

CHAPTER 204: AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY (ASLP) SERVICE

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1 PURPOSE AND SCOPE

This document outlines Space Planning Criteria for Chapter 204: Audiology and Speech-Language Pathology Service. It applies to all medical facilities at the Department of Veterans Affairs (VA).

2 DEFINITIONS

Acoustic Immittance (Tymanometry): A battery of tests that includes tympanometry, acoustic reflex threshold testing, and acoustic reflex decay testing.

Audiologist: A person who, by virtue of academic degree, clinical training, and professional credentials, is uniquely qualified to provide independently a comprehensive array of professional services related to the prevention of hearing loss and vestibular dysfunction and the identification, evaluation, diagnosis, and treatment of persons with impairment of auditory and vestibular function. The central focus of the profession of audiology is concerned with all auditory impairments and their relationship to disorders of communication.

Audiology: A clinical specialty involving the prevention, identification, evaluation and remediation, and treatment of hearing loss, tinnitus, and vestibular disorders.

Audiology and Speech-Language Pathology: A combined service or equivalent service-level department within the VA Audiology and Speech-Language Pathology may be physically separated.

Benign Positional Vertigo (BPV): A balance disorder that results in the sudden onset of dizziness, spinning, or vertigo, caused by changes in the position of the head.

Cerumen: A natural wax-like substance secreted by special glands in the skin on the outer part of the ear canal. Also referred to as ear wax, cerumen protects the skin of the human ear canal, assists in cleaning and lubrication, and provides some protection against bacteria, fungi, insects, and water. Excess production and accumulation of cerumen can cause ear problems like infection, and temporary hearing loss, if not removed.

Cochlear Implant: A device that is surgically implanted in the ear to bypass the damaged hearing receptors in the cochlea and directly provide electrical stimulation to the hearing nerve.

Ear, Nose Throat (ENT): A branch of medicine and surgery, also known as Otolaryngology or ENT that specializes in the diagnosis and treatment of disorders of the head and neck.

Electrophysiology: Special diagnostic tests involving the measurement of auditory evoked potentials from the cochlea, auditory nerve, brain, or otolith organs including electrocochleography, auditory brainstem response (ABR), middle latency potentials (MLR), late potentials, vestibular evoked myogenic potentials, and other specialized evoked potential techniques.



Otoacoustic Emissions (OAE): Electrical potentials generated in the inner ear. Clinically, two otoacoustic emissions are measured: transient-evoked OAE (TOAE) and distortion product OAE (DPOAE). These measures are used to assess hearing loss objectively.

Outpatient Clinic: A freestanding ambulatory care facility that is physically separated but administratively attached to a VA Medical Center providing a specific set of outpatient services.

Posturography: A battery of tests (also known as Computerized Dynamic Posturography) to evaluate balance function using a series of tasks to simulate situations encountered in daily life. Tests measure sensory organization, motor control, and proprioceptive aspects of balance. Tests can be used to assess postural stability and movement strategies in patients who experience disequilibrium or who are prone to falling.

Speech-Language Pathologist: A person who by virtue of academic degree, clinical training, and professional credentials, is uniquely qualified to provide, independently, a comprehensive array of professional services related to human communication and swallowing. This includes the identification, evaluation, diagnosis, and treatment of persons with speech, voice, language, fluency, cognitive, swallowing, and respiratory disorders. The domain of speech-language pathology includes human communication behaviors and disorders, as well as swallowing or other upper aerodigestive functions and disorders.

Speech-Language Pathology: A clinical specialty involving the prevention, identification, evaluation, treatment, and rehabilitation of Speech-Language, voice, fluency, cognitive, and swallowing disorders.

Telehealth: The use of technology, such as computers and mobile devices, to manage healthcare remotely. It includes a variety of health care services, including but not limited to online support groups, online health information and self-management tools, email and online communication with health care providers, remote monitoring of vital signs, video, or online doctor visits. Depending on the concept of operations for this space, it may be equipped as an exam room or as a consult room with video/camera capability.

Tracheoesophageal Voice Prosthesis (TEP): A device that is placed in the wall that separates the trachea and esophagus to enable a total laryngectomy patient to make voice.

Vestibulography: A general class of special balance tests including, video-nystagmography (VNG), and sinusoidal vertical axis rotational testing (rotary chair). These tests record nystagmus and eye movements to diagnosis peripheral and central vestibular disorders.

Space Planning / SEPS

Accessible: A site, building, facility, or portion thereof that complies with provisions outlined in the Architectural Barriers Act of 1968 (ABA).



Architectural Barriers Act (ABA): A set of standards developed to ensure that all buildings financed with federal funds are designed and constructed to be fully accessible to everyone. This law requires all construction, renovation, or leasing of sites, facilities, buildings, and other elements, financed with federal funds, to comply with the Architectural Barriers Act Accessibility Standards (ABAAS). The ABAAS replaces the Uniform Federal Accessibility Standards (UFAS).

Average Length of Encounter (ALoE): Averaged length of time, in minutes, a patient spends in an Exam / Treatment Room interacting with a provider and the clinical support team. It is accounted from room “set-up” to “clean-up” by staff. This metric is used to determine the number of annual patient / provider encounters that take place in an Exam / Treatment Room which, in turn, is used to calculate the number of Exam / Treatment Rooms needed in a facility based on projected annual workload. The ALoE is determined with VHA SME input during a PG-18-9 clinical chapter revision / update.

Average Length of Stay (ALoS): The average number of days a patient Veteran stays in an inpatient care unit. The ALoS is used to calculate the number of patient bedrooms for a specialty by dividing the site’s projected workload by the ALoS.

Building Gross (BG) Factor: A Factor applied to the sum of all the Departmental Gross Square Footage (DGSF) in a project to determine the Building Gross Square Footage. This factor accounts for square footage used by the building envelope, structural systems, horizontal and vertical circulation including main corridors, elevators, stairs and escalators, shafts, and mechanical spaces. The Department of Veterans Affairs has set this factor at 1.35 and included guidance in case of variance when developing a Program for Design (PFD) in SEPS.

Clinic Stop: Per these criteria, a clinic stop is the workload unit of measure for space planning. Clinic Stops are codified by VSSC, when applicable, they are referenced by number in the calculation of workload driven patient care spaces in this document.

Department Net to Gross (DNTG) Factor: A parameter, determined by the VA for each clinical and non-clinical department PG-18-9 space planning criteria chapter, used to convert the programmed Net Square Feet (NSF) area to the Department Gross Square Feet (DGSF) area.

Encounter: An interaction between a patient Veteran and a VA provider or providers in an Exam Room / Treatment Room / Consultation Room / Procedure Room, spaces where a patient Veteran received clinical care.

Full-Time Equivalent (FTE): A staffing parameter equal to the amount of time assigned to one full time employee. It may be composed of several part-time employees whose combined time commitment equals that of one full-time employee (i.e., 40 hours per week).

Functional Area (FA): The grouping of rooms and spaces based on their function within a clinical service or department.



Functional Area Criteria Statement (FACS): A verbalized mathematical / logical formulation assigned to a FA incorporating answers to Input Data Statements (IDSs) to determine the condition for providing the rooms / spaces listed in the FA in the baseline space program or Program for Design (PFD) for a project. Certain rooms / spaces may or may not have additional conditions.

Input Data Statement(s): A question or set of questions designed to elicit information about the healthcare project to generate a Program for Design (PFD) based on the parameters set forth in this set of documents. This information is processed through mathematical and logical operations in the VA Space and Equipment Planning System (SEPS).

JSN (Joint Schedule Number): A unique five alpha-numeric code assigned to each content item in the PG-18-5 Standard. JSNs are defined in DoD's Military Standard 1691 and included in SEPS Content Table.

Net Square Feet / Net Square Meters (NSF/NSM): The area of a room or space derived from that within the interior surface of the bounding walls or boundaries.

Patient Unique: (or Unique Patient), A Veteran patient counted as a unique in each division from which they receive care. Patient Uniques are included in the Registry for a VA Medical Center.

Program for Design (PFD): A project specific itemized listing of the spaces, rooms, and square foot area required for the proper operation of a specific service / department, and the corresponding area for each. PFDs are generated by SEPS based on the PG-18-9 Standard.

PG-18-9: A Department of Veterans Affairs' Program Guide for the Space Planning Criteria Standard use to develop space planning guidance for the planning, design, and construction of VA healthcare facilities; a Program Guide (PG) that provides space planning guidance for VA Medical Centers (VAMCs) and Community Bases Outpatient Clinics (CBOCs). PG-18-9 is organized by chapters, as of September 2021 there are 56 clinical and non-clinical PG-18-9 chapters; they are implemented and deployed in SEPS so that space planners working on VA healthcare projects can develop baseline space programs.

PG-18-5: A Department of Veterans Affairs' Equipment Guidelist Standard for planning, design, and construction of VA healthcare facilities; a Program Guide (PG) that lists assigned room contents (medical equipment, furniture, and fixtures) to each room in PG-18-9. PG-18-5 follows PG-18-9's chapter organization and nomenclature.

PG-18-12: A Department of Veterans Affairs' Design Guide Standard for planning, design and construction of VA healthcare facilities, a Program Guide (PG) that provides design guidance for VA Medical Centers (VAMCs) and Community Bases Outpatient Clinics (CBOCs). The narrative section details functional requirements and the Room Template section details the planning and design of key rooms in PG-18-9. Not all PG-18-9 chapters have a corresponding PG-18-12 Design Guide; one Design Guide can cover more than one PG-18-9 chapter.



Provider: An individual who examines, diagnoses, treats, prescribes medication, and manages the care of patients within his or her scope of practice as established by the governing body of a healthcare organization.

Room Area: The square footage required for a clinical or non-clinical function to take place in a room / space. It takes into account the floor area required by equipment (medical and non-medical), furniture, circulation, and appropriate function / code-mandated clearances. Room area is measured in Net Square Feet (NSF).

Room Code (RC): A unique five alpha-numeric code assigned to each room in the PG-18-9 Standard. Room Codes in PG-18-9 are unique to VA and are the basis for SEPS's Space Table for VA projects.

Room Criteria Statement (RCS): A mathematical / logical formulation assigned to each room / space included in PG-18-9 incorporating answers to Input Data Statements (IDSs) to determine the provision of the room / space in the baseline space program or Program for Design (PFD) for a project.

Room Efficiency Factor: A factor that provides flexibility in the utilization of a room to account for patient delays, scheduling conflicts, and equipment maintenance. Common factors are in the 75% to 85% range. A room with 80% room efficiency provides a buffer to assume that this room would be available 20% of the time beyond the planned operational practices for this room. This factor may be adjusted based on the actual and/or anticipated operations and processes of the room/department at a particular facility.

SEPS: Acronym for Space and Equipment Planning System which produces equipment lists and Program for Design for a healthcare project based on specific information entered in response to Input Data Questions.

SEPS Importer: A style-based format developed to allow upload of RCSs and IDSs to SEPS to implement and operationalize space planning criteria in PG-18-9 in the SEPS digital tool. This format establishes the syntax used in the RCSs and allows the use of Shortcuts. Shortcuts allow developers of space planning criteria statements to simplify RCSs making full use of their logical and mathematical functionality. A shortcut can refer to an RCS, a room in any FA or a formula. Shortcuts are [bracketed] when used in FAs and RCSs and are listed along with their equivalences at the end of the Space Planning Criteria section.

Space Planning Concept Matrix (SPCM): A working document developed during the chapter update process. It lists all the rooms organized by Functional Area and establishes ratios between the directly and the indirectly workload driven rooms for the planning range defined in this document. The matrix is organized in ascending workload values in ranges reflecting existing facilities and potential future increase. Section 5 of this document Space Planning Criteria reflects the values in the SPCM.

Stop Code: A measure of workload including clinic stops forecasted by the Office of Policy and Planning (OPP) for all Strategic Planning Categories at Medical Center and Outpatient Clinic levels.



Telehealth: The use of technology, such as computers and mobile devices, to manage healthcare remotely. It includes a variety of health care services, including but not limited to online support groups, online health information and self-management tools, email and online communication with health care providers, remote monitoring of vital signs, video, or online doctor visits. Depending on the concept of operations for this space, it may be equipped as an exam room or as a consult room with video/camera capability.

Utilization Rate: A factor used in the calculation of a directly workload-driven room throughput. It represents, in a percent value, the room is idle based on the planning assumptions. For example, if a directly workload-driven room is available for use 8 hours a day, the Utilization Rate represents the assumed time it will be used, an 85% utilization rate indicates, for planning purposes, the room will be used 6.8 hours a day. An additional directly workload-driven room will be provided in the calculation once the previous room has reached 100% utilization. The utilization Rate is embedded in the Room Throughput value calculated in Section 3 of this document.

VA Room Family (VA RF): An organizational system of rooms / spaces grouped by function, a 'Room Family'. There are two "Orders" in the VA RF: Patient Care and Patient Care Support; Patient Care features four sub-orders: Clinical, Inpatient, Outpatient and Residential Clinical. There are also four sub-orders in the Patient Care Support order: Building Support, Clinical Support, Staff Support and Veteran Support. Each room in a Family has a unique Room Code and NSF assigned based on its Room Contents and function which correspond to the specific use of the room. The same RC can be assigned to different Room Names with the same function in this document and can be assigned an NSF that varies based on the PG-18-5 Room Contents assigned to the room.

VA Technical Information Library (TIL): A resource website maintained by the Facilities Standards Service (FSS) Office of Construction and Facilities Management (CFM) containing a broad range of technical publications related to the planning, design, leasing, and construction of VA facilities. VA-TIL can be accessed at: <https://www.cfm.va.gov/TIL/>

Workload: Workload is the anticipated number of procedures, clinic stops, clinic encounters etc. that is processed through a department/service area. The total workload applied to departmental operational assumptions will determine overall room requirements by modality.

Workstation: Area outfitted with equipment and furnishings, typically allocated 56 NSF each. Managers and other staff with no direct reports as well as part-time, seasonal, and job-sharing staff may qualify for a workstation. Such environments are particularly conducive to team-oriented office groupings. These environments work best when they have access to conference and small group meeting spaces.



3 OPERATING RATIONALE AND BASIS OF CRITERIA

- A. Space planning criteria included in this Standard have been specifically developed for this Department / Service in a Department of Veterans Affairs healthcare facility based on established VHA policy and guidelines to define the scope of services provided for the existing workload demand as well as that in the foreseeable future. Rooms and Functional Areas are provided based on research of clinical and non-clinical activities performed in this Department.
- B. Development / update of VA's Program Guide (PG) standards is a research based effort executed with participation of VHA Subject Matter Experts (SMEs), VA-Construction and Facilities Management Office (CFM) professional staff and specialty consultants hired for the task. These space planning standards are based on current applicable VHA policies and guidelines, established and/or anticipated best practice standards, and latest medical technology developments. Workload metrics were tailored to satisfy current and anticipated veteran workload demand.
- C. The space planning component of PG-18-9 is based on the Space Planning Concept Matrix (SPCM) which lists all the rooms organized by Functional Area and assigns room quantity (Q) and area (NSF) for a series of ranges corresponding to the smallest to the largest department for this service in the VA healthcare system in incremental size; each range corresponds to a workload parameter which determines the number and area of each directly workload-driven room. The rest of the rooms in the range i.e., waiting, storage, staff workstations, etc. are determined by ratios to the resulting number of or NSF of the workload-driven rooms.
- D. Sections 4 and 5 of these space planning standards as well as the PG-18-5 standard are implemented in the Space and Equipment Planning System (SEPS) and hosted at the MAX.gov website so planners working on VA Construction projects can develop single or multi-department projects based on these PG-18-9- and the PG-18-5 standards. Output from SEPS is through Space and Contents Reports; the Space Report is the Program for Design (PFD), the Content Report is the Project Room Contents (PRC). Inclusion of a Functional Area as well as Room quantity (Q) and determination of the room area (NSF) in the PFD is based on the projected Workload input which triggers calculations included in the Room Criteria Statements (RCSs). The RCSs are placed immediately after each room name, room code and baseline area (NSF). The PRC list the medical equipment, furniture and fixtures associated to each Room Code in the project. The PFD & PRC are the baseline requirements for the planning phase of a VA project based on a site's projected workload for the target planning year. This chapter's corresponding PG-18-12, Design Guide -if available- is intended for use during the design phase of the project.



- E. Space Planning parameters and metrics in this document are based on the Audiology and Speech-Language Pathology Space Planning Criteria Matrix (SPCM) developed as the basis for this chapter. The Audiology and Speech-Language Pathology SPCM lists all the spaces a VA Audiology and Speech-Language Pathology site would require; the quantity and NSF for each room is calculated based on the Audiology and Speech-Language Pathology projected workload or number of FTE positions authorized. The SPCM is organized in 36 ranges as follows:
1. Ranges 1 to 4: AUD: Hearing Aid Repair between 960 and 19,200 annual repair Clinic Stops (in increments of 4,800)
 2. Ranges 5 to 12: AUD: Audiometric Examination (Control Room incorporated) between 640 and 25,600 annual Clinic Stops (in increments of 3,200)
 3. Ranges 13 to 20: AUD: Audiometric Examination (separate Control Room) between 640 and 25,600 annual Clinic Stops (in increments of 3,200)
 4. Ranges 21 to 28: AUD: Hearing Aid Fitting and Assessment Procedures between 430 and 17,064 annual Clinic Stops (in increments of 2,133)
 5. Ranges 29 to 30: AUD: Cerumen Procedures between 960 and 9,600 annual Clinic Stops (in increments of 4,800)
 6. Ranges 31 to 32: AUD: Electrophysiology Procedures between 640 and 6,400 annual Clinic Stops (in increments of 3,200)
 7. Ranges 33 to 34: SLP: Voice Function Procedures between 295 and 2,954 annual Clinic Stops (in increments of 1,477)
 8. Ranges 35 to 36: SLP: Swallow Function Procedures between 137 and 1,372 annual Clinic Stops (in increments of 686)

All current VA Audiology and Speech-Language Pathology sites are covered, the upper ranges are calculated for future facilities in case a higher projected workload or FTE positions authorized than those at the present time for Audiology and Speech-Language Pathology.

- F. The SPCM metrics are translated into one (or more) Room Criteria Statement (RCS) for each room in Section 5 of this document. The SPCM Planning Range, the maximum number of directly workload-driven exam rooms (all types) in this document is 36. If a project shall require provision of workload driven rooms above the maximum range value refer to CFM for guidance. Rooms in this space planning document are organized in 7 Functional Areas (FAs).

Based on its intended function, each room / space is assigned a:

1. Room Name (RN),
2. Room Code (RC),
3. Room Area, the Net Square Feet (NSF) and its corresponding “soft metric” Net Square Meters (NSM),
4. Unique Room Criteria Statement(s) (RCSs) correlated to answers to Input Data Statements (IDSs), and
5. Room Comment as needed.



- G. The Room Codes included in this chapter stem from the VA Room Family. A unique support space, that may have variable area, is assigned a unique Room Code and adopts the square footage, as needed, correlated to the room contents assigned which in turn correspond to the range for those rooms. A unique clinical space or a direct clinical support room, i.e., control room, system components room, etc. typically does not feature variable NSF. Patient Care room names for rooms unique to this chapter end in “, ASLP SVC”. Patient Care Support room names end in “, Bldg Sprt”, “Clncl Sprt”, “Stff Sprt”, or “, Vet Sprt”, correlating to Building, Clinical, Staff or Veteran Support room families.
- H. Section 5, Sub-Section H lists the SEPS Importer Shortcuts used for implementation of Sections 4 & 5 in SEPS. These shortcuts are inserted into the Room Criteria Statement (RCS) for each room which upon upload into the Space and Equipment Planning System (SEPS) allowing planners developing VA healthcare projects to determine quantity and square footage of each room by performing mathematical or logical calculations. Shortcuts refer Input Data Statements (IDSs), Rooms or calculation parameters stemming from the SPCM.
- I. SEPS is accessible to government healthcare planners and private sector consultants working on VA HC projects during their Period of Performance (PoP) through the MAX.gov website; government provided Training is a requisite for access.
- J. SEPS incorporates a Net-to-Department Gross factor (NTDG) factor of **1.50** for Audiology and Speech-Language Pathology and a Building Gross factor of 1.35 in the space calculation to generate the Department Gross Square Feet (DGSF) and the Building Gross Square Feet (BGSF) respectively for the project based on the aggregate resulting Net Square Feet (NSF) for each range. Planners can adjust the BGSF factor in SEPS; the NTDG factor is fixed.
- K. Refer to the chapter corresponding PG-18-5 Equipment Guidelist for the Room Content assignment for each room during the planning phase of a project.
- L. Refer to the chapter corresponding PG-18-12: Design Guide, if available, during the planning and design phases of a project. Not all PG-18-9 clinical chapters have a corresponding PG-18-12 document, please refer to the VA-TIL.
- M. The space planning and design Program Guides: PG-18-9, PG-18-5, and PG-18-12 are available at the [Department of Veterans Affairs Office of Construction and Facilities Management \(CFM\) Technical Information Library \(TIL\) website](#).



4 INPUT DATA STATEMENTS

- A. Is Audiology Service authorized? (M)
 - 1. How many annual Hearing Aid Repairs are projected? (W) (Values: 1 to 19,200)
 - 2. How many annual Audiologic Assessment and Automated Audiometry procedures are projected? (W) (Values: 1 to 25,600)
 - a. Audiometric Examination Rooms with a separate Control Room preferred? (M)
(If not, Audiometric Examination Rooms with a Control Room will be provided)
 - 3. How many annual Hearing Aid Fitting and Assessment procedures (CPTs) are projected? (W) (Values: 1 to 17,064)
 - 4. How many annual Cerumen procedures are projected? (W) (Values: 1 to 9,600)
 - 5. How many annual Electrophysiology procedures are projected? (W) (Values: 1 to 6,400)
- B. Is Speech-Language Pathology Service authorized? (M)
 - 1. How many annual Voice Function procedures (CPTs) are projected? (W) (Values: 1 to 2,954)
 - 2. How many annual Swallow Function procedures (CPTs) are projected? (W) (Values: 1 to 1,372)

5 SPACE PLANNING CRITERIA

A. **FA1: AUDIOLOGY AND SPEECH LANGUAGE PATHOLOGY RECEPTION AREA**

FA Condition: [*Audiology is authorized*] or [*Speech-Language Pathology is authorized*]

- 1. **ASLP Svc Waiting, Bldg Sprt (SB003) 100 NSF (9.3 NSM)**
 - a. *Provide one if [number of Audiology and Speech-Language Pathology patient care rooms] is between 1 and 2*
 - b. *Provide one at 110 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 3 and 4*
 - c. *Provide one at 130 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 5 and 6*
 - d. *Provide one at 170 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 7 and 8*
 - e. *Provide one at 215 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 9 and 10*
 - f. *Provide one at 260 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 11 and 12*
 - g. *Provide one at 290 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 13 and 14*
 - h. *Provide one at 330 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 15 and 16*
 - i. *Provide one at 370 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 17 and 18*
 - j. *Provide one at 415 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 19 and 20*



- k. *Provide one at 465 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 21 and 22*
 - l. *Provide one at 520 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 23 and 24*
 - m. *Provide one at 530 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 25 and 26*
 - n. *Provide one at 540 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 27 and 28*
- 2. ASLP Svc Reception, Cncl Sprt (SC183) 85 NSF (7.9 NSM)**
- a. *Provide one if [number of Audiology and Speech-Language Pathology patient care rooms] is between 1 and 5*
 - b. *Provide one at 260 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 6 and 19*
 - c. *Provide one at 385 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 20 and 28*
- 3. ASLP Svc Patient Check-in Kiosk, Cncl Sprt (SC165) 55 NSF (5.2 NSM)**
- a. *Provide one if [number of Audiology and Speech-Language Pathology patient care rooms] is between 1 and 4*
 - b. *Provide one at 105 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 5 and 14*
 - c. *Provide one at 160 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 15 and 28*
- 4. ASLP Svc Patient Education Workstation, Cncl Sprt (SC172) 60 NSF (5.6 NSM)**
- a. *Provide one if [number of Audiology and Speech-Language Pathology patient care rooms] is between 1 and 14*
 - b. *Provide two if [number of Audiology and Speech-Language Pathology patient care rooms] is between 15 and 28*
- 5. ASLP Svc Public Toilet, Bldg Sprt (SB191) 60 NSF (5.6 NSM)**
- a. *Provide one if [number of Audiology and Speech-Language Pathology patient care rooms] is between 1 and 14*
 - b. *Provide two if [number of Audiology and Speech-Language Pathology patient care rooms] is between 15 and 28*
- Allocated NSF accommodates one accessible toilet @ 25 NSF, one wall-hung lavatory @ 12 NSF, ABA clearances, and circulation.
- 6. ASLP Svc Wheelchair Alcove, Bldg Sprt (SB262) 30 NSF (2.8 NSM)**
- a. *Provide one if [number of Audiology and Speech-Language Pathology patient care rooms] is between 1 and 14*
 - b. *Provide two if [number of Audiology and Speech-Language Pathology patient care rooms] is between 15 and 28*

B. FA2: AUDIOLOGY PATIENT AREA

FA Condition: *[Audiology is authorized]*

1. Audiology Rehabilitation / Counseling Room, ASLP Svc (CAS01).....140 NSF (13.1 NSM)

- a. *Provide one if [number of Audiology patient care rooms] is between 1 and 12*
- b. *Provide two if [number of Audiology patient care rooms] is between 13 and 24*

This room accommodates one-on-one auditory rehabilitation, demonstrations, and counseling for assistive devices, including cochlear implants.

2. Audiology Group Room, ASLP Svc (CAS21)240 NSF (22.3 NSM)

- a. *Provide one if [number of Audiology patient care rooms] is between 1 and 8*
- b. *Provide two if [number of Audiology patient care rooms] is between 9 and 16*
- c. *Provide three if [number of Audiology patient care rooms] is between 17 and 28*

3. Audiology Hearing Aid Repair Room, ASLP Svc (CAS06)160 NSF (14.9 NSM)

- a. *Provide one if [number of Hearing Aid Repairs] is between 1 and 4,800*
- b. *Provide two if [number of Hearing Aid Repairs] is between 4,801 and 9,600*
- c. *Provide three if [number of Hearing Aid Repairs] is between 9,601 and 14,400*
- d. *Provide four if [number of Hearing Aid Repairs] is between 14,401 and 19,200*

This room is a patient care space used for minor hearing aid adjustments and repairs. The room may be used for making ear impressions.

4. Audiology Audiometric Examination Room w/Control Room, ASLP Svc (CAS11).....300 NSF (27.9 NSM)

- a. *Provide one if [number of Audiologic Assessment and Automated Audiometry procedures] is between 1 and 3,200 and NOT [Audiometric Examination Rooms with a separate Control Room preferred]*
- b. *Provide two if [number of Audiologic Assessment and Automated Audiometry procedures] is between 3,201 and 6,400 and NOT [Audiometric Examination Rooms with a separate Control Room preferred]*
- c. *Provide three if [number of Audiologic Assessment and Automated Audiometry procedures] is between 6,401 and 9,600 and NOT [Audiometric Examination Rooms with a separate Control Room preferred]*
- d. *Provide four if [number of Audiologic Assessment and Automated Audiometry procedures] is between 9,601 and 12,800 and NOT [Audiometric Examination Rooms with a separate Control Room preferred]*
- e. *Provide five if [number of Audiologic Assessment and Automated Audiometry procedures] is between 12,801 and 16,000 and NOT [Audiometric Examination Rooms with a separate Control Room preferred]*
- f. *Provide six if [number of Audiologic Assessment and Automated Audiometry procedures] is between 16,001 and 19,200 and NOT [Audiometric Examination Rooms with a separate Control Room preferred]*



- g. Provide seven if [number of Audiologic Assessment and Automated Audiometry procedures] is between 19,201 and 22,400 and NOT [Audiometric Examination Rooms with a separate Control Room preferred]*
- h. Provide eight if [number of Audiologic Assessment and Automated Audiometry procedures] is between 22,401 and 25,600 and NOT [Audiometric Examination Rooms with a separate Control Room preferred]*

A Single Audiometric Examination is a prefabricated sound booth which consists of an examination side and a control side. The control side accommodates a Provider and one student or trainee. The exam side accommodates a Provider, patient, and minimum one each family member and one student/trainee. Prefabricated sound booths are used for audiometric examinations, acoustic immittance tests, otoacoustic emission tests, hearing aid fitting and programming, and for research activities that require a highly controlled acoustic and electromagnetically shielded environment. When compensation and pension exams will be performed, a Single Audiometric Examination Room must be provided. Refer to the Audiology and Speech-Language Pathology Design Guide for additional information.

5. Audiology Audiometric Examination Room, ASLP Svc (CAS16) ...150 NSF (14.0 NSM)

- a. Provide one if [number of Audiologic Assessment and Automated Audiometry procedures] is between 1 and 3,200 and [Audiometric Examination Rooms with a separate Control Room preferred]*
- b. Provide two if [number of Audiologic Assessment and Automated Audiometry procedures] is between 3,201 and 6,400 and [Audiometric Examination Rooms with a separate Control Room preferred]*
- c. Provide three if [number of Audiologic Assessment and Automated Audiometry procedures] is between 6,401 and 9,600 and [Audiometric Examination Rooms with a separate Control Room preferred]*
- d. Provide four if [number of Audiologic Assessment and Automated Audiometry procedures] is between 9,601 and 12,800 and [Audiometric Examination Rooms with a separate Control Room preferred]*
- e. Provide five if [number of Audiologic Assessment and Automated Audiometry procedures] is between 12,801 and 16,000 and [Audiometric Examination Rooms with a separate Control Room preferred]*
- f. Provide six if [number of Audiologic Assessment and Automated Audiometry procedures] is between 16,001 and 19,200 and [Audiometric Examination Rooms with a separate Control Room preferred]*
- g. Provide seven if [number of Audiologic Assessment and Automated Audiometry procedures] is between 19,201 and 22,400 and [Audiometric Examination Rooms with a separate Control Room preferred]*
- h. Provide eight if [number of Audiologic Assessment and Automated Audiometry procedures] is between 22,401 and 25,600 and [Audiometric Examination Rooms with a separate Control Room preferred]*



A Double Audiometric Examination is a prefabricated sound booth inside of a sound attenuated drywall constructed room. The prefabricated booth is for examination only, while “control side” activities are performed outside of the prefabricated enclosure in the room. Prefabricated sound booths are used for audiometric examinations, acoustic immittance tests, otoacoustics emission tests, and for research activities that require a highly controlled acoustic and electromagnetically shielded environment. Hearing aid fitting and programming may be performed, based on facility preference and site specific room configuration. Special attention must be given to the privacy, acoustic and electromagnetic radiation environments in which sound booths will be located. Refer to the Audiology and Speech-Language Pathology Design Guide for additional information.

6. Audiology Audiometric Examination Control Room, ASLP Svc (CAS17).....150 NSF (14.0 NSM)

a. *Provide one per each [Audiology Audiometric Examination Room, ASLP Svc (CAS16)]*

7. Audiology Programming / Fitting Room, ASLP Svc (CAS26).....140 NSF (13.1 NSM)

- a. *Provide one if [number of Hearing Aid Fitting and Assessment procedures] is between 1 and 2,133*
- b. *Provide two if [number of Hearing Aid Fitting and Assessment procedures] is between 2,134 and 4,266*
- c. *Provide three if [number of Hearing Aid Fitting and Assessment procedures] is between 4,267 and 6,399*
- d. *Provide four if [number of Hearing Aid Fitting and Assessment procedures] is between 6,400 and 8,532*
- e. *Provide five if [number of Hearing Aid Fitting and Assessment procedures] is between 8,533 and 10,665*
- f. *Provide six if [number of Hearing Aid Fitting and Assessment procedures] is between 10,666 and 12,798*
- g. *Provide seven if [number of Hearing Aid Fitting and Assessment procedures] is between 12,799 and 14,931*
- h. *Provide eight if [number of Hearing Aid Fitting and Assessment procedures] is between 14,932 and 17,064*

This room accommodates the equipment used to program and fit digital hearing aids and bioelectric implants.

8. Audiology Cerumen Management Room, ASLP Svc (CAS31)160 NSF (14.9 NSM)

- a. *Provide one if [number of Cerumen procedures] is between 1 and 4,800*
- b. *Provide two if [number of Cerumen procedures] is between 4,801 and 9,600*

This room is used for ear irrigations and cerumen management (ear wax removal).



- 9. Audiology Electrophysiology Room, ASLP Svc (CAS36).....140 NSF (13.1 NSM)**
a. Provide one if [number of Electrophysiology procedures] is between 1 and 3,200
b. Provide two if [number of Electrophysiology procedures] is between 3,201 and 6,400

This room accommodates the specialized equipment utilized in measuring auditory evoked potentials, such as brainstem auditory evoked potentials (ABR) or electrocochleography (ECOG) for diagnostic purposes.

- 10. Audiology Posturography Room, ASLP Svc (CAS41)200 NSF (18.6 NSM)**
a. Provide one if [number of Audiology patient care rooms] is between 1 and 24

This room accommodates equipment used to evaluate balance disorders utilizing a moving platform device to quantify a patient’s ability to maintain balance under varying conditions when cues for vision, proprioception, and vestibular function are manipulated in both static and dynamic conditions.

- 11. Audiology Vestibulography Room, ASLP Svc (CAS46).....240 NSF (22.3 NSM)**
a. Provide one if [number of Audiology patient care rooms] is between 1 and 24

This room provides visual and vestibular systems testing to determine if the vestibular (inner ear) or neurological system is the cause of a balance disorder. The room accommodates the equipment utilized in performing videonystagmography (VNG). This room also accommodates BPPV treatments.

- 12. ASLP Svc Audiology Vestibulography Patient Toilet, Bldg Sprt (SB201) 60 NSF (5.6 NSM)**
a. Provide one if [number of Audiology patient care rooms] is between 1 and 24

This patient toilet room is associated with Vestibulography. Allocated area accommodates one accessible toilet @ 25 NSF, one accessible wall-hung lavatory @ 13 NSF, ABA clearances, and circulation.

- 13. Audiology Patient Toilet, Bldg Sprt (SB201) 60 NSF (5.6 NSM)**
a. Provide one if [number of Audiology patient care rooms] is between 1 and 12
b. Provide two if [number of Audiology patient care rooms] is between 13 and 24

Allocated area accommodates one accessible toilet @ 25 NSF, one accessible wall-hung lavatory @ 13 NSF, ABA clearances, and circulation.



C. FA3: AUDIOLOGY SUPPORT AREA

FA Condition: *[Audiology is authorized]*

- 1. Audiology Hearing Aid Lab, ASLP Svc (CAS67).....180 NSF (16.8 NSM)**
 - a. Provide one if [number of Audiology patient care rooms] is between 1 and 12*
 - b. Provide one at 240 NSF if [number of Audiology patient care rooms] is between 13 and 24*

This support space (staff only) accommodates the equipment used to modify custom hearing aids and ear molds. This room also accommodates storage for parts and supplies.

- 2. Audiology Hearing Aid Processing, ASLP Svc (CAS71).....180 NSF (16.8 NSM)**
 - a. Provide one if [number of Audiology patient care rooms] is between 1 and 12*
 - b. Provide one at 240 NSF if [number of Audiology patient care rooms] is between 13 and 24*

This secure room accommodates activities associated with the shipping and receiving of hearing aids and hearing aid parts. It accommodates storage of boxed items, including those containing hearing aids and hearing aid parts labeled with private patient information; and may be utilized as a central “mailroom” for the service.

- 3. Audiology Soiled Utility Room, Lgstcs Svc (SB743)..... 80 NSF (7.5 NSM)**
 - a. Provide one if [number of Audiology patient care rooms] is between 1 and 12*
 - b. Provide two if [number of Audiology patient care rooms] is between 13 and 24*

This space is used for the temporary holding of bagged waste and enclosed carts or bins containing used/soiled instruments (including biohazard and sharps waste, and RME) utilized for medical procedures (such as cerumen management) performed in the department

- 4. Audiology Supply Storage Room, ASLP Svc (CAS76)..... 80 NSF (7.5 NSM)**
 - a. Provide one if [number of Audiology patient care rooms] is between 1 and 12*
 - b. Provide two if [number of Audiology patient care rooms] is between 13 and 24*

This room accommodates the storage of clean supplies on open shelving and in enclosed mobile carts or cabinets, including packaged sterile instruments (RME) and supplies.

- 5. Audiology Equipment Storage Room, ASLP Svc (CAS86)120 NSF (11.2 NSM)**
 - a. Provide one if [number of Audiology patient care rooms] is between 1 and 12*
 - b. Provide two if [number of Audiology patient care rooms] is between 13 and 24*



- 6. Audiology Clean Linen Room, EMS (SC471) 60 NSF (5.6 NSM)**
 - a. Provide one if [number of Audiology patient care rooms] is between 1 and 8
 - b. Provide one at 100 NSF if [number of Audiology patient care rooms] is between 9 and 16
 - c. Provide one at 140 NSF if [number of Audiology patient care rooms] is between 17 and 24

This space accommodates a mobile cart for the storage of clean linens, per facility needs.

- 7. Audiology Housekeeping Aides Closet (HAC), Bldg Sprrt (SB244) 60 NSF (5.6 NSM)**
 - a. Provide one if [number of Audiology patient care rooms] is between 1 and 24

D. FA4: SPEECH-LANGUAGE PATHOLOGY PATIENT AREA

FA Condition: [Speech-Language Pathology is authorized]

- 1. Speech-Language Pathology Exam, ASLP Svc (CAS51)125 NSF (11.7 NSM)**
 - a. Provide one if [number of Speech-Language Pathology patient care rooms] is between 1 and 2
 - b. Provide two if [number of Speech-Language Pathology patient care rooms] is between 3 and 4

The Speech-Language Pathology Exam is a patient care space that will be utilized for the evaluation and treatment of communication disorders that do not require instrumental evaluation. Activities include private counseling and speech therapy for patients who have language, cognitive and fluency disorders, as well as review of medical records and documentation.

- 2. Speech-Language Pathology Assistive Technology Room, ASLP Svc (CAS54).....400 NSF (37.2 NSM)**
 - a. Provide one if [number of Speech-Language Pathology patient care rooms] is between 1 and 4

A dedicated space that includes a variety of state-of-the art products, devices and equipment that may enable patients with disabilities to train for accomplishing daily living tasks, assist them in communication, education, work, or recreation activities, helping them to achieve greater independence and enhance their quality of life. This room accommodates the additional space needed to treat or provide therapy to patients in a hospital bed or gurney.

- 3. Speech-Language Pathology Voice Treatment Room, ASLP Svc (CAS57).....240 NSF (22.3 NSM)**
a. Provide one if [number of Voice Function procedures] is between 1 and 1,477
b. Provide two if [number of Voice Function procedures] is between 1,478 and 2,954

This room is a patient care space that will be utilized for the diagnosis and treatment of speech and voice disorders, including interventions for individuals before and after head and neck cancers. The room accommodates special equipment to measure and analyze the acoustic properties of speech and voice, including laryngeal communication, for the purpose of diagnostic evaluation and treatment. Specialized procedures and equipment include:

- Laryngectomy / Alaryngeal Voice (i.e. tracheoesophageal voice prosthesis (TEP) fittings/changes
- Heat/moisture exchanger (HME) system fittings / changes
- Computerized speech/voice lab

- 4. Speech-Language Pathology Procedure Room, ASLP Svc (CAS61).....300 NSF (27.9 NSM)**
a. Provide one if [number of Swallow Function procedures] is between 1 and 686
b. Provide two if [number of Swallow Function procedures] is between 687 and 1,372

This room accommodates the equipment used for the instrumental evaluation and treatment of voice and swallowing disorders as follows: Voice (diagnostic laryngeal endoscopy using high magnification, video recording, and stroboscopy techniques and Swallow function (one or more instrumental procedures, including fiberoptic endoscopic examination of swallow function (FEES), surface electromyography (sEMG), tongue pressures, respiration and manometry).

- 5. Speech-Language Pathology Group Room, ASLP Svc (CAS64)240 NSF (22.3 NSM)**
a. Provide one if [number of Speech-Language Pathology patient care rooms] is between 1 and 4

Space used for group medical appointments of up to 12 veterans and staff.

- 6. Speech-Language Pathology Patient Toilet, Bldg Sprt (SB201) 60 NSF (5.6 NSM)**
a. Provide one if [number of Speech-Language Pathology patient care rooms] is between 1 and 4

Allocated area accommodates one accessible toilet @ 25 NSF, one accessible wall-hung lavatory @ 13 NSF, ABA clearances, and circulation.



E. FA5: SPEECH-LANGUAGE PATHOLOGY SUPPORT AREA

FA Condition: [*Speech-Language Pathology is authorized*]

**1. Speech-Language Pathology Soiled Utility Room,
Lgstcs Svc (SB743) 100 NSF (9.3 NSM)**

- a. *Provide one if [number of Speech-Language Pathology patient care rooms] is between 1 and 2*
- b. *Provide one at 120 NSF if [number of Speech-Language Pathology patient care rooms] is between 3 and 4*

This space is used for the temporary holding of bagged waste and enclosed carts or bins containing used/soiled instruments (including flexible and rigid scopes/RME, biohazard and sharps waste) utilized for procedures and diagnostics performed in the department (such as videostroboscopy and FEES). The room may be used for the preliminary cleanup of instruments, including scopes, if located directly adjacent to the procedure room, and will require a limited amount of storage for disposable PPE.

**2. Speech-Language Pathology Supply Storage Room,
ASLP Svc (CAS81)..... 100 NSF (9.3 NSM)**

- a. *Provide one if [number of Speech-Language Pathology patient care rooms] is between 1 and 2*
- b. *Provide one at 120 NSF if [number of Speech-Language Pathology patient care rooms] is between 3 and 4*

This room accommodates the storage of clean supplies on open shelving and in enclosed mobile carts or cabinets, including packaged sterile instruments (RME) and supplies, test kits, and packaged food (for Speech/Voice diagnostics).

**3. Speech-Language Pathology Equipment Storage,
ASLP Svc (CAS91)..... 100 NSF (9.3 NSM)**

- a. *Provide one if [number of Speech-Language Pathology patient care rooms] is between 1 and 2*
- b. *Provide one at 120 NSF if [number of Speech-Language Pathology patient care rooms] is between 3 and 4*

4. Speech-Language Pathology Clean Linen Room, EMS (SC471) 60 NSF (5.6 NSM)

- a. *Provide one if [number of Speech-Language Pathology patient care rooms] is between 1 and 2*
- b. *Provide one at 80 NSF if [number of Speech-Language Pathology patient care rooms] is between 3 and 4*

This space accommodates a mobile cart for the storage of clean linens, per facility needs.

**5. Speech-Language Pathology Housekeeping Aides Closet (HAC),
Bldg Sprt (SB244) 60 NSF (5.6 NSM)**

- a. *Provide one if [Speech-Language Pathology is authorized]*



F. FA6: AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY STAFF AND ADMINISTRATIVE AREA

- 1. Audiology Chief Office, Stff Sprt (SS204) 100 NSF (9.3 NSM)**
 - a. Provide one if [Audiology is authorized]*
- 2. Speech-Language Pathology Chief Office, Stff Sprt (SS204) 100 NSF (9.3 NSM)**
 - a. Provide one if [Speech-Language Pathology is authorized]*
- 3. ASLP Svc Assistant Service Chief Office, Stff Sprt (SS204) 100 NSF (9.3 NSM)**
 - a. Provide one if [Audiology is authorized] or [Speech-Language Pathology is authorized]*
- 4. ASLP Svc Section Chief Office, Stff Sprt (SS204) 100 NSF (9.3 NSM)**
 - a. Provide one if [Audiology is authorized] or [Speech-Language Pathology is authorized]*
- 5. ASLP Svc Administrative Officer Office, Stff Sprt (SS204) 100 NSF (9.3 NSM)**
 - a. Provide one if [Audiology is authorized] or [Speech-Language Pathology is authorized]*
- 6. ASLP Svc Administrative Assistant Workstation, Stff Sprt (SS218) 56 NSF (5.3 NSM)**
 - a. Provide one if [number of Audiology and Speech-Language Pathology patient care rooms] is between 1 and 14*
 - b. Provide two if [number of Audiology and Speech-Language Pathology patient care rooms] is between 15 and 28*
- 7. ASLP Svc Copy / Supply Room, Stff Sprt (SS272) 80 NSF (7.5 NSM)**
 - a. Provide one if [number of Audiology and Speech-Language Pathology patient care rooms] is between 1 and 8*
 - b. Provide one at 100 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 9 and 16*
 - c. Provide one at 120 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 17 and 28*
- 8. ASLP Svc Staff Breakroom, Stff Sprt (SS262) 100 NSF (9.3 NSM)**
 - a. Provide one if [number of Audiology and Speech-Language Pathology patient care rooms] is between 1 and 4*
 - b. Provide one at 120 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 5 and 8*
 - c. Provide one at 140 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 9 and 12*
 - d. Provide one at 160 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 13 and 16*
 - e. Provide one at 180 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 17 and 20*



- f. Provide one at 200 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 21 and 24*
- g. Provide one at 240 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 25 and 28*

This space will be used as a shared staff respite area for lunch breaks and other time away from clinical duties. The room will accommodate basic kitchen equipment (refrigerator and microwave), a counter area for limited food preparation, and a small amount of storage for paper goods, and table and chairs. Personal Property Lockers may be located in an alcove within this room.

- 9. ASLP Svc Conference Room, Educ Svc (SS101)240 NSF (22.3 NSM)**
 - a. Provide one if [number of Audiology and Speech-Language Pathology patient care rooms] is between 1 and 7*
 - b. Provide one at 300 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 8 and 14*
 - c. Provide one at 500 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 15 and 21*
 - d. Provide one at 675 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 21 and 28*
- 10. ASLP Svc Staff Toilet, Bldg Sprt (SB191) 60 NSF (5.6 NSM)**
 - a. Provide one if [number of Audiology and Speech-Language Pathology patient care rooms] is between 1 and 4*
 - b. Provide two if [number of Audiology and Speech-Language Pathology patient care rooms] is between 5 and 28*
- 11. ASLP Svc Staff Personal Property Locker, Stff Sprt (SS251)..... 60 NSF (5.6 NSM)**
 - a. Provide two if [Audiology is authorized] or [Speech-Language Pathology is authorized]*

G. FA7: AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY EDUCATION AREA

FA Condition: [Audiology is authorized] or [Speech-Language Pathology is authorized]

- 1. ASLP Svc Resident / Fellow Team Room, Clncl Sprt (SC243)240 NSF (22.3 NSM)**
 - a. Provide one if [number of Audiology and Speech-Language Pathology patient care rooms] is between 1 and 14*
 - b. Provide one at 360 NSF if [number of Audiology and Speech-Language Pathology patient care rooms] is between 15 and 28*

This space will be used by trainees for patient charting and consultation. The area will accommodate one fellow and three resident workstations, a small conference table, and personal property lockers for use by medical students.

H. SEPS IMPORTER SHORTCUTS

The following shortcuts are used in the Room Criteria Statements in the Educational Facilities Functional Areas. These shortcuts are used during upload of this document into the Space and Equipment Planning System (SEPS) software during implementation of the space planning parameters contained herewith to allow for mathematical or logical calculations to be performed. Input Data Statements (IDSs), Rooms or a partial calculation formula can have a shortcut.

1. *number of Audiology and Speech-Language Pathology patient care rooms:* [Audiology Hearing Aid Repair Room, ASLP Svc (CAS06)], [Audiology Audiometric Examination Room w/Control Room, ASLP Svc (CAS11)], [Audiology Audiometric Examination Room, ASLP Svc (CAS16)], [Audiology Programming / Fitting Room, ASLP Svc (CAS26)], [Audiology Cerumen Management Room, ASLP Svc (CAS31)], [Audiology Electrophysiology Room, ASLP Svc (CAS36)], [Speech-Language Pathology Voice Treatment Room, ASLP Svc (CAS57)], [Speech-Language Pathology Procedure Room, ASLP Svc (CAS61)]
2. *number of Audiology patient care rooms:* [Audiology Hearing Aid Repair Room, ASLP Svc (CAS06)], [Audiology Audiometric Examination Room w/Control Room, ASLP Svc (CAS11)], [Audiology Audiometric Examination Room, ASLP Svc (CAS16)], [Audiology Programming / Fitting Room, ASLP Svc (CAS26)], [Audiology Cerumen Management Room, ASLP Svc (CAS31)], [Audiology Electrophysiology Room, ASLP Svc (CAS36)]
3. *number of Speech-Language Pathology patient care rooms:* [Speech-Language Pathology Voice Treatment Room, ASLP Svc (CAS57)], [Speech-Language Pathology Procedure Room, ASLP Svc (CAS61)]
4. *Audiology is authorized:* [Is Audiology Service authorized?]
5. *Speech-Language Pathology is authorized:* [Is Speech-Language Pathology Service authorized?]
6. *number of Hearing Aid Repairs:* [How many annual Hearing Aid Repairs are projected?]
7. *number of Hearing Aid Fitting and Assessment procedures:* [How many annual Hearing Aid Fitting and Assessment procedures (CPTs) are projected?]
8. *number of Audiologic Assessment and Automated Audiometry procedures:* [How many annual Audiologic Assessment and Automated Audiometry procedures are projected?]
9. *Audiometric Examination Rooms with a separate Control Room preferred:* [Audiometric Examination Rooms with a separate Control Room preferred? (M) (If not, Audiometric Examination Rooms with a Control Room will be provided)]
10. *number of Cerumen procedures:* [How many annual Cerumen procedures are projected?]
11. *number of Electrophysiology procedures:* [How many annual Electrophysiology procedures are projected?]
12. *number of Voice Function procedures:* [How many annual Voice Function procedures (CPTs) are projected?]



13. *number of Swallow Function procedures*: [How many annual Swallow Function procedures (CPTs) are projected?]

6 PLANNING AND DESIGN CONSIDERATIONS

A. General

1. Audiology and Speech-Language Pathology (ASPS) shall be collocated in a medical center or outpatient clinic with dedicated space planned to accommodate the specialized functional requirements of the services.
2. Audiology and Speech-Language Pathology shall be located to facilitate wayfinding via intuitive visual cues and clear, visible, barrier free signage. Proximity to an entrance or vertical transportation is recommended to minimize walking distances for patients and family members who may have a variety of physical and cognitive disabilities.
3. There are direct service relationships between Audiology and Speech-Language Pathology Service, Physical Medicine and Rehabilitation Service, and ENT. These services should be near each other.
4. There is a direct service relationship between Speech-Language Pathology and Radiology. Locate close to each other, or provide clear, intuitive wayfinding between the two departments.
5. At VA Medical Centers, there is a direct service relationship between Audiology and Speech-Language Pathology and inpatient, and residential services (including Intensive Care, Spinal Cord Injury Unit, and Community Living Center), as well as the Emergency Department. Proximity to vertical transportation to facilitate workflow, the occasional movement of beds and gurneys to ASPS, and staff access to these departments, if on a different level, is recommended.
6. There is a significant service relationship between Speech-Language Pathology and Sterile Processing Service (SPS). Proximity to vertical transportation to facilitate workflow, if SPS is on a different level, is recommended.
7. Compatible outpatient specialty service adjacencies include the Eye and Dental Clinics.
8. Every precaution shall be taken to locate Audiology and Speech-Language Pathology away from intrusive noises and electromagnetic radiation sources. Refer to the Design Guide for additional details.
9. Windows with control for daylight and privacy are beneficial for patients and staff to alleviate stress associated with some diagnostics in the department. They may be incorporated, where possible in the reception, patient clinic, and staff/administrative functional areas. Refer to additional considerations in the following paragraphs.



10. Refer to Department of Veterans Affairs (VA) Office of Construction and Facilities Management Technical Information Library (www.cfm.va.gov/til/) for additional technical criteria.

B. Reception Area

1. Provide sufficient waiting and seating to accommodate scheduled and walk-in patients and their family member(s) immediately adjacent to the clinical area. Configure in such a way to permit direct visualization of patients by receptionist(s) and to facilitate communication with patients with various disabilities, including hearing and visual impairments.
2. The waiting area shall be a comfortable, healing environment with design features and positive distractions that minimize stress. Design considerations include, color scheme, material selection, ambient lighting, “zoning” of activities (in large waiting areas), seating configuration, views to the outside, and artwork. The waiting area shall accommodate bariatric seating and wheelchairs/scooters.
3. The waiting area shall have access to vending or the Canteen Service (such as Café), nearby, but not adjacent, for the convenience of patients, family members, and staff since some procedures take more than an hour.
4. If Speech-Language Pathology patient areas cannot be collocated with Audiology, a dedicated reception/waiting area and associated spaces shall be provided adjacent to the Speech-Language Pathology clinic.

C. Audiology Clinic Patient Area

Depending on the size of the clinic and types of procedures authorized, Audiology patient care spaces may be organized by function/activity as follows:

- Hearing Assessment/Hearing Aid Programming/Fitting Zone: rooms accommodate first time and established patient encounters to assess hearing, perform Compensation & Pension exams (including Medical Testimony), to program/fit hearing aids, and consultation with patients and family members. Rooms in this area require a high level of sound attenuation, and separation from electromagnetic radiation sources. Encounters in these rooms have some of the longest durations in the clinic. Rooms in this area include:
 - Rehabilitation / Counseling Room
 - Single and / or Double Audiometric Examination
 - Audiometric Programming / Fitting Room
 - Audiology Treatment and Support Zone: rooms accommodate routine treatments, such as hearing aid repairs and cerumen removal, which average less than 30 minutes. Rooms in this area include:
 - Hearing Aid Repair Room
 - Cerumen Management Room
- The Hearing Aid Lab, a Support Area room, shall be located adjacent to these rooms. The Hearing Aid Processing Room should be located close to these rooms and the Audiometric Programming/Fitting Room.



- Balance Testing and Support Zone: rooms in this area accommodate specialized Audiology procedures for the diagnosis and treatment of balance disorders. Rooms in this area include:
 - Posturography Room
 - Vestibulography Room
 - Rotary Chair Room

The Electrophysiology Room shall be located adjacent to these rooms since diagnostics in the room are most closely associated with the balance testing. Not every Audiology clinic will have balance testing/treatment rooms; some may only have one room or accommodate multiple diagnostics/treatments in a single room (such as Rotary Chair and VNG together).

The Telehealth Room, if authorized, is a patient care space which does not require access by patients; it should be in a quiet area close to the Staff and Administrative Area.

The Telehealth Exam Room, if authorized is a patient care space which requires access by patients; it should be in the Audiology Clinic Area but requires sound attenuation considerations.

Prefabricated sound booths shall be recessed into pits (structural slab depression) to provide unencumbered access. If not feasible, floors must be raised to eliminate sills. Prefabricated sound booths require additional facility considerations including sufficient floor-to-floor height to accommodate mechanical and electrical systems above the booth, clearances around the enclosure, and special connections to building mechanical, plumbing (sprinkler) and electrical systems.

Exterior windows are beneficial and may be provided in the Rehabilitation/Counseling and Audiometric Programming/Fitting Rooms. Windows are to be avoided in the balance testing rooms (since some diagnostics require complete darkness). Windows are not recommended in the general Audiology treatment rooms but may be provided if coordinated with equipment placement. Window treatments or other architectural devices are required to maintain privacy and to control daylight and glare.

A Patient Toilet must be near the Audiology Patient Care Area. An additional Patient Toilet is required if balance testing is performed.

Finishes must balance sound attenuation requirements with infection control and other considerations, such as patient mobility.

- Carpet tile may be used in Rehabilitation/Counseling, Audiometric Examination, and Audiometric Programming/Fitting Rooms. Non-porous, easily cleanable flooring is to be used in other Audiology patient care and support spaces.

D. Speech-Language Pathology Clinic Patient Care Area

Depending on the size of the clinic and types of procedures authorized, Speech-Language Pathology patient care spaces may be organized by function/activity as follows:



- **Speech Evaluation/Therapy Zone:** Rooms accommodate the non-instrumental evaluation and treatment of Speech-Language, and cognitive disorders. Rooms in this area should be located close to the clinic entry and include:
 - Speech Exam Rooms
 - Assistive Technology Rooms
- **Procedure Zone:** Rooms accommodate the instrumental evaluation of voice and swallowing disorders. Rooms in this area include:
 - Voice Treatment Room
 - Procedure Room

These rooms require direct or proximity to Support Area functions, including Soiled Utility and Clean Supply Rooms.

Exterior windows are beneficial and may be provided in the Office/Treatment Room. Windows are to be avoided in the Special Procedure and Voice Treatment Rooms. Windows are not recommended in the Assistive Technology Room but may be provided if coordinated with equipment and furniture placement. Window treatments or other architectural devices are required to maintain privacy and to control daylight and glare.

Finishes must balance sound attenuation requirements with infection control and other considerations, such as patient mobility.

- Carpet tile may be used in the Office/Treatment Room.
- Non-porous, easily cleanable flooring is required in the Voice Treatment and Procedure Rooms; carpet tile is not permitted in these spaces. Alternative strategies such as increasing the STC rating of partitions and higher NRC-rated ceiling system will need to be employed to maintain speech privacy and contain noise generated in these rooms.

E. Support Area

This area includes both specialized and standard clinical support spaces.

Depending on the size of the clinic, common rooms, such as Clean Supply and Soiled Utility Rooms, may be shared, or dedicated to the unique requirements of each service.

- Clean Supply and Soiled Utility Rooms associated with Speech-Language Pathology procedure rooms (Special Procedure and Voice Treatment) have unique requirements and should be located directly adjacent to or very close to the procedure rooms.
- The Assistive Technology Room may need additional equipment storage space.

The Hearing Aid Lab and Hearing Aid Processing Room shall be located adjacent to Audiology Patient Care Rooms.

- The Hearing Aid Lab location must consider acoustical separation and sound attenuation relative to adjacent spaces to contain noise.

Depending on the size of the clinic, it is recommended to locate access to clinical support rooms via a separate “off stage” staff corridor.



F. Staff and Administrative Area

The quantity and type of staff and administrative offices and support space will depend on the number of FTEs authorized.

Locate staff and administrative areas adjacent to clinical areas to minimize staff walking distances.

- It is recommended to locate access to these spaces via a separate “off stage” staff corridor.

The Break Room, Conference Room, Locker Alcove and Staff Toilet shall be shared between Audiology and Speech-Language Pathology, however if Audiology and Speech-Language Pathology are not colocated, additional space must be planned to accommodate these functions adjacent to each clinical area.

Exterior windows are beneficial and may be provided in the Offices, Break Room, and Conference Room. Window treatments or other architectural devices are required to maintain privacy and to control daylight and glare.

G. Education Area

Locate education space adjacent to the Staff and Administration Area for ease of staff access.

The Resident/Fellow Collaboration Room may be shared by Audiology and Speech-Language Pathology residents and trainees.

The size of the Resident Collaboration Room will depend upon the number of anticipated resident/trainee workstations to be accommodated and shall include space for a small conference table/collaboration area.

Exterior windows are beneficial and may be provided in the Resident/Fellow Collaboration Room. Window treatments or other architectural devices are required to maintain privacy and to control daylight and glare.



7 FUNCTIONAL RELATIONSHIPS

Relationship of Audiology and Speech-Language Pathology to services listed below:

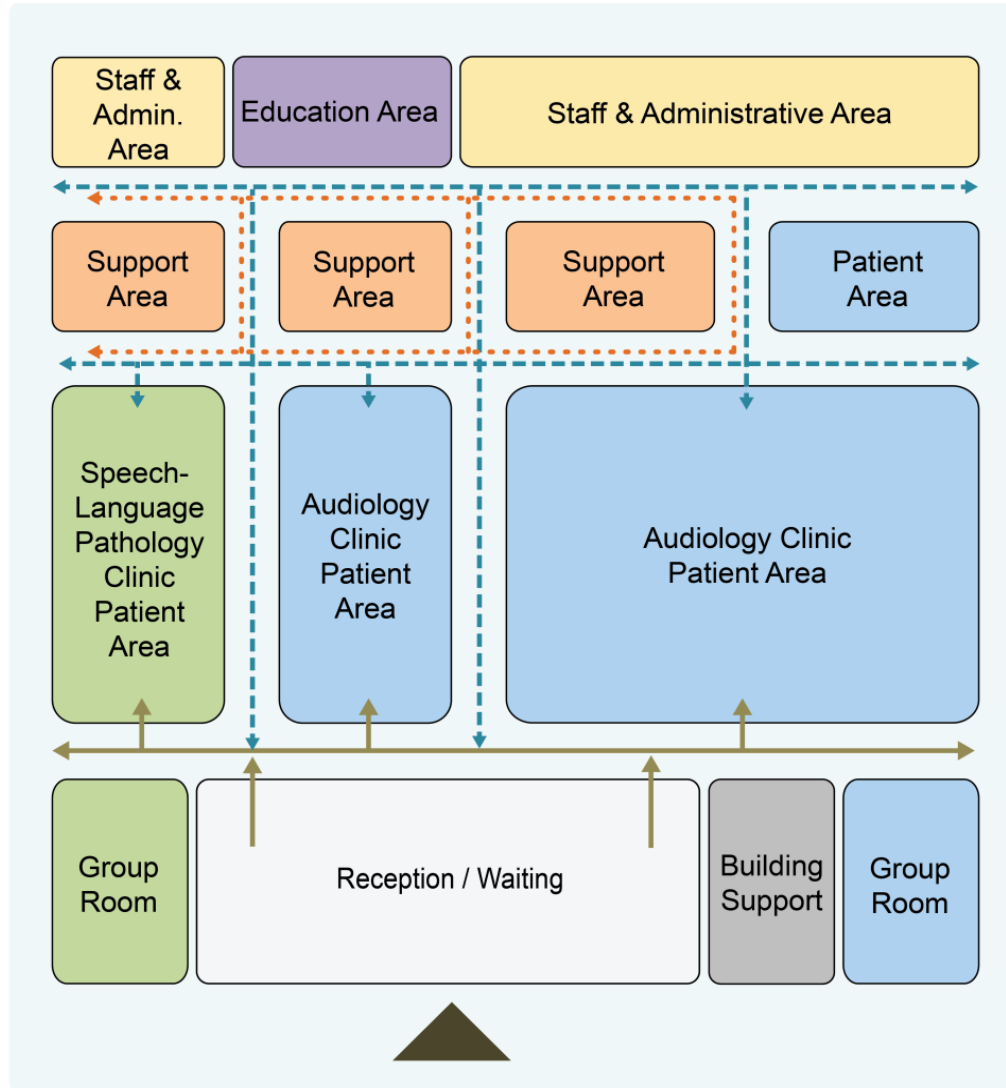
TABLE 1: FUNCTIONAL RELATIONSHIP MATRIX

SERVICES	FUNCTIONAL RELATIONSHIP
BLDG SPRT: ENG: Engineering Service (all specialties)	3
BLDG SPRT: Logstcs Svc: Warehouse	3
CLNCL: Imgng Svcs: Radiography	3
CLNCL SPRT: SP Svc: Decontamination	3
CLNCL SPRT: SP Svc: Scope Processing	3
CLNCL SPRT: SP Svc: Sterilization	3



8 FUNCTIONAL DIAGRAMS




- A. Audiology and Speech-Language Pathology Service General Functional Diagram.
 (Diagram for functional organization, does not represent a specific space program.)



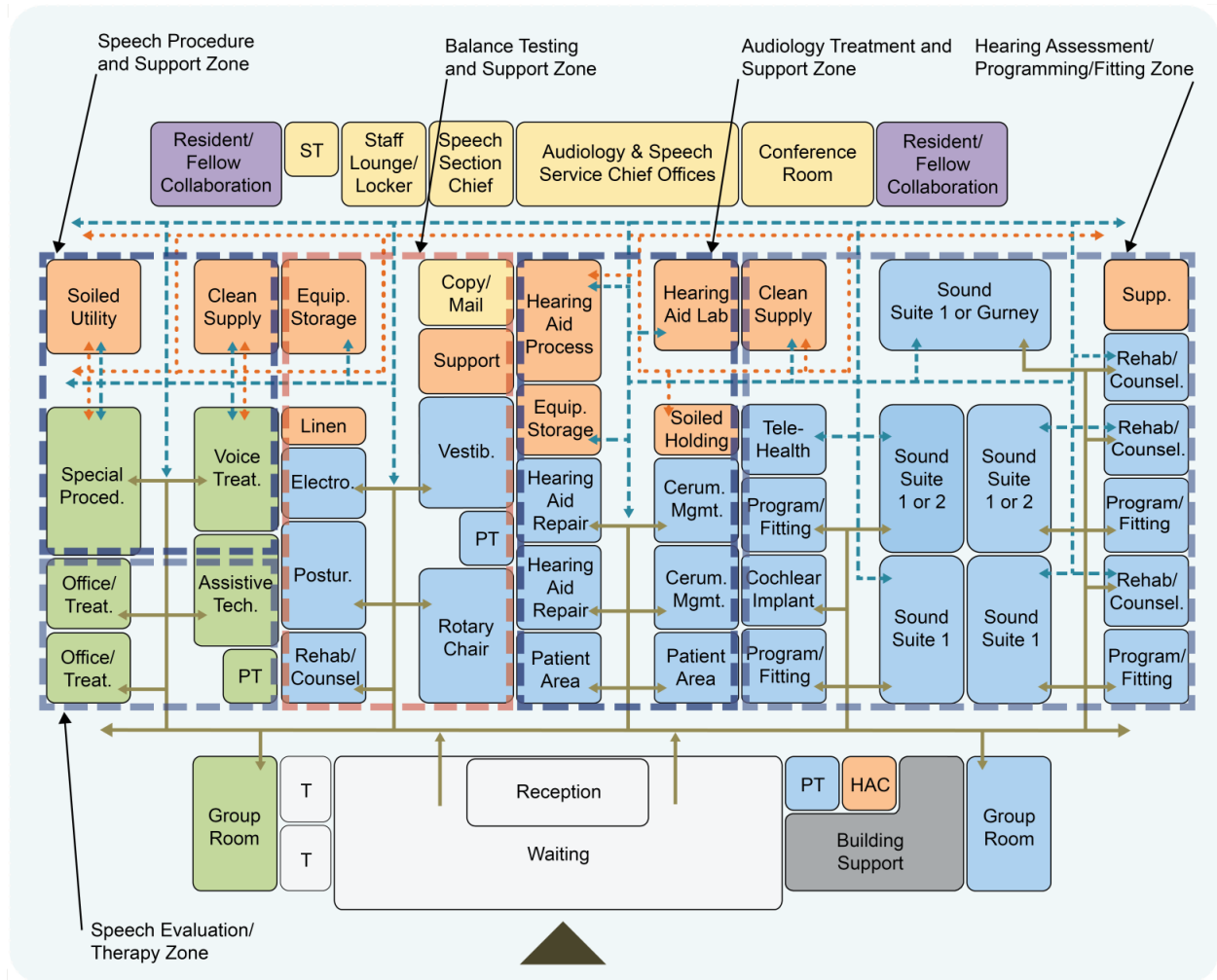
Functional Area

- | | |
|---|---|
|  FA 1: Reception Area |  FA 4: Support Area |
|  FA 2: Audiology Clinic Patient Area |  FA 5: Staff and Administrative Area |
|  FA 3: Speech-Language Pathology Clinic Patient Area |  FA 6: Education Area |
| |  Building Support |

Circulation

- | | |
|---|---------|
|  | Patient |
|  | Staff |
|  | Service |

B. Audiology and Speech-Language Pathology Service VAMC. (Diagram for functional organization, does not represent a specific space program.)



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C. Audiology and Speech-Language Pathology Service – Outpatient ACC/CBOC Functional Diagram (Diagram for functional organization, does not represent a specific space program)

