

Recommended Standards for Newborn ICU Design Proposal

Please fill in the blanks, as appropriate.

Current Standard Name: _____

Current Standard Number: _____

YES – Check YES if New Standard Number (Number to be assigned when adopted)

Submitted by: _____

Instructions: Please underline your suggested additions and ~~strike through~~ your deletions. Interpretation text accompanies the main text. Interpretations are not enforceable and are intended to clarify the intent of requirements in the main text.

Existing Standard (Type below without revisions. Leave blank if entirely new standard.)

Proposed change or new standard: (If existing, repeat existing text with proposed strikethroughs as deletions and underlined additions. If entirely new standard, add here.)

Substantiation for change: Please state outcome you are trying to achieve with this proposal. Include any evidence that supports the proposal.

