

CHAPTER 308: PROSTHETICS AND SENSORY AIDS SERVICE

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1 PURPOSE AND SCOPE

This document provides Space Planning Criteria for Chapter 308: Prosthetics and Sensory Aids Service as it applies to all medical facilities at the Department of Veterans Affairs (VA).

2 DEFINITIONS

Prosthetics and Sensory Aids Service: A specialized program designed to provide prosthetic / orthotic services to the disabled beneficiary. Prosthetic services are distinguished as functions related to the replacement of missing parts of the body. Orthotic services are characterized as functions that support existing parts of the body. These services may include the procurement and fabrication of artificial limbs, aids for the blind, hearing aids, upper and lower extremity orthotic devices, wheelchairs, orthopedic shoes, plastic eyes, noses or major facial restorations, eyeglasses, automotive adaptive equipment, and major life support systems such as environmental controls and home dialysis units.

Space Planning / SEPS

Accessible: A site, building, facility, or portion thereof that complies with provisions outlined in the Architectural Barriers Act of 1968 (ABA).

Architectural Barriers Act (ABA): A set of standards developed to ensure that all buildings financed with federal funds are designed and constructed to be fully accessible to everyone. This law requires all construction, renovation, or leasing of sites, facilities, buildings, and other elements, financed with federal funds, to comply with the Architectural Barriers Act Accessibility Standards (ABAAS). The ABAAS replaces the Uniform Federal Accessibility Standards (UFAS).

Average Length of Encounter (ALoE): Averaged length of time, in minutes, a patient spends in an Exam / Treatment Room interacting with a provider and the clinical support team. It is accounted from room “set-up” to “clean-up” by staff. This metric is used to determine the number of annual patient / provider encounters that take place in an Exam / Treatment Room which, in turn, is used to calculate the number of Exam / Treatment Rooms needed in a facility based on projected annual workload. The ALoE is determined with VHA SME input during a PG-18-9 clinical chapter revision / update.

Average Length of Stay (ALoS): The average number of days a patient Veteran stays in an inpatient care unit. The ALoS is used to calculate the number of patient bedrooms for a specialty by dividing the site’s projected workload by the ALoS.

Building Gross (BG) Factor: A Factor applied to the sum of all the Departmental Gross Square Footage (DGSF) in a project to determine the Building Gross Square Footage. This factor accounts for square footage used by the building envelope, structural systems, horizontal and vertical circulation including main corridors, elevators, stairs and escalators, shafts, and mechanical spaces. The Department of Veterans Affairs has set this factor at 1.35 and included guidance in case of variance when developing a Program for Design (PFD) in SEPS.



Clinic Stop: Per these criteria, a clinic stop is the workload unit of measure for space planning. Clinic Stops are codified by VSSC, when applicable, they are referenced by number in the calculation of workload driven patient care spaces in this document.

Department Net to Gross (DNTG) Factor: A parameter, determined by the VA for each clinical and non-clinical department PG-18-9 space planning criteria chapter, used to convert the programmed Net Square Feet (NSF) area to the Department Gross Square Feet (DGSF) area.

Encounter: An interaction between a patient Veteran and a VA provider or providers in an Exam Room / Treatment Room / Consultation Room / Procedure Room, spaces where a patient Veteran received clinical care.

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 combined time commitment equals that of one full-time employee (i.e., 40 hours per week).

Functional Area (FA): The grouping of rooms and spaces based on their function within a clinical service or department.

Functional Area Criteria Statement (FACS): A verbalized mathematical / logical formulation assigned to a FA incorporating answers to Input Data Statements (IDSs) to determine the condition for providing the rooms / spaces listed in the FA in the baseline space program or Program for Design (PFD) for a project. Certain rooms / spaces may or may not have additional conditions.

Input Data Statement(s): A question or set of questions designed to elicit information about the healthcare project to generate a Program for Design (PFD) based on the parameters set forth in this set of documents. This information is processed through mathematical and logical operations in the VA Space and Equipment Planning System (SEPS).

JSN (Joint Schedule Number): A unique five alpha-numeric code assigned to each content item in the PG-18-5 Standard. JSNs are defined in DoD's Military Standard 1691 and included in SEPS Content Table.

Net Square Feet / Net Square Meters (NSF/NSM): The area of a room or space derived from that within the interior surface of the bounding walls or boundaries.

Patient Unique: (or Unique Patient), A Veteran patient counted as a unique in each division from which they receive care. Patient Uniques are included in the Registry for a VA Medical Center.

Program for Design (PFD): A project specific itemized listing of the spaces, rooms, and square foot area required for the proper operation of a specific service / department, and the corresponding area for each. PFDs are generated by SEPS based on the PG-18-9 Standard.

PG-18-5: A Department of Veterans Affairs' Equipment Guidelist Standard for planning, design, and construction of VA healthcare facilities; a Program Guide (PG) that lists assigned



room contents (medical equipment, furniture, and fixtures) to each room in PG-18-9. PG-18-5 follows PG-18-9's chapter organization and nomenclature.

PG-18-9: A Department of Veterans Affairs' Program Guide for the Space Planning Criteria Standard use to develop space planning guidance for the planning, design, and construction of VA healthcare facilities; a Program Guide (PG) that provides space planning guidance for VA Medical Centers (VAMCs) and Community Bases Outpatient Clinics (CBOCs). PG-18-9 is organized by chapters, as of September 2021 there are 56 clinical and non-clinical PG-18-9 chapters; they are implemented and deployed in SEPS so that space planners working on VA healthcare projects can develop baseline space programs.

PG-18-12: A Department of Veterans Affairs' Design Guide Standard for planning, design and construction of VA healthcare facilities, a Program Guide (PG) that provides design guidance for VA Medical Centers (VAMCs) and Community Bases Outpatient Clinics (CBOCs). The narrative section details functional requirements and the Room Template section details the planning and design of key rooms in PG-18-9. Not all PG-18-9 chapters have a corresponding PG-18-12 Design Guide; one Design Guide can cover more than one PG-18-9 chapter.

Provider: An individual who examines, diagnoses, treats, prescribes medication, and manages the care of patients within his or her scope of practice as established by the governing body of a healthcare organization.

Room Area: The square footage required for a clinical or non-clinical function to take place in a room / space. It takes into account the floor area required by equipment (medical and non-medical), furniture, circulation, and appropriate function / code-mandated clearances. Room area is measured in Net Square Feet (NSF).

Room Code (RC): A unique five alpha-numeric code assigned to each room in the PG-18-9 Standard. Room Codes in PG-18-9 are unique to VA and are the basis for SEPS's Space Table for VA projects.

Room Criteria Statement (RCS): A mathematical / logical formulation assigned to each room / space included in PG-18-9 incorporating answers to Input Data Statements (IDSs) to determine the provision of the room / space in the baseline space program or Program for Design (PFD) for a project.

Room Efficiency Factor: A factor that provides flexibility in the utilization of a room to account for patient delays, scheduling conflicts, and equipment maintenance. Common factors are in the 75% to 85% range. A room with 80% room efficiency provides a buffer to assume that this room would be available 20% of the time beyond the planned operational practices for this room. This factor may be adjusted based on the actual and/or anticipated operations and processes of the room/department at a particular facility.

SEPS: Acronym for Space and Equipment Planning System which produces equipment lists and Program for Design for a healthcare project based on specific information entered in response to Input Data Questions.



SEPS Importer: A style-based format developed to allow upload of RCSs and IDs to SEPS to implement and operationalize space planning criteria in PG-18-9 in the SEPS digital tool. This format establishes the syntax used in the RCSs and allows the use of Shortcuts. Shortcuts allow developers of space planning criteria statements to simplify RCSs making full use of their logical and mathematical functionality. A shortcut can refer to an RCS, a room in any FA or a formula. Shortcuts are [bracketed] when used in FAs and RCSs and are listed along with their equivalences at the end of the Space Planning Criteria section.

Space Planning Concept Matrix (SPCM): A working document developed during the chapter update process. It lists all the rooms organized by Functional Area and establishes ratios between the directly and the indirectly workload driven rooms for the planning range defined in this document. The matrix is organized in ascending workload values in ranges reflecting existing facilities and potential future increase. Section 5 of this document Space Planning Criteria reflects the values in the SPCM.

Stop Code: A measure of workload including clinic stops forecasted by the Office of Policy and Planning (OPP) for all Strategic Planning Categories at Medical Center and Outpatient Clinic levels.

Telehealth: The use of technology, such as computers and mobile devices, to manage healthcare remotely. It includes a variety of health care services, including but not limited to online support groups, online health information and self-management tools, email and online communication with health care providers, remote monitoring of vital signs, video, or online doctor visits. Depending on the concept of operations for this space, it may be equipped as an exam room or as a consult room with video/camera capability.

Utilization Rate: A factor used in the calculation of a directly workload-driven room throughput. It represents, in a percent value, the room is idle based on the planning assumptions. For example, if a directly workload-driven room is available for use 8 hours a day, the Utilization Rate represents the assumed time it will be actually be used, an 85% utilization rate indicates, for planning purposes, the room will be used 6.8 hours a day. An additional directly workload-driven room will be provided in the calculation once the previous room has reached 100% utilization. The utilization Rate is embedded in the Room Throughput value calculated in Section 3 of this document.

VA Room Family (VARF): An organizational system of rooms / spaces grouped by function, a 'Room Family'. There are two "Orders" in the VARF: Patient Care and Patient Care Support; Patient Care features four sub-orders: Clinical, Inpatient, Outpatient and Residential Clinical. There are also four sub-orders in the Patient Care Support order: Building Support, Clinical Support, Staff Support and Veteran Support. Each room in a Family has a unique Room Code and NSF assigned based on its Room Contents and function which correspond to the specific use of the room. The same RC can be assigned to different Room Names with the same function in this document and can be assigned an NSF that varies based on the PG-18-5 Room Contents assigned to the room.

VA Technical Information Library (TIL): A resource website maintained by the Facilities Standards Service (FSS) Office of Construction and Facilities Management (CFM) containing



a broad range of technical publications related to the planning, design, leasing, and construction of VA facilities. VA-TIL can be accessed at: <https://www.cfm.va.gov/TIL/>

Workload: Workload is the anticipated number of procedures, clinic stops, clinic encounters etc. that is processed through a department/service area. The total workload applied to departmental operational assumptions will determine overall room requirements by modality.

Workstation: Area outfitted with equipment and furnishings, typically allocated 56 NSF each. Managers and other staff with no direct reports as well as part-time, seasonal, and job-sharing staff may qualify for a workstation. Such environments are particularly conducive to team-oriented office groupings. These environments work best when they have access to conference and small group meeting spaces.

3 OPERATING RATIONALE AND BASIS OF CRITERIA

- A. Space planning criteria included in this Standard have been specifically developed for this Department/ Service in a Department of Veterans Affairs healthcare facility based on established VHA policy and guidelines to define the scope of services provided for the existing workload demand as well as that in the foreseeable future. Rooms and Functional Areas are provided based on research of clinical and non-clinical activities performed in this Department.
- B. Development / update of VA's Program Guide (PG) standards is a research based effort executed with participation of VHA Subject Matter Experts (SMEs), VA-Construction and Facilities Management Office (CFM) professional staff and specialty consultants hired for the task. These space planning standards are based on current applicable VHA policies and guidelines, established and/or anticipated best practice standards, and latest medical technology developments. Workload metrics were tailored to satisfy current and anticipated veteran workload demand.
- C. The space planning component of PG-18-9 is based on the Space Planning Concept Matrix (SPCM) which lists all the rooms organized by Functional Area and assigns room quantity (Q) and area (NSF) for a series of ranges corresponding to the smallest to the largest department for this service in the VA healthcare system in incremental size; each range corresponds to a workload parameter which determines the number and area of each directly workload-driven room. The remainder of the rooms in the range i.e., waiting, storage, staff workstations, etc. are determined by ratios to the resulting number of or NSF of the workload-driven rooms.
- D. Sections 4 and 5 of these space planning standards as well as the PG-18-5 standard are implemented in the Space and Equipment Planning System (SEPS) and hosted at the MAX.gov website so planners working on VA Construction projects can develop single or multi-department projects based on these PG-18-9- and the PG-18-5 standards. Output from SEPS is through Space and Contents Reports; the Space Report is the Program for Design (PFD), the Content Report is the Project Room Contents (PRC). Inclusion of a Functional Area as well as Room quantity (Q) and determination of the room area (NSF)



in the PFD is based on the projected Workload input which triggers calculations included in the Room Criteria Statements (RCSs). The RCSs are placed immediately after each room name, room code and baseline area (NSF). The PRC list the medical equipment, furniture and fixtures associated to each Room Code in the project. The PFD & PRC are the baseline requirements for the planning phase of a VA project based on a site's projected workload for the target planning year. This chapter's corresponding PG-18-12, Design Guide -if available- is intended for use during the design phase of the project.

- E. Space Planning parameters and metrics in this document are based on the Prosthetics and Sensory Aids Service Space Planning Criteria Matrix (SPCM) developed as the basis for this chapter. The Prosthetics and Sensory Aids Service SPCM lists all the spaces a VA Prosthetics and Sensory Aids Service site would require; the quantity and NSF for each room is calculated based on the Prosthetics and Sensory Aids Service projected workload or number of FTE positions authorized. The SPCM is organized in 10 ranges, each range represents an incremental workload value equivalent to one Patient Care Room, this way all current VA Prosthetics and Sensory Aids Service sites are covered in the SPCM. The upper ranges are calculated for future facilities in case a higher projected workload. Each range corresponds to an annual Prosthetics and Sensory Aids Service workload of 3,200 encounters. The 10 SPCM ranges cover between 660 -20% of 3,200- and 32,000 annual encounters.
- F. The SPCM metrics are translated into one (or more) Room Criteria Statement (RCS) for each room in Section 5 of this document. The SPCM Planning Range, the maximum number of directly workload-driven patient care rooms, in this document is 10. If a project shall require provision of workload driven rooms above the maximum range value refer to CFM for guidance. Rooms in this space planning document are organized in 5 Functional Areas (FAs).
- G. Based on its intended function, each room / space is assigned a:
 - 1. Room Name (RN),
 - 2. Room Code (RC),
 - 3. Room Area, the Net Square Feet (NSF) and its corresponding "soft metric" Net Square Meters (NSM),
 - 4. Unique Room Criteria Statement(s) (RCSs) correlated to answers to Input Data Statements (IDSs), and
 - 5. Room Comment as needed.
- H. The Room Codes included in this chapter stem from the VA Room Family. A unique support space, that may have variable area, is assigned a unique Room Code and adopts the square footage, as needed, correlated to the room contents assigned which in turn correspond to the range for those rooms. A unique clinical space or a direct clinical support room, i.e., control room, system components room, etc. typically does not feature variable NSF. Patient Care room names for rooms unique to this chapter end in ", Prsthtcs Svc". Patient Care Support room names end in ", Bldg Sprt", "Clncl Sprt", "Stff Sprt", or ", Vet Sprt", correlating to Building, Clinical, Staff or Veteran Support room families.



- I. Section 5, Sub-Section F lists the SEPS Importer Shortcuts used for implementation of Sections 4 & 5 in SEPS. These shortcuts are inserted into the Room Criteria Statement (RCS) for each room which upon upload into the Space and Equipment Planning System (SEPS) allowing planners developing VA healthcare projects to determine quantity and square footage of each room by performing mathematical or logical calculations. Shortcuts refer Input Data Statements (IDSs), Rooms or calculation parameters stemming from the SPCM.
- J. SEPS is accessible to government healthcare planners and private sector consultants working on VA HC projects during their Period of Performance (PoP) through the MAX.gov website; government provided Training is a requisite for access.
- K. SEPS incorporates a Net-to-Department Gross factor (NTDG) factor of **1.25** for Prosthetics and Sensory Aids Service and a Building Gross factor of 1.35 in the space calculation to generate the Department Gross Square Feet (DGSF) and the Building Gross Square Feet (BGSF) respectively for the project based on the aggregate resulting Net Square Feet (NSF) for each range. Planners can adjust the BGSF factor in SEPS; the NTDG factor is fixed.
- L. Refer to the chapter corresponding PG-18-5 Equipment Guidelist for the Room Content assignment for each room during the planning phase of a project.
- M. Refer to the chapter corresponding PG-18-12: Design Guide, if available, during the planning and design phases of a project. Not all PG-18-9 clinical chapters have a corresponding PG-18-12 document, please refer to the VA-TIL.
- N. The space planning and design Program Guides: PG-18-9, PG-18-5, and PG-18-12 are available at the [Department of Veterans Affairs Office of Construction and Facilities Management \(CFM\) Technical Information Library \(TIL\)](#) website.

4 INPUT DATA STATEMENTS (IDS)

- A. How many annual clinic stops are projected? (W) (Values: 660 to 32,000)

5 SPACE PLANNING CRITERIA

A. FA 1: RECEPTION AREA

- 1. **Prsthcs Svc Waiting, Bldg Sprt (SB003)..... 80 NSF (7.5 NSM)**
 - a. *Provide one if [annual clinic stops projected] is between 660 and 6,400*
 - b. *Provide one at 110 NSF if [annual clinic stops projected] is between 6,401 and 12,800*
 - c. *Provide one at 150 NSF if [annual clinic stops projected] is between 12,801 and 19,200*
 - d. *Provide one at 190 NSF if [annual clinic stops projected] is between 19,201 and 25,600*
 - e. *Provide one at 240 NSF if [annual clinic stops projected] is between 25,601 and 32,000*



- 2. Prsthcs Svc Reception, Clncl Sprt (SC183)..... 85 NSF (7.9 NSM)**
a. Provide one if [annual clinic stops projected] is between 660 and 16,000
b. Provide one at 260 NSF if [annual clinic stops projected] is between 16,001 and 32,000

Allocated NSF accommodates two Receptionist FTEs, patient privacy area, and circulation.

- 3. Prsthcs Svc Patient Education Workstation, Clncl Sprt (SC172). 40 NSF (3.8 NSM)**
a. Provide one if [annual clinic stops projected] is between 660 and 16,000
b. Provide two if [annual clinic stops projected] is between 16,001 and 32,000

- 4. Prsthcs Svc Visitor Toilet, Bldg Sprt (SB191) 60 NSF (5.6 NSM)**
a. Provide two if [annual clinic stops projected] is between 660 and 32,000

Allocated NSF accommodates one accessible toilet @ 25 NSF, one accessible wall-hung lavatory @ 13 NSF, ABA clearances, and circulation. One for male and one for female.

B. FA 2: PATIENT AREA

1. Soft Goods Fabrication

- Fitting / Exam Room, Prsthtcs Svc (CPR01)120 NSF (11.2 NSM)**
a. Provide one if [annual clinic stops projected] is between 660 and 3,200
b. Provide two if [annual clinic stops projected] is between 3,201 and 6,400
c. Provide three if [annual clinic stops projected] is between 6,401 and 9,600
d. Provide four if [annual clinic stops projected] is between 9,601 and 12,800
e. Provide five if [annual clinic stops projected] is between 12,801 and 16,000
f. Provide six if [annual clinic stops projected] is between 16,001 and 19,200
g. Provide seven if [annual clinic stops projected] is between 19,201 and 22,400
h. Provide eight if [annual clinic stops projected] is between 22,401 and 25,600
i. Provide nine if [annual clinic stops projected] is between 25,601 and 28,800
j. Provide ten if [annual clinic stops projected] is between 28,801 and 32,000

2. Custom Fabrication

- Fitting / Exam Room, Prsthtcs Svc (CPR02)120 NSF (11.2 NSM)**
a. Provide one if [annual clinic stops projected] is between 660 and 16,000
b. Provide two if [annual clinic stops projected] is between 16,001 and 32,000

- 3. Dynamic Alignment Room, Prsthtcs Svc (CPR04)150 NSF (14.0 NSM)**
a. Provide one if [annual clinic stops projected] is between 660 and 32,000

- 4. Prsthcs Svc Dressing Cubicle, Bldg Sprt (SB137) 35 NSF (3.3 NSM)**
a. Provide one if [annual clinic stops projected] is between 660 and 16,000
b. Provide two if [annual clinic stops projected] is between 16,001 and 32,000

- 5. Prsthcs Svc Patient Toilet, Bldg Sprt (SB201) 60 NSF (5.6 NSM)**
a. Provide one if [annual clinic stops projected] is between 660 and 32,000



Allocated NSF accommodates one accessible toilet @ 25 NSF, one accessible wall-hung lavatory @ 13 NSF, ABA clearances, and circulation.

6. Eye Fitting Studio, Prsthtcs Svc (CPR05) 100 NSF (9.3 NSM)
a. Provide one if [annual clinic stops projected] is between 660 and 32,000

This space is used to display, fit, match and color coordinate artificial eyes. Patient privacy and natural north light are important design considerations.

7. Facial / Body Fitting Studio, Prsthtcs Svc (CPR06)200 NSF (18.6 NSM)
a. Provide one if [annual clinic stops projected] is between 660 and 32,000

This area includes display and is used to apply casts, fit, construct, and adjust artificial facial or body appliances that need color coordination with adjacent body tones. A hydraulic chair is used for ambulatory patients and space is required to accommodate litter patients. Patient privacy and natural north light are important design considerations.

8. Restoration Laboratory, Prsthtcs Svc (CPR12)300 NSF (27.9 NSM)
a. Provide one if [annual clinic stops projected] is between 660 and 9,600
b. Provide one at 350 NSF if [annual clinic stops projected] is between 9,601 and 19,200
c. Provide one at 400 NSF if [annual clinic stops projected] is between 19,201 and 32,000

This laboratory is the technicians' workspace requiring individual workstations and multiple bench and floor type power equipment pieces. Fume hoods are required to exhaust toxic fumes. Access to natural north light is an important design consideration.

9. Team Evaluation / Multi-Purpose Room, Prsthtcs Svc (CPR16)240 NSF (22.3 NSM)
a. Provide one if [annual clinic stops projected] is between 660 and 9,600
b. Provide one at 300 NSF if [annual clinic stops projected] is between 9,601 and 32,000

This area is used to view and evaluate patient handicaps. A Regional Evaluation Team consists of eight individuals. This room will also be used for patient examinations and fitting and educational functions when not being used by the Evaluation Team.

10. Cast Room, Prsthtcs Svc (CPR17)160 NSF (14.9 NSM)
a. Provide one if [annual clinic stops projected] is between 660 and 16,000
b. Provide one at 200 NSF if [annual clinic stops projected] is between 16,001 and 32,000



C. FA 3: SUPPORT AREA

- 1. Prsthcs Svc Clean Utility Room, Lgstcs Svc (SB737) 80 NSF (7.5 NSM)**
 - a. Provide one if [annual clinic stops projected] is between 660 and 16,000*
 - b. Provide one at 100 NSF if [annual clinic stops projected] is between 16,001 and 32,000*

- 2. Prsthcs Svc Soiled Utility Room, Lgstcs Svc (SB743) 80 NSF (7.5 NSM)**
 - a. Provide one if [annual clinic stops projected] is between 660 and 16,000*
 - b. Provide one at 100 NSF if [annual clinic stops projected] is between 16,001 and 32,000*

- 3. Equipment Storage Room, Prsthtcs Svc (CPR18)120 NSF (11.2 NSM)**
 - a. Provide one if [annual clinic stops projected] is between 660 and 16,000*
 - b. Provide one at 140 NSF if [annual clinic stops projected] is between 16,001 and 32,000*

- 4. Prosthetic / Orthotic Laboratory
Fume Room, Prsthtcs Svc (CPR21)200 NSF (18.6 NSM)**
 - a. Provide one if [annual clinic stops projected] is between 660 and 16,000*
 - b. Provide one at 240 NSF if [annual clinic stops projected] is between 16,001 and 32,000*

This area includes: ovens, lamination area, and cast modification area.

- 5. Prsthcs Svc Trash / Recycling Room, Bldg Sprt (SB267) 50 NSF (4.7 NSM)**
 - a. Provide one if [annual clinic stops projected] is between 660 and 16,000*
 - b. Provide one at 80 NSF if [annual clinic stops projected] is between 16,001 and 32,000*

This room should be located adjacent to the Prosthetic and Orthotic Laboratory, Fume Room.

- 6. Prosthetic / Orthotic Laboratory
Dust Room, Prsthtcs Svc (CPR22).....300 NSF (27.9 NSM)**
 - a. Provide one if [annual clinic stops projected] is between 660 and 16,000*
 - b. Provide one at 350 NSF if [annual clinic stops projected] is between 16,001 and 32,000*

This area includes: grinders, polishers, saws, sanders, etc.

- 7. Prosthetic / Orthotic Laboratory
Workstation, Prsthtcs Svc (CPR23) 100 NSF (9.3 NSM)**
 - a. Provide one if [annual clinic stops projected] is between 660 and 16,000*
 - b. Provide one at 140 NSF if [annual clinic stops projected] is between 16,001 and 32,000*

The Prosthetic and Orthotic Laboratory provides for full fabrication and fitting of prostheses and orthoses. This area includes a casting room, 2-3 casting fitting rooms, CAD/CAM room, general work area with benches and hand / power tools, machine



room, cast modification room, lamination room, storage room, supervisory room, and administrative room. A central dust collection and fume exhaust system and / or individual equipment exhaust systems should be provided.

8. Prosthetic / Orthotic Laboratory

- Maintenance Room, Prsthtcs Svc (CPR24)150 NSF (14.0 NSM)**
a. Provide one if [annual clinic stops projected] is between 660 and 16,000
b. Provide one at 200 NSF if [annual clinic stops projected] is between 16,001 and 32,000

This room includes: Air Compressor, Dust Collection Equipment, and Vacuum Machine.

9. Shoe Modification Materials

- Storage Room, Prsthtcs Svc (CPR26)..... 100 NSF (9.3 NSM)**
a. Provide one if [annual clinic stops projected] is between 660 and 16,000
b. Provide one at 140 NSF if [annual clinic stops projected] is between 16,001 and 32,000

10. Wheelchair Repair Shop, Prsthtcs Svc (CPR31)200 NSF (18.6 NSM)

- a. Provide one if [annual clinic stops projected] is between 660 and 16,000*
b. Provide one at 300 NSF if [annual clinic stops projected] is between 16,001 and 32,000

11. Wheelchair Active Storage Room, Prsthtcs Svc (CPR32).....200 NSF (18.6 NSM)

- a. Provide one if [annual clinic stops projected] is between 660 and 16,000*
b. Provide one at 260 NSF if [annual clinic stops projected] is between 16,001 and 32,000

12. Dirty Wheelchair / DME

- Active Storage Room, Prsthtcs Svc (CPR34)200 NSF (18.6 NSM)**
a. Provide one if [annual clinic stops projected] is between 660 and 16,000
b. Provide one at 260 NSF if [annual clinic stops projected] is between 16,001 and 32,000

13. Wheelchair Parts Storage Room, Prsthtcs Svc (CPR36)200 NSF (18.6 NSM)

- a. Provide one if [annual clinic stops projected] is between 660 and 16,000*
b. Provide one at 260 NSF if [annual clinic stops projected] is between 16,001 and 32,000

14. Computer Aided Design /

- Computer Aided Manufacturing, Prsthtcs Svc (CPR41) 80 NSF (7.5 NSM)**
a. Provide one if [annual clinic stops projected] is between 660 and 16,000
b. Provide one at 120 NSF if [annual clinic stops projected] is between 16,001 and 32,000

Automated Fabrication of Mobility Aids is a CAD/CAM process that uses computerized equipment used to scan and measure residual limbs of patients with amputation. Foam or plaster blanks are carved by computerized lathe to create



check and permanent prosthetic sockets that are then fabricated and fitted to the patient.

- 15. Sewing Room, Prsthtcs Svc (CPR46).....120 NSF (11.2 NSM)**
 - a. Provide one if [annual clinic stops projected] is between 660 and 16,000*
 - b. Provide one at 160 NSF if [annual clinic stops projected] is between 16,001 and 32,000*
- 16. Wheelchair / Stretcher Storage Room, Prsthtcs Svc (CPR51) 40 NSF (3.8 NSM)**
 - a. Provide one if [annual clinic stops projected] is between 660 and 16,000*
 - b. Provide one at 80 NSF if [annual clinic stops projected] is between 16,001 and 32,000*
- 17. Orthotics / Prosthetic Parts / Materials Storage Room, Prsthtcs Svc (CPR56)..... 100 NSF (9.3 NSM)**
 - a. Provide one if [annual clinic stops projected] is between 660 and 16,000*
 - b. Provide one at 140 NSF if [annual clinic stops projected] is between 16,001 and 32,000*
- 18. Prosthetic Appliances Mailing Room, Prsthtcs Svc (CPR61)..... 80 NSF (7.5 NSM)**
 - a. Provide one if [annual clinic stops projected] is between 660 and 16,000*
 - b. Provide one at 100 NSF if [annual clinic stops projected] is between 16,001 and 32,000*
- 19. Prsthcs Svc Housekeeping Aides Closet (HAC), Bldg Sprt (SB244)..... 60 NSF (5.6 NSM)**
 - a. Provide one if [annual clinic stops projected] is between 660 and 16,000*
 - b. Provide one at 80 NSF if [annual clinic stops projected] is between 16,001 and 32,000*

D. FA 4: STAFF AND ADMINISTRATIVE AREA

- 1. Prsthcs Svc Prosthetics Service Chief Office, Stff Sprt (SS204) 100 NSF (9.3 NSM)**
 - a. Provide one if [annual clinic stops projected] is between 660 and 32,000*
- 2. Prsthcs Svc Service Assistant Chief Office, Stff Sprt (SS204) 100 NSF (9.3 NSM)**
 - a. Provide one if [annual clinic stops projected] is between 660 and 32,000*
- 3. Prsthcs Svc Visitor Waiting, Stff Sprt (SS222) 80 NSF (7.5 NSM)**
 - a. Provide one if [annual clinic stops projected] is between 660 and 32,000*

Allocated space accommodates one standard chair @ 9 NSF, one bariatric chair @ 14 NSF, one accessible space @ 10 NSF, and circulation; total three people.
- 4. Prsthcs Svc Administration Support Workstation, Stff Sprt (SS218) 56 NSF (5.3 NSM)**
 - a. Provide one if [annual clinic stops projected] is between 660 and 16,000*
 - b. Provide two if [annual clinic stops projected] is between 16,001 and 32,000*



5. **Prsthcs Svc Purchasing Agent Workstation, Stff Sprt (SS218) 56 NSF (5.3 NSM)**
 - a. *Provide one if [annual clinic stops projected] is between 660 and 16,000*
 - b. *Provide two if [annual clinic stops projected] is between 16,001 and 32,000*
6. **Prsthcs Svc Restoration Clinic Workstation, Stff Sprt (SS218) 56 NSF (5.3 NSM)**
 - a. *Provide one if [annual clinic stops projected] is between 660 and 16,000*
 - b. *Provide two if [annual clinic stops projected] is between 16,001 and 32,000*

7. **Prsthcs Svc Orthotic Lab Technician Workstation, Stff Sprt (SS218) 56 NSF (5.3 NSM)**
 - a. *Provide one if [annual clinic stops projected] is between 660 and 16,000*
 - b. *Provide two if [annual clinic stops projected] is between 16,001 and 32,000*
8. **Prsthcs Svc Staff Conference Room, Educ Svc (SS101).....240 NSF (22.3 NSM)**
 - a. *Provide one if [annual clinic stops projected] is between 660 and 16,000*
 - b. *Provide one at 300 NSF if [annual clinic stops projected] is between 16,001 and 32,000*

Allocated NSF accommodates six conference chairs @ 7.5 NSF each, two 5'-0" x 2'-0" tables at 10 NSF each, one credenza @ 8 NSF, and circulation; total six people.

9. **Prsthcs Svc Staff Breakroom, Stff Sprt (SS262)120 NSF (11.2 NSM)**
 - a. *Provide one if [annual clinic stops projected] is between 660 and 9,600*
 - b. *Provide one at 140 NSF if [annual clinic stops projected] is between 9,601 and 19,200*
 - c. *Provide one at 160 NSF if [annual clinic stops projected] is between 19,201 and 32,000*
10. **Prsthcs Svc Female Staff Locker Room, Stff Sprt (SS232) 100 NSF (9.3 NSM)**
 - a. *Provide one if [annual clinic stops projected] is between 660 and 16,000*
 - b. *Provide one at 140 NSF if [annual clinic stops projected] is between 16,001 and 32,000*

Provide locker space only for those FTEs without assigned office or workspace. For less than five FTE combine Locker Room facilities with adjacent department or sum in chapter 410.

11. **Prsthcs Svc Female Staff Toilet, Bldg Sprt (SB191) 60 NSF (5.6 NSM)**
 - a. *Provide one if [annual clinic stops projected] is between 660 and 16,000*
 - b. *Provide two if [annual clinic stops projected] is between 16,001 and 32,000*
12. **Prsthcs Svc Male Staff Locker Room, Stff Sprt (SS241) 100 NSF (9.3 NSM)**
 - a. *Provide one if [annual clinic stops projected] is between 660 and 16,000*
 - b. *Provide one at 140 NSF if [annual clinic stops projected] is between 16,001 and 32,000*

Provide locker space only for those FTEs without assigned office or workspace. For less than five FTE combine Locker Room facilities with adjacent department or sum in chapter 410.



- 13. Prsthcs Svc Male Staff Toilet, Bldg Sprt (SB191) 60 NSF (5.6 NSM)**
a. Provide one if [annual clinic stops projected] is between 660 and 16,000
b. Provide two if [annual clinic stops projected] is between 16,001 and 32,000

E. SEPS IMPORTER SHORTCUTS

The following shortcuts are used in the Room Criteria Statements in the Prosthetics and Sensory Aids Service Functional Areas. These shortcuts are used during upload of this document into the Space and Equipment Planning System (SEPS) software during implementation of the space planning parameters contained herewith to allow for mathematical or logical calculations to be performed. Input Data Statements (IDSs), Rooms or a partial calculation formula can have a shortcut.

1. *annual clinic stops projected*: [How many annual clinic stops are projected?]

6 PLANNING AND DESIGN CONSIDERATIONS

- A. For efficiency in programming and planning combine and co-locate waiting, reception, and restroom functions and spaces of related services.
- B. The Prosthetic and Sensory Aids Service should be located with convenient access from the main entrance to the facility in order to reduce the travel distance to the service for disabled veterans. Direct access to Ambulatory Care and Physical Medicine and Rehabilitation Services is desirable.
- C. Patients requiring Prosthetic and Orthotic devices require increased maneuvering space. This should be taken into consideration when designing space within the service.
- D. Configure patient waiting areas to provide clustered seating in order to eliminate large waiting spaces, reduce noise and confusion, and improve the general patient environment.
- E. Patient confidentiality should be maintained when providing personal information to interview clerks and/or other staff.
- F. A strong relationship between Prosthetics and Sensory Aids Service, Physical Medicine and Rehabilitation Service and the SCI Patient Care Unit should be maintained. These services should be located within close proximity to each other.
- G. Locate staff areas to be convenient to staff but separate from patient areas.
- H. Refer to Department of Veterans Affairs (VA) Office of Construction and Facilities Management Technical Information Library (www.cfm.va.gov/til/) for additional technical criteria.



7 FUNCTIONAL RELATIONSHIPS

Relationship of Prosthetic and Sensory Aids Service to services listed below:

TABLE 1: FUNCTIONAL RELATIONSHIP MATRIX

SERVICES	FUNCTIONAL RELATIONSHIP
CLNCL: PMR Svc: Prosthetics	1
OP: CBOP: Phys Med, Prosthetics & Orthotics	1
IP: SCI: AC/OP Therapy	2
OP: SCI OP	2
OP: SCI AC/OP Home Care & Therapy	2
CLNCL: PMR Svc: Physical Therapy (PT)	2
CLNCL: PMR Svc: Kinesiotherapy (KT)	2
CLNCL: PMR Svc: Occupational Therapy (OT)	2
CLNCL SPRT: OIT: Server	3
CLNCL: Surg Svc: Inpatient Surgery	3
CLNCL: Surg Svc: Ambulatory Surgery	3
BLDG SPRT: Logstcs Svc: Warehouse	3
CLNCL SPRT: OIT: Telecommunications	3
BLDG SPRT: ENG: Engineering Service (all specialties)	3
CLNCL: Clncl Svc Adm: Medical Service	3
CLNCL: Clncl Svc Adm: Hospital Medicine	3
CLNCL SPRT: R&D: Clinical Services	3
IP: SCI: AC PCU	3

Legend:

1. High
2. Moderate
3. Minimal



8 FUNCTIONAL DIAGRAM

