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

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-Procedural: 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-Procedural: 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:**

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

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:

\[
240 \text{ Operating Days per Year} \times 8 \text{ Hours of Operation per Day} \times 0.80 = 2,048
\]

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.

   \[
   \frac{3,164}{1,536} = 2.05
   \]
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.
   \[12,500 - 6,144 = 6,356\]
   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 x 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 x 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 x 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

<table>
<thead>
<tr>
<th>CLINICAL ENCOUNTERS / PROCEDURES</th>
<th>AVERAGE LENGTH OF CLINIC ENCOUNTER (minutes)</th>
<th>UTILIZATION RATE</th>
<th>ANNUAL WORKLOAD PER EXAM / PROEDURE ROOM (*)</th>
<th>MINIMUM ANNUAL WORKLOAD TO GENERATE ONE ROOM (20%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dermatology</td>
<td>45</td>
<td>80%</td>
<td>2,048</td>
<td>410</td>
</tr>
<tr>
<td>Endocrinology</td>
<td>45</td>
<td>80%</td>
<td>2,048</td>
<td>410</td>
</tr>
<tr>
<td>Gastroenterology</td>
<td>45</td>
<td>80%</td>
<td>2,048</td>
<td>410</td>
</tr>
</tbody>
</table>

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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 (WKTM2)** ............................................ 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 (WKT01)** ...................................................... 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,
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.

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**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.

   This vestibule accommodates space for gowning and a transaction area as part of
   a decentralized pharmacy in the infusion clinic for the preparation of
   chemotherapy drugs and IV medications.

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)**
   
   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)**
   
   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)**
   
   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)**
   
   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)**
   
   Minimum NSF; provide an additional 30 NSF per for every increment of ten Chemotherapy Infusion Stations greater than ten.

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

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

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

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

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

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

3. **Sub-Waiting (WRC03)**
   
   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 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

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

<table>
<thead>
<tr>
<th>Services</th>
<th>Relationship</th>
<th>Reasons</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outpatient Surgery</td>
<td>1, 2, 3</td>
<td>A, C, G, H, I</td>
</tr>
<tr>
<td>Radiology</td>
<td>1, 2, 3</td>
<td>A, G, H, I</td>
</tr>
<tr>
<td>Outpatient Laboratory</td>
<td>3</td>
<td>G, H, I</td>
</tr>
<tr>
<td>Outpatient Pharmacy</td>
<td>3</td>
<td>H, I</td>
</tr>
<tr>
<td>Infusion</td>
<td>1, 2, 3</td>
<td>H, I</td>
</tr>
</tbody>
</table>

TABLE 3: ENDOSCOPY SUITE FUNCTIONAL RELATIONSHIP MATRIX

<table>
<thead>
<tr>
<th>Services</th>
<th>Relationship</th>
<th>Reasons</th>
</tr>
</thead>
<tbody>
<tr>
<td>ICU</td>
<td>1, 2, 3</td>
<td>C, G</td>
</tr>
<tr>
<td>Patient Care Units</td>
<td>1, 2, 3</td>
<td>C, G</td>
</tr>
<tr>
<td>Emergency Department</td>
<td>1, 2, 3</td>
<td>G, H, I</td>
</tr>
<tr>
<td>Outpatient Surgery</td>
<td>1</td>
<td>A, B, C, G, I</td>
</tr>
<tr>
<td>Radiology</td>
<td>1, 2</td>
<td>C, G, I</td>
</tr>
<tr>
<td>Sterile Processing</td>
<td>1, 2, 3</td>
<td>B, C, G, I</td>
</tr>
</tbody>
</table>

TABLE 4: RENAL DIALYSIS CLINIC FUNCTIONAL RELATIONSHIP MATRIX

<table>
<thead>
<tr>
<th>Services</th>
<th>Relationship</th>
<th>Reasons</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambulatory Clinics</td>
<td>1, 2, 3</td>
<td>A, C, G, H, I</td>
</tr>
<tr>
<td>Patient Care Units</td>
<td>1, 2, 3</td>
<td>A, G, H, I</td>
</tr>
<tr>
<td>Emergency Department</td>
<td>3</td>
<td>G, H, I</td>
</tr>
<tr>
<td>Cardiovascular Labs</td>
<td>3</td>
<td>H, I</td>
</tr>
<tr>
<td>Biomedical Equipment Repair</td>
<td>3</td>
<td>B, I</td>
</tr>
<tr>
<td>Lab</td>
<td>3</td>
<td>H</td>
</tr>
<tr>
<td>Sterile Processing</td>
<td>3</td>
<td>B, I</td>
</tr>
</tbody>
</table>

TABLE 5: HEMATOLOGY-ONCOLOGY INFUSION CLINIC FUNCTIONAL RELATIONSHIP MATRIX

<table>
<thead>
<tr>
<th>Services</th>
<th>Relationship</th>
<th>Reasons</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambulatory Clinics</td>
<td>1, 2, 3</td>
<td>A, C, G, H, I</td>
</tr>
<tr>
<td>Outpatient Laboratory</td>
<td>1, 2, 3</td>
<td>A, B, C, G, H</td>
</tr>
<tr>
<td>Outpatient Pharmacy</td>
<td>3</td>
<td>H</td>
</tr>
</tbody>
</table>

(See Legend on following page)
Legend:

<table>
<thead>
<tr>
<th>Relationship</th>
<th>Reasons:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Adjacent</td>
<td>(Use as many as appropriate)</td>
</tr>
<tr>
<td>2. Close / Same Floor</td>
<td>A. Common use of resources</td>
</tr>
<tr>
<td>3. Close / Different Floor Acceptable</td>
<td>B. Accessibility of supplies</td>
</tr>
<tr>
<td>4. Limited Traffic</td>
<td>C. Urgency of contact</td>
</tr>
<tr>
<td></td>
<td>D. Noise or vibration</td>
</tr>
<tr>
<td></td>
<td>E. Presence of odors or fumes</td>
</tr>
<tr>
<td></td>
<td>F. Contamination hazard</td>
</tr>
<tr>
<td></td>
<td>G. Sequence of work</td>
</tr>
<tr>
<td></td>
<td>H. Patient’s convenience</td>
</tr>
<tr>
<td></td>
<td>I. Frequent contact</td>
</tr>
<tr>
<td></td>
<td>J. Need for security</td>
</tr>
<tr>
<td></td>
<td>K. Others (specify)</td>
</tr>
</tbody>
</table>

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

Reception Area

Screening Room

Exam Rooms

Multi Purpose Treatment Room(s)

Sub waiting
Satellite Lab
Specimen Toilet

Phlebotomy Station

EKG Treadmill Room
EEG EMG
Evoked Potential Room

Phototherapy Treatment Room
Laser Treatment Room
Dermatology Lab

Infusion Therapy

Support Area

Staff and Administrative Area

GME Education/Training Area

- Mission (if authorized) and Staffing driven spaces
- Workload and Staffing driven spaces
- Patient Circulation
- Staff Circulation
15 FUNCTIONAL DIAGRAM ENDOSCOPY SUITE

Reception Area

Cubicle Patient Dressing

Prep / Recovery
(Private Room and/or Multi - Station)

Endoscopy Suite Patient Area

Procedure Rooms:
ERCP
Endoscopy
Esophageal Motility
Colonoscopy / Proctoscopy / Sigmoidoscopy

Support Area

Staff and Administrative Area

--- Mission (if authorized) and Staffing driven spaces
--- Workload and Staffing driven spaces
--- Patient Circulation
--- Staff Circulation
16 FUNCTIONAL DIAGRAM RENAL DIALYSIS UNIT

Reception Area

Dialysis Station
(Private & Multi Stations)

Nurse Station

Renal Dialysis Unit Patient Area

Treatment Room

Patient Education Room

Support Area
- Medication Room
- Dialysis Storage Equipment
- Water Treatment Room

Staff and Administrative Area

Mission (if authorized) and Staffing driven spaces
Workload and Staffing driven spaces
Patient Circulation
Staff Circulation
17 FUNCTIONAL DIAGRAM HEMATOLOGY-ONCOLOGY INFUSION CLINIC

- Reception Area
- Group Therapy Room
- Infusion Stations (Multi-station, Private Rooms)
- Nurse Station
- Procedure Room
- Satellite Lab
- Hematology - Oncology Infusion Clinic Patient Area
- Support Area
- Pharmacy
- Utility
- Staff and Administrative Area

Mission (if authorized) and Staffing driven spaces
Workload and Staffing driven spaces
Patient Circulation
Staff Circulation
## Appendix A: SPACE PLANNING CRITERIA SUMMARY

### FA 1: Exam Room Calculation:

<table>
<thead>
<tr>
<th>Room Name</th>
<th>Room Code</th>
<th>NSF</th>
<th>Space Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Exam Rooms</td>
<td>CALC1</td>
<td>0</td>
<td>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)</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Room Name</th>
<th>Room Code</th>
<th>NSF</th>
<th>Space Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Waiting, Specialty Medical Clinics</td>
<td>WRC01</td>
<td>120</td>
<td>Minimum NSF; provide an additional 60 NSF for every increment of four General, Negative Pressure and Bariatric Exam Rooms greater than four.</td>
</tr>
<tr>
<td>Playroom</td>
<td>PLAY1</td>
<td>120</td>
<td>Provide one for Specialty Medical Clinics.</td>
</tr>
<tr>
<td>Reception</td>
<td>RECP1</td>
<td>120</td>
<td>Minimum NSF; provide an additional 30 NSF for every increment of twelve General, Negative Pressure and Bariatric Exam Rooms greater than twelve; maximum 240.</td>
</tr>
<tr>
<td>Kiosk, Patient Check-in</td>
<td>CLSC1</td>
<td>30</td>
<td>Provide one for Specialty Medical Clinics.</td>
</tr>
<tr>
<td>Patient Education</td>
<td>CLSC3</td>
<td>120</td>
<td>Provide one for Specialty Medical Clinics.</td>
</tr>
<tr>
<td>Consult Room</td>
<td>OFDC2</td>
<td>120</td>
<td>Provide one for Specialty Medical Clinics.</td>
</tr>
<tr>
<td>Alcove, Wheelchair</td>
<td>SRLW1</td>
<td>60</td>
<td>Provide one for Specialty Medical Clinics.</td>
</tr>
</tbody>
</table>
### FA3: Specialty Medical Clinics Patient Area:

<table>
<thead>
<tr>
<th>Room Name</th>
<th>Room Code</th>
<th>NSF</th>
<th>Space Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Screening Room</td>
<td>EXRG4</td>
<td>120</td>
<td>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.</td>
</tr>
<tr>
<td>Alcove, Height / Weight</td>
<td>EXR11</td>
<td>60</td>
<td>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.</td>
</tr>
<tr>
<td>Toilet, Patient</td>
<td>TLTU1</td>
<td>60</td>
<td>Minimum one; provide an additional one for every increment of ten General, Negative Pressure and Bariatric Exam Rooms greater than ten.</td>
</tr>
<tr>
<td>Exam Room / Consult</td>
<td>EXR10</td>
<td>120</td>
<td>Minimum one; provide an additional one for every increment of sixteen General, Negative Pressure and Bariatric Exam Rooms greater than sixteen.</td>
</tr>
<tr>
<td>Exam Room, Telehealth</td>
<td>WKT02</td>
<td>120</td>
<td>Provide one for Specialty Medical Patient Area.</td>
</tr>
<tr>
<td>Exam Room, General</td>
<td>EXRG1</td>
<td>120</td>
<td>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)</td>
</tr>
<tr>
<td>Exam Room, Negative Pressure Isolation</td>
<td>EXRG6</td>
<td>120</td>
<td>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).</td>
</tr>
<tr>
<td>Toilet, Isolation Patient</td>
<td>TLTU1</td>
<td>60</td>
<td>Provide one per each Negative Pressure Isolation Exam Room.</td>
</tr>
<tr>
<td>Exam Room, Bariatric</td>
<td>EXB01</td>
<td>120</td>
<td>Provide one if a Bariatric Exam Room is authorized for Specialty Medical Patient Area.</td>
</tr>
<tr>
<td>Toilet, Bariatric Patient</td>
<td>TLTB1</td>
<td>60</td>
<td>Provide one for the Bariatric Exam Room.</td>
</tr>
<tr>
<td>Sub-Waiting, Satellite Laboratory</td>
<td>WRC03</td>
<td>60</td>
<td>Provide one if a Satellite Laboratory is authorized.</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>-------</td>
<td>----</td>
<td>----------------------------------------------------</td>
</tr>
<tr>
<td>Phlebotomy Station</td>
<td>LBVP1</td>
<td>120</td>
<td>Provide one if a Satellite Laboratory is authorized.</td>
</tr>
<tr>
<td>Laboratory, Satellite</td>
<td>LBSP1</td>
<td>120</td>
<td>Provide one if a Satellite Laboratory and a Laboratory Technician FTE position is authorized.</td>
</tr>
<tr>
<td>Toilet, Specimen</td>
<td>TLTU1</td>
<td>60</td>
<td>Provide one if a Satellite Laboratory is authorized.</td>
</tr>
<tr>
<td>Observation / IV Hydration Room</td>
<td>OOHR1</td>
<td>120</td>
<td>Minimum one; provide an additional one for every increment of twelve General, Negative Pressure and Bariatric Exam Rooms greater than twelve.</td>
</tr>
<tr>
<td>Infusion Therapy Station</td>
<td>OPCT1</td>
<td>120</td>
<td>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)</td>
</tr>
<tr>
<td>Nurse Station</td>
<td>NSTA1</td>
<td>120</td>
<td>Minimum NSF; provide an additional 60 NSF for every increment of six Infusion Therapy Stations greater than six.</td>
</tr>
<tr>
<td>Sub-Waiting, Pre-Procedure</td>
<td>WRC03</td>
<td>60</td>
<td>Minimum NSF; provide an additional 60 NSF for every increment of three Multipurpose, Phototherapy / Dermatology, and Laser Treatment Rooms greater than three.</td>
</tr>
<tr>
<td>Sub-Waiting, Post-Procedure</td>
<td>WRC03</td>
<td>60</td>
<td>Minimum NSF; provide an additional 60 NSF for every increment of three Multipurpose, Phototherapy / Dermatology, and Laser Treatment Rooms greater than three.</td>
</tr>
<tr>
<td>Cubicle, Patient Dressing</td>
<td>DR001</td>
<td>60</td>
<td>Provide one for every increment of two Multipurpose, Phototherapy / Dermatology, and Laser Treatment Rooms.</td>
</tr>
<tr>
<td>Nurse Station</td>
<td>NSTA1</td>
<td>120</td>
<td>Provide one for the Specialty Medical Clinics Patient Area.</td>
</tr>
<tr>
<td>Treatment Room, Multipurpose</td>
<td>TRGM1</td>
<td>180</td>
<td>Minimum one; provide an additional one for every increment of ten General, Negative Pressure Isolation and Bariatric Exam Rooms greater than ten.</td>
</tr>
<tr>
<td>-----------------------------</td>
<td>-------</td>
<td>-----</td>
<td>--------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Toilet, Treatment Patient</td>
<td>TLTU1</td>
<td>60</td>
<td>Minimum one; provide an additional one for every increment of four Multipurpose Treatment Rooms greater than four.</td>
</tr>
<tr>
<td>Treatment Room, Phototherapy / Dermatology</td>
<td>OPDU1</td>
<td>180</td>
<td>Provide one for Specialty Medical Patient Area.</td>
</tr>
<tr>
<td>Shower, Phototherapy / Dermatology Patient</td>
<td>TLTS2</td>
<td>60</td>
<td>Provide one for Specialty Medical Patient Area.</td>
</tr>
<tr>
<td>Treatment Room, Laser</td>
<td>TRGS3</td>
<td>180</td>
<td>Provide one for Specialty Medical Patient Area.</td>
</tr>
<tr>
<td>Treadmill Room</td>
<td>OPTM1</td>
<td>180</td>
<td>Provide one if a Cardiology Clinic in the MTF is not available.</td>
</tr>
<tr>
<td>EKG Room</td>
<td>OPEC1</td>
<td>120</td>
<td>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)</td>
</tr>
<tr>
<td>Electroencephalography (EEG) Room</td>
<td>OPEE1</td>
<td>120</td>
<td>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)</td>
</tr>
<tr>
<td>Electromyography (EMG) Room</td>
<td>PTEM1</td>
<td>120</td>
<td>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)</td>
</tr>
<tr>
<td>Evoked Potential Room</td>
<td>EVPR1</td>
<td>120</td>
<td>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)</td>
</tr>
<tr>
<td>Room Name</td>
<td>Room Code</td>
<td>NSF</td>
<td>Space Criteria</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>-----------</td>
<td>-----</td>
<td>--------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Laboratory, Dermatology</td>
<td>LBDE1</td>
<td>120</td>
<td>Provide one if a Dermatology Laboratory is authorized.</td>
</tr>
<tr>
<td>Alcove, Portable Imaging</td>
<td>XRM01</td>
<td>30</td>
<td>Provide one for Specialty Medical Patient Area.</td>
</tr>
<tr>
<td>FA4: Specialty Medical Clinics Support Area:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medication Room</td>
<td>MEDP1</td>
<td>120</td>
<td>Provide one for the Specialty Medical Clinics Support Area.</td>
</tr>
<tr>
<td>Utility Room, Soiled</td>
<td>USCL1</td>
<td>120</td>
<td>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.</td>
</tr>
<tr>
<td>Utility Room, Clean</td>
<td>UCCL1</td>
<td>120</td>
<td>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.</td>
</tr>
<tr>
<td>Storage, Equipment</td>
<td>SRSE1</td>
<td>120</td>
<td>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 eight.</td>
</tr>
<tr>
<td>Alcove, Crash Cart</td>
<td>RCA01</td>
<td>30</td>
<td>Provide one for Specialty Medical Patient Area.</td>
</tr>
<tr>
<td>Room Name</td>
<td>Room Code</td>
<td>NSF</td>
<td>Space Criteria</td>
</tr>
<tr>
<td>-------------------</td>
<td>-----------</td>
<td>-----</td>
<td>---------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Alcove, Wheelchair</td>
<td>SRLW1</td>
<td>60</td>
<td>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.</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Room Name</th>
<th>Room Code</th>
<th>NSF</th>
<th>Space Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office, Clinic Chief</td>
<td>OFA04</td>
<td>120</td>
<td>Provide one for Specialty Medical Clinics.</td>
</tr>
<tr>
<td>Office, Executive Assistant</td>
<td>OFA04</td>
<td>120</td>
<td>Provide one for Specialty Medical Clinics.</td>
</tr>
<tr>
<td>Sub-Waiting</td>
<td>WRC03</td>
<td>60</td>
<td>Provide one if a Sub-Waiting for Specialty Medical Clinics Staff and Administrative Area is authorized.</td>
</tr>
<tr>
<td>Office, NCOIC / LCPO / LPO</td>
<td>OFA04</td>
<td>120</td>
<td>Provide one for Specialty Medical Clinics.</td>
</tr>
<tr>
<td>Team Collaboration Room</td>
<td>WRCH1</td>
<td>120</td>
<td>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.</td>
</tr>
<tr>
<td>Office, Private</td>
<td>OFA04</td>
<td>120</td>
<td>Provide one per each Specialty Medical Clinics provider and non-provider FTE position authorized to have a private office.</td>
</tr>
<tr>
<td>Office, Shared</td>
<td>OFA05</td>
<td>120</td>
<td>Provide one for every increment of two Specialty Medical Clinics provider and non-provider FTE positions authorized to have a shared office.</td>
</tr>
<tr>
<td>Room Name</td>
<td>Room Code</td>
<td>NSF</td>
<td>Space Criteria</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>-----------</td>
<td>-----</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Cubicle</td>
<td>OFA03</td>
<td>60</td>
<td>Provide one per each Specialty Medical Clinics provider and non-provider FTE position authorized to have a cubicle.</td>
</tr>
<tr>
<td>Conference Room</td>
<td>CRA01</td>
<td>240</td>
<td>Minimum NSF; provide an additional 60 NSF if the total number of FTE provider and non provider positions authorized is greater than ten.</td>
</tr>
<tr>
<td>Storage, Patient Records</td>
<td>MRS01</td>
<td>120</td>
<td>Provide one if Patient Records storage in the Specialty Medical Clinics Staff and Administrative area is authorized.</td>
</tr>
<tr>
<td>Copier</td>
<td>RPR01</td>
<td>120</td>
<td>Provide one for Specialty Medical Clinics.</td>
</tr>
<tr>
<td>Storage, Office Supplies</td>
<td>SRS01</td>
<td>60</td>
<td>Provide one for Specialty Medical Clinics.</td>
</tr>
<tr>
<td>Lounge, Staff</td>
<td>SL001</td>
<td>120</td>
<td>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.</td>
</tr>
<tr>
<td>Lockers, Personal Property</td>
<td>LR001</td>
<td>30</td>
<td>Minimum NSF, provide an additional 3 NSF per each FTE position not assigned a private office, shared office or cubicle greater than ten.</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Room Name</th>
<th>Room Code</th>
<th>NSF</th>
<th>Space Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office, Residency Program</td>
<td>OFA04</td>
<td>120</td>
<td>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.</td>
</tr>
</tbody>
</table>
### Resident Collaboration Room

<table>
<thead>
<tr>
<th>Room Name</th>
<th>Room Code</th>
<th>NSF</th>
<th>Space Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resident Collaboration</td>
<td>WKTM1</td>
<td>240</td>
<td>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.</td>
</tr>
</tbody>
</table>

### Classroom / Conference Room

<table>
<thead>
<tr>
<th>Room Name</th>
<th>Room Code</th>
<th>NSF</th>
<th>Space Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Classroom / Conference</td>
<td>CLR01</td>
<td>240</td>
<td>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.</td>
</tr>
</tbody>
</table>

### FA7: Endoscopy Suite Reception Area:

<table>
<thead>
<tr>
<th>Room Name</th>
<th>Room Code</th>
<th>NSF</th>
<th>Space Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Waiting, Endoscopy Suite</td>
<td>WRC01</td>
<td>120</td>
<td>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.</td>
</tr>
<tr>
<td>Playroom</td>
<td>PLAY1</td>
<td>120</td>
<td>Provide one if a Playroom for the Endoscopy Suite Reception Area is authorized.</td>
</tr>
</tbody>
</table>
### Reception

<table>
<thead>
<tr>
<th>Reception</th>
<th>Room Code</th>
<th>NSF</th>
<th>Space Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>RECP1</td>
<td></td>
<td>120</td>
<td>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.</td>
</tr>
</tbody>
</table>

### Kiosk, Patient Check-in

<table>
<thead>
<tr>
<th>Kiosk, Patient Check-in</th>
<th>Room Code</th>
<th>NSF</th>
<th>Space Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>CLSC1</td>
<td></td>
<td>30</td>
<td>Provide one for Endoscopy Suite.</td>
</tr>
</tbody>
</table>

### Patient Education

<table>
<thead>
<tr>
<th>Patient Education</th>
<th>Room Code</th>
<th>NSF</th>
<th>Space Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>CLSC3</td>
<td></td>
<td>120</td>
<td>Provide one for Endoscopy Suite.</td>
</tr>
</tbody>
</table>

### Consult Room

<table>
<thead>
<tr>
<th>Consult Room</th>
<th>Room Code</th>
<th>NSF</th>
<th>Space Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>OFDC2</td>
<td></td>
<td>120</td>
<td>Provide one for Endoscopy Suite.</td>
</tr>
</tbody>
</table>

### Alcove, Wheelchair

<table>
<thead>
<tr>
<th>Alcove, Wheelchair</th>
<th>Room Code</th>
<th>NSF</th>
<th>Space Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>SRLW1</td>
<td></td>
<td>60</td>
<td>Provide one for Endoscopy Suite.</td>
</tr>
</tbody>
</table>

### FA8: Endoscopy Suite Patient Area:

<table>
<thead>
<tr>
<th>Room Name</th>
<th>Room Code</th>
<th>NSF</th>
<th>Space Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cubicle, Patient Dressing</td>
<td>DR001</td>
<td>60</td>
<td>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.</td>
</tr>
<tr>
<td>Prep / Recovery Station</td>
<td>RROP1</td>
<td>120</td>
<td>Minimum two; provide an additional two per each Endoscopy, Colonoscopy / Proctoscopy / Sigmoidoscopy, ERCP, and Esophageal Motility Procedure Room.</td>
</tr>
<tr>
<td>Prep / Recovery, Negative Pressure Isolation Room</td>
<td>RRIR1</td>
<td>120</td>
<td>Provide one for Endoscopy Suite Patient Area.</td>
</tr>
<tr>
<td>Toilet, Prep / Recovery Patient</td>
<td>TLTU1</td>
<td>60</td>
<td>Minimum one; provide an additional one for every increment of eight Prep / Recovery Patient Rooms and Stations greater than eight.</td>
</tr>
<tr>
<td>Nurse Station</td>
<td>NSTA1</td>
<td>120</td>
<td>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.</td>
</tr>
<tr>
<td>Exam Room / Consult, Gastroenterology</td>
<td>EXR10</td>
<td>120</td>
<td>Provide one for Endoscopy Suite Patient Area.</td>
</tr>
<tr>
<td>Procedure Room, Endoscopy</td>
<td>TREE1</td>
<td>300</td>
<td>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)</td>
</tr>
<tr>
<td>---------------------------</td>
<td>-------</td>
<td>-----</td>
<td>--------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Procedure Room, Colonoscopy / Proctoscopy / Sigmoidoscopy</td>
<td>TRPE1</td>
<td>300</td>
<td>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)</td>
</tr>
<tr>
<td>Procedure Room, ERCP</td>
<td>XDCY1</td>
<td>480</td>
<td>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)</td>
</tr>
<tr>
<td>Control Room, ERCP</td>
<td>XACR1</td>
<td>120</td>
<td>Minimum one; provide an additional one for every increment of two ERCP Procedure Rooms greater than two.</td>
</tr>
<tr>
<td>Procedure Room, Esophageal Motility</td>
<td>XDRF1</td>
<td>300</td>
<td>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)</td>
</tr>
<tr>
<td>Nourishment Room</td>
<td>NCWD1</td>
<td>120</td>
<td>Provide one for Endoscopy Suite Patient Area.</td>
</tr>
<tr>
<td>Alcove, Portable Imaging</td>
<td>XRM01</td>
<td>30</td>
<td>Provide one for Endoscopy Suite Patient Area.</td>
</tr>
</tbody>
</table>

**FA9: Endoscopy Suite Support Area:**

<table>
<thead>
<tr>
<th>Room Name</th>
<th>Room Code</th>
<th>NSF</th>
<th>Space Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medication Room</td>
<td>MEDP1</td>
<td>120</td>
<td>Provide one for Endoscopy Suite Support Area.</td>
</tr>
<tr>
<td>Utility, Soiled Scope Wash</td>
<td>USCL2</td>
<td>120</td>
<td>Provide one for Endoscopy Suite Support Area.</td>
</tr>
<tr>
<td>Utility, Clean Scope Wash</td>
<td>UCCL2</td>
<td>120</td>
<td>Provide one for Endoscopy Suite Support Area.</td>
</tr>
<tr>
<td>Room Name</td>
<td>Room Code</td>
<td>NSF</td>
<td>Space Criteria</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>-----------</td>
<td>-----</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Utility Room, Soiled</td>
<td>USCL1</td>
<td>120</td>
<td>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.</td>
</tr>
<tr>
<td>Utility Room, Clean</td>
<td>UCCL1</td>
<td>120</td>
<td>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.</td>
</tr>
<tr>
<td>Storage, Stretcher</td>
<td>SRLW1</td>
<td>60</td>
<td>Provide one for Endoscopy Suite Support Area.</td>
</tr>
<tr>
<td>Alcove, Crash Cart</td>
<td>RCA01</td>
<td>30</td>
<td>Provide one for Endoscopy Suite Support Area.</td>
</tr>
<tr>
<td>Alcove, Blanket Warmer</td>
<td>RCA04</td>
<td>30</td>
<td>Provide one for Endoscopy Suite Support Area.</td>
</tr>
<tr>
<td>Laboratory, Gastroenterology</td>
<td>LBSP1</td>
<td>120</td>
<td>Provide one if a Gastroenterology Laboratory is authorized.</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Room Name</th>
<th>Room Code</th>
<th>NSF</th>
<th>Space Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office, Clinic Chief</td>
<td>OFA04</td>
<td>120</td>
<td>Provide one for Endoscopy Suite.</td>
</tr>
<tr>
<td>Office, Executive Assistant</td>
<td>OFA04</td>
<td>120</td>
<td>Provide one for Endoscopy Suite.</td>
</tr>
<tr>
<td>Sub-Waiting</td>
<td>WRC03</td>
<td>60</td>
<td>Provide one if a Sub-Waiting for the Endoscopy Suite Staff and Administrative Area is authorized.</td>
</tr>
<tr>
<td>Office, NCOIC / LCPO / LPO</td>
<td>OFA04</td>
<td>120</td>
<td>Provide one for Endoscopy Suite.</td>
</tr>
<tr>
<td>Team Collaboration Room</td>
<td>WRCH1</td>
<td>120</td>
<td>Minimum one; provide an additional one for every increment of eight Endoscopy, Colonoscopy / Proctoscopy / Sigmoidoscopy, ERCP and Esophageal Motility Procedure Rooms greater than eight.</td>
</tr>
<tr>
<td>Office, Private</td>
<td>OFA04</td>
<td>120</td>
<td>Provide one per each Endoscopy Suite provider and non-provider FTE position authorized to have a private office.</td>
</tr>
<tr>
<td>Office, Shared</td>
<td>OFA05</td>
<td>120</td>
<td></td>
</tr>
<tr>
<td>----------------</td>
<td>-------</td>
<td>------</td>
<td></td>
</tr>
<tr>
<td>Cubicle</td>
<td>OFA03</td>
<td>60</td>
<td></td>
</tr>
<tr>
<td>Conference Room</td>
<td>CRA01</td>
<td>240</td>
<td></td>
</tr>
<tr>
<td>Storage, Patient Records</td>
<td>MRS01</td>
<td>120</td>
<td></td>
</tr>
<tr>
<td>Copier</td>
<td>RPR01</td>
<td>120</td>
<td></td>
</tr>
<tr>
<td>Storage, Office Supplies</td>
<td>SRS01</td>
<td>60</td>
<td></td>
</tr>
<tr>
<td>Lounge, Staff</td>
<td>SL001</td>
<td>120</td>
<td></td>
</tr>
<tr>
<td>Locker / Changing Room, Male Staff</td>
<td>LR002</td>
<td>120</td>
<td></td>
</tr>
<tr>
<td>Locker / Changing Room, Female Staff</td>
<td>LR002</td>
<td>120</td>
<td></td>
</tr>
<tr>
<td>Toilet / Shower, Male Staff</td>
<td>TLTS1</td>
<td>60</td>
<td></td>
</tr>
</tbody>
</table>

- Provide one for every increment of two Endoscopy Suite provider and non-provider FTE positions authorized to have a shared office.
- Provide one per each Endoscopy Suite provider and non-provider FTE position authorized to have a cubicle.
- Minimum NSF; provide an additional 60 NSF if the total number of FTE positions authorized is greater than ten.
- Provide one if Patient Records Storage in the Endoscopy Suite is authorized.
- Provide one for Endoscopy Suite.
- Provide one for Endoscopy Suite.
- 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.
- 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.
- 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.
- 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.
<table>
<thead>
<tr>
<th>Room Name</th>
<th>Room Code</th>
<th>NSF</th>
<th>Space Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Toilet / Shower, Female Staff</td>
<td>TLTS1</td>
<td>60</td>
<td>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.</td>
</tr>
<tr>
<td>Lockers, Personal Property</td>
<td>LR001</td>
<td>30</td>
<td>Minimum NSF, provide an additional 3 NSF per each FTE position not assigned a private office, shared office or cubicle greater than ten.</td>
</tr>
</tbody>
</table>

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

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

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

<table>
<thead>
<tr>
<th>Room Name</th>
<th>Room Code</th>
<th>NSF</th>
<th>Space Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Renal Dialysis Station</td>
<td>RDC01</td>
<td>120</td>
<td>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)</td>
</tr>
<tr>
<td>Toilet, Dialysis Patient</td>
<td>TLTU1</td>
<td>60</td>
<td>Provide two for the Renal Dialysis Unit Patient Area.</td>
</tr>
<tr>
<td>Dialysis Station, Isolation Negative Pressure</td>
<td>RDC02</td>
<td>120</td>
<td>Provide one for the Renal Dialysis Unit Patient Area.</td>
</tr>
<tr>
<td>Room Name</td>
<td>Room Code</td>
<td>NSF</td>
<td>Space Criteria</td>
</tr>
<tr>
<td>-----------------------------------</td>
<td>-----------</td>
<td>-----</td>
<td>--------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Toilet, Isolation Patient</td>
<td>TLU1</td>
<td>60</td>
<td>Provide one for the Renal Dialysis Unit Patient Area.</td>
</tr>
<tr>
<td>Exam Room</td>
<td>EXRG1</td>
<td>120</td>
<td>Provide one for the Renal Dialysis Unit Patient Area.</td>
</tr>
<tr>
<td>Treatment Room</td>
<td>TRGM1</td>
<td>180</td>
<td>Provide one for the Renal Dialysis Unit Patient Area.</td>
</tr>
<tr>
<td>Patient Education Room</td>
<td>CLSC3</td>
<td>120</td>
<td>Provide one for the Renal Dialysis Unit Patient Area.</td>
</tr>
<tr>
<td>Nurse Station</td>
<td>NSTA1</td>
<td>120</td>
<td>Minimum NSF; provide an additional 30 NSF for every increment of ten Dialysis Rooms and Stations greater than ten.</td>
</tr>
<tr>
<td>Nourishment Room</td>
<td>NCWD1</td>
<td>120</td>
<td>Provide one for the Renal Dialysis Unit Patient Area.</td>
</tr>
</tbody>
</table>

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

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

<table>
<thead>
<tr>
<th>Room Name</th>
<th>Room Code</th>
<th>NSF</th>
<th>Space Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>RDWT1</td>
<td></td>
<td>120</td>
<td>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.</td>
</tr>
</tbody>
</table>

**FA14: Renal Dialysis Unit Staff and Administrative Area:**

<table>
<thead>
<tr>
<th>Room Name</th>
<th>Room Code</th>
<th>NSF</th>
<th>Space Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office, Unit Chief</td>
<td>OFA04</td>
<td>120</td>
<td>Provide one for Renal Dialysis Unit.</td>
</tr>
<tr>
<td>Office, Executive Assistant</td>
<td>OFA04</td>
<td>120</td>
<td>Provide one for Renal Dialysis Unit.</td>
</tr>
<tr>
<td>Sub-Waiting</td>
<td>WRC03</td>
<td>60</td>
<td>Provide one if Sub-Waiting for the Renal Dialysis Unit Staff and Administrative Area is authorized.</td>
</tr>
<tr>
<td>Office, NCOIC / LCPO / LPO</td>
<td>OFA04</td>
<td>120</td>
<td>Provide one for Renal Dialysis Unit.</td>
</tr>
<tr>
<td>Office, Nurse Manager</td>
<td>OFA04</td>
<td>120</td>
<td>Provide one for the Renal Dialysis Unit.</td>
</tr>
<tr>
<td>Team Collaboration Room</td>
<td>WRCH1</td>
<td>120</td>
<td>Minimum one; provide an additional one for every increment of ten Dialysis Stations greater than ten.</td>
</tr>
<tr>
<td>Office, Private</td>
<td>OFA04</td>
<td>120</td>
<td>Provide one per each Renal Dialysis Unit provider and non-provider FTE position authorized to have a private office.</td>
</tr>
<tr>
<td>Office, Shared</td>
<td>OFA05</td>
<td>120</td>
<td>Provide one for each increment of two Renal Dialysis Unit provider and non-provider FTE positions authorized to have a shared office.</td>
</tr>
<tr>
<td>Cubicle</td>
<td>OFA03</td>
<td>60</td>
<td>Provide one per each Renal Dialysis Unit provider and non-provider FTE position authorized to have a cubicle.</td>
</tr>
<tr>
<td>Conference Room</td>
<td>CRA01</td>
<td>240</td>
<td>Minimum NSF; provide and additional 60 NSF if the total number of FTE positions authorized is greater than ten.</td>
</tr>
<tr>
<td>Storage, Patient Records</td>
<td>MRS01</td>
<td>120</td>
<td>Provide one if Patient Records Storage in the Renal Dialysis Unit Staff and Administrative Area is authorized.</td>
</tr>
<tr>
<td>Copier</td>
<td>RPR01</td>
<td>120</td>
<td>Provide one for Renal Dialysis Unit.</td>
</tr>
<tr>
<td>Storage, Office Supplies</td>
<td>SRS01</td>
<td>60</td>
<td>Provide one for Renal Dialysis Unit.</td>
</tr>
<tr>
<td>--------------------------</td>
<td>-------</td>
<td>----</td>
<td>-----------------------------------</td>
</tr>
<tr>
<td>Lounge, Staff</td>
<td>SL001</td>
<td>120</td>
<td>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.</td>
</tr>
<tr>
<td>Lockers, Personal Property</td>
<td>LR001</td>
<td>30</td>
<td>Minimum NSF, provide an additional 3 NSF per each FTE position not assigned a private office, shared office or cubicle greater than ten.</td>
</tr>
</tbody>
</table>

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

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

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

<table>
<thead>
<tr>
<th>Room Name</th>
<th>Room Code</th>
<th>NSF</th>
<th>Space Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exam Room, Hematology-Oncology Infusion Clinic</td>
<td>EXRG1</td>
<td>120</td>
<td>Provide one for Hematology-Oncology Infusion Clinic.</td>
</tr>
<tr>
<td>Group Therapy Room</td>
<td>OPMH1</td>
<td>240</td>
<td>Provide one for Hematology-Oncology Infusion Clinic.</td>
</tr>
<tr>
<td>Room Name</td>
<td>Room Code</td>
<td>NSF</td>
<td>Space Criteria</td>
</tr>
<tr>
<td>-----------------------------------------------</td>
<td>-----------</td>
<td>-----</td>
<td>--------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Chemotherapy Infusion Station</td>
<td>OPCT1</td>
<td>120</td>
<td>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)</td>
</tr>
<tr>
<td>Toilet, Chemotherapy Patient</td>
<td>TLTU1</td>
<td>60</td>
<td>Minimum one; provide an additional one for every increment of ten Chemotherapy Infusion Stations greater than ten.</td>
</tr>
<tr>
<td>Nurse Station</td>
<td>NSTA1</td>
<td>120</td>
<td>Minimum NSF; provide an additional 30 NSF for every increment of ten Chemotherapy Infusion Stations greater than ten.</td>
</tr>
<tr>
<td>Procedure Room, Hematology-Oncology Infusion Clinic Patient</td>
<td>TRGM1</td>
<td>180</td>
<td>Provide one for Hematology-Oncology Infusion Clinic.</td>
</tr>
<tr>
<td>Phlebotomy Station</td>
<td>LBVP1</td>
<td>60</td>
<td>Provide one if a Satellite Laboratory for the Hematology-Oncology Infusion Clinic is authorized.</td>
</tr>
<tr>
<td>Laboratory, Hematology-Oncology Infusion Clinic Satellite</td>
<td>LBSP1</td>
<td>120</td>
<td>Provide one if a Satellite Laboratory for the Hematology-Oncology Infusion Clinic is authorized.</td>
</tr>
<tr>
<td>Nourishment Room</td>
<td>NCWD1</td>
<td>120</td>
<td>Provide one for Hematology-Oncology Infusion Clinic.</td>
</tr>
<tr>
<td>FA17: Hematology-Oncology Infusion Clinic Support Area:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vestibule, Chemotherapeutics Compounding Area</td>
<td>PHAR1 NEW RC</td>
<td>60</td>
<td>Provide one if a Hematology-Oncology Pharmacy is authorized.</td>
</tr>
<tr>
<td>Anteroom, Chemotherapeutics Compounding Area</td>
<td>PHAR1</td>
<td>120</td>
<td>Provide one if a Hematology-Oncology Pharmacy is authorized.</td>
</tr>
<tr>
<td>Clean Room, Chemotherapeutics Compounding Area</td>
<td>PHC01 New RC</td>
<td>120</td>
<td>Provide one if a Hematology-Oncology Pharmacy is authorized.</td>
</tr>
<tr>
<td>Medication Room</td>
<td>MEDP1</td>
<td>120</td>
<td>Provide one for the Hematology-Oncology Infusion Clinic Support Area.</td>
</tr>
<tr>
<td>Room Name</td>
<td>Room Code</td>
<td>NSF</td>
<td>Space Criteria</td>
</tr>
<tr>
<td>-----------------------------</td>
<td>-----------</td>
<td>-----</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Utility Room, Soiled</td>
<td>USCL1</td>
<td>120</td>
<td>Minimum NSF; provide an additional 30 NSF per for every increment of ten Chemotherapy Infusion Stations greater than ten.</td>
</tr>
<tr>
<td>Utility Room, Clean</td>
<td>UCCL1</td>
<td>120</td>
<td>Minimum NSF; provide an additional 30 NSF per for every increment of ten Chemotherapy Infusion Stations greater than ten.</td>
</tr>
<tr>
<td>Storage, Equipment</td>
<td>SRSE1</td>
<td>120</td>
<td>Minimum NSF; provide an additional 30 NSF per for every increment of ten Chemotherapy Infusion Stations greater than ten.</td>
</tr>
<tr>
<td>Alcove, Crash Cart</td>
<td>RCA01</td>
<td>30</td>
<td>Provide one for Hematology-Oncology Infusion Clinic.</td>
</tr>
<tr>
<td>Alcove, Blanket Warmer</td>
<td>RCA04</td>
<td>30</td>
<td>Provide one for Hematology-Oncology Infusion Clinic.</td>
</tr>
<tr>
<td>Alcove, Wheelchair</td>
<td>SRLW1</td>
<td>60</td>
<td>Provide one for Hematology-Oncology Infusion Clinic.</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Room Name</th>
<th>Room Code</th>
<th>NSF</th>
<th>Space Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office, Clinic Chief</td>
<td>OFA04</td>
<td>120</td>
<td>Provide one for Hematology-Oncology Infusion Clinic.</td>
</tr>
<tr>
<td>Office, Executive Assistant</td>
<td>OFA04</td>
<td>120</td>
<td>Provide one for Hematology-Oncology Infusion Clinic.</td>
</tr>
<tr>
<td>Sub-Waiting</td>
<td>WRC03</td>
<td>60</td>
<td>Provide one if a Sub-Waiting for the Hematology-Oncology Infusion Clinic Staff and Administrative Area is authorized.</td>
</tr>
<tr>
<td>Office, NCOIC / LCPO / LPO</td>
<td>OFA04</td>
<td>120</td>
<td>Provide one for Hematology-Oncology Infusion Clinic.</td>
</tr>
<tr>
<td>Team Collaboration Room</td>
<td>WRCH1</td>
<td>120</td>
<td>Minimum one; provide an additional one for every increment of eight Infusions Stations greater than eight.</td>
</tr>
<tr>
<td>Office, Private</td>
<td>OFA04</td>
<td>120</td>
<td>Provide one per each Hematology-Oncology Infusion Clinic provider and non-provider FTE position authorized to have a private office.</td>
</tr>
<tr>
<td>Office, Shared</td>
<td>OFA05</td>
<td>120</td>
<td>Provide one for every increment of two Hematology-Oncology Infusion Clinic provider and non-provider FTE positions authorized to have a shared office.</td>
</tr>
<tr>
<td>Description</td>
<td>Code</td>
<td>NSF</td>
<td></td>
</tr>
<tr>
<td>-----------------------------------</td>
<td>--------</td>
<td>-----</td>
<td></td>
</tr>
<tr>
<td>Cubicle</td>
<td>OFA03</td>
<td>60</td>
<td></td>
</tr>
<tr>
<td>Conference Room</td>
<td>CRA01</td>
<td>240</td>
<td></td>
</tr>
<tr>
<td>Storage, Patient Records</td>
<td>MRS01</td>
<td>120</td>
<td></td>
</tr>
<tr>
<td>Copier</td>
<td>RPR01</td>
<td>120</td>
<td></td>
</tr>
<tr>
<td>Storage, Office Supplies</td>
<td>SRS01</td>
<td>60</td>
<td></td>
</tr>
<tr>
<td>Lounge, Staff</td>
<td>SL001</td>
<td>120</td>
<td></td>
</tr>
<tr>
<td>Lockers, Personal Property</td>
<td>LR001</td>
<td>30</td>
<td></td>
</tr>
</tbody>
</table>

Provide one per each Hematology-Oncology Infusion Clinic provider and non-provider FTE position authorized to have a cubicle.

Minimum NSF; provide an additional 60 NSF if the total number of FTE positions authorized is greater than ten.

Provide one if Patient Records Storage for the Hematology-Oncology Infusion Clinic is authorized.

Provide one for Hematology-Oncology Infusion Clinic.

Provide one for Hematology-Oncology Infusion Clinic.

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.

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