| Room Template # | Room Template Name                                   | Room Template Index Space Descriptions / Variants  | Applies to SoA Ref. Numbers  | CSA Z32 Classification          | Data Density     |
|-----------------|--|--|--|---------------------------------|------------------|
| 1               | Exam Rooms   | Clinical Trials Area Exam Room   | J4.1.2<br>C4.2.2.3, D4.1.1, <b>F2.2.6, F2.3.5, F2.4.2,</b> K1.2.3, G1.5.11   | Basic Care                      | Medium           |
|                 |  | Exam Room - ABR  | H2.2.2.5   | -                               |                  |
|                 |  | Exam Room - CIS Exam Room - Dermatology  | H2.2.2.8<br>H1.5.2.5   | ]                               |                  |
|                 |  | Exam Room - First Aid Clinic Nurse   | 06.1   |                                 |                  |
|                 |  | Exam Room - Large  | H1.1.2.4, H1.2.2.2, H1.3.2.5, H1.4.2.2, H1.5.2.4, H2.2.2.4, H2.3.2.1   |                                 |                  |
|                 |  | Exam Room - Large AIR Hybrid Exam Room - Stress Test - Nuclear   | <b>F2.2.5</b> 12.5.14  |                                 |                  |
|                 |  | Exam Room - VHIT   | H2.2.2.9   |                                 |                  |
|                 |  | Exam Room - VNG Exam Room-Audiometry Booth   | H2.2.2.10<br>H2.2.2.6  | -                               |                  |
|                 |  | Exam Room-Audiometry Booth-CIS   | H2.2.2.7   |                                 |                  |
|                 |  | Exam Room-Echo Exam Room-Stress Test-Non-Nuclear   | H2.1.2.5<br>H2.1.2.7   |                                 |                  |
|                 |  | Exam Room-Vascular Phlebotomy Bay-Chair  | H2.1.2.6<br>J5.3   | -                               | Low              |
|                 |  | Phlebotomy Bay-Scooter   | J5.4   |                                 | 2011             |
|                 |  | Phlebotomy Bay-Stretcher Phlebotomy Room   | J5.5<br>A1.10.1, B1.2.22, B2.2.25, C1.1.2.18, C1.2.2.16,   |                                 |                  |
|                 |  |  | C2.1.2.18, C2.2.2.16, C3.1.2.18, C4.1.2.18, C4.2.4.15, C5.1.2.18, C5.2.2.16, C6.1.2.18, C6.2.2.16, E2.1.8, F2.2.7        |                                 |                  |
| 2               | IPU Sleeping Rooms                                   | Respiratory Diagnostics Bedroom-2 Single Beds  | H1.3.2.4<br>F4.4   | Intermediate Care               | Medium<br>Medium |
| _               | , 5  | Bedroom-Special Needs  | F4.3   |                                 | 38.4111          |
|                 |  | Patient Bay-Daycare Patient Room   | C3.2.3.1<br>C1.1.2.6, C1.2.2.4, C2.1.2.6, C2.2.2.4, C3.1.2.6,<br>C3.2.2.6, C3.2.4.3, C4.1.2.6, C5.1.2.6, C5.2.2.4,       |                                 |                  |
|                 |  | Patient Room-Airborne Isolation-Lead Lined   | C6.1.2.6, C6.2.2.4<br>C3.2.2.1   | ]                               |                  |
|                 |  | Patient Room-Ante-Natal/Post-Section Patient Room-Bariatric-Airborne Isolation-Hybrid  | E2.2.7<br>C1.1.2.4, C1.2.2.2, C2.1.2.4, C2.2.2.2, C3.1.2.4,  |                                 |                  |
|                 |  | Patient Room-Bariatric-Airborne Isolation-Hybrid   | C3.2.2.4, C4.1.2.4, C5.1.2.4, C5.2.2.2, C6.1.2.4, C6.2.2.2<br>C1.1.2.2, C2.1.2.2, C3.1.2.2, C4.1.2.2, C5.1.2.2, C6.1.2.2 |                                 |                  |
|                 |  | Patient Room-C4HA  | K2.2.9   |                                 |                  |
|                 |  | Patient Room-C4HA Accessible Patient Room-CHA Accessible   | K2.2.7<br>K2.2.8   |                                 |                  |
|                 |  | Patient Room-Eating Disorders  | C4.2.3.3   | 1                               |                  |
|                 |  | Patient Room-Eating Disorders Accessible Patient Room-MedPsych   | C4.2.3.2<br>C4.2.4.4   |                                 |                  |
|                 |  | Patient Room-MedPsych-Airborne Isolation-Hybrid Patient Room-MH  | C4.2.4.2<br>F1.2.6, F1.3.6, F3.2.1.7, F3.3.1.7, F3.4.1.7   | ]                               |                  |
|                 |  | Patient Room-MH Accessible   | F1.3.4, F3.3.1.5   | ]                               |                  |
|                 |  | Patient Room-MH Accessible-Airborne Isolation-Hybrid Patient Room-Post-Section   | F1.2.4, F3.2.1.5, F3.4.1.5<br>E2.2.7   |                                 |                  |
|                 |  | Patient Room-Post-Section-Airborne Isolation-Hybrid  | E2.2.5   | 1                               |                  |
| 3               | Procedure Rooms                                      | ACU Patient Bay ACU Patient Room-Airborne Isolation-Hybrid   | G1.5.3<br>G1.5.1, G2.5.1   | Critical Care                   | Medium           |
|                 |  | ACU-Patient Bay-Small  | G2.5.2   | Intormadiate                    |                  |
|                 |  | Assessment/Treatment Bay Assessment/Treatment Room   | L1.2.3<br>K2.2.3, L2.2, L3.2.3   | Intermediate Care               |                  |
|                 |  | Assessment/Treatment Room-Large ECG Bay  | J5.6   | <del> </del>                    | Medium           |
|                 |  | Exam Room - Evoked Potentials Exam Room-ECG  | H2.4.2.3<br>A1.1.12, H2.1.2.4  | <b> </b>                        | High<br>Medium   |
|                 |  | Exam Room-EEG  | H2.4.2.1   | 1 <u> </u>                      | High             |
|                 |  | Exam Room-EMG Exam Room-Ophthalmology  | H2.4.2.2<br>A1.7.4   | 1                               | Medium           |
|                 |  | Exam/Treatment Room (or Bay)   | A1.3.7, A1.4.7, A1.5.7, A1.7.3, A1.8.1, A2.2.2, D2.2.2   |                                 |                  |
|                 |  | Exam/Treatment Room-Airborne Isolation-Hybrid Exam/Treatment Room-Bariatric-Airborne Isolation-VHF                                 | A1.3.5, A1.4.5, A1.5.5, A2.2.1<br>A1.4.1, A1.5.1   |                                 |                  |
|                 |  | Exam/Treatment Room-Bariatric-Airborne Isolation-VHF Exam/Treatment Room-ENT   | A1.5.8   | 1                               |                  |
|                 |  | Exam/Treatment Room-EYE Exam/Treatment Room-MH   | A1.5.11<br>A1.6.2  | 1                               |                  |
|                 |  | Exam/Treatment Room-OB/GYN Exam/Treatment Room-Recliner  | A1.5.9<br>A1.3.8, A1.4.8, A1.5.12  | ]                               |                  |
|                 |  | Exam/Treatment Room-VHF  | A1.3.4, A1.4.4, A1.5.4   | 1 L                             |                  |
|                 |  | Procedure Room Procedure Room-Fiberoptic Endoscopy   | E2.1.4<br>L3.2.2   |                                 | High             |
|                 |  | Procedure Room-General Procedure Room-Renal  | G2.2.1<br>C3.2.5.2   | Critical Care Intermediate Care | High             |
|                 |  | Procedure Room-Small   | F1.4.2   |                                 | Medium           |
|                 |  | Treatment Bay-Recliner Procedure/Recovery Bay-ECT  | F2.4.1<br>G2.5.22  | Critical Care                   |                  |
| 4               | Critical Care Unit (CCU) / Intensive Care Unit (ICU) | Patient Room-Critical Care  Patient Room-Critical Care-Airborne Isolation  | B1.2.8, B2.2.13, B4.1.1 (Future Expansion provisions), B4.2.1 (Future Expansion provisions) B1.2.5, B2.2.10              | Critical Care                   | High             |
|                 |  | Patient Room-Critical Care-Airborne Isolation-VHF  | B2.2.5   | ]                               |                  |
|                 |  | Patient Room-Critical Care-Bariatric-Airborne Isolation Patient Room-Critical Care-Training Room                                   | B1.2.2, B2.2.2<br>B1.2.10  | 1                               |                  |
| 5               | NICU   | Patient Room-Critical Care-VHF Patient Room-NICU   | B2.2.8<br>E3.1.4   | Critical Care                   | High             |
|                 | Delivery - Labour                                    | Patient Room-NICU-Airborne Isolation-Hybrid Patient Room-SRMC  | E3.1.2 E2.2.3, E6.1 (Future Expansion provisions)  | Critical Care                   |                  |
| 6               |  | Patient Room-SRMC-Bariatric-Airborne Isolation-Hybrid  | E2.2.1   |                                 | High             |
| 7               | Dialysis or Infusion Areas                           | Hemodialysis Home Training Station-Chair Hemodialysis Treatment Station-Bed Hemodialysis Treatment Station-Bed-Airborne Isolation- | D3.2.6<br>D3.2.4<br>- D3.2.1, D3.2.3   | Intermediate Care               | Medium           |
|                 |  | Hybrid<br>Hemodialysis Treatment Station-Chair   | D3.2.5   |                                 |                  |
|                 |  | Infusion Treatment Bay-Recliner Infusion Treatment Bay-Stretcher   | H2.3.2.4<br>H2.3.2.5   | 1                               |                  |
|                 |  | Infusion Treatment-Bed-Airborne Isolation-Hybrid   | H2.3.2.2   | ]                               |                  |
|                 |  | Peritoneal-Dialysis Drop-in Treatment Station  | D4.1.4   | 1                               |                  |
|                 |  | Peritoneal-Dialysis Teaching Station-Open Bay<br>Peritoneal-Dialysis Training Station-Bed  | D4.1.5<br>D4.1.3   | <u> </u>                        |                  |
|                 |  | Peritoneal-Dialysis Training Station-Bed-Airborne Isolation-Hybrid   | D4.1.2   |                                 |                  |
| 8               | Procedure Rooms - Scope                              | Procedure Room-Bronchoscopy  | G2.3.1   | Critical Care                   | High             |
|                 |  | Procedure Room-ERCP/GI Endoscopy   | G2.4.1   | <u> </u>                        |                  |

| Room Template # | Room Template Name                               | Room Template Inde  | Applies to SoA Ref. Numbers   | CSA Z32 Classification          | Data Density |
|-----------------|--|---|---|---------------------------------|--------------|
| 8               | Procedure Rooms - Scope                          | Procedure Room-GI Endoscopy   | G2.4.2  | Critical Care                   | High         |
| 9               | Holding Stretcher Areas                          | Bed Bay-Discharge EMS Holding Bay   | G1.2.10<br>A1.1.9   | Intermediate Care               | Medium       |
|                 |  | Fetal Monitoring Bay Holter Monitor Bay                                       | E2.1.5<br>H2.1.2.8  | 1                               |              |
|                 |  | Patient Uptake/Injection Room   | 12.5.8  | 1                               |              |
|                 |  | Prep/Holding Bay Prep/Recovery Bay  | 11.5,   12.2.3,   12.3.4,   12.4.4<br>  12.5.6  | <u> </u>                        |              |
|                 |  | Recovery Bay-C-Section Stress Test-Set-up                                     | E2.3.3<br>I2.5.13, H2.1.2.3   | Critical Care Intermediate Care |              |
|                 |  | Stretcher Hold/CT Prep  | A1.9.4  | intermediate care               |              |
| 10              | Operating Rooms & Interventional Suites          | Stretcher Prep Bay<br>Interventional Suite                                    | H2.1.2.2<br>G1.2.3  | Critical Care                   | High         |
| 10              | operating rooms a interventional saltes          | Operating Room  | G1.3.3, G3.1.1 (Future Expansion provisions)  | Cirtical Care                   | 111811       |
|                 |  | Operating Room-Hybrid Operating Room-C-Section                                | G1.3.8<br>E2.3.1  | -                               |              |
| 11              | Resuscitation Room                               | Exam/Treatment Room-Resuscitation   | A1.2.1  | Critical Care                   | High         |
| 12              | CT Imaging                                       | Imaging-CT  | A1.9.5, I2.3.5, G1.2.15 / I2.3.10.1 (Future Expansion provisions)   | Intermediate Care               | Medium       |
| 13              | MRI  | Imaging-PET/CT Imaging-MRI  | I2.5.9 (Future Expansion provisions) I2.4.5, I2.4.10.1 (Future Expansion provisions)  | Intermediate Care               | Medium       |
| 14              | Fluoro, Diagnostic & Digital Radiography Imaging | Imaging-Digital Radiography   | A1.9.7, H2.4.2.4, I2.1.7, I2.1.9 (Future Expansion  | Intermediate Care               | Medium       |
|                 |  | Imaging-Fluoroscopy Multi-Purpose Room (MPR)                                  | provisions)   | -                               |              |
| 15              | Nuclear Medicine                                 | Imaging-Bone Densitometry   | 12.6.3  | Intermediate Care               | Medium       |
| 16              | Laboratories                                     | Imaging-Nuclear Medicine (incl. large)  Accessioning Area                     | J4.10.1   | N/A                             | Medium       |
| 10              | Laboratories                                     | Autoclave & Media Preparation Room  | J4.7.17   |                                 | Wediam       |
|                 |  | Automated High-Volume Analyzer Area Automated High-Volume Analyzer Area-Small | J4.4.1<br>J4.5.2  |                                 |              |
|                 |  | Balance Room  | J4.3.6  | ]                               |              |
|                 |  | Blood Culture Area Blood Culture Bench  | J4.7.7<br>J4.7.8  | <u> </u>                        |              |
|                 |  | Blood Gas/Whole Blood Analysis Area Blood Product Preparation Area            | J4.4.2<br>J4.6.4  | ]                               |              |
|                 |  | Cell Labelling Lab  | 12.5.22   | <u> </u>                        |              |
|                 |  | Centralized Molecular R&D Centralized Research & Development Area             | J4.13.8<br>J4.4.10  | <del> </del>                    | <br>High     |
|                 |  | Clean Master Mix Room   | J4.9.1  | <u> </u>                        | Medium       |
|                 |  | Clean Room-Hazardous Drugs Clean Room-Non-Hazardous                           | J1.6.1<br>J1.6.4  | <del> </del>                    |              |
|                 |  | Closed System Molecular Area  | J4.9.5  | ]                               |              |
|                 |  | Culture Bench Cytology Assessment & Processing Area                           | J4.7.5<br>J4.11.1   | <u> </u>                        |              |
|                 |  | Cytology Screening Room Electron Microscope Room                              | J4.11.2<br>J4.12.2  |                                 |              |
|                 |  | Electronic Cross Match Area   | J4.6.3  | <u> </u>                        |              |
|                 |  | Electrophoresis Area EM equipment Room  | J4.4.7<br>J4.12.3   |                                 |              |
|                 |  | Extraction Room   | J4.9.2  | ]                               |              |
|                 |  | Flow Cytometry Room Fluorescent Microscopy Workstation                        | J4.5.5<br>J4.7.11, J4.10.5  | 1                               |              |
|                 |  | Grossing & Tissue Processing Room   | J4.10.2   | ]                               |              |
|                 |  | Holter Monitor Analysis Area Hot Lab  | H2.1.2.9  | -                               |              |
|                 |  | ID & Susceptibility   | J4.7.9<br>J4.10.4   | ]                               |              |
|                 |  | IHC & Special Stains Area Incubator/Fridge/Freezer Area                       | J4.7.3  | <u> </u>                        |              |
|                 |  | Lab-Bone Marrow Lab-Embedding/Cutting   | J4.5.6<br>J4.10.6   | -                               |              |
|                 |  | Lab-Frozen Section  | G1.4.1  | ]                               |              |
|                 |  | Lab-Mass Spectrophotometry Lab-Microscopy                                     | J4.4.8<br>J4.5.7  | -                               |              |
|                 |  | Lab-Urinalysis  | J4.4.3  |                                 |              |
|                 |  | Manual Cross Match/Antibody Identification  Manual Hematology & Fluids        | J4.6.5<br>J4.4.4, J4.5.3  | 1                               |              |
|                 |  | Manual Workbench  | J4.4.5  | ]                               |              |
|                 |  | Mass Spectrophotometry Room Microscope Bench                                  | J4.4.6<br>J4.7.6  | <u> </u>                        |              |
|                 |  | Mycobacteriology Room-High Risk/CL3 Mycology Room                             | J4.7.12<br>J4.7.10  | -                               |              |
|                 |  | PCR Room  | J4.9.3  | 1                               |              |
|                 |  | Plating Area-Automated & Manual Post-PCR Room                                 | J4.7.2<br>J4.9.4  | 1                               |              |
|                 |  | Post-Sequencing-Bioinformatics  | J4.8.3  | ]                               |              |
|                 |  | Pre-Sequencing Room Radiopharmaceutical Compounding Lab                       | J4.8.1<br>I2.5.26   | <u> </u>                        |              |
|                 |  | Renal Lab Support   | J4.12.1<br>H1.3.2.11  | ]                               |              |
|                 |  | Satellite Scope Reprocessing-Clean Satellite Scope Reprocessing-Soiled        | H1.3.2.10   | <u> </u>                        |              |
|                 |  | Sequencing Room Serology/IVD Molecular Area                                   | J4.8.2<br>J4.9.6  |                                 |              |
|                 |  | Special Coagulation Area  | J4.5.4  | 1                               |              |
|                 |  | Specimen Holding Specimen Processing Room                                     | G1.4.3<br>J6.5  | -                               |              |
|                 |  | Specimen Receiving & Verification Area  | J4.6.1  | ]                               |              |
|                 |  | Staining Area Utility-Flash Sterilization                                     | J4.10.3<br>G1.4.5   |                                 |              |
|                 |  | Wet Specimen Processing   | J4.10.7   | ]                               |              |
| 17              | Ultrasound Imaging                               | Xenon Hyperpolarizer Room Imaging-Ultrasound                                  | 12.4.9<br>  A1.9.8,   12.2.6,   12.2.7,   12.2.8 (Future Expansion  | Intermediate Care               | Medium       |
|                 | Innadia Cantra I Bara                            |   | provisions)   |                                 | B # 3+       |
| 18              | Imaging Control Rooms                            | Control-Imaging   | A1.9.6, G1.2.4, <b>G1.2.18,</b> G1.3.9, I2.1.5, I2.3.6, I2.4.6, I2.5.10, G1.2.16 / I2.3.10.2 / I2.4.10.2 (Future Expansion provisions)  | N/A                             | Medium       |
| 19              | Care Team Stations                               | Care Team Station   | A1.3.10, A1.4.10, A1.5.14, A1.6.7, A1.7.6, A1.8.3, B1.2.14, B2.2.17, C1.1.2.10, C1.2.2.8, C2.1.2.10, C2.2.2.8, C3.1.2.10, C3.2.3.2, C3.2.5.5, C4.1.2.10,  | N/A                             | High         |
|                 |  |   | C2.2.2.8, C3.1.2.10, C3.2.3.2, C3.2.5.5, C4.1.2.10, C4.2.3.6, C4.2.4.8, C5.1.2.10, C5.2.2.8, C6.1.2.10, C6.2.2.8, D3.2.9, D4.1.7, E2.2.10, E2.2.12, E2.3.5, E3.1.8, F1.1.4, F1.2.10, F1.3.10, <b>F2.2.2, F2.3.2,</b> F3.2.1.10, F3.3.1.10, F3.4.1.10, G1.5.6, G2.5.4, G2.5.5, |                                 |              |
|                 |  | Care Team Station-Enclosed  | H2.3.2.6, K2.2.13  C1.1.2.11, C1.2.2.9, C2.1.2.11, C2.2.2.9, C3.1.2.11, C3.2.5.6, C4.1.2.11, C4.2.3.7, C4.2.4.9, C5.1.2.11,   | -                               |              |
|                 |  | Inter-Professional Team Room  | C5.2.2.9, C6.1.2.11, C6.2.2.9 A2.3.1, H1.1.2.8, H1.2.2.6, H1.5.2.9, K2.2.17, H1.4.2.6,  |                                 |              |
|                 |  |   | I2.5.19, H2.2.2.13, H1.3.2.9  | ]                               |              |
| 1               |  | Inter-Professional Team Room-Small  | K4.2  |                                 |              |

| Room Template # | Room Template Index Room Template # Room Template Name Space Descriptions / Variants Applies to SoA Ref. Numbers CSA Z32 Classification Data Density |  |   |            |                       |  |  |  |  |  |
|-----------------|--|--|---|------------|-----------------------|--|--|--|--|--|
| 20              | Offices  | Office Office  | A1.6.11, A1.11.3, A1.11.4, A1.11.5, A2.3.2, A2.3.3, B1.4.2,   | N/A        | As Appropriate        |  |  |  |  |  |
|                 |  |  | B1.4.3, B1.4.4, B2.4.2, B2.4.3, B2.4.4, B3.3, B3.4, C1.1.4.2, C1.2.4.2, C2.1.4.2, C2.2.4.2, C3.1.4.2, C3.2.7.2, C4.1.6.2,         |            |                       |  |  |  |  |  |
|                 |  |  | C4.2.4.26, C5.1.4.2, C5.2.4.2, C6.1.4.2, C6.2.4.2, C4.2.4.25, C1.1.4.3, C1.2.4.3, C2.1.4.3, C2.2.4.3, C3.1.4.3, C3.2.7.3,         |            |                       |  |  |  |  |  |
|                 |  |  | C4.1.6.3, C5.1.4.3, C5.2.4.3, C6.1.4.3, C6.2.4.3, C1.1.4.1, C1.2.4.1, C2.1.4.1, C2.2.4.1, C3.1.4.1, C3.2.7.1, C4.1.6.1,           |            |                       |  |  |  |  |  |
|                 |  |  | C5.1.4.1, C5.2.4.1, C6.1.4.1, C6.2.4.1, D5.1, E5.3, E5.2,   |            |                       |  |  |  |  |  |
|                 |  |  | F3.2.3.2, F3.4.3.2, F1.6.2, F1.6.3, <b>F2.6.2, F2.6.3,</b> F3.3.3.2, G1.2.16, G1.4.2, G1.5.13, G1.5.14, G1.7.5, G1.7.6, G2.7.2,   |            |                       |  |  |  |  |  |
|                 |  |  | H1.1.4.2, H1.1.4.3, H1.2.4.2, H1.2.4.3, H1.3.4.2, H1.3.4.3,   |            |                       |  |  |  |  |  |
|                 |  |  | H1.4.4.2, H1.4.4.3, H1.5.4.2, H1.5.4.3, H2.1.4.5, H2.1.4.6, I2.1.9, I2.2.8, I4.2, I4.7, I4.8, I4.9, I4.10, I4.11, J1.1.3, J1.1.6, |            |                       |  |  |  |  |  |
|                 |  |  | J1.1.5, J1.1.4, J1.5.1, J2.10, J2.11, J3.1, J4.2.7, J4.3.9, J4.4.12, J4.5.9, J4.6.11, J4.9.8, J4.9.9, J4.10.19, J4.10.20,         |            |                       |  |  |  |  |  |
|                 |  |  | J4.10.21, J4.13.11, J4.13.12, J5.8, J6.11, K4.3, K4.4, L5.2,  |            |                       |  |  |  |  |  |
|                 |  |  | L5.3, M1.2.2, M1.2.3, M1.4.1, M1.5.1, M4.2, N2.14, N2.17, N3.9, N4.8, O1.14, O1.15, O1.16, O2.5.3, O2.5.4, O3.33,                 |            |                       |  |  |  |  |  |
|                 |  |  | O3.34, O4.5, O4.6, O4.7, O5.1, O5.2, O5.3, O5.4, O5.5, O5.6, O6.2, O6.3, O6.4, O6.5, O6.6, O6.7, O6.8, O7.1, O8.1,                |            |                       |  |  |  |  |  |
|                 |  |  | 08.2, 08.3, 012.1, 012.2, 012.3, 013.2, 013.3   |            |                       |  |  |  |  |  |
|                 |  | Office-Main Lab  | J4.4.9, J4.7.21   |            |                       |  |  |  |  |  |
| 21              | Workstations / Switchboards / Control Desks  | Office-Microscope  Workstations/ Switchboards/ Control Desks (incl.                                  | J4.10.18 A1.1.5, A1.1.6, A1.9.10, B4.1.1, B4.2.1, C4.2.2.8, D5.2,   | N/A        | As Appropriate        |  |  |  |  |  |
|                 |  | control - security, VPD/BCES, lg. general, ECHO, ECG,  | <b>D5.4,</b> E6.1, <b>F1.1.10,</b> F1.2.14, F1.3.14, F1.6.4, <b>F2.6.4,</b>   |            | то три органо         |  |  |  |  |  |
|                 |  | card team, audio, diagnostics, clinical pharm, operation control desk, study room, touchdown & other | F2.6.5, F3.2.1.13, F3.3.1.13, F3.4.1.13, F4.6, G1.7.7, G2.7.3, G3.1, H1.1.2.5, H1.1.4.4, H1.2.2.3, H1.2.4.4,                      |            |                       |  |  |  |  |  |
|                 |  | operational support categories)  | H1.3.2.6, H1.3.4.4, H1.4.2.3, H1.4.4.4, H1.5.2.6,   |            |                       |  |  |  |  |  |
|                 |  |  | H1.5.4.4, H2.1.4.7, H2.1.4.1, H2.1.4.2, H2.1.4.3,<br>H2.2.4.1, H2.3.4.1, H2.4.2.6, I2.4.12, I2.5.16, I2.5.20,                     |            |                       |  |  |  |  |  |
|                 |  |  | I5.1, <b>J1.3.3</b> , J4.3.10, J3.2, J4.1.5, J4.2.5, J4.3.7, J4.4.11,   |            |                       |  |  |  |  |  |
|                 |  |  | J4.5.8, J4.6.10, J4.7.20, J4.10.17, J4.12.4, J4.13.10, L1.4.1, <b>M1.1.5</b> , M1.3.1, M1.3.2, O2.2.4, O2.2.9, O2.4.5,            |            |                       |  |  |  |  |  |
|                 |  |  | 03.5, 03.35, 04.10, 04.13, 04.14, 05.7, 06.9, 06.10,  |            |                       |  |  |  |  |  |
|                 |  |  | O7.6, O12.4, G1.2.1, G1.3.1, N1.3, J4.2.6, J4.3.8, J4.12.5, L1.4.2, N1.4, O4.8  |            |                       |  |  |  |  |  |
|                 |  |  |   | ]          |                       |  |  |  |  |  |
|                 |  | Command Centre/EOC   | M5.1  |            | High<br>Madium        |  |  |  |  |  |
|                 |  | Dispatch Room Physician Workroom   | O2.4.8<br>A1.11.7   | <u> </u>   | Medium                |  |  |  |  |  |
|                 |  | Reading Room-PACS  | A1.9.9, G1.7.4, H2.1.4.4, I2.5.18, I4.6, G1.7.3, I4.3,  | ]          |                       |  |  |  |  |  |
|                 |  | Registration/Triage  | I2.3.11, I4.4, I4.5<br>  A1.1.8, A2.1.1   |            |                       |  |  |  |  |  |
|                 |  | Workroom-Flexible  | J4.13.9   | ]          | Low                   |  |  |  |  |  |
| 22              | Multinurnose Rooms   | Workstation-Supervisor (Electrical, Plumbing, Multipurpose Room                                      | 04.9, 04.10, 04.11<br>F1.4.6 <b>F2.2.9 F2.3.6</b> F3.2.1.17 F3.3.1.17 F3.4.1.17   | N/A        | Medium                |  |  |  |  |  |
| 22              | Multipurpose Rooms   | iviuitipui pose koom   | F1.4.6, <b>F2.2.9, F2.3.6,</b> F3.2.1.17, F3.3.1.17, F3.4.1.17, K1.2.5  | IN/A       | ivieaium              |  |  |  |  |  |
|                 |  | Multipurpose Room-Large  | C4.2.2.5, K2.2.18   | ]          |                       |  |  |  |  |  |
| 23              | Conference / Meeting Rooms   | Study Room-Group Conference/Meeting Room   | N1.2, N5.2<br>I2.3.10, I2.4.10  | N/A        | Low<br>Medium         |  |  |  |  |  |
|                 |  | Conference/Meeting Room-Large-Dividable  | C1.3.3, C2.3.3, C3.3.3, C4.3.1, C5.3.3, C6.3.3, I1.7, N1.1,   | ]          | High                  |  |  |  |  |  |
|                 |  |  | I5.1 (Future Expansion provisions)  |            |                       |  |  |  |  |  |
|                 |  | Conference/Meeting Room-Xsmall   | F3.2.3.1, F3.3.3.1, F3.4.3.1, J1.1.8, M5.2, N2.16, N4.7   |            | Medium                |  |  |  |  |  |
|                 |  | Conference/Meeting Room-Small  | D3.4.2, F.1.6.1, <b>F2.6.1,</b> G1.7.1, H1.1.4.1, H1.2.4.1, H1.3.4.1, H1.4.4.1, H1.5.4.1, I4.1, J4.10.16, K4.1.                   |            |                       |  |  |  |  |  |
|                 |  | Conformed Masting Dearer Marting   | N2.16, O1.13, O2.5.2, O4.4  |            |                       |  |  |  |  |  |
|                 |  | Conference/Meeting Room-Medium   | A1.11.2, B1.4.1, B2.4.1, D3.4.3, E5.1, G2.7.1, G1.7.2, J1.1.9, J4.13.3, L5.1, N2.15   |            |                       |  |  |  |  |  |
|                 |  | Conference/Meeting Room-Xlarge-Dividable   | C1.3.1, C2.3.1, C3.3.1, C5.3.1, C6.3.1, N2.14   |            | High                  |  |  |  |  |  |
|                 |  | Conference/Meeting Room-XXlarge-Dividable Consult/Interview Room                                     | N2.13<br>A1.1.10, A1.1.11, A1.6.1, A1.7.2, B1.2.1, B2.2.1,  |            | Low                   |  |  |  |  |  |
|                 |  | Crisis Interview Room  | C1.1.2.1, C1.2.2.1, C2.1.2.1, C2.2.2.1, C3.1.2.1,   |            |                       |  |  |  |  |  |
|                 |  | Office - Main Lab  | C3.2.5.1, C4.1.2.1, C4.2.2.2, C4.2.3.1, C4.2.4.1,<br>C5.1.2.1, C5.2.2.1, C6.1.2.1, C6.2.2.1, D2.2.1, E2.1.1,                      |            |                       |  |  |  |  |  |
|                 |  |  | E3.1.1, F1.1.8, F1.2.1, F1.3.1, F1.4.1, <b>F2.1.6, F2.1.7,</b>  |            |                       |  |  |  |  |  |
|                 |  |  | <b>F2.2.4, F2.3.4,</b> F3.2.1.1, F3.3.1.1, F3.4.1.1, F4.2, G1.1.4, G1.5.10, G2.1.4, H2.1.2.1, H2.2.2.1, I1.6, I2.2.4,             |            |                       |  |  |  |  |  |
|                 |  |  | I2.4.16, I2.7.1, J2.2, J4.13.2, K1.2.1, K2.2.1, L1.2.1,   |            |                       |  |  |  |  |  |
|                 |  | Medical Education Program Collection   | L3.2.1, M4.1<br>N1.5  |            | As Appropriate        |  |  |  |  |  |
|                 |  | Report Room  | B3.1  | ]          |                       |  |  |  |  |  |
|                 |  | Team Space-Allied Health   | A1.11.1, B1.2.18, C1.1.2.15, C1.2.2.13, C2.1.2.15, C2.2.2.13, C3.1.2.15, C3.2.5.10, C4.1.2.15, C5.1.2.15,                         |            |                       |  |  |  |  |  |
| 2.5             | Cooura De sus  | Coours Doors   | C5.2.2.13, C6.1.2.15, C6.2.2.13, F1.2.13, F1.3.13   | ***        | <del>-</del>          |  |  |  |  |  |
| 24<br>25        | Secure Room Rehabilitation Rooms   | Secure Room Extremity Whirlpool Room   | A1.6.3, F1.2.2, F1.3.2, F3.2.1.2, F3.3.1.2, F3.4.1.2<br>L1.2.8  | N/A<br>N/A | Zero<br>Low           |  |  |  |  |  |
| -               |  | Rehab Gym-Cardiovascular   | L1.2.4  | ]          | Medium                |  |  |  |  |  |
|                 |  | Rehab Gym-Group Exercise Rehab Gym-Physiotherapy   | L1.2.5<br>L1.2.6  |            |                       |  |  |  |  |  |
|                 |  | Rehab Gym-Strength Training  | L1.2.7  | ]          |                       |  |  |  |  |  |
| 26              | Clinical Support Rooms   | Mobility Gym Anteroom-Airborne Isolation   | K1.2.4<br>B1.2.6, B2.2.11   | N/A        | Included in room data |  |  |  |  |  |
| -               |  | Anteroom-Airborne Isolation-Lead Lined   | C3.2.2.2  | ]          | density               |  |  |  |  |  |
|                 |  | Anteroom-Airborne Isolation-VHF Anteroom-Bariatric-Airborne Isolation                                | A1.3.2, A1.4.2, A1.5.2, B2.2.6<br>B1.2.3, B2.2.3  | -          |                       |  |  |  |  |  |
|                 |  | Anteroom-Decontamination Entry   | A1.1.15   | ]          |                       |  |  |  |  |  |
|                 |  | Anteroom-Decontamination Exit Anteroom-Equipment   | A1.1.16<br>J4.7.16  |            |                       |  |  |  |  |  |
|                 |  | Anteroom-Exit  | J4.7.14   | ]          |                       |  |  |  |  |  |
|                 |  | Anteroom-Hazardous Anteroom-Hazardous Drugs  | J2.9<br>J1.6.2  |            |                       |  |  |  |  |  |
|                 |  | Anteroom-Non-Hazardous Drugs   | J1.6.5  | ]          |                       |  |  |  |  |  |
|                 |  | Anteroom-Secure AUD/Barcoding/Picking Area   | A1.6.4, F1.2.3, F1.3.3, F3.2.1.3, F3.3.1.3, F3.4.1.3  J1.2.7  |            | Low                   |  |  |  |  |  |
|                 |  | Biohazard Waste Staging  | O2.1.10   | ]          | <del></del>           |  |  |  |  |  |
|                 |  | Break Down Room Cart Drying Room   | O2.4.7<br>O2.2.5  |            |                       |  |  |  |  |  |
|                 |  | Cart Wash  | O3.28   | ]          |                       |  |  |  |  |  |
|                 |  | Cart Wash/Hold Change Cubicle-Patient  | O2.2.6<br>A1.9.3, <b>G1.5.29,</b> I2.1.3, H2.1.2.11, H2.4.2.7, I2.2.5,  |            |                       |  |  |  |  |  |
|                 |  |  | I2.3.3, I2.4.14, N3.3   |            |                       |  |  |  |  |  |
|                 |  | Change/Foot Wash Change-Patient Hot  | M8.2<br>I2.5.4  |            |                       |  |  |  |  |  |
|                 |  | Change-Staff   | J1.6.10   | ]          |                       |  |  |  |  |  |
|                 |  | Control-Observation Decontamination Room   | N3.8<br>A1.1.14   |            |                       |  |  |  |  |  |
|                 |  | Decontamination Zone   | 01.4  | ]          |                       |  |  |  |  |  |
|                 |  | Disinfector/Washer-Wheelchairs/Gurneys-Bedbugs Sauna   | 08.7  |            |                       |  |  |  |  |  |
|                 |  | Dispensary Area  | J2.4  |            | Medium                |  |  |  |  |  |
|                 |  |  |   |            |                       |  |  |  |  |  |

| Room Template Index |                         |   |   |                        |              |  |  |  |
|---------------------|-------------------------|---|---|------------------------|--------------|--|--|--|
| om Template #       | Room Template Name      | Space Descriptions / Variants   | Applies to SoA Ref. Numbers   | CSA Z32 Classification | Data Density |  |  |  |
| 26                  | Clinical Support Rooms  | Dispensing Area Unit Doses  | J1.5.2  | N/A                    | Medium       |  |  |  |
|                     |                         | Dispensing Window   | J2.3  |                        | Low          |  |  |  |
|                     |                         | Entrance Vestibule - Decontamination  | A1.1.17   |                        |              |  |  |  |
|                     |                         | Instrument Return   | 02.1.6  |                        | Medium       |  |  |  |
|                     |                         | Medication Room - Small   | A1.7.9, A1.8.6, A2.2.3, D2.2.8, D2.2.3, <b>G2.5.9,</b> H1.1.2.7,  |                        |              |  |  |  |
|                     |                         |   | H1.2.2.5, H1.4.2.5, H1.3.2.8, H1.5.2.8, I2.6.6,   |                        |              |  |  |  |
|                     |                         |   | I2.1.10, I2.2.9, I2.3.12, I2.4.11, K2.2.16, K1.2.6  |                        |              |  |  |  |
|                     |                         | Medication Room-Medium  | A1.3.13, A1.4.13, A1.5.17, A1.6.10, B1.2.17, B2.2.20,   |                        |              |  |  |  |
|                     |                         |   | D3.2.12, F3.2.1.14, F3.3.1.14, F3.4.1.14, <b>F2.5.6,</b> G1.5.9, H2.3.2.9                               |                        |              |  |  |  |
|                     |                         | Medication Room - Large   |   |                        |              |  |  |  |
|                     |                         | Medication Room - Large   | C1.1.2.14, C1.2.2.12, C2.1.2.14, C2.2.2.12, C3.1.2.14,  |                        |              |  |  |  |
|                     |                         |   | C3.2.5.9, C4.1.2.14, C4.2.3.10, C4.2.4.12, C5.1.2.14, C5.2.2.12, C6.1.2.14, C6.2.2.12, E2.2.15, E3.1.11 |                        |              |  |  |  |
|                     |                         | Observation/Seminar Room  | N3.7  |                        |              |  |  |  |
|                     |                         | Order Entry Area #1   | J1.4.1  |                        | High         |  |  |  |
|                     |                         | Order Entry Area #2   | J1.4.2  |                        |              |  |  |  |
|                     |                         | Outreach Drug Distribution Area   | J2.6  |                        |              |  |  |  |
|                     |                         | Scope Decontamination   | G2.8.2  |                        | Medium       |  |  |  |
|                     |                         | Support Space   | J4.10.8   |                        |              |  |  |  |
|                     |                         | Ultrasound Probe Cleaning   | 12.2.11   |                        |              |  |  |  |
| 27                  | Patient Support Rooms   | Angel's Cradle-Baby Drop-off  | A1.1.18   | N/A                    | Low          |  |  |  |
|                     |                         | Breast Feeding Room   | E1.2, M1.1.8  |                        |              |  |  |  |
|                     |                         | Dining/Activity Area C4.2.2.6, C4.2.2.7, C4.2.3.13, F1.4.5, F3.2.1.18, F3.3.1.18, F3.4.1.18, F4.7 |   |                        | Medium       |  |  |  |
|                     |                         | Crown Thorsey, Doors  |   |                        |              |  |  |  |
|                     |                         | Group Therapy Room  | C4.2.3.16, C4.2.2.4   |                        |              |  |  |  |
|                     |                         | Group Therapy Room-Tinnitus   | H2.2.2.2<br>C4.2.3.15, F3.2.1.4, F3.3.1.4, F3.4.1.4   |                        |              |  |  |  |
| 20                  | Clinical Skills         | Sensory Modulation Room Clinical Skills Room  |   | NI/A                   | High         |  |  |  |
| 28                  | Cimical Skins           | Clinical Skills Room-Enhanced   | N3.5<br>N3.6  | N/A                    | High         |  |  |  |
| 20                  | Markin Comiton          |   |   | N1/A                   | 11:-1-       |  |  |  |
| 29                  | Media Services          | Control-AV  | N4.6  | N/A                    | High         |  |  |  |
|                     |                         | Studio-Photo Studio-Video   | N4.3<br>N4.4  |                        |              |  |  |  |
|                     |                         |   | N4.5  |                        |              |  |  |  |
| 20                  | Technical Support Rooms | Video Editing Rooms  Radiology Tech Work/Supplies   | H2.4.2.5  | N/A                    | Medium       |  |  |  |
| 30                  |                         | Technical Room-Imaging  | G1.2.5, G1.2.6, G1.3.10, I2.3.7, I2.3.8, I2.4.7, I2.5.11,   | IN/A                   | ivieuluiii   |  |  |  |
|                     |                         | Technical Room-imaging  | G1.2.15.1 / I2.3.10.3 / I2.4.10.3 (Future Expansion   |                        |              |  |  |  |
|                     |                         |   | provisions)   |                        |              |  |  |  |
|                     |                         | Workroom-Anesthesia   |   |                        |              |  |  |  |
|                     |                         |   | G1.4.6  |                        |              |  |  |  |
|                     |                         | Workroom-Anesthesia/Supplies  | G2.6.1  | <b>├</b>               | 11: -L       |  |  |  |
|                     |                         | Workroom-Biomedical Engineering   | D6.1, I2.7.2, O1.9, I3.10   |                        | High         |  |  |  |
|                     |                         | Workroom-Class 4 Laser  | 01.10   | <b>∤</b>               | Medium       |  |  |  |
|                     |                         | Workroom-Clinical Pharmacists   | J1.1.7  |                        | High         |  |  |  |
|                     |                         | Workroom-Decontamination  | 02.1.4  |                        | Medium       |  |  |  |
|                     |                         | Workroom-Dialysis Technicians   | D3.4.1  | <u> </u>               | High         |  |  |  |
|                     |                         | Workroom-Environmental Services   | 08.4  |                        | Medium       |  |  |  |
|                     |                         | Workroom-Pump/Storage   | G1.4.7, G1.4.8  |                        |              |  |  |  |
|                     |                         | Workroom-Specialized Equipment  | 01.11   |                        |              |  |  |  |
|                     |                         | Workroom-Technologist   | 12.1.11, 12.2.10  |                        |              |  |  |  |
|                     |                         | Workroom-Wheelchair Repair  | 07.5  |                        |              |  |  |  |
| 31                  | Autopsy Room            | Autopsy Room  | J6.4  | N/A                    | Low          |  |  |  |

|   |  | Room Templa   | te 1: Generic Exan                          | n Rooms               |   |   |  |
|---|--|---|---|-----------------------|---|---|--|
| Lighting Function Types                               | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting) | Illuminance Targets (minimum average lux)                     | Local C                                     | Controls              | Power Source  | Notes / Other Requirements  |  |
| General Area Lighting                                 | Direct/indirect (ceiling)  | 500   | Room entr                                   | y (dimming)           | Conditional with selected Vital fixtures for safety | Illuminance targets must be met at hand hygiene sink when standing in front of it   |  |
| Exam Lighting, general                                | Ceiling (over abdomen)   | 1000  | Provider zor                                | ne (dimming)          | Conditional   | Over specific body part related to room specialty when applicable   |  |
| Exam or surgical lighting, specific medical equipment | N/A (equipment-specific)   | N/A (equipment-specific)                                      | Equipme                                     | nt-specific           | UPS   | Refer to equipment list, used where articulated light source needs to provide high light level with controlled beam   |  |
| Bedside Staff light                                   |  |   |   |                       | I/A   |   |  |
| Patient Reading light                                 |  |   |   |                       | I/A   |   |  |
| Workstation lighting                                  | Ceiling  | 750   | At workstati                                | on (dimming)          | Conditional   |   |  |
| Night light   |  |   |   |                       | I/A   |   |  |
| Observation lighting                                  |  |   |   |                       | I/A   |   |  |
| Instrument processing lighting                        |  |   |   |                       | I/A   |   |  |
| Visitor/Family zone lighting Shower                   |  |   |   |                       | I/A<br>I/A  |   |  |
| Specialty Lighting                                    |  |   |   |                       | I/A   |   |  |
| Warning Lights (in-use / do not enter)                |  |   |   |                       | I/A   |   |  |
| Battery packs (backup unit lighting)                  |  |   |   |                       | I/A   |   |  |
| Power Outlet Locations                                | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                    | #   | of duplex UPS out     |   | Notes / Other Requirements  |  |
| Headwall Provider zone                                | 1/0.5  | 1/0.5   | 1/0.5 (for monitor)<br>1/1 (for ultrasound) |                       | •   | Monitor circuits may only be shared with other monitors. 5-20R outlet for mobile ultrasound equipment.  When bed/stretcher is sideways against a wall, the headwall Provider zone requirements are at the Patient's head and the headwall Patient zone requirements are at the foot |  |
| Headwall Patient zone                                 | 1/0.5  | 1/0.5   |   |                       |   |   |  |
| Bed   |  | 1/0.5   |   |                       |   | Required only when electric bed/stretcher required in room  |  |
| Patient Lift  |  | 1/0.5   |   |                       |   | Required only when patient lift required in room  |  |
| Boom  |  |   |   |                       |   | When bed/stretcher is islanded, requirements for headwall are to be relocated to boom   |  |
| Housekeeping  |  | 1/0.5   |   |                       |   | 5-20R outlet near room entry door   |  |
| General use (spacing / location specified)            | 1/0.5 counter GFCI receptacle at sink  | 1/0.5 per 3m of wall  |   |                       |   |   |  |
| Specialty, equipment specific                         |  |   |   |                       |   | Additional outlets and circuits to be provided for all items in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist   |  |
| Nursing control zone                                  |  |   |   |                       |   |   |  |
| Observation room or station or area or ante room      |  |   |   |                       |   |   |  |
|   |  | Data Drop Quantity  | na litaralia                                | Clinical              | Landling Continu                                    |   |  |
| Division 27   | Nurse Call   | Structured Cabling Infrastructure Data Density (IMIT, PM, GI) | Multimedia<br>Room Template                 | Observation<br>Camera | Location Services<br>Infrastructure                 | Additional Infrastructure Requirements  |  |
| Basic Requirement                                     | Required   | Medium  | YES   | NO                    | YES   | Clocks: One visible from provider zone  |  |
| Headwall Provider zone                                | Patient Station  | 4 (in 2 separate outlets)                                     |   |                       |   |   |  |
| Headwall Patient zone                                 |  | 2   |   |                       |   |   |  |
| Footwall  | Nurse Call Connection to display location.                                   | 4   |   |                       |   |   |  |
| General use (spacing / location specified)            | Pull Cord at patient chair   |   |   |                       | Refer to Section 7.9.13.2(2)                        |   |  |
| Bed   |  |   | 1   |                       | for details.  | When bed/stretcher is islanded, requirements for headwall are to be relocated to boom   |  |
| Boom  |  |   |   |                       |   |   |  |
| Ceiling   |  |   |   |                       |   | Hard ceiling rooms to have one (1) additional 2-gang box stubbed to cable tray  |  |
|   |  |   |   |                       |   | Additional data outlet(s) for specialty equipment or workstation  |  |

Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

|   |  | Room Temp   | olate 2: Generic Inpatient Unit (IPU)           | Sleeping Rooms               |   |
|---|--|---|---|------------------------------|---|
| Lighting Function Types   | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting)                               | Illuminance Targets (minimum average lux)                     | Local Controls                                  | Power Source                 | Notes / Other Requirements  |
| General Area Lighting   | Direct/indirect (ceiling)  | 300   | Patient zone (dimming),<br>Room entry (dimming) | 25% Vital, 75% Conditional   | Illuminance targets must be met at hand hygiene sink when standing in front of it   |
| Exam Lighting, general  | Ceiling (over abdomen)   | 750   | Provider zone                                   | Vital                        |   |
| Exam or surgical lighting, specific medical equipment                       | N/A (equipment-specific)   | N/A (equipment-specific)                                      | Equipment-specific                              | UPS                          | Refer to equipment list, used where articulated light source needs to provide high light level with controlled beam   |
| Bedside Staff light   | Ceiling or wall-mount  | 100   | Provider zone (dimming)                         | Vital                        |   |
| Patient Reading light   | Ceiling or wall-mount  | 300   | Patient zone (dimming)                          | Vital                        |   |
| Workstation lighting  |  |   | Detient zone                                    | N/A                          |   |
| Night light   | Wall-mount   | 30  | Patient zone,<br>Room entry                     | Vital                        | Amber colour, addressable control not required, located between bed/stretcher and washroom  |
| Observation lighting  | Ceiling or wall-mount  | 300   | Remote observation area (dimmi                  | ng) Vital                    | Required in Mental Health inpatient rooms only  |
| Instrument processing lighting  |  |   |   | N/A                          |   |
| Visitor/Family zone lighting  | Ceiling or wall-mount  | 300   | Visitor/family zone (dimming)                   |                              |   |
| Shower  |  |   |   | N/A                          |   |
| Specialty Lighting  |  |   |   | N/A<br>N/A                   |   |
| Warning Lights (in-use / do not enter) Battery packs (backup unit lighting) |  |   |   | N/A<br>N/A                   |   |
| Power Outlet Locations  | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                    | # of duplex UPS                                 |                              | Notes / Other Requirements  |
| Headwall Provider zone  | 1/0.5  | 1/0.5   | 1/0.5 (for u                                    | •                            | Monitor circuit may only be shared with other monitors. 5-20R outlet for mobile ultrasound equipment  |
| Headwall Patient zone   | 1/0.5  | 1/0.5   | 2/2 (   | . assama,                    |   |
| Bed   | ·  | 1/0.5   |   |                              |   |
| Patient Lift  |  | 1/0.5   |   |                              | Patient lift and bed in same room may share same circuit  |
| Boom  |  |   |   |                              |   |
| Housekeeping  |  | 1/0.5   |   |                              | 5-20R outlet at room entry, circuit sharing within room or with adjacent patient room only  |
| General use (spacing / location specified)                                  |  | 1/0.5 for each visitor/patient chair, workstation             |   |                              |   |
| Specialty, equipment specific   |  |   |   |                              | Additional outlets and circuits to be provided for all items in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist |
| Nursing control zone  |  |   |   |                              |   |
| Observation room or station or area or ante room                            | 1 per 1m of wall/2 per circuit   |   |   |                              | Outlets noted are in addition to standard workstation requirements, select rooms only   |
|   |  | Data Drop Quantity  | Multimedia Clinical                             | Location Services            |   |
| Division 27   | Nurse Call   | Structured Cabling Infrastructure Data Density (IMIT, PM, GI) | Room Template Camera                            | Infrastructure               | Additional Infrastructure Requirements  |
| Basic Requirement   | Required   | Medium  | YES NO  | YES                          | Clocks: One at foot of bed and visible from provider zone   |
| Headwall Provider zone  | Patient Station  | 4 (in 2 separate outlets)                                     |   |                              |   |
| Headwall Patient zone   |  | 2   |   |                              |   |
| Footwall  | Nurse Call Connection to display location.   | 4   |   |                              |   |
| General use (spacing / location specified)                                  | Pull Cord at patient chair   |   |   |                              |   |
| Bed   |  |   | 1   | Refer to Section 7.9.13.2(2) | Patient bed locations to have one (1) additional 2-gang box stubbed to cable tray   |
| Boom  |  |   | 1   | for details.                 |   |
| Ceiling   |  |   |   |                              | Hard ceiling rooms to have one (1) additional 2-gang box stubbed to cable tray  |
| Specialty, equipment specific   | Staff workflow station at room entry Audio station with pullcord and washroom pullcord station in ensuite. |   |   |                              | Additional data outlet(s) for specialty equipment or workstation  |

#### Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

|   |  | Room Template  | 3: Generic Proced   | ure Rooms                         |                                     |   |
|---|--|--|---|-----------------------------------|-------------------------------------|---|
| Lighting Function Types   | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting)                                       | Illuminance Targets (minimum average lux)  | Local   | Controls                          | Power Source                        | Notes / Other Requirements  |
| General Area Lighting   | Direct/indirect (ceiling)  | 500  | Room entry (dimming)  Conditional with selected Vital fixtures for safety |                                   |                                     | Illuminance targets must be met at hand hygiene sink when standing in front of it   |
| Exam Lighting, general  | Ceiling (over abdomen)   | 1000   | Provider zo   | ne (dimming)                      | Vital                               | Over specific body part related to room specialty when applicable   |
| Exam or surgical lighting, specific medical equipment                     | N/A (equipment-specific)   | N/A (equipment-specific)   | Equipme   | ent-specific                      | UPS                                 | Refer to equipment list, used where articulated light source needs to provide high light level with controlled beam   |
| Bedside Staff light   |  |  | T   | N/A                               |                                     |   |
| Patient Reading light   | Ceiling or wall-mount  | 300  |   | ne (dimming)                      | Vital                               | For EEG, EMG, Evoked Potentials room types only   |
| Workstation lighting Night light  | Ceiling<br>Wall-mount  | 750<br>30  | Patie   | ion (dimming)<br>nt zone,         | Conditional<br>Vital                | Amber colour, addressable control not required. For EEG, EMG, Evoked Potentials room types only.  |
| Observation lighting  |  |  | Roor  | n entry<br>N/A                    |                                     |   |
| Observation lighting Instrument processing lighting                       |  |  | C   | overed by General A               | Area Lighting                       |   |
| Visitor/Family zone lighting  |  |  |   | N/A                               | Area Eighting                       |   |
| Shower  |  |  |   | N/A                               |                                     |   |
| Specialty Lighting  | Ceiling  | As required for clinical needs   | Nursing contro  | l zone (dimming)                  | Vital                               | Green lighting coordinated with imaging equipment monitors.  Only required in "Procedure Room - General"  |
| Warning Lights (in-use / do not enter)                                    | Wall or ceiling mount in visible location outside  | High visibility with ambient lighting on   | Auto-energi   | zed by laser on                   | Vital                               | Required in rooms with laser  |
| Battery packs (backup unit lighting)                                      | Surface ceiling adjustable dual light heads  | 20   | 1   | N/A                               | Vital                               | Circuited from same vital lighting circuit in room, on dedicated outlet not listed under 'Power Outlet Locations'. Only required in Critical Care Areas   |
| Power Outlet Locations  | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                                       | # of duplex UPS outlets / circuits  |                                   | tlets / circuits                    | Notes / Other Requirements  |
| Headwall Provider zone  | 2/0.5  | 1/0.5  | 1/0.5 (for monitor)<br>1/1 (for ultrasound)                               |                                   |                                     | Monitor circuits may only be shared with other monitors. Monitor outlets to be on each boom in "Procedure Room - General" room types. When bed/stretcher is sideways against a wall, the headwall Provider zone requirements are at the Patient's head and the headwall Patient zone requirements are at the foot. 5-20R outlet for mobile ultrasound equipment |
| Headwall Patient zone   | 2/0.5  | 1/0.5  |   |                                   |                                     |   |
| Bed   |  | 1/0.5  |   |                                   |                                     | Required only when electric bed/stretcher required in room  |
| Patient Lift  |  | 1/0.5  |   |                                   |                                     | Required only when patient lift required in room  |
| Boom  | 2/0.5  | 1/0.5  |   |                                   |                                     | In "Procedure Room - General" room types only; quantities are per boom  |
| Housekeeping  Construction (specified)                                    | 1/0.5 counter GFCI receptacle at sink  | 1/0.5<br>1/0.5 per 3m of wall  |   |                                   |                                     | 5-20R outlet near room entry door   |
| General use (spacing / location specified)  Specialty, equipment specific | 1/0.3 counter GFCI receptacie at sink  | 170.3 per 3iii 0i wan  |   |                                   |                                     | Additional outlets and circuits to be provided for all items in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist   |
| Nursing control zone  |  |  |   |                                   |                                     |   |
| Observation room or station or area or ante room                          |  |  |   |                                   |                                     |   |
| Division 27   | Nurse Call   | Data Drop Quantity Structured Cabling Infrastructure Data Density (IMIT, PM, GI) | Multimedia<br>Room Template   | Clinical<br>Observation<br>Camera | Location Services<br>Infrastructure | Additional Infrastructure Requirements  |
| Basic Requirement   | Required   | As Appropriate   | YES   | YES                               | YES                                 | Clocks: One visible from provider zone  |
| Headwall Provider zone  | Patient Station  | 4 (in 2 separate outlets)  |   |                                   |                                     |   |
| Headwall Patient zone   |  | 2  |   |                                   |                                     |   |
| Footwall  | Nurse Call Connection to display location.   |  | -   |                                   |                                     |   |
| General use (spacing / location specified) Bed                            | Pull cord station at patient chair   | 4 at wall mounted display.   |   |                                   | Refer to Section 7.9.13.2(2)        | When bed/stretcher is islanded, requirements for headwall are to be relocated to boom   |
| Boom  | Staff Assist/Code station  |  | 1   |                                   | for details.                        |   |
| Ceiling   |  |  |   |                                   | Tor details.                        | Hard ceiling rooms to have one (1) additional 2-gang box stubbed to cable tray  |
| Specialty, equipment specific   | Staff workflow station at room entry<br>Audio station with pull cord and washroom pull<br>cord station in ensuite. | 4  |   |                                   |                                     | Additional data outlet(s) for specialty equipment or workstation  |

Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

|   |  | Room Template   | e 4: Generic Critica   | ıl Care Units                      |   |   |
|---|--|---|--|------------------------------------|---|---|
| Lighting Function Types                               | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting)                               | Illuminance Targets (minimum average lux)                     | Local  | Controls                           | Power Source                              | Notes / Other Requirements  |
| General Area Lighting                                 | Direct/indirect (ceiling)  | 500   | Patient zone (dimming), Conditional with selected Room entry (dimming) Vital fixtures for safety |                                    |   | Illuminance targets must be met at hand hygiene sink when standing in front of it   |
| Exam Lighting, general                                | Ceiling (over abdomen)   | 1000  |  | one (dimming),<br>vindow (dimming) | Vital                                     | Local and remote outside room (observation window) controls   |
| Exam or surgical lighting, specific medical equipment | N/A (equipment-specific)   | N/A (equipment-specific)                                      | Equipme  | ent-specific                       | UPS                                       | Refer to equipment list, used where articulated light source needs to provide high light level with controlled beam   |
| Bedside Staff light                                   | Ceiling or wall-mount  | 100   | Provider zo  | one (dimming)                      | Vital                                     |   |
| Patient Reading light                                 | Ceiling or wall-mount  | 300   | Patient zo   | ne (dimming)                       | Vital                                     |   |
| Workstation lighting                                  |  |   |  | N/A                                |   |   |
| Night light   | Wall-mount   | 30  |  | nt zone,<br>m entry                | Vital                                     | Amber colour, located approximately 1200mm AFF on both sides of bed   |
| Observation lighting                                  |  |   |  | N/A                                |   |   |
| Instrument processing lighting                        |  |   | 1  | N/A                                |   |   |
| Visitor/Family zone lighting                          | Ceiling or wall-mount  | 300   | Visitor/family   | zone (dimming)                     | Vital                                     |   |
| Shower  |  |   |  | N/A                                |   |   |
| Specialty Lighting                                    |  |   |  | N/A                                |   |   |
| Warning Lights (in-use / do not enter)                |  |   |  | N/A<br>N/A                         |   |   |
| Battery packs (backup unit lighting)                  |  |   |  | N/A                                |   |   |
| Power Outlet Locations                                | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                    | # of duplex UPS outlets / circuits   |                                    |   | Notes / Other Requirements  |
| Headwall Provider zone                                |  |   |  |                                    |   |   |
| Headwall Patient zone                                 |  | 4/0.5   |  |                                    |   |   |
| Bed<br>Dational life                                  |  | 1/0.5   |  |                                    |   | Deticat lift and had in some years may show some simplify   |
| Patient Lift  |  | 1/0.5   |  | 1/0.5 (for mo                      | nitor\                                    | Patient lift and bed in same room may share same circuit  Monitor circuit may only be shared with other monitors. Quantities are per boom, except                                       |
| Boom  | 4/3  | 2/1   |  | 1/1 (for ultras                    | •   | monitor/ultrasound outlets only required on one boom.   |
| Housekeeping  |  | 1/1   |  |                                    |   | 5-20R outlet near room entry  |
| General use (spacing / location specified)            | 1/0.5 per 3m of wall   | 1/0.5 per visitor/patient chair, workstation                  |  |                                    |   |   |
| Specialty, equipment specific                         |  |   |  |                                    |   | Additional outlets and circuits to be provided for all items in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist |
| Nursing control zone                                  |  |   |  |                                    |   |   |
| Observation room or station or area or ante room      | 1 per 1m of wall/2 per circuit   |   |  |                                    |   | Outlets noted are in addition to standard workstation requirements  |
|   |  | Data Drop Quantity  | Multimedia   | Clinical                           | Location Services                         |   |
| Division 27   | Nurse Call   | Structured Cabling Infrastructure Data Density (IMIT, PM, GI) | Room Template  | Observation<br>Camera              | Infrastructure                            | Additional Infrastructure Requirements  |
| Basic Requirement                                     | Required   | High  | YES  | NO                                 | YES                                       | Clocks: One visible from provider zone  |
| Headwall Provider zone                                | Patient Station  | 4 ( in 2 separate outlets)                                    |  |                                    |   |   |
| Headwall Patient zone                                 |  | 4 ( in 2 separate outlets)                                    |  |                                    |   |   |
| Footwall  | Nurse Call Connection to display location  | 4   |  |                                    |   |   |
| General use (spacing / location specified) Bed        | Pull Cord at patient chair   |   |  |                                    |   | Patient bed locations to have one (1) additional 2-gang box stubbed to cable tray   |
| Boom  | Staff Assist/Code station  |   | 1  |                                    | Refer to Section 7.9.13.2(2) for details. | When bed/stretcher is islanded, requirements for headwall are to be relocated to boom   |
| Ceiling   |  |   |  |                                    |   | Hard ceiling rooms to have one (1) additional 2-gang box stubbed to cable tray  |
| Specialty, equipment specific                         | Staff workflow station at room entry Audio station with pullcord and washroom pullcord station in ensuite. | 4   |  |                                    |   | Additional data outlet(s) for specialty equipment or workstation  |

#### Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

| Room Template 5: Generic Neonatal Intensive Care Unit (NICU) |  |   |                  |  |   |   |  |
|--|--|---|------------------|--|---|---|--|
| Lighting Function Types                                      | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting)                               | Illuminance Targets (minimum average lux)                     | Local C          | Controls   | Power Source                              | Notes / Other Requirements  |  |
| General Area Lighting  | Indirect (ceiling)   | 500   | Room Entry (dimm | Room Entry (dimming, colour tuning) Conditional with selected  Vital fixtures for safety |   | Illuminance targets must be met at hand hygiene sink when standing in front of it. Tuneable white lighting, 1% dimming required.  |  |
| Exam Lighting, general                                       | Ceiling (over bassinette)  | 1000  | Provider zor     | ne (dimming)   | Vital                                     | Local control of individual patient lighting  |  |
| Exam or surgical lighting, specific medical equipment        | N/A (equipment-specific)   | N/A (equipment-specific)                                      |                  | nt-specific  | UPS                                       | Refer to equipment list, used where articulated light source needs to provide high light level with controlled beam   |  |
| Bedside Staff light  | Ceiling or wall-mount  | 100   | Provider zor     | ne (dimming)   | Vital                                     |   |  |
| Patient Reading light  |  |   |                  | N/A  |   |   |  |
| Workstation lighting   |  | 20  | 1 5 5.           | N/A  | I   |   |  |
| Night light  | Wall-mount   | 30  | Room Entry       | ,  | Vital                                     | Amber colour, located approximately 1200mm AFF on both sides of bassinette  |  |
| Observation lighting Instrument processing lighting          |  |   |                  | N/A<br>N/A   |   |   |  |
| Visitor/Family zone lighting                                 |  |   |                  | N/A  |   |   |  |
| Shower   |  |   |                  | N/A  |   |   |  |
| Specialty Lighting   | N/A (equipment-specific)   | N/A (equipment-specific)                                      | Equipmer         | nt-specific  | Vital                                     | Phototherapy lighting   |  |
| Warning Lights (in-use / do not enter)                       |  |   |                  | N/A  |   | ., 5 5  |  |
| Battery packs (backup unit lighting)                         |  |   |                  | N/A  |   |   |  |
| Power Outlet Locations                                       | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                    | #                | of duplex UPS outl   |   | Notes / Other Requirements  |  |
| Headwall Provider zone                                       | 4/2  | 2/1   |                  | 1/0.5 (for mo<br>1/0.5 (for ultra  | sound)                                    | Monitor circuit may only be shared with other monitors. Ultrasound circuit may only be shared with other ultrasound outlets at the same patient location.                               |  |
| Headwall Patient zone  | 4/2  | 2/1   |                  | 1/0.5 (for mo<br>1/0.5 (for ultra  | •   | Monitor circuit may only be shared with other monitors. Ultrasound circuit may only be shared with other ultrasound outlets at the same patient location.                               |  |
| Bed  |  |   |                  |  |   |   |  |
| Patient Lift   |  |   |                  |  |   |   |  |
| Boom   |  | 4.44  |                  |  |   | 5.202   |  |
| Housekeeping General use (spacing / location specified)      | 1/0.5 (general) per 2m of wall   | 1/1<br>1/0.5 (general) per 2m of wall                         |                  |  |   | 5-20R near room entry, additional receptacles as required for coverage  Locate vital and conditional receptacles in same separated backbox  |  |
| Specialty, equipment specific                                | 1/0.3 (general) per 2m of wall   | 1,0.3 (general) per 2m or wan                                 |                  |  |   | Additional outlets and circuits to be provided for all items in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist |  |
| Nursing control zone   |  |   |                  |  |   |   |  |
| Observation room or station or area or ante room             |  |   |                  |  |   |   |  |
|  |  | Data Drop Quantity  | Multimedia       | Clinical   | Location Services                         |   |  |
| Division 27  | Nurse Call   | Structured Cabling Infrastructure Data Density (IMIT, PM, GI) | Room Template    | Observation<br>Camera  | Infrastructure                            | Additional Infrastructure Requirements  |  |
| Basic Requirement  | Required   | High  | YES              | YES  | YES                                       | Clocks: One visible from provider zone  |  |
| Headwall Provider zone                                       | Patient Station, Staff Assist/Code Pink station  | 6 (in 3 separate outlets)                                     |                  |  |   | Headwall data quantities apply to each headwall location in the room  |  |
| Headwall Patient zone  |  | 2   |                  |  |   |   |  |
| Footwall   | Nurse Call Connection to display location.   | 4   |                  |  |   |   |  |
| General use (spacing / location specified)                   | Pull Cord at patient chair   |   |                  | Airhorno Isolation   | Pofor to Section 7.0.13.3(2)              |   |  |
| Bed  |  |   | 1                | Rooms.   | Refer to Section 7.9.13.2(2) for details. |   |  |
| Boom   |  |   | _                | ROOMS.   | Tor details.                              |   |  |
| Ceiling  |  |   |                  |  |   | Hard ceiling rooms to have one (1) additional 2-gang box stubbed to cable tray  |  |
| Specialty, equipment specific                                | Staff workflow station at room entry Audio station with pullcord and washroom pullcord station in ensuite. | 8   |                  |  |   | Additional data outlet(s) for bassinettes or workstation  |  |

#### Legend:

IMIT: IMIT Data Network PM: Physiological Monitoring Network GI: Guest Infotainment Network

|   |  | Room Template 6: L   | abour & Delivery /          | / Patient Room - SRI                        | MC  |  |
|---|--|--|-----------------------------|---|---|--|
| Lighting Function Types                               | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting)                               | Illuminance Targets (minimum average lux)  | Local                       | Controls                                    | Power Source                              | Notes / Other Requirements   |
| General Area Lighting                                 | Ceiling, surface-mount   | 500  |                             | ne (dimming),<br>ry (dimming)               | 50% Vital, 50% Conditional                | Illuminance targets must be met at hand hygiene sink when standing in front of it. Use high-end residential style fixtures for patient comfort   |
| Exam Lighting, general                                | Ceiling (over pelvis)  | 1000   | Provider zo                 | one (dimming)                               | Vital                                     |  |
| Exam or surgical lighting, specific medical equipment | N/A (equipment-specific)   | N/A (equipment-specific)   | Equipme                     | ent-specific                                | UPS                                       | Refer to equipment list, used where articulated light source needs to provide high light level with controlled beam  |
| Bedside Staff light                                   | Ceiling or wall-mount  | 100  | Provider zo                 | one (dimming)                               | Vital                                     |  |
| Patient Reading light                                 | Ceiling or wall-mount  | 300  | Patient zo                  | ne (dimming)                                | Vital                                     |  |
| Workstation lighting                                  |  |  |                             | N/A   | A   |  |
| Night light   | Wall-mount (Patient zone & Provider zone)  | 30   | Patient zon                 | e, Room entry                               | Vital                                     | Amber colour, located approximately 1200mm AFF on both sides of bed and between bed and washroom   |
| Observation lighting                                  |  |  |                             | N/A   | A   |  |
| Instrument processing lighting                        |  |  |                             | N/A   | A   |  |
| Visitor/Family zone lighting                          | Ceiling or wall-mount  | 300  |                             | zone (dimming)                              | Vital                                     |  |
| Shower  | Ceiling  | 200  |                             | N/A   | Vital                                     | Applicable to tub areas  |
| Specialty Lighting                                    | Ceiling  | 750  | Provider zo                 | one (dimming)                               | Vital                                     | Bassinette lighting - diffuse & even lighting over entire bassinette   |
| Warning Lights (in-use / do not enter)                |  |  |                             | N/A   | A   |  |
| Battery packs (backup unit lighting)                  |  |  |                             | N/A   | A   |  |
| Power Outlet Locations                                | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                                       |                             | # of duplex UPS out                         | lets / circuits                           | Notes / Other Requirements   |
| Headwall Provider zone                                | 4/4  | 2/1  |                             | 1/0.5 (for monitor)<br>1/1 (for ultrasound) |   | Monitor circuit may only be shared with other monitors   |
| Headwall Patient zone                                 | 4/2  | 1/0.5  |                             |   |   | Circuits may be shared with Provider zone  |
| Bed   |  | 1/0.5  |                             |   |   |  |
| Patient Lift  |  | 1/0.5  |                             |   |   | Patient lift and bed in same room may share same circuit   |
| Boom  |  |  |                             |   |   |  |
| Housekeeping  |  | 1/1  |                             |   |   | 5-20R outlet near room entry   |
| General use (spacing / location specified)            | 1/0.5 per 3m of wall   | 1/0.5 per visitor/patient chair, workstation                                     |                             |   |   |  |
| Specialty, equipment specific                         | 2/2 (located at bassinette, general use)   | 1/1 (located at bassinette, general use)   |                             | 1/0.5 (for monitor a                        | t bassinette)                             | Additional outlets and circuits to be provided for all items in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist. Outlet quantities shown are per side of bassinette, to allow for twins.   |
| Nursing control zone                                  |  |  |                             |   |   | , and the second |
| Observation room or station or area or ante room      |  |  |                             |   |   |  |
| Division 27   | Nurse Call   | Data Drop Quantity Structured Cabling Infrastructure Data Density (IMIT, PM, GI) | Multimedia<br>Room Template | Clinical<br>Observation<br>Camera           | Location Services<br>Infrastructure       | Additional Infrastructure Requirements   |
| Basic Requirement                                     | Required   | High   | YES                         | NO  | YES                                       | One elapsed time clock with count up/down timer and one standard 24 hour clock foot of bed and visible from provider zone  |
| Headwall Provider zone                                | Patient Station, Staff Assist/Code Pink station  | 6 (in 3 separate outlets)  |                             |   |   | Headwall data quantities apply to each headwall location in the room   |
| Headwall Patient zone                                 |  | 2  |                             |   |   |  |
| Footwall  | Nurse Call Connection to display location  | 4  |                             |   |   | Wall-mounted display locations to have one (1) additional 2-gang box connected to 2-gang box behind display  |
| General use (spacing / location specified)            | Pull Cord at patient chair<br>Staff Assist/Code Pink station at each bassinette                            |  | 1                           |   | Refer to Section 7.9.13.2(2) for details. |  |
| Bed   |  |  |                             |   | ioi actalis.                              | Patient bed locations to have one (1) additional 2-gang box stubbed to cable tray  |
| Boom  |  | 4  |                             |   |   |  |
| Ceiling   |  |  |                             |   |   | Hard ceiling rooms to have one (1) additional 2-gang box stubbed to cable tray   |
| Specialty, equipment specific                         | Staff workflow station at room entry Audio station with pullcord and washroom pullcord station in ensuite. | 8  |                             |   |   | Additional data outlet(s) for bassinettes or workstation   |

#### Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

|   |  | Room Template 7 :   | Generic Renal Dial | ysis or Infusion Bed             | l/Stretcher   |   |  |
|---|--|---|--------------------|----------------------------------|---|---|--|
| Lighting Function Types                               | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting)                               | Illuminance Targets (minimum average lux)                     | Local              | Controls                         | Power Source  | Notes / Other Requirements  |  |
| General Area Lighting                                 | Direct/indirect (ceiling)  | 300   |                    | ation (dimming),<br>or (dimming) | Conditional with selected Vital fixtures for safety | Illuminance targets must be met at hand hygiene sink when standing in front of it   |  |
| Exam Lighting, general                                | Ceiling, recessed (over abdomen)   | 1000  | Provider zo        | ne (dimming)                     | Vital   | Spill light to adjacent stretcher bays to be minimised  |  |
| Exam or surgical lighting, specific medical equipment |  |   |                    |                                  | N/A   |   |  |
| Bedside Staff light                                   |  |   |                    | Covered                          | by Exam Lighting                                    |   |  |
| Patient Reading light                                 | Ceiling or wall-mount  | 300   | Patient zor        | ne (dimming)                     | Vital   | Spill light to adjacent stretcher bays to be minimised  |  |
| Workstation lighting                                  |  |   |                    |                                  | N/A   |   |  |
| Night light   |  |   |                    |                                  | N/A   |   |  |
| Observation lighting                                  |  |   |                    |                                  | N/A   |   |  |
| Instrument processing lighting                        |  |   |                    |                                  | N/A   |   |  |
| Visitor/Family zone lighting                          |  |   |                    |                                  | N/A   |   |  |
| Shower  |  |   |                    |                                  | N/A   |   |  |
| Specialty Lighting                                    |  |   |                    |                                  | N/A   |   |  |
| Warning Lights (in-use / do not enter)                |  |   |                    |                                  | N/A   |   |  |
| Battery packs (backup unit lighting)                  |  |   |                    |                                  | N/A   |   |  |
| Power Outlet Locations                                | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                    |                    | # of duplex UPS ou               | tlets / circuits                                    | Notes / Other Requirements  |  |
| Headwall Provider zone                                | 3/3 (two duplex 5-20R)   |   |                    | 1/0.5 (for monitor)              |   | Monitor circuit may only be shared with other monitors, 5-20R dialysis outlets may be on same circuit at same bed/stretcher/chair (with one on each side)                               |  |
| Headwall Patient zone                                 | 3/3 (two duplex 5-20R)   |   |                    |                                  |   | 5-20R dialysis outlets may be on same circuit at same bed/stretcher/chair (with one on each side)   |  |
| Bed   |  | 1/0.5   |                    |                                  |   |   |  |
| Patient Lift  |  | 1/0.5   |                    |                                  |   | When patient lift required, patient lift and bed in same stretcher bay may share same circuit   |  |
| Boom  |  |   |                    |                                  |   |   |  |
| Housekeeping  |  | 1/0.3   |                    |                                  |   | 5-20R as required throughout department   |  |
| General use (spacing / location specified)            |  | 1/0.5 per visitor/patient chair, workstation                  |                    |                                  |   |   |  |
| Specialty, equipment specific                         |  |   |                    |                                  |   | Additional outlets and circuits to be provided for all items in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist |  |
| Nursing control zone                                  |  |   |                    |                                  |   |   |  |
| Observation room or station or area or ante room      |  |   |                    |                                  |   |   |  |
| 2111 22   |  | Data Drop Quantity  | Multimedia         | Clinical                         | Location Services                                   |   |  |
| Division 27   | Nurse Call   | Structured Cabling Infrastructure Data Density (IMIT, PM, GI) | Room Template      | Observation<br>Camera            | Infrastructure                                      | Additional Infrastructure Requirements  |  |
| Basic Requirement                                     | Required   | Medium  | YES                | NO                               | YES   | Clocks: In corridor and visible from provider zone with curtains in open position   |  |
| Headwall Provider zone                                | Patient Station  | 4 (in 2 separate outlets)                                     |                    |                                  |   |   |  |
| Headwall Patient zone                                 |  | 2   |                    |                                  |   |   |  |
| Footwall  | Nurse Call Connection to display location  | 4   |                    |                                  |   |   |  |
| General use (spacing / location specified)            | Pull Cord at patient chair   |   |                    |                                  |   |   |  |
| Bed   |  |   | 4                  | Refer to Section 7.9.13.2(2)     |   |   |  |
| Boom  |  |   | 1                  |                                  | for details.  |   |  |
| Ceiling   |  |   |                    |                                  |   | Hard ceiling rooms to have one (1) additional 2-gang box stubbed to cable tray  |  |
| Specialty, equipment specific                         | Staff workflow station at room entry Audio station with pullcord and washroom pullcord station in ensuite. | 2   |                    |                                  |   | Additional data outlet(s) for specialty equipment or workstation  |  |

Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

|   |  | Room Template 8: Generic                                       | Procedure Rooms  | - Endoscopy, Bronc    | hoscopy   |   |
|---|--|--|--|-----------------------|---|---|
| Lighting Function Types                               | Lighting method (direct, indirect, wall-<br>mount, ceiling-mount, task lighting) | Illuminance Targets (minimum average lux)                      |  | Controls              | Power Source  | Notes / Other Requirements  |
| General Area Lighting                                 | Direct/indirect (ceiling)  | 500  | Room entry (dimming)  Conditional with selected  Vital fixtures for safety |                       | Conditional with selected Vital fixtures for safety | Illuminance targets must be met at hand hygiene sink when standing in front of it   |
| Exam Lighting, general                                | Ceiling (over abdomen)   | 1000   | Provider zo  | ne (dimming)          | Vital   | Over specific body part related to room specialty when applicable   |
| Exam or surgical lighting, specific medical equipment | N/A (equipment-specific)   | N/A (equipment-specific)                                       | Equipme  | ent-specific          | UPS   | Refer to equipment list, used where articulated light source needs to provide high light level with controlled beam   |
| Bedside Staff light                                   |  |  |  | N/                    |   |   |
| Patient Reading light                                 |  |  | •  | N/A                   |   |   |
| Workstation lighting                                  | Ceiling  | 750  | At workstat  | ion (dimming)         | Conditional   |   |
| Night light   |  |  |  | N/A                   |   |   |
| Observation lighting                                  |  |  |  | N/A                   |   |   |
| Instrument processing lighting                        |  |  |  | Covered by Gener      |   |   |
| Visitor/Family zone lighting                          |  |  |  | N/A                   |   |   |
| Shower  |  |  | T  | N/A                   |   |   |
| Specialty Lighting                                    | Ceiling  | As required for clinical needs                                 |  | I zone (dimming)      | Vital   | Green lighting coordinated with imaging equipment monitors  |
| Warning Lights (in-use / do not enter)                | Wall or ceiling mount in visible location  | High visibility with ambient lighting on                       | Auto-energiz   | zed by laser on       | Vital   | Required in rooms with laser  |
| Battery packs (backup unit lighting)                  | Surface ceiling adjustable dual light heads                                      | 20   | 1  | I/A                   | Vital   | Circuited from same vital lighting circuit in room, on dedicated outlet not listed under 'Power Outlet Locations'   |
| Power Outlet Locations                                | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                     | 1  | of duplex UPS out     | :lets / circuits                                    | Notes / Other Requirements  |
| Headwall Provider zone                                | 2/0.5  | 1/0.5  | 1/1 (for ultrasound)   |                       |   | When bed/stretcher is sideways against a wall, the headwall Provider zone requirements are at the Patient's head and the headwall Patient zone requirements are at the foot             |
| Headwall Patient zone                                 | 2/0.5  | 1/0.5  |  |                       |   |   |
| Bed   |  | 1/0.5  |  |                       |   | Required only when electric bed/stretcher required in room  |
| Patient Lift  |  | 1/0.5  |  |                       |   | Required only when patient lift required in room  |
| Boom  | 2/0.5  | 1/0.5  |  | 1/0.5 (for mo         | onitor)   | Monitor circuits may only be shared with other monitors. Quantities are per boom.   |
| Housekeeping  |  | 1/0.5  |  |                       |   | 5-20R outlet near room entry door   |
| General use (spacing / location specified)            | 1/0.5 counter GFCI receptacle at sink  | 1/0.5 per 3m of wall   |  |                       |   | ,   |
| Specialty, equipment specific                         |  | · ·  |  |                       |   | Additional outlets and circuits to be provided for all items in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist |
| Nursing control zone                                  |  |  |  |                       |   |   |
| Observation room or station or area or ante room      |  |  |  |                       |   |   |
|   |  | Data Drop Quantity   |  | Clinical              |   |   |
| Division 27   | Nurse Call   | Structured Cabling Infrastructure  Data Density (IMIT, PM, GI) | Multimedia<br>Room Template  | Observation<br>Camera | Location Services<br>Infrastructure                 | Additional Infrastructure Requirements  |
| Basic Requirement                                     | Required   | High   | YES  | YES                   | YES   | Clocks: One visible from provider zone  |
| Headwall Provider zone                                |  |  |  |                       |   |   |
| Headwall Patient zone                                 |  |  |  |                       |   |   |
| Footwall  |  |  |  |                       |   |   |
| General use (spacing / location specified)            | Staff Assist/Code Station  | 4 at wall mounted display.                                     |  |                       |   | Staff Assist/Code Station to be provided at each nursing control zone   |
| Bed   |  |  | 1  |                       | Refer to Section 7.9.13.2(2) for details.           | When bed/stretcher is islanded, requirements for headwall are to be relocated to boom   |
| Boom  | Staff Assist/Code Station  | 6 per boom   |  |                       |   |   |
| Ceiling   |  | ·  |  |                       |   | Hard ceiling rooms to have one (1) additional 2-gang box stubbed to cable tray  |
| Specialty, equipment specific                         | Staff workflow station at nursing control zone                                   | 8  |  |                       |   | Additional data outlet(s) for specialty equipment or workstation  |

#### Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

|   | Room Template 9: Holding Stretchers (Preop, Recovery, EMS)                   |  |                             |                                   |   |   |  |  |  |  |
|---|--|--|-----------------------------|-----------------------------------|---|---|--|--|--|--|
| Lighting Function Types   | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting) | Illuminance Targets (minimum average lux)  | Local (                     | Controls                          | Power Source  | Notes / Other Requirements  |  |  |  |  |
| General Area Lighting   | Direct/indirect (ceiling)  | 300  | Care Team Sta               | ation (dimming)                   | Conditional with selected Vital fixtures for safety | Illuminance targets must be met at hand hygiene sink when standing in front of it   |  |  |  |  |
| Exam Lighting, general  | Ceiling (over abdomen)   | 1000   | Provider zo                 | ne (dimming)                      | Vital   | Spill light to adjacent stretcher bays to be minimized  |  |  |  |  |
| Exam or surgical lighting, specific medical equipment                     |  | N/A  |                             |                                   |   |   |  |  |  |  |
| Bedside Staff light   |  |  |                             | Covere                            | ed by Exam Lighting                                 |   |  |  |  |  |
| Patient Reading light   |  |  |                             |                                   | N/A   |   |  |  |  |  |
| Workstation lighting  |  |  |                             |                                   | N/A   |   |  |  |  |  |
| Night light   |  |  |                             |                                   | N/A   |   |  |  |  |  |
| Observation lighting  |  |  |                             |                                   | N/A   |   |  |  |  |  |
| Instrument processing lighting  |  |  |                             |                                   | N/A   |   |  |  |  |  |
| Visitor/Family zone lighting  |  |  |                             |                                   | N/A   |   |  |  |  |  |
| Shower  |  |  |                             |                                   | N/A   |   |  |  |  |  |
| Specialty Lighting  |  |  |                             |                                   | N/A   |   |  |  |  |  |
| Warning Lights (in-use / do not enter)                                    |  |  |                             |                                   | N/A   |   |  |  |  |  |
| Battery packs (backup unit lighting)                                      |  |  |                             |                                   | N/A   |   |  |  |  |  |
| Power Outlet Locations  | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                                       | #                           | of duplex UPS out                 | lets / circuits                                     | Notes / Other Requirements  |  |  |  |  |
| Headwall Provider zone  | 2/1  |  | 1/0.5 (for monitor)         |                                   | onitor)   | Monitor circuit may only be shared with other monitors  |  |  |  |  |
| Headwall Patient zone   | 2/1  |  |                             |                                   |   | Circuits may be shared with Provider zone   |  |  |  |  |
| Bed   |  | 1/0.5  |                             |                                   |   |   |  |  |  |  |
| Patient Lift  |  | 1/0.5  |                             |                                   |   | When patient lift required, patient lift and bed in same stretcher bay may share same circuit   |  |  |  |  |
| Boom  |  | 4/0.0  |                             |                                   |   |   |  |  |  |  |
| Housekeeping  |  | 1/0.3  |                             |                                   |   | 5-20R outlets as required throughout department   |  |  |  |  |
| General use (spacing / location specified)  Specialty, equipment specific |  |  |                             |                                   |   | Additional outlets and circuits to be provided for all items in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist |  |  |  |  |
| Nuving control rope   |  |  |                             |                                   |   | mobile items where sufficient general use outlets exist   |  |  |  |  |
| Nursing control zone  |  |  |                             |                                   |   |   |  |  |  |  |
| Observation room or station or area or ante room                          |  | Data Dana Garatita   |                             |                                   |   |   |  |  |  |  |
| Division 27   | Nurse Call   | Data Drop Quantity Structured Cabling Infrastructure Data Density (IMIT, PM, GI) | Multimedia<br>Room Template | Clinical<br>Observation<br>Camera | Location Services<br>Infrastructure                 | Additional Infrastructure Requirements  |  |  |  |  |
| Basic Requirement   | Required   | Medium   | NO                          | NO                                | YES   | Clocks: In corridor and visible from provider zone with curtains in open position   |  |  |  |  |
| Headwall Provider zone  | Patient Station  | 4 (in 2 separate outlets)  |                             |                                   |   |   |  |  |  |  |
| Headwall Patient zone   |  | 2  |                             |                                   |   |   |  |  |  |  |
| Footwall  |  |  |                             |                                   |   |   |  |  |  |  |
| General use (spacing / location specified)                                |  |  |                             |                                   | Refer to Section 7.9.13.2(2)                        |   |  |  |  |  |
| Bed   |  |  |                             |                                   | for details.  |   |  |  |  |  |
| Boom  |  |  |                             |                                   |   |   |  |  |  |  |
| Ceiling   |  |  |                             |                                   |   | Hard ceiling rooms to have one (1) additional 2-gang box stubbed to cable tray  |  |  |  |  |
| Specialty, equipment specific   | Staff workflow station at entry  | 2  |                             |                                   |   | Additional data outlet(s) for specialty equipment or workstation  |  |  |  |  |

#### Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

| Room Template 10: Generic Operating Room (OR), Interventional Suite |  |   |   |   |                                     |   |  |  |
|---|--|---|---|---|-------------------------------------|---|--|--|
| Lighting Function Types   | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting) | Illuminance Targets (minimum average lux)                     | Local   | l Controls                                      | Power Source                        | Notes / Other Requirements  |  |  |
| General Area Lighting   | Direct (ceiling)   | 750   | Nursing control zone (dimming), Room entry (dimming) 75% Vital, 25% UPS |   |                                     | No part of room less than 500lux  |  |  |
| Exam Lighting, general  | Ceiling (over operating table)   | 1000  | Nursing contr   | ol zone (dimming)                               | Vital                               |   |  |  |
| Exam or surgical lighting, specific medical equipment               | N/A (equipment-specific)   | N/A (equipment-specific)                                      | Equipm  | ent-specific                                    | UPS                                 | Refer to equipment list, used where articulated light source needs to provide high light level with controlled beam   |  |  |
| Bedside Staff light   | Ceiling  | 300   | Nursing contr   | ol zone (dimming)                               | Vital                               | Controlled beam to avoid spill light to rest of room  |  |  |
| Patient Reading light   |  |   |   | N/A   |                                     |   |  |  |
| Workstation lighting  |  |   |   | N/A<br>N/A                                      |                                     |   |  |  |
| Night light Observation lighting                                    |  |   |   | N/A<br>N/A                                      |                                     |   |  |  |
| Instrument processing lighting                                      |  |   |   | N/A   |                                     |   |  |  |
| Visitor/Family zone lighting  |  |   |   | N/A   |                                     |   |  |  |
| Shower  |  |   |   | N/A   |                                     |   |  |  |
| Specialty Lighting  | Ceiling  | As required for clinical needs                                |   | ol zone (dimming)                               | Vital                               | Green lighting coordinated with imaging equipment monitors  |  |  |
| Warning Lights (in-use / do not enter)                              | Wall or ceiling mount in visible location outside entry doors                | High visibility with ambient lighting on                      |   | ed by equipment & rsing control zone            | Vital                               |   |  |  |
| Battery packs (backup unit lighting)                                | Surface ceiling adjustable dual light heads                                  | 20  |   | N/A   | Vital                               | Circuited from same vital lighting circuit in room, on dedicated outlet not listed under 'Power Outlet Locations'   |  |  |
| Power Outlet Locations  | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                    | # of duplex UPS outlets / circuits                                      |   |                                     | Notes / Other Requirements  |  |  |
| Headwall Provider zone  | 2/2  | 1/1   |   | 1/0.5 (for mo                                   | nitor)                              | In C-Section OR only, located at bassinette   |  |  |
| Headwall Patient zone   |  |   |   |   |                                     |   |  |  |
| Bed   |  |   |   |   |                                     |   |  |  |
| Patient Lift  |  |   |   | 6/2/gonor                                       | 2 \                                 |   |  |  |
| Boom  | 2/2  |   |   | 6/3 (general)<br>1/1 (L6-30R outlet)            |                                     | 3 laser outlets in same OR may share a common circuit. Quantities are per boom.   |  |  |
| Housekeeping  | 1/1  |   |   |   |                                     | 5-20R outlet near room entry, additional receptacles as required for coverage   |  |  |
| General use (spacing / location specified)                          | 1/0.5 per 1 m of wall  | 1/0.5 per 1 m of wall   |   |   |                                     | Outlets to be in groups of four duplex (2V, 2C), each on a different circuit  |  |  |
| Specialty, equipment specific                                       |  |   | 1   | . per touch down or Pa<br>ition to normal works |                                     | Additional outlets and circuits to be provided for each item in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist. Locate equipment outlets beside grouped wall outlets as much as possible |  |  |
| Nursing control zone  | 2/1  |   |   |   |                                     |   |  |  |
| Observation room or station or area or ante room                    |  |   |   |   |                                     |   |  |  |
|   |  | Data Drop Quantity  |   |   |                                     |   |  |  |
| Division 27   | Nurse Call   | Structured Cabling Infrastructure Data Density (IMIT, PM, GI) | Multimedia Room Template  | Clinical Observation<br>Camera                  | Location Services<br>Infrastructure | Additional Infrastructure Requirements  |  |  |
| Basic Requirement   | Required   | High  | YES   | NO  | YES                                 | Clocks: One elapsed time clock with count up/down timer and one standard 24 hour clock  |  |  |
| Headwall Provider zone  | Staff Assist/Code station  | 4   |   |   |                                     | Headwall requirements apply to C-Section OR's.  |  |  |
| Headwall Patient zone   |  |   |   |   |                                     |   |  |  |
| Footwall  |  |   |   |   |                                     |   |  |  |
| General use (spacing / location specified)                          | Staff Assist/Code Station  | 6 (in 3 separate outlets)                                     |   |   |                                     | Staff Assist/Code Station to be provided at each nursing control zone   |  |  |
| Bed<br>Boom   | Staff Assist/Code Station  | 6 per boom  | 1   |   | Refer to Section 7.9.13.2(2)        |   |  |  |
| Ceiling   | Stall Assist/Code Station  | o per boom  | -   |   | for details.                        | Hard ceiling rooms to have one (1) additional 2-gang box stubbed to cable tray  |  |  |
| Centrig   |  |   | -   |   |                                     | Tide decising rooms to have one (1) additional 2 gaing box stubbed to cable tray  |  |  |
| Specialty, equipment specific                                       | Staff workflow station at nursing control zone                               | 6 (specialty equipment or workstation)<br>4 per display wall  |   |   |                                     | Additional data outlet(s) for specialty equipment or workstation.   |  |  |

#### Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

| Room Template 11: Exam/Treatment Room-Resuscitation   |  |   |                             |                                   |                                     |   |  |  |
|---|--|---|-----------------------------|-----------------------------------|-------------------------------------|---|--|--|
| Lighting Function Types                               | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting) | Illuminance Targets (minimum average lux)                     |                             | Controls                          | Power Source                        | Notes / Other Requirements  |  |  |
| General Area Lighting                                 | Direct (ceiling)   | 1000  |                             | l zone (dimming),<br>ry (dimming) | 75% Vital, 25% UPS                  | No part of room less than 500lux, separate control for each stretcher as well as perimeter of room  |  |  |
| Exam Lighting, general                                |  |   |                             | N/A                               |                                     |   |  |  |
| Exam or surgical lighting, specific medical equipment | N/A (equipment-specific)   | N/A (equipment-specific)                                      | Equipme                     | ent-specific                      | UPS                                 | Refer to equipment list, used where articulated light source needs to provide high light level with controlled beam   |  |  |
| Bedside Staff light                                   | Ceiling  | 300   | Provider zo                 | one (dimmer)                      | Vital                               | At charting workstation, controlled beam to avoid spill light to rest of room   |  |  |
| Patient Reading light                                 |  |   |                             | N/A                               |                                     |   |  |  |
| Workstation lighting                                  |  |   |                             | N/A                               |                                     |   |  |  |
| Night light   |  |   |                             | N/A                               |                                     |   |  |  |
| Observation lighting                                  |  |   |                             | N/A                               |                                     |   |  |  |
| Instrument processing lighting                        |  |   |                             | N/A                               |                                     |   |  |  |
| Visitor/Family zone lighting                          |  |   |                             | N/A                               |                                     |   |  |  |
| Shower  |  |   |                             | N/A                               |                                     |   |  |  |
| Specialty Lighting                                    |  |   |                             | N/A                               | 1                                   |   |  |  |
| Warning Lights (in-use / do not enter)                | Wall or ceiling mount in visible location outside entry doors                | High visibility with ambient lighting on                      | _                           | I by equipment & ing control zone | Vital                               |   |  |  |
| Battery packs (backup unit lighting)                  | Surface ceiling adjustable dual light heads                                  | 20  | ١                           | N/A                               | Vital                               | Circuited from same vital lighting circuit in room, on dedicated outlet not listed under 'Power Outlet Locations'   |  |  |
| Power Outlet Locations                                | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                    | #                           | of duplex UPS out                 | lets / circuits                     | Notes / Other Requirements  |  |  |
| Headwall Provider zone                                |  |   |                             |                                   |                                     |   |  |  |
| Headwall Patient zone                                 |  |   |                             |                                   |                                     |   |  |  |
| Bed   |  |   |                             |                                   |                                     |   |  |  |
| Patient Lift  |  |   |                             |                                   |                                     |   |  |  |
| Boom  | 2/2  |   |                             | 6/3 (gener<br>1/1 (L6-30R outlet  |                                     | Laser outlets at same stretcher may share a common circuit. Quantities are per boom.  |  |  |
| Housekeeping  | 1/1  |   |                             |                                   |                                     | 5-20R outlet near room entry, additional receptacles as required for coverage   |  |  |
| General use (spacing / location specified)            | 1/0.5 per 1 m of wall  | 1/0.5 per 1 m of wall   |                             |                                   |                                     | Outlets to be in groups of four duplex (2V, 2C), each on a different circuit  |  |  |
| Specialty, equipment specific                         |  |   |                             |                                   |                                     | Additional outlets and circuits to be provided for each item in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist. Locate equipment outlets beside grouped wall outlets as much as possible |  |  |
| Nursing control zone                                  | 2/1  |   |                             |                                   |                                     |   |  |  |
| Observation room or station or area or ante room      |  |   |                             |                                   |                                     |   |  |  |
|   |  | Data Drop Quantity  |                             | Clinical                          |                                     |   |  |  |
| Division 27   | Nurse Call   | Structured Cabling Infrastructure Data Density (IMIT, PM, GI) | Multimedia<br>Room Template | Observation                       | Location Services<br>Infrastructure | Additional Infrastructure Requirements  |  |  |
| Basic Requirement                                     | Required   | High  | YES                         | YES                               | YES                                 | One elapsed time clock with count up/down timer and one standard 24 hour clock (per stretcher)  |  |  |
| Headwall Provider zone                                | Patient Station  |   |                             |                                   |                                     | Provide one Patient Station for each Patient location in the room.  |  |  |
| Headwall Patient zone                                 |  |   |                             |                                   |                                     |   |  |  |
| Footwall  |  |   |                             |                                   |                                     |   |  |  |
| General use (spacing / location specified)            | Staff Assist/Code Station  | 6 (in 3 separate outlets)                                     |                             |                                   |                                     | Staff Assist/Code Station to be provided at each nursing control zone   |  |  |
| Bed   |  |   | 1                           |                                   | Refer to Section 7.9.13.2(2)        |   |  |  |
| Boom  | Staff Assist/Code Station  | 6 per boom  |                             |                                   | for details.                        |   |  |  |
| Ceiling   |  |   |                             |                                   |                                     | Hard ceiling rooms to have one (1) additional 2-gang box stubbed to cable tray  |  |  |
| Specialty, equipment specific                         | Staff workflow station at nursing control zone                               | 6 (specialty equipment or workstation)<br>4 per display wall  |                             |                                   |                                     | Additional data outlet(s) for specialty equipment or workstation  |  |  |

#### Legend:

IMIT: IMIT Data Network

PM: Physiological Monitoring Network GI: Guest Infotainment Network

|   | Room Template 12: Generic Computed Tomography Scan Room (CT)                 |  |                                    |                                   |   |   |  |  |
|---|--|--|------------------------------------|-----------------------------------|---|---|--|--|
| Lighting Function Types                               | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting) | Illuminance Targets (minimum average lux)  | Local (                            | Controls                          | Power Source  | Notes / Other Requirements  |  |  |
| General Area Lighting                                 | Direct/indirect (ceiling)  | 500  |                                    | ry (dimming),<br>om (dimming)     | Conditional with selected Vital fixtures for safety | Illuminance targets must be met at hand hygiene sink when standing in front of it, no part of room less than 300lux   |  |  |
| Exam Lighting, general                                | Ceiling (over entire body)   | 500  |                                    | ry (dimming),<br>om (dimming)     | Vital   | This function could be integrated with vision panels  |  |  |
| Exam or surgical lighting, specific medical equipment | N/A (equipment-specific)   | N/A (equipment-specific)   | Equipme                            | ent-specific                      | UPS   | Refer to equipment list, used where articulated light source needs to provide high light level with controlled beam   |  |  |
| Bedside Staff light                                   |  |  |                                    | N/A                               |   |   |  |  |
| Patient Reading light                                 |  |  |                                    | N/A                               |   |   |  |  |
| Workstation lighting                                  |  |  |                                    | N/A                               |   |   |  |  |
| Night light   |  |  |                                    | N/A                               |   |   |  |  |
| Observation lighting                                  |  |  |                                    | N/A                               |   |   |  |  |
| Instrument processing lighting                        |  |  |                                    | N/A<br>N/A                        |   |   |  |  |
| Visitor/Family zone lighting                          |  |  |                                    | N/A                               |   |   |  |  |
| Shower Specialty Lighting                             | Flush ceiling vision panels  | 500  | Control roo                        | om (dimming)                      | Vital   | Custom replaceable graphic film required over entire gantry in pre-scan position  |  |  |
| Specialty Lighting                                    | Wall or ceiling mount in visible location outside                            |  |                                    | by equipment &                    | Vildi   | Custom replaceable graphic initi required over entire gantry in pre-scan position   |  |  |
| Warning Lights (in-use / do not enter)                | entry doors  | High visibility with ambient lighting on   | _                                  | room entry                        | Vital   | Cincuited from a constituted linking singuiting and   |  |  |
| Battery packs (backup unit lighting)                  | Surface ceiling adjustable dual light heads                                  | 20   | N                                  | I/A                               | Vital   | Circuited from same vital lighting circuit in room, on dedicated outlet not listed under 'Power Outlet Locations'   |  |  |
| Power Outlet Locations                                | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                                       | # of duplex UPS outlets / circuits |                                   |   | Notes / Other Requirements  |  |  |
| Headwall Provider zone                                |  |  |                                    |                                   |   |   |  |  |
| Headwall Patient zone                                 |  |  |                                    |                                   |   |   |  |  |
| Bed   |  |  |                                    |                                   |   |   |  |  |
| Patient Lift  |  | 1/0.5  |                                    |                                   |   | Required only when patient lift required in room  |  |  |
| Boom  | 2/1  | . (0.7   |                                    | 2/1                               |   |   |  |  |
| Housekeeping  | 4/0.2 2  | 1/0.5  |                                    |                                   |   | 5-20R outlet near each room entry door  |  |  |
| General use (spacing / location specified)            | 1/0.3 per 3m of wall,<br>1/0.5 counter GFCI receptacle at sink               |  |                                    |                                   |   | One outlet positioned close to gantry (midway) on sidewall, and one on each end wall  |  |  |
| Specialty, equipment specific                         |  |  |                                    |                                   |   | Additional outlets and circuits to be provided for each item in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist |  |  |
| Nursing control zone                                  |  |  |                                    |                                   |   |   |  |  |
| Observation room or station or area or ante room      |  |  |                                    |                                   |   | Refer to Room Template 18 for imaging control room requirements   |  |  |
| Division 27   | Nurse Call   | Data Drop Quantity Structured Cabling Infrastructure Data Density (IMIT, PM, GI) | Multimedia<br>Room Template        | Clinical<br>Observation<br>Camera | Location Services<br>Infrastructure                 | Additional Infrastructure Requirements  |  |  |
| Basic Requirement                                     | Required   | High   | YES                                | NO                                | YES   | Clocks: One in CT room and readily visible from control room and gantry   |  |  |
| Headwall Provider zone                                | Patient Station  |  |                                    |                                   |   |   |  |  |
| Headwall Patient zone                                 |  |  |                                    |                                   |   |   |  |  |
| Footwall  |  |  |                                    |                                   |   |   |  |  |
| General use (spacing / location specified)            | Staff Assist/Code Station  | 4 (in 2 separate outlets)  | 1                                  |                                   | Refer to Section 7.9.13.2(2)                        |   |  |  |
| Bed   |  |  | 1                                  |                                   | for details.  |   |  |  |
| Boom  |  | 6  |                                    |                                   |   |   |  |  |
| Ceiling   |  |  |                                    |                                   |   | Hard ceiling rooms to have one (1) additional 2-gang box stubbed to cable tray  |  |  |
| Specialty, equipment specific                         | Staff workflow station at room entry   | 4  |                                    |                                   |   | Additional data outlet(s) for specialty equipment or workstation  |  |  |

#### Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

|   |  | Room Template 13: Generic                                     | Magnetic Resonanc                | e Imaging Room (  | MRI)                         |   |  |  |  |
|---|--|---|----------------------------------|---|------------------------------|---|--|--|--|
| Lighting Function Types                               | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting) | Illuminance Targets (minimum average lux)                     | Local Co                         | ontrols   | Power Source                 | Notes / Other Requirements  |  |  |  |
| General Area Lighting                                 | Direct/indirect (ceiling)  | 500   |                                  | Room entry (dimming),  Control room (dimming)  Vital with sel  Conditional fixt |                              | No part of room less than 300lux  |  |  |  |
| Exam Lighting, general                                | Ceiling (over entire body)   | 500   | Room entry<br>Control roon       |   | Vital                        | This function could be integrated with vision panels  |  |  |  |
| Exam or surgical lighting, specific medical equipment | N/A  |   |                                  |   |                              |   |  |  |  |
| Bedside Staff light                                   |  |   |                                  | N/A   |                              |   |  |  |  |
| Patient Reading light                                 |  |   |                                  | N/A   |                              |   |  |  |  |
| Workstation lighting                                  |  |   |                                  | N/A   |                              |   |  |  |  |
| Night light   |  |   |                                  | N/A   |                              |   |  |  |  |
| Observation lighting                                  |  |   |                                  | N/A   |                              |   |  |  |  |
| Instrument processing lighting                        |  |   |                                  | N/A   |                              |   |  |  |  |
| Visitor/Family zone lighting                          |  |   |                                  | N/A   |                              |   |  |  |  |
| Shower  |  |   |                                  | N/A   |                              |   |  |  |  |
| Specialty Lighting                                    | Flush ceiling vision panels  | 500   | Control roon                     |   | Vital                        | Custom replaceable graphic film required over entire gantry in pre-scan position  |  |  |  |
| Warning Lights (in-use / do not enter)                | Wall or ceiling mount in visible location outside entry doors                | High visibility with ambient lighting on                      | Auto-energized I<br>switch at re | oy equipment &  | Vital                        |   |  |  |  |
| Battery packs (backup unit lighting)                  | Surface ceiling adjustable dual light heads                                  | 20  | N/                               | N/A Vital   |                              | Circuited from same vital lighting circuit in room, on dedicated outlet not listed under 'Power Outlet Locations'   |  |  |  |
| Power Outlet Locations                                | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                    | #                                | of duplex UPS out   | lets / circuits              | Notes / Other Requirements  |  |  |  |
| Headwall Provider zone                                |  |   |                                  |   |                              |   |  |  |  |
| Headwall Patient zone                                 |  |   |                                  |   |                              |   |  |  |  |
| Bed   |  |   |                                  |   |                              |   |  |  |  |
| Patient Lift  |  |   |                                  |   |                              |   |  |  |  |
| Boom  |  |   |                                  |   |                              |   |  |  |  |
| Housekeeping  |  | 1/0.5   |                                  |   |                              | 5-20R outlet near control room entry door   |  |  |  |
| General use (spacing / location specified)            | 6/2  |   |                                  |   |                              | One outlet positioned close to gantry (midway) on sidewall, and at least one on each wall   |  |  |  |
| Specialty, equipment specific                         |  |   |                                  |   |                              | Additional outlets and circuits to be provided for each item in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist |  |  |  |
| Nursing control zone                                  |  |   |                                  |   |                              |   |  |  |  |
| Observation room or station or area or ante room      |  |   | _                                |   |                              | Refer to Room Template 18 for imaging control room requirements   |  |  |  |
|   |  | Data Drop Quantity  | Multimedia                       | Clinical  | Location Services            |   |  |  |  |
| Division 27   | Nurse Call   | Structured Cabling Infrastructure Data Density (IMIT, PM, GI) | Room Template                    | Observation<br>Camera   | Infrastructure               | Additional Infrastructure Requirements  |  |  |  |
| Basic Requirement                                     | Required   | Medium  | NO                               | YES   | YES                          | Clocks: In control room only (visible from gantry)  |  |  |  |
| Headwall Provider zone                                |  |   |                                  |   |                              |   |  |  |  |
| Headwall Patient zone                                 |  |   |                                  |   |                              |   |  |  |  |
| Footwall  |  |   |                                  |   |                              |   |  |  |  |
| General use (spacing / location specified)            | Staff Assist/Code Station  | 4 (in 2 separate outlets)                                     |                                  |   |                              |   |  |  |  |
| Bed   |  |   |                                  |   | Refer to Section 7.9.13.2(2) |   |  |  |  |
| Boom  |  |   |                                  |   | for details.                 |   |  |  |  |
| Ceiling   |  |   |                                  |   |                              | Hard ceiling rooms to have one (1) additional 2-gang box stubbed to cable tray  |  |  |  |
| Specialty, equipment specific                         |  | 4   |                                  |   |                              | Additional data outlet(s) for specialty equipment or workstation. All wiring passing through cabin walls to be routed via appropriate filters in penetration panel.                     |  |  |  |

#### Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

| Room Template 14: Generic Fluoroscopy Room (Fluoro), Diagnostic & Digital Radiology Rooms similar |  |  |   |                                |   |  |  |  |  |  |
|---|--|--|---|--------------------------------|---|--|--|--|--|--|
| Lighting Function Types   | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting) | Illuminance Targets (minimum average lux)  | Local   | Controls                       | Power Source                              | Notes / Other Requirements   |  |  |  |  |
| General Area Lighting   | Direct/indirect (ceiling)  | 500  | Room entry (dimming), Conditional with selected Vital fixtures for safety |                                |   | Illuminance targets must be met at hand hygiene sink when standing in front of it, no part of room less than 300lux  |  |  |  |  |
| Exam Lighting, general  |  |  |   | N/A                            |   |  |  |  |  |  |
| Exam or surgical lighting, specific medical equipment   |  | N/A  |   |                                |   |  |  |  |  |  |
| Bedside Staff light   |  |  |   | N/A                            |   |  |  |  |  |  |
| Patient Reading light   |  |  |   | N/A                            |   |  |  |  |  |  |
| Workstation lighting  |  |  |   | N/A                            |   |  |  |  |  |  |
| Night light   |  |  |   | N/A                            |   |  |  |  |  |  |
| Observation lighting  |  |  |   | N/A                            |   |  |  |  |  |  |
| Instrument processing lighting  |  |  |   | N/A                            |   |  |  |  |  |  |
| Visitor/Family zone lighting<br>Shower  |  |  |   | N/A<br>N/A                     |   |  |  |  |  |  |
| Specialty Lighting  |  |  |   | N/A                            |   |  |  |  |  |  |
| Warning Lights (in-use / do not enter)  | Wall or ceiling mount in visible location outside entry doors                | High visibility with ambient lighting on   |   | d by equipment & t room entry  | Vital                                     |  |  |  |  |  |
| Battery packs (backup unit lighting)  | Surface ceiling adjustable dual light heads                                  | 20   |   | N/A                            | Vital                                     | Circuited from same vital lighting circuit in room, on dedicated outlet not listed under 'Power Outlet Locations'  |  |  |  |  |
| Power Outlet Locations  | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                                       | # of duplex UPS outlets / circuits  |                                |   | Notes / Other Requirements   |  |  |  |  |
| Headwall Provider zone  | 1/0.5  | 1/0.5  | 1/0.5 (for monitor)   |                                |   | Monitor circuits may only be shared with other monitors. When table/bed is sideways against a wall, the headwall Provider zone requirements are at the Patient's head and the headwall Patient zone requirements are at the foot |  |  |  |  |
| Headwall Patient zone   | 1/0.5  | 1/0.5  |   |                                |   | regarierne are at the reet   |  |  |  |  |
| Bed   |  |  |   |                                |   |  |  |  |  |  |
| Patient Lift  |  | 1/0.5  |   |                                |   | Required only when patient lift required in room   |  |  |  |  |
| Boom  |  | . 10 =   |   |                                |   |  |  |  |  |  |
| Housekeeping  | 1/0.2  | 1/0.5  |   |                                |   | 5-20R outlet near each room entry door   |  |  |  |  |
| General use (spacing / location specified)  | 1/0.3 per 3m of wall,<br>1/0.5 counter GFCI receptacle at sink               |  |   |                                |   | One outlet positioned close to gantry (midway) on sidewall   |  |  |  |  |
| Specialty, equipment specific   |  |  |   |                                |   | Additional outlets and circuits to be provided for each item in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist  |  |  |  |  |
| Nursing control zone  |  |  |   |                                |   |  |  |  |  |  |
| Observation room or station or area or ante room  | 1/0.5 per 1m of wall   | Data Daniel Control  |   |                                |   | Outlets noted are in addition to standard workstation requirements   |  |  |  |  |
| Division 27   | Nurse Call   | Data Drop Quantity Structured Cabling Infrastructure Data Density (IMIT, PM, GI) | Multimedia<br>Room Template   | Clinical Observation<br>Camera | Location Services<br>Infrastructure       | Additional Infrastructure Requirements   |  |  |  |  |
| Basic Requirement   | Required   | High   | YES   | NO                             | YES                                       | Clocks: One in Fluoro room and readily visible from control room and gantry  |  |  |  |  |
| Headwall Provider zone  | Patient Station  |  |   |                                |   |  |  |  |  |  |
| Headwall Patient zone   |  |  |   |                                |   |  |  |  |  |  |
| Footwall  |  |  |   |                                |   |  |  |  |  |  |
| General use (spacing / location specified)  | Staff Assist/Code Station  | 4 (in 2 separate outlets)  | 1   |                                | Refer to Section 7.9.13.2(2) for details. |  |  |  |  |  |
| Bed<br>Boom   |  | 6  |   |                                |   |  |  |  |  |  |
| Ceiling   |  | 0  |   |                                |   | Hard ceiling rooms to have one (1) additional 2-gang box stubbed to cable tray   |  |  |  |  |
| Specialty equipment specific  | Staff workflow station at control desk                                       | 1  |   |                                |   | Additional data outlet(s) for specialty equipment or workstation   |  |  |  |  |
| Specialty, equipment specific   | Stail WOLKHOW STATION OF CONTROL GESK  | 4  |   |                                |   | Additional data odtlet(s) for specialty equipment or workstation   |  |  |  |  |

Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

|   | Room Template 15: Generic Nuclear Med Room                                   |  |                             |                                   |   |   |  |  |  |
|---|--|--|-----------------------------|-----------------------------------|---|---|--|--|--|
| Lighting Function Types                               | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting) | Illuminance Targets (minimum average lux)  | Local                       | Controls                          | Power Source  | Notes / Other Requirements  |  |  |  |
| General Area Lighting                                 | Direct/indirect (ceiling)  | 500  |                             | ry (dimming),<br>om (dimming)     | Conditional with selected Vital fixtures for safety | Illuminance targets must be met at hand hygiene sink when standing in front of it, no part of room less than 300lux   |  |  |  |
| Exam Lighting, general                                | Ceiling (over entire body)   | 500  |                             | ry (dimming),<br>om (dimming)     | Vital   | Flat lensed fixture c/w replaceable graphics film, gantry in pre-scan position  |  |  |  |
| Exam or surgical lighting, specific medical equipment | N/A (equipment-specific)   | N/A (equipment-specific)   | Equipme                     | ent-specific                      | UPS   | Refer to equipment list, used where articulated light source needs to provide high light level with controlled beam   |  |  |  |
| Bedside Staff light                                   |  |  |                             | N/A                               |   |   |  |  |  |
| Patient Reading light                                 |  |  |                             | N/A                               |   |   |  |  |  |
| Workstation lighting                                  |  |  |                             | N/A                               |   |   |  |  |  |
| Night light   |  |  |                             | N/A                               |   |   |  |  |  |
| Observation lighting                                  |  |  |                             | N/A                               |   |   |  |  |  |
| Instrument processing lighting                        |  |  |                             | N/A                               |   |   |  |  |  |
| Visitor/Family zone lighting                          |  |  |                             | N/A                               |   |   |  |  |  |
| Shower  |  |  |                             | N/A                               |   |   |  |  |  |
| Specialty Lighting                                    |  |  |                             | N/A                               |   |   |  |  |  |
| Warning Lights (in-use / do not enter)                | Wall or ceiling mount in visible location outside entry doors                | High visibility with ambient lighting on   |                             | d by equipment & room entry       | Vital   |   |  |  |  |
| Battery packs (backup unit lighting)                  | Surface ceiling adjustable dual light heads                                  | 20   | ١                           | N/A                               | Vital   | Circuited from same vital lighting circuit in room, on dedicated outlet not listed under 'Power Outlet Locations'   |  |  |  |
| Power Outlet Locations                                | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                                       | #                           | # of duplex UPS ou                | tlets / circuits                                    | Notes / Other Requirements  |  |  |  |
| Headwall Provider zone                                |  |  |                             |                                   |   |   |  |  |  |
| Headwall Patient zone                                 |  |  |                             |                                   |   |   |  |  |  |
| Bed   |  |  |                             |                                   |   |   |  |  |  |
| Patient Lift  |  | 1/0.5  |                             |                                   |   | Required only when patient lift required in room  |  |  |  |
| Boom  | 2/1  |  |                             | 2/1                               |   | 5-20R outlets on boom   |  |  |  |
| Housekeeping  |  | 1/0.5  |                             |                                   |   | 5-20R outlet near each room entry door  |  |  |  |
| General use (spacing / location specified)            | 1/0.3 per 3m of wall,<br>1/0.5 counter GFCI receptacle at sink               |  |                             |                                   |   | One outlet positioned close to gantry (midway) on sidewall, and one on each end wall  |  |  |  |
| Specialty, equipment specific                         |  |  |                             |                                   |   | Additional outlets and circuits to be provided for each item in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist |  |  |  |
| Nursing control zone                                  |  |  |                             |                                   |   |   |  |  |  |
| Observation room or station or area or ante room      | 1/0.5 per 1m of wall   |  |                             |                                   |   | Outlets noted are in addition to standard workstation requirements  |  |  |  |
| Division 27   | Nurse Call   | Data Drop Quantity Structured Cabling Infrastructure Data Density (IMIT, PM, GI) | Multimedia<br>Room Template | Clinical<br>Observation<br>Camera | Location Services<br>Infrastructure                 | Additional Infrastructure Requirements  |  |  |  |
| Basic Requirement                                     | Required   | High   | YES                         | NO                                | YES   | Clocks: One in imaging room and readily visible from control room and gantry  |  |  |  |
| Headwall Provider zone                                | Patient Station  |  |                             |                                   |   |   |  |  |  |
| Headwall Patient zone                                 |  |  |                             |                                   |   |   |  |  |  |
| Footwall  |  |  |                             |                                   |   |   |  |  |  |
| General use (spacing / location specified)            | Staff Assist/Code Station  | 4 (in 2 separate outlets)  |                             |                                   |   |   |  |  |  |
| Bed   |  |  | 1                           |                                   | Refer to Section 7.9.13.2(2) for details.           |   |  |  |  |
| Boom  |  | 6  | 1                           |                                   | ior details.  |   |  |  |  |
| Ceiling   |  |  |                             |                                   |   | Hard ceiling rooms to have one (1) additional 2-gang box stubbed to cable tray  |  |  |  |
| Specialty, equipment specific                         | Staff workflow station at room entry   | Λ  |                             |                                   |   | Additional data outlet(s) for specialty equipment or workstation  |  |  |  |
| specialty, equipment specific                         | Stail workhow Station at 100m entry  | 4  |                             |                                   |   | Additional data oddlet(s) for specialty equipment of workstation  |  |  |  |

#### Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

|   |  | Room Template 16:   | Generic Laborato | ry (Lab) Spaces                                    |                              |  |
|---|--|---|------------------|--|------------------------------|--|
| Lighting Function Types                               | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting) | Illuminance Targets (minimum average lux)                     | Local            | l Controls   | Power Source                 | Notes / Other Requirements   |
| General Area Lighting                                 | Direct/indirect (ceiling), over lab bench/counter                            | 750   | Entry do         | ors (dimming)                                      | 50% Vital, 50% Conditional   | Illuminance targets must be met at hand hygiene sink when standing in front of it; when specifically noted in CSA Z317.5, lab types may reduce lighting levels accordingly   |
| Exam Lighting, general                                |  |   |                  | N/A  |                              |  |
| Exam or surgical lighting, specific medical equipment |  |   |                  | N/A  |                              |  |
| Bedside Staff light                                   |  |   |                  | N/A  |                              |  |
| Patient Reading light                                 |  |   |                  | N/A  | 11.1.1                       |  |
| Workstation lighting                                  |  |   | C                | overed by General Are                              | ea Lighting                  |  |
| Night light Observation lighting                      |  |   |                  | N/A<br>N/A   |                              |  |
| Instrument processing lighting                        | Benchtop   | 1000  | Benchtop (dimm   | ning) - per workspace                              | 50% Vital, 50% Conditional   | Plate reading, 1% dimming in microscope areas  |
| Visitor/Family zone lighting                          |  |   |                  | N/A  |                              |  |
| Shower  |  |   |                  | N/A  |                              |  |
| Specialty Lighting                                    |  |   |                  | N/A  |                              |  |
| Warning Lights (in-use / do not enter)                |  |   |                  | N/A  |                              |  |
| Battery packs (backup unit lighting)                  |  |   |                  | N/A  |                              |  |
| Power Outlet Locations                                | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                    |                  | # of duplex UPS outle                              | ets / circuits               | Notes / Other Requirements   |
| Headwall Provider zone                                |  |   |                  |  |                              |  |
| Headwall Patient zone                                 |  |   |                  |  |                              |  |
| Bed   |  |   |                  |  |                              |  |
| Patient Lift  |  |   |                  |  |                              |  |
| Boom  |  |   |                  |  |                              |  |
| Housekeeping  |  | 1/0.3   |                  |  |                              | 5-20R outlets as required throughout department  |
| General use (spacing / location specified)            | 1/0.5 per 0.75m of lab bench/counter<br>1/0.5 per 0.75m of wall/column width |   |                  | /0.5 per 0.75m of lab b<br>/0.5 per 0.75m of wall/ |                              | Multi-compartment raceway to support two separate power sources, as well as a telecom section.  Wall/column outlets for equipment in areas where there is useable horizontal space (300mm minimum) without benches or counters. All outlets 5-20R  |
| Specialty, equipment specific                         | 1/1 specialty outlet per 2m of lab bench/counter                             |   | 1/1 spe          | cialty outlet per 2m of<br>1/1 (for moni           |                              | The intent of the specialty outlet requirement is to allow for other than 120V, 15/20A equipment at benches - outlet type to be determined in consultation with the Owner. Additional outlets and circuits to be provided for each item in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist |
| Nursing control zone                                  |  |   |                  |  |                              |  |
| Observation room or station or area or ante room      |  |   |                  |  |                              |  |
|   |  | Data Drop Quantity  | Multimedia       | Clinical Observation                               | Location Services            |  |
| Division 27   | Nurse Call   | Structured Cabling Infrastructure Data Density (IMIT, PM, GI) | Room Template    |  | Infrastructure               | Additional Infrastructure Requirements   |
| Basic Requirement                                     | Not Required   | As Appropriate  | NO               | NO   | YES                          | Clocks: One visible from every lab bench location  |
| Headwall Provider zone                                |  |   |                  |  |                              |  |
| Headwall Patient zone                                 |  |   | 1                |  |                              |  |
| Footwall  |  |   |                  |  |                              |  |
| General use (spacing / location specified)            |  | 2 per lab bench work area                                     |                  |  |                              |  |
|   |  | 2 additional per computer workstation                         | -                |  | Refer to Section 7.9.13.2(2) |  |
| Bed<br>Boom   | -  |   | -                |  | for details.                 |  |
|   |  |   | •                |  |                              |  |
| Ceiling   |  |   |                  |  |                              | Wall-mounted display locations to have one (1) additional 2-gang box connected to 2-gang box behind  |
| Specialty, equipment specific                         |  | 2 per wall-mounted display                                    |                  |  |                              | display  |

#### Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

|   |  | Room Template  | 2 17: Generic Ultras        | ound Room   |                                     |   |
|---|--|--|-----------------------------|---|-------------------------------------|---|
| Lighting Function Types                               | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting) | Illuminance Targets (minimum average lux)  | Local                       | Controls  | Power Source                        | Notes / Other Requirements  |
| General Area Lighting                                 | Direct/indirect (ceiling)  | 750  |                             | Room entry (switch), Cond<br>Workstation (dimming) Vita |                                     | Illuminance targets must be met at hand hygiene sink when standing in front of it   |
| Exam Lighting, general                                | Ceiling (over abdomen)   | 1000   | Provider zo                 | ne (dimming)  | Vital                               | Over specific body part related to room specialty when applicable   |
| Exam or surgical lighting, specific medical equipment |  |  |                             | N/A   |                                     |   |
| Bedside Staff light                                   |  |  |                             | N/A   |                                     |   |
| Patient Reading light                                 |  |  |                             | N/A   |                                     |   |
| Workstation lighting                                  |  |  | (                           | overed by General A                                     | Area Lighting                       |   |
| Night light   |  |  |                             | N/A   |                                     |   |
| Observation lighting                                  |  |  |                             | N/A   |                                     |   |
| Instrument processing lighting                        |  |  |                             | N/A   |                                     |   |
| Visitor/Family zone lighting                          |  |  |                             | N/A   |                                     |   |
| Shower  |  |  |                             | N/A<br>N/A  |                                     |   |
| Specialty Lighting                                    | Wall or coiling mount in visible location outside                            |  | Auto oporgizos              | by equipment &  |                                     |   |
| Warning Lights (in-use / do not enter)                | Wall or ceiling mount in visible location outside entry doors                | High visibility with ambient lighting on   |                             | room entry  | Vital                               |   |
| Battery packs (backup unit lighting)                  |  |  |                             | N/A   |                                     |   |
| Power Outlet Locations                                | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                                       | #                           | of duplex UPS outl                                      | lets / circuits                     | Notes / Other Requirements  |
| Headwall Provider zone                                | 1/0.5 (general)<br>1/0.5 (for monitor)                                       | 1/0.5  | 2                           | /0.5 (for ultrasound                                    | d equipment)                        | Monitor circuits may only be shared with other monitors. Ultrasound circuits may only be shared with other ultrasound outlets at the same patient location. Ultrasound outlets to be 5-20R. When bed/stretcher is sideways against a wall, the headwall Provider zone requirements will be at the Patient's head and the headwall Patient zone will be at the foot. |
| Headwall Patient zone                                 | 1/0.5 (general)  | 1/0.5  | 1                           | /0.5 (for ultrasound                                    | l equipment)                        | Ultrasound circuits may only be shared with other ultrasound outlets at the same patient location.  Ultrasound outlets to be 5-20R.   |
| Bed   |  | 1/0.5  |                             |   |                                     | Required only when electric bed/stretcher required in room  |
| Patient Lift  |  | 1/0.5  |                             |   |                                     | Required only when patient lift required in room  |
| Boom  |  |  |                             |   |                                     | When bed/stretcher is islanded, requirements for headwall are to be relocated to the boom   |
| Housekeeping  |  | 1/0.5  |                             |   |                                     | 5-20R outlet near room entry door   |
| General use (spacing / location specified)            | 1/0.5 counter GFCI receptacle at sink  | 1/0.5 per 3m of wall   |                             |   |                                     |   |
| Specialty, equipment specific                         |  |  |                             |   |                                     | Additional outlets and circuits to be provided for each item in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist   |
| Nursing control zone                                  |  |  |                             |   |                                     |   |
| Observation room or station or area or ante room      |  |  |                             |   |                                     |   |
| Division 27   | Nurse Call   | Data Drop Quantity Structured Cabling Infrastructure Data Density (IMIT, PM, GI) | Multimedia<br>Room Template | Clinical<br>Observation<br>Camera                       | Location Services<br>Infrastructure | Additional Infrastructure Requirements  |
| Basic Requirement                                     | Required   | Medium   | NO                          | NO  | YES                                 | Clocks: One at foot of bed and visible from provider zone   |
| Headwall Provider zone                                | Patient Station Staff Assist/Code Station                                    | 4 (in 2 separate outlets)  |                             |   |                                     |   |
| Headwall Patient zone                                 |  | 2  |                             |   |                                     |   |
| Footwall  |  |  |                             |   |                                     |   |
| General use (spacing / location specified)            | Pull Cord at patient chair   |  | -                           |   | Refer to Section 7.9.13.2(2)        | Wall-mounted display locations to have one (1) additional 2-gang box connected to 2-gang box behind display   |
| Bed   |  |  |                             |   | for details.                        | · ·   |
| Boom  |  |  |                             |   |                                     |   |
|   |  |  |                             |   |                                     | Hard ceiling rooms to have one (1) additional 2-gang box stubbed to cable tray  |
| Ceiling   |  |  |                             |   |                                     | = 8 6 6 6 6 6   |

#### Legend:

IMIT: IMIT Data Network PM: Physiological Monitoring Network GI: Guest Infotainment Network

|   | Room Template 18: Generic Imaging Control Room                               |   |                             |                   |   |   |  |  |  |  |
|---|--|---|-----------------------------|-------------------|---|---|--|--|--|--|
| Lighting Function Types                               | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting) | Illuminance Targets (minimum average lux)                     | Local (                     | Controls          | Power Source  | Notes / Other Requirements  |  |  |  |  |
| General Area Lighting                                 | Direct/indirect (ceiling)  | 500   | Room Enti                   | ry (dimming)      | Conditional with selected Vital fixtures for safety | Remote dimming control required for associated imaging room as well as control room   |  |  |  |  |
| Exam Lighting, general                                | N/A  |   |                             |                   |   |   |  |  |  |  |
| Exam or surgical lighting, specific medical equipment |  | N/A   |                             |                   |   |   |  |  |  |  |
| Bedside Staff light                                   |  |   |                             | N/A               |   |   |  |  |  |  |
| Patient Reading light                                 |  |   |                             | N/A               |   |   |  |  |  |  |
| Workstation lighting                                  | Direct/indirect (ceiling)  | 500   | Dim                         | ming              | Vital   | Lighting in control area, separate control for fixtures above countertop at control room window   |  |  |  |  |
| Night light   |  |   |                             | N/A               |   |   |  |  |  |  |
| Observation lighting                                  |  |   |                             | N/A               |   |   |  |  |  |  |
| Instrument processing lighting                        |  |   |                             | N/A               |   |   |  |  |  |  |
| Visitor/Family zone lighting                          |  |   |                             | N/A               |   |   |  |  |  |  |
| Shower Specialty Lighting                             |  |   |                             | N/A<br>N/A        |   |   |  |  |  |  |
| Specialty Lighting                                    |  |   |                             |                   |   |   |  |  |  |  |
| Warning Lights (in-use / do not enter)                |  |   |                             | N/A               |   |   |  |  |  |  |
| Battery packs (backup unit lighting)                  |  |   | 1                           | N/A               |   |   |  |  |  |  |
| Power Outlet Locations                                | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                    | #                           | of duplex UPS out | tlets / circuits                                    | Notes / Other Requirements  |  |  |  |  |
| Headwall Provider zone                                |  |   |                             |                   |   |   |  |  |  |  |
| Headwall Patient zone                                 |  |   |                             |                   |   |   |  |  |  |  |
| Bed Patient Lift                                      |  |   |                             |                   |   |   |  |  |  |  |
| Boom  |  |   |                             |                   |   |   |  |  |  |  |
| Housekeeping  |  | 1/0.5   |                             |                   |   | 5-20R outlet near each room entry door  |  |  |  |  |
| General use (spacing / location specified)            | 1/0.5 per 2m of wall,<br>1/0.5 counter GFCI receptacle at sink               |   |                             |                   |   | Outlets noted are in addition to standard workstation requirements  |  |  |  |  |
| Specialty, equipment specific                         |  |   |                             |                   |   | Additional outlets and circuits to be provided for each item in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist |  |  |  |  |
| Nursing control zone                                  |  |   |                             |                   |   |   |  |  |  |  |
|   |  |   |                             |                   |   |   |  |  |  |  |
| Observation room or station or area or ante room      |  |   |                             |                   |   |   |  |  |  |  |
|   |  | Data Drop Quantity  |                             | Clinical          |   |   |  |  |  |  |
| Division 27   | Nurse Call   | Structured Cabling Infrastructure Data Density (IMIT, PM, GI) | Multimedia<br>Room Template | Observation       | Location Services Infrastructure                    | Additional Infrastructure Requirements  |  |  |  |  |
| Basic Requirement                                     | Required   | Medium  | NO                          | NO                | YES   | One in imaging room and readily visible from control room and gantry (except in MRI control room, where clock is to be located in control room and visible from gantry)                 |  |  |  |  |
| Headwall Provider zone                                |  |   |                             |                   |   |   |  |  |  |  |
| Headwall Patient zone                                 |  |   |                             |                   |   |   |  |  |  |  |
| Footwall  |  |   |                             |                   |   |   |  |  |  |  |
| General use (spacing / location specified)            | Staff Assist/Code Station  | 2 per workstation   |                             |                   | Refer to Section 7.9.13.2(2)                        |   |  |  |  |  |
| Bed   | ,  | ·   |                             |                   | for details.  |   |  |  |  |  |
| Boom  |  |   |                             |                   | ioi actalis.  |   |  |  |  |  |
| Ceiling   |  |   |                             |                   |   |   |  |  |  |  |
| Specialty, equipment specific                         | Staff workflow station at control desk                                       | 3 per printer   |                             |                   |   |   |  |  |  |  |
|   |  |   |                             |                   | ·   |   |  |  |  |  |

#### Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

|   |  | Room Template :  | 19: Generic Care Te | eam Stations  |                              |   |  |  |  |
|---|--|--|---------------------|---|------------------------------|---|--|--|--|
| Lighting Function Types                               | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting)                 | Illuminance Targets (minimum average lux)                            | Local (             | Controls  | Power Source                 | Notes / Other Requirements  |  |  |  |
| General Area Lighting                                 | Direct/indirect (ceiling)  | 500  | Entry (d            | Entry (dimming)  Conditional with s  Vital fixtures for |                              | Remote controls for associated corridors to be located at Care Team Stations  |  |  |  |
| Exam Lighting, general                                | N/A  |  |                     |   |                              |   |  |  |  |
| Exam or surgical lighting, specific medical equipment | N/A  |  |                     |   |                              |   |  |  |  |
| Bedside Staff light                                   |  |  |                     | N/A   |                              |   |  |  |  |
| Patient Reading light                                 |  |  | T                   | N/A   | T                            | In Care Team Stations with two or fewer workstations, workstation lighting may be provided by the   |  |  |  |
| Workstation lighting                                  | Direct/indirect (ceiling)  | 750  | Dim                 | ming .  | Vital                        | general area lighting   |  |  |  |
| Night light   |  |  |                     | N/A   |                              |   |  |  |  |
| Observation lighting Instrument processing lighting   |  |  |                     | N/A<br>N/A  |                              |   |  |  |  |
| Visitor/Family zone lighting                          |  |  |                     | N/A   |                              |   |  |  |  |
| Shower  |  |  |                     | N/A   |                              |   |  |  |  |
| Specialty Lighting                                    |  |  |                     | N/A   |                              |   |  |  |  |
| Warning Lights (in-use / do not enter)                |  |  |                     | N/A   |                              |   |  |  |  |
| Battery packs (backup unit lighting)                  |  |  |                     | N/A   |                              |   |  |  |  |
| Power Outlet Locations                                | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                           | #                   | of duplex UPS out                                       | tlets / circuits             | Notes / Other Requirements  |  |  |  |
| Headwall Provider zone                                |  |  |                     |   |                              |   |  |  |  |
| Headwall Patient zone                                 |  |  |                     |   |                              |   |  |  |  |
| Bed   |  |  |                     |   |                              |   |  |  |  |
| Patient Lift  |  |  |                     |   |                              |   |  |  |  |
| Boom<br>Housekeeping                                  |  | 1/0.5  |                     |   |                              | 5-20R near each room entry door   |  |  |  |
| General use (spacing / location specified)            | 1/0.5 per 2m of wall,<br>1/0.5 per 0.5m of counter,<br>1/0.5 counter GFCI receptacle at sink | 2,000  |                     |   |                              | Outlets noted are in addition to computer workstation requirements, one half of the counter outlets to be below counter and the other half above counter.   |  |  |  |
| Specialty, equipment specific                         | 1 USB charging port above counter at each computer workstation                               |  | 2/1 (belov          | v counter at each c                                     | computer workstation)        | Additional outlets and circuits to be provided for each item in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist. 8 USB charging ports required at each designated mobile device charging location |  |  |  |
| Nursing control zone                                  |  |  |                     |   |                              |   |  |  |  |
| Observation room or station or area or ante room      |  |  |                     |   |                              |   |  |  |  |
|   |  | Data Drop Quantity   | Multimedia          | Clinical  | Location Services            |   |  |  |  |
| Division 27   | Nurse Call   | Structured Cabling Infrastructure Data Density (IMIT, PM, GI)        | Room Template       | Observation<br>Camera                                   | Infrastructure               | Additional Infrastructure Requirements  |  |  |  |
| Basic Requirement                                     | Required   | High   | NO                  | NO  | YES                          | Clocks: in location(s) to be visible from everywhere in the Care Team Station   |  |  |  |
| Headwall Provider zone                                |  |  |                     |   |                              |   |  |  |  |
| Headwall Patient zone                                 |  |  |                     |   |                              |   |  |  |  |
| Footwall  |  |  |                     |   |                              |   |  |  |  |
| General use (spacing / location specified)            | Staff Assist/Code Station Staff Assist/Code Station  | 2 per workstation<br>2 per wall-mounted display                      |                     |   | Refer to Section 7.9.13.2(2) |   |  |  |  |
| Bed   |  |  |                     |   | for details.                 |   |  |  |  |
| Boom  |  |  |                     |   |                              |   |  |  |  |
| Ceiling   |  |  |                     |   |                              |   |  |  |  |
| Specialty, equipment specific                         | Staff Console  | 3 per multi-function printer 4 PM data per Telemetry Central Monitor |                     |   |                              |   |  |  |  |

Legend:

IMIT: IMIT Data Network PM: Physiological Monitoring Network GI: Guest Infotainment Network

|   |  | Room Tem  | plate 20: Generic (   | Offices             |   |   |
|---|--|---|---|---------------------|---|---|
| Lighting Function Types                               | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting) | Illuminance Targets (minimum average lux)                     |   | Controls            | Power Source                              | Notes / Other Requirements  |
| General Area Lighting                                 | Direct/indirect (ceiling)  | 500   | Entry (dimming)  Conditional with selected  Vital fixtures for safety |                     | •   |   |
| Exam Lighting, general                                |  |   |   | N/A                 |   |   |
| Exam or surgical lighting, specific medical equipment |  |   |   | N/A                 |   |   |
| Bedside Staff light                                   |  |   |   | N/A                 |   |   |
| Patient Reading light                                 |  |   | _   | N/A                 |   |   |
| Workstation lighting                                  | Direct/indirect (ceiling)  | 750   | At workstat   | ion (dimming)       | Vital                                     | For single occupancy offices, workstation lighting may be provided by the general area lighting   |
| Night light   |  |   |   | N/A                 |   |   |
| Observation lighting                                  |  |   |   | N/A                 |   |   |
| Instrument processing lighting                        |  |   |   | N/A                 |   |   |
| Visitor/Family zone lighting                          |  |   |   | N/A                 |   |   |
| Shower  |  |   |   | N/A                 |   |   |
| Specialty Lighting                                    | Under desk/low level   | 10  | At workstat   | ion (dimming)       | Vital                                     | Required in imaging offices used as reading rooms and offices used for microscopy   |
| Warning Lights (in-use / do not enter)                |  |   |   | N/A                 |   |   |
| Battery packs (backup unit lighting)                  |  |   |   | N/A                 |   |   |
| Power Outlet Locations                                | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                    | •   | # of duplex UPS out | tlets / circuits                          | Notes / Other Requirements  |
| Headwall Provider zone                                |  |   |   |                     |   |   |
| Headwall Patient zone                                 |  |   |   |                     |   |   |
| Bed   |  |   |   |                     |   |   |
| Patient Lift  |  |   |   |                     |   |   |
| Boom  |  |   |   |                     |   |   |
| Housekeeping  |  | 1/0.5   |   |                     |   | 5-20R outlet  |
| General use (spacing / location specified)            | 1/0.25 per 2m of wall,<br>2/0.5 per 1m of counter                            |   |   |                     |   | Outlets noted are in addition to standard workstation requirements, one half of counter outlets to be above counter and the other half below  |
| Specialty, equipment specific                         |  |   |   |                     |   | Additional outlets and circuits to be provided for each item in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist |
| Nursing control zone                                  |  |   | 1   |                     |   |   |
| Observation room or station or area or ante room      |  |   |   |                     |   |   |
|   |  | Data Drop Quantity  |   | Clinical            |   |   |
| Division 27   | Nurse Call   | Structured Cabling Infrastructure Data Density (IMIT, PM, GI) | Multimedia<br>Room Template   | Observation         | Location Services Infrastructure          | Additional Infrastructure Requirements  |
| Basic Requirement                                     | Not Required   | As appropriate  | NO  | NO                  | YES                                       | Clocks: N/A   |
| Headwall Provider zone                                |  |   |   |                     |   |   |
| Headwall Patient zone                                 |  |   |   |                     |   |   |
| Footwall  |  |   |   |                     |   |   |
| General use (spacing / location specified)            |  | 2 per workstation   |   |                     | Refer to Section 7.0.12.2(2)              |   |
| Bed   |  | r   |   |                     | Refer to Section 7.9.13.2(2) for details. |   |
| Boom  |  |   |   |                     | ior details.                              |   |
| Ceiling   |  |   |   |                     |   |   |
| Specialty, equipment specific                         |  | 3 per multi-function printer                                  |   |                     |   |   |
| Specialty, equipment specific                         | <u> </u>   | 5 per main-ranction printer                                   |   |                     |   |   |

#### Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

|   |  | Room Template 21: Generic Wo                                  | orkstations/Switch  | boards/Control D      | Pesks                            |   |
|---|--|---|---|-----------------------|----------------------------------|---|
| Lighting Function Types                               | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting)               | Illuminance Targets (minimum average lux)                     | Local C   | ontrols               | Power Source                     | Notes / Other Requirements  |
| General Area Lighting                                 | Direct/indirect (ceiling)  | 500   | Vital with selected Entry (dimming) Conditional fixtures for redundancy |                       |                                  | Controls to include remote control of associated corridors, including dimming   |
| Exam Lighting, general                                |  |   |   | N/A                   |                                  |   |
| Exam or surgical lighting, specific medical equipment |  |   |   | N/A                   |                                  |   |
| Bedside Staff light                                   |  |   |   | N/A                   |                                  |   |
| Patient Reading light                                 |  |   |   | N/A                   |                                  |   |
| Workstation lighting                                  | Direct/indirect (ceiling)  | 750   | At workstation  | on (dimming)          | Vital                            | For single workstation spaces, workstation lighting may be provided by the general area lighting  |
| Night light   |  |   |   | N/A                   |                                  |   |
| Observation lighting                                  |  |   |   | N/A                   |                                  |   |
| Instrument processing lighting                        |  |   |   | N/A                   |                                  |   |
| Visitor/Family zone lighting                          |  |   |   | N/A                   |                                  |   |
| Shower  |  |   |   | N/A                   |                                  |   |
| Specialty Lighting                                    | Under desk/low level   | 10  | At workstation  | •                     | Vital                            | Lowlevel kickspace lighting is required at individual PACS workstations   |
| Warning Lights (in-use / do not enter)                |  |   |   | N/A                   |                                  |   |
| Battery packs (backup unit lighting)                  |  |   |   | N/A                   |                                  |   |
| Power Outlet Locations                                | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                    | #   | of duplex UPS ou      | itlets / circuits                | Notes / Other Requirements  |
| Headwall Provider zone                                |  |   |   |                       |                                  |   |
| Headwall Patient zone                                 |  |   |   |                       |                                  |   |
| Bed   |  |   |   |                       |                                  |   |
| Patient Lift  |  |   |   |                       |                                  |   |
| Boom  |  |   |   |                       |                                  |   |
| Housekeeping  |  | 1/0.5   |   |                       |                                  | 5-20R outlet near each room entry door  |
| General use (spacing / location specified)            | 1/0.5 per 2m of wall,<br>1/0.5 per 1m of counter,<br>1/0.5 counter GFCI receptacle at sink | 1/0.5 per 1m of counter                                       |   |                       |                                  | Outlets noted are in addition to standard workstation personal computer requirements, one half of the counter outlets to be below counter and the other half above counter, at 0.5m spacing with half on vital and half on conditional. Requirements to be doubled at each PACS station |
| Specialty, equipment specific                         |  |   |   |                       |                                  | Additional outlets and circuits to be provided for each item in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist   |
| Nursing control zone                                  |  |   |   |                       |                                  |   |
| Observation room or station or area or ante room      |  |   |   |                       |                                  |   |
|   |  | Data Drop Quantity  |   | Clinical              |                                  |   |
| Division 27   | Nurse Call   | Structured Cabling Infrastructure Data Density (IMIT, PM, GI) | Multimedia<br>Room Template   | Observation<br>Camera | Location Services Infrastructure | Additional Infrastructure Requirements  |
| Basic Requirement                                     | As Appropriate   | As Appropriate  | NO  | NO                    | YES                              | Clocks: in location(s) to be visible from everywhere in room  |
| Headwall Provider zone                                |  |   |   |                       |                                  |   |
| Headwall Patient zone                                 |  |   |   |                       |                                  |   |
| Footwall  |  |   |   |                       |                                  |   |
| General use (spacing / location specified)            |  | 2 per workstation   |   |                       |                                  |   |
| Bed   |  |   |   |                       | Refer to Section 7.9.13.2(2)     |   |
| Boom  |  |   |   |                       | for details.                     |   |
| Ceiling   |  |   |   |                       | Tor details.                     |   |
| Specialty, equipment specific                         | Staff Console at Operations Control Desk, Command Centre/EOC and Registration/Triage       | 3 per multi-function printer                                  |   |                       |                                  |   |

#### Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

| Lighting Function Types                               | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting) | Illuminance Targets (minimum average lux)                                     | Local   | Controls              | Power Source                 | Notes / Other Requirements   |
|---|--|---|---|-----------------------|------------------------------|--|
| General Area Lighting                                 | Direct/indirect (ceiling)  | 500   | Room entry (dimming)  Conditional with selected Vital fixtures for safety |                       |                              | Any rooms with room dividers require individual control in each section as well as a master control for when dividers are not in use, zone control (such as lower light level at AV equipment) |
| Exam Lighting, general                                |  |   |   | N/A                   |                              |  |
| Exam or surgical lighting, specific medical equipment |  |   |   | N/A                   |                              |  |
| Bedside Staff light                                   |  |   |   | N/A                   |                              |  |
| Patient Reading light                                 |  |   | T   | N/A                   |                              |  |
| Workstation lighting                                  | Ceiling  | 750   | At worksta  | tion (dimming)        | Vital                        |  |
| Night light   |  |   |   | N/A                   |                              |  |
| Observation lighting Instrument processing lighting   |  |   |   | N/A<br>N/A            |                              |  |
| Visitor/Family zone lighting                          |  |   |   | N/A                   |                              |  |
| Shower  |  |   |   | N/A                   |                              |  |
|   |  |   |   | ,                     | Conditional with selected    |  |
| Specialty Lighting                                    | N/A (equipment-specific)   | N/A (equipment-specific)  | N/A (equip  | oment-specific)       | Vital fixtures for safety    | As required to suit equipment in equipment list  |
| Warning Lights (in-use / do not enter)                |  |   |   | N/A                   |                              |  |
| Battery packs (backup unit lighting)                  |  |   |   | N/A                   |                              |  |
| Power Outlet Locations                                | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                                    |   | # of duplex UPS outle | ets / circuits               | Notes / Other Requirements   |
| Headwall Provider zone                                |  |   |   |                       |                              |  |
| Headwall Patient zone                                 |  |   |   |                       |                              |  |
| Bed   |  |   |   |                       |                              |  |
| Patient Lift  |  |   |   |                       |                              |  |
| Boom  |  | 4/0.5   |   |                       |                              | 5 200 soutlet  |
| Housekeeping  |  | 1/0.5<br>1/0.3 per 2m of wall,  |   |                       |                              | 5-20R outlet   |
|   | 1/0.5 per 3m of wall,<br>2/1 per 2m of counter                               | 2/1 per 2m of counter, flush floor outlets such that no piece of equipment is |   |                       |                              | Outlets noted are in addition to standard workstation requirements, one half of counter outlets to be above counter and the other half below   |
| General use (spacing / location specified)            |  | more than 2m from an outlet   |   |                       |                              |  |
| Specialty, equipment specific                         |  |   |   |                       |                              | Additional outlets and circuits to be provided for each item in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist        |
| Nursing control zone                                  |  |   |   |                       |                              |  |
| Observation room or station or area or ante room      |  |   |   |                       |                              |  |
|   |  | Data Drop Quantity  | Multimedia  | Clinical Observation  | Location Services            |  |
| Division 27   | Nurse Call   | Structured Cabling Infrastructure Data Density (IMIT, PM, GI)                 | Room Template   | Camera                | Infrastructure               | Additional Infrastructure Requirements   |
| Basic Requirement                                     | Not Required   | As Appropriate  | YES   | NO                    | YES                          | Clocks: In location(s) to be visible from everywhere in room   |
| Headwall Provider zone                                |  |   |   |                       |                              |  |
| Headwall Patient zone                                 |  |   |   |                       |                              |  |
| Footwall  |  |   | Type 2 in<br>"Multipurpose  |                       |                              |  |
| General use (spacing / location specified)            | Staff Assist/Code Station  | 4 at display wall (in 2 separate outlets) 4 at each table in a floor box      | Room-Large"<br>C4.2.2.5,  |                       | Refer to Section 7.9.13.2(2) |  |
| Bed   |  |   |   |                       | for details.                 |  |
| Boom  |  |   | Type 1 in all   |                       |                              |  |
| Ceiling   |  |   | others  |                       |                              |  |
| Specialty, equipment specific                         | Staff workflow station at room entry   | 4   |   |                       |                              | Additional data outlet(s) for specialty equipment or workstation   |

#### Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

|   |  | Room Tem  | nplate 23: Conference/Meeting                | Rooms                                   |   |  |
|---|--|---|--|---|---|--|
| Lighting Function Types                                     | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting) | Illuminance Targets (minimum average lux)   | Local Contro                                 | ols                                     | Power Source  | Notes / Other Requirements   |
| General Area Lighting                                       | Direct/indirect (ceiling)  | 500   | Room entry (dim                              | nming)                                  | Conditional with selected Vital fixtures for safety | Any rooms with room dividers require individual control in each section as well as a master control for when dividers are not in use, zone control (such as lower light level at AV equipment) |
| Exam Lighting, general                                      |  |   |  | N/A                                     |   |  |
| Exam or surgical lighting, specific medical equipment       |  |   |  | N/A                                     |   |  |
| Bedside Staff light   |  |   |  | N/A                                     |   |  |
| Patient Reading light                                       |  |   | 1  | N/A                                     |   |  |
| Workstation lighting  | Ceiling  | 750   | At workstation (di                           |   | Vital   |  |
| Night light   |  |   |  | N/A                                     |   |  |
| Observation lighting  |  |   |  | N/A                                     |   |  |
| Instrument processing lighting Visitor/Family zone lighting |  |   |  | N/A<br>N/A                              |   |  |
|   |  |   |  | N/A<br>N/A                              |   |  |
| Shower  |  |   | 1  | IN/A                                    |   |  |
| Specialty Lighting  | N/A (equipment-specific)   | N/A (equipment-specific)  | N/A (equipment-s                             | pecific)                                | Conditional with selected Vital fixtures for safety | As required to suit equipment in equipment list  |
| Warning Lights (in-use / do not enter)                      |  |   |  | N/A                                     |   |  |
| Battery packs (backup unit lighting)                        |  |   |  | N/A                                     |   |  |
| Power Outlet Locations                                      | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits  | # of du                                      | plex UPS outlets / c                    | ircuits   | Notes / Other Requirements   |
| Headwall Provider zone                                      |  |   |  |   |   |  |
| Headwall Patient zone                                       |  |   |  |   |   |  |
| Bed Patient Lift  |  |   |  |   |   |  |
| Boom  |  |   |  |   |   |  |
| Housekeeping  |  | 1/0.5 per dividable room section  |  |   |   | 5-20R outlet   |
| General use (spacing / location specified)                  | 1/0.5 per 3m of wall,<br>2/1 per 2m of counter                               | 1/0.3 per 2m of wall, 2/1 per 2m of counter, flush floor outlets such that no piece of equipment is more than 2m from an outlet |  |   |   | Outlets noted are in addition to standard workstation requirements, one half of counter outlets to be above counter and the other half below   |
| Specialty, equipment specific                               |  |   |  |   |   | Additional outlets and circuits to be provided for each item in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist        |
| Nursing control zone  |  |   |  |   |   |  |
| Observation room or station or area or ante room            |  |   |  |   |   |  |
|   |  | Data Drop Quantity  |  | Clinical                                |   |  |
| Division 27   | Nurse Call   | Structured Cabling Infrastructure Data Density (IMIT, PM, GI)   | Multimedia Room Template                     | Observation<br>Camera<br>Infrastructure | Location Services<br>Infrastructure                 | Additional Infrastructure Requirements   |
| Basic Requirement   | Not Required   | As Appropriate  | YES  | NO                                      | YES   | Clocks: in location(s) to be visible from everywhere in room   |
| Headwall Provider zone                                      |  |   |  |   |   |  |
| Headwall Patient zone                                       |  |   | Type 2 in X-small / Small /                  |   |   |  |
| Footwall  |  |   | Medium rooms and Observation/Seminar room    |   |   |  |
| General use (spacing / location specified)                  | Staff Assist/Code Station  | 4 at display wall (in 2 separate outlets) 4 at each table in a floor box  | Type 3 in Large / X-large                    |   | Refer to Section 7.9.13.2(2)                        | Nurse Call devices required in Conference/Meeting Rooms used for therapy and rehabilitation meetings (both sides of dividable rooms)   |
| Bed   |  |   | Dividable rooms                              |   | for details.  |  |
| Boom  |  |   |  |   |   |  |
| Ceiling   |  |   | Type 3 in Imaging CT/MRI<br>Future Expansion |   |   |  |
| Specialty, equipment specific                               | 4-Button at room entry   | 4   |  |   |   | Additional data outlet(s) for specialty equipment or workstation   |

#### Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

|   |  |  | Room Template 24            | 4: Secure Room                    |                                     |  |
|---|--|--|-----------------------------|-----------------------------------|-------------------------------------|--|
| Lighting Function Types                               | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting) | Illuminance Targets (minimum average lux)  | Local Co                    | ontrols                           | Power Source                        | Notes / Other Requirements                             |
| General Area Lighting                                 | Direct (ceiling/wall)  | 500  | Outside room er             | ntry (dimming)                    | Vital                               |  |
| Exam Lighting, general                                |  |  |                             |                                   | N/A                                 |  |
| Exam or surgical lighting, specific medical equipment |  |  |                             |                                   | N/A                                 |  |
| Bedside Staff light                                   |  |  |                             |                                   | N/A                                 |  |
| Patient Reading light                                 |  |  |                             |                                   | N/A                                 |  |
| Workstation lighting                                  |  |  | T                           |                                   | N/A                                 |  |
| Night light   | Ceiling-mount  | 30   | Outside ro                  | om entry                          | Vital                               | Amber colour, addressable control not required         |
| Observation lighting                                  |  |  |                             |                                   | N/A                                 |  |
| Instrument processing lighting                        |  |  |                             |                                   | N/A                                 |  |
| Visitor/Family zone lighting                          |  |  |                             |                                   | N/A                                 |  |
| Shower  |  |  |                             |                                   | N/A                                 |  |
| Specialty Lighting                                    |  |  |                             |                                   | N/A                                 |  |
| Warning Lights (in-use / do not enter)                |  |  |                             |                                   | N/A                                 |  |
| Battery packs (backup unit lighting)                  |  |  |                             |                                   | N/A                                 |  |
| Power Outlet Locations                                | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                                       | # 0                         | of duplex UPS outl                | ets / circuits                      | Notes / Other Requirements                             |
| Headwall Provider zone                                |  |  |                             |                                   | N/A                                 |  |
| Headwall Patient zone                                 |  |  |                             |                                   | N/A                                 |  |
| Bed   |  |  |                             |                                   | N/A                                 |  |
| Patient Lift  |  |  |                             |                                   | N/A                                 |  |
| Boom  |  |  |                             |                                   | N/A                                 |  |
| Housekeeping  |  |  |                             |                                   | N/A                                 |  |
| General use (spacing / location specified)            |  |  |                             |                                   | N/A                                 |  |
| Specialty, equipment specific                         |  |  |                             |                                   | N/A                                 |  |
| Nursing control zone                                  |  |  |                             |                                   | N/A                                 |  |
| Observation room or station or area or ante room      |  |  |                             |                                   | N/A                                 |  |
| Division 27   | Nurse Call   | Data Drop Quantity Structured Cabling Infrastructure Data Density (IMIT, PM, GI) | Multimedia<br>Room Template | Clinical<br>Observation<br>Camera | Location Services<br>Infrastructure | Additional Infrastructure Requirements                 |
| Basic Requirement                                     | Required   | Zero   | NO                          | YES                               | YES                                 | Clocks: None   |
| Headwall Provider zone                                |  |  |                             |                                   |                                     |  |
| Headwall Patient zone                                 |  |  |                             |                                   |                                     |  |
| Footwall  |  |  |                             |                                   |                                     |  |
| General use (spacing / location specified)            |  |  |                             | Corner mount                      |                                     |  |
| Bed   |  |  |                             | secure clinical                   | Refer to Section 7.9.13.2(2)        |  |
| Boom  |  |  |                             | camera.                           | for details.                        |  |
| Ceiling   |  |  |                             |                                   |                                     | RTLS infrastructure to be hidden inside ceiling space. |
| Specialty, equipment specific                         | Staff Assist/Code station outside room. Staff workflow station outside room. |  |                             |                                   |                                     |  |

#### Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

|   |  | Room Tempi  | ate 25: Rehabilita | tion Rooms            |   |  |
|---|--|---|--------------------|-----------------------|---|--|
| Lighting Function Types                                     | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting)   | Illuminance Targets (minimum average lux)   | Local              | Controls              | Power Source  | Notes / Other Requirements   |
| General Area Lighting                                       | Direct/indirect (ceiling)  | 300   | Room Entry (       | dimming, zones)       | Conditional with selected Vital fixtures for safety | Select fixtures with low glare in areas where patients could be facing the ceiling   |
| Exam Lighting, general                                      |  |   |                    | N/A                   |   |  |
| Exam or surgical lighting, specific medical equipment       |  |   |                    | N/A                   |   |  |
| Bedside Staff light   |  |   |                    | N/A                   |   |  |
| Patient Reading light                                       |  |   |                    | N/A                   |   |  |
| Workstation lighting  | Ceiling  | 750   | At workstat        | ion (dimming)         | Conditional   |  |
| Night light   |  |   |                    | N/A                   |   |  |
| Observation lighting  |  |   |                    | N/A<br>N/A            |   |  |
| Instrument processing lighting Visitor/Family zone lighting |  |   |                    | N/A                   |   |  |
| Shower  |  |   |                    | N/A                   |   |  |
| Specialty Lighting  | N/A (equipment-specific)   | N/A (equipment-specific)  | N/A (equip         | ment-specific)        | Conditional with selected Vital fixtures for safety | As required to suit equipment in equipment list  |
| Warning Lights (in-use / do not enter)                      |  |   |                    | N/A                   |   |  |
| Battery packs (backup unit lighting)                        |  |   |                    | N/A                   |   |  |
| Power Outlet Locations                                      | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits  | #                  | of duplex UPS outl    | Notes / Other Requirements                          |  |
| Headwall Provider zone                                      |  |   |                    |                       |   |  |
| Headwall Patient zone                                       |  |   |                    |                       |   |  |
| Bed   |  | 142.5   |                    |                       |   |  |
| Patient Lift  |  | 1/0.5   |                    |                       |   | Required for each patient lift   |
| Boom  |  | 1/0 5   |                    |                       |   | 5-20R outlet   |
| Housekeeping  |  | 1/0.5   |                    |                       |   | 5-20K OUTIET   |
| General use (spacing / location specified)                  | 1/0.5 per side of patient station,<br>1/0.5 per 2m of counter,<br>flush floor outlets such that no piece of<br>equipment is more than 2m from a Vital outlet | 1/0.5 per side of patient station,<br>1/0.3 per 2m of wall,<br>2/1 per 2m of counter,<br>flush floor outlets such that no piece of equipment<br>is more than 2m from a Conditional outlet |                    |                       |   | Outlets noted are in addition to standard workstation requirements, one half of counter outlets to be above counter and the other half below. Patient station means a location dedicated to patient treatment (i.e. stretcher, plinth, bed, chair) |
| Specialty, equipment specific                               |  |   |                    |                       |   | Additional outlets and circuits to be provided for each item in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist  |
| Nursing control zone  |  |   |                    |                       |   |  |
| Observation room or station or area or ante room            |  |   |                    |                       |   |  |
|   |  | Data Drop Quantity  | Multimedia         | Clinical              | Location Services                                   |  |
| Division 27   | Nurse Call   | Structured Cabling Infrastructure Data Density (IMIT, PM, GI)   | Room Template      | Observation<br>Camera | Infrastructure                                      | Additional Infrastructure Requirements   |
| Basic Requirement   | Required   | As appropriate  | NO                 | NO                    | YES   | Clocks: In location(s) to be visible from everywhere in room   |
| Headwall Provider zone                                      |  |   |                    |                       |   |  |
| Headwall Patient zone                                       |  |   |                    |                       |   |  |
| Footwall  |  |   |                    |                       |   |  |
| General use (spacing / location specified) Bed              | 4-Button in each patient care area   | 2 per workstation   |                    |                       | Refer to Section 7.9.13.2(2) for details.           |  |
| Boom  |  |   |                    |                       | for details.  |  |
| Ceiling   |  |   |                    |                       |   |  |
| Specialty, equipment specific                               |  |   |                    |                       |   |  |

#### Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

|   |  | Room Templat  | e 26: Clinical Suppo        | ort Rooms                         |  |  |
|---|--|---|-----------------------------|-----------------------------------|--|--|
| Lighting Function Types                               | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting) | Illuminance Targets (minimum average lux)   |                             | Controls                          | Power Source   | Notes / Other Requirements   |
| General Area Lighting                                 | Direct/indirect (ceiling)  | 500   | At each zone e              | entry (dimming)                   | Conditional with selected<br>Vital fixtures for safety |  |
| Exam Lighting, general                                |  |   |                             | N/A                               |  |  |
| Exam or surgical lighting, specific medical equipment |  |   |                             | N/A                               |  |  |
| Bedside Staff light                                   |  |   |                             | N/A                               |  |  |
| Patient Reading light                                 | Ceiling  | 750   | At workstati                | N/A<br>on (dimming)               | Conditional  |  |
| Workstation lighting Night light                      | Centrig  | /30   | At Workstati                | N/A                               | Conditional  |  |
| Observation lighting                                  |  |   |                             | N/A                               |  |  |
| Instrument processing lighting                        |  |   |                             | N/A                               |  |  |
| Visitor/Family zone lighting                          |  |   |                             | N/A                               |  |  |
| Shower  |  |   |                             | N/A                               |  |  |
| Specialty Lighting                                    | N/A (equipment-specific)   | N/A (equipment-specific)  | N/A (equipn                 | nent-specific)                    | Conditional with selected<br>Vital fixtures for safety | As required to suit equipment in equipment list  |
| Warning Lights (in-use / do not enter)                |  |   |                             | N/A                               |  |  |
| Battery packs (backup unit lighting)                  |  |   |                             | N/A                               |  |  |
| Power Outlet Locations                                | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits  | #                           | of duplex UPS out                 | lets / circuits  | Notes / Other Requirements   |
| Headwall Provider zone                                |  |   |                             |                                   |  |  |
| Headwall Patient zone                                 |  |   |                             |                                   |  |  |
| Bed   |  |   |                             |                                   |  |  |
| Patient Lift  |  |   |                             |                                   |  |  |
| Boom<br>Housekeeping                                  |  | 1/0.5   |                             |                                   |  | 5-20R outlet   |
| General use (spacing / location specified)            | 1/0.5 per 3m of wall,<br>2/1 per 2m of counter/bench                         | 1/0.3 per 2m of wall, 2/1 per 2m of counter/bench, flush floor outlets such that no piece of equipment is more than 2m from an outlet |                             |                                   |  | Outlets noted are in addition to standard workstation requirements, one half of counter outlets to be above counter and the other half below. MDRD workstations for sorting and inspection to have additional flush ceiling mounted twistlock outlets on dedicated circuits from each of vital, conditional, and UPS, with matching extension drops to duplex receptacles in PVC outlet boxes suspended 300mm above countertop. Provide one set of these outlets and extensions for each 2.5m length of bench/counter, arranged such that the cable drop will be offset at the ceiling with a supportive gripping mechanism such that the drop can be aligned exactly where needed |
| Specialty, equipment specific                         |  |   |                             |                                   |  | Additional outlets and circuits to be provided for each item in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist  |
| Nursing control zone                                  |  |   |                             |                                   |  |  |
| Observation room or station or area or ante room      |  |   |                             |                                   |  |  |
| Division 27   | Nurse Call   | Data Drop Quantity Structured Cabling Infrastructure Data Density (IMIT, PM, GI)  | Multimedia<br>Room Template | Clinical<br>Observation<br>Camera | Location Services<br>Infrastructure                    | Additional Infrastructure Requirements   |
| Basic Requirement                                     | Required   | As Appropriate  | NO                          | NO                                | YES  | Clocks: In location(s) to be visible from everywhere in room, not required in rooms smaller than 10 square metres  |
| Headwall Provider zone                                |  |   |                             |                                   |  |  |
| Headwall Patient zone                                 |  |   |                             |                                   |  |  |
| Footwall  |  |   |                             |                                   |  |  |
| General use (spacing / location specified)            | Pull Cord Station with Audio in Patient change areas                         | 3 per ADC   |                             |                                   | Defends Coati 7.0 co 2(c)                              |  |
| Bed   |  |   |                             |                                   | Refer to Section 7.9.13.2(2) for details.              |  |
| Boom  |  |   |                             |                                   | for details.   |  |
| Ceiling   |  |   |                             |                                   |  |  |
| Specialty, equipment specific                         | Duty stations in Medication rooms.   | 2 per wall mounted display<br>2 per workstation<br>3 per multi-function printer   |                             |                                   |  |  |

#### Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

|   |  | Room Template   | e 27: Patient Supp           | ort Rooms                         |   |   |
|---|--|---|------------------------------|-----------------------------------|---|---|
|   |  | ·   |                              |                                   |   |   |
| Lighting Function Types                               | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting) | Illuminance Targets (minimum average lux)   | Local Controls Power Source  |                                   | Power Source  | Notes / Other Requirements  |
| General Area Lighting                                 | Direct/indirect (ceiling)  | 500   | At each zone e               | entry (dimming)                   | Conditional with selected Vital fixtures for safety |   |
| Exam Lighting, general                                |  |   |                              | N/A                               |   |   |
| Exam or surgical lighting, specific medical equipment |  |   |                              | N/A                               |   |   |
| Bedside Staff light                                   |  |   |                              | N/A                               |   |   |
| Patient Reading light                                 |  |   |                              | N/A                               |   |   |
| Workstation lighting                                  | Ceiling  | 750   | At workstati                 | ion (dimming)                     | Conditional   |   |
| Night light   |  |   |                              | N/A                               |   |   |
| Observation lighting                                  |  |   |                              | N/A                               |   |   |
| Instrument processing lighting                        |  |   |                              | N/A                               |   |   |
| Visitor/Family zone lighting                          |  |   |                              | N/A                               |   |   |
| Shower  |  |   |                              | N/A                               |   |   |
| Specialty Lighting                                    | N/A (equipment-specific)   | N/A (equipment-specific)  | N/A (equipr                  | ment-specific)                    | Conditional with selected Vital fixtures for safety | As required to suit equipment in equipment list; Full spectrum colour-tuning and 1% dimming lights in Sensory Modulation Rooms  |
| Warning Lights (in-use / do not enter)                |  |   |                              | N/A                               |   |   |
| Battery packs (backup unit lighting)                  |  |   |                              | N/A                               |   |   |
| Power Outlet Locations                                | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits  | #                            | of duplex UPS out                 | lets / circuits                                     | Notes / Other Requirements  |
| Headwall Provider zone                                |  |   |                              |                                   |   |   |
| Headwall Patient zone                                 |  |   |                              |                                   |   |   |
| Bed   |  |   |                              |                                   |   |   |
| Patient Lift  |  |   |                              |                                   |   |   |
| Boom  |  |   |                              |                                   |   |   |
| Housekeeping  |  | 1/0.5   |                              |                                   |   | 5-20R outlet  |
| General use (spacing / location specified)            | 1/0.5 per 3m of wall,<br>2/1 per 2m of counter                               | 1/0.3 per 2m of wall, 2/1 per 2m of counter, flush floor outlets such that no piece of equipment is more than 2m from an outlet |                              |                                   |   | Outlets noted are in addition to standard workstation requirements, one half of counter outlets to be above counter and the other half below  |
| Specialty, equipment specific                         |  |   |                              |                                   |   | Additional outlets and circuits to be provided for each item in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist |
| Nursing control zone                                  |  |   |                              |                                   |   |   |
| Observation room or station or area or ante room      |  |   |                              |                                   |   |   |
| Division 27   | Nurse Call   | Data Drop Quantity Structured Cabling Infrastructure Data Density (IMIT, PM, GI)  | Multimedia<br>Room Template  | Clinical<br>Observation<br>Camera | Location Services<br>Infrastructure                 | Additional Infrastructure Requirements  |
| Basic Requirement                                     | Required   | As Appropriate  | YES                          | NO                                | YES   | Clocks: In location(s) to be visible from everywhere in room  |
| Headwall Provider zone                                |  |   |                              |                                   |   |   |
| Headwall Patient zone                                 |  |   |                              |                                   |   |   |
|   |  |   |                              |                                   |   |   |
| Footwall  |  | 4 at Display Wall (in 2 separate outlets)   | Type 2 in the                |                                   |   |   |
| General use (spacing / location specified)            | Pull Cord Station with Audio   | 4 at each table in a floor box  | following rooms:<br>C4.2.2.4 |                                   | Refer to Section 7.9.13.2(2) for details.           | Additional Nurse Call devices as required by Schedule 3, Section 7.9.11.  |
| Bed<br>Boom   |  |   | C4.2.3.16                    |                                   | ioi detailoi  |   |
| Boom  |  |   | H2.2.2.2                     |                                   |   |   |
| Ceiling   |  |   |                              |                                   |   |   |
|   |  |   |                              |                                   |   |   |

#### Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

Room Template 28: Generic Clinical Skills Rooms (to match patient room being used for skills training)

|   |  | Room Tempiate 28: Generic Clinical Skills Ro                  | oms (to maten pat           | ient room being us                | eu joi skiiis truiiiiigj                               |  |
|---|--|---|-----------------------------|-----------------------------------|--|--|
| Lighting Function Types                               | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting) | Illuminance Targets (minimum average lux)                     | Local (                     | Controls                          | Power Source   | Notes / Other Requirements   |
| General Area Lighting                                 | Direct/indirect (ceiling)  | 500   | I Room entry (dimming). I   |                                   | Conditional with selected<br>Vital fixtures for safety | Illuminance targets must be met at hand hygiene sink when standing in front of it. to match actual patient rooms (typical)   |
| Exam Lighting, general                                | Ceiling (over abdomen)   | 1000  |                             | ne (dimming)<br>om (dimming)      | Vital  | Local and remote outside room (observation window) dimmers   |
| Exam or surgical lighting, specific medical equipment | N/A (equipment-specific)   | N/A (equipment-specific)                                      | Equipme                     | ent-specific                      | UPS  | Refer to equipment list, used where articulated light source needs to provide high light level with controlled beam  |
| Bedside Staff light                                   | Ceiling or wall-mount  | 100   | Provider zo                 | ne (dimming)                      | Vital  |  |
| Patient Reading light                                 | Ceiling or wall-mount  | 300   | Patient zor                 | ne (dimming)                      | Vital  | Reading lights at bed and visitor/patient chair  |
| Workstation lighting                                  |  |   |                             | N/A                               |  |  |
| Night light   | Wall-mount (patient zone & Provider zone)                                    | 30  | Patient zon                 | e, room entry                     | Vital  | Amber colour, located approximately 1200mm AFF on both sides of bed  |
| Observation lighting                                  | Direct/indirect (ceiling)  | 500   | Control roo                 | om (dimming)                      | Conditional with selected Vital fixtures for safety    | Lighting in observation / control room   |
| Instrument processing lighting                        |  |   |                             | N/A                               |  |  |
| Visitor/Family zone lighting                          |  |   |                             | N/A                               |  |  |
| Shower  |  |   |                             | N/A                               |  |  |
| Specialty Lighting                                    |  |   |                             | N/A                               |  |  |
| Warning Lights (in-use / do not enter)                |  |   |                             | N/A                               |  |  |
| Battery packs (backup unit lighting)                  |  |   |                             | N/A                               |  |  |
| Power Outlet Locations                                | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                    |                             | of duplex UPS out                 | lets / circuits  | Notes / Other Requirements   |
| Headwall Provider zone                                | 4/4  | 2/1.5   |                             | 1/0.5 (for mo<br>1/1 (for ultra   |  | Monitor circuit may only be shared with other monitors, 5-20R outlet for mobile ultrasound equipment, two general use 5-20R outlets to match actual patient rooms  |
| Headwall Patient zone                                 | 4/2  | 1/0.5   |                             |                                   |  | Circuits may be shared with Provider zone  |
| Bed   |  | 1/0.5   |                             |                                   |  |  |
| Patient Lift  |  | 1/0.5   |                             |                                   |  | Patient lift and bed in same room may share same circuit   |
| Boom  |  | ·   |                             |                                   |  | Duplicate headwall outlet requirements on each boom in rooms with booms  |
| Housekeeping  |  | 1/1   |                             |                                   |  | 5-20R outlet near room entry   |
| General use (spacing / location specified)            |  | <u> </u>  |                             |                                   |  |  |
| Specialty, equipment specific  Nursing control zone   |  |   |                             |                                   |  | Additional outlets and circuits to be provided for each item in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist. 1/0.25 duplex vital outlets/circuits for each TV and each handsfree sink controls |
| Observation room or station or area or ante room      | 14/7 per room being observed   |   |                             |                                   |  | Outlets noted are in addition to standard workstation requirements   |
|   |  | Data Drop Quantity  |                             | Climinal                          |  |  |
| Division 27   | Nurse Call   | Structured Cabling Infrastructure Data Density (IMIT, PM, GI) | Multimedia<br>Room Template | Clinical<br>Observation<br>Camera | Location Services<br>Infrastructure                    | Additional Infrastructure Requirements   |
| Basic Requirement                                     | Required   | High  | YES                         | NO                                | YES  | Clocks: One visible from provider zone   |
| Headwall Provider zone                                | Patient Station  | 4 (in 2 separate outlets)                                     |                             |                                   |  | ·  |
| Headwall Patient zone                                 | i duent station  | A   |                             |                                   |  |  |
| Footwall  | Nurse Call Connection to Display location                                    | 4   | -                           |                                   |  | Wall-mounted display locations to have one (1) additional 2-gang box connected to 2-gang box behind display  |
| General use (spacing / location specified)            | Pull Cord at patient chair   |   |                             |                                   | Refer to Section 7.9.13.2(2)                           |  |
| Bed   | ,  |   | 5                           |                                   | for details.   | Patient bed locations to have one (1) additional 2-gang box stubbed to cable tray  |
| Boom  |  |   |                             |                                   | Tor details.   | When bed/stretcher is islanded requirements for headwall are to be relocated to boom   |
|   |  |   |                             |                                   |  | 2 22, 22 22 22 22 22 22 22 22 22 22 22 2   |
| Ceiling   |  |   |                             |                                   |  | Hard ceiling rooms to have one (1) additional 2-gang box stubbed to cable tray   |
| Specialty, equipment specific                         | Staff Terminal at room entry   | 4   |                             |                                   |  | Additional data outlet(s) for specialty equipment or workstation   |
|   |  |   |                             |                                   |  |  |
|   | 1  |   | 7                           |                                   |  |  |

#### Legend:

IMIT: IMIT Data Network
PM: Physiological Monitoring Network
GI: Guest Infotainment Network

|   |  | Room Templa  | te 29: Media Servi          | ces Room              |   |   |
|---|--|--|-----------------------------|-----------------------|---|---|
| Lighting Function Types                               | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting) | Illuminance Targets (minimum average lux)                      | Local                       | Controls              | Power Source  | Notes / Other Requirements  |
| General Area Lighting                                 | Direct/indirect (ceiling)  | 500  | Room Ent                    | ry (dimming)          | Conditional with selected Vital fixtures for safety | Remote dimming control of associated room also required at control room window (control room only)  |
| Exam Lighting, general                                |  |  |                             | N/A                   |   |   |
| Exam or surgical lighting, specific medical equipment |  |  |                             | N/A                   |   |   |
| Bedside Staff light                                   |  |  |                             | N/A                   |   |   |
| Patient Reading light                                 |  |  |                             | N/A                   |   |   |
| Workstation lighting                                  | Direct/indirect (ceiling)  | 750  | At workstat                 | ion (dimming)         | Vital   | Separate control for fixtures above countertop at control room window (control room only)   |
| Night light   |  |  |                             | N/A                   |   |   |
| Observation lighting                                  |  |  |                             | N/A                   |   |   |
| Instrument processing lighting                        |  |  |                             | N/A                   |   |   |
| Visitor/Family zone lighting                          |  |  |                             | N/A                   |   |   |
| Shower  |  |  |                             | N/A                   |   |   |
| Specialty Lighting                                    |  |  |                             | N/A                   |   |   |
| Warning Lights (in-use / do not enter)                |  |  |                             | N/A                   |   |   |
| Battery packs (backup unit lighting)                  |  |  |                             | N/A                   |   |   |
| Power Outlet Locations                                | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits                     | ;                           | # of duplex UPS out   | tlets / circuits                                    | Notes / Other Requirements  |
| Headwall Provider zone                                |  |  |                             |                       |   |   |
| Headwall Patient zone                                 |  |  |                             |                       |   |   |
| Bed   |  |  |                             |                       |   |   |
| Patient Lift  |  |  |                             |                       |   |   |
| Boom  |  |  |                             |                       |   |   |
| Housekeeping  |  | 1/0.5  |                             |                       |   | 5-20R outlet near each room entry door  |
| General use (spacing / location specified)            | 1/0.5 per 1m of wall,<br>1/0.5 counter GFCI receptacle at sink               |  |                             |                       |   | Outlets noted are in addition to standard workstation requirements. All workstation/general use outlets to be 5-20R type.   |
| Specialty, equipment specific                         |  |  |                             |                       |   | Additional outlets and circuits to be provided for each item in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist |
| Nursing control zone                                  |  |  |                             |                       |   |   |
|   |  |  |                             |                       |   |   |
| Observation room or station or area or ante room      |  | Data Drop Quantity   |                             | Clinical              |   |   |
| Division 27   | Nurse Call   | Structured Cabling Infrastructure  Data Density (IMIT, PM, GI) | Multimedia<br>Room Template | Observation<br>Camera | Location Services Infrastructure                    | Additional Infrastructure Requirements  |
| Basic Requirement                                     | Not Required   | As Appropriate   | YES                         | NO                    | YES   | Clocks: One in room and readily visible from everywhere in room   |
| Headwall Provider zone                                |  |  |                             |                       |   |   |
| Headwall Patient zone                                 |  |  |                             |                       |   |   |
| Footwall  |  |  |                             |                       |   |   |
| General use (spacing / location specified)            |  | 2 per workstation  | 1                           |                       |   |   |
| Bed   |  | _ pssa.a.a.  | -<br>5                      |                       | Refer to Section 7.9.13.2(2)                        |   |
| Boom  |  |  | 1                           |                       | for details.  |   |
|   |  |  | 1                           |                       |   |   |
| Ceiling   |  |  |                             |                       |   |   |
| Specialty, equipment specific                         |  | 2 per wall mounted display<br>3 per multi- function printer    |                             |                       |   |   |

#### Legend:

IMIT: IMIT Data Network
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|   |  | Room Template   | 30: Technical Sup   | oort Rooms            |  |   |
|---|--|---|---|-----------------------|--|---|
| Lighting Function Types                               | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting) | Illuminance Targets (minimum average lux)   | Local (   | Controls              | Power Source   | Notes / Other Requirements  |
| General Area Lighting                                 | Direct/indirect (ceiling)  | 500   | At each zone entry (dimming)  Conditional with selected Vital fixtures for safety |                       |  |   |
| Exam Lighting, general                                |  |   |   | N/A                   |  |   |
| Exam or surgical lighting, specific medical equipment |  |   |   | N/A                   |  |   |
| Bedside Staff light                                   |  |   |   | N/A                   |  |   |
| Patient Reading light                                 | Cailing  | 750   | At workstati  | N/A<br>on (dimming)   | Conditional  |   |
| Workstation lighting Night light                      | Ceiling  | /30   | At Workstati  | N/A                   | Conditional  |   |
| Observation lighting                                  |  |   |   | N/A                   |  |   |
| Instrument processing lighting                        |  |   |   | N/A                   |  |   |
| Visitor/Family zone lighting                          |  |   |   | N/A                   |  |   |
| Shower  |  | T   | I   | N/A                   |  |   |
| Specialty Lighting                                    | N/A (equipment-specific)   | N/A (equipment-specific)  | N/A (equipr   | nent-specific)        | Conditional with selected<br>Vital fixtures for safety | As required to suit equipment in equipment list   |
| Warning Lights (in-use / do not enter)                |  |   |   | N/A                   |  |   |
| Battery packs (backup unit lighting)                  |  |   |   | N/A                   |  |   |
| Power Outlet Locations                                | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits  | #   | of duplex UPS outl    | lets / circuits  | Notes / Other Requirements  |
| Headwall Provider zone                                |  |   |   |                       |  |   |
| Headwall Patient zone                                 |  |   |   |                       |  |   |
| Bed   |  |   |   |                       |  |   |
| Patient Lift<br>Boom                                  |  |   |   |                       |  |   |
| Housekeeping  |  | 1/0.5   |   |                       |  | 5-20R outlet  |
| General use (spacing / location specified)            | 1/0.5 per 2m of wall,<br>2/1 per 2m of counter/bench                         | 1/0.3 per 2m of wall, 2/1 per 2m of counter/bench, flush floor outlets such that no piece of equipment is more than 2m from an outlet |   |                       |  | Outlets noted are in addition to standard workstation requirements, one half of counter outlets to be above counter and the other half below. All workstation/general use outlets to be 5-20R type.   |
| Specialty, equipment specific                         |  |   |   |                       |  | Additional outlets and circuits to be provided for each item in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist. Provide at least one outlet of each type used by equipment that will be maintained or tested in the room (e.g laser outlets, other specialty biomed equipment) |
| Nursing control zone                                  |  |   |   |                       |  |   |
| Observation room or station or area or ante room      |  |   |   |                       |  |   |
|   |  | Data Drop Quantity  | Multimedia  | Clinical              | Location Services                                      |   |
| Division 27   | Nurse Call   | Structured Cabling Infrastructure<br>Data Density (IMIT, PM, GI)  | Room Template   | Observation<br>Camera | Infrastructure   | Additional Infrastructure Requirements  |
| Basic Requirement                                     | Not Required   | As Appropriate  | NO  | NO                    | YES  | Clocks: In location(s) such that it can be seen from anywhere in room   |
| Headwall Provider zone                                |  |   |   |                       |  |   |
| Headwall Patient zone                                 |  |   |   |                       |  |   |
| Footwall  |  |   |   |                       |  |   |
| General use (spacing / location specified) Bed        |  |   |   |                       | Pofor to Soction 7.0 42.2(2)                           |   |
| Boom  |  |   |   |                       | Refer to Section 7.9.13.2(2) for details.              |   |
| Ceiling   |  |   |   |                       | ioi detaiis.   |   |
|   |  | 2 per wall mounted display  |   |                       |  |   |
| Specialty, equipment specific                         |  | 2 per workstation<br>3 per multi-function printer   |   |                       |  |   |

#### Legend:

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|   |  | Room Temp  | olate 31: Autopsy R | Room                    |   |   |
|---|--|--|---------------------|-------------------------|---|---|
| Lighting Function Types                               | Lighting method (direct, indirect, wall-mount, ceiling-mount, task lighting) | Illuminance Targets (minimum average lux)            | Local (             | Controls                | Power Source  | Notes / Other Requirements  |
| General Area Lighting                                 | Direct/indirect (ceiling)  | 500  |                     | y (dimming)             | Conditional with selected Vital fixtures for safety | Illuminance targets must be met at hand hygiene sink when standing in front of it   |
| Exam Lighting, general                                | Ceiling (over abdomen)   | 1000   | Provider zo         | ne (dimming)            | Vital   |   |
| Exam or surgical lighting, specific medical equipment | N/A (equipment-specific)   | N/A (equipment-specific)                             | Equipme             | nt-specific             | UPS   | Refer to equipment list, used where articulated light source needs to provide high light level with controlled beam   |
| Bedside Staff light                                   |  |  |                     | N/A                     |   |   |
| Patient Reading light                                 |  |  |                     | N/A                     |   |   |
| Workstation lighting                                  | Ceiling  | 750  | At workstati        | on (dimming)            | Conditional   |   |
| Night light   |  |  |                     | N/A                     |   |   |
| Observation lighting                                  |  |  |                     | N/A                     |   |   |
| Instrument processing lighting                        |  |  |                     | N/A                     |   |   |
| Visitor/Family zone lighting                          |  |  |                     | N/A                     |   |   |
| Shower  |  |  |                     | N/A                     |   |   |
| Specialty Lighting                                    |  |  |                     | N/A                     |   |   |
| Warning Lights (in-use / do not enter)                |  |  |                     | N/A                     |   |   |
| Battery packs (backup unit lighting)                  |  |  |                     | N/A                     |   |   |
| Power Outlet Locations                                | # of duplex Vital outlets / circuits   | # of duplex Conditional outlets / circuits           | #                   | of duplex UPS out       | lets / circuits                                     | Notes / Other Requirements  |
| Headwall Provider zone                                | 2/0.5  | 1/0.5  |                     |                         |   |   |
| Headwall Patient zone                                 | 2/0.5  | 1/0.5  |                     |                         |   |   |
| Bed   | ,  |  |                     |                         |   |   |
| Patient Lift  |  | 1/0.5  |                     |                         |   | Required only when patient lift required in room  |
| Boom  |  |  |                     |                         |   | When bed/stretcher is islanded, requirements for headwall are to be relocated to boom/plinth  |
| Housekeeping  |  | 1/0.5  |                     |                         |   | 5-20R outlet near room entry door   |
| General use (spacing / location specified)            | 1/0.5 counter GFCI receptacle at sink  | 1/0.5 per 2m of wall                                 |                     |                         |   |   |
| Specialty, equipment specific                         |  |  |                     |                         |   | Additional outlets and circuits to be provided for all items in equipment list not specifically listed in this template, except mobile items where sufficient general use outlets exist |
| Nursing control zone                                  |  |  |                     |                         |   |   |
| Observation room or station or area or ante room      |  |  |                     |                         |   |   |
| Division 27   | Nurse Call   | Data Drop Quantity Structured Cabling Infrastructure | Multimedia          | Clinical<br>Observation | Location Services                                   | Additional Infrastructure Requirements  |
|   | . Tui Se Cuii  | Data Density (IMIT, PM, GI)                          | Room Template       | Camera                  | Infrastructure                                      |   |
| Basic Requirement                                     | Required   | Low  | YES                 | NO                      | YES   | Clocks: One visible from provider zone  |
| Headwall Provider zone                                |  |  |                     |                         |   |   |
| Headwall Patient zone                                 |  |  |                     |                         |   |   |
| Footwall  |  |  |                     |                         |   |   |
| General use (spacing / location specified)            |  | 4 at wall-mounted display                            |                     |                         | Refer to Section 7.9.13.2(2)                        |   |
| Bed   |  |  | 1                   |                         | for details.  | When bed/stretcher is islanded, requirements for headwall are to be relocated to boom   |
| Boom  |  |  |                     |                         |   |   |
| Ceiling   |  |  |                     |                         |   | Hard ceiling rooms to have one (1) additional 2-gang box stubbed to cable tray  |
| Specialty, equipment specific                         |  | 2  |                     |                         |   | Additional data outlet(s) for specialty equipment or workstation  |
| -p-sources appeared                                   |  | · · · · · · · · · · · · · · · · · · ·                |                     |                         |   |   |

Legend:

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PM: Physiological Monitoring Network
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