

## **Additional details for Internal Medicine**

### NEGATIVE PRESSURE ROOMS (3) AT THE ICU - NARRATIVE

- These rooms should be located nearest to the entrance of the ICU.
  - Each room should be tightly sealed to maintain air pressure difference.
  - A dedicated exhaust system is provided should be provided to the rooms.
  - The exhaust air duct should be independent of the building exhaust air system.
  - The pressure inside the room is lower than the corridor. The pressure differentials should not be less than 15Pa between the room and the corridor.
  - A clinical handwash basin with “hands free” operation provided.
  - A self-closing door.
  - 100% outside air ventilation (no return air permitted), with low level exhaust ducts approximately 150-300mm above floor level to discharge vertically to the outside air
  - A HEPA filtration system should be provided on the supply air ducting to protect the patient from unfiltered air.
  - Exhaust air should be HEPA filtered
  - Differential air pressure instrumentation panels are located in a prominent area near the corridor entry door for easy access by the staff when turning on/off the negative pressure system.
  - The air conditioning system of the rooms should be connected to an emergency power supply to maintain air pressurization in the event of power failure.
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- Windows in each room for adequate ventilation
  - Sliding glass doors (divided into three) for easy access of medical equipment
  - Supervisor's room (enough for 1 office table and 3 persons)
  - 2 toilet facilities within the area (for patients use) with handrail bars and built in IV hooks in the walls.
  - Electrical outlets should be on one side/place only(enough to accommodate 5-6 medical equipment and height is easily accessible to staff)
  - Nurses' station desk should be measured according the height of nurses when sitting down.