| FUNCTION | Room | AUTHORIZED     |     | PLANNING RANGE/COMMENTS |
|----------|------|----------------|-----|-------------------------|
| FUNCTION | Code | m <sup>2</sup> | nsf | PLANNING RANGE/COMMENTS |

#### 3.16.1. PURPOSE AND SCOPE:

This Chapter provides guidance for space planning criteria for the Cardiology/Pulmonary Services in military health care facilities. These services are typically for inpatients and outpatients.

#### **3.16.2. DEFINITIONS:**

<u>Administrative Personnel:</u> Administrative personnel are all personnel who do not counsel, diagnosis, examine or treat patients, but who do work that is essential for the accomplishment of the missions of a medical treatment facility. This does include military (assigned and borrowed), contract and civilian personnel. It does not include volunteers.

**Cardiology**: The study of the heart and its functions.

<u>Clinic Visit</u>: A visit is a contact between an eligible beneficiary and a medical care provider. A visit consists of examination, diagnosis, treatment, evaluation, consultation, counseling, or medical advice in a clinic or treatment/observation in quarters. (Source: DoD 6015-M, Glossary of Healthcare Terminology 1999)

<u>Full-Time Equivalent (FTE):</u> A work force equivalent to one individual working full time for a specific period, which may be made up of several part-time individuals or one full-time individual. This will include everyone working in the facility; military, civilian and contractor personnel.

<u>Office:</u> A private office is an enclosed room outfitted with either standard furniture (Room Code OFA01) or systems furniture (Room Code OFA02). An administrative cubicle is within an open room and is constructed out of system furniture (Room Code OFA03).

<u>Preceptor/ Consult Room</u>: A location is required for residents in training to be able to discuss cases in private with supervising faculty physicians (preceptors). These discussions occur during the course of a patient visit, requiring proximity to exam room areas. In clinic configurations with staff physician offices clustered near exam rooms, precepting may be feasible from the faculty physician's own office and not from a dedicated central preceptor room. Note that any space provided for precepting must afford privacy from eavesdropping patients and passers-by ... hence an open area accessible by non-staff is NOT acceptable."

**Provider:** An individual, who examines, diagnoses, treats, prescribes medication and manages the care of patients within his or her scope of practice as established by the governing body of a healthcare organization. General providers are physicians, physician's assistants and clinical nurse practitioners. The term 'staff physician' in relation to a Residency Program, does not include physician assistants, nurse practitioners or residents.

**Pulmonology**: The science concerned with the anatomy, physiology, and the pathology of the lungs.

## **3.16.3. POLICIES**:

<u>Clinic Composition:</u> A separate cardiology/pulmonary clinic will not be programmed if the number of provider FTEs is 2 or less. When staffing does not support a separate clinic, the service may be combined with internal medicine. Cardiology and pulmonary clinics may be separate clinics at larger facilities.

| FUNCTION | Room | AUTHO          | ORIZED | PLANNING RANGE/COMMENTS  |
|----------|------|----------------|--------|--------------------------|
| FUNCTION | Code | m <sup>2</sup> | nsf    | FLAMMING RAINGE/COMMENTS |

#### 3.16.3. POLICIES: Continued

<u>Offices, Private:</u> With the exception of the office provided for "Key Personnel," all other private offices will be 120 net square feet as stated in Chapter 2.1 (General Administration), paragraph 2.1.5. Private offices will be provided to following personnel:

- a) Staff who must meet with patients/customers on a regular basis and hold private consultations/discussion.
- b) The senior officer and enlisted member of a department.
- c) Staff who supervise others and must hold frequent, private counseling sessions with their junior staff. This does not include staff who supervise a very small number of people, and who would only occasionally need private counseling space. These staff can use available conference rooms or other private areas for their infrequent counseling needs
- d) Any personnel who interview or counsel patients with patient privacy concerns.

<u>Office, Non-Private or Shared Space:</u> Personnel, who require office space, but not a private office, will be provided space in a shared office. Non-private or shared office space will be programmed at 60 net square feet per occupant

**Providers' Examination Rooms:** Each provider will be provided with two examination rooms.

<u>Providers' Offices:</u> Generally, each provider (physician, physician's assistant, clinical nurse practitioner, and allied scientist) on the staff will be provided a private office (excluded offices are provided under other criteria, such as Radiologists, Pathologists, Anesthesiologists, Commanders, etc.). However, shared office space is encouraged and is an option if it is within the Clinic Concept of Operations.

<u>Public Toilets, Staff Lounges and Locker Areas:</u> The criteria for public toilets, staff lounges and locker rooms are provided in Chapter 6.1 (Common Areas).

**Residents' Cubicle Space:** Private office space will not be programmed for GME residents. GME residents will be provided with shared office space at 60 nsf per resident for Navy/Air Force and 40 nsf for Army. An office for a rotating resident may be programmed in the clinic for residents who see patients.

**Resident's Office/Examination Rooms:** Additional office and examination room space may be programmed into a clinic to provide space for "rotating residents" to see patients. A resident during his or her rotation in the clinic will use this space when seeing patients as walk-ins or by appointment. One office and two examination rooms may be programmed for each resident FTE projected to be in the clinic seeing patients. Note: These residents are not necessarily cardiologist residents only; family practice and internal medicine residents may require a rotation in the cardiology/pulmonary clinic.

#### 3.16.4. PROGRAM DATA REQUIRED:

Will Cardiac Services be provided?

How many FTE Cardiology technicians are projected?

How many FTE Cardiologists are projected?

How many FTE nurse managers are projected?

How many FTE nursing staff are projected? **Note:** This information is used to calculate the size of the Nurse Workroom. Do not include nurse managers or advice nurses.

How many NCOIC/LCPO/LPO are projected?

How many EKG tests are projected weekly?

| FUNCTION | Room | AUTHO          | ORIZED | PLANNING RANGE/COMMENTS  |
|----------|------|----------------|--------|--------------------------|
| FUNCTION | Code | m <sup>2</sup> | nsf    | FLAMMING RAINGE/COMMENTS |

#### 3.16.4. PROGRAM DATA REQUIRED: Continued

Will Echocardiographs be stored on CD or video format?

Will Transesophageal Echocardiography be performed in the clinic?

Will Pediatric Services be provided?

Will Stress Echocardiography be performed in the clinic?

How many Echocardiographs are projected annually?

Will Ultrasound Services be provided in the Cardiology/Pulmonary Clinic?

Will Pulmonary Services be provided?

How many FTE Pulmonary technicians are projected?

How many inhalation treatments are projected weekly?

How many FTE Pulmonologists are projected?

How many FTE Home Care Coordinators are projected?

Will Broncoscopy procedures be performed in the clinic?

How many FTEs on peak shift? **Note:** This information is used to calculate the number of Staff Toilets and the size of the Staff Lounge.

How many staff will require a locker? **Note**: Do not include staff with offices or cubicles.

How many FTE staff will require a dedicated cubicle? Note: Do not include providers or nursing staff

How many FTE staff will require a private office? **Note**: Do not count providers, nurse managers, advice nurses, or NCOIC/LCPO/LPOs.

How many officers or officer equivalents are projected? **Note:** This information is used to calculate the size of the Conference Room. See Chapter 2.1 (General Administration), paragraph 2.1.2 for Personnel Equivalents Chart.

Will there be vending machines in the staff lounge?

How many Stress EKGs will be performed annually?

Will a Sleep Studies Suite be required in the Pulmonary Clinic?

Will there be a Residency Program?

Will there be a Residency Program Director?

Will there be a Residency Program Secretary?

How many Residents are projected?

How many Residency Staff require a private administrative office?

How many Residency Administrative Staff cubicles are required?

How many staff physicians are projected?

### NOTE: GP indicates that a guideplate exists for that particular Room Code.

#### 3.16.5 SPACE CRITERIA:

#### RECEPTION AREAS

| Clinic Waiting | WRC01 | 5.57  | 60  | Minimum. Provide five seats for each projected FTE provider. Provide 16 nsf for 95% of the seats and 25 nsf for 5% of the seats (handicapped waiting). |
|----------------|-------|-------|-----|--|
| Reception (GP) | RECP1 | 13.01 | 140 | Provide 140 nsf for the first eight providers.  Increase 60 nsf for each increment of four providers over the initial eight providers                  |

| FUNCTION | Room | <b>AUTHO</b>   | ORIZED | DI ANNING DANCE/COMMENTS |
|----------|------|----------------|--------|--------------------------|
| FUNCTION | Code | $\mathbf{m}^2$ | nsf    | PLANNING RANGE/COMMENTS  |

## **RECEPTION AREAS - Continued**

| Patient Education Kiosk/Alcove | CLSC1 | 2.78 | 30 | Minimum of one kiosk/alcove per clinic.   |
|--------------------------------|-------|------|----|---|
| Patient Education Cubicle      | CLSC2 | 2.78 | 30 | Provide if in Clinic Concept of Operations. Includes a computer workstation for patient self-assessment, printing educational brochures, etc. |
| Public Toilet                  | NA    | NA   | NA | Space will be provided in Chapter 6.1 (Common Areas).   |

## **CARDIOLOGY CLINIC** - Must have a minimum of two FTE cardiologists projected.

## PATIENT AREAS – CARDIOLOGY CLINIC

| Adult Screening Room (GP)               | EXRG4 | 7.43  | 80  | One per every four providers.  |
|---|-------|-------|-----|--|
| Pediatric Screening Room                | EXRG5 | 11.15 | 120 | One per clinic.  |
| Patient Education Room                  | LIBV1 | 11.15 | 120 | One per clinic.  |
| Cardiology Exam Rooms (GP)              | EXRG1 | 11.15 | 120 | Army - Two per projected FTE provider. Do not count residents as providers. Resident's exam rooms are included in the Residency Functional Area. |
|   | EXRG2 |       |     | Navy. (See above Planning Range/Comments.)   |
|   | EXRG3 |       |     | Air Force. (See above Planning Range/Comments.)  |
| EKG Testing (GP)                        | OPEC1 | 11.15 | 120 | Minimum. Total number of rooms may be more. See formula in paragraph 3.16.6 below.   |
| EKG Work Area and Records               | OPEC2 | 11.15 | 120 | Minimum. One per clinic, add 10 nsf for each EKG room in excess of one.  |
| Stress Echocardiograph Room             | OPPE2 | 20.44 | 220 | One, if in Clinic Concept of Operations.   |
| Echocardiograph Room                    | OPPE1 | 13.01 | 140 | One room per every 1000 echoecardiographs performed annually.  |
| Echocardiograph Viewing Room            | XVC01 | 11.15 | 120 | One room per Cardiology Clinic.  |
| Echocardiograph Records Storage<br>Room | MRS01 | 9.29  | 100 | One per clinic. Provide an additional 40 nsf if records are not maintained on CD or video format.  |
| Transesophageal Echocardiograph. Room   | OPPE1 | 20.44 | 220 | One per clinic if in Clinic Concept of Operations. May be co-located with Cardiac Cathertization Area.   |
| Recovery Area (GP)                      | RRSS3 | 11.15 | 120 | Minimum. Provide additional 60 nsf for each Transesophageal Echocardiograph room greater than one.   |
| Scope Wash Room (GP)                    | USCL2 | 11.15 | 120 | One per two Transesophageal Echocardiograph room.  |
| Ultrasound (GP)                         | XDUS1 | 15.33 | 165 | One, if in Clinic Concept of Operations.   |
| Tilt Table Testing (GP)                 | OPTM2 | 11.15 | 120 | One per clinic.  |
| Pacemaker, ICD Interrogation            | OPPM1 | 11.15 | 120 | One per clinic.  |

| FUNCTION | Room | AUTHORIZED     |     | PLANNING RANGE/COMMENTS |
|----------|------|----------------|-----|-------------------------|
| FUNCTION | Code | $\mathbf{m}^2$ | nsf | FLAMMING RANGE/COMMENTS |

## PATIENT AREAS – CARDIOLOGY CLINIC Continued

| Pacemaker Equipment Storage      | SRE01 | 5.57  | 60  | One per Pacemaker room.  |
|----------------------------------|-------|-------|-----|--|
| Stress EKG Treadmill (GP)        | OPTM1 | 20.44 | 220 | Minimum. Provide second room when more than 1,000 Stress EKGs are performed annually.  |
| Toilet with Shower               | TLTS2 | 5.57  | 60  | One for every two Echocardiography Room and EKG Treadmill room   |
| Dressing Room/Cubicle (GP)       | DR001 | 4.65  | 60  | One cubicle for every two Echocardiography Room and EKG Treadmill room.  |
| Holter Monitor Room              | OPHM1 | 11.15 | 120 | One per clinic   |
| Holter Monitor Equipment<br>Room | SRE01 | 9.29  | 100 | One per Holter Monitor Room.   |
| Patient Toilet (GP)              | TLTU1 | 4.65  | 50  | One if number of projected FTE providers is between three and eight. Provide two toilets if number of projected FTE providers are between nine and fifteen. Provide three toilets if number of projected FTE providers is sixteen or more with a maximum of three toilets. |

## CARDIAC CATHETERIZATION (CATH) LAB (Cath Lab can be located in Radiology Department)

| Cardiac Cath Exposure Room (GP)            | XCCE1 | 54.81 | 590 | Per room authorized.                               |
|--|-------|-------|-----|--|
| Patient Prep/Recovery Cubicle (GP)         | ORPP1 | 11.15 | 120 | Two per Cardiac Cath room.                         |
| Nurse Station, Minimal                     | OFA01 | 5.57  | 60  | Minimum if four or less beds                       |
| Nurse Station (GP)                         | NSTA4 | 11.15 | 120 | If greater than four beds                          |
| Scrub Area (GP)                            | ORSA1 | 5.57  | 70  | For two scrub sinks                                |
| Control Room (GP)                          | XCCC1 | 22.30 | 240 | Minimum. Add 80 nsf per exposure room over one.    |
| Viewing Room                               | XVC01 | 9.29  | 100 | One per two exposure rooms                         |
| Equipment Storage                          | SRS01 | 12.54 | 135 | Minimum one per two exposure rooms                 |
| Sterile Supply                             | ORCW1 | 9.29  | 100 | One per two exposure rooms                         |
| Cardiac Cath Instrument Room               | XCCI1 | 9.29  | 100 | One per exposure room                              |
| Cardiac Cath System Component<br>Room (GP) | XCCA1 | 12.54 | 135 | One room for two exposure rooms.                   |
| Equipment Cleanup                          | ORDA1 | 7.43  | 80  | Minimum, One per two cardiac catheterization rooms |

| FUNCTION | Room | AUTHORIZED     |     | PLANNING RANGE/COMMENTS |
|----------|------|----------------|-----|-------------------------|
| FUNCTION | Code | $\mathbf{m}^2$ | nsf | FLAMMING RANGE/COMMENTS |

## PULMONARY CLINIC

## PULMONARY FUNCTION LAB

| Pulmonary Screening Room(GP)        | OPPS1          | 11.15        | 120 | One per Lab.   |
|-------------------------------------|----------------|--------------|-----|--|
| Pulmonary Function Testing Area     | OPPF1          | 11.15        | 120 | One per Lab.   |
| Pulmonary Function Analyzer<br>Room | OPPF4          | 11.15        | 120 | One per Lab. Includes a Body Box.  |
| Respiratory Inhalation Cubicle (GP) | OPRT1          | 6.97         | 75  | Minimum of two cubicles per Lab. See formula in paragraph 3.16.6.          |
| Respiratory Cleaning Room           | OPRC1          | 13.94        | 150 | Minimum; plus 10 nsf per treatment cubicle.  Maximum: 200. One per clinic. |
| Treadmill Room                      | OPPF5          | 23.23        | 250 | One per pulmonary function lab.  |
| Equipment Storage                   | SRE01          | 9.29         | 100 | Per cubicle. One per respiratory treatment area.                           |
| Gas Cylinders Storage               | SRGC2          | 2.78         | 30  | One per clinic.  |
| Ventilator Storage                  | SRE01<br>SRE01 | 9.29<br>9.29 | 100 | Minimum or 10 nsf per ventilator.  Minimum of 10 nsf per ventilator.       |
| Equipment Storage                   | SRE01          | 13.94        | 150 | Minimum; plus 10 nsf per treatment cubicle.                                |

## SLEEP STUDIES SUITE Verify if required.

| Sleep Studies Room        | OPPF6 | 13.01 | 140 | One per FTE pulmonologist.                                  |
|---------------------------|-------|-------|-----|---|
| Monitoring Room           | OPEE2 | 11.15 | 120 | One per sleep studies suite. For equipment.                 |
| Sleep Studies Toilet (GP) | TLTU1 | 4.65  | 50  | One per sleep studies room. See Chapter 6.1 (Common Areas). |

### BRONCHOSCOPY SUITE Verify if procedures performed in OR. Do not locate in both areas.

| Bronchoscopy Procedure Room | TRPE2 | 13.94 | 150 | One per clinic if FTE pulmonologist. projected. |
|-----------------------------|-------|-------|-----|---|
| Recovery Room (GP)          | RRSS3 | 11.15 | 120 | One per suite.                                  |
| Recovery Room Toilet (GP)   | TLTU1 | 4.65  | 50  | One per suite.                                  |
| Control/Observation Area    | OFA03 | 5.57  | 60  | One per suite. (System Furniture, cubicle)      |
| Scope Wash Room (GP)        | USCL2 | 9.29  | 100 | One per suite.                                  |

| FUNCTION | Room | AUTHO          | ORIZED | PLANNING RANGE/COMMENTS  |
|----------|------|----------------|--------|--------------------------|
| FUNCTION | Code | m <sup>2</sup> | nsf    | FLAMMING RAINGE/COMMENTS |

## STAFF AND ADMINISTRATIVE AREAS

|                                | OFD01 |       | 120 | Army - One per projected FTE cardiologist/pulmonologist. (See also Residency Program Functional Area.)  |
|--------------------------------|-------|-------|-----|---|
| Provider Office (GP)           | OFD02 | 11.15 |     | Navy - One per projected FTE cardiologist/pulmonologist. (See also Residency Program Functional Area.)  |
|                                | OFD03 |       |     | Air Force - One per projected FTE cardiologist/pulmonologist. (See also Residency Program Functional Area.)   |
| Numa Managar Office            | OFA01 | 11.15 | 120 | Private office, Standard Furniture. One per FTE Nurse Manager.  |
| Nurse Manager Office           | OFA02 | 11.13 | 120 | Private office, System Furniture. One per Nurse Manager.  |
| Home Care Coordinator Office   | OFA01 | 11.15 | 120 | One per projected FTE Home Care<br>Coordinator Standard Furniture.  |
| Tionic care coordinator office | OFA02 | 11.13 | 120 | One per projected FTE Home Care<br>Coordinator. System Furniture.   |
| NCOICA CDOA DO Office          | OFA01 | 11.15 | 120 | One per clinic. Standard Furniture.   |
| NCOIC/LCPO/LPO Office          | OFA02 | 11.13 | 120 | One per clinic. System Furniture.   |
| Private Office                 | OFA01 | 11.15 | 120 | One per projected FTE requiring a private office.<br>Refer to Chapter 2.1 (General Administration).<br>Some examples are Group Practice Manager,                                      |
|                                | OFA02 |       |     | Nurse Educator, Health Care Integrator, any staff who interviews or counsels patients.  |
| Respiratory Therapist Cubicle  | OFA03 | 5.57  | 60  | Per projected FTE, see Chapter 2.1 (General Administration). Provide 60 nsf for each FTE who requires office space.   |
| Administrative Cubicle         | OFA03 | 5.57  | 60  | System Furniture cubicle. Per projected FTE, see Chapter 2.1 (General Administration). Provide 60 nsf for each full time person who requires office space.                            |
| Records Area                   | FILE1 | 5.57  | 60  | Minimum. See Chapter 2.5 (Medical Administration) for increased sizing  |
| Copy room                      | RPR01 | 9.29  | 100 | For Copier/Fax/Mailbox distribution.  |
| Forms/Literature Storage       | SRS01 | 7.43  | 80  | One per clinic  |
| Conference Room (GP)           | CRA01 | 23.23 | 250 | Minimum use CRA01. One per Department with eight to twelve officers or officer equivalents. See Chapter 2.1 (General Administration), paragraph 2.1.2 for Personnel Equivalent Chart. |
|                                | CRA02 | 27.87 | 300 | One per Department with thirteen to sixteen officers or officer equivalents.  |
|                                | CRA03 | 37.16 | 400 | One per Department with greater than sixteen officers or officer equivalents.   |

| FUNCTION                                 | Room AUTHORIZE |                | ORIZED | PLANNING RANGE/COMMENTS   |  |  |  |
|--|----------------|----------------|--------|---|--|--|--|
| FUNCTION                                 | Code           | $\mathbf{m}^2$ | nsf    | FLANNING RANGE/COMMENTS   |  |  |  |
|  |                |                |        |   |  |  |  |
| Staff Lounge (GP)                        | SL001          | 13.01          | 140    | Minimum. See Chapter 6.1 (Common Areas).  |  |  |  |
| Personal Property Lockers (GP)           | LR001          | 1.86           | 20     | For staff without a dedicated office/cubicle space. See Chapter 6.1 (Common Areas) for increase in size or for Changing Locker Room criteria. |  |  |  |
| STAFF AND ADMINISTRATIVE AREAS Continued |                |                |        |   |  |  |  |

|                    |       |      |    | Minimum for total clinic staff of at least ten. See |
|--------------------|-------|------|----|---|
| Staff Toilets (GP) | TLTU1 | 4.65 | 50 | Chapter 6.1 (Common Areas) for increase in size     |
|                    |       |      |    | and for male/female breakdown.                      |

## CLINIC SUPPORT AREAS

| Clean Utility             | UCCL1 | 9.29  | 100 | Onr per clinic  |
|---------------------------|-------|-------|-----|---|
| Soiled Utility (GP)       | USCL1 | 8.36  | 90  | For up to 6 projected FTE providers.  |
|                           |       | 11.15 | 120 | For 7 - 12 projected FTE providers.   |
|                           |       | 13.94 | 150 | For more than 12 projected FTE providers.   |
| Litter/Wheelchair Storage | SRLW1 | 5.57  | 60  | One per clinic.   |
| Crash Cart Alcove         | RCA01 | 1.86  | 20  | One per clinic. Can be shared between several clinics if fully accessible to all. |
| Equipment Storage         | SRE01 | 9.29  | 100 | One per clinic.   |

### Functions which are required for Residency Education in Cardio/Pulmonary:

The following areas must be programmed if there is a Cardiology or Pulmonary Residency Program. These areas are in addition to those listed under common areas above.

### RESIDENCY PROGRAM

| Residency Program Director (GP) | OFD01<br>OFD02<br>OFD03 | 11.15 | 120 | Army - One per director of residency program.  Navy - One per director of residency program.  Air Force - One per director of residency program. |
|---------------------------------|-------------------------|-------|-----|--|
| Secretary with visitor waiting. | SEC01                   | 11.15 | 120 | One per Director of a Residency Program, if there is a projected FTE secretary position.   |
| Private Office                  | OFA01<br>OFA02          | 11.15 | 120 | One per projected FTE that requires a private office   |
| Administrative Cubicle          | OFA03                   | 5.57  | 60  | Provide 60 nsf per projected FTE position.   |
| Resident Cubicle                | OFA03                   | 5.57  | 60  | Minimum. 60 nsf per projected resident.  |
| Residency Library               | LIBB1                   | 13.01 | 140 | One per Residency Program.   |
| Conference Room (GP)            | CRA01                   | 23.23 | 250 | Minimum, one per Residency Program. For increased sizing see Chapter 2.1 (General Administration).   |

| FUNCTION                              | Room  | AUTHO          | ORIZED     | PLANNING RANGE/COMMENTS   |  |
|---------------------------------------|-------|----------------|------------|---|--|
| FUNCTION                              | Code  | m <sup>2</sup> | nsf        | FLAMMING RANGE/COMMENTS   |  |
|                                       |       |                |            |   |  |
| Resident Exam Room (GP)  EXRG2  EXRG3 | EXRG1 | 11.15          | 120        | Army. One per projected resident. Minus the two monitored exam rooms. |  |
|                                       | EXRG2 |                |            | Navy.   |  |
|                                       |       |                | Air Force. |   |  |
| RESIDENCY PROGRAM Continued           |       |                |            |   |  |

| Monitored Exam Room – Subject<br>& Observer Room (GP) | EXRG1 |       | Army – provide two exam rooms per residency program, and one CMP02. |  |
|---|-------|-------|---|--|
|   | EXRG2 | 11.15 | 120   | Navy.                                  |
|   | EXRG3 |       |   | Air Force                              |
|   | CMP02 |       |   | This room uses cameras and videotapes. |
| Preceptor/Consult Room (GP)                           | OFDC1 | 11.15 | 120   | One per residency program.             |

### **3.16.6. FORMULAS:**

### **EKG Room Requirements:**

 $EKG Rooms = \underline{EKG tests/week}$ 

2 tests per hour x 35 hours per week.

### **Inhalation Cubicle Requirements:**

Cubicles = <u>Treatments per week</u>

2 treatments per hour x 35 hour per week