





SUBMISSION TO THE
AMERICAN COLLEGE
OF HEALTHCARE
ARCHITECTS

TABLE OF CONTENTS

LIST OF PAST HEALTHCARE EXPERIENCE

	MEMORIAL HOSPITAL: OVERALL
	ED EXPANSION & RENOVATION
	OR EAST
	SPS RENOVATION
	MS FORENICS LAB.
	INTERVENTIONAL RADIOLOGY
	PHARMACY EXPANSION & RENOVATION

PROJECT NAME/ LOCATION	ROLE	PHONE NUMBER & POSITION OF CONTACT	COST: PROJECT (P) & CONSTRUCTION (C)
	PRINCIPAL IN CHARGE / PROJECT ARCHITECT		To Be DETERMINED DATE OF COMPLETION: CURRENT DESIGN PHASE
	PRINCIPAL IN CHARGE / PROJECT ARCHITECT		\$5,300,000 (C) EST. DATE OF COMPLETION: CURRENT DESIGN PHASE
	PRINCIPAL IN CHARGE / PROJECT ARCHITECT		\$3,200,000 (C) EST. DATE OF COMPLETION: CURRENT DESIGN PHASE
	PRINCIPAL IN CHARGE / PROJECT ARCHITECT		\$1,340,000 (C) EST. DATE OF COMPLETION: CURRENT DESIGN PHASE
	PRINCIPAL IN CHARGE / PROJECT ARCHITECT		\$1,225,000 (C) DATE OF COMPLETION: CURRENT DESIGN PHASE
	PRINCIPAL IN CHARGE/PROJECT ARCHITECT		\$18,324,000 (C) DATE OF COMPLETION: CURRENT DESIGN PHASE
	PRINCIPAL IN CHARGE/PROJECT ARCHITECT		\$21,149,791 (C) \$31,166,571 (P) DATE OF COMPLETION: AUG 2022 EST.
	PROJECT ARCHITECT		\$5,535,940 (C) \$6,641,166 (P) DATE OF COMPLETION: MAR 2022 EST.
	PRINCIPAL IN CHARGE / PROJECT ARCHITECT		\$275,000 (C) TBD (P) DATE OF COMPLETION: MAR 2022 EST.

PROJECT NAME/ LOCATION	ROLE	PHONE NUMBER & POSITION OF CONTACT	COST: PROJECT (P) & CONSTRUCTION (C)
	PRINCIPAL IN CHARGE / PROJECT ARCHITECT		\$319,300 (C) \$4,419,300 (P) DATE OF COMPLETION: JULY 2021
	PRINCIPAL IN CHARGE / PROJECT ARCHITECT		\$1,495,737 (C) EST. COST TO DATE DATE OF COMPLETION: ON-GOING PROJECT
	PRINCIPAL IN CHARGE / PROJECT ARCHITECT		\$255,192 (C) WITHHELD (P) DATE OF COMPLETION: MAR 2021
	PRINCIPAL IN CHARGE / PROJECT ARCHITECT		\$214,593 (C) \$414,593 (P)EST DATE OF COMPLETION: ON-HOLD COVID
	PRINCIPAL IN CHARGE/PROJECT ARCHITECT		\$192,000 (C) \$200,500 (P) DATE OF COMPLETION: JAN 2020
	PRINCIPAL IN CHARGE/PROJECT ARCHITECT		\$184,854 (C) \$184,854 (P) + EQUIP. DATE OF COMPLETION: MAR 2020
	PRINCIPAL IN CHARGE / PROJECT ARCHITECT		\$72,500(C) WITHHELD (P) DATE OF COMPLETION: APR 2020
	PRINCIPAL IN CHARGE / PROJECT ARCHITECT		\$264,564 (C) \$264,564 (P) + EQUIP. DATE OF COMPLETION: APR 2020
	PRINCIPAL IN CHARGE / PROJECT ARCHITECT		\$519,527 (C) \$701,361 (P) DATE OF COMPLETION: MAR 2019

CAMPUS PLANING

Hospital

Staff Architect/Project Architect/
Principal in Charge
Over 200 projects
Dates: from March 1986 - current



[REDACTED] P.A. was selected to provide architectural and engineering services for [REDACTED] on a varied list of healthcare projects beginning with the first [REDACTED] in [REDACTED]. Over the past 35 years, these projects have ranged from small physician clinics and tenant spaces, a 14 story Medical Office Building/Medical Mall (as a part of a joint venture), a 125 room Patient Wing Addition, a Hybrid O.R., multiple Cath Labs, the Cancer Center with 2 accelerator vaults and a simulator, Kitchen expansion & renovation and a multitude of hospital additions and renovations to provide space for clinical needs in support of patient care and the many service lines.

My role in these design/planning projects have been as a Staff Architect, Project Architect and Principal In Charge. I have been involved in all phases of the various projects including: assisting with the project design, master planning, medical planning, presentations to hospital administration, production of contract documents and oversight of the construction administration phase.



EXIT RAMP VIEW OF [REDACTED] CAMPUS

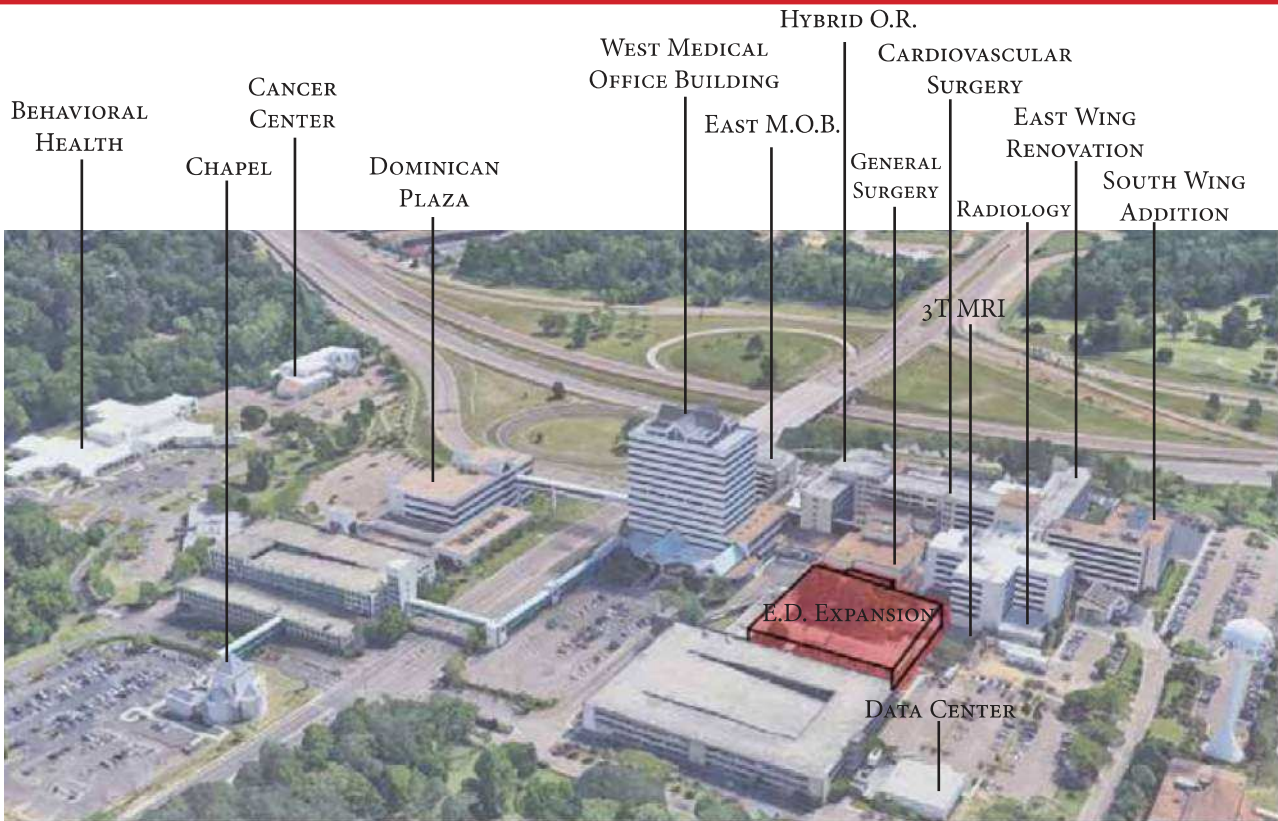
By his signature below, [REDACTED] AIA can confirm my participation in the referenced projects.


SIGNED:

[REDACTED]

DATE:

[REDACTED]



VARIOUS PROJECTS COMPLETED OVER THE 35 YEAR HISTORY WITH 



INTERSTATE VIEW OF  CAMPUS

MEMORIAL HOSPITAL



Principal in Charge/Project Architect
23,860 Square Foot- 1st Floor New Addition
17,800 Square Foot- 1st Floor Renovation
11,500 Square Foot- Lower Level Shell
New Addition
Estimated Completion Date: August 2022
Construction Cost: \$21,149,791
Project Cost: \$31,166,571

The Emergency Department at [REDACTED] was originally constructed in 1951. Over the past 70 years various expansions and renovations were undertaken in our attempt to improve patient flow and treatment. The current ED had evolved into three distinct and separate areas, creating staffing and support issues. The current project provides for a new addition of approximately 24,000 square feet and the renovation of approximately 17,000 square feet for a total of over 40,000 square feet of contiguous treatment and support space including two trauma rooms, 40 private patient treatment rooms, five behavioral health treatment/holding rooms, a washdown/decontamination room, departmental imaging area that includes a CT scanner and two X-Ray rooms, staff and physician lounge and locker rooms and auxiliary support areas. Separate entrances for ambulance and walk-in patients are provided.

The project sequence called for the new addition to be constructed and completed before any existing space could be vacated for renovation. At the time the new addition is occupied, renovation of the existing area will be phased to ensure that the total number of treatment rooms will never be less than the number available prior to the start of construction. This has allowed the emergency department to remain open and in operation throughout the construction.

My role for this project was as Principal in Charge and Project Architect

Project Experience

By his signature below, [REDACTED] - AIA, LEED AP can confirm my participation in the ED Expansion & Renovation Project.

SIGNED:

[REDACTED]

DATE:

[REDACTED]

EMERGENCY DEPARTMENT EXPANSION



1ST FLOOR PLAN



ED WAITING ROOM



ED PRAYER ROOM

EMERGENCY DEPARTMENT EXPANSION

Project Experience



TRAUMA ROOM



DECONTAMINATION ROOM



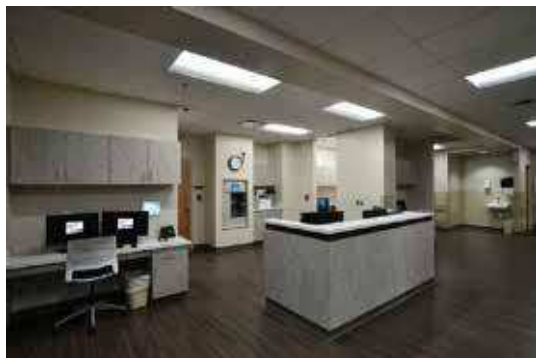
EMERGENCY ROOM ENTRANCE



CT SCANNER



X-RAY ROOM (R&F)



STAFF WORK STATION



CASHIER/CHECK-OUT STATION



SUPPLY SCAN

MEMORIAL HOSPITAL

Memorial

Hospital

Principal in charge/Project Architect

16,114 Square Feet

Completion Date: May 2016

Negative Pressure Room

Completion Date: February 2018

Construction Cost: \$2,842,110.00

Project Cost: \$4,739,156.00



In 2014 [redacted] PA. was asked to provide Architecture/Engineering Services for the O.R. East renovation project. As Identified in an earlier master planning effort, [redacted] was quickly reaching capacity for their current 16 Operating Room-General Surgery Suite. Due to its location on the 3rd floor of the hospital, expansion of surgical services in its current location was not feasible.

The original Out-Patient Ambulatory Surgery Center, located on the ground floor of the adjacent 14 Story Medical Office Building, had been relocated off site approximately 10 years earlier and the area it occupied has remained vacant. The program called for 6 operating rooms (there were 4 existing rooms), 18 Pre/Post Operative Cubicles, waiting, registration and all required support services.

As the original Out-Patient Ambulatory Surgery Center was constructed in a business occupancy, this area had to be modified to comply with the standards for healthcare/institutional occupancy with a means to transport inpatients to this area without leaving the "hospital". Working with the physician groups and hospital staff (along with concurrence of the MS State Board of Health), we developed a separate, 2nd Floor connector from the hospital over and through the Medical Mall to a dedicated inpatient elevator that enters O.R. East from outside of the prep and recovery area.

The perimeter partitions were upgraded to provide separation between the healthcare occupancy from the adjacent business occupancy.

With the expansion and renovation, the O.R. East gave the hospital the capacity to relocate the orthopedic and womans services lines to the new area, thereby increasing the capacity of the General Surgery Suite on the 3rd floor.

My role for this project was as the Principal In Charge/Project Architect.

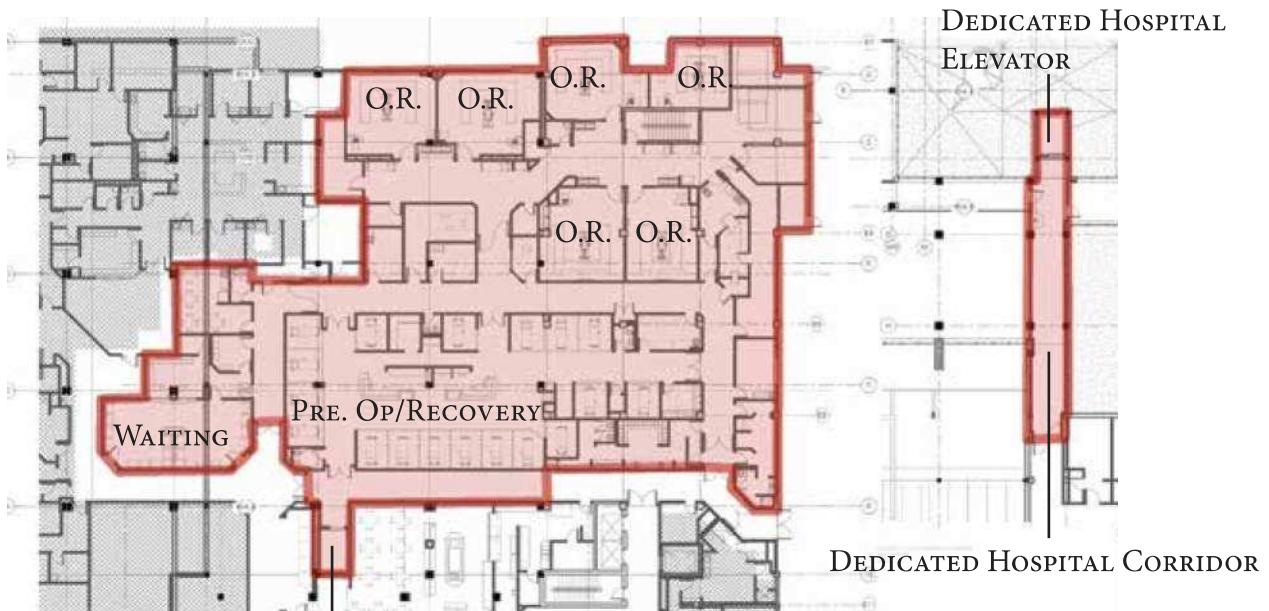
By his signature below, [redacted] - AIA, LEED AP can confirm my participation in the OR East Expansion and Renovation.

SIGNED:

DATE:

Project Experience

O.R. EAST



1ST FLOOR PLAN

DEDICATED HOSPITAL
ELEVATOR

2ND FLOOR PLAN



HOSPITAL CORRIDOR PARTITION



STERILE CORRIDOR



ORTHOPEDIC O.R.

O.R. EAST



PRE-OP CUBICLES



STAFF WORK STATION



STAFF WORK STATION/ACCESS TO OR



PACU



STERILE CORRIDOR



STERILE CORRIDOR/ SCRUB STATION

VA MEDICAL CENTER

Medical Center

Project Architect

10,760 Square Feet

Estimated Completion Date:

March 2022

Construction Cost: \$5,535,940.00

Project Cost: \$6,641,166.00



Barlow, [redacted] P.A. has provided professional architectural and design services to the V A [redacted] for over 40 years. Two years ago, [redacted] was selected as part of the team that received a 5 year Indefinite Delivery/Indefinite Quantity (IDIQ) contract. The Sterile Processing Services (SPS) Expansion & Renovation project was issued as a task order under the master contract. The SPS Department was constructed in 1988 with minimum changes/revisions since that time. Due to its proximity to the surgical suites and endoscopy area, the decision was made to renovate and expand the SPS department in its current location. This necessitated that the project include the site work and utility prep to place a Steris mobile SPS unit at the facility to provide SPS services during the renovation. This required the siting to allow transport of case carts to and from the mobile SPS Unit at the Lower Level on which the surgery suite is located. The renovation includes the demolition and build out of 10,760 square foot on the first floor. The areas included in the SPS Renovation includes endoscope reprocessing area, with 4 reprocessors, decontamination work area with 3 multi-compartment stainless steel work sinks, 2 ultrasonic cleaners and 3 washer-disinfectors. An instrument set assembly/make-up area with 6 adjustable height workstations and supply area, a sterilization area with 3 steam sterilizers and 2 low temperature sterilizers, case cart assembly area, and office/support spaces. The construction is scheduled to be completed in February 2022. My role in this project is as the Project Architect.

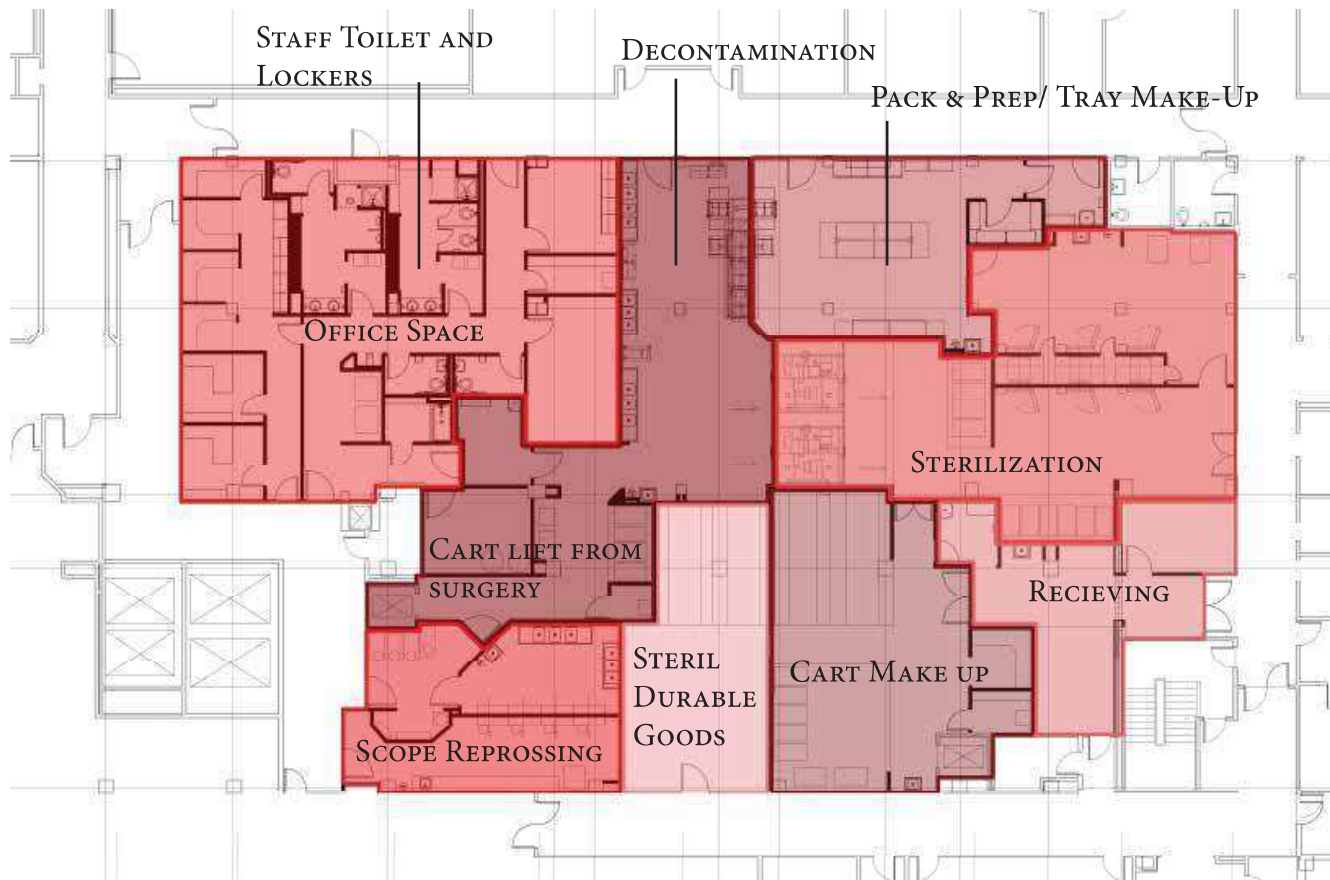
By his signature below, [redacted] AIA can confirm my participation in the SPS Renovation project.

SIGNED:

DATE:

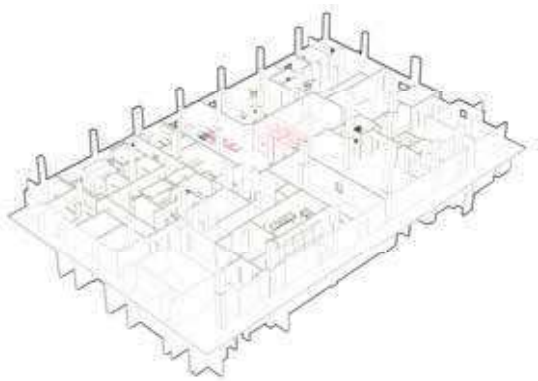
Project Experience

STERILE PROCESSING SERVICES RENOVATION

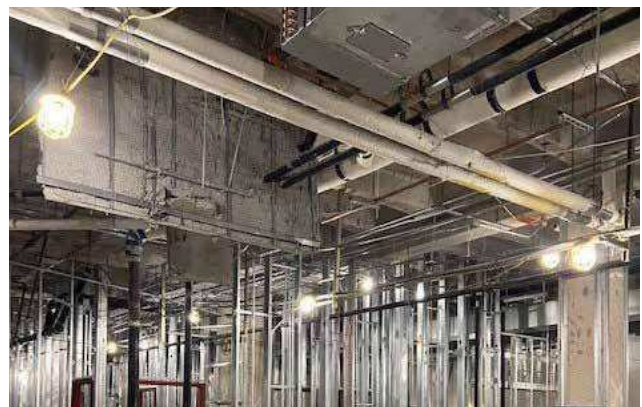


1ST FLOOR PLAN

Project Experience



AXONIMETRIC VIEW



CONSTRUCTION PHOTO

FORENSICS LABORATORY

[redacted] Forensics
Laboratory

[redacted]
Bureau of Buildings, Grounds, and Real
Property Management

[redacted]
Principal in Charge/Project Architect

Project total: 92,181 Square Feet

ME's Office: 9,730 sq ft Medical

Examiner's Office

Completion Date: May 2016

Total Construction Costs: \$21,799,379.43

Total Project Cost: \$24,415,304.00 +
equipment

Medical Examiner's Office Costs:
approximately \$2,300,994.32



Barlow [redacted] P.A. was selected to provide A/E services for the new State Crime Laboratory. [redacted] Forensics Laboratory provides forensic services to Law Enforcement agencies throughout the state, involving a diverse array of scientific and analytic disciplines and the Office of the State Medical Examiner. Our challenge was to incorporate two separate and distinct functions into a single structure.

While often working together, these two services must maintain physical separation. The State Medical Examiners office operates in some capacity, 24 hours a day, 365 days a year.

The State Medical Examiner's office includes a separate and secure ambulance receiving area, family digital remote viewing/identification conference room and a discrete funeral home pick up area. The Medical Examiner's work area includes a four station autopsy work room, a single station decomposition autopsy work room, staging area for crime scene teams, area for the technical assistance unit, areas for wash down and drying, male and female locker and toilet rooms, room for specimen storage, histology lab, x-ray room, walk-in refrigerator/freezer and office/support areas.

We are currently working with the staff to address holding and capacity demands due to the effects of Covid-19 and addressing growth to accommodate additional ME staff.

My role in this project was as Principal In Charge/Project Architect.

By his signature below, [redacted] AIA can confirm my participation in the [redacted] Forensics Laboratory and Medical Examiners Office.

SIGNED:

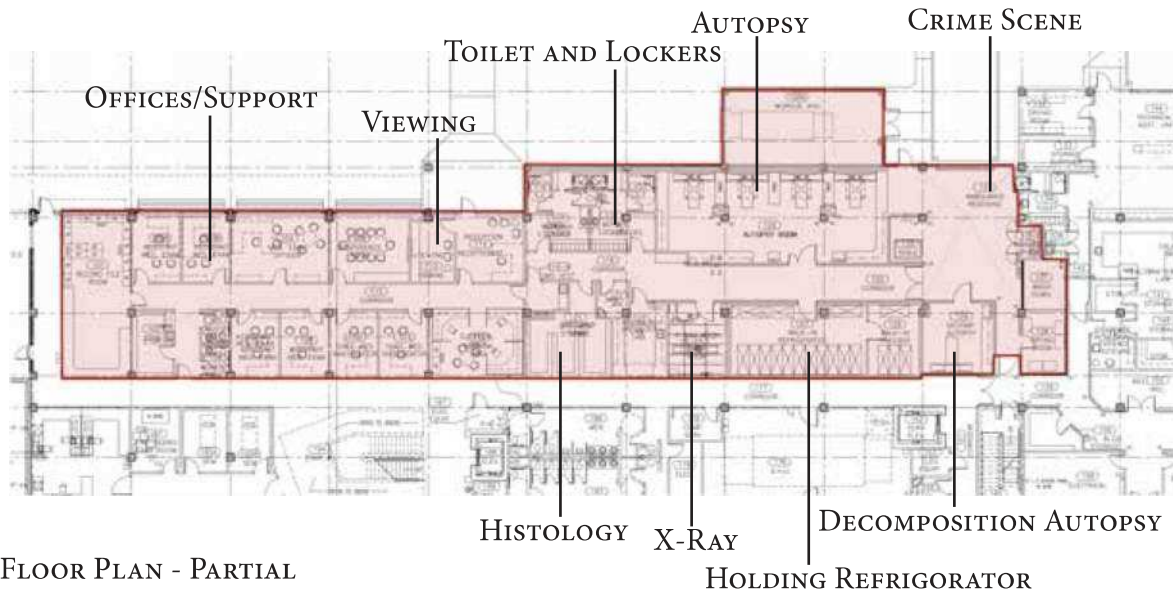
[redacted signature box]

DATE:

[redacted date box]

Project Experience

MEDICAL EXAMINERS OFFICE



1ST FLOOR PLAN - PARTIAL



AUTOPSY STATION



MOUGE REFIDGERATOR



AUTOPSY BAYS



HISTOLOGY LAB

[Redacted]

[Redacted]

[Redacted]

Memorial Hospital

[Redacted]

Principal in Charge/Project

Architect

Square Footage: 834 square feet

Completion Date: August 2018

Construction Cost: \$244,567.00

Project Cost: \$504,675.00



The Interventional Radiology - Room1 was the first of 2 rooms to be renovated to up-grade the imaging equipment, computer and equipment systems. The rooms were over 10 years old and did not meet the needs of the Interventional Radiologist in treating patients. The room was 'flipped' end for end to accommodate a new Artis Q Bi-Plane Angio unit (Siemens) bi-plane imaging equipment, a med gas boom, catheter storage and staff work/circulating space. The control room work console was located to maximize the tech's view of the patient, the procedure room and provide adequate work space. The equipment room was enlarged and additional HVAC capacity was added. Access to the procedure room is through a pre-op staging area with medical gases to increase throughput and patient monitoring. Staff access is through a separate entrance to the control area.

My role in this project was as the Principal In Charge/Project Architect.

By his signature below, [Redacted] - AIA, LEED AP can confirm my participation in the Interventional Radiology Renovation Project.

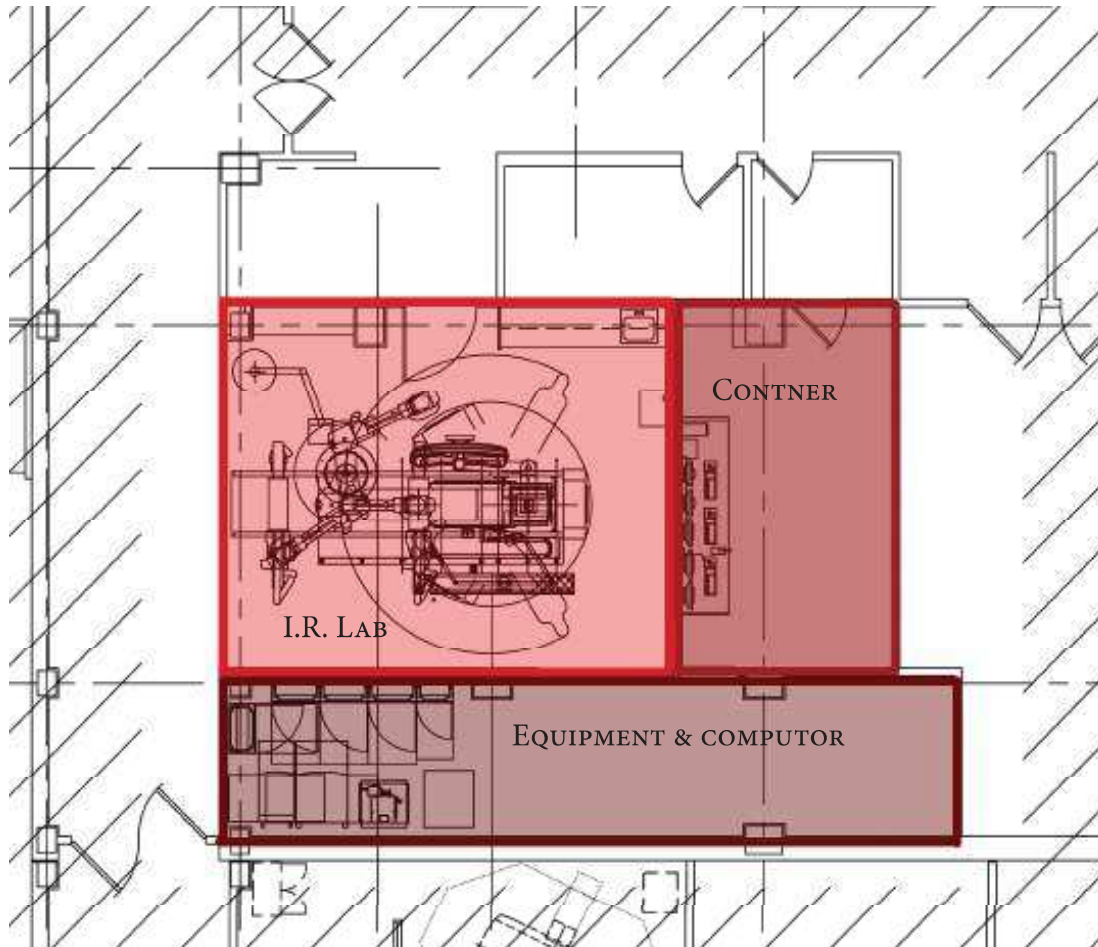
SIGNED:

[Redacted Signature Box]

DATE:

[Redacted Date Box]

INTERVENTIONAL RADIOLOGY



1ST FLOOR PLAN



INTERVENTIONAL RADIOLOGY LAB



INTERVENTIONAL RADIOLOGY LAB

[REDACTED]

[REDACTED]

[REDACTED]

Hospital

[REDACTED]

Principal in Charge/Project Architect
Square Footage: 10,152 Square feet
Completion Date: November 2016
Construction Cost: \$519,897.00
Project Cost: \$707,150.00 (existing equipment/robotics remained)



The In-Patient Pharmacy Expansion and Renovation project was undertaken to provide additional square footage to expand the pharmacy service and to ensure compliance with USP 797/800 standards for Sterile Compounding. The project would also provide a means to address deficiencies identified in the In-Patient Pharmacy processes. The current pharmacy was relocated to the basement of the original 1951 facility in 1961. Minimal expansion and renovations occurred in the early 1980's and again in the mid 1990's. One of the major challenges of this renovation was to ensure that pharmacy services continued uninterrupted throughout the duration of the renovation. In addition, we had to contend with a 10'-3 3/4" floor to floor height, challenging our design team to incorporate complicated systems and best practices in a very 'short' space.

The existing morgue and holding refrigerator was relocated to a vacant area on the basement level and environmental services was relocated to an addition adjacent to the switchboard/IT area on the basement level. This provided approximately 2,850 square feet of additional space that was contiguous to the existing pharmacy. The renovation was phased construction with the relocation of the morgue refrigerator, work area and access vestibule and the temporary construction of a compounding area, chemo prep and I.V. admixture work room, sterile prep and receiving area.

After the owner occupied these temporary areas, we renovated existing space within the pharmacy to allow for the expansion to the compounding area, chemo gowning room, chemo prep area with two new hoods, a lounge, order entry area and work space for narcotics dispensing/tracking.

The final phase was the reconfiguration of the temporary construction to house a larger shipping/receiving and packaging areas with robotics. Additional staff offices, support and service areas were also provided.

My role in this project was as Principal In Charge/Project Architect.

By his signature below, [REDACTED] - AIA, LEED AP can confirm my participation in the In-Patient Pharmacy Expansion and Renovation project.

SIGNED:

[REDACTED]

DATE:

[REDACTED]

Project Experience

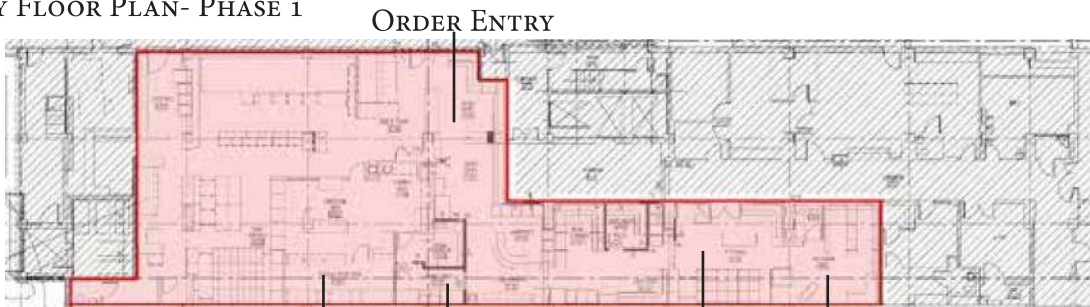
PHARMACY EXPANSION AND RENOVATION



VESTIBULE
MORGUE COOLER

TEMP.
COMPOUNDING
TEMP. IV ADMIXTURE

PHARMACY FLOOR PLAN- PHASE 1



ORDER ENTRY

STERILE PREP
CHEMO HOOD

RECEIVING
PACKAGING

PHARMACY FLOOR PLAN- PHASE 2



ORDER ENTRY/PROCESSING



PHARMACY ROBOTICS



RECEIVING



RECEIVING STORAGE



Whereas _____ has shown
to the satisfaction of The State Board of Architecture
his competency and fitness to practice Architecture now
therefore by virtue of the powers vested in it by The
State of _____ the said Board of Architecture
hereby issues to the aforesaid Certificate Number 2072
to practice Architecture in the State of _____ sub-
ject to the Powers of Revocation vested in said Board.

In Testimony Whereof Witness our Signatures and seal
of the Board this _____ day of _____ 19____

Received in the office of the Secretary of State at Jackson this
_____ day of _____ A.D. 19____ and recorded in Book
_____ of The _____ State Board of Architecture on
page _____





[REDACTED] **STATE BOARD OF
ARCHITECTURE**

certifies that it has registered and authorized to practice in the State of

[REDACTED]

[REDACTED]

as

ARCHITECT

In testimony whereof this certificate has been issued by the authority of this board.

Certificate No. [REDACTED]

*The registration is in good standing as of Wednesday, March 3, 2021.
Renewal of this registration is due on Tuesday, November 30, 2021.*

[REDACTED]

Executive Director



American College of Healthcare Architects
Attention: ACHA Application Review
PO Box 14548
Lenexa, KS 66285

I am writing this letter in strong recommendation of [redacted], Principal at [redacted] Architects in [redacted] and his application for membership to ACHA. I have known [redacted] for over 15 years, both personally and professionally. He has been a firm Principal for that entire time managing complex healthcare projects ranging from major additions at tertiary care facilities, replacement community hospitals and all types of outpatient programs. [redacted] is very knowledgeable on healthcare design and trends with excellent leadership and client management skills.

[redacted] and I worked together on several complicated projects at [redacted]. He was the lead principal architect on all of these engagements. We developed a Strategic Master Plan, programming for numerous departments, on and off campus ambulatory strategies, MOB need assessments, and greenfield hospital design. He also participated in CON hearings as an expert witness.

[redacted] strong background in healthcare starts with a Bachelor of Architecture Degree from the University of [redacted] and then with work experience with firms including [redacted] and [redacted] where he was President. He is a very active participant in the AIA, both locally and nationally.

I give my highest recommendation to the college to allow my colleague and friend, [redacted] for consideration for membership to the American College of Architects. Please address any questions regarding this recommendation to: [redacted]

Sincerely,



[REDACTED]

[REDACTED]

American College of Healthcare Architects
Attn: ACHA Application Review Board
P.O. Box 14548
Lenexa, Kansas 66285

Re: Letter of Reference for ACHA Candidate [REDACTED]

To whom it may concern:

It is my understanding that [REDACTED] AIA is a candidate for certification as a Healthcare Architect by the American College of Healthcare Architects. I have known [REDACTED] personally and professionally since working as an architect with his firm [REDACTED] PA from 2011 through 2015. During that period, I worked on design teams led by [REDACTED] which provided master planning, design and construction documents for projects large and small at [REDACTED], where [REDACTED] served as the hospital's campus architect.

[REDACTED] comprehensive expertise as a healthcare architect is unique among practitioners in our area and is exemplified by his decades of work at [REDACTED]. [REDACTED] managed a continuous flow of small-scale projects while leading development of long-term master planning for complex renovations and large-scale new construction. At all scales, [REDACTED] oversaw the incorporation of new equipment, technology and treatment environments within the confines of an increasingly maximized hospital plant. Beyond [REDACTED], [REDACTED] has provided services for [REDACTED], [REDACTED] Medical Center and outpatient clinics across the state. His experience includes all types of treatment, patient care, administrative and support services as well as coordination of mechanical, electrical and infrastructure systems. With technical and planning expertise drawn from decades of experience, [REDACTED] leadership in the implementation of complex projects from drawing board to construction exemplifies the highest qualities of the profession.

[REDACTED] professionalism within the healthcare environment is evidenced by his ability to build relationships to coalesce administration goals, staff and patient needs, maintenance and logistical requirements while orchestrating multiple ongoing construction operations. [REDACTED] attention to these relationships facilitated our team's ability to realize the client's technical, financial and healthcare goals within the complex limitations of operating facility. Walking any corridor of the hospital with [REDACTED] the depth and trust in these relationships were evident. There was not a department, office, service or support space where [REDACTED] had not successfully implemented a project.

[REDACTED]

Within the professional environment, [REDACTED] fosters opportunities for young architects and interns to develop the sensibilities necessary to respond to the technical challenges of healthcare architecture. His teams are committed to delivering better health outcomes and work environments through thoughtful, practical design. Over three decades, this continued practice has directly affected thousands of staff and patients and shaped the quality of life in the [REDACTED] metro area.

Outside of the hospital, [REDACTED] ability to build consensus and realize the goals of diverse stakeholders is exemplified by his role in developing disaster response capacity with the community of [REDACTED] architects. Following the devastation of [REDACTED], [REDACTED] was certified to evaluate damaged structures through [REDACTED] Office of Emergency Services Safety Assessment Program. He organized programs to train [REDACTED] architects to provide disaster response services and been an instrumental advocate for Good Samaritan legislation needed to protect this critical volunteer work.

While [REDACTED] technical healthcare experience is among the highest in the State of [REDACTED], his professionalism and leadership as an advocate for the public health exemplify the qualities of the College. I highly recommend that [REDACTED] be admitted for membership into the college.

Respectfully,



[Redacted]

[Redacted]

American College of Healthcare Architects (ACHA)
Post Office Box 14548
Lenexa, Kansas 66285-4548

RE: Application / Recommendation

To whom it may concern:

I am writing to recommend [Redacted] AIA for admission into the American College of Healthcare Architects.

I am a practicing Architect in the state of [Redacted] and have known [Redacted] for many years. Until recently, I served as the State Architect for the [Redacted] State Department of Health overseeing all new healthcare construction in the state. During my tenure, I worked with many local and national architects designing projects in the state. Some understood healthcare architecture as a unique and well-regulated sector of the profession; some did not.

[Redacted] is among those thoughtful architects who appreciates the responsibility of producing designs to meet the needs of our citizens. Further, he has a firm grasp of the myriad regulations that govern this kind of work.

I have no hesitation recommending that [Redacted] be conferred with a membership into the American College of Healthcare Architects.

Thank you.

Sincerely,

[Redacted]

[Redacted]

[REDACTED]

[REDACTED]

[REDACTED]

American College of Healthcare Architects (ACHA)
P.O. Box 14548
Lenexa, KS 66285-4548

To Whom It May Concern,

This letter of reference is written for [REDACTED] AIA, regarding his application to the American College of Healthcare Architects. I worked closely with [REDACTED] while he was the lead architect on several design and construction projects for [REDACTED] Medical Center in [REDACTED] [REDACTED] from 2007 – 2013. The first project was a \$15 million extensive hospital renovation and modernization project for our [REDACTED] era building. This project began before my tenure at [REDACTED] and included an addition for eight new ICU beds, ten new surgical beds and a new nineteen room emergency department. We also worked together on several additional projects including a physical therapy building, a wellness center and a physician office complex.

I enjoyed working with [REDACTED] and found him to be knowledgeable in healthcare design and architecture. [REDACTED] is creative, detailed and professional. He is also able to see the big picture, and understands the financial perspective and dilemmas of healthcare. He communicates effectively with hospital staff, engineers and construction personnel throughout the design and construction process.

I have enjoyed working with [REDACTED] over the years, and offer my highest recommendation on his behalf.

Sincerely,

[REDACTED]

[REDACTED]



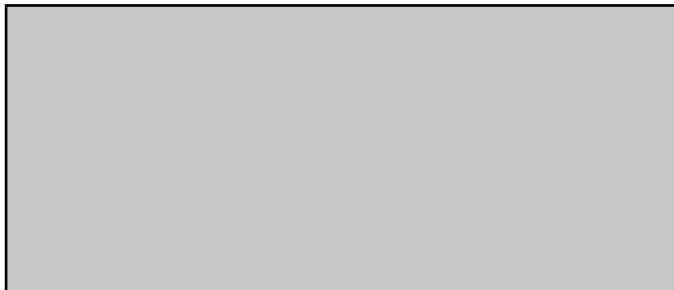
American College of Healthcare Architects (ACHA)
P. O. Box 14548
Lenexa, KS 66285-4548

RE: American College of Healthcare Architects Membership

Dear College Members,

This letter is in support of [REDACTED] AIA, Principal in the [REDACTED] who is making application for membership in the American College of Healthcare Architects. I have known [REDACTED] for many years as he has been and continues to be the principal architect for award winning structures on both the north and south campuses of [REDACTED]. Currently he is overseeing the completion of the new and expanded Emergency Department that he designed and which will open in March, 2021. The [REDACTED] the Behavioral Health Hospital and Dominican Plaza Outpatient Services located on the north campus are award winning buildings designed by [REDACTED]. [REDACTED] has also designed the 14 story Medical Office Building as well as several additional wings to the main hospital including a state of the art comprehensive stroke center located on the south campus. These multimillion dollar projects are designed not only for aesthetic value but also for excellent patient care, functionality and caregiver ease. Also, [REDACTED] is a talented architect who has the ability to plan renovations and additions to older buildings that blend in harmoniously with the original structures.

Besides being a gifted architect who is creative in design, [REDACTED] follows high professional standards, has a pleasant personality, is a good listener who is open to clients' needs and desires. [REDACTED] is also patient with staff ideas and changes and is punctual, always on time for meetings. He is a man of integrity, impeccable character and high moral and ethical principles. I know [REDACTED] if admitted to ACHA, will be a credit to this fine organization. I am privileged to submit this letter in support of [REDACTED] without any reservations.





American College of Healthcare Architects (ACHA)
P.O. Box 14548
Lenexa, Kansas 66285-4548

To Whom It May Concern:

Please consider this as a letter of reference for [REDACTED] regarding his application for the American College of Healthcare Architects. [REDACTED] has been connected with and part of the ongoing design and construction implementation project team at [REDACTED] Memorial Hospital for twenty plus years. As we strive to provide quality healthcare to our communities in [REDACTED] we have utilized [REDACTED] and his firm in architectural design, master planning, facilities planning, conceptual design, cost estimation, and construction administration. [REDACTED] has contributed his knowledge and talents to most of [REDACTED] major construction projects including our Cancer Center, [REDACTED] Plaza Outpatient Building, the complete renovation of our North Campus Behavioral Health facility, and, currently, the Renovation and Expansion Project of our Emergency Department.

I encourage your organization to admit [REDACTED] as a member of the American College of Healthcare Architects. I believe he will live up to the professional standards of your organization as he does now with his talented and innovative designs.

