

Missouri Department of Health and Senior Services (DHSS)
 PO Box 570 Jefferson City, MO 65102
 Hospital Project Questions: Phone 573-751-6303
 ASC Project Questions: Phone 573-751-6083
 Construction and Renovation Project Tracking

DHSS Section for Health Standards and Licensure (HSL) recently received notification of a construction project related to hospital or Ambulatory Surgical Center (ASC) licensure. Please complete this form and return within five (5) business days to HSLCARP@health.mo.gov or fax to (573) 522-9712.

TODAY'S DATE:	LICENSED HOSPITAL: <input type="checkbox"/> YES <input type="checkbox"/> NO LICENSED ASC : <input type="checkbox"/> YES <input type="checkbox"/> NO OTHER: IF UNSURE, CONTACT CEO	PROJECT ID# (OFFICE USE ONLY)
FACILITY NAME:		TYPE OF DEPARTMENT(S) RENOVATED:
PROJECT LOCATION (ADDRESS)	CITY	STATE
		ZIP
		COUNTY
FACILITY CONTACT	PHONE NUMBER	EMAIL
ARCHITECT CONTACT	PHONE NUMBER	EMAIL
CONSTRUCTION/CONTRACTOR	PHONE NUMBER	EMAIL
PLEASE INDICATE WHO TO CONTACT FOR PROJECT STATUS AND TO SCHEDULE AN INSPECTION NEAR PROJECT COMPLETION (NAME AND PHONE NUMBER):		
PROJECT INFORMATION		
<input type="checkbox"/> NEW STRUCTURE <input type="checkbox"/> RENOVATION of EXISTING	WILL THERE BE A CHANGE IN THE TYPE OF PATIENT SERVICES OFFERED? <input type="checkbox"/> YES <input type="checkbox"/> NO (adding services not before offered or available)	
TOTAL # PHASES PLANNED FOR THIS PROJECT?	IF HOSPITAL, WILL THERE BE A CHANGE IN # OF BEDS? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, HOW MANY?	
ANTICIPATED COMPLETION DATE PHASE 1:	ANTICIPATED COMPLETION DATE PHASE 2:	ANTICIPATED COMPLETION DATE PHASE 3:
TYPE OF SYSTEMS/EQUIPMENT UPGRADED (I.E. SPRINKLERS, NURSE CALL SYSTEM, MEDICAL GASSES, NEW FLOORING).		
PROVIDE A DETAILED DESCRIPTION OF PROJECT. DESCRIBE TYPE OF PATIENT SERVICES TO BE OFFERED. FOR UNKNOWN COMPLETION DATE, UPDATED INFORMATION SHOULD BE SUBMITTED AS THE PROJECT PROGRESSES.		

NOTE: Prior to providing patient care or occupying the renovated area, an inspection must be performed by the Section for Health Standards and Licensure to confirm the project complies with applicable DHSS licensure provisions.