3.20.1 PURPOSE AND SCOPE

This document provides space planning criteria for dental functions at military installations including independent dental facilities and those which are part of another medical facility. The criteria have been developed on the basis that dentistry will continue to be a dynamic and progressive health profession and that modern facilities are essential to provide comprehensive dental care.

3.20.2 DEFINITIONS

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

<u>Bite-wing X-ray:</u> A type of intraoral X-ray that shows the details of the upper and lower teeth in one area of the mouth. Bite-wing X-rays are used to detect decay between teeth and changes in bone density caused by gum disease. They are also useful in determining the proper fit of a crown and the marginal integrity of fillings.

<u>Cephalometric projection</u>: A type of extraoral X-ray that shows the entire side of the head. This type of X-ray is useful in examining the teeth in relation to the jaw and profile of the patient. Orthodontists use cephalometric projections to develop their treatment plans. This image can be film-based or digital.

<u>Conscious sedation</u>: A type of sedation that induces an altered state of consciousness in which patients are awake and are usually able to speak and respond to verbal cues throughout the procedure, communicating any discomfort they experience to the provider.

<u>DENTAC</u>: An Army term for Dental Area Command that is typically aligned with Army Medical Command Regions. A DENTAC command/commander may have a number of dental clinics under their command.

<u>Dental clinic</u>: A healthcare treatment facility appropriately-staffed and equipped to provide outpatient dental care that may include a wide-range of specialized and consultative support. The dental clinic may be in a hospital as well as a stand-alone facility. Postgraduate education in the arts and sciences of dentistry may be conducted in this facility based upon the requirements of each service.

<u>Dental hygienist:</u> A person who, under the supervision of a dentist, assumes delegated responsibility for providing preventive and therapeutic dental services for patients.

<u>Dental treatment room (DTR)</u>: A properly outfitted room including a dental chair, dental unit, and dental light where clinical dental procedures are performed.

<u>Dental treatment room, general, with conscious sedation support</u>: A dental treatment room (general dentistry) equipped to support conscious sedation (e.g., high vacuum, oxygen, etc.).

<u>Digital X-ray imaging</u>: Instead of developing X-ray film in a dark room, the X-rays are captured electronically and sent directly to the computer where they can be viewed on a screen, stored electronically, printed, or transferred to another storage server for further image sharing and transfer.

<u>Dental high vacuum for oral evacuation (DRV)</u>: Dry vacuum system used to support patient care in dental treatment rooms and oral surgeries.

<u>Dental low vacuum for oral evacuation (DLV)</u>: Low vacuum, high volume, wet pipe system to provide scavenging, collection, and disposal of liquids, solids and aerosols from dental procedures.

3.20.2 DEFINITIONS: Continued

<u>DIPC</u>: An Air Force term for the dental instrument processing center (DIPC) which is the central sterile (CS) suite for the dental clinic.

Endodontics: The dental specialty that involves diseases of the tooth root, dental pulp, and surrounding tissue. The most common procedure done in endodontics is root-canal therapy.

Endodontist: A dentist specializing in diseases of the tooth root, dental pulp, and surrounding tissue.

Exodontist: A dentist specializing in the extraction of teeth.

Extraoral X-ray: Extraoral (outside the mouth) X-rays are primarily used to show the jaw and skull rather than individual teeth. They allow the dentist to look at impacted teeth, monitor the growth and development of the jaws relative to the teeth, and identify potential problems between the teeth and jaws and the temporomandibular joint (TMJ). Types of extraoral X-rays include panoramic X-rays and cephalometric projections.

<u>Full-time equivalent (FTE)</u>: A work force equivalent to one individual working full time for a specific period which may be made up of several part-time individuals or one full-time individual. For space planning purposes, the actual "head count" on the peak (most active) daily work shift is used and includes military, civilian, and contractor personnel.

<u>General dentistry</u>: The diagnosis, treatment, and management of the overall oral health care needs of patients, including gum care, fillings, crowns, veneers, bridges and preventive education.

<u>Intraoral X-ray</u>: Intraoral (inside the mouth) X-rays are the most common type of dental X-rays. They allow the dentist to find cavities, check the health of the tooth root, check the status of developing teeth, and monitor the general health of the patient's teeth and jawbone.

<u>Intraoral video camera</u>: An advanced micro-camera system that allows the dentist to project any intraoral (inside the mouth) or facial image on a color monitor, store that image electronically for easy recall, and produce a high-quality hard-copy image (photograph) with appropriate annotations. The intraoral camera is a diagnostic tool that enhances the visibility of areas of the mouth that are difficult to see and facilitates educating the patient about restorative treatment.

<u>Intravenous sedation</u>: Medications used intravenously (through the bloodstream) to produce varying levels of sedation.

<u>Occlusal X-ray</u>: A type of intraoral X-ray that is larger and shows full tooth development and placement. Each X-ray reveals the entire arch of teeth in either the upper or lower jaw.

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

<u>Oral and maxillofacial surgery</u>: A specialty of dentistry that includes dentoalveolar surgery and the diagnosis and correction of diseases, injuries, and defects of the mouth and jaws.

<u>Oral hygiene treatment room (OHTR)</u>: A room similar to a dental treatment room (DTR) that is used by the dental hygienist to treat patients.

3.20.2 DEFINITIONS: Continued

Oral surgeon: A dentist who specializes in the diagnosis and surgical treatment of diseases, injuries, and deformities of the mouth and supporting structures (e.g., wisdom teeth, misaligned jaws, tumors).

<u>Orthodontics and dentofacial orthopedics</u>: The dental specialty that involves correcting malocclusions, or "bad bites" as a result of crowded, missing or extra teeth, or jaws that are out of alignment. Treatment includes the use of braces, retainers, headgear, and other appliances.

<u>Panoramic X-ray</u>: A type of extraoral X-ray that shows the entire mouth (all the teeth in both the upper and lower jaws) on a single X-ray using a special X-ray machine. A panoramic X-ray allows the dentist to detect the position of fully-emerged as well as emerging teeth, identify impacted teeth, and aid in the diagnosis of tumors.

<u>Pediatric dentistry:</u> An age-defined dental specialty that provides preventive and therapeutic oral health care for infants and children through adolescence; formerly known as a pedodontist.

Pedodontist: Pediatric dentist.

<u>Periapical X-ray</u>: A type of intraoral X-ray that shows several entire teeth (crowns and roots) and includes a small amount of the periapical bone (surrounding the root tips). Periapical X-rays are used to detect any abnormalities of the root structure and surrounding bone structure.

<u>Periodontics</u>: The dental specialty that involves preventing gum (periodontal) disease — an infection of the tissues surrounding and supporting the teeth. Periodontal disease is a major cause of tooth loss in adults.

<u>Prosthodontics</u>: The area of dentistry involving the diagnosis, treatment planning, rehabilitation, and maintenance of patients with complex clinical conditions. These patients have missing or deficient teeth and/or oral tissues that can be rehabilitated with crowns, veneers, fixed and removable partial dentures, and implant-supported prostheses.

<u>Provider</u>: An individual 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. Dentists and dental hygienists are the primary providers in a dental clinic.

3.20.3 POLICIES

Organization/configuration of dental clinics. To the extent possible, dental clinics should be consolidated into the minimum number of facilities consistent with providing dental care effectively to the beneficiary population. Dental clinics may be combined with other medical facilities or may be independent facilities. When no other medical facilities are available, dental clinics of five dental treatment rooms (DTRs) or less may be combined with other compatible non-medical facilities. Dental clinics may be incorporated within hospitals to provide dental care required as an adjunct to medical care, to support an oral surgery program, and to provide routine beneficiary care.

3.20.3 POLICIES: Continued

Number and specialty mix of dental treatment rooms. Each service will determine the number and specialty mix of dental providers at a given location based on service-specific staffing formulas and teaching requirements. The following guidelines should be used to determine the number of dental treatment rooms (DTRs):

One DTR Per:	1.5 to Two DTRs Per:	Two DTRs Per:	Three DTRs Per:
Dental Clinic Officer-in- Charge ⁽¹⁾	Endodontist (2) Prosthodontist (2)	General or Comprehensive Dentist	Orthodontist
Dental Resident	Periodontist (3)	Oral/Maxillofacial	
Dental Residency Director		Surgeon (4) (or full-time exodontist)	
Dental Hygienist (or equivalent)		Pediatric Dentist	

- Dental Clinic Officer-in-Charge DTR allocation may vary from none to two DTRS depending on anticipated patient care duties.
- Round up to nearest whole number (e.g., one endodontist = two DTRS, three endodontists = five DTRS).
- (3) Periodontists should generally be assigned one specialty DTR to accommodate implants and one normal dental treatment room to accommodate routine periodontal treatment.
- (4) Clinics routinely performing surgery, but with no oral surgeon or full-time exodontist assigned, will be allocated one dedicated surgical DTR in addition to the above requirements.

Dental treatment rooms for general dentistry, oral hygiene, prosthodontics, endodontics, and pediatrics should be similarly sized with little variation in the room layout. Treatment rooms used for periodontics and oral surgery should be larger with more specialized layouts and equipment. An open-bay configuration should generally be planned for orthodontics. Procedures requiring that the patient be under general anesthesia should be performed in a surgery suite (e.g., within a hospital or free-standing surgery center).

There are limited benchmarks in the civilian sector regarding productivity of DTRs due to the variance of how dentists work and how they use ancillary support staff. The 2002 Survey of Dental Practice conducted by the American Dental Association (ADA) found that the average number of total patient visits per week (including visits to dental hygienists) among all dentists was 88.9 in 2001. An average of 62.2 total patient visits per week occurred when hygienist appointments were excluded. These figures have been fairly constant over the preceding five-year period. Civilian sector dentists typically use two to three DTRs at a time such that each DTR could accommodate 20-30 non-hygienist visits per week or 1,000 to 1,500 annual visits.

Provision of administrative offices and workstations. Private and non-private administrative offices and workstations will be provided as follows:

- Offices, private. With the exception of the offices provided for "Key Personnel," all other private offices in the Dental Clinic will be 100 net square feet as stated in Section 2.1 (General Administration). Private offices will be provided for the following personnel:
 - Staff who must meet with patients/customers on a regular basis and hold private consultations/discussions.
 - The senior officer and enlisted member of a department.
 - Staff who supervise others and must hold frequent, private counseling sessions with their junior staff. This
 does not include staff who supervise a very small number of people and who would only occasionally need
 private counseling space. These staff can use available conference rooms or other private areas for their
 infrequent counseling needs.

- 3.20.3 POLICIES: Continued
 - Any personnel who interview or counsel patients with patient privacy concerns.
- Offices, non-private or shared space. Personnel, who require office space, but not a private office, will be
 provided space in a shared office. Non-private or shared office space will be programmed at 60 net square feet
 per occupant.

Dental Area Command (DENTAC). Space for a dental area command should be programmed with a dental clinic only if personnel are projected to occupy the positions listed in the space criteria on a full-time basis. When the dental area commander is also the chief of a dental clinic, duplicate offices should not be programmed.

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

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

3.20.4 PROGRAM DATA REQUIRED:

The following program data is required to plan an individual dental clinic (addressed in this section):

- Will dental records be stored in the clinic?
 - How many records will be stored in the clilnic?
 - How many shelves high (5 or 6) will be used?
 - How many record technicians are projected?
- How many FTE General Dentists are projected?
- How many FTE Comprehensive Dentists are projected?
- How many FTE Periodontics Dentists are projected?
- How many FTE Endodontic Dentists are projected?
- How many FTE Orthodontic Dentists are projected?
- How many FTE Oral/Maxillofacial Surgeons are projected?
- How many FTE Exodontists are projected?
- How many FTE Prosthodontic Dentists are projected?
- How many FTE Pediatric Dentists are projected?
- How many FTE Oral Hygienists are projected?
- Is a Patient Education Cubicle projected?
- Will conscious sedation be administered in the clinic?
- Will a multi-chair configuration be used in the clinic?
- How many Prosthodontic Lab technicians are projected?
- Will equipment units/alcoves be provided in a central X-ray area?

Will an Intraoral Dental X-ray be provided?

Will a panographic/cephalometric X-ray be provided?

3.20.4 PROGRAM DATA REQUIRED: Continued

- How many dental repair technicians are projected?
- Is cylinder storage required?
 - Will the cylinder storage be internal?
 - Will a Dental mechanical room be required?
- How many FTE secretaries are projected?
- What is the projected number of NCOIC/LCPO/LPO's?
- Will there be an Air Force Flight Commander assigned to this clinic?
- How many FTE Dental Treatment Coordinators are projected?
- How many FTE staff will require a private office? Note: Do not count Commanders, Senior Enlisted Advisors
 or Dentists.
- How many FTE staff will require a dedicated cubicle? Note: Do not count Secretaries.
- How many FTEs are projected on the peak shift? Note: This information is used to calculate the number of Staff Toilets and the size of the Staff Lounge.
- How many FTE officers or officer equivalents are projected? Note: This information is used to calculate the size of the Conference Room. See Chapter 2.1 (General Administration), paragraph 2.1.2 for Personnel Equivalents Chart.
- Will there be vending machines in the staff lounge?
- Will there be an on-call sleeping room?
- Will space for a DENTAC be planned?
 - Is a Director of Clinical Services projected?
 - Is a Director for Administration projected?
 - Is a Comptroller/Resource Manager projected?
 - How many Budget Analysts are projected?
 - Is a QA/Risk Manager projected?
 - Is a Data Manager projected?
 - Is an IM/IT Manager projected?
 - Is an Operations Manager projected?
 - Is a Manpower Manager projected?
- Will there be a Dental Residency program?
 - Is a Residency Director projected?
 - Is an Assistant Residency Director projected?
 - Is a Residency secretary projected?
 - How many Residents are projected?
 - How many FTE staff will require a private office?
 - How many FTE staff will require a dedicated cubicle?

3.20.5 SPACE CRITERIA

The spaces listed on the following page are typically required for dental clinics. It is not intended that planners include all functional areas listed herein unless there is a valid requirement at the installation under consideration.

	Room	AUTHORI	ZED	PLANNING
FUNCTION	Code	m ²	nsf	RANGE/COMMENTS
RECEPTION AREAS				
Waiting Room	WRC01	13.94	150	Minimum 150 nsf. If Total # of DTRs is <=20, provide 1.5 seats at 16 nsf per seat for 95% of the seats and 25 nsf per seat for 5% of the seats for handicapped waiting. If Total # of DTRs is >20, provide 1 seat at 16 nsf per seat for 95% of the seats and 25 nsf for 5% of the seats for handicapped waiting.
Reception (GP)	RECP1	11.15	120	If Total # of DTRs is <25 DTRs.
		13.94	150	If Total # of DTRs is => 25DTRs.
Records Storage, Fixed Shelving	MRS01	0.93	10	Minimum 10 nsf. Divide the number of projected records by the linear feet conversion faction of 40 times .06 square feet per linear feet time shelf factor (5 shelves = .502; 6 shelves = .42). Provide 60 nsf for the first Records Technician and an additional 40 nsf for each Records Technician greater than one.
Distribution/Record Signing Area	OFA03	5.57	60	Provide 60 nsf for clinics with <15 DTRs and 120 nsf for clinics with 15 or more DTRs; contiguous with dental records area.
Copy/Storage Area	RPR01	4.65	50	Provide 50 nsf for clinics with <20 DTRs and 100 nsf for clinics with 20 or more DTRs; contiguous with dental records area; includes copier/printer/fax, file cabinet, and office supplies.
Patient Education Cubicle	CLSC2	2.79	30	Depending on concept of operations; computer workstation for patient self-assessment, research, and printing.

Public Toilets

NA

NA

Per Section 6.1 (Common Areas).

	Room	AUTHO	ORIZED	PLANNING
FUNCTION	Code	m ²	nsf	RANGE/COMMENTS

PATIENT AREAS

Dental Treatment Room, General (GP)	DNTG1	11.61	125	Two per FTE General or Comprehensive Dentist and one per Dental Resident and Dental Residency Director.
Dental Treatment Room, Multi-Chair (GP)	DNTG3	22.30	240	Two chairs; 120 nsf per each chair/bay. Divide the Total # of DTRs by two.
Dental Treatment Room, Oral Hygiene	DNTG2	11.61	125	One per Oral Hygienist.
Dental Treatment Room, w/Conscious Sedation Support	DNTC1	11.61	125	If Conscious Sedation is project, provide one DTR per Comprehensive Dentist.
Dental Treatment Room, Pediatrics	DNTP3	11.61	125	Two per pediatric dentist.
Dental Treatment Room, Orthodontics (GP)	DNTB1	11.15	120	Three rooms per orthodontist.
Dental Treatment Room, Oral Surgery (GP)	DNTS1	13.45	145	Two per Oral Maxillofacial Surgeon or full-time Exodontist.
Dental Treatment Room, Endodontics (GP)	DNTE1	11.61	125	Two per Endodontist.
Dental Treatment Room, Prosthodontics (GP)	DNTP1	13.47	145	Two per Prosthodondist.
Dental Treatment Room, Periodontics	DNTP2	13.47	145	Two per Periodontist.
Patient Toilet, Unisex	TLTU1	4.65	50	One per 3-8 dentists/hygienists; two for 9-15 dentists/hygienists, and three for 16 or more dentists/hygienists.

	Room	AUTHO	RIZED	PLANNING	
FUNCTION	Code	\mathbf{m}^2	nsf	RANGE/COMMENTS	

Dental CS Suite/DIPC, Combined	DNSC4	13.47	145	For clinics with <7 DTRs; includes decontam-ination with sink, instrument wrapping, sterilizing, and clean storage as designated areas within a combined room.
Dental CS Suite/DIPC, Small: (GP)	DNSC1	33.91	365	For clinics with 7 to 15 DTRs. This Clinic Support Area contains the following Room Codes CSDE1, CSSS1 and CSIA1 (listed below Room Code DNSC1 heading).
Decontamination Room	CSDE1	11.15	120	Includes receiving window, decontamination area with sink, instrument washers, and pass- through window to clean room.
Clean Room	CSSS1	13.47	145	Includes pass-through window from decontam, prep/pack area with sink, sterilizers, and pass-through window to sterile instrument storage room.
Sterile Instrument Storage Room	CSIA1	9.29	100	Pass-through window from clean room, storage shelving, and small refrigerator for dental materials.
Dental CS Suite/DIPC, Medium: (GP)	DNSC2	43.20	465	For clinics with 16 to 40 DTRs; DNSC3 may be considered if there is no hospital-based central sterile (CS) backup. This Clinic Support Area contains the following Room Codes CSDE2, CSSS2 and CSIA1 (listed below Room Code DNSC2 heading).
Decontamination Room	CSDE2	13.47	145	Includes receiving window, decontamination area with sink, instrument washers (one passthrough to clean room), and passthrough window to clean room.

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

Clean Room	CSSS2	18.58	200	Includes pass-through window from
Clean Room	C5552	18.38	200	decontam, prep/pack area with sink, sterilizers, and pass-through window to sterile instrument storage room.
Sterile Instrument Storage Room	CSIA1	11.15	120	Pass-through window from clean room, storage shelving, and small refrigerator for dental materials.
Dental CS Suite/DIPC, Large: (GP)	DNSC3	59.92	645	For clinics with 41 to 60 DTRs; custom configuration required for >60 DTRs. This Clinic Support Area contains the following Room Codes CSDE3, CSSS3 and CSIA1 (listed below Room Code DNSC3 heading).
Decontamination Room	CSDE3	16.72	180	Includes receiving window, decontamination area with sink, instrument washers (one pass- through to clean room), and pass- through window to clean room.
Clean Room	CSSS3	29.26	315	Includes pass-through window from decontam, prep/pack area with sink, sterilizers, and pass-through window to sterile instrument storage room; pass-through sterilization equipment should be considered in large dental clinics.
Sterile Instrument Storage Room	CSIA1	13.94	150	Pass-through window from clean room, storage shelving, and small refrigerator for dental materials; may include pass-through sterilization eqipment from clean room.
DTR Support, Soiled Instrument Drop-Off	USCL1	3.72	40	One for clinics with >75 DTRs; decentralized instrument drop-off area; contains carts for instrument transport to CS/DIPC.
DTR Support, Mini Lab	DNSA2	9.29	100	One for clinics with >40 DTRs; to support DTRs that are remote from the prosthodontics lab.

	Room	AUTHO	RIZED	PLANNING
FUNCTION	Code	\mathbf{m}^2	nsf	RANGE/COMMENTS

Central X-Ray Area:				
Dental X-Ray, Sub- Waiting	WRC01	2.32	25	25 nsf per X-ray unit/alcove.
Dental X-Ray, Intraoral	DNXI1	10.22	110	One per clinic. Includes one intraoral unit with monitor; casework/sink, and patient chair.
Dental X-Ray, Dual Intraoral/ Panoramic/Cephalometric (GP)	DNXD1	13.47	145	One per clinic. Includes intraoral unit, pano (with or without ceph attachment), monitor, and casework/sink.
X-Ray Support	DNXR1	7.43	80	For film or digital support.
Cephalometric Analysis (Two Stations)	XVC01	9.29	100	One per clinic with orthodontist assigned.
Model Storage Room	SRS01	3.72	40	
Dental Self Preparation Area	DNSP1	7.43	80	One per clinic with orthodontist assigned.
Resuscitation Cart Alcove	RCA01	1.86	20	One per clinic; placed in immediate vicinity of areas performing conscious sedation.
Wheelchair Storage Area	SRLW1	1.86	20	One per surgical treatment area.
Dental Prosthetics Lab, Small (GP)	DNPL1	29.73	320	Minimum 320 nsf (provides space for one Lab Tech); add 80 nsf for second tech; includes porcelain workstation and administrative workstation.
Dental Prosthetics Lab, Medium (GP)				For lab with three to four techs.
Lab Work Room	DNPF1	39.02	420	Minimum 420 nsf (provides space for three techs); add 80 nsf for fourth tech.
Porcelain/Administrative Room	DNPC1	11.15	120	Includes administrative workstation and two porcelain workstations; contiguous with DNPF1.

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

Dental Prosthetics Lab, Large (GP)				For lab with five or more techs.
Lab Work Room	DNPF2	55.74	600	Minimum 600 nsf (provides space for five techs); add 80 nsf for each additional tech.
Porcelain Room	DNPC2	13.01	140	Provide separate porcelain room for labs with five or more techs; 140 nsf accommodates up to three porcelain workstations; contiguous with DNPF2.
Administrative Workroom	WRCH1	9.29	100	Provide separate administrative office for labs with five or more techs; contiguous with DNFP2.
Central Issue/Supply	MMGS1	11.15	120	Provide 10 nsf per DTR for first 20 DTRs then 5 nsf per DTR for remaining DTRs plus 60 nsf for optional administrative workstation; 120 nsf minimum, 600 nsf maximum.
Dental Repair Station	BMWS1	14.86	160	Depending on concept of operations; one per dental biomedical technician (includes his/her equipment).
Linen Control, Soiled	LCSL1	3.72	40	Provide 40 nsf for clinics with <40 DTRs and add 20 nsf for clinics with 40 or more DTRs; contiguous with staff lockers.
Linen Control, Clean	LCCL1	5.57	60	Provide 60 nsf for clinics with <15 DTRs and add 20 nsf for clinics 15 or more DTRs; contiguous with staff lockers; maximum 120 nsf.
Cylinder Storage, Internal	SRGC1	3.72	40	Depending on concept of operations; for internal storage.
Cylinder Storage, External	SRGC2	3.72	40	Depending on concept of operations; for external storage.

FUNCTION Room Code	m² nơ f	PLANNING PANCE/COMMENTS
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CLINIC SUPPORT AREAS

Dental Mechanical Room	MECH1	11.15	120	Depending on concept of operations; for dental vacuum and compressed air systems equipment consolidated with main mechanical
				room.

STAFF AND ADMINISTRATIVE AREAS

Office, Clinic Commander	OFC01	13.94	150	One per clinic with <31 DTRs.
	OFC02	16.72	180	One per clinic with 31 to 45 DTRs.
	OFC03	20.44	220	One per clinic with >45 DTRs.
Office, Senior Enlisted	OFA01	9.29	100	One per clinic.
Officer	OFA02	9.29	100	
Secretary w/Visitor Waiting	SEC01	11.15	120	Per authorized secretary FTE.
NCOIC/LCPO/LPO Office	OFA01	9.29	100	Depending on concept of
(in addition to the senior enlisted officer)	OFA02	9.29	100	operations; per authorized FTE requiring private office.
Support/Clinical/Lab Flight	OFA01	9.29	100	One office per position for clinics
Commander Office (Air	OFA02	9.29	100	with 30 or more DTRs (if not a
Force Specific)	OFA03	5.57	60	specialty department head); one cubicle per position for clinics with <30 DTRs.
Dentist Cubicle	OFA03	5.57	60	One cubicle per dentist not already assigned administrative space.
Dental Care Optimization	OFA01	9.29	100	One office per two dentists assigned
(DCO) Treatment Coordinator Office	OFA02	9.29	100	for use by DCO treatment coordinator and staff supporting two dentists.
Private Office	OFA01	9.29	100	Depending on concept of
	OFA02	9.29	100	operations; per authorized FTE requiring private office.
Administrative Cubicle	OFA03	5.57	60	Depending on concept of operations; per authorized FTE requiring cubicle.

	Room	AUTHO	PLANNING	
FUNCTION	Code	\mathbf{m}^2	nsf	RANGE/COMMENTS

STAFF AND ADMINISTRATIVE AREAS

Conference Room (GP-CRA01)	CRA01	23.23	250	One per dental clinic with eight or less officers (or officer equivalent personnel); minimum.
	CRA02	27.87	300	One per dental clinic with 9-16 officers (or officer equivalent personnel).
	CRA03	37.16	400	One per dental clinic with >16 officers (or officer equivalent personnel).
Staff Lounge (GP)	SL001	13.01	140	Minimum 140 nsf for 10 FTEs on peak shift. Add 5 nsf for each peak shift FTE over 10. Maximum size is 300 nsf without vending machines and 320 nsf if vending machines are included.
Staff Locker/Changing Room (GP)	LR002	9.29	100	Minimum 100 nsf for FTE Dental Providers equal to or less than 10. Add 6 nsf for each FTE Dental Provider >10 and divide by 2 for male/female split.
Staff Toilet, Unisex	TLTU1	4.65	50	Minimum for <=15 FTEs on peak shift; for >15 add 50 nsf for increments of 15.
On-Call Sleeping Room (GP)	DUTY1	11.15	120	One per Dental Clinic if required by Concept of Operations.
Toilet/Shower, On-Call	TLTS1	5.57	60	One per Dental Clinic if required by Concept of Operations.

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

DENTAC/INSTALLATION ADMINISTRATIVE COMPLEX

Office, DENTAC Commander Commanding Officer	OFC03	25.08	270	Presumes authorized FTE is 0-6; see Section 2.1 (General Administration) for other ranks and space.
Office, Executive Director	OFC01	16.72	180	Per authorized FTE; see Section 2.1 (General Administration).
Office, Senior Enlisted	OFA01	9.29	100	Per authorized FTE; see Section 2.1
Advisor	OFA02	9.29	100	(General Administration).
Secretary w/Visitor Waiting	SEC01	11.15	120	Per authorized FTE secretary.
Office, Director of Clinical	OFA01	9.29	100	Per authorized FTE.
Services	OFA02	9.29	100	
Office, Director for	OFA01	9.29	100	Per authorized FTE requiring a
Administration	OFA02	9.29	100	private office.
Office,	OFA02	9.29	100	Per authorized FTE.
Comptroller/Resource Manager	OFA02	9.29	100	
Office, Budget Analyst	OFA01	9.29	100	Per authorized FTE.
	OFA02	9.29	100	
Office, QA/Risk Manager	OFA01	9.29	100	Per authorized FTE.
	OFA02	9.29	100	
Office, Data Manager	OFA01	9.29	100	Per authorized FTE.
	OFA02	9.29	100	
Office, IM/IT Manager	OFA01	9.29	100	Per authorized FTE.
	OFA02	9.29	100	
Office, Operations	OFA01	9.29	100	Per authorized FTE.
Management	OFA02	9.29	100	
Office, Manpower	OFA01	9.29	100	Per authorized FTE.
Ī	OFA02	9.29	100	

	Room	AUTHORIZED		PLANNING	
FUNCTION	Code	m ²	nsf	RANGE/COMMENTS	

RESIDENCY PROGRAM

Office, Director of Dental	OFA01	9.29	100	Per authorized FTE; DTR used by
Residency	OFA02	9.29	100	Residency Director may be sized at
				145 nsf to accommodate
				demonstrations/teaching.
Office, Assistant Residency	OFA01	9.29	100	Per authorized FTE.
Director	OFA02	9.29	100	
Secretary w/Visitor Waiting	SEC01	11.15	120	Per authorized FTE secretary.
Office, Residency	OFA01	9.29	100	Per authorized FTE.
Administration	OFA02	9.29	100	
Cubicle, Resident	OFA03	5.57	60	For Air Force and Navy. Per
				authorized FTE.
	OFA03	3.72	40	For Army. Per authorized FTE.
Residency Library	LIBB1	13.01	140	Depending on concept of
				operations; one per residency
				program.
Conference Room (GP)	CRA01	23.23	250	Per Section 2.1 (General
				Administration).
Instrument/Equipment	SRS01	7.43	80	Depending on concept of
Room, Residency				operations; one per residency
				program.
Cephalometric Analysis	XVC01	11.15	120	Depending on concept of
Viewing Room				operations; one per orthodontic
Model Storage Room,	SRS01	3.72	40	residency program.
Residency				