

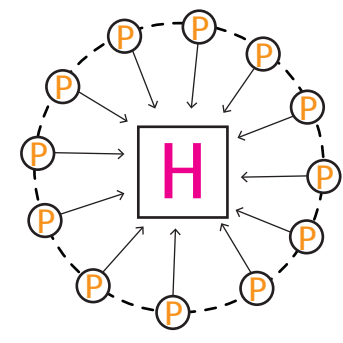
B129

[MOBILE-CARE NET]

Creating a network of decentralized healthcare provider spaces with mobile medical equipment supports by utilizing existing railroad infrastructure to serve rural areas of China

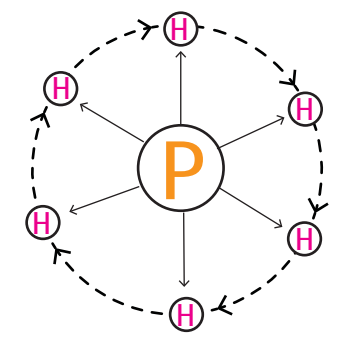
[EXISTING PROBLEM]

Centralized regional medical centers in China have all the best equipment and resources. Township level clinics in rural areas can only provide basic health services forcing patients to travel long distance to gain access for higher care.

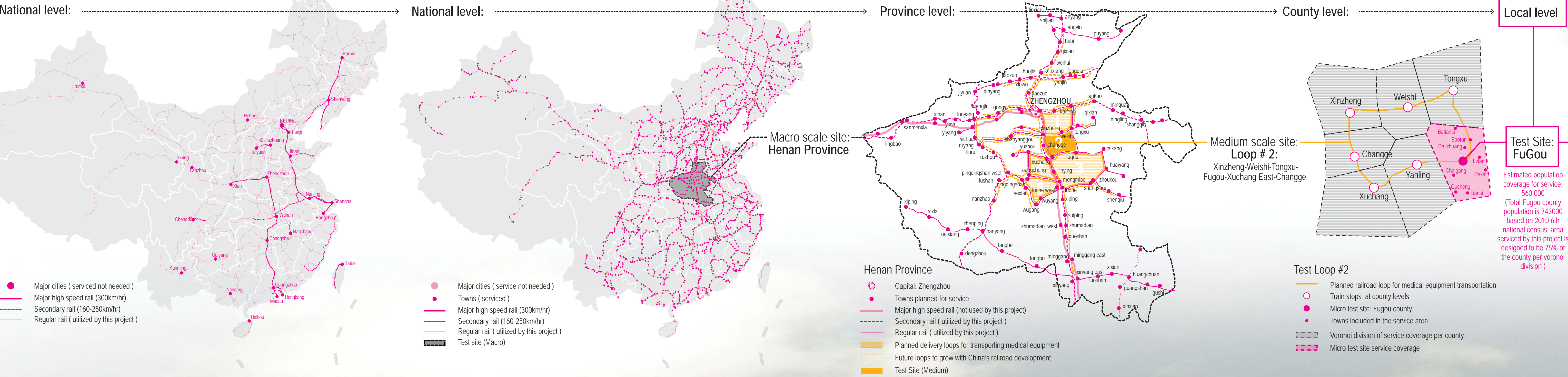


[PROPOSED SOLUTION]

Create a network of de-centralized facilities at township level near train stations. Such facility will be used by community as public space at the same time able to be converted into clinics. Medical equipment will be transported on train along existing railroad to support these facilities.



[PLANNING LOGIC]



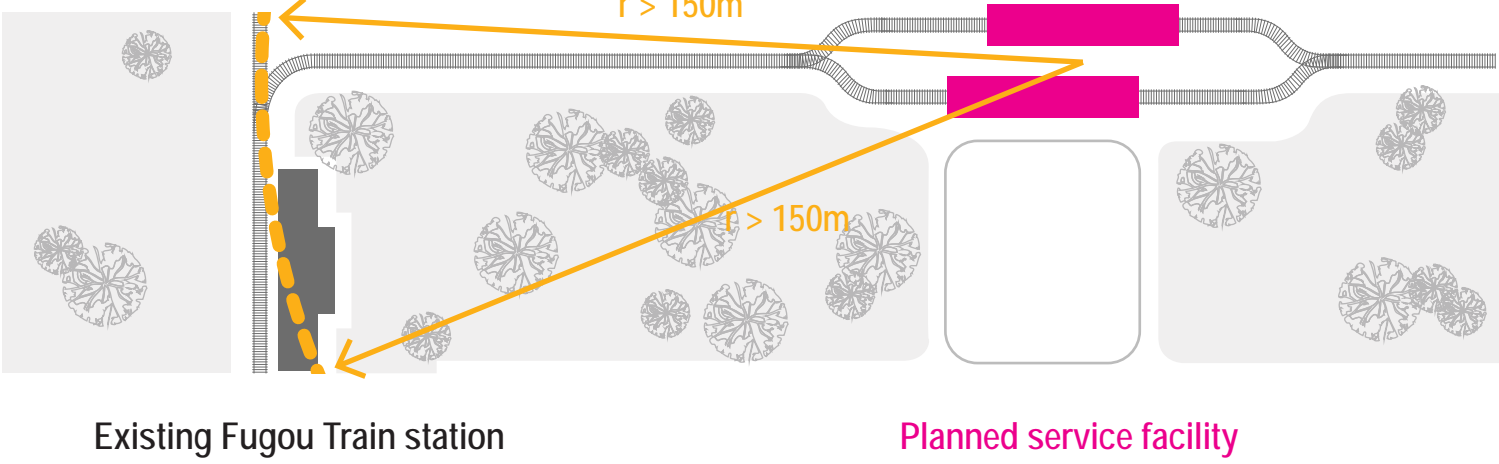
[PROGRAM]

- * The proposed facility functions as outpatient clinic
- ** Program area will self adapt to fit population size
- *** Major program components / departments:

FIXED COMPONENT: Built structure, modular construction					
Imaging	Pharmacy	Non-invasive OR	Endo	Sterile support	Lab
Clinic exam	Lobby/Public space	Building support	Treatment	Pediatrics	
OB/GYN	Gastroenterology	Cancer treatment	Infusion	Fever/Flu	
MOBILE COMPONENT: Equipment & suite, Transported by train					
MRI	CT	Dental	Vision	Lab	OR Boom / Table

[ACOUSTICS]

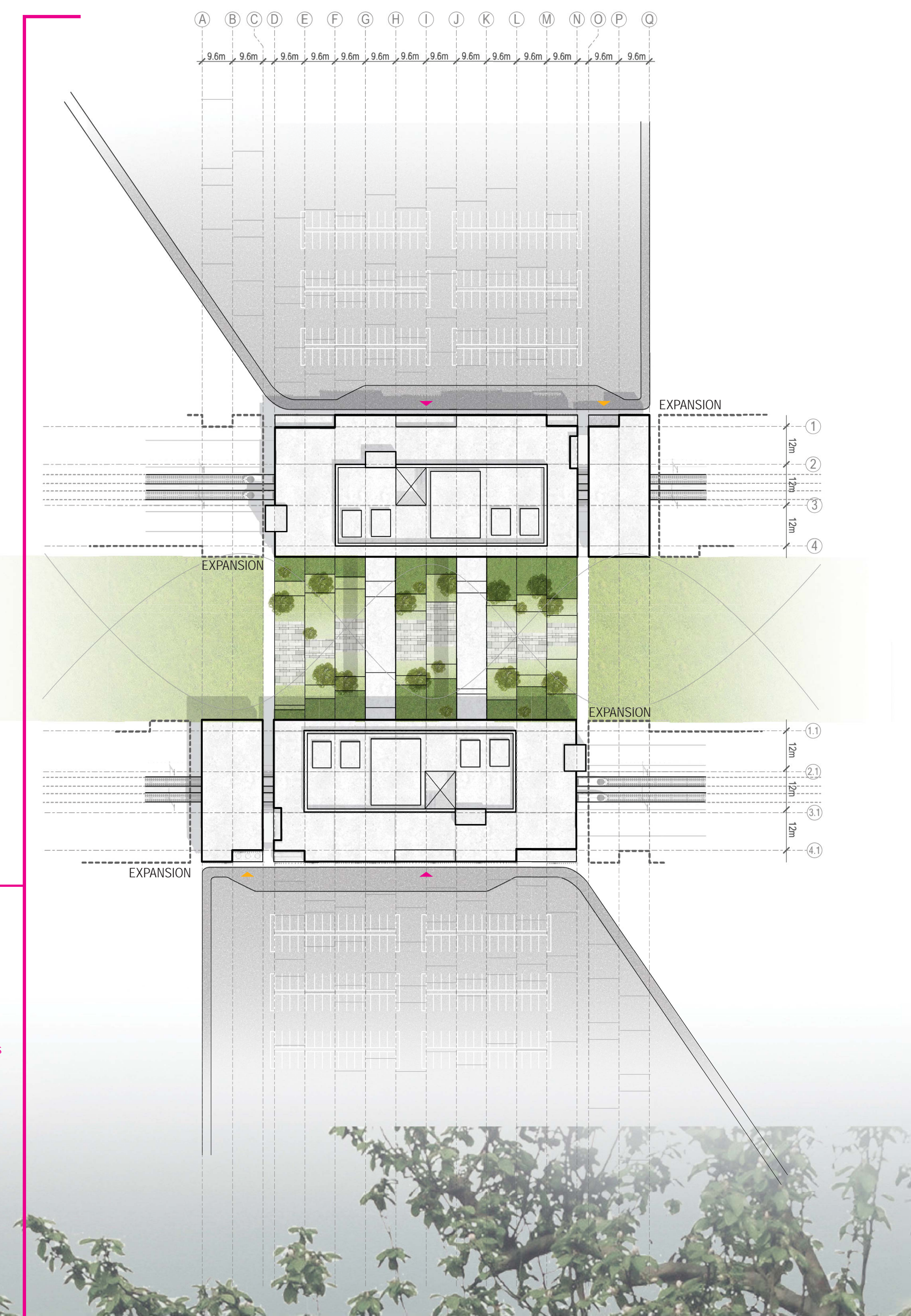
Acoustic consideration:
L1=Average train noise level (15m from source) : 80 decibel
L2=Design facility exterior noise level: 60 decibel
r1=15m
r2=Distance required to position the facility on site away from existing railroad and train station:
 $r2=r1*10^{((L1-L2)/20)} = 150m$



[DESIGN METRICS]

Field	Metrics	Units	2020	2015	Requirement	Fugou site metric
Medical Service	Average stay at Grade 3 level hospital	Day	<8	10.2	expected	Population Served: ~560,000
	Hospital acquired infection	%	<3.2	3.5	expected	Building Area: ~20,000 sqm
	Repeated visit within 30 days	%	<2.4	2.65	expected	Staff number: ~117
Medical Service System	Bed # per 1000 residents	Bed	<6	5.11	expected	Site coverage: ~80,000 sqm
	Practicing (Assistant) Doctor # per 1000 residents	Person	>2.5	2.22	expected	
	Registered nurse # per 1000 residents	Person	>3.14	2.37	expected	
	General practitioner # per 10000 residents	Person	>2	1.38	Required	
	Non-public hospital bed # to total bed #	%	>30	19.4	expected	

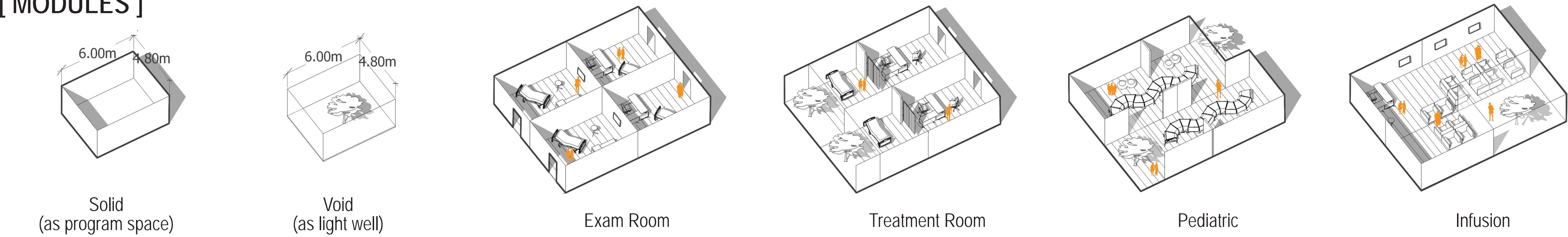
* Based on the "Thirteenth Five-Year Plan" document 2016 - public health division issued by the State Council of China



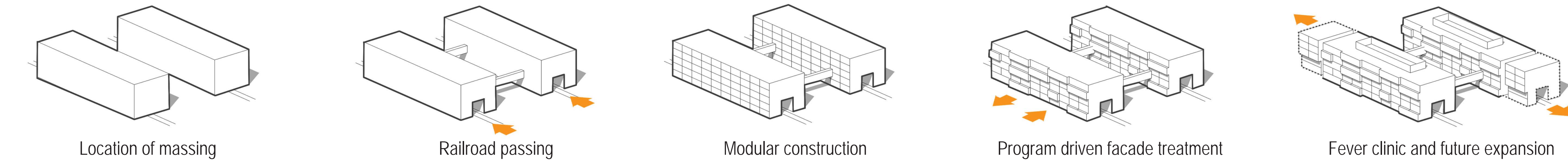
[MOBILE-CARE NET]

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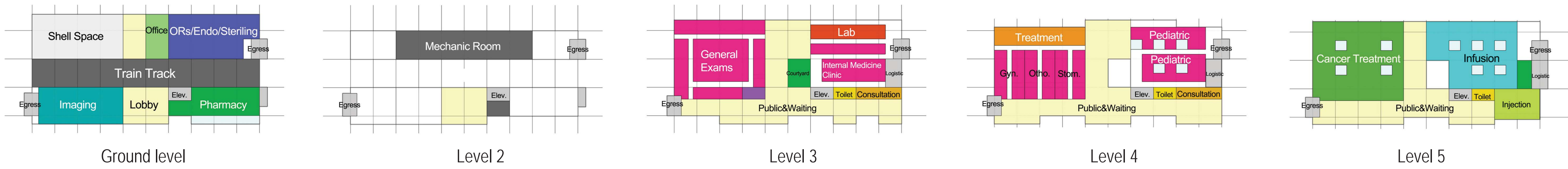
[MODULES]



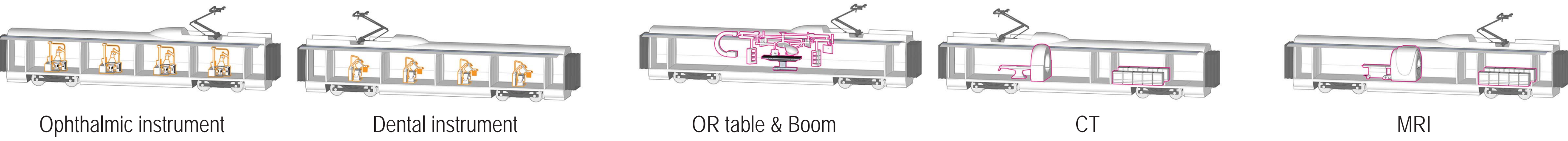
[MASSING]



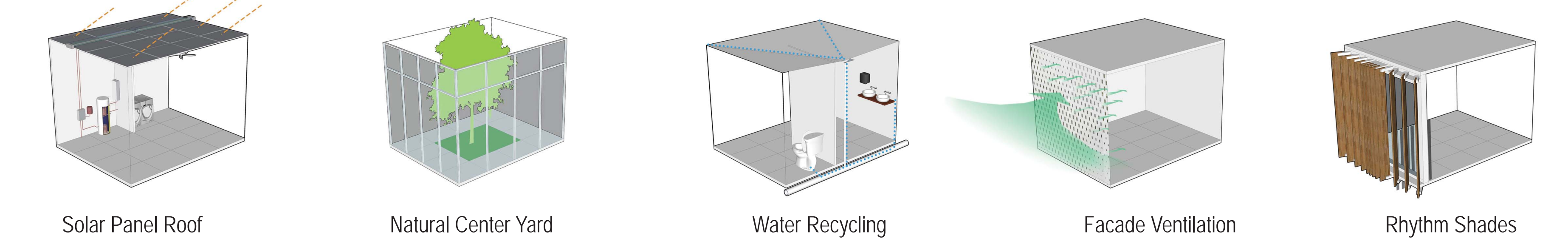
[DEPARTMENT PLAN]



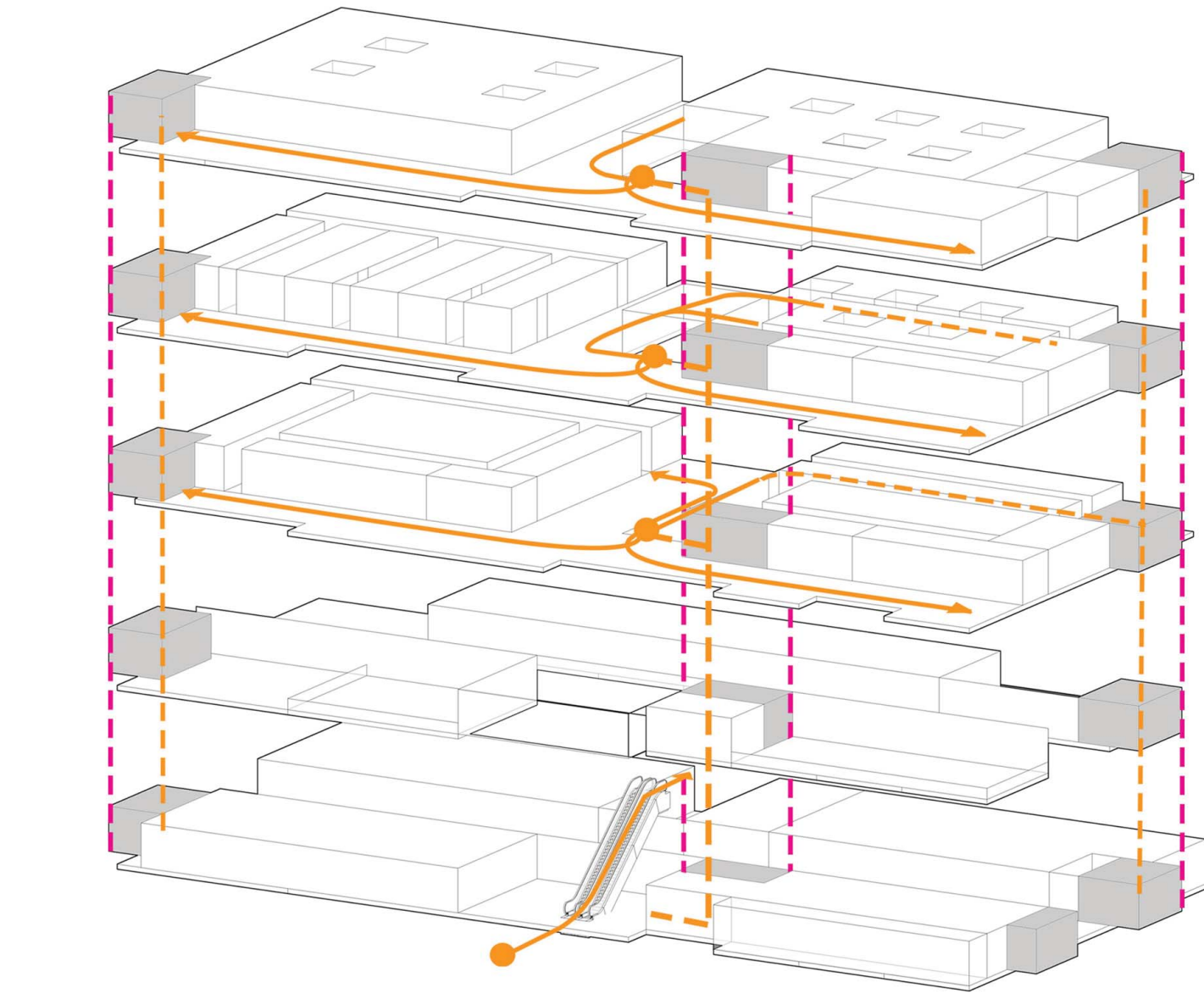
[EQUIPMENT TRAIN]



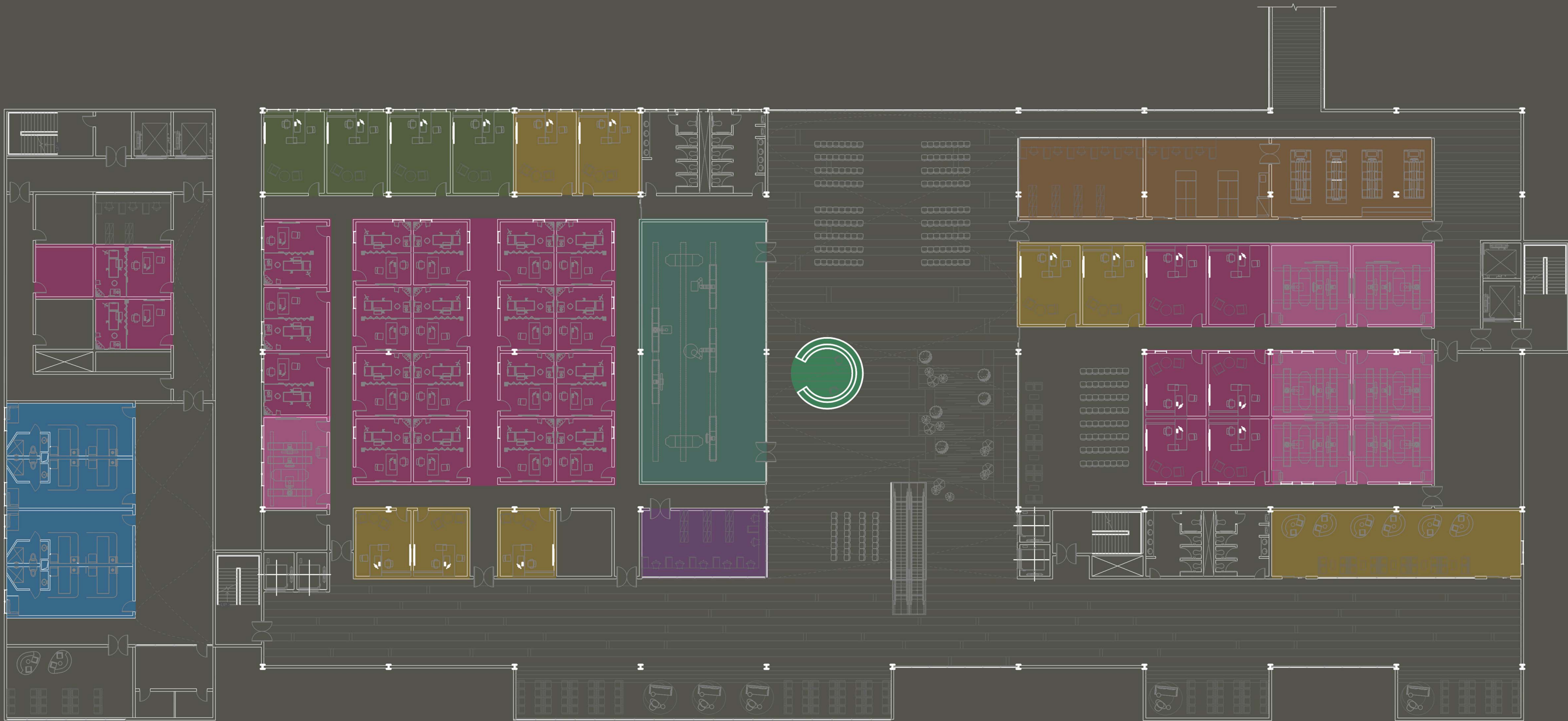
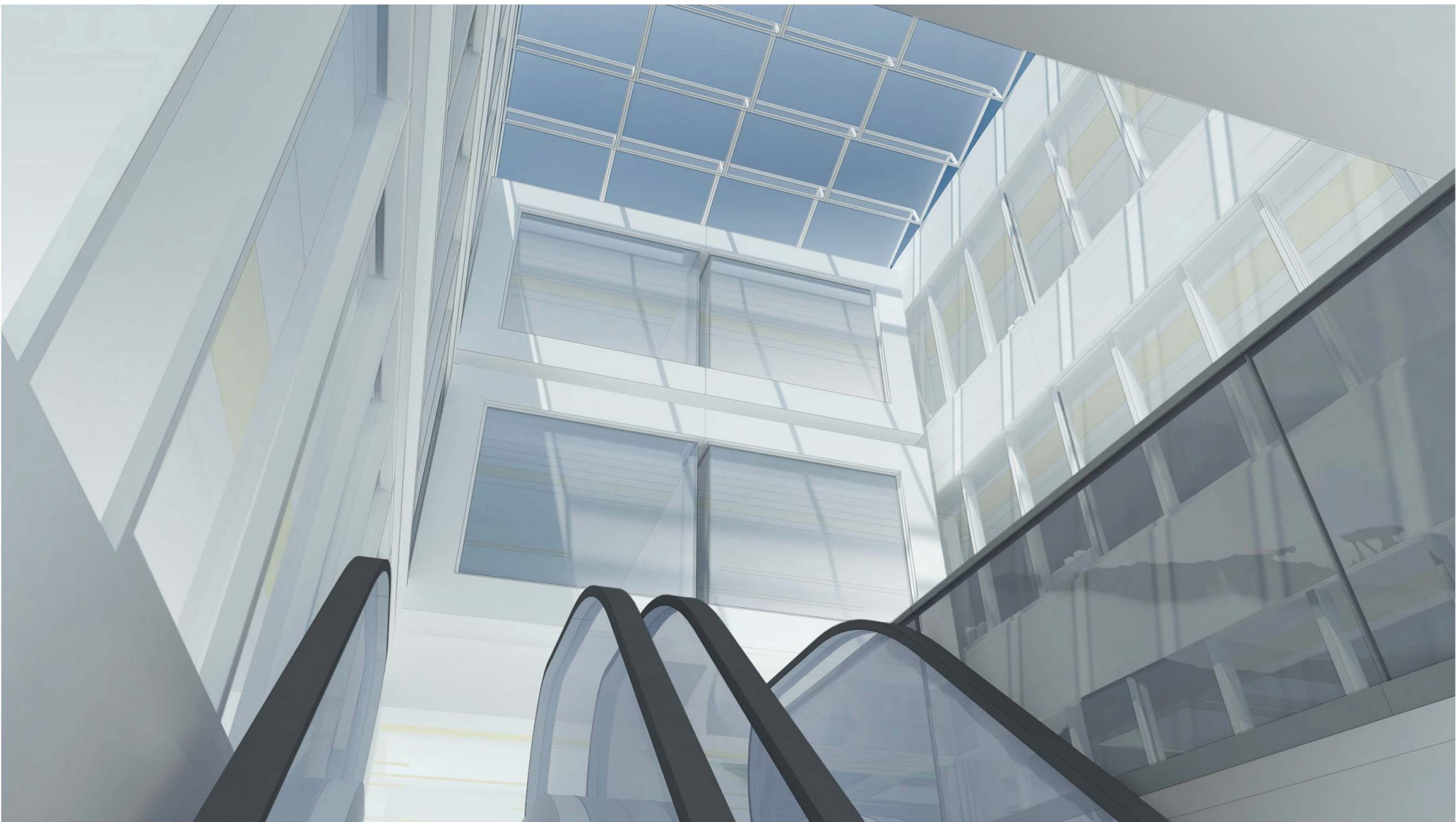
[SUSTAINABILITY]



[CIRCULATION]

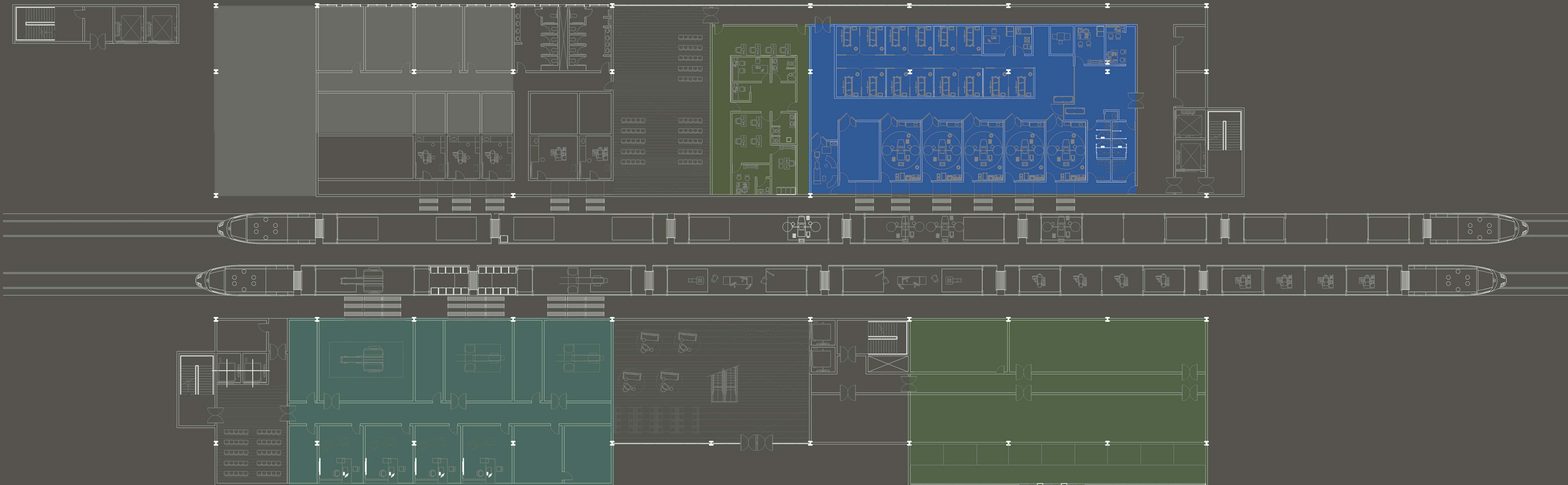


[INTERIOR - LOBBY]



[FLOOR PLAN - LEVEL 3]

Lobby & Exam



[FLOOR PLAN - GROUND LEVEL]

Imaging, OR, Pharmacy

