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1.0 GENERAL

1.1 Foreword

VA Program Offices, project teams, designers, and constructors, are obligated to our Nation's Veterans and taxpayers to make the most effective and efficient use of resources, by providing a continuum of safe, secure, high quality, high performance, and high-value environments of care and service for Veterans. The VA Office of Construction and Facilities Management (CFM) supports the Department’s mission through the development and application of standards as a basis for disciplined planning, design, and construction of VA facilities.

VA Standards are the culmination of a partnership among the Department of Veterans Affairs (VA), the Veterans Health Administration, Program Officials, Clinicians, Industry, Academic and Research Organizations, Expert Consultants, and the Office of Construction and Facilities Management. Design Guides are developed through the integration of VA-specific requirements, Federal law and regulation, benchmarking of industry best practice, evidence-based research and design, and value-based analysis of leading-edge innovation. The result is the establishment of best value standards for optimum functionality, safety, operability, performance, and quality throughout the VA environment of care and service.

Design Guides (PG-18-12) are a critical component of the VA Technical Standards and can be located on the Technical Information Library (TIL) (www.cfm.va.gov/TIL) which provides standards for all VA planning, design, and construction projects. Design Guides focus on selected healthcare departments and services and include an overview narrative of VA-specific planning and design principles and concepts, room templates, equipment lists, and basic technical/engineering requirements. They communicate the basis of design and are required to be utilized by project teams working on new construction and renovations of existing facilities. Design Guides will maximize the effectiveness and efficiency of the planning and design process and ensure a high level of design, while controlling construction, operating, and maintenance costs.

The material contained in Design Guides constitutes a Standard for VA Planning, Design, and Construction. For all VA projects, it is required that project teams comply with the following in all phases of project development:

1) All applicable VA Standards published in the VA Technical Information Library (TIL) shall be applied as a basis, foundation, and framework in planning, design, and construction. Any substantial variance from Standards shall be considered only as required to accommodate specific site, functional, and operational conditions. Upon consideration of variance, CFM shall be consulted, and each Administration will function as Authority Having Jurisdiction for decision. Each substantial variance shall have a basic rationale and be documented in the project record.

2) Clinicians, providers, primary users, and other stakeholders shall be involved in all phases of project development to best adapt Standards for specific functional, operational, and site conditions, and to provide optimum service environments for Veterans. This also includes installations and modifications of systems or technology...
involving safety, security, functionality, or environmental quality. Stakeholder involvement shall be documented in the project record.

Design Guides are not project-specific. It is impossible to foresee all rapidly evolving requirements of healthcare facilities and each site or project will have unique requirements or conditions. Site-specific issues must be addressed within the context of these standards and applied to each project. Use of this Guide does not preclude the need for, nor absolve planners, designers, and constructors of their responsibility to provide complete, functional, safe, and secure designs suited to the unique requirements of each project, within budget, and on schedule.

Materials, equipment, and systems are shown in an illustrative, performance-based format and are not intended to depict, suggest, or otherwise constitute an endorsement of any specific product or manufacturer. Manufacturers should be consulted for actual dimensions, configurations, and utility requirements.

All participants in the project development process must embrace VA Planning, Design and Construction Standards as fundamental in providing optimum environments for Veterans' care and services, in fulfilling VA's mission.

Donald L. Myers, AIA, NCARB
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1.3 Introduction

This document is the first Department of Veterans Affairs Emergency Department Design Guide, which is produced together with a revised PG-18-9 Chapter 256 Emergency Department Space Planning Criteria, and update to the PG-18-5 Equipment Guide List.

The practice of emergency medicine includes the initial evaluation, diagnosis, treatment, coordination of care among multiple providers, and disposition of any patient requiring expeditious medical, surgical, or mental health care.

The Emergency Department Design Guide is a tool to assist Contracting Officers, Medical Center Staff, and Architects and Planners with the planning and design of Emergency Departments. This publication provides an overview concerning the design and planning of emergency department facilities. The Standards represented herein are to be applied to departmental level planning and design and to specific room layouts.

An Emergency Department is an area within healthcare that is dedicated to the exigent diagnosis and treatment of unforeseen and unscheduled illnesses or injuries. The needs of a specific project are typically defined by contemporary and historical usage data. It is very strongly encouraged that the users of this document and planners of any VA facilities anticipate future equipment upgrades or replacements, expansions of clinical usage beyond the immediate conditions, and continued acceleration of examination times and the throughput implications that result. Planning and design decisions made exclusively based on historical data, without consideration of these continuous changes to the practice environment, may create long-term staffing, operational, and Veteran access burdens for VA facilities.

Room Templates for various Emergency Department rooms and associated spaces are included in this Design Guide to illustrate a best practice for room arrangement/layout, furniture, equipment, and patient and staff space needs. They are not project-specific as it is not possible to foresee all existing conditions to be encountered by local design teams. It is important to note that the room templates are intended as a generic graphic representation to illustrate room functionality and workflow.

In addition to the Standards included herein, equipment manufacturers should be consulted for specific minimum dimensions, utilities, power, structural requirements, and other requirements as they relate to specified equipment. The use of this design guide does not supersede the project architects’ and engineers’ responsibilities to develop a complete and accurate design that meets the user’s needs, appropriately integrates complex medical equipment, and complies with appropriate code requirements and governing accreditation standard.
1.4 Codes and Standards

The following codes and standards are those most frequently referenced. Refer to VA PG-18-3, Topic 1 for additional direction regarding codes and standards VA has adopted. Additional codes and standards, not listed below, may also apply. VA codes and standards take precedence over any other referenced standards. VA/VHA policies and standards information can be accessed at https://www.cfm.va.gov/til/index.asp.

1.4.1 VA Technical Standards

- H 18-8; Seismic Design Handbook
- PG-18-1; Master Construction Specifications
- PG-18-3; Design and Construction Procedures (refer to Topic 1 for the list of Codes, Standards, and Executive Orders)
- PG-18-4; Standard Details
- PG-18-5; Equipment Guide List – Chapter 256
- PG-18-9; Chapter 256-Emergency Department Space Planning Criteria
- PG-18-10; Various Design Manuals and technical criteria pertaining to Architectural, Sustainability, Signage, Fire Protection, Heating, Ventilation, and Air Conditioning (HVAC), Plumbing, Electrical, Lighting and Telecommunications
- PG-18-13; Barrier-Free Design Standard
- PG-18-13; Safe Patient Handling & Mobility Design Criteria
- PG-18-14; Room Finishes, Door, and Hardware Schedule

1.4.2 VA and VHA Directives, Handbooks and Manuals

- VA Directive 0055, VA Energy and Water Management Program
- VHA Directive 1061, Prevention of Health Care-Associated Legionella Disease and Scald Injury from Water Systems
- VHA Directive 1330.1, Health Care Services for Women Veterans and Mental Health Environment of Care Checklist (MHEOCC), and Design Alert 149
- VHA Directive 1611, Safe Patient Handling and Mobility Program
- VA Directive 7512, Seismic Safety of VA Buildings
- VA Directive 7531, Acquisition of Artwork, Decorative Furnishings, and Decorative Items

1.4.3 National Industry Standards

- American College of Emergency Physicians Policy Statement, Emergency Department Planning and Resource Guidelines
- American College of Emergency Physicians Geriatric Emergency Department Guidelines
1.5 Definitions

**Airborne Transmission:** infection spread through exposure to those virus-containing respiratory droplets comprised of smaller droplets and particles that can remain suspended in the air over long distances (usually greater than 6 feet) and time (typically hours).

**Automated Supply Dispensing Unit (ASDU):** Automated supply or medication dispensing and inventory control systems.

**Boarded Patient:** A patient who remains in the emergency department after the patient has been “admitted” for greater than four hours and is awaiting transfer to an inpatient bed. The term “Holding”, or “Staging” patients may be applicable to those who have been placed into “observation” status and have not been transferred to a separate observation unit.

**Class:** Designation of an imaging room based on the level of intervention / acuity it is intended to support, with Class 1 being low-acuity diagnostic, Class 2 being higher-acuity diagnostic or interventional, and Class 3 being intraoperative.

**Computed Tomography (CT):** A CT scan, or computed tomography scan is a medical imaging procedure that uses computer-processed combinations of many X-ray measurements taken from different angles to produce cross-sectional (tomographic) images (virtual "slices") of specific areas of a scanned object, allowing the user to see inside the object.

**Departmental Net-to-Gross (DNTG) Factor:** A parameter, determined by the VA for each space planning criteria chapter, used to convert the programmed Net Square Foot (NSF) area to the Department Gross Square Foot (DGSF) area.

**Digital Radiography:** A form of radiography that uses x-ray–sensitive plates to directly capture data during the patient examination, immediately transferring it to a computer system without the use of an intermediate cassette.

**Direct Line of Sight:** A direct, unobstructed, line of sight from a clinician to a patient, which is essential for suicide prevention.

**Emergency Department Integration Software (EDIS):** The patient “tracking” system that is used in the VA emergency departments across the country. This interfaces with the CPRS or CERNER electronic health record system.

**Fast-Track:** An area within the emergency department, used by medical centers to limit overcrowding and reduce patients’ waiting times. Patients with low acuity needing minimal resources are commonly referred here, which permits emergency departments to focus on the critically or acutely ill.

**First Look:** A term utilized to identify a clinical staff member who initially observes the patient entering the facility through the walk-in entrance, usually as part of the triage/assessment and sorting function upon patient arrival.

**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.
**Imaging Services:** The medical specialty that utilizes imaging examinations with or without ionizing radiation to affect diagnosis or guide treatment. Techniques used in the Emergency Department include radiography, and computed tomography (CT) imaging.

**Imaging Room:** Designated room containing diagnostic equipment performing patient procedures such as radiography, ultrasound, and computed tomography (CT).

**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.

**Picture Archiving and Communication System (PACS):** A system designed for the digital capture, transfer, storage, and evaluation of medical images.

**Program for Design (PFD):** A project specific itemized listing of the spaces, rooms, and areas required for the proper operation of a specific service / department, and the corresponding area for each.

**Resuscitation:** The restoration of consciousness to a person who appears deceased, or whose respirations had ceased.

**Sally Port:** A secure, controlled walk-in entry way into the mental health unit of an emergency department. Typically, an enclosed room where no more than one door can be opened at a time, used for searching walk-in mental health patients before they enter a secured mental health unit within the emergency department.

**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.

**Trauma:** A physical injury which may result in wounds, broken bones, or internal organ damage.

**Triage:** The process of determining the priority of patients’ treatments by the severity of their condition or likelihood of recovery with and without treatment.

**Ultrasound:** Diagnostic ultrasound, also called sonography or diagnostic medical sonography, is an imaging method that uses high-frequency sound waves to produce images of structures within your body.
1.6 Abbreviations

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<td>Ground Fault Circuit Interrupter</td>
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<td>Housekeeping Aides Closet</td>
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<td>Lockers, Lounges, Toilets &amp; Showers</td>
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<td>Radio Paging System</td>
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<td>Resilient Sheet Flooring</td>
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2.0 NARRATIVE

2.1 General

This Design Guide provides both general planning standards for Emergency Departments and detailed guidance to the various sizes and complexities of EDs that exist currently within VA. The design standards in this document have been developed to balance the minimum effective standards and industry best practices. Research and input from a team with vast experience in the design of VA and private sector Emergency Departments has led to culmination in this Design Guide of best practices in ED planning and design for future VA Emergency Departments.

2.1.1 About Emergency Services

Emergency care is the resuscitative or stabilizing treatment needed for any acute medical or mental health illness or condition that poses a threat of serious jeopardy to life, serious impairment of bodily functions, or serious dysfunction of any bodily organ or part. A VA Emergency Department (ED) is a physical unit within a VAMC that provides the rooms and spaces from which resuscitative therapy and stabilizing care is given. It is staffed and equipped to provide initial evaluation, treatment, and disposition for a broad spectrum of illnesses, injuries, and mental health disorders, regardless of the level of severity. Care is provided in a clearly defined area dedicated to the ED and operates 24 hours a day, 7 days a week (24/7).

VA operates Medical Centers across the U.S. of which 140 include Emergency Departments across 18 Veterans Integrated Service Networks (VISN’s). According to 2019 data from VA, the sizes of these EDs vary from 5,583 up to 45,754 patient encounters.

According to one study titled “Predicting Patient Patterns in Veterans Administration Emergency Departments”¹, Department of Veterans Affairs (VA) Medical Centers represent a unique patient population within the healthcare system; for example, they typically do not see major trauma cases and accept ambulance runs much less frequently than a private sector hospital. As such, Veteran-specific studies are required to understand the needs and challenges of VA emergency department (ED) care. Their analysis reveals that VA population exhibits a similar set of common chief complaints to the national ED population (and in similar proportions) and yet differs from the general population in many ways. For example, VA treats an older, predominantly male population, and encounters a much lower incidence of trauma. Perhaps most significantly, the incidence of mental health illness at the VA is more than double that of the general population (10% vs. 4%) and accounts for a significant proportion of admissions (23%). Furthermore, the overall admission percentage at the VA medical center is nearly three times that of the ED population at large (36% versus 13%).

Footnotes:

1. Predicting Patient Patterns in Veterans Administration Emergency Departments; by: Chad S. Kessler, MD, Stephen Bhandarkar, MSIV, Paul Casey, MD, and Andrea Tenner, MD in: West J Emerg Med. 2011 May.
2.1.2 New (first time) Design Guide

Space planning criteria existed for Emergency Departments and Urgent Care Clinics, in VHA PG-18-9, Chapter 256, which was originally developed in 2011-2012; has not had a technical update since then and was last revised in October 2016. This is the first effort to create a new PG-18-12 Design Guide specifically for Emergency Departments. A separate Design Guide will be created for Urgent Care Clinics thus no information about Urgent Care Clinics is contained in this Design Guide.

2.1.3 Front Door to Your Medical Center

For a large portion of patient population, the regular path for receiving medical help starts at the emergency department. For a variety of reasons, many people today simply go to the ED for a wide range of issues that require attention. Across the U.S., 68% of all hospital admissions come through the ED. While not necessarily the most efficient and certainly not the most cost-effective approach, a trip to the emergency department of a nearby hospital can be the only realistic method of getting attention for otherwise minor issues. For this population, the ED serves as the “front door” to the world of healthcare.

From a design standpoint, this makes the entry to the ED a very important experience to Veterans. Patients arriving at the ED walk-in entrance need clear wayfinding. The facility design should provide patients a sense of empathy and assurance that they are important and will be cared for. The ED entrance, waiting areas, and public spaces must promote a healing environment with a less institutional feel by incorporating design principles that create hospitality and home-like environments. See Section 2.6.3.1 Interior Design. for further discussion about this.

The pandemic has taught us the need to be ready to isolate certain patient populations immediately upon arrival to the Medical Center. Pandemic operational flow considerations include establishing screening stations at entrances, defining potential segregated waiting room sections for potentially infected patients and other chief complaints. Separate pathways may be defined for the potentially infected patient. These separate flow patterns will need to be considered for every walk-in entrance.

2.2 Emergency Department Operations

The planning of the emergency department requires more than placing pieces of major functional areas or treatment rooms into a floor plan. Issues related to the strategic approaches to the delivery of emergency services, and the clinical care that it will support, create the expectation that the facility planner will develop the department layout in collaboration with clinical and operational input from the site.

Patients come to the ED to receive medical treatment. That sounds simple, but it can get lost in the multiple processes and pathways that are implemented by the staff, physicians, nurses, support

Footnotes:

2. 2012 survey results of the Emergency Department Benchmarking Alliance (EDBA).
departments, and everyone who meets, or supports, patients and families throughout a patient’s ED visit. In support of developing streamlined processes that can reduce the “time to see a provider” and the overall length of stay for an ED visit. The following process summaries have been developed to support the Emergency Department Design Guide.

2.2.1 Education

Most VAMCs are affiliated with major medical, nursing, and allied health universities, colleges, and schools. Additional space, for additional team members is required in VA emergency departments to accommodate the education of medical residents, nurses, and health students trained in VAMCs. Additionally, staff support areas need to be expanded to accommodate faculty and students. This additional space must be taken into consideration when determining the size and number of ED support spaces for a VAMC.

2.2.2 Public/Patient vs. Staff/Provider Organization

A major focus on the Design Guide is to developing planning and design standards that support the public, patient, staff, and providers. Public areas are developed for safe and secure environment for Veterans, staff, families, and visitors that arrive at the ED with patients. Patients are to be expedited to triage or a care area and moved ahead in the process as defined below in 2.2.3 Patient Access and Assessment Processes. It is the intent that limited patients be placed back in the public area and, instead, move forward to care areas or internal waiting areas as part of expediting their access to the provider/physician.

Staff and Provider areas have been developed in support of their workflow, patient interaction, and workspace with appropriate levels of privacy and confidentiality based on the type of work/flow to be supported. The intent of the planning and design approach in the Functional Diagrams, contained in this Design Guide is to place staff/providers in a position to visually monitor and control the clinical areas in the best interest of clinical safety and overall security.

2.2.3 Merged/Separated Functional Areas

Every project involving the design of a future emergency department requires a balance between creating separate functional areas for unique patient types and developing a universal approach that allows any patient to be treated in any care space. The Design Guide defines General Care along with unique patient care spaces for Fast-Track, Orthopedic, EYE/ENT, GYN exams, Mental Health, Resuscitation, among others. But the intent is that all rooms are sized to be flexible and support the exam/care of any patient type. Yes, some equipment (such as for EYE/ENT) may be in the room to support the specialty care, but the ability to convert any room in the future to general care is a major consideration for the flexibility in the design guidelines.

For example, merging functions might include placing triage and lower acuity (fast-track) spaces adjacent to each other for rapid care of less acute patients. While resuscitation rooms are unique, we recommend larger bariatric exam rooms be near the larger resuscitation rooms for potential overflow space of high-acuity or resuscitation patients. If the quantity of mental health care spaces is large enough to create a unique mental health care zone, it is important for the
mental health care zone to remain adjacent, and flexible, with the main ED clinical care areas. This separate-but-adjacent care area would allow staff to flex in and out of the mental health area in support of patient care. These are just a few examples of separate-but-merged design concepts.

This Design Guide has anticipated some surge capacity in various techniques. The Resuscitation Room is designed with an extra headwall, medical gases, and electrical outlets to be able to treat 2 patients at once when required. Staging bays are provided for short-term holding, which can instantly be converted into E/T bays. Even space in E/T rooms has been made large enough that 2 people could be in a single E/T Room with some mobile equipment being removed.

2.2.4 Patient Access and Assessment Processes

Any ED design intends to allow clear and direct access for the clinical team member to a patient. The First Look nurse will engage the patient and make a rapid decision as to whether life-saving interventions need to be immediately implemented. If yes, the patient is expedited/escorted to the appropriate resuscitation or care space as applicable. If life-saving interventions are not required, the assessment of the patient is completed at triage allowing the staff to confirm the Emergency Severity Index (ESI) score of the patient and determine the appropriate location in the ED for subsequent diagnostics and treatment.

During pandemic operations the First Look nurse may determine the need to send a patient down a different pathway with regards to potentially infected patients. This pathway may be defined triage rooms for potentially infected or direct bedding to a portion of the ED that has been defined for potentially infected.

2.2.5 Ambulance/Emergency Medical Services (EMS) Arrival and Offloading Processes

The EMS arrival process may be, but not always, preceded by electronic call/communication from the inbound ambulance crew to the destination ED. Upon ambulance arrival, the EMS crew brings the patient into the ED and receives instructions on the patient offloading location. In larger EDs, this communication may be via an electronic message board (patient tracking screen) at the EMS entry point. Clinical staff will receive EMS crew reports, assess the patient, and take responsibility for the arriving patient. Patients may be offloaded to any exam room, resuscitation room, inbound staging area or, in the event of a minor acuity, an internal waiting room (results pending area) or, as a last resort, if at 100% capacity, placed out in the waiting room after initial clinical assessment.

Like the walk-in First Look process during pandemic operations, the clinical staff may determine the need to send an ambulance patient down a different pathway with regards to potentially infected patients. This pathway may be defined as sending stretcher patients to a portion of the ED that has been defined for potentially infected patients. Space is made available for EMS workstations near the EMS arrival/vestibule and adjacent to the inbound staging bays. The overall intent is to allow for rapid turn-around for the ambulance crews.
2.2.5.1 Decontamination Processes

The decontamination process may be utilized for EMS arrival patients or walk-in patients. For this reason, the decontamination shower should be accessible from the walk-in entrance, triage area, and EMS entry vestibule. Some patients are being decontaminated “at the scene” prior to EMS transport to an ED, therefore it is important to remember the relationship with the walk-in vestibule. Decontamination is usually a four-step process that includes 1) sequestering a patient; 2) disrobing the patient; 3) decontaminating the patient, and 4) redressing the patient (in clothes or a gown) for movement and placement into the appropriate treatment space.

The decontamination shower design template has two rooms: the decontamination shower (for disrobing and decontamination) and the adjacent “changing room” for the redressing process. Windows from the changing room into the decontamination shower, along with electronic microphones and speakers between the shower and changing room, will allow staff to communicate with each other throughout the decontamination process. In the event of multi-patient decontamination events, temporary screens may be set up on the exterior of the building adjacent to the decontamination shower allowing patients to undress outside the shower before entering. A process after decontamination may include the removal of contaminated water by appropriate professionals from the holding tank below the shower.

2.2.6 Fast-Track Processes

Fast-Track operational flow is a clinical workflow process to accommodate lower acuity ED patients. The term “fast-track” may refer to the lower acuity workflow tract as well as the actual care area within the ED designed to rapidly assess, diagnose, treat and (usually) discharge a lower acuity patient. The intent of the fast-track process is to rapidly treat, and discharge, lower acuity patients without taking up general and specialty E/T room space for the higher acuity patients in the main ED clinical area.

Patients are usually defined as lower acuity patients in the emergency severity index (ESI) categories of ESI 4 (less urgent) or ESI 5 (non-urgent) where minimal (or no) testing/diagnostic services will be needed as part of their assessment. Patient samples would include ESI 4 where only one type of resource (such as only an X-Ray (sprained ankle, broken finger) or only sutures (minor laceration) are needed as part of diagnostics or treatment. An ESI 5 patient would have no resources defined for diagnostics or treatment, or only minor medications (aspirin/ibuprofen), for such conditions as sore throats or minor rashes. In some instances, ESI 3 (urgent) patients may be accommodated in fast-track if believed to be of a lesser acuity within the ESI 3 designation.

To maintain overall ED flexibility within the clinical care areas, the fast-track E/T rooms will be the same size as the standard ED exam/treatment rooms but have defined equipment to support lower acuity patients, such as a treatment recliner in place of a treatment stretcher/bed. Based on lower acuity ED volume, the fast-track area may only be operational during the busiest times of the day, such as 9:00 am to 9:00 pm, and may not operate over a full
24 hours. The most flexible ED clinical area designs allow the fast-track E/T rooms to be designed immediately adjacent to the main ED E/T rooms allowing the main ED to surge into the fast-track area when the fast-track area may not be operational.

Since the patients are of a lower acuity, they may be able to await testing results in an immediately adjacent location other than their E/T room, such as a “results-pending” area. This allows the E/T room to immediately accommodate another patient while the previous patient awaits testing results in the results-pending area. The results-pending area shall be configured to allow visual supervision of the awaiting patients from the fast-track staff work area. The results-pending area shall have a mix of chairs and/or recliners for patients, and potentially accompany family member(s). Additional considerations in support of the fast-track results-pending area would be access to a patient toilet and access to a consultation room for private discharge instructions after test results are received.

2.2.7 Mental Health Processes

The mental health (MH) processes are developed for maximum safety for patients and staff. The intent is to rapidly place the patient in the most supportive and appropriate location for an initial interview, assessment, and/or treatment. Based on the size of ED and location (if applicable) of the mental health room(s), the initial assessment may be completed at triage, if deemed safe and appropriate by medical personnel. Another location for initial assessment or de-escalation of the patient may include the Mental Health Intervention Room. This is where seriously agitated, or intoxicated patients may be taken immediately on arrival for rapid evaluation. If available, a MH exam/treatment room may be the best location for initial assessment, evaluation, and treatment.

2.2.8 Patient Diagnostics/Imaging Processes

Imaging studies may be ordered as part of the diagnostic plan as defined by the clinical care team. The patient may receive imaging studies in the exam/treatment or resuscitation rooms through the use of portable X-ray or ultrasound equipment brought to the bedside or may be transported to the imaging area for standard imaging studies such as CT scan, general radiology, or ultrasound. Patients will be returned to the exam space or, in the event of the lowest acuity patients, may be placed in a results pending area to await test results.

2.2.9 Tele-Health

Tele-Health involves 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. Within the emergency department, tele-health is primarily utilized by an ED provider to consult with another specialist provider remotely. It is expected that tele-health services will expand to include more provider-to-patient communications in the future as these types of services become more readily available. A dedicated Tele-Health Room shall be
Equipped with video/camera capability and all equipment listed in the PG-18-5 list for this room type.

2.2.10 Patient Care Support

Patient care support includes a wide variety of rooms and spaces to be placed in accessible locations that support patient assessment, treatment, and care. These spaces are split into two different groupings:

1) Support spaces with “hard walls” that block visibility should be placed on the perimeter to avoid impacting visual control across the ED clinical area. These support spaces would include such rooms as toilets, Medical Supplies Storage Rooms, Satellite Sterile Supply Rooms, Soiled Utility Rooms, Clean Equipment Storage Rooms, Trash/Recycling Holding, Wheelchair/Stretcher/Lift Storage Rooms, and Housekeeping Aides Closet (HAC).

2) Support spaces with low walls (like cart alcoves), open workstations, or glassed-in rooms that maintain full visibility across the ED may be located in the “center” of the ED for immediate access by staff. These spaces may include Clinical Staff Work Areas; Consultant Provider Workstations; Provider Workstations, Provider Workroom, Equipment and Cart Alcoves, Wheelchair/Stretcher/Lift Parking alcoves, Medication Rooms, and Medication Stations.

2.2.11 Forensics Procedures

Various types of forensics procedures must be conducted in the ED. These can be done in any of the E/T rooms. Also, a separate Secure Evidence Room is included in the ED space criteria to store chain of custody type evidence until it can be properly given to police.

One such forensic procedure involves a Sexual Assault Nurse Examiner (SANE) who is a Registered Nurse who has received special training so that s/he can provide comprehensive care to male or female sexual assault victims. In addition, s/he is able to conduct a forensic exam and may provide expert testimony if a case goes to trial. In case a SANE examination is required, they can be performed in the GYN Patient E/T room. This room has its own toilet/shower.

2.3 Patient Acuities and Interventions

VA classifies their EDs by complexity levels. These levels range from 1a, b and c High Complexity, to 2 Medium Complexity, to 3 Low Complexity.

2.3.1 Use of Acuity/Intervention Classes

The VA triaging system is similar to the Emergency Severity Index (ESI). VA Utilizes a five-level, emergency department triage program relied upon by nurses to assess patient acuity based on their presentation in the ED and the expected level of care the patient will require.

ESI 1 – requires immediate lifesaving interventions.
ESI 2 – is a high-risk situation, where without imminent intervention, the patient’s condition may deteriorate requiring resuscitative measures.
ESI 3 – is an urgent patient care need on presentation that requires more than two resources within the department.
ESI 4 – is a semi-urgent patient presenting with a predicted need of less than two resources prior to disposition.
ESI 5 – is a non-urgent patient presenting with predicted need of zero resources prior to disposition.

2.3.2 Criticality and Support Infrastructure
The ED is an area of the medical center that requires criticality related to its support infrastructure to ensure continuous operation 24/7. This means that medical equipment, lighting, power, and mechanical systems that heat, cool, exhaust, and ventilate required to be on emergency power.

2.4 Changing Facility Needs for Emergency Services
Operational flow and physical ED design have changed over the years with the emphasis on expediting the patient to the “right place, for the right care, by the right person.” Following, are some of the key items that will impact successful future ED operations.

2.4.1 Future Trends
Trends include the following in support of clinically safe, and expedited care, of the patients.

2.4.1.1 First Look Nurse
The outdated ED that has an administrative, clerical, or registration as the first (and only) set of eyes on the arriving patient is a thing of the past. EDs are developing a position at its front that includes a clinical person, known as the First Look Nurse, who can make immediate visual contact with arriving patients. In many civilian EDs, this role may be filled by an RN or paramedic based on a staffing plan. The First Look Nurse can make the immediate decision whether life-saving interventions need to be started by expediting the patient to the appropriate resuscitation or treatment location. Or the First Look Nurse can make the decision whether to immediately place the patient in triage, for further assessment or “direct to bed” based on the EDs operational plan.

2.4.1.2 Patients Forward in the Process
Having a patient return to the ED public area after triage/assessment should be the last consideration and only done when the ED is at 100% capacity and the patient is safe to return to a chair in the waiting room. Future EDs are being developed with internal waiting rooms in the clinical area that allow patients to move forward in the process even if a bed is not available. Many times, advanced protocols are completed by clinical staff, sometimes right at triage. Then patients are placed in the internal waiting room, thus expediting the initiation of the care (based on pre-approved written protocols). These inner waiting rooms
also support patients awaiting test results and are usually labeled Results Pending area. These spaces need visual control from the clinical staff’s work area(s).

2.4.1.3 Universal Room Design

As stated previously, the Design Guide defines unique patient care spaces for General Exam/Treatment, Fast-Track, Orthopedic, EYE/ENT, GYN exams, Mental Health, Resuscitation, among others. But the intent is that all rooms are sized to be flexible and support the exam/care of any patient type. Maximum flexibility allows EDs to avoid queuing of patients awaiting a single/specialty space when not necessary. To support the universal room concept, specialty carts, such as suture carts or GYN carts, should be distributed in alcoves throughout the ED to allow a universal room to support specialty procedures.

2.4.1.4 Security and Visual Control

Security is continuing to be an increasing concern in all EDs, VA and civilian, across the U.S. and around the world. Consideration for metal detectors is much more common now than 20 years ago and an emphasis on ED-based security presence is a key strategic operational and design decision. Coordinate with VA Physical Security and Resiliency Design Manual, section 5.5 Emergency Department. Visual control across the clinical areas is important with no dead-end corridors where staff can be trapped. Triage rooms should be designed with front and back doors (as both an escape route and in support of patient flow) which is another concept in support of a safe environment.

2.4.1.5 Inclusion of Women’s Services

VA includes special attention to the rising number of female patients. While all rooms are universal, there will also be GYN equipped exam/treatment rooms with attached toilet/shower rooms that will support specialty care.

2.4.1.6 Rising Mental Health Volumes

See the next paragraph on Strategic Planning for future considerations with regards to the growing number of mental health patients.

2.4.2 Strategic Planning

The Veteran population is projected to decrease between 2014 and 2043 from 22.5 million to 14.5 million Veterans3. The decline will be primarily attributed to a reduction in number of WWII and Korean Conflict Veterans between 2014 and 2030; and Vietnam Era Veterans between 2023 and 2043.

Footnotes:

During the same period, the female Veteran population will grow from 9% to 17%. The above trends are already impacting VA emergency departments. The beginning of this trend is already being observed in different Veterans Integrated Service Networks (VISNs) across the country. Some of the key strategic issues that will impact future VA emergency departments includes:

2.4.2.1 Mental Health

As with nearly every civilian emergency department across the county, VA will continue to be impacted with rising mental health volumes in their EDs. Mental Health intervention and exam/treatment rooms are part of the recommended room list for consideration, but a review of historical mental health volumes is required for any site developing the design for an ED Service project. In addition, site-specific escalators to define the number of exam/treatment rooms needed to support future MH volumes. Also, a separate MH module is recommended when the number of MH E/T rooms reaches four and should remain adjacent and visually connected to the main ED.

2.4.2.2 Aging Population

While the aging of Veterans will continue to be cyclical over the coming decades, the number of patients experiencing memory loss or dementia will impact the design and planning of ED spaces. Visibility of patients and visual control of all corridors and rooms with the treatment areas needs to be a priority to assist in the monitoring and caring for the elderly patient.

2.4.2.3 Use of Observation Medicine

Extended stay patients will continue to impact overall ED capacities and throughput times. Each ED location should evaluate the strategic use of “observation” status and what that means for the treatment, and treatment location, for applicable patients. An observation patient is one with a medical, surgical, or mental health condition that needs to be observed/monitored, provided with short-term treatment, and re-assessed while a decision is being made as to whether the patient requires further treatment in an acute care inpatient setting or can be discharged or assigned to care in another setting. When planning an ED project seek a definitive location for the staging/monitoring of observation patients. If the ED is to be defined location for such ED patients converted to observation status. The review of the potential quantity of observation patients remaining in the ED will impact future ED treatment space needs.

2.4.2.4 Boarders

Related to the “observation” status of patients, there is also the “overflow patient” referred to as “boarders.” An overflow patient is a patient who requires inpatient care due to a medical, surgical, or mental health condition but whom the facility is unable to accept on the designated unit due to a lack of available beds. An overflow patient held in the ED for an inpatient bed for 4 or more hours after the decision to admit is made are called
“boarders” by the current Centers for Medicare and Medicaid Services (CMS) definition. The historical use of space for “boarders” in the ED should be evaluated as the ED is sized for the future quantity of patient care spaces.

The boarding (holding) of patients awaiting inpatient beds, or to be transferred to another site, is a recurring issue across many VA EDs. The data shows that many EDs hold patients for more than 4 hours more than 40% of the time in their current environments. The next step in the room quantity formula is the consideration for added capacity at ED sites that have extensive boarding issues. Based on available data, the “baseline” room quantity is multiplied by the following variables for EDs that board patients for more than four hours:

- Over 40% of the time: Baseline formula: add 20% capacity
- 30%-40% of the time: Baseline formula: add 15% capacity
- 20%-30% of the time: Baseline formula: add 10% capacity
- 10%-20% of the time: Maintain current capacity calculation
- Less than 10% of the time: Baseline formula: reduce capacity by 10%

### 2.4.2.5 Level of Security

The Design Guide defines specific/potential rooms and spaces for support of ED-located security staff. Security desks, workrooms, search rooms, and metal detectors are all potential considerations. However, each site needs to define the amount of applicable space, rooms, or podiums that may be needed in support of their specific security presence.

### 2.4.3 Technology Applications

Technology applications are anticipated to grow in VA EDs. The use of tele-health processes has been growing and is expected to become more commonplace in most VA EDs. Portable imaging and point of care testing are expected to continue the trend of “bringing services to the patient” to expedite care. Direct communications among staff with the use of cellphones or other “on-person” communication devices is anticipated to be utilized for more rapid completion of the necessary communications that need to occur amongst care team members. Portable tablet or device-based charting will be integrated as the devices become easier to use and more reliable in the emergency medicine environment. Also, more wireless equipment will be integrated into future EDs so the infrastructure to accommodate multiple systems needs to be considered. All these types of technology applications should be reviewed and investigated as a new or renovated ED project is started.

### 2.4.4 Operating Costs

Design and construction project success is often measured against the construction cost and how closely construction bids matched the estimate. Considering the understandable pressure to control construction project costs, designers and planners should continuously bear in mind
that the operational costs of a medical center over ten to twenty years will dwarf construction costs. Planning decisions that may help reduce construction costs (e.g., not revising a layout with a poor line-of-sight) can wind up costing the VA many times more in staffing, and inefficiency (e.g., additional FTEs or underutilized patient areas).

2.4.5 Healing Environments

Several factors contribute to the environment of care which can have a direct impact on patient outcomes, including the physical attributes of the built environment, as well as the way patients interact with them. Qualities of lighting (both natural and artificial), air temperature and movement, ambient sound, colors, textures, furnishings, and artwork can all work together to create restful, restorative, nurturing environments.

Special design consideration should be given to the overall visual environment, including natural and artificial lighting throughout the Emergency Department. Veterans are likely to interact with their environment and experience the world from an alternate perspective than a patient in a private health care setting. These Veterans are significantly impacted by mental health issues which impact their perceptions of their environment and care.

Designers, planners, and engineers must work with stakeholders and clinicians to understand the specific needs of Veterans, as well as the current facility systems and technology options available to provide stimulus, privacy, comfort, and engaging interactions with the built environment. Project teams must apply this understanding as they implement recommendations in VA Healing Environment Design Guidelines, and VA Interior Design Manual, and Innovative 21st Century Building Environments for VA Healthcare Delivery (all found at https://www.cfm.va.gov/til/spclRqmts.asp#Heal), to deliver an appropriate design solution and construction documents for Emergency Departments.

2.5 Planning Emergency Department Facilities

When planning Emergency Department facilities, the designer must consider a variety of inputs related to the relationship of its placement within the building, relationship to patient care needs, and the resulting relationship with other departments/services, in addition to the internal relationships within the ED.

2.5.1 Emergency Department Space Allocation

Emergency Department space requirements are outlined in the VA PG-18-9 Space Planning Criteria: Chapter 256 Emergency Department. This information can be found on the VA TiL at https://www.cfm.va.gov/til/space.asp.

2.5.2 External Departmental Adjacencies

The emergency department is the ‘Front Door’ to the VA medical center for many patients arriving. So, accessibility on the site is critical to achieving easy direct access by ambulance and private vehicle from external roads. Coordinate with VA Physical Security and Resiliency Design Manual, section 5.5 Emergency Department. Walk-in patients also need close, dedicated,
parking areas, and unloading areas for quick access to the ED. Some walk-in patients will come to the medical center main entrance lobby looking for the ED, so having a direct and convenient access connecting the main lobby with the ED Waiting room is very helpful.

In the past, the ED always needed to be directly adjacent to imaging services to utilize its diagnostic tools. Now, most EDs are being designed with internal imaging services. It is still important to have an understanding between the ED and imaging about the use, or back-up use, of potentially shared diagnostic rooms.

Secondary external adjacencies should be to the laboratory, pharmacy, inpatient mental health, and surgery. Although laboratory and pharmacy adjacency can be offset using an adequate pneumatic tube system. The last secondary adjacency would be to the morgue.

See section 3.3.1 of this Design Guide for more information on inter-departmental medical center adjacencies.

2.5.3 Design Considerations

The design of an ED serving Veterans is a noble effort to coalesce many different dynamics involved in emergency care. It requires a sensitivity to the broad spectrum of patients’ needs who present for medical care in a time of crisis. The people responsible for these future designs must collaborate with the providers, nurses, and staff that care for these Veterans to get a thorough understanding of their needs. While most of this Design Guide is about the analytics and knowledge of EDs, ultimately this effort must be about giving what’s best for these women and men who served our country.

2.5.4 Internal Adjacencies

The rooms/spaces of the ED are organized in eleven (11) different functional areas. These areas begin to define the natural organization of the department. Then depending on the size of the ED, will change the layout and modularity of the department. The Security/Police, Reception/Public Area, and Patient Assessment Area all work together as the public-facing part of the ED.

The Patient Assessment Area is the portal to the rest of the ED and connects the patient to the clinical and staff areas. The Functional Diagrams (Section 3) illustrate a modular approach with the basic planning module being twelve (12) Exam/Treatment rooms. There will always be EDs designed with a number of E/T rooms in between these natural module sizes, but it should not be less than a denominator of four E/T rooms to maintain a proper staffing ratio of 1 nurse to 4 patients.

Two key functional areas, imaging, and ambulance/EMS area, both have an important role in how they relate to the care modules as they either introduce patients in or move patients out of the care modules.

See section 3.3.2 of this Design Guide for more information on Intra-Departmental Adjacencies.
2.5.5 New, Addition or Renovation Project

The next emergency department project might be a new building or an addition both of which allow for the full implementation of these new design standards. However, many times a project at a VAMC may be a small addition with some associated renovation or entirely a renovation effort of an existing ED. A large percentage of VA medical centers are older facilities with numerous physical and infrastructure challenges, such as narrow structural column bay spacing, interior bearing partitions, low floor to floor plate height clearances, etc. These conditions create challenges to meeting modern standards of care environments and can create significant obstacles to comply with VA Design Standards.

Design solutions for renovation projects must necessarily be adapted to the specific conditions, limitations, and opportunities of an individual facility. Planner and designers are to utilize this document to create spaces as close as possible to that of the emergency department described in this Design Guide, as well as the space allocations in the PG-18-9 Space Planning Criteria Chapter 256, and equipment indicated in PG-18-5 Equipment Guide List. When a design standard is not able to be achieved there is a formal deviation request process that must be initiated and completed.

2.5.6 Pandemic Considerations

The pandemic has taught us the need to be ready to isolate certain patient populations immediately upon arrival to the ED. Pandemic operational flow considerations includes defining potential segregated waiting room sections for potentially infected patients and other chief complaints. Separate pathways may be defined for the potentially infected including defined triage rooms and defined care areas within the main ED. These separate flow patterns will need to be considered for both walk-in entrances and ambulance arrivals.

The number of patients, admitted to VA inpatient facilities decreased from 77,624 in weeks 5 to 10 of 2020 to 45,155 in weeks 11 to 16, a reduction of 41.9%. Among patients admitted during weeks 11 to 16 of 2020, 2458 tested positive for SARS-CoV-2 vs 26 during weeks 5 to 10.

The percentage decrease in admissions for conditions generally requiring emergency treatment was greater or similar in magnitude to the decrease in admissions overall and is unlikely to be attributable to declines in elective surgeries or disease incidence related to reduced stress or lower exposure to other pathogens or pollution. Rather, many patients may be avoiding hospitals to minimize the risk of SARS-CoV-2 infection.

The COVID pandemic has caused everyone to evaluate how things work. Future infectious diseases are predicted to become more common across the globe.

Footnotes:

4. “Profile Admissions to Veterans Affairs Hospitals for Emergency Conditions During the COVID-19 Pandemic” by: Aaron Baum, PhD and Mark D. Schwartz, MD in: Journal of the American Medical Association (JAMA), June 5, 2020.
Strategies have been implemented to prevent transmission of infectious diseases by restricting visitors inside the medical center, screening all who enter the medical facility for signs/symptoms of the infectious disease, wearing masks, and physical distancing. While on one hand there may be a concern about waiting room sizes with 6-foot spacing, the previous paragraph points out the substantial reduction in the number of patients seen during such an event. This design guide recommends various strategies to plan for such future events like:

1) Main circulation corridor to get patients from public spaces to a care module without passing through other care areas.

2) Increasing the number of Airborne Infection Isolation (AII) Exam/Treatment (E/T) rooms.

3) Providing more PPE alcoves next to treatment rooms and increasing PPE storage.

4) Designing all E/T rooms to be negative pressure.

5) Add a Vestibule at each access point to the ED, from the main Medical Center. The Vestibule airflow should be neutral with respect to both doors, allowing air to flow through the Vestibule from the Medical Center to the emergency department.

2.5.7 Emergency Department Unique Rooms/Spaces

The following room types are unique to the ED and are further defined below. Additionally, most of these rooms have more detailed development in Section 4.0 Room Templates of this Design Guide. The Room Templates included in this Design Guide are intended as general representations of typical furniture and equipment layouts, space configurations, and functional and utility support needs.

The clinical Exam/Treatment (E/T) room types are oriented with a headwall on the rear wall, except for the GYN E/T Room, as you enter so that the nurse or provider may easily access either side of the patient as they enter the room. This Design Guide advocates for maintaining all same-handed rooms, except for the Mental Health Exam/Treatment Room. This Design Guide is predicated on utilizing all movable equipment rather than built-in casework.

All E/T rooms shall be designed and equipped to accommodate all Veteran patient types including female Veterans and geriatric Veterans. Room design standards, addressed by Directive 1330.01 and Design Alert 149, may sometimes need to be superseded in those areas where the focus of patient care delivery is on emergent or critical patients, i.e. Emergency Department. In these situations, staff will continue to protect patient privacy and dignity to the best of their ability.

2.5.7.1 Security Station/Room

This station or room is intended as a satellite location to the police primary operations center. The decision to go with a partially open Security Station or a glass-enclosed Security Room is up to the discretion of an individual VAMC to determine based on their requirements. Coordinate with VA Physical Security and Resiliency Design Manual, section 5.5.4 Emergency Department, Security.
When an open Security Station is used then the designer needs to implement other design features to provide controls to safeguard operating elements within the Security Station. This space should always have two ways to enter/exit, with one preferably directly to the exterior. Ideally, the Security Station/Room would have direct visible control of both the walk-in and EMS entrances. But if both cannot be achieved, then priority is to have control of the walk-in entrance.

A small gun locker should be provided in case a weapon is seized from someone entering the ED. This would only be for short-term holding (24 hours or less), as the weapon would be moved by an evidence technician to an Evidence Storage Room elsewhere.

2.5.7.2 Reception/First Look Nurse

These are the first employees (clinical staff if possible) who encounter a patient as they enter the public area of the ED. The medical administrative assistant (MAA) may be taking a person’s name and information for registration but is not evaluating that patient’s medical condition.

The First Look nurse will be stationed at an open desk that observes the walk-in entrance and the waiting room. During pandemic operations there may be a movable, transparent plexiglass separation panel to keep the patient slightly separated from the First Look nurse. This nurse will complete a rapid visual assessment of every arriving patient and make the key decision if the patient needs to be rushed into the ED for life-saving interventions or needs to be sent down a different pathway for potentially infected pandemic patients. If not in need of life-saving interventions, or pandemic precautions, the First Look nurse will direct the patient to the appropriate location for further assessment (triage) or treatment (direct bedding) based on the preferred flow of the ED.

2.5.7.3 Triage Room

A Triage Room is where a nurse will assess patients' severity of injury or illness within a short time after their arrival, assign priorities, and transfer each patient to the appropriate place in the ED for treatment. The Triage Room should be designed with direct access and visual observation of the ED Waiting Room. If possible, the Security Station should have visibility through the glass-front triage room to observe first interaction between nurse and patient. If more privacy is needed, the use of blinds, privacy curtains, or switchable glass may be integrated into the front glass on the triage room. Switchable glass is a type of glass that utilizes a simple electrical switch, controlling the opacity of the glass from clear to translucent.

PPE should be immediately accessible in the event that pandemic precautions are being applied to the triage process. This process may include defining certain triage rooms for potentially infected pandemic patients. The room is also designed to have flow-through patient movement, so they enter directly from the Waiting Room and exit directly into the clinical area of the ED. Generally, the patient will be seated in a reclining type of exam.
chair. A stretcher is to be stored in an alcove nearby, within the clinical assessment area if it is needed in the Triage Room.

2.5.7.4 Bariatric Patient Triage Room

A Bariatric Triage Room has the same purpose, and design, as the Triage Room, except it is larger in size to accommodate bariatric patients, patients on motorized wheelchairs, or a larger family group, as needed. It is to be equipped with a bariatric reclining exam chair. The room is required to have a 6’-0” diameter clear turning space within the room. This room is to be designed to accommodate patients arriving on motorized scooters that can move right through this room on their scooter and back to an exam/treatment room. This room may be used as a general triage room also when not being used by a bariatric patient.

2.5.7.5 General Exam/Treatment Room

The Exam/Treatment Room is used for patient consultation, examination, and various noninvasive treatments and procedures. There is an expectation of physical contact, between the caregiver and patient. This room is the basic building block of the clinical treatment rooms within the ED.

A general description of the patient care delivered in an exam/treatment room is treatments that may require high-level disinfected or sterile instruments but do not require the environmental controls of a procedure room. Some examples include blood draws, injections/shots, minor cuts, and sprains (including wound packing), stitches and casting, minor dermatological procedures (including removal of skin tags), PICC (percutaneously inserted central catheter) line placement and removal, and needle biopsies.

These rooms are to be outfitted with overhead H-style patient lift systems, capable of 550-pound lifting capacity, to aid staff in moving patients on/off a stretcher, or recliner. It is to have a 5’-6” diameter clear turning space within the room.

2.5.7.6 Fast-Track Exam/Treatment Room

The fast-track system at the emergency department is similar to urgent care. Patients who are triaged (or sorted) into the fast-track system typically come in with lower acuity complaints like a sore throat, a rash, urinary tract infections, and minor injuries. Most of the time, patients that go to fast-track are generally healthy, and their complaints can be diagnosed through a history, physical, and x-ray or point of care test (such as a urine dip).

For maximum flexibility, this room is designed exactly like the General Exam/Treatment Room, except it will be equipped with a reclining type of exam chair rather than a stretcher. Depending on surge demands within the ED, or time of day, this room can then be utilized as a General E/T Room also. The Fast-Track E/T Room should be located near the patient assessment area.
2.5.7.7 Bariatric Patient Exam/Treatment Room

A Bariatric Patient Exam/Treatment Room has the same purpose, and design, as the General E/T Room, except it is to be larger, and be equipped with a heavier capacity patient lift to accommodate bariatric patients. Bariatric treatment 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 bodyweight of greater than 300 lbs. A Body Mass Index (BMI) of greater than 40 is considered bariatric.

It is to be equipped with a bariatric stretcher. These rooms are to be provided with overhead H-style patient lift systems, capable of greater than 750-pound lifting capacity, to aid staff in moving patients on/off a stretcher. It is to have a 6’-0” diameter clear turning space within the room.

2.5.7.8 GYN Patient Exam/Treatment Room

A GYN Patient Exam/Treatment Room has the same design, as the General E/T Room, except it has a Toilet/Shower Room directly connected to it. This room is preferred for GYN exams but may be universally utilized for other patients.

2.5.7.9 Mental Health Exam/Treatment Room

The Mental Health E/T Room is a diversely designed swing room that can be utilized as a General E/T Room or one dedicated to patients who are triaged with a mental health condition. This E/T room is shown to be both right- and left-handed layout. This is done to provide a central nurse observation desk, for two people, with direct observation into two adjacent Mental Health E/T Rooms so that these mental health patients can be monitored 1:1 at all times. The observation windows and glass in the door are to be equipped with horizontal integral blinds to be operated from the staff side of the room.

This room has a swing door that normally swings into the room, but door stops, or hardware may be quickly changed to allow the door to swing out to prevent a patient from barricading themselves inside the room. Two overhead coiling doors are designed to be open for access to a sink, supply cart, medical gases, wall-mounted exam light, etc. If needed these doors can be closed to convert this room quickly to increase safety for patients at risk for self-harm or restrained to a stretcher.

2.5.7.10 Mental Health Intervention Room

A mental health intervention room is where patients who may be at high risk for harm to self, or others, may be taken immediately on arrival. It provides an environment suitable for the rapid medical and mental health evaluation of dangerously unstable situations and the capacity to safely manage and treat the patient. The Mental Health Intervention Room should be located away from the waiting area and have a Nurse Workstation adjacent.

While it is not a seclusion/restraint room, it should meet the standards of the Mental Health Intervention Room for construction, equipment, and furnishings, outlined in the
current Mental Health Environment of Care Checklist (found at http://vaww.ncps.med.va.gov/guidelines.html). NOTE: This is an internal website and is not available to the public. If possible, all VA EDs need to have one room meeting these requirements. A nurse observation desk, for one person, with direct observation into this room so that these mental health patients can be monitored 1:1 at all times. The observation windows and glass in the door are to be equipped with horizontal integral blinds to be operated from the staff side of the room.

2.5.7.11 Orthopedic Treatment Room

Orthopedic injuries are some of the most common reasons for patient presentation to the emergency department. The most common types of injuries to be treated in the ED are related to dislocations and fractures of arms and legs. No open fractures would be treated in this treatment room, they would be taken to the Resuscitation Room or an operating room in the medical center.

This room is where casting would be performed, either fiberglass or plaster types. If plaster type casting is anticipated, then a larger sink with a plaster trap must be provided. This room should have close access to the ED Imaging area and have access to PACS imaging within this treatment room.

2.5.7.12 Eye/ENT Treatment Room

Eye-related treatments can be either injury or non-injury related. Many patients coming to the ED for emergency eye treatment do not need this level of care. These patients are frequently seeking the following non-emergency conditions: conjunctivitis (pinkeye), blepharitis (swollen eyelids), and chalazion (eyelid bumps). The most common treatments performed in the ED are eyelid repair, drainage of eyelid abscess, and removal of foreign bodies from eyelids.

ENT treatments can include conditions such as epistaxis (nose bleeds), hearing loss, injuries to the ears, injuries to the head and neck area, foreign bodies in ears, nose, or throat, facial fractures, burns involving the nose, ears, or mouth, paralysis of the face, sinus disorders, dizziness, compromised upper airway, difficulty swallowing, and lumps in the neck/throat, among others.

For both eye and ENT cases, this room will be uniquely equipped to treat these types of emergency cases. This Treatment room may also be utilized as a General E/T Room at surge times or when it is not needed for these special cases.

2.5.7.13 Airborne Infection Isolation Exam/Treatment Room with Anteroom

A negative-pressure Airborne Infection Isolation (AII) E/T Room is designed to isolate a patient who is suspected of, or has been diagnosed with, an airborne infectious disease. Therefore, the negative-pressure isolation room, is designed to help prevent the spread of a disease via respiratory droplets from an infected patient to others in the medical center.
This room is required to have an anteroom where all entry/exit of patients, staff, and equipment into the AII room must pass through. Also, this room has a dedicated toilet that can only be accessed from within the AII room. This room does have special requirements for airflow that are further defined in the Mechanical Design portion of this Design Guide. Otherwise, this room is equipped just like a General E/T Room. At least one Airborne Infection Isolation E/T Room, in every ED, is to be equipped with in-wall dialysis box for treatment.

2.5.7.14 Protective Environment Exam/Treatment Room with Anteroom

A positive-pressure Protective Environment (PE) E/T Room is designed to protect the profoundly immunosuppressed patient, with prolonged neutropenia, from common environmental airborne infectious microbes. The primary difference between this PE room and other E/T rooms is the requirements for air filtration and positive air pressure relative to adjoining spaces. The need for this type of room must be established by the VAMC as determined by an Infection Control Risk Assessment (ICRA). This room should be located distally from any AII room.

This room is required to have an anteroom where all entry/exit of patients, staff, and equipment into the PE room must pass through. Also, this room has a dedicated toilet room that can only be accessed from within the PE room. One of these rooms must be capable of providing dialysis treatment.

2.5.7.15 Resuscitation Room

This area is dedicated to the immediate care of patients in cardiac arrest, airway, breathing, and circulation compromise. The resuscitation area consists of one or more Resuscitation Rooms with all resuscitative equipment (monitors, defibrillators, airway, intubation & surgical equipment) available at an arm's distance. The Resuscitation Room is designed to accommodate a second stretcher for a surge event, with access to a vertical headwall and realignment of the primary stretcher to accommodate the secondary one.

This room must have a direct line of sight from the central staff work areas. If possible, in the project design, it would have secondary access directly from the EMS/ambulance entrance for quicker access of these critical patients. This room must be capable of providing dialysis treatment. Door openings shall have a minimum of 72 inches clear opening width and a height of 83.5 inches.

2.5.7.16 Point-of-Care (POC) Testing

Point-of-care testing (POC) enables more rapid clinical decision-making in the process of diagnosis, treatment choice and monitoring, and prognosis, as well as operational decision making and resource utilization. In the ED this is envisioned as an alcove space in the central staff work area. It also should be adjacent to a toilet room for the discharge of urine samples.
Possible tests that can be performed at the POC Testing Alcove include NTpro-BNP/BNP, troponin, D-dimer, glucose, ketones, pregnancy, creatinine, lactate, influenza, HIV, blood gas, and electrolytes. The need for an undercounter refrigerator must be evaluated for the type of POC or ISTAT tests being run which may require some supplies be kept cold.

2.5.7.17 Decontamination Shower with Patient Changing Room

Decontamination is defined as the process of removing or neutralizing a hazard from the patient. The principal objectives of this process are to prevent further harm and optimize the chance for full clinical recovery or restoration of the exposed patient to the dangerous hazard. It is unlikely for a VAMC ED to receive mass decontamination events. It is more common to have one or two patients arrive at the ED requiring decontamination.

The steps normally involve removing a person’s clothing then showering with tepid water and soap to remove the contaminate. It is important for staff to be able to always observe and provide instruction to the patient during the decontamination process. The shower room must accommodate a patient on a stretcher also. The exterior entrance into this area must be located a minimum of 30 feet away from the EMS/ambulance entrance into the ED to reduce risk of contaminating EMS personnel and patients arriving by ambulance.

Showers should be designed with showerheads on flexible hoses to adequately wash all parts of the patient’s body. The patient then is moved into a Decontamination Patient Changing Room to dry off and put on a hospital-provided gown before being moved to an exam/treatment room. Consider locating an equipment alcove near the shower to park a mobile patient lift that can be brought into the changing room.

2.5.7.18 Simulation/Resuscitation Viewing Room

This viewing room is to be utilized for staff training and simulation cases. It should be located along one wall of the Resuscitation Room with observation windows and audible 2-way communication between both rooms. The observation windows need to be equipped with a method to method of providing privacy into the Resuscitation Room. An audio/video integration system should be considered here for connection with the Resuscitation Room to provide optimal simulation training environment.

2.5.7.19 EMS Ambulance Garage or Drop-off

The EMS/ambulance entry should always be a covered canopy or enclosed garage. It is preferred that northern climates provide a garage, for better patient care. Drop-off canopies may be designed in either drive-thru or back-in unloading configurations. Garages should be designed with drive-thru configurations. Because either an EMS Ambulance Garage, or covered drop-off canopy, involves bringing vehicles near the medical center building the design must comply with the VA Physical Security and Resiliency Design Manual (PSRDM).

Enclosed garages require specific ventilation which is addressed in the Mechanical Design section of this Design Guide. Ambulances come in many different sizes and configurations.
so designers must always verify the dimensions of the units serving a specific VAMC. Patient lifts are to be overhead, ceiling-mounted traverse or H-style with greater than 750 pound lifting capacity, with hanger bars that will fit inside a car, and provided at either a canopy or garage design. Provide sufficient electrical outlets for multiple pieces of transfer and lift equipment being in use simultaneously.

2.5.7.20 EMS Staging and Staff Work Area
The Emergency Medical Services (EMS) staging area is an open bay configured to temporarily hold a patient either arriving at or departing the ED. This staging area may be combined with other outbound holding bays for patients waiting to be transferred to another area within the hospital. For incoming patients arriving by ambulance, that may need to be held here before being moved into the Resuscitation Room or an E/T room.

The EMS work area is an important area to allow these personnel to stop to do their paperwork, use a toilet room, clean up as needed before they go back out in their ambulance again on another call.

2.5.8 Emergency Department Common Rooms/Spaces
The following room types in the ED are common to other departments within the hospital but are further defined below, in the context of their function in the ED.

2.5.8.1 Patient Waiting
The primary waiting area is the first room inside the ED entrance. It is sized to correspond with the number of E/T spaces in the ED. The design must consider some separated areas, particularly as a pandemic consideration of separating people. Seating needs to accommodate wheelchairs as well as standard and bariatric size chairs.

It is the intent that the waiting area be for family/friends of patients in the ED. It should be the goal of the ED to move patients “forward in the process” either to triage, exam rooms, or inner waiting areas in the clinical area when possible.

This space should have direct access to outside windows for daylight. It must be visually observable from the reception desk and First Look Station. Provision shall be provided for public toilets, drinking water, and public communication services.

Refer to section 2.7.3 Geriatric Veterans for information regarding visual and audibility concerns that are critical in a Waiting Room.

2.5.8.2 Results Pending Waiting Room
A small internal waiting room for “vertical” patients who had tests completed and are comfortable awaiting test results in a chair or recliner. It needs to be in a highly visible area where clinical personnel can maintain visual control of those utilizing the space. This is not considered a care area and will not have medical gases. Patients may wait here for final discharge instructions. This space should be near a consultation room so results and
discharge instructions can be delivered in a confidential environment. While main ED clinical areas may utilize this area, the highest utilization is from the fast-track or lower acuity patients and should be near these care areas.

2.5.8.3 Consult Room

This space provides for a private area for physicians or nurse practitioner to explain a procedure, obtain informed consent, explain discharge instructions, and follow-up with the patient, or patient’s family. This space is also useful when informed consent is required for non-interventional exams. The consult room(s) should be adjacent to the inner waiting rooms where multiple patients may be awaiting testing results, thus offering a location for private discussions with the clinical teams.

2.5.8.4 Wheelchair/Stretcher/Lift Parking Alcove

Wheelchair/Stretcher/Lift Parking alcoves allows space for temporary holding of beds, stretchers, gurneys, reclining chairs, wheelchairs for patients who arrive at the ED with these transport devices or need them to be transported to another area within the hospital. It is the intention that each E/T module is provided with an alcove proximate to the central staff work area for the temporary holding of these items. An additional one should be located near the Resuscitation Room.

2.5.8.5 Outbound/Inbound Staging/Holding Bay

Outbound/Inbound Staging/Holding Bays accommodate bed and stretcher patients who are brought to the ED by ambulance, or are waiting to be discharged by ambulance, or admitted to an inpatient bed. A patient holding bay, which can also serve as a bed-transfer area, should be provided. The holding bay area can also serve as the screening location for observation/non-ambulatory patients who might not otherwise proceed through admitting or discharge processes.

The first holding bay will be provided with a ceiling lift system. Ceiling lifts are to be provided for additional patient holding/transfer bays as determined by a site needs assessment. (See Section 2.6.11, Safe Patient Handling).

2.5.8.6 Patient Belongings Storage

Typically, patient’s personal belongings will stay with them in their own exam/treatment room, where they are receiving treatment. However, at times a Veteran will come to the ED who may be homeless, or just carrying extra belongings and these items must be stored in a separate area. This room should be in the assessment area and include lockers to secure each patient’s belongings, with a removable key that is kept with the patient until they are ready to leave and pick up their belongings again.
2.5.8.7 Provider Workroom

A Provider Workroom is typically a glass-enclosed room with open desks, computers, and PACS system for use by all ED physicians on duty. It needs to be located near the central nurse work area. The design may include one of these workrooms per 12 E/T room module, or they could be combined at an intersection between two modules.

2.5.8.8 Nourishment Room or Alcove

It is typical to provide a nourishment alcove in most designs rather than a room. This alcove should be located near the central nurse work area. It contains a work counter, hand-washing sink, refrigerator, microwave, and storage cabinets. It also will typically have a self-dispensing icemaker.

2.5.8.9 Medication Room or Alcove

This will typically be a room and one is provided for every 24 E/T rooms. This room should be under the visual control of the nursing staff. Where one or more automated supply dispensing units are present, the room needs to be designed with space to prepare medications. This room will contain a work counter, a hand-washing sink, a lockable refrigerator, and a locked storage cabinet for controlled drugs.

In cases where a medication alcove is utilized, like in a fast-track area, it shall utilize an automated supply dispensing unit and have a hand-washing sink adjacent to it.

2.5.8.10 Mobile Equipment Alcove

To allow space for temporary holding of mobile equipment like specialized supply/treatment carts, clean linen carts, crash carts, etc. It is the intention that each E/T module (about 12 E/T rooms) be provided with an alcove proximate to the central staff work area for the temporary holding of these items. These alcoves shall not be less than 3’-3” wide.

2.5.8.11 Support Area (Staff Work Core)

A best practice is to provide an open staff work core for each ED module (about 12 E/T rooms) providing workspace and non-public staff circulation while visually connecting exam and treatment rooms. This space provides for team huddles and planning, required staff computer access, patient arrival, and scheduling notifications, etc. Providers may have administrative space within the work core.

2.5.8.12 Staff Locker Rooms

Separate male and female locker rooms with toilets and showers will be provided. Staff individual lockers will be provided, along with space for donning and doffing scrubs.
2.5.8.13 Staff Breakroom

This department requires the use of a Staff Breakroom within its department. Unlike other departments of the hospital, the staff is on duty 24/7 so immediate access to a breakroom is essential for quick breaks from their work routine. This room would preferably have exterior windows for access to natural daylight. This room should be equipped with storage cabinets, a sink for handwashing and cleaning eating utensils, refrigerator, icemaker, microwave oven, and coffee maker. It should be provided with tables that offer a flexible layout or seating options.

2.5.8.14 Staff Conference Room

This department requires the use of a conference room within its department. Unlike other departments of the hospital, the staff is on duty 24/7 so immediate access to a conference room is essential for training and staff meetings. This room would preferably have exterior windows for access to natural daylight.

2.6 Building Technical Considerations

2.6.1 VA Policies/Directives/Handbooks, Codes and Standards

2.6.1.1 Local Codes and References

As an agency of the federal government, VA functions as the Authority Having Jurisdiction (AHJ) for all VA facilities and projects and has the responsibility to guard public health and safety through enforcement of its own adopted codes and standards.

For VA-owned properties, the VA is not subject to the local imposition of code enforcement procedures, such as drawing reviews, building permits, inspections, fees, etc. Local authorities should be notified about planned projects and given an opportunity to review drawings provided that VA does not pay for review or inspection fees.

Planning, design, and construction of all VA Emergency Departments must be in accordance with this Design Guide and with the latest editions and/or versions of all applicable VA policies and standards. Requirements in this Design Guide shall not be construed as authorization or permission to disregard or violate applicable local codes and regulations. Any deviation from Design Manuals and Standards are required to be approved by the VHA AHJ.

Please refer to section 1.4 VA Policies/Standards and Industry Codes/Standards for additional information as subject to project-specific contract terms and professional responsibilities.

2.6.2 Site Considerations
2.6.2.1 Parking

Provide dedicated parking with accessible parking spaces specifically for Veterans to allow for safe and easy access to Emergency Departments per the current version of the PG-18-10 VA Parking Design Manual and demand Model. Separate dedicated parking facilities should be provided for patients arriving for care at the Emergency Department. Coordinate with VA Physical Security and Resiliency Design Manual, sections 3.3 Standoff Distances and 3.7 Parking.

2.6.2.2 Signage

Building identification and site signage for visitors, staff, and service accommodations shall conform with the current VA Signage Design Manual and VA Parking Design Manual, including parking lot signage for dedicated Emergency Department parking spaces. Directional signage identifying the Emergency Department Ambulance and Walk-in entrances need to start at the street before entering the campus, then to provide simple wayfinding to the dedicated parking area.

2.6.2.3 Covered Entry

As part of the building and site design, provisions for a dedicated covered entrance at the primary walk-in and ambulance access point to the Emergency Department are required. Provide canopy coverage to accommodate a minimum of two parked vehicles with appropriate width to allow for the passage of an additional lane of vehicular traffic. Clear height from the paved surface to the underside of the canopy shall be designed to allow clearance for accessible vans and large emergency vehicles.

At VA Medical Centers in northern climates, consideration should also be given to providing an Ambulance garage in either a drive-thru or back in configuration.

2.6.2.4 Physical Security

VA has developed the Physical Security and Resiliency Design Manual (PSRDM) for VA facilities, published October 1, 2020, and revised September 1, 2021. Revisions will be issued every few months. Provisions for physical security design shall follow the appropriate guideline dependent upon VA-defined requirements in section 1.4 for the facility designations of a facility as either Life Safety, Mission Critical, or Life Safety Protected with Mission Critical utility system redundancies.

2.6.3 Architectural Design

2.6.3.1 Interior Design

To foster a warm and patient-centric environment, designers are encouraged to design spaces that consider qualities of lighting (both natural and artificial), air temperature and movement, ambient sound, colors, textures, furnishings, and artwork that can all work together to create restful, restorative, nurturing environments.
Additionally, planners should include views from patient care areas to the outdoors, when practical and desirable. When direct views are not practical, consider the use of natural imagery. This may mean imagery and artwork on ceilings or walls. Refer to VA Directive 7531, Acquisition of Artwork, Decorative Furnishings, and Decorative Items, for sourcing and procurement standards.

Per the Room Finishes, Door, and Hardware Schedule (PG 18-14), consider the following key factors having an impact on the built environment and user experience, and shall be considered during the design process:

1) Maintenance  
2) Durability  
3) Life Cycle Cost  
4) Warranty  
5) Therapeutic attributes (see 2.4.5 Healing Environments)

Additionally, designers should specify materials that maximize infection prevention and control, including but not limited to vinyl coated fabric wallcoverings, upholstery fabric with special coatings and moisture resistant backings, stainless steel, or solid surface countertops.

2.6.3.2 Wayfinding

Wayfinding signage and systems shall be clearly displayed and fully accessible to Veterans and users with impaired range of motion and/or limited range of vision, either vertically or laterally. Interaction with wayfinding systems shall be equally optimized whether the Veteran is in a standing, seated, or prone position. Organizing the department to allow for intuitive wayfinding with clear delineation of staff spaces and patient/visitor spaces helps reduce stress and aid efficient operations.

Also, it should be noted that some staff members that may be present in the facility do not frequent the department regularly. It is therefore important to consider both off-stage and on-stage routes when designing wayfinding. Refer to VA Signage Design Manual for specific information.

2.6.3.3 Partitions

Interior partitions should be primarily gypsum wallboard on metal studs. Partitions enclosing physician offices, exam rooms, and treatment rooms should be provided with sound attenuation batts, full height between the studs in accordance with VA Construction Standard (H 18-03), and Noise Transmission Control (CD 34-1).

Partitions surrounding a Mental Health Exam/Treatment Room and Mental Health Intervention Room shall be given careful attention for durability and safety. One of the following partition construction methods shall be used: high-impact gypsum board, ¾” fire
treated plywood backing behind the gypsum board, or plaster coating on filled concrete masonry units. Refer to VA Design Guide for Inpatient Mental Health & Residential Rehabilitation Treatment Program Facilities, section 4.3.3.10 for additional gypsum board recommendations.

Partitions, windows, and doors enclosing Radiology Imaging Rooms, and CT Scanning Rooms require radiation shielding, engineered by an appropriately certified Health Physicist. Shielding attenuation may be accomplished by shielded finish materials (e.g., leaded gypsum board), or by a composite assembly (e.g., conventional gypsum board over lead foil or filled concrete masonry units). Construction documents describing shielded partition design or construction will require a written shield engineering report prepared by a certified Health Physicist. See (PG-18-12) Imaging Services Design Guide for further requirements.

Refer to Room Finishes, Door, and Hardware Schedule (PG-18-14) for partition construction and finish specifications.

2.6.3.4 Ceilings

The finished ceiling height of most areas on the ED should be a minimum of 9 ft. (2750 mm) above the floor. The resuscitation room should be a minimum of 10 ft. (3050 mm) above the floor.

Ceiling materials consist of acoustic ceiling tile (ACT) in patient exam/treatment rooms, common areas, staff spaces, and general circulation. Gypsum wallboard (GWB) shall be utilized in patient bathrooms, shower areas, and wet or humid environments, and in the resuscitation and mental health intervention room.

Refer to Room Finishes, Door, and Hardware Schedule (PG-18-14) for ceiling specifications.

2.6.3.5 Floors

Cleanability of the flooring material is of primary importance in the emergency department, as most areas are at high risk for the spread of infections. Consider the following when choosing a flooring material:

1) Ease of care and maintenance,
2) Repairability,
3) Impact by medical center cleaners and disinfectants.

Flooring in resuscitation rooms will be resinous poured flooring with integral base seamless and of non-porous material. Special consideration should be given to the area directly below the treatment table, where betadine staining is a common problem. Betadine is an antiseptic frequently used in procedures that leaves a yellowish-brown stain. While some flooring materials will hold up better than others to staining, it is generally recommended to provide colors that will disguise betadine build-up in this area.
Subfloors in some imaging rooms may require either a depressed slab trench to facilitate installation of the floor duct/raceway system, or (preferably) under-floor conduits. Coordinate substructure design and preparation, equipment installation requirements, and floor finishes.

Refer to Room Finishes, Door, and Hardware Schedule (PG-18-14) for flooring specifications.

2.6.3.6 Wall Protection and Handrails

Due to a large amount of cart and stretcher traffic in the ED, consideration must be given to the durability of walls. It is recommended that walls are fitted with a crash rail and wall protection in high traffic areas. Wall protection should be used in alcoves and storage spaces intended for the storage/holding of rolling equipment (e.g., workstation on wheels (WOWs), crash carts, gurneys, linen carts, etc.).

The headwall inside of all exam/treatment rooms and all walls of the resuscitation rooms should have a wainscot treatment of resilient wall protection.

Handrails should be installed on both sides of all corridors. Provide continuous reinforcing in the wall for attachment of handrails and wall guards.

2.6.3.7 Doors and Hardware

All doors shall be coordinated with requirements from the VA Physical Security and Resiliency Design Manual, section 5.5.2 Entrances, and Appendices A and B. Interior doors should be solid core flush panel wood doors or hollow metal doors in hollow metal frames. All doors in patient-accessible rooms must be a minimum of 48” wide. Doors in exam/treatment rooms must be wider for access by bariatric stretchers and mobile equipment that may be moving along with the patient as shown in the room templates.

Hollow metal doors should be used where high impact is a concern and where fire-rated doors are required. Kick/mop plates should generally be applied to both sides of the doors. Handicapped accessible hardware should be used throughout.

Most exam/treatment rooms in the ED will utilize aluminum and glass sliding breakaway doors, with aluminum frames. These doors must always be capable of breaking open towards the corridor. Provide these with no tracks at the floor. Consideration must be given to patient privacy and the use of methods to close off these large glass entrances with curtains, integral blinds, or switchable glass.

Mental Health E/T Rooms, Mental Health Intervention Rooms, and Mental Health Patient Toilet rooms must be provided with anti-ligature hardware, including top-of-door alarms. These doors when swinging into a room must be designed with quickly removable frame stops, or special hardware to allow the doors to swing outwards to the corridor to prevent barricading.
Doors, frames, and door hardware placed in radiation-shielded partitions must be shielded to the minimum level of the wall into which they are placed unless otherwise indicated in the shielding engineering report. Penetrations in a shielded door (e.g., glazed lites or locksets) must be shielded to the minimum level of the door into which they are placed unless otherwise indicated in the shielding engineering report.

For patient dressing rooms and single-occupancy toilet rooms, it is required that doors be provided with privacy locks and strongly recommended that door systems include an exterior-facing occupancy indicator.

In some instances, surface-mounted sliding doors may provide space-saving alternatives to conventional swinging doors but may require more wall area adjacent to the door opening. Always consult governing life safety codes and standards for doors and hardware for egress path requirements for smoke/fire separation.

Automatically operated power door openers and surface mounted sliding doors must be utilized where indicated by PG-18-14 and otherwise appropriate to provide ease of access and maximize available floor space.

2.6.3.8 Casework

All exam/treatment rooms utilize mobile equipment storage systems to make a more efficient restocking of all supplies. Where needed in other ED spaces modular casework storage systems should be utilized for flexibility including the incorporation of typical dimensions for ease of multiple re-use applications. Casework systems should be integrated with space planning to avoid corner installations, which creates unusable cabinet space, and filler panels.

Countertops for all clinical and clinical support areas should be made of solid impervious resin material (per PG 18-14: Room Finishes, Door & Hardware Schedule) with integral sinks, which offers long-term durability, and resists chipping and staining from medical agents expected to be used in clinical environments. For areas where strong chemicals are used, such as soiled utility rooms, seamless stainless-steel counters with integral backsplash should be used.

Consideration shall be given to modular desking systems for workstations instead of fixed countertops or casework systems for workstations in non-clinical staff and administrative areas.

2.6.3.9 Natural Light

Daylighting can be used to offset demand for artificial lighting, increase building energy efficiency, and improve patient comfort and recovery times. Consideration early in the design process is critical to maximizing the benefits. If daylighting is not sufficiently provided to patient care spaces via exterior windows, skylights, tubular daylighting devices, or artificial lighting attuned for project-specific needs must be considered. Exterior doors and windows must be intrusion/forced entry resistant in accordance with the VA PSRDM.
2.6.3.10 Acoustics/Noise Control

Noise intrusion should be minimized by coordinating the design of the physical environment and the selection of operational systems and equipment, including sound transmission between adjacent rooms and sound generated from outside the patient rooms, either from within the department or outside the building.

Interior acoustics that supports speech intelligibility and provides comfort can be difficult to obtain in a resuscitation room where non-porous materials are mandated for infection control requirements. It is important to find ways to control reverberation and noise build-up in these spaces. One option to consider is a sound masking system. The acoustical design of patient spaces shall also be taken into consideration, in particular the exam/treatment rooms, in order to minimize patient stress and discomfort. See PG-18-3 Design and Construction Procedures.

2.6.4 Structural Design

The A/E shall provide a complete structural system design for the project. The structural systems shall support all applicable dead and live load elements that are required for the use of the Emergency Services. The structural system shall comply with the current versions of all applicable Department of Veteran Affairs (VA) structural and building guidelines such as the Physical Security & Resiliency Design Manual and Seismic Design Requirements (H-18-8).

Medical equipment such as overhead room lights or patient lifts shall be coordinated with the available overhead structural system for attachments. All overhead or associated medical equipment, electrical, fire sprinkler, mechanical devices or other nonstructural elements shall meet the seismic bracing requirements per ASCE/SEI 7 Minimum Design Loads and Associated Criteria for Buildings and Other Structures Chapter 13, Seismic Deign Requirements for Nonstructural Components. Structural engineer shall specify the Seismic Design Category for each project locations to assist in determining bracing requirements with respect to Component Importance Factors (Ip) as defined in ASCE 7.

Any additional equipment required for the Emergency Services that is floor or above-ceiling mounted and subject to installation or vibration tolerances shall meet the design requirements as set forth in the VA Imaging Services Design Guide.

2.6.5 Mechanical Design

2.6.5.1 General

HVAC systems shall be provided to heat, cool, and ventilate individual rooms or areas to satisfy design criteria. The HVAC systems shall comply with the current version of the Department of Veteran Affairs (VA) HVAC Design Manual, Design and Construction Procedures, Master Construction Specifications and Standard Details, Design Alerts, Standard Alerts, H-18-8 Seismic Design Requirements (if applicable), and other pertinent design guides and manuals. The current VA design and construction criteria are available.
on the VA Technical Information Library (TIL) at http://www.cfm.va.gov/til/. Deviations from the VA guidelines may be made if approval is obtained from the VA. Where specific VA requirements are not available or indicated in this document, design criteria from industry standards such as ASHRAE, NFPA, and DOE, etc. should be submitted to the VA for approval.

See HVAC Design Manual Chapter 6 for AHU Data Sheets for information on economizer, heat recovery, air filtration, cooling-heating-humidification source, and emergency power. Refer to the entirety of the HVAC Design Manual, along with the whole body of VA Documents, for HVAC design information. Per AHU Data Sheet, the unit shall be capable of operating in 100% outdoor air mode during an emergency created by an epidemic of contagious diseases. The emergency department shall have one or more dedicated air handling units. Air handling units shall not serve other hospital departments.

Refer to Emergency Care Room Data Sheets (RDS) in Chapter 6 of the HVAC Design Manual for room requirements including room temperatures, room relative humidity ranges, minimum air change rates, return and exhaust requirements, maximum noise levels, room pressurization, room temperature control requirement, and room constant or variable flow requirement. Chapter 6 also has information on room differential pressure.

Refer to airflow relationship diagrams for Emergency Care in Chapter 6 of the HVAC Design Manual for airflow direction and type of exhaust or return.

Refer to the Imaging Services Design Guide for rooms with radiology equipment. This guide contains direction for HVAC systems for radiology equipment rooms, quench pipe design, and ductwork.

For rooms and spaces that have a mental health component, refer to the VA Design Guide for Inpatient Mental Health and Residential Rehabilitation Treatment Program Facilities. The manual addresses anti-ligature air devices along with other HVAC-related items.

### 2.6.5.2 Ambulance Garage Exhaust

In enclosed ambulance garages, an exhaust system with high and low inlets shall be used. The exhaust system airflow and outlet termination location shall take into consideration location of doors, air inlets, and exhaust emissions from idling vehicles. See additional guidance in the HVAC Design Manual including dispersion analysis parameters.

A carbon monoxide and nitrogen dioxide detection system shall control the exhaust system for enclosed garages. The gas sensors shall be located near the entrance into the hospital. Typically, a self-contained factory panel will house the sensors, alarms, and controls. The panel will control the minimum exhaust airflow at a continuous rate with airflow increasing to maximum as contamination detection increases. An alarm shall be sent to the building automation system when contaminants reach high levels. The garage shall be negative with respect to the hospital. Makeup air shall be provided to replace exhausted air.
Heating and cooling needs are to be evaluated for site climate conditions and specific site requirements. Exhaust and HVAC systems for open or partially open garage bays to be evaluated specifically for the site.

### 2.6.5.3 Exhaust Systems

The general exhaust system will serve all the rooms except rooms requiring special exhaust per the HVAC room data sheets and Exam / Treatment rooms. A special exhaust system will serve all rooms requiring special exhaust as indicated in the HVAC room data sheets. A third system will serve exhaust for the Exam / Treatment rooms. See the HVAC Design Manual for parameters on distances to intakes and other factors so that exhaust air is not reintroduced into the building. See chapter 2 for dispersion analysis requirements.

### 2.6.6 Plumbing Design

#### 2.6.6.1 General

The plumbing and medical gas systems shall comply with the current version of Department of Veterans Affairs (VA) Plumbing Design Manual, Design and Construction Procedures, Master Construction Specifications and Standard Details, Design Alerts, Standard Alerts, H-18-8 Seismic Design Requirements (if applicable), and other pertinent design guides and manuals. The current VA design and construction criteria are available on the VA Technical Information Library (TIL) at [http://www.cfm.va.gov/til/](http://www.cfm.va.gov/til/). Deviations from the VA guidelines may be made if approval is obtained from the VA. Where state or local codes are more stringent than the above requirements, submit criteria to the VA for review and approval.

Refer to the Imaging Services Design Guide for rooms with radiology equipment. This guide contains direction for secondary water backup for radiology equipment, piping penetration of radiation shielding, and medical gas outlets.

Refer to Section 4.0 Room Templates for information on recommended plumbing and medical gas connections for each room type. The design team, along with the VA, will verify if changes in the location and quantities of outlets are needed.

Dialysis boxes in exam treatment rooms may be required. Dialysis boxes are required in one Airborne Infection Isolation Room, one Bariatric Patient Exam/Treatment room and in Resuscitation Room(s). Confirm water supply quality and temperature requirements. The box shall have a waste connection with chemical resistant waste piping. Chemical-resistant pipe shall extend to a downstream pipe carrying primarily regular effluent.

Medical compressed air, oxygen, and medical vacuum systems should be provided in accordance with the current versions of the VA Plumbing Design Manual.

All exam rooms shall be ventilator capable. Medical air and oxygen piping systems shall be sized to provide support for ventilators.
Site specific requirements for ambulance garage may include medical gases, hose bib, trench drain, and sand-oil interceptor.

Site specific requirements for the decontamination shower include type of waste holding system (tank or integral shower sump) and connection to waste system and shut-off valve. Verify requirements for disposal of contaminated waste.

2.6.7 Fire Protection

2.6.7.1 Fire Protection Systems

Fire Detection and Sprinkler System: Provide fire alarm and detection systems in compliance with NFPA 101 and NFPA 72 as well as VA Fire Protection Design Manual. Coordinate the location of sprinklers with other ceiling systems in accordance with the current version of the VA Master Construction Specifications and VA HVAC and Plumbing Design Manuals. In areas with movable ceiling equipment where the potential exists for this equipment to come into contact with a recessed pendant sprinkler, sidewall sprinklers should be considered in lieu of ceiling sprinklers.

2.6.7.2 Mental Health Areas

Refer to the VA Fire Protection Design Manual, 6. Fire Extinguishing Systems, Section L for guidance on the use of “institutional” or “tamper resistant” sprinklers in psychiatric areas.

2.6.8 Lighting Systems

The A/E shall provide a complete lighting system design for the project. The VA Lighting Design Manual (LDM) provides the A/E with design requirements of the lighting systems such as design parameters and recommended types of luminaires. In terms of design standards and codes, section 1.4 of the LDM provides a list of design standards and codes that the lighting system design must comply with, as a minimum.

In the Emergency Department, the comfort of the patients and requirements to support procedures should be the primary goals of the A/E when designing the lighting system. The Lighting Designer and Interior Designer must coordinate their design method and material to create lighting solutions that are patient-centric and are comforting, while still meeting procedural requirements.

Triage rooms, exam/treatment rooms are a few types of spaces within the Emergency Department that will typically require dimmable and direct/indirect lighting systems to promote visual comfort and reduce glare while allowing for critical medical diagnoses and procedures. Individual dimmer switches are required for control of variable illumination levels in all exam/treatment, and procedure rooms. The VA does not permit the use of wireless dimmer technologies.

The A/E has the option of using either fluorescent or LED lighting technology as the design basis. However, the VA prefers the use of LED lighting technology. The A/E should confirm the selected
lighting system with clinical users and design the lighting system based on the preferences/requirements. Refer to section 2.7.3.1 Vision Changes for additional advice on lighting for elderly patients.

2.6.9 Power Systems

The A/E shall provide a complete electrical power system design for the project. The VA Electrical Design Manual (EDM) provides the A/E with the design requirements of the electrical power systems. The EDM also provides specific guidance for the electrical design of emergency/treatment room areas and life support rooms. The A/E shall provide the electrical power system design that complies with all applicable requirements stated in the EDM. In terms of design standards and codes, section 1.5 of the EDM provides a list of design criteria that the electrical power system design must comply with, as a minimum. Automatic receptacle control shall not be used in the design within the Emergency Department due to the space’s continuous operation and the continuous safeguarding of patients and staff. The A/E shall coordinate electrical requirements with the VA PSRDM, section 9.3.

Normal Power: The normal power system is to be connected to selected luminaires, receptacles, and equipment.

Emergency Power: The critical branch of the Essential Electrical System (EES) is to be connected to selected luminaires, receptacles, and equipment. The life safety branch of the EES is to be connected to selected egress luminaires.

2.6.10 Telecommunications Systems

Telecommunications systems include the following systems: structured cabling, nurse call, paging, television distribution, digital signage, intercom, and public safety DAS. All telecommunications systems shall be coordinated with requirements from the VA Physical Security and Resiliency Design Manual, section 9.4 Telecommunication Systems, and Chapter 10 Security Systems. See below for descriptions and requirements of the systems.

2.6.10.1 Nurse Call System

A nurse call system is required in the Emergency Department. The nurse call system devices shall include duty/staff stations, toilet stations, nurse assist stations, code blue stations, master call stations, and dome lights. Nurse call shall be provided in all spaces as identified in the room data sheets. Each exam room, triage room, isolation room, and resuscitation room shall receive a nurse assist/code blue call button with 2-way communication to a master located at the nurse’s station. Each patient toilet room shall receive an emergency pull station. Each nurse station shall receive a master call station. Clean linen, soiled utility, and staff lounges shall receive a duty/staff station. Mental health patient rooms shall have anti-ligature cords for nurse call stations. Refer to VA nurse call specification for further details about the system.
2.6.10.2 Paging System

A paging system is required in the Emergency Department. The system shall be integrated with the facility paging system and shall be accessed via the telephone system. Speakers shall be ceiling mounted and distributed in such a pattern as to provide even volume and intelligible speech reproduction. A safety wire shall be provided for each speaker to prevent the speaker from falling. Refer to VA paging specification for further details about the system.

2.6.10.3 Television Distribution System

A television distribution system is required in the Emergency Department. The system shall distribute television signals to all television outlet locations shown on the room data sheets. The type of distribution system shall match the distribution system in the entire facility. Refer to VA television system specification for further details about the system.

2.6.10.4 Telecommunication Infrastructure

It shall be a “Structured Cabling System” designed and installed to the Office of Information & Technology (OIT) design guide, the Infrastructure Standard for Telecommunications Spaces design guide, and Standards Alert 017 R01. Refer to room template sheets for telecommunication outlet requirements.

2.6.10.5 Digital Signage System

A digital signage system is an optional system for the Emergency Department. Digital signage shall be included only if the entire facility has a digital signage system. The digital signage system shall include a digital signage server and wall-mounted video displays.

2.6.10.6 Intercom System

An intercom system is required for the Emergency Department. Intercoms shall be utilized for secure area communication from the registration desk.

2.6.10.7 Public Safety Communication System

A public safety DAS system is required for the Emergency Department if the emergency responder radio coverage is inadequate in the building as per the local emergency responders. An in-building public safety communication system [also referred herein as a Public Safety DAS (PS DAS)] is a wireless communications system used by first responder and emergency services personnel such as police, fire, emergency medical, homeland security, and disaster response agencies to prevent or respond to incidents or situations that pose a threat to people or property. An in-building public safety communication system ensures that radio signals can penetrate and extend into required areas of buildings, including areas that are especially difficult for RF signal to penetrate such as stairwells, elevators, basements, and thick-walled or shielded areas.
2.6.10.8 Wireless Network Wi-Fi

A Wi-Fi system is required for the Emergency Department. Wi-Fi coverage shall provide sufficient coverage in all Emergency Department spaces so that VA devices can be connected to the VA network without being plugged into a data outlet. A Wi-Fi coverage map of the proposed Wireless Access Point layout should be provided to verify coverage in all Emergency Department spaces.

2.6.10.9 Wanderguard System

A Wanderguard system should be considered for the Emergency Department. Wanderguard system should interface with the access control system and alarm/notify appropriate staff of an alarm condition. Door locks should be activated, and notification sent based on proximity of the tagged patients.

2.6.11 Information Management Systems

Information management systems shall include elements of electronic patient records including patient registration, patient charges, physician order entry, image retrieval, processing, storage, treatment planning, and patient/staff movement. These system elements will require high-speed, high-bandwidth access to the facility information system as well as the departmental local area network. A standardized structured cable system and pathway system are to be provided to facilitate current and future network access. Sufficient network access points must be planned. Network ports (and power outlets) should be available in alcoves used to park portable X-ray and ultrasound units, as well as in storage spaces housing ADSU units.

Visual workflow management software is a web-based patient tracking system that utilizes sensors and staff inputs to progressively update and disseminate patient status, room availability, and procedure status to physicians, staff, and family in real-time via mobile devices, pre/post, and waiting area status boards, and bedside PCs. HIPAA compliance updates are also posted to a hospital website, which is managed through the ED control room command center.

These systems incorporate a variety of applications to notify and display information including smartphone and tablet applications, bedside PC’s, large format status monitors, and electronic staffing boards. Patient arrival by ambulance to the ED is automatically captured and patient data (allergies, labs, ordered blood products, specimens, and more) can be posted to patient safety displays within the system. The system is controlled and monitored at the ED control desk where a comprehensive view of the entire suite can be relayed with real-time updates for every patient, optimizing clinical staffing, patient throughput, predictability, and control. A series of automated text notifications are sent to appropriate staff, minimizing the number of calls and pages required to progress a patient through a procedure.

Physicians, staff, and supervisors can utilize the phone and tablet applications on the move to stay abreast of cancellations, emergency cases, patient flows, and on-demand daily and historical performance analytics promoting proactive schedule management. Electronic staffing boards eliminate the need for “grease” boards. Staffing assignments are quickly and conveniently posted.
for rooms, breaks, and relief. Large format status monitors provide continuous unit visibility in control desks and staff break areas. Large format monitors can also be used to communicate patient status to family in waiting areas.

2.6.12 Infection Prevention and Control

Infection prevention and infection control is a foundational obligation of all healthcare facility design and construction. Due to the increasing levels of patient acuity and intervention within emergency departments, which render persons more susceptible to infection, infection prevention and control measures are of utmost importance. Patient flow throughout the ED is planned to protect others from those who may have an infectious disease.

2.6.12.1 Infectious Diseases

Emergency department waiting rooms holding visitors and who are waiting for emergency care shall be provided with minimum air changes per hour per current requirements from VA Task Force on Transmission of Mycobacterium Tuberculosis. Refer to TB criteria in HVAC Design Manual for Hospital Projects, and the latest edition of the CDC Guidelines for Preventing the Transmission of Mycobacterium Tuberculosis in Healthcare Settings.

The COVID pandemic has heightened awareness for the need for proper air distribution and air changes as essential to protect all Veterans, visitors, and healthcare workers from airborne contagious diseases.

2.6.12.2 Floor Mounted Appurtenances/Conduit in Patient Care Areas

Within imaging rooms and patient care areas, floor-mounted cables, conduits, wire duct, and raceways represent both tripping hazards and obstacles to comprehensive cleaning. Project-provided conduit and cable management (apart from cable management provided by imaging equipment manufacturer) will be designed to facilitate comprehensive cleaning within patient care areas.

2.6.13 Security

2.6.13.1 Security and Access Control

All security systems including, but not limited to, video surveillance, access control, duress, intrusion detection devices shall be connected to the facility wide security management system. The system shall be on its own network and shall not be connected to VA WAN/LAN. All security and access control systems shall be coordinated with requirements from the VA Physical Security and Resiliency Design Manual, security doors and hardware requirements (section 5.5 Emergency Department, chapter 10 Security Systems, and Appendices A and B).

2.6.14 Sustainable Design

Comply with requirements shown in current edition of the VA Sustainable Design Manual.
2.6.15 Safe Patient Handling and Mobility

Injuries of workers associated with manually moving patients is one of the largest sources of healthcare occupational injury. Where practical, room templates include enough space to facilitate safer patient transfers. Additionally, most of the exam/treatment rooms are shown with ceiling-mounted patient lift systems. Consult VHA Directive 1611, Safe Patient Handling and Mobility Program, for program standards.


All overhead lifts installed must have a VHA Installation and Relocation Checklist for Ceiling Mounted Patient Lifts found at https://www.publichealth.va.gov/docs/employeehealth/installationRelocation.pdf, completed and supplied to the VA Medical Center.

2.7 Patient Type and Acuity Impact on Type of Treatment/Assessment Considerations

A survey at one larger VA ED provided information about the Veteran population that may be used to better anticipate, and guide staffing needs in VA EDs and communities where Veterans reside. The overall admission rate for the VA ED was 36%-significantly higher than that of the ED population nationally (13%). This percentage is partially explained by the large proportion of mental health illness, which surpassed all other diagnoses, including cardiac disease, and led to nearly one-fourth of all admissions. Such a high incidence of mental health patients has prompted this institution to have 24-hour mental health staff available. When these patients are removed from the data, VA admission percentage drops to 30%. However, this is still more than double the rate of the national ED population, suggesting that VA treats a sick patient population.

2.7.1 Women Veterans

Women veterans are the fastest growing sub-population in VHA. VA Emergency Departments are often the initial point of entry into VHA health care for women. Over 20% of women using VHA for care had at least one VA ED visit annually. It is imperative that women Veterans receive high-quality gender specific and gender-sensitive emergent care. Women present to VA EDs with non-gender-specific concerns such as acute infections, neurological, cardiac, respiratory, gastrointestinal, genitourinary, musculoskeletal as well as mental health and post-sexual assault care needs. Women also seek care in VA EDs with gender-specific concerns such as those related to pregnancy or the female reproductive tract and may present with acute pelvic pain, acute breast issues, vaginal bleeding, vaginitis, cervicitis, and pelvic inflammatory disease. Common procedures performed include point of care urine pregnancy testing, quantitative, serum
pregnancy testing, urinalysis, vaginitis and sexually transmitted infection testing, and transvaginal ultrasound.

### 2.7.1.1 GYN Patient Exam/Treatment

See section 2.5.7.8 for further information on this room.

### 2.7.1.2 General Exam/Treatment

All E/T rooms should be capable of serving all Veterans. For a room to be flexible, to serve both sexes, it needs to meet privacy requirements including exam tables/gurney with footrest/knee crutch. Include curtains that provide privacy of the patient at the exam table/gurney.

### 2.7.2 Mental Health

See sections 2.4.1.6 and 2.4.2.1 for further information on mental health needs in the ED. Through thoughtful and well-planned designs, it is possible to make a safe and healing environment for these patients.

#### 2.7.2.1 Assessment

Mental health patients are not always immediately identified as such upon entering the ED. Most are sent through the same assessment process as any other patient. If a patient exhibits violent or threatening behavior, then they will bypass triage and be taken immediately to a mental health E/T room, or the intervention room for evaluation.

#### 2.7.2.2 Intake Process, Walk-ins vs. Ambulance/Police

The mental health (MH) processes are developed for maximum safety for patients and staff. The intent is to rapidly place the patient in the most supportive and appropriate location for an initial interview, assessment, and/or treatment. Based on the size of ED and location (if applicable) of the mental health room(s), the initial assessment may be completed at triage, if deemed safe and appropriate by medical personnel. Another location for initial assessment or de-escalation of the patient may include the Mental Health Intervention Room. This is where seriously, agitated, or intoxicated patients may be taken immediately on arrival for rapid evaluation. If available, a MH exam/treatment room may be the best location for initial assessment, evaluation, and treatment.

#### 2.7.2.3 Integrated vs. Segregated Exam/Treatment Areas

Most VA EDs will only have a need for 1 to 3 mental health E/T rooms, and it is recommended these rooms be integrated into the rest of the ED treatment rooms. Once an ED has four or more mental health E/T rooms then it is recommended it be made into a segregated unit. It should still maintain a visual connection with the main ED central work area to provide backup help if needed in a crisis situation. Must have a security presence with immediate access into this mental health module.
2.7.2.4 Mental Health Intervention Room

See section 2.5.7.10 for further information on this room.

2.7.2.5 Mental Health Exam/Treatment Room and Mental Health Patient Toilet

See section 2.5.7.9 for further information on this room. There is one Mental Health Patient Toilet for each four Mental Health E/T Rooms. This toilet room would be entered off the ED corridor and not directly from an E/T or intervention room. Some type of direct visual observation needs to be provided into this toilet because of high incidence of self-harm to these patients.

2.7.3 Geriatric Veterans

The volume of Veterans seen in the Emergency Department is increasingly older. Design of the ED must accommodate some of the changes that commonly occur as we get older - not in everyone and to varying degrees, but more commonly especially after age 70. Often adaptations help with the interaction that occurs between changes in vision, hearing and speed or accuracy of cognitive processing.

2.7.3.1 Vision Changes

Vision does change with age. The lens thickens and generally becomes less clear as well as less elastic leading to difficulty accommodating (presbyopia). Thickening and yellowing influence color perception. The pupil gets smaller while changes in the cornea often cause light scatter and sensitivity to glare.

The pupil becomes smaller so there is a decrease in peripheral vision - things to the side may be missed unless intentionally looked for or the person may not see someone coming from the side until they are much closer within their peripheral vision. The pupil does not acclimate as well and does so more slowly than in a younger person, especially when moving from a dark to light or light to a dark setting (going back outside or coming inside). Time may be needed to allow for this transition.

Changes in color perception alter depth perception and contrast sensitivity which can confuse seeing the change in levels in a floor, or steps. These color vision changes, also influenced by changes in the opacity of the lens, often make blues, and greens more difficult to differentiate than contrasting colors like reds, oranges. Contrast is, of course, most needed when you do need to have people see the contrasts for safety – not that everything needs to be high contrast. But having contrasts when there is a desire to clearly demark a direction or identify a change in levels or other safety hazard is important to consider.

- Lighting: As people age the pupil gets smaller while changes in the cornea often cause light scatter and sensitivity to glare.
- Glare: There is the need to have more light but set in a way that minimizes glare – so adjustable/ dimmer switches can be useful.
• Type of light: Of note, sometimes use of a red light at night make it easier to see than a white night light. Because the pupil does not accommodate as rapidly as a younger person, older adults take longer to adjust when moving from light to dark or vice versa – so heading out the door from a darker location may take some adjustment.

• Wayfinding: In terms of wayfinding, below is from an article called “Improving Wayfinding for Older Users with Selective Attention Deficits” that provides some ideas for consideration to making wayfinding easier.

The design team should consider assistive technology for patients that have vision challenges.

Table 1.
Wayfinding Signage Design Principles to Compensate for Declines in Selective Attention

<table>
<thead>
<tr>
<th>Principle</th>
<th>Definition</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Distinctiveness</td>
<td>Signs should be easy to pick out from the surrounding environment and easy to distinguish from conceptually different signage.</td>
<td>A blue triangular sign along a street with brown buildings and square windows would differ from the environment in more than one way: color (blue instead of brown) and shape (triangular instead of square).</td>
</tr>
<tr>
<td>Consistency</td>
<td>Features and placement of related signs should remain consistent, and standardized images should be used when they are available.</td>
<td>If all of the wayfinding signs in a building are brown with white sans serif lettering, people who have seen one sign will know to look for another brown sign with white sans serif lettering.</td>
</tr>
<tr>
<td>Simplicity</td>
<td>Signs should contain only three to four units of wayfinding information and minimal extraneous information.</td>
<td>If a sign in a three-wing building provides only general information, such as “West Wing This Way,” for destination in other wings, it can reduce the amount of information in any one sign. Keeping advertisements and wayfinding signs separate will also reduce the amount of irrelevant information on the wayfinding signs.</td>
</tr>
<tr>
<td>Isolation</td>
<td>Signs should be placed in locations that have little other information.</td>
<td>If advertising signs and wall decorations are kept out of a roughly eye-level zone on the walls, wayfinding signs can be isolated within that zone.</td>
</tr>
<tr>
<td>Reassurance</td>
<td>Additional signs should be placed along a route to reassure users that they are still on the correct route.</td>
<td>If a sign is placed halfway down a long hallway with the upcoming locations on it, it can reassure and remind users of their route and the appearance of further signage.</td>
</tr>
</tbody>
</table>
2.7.3.2 Auditory Changes

The changes that occur in hearing as we get older do not just decrease but rather muffle and distort the reception of sound. That is because we become less sensitive to high frequency sounds and consonants tend to be high frequency while vowels tend to be in the lower frequency range. Consonants give words meaning so it’s common for individuals to say, “I hear you, but I don’t understand what you are saying” or “you’re mumbling”. This is especially true when background noise is present, or rooms that reverberate, like many hard walls or rooms with high ceilings do.

Having rooms set up so the speaker does not have to turn away from the person – like to use a computer; have the speaker with the light on their own face so the individual can see facial expressions and read lips. In an environment where face masks are required then other strategies are needed like:

- white boards for writing things down; tablets that could be used for captioning. Considering a room that contains an induction loop for use with t-coils for persons who have t-coils in their hearing aids or have a pocket talker with a t-coil.
- pocket talkers or voice to text apps if allowed in the setting.
- In large reception rooms, having a strategy to call a person’s name – such as a vibrating ring that they receive when checking in – could be useful.

The design team should consider assistive technology for patients that have listening challenges.

2.7.4 Emergency Imaging Design Considerations

The Emergency Imaging functional area is an essential component of diagnosing patients’ conditions in the ED. Depending on the size of a hospital and its ED this imaging area may be shared with the Radiology Department. If it is shared it should be in very close proximity to the ED to be effective. Reference the latest edition of the VA Imaging Services Design Guide for additional details regarding each imaging room type. All ED imaging rooms are to be class 2. Investigate shielding requirements for each room containing imaging equipment.

2.7.4.1 Class 2 General Radiology

Medical imaging which uses X-rays to produce a planar image of the inside of the body. Today it is performed digitally and uses x-ray–sensitive plates to directly capture data during the patient examination and is immediately transferred to a computer system without the use of an intermediate cassette. This Class 2 imaging modality is a critical
diagnostic tool in the ED to allow providers a better understanding of their patient’s conditions.

2.7.4.2 Class 1 Ultrasound

Diagnostic ultrasound, also called sonography or diagnostic medical sonography, is an imaging method that uses high-frequency sound waves to produce images of structures within your body. This imaging technique primarily utilizes small portable equipment that may be moved into each E/T room. In larger ED’s it is practical to have a Class 1 Ultrasound room for low acuity diagnostic testing.

2.7.4.3 Class 2 Computed Tomography (CT)

A CT scan, or computed tomography scan is a medical imaging procedure that uses computer-processed combinations of many X-ray measurements taken from different angles to produce cross-sectional (tomographic) images (virtual "slices") of specific areas of a scanned patient, allowing the user to see inside the patient. This Class 2 imaging modality is a critical diagnostic tool in the ED to allow providers a better understanding of their patient’s conditions.

2.8 Equipment

The Emergency Department equipment should be selected, placed and function with a focus on quick and efficient patient diagnosis and treatment. Items within the rooms should be consistently placed and configured to maximize ease of use and management of the equipment. Placement of rooms, imaging systems, and department equipment storage locations should be located to minimize staff travel distances.

Long-range focused: with difficulty to shut down and upgrade the department, extra attention should be given to incorporating the latest technologies and efficiency opportunities.

Pneumatic Tube System: A pneumatic tube station should be considered to provide an efficient means of delivering medications and labs to and from the emergency department and main lab.

Nurse Supply Carts: supplies are typically stocked from the clean supply. Recommend carts be removable/interchangeable from exam/treatment rooms to permit easier stocking either at clean supply or add stocking cart in clean supply to assist in the distribution of supplies.

2.9 Waste Management

Medical Waste: Medical waste is generated in medical triage, exam/treatment rooms, and resuscitation rooms where it is bagged, collected, and transported using specially designated, closed containers to the soiled utility rooms. The waste is held there until it is transported via the loading dock to the medical waste handling facility.

General Waste: General waste is generated in all spaces and is held in waste containers for collection either in a trash receptacle within the treatment room, or bulk storage in the soiled utility closet. It is then collected by cart and transported via the loading dock to the waste handling facility.
Recycling: Means of sorting, collecting, transporting, and disposing of recyclable material should be analyzed by locality and modified to suit local conditions and practices.

Product types used in the building: disposable vs. recycled products should be discussed as it is an important design consideration in alternatives that impacts physical space for waste disposal volumes.

Refer to the NEPA Interim Guidance for Projects located at www.cfm.va.gov/environmental/NEPAGuidance.pdf for more information regarding recycling requirements.

Soiled Linen: Reusable soiled linens are generated in exam/treatment rooms, and resuscitation rooms. They should be collected in carts or hampers in the soiled utility rooms and transported to a soiled linen holding room near the loading dock for pick-up. Medical exam rooms may opt to use disposable paper products in which case, they would be discarded after each use.
3.0 Functional Diagrams

3.1 General

The functional diagrams in the following section show general adjacencies for the overall Emergency Department, along with workflow diagrams for the major Emergency Department components. These diagrams define various key Emergency Department patient and staff flow patterns, and considerations for visibility for better security and control.

Diagrams are not to scale and should not be considered physical designs. Room quantities are not defined, as that information is developed in the project’s Program For Design (PFD). Refer to Emergency Department Space Planning Criteria PG-18-9 Chapter 256 for a cross-reference to the functional areas and room names used in this section.

Each facility will be unique with varying staff and spatial needs. As such, the various adjacency and workflow diagrams in this section are not meant to be a prescriptive, all-encompassing template. They are intended to give the design team a starting point to base future discussions with the Emergency Department team and develop an appropriate concept to carry forward into the design process.

3.2 Emergency Department Functional Areas

The Emergency Department is made up of 11 different Functional Areas as listed below:

1. Exam/Treatment Room Calculation
2. Reception/Public Area
3. Security/Police Area
4. Patient Assessment Area
5. Patient Area
6. Staff Work Area
7. Emergency Imaging Area
8. Ambulance/EMS Area
9. Support Area
10. Staff and Administrative Area
11. Education Area

The first functional area is used to calculate the mixture of different types of exam/treatment (E/T) Rooms. The following initial functional diagrams will focus on relationships, adjacencies, lines of sight, and patient and staff flow of specific areas within an Emergency Department.
3.2.1 Reception/Public Areas and Security/Police Areas

The Emergency Department is often the front door to the medical center for many patients. Making the planning and design of this area critical to Veteran’s experience and long-term impressions of their care. Having access to natural light in waiting areas is important to patients and visitors to maintain circadian rhythm and increase their wellbeing in a very stressful environment.

ED Key Plan

The Walk-In vestibule to ED should be from both the exterior/auto drop-off area and the Medical Center lobby (if adjacent or near the ED). If metal detectors are implemented, then a queuing area will need to be adjacent to the Walk-In Vestibule. The Security Station, or Security Room is positioned to control/visualize:

- Automobile drop-off area
- Walk In Vestibule and queuing area
- ED general waiting
- Public toilets
- First Look Station
- Pre-assessment staging area
- EMS entry (potentially via cameras in larger EDs)
The Security Station should be positioned to allow “back door” exit to access a corridor to the main ED without traveling through the General Waiting area. There should be a clear and direct path from the entry/metal detectors to the First Look reception area (without walking through General Waiting).

First Look should have an escape path back into the ED in the event of dangerous situation. Pre-assessment seats should be separate from General Waiting area, and in a direct line of sight to the First Look desk. Discharge area should have ability to exit patients through ED waiting (to pick up family members) or access lower controlled access corridor as separate patient exit.
3.2.2 Patient Assessment Area

Provide a direct access path back into ED for high acuity patients needing immediate life-saving interventions. A direct path should be created that allows patients to be immediately escorted from First Look, or triage rooms, to decontamination facilities. Triage rooms should be “flow through” with accessibility from General Waiting with separate “back door” for flow to main ED care areas.

ED Key Plan

See functional diagram on page 3-5. First Look should have an escape path back into the ED in the event of dangerous situation. In medium and large EDs, a direct access path should be developed from patient assessment area to mental health area/rooms. Direct access to PPE, patient toilet/shower and support spaces. In smaller EDs these components may be shared with main ED care area(s). While a Patient Belongings Room is defined near the mental health rooms in a subsequent diagram, some VA’s have preferred a Patient Belongings Room in the patient assessment area also.
Open work/charting area should be available with visual control of triage rooms and access paths back into ED. In smaller EDs the work/charting area may be the central ED staff workstation. A wheelchair scale should be accessible. Direct access from patient assessment area to internal ED patient waiting and point of care testing should be considered.

Visual supervision of internal ED patient waiting area is required from triage workstation area or from internal ED staff workstation. Patient discharge functions and ED consult rooms should be placed near the patient discharge path and made accessible from assessment area for flexibility to use spaces as disaster/overflow triage/assessment spaces.
3.2.3 Fast-Track Patient Area

Fast-Track should be an area that can flex with the main emergency department care area. Fast-Track should be considered in an area close to the upfront assessment area allowing rapid turnaround for non-urgent patients. An internal ED patient accessible waiting area should be near fast track to allow non-urgent patients to await testing results (thus freeing-up exam rooms) – this space should be visible to staff work areas to maintain visual control of patients/families.

ED Key Plan

A patient toilet that supports the fast-track area or the main ED should be near the internal ED patient waiting area. Care spaces allocated to the main ED clinical area that should be in proximity to the fast-track area includes the Eye/ENT Treatment Room, GYN Patient E/T Room, and the Orthopedic Treatment Room allowing access for patients from the fast-track area if necessary.
Consideration should be given to placing an Airborne Infection Isolation (AII) Room (that is in the main ED) near fast-track in case of relocation to an AII Room is deemed necessary.

A separate exit path for discharged patients should be considered, if possible, to avoid the discharged patients passing the arriving patients.
3.2.4 Ambulance/EMS and Decontamination Areas

Emergency Medical Services (EMS) Vestibule should be separated from Decontamination Shower entry point to avoid contaminating EMS entry point. Decontamination Shower should be positioned to allow for exterior and interior access. On the interior side, staff should be able to see into the Decontamination Shower via a window and be able to communicate with staff inside the shower. Refer to VA Physical Security and Resiliency Design Manual, security doors and hardware requirements (section 5.5 Emergency Department). Decontamination Storage should also be accessible from inside and outside the facility.

Consideration should be given to how a main ED staff work area can be positioned to allow for visual control of the EMS Vestibule. EMS entry point should have direct access to wheelchair and stretcher storage, EMS Staff Workstation, EMS Supply Room, and EMS Staff Toilet. EMS Staff Workstation should be positioned to maintain a view of ambulances. EMS crews may have exterior access to EMS Drop-off Storage Room for backboards, etc.
Direct access should be considered to Resuscitation Room(s). EMS staging bays must have direct supervision from the main ED Staff Workstation. EMS staging may be combined with outbound patient staging area.

EMS entry path should have direct access to the Mental health room(s) location. A “dangerous patient” Mental Health Intervention Room and Mental Health Patient Toilet should be accessible from the EMS entry point. These spaces can also support a search function for arriving mental health patients.
3.2.5 Resuscitation and Bariatric Area

The Resuscitation Rooms should have direct accessibility from the EMS/ambulance Entry. Central staff work areas should have direct visual control of the Resuscitation Rooms. A Medication Room should be placed near the Resuscitation Rooms allowing staff to rapidly access medications.

See functional diagram on page 3-11. Resuscitation Storage Room should be adjacent to the Resuscitation Room. Consideration should be given to access this storage room from inside the Resuscitation Room and from the main corridor allowing staff to access this storage room even while resuscitation is taking place.
Placement of the large Bariatric Patient Exam/Treatment Room(s) should be considered near to the Resuscitation Room allowing it to be utilized as overflow resuscitation. It is recommended that the Bariatric Patient Toilet be accessed from the main corridor to allow greater use of the toilet facilities. If considered, a Simulation/Resuscitation Viewing Room should be located adjacent to one side of the Resuscitation Room, for direct visual observation and training.
3.2.6 Larger ED Mental Health Area

Once an Emergency Department requires four or more Mental Health Exam/Treatment Rooms then it is recommended it become a separate module, but connected to the main ED. This diagram depicts this as a separate module. Direct access from the front assessment area to the Mental Health (MH) Sally port is a priority. MH Sally port should have direct access to a MH Private Search Room. Patient Belongings Storage should be near or adjacent to the Sally port and MH Private Search Room. Toilet/shower should be in the proximity of ED Mental Health Intervention Room or within a secured ED mental health unit.

ED Key Plan

See functional diagram on page 3-13. There should also be direct access to the mental health area from the EMS entrance for EMS crews and police. If a violent/dangerous patient Mental Health Intervention Room is provided near the EMS entry, this same space can be used to search MH patients arriving via ambulance or police. Consideration should be given to the ability to close off doors in corridors to isolate the mental health area from the main ED to reduce noise or even lock doors to make the unit secure (see heavy dotted line).
A key priority is to maintain a visual connection from the MH work area to adjacent ED staff work areas (nurse stations) in an adjacent care area. The intent is that no staff are isolated in the MH area without visual connection to other team members. There should be no “dead-end” corridors. Escape paths for staff need to be considered if the area will be “locked-down”. Consider escape paths from the main work area to outside the unit. Support areas (clean, soiled, etc.) should be secured access and must include escape paths with a second exit door out the backside of support spaces, so no staff is trapped in the support areas.
3.2.7 Emergency Imaging Area

This area may be part of the main hospital Imaging Services if it is immediately adjacent to the Emergency Department and in a smaller ED. In a medium to large ED, Imaging Areas will be dedicated to the Emergency Department. Gowned Imaging Patient Waiting should be on the edge of the imaging area closest to the initial assessment area and fast-track care area. The patient dressing area should be adjacent to the Gowned Imaging Patient Waiting area and have access to an ED Imaging Toilet Room. Toilet(s) should be placed for access from imaging and CT Scanning Rooms.

ED Key Plan

See functional diagram on page 3-15. Consider how Medical Center inpatients may have to access the imaging area without going through the clinical area(s) of the ED. The design shall separate the lower acuity patients access to the imaging rooms, and the high acuity patients that are accessing the CT room. CT and radiology imaging rooms should be near each other since higher acuity patients may need both radiology and CT scans.
The imaging work area should have direct access to the Radiology Control Room(s), CT Control Room, Ultrasound Room, and all supply and PPE alcoves. The Ultrasound Scanning Room should have immediate access to an Ultrasound Toilet and Ultrasound Clean-up room. Consideration should be given to a pathway allowing imaging staff to leave the central Imaging Work Area to access the main ED. Orthopedic Treatment Room in the main ED should be near the imaging area.
3.3 Functional Adjacencies

The following functional adjacency diagrams define different types of planning and design concepts. Each diagram offers an important consideration on best practices in ED design. Coordinate with Physical Security and Resiliency Design Manual adjacency requirements (section 5.5 Emergency Department).

3.3.1 Inter-Department Hospital Adjacencies

Exterior walk-in access points for public/patient may be via direct Walk-In Vestibule to ED or through Main Hospital Lobby (in older hospitals). Access to Decontamination Facilities should be between EMS and Walk-In entrances for rapid access from both entry points. On this diagram, and all other diagrams, the location of the decontamination shower may be an internal shower “room” or an outdoor decontamination “station,” based on preference.

Direct access to Diagnostic Imaging is a priority and may include Emergency Imaging components within the ED. Access to Clinical/Inpatient and Support Services may include vertical transportation (elevators). Access to/from Pharmacy (for meds) and Laboratory (regarding specimen delivery) may be through a pneumatic tube system.
Support services include staff access to/from materials management, transport, security, information systems, food service, facilities/engineering, admitting, medical records, environmental services, administration, clergy, etc. The Medical Center may not include an observation unit or “Observation” status patients may remain in the ED.

### 3.3.2 Overall ED Intra-Departmental Adjacencies

The reception/public area and patient assessment area should be adjacent to each other. Security/police should have visual control over the public area and the assessment area with direct access back to the patient area(s). Decontamination facilities should be accessible from the walk-in, EMS entrance, and the assessment area.

Staff work areas will be split into areas specific to immediate patient care in the center of the patient area (staff work area A) and support spaces on the perimeter of the department (staff work area B) with a closer relationship to the staff and administrative area and the educational area.

Direct access to diagnostic imaging is a priority and may include emergency imaging components within the ED or within proximity of the ED. The preference is to have the observation unit (if applicable) adjacent to the main patient area.
3.3.3 Overall Patient Care Areas (Small ED)

Patient assessment needs direct access/circulation to fast-track, main ED, and mental health. Fast-track and mental health should be able to flex with main ED exam/treatment spaces. Mental health (exam/treatment or separate unit) positioned between walk-in/assessment area and EMS entry to allow immediate access for escorted patients without traveling through other care areas.

Resuscitation is centralized so staff can be pulled from any location of ED. Imaging may be located outside of the department in the hospital Imaging department. All staff, administrative, and education support spaces could be located away from ED.
3.3.4 Overall Patient Care Areas (Large ED)

Patient assessment needs direct access/circulation to fast-track, main ED, and mental health. Patient assessment and fast-track can flex to become a single “triage/rapid-care” area. Fast-track and mental health should be able to flex with main ED treatment spaces.

Mental health (exam / treatment or separate unit) positioned between walk-in/assessment area and EMS entry to allow immediate access for escorted patients without traveling through other care areas. EMS entry, resuscitation, and emergency imaging Area all central to main ED allowing areas to be immediately accessible to/from all parts of ED. Even in the middle of the night if beds furthest from assessment area are closed or not staffed.

Imaging location allows immediate access from fast-track to limit the mix of lower acuity patients and higher acuity patients coming from main ED/resuscitation. Imaging is placed on the perimeter of the department to allow the use of space by hospital inpatients in the middle of the night. An observation unit (if applicable) should be flexible with main ED.
3.3.5 Pandemic Circulation Concept (Medium and Large ED)

While flexibility and visibility between care modules, and across the entire ED is a priority, larger EDs should have the capability to “isolate” various care modules in the event of treating contagious or contaminated patients. Visibility can be maintained with glass walls between care zone work areas and cross-corridor doors that can be shut to isolate a care module.

The main circulation corridor concept provides a circulation path that allows patients to come from the assessment area and circulate to any care module without traversing through other care modules. The main corridor also allows patients to come from any care module, access imaging, and return to their care module without traversing through other care modules.

Main circulation corridor also allows patients to access the main hospital without traversing through other care modules. Airborne Infection Isolation Rooms (noted with A on diagrams) should be considered at the access points of each module that may be isolated in the future.
3.3.6 Flexible Patient Clinical Modules (Medium and Large ED)

Central staff work areas should allow for 360-degree visibility around/across the clinical area. Support spaces with “hard walls” that block visibility should be placed on the perimeter to avoid impacting visual control across the care module. These support spaces would include such rooms as Toilets; Medical Supply Rooms; Clean Utility; Soiled Utility; Equipment Rooms; Trash Rooms; and HAC Closets.

ED Key Plan
Central staff work areas shall incorporate components that will not block visibility such as: open, or glassed-in, clinical Staff Work Areas; glassed-in Consultant Provider Workstations; Equipment and cart alcoves with low-height walls; Wheelchair/Stretcher/Lift Parking alcoves; and glassed-in Medication Rooms.

Staff work areas in a care module should not be isolated from other care areas and should have visibility to adjacent staff work areas in other care modules. Isolation rooms and internal ED waiting areas should be located on the side of the care module closest to the upfront assessment area or just off the main circulation corridor to allow for immediate access within a care module.
3.4 Scalable Emergency Department Size

Every VAMC is different in size and types of patients seen. This Design Guide is showing three emergency department diagrams that represent a cross section of VA EDs. Each project will determine the proper number of annual encounters planned for a given VAMC. A Program for Design (PFD) will be produced from VA Space and Equipment Planning System (SEPS) by the project team based on this data plus other data inputs.

These diagrams define various key emergency department functional adjacencies, important patient/staff flow patterns, and considerations for visibility for better security/control. These planning diagrams are not a design for an actual project. Diagrams are not to scale. Refer to Emergency Department Space Planning Criteria PG-18-9 Chapter 256 for a cross-reference to the functional areas and room names used in this section.

3.4.1 Small ED

The diagrams on the next two pages represents a small ED in VA context. Only 39% of VA EDs are at 16 E/T rooms or smaller as of 2019 statistics. This diagram is for 12 exam/treatment rooms as calculated using clinic stop/encounters. This size of ED is planned for up to 12,612 annual encounters. When factoring all other programmed treatment spaces, it includes 16 total treatment spaces plus 1 holding bay. So up to 17 patients could be seen at full capacity.
12 ED E/T Rooms - Small ED
3.4.2 Medium ED

The diagrams on the next two pages represent a medium ED in VA context. 47% of VA EDs are at 17 to 28 E/T rooms as of 2019 statistics. This diagram is for 24 exam/treatment rooms as calculated using clinic stop/encounters. This size of ED is planned for up to 25,224 annual encounters. When factoring all other programmed treatment spaces, it includes 28 total treatment spaces plus 2 holding bays. So up to 30 patients could be seen at full capacity.
24 ED E/T Rooms - Medium ED

- Reception/Public Area
- Patient Assessment
- Ambulance, EMS
- Security
- Emergency Imaging Area
- Staff, Admin., and Education Area
- Patient Area, Staff Work Areas and Support Areas
- EMS Garage
- EMS
- Walk In

Connection to Main Hospital

To Hosp
3.4.3 Large ED

The diagrams on the next two pages represent a large ED in VA context. Only 14% of VA EDs are at 29 E/T rooms or larger as of 2019 statistics. This diagram is for 32 exam/treatment rooms as calculated using clinic stop/encounters. This size of ED is planned for up to 33,632 annual encounters. When factoring all other programmed treatment spaces, it includes 39 total treatment spaces plus 3 holding bays. So up to 42 patients could be seen at full capacity.
32 ED E/T Rooms - Large ED

- Reception/Public Area
- Patient Assessment
- Patient Area, Staff Work Areas, and Support Areas
- Emerg Imaging Area
- Staff, Administration, and Education Area
4.0 Room Templates

4.1 General

4.1.1 Introduction

The Room Templates included in this Design Guide are intended as general representations of typical furniture and equipment layouts, space configurations, and functional and utility support needs. The room template reflected ceiling plans are a representation of HVAC diffusers/grilles, sprinklers, lighting, patient lifts, and other ceiling-mounted equipment locations.

The room templates were developed as a design tool to assist the project team in understanding the choices to be made during design, and to assist designers in understanding VA’s space and functional requirements for Emergency Departments. The room templates are not intended to be project specific and are not meant to limit design opportunities. However, the indicated net square feet (NSF) is the minimum acceptable square feet for a given room.

While these room templates provide information on a selection of Emergency Department spaces, it is not possible to foresee all potential variations or future requirements. A project-specific space program shall be used as the basis for individual project design. These room templates are intended to be reviewed against project-specific criteria and any identified special requirements. Designers are tasked with reviewing the latest guidance on healing environments and Emergency Department industry trends and interviewing the project stakeholders for feedback on the goals, intents, and requirements for any specific project.

As equipment requirements and technologies are continually evolving, equipment manufacturers shall be consulted for the most current specifications, including actual dimensions, weights, clearances, and utility requirements. Refer to all floor plans, reflected ceiling plans, elevations, and equipment lists to get the full range of requirements. The JSN numbers listed on the plans may not reflect all equipment to be provided for the space and should be reviewed against Emergency Department Equipment Guide List PG-18-5 and confirmed with project stakeholders.

Refer to Emergency Department Space Planning Criteria PG-18-9 Chapter 256 for a cross reference to the room names and room codes used in this section.

4.1.2 Disclaimer

Room templates are graphical representations of selected room types that illustrate VA planning requirements for space, room contents, and room specific engineering systems. They provide typical configurations, planning criteria, and general technical guidance, and are not intended to be project specific requirements. Equipment not tagged in plan will be tagged in elevation or reflected ceiling plan.
PROJECT REVIT VERSION: 2020

DISCLAIMER:

ROOM TEMPLATES ARE A CRITICAL COMPONENT TO VA TECHNICAL INFORMATION LIBRARY (TIL) WHICH PROVIDES STANDARDS FOR ALL VA PLANNING, DESIGN, AND CONSTRUCTION PROJECTS. ROOM TEMPLATES ARE DEPARTMENT AND ROOM ALIGNED CRITERIA DESCRIBING SPACE, ROOM CONTENTS, AND OTHER TECHNICAL REQUIREMENTS FOR THE DEVELOPMENT OF VA PROJECTS. ROOM TEMPLATES COMMUNICATE THE BASIS OF DESIGN (BOD) AND ARE REQUIRED TO BE UTILIZED BY PROJECT TEAMS WORKING ON NEW CONSTRUCTION AND RENOVATIONS OF EXISTING FACILITIES. THE MATERIAL CONTAINED IN THE ROOM TEMPLATE CONSTITUTES A STANDARD FOR VA PLANNING, DESIGN, AND CONSTRUCTION. ANY SUBSTANTIAL VARIANCE FROM STANDARDS SHALL BE CONSIDERED ONLY AS REQUIRED TO ACCOMMODATE SPECIFIC SITE, FUNCTIONAL, AND OPERATIONAL CONDITIONS. EACH SUBSTANTIAL VARIANCE SHALL HAVE A BASIS OF RATIONALE AND BE DOCUMENTED IN THE PROJECT RECORD.

CLINICIANS, PROVIDERS, PRIMARY USERS, AND OTHER STAKEHOLDERS SHALL BE INVOLVED IN PROJECT SPECIFIC DEVELOPMENT OF ROOM TEMPLATES AND BIM TEST-FITS TO BEST ADAPT STANDARDS FOR SPECIFIC FUNCTIONAL, OPERATIONAL, AND SITE CONDITIONS AND TO PROVIDE OPTIMUM SERVICES ENVIRONMENTS FOR VETERANS. STAKEHOLDER INVOLVEMENT AND REQUIREMENTS SHALL BE DOCUMENTED IN THE PROJECT RECORD.

ROOM TEMPLATES ARE NOT PROJECT-SPECIFIC. SITE SPECIFIC ISSUES MUST BE ADDRESSED WITH THE CONTEXT OF VA STANDARDS AND APPLIED TO EACH INDIVIDUAL PROJECT. USE OF THIS ROOM TEMPLATE DOES NOT PRECLUDE THE NEED FOR, NOR ABSOLVE PLANNERS, DESIGNERS, AND CONSTRUCTORS OF THEIR RESPONSIBILITY TO PROVIDE COMPLETE, FUNCTIONAL, SAFE, AND SECURE DESIGNS SUITED TO THE UNIQUE REQUIREMENTS OF EACH PROJECT.

EQUIPMENT AND SYSTEMS ARE SHOWN IN AN ILLUSTRATIVE, PERFORMANCE-BASED FORMAT AND ARE NOT INTENDED TO DEPICT, SUGGEST, OR OTHERWISE CONSTITUTE ENDORSEMENT OF ANY SPECIFIC PRODUCT OR MANUFACTURER. MANUFACTURERS SHOULD BE CONSULTED FOR ACTUAL DIMENSIONS, CONFIGURATIONS, AND UTILITY REQUIREMENTS. NOT ALL EQUIPMENT MAY BE LABELED IN PLAN VIEWS; REFER ALL DRAWINGS FOR COMPLETE EQUIPMENT NOTATION.

DISCLAIMER: ROOM TEMPLATES ARE GRAPHICAL REPRESENTATIONS OF SELECTED ROOM TYPES THAT ILLUSTRATE VA PLANNING REQUIREMENTS FOR SPACE, ROOM CONTENTS, AND ROOM SPECIFIC ENGINEERING SYSTEMS. THEY PROVIDE TYPICAL CONFIGURATIONS, PLANNING CRITERIA, AND GENERAL TECHNICAL GUIDANCE, AND ARE NOT INTENDED TO BE PROJECT SPECIFIC REQUIREMENTS.
4.2 Room Templates

4.2.1 Triage Room, ED (CED12)
4.2.2 Bariatric Triage Room, ED (CED13)
4.2.3 Eye/ENT Treatment Room, ED (CED16)
4.2.4 Orthopedic Treatment Room, ED (CED17)
4.2.5 General Exam/Treatment Room, ED (CED21)
4.2.6 Fast-Track Exam/Treatment Room, ED (CED22)
4.2.7 Bariatric Patient Exam/Treatment Room, ED (CED23)
4.2.8 GYN Exam/Treatment Room, ED (CED24) and ED GYN Patient Toilet/Shower, BLDG SPRT (SB171)
4.2.9 Mental Health Exam/Treatment Room, ED (CED25)
4.2.10 Mental Health Intervention Room, ED (CED26)
4.2.11 Airborne Infection Isolation (AII) Exam/Treatment Room, ED (CED27) with Airborne Infection Isolation Ante Room, ED (CED28) and Patient Toilet. ED (CED29)
4.2.12 Resuscitation Room, ED (CED31)
4.2.13 Point-of-Care (POC) Testing Alcove, ED (CED33)
4.2.14 Simulation/Resuscitation Viewing Room, ED (CED49)
4.2.15 Decontamination Shower, ED (CED52) and Decontamination Patient Changing Room, ED (CED53)
4.2.16 ED Security Station, POLICE SVC (SB851)
Emergency Department
TRIAGE ROOM, ED (CED12)
INTERACTIVE 3D PDF

DISCLAIMER: ROOM TEMPLATES ARE GRAPHICAL REPRESENTATIONS OF SELECTED ROOM TYPES THAT ILLUSTRATE VA PLANNING REQUIREMENTS FOR SPACE, ROOM CONTENTS, AND ROOM SPECIFIC ENGINEERING SYSTEMS. THEY PROVIDE TYPICAL CONFIGURATIONS, PLANNING CRITERIA, AND GENERAL TECHNICAL GUIDANCE, AND ARE NOT INTENDED TO BE PROJECT SPECIFIC REQUIREMENTS.
Triage Room, ED (CED12)

150 NSF
13.04 NSM

Disclaimer: Room templates are graphical representations of selected room types that illustrate VA planning requirements for space, room contents, and room specific engineering systems. They provide typical configurations, planning criteria, and general technical guidance, and are not intended to be project specific requirements.
Room Data: Triage Room, ED (CED12)

ARCHITECTURAL & INTERIOR DESIGN

Ceiling Finish: m: AT
Ceiling Height: 9’-0” (2700mm)
Wall Finish: m: GWB f: P
Wainscot: m: RWC h: 4’-0”
Base: m: RB h: 4” (100mm)
Floor Finish: m: LVT
Slab Depression: --
Sound Protection: STC 40
Doors: m: Alum t: dg: T s: V

Hardware Nr: N/A
Notes:
   1. Manual glass sliding doors must be able to break out of the room for exiting. See Section 08 32 13.

HVAC

Refer to HVAC Design Manual in accordance with project requirements. Refer to the current version of Chapter 6, “Mechanical Room Data Sheets” for room temperatures, humidity range, room air change requirements, noise level, pressurization, and other information.

PLUMBING AND MEDICAL GASES

Cold Water: Yes
Hot Water: Yes
Sanitary Drain: Yes
Medical Air: Minimum 1 outlet/station
Medical Vacuum: Minimum 1 outlet/station
Oxygen: Minimum 1 outlet/station

FIRE PROTECTION

Refer to Fire Protection Design Manual for guidance on fire suppression and fire alarm device type and placement in accordance with project requirements.

POWER

Refer to the latest VA Electrical Design Manual for general electrical requirements.

Normal Power: To be connected to selected receptacles and equipment.

Emergency Power: Critical branch of the EES (Essential Electrical System) to be connected to selected receptacles and equipment.

Notes:
   1. Coordinate electrical power requirements with specific vendor equipment.

LIGHTING

Refer to the latest VA Lighting Design Manual section 4.2.1 – Examination and Treatment Room for lighting design consideration.

COMMUNICATION/SPECIAL SYSTEMS

ADP: --
Data: Yes
Telephone: Yes
Intercom: --
Nurse Call: Yes
Public Address: --
Radio/Entertainment: As Required
MATV: --
CCTV: --
MID: --
Security/Duress: --
VTEL: --
VA Satellite TV: --
Count Down Clock: Yes
### Room Contents: Triage Room, ED (CED12)

<table>
<thead>
<tr>
<th>JSN</th>
<th>Content Name</th>
<th>Acq Code</th>
<th>Qty</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A1010</td>
<td>Telecommunication Outlet</td>
<td>VV</td>
<td>3</td>
<td>Telecommunication outlet location.</td>
</tr>
<tr>
<td>A1014</td>
<td>Telephone, Wall Mounted, 1 Line, With Speaker</td>
<td>VV</td>
<td>1</td>
<td>Telephone, wall mounted, 1 line, with speaker.</td>
</tr>
<tr>
<td>A1080</td>
<td>Mirror, Posture, Wall Mounted</td>
<td>CC</td>
<td>1</td>
<td>Wall mounted posture mirror. Consists of a 1/4” plate glass in a sturdy corrosion resistant frame with waterproof back. For educational and therapy programs.</td>
</tr>
<tr>
<td>A1110</td>
<td>Headwall, Prefabricated, General, 1-2 bed</td>
<td>CC</td>
<td>1</td>
<td>1-2 bed, general, prefabricated headwall. Unit consists of a patient service module for general care, single or double bed type. It contains lighting, medical gases, electrical outlets, nurse call and bed bumper. Specify number and type of medical gas and electrical outlets. Size of module will vary by type and configuration of outlets.</td>
</tr>
<tr>
<td>A5075</td>
<td>Dispenser, Soap, Disposable</td>
<td>VV</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, top filling, liquid soap dispenser. Dispenser features: corrosion-resistant valve, push-in type and operable with one hand; heavy duty hinge and key lock lid; and vandal resistant concealed mounting. Minimum capacity 40 fluid ounces. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5077</td>
<td>Dispenser, Hand Sanitizer, Hands-Free</td>
<td>VV</td>
<td>1</td>
<td>A touch free wall-mounted hand sanitizer dispenser. For use throughout a healthcare facility. Unit does not include the sanitizing liquid. Units are battery operated.</td>
</tr>
<tr>
<td>A5079</td>
<td>Dispenser, Disinfectant Wipes, Wall Mount</td>
<td>VV</td>
<td>1</td>
<td>Wall-Mounted, wire dispenser bracket for large sanitary cloth canisters, Labeled &quot;Not for use on skin&quot;</td>
</tr>
<tr>
<td>A5080</td>
<td>Dispenser, Paper Towel, SS, Surface Mounted</td>
<td>CC</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, single-fold, paper towel dispenser. Dispenser features: tumbler lock; front hinged at bottom; and refill indicator slot. Minimum capacity 400 single-fold paper towels. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5093</td>
<td>Emesis Bag, Wall, Adult</td>
<td>VV</td>
<td>1</td>
<td>Wall-mounted dispenser for emesis bags. Holds biodegradable containment bags and facilitates individual dispensing when needed</td>
</tr>
<tr>
<td>A5094</td>
<td>PPE / Mask-Holder, Wall-mount</td>
<td>VV</td>
<td>1</td>
<td>Wall-mounted personal protection organizer. Accommodates different glove sizes, mask boxes and isolation gowns</td>
</tr>
<tr>
<td>A5107</td>
<td>Dispenser, Glove, Surgical/Examination, Wall Mounted</td>
<td>VV</td>
<td>1</td>
<td>Examination three (Small, Medium, Large) glove dispenser box for wall mounting. Fabricated of either cold rolled steel with a white baked enamel finish, plastic, or acrylic. Hardware not included; Option 3 powder coated steel.</td>
</tr>
</tbody>
</table>
### Room Contents: Triage Room, ED (CED12) - Cont’d.

<table>
<thead>
<tr>
<th>JSN</th>
<th>Content Name</th>
<th>Acq Code</th>
<th>Qty</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A5108</td>
<td>Waste Disposal Unit, Sharps</td>
<td>VV</td>
<td>1</td>
<td>A container for collecting and transporting syringes and other sharps for decontamination and disposal. Available in 2 gallon and 8 gallon with locking rotor. Complies with OSHA regulations for handling sharps.</td>
</tr>
<tr>
<td>A5145</td>
<td>Hook, Garment, Double, SS, Surface Mounted</td>
<td>CC</td>
<td>2</td>
<td>A surface mounted, satin finish stainless steel, double garment hook. Equipped with a concealed mounting bracket that is secured to a concealed wall plate. For general purpose use throughout the facility to hang various items of apparel.</td>
</tr>
<tr>
<td>A5180</td>
<td>Track, Cubicle, Surface Mounted, With Curtain</td>
<td>VV</td>
<td>25</td>
<td>Surface mounted cubicle track, with curtain. Track constructed of thick extruded aluminum. Equipped with self-lubricating carriers, beaded drop chain hooks, and flame-resistant curtain. To include removable end caps. Designed to be suspended around patient areas where privacy is needed. Price listed is per foot of the track, curtains to be priced per quote.</td>
</tr>
<tr>
<td>E0945</td>
<td>Cart, Computer, Mobile</td>
<td>VV</td>
<td>1</td>
<td>A mobile computer cart for use throughout the facility. The cart dimensions will be approximately 45&quot; H x 30&quot; W x 22&quot; D with casters. May include drawers and miscellaneous other accessories that will be determined at time of purchase.</td>
</tr>
<tr>
<td>E0948</td>
<td>Cart, General Storage, Mobile, 42&quot; H x 32&quot; W, 22&quot; D</td>
<td>VV</td>
<td>1</td>
<td>This typical includes: 1 Cart Body, Style-A Narrow, w/Raised Edge Top; 2 Drawers, 3&quot; H; 4 Drawers, 6&quot; H; 1 Accessory Rail, Side; Drawer Organizer Bins</td>
</tr>
<tr>
<td>F0205</td>
<td>Chair, Side With Arms</td>
<td>VV</td>
<td>1</td>
<td>Upholstered side chair, 32&quot; high X 21&quot; wide X 23&quot; deep with arms, padded seats, and padded backs. Seat height is a minimum of 17&quot;. Available with or without sled base.</td>
</tr>
<tr>
<td>F2000</td>
<td>Basket, Wastepaper, Fire Resistant</td>
<td>VV</td>
<td>1</td>
<td>Wastepaper basket, fire resistant, approximately 40 quart capacity. This unit is used to collect and temporarily store small quantities of paper refuse in patient rooms, administrative areas, and nursing stations. Size and shape varies depending on the application and manufacturer selected.</td>
</tr>
<tr>
<td>F2010</td>
<td>Basket, Wastepaper, Step-On</td>
<td>VV</td>
<td>1</td>
<td>Step-on wastepaper basket with inner liner and foot pedal activated flip top.</td>
</tr>
<tr>
<td>F3200</td>
<td>Clock, Battery, 12&quot; Diameter</td>
<td>VV</td>
<td>1</td>
<td>Clock, 12&quot; diameter. Round surface, easy to read numbers with sweep second hand. Wall mounted unit for use when impractical to install a fully synchronized clock system. Battery operated, (batteries not included).</td>
</tr>
<tr>
<td>JSN</td>
<td>Content Name</td>
<td>Acq Code</td>
<td>Qty</td>
<td>Description</td>
</tr>
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<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>M0750</td>
<td>Flowmeter, Air, Connect w/50 PSI Supply</td>
<td>VV</td>
<td>1</td>
<td>Air flowmeter. Unit has a stainless-steel needle valve with clear flow tube for connection to 50 PSI air outlet from central pipeline system. Requires the appropriate adapter for connection to the wall outlet and fitting to connect to tubing. Database prices reflect fittings with an attached DISS power outlet. Other outlet and adapter configurations are available.</td>
</tr>
<tr>
<td>M0755</td>
<td>Flowmeter, Oxygen, Low Flow</td>
<td>VV</td>
<td>1</td>
<td>Oxygen flowmeter. Consists of a clear crystal flow tube calibrated to 3.5 or 8 LPM depending on manufacturer. For oxygen regulation in hospital settings. Database pricing includes DISS fitting and DISS power outlet and wall adapter. Other fitting and adapter configurations are available.</td>
</tr>
<tr>
<td>M0765</td>
<td>Regulator, Vacuum</td>
<td>VV</td>
<td>1</td>
<td>Vacuum pressure regulator for connection to central piped vacuum system. Standard display scale is graduated at least from 0 to 200 mm Hg of vacuum. Displays on specialized regulators may cover other vacuum ranges. Regulator type (continuous, intermittent, continuous/intermittent, surgical, pediatric, thoracic, etc.) as required. To be used in delivery, neonatal, pediatrics or any area where suction is required. Database pricing reflects continuous regulators graduated to 200 mm Hg with a full line vacuum selection switch and DISS configured inlets and outlets.</td>
</tr>
<tr>
<td>M3073</td>
<td>Container, Biohazard Waste, Step-on, Fire Safe</td>
<td>VV</td>
<td>2</td>
<td>A biohazard waste container with a step-on lid. The container will have a capacity of approximately 12 gallons and be made of a fire safe material.</td>
</tr>
<tr>
<td>M4020</td>
<td>Scale, Person Weighing, High Capacity</td>
<td>VV</td>
<td>1</td>
<td>High capacity, person weighing scale. Large digital readout displays weight in pounds, or kilograms. Handrails. Shall be supported by fixed heavy-duty legs in stationary position. Capacity up to 800 pounds. Optional equipment: battery pack with rechargeable batteries and built-in recharger. Designed to weigh large ambulatory patients.</td>
</tr>
<tr>
<td>M4200</td>
<td>Otoscope/Ophthalmoscope, Wall Mounted</td>
<td>VV</td>
<td>1</td>
<td>Wall mounted otoscope and ophthalmoscope. Includes 6 foot line cord and plug and accepts and includes two handles. Contains head turn-on/turn-off, built-in speculum tray and 8 foot coiled cords. Unit is designed for use in patient exam rooms.</td>
</tr>
<tr>
<td>M4653</td>
<td>Stretcher, Chair, Ophthalmic Surgical</td>
<td>VV</td>
<td>1</td>
<td>An eye surgery stretcher which adjusts from horizontal to a chair position. Stretcher has dual articulating headpiece for multiple ophthalmic surgical positioning; features dual hydraulic jacks, swing down side rails, oxygen holder, independently movable foot section, and IV receptacles. Minimum 400 pound weight capacity.</td>
</tr>
</tbody>
</table>
### Room Contents: Triage Room, ED (CED12) - Cont’d.

<table>
<thead>
<tr>
<th>JSN</th>
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<th>Acq Code</th>
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</tr>
</thead>
<tbody>
<tr>
<td>M7710</td>
<td>Electrocardiograph, 12 Lead</td>
<td>VV</td>
<td>1</td>
<td>Used to detect the electrical signals associated with cardiac activity, diagnose cardiac abnormalities, determine a patient’s response to drug therapy and reveal trends or changes in heart function. Capable of recording two or more leads simultaneously, recording an entire 12 lead ECG in about 10 seconds. Includes of a 3.5 inch, high density, floppy disk drive for test storage. Portable.</td>
</tr>
<tr>
<td>M7845</td>
<td>Monitor, Physiological, Bedside, 4 Channel, w/wall bracket</td>
<td>VV</td>
<td>1</td>
<td>4 channel bedside physiological monitor. The unit consist of a four-channel non-fade monochrome display monitor, an alarm system, and printer-recording capabilities. The monitor has color coded controls and automatic calibration. The unit displays up to four waveforms simultaneously. The parameters to be monitored are user selectable. The monitor may be connected to a central monitoring station. The unit monitors patients in most acute care areas, step-down units, procedure rooms and emergency rooms.</td>
</tr>
<tr>
<td>P3100</td>
<td>Lavatory, Vitreous China, Slab Type</td>
<td>CC</td>
<td>1</td>
<td>Wall mounted, slab type, vitreous china, lavatory (approximate bowl size 7”x15”x10”) with faucet holes on 4” centers; gooseneck spout; wrist blade handles; and grid strainer. It shall be suitable for use in clinics, offices, washrooms, or patient care area.</td>
</tr>
</tbody>
</table>
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Room Data: Bariatric Triage Room, ED (CED13)

ARCHITECTURAL & INTERIOR DESIGN
Ceiling Finish: m: AT
Ceiling Height: 9'-0" (2700mm)
Wall Finish: m: GWB f: P
Wainscot: m: RWC h: 4'-0"
Base: m: RB h: 4" (100mm)
Floor Finish: m: LVT
Slab Depression: --
Sound Protection: STC 40
Doors: m: Alum t: dg: T s: V
Hardware Nr: N/A
Notes:
1. Manual glass sliding doors must be able to break out of the room for exiting. See Section 08 32 13.

HVAC
Refer to HVAC Design Manual in accordance with project requirements. Refer to the current version of Chapter 6, “Mechanical Room Data Sheets” for room temperatures, humidity range, room air change requirements, noise level, pressurization, and other information.

PLUMBING AND MEDICAL GASES
Cold Water: Yes
Hot Water: Yes
Sanitary Drain: Yes
Reagent grade Water: --
Medical Air: Minimum 1 outlet/station
Medical Vacuum: Minimum 1 outlet/station
Oxygen: Minimum 1 outlet/station

FIRE PROTECTION
Refer to Fire Protection Design Manual for guidance on fire suppression and fire alarm device type and placement in accordance with project requirements.

POWER
Refer to the latest VA Electrical Design Manual for general electrical requirements.
Normal Power: To be connected to selected receptacles and equipment.
Emergency Power: Critical branch of the EES (Essential Electrical System) to be connected to selected receptacles and equipment.
Notes:
1. Coordinate electrical power requirements with specific vendor equipment.

LIGHTING
Refer to the latest VA Lighting Design Manual section 4.2.1 – Examination and Treatment Room for lighting design consideration.
Notes:
1. Coordinate lighting placement with ceiling track and ceiling track supports

COMMUNICATION/SPECIAL SYSTEMS
ADP: --
Data: Yes
Telephone: Yes
Intercom: --
Nurse Call: Yes
Public Address: --
Radio/Entertainment: As Required
MATV: --
CCTV: --
MID: --
Security/Duress: --
VTEL: --
VA Satellite TV: --
Count Down Clock: Yes
## Room Contents: Bariatric Triage Room, ED (CED13)

<table>
<thead>
<tr>
<th>JSN</th>
<th>Content Name</th>
<th>Acq Code</th>
<th>Qty</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A1010</td>
<td>Telecommunication Outlet</td>
<td>VV</td>
<td>3</td>
<td>Telecommunication outlet location.</td>
</tr>
<tr>
<td>A1014</td>
<td>Telephone, Wall Mounted, 1 Line, With Speaker</td>
<td>VV</td>
<td>1</td>
<td>Telephone, wall mounted, 1 line, with speaker.</td>
</tr>
<tr>
<td>A1080</td>
<td>Mirror, Posture, Wall Mounted</td>
<td>CC</td>
<td>1</td>
<td>Wall mounted posture mirror. Consists of a 1/4” plate glass in a sturdy corrosion resistant frame with waterproof back. For educational and therapy programs.</td>
</tr>
<tr>
<td>A1110</td>
<td>Headwall, Prefabricated, General, 1-2 bed</td>
<td>CC</td>
<td>1</td>
<td>1-2 bed, general, prefabricated headwall. Unit consists of a patient service module for general care, single or double bed type. It contains lighting, medical gases, electrical outlets, nurse call and bed bumper. Specify number and type of medical gas and electrical outlets. Size of module will vary by type and configuration of outlets.</td>
</tr>
<tr>
<td>A5075</td>
<td>Dispenser, Soap, Disposable</td>
<td>VV</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, top filling, liquid soap dispenser. Dispenser features: corrosion-resistant valve, push-in type and operable with one hand; heavy duty hinge and key lock lid; and vandal resistant concealed mounting. Minimum capacity 40 fluid ounces. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5077</td>
<td>Dispenser, Hand Sanitizer, Hands-Free</td>
<td>VV</td>
<td>1</td>
<td>A touch free wall-mounted hand sanitizer dispenser. For use throughout a healthcare facility. Unit does not include the sanitizing liquid. Units are battery operated.</td>
</tr>
<tr>
<td>A5079</td>
<td>Dispenser, Disinfectant Wipes, Wall Mount</td>
<td>VV</td>
<td>1</td>
<td>Wall-Mounted, wire dispenser bracket for large sanitary cloth canisters, Labeled &quot;Not for use on skin&quot;</td>
</tr>
<tr>
<td>A5080</td>
<td>Dispenser, Paper Towel, SS, Surface Mounted</td>
<td>CC</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, single-fold, paper towel dispenser. Dispenser features: tumbler lock; front hinged at bottom; and refill indicator slot. Minimum capacity 400 single-fold paper towels. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5093</td>
<td>Emesis Bag, Wall, Adult</td>
<td>VV</td>
<td>1</td>
<td>Wall-mounted dispenser for emesis bags. Holds biodegradable containment bags and facilitates individual dispensing when needed</td>
</tr>
<tr>
<td>A5094</td>
<td>PPE / Mask-Holder, Wall-mount</td>
<td>VV</td>
<td>1</td>
<td>Wall-mounted personal protection organizer. Accommodates different glove sizes, mask boxes and isolation gowns</td>
</tr>
<tr>
<td>A5107</td>
<td>Dispenser, Glove, Surgical/Examination, Wall Mounted</td>
<td>VV</td>
<td>1</td>
<td>Examination three (Small, Medium, Large) glove dispenser box for wall mounting. Fabricated of either cold rolled steel with a white baked enamel finish, plastic, or acrylic. Hardware not included; Option 3 powder coated steel.</td>
</tr>
</tbody>
</table>
Room Contents: Bariatric Triage Room, ED (CED13) – Cont’d.

<table>
<thead>
<tr>
<th>JSN</th>
<th>Content Name</th>
<th>Acq Code</th>
<th>Qty</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A5108</td>
<td>Waste Disposal Unit, Sharps</td>
<td>VV</td>
<td>1</td>
<td>A container for collecting and transporting syringes and other sharps for decontamination and disposal. Available in 2 gallon and 8 gallon with locking rotor. Complies with OSHA regulations for handling sharps.</td>
</tr>
<tr>
<td>A5145</td>
<td>Hook, Garment, Double, SS, Surface Mounted</td>
<td>CC</td>
<td>2</td>
<td>A surface mounted, satin finish stainless steel, double garment hook. Equipped with a concealed mounting bracket that is secured to a concealed wall plate. For general purpose use throughout the facility to hang various items of apparel.</td>
</tr>
<tr>
<td>A5180</td>
<td>Track, Cubicle, Surface Mounted, With Curtain</td>
<td>VV</td>
<td>30</td>
<td>Surface mounted cubicle track, with curtain. Track constructed of thick extruded aluminum. Equipped with self-lubricating carriers, beaded drop chain hooks, and flame-resistant curtain. To include removable end caps. Designed to be suspended around patient areas where privacy is needed. Price listed is per foot of the track, curtains to be priced per quote.</td>
</tr>
<tr>
<td>E0945</td>
<td>Cart, Computer, Mobile</td>
<td>VV</td>
<td>1</td>
<td>A mobile computer cart for use throughout the facility. The cart dimensions will be approximately 45&quot; H x 30&quot; W x 22&quot; D with casters. May include drawers and miscellaneous other accessories that will be determined at time of purchase.</td>
</tr>
<tr>
<td>E0948</td>
<td>Cart, General Storage, Mobile, 42&quot; H x 32&quot; W, 22&quot; D</td>
<td>VV</td>
<td>1</td>
<td>This typical includes: 1 Cart Body, Style-A Narrow, w/Raised Edge Top; 2 Drawers, 3&quot; H; 4 Drawers, 6&quot; H; 1 Accessory Rail, Side; Drawer Organizer Bins</td>
</tr>
<tr>
<td>F0205</td>
<td>Chair, Side With Arms, Bariatric</td>
<td>VV</td>
<td>1</td>
<td>Upholstered side chair, 32&quot; high X 21&quot; wide X 23&quot; deep with arms, padded seats, and padded backs. Seat height is a minimum of 17&quot;. Available with or without sled base. 450+ lbs.</td>
</tr>
<tr>
<td>F2000</td>
<td>Basket, Wastepaper, Fire Resistant</td>
<td>VV</td>
<td>1</td>
<td>Wastepaper basket, fire resistant, approximately 40 quart capacity. This unit is used to collect and temporarily store small quantities of paper refuse in patient rooms, administrative areas, and nursing stations. Size and shape varies depending on the application and manufacturer selected.</td>
</tr>
<tr>
<td>F2010</td>
<td>Basket, Wastepaper, Step-On</td>
<td>VV</td>
<td>1</td>
<td>Step-on wastepaper basket with inner liner and foot petal activated flip top.</td>
</tr>
<tr>
<td>F3200</td>
<td>Clock, Battery, 12&quot; Diameter</td>
<td>VV</td>
<td>1</td>
<td>Clock, 12&quot; diameter. Round surface, easy to read numbers with sweep second hand. Wall mounted unit for use when impractical to install a fully synchronized clock system. Battery operated, (batteries not included).</td>
</tr>
</tbody>
</table>
### Room Contents: Bariatric Triage Room, ED (CED13) – Cont’d.

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<thead>
<tr>
<th>JSN</th>
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</tr>
</thead>
<tbody>
<tr>
<td>M0750</td>
<td>Flowmeter, Air, Connect w/50 PSI Supply</td>
<td>VV</td>
<td>1</td>
<td>Air flowmeter. Unit has a stainless-steel needle valve with clear flow tube for connection to 50 PSI air outlet from central pipeline system. Requires the appropriate adapter for connection to the wall outlet and fitting to connect to tubing. Database prices reflect fittings with an attached DISS power outlet. Other outlet and adapter configurations are available.</td>
</tr>
<tr>
<td>M0755</td>
<td>Flowmeter, Oxygen, Low Flow</td>
<td>VV</td>
<td>1</td>
<td>Oxygen flowmeter. Consists of a clear crystal flow tube calibrated to 3.5 or 8 LPM depending on manufacturer. For oxygen regulation in hospital settings. Database pricing includes DISS fitting and DISS power outlet and wall adapter. Other fitting and adapter configurations are available.</td>
</tr>
<tr>
<td>M0765</td>
<td>Regulator, Vacuum</td>
<td>VV</td>
<td>1</td>
<td>Vacuum pressure regulator for connection to central piped vacuum system. Standard display scale is graduated at least from 0 to 200 mm Hg of vacuum. Displays on specialized regulators may cover other vacuum ranges. Regulator type (continuous, intermittent, continuous/intermittent, surgical, pediatric, thoracic, etc.) as required. To be used in delivery, neonatal, pediatrics or any area where suction is required. Database pricing reflects continuous regulators graduated to 200 mm Hg with a full line vacuum selection switch and DISS configured inlets and outlets.</td>
</tr>
<tr>
<td>M3073</td>
<td>Container, Biohazard Waste, Step-on, Fire Safe</td>
<td>VV</td>
<td>1</td>
<td>A biohazard waste container with a step-on lid. The container will have a capacity of approximately 12 gallons and be made of a fire safe material.</td>
</tr>
<tr>
<td>M4020</td>
<td>Scale, Person Weighing, High Capacity</td>
<td>VV</td>
<td>1</td>
<td>High capacity, person weighing scale. Large digital readout displays weight in pounds, or kilograms. Handrails. Shall be supported by fixed heavy-duty legs in stationary position. Capacity up to 800 pounds. Optional equipment: battery pack with rechargeable batteries and built-in recharger. Designed to weigh large ambulatory patients.</td>
</tr>
<tr>
<td>M4200</td>
<td>Otoscope/Ophthalmoscope, Wall Mounted</td>
<td>VV</td>
<td>1</td>
<td>Wall mounted otoscope and ophthalmoscope. Includes 6 foot line cord and plug and accepts and includes two handles. Contains head turn-on/turn-off, built-in speculum tray and 8 foot coiled cords. Unit is designed for use in patient exam rooms.</td>
</tr>
<tr>
<td>M4653</td>
<td>Stretcher, Chair, Ophthalmic Surgical</td>
<td>VV</td>
<td>1</td>
<td>An eye surgery stretcher which adjusts from horizontal to a chair position. Stretcher has dual articulating headpiece for multiple ophthalmic surgical positioning; features dual hydraulic jacks, swing down side rails, oxygen holder, independently movable foot section, and IV receptacles. Minimum 400 pound weight capacity.</td>
</tr>
</tbody>
</table>
Room Contents: Bariatric Triage Room, ED (CED13) – Cont’d.

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<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>M7710</td>
<td>Electrocardiograph, 12 Lead</td>
<td>VV</td>
<td>1</td>
<td>Used to detect the electrical signals associated with cardiac activity, diagnose cardiac abnormalities, determine a patient’s response to drug therapy and reveal trends or changes in heart function. Capable of recording two or more leads simultaneously, recording an entire 12 lead ECG in about 10 seconds. Includes of a 3.5 inch, high density, floppy disk drive for test storage. Portable.</td>
</tr>
<tr>
<td>M7845</td>
<td>Monitor, Physiological, Bedside, 4 Channel, w/wall bracket</td>
<td>VV</td>
<td>1</td>
<td>4 channel bedside physiological monitor. The unit consist of a four-channel non-fade monochrome display monitor, an alarm system, and printer-recording capabilities. The monitor has color coded controls and automatic calibration. The unit displays up to four waveforms simultaneously. The parameters to be monitored are user selectable. The monitor may be connected to a central monitoring station. The unit monitors patients in most acute care areas, step-down units, procedure rooms and emergency rooms.</td>
</tr>
<tr>
<td>P3100</td>
<td>Lavatory, Vitreous China, Slab Type</td>
<td>CC</td>
<td>1</td>
<td>Wall mounted, slab type, vitreous china, lavatory (approximate bowl size 7&quot;x15&quot;x10&quot;) with faucet holes on 4&quot; centers; gooseneck spout; wrist blade handles; and grid strainer. It shall be suitable for use in clinics, offices, washrooms, or patient care area.</td>
</tr>
</tbody>
</table>
ROOM Data: Eye/ENT Treatment Room, ED (CED16)

ARCHITECTURAL & INTERIOR DESIGN

Ceiling Finish: m: AT
Ceiling Height: 9'-0" (2700mm)
Wall Finish: m: GWB f: P
Wainscot: m: RWC h: 4'-0"
Base: m: RB h: 4" (100mm)
Floor Finish: m: LVT
Slab Depression: --
Sound Protection: STC 40
Doors: m: Alum t: dg: T s: V
Hardware Nr: N/A

Notes:
1. Manual glass sliding doors must be able to break out of the room for exiting. See Section 08 32 13.

HVAC

Refer to HVAC Design Manual in accordance with project requirements. Refer to the current version of Chapter 6, “Mechanical Room Data Sheets” for room temperatures, humidity range, room air change requirements, noise level, pressurization, and other information.

PLUMBING AND MEDICAL GASES

Cold Water: Yes
Hot Water: Yes
Sanitary Drain: Yes
Medical Air: Minimum 1 outlet/station
Medical Vacuum: Minimum 2 outlets/station
Oxygen: Minimum 2 outlets/station

FIRE PROTECTION

Refer to Fire Protection Design Manual for guidance on fire suppression and fire alarm device type and placement in accordance with project requirements.

POWER

Refer to the latest VA Electrical Design Manual for general electrical requirements.

Normal Power: To be connected to selected receptacles and equipment.

Emergency Power: Critical branch of the EES (Essential Electrical System) to be connected to selected receptacles and equipment.

Notes:
1. Coordinate electrical power requirements with specific vendor equipment.

LIGHTING

Refer to the latest VA Lighting Design Manual section 4.2.1 – Examination and Treatment Room for lighting design consideration.

Notes:
1. Coordinate lighting placement with ceiling track and ceiling track supports.

COMMUNICATION/SPECIAL SYSTEMS

ADP: --
Data: Yes
Telephone: Yes
Intercom: --
Nurse Call: Yes
Public Address: --
Radio/Entertainment: As Required
MATV: --
CCTV: --
MID: --
Security/Duress: --
VTEL: --
VA Satellite TV: --
Count Down Clock: --
# Room Contents: Eye/ENT Treatment Room, ED (CED16)

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</thead>
<tbody>
<tr>
<td>A1010</td>
<td>Telecommunication Outlet</td>
<td>VV</td>
<td>4</td>
<td>Telecommunication outlet location.</td>
</tr>
<tr>
<td>A1014</td>
<td>Telephone, Wall Mounted, 1 Line, With Speaker</td>
<td>VV</td>
<td>1</td>
<td>Telephone, wall mounted, 1 line, with speaker.</td>
</tr>
<tr>
<td>A1110</td>
<td>Headwall, Prefabricated, General, 1-2 bed</td>
<td>CC</td>
<td>2</td>
<td>1-2 bed, general, prefabricated headwall. Unit consists of a patient service module for general care, single or double bed type. It contains lighting, medical gases, electrical outlets, nurse call and bed bumper. Specify number and type of medical gas and electrical outlets. Size of module will vary by type and configuration of outlets.</td>
</tr>
<tr>
<td>A1200</td>
<td>Lift System, Overhead, Patient Room</td>
<td>VC</td>
<td>1</td>
<td>An overhead rail system specifically designed for patient lifting and movement for a single bed patient room. The system will consist of recessed, or ceiling mounted primary and secondary rails, lift motor with rolling carriage, patient harness or seat, and a hand controller or control box with charger. System will facilitate lifting and movement of patient to and from bed to gurney, chair or other requirement. Minimum lift capability is 550 pounds. Custom design of track layout by manufacturer is essential to meet individual facility requirements.</td>
</tr>
<tr>
<td>A5075</td>
<td>Dispenser, Soap, Disposable</td>
<td>VV</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, top filling, liquid soap dispenser. Dispenser features: corrosion-resistant valve, push-in type and operable with one hand; heavy duty hinge and key lock lid; and vandal resistant concealed mounting. Minimum capacity 40 fluid ounces. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5077</td>
<td>Dispenser, Hand Sanitizer, Hands-Free</td>
<td>VV</td>
<td>1</td>
<td>A touch free wall-mounted hand sanitizer dispenser. For use throughout a healthcare facility. Unit does not include the sanitizing liquid. Units are battery operated.</td>
</tr>
<tr>
<td>A5079</td>
<td>Dispenser, Disinfectant Wipes, Wall Mount</td>
<td>VV</td>
<td>1</td>
<td>Wall-Mounted, wire dispenser bracket for large sanitary cloth canisters, Labeled &quot;Not for use on skin&quot;</td>
</tr>
<tr>
<td>A5080</td>
<td>Dispenser, Paper Towel, SS, Surface Mounted</td>
<td>CC</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, single-fold, paper towel dispenser. Dispenser features: tumbler lock; front hinged at bottom; and refill indicator slot. Minimum capacity 400 single-fold paper towels. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5093</td>
<td>Emesis Bag, Wall, Adult</td>
<td>VV</td>
<td>1</td>
<td>Wall-mounted dispenser for emesis bags. Holds biodegradable containment bags and facilitates individual dispensing when needed</td>
</tr>
<tr>
<td>A5094</td>
<td>PPE / Mask-Holder, Wall-mount</td>
<td>VV</td>
<td>1</td>
<td>Wall-mounted personal protection organizer. Accommodates different glove sizes, mask boxes and isolation gowns</td>
</tr>
</tbody>
</table>
### Room Contents: Eye/ENT Treatment Room, ED (CED16) – Cont’d.

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<tbody>
<tr>
<td>A5107</td>
<td>Dispenser, Glove, Surgical/Examination, Wall Mounted</td>
<td>VV</td>
<td>1</td>
<td>Examination three (Small, Medium, Large) glove dispenser box for wall mounting. Fabricated of either cold rolled steel with a white baked enamel finish, plastic, or acrylic. Hardware not included; Option 3 powder coated steel.</td>
</tr>
<tr>
<td>A5108</td>
<td>Waste Disposal Unit, Sharps</td>
<td>VV</td>
<td>1</td>
<td>A container for collecting and transporting syringes and other sharps for decontamination and disposal. Available in 2 gallon and 8 gallon with locking rotor. Complies with OSHA regulations for handling sharps.</td>
</tr>
<tr>
<td>A5145</td>
<td>Hook, Garment, Double, SS, Surface Mounted</td>
<td>CC</td>
<td>2</td>
<td>A surface mounted, satin finish stainless steel, double garment hook. Equipped with a concealed mounting bracket that is secured to a concealed wall plate. For general purpose use throughout the facility to hang various items of apparel.</td>
</tr>
<tr>
<td>A5180</td>
<td>Track, Cubicle, Surface Mounted, With Curtain</td>
<td>VV</td>
<td>12</td>
<td>Surface mounted cubicle track, with curtain. Track constructed of thick extruded aluminum. Equipped with self-lubricating carriers, beaded drop chain hooks, and flame-resistant curtain. To include removable end caps. Designed to be suspended around patient areas where privacy is needed. Price listed is per foot of the track, curtains to be priced per quote.</td>
</tr>
<tr>
<td>A5215</td>
<td>Bracket, Television, Ceiling Mounted</td>
<td>CC</td>
<td>1</td>
<td>Ceiling mounted television bracket for flat panel LCD and Plasma screens. The bracket shall be a universal style mount with a load capacity of 200 pounds with adjustments of 0-15 degree tilt and 360 degree swivel. Shall be capable of accommodating various size units.</td>
</tr>
<tr>
<td>A6046</td>
<td>Artwork, Decorative, With Frame</td>
<td>VV</td>
<td>1</td>
<td>This JSN is to be used for determining and defining location of decorative artwork.</td>
</tr>
<tr>
<td>E0945</td>
<td>Cart, Computer, Mobile</td>
<td>VV</td>
<td>1</td>
<td>A mobile computer cart for use throughout the facility. The cart dimensions will be approximately 45&quot; H x 30&quot; W x 22&quot; D with casters. May include drawers and miscellaneous other accessories that will be determined at time of purchase.</td>
</tr>
<tr>
<td>E0948</td>
<td>Cart, General Storage, Mobile, 42&quot;H x 32&quot;W, 22&quot;D</td>
<td>VV</td>
<td>2</td>
<td>This typical includes: 1 Cart Body, Style-A Narrow, w/Raised Edge Top; 2 Drawers, 3&quot; H; 4 Drawers, 6&quot; H; 1 Accessory Rail, Side; Drawer Organizer Bins</td>
</tr>
<tr>
<td>F0205</td>
<td>Chair, Side With Arms</td>
<td>VV</td>
<td>1</td>
<td>Upholstered side chair, 32&quot; high X 21&quot; wide X 23&quot; deep with arms, padded seats, and padded backs. Seat height is a minimum of 17&quot;. Available with or without sled base.</td>
</tr>
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## Room Contents: Eye/ENT Treatment Room, ED (CED16) – Cont’d.

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<th>JSN</th>
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<tbody>
<tr>
<td>F2010</td>
<td>Basket, Wastepaper, Step-On</td>
<td>VV</td>
<td>1</td>
<td>Step-on wastepaper basket with inner liner and foot petal activated flip top.</td>
</tr>
<tr>
<td>F3200</td>
<td>Clock, Battery, 12” Diameter</td>
<td>VV</td>
<td>1</td>
<td>Clock, 12” diameter. Round surface, easy to read numbers with sweep second hand. Wall mounted unit for use when impractical to install a fully synchronized clock system. Battery operated, (batteries not included).</td>
</tr>
<tr>
<td>M0506</td>
<td>Television, Flat Screen</td>
<td>VV</td>
<td>1</td>
<td>Flat screen television with approximately 32”” to 40’ diagonal screen size. The TV will have built-in speakers, NTSC tuner, a 16:9 wide screen aspect ratio, a minimum of 1280 x 768 resolution and a remote control.</td>
</tr>
<tr>
<td>M0750</td>
<td>Flowmeter, Air, Connect w/50 PSI Supply</td>
<td>VV</td>
<td>1</td>
<td>Air flowmeter. Unit has a stainless-steel needle valve with clear flow tube for connection to 50 PSI air outlet from central pipeline system. Requires the appropriate adapter for connection to the wall outlet and fitting to connect to tubing. Database prices reflect fittings with an attached DISS power outlet. Other outlet and adapter configurations are available.</td>
</tr>
<tr>
<td>M0755</td>
<td>Flowmeter, Oxygen, Low Flow</td>
<td>VV</td>
<td>2</td>
<td>Oxygen flowmeter. Consists of a clear crystal flow tube calibrated to 3.5 or 8 LPM depending on manufacturer. For oxygen regulation in hospital settings. Database pricing includes DISS fitting and DISS power outlet and wall adapter. Other fitting and adapter configurations are available.</td>
</tr>
<tr>
<td>M0765</td>
<td>Regulator, Vacuum</td>
<td>VV</td>
<td>2</td>
<td>Vacuum pressure regulator for connection to central piped vacuum system. Standard display scale is graduated at least from 0 to 200 mm Hg of vacuum. Displays on specialized regulators may cover other vacuum ranges. Regulator type (continuous, intermittent, continuous/intermittent, surgical, pediatric, thoracic, etc.) as required. To be used in delivery, neonatal, pediatrics or any area where suction is required. Database pricing reflects continuous regulators graduated to 200 mm Hg with a full line vacuum selection switch and DISS configured inlets and outlets.</td>
</tr>
<tr>
<td>M3073</td>
<td>Container, Waste, Step-on, Fire Safe</td>
<td>VV</td>
<td>1</td>
<td>A waste container with a step-on lid. The container will have a capacity of approximately 12 gallons and be made of a fire safe material.</td>
</tr>
<tr>
<td>M4200</td>
<td>Otoscope/Ophthalmoscope, Wall Mounted</td>
<td>VV</td>
<td>1</td>
<td>Wall mounted otoscope and ophthalmoscope. Includes 6 foot line cord and plug and accepts and includes two handles. Contains head turn-on/turn-off, built-in speculum tray and 8 foot coiled cords. Unit is designed for use in patient exam rooms.</td>
</tr>
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Room Contents: Eye/ENT Treatment Room, ED (CED16) – Cont’d.

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<tr>
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<tbody>
<tr>
<td>M4255</td>
<td>Stand, IV, Adjustable</td>
<td>VV</td>
<td>1</td>
<td>Adjustable IV stand with 4-hook arrangement. Stand has stainless steel construction with heavy weight base. It adjusts from 66 inches to 100 inches and is mounted on conductive rubber, ball bearing, swivel casters. Stand is used for administering intravenous solutions.</td>
</tr>
<tr>
<td>M4266</td>
<td>Pump, Volumetric, Infusion, Multiple Lines</td>
<td>VV</td>
<td>1</td>
<td>Volumetric infusion pump. Pump is self-regulating with automatic sensor and adjustable rate. Equipped with visual and audible alarms and up to 10 hour capacity battery. For the administration of a wide variety of therapeutic agents where precise control is required. Unit provides individual control to IV lines simultaneously.</td>
</tr>
<tr>
<td>M4915</td>
<td>Chair, Exam/Treatment, ENT</td>
<td>VV</td>
<td>1</td>
<td>ENT exam/treatment chair with adjustable light. Chair can be rotated 330 degrees locking at desired position. Unit is electrically powered for precise positioning and has an adjustable headrest and armrest. It may include an adjustable gooseneck light. Unit is designed for use during examinations, treatments, and minor procedures.</td>
</tr>
<tr>
<td>M5531</td>
<td>Lamp, Slit, Photographic w/Tonometer</td>
<td>VV</td>
<td>1</td>
<td>Slit lamp with applanation tonometer. Unit consists of a base mounted ophthalmological slit lamp, with head and chin rest and manual height and focusing adjustments. The instrument also features a microscope head with parallel optics that will accept an applanation tonometer. For use in ophthalmology during diagnostic examinations. Unit to be supplied with appropriate beam splitter, 35 mm camera back, camera interface, enhanced illumination, and illumination controls to permit photographs of the visual field to be obtained. Optional video/digital available.</td>
</tr>
<tr>
<td>M5730</td>
<td>Stand, Ophthalmic Instrument</td>
<td>VV</td>
<td>1</td>
<td>Ophthalmic instrument stand. Unit provides power supply for hand-held instruments, mounting post for phoropter, and mounting post and arm for slit lamp table adjacent to the ophthalmic exam chair. Used in the eye exam room.</td>
</tr>
</tbody>
</table>
### Room Contents: Eye/ENT Treatment Room, ED (CED16) – Cont’d.

<table>
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<tr>
<th>Split</th>
<th>Content Name</th>
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<th>Qty</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>M7405</td>
<td>Light, Exam, Ceiling Mounted</td>
<td>CC</td>
<td>1</td>
<td>Ceiling exam light. Consists of a lightheaded reflector supported by a ceiling mounted radial arm assembly that provides a wide range of positioning capabilities. Halogen bulbs and an intensity control provide cool, color corrected light. The minimum ceiling height in most cases is 8'-0&quot;; refer to each manufacturer’s specific installation requirements. Physical dimensions refer to the retracted light; one length of the dual swing arm around the center mount in width and depth and the combined height of the lamp head and folded arms. Unit may also have a center mount detachable and sterilizable control handle. For use in minor procedure or examination room applications.</td>
</tr>
<tr>
<td>M7845</td>
<td>Monitor, Physiological, Bedside, 4 Channel, w/wall bracket</td>
<td>VV</td>
<td>1</td>
<td>4 channel bedside physiological monitor. The unit consist of a four-channel non-fade monochrome display monitor, an alarm system, and printer-recording capabilities. The monitor has color coded controls and automatic calibration. The unit displays up to four waveforms simultaneously. The parameters to be monitored are user selectable. The monitor may be connected to a central monitoring station. The unit monitors patients in most acute care areas, step-down units, procedure rooms and emergency rooms.</td>
</tr>
<tr>
<td>M7910</td>
<td>Thermometer, Electronic</td>
<td>VV</td>
<td>1</td>
<td>Electronic thermometer. Pocket size unit with easy to read zero Fahrenheit or zero Centigrade LCD display in approximately 20 seconds. Battery operated and enclosed in a heavy-duty plastic case. Unit is hand-held portable and may be stand or wall mounted. For patient body temperature readings.</td>
</tr>
<tr>
<td>M8810</td>
<td>Stand, Mayo</td>
<td>VV</td>
<td>1</td>
<td>Adjustable instrument table. Table is corrosion resistant stainless-steel construction and is mounted on two casters with two skid rails. It has telescopic upright adjusts from 39 inches to 60 inches with automatic locking device, and removable 13&quot;x19&quot; instrument tray. Designed for use in operating and procedure rooms.</td>
</tr>
<tr>
<td>P3100</td>
<td>Lavatory, Vitreous China, Slab Type</td>
<td>CC</td>
<td>1</td>
<td>Wall mounted, slab type, vitreous china, lavatory (approximate bowl size 7&quot;x15&quot;x10&quot;) with faucet holes on 4&quot; centers; gooseneck spout; wrist blade handles; and grid strainer. It shall be suitable for use in clinics, offices, washrooms, or patient care area.</td>
</tr>
<tr>
<td>P3600</td>
<td>Sink, Shampoo, Porcelain</td>
<td>CC</td>
<td>1</td>
<td>High gloss porcelain wall mounted shampoo bowl for hair washing. Includes fixture, wall mount, spray nozzle with hose, strainer, and water control fixture.</td>
</tr>
</tbody>
</table>
Emergency Department
ORTHOPEDIC TREATMENT ROOM, ED (CED17)
REFLECTED CEILING PLAN

Plot Date: 11/16/2021 2:42:40 PM
SCALE: 1/4" = 1'-0"

DISCLAIMER: ROOM TEMPLATES ARE GRAPHICAL REPRESENTATIONS OF SELECTED ROOM TYPES THAT ILLUSTRATE VA PLANNING REQUIREMENTS FOR SPACE, ROOM CONTENTS, AND ROOM SPECIFIC ENGINEERING SYSTEMS. THEY PROVIDE TYPICAL CONFIGURATIONS, PLANNING CRITERIA, AND GENERAL TECHNICAL GUIDANCE, AND ARE NOT INTENDED TO BE PROJECT SPECIFIC REQUIREMENTS.
Emergency Department
ORTHOPEDIC TREATMENT ROOM, ED (CED17)
ELEVATIONS

Plot Date: 11/16/2021 2:42:42 PM
SCALE: 1/4" = 1'-0"

ELEVATION 1

- Headwall, Prefabricated, General, 1-2 bed
- Monitor, Physiological, Bedside, 4 Channel
- Waste Disposal Unit, Sharps, Wall Mounted
- Telephone, Wall Mounted, 1 Line, With Speaker
- Cart, General Storage, Mobile, 42"H x 32"W x 22"D
- Thermometer, Electronic
- Regulator, Vacuum
- Flowmeter, Air, Connect w/50 PSI Supply
- Flowmeter, Oxygen, Low Flow

ELEVATION 2

- Artwork, Decorative, With Frame
- Emesis Bag, Wall, Adult
- Headwall, Prefabricated, General, 1-2 bed
- Chair, Side With Arms
- Table, Overbed

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Room Data: Orthopedic Treatment Room, ED (CED17)

ARCHITECTURAL & INTERIOR DESIGN
Ceiling Finish: m: AT
Ceiling Height: 9'-0" (2700mm)
Wall Finish: m: GWB f: P
Wainscot: m: RWC h: 4'-0"
Base: m: RB h: 4" (100mm)
Floor Finish: m: LVT
Slab Depression: --
Sound Protection: STC 40
Doors: m: Alum t: dg: T s: V
Hardware Nr: N/A
Notes:
1. Manual glass sliding doors must be able to break out of the room for exiting. See Section 08 32 13.

HVAC
Refer to HVAC Design Manual in accordance with project requirements. Refer to the current version of Chapter 6, “Mechanical Room Data Sheets” for room temperatures, humidity range, room air change requirements, noise level, pressurization, and other information.

PLUMBING AND MEDICAL GASES
Cold Water: Yes
Hot Water: Yes
Sanitary Drain: Yes
Medical Air: Minimum 2 outlets/station
Medical Vacuum: Minimum 2 outlets/station
Oxygen: Minimum 2 outlets/station

FIRE PROTECTION
Refer to Fire Protection Design Manual for guidance on fire suppression and fire alarm device type and placement in accordance with project requirements.

POWER
Refer to the latest VA Electrical Design Manual for general electrical requirements.
Normal Power: To be connected to selected receptacles and equipment.
Emergency Power: Critical branch of the EES (Essential Electrical System) to be connected to selected receptacles and equipment.
Notes:
1. Coordinate electrical power requirements with specific vendor equipment.

LIGHTING
Refer to the latest VA Lighting Design Manual section 4.2.1 – Examination and Treatment Room for lighting design consideration.
Notes:
1. Coordinate lighting placement with ceiling track and ceiling track supports.

COMMUNICATION/SPECIAL SYSTEMS
ADP: --
Data: Yes
Telephone: Yes
Intercom: --
Nurse Call: Yes
Public Address: --
Radio/Entertainment: As Required
MATV: --
CCTV: --
MID: --
Security/Duress: --
VTEL: --
VA Satellite TV: --
Count Down Clock: --
# Room Contents: Orthopedic Treatment Room, ED (CED17)

<table>
<thead>
<tr>
<th>JSN</th>
<th>Content Name</th>
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<th>Description</th>
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</thead>
<tbody>
<tr>
<td>A1010</td>
<td>Telecommunication Outlet</td>
<td>VV</td>
<td>4</td>
<td>Telecommunication outlet location.</td>
</tr>
<tr>
<td>A1014</td>
<td>Telephone, Wall Mounted, 1 Line, With Speaker</td>
<td>VV</td>
<td>1</td>
<td>Telephone, wall mounted, 1 line, with speaker.</td>
</tr>
<tr>
<td>A1110</td>
<td>Headwall, Prefabricated, General, 1-2 bed</td>
<td>CC</td>
<td>2</td>
<td>1-2 bed, general, prefabricated headwall. Unit consists of a patient service module for general care, single or double bed type. It contains lighting, medical gases, electrical outlets, nurse call and bed bumper. Specify number and type of medical gas and electrical outlets. Size of module will vary by type and configuration of outlets.</td>
</tr>
<tr>
<td>A1200</td>
<td>Lift System, Overhead, Patient Room</td>
<td>VC</td>
<td>1</td>
<td>An overhead rail system specifically designed for patient lifting and movement for a single bed patient room. The system will consist of recessed, or ceiling mounted primary and secondary rails, lift motor with rolling carriage, patient harness or seat, and a hand controller or control box with charger. System will facilitate lifting and movement of patient to and from bed to gurney, chair or other requirement. Minimum lift capability is 550 pounds. Custom design of track layout by manufacturer is essential to meet individual facility requirements.</td>
</tr>
<tr>
<td>A5075</td>
<td>Dispenser, Soap, Disposable</td>
<td>VV</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, top filling, liquid soap dispenser. Dispenser features: corrosion-resistant valve, push-in type and operable with one hand; heavy duty hinge and key lock lid; and vandal resistant concealed mounting. Minimum capacity 40 fluid ounces. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5077</td>
<td>Dispenser, Hand Sanitizer, Hands-Free</td>
<td>VV</td>
<td>1</td>
<td>A touch free wall-mounted hand sanitizer dispenser. For use throughout a healthcare facility. Unit does not include the sanitizing liquid. Units are battery operated.</td>
</tr>
<tr>
<td>A5079</td>
<td>Dispenser, Disinfectant Wipes, Wall Mount</td>
<td>VV</td>
<td>1</td>
<td>Wall-Mounted, wire dispenser bracket for large sanitary cloth canisters, Labeled &quot;Not for use on skin&quot;</td>
</tr>
<tr>
<td>A5080</td>
<td>Dispenser, Paper Towel, SS, Surface Mounted</td>
<td>CC</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, single-fold, paper towel dispenser. Dispenser features: tumbler lock; front hinged at bottom; and refill indicator slot. Minimum capacity 400 single-fold paper towels. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5093</td>
<td>Emesis Bag, Wall, Adult</td>
<td>VV</td>
<td>1</td>
<td>Wall-mounted dispenser for emesis bags. Holds biodegradable containment bags and facilitates individual dispensing when needed</td>
</tr>
<tr>
<td>A5094</td>
<td>PPE / Mask-Holder, Wall-mount</td>
<td>VV</td>
<td>1</td>
<td>Wall-mounted personal protection organizer. Accommodates different glove sizes, mask boxes and isolation gowns</td>
</tr>
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Room Contents: Orthopedic Treatment Room, ED (CED17) – Cont’d.

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<tbody>
<tr>
<td>A5107</td>
<td>Dispenser, Glove, Surgical/Examination, Wall Mounted</td>
<td>VV</td>
<td>1</td>
<td>Examination three (Small, Medium, Large) glove dispenser box for wall mounting. Fabricated of either cold rolled steel with a white baked enamel finish, plastic, or acrylic. Hardware not included; Option 3 powder coated steel.</td>
</tr>
<tr>
<td>A5108</td>
<td>Waste Disposal Unit, Sharps</td>
<td>VV</td>
<td>1</td>
<td>A container for collecting and transporting syringes and other sharps for decontamination and disposal. Available in 2 gallon and 8 gallon with locking rotor. Complies with OSHA regulations for handling sharps.</td>
</tr>
<tr>
<td>A5145</td>
<td>Hook, Garment, Double, SS, Surface Mounted</td>
<td>CC</td>
<td>2</td>
<td>A surface mounted, satin finish stainless steel, double garment hook. Equipped with a concealed mounting bracket that is secured to a concealed wall plate. For general purpose use throughout the facility to hang various items of apparel.</td>
</tr>
<tr>
<td>A5180</td>
<td>Track, Cubicle, Surface Mounted, With Curtain</td>
<td>VV</td>
<td>8</td>
<td>Surface mounted cubicle track, with curtain. Track constructed of thick extruded aluminum. Equipped with self-lubricating carriers, beaded drop chain hooks, and flame-resistant curtain. To include removable end caps. Designed to be suspended around patient areas where privacy is needed. Price listed is per foot of the track, curtains to be priced per quote.</td>
</tr>
<tr>
<td>A5215</td>
<td>Bracket, Television, Ceiling Mounted</td>
<td>CC</td>
<td>1</td>
<td>Ceiling mounted television bracket for flat panel LCD and Plasma screens. The bracket shall be a universal style mount with a load capacity of 200 pounds with adjustments of 0-15 degree tilt and 360 degree swivel. Shall be capable of accommodating various size units.</td>
</tr>
<tr>
<td>A6046</td>
<td>Artwork, Decorative, With Frame</td>
<td>VV</td>
<td>1</td>
<td>This JSN is to be used for determining and defining location of decorative artwork.</td>
</tr>
<tr>
<td>E0945</td>
<td>Cart, Computer, Mobile</td>
<td>VV</td>
<td>1</td>
<td>A mobile computer cart for use throughout the facility. The cart dimensions will be approximately 45&quot; H x 30&quot; W x 22&quot; D with casters. May include drawers and miscellaneous other accessories that will be determined at time of purchase.</td>
</tr>
<tr>
<td>E0948</td>
<td>Cart, General Storage, Mobile, 42&quot;H x 32&quot;W,22&quot;D</td>
<td>VV</td>
<td>1</td>
<td>This typical includes: 1 Cart Body, Style-A Narrow, w/Raised Edge Top; 2 Drawers, 3&quot; H; 4 Drawers, 6&quot; H; 1 Accessory Rail, Side; Drawer Organizer Bins</td>
</tr>
<tr>
<td>F2010</td>
<td>Basket, Wastepaper, Step-On</td>
<td>VV</td>
<td>1</td>
<td>Step-on wastepaper basket with inner liner and foot petal activated flip top.</td>
</tr>
</tbody>
</table>
Room Contents: Orthopedic Treatment Room, ED (CED17) – Cont’d.

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</thead>
<tbody>
<tr>
<td>F3200</td>
<td>Clock, Battery, 12&quot; Diameter</td>
<td>VV</td>
<td>1</td>
<td>Clock, 12&quot; diameter. Round surface, easy to read numbers with sweep second hand. Wall mounted unit for use when impractical to install a fully synchronized clock system. Battery operated, (batteries not included).</td>
</tr>
<tr>
<td>M0506</td>
<td>Television, Flat Screen</td>
<td>VV</td>
<td>1</td>
<td>Flat screen television with approximately 32” to 40” diagonal screen size. The TV will have built-in speakers, NTSC tuner, a 16:9 wide screen aspect ratio, a minimum of 1280 x 768 resolution and a remote control.</td>
</tr>
<tr>
<td>M0750</td>
<td>Flowmeter, Air, Connect w/50 PSI Supply</td>
<td>VV</td>
<td>1</td>
<td>Air flowmeter. Unit has a stainless-steel needle valve with clear flow tube for connection to 50 PSI air outlet from central pipeline system. Requires the appropriate adapter for connection to the wall outlet and fitting to connect to tubing. Database prices reflect fittings with an attached DISS power outlet. Other outlet and adapter configurations are available.</td>
</tr>
<tr>
<td>M0755</td>
<td>Flowmeter, Oxygen, Low Flow</td>
<td>VV</td>
<td>2</td>
<td>Oxygen flowmeter. Consists of a clear crystal flow tube calibrated to 3.5 or 8 LPM depending on manufacturer. For oxygen regulation in hospital settings. Database pricing includes DISS fitting and DISS power outlet and wall adapter. Other fitting and adapter configurations are available.</td>
</tr>
<tr>
<td>M0765</td>
<td>Regulator, Vacuum</td>
<td>VV</td>
<td>2</td>
<td>Vacuum pressure regulator for connection to central piped vacuum system. Standard display scale is graduated at least from 0 to 200 mm Hg of vacuum. Displays on specialized regulators may cover other vacuum ranges. Regulator type (continuous, intermittent, continuous/intermittent, surgical, pediatric, thoracic, etc.) as required. To be used in delivery, neonatal, pediatrics or any area where suction is required. Database pricing reflects continuous regulators graduated to 200 mm Hg with a full line vacuum selection switch and DISS configured inlets and outlets.</td>
</tr>
<tr>
<td>M3073</td>
<td>Container, Waste, Step-on, Fire Safe</td>
<td>VV</td>
<td>1</td>
<td>A waste container with a step-on lid. The container will have a capacity of approximately 12 gallons and be made of a fire safe material.</td>
</tr>
<tr>
<td>M4200</td>
<td>Otoscope/Ophthalmoscope, Wall Mounted</td>
<td>VV</td>
<td>1</td>
<td>Wall mounted otoscope and ophthalmoscope. Includes 6 foot line cord and plug and accepts and includes two handles. Contains head turn-on/turn-off, built-in speculum tray and 8 foot coiled cords. Unit is designed for use in patient exam rooms.</td>
</tr>
</tbody>
</table>
## Room Contents: Orthopedic Treatment Room, ED (CED17) – Cont’d.

<table>
<thead>
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</tr>
</thead>
<tbody>
<tr>
<td>M4655</td>
<td>Stretcher, Mobile, CRS, 9 Position</td>
<td>VV</td>
<td>1</td>
<td>Mobile stretcher. All corrosion resistant stainless-steel construction. It consists of a tubular frame with side rails, a 9-position hydraulic base with pneumatic fowler adjustment, and a 2&quot; pad. Unit is mounted on 8&quot; conductive casters. Designed for patient transport as well as for minor surgical procedures.</td>
</tr>
<tr>
<td>M7040</td>
<td>Table, Overbed</td>
<td>VV</td>
<td>1</td>
<td>Overbed table. Adjustable height table constructed of heavy gauge steel. Mounted on 2&quot; diameter twin swivel casters with bumper caps. Tabletop is constructed with a high-pressure plastic laminated surface that resists chipping, scratching, and staining. It includes a vanity tray and a mirror. Table is designed for use over bed, wheelchair, or large chair.</td>
</tr>
<tr>
<td>M7405</td>
<td>Light, Exam, Ceiling Mounted</td>
<td>CC</td>
<td>1</td>
<td>Ceiling exam light. Consists of a lightheaded reflector supported by a ceiling mounted radial arm assembly that provides a wide range of positioning capabilities. Halogen bulbs and an intensity control provide cool, color corrected light. The minimum ceiling height in most cases is 8'-0&quot;; refer to each manufacturer's specific installation requirements. Physical dimensions refer to the retracted light; one length of the dual swing arm around the center mount in width and depth and the combined height of the lamp head and folded arms. Unit may also have a center mount detachable and sterilizable control handle. For use in minor procedure or examination room applications.</td>
</tr>
<tr>
<td>M7845</td>
<td>Monitor, Physiological, Bedside, 4 Channel, w/wall bracket</td>
<td>VV</td>
<td>1</td>
<td>4 channel bedside physiological monitor. The unit consist of a four-channel non-fade monochrome display monitor, an alarm system, and printer-recording capabilities. The monitor has color coded controls and automatic calibration. The unit displays up to four waveforms simultaneously. The parameters to be monitored are user selectable. The monitor may be connected to a central monitoring station. The unit monitors patients in most acute care areas, step-down units, procedure rooms and emergency rooms.</td>
</tr>
<tr>
<td>M7910</td>
<td>Thermometer, Electronic</td>
<td>VV</td>
<td>1</td>
<td>Electronic thermometer. Pocket size unit with easy to read zero Fahrenheit or zero Centigrade LCD display in approximately 20 seconds. Battery operated and enclosed in a heavy-duty plastic case. Unit is handheld portable and may be stand or wall mounted. For patient body temperature readings.</td>
</tr>
<tr>
<td>P3100</td>
<td>Lavatory, Vitreous China, Slab Type</td>
<td>CC</td>
<td>1</td>
<td>Wall mounted, slab type, vitreous china, lavatory (approximate bowl size 7&quot;x15&quot;x10&quot;) with faucet holes on 4&quot; centers; gooseneck spout; wrist blade handles; and grid strainer. It shall be suitable for use in clinics, offices, washrooms, or patient care area.</td>
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Emergency Department
GENERAL EXAM/TREATMENT ROOM, ED (CED21)
REFLECTED CEILING PLAN

December 1, 2021

Plot Date: 11/16/2021 2:47:51 PM
SCALE: 1/4" = 1'-0"

EXAM/TREATMENT ROOM, ED (CED21)
160 NSF
14.86 NSM

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Emergency Department
GENERAL EXAM/TREATMENT ROOM, ED (CED21)
ELEVATIONS

Plot Date: 11/16/2021 2:47:54 PM
SCALE: 1/4" = 1'-0"

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Room Data: General Exam/Treatment
Room, ED (CED21)

ARCHITECTURAL & INTERIOR DESIGN
Ceiling Finish: m: AT
Ceiling Height: 9'-0" (2700mm)
Wall Finish: m: GWB f: P
Wainscot: m: RWC h: 4'-0"
Base: m: RB h: 4" (100mm)
Floor Finish: m LVT
Slab Depression: --
Sound Protection: STC 40
Doors: m: Alum t: dg: T s: V
Hardware Nr: N/A
Notes:
1. Manual glass sliding doors must be able to break out of the room for exiting. See Section 08 32 13.

HVAC
Refer to HVAC Design Manual in accordance with project requirements. Refer to the current version of Chapter 6, “Mechanical Room Data Sheets” for room temperatures, humidity range, room air change requirements, noise level, pressurization, and other information.

PLUMBING AND MEDICAL GASES
Cold Water: Yes
Hot Water: Yes
Sanitary Drain: Yes
Medical Air: Minimum 2 outlets/station
Medical Vacuum: Minimum 2 outlets/station
Oxygen: Minimum 2 outlets/station

FIRE PROTECTION
Refer to Fire Protection Design Manual for guidance on fire suppression and fire alarm device type and placement in accordance with project requirements.

POWER
Refer to the latest VA Electrical Design Manual for general electrical requirements.
Normal Power: To be connected to selected receptacles and equipment.
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Notes:
1. Coordinate electrical power requirements with specific vendor equipment.

LIGHTING
Refer to the latest VA Lighting Design Manual section 4.2.1 – Examination and Treatment Room for lighting design consideration.
Notes:
1. Coordinate lighting placement with ceiling track and ceiling track supports

COMMUNICATION/SPECIAL SYSTEMS
ADP: --
Data: Yes
Telephone: Yes
Intercom: --
Nurse Call: Yes
Public Address: --
Radio/Entertainment: As Required
MATV: --
CCTV: --
MID: --
Security/Duress: --
VTEL: --
VA Satellite TV: --
Count Down Clock: --
### Room Contents: General Exam/Treatment Room, ED (CED21)

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<td>4</td>
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<tr>
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<td>Telephone, Wall Mounted, 1 Line, With Speaker</td>
<td>VV</td>
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<tr>
<td>A1110</td>
<td>Headwall, Prefabricated, General, 1-2 bed</td>
<td>CC</td>
<td>2</td>
<td>1-2 bed, general, prefabricated headwall. Unit consists of a patient service module for general care, single or double bed type. It contains lighting, medical gases, electrical outlets, nurse call and bed bumper. Specify number and type of medical gas and electrical outlets. Size of module will vary by type and configuration of outlets.</td>
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<td>Wall-Mounted, wire dispenser bracket for large sanitary cloth canisters, Labeled &quot;Not for use on skin&quot;</td>
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<tr>
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<td>Dispenser, Paper Towel, SS, Surface Mounted</td>
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<td>1</td>
<td>A surface mounted, satin finish stainless steel, single-fold, paper towel dispenser. Dispenser features: tumbler lock; front hinged at bottom; and refill indicator slot. Minimum capacity 400 single-fold paper towels. For general purpose use throughout the facility.</td>
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<td>PPE / Mask-Holder, Wall-mount</td>
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<td>Wall-mounted personal protection organizer. Accommodates different glove sizes, mask boxes and isolation gowns</td>
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Room Contents: General Exam/Treatment Room, ED (CED21) – Cont’d.

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<tr>
<td>A5108</td>
<td>Waste Disposal Unit, Sharps</td>
<td>VV</td>
<td>1</td>
<td>A container for collecting and transporting syringes and other sharps for decontamination and disposal. Available in 2 gallon and 8 gallon with locking rotor. Complies with OSHA regulations for handling sharps.</td>
</tr>
<tr>
<td>A5145</td>
<td>Hook, Garment, Double, SS, Surface Mounted</td>
<td>CC</td>
<td>2</td>
<td>A surface mounted, satin finish stainless steel, double garment hook. Equipped with a concealed mounting bracket that is secured to a concealed wall plate. For general purpose use throughout the facility to hang various items of apparel.</td>
</tr>
<tr>
<td>A5180</td>
<td>Track, Cubicle, Surface Mounted, With Curtain</td>
<td>VV</td>
<td>10</td>
<td>Surface mounted cubicle track, with curtain. Track constructed of thick extruded aluminum. Equipped with self-lubricating carriers, beaded drop chain hooks, and flame-resistant curtain. To include removable end caps. Designed to be suspended around patient areas where privacy is needed. Price listed is per foot of the track, curtains to be priced per quote.</td>
</tr>
<tr>
<td>A5215</td>
<td>Bracket, Television, Ceiling Mounted</td>
<td>CC</td>
<td>1</td>
<td>Ceiling mounted television bracket for flat panel LCD and Plasma screens. The bracket shall be a universal style mount with a load capacity of 200 pounds with adjustments of 0-15 degree tilt and 360 degree swivel. Shall be capable of accommodating various size units.</td>
</tr>
<tr>
<td>A6046</td>
<td>Artwork, Decorative, With Frame</td>
<td>VV</td>
<td>1</td>
<td>This JSN is to be used for determining and defining location of decorative artwork.</td>
</tr>
<tr>
<td>E0945</td>
<td>Cart, Computer, Mobile</td>
<td>VV</td>
<td>1</td>
<td>A mobile computer cart for use throughout the facility. The cart dimensions will be approximately 45&quot; H x 30&quot; W x 22&quot; D with casters. May include drawers and miscellaneous other accessories that will be determined at time of purchase.</td>
</tr>
<tr>
<td>E0948</td>
<td>Cart, General Storage, Mobile, 42&quot;H x 32&quot;W,22&quot;D</td>
<td>VV</td>
<td>1</td>
<td>This typical includes: 1 Cart Body, Style-A Narrow, w/Raised Edge Top; 2 Drawers, 3&quot; H; 4 Drawers, 6&quot; H; 1 Accessory Rail, Side; Drawer Organizer Bins</td>
</tr>
<tr>
<td>F0205</td>
<td>Chair, Side With Arms</td>
<td>VV</td>
<td>1</td>
<td>Upholstered side chair, 32&quot; high X 21&quot; wide X 23&quot; deep with arms, padded seats, and padded backs. Seat height is a minimum of 17&quot;. Available with or without sled base.</td>
</tr>
<tr>
<td>F2010</td>
<td>Basket, Wastepaper, Step-On</td>
<td>VV</td>
<td>1</td>
<td>Step-on wastepaper basket with inner liner and foot petal activated flip top.</td>
</tr>
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### Room Contents: General Exam/Treatment Room, ED (CED21) – Cont’d.

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<tbody>
<tr>
<td>F3200</td>
<td>Clock, Battery, 12&quot; Diameter</td>
<td>VV</td>
<td>1</td>
<td>Clock, 12&quot; diameter. Round surface, easy to read numbers with sweep second hand. Wall mounted unit for use when impractical to install a fully synchronized clock system. Battery operated, (batteries not included).</td>
</tr>
<tr>
<td>M0506</td>
<td>Television, Flat Screen</td>
<td>VV</td>
<td>1</td>
<td>Flat screen television with approximately 32” to 40” diagonal screen size. The TV will have built-in speakers, NTSC tuner, a 16:9 wide screen aspect ratio, a minimum of 1280 x 768 resolution and a remote control.</td>
</tr>
<tr>
<td>M0750</td>
<td>Flowmeter, Air, Connect w/50 PSI Supply</td>
<td>VV</td>
<td>1</td>
<td>Air flowmeter. Unit has a stainless-steel needle valve with clear flow tube for connection to 50 PSI air outlet from central pipeline system. Requires the appropriate adapter for connection to the wall outlet and fitting to connect to tubing. Database prices reflect fittings with an attached DISS power outlet. Other outlet and adapter configurations are available.</td>
</tr>
<tr>
<td>M0755</td>
<td>Flowmeter, Oxygen, Low Flow</td>
<td>VV</td>
<td>2</td>
<td>Oxygen flowmeter. Consists of a clear crystal flow tube calibrated to 3.5 or 8 LPM depending on manufacturer. For oxygen regulation in hospital settings. Database pricing includes DISS fitting and DISS power outlet and wall adapter. Other fitting and adapter configurations are available.</td>
</tr>
<tr>
<td>M0765</td>
<td>Regulator, Vacuum</td>
<td>VV</td>
<td>2</td>
<td>Vacuum pressure regulator for connection to central piped vacuum system. Standard display scale is graduated at least from 0 to 200 mm Hg of vacuum. Displays on specialized regulators may cover other vacuum ranges. Regulator type (continuous, intermittent, continuous/intermittent, surgical, pediatric, thoracic, etc.) as required. To be used in delivery, neonatal, pediatrics or any area where suction is required. Database pricing reflects continuous regulators graduated to 200 mm Hg with a full line vacuum selection switch and DISS configured inlets and outlets.</td>
</tr>
<tr>
<td>M3073</td>
<td>Container, Waste, Step-on, Fire Safe</td>
<td>VV</td>
<td>1</td>
<td>A waste container with a step-on lid. The container will have a capacity of approximately 12 gallons and be made of a fire safe material.</td>
</tr>
<tr>
<td>M4200</td>
<td>Otoscope/Ophthalmoscope, Wall Mounted</td>
<td>VV</td>
<td>1</td>
<td>Wall mounted otoscope and ophthalmoscope. Includes 6 foot line cord and plug and accepts and includes two handles. Contains head turn-on/turn-off, built-in speculum tray and 8 foot coiled cords. Unit is designed for use in patient exam rooms.</td>
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Room Contents: General Exam/Treatment Room, ED (CED21) – Cont’d.

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<tbody>
<tr>
<td>M4255</td>
<td>Stand, IV, Adjustable</td>
<td>VV</td>
<td>1</td>
<td>Adjustable IV stand with 4-hook arrangement. Stand has stainless steel construction with heavy weight base. It adjusts from 66 inches to 100 inches and is mounted on conductive rubber, ball bearing, swivel casters. Stand is used for administering intravenous solutions.</td>
</tr>
<tr>
<td>M4266</td>
<td>Pump, Volumetric, Infusion, Multiple Lines</td>
<td>VV</td>
<td>1</td>
<td>Volumetric infusion pump. Pump is self-regulating with automatic sensor and adjustable rate. Equipped with visual and audible alarms and up to 10 hour capacity battery. For the administration of a wide variety of therapeutic agents where precise control is required. Unit provides individual control to IV lines simultaneously.</td>
</tr>
<tr>
<td>M4655</td>
<td>Stretcher, Mobile, CRS, 9 Position</td>
<td>VV</td>
<td>1</td>
<td>Mobile stretcher. All corrosion resistant stainless-steel construction. It consists of a tubular frame with side rails, a 9-position hydraulic base with pneumatic Fowler adjustment, and a 2&quot; pad. Unit is mounted on 8&quot; conductive casters. Designed for patient transport as well as for minor surgical procedures.</td>
</tr>
<tr>
<td>M7040</td>
<td>Table, Overbed</td>
<td>VV</td>
<td>1</td>
<td>Overbed table. Adjustable height table constructed of heavy gauge steel. Mounted on 2&quot; diameter twin swivel casters with bumper caps. Tabletop is constructed with a high-pressure plastic laminated surface that resists chipping, scratching, and staining. It includes a vanity tray and a mirror. Table is designed for use over bed, wheelchair, or large chair.</td>
</tr>
<tr>
<td>M7405</td>
<td>Light, Exam, Ceiling Mounted</td>
<td>CC</td>
<td>1</td>
<td>Ceiling exam light. Consists of a lightheaded reflector supported by a ceiling mounted radial arm assembly that provides a wide range of positioning capabilities. Halogen bulbs and an intensity control provide cool, color corrected light. The minimum ceiling height in most cases is 8'-0&quot;; refer to each manufacturer’s specific installation requirements. Physical dimensions refer to the retracted light; one length of the dual swing arm around the center mount in width and depth and the combined height of the lamp head and folded arms. Unit may also have a center mount detachable and sterilizable control handle. For use in minor procedure or examination room applications.</td>
</tr>
</tbody>
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Room Contents: General Exam/Treatment Room, ED (CED21) – Cont’d.

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<tbody>
<tr>
<td>M7845</td>
<td>Monitor, Physiological, Bedside, 4 Channel, w/wall bracket</td>
<td>VV</td>
<td>1</td>
<td>4 channel bedside physiological monitor. The unit consist of a four-channel non-fade monochrome display monitor, an alarm system, and printer-recording capabilities. The monitor has color coded controls and automatic calibration. The unit displays up to four waveforms simultaneously. The parameters to be monitored are user selectable. The monitor may be connected to a central monitoring station. The unit monitors patients in most acute care areas, step-down units, procedure rooms and emergency rooms.</td>
</tr>
<tr>
<td>M7910</td>
<td>Thermometer, Electronic</td>
<td>VV</td>
<td>1</td>
<td>Electronic thermometer. Pocket size unit with easy to read zero Fahrenheit or zero Centigrade LCD display in approximately 20 seconds. Battery operated and enclosed in a heavy-duty plastic case. Unit is handheld portable and may be stand or wall mounted. For patient body temperature readings.</td>
</tr>
<tr>
<td>P3100</td>
<td>Lavatory, Vitreous China, Slab Type</td>
<td>CC</td>
<td>1</td>
<td>Wall mounted, slab type, vitreous china, lavatory (approximate bowl size 7”x15”x10”) with faucet holes on 4” centers; gooseneck spout; wrist blade handles; and grid strainer. It shall be suitable for use in clinics, offices, washrooms, or patient care area.</td>
</tr>
</tbody>
</table>
DISCLAIMER: ROOM TEMPLATES ARE GRAPHICAL REPRESENTATIONS OF SELECTED ROOM TYPES THAT ILLUSTRATE VA PLANNING REQUIREMENTS FOR SPACE, ROOM CONTENTS, AND ROOM SPECIFIC ENGINEERING SYSTEMS. THEY PROVIDE TYPICAL CONFIGURATIONS, PLANNING CRITERIA, AND GENERAL TECHNICAL GUIDANCE, AND ARE NOT INTENDED TO BE PROJECT SPECIFIC REQUIREMENTS.
Fast-Track Exam/Treatment Room, ED (CED22)

- **Light, Exam, Ceiling Mounted**: M7406
- **Television, Flat Screen**: M506
- **Bracket, Television, Ceiling Mounted**: A5215
- **Lift System, Overhead, Patient Room**: A1200
- **Track, Cubicle, Surface Mounted, With Curtain**: A5180

**Dimensions:**
- 12' - 6" (3.8m)
- 13' - 3" (4.04m)

**Area:**
- 160 NSF
- 14.80 NSM

**Disclaimer:** Room templates are graphical representations of selected room types that illustrate VA planning requirements for space, room contents, and room specific engineering systems. They provide typical configurations, planning criteria, and general technical guidance, and are not intended to be project specific requirements.
Room Data: Fast-Track Exam/Treatment Room, ED (CED22)

ARCHITECTURAL & INTERIOR DESIGN
Ceiling Finish: m: AT
Ceiling Height: 9’-0” (2700mm)
Wall Finish: m: GWB f: P
Wainscot: m: RWC h: 4’-0”
Base: m: RB h: 4” (100mm)
Floor Finish: m: LVT
Slab Depression: --
Sound Protection: STC 40
Doors: m: Alum t: dg: T s: V
Hardware Nr: N/A
Notes:
1. Manual glass sliding doors must be able to break out of the room for exiting. See Section 08 32 13.

HVAC
Refer to HVAC Design Manual in accordance with project requirements. Refer to the current version of Chapter 6, “Mechanical Room Data Sheets” for room temperatures, humidity range, room air change requirements, noise level, pressurization, and other information.

PLUMBING AND MEDICAL GASES
Cold Water: Yes
Hot Water: Yes
Sanitary Drain: Yes
Medical Air: Minimum 2 outlets/station
Medical Vacuum: Minimum 2 outlets/station
Oxygen: Minimum 2 outlets/station

FIRE PROTECTION
Refer to Fire Protection Design Manual for guidance on fire suppression and fire alarm device type and placement in accordance with project requirements.

POWER
Refer to the latest VA Electrical Design Manual for general electrical requirements.
Normal Power: To be connected to selected receptacles and equipment.
Emergency Power: Critical branch of the EES (Essential Electrical System) to be connected to selected receptacles and equipment.
Notes:
1. Coordinate electrical power requirements with specific vendor equipment.

LIGHTING
Refer to the latest VA Lighting Design Manual section 4.2.1 – Examination and Treatment Room for lighting design consideration.
Notes:
1. Coordinate lighting placement with ceiling track and ceiling track supports

COMMUNICATION/SPECIAL SYSTEMS
ADP: --
Data: Yes
Telephone: Yes
Intercom: --
Nurse Call: Yes
Public Address: --
Radio/Entertainment: As Required
MATV: --
CCTV: --
MID: --
Security/Duress: --
VTEL: --
VA Satellite TV: --
Count Down Clock: --
## Room Contents: Fast-Track Exam/Treatment Room, ED (CED22)

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<tbody>
<tr>
<td>A1010</td>
<td>Telecommunication Outlet</td>
<td>VV</td>
<td>4</td>
<td>Telecommunication outlet location.</td>
</tr>
<tr>
<td>A1014</td>
<td>Telephone, Wall Mounted, 1 Line, With Speaker</td>
<td>VV</td>
<td>1</td>
<td>Telephone, wall mounted, 1 line, with speaker.</td>
</tr>
<tr>
<td>A1110</td>
<td>Headwall, Prefabricated, General, 1-2 bed</td>
<td>CC</td>
<td>2</td>
<td>1-2 bed, general, prefabricated headwall. Unit consists of a patient service module for general care, single or double bed type. It contains lighting, medical gases, electrical outlets, nurse call and bed bumper. Specify number and type of medical gas and electrical outlets. Size of module will vary by type and configuration of outlets.</td>
</tr>
<tr>
<td>A1200</td>
<td>Lift System, Overhead, Patient Room</td>
<td>VC</td>
<td>1</td>
<td>An overhead rail system specifically designed for patient lifting and movement for a single bed patient room. The system will consist of recessed, or ceiling mounted primary and secondary rails, lift motor with rolling carriage, patient harness or seat, and a hand controller or control box with charger. System will facilitate lifting and movement of patient to and from bed to gurney, chair or other requirement. Minimum lift capability is 550 pounds. Custom design of track layout by manufacturer is essential to meet individual facility requirements.</td>
</tr>
<tr>
<td>A5075</td>
<td>Dispenser, Soap, Disposable</td>
<td>VV</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, top filling, liquid soap dispenser. Dispenser features: corrosion-resistant valve, push-in type and operable with one hand; heavy duty hinge and key lock lid; and vandal resistant concealed mounting. Minimum capacity 40 fluid ounces. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5077</td>
<td>Dispenser, Hand Sanitizer, Hands-Free</td>
<td>VV</td>
<td>1</td>
<td>A touch free wall-mounted hand sanitizer dispenser. For use throughout a healthcare facility. Unit does not include the sanitizing liquid. Units are battery operated.</td>
</tr>
<tr>
<td>A5079</td>
<td>Dispenser, Disinfectant Wipes, Wall Mount</td>
<td>VV</td>
<td>1</td>
<td>Wall-Mounted, wire dispenser bracket for large sanitary cloth canisters, Labeled &quot;Not for use on skin&quot;</td>
</tr>
<tr>
<td>A5080</td>
<td>Dispenser, Paper Towel, SS, Surface Mounted</td>
<td>CC</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, single-fold, paper towel dispenser. Dispenser features: tumbler lock; front hinged at bottom; and refill indicator slot. Minimum capacity 400 single-fold paper towels. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5093</td>
<td>Emesis Bag, Wall, Adult</td>
<td>VV</td>
<td>1</td>
<td>Wall-mounted dispenser for emesis bags. Holds biodegradable containment bags and facilitates individual dispensing when needed.</td>
</tr>
<tr>
<td>A5094</td>
<td>PPE / Mask-Holder, Wall-mount</td>
<td>VV</td>
<td>1</td>
<td>Wall-mounted personal protection organizer. Accommodates different glove sizes, mask boxes and isolation gowns</td>
</tr>
</tbody>
</table>
**Room Contents: Fast-Track Exam/Treatment Room, ED (CED22) – Cont’d.**

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<tbody>
<tr>
<td>A5107</td>
<td>Dispenser, Glove, Surgical/Examination, Wall Mounted</td>
<td>VV</td>
<td>1</td>
<td>Examination three (Small Medium, Large) glove dispenser box for wall mounting. Fabricated of either cold rolled steel with a white baked enamel finish, plastic, or acrylic. Hardware not included; Option 3 powder coated steel.</td>
</tr>
<tr>
<td>A5108</td>
<td>Waste Disposal Unit, Sharps</td>
<td>VV</td>
<td>1</td>
<td>A container for collecting and transporting syringes and other sharps for decontamination and disposal. Available in 2 gallon and 8 gallon with locking rotor. Complies with OSHA regulations for handling sharps.</td>
</tr>
<tr>
<td>A5145</td>
<td>Hook, Garment, Double, SS, Surface Mounted</td>
<td>CC</td>
<td>2</td>
<td>A surface mounted, satin finish stainless steel, double garment hook. Equipped with a concealed mounting bracket that is secured to a concealed wall plate. For general purpose use throughout the facility to hang various items of apparel.</td>
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<tr>
<td>A5180</td>
<td>Track, Cubicle, Surface Mounted, With Curtain</td>
<td>VV</td>
<td>10</td>
<td>Surface mounted cubicle track, with curtain. Track constructed of thick extruded aluminum. Equipped with self-lubricating carriers, beaded drop chain hooks, and flame-resistant curtain. To include removable end caps. Designed to be suspended around patient areas where privacy is needed. Price listed is per foot of the track, curtains to be priced per quote.</td>
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<td>Bracket, Television, Ceiling Mounted</td>
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<td>1</td>
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<td>Upholstered side chair, 32&quot; high X 21&quot; wide X 23&quot; deep with arms, padded seats, and padded backs. Seat height is a minimum of 17&quot;. Available with or without sled base.</td>
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<td>Step-on wastepaper basket with inner liner and foot petal activated flip top.</td>
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<tr>
<td>M0506</td>
<td>Television, Flat Screen</td>
<td>VV</td>
<td>1</td>
<td>Flat screen television with approximately 32” to 40” diagonal screen size. The TV will have built-in speakers, NTSC tuner, a 16:9 wide screen aspect ratio, a minimum of 1280 x 768 resolution and a remote control.</td>
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<td>Flowmeter, Air, Connect w/50 PSI Supply</td>
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<td>Air flowmeter. Unit has a stainless-steel needle valve with clear flow tube for connection to 50 PSI air outlet from central pipeline system. Requires the appropriate adapter for connection to the wall outlet and fitting to connect to tubing. Database prices reflect fittings with an attached DISS power outlet. Other outlet and adapter configurations are available.</td>
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<td>Container, Waste, Step-on, Fire Safe</td>
<td>VV</td>
<td>1</td>
<td>A waste container with a step-on lid. The container will have a capacity of approximately 12 gallons and be made of a fire safe material.</td>
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<tr>
<td>M4200</td>
<td>Otoscope/Ophthalmoscope, Wall Mounted</td>
<td>VV</td>
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<td>Wall mounted otoscope and ophthalmoscope. Includes 6 foot line cord and plug and accepts and includes two handles. Contains head turn-on/turn-off, built-in speculum tray and 8 foot coiled cords. Unit is designed for use in patient exam rooms.</td>
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<td>M4255</td>
<td>Stand, IV, Adjustable</td>
<td>VV</td>
<td>1</td>
<td>Adjustable IV stand with 4-hook arrangement. Stand has stainless steel construction with heavy weight base. It adjusts from 66 inches to 100 inches and is mounted on conductive rubber, ball bearing, swivel casters. Stand is used for administering intravenous solutions.</td>
</tr>
<tr>
<td>M4266</td>
<td>Pump, Volumetric, Infusion, Multiple Lines</td>
<td>VV</td>
<td>1</td>
<td>Volumetric infusion pump. Pump is self-regulating with automatic sensor and adjustable rate. Equipped with visual and audible alarms and up to 10 hour capacity battery. For the administration of a wide variety of therapeutic agents where precise control is required. Unit provides individual control to IV lines simultaneously.</td>
</tr>
<tr>
<td>M4653</td>
<td>Stretcher, Chair, Ophthalmic Surgical</td>
<td>VV</td>
<td>1</td>
<td>An eye surgery stretcher which adjusts from horizontal to a chair position. Stretcher has dual articulating headpiece for multiple ophthalmic surgical positioning; features dual hydraulic jacks, swing down side rails, oxygen holder, independently movable foot section, and IV receptacles. Minimum 400 pound weight capacity.</td>
</tr>
<tr>
<td>M7040</td>
<td>Table, Overbed</td>
<td>VV</td>
<td>1</td>
<td>Overbed table. Adjustable height table constructed of heavy gauge steel. Mounted on 2” diameter twin swivel casters with bumper caps. Tabletop is constructed with a high-pressure plastic laminated surface that resists chipping, scratching, and staining. It includes a vanity tray and a mirror. Table is designed for use over bed, wheelchair, or large chair.</td>
</tr>
<tr>
<td>M7405</td>
<td>Light, Exam, Ceiling Mounted</td>
<td>CC</td>
<td>1</td>
<td>Ceiling exam light. Consists of a lightheaded reflector supported by a ceiling mounted radial arm assembly that provides a wide range of positioning capabilities. Halogen bulbs and an intensity control provide cool, color corrected light. The minimum ceiling height in most cases is 8’-0”; refer to each manufacturer’s specific installation requirements. Physical dimensions refer to the retracted light; one length of the dual swing arm around the center mount in width and depth and the combined height of the lamp head and folded arms. Unit may also have a center mount detachable and sterilizable control handle. For use in minor procedure or examination room applications.</td>
</tr>
</tbody>
</table>
Room Contents: Fast-Track Exam/Treatment Room, ED (CED22) – Cont’d.

<table>
<thead>
<tr>
<th>JSN</th>
<th>Content Name</th>
<th>Acq Code</th>
<th>Qty</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>M7845</td>
<td>Monitor, Physiological, Bedside, 4 Channel, w/wall bracket</td>
<td>VV</td>
<td>1</td>
<td>4 channel bedside physiological monitor. The unit consist of a four-channel non-fade monochrome display monitor, an alarm system, and printer-recording capabilities. The monitor has color coded controls and automatic calibration. The unit displays up to four waveforms simultaneously. The parameters to be monitored are user selectable. The monitor may be connected to a central monitoring station. The unit monitors patients in most acute care areas, step-down units, procedure rooms and emergency rooms.</td>
</tr>
<tr>
<td>M7910</td>
<td>Thermometer, Electronic</td>
<td>VV</td>
<td>1</td>
<td>Electronic thermometer. Pocket size unit with easy to read zero Fahrenheit or zero Centigrade LCD display in approximately 20 seconds. Battery operated and enclosed in a heavy-duty plastic case. Unit is hand-held portable and may be stand or wall mounted. For patient body temperature readings.</td>
</tr>
<tr>
<td>P3100</td>
<td>Lavatory, Vitreous China, Slab Type</td>
<td>CC</td>
<td>1</td>
<td>Wall mounted, slab type, vitreous china, lavatory (approximate bowl size 7”x15”x10””) with faucet holes on 4” centers; gooseneck spout; wrist blade handles; and grid strainer. It shall be suitable for use in clinics, offices, washrooms, or patient care area.</td>
</tr>
</tbody>
</table>


Emergency Department
BARIATRIC PATIENT EXAM/TREATMENT, ED (CED23)
AXONOMETRIC

Plot Date: 11/16/2021 3:02:31 PM

SCALE:

DISCLAIMER: ROOM TEMPLATES ARE GRAPHICAL REPRESENTATIONS OF SELECTED ROOM TYPES THAT ILLUSTRATE VA PLANNING REQUIREMENTS FOR SPACE, ROOM CONTENTS, AND ROOM SPECIFIC ENGINEERING SYSTEMS. THEY PROVIDE TYPICAL CONFIGURATIONS, PLANNING CRITERIA, AND GENERAL TECHNICAL GUIDANCE, AND ARE NOT INTENDED TO BE PROJECT SPECIFIC REQUIREMENTS.
BARIATRIC PATIENT EXAM/TREATMENT, ED (CED23)
REFLECTED CEILING PLAN

BARIATRIC PATIENT EXAM/TREATMENT ROOM, ED (CED23)

DISCLAIMER: ROOM TEMPLATES ARE GRAPHICAL REPRESENTATIONS OF SELECTED ROOM TYPES THAT ILLUSTRATE VA PLANNING REQUIREMENTS FOR SPACE, ROOM CONTENTS, AND ROOM SPECIFIC ENGINEERING SYSTEMS. THEY PROVIDE TYPICAL CONFIGURATIONS, PLANNING CRITERIA, AND GENERAL TECHNICAL GUIDANCE, AND ARE NOT INTENDED TO BE PROJECT SPECIFIC REQUIREMENTS.
ELEVATION 1

- A5045: Artwork, Decorative, With Frame
- F0205: Chair, Side With Arms
- A1203: Lift System, Overhead, Bariatric
- A5145: Hook, Garment, Double SS, Surface Mounted
- A5094: PPE / Mask-Holder, Wall-mount
- A5077: Dispenser, Hand Sanitizer, Hands-Free
- Wainscot

ELEVATION 2

- A5094: PPE / Mask-Holder, Wall-mount
- A5077: Dispenser, Hand Sanitizer, Hands-Free
- A5215: Bracket, Television, Ceiling Mounted
- M0506: Television, Flat Screen
- A1203: Lift System, Overhead, Bariatric
- A5075: Dispenser, Soap, Disposable
- P3100: Lavatory, Vitreous China, Slab Type
- A5180: Track, Cubicle, Surface Mounted, With Curtain

DISCLAIMER: ROOM TEMPLATES ARE GRAPHICAL REPRESENTATIONS OF SELECTED ROOM TYPES THAT ILLUSTRATE VA PLANNING REQUIREMENTS FOR SPACE, ROOM CONTENTS, AND ROOM SPECIFIC ENGINEERING SYSTEMS. THEY PROVIDE TYPICAL CONFIGURATIONS, PLANNING CRITERIA, AND GENERAL TECHNICAL GUIDANCE, AND ARE NOT INTENDED TO BE PROJECT SPECIFIC REQUIREMENTS.
Room Data: Bariatric Patient
Exam/Treatment Room, ED (CED23)

ARCHITECTURAL & INTERIOR DESIGN
Ceiling Finish: m: AT
Ceiling Height: 9'-0" (2700mm)
Wall Finish: m: GWB f: P
Wainscot: m: RWC h: 4'-0"
Base: m: RB h: 4" (100mm)
Floor Finish: m: LVT
Slab Depression: --
Sound Protection: STC 40
Doors: m: Alum t: dg: T s: V
Hardware Nr: N/A

Notes:
1. Manual glass sliding doors must be able to break out of the room for exiting. See Section 08 32 13.

HVAC
Refer to HVAC Design Manual in accordance with project requirements. Refer to the current version of Chapter 6, “Mechanical Room Data Sheets” for room temperatures, humidity range, room air change requirements, noise level, pressurization, and other information.

PLUMBING AND MEDICAL GASES
Cold Water: Yes
Hot Water: Yes
Sanitary Drain: Yes
Medical Air: Minimum 2 outlets/station
Medical Vacuum: Minimum 2 outlets/station
Oxygen: Minimum 2 outlets/station

FIRE PROTECTION
Refer to Fire Protection Design Manual for guidance on fire suppression and fire alarm device type and placement in accordance with project requirements.

POWER
Refer to the latest VA Electrical Design Manual for general electrical requirements.

Normal Power: To be connected to selected receptacles and equipment.

Emergency Power: Critical branch of the EES (Essential Electrical System) to be connected to selected receptacles and equipment.

Notes:
1. Coordinate electrical power requirements with specific vendor equipment.

LIGHTING
Refer to the latest VA Lighting Design Manual section 4.2.1 – Examination and Treatment Room for lighting design consideration.

Notes:
1. Coordinate lighting placement with ceiling track and ceiling track supports.

COMMUNICATION/SPECIAL SYSTEMS
ADP: --
Data: Yes
Telephone: Yes
Intercom: --
Nurse Call: Yes
Public Address: --
Radio/Entertainment: As Required
MATV: --
CCTV: --
MID: --
Security/Duress: --
VTEL: --
VA Satellite TV: --
Count Down Clock: --
# Room Contents: Bariatric Patient Exam/Treatment Room, ED (CED23)

<table>
<thead>
<tr>
<th>JSN</th>
<th>Content Name</th>
<th>Acq Code</th>
<th>Qty</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A1010</td>
<td>Telecommunication Outlet</td>
<td>VV</td>
<td>4</td>
<td>Telecommunication outlet location.</td>
</tr>
<tr>
<td>A1014</td>
<td>Telephone, Wall Mounted, 1 Line, With Speaker</td>
<td>VV</td>
<td>1</td>
<td>Telephone, wall mounted, 1 line, with speaker.</td>
</tr>
<tr>
<td>A1110</td>
<td>Headwall, Prefabricated, General, 1-2 bed</td>
<td>CC</td>
<td>2</td>
<td>1-2 bed, general, prefabricated headwall. Unit consists of a patient service module for general care, single or double bed type. It contains lighting, medical gases, electrical outlets, nurse call and bed bumper. Specify number and type of medical gas and electrical outlets. Size of module will vary by type and configuration of outlets.</td>
</tr>
<tr>
<td>A1203</td>
<td>Lift System, Overhead, Bariatric</td>
<td>VC</td>
<td>1</td>
<td>An overhead ceiling mounted rail system specifically designed for bariatric patient lifting and movement within a patient room. The system will consist of recessed, or ceiling mounted primary and secondary rails, lift motor with carriage, patient harness or seat, and a hand controller or control box with charger (other charging options may be available). System will facilitate lifting and movement of patient to and from bed to stretcher, chair, bathroom, or other requirements. Lifting capacity is ~1,000lbs pounds. Custom design of track layout by manufacturer is essential to meet individual facility requirements.</td>
</tr>
<tr>
<td>A5075</td>
<td>Dispenser, Soap, Disposable</td>
<td>VV</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, top filling, liquid soap dispenser. Dispenser features: corrosion-resistant valve, push-in type and operable with one hand; heavy duty hinge and key lock lid; and vandal resistant concealed mounting. Minimum capacity 40 fluid ounces. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5077</td>
<td>Dispenser, Hand Sanitizer, Hands-Free</td>
<td>VV</td>
<td>1</td>
<td>A touch free wall-mounted hand sanitizer dispenser. For use throughout a healthcare facility. Unit does not include the sanitizing liquid. Units are battery operated.</td>
</tr>
<tr>
<td>A5079</td>
<td>Dispenser, Disinfectant Wipes, Wall Mount</td>
<td>VV</td>
<td>1</td>
<td>Wall-Mounted, wire dispenser bracket for large sanitary cloth canisters, Labeled &quot;Not for use on skin&quot;</td>
</tr>
<tr>
<td>A5080</td>
<td>Dispenser, Paper Towel, SS, Surface Mounted</td>
<td>CC</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, single-fold, paper towel dispenser. Dispenser features: tumbler lock; front hinged at bottom; and refill indicator slot. Minimum capacity 400 single-fold paper towels. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5093</td>
<td>Emesis Bag, Wall, Adult</td>
<td>VV</td>
<td>1</td>
<td>Wall-mounted dispenser for emesis bags. Holds biodegradable containment bags and facilitates individual dispensing when needed</td>
</tr>
<tr>
<td>A5094</td>
<td>PPE / Mask-Holder, Wall-mount</td>
<td>VV</td>
<td>1</td>
<td>Wall-mounted personal protection organizer. Accommodates different glove sizes, mask boxes and isolation gowns</td>
</tr>
</tbody>
</table>
### Room Contents: Bariatric Patient Exam/Treatment Room, ED (CED23) – Cont’d.

<table>
<thead>
<tr>
<th>JSN</th>
<th>Content Name</th>
<th>Acq Code</th>
<th>Qty</th>
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</tr>
</thead>
<tbody>
<tr>
<td>A5107</td>
<td>Dispenser, Glove, Surgical/Examination, Wall Mounted</td>
<td>VV</td>
<td>1</td>
<td>Examination three (Small Medium, Large) glove dispenser box for wall mounting. Fabricated of either cold rolled steel with a white baked enamel finish, plastic, or acrylic. Hardware not included; Option 3 powder coated steel.</td>
</tr>
<tr>
<td>A5108</td>
<td>Waste Disposal Unit, Sharps</td>
<td>VV</td>
<td>1</td>
<td>A container for collecting and transporting syringes and other sharps for decontamination and disposal. Available in 2 gallon and 8 gallon with locking rotor. Complies with OSHA regulations for handling sharps.</td>
</tr>
<tr>
<td>A5145</td>
<td>Hook, Garment, Double, SS, Surface Mounted</td>
<td>CC</td>
<td>2</td>
<td>A surface mounted, satin finish stainless steel, double garment hook. Equipped with a concealed mounting bracket that is secured to a concealed wall plate. For general purpose use throughout the facility to hang various items of apparel.</td>
</tr>
<tr>
<td>A5180</td>
<td>Track, Cubicle, Surface Mounted, With Curtain</td>
<td>VV</td>
<td>12</td>
<td>Surface mounted cubicle track, with curtain. Track constructed of thick extruded aluminum. Equipped with self-lubricating carriers, beaded drop chain hooks, and flame-resistant curtain. To include removable end caps. Designed to be suspended around patient areas where privacy is needed. Price listed is per foot of the track, curtains to be priced per quote.</td>
</tr>
<tr>
<td>A5215</td>
<td>Bracket, Television, Ceiling Mounted</td>
<td>CC</td>
<td>1</td>
<td>Ceiling mounted television bracket for flat panel LCD and Plasma screens. The bracket shall be a universal style mount with a load capacity of 200 pounds with adjustments of 0-15 degree tilt and 360 degree swivel. Shall be capable of accommodating various size units.</td>
</tr>
<tr>
<td>A6046</td>
<td>Artwork, Decorative, With Frame</td>
<td>VV</td>
<td>1</td>
<td>This JSN is to be used for determining and defining location of decorative artwork.</td>
</tr>
<tr>
<td>E0945</td>
<td>Cart, Computer, Mobile</td>
<td>VV</td>
<td>1</td>
<td>A mobile computer cart for use throughout the facility. The cart dimensions will be approximately 45&quot; H x 30&quot; W x 22&quot; D with casters. May include drawers and miscellaneous other accessories that will be determined at time of purchase.</td>
</tr>
<tr>
<td>E0948</td>
<td>Cart, General Storage, Mobile, 42&quot;H x 32&quot;W,22&quot;D</td>
<td>VV</td>
<td>1</td>
<td>This typical includes: 1 Cart Body, Style-A Narrow, w/Raised Edge Top; 2 Drawers, 3&quot; H; 4 Drawers, 6&quot; H; 1 Accessory Rail, Side; Drawer Organizer Bins</td>
</tr>
<tr>
<td>F0205</td>
<td>Chair, Side With Arms, Bariatric</td>
<td>VV</td>
<td>1</td>
<td>Upholstered side chair, 32&quot; high X 21&quot; wide X 23&quot; deep with arms, padded seats, and padded backs. Seat height is a minimum of 17&quot;. Available with or without sled base.</td>
</tr>
<tr>
<td>F2010</td>
<td>Basket, Wastepaper, Step-On</td>
<td>VV</td>
<td>1</td>
<td>Step-on wastepaper basket with inner liner and foot petal activated flip top.</td>
</tr>
</tbody>
</table>
Room Contents: Bariatric Patient Exam/Treatment Room, ED (CED23) – Cont’d.

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>F3200</td>
<td>Clock, Battery, 12&quot; Diameter</td>
<td>VV</td>
<td>1</td>
<td>Clock, 12&quot; diameter. Round surface, easy to read numbers with sweep second hand. Wall mounted unit for use when impractical to install a fully synchronized clock system. Battery operated, (batteries not included).</td>
</tr>
<tr>
<td>M0506</td>
<td>Television, Flat Screen</td>
<td>VV</td>
<td>1</td>
<td>Flat screen television with approximately 32” to 40’ diagonal screen size. The TV will have built-in speakers, NTSC tuner, a 16:9 wide screen aspect ratio, a minimum of 1280 x 768 resolution and a remote control.</td>
</tr>
<tr>
<td>M0750</td>
<td>Flowmeter, Air, Connect w/50 PSI Supply</td>
<td>VV</td>
<td>1</td>
<td>Air flowmeter. Unit has a stainless-steel needle valve with clear flow tube for connection to 50 PSI air outlet from central pipeline system. Requires the appropriate adapter for connection to the wall outlet and fitting to connect to tubing. Database prices reflect fittings with an attached DISS power outlet. Other outlet and adapter configurations are available.</td>
</tr>
<tr>
<td>M0755</td>
<td>Flowmeter, Oxygen, Low Flow</td>
<td>VV</td>
<td>2</td>
<td>Oxygen flowmeter. Consists of a clear crystal flow tube calibrated to 3.5 or 8 LPM depending on manufacturer. For oxygen regulation in hospital settings. Database pricing includes DISS fitting and DISS power outlet and wall adapter. Other fitting and adapter configurations are available.</td>
</tr>
<tr>
<td>M0765</td>
<td>Regulator, Vacuum</td>
<td>VV</td>
<td>2</td>
<td>Vacuum pressure regulator for connection to central piped vacuum system. Standard display scale is graduated at least from 0 to 200 mm Hg of vacuum. Displays on specialized regulators may cover other vacuum ranges. Regulator type (continuous, intermittent, continuous/intermittent, surgical, pediatric, thoracic, etc.) as required. To be used in delivery, neonatal, pediatrics or any area where suction is required. Database pricing reflects continuous regulators graduated to 200 mm Hg with a full line vacuum selection switch and DISS configured inlets and outlets.</td>
</tr>
<tr>
<td>M3073</td>
<td>Container, Waste, Step-on, Fire Safe</td>
<td>VV</td>
<td>1</td>
<td>A waste container with a step-on lid. The container will have a capacity of approximately 12 gallons and be made of a fire safe material.</td>
</tr>
<tr>
<td>M4200</td>
<td>Otoscope/Ophthalmoscope, Wall Mounted</td>
<td>VV</td>
<td>1</td>
<td>Wall mounted otoscope and ophthalmoscope. Includes 6 foot line cord and plug and accepts and includes two handles. Contains head turn-on/turn-off, built-in speculum tray and 8 foot coiled cords. Unit is designed for use in patient exam rooms.</td>
</tr>
</tbody>
</table>
Room Contents: Bariatric Patient Exam/Treatment Room, ED (CED23) – Cont’d.

<table>
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<tr>
<th>JSN</th>
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</thead>
<tbody>
<tr>
<td>M4255</td>
<td>Stand, IV, Adjustable</td>
<td>VV</td>
<td>1</td>
<td>Adjustable IV stand with 4-hook arrangement. Stand has stainless steel construction with heavy weight base. It adjusts from 66 inches to 100 inches and is mounted on conductive rubber, ball bearing, swivel casters. Stand is used for administering intravenous solutions.</td>
</tr>
<tr>
<td>M4266</td>
<td>Pump, Volumetric, Infusion, Multiple Lines</td>
<td>VV</td>
<td>1</td>
<td>Volumetric infusion pump. Pump is self-regulating with automatic sensor and adjustable rate. Equipped with visual and audible alarms and up to 10 hour capacity battery. For the administration of a wide variety of therapeutic agents where precise control is required. Unit provides individual control to IV lines simultaneously.</td>
</tr>
<tr>
<td>M4655</td>
<td>Stretcher, Mobile, CRS, 9 Position</td>
<td>VV</td>
<td>1</td>
<td>Mobile stretcher. All corrosion resistant stainless-steel construction. It consists of a tubular frame with side rails, a 9-position hydraulic base with pneumatic Fowler adjustment, and a 2” pad. Unit is mounted on 8” conductive casters. Designed for patient transport as well as for minor surgical procedures.</td>
</tr>
<tr>
<td>M7040</td>
<td>Table, Overbed</td>
<td>VV</td>
<td>1</td>
<td>Overbed table. Adjustable height table constructed of heavy gauge steel. Mounted on 2” diameter twin swivel casters with bumper caps. Tabletop is constructed with a high-pressure plastic laminated surface that resists chipping, scratching, and staining. It includes a vanity tray and a mirror. Table is designed for use over bed, wheelchair, or large chair.</td>
</tr>
<tr>
<td>M7405</td>
<td>Light, Exam, Ceiling Mounted</td>
<td>CC</td>
<td>1</td>
<td>Ceiling exam light. Consists of a lighted reflector supported by a ceiling mounted radial arm assembly that provides a wide range of positioning capabilities. Halogen bulbs and an intensity control provide cool, color corrected light. The minimum ceiling height in most cases is 8’-0”; refer to each manufacturer’s specific installation requirements. Physical dimensions refer to the retracted light; one length of the dual swing arm around the center mount in width and depth and the combined height of the lamp head and folded arms. Unit may also have a center mount detachable and sterilizable control handle. For use in minor procedure or examination room applications.</td>
</tr>
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Room Contents: Bariatric Patient Exam/Treatment Room, ED (CED23) – Cont’d.

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<tr>
<td>M7845</td>
<td>Monitor, Physiological, Bedside, 4 Channel, w/wall bracket</td>
<td>VV</td>
<td>1</td>
<td>4 channel bedside physiological monitor. The unit consist of a four-channel non-fade monochrome display monitor, an alarm system, and printer-recording capabilities. The monitor has color coded controls and automatic calibration. The unit displays up to four waveforms simultaneously. The parameters to be monitored are user selectable. The monitor may be connected to a central monitoring station. The unit monitors patients in most acute care areas, step-down units, procedure rooms and emergency rooms.</td>
</tr>
<tr>
<td>M7910</td>
<td>Thermometer, Electronic</td>
<td>VV</td>
<td>1</td>
<td>Electronic thermometer. Pocket size unit with easy to read zero Fahrenheit or zero Centigrade LCD display in approximately 20 seconds. Battery operated and enclosed in a heavy-duty plastic case. Unit is hand-held portable and may be stand or wall mounted. For patient body temperature readings.</td>
</tr>
<tr>
<td>P3100</td>
<td>Lavatory, Vitreous China, Slab Type</td>
<td>CC</td>
<td>1</td>
<td>Wall mounted, slab type, vitreous china, lavatory (approximate bowl size 7”x15”x10”) with faucet holes on 4” centers; gooseneck spout; wrist blade handles; and grid strainer. It shall be suitable for use in clinics, offices, washrooms, or patient care area.</td>
</tr>
<tr>
<td>P8705</td>
<td>Dialysis Box, Recessed, Single Valve</td>
<td>CC</td>
<td>1</td>
<td>A single cold water valve supply, recessed dialysis box with door. Box is constructed of stainless steel and includes the following standard equipment: cold water valve with 1/2” nom. copper female inlet, 3/4” male hose thread outlet and vacuum breaker; discharge hose bracket, wastewater receptor, and removable wall flange. For use only in the ICU and other acute areas when a patient cannot be moved to the dialysis unit.</td>
</tr>
</tbody>
</table>
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Emergency Department
GYN EXAM/TREATMENT ROOM, ED (CED24)
ED GYN PATIENT TOILET/SHOWER, BLDG SPRT (SB171)
FLOOR PLAN (160 NSF / 14.86 NSM)

Plot Date: 11/16/2021 3:07:06 PM
SCALE: 1/4" = 1'-0"

December 1, 2021

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Emergency Department
GYN EXAM/TREATMENT ROOM, ED (CED24)
ED GYN PATIENT TOILET/SHOWER, BLDG SPRT (SB171)
ELEVATIONS

Plot Date: 11/16/2021 3:07:08 PM
SCALE: 1/4" = 1'-0"

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Emergency Department
GYN EXAM/TREATMENT ROOM, ED (CED24)
ED GYN PATIENT TOILET/SHOWER, BLDG SPRT
ELEVATIONS

Plot Date: 11/16/2021 3:07:12 PM
SCALE: 1/4" = 1'-0"

ELEVATION 7

ELEVATION 8

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Room Data: GYN Exam/Treatment Room, ED (CED24)

ARCHITECTURAL & INTERIOR DESIGN
Ceiling Finish: m: AT
Ceiling Height: 9’-0” (2700mm)
Wall Finish: m: GWB f: P
Wainscot: m: RWC h: 4’-0”
Base: m: RB h: 4” (100mm)
Floor Finish: m: LVT
Slab Depression: --
Sound Protection: STC 40
Doors: m: Alum t: dg: T s: V
Hardware Nr: N/A
Notes:
1. Manual glass sliding doors must be able to break out of the room for exiting. See Section 08 32 13.

HVAC
Refer to HVAC Design Manual in accordance with project requirements. Refer to the current version of Chapter 6, “Mechanical Room Data Sheets” for room temperatures, humidity range, room air change requirements, noise level, pressurization, and other information.

PLUMBING AND MEDICAL GASES
Cold Water: Yes
Hot Water: Yes
Sanitary Drain: Yes
Medical Air: Minimum 2 outlets/station
Medical Vacuum: Minimum 2 outlets/station
Oxygen: Minimum 2 outlets/station

FIRE PROTECTION
Refer to Fire Protection Design Manual for guidance on fire suppression and fire alarm device type and placement in accordance with project requirements.

POWER
Refer to the latest VA Electrical Design Manual for general electrical requirements.

Normal Power: To be connected to selected receptacles and equipment.

Emergency Power: Critical branch of the EES (Essential Electrical System) to be connected to selected receptacles and equipment.

Notes:
1. Coordinate electrical power requirements with specific vendor equipment.

LIGHTING
Refer to the latest VA Lighting Design Manual section 4.2.1 – Examination and Treatment Room for lighting design consideration.

Notes:
1. Coordinate lighting placement with ceiling track and ceiling track supports.

COMMUNICATION/SPECIAL SYSTEMS
ADP: --
Data: Yes
Telephone: Yes
Intercom: --
Nurse Call: Yes
Public Address: --
Radio/Entertainment: As Required
MATV: --
CCTV: --
MID: --
Security/Duress: --
VTEL: --
VA Satellite TV: --
Count Down Clock: --
## Room Contents: GYN Exam/Treatment Room, ED (CED24)

<table>
<thead>
<tr>
<th>JSN</th>
<th>Content Name</th>
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<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A1010</td>
<td>Telecommunication Outlet</td>
<td>VV</td>
<td>4</td>
<td>Telecommunication outlet location.</td>
</tr>
<tr>
<td>A1014</td>
<td>Telephone, Wall Mounted, 1 Line, With Speaker</td>
<td>VV</td>
<td>1</td>
<td>Telephone, wall mounted, 1 line, with speaker.</td>
</tr>
<tr>
<td>A1110</td>
<td>Headwall, Prefabricated, General, 1-2 bed</td>
<td>CC</td>
<td>2</td>
<td>1-2 bed, general, prefabricated headwall. Unit consists of a patient service module for general care, single or double bed type. It contains lighting, medical gases, electrical outlets, nurse call and bed bumper. Specify number and type of medical gas and electrical outlets. Size of module will vary by type and configuration of outlets.</td>
</tr>
<tr>
<td>A1200</td>
<td>Lift System, Overhead, Patient Room</td>
<td>VC</td>
<td>1</td>
<td>An overhead rail system specifically designed for patient lifting and movement for a single bed patient room. The system will consist of recessed, or ceiling mounted primary and secondary rails, lift motor with rolling carriage, patient harness or seat, and a hand controller or control box with charger. System will facilitate lifting and movement of patient to and from bed to gurney, chair or other requirement. Minimum lift capability is 550 pounds. Custom design of track layout by manufacturer is essential to meet individual facility requirements.</td>
</tr>
<tr>
<td>A5170</td>
<td>Rod, Shower Curtain, 1&quot; Diameter, W/Curtain &amp; Hooks</td>
<td>CC</td>
<td>1</td>
<td>A concealed mounted, 1&quot; outside diameter, satin finish stainless steel, shower curtain rod with white vinyl shower curtain (72&quot; H) and SS shower curtain hooks. Rod and curtain available in various widths. For general purpose use at shower stall or bathtub locations. Pricing based upon standard shower stall dimensions of 36&quot; x 36&quot; and a standard curtain height of 72&quot;.</td>
</tr>
<tr>
<td>A5075</td>
<td>Dispenser, Soap, Disposable</td>
<td>VV</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, top filling, liquid soap dispenser. Dispenser features: corrosion-resistant valve, push-in type and operable with one hand; heavy duty hinge and key lock lid; and vandal resistant concealed mounting. Minimum capacity 40 fluid ounces. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5077</td>
<td>Dispenser, Hand Sanitizer, Hands-Free</td>
<td>VV</td>
<td>1</td>
<td>A touch free wall-mounted hand sanitizer dispenser. For use throughout a healthcare facility. Unit does not include the sanitizing liquid. Units are battery operated.</td>
</tr>
<tr>
<td>A5079</td>
<td>Dispenser, Disinfectant Wipes, Wall Mount</td>
<td>VV</td>
<td>1</td>
<td>Wall-Mounted, wire dispenser bracket for large sanitary cloth canisters, Labeled &quot;Not for use on skin&quot;</td>
</tr>
</tbody>
</table>
### Room Contents: GYN Exam/Treatment Room, ED (CED24) – Cont’d.

<table>
<thead>
<tr>
<th>JSN</th>
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</tr>
</thead>
<tbody>
<tr>
<td>A5080</td>
<td>Dispenser, Paper Towel, SS, Surface Mounted</td>
<td>CC</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, single-fold, paper towel dispenser. Dispenser features: tumbler lock; front hinged at bottom; and refill indicator slot. Minimum capacity 400 single-fold paper towels. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5093</td>
<td>Emesis Bag, Wall, Adult</td>
<td>VV</td>
<td>1</td>
<td>Wall-mounted dispenser for emesis bags. Holds biodegradable containment bags and facilitates individual dispensing when needed</td>
</tr>
<tr>
<td>A5094</td>
<td>PPE / Mask-Holder, Wall-mount</td>
<td>VV</td>
<td>1</td>
<td>Wall-mounted personal protection organizer. Accommodates different glove sizes, mask boxes and isolation gowns</td>
</tr>
<tr>
<td>A5107</td>
<td>Dispenser, Glove, Surgical/Examination, Wall Mounted</td>
<td>VV</td>
<td>1</td>
<td>Examination three (Small, Medium, Large) glove dispenser box for wall mounting. Fabricated of either cold rolled steel with a white baked enamel finish, plastic, or acrylic. Hardware not included; Option 3 powder coated steel.</td>
</tr>
<tr>
<td>A5108</td>
<td>Waste Disposal Unit, Sharps</td>
<td>VV</td>
<td>1</td>
<td>A container for collecting and transporting syringes and other sharps for decontamination and disposal. Available in 2 gallon and 8 gallon with locking rotor. Complies with OSHA regulations for handling sharps.</td>
</tr>
<tr>
<td>A5180</td>
<td>Track, Cubicle, Surface Mounted, With Curtain</td>
<td>VV</td>
<td>12</td>
<td>Surface mounted cubicle track, with curtain. Track constructed of thick extruded aluminum. Equipped with self-lubricating carriers, beaded drop chain hooks, and flame-resistant curtain. To include removable end caps. Designed to be suspended around patient areas where privacy is needed. Price listed is per foot of the track, curtains to be priced per quote.</td>
</tr>
<tr>
<td>A5212</td>
<td>Bracket, Television, Wall-Mounted, Tilt/Angle</td>
<td>VV</td>
<td>1</td>
<td>A wall mounted, tilt/angled TV bracket for 37” to 80” TVs. Mount will be a universal and VESA compliant unit with a load capacity of up to 130 lbs.</td>
</tr>
<tr>
<td>A5220</td>
<td>Bracket, Television, Wall Backing</td>
<td>CC</td>
<td>1</td>
<td>Wall mounted television bracket backing which provides additional support and strength for the installation of the television bracket. Option available for interior or exterior plate and sized for 12” 16” or 24” stud spacing.</td>
</tr>
<tr>
<td>A6046</td>
<td>Artwork, Decorative, With Frame</td>
<td>VV</td>
<td>1</td>
<td>This JSN is to be used for determining and defining location of decorative artwork.</td>
</tr>
<tr>
<td>E0945</td>
<td>Cart, Computer, Mobile</td>
<td>VV</td>
<td>1</td>
<td>A mobile computer cart for use throughout the facility. The cart dimensions will be approximately 45” H x 30” W x 22” D with casters. May include drawers and miscellaneous other accessories that will be determined at time of purchase.</td>
</tr>
<tr>
<td>E0948</td>
<td>Cart, General Storage, Mobile, 42”H x 26”W,22”D; Gyn-Specific</td>
<td>VV</td>
<td>1</td>
<td>This typical includes: 1 Cart Body, Style-A Narrow, w/Raised Edge Top; 2 Drawers, 3” H; 4 Drawers, 6” H; 1 Accessory Rail, Side; Drawer Organizer Bins</td>
</tr>
<tr>
<td>JSN</td>
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</tr>
<tr>
<td>F0205</td>
<td>Chair, Side With Arms</td>
<td>VV</td>
<td>1</td>
<td>Upholstered side chair, 32&quot; high X 21&quot; wide X 23&quot; deep with arms, padded seats, and padded backs. Seat height is a minimum of 17&quot;. Available with or without sled base.</td>
</tr>
<tr>
<td>F2000</td>
<td>Basket, Wastepaper, Fire Resistant</td>
<td>VV</td>
<td>1</td>
<td>Wastepaper basket, fire resistant, approximately 40 quart capacity. This unit is used to collect and temporarily store small quantities of paper refuse in patient rooms, administrative areas, and nursing stations. Size and shape varies depending on the application and manufacturer selected.</td>
</tr>
<tr>
<td>F2010</td>
<td>Basket, Wastepaper, Step-On</td>
<td>VV</td>
<td>1</td>
<td>Step-on wastepaper basket with inner liner and foot petal activated flip top.</td>
</tr>
<tr>
<td>F3200</td>
<td>Clock, Battery, 12&quot; Diameter</td>
<td>VV</td>
<td>1</td>
<td>Clock, 12&quot; diameter. Round surface, easy to read numbers with sweep second hand. Wall mounted unit for use when impractical to install a fully synchronized clock system. Battery operated, (batteries not included).</td>
</tr>
<tr>
<td>M0506</td>
<td>Television, Flat Screen</td>
<td>VV</td>
<td>1</td>
<td>Flat screen television with approximately 32” to 40’ diagonal screen size. The TV will have built-in speakers, NTSC tuner, a 16:9 wide screen aspect ratio, a minimum of 1280 x 768 resolution and a remote control.</td>
</tr>
<tr>
<td>M0750</td>
<td>Flowmeter, Air, Connect w/50 PSI Supply</td>
<td>VV</td>
<td>1</td>
<td>Air flowmeter. Unit has a stainless-steel needle valve with clear flow tube for connection to 50 PSI air outlet from central pipeline system. Requires the appropriate adapter for connection to the wall outlet and fitting to connect to tubing. Database prices reflect fittings with an attached DISS power outlet. Other outlet and adapter configurations are available.</td>
</tr>
<tr>
<td>M0755</td>
<td>Flowmeter, Oxygen, Low Flow</td>
<td>VV</td>
<td>2</td>
<td>Oxygen flowmeter. Consists of a clear crystal flow tube calibrated to 3.5 or 8 LPM depending on manufacturer. For oxygen regulation in hospital settings. Database pricing includes DISS fitting and DISS power outlet and wall adapter. Other fitting and adapter configurations are available.</td>
</tr>
</tbody>
</table>
Room Contents: GYN Exam/Treatment Room, ED (CED24) – Cont’d.

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<tbody>
<tr>
<td>M0765</td>
<td>Regulator, Vacuum</td>
<td>VV</td>
<td>2</td>
<td>Vacuum pressure regulator for connection to central piped vacuum system. Standard display scale is graduated at least from 0 to 200 mm Hg of vacuum. Displays on specialized regulators may cover other vacuum ranges. Regulator type (continuous, intermittent, continuous/intermittent, surgical, pediatric, thoracic, etc.) as required. To be used in delivery, neonatal, pediatrics or any area where suction is required. Database pricing reflects continuous regulators graduated to 200 mm Hg with a full line vacuum selection switch and DISS configured inlets and outlets.</td>
</tr>
<tr>
<td>M3073</td>
<td>Container, Waste, Step-on, Fire Safe</td>
<td>VV</td>
<td>1</td>
<td>A waste container with a step-on lid. The container will have a capacity of approximately 12 gallons and be made of a fire safe material.</td>
</tr>
<tr>
<td>M4200</td>
<td>Otoscope/Ophthalmoscope, Wall Mounted</td>
<td>VV</td>
<td>1</td>
<td>Wall mounted otoscope and ophthalmoscope. Includes 6 foot line cord and plug and accepts and includes two handles. Contains head turn-on/turn-off, built-in speculum tray and 8 foot coiled cords. Unit is designed for use in patient exam rooms.</td>
</tr>
<tr>
<td>M4255</td>
<td>Stand, IV, Adjustable</td>
<td>VV</td>
<td>1</td>
<td>Adjustable IV stand with 4-hook arrangement. Stand has stainless steel construction with heavy weight base. It adjusts from 66 inches to 100 inches and is mounted on conductive rubber, ball bearing, swivel casters. Stand is used for administering intravenous solutions.</td>
</tr>
<tr>
<td>M4266</td>
<td>Pump, Volumetric, Infusion, Multiple Lines</td>
<td>VV</td>
<td>1</td>
<td>Volumetric infusion pump. Pump is self-regulating with automatic sensor and adjustable rate. Equipped with visual and audible alarms and up to 10 hour capacity battery. For the administration of a wide variety of therapeutic agents where precise control is required. Unit provides individual control to IV lines simultaneously.</td>
</tr>
<tr>
<td>M4660</td>
<td>Stretcher, Recovery, Labor</td>
<td>VV</td>
<td>1</td>
<td>Labor recovery/ob-gyn procedure stretcher. The unit’s height is adjustable, and the patient bed has a manual backrest and crank operated knee catch. The stretcher has 10° non-conductive carpet wheels, IV stand and folding chrome side-rails. The stretcher can be converted quickly to a birthing stretcher by removing the leg and foot section of the mattress. The available accessories include x-ray cassette holders, proctology boards, IV poles, fluid basins.</td>
</tr>
</tbody>
</table>
### Room Contents: GYN Exam/Treatment Room, ED (CED24) – Cont’d.

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<tbody>
<tr>
<td>M7040</td>
<td>Table, Overbed</td>
<td>VV</td>
<td>1</td>
<td>Overbed table. Adjustable height table constructed of heavy gauge steel. Mounted on 2&quot; diameter twin swivel casters with bumper caps. Tabletop is constructed with a high-pressure plastic laminated surface that resists chipping, scratching, and staining. It includes a vanity tray and a mirror. Table is designed for use over bed, wheelchair, or large chair.</td>
</tr>
<tr>
<td>M7405</td>
<td>Light, Exam, Ceiling Mounted</td>
<td>CC</td>
<td>1</td>
<td>Ceiling exam light. Consists of a lightheaded reflector supported by a ceiling mounted radial arm assembly that provides a wide range of positioning capabilities. Halogen bulbs and an intensity control provide cool, color corrected light. The minimum ceiling height in most cases is 8'-0&quot;; refer to each manufacturer’s specific installation requirements. Physical dimensions refer to the retracted light; one length of the dual swing arm around the center mount in width and depth and the combined height of the lamp head and folded arms. Unit may also have a center mount detachable and sterilizable control handle. For use in minor procedure or examination room applications.</td>
</tr>
<tr>
<td>M7845</td>
<td>Monitor, Physiological, Bedside, 4 Channel, w/wall bracket</td>
<td>VV</td>
<td>1</td>
<td>4 channel bedside physiological monitor. The unit consist of a four-channel non-fade monochrome display monitor, an alarm system, and printer-recording capabilities. The monitor has color coded controls and automatic calibration. The unit displays up to four waveforms simultaneously. The parameters to be monitored are user selectable. The monitor may be connected to a central monitoring station. The unit monitors patients in most acute care areas, step-down units, procedure rooms and emergency rooms.</td>
</tr>
<tr>
<td>M7910</td>
<td>Thermometer, Electronic</td>
<td>VV</td>
<td>1</td>
<td>Electronic thermometer. Pocket size unit with easy to read zero Fahrenheit or zero Centigrade LCD display in approximately 20 seconds. Battery operated and enclosed in a heavy-duty plastic case. Unit is hand-held portable and may be stand or wall mounted. For patient body temperature readings.</td>
</tr>
<tr>
<td>P1965</td>
<td>Eyewash, Eye/Face, Sink Mounted, Hands-free</td>
<td>CC</td>
<td>1</td>
<td>A sink mounted eyewash station. The unit is designed for emergency eye and face rinsing from soft flow dual spray-heads. The Flow must be activated by the single momentary action and remain on until terminated.</td>
</tr>
<tr>
<td>P3100</td>
<td>Lavatory, Vitreous China, Slab Type</td>
<td>CC</td>
<td>1</td>
<td>Wall mounted, slab type, vitreous china, lavatory (approximate bowl size 7&quot;x15&quot;x10&quot;) with faucet holes on 4&quot; centers; gooseneck spout; wrist blade handles; and grid strainer. It shall be suitable for use in clinics, offices, washrooms, or patient care area.</td>
</tr>
</tbody>
</table>
## Room Contents: ED GYN Patient Toilet / Shower, Building Support (SB171)

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>A1066</td>
<td>Mirror, Float Glass, With SS Frame</td>
<td>CC</td>
<td>1</td>
<td>A high quality 1/4&quot; polished float glass mirror 36X18, framed in a one-piece, bright polished, stainless steel channel frame with 90° mitered corners. All edges of the mirror are protected by absorbing filler strips. Mirror has a galvanized steel back with integral horizontal hanging brackets and wall hanger for concealed mounting. For mounting above single wall mounted lavatories located in toilet areas, Doctors examination offices, etc. May also be used above double lavatories, either wall or countertop mounted, found in restroom areas.</td>
</tr>
<tr>
<td>A1200</td>
<td>Lift System, Overhead, Patient Room</td>
<td>VC</td>
<td>1</td>
<td>An overhead rail system specifically designed for patient lifting and movement for a single bed patient room. The system will consist of recessed, or ceiling mounted primary and secondary rails, lift motor with rolling carriage, patient harness or seat, and a hand controller or control box with charger. System will facilitate lifting and movement of patient to and from bed to gurney, chair or other requirement. Minimum lift capability is 550 pounds. Custom design of track layout by manufacturer is essential to meet individual facility requirements.</td>
</tr>
<tr>
<td>A5075</td>
<td>Dispenser, Soap, Disposable</td>
<td>VV</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, top filling, liquid soap dispenser. Dispenser features: corrosion-resistant valve, push-in type and operable with one hand; heavy duty hinge and key lock lid; and vandal resistant concealed mounting. Minimum capacity 40 fluid ounces. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5080</td>
<td>Dispenser, Paper Towel, SS, Surface Mounted</td>
<td>CC</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, single-fold, paper towel dispenser. Dispenser features: tumbler lock; front hinged at bottom; and refill indicator slot. Minimum capacity 400 single-fold paper towels. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5090</td>
<td>Disposal, Sanitary Napkin, SS, Surface Mounted</td>
<td>CC</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, sanitary napkin disposal. Disposal features a flip-up cover, secured to the container by a heavy-duty stainless-steel piano-hinge. Disposal may be secured to wall or toilet partition. For general purpose use in female toilet stalls or rooms and uni-sex toilet rooms.</td>
</tr>
<tr>
<td>A5115</td>
<td>Grab Bar, Flip-Up, Heavy Duty</td>
<td>CC</td>
<td>2</td>
<td>A heavy-duty flip-up safety rail for use in rest rooms. The grab bar will be constructed of stainless steel and will extend approximately 30” from the wall when in the extended position.</td>
</tr>
</tbody>
</table>
**Room Contents: ED GYN Patient Toilet / Shower, Building Support (SB171) – Cont’d.**

<table>
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<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>A5145</td>
<td>Hook, Garment, Double, SS, Surface Mounted</td>
<td>CC</td>
<td>2</td>
<td>A surface mounted, satin finish stainless steel, double garment hook. Equipped with a concealed mounting bracket that is secured to a concealed wall plate. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5170</td>
<td>Rod, Shower Curtain, 1&quot;Diameter, W/Curtain &amp; Hooks</td>
<td>CC</td>
<td>1</td>
<td>A concealed mounted, 1&quot; outside diameter, satin finish stainless steel, shower curtain rod with white vinyl shower curtain (72&quot; H) and SS shower curtain hooks. Rod and curtain available in various widths. For general purpose use at shower stall or bathtub locations. Pricing based upon standard shower stall dimensions of 36&quot; x 36&quot;.</td>
</tr>
<tr>
<td>A5175</td>
<td>Soap Dish, With Bar, SS, Recessed</td>
<td>CC</td>
<td>1</td>
<td>A recessed mounted, satin finish stainless steel, soap dish with bar. Soap dish furnished with retaining lip and mounting clamp for installation in stud walls or countertop aprons. For general purpose use in shower stalls or at bathtub locations.</td>
</tr>
<tr>
<td>A5200</td>
<td>Dispenser, Toilet Tissue, SS, 2-Roll, Surface Mntd</td>
<td>CC</td>
<td>1</td>
<td>A concealed surface mounted, double roll, satin finish stainless steel, toilet tissue dispenser. Unit accommodates two standard-core toilet tissue rolls through 5&quot; in diameter. Spindles are chrome plated plastic with a heavy-duty internal spring and turn freely for non-controlled delivery. For general purpose use in restrooms.</td>
</tr>
<tr>
<td>A5205</td>
<td>Bar, Towel, 1&quot; Diameter, SS, Surface Mount</td>
<td>CC</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, 1&quot; diameter, towel bar. Support posts and flanges are one piece, chrome-plated, cast heavy brass with satin finish. Towel bar shall not rotate within support posts. Available in 18&quot;, 24&quot; and 30&quot; widths. For general purpose use in shower or bathtub rooms. Pricing based upon a suggested standard width of 18&quot;.</td>
</tr>
<tr>
<td>F2010</td>
<td>Basket, Wastepaper, Step-On</td>
<td>VV</td>
<td>1</td>
<td>Step-on wastepaper basket with inner liner and foot pedal activated flip top.</td>
</tr>
<tr>
<td>P3100</td>
<td>Lavatory, Vitreous China, Slab Type</td>
<td>CC</td>
<td>1</td>
<td>Wall mounted, slab type, vitreous china, lavatory (approximate bowl size 7&quot;x15&quot;x10&quot;) with faucet holes on 4&quot; centers; gooseneck spout; wrist blade handles; and grid strainer. It shall be suitable for use in clinics, offices, washrooms, or patient care area.</td>
</tr>
<tr>
<td>P5040</td>
<td>Shower, Single, Hand-Held</td>
<td>CC</td>
<td>1</td>
<td>A complete, barrier-free, single hand-held, personal shower system. The shower system includes pressure balanced mixing valve with high temperature limit stop; personal hand shower; shower hose; wall supply; and slide bar. For general purpose use throughout the facility in shower stalls.</td>
</tr>
<tr>
<td>P9051</td>
<td>Toilet, Floor Mounted, Siphon Jet</td>
<td>CC</td>
<td>1</td>
<td>Siphon jet water closet/ toilet. This unit is floor mounted with an elongated bowl, top spud flushometer, seat with open front and check hinge, and carrier. Height does not include seat. Seat is not included with all vendors. See comments.</td>
</tr>
</tbody>
</table>
Emergency Department
MENTAL HEALTH EXAM/TREATMENT ROOM, ED (CED25)
AXONOMETRIC

DISCLAIMER: ROOM TEMPLATES ARE GRAPHICAL REPRESENTATIONS OF SELECTED ROOM TYPES THAT ILLUSTRATE VA PLANNING REQUIREMENTS FOR SPACE, ROOM CONTENTS, AND ROOM SPECIFIC ENGINEERING SYSTEMS. THEY PROVIDE TYPICAL CONFIGURATIONS, PLANNING CRITERIA, AND GENERAL TECHNICAL GUIDANCE, AND ARE NOT INTENDED TO BE PROJECT SPECIFIC REQUIREMENTS.
December 1, 2021

Emergency Department
MENTAL HEALTH EXAM/TREATMENT ROOM, ED (CED25)
FLOOR PLAN (190 NSF / 17.65 NSM)

DISCLAIMER: ROOM TEMPLATES ARE GRAPHICAL REPRESENTATIONS OF SELECTED ROOM TYPES THAT ILLUSTRATE VA PLANNING REQUIREMENTS FOR SPACE, ROOM CONTENTS, AND ROOM SPECIFIC ENGINEERING SYSTEMS. THEY PROVIDE TYPICAL CONFIGURATIONS, PLANNING CRITERIA, AND GENERAL TECHNICAL GUIDANCE, AND ARE NOT INTENDED TO BE PROJECT SPECIFIC REQUIREMENTS.
Room Data: Mental Health
Exam/Treatment Room, ED (CED25)

ARCHITECTURAL & INTERIOR DESIGN
Ceiling Finish:   m: GWB f: P
Ceiling Height:  9'-0" (2700mm)
Wall Finish:   m: GWB [64] f: P
Wainscot:  m: RWC h: 4'-0”
Base:   m: RB h: 4” (100mm)
Floor Finish:  m: LVT
Slab Depression:   --
Sound Protection:  STC 40
Doors: m: Wood f: S t: 19 dg: A s: V
Hardware Nr:  2B
Notes:

HVAC
Refer to HVAC Design Manual in accordance with project requirements. Refer to the current version of Chapter 6, “Mechanical Room Data Sheets” for room temperatures, humidity range, room air change requirements, noise level, pressurization, and other information.

PLUMBING AND MEDICAL GASES
Cold Water: Yes
Hot Water: Yes
Sanitary Drain: Yes
Medical Air: Minimum 2 outlets/station
Medical Vacuum: Minimum 2 outlets/station
Oxygen: Minimum 2 outlets/station

FIRE PROTECTION
Refer to Fire Protection Design Manual for guidance on fire suppression and fire alarm device type and placement in accordance with project requirements.

POWER
Refer to the latest VA Electrical Design Manual for general electrical requirements.
Normal Power:  To be connected to selected receptacles and equipment.
Emergency Power: Critical branch of the EES (Essential Electrical System) to be connected to selected receptacles and equipment.

Notes:
1. Coordinate electrical power requirements with specific vendor equipment.

LIGHTING
Refer to the latest VA Lighting Design Manual section 4.4.7 – Behavioral Health Examination and Treatment Room for lighting design considerations.

COMMUNICATION/SPECIAL SYSTEMS
ADP:    --
Data: Yes
Telephone: Yes
Intercom: --
Nurse Call: Yes
Public Address: --
Radio/Entertainment: As Required
MATV:    --
CCTV:    --
MID:    --
Security/Duress: --
VTEL:    --
VA Satellite TV: --
Count Down Clock: --
# Room Contents: Mental Health Exam/Treatment Room, ED (CED25)

<table>
<thead>
<tr>
<th>JSN</th>
<th>Content Name</th>
<th>Acq Code</th>
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</tr>
</thead>
<tbody>
<tr>
<td>A1010</td>
<td>Telecommunication Outlet</td>
<td>VV</td>
<td>4</td>
<td>Telecommunication outlet location.</td>
</tr>
<tr>
<td>A1014</td>
<td>Telephone, Wall Mounted, 1 Line, With Speaker</td>
<td>VV</td>
<td>1</td>
<td>Telephone, wall mounted, 1 line, with speaker.</td>
</tr>
<tr>
<td>A1110</td>
<td>Headwall, Prefabricated, General, 1-2 bed</td>
<td>CC</td>
<td>2</td>
<td>1-2 bed, general, prefabricated headwall. Unit consists of a patient service module for general care, single or double bed type. It contains lighting, medical gases, electrical outlets, nurse call and bed bumper. Specify number and type of medical gas and electrical outlets. Size of module will vary by type and configuration of outlets.</td>
</tr>
<tr>
<td>A5075</td>
<td>Dispenser, Soap, Disposable</td>
<td>VV</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, top filling, liquid soap dispenser. Dispenser features: corrosion-resistant valve, push-in type and operable with one hand; heavy duty hinge and key lock lid; and vandal resistant concealed mounting. Minimum capacity 40 fluid ounces. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5077</td>
<td>Dispenser, Hand Sanitizer, Hands-Free</td>
<td>VV</td>
<td>1</td>
<td>A touch free wall-mounted hand sanitizer dispenser. For use throughout a healthcare facility. Unit does not include the sanitizing liquid. Units are battery operated.</td>
</tr>
<tr>
<td>A5079</td>
<td>Dispenser, Disinfectant Wipes, Wall Mount</td>
<td>VV</td>
<td>1</td>
<td>Wall-Mounted, wire dispenser bracket for large sanitary cloth canisters, Labeled &quot;Not for use on skin&quot;</td>
</tr>
<tr>
<td>A5080</td>
<td>Dispenser, Paper Towel, SS, Surface Mounted</td>
<td>CC</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, single-fold, paper towel dispenser. Dispenser features: tumbler lock; front hinged at bottom; and refill indicator slot. Minimum capacity 400 single-fold paper towels. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5093</td>
<td>Emesis Bag, Wall, Adult</td>
<td>VV</td>
<td>1</td>
<td>Wall-mounted dispenser for emesis bags. Holds biodegradable containment bags and facilitates individual dispensing when needed</td>
</tr>
<tr>
<td>A5094</td>
<td>PPE / Mask-Holder, Wall-mount</td>
<td>VV</td>
<td>1</td>
<td>Wall-mounted personal protection organizer. Accommodates different glove sizes, mask boxes and isolation gowns</td>
</tr>
<tr>
<td>A5107</td>
<td>Dispenser, Glove, Surgical/Examination, Wall Mounted</td>
<td>VV</td>
<td>1</td>
<td>Examination three (Small Medium, Large) glove dispenser box for wall mounting. Fabricated of either cold rolled steel with a white baked enamel finish, plastic, or acrylic. Hardware not included; Option 3 powder coated steel.</td>
</tr>
<tr>
<td>A5108</td>
<td>Waste Disposal Unit, Sharps</td>
<td>VV</td>
<td>1</td>
<td>A container for collecting and transporting syringes and other sharps for decontamination and disposal. Available in 2 gallon and 8 gallon with locking rotor. Complies with OSHA regulations for handling sharps.</td>
</tr>
<tr>
<td>A5219</td>
<td>Housing, In-Wall Display, Security</td>
<td>CC</td>
<td>1</td>
<td>In-wall housing for television in Mental Health suites, with security cover</td>
</tr>
</tbody>
</table>
Room Contents: Mental Health Exam/Treatment Room, ED (CED25) – Cont’d.

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<tr>
<th>JSN</th>
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<th>Acq Code</th>
<th>Qty</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>E0945</td>
<td>Cart, Computer, Mobile</td>
<td>VV</td>
<td>1</td>
<td>A mobile computer cart for use throughout the facility. The cart dimensions will be approximately 45&quot; H x 30&quot; W x 22&quot; D with casters. May include drawers and miscellaneous other accessories that will be determined at time of purchase.</td>
</tr>
<tr>
<td>E0948</td>
<td>Cart, General Storage, Mobile, 42&quot;H x 32&quot;W,22&quot;D</td>
<td>VV</td>
<td>1</td>
<td>This typical includes: 1 Cart Body, Style-A Narrow, w/Raised Edge Top; 2 Drawers, 3&quot; H; 4 Drawers, 6&quot; H; 1 Accessory Rail, Side; Drawer Organizer Bins</td>
</tr>
<tr>
<td>F2000</td>
<td>Basket, Wastepaper, Fire Resistant</td>
<td>VV</td>
<td>1</td>
<td>Wastepaper basket, fire resistant, approximately 40 quart capacity. This unit is used to collect and temporarily store small quantities of paper refuse in patient rooms, administrative areas, and nursing stations. Size and shape varies depending on the application and manufacturer selected.</td>
</tr>
<tr>
<td>F2010</td>
<td>Basket, Wastepaper, Step-On</td>
<td>VV</td>
<td>1</td>
<td>Step-on wastepaper basket with inner liner and foot petal activated flip top.</td>
</tr>
<tr>
<td>F3200</td>
<td>Clock, Battery, 12&quot; Diameter</td>
<td>VV</td>
<td>1</td>
<td>Clock, 12&quot; diameter. Round surface, easy to read numbers with sweep second hand. Wall mounted unit for use when impractical to install a fully synchronized clock system. Battery operated, (batteries not included).</td>
</tr>
<tr>
<td>M0506</td>
<td>Television, Flat Screen (behind protective housing)</td>
<td>VV</td>
<td>1</td>
<td>Flat screen television with approximately 32” to 40” diagonal screen size. The TV will have built-in speakers, NTSC tuner, a 16:9 wide screen aspect ratio, a minimum of 1280 x 768 resolution and a remote control.</td>
</tr>
<tr>
<td>M0750</td>
<td>Flowmeter, Air, Connect w/50 PSI Supply</td>
<td>VV</td>
<td>1</td>
<td>Air flowmeter. Unit has a stainless-steel needle valve with clear flow tube for connection to 50 PSI air outlet from central pipeline system. Requires the appropriate adapter for connection to the wall outlet and fitting to connect to tubing. Database prices reflect fittings with an attached DISS power outlet. Other outlet and adapter configurations are available.</td>
</tr>
<tr>
<td>M0755</td>
<td>Flowmeter, Oxygen, Low Flow</td>
<td>VV</td>
<td>2</td>
<td>Oxygen flowmeter. Consists of a clear crystal flow tube calibrated to 3.5 or 8 LPM depending on manufacturer. For oxygen regulation in hospital settings. Database pricing includes DISS fitting and DISS power outlet and wall adapter. Other fitting and adapter configurations are available.</td>
</tr>
</tbody>
</table>
### Room Contents: Mental Health Exam/Treatment Room, ED (CED25) – Cont’d.

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<tr>
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</thead>
<tbody>
<tr>
<td>M0765</td>
<td>Regulator, Vacuum</td>
<td>VV</td>
<td>2</td>
<td>Vacuum pressure regulator for connection to central piped vacuum system. Standard display scale is graduated at least from 0 to 200 mm Hg of vacuum. Displays on specialized regulators may cover other vacuum ranges. Regulator type (continuous, intermittent, continuous/intermittent, surgical, pediatric, thoracic, etc.) as required. To be used in delivery, neonatal, pediatrics or any area where suction is required. Database pricing reflects continuous regulators graduated to 200 mm Hg with a full line vacuum selection switch and DISS configured inlets and outlets.</td>
</tr>
<tr>
<td>M3073</td>
<td>Container, Waste, Step-on, Fire Safe</td>
<td>VV</td>
<td>1</td>
<td>A waste container with a step-on lid. The container will have a capacity of approximately 12 gallons and be made of a fire safe material.</td>
</tr>
<tr>
<td>M4200</td>
<td>Otoscope/Ophthalmoscope, Wall Mounted</td>
<td>VV</td>
<td>1</td>
<td>Wall mounted otoscope and ophthalmoscope. Includes 6 foot line cord and plug and accepts and includes two handles. Contains head turn-on/turn-off, built-in speculum tray and 8 foot coiled cords. Unit is designed for use in patient exam rooms.</td>
</tr>
<tr>
<td>M4655</td>
<td>Stretcher, Mobile, CRS, 9 Position</td>
<td>VV</td>
<td>1</td>
<td>Mobile stretcher. All corrosion resistant stainless-steel construction. It consists of a tubular frame with side rails, a 9-position hydraulic base with pneumatic fowler adjustment, and a 2” pad. Unit is mounted on 8” conductive casters. Designed for patient transport as well as for minor surgical procedures.</td>
</tr>
<tr>
<td>M7415</td>
<td>Light, Exam, Wall-Mounted</td>
<td>CC</td>
<td>1</td>
<td>Wall mounted examination light. Unit features high intensity color-corrected lighting, a tungsten halogen lamp, and a supporting arm with minimum reach of 45 inches. Physical dimensions refer to the retracted light; one length of the dual swing arm from the wall mount in width and depth and the combined height of the lamp head and folded arms. See manufacturer’s requirements for screws and pull-out strengths for mounting. Unit may also have a center mount detachable and sterilizable control handle. The unit is used in clinical treatment rooms and hospital rooms.</td>
</tr>
</tbody>
</table>
Room Contents: Mental Health Exam/Treatment Room, ED (CED25) – Cont’d.

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<tbody>
<tr>
<td>M7845</td>
<td>Monitor, Physiological, Bedside, 4 Channel, w/wall bracket</td>
<td>VV</td>
<td>1</td>
<td>4 channel bedside physiological monitor. The unit consist of a four-channel non-fade monochrome display monitor, an alarm system, and printer-recording capabilities. The monitor has color coded controls and automatic calibration. The unit displays up to four waveforms simultaneously. The parameters to be monitored are user selectable. The monitor may be connected to a central monitoring station. The unit monitors patients in most acute care areas, step-down units, procedure rooms and emergency rooms.</td>
</tr>
<tr>
<td>M7910</td>
<td>Thermometer, Electronic</td>
<td>VV</td>
<td>1</td>
<td>Electronic thermometer. Pocket size unit with easy to read zero Fahrenheit or zero Centigrade LCD display in approximately 20 seconds. Battery operated and enclosed in a heavy-duty plastic case. Unit is hand-held portable and may be stand or wall mounted. For patient body temperature readings.</td>
</tr>
<tr>
<td>P3100</td>
<td>Lavatory, Vitreous China, Slab Type</td>
<td>CC</td>
<td>1</td>
<td>Wall mounted, slab type, vitreous china, lavatory (approximate bowl size 7&quot;x15&quot;x10&quot;) with faucet holes on 4&quot; centers; gooseneck spout; wrist blade handles; and grid strainer. It shall be suitable for use in clinics, offices, washrooms, or patient care area.</td>
</tr>
</tbody>
</table>
Room Data: Mental Health Intervention
Room, ED (CED26)

ARCHITECTURAL & INTERIOR DESIGN
Ceiling Finish: m: GWB f: SC
Ceiling Height: 9'-0" (2700mm)
Wall Finish: m: GWB [45,64] f: SC
Wainscot: --
Base: m: RF or WSF h: 4" (100mm)
Floor Finish: m: RF or WSF
Slab Depression: --
Sound Protection: STC 45
Doors: m: Wood f: S t: 19 dg: A s: V
Hardware Nr: 2B
Notes:

HVAC
Refer to HVAC Design Manual in accordance with project requirements. Refer to the current version of Chapter 6, “Mechanical Room Data Sheets” for room temperatures, humidity range, room air change requirements, noise level, pressurization, and other information.

PLUMBING AND MEDICAL GASES
Cold Water: --
Hot Water: --
Sanitary Drain: --
Medical Air: Not Required
Medical Vacuum: Not Required
Oxygen: Not Required

FIRE PROTECTION
Refer to Fire Protection Design Manual for guidance on fire suppression and fire alarm device type and placement in accordance with project requirements.

POWER
Refer to the latest VA Electrical Design Manual for general electrical requirements.

Normal Power: To be connected to selected receptacles and equipment.
Emergency Power: Critical branch of the EES (Essential Electrical System) to be connected to selected receptacles and equipment.

Notes:
1. Coordinate electrical power requirements with specific vendor equipment.

LIGHTING
Refer to the latest VA Lighting Design Manual section 4.4.7 – Behavioral Health Examination and Treatment Room for lighting design considerations.

COMMUNICATION/SPECIAL SYSTEMS
ADP: --
Data: Yes
Telephone: --
Intercom: --
Nurse Call: --
Public Address: --
Radio/Entertainment: --
MATV: --
CCTV: --
MID: --
Security/Duress: --
VTEL: --
VA Satellite TV: --
Count Down Clock: --
## Room Contents: Mental Health Intervention Room, ED (CED26)

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</thead>
<tbody>
<tr>
<td>A5219</td>
<td>Housing, In-Wall Display, Security</td>
<td>CC</td>
<td>1</td>
<td>In-wall housing for television in Mental Health suites, with security cover</td>
</tr>
<tr>
<td>A6025</td>
<td>Mirror, Safety, Convex</td>
<td>CC</td>
<td>1</td>
<td>Shall be an 18 inch convex circular mirror. It shall provide a 160-degree wide-field viewing area. The mirror shall be made of shatterproof acrylic or unbreakable polycarbonate. Shall come with mounting bracket.</td>
</tr>
<tr>
<td>F2245</td>
<td>Camera, Video Surveillance, HD, IP</td>
<td>VV</td>
<td>1</td>
<td>A high definition, full functional video surveillance camera. The camera is capable of full 1080p resolution at 30 frames per second while optimizing network usage with H.264, MPEG-4 and JPEG compression formats. Camera will have an open, standards-based design providing a platform for integration and operation as an independent device or as part of a surveillance network.</td>
</tr>
<tr>
<td>F3200</td>
<td>Clock, Battery, 12&quot; Diameter, in-wall</td>
<td>VV</td>
<td>1</td>
<td>Clock, 12&quot; diameter. Round surface, easy to read numbers with sweep second hand. Wall mounted unit for use when impractical to install a fully synchronized clock system. Battery operated, (batteries not included).</td>
</tr>
<tr>
<td>M0506</td>
<td>Television, Flat Screen (behind protective housing)</td>
<td>VV</td>
<td>1</td>
<td>Flat screen television with approximately 32&quot; to 40&quot; diagonal screen size. The TV will have built-in speakers, NTSC tuner, a 16:9 wide screen aspect ratio, a minimum of 1280 x 768 resolution and a remote control.</td>
</tr>
<tr>
<td>M7011</td>
<td>Bed, Platform, Without Visible Legs, Psychiatric</td>
<td>VV</td>
<td>1</td>
<td>Platform bed and mattress with enclosed under carriage, no visible legs. Provided with 5/8&quot; plywood deck, eight restraint holders, two at head and foot, three at each side, concealed steel frame, and means to bolt to the floor. Sides and ends are finished wood panels.</td>
</tr>
</tbody>
</table>
Emergency Department
AIRBORNE INFECTION ISOLATION (AIL) EXAM/TREATMENT ROOM, ED (CED27)
ANTE ROOM, ED (CED28), PATIENT TOILET, ED (CED29)
ELEVATIONS

DISCLAIMER: ROOM TEMPLATES ARE GRAPHICAL REPRESENTATIONS OF SELECTED ROOM TYPES THAT ILLUSTRATE VA PLANNING
REQUIREMENTS FOR SPACE, ROOM CONTENTS, AND ROOM SPECIFIC ENGINEERING SYSTEMS. THEY PROVIDE TYPICAL CONFIGURATIONS,
PLANNING CRITERIA, AND GENERAL TECHNICAL GUIDANCE, AND ARE NOT INTENDED TO BE PROJECT SPECIFIC REQUIREMENTS.
ROOM Data: Airborne Infection Isolation
Room Exam/Treatment Room, ED (CED27)

ARCHITECTURAL & INTERIOR DESIGN
Ceiling Finish: m: GWB f: P or m: AT [9] f: SP
Ceiling Height: 9'-0” (2700mm)
Wall Finish: m: GWB [18, 64] f: SC
Wainscot: m: RWC h: 4'-0”
Base: m: RB h: 4” (100mm)
Floor Finish: m: LVT
Slab Depression: --
Sound Protection: STC 40
Doors: m: Wood f: S t: 19 dg: T s: X,A
Hardware Nr: HW-10F
Notes:

HVAC
Refer to HVAC Design Manual in accordance with project requirements. Refer to the current version of Chapter 6, “Mechanical Room Data Sheets” for room temperatures, humidity range, room air change requirements, noise level, pressurization, and other information. Data sheets also include information on room pressure monitoring, exhaust air grille location, and Anteroom.

PLUMBING AND MEDICAL GASES
Cold Water: Yes
Hot Water: Yes
Sanitary Drain: Yes
Medical Air: Minimum 2 outlets/station
Medical Vacuum: Minimum 2 outlets/station
Oxygen: Minimum 2 outlets/station

FIRE PROTECTION
Refer to Fire Protection Design Manual for guidance on fire suppression and fire alarm device type and placement in accordance with project requirements.

POWER
Refer to the latest VA Electrical Design Manual for general electrical requirements.

Normal Power: To be connected to selected receptacles and equipment.

Emergency Power: Critical branch of the EES (Essential Electrical System) to be connected to selected receptacles and equipment.

Equipment branch of the EES to be connected as described in VA Electrical Design Manual

Notes:
1. Coordinate electrical power requirements with specific vendor equipment.

LIGHTING
Refer to the latest VA Lighting Design Manual section 4.2.1 – Examination and Treatment Room for lighting design consideration.

Notes:
1. Coordinate lighting placement with ceiling track and ceiling track supports.

COMMUNICATION/SPECIAL SYSTEMS
ADP: --
Data: Yes
Telephone: Yes
Intercom: --
Nurse Call: Yes
Public Address: --
Radio/Entertainment: As Required
MATV: --
CCTV: --
MID: --
Security/Duress: --
VTEL: --
VA Satellite TV: --
Count Down Clock: --
### Room Contents: Airborne Infection Isolation Exam/Treatment Room, ED (CED27)

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<td>A1010</td>
<td>Telecommunication Outlet</td>
<td>VV</td>
<td>4</td>
<td>Telecommunication outlet location.</td>
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<tr>
<td>A1014</td>
<td>Telephone, Wall Mounted, 1 Line, With Speaker</td>
<td>VV</td>
<td>1</td>
<td>Telephone, wall mounted, 1 line, with speaker.</td>
</tr>
<tr>
<td>A1110</td>
<td>Headwall, Prefabricated, General, 1-2 bed</td>
<td>CC</td>
<td>2</td>
<td>1-2 bed, general, prefabricated headwall. Unit consists of a patient service module for general care, single or double bed type. It contains lighting, medical gases, electrical outlets, nurse call and bed bumper. Specify number and type of medical gas and electrical outlets. Size of module will vary by type and configuration of outlets.</td>
</tr>
<tr>
<td>A1200</td>
<td>Lift System, Overhead, Patient Room</td>
<td>VC</td>
<td>1</td>
<td>An overhead rail system specifically designed for patient lifting and movement for a single bed patient room. The system will consist of recessed, or ceiling mounted primary and secondary rails, lift motor with rolling carriage, patient harness or seat, and a hand controller or control box with charger. System will facilitate lifting and movement of patient to and from bed to gurney, chair or other requirement. Minimum lift capability is 550 pounds. Custom design of track layout by manufacturer is essential to meet individual facility requirements.</td>
</tr>
<tr>
<td>A5075</td>
<td>Dispenser, Soap, Disposable</td>
<td>VV</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, top filling, liquid soap dispenser. Dispenser features: corrosion-resistant valve, push-in type and operable with one hand; heavy duty hinge and key lock lid; and vandal resistant concealed mounting. Minimum capacity 40 fluid ounces. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5077</td>
<td>Dispenser, Hand Sanitizer, Hands-Free</td>
<td>VV</td>
<td>1</td>
<td>A touch free wall-mounted hand sanitizer dispenser. For use throughout a healthcare facility. Unit does not include the sanitizing liquid. Units are battery operated.</td>
</tr>
<tr>
<td>A5079</td>
<td>Dispenser, Disinfectant Wipes, Wall Mount</td>
<td>VV</td>
<td>1</td>
<td>Wall-Mounted, wire dispenser bracket for large sanitary cloth canisters, Labeled &quot;Not for use on skin&quot;</td>
</tr>
<tr>
<td>A5080</td>
<td>Dispenser, Paper Towel, SS, Surface Mounted</td>
<td>CC</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, single-fold, paper towel dispenser. Dispenser features: tumbler lock; front hinged at bottom; and refill indicator slot. Minimum capacity 400 single-fold paper towels. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5093</td>
<td>Emesis Bag, Wall, Adult</td>
<td>VV</td>
<td>1</td>
<td>Wall-mounted dispenser for emesis bags. Holds biodegradable containment bags and facilitates individual dispensing when needed</td>
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Room Contents: Airborne Infection Isolation Exam/Treatment Room, ED (CED27) – Cont’d.

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<tbody>
<tr>
<td>A5107</td>
<td>Dispenser, Glove, Surgical/Examination, Wall Mounted</td>
<td>VV</td>
<td>2</td>
<td>Examination three (Small Medium, Large) glove dispenser box for wall mounting. Fabricated of either cold rolled steel with a white baked enamel finish, plastic, or acrylic. Hardware not included; Option 3 powder coated steel.</td>
</tr>
<tr>
<td>A5108</td>
<td>Waste Disposal Unit, Sharps</td>
<td>VV</td>
<td>1</td>
<td>A container for collecting and transporting syringes and other sharps for decontamination and disposal. Available in 2 gallon and 8 gallon with locking rotor. Complies with OSHA regulations for handling sharps.</td>
</tr>
<tr>
<td>A5212</td>
<td>Bracket, Television, Wall-Mounted, Tilt/Angle</td>
<td>VV</td>
<td>1</td>
<td>A wall mounted, tilt/angled TV bracket for 37” to 80” TVs. Mount will be a universal and VESA compliant unit with a load capacity of up to 130 lbs.</td>
</tr>
<tr>
<td>A5220</td>
<td>Bracket, Television, Wall Backing</td>
<td>CC</td>
<td>1</td>
<td>Wall mounted television bracket backing which provides additional support and strength for the installation of the television bracket. Option available for interior or exterior plate and sized for 12” 16” or 24” stud spacing.</td>
</tr>
<tr>
<td>A6046</td>
<td>Artwork, Decorative, With Frame</td>
<td>VV</td>
<td>1</td>
<td>This JSN is to be used for determining and defining location of decorative artwork.</td>
</tr>
<tr>
<td>E0945</td>
<td>Cart, Computer, Mobile</td>
<td>VV</td>
<td>1</td>
<td>A mobile computer cart for use throughout the facility. The cart dimensions will be approximately 45” H x 30” W x 22” D with casters. May include drawers and miscellaneous other accessories that will be determined at time of purchase.</td>
</tr>
<tr>
<td>F0205</td>
<td>Chair, Side With Arms, Bariatric</td>
<td>VV</td>
<td>1</td>
<td>Upholstered side chair, 32” high X 21” wide X 23” deep with arms, padded seats, and padded back. Seat height is a minimum of 17”. Available with or without sled base.</td>
</tr>
<tr>
<td>F2000</td>
<td>Basket, Wastepaper, Fire Resistant</td>
<td>VV</td>
<td>1</td>
<td>Wastepaper basket, fire resistant, approximately 40 quart capacity. This unit is used to collect and temporarily store small quantities of paper refuse in patient rooms, administrative areas, and nursing stations. Size and shape varies depending on the application and manufacturer selected.</td>
</tr>
<tr>
<td>F2010</td>
<td>Basket, Wastepaper, Step-On</td>
<td>VV</td>
<td>1</td>
<td>Step-on wastepaper basket with inner liner and foot petal activated flip top.</td>
</tr>
<tr>
<td>F3200</td>
<td>Clock, Battery, 12” Diameter</td>
<td>VV</td>
<td>1</td>
<td>Clock, 12” diameter. Round surface, easy to read numbers with sweep second hand. Wall mounted unit for use when impractical to install a fully synchronized clock system. Battery operated, (batteries not included).</td>
</tr>
</tbody>
</table>
Room Contents: Airborne Infection Isolation Exam/Treatment Room, ED (CED27) – Cont’d.

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<th>JSN</th>
<th>Content Name</th>
<th>Acq Code</th>
<th>Qty</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>M0506</td>
<td>Television, Flat Screen</td>
<td>VV</td>
<td>1</td>
<td>Flat screen television with approximately 32” to 40” diagonal screen size. The TV will have built-in speakers, NTSC tuner, a 16:9 wide screen aspect ratio, a minimum of 1280 x 768 resolution and a remote control.</td>
</tr>
<tr>
<td>M0750</td>
<td>Flowmeter, Air, Connect w/50 PSI Supply</td>
<td>VV</td>
<td>1</td>
<td>Air flowmeter. Unit has a stainless-steel needle valve with clear flow tube for connection to 50 PSI air outlet from central pipeline system. Requires the appropriate adapter for connection to the wall outlet and fitting to connect to tubing. Database prices reflect fittings with an attached DISS power outlet. Other outlet and adapter configurations are available.</td>
</tr>
<tr>
<td>M0755</td>
<td>Flowmeter, Oxygen, Low Flow</td>
<td>VV</td>
<td>2</td>
<td>Oxygen flowmeter. Consists of a clear crystal flow tube calibrated to 3.5 or 8 LPM depending on manufacturer. For oxygen regulation in hospital settings. Database pricing includes DISS fitting and DISS power outlet and wall adapter. Other fitting and adapter configurations are available.</td>
</tr>
<tr>
<td>M0765</td>
<td>Regulator, Vacuum</td>
<td>VV</td>
<td>2</td>
<td>Vacuum pressure regulator for connection to central piped vacuum system. Standard display scale is graduated at least from 0 to 200 mm Hg of vacuum. Displays on specialized regulators may cover other vacuum ranges. Regulator type (continuous, intermittent, continuous/intermittent, surgical, pediatric, thoracic, etc.) as required. To be used in delivery, neonatal, pediatrics or any area where suction is required. Database pricing reflects continuous regulators graduated to 200 mm Hg with a full line vacuum selection switch and DISS configured inlets and outlets.</td>
</tr>
<tr>
<td>M3073</td>
<td>Container, Waste, Step-on, Fire Safe</td>
<td>VV</td>
<td>1</td>
<td>A waste container with a step-on lid. The container will have a capacity of approximately 12 gallons and be made of a fire safe material.</td>
</tr>
<tr>
<td>M4200</td>
<td>Otoscope/Ophthalmoscope, Wall Mounted</td>
<td>VV</td>
<td>1</td>
<td>Wall mounted otoscope and ophthalmoscope. Includes 6 foot line cord and plug and accepts and includes two handles. Contains head turn-on/turn-off, built-in speculum tray and 8 foot coiled cords. Unit is designed for use in patient exam rooms.</td>
</tr>
<tr>
<td>M4255</td>
<td>Stand, IV, Adjustable</td>
<td>VV</td>
<td>1</td>
<td>Adjustable IV stand with 4-hook arrangement. Stand has stainless steel construction with heavy weight base. It adjusts from 66 inches to 100 inches and is mounted on conductive rubber, ball bearing, swivel casters. Stand is used for administering intravenous solutions.</td>
</tr>
</tbody>
</table>


Room Contents: Airborne Infection Isolation Exam/Treatment Room, ED (CED27) – Cont’d.

<table>
<thead>
<tr>
<th>JSN</th>
<th>Content Name</th>
<th>Acq Code</th>
<th>Qty</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>M4266</td>
<td>Pump, Volumetric, Infusion, Multiple Lines</td>
<td>VV</td>
<td>1</td>
<td>Volumetric infusion pump. Pump is self-regulating with automatic sensor and adjustable rate. Equipped with visual and audible alarms and up to 10 hour capacity battery. For the administration of a wide variety of therapeutic agents where precise control is required. Unit provides individual control to IV lines simultaneously.</td>
</tr>
<tr>
<td>M4655</td>
<td>Stretcher, Mobile, CRS, 9 Position</td>
<td>VV</td>
<td>1</td>
<td>Mobile stretcher. All corrosion resistant stainless-steel construction. It consists of a tubular frame with side rails, a 9-position hydraulic base with pneumatic fowler adjustment, and a 2&quot; pad. Unit is mounted on 8&quot; conductive casters. Designed for patient transport as well as for minor surgical procedures.</td>
</tr>
<tr>
<td>M7040</td>
<td>Table, Overbed</td>
<td>VV</td>
<td>1</td>
<td>Overbed table. Adjustable height table constructed of heavy gauge steel. Mounted on 2&quot; diameter twin swivel casters with bumper caps. Tabletop is constructed with a high-pressure plastic laminated surface that resists chipping, scratching, and staining. It includes a vanity tray and a mirror. Table is designed for use over bed, wheelchair, or large chair.</td>
</tr>
<tr>
<td>M7405</td>
<td>Light, Exam, Ceiling Mounted</td>
<td>CC</td>
<td>1</td>
<td>Ceiling exam light. Consists of a lightheaded reflector supported by a ceiling mounted radial arm assembly that provides a wide range of positioning capabilities. Halogen bulbs and an intensity control provide cool, color corrected light. The minimum ceiling height in most cases is 8'-0&quot;; refer to each manufacturer’s specific installation requirements. Physical dimensions refer to the retracted light; one length of the dual swing arm around the center mount in width and depth and the combined height of the lamp head and folded arms. Unit may also have a center mount detachable and sterilizable control handle. For use in minor procedure or examination room applications.</td>
</tr>
<tr>
<td>M7845</td>
<td>Monitor, Physiological, Bedside, 4 Channel, w/wall bracket</td>
<td>VV</td>
<td>1</td>
<td>4 channel bedside physiological monitor. The unit consist of a four-channel non-fade monochrome display monitor, an alarm system, and printer-recording capabilities. The monitor has color coded controls and automatic calibration. The unit displays up to four waveforms simultaneously. The parameters to be monitored are user selectable. The monitor may be connected to a central monitoring station. The unit monitors patients in most acute care areas, step-down units, procedure rooms and emergency rooms.</td>
</tr>
</tbody>
</table>
### Room Contents: Airborne Infection Isolation Exam/Treatment Room, ED (CED27) – Cont’d.

<table>
<thead>
<tr>
<th>JSN</th>
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</tr>
</thead>
<tbody>
<tr>
<td>M7910</td>
<td>Thermometer, Electronic</td>
<td>VV</td>
<td>1</td>
<td>Electronic thermometer. Pocket size unit with easy to read zero Fahrenheit or zero Centigrade LCD display in approximately 20 seconds. Battery operated and enclosed in a heavy-duty plastic case. Unit is hand-held portable and may be stand or wall mounted. For patient body temperature readings.</td>
</tr>
<tr>
<td>P3100</td>
<td>Lavatory, Vitreous China, Slab Type</td>
<td>CC</td>
<td>1</td>
<td>Wall mounted, slab type, vitreous china, lavatory (approximate bowl size 7”x15”x10”) with faucet holes on 4” centers; gooseneck spout; wrist blade handles; and grid strainer. It shall be suitable for use in clinics, offices, washrooms, or patient care area.</td>
</tr>
<tr>
<td>P8705</td>
<td>Dialysis Box, Recessed, Single Valve</td>
<td>CC</td>
<td>1</td>
<td>A single cold water valve supply, recessed dialysis box with door. Box is constructed of stainless steel and includes the following standard equipment: cold water valve with 1/2” nom. copper female inlet, 3/4” male hose thread outlet and vacuum breaker; discharge hose bracket, wastewater receptor, and removable wall flange. For use only in the ICU and other acute areas when a patient cannot be moved to the dialysis unit.</td>
</tr>
</tbody>
</table>

### Room Contents: Airborne Infection Isolation Ante Room, ED (CED28)

<table>
<thead>
<tr>
<th>JSN</th>
<th>Content Name</th>
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<th>Qty</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A1010</td>
<td>Telecommunication Outlet</td>
<td>VV</td>
<td>4</td>
<td>Telecommunication outlet location.</td>
</tr>
<tr>
<td>A1014</td>
<td>Telephone, Wall Mounted, 1 Line, With Speaker</td>
<td>VV</td>
<td>1</td>
<td>Telephone, wall mounted, 1 line, with speaker.</td>
</tr>
<tr>
<td>A5075</td>
<td>Dispenser, Soap, Disposable</td>
<td>VV</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, top filling, liquid soap dispenser. Dispenser features: corrosion-resistant valve, push-in type and operable with one hand; heavy duty hinge and key lock lid; and vandal resistant concealed mounting. Minimum capacity 40 fluid ounces. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5077</td>
<td>Dispenser, Hand Sanitizer, Hands-Free</td>
<td>VV</td>
<td>1</td>
<td>A touch free wall-mounted hand sanitizer dispenser. For use throughout a healthcare facility. Unit does not include the sanitizing liquid. Units are battery operated.</td>
</tr>
<tr>
<td>A5080</td>
<td>Dispenser, Paper Towel, SS, Surface Mounted</td>
<td>CC</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, single-fold, paper towel dispenser. Dispenser features: tumbler lock; front hinged at bottom; and refill indicator slot. Minimum capacity 400 single-fold paper towels. For general purpose use throughout the facility.</td>
</tr>
</tbody>
</table>
### Room Contents: Airborne Infection Isolation Ante Room, ED (CED28) – Cont’d.

<table>
<thead>
<tr>
<th>JSN</th>
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</tr>
</thead>
<tbody>
<tr>
<td>A5094</td>
<td>PPE / Mask-Holder, Wall-mount</td>
<td>VV</td>
<td>1</td>
<td>Wall-mounted personal protection organizer. Accommodates different glove sizes, mask boxes and isolation gowns</td>
</tr>
<tr>
<td>A5107</td>
<td>Dispenser, Glove, Surgical/Examination, Wall Mounted</td>
<td>VV</td>
<td>1</td>
<td>Examination three (Small Medium, Large) glove dispenser box for wall mounting. Fabricated of either cold rolled steel with a white baked enamel finish, plastic, or acrylic. Hardware not included; Option 3 powder coated steel.</td>
</tr>
<tr>
<td>A5145</td>
<td>Hook, Garment, Double, SS, Surface Mounted</td>
<td>CC</td>
<td>2</td>
<td>A surface mounted, satin finish stainless steel, double garment hook. Equipped with a concealed mounting bracket that is secured to a concealed wall plate. For general purpose use throughout the facility to hang various items of apparel.</td>
</tr>
<tr>
<td>CS180</td>
<td>Sink, SS, Single Compartment, 12x22x16 ID</td>
<td>CC</td>
<td>1</td>
<td>Single compartment stainless steel sink, drop-in, self-rimming, ledge-type, connected with a drain and provided with a mixing faucet. It shall also be provided with pre-punched fixture holes on 4&quot; center, integral back ledge to accommodate deck-mounted fixtures, brushed/polished interior and top surfaces, and sound deadened. Recommended for use in suspended or U/C/B sink cabinets having a high plastic laminate or Chemsurf laminate countertop/work surface. Coordinate actual outside sink dimensions with the actual clear dimension of cabinet specified to ensure that they are compatible. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>CT020</td>
<td>Countertop, Solid Surface</td>
<td>CC</td>
<td>1</td>
<td>A solid, nonporous countertop with a smooth seamless appearance. Easy to clean and maintain and with proper cleaning does not support the growth of mold. An acrylic-based solid surface product. Standard thickness of 1&quot;, and a 4&quot; butt backsplash/curb. Also referred to as a work surface or work top. Available in a choice of colors and depths. Used in lab and other hospital areas requiring optimum physical and chemical resisting properties.</td>
</tr>
<tr>
<td>C02Q0</td>
<td>Cabinet, Sink, U/C/B, 1 Door, 36x24x22</td>
<td>CC</td>
<td>2</td>
<td>Standing height under counter base sink cabinet with a solid right or left-hinged door (appropriate door configuration to be indicated on equipment elevation drawings). Also referred to as a single-door sink cabinet. For general purpose use throughout the facility where a sink is to be used. Coordinate actual clear cabinet dimension with the actual outside dimension of sink that is specified to ensure that they are compatible.</td>
</tr>
<tr>
<td>E0948</td>
<td>Cart, General Storage, Mobile, 42&quot; H x 32&quot; W, 22&quot; D</td>
<td>VV</td>
<td>1</td>
<td>This typical includes: 1 Cart Body, Style-A Narrow, w/Raised Edge Top; 2 Drawers, 3&quot; H; 4 Drawers, 6&quot; H; 1 Accessory Rail, Side; Drawer Organizer Bins</td>
</tr>
</tbody>
</table>
### Room Contents: Airborne Infection Isolation Ante Room, ED (CED28) – Cont’d.

<table>
<thead>
<tr>
<th>JSN</th>
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<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>F2010</td>
<td>Basket, Wastepaper, Step-On</td>
<td>VV</td>
<td>1</td>
<td>Step-on wastepaper basket with inner liner and foot pedal activated flip top.</td>
</tr>
<tr>
<td>M3070</td>
<td>Hamper, Linen, Mobile, w/Lid</td>
<td>VV</td>
<td>1</td>
<td>Mobile linen hamper with hand or foot operated lid. Made of heavy tubular stainless steel with heavy gauge welded steel platform. Holds 25&quot; hamper bags. Mounted on ball bearing casters. For linen transport in hospitals and clinics.</td>
</tr>
</tbody>
</table>

### Room Contents: Airborne Infection Isolation Patient Toilet, ED (CED29)

<table>
<thead>
<tr>
<th>JSN</th>
<th>Content Name</th>
<th>Acq Code</th>
<th>Qty</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A1066</td>
<td>Mirror, Float Glass, With SS Frame</td>
<td>CC</td>
<td>1</td>
<td>A high quality 1/4&quot; polished float glass mirror 36X18, framed in a one-piece, bright polished, stainless steel channel frame with 90° mitered corners. All edges of the mirror are protected by absorbing filler strips. Mirror has a galvanized steel back with integral horizontal hanging brackets and wall hanger for concealed mounting. For mounting above single wall mounted lavatories located in toilet areas, Doctors examination offices, etc. May also be used above double lavatories, either wall or countertop mounted, found in restroom areas.</td>
</tr>
<tr>
<td>A5075</td>
<td>Dispenser, Soap, Disposable</td>
<td>VV</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, top filling, liquid soap dispenser. Dispenser features: corrosion-resistant valve, push-in type and operable with one hand; heavy duty hinge and key lock lid; and vandal resistant concealed mounting. Minimum capacity 40 fluid ounces. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5080</td>
<td>Dispenser, Paper Towel, SS, Surface Mounted</td>
<td>CC</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, single-fold, paper towel dispenser. Dispenser features: tumbler lock; front hinged at bottom; and refill indicator slot. Minimum capacity 400 single-fold paper towels. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5090</td>
<td>Disposal, Sanitary Napkin, SS, Surface Mounted</td>
<td>CC</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, sanitary napkin disposal. Dispenser features a flip-up cover, secured to the container by a heavy-duty stainless-steel piano-hinge. Disposal may be secured to wall or toilet partition. For general purpose use in female toilet stalls or rooms and uni-sex toilet rooms.</td>
</tr>
</tbody>
</table>
### Room Contents: Airborne Infection Isolation Patient Toilet, ED (CED29) – Cont’d.

<table>
<thead>
<tr>
<th>JSN</th>
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<th>Qty</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A5109</td>
<td>Grab Bar, 1-1/4” Dia., SS, 2 Wall, W/C Accessible</td>
<td>CC</td>
<td>2</td>
<td>A 1-1/4” diameter, satin finish stainless steel, peened gripping surface, 2 wall toilet stall/room, grab bar with concealed mounting flanges. Snap over flanges are provided to conceal mounting screws. A selection of mounting kits and concealed anchor devices are available from the manufacturers for different types of installations. Grab bars shall comply with barrier-free accessibility guidelines for structural strength. For typical water closet applications in toilet stalls and rooms where ADA (American’s With Disabilities Act) requirements must be met.</td>
</tr>
<tr>
<td>A5145</td>
<td>Hook, Garment, Double, SS, Surface Mounted</td>
<td>CC</td>
<td>2</td>
<td>A surface mounted, satin finish stainless steel, double garment hook. Equipped with a concealed mounting bracket that is secured to a concealed wall plate. For general purpose use throughout the facility to hang various items of apparel.</td>
</tr>
<tr>
<td>A5200</td>
<td>Dispenser, Toilet Tissue, SS, 2-Roll, Surface Mntd</td>
<td>CC</td>
<td>1</td>
<td>A concealed surface mounted, double roll, satin finish stainless steel, toilet tissue dispenser. Unit accommodates two standard core toilet tissue rolls through 5” in diameter. Spindles are chrome plated plastic with a heavy-duty internal spring and turn freely for non-controlled delivery. For general purpose use in restrooms.</td>
</tr>
<tr>
<td>F2010</td>
<td>Basket, Wastepaper, Step-On</td>
<td>VV</td>
<td>1</td>
<td>Step-on wastepaper basket with inner liner and foot petal activated flip top.</td>
</tr>
<tr>
<td>P3100</td>
<td>Lavatory, Vitreous China, Slab Type</td>
<td>CC</td>
<td>1</td>
<td>Wall mounted, slab type, vitreous china, lavatory (approximate bowl size 7”x15”x10”) with faucet holes on 4” centers; gooseneck spout; wrist blade handles; and grid strainer. It shall be suitable for use in clinics, offices, washrooms, or patient care area.</td>
</tr>
<tr>
<td>P9051</td>
<td>Toilet, Floor Mounted, Siphon Jet</td>
<td>CC</td>
<td>1</td>
<td>Siphon jet water closet/toilet. This unit is floor mounted with an elongated bowl, top spud flushometer, seat with open front and check hinge, and carrier. Height does not include seat. Seat is not included with all vendors. See comments.</td>
</tr>
</tbody>
</table>

---
Disclaimer: Room templates are graphical representations of selected room types that illustrate VA planning requirements for space, room contents, and room specific engineering systems. They provide typical configurations, planning criteria, and general technical guidance, and are not intended to be project specific requirements.
Room Data: Resuscitation Room, ED (CED31)

ARCHITECTURAL & INTERIOR DESIGN
Ceiling Finish: m: GWB f: SC
Ceiling Height: 10’-0” (3050mm)
Wall Finish: m: GWB f: RES-W
Wainscot: m: RWC h: 4’-0”
Base: m: RES-3 h: 4” (100mm)
Floor Finish: m: RES-3
Slab Depression: --
Sound Protection: STC 40
Doors: m: Alum t: da: ADO dg: T s: V
Hardware Nr: N/A
Notes:
1. Automatic glass sliding doors must be able to break out of the room for exiting. See Section 08 32 13.

HVAC
Refer to HVAC Design Manual in accordance with project requirements. Refer to the current version of Chapter 6, “Mechanical Room Data Sheets” for room temperatures, humidity range, room air change requirements, noise level, pressurization, and other information.

PLUMBING AND MEDICAL GASES
Cold Water: Yes
Hot Water: Yes
Sanitary Drain: Yes
Medical Air: Minimum 1/gurney
Medical Vacuum: Minimum 1/gurney
Oxygen: Minimum 1/gurney

FIRE PROTECTION
Refer to Fire Protection Design Manual for guidance on fire suppression and fire alarm device type and placement in accordance with project requirements.

POWER
Refer to the latest VA Electrical Design Manual for general electrical requirements.
Normal Power: To be connected to selected receptacles and equipment.
Emergency Power: Critical branch of the EES (Essential Electrical System) to be connected to selected receptacles and equipment.
Notes:
1. Coordinate electrical power requirements with specific vendor equipment.

LIGHTING
Refer to the latest VA Lighting Design Manual section 4.2.1 – Examination and Treatment Room for lighting design consideration.
Notes:
1. Coordinate lighting placement with ceiling track and ceiling track supports.

COMMUNICATION/SPECIAL SYSTEMS
ADP: --
Data: Yes
Telephone: Yes
Intercom: --
Nurse Call: Yes
Public Address: --
Radio/Entertainment: As Required
MATV: --
CCTV: --
MID: --
Security/Duress: --
VTEL: --
VA Satellite TV: --
## Room Contents: Resuscitation Room, ED (CED31)

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<tr>
<th>JSN</th>
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</tr>
</thead>
<tbody>
<tr>
<td>A1010</td>
<td>Telecommunication Outlet</td>
<td>VV</td>
<td>6</td>
<td>Telecommunication outlet location.</td>
</tr>
<tr>
<td>A1014</td>
<td>Telephone, Wall Mounted, 1 Line, With Speaker</td>
<td>VV</td>
<td>1</td>
<td>Telephone, wall mounted, 1 line, with speaker.</td>
</tr>
<tr>
<td>A1110</td>
<td>Headwall, Prefabricated, General, 1-2 bed</td>
<td>CC</td>
<td>1</td>
<td>1-2 bed, general, prefabricated headwall. Unit consists of a patient service module for general care, single or double bed type. It contains lighting, medical gases, electrical outlets, nurse call and bed bumper. Specify number and type of medical gas and electrical outlets. Size of module will vary by type and configuration of outlets.</td>
</tr>
<tr>
<td>A1122</td>
<td>Column, Equipment Arm, Ceiling Mounted, Surgery</td>
<td>VC</td>
<td>1</td>
<td>A ceiling mounted equipment arm, designed to provide equipment placement support, power receptacles including low-voltage panels and gas outlets. Units are custom configured with multiple options available. Mount in tandem with M7485 on one assembly (one boom head, two surgical lights, in total)</td>
</tr>
<tr>
<td>A1203</td>
<td>Lift System, Overhead, Bariatric</td>
<td>VC</td>
<td>1</td>
<td>An overhead ceiling mounted rail system specifically designed for bariatric patient lifting and movement within a patient room. The system will consist of recessed, or ceiling mounted primary and secondary rails, lift motor with carriage, patient harness or seat, and a hand controller or control box with charger (other charging options may be available). System will facilitate lifting and movement of patient to and from bed to stretcher, chair, bathroom or other requirements. Lifting capacity is ~600+lbs pounds. Custom design of track layout by manufacturer is essential to meet individual facility requirements.</td>
</tr>
<tr>
<td>A4015</td>
<td>Clock, Elapsed Time, Electric</td>
<td>CC</td>
<td>1</td>
<td>Elapsed time digital electric clock. Single display time that can be used either as a clock or elapsed time indicator. Clock consists of buttons to set minutes, and hours for the time. For use in operating and delivery room, and medical service columns. Analog or digital displays may be provided as specified by the user.</td>
</tr>
<tr>
<td>A5075</td>
<td>Dispenser, Soap, Disposable</td>
<td>VV</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, top filling, liquid soap dispenser. Dispenser features: corrosion-resistant valve, push-in type and operable with one hand; heavy duty hinge and key lock lid; and vandal resistant concealed mounting. Minimum capacity 40 fluid ounces. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5077</td>
<td>Dispenser, Hand Sanitizer, Hands-Free</td>
<td>VV</td>
<td>2</td>
<td>A touch free wall-mounted hand sanitizer dispenser. For use throughout a healthcare facility. Unit does not include the sanitizing liquid. Units are battery operated.</td>
</tr>
</tbody>
</table>
Room Contents: Resuscitation Room, ED (CED31) – Cont’d.

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<th>JSN</th>
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</tr>
</thead>
<tbody>
<tr>
<td>A5079</td>
<td>Dispenser, Disinfectant Wipes, Wall Mount</td>
<td>VV</td>
<td>1</td>
<td>Wall-Mounted, wire dispenser bracket for large sanitary cloth canisters, Labeled &quot;Not for use on skin&quot;</td>
</tr>
<tr>
<td>A5080</td>
<td>Dispenser, Paper Towel, SS, Surface Mounted</td>
<td>CC</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, single-fold, paper towel dispenser. Dispenser features: tumbler lock; front hinged at bottom; and refill indicator slot. Minimum capacity 400 single-fold paper towels. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5093</td>
<td>Emesis Bag, Wall, Adult</td>
<td>VV</td>
<td>1</td>
<td>Wall-mounted dispenser for emesis bags. Holds biodegradable containment bags and facilitates individual dispensing when needed</td>
</tr>
<tr>
<td>A5094</td>
<td>PPE / Mask-Holder, Wall-mount</td>
<td>VV</td>
<td>1</td>
<td>Wall-mounted personal protection organizer. Accommodates different glove sizes, mask boxes and isolation gowns</td>
</tr>
<tr>
<td>A5107</td>
<td>Dispenser, Glove, Surgical/Examination, Wall Mounted</td>
<td>VV</td>
<td>2</td>
<td>Examination three (Small Medium, Large) glove dispenser box for wall mounting. Fabricated of either cold rolled steel with a white baked enamel finish, plastic or acrylic. Hardware not included; Option 3 powder coated steel.</td>
</tr>
<tr>
<td>A5108</td>
<td>Waste Disposal Unit, Sharps</td>
<td>VV</td>
<td>2</td>
<td>A container for collecting and transporting syringes and other sharps for decontamination and disposal. Available in 2 gallon and 8 gallon with locking rotor. Complies with OSHA regulations for handling sharps.</td>
</tr>
<tr>
<td>A5145</td>
<td>Hook, Garment, Double, SS, Surface Mounted</td>
<td>CC</td>
<td>2</td>
<td>A surface mounted, satin finish stainless steel, double garment hook. Equipped with a concealed mounting bracket that is secured to a concealed wall plate. For general purpose use throughout the facility to hang various items of apparel.</td>
</tr>
<tr>
<td>A5180</td>
<td>Track, Cubicle, Surface Mounted, With Curtain</td>
<td>VV</td>
<td>28</td>
<td>Surface mounted cubicle track, with curtain. Track constructed of thick extruded aluminum. Equipped with self-lubricating carriers, beaded drop chain hooks, and flame-resistant curtain. To include removable end caps. Designed to be suspended around patient areas where privacy is needed. Price listed is per foot of the track, curtains to be priced per quote.</td>
</tr>
<tr>
<td>A5212</td>
<td>Bracket, Television, Wall-Mounted, Tilt/Angle</td>
<td>VV</td>
<td>1</td>
<td>A wall mounted, tilt/angled TV bracket for 37” to 80” TVs. Mount will be a universal and VESA compliant unit with a load capacity of up to 130 lbs.</td>
</tr>
<tr>
<td>A5220</td>
<td>Bracket, Television, Wall Backing</td>
<td>CC</td>
<td>1</td>
<td>Wall mounted television bracket backing which provides additional support and strength for the installation of the television bracket. Option available for interior or exterior plate and sized for 12” 16” or 24” stud spacing.</td>
</tr>
<tr>
<td>E0930</td>
<td>Cart, Storage, Mobile</td>
<td>VV</td>
<td>1</td>
<td>This typical includes: 1 Mobile supply locker; 2 Tray/shelf; 4 Drawers, 3” H; 2 Drawers, 6” H; Drawer Organizer Bins</td>
</tr>
</tbody>
</table>
### Room Contents: Resuscitation Room, ED (CED31) – Cont’d.

<table>
<thead>
<tr>
<th>JSN</th>
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</thead>
<tbody>
<tr>
<td>E0945</td>
<td>Cart, Computer, Mobile</td>
<td>VV</td>
<td>1</td>
<td>A mobile computer cart for use throughout the facility. The cart dimensions will be approximately 45&quot; H x 30&quot; W x 22&quot; D with casters. May include drawers and miscellaneous other accessories that will be determined at time of purchase.</td>
</tr>
<tr>
<td>E0948</td>
<td>Cart, General Storage, Mobile, 42&quot;H x 32&quot;W,26&quot;D</td>
<td>VV</td>
<td>3</td>
<td>This typical includes: 1 Cart Body, Style-A Narrow, w/Raised Edge Top; 2 Drawers, 3&quot; H; 4 Drawers, 6&quot; H; 1 Accessory Rail, Side; Drawer Organizer Bins</td>
</tr>
<tr>
<td>E0954</td>
<td>Cart, Emergency, Mobile, 66&quot;H x 32&quot;W x 22&quot;D</td>
<td>VV</td>
<td>1</td>
<td>This typically includes: 1 Cart body, style-A narrow, w/raised edge top; 1 Accessory rail, side; 1 Accessory rail, back; 1 Defibrillator tray; 1 IV pole; 1 Breakaway bar; 1 Flip-up shelf; 1 Wastebasket; 1 O2 tank holder; 1 Electrical box-4 outlet; 1 Cord wrap; 4 Drawer, 3&quot;H; 3 Drawer, 6&quot;H; Drawer organizer bins.</td>
</tr>
<tr>
<td>F2010</td>
<td>Basket, Wastepaper, Step-On</td>
<td>VV</td>
<td>1</td>
<td>Step-on wastepaper basket with inner liner and foot petal activated flip top.</td>
</tr>
<tr>
<td>F2245</td>
<td>Camera, Video Surveillance, HD, IP Powered</td>
<td>VV</td>
<td>1</td>
<td>A high definition, full functional video surveillance camera. The camera is capable of full 1080p resolution at 30 frames per second while optimizing network usage with H.264, MPEG-4 and JPEG compression formats. Camera will have an open, standards-based design providing a platform for integration and operation as an independent device or as part of a surveillance network.</td>
</tr>
<tr>
<td>F3200</td>
<td>Clock, Battery, 12&quot; Diameter</td>
<td>VV</td>
<td>1</td>
<td>Clock, 12&quot; diameter. Round surface, easy to read numbers with sweep second hand. Wall mounted unit for use when impractical to install a fully synchronized clock system. Battery operated, (batteries not included).</td>
</tr>
<tr>
<td>L0220</td>
<td>Analyzer, Hemoglobin, Portable, Handheld</td>
<td>VV</td>
<td>1</td>
<td>A portable, handheld analyzer for testing hemoglobin. The analyzer will achieve precision and accuracy comparable to a central laboratory. The unit will be battery operated.</td>
</tr>
<tr>
<td>M0506</td>
<td>Television, Flat Screen</td>
<td>VV</td>
<td>1</td>
<td>Flat screen television with approximately 32&quot; to 40' diagonal screen size. The TV will have built-in speakers, NTSC tuner, a 16:9 wide screen aspect ratio, a minimum of 1280 x 768 resolution and a remote control.</td>
</tr>
</tbody>
</table>
Room Contents: Resuscitation Room, ED (CED31) – Cont’d.

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<tbody>
<tr>
<td>M0750</td>
<td>Flowmeter, Air, Connect w/50 PSI Supply</td>
<td>VV</td>
<td>2</td>
<td>Air flowmeter. Unit has a stainless-steel needle valve with clear flow tube for connection to 50 PSI air outlet from central pipeline system. Requires the appropriate adapter for connection to the wall outlet and fitting to connect to tubing. Database prices reflect fittings with an attached DISS power outlet. Other outlet and adapter configurations are available.</td>
</tr>
<tr>
<td>M0755</td>
<td>Flowmeter, Oxygen, Low Flow</td>
<td>VV</td>
<td>4</td>
<td>Oxygen flowmeter. Consists of a clear crystal flow tube calibrated to 3.5 or 8 LPM depending on manufacturer. For oxygen regulation in hospital settings. Database pricing includes DISS fitting and DISS power outlet and wall adapter. Other fitting and adapter configurations are available.</td>
</tr>
<tr>
<td>M0765</td>
<td>Regulator, Vacuum</td>
<td>VV</td>
<td>4</td>
<td>Vacuum pressure regulator for connection to central piped vacuum system. Standard display scale is graduated at least from 0 to 200 mm Hg of vacuum. Displays on specialized regulators may cover other vacuum ranges. Regulator type (continuous, intermittent, continuous/intermittent, surgical, pediatric, thoracic, etc.) as required. To be used in delivery, neonatal, pediatrics or any area where suction is required. Database pricing reflects continuous regulators graduated to 200 mm Hg with a full line vacuum selection switch and DISS configured inlets and outlets.</td>
</tr>
<tr>
<td>M3070</td>
<td>Hamper, Linen, Mobile, w/Lid</td>
<td>VV</td>
<td>1</td>
<td>Mobile linen hamper with hand or foot operated lid. Made of heavy tubular stainless steel with heavy gauge welded steel platform. Holds 25&quot; hamper bags. Mounted on ball bearing casters. For linen transport in hospitals and clinics.</td>
</tr>
<tr>
<td>M3072</td>
<td>Frame, Infectious Waste Bag w/Lid</td>
<td>VV</td>
<td>1</td>
<td>Frame for an infectious waste collection bag. Made of heavy tubular stainless steel with heavy gauge welded steel platform. Adjust to hold 18&quot; or 25&quot; trash bags. Mounted on ball bearing casters and includes permanently mounted hinged lid. Provides means of bagging infectious waste at point of waste generation.</td>
</tr>
<tr>
<td>M3073</td>
<td>Container, Waste, Step-on, Fire Safe</td>
<td>VV</td>
<td>1</td>
<td>A waste container with a step-on lid. The container will have a capacity of approximately 12 gallons and be made of a fire safe material.</td>
</tr>
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### Room Contents: Resuscitation Room, ED (CED31) – Cont’d.

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<tr>
<td>M3110</td>
<td>Cabinet, Warming, F/S, 2 Heated Compartment, Elect</td>
<td>CC</td>
<td>1</td>
<td>Freestanding, single or double door warming cabinet with 2 heated compartments. Compartment and exterior walls are made from stainless steel. Thick fiberglass insulation maintains the interior temperature and keeps the exterior from becoming too hot. Equipped with a sealing door, thermostatic temperature control, status display, heat indicating light, over temperature protection, alarms and an air circulating fan. Unit may have an optional temperature recorder. Manufacturer recommends using a fused disconnect switch in the electrical power circuit. Cabinet may also be installed in a recess. Designed for heating and storing solutions and blankets used in patient care areas.</td>
</tr>
<tr>
<td>M3150</td>
<td>Distribution System, Medication, Automatic</td>
<td>VV</td>
<td>1</td>
<td>An automated dispensing system that provides controlled dispensing, inventory, and security. Size and cost will vary dependent on number of modules selected.</td>
</tr>
<tr>
<td>M4106</td>
<td>Doppler, Vascular, Hand-Held</td>
<td>VV</td>
<td>1</td>
<td>Bi-directional, handheld vascular doppler. Built-in speaker and output for headphones, separated stereo audio output, 5 level waveform calibration function, auto shutoff, noise reduction. Uses 2, 3, 4, 5, 8, 10 MHz probes (sold separately). Includes stereo headphones, gel, carrying bag.</td>
</tr>
<tr>
<td>M4200</td>
<td>Otoscope/Ophthalmoscope, Wall Mounted</td>
<td>VV</td>
<td>2</td>
<td>Wall mounted otoscope and ophthalmoscope. Includes 6 foot line cord and plug and accepts and includes two handles. Contains head turn-on/turn-off, built-in speculum tray and 8 foot coiled cords. Unit is designed for use in patient exam rooms.</td>
</tr>
<tr>
<td>M4255</td>
<td>Stand, IV, Adjustable</td>
<td>VV</td>
<td>2</td>
<td>Adjustable IV stand with 4-hook arrangement. Stand has stainless steel construction with heavy weight base. It adjusts from 66 inches to 100 inches and is mounted on conductive rubber, ball bearing, swivel casters. Stand is used for administering intravenous solutions.</td>
</tr>
<tr>
<td>M4266</td>
<td>Pump, Volumetric, Infusion, Multiple Lines</td>
<td>VV</td>
<td>2</td>
<td>Volumetric infusion pump. Pump is self-regulating with automatic sensor and adjustable rate. Equipped with visual and audible alarms and up to 10 hour capacity battery. For the administration of a wide variety of therapeutic agents where precise control is required. Unit provides individual control to IV lines simultaneously.</td>
</tr>
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Room Contents: Resuscitation Room, ED (CED31) – Cont’d.

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<td>M4655</td>
<td>Stretcher, Mobile, CRS, 9 Position</td>
<td>VV</td>
<td>1</td>
<td>Mobile stretcher. All corrosion resistant stainless-steel construction. It consists of a tubular frame with side rails, a 9-position hydraulic base with pneumatic fowler adjustment, and a 2” pad. Unit is mounted on 8” conductive casters. Designed for patient transport as well as for minor surgical procedures.</td>
</tr>
<tr>
<td>M7040</td>
<td>Table, Overbed</td>
<td>VV</td>
<td>1</td>
<td>Overbed table. Adjustable height table constructed of heavy gauge steel. Mounted on 2” diameter twin swivel casters with bumper caps. Tabletop is constructed with a high pressure plastic laminated surface that resists chipping, scratching, and staining. It includes a vanity tray and a mirror. Table is designed for use over bed, wheelchair, or large chair.</td>
</tr>
<tr>
<td>M7485</td>
<td>Light, Surg, Ceiling Mtd, Dual, Equal Dia Heads</td>
<td>VC</td>
<td>1</td>
<td>Dual head surgical light mounted from a single pole. Both heads are of equal size and hang from individual swing arms. Each light head contains several light sources, an intensity control and a detachable, sterilizable handle. The minimum required ceiling height for most models is 9’-2”; refer to the manufacturers’ specifications. The database height dimension below refers to the height of the lamp heads themselves. Width and depth are the sum of the swing arm length and lamp head diameter. This light is for use in major and minor surgical procedures.</td>
</tr>
<tr>
<td>M7660</td>
<td>Defibrillator/Monitor/Recorder, Portable</td>
<td>VV</td>
<td>1</td>
<td>Portable defibrillator-monitor-recorder. Integral unit system operable from self-contained rechargeable batteries. ECG may be viewed through paddles or patient cable. Options include external pacing and 12-Lead.</td>
</tr>
<tr>
<td>M7818</td>
<td>Monitor, Transport</td>
<td>VV</td>
<td>1</td>
<td>A light weight, rugged patient monitor for use during transport. Unit consists of a compact monitor with touchscreen display with up to 3 waveforms on a on a bright non-fading display. The unit measures ECG/respiration, NBP, SpO2, pressure, and temperature and CO2. Data can be transferred seamlessly throughout the continuum of care. Unit is approved for aeromedical use (US Army Airworthiness Certification and Evaluation (ACE) program. Battery run time of 3 hours before recharge.</td>
</tr>
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Room Contents: Resuscitation Room, ED (CED31) – Cont’d.

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<tr>
<td>M7845</td>
<td>Monitor, Physiological, Bedside, 4 Channel, w/wall bracket</td>
<td>VV</td>
<td>2</td>
<td>4 channel bedside physiological monitor. The unit consist of a four-channel non-fade monochrome display monitor, an alarm system and printer-recording capabilities. The monitor has color coded controls and automatic calibration. The unit displays up to four waveforms simultaneously. The parameters to be monitored are user selectable. The monitor may be connected to a central monitoring station. The unit monitors patients in most acute care areas, step-down units, procedure rooms and emergency rooms.</td>
</tr>
<tr>
<td>M7910</td>
<td>Thermometer, Electronic</td>
<td>VV</td>
<td>1</td>
<td>Electronic thermometer. Pocket size unit with easy to read zero Fahrenheit or zero Centigrade LCD display in approximately 20 seconds. Battery operated and enclosed in a heavy-duty plastic case. Unit is hand-held portable and may be stand or wall mounted. For patient body temperature readings.</td>
</tr>
<tr>
<td>M8495</td>
<td>Laryngoscope, Video, Glidescope</td>
<td>VV</td>
<td>1</td>
<td>A video-assist laryngoscope system with a digital color monitor and digital camera providing real-time view of the airway enabling quick intubation. Unit is designed for first pass success. The unit includes a reusable video baton with digital camera and sterile single use GVL Stats in various sizes.</td>
</tr>
<tr>
<td>M8769</td>
<td>Aspirator, Resuscitation, Portable w/ Battery</td>
<td>VV</td>
<td>1</td>
<td>High-vacuum and high-flow AC/DC powered suction unit for use on emergency resuscitation carts and for general suction use. Light weight, compact design, fully enclosed water-resistant unit with an average run time of 60 minutes. Includes variable suction range up to 580 mmHg and 1200 CC collection canister.</td>
</tr>
<tr>
<td>M8810</td>
<td>Stand, Mayo</td>
<td>VV</td>
<td>1</td>
<td>Adjustable instrument table. Table is corrosion resistant stainless-steel construction and is mounted on two casters with two skid rails. It has telescopic upright adjusts from 39 inches to 60 inches with automatic locking device, and removable 13&quot;x19&quot; instrument tray. Designed for use in operating and procedure rooms.</td>
</tr>
<tr>
<td>M8905</td>
<td>Pail, Utility, CRS, With Carriage</td>
<td>VV</td>
<td>1</td>
<td>Utility pail (kick bucket). Shall be a stainless steel 12 quart bucket for use in surgical operating rooms.</td>
</tr>
<tr>
<td>P6900</td>
<td>Sink, Surgeon's Scrub, Vitreous China</td>
<td>CC</td>
<td>1</td>
<td>A vitreous china surgeon’s scrub sink with a single-hole punched, centered on back ledge, for a gooseneck spout. Sink provided with gooseneck spout, manual knee-action control mixing valve, grid strainer, concealed wall hangers or exposed wall brackets. For general purpose use in surgical and clinical areas of the facility where a scrub sink is required.</td>
</tr>
</tbody>
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Room Contents: Resuscitation Room, ED (CED31) – Cont’d.

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<tr>
<td>P8705</td>
<td>Dialysis Box, Recessed, Single Valve</td>
<td>CC</td>
<td>1</td>
<td>A single cold water valve supply, recessed dialysis box with door. Box is constructed of stainless steel and includes the following standard equipment: cold water valve with 1/2” nom. copper female inlet, 3/4” male hose thread outlet and vacuum breaker; discharge hose bracket, wastewater receptor, and removable wall flange. For use only in the ICU and other acute areas when a patient cannot be moved to the dialysis unit.</td>
</tr>
<tr>
<td>X2125</td>
<td>Scanner, Ultrasound, Portable</td>
<td>VV</td>
<td>1</td>
<td>A portable diagnostic ultrasound scanner system configured for various applications, ease-of-use and high performance for enhanced efficiency and accuracy. The scanner is applicable for use in a wide variety of hospital and office environments including ER, breast surgery, anesthesia, vascular, interventional radiology, and critical care. The system features a high-quality color doppler ultrasound for imaging.</td>
</tr>
</tbody>
</table>
Emergency Department
POINT OF CARE (POC) TESTING ALCOVE, ED (CED33)
AXONOMETRIC

Plot Date: 11/16/2021 4:28:44 PM

DISCLAIMER: ROOM TEMPLATES ARE GRAPHICAL REPRESENTATIONS OF SELECTED ROOM TYPES THAT ILLUSTRATE VA PLANNING REQUIREMENTS FOR SPACE, ROOM CONTENTS, AND ROOM SPECIFIC ENGINEERING SYSTEMS. THEY PROVIDE TYPICAL CONFIGURATIONS, PLANNING CRITERIA, AND GENERAL TECHNICAL GUIDANCE, AND ARE NOT INTENDED TO BE PROJECT SPECIFIC REQUIREMENTS.
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Emergency Department
POINT OF CARE (POC) TESTING ALCOVE, ED (CED33)
REFLECTED CEILING PLAN

Plot Date: 11/16/2021 4:28:46 PM
SCALE: 1/4" = 1'-0"

POINT OF CARE (POC)
TESTING ALCOVE, ED
(CED33)
50 NSF
4.62 NSM

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Emergency Department
POINT OF CARE (POC) TESTING ALCOVE, ED (CED33)
ELEVATIONS

Plot Date: 11/16/2021 4:28:48 PM

SCALE: 1/4" = 1'-0"

A5145
Hook, Garment, Double, SS, Surface Mounted

A5108
Waste Disposal Unit, Sharps, Wall Mounted

C0200
Cabinet, Sink, UIC/B, 1 Door

CT020
Counter, Solid Surface

ELEVATION 3
Room Data: Point of Care (POC) Testing
Alcove, ED (CED33)

ARCHITECTURAL & INTERIOR DESIGN
Ceiling Finish: m: AT
Ceiling Height: 9’-0” (2700mm)
Wall Finish: m: GWB f: P
Wainscot: --
Base: m: RB h: 4” (100mm)
Floor Finish: m: LVT
Slab Depression: --
Sound Protection: --
Doors: OPEN
Hardware Nr: N/A
Notes:

HVAC
Refer to HVAC Design Manual in accordance with project requirements. Refer to the current version of Chapter 6, “Mechanical Room Data Sheets” for room temperatures, humidity range, room air change requirements, noise level, pressurization, and other information.

PLUMBING AND MEDICAL GASES
Cold Water: Yes
Hot Water: Yes
Sanitary Drain: Yes
Medical Air: Not Required
Medical Vacuum: Not Required
Oxygen: Not Required

FIRE PROTECTION
Refer to Fire Protection Design Manual for guidance on fire suppression and fire alarm device type and placement in accordance with project requirements.

POWER
Refer to the latest VA Electrical Design Manual for general electrical requirements.

Normal Power: To be connected to selected receptacles and equipment.

Emergency Power: Critical branch of the EES (Essential Electrical System) to be connected to selected receptacles and equipment.

Notes:
1. Coordinate electrical power requirements with specific vendor equipment.

LIGHTING
Refer to the latest VA Lighting Design Manual section 4.2.1 – Examination and Treatment Room for lighting design consideration.

COMMUNICATION/SPECIAL SYSTEMS
ADP: --
Data: Yes
Telephone: Yes
Intercom: --
Nurse Call: --
Public Address: --
Radio/Entertainment: --
MATV: --
CCTV: --
MID: --
Security/Duress: --
VTEL: --
VA Satellite TV: --
Count Down Clock: --
Room Contents: Point of Care (POC) Testing Alcove, ED (CED33)

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<tr>
<td>A1010</td>
<td>Telecommunication Outlet</td>
<td>VV</td>
<td>3</td>
<td>Telecommunication outlet location.</td>
</tr>
<tr>
<td>A1014</td>
<td>Telephone, Wall Mounted, 1 Line, With Speaker</td>
<td>VV</td>
<td>1</td>
<td>Telephone, wall mounted, 1 line, with speaker.</td>
</tr>
<tr>
<td>A5075</td>
<td>Dispenser, Soap, Disposable</td>
<td>VV</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, top filling, liquid soap dispenser. Dispenser features: corrosion-resistant valve, push-in type and operable with one hand; heavy duty hinge and key lock lid; and vandal resistant concealed mounting. Minimum capacity 40 fluid ounces. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5079</td>
<td>Dispenser, Disinfectant Wipes, Wall Mount</td>
<td>VV</td>
<td>1</td>
<td>Wall-Mounted, wire dispenser bracket for large sanitary cloth canisters, Labeled &quot;Not for use on skin&quot;</td>
</tr>
<tr>
<td>A5080</td>
<td>Dispenser, Paper Towel, SS, Surface Mounted</td>
<td>CC</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, single-fold, paper towel dispenser. Dispenser features: tumbler lock; front hinged at bottom; and refill indicator slot. Minimum capacity 400 single-fold paper towels. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5094</td>
<td>PPE / Mask-Holder, Wall-mount</td>
<td>VV</td>
<td>1</td>
<td>Wall-mounted personal protection organizer. Accommodates different glove sizes, mask boxes and isolation gowns</td>
</tr>
<tr>
<td>A5107</td>
<td>Dispenser, Glove, Surgical/Examination, Wall Mounted</td>
<td>VV</td>
<td>1</td>
<td>Examination three (Small Medium, Large) glove dispenser box for wall mounting. Fabricated of either cold rolled steel with a white baked enamel finish, plastic, or acrylic. Hardware not included; Option 3 powder coated steel.</td>
</tr>
<tr>
<td>A5108</td>
<td>Waste Disposal Unit, Sharps, Large Size</td>
<td>VV</td>
<td>1</td>
<td>A container for collecting and transporting syringes and other sharps for decontamination and disposal. Available in 2 gallon and 8 gallon with locking rotor. Complies with OSHA regulations for handling sharps.</td>
</tr>
<tr>
<td>A5145</td>
<td>Hook, Garment, Double, SS, Surface Mounted</td>
<td>CC</td>
<td>2</td>
<td>A surface mounted, satin finish stainless steel, double garment hook. Equipped with a concealed mounting bracket that is secured to a concealed wall plate. For general purpose use throughout the facility to hang various items of apparel.</td>
</tr>
<tr>
<td>C01D0</td>
<td>Cabinet, U/C/B, 4 Drawer, 36x18x22</td>
<td>CC</td>
<td>1</td>
<td>Standing height under counter base cabinet with four full width drawers of equal height. Also referred to as a drawer cabinet. For general purpose use throughout the facility.</td>
</tr>
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### Room Contents: Point of Care (POC) Testing Alcove, ED (CED33) – Cont’d.

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<tbody>
<tr>
<td>C02Q0</td>
<td>Cabinet, Sink, U/C/B, 1 Door, 36x24x22</td>
<td>CC</td>
<td>2</td>
<td>Standing height under counter base sink cabinet with a solid right or left-hinged door (appropriate door configuration to be indicated on equipment elevation drawings). Also referred to as a single-door sink cabinet. For general purpose use throughout the facility where a sink is to be used. Coordinate actual clear cabinet dimension with the actual outside dimension of sink that is specified to ensure that they are compatible.</td>
</tr>
<tr>
<td>CS180</td>
<td>Sink, SS, Single Compartment, 12x22x16 ID</td>
<td>CC</td>
<td>2</td>
<td>Single compartment stainless steel sink, drop-in, self-rimming, ledge-type, connected with a drain and provided with a mixing faucet. It shall also be provided with pre-punched fixture holes on 4&quot; center, integral back ledge to accommodate deck-mounted fixtures, brushed/polished interior and top surfaces, and sound deadened. Recommended for use in suspended or U/C/B sink cabinets having a high plastic laminate or Chemsurf laminate countertop/work surface. Coordinate actual outside sink dimensions with the actual clear dimension of cabinet specified to ensure that they are compatible. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>CT020</td>
<td>Countertop, Solid Surface</td>
<td>CC</td>
<td>1</td>
<td>A solid, nonporous countertop with a smooth seamless appearance. Easy to clean and maintain and with proper cleaning does not support the growth of mold. An acrylic-based solid surface product. Standard thickness of 1&quot;, and a 4&quot; butt backsplash/curb. Also referred to as a work surface or work top. Available in a choice of colors and depths. Used in lab and other hospital areas requiring optimum physical and chemical resisting properties.</td>
</tr>
<tr>
<td>F2010</td>
<td>Basket, Wastepaper, Step-On</td>
<td>VV</td>
<td>1</td>
<td>Step-on wastepaper basket with inner liner and foot petal activated flip top.</td>
</tr>
<tr>
<td>M3073</td>
<td>Container, Waste, Step-on, Fire Safe</td>
<td>VV</td>
<td>1</td>
<td>A waste container with a step-on lid. The container will have a capacity of approximately 12 gallons and be made of a fire safe material.</td>
</tr>
</tbody>
</table>
DISCLAIMER: ROOM TEMPLATES ARE GRAPHICAL REPRESENTATIONS OF SELECTED ROOM TYPES THAT ILLUSTRATE VA PLANNING REQUIREMENTS FOR SPACE, ROOM CONTENTS, AND ROOM SPECIFIC ENGINEERING SYSTEMS. THEY PROVIDE TYPICAL CONFIGURATIONS, PLANNING CRITERIA, AND GENERAL TECHNICAL GUIDANCE, AND ARE NOT INTENDED TO BE PROJECT SPECIFIC REQUIREMENTS.
Room Data: Simulation/Resuscitation
Viewing Room, ED (CED49)

ARCHITECTURAL & INTERIOR DESIGN
Ceiling Finish: m: AT
Ceiling Height: 9’-0” (2700mm)
Wall Finish: m: GWB f: P
Wainscot: --
Base: m: RB h: 4” (100mm)
Floor Finish: m: LVT
Slab Depression: --
Sound Protection: STC 40
Doors: m: Wood t: 19 dg: T s: U
Hardware Nr: HW-4J

HVAC
Refer to HVAC Design Manual in accordance with project requirements. Refer to the current version of Chapter 6, “Mechanical Room Data Sheets” for room temperatures, humidity range, room air change requirements, noise level, pressurization, and other information.

PLUMBING AND MEDICAL GASES
Cold Water: --
Hot Water: --
Sanitary Drain: --
Reagent grade Water: --
Medical Air: Not Required
Medical Vacuum: Not Required
Oxygen: Not Required

FIRE PROTECTION
Refer to Fire Protection Design Manual for guidance on fire suppression and fire alarm device type and placement in accordance with project requirements.

POWER
Refer to the latest VA Electrical Design Manual for general electrical requirements.
Normal Power: To be connected to selected receptacles and equipment.
Emergency Power: Critical branch of the EES (Essential Electrical System) to be connected to selected receptacles and equipment.

Notes:
1. Coordinate electrical power requirements with specific vendor equipment.

LIGHTING
Refer to the latest VA Lighting Design Manual for lighting design consideration.

COMMUNICATION/SPECIAL SYSTEMS
ADP: --
Data: Yes
Telephone: Yes
Intercom: Yes
Nurse Call: --
Public Address: --
Radio/Entertainment: As Required
MATV: --
CCTV: Yes
MID: --
Security/Duress: --
VTEL: --
VA Satellite TV: --
Count Down Clock: --
Room Contents: Simulation/Resuscitation Viewing Room, ED (CED49)

<table>
<thead>
<tr>
<th>JSN</th>
<th>Content Name</th>
<th>Acq Code</th>
<th>Qty</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A1010</td>
<td>Telecommunication Outlet</td>
<td>VV</td>
<td>5</td>
<td>Telecommunication outlet location.</td>
</tr>
<tr>
<td>A1015</td>
<td>Telephone, Desk, Multiple Line</td>
<td>VV</td>
<td>1</td>
<td>Telephone, desk, multiple line.</td>
</tr>
<tr>
<td>A5077</td>
<td>Dispenser, Hand Sanitizer, Hands-Free</td>
<td>VV</td>
<td>2</td>
<td>A touch free wall-mounted hand sanitizer dispenser. For use throughout a healthcare facility. Unit does not include the sanitizing liquid. Units are battery operated.</td>
</tr>
<tr>
<td>A5145</td>
<td>Hook, Garment, Double, SS, Surface Mounted</td>
<td>CC</td>
<td>2</td>
<td>A surface mounted, satin finish stainless steel, double garment hook. Equipped with a concealed mounting bracket that is secured to a concealed wall plate. For general purpose use throughout the facility to hang various items of apparel.</td>
</tr>
<tr>
<td>A5212</td>
<td>Bracket, Television, Wall-Mounted, Tilt/Angle</td>
<td>VV</td>
<td>2</td>
<td>A wall mounted, tilt/angled TV bracket for 37” to 80” TVs. Mount will be a universal and VESA compliant unit with a load capacity of up to 130 lbs.</td>
</tr>
<tr>
<td>A5220</td>
<td>Bracket, Television, Wall Backing</td>
<td>CC</td>
<td>2</td>
<td>Wall mounted television bracket backing which provides additional support and strength for the installation of the television bracket. Option available for interior or exterior plate and sized for 12” 16” or 24” stud spacing.</td>
</tr>
<tr>
<td>CT020</td>
<td>Countertop, Solid Surface</td>
<td>CC</td>
<td>1</td>
<td>A solid, non-porous countertop with a smooth seamless appearance. Easy to clean and maintain and with proper cleaning does not support the growth of mold. An acrylic-based solid surface product. Standard thickness of 1”, and a 4” butt backsplash/curb. Also referred to as a work surface or work top. Available in a choice of colors and depths. Used in lab and other hospital areas requiring optimum physical and chemical resisting properties.</td>
</tr>
<tr>
<td>F2000</td>
<td>Basket, Wastepaper, Fire Resistant</td>
<td>VV</td>
<td>2</td>
<td>Wastepaper basket, fire resistant, approximately 40 quart capacity. This unit is used to collect and temporarily store small quantities of paper refuse in patient rooms, administrative areas and nursing stations. Size and shape varies depending on the application and manufacturer selected.</td>
</tr>
<tr>
<td>F3200</td>
<td>Clock, Battery, 12” Diameter</td>
<td>VV</td>
<td>1</td>
<td>Clock, 12” diameter. Round surface, easy to read numbers with sweep second hand. Wall mounted unit for use when impractical to install a fully synchronized clock system. Battery operated, (batteries not included).</td>
</tr>
</tbody>
</table>
Room Contents: Simulation/Resuscitation Viewing Room, ED (CED49) – Cont’d.

<table>
<thead>
<tr>
<th>JSN</th>
<th>Content Name</th>
<th>Acq Code</th>
<th>Qty</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>M0506</td>
<td>Television, Flat Screen</td>
<td>VV</td>
<td>2</td>
<td>Flat screen television with approximately 32” to 40” diagonal screen size.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>The TV will have built-in speakers, NTSC tuner, a 16:9 wide screen aspect</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>ratio, a minimum of 1280 x 768 resolution and a remote control.</td>
</tr>
</tbody>
</table>
Emergency Department
DECONTAMINATION SHOWER, ED (CED52)
DECONTAMINATION PATIENT CHANGING ROOM, ED (CED53)
INTERACTIVE 3D PDF

Plot Date: 11/19/2021 8:29:24 AM
SCALE:

DISCLAIMER: ROOM TEMPLATES ARE GRAPHICAL REPRESENTATIONS OF SELECTED ROOM TYPES THAT ILLUSTRATE VA PLANNING REQUIREMENTS FOR SPACE, ROOM CONTENTS, AND ROOM SPECIFIC ENGINEERING SYSTEMS. THEY PROVIDE TYPICAL CONFIGURATIONS, PLANNING CRITERIA, AND GENERAL TECHNICAL GUIDANCE, AND ARE NOT INTENDED TO BE PROJECT SPECIFIC REQUIREMENTS.
Emergency Department
DECONTAMINATION SHOWER, ED (CED52)
DECONTAMINATION PATIENT CHANGING ROOM, ED (CED53)
REFLECTED CEILING PLAN

Plot Date: 11/18/2021 11:21:38 AM
Scale: 1/4" = 1'-0"

DECONTAMINATION PATIENT CHANGING ROOM (CED53)
120 NSF
11.15 NSM

Track, Cubicle, Surface Mounted, With Curtain

DECONTAMINATION SHOWER, ED (CED52)
120 NSF
11.15 NSM

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Emergency Department
DECONTAMINATION SHOWER, ED (CED52)
DECONTAMINATION PATIENT CHANGING ROOM, ED (CED53)
ELEVATIONS

Plot Date: 11/18/2021 11:21:40 AM
Scale: 1/4" = 1'-0"

ELEVATION 3

ELEVATION 4

Disclaimer: Room templates are graphical representations of selected room types that illustrate VA planning requirements for space, room contents, and room specific engineering systems. They provide typical configurations, planning criteria, and general technical guidance, and are not intended to be project specific requirements.
ELEVATION 5

Dispenser, Paper Towel, SS, Surface Mounted

Cabinet, Sink, U/C/B, 2 Door

Basket, Wastepaper, Step-On

Dispenser, Hand Sanitizer, Hands-Free

Cart, Supply, Linen

Bench, Stall, Shower, Built In
ELEVATION 7

CT020
Countertop, Solid Surface

A5030
Bench, Stall, Shower, Built In

ELEVATION 8

A5080
Dispenser, Paper Towel, SS, Surface Mounted

A5075
Dispenser, Soap, Disposable

CS180
Sink, SS, Single Compartment, 12x22x16 ID

C0390
Cabinet, Sink, UC/B, 2 Door

F2010
Basket, Wastepaper, Step-On

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Room Data: Decontamination Shower, ED (CED52)

ARCHITECTURAL & INTERIOR DESIGN
Ceiling Finish:     m: GWB f: SC
Ceiling Height:    9'-0" (2700mm)
Wall Finish:       m: CEM BD [7,44] f: S
Wainscot:         --
Base:             m: RES-2 [7] h: 4" (100mm)
Floor Finish:     m: RES-2
Slab Depression:  Yes
Sound Protection: STC 40
Doors:           m: GALV HM t: 1 s: U,U CR/DPS
Hardware Nr:     HW-E7
Notes:

HVAC
Refer to HVAC Design Manual in accordance with project requirements. Refer to the current version of Chapter 6, “Mechanical Room Data Sheets” for room temperatures, humidity range, room air change requirements, noise level, pressurization, and other information.

PLUMBING AND MEDICAL GASES
Cold Water:        Yes
Hot Water:         Yes
Sanitary Drain:    Yes
Medical Air:       Not Required
Medical Vacuum:    Not Required
Oxygen:            Not Required

FIRE PROTECTION
Refer to Fire Protection Design Manual for guidance on fire suppression and fire alarm device type and placement in accordance with project requirements.

POWER
Refer to the latest VA Electrical Design Manual for general electrical requirements.

LIGHTING
Refer to the latest VA Lighting Design Manual lighting design consideration.

COMMUNICATION/SPECIAL SYSTEMS
ADP:              --
Data:             --
Telephone:        --
Intercom:         Yes
Nurse Call:       Yes
Public Address:   --
Radio/Entertainment: --
MATV:            --
CCTV:            --
MID:             --
Security/Duress:  Yes
VTEL:            --
VA Satellite TV:  --
Count Down Clock: --
### Room Contents: Decontamination Shower, ED (CED52)

<table>
<thead>
<tr>
<th>JSN</th>
<th>Content Name</th>
<th>Acq Code</th>
<th>Qty</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A5180</td>
<td>Track, Cubicle, Surface Mounted, With Curtain</td>
<td>VV</td>
<td>20</td>
<td>Surface mounted cubicle track, with curtain. Track constructed of thick extruded aluminum. Equipped with self-lubricating carriers, beaded drop chain hooks, and flame-resistant curtain. To include removable end caps. Designed to be suspended around patient areas where privacy is needed. Price listed is per foot of the track, curtains to be priced per quote.</td>
</tr>
<tr>
<td>A5030</td>
<td>Bench, Stall, Shower, Built In</td>
<td>CC</td>
<td>2</td>
<td>Shower bench; built in. Eighteen (18) gauge stainless steel frame with anchors built-in into the wall. Size and shape as required.</td>
</tr>
<tr>
<td>M3070</td>
<td>Hamper, Linen, Mobile, w/Lid</td>
<td>VV</td>
<td>1</td>
<td>Mobile linen hamper with hand or foot operated lid. Made of heavy tubular stainless steel with heavy gauge welded steel platform. Holds 25” hamper bags. Mounted on ball bearing casters. For linen transport in hospitals and clinics.</td>
</tr>
<tr>
<td>M4655</td>
<td>Stretcher, Mobile, CRS, 9 Position</td>
<td>VV</td>
<td>1</td>
<td>Mobile stretcher. All corrosion resistant stainless-steel construction. It consists of a tubular frame with side rails, a 9-position hydraulic base with pneumatic fowler adjustment, and a 2” pad. Unit is mounted on 8” conductive casters. Designed for patient transport as well as for minor surgical procedures.</td>
</tr>
<tr>
<td>M4657</td>
<td>Tabletop, Decontamination</td>
<td>VV</td>
<td>1</td>
<td>Hazmat tabletop decontamination tray that fits on any standard hospital gurney or stretcher. The tray shall be light-weight and impermeable, washable and reusable. It shall include two wastewater containers/reservoirs; flexible drain hose; adjustable locking straps and spray nozzle. Used for emergency medical treatment and decontamination of a contaminated/injured patient.</td>
</tr>
<tr>
<td>P5040</td>
<td>Shower, Single, Hand-Held</td>
<td>CC</td>
<td>4</td>
<td>A complete, barrier-free, single hand-held, personal shower system. The shower system includes pressure balanced mixing valve with high temperature limit stop; personal hand shower; shower hose; wall supply; and slide bar. For general purpose use throughout the facility in shower stalls.</td>
</tr>
</tbody>
</table>
### Room Contents: Decontamination Patient Changing Room, ED (CED53)

<table>
<thead>
<tr>
<th>JSN</th>
<th>Content Name</th>
<th>Acq Code</th>
<th>Qty</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A1010</td>
<td>Telecommunication Outlet</td>
<td>VV</td>
<td>1</td>
<td>Telecommunication outlet location.</td>
</tr>
<tr>
<td>A5030</td>
<td>Bench, Stall, Shower, Built In</td>
<td>CC</td>
<td>2</td>
<td>Shower bench; built in. Eighteen (18) gauge stainless steel frame with anchors built-in into the wall. Size and shape as required.</td>
</tr>
<tr>
<td>A5075</td>
<td>Dispenser, Soap, Disposable</td>
<td>VV</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, top filling, liquid soap dispenser. Dispenser features: corrosion-resistant valve, push-in type and operable with one hand; heavy duty hinge and key lock lid; and vandal resistant concealed mounting. Minimum capacity 40 fluid ounces. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>A5077</td>
<td>Dispenser, Hand Sanitizer, Hands-Free</td>
<td>VV</td>
<td>1</td>
<td>A touch free wall-mounted hand sanitizer dispenser. For use throughout a healthcare facility. Unit does not include the sanitizing liquid. Units are battery operated.</td>
</tr>
<tr>
<td>A5079</td>
<td>Dispenser, Disinfectant Wipes, Wall Mount</td>
<td>VV</td>
<td>1</td>
<td>Wall-Mounted, wire dispenser bracket for large sanitary cloth canisters, Labeled &quot;Not for use on skin&quot;</td>
</tr>
<tr>
<td>A5080</td>
<td>Dispenser, Paper Towel, SS, Surface Mounted</td>
<td>CC</td>
<td>1</td>
<td>A surface mounted, satin finish stainless steel, single-fold, paper towel dispenser. Dispenser features: tumbler lock; front hinged at bottom; and refill indicator slot. Minimum capacity 400 single-fold paper towels. For general purpose use throughout the facility.</td>
</tr>
<tr>
<td>C03P0</td>
<td>Cabinet, Sink, U/C/B, 2 Door, 30&quot; W</td>
<td>CC</td>
<td>1</td>
<td>Standing height under counter base sink cabinet. 36&quot; H x 30&quot; W x 22&quot; D with two solid hinged doors. Also referred to as a double-door sink cabinet. For general purpose use throughout the facility where a sink is to be used. Coordinate actual clear cabinet dimension with the actual outside dimension of sink that is specified to ensure that they are compatible.</td>
</tr>
<tr>
<td>CS180</td>
<td>Sink, SS, Single Compartment, 12x22x16 ID</td>
<td>CC</td>
<td>1</td>
<td>Single compartment stainless steel sink, drop-in, self-rimming, ledge-type, connected with a drain and provided with a mixing faucet. It shall also be provided with pre-punched fixture holes on 4&quot; center, integral back ledge to accommodate deck-mounted fixtures, brushed/polished interior and top surfaces, and sound deadened. Recommended for use in suspended or U/C/B sink cabinets having a high plastic laminate or Chemsurf laminate countertop/work surface. Coordinate actual outside sink dimensions with the actual clear dimension of cabinet specified to ensure that they are compatible. For general purpose use throughout the facility.</td>
</tr>
</tbody>
</table>
Room Contents: Decontamination Patient Changing Room, ED (CED53) – Cont’d.

<table>
<thead>
<tr>
<th>JSN</th>
<th>Content Name</th>
<th>Acq Code</th>
<th>Qty</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CT020</td>
<td>Countertop, Solid Surface</td>
<td>CC</td>
<td>1</td>
<td>A solid, nonporous countertop with a smooth seamless appearance. Easy to clean and maintain and with proper cleaning does not support the growth of mold. An acrylic-based solid surface product. Standard thickness of 1”, and a 4” butt backsplash/curb. Also referred to as a work surface or work top. Available in a choice of colors and depths. Used in lab and other hospital areas requiring optimum physical and chemical resisting properties.</td>
</tr>
<tr>
<td>F2010</td>
<td>Basket, Wastepaper, Step-On</td>
<td>VV</td>
<td>1</td>
<td>Step-on wastepaper basket with inner liner and foot pedal activated flip top.</td>
</tr>
<tr>
<td>F0515</td>
<td>Cart, Supply, Linen</td>
<td>VV</td>
<td>1</td>
<td>Closed linen supply cart. Equipped with four (4) non-marking rubber tire roller bearing casters and heavy-duty cover. May be used for the delivery and user storage of clean linen as well as the return of soiled linen.</td>
</tr>
</tbody>
</table>
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ED SECURITY STATION, POLICE SVC (SB851)

100 NSF
9 29 NSM

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Room Data: ED Security Station, POLICE SVC (SB851)

ARCHITECTURAL & INTERIOR DESIGN
Ceiling Finish: m: AT f: SP
Ceiling Height: 9'-0" (2700mm)
Wall Finish: m: GWB f: SC
Wainscot: --
Base: m: PRB [8] h: 4" (100mm)
Floor Finish: m: LVT
Slab Depression: --
Sound Protection: --
Doors: m: WOOD t: 3 dg: T s: S & m: GALV HM t: 3 df: T s: S
Hardware Nr: SH-3D
Notes:

HVAC
Refer to HVAC Design Manual in accordance with project requirements. Refer to the current version of Chapter 6, “Mechanical Room Data Sheets” for room temperatures, humidity range, room air change requirements, noise level, pressurization, and other information.

PLUMBING AND MEDICAL GASES
Cold Water: --
Hot Water: --
Sanitary Drain: --
Reagent grade Water: --
Medical Air: Not Required
Medical Vacuum: Not Required
Oxygen: Not Required

FIRE PROTECTION
Refer to Fire Protection Design Manual for guidance on fire suppression and fire alarm device type and placement in accordance with project requirements.

POWER
Refer to the latest VA Electrical Design Manual for general electrical requirements.
Normal Power: To be connected to selected receptacles and equipment.
Emergency Power: Critical branch of the EES (Essential Electrical System) to be connected to selected receptacles and equipment.

LIGHTING
Refer to the latest VA Lighting Design Manual for lighting design consideration.

COMMUNICATION/SPECIAL SYSTEMS
ADP: --
Data: Yes
Telephone: Yes
Intercom: Yes
Nurse Call: --
Public Address: --
Radio/Entertainment: As Required
MATV: --
CCTV: Yes
MID: --
Security/Duress: Yes
VTEL: --
VA Satellite TV: --
Count Down Clock: --
### Room Contents: ED Security Station, POLICE SVC (SB851)

<table>
<thead>
<tr>
<th>JSN</th>
<th>Content Name</th>
<th>Acq Code</th>
<th>Qty</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A5077</td>
<td>Dispenser, Hand Sanitizer, Hands-Free</td>
<td>VV</td>
<td>1</td>
<td>A touch free wall-mounted hand sanitizer dispenser. For use throughout a healthcare facility. Unit does not include the sanitizing liquid. Units are battery operated.</td>
</tr>
<tr>
<td>A1015</td>
<td>Telephone, Desk, Multiple Line</td>
<td>VV</td>
<td>1</td>
<td>Telephone, desk, multiple line.</td>
</tr>
<tr>
<td>F0205</td>
<td>Chair, Side With Arms</td>
<td>VV</td>
<td>2</td>
<td>Upholstered side chair, 32&quot; high X 21&quot; wide X 23&quot; deep with arms, padded seats and padded backs. Seat height is a minimum of 17&quot;. Available with or without sled base.</td>
</tr>
<tr>
<td>F1000</td>
<td>Detector, Metal, Hand-Held</td>
<td>VV</td>
<td>1</td>
<td>Handheld metal detector; audible &amp; visual alarms, includes battery &amp; charger.</td>
</tr>
<tr>
<td>F1001</td>
<td>Gun Locker</td>
<td>VV</td>
<td>2</td>
<td>Wall-mounted pistol / handgun locker</td>
</tr>
<tr>
<td>F2010</td>
<td>Basket, Wastepaper, Step-On</td>
<td>VV</td>
<td>1</td>
<td>Step-on wastepaper basket with inner liner and foot pedal activated flip top.</td>
</tr>
<tr>
<td>F3200</td>
<td>Clock, Battery, 12&quot; Diameter</td>
<td>VV</td>
<td>1</td>
<td>Clock, 12&quot; diameter. Round surface, easy to read numbers with sweep second hand. Wall mounted unit for use when impractical to install a fully synchronized clock system. Battery operated, (batteries not included).</td>
</tr>
<tr>
<td>M1801</td>
<td>Computer, Micro processing, w/Flat Panel Monitor</td>
<td>VV</td>
<td>1</td>
<td>Desk top micro processing computer. The unit shall consist of a central processing mini tower, flat panel monitor, keyboard, mouse and speakers. The system shall have the following minimum characteristics: a 2.8 GHz Pentium processor; 512 MB memory; 80GB hard drive; 32/48x CD-ROM/DVD combo; 1.44MB network interface card; video 32 MB NVIDIA; an 18 inch flat panel monitor. The computer is used throughout the facility to input, manipulate and retrieve information.</td>
</tr>
<tr>
<td>M7910</td>
<td>Thermometer, Electronic</td>
<td>VV</td>
<td>1</td>
<td>Electronic thermometer. Pocket size unit with easy to read zero Fahrenheit or zero Centigrade LCD display in approximately 20 seconds. Battery operated and enclosed in a heavy-duty plastic case. Unit is hand-held portable and may be stand or wall mounted. For patient body temperature readings.</td>
</tr>
</tbody>
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