

**BY ORDER OF THE COMMANDER
59TH MEDICAL WING**

59TH MEDICAL WING INSTRUCTION 32-1001

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Civil Engineering



UTILITY OUTAGES AND FAILURES

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This instruction implements Air Force Policy Directive 32-10, *Installations and Facilities*. This Medical Wing Instruction (MDWI) establishes the procedures and provides information to be followed in the event of a scheduled or emergency utility outage or utility failure at building 4550, Wilford Hall Medical Center. A utility outage or failure is a major loss of a utility affecting a large section of the building. The utilities affected may include electricity, water, sewer drainage, natural gas, medical air, oxygen, vacuum, chilled water or steam. This instruction applies to all personnel assigned, attached, or on contract to the 59 Medical Wing (MDW). This instruction does not apply to the Air National Guard or Air Force Reserve. Refer recommended changes and questions about this publication to the Office of Primary Responsibility using the AF Form 847, *Recommendation for Change of Publication*. Ensure that all records created as a result of processes prescribed in this publication are maintained in accordance with Air Force Manual 33-363, *Management of Records*, and disposed of in accordance with Air Force Records Information Management System Records Disposition Schedule located at <https://www.my.af.mil/afrims/afrims/afrims/rims.cfm>

SUMMARY OF CHANGES

This interim change revises 59 MDWI 32-1001 by updating facility name and contact phone numbers.

1. Utility System General Information.

1.1. Normal power for building 4550 is supplied by the Total Energy Plant (TEP) located in building 4895. The TEPs primary generators and supplemental City Public Service electrical

service meet the daily electrical power requirements for Wilford Hall Medical Center and is available through all normal (white) and emergency (red) plugs.

1.2. Emergency Power (also called “Red Power”), is provided by the standby emergency generators located in building 4550 by the dining facility. Emergency Power generation is activated and supplied only as a result of significant normal power electrical system failure or through deliberately planned outages. The emergency power distribution system is designed to meet the electrical support requirements for critical patient areas and life safety systems. It is distributed throughout Wilford Hall Ambulatory Surgical Center through the red power outlets.

1.3. Under nominal power conditions, all normal and red power outlets plus lighting systems are supplied with electrical power.

1.4. During electrical system failures, scheduled outages, or emergency situations, only red outlets and selected overhead lighting are energized. Depending on the extent of scheduled outages, some patient care areas may have normal power, while other areas may have red power only.

1.5. Transfer from normal power to “red power” requires a momentary interruption during automatic transfer switch activation. The electrical system is designed to transfer power in ten (10) seconds or less during system failures or emergencies. During the ten second period, there will be no power at any outlet or light system. For scheduled outages, since emergency generators are started in advance, only a momentary “blip” will occur during transfer to red power.

1.6. Medical air, vacuum systems, alarm systems, exit route illumination, emergency communication systems, exits signs, select elevators, and all red outlets will remain operational during electrical system failures and scheduled outages.

1.7. Heating, Ventilation and Air Conditioning (HVAC) systems, exhaust fans for isolation rooms are not operational during the initial phases of an electrical system failure or emergency. Select HVAC systems that provide air conditioning to the Urgent Care Clinic. For scheduled outage, free standing cooling units or spot coolers can be provided to other select general patient care areas.

1.8. Elevator service will be limited during a large scale building 4550 electrical failure or scheduled power outage. Generally, one passenger elevator in each bank will be transferred to red power and become operational. This typically includes:

1.8.1. One elevator from passenger elevator bank 1, 2, 3, and 4.

1.8.2. One elevator from freight elevator bank 5 and 6.

1.8.3. One elevator from passenger elevator bank 7, 8, 9, and 10.

1.8.4. One elevator from surgical elevator bank 11, 12, and 13.

1.8.5. The emergency elevator, 17.

Note: Passenger elevators 14 and 15, Magnetic Resonance Imaging elevator 16, and cart lifts are not operational during electrical outages.

2. Scheduled Utility Outage. A scheduled utility outage in all or a part of the medical facility may be necessary to repair, renovate, test or replace portions of the utility system. Notifications for scheduled outages should be made at least 14 days in advance of the outage.

2.1. Responsibilities.

2.1.1. 502d Civil Engineer Squadron Wilford Hall Operations Flight (502d/CEW) shall:

2.1.1.1. Provide Facilities Management a 14 day advance notification, coordination and submission for approval concerning the proposed utility system outage.

2.1.1.2. Coordinate with all affected functions regarding the date, times and purpose of a scheduled utility outage by sending an outage advisory memorandum through distribution to all 59 MDW departments or by hand-carrying it to affected areas.

2.1.1.3. Distribute and final coordinate the approved schedule with affected 59 MDW functions and/or baseside civil engineer representatives.

2.1.1.4. If required, develop technical supporting subplans to minimize outage impacts to 59 MDW patient care operations including implementation of emergency power sources (i.e., generators), auxiliary cooling or other support for critical life support systems.

2.1.1.5. If required for large scale utility outages, have Energy Management and Control Systems (EMCS) call the primary 59 MDW notification contacts (Attachment 2) one day before the outage and then two hours before the outage.

2.1.1.6. If required, broadcast a message over the public address system providing details of the outage.

2.1.1.7. In the event of an emergency utility outage, have EMCS use the notification contact list shown in Attachment 2 to notify all agencies that are affected by the outage. Notification must include information regarding the type and extent of the outage, when and where it will occur, and the name of the person providing the information.

2.1.2. Facilities Management Flight (59 MLRS/SGSKF) shall:

2.1.2.2. Submit a notice to Public Affairs prior to the scheduled outage for publication in the Medical Center Bulletin, Vital Signs, and/or through 59 MDW group commanders for outages affecting the entire medical center.

2.1.2.2. Submit a notice to Public Affairs not later than seven days prior to the scheduled outage for publication in the Medical Center Bulletin, Vital Signs, and/or through 59 MDW group commanders for outages affecting the entire medical center.

2.1.2.3. If required, arrange and conduct pre-outage meetings with affected medical functions or clinics to discuss systems affected during the outage and mitigation action to be taken to continue functioning during the time of the outage.

2.1.3. Affected 59 MDW functions shall:

2.1.3.1. Notify their affected subordinate sections of the scheduled outage and resolve any scheduling conflicts with 502d/CEW and 59 MLRS/SGSKF. Each will immediately notify 502d/CEW (292-7377) during normal duty hours, or

502d/CEWIE (EMCS 292-5058) during non-duty hours, of any emergency situation that precludes the utility outage.

2.1.3.2. Implement basic utility system outage response measures to mitigate impacts to patient operations (eg. maximize use of red power outlets, use of alternate elevators).

3. Utility Failures. A utility failure occurs when a utility is interrupted due to mechanical or electrical failure.

3.1. Responsibilities.

3.1.1. 37 CES/CEW shall:

3.1.1.1. Contact Facilities Management (59 MLRS/SGSKF) 24/7 contact and the Medical Control Center and other appropriate personnel. Notification must include which system failed and the extent of failure.

3.1.1.2. In case of a total electrical outage, ensure all elevators are locked-in at the first floor except the four on emergency power (two passenger, one Emergency Department, and freight). Also, secure the electrical overhead loading dock doors in rooms BD16 (1 each), BD19 (1 each) and BM10 (2 each).

3.1.1.3. In case of a critical heating, ventilation, and air conditioning failure, notify the Nurses Station on the affected patient ward or the primary clinic point of contact.

3.1.2. Facilities Management shall:

3.1.2.1. Respond and assess the immediate extent of the failure, estimated duration and patient care areas impacted; immediately notify senior 59 MDW staff or the Medical Control Center.

3.1.2.2. Develop and/or implement system mitigation or recovery plans to restore utility system operation as soon as possible.

3.1.2.3. Provide on-going system outage status to 59MDW leadership and affected patient care areas and if required make overhead announcements over the public address system at appropriate time intervals.

3.1.3. Affected 59 MDW functions shall:

3.1.3.1. Implement basic utility system outage response measures to mitigate impacts to patient operations (eg. maximize use of red power outlets, use of alternate elevators).

3.1.3.2. If required, be prepared to implement the requirements of the 59 MDW Contingency and Response Plan.

GLENN A. YAP, Colonel, USAF, MSC
Administrator, 59th Medical Wing

Attachment 1

GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION

References

AFPD 32-10, *Installations and Facilities*, 27 March 1995

Adopted Form

AF Form 847, *Recommendation for Change of Publication*, 22 September 2009

Abbreviations and Acronyms

CE—Civil Engineer

EMCS—Energy Management and Control Systems

HVAC—Heating, Ventilation and Air Conditioning

MDW—Medical Wing

MDWI—Medical Wing Instruction

MRC—Medical Response Center

NPC—Nurse Practice Coordinator

TEP—Total Energy Plant

Attachment 2

**NOTIFICATION CHECKLIST FOR EMERGENCY UTILITY FAILURES/OUTAGES
AND SCHEDULED UTILITY OUTAGES**

Table A2.1. 59th Medical Wing Notification.

DUTY HOURS 0730-1615 MONDAY-FRIDAY	
59 MDW/AD 7353	292-
59 MLRS/CC 4799	292-
CPD Supt 4583	292-
CT Scan 5279/6255/7425	292-
Cardio Cath 6831/6789	292-
Communications 7700	292-
Computer Center 5112	292-
UCC 7331	292-
OMFS 5215	292-
HARPS 6070	292-
MSISM/Director of Comm 6006	292-
Immunology Lab 5508	292-
*Infection Control 7803	292-
Laboratory 5462/7161	292-
Medical Plans and OPS 7499	292-
Medical Maintenance 7451	292-
Neo-Natal/Cardio-Pulm 5747	292-
Nursing Department 7265/7262/7261	292-
CM/WHASC Service 6002	292-
MCOA/Anesthesia	292-

5559	
Pharmacy 7216/5402	292-
Primary Care Clinic 5333/5334	292-
Pulmonary/Respiratory 5828	292-
Radiology 5204/7705	292-
Supt Medicine 7667/5739/2218	292-
Supt Surgery 5634/7467/4370/5685	292-
NON-DUTY HOURS	
EMCS notifications)	292-5058 (makes all
Director, Facilities Mgt number	Contact MRC for home telephone
MRC 1800	292-
59 MLRS/CC number	Contact MRC for home telephone
59 MDW/AD number	Contact MRC for home telephone
CPD Supt 4583	292-
CT Scan 6255/5279/7405	292-
Cardio Cath 6831/6789	292-
Communications 7700	292-
HARPS 6070	292-
*Infection Control 9548	Pager 513-
Laboratory 5462/7161	292-
Medical Control Center 5990	292-
Cardio-Pulm 5747	292-
*Nursing Practice Coord 7130/5124/7161	292-
Pager	83-

1040/1026	
MCOA/Anesthesia 5559	292-
	Pagers 83-
1040/1026	
Pharmacy 5414	292-
Primary Care Clinic 5334	292-
Pulmonary/Respiratory 5828	292-
Radiology 7705	292-
Surgery 7467	292-