

DoD Space Planning Criteria for Health Facilities
Audiology / Hearing Conservation / Speech Pathology / Ear Nose and Throat
(ENT) or Otorhinolaryngology Clinic

3.10.1. PURPOSE AND SCOPE:

This chapter sets forth space planning criteria for the outpatient Audiology, Hearing Conservation, speech pathology, and Otorhinolaryngological Clinical Services in military health care facilities. Otorhinolaryngology clinics include: Ear, Nose and Throat (ENT) and Vestibular exams.

3.10.2. DEFINITIONS:

Administrative Personnel: 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.

Audiology: Audiology services in military treatment facilities provide the following types of services: evaluation of the auditory system to include pure tone air and bone conduction, speech threshold and recognition testing, electrophysiological testing, vestibular evaluations, pre and post operative exams, dispensing and fitting of hearing aids and hearing protection, and Hearing Conservation services.

Clinic Visit: 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)

Educational and Developmental Intervention Services (EDIS): Educational and Developmental Intervention Services are governed by DoDI 1010.13 which mandates that all children with special needs receive the assistance they require in order to receive a proper education. In OCONUS locations the military medical service shares the responsibility for providing these services with DoDDS. Medical related services can include occupational therapy, physical therapy, psychology services, and speech and Audiology services.

Full-Time Equivalent (FTE): 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.

Hearing Conservation: Hearing Conservation services are provided separately from Clinical Audiology Services. Hearing Conservation will provide the following services: hearing testing for the determination of temporary or permanent threshold shift (TTS/PTS), fitting of appropriate hearing protection, health education.

Office: 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)

Otorhinolaryngology: The branch of medicine concerned with medical and surgical treatment of the head and neck, including the ears, nose and throat.

Preceptor/Consult Room: - 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.

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3.10.2. DEFINITIONS: Continued

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.

Speech Therapy: Speech services in military treatment facilities provide diagnosis and treatment of speech, language, voice, and swallowing disorders. Patients with such communication disorders often have hearing deficiencies.

Vestibular: relating to the internal ear, where balance functions are governed.

3.10.3. POLICIES:

Clinic Composition: A separate Audiology / Speech Therapy Clinic will not be programmed if the number of Audiologist and Speech Therapist's FTEs is 2 or less. When the workload of audio and speech does not support a separate clinic, the services may be combined with ENT, or Otorhinolararyngology Services.

A separate ENT Clinic will be programmed if the number of Otorhinolararyngologist FTEs is 3 or more. When the staffing of Otorhinolararyngologist does not support a separate clinic, the services may be combined with the General Surgery Clinic or Audiology/Hearing Conservation and/or Speech Pathology Services.

Educational and Developmental Intervention Services (EDIS): Adequate space for EDIS functions must be provided within OCONUS locations where dependents are sponsored. This may entail providing a single area for multiple specialties or it may simply entail ensuring the appropriate medical specialties are staffed within their own separate clinics. If a single EDIS area is provided, waiting and reception space, appropriate administrative office space, and appropriate treatment space (based on specialties included) will be provided. For the purpose of this chapter this could include locating an Audiologist and/or Speech Pathologist within the EDIS area.

Offices, Private: With the exception of the office provided for "Key Personnel," all other private offices will be 120 net square feet as stated in paragraph 2.1.5, Space Criteria. 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.

Office, Non-Private or Shared Space: 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.

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3.10.3. POLICIES: Continued

Patient Education Cubicle: The cubicle will have a Computer, DVD player and video player and printer. This will allow patient to complete self-assessment health surveys, investigate material based on their diagnosis, print material, and watch videos specific to their treatment/procedure. This area needs to maintain patient privacy and be located near the Patient care areas.

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

Providers' Offices: 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.

Public Toilets, Staff Lounges and Locker Areas: 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 Primary Care residents; Family Practice, Internal Medicine and other Residency programs may require a rotation in the Primary Care clinic.

Separate Hearing Conservation Facilities: For the Army, a separate Freestanding Hearing Conservation Clinic will be constructed when there is an "at risk" Hearing Conservation population of 8,000 or greater.

3.10.4. PROGRAM DATA REQUIRED:

- How many FTE providers are projected?
- How many FTE Speech Therapists are projected?
- How many FTE Otorhinolaryngologists 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 FTEs on peak shift are projected? **Note:** This information is used to calculate the number of Staff Toilets and the size of the Staff Lounge.
- How many FTE Audiologists are projected?
- How many FTE Audiology Technicians are projected?
- How many FTE Speech Therapy Technicians are projected?
- How many NCOIC/LCPO/LPO are projected?
- How many FTE nurse managers are projected?
- How many FTE Advice Nurses are projected?
- 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.
- How many staff will require a private office? **Note:** Do not count providers, Audiologists, Speech Therapists, Otorhinolaryngologists, nurse managers, Advice Nurses, or NCOIC/LCPO/LPOs.
- How many staff will require a cubicle? **Note:** Do not include providers, nursing staff or technicians.
- How many staff will require a locker? **Note:** Do not include staff with offices or cubicles.

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3.10.4. PROGRAM DATA REQUIRED: Continued

- How many one-person audiometric booths will be required?
- Will a pediatric playroom be required?
- Will a patient education cubicle in the waiting room be required?
- Will vestibular exams be performed in the clinic?
- Will a four-person audiometric booth be required?
- Will a six-person audiometric booth be required?
- Is a Hearing Conservation Program projected within this clinic?
- Is an isolation room required?
- Is a procedure room required?
- Will there be vending machines in the staff lounge?
- 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?
 - Will a bone dissection lab be required?
- Is a Freestanding Hearing Conservation Clinic projected?
 - How many FTE providers (not including Audiologist) are projected?
 - How many Audiologists are projected?
 - How many one-person audiometric booths are required?
 - How many four-person audiometric booths are required?
 - How many six-person audiometric booths are required?
 - Are pediatric patients seen in the clinic?
 - How many FTEs on peak shift are projected?
 - Will there be vending machines in the staff lounge?
 - How many staff will require a private office not including Audiologists?
 - How many staff will require a cubicle?
 - How many staff will require a locker?

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

3.10.5. SPACE CRITERIA:

FUNCTION	ROOM CODE	AUTHORIZED		PLANNING RANGE/COMMENTS
		m ²	nsf	
RECEPTION AREAS				
Clinic Waiting	WRC01	5.57	60	Minimum. Provide three seats per projected FTE provider. Provide 16 nsf for 95% of the seats and 25 nsf for 5% of the seats (handicapped waiting).
Playroom, Waiting (GP)	PLAY1	9.29	100	Provide if in Clinic Concept of Operations.

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RECEPTION AREAS: Continued

Reception (GP)	RECP1	13.01	140	Minimum. Provide 140 nsf for the first eight providers. Increase 60 nsf for each increment of four providers over the initial eight providers. Includes space for two technicians. When only one technician is projected, consolidate with adjacent department, where possible.
Patient Education Kiosk/Alcove	CLSC1	2.78	30	One per clinic
Patient Education Cubicle	CLCS2	2.78	30	Provide if in Clinic Concept of Operations. Includes a computer workstation for patient self-assessment, printing educational brochures, etc.
Public Toilets	NA	NA	NA	Space will be provided in Chapter 6.1 (Common Areas).

PATIENT AREAS - ENT (Otorhinolaryngology):

ENT Exam Room (GP)	EXEN1	11.15	120	Two per projected FTE providers.
ENT Treatment Room	TREN1	16.26	175	One for every three projected FTE providers.
Speech Therapist Office /Exam	EXOS1	11.15	120	One per projected FTE Speech Therapist.
One Person Audio Screening Booth (GP)	PEHS1	11.15	120	One per every four projected FTE Otorhinolaryngologist. May be combined with Audiology Department.
Vestibular Exam Room	EXVE1	13.94	150	One per clinic, if vestibular exams are performed in the ENT clinic. Consider performing this function in an ENT treatment room, unless workload requires a dedicated 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. If number of projected FTE providers are sixteen or more, provide a maximum three toilets.

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		m ²	nsf	

STAFF AND ADMINISTRATIVE AREAS ENT (Otorhinolararyngology):

Provider Office (GP)	OFD01	11.15	120	Army - One per projected FTE staff provider. Do not count residents as providers. Resident's exam rooms are included in the Residency Functional Area.
	OFD02			Navy.
	OFD03			Air Force.
Audiologist Office (GP)	OFD01	11.15	120	Army. One per projected FTE Audiologist.
	OFD02			Navy. One per projected FTE Audiologist.
	OFD03			Air Force. One per projected FTE Audiologist.
Audiology Technician Cubicle	OFA03	5.57	60	One cubicle per every three or fraction of three projected FTE technician. Note: Do not include the NCOIC/LCPO/LPO.
Speech Therapy Technician Cubicle	OFA03	5.57	60	One cubicle per every three or fraction of three projected FTE technician. Note: Do not include the NCOIC/LCPO/LPO.
Nurse Manager Office	OFA01	11.15	120	Private Office, Standard Furniture. One per projected FTE Nurse Manager.
	OFA02			Private Office, Systems Furniture. One per projected FTE Nurse Manager.
Nurse Workroom	WRCH1	11.15	120	Army/Navy. Minimum. Add 40 nsf for each projected FTE nurse greater than four.
	OFA03	5.72	60	Air Force. Cubicle - Systems Furniture. One per projected FTE Nurse.
NCOIC/LCPO/LPO Office	OFA01	11.15	120	One per projected FTE.
	OFA02			
Advice Nurse Office	OFA01	11.15	120	One per projected FTE Advice Nurse.
	OFA02			
Private Office	OFA01	11.15	120	One per projected FTE requiring a private office. See Chapter 2.1 (General Administration), paragraph 2.1.3. Some examples are Group Practice Manager, Nurse Educator, Health Care Integrator, any staff who interviews or counsels patients.
	OFA02			
Administrative Cubicle	OFA03	5.57	60	Per projected FTE requiring a dedicated work - space but not a private office. See Chapter 2.1 (General Administration), paragraph 2.1.3.
Patient Records Area	FILE1	5.57	60	One per clinic.

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STAFF AND ADMINISTRATIVE AREAS ENT (Otorhinolaryngology): Continued

Copy Room	RPR01	9.29	100	For Copier/Fax/Mailbox distribution.
Forms/Literature Storage	SRS01	9.29	100	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.
Staff Lounge (GP)	SL001	13.01	140	Minimum 140 nsf for 10 FTEs on peak shift. Add 5 nsf for each peak shift FTE over 10. Maximum size 300 nsf without vending machines and 320 nsf if vending machines are included.
Personal Property Lockers (GP)	LR001	2.32	25	Minimum for the first 10 FTEs on peak shift. Add 2.5 nsf for FTE over 10. For staff without a dedicated office/cubicle space. See Chapter 6.1 (Common Areas) for Locker Room, Changing criteria.
Staff Toilets (GP)	TLTU1	4.65	50	Minimum of one for the first 15 FTEs on peak shift. Add one TLTU1 for every additional 15 FTEs on peak shift. Can be combined into multi-stall toilets.

CLINIC SUPPORT AREAS ENT (Otorhinolaryngology):

Clean Utility (GP)	UCCL1	11.15	120	For up to 6 projected FTE providers.
		13.94	150	For 7 - 12 projected FTE providers.
		16.72	180	For greater than 12 projected FTE providers.
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 greater 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.

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TESTING/TREATMENT: AUDIOLOGY/SPEECH PATHOLOGY

Audiology Pediatric Evaluation/Therapy Exam Room	EXRP1	11.15	120	One per every two projected FTE Audiologists. This function can be collocated within the ENT clinic.
Audio Screening Booth (GP for One-Person Booth)	PEHS1	11.15	120	One-person booth. Minimum requirement when Audiology Service is provided.
	PEHS2	34.84	375	One four-person booth if in Clinic Concept of Operations.
	PEHS3			One six-person booth if in Clinic Concept of Operations.
Audio Booth Suite (GP)	PEHS4	34.84	375	One suite per clinic with projected FTE Audiologist and a Hearing Conservation Program. Additional suites require justification.
Hearing Aid Fitting Room	HAFR1	18.58	200	One per clinic with two or more projected FTE Audiologists. Combine with Hearing Aid Laboratory when only one projected FTE Audiologist.
Hearing Aid Laboratory	HATL1	9.29	100	One per clinic with two or more projected FTE Audiologists. Reduce to 80 nsf and combine with Hearing Aid Fitting Room when only one projected FTE Audiologist.
Evoked Potential Response Room	EVPR1	9.29	100	One per clinic with two or more projected FTE Audiologists. Reduce to 80 nsf and combine with Vestibular Laboratory when only one projected FTE Audiologist.
Audiology Testing Room	TREN2	16.26	175	One per clinic. Also serves as location for computerized fluency assisted therapy, tracheoesophageal puncture (TEP) patient care, modified barium swallow results review, and videostroboscopy lab.

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Functions that are required for Residency Education in Otorhinolararyngology:

The following areas must be programmed if the MTF provides an Otorhinolararyngology Residency Program.

RESIDENCY PROGRAM

Residency Program Director (GP)	OFD01	11.15	120	Army - One per Residency Program Director.
	OFD02			Navy.
	OFD03			Air Force.
Secretary with Visitor Waiting	SEC01	11.15	120	One per projected FTE secretary.
Private Office	OFA01	11.15	120	One per projected FTE that requires a private office. Do not include Resident Providers.
	OFA02			
Administrative Cubicle	OFA03	5.57	60	Provide 60 nsf per projected FTE administrative personnel requiring a dedicated cubicle.
Resident Cubicle	OFA03	5.57	60	Per projected Resident, Navy/Air Force.
		3.72	40	Per projected Resident, Army.
Residency Library	LIBB1	13.01	140	One per Residency Program. Can be combined with Conference Room.
Conference Room (GP)	CRA01	23.23	250	One per Residency Program.
Resident Exam Room (GP)	EXEN1	11.15	120	One per projected resident. Minus the two monitored exam rooms.
Monitored Exam Room - Subject & Observer room. (GP)	EXEN1	11.15	120	Provide two exam rooms per residency program, and one CMP02. These rooms use cameras and videotapes.
	CMP02	5.57	60	One room can support two exam rooms.
Preceptor/Consult Room	OFDC1	11.15	120	One per ten staff physicians per concept of operations. Do not include Residents. May use OFD01/OFD02/OFD03 if within clinical area.
Bone Dissection Lab	LBDS1	13.94	150	Special study required.

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Freestanding Hearing Conservation Clinic:

RECEPTION AREAS: Freestanding Hearing Conservation Clinic

Clinic Waiting	WRC01	5.57	60	Minimum. Provide two seats per projected FTE Audiologist or Speech Therapist. Provide 16 nsf for 95% of the seats and 25 nsf for 5% of the seats (handicapped waiting).
Reception (GP)	RECP1	13.01	140	Minimum. Provide 140 nsf for the first eight providers. Increase 60 nsf for each increment of four providers over the initial eight providers.
Patient Classroom/Conference Room	CLR01	23.23	250	One per clinic.
Public Toilets	NA	NA	NA	Space will be provided in the Chapter 6.1 (Common Areas).

TESTING/TREATMENT AREA: Freestanding Hearing Conservation Clinic

Audiology Pediatric Evaluation/ Therapy Exam Room	EXRP1	11.15	120	One per every two projected FTE Audiologists.
Audiology Testing Booth	PEHS1	11.15	120	One-person audiometric booth. Number of booths is based on Clinic Concept of Operations.
	PEHS2	34.84	375	Four-person audiometric booth. See above comment.
	PEHS3	34.84	375	Six-person audiometric booth. See above comment
Audio Booth Suite (GP)	PEHS4	34.84	375	One suite per clinic with projected FTE Audiologist and a Hearing Conservation Program. Additional suites require justification.
Hearing Aid Fitting Room	HAFR1	18.58	200	One per clinic if FTE Audiologist is projected.
Hearing Aid Laboratory	HATL1	9.29	100	One per clinic if FTE Audiologist is projected.

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STAFF AND ADMINISTRATIVE AREAS: Freestanding Hearing Conservation Clinic

Audiologist Office (GP)	OFD01	11.15	120	Army - One per projected FTE Audiologist.
	OFD02			Navy - One per projected FTE Audiologist.
	OFD03			Air Force - One per projected FTE Audiologist.
NCOIC/LCPO/LPO Office	OFA01	11.15	120	Private Office - Standard Furniture. One per clinic.
	OFA02			Private Office - System Furniture
Private Office	OFA01	11.15	120	One per projected FTE requiring a private office. See Chapter 2.1 (General Administration), paragraph 2.1.3. Some examples are Speech Therapist, Nurse Educator, Health Care Integrator, any staff who interviews or counsels patients. Do not include Audiologist.
	OFA02			
Administrative Cubicle	OFA03	5.57	60	Per projected FTE requiring a dedicated work-space but not a private office. See Chapter 2.1 (General Administration), paragraph 2.1.3.
Patient Records Area	FILE1	5.57	60	One per clinic.
Copy Room	RPR01	9.29	100	For Copier/Fax/Mailbox distribution.
Forms/Literature Storage	SRS01	9.29	100	One per clinic.
Conference Room (GP)	CRA01	23.23	250	One per clinic.
Staff Lounge (GP)	SL001	13.01	140	Minimum 140 nsf for 10 FTEs on peak shift. Add 5 nsf for each peak shift FTE over 10. Maximum size is 300 nsf without vending machines and 320 nsf if vending machines are included.
Personal Property Lockers (GP)	LR001	1.86	20	Minimum for the first 10 FTEs on peak shift. Add 2 nsf for FTE over 10. For staff without a dedicated office/cubicle space. See Chapter 6.1 (Common Areas) for Locker Room, Changing criteria.
Staff Toilets (GP)	TLTU1	4.65	50	Minimum of one for the first 15 FTEs on peak shift. Add one TLTU1 for every additional 15 FTEs on peak shift. Can be combined into multi-stall toilets.

CLINIC SUPPORT AREAS: Freestanding Hearing Conservation Clinic

Clean Utility (GP)	UCCL1	11.15	120	One per clinic.
Soiled Utility (GP)	USCL1	8.36	90	One per clinic.
Equipment Storage	SRE01	9.29	100	One per clinic.