

HOSPITAL DOES BUSINESS WITH OFF-SITE CENTER

PLANNING

While a business park may not seem like a natural place to locate an ambulatory care center, it made a lot of sense to officials at Major Hospital, Shelbyville, Ind.

For one thing, it costs less than a hospital-based facility, says Kevin Downey, AIA, an architect and senior vice president at BSA LifeStructures, Indianapolis, the firm constructing the 47,000-square-foot center.

Because the patients are mobile and the care center is not attached to the hospital, it can qualify for a business building code versus a more-costly institutional one, says Downey.

The center will have advantages for patients, too, he adds. They can more quickly reach their destinations than if they had to walk through the hospital.

D.C. HOSPITAL CENTER KEEPS THINGS MOVING

OPERATIONS

Post offices and manufacturing plants use them, so why not hospitals? That was the thinking of Craig Feied, M.D., when he began looking into the potential of Segway human transporters in the health care environment.

Feied, director of federal Project ER One "all-risks-ready" emergency department, based at Washington Hospital Center in the nation's capital, says Segways are among several automated devices WHC is analyzing for the project.

While the benefits of moving workers around quickly during a disaster are obvious, Segways can also be beneficial for everyday use, especially as hospitals get bigger, Feied says. For instance, EVS workers may be able to improve room turnover times using them, he adds.

WHC is testing two Segways and plans to buy three smaller models. Though they've already shown their value, they will really come into their own if ER One's construction plans are approved, which call for extra-wide circulation corridors.

ARIZONA FACILITY CALLS FOR REINFORCEMENT

RENOVATION

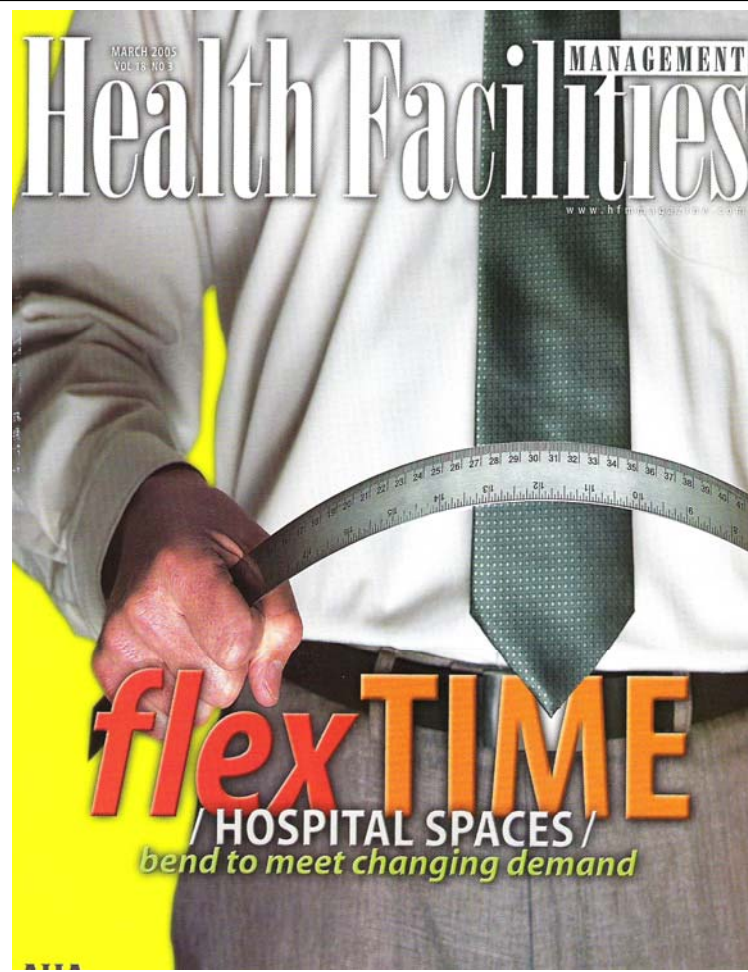
St. Joseph Hospital, Phoenix, literally called for reinforcement when it recently decided to add a high-density filing system.

The system, which weighs nearly 300 pounds per square foot, would have exceeded the design load for St. Joseph's floors. However, rather than going the traditional route of adding steel beams and support columns, it found an alternative: Fiber Reinforced Polymer (FRP).

FRP has been used for decades in ship-building and the military, but its use in civil engineering was patented only in the late 1980s by Professor Mo Ehsani at the University of Arizona.

Ehsani's company, Quake-Wrap Inc., Tucson, Ariz., designed a strengthening system for St. Joseph using carbon plates that eliminated the need for new steel beams or columns.

The entire process took less than three days. ■



medical center, Burbank, Calif., by the Summit Group architecture, engineering, interiors and planning firm. The building is the second of a two-phase project to replace the earthquake-damaged "West Center" building. The "Northeast" building houses 128 acute care beds and the laboratory, imaging department, surgery suite, ICU, obstetrics, neonatal ICU, gastroenterology and cardiac catheterization labs.

• **San Antonio Community Hospital** recently broke ground on Sierra San Antonio Medical Plaza, a 60,000-square-foot medical office building in Fontana, Calif., that will house urgent care, laboratory and radiology services, all operated by San Antonio Community Hospital, along with a pharmacy and many other physician offices. It will open in fall 2005. **Ensemble Real Estate Services LLC** will develop, own and manage the facility. **Cunningham Group Architecture**, Los Angeles, is the project architect. **Summit Builders**, Phoenix, is the contractor.

• **Kaiser Permanente** will build a flagship acute care hospital and medical center in downtown Oakland, Calif. The project comprises a 346-bed hospital at the site of the current Kaiser medical office building and clinic, the reconfiguration of the existing hospital into outpatient and office space and a new 150,000-square-foot medical office building. **NBBJ**, Seattle, was selected to master plan and design the project. ■