

ED Expansion - Option G

- Visible security presence at the entrance with easy access to other units for safety
- Registration at entrance to help guide patients to correct departments, as well as to ensure completed registration for ED patients upon discharge/admission
- Triage location will allow for more of a streamlined process for patients and allow for line of sight from PAS and security
- Negative pressure resuscitation room allows for patients that are critically ill with unknown COVID-19 status or other communicable diseases to be stabilized, i.e. intubation, cardiac arrest, respiratory arrest, without risk of exposure to department
- Airborne Infection Isolation (AII) room allows true isolation for easily communicable infectious processes. Currently the ED does not have a true AII room. The AII room will allow for patients to be able to use a dedicated bathroom, as well as staff having an ante room for donning and doffing
- Six negative pressure rooms to accommodate current/ future pandemic concerns (this was part of an original project that was rolled into the remodel due to the timing of the project)
- Two nurses' stations. The smaller nurse's station will accommodate line of sight to new rooms, and will also have space for providers to dictate, as well as other ancillary providers that need to chart and access patient records, i.e. PES(Psychiatric Emergency Services). Larger nurse's station will have a 360 degree view of the department and patient rooms. This will increase safety for patients and staff, to have visual, as well as being able to audibly hear calls for assistance
- Separate medication room so nurses can pull medications and calculate drug dosages in a space that decreases distraction to prevent medication errors(moving out of nurses station)
- Nutrition room moved to decrease traffic in nurse's station
- Added two more patient bathrooms, for a total of four. Bathrooms will be placed in areas that allow easy access for patients regardless of what area of the department they are in
- Adding an additional psychiatric room, and relocating existing psychiatric room, so that they are directly across from the nurse's station side by side, and farther away from the exterior doors
- With PAS moving by triage, able to utilize that space for easy access storage
- Sliding glass doors will be placed between trauma bed 1 and 2, to allow for increased privacy. Doors would be able to slide open and provide a larger work space for mass causality incidents

- Larger staff locker and breakroom to allow staff to have an area in which they can comfortably have breaks and eat. Current space allows for two staff members to break at a time and no space for staff personal belongings
- Case management office to accommodate three people, ED director's office, JEMA office and sleep room, extra office that can also be used for a family conference room
- Pharmacy on first floor (24 hrs.) in old waiting room space