Guide ANSI/	REQUIRED ELEMENTS FOR OUTPATIENT DIAGNOSTIC AND TREATMENT FACILITIES Guidelines for Design and Construction of Hospitals and Outpatient Facilities (FGI 2014) ANSI/ASHRAE/ASHE Standard 170-2013, Ventilation of Health Care Facilities (ASHRAE)						
Code	Reference	e Category					
Ph	nase						
Schematic	Design Development	Code Section	·	ent/Requirements		Complies	Comments
3.3-1.	.1.1.2, 3.1		nd Treatment Areas				
		3.1-3.2 Examinati	ion Rooms				
•	•	3.1-3.2.2	General Purpose Examination/Observation	n Room(s)	Required		
•	•	3.1-3.2.2.2(1)	Area		80 S.F. min		
•	•	3.1-3.2.2.2(2)	Clearances at table	@ both sides and foot of table, recliner or chair	2'-8"		
•	•	3.1-3.2.2.3	Handwashing Station		Required		
•	•	3.1-3.2.2.4	Documentation Area (Written or Electronic	Documentation Area (Written or Electronic)			
		Table 3.1-1	Electrical Receptacles	Total number	8 Single		
	•		'	# head of exam table	4 min N/R		
	•	ASHRAE 7.1		Pressure Relationship to Adjacent Areas			
	•	ASHRAE 7.1	Min. Outdoor Air Changes /Hour		2		
	•	ASHRAE 7.1	Min. Total Air Changes /Hour		6		
	•	ASHRAE 7.1	All Room Air Exhausted Directly to Outo		N/R		
	•	ASHRAE 7.1	Air Recirculated by Means of Room Un	its	N/R		
	•	ASHRAE 7.1	Relative Humidity (%)		60 max		
	•	ASHRAE 7.1	Design Temperature (°F)		70-75		
•	•	3.1-3.2.3	Special Purpose Examination Room - if provided		100.0.5		
•	•	3.1-3.2.3.2(1)	Area	sides and head or foot of	100 S.F.		
•	•	3.1-3.2.3.2(2)	Clearances	table, bed or chair	3'-6" min.		
•	•			remaining side	1'-0" min.		
•	•	3.1-3.2.3.3	Handwashing Station		Required		
•	•	3.1-3.2.3.4	Documentation Area (Written or Electron		Required		
	•	Table 3.1-1	Electrical Receptacles	Total number # @ head of exam table	8 Single 4 min		
		3.1-3.4 Special Pa	atient Care Rooms				
•	•	3.1-3.4.2.2	Airborne Isolation Room (AII) – if provided		Required		
•	•	3.1-3.4.2.2	Accommodates only one patient at a	time	Required		
•	•	3.1-3.4.2.2	Handwashing station	·	Required		
•	•	3.1-3.4.2.2	Storage for Personal Protective Equipm	ent (PPE) at entrance to room	Required		

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			T	ı				
	•	3.1-7.2.3.1		Monolithic & 6"	Cleanable	Required		
	•	3.1-7.2.3.1	Floor Finishes	Integral Cove Base	Wear resisitant	Required		
	•	3.1-7.2.3.2	Wall Finishes		Washable	Required		
	•	3.1-3.4.2.4 Perimeter walls, ceiling, floor, and penetrations shall be tig		be tightly sealed	Required			
	•		-	•	Total number	8 Single		
		Table 3.1-1	Electrical Receptacles		head of			
	•		·		Exam table	4 min		
	•	ASHRAE 7.1	Pressure Relationship to Adjace	ent Areas	•	Negative		
	•	ASHRAE 7.1	Min. Outdoor ACH			2		
	•	ASHRAE 7.1	Min. Total ACH			12		
			All Room Air Exhausted Directly to Outdoors			İ		
	•	ASHRAE 7.1	*See ASRAE 7.2 for exemptions			Required*		
	•	ASHRAE 7.1 Air Recirculated by Means of Room Units			No			
	•	ASHRAE 7.1 R.H.				Max. 60		
	•	ASHRAE 7.1 Design Temperature				70-75 F		
		Soc ECL part 4. ASHPAE section 7.2 for additional room specific						
	•	3.1-3.4.2.4 ventilation requirements			Required			
•	•	3.1-3.4.2.4 Doors self closing		sing	Required			
•	•	3.1-3.4.2.4 Dools edge seals		eals	Required			
•	•	3.1-3.4.2.3	.4.2.3 Anteroom – if provided					
•	•	3.1-3.4.2.3	Space for persons to don personal protective equipmer entering patient room		ment before	Required		
•	•	3.1-3.4.2.3				Required		
•	•	3.1-3.4.2.3	Storage for PPE			Required		
•	•	3.1-3.4.2.3	Disposal/holding for used PPE			Required		
	•	ASHRAE 7.1				Negative		
	•	ASHRAE 7.1				N/R		
	•	ASHRAE 7.1	Min. Total ACH			10		
	•	ASHRAE 7.1	All Room Air Exhausted Directly	to Outdoor		yes		-
	•	ASHRAE 7.1	Air Recirculated by Means of R			No		
	•	ASHRAE 7.1	R.H.	00111 011110		N/R		
	•	ASHRAE 7.1				N/R		
			Support Areas for Examination Rooms		1 14/17	L L		
			Nurse Station					
•	•	3.1-3.6.1	*direct site line is not required for P	hase II		Required*		
	•	3.1-3.6.1.1	Work counter	Hase II		Required		
	•	3.1-3.6.1.2	Communication system			Required		
	•	3.1-3.6.1.3	Supply space			Required		
•	•	3.1-3.6.1.4	Documentation Area (Written	or Floetropie)		Required		
-	•	3.1-3.0.1.4	Medication Preparation Room	OI LIECTIONIC)		required		
		3.1-3.6.6	*Select medication preparation ro	om and/or Solf conta	inad madication	Poguirod *		
•	•	3.1-3.0.0	dispensing unit	om anu/o r sen-conta	ineu medication	Required *		
\vdash		3.1-3.6.6	Work counter			Required		
•	•	3.1-3.6.6	Hand-washing station			Required		
•	•	3.1-3.6.6	Lockable refrigerator			Required		
•	•			drugo				
•	•	3.1-3.6.6	Locked storage for controlled	Required				

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ASHRAE 7.1	Pressure Relationship to Adjacent Areas Min. Outdoor Air Changes / Hour Min. Total Air Changes / Hour All Room Air Exhausted Directly to Outdoors Air Recirculated by Means of Room Units Relative Humidity (%) Design Temperature (°F) Self-contained medication dispensing unit "Select medication preparation room and/or Self-contained medication dispensing unit Hand-washing station or hand sanitation station and countertop "Located next to dispensing unit. Clean Supply Room (sterile storage) "Clean and soiled rooms must be separate Pressure Relationship to Adjacent Areas Min. Outdoor Air Changes / Hour All Room Air Exhausted Directly to Outdoors Air Recirculated by Means of Room Units	N/R 2 4 N/R N/R N/R 60 72-75 Required * Required * Required* Positive 2 4 1.46	
ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 3.1-3.6.6 3.1-3.6.6 3.1-3.6.9 ASHRAE 7.1	Min. Total Air Changes / Hour All Room Air Exhausted Directly to Outdoors Air Recirculated by Means of Room Units Relative Humidity (%) Design Temperature (°F) Self-contained medication dispensing unit "Select medication preparation room and/or Self-contained medication dispensing unit Hand-washing station or hand sanitation station and countertop *Located next to dispensing unit. Clean Supply Room (sterile storage) *Clean and soiled rooms must be separate Pressure Relationship to Adjacent Areas Min. Outdoor Air Changes / Hour Min. Total Air Changes / Hour All Room Air Exhausted Directly to Outdoors	4 N/R N/R 60 72-75 Required * Required * Positive 2 4	
ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 3.1-3.6.6 3.1-3.6.9 ASHRAE 7.1	All Room Air Exhausted Directly to Outdoors Air Recirculated by Means of Room Units Relative Humidity (%) Design Temperature (*F) Self-contained medication dispensing unit *Select medication preparation room and/or Self-contained medication dispensing unit Hand-washing station or hand sanitation station and countertop *Located next to dispensing unit. Clean Supply Room (sterile storage) *Clean and soiled rooms must be separate Pressure Relationship to Adjacent Areas Min. Outdoor Air Changes / Hour Min. Total Air Changes / Hour All Room Air Exhausted Directly to Outdoors	N/R N/R 60 72-75 Required * Required * Positive 2	
ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 3.1-3.6.6 3.1-3.6.9 ASHRAE 7.1	Air Recirculated by Means of Room Units Relative Humidity (%) Design Temperature (°F) Self-contained medication dispensing unit *Select medication preparation room and/or Self-contained medication dispensing unit Hand-washing station or hand sanitation station and countertop *Located next to dispensing unit. Clean Supply Room (sterile storage) *Clean and soiled rooms must be separate Pressure Relationship to Adjacent Areas Min. Outdoor Air Changes / Hour Min. Total Air Changes / Hour All Room Air Exhausted Directly to Outdoors	N/R 60 72-75 Required * Required * Positive 2	
ASHRAE 7.1 ASHRAE 7.1 3.1-3.6.6 3.1-3.6.9 ASHRAE 7.1	Relative Humidity (%) Design Temperature (*F) Self-contained medication dispensing unit *Select medication preparation room and/or Self-contained medication dispensing unit Hand-washing station or hand sanitation station and countertop *Located next to dispensing unit. Clean Supply Room (sterile storage) *Clean and soiled rooms must be separate Pressure Relationship to Adjacent Areas Min. Outdoor Air Changes / Hour Min. Total Air Changes / Hour All Room Air Exhausted Directly to Outdoors	60 72-75 Required * Required * Required* Positive 2 4	
ASHRAE 7.1 3.1-3.6.6 3.1-3.6.6 3.1-3.6.9 ASHRAE 7.1	Design Temperature (°F) Self-contained medication dispensing unit *Select medication preparation room and/or Self-contained medication dispensing unit Hand-washing station or hand sanitation station and countertop *Located next to dispensing unit. Clean Supply Room (sterile storage) *Clean and soiled rooms must be separate Pressure Relationship to Adjacent Areas Min. Outdoor Air Changes / Hour Min. Total Air Changes / Hour All Room Air Exhausted Directly to Outdoors	Required * Required * Required * Positive 2 4	
3.1-3.6.6 3.1-3.6.6 3.1-3.6.9 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1	Self-contained medication dispensing unit *Select medication preparation room and/or Self-contained medication dispensing unit Hand-washing station or hand sanitation station and countertop *Located next to dispensing unit. Clean Supply Room (sterile storage) *Clean and soiled rooms must be separate Pressure Relationship to Adjacent Areas Min. Outdoor Air Changes / Hour Min. Total Air Changes / Hour All Room Air Exhausted Directly to Outdoors	Required * Required * Required* Positive 2 4	
3.1-3.6.6 3.1-3.6.9 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1	*Select medication preparation room and/or Self-contained medication dispensing unit Hand-washing station or hand sanitation station and countertop *Located next to dispensing unit. Clean Supply Room (sterile storage) *Clean and soiled rooms must be separate Pressure Relationship to Adjacent Areas Min. Outdoor Air Changes / Hour Min. Total Air Changes / Hour All Room Air Exhausted Directly to Outdoors	Required * Required* Positive 2 4	
3.1-3.6.6 3.1-3.6.9 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1	dispensing unit Hand-washing station or hand sanitation station and countertop *Located next to dispensing unit. Clean Supply Room (sterile storage) *Clean and soiled rooms must be separate Pressure Relationship to Adjacent Areas Min. Outdoor Air Changes / Hour Min. Total Air Changes / Hour All Room Air Exhausted Directly to Outdoors	Required * Required* Positive 2 4	
3.1-3.6.9 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1	Hand-washing station or hand sanitation station and countertop *Located next to dispensing unit. Clean Supply Room (sterile storage) *Clean and soiled rooms must be separate Pressure Relationship to Adjacent Areas Min. Outdoor Air Changes / Hour Min. Total Air Changes / Hour All Room Air Exhausted Directly to Outdoors	Required* Positive 2 4	
3.1-3.6.9 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1	*Located next to dispensing unit. Clean Supply Room (sterile storage) *Clean and soiled rooms must be separate Pressure Relationship to Adjacent Areas Min. Outdoor Air Changes / Hour Min. Total Air Changes / Hour All Room Air Exhausted Directly to Outdoors	Required* Positive 2 4	
ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1	Clean Supply Room (sterile storage) *Clean and soiled rooms must be separate Pressure Relationship to Adjacent Areas Min. Outdoor Air Changes / Hour Min. Total Air Changes / Hour All Room Air Exhausted Directly to Outdoors	Positive 2	
ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1	*Clean and soiled rooms must be separate Pressure Relationship to Adjacent Areas Min. Outdoor Air Changes / Hour Min. Total Air Changes / Hour All Room Air Exhausted Directly to Outdoors	Positive 2	
ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1	Pressure Relationship to Adjacent Areas Min. Outdoor Air Changes / Hour Min. Total Air Changes / Hour All Room Air Exhausted Directly to Outdoors	2 4	
ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1	Min. Total Air Changes / Hour All Room Air Exhausted Directly to Outdoors	4	
ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1	All Room Air Exhausted Directly to Outdoors		
ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1	All Room Air Exhausted Directly to Outdoors	11/5	1
ASHRAE 7.1		N/R	
	All recirculated by iviears of roofff utills	N/R	
ASHRAE 7.1	Relative Humidity (%)	60 max	
ASHRAE 7.1 Design Temperature(°F)		72-78	
3.1-3.6.10	Soiled Holding Room *Clean and Soiled Rooms Must Be Separate	Required*	
Provide for congrete collection storage, and disposal of soiled		+	
3.1-3.6.10	materials	Required	
ASHRAE 7.1	Pressure Relationship to Adjacent Areas	Negative	
ASHRAE 7.1	Min. Outdoor Air Changes / Hour	2	
ASHRAE 7.1	Min. Total Air Changes / Hour	<u> </u>	
ASHRAE 7.1		Yes	
ASHRAE 7.1		No	
ASHRAE 7.1			
ASHRAE 7.1		N/R	
3.1-3.6.11.3			
3.1-3.6.11.4		Required	
3.1-3.8 Support A	reas for Patients		<u> </u>
3.1-3.8.2	Patient Toilet Room	Required	
ASHRAE 7.1			
ASHRAE 7.1	Min. Outdoor Air Changes / Hour	N/R	
		10	
ASHRAE 7.1 All Room Air Exhausted Directly to Outdoors		Yes	
ASHRAE 7.1		No	
ASHRAE 7.1	Relative Humidity (%)	N/R	
ASHRAE 7.1 Design Temperature (°F)		N/R	
3.3-1.1.2.1(1), 2.2	-3.4 Imaging Services - If provided	•	
2.2-3.4.2			
2.2-3.4.2.1	CT scanner room	Required	
		4'-0"	
######################################	ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 ASHRAE 7.1 B.1-3.6.11.3 B.1-3.6.11.4 B.1-3.8 Support A B.1	ASHRAE 7.1 All Room Air Exhausted Directly to Outdoors ASHRAE 7.1 Air Recirculated by Means of Room Units ASHRAE 7.1 Relative Humidity (%) ASHRAE 7.1 Design Temperature (°F) B.1-3.6.11.3 Stretcher and Wheelchair Storage – if provided B.1-3.6.11.4 Emergency Equipment storage B.1-3.8 Support Areas for Patients B.1-3.8 Support Areas for Patients B.1-3.8.2 Patient Toilet Room ASHRAE 7.1 Pressure Relationship to Adjacent Areas ASHRAE 7.1 Min. Outdoor Air Changes / Hour ASHRAE 7.1 Min. Total Air Changes / Hour ASHRAE 7.1 Air Recirculated by Means of Room Units ASHRAE 7.1 Relative Humidity (%) ASHRAE 7.1 Design Temperature (°F) B.3-1.1.2.1(1), 2.2-3.4 Imaging Services – If provided Computed Tomography (CT) Facilities – If provided	ASHRAE 7.1 All Room Air Exhausted Directly to Outdoors ASHRAE 7.1 Air Recirculated by Means of Room Units ASHRAE 7.1 Relative Humidity (%) ASHRAE 7.1 Design Temperature (°F) ASH-ASH-ASH-ASH-ASH-ASH-ASH-ASH-ASH-ASH-

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	_	2.2-3.4.2.1	Hand washing station	Required	
•	•	2.2-3.4.2.1	Hand-washing station Control room	Required	
•	•	2.2-3.4.2.2	Diagnostic Radiography Facilities - If provided	Required	
		2.2-3.4.3.2	<u> </u>	Do material	
•	•		Radiography room Hand-washing station	Required	
•	•	2.2-3.4.3.2(2)		Required	
•	•	2.2-3.4.3.3	Radiography/fluoroscopy room	Required	
•	•	2.2-3.4.3.3	Patient toilet room	Required	
•	•	2.2-3.4.3.4	Mammography room	Required	
•	•	3.1-3.2.2.2(2)	Clearances at table All sides	4'-0"	
		2.2-3.4.4	Magnetic Resonance Imaging (MRI) Facilities – If provided		
•	•	2.2-3.4.4.2	MRI scanner room space requirements	Required	
•	•	2.2-3.4.4.2(2)	Clearances at table all sides	4'-0"	
•	•	2.2-3.4.4.5	Hand-washing station	Required	
•	•	2.2-3.4.4.10	Special design elements for the MRI scanner room	Required	
•	•	2.2-3.4.4.6	MRI control room	Required	
•	•	2.2-3.4.4.7	Pre-procedure patient care area or room	Required	
•	•	2.2-3.4.4.8	Computer room	Required	
		2.2-3.4.5	Ultrasound Facilities - If provided		
•	•	2.2-3.4.5.2	Ultrasound examination or procedure rooms	Required	
•	•	2.2-3.4.5.2	Area	120 S.F. min	
•	•	3.1-3.2.2.2(2)	Clearances at table 3 sides	3'-0"	
		2.2-3.4.5.3	Hand-washing station	Required	
•	•	2.2-3.4.5.4	Patient toilet room - directly accessible	Required	
		2.2-3.4.6	Support Areas for Imaging Services- If imaging is provided		
•	•	2.2-3.4.6.1	Reception area with control desk	Required	
•	•	2.2-3.4.6.2	Documentation Area (Written or Electronic)	Required	
•	•	2.2-3.4.6.3	Consultation area	Required	
•	•	2.2-3.4.6.4	Pre-procedure patient care and observation space	Required	
•	•	2.2-3.4.6.6	Medication safety zone and storage	Required	
•	•	2.2-3.4.6.9	Clean storage	Required	
•	•	2.2-3.4.6.10	Soiled holding	Required	
•	•	2.2-3.4.6.12	Environmental services room	Required	
•	•	2.2-3.4.6.13	Contrast media preparation area - if provided		
	•		Sink	Required*	
_			*Where pre-prepared media are used, omission shall be p	ermitted.	
			Counter *Where pre-prepared media are used, omission shall be p	ermitted. Required*	
			Storage	Required	
•	•	2.2-3.4.6.14	Image management systems	Required	
•	•	2.2-3.4.6.15	Image interpretation/reading rooms	Required	
•	•	2.2-3.4.6.16	Facilities for processing ultrasound probes	Required	
•	•		decontamination area	Required	
•	•		Work counter space	Required	
•	•		sink	Required	
•	•		hand-washing station	Required	
•	•		automatic cleaning and sterilizing equipment space	Required	

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• Clean equipment room Required	
■ 2.2-3.4.7.2 Staff Lounge Required	
■ 2.2-3.4.7.2 Staff Toilet Room Required	
2.2-3.4.8 Support Areas for Patients – If imaging is provided	
• 2.2-3.4.8.1 Patient waiting area Sequired • 2.2-3.4.8.2 Patient toilet rooms Required • 2.2-3.4.8.3 Patient toilet rooms Required • 2.2-3.4.8.3 Patient toilet rooms Required • 2.2-3.5.1 Patient toilet rooms Required • 2.2-3.5.2 Interventional Imaging - If provided • 2.2-3.5.2 Interventional Imaging Procedure Room Required • 2.2-3.5.2 Interventional Imaging Procedure Room Required • 2.2-3.5.2 Interventional Imaging Procedure Room Required • 2.2-3.5.3 Interventional Imaging Procedure Room Required • 2.2-3.5.3 Pre-Procedure and Recovery Patient Care Areas Pre-Procedure and Recovery Patient Care Areas • 2.2-3.5.3 Area Bays Between bed side 4'-0' • 2.2-3.5.3 Required Between bed side 4'-0' • 2.2-3.5.3 Clearances Bays Between bed side 4'-0' • 2.2-3.5.3 Required Between bed side 4'-0' • 2.2-3.5.3 Required Between bed side Between bed side A'-0' • 2.2-3.5.3 Required Between bed side A'-0' • 2.2-3.5.4 Interventional and Intraoperative MRI (I-MIRI) Facilities If provided • A.2-3.5.4 Magnetic Resonance Imaging Facilities Required • A.2-3.5.4 See 2.2-3.4 for requirements Required • 2.2-3.5.6.1 Control room or area Required • 2.2-3.5.6.1 Control room or area Required • 2.2-3.5.6.1 Required Required • 2.2-3.5.6.2 Required Required • 2.2-3.5.6.3 Rediring room Required • 2.2-3.5.6.1 Required Required • 2.2-3.5.6.1 Solide Workroom or cloals supply room Required • 2.2-3.5.6.1 Solide Workroom or solide holding room Required • 2.2-3.5.6.1 Solide Workroom or solide holding room Required	
Seating spaces	
• 2.2-3.4.8.2 Patient tollet rooms Required • 2.2-3.4.8.3 Patient changing rooms Required 3.3-1.1.2.1(2), 2.2-3.5 Interventional Imaging − if provided • 2.2-3.5.2 Interventional Imaging Procedure Room Required • 2.2-3.5.2 Interventional Imaging Procedure Room Required • 2.2-3.5.2 Clearances On all sides 4'-0' • 2.2-3.5.3 Pre-Procedure and Recovery Patient Care Areas 18'-0' min • 2.2-3.5.3 Area @ Bays Between bed side 4'-0' • 2.2-3.5.3.2 Clearances @ Bays Between bed side 4'-0' • 2.2-3.5.3.2 Clearances @ Bays Between bed side 4'-0' • 2.2-3.5.3.2 Clearances Bays Between bed side 4'-0' • 2.2-3.5.3.2 Hand-washing station(s) "Number per (4) patient care areas 1' • 2.2-3.5.4 Interventional and Intraoperative MRI (1-MRI) Facilities − if provided • A.2-3.5.4 Interventional and Intraoperative MRI (1-MRI) Facilities − if provided Required • A.2-3.5.6 Support Areas for Interventional Imaging Required • 2.2-3.5.6.1 Control room or area Required • 2.2-3.5.6.1 Control room or area Required • 2.2-3.5.6.2 Emergency response space Required • 2.2-3.5.6.3 Electrical equipment room Required • 2.2-3.5.6.8 Electrical equipment room Required • 2.2-3.5.6.1 Clearance Required Required • 2.2-3.5.6.1 Control room or clean supply room Required • 2.2-3.5.6.1 Control room or clean supply room Required • 2.2-3.5.6.1 Control room or clean supply room Required • 2.2-3.5.6.1 Control room or clean supply room Required	
• 2.2-3.4.8.3 Patient changing rooms Required	
3.3-1.1.2.1(2), 2.2-3.5 Interventional Imaging — If provided	
• 2.2-3.5.2 Interventional Imaging Procedure Room	
• • 2.2-3.5.2.1(2) Clearances	
• 2.2-3.5.2.1(1) Clear Room Dimension 18'-0" min	
2.2-3.5.3 Pre-Procedure and Recovery Patient Care Areas @ Bays	
• • • 2.2-3.5.3.2	
Clearances	
• • • • • • • • • •	
Clearances Bays Between bed side 4'-0" Bays Bed side and foot to wall 3'-0" Cubicles Cub	
Clearances Bed side and foot to wall 3'-0" 2.2-3.5.3.2(5), 2.1-2.6.5.3 *Number per (4) patient care areas 1' A2.2-3.5.4 Interventional and Intraoperative MRI (I-MRI) Facilities – if provided A2.2-3.5.4 Magnetic Resonance Imaging Facilities See 2.2-3.4 (for requirements See 2.2-3.4 (for requirements) A2.2-3.5.6 Support Areas for Interventional Imaging Services – If interventional imaging is provided 2.2-3.5.6.1 Control room or area Acquired 2.2-3.5.6.4 Emergency response space Acquired 2.2-3.5.6.5 Hand scrub facilities Required Acquired Acquir	
*Number per (4) patient care areas 2.2-3.5.4 Interventional and Intraoperative MRI (I-MRI) Facilities – if provided A2.2-3.5.4 Magnetic Resonance Imaging Facilities See 2.2-3.5.4 For requirements A2.2-3.5.4 Interventional Imaging See 2.2-3.5 for requirements 2.2-3.5.6 Support Areas for Interventional Imaging Services – If interventional imaging is provided 2.2-3.5.6 Support Areas for Interventional Imaging Services – If interventional imaging is provided 2.2-3.5.6.1 Control room or area Required 2.2-3.5.6.4 Emergency response space Required 2.2-3.5.6.5 Hand scrub facilities Required 2.2-3.5.6.6 Medication safety zone Required 2.2-3.5.6.7 Reading room Required 2.2-3.5.6.8 Electrical equipment room Required 2.2-3.5.6.9 Clean workroom or clean supply room Required 2.2-3.5.6.10 Soiled workroom or soiled holding room Required	
A2.2-3.5.4 Magnetic Resonance Imaging Facilities See 2.2-3.4.4 for requirements A2.2-3.5.4 Interventional Imaging See 2.2-3.5 for requirements A2.2-3.5.6 Support Areas for Interventional Imaging Services – If interventional imaging is provided Control room or area Required Emergency response space Hand scrub facilities Required A2.2-3.5.6.5 Hand scrub facilities Required Required Required Required A2.2-3.5.6.6 Medication safety zone Required A2.2-3.5.6.7 Reading room Required A2.2-3.5.6.8 Electrical equipment room Required A2.2-3.5.6.9 Clean workroom or clean supply room Required A2.2-3.5.6.10 Soiled workroom or soiled holding room Required Required Required Required Required Required Required Required Required	
See 2.2-3.4.4 for requirements A2.2-3.5.4 Interventional Imaging See 2.2-3.5 for requirements 2.2-3.5.6 Support Areas for Interventional Imaging Services – If interventional imaging is provided 2.2-3.5.6.1 Control room or area Required 2.2-3.5.6.4 Emergency response space Required 2.2-3.5.6.5 Hand scrub facilities Required 2.2-3.5.6.6 Medication safety zone Required 2.2-3.5.6.7 Reading room Required 2.2-3.5.6.8 Electrical equipment room Required 2.2-3.5.6.9 Clean workroom or clean supply room Required 2.2-3.5.6.10 Soiled workroom or soiled holding room Required	
• A2.2-3.5.4 See 2.2-3.5 for requirements Required • 2.2-3.5.6 Support Areas for Interventional Imaging Services – If interventional imaging is provided • • 2.2-3.5.6.1 Control room or area Required • • 2.2-3.5.6.4 Emergency response space Required • • 2.2-3.5.6.5 Hand scrub facilities Required • • 2.2-3.5.6.6 Medication safety zone Required • • 2.2-3.5.6.7 Reading room Required • • 2.2-3.5.6.8 Electrical equipment room Required • • 2.2-3.5.6.9 Clean workroom or clean supply room Required • • 2.2-3.5.6.10 Soiled workroom or soiled holding room Required	
• 2.2-3.5.6.1 Control room or area Required • 2.2-3.5.6.4 Emergency response space Required • 2.2-3.5.6.5 Hand scrub facilities Required • 2.2-3.5.6.6 Medication safety zone Required • 2.2-3.5.6.7 Reading room Required • 2.2-3.5.6.8 Electrical equipment room Required • 2.2-3.5.6.9 Clean workroom or clean supply room Required • 2.2-3.5.6.10 Soiled workroom or soiled holding room Required	
• 2.2-3.5.6.4 Emergency response space Required • 2.2-3.5.6.5 Hand scrub facilities Required • 2.2-3.5.6.6 Medication safety zone Required • 2.2-3.5.6.7 Reading room Required • 2.2-3.5.6.8 Electrical equipment room Required • 2.2-3.5.6.9 Clean workroom or clean supply room Required • 2.2-3.5.6.10 Soiled workroom or soiled holding room Required	
• 2.2-3.5.6.5 Hand scrub facilities Required • 2.2-3.5.6.6 Medication safety zone Required • 2.2-3.5.6.7 Reading room Required • 2.2-3.5.6.8 Electrical equipment room Required • 2.2-3.5.6.9 Clean workroom or clean supply room Required • 2.2-3.5.6.10 Soiled workroom or soiled holding room Required	
• 2.2-3.5.6.6 Medication safety zone Required • 2.2-3.5.6.7 Reading room Required • 2.2-3.5.6.8 Electrical equipment room Required • 2.2-3.5.6.9 Clean workroom or clean supply room Required • 2.2-3.5.6.10 Soiled workroom or soiled holding room Required	
• 2.2-3.5.6.7 Reading room Required • 2.2-3.5.6.8 Electrical equipment room Required • 2.2-3.5.6.9 Clean workroom or clean supply room Required • 2.2-3.5.6.10 Soiled workroom or soiled holding room Required	
• 2.2-3.5.6.8 Electrical equipment room Required • • 2.2-3.5.6.9 Clean workroom or clean supply room Required • • 2.2-3.5.6.10 Soiled workroom or soiled holding room Required	
• 2.2-3.5.6.9 Clean workroom or clean supply room Required • 2.2-3.5.6.10 Soiled workroom or soiled holding room Required	
2.2-3.5.6.10 Soiled workroom or soiled holding room Required	
2 2-3 5 6 12 Environmental services room Required	
2.2-3.5.7 Support Areas for Staff – If interventional imaging is provided	
2.2-3.5.7.1 Staff changing area(s) Required	
3.3-1.1.2.2, 2.2-3.6 Nuclear Medicine - If provided support services such as radiology, pathology, emergency department, and outpatient clinics shall not be	required
2.2-3.6.1.2 Nuclear medicine procedure room – If provided	
2.2-3.6.2 Scintigraphy (Gamma Camera) Facilities – If provided	
2.2-3.6.2.2 Scanner Room Required Required	
Hand-washing station Required*	
2.2-3.6.2.3 *at locations of patient contact and where radiopharmaceutical materials are handled, prepared, or disposed of	

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		000/0	In a record	(DET) IS				
		2.2-3.6.3	Positron Emission Tomography	ovided	T	1		
•	•	2.2-3.6.3.2	Scanner Room			Required		
•	•	2.2-3.6.3.2	Cyclotron room			Required		
•	•	2.2-3.6.3.3	Control room			Required		
•	•	2.2-3.6.3.4	Patient uptake /cool-down roo	om		Required		
•	•	2.2-3.6.3.5	Hand-washing stations *at locations of patient contac materials are handled, prepar		Required*			
		2.2-3.6.3.6	Support areas for PET facilities					
•	•	2.2-3.6.3.6, 2.2-3.5.3	Pre-Procedure and Recovery	Patient Care	Areas	Required		
•	•	000500			60 S.F. min			
•	•	2.2-3.5.3.2	Area	25	80 S.F. min			
•	•			@ Bays	Between bed side	4'-0"		
•	•	2.2-3.5.3.2	Clearances	Bed side and foot to wall	3'-0"			
•	•	2.2-3.5.3.2	Hand-washing station(s) *Number per (4) patient ca		1*			
•	•	2.2-3.6.3.6	Computer Equipment Room		Required			
•	•	2.2-3.6.3.6	Contaminated (hot) soiled hol		Required			
		2.2-3.6.3.7	Special design elements for PE	If provided				
•	•	2.2-3.6.3.7	Shielding		Required			
		2.2-3.6.4	Single-Photon Emission Computed Tomography (SPECT) Facilities - If provide			ded		
•	•	2.2-3.6.3.2	Scanner Room		Required			
•	•	2.2-3.6.4.3	Control room			Required		
•	•	2.2-3.6.4.4	Computer equipment room			Required		
•	•	2.2-3.6.4.5	Hand-washing stations *at locations of patient contact and where radiopharmaceutical materials are handled, prepared, or disposed of			Required*		
		2.2-3.6.6	Support Areas for Nuclear Medicine Services – If Nuclear Medicine is prov				naging	
•	•	2.2-3.6.6.1	Control desk and reception ar	ea		Required		
•	•	2.2-3.6.6.3	Documentation area			Required		
•	•	2.2-3.6.6.4	Consultation area		Required			
•	•	2.2-3.6.6.5	Hand-washing stations *at each procedure room		Required* Required			
•	•	2.2-3.6.6.6		Dose administration area				
•	•	2.2-3.6.6.7	Pre-procedure patient care area			Required		
•	•	2.2-3.6.6.10	Soiled workroom or soiled holding room			Required		
•	•	2.2-3.6.6.11	Equipment and supply storage			Required		
•	•	2.2-3.6.6.12	Environmental services room			Required		
•	•	2.2-3.6.6.14	Computer room			Required		
•	•	2.2-3.6.6.15	Radiopharmacy.			Required		
•	•	2.2-3.6.6.16	Hot lab for scintigraphy (gamr			Required		
		2.2-3.6.7	Support Areas for Staff – If Nuc	lear Medicir	ne is provided			
•	•	2.2-3.6.7.1	Staff toilet(s)			Required		

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		2.2-3.6.8	Support Areas for Patients - If Nuclear Medicine is provided		
•	•	2.2-3.6.8.1	Patient waiting area	Required	
•	•	2.2-3.6.8.2	Patient changing rooms	Required	
•	•	2.2-3.6.8.3	Patient toilet rooms	Required	
	•	2.2-3.6.9	Special Design Elements for Nuclear Medicine Areas – If Nuclear Medic	cine is provided	
	•	2.2-3.6.9.1	Architectural details	Required	
3.3-1.	1.1.3. 3.	1-4 Patient Supp	port Facilities		
			ory Services – If Provided On Site		
		3.1-4.1.2.	Laboratory Testing/Work Area		
•	•	3.1-4.1.2.1	In a dedicated room unless the tests are exempted to comply by the Fi	DA	
•	•	3.1-4.1.2.2	Work Area	Required	
•	•	3.1-4.1.2.2	Work counter	Required	
•	•	3.1-4.1.2.2	Sink(s)	Required	
•	•	3.1-4.1.2.2	Hand-washing station	Required	
	•			Negative	
	•	ASHRAE 7.1	Min. Outdoor Air Changes / Hour	2	
	•	ASHRAE 7.1	Min. Total Air Changes / Hour	6	
	•	ASHRAE 7.1	All Room Air Exhausted Directly to Outdoors	N/R	
	•	ASHRAE 7.1	Air Recirculated by Means of Room Units	N/R	
	ASHRAE 7.1 Relative H		Relative Humidity (%)	N/R	
	•	ASHRAE 7.1	Design Temperature(°F)	70-75	
•	•	3.1-4.1.3	Support Areas for the Laboratory		
•	•	3.1-4.1.3.1	Storage cabinet(s) or closet(s)	Required	
•	•	3.1-4.1.3.2	Urine or feces specimen collection - if provided		
•	•	3.1-4.1.3.2	Toilet Room(s) for Patient Use	Required	
•	•	3.1-4.1.3.2	Hand-washing station	Required	
•	•	3.1-4.1.3.2	Blood collection - if provided		
•	•	3.1-4.1.3.2	Work counter	Required	
•	•	3.1-4.1.3.2	Seating space for patients	Required	
•	•	3.1-4.1.3.2	Hand-washing station	Required	
•	•	3.1-4.1.3.2 Reclining chair or gurney for patients who become unsteady		Required	
3.3-1.	.1.1.4, 3.	1-5 General Sup	pport Facilities		
		3.1-5.1 Linen Sei			
•	•	3.1-5.2.2	On-Site Linen Processing Area – if provided*		
•	•		*Select on or off-site		
•	•	3.1-5.2.2.1	Dedicated Linen Processing Area	Required	
•	•	3.1-5.2.2.1	Washer and dryer area	Required	
•	•	3.1-5.2.2.1	Soiled sorting and washing area	Required	
•	•	3.1-5.2.2.1	Clean drying and folding area	Required	
•	•	3.1-2.2.2.2	Supply storage	Required	
•	•	3.1-5.2.2.3	Clean Linen Storage	Required	
	•	ASHRAE 7.1	Pressure Relationship to Adjacent Areas	Positive	
	•	ASHRAE 7.1	Min. Outdoor Air Changes / Hour	N/R	
	•	ASHRAE 7.1	Min. Total Air Changes / Hour	2	
	•	ASHRAE 7.1	All Room Air Exhausted Directly to Outdoors	N/R	
	•	ASHRAE 7.1	Air Recirculated by Means of Room Units	N/R	

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			5 1 11 11 11 11 11 11	1				
	•	ASHRAE 7.1	Relative Humidity (%)	N/R				
	•	ASHRAE 7.1	Design Temperature (°F)	72-78				
•	•	3.1-5.2.2.4	Hand-wash station	Required				
		3.1-5.2.3	Off-site Laundry Services Support Areas – if provided*					
			*Select on or off-site					
•	•	3.1-5.2.3.1	Soiled Linen Holding area	Required				
	•	ASHRAE 7.1	Pressure Relationship to Adjacent Areas	Negative				
	•	ASHRAE 7.1	Min. Outdoor Air Changes / Hour	2				
	•	ASHRAE 7.1	Min. Total Air Changes / Hour	10				
	•	ASHRAE 7.1	All Room Air Exhausted Directly to Outdoors	Yes				
	•	ASHRAE 7.1	Air Recirculated by Means of Room Units	No				
	•	ASHRAE 7.1	Relative Humidity (%)	N/R				
	•	ASHRAE 7.1	Design Temperature (°F)	N/R				
•	•	3.1-5.2.3.2	Clean Linen Storage area	Required				
	•	ASHRAE 7.1	Pressure Relationship to Adjacent Areas	Positive				
	•	ASHRAE 7.1	Min. Outdoor Air Changes / Hour	N/R				
	•	ASHRAE 7.1	Min. Total Air Changes / Hour	2				
	•	ASHRAE 7.1	All Room Air Exhausted Directly to Outdoors	N/R				
	•	ASHRAE 7.1	Air Recirculated by Means of Room Units	N/R				
	•	ASHRAE 7.1	Relative Humidity (%)	N/R				
	•	ASHRAE 7.1	Design Temperature (°F)	72-78				
•	•	3.1-5.5.1	Environmental Services Room	Required				
•	•	3.1-5.5.1.1	Number per floor	1				
•	•	3.1-5.5.1.2	Service or floor mounted sink	Required				
•	•	3.1-5.5.1.2	Storage for supplies and housekeeping equipment	Required				
•	•	3.1-5.5.1.2	hand-washing station or hand sanitation dispenser	Required				
	•	ASHRAE 7.1	Pressure Relationship to Adjacent Areas	Negative				
	•	ASHRAE 7.1	Min. Outdoor Air Changes / Hour	N/R				
	•	ASHRAE 7.1	Min. Total Air Changes / Hour	10				
	•	ASHRAE 7.1	All Room Air Exhausted Directly to Outdoors	Yes				
	•	ASHRAE 7.1	Air Recirculated by Means of Room Units	No				
	•	ASHRAE 7.1	Relative Humidity (%)	N/R				
	•	ASHRAE 7.1	Design Temperature (°F)	N/R				
3.3-1.	1.1.5. 3.	1-6 Public and A	Administrative Areas		·			
		3.1-6.2 Public Ar						
•	•	3.1-6.2.2	Reception	Required				
•	•	3.1-6.2.2	Counter, desk or Kiosk	Required				
•	•	3.1-6.2.3	Waiting Area	Required				
	•	3.1-6.2.5	Local Telephone Access	Required				
	•	3.1-6.2.6	Provisions for Drinking Water	Required				
•	•	3.1-6.2.7	Wheel Chair Storage	Required				
•	•	3.14-6.2.3	Pediatric Waiting Area - if provided					
•	•	3.1-6.2.3	Dedicated to pediatrics	Required				
•	•	3.1-6.2.4	Public Toilet Room	Required				
	•	ASHRAE 7.1	Pressure Relationship to Adjacent Areas	Negative				
	•	ASHRAE 7.1	Min. Outdoor Air Changes / Hour	N/R				
		7.51110/ LE 7.11	Satasor / iii Orlanges / modi	14/15				

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ASHRAE 7.1 Min. Total Air Changes / Hour		10								
ASHRAE 7.1 All Room Air Exhausted Directly to Outdoors		No								
ASHRAE 7.1 Relative Humidity (%)		N/R								
ASHRAE 7.1 Design Temperature (°F)		N/R								
3.1-6.3 Administrative Areas										
3.1-6.3.3 General or Individual Offices		Required								
3.1-6.3.4 Multipurpose Room		Required*								
3.1-6.3.5 Medical Records		Required								
3.1-6.3.6 Equipment and Supply Storage		Required								
3.1-6.4 Support Areas for Staff										
• • 3.1-6.4.2 Storage for Staff		Required								
3.3-1.1.1.6, 3.1-7 Design and Construction Requirements										
3.1-7.2 Architectural Details, Surfaces, And Furnishings										
• 3.1-7.2.2.1 Corridor width		See NFPA LSC								
• • Unocci	upied and corridors	7'-6"								
	ied Rooms	7'-10"								
• • Stowed	k	7′-0″								
• • S.1-7.2.2.2 Ceiling Mounted Equipment Circula	tion	7′-6″								
● ● height		83.5 inches								
1 • 1 • 131-7223 1000rs	where wheeled bed ers are used	45.5 inches								
• • Width a	at other locations	See NFPA LSC								
• • Cleana	able and wear resistant	Required								
3.1-7.2.3.1 Floor Finishes Smootl	h transitions	Required								
• Germid	cide/chemical resistant	Required								
• Washa	ble	Required								
• Smootl		Required								
	cide/chemical resistant	Required								
• 3.1-7.2.3.2 *In areas of wet spray or splatter Monoli		Required*								
• Scrubb		Required*								
• Smootl		Required*								
	resistant	Required*								
• Scrubb		Required								
	h/crevice free	Required								
	cal resistant	Required								
3.3-1.1.1.7, 3.1-8 Building Systems										
3.1-8.2 Ventilation and Space-Conditioning Requirements										
ASHRAE 6.4 Administrative; bulk storage; soiled holding	Filter Bank No. 1 (MERV)	7								
ASHRAE 6.4 spaces; food preparation spaces; and laundries	Filter Bank No. 2 (MERV)	NR								
A ASHDAE 6.4	Filter Bank No. 1 (MERV)	7								
ASHRAE 6.4 All other outpatient spaces	Filter Bank No. 2 (MERV)	NR								

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1.2-5 Plannin	g and Design Cons	iderations and Require	ements						
	1.2-5.1.5 Design Cri	1.2-5.1.5 Design Criteria for Performance of Interior Wall and Floor/Ceiling Constructions							
•	1.2-5.1.5.2 Minimum STC rating for demising walls See Table 1.2-6 below			Required					
	Table 1.2-6	Design Criteria for Minimu	ım Sound Isolation Performance Between Enclo	sed Rooms					
•			Corridor (with entrance)	35 STC					
•			Public space	50 STC					
•	Exam room Adjacent to:		Exam Room (no electronic masking)	50 STC					
•			Exam Room (with electronic masking)	40 STC					
•	1		MRI Room	60 STC					
•	Treatment Room	A diagont to	Room	50 STC					
•	ileatifierit kooffi	Adjacent to:	Corridor	35 STC					
•	Toilet Room Adjacent to: Public space		Public space	45 STC					
•			Public space	50 STC					
•	Consultation Room		Patient Rooms	50 STC					
•			Corridor (with entrance)	35 STC					
•	Public space	Adjacent to:	MRI Room	50 STC					

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