

Department	Standard Components	Room Tag: 3450
Room Name	Patient Bay - Holding, 9m2	Room Code: PBTR-H-9
Net Room Area Briefed	9.0 M2	
No of Rooms	1	
Subtotal of Briefed Area	9.00 M2	
Hours of Operation	24 Hours	
Occupancy	1 patient; 1 - 2 staff intermittently	
Also covers these Rooms		
Description/ Special Requirements	A Patient Bed Bay used for holding of patients prior to procedures, observation of patients following procedures or for assessment and treatment of patients with non acute conditions. The Patient Bay will have close access to a staff handwashing basin.	
Amendment	Body Protected electrical area 24.01.05, - First Draft 22.03.05, - BOB User review, Group 3 furniture modified 10.03.09, - 2009 AUSHFG review; description, FF, FE & services modified	

Room Fabric and outline specifications

ID	Fabric	Material	Finish	Specification	Selection	Remarks
5010	Ceiling	Plasterboard	Paint, washable	Flush set, suspended		
6030	Cornice	Aluminium	Powdercoat	24mm shadow angle		
1000	Floor finish	Vinyl	Standard slip resistant	Seamless, coved		
2000	Skirting	Vinyl	Prefinished	Floor vinyl coved, 150 mmH		
3000	Wall finish	Paint	Acrylic, washable			
3092	Wall protection	MDF	Laminate	Bed protection wall panel		

Fittings and Furniture (FF)

ID	Description	Category	Group	Qty	Selection / Remarks
150	Air flowmeter	Furniture/ Fitting	3	1	optional, required if air outlet provided
1465	Bracket: suction bottle	Furniture/ Fitting	2	1	required if suction outlet provided
2650	Chair: visitor, patient	Furniture/ Fitting	3	1	optional
4600	Curtain track: bed screen	Metalwork	1	1	
5000	Curtain: bed screen	Furniture/ Fitting	3	1	
6152	Dispenser: disposable glove	Furniture/ Fitting	2	1	
12900	Louvred panel: for storage-bins	Metalwork	1	1	optional
16250	Oxygen flowmeter	Furniture/ Fitting	3	1	required if oxygen outlet provided
21755	Storage bins	Furniture/ Fitting	3	3	on louvred panel, optional
21950	Suction adapter	Furniture/ Fitting	3	1	required if suction outlet provided
22000	Suction bottle	Furniture/ Fitting	3	1	required if suction outlet provided

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Fixtures, Equipment and associated Services (FE)

ID	Description	Group	Qty	Ele	Data	CdW	HtW	WmW	Tap	Dns	Gas	Selection / Remarks
3700	Bed: inpatient, electric	3	1	yes	___	___	___	___	___	___	___	
31700	Light: examination, ceiling	1		yes	___	___	___	___	___	___	___	spatial provision required

Services

ID	Description	Service Category	Qty	Selection / Remarks
1006	Voice / Data outlet: double	Communications	1	
5000	Airconditioning	HVAC		
6001	General: colour corrected	Lighting		
6030	Special: downlights	Lighting		over bed/ trolley
7020	Medical Air (MA)	Medical Gases	1	optional, dependant on use of the bay
7000	Oxygen (O2)	Medical Gases	1	optional, dependant on use of the bay
7040	Suction	Medical Gases	1	optional, dependant on use of the bay
8080	Emergency call	Nurse Call	1	+ indicator button & light
8005	Patient call handset	Nurse Call	1	call button on the handset
8000	Patient/ Staff call	Nurse Call	1	+ indicator button & light
8010	Staff/ Nurse assist call	Nurse Call	1	+ indicator button & light
9040	Body protected	Power		
9015	GPO: Cleaner	Power	1	as required
9010	GPO: Emergency power, single	Power	3	to bedhead
9000	GPO: Single	Power	3	to bedhead
9000	GPO: Single	Power	1	to bedhead, low level for bed
11000	Wall panel	Services Panels	1	flush mounted