



CHECKLIST FOR REVIEW OF FLOOR PLANS MEDICAL FACILITY FOR OVERSEAS WORKERS AND SEAFARERS

Name of Facility _____
Address _____
Date _____ Review: 1st _____ 2nd _____ 3rd _____

1 PHYSICAL PLANT

- ___ 1.1 Medical Facility (minimum of 50 square meters in floor area)
 - ___ 1.1.1 Waiting/Reception Area
 - ___ 1.1.2 Business Area
 - ___ 1.1.3 Consultation/Follow-Up Area
 - ___ 1.1.4 Physical Examination Room (separate for male and female)
 - ___ 1.1.5 Psychological Testing Room
 - ___ 1.1.6 Audiometry Room
 - ___ 1.1.7 Dental Section
 - ___ 1.1.8 Optical Area
 - ___ 1.1.9 ECG Area
 - ___ 1.1.10 Toilet (separate for male and female)
- ___ 1.2 Secondary Clinical Laboratory
 - ___ 1.2.1 Clinical Work Area with Sink (minimum of 20 square meters in floor area)
 - ___ 1.2.2 Pathologist Area (may be part of or separate from the clinical work area)
 - ___ 1.2.3 Access to Toilet
 - ___ 1.2.4 Waiting/Reception Area
- ___ 1.3 Radiology
 - ___ 1.3.1 X – Ray Room with Control Booth and Dressing Area
 - ___ 1.3.2 Access to Toilet
 - ___ 1.3.3 Dark Room
 - ___ 1.3.4 Film File and Storage/Radiologist Area

2 PLANNING AND DESIGN

- ___ 2.1 Floor plans properly identified and completely labeled
- ___ 2.2 Meets prescribed functional programs

COMMENTS:

