Did You Miss Anything in Planning Your New Office

By Warren Abbott, DPM
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Introduction

When I was asked to write this article it immediately came to mind is that I couldn’t possibly address all the details which need to be covered in such a short article. Writing a book would be more appropriate. So, I limited the article to ten details that are often overlooked. If you are a new practitioner and planning on building your office, my advice is to visit as many offices as possible to get ideas for what you may want to do. You will invariably change as your practice grows. Before I get to the list, I would like to encourage you to do three things.

• Make a list of the changes that you would like to alter in your present office. Prioritize this list by listing the easiest change as the first item, and the hardest and most expensive alteration as the last item. Include as many of these items in your new office.

• When planning an office, go wild. Plan to your heart's desire. Planning is cheap and easy to change on paper. For example, if you want a skylight in every room, include it in your drawing. You can always erase the skylight before construction begins.

• This type of a project is a very personal one. You are the one who is going to be spending the most time in your office. The national average for an employee to stay in an office is only two years. Therefore, employees come and go. Unfortunately, spouses come and go as well. However, the one person that is in the office and stays in the office is you. Understanding this notion makes it important for you to make your office as enjoyable and suitable for you. You need to make it comfortable, and eliminate as many irritations as you possibly can.

Now for the list

• Light switch height. How is the light switch height determined? It is usually an electrician who determines the height. Normally an electrician will take a stick, put a mark on it and make the light switch height according to the mark on the stick. If the electrician is tall, your light switches are more than likely to be high on the wall. If the electrician is short, the height of the switches will tend to be lower on the wall. You have to adapt. Why not set it for your height? A good general rule is that the middle of the light switch should be at your elbow height. Although the building code may have some say so, put the location of the switches where they are convenient for you to use. If you have a partner and your heights are different, divide the difference in your heights. This would make it more comfortable for both of you. Another example is a three-way switch beside your x-ray view box. This way you can turn off the ceiling light when you are reviewing the x-rays with your patient. At your desk, your x-ray view box should have a three-way switch for the ceiling light for the times you cannot get a clear view of the x-ray, and need a darker room. This saves you the trouble of getting up and walking across the room to turn off the ceiling light, then come back and sit down to view the x-rays. You just merely reach up, flip the switches, and when finished viewing the x-rays, turn the switches back. Even if you are going digital, you will need to be able to review x-rays that the patient brings from an outside source, or for the x-rays made before your office changed to digital. Why not build in an x-ray view box beside your desk? Don’t forget a spot light that is on a separate switch.

• Receptacles/wall plug-ins. Wall plug-in heights are set by the length of the electrician’s hammer. This is measured by placing the hammer on the floor and perpendicular to the floor. Next, the electrician places the box on the stud, and installs the receptacles at that height. I recommend putting the receptacle 3” higher than the hammer height. It is a lot more convenient for you and your staff. If you have a wall, have a plug-in. Building code usually dictates the number of receptacles per linear feet of wall. I believe in lots of
receptacles. In the business office, you cannot have enough receptacles. Double-gang all your receptacles. In other words, instead of having two plug-ins, you would have four in that location. Put separate circuits into each of these receptacles. These should be installed above and below the counter. I recommend the plug-ins being placed every two to four feet. I double-ganged my receptacles when I built my office 11 years ago. I thought I would have enough for the business office. Instead, I have discovered I could use more receptacles in my office. Of course, this is due to technology constantly developing and changing. In treatment rooms I like to have things up off the floor. Why not install a floor plug-in where the treatment chair is located? Or better yet; hardwire the treatment chair; thereby, hiding the wires under the chair. If you know where your other equipment will be installed, plan for receptacles in those areas as well. For example, the location of my x-ray machine. If the electrician would have installed the receptacle where he wanted to, it would have been in the middle of the wall. However, the machine is over toward the corner; therefore, I had him place the receptacle over in the corner.

- Lighting. Lighting can be very effective in setting the mood of your office. Instead of having standard recessed fluorescent lights in the hallways, perhaps an indirect overhead lighting which reflects off the walls could be installed. Another type of lighting that could be used is a "wall-washer". This is a type of light that shines down the wall. If you have a wall mural, this can be very easily illuminated with a wall-washer. Bright lights are the way to go for effective lighting in the treatment rooms. Recessed, fluorescent lighting fixtures are the best. Have four bulbs per fixture; two fixtures per room will be sufficient. This would be a total of eight bulbs. Remember, as we get older our pupils do not adapt as well as they did when we were younger. We need more light to see details that our profession requires.

- Storage. Storage is the most overlooked area of our offices. The general rule is that a room indicating storage area is drawn on the floor plan. There is no more thought given to the room. Once it is built, some shelves are thrown in and it's called "good enough". You have to adapt to the shelving that was installed. Why not make the shelving custom-made for your needs? As your practice changes, your storage will change as well. In my state I have to keep my patient's files for 10 years. Where are they going to be stored? Business papers have to be stored for seven years. Where will these be stored? At your home? In your basement? The garage? In a commercial storage area? Why not put them in a storage space in your office? Lighting in your storage area is generally poor at best. It is better to have overhead lighting that is adequate. Put plenty of lighting in the storage room and make sure it is safe. Otherwise, the fire marshal might have some say so in regards to the lighting after it has already been installed. Knowing what is going into the space for storage, and the more specific you can be, the more you will be able to use your storage area. In addition, be able to change and adapt the room to the demand and changes of our profession. What about the area containing retail items that are being sold for a secondary profit? My informal survey indicated that these items add 5%-15% to your bottom line. If you are going to do this, you need to make room for the items. They need to have convenient access. You may even go as far as measuring the size of the items that will be stored to determine how much space they will take up. Adjustable shelves are a very useful item. They can be changed as needed to meet the demand of your office through the years. Permanent shelves are very expensive and hard to tear out and replace.

- Wheelchair. Every office that I have visited has a wheelchair. In fact, I'd venture to say that almost all offices have at least one wheelchair. Where is this wheelchair when it is not in use? Is it around the corner? In the break room? In the closet? A treatment room? Hallway? Or, dare I say the business office? I have seen them in all of these locations. Why not build a special place for it? You can effectively utilize the area designated for the wheelchair by building a countertop, with cabinets above, or just cabinets above where the wheelchair will be stored. Make it centrally located for easy access to your treatment rooms.
• Cleaning. Where are you going to put the vacuum cleaner? A built-in vacuum cleaning system is a very useful way to clean the office. It is easy to install at the time of construction. The office will be kept cleaner because staff is more inclined to use it. Get one that has an electric powered beater head. You may have to install a plug-in close to where the hose plugs into the wall. This is dependant upon the type of unit that you buy. Make sure the exhaust is to the outside. Soundproof the room where the unit is located. When a vacuum system is installed, the vacuum plug-ins are located approximately every 30 feet. You can put in more if needed. The convenience of having more vacuum plug-ins far outweighs the extra cost. Therefore, make sure you have enough.

• Plan for expansion. I have never seen a new office not become busier after it is built. When you are building a new office, plan for expansion. Even if it is just one room, or there is a space next door that you can expand into. In the meantime, you can lease it out until needed. You might settle and not grow any more. This is it. But, remember the old saying, "There is only one constant in the universe - things never stay the same". You may even want to take on a partner, or an associate. You never know what the future holds, so you must be adaptable.

• Decorating. I may sound gender bias, but let a woman pick out the floor and wall coverings. In my present office, the decorations were done by a woman who is a professional decorator. I have been in this office for 10+ years. To this date I still get compliments from my new patients on how beautiful my office is decorated. Remember, most of your patients are women. They can take in the smallest detail in a nano second, and judge you instantly. If they feel comfortable, they will return, say good things about you and your practice. They will be better patients. We know that men hardly notice the details. If you cannot afford to hire a professional decorator, have a lady friend who has interior decorating experience help you with the décor. Remember, you are a podiatrist; not an interior decorator.

• Floor covering. Sheet vinyl, tile, carpet, glued on, pad underneath, no pad, bare concrete. What floor covering should you use? You need to check out each one to see which one will suit your needs. In the treatment rooms, textured sheet vinyl is difficult to clean up spills - especially Betadine and blood. Tile has too many seams. When liquid seeps into the seams, they will start to peel and separate. Thereby, causing a rough floor. Also, the tile has a tendency to shrink, which can cause the cracks to widen, dirt will fill the cracks, and the seams become unsightly. I like smooth sheet vinyl. Get the sheet vinyl that is 12' wide sheets. An old idea that is so old it's new, is the technique of running the sheet vinyl continuously up the side of the wall for approximately 3". This is capped with a metel strip. This eliminates the corners and edges which collect dirt. It is easy for cleaning and looks a lot nicer. Make sure a wood support strip is underneath this part of the vinyl. Otherwise, this area can tear very easily if a chair is set on it. In regards to carpet in the treatment rooms, it is hard to keep clean. Although it is warmer to the patient's feet than sheet vinyl or tile, it is not the preferred type of floor covering. Most of your standing and walking is in the hallway, unless you stand when you treat patients. Should you use a glued down carpet or a carpet with a pad? I have used both. A carpet with a pad is a great floor covering. It is great on the feet, legs, and back. However, the carpet will wear out faster than a glued down carpet. The carpet normally wears out from the flexing up and down. Therefore, a thick pad may feel great, but it will stretch the carpet and you will see waves and ripples in the carpet. This carpet will have to be replaced sooner than a glued-down carpet.

• Wall coverings. Paint is cheap. It is the cheapest way to cover your walls. Unfortunately, it looks like it. What I like is having a chair rail, and then have wallpaper above the chair rail. Paint below the chair rail. Make the height of the chair rail the same height as the back of the patient's chair. The chair will hit the rail and not your wall; thereby, saving your wall covering. The most pleasing visual, I feel, is to have three walls with wallpaper above the
chair rail, and paint below the chair rail. The fourth wall can be painted. All four walls with wall covering can be a bit too much.

There are so many details to consider when making an office. Hopefully, I have covered a few of the rarely considered details that need to be well thought-out when making your office more comfortable and a better work environment. Remember to go wild at the planning stage. Changes are cheap when they are on paper. Fit this office to you. You will be there the longest. Remember that this is the place where you will be spending more of your waking hours than you will be at any other place during your professional career. Please review the details. Use or reject them as you see fit when building your office. One last word of encouragement - I have never visited a new office that did not grow when they built their office. Every one of them, without exception, became busier and more profitable when they completed moved into their new office.

**Biography**

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