Room Schedule							
Number	Name	Area					
00.33	Inpatient 2	5 m ²					
00.33	Reporting Room	29 m ²					
00.22	Dirty Utility	29 m² 7 m²					
00.22	CT Control	12 m ²					
0.24 00.26	CT Scanner	38 m ²					
00.13	Interventional Suite	39 m²					
00.38	Access Change MRI	4 m²					
00.36	AWC	5 m ²					
00.35	Staff WC	3 m²					
00.25	Clean Utility	10 m ²					
0.39	Prep 1	6 m ²					
0.07	CT Scanner	33 m²					
00.23	CT Control	9 m ²					
00.21	Access CT Change 2	4 m ²					
00.12	X-Ray Office	6 m ²					
00.11	Recovery	25 m ²					
00.08	Corridor 1	35 m²					
00.16	X-Ray Admin	6 m ²					
00.17	X-Ray Change	3 m ²					
0.05	AWC	5 m ²					
0.04	Prep Room	8 m ²					
0.03	X-Ray 1	30 m ²					
00.01	Store	1 m ²					
0.02	Store	3 m ²					
0.06	BDM	19 m ²					
0.44	Reception	13 m ²					
0.41	Waiting Area	8 m ²					
00.11	Inpatient 1	4 m ²					
0.11	Inpatient 2	5 m ²					
0.11	Inpatient 3	5 m ²					
0.11	Inpatient 4	5 m ²					
00.10	Nurse Base	3 m ²					
0.09	Waiting Room	8 m ²					
0.32	Prep Area	7 m ²					
00.45	AWC	5 m ²					
00.40	Change MRI 2	4 m ²					
00.37	Manager's Office	9 m ²					
00.34	Inpatient 1	5 m²					
00.29	Store	1 m ²					
00.27	AWC	5 m ²					
00.27 00.28	Corridor 3	42 m ²					
00.28 00.18	Corridor 2	55 m ²					
00.18	Wheelchair Store	2 m ²					
00.43	Corridor 5	41 m ²					
00.20	Hatch	2 m ²					
00.15	Prep Area CT	2 m ²					
00.14	X-Ray Tech	7 m ²					
00.19	CT Change 3	3 m ²					
00.42	Corridor 5	5 m ²					
Grand total: 49		592 m ²					



Proposed GA

05

04

03

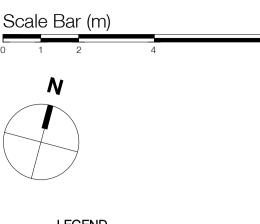
02

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P2	Issued for Des	sign and Acce	ss Statem	ent H	IKL	DRO	24/11/23		
P1	Issued for Ter	nder		A	GR	DRO	10/03/23		
Rev	Description			D	rawn	Checked	Date		
Suitability Tender									
Dia	ject uthport and Ignostic uthport	Ormskirk I	Hospita	IS					
Drawing Proposed Ground Floor Plan									
	wing Number ject ID	Originator	Zone	Level	Туре	e Role	Number		

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