

CONSTRUCT ADHC - EHRM INFRASTRUCTURE UPGRADES

St. Cloud VA Health Care System
Main Campus, St. Cloud, Minnesota

OWNER AND CONSULTANTS:

VA COR:
CONTACT: MIKE ENGMARK
ADDRESS: ST CLOUD VA MEDICAL CENTER
4801 VETERANS DRIVE
ST. CLOUD, MN 56303
PHONE: 320-252-1670
PROGRAM MANAGER:
CONTACT: JONATHAN WEST
ADDRESS: ST CLOUD VA MEDICAL CENTER
4801 VETERANS DRIVE
ST. CLOUD, MN 56303
PHONE: 504-250-2699
EMAIL: Jonathan.West@vcaint.com

CIVIL ENGINEER:
NAME: ANDERSON ENGINEERING OF MN, LLC
ADDRESS: 13605 1ST AVE NORTH, SUITE 100
PLYMOUTH, MN 55441

CONTACT: IAN WEBER
PHONE: 763-412-4000
ARCHITECT:
NAME: ANDERSON ENGINEERING OF MN, LLC
ADDRESS: 13605 1ST AVE NORTH, SUITE 100
PLYMOUTH, MN 55441
CONTACT: EDWARD MARKFORT
PHONE: 763-412-4000

STRUCTURAL ENGINEER:
NAME: ADVANCED STRUCTURAL TECHNOLOGIES
ADDRESS: 7301 OHMS LANE, SUITE 215
EDINA, MN 55439
CONTACT: ZACHARY CRAIG
PHONE: 952-854-9302

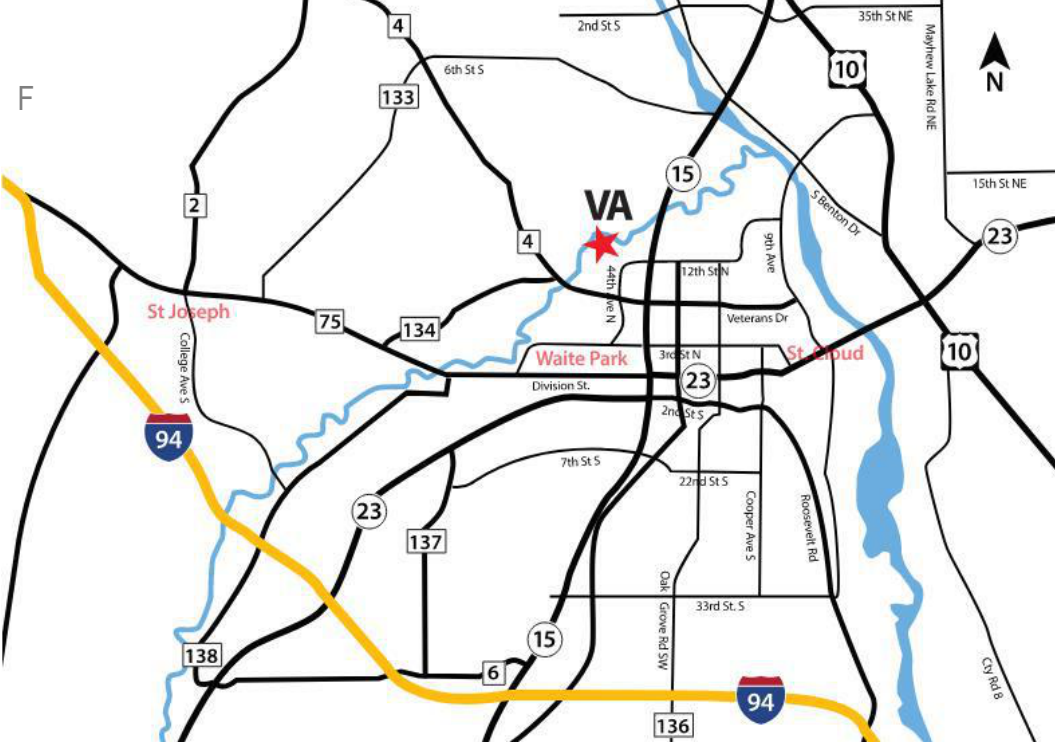
TELECOMMUNICATIONS ENGINEER:
NAME: SPECIALIZED ENGINEERING SOLUTIONS
ADDRESS: 10360 ELLISON CIRCLE
OMAHA, NE 68134

CONTACT: KRIS BURNHAM
PHONE: 402-991-5520

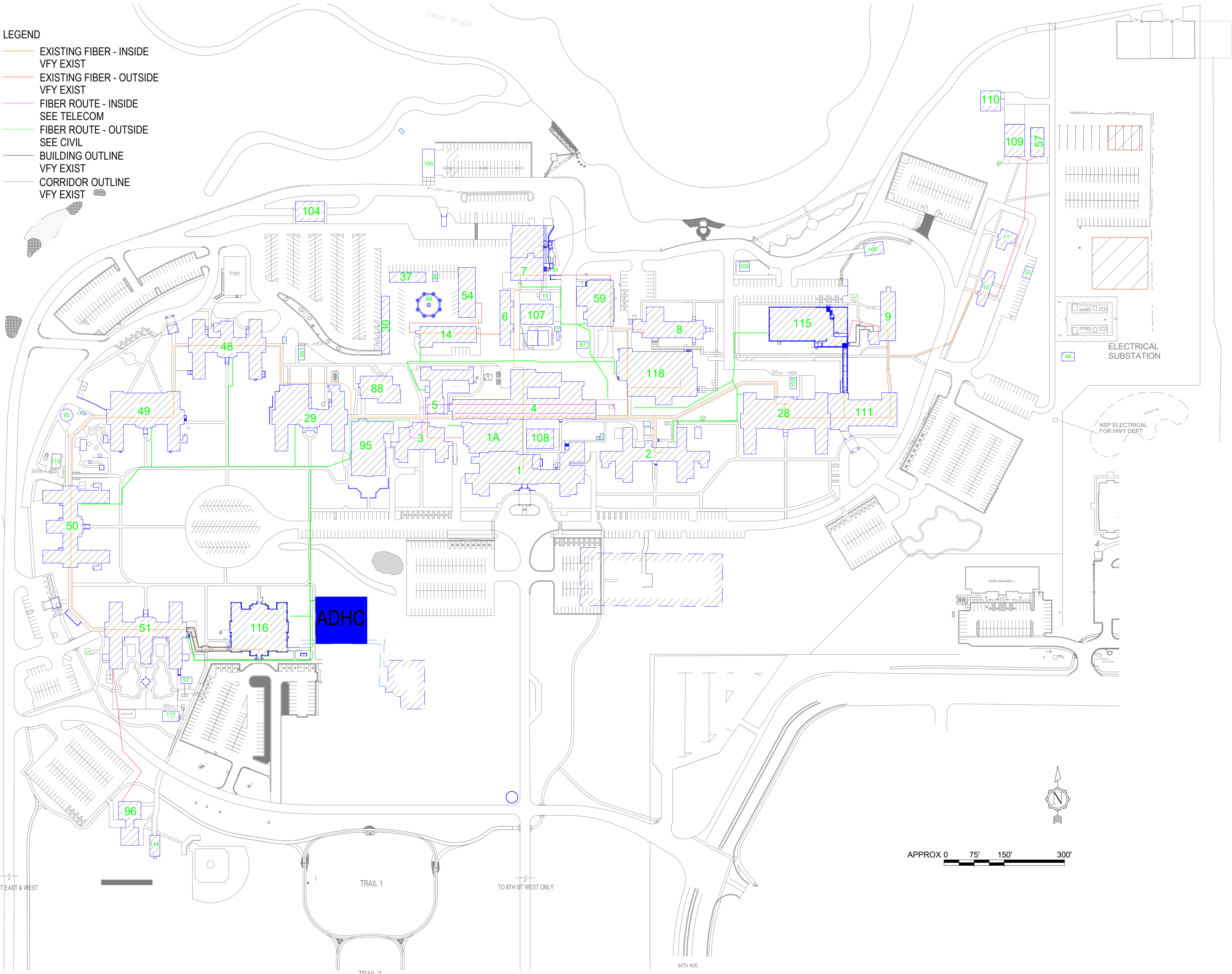
MECHANICAL/PLUMBING/FIRE ENGINEER:
NAME: SPECIALIZED ENGINEERING SOLUTIONS
ADDRESS: 10360 ELLISON CIRCLE
OMAHA, NE 68134

CONTACT: KRIS BURNHAM
PHONE: 402-991-5520

VICINITY MAP:



- LEGEND
- EXISTING FIBER - INSIDE
 - VFY EXIST
 - EXISTING FIBER - OUTSIDE
 - VFY EXIST
 - FIBER ROUTE - INSIDE
 - SEE TELECOM
 - FIBER ROUTE - OUTSIDE
 - SEE CIVIL
 - BUILDING OUTLINE
 - VFY EXIST
 - CORRIDOR OUTLINE
 - VFY EXIST



SHEET INDEX - ADHC	
ADHC	SHEET TITLE
FB1-G1000	CONSTRUCT ADULT DAY HEALTH CARE COVER SHEET & SHEET INDEX
FB1-AS110	FIRST FLOOR - OVERALL PLAN
SEE CAMPUS SHEETS FOR ADDITIONAL INFORMATION	

ROOM SCHEDULE													
NO.	NAME	CABLING	PATCH PANEL	FIBER	POWER	BONDING	UPS	DEDICATED COOLING	TEMPERATURE	HUMIDITY	PACK SENSORS	SPACE	AREA
FIRST FLOOR													
PLACEHOLDER ADHC													
												10 SF	SEE TELECOM DRAWINGS

HAZARDOUS MATERIAL SCHEDULE				
LEVEL	ROOM NO.	ROOM NAME	QUESTIONABLE HAZARDOUS ELEMENT	POSSIBLE ABATEMENT ACTION
FIRST FLOOR				
PLACEHOLDER ADHC				
HAZARDOUS MATERIALS MAY BE ENCOUNTERED THROUGHOUT THE DISTRIBUTION ROUTING THROUGH CEILING PLENUMS AND UTILITY TUNNELS. INSTALLATION OF DISTRIBUTION SHALL NOT DISTURB QUESTIONABLE HAZARDOUS MATERIAL.				

ICRA PHASE CONSTRUCTION ROOM SCHEDULE									
LEVEL	ROOM NO.	ROOM NAME	CAI BLDG NAME / FUNCTION	CONSTRUCTION PROJECT ACTIVITY	INFECTION CONTROL RISK GROUP	CONTROL PROCEDURE CLASS	SECTION	CONSTRUCTION ZONE / OCCUPIED CONSTR	DAY / NIGHT
FIRST FLOOR									
PLACEHOLDER ADHC									
SEE GENERAL NOTES SHEET FOR CONSTRUCTION INFECTION CONTROL RISK ASSESSMENT (ICRA) DESCRIPTIONS. TYPE, GROUP AND CLASS SELECTED TO BEST OF DESIGN TEAM'S KNOWLEDGE. FINAL DETERMINATION BY THE VA WILL BE MADE AT A LATER DATE.									

LEAK PREVENTION / DIVERTER SCHEDULE				
LEVEL	ROOM NO.	ROOM NAME	OVERHEAD LEAK DIVERTER AND DRAIN PIPING	LEAK PREVENTION BARRIER WATERPROOFING
FIRST FLOOR				
PLACEHOLDER ADHC				
SEE GENERAL NOTES SHEET FOR DETAIL. MWP = MEMBRANE WATERPROOFING. MASONRY = FLUID-APPLIED WATERPROOFING. INT = INTERIOR. EXT = EXTERIOR				

NO.	REVISION	DATE

CONSULTANT

AST **SES** **SPECIALIZED ENGINEERING SOLUTIONS**

10360 Ellison Circle
Omaha, NE 68134
Phone: 402.991.5520
www.specializedeng.com

ARCHITECT/ENGINEER OF RECORD

ANDERSON

13605 1st Ave. N. #100 Plymouth, MN 55441
P 763.412.4000 | F 763.412.4090 | ae-mn.com
Anderson Engineering of Minnesota, LLC | Proj # 16305

STAMP

I hereby certify that this plan, specification or report was prepared by me or under my direct supervision and that I am a duly Licensed Architect under the laws of the State of Minnesota.

Name: *Tom Olesak*
Typed or Printed Name: Tom Olesak
Date: 03/30/2022 License Number: MN# 18157

APPROVED: _____ DATE: _____	APPROVED: PROJECT COR _____ DATE: _____	APPROVED: PATIENT SAFETY _____ DATE: _____	APPROVED: DMS MANAGER _____ DATE: _____	APPROVED: DIRECTOR FMS _____ DATE: _____
APPROVED: _____ DATE: _____	APPROVED: SERVICE LINE DIRECTOR _____ DATE: _____	APPROVED: SAFETY MANAGER _____ DATE: _____	APPROVED: MO MANAGER _____ DATE: _____	APPROVED: ASSOCIATE DIRECTOR _____ DATE: _____
APPROVED: _____ DATE: _____	APPROVED: DMS COORDINATOR _____ DATE: _____	APPROVED: CHIEF OF POLICE _____ DATE: _____	APPROVED: PROJECTS SECTION MANAGER _____ DATE: _____	APPROVED: NURSE EXECUTIVE _____ DATE: _____
APPROVED: _____ DATE: _____	APPROVED: INFECTION CONTROL NURSE _____ DATE: _____	APPROVED: CHIEF OF STAFF _____ DATE: _____	APPROVED: ASSISTANT CHIEF ENGINEER _____ DATE: _____	APPROVED: CHIEF OF STAFF _____ DATE: _____

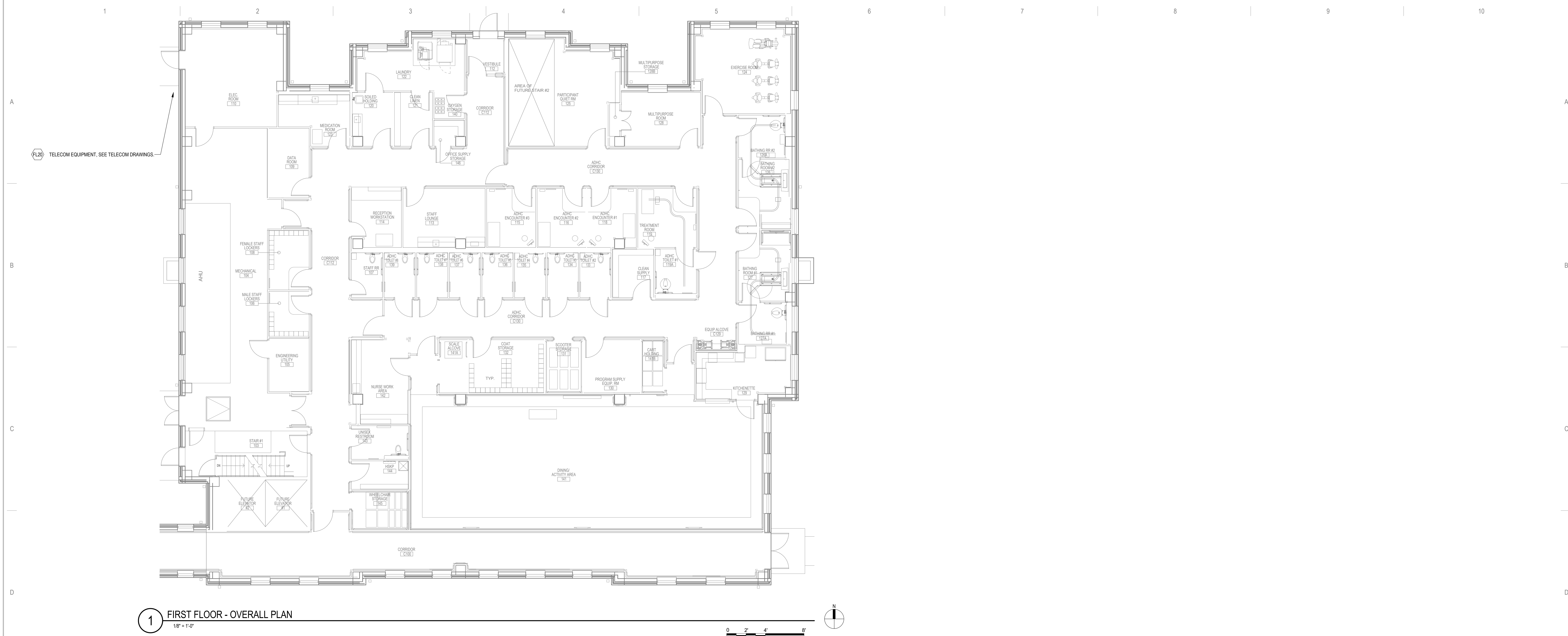
DRAWING TITLE

CONSTRUCT ADULT DAY HEALTH CARE COVER SHEET & SHEET INDEX

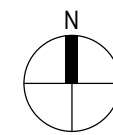
PROJECT FILE: EHRM INFRASTRUCTURE UPGRADES
DATE: 03/30/2022
PLOT SCALE: 1"=100'-0"
PROJECT NO: 656-21-235
DRAWING NO: FB1-G1000
LOCATION: VA MEDICAL CENTER ST. CLOUD, MN 56303
FULLY SPRINKLERED
COVER OF

VA

U.S. Department of Veterans Affairs
Veterans Health Administration
St. Cloud VA Health Care System



1 FIRST FLOOR - OVERALL PLAN

$$1/8" = 1'-0"$$


1. SEE GENERAL NOTES AND CPMs DRAWINGS FOR GENERAL INFORMATION, LIFE SAFETY, IGUS, AND PHASING
2. ALL EXISTING CONDITIONS MUST BE FIELD VERIFIED BY THE CONTRACTOR PRIOR TO DEMOLITION OR CONSTRUCTION. EXISTING CONDITIONS THAT DIFFER FROM THOSE SHOWN MUST BE BROUGHT TO THE ATTENTION OF THE C.O.R. TO INFORM THE ARCHITECTS AND ENGINEERS
3. THE INFORMATION SHOWN ON THE DRAWINGS IS BASED ON DRAWINGS AND PHOTOGRAPHS PROVIDED BY THE C.O.R. COMBINED WITH OBSERVATIONS AND SURVEYED DATA FROM THE ARCHITECTS AND ENGINEERS
4. SEE CIVIL STRUCTURAL, TELECOM, ELECTRICAL, MECHANICAL, AND PLUMBING DRAWINGS AND SPECIFICATIONS FOR ADDITIONAL DEMOLITION AND CONSTRUCTION REQUIREMENTS.
5. PORTABLE FIRE EXTINGUISHERS (CO2 OR HALOGENATED TYPE AS DETERMINED BY THE VA) WITH WALL MOUNT BRACKET AND CODE COMPLIANT SIGNAGE SHALL BE PROVIDED BY THE CONTRACTOR WITHIN TELECOM ROOMS.

No	REVISION	DATE



ANDERSON

STAMP

I hereby certify that this plan, specification or report was prepared by me or under my direct supervision and that I am a duly Licensed Architect under the laws of the State of Minnesota.

DRAWING TITLE

FIRST FLOOR - OVERALL PLAN

PROJECT NO.
656-21-235



**U.S. Department
of Veterans Affairs**
Veterans Health
Administration
St. Cloud VA
Health Care System