



Oregon Health Authority
Public Health Division
Health Care Regulation and Quality Improvement

Amendments to:

2018
Facility Guidelines Institute
Guidelines for Design and Construction of
Outpatient Facilities

for purposes of the following administrative rules:

OAR 333-76-0185

OAR 333-76-1050

OAR 333-700-0131

which refer to OAR 333-535-0015

1.1 Introduction

1.1-2 New Construction

Project submittal criteria shall comply with OAR 333-675-0000. Projects with any of the following scopes of work shall be considered new construction and shall comply with the requirements in the *Guidelines for Design and Construction of Outpatient Facilities*:

1.1-3.1.1.2 Major renovation projects

Project submittal criteria shall comply with OAR 333-675-0000. Projects with either of the following scopes of work shall be considered a major renovation and shall comply with the requirements for new construction in the *Guidelines for Design and Construction of Outpatient Facilities* to the extent possible as determined by the authority having jurisdiction:

1.1 Introduction

1.1-3.1.2.1 Where major structural elements make total compliance impractical or impossible, exceptions shall be considered **in accordance with the Oregon administrative rules specific to the physical environment of the type of health care facility under consideration.**

***1.1-3.1.2.2** Minor renovation or replacement work shall be permitted to be exempted from the requirements in Section [1.1-3.1.1](#) (Compliance Requirements) provided they **meet the criteria specified in OAR 333-675-0000(2) or (3) and** do not reduce the level of health and safety in an existing facility.

1.2 Planning, Design, Construction, and Commissioning

***1.2-2.1.2.1** The governing body shall be responsible for having a functional program developed, documented, and updated. **The governing body may delegate documentation of the functional program to consultants with subject matter expertise. The governing body shall review and approve the functional program.**

~~**1.2-2.1.2.3** Activities such as equipment replacement, fire safety upgrades, or minor renovations that will not change the facility's function or character shall not require a functional program.~~

A1.2-2.1.1 Functional program purpose

a. All projects, large and small, require a functional program to guide the design. The length and complexity of the functional program will vary greatly depending on project scope. ~~The functional program for a small, simple project might consist of a simple sketch or a description of a few sentences.~~

~~**A1.2-2.1.2.1** The governing body may delegate documentation of the functional program to the architect or another consultant.~~

1.2 Planning, Design, Construction, and Commissioning

1.2-2.2.7.4 A description of the following:

- (a) Special design feature(s);**
- (b) Occupant load, numbers of staff, patients, visitors and vendors;**
- (c) Issue of privacy/confidentiality for patient;**
- (d) In treatment areas, describe:**
 - (A) Types of procedures;**
 - (B) Design considerations for equipment;**
 - (C) Requirements where the circulation patterns are a function of asepsis control; and**
 - (D) Highest level of sedation, if applicable.**
- (e) For Outpatient Surgery facilities, the functional program must also describe:**
 - (A) Level of medical gas system per NFPA 99; and**
 - (B) Type of central electrical system.**

1.2 Planning, Design, Construction, and Commissioning

1.2-4.1.1.2 To support this goal, an interdisciplinary team shall develop a safety risk assessment (SRA). **A copy of the SRA shall accompany construction documents submitted to the Oregon Health Authority, Facility Planning and Safety program.**

1.2 Planning, Design, Construction, and Commissioning

1.2-4.6.1 Behavioral and Mental Health Elements of the Safety Risk Assessment

The SRA report shall identify areas where patients at risk of mental health injury and suicide will be served. **Elements of the assessment shall include but are not limited to:**

- (1) A statement explaining the psychiatric population groups served;**
- (2) A discussion of the capability for staff visual supervision of patient ancillary areas and corridors;**
- (3) A discussion of the risks to patients, including self-injury, and the project solutions employed to minimize such risks; and**
- (4) A discussion of building features and equipment, including items which may be used as weapons, that is intended to minimize risks to patients, staff and visitors.**

1.2 Planning, Design, Construction, and Commissioning

***~~1.2-8~~ Commissioning**

Subsections 1.2-8.1 through 1.2-8.2.5.5 are deleted in entirety.

1.2 Planning, Design, Construction, and Commissioning

~~*1.2-9 Record Drawings and Manuals~~

Subsections 1.2-9.1 through 1.2-9.3.6 are deleted in entirety.

2.1 Common Elements for Outpatient Facilities

2.1-3.2.1.2 Single-patient examination/observation room

(3)(f) Work counter that complies with 2.1-7.2.2.15 (Work Surfaces)

2.1 Common Elements for Outpatient Facilities

2.1-3.2.2.8 Support areas for the procedure room

*(12) Soiled holding. A **dedicated soiled hold room or** space for holding soiled materials shall be provided that is separate from the clean storage area.

2.1-3.2.2.7 Other design requirements

(4) Provision for in-room storage of supplies and equipment used in procedure room. May be fixed cabinets or movable cart(s).

2.1-3.2.2.10 Support areas for patients

(4) Storage for patients' belongings. Provisions shall be made for securing patients' personal effects during procedures. **Individual, lockable storage shall be provided.**

2.1 Common Elements for Outpatient Facilities

2.1-3.2.3.10 Support areas for patients

(4) Storage for patients' belongings. Provisions shall be made for securing patients' personal effects during procedures. **Individual, lockable storage shall be provided.**

2.1-3.2.3.8 Support areas for the operating room

(1) General

(a) Facilities that have an operating room(s) shall have the support areas in this section.

(b) Sharing of these support areas with other clinical services in the facility shall be permitted. **An ambulatory surgery center (ASC) that is Medicare-certified must be distinct from any other health care facility or office-based physician practice as required in 42 CFR 416.2 and 42 CFR 416.44(a)(2) and (b).**

(12) Soiled ~~holding~~ **workroom meeting requirements in 2.1-3.8.12.** A ~~space~~ **room** for holding soiled materials shall be provided that is separate from the clean storage area.

2.1 Common Elements for Outpatient Facilities

***2.1-3.5.1.3 Radiation protection**

~~*(c) Shielded view window. The control alcove or room shall include a shielded view window designed to provide a full view of the examination/procedure table and the patient at all times, including a full view of the patient during imaging activities (e.g., when the table is tilted or the chest x-ray is in use). **Where protected alcoves with view windows are required, a minimum of 1 foot 6 inches between the view window and the outside partition edge shall be provided. If a direct line of sight cannot be accommodated due to functional requirements, use of closed circuit video monitoring shall be permitted.**~~

2.1-3.5.2 Imaging Rooms

2.1-3.5.2.1 General

(3) Where imaging procedures meeting Class 3 criteria are performed, a room(s) that meets the requirements for the applicable imaging suite and for an operating room (see Section 2.1-3.2.3) shall be provided. **These imaging rooms shall comply with the following:**

(a) Be sized to accommodate the personnel and equipment planned to be in the room during procedures.

(b) Have a minimum clear floor area of 600 square feet (55.74 square meters) with a minimum clear dimension of 20 feet (6.10 meters).

(c) Where renovation work is undertaken and it is not possible to meet the above minimum standards, these rooms shall have a minimum clear floor area of 500 square feet (46.50 square meters) with a minimum clear dimension of 20 feet (6.10 meters).

(d) Fixed encroachments into the minimum clear floor area. Fixed encroachments shall be permitted to be included when determining the minimum clear floor area for an operating room as long as:

(i) There are no encroachments into the sterile field.

(ii) The encroachments do not extend more than 12 inches (30.5 centimeters) into the minimum clear floor area outside the sterile field.

(iii) The encroachment width along each wall does not exceed 10 percent of the length of that wall.

2.1 Common Elements for Outpatient Facilities

***2.1-3.5.4.4 Mammography room.**

(5) Where patients change in mammography room, privacy shall be provided.

2.1 Common Elements for Outpatient Facilities

2.1-3.6.2.4 Hybrid imaging/therapy systems

Where external beam radiation therapy systems are combined with a concurrent imaging option (e.g., CT or MRI), the full design criteria for both contributing imaging/therapy devices shall be applied to the hybrid service.

A2.1-3.6

b. Hybrid imaging/therapy systems. Where external beam radiation therapy systems are combined with a concurrent imaging option (e.g., CT or MRI), the full design criteria for both contributing imaging/therapy devices should shall be applied to the hybrid service.

2.1 Common Elements for Outpatient Facilities

2.1-3.6.8.17 Additional Support Areas:

(1) Control room or area:

(a) All external beam radiation therapy treatment and simulator rooms shall have a control room or area.

(b) Control room shall have visual and audio contact with patient in the treatment room. Visual contact may be direct or by video link.

(2) Treatment planning and record room, if provided, shall be sized to meet manufacturers' dosimetry system requirements.

(3) Consultation room shall be provided for radiation therapy suite.

A2.1-3.6.8.16 Other support areas for radiation therapy.

In addition to the optional support areas in the main text, the following support areas may be needed to support radiation therapy services:

~~a. Treatment planning and record room~~

~~b. Computer control area. This is usually located just outside the entry to the radiation therapy room(s).~~

~~e.-a. Dosimetry equipment area or storage for calibration phantoms~~

~~d.-b. Workstation/nutrition station~~

2.1 Common Elements for Outpatient Facilities

2.1-3.8.2.5

~~Hand-wash-sanitation dispenser station shall be provided~~
within 20 feet, not through a door. See section [2.1-7.2.2.8](#)
(Hand-washing stations) for requirements.

2.1-3.8.7.3 Additional requirements for hand-washing stations that serve multiple patient care stations

~~*(1) At least one hand-washing station shall be provided for every four patient care stations or fewer. and for each major fraction thereof.~~

2.1 Common Elements for Outpatient Facilities

2.1-3.8.10.1

~~In public areas,~~ Ice-making equipment shall be of the self-dispensing type.

2.1-3.8.10.2

~~In areas restricted to staff only, use of storage bin type equipment for making and dispensing ice shall be permitted.~~

2.1 Common Elements for Outpatient Facilities

2.1-3.8.12.3 Soiled holding room.

(1) Hand-washing station. ~~Or hand sanitation dispenser~~

2.1 Common Elements for Outpatient Facilities

2.1-4.1.2.3 Hand-washing station(s)

(2) Additional hand-washing stations shall be provided ~~based on the safety risk assessment.~~ **within 20 feet of each workstation where specimens or reagents are handled.**

2.1 Common Elements for Outpatient Facilities

2.1-4.1.8.1 Storage cabinet(s) or closet(s)

(2) Refrigeration for storage of reagents, controls and patient specimens as necessary.

2.1 Common Elements for Outpatient Facilities

2.1-4.2.8.7 Hand-washing station.

A hand-washing station(s) shall be provided ~~either in an anteroom or immediately outside the room where open medication(s) are prepared~~ **within each separate room where open medication is prepared for administration except where prohibited by OAR chapter 855, division 045; USP 797 or USP 800. Where a hand-wash station is prohibited in the compounding room, a hand-wash station(s) shall be provided in an anteroom.**

2.1 Common Elements for Outpatient Facilities

2.1-4.3.2.4 Equipment and supply storage

(2) Clean/sterile medical/surgical supply receiving room or area. A room or area shall be provided for receiving/unpacking clean/sterile supplies received from outside the department or facility. **This room or area may not be located inside clean storage.**

2.1 Common Elements for Outpatient Facilities

2.1-4.4.2.1 Dedicated linen processing area

(1) This area shall be large enough to accommodate the following:

(a) Washer/extractor(s). **Washers/extractors shall provide a temperature of at least 160 degrees Fahrenheit for a minimum of 25 minutes or include use of a chemical disinfectant.**

(b) Dryer.

(c) **Supply storage. Storage shall be provided for laundry supplies.**

(d) Any plumbing equipment needed to meet the temperature requirements in Section [2.1-8.4.2.5](#) (4) (Water temperature).

2.1 Common Elements for Outpatient Facilities

2.1-5.2.1.3 Regulated waste holding spaces

(1) Secured space shall be provided for regulated medical waste and other regulated waste types.

*(a) Where provided as interior spaces, areas for temporary holding of regulated waste shall have cleanable floor and wall surfaces.

(b) Wall base shall be integral and coved with the floor, tightly sealed to the wall, and constructed without voids that can harbor insects.

(c) The regulated waste storage spaces shall have lighting and exhaust ventilation, be safe from weather, animals and unauthorized entry.

(d) Regulated waste management shall be in accordance with the requirements of OAR Chapter 333, division 056.

(e) Refrigeration requirements for such holding facilities, if provided, shall comply with local and state regulations.

***2.1-5.3.1.2 Environmental services room(s) for facility-based environmental services provisions. Environmental services room shall be a minimum of 35 square feet.** Each environmental services room shall be provided with the following:

(3) Hand-washing station ~~in or proximate to and~~ or hand sanitation dispenser.

2.1 Common Elements for Outpatient Facilities

***2.1-7.2.2.1 Corridor width**

(2) Corridors used for stretcher and gurney transport shall have a minimum corridor or aisle width of 6 feet (1.83 meters). **This requirement is not applicable to Birth Centers (see 2.4-7.2.1.1) or Renal Dialysis Centers (see 2.10-3.2.1.5)**

2.1 Common Elements for Outpatient Facilities

***2.1-7.2.2.8 Hand-washing stations**

*(1) General

(b) The number and placement of ~~both hand-washing stations and~~ hand sanitation dispensers shall be determined by an ICRA.

2.1 Common Elements for Outpatient Facilities

***2.1-7.2.2.8 Hand-washing stations**

(8) Mirrors are not permitted at scrub, clinical or other staff use hand-wash stations, with the exception of staff toilets.

2.1-7.2.2.11 Radiation protection

(4) All imaging facilities and radiation producing equipment installations must comply with OAR Chapter 333, divisions 100 through 123, and be licensed by the Oregon Health Authority, Radiation Protection Services program.

~~A2.1-7.2.2.8 (7) Mirrors should not be used at clinical hand-washing stations to avoid personal grooming that can impact proper hand hygiene.~~

2.1 Common Elements for Outpatient Facilities

2.1-7.2.2.15 Work Surfaces:

***Work areas.* Where a work space, work area, work counter, or work surface is provided, it shall have a minimum of 4 square feet (.37 square meter) of contiguous clear surface for each person programmed to work in the space at the same time. A mobile cart meeting these requirements shall be permitted.**

2.1 Common Elements for Outpatient Facilities

* 2.1-7.2.3.1 Flooring and wall bases

(6)(a)(ix) Protective environment rooms

(x) Bathing and toilet rooms

(xi) Soiled workrooms and soiled hold rooms

(xii) Environmental services rooms

(xiii) Pharmacy clean and anterooms

* 2.1-7.2.3.2 Walls and wall protection

(1)(c)(ix) Bathing and toilet rooms.

2.1 Common Elements for Outpatient Facilities

*** 2.1-8.2.1.2**

(4) Extended Stay Centers

2.1 Common Elements for Outpatient Facilities

2.1-8.7.5.1

(1) Elevator call buttons and controls shall not be activated by heat or smoke.

(2) Each elevator, except those for material handling, shall be equipped with an independent keyed switch for staff use for bypassing all landing button calls and responding to car button calls only.

*** 2.1-8.7.1 General**

(1) Where an outpatient facility is located on more than one floor or on a floor other than an entrance floor at grade level, at least one elevator shall be provided.

(2) Installation and testing of elevators shall comply with the Oregon Elevator Code.

A2.1-8.7.1

Consideration should be given to dedicating and separating elevator types by function, such as those for the public, patients, staff, and materials (for example, clean versus soiled flows), as the diverse uses affect both operational efficiency and cross-contamination and infection control issues.

2.2 Specific Requirements for General and Specialty Medical Services Facilities

2.2-3.10.2.2

This patient toilet room shall be permitted to serve waiting areas **in clinics with five or fewer examination rooms.**

2.2-3.8.11.3

A clean workroom ~~may~~ **shall be permitted** to be shared with other clinical services in the same building; **in accordance with state and** ~~as permitted by licensing and~~ **federal regulations.**

2.2 Specific Requirements for General and Specialty Medical Services Facilities

2.2-5.2.3

Location of storage for hazardous waste (red bag trash) and sharps shall be behind a closed door. ~~Location of this storage in an exam room shall be permitted.~~ **An exam room shall not be used for cumulated storage of hazardous waste and sharps.**

2.2-4.3.3.1

Provision of an area instead of a room shall be permitted to meet the requirements in sections [2.1-4.3.3.1](#) (A room for breakdown...) and 2.1-4.3.3.2 (A room for on-site storage...). **Breakdown area may not be located in clean workroom or clean storage.**

2.4 Specific Requirements for Birth Centers

*** 2.4-1.2 Functional Program**

See Section 1.2-2 and 2.1-1.2 (Functional Program) for requirements.

2.4 Specific Requirements for Birth Centers

2.4-2.2.6 Bathrooms

Each birthing room shall have direct access to a private bathroom **that meets the requirements in 2.1-3.10.2 (Patient Toilet Room(s)) and includes with** the following:

2.4-2.2.6.1 Hand-washing station

See Section 2.1-7.2.2.8 (Hand-washing stations) and Section 2.1-8.4.3.2 (Hand-washing station sinks) for requirements

2.4-2.2.6.3 Shower or tub

See Section 2.1-8.4.3.3 (Showers and tubs) for requirements.

2.4-2.2.7 Documentation and Charting

Accommodations for written or electronic documentation shall be provided in the birthing room or at a Nurse Station. See Section 2.1-3.8.3 (Documentation Area) for requirements.

2.4-2.2.4 Privacy

Windows or doors within a normal sightline that would permit observation into the room shall be designed for mother and newborn privacy. See **2.1-3.1.2 (Patient Privacy)** for additional requirements.

2.4 Specific Requirements for Birth Centers

2.4-2.8.7 Hand-Washing Stations

Hand-washing stations shall be located in, next to, or directly accessible to staff work area(s) **and not through a door.**

2.4-2.8.13.4 Emergency equipment storage. See Section 2.1-3.8.413.4 (Emergency equipment storage) for requirements.

*** 2.4-2.8.14 Environmental Services Room**

An environmental services room that meets the requirements in Section [2.1-5.3.1.2](#) (Environmental services room ~~for facility-based environmental services provisions~~) shall be provided for the exclusive use of the birth center.

2.4-2.8.10.2

Ice ~~accessible to the public~~ shall be served from self-dispensing ice-makers.

2.4-2.8.11 Clean Workroom or Clean Work Area

A clean work area or clean workroom shall be provided **in accordance with Section 2.1-3.8.11 (Clean Workroom or Clean Supply Room)**

2.4 Specific Requirements for Birth Centers

2.4-4.1 – 2.4-4.2 Reserved

2.4-4.3 Sterile Processing

2.4-4.3.1 Facilities for On-Site Sterile Processing

Where sterile processing is performed on-site, see Section [2.1-4.3](#) (Sterile Processing) for requirements.

2.4-4.3.2 Support Areas for Birthing Centers Using Off-Site Sterile Processing

For Birthing Centers where sterile processing services are provided off-site, see Section [2.1-4.3.3](#) (Support Areas for Outpatient Facilities Using Off-Site Sterile Processing) for requirements.

2.4-6.2 Public Areas

Public areas shall be provided in accordance with Section [2.1-6.2](#) (Public Areas).

2.4-6.2.1 Reserved

~~2.4-6.2.2 Reception Area~~

~~A reception area shall be provided and located to control and monitor access to the birth center.~~

~~2.4-6.2.3 Waiting Area or Room~~

~~A waiting area or room shall be provided in accordance with Section [2.1-6.2.3](#) (Waiting Area or Room).~~

2.4-4.5.2.1 Facilities for commissary or contract services from other areas

(3) Shall meet the requirements of the Oregon Food Sanitation Rules OAR 333-150-0000.

A2.4-6.2.3 Waiting area or room.

Seating capacity may need to be increased from that specified in appendix table [A2.1-a](#) (Waiting Area Seating Capacity) based on projected family size, visitor numbers, and travel distance to the facility.

2.4 Specific Requirements for Birth Centers

* 2.4-8.3.1 Lighting

- (1) The birthing room shall provide lighting capable of providing at least 70 foot-candles in the delivery and newborn care area(s).
- (2) **Exam light(s) shall be provided for each birthing room.**

2.4-7.1 Building Codes

The birth center shall be permitted to fall under the business occupancy provisions of applicable life safety and building codes. **Building design and construction shall comply with local, state, and federal guidelines.**

2.4-7.2 Architectural Details and Surfaces

See Section 2.1-7.2 (Architectural Details, Surfaces, and furnishings) for requirements.

2.4-8 Building Systems

See Section 2.1-8 (Building Systems) for requirements.

2.4-8.7 Elevators

Where elevators are provided, elevator cars shall have minimum inside dimensions of 5 feet 8 inches (1.73 meters) wide by 7 feet 6 inches (2.29 meters) deep. **Installation and testing of elevators shall comply with the Oregon Elevator Code.**

2.5 Specific Requirements for Urgent Care Centers

2.5-3.2.3.1 Location. The space used to triage patients shall be permitted to be any of the following:

- (1) A dedicated triage space. **The triage space or bay shall be a minimum 80 square feet.**

2.5-3.2.3.3 Hand-washing station. The triage area(s) shall be directly accessible to a hand-washing station(s) that complies with Section [2.1-3.8.7](#) (Hand-Washing Station). **Hand-wash stations shall be provided in each triage room if rooms are provided.**

2.7 Specific Requirements for Outpatient Surgery Facilities

2.7-1.2.3 Shared Services

(1) If the outpatient surgery facility is part of an acute care hospital or other medical facility, services shall be permitted to be shared to minimize duplication as acceptable to authorities having jurisdiction.

(2) If the facility is an ASC: An ASC is a distinct entity and must be separate and distinguishable from any other health care facility or office-based physician practice. Medicare-certified ASCs are subject to specific requirements related to sharing spaces with another health care facility or office-based physician practice. An ASC that is Medicare-certified must be distinct from any other health care facility or office-based physician practice as required in 42 CFR 416.2 and 42 CFR 416.44(a)(2) and (b).

2.7 Specific Requirements for Outpatient Surgery Facilities

2.7-3.1.1.5 Areas in the outpatient surgery facility

(1)a. *Unrestricted area:* Any area of the surgery facility that is not defined as semi-restricted or restricted. These areas ~~may~~ shall include a central control point for designated personnel to monitor the entrance of patients, personnel, and materials into the semi-restricted areas; staff changing areas; a staff lounge; offices; waiting rooms or areas; pre- and postoperative patient care areas; and access to procedure rooms (e.g., endoscopy procedure rooms, laser treatment rooms). Street clothes are permitted in these areas. Public access to unrestricted areas may be limited based on the facility's policy and procedures.

(2)b. *Semi-restricted area:* Peripheral areas that support surgical services. These areas ~~may~~ shall include storage for equipment and clean and sterile supplies; work areas for processing instruments; sterile processing facilities (if on-site sterile processing is provided); hand scrub stations; corridors leading from the unrestricted area to the restricted area; and entrances to staff changing areas, pre- and postoperative patient care areas, and sterile processing facilities. The semi-restricted area is entered directly from the unrestricted area past a nurse station or from other areas. Semi-

~~A.2.7-3.1.1.4 Areas in the outpatient surgery facility~~

~~a. *Unrestricted area:* Any area of the surgery facility that is not defined as semi-restricted or restricted. These areas may include a central control point for designated personnel to monitor the entrance of patients, personnel, and materials into the semi-restricted areas; a staff lounge; offices; waiting rooms or areas; pre- and postoperative patient care areas; and access to procedure rooms (e.g., endoscopy procedure rooms, laser treatment rooms). Street clothes are permitted in these areas. Public access to unrestricted areas may be limited based on the facility's policy and procedures.~~

~~b. *Semi-restricted area:* Peripheral areas that support surgical services. These areas may include storage for equipment and clean and sterile supplies; work areas for processing instruments; sterile processing facilities; hand scrub stations; corridors leading from the unrestricted area to the restricted area; and entrances to staff changing areas, pre- and postoperative patient care areas, and sterile processing facilities. The semi-restricted area is entered directly from the unrestricted area past a nurse station or from other areas. Semi-restricted areas have specific HVAC~~

~~restricted areas have specific HVAC design requirements associated with the intended use of the space (see Part 3: ANSI/ASHRAE/ASHE 170: *Ventilation of Health Care Facilities*). Personnel in the semi-restricted area ~~should~~ shall wear surgical attire and cover all head and facial hair. Access to the semi-restricted area ~~should~~ shall be limited to authorized personnel and patients accompanied by authorized personnel.~~

~~(3)e. *Restricted area:* A designated space contained within the semi-restricted area and accessible only through a semi-restricted area. The restricted area includes operating and other rooms in which operative or other invasive procedures are performed. Restricted areas have specific HVAC design requirements associated with the intended use of the space (see ANSI/ASHRAE/ASHE 170: *Ventilation of Health Care Facilities*). Personnel in the restricted area ~~should~~ shall wear surgical attire and cover head and facial hair. Masks ~~should~~ shall be worn when the wearer is in the presence of open sterile supplies or of persons who are completing or have completed a surgical hand scrub. Only authorized personnel and patients accompanied by authorized personnel ~~should~~ shall be admitted to this area.~~

~~design requirements associated with the intended use of the space (see part 3: ANSI/ASHRAE/ASHE 170: *Ventilation of Health Care Facilities*). Personnel in the semi-restricted area ~~should~~ wear surgical attire and cover all head and facial hair. Access to the semi-restricted area ~~should~~ be limited to authorized personnel and patients accompanied by authorized personnel.~~

~~e. *Restricted areas:* A designated space contained within the semi-restricted area and accessible only through a semi-restricted area. The restricted area includes operating and other rooms in which operative or other invasive procedures are performed. Restricted areas have specific HVAC design requirements associated with the intended use of the space (see ANSI/ASHRAE/ASHE 170: *Ventilation of Health Care Facilities*). Personnel in the restricted area ~~should~~ wear surgical attire and cover head and facial hair. Masks ~~should~~ be worn when the wearer is in the presence of open sterile supplies or of persons who are completing or have completed a surgical hand scrub. Only authorized personnel and patients accompanied by authorized personnel ~~should~~ be admitted to this area.~~

2.8 Specific Requirements for Freestanding Emergency Care Facilities

Chapter 2.8: Specific requirements for Freestanding Emergency Care

Chapter 2.8 are deleted in entirety.

2.9 Specific Requirements for Endoscopy Facilities

2.9-3.10.3.2 Provisions shall be made for securing patients' personal effects. **Individual, lockable storage shall be provided.**

2.10 Specific Requirements for Renal Dialysis Centers

2.10-1.1.4 Fire suppression sprinkler systems are required in Medicare certified dialysis facilities housed in multi-story buildings construction Types II(000), III(200), or V(000), as defined in the 2012 edition of NFPA 101 Life Safety Code, Table 21.1.6.1, and those housed in high-rise buildings over 75 feet in height.

2.10-3.1 Examination Room

Where an exam room is provided, it shall meet the requirements in Section [2.1-3.2.12](#) (Single patient Examination/observation room).

2.10-3.2.1.4 Emergency Equipment

Emergency cart and equipment storage shall be located close to the patient treatment area, readily accessible by staff, and not located in an exit path. Emergency Equipment shall also comply with 2.1-3.8.13.4 (Emergency equipment storage).

2.10-3.2.1.5 Emergency transport of patient

Corridors, doorways, and stairways serving the unit shall be sized to allow at least one exit route for emergency medical personnel to transport a patient by stretcher to an ambulance. The identified corridor(s) shall be 44" minimum clear and any doors within the identified route shall have a minimum 42" door leaf width.

2.10-3.2.1.6 Patient Scale

Provide dedicated space for a patient scale.

2.10 Specific Requirements for Renal Dialysis Centers

2.10-3.2.4 Patient Privacy

Space shall be available to accommodate provisions for patient privacy **including when patients are examined or treated and body exposure is required. Privacy must be provided for the use of a bedpan or commode during dialysis, initiating and discontinuing treatment when the vascular access is placed in an intimate area, for physical exams, and for sensitive communications.** There should be sufficient numbers of privacy screens or other methods of visual separation available and used to afford patients full visual privacy when indicated.

2.10-3.2.5.1 Hand-washing stations shall be provided in accordance with Section [2.1-3.8.7](#) (Hand-Washing Station).

(1) Hand washing stations shall be trimmed with fittings that are operable without use of the hands. Note: wrist blade controls are not considered to be operable without the use of the hands.

(2) Exception: Home training room hand-wash stations may be trimmed with residential style controls.

2.10-3.2.6 Body Fluid Disposal Sink

2.10-3.2.6.1 A fluid disposal sink shall be provided in each hemodialysis treatment area or room. Sink design including signage and location shall be constructed to prevent cross-contamination of the hand washing stations.

2.10-3.3.2.3 Separate drain sink with identifying signage that it is for fluid disposal

2.10-3.3.2.4 Emergency nurse call

*2.10-3.4.1 Airborne Infection Isolation (AII) Room

~~Where patients who are hepatitis B surface antigen positive will be dialyzed at the facility or an~~ **If the ICRA calls for an airborne infection isolation (AII) room, an AII room shall be provided.**

A2.10-3.4.1

~~The AII room can be used for non-HBV-infected patients, assuming the facility does not have any HBsAg positive patients on their current census and the room equipment have been terminally cleaned and disinfected. Supporting language can be found in the *Code of Federal Regulations* at 42 CFR 494.30(a).~~

2.10-3.4.1.3 The AII room shall allow for direct observation of the patient by staff during treatment. **Direct observation must include patient face and insertion point.**

2.10-3.4.2 Isolation Room

2.10-3.4.2.1 An isolation room shall be provided for Hepatitis B positive (HBV+) patients to prevent contact transmission of HBV+ blood spills and other body fluids. The Isolation Room shall meet the following requirements:

(1) Provides a door and walls that go to the floor, but not necessarily the ceiling, and allows for visual monitoring of the patient;

(2) Accommodates only one patient;

(3) A hand washing station; and

(4) A separate sink shall be provided within the Isolation Room for fluid disposal. Sink design including signage and location shall be constructed to prevent cross-contamination of the hand washing stations.

2.10-3.4.2.2 The isolation room shall have a minimum clear floor area of 120 square feet.

2.10-3.4.2.3 The isolation room shall allow for direct observation of the patient by staff from a patient care staff station. **Direct observation must include patient face and insertion point.**

2.10-3.8.2.2 The nurse station(s) shall be **no higher than 3 feet 8 inches**, designed to provide direct visual observation of all dialysis patient care stations. **Direct observation must include patient face and insertion point.**

2.10 Specific Requirements for Renal Dialysis Centers

2.10-6.3.1-2.10-6.3.2 Reserved

2.10-6.3.2 Interview Space

See Section [2.1-6.3.2](#) (Interview space) for requirements.

2.10-7 Architectural Details, Surfaces, and Furnishings

~~Surface materials shall be selected based on the infection control risk assessment. See Section 2.1-7 (Architectural Details, Surfaces, and furnishings) for requirements.~~

2.10-5.2 Waste Management

See Section [2.1-5.2](#) (Waste Management) for requirements.

~~(1a)~~ **Hand washing station or hand sanitizer shall be provided within or adjacent to biohazardous waste storage area.**

2.10-8.3.1 General

For electrical system requirements, see Section [2.1-8.3](#) (Electrical Systems) and additional requirements in this section.

2.10-8.3.2 Reserved

2.10 Specific Requirements for Renal Dialysis Centers

2.10-8.3.3 Emergency Electrical Power

(1) Provisions shall be made to allow connection to an alternate power source. The point of connection shall be immediately accessible to the exterior. The alternate power source shall provide on-going power for the lighting and continued provision of dialysis services.

(2) Power may be provided by an on-site generator or by means of a hitching post for connection to a portable generator provided under contract by others. Hitching post, if provided, must be located to allow connection without the need to leave a door or doors open during use.

2.10-8.3.4 – 2.10-8.3.5 Reserved

2.10-8.3.6 Electrical Receptacles

One of the eight required receptacles shall be a dedicated GFI circuit on emergency power for the dialysis machine. Hospital grade electrical outlets shall be provided for all dialysis equipment connections.

2.11 Specific Requirements for Outpatient Psychiatric Centers

~~Chapter 2.11 Specific Requirements for Outpatient Psychiatric Centers~~

Chapter 2.11 is deleted in entirety.

2.11 Specific Requirements for Outpatient rehabilitation Therapy Facilities

2.12-1.2.1.2 All-Support areas ~~shall~~ may permitted to be shared **in accordance with state and federal regulations.**

2.11 Specific Requirements for Outpatient rehabilitation Therapy Facilities

2.13-1.3.7.4 Applicable local and state requirements
All imaging facilities and radiation producing equipment installations must comply with OAR Chapter 333, divisions 100 through 123, and be licensed by the Oregon Health Authority, Radiation Protection Services program.