

3.9 Gastrointestinal Endoscopy Facilities

Appendix material, which appears in shaded boxes at the bottom of the page, is advisory only.

1 General Considerations

1.1 Applicability

All standards set forth in Section 3.1-7 shall be met for new construction of endoscopy suites, with modifications described in this chapter.

1.2 Functional Program

1.2.1 Facility Requirements

Endoscopy is performed without anticipation of overnight patient care. The functional program shall describe in detail staffing, patient types, hours of operation, function and space relationships, transfer provisions, and availability of off-site services.

1.2.2 Size

The extent (number and types) of the diagnostic, clinical, and administrative facilities to be provided shall be determined by the services contemplated and the estimated patient load as described in the functional program. Provisions shall be made for patient examination, interview, preparation, testing, and obtaining vital signs of patients for endoscopic procedures.

*1.3 Environment of Care

1.4 Shared Services

If the endoscopy suite is part of an acute care hospital or other medical facility, services may be shared to minimize duplication as appropriate.

1.4.1 Where endoscopy services are provided within the same area or suite as surgical services, additional space shall be provided as needed.

1.4.2 If inpatient and outpatient procedures are performed in the same room(s), the functional program shall describe in detail scheduling and techniques used to separate inpatients and outpatients.

1.5 Facility Layout and Circulation

1.5.1 Layout

The endoscopy suite may be divided into three major functional areas: the procedure room(s), instrument processing room(s), and patient holding/preparation and recovery room or area.

1.5.2 Circulation and Restricted Access

The endoscopy suite shall be designed to facilitate movement of patients and personnel into, through, and out of defined areas within the procedure suite. Signs shall be provided at all entrances to restricted areas and shall clearly indicate the proper attire required.

1.6 Site

1.6.1 Parking

Four spaces shall be provided for each room routinely used for endoscopy procedures plus one space for each staff member. Additional parking spaces shall be provided convenient to the entrance for pickup of patients after recovery.

2 Diagnostic and Treatment Locations

2.1 Diagnostic Facilities

Facilities for diagnostic services shall be provided on- or off-site for pre-admission tests as required by the functional program.

2.2 Examination Room(s)

If patients will be admitted without recent and thorough examination, at least one room shall be provided for examination and testing of patients prior to their procedures, ensuring both visual and acoustical privacy. This may be an examination room or treatment room as described in Sections 3.1-2.1.1 and 3.1-2.1.3.

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A1.3 Visual and acoustical privacy should be provided by design and include the registration, preparation, examination, treatment, and recovery areas.

2.3 Procedure Suite

Note: When procedures are to be performed on persons who are known to have or suspected of having airborne infectious diseases, these procedures shall be performed only in a room meeting airborne infection isolation ventilation requirements or in a space using local exhaust ventilation. See also the CDC “Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Facilities.”

2.3.1 Procedure Room(s)

2.3.1.1 Space requirements

- (1) Area. Each procedure room shall have a minimum clear floor area of 200 square feet (15 square meters), excluding vestibule, toilet, closet, fixed cabinets, and built-in shelves.
- (2) Clearances. Room arrangement shall permit a minimum clearance of 3 feet, 6 inches (1.07 meters) at each side, head, and foot of the stretcher/table.

2.3.1.2 Privacy. Procedure rooms shall be designed for visual and acoustical privacy for the patient.

2.3.1.3 Medical gases. Station outlets for oxygen and vacuum (suction) shall be available in the procedure room. See Table 3.1-2.

2.3.1.4 Hand-washing station. A separate dedicated hand-washing station with hands-free controls shall be available in the suite.

2.3.1.5 Patient toilet room. Direct access may be provided to a patient toilet room. (See also Section 3.9-2.3.3.3.)

2.3.1.6 Communication system. A system for emergency communication shall be provided.

2.3.1.7 Floors. Floor covering in the procedure suite shall be monolithic and joint free.

2.3.2 Patient Holding/Prep/Recovery Area

2.3.2.1 General

- (1) This area shall meet the size requirements of a stepdown recovery area, Section 3.7-2.4.2.1.

- (2) The following shall be provided in this area:

2.3.2.2 Patient positions

- (1) Area and dimensions. A minimum clear floor area of 80 square feet (7.43 square meters) shall be provided for each patient station with a space for additional equipment described in the functional program and for clearance of at least 5 feet (1.52 meters) between patient stretchers and 4 feet (1.22 meters) between patient stretchers and adjacent walls (at the stretcher’s sides and foot).
- (2) Patient privacy. Provisions for patient privacy such as cubicle curtains shall be provided.
- (3) Medical gases. Oxygen and suction per Table 3.1-2 shall be provided for each patient cubicle.

2.3.3 Support Areas for the Procedure Suite

2.3.3.1 Nurse station. Nurse control and charting area that provides view of patient positions shall be provided.

2.3.3.2 Medication station. Provisions shall be made for storage and preparation of medications administered to patients.

- (1) A refrigerator for pharmaceuticals and double-locked storage for controlled substances shall be provided.
- (2) Convenient access to hand-washing stations shall be provided.

2.3.3.3 Toilet facilities. These shall be permitted to be accessible from patient holding or directly from procedure room(s) or both.

2.3.3.4 Clean utility space. A clean utility room or area shall be provided.

2.3.3.5 Equipment storage. The following shall be provided:

- (1) Stretcher storage area(s). Such areas shall be convenient for use and out of the direct line of traffic.
- (2) Wheelchair storage. Space for temporary storage of wheelchairs shall be provided.

2.3.3.6 Housekeeping closet. A janitor/housekeeping closet shall be provided.

2.4 Support Areas for Staff

2.4.1 Staff Clothing Change Areas

Appropriate change areas shall be provided for staff working within the procedure suite. These shall include the following:

2.4.1.1 Hand-washing stations

2.4.1.2 Toilets

2.4.1.3 Lockers and space for changing clothes

2.4.1.4 Staff shower. At least one shower shall be conveniently accessible to the procedure suite and patient holding/prep/recovery areas.

2.4.2 Lounge and Toilet Facilities

These shall be provided in facilities having three or more procedure rooms.

2.5 Support Areas for Patients

2.5.1 Patient Change Areas

A separate area shall be provided for patients to change from street clothing into hospital gowns and to prepare for procedures.

2.5.1.1 This area shall include lockers, toilet(s), clothing change or gowning area(s), and space for administering medications.

2.5.1.2 Provisions shall be made for securing patients' personal effects.

3 Service Areas

3.1 Clean Storage and Soiled Holding Areas

3.1.1 General

3.1.1.1 Adequate space shall be provided for the storage and holding of clean and soiled materials.

3.1.1.2 Such areas shall be separated from unrelated activities and controlled to prohibit public contact.

3.1.2 Clean/Sterile Supplies

Storage for packs, etc., shall include provisions for ventilation, humidity, and temperature control.

3.1.3 Soiled Holding/Workroom

3.1.3.1 This room shall be physically separated from all other areas of the department.

3.1.3.2 The soiled workroom shall contain work surface(s), sink(s), flush-type device(s), and holding areas for trash, linen, and other contaminated waste.

3.2 Instrument Processing Room(s)

3.2.1 Processing Rooms

Dedicated processing room(s) for cleaning and decontaminating instruments shall be provided.

3.2.1.1 Number. Processing room(s) shall be permitted to serve multiple procedure rooms.

3.2.1.2 Size. The size of the processing room(s) shall be dictated by the amount of equipment to be processed.

3.2.1.3 Layout. The cleaning area shall allow for flow of instruments from the contaminated area to the clean assembly area and then to storage. A physical barrier shall be provided to prevent droplet contamination on the clean side. Clean equipment rooms, including storage, should protect the clean equipment from contamination.

3.2.2 Decontamination Area

The decontamination area shall be equipped with the following:

*3.2.2.1 Utility sink(s). Sink(s) shall be provided as appropriate to the method of decontamination used.

3.2.2.2 Hand-washing station. One freestanding hand-washing station shall be provided.

3.2.2.3 Work counter space(s).

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A3.2.2.1 This may require soaking sink(s), rinse sink(s), automated cleaning device(s), or a combination.

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3.2.2.4 Equipment accommodations. Space and utility connections for automatic endoscope reprocessor, sonic cleaner, and sterilizers (where required by the functional program).

3.2.2.5 Ventilation system. See Table 2.1-2.

3.2.2.6 Medical gases. Provision for vacuum and/or compressed air, as appropriate to cleaning methods used.

3.2.2.7 Floors. Floor covering, monolithic and joint free with 6-inch (15.24-centimeter) integral cove base.

3.3 Equipment and Supply Storage

3.3.1 Equipment and Supplies for Endoscopy Procedures

Storage room(s) for equipment and supplies used in the procedure suite shall be provided.

3.3.2 Anesthesia Equipment and Supply Storage

Provisions shall be made for cleaning, testing, and storing anesthesia equipment and supplies.

3.3.3 Medical Gas Storage

Provisions shall be made for the medical gas(es) used in the facility. Adequate space for supply and storage, including space for reserve cylinders, shall be provided.

3.3.4 Resuscitation Equipment and Supply Storage

Provisions for convenient access to and use of emergency resuscitation equipment and supplies (crash cart(s) and/or anesthesia carts) shall be provided at both procedure and recovery areas.

3.4 Fluid Waste Disposal Facilities

Fluid waste disposal facilities shall be provided.

3.4.1 Location

These shall be convenient to the procedure rooms and recovery positions.

3.4.1.1 In the procedure area, a clinical sink or equivalent equipment in a soiled workroom shall meet this requirement.

3.4.1.2 In the recovery area, a toilet equipped with bedpan-cleaning device or a separate clinical sink shall meet this requirement.

3.5 Housekeeping Room

Space containing a floor receptor or service sink and storage space for housekeeping supplies and equipment shall be provided.

4 Administrative and Public Areas

4.1 Public Areas

4.1.1 Entrance

A covered entrance for pickup of patients after procedure shall be provided.

4.1.1.1 A roof overhang or canopy shall extend, at a minimum, to the face of the driveway or curb of the passenger access door of the transport vehicle.

4.1.1.2 Vehicles in the loading area shall not block or restrict movement of other vehicles in the drive or parking areas immediately adjacent to the facility.

4.2 Administrative Areas

4.2.1 Interview Space

Space(s) for private interviews relating to admission shall be provided. This may be the same room required under Section 3.9-4.2.4 (Multipurpose Rooms).

4.2.2 Offices

General and individual office(s) shall be provided for business transactions, records, and administrative and professional staff.

4.2.2.1 Provisions for confidentiality of records shall be made.

4.2.2.2 Enclosed office spaces shall be provided, consistent with need identified in the functional program.

4.2.3 Medical Records Area

A medical records area where medical documents can be secured shall be provided.

4.2.4 Multipurpose Rooms

Multipurpose or consultation room(s) shall be provided.

4.2.5 General Storage

General storage facilities shall be provided.

5 Construction Standards

5.1 Design and Construction, including Fire-Resistant Standards

5.1.1 The separate endoscopy facility or section shall comply with the “New Ambulatory Health Care Occupancies” section of NFPA 101 and requirements described herein.

5.1.2 Flammable anesthetics shall not be used in out-patient endoscopy facilities.

5.2 General Standards for Details and Finishes

All details and finishes shall meet the standards in Section 3.1-5.2 except as modified below.

5.2.1 Details

5.2.1.1 Corridor width

- (1) Minimum public corridor width shall be 5 feet (1.52 meters), except that corridors where patients are transported on stretchers or beds shall be 8 feet (2.44 meters) wide.
- (2) Passages and corridors used exclusively for staff access may be 3 feet 8 inches (1.12 meters) in clear width.

5.2.1.2 Doors

- (1) Door width
 - (a) Doors serving occupiable spaces shall have a minimum nominal width of 3 feet (91.44 centimeters).
 - (b) Doors requiring gurney/stretchers access shall have a nominal width of 3 feet 8 inches (1.12 meters).
- (2) Toilet room doors
 - (a) Toilet rooms in procedure and recovery areas for patient use shall be equipped with doors and hardware that permit access from the outside in emergencies.

- (b) When such rooms have only one opening or are small, the doors shall open outward or be otherwise designed to open without pressing against a patient who may have collapsed within the room.

5.2.2 Finishes

5.2.2.1 Floors. Floor finishes shall be appropriate for the areas in which they are located and shall be as follows:

- (1) Floor finishes shall be cleanable.
- (2) Floor finishes in areas such as clean corridors and patient care areas shall be washable, smooth, and capable of withstanding chemical cleaning.
- (3) Floor finishes in areas such as procedure rooms and the decontamination room shall be scrubbable, capable of withstanding chemical cleaning, and monolithic with an integral base.

5.2.2.2 Walls. Wall finishes shall be appropriate for the areas in which they are located and shall be as follows:

- (1) Wall finishes shall be cleanable.
- (2) Wall finishes in areas such as clean corridors, central sterile supply spaces, specialized radiographic rooms, and endoscopic procedure rooms shall be washable, smooth, and capable of withstanding chemical cleaning.
- (3) Wall finishes in areas such as procedure rooms shall be scrubbable, capable of withstanding chemical cleaning, and monolithic.

5.2.2.3 Ceilings. Ceiling finishes shall be appropriate for the areas in which they are located and shall be as follows:

- (1) Ceiling finishes in general areas are optional and may be omitted in mechanical and electrical rooms/spaces unless required for fire-resistive purposes.
- (2) Ceiling finishes in procedure rooms, the decontamination room, and other semirestricted areas shall be capable of withstanding cleaning with chemicals and without crevices that can harbor

mold and bacteria growth. If a lay-in ceiling is provided, it shall be gasketed or clipped down to prevent the passage of particles from the cavity above the ceiling plane into the semirestricted environment. Perforated, tegular, serrated, cut, or highly textured tiles shall not be used.

6 Building Systems

6.1 Plumbing

See Section 3.1-7.1.

6.2 Heating, Ventilating, and Air-Conditioning Systems

Heating, ventilation, and air conditioning shall be as described for similar areas in Section 3.1-7.2 and Table 2.1-2, except that the recovery lounge need not be considered a sensitive area.

6.3 Electrical Systems

See Section 3.1-7.3.

6.4 Electronic Safety and Security

6.4.1 Fire Alarm System

A manually operated, electrically supervised fire alarm system shall be installed in each facility as described in NFPA 101.