. Is a Sub-Waiting in the Staff and Administrative Area authorized? (Misc)
- b. Is Patient Records Storage in the Specialty Medical Clinics Staff and Administrative Area authorized? (Misc)
- c. How many Specialty Medical Clinics provider and non-provider FTEs will work on peak shift? (Misc)
- d. (1) Are Specialty Medical Clinics authorized to operate outside the standard 8-hour per day shift? (Misc)

1. (2) Are Specialty Medical Clinics authorized to operate a 7-hour per day shift? (Misc) (If not, a 6-hour per day shift will be used to calculate workload driven spaces)
- e. (3) Are Specialty Medical Clinics authorized to operate outside the standard 240 days per year? (Misc)
  1. (4) Are Specialty Medical Clinics authorized to operate 250 days per year? (Misc) (If not, 232 days per year will be used to calculate workload driven spaces)

**5 SPACE PLANNING CRITERIA: SPECIALTY MEDICAL CLINICS:  
 Dermatology, Endocrinology, Gastroenterology, Hematology-Oncology, Infectious Disease, Internal Medicine, Nephrology, Neurology, and Rheumatology.**

For calculation of the number of Vending Machine areas, Public Toilets, Communication Closets, and Janitors Closets for this Chapter, please refer to DoD Space Planning Criteria Chapter 6.1: Common Areas.

**A. FA 1: Exam Room Calculation:**

1. **Number of Exam Rooms (CALC1) .....0 NSF**  
*Provide one for every increment of 2,048 projected annual Dermatology, Endocrinology, Gastroenterology, Hematology-Oncology, Infectious Disease, Internal Medicine, Nephrology, Neurology, and Rheumatology encounters; the minimum workload to generate an Exam Room is 410.*

**B. FA 2: Specialty Medical Clinics Reception Area:**

1. **Waiting, Specialty Medical Clinics (WRC01) .....120 NSF**  
*Minimum NSF; provide an additional 60 NSF for every increment of four General, Negative Pressure and Bariatric Exam Rooms greater than four.*

Minimum allocated NSF accommodates three standard seats at 16 NSF plus one wheelchair space at 25 NSF and one Bariatric bench seat at 36 NSF and circulation area. Depending on the concept of operations for this chapter, waiting space across all units may be combined or dispersed.

2. **Playroom (PLAY1).....120 NSF**  
*Provide one for Specialty Medical Clinics.*

This space is provided to accommodate children’s play activities; it shall be outfitted with appropriate furniture and accessories. It can be an open or enclosed area included in or adjacent to General Waiting.

3. **Reception (RECP1) .....120 NSF**  
*Minimum NSF; provide an additional 30 NSF for every increment of twelve General, Negative Pressure and Bariatric Exam Rooms greater than twelve; maximum 240.*

Allocated NSF accommodates up to four receptionists and circulation.

4. **Kiosk, Patient Check-in (CLSC1) .....30 NSF**  
*Provide one for Specialty Medical Clinics.*

5. **Patient Education (CLSC3).....120 NSF**  
*Provide one for Specialty Medical Clinics.*

Room used for one-on-one patient education and includes space for family to

accompany the patient.

- 6. **Consult Room (OFDC2)**..... **120 NSF**  
*Provide one for Specialty Medical Clinics.*
- 7. **Alcove, Wheelchair (SRLW1)** ..... **60 NSF**  
*Provide one for Specialty Medical Clinics.*

**C. FA 3: Specialty Medical Clinics Patient Area:**

- 1. **Screening Room (EXRG4)**..... **120 NSF**  
*Minimum one; provide an additional one for every increment of eight General, Negative Pressure and Bariatric Exam Rooms greater than eight if Screening Rooms are authorized.*

Allocated NSF to accommodate both adult and pediatric patients.

- 2. **Alcove, Height / Weight (EXR11)** ..... **30 NSF**  
*Minimum one; provide an additional one for every increment of eight General, Negative Pressure and Bariatric Exam Rooms greater than eight if Screening Rooms are not authorized.*
- 3. **Toilet, Patient (TLTU1)**..... **60 NSF**  
*Minimum one; provide an additional one for every increment of ten General, Negative Pressure and Bariatric Exam Rooms greater than ten.*
- 4. **Exam Room / Consult (EXR10)** ..... **120 NSF**  
*Minimum one; provide an additional one for every increment of sixteen General, Negative Pressure and Bariatric Exam Rooms greater than sixteen.*
- 5. **Exam Room, Telehealth (WKTU2)** ..... **120 NSF**  
*Provide one for Specialty Medical Patient Area.*
- 6. **Exam Room, General (EXRG1)** ..... **120 NSF**  
*Calculate the number of Exam Rooms (FA 1, Room 1); minimum one, provide an additional one per each calculated Exam Room; deduct the Isolation Negative Pressure, Bariatric and Telehealth Exam Rooms.*
- 7. **Exam Room, Negative Pressure Isolation (EXRG6)**..... **120 NSF**  
*Minimum one if three Exam Rooms or greater are generated (by workload); provide an additional one if authorized per the Infection Control Risk Assessment (ICRA).*  
  
The number, location and type of airborne infection isolation and protective environment exam rooms shall be determined by the infection control risk assessment (ICRA), which shall be conducted during the early planning phase of a project.
- 8. **Toilet, Isolation Patient (TLTU1)** ..... **60 NSF**  
*Provide one per each Negative Pressure Isolation Exam Room.*
- 9. **Exam Room, Bariatric (EXB01)** ..... **120 NSF**  
*Provide one if a Bariatric Exam Room is authorized for Specialty Medical Patient Area.*
- 10. **Toilet, Bariatric Patient (TLTB1)** ..... **60 NSF**  
*Provide one for the Bariatric Exam Room.*



11. **Sub-Waiting, Satellite Laboratory (WRC03)** .....60 NSF  
*Provide one if a Satellite Laboratory is authorized.*  
  
Minimum allocated NSF accommodates three standard seats at 18 NSF and circulation area.
12. **Phlebotomy Station (LBVP1)**..... 120 NSF  
*Provide one if a Satellite Laboratory is authorized.*  
  
Allocated NSF provides space for two draw-stations.
13. **Laboratory, Satellite (LBSP1)**.....120 NSF  
*Provide one if a Satellite Laboratory and a Laboratory Technician FTE position is authorized.*
14. **Toilet, Specimen (TLTU1)** .....60 NSF  
*Provide one if a Satellite Laboratory is authorized.*  
  
This room will have a specimen pass-through to the Satellite Laboratory.
15. **Observation / IV Hydration Room (OOHR1)** ..... 120 NSF  
*Minimum one; provide an additional one for every increment of twelve General, Negative Pressure and Bariatric Exam Rooms greater than twelve.*
16. **Infusion Therapy Station (OPCT1)** .....120 NSF  
*Provide one for every increment of 307 projected annual Dermatology, Endocrinology, Internal Medicine, Neurology, and Rheumatology Infusion encounters; the minimum annual workload to generate an Infusion Therapy Station is 61.*  
  
Planner shall allocate the total number of calculated Infusion Therapy Stations in Single-Station Rooms or in Multi-Station Rooms as needed.
17. **Nurse Station (NSTA1)**..... 120 NSF  
*Minimum NSF; provide an additional 60 NSF for every increment of six Infusion Therapy Stations greater than six.*  
  
The purpose of this Nurse Station is for the observation and monitoring of patients receiving infusion therapy; it should be proximate to the Infusion Area. Allocated NSF accommodates up to four computer stations.
18. **Sub-Waiting, Pre-Procedure (WRC03)** .....60 NSF  
*Minimum NSF; provide an additional 60 NSF for every increment of three Multipurpose, Phototherapy / Dermatology, and Laser Treatment Rooms greater than three.*  
  
Allocated NSF provides space for patients waiting in a chair prior to proceeding to the procedure room; patient must be monitored by the Nurse Station. Allocated NSF accommodates three standard seats at 18 NSF and circulation area.
19. **Sub-Waiting, Post-Procedure (WRC03)** .....60 NSF  
*Minimum NSF; provide an additional 60 NSF for every increment of three Multipurpose, Phototherapy / Dermatology, and Laser Treatment Rooms greater than three.*  
  
Allocated NSF provides space for patient waiting in a chair post-procedure prior to going home; assuming no general anesthesia. Patient must be monitored by the Nurse Station. Allocated NSF accommodates three standard seats at 18 NSF

and circulation area.

20. **Cubicle, Patient Dressing (DR001)** ..... **60 NSF**  
*Provide one for every increment of two Multipurpose, Phototherapy / Dermatology, and Laser Treatment Rooms.*

Allocated NSF provides space for a seat or bench, mirror, locker for securing valuables and provisions for hanging patients' clothing. Cubicles should be provided convenient to the waiting areas and procedure rooms and may be grouped together.

21. **Nurse Station (NSTA1)** ..... **120 NSF**  
*Provide one for the Specialty Medical Clinics Patient Area.*

The purpose of this Nurse Station is for the observation and monitoring of patients pre and post procedure.

22. **Treatment Room, Multipurpose (TRGM1)** ..... **180 NSF**  
*Minimum one; provide an additional one for every increment of ten General, Negative Pressure Isolation and Bariatric Exam Rooms greater than ten.*

23. **Toilet, Treatment Patient (TLTU1)**..... **60 NSF**  
*Minimum one; provide an additional one for every increment of four Multipurpose Treatment Rooms greater than four.*

24. **Treatment Room, Phototherapy / Dermatology (OPDU1)** ..... **180 NSF**  
*Provide one for Specialty Medical Patient Area.*

25. **Shower, Phototherapy / Dermatology Patient (TLTS2)** ..... **60 NSF**  
*Provide one for Specialty Medical Patient Area.*

26. **Treatment Room, Laser (TRGS3)**..... **180 NSF**  
*Provide one for Specialty Medical Patient Area.*

27. **Treadmill Room (OPTM1)** ..... **180 NSF**  
*Provide one if a Cardiology Clinic in the MTF is not available.*

Allocated NSF accommodates treadmill / cardiac stress testing; it also includes a workstation for Treadmill Testing technician.

28. **EKG Room (OPEC1)** ..... **120 NSF**  
*Minimum one if the projected annual EKG encounters is between 1,229 and 6,144; provide an additional one for every increment of 6,144 projected annual EKG greater than 6,144; the minimum workload to generate an additional EKG Room is 1,229. (Refer to Section 3)*

Allocated NSF includes workstation for EKG technician.

29. **Electroencephalography (EEG) Room (OPEE1)** ..... **120 NSF**  
*Minimum one if the projected annual Electroencephalography (EEG) encounters is between 205 and 1,024; provide an additional one for every increment of 1,024 projected annual Electroencephalography (EEG) greater than 1,024; the minimum workload to generate an additional Electroencephalography (EEG) Room is 205. (Refer to Section 3)*

Allocated NSF includes workstation for EEG technician.

- 30. **Electromyography (EMG) Room (PTEM1)** ..... 120 NSF  
*Minimum one if the projected annual Electromyography (EMG) encounters is between 205 and 1,024; provide an additional one for every increment of 1,024 projected annual Electromyography (EMG) greater than 1,024; the minimum workload to generate an additional Electromyography (EMG) Room is 205. (Refer to Section 3)*
- 31. **Evoked Potential Room (EVPR1)** ..... 120 NSF  
*Minimum one if the projected annual Evoked Potential encounters is between 307 and 1,536; provide an additional one for every increment of 1,536 projected annual Evoked Potential greater than 1,536; the minimum workload to generate an additional Evoked Potential Room is 307. (Refer to Section 3)*
- 32. **Laboratory, Dermatology (LBDE1)**..... 120 NSF  
*Provide one if a Dermatology Laboratory is authorized.*  
  
Allocated NSF provides space for microscopy and specimen collection and storage.
- 33. **Alcove, Portable Imaging (XRM01)** .....30 NSF  
*Provide one for Specialty Medical Patient Area.*  
  
Accommodates ultrasound equipment.

**D. FA 4: Specialty Medical Clinics Support Area:**

- 1. **Medication Room (MEDP1)**..... 120 NSF  
*Provide one for the Specialty Medical Clinics Support Area.*  
  
Allocated NSF provides space for a work counter, sink, refrigerator and locked storage for biological or drugs. Accommodates space for automated medication dispensing machine.
- 2. **Utility Room, Soiled (USCL1)** ..... 120 NSF  
*Minimum NSF; provide an additional 30 NSF for every increment of eight General, Negative Pressure Isolation and Bariatric Exam Rooms, Infusion Therapy Stations, EKG, Electroencephalography (EEG), Electromyography (EMG), and Evoked Potential Rooms greater than eight.*  
  
Allocated NSF provides space for a handwashing station, a work counter, space for waste receptacles and soiled linen receptacles and provisions for disposal of liquid waste.
- 3. **Utility Room, Clean (UCCL1)** ..... 120 NSF  
*Minimum NSF; provide an additional 30 NSF for every increment of eight General, Negative Pressure Isolation and Bariatric Exam Rooms, Infusion Therapy Stations, EKG, Electroencephalography (EEG), Electromyography (EMG), and Evoked Potential Rooms greater than eight.*  
  
Allocated NSF provides space for a work counter, a handwashing station and storage facilities for clean and sterile supplies such as shelving and automated dispensing machines
- 4. **Storage, Equipment (SRSE1)** ..... 120 NSF  
*Minimum NSF; provide an additional 30 NSF for every increment of eight General, Negative Pressure Isolation and Bariatric Exam Rooms, Infusion Therapy*

*Stations, EKG, Electroencephalography (EEG), Electromyography (EMG), and Evoked Potential Rooms greater than eight.*

- 5. **Alcove, Crash Cart (RCA01)**..... **30 NSF**  
*Minimum one; provide an additional one for every increment of sixteen General, Negative Pressure Isolation and Bariatric Exam Rooms, Infusion Therapy Stations, EKG, Electroencephalography (EEG), Electromyography (EMG), and Evoked Potential Rooms greater than sixteen.*
- 6. **Alcove, Wheelchair (SRLW1)** ..... **60 NSF**  
*Minimum one; provide an additional one for every increment of sixteen General, Negative Pressure Isolation and Bariatric Exam Rooms, Infusion Therapy Stations, EKG, Electroencephalography (EEG), Electromyography (EMG), and Evoked Potential Rooms greater than sixteen.*

**E. FA 5: Specialty Medical Clinics Staff and Administrative Area:**

- 1. **Office, Clinic Chief (OFA04)** ..... **120 NSF**  
*Provide one for Specialty Medical Clinics.*
- 2. **Office, Executive Assistant (OFA04)** ..... **120 NSF**  
*Provide one for Specialty Medical Clinics.*
- 3. **Sub-Waiting (WRC03)**..... **60 NSF**  
*Provide one if a Sub-Waiting for Specialty Medical Clinics Staff and Administrative Area is authorized.*

Minimum allocated NSF accommodates three standard seats at 18 NSF and circulation area.

- 4. **Office, NCOIC / LCPO / LPO (OFA04)** ..... **120 NSF**  
*Provide one for Specialty Medical Clinics.*
- 5. **Team Collaboration Room (WRCH1)** ..... **120 NSF**  
*Minimum one; provide an additional one for every increment of eight General Exam Rooms, Infusion Therapy Stations, EKG, Electroencephalography, Electromyography, and Evoked Potential Rooms greater than eight.*

Allocated NSF provides space for staff collaboration with touchdown computer stations for documentation and a table with chairs.

- 6. **Office, Private (OFA04)**..... **120 NSF**  
*Provide one per each Specialty Medical Clinics provider and non-provider FTE position authorized to have a private office.*
- 7. **Office, Shared (OFA05)**..... **120 NSF**  
*Provide one for every increment of two Specialty Medical Clinics provider and non-provider FTE positions authorized to have a shared office.*
- 8. **Cubicle (OFA03)**..... **60 NSF**  
*Provide one per each Specialty Medical Clinics provider and non-provider FTE position authorized to have a cubicle.*

These cubicles may be collocated in a shared space or dispersed as required.

- 9. **Conference Room (CRA01)**..... **240 NSF**  
*Minimum NSF; provide an additional 60 NSF if the total number of FTE provider and non provider positions authorized is greater than ten.*

Planner must determine adequacy and availability of existing Conference Room space and the ability to optimize resources by sharing Conference Room space with other departments.

10. **Storage, Patient Records (MRS01)**..... **120 NSF**  
*Provide one if Patient Records storage in the Specialty Medical Clinics Staff and Administrative area is authorized.*

The Military Health System is moving towards an integrated electronic medical record. If required, space for paper medical records for will be planned.

11. **Copier (RPR01)**..... **120 NSF**  
*Provide one for Specialty Medical Clinics.*

This is a room for the copier/printer/scanner. It may be located directly adjacent to the reception area or in the clinic staff support area.

12. **Storage, Office Supplies (SRS01)** ..... **60 NSF**  
*Provide one for Specialty Medical Clinics.*

Allocated NSF provides space for office supplies, patient forms and literature.

13. **Lounge, Staff (SL001)** ..... **120 NSF**  
*Minimum NSF, provide an additional 60 NSF for every increment of five Specialty Medical Clinics provider and non-provider FTEs working on peak shift greater than ten; maximum 360 NSF.*

14. **Lockers, Personal Property (LR001)**..... **30 NSF**  
*Minimum NSF, provide an additional 3 NSF per each FTE position not assigned a private office, shared office or cubicle greater than ten.*

**F. FA 6: Specialty Medical Clinics GME Education / Training Area:**

1. **Office, Residency Program Director (OFA04)** ..... **120 NSF**  
*Provide one if a Dermatology, Endocrinology, Gastroenterology, Hematology-Oncology, Infectious Disease, Internal Medicine, Nephrology, Neurology or Rheumatology Graduate Medical Education program for Specialty Medical Clinics is authorized.*

2. **Resident Collaboration Room (WKTm1)**..... **240 NSF**  
*Minimum NSF; provide an additional 60 NSF per each Dermatology, Endocrinology, Gastroenterology, Hematology-Oncology, Infectious Disease, Internal Medicine, Nephrology, Neurology or Rheumatology Resident / Student FTE position authorized greater than two if a Dermatology, Endocrinology, Gastroenterology, Hematology-Oncology, Infectious Disease, Internal Medicine, Nephrology, Neurology or Rheumatology Graduate Medical Education program for Specialty Medical Clinics is authorized.*

This room should contain one cubicle per Resident / Student at 60 NSF. In addition to the cubicles, a table with chairs for collaboration space and bookcases will be provided.

3. **Classroom / Conference Room (CLR01)** ..... **240 NSF**  
*Provide one if the total number of Dermatology, Endocrinology, Gastroenterology, Hematology-Oncology, Infectious Disease, Internal Medicine, Nephrology, Neurology and Rheumatology Resident / Student FTE positions is greater than five if a Dermatology, Endocrinology, Gastroenterology, Hematology-Oncology,*

*Infectious Disease, Internal Medicine, Nephrology, Neurology or Rheumatology Graduate Medical Education program for Specialty Medical Clinics is authorized.*

Planner must determine adequacy and availability of existing Classroom / Conference Room space and the ability to optimize resources by sharing Classroom / Conference Room space with other GME programs.

## **6 PROGRAM DATA REQUIRED (Input Data Questions): SPECIALTY MEDICAL CLINIC: ENDOSCOPY SUITE**

### **A. Mission Input Data Statements**

1. Is an Endoscopy Suite authorized? (M)
  - a. Is use of Patient Dressing Cubicles authorized? (M)
  - b. Is a Gastroenterology Laboratory authorized? (M)

### **B. Workload Input Data Statements**

- a. How many annual Endoscopy procedures are projected? (W)
- b. How many annual Colonoscopy / Proctoscopy / Sigmoidoscopy procedures are projected? (W)
- c. How many annual ERCP procedures are projected? (W)
- d. How many annual Esophageal Motility procedures are projected? (W)

### **C. Staffing Input Data Statements**

- a. How many Endoscopy Suite provider FTE positions are authorized? (S)
  1. How many Endoscopy Suite provider FTE positions are authorized to have a private office? (Misc)
  2. How many Endoscopy Suite provider FTE positions are authorized to have a shared office? (Misc)
  3. How many Endoscopy Suite provider FTE positions are authorized to have a cubicle? (Misc)
- b. How many Endoscopy Suite non-provider FTE positions are authorized? (S)
  1. How many Endoscopy Suite non-provider FTE positions are authorized to have a private office? (Misc)
  2. How many Endoscopy Suite non-provider FTE positions are authorized to have a shared office? (Misc)
  3. How many Endoscopy Suite non-provider FTE positions are authorized to have a cubicle? (Misc)

### **D. Miscellaneous Input Data Statements**

- a. Is a Playroom for the Endoscopy Suite Reception Area authorized? (Misc)
- b. Is Sub-Waiting for the Endoscopy Suite Staff and Administrative Area authorized? (Misc).
- c. Is Patient Records Storage in the Endoscopy Suite authorized? (Misc)
- d. How many Endoscopy Suite provider and non-provider FTEs will work on peak shift? (Misc)
- e. (5) Is Endoscopy Suite authorized to operate outside the standard 8-hour per day shift? (Misc)
  1. (6) Is Endoscopy Suite authorized to operate a 7-hour per day shift? (Misc) (If not, a 6-hour per day shift will be used to calculate workload driven spaces)
- f. (7) Is Endoscopy Suite authorized to operate outside the standard 240 days per year? (Misc)

1. (8) Is Endoscopy Suite authorized to operate 250 days per year? (Misc) (If not, 232 days per year will be used to calculate workload driven spaces)

**7 SPACE PLANNING CRITERIA: SPECIALTY MEDICAL CLINIC: ENDOSCOPY SUITE**

For calculation of the number of Vending Machine areas, Public Toilets, Communication Closets, and Janitors Closets for this Chapter, please refer to DoD Space Planning Criteria Chapter 6.1: Common Areas.

**A. FA 7: Endoscopy Suite Reception Area:**

1. **Waiting, Endoscopy Suite (WRC01).....120 NSF**  
*Minimum NSF; provide an additional 60 NSF for every increment of four Endoscopy, Colonoscopy / Proctoscopy / Sigmoidoscopy, ERCP, and Esophageal Motility Procedure Rooms greater than four.*  
  
 Minimum allocated NSF accommodates three standard seats at 16 NSF plus one wheelchair space at 25 NSF and one Bariatric bench seat at 36 NSF and circulation area. Depending on the concept of operations for this chapter, waiting space across all units may be combined or dispersed.
2. **Playroom (PLAY1).....120 NSF**  
*Provide one if a Playroom for the Endoscopy Suite Reception Area is authorized.*  
  
 This space is provided to accommodate children’s play activities; it shall be outfitted with appropriate furniture and accessories. It can be an open or enclosed area included in or adjacent to General Waiting.
3. **Reception (RECP1) .....120 NSF**  
*Minimum NSF; provide an additional 30 NSF for every increment of twelve Endoscopy, Colonoscopy / Proctoscopy / Sigmoidoscopy, ERCP, and Esophageal Motility Procedure Rooms greater than twelve; maximum 240 NSF.*  
  
 Allocated NSF accommodates up to four receptionists and circulation.
4. **Kiosk, Patient Check-in (CLSC1) .....30 NSF**  
*Provide one for Endoscopy Suite.*
5. **Patient Education (CLSC3).....120 NSF**  
*Provide one for Endoscopy Suite.*  
  
 Room used for one-on-one patient education and includes space for family to accompany the patient.
6. **Consult Room (OFDC2) .....120 NSF**  
*Provide one for Endoscopy Suite.*
7. **Alcove, Wheelchair (SRLW1).....60 NSF**  
*Provide one for Endoscopy Suite.*

**B. FA 8: Endoscopy Suite Patient Area:**

1. **Cubicle, Patient Dressing (DR001).....60 NSF**  
*Minimum one; provide an additional one for every increment of two Endoscopy, Colonoscopy / Proctoscopy / Sigmoidoscopy, ERCP, and Esophageal Motility Procedure Rooms greater than two if use of Patient Dressing Cubicles is authorized.*  
  
 Allocated NSF provides space for a seat or bench, mirror, locker for securing

valuables and provisions for hanging patients' clothing. Cubicles should be provided convenient to the waiting areas and procedure rooms and may be grouped together.

2. **Prep / Recovery Station (RROP1)** ..... **120 NSF**  
*Minimum two; provide an additional two per each Endoscopy, Colonoscopy / Proctoscopy / Sigmoidoscopy, ERCP, and Esophageal Motility Procedure Room.*

Pre-Op and Phase II recovery can take place in this space. A hand-washing station shall be provided. Planner shall allocate the total number of calculated Prep / Recovery Stations in Single-Station Rooms or in Multi-Station Rooms as needed.

3. **Prep / Recovery, Negative Pressure Isolation Room (RRIR1)** ..... **120 NSF**  
*Provide one for Endoscopy Suite Patient Area.*

The number, location and type of airborne infection isolation and protective environment rooms shall be determined by the infection control risk assessment (ICRA), which shall be conducted during the early planning phase of a project.

4. **Toilet, Prep / Recovery Patient (TLTU1)** ..... **60 NSF**  
*Minimum one; provide an additional one for every increment of eight Prep / Recovery Patient Rooms and Stations greater than eight.*

5. **Nurse Station (NSTA1)** ..... **120 NSF**  
*Minimum NSF; provide an additional 60 NSF for every increment of twelve Endoscopy, Colonoscopy / Proctoscopy / Sigmoidoscopy, ERCP, and Esophageal Motility Procedure Rooms greater than twelve.*

The purpose of this Nurse Station is for the observation and monitoring of patients pre and post procedure. Locate adjacent to Prep / Recovery for ease of patient visualization. Additional charting space is allocated in Team Collaboration Room, Staff and Administration Area.

6. **Exam Room / Consult, Gastroenterology (EXR10)** ..... **120 NSF**  
*Provide one for Endoscopy Suite Patient Area.*

7. **Procedure Room, Endoscopy (TREE1)** ..... **300 NSF**  
*Minimum one if the projected annual Endoscopy procedures is between 369 and 1,843; provide an additional one for every increment of 1,843 projected annual Endoscopy procedures greater than 1,843; the minimum workload to generate an additional Endoscopy Procedure Room is 369. (Refer to Section 3)*

8. **Procedure Room, Colonoscopy / Proctoscopy / Sigmoidoscopy (TRPE1)** ..... **300 NSF**  
*Minimum one if the projected annual Colonoscopy / Proctoscopy / Sigmoidoscopy procedures is between 307 and 1,536; provide an additional one for every increment of 1,536 projected annual Colonoscopy / Proctoscopy / Sigmoidoscopy procedures greater than 1,536; the minimum workload to generate an additional Colonoscopy / Proctoscopy / Sigmoidoscopy Procedure Room is 307. (Refer to Section 3)*

9. **Procedure Room, ERCP (XDCY1)** ..... **480 NSF**  
*Minimum one if the projected annual ERCP procedures is between 154 and 768; provide an additional one for every increment of 768 projected annual ERCP*



*procedures greater than 768; the minimum workload to generate an additional ERCP Procedure Room is 154. (Refer to Section 3)*

Endoscopy with fluoroscopy is performed in this room.

10. **Control Room, ERCP (XACR1)** ..... **120 NSF**  
*Minimum one; provide an additional one for every increment of two ERCP Procedure Rooms greater than two.*

11. **Procedure Room, Esophageal Motility (XDRF1)** ..... **300 NSF**  
*Minimum one if the projected annual Esophageal Motility procedures is between 410 and 2,048; provide an additional one for every increment of 2,048 projected annual Esophageal Motility procedures greater than 2,048; the minimum workload to generate an additional Esophageal Motility Procedure Room is 410. (Refer to Section 3)*

12. **Nourishment Room (NCWD1)** ..... **120 NSF**  
*Provide one for Endoscopy Suite Patient Area.*

Allocated NSF provides a hand-washing station, work counter, refrigerator, storage cabinets, drinking water-dispensing unit (separate from hand-washing station), and equipment for serving nourishments. Locate away from treatment area.

13. **Alcove, Portable Imaging (XRM01)** ..... **30 NSF**  
*Provide one for Endoscopy Suite Patient Area.*

Allocated NSF provides space for temporary storage of ultrasound equipment.

**C. FA 9: Endoscopy Suite Support Area:**

1. **Medication Room (MEDP1)** ..... **120 NSF**  
*Provide one for Endoscopy Suite Support Area.*

Allocated NSF provides space for a work counter, sink, refrigerator and locked storage for biological or drugs. Accommodates space for automated medication dispensing machine.

2. **Utility, Soiled Scope Wash (USCL2)** ..... **120 NSF**  
*Provide one for Endoscopy Suite Support Area.*

This room, as part of a two room suite, is utilized for initial decontamination. It should have a pass-through from the Soiled Scope Wash Utility Room to the Clean Scope Wash Utility Room for scope washing / high level disinfecting.

3. **Utility, Clean Scope Wash (UCCL2)** ..... **120 NSF**  
*Provide one for Endoscopy Suite Support Area.*

This room, as part of a two-room suite, is utilized for scope washing / high level disinfecting. It should have a pass-through from the Soiled Scope Wash Utility Room to the Clean Scope Wash Utility Room.

4. **Utility Room, Soiled (USCL1)** ..... **120 NSF**  
*Minimum NSF; provide an additional 30 NSF for every increment of ten Endoscopy, Colonoscopy / Proctoscopy / Sigmoidoscopy, ERCP, and Esophageal Motility Procedure Rooms greater than ten.*

Allocated NSF provides space for a handwashing station, a work counter, space

for waste receptacles and soiled linen receptacles and provisions for disposal of liquid waste.

- 5. **Utility Room, Clean (UCCL1)**..... **120 NSF**  
*Minimum NSF; provide an additional 30 NSF for every increment of ten Endoscopy, Colonoscopy / Proctoscopy / Sigmoidoscopy, ERCP, and Esophageal Motility Procedure Rooms greater than ten.*

Allocated NSF provides space for a work counter, a handwashing station and storage facilities for clean and sterile supplies such as shelving and automated dispensing machines.

- 6. **Storage, Stretcher (SRLW1)**..... **60 NSF**  
*Provide one for Endoscopy Suite Support Area.*
- 7. **Alcove, Crash Cart (RCA01)**..... **30 NSF**  
*Provide one for Endoscopy Suite Support Area.*
- 8. **Alcove, Blanket Warmer (RCA04)**..... **30 NSF**  
*Provide one for Endoscopy Suite Support Area.*
- 9. **Laboratory, Gastroenterology (LBSP1)**..... **120 NSF**  
*Provide one if a Gastroenterology Laboratory is authorized.*

**D. FA 10: Endoscopy Suite Staff and Administrative Area:**

- 1. **Office, Clinic Chief (OFA04)** ..... **120 NSF**  
*Provide one for Endoscopy Suite.*
- 2. **Office, Executive Assistant (OFA04)** ..... **120 NSF**  
*Provide one for Endoscopy Suite.*
- 3. **Sub-Waiting (WRC03)**..... **60 NSF**  
*Provide one if a Sub-Waiting for the Endoscopy Suite Staff and Administrative Area is authorized.*

Allocated NSF provides space for minimum of two seats plus circulation.

- 4. **Office, NCOIC / LCPO / LPO (OFA04)** ..... **120 NSF**  
*Provide one for Endoscopy Suite.*
- 5. **Team Collaboration Room (WRCH1)**..... **120 NSF**  
*Minimum one; provide an additional one for every increment of eight Endoscopy, Colonoscopy / Proctoscopy / Sigmoidoscopy, ERCP and Esophageal Motility Procedure Rooms greater than eight.*

Allocated NSF provides space for staff collaboration with touchdown computer stations for documentation and a table with chairs.

- 6. **Office, Private (OFA04)**..... **120 NSF**  
*Provide one per each Endoscopy Suite provider and non-provider FTE position authorized to have a private office.*
- 7. **Office, Shared (OFA05)**..... **120 NSF**  
*Provide one for every increment of two Endoscopy Suite provider and non-provider FTE positions authorized to have a shared office.*
- 8. **Cubicle (OFA03)**..... **60 NSF**  
*Provide one per each Endoscopy Suite provider and non-provider FTE position*

*authorized to have a cubicle.*

These cubicles may be collocated in a shared space or dispersed as required.

9. **Conference Room (CRA01)** .....**240 NSF**  
*Minimum NSF; provide an additional 60 NSF if the total number of FTE positions authorized is greater than ten.*  
  
Planner must determine adequacy and availability of existing Conference Room space and the ability to optimize resources by sharing Conference Room space with other departments.
10. **Storage, Patient Records (MRS01)**.....**120 NSF**  
*Provide one if Patient Records Storage in the Endoscopy Suite is authorized.*  
  
The Military Health System is moving towards an integrated electronic medical record. If required, space for paper medical records for patients will be planned.
11. **Copier (RPR01)**.....**120 NSF**  
*Provide one for Endoscopy Suite.*  
  
This is a room for the copier/printer/scanner. It may be located directly adjacent to the reception area or in the clinic staff support area.
12. **Storage, Office Supplies (SRS01)** .....**60 NSF**  
*Provide one for Endoscopy Suite.*  
  
Allocated NSF provides space for office supplies, patient forms and literature.
13. **Lounge, Staff (SL001)** .....**120 NSF**  
*Minimum NSF, provide an additional 60 NSF for every increment of five provider and non-provider Endoscopy Suite FTEs working on peak shift greater than ten; maximum 360 NSF.*
14. **Locker / Changing Room, Male Staff (LR002)** .....**120 NSF**  
*Minimum NSF if total number of Endoscopy FTE provider and non-provider positions authorized is between five and thirteen; provide an additional 6 NSF per each Endoscopy FTE provider and non-provider position authorized greater than thirteen.*  
  
Providers shall don surgical attire in this space. Provide one-way changing flow from Staff Entrance to semi-restricted area. Provide additional locker space for those FTE Positions without assigned office or cubicle space. Locate near the Procedure Rooms.
15. **Locker / Changing Room, Female Staff (LR002)**.....**120 NSF**  
*Minimum NSF if total number of Endoscopy FTE provider and non-provider positions authorized is between five and thirteen; provide an additional 6 NSF per each Endoscopy FTE provider and non-provider position authorized greater than thirteen.*  
  
Providers shall don surgical attire in this space. Provide one-way changing flow from Staff Entrance to semi-restricted area. Provide additional locker space for those FTE positions without assigned office or cubicle space. Locate near the Procedure Rooms.
16. **Toilet / Shower, Male Staff (TLTS1)**.....**60 NSF**  
*Minimum one if the total number of Endoscopy FTE provider and non-provider*

*positions authorized is between five and thirteen; provide an additional one for every increment of ten Endoscopy FTE provider and non-provider positions authorized greater than thirteen.*

**17. Toilet / Shower, Female Staff (TLTS1) ..... 60 NSF**

*Minimum one if the total number of Endoscopy FTE provider and non-provider positions authorized is between five and thirteen; provide an additional one for every increment of ten Endoscopy FTE provider and non-provider positions authorized greater than thirteen.*

**18. Lockers, Personal Property (LR001) ..... 30 NSF**

*Minimum NSF, provide an additional 3 NSF per each FTE position not assigned a private office, shared office or cubicle greater than ten.*

**8 PROGRAM DATA REQUIRED (Input Data Questions): SPECIALTY MEDICAL CLINIC: RENAL DIALYSIS UNIT**

**A. Mission Input Data Statements**

1. Is a Renal Dialysis Unit authorized? (M)
  - a. Is a Playroom for the Renal Dialysis Unit Reception Area authorized? (M)
  - b. Is Patient Records Storage in the Renal Dialysis Unit Staff and Administrative Area authorized? (M)

**B. Workload Input Data Statements**

- a. How many annual Renal Dialysis Station Encounters are projected? (W)

**C. Staffing Input Data Statements**

- a. How many Renal Dialysis Unit provider FTE positions are authorized? (S)
  1. How many Renal Dialysis Unit provider FTE positions are authorized to have a private office? (Misc)
  2. How many Renal Dialysis Unit provider FTE positions are authorized to have a shared office? (Misc)
  3. How many Renal Dialysis Unit provider FTE positions are authorized to have a cubicle? (Misc)
- b. How many Renal Dialysis non-provider FTE positions are authorized? (S)
  1. How many Renal Dialysis Unit non-provider FTE positions are authorized to have a private office? (Misc)
  2. How many Renal Dialysis Unit non-provider FTE positions are authorized to have a shared office? (Misc)
  3. How many Renal Dialysis Unit non-provider FTE positions are authorized to have a cubicle? (Misc)

**D. Miscellaneous Input Data Statements**

- a. How many Renal Dialysis provider and non-provider FTEs will work on peak shift? (Misc)
- b. Is water-softening equipment for the Water Treatment Room authorized? (Misc)
- c. Is Sub-Waiting for the Renal Dialysis Unit Staff and Administrative Area authorized? (Misc)
- d. (9) Is Renal Dialysis Unit authorized to operate outside the standard 8-hour per day shift? (Misc)

1. (10) Is Renal Dialysis Unit authorized to operate a 7-hour per day shift? (Misc) (If not, a 6-hour per day shift will be used to calculate workload driven spaces)
- e. (11) Is Renal Dialysis Unit authorized to operate outside the standard 240 days per year? (Misc)
  1. (12) Is Renal Dialysis Unit authorized to operate 250 days per year? (Misc) (If not, 232 days per year will be used to calculate workload driven spaces)

## 9 SPACE PLANNING CRITERIA: SPECIALTY MEDICAL CLINIC: RENAL DIALYSIS UNIT

For calculation of the number of Vending Machine areas, Public Toilets, Communication Closets, and Janitors Closets for this Chapter, please refer to DoD Space Planning Criteria Chapter 6.1: Common Areas.

### A. FA 11: Renal Dialysis Unit Reception Area:

1. **Waiting, Renal Dialysis Unit (WRC01)** ..... **120 NSF**  
*Minimum NSF; provide an additional 60 NSF for every increment of four Dialysis Stations, and Negative Pressure Dialysis Isolation Rooms greater than four.*

Minimum allocated NSF accommodates three standard seats at 16 NSF plus one wheelchair space at 25 NSF and one Bariatric bench seat at 36 NSF and circulation area. Depending on the concept of operations for this chapter, waiting space across all units may be combined or dispersed.

2. **Playroom (PLAY1)**..... **120 NSF**  
*Provide one if a Playroom for the Renal Dialysis Unit Reception Area is authorized.*

This space is provided to accommodate children's play activities; it shall be outfitted with appropriate furniture and accessories. It can be an open or enclosed area included in or adjacent to General Waiting.

3. **Reception (RECP1)** ..... **120 NSF**  
*Provide one for Renal Dialysis Unit.*

Allocated NSF accommodates up to four receptionists and circulation.

4. **Kiosk, Patient Check-in (CLSC1)** ..... **30 NSF**  
*Provide one for Renal Dialysis Unit.*

5. **Patient Education (CLSC3)**..... **120 NSF**  
*Provide one for Renal Dialysis Unit.*

Room used for one-on-one patient education and includes space for family to accompany the patient.

6. **Consult Room (OFDC2)** ..... **120 NSF**  
*Provide one for Renal Dialysis Unit.*

7. **Alcove, Wheelchair (SRLW1)**..... **60 NSF**  
*Provide one for Renal Dialysis Unit.*

### B. FA 12: Renal Dialysis Unit Patient Area:

1. **Renal Dialysis Station (RDC01)**..... **120 NSF**

*Minimum one if the projected annual Dialysis Station encounters is between 61 and 307; provide an additional one for every increment of 307 projected annual Dialysis Station encounters greater than 307; the minimum workload to generate an additional Dialysis Station is 61. (Refer to Section 3)*

Planner shall allocate the total number of calculated Prep / Recovery Stations in Single-Station Rooms or in Multi-Station Rooms as needed.

- 2. **Toilet, Dialysis Patient (TLTU1)** ..... **60 NSF**  
*Provide two for the Renal Dialysis Unit Patient Area.*

- 3. **Dialysis Station, Isolation Negative Pressure (RDC02)** ..... **120 NSF**  
*Provide one for the Renal Dialysis Unit Patient Area.*

The number, location and type of airborne infection isolation and protective environment rooms shall be determined by the infection control risk assessment (ICRA), which shall be conducted during the early planning phase of a project.

- 4. **Toilet, Isolation Patient (TLTU1)** ..... **60 NSF**  
*Provide one for the Renal Dialysis Unit Patient Area.*

- 5. **Exam Room (EXRG1)** ..... **120 NSF**  
*Provide one for the Renal Dialysis Unit Patient Area.*

This room is used for physical exams prior to treatment.

- 6. **Treatment Room (TRGM1)** ..... **180 NSF**  
*Provide one for the Renal Dialysis Unit Patient Area.*

This room is used to implant cannulas; to remove clots from shunts; and to perform special examinations, treatment, or kidney biopsies.

- 7. **Patient Education Room (CLSC3)** ..... **120 NSF**  
*Provide one for the Renal Dialysis Unit Patient Area.*

Provided for patients who are being trained to use dialysis equipment at home. Allocate NSF includes counter, hand-washing stations, and a separate drain for fluid disposal.

- 8. **Nurse Station (NSTA1)** ..... **120 NSF**  
*Minimum NSF; provide an additional 30 NSF for every increment of ten Dialysis Rooms and Stations greater than ten.*

This space is for providing visual observation of all patient dialysis stations.

- 9. **Nourishment Room (NCWD1)** ..... **120 NSF**  
*Provide one for the Renal Dialysis Unit Patient Area.*

Allocated NSF provides a hand-washing station, work counter, refrigerator, storage cabinets, drinking water-dispensing unit (separate from hand-washing station), and equipment for serving nourishments. Locate away from treatment area.

**C. FA 13: Renal Dialysis Unit Support Area:**

- 1. **Medication Room (MEDP1)** ..... **120 NSF**  
*Provide one for the Renal Dialysis Unit Support Area.*

Allocated NSF provides space for a work counter, sink, refrigerator and locked storage for biological or drugs. Accommodates space for automated medication dispensing machine.

- 2. **Utility Room, Soiled (USCL1)** ..... **120 NSF**  
*Minimum NSF; provide an additional 30 NSF for every increment of ten Dialysis Stations greater than ten.*

Allocated NSF provides space for a handwashing station, a work counter, space for waste receptacles and soiled linen receptacles and provisions for disposal of liquid waste.

- 3. **Utility Room, Clean (UCCL1)** ..... **120 NSF**  
*Minimum NSF; provide an additional 30 NSF for every increment of ten Dialysis Stations greater than ten.*

Allocated NSF provides space for a workcounter, a handwashing station and storage facilities for clean and sterile supplies such as shelving and automated dispensing machines.

- 4. **Storage, Dialysis Equipment (RDP01)** ..... **120 NSF**  
*Minimum NSF; provide an additional 30 NSF for every increment of ten Dialysis Stations greater than ten.*

- 5. **Alcove, Crash Cart (RCA01)** ..... **30 NSF**  
*Provide one for the Renal Dialysis Unit Patient Area.*

- 6. **Alcove, Blanket Warmer (RCA04)** ..... **30 NSF**  
*Provide one for the Renal Dialysis Unit Patient Area.*

- 7. **Alcove, Wheelchair (SRLW1)**..... **60 NSF**  
*Minimum one; provide an additional one for every increment of ten Dialysis Stations greater than ten.*

- 8. **Water Treatment Room (RDWT1)**..... **120 NSF**  
*Minimum NSF; provide an additional 30 NSF if water-softening equipment is authorized; provide an additional 30 NSF per Dialysis Station greater than ten; maximum 240 NSF if water softener is not authorized; maximum 300 NSF if water softener is authorized.*

This enclosed room accommodates the equipment and supplies, including consumable products, for all dialysis-required forms of water treatment.

**D. FA 14: Renal Dialysis Unit Staff and Administrative Area:**

- 1. **Office, Unit Chief (OFA04)** ..... **120 NSF**  
*Provide one for Renal Dialysis Unit.*

- 2. **Office, Executive Assistant (OFA04)**..... **120 NSF**  
*Provide one for Renal Dialysis Unit.*

- 3. **Sub-Waiting (WRC03)** ..... **60 NSF**  
*Provide one if Sub-Waiting for the Renal Dialysis Unit Staff and Administrative Area is authorized.*

Allocated NSF provides space for minimum of two seats plus circulation.

4. **Office, NCOIC / LCPO / LPO (OFA04)** ..... 120 NSF  
*Provide one for Renal Dialysis Unit.*
5. **Office, Nurse Manager (OFA04)** ..... 120 NSF  
*Provide one for the Renal Dialysis Unit.*
6. **Team Collaboration Room (WRCH1)** ..... 120 NSF  
*Minimum one; provide an additional one for every increment of ten Dialysis Stations greater than ten.*  
  
Allocated NSF provides space for staff collaboration with touchdown computer stations for documentation and a table with chairs.
7. **Office, Private (OFA04)** ..... 120 NSF  
*Provide one per each Renal Dialysis Unit provider and non-provider FTE position authorized to have a private office.*
8. **Office, Shared (OFA05)** ..... 120 NSF  
*Provide one for every increment of two Renal Dialysis Unit provider and non-provider FTE positions authorized to have a shared office.*
9. **Cubicle (OFA03)** ..... 60 NSF  
*Provide one per each Renal Dialysis Unit provider and non-provider FTE position authorized to have a cubicle.*  
  
These cubicles may be collocated in a shared space or dispersed as required.
10. **Conference Room (CRA01)** ..... 240 NSF  
*Minimum NSF; provide and additional 60 NSF if the total number of FTE positions authorized is greater than ten.*  
  
Planner must determine adequacy and availability of existing Conference Room space and the ability to optimize resources by sharing Conference Room space with other departments.
11. **Storage, Patient Records (MRS01)** ..... 120 NSF  
*Provide one if Patient Records Storage in the Renal Dialysis Unit Staff and Administrative Area is authorized.*  
  
The Military Health System is moving towards an integrated electronic medical record. If required, space for paper medical records for patients will be planned.
12. **Copier (RPR01)** ..... 120 NSF  
*Provide one for Renal Dialysis Unit.*  
  
This is a room for the copier/printer/scanner. It may be located directly adjacent to the reception area or in the clinic staff support area.
13. **Storage, Office Supplies (SRS01)** ..... 60 NSF  
*Provide one for Renal Dialysis Unit.*  
  
Allocated NSF provides space for office supplies, patient forms and literature.
14. **Lounge, Staff (SL001)** ..... 120 NSF  
*Minimum NSF, provide an additional 60 NSF for every increment of five Renal Dialysis provider and non-provider FTEs working on peak shift greater than ten; maximum 360 NSF.*



15. **Lockers, Personal Property (LR001)**.....**30 NSF**  
*Minimum NSF, provide an additional 3 NSF per each FTE position not assigned a private office, shared office or cubicle greater than ten.*

**10 PROGRAM DATA REQUIRED (Input Data Questions): SPECIALTY MEDICAL CLINIC: HEMATOLOGY-ONCOLOGY INFUSION CLINIC**

A. Mission Input Data Statements

1. Is a Hematology-Oncology Infusion Clinic authorized? (M)
  - a. Is a Playroom for the Hematology-Oncology Infusion Clinic Reception Area authorized? (M)
  - b. Is a Satellite Laboratory for the Hematology-Oncology Infusion Clinic authorized? (M)
  - c. Is a Hematology-Oncology Pharmacy authorized? (M)
  - d. Is Patient Records Storage for the Hematology-Oncology Infusion Clinic authorized? (M)

B. Workload Input Data Statements

- a. How many annual Chemotherapy Infusion encounters are projected? (W)

C. Staffing Input Data Statements

- a. How many Hematology-Oncology Infusion Clinic provider FTE positions are authorized? (S)
  1. How many Hematology-Oncology Infusion Clinic provider FTE positions are authorized to have a private office? (Misc)
  2. How many Hematology-Oncology Infusion Clinic provider FTE positions are authorized to have a shared office? (Misc)
  3. How many Hematology-Oncology Infusion Clinic provider FTE positions are authorized to have a cubicle? (Misc)
- b. How many Hematology-Oncology Infusion Clinic non-provider FTE positions are authorized? (S)
  1. How many Hematology-Oncology Infusion Clinic non-provider FTE positions are authorized to have a private office? (Misc)
  2. How many Hematology-Oncology Infusion Clinic non-provider FTE positions are authorized to have a shared office? (Misc)
  3. How many Hematology-Oncology Infusion Clinic non-provider FTE positions are authorized to have a cubicle? (Misc)

D. Miscellaneous Input Data Statements

- a. Is a Sub-Waiting for the Hematology-Oncology Infusion Clinic Staff and Administrative Area authorized? (Misc)
- b. How many Hematology-Oncology Infusion Clinic provider and non-provider FTEs will work on peak shift? (Misc)
- c. (13) Is Hematology-Oncology Infusion Clinic authorized to operate outside the standard 8-hour per day shift? (Misc)
  1. (14) Is Hematology-Oncology Infusion Clinic authorized to operate a 7-hour per day shift? (Misc) (If not, a 6-hour per day shift will be used to calculate workload driven spaces)
- d. (15) Is Hematology-Oncology Infusion Clinic authorized to operate outside the standard 240 days per year? (Misc)

1. (16) Is Hematology-Oncology Infusion Clinic authorized to operate 250 days per year? (Misc) (If not, 232 days per year will be used to calculate workload driven spaces)

## 11 SPACE PLANNING CRITERIA: SPECIALTY MEDICAL CLINIC: HEMATOLOGY-ONCOLOGY INFUSION CLINIC

For calculation of the number of Vending Machine areas, Public Toilets, Communication Closets, and Janitors Closets for this Chapter, please refer to DoD Space Planning Criteria Chapter 6.1: Common Areas.

### A. FA 15: Hematology-Oncology Infusion Clinic Reception Area:

1. **Waiting, Hematology-Oncology Infusion Clinic (WRC01)**..... **120 NSF**  
*Minimum NSF; provide an additional 60 NSF for every increment of four Chemotherapy Infusion Stations greater than four.*

Minimum allocated NSF accommodates three standard seats at 16 NSF plus one wheelchair space at 25 NSF and one Bariatric bench seat at 36 NSF and circulation area. Depending on the concept of operations for this chapter, waiting space across all units may be combined or dispersed.

2. **Playroom (PLAY1)** ..... **120 NSF**  
*Provide one if a Playroom for the Hematology-Oncology Infusion Clinic Reception Area is authorized.*

This space is provided to accommodate children's play activities; it shall be outfitted with appropriate furniture and accessories. It can be an open or enclosed area included in or adjacent to General Waiting.

3. **Reception (RECP1)** ..... **120 NSF**  
*Minimum NSF; provide an additional 30 NSF for every increment of twelve Chemotherapy Infusion Stations greater than twelve; maximum 240.*

Allocated NSF accommodates up to four receptionists and circulation.

4. **Kiosk, Patient Check-in (CLSC1)** ..... **30 NSF**  
*Provide one for Hematology-Oncology Infusion Clinic.*

5. **Patient Education (CLSC3)** ..... **120 NSF**  
*Provide one for Hematology-Oncology Infusion Clinic.*

Room used for one-on-one patient education and includes space for family to accompany the patient.

6. **Consult Room (OFDC2)** ..... **120 NSF**  
*Provide one for Hematology-Oncology Infusion Clinic.*

7. **Alcove, Wheelchair (SRLW1)** ..... **60 NSF**  
*Provide one for Hematology-Oncology Infusion Clinic.*

### B. FA 16: Hematology-Oncology Infusion Clinic Patient Area:

1. **Exam Room, Hematology-Oncology (EXRG1)** ..... **120 NSF**  
*Provide one for Hematology-Oncology Infusion Clinic.*

2. **Group Therapy Room (OPMH1)** ..... **240 NSF**  
*Provide one for Hematology-Oncology Infusion Clinic.*

- 3. **Chemotherapy Infusion Station (OPCT1)** .....120 NSF  
*Minimum one if the projected annual Chemotherapy Infusion encounters is between 154 and 768; provide an additional one for every increment of 768 projected annual Chemotherapy Infusion encounters greater than 768; the minimum workload to generate an additional Chemotherapy Infusion Procedure Room is 154. (Refer to Section 3)*

Planner shall allocate the total number of calculated Prep / Recovery Stations in Single-Station Rooms or in Multi-Station Rooms as needed.

- 4. **Toilet, Chemotherapy Patient (TLTU1)** .....60 NSF  
*Minimum one; provide an additional one for every increment of ten Chemotherapy Infusion Stations greater than ten.*
- 5. **Nurse Station (NSTA1)**.....120 NSF  
*Minimum NSF; provide an additional 30 NSF for every increment of ten Chemotherapy Infusion Stations greater than ten.*

The nurse station should provide visual observation of all Infusion Stations.

- 6. **Procedure Room, Hematology-Oncology (TRGM1)** .....180 NSF  
*Provide one for Hematology-Oncology Infusion Clinic.*
- 7. **Phlebotomy Station (LBVP1)**.....60 NSF  
*Provide one if a Satellite Laboratory for the Hematology-Oncology Infusion Clinic is authorized.*
- 8. **Laboratory, Hematology-Oncology Infusion Clinic Satellite (LBSP1)** .....120 NSF  
*Provide one if a Satellite Laboratory for the Hematology-Oncology Infusion Clinic is authorized.*
- 9. **Nourishment Room (NCWD1)**.....120 NSF  
*Provide one for Hematology-Oncology Infusion Clinic.*

Allocated NSF provides a hand-washing station, work counter, refrigerator, storage cabinets, drinking water-dispensing unit (separate from hand-washing station), and equipment for serving nourishments. Locate away from treatment area.

**C. FA 17: Hematology-Oncology Infusion Clinic Support Area:**

- 1. **Vestibule, Chemotherapeutics Compounding Area (PHAR1)**.....60 NSF  
*Provide one if a Hematology-Oncology Pharmacy is authorized.*
- 2. **Anteroom, Chemotherapeutics Compounding Area (PHAR1)**.....120 NSF  
*Provide one if a Hematology-Oncology Pharmacy is authorized.*

This vestibule accommodates space for Cytotoxic Storage and an Eyewash Station as part of a decentralized pharmacy in the infusion clinic for the

preparation of chemotherapy drugs and IV medications.

3. **Clean Room, Chemotherapeutics Compounding Area (PHC01)**..... 120 NSF  
*Provide one if a Hematology-Oncology Pharmacy is authorized.*

This space is part of a decentralized pharmacy in the infusion clinic that includes a compounding area, a vestibule and anteroom.

4. **Medication Room (MEDP1)** ..... 120 NSF  
*Provide one for the Hematology-Oncology Infusion Clinic Support Area.*

Allocated NSF provides space for a work counter, sink, refrigerator and locked storage for biological or drugs. Accommodates space for automated medication dispensing machine.

5. **Utility Room, Soiled (USCL1)** ..... 120 NSF  
*Minimum NSF; provide an additional 30 NSF per for every increment of ten Chemotherapy Infusion Stations greater than ten.*

Allocated NSF provides space for a handwashing station, a work counter, space for waste receptacles and soiled linen receptacles and provisions for disposal of liquid waste.

6. **Utility Room, Clean (UCCL1)**..... 120 NSF  
*Minimum NSF; provide an additional 30 NSF per for every increment of ten Chemotherapy Infusion Stations greater than ten.*

Allocated NSF includes space for a work counter, a handwashing station and storage facilities for clean and sterile supplies such as shelving and automated dispensing machines

7. **Storage, Equipment (SRSE1)** ..... 120 NSF  
*Minimum NSF; provide an additional 30 NSF per for every increment of ten Chemotherapy Infusion Stations greater than ten.*

8. **Alcove, Crash Cart (RCA01)**..... 30 NSF  
*Provide one for Hematology-Oncology Infusion Clinic.*

9. **Alcove, Blanket Warmer (RCA04)**..... 30 NSF  
*Provide one for Hematology-Oncology Infusion Clinic.*

10. **Alcove, Wheelchair (SRLW1)** ..... 60 NSF  
*Provide one for Hematology-Oncology Infusion Clinic.*

**D. FA 18: Hematology-Oncology Infusion Clinic Staff and Administrative Area:**

1. **Office, Clinic Chief (OFA04)** ..... 120 NSF  
*Provide one for Hematology-Oncology Infusion Clinic.*

2. **Office, Executive Assistant (OFA04)** ..... 120 NSF  
*Provide one for Hematology-Oncology Infusion Clinic.*

3. **Sub-Waiting (WRC03)**..... 60 NSF  
*Provide one if a Sub-Waiting for the Hematology-Oncology Infusion Clinic Staff and Administrative Area is authorized.*

Allocated NSF provides space for minimum of two seats plus circulation.

4. **Office, NCOIC / LCPO / LPO (OFA04)**.....120 NSF  
*Provide one for Hematology-Oncology Infusion Clinic.*
5. **Team Collaboration Room (WRCH1)** .....120 NSF  
*Minimum one; provide an additional one for every increment of eight Infusions Stations greater than eight.*  
  
Allocated NSF provides space for staff collaboration with touchdown computer stations for documentation and a table with chairs.
6. **Office, Private (OFA04)** .....120 NSF  
*Provide one per each Hematology-Oncology Infusion Clinic provider and non-provider FTE position authorized to have a private office.*  
  
Pharmacist, Social Worker, Tumor Registry, Clinical Trials, etc
7. **Office, Shared (OFA05)**.....120 NSF  
*Provide one for every increment of two Hematology-Oncology Infusion Clinic provider and non-provider FTE positions authorized to have a shared office.*
8. **Cubicle (OFA03)** .....60 NSF  
*Provide one per each Hematology-Oncology Infusion Clinic provider and non-provider FTE position authorized to have a cubicle.*  
  
These cubicles may be collocated in a shared space or dispersed as required.
9. **Conference Room (CRA01)** .....240 NSF  
*Minimum NSF; provide an additional 60 NSF if the total number of FTE positions authorized is greater than ten.*  
  
Planner must determine adequacy and availability of existing Conference Room space and the ability to optimize resources by sharing Conference Room space with other departments.
10. **Storage, Patient Records (MRS01)**.....120 NSF  
*Provide one if Patient Records Storage for the Hematology-Oncology Infusion Clinic is authorized.*  
  
The Military Health System is moving towards an integrated electronic medical record. If required, space for paper medical records for will be planned.
11. **Copier (RPR01)**.....120 NSF  
*Provide one for Hematology-Oncology Infusion Clinic.*  
  
Planner must determine adequacy and availability of existing Conference Room space and the ability to optimize resources by sharing Conference Room space with other departments.
12. **Storage, Office Supplies (SRS01)** .....60 NSF  
*Provide one for Hematology-Oncology Infusion Clinic.*  
  
Allocated NSF provides space for office supplies, patient forms and literature.
13. **Lounge, Staff (SL001)** .....120 NSF  
*Minimum NSF, provide an additional 60 NSF for every increment of five Hematology-Oncology Infusion Clinic FTE positions working on peak shift greater than ten; maximum 360 NSF.*

14. **Lockers, Personal Property (LR001)** ..... **30 NSF**  
*Minimum NSF, provide an additional 3 NSF per each FTE position not assigned a private office, shared office or cubicle greater than ten.*

## 12 PLANNING AND DESIGN CONSIDERATIONS

The following design considerations are intended to provide planners and designers with guidance on how to follow world-class and evidence-based design strategies for new and renovation of existing healthcare facilities. For a more comprehensive list, refer to the *World Class Checklist* (<https://facilities.health.mil/home/>). Also refer to Section 1.2 – 6, Design Considerations and Requirements of the latest version of *Guidelines for Design and Construction of Health Care Facilities of the Facility Guidelines Institute (FGI)*.

### A. Net-to-Department Gross Factor

- A. The net-to-department gross factor (NTDG) for Specialty Medical Clinics is **1.35**. This number when multiplied by the programmed net square foot (NSF) area determines the departmental gross square feet. This factor accounts for the space occupied by internal department circulation and interior partitions and other construction elements not defined by the net square foot area.

### B. Reception Areas

1. Where possible, centralized intake should be considered where multiple clinics are co-located.
2. Consider designing clinic areas such that walking distances from intake to exam are kept to a minimum.
3. Visual and auditory privacy is required at intake, vitals collection, and scheduling activities.
4. Consideration should be given to special needs of specific patient groups in a shared / general waiting area. For example, adolescent and geriatric patients may require different seating options and environments.
5. The Playroom shall be constructed of surfaces and materials that are easy to clean and durable (nonporous and smooth).

### C. Patient Areas

1. Exam rooms should be designed with dedicated patient, provider, and family zones where appropriate.
2. Patient care areas should be located near the front of the clinic to minimize patient walking distances and to maximize the “on-stage / off stage” flow.
3. Consider placing high volume, quick turn encounters near the front of the Patient Care area.
4. Provide same-handed patient care and treatment rooms where appropriate.
5. Complete visual privacy for patients in examination, treatment and procedure areas is a critical design consideration.
6. Control of sound transmission between examination, treatment and procedure rooms is a critical design consideration.
7. Consider adopting the same NSF for rooms with similar functions, such as treatment and exam rooms, to achieve standardization.
8. Provisions for bariatric patients should be included where applicable.
9. Consider efficiency of operations and a layout such that walking distances of the routes staff repeatedly take from consult room to the exam rooms, to the work areas (e.g. charting, supplies, medications), back to exam rooms are kept to a minimum.

10. Space Criteria provides Single-Station Rooms for the calculated number stations. Planner shall allocate these in double or multi-station rooms as needed.

**D. Support Areas**

1. Medication preparation areas should be enclosed to minimize distractions. A glass wall or window may be provided to observation of patients and clinic activities.

**E. Other General Design Considerations**

1. Provide flexible, standardized and modular blocks of clinic space that include dedicated zones (e.g. intake / waiting, exam room, support core, administrative core, procedure and diagnostic core, etc.)
2. Functional areas should be designed to provide flexibility in order to accommodate a variety of patient visit types and specialties. Standardized modules should be configured so that clinics can use available adjacent space as demand fluctuates from one clinic to the next.
3. Where possible, clinic modules should include internal connecting corridors to allow circulation of staff, materials and sometimes patients in off-stage areas.
4. Design for flexibility and adaptability to accommodate future expansion.
5. Clearly define patient flows and facilitate wayfinding.
6. Design space to foster effective team collaboration, especially important in innovative care delivery models like the patient-centered medical home model (PCMH). Central location of circulating corridors and visually open workstations will increase the quality and probability of unplanned interactions. Informal meeting spaces along hallways with flexibly arranged furniture and small niches with surfaces that allow stand-up work will encourage informal collaboration. Locating the team collaboration rooms and conference rooms close to individual spaces will promote problem solving.
7. Create separate paths of travel where possible between patients and staff (“on stage” and “off stage”) to support privacy, safety and patient/staff satisfaction.
8. Consider physical layouts and design features which minimize institutional and maximize non-institutional aspects in order to provide a more therapeutic healing environment that promotes quicker recovery.
9. Create welcoming environments for patients and families by reducing environmental stressors. Daylighting, window views of nature, gardens, indoor plants, and nature photography may alleviate patient anxiety, and provide positive distractions in waiting areas and treatment rooms.
10. Where possible, locate clinics proximate to public parking and the main outpatient building entry to improve access and minimize travel distance.
11. Consider convenient access to both the Outpatient Pharmacy and Lab and Diagnostic and Treatment services as needed.
12. Collocate clinics and inpatient units with the same specialty when possible.

**F. Endoscopy Suite Specific Design Considerations**

1. Determine if the GI/Endoscopy Clinic is provided in the hospital and part of Surgical Services or whether in an outpatient facility.
2. A separate endoscopy facility or section shall comply with the “New Ambulatory Health Care Occupancies” section of NFPA 101.
3. Divide the Endoscopy suite into three major areas: the procedure room(s), instrument processing room(s), and patient holding/ preparation and recovery room or area.

4. Design to facilitate movement of patients and staff into, through, and out of defined areas within the procedure suite. Provide signs at all entrances to restricted areas and clearly indicate the proper attire required.
5. In facilities with two or more procedure rooms, provide pre-procedure holding area(s) to accommodate stretcher patients and/or sitting space.
6. Pre-procedure area may be used as post-procedure area for overflow or at the end of the day.

#### **G. Renal Dialysis Unit Specific Design Considerations**

1. Consider accommodating floor digital scale for both the renal dialysis suite and the nephrology clinic so that patients in wheelchairs/stretchers can be easily weighed prior to their treatment/visit.
2. Ensure a balance between visibility and privacy in the dialysis infusion area. The nursing staff should be able to easily view the patients as they receive their treatment.
3. Consider providing exterior views from the renal dialysis unit patient area to offer patients some orientation and visual relief during their extended stays. Provision must be made to ensure that views into the patient treatment spaces are not possible from the exterior.

#### **H. Hematology-Oncology Infusion Clinic Specific Design Considerations**

1. Design the Hematology/Oncology Clinic with sensitivity to the unique needs of cancer patients and their families. More than any other patient type, cancer patients sense a loss of control over their bodies, their activities and their lives.
2. Patient treatment areas should recognize the patient's need to have personal control over the environment (temperature, lighting, music, communications such as cell phone and internet usage, and privacy).
3. Include the introduction of natural light through windows to the exterior or via a skylight, for example.
4. Provide positive distractions in the form of plants, views to nature and artwork.
5. Integrate family into the patient care setting.
6. Some patients want more interaction than others, and some want total privacy. Consider offering a mixture of private infusion stations/rooms and semi-private infusion stations. Consider grouping the infusion stations (or bays) so that there are groupings of 5 to 6 chairs that can accommodate family members.
7. Plan the Infusion Clinic Patient Area to allow visibility by staff of all patients, in both open stations and private rooms.
8. If there is a Chemotherapy Compounding Pharmacy, centrally locate this Pharmacy within the department, and adjacent to the Infusion Clinic Patient Area.
9. Apply the MHS World Class Checklist and Evidence Based Design (EBD) features as much as possible.



### 13 FUNCTIONAL RELATIONSHIPS

**TABLE 2: SPECIALTY CLINICS FUNCTIONAL RELATIONSHIP MATRIX**

Services	Relationship	Reasons
Outpatient Surgery	1, 2, 3	A, C, G, H, I
Radiology	1, 2, 3	A, G, H, I
Outpatient Laboratory	3	G, H, I
Outpatient Pharmacy	3	H, I
Infusion	1, 2, 3	H, I

**TABLE 3: ENDOSCOPY SUITE FUNCTIONAL RELATIONSHIP MATRIX**

Services	Relationship	Reasons
ICU	1, 2, 3	C, G
Patient Care Units	1, 2, 3	C, G
Emergency Department	1, 2, 3	G, H, I
Outpatient Surgery	1	A, B, C, G, I
Radiology	1, 2	C, G, I
Sterile Processing	1, 2, 3	B, C, G, I

**TABLE 4: RENAL DIALYSIS CLINIC FUNCTIONAL RELATIONSHIP MATRIX**

Services	Relationship	Reasons
Ambulatory Clinics	1, 2, 3	A, C, G, H, I
Patient Care Units	1, 2, 3	A, G, H, I
Emergency Department	3	G, H, I
Cardiovascular Labs	3	H, I
Biomedical Equipment Repair	3	B, I
Lab	3	H
Sterile Processing	3	B, I

**TABLE 5: HEMATOLOGY-ONCOLOGY INFUSION CLINIC FUNCTIONAL RELATIONSHIP MATRIX**

Services	Relationship	Reasons
Ambulatory Clinics	1, 2, 3	A, C, G, H, I
Outpatient Laboratory	1, 2, 3	A, B, C, G, H
Outpatient Pharmacy	3	H

(See Legend on following page)

Legend:

Relationship:

1. Adjacent
2. Close / Same Floor
3. Close / Different Floor Acceptable
4. Limited Traffic

Reasons:

(Use as many as appropriate)

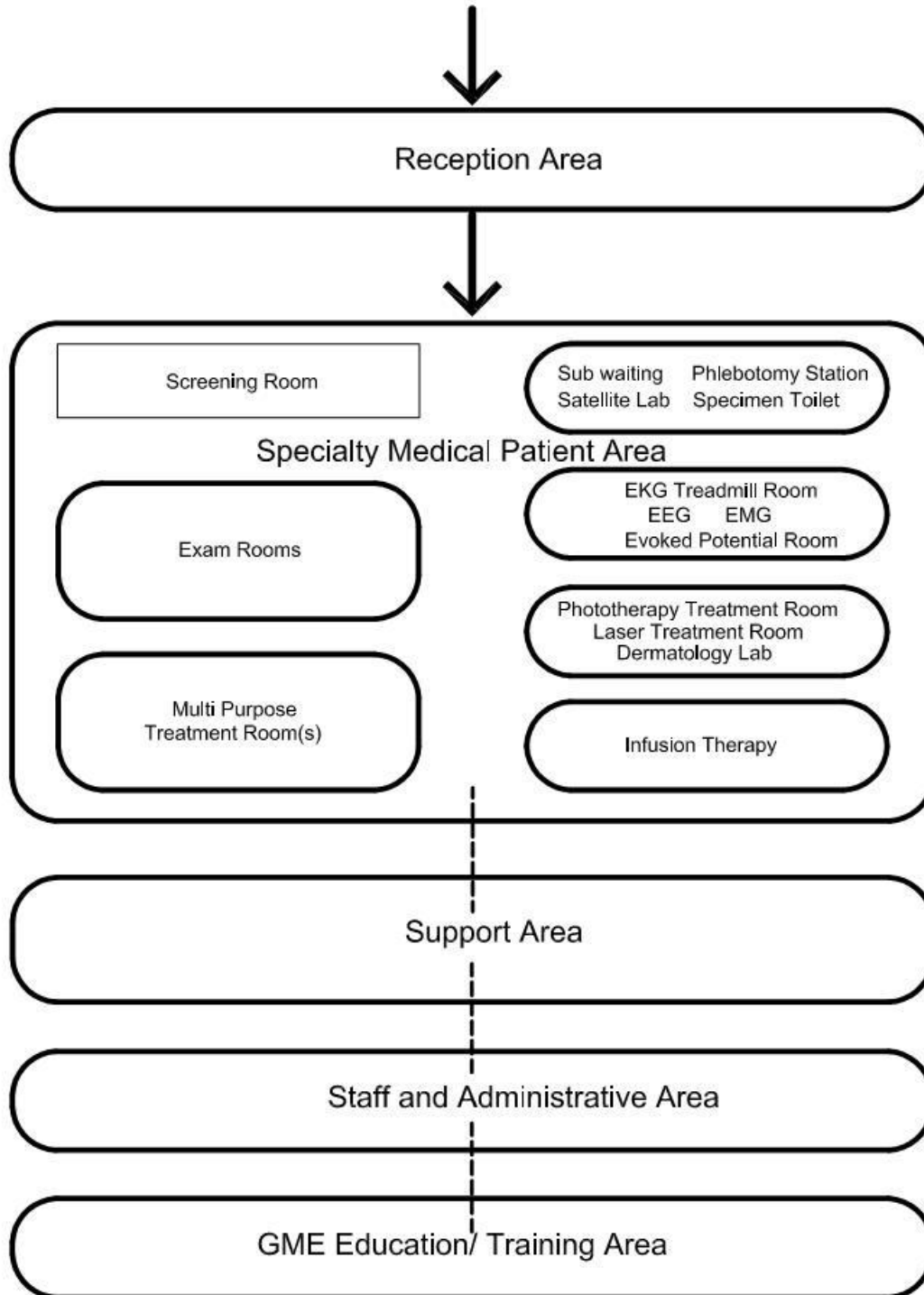
- A. Common use of resources
- B. Accessibility of supplies
- C. Urgency of contact
- D. Noise or vibration
- E. Presence of odors or fumes
- F. Contamination hazard
- G. Sequence of work
- H. Patient's convenience
- I. Frequent contact
- J. Need for security
- K. Others (specify)

## 14 FUNCTIONAL DIAGRAM

Functional Diagrams show the relationship of each functional area to the whole department. In some instances it shows important spaces within a functional area and how staff and patients may flow through the department. This diagram is not intended to serve as a "bubble diagram" that the planner / designer will create for an individual project. Size and shapes of spaces do not reflect actual configuration or square footage of spaces / rooms.

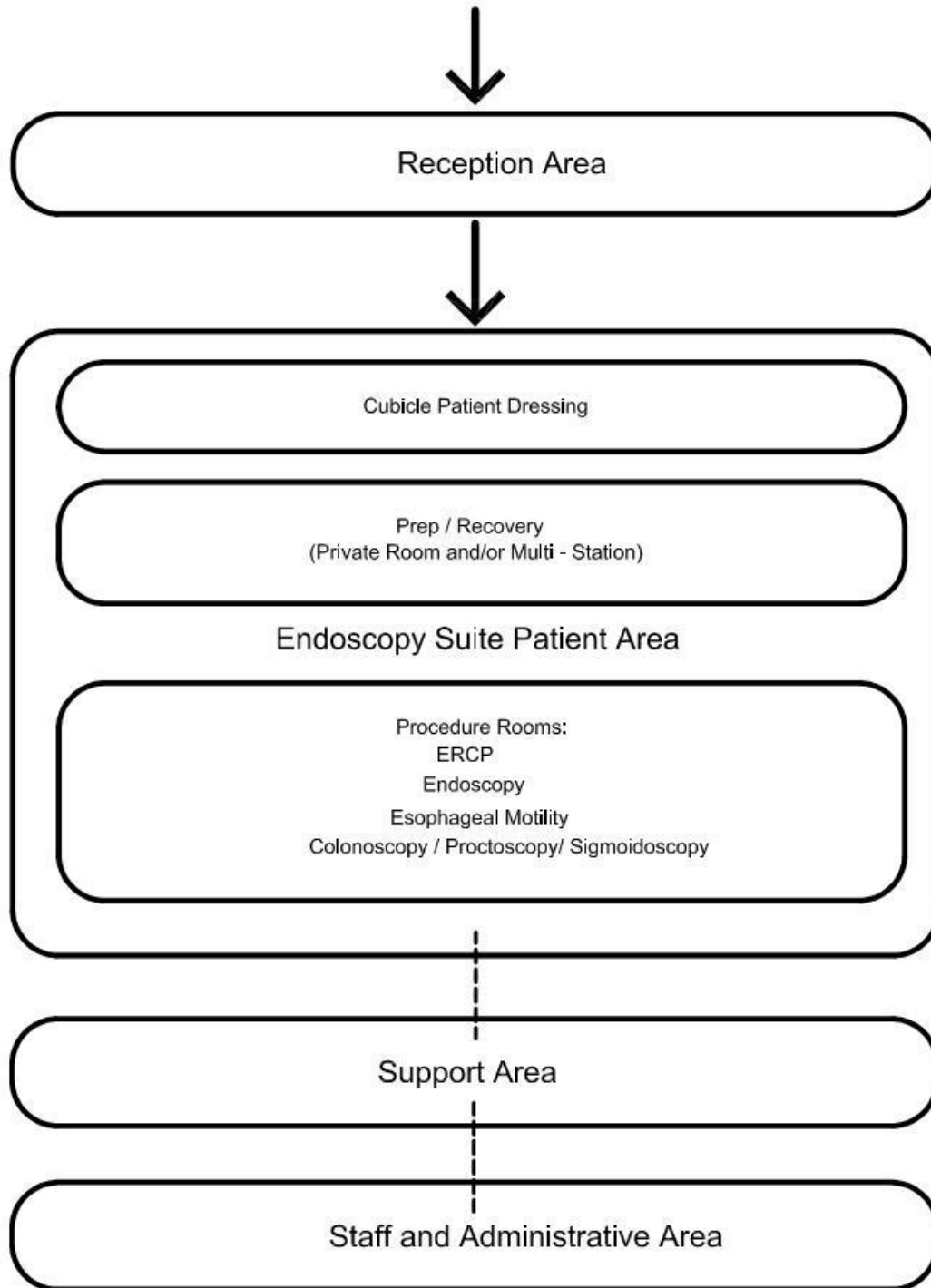
Refer to Functional Diagram(s) on next page(s)

14 FUNCTIONAL DIAGRAM SPECIALTY MEDICAL CLINICS



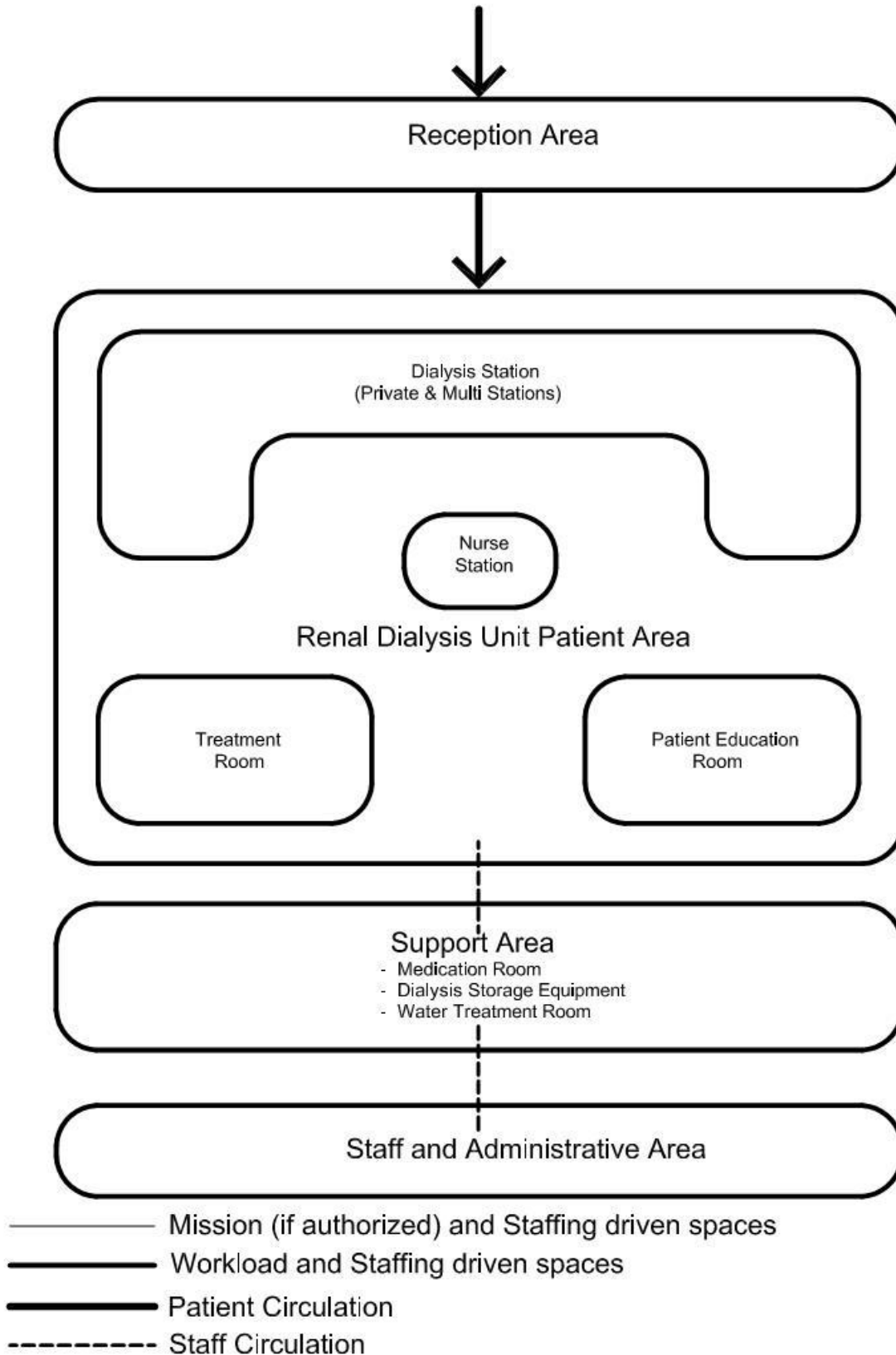
- Mission (if authorized) and Staffing driven spaces
- Workload and Staffing driven spaces
- Patient Circulation
- Staff Circulation

### 15 FUNCTIONAL DIAGRAM ENDOSCOPY SUITE

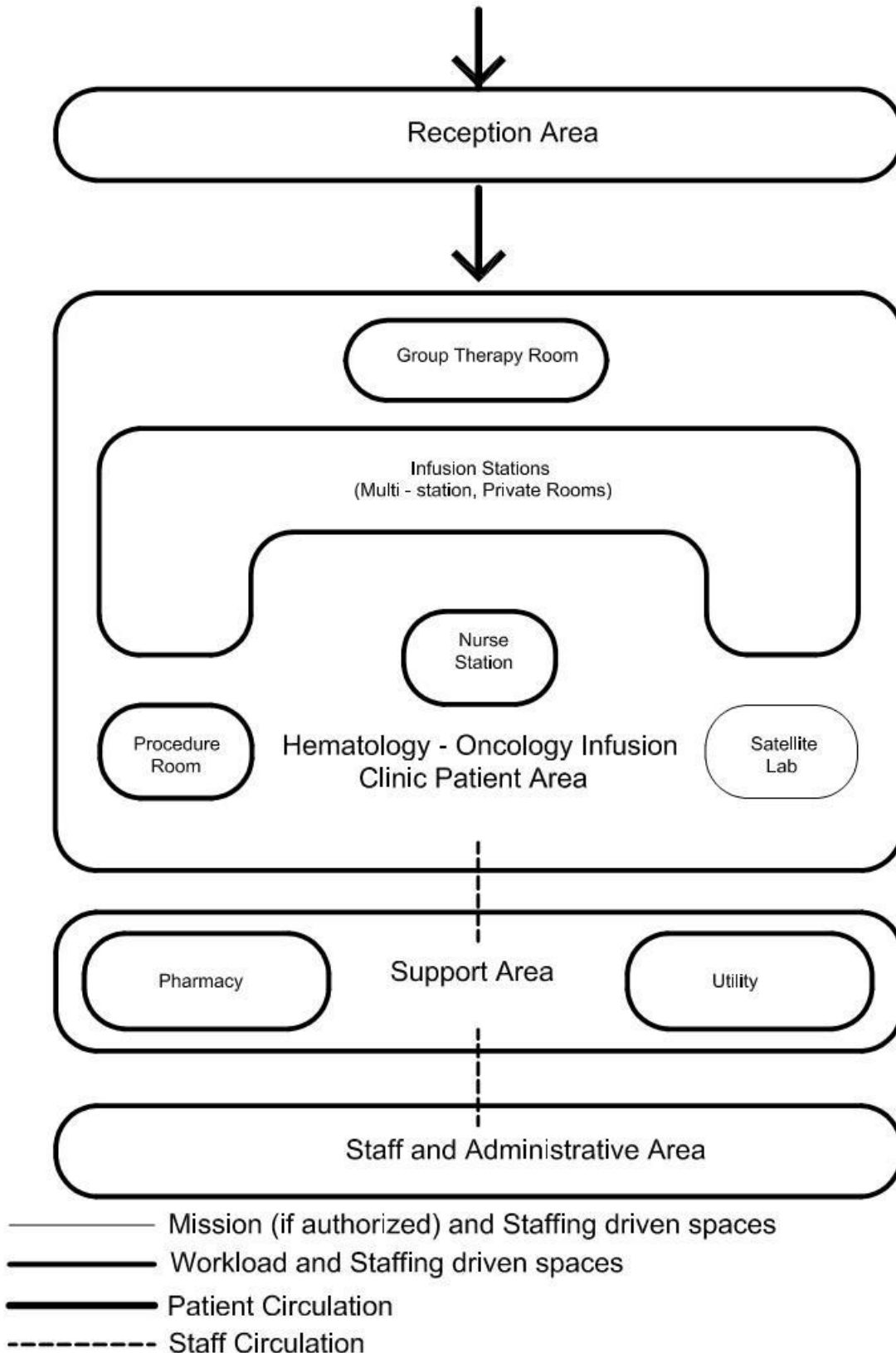


- Mission (if authorized) and Staffing driven spaces
- Workload and Staffing driven spaces
- Patient Circulation
- - - Staff Circulation

### 16 FUNCTIONAL DIAGRAM RENAL DIALYSIS UNIT



### 17 FUNCTIONAL DIAGRAM HEMATOLOGY-ONCOLOGY INFUSION CLINIC



**18 Appendix A: SPACE PLANNING CRITERIA SUMMARY**

**FA 1:Exam Room Calculation:**

Room Name	Room Code	NSF	Space Criteria
Number of Exam Rooms	CALC1	0	Provide one for every increment of 2,048 projected annual Dermatology, Endocrinology, Gastroenterology, Hematology-Oncology, Infectious Disease, Internal Medicine, Nephrology, Neurology, and Rheumatology encounters; the minimum workload to generate a room is 410. (Refer to Table 1)

**FA 2:Specialty Medical Clinics Reception Area:**

Room Name	Room Code	NSF	Space Criteria
Waiting, Specialty Medical Clinics	WRC01	120	Minimum NSF; provide an additional 60 NSF for every increment of four General, Negative Pressure and Bariatric Exam Rooms greater than four.
Playroom	PLAY1	120	Provide one for Specialty Medical Clinics.
Reception	RECP1	120	Minimum NSF; provide an additional 30 NSF for every increment of twelve General, Negative Pressure and Bariatric Exam Rooms greater than twelve; maximum 240.
Kiosk, Patient Check-in	CLSC1	30	Provide one for Specialty Medical Clinics.
Patient Education	CLSC3	120	Provide one for Specialty Medical Clinics.
Consult Room	OFDC2	120	Provide one for Specialty Medical Clinics.
Alcove, Wheelchair	SRLW1	60	Provide one for Specialty Medical Clinics.

**FA3: Specialty Medical Clinics Patient Area:**

Room Name	Room Code	NSF	Space Criteria
Screening Room	EXRG4	120	Minimum one; provide an additional one for every increment of eight General, Negative Pressure and Bariatric Exam Rooms greater than eight if Screening Rooms are authorized.
Alcove, Height / Weight	EXR11	60	Minimum one; provide an additional one for every increment of eight General, Negative Pressure and Bariatric Exam Rooms greater than eight if Screening Rooms are not authorized.
Toilet, Patient	TLTU1	60	Minimum one; provide an additional one for every increment of ten General, Negative Pressure and Bariatric Exam Rooms greater than ten.
Exam Room / Consult	EXR10	120	Minimum one; provide an additional one for every increment of sixteen General, Negative Pressure and Bariatric Exam Rooms greater than sixteen.
Exam Room, Telehealth	WKTM2	120	Provide one for Specialty Medical Patient Area.
Exam Room, General	EXRG1	120	Calculate the number of Exam Rooms (FA 1, Room 1); minimum one, provide an additional one per each calculated Exam Room; deduct the Isolation Negative Pressure, Bariatric and Telehealth Exam Rooms. (Refer to Table 1)
Exam Room, Negative Pressure Isolation	EXRG6	120	Minimum one if three Exam Rooms or greater are generated (by workload); provide an additional one if authorized per the Infection Control Risk Assessment (ICRA).
Toilet, Isolation Patient	TLTU1	60	Provide one per each Negative Pressure Isolation Exam Room.
Exam Room, Bariatric	EXB01	120	Provide one if a Bariatric Exam Room is authorized for Specialty Medical Patient Area.
Toilet, Bariatric Patient	TLTB1	60	Provide one for the Bariatric Exam Room.



Sub-Waiting, Satellite Laboratory	WRC03	60	Provide one if a Satellite Laboratory is authorized.
Phlebotomy Station	LBVP1	120	Provide one if a Satellite Laboratory is authorized.
Laboratory, Satellite	LBSP1	120	Provide one if a Satellite Laboratory and a Laboratory Technician FTE position is authorized.
Toilet, Specimen	TLTU1	60	Provide one if a Satellite Laboratory is authorized.
Observation / IV Hydration Room	OOHR1	120	Minimum one; provide an additional one for every increment of twelve General, Negative Pressure and Bariatric Exam Rooms greater than twelve.
Infusion Therapy Station	OPCT1	120	Provide one for every increment of 307 projected annual Dermatology, Endocrinology, Internal Medicine, Neurology, and Rheumatology Infusion encounters; the minimum annual workload to generate a room is 61. (Refer to Table 1)
Nurse Station	NSTA1	120	Minimum NSF; provide an additional 60 NSF for every increment of six Infusion Therapy Stations greater than six.
Sub-Waiting, Pre-Procedure	WRC03	60	Minimum NSF; provide an additional 60 NSF for every increment of three Multipurpose, Phototherapy / Dermatology, and Laser Treatment Rooms greater than three.
Sub-Waiting, Post-Procedure	WRC03	60	Minimum NSF; provide an additional 60 NSF for every increment of three Multipurpose, Phototherapy / Dermatology, and Laser Treatment Rooms greater than three.
Cubicle, Patient Dressing	DR001	60	Provide one for every increment of two Multipurpose, Phototherapy / Dermatology, and Laser Treatment Rooms.
Nurse Station	NSTA1	120	Provide one for the Specialty Medical Clinics Patient Area.

Treatment Room, Multipurpose	TRGM1	180	Minimum one; provide an additional one for every increment of ten General, Negative Pressure Isolation and Bariatric Exam Rooms greater than ten.
Toilet, Treatment Patient	TLTU1	60	Minimum one; provide an additional one for every increment of four Multipurpose Treatment Rooms greater than four.
Treatment Room, Phototherapy / Dermatology	OPDU1	180	Provide one for Specialty Medical Patient Area.
Shower, Phototherapy / Dermatology Patient	TLTS2	60	Provide one for Specialty Medical Patient Area.
Treatment Room, Laser	TRGS3	180	Provide one for Specialty Medical Patient Area.
Treadmill Room	OPTM1	180	Provide one if a Cardiology Clinic in the MTF is not available.
EKG Room	OPEC1	120	Minimum one; provide an additional one for every increment of 6,144 projected annual EKG encounters greater than 6,144; the minimum workload to generate a room is 1,229. (Refer to Table 1)
Electroencephalography (EEG) Room	OPEE1	120	Minimum one; provide an additional one for every increment of 1,024 projected annual Electroencephalography (EEG) encounters greater than 1,024; the minimum workload to generate a room is 205. (Refer to Table 1)
Electromyography (EMG) Room	PTEM1	120	Minimum one; provide an additional one for every increment of 1,024 projected annual Electromyography (EMG) encounters greater than 1,024; the minimum workload to generate a room is 205. (Refer to Table 1)
Evoked Potential Room	EVPR1	120	Minimum one; provide an additional one for every increment of 1,536 projected annual Evoked Potential encounters greater than 1,536; the minimum workload to generate a room is 307. (Refer to Table 1)

Laboratory, Dermatology	LBDE1	120	Provide one if a Dermatology Laboratory is authorized.
Alcove, Portable Imaging	XRMO1	30	Provide one for Specialty Medical Patient Area.

**FA4:Specialty Medical Clinics Support Area:**

Room Name	Room Code	NSF	Space Criteria
Medication Room	MEDP1	120	Provide one for the Specialty Medical Clinics Support Area.
Utility Room, Soiled	USCL1	120	Minimum NSF; provide an additional 30 NSF for every increment of eight General, Negative Pressure Isolation and Bariatric Exam Rooms, Infusion Therapy Stations, EKG, Electroencephalography (EEG), Electromyography (EMG), and Evoked Potential Rooms greater than eight.
Utility Room, Clean	UCCL1	120	Minimum NSF; provide an additional 30 NSF for every increment of eight General, Negative Pressure Isolation and Bariatric Exam Rooms, Infusion Therapy Stations, EKG, Electroencephalography (EEG), Electromyography (EMG), and Evoked Potential Rooms greater than eight.
Storage, Equipment	SRSE1	120	Minimum NSF; provide an additional 30 NSF for every increment of eight General, Negative Pressure Isolation and Bariatric Exam Rooms, Infusion Therapy Stations, EKG, Electroencephalography (EEG), Electromyography (EMG), and Evoked Potential Rooms greater than eight.
Alcove, Crash Cart	RCA01	30	Minimum one; provide an additional one for every increment of sixteen General, Negative Pressure Isolation and Bariatric Exam Rooms, Infusion Therapy Stations, EKG, Electroencephalography (EEG), Electromyography (EMG), and Evoked Potential Rooms greater

			than sixteen.
Alcove, Wheelchair	SRLW1	60	Minimum one; provide an additional one for every increment of sixteen General, Negative Pressure Isolation and Bariatric Exam Rooms, Infusion Therapy Stations, EKG, Electroencephalography (EEG), Electromyography (EMG), and Evoked Potential Rooms greater than sixteen.

**FA5: Specialty Medical Clinics Staff and Administrative Area:**

Room Name	Room Code	NSF	Space Criteria
Office, Clinic Chief	OFA04	120	Provide one for Specialty Medical Clinics.
Office, Executive Assistant	OFA04	120	Provide one for Specialty Medical Clinics.
Sub-Waiting	WRC03	60	Provide one if a Sub-Waiting for Specialty Medical Clinics Staff and Administrative Area is authorized.
Office, NCOIC / LCPO / LPO	OFA04	120	Provide one for Specialty Medical Clinics.
Team Collaboration Room	WRCH1	120	Minimum one; provide an additional one for every increment of eight General Exam Rooms, Infusion Therapy Stations, EKG, Electroencephalography, Electromyography, and Evoked Potential Rooms greater than eight.
Office, Private	OFA04	120	Provide one per each Specialty Medical Clinics provider and non-provider FTE position authorized to have a private office.
Office, Shared	OFA05	120	Provide one for every increment of two Specialty Medical Clinics provider and non-provider FTE positions authorized to have a shared office.

Cubicle	OFA03	60	Provide one per each Specialty Medical Clinics provider and non-provider FTE position authorized to have a cubicle.
Conference Room	CRA01	240	Minimum NSF; provide an additional 60 NSF if the total number of FTE provider and non provider positions authorized is greater than ten.
Storage, Patient Records	MRS01	120	Provide one if Patient Records storage in the Specialty Medical Clinics Staff and Administrative area is authorized.
Copier	RPR01	120	Provide one for Specialty Medical Clinics.
Storage, Office Supplies	SRS01	60	Provide one for Specialty Medical Clinics.
Lounge, Staff	SL001	120	Minimum NSF, provide an additional 60 NSF for every increment of five Specialty Medical Clinics provider and non-provider FTEs working on peak shift greater than ten; maximum 360 NSF.
Lockers, Personal Property	LR001	30	Minimum NSF, provide an additional 3 NSF per each FTE position not assigned a private office, shared office or cubicle greater than ten.

**FA6: Specialty Medical Clinics GME Education / Training Area:**

Room Name	Room Code	NSF	Space Criteria
Office, Residency Program Director	OFA04	120	Provide one if a Dermatology, Endocrinology, Gastroenterology, Hematology-Oncology, Infectious Disease, Internal Medicine, Nephrology, Neurology or Rheumatology Graduate Medical Education program for Specialty Medical Clinics is authorized.

Resident Collaboration Room	WKTM1	240	Minimum NSF; provide an additional 60 NSF per each Dermatology, Endocrinology, Gastroenterology, Hematology-Oncology, Infectious Disease, Internal Medicine, Nephrology, Neurology or Rheumatology Resident / Student FTE position authorized greater than two if a Dermatology, Endocrinology, Gastroenterology, Hematology-Oncology, Infectious Disease, Internal Medicine, Nephrology, Neurology or Rheumatology Graduate Medical Education program for Specialty Medical Clinics is authorized.
Classroom / Conference Room	CLR01	240	Provide one if the total number of Dermatology, Endocrinology, Gastroenterology, Hematology-Oncology, Infectious Disease, Internal Medicine, Nephrology, Neurology and Rheumatology Resident / Student FTE positions is greater than five if a Dermatology, Endocrinology, Gastroenterology, Hematology-Oncology, Infectious Disease, Internal Medicine, Nephrology, Neurology or Rheumatology Graduate Medical Education program for Specialty Medical Clinics is authorized.

**FA7: Endoscopy Suite Reception Area:**

Room Name	Room Code	NSF	Space Criteria
Waiting, Endoscopy Suite	WRC01	120	Minimum NSF; provide an additional 60 NSF for every increment of four Endoscopy, Colonoscopy / Proctoscopy / Sigmoidoscopy, ERCP, and Esophageal Motility Procedure Rooms greater than four.
Playroom	PLAY1	120	Provide one if a Playroom for the Endoscopy Suite Reception Area is authorized.

			Minimum NSF; provide an additional 30 NSF for every increment of twelve Endoscopy, Colonoscopy / Proctoscopy / Sigmoidoscopy, ERCP, and Esophageal Motility Procedure Rooms greater than twelve; maximum 240 NSF.
Reception	RECP1	120	
Kiosk, Patient Check-in	CLSC1	30	Provide one for Endoscopy Suite.
Patient Education	CLSC3	120	Provide one for Endoscopy Suite.
Consult Room	OFDC2	120	Provide one for Endoscopy Suite.
Alcove, Wheelchair	SRLW1	60	Provide one for Endoscopy Suite.

**FA8: Endoscopy Suite Patient Area:**

Room Name	Room Code	NSF	Space Criteria
Cubicle, Patient Dressing	DR001	60	Minimum one; provide an additional one for every increment of two Endoscopy, Colonoscopy / Proctoscopy / Sigmoidoscopy, ERCP, and Esophageal Motility Procedure Rooms greater than two if use of Patient Dressing Cubicles is authorized.
Prep / Recovery Station	RROP1	120	Minimum two; provide an additional two per each Endoscopy, Colonoscopy / Proctoscopy / Sigmoidoscopy, ERCP, and Esophageal Motility Procedure Room.
Prep / Recovery, Negative Pressure Isolation Room	RRIR1	120	Provide one for Endoscopy Suite Patient Area.
Toilet, Prep / Recovery Patient	TLTU1	60	Minimum one; provide an additional one for every increment of eight Prep / Recovery Patient Rooms and Stations greater than eight.
Nurse Station	NSTA1	120	Minimum NSF; provide an additional 60 NSF for every increment of twelve Endoscopy, Colonoscopy / Proctoscopy / Sigmoidoscopy, ERCP, and Esophageal Motility Procedure Rooms greater than twelve.
Exam Room / Consult, Gastroenterology	EXR10	120	Provide one for Endoscopy Suite Patient Area.

Procedure Room, Endoscopy	TREE1	300	Minimum one; provide an additional one for every increment of 1,843 projected annual Endoscopy Procedures greater than 1,843; the minimum workload to generate a room is 369. (Refer to Table 1)
Procedure Room, Colonoscopy / Proctoscopy / Sigmoidoscopy	TRPE1	300	Minimum one; provide an additional one for every increment of 1,536 projected annual Colonoscopy / Proctoscopy / Sigmoidoscopy Procedures greater than 1,536; the minimum workload to generate a room is 307. (Refer to Table 1)
Procedure Room, ERCP	XDCY1	480	Minimum one; provide an additional one for every increment of 768 projected annual ERCP Procedures greater than 768; the minimum workload to generate a room is 154. (Refer to Table 1)
Control Room, ERCP	XACR1	120	Minimum one; provide an additional one for every increment of two ERCP Procedure Rooms greater than two.
Procedure Room, Esophageal Motility	XDRF1	300	Minimum one; provide an additional one for every increment of 2,048 projected annual Esophageal Motility Procedures greater than 2,048; the minimum workload to generate a room is 410. (Refer to Table 1)
Nourishment Room	NCWD1	120	Provide one for Endoscopy Suite Patient Area.
Alcove, Portable Imaging	XRM01	30	Provide one for Endoscopy Suite Patient Area.

**FA9: Endoscopy Suite Support Area:**

Room Name	Room Code	NSF	Space Criteria
Medication Room	MEDP1	120	Provide one for Endoscopy Suite Support Area.
Utility, Soiled Scope Wash	USCL2	120	Provide one for Endoscopy Suite Support Area.
Utility, Clean Scope Wash	UCCL2	120	Provide one for Endoscopy Suite Support Area.



Utility Room, Soiled	USCL1	120	Minimum NSF; provide an additional 30 NSF for every increment of ten Endoscopy, Colonoscopy / Proctoscopy / Sigmoidoscopy, ERCP, and Esophageal Motility Procedure Rooms greater than ten.
Utility Room, Clean	UCCL1	120	Minimum NSF; provide an additional 30 NSF for every increment of ten Endoscopy, Colonoscopy / Proctoscopy / Sigmoidoscopy, ERCP, and Esophageal Motility Procedure Rooms greater than ten.
Storage, Stretcher	SRLW1	60	Provide one for Endoscopy Suite Support Area.
Alcove, Crash Cart	RCA01	30	Provide one for Endoscopy Suite Support Area.
Alcove, Blanket Warmer	RCA04	30	Provide one for Endoscopy Suite Support Area.
Laboratory, Gastroenterology	LBSP1	120	Provide one if a Gastroenterology Laboratory is authorized.

**FA10: Endoscopy Suite Staff and Administrative Area:**

Room Name	Room Code	NSF	Space Criteria
Office, Clinic Chief	OFA04	120	Provide one for Endoscopy Suite.
Office, Executive Assistant	OFA04	120	Provide one for Endoscopy Suite.
Sub-Waiting	WRC03	60	Provide one if a Sub-Waiting for the Endoscopy Suite Staff and Administrative Area is authorized.
Office, NCOIC / LCPO / LPO	OFA04	120	Provide one for Endoscopy Suite.
Team Collaboration Room	WRCH1	120	Minimum one; provide an additional one for every increment of eight Endoscopy, Colonoscopy / Proctoscopy / Sigmoidoscopy, ERCP and Esophageal Motility Procedure Rooms greater than eight.
Office, Private	OFA04	120	Provide one per each Endoscopy Suite provider and non-provider FTE position authorized to have a private office.

Office, Shared	OFA05	120	Provide one for every increment of two Endoscopy Suite provider and non-provider FTE positions authorized to have a shared office.
Cubicle	OFA03	60	Provide one per each Endoscopy Suite provider and non-provider FTE position authorized to have a cubicle.
Conference Room	CRA01	240	Minimum NSF; provide an additional 60 NSF if the total number of FTE positions authorized is greater than ten.
Storage, Patient Records	MRS01	120	Provide one if Patient Records Storage in the Endoscopy Suite is authorized.
Copier	RPR01	120	Provide one for Endoscopy Suite.
Storage, Office Supplies	SRS01	60	Provide one for Endoscopy Suite.
Lounge, Staff	SL001	120	Minimum NSF, provide an additional 60 NSF for every increment of five provider and non-provider Endoscopy Suite FTEs working on peak shift greater than ten; maximum 360 NSF.
Locker / Changing Room, Male Staff	LR002	120	Minimum NSF if total number of Endoscopy FTE provider and non-provider positions authorized is between five and thirteen; provide an additional 6 NSF per each Endoscopy FTE provider and non-provider position authorized greater than thirteen.
Locker / Changing Room, Female Staff	LR002	120	Minimum NSF if total number of Endoscopy FTE provider and non-provider positions authorized is between five and thirteen; provide an additional 6 NSF per each Endoscopy FTE provider and non-provider position authorized greater than thirteen.
Toilet / Shower, Male Staff	TLTS1	60	Minimum one if the total number of Endoscopy FTE provider and non-provider positions authorized is between five and thirteen; provide an additional one for every increment of ten Endoscopy FTE provider and non-provider positions authorized greater than thirteen.

Toilet / Shower, Female Staff	TLTS1	60	Minimum one if the total number of Endoscopy FTE provider and non-provider positions authorized is between five and thirteen; provide an additional one for every increment of ten Endoscopy FTE provider and non-provider positions authorized greater than thirteen.
Lockers, Personal Property	LR001	30	Minimum NSF, provide an additional 3 NSF per each FTE position not assigned a private office, shared office or cubicle greater than ten.

**FA11: Renal Dialysis Unit Reception Area:**

Room Name	Room Code	NSF	Space Criteria
Waiting, Renal Dialysis Unit	WRC01	120	Minimum NSF; provide an additional 60 NSF for every increment of four Dialysis Stations, and Negative Pressure Dialysis Isolation Rooms greater than four.
Playroom	PLAY1	120	Provide one if a Playroom for the Renal Dialysis Unit Reception Area is authorized.
Reception	RECP1	120	Provide one for Renal Dialysis Unit.
Kiosk, Patient Check-in	CLSC1	30	Provide one for Renal Dialysis Unit.
Patient Education	CLSC3	120	Provide one for Renal Dialysis Unit.
Consult Room	OFDC2	120	Provide one for Renal Dialysis Unit.
Alcove, Wheelchair	SRLW1	60	Provide one for Renal Dialysis Unit.

**FA12: Renal Dialysis Unit Patient Area:**

Room Name	Room Code	NSF	Space Criteria
Renal Dialysis Station	RDC01	120	Minimum one; provide an additional one for every increment of 307 projected annual Dialysis Station Encounters greater than 307; the minimum annual workload to generate a room is 61; deduct the Isolation Negative Pressure Dialysis Station. (Refer to Table 1)
Toilet, Dialysis Patient	TLTU1	60	Provide two for the Renal Dialysis Unit Patient Area.
Dialysis Station, Isolation Negative Pressure	RDC02	120	Provide one for the Renal Dialysis Unit Patient Area.

Toilet, Isolation Patient	TLTU1	60	Provide one for the Renal Dialysis Unit Patient Area.
Exam Room	EXRG1	120	Provide one for the Renal Dialysis Unit Patient Area.
Treatment Room	TRGM1	180	Provide one for the Renal Dialysis Unit Patient Area.
Patient Education Room	CLSC3	120	Provide one for the Renal Dialysis Unit Patient Area.
Nurse Station	NSTA1	120	Minimum NSF; provide an additional 30 NSF for every increment of ten Dialysis Rooms and Stations greater than ten.
Nourishment Room	NCWD1	120	Provide one for the Renal Dialysis Unit Patient Area.

**FA13: Renal Dialysis Unit Support Area:**

Room Name	Room Code	NSF	Space Criteria
Medication Room	MEDP1	120	Provide one for the Renal Dialysis Unit Support Area.
Utility Room, Soiled	USCL1	120	Minimum NSF; provide an additional 30 NSF for every increment of ten Dialysis Stations greater than ten.
Utility Room, Clean	UCCL1	120	Minimum NSF; provide an additional 30 NSF for every increment of ten Dialysis Stations greater than ten.
Storage, Dialysis Equipment	RDP01	120	Minimum NSF; provide an additional 30 NSF for every increment of ten Dialysis Stations greater than ten.
Alcove, Crash Cart	RCA01	30	Provide one for the Renal Dialysis Unit Patient Area.
Alcove, Blanket Warmer	RCA04	30	Provide one for the Renal Dialysis Unit Patient Area.
Alcove, Wheelchair	SRLW1	60	Minimum one; provide an additional one for every increment of ten Dialysis Stations greater than ten.

Water Treatment Room	RDWT1	120	Minimum NSF; provide an additional 30 NSF if water-softening equipment is authorized; provide an additional 30 NSF per Dialysis Station greater than ten; maximum 240 NSF if water softener is not authorized; maximum 300 NSF if water softener is authorized.
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**FA14: Renal Dialysis Unit Staff and Administrative Area:**

Room Name	Room Code	NSF	Space Criteria
Office, Unit Chief	OFA04	120	Provide one for Renal Dialysis Unit.
Office, Executive Assistant	OFA04	120	Provide one for Renal Dialysis Unit.
Sub-Waiting	WRC03	60	Provide one if Sub-Waiting for the Renal Dialysis Unit Staff and Administrative Area is authorized.
Office, NCOIC / LCPO / LPO	OFA04	120	Provide one for Renal Dialysis Unit.
Office, Nurse Manager	OFA04	120	Provide one for the Renal Dialysis Unit.
Team Collaboration Room	WRCH1	120	Minimum one; provide an additional one for every increment of ten Dialysis Stations greater than ten.
Office, Private	OFA04	120	Provide one per each Renal Dialysis Unit provider and non-provider FTE position authorized to have a private office.
Office, Shared	OFA05	120	Provide one for every increment of two Renal Dialysis Unit provider and non-provider FTE positions authorized to have a shared office.
Cubicle	OFA03	60	Provide one per each Renal Dialysis Unit provider and non-provider FTE position authorized to have a cubicle.
Conference Room	CRA01	240	Minimum NSF; provide and additional 60 NSF if the total number of FTE positions authorized is greater than ten.
Storage, Patient Records	MRS01	120	Provide one if Patient Records Storage in the Renal Dialysis Unit Staff and Administrative Area is authorized.
Copier	RPR01	120	Provide one for Renal Dialysis Unit.

Storage, Office Supplies	SRS01	60	Provide one for Renal Dialysis Unit.
Lounge, Staff	SL001	120	Minimum NSF, provide an additional 60 NSF for every increment of five Renal Dialysis provider and non-provider FTEs working on peak shift greater than ten; maximum 360 NSF.
Lockers, Personal Property	LR001	30	Minimum NSF, provide an additional 3 NSF per each FTE position not assigned a private office, shared office or cubicle greater than ten.

**FA15: Hematology-Oncology Infusion Clinic Reception Area:**

Room Name	Room Code	NSF	Space Criteria
Waiting, Hematology-Oncology Infusion Clinic	WRC01	120	Minimum NSF; provide an additional 60 NSF for every increment of four Chemotherapy Infusion Stations greater than four.
Playroom	PLAY1	120	Provide one if a Playroom for the Hematology-Oncology Infusion Clinic Reception Area is authorized.
Reception	RECP1	120	Minimum NSF; provide an additional 30 NSF for every increment of twelve Chemotherapy Infusion Stations greater than twelve; maximum 240.
Kiosk, Patient Check-in	CLSC1	30	Provide one for Hematology-Oncology Infusion Clinic.
Patient Education	CLSC3	120	Provide one for Hematology-Oncology Infusion Clinic.
Consult Room	OFDC2	120	Provide one for Hematology-Oncology Infusion Clinic.
Alcove, Wheelchair	SRLW1	60	Provide one for Hematology-Oncology Infusion Clinic.

**FA16: Hematology-Oncology Infusion Clinic Patient Area:**

Room Name	Room Code	NSF	Space Criteria
Exam Room, Hematology-Oncology Infusion Clinic	EXRG1	120	Provide one for Hematology-Oncology Infusion Clinic.
Group Therapy Room	OPMH1	240	Provide one for Hematology-Oncology Infusion Clinic.

Chemotherapy Infusion Station	OPCT1	120	Minimum one; provide an additional one for every increment of 768 projected annual Chemotherapy Infusion Encounters greater than 768; the minimum annual workload to generate a room is 154. (Refer to Table 1)
Toilet, Chemotherapy Patient	TLTU1	60	Minimum one; provide an additional one for every increment of ten Chemotherapy Infusion Stations greater than ten.
Nurse Station	NSTA1	120	Minimum NSF; provide an additional 30 NSF for every increment of ten Chemotherapy Infusion Stations greater than ten.
Procedure Room, Hematology-Oncology Infusion Clinic Patient	TRGM1	180	Provide one for Hematology-Oncology Infusion Clinic.
Phlebotomy Station	LBVP1	60	Provide one if a Satellite Laboratory for the Hematology-Oncology Infusion Clinic is authorized.
Laboratory, Hematology-Oncology Infusion Clinic Satellite	LBSP1	120	Provide one if a Satellite Laboratory for the Hematology-Oncology Infusion Clinic is authorized.
Nourishment Room	NCWD1	120	Provide one for Hematology-Oncology Infusion Clinic.

**FA17: Hematology-Oncology Infusion Clinic Support Area:**

Room Name	Room Code	NSF	Space Criteria
Vestibule, Chemotherapeutics Compounding Area	PHAR1 NEW RC	60	Provide one if a Hematology-Oncology Pharmacy is authorized.
Anteroom, Chemotherapeutics Compounding Area	PHAR1	120	Provide one if a Hematology-Oncology Pharmacy is authorized.
Clean Room, Chemotherapeutics Compounding Area	PHC01 New RC	120	Provide one if a Hematology-Oncology Pharmacy is authorized.
Medication Room	MEDP1	120	Provide one for the Hematology-Oncology Infusion Clinic Support Area.

Utility Room, Soiled	USCL1	120	Minimum NSF; provide an additional 30 NSF per for every increment of ten Chemotherapy Infusion Stations greater than ten.
Utility Room, Clean	UCCL1	120	Minimum NSF; provide an additional 30 NSF per for every increment of ten Chemotherapy Infusion Stations greater than ten.
Storage, Equipment	SRSE1	120	Minimum NSF; provide an additional 30 NSF per for every increment of ten Chemotherapy Infusion Stations greater than ten.
Alcove, Crash Cart	RCA01	30	Provide one for Hematology-Oncology Infusion Clinic.
Alcove, Blanket Warmer	RCA04	30	Provide one for Hematology-Oncology Infusion Clinic.
Alcove, Wheelchair	SRLW1	60	Provide one for Hematology-Oncology Infusion Clinic.

**FA18: Hematology-Oncology Infusion Clinic Staff and Administrative Area:**

Room Name	Room Code	NSF	Space Criteria
Office, Clinic Chief	OFA04	120	Provide one for Hematology-Oncology Infusion Clinic.
Office, Executive Assistant	OFA04	120	Provide one for Hematology-Oncology Infusion Clinic.
Sub-Waiting	WRC03	60	Provide one if a Sub-Waiting for the Hematology-Oncology Infusion Clinic Staff and Administrative Area is authorized.
Office, NCOIC / LCPO / LPO	OFA04	120	Provide one for Hematology-Oncology Infusion Clinic.
Team Collaboration Room	WRCH1	120	Minimum one; provide an additional one for every increment of eight Infusions Stations greater than eight.
Office, Private	OFA04	120	Provide one per each Hematology-Oncology Infusion Clinic provider and non-provider FTE position authorized to have a private office.
Office, Shared	OFA05	120	Provide one for every increment of two Hematology-Oncology Infusion Clinic provider and non-provider FTE positions authorized to have a shared office.



Cubicle	OFA03	60	Provide one per each Hematology-Oncology Infusion Clinic provider and non-provider FTE position authorized to have a cubicle.
Conference Room	CRA01	240	Minimum NSF; provide an additional 60 NSF if the total number of FTE positions authorized is greater than ten.
Storage, Patient Records	MRS01	120	Provide one if Patient Records Storage for the Hematology-Oncology Infusion Clinic is authorized.
Copier	RPR01	120	Provide one for Hematology-Oncology Infusion Clinic.
Storage, Office Supplies	SRS01	60	Provide one for Hematology-Oncology Infusion Clinic.
Lounge, Staff	SL001	120	Minimum NSF, provide an additional 60 NSF for every increment of five Hematology-Oncology Infusion Clinic FTE positions working on peak shift greater than ten; maximum 360 NSF.
Lockers, Personal Property	LR001	30	Minimum NSF, provide an additional 3 NSF per each FTE position not assigned a private office, shared office or cubicle greater than ten.