**MEDICAL CENTER PROJECT MANUAL**

**for GENERAL CONTRACTOR CONTRACTS**

Amend Article 10.3 of the Special Conditions to read:

10.3 With the express purpose of expediting construction and providing the opportunity for cooperation of affected parties, progress meetings will be held and attended by representatives of:

(1) The Owner's Project Manager

(2) The Consultant.

(3) General Contractor.

(4) Sub-contractors.

(5) Others requested to attend (as deemed necessary by CPMD).

(6) Hospital Representative

(7) Medical Center Physical Plant Representative

Amend Article 24.2.1.2 of the Special Conditions to read:

24.2.1.2 SECTION OF A BUILDING OUTAGE

The Owner's Project Manager is the General Contractor’s contact with the University for requesting Utility Outages. The Owner's Project Manager will work with PPDMC as outlined below to facilitate the outage. The established standard within the University Departments and Divisions of a section of a building shall be a written request prior to outage in the time frames noted below. The written request shall include the type of utility to be interrupted, when the outage is desired, reason for outage, length of outage, and what will be affected by the outage.

24.2.1.2.a. All outages require a two-week minimum notice. Giving such notice does not guarantee the outage will occur on the date requested. (HVAC, RO Water, Security, Pneumatic)

24.2.1.2.b. PPDMC has an Outage Coordinator who will research and record all the pertinent information necessary to schedule the outage. PPD employees, departments, operations, etc. will be notified by the Outage Coordinator about the pending outage.

24.2.1.2.c. The Outage Coordinator will document the work necessary to schedule, noting any difficulties that cannot be solved.

24.2.1.2.d. The Outage Coordinator will schedule the outage and notify contractor. If outage cannot be scheduled, they will notify appropriate parties.

24.2.1.2.e. The Outage Coordinator will make all notifications to affected personnel and will alert the proper staff so necessary preparations can be made within the affected areas.

24.2.1.2.f .When work has been completed, the Outage Coordinator, or his designate, will notify affected personnel that the system is back in service.

24.2.1.2.g . Contractors DO NOT have the authority to turn utilities off or on. This should only be done by the PPDMC Outage Coordinator.

Amend Article 33 of the Special Conditions to read:

**ARTICLE 33 EMERGENCY VEHICLE AND FIRE TRUCK ACCESS**

33.1 Access to the Medical Center Loading Dock must be maintained during construction for local fire truck access to the fire alarm annunciator panels located adjacent to the loading dock. General Contractor shall coordinate with the local fire department that would respond to an alarm during the initial startup of construction to ensure a complete understanding of their requirements.

**The following Articles are in addition to, and take precedence over the provisions of the Special conditions for the Project.**

**ARTICLE 46 LOADING DOCK**

46.1 All demolition materials will be brought through the loading dock to the dumpster.

46.2 All new material and equipment, except for items requiring use of the front entry, shall be delivered to the main loading dock.

46.3 The loading dock shall be the primary access for construction workers. Construction workers shall use stairway near the designated elevator.

**ARTICLE 47 CONSTRUCTION PATH**

47.1 Elevator No. \_\_\_ **(INSERT NO.)**, as indicated in Drawings, may be used by construction workers and material access EXCEPT during the hours of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(INSERT TIME).**

47.2 All materials and equipment are to be brought into the hospital through elevator no. \_\_\_ **(INSERT NO.),** except for large equipment and casework. General Contractor shall identify time and schedule to allow accessing such items through \_\_\_\_\_\_\_\_ **(INSERT)**, and shall coordinate same with the Owner's Project Manager.

**ARTICLE 48 HOSPITAL PROJECT PROCEDURE:**

48.1 This Project involves part of a fully functioning Hospital and teaching facility. During the construction of the new Work and all renovation, the Hospital is to remain fully functioning. No service offered by the Hospital will be allowed to be interrupted. This will require careful scheduling and consultation with the Owner and the Consultant. The Hospital will attempt to cooperate as much as possible but their need to provide full medical care will supersede any construction aspect.

48.2 The General Contractor shall organize his Work so that the Work shall cause a minimum of interference and disturbance to the Owner. A major portion of the Work will occur over an occupied**----TYPE OF SPACE--**-. The remaining work is above the **--TYPE OF SPACE-----**-. This will require anticipation and careful scheduling of any noisy work above the area, or access through the area.

48.3 Coordination shall occur between the General Contractor and the Owner regarding access to areas outside of the immediate designated construction areas, including access to room’s adjacent horizontal, or vertical that the General Contractor may need to access in order to run/connect utilities. Coordination for access shall be discussed in the monthly Progress Meetings as required by Article 10 of these Special Conditions. General Contractor shall also provide to the Owner written notice, one week prior to the anticipated need for access. Approval for access to the adjacent areas must be received by the General Contractor, prior to final scheduling of the Work. Failure to notify the Owner of the need for access will result in the stoppage of Work in the area for which access is required until approval is obtained. Any additional cost for such stoppage will be the General Contractor's responsibility.

48.4 No live electrical wiring, including temporary lighting, may be left exposed in areas of public or staff access.

48.5 In no instance may a corridor be blocked or its clear width reduced to less than 4'0".

48.6 "NOISY WORK": Areas to receive noisy Work above **--indicate areas of the facility--**-. The General Contractor shall utilize tools or equipment of low velocity or drilling to limit the noise generated from Work which will be disruptive to patients. Any hammer drilling and impact type tools/equipment which are to be utilized in the Work by the General Contractor shall be strictly limited. Falling materials that damage ceilings, walls, pipes, and equipment shall become the General Contractor's responsibility to repair and/or replace at no cost to the Owner.

48.7 The General Contractor is hereby advised that any noisy Work which is disruptive will be required to stop upon notice from Owner's Project Manager. General Contractor will be notified by Owner's Project Manager when noisy Work can resume. General Contractor shall notify Owner's Project Manager 48 hours prior to the start of any noisy Work.

* Noisy work shall be performed after 6:00 p.m. and before 7:00 a.m.
* Perimeter wall construction around the Work Area shall be erected after 6:00 p.m. and before 7:00 a.m.
* All bulky materials shall be delivered after 6:00 p.m. and before 7:00 a.m.

**ARTICLE 49 WORKING HOURS/ACCESS: FOR MEDICAL CENTER/HOSPITAL**

49.1 Normal Work hours are defined as a period between 7:00 a.m. to 5:00 p.m., Monday through Friday. General Contractor shall notify Owner's Project Manager one working day prior to performance of any Work for permission to do any Work during non-normal Work hours.

**ARTICLE 50 SECURITY BADGES AND MEDICAL CENTER SECURITY**

50.1 Security badges will be required for all construction personnel at General Contractor's cost of $15.00 (Confirm Price of Badges) each from Hospital Security located in Pavilion A room A.00.807. Badges for Good Samaritan can be obtained in the Human Resources Office at the Good Samaritan Hospital, Room B102, for vendors working at Good Samaritan Hospital. Each badge will contain a picture, name and firm name. A UKHC identification badge must be worn on the upper torso at all times when working on UKHC property. No pins or labels shall be attached.

If you report to work without your badge, you must proceed to the Security Office in Pavilion A room A.00.807 or Good Samaritan Human Resources Office B102 to purchase a temporary badge. If your badge is lost or stolen, report it to Security, 859-323-6946, immediately. The contractor or employee must pay for all badges. Cash or check only is accepted for payment. New badges are $15.00 and must be renewed annually with $15.00 annual renewal fee.

50.2 The General Contractors and subcontractors are responsible for the security of their own materials, tools, and equipment on the project site. The Owner is not responsible for theft or vandalism to any such materials, tools, or equipment. The General Contractor shall coordinate with Medical Center Security prior to entering spaces other than Construction Limits.

50.3 The General Contractor shall assist in providing workers schedule to Medical Center Security personnel when it is evident his workmen will have access to unsecured areas within the building after normal work hours.

50.4 The General Contractor shall secure the Project Limits for safety of building users working in adjacent spaces. **NO DOOR at any time should be held or propped open for any reason.**  All contractors should receive keys or badge access via their UK Project manager.

50.5 Any General Contractor having a field office or job trailer shall provide a key to the Owner's Project Manager, only to be used in the case of fire or security emergency.

50.6 The Owner will provide construction cores for keying during the life of the project and permanent cores at conclusion of construction. Hardware supplier to coordinate with University Key Shop.

50.7 Security Enclosure and Lockup: Install substantial temporary enclosure around partially completed areas of construction. Provide lockable entrances to prevent unauthorized entrance, vandalism, theft, and similar violations of security.

50.8 Maintain security by limiting number of keys and restricting distribution to authorized personnel. Provide Owner with one set of keys**.**

**ARTICLE 51 – HOSPITAL CONSTRUCTION CERTIFICATION**

51.1 This Project involves working in a fully functioning Hospital. Individuals responsible for the work occurring on the site should be thoroughly familiar with the hazards and procedures associated with construction in the healthcare environment.

51.2 All superintendents and foremen for the General Contractor and the Mechanical and Electrical sub-contractors shall be required to hold at least one (1) of the certifications listed below from the associated organizations prior to working in the UK Albert B. Chandler Hospital or UK Good Samaritan Hospital. Any other trade contractor with more than four (4) individuals working on the site at one (1) time shall have one individual who holds at least one of the certifications listed below from the associated organizations prior to working in the UK Albert B. Chandler Hospital or UK Good Samaritan Hospital.

Healthcare Construction Certificate - American Society for Healthcare Engineers

Certified Healthcare Contractor – Kentucky Society of Healthcare Engineers

51.3 Should the required certifications not be in effect at the date of the work order, the University project manager may, at his or her discretion, grant a grace period for the required training.

**The Form of Proposal should include the following:  FP-10 - Please provide a copy of a valid Healthcare certification for the listed Superintendent.**

**ARTICLE 52 – APPEARANCE**

52.1 All contracted vendors performing work for The University of Kentucky HealthCare facilities must dress in a professional manner. A company uniform is preferred; however, if one is not provided, dress shall include work pants and a work shirt. All hats must either have the company logo or be a solid color with no logo. Casual sportswear such as blue jeans, shorts, sweat suits, t-shirts, or tank tops are not approved apparel. Clothing must be clean, and without rips or tears. The attire is intended to portray the image of well groomed, professional individuals.

Failure to comply can lead to the vendor being asked to leave the premises until the issues have been resolved.

**ARTICLE 53 - HIPAA (The Health Insurance Portability and Accountably Act)**

53.1 While working on the University of Kentucky Medical Center you will encounter patients or research and must follow the HIPPA guidelines. We must protect the well-being of patients, families and visitors as well as any and all research projects that are vital to the University. You shall respect the privacy of our patients, their families and any research that you may encounter while on campus.

For a complete understanding of the HIPAA Rules & Regulations please visit:

<http://www.cdc.gov/mmwr/preview/mmwrhtml/m2e411a1.htm>

**ARTICLE 54 – SAFETY & FIRE PROCEDURES**

54.1 Paging Codes

The UK HealthCare facilities use specific codes to alert staff about hazards or potential hazards in the area, and to call designated staff to action. These codes are designed to communicate information to those that need it without unduly alarming patients and visitors. All persons working in the facility are to take the appropriate action should a code be announced. Designated staff members have assigned roles in response to these codes. You may be asked to stop work and secure your area in response to any of these codes.

A list of pertinent codes are outlined below:

• Code Black: Bomb/Bomb Threat

• Code Blue: Medical Emergency (adult or pediatric)

• Code Pink: Infant or Child abduction

• Code Red: Fire

• Code Silver: Active Shooter

• Code Yellow: Disaster plan activation (internal or external)

• Assistance please (location): Uncontrolled individual

54.2 Fire Procedures

54.2.a. Fire Notification

UK HealthCare has a fire prevention program to protect patients, visitors, and staff from the dangers of fire. As a part of your orientation to this facility, please locate the fire alarms, extinguishers, and evacuation routes within or adjacent to the project site.

If fire, smoke, or excessive heat is detected within the UK HealthCare facilities, the fire notification system is activated. You will hear chimes over the paging system, followed by “code red” and the location of the alarm. In addition, the alarm system is activated periodically for fire drills and system testing.

When an alarm is activated, smoke and fire doors throughout the building will close. Staff will close doors to patient rooms, clear corridors, and implement other response procedures.

In all UK HealthCare facility buildings with exception of the Hospitals you must evacuate immediately when the fire alarm sounds. In the Hospitals, you will be able to remain in the project site throughout the response. Please listen carefully to the overhead paging announcements for instructions that might affect you. If an order is given to evacuate, please secure the project site and exit the building.

54.2.b. Your Role in Fire Response

As a Contractor, you have a role in fire response.

If you discover a fire in your area:

**R**escue anyone in immediate danger, if possible.

**A**ctivate the nearest fire alarm and call 911.

**C**ontain, close doors that line the corridor.

**E**xtinguish, if possible, and evacuate, if necessary.

54.2.c. Building Life Safety Features

UK HealthCare facilities are constructed with many life safety features to protect building occupants from fire. You must know the location of the following:

Fire Alarms

Fire Extinguishers

Emergency Exits

Evacuation Routes

Medical Gas Valves for the area in which you are working. Contractors/vendors are NEVER to close medical gas valves

If any life safety system must be taken out of service, you must coordinate the outage with the PPD Project Manager and the PPD Outage Coordinator prior to beginning work. You must put in place a temporary but equivalent system approved by the Campus Fire Marshall.

The UK HealthCare Medical Facilities are composed of smoke and fire compartments designed to contain the hazard should a fire break out. If a rated fire, smoke, or corridor wall is penetrated, you must patch the wall using a UL listed firestop assembly the day that the penetration is made.

**ARTICLE 55 - Interim Life Safety Measures (ILSM)**

The University of Kentucky has established an Interim Life Safety Program (ILSM) to manage safety hazards that could be created by construction, renovation, internal disaster, or other alteration to UK HealthCare buildings or grounds.

A review will be done for every project and will be implemented when a life safety code deficiency or other hazard places building occupants at significant risk. When life safety systems are impaired, the Hospital Safety Officer, General Contractor, or designee, will use established criteria to evaluate the risk and to implement appropriate ILSM to compensate for these deficiencies.

When construction or renovation poses other significant safety hazards, the safety officer and contractor or designee will implement other safety measures appropriate to the situation.

Planning for Interim Life Safety Measures

The Hospital Environment of Care Committee has approved criteria to be used to help determine appropriate ISLM to implement when a life safety code deficiency is identified.

The Hospital Safety Officer, or designee, will participate in or review documentation from project development, pre-construction, and construction progress meetings to ensure that safety issues and concerns are identified and addressed proactively, whenever possible.

UK project manager will notify the Hospital Safety Officer prior to the start of any construction or renovation project and prior to the start of a new project phase. The Key project participants will identify safety issues, concerns, and methods of maintaining a safe work environment.

The Safety Officer and UK staff will regularly inspect all construction sites. The Safety

Surveillance Team will conduct regular building inspections to identify risks and hazards.

Criteria for Implementation of Interim Life Safety Measures (ILSM) at the University of Kentucky HealthCare Facilities.

In general, the Safety Officer or designee will use the criteria below to determine appropriate interim life safety measures. In all cases, additional measures may be taken, if warranted, to protect the building’s occupants.

When the integrity of an exit access, exit, or discharge area is altered or compromised:

* Ensure free and unobstructed exit
* Ensure escape route for construction workers
* Provide additional training for UK staff and signage when alternative exits are designated
* Increase debris removal schedule to reduce building’s flammable and combustible load to lowest feasible level
* Conduct at least two fire drills per shift per quarter
* When the integrity of a building’s defend-in-place compartments/features (fire barriers, smoke barriers, floor slabs, corridor wells) are significantly compromised
* Ensure that construction partitions are smoke-tight and built of noncombustible or limited combustible materials

When a building’s fire alarm, detection, and/or suppression systems are impaired:

* Implement temporary but equivalent, fire alarm, detection, or suppression systems
* Inspect and test temporary systems monthly
* Ensure that construction partitions are smoke tight and built of noncombustible or limited combustible materials
* Provide additional fire-fighting equipment & train staff to use

When temporary sources of ignition (cutting, welding, plumber’s torch) are involved:

* Initial contractor will provide hot work permit and follow its guidelines
* Ensure free and unobstructed exits
* Ensure fire alarm, detection, and suppression systems are in working order
* Provide additional fire-fighting equipment (a fire extinguisher every 50 feet) and train staff to use
* Decrease combustible load to lowest feasible level

When large quantities of combustibles or debris are present or involved:

* Increase debris removal schedule
* Provide additional fire-fighting equipment (a fire extinguisher every 50 feet) and train staff to use
* Ensure that construction partitions are smoke tight and built of noncombustible or limited combustible material

Infection Control

When an employee is working in any patient care area or on any patient care equipment, he/she must follow the standard precautions outlined below:

* Wear gloves when there is a possibility that you will touch any body substances or equipment contaminated by body substances (blood, urine, feces, wound drainage, oral secretions, sputum, and vomitus.)
* Wear a fluid resistant gown, masks and/or goggles when there is any possibility that your eyes, mucous membranes or clothing will be splashed or sprayed by body substances or exposure to contaminated equipment.
* During construction/renovation projects or in situations when plumbing is inadvertently interrupted, it is recommended that personnel wear appropriate personal protective equipment. Traffic must be restricted from this area.
* Discard all personal protective clothing in accordance with standard precautions.
* Wash hands thoroughly with antibacterial soap immediately following work.
* Eating, drinking and smoking are restricted to designated areas.

Infection Control Policy for construction at the University of Kentucky Healthcare

Facilities

It is the policy of the University of Kentucky HealthCare to prevent illness in patients related to construction dust and airborne fungi. This document spells out requirements that contractors with University of Kentucky Chandler and Good Samaritan Hospital and in-house workers should follow in order to minimize risks of construction to our patients.

Classification of Jobs:

Class I: These projects do not generate appreciable dust or airborne particulate matter. Examples include minor plumbing, electrical, carpentry and duct work; some aesthetic improvements; installation of phones, computers, gas and TV hook-up lines in existing conduits, etc.

Class II: These projects generate dust or other airborne particulate matter and hence require barrier precautions. Examples include construction of new walls; construction of new rooms; major utility changes; major equipment installation; demolition of wallboard; plaster, ceramic tile, ceiling and floor tile removal; removal of windows; removal of casework, etc. Routine maintenance where dust is produced in patient care areas is included. These projects must follow construction standards for the hospital.

Sequence of Events:

UK project manager will work with the Infection Control Department to determine if the project is Class I or Class II based on an ICRA (Infection Control Risk Assessment) evaluation completed by the Infection Control Department.

The project manager should invite a representative of Infection Control to the initial design meeting for the project (and other meetings as appropriate).

The ICRA will be posted on the job site and must be adhered to throughout the project unless otherwise determined by the Infection Control Representative.

Ventilation System

* All ventilation systems to operating rooms, recovery rooms, delivery rooms, newborn nurseries and special care units will have a HEPA filtered clean air supply. These systems will be maintained and serviced according to the established preventive maintenance programs to assure clean air supply.
* Patient rooms which house patients with air-borne infections (requiring negative pressure) will be inspected according to the preventive maintenance program to prevent the spread of potential air-borne pathogens.
* Personnel performing routine maintenance or repairing ventilation systems of negative pressure should wear a NIOSH approved respirator.
* Personnel entering rooms housing known or suspected TB patients are required to wear a properly fitted NIOSH approved respirator.

Aspergillums

Aspergillums are a microbial contaminant which can cause serious complications for patients who are susceptible or in a high risk category. Most nosocomial airborne mold infections are caused by aspergillums; species. This species is widely distributed in our natural environment and can grow on almost anything. When ceilings or walls are disturbed, or activity associated with normal renovations or maintenance, it results in airborne disbursements of particulate matter (dust), which may carry aspergillums spores and infect patients.

UK and its contractors will make every effort to minimize the release of aspergillums in high risk areas. Renovation in or adjacent to high risk areas will be controlled through proper separation and HEPA air flow filtering to reduce the potential dangers to patients. The method used to control dust control must be reviewed by and approved by the Infection Control Department. High risk areas are defined as follows:

Any area a patient with an immune compromised system will be put in additional harm’s way by your service or act of service.

No major construction shall occur in the Transplant Clinic without involvement of the Transplant Department Director. The area must be vacated of patients before any such work can occur.

Procedure:

* Before construction begins contact Infection Control at 859-323-4609.
* Proceed cautiously when removing or installing ceiling tiles in the high risk areas.
* On major construction/renovation, air tight partitions shall separate the renovation site from other space occupied by patients. The barrier shall be tested for tightness. Ventilation leading from the area being renovated should be blocked at its point of exit from the room.
* HEPA filtration of air will be required
* Whenever possible, create a negative air flow on the construction/renovation site.
* Keep the work area as clean and dust free as possible.
* Ensure that infection control measures are in effect.
* Use sticky mats outside of barrier.

Infection Control Oversight

* Infection Control must inspect work site before demolition/construction begins.
* Infection Control will make periodic visits to work site to ensure compliance ICRA standards.
* Contractors will receive information and education about Infection Control Standards at the preconstruction meeting

**The Form of Proposal should include the following:  FP-10 - Please provide a copy of a valid Healthcare certification for the listed Superintendent.**

**SEE THE FOLLOWING ATTACHMENTS A THROUGH C.**

**ARTICLE 8.7.3 Attachment A – Uniformat Component List**

|  |  |
| --- | --- |
|  |  |
| **SAP Object Type No.** | **Component Name** |
|  |  |
|  |  |
| D5030.0232 | Access Control Panel |
| D3050.0110 | Air Conditioning Comp Rm Unit |
| D3030.0610 | Air Conditioning Compressor |
| D3030.0620 | Air Conditioning Condensing Unit |
| D3050.0120 | Air Conditioning Pkg Rooftop Unit |
| D3050.0130 | Air Conditioning Pkg Terminal Unt |
| D3030.0630 | Air Conditioning Split System |
| D3050.0140 | Air Conditioning Unit Package |
| D3050.0150 | Air Conditioning Unit Window |
| D3050.0710 | Air Curtain / Heater |
| D2090.0120 | Air Dryer |
| D3010.0443 | Air Eliminator |
| D3040.0110 | Air Handling Unit |
| D5090.0220 | Auto Transfer Switch - Electrical |
|  | Automatic Door Operator |
| D2020.0330 | Backflow Preventers |
| D3020.0110 | Boiler, Steam System |
| D5030.0241 | Camera |
| D5030.0231 | Card Access System |
| D3030.0300 | Chiller, Reciprocate |
| E1090.0250 | Chutes & Collectors |
| D5010.0510 | Circuit Breaker Panel |
| F1020.0230 | Clean Rooms |
| F1020.0240 | Cold Storage Rooms |
| D2090.0110 | Compressor, Air |
| D3060.0250 | Controls, Building System |
| E1090.0317 | Cooler, Commercial |
| D3030.0510 | Cooling Tower, Packaged |
| D2010.1300 | Copper Silver Ion Equipment |
| D4090.0510 | Dampers Fire |
| D4090.0500 | Dampers Fire/Smoke |
| D4090.0520 | Dampers Smoke |
| D3050.0400 | Dehumidifiers |
| D2090.0200 | Deionized Water System |
| E1090.0391 | Dishwasher, Commercial |
| B2030.0160 | Door, Auto Entrance |
| B2030.0100 | Door, Exterior Entrance |
| C1020.0330 | Door, Fire Separate |
| C1020.0320 | Door, Smoke Partition |
| D2010.0800 | Drinking Fountain |
| D5010.0350 | Electric Switchboard |
| E1030.0310 | Elevator, Dock Leveler |
| D1090.0120 | Elevator, Dumbwaiter Electric |
| D1090.0130 | Elevator, Dumbwaiter Hydraulic |
| D1010.0140 | Elevator, Hydraulic Freight |
| D1010.0120 | Elevator, Hydraulic Passenger |
| D1010.0230 | Elevator, Platform Lift |
| D1010.0240 | Elevator, Sidewalk Lift |
| D1010.0130 | Elevator, Traction Freight |
| D1010.0110 | Elevator, Traction Passenger |
| D1010.0220 | Elevator, Wheelchair Lift |
| D2010.1100 | Emergency Eyewash |
| D2010.1000 | Emergency Eyewash/Shower |
| D5090.0810 | Emergency Generator |
| D2010.1200 | Emergency Shower |
| D3050.0600 | Energy Recovery Unit |
| F1020.0260 | Environmental Unit |
| D3040.0120 | Fan |
| D3050.0520 | Fan Coil Unit |
| D3040.0122 | Fan, Axial |
| D3040.0121 | Fan, Centrifugal |
| D3040.0410 | Fan, Exhaust |
| D5030.0141 | Fire Alarm Annunciator |
| D5030.0134 | Fire Alarm AV Devices |
| D5030.0139 | Fire Alarm Door Holder |
| D5030.0144 | Fire Alarm Duct Detector |
| D5030.0133 | Fire Alarm Heat Detectors |
| D5030.0136 | Fire Alarm Horns |
| D5030.0131 | Fire Alarm Panel |
| D5030.0135 | Fire Alarm Pull Station |
| D5030.0137 | Fire Alarm Signal Speaker |
| D5030.0132 | Fire Alarm Smoke Detectors |
| D5030.0130 | Fire Alarm System |
| D5030.0138 | Fire Alarm Visual Signal Dev |
| D4030.0200 | Fire Blanket & Cabinet |
| D4030.0100 | Fire Extinguisher Cabinet |
| D4030.0300 | Fire Extinguisher Wheeled |
| D4090.0300 | Fire Extinguishing System, Clean |
| D4090.0200 | Fire Extinguishing System, CO2 |
| D4090.0400 | Fire Extinguishing System, Dry Chemical |
| D4090.0100 | Fire Extinguishing System, Foam |
| D4090.0000 | Fire Extinguishing System, Other |
| G3010.0310 | Fire Hydrant |
| E1090.0330 | Food Cooking Equipment |
| E1090.0310 | Food Storage/Prep Equipment |
| D2090.0400 | Fuel Oil System |
| D3040.0460 | Fume Hood System |
| D3020.0310 | Furnaces |
| D2030.0260 | Grease Trap |
| D3050.0580 | Heat Exchanger |
| D2020.0260 | Heater Domestic Water |
| D3050.0521 | Heater, Cabinet Unit |
| D3050.0581 | Heater, Cast Iron Radiator |
| D3050.0530 | Heater, Fin Tube Radiation |
| D3050.0540 | Heater, Induction Unit |
| D3050.0560 | Heater, Unit |
| D3050.0570 | Heater, Unit Vent |
| F1040.0700 | Heliport System |
| E1090.0340 | Hood/Vent Equip |
| D3050.0300 | Humidifier |
| E1090.0380 | Ice Machines |
| D5020.0330 | Light, Emergency Exterior |
| D5020.0230 | Light, Emergency Interior |
| D5020.0231 | Light, Exit |
| E1020.0831 | Medical Air Compressor |
| E1020.0900 | Medical Gas Alarm |
| E1020.1000 | Medical Gas Area Alarm |
| E1020.0840 | Medical Gas Auto Pressure Switch |
| E1020.0834 | Medical Gas Manifold |
| E1020.0835 | Medical Gas N2O |
| E1020.0839 | Medical Gas Outlet |
| E1020.0837 | Medical Gas Shut-off Valve |
| E1020.0830 | Medical Gas System |
| E1020.0838 | Medical Nitrogen |
| E1020.0810 | Medical Sterilizer Equipment |
| E1020.0832 | Medical Vacuum Pump |
| D5010.0711 | Motor Control Center |
| D5010.0720 | Motor, Electric |
| D5030.0431 | Nurse Call System |
| E1090.0210 | Packaged Incinerator |
| D3010.0550 | Packaged Solar Equipment |
| D5030.0420 | Paging Systems |
| C1010.0180 | Partition Fire Rated |
| C1010.0190 | Partition, Smoke |
| D1090.0141 | Pneumatic Tube Blower |
| D1090.0142 | Pneumatic Tube Station |
| D1090.0140 | Pneumatic Tube System |
| D1090.0143 | Pneumatic Tube Transfer Unit |
| D3010.0430 | Pump |
| D3030.0710 | Pump, Air Source Heat |
| D3010.0432 | Pump, Chilled Water |
| D2020.0222 | Pump, Domestic Hot Water Recirculation |
| D2020.0221 | Pump, Domestic Water Booster |
| D4010.0111 | Pump, Fire |
| D3010.0431 | Pump, Heating Water |
| D4010.0112 | Pump, Jockey Fire |
| D3030.0720 | Pump, Rooftop Heat |
| D3010.0433 | Pump, Steam |
| D2040.0270 | Pump, Sump |
| D2030.0330 | Pump, Waste |
| D2020.0220 | Pump, Water Booster |
| D3030.0730 | Pump, Water Heat |
| E1090.0315 | Refrigerator/Freezer, Commercial |
| D3040.0123 | Return Air Fan |
| D2090.1200 | Reverse Osmosis System |
| D3030.0420 | Scroll Chiller |
| D4010.0300 | Sprinkler, Combo System |
| D4010.0400 | Sprinkler, Deluge System |
| D4010.0200 | Sprinkler, Dry-Pipe |
| D4020.0100 | Sprinkler, Standpipe |
| D4010.0100 | Sprinkler, Wet-Pipe |
| D3050.0310 | Steam Generator |
| D5010.0840 | Switchgear, Medium Voltage |
| D3010.0441 | Tank, Expansion Compressor |
| D2020.0310 | Tank, Expansion Domestic |
| D2020.0320 | Tank, Expansion Reheat |
| D2090.0410 | Tank, Fuel Oil |
| D3010.0444 | Tank, Steam Flash |
| D5010.0210 | Transformer, Low-Volt 2nd |
| D5010.0410 | Transformer, Low-Volt Inter |
| D5010.0110 | Transformer, Main |
| D3020.0150 | Trap, Steam |
| D5090.0110 | UPS - Computer |
| D5090.0120 | UPS - Other |
| D2090.1310 | Vacuum Pump |
| D3010.0435 | VFD - Pump |
| D3040.0190 | VFD HVAC |
| D5010.0850 | VFD/VSD |
| E1090.0316 | Walk-in-Refrigerator |
| D2090.0210 | Water Softener Equipment |
| D3010.0490 | Water Treatment Equipment |
|  |  |

**ARTICLE 8.7.3 Attachment B – Equipment List Spreadsheet Data Categories**

|  |  |  |
| --- | --- | --- |
| Uniformat |  | |
| Component ID |  | |
| Component Name |  | |
| Description |  | |
| Name |  | |
| Equipment No. | PPDMC will enter this data | |
| Model No. |  | |
| Room Location |  | |
| Functional Location | PPDMC will enter this data | |
| Manufacturer |  | |
| Supplier |  | |
| Installing Contractor |  | |
| Serial No. |  | |
| Main Work Center | PPDMC will enter this data | |
| Comments(30 char's) | PPDMC will enter this data | |
| Critical | PPDMC will enter this data | |
| JCAH Code | PPDMC will enter this data | |
| Patient Room? | PPDMC will enter this data | |
| Vendor ID | PPDMC will enter this data | |
| Vendor Type | PPDMC will enter this data | |
| Vendor - Other Info | PPDMC will enter this data | |
| Equipment Life | PPDMC will enter this data | |
| Area Serviced |  | |
| Contains Lead? |  | |
| Contains Asbestos? |  | |
| Contains PCBs? |  | |
| Motor Frame |  | |
| Motor Style |  | |
| Motor HP |  | |
| Motor Phase |  | |
| Motor Volts |  | |
| Motor RPM |  | |
| Fan CFM |  | |
| Fan RPM |  | |
| Fan Static |  | |
| Fan Type |  | |
| Fan RPM 2 |  | |
| Pump Head |  | |
| Pump Inlet |  | |
|  |  | |
| Pump GPM |  | |
| Pump Outlet |  | |
| Motor Operating Amps |  | |
| Condition | PPDMC will enter this data |
| Disconnect Location |  | |
| Motor FLA |  | |
| Belts |  | |
| Filters |  | |

**ARTICLE 8.7.3 Attachment C - Example Preventative Maintenance Procedures**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Description | Name | Equipment No. | Frequency | Maintenance Procedure | Maintenance Parts & Items |
|  |  |  |  |  |  |
| Air Handling Unit | AHU-1 | M-12345 | Monthly | Check Belts |  |
| Air Handling Unit | AHU-1 | M-12345 | Quarterly | Grease bearings | Grease type xyz |
| Air Handling Unit | AHU-1 | M-12345 | Annually | Replace Belts | Belt model abc-123 |
| Air Handling Unit | AHU-2 | M-98765 | Monthly | Check Belts |  |

The blue highlighted column will be filled in by PPDMC.