ChecklistGuro

Healthcare Facility Construction Project Checklist Template

Show only Checklist

Display Style
Default

Planning & Design

Initial assessments, site surveys, architectural designs, and regulatory approvals.

Project Goals & Objectives

Write something...

Target Project Completion Date

Enter date...

Estimated Project Budget

Enter a number...

Building Type (e.g., Hospital, Clinic, Surgical Center)

- [ ] Hospital
- [ ] Clinic
- [ ] Surgical Center
- [ ] Specialty Clinic

Preliminary Site Survey Report

Upload File

Description of Required Medical Services & Patient Flow

Write something...

Architectural Design Style

- [ ] Modern
- [ ] Traditional
- [ ] Sustainable
- [ ] Other

Permitting & Regulatory Compliance

Securing necessary permits, environmental impact studies, and adhering to healthcare-specific regulations.

Zoning Permit Status

- [ ] Applied For
- [ ] Approved
- [ ] Denied
- [ ] Pending Review

Permit Application Submission Date

Enter date...

Permit Application Fee Paid (USD)

Enter a number...

Fire Safety Permit Status

- [ ] Applied For
- [ ] Approved
- [ ] Denied
- [ ] Pending Review

Copy of Environmental Impact Assessment Report

Upload File

Notes on Regulatory Communication

Write something...

Site Preparation & Demolition

Site clearing, demolition of existing structures, and soil testing.

Lot Size (Acres)

Enter a number...

Description of Existing Site Conditions

Write something...

Demolition Permit Application Date

Enter date...

Pre-Demolition Site Photos

Upload File

Demolition Method

- [ ] Mechanical
- [ ] Controlled Implosion
- [ ] Selective Demolition

Estimated Demolition Waste Volume (Cubic Yards)

Enter a number...

Hazardous Materials Identified (e.g., Asbestos, Lead)

- [ ] Asbestos
- [ ] Lead-Based Paint
- [ ] Mercury
- [ ] None

Foundation & Structure

Foundation pouring, structural steel erection, and building frame construction.

Foundation Depth (feet)

Enter a number...

Concrete Strength (PSI)

Enter a number...

Concrete Pour Date

Enter date...

Concrete Inspection Signature

Steel Grade Specification

Enter a number...

Foundation Type

- [ ] Slab-on-Grade
- [ ] Basement
- [ ] Raft Foundation

Notes on Structural Integrity Concerns

Write something...

Exterior Works

Roofing, siding, windows, doors, landscaping, and exterior signage.

Scheduled Start Date for Exterior Work

Enter date...

Roofing Material Quantity (sq ft)

Enter a number...

Siding Material Samples

Upload File

Window Quantity

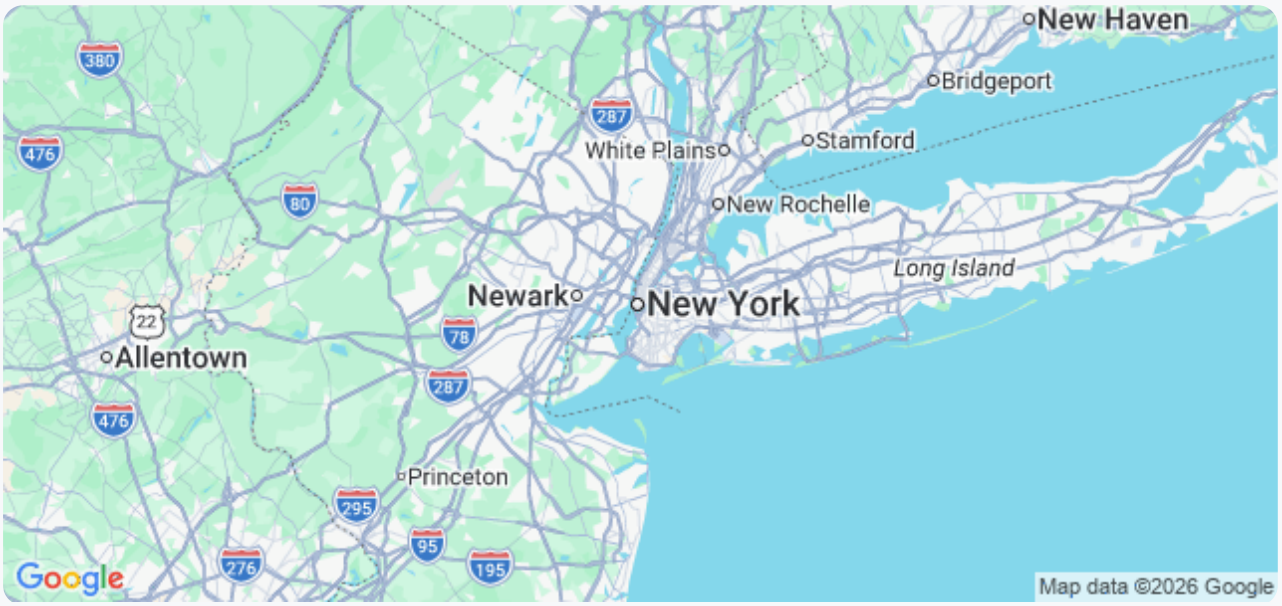
Enter a number...

Exterior Lighting Type

- [ ] LED
- [ ] Halogen
- [ ] Solar

Landscaping Contractor Site Visit Coordinates

Set My Current Location



Scheduled Completion Date for Exterior Painting

Enter date...

MEP (Mechanical, Electrical, Plumbing)

HVAC installation, electrical wiring, plumbing fixtures, and fire suppression systems.

HVAC Unit Capacity (BTU)

Enter a number...

Electrical Panel Amperage (Amps)

Enter a number...

Plumbing Pipe Diameter (inches)

Enter a number...

Electrical Wiring Type

- [ ] Copper
- [ ] Aluminum

Plumbing Fixture Types Installed

- [ ] Sinks
- [ ] Toilets
- [ ] Showers
- [ ] Medical Gas Outlets

HVAC System Commissioning Date

Enter date...

Electrical System Testing Start Time

Enter time...

Notes on Plumbing Backflow Prevention

Write something...

Interior Build-Out

Wall construction, flooring, ceiling, and interior finishes.

Wall Thickness (inches)

Enter a number...

Wall Finish Type

- [ ] Drywall
- [ ] Paneling
- [ ] Tile
- [ ] Other

Detailed Notes on Wall Finishes (e.g., specific paint codes, texture details)

Write something...

Flooring Material

- [ ] Vinyl
- [ ] Tile
- [ ] Carpet
- [ ] Concrete
- [ ] Other

Flooring Installation Completion Date

Enter date...

Ceiling Type and Details (e.g., suspended, drywall, acoustic panels)

Write something...

Ceiling Finish Samples (if applicable)

Upload File

Number of Interior Doors

Enter a number...

Medical Equipment Installation

Procurement, delivery, and installation of specialized medical equipment.

Equipment Vendor

- [ ] Vendor A
- [ ] Vendor B
- [ ] Vendor C
- [ ] Other

Equipment Model Number

Write something...

Quantity

Enter a number...

Scheduled Delivery Date

Enter date...

Estimated Installation Start Time

Enter time...

Installation Notes/Specific Requirements

Write something...

Equipment Manual/Datasheet

Upload File

Installation Status

- [ ] Not Started
- [ ] In Progress
- [ ] Completed

IT & Communication Infrastructure

Network cabling, server room setup, and telecommunications systems.

Network Bandwidth (Mbps)

Enter a number...

Wireless Network Standard (Wi-Fi)

- [ ] Wi-Fi 6 (802.11ax)
- [ ] Wi-Fi 5 (802.11ac)
- [ ] Wi-Fi 4 (802.11n)

Security Protocols

- [ ] Firewall
- [ ] VPN
- [ ] Intrusion Detection System
- [ ] Multi-Factor Authentication

Network Activation Date

Enter date...

Network Documentation (Diagrams, Configurations)

Write something...

Network Security Audit Report

Upload File

Infection Control & Safety

Implementation of infection control measures and ensuring workplace safety.

COVID-19 Safety Plan in Place?

- [ ] Yes
- [ ] No
- [ ] In Progress

Number of Hand Sanitizer Stations

Enter a number...

PPE Requirements

- [ ] Gloves
- [ ] Masks
- [ ] Gowns
- [ ] Eye Protection

Last Safety Training Date

Enter date...

Description of Ventilation System Enhancements (if any)

Write something...

Safety Plan Document

Upload File

Air Filtration System Type

- [ ] HEPA
- [ ] UV-C
- [ ] Standard Filtration
- [ ] None

Commissioning & Testing

Testing and verifying all systems are functioning correctly (electrical, plumbing, HVAC, medical gas, etc.).

Commissioning Start Date

Enter date...

Commissioning Start Time

Enter time...

System Commissioned (Select All That Apply)

- [ ] HVAC
- [ ] Electrical
- [ ] Plumbing
- [ ] Medical Gas
- [ ] Fire Safety
- [ ] Nurse Call System
- [ ] Security System

Temperature Verification (HVAC)

Enter a number...

Pressure Verification (Medical Gas)

Enter a number...

Test Results & Observations

Write something...

Commissioning Engineer Signature

Final Inspections & Approvals

Local authority inspections and obtaining Certificate of Occupancy.

Scheduled Inspection Date

Enter date...

Inspection Type

- [ ] Building Code Compliance
- [ ] Fire Safety
- [ ] Accessibility
- [ ] Medical Gas
- [ ] HVAC
- [ ] Electrical

Inspector Name

Write something...

Inspector Company

Write something...

Inspection Findings (Number of Deficiencies)

Enter a number...

Detailed Inspection Notes

Write something...

Inspector Signature

Resolution Completion Date (if applicable)

Enter date...

Handover & Training

Facility handover to client and staff training on new systems and equipment.

Official Handover Date

Enter date...

Summary of Outstanding Issues/Snag List

Write something...

Systems Handover Checklist Completed?

- [ ] Electrical
- [ ] Plumbing
- [ ] HVAC
- [ ] Medical Gases
- [ ] IT/Networking
- [ ] Security

Contractor Representative Signature

Client Representative Signature

Training Summary (Topics Covered, Attendees)

Write something...

Number of Staff Trained

Enter a number...