DoD Space Planning Criteria

Chapter 319: Preventive Medicine
July 1, 2017

Originating Component: Defense Health Agency Facilities Division

Effective: July 1, 2017

Releasability: No Restrictions

Purpose: This issuance: To provide space planning criteria guidance in support of planning, programming and budgeting for DoD Military Health System (MHS) facilities.

SUMMARY of CHANGE

This revision, dated July 1, 2017 includes the following:

- On page 16, section 4.2. FA2: PUBLIC HEALTH / COMMUNITY HEALTH CLINIC, room 14, Laboratory, Point of Care (LBSP1), changed the room code to "(LBPC1)" and the stated net square footage from 120 NSF to 60 NSF to align with SEPS.

- On page 22, section 4.8. FA8: WELLNESS CENTER, room 7, Kitchen, Demonstration, (NCWD5), changed the stated net square footage from 360 NSF to 300 NSF to align with SEPS.

TABLE OF CONTENTS

SECTION 1: PURPOSE AND SCOPE

1.1. PURPOSE AND SCOPE This chapter outlines space planning criteria for Preventive Medicine services and programs within the Military Health System (MHS); it was developed with the assumption that a Preventive Medicine Clinic may be a standalone clinic or part of a Military Treatment Facility (MTF).

Preventive Medicine can be provided in freestanding community-based facilities, as well as ambulatory clinics (sometimes collocated with Primary Care / Family Medicine) in or directly adjacent to hospital-based services. Preventive medicine is practiced throughout the medical facility; and, as such, it is important that certain spaces not be duplicated. For example, this chapter has space planning criteria for the Public Health / Community Health Clinic. Some of the spaces in this clinic are also provided for in DoD Chapter 301: Primary Care / Family Medicine. Another example is the Audiometric booths which are found in this chapter under the functional area for Occupational Health. Audiometric booths are also found in DoD Chapter 310: Audiology, Hearing Conservation, Speech-Language Pathology and ENT Clinic.

Space planning criteria for Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering are included in this chapter. Most of these spaces are lab and administrative spaces and will not be located within the clinic where patients are seen.

A Wellness Center is included in this chapter. Wellness Centers may be collocated with Primary Care / Family Medicine or with Preventive Medicine clinics. Since the Wellness Center includes gym space, it is important for the planner not to duplicate this space if the Wellness Center is located in the MTF. The planner should be aware that there is already rehab gym space in Physical Therapy (DoD Chapter 390) and Orthopedics-Podiatry-Chiropractic-Sports Medicine. (DoD Chapter 312).

The space planning criteria in this chapter apply to all Military Treatment Facilities (MTFs) and are based on current DoD policies and directives, established and/or anticipated best practices, industry guidelines and standards, and input from DoD Subject Matter Experts (SME) and Defense Health Agency (DHA) Service contacts. As directed by the DHA, these space criteria are primarily workload driven; additional drivers are staffing and mission. Room Codes (RC's) in this document are based on the latest version of DoD UFC-4-510-01, Appendix B.

SECTION 2: OPERATING RATIONALE AND BASIS OF CRITERIA

2.1.

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 the Preventive Medicine 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. Calculation of the number and -in some cases- the area (NSF) of rooms is performed in one of the following methods:

1. Directly workload-driven. The directly workload-driven rooms are based on workload projections entered in response to the Workload Input Data Statements (IDSs) included in Section 3. The directly workload driven rooms in this chapter are Public Health / Community Health Exam Room and Exam / Consult Room, Occupational Health Exam Room and Exam / Consult Room; Single and Multi-Patient Audiometric Booths, and Aerospace and Undersea Medicine Exam Room.

2. Indirectly workload-driven. The indirectly workload-driven rooms are derived from the preceding group. They are typically in the Reception and Support Functional Areas. Examples are Waiting, or the number of clean or soiled utility rooms.

3. Mission or Staffing-driven. The mission / staffing-driven rooms are created based on Boolean ‘yes/no’ or numeric responses to the Mission and Staffing IDSs.

E. The Net Square Feet (NSF) and Room Code (RC) for each room are listed in Section 5: Space Planning Criteria of this chapter was provided by or approved by the Defense Health Agency (DHA) Template Board.

F. Calculation of each of the directly workload-driven room types is implemented in SEPS based on the following formulae:

Formula 1: Annual Room Workload Capacity

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

Fixed Values:

1. Average Length of Encounter (ALOE)
2. Operating Days per Year: 240
3. Hours of Operation per Day: 8
4. Utilization Factor: 80%

If Average Length of Encounter (ALOE): 60 Minutes:

$$\frac{(\mathbf{240\ Operating\ Days\ per\ Year})(\mathbf{8\ Hours\ of\ Operation\ per\ Day})}{\mathbf{60\ Minutes} \div \mathbf{60\ Minutes}} (\mathbf{0.80}) = \mathbf{1,536}$$

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

Workload based room calculation examples:

Exam Room Criteria Statement 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.

$$(2)(1{,}536) = 3{,}072$$

Step 4: Subtract Step 3 from Step 1.

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

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

$$92 < 307$$

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.

$$\frac{13{,}464}{1{,}536} = 8.76$$

Eight additional rooms generated

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

$$(8)(1{,}536) = 12{,}288$$

Step 4: Subtract Step 3 from Step 1.

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

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

$$1{,}176 > 307$$

One additional room generated.

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

2. Exam Room Criteria Statement 2:

Minimum two if the projected number of encounters is between 307 and 3,072; provide an additional one for every increment of 1,536 projected encounters greater than 3,072; the minimum annual workload to generate a room is 307.

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 two" condition.

$$12{,}500 - 3{,}072\ (1{,}536\ x\ 2) = 9{,}428$$

Two rooms generated (the minimum)

Step 2: Divide the resulting value by the increment.

$$\frac{9{,}428}{1{,}536} = 6.13$$

Six additional rooms generated

Step 3: Multiply the whole value ("6" in the previous step) by the increment.

$$(6)(1{,}536) = 9{,}216$$

Step 4: Subtract Step 3 from Step 1.

$$9{,}428 - 9{,}216 = 212$$

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

$$212 < 307$$

No additional rooms generated.

Total number of rooms generated by 12,500 annual encounters: 8

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 two" condition.

$$18{,}000 - 3{,}072\ (1{,}536\ x\ 2) = 14{,}928$$

Two rooms generated (the minimum)

Step 2: Divide the resulting value by the increment.

$$\frac{14{,}928}{1{,}536} = 9.71$$

Nine additional rooms generated

Step 3: Multiply the whole value ("9" in the previous step) by the increment.

$$(9)(1{,}536) = 13{,}824$$

Step 4: Subtract Step 3 from Step 1.

$$14{,}928 - 13{,}824 = 1{,}104$$

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

$$1{,}104 > 307$$

One additional room generated.

Total number of rooms generated by 18,000 annual encounters: 12

TABLE 1: WORKLOAD PARAMETER CALCULATION

319: PREVENTIVE MEDICINE				
CLINICAL ENCOUNTERS / PROCEDURES	**AVERAGE LENGTH OF CLINIC ENCOUNTER (minutes)**	**UTILIZATION RATE**	**ANNUAL WORKLOAD PER EXAM / PROCEDURE ROOM (*)**	**MINIMUM ANNUAL WORKLOAD TO GENERATE ONE ROOM (20%)**
Public Health / Community Health	60	80%	1,536	307
Occupational Health Clinic	45	80%	2,048	410
Hearing Assessment	60	80%	1,536	307
Aerospace / Undersea Medicine	60	80%	1,536	307

(*) 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 Input Data Statements.

SECTION 3: PROGRAM DATA REQUIRED

3.1. INPUT DATA STATEMENTS: PUBLIC HEALTH / COMMUNITY HEALTH CLINIC.

Input Data Statements are based on questions about Workload (W), Mission (M), Staffing (S) and Miscellaneous (Misc) information.

1. Is a Public Health / Community Health Clinic authorized? (M)
2. Is the Public Health / Community Health Clinic a stand-alone clinic? (M)
3. How many annual Public Health / Community Health encounters are projected? (W)
4. Are Exam / Consult Rooms authorized for Public Health / Community Health Clinic Patient Care? (M) (If not, Exam Rooms (based on workload) will be provided)
    a. How many Public Health / Community Health Clinic provider FTE positions are authorized? (S)
5. How many Public Health / Community Health Clinic Airborne Infection Isolation (AII) Exam Rooms, greater than one, are authorized by the Infection Control Risk Assessment (ICRA)? (Misc)
6. Is an Immunization Room for the Public Health / Community Health Clinic authorized? (M)
7. Is a Phlebotomy Station for the Public Health / Community Health Clinic authorized? (M)
8. Is a Point of Care Laboratory for the Public Health / Community Health Clinic authorized? (M)
9. Is Patient Records Storage for the Public Health / Community Health Clinic authorized? (Misc)
10. Is the Public Health / Community Health Clinic located in an MTF that provides access to other large classrooms? (Misc)
11. How many Public Health / Community Health Clinic FTE positions are authorized? (S)
    a. How many Public Health / Community Health Clinic FTE positions are authorized to have a private office? (Misc)
    b. How many Public Health / Community Health Clinic FTE positions are authorized to have a shared office? (Misc)
    c. How many Public Health / Community Health Clinic FTE positions are authorized to have a cubicle? (Misc)
    d. How many Public Health / Community Health Clinic FTEs will work on peak shift? (Misc)

3.2 INPUT DATA STATEMENTS: OCCUPATIONAL HEALTH CLINIC

1. Is an Occupational Health Clinic authorized? (M)
2. Is the Occupational Health Clinic a stand-alone clinic? (M)
3. How many annual Occupational Health Clinic encounters are projected? (W)
4. How many annual Hearing Assessment encounters are projected? (W)
5. Is Vision Screening for the Occupational Health Clinic authorized? (M)
6. Is a Single-Patient Audiometric Booth for the Occupational Health Clinic authorized? (M) (if not, a Multi-Patient Audiometric Booth will be provided)

7. Is an EKG Room for the Occupational Health Clinic authorized? (M)
8. Is Respiratory Mask Fitting for the Occupational Health Clinic authorized? (M)
9. Is Patient Records Storage for the Occupational Health Clinic authorized? (Misc)
10. How many Occupational Health Clinic FTE positions are authorized? (S)
    a. How many Occupational Health Clinic FTE positions are authorized to have a private office? (Misc)
    b. How many Occupational Health Clinic FTE positions are authorized to have a shared office? (Misc)
    c. How many Occupational Health Clinic FTE positions are authorized to have a cubicle? (Misc)
    d. How many Occupational Health Clinic FTEs will work on peak shift? (Misc)
11. Is an Occupational Health Graduate Medical Education (GME) program authorized? (M)
    a. How many Occupational Health Resident / Student FTE positions are authorized? (S)

3.3 INPUT DATA STATEMENTS: AEROSPACE / UNDERSEA MEDICINE CLINIC

1. Is an Aerospace / Undersea Medicine Clinic authorized? (M)
2. Is the Aerospace / Undersea Medicine Clinic a stand-alone clinic? (M)
3. How many annual Aerospace / Undersea Medicine Clinic encounters are projected? (W)
4. How many Aerospace / Undersea Medicine Clinic Airborne Infection Isolation (AII) Exam Rooms, greater than one, are authorized by the Infection Control Risk Assessment (ICRA)? (Misc)
5. Is a Full Eye Lane for the Aerospace / Undersea Medicine Clinic authorized? (M)
6. Is a Single-Patient Audiometric Booth for the Aerospace / Undersea Medicine Clinic authorized? (M)
7. Is an EKG Room for the Aerospace / Undersea Medicine Clinic authorized? (M)
8. Is Patient Records Storage for the Aerospace / Undersea Medicine Clinic authorized? (Misc)
9. How many Aerospace / Undersea Medicine Clinic FTE positions are authorized? (S)
    a. How many Aerospace / Undersea Medicine Clinic FTE positions are authorized to have a private office? (Misc)
    b. How many Aerospace / Undersea Medicine Clinic FTE positions are authorized to have a shared office? (Misc)
    c. How many Aerospace / Undersea Medicine Clinic FTE positions are authorized to have a cubicle? (Misc)
    d. How many Aerospace / Undersea Medicine Clinic FTEs will work on peak shift? (Misc)

3.4 INPUT DATA STATEMENTS: GENERAL

1. Is a Patient Check-in Kiosk for the Common Reception authorized? (M)
2. Is a Medication Room for the Common Support authorized? (M)
3. Is a Conference Room for the Common Staff and Administration authorized? (Misc)
4. Is a Preventive Medicine Graduate Medical Education (GME) program authorized? (M)
    a. How many Preventive Medicine Resident / Student FTE positions are authorized? (S)

3.5 INPUT DATA STATEMENTS: WELLNESS CENTER

1. Is a Wellness Center authorized? (M)
2. Is a second Intake / Screening Room for the Wellness Center authorized? (M)

3.6 INPUT DATA STATEMENTS: INDUSTRIAL HYGIENE, ENVIRONMENTAL AND BIOENVIRONMENTAL ENGINEERING

1. Is Industrial Hygiene, Environmental and Bioenvironmental Sciences authorized? (M)
2. Is Respiratory Mask Fitting for Industrial Hygiene, Environmental and Bioenvironmental Sciences authorized? (M)
3. Is a Health Physicist Lab FTE position authorized? (M)
4. Is a Hazardous Material Storage for the Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering authorized? (M)
5. How much additional area, beyond 240 NSF, is authorized for the Medical Response Storage? (Misc)
6. How many Industrial Hygiene, Environmental and Bioenvironmental Sciences FTE positions are authorized? (S)
    a. How many Industrial Hygiene, Environmental and Bioenvironmental Sciences FTE positions are authorized to have a private office? (Misc)
    b. How many Industrial Hygiene, Environmental and Bioenvironmental Sciences FTE positions are authorized to have a shared office? (Misc)
    c. How many Industrial Hygiene, Environmental and Bioenvironmental Sciences FTE positions are authorized to have a cubicle? (Misc)
    d. How many Industrial Hygiene, Environmental and Bioenvironmental Sciences FTEs will work on peak shift? (Misc)
7. How many Industrial Hygiene FTE positions are authorized? (S)
8. How many Water Lab FTE positions are authorized? (S)
9. How many Entomology Lab FTE positions are authorized? (S)

SECTION 4: SPACE PLANNING CRITERIA

For calculation of the number of Vending Machine areas, Public Toilets, Communication Closets, and Janitor Closets for this Chapter, please refer to DoD Space Planning Criteria Chapter 610: Common Areas

4.1. FA1: COMMON RECEPTION.

1. **Waiting (WRC01)** **120 NSF**
   Minimum NSF if a Public Health / Community Health Clinic or an Occupational Health Clinic or an Aerospace / Undersea Medicine Clinic are not stand-alone clinics; provide an additional 60 NSF for every increment of two Public Health / Community Health Clinic, Occupational Health Clinic and Aerospace / Undersea Medicine Clinic Exam Rooms, of all types, greater than four.

2. **Reception (RECP1)** **120 NSF**
   Minimum NSF if a Public Health / Community Health Clinic or an Occupational Health Clinic or an Aerospace / Undersea Medicine Clinic are not stand-alone clinics; provide an additional 60 NSF for every increment of eight Public Health / Community Health Clinic, Occupational Health Clinic and Aerospace / Undersea Medicine Clinic Exam Rooms, of all types, greater than eight.

   Minimum allocated NSF accommodates two FTEs.

3. **Kiosk, Patient Check-in (CLSC1)** **30 NSF**
   Provide one if a Public Health / Community Health Clinic or an Occupational Health Clinic or an Aerospace / Undersea Medicine Clinic are not stand-alone clinics and if a Patient Check-in Kiosk for the Common Reception Area is authorized.

4.2. FA 2: PUBLIC HEALTH / COMMUNITY HEALTH CLINIC.

1. **Alcove, Height / Weight (EXR11)** **30 NSF**
   Minimum one if a Public Health / Community Health Clinic is authorized; provide an additional one for every increment of eight Public Health / Community Health Clinic Exam Rooms, of all types, greater than eight.

2. **Exam Room Public Health / Community Health, (EXRG1)** **120 NSF**
   Minimum one if Exam / Consult Rooms are not authorized for Public Health / Community Health Clinic Patient Care and if a Public Health / Community Health Clinic is authorized and if the projected number of Public Health / Community Health annual encounters is between 307 and 1,536; provide an additional one for every increment of 1,536 projected Public Health / Community Health annual encounters greater than 1,536; the minimum annual workload to generate a room is 307. (Refer to Section 2)

3. **Exam / Consult, Public Health / Community Health (EXR10) 120 NSF**
   Provide one per each Public Health / Community Health Clinic provider FTE position authorized if Exam / Consult Rooms are authorized for Public Health / Community Health Clinic Patient Care and if a Public Health / Community Health Clinic is authorized.

4. **Exam Room, Public Health / Community Health Airborne Infection Isolation (AII) (EXRG6) 180 NSF**
   Minimum one if a Public Health / Community Health Clinic is authorized; provide an additional one per each Airborne Infection Isolation (AII) Exam Room, greater than one, authorized by the MTF's Infection Control Risk Assessment (ICRA).

   This room is part of the total number of workload driven exam rooms.

5. **Toilet, Public Health / Community Health Airborne Infection Isolation (AII) Patient (TLTU1) 60 NSF**
   Provide one per each Public Health / Community Health Clinic Airborne Infection Isolation (AII) Exam Room.

6. **Immunization (OPIR1) 240 NSF**
   Provide one if a Public Health / Community Health Clinic is authorized and if an Immunization Room for the Public Health / Community Health Clinic is authorized.

7. **Waiting, Immunization (WRC01) 120 NSF**
   Provide one if a Public Health / Community Health Clinic is authorized and if an Immunization Room for the Public Health / Community Health Clinic is authorized.

8. **Office, Private (OFA04) 120 NSF**
   Provide one per each Public Health / Community Health Clinic FTE position authorized to have a private office if a Public Health / Community Health Clinic is authorized.

9. **Office, Shared (OFA05) 120 NSF**
   Provide one for every increment of two Public Health / Community Health Clinic FTE positions authorized to have a shared office if a Public Health / Community Health Clinic is authorized.

10. **Cubicle (OFA03) 60 NSF**
    Provide one per each Public Health / Community Health Clinic FTE position authorized to have a cubicle if a Public Health / Community Health Clinic is authorized.

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

11. **Storage, Patient Records (FILE1)** **120 NSF**
Provide one if a Public Health / Community Health Clinic is authorized and if Patient Records Storage for the Public Health / Community Health Clinic is authorized.

12. **Toilet, Patient (TLTU1)** **60 NSF**
Minimum one if a Public Health / Community Health Clinic is authorized; provide an additional one for every increment of eight Public Health / Community Health Clinic Exam Rooms and Exam / Consult Rooms greater than eight.

13. **Phlebotomy Station (LBVP1)** **120 NSF**
Provide one if a Public Health / Community Health Clinic is authorized and if a Phlebotomy Station for the Public Health / Community Health Clinic is authorized.

14. **Laboratory, Point of Care (LBPC1)** **60 NSF**
Provide one if a Public Health / Community Health Clinic is authorized and if a Point of Care Laboratory for the Public Health / Community Health Clinic is authorized.

15. **Toilet, Specimen Collection (TLTU1)** **60 NSF**
Provide one if a Public Health / Community Health Clinic is authorized and if a Satellite Lab for the Public Health / Community Health Clinic is authorized.

16. **Classroom (CLR01)** **300 NSF**
Minimum one if a Public Health / Community Health Clinic is authorized; provide an additional one if the Public Health / Community Health Clinic is not located in an MTF that provides access to other large classrooms.

4.3. FA3: OCCUPATIONAL HEALTH CLINIC.

1. **Alcove, Height / Weight (EXR11)** **30 NSF**
Provide one if an Occupational Health Clinic is authorized.

2. **Vision Screening (PEVS1)** **120 NSF**
Provide one if an Occupational Health Clinic is authorized and if Vision Screening for Occupational Health Clinic is authorized.

3. **Exam Room, Occupational Health (EXRG1)** **120 NSF**
Minimum two if an Occupational Health Clinic is authorized and if the projected number of Occupational Health Clinic annual encounters is between 410 and 4,096; provide an additional one for every increment of 2,048 projected Occupational Health Clinic encounters greater than 4,096; the minimum annual workload to generate a room is 410. (Refer to Section 2)

4. **Exam / Consult, Occupational Health (EXR10)** **120 NSF**
Minimum one if an Occupational Health Clinic is authorized; provide an additional one for every increment of eight Occupational Health Clinic Exam Rooms greater than eight.

5. **Audiometric Booth, Single-Patient (PEHS1)** **120 NSF**
   Minimum one if an Occupational Health Clinic is authorized and if a Single-Patient Audiometric Booth is authorized and if the projected annual Hearing Assessment encounters is between 307 and 1,536; provide an additional one for every increment of 1,536 projected annual Hearing Assessment encounters greater than 1,536; the minimum workload to generate an additional Single-Patient Audiometric Booth is 307. (Refer to Section 2)

6. **Audiometric Booth, Multi-Patient (PEHS2)** **360 NSF**
   Minimum one if an Occupational Health Clinic is authorized and if a Single-Patient Audiometric Booth is not authorized and if the projected annual Hearing Assessment encounters is between 2,458 and 12,288; provide an additional one for every increment of 12,288 projected annual Hearing Assessment encounters greater than 12,288; the minimum workload to generate an additional Multi-Patient Audiometric Booth is 2,458. (Refer to Section 2)

7. **EKG Room (OPEC1)** **120 NSF**
   Provide one if an Occupational Health Clinic is authorized and if an EKG Room for the Occupational Health Clinic is authorized.

8. **Respiratory Mask Fitting (RMF01)** **120 NSF**
   Provide one if an Occupational Health Clinic is authorized and if Respiratory Mask Fitting for the Occupational Health Clinic is authorized.

9. **Toilet, Patient (TLTU1)** **60 NSF**
   Minimum one if an Occupational Health Clinic is authorized; provide an additional one for every increment of eight Occupational Health Clinic Exam Rooms and Exam / Consult Rooms greater than eight.

10. **Office, Private (OFA04)** **120 NSF**
    Provide one per each Occupational Health Clinic FTE position authorized to have a private office if an Occupational Health Clinic is authorized.

11. **Office, Shared (OFA05)** **120 NSF**
    Provide one for every increment of two Occupational Health Clinic FTE positions authorized to have a shared office if an Occupational Health Clinic is authorized.

12. **Cubicle (OFA03)** **60 NSF**
    Provide one per each Occupational Health Clinic FTE position authorized to have a cubicle if an Occupational Health Clinic is authorized.

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

13. **Storage, Patient Records (FILE1)** **120 NSF**
Provide one if an Occupational Health Clinic is authorized and if Patient Records Storage for the Occupational Health Clinic is authorized.

4.4. FA4: AEROSPACE / UNDERSEA MEDICINE CLINIC.

1. **Alcove, Height / Weight (EXR11)** **30 NSF**
Provide one if an Aerospace / Undersea Medicine Clinic is authorized.

2. **Exam Room, Aerospace / Undersea Medicine (EXRG1)** **120 NSF**
Minimum one if an Aerospace / Undersea Medicine Clinic is authorized; provide an additional one for every increment of 1,536 projected annual Aerospace / Undersea Medicine encounters greater than 1,536; the minimum annual workload to generate a room is 307. (Refer to Section 2)

3. **Exam Room, Aerospace / Undersea Medicine Airborne Infection Isolation (AII) (EXRG6)** **180 NSF**
Minimum one if an Aerospace / Undersea Medicine Clinic is authorized; provide an additional one per each Airborne Infection Isolation (AII) Exam Room, greater than one, authorized by the MTF's Infection Control Risk Assessment (ICRA).

   This room is part of the total number of workload driven exam rooms.

4. **Toilet, Aerospace / Undersea Medicine Airborne Infection Isolation (AII) Patient (TLTU1)** **60 NSF**
Provide one per each Aerospace / Undersea Medicine Airborne Infection Isolation (AII) Exam Room.

5. **Treatment Room (TRGM1)** **180 NSF**
Provide one if an Aerospace / Undersea Medicine Clinic is authorized.

6. **Immunization (OPIR1)** **240 NSF**
Provide one if an Aerospace / Undersea Medicine Clinic is authorized.

7. **Waiting, Immunization (WRC01)** **120 NSF**
Provide one if an Aerospace / Undersea Medicine Clinic is authorized.

8. **Eye Lane, Full (EYEL1)** **240 NSF**
Provide one if an Aerospace / Undersea Medicine Clinic is authorized and if a Full Eye Lane for the Aerospace / Undersea Medicine Clinic is authorized.

9. **Eye Lane, Electronic (EYEL2)** **120 NSF**
Provide one if an Aerospace / Undersea Medicine Clinic is authorized and if a Full Eye Lane for the Aerospace / Undersea Medicine Clinic is not authorized.

10. **Audiometric Booth, Single Patient (PEHS1)** **120 NSF**
    Provide one if an Aerospace / Undersea Medicine Clinic is authorized and if a Single Patient Audiometric Booth for the Aerospace / Undersea Medicine Clinic is authorized.

11. **EKG Room (OPEC1)** **120 NSF**
    Provide one if an Aerospace / Undersea Medicine Clinic is authorized and if an EKG Room for the Aerospace / Undersea Medicine Clinic is authorized.

12. **Toilet, Patient (TLTU1)** **60 NSF**
    Minimum one if an Aerospace / Undersea Medicine Clinic is authorized; provide an additional one for every increment of eight Aerospace / Undersea Medicine Clinic Exam Rooms greater than eight.

13. **Office, Private (OFA04)** **120 NSF**
    Provide one per each Aerospace / Undersea Medicine Clinic FTE position authorized to have a private office if an Aerospace / Undersea Medicine Clinic is authorized.

14. **Office, Shared (OFA05)** **120 NSF**
    Provide one for every increment of two Aerospace / Undersea Medicine Clinic FTE positions authorized to have a shared office if an Aerospace / Undersea Medicine Clinic is authorized.

15. **Cubicle (OFA03)** **60 NSF**
    Provide one per each Aerospace / Undersea Medicine Clinic FTE position authorized to have a cubicle if an Aerospace / Undersea Medicine Clinic is authorized.

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

16. **Storage, Patient Records (FILE1)** **120 NSF**
    Provide one if an Aerospace / Undersea Medicine Clinic is authorized and if Patient Records Storage for the Aerospace / Undersea Medicine Clinic is authorized.

4.5. FA5: COMMON SUPPORT.

1. **Medication Room (MEDP1)** **120 NSF**
   Provide one if a Medication Room for the Common Support Area is authorized.

2. **Utility Room, Clean (UCCL1)** **120 NSF**
   Minimum one; provide an additional one for every increment of sixteen Exam Rooms, of all types, greater than sixteen.

3. **Utility Room, Soiled (USCL1)** **90 NSF**
   Minimum one; provide an additional one for every increment of sixteen Exam Rooms, of all types, greater than sixteen.

4. **Storage, Equipment (SRSE1)** **120 NSF**
   Minimum one; provide an additional one for every increment of sixteen Exam Rooms, of all types, greater than sixteen.

5. **Alcove, Wheelchair (SRLW1)** **30 NSF**
   Provide one for the Common Support Area.

4.6. FA6: COMMON STAFF AND ADMINISTRATION.

1. **Office, Public Health / Community Health Clinic Chief (OFA04)** **120 NSF**
   Provide one if a Public Health / Community Health Clinic is authorized.

2. **Office, Occupational Health Clinic Chief (OFA04)** **120 NSF**
   Provide one if an Occupational Health Clinic is authorized.

3. **Office, Aerospace / Undersea Medicine Clinic Chief (OFA04)** **120 NSF**
   Provide one if an Aerospace / Undersea Medicine Clinic is authorized.

4. **Office, Public Health / Community Health Clinic NCOIC / LCPO / LPO (OFA04)** **120 NSF**
   Provide one if a Public Health / Community Health Clinic is authorized.

5. **Office, Occupational Health Clinic NCOIC / LCPO / LPO (OFA04)** **120 NSF**
   Provide one if an Occupational Health Clinic is authorized.

6. **Office, Aerospace / Undersea Medicine Clinic NCOIC / LCPO / LPO (OFA04)** **120 NSF**
   Provide one if an Aerospace / Undersea Medicine Clinic is authorized.

7. **Storage, Files (FILE1)** **60 NSF**
   Provide one for the Common Support Area.

8. **Conference Room (CRA01)** **240 NSF**
   Minimum NSF if a Conference Room for the Common Staff and Administration is authorized; provide an additional 60 NSF if the total number of FTE positions authorized for the Public Health / Community Health Clinic, the Occupational Health Clinic, and the Aerospace / Undersea Medicine Clinic 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.

9. **Team Collaboration Room (WRCH1)** **120 NSF**
   Minimum one; provide an additional one for every increment of four Public Health / Community Health Clinic, Occupational Health Clinic, and Aerospace / Undersea Medicine Clinic FTE positions authorized greater than eight.

10. **Copy / Office Supply (RPR01)** **120 NSF**
    Provide one for the Common Support Area.

11. **Lounge, Staff (SL001)** **120 NSF**
    Minimum NSF if the number of Public Health / Community Health Clinic, Occupational Health Clinic, and Aerospace / Undersea Medicine Clinic FTEs working on peak shift is ten; provide an additional 60 NSF for every increment of five Public Health / Community Health Clinic, Occupational Health Clinic, and Aerospace / Undersea Medicine Clinic FTEs working on peak shift greater than ten; maximum 360 NSF.

12. **Toilet, Staff (TLTU1)** **60 NSF**
    Minimum one; provide an additional one for every increment of fifteen Public Health / Community Health Clinic, Occupational Health Clinic, and Aerospace / Undersea Medicine Clinic FTE positions greater than fifteen on peak shift.

13. **Lockers, Personal Property (LR001)** **30 NSF**
    Minimum NSF; provide an additional 30 NSF for every increment of four Public Health / Community Health Clinic, Occupational Health Clinic, and Aerospace / Undersea Medicine Clinic FTE positions not assigned a private office, a shared office or a cubicle greater than eight.

4.7. FA7: GME / TRAINING.

1. **Office, Preventive Medicine Residency Program Director (OFA04)** **120 NSF**
   Provide one if a Preventive Medicine Graduate Medical Education (GME) program is authorized.

2. **Resident Collaboration Room, Preventive Medicine (WKTM1)** **240 NSF**
   Minimum NSF if a Preventive Medicine Graduate Medical Education (GME) program is authorized; provide an additional 60 NSF per each Preventive Medicine Resident / Student FTE position authorized greater than two.

   Minimum NSF accommodates two Residents, and a Collaboration / Reference area.

3. **Conference / Classroom /, Preventive Medicine (CRA01)** **240 NSF**
   Provide one if a Preventive Medicine Graduate Medical Education (GME) program is authorized and if the number of Preventive Medicine Resident / Student FTE positions authorized is greater than five.

4. **Office, Occupational Health Residency Program Director (OFA04) 120 NSF**
   Provide one if an Occupational Health Graduate Medical Education (GME) program is authorized.

5. **Resident Collaboration Room, Occupational Health (WKTM1) 240 NSF**
   Minimum NSF if an Occupational Health Graduate Medical Education (GME) program is authorized; provide an additional 60 NSF per each Occupational Health Resident / Student FTE position authorized greater than two.

6. **Conference / Classroom, Occupational Health (CRA01) 240 NSF**
   Provide one if an Occupational Health Graduate Medical Education (GME) program is authorized and if the number of Occupational Health Resident / Student FTE positions authorized is greater than five.

4.8. FA8: WELLNESS CENTER.

1. **Reception (RECP3) 60 NSF**
   Provide one if a Wellness Center is authorized.

2. **Open Gym Area (PTEA1) 300 NSF**
   Provide one if a Wellness Center is authorized.

   For stretching / warm-up / cool-down before going to monitored equipment and for structured group exercise classes such as Aerobics, Yoga, Tai Chi and Flexibility.

3. **Exercise Area (PTES1) 420 NSF**
   Provide one if a Wellness Center is authorized.

4. **Intake / Screening (EXRG4) 120 NSF**
   Minimum one if a Wellness Center is authorized; provide an additional one if a second Intake / Screening Room is authorized.

5. **Complementary and Alternative Medicine (CAM) (PTBT1) 180 NSF**
   Provide one if a Wellness Center is authorized.

6. **Biofeedback (OPMH3) 120 NSF**
   Provide one if a Wellness Center is authorized.

7. **Kitchen, Demonstration (NCWD5) 300 NSF**
   Provide one if a Wellness Center is authorized.

8. **Conference / Classroom (CRA01) 240 NSF**
   Provide one if a Wellness Center is authorized.

9. **Cubicle (OFA03)** **60 NSF**
   Provide one per Wellness Center FTE position authorized to have a cubicle if a Wellness Center is authorized.

10. **Team Collaboration Room (WRCH1)** **120 NSF**
    Provide one if a Wellness Center is authorized.

11. **Toilet (TLTU1)** **60 NSF**
    Provide two if a Wellness Center is authorized.

12. **Utility Room, Clean (UCCL1)** **120 NSF**
    Provide one if a Wellness Center is authorized.

13. **Utility Room, Soiled (USCL1)** **90 NSF**
    Provide one if a Wellness Center is authorized.

4.9. FA9: INDUSTRIAL HYGIENE, ENVIRONMENTAL SCIENCES AND BIOENVIRONMENTAL ENGINEERING.

1. **Waiting (WRC01)** **120 NSF**
   Provide one if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized.

2. **Reception (RECP1)** **120 NSF**
   Provide one if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized.

   Allocated NSF accommodates two FTEs.

3. **Respiratory Mask Fitting (RMF01)** **120 NSF**
   Provide one if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized and if Respiratory Mask Fitting for Industrial Hygiene, Environmental and Bioenvironmental Sciences is authorized.

4. **Industrial Hygiene Lab (LBIH1)** **240 NSF**
   Minimum NSF if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized; provide an additional 60 NSF per each Industrial Hygiene FTE position authorized greater than three.

5. **Water Lab (LBWA1)** **240 NSF**
   Minimum NSF if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized; provide an additional 60 NSF per each Water Lab FTE position authorized greater than three.

6. **Entomology Lab (LBEN1) 240 NSF**
   Minimum NSF if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized; provide an additional 60 NSF per each Entomology FTE position authorized greater than three.

7. **Health Physicist Lab (LBRP1) 180 NSF**
   Provide one if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized, or if a Health Physicist Lab FTE position is authorized.

   This space is for radiation exposure surveillance; calibration of equipment; monitoring employees handling radioactive materials.

8. **Storage, Equipment (SRSE1) 120 NSF**
   Minimum NSF if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized; provide an additional 60 NSF per each Industrial Hygiene Lab, Water Lab, Entomology Lab, and Health Physicist Lab FTE positions authorized greater than two.

9. **Storage, General (SRE01) 120 NSF**
   Minimum NSF if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized; provide an additional 60 NSF per each Industrial Hygiene Lab, Water Lab, Entomology Lab, and Health Physicist Lab greater than two.

10. **Storage, Medical Response (SRE01) 240 NSF**
    Minimum NSF if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized; provide additional NSF greater than 240 NSF if authorized; maximum 360 NSF.

    This space can be distributed to Primary Care Clinic, or other areas, to support medical response team(s).

11. **Storage, Hazardous Material (SRHM1) 120 NSF**
    Provide one if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized and if a Hazardous Material Storage for the Industrial Hygiene, Environmental and Bioenvironmental Sciences is authorized.

12. **Storage, Gas Cylinders (SRGC2) 60 NSF**
    Provide one if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized.

13. **Office, Department Chief (OFA04) 120 NSF**
    Provide one if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized.

14. **Office, NCOIC / LCPO / LPO (OFA04)** **120 NSF**
Provide one Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized.

15. **Office, Private (OFA04)** **120 NSF**
Provide one per each Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering FTE position authorized to have a private office if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized.

16. **Office, Shared (OFA05)** **120 NSF**
Provide one for every increment of two Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering FTE positions authorized to have a shared office if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized.

17. **Cubicle (OFA03)** **60 NSF**
Provide one per each Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering FTE position authorized to have a cubicle if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized.

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

18. **Storage, Files (FILE1)** **120 NSF**
Provide one if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized.

19. **Team Collaboration Room (WRCH1)** **120 NSF**
Provide one if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized and if the total number of Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering FTE positions authorized is between three and ten.

20. **Conference Room (CRA01)** **240 NSF**
Provide one if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized and if the total number of Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering 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.

21. **Copy / Office Supply (RPR01)** **120 NSF**
Provide one if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized.

22. **Lounge, Staff (SL001)** **120 NSF**
Minimum NSF if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized if the number of Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering FTEs working on peak shift is ten; provide an additional 60 NSF for every increment of five Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering FTEs working on peak shift greater than ten; maximum 360 NSF.

23. **Toilet, Staff (TLTU1)** **60 NSF**
Provide one if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized.

24. **Shower, Staff (TLTS1)** **60 NSF**
Provide one if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized.

25. **Lockers, Personal Property (LR001)** **30 NSF**
Minimum NSF if Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering is authorized; provide an additional 30 NSF for every increment of four Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering FTE positions not assigned a private office, a shared office or a cubicle greater than eight.

SECTION 5: PLANNING AND DESIGN CONSIDERATIONS

The following design considerations are intended to provide planners and designers with guidance on world-class and evidence-based design strategies for new healthcare facilities and renovation of existing ones. Please refer to the World Class Checklist (https://facilities.health.mil/home/). Also refer to the FGI Guidelines for Design and Construction of Hospitals and Outpatient Facilities by the Facility Guidelines Institute (FGI Guidelines) for additional information. The following Design Considerations will be considered for the Preventive Medicine Clinics where patients are seen, namely, the Occupational Health / Civilian Employee Health Clinic, the Public Health / Community Health Clinic and the Aerospace / Undersea Medicine Clinic. Consideration should be given to sharing reception and support spaces.

5.1. NET-TO-DEPARTMENT GROSS FACTOR. The net-to-department gross factor (NTDG) for Preventive Medicine 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 as well as other construction elements not defined by the net square foot area. Refer to UFC 4-510-01, Section 2-3.4.2.2 and DoD Space Planning Criteria Chapter 130: Net to Gross Conversion Factors.

5.2. GENERAL DESIGN CONSIDERATIONS.

A. Consider technology requirements early on in design.

B. Provide same-handed patient care and treatment rooms where appropriate.

C. Consider designing the staff lounge as a place of respite, utilizing lighting and technology. (e.g., backlit art; controllable lighting; soft, natural colors; ergonomically supportive furniture; and soft music).

D. Collocate the Wellness Center's classroom and the demonstration kitchen. Locate them in the front of the facility, off of Waiting for easy public access.

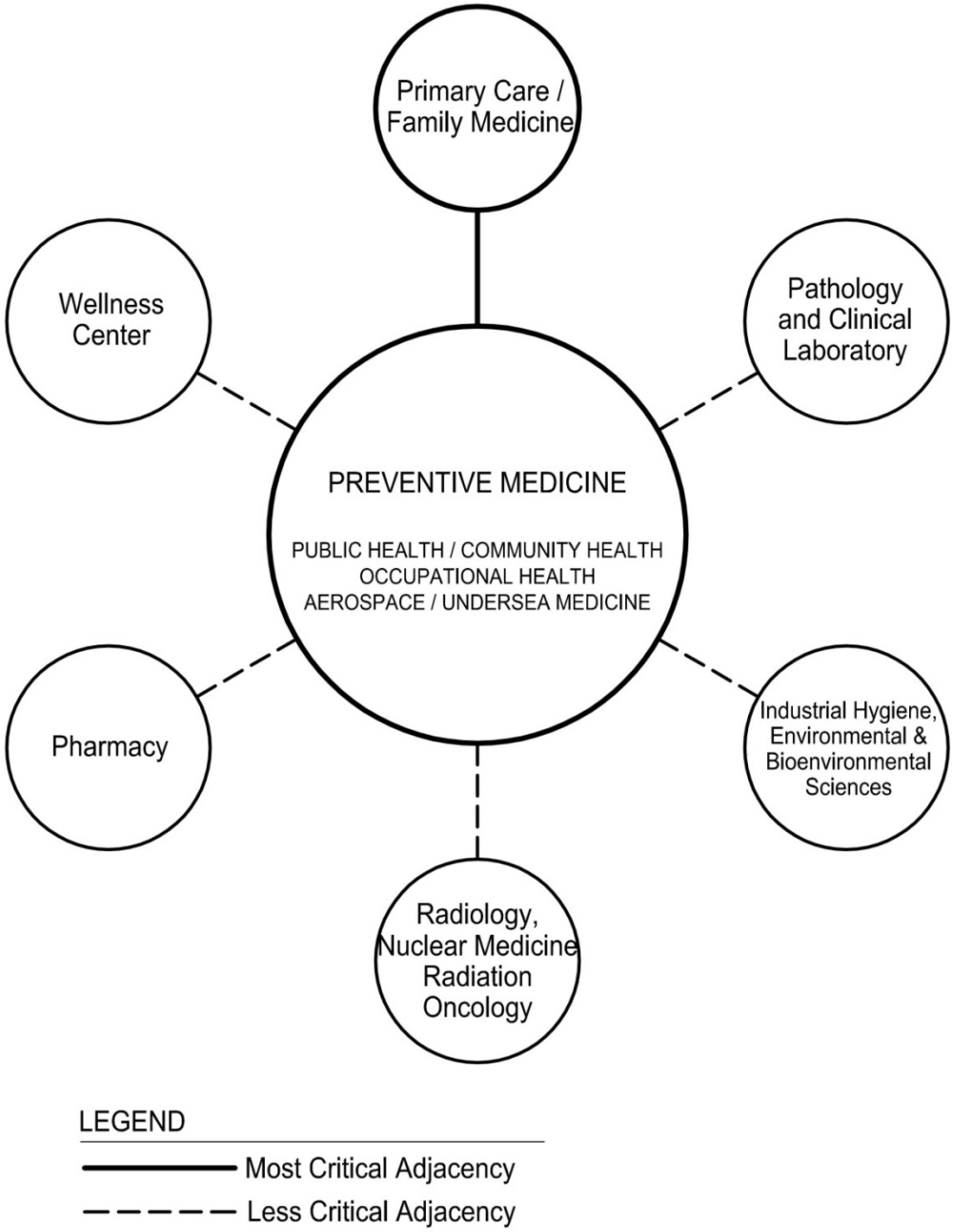
E. Locate the Industrial Hygiene, Environmental Sciences and Bioenvironmental Engineering Medical Response Storage Area to allow for direct access from the exterior to prevent personnel from carrying potentially hazardous, unknown material throughout other areas of the facility.

F. Dedicated parking spaces for Bioenvironmental Engineering response vehicles located in proximity to the Bioenvironmental Engineering egress shall be considered during planning and design.

G. The Bioenvironmental Engineering function requires IT support for SIPR connection.

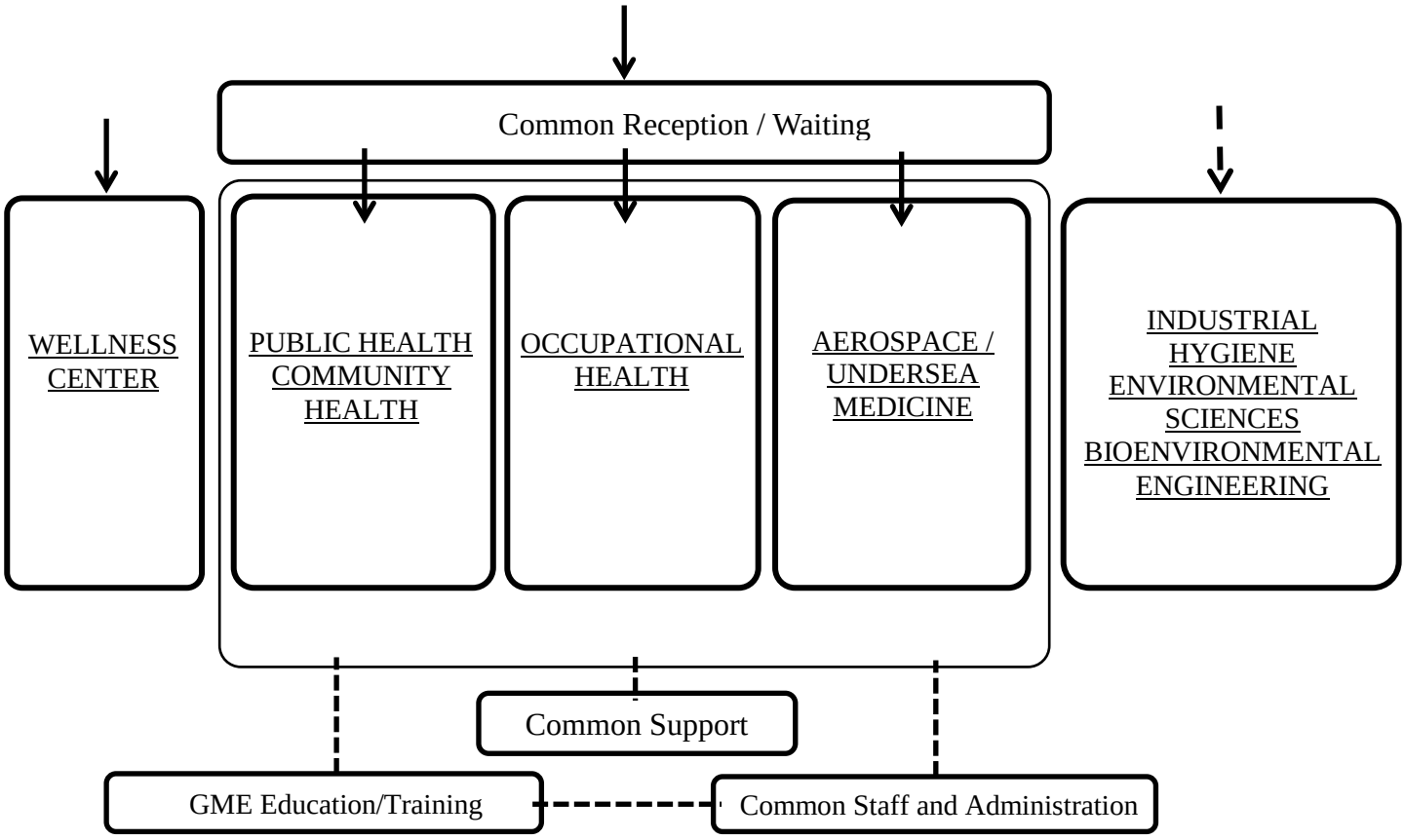
SECTION 6: FUNCTIONAL RELATIONSHIPS (INTERDEPARTMENTAL)

6.1. FUNCTIONAL RELATIONSHIPS. Preventive Medicine will rely on a number of other services in a Military Treatment Facility (MTF) for patient care and support functions. The diagram below represents desirable relationships based on efficiency and functional considerations.



SECTION 7: FUNCTIONAL DIAGRAM (INTRADEPARTMENTAL)

7.1. FUNCTIONAL DIAGRAM. The diagram below illustrates intradepartmental relationships among key areas / spaces within Preventive Medicine. The diagram is necessarily generic. The planner shall use this as a basis for design only and shall consider project-specific requirements for each Military Treatment Facility.



LEGEND

PREVENTIVE MEDICINE

Patient Circulation

Staff Circulation

GLOSSARY

G.1. DEFINITIONS.

Aerospace Medicine: Aerospace Medicine, also called flight medicine or Aviation medicine combines aspects of preventive, occupational, environmental and clinical medicine. This specialty is concerned with the health and safety of those who fly, crew and passengers, as well as the selection and performance of those who hold aviation licenses. A military practitioner of aviation medicine may be called a flight surgeon and a civilian practitioner is an aviation medical examiner.

Audiometric Booth: This space provides a self-contained environment for hearing conservation programs. Testing booths are offered with a range of acoustical performance levels, variations in floor plans, and numerous options.

Authorized: This document uses the term "authorized" to indicate that, during a project's space plan development, a planner shall seek approval from the appropriate official in the chain of command to activate certain spaces or certain groups of spaces. Typical components that may require authorization are certain programs or services that activate Functional Areas (e.g., GME); office spaces (e.g., FTE position); specialized rooms (e.g., Hybrid OR) or other spaces (e.g., On-Call Room). Typically, Mission, Staffing and Miscellaneous Input Data Statements require authorization, while directly and indirectly workload driven rooms / spaces do not.

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 / Procedure 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 / Procedure Room.

Bariatric Patient Toilet: This space is the bathroom for the bariatric patient. Planner should refer to the FGI Guidelines for the preferred bariatric design solutions for this room. This bathroom should be located proximate to the Bariatric Patient Exam / Treatment Room; however, it is not solely dedicated to the bariatric patient. It may be used by other patients for added flexibility.

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.

Biofeedback: Biofeedback is a process that enables an individual to learn how to change physiological activity such as brainwaves, heart function, breathing, muscle activity blood pressure, and skin temperature. The biofeedback room is a "relaxation room" with individual biofeedback computer stations and numerous relaxation items that can be used with the room.

Clean Utility Room: This room is used for the storage and holding of clean and sterile supplies. 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.

Complementary and Alternative Medicine (CAM): CAM is the term for medical products and practices that are not part of standard care. Complementary medicine is used together with standard medical care. An example is using acupuncture to help with side effects of cancer treatment.

Cubicle: A cubicle is a partially enclosed workspace, separated from neighboring workspaces by partitions. Managers and other staff with no supervisory responsibilities as well as part-time, seasonal, and job-sharing staff may qualify for a cubicle.

Demonstration Kitchen: An instructional kitchen, as part of a Healthy Cooking Program where cooking skills and healthy meal choices are taught.

EKG Room: This room houses the 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.

Encounter: A contact between an eligible beneficiary and a credentialed provider. An encounter may consist of examination, diagnosis, treatment, evaluation, consultation or counseling or a combination of the above. The encounter may take place in a clinic, by telephone, computer, or in other treatment or observation areas. Encounter volume used to generate exam room requirements should not include telephone encounters.

Entomology Lab: The Entomology Lab is where Entomologists perform research to identify insects and combat insect borne diseases.

Exam / Consult: This room is intended to support one on one consults with a staff member and patient; it is outfitted with comfortable chairs, but it is also equipped with a sink or capped plumbing to facilitate easy conversion to an exam room. This room is located in the patient care zone, proximate to the exam rooms and not in the public zone or waiting room.

Exercise Area: This is an open area that provides space for the mat platforms as well as space to accommodate exercise machines such as balance trainers, bicycles, bicycle ergometers, exercise systems, stair masters, and treadmills.

Eye Lane: This is the basic eye exam room, also called a refraction room or refraction lane. Standard refraction distance is 20 feet or equivalent from eye to chart. This can be achieved with either a full eye lane (i.e., "long room") or an electronic "folded" eye lane. With the use of digital screen, the rooms can be shorter or longer and the digital screen adapted to obtain the correct refractive distance. A full eye lane is typically used in pediatrics and in military aviation testing.

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 per week workload. The FTE measure may also be used for specific workload staffing parameters such as a clinical FTE; the amount of time assigned to an employee providing clinical care. For example, a 0.5 clinical FTE for a healthcare worker would indicate that the healthcare worker provides clinical care half of the time during a 40-hour work week.

Functional Area (FA): 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.

Health Physicist Lab: A laboratory where the health physicist works, controlling the uses of radiation in order to protect workers and the public from potential hazards associated with exposure to the radiation energy. Health physicists will calculate safe, effective doses of radiation for cancer patients; ensure the safe use of medical / dental diagnostic equipment; and measure radioactivity in water, soil and air.

Hours of Operation per Day: These are the hours of operation within a department. For example, a hospital nursing unit and an emergency department will operate 24 hours per day; whereas a clinic may be operational 8 hours or more, depending on the clinic.

Immunization Waiting: A sub waiting area for direct nurse observation of post-immunization patients.

Industrial Hygiene: The science of protecting and enhancing the health and safety of people at work and in their communities. Health and safety hazards cover a wide range of chemical, physical, biological and ergonomic stressors. It applies the standards established by the National Institute for Occupational Safety and Health (NIOSH) and enforces the laws created by the Occupational Safety and Health Administration (OSHA) to insure worker safety.

Industrial Hygiene Lab: A laboratory that provides a wide array of analytical testing services to support environmental investigations, industrial hygiene applications and monitoring programs in support of occupational health hazards examples include: air quality, air samples and measurements, soil testing, noise instrument downloads, and ergonomic evaluations.

Input Data Statement: A set of questions designed to elicit information about the healthcare project in order to create a Program for Design (PFD) (see definition below); based on the space criteria parameters (refer to Section 5) set forth in this document. Input Data Statements are defined as Mission, Workload, Staffing or Miscellaneous.

Net Square Feet (NSF): The area of a room or space derived by multiplying measurements of the room or space taken from the inside surface of one wall to the inside surface of the opposite wall.

Net-to-Department Gross Factor (NTDG): A parameter used to calculate the Department Gross Square Foot (DGSF) area based on the programmed Net Square Foot (NSF) area. Refer to DoD Chapter 130 for the NTDG factors for all Space Planning Criteria chapters.

Occupational Health: The science of designing, implementing and evaluating comprehensive health and safety programs that maintain and enhance employee health, improve safety and increase productivity in the workplace. Examples of occupational health programs are the following: medical surveillance, certification exams, treatment and referral of acute and chronic occupational injuries and illnesses, work area consultations such as indoor air quality, ergonomics and workers compensation cases, occupational illness and injury case management to restore workers to optimal function, occupational audiology services in support of the hearing conservation program, clinical consultative services, preventive services such as immunizations to prevent disease due to occupational exposure and health promotion.

Office, Private: A single occupancy office provided for confidential communication.

Office, Shared: An office that accommodates two workstations.

Operating Days per Year: The number of days per calendar year a facility is operational for patient care (refer to Section 2).

Preventive Medicine: The medical specialty that applies many of the principles of public health and preventive medicine practice to military situations and populations. It is the anticipation, prediction, identification, surveillance, evaluation, prevention and control of disease and injuries.

Program for Design (PFD): A listing of all of the rooms / spaces generated based on answers to the Input Data Statements (see Section 3) and the space planning criteria outlined in this document (Section 4) in SEPS. The list is organized by Functional Area and includes the Room Quantity, Room Code, Room Name, generated Net Square Feet (NSF), Construction Phase and Construction Type.

Project Room Contents (PRC): A listing of the assigned contents (medical equipment, FF&E, etc.) for each room in a PFD generated by SEPS.

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.

Public Health / Community Health: Provides health promotion, health education, and disease prevention for service members, their families, retirees, civilian employees and other beneficiaries. Examples of programs and services that may be included are the following: Health promotion and wellness; communicable disease education, surveillance, reporting, outbreak, investigation and epidemiology; Sexually Transmitted Disease Clinic; Latent Tuberculosis Clinic; Rabies Outreach and Surveillance Program; Blood Look Back Program; Deployment Health and Family Readiness Information.

Resident Collaboration Room: This room is provided for the Residents. It will contain one cubicle per Resident, a table with chairs for collaboration space and bookcases.

Space and Equipment Planning System (SEPS): 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 approved Space Planning Criteria, the chapter and specific project-related Mission, Workload and Staffing information entered in response to the Program Data Required - Input Data Statements (IDSs).

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 readily accessible to staff.

Team Collaboration Room: This space provides staff with an environment conducive to collaboration. Room contains computer workstations for documentation and a table with chairs to hold meetings.

Undersea Medicine: Undersea and hyperbaric medicine (UHB) is the diagnosis, treatment and prevention of conditions caused by humans entering the undersea environment. It includes the effects of change in barometric pressure in the human body and the diagnosis and treatment of conditions caused by undersea hazards. Hyperbaric medicine is a corollary field associated with diving, since recompression in a hyperbaric chamber is used as a treatment for two of the most significant diving related illnesses, decompression illness and arterial gas embolism.

Utilization Factor: Also known as capacity utilization rate, this factor provides flexibility in the utilization of a room to account for patient delays, scheduling conflicts and equipment maintenance. A room with an 80% utilization factor provides a buffer to assume that this room would be available 20% of the time beyond the planned operational practices for this room.

Water Lab: This is where the quality and safety of the drinking water supply is monitored and tested.

Wellness Center: Wellness Centers help the military and their families adopt a healthier lifestyle and build resiliency for future fitness. They offer specialized services such as stress management, nutrition counseling and physical fitness counseling.

Workload: Space Planning Criteria per DHA Policy shall be workload driven. Workload projections divided by the throughput determined in this document for each workload driven room determines the quantity of rooms needed to satisfy the projected workload demand.