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THE CHALLENGE
1. Can we custom design built-in or stand-alone furniture such as a reception desk or waiting area lounges?
   Yes, custom pieces are allowed.
2. Are we allowed to incorporate conceptual or futuristic medical technology, such as holographic imaging or immersive technologies that haven’t been invented yet, into the designed space?
   Yes.

PROGRAM REQUIREMENTS: PUBLIC SPACES
1. The bathrooms in the core are not ADA compliant. Do we still count them towards the required count of ADA bathrooms?
   Yes.
2. Can the reception in the waiting room double as reception and check in/check out?
   Yes.
3. Are the bathrooms able to be changed or moved for this competition?
   Leave the two (2) bathrooms as is per the floor plan.
4. Is there a function for the closets by the bathrooms and can these closets be changed?
   Closets can be changed as needed.
5. Are staff and patient bathrooms to be built in addition to the bathrooms already in the space?
   Bathrooms can be designated to either of those categories.

PROGRAM REQUIREMENTS: PATIENT SPACES
1. What is the difference between a consult room and an exam room?
   A consult room is where a doctor may review treatment plans. Examinations do not take place in consultation rooms.
2. 19 of the 20 exam rooms should be identical and designed to be functional based on the listed requirements. However, is it safe to assume that endoscopic procedures may also occur in these exam rooms, and therefore, should be designed to be suitable for such procedures? Or are they limited to the one large exam room?
   Endoscopic procedures will be limited to the one large exam room.
3. Who are the primary users of the area—between patients, guests of patients, and others?
   It will be a mix, but the primary users can be considered the patients.

PROGRAM REQUIREMENTS: CAREGIVER SPACES
1. What is the difference between practitioners’ offices and the clinical work areas?
   A practitioner’s office is for a Doctor of Nursing Practice—it is an office/work area, not a patient area. Clinical offices (AKA nurse stations) support nurses, patients, and doctors.
2. Are the lockers that are required for the space meant to be inside the staff lounge, in the adjacent hall, or in their own separate room?
   The location is up to your discretion. Keep in mind, they need to be accessible to staff and staff areas.
3. Are the staff lockers used for changing into scrubs or just for storing personal goods? Should there be a bench to sit on, and is privacy needed?
   Assume personal and work storage. Adding a bench is up to you.
OUTDOOR AREAS
1. Can we design outdoor areas such as a parking lot or outdoor lounges?
   No, please stay within the defined scope.

2. Under the given parameters, can we design exterior facades such as color of exterior wall or adding aesthetic designs on top of existing condition?
   No, please stay within the designed, interior scope.

3. Are there neighboring buildings?
   Yes. Please note that this is a fictitious project.

SUBMISSION REQUIREMENTS
1. Can we have more than one page of 24”x36” presentation boards?
   Each submission may contain only one (1) 24”x36” digital presentation board in PDF format, file size between 3MB and 10MB.

2. How pertinent is it to our overall presentation to include a material palette?
   It is up to you to include a material palette. The competition guidelines state that you may include additional elements to convey the overall concept including, but not limited to, furniture and fixture specifications, color palettes, wall sections, electrical plans, schedules, additional renderings, etc.

3. If students are working on the project for this current semester and graduate in December 2019, are they still able to submit in January?
   Yes, December graduates are encouraged to participate and submit to this competition.

GENERAL QUESTIONS / DESIGN BRIEF QUESTIONS
1. Since there is no entrance, can we assume that this is not on the first floor of the building?
   This is a fictitious project. The space is not on the first floor; assume it is on the third floor for design purposes.

2. Do we need to leave a 5-foot corridor around the core for public access as typical in a commercial building with a central core?
   Yes, maintain a 5-foot corridor.

3. Do we need to plan/design building systems such as HVAC, fire sprinklers, or tele data elements?
   No.

4. Is north true north? What are the sun exposures (cardinal directions) of the building?
   True north is at your discretion; plan north as drawn.

5. Is there a required orientation of the clinic’s entry? Should we choose the front and backside of the building?
   Staff and patients will enter the suite via the elevators.

6. Is there a floor above or below the building plan? What level is the floor plan?
   This is a fictitious project. The space is not on the first floor; assume third floor for design purposes.

7. When we space plan and design, do we need to adhere to the healthcare FGI guidelines? If so, is it 2018 or 2014? How strictly do we have to adhere to FGI standards?
   2018. We will not be judging submissions based on guidelines. Good to consider, but not mandatory.
GENERAL QUESTIONS / DESIGN BRIEF QUESTIONS (CONTINUED)

8. In the project description, the space contains 12,540 square feet; however, the CAD floor on the website shows that the drawn space contains 11,947 square feet. Is this information miscommunicated, or is there a different floor plan that has the recorded 12,540 feet drawn? The square footage is approximate (it is a range between 11,947 to 12,540 square feet); please use floor plans as provided.

9. Is there an existing drain/plumbing line we should be taking into consideration during our design process? No, please design at your discretion.


11. How high is the exposed ceiling height? 9’6”.

12. Can the wall be drawn in the middle of the exterior window? No.

13. Is it possible to provide an image or specs of the windows shown on the floor plan? The sill height is 36”. Assume overall window height is 60”.

14. What are the circled areas on the floor plan? And are there specific functions of the two closets (identified with arrows)? Circled areas are mechanical shafts not to be altered. The closets do not have a specific function—they can be altered or changed.

15. Is there a labeled floorplan available for participants to utilize? No.

16. Will the digestive department be a part of an upper level so that we do not design the main lobby? You are not responsible for designing the main floor.

17. What do you mean by “flexible/allow for growth” when you note that healthcare is shifting from volume-based to value-based? Does it mean growth in technology, or to be able to accommodate a higher staff to patient ratio? Volume-based care refers to the payment a health care provider receives for services a patient might need. The type of service and quality of service does not make a difference in the amount a provider might receive. Value-based healthcare reimbursement is a payment model that reimburses healthcare providers based on the quality they provide to patients rather than the number of patients they see. In essence, it is a quality over quantity program.

18. What is the current ceiling material? If it is drop-down, how much space is used above the drop-down area, and how much is mandatory? Ceiling height is 9’6”. The ceiling material can be adjusted/changed to meet your design intent.

19. The wall section on the exterior walls where the windows are has multiple lines in the CAD file that are difficult to align with the building image design. Are they supposed to be partial walls with windows above? Can we have an elevation or wall detail typical? This project is fictitious—the image/ rendering will not align with the CAD file. The image is to provide design guidance only.

20. Can any of the given core rooms be used for the program requirements, including the unnamed rooms and the bathrooms? Bathrooms should stay as is. The rest of the floor plan can be used for programming requirements.
GENERAL QUESTIONS / DESIGN BRIEF QUESTIONS (CONTINUED)

21. For the exterior walls, are they curtain walls? If so, do they open? They are not curtain walls.

22. Do the patients come to the office through the elevators? Which elevators? Entrance will be through both elevators.

23. How do the workers get access to the office? Through the elevators.

24. What kinds of patients usually visit this clinic and space? This clinic will specialize in preventing, diagnosing, and treating digestive and liver disorders such as celiac disease, Crohn’s disease, acid reflux, irritable bowel syndrome, hepatitis, and cirrhosis. The clinic’s goal is to advance the delivery of care for patients suffering from all digestive health conditions.

25. There is a framing detail on the floor plan at all the windows. Is it a stepped framing design? The sill height is 36”. Assume overall window height is 60”.

26. What is the extra wall line on the floor plan directly across from the elevators? Is it a sign? It was a sign, please delete.

27. It appears there are small panels next to the stairway doors. What do we do with them? Please ignore and do not change or alter.

28. Should we label the various closets? Closets are critical to this project. Feel free to label at your discretion.

29. Are the structural columns wet columns for plumbing? They can be if needed.

30. When working on paths of egress requirements, should we consider if the building has a fire sprinkler system in place? Assume no fire sprinkler in place to allow freedom to create egress paths. Fire sprinkler systems will not be judged.