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CONGRESS OF THE UNITED STATES

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Military Hospitals Should Be  
Provided Criteria For Presidential  
And VIP Accommodations and  
Instructed To Discontinue  
Separating Officer And  
Enlisted Patients

B-161475

Department of Defense

BY THE COMPTROLLER GENERAL  
OF THE UNITED STATES

911655 090137

DEC 24, 1974



COMPTROLLER GENERAL OF THE UNITED STATES  
WASHINGTON D C 20548

B-161475

C  
The Honorable William Proxmire, Chairman  
Subcommittee on Priorities and Economy in  
Government  
Joint Economic Committee  
Congress of the United States

TN-702

R  
Dear Mr Chairman

In response to your June 22, 1973, request, this is our report on Presidential and other VIP accommodations in military hospitals and separation of officer and enlisted patients

We discussed this report with appropriate Department of Defense officials, however, in accordance with your office, we have not obtained the Department's written comments. We do not plan to distribute this report further unless you agree or publicly announce its contents. In this connection, we want to invite your attention to the fact that this report contains recommendations to the Secretary of Defense. As you know, section 236 of the Legislative Reorganization Act of 1970 requires the head of a Federal agency to submit a written statement on actions he has taken on our recommendations to the House and Senate Committees on Government Operations not later than 60 days after the date of the report, and the House and Senate Committees on Appropriations with the agency's first request for appropriations made more than 60 days after the date of the report. If we obtain your agreement to release the report, we will make it available to the Secretary and the four committees for the purpose of setting in motion the requirements of section 236.

Sincerely yours,

*Thomas P. Staats*

Comptroller General  
of the United States

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APPENDIX VI

NAVAL REGIONAL MEDICAL CENTER  
PORTSMOUTH, VIRGINIA

Purchased with appropriated funds	<u>Officer</u>		<u>Enlisted</u>	
	Typical bed in nursing unit 12 (note a)	Typical bed in nursing unit 9 and 10	Typical quiet room	Typical bed in open bay
Bed, hospital	\$ -	\$129	\$129	\$129
Bed, hospital (h1-10)	350	-	-	-
Cabinet, bedside	110	43	43	43
Table, overbed	83	35	35	35
Chair, straight	-	31	31	31
Chair, stuffed	90	-	-	-
Chest, desk	175	-	-	-
Ottoman	42	-	-	-
Pictures	50	-	-	-
<b>Total</b>	<u>\$900</u>	<u>\$238</u>	<u>\$238</u>	<u>\$238</u>

<sup>a</sup>This nursing unit was refurbished to receive returning prisoners of war from Southeast Asia.

COMPTROLLER GENERAL'S REPORT  
TO THE SUBCOMMITTEE ON PRIORITIES  
AND ECONOMY IN GOVERNMENT  
JOINT ECONOMIC COMMITTEE  
CONGRESS OF THE UNITED STATES

MILITARY HOSPITALS SHOULD BE  
--PROVIDED CRITERIA FOR  
PRESIDENTIAL AND VIP ACCOMMODA-  
TIONS  
--INSTRUCTED TO DISCONTINUE SEPARAT-  
ING OFFICER AND ENLISTED PATIENTS  
Department of Defense  
B-161475

D I G E S T

WHY THE REVIEW WAS MADE

The Chairman, Subcommittee on Priorities and Economy in Government, Joint Economic Committee, asked GAO to review use of Presidential and other very important person (VIP) accommodations in military hospitals and the separation of officers and enlisted patients within them.

FINDINGS AND CONCLUSIONS

Criteria needed for establishing and furnishing Presidential suites

The Department of Defense (DOD) and the military departments have no criteria for establishing and furnishing Presidential suites. The first Presidential suite was established for President Truman in 1948 at the Walter Reed Army Medical Center, Washington, D C

Since then five others have been established in military hospitals under three Presidents

Fitzsimons General Hospital, Denver, Colorado	1955
U S Army Medical Center, Fort Gordon, Georgia	1955
Brooke Army Medical Center, Fort Sam Houston, San Antonio, Texas	1958

National Naval Medical Center,  
Bethesda, Maryland 1965

Naval Regional Medical Center,  
Camp Pendleton,  
Oceanside, California 1969

With the exception of Camp Pendleton, DOD could not tell GAO whether the White House requested the suites or whether the military departments established them in anticipation of Presidential visits

Suites at Fitzsimons and Fort Gordon were discontinued after President Eisenhower's death in 1969. Although no data was available to show how often they were used, Army officials said President Eisenhower was the only person to use these suites in the 14 to 15 years they existed

In January 1974, during GAO's review, the Office of the Army Surgeon General advised the Brooke Army Medical Center commander that maintaining a Presidential suite at that hospital was no longer required. Accordingly, the commander began to convert the space to other uses

As of October 1974, some of the space had been converted to sleeping quarters for medical officers of the

day Hospital officials expect remaining space to be converted to other uses by January 1975 (See p 5 )

The White House staff designated the U S Air Force Hospital, Homestead Air Force Base, Florida, to provide any necessary medical care to President Nixon when he visited Key Biscayne, and the Naval Regional Medical Center, Camp Pendleton, California, when he visited San Clemente

The Air Force did not establish a Presidential suite at Homestead The Navy established a 3,150 square foot suite at Camp Pendleton and spent about \$42,000 to remodel and furnish it A 1,900 square foot Presidential suite was established in a new replacement hospital at Camp Pendleton expected to open November 1974 In August 1974 a Navy representative advised GAO that the Presidential suite would be converted to other patient rooms

The Presidential suites are only staffed when scheduled for use Even though a large amount of space is reserved (about 8,000 square feet for the two existing suites), because of the low occupancy rates being experienced by the two hospitals, no one was being denied inpatient care.

Construction or modification costs to establish Presidential suites ranged from \$500 at Fitzsimons to \$215,000 at Bethesda Costs of furnishings ranged from about \$1,800 at Fort Gordon to about \$25,000 at Camp Pendleton Size of the suites ranged from 600 square feet at Fort Gordon to 6,543 square feet at Bethesda (See pp 3 to 5 )

The military departments' varied practices concerning Presidential suites warrants the establishment of DOD policy on the number, size, and furnishings of Presidential suites (See p 19 )

Members of President Nixon's staff said suites at Brooke and Camp Pendleton were not considered Presidential suites by the White House Hospital commanders at these two facilities said the suites may, in addition to the President or his designee, be used by others (See p 5 )

The two suites in the Washington, D C , area--Walter Reed and Bethesda--are reserved solely for use by the President or his designee President Nixon never used the suite at Walter Reed, and hospital officials believed that President Eisenhower was the last person to use it During 1973 President Nixon used the suite at Bethesda for several days. Hospital officials had no information on occupancy in prior years (See pp 6 to 8 )

A new Walter Reed hospital, being constructed at a cost of \$93 per square foot, is scheduled to open in June 1976 and includes a 2,800 square foot Presidential suite (See p 6 )

GAO believes DOD should assess whether there is a need for more than one Presidential suite in the Washington metropolitan area (See p 20 )

Criteria needed for establishing and furnishing other VIP accommodations

DOD and the military departments --have not defined a VIP,

- have no criteria regarding the establishment and furnishing of other VIP accommodations, and
- did not know which of their hospitals had VIP accommodations

In August 1973 GAO requested the commander of each of the 210 military hospitals to provide information on

- the definition of a VIP,
- the number of beds in the facility used by VIPs, and
- a brief description of VIP accommodations, such as square footages, furnishings, equipment, staffing, and decor

A total of 45 military hospitals reported having VIP beds and 10 others reported having beds which were not specifically designated as VIP beds but which could be used as VIP accommodations. The 55 hospitals varied considerably in their practices of establishing and maintaining VIP accommodations. The ranges of the responses follow

Definition of a VIP--From a minimum of an E-9 (Sergeant Major) to a minimum of a General or Ambassador

Number of VIP beds at facility--from 1 to 11

Size of rooms--From a room of 100 square feet to a suite of 912 square feet

Furnishings and decor--From the same as other rooms in the hospital to additional furnishings, such as an electric bed, color television, sofa, chairs, and chandelier

In addition, while visiting one hospital which reported having only a Presidential suite, GAO found it also had 14 beds for VIP use which the hospital had not reported. Hospital officials said the space was not reported because it was not reserved exclusively for VIPs

In visits to nine hospitals having VIP beds, GAO found differences in hospital practices for maintaining these accommodations. In some hospitals the VIP furnishings, decor, and nursing staff to patient ratios were the same as in the rest of the hospital. Other hospitals had much more elaborate VIP accommodations and higher nursing staff to patient ratios than in the remainder of the hospital

Many hospital commanders reported that VIP beds may be used by anyone if the medical need arises. At hospitals GAO visited, the space designated for VIPs did not cause overcrowded conditions throughout the rest of the hospital or result in patients being denied medical care (See pp 21 and 22 )

DOD should determine whether there is a need for other VIP accommodations in military hospitals, and, if so, it should develop criteria for establishment and furnishing of such accommodations (See p 29 )

Enforcement needed to insure discontinuance of separate officer and enlisted personnel accommodations

DOD and the military departments' space planning criteria do not provide for separate officer and enlisted personnel accommodations. DOD's criteria for nursing units provides a separate nursing station

and related facilities for every 20 to 40 medical-surgical, psychiatric, and pediatric beds

GAO's review at two Air Force and five Army hospitals showed officer and enlisted patients were assigned to the same nursing units on the basis of their medical needs, such as surgical patients to a surgical unit and medical patients to a medical unit

At the four Navy hospitals GAO visited, however, officer and enlisted patients were assigned to separate nursing units because of Navy tradition

The four Navy hospitals which separated officers from enlisted personnel generally provided

- more space to officers,
- more expensive furnishings to officers, and
- a higher ratio of nursing staff to officers

Current DOD space planning criteria eliminates open bays and provides that new hospitals will consist of one-, two-, and four-bed rooms. A DOD representative said DOD is opposed to separating officer and enlisted personnel and would not approve construction of separate officer and enlisted nursing units

DOD, however, has not instructed the military departments to eliminate separation of officers and enlisted personnel in their existing and future hospitals (See pp 31 and 32 )

DOD should advise the military departments that it is opposed to the practice of separating officer

and enlisted personnel in military hospitals and require the military departments to advise all hospital commanders accordingly (See p 41 )

#### RECOMMENDATIONS

The Secretary of Defense should

- Establish criteria regarding the number, size, and furnishings of Presidential suites and require DOD approval of the establishment of future suites.
- Assess the adequacy of the Bethesda Presidential suite to provide medical care to the President, and should convert to other uses either the Bethesda suite or the planned Walter Reed suite, as appropriate
- Determine whether there is a need for other VIP accommodations in military hospitals. If the Secretary determines a need for such accommodations, he should develop criteria for establishing and furnishing them

This should include (1) definition of a VIP, (2) circumstances justifying such accommodations, (3) size and number of rooms which should be established, (4) furnishings which should be provided, and (5) staffing requirements for VIP suites

- Instruct the military departments to prohibit separation of officers and enlisted personnel in their existing and future hospitals



## CHAPTER 1

### INTRODUCTION

Our review of the use of Presidential and other very important person (VIP) accommodations in military hospitals and separation of officer and enlisted patients was made at the request of the Chairman, Subcommittee on Priorities and Economy in Government, Joint Economic Committee.

As of August 1973, the military departments operated 154 hospitals in the United States and 56 hospitals overseas. We were advised that 4 of the 210 hospitals had Presidential suites and that 55 hospitals had beds that were reserved for or could be used by VIPs. In one other hospital we visited which reported having only a Presidential suite, we found that there were an additional 14 beds designated for use by VIPs

As of August 1973, there were 39,230 operating beds in the United States and 6,142 operating beds overseas. The Department of Defense (DOD) defines an operating bed as a bed which is currently ready for the care of a patient, and the facility is staffed to operate the bed. Before August 1973, DOD criteria provided that general care nursing units (medical-surgical, psychiatric, and pediatrics services) contain 85 to 100 net square feet per bed.<sup>1</sup> In August 1973 the criteria was revised to provide for general care nursing units in new hospitals to be 25 percent one-bed rooms, 50 percent two-bed rooms, and 25 percent four-bed rooms, containing 150, 220, and 440 net square feet, respectively.

About 10 million people are eligible to receive medical care at little or no charge in military health facilities. This includes the President and his family, active duty and retired members of the military, and their dependents and dependents of deceased members. In addition, medical care on a reimbursable basis can be provided to the President's designees and others, such as foreign officials and designees of the secretaries of the military departments.

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<sup>1</sup>/Net square footage excludes toilet and bathing facilities and a portion of the passageway in the bedrooms

## SCOPE OF REVIEW

We interviewed various DOD and military department personnel concerning the policies and practices for establishing and furnishing Presidential suites, other VIP accommodations, and separate officer and enlisted personnel accommodations

We determined the extent to which Presidential and other VIP accommodations existed in military hospitals by:

- Asking the military departments about their hospitals having Presidential and other VIP accommodations.
- Obtaining information from each military hospital on the number of VIP rooms and beds, size of VIP rooms, hospital commanders' definitions of a VIP, VIP room descriptions, and hospital occupancy statistics
- Discussing the establishment, furnishing, and use of the Presidential suites with representatives of the White House, DOD, the military departments, and the individual hospitals.

We visited 11 military hospitals--4 reporting Presidential suites, 8 reporting other VIP accommodations (including 2 of the 4 hospitals with Presidential suites), and 1 reporting no VIP beds. We obtained a list of the furnishings in the four Presidential suites and their cost or source. We also compared the furnishings<sup>1</sup>, size, and staffing of the VIP accommodations with other rooms in the hospital, and made similar comparisons<sup>2</sup> at the four hospitals which maintained separate officer and enlisted personnel accommodations

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<sup>1</sup>/Compared VIP furnishings with typical furnishings in other rooms.

<sup>2</sup>/Compared typical officer and typical enlisted furnishings

## CHAPTER 2

### CRITERIA NEEDED FOR ESTABLISHING AND FURNISHING PRESIDENTIAL SUITES

The first Presidential suite was established in a military hospital for President Truman in 1948. Since then there have been five other suites established in military hospitals under three Presidents. Two suites were discontinued before our review, and two suites were discontinued during our review. With the exception of Camp Pendleton, DOD could not tell us whether White House staffs requested the suites or whether the military departments established the suites in anticipation of Presidential visits. DOD and the military departments have no criteria for establishing and furnishing Presidential suites. Because of this, the size and cost of establishing and furnishing the six Presidential suites varied greatly. (See p 4 )

Under the Nixon administration, the White House designated the Naval Regional Medical Center, Camp Pendleton, California, and the U S. Air Force Hospital, Homestead Air Force Base (AFB), Florida, as facilities to provide medical care to the President when he visited San Clemente or Key Biscayne. Air Force officials said the hospital at Homestead was not altered and no special furnishings were added to any of the rooms to accommodate the President. The Navy, on the other hand, designated 3,150 square feet of the hospital at Camp Pendleton as a Presidential suite, and spent about \$42,000 to remodel and furnish it. A new replacement hospital at Camp Pendleton, scheduled for occupancy in November 1974, contains a 1,900 square foot Presidential suite. In August 1974 a Navy representative advised us the Presidential suite was being converted to other patient rooms.

Two Presidential suites have been established in the Washington, D C , area. One suite in the Walter Reed Army Medical Center has not been used since President Eisenhower's death in 1969. A new \$112 million hospital under construction is scheduled to be completed in the summer of 1976 and includes a 2,800 square foot Presidential suite.

As shown below, the size and cost of establishing and furnishing the six Presidential suites varied greatly.

<u>Facility and location</u>	<u>Number of rooms</u>	<u>Square footage</u>	<u>Cost of furnishings</u>	<u>Suite established</u>		<u>Date discontinued</u>
				<u>Cost</u>	<u>Date President</u>	
Walter Reed Army Medical Center, Washington, D C	<sup>a</sup> 3	<sup>a</sup> 1,367	<sup>b</sup> \$12 611	<sup>c</sup> \$55,000	1948 Truman	Active
Fitzsimons General Hospital, Denver, Colo	3	860	(d)	500	1955 Eisenhower	1969
U S Army Medical Center Fort Gordon, Ga	3	600	1,800	(d)	1955 Eisenhower	1970
Brooke Army Medical Center Fort Sam Houston, San Antonio, Tex	10	2,938	19,849	<sup>e</sup> 45,000	1958 Eisenhower	1974
National Naval Medical Center, Bethesda, Md	10	6,543	<sup>f</sup> 7,914	215,000	1965 Johnson	Active
Naval Regional Medical Center Camp Pendleton, Oceanside, Calif	12	3,150	24,851	16,981	1969 Nixon	1974

<sup>a</sup>Nine other rooms and a foyer totaling 1,936 square feet support the Presidential suite. These rooms also support the five other VIP suites mentioned in chapter 3.

<sup>b</sup>Suite also includes various gifts and other items purchased with appropriated funds for which costs were not available. In addition, furnishings in the nine rooms which support the Presidential suite cost \$30,548. (See app I pp 43 to 47)

<sup>c</sup>Total cost to establish the Presidential suite, the nine support rooms, and the five other VIP suites.

<sup>d</sup>Not available.

<sup>e</sup>Only the cost to modify the suite for President Johnson. Costs to establish the suite in 1958 are not available.

<sup>f</sup>Suite also includes 118 items on loan from the White House Curator.

The suites at Fitzsimons and Fort Gordon were discontinued in 1969 and 1970, respectively. These suites were established in anticipation of visits to the Denver and Augusta areas by President Eisenhower. DOD and Army representatives did not know whether Eisenhower administration officials requested the suites' establishment or whether the Army made the decisions. Army officials said that President Eisenhower was the only person to use either of these suites in the 14 to 15 years they were in existence. No occupancy data was available to show how often they were used.

In January 1974, during our review, the Office of the Army Surgeon General notified the Brooke commander that maintaining a Presidential suite there was no longer required. Accordingly, the commander initiated plans to convert the space for other uses. As of October 1974, some of the space had been converted to sleeping quarters for medical officers of the day. Hospital officials expect the remaining space to be converted to other uses, including a chapel and chaplains' offices to be completed by November 1974, and a patient recreation area to be completed by January 1975.

Hospital officials said that Presidential suites are staffed only when scheduled for use. Even though a large amount of space is reserved for Presidential suites (about 8,000 square feet for the two existing suites), no one is being denied inpatient care because of the low occupancy rates being experienced by the two hospitals.

Members of President Nixon's staff said the suites at Brooke and Camp Pendleton were not considered Presidential suites by the White House. This was confirmed by the hospital commanders at these two facilities who said the suites have been used by others in addition to the President or his designee. (See pp. 8, 13 and 14 )

President Nixon's physician advised us that Jackson Memorial Hospital in Miami and the hospital at Homestead Air Force Base had been designated to provide necessary medical care to the President while at Key Biscayne. Officials of both hospitals said that no alterations or special furnishings had been added to accommodate the President

Further, they said the rooms which had been designated for his use were not automatically reserved whenever he visited Key Biscayne. In the event he needed hospitalization, whoever happened to be in the designated room at the time would be moved to another room.

WALTER REED ARMY MEDICAL CENTER  
WASHINGTON, D.C.

The Presidential suite was established in 1948, and consists of a bedroom, sitting room, music room, and bathroom totaling 1,367 square feet. In addition to the Presidential suite, five VIP rooms and support areas, such as kitchen, dining room, lounge, nurses' office, doctors' office, and a separate elevator system were established at the same time, all at a cost of \$55,000. The Presidential suite and VIP rooms are located in the same hospital nursing unit and share the same support areas.

DOD and Army representatives did not know whether Truman administration officials requested the suite's establishment or whether the Army made the decision.

According to hospital officials, President Eisenhower was the last person to use the suite.

The furnishings in the Presidential suite included items costing \$12,611, other items for which costs were not available, and various gifts. Also, the nine rooms supporting the Presidential suite and the five other VIP suites contained furnishings costing \$30,548. (See app. I, pp. 43 to 47 )

A new 1,280 bed hospital is under construction at Walter Reed and is scheduled to include a Presidential suite consisting of 15 rooms totaling about 2,800 square feet. The hospital, scheduled to open in June 1976, will contain 12 million square feet and cost about \$112 million (\$93 per sq ft). Neither DOD nor the Army could estimate the cost to establish the Presidential suite.

The present hospital is scheduled to be converted to administrative space and hospital officials told us that the Presidential suite, the five other VIP suites, and the support rooms would either be eliminated or become a museum. Hospital officials did not know whether the existing furnishings would be used in the new hospital.

President Nixon's military aide said the new suite was not requested by the White House. DOD and Army representatives said that the Army planned and DOD approved a suite in the new hospital because one existed at Walter Reed. For security reasons, we could not photograph the Presidential or VIP facilities at Walter Reed.

BROOKE ARMY MEDICAL CENTER  
FORT SAM HOUSTON, SAN ANTONIO, TEXAS

The Presidential suite was established in 1958 in anticipation of a visit to the San Antonio area by President Eisenhower. DOD and Army representatives did not know whether Eisenhower administration officials requested the suite's establishment or whether the Army made the decision. Further, they did not know the cost to establish or furnish the suite. Hospital officials did not know whether President Eisenhower ever used the suite.

In November 1963 the hospital was designated by President Johnson's physician as the one that would provide emergency medical care to the President and his family during their visits to his ranch. In October 1966 President Johnson's physician told the hospital that the President needed surgery and wanted it done at Brooke.

The suite was modified to meet Presidential security, safety, and communications requirements. About \$13,000 was spent for a temporary fire escape, patio, and communications system. However, several days before admission for surgery, the President announced that he would have the surgery done at the National Naval Medical Center, Bethesda, Maryland. In 1967 and 1968, an additional \$32,000 was spent providing a permanent fire escape and patio at Brooke.

The Presidential suite, which has 10 rooms totaling 2,938 square feet and a patio and sundeck totaling 625 square feet, occupies the entire seventh floor of the main building. The rooms consist of the President's bedroom and sitting room, the First Lady's bedroom and sitting room, two bedrooms for Secret Service personnel, nurses' office, doctors' office, examining room, and kitchen and contain furnishings costing \$19,849. About \$4,750 of this amount was spent on furnishings for President Johnson. (See app. I, pp. 48 and 49.) The photographs on pages 9 to 12 show various rooms of the suite.

The suite was used by returning prisoners of war during February 15 to 27, 1973, and March 8 to April 13, 1973, and additional beds and equipment were added. Hospital officials said that President and Mrs. Johnson and Mrs. Eisenhower were the only persons who used the suite during the prior 3 years.

In January 1974 the hospital commander said he was notified by the Office of the Army Surgeon that maintaining a Presidential suite was no longer required at Brooke. As of October 1974, some of the space had been converted to sleeping quarters for medical officers of the day. Hospital officials expect the remaining space to be converted to other uses, including a chapel and chaplains' offices to be completed by November 1974, and a patient recreation area to be completed by January 1975. He plans to distribute the furnishings throughout various parts of the hospital.

NATIONAL NAVAL MEDICAL CENTER  
BETHESDA, MARYLAND

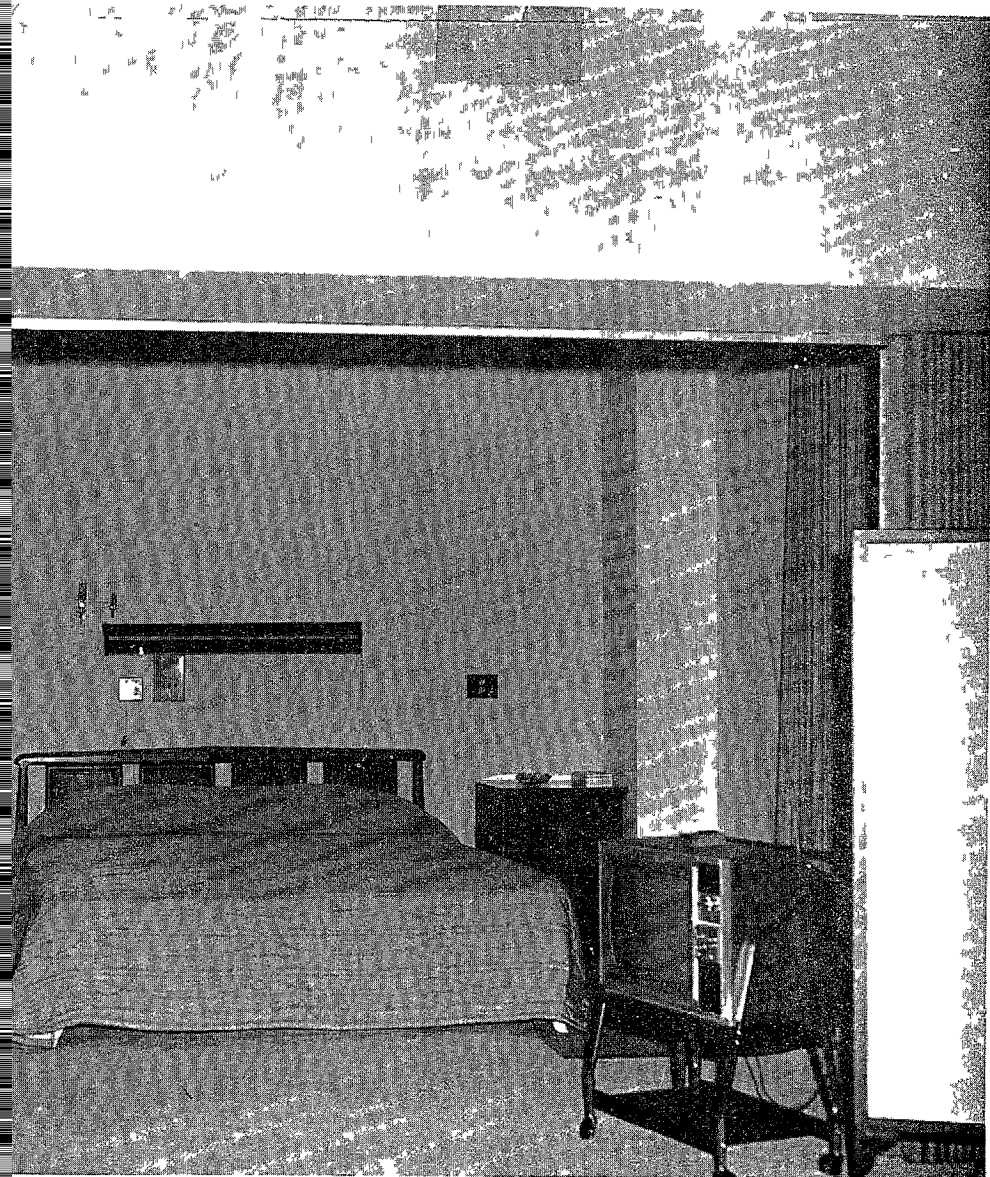
The Presidential suite was established in March 1965 at a cost of about \$215,000 and contains 10 rooms totaling 6,543 square feet. DOD and Navy representatives did not know whether Johnson administration officials requested the suite's establishment or whether the Navy made the decision.

The suite occupies 10 rooms on one floor of the hospital. The suite consists of the President's bedroom and sitting room, the First Lady's bedroom, guest bedroom, Secret Service bedroom, nurses' office, doctors' office, examining room, dining room, and kitchen.

The furnishings in the suite included items purchased with appropriated funds (\$7,914) and items on loan from the White House Curator. The White House Curator informed us that that 118 items are on loan to the hospital which were either purchased with nonappropriated funds or were donated. (See app I, p 51 )

Hospital occupancy records for the Presidential suite were not maintained, however, the hospital administrator recalled the suite being occupied by President Nixon for about 8 days during 1973. He said no one else occupied the suite





U S Army photo

KE ARMY MEDICAL CENTER  
SAN ANTONIO, TEXAS  
1A PRESIDENT'S BEDROOM

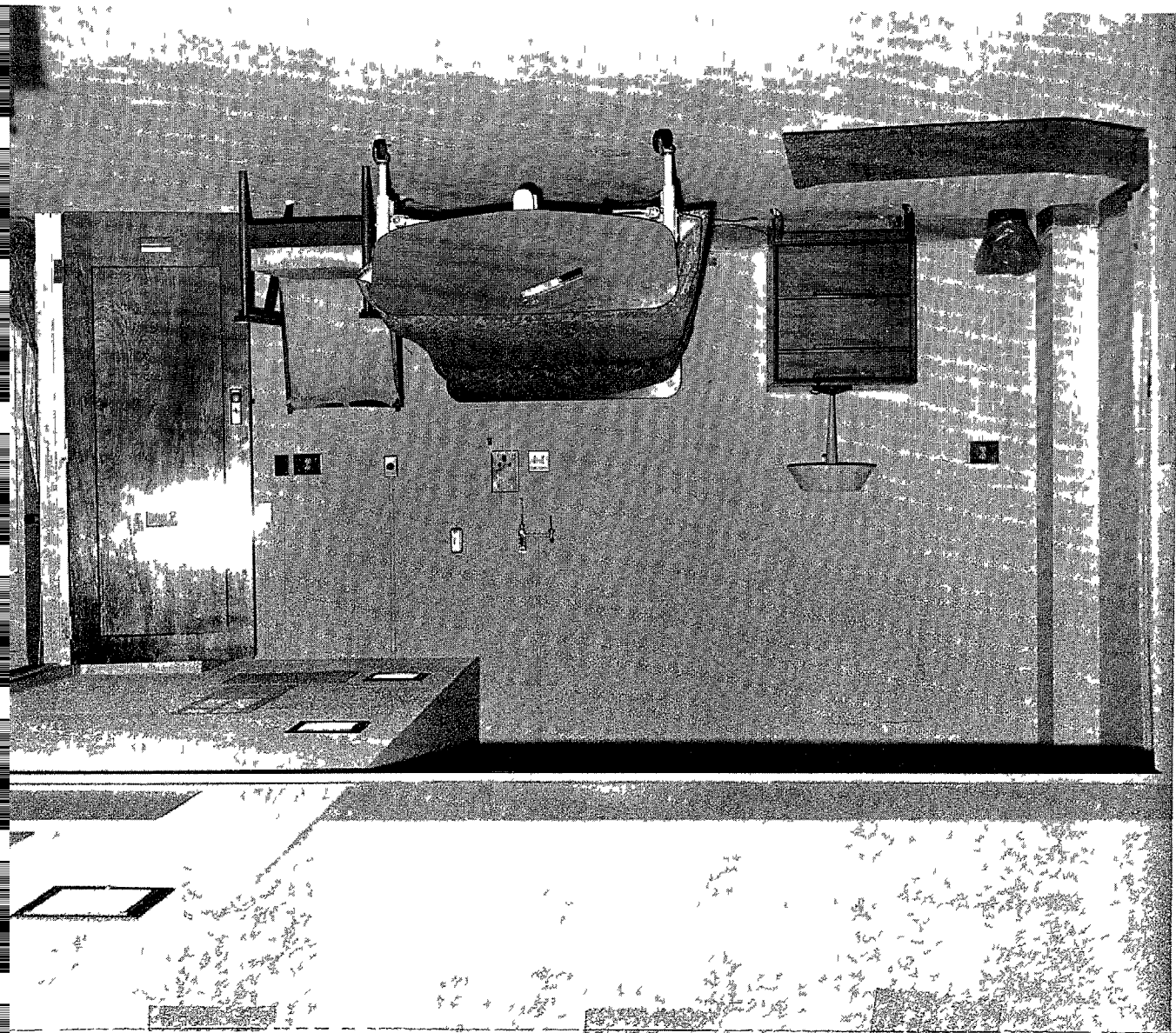


U S Army photo

THE ARMY MEDICAL CENTER  
SAN ANTONIO, TEXAS  
PRESIDENT'S SITTING ROOM

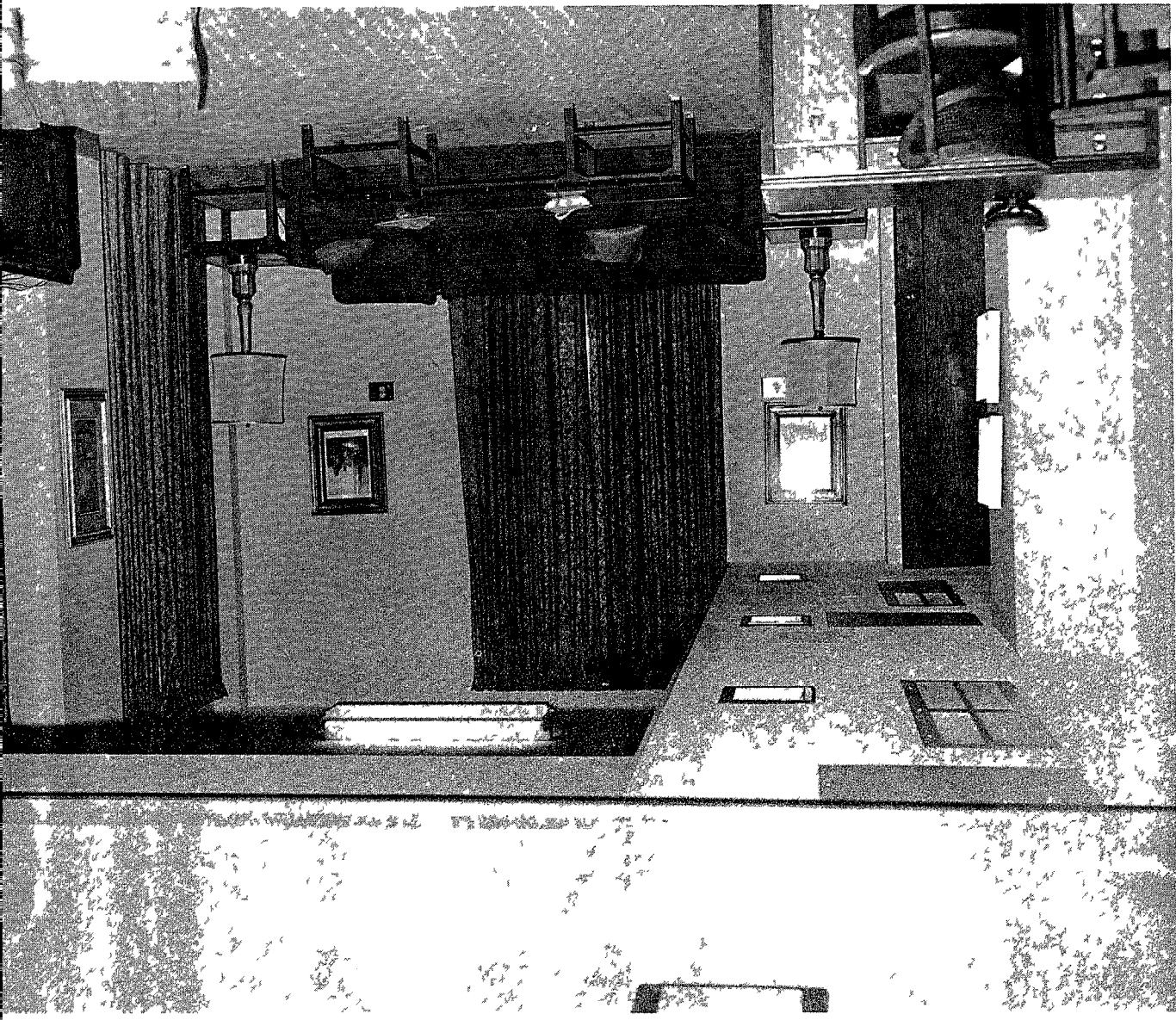
BROOKE ARMY MEDICAL CENTER  
SAN ANTONIO, TEXAS  
ROOM 2A FIRST LADY'S BEDROOM

U S Army ph



BROOKE ARMY MEDICAL CENTER  
SAN ANTONIO, TEXAS  
ROOM 2B FIRST LADY'S SITTING ROOM

U S Army ph



that year, and no information was available for previous years

Construction of a new hospital is scheduled to begin in 1976. Current plans do not include a Presidential suite. The hospital commander said the existing Presidential suite would be maintained after the new hospital is built. For security reasons, we could not photograph the Presidential suite at Bethesda.

NAVAL REGIONAL MEDICAL CENTER  
CAMP PENDLETON, OCEANSIDE, CALIFORNIA

The Presidential suite was established in August 1969 and consists of 10 rooms--the President's bedroom, First Lady's bedroom and sitting room, solarium (conference room and lounge), doctors' bedroom and office, nurses' office, two Secret Service bedrooms, and a kitchen--totaling 3,150 square feet.

President Nixon's physician advised the Navy Bureau of Medicine and Surgery in early 1969 that Camp Pendleton was designated by the White House to provide medical care to the President whenever he visited San Clemente. In August 1969, hospital officials received oral instructions from the Bureau of Medicine and Surgery to establish the suite. Funds totaling \$41,832 were spent for this purpose--\$16,981 for modifications and \$24,851 for furnishings. (See app I, p. 50 )

The photographs on pages 15 to 18 show various rooms of the suite established in 1969.

The hospital commander at the time the suite was established believed President Nixon's physician and a member of the Secret Service toured the hospital and selected the ward where the suite was to be established.

The hospital commander stated that the suite was not reserved exclusively for President Nixon or his designee. However, when he was at the Western White House he had top priority for its use. President Nixon never used the suite. The suite has been used for medical purposes for returning prisoners of war, senior officers (O-6 and above), Commandant

of the Marine Corps, two Secret Service members, and the Deputy Assistant and Secretary to President Nixon. In addition, it has been used for nonmedical purposes as quarters for visiting senior officers and a visiting Government official, as follows.

<u>Dates</u>	<u>Number of days</u>	<u>Individual using suite</u>
9-70 and 5-73	(a)	Navy Surgeon General
9-24-70	1	Commissioner, Civil Service Commission
1-19 to 22-71	3	Navy Inspector General
5-13-74	1	Navy Assistant Surgeon General
1-24 to 27-72	4	Several Navy Captains on temporary duty at Camp Pendleton evaluating training
4-30 to 5-4-73	5	Navy Inspector General

<sup>a</sup>Not available.

A new \$23 million 600-bed hospital<sup>1</sup> at Camp Pendleton is scheduled for occupancy in November 1974 at which time the existing hospital will be closed. A 40-bed wing of the hospital, totaling 10,000 square feet, has been designated

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<sup>1</sup>Hospital officials told us only about 350 of the beds would be operational with the remaining 250 being held for emergency purposes. A representative of the Office of the Assistant Secretary of Defense, Health and Environment, said the hospital was overbuilt because hospital occupancy was considerably higher 5 or 6 years ago when the facility was programed. He said the Navy is considering relocating the Marine Corps recruit depot to Camp Pendleton which would greatly increase the active duty population there and increase the patient workload.



U S Navy photo

REGIONAL MEDICAL CENTER  
P PENDLETON, CALIFORNIA  
PRESIDENT'S BEDROOM



U S Navy photo

NAVAL REGIONAL MEDICAL CENTER  
CAMP PENDLETON, CALIFORNIA  
FIRST LADY'S BEDROOM





U S Navy photo

NAVAL REGIONAL MEDICAL CENTER  
CAMP PENDLETON, CALIFORNIA  
FIRST LADY'S SITTING ROOM

NAVY REGIONAL MEDICAL CENTER  
CAMP PENDLETON, CALIFORNIA  
DINING/CONFERENCE ROOM

U S Navy photo



for VIP patients. A Presidential suite totaling 1,900 square feet was established in this area. Navy representatives told us they decided to establish a suite in the new hospital. According to hospital officials, a member of the Secret Service selected the location where the suite was to be established. In 1973 one private room of the VIP patients' accommodations in the new hospital was converted into a kitchen at a cost of \$8,500 for modifications and equipment

In January 1974 hospital officials said if a Presidential suite was no longer needed at the new hospital, the space--with the exception of the kitchen--could readily be converted to patient rooms. A Presidential suite was not included in the original design and construction. For example, the President's bedroom was constructed as a four-bed room. The rooms designated as the President's sitting room and conference room were originally scheduled to be bedrooms. In August 1974 a Navy representative advised us that the Presidential suite would be converted to other patient rooms

#### CONCLUSIONS

When the White House staff designated Homestead Air Force Base and Camp Pendleton to provide any necessary medical care to President Nixon when he visited Key Biscayne and San Clemente, respectively, the Air Force did not establish a Presidential suite at Homestead, but the Navy established a 3,150 square foot suite at Camp Pendleton and spent about \$42,000 to remodel and furnish it.

Construction or modification costs to establish Presidential suites ranged from \$500 at Fitzsimons to \$215,000 at Bethesda. Costs of furnishings ranged from about \$1,800 at Fort Gordon to about \$25,000 at Camp Pendleton. The size of the suites ranged from 600 square feet at Fort Gordon to 6,543 square feet at Bethesda.

The military departments' varied practices concerning the establishment, size, and furnishings of Presidential suites warrants the formulation of DOD policy on the appropriateness of such practices.

The new Walter Reed hospital, being constructed at a cost of \$93 per square foot, is scheduled to include a Presidential

suite containing 2,800 square feet. Meanwhile, the Bethesda hospital has a Presidential suite totaling 6,543 square feet. DOD should assess whether there is a need for more than one presidential suite in the Washington metropolitan area.

#### RECOMMENDATIONS

We recommend that the Secretary of Defense:

- Establish criteria regarding the number, size, and furnishings of Presidential suites and require DOD approval of the establishment of future suites
- Assess the adequacy of the Bethesda Presidential suite to provide medical care to the President and convert to other uses either the Bethesda suite or the planned Walter Reed suite, as appropriate

## CHAPTER 3

### CRITERIA NEEDED FOR ESTABLISHING AND FURNISHING OTHER VIP ACCOMMODATIONS

DOD and the military departments (1) have not defined a VIP, (2) have no criteria regarding the establishment and furnishing of VIP accommodations, and (3) did not know which hospitals had VIP accommodations. In August 1973 we requested the commander of each of the 210 military hospitals to provide us information on:

- The definition of a VIP.
- The number of beds in the facility used by VIPs.
- A brief description of VIP accommodations, such as square footages, furnishings, equipment, staffing, and decor

A total of 45 hospitals reported having 94 VIP beds occupying 26,967 feet of space. Ten other hospitals reported having 46 beds occupying 7,723 square feet of space which were not specifically designated as VIP beds but which could be used for VIP accommodations. The VIP accommodations in the 55 military hospitals varied considerably as indicated by the following responses we received. (See app. II.)

Definition of a VIP--From a minimum of an E-9 (Sergeant Major) to a minimum of a General or Ambassador.

Number of VIP beds at facility--From 1 to 11.

Size of rooms--From a room of 100 square feet to a suite of 912 square feet.

Furnishings and decor--From the same as other rooms in the hospital to substantial additional furnishings, such as an electric hospital bed, color television, sofa, chairs, chandelier, and quilted bedspreads.

We visited eight hospitals which reported having beds that could accommodate VIPs (including two of the four hospitals with Presidential suites), and one hospital--Naval

Regional Medical Center, Portsmouth, Virginia--which reported having no VIP beds. We found the information reported by the nine hospitals we visited to be generally accurate. However, while visiting the National Naval Medical Center, Bethesda, Maryland, which reported having only a Presidential suite, we found that it also had 14 beds for VIP use which the hospital had not reported to us. Hospital officials said the space was not reported because it was not reserved exclusively for VIPs. (See pp 77 and 78.)

Many of the hospital commanders reported that the VIP beds may be used by anyone if the medical need arises. At the hospitals we visited, the space designated for VIP accommodations did not cause overcrowded conditions throughout the rest of the hospital or result in patients being denied medical care.

Following is a discussion of two hospitals we visited which reported having VIP beds. A brief discussion of the other hospitals with VIP accommodations which we visited is included as appendix III.

MALCOLM GROW MEDICAL CENTER  
ANDREWS AIR FORCE BASE, CAMP SPRINGS, MARYLAND

The hospital maintains one VIP nursing unit with nine beds. The VIP accommodations consisted of four private rooms totaling 222 square feet each, four two-room suites totaling 359 square feet each, and a three-room suite totaling 703 square feet, an average of 337 square feet (289 net square feet) per bed. The average square footage for other hospital patients is 127 net square feet per bed.

During July 1 to September 30, 1973, the average daily occupancy rate for the VIP unit was about 49 percent, while the rate for the hospital averaged about 62 percent. The patients using the VIP nursing unit during this period were as follows:

<u>Patients</u>	<u>Number</u>	<u>Days hospitalized</u>	
		<u>Range</u>	<u>Average</u>
Generals	21	1 to 43	5.2
Colonels	4	1 to 9	4.5
Lieutenant Colonel	1	-	5
Majors	2	1 to 15	8
Returned prisoners of war	5	1 to 4	2.6
Foreign officers	3	2 to 11	6
DOD civilian employees	2	2 to 3	2.5
Wives of generals	5	2 to 29	9.6
Wife of colonel	1	-	8
Retired generals	8	2 to 18	8
Retired colonels	2	23 to 24	23.5
Wives of retired or deceased generals	<u>6</u>	<u>1 to 16</u>	<u>6.7</u>
Total	<u>60</u>	<u>1 to 43</u>	<u>6.5</u>

A hospital representative said the VIP unit is used primarily for conducting physical examinations for retiring Generals-- all Air Force Generals get their retirement physicals at Malcolm Grow. He said these physicals usually take 2 to 3 days.

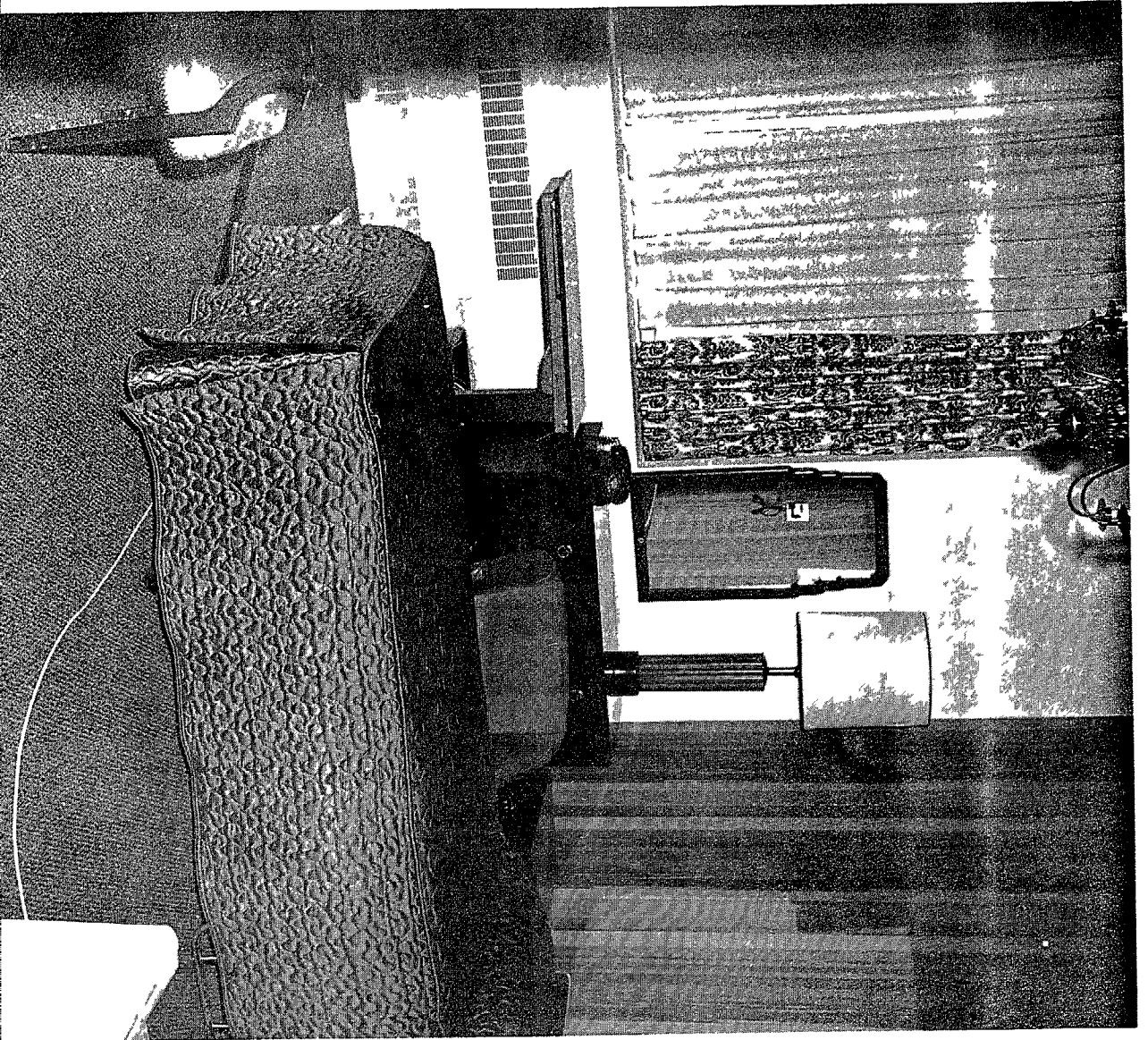
The cost of furnishings for each of the private rooms and two-room suites averaged \$1,895 and \$3,901, respectively; the furnishings for the three-room suite cost \$5,305. The average cost of furnishings for the rooms and suites was \$3,165 per bed. Typical furnishings provided other patients cost about \$638 per bed. (See app. IV, p. 80.)

Photographs of typical rooms provided VIP and other patients are shown on pages 24 to 26.

The VIP unit is served by a nursing station which is manned by a minimum of one nurse and one corpsman when it is occupied. As shown below, there was a high nursing service to patient ratio when compared with the rest of the hospital, primarily because of the limited number of beds and the occupancy rate of the VIP nursing unit <sup>1</sup>

1

The ratios were computed for 1 representative day each month for the 3-month period

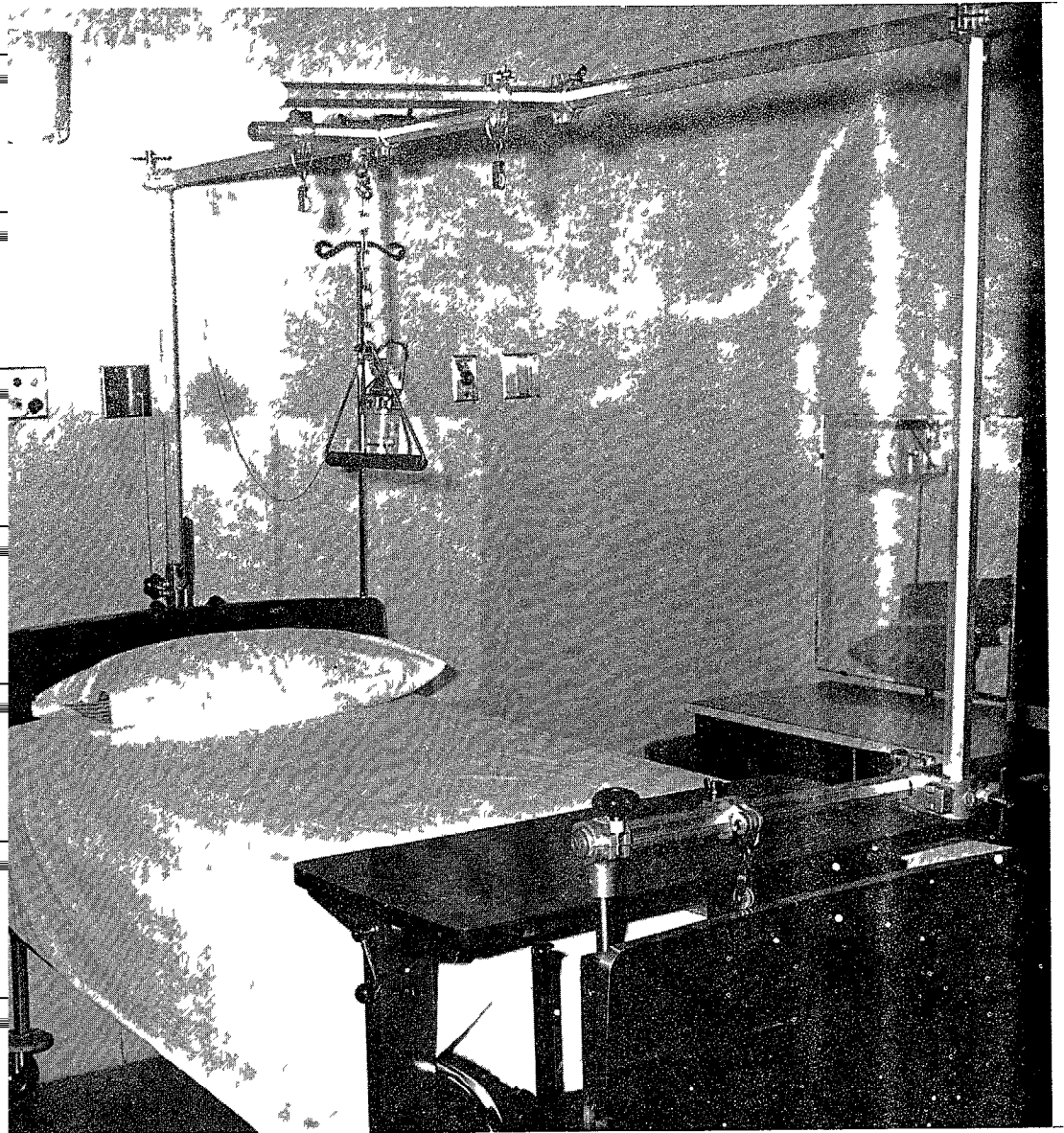






U S Air Force photo

COLM GROW MEDICAL CENTER  
ANDREWS AFB, MARYLAND  
WORK ROOM 3 ROOM SUITE



US Air Force photo

ALCOLM GROW MEDICAL CENTER  
ANDREWS AFB, MARYLAND  
TYPICAL PRIVATE ROOM

Nursing staff to patient ratios for the VIP nursing unit

	<u>Day</u>	<u>Evening</u>	<u>Night</u>
Nurses	1 to 2.2	1 to 4.4	1 to 4 4
Aids	1 to 2.2	1 to 4.4	1 to 4 4

Nursing staff to patient ratios for all other nursing units

Nurses	1 to 6.7	1 to 14 3	1 to 22
Aids	1 to 4 4	1 to 10	1 to 12

Until November 1973, VIP patients could order from the regular hospital menu or from a separate VIP menu. A comparison of the dinner menus--main course choices for the evening meal--is shown below:

<u>VIP</u>	<u>Other patients</u>
Grilled steak--rare, medium, well	Menu changed daily; however, the choice of items was not as great as that offered VIP patients. For example, one day the choices were baked ham or braised beef shortribs.
Broiled lobster tail	
Broiled lamb chop	
Crab salad	
Crab imperial	
Crab Norfolk	
Broiled brook trout almondine	
French fried shrimp	
Hamburger	
Cheeseburger	

After our visit, the commanding officer told us that the VIP menu was discontinued. He said only about 5 percent of the VIP patients ordered from it. This was the only hospital we visited that had separate menus for VIP patients.

WALTER REED ARMY MEDICAL CENTER  
WASHINGTON, D C

The hospital has one VIP nursing unit containing five VIP suites, a Presidential suite, and nine other rooms (lounge, dining room, kitchen, etc) which support the suites. These other rooms contain 1,936 square feet.

The VIP suites consist of two private rooms, two two-room suites, and one three-room suite and total 1,793 square feet. The size of the rooms-suites ranges from 203 to 719 square feet or an average of 359 square feet (311 net square feet) per bed. Throughout the rest of the hospital, the net square footage per bed in a typical private room, semiprivate room, and a 17-bed open bay was 190, 103, and 98, respectively.

Cost of furnishings ranged from \$2,316 to \$8,071 for VIP beds. Typical furnishings provided other patients cost from \$643 to \$1,513 per bed (See app IV, pp. 83 to 90.) In addition, the suites contain other items which were gifts to the hospital

For security reasons, we were not permitted to photograph the VIP suite

The nursing unit is staffed only when scheduled for use. From July 1 through September 30, 1973, the occupancy rate for the VIP suites was 50 percent. As shown in the following tables, the ratio of nursing service to patients was high when compared with the rest of the hospital primarily because of the limited number of beds and the low occupancy rate<sup>1</sup>

Nursing staff to patient ratios for the VIP nursing unit

	<u>Day</u>	<u>Evening</u>	<u>Night</u>
Nurses	1 to 1.5	1 to 2	1 to 2
Aids	1 to .9	1 to 2	1 to 2

Nursing staff to patient ratios for all other nursing units

Nurses	1 to 11.5	1 to 18.3	1 to 22.9
Aids	1 to 5.3	1 to 10.2	1 to 13.1

The patients using the VIP suites from July 1 through September 30, 1973, and their length of stay were as follows:

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<sup>1</sup>  
The ratios were computed for 1 representative day each month for the 3-month period

<u>Category</u>	<u>Days hospitalized</u>
U.S. Senator	20
U.S. Senator	4
General	13
General	2
Retired general	20
Retired general	8
Dependent of general	17
Dependent of general	4
Dependent of general	3
Dependent of general	1
Dependent of retired general	6
Dependent of retired general	4
Dependent of retired general	<u>3</u>
Total	<u>105</u>

In addition, the ward was used to give physical examinations to 21 VIPs on an outpatient basis during this 3-month period. When we visited the hospital in November 1973, the Vice President of a foreign nation, a U.S. Senator, and a dependent of a Deputy Cabinet member were occupying the VIP suites.

A new hospital is under construction at Walter Reed and is scheduled to include a VIP suite containing five private bedrooms with private baths, a kitchen, dining room-lounge, doctor's office, nurses' station, treatment room, consultation room, medical utility room, and medical closet. The bedrooms will each contain 490 square feet and the other rooms will contain a total of 2,280 square feet.

#### CONCLUSIONS

DOD should determine whether there is a need for other VIP accommodations in military hospitals. Further, if DOD determines there is a need, it should develop criteria for establishing and furnishing them. The military departments presently leave the decisions on establishment and furnishings to the discretion of hospital commanders.

The responses we obtained from hospital commanders concerning VIP suites showed that the positions of individual hospital commanders varied considerably with respect to the definition of a VIP, the size and furnishings of VIP suites, and the number of beds maintained for VIPs

During our visits to hospitals that had beds which could be used by VIPs, we found differences in hospital practices concerning VIP accommodations. In some hospitals, the VIP furnishings, decor, and staffing were the same as the remainder of the hospital, while other hospitals had much more elaborate VIP accommodations and higher staff to patient ratios than the remainder of the hospital.

### RECOMMENDATIONS

We recommend that the Secretary of Defense determine whether there is a need for other VIP accommodations in military hospitals. If there is such a need, then he should develop criteria for establishing and furnishing them, including,

- the definition of a VIP,
- the circumstances justifying VIP accommodations,
- the size and number of rooms which should be established,
- the furnishings which should be provided, and
- the staffing requirements for VIP suites.

## CHAPTER 4

### ENFORCEMENT NEEDED TO INSURE DISCONTINUANCE OF SEPARATE OFFICER AND ENLISTED PERSONNEL ACCOMMODATIONS

DOD and the military departments' space planning criteria do not provide for separate officer and enlisted personnel accommodations. The DOD space planning criteria for nursing units provides only that a separate nursing station and related facilities be established for every 20 to 40 medical-surgical, psychiatric, and pediatric beds.

Our review at two Air Force and five Army hospitals showed officer and enlisted patients were assigned to nursing units on the basis of their medical needs, such as surgical patients to a surgical unit and medical patients to a medical unit. However, at the four Navy hospitals we visited, officer and enlisted patients were assigned to separate nursing units because of Navy tradition.

The four Navy hospitals which separated officers from enlisted personnel generally provided

- more space to officers,
- more expensive furnishings to officers, and
- a higher ratio of nursing staff to officers.

Air Force and Army headquarters representatives said they do not maintain separate officer and enlisted personnel nursing units in their hospitals. Navy headquarters representatives said the decision to establish separate officer and enlisted personnel nursing units is made by the hospital commanders.

DOD space planning criteria, effective August 1973, eliminates open bays and provides that new hospitals will consist of one-, two-, and four-bed rooms. A DOD representative said that DOD is opposed to the practice of separating officer and enlisted personnel and that it would not approve

the construction of separate nursing units. DOD, however, has not instructed the military departments to prohibit the separation of officer and enlisted patients in their hospitals.

Following is a discussion of two of the four Navy hospitals we visited. A discussion of the other two is included as appendix V.

NATIONAL NAVAL MEDICAL CENTER  
BETHESDA, MARYLAND

Our review at this hospital was limited to the five officer and nine enlisted nursing units devoted to medical and surgical care. The hospital also has one officer and dependent psychiatric unit and two enlisted psychiatric units.

The officer nursing units consisted of 60 private and semiprivate rooms containing 93 beds and totaling about 9,250 net square feet, an average of 97 net square feet per patient. Each enlisted unit consists primarily of open bays and averages 2,471 net square feet and 29 beds, or about 84 net square feet per patient. The enlisted units each have two quiet rooms used by patients who need them most and a 325 square foot lounge.

The photographs on pages 33 to 35 show typical officer and enlisted patient areas.

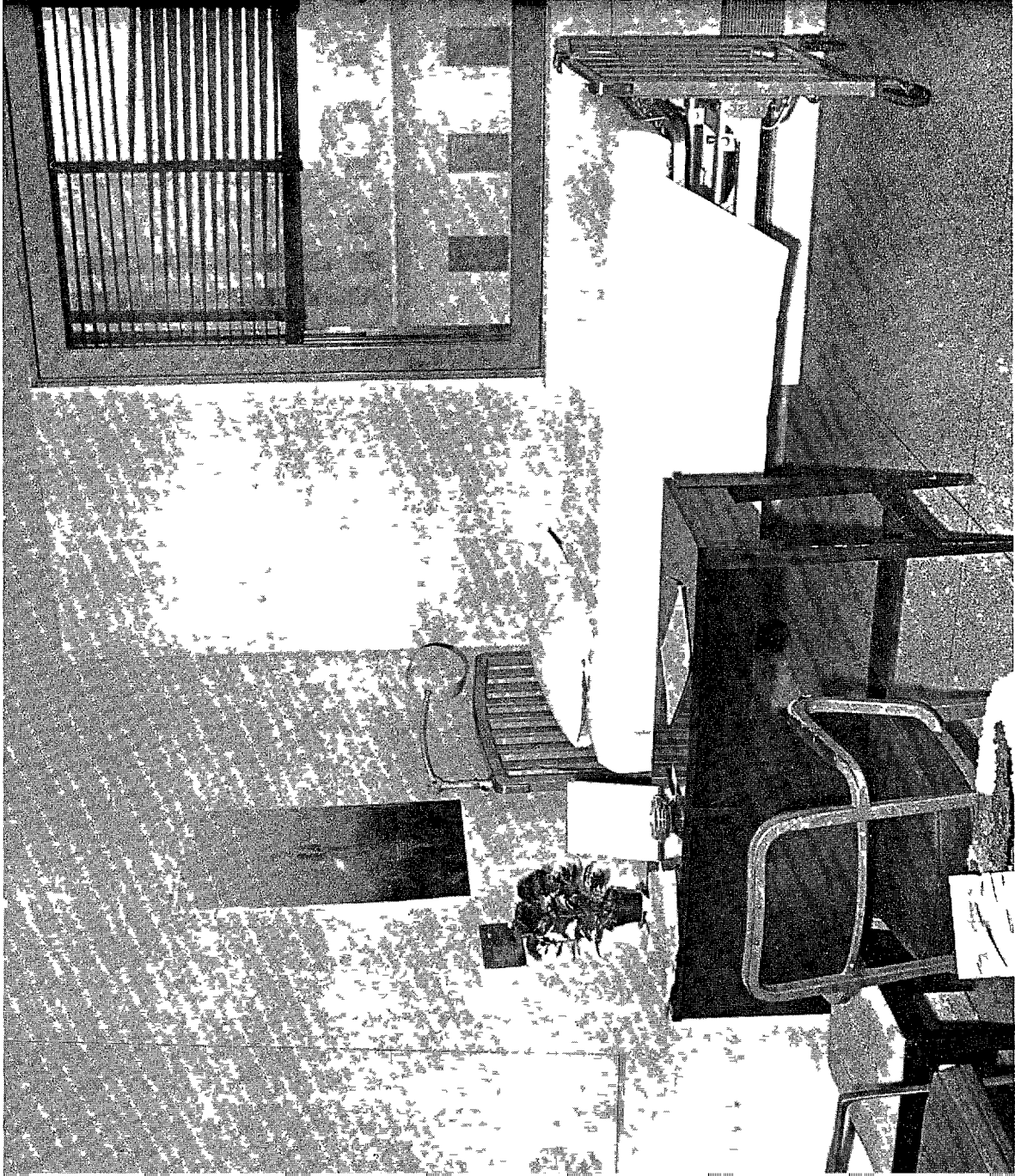
Furnishings for officers cost \$707 for a typical private room and \$929 for a typical semiprivate room. Typical furnishings provided enlisted personnel cost \$270 per bed. (See app. VI, p. 99.)

From August 1 through September 30, 1973, the occupancy rates for the officer and enlisted nursing units averaged 83 and 80 percent, respectively. The ratio of nursing staff to patients for officers was high compared with enlisted personnel as follows:

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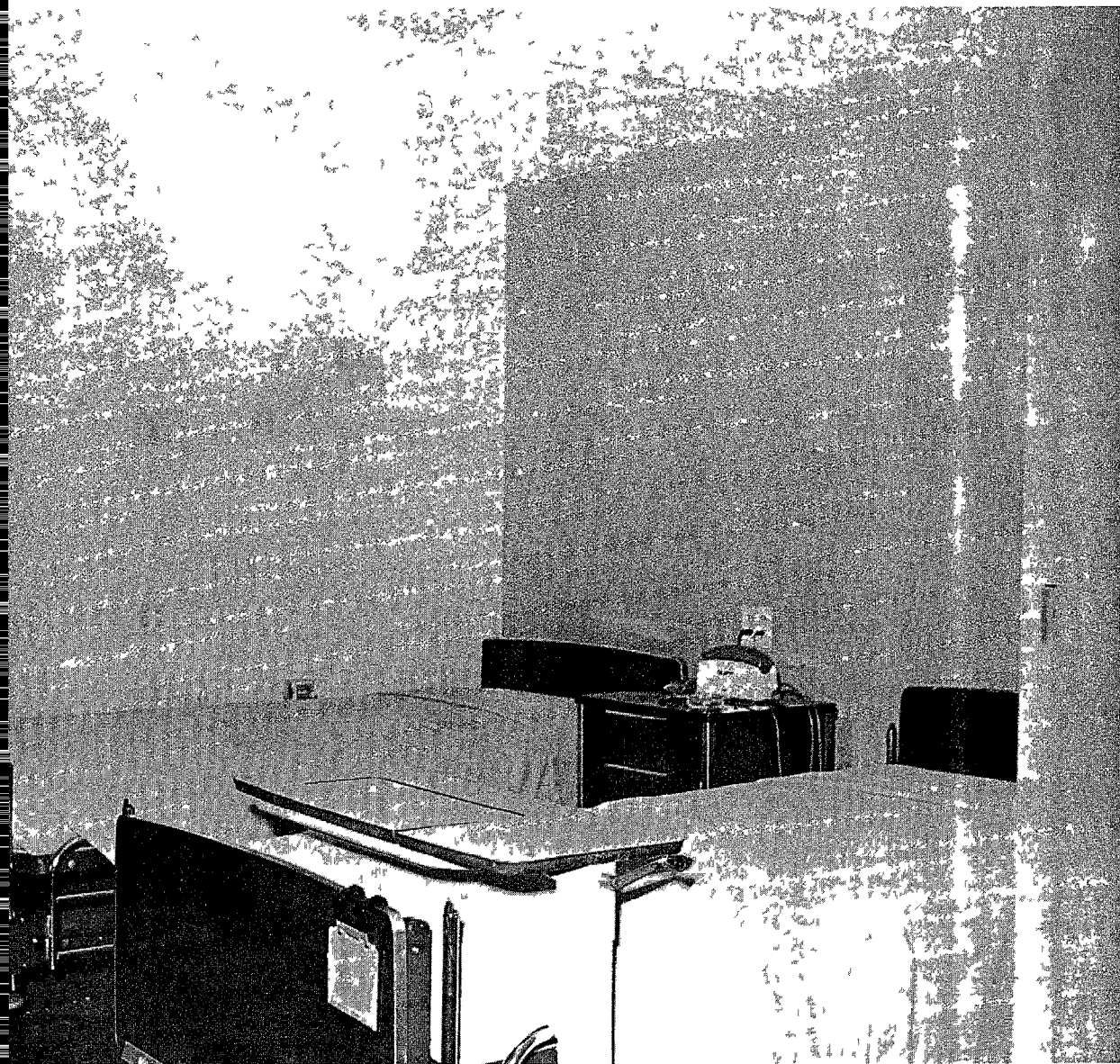
<sup>1</sup> The ratios were computed for 1 representative day each month for the 2-month period.





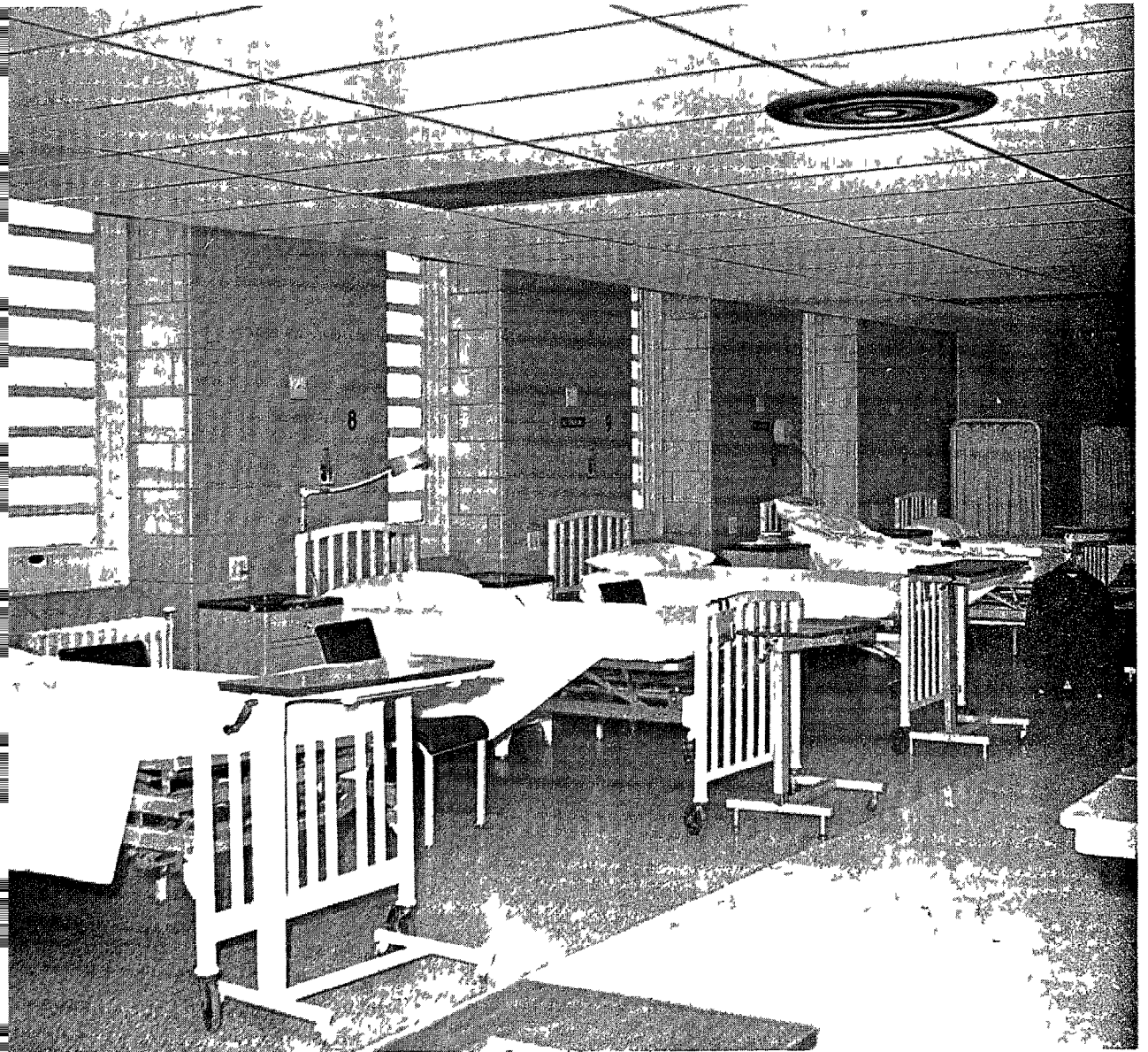
U S Navy photo

**NATIONAL NAVAL MEDICAL CENTER  
BETHESDA, MARYLAND  
TYPICAL PRIVATE ROOM FOR OFFICERS**



NATIONAL NAVAL MEDICAL CENTER  
BETHESDA, MARYLAND  
TYPICAL SEMIPRIVATE ROOM FOR OFFICERS

U S Navy photo



U S Navy photo

NATIONAL NAVAL MEDICAL CENTER  
BETHESDA, MARYLAND  
TYPICAL ENLISTED PERSONNEL OPEN BAY

Nursing staff to patient ratios  
for the officer nursing units

	<u>Day</u>	<u>Evening</u>	<u>Night</u>
Nurses	1 to 14	1 to 30 7	1 to 45.8
Aids	1 to 4.2	1 to 7.2	1 to 9.0

Nursing staff to patient ratios  
for the enlisted nursing units

Nurses	1 to 29.1	1 to 47 8	1 to 99.5
Aids	1 to 6.8	1 to 15.8	1 to 15.1

NAVAL REGIONAL MEDICAL CENTER  
CAMP LEJEUNE, JACKSONVILLE, NORTH CAROLINA

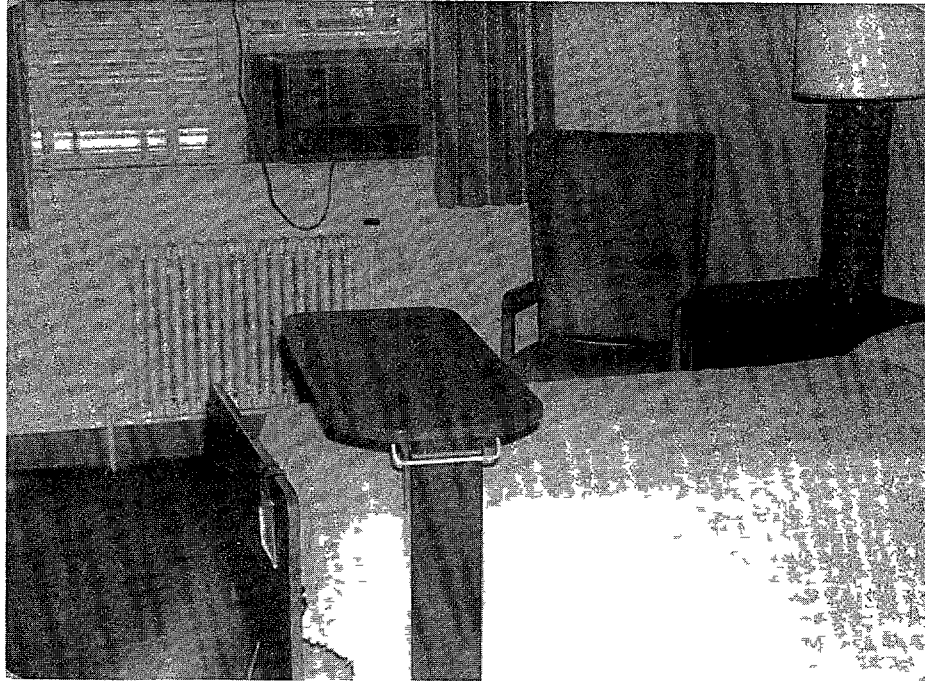
The hospital has an officer nursing unit containing 14 private and 2 semiprivate rooms. The rooms vary in size from 154 to 303 net square feet and average 148 net square feet per patient.

The hospital maintains 7 nursing units for enlisted personnel. Each unit consists primarily of an open bay and averages 3,752 net square feet and 47 beds, or about 80 net square feet per patient. Each nursing unit has two to four quiet rooms used by patients who need them most or, when available, by senior noncommissioned officers. The photographs on pages 37 to 39 show typical officer and enlisted patient areas.

The officer nursing unit was refurbished in 1972 for the returning prisoners of war at a cost of \$54,800. Of this amount, \$34,600 was spent for furnishings and \$7,300 for painting. Typical furnishings provided in the officer nursing units cost \$906 per bed, whereas typical furnishings in the enlisted nursing units ranged from \$303 to \$648 per bed. Also, furnishings in the officer lounge and a typical enlisted lounge cost \$2,652 and \$911, respectively. (See app VI, p 101 )

The officer nursing unit is served by a nursing station which also serves the female dependent unit. From July 1 through August 31, 1973, the occupancy rate for the officer

NAVAL REGIONAL MEDICAL CENTER  
CAMP LEJEUNE  
JACKSONVILLE, NORTH CAROLINA

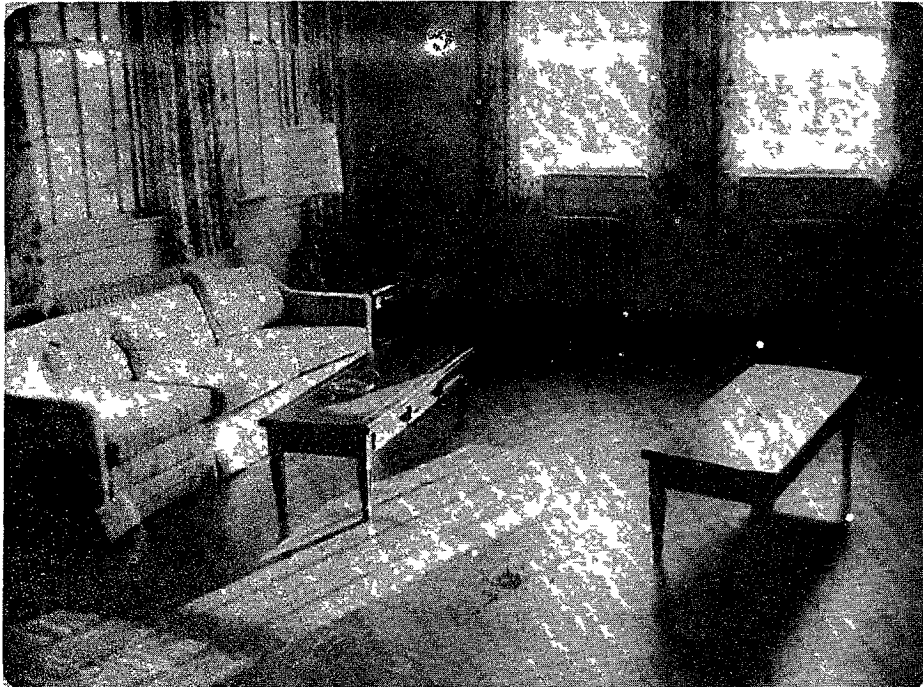


U S Navy photo

TYPICAL OFFICER ROOM

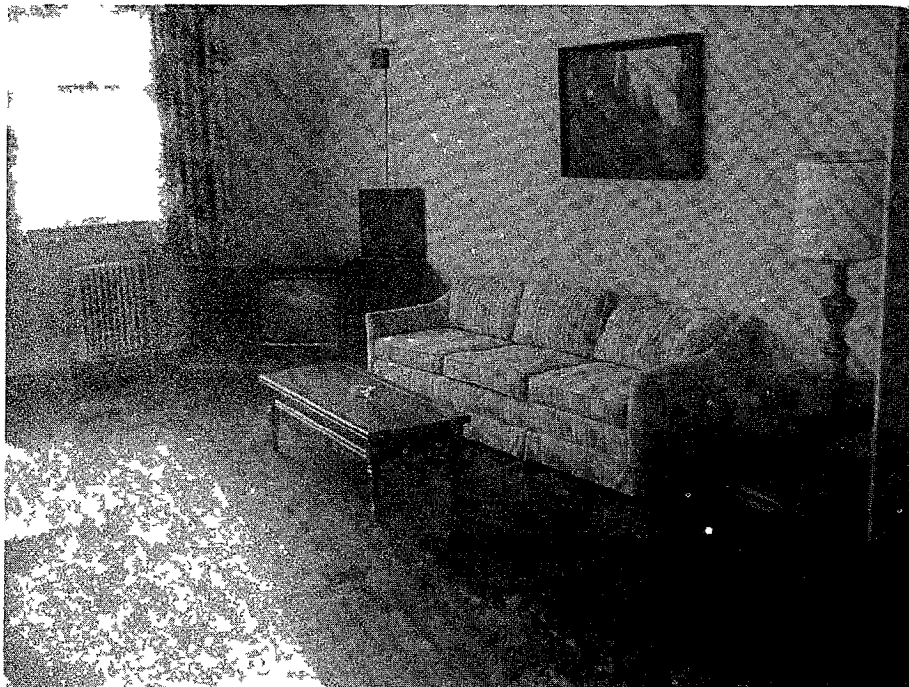


NAVAL REGIONAL MEDICAL CENTER  
CAMP LEJEUNE  
JACKSONVILLE, NORTH CAROLINA



U S Navy photo

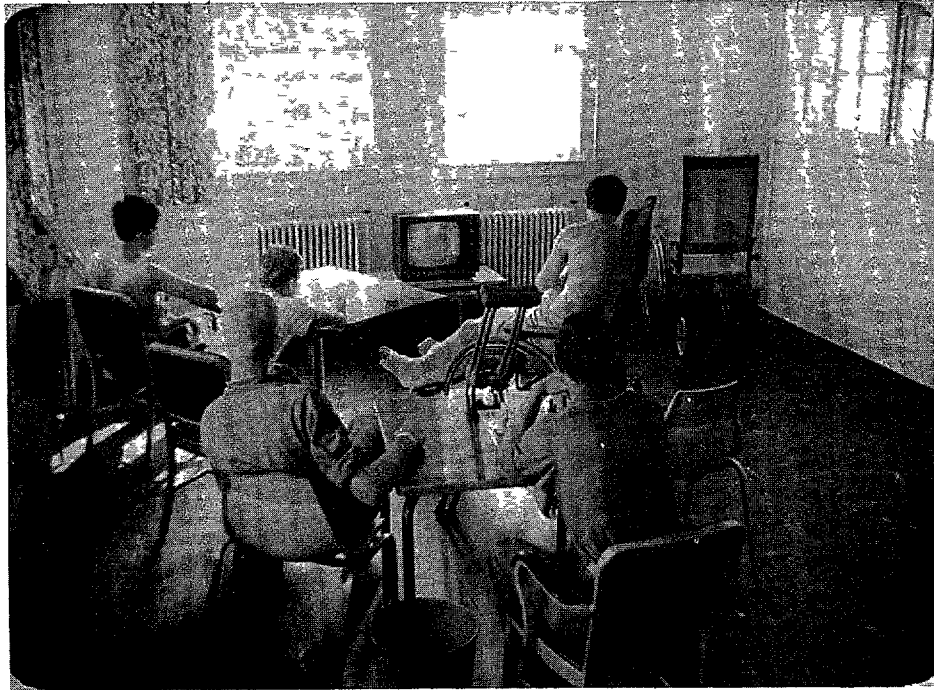
OFFICER LOUNGE



U S Navy photo

OFFICER LOUNGE

NAVAL REGIONAL MEDICAL CENTER  
CAMP LEJEUNE  
JACKSONVILLE, NORTH CAROLINA



U S Navy photo

**TYPICAL ENLISTED PERSONNEL LOUNGE**

and female nursing units was 39 percent. Occupancy averaged 49 percent for the enlisted nursing units during this same period. The ratio of nursing staff to patients in the officer and female dependent units was higher than the enlisted units as follows:<sup>1</sup>

Nursing staff to patient ratios  
for the officer and female dependent units

	<u>Day</u>	<u>Evening</u>	<u>Night</u>
Nurses	1 to 5.6	1 to 14	1 to 14
Aids	1 to 2.3	1 to 5.6	1 to 7

Nursing staff to patient ratios  
for the enlisted units

Nurses	1 to 24.3	1 to 79	1 to 63.2
Aids	1 to 5.2	1 to 12.2	1 to 15.8

We discussed the reasons for the wide difference in the staffing of officer and enlisted nursing units with Navy officials. We were advised that it is not the Navy's policy to staff officer nursing units differently from enlisted personnel nursing units. They said staffing ratios may differ for the following reasons:

"a Certain wards [nursing units] are made up of single and double rooms, while other wards are open, with ready visibility of all patients. It has been documented in the New Generation of Hospitals Study that single and double room wards require approximately 50% more staffing than open wards.

"b Regardless of the size of a ward, be it large or small, each ward requires the presence of at least one nurse on the a.m. shift. However, as patient care activity decreases, one nurse may cover two or more wards on other shifts

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<sup>1</sup>/The ratios were computed for 1 representative day each month for the 2-month period



"c The physical arrangement of the facility greatly affects staffing. Widely separated wards require more staffing than closely approximated wards

"d. Certain officer wards have both male and female patients. When there is a female officer patient, there must be a female nurse or corpswoman available to provide certain aspects of care

"e. Those wards with more elderly retired patients require more intensive professional care than do the young, normally healthy, active duty patients. It has been our experience that officer wards usually have more elderly patients than enlisted wards."

### CONCLUSIONS

DOD should advise the military departments that it is opposed to the practice of separating officer and enlisted personnel in military hospitals and require the military departments to advise all hospital commanders accordingly. At the four Navy hospitals we visited, this practice generally resulted in more space, more expensive furnishings, and a higher ratio of nursing staff being provided to officers. DOD space planning criteria, effective August 1973, provides that future hospitals will consist of one-, two-, and four-bed rooms. A DOD representative said DOD is opposed to the separation of officer and enlisted personnel and would not approve the construction of separate units. DOD has not, however, instructed the military departments to eliminate this practice in their existing or future hospitals.

### RECOMMENDATION

We recommend that the Secretary of Defense instruct the military departments to prohibit the separation of officer and enlisted personnel in their existing and future hospitals.

FURNISHINGS IN PRESIDENTIAL SUITES  
AND THEIR COST OR SOURCE

WALTER REED ARMY MEDICAL CENTER  
WASHINGTON, D C

Furnishings in the Presidential Suite

<u>Purchased with appropriated funds</u>	<u>Quantity</u>	<u>Total cost</u>
Lamps, various	14	\$ 935.20
Table, overbed	1	61.75
Bed, adjustable, hospital with mattress	1	610.00
Cabinet, bedside	1	323 02
Bureau	1	195.00
Chairs, various	14	2,428.40
Light, hospital bed, wall	1	88 41
Cigarette box, sterling silver	1	55.00
Highboy, nine-drawer	1	250.00
Loveseat	2	692.00
Sofa, Chippendale, one cushion	1	494 75
Tables, various	11	1,180.50
Fireplace ensemble with tongs, poker, brush	1	103 75
Carpet, Julianna Custom	148	
	sq yds.	4,588 00
Mirrors	3	273.00
Fender, hearth	1	175.00
Comforts, satin	2	<u>156 94</u>
Total		<u>\$12,610.72</u>

Purchased with appropriated funds (cost not available)

	<u>Quantity</u>
Draperies	8 pairs
Curtains, Rayon-acetate	7 pairs
Mirror, wall, without frame	1
Chair, hospital	1
Stool, straight, steel	1
Rug, white, bathroom, shag	1
Cabinet, bedside	1
Scale, bathroom	1
Receptacle, trash	3
Bedsread, antique satin	1
Table, two-drawer	1
Chair, Chippendale	2
Lamp, table, china with picture	1

## APPENDIX I

Furnishings in Other Areas Which Support  
The Presidential and Other VIP Suites

<u>Purchased with appropriated funds</u>	<u>Quantity</u>	<u>Total cost</u>
Lamps, various	11	\$ 457.55
Ottoman	5	388.00
Loveseat	3	801.00
Sofa	2	1,218.00
Tables, various	17	1,539.03
Cabinet, record	1	111.00
Loudspeaker assembly	4	131.08
Chairs, various	33	2,372.32
Desks	3	661.50
Mirrors	3	265.00
Credenza	1	375.00
Bookcase with two glass doors	1	157.00
TV, floor model, color	1	531.00
Stand, wood, triangular, three shelves	1	30.00
Box, planter, brass	2	33.00
Chandelier, bronze and crystal	1	300.00
Chaise lounge, wrought iron	1	161.00
Tray chair, wrought iron	1	56.40
Scance, wall, bronze and crystal	4	200.00
Drapes	(a)	2,840.00
Sheers	(a)	990.00
Carpet	(a)	1,220.00
Refrigerators	2	474.20
Freezer	1	271.20
Cabinet, refrigerated	1	271.20
Icemaker dispenser	1	323.00
Garbage disposal	1	286.00
Receptacle, waste	2	58.00
Toaster, four-slice	1	20.00
Waffle iron	1	22.95
Range, electric	1	437.50
Percolator, twelve-cup	1	21.00
Juicer, electric	1	11.40
Grinder, meat	1	29.95
Blender	1	32.50
Dishwasher	1	594.00
Opener, can, electric	1	71.30
Pitcher, vacuum, 1-quart, chrome-plated	6	118.20

## APPENDIX I

<u>Purchased with appropriated funds</u>	<u>Quantity</u>	<u>Total cost</u>
Tapewriter	1	\$34.95
Oven, microwave	1	754.17
Coffee, brewing system	1	285.50
Addressograph	1	34.60
Cabinet, utility	1	1,267.00
Silver service	2	336.00
Sterling silver service set	1	579.30
Silver tray	2	300.00
Server, marble top	1	300.00
Compote, sterling silver	2	172.00
Ladle, soup	1	55.00
Spoon, salad, serving	1	26.75
Pot, tea or coffee	10	420.00
Fork, serving	1	26.75
Table, anesthetist	2	93.30
Cabinet, medicine, with narcotic locker	1	362.00
Stop watch	1	22.99
EKG, Burdick	1	560.00
TV set, closed-circuit, with intercom and security cameras	2	<sup>b</sup> 1,432.56
Illuminator, X-ray, single film	1	20.30
Baumanometer, wall model, with velcro fastener and inflation system holder	1	43.43
Light, wall mounted	1	149.00
Wall transformer unit, two handles with cord	1	145.65
Table, diagnostic	1	724.00
Hope resuscitation	1	17.10
Rentsch cardiac press	1	145.00
Resuscitation aspirator, manual cycle	1	61.00
Cart, shopping, two baskets	1	53.50
File cabinet, steel	2	100.00
Bulletin board	1	12.00
Bookcase section, steel	1	19.35
Top, bookcase, steel	1	4.25
Dictionary	1	29.50
Closet, storage, metal	1	62.15
Typewriter, electric	1	411.00
Commode, folding	2	61.30
Bedpan, washer-sterilizer	1	1,087.75

APPENDIX I

<u>Purchased with appropriated funds</u>	<u>Quantity</u>	<u>Total cost</u>
Utensil, washer-sanitizer	1	\$1,467.75
Stand, surgical instrument	1	51.00
Cabinet, surgical instrument	1	251.00
Scale, physician's	1	68.90
Lockers	2	149.95
Cabinet, storage, steel	1	42.00
Humidifier	1	76.50
Receptacle, waste	1	29.00
Frame, basket, laundry	1	38.00
Stand, office	1	15.60
Rug	1	40.00
Stand, irrigator (IV pole)	3	83.70
Wheelchair	2	118.00
Hamper, linen	1	27.50
Total		<u>\$30,548.33</u>

<sup>a</sup>Not available.

<sup>b</sup>Total cost for 5-year lease period.

<u>Purchased with appropriated funds</u> (Cost not available)	<u>Quantity</u>
Chair, wrought iron	1
Table, coffee	1
Desk	1
Cabinet storage	2
Cabinet wall	1
Intercom master control, twelve button	1
Mixers	2
Breadbox, metal	1
Hotplate, electric, four-burner	1
Opener, can, electric, with knife sharpener	1
Knife, electric, carving	1
Clocks	4
Scale, dietetic	1
Lenox china (purchased around 1969)	(set of 12)
Fostoria crystal (purchased around 1969)	(set of 12)

<u>Purchased with appropriated funds</u> (Cost not available)	<u>Quantity</u>
Spaceheater, electric	1
Pad, heating	1
Table, card, folding	2
Stools	4
Lantern	2
Leaves, table (for dining room)	3
Pad, felt (for dining room)	3
Cardiac arrest board (plywood)	1
Base, bookcase, steel	1
Closet, clothing, metal	2
Bulletin board	1
Chair, hospital	1
Lamp, floor, examining, gooseneck, <u>metal</u>	1
Receptacles, waste	3
Ironing board, folding	1
Iron, steam	1

<u>Items on loan</u>	<u>Quantity</u>
Defibrillator and pacemaker mounted on cart with visoscope-sanborn (from coronary care unit)	1
Toaster, four-slice (from mess hall)	1
Ladder, aluminum	1
Buffer, floor	1
Cleaner, vacuum	1
Folding chair (from housekeeping department)	2

## GAO notes:

1. Other areas furnished include the east lounge, dining room, kitchen, nurses station, physician's office, exam room, wardmaster's office, utility room, custodian's room, linen closet, hallway, elevator, and exit.
2. In addition to the furnishings listed above, 183 items consisting of bric-a-brac, books, and paintings were donated by various individuals

APPENDIX I

BROOKE ARMY MEDICAL CENTER  
 FORT SAM HOUSTON, SAN ANTONIO, TEXAS

Furnishings in the Presidential Suite

<u>Purchased with appropriated funds</u>	<u>Quantity</u>	<u>Total cost</u>
Bedspread, king size	1	\$ 99.50
Blanket, king size	2	29.50
Chest	2	132.20
Drapes	11 pairs	1,076.60
Dresser	3	204.30
Bed	4	1,367.40
Pillow, king size	4	79.80
Table	18	1,341.25
Stool	3	69.00
Lamps	5	164.15
Chair, various types	24	1,909.12
Desk	5	755.70
Ottoman	3	192.66
Sofa	6	1,347.94
TV	2	342.00
Bowl, oriental	1	17.20
Bench	2	73.50
Water fountain	1	106.00
Receptacle, trash	2	51.40
Refrigerator	3	406.00
Sanitizer	1	720.00
Sterilizer	1	1,090.00
Cabinet	1	55.00
Dishwasher, oven, range, and sink	1 set	2,192.23
Silverware, flat, for eight	1 set	71.00
Toaster	1	65.00
Patio furniture, wrought iron		826.40
Carpet		<u>2,236.70</u>
Total		<u>\$17,021.55</u>

## APPENDIX I

<u>Acquisition and actual cost unknown</u>	<u>Quantity</u>	<u>Estimated cost</u>
TV, color	1	\$ 400.00
Clock, wall	2	55.00
Lamp	12	556.00
Picture	18	295.00
Telephone stand	2	24.00
Ash trays	18	122.00
Chair, various types	14	449.50
Room divider, Shoji screen	1	35.00
Bedspreads	5	100.00
Pillow	12	56.00
Bric-a-brac	-	23.00
Locker, wall	1	22.00
Bookcase	1	25.00
Kitchen small appliances	8	152.00
Kitchen utensils	-	96.00
China and glassware	-	338.00
Receptacle, trash	1	30.00
Miscellaneous items	-	<u>49.00</u>
Total		<u>\$2,827.50</u>



APPENDIX I

NAVAL REGIONAL MEDICAL CENTER  
 CAMP PENDLETON, OCEANSIDE, CALIFORNIA

Furnishings in the Presidential Suite

<u>Purchased with appropriated funds</u>	<u>Quantity</u>	<u>Total cost</u>
Conference table	1	\$ 340.00
Conference chairs	10	470.00
Sofa	2	650.00
Bookcase	1	80.00
Lounge chairs	7	1,012.50
Occasional chairs	13	1,002.00
Lamps	13	852.00
Tables	15	1,527.50
Chest	4	535.20
Headboards	4	307.20
Mirrors	2	131.20
Desk	6	1,094.60
Desk chairs	6	738.16
Wastebasket	14	86.35
Beds	6	3,083.50
Bedside cabinet	4	356.00
Bedspreads	6	456.66
Draperies	-	4,343.80
Carpeting	350 yds.	4,747.84
Refrigerator	2	569.95
Electric range	1	134.95
Pictures	27	175.46
Medicine cabinet	1	345.00
Vacuum cleaner	1	232.00
Window air conditioners	9	<u>1,579.05</u>
Total		<u>\$24,850.92</u>

NATIONAL NAVAL MEDICAL CENTER  
BETHESDA, MARYLAND

## Furnishings in the Presidential Suite

<u>Purchased with appropriated funds</u>	<u>Quantity</u>	<u>Total cost</u>
Chair	4	\$ 262.00
Couch	1	123.50
Desk	5	725.00
Telephone stand	1	30.00
Cabinets	2	924.00
Carts, dressing and I.V.	2	292.00
Examining table	1	229.00
Beds	3	2,300.00
Table, bedside	2	172.00
Table, overbed	2	240.00
Mirror	2	100.00
Table and lamp	2	74.00
Lamp, table	2	60.00
Chair and stool	2	240.00
Scale	1	45.00
X-ray view box	1	25.00
Suction machine	1	<u>119.00</u>
BIRD machine	1	396.00
TV, color	1	349.00
Under shelf refrigerator freezer	1	499.50
Electric range	1	459.00
Dishwasher	1	<u>250.00</u>
Total		<u>\$7,914.00</u>

GAO note. In addition to the furnishings listed above, 118 items are on loan from the White House Curator.

HOSPITAL COMMANDER RESPONSES  
CONCERNING OTHER VIP ACCOMMODATIONS

Hospitals Reporting Other VIP Beds

AIR FORCE

U.S. Air Force Regional Hospital, Maxwell AFB, Alabama

Commander's definition of VIP--Colonels and above.

Number of VIP beds maintained--Two (one on medical ward and one on surgical ward).

Description of VIP accommodations--VIP suites consist of bedroom, lounge, and shower room, 530 square feet per suite, each room carpeted and furnished. Bedroom furnished with an electric bed, a desk, and two easy chairs with ottoman. Lounges are furnished with sofa and two easy chairs. A phone jack is installed. The VIP suites were completed during August 1972, mostly from furnishings already on hand. No separate nursing station or additional staffing provided.

U.S. Air Force Hospital, Elmendorf AFB, Alaska

Commander's definition of VIP--General officers.

Number of VIP beds maintained--One.

Description of VIP accommodations--A single room with private bath, 208 square feet. Extra furnishings include carpet, small sofa, countertop refrigerator, clothes rack, and telephone. No separate nursing station or nursing staff is maintained.

U.S. Air Force Hospital, Vandenberg AFB, California

Commander's definition of VIP--Colonels and above, and hospital staff members.

Number of VIP beds maintained--One.

Description of VIP accommodations--Suite consists of one bed in one room with a private shower. Furnishings include reclining chair, floor lamp, dresser, table, and pictures.

U.S. Air Force Academy Hospital, Colorado

Commander's definition of VIP--Active duty and retired General officers in the Colorado Springs area and Colonels assigned to the U.S. Air Force Academy.

Number of VIP beds maintained--A suite consisting of a sitting room and a bedroom having two beds.

Description of VIP accommodations--437 square foot bedroom has private bath (as do all private rooms) and does not differ from regular patient rooms in nursing unit. Sitting room furnished with couch, desk, two chairs and telephone. There is no separate nursing station or additional nursing staff.

U.S. Air Force Hospital, Dover AFB, Delaware

Commander's definition of VIP--High ranking officers and others at the discretion of the medical staff.

Number of VIP beds maintained--One.

Description of VIP accommodations--202 square foot bedroom with a 38.5 square foot private bath (normal accommodations in hospital are 111 square foot bedroom and 33 square foot bath). Additional furniture provided and not found in other patient rooms is a desk, dresser with mirror, wardrobe, console TV, telephone, carpeting, and door on shower stall. There is no separate nursing station or additional nursing staff.

U.S. Air Force Hospital, Tyndall AFB, Florida

Commander's definition of VIP--Senior base officers and their dependents.

Number of VIP beds maintained--One.

Description of VIP accommodations--Room is one of four private rooms and contains no special furniture. Only difference from other rooms is that the VIP room is carpeted.

APPENDIX II

U.S. Air Force Medical Center, Scott AFB, Illinois

Commander's definitions of VIP--General officers and other distinguished visitors.

Number of VIP beds maintained--One.

Description of VIP accommodations--Suite consists of a sitting room, bedroom, and private bath. The facility differs in that there is a private sitting room and walls are paneled. Areas consist of 484 square feet. Decor in bedroom is wood paneled walls, occasional chair, bedside cabinet, and television. Sitting room contains refrigerator, serving cart, dining table with four chairs, desk with chair, coffee table, and two end tables with lamps and television. Floor is carpeted and windows are draped. There is no separate nursing station or special staffing provided.

Malcolm Grow U.S. Air Force Medical Center, Andrews AFB, Maryland

Commander's definition of VIP--Flag and General officers, and others in VIP status. Use by patients without VIP status as needed.

Number of VIP beds maintained--Nine.

Description of VIP accommodations--Ward consists of one three-room suite (702.7 square feet), with one room for patient care, one room for a work area, and one room for conferences, four two-room suites (359.2 square feet) with one room for patient care and one room for a work area. There are four single rooms, one bed in each room (222.5 square feet). Each unit has a private bath which is included in the floor area. Total patient care area square footage is 3,029.7. All patient care units are furnished with General Services Administration schedule furniture, although the furnishings cannot be classified as standard furnishings for military installations. Each patient care area is equipped with the following furnishings electric hospital bed, color television, carpeting, sofas, chairs, chandelier light fixture, and quilted bedspreads.

U.S. Air Force Hospital, Kirtland AFB, New Mexico

Commander's definition of VIP--Colonel and above or equivalents. Dependents of high level officials and dependents of active duty General officers and key staff Colonels.

Number of VIP beds maintained--One.

Description of VIP accommodations--Suite consists of one bed in one 180 square foot room with a 90 square foot shared bath. Furnishings include carpeting, a desk, two lounge chairs, a coffee table, an extra lamp, two pictures, and a telephone.

U.S. Air Force Hospital, Lockbourne AFB, Ohio

Commander's definition of VIP--Colonels and above.

Number of VIP beds maintained--One.

Description of VIP accommodations--Suite consists of one bed in one 249 square foot room with a private shower. Furnishings include drapes, carpet, custom furniture, electric bed, and TV.

U.S. Air Force Medical Center, Wright-Patterson AFB, Ohio

Commander's definition of VIP--Active duty Generals and Base Commanders.

Number of VIP beds maintained--Two.

Description of VIP accommodations--Suite consists of two rooms, one containing two patient beds, the other a private lounge. Furnishings include carpeting, drapes, hide-a-bed sofa, three lounge chairs, color TV, desk, assorted tables, lamps, and pictures. Suite has a total of 600 square feet.

APPENDIX II

Wilford Hall U.S. Air Force Medical Center,  
Lackland AFB, Texas

Commander's definition of VIP--Active duty officers in grades of Brigadier General through General and retired General (four-star) officers.

Number of VIP beds maintained--Four.

Description of VIP accommodations--Suite consists of four beds, two in one room and one each in two additional rooms. Rooms are 248, 242, and 235 square feet, respectively. Each room has a 60 square foot bathroom. A 200 square foot lounge is shared by the three rooms. Decor is modest. There is no carpeting. Furniture is like that used in other patient rooms. Extra furnishings include color TV, small refrigerator in lounge, reading lamps, curtains, and lounge chairs.

U.S. Air Force Hospital, Langley AFB, Virginia

Commander's definition of VIP--Senior officers.

Number of VIP beds maintained--Two.

Description of VIP accommodations--VIP rooms established December 1969 by converting two semiprivate rooms into single-bed rooms and adding a shower to each. (Cost of renovations was \$4,784 per room.) Rooms are 231 square feet each (our review determined actual square footage to be 217) and include the following extra furnishings--color TV, bedside chest, lounge chairs, table lamps, desk, end table, and carpeting. Further, one room has a direct line telephone to the Tactical Air Command switchboard, and both rooms have a telephone for incoming calls only. No additional staffing or separate nursing station is provided

U.S. Air Force Hospital, Wiesbaden, Germany

Commander's definition of VIP--Ambassadors, Department of State officials, and other personnel of commensurate rank.

Number of VIP beds maintained--Three.

Description of VIP accommodations--VIP rooms occupy a total of 955 square feet and differ from other rooms in that two are carpeted, all have private baths and capability for installation of a telephone. There is no separate nursing station or additional staffing established for these rooms.

U.S. Air Force Hospital, Clark AFB, Philippines

Commander's definition of VIP--Senior military officers, high level State Department officials, and high level foreign officials.

Number of VIP beds maintained--One.

Description of VIP accommodations--The suite contains a three-piece rattan settee, three easy pullup chairs, one electrical retractable bed, one rattan coffee table, one matching desk and chair, two table lamps, one bedside metal stand, one TV and stand, one rattan corner table, curtains, carpeting for the patient and reception rooms, and one telephone. Excluding the carpeting and settee, the decor of the VIP suite is identical to that of other patient facilities. There is no special nursing station or additional staffing provided.

GAO note: Although VIP beds in the above Air Force hospitals are normally held for primary use of persons in VIP status, all above facilities report that they are released for use of other patients as needed.



ARMY

Letterman Army Medical Center, California

Commander's definition of VIP--The President, Vice President, or other political or military individual whose medical condition would warrant a semisecluded area.

Number of VIP beds maintained--Two.

Description of VIP accommodations--Two suites have been designated; each consists of a bedroom, patient care area, and sitting room. Each suite is 320 square feet. Furnishings include three chairs, sofa, desk, dresser drawer, coffee table, lamp, and telephone. One suite has cardiac monitoring equipment, oxygen apparatus, and suction equipment. No special staffing or nursing station is provided.

Walter Reed Army Medical Center, Washington, D.C.

Commander's definition of VIP--U.S. Senator, cabinet member, active duty generals and their dependents, retired generals, foreign presidents and their dependents, current and former Chief Justices, Associate Justices of the Supreme Court, Secretaries and Under Secretaries of the Office of the Secretary of the Army and Office of Secretary of Defense.

Number of VIP beds maintained--Five.

Description of VIP accommodations--The five patient rooms contain a total of 1,793 square feet. Two of the rooms have adjoining sitting rooms and are furnished with sofas, chairs, tables, and lamps. The ward (Presidential suite and VIP rooms) has a separate nursing station which is staffed only when needed.

Tripler Army Medical Center, Hawaii

Commander's definition of VIP--High level civilian Government officials, (e.g., a member of the Presidential party, the Premier of Cambodia) or military personnel equivalent to a four-star general.

Number of VIP beds maintained--Three.

Description of VIP accommodations--The two VIP suites differ from other medical facilities at Tripler in that they are larger, have more furniture, and are more elaborately decorated. One suite has 912 square feet of space. It has a small entrance-way with closet, large living room area, bedroom, large walk-in closet, and toilet. The living room area is fully carpeted, has drapes, a desk with chair, telephone, small table with four chairs, sofa, three overstuffed chairs, air conditioner, black and white television set, three paintings, a coffee table, and two end tables with lamps. The bedroom has a hardwood floor with two throw rugs, an electrically operated patient bed, patient call system, drapes, two chests of drawers, two overstuffed chairs, an air conditioner, two lamps, and a bedside stand with telephone. The large walk-in closet has a small refrigerator, utility cart, and miscellaneous medical supplies.

The other suite has 636 square feet of space. It has a small entrance-way with closet, large living room area, bedroom with closet, and a toilet. The closet off the entrance-way has a small refrigerator, utility cart, ironing board, and a large area for hanging clothes. The living room is fully carpeted, has drapes, four overstuffed chairs, a desk with chair, telephone, sofa, coffee table, two end tables with lamps, small table with four chairs, three paintings, a black and white television set, and an air conditioner. The bedroom has two beds, a bedside stand with telephone, patient call system, chest of drawers, hardwood floor with two throw rugs, two overstuffed chairs, three paintings, an air conditioner, and drapes.

These suites do not have medical equipment nor medical staffing when vacant. These two elements are activated when the command receives word that a VIP may be a patient at Tripler. A nursing station can be established within the suites.

Irwin Army Hospital, Fort Riley, Kansas

Commander's definition of VIP--Lieutenant Colonel (05) and above.

Number of VIP beds maintained--One

Description of VIP accommodations--Suite consisting of bedroom, sitting room, and private bath, totaling 310 square feet. Room is furnished with electric bed, bedside cabinet, drapes, bedside light, floor light, wall pictures, carpet, overbed table with mirrors, wardrobe, three chairs, davenport, desk, two table lights, three occasional tables, and chest of drawers. No special staffing or nursing stations are provided.

U.S. Army Hospital, Fort Campbell, Kentucky

Commander's definition of VIP--Colonel and above.

Number of VIP beds maintained--One

Description of VIP accommodations--One room totaling 312 square feet and including carpet, TV, phone, writing table, electronic bed, air conditioner, wall pictures, and drapes. No special staffing or nursing stations are provided.

Walson Army Hospital, Fort Dix, New Jersey

Commander's definition of VIP--Colonel or above and their families and designees of the Secretary of the Army.

Number of VIP beds maintained--Two.

Description of VIP accommodations--Two rooms each having 225 square feet. Furnishings include desk, phone, easy chair, TV, carpet, and drapes. No special staffing or nursing station is provided.

Valley Forge General Hospital, Pennsylvania

Commander's definition of VIP--Colonel and above, Lieutenant Colonel assigned to the hospital, adult dependents of Colonels assigned to the hospital, adult dependents of General officers, Congressmen and immediate families, and ranking civilian officials of the Departments of the Army and Defense.

Number of VIP beds maintained--Two

Description of VIP accommodations--Two private rooms; one with 216 square feet and the other with 315 square feet. Rooms are furnished with private bath, TV, lounge chair, private closet, desk, cardiac monitor, and carpets. No special staffing or nursing stations are provided.

Brooke Army Medical Center, Fort Sam Houston, Texas

Commander's definition of VIP--Active or retired flag officers, foreign service officers, and personnel of ambassadorial rank, providing the suite is not occupied by another patient.

Number of VIP beds maintained--One.

Description of VIP accommodations--A suite consisting of a bedroom, sitting room, and private bath, totaling 486 square feet. Extra furnishings include a TV, writing desks, lounge chairs, sofa, coffee table, table lamps, end tables, and carpeting. There is no separate nursing station or staffing for the suite.

196th Station Hospital, Shape, Belgium

Commander's definition of VIP--Three- and four-star general officers and ambassador level civilians.

Number of VIP beds maintained--One.

Description of VIP accommodations--One room containing extra furnishings of carpet, lounge chairs, TV, and telephone, totaling 275 square feet. The commander's

## APPENDIX II

room assignment policy is that it is reserved solely for VIPs except when a very seriously ill or seriously ill patient needs it. There is no separate staffing for the room.

### 30th Field Hospital, Augsburg, Germany

Commander's definition of VIP--Hospital staff and their dependents and Lieutenant Colonels and above and their dependents.

Number of VIP beds maintained--One.

Description of VIP accommodations--One room containing extra furnishings of a night stand and private bath, totaling 225 square feet. The commander's room assignment policy is that it is not reserved solely for VIPs and is used as medically necessary. There is no separate staffing for the room.

### 5th General Hospital, Bad Cannstatt, Germany

Commander's definition of VIP--Colonel and above, and civilians of equivalent rank.

Number of VIP beds maintained--Two.

Description of VIP accommodations--Two rooms each containing extra furnishings of a sofa, armchair, coffee table, window drapes, and private bath. One of the rooms totals 556 square feet, while the other totals 653 square feet. The commander's room assignment policy is that two beds are put in each room when medically necessary. There is no separate staffing for the rooms.

### 56th General Hospital, Bad Kreuznach, Germany

Commander's definition of VIP--Senior officers or high level Government officials.

Number of VIP beds maintained--One.

Description of VIP accommodations--One room containing extra furnishings of a couch, two chairs, coffee table,

chest of drawers, table lamp, private sink, and rug, totaling 400 square feet. The commander's room assignment policy is that it is used for VIPs and hospital staff. There is no separate staffing for the room.

97th General Hospital, Frankfurt, Germany

Commander's definition of VIP--Colonel and above and civilians of equivalent rank

Number of VIP beds maintained--One

Description of VIP accommodations--One room containing extra furnishings of an electric bed, dresser, radio, two night stands, four occasional chairs, three rugs, two end tables, coffee table, desk with chair, and private bath, totaling 433 square feet. The commander's room assignment policy is that it is used solely for VIP use. There is no separate staffing for the room.

130th Station Hospital, Heidelberg, Germany

Commander's definition of VIP--General officers and equivalent civilian employees, Members of Congress, and official visitors to Headquarters, U. S. Army, Europe and U. S. Army Theater Army Support Command, Europe

Number of VIP beds maintained--Four

Description of VIP accommodations--The four rooms contain no extra furnishings. The rooms total 179, 186, 255, and 255 net square feet of space. The commander's room assignment policy is that they are used solely by VIPs. There is no separate staffing for the rooms.

2nd General Hospital, Landstuhl, Germany

Commander's definition of VIP--General officer, senior Colonels, distinguished officials and their dependents.

Number of VIP beds maintained--Five

Description of VIP accommodations--

Room 1

Consists of a bedroom, sitting room, and private bath, totaling 284 square feet. Extra furnishings include an electric bed, floor lamp, chest of drawers, two chairs, sofa, coffee table, and desk with chair.

Room 2

Consists of a bedroom, sitting room and private bath, totaling 390 square feet. Extra furnishings include a hi-low bed, TV, chest of drawers, bookcase, sofa, two chairs, desk with chair, coffee table, two end tables, and rug.

Room 3

Consists of a bedroom, sitting room, and private bath, totaling 390 square feet. Extra furnishings include an electric bed, TV, sofa, four chairs, coffee table, two end tables, desk with chair, chest of drawers, bookcase, rug, and private telephone.

Room 4

Consists of a bedroom, sitting room, and private bath, totaling 297 square feet. Extra furnishings include a hi-low bed, TV, sofa, and chair.

Room 5

Consists of a bedroom, sitting room, and private bath, totaling 306 square feet. Extra furnishings include an electric bed, TV, sofa, four chairs, desk with chair, coffee table, and dresser.

The commander's room assignment policy is that the rooms are solely used by VIPs except Room 3 which is also used for very seriously ill and seriously ill patients. There is no separate staffing for the rooms.

33rd Field Hospital, Wurzburg, Germany

Commander's definition of VIP--Colonel and above.

Number of VIP beds maintained--One.

Description of VIP accommodations--One room with a private bath, totaling 192 square feet. Extra furnishings include an extra wardrobe and a desk easy chair. The commander's room assignment policy is that it is used solely for VIPs. There is no separate staffing for the room.

45th Field Hospital, Vicenza, Italy

Commander's definition of VIP--Colonel and above, senior Government officials, Department of Army civilians, and dependents of the above.

Number of VIP beds maintained--Two.

Description of VIP accommodations--Each of the two rooms contains extra furnishings of a dresser, bedside table, easy chair, floor lamp, and drapes. Also, the square footage of each room is 115 square feet. The commander's room assignment policy is that they may be used by any patient with a medical need for privacy. There is no separate staffing for the room.

U. S. Army Hospital, Camp Zama, Japan

Commander's definition of VIP--Enlisted personnel in the rank of E-9, Colonels and their civilian equivalent, and others as designated by the hospital commander

Number of VIP beds maintained--One.

Description of VIP accommodations--One room with bath totaling 342.5 square feet. Extra furnishings include panelling, indoor-outdoor carpeting, recliner-rocking chair, chest of drawers, pole lamp, and floor lamp. There is no separate nursing station or staffing for the room.



APPENDIX II

NAVY

Naval Regional Medical Center, Long Beach, California

Commander's definition of VIP--A member of uniformed services of flag rank and civilian officials of comparable standing.

Number of VIP beds maintained--Two designated (have been used for routine patient care as need for space arises).

Description of VIP accommodations--Private rooms of 210 square feet, one with private toilet and shower and one with private toilet only, and a telephone in each. No other unusual furnishings.

Naval Regional Medical Center, San Diego, California

Commander's definition of VIP--Priority one, any commanding officer of a major command ashore or afloat. Priority two, retired flag officers.

Number of VIP beds --11

Description of VIP accommodations--Private rooms of 120, 168, 192 (6 rooms), 208 (2 rooms), and 210 square feet. One room has a private bath and two have adjoining baths. All rooms have electric beds, carpets, and drapes, nine have TVs and five have telephones. No other unusual furnishings and no special equipment unless needed.

Naval Hospital, Key West, Florida

Commander's definition of VIP--No definition given.

Number of VIP beds--One.

Description of VIP accommodations--Rooms consist of a bedroom with 222 square feet and a connecting room having 173 square feet furnished as a sitting room.

Naval Regional Medical Center, Great Lakes, IllinoisCommander's definition of VIP--Captain and aboveNumber of VIP beds--Two.Description of VIP accommodations--Private rooms of 270 square feet each with private bath and telephone. No other unusual furnishings.Naval Hospital, Saint Albans, New YorkCommander's definition of VIP--Flag officer or senior staff personnel.Number of VIP beds--Two.Description of VIP accommodations--Private rooms of 150 square feet each with window air conditioners, carpeting, electric beds, curtains, pictures, and chandelier.Naval Regional Medical Center, Camp Lejeune, North CarolinaCommander's definition of VIP--Flag officers and dignitaries.Number of VIP beds--One.Description of VIP accommodations--Private room having 227 square feet (our review determined actual square footage to be 259), with private bath and telephone.Naval Regional Medical Center, Philadelphia, PennsylvaniaCommander's definition of VIP--Active duty and retired officers colonel and above--but may be used by any officer if available.Number of VIP beds--Two.Description of VIP accommodations--Private rooms with adjoining baths. Each room has a telephone and TV No other unusual furnishings

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Naval Regional Medical Center, Newport, Rhode Island

Commander's definition of VIP--Senior officer and staff officers.

Number of VIP beds--One.

Description of VIP accommodations--Private room of 180 square feet, adjoining bath, telephone, and color TV. No other unusual furnishings.

Naval Hospital, Beaufort, South Carolina

Commander's definition of VIP--Senior officers or high-level civilian officials.

Number of VIP beds--One.

Description of VIP accommodations--Suite of two rooms of 383 square feet with bath, telephone, sitting room, carpet, and drapes.

Naval Hospital, Quantico, Virginia

Commander's definition of VIP--Captain, U.S. Navy; Colonel, U.S. Marine Corps, or higher

Number of VIP beds--One.

Description of VIP accommodations--Private room of 195 square feet with private bath, telephone, and TV. No other unusual furnishings.

Naval Hospital, Naples, Italy

Commander's definition of VIP--Colonel and above and State Department personnel of equal precedence

Number of VIP beds--One.

Description of VIP accommodations--Private room of 100 square feet and private bath. The room is painted in a pastel shade and its two windows have decorative draperies. The decor is completed with an oil painting and a colorful spread

Naval Hospital, Yokosuka, Japan

Commander's definition of VIP--Senior officers and high-level officials.

Number of VIP beds--One.

Description of VIP accommodations--Private room of 168 square feet with telephone. No other unusual furnishings.

APPENDIX II

Hospitals Reporting No VIP Beds but Having Beds  
That Could be Used for the Same Purpose

AIR FORCE

David Grant U.S. Air Force Medical Center, California

Commander's definition of VIP--Not given.

Number of beds that could be used--Two.

Description of accommodation--Two private rooms of approximately 100 square feet each which share one bath. Rooms do not differ significantly from other patient facilities.

ARMY

Fitzsimons Army Medical Center, Denver, Colorado

Commander's definition of VIP--Colonel or above, or equivalent, and their dependents

Number of beds that could be used--Eight.

Description of accommodation--There are eight patient rooms which are normally used by other patients, but if a Colonel or above becomes hospitalized, he will be placed in one of these rooms, if available. Rooms do not differ from other patient rooms.

Fort McPherson, Georgia

Commander's definition of VIP--Not given.

Number of beds that could be used--Two

Description of accommodation--Each room has 168 square feet and has wall-to-wall carpet, electric bed, dropped ceiling, desk-bookcase combination, TV, and wall picture. Rooms are used by any patient who medically requires a private room. If not required, then rooms are offered to ranking individual.

Kimbrough Army Hospital, Fort Meade, Maryland

Commander's definition of VIP--Senior officers and their dependents.

Number of beds that could be used--One.

Description of accommodation--Private room with bath and a sitting room. Each room has 100 square feet. Furnishings were not described.

Womack Army Hospital, Fort Bragg, North Carolina

Commander's definition of VIP--Not given.

Number of beds that could be used--One.

Description of accommodation--Additional furnishings include sofa, overstuffed chair, coffee table, desk, office refrigerator, and dresser. Size of room not given.

Darnall Army Hospital, Fort Hood, Texas

Commander's definition of VIP--Command Sergeants Major, Colonels, and above.

Number of beds that could be used--Ten.

Description of accommodation--Two single rooms on each nursing unit are designated as isolation rooms. These may be used for VIP patients when not required for isolation purposes. It is planned that two of these rooms will be furnished with furniture of a higher quality. These will not be reserved, but will be used for isolating patients, as needed.

Kenner Army Hospital, Fort Lee, Virginia

Commander's definition of VIP--Active duty or retired member of flag status and their dependents and active duty colonel.

Number of beds that could be used--Thirteen.

APPENDIX II

Description of accommodation--Twelve rooms have 121 square feet each (our review determined actual square footage to be 115.5) and one room has 209 square feet. Each room has a private bath. These rooms can be given extra furnishings, such as class "A" telephones, desks, and lounge furniture, as the needs of the VIP patient indicate.

Madigan Army Medical Center, Tacoma, Washington

Commander's definition of VIP--Colonel and above and their dependents.

Number of beds that could be used--Three.

Description of accommodation--Each room has 140 square feet and furnished with private telephone, arm chair, end table, lamps, desks, TV, and drapes.

NAVY

Naval Hospital, Guantanamo Bay, Cuba

Commander's definition of VIP--Not given.

Number of beds that could be used--One.

Description of accommodation--Private room of 192 square feet and private bath.

Naval Hospital, Roosevelt Roads, Puerto Rico

Commander's definition of VIP--Not given.

Number of beds that could be used--Five.

Description of accommodation--Five private rooms, each containing about 173 square feet. Each room is carpeted. Other furnishings are identical to all other patient rooms.

VIP ACCOMMODATIONS IN SEVEN HOSPITALSU.S. AIR FORCE HOSPITALLANGLEY AIR FORCE BASE, HAMPTON, VIRGINIA

The hospital maintains two private rooms for VIP patients. The rooms, one in the surgical nursing unit and one in the medical nursing unit, were established in 1969 by converting two semiprivate rooms into private rooms and adding a shower to each. This modification including furnishings cost \$4,784 per room. Each VIP room has about 256 square feet (217 net square feet), while other hospital patients have an average of 135 net square feet per person. A hospital representative said there is no documentation justifying the establishment of the two rooms and neither he nor his staff was assigned to the hospital in 1969.

VIP furnishings cost \$2,446 per bed and the furnishings in a typical room for other patients cost \$607 per bed. (See app. IV, p. 82.)

The hospital did not maintain occupancy records for the two VIP rooms. On the day we toured the hospital, the rooms were vacant. Hospital officials said any patient may use the rooms if the medical need exists.

The VIP rooms do not have separate nursing stations. They are served by the stations in the medical and surgical units.

BROOKE ARMY MEDICAL CENTERFORT SAM HOUSTON, SAN ANTONIO, TEXAS

The hospital maintains a VIP suite consisting of a bedroom, sitting room, and bathroom. The suite totals 486 square feet (438 net square feet), while other hospital rooms average 82 net square feet per person.

Furnishings cost \$3,453 for the VIP suite and \$381 for typical furnishings provided other patients. (See app. IV, pp. 91 and 92.)



APPENDIX III

During 1973, the VIP suite was occupied on three different occasions. The patients and their length of stay were as follows:

<u>Category</u>	<u>Length of stay</u>
U. S. Ambassador	20 days
Lieutenant General	5 days
Lieutenant General	4 days

A separate nursing station is not maintained for the VIP suite. It is served by the station serving the nursing unit on which the suite is located.

U.S. ARMY, 97TH GENERAL HOSPITAL  
FRANKFURT, GERMANY

The hospital has one VIP suite consisting of a bedroom, sitting room, and bathroom, totaling 539 square feet (433 net square feet). Throughout the rest of the hospital, the space per bed in a typical private, semiprivate, three-bed, four-bed, and six-bed room was 200, 115, 113, 108, and 107 net square feet, respectively.

The VIP suite contained furnishings which cost \$894, and donated items valued at \$628. Typical furnishings in other rooms cost \$300 per bed. The cost of individual items of furnishings was not readily available.

Although the hospital commander reported the suite is used solely by VIPs, during our visit we were advised that it could be used by anyone who is acutely ill.

The hospital did not maintain occupancy statistics for the VIP suite; however, the chief nurse recalled the following patients occupying the suite during 1973

<u>Category</u>	<u>Approximate length of stay</u>
Foreign general	3 weeks
Foreign general	1 week
Foreign colonel	1 day
Retired general	3 days
Civilian employee (GS-12)	3 or 4 months
Major	1 week
Wife of embassy official	1 week

We were advised by the hospital commander that no special staffing is provided for the suite.

U.S. ARMY, 130TH STATION HOSPITAL  
HEIDELBERG, GERMANY

The hospital has four private rooms designated solely for use by VIP patients. The rooms vary in size from 217 to 293 square feet and average 257 square feet (219 net square feet) per bed. Two of the rooms have a private bath, while the other two share a bath. Throughout the rest of the hospital, the net square footage per bed in typical semiprivate, four-bed, and five-bed rooms was 107, 96, and 81, respectively.

The VIP rooms had no extra furnishings and were the same in appearance as the rest of the hospital. The furnishings per room cost \$223 and consisted of a bed and bedside cabinet. As of May 1974, the hospital commander planned to furnish each of the VIP rooms with new furnishings costing \$1,416.

The VIP rooms do not have separate nursing stations, and occupancy records are not maintained. On the day of our visit in December 1973, one of the VIP rooms was occupied by a Colonel; the others were vacant.

KENNER ARMY HOSPITAL  
FORT LEE, PETERSBURG, VIRGINIA

The hospital commander reported having 13 private rooms, each with a bath, that could be used to accommodate VIP patients. Further, he reported additional furnishings, such as a telephone, desk, and lounge furniture, could be provided

APPENDIX III

One room has been designated by the hospital for use by VIPs of flag rank. This room is a semiprivate room totaling 259 square feet (209 net square feet). When it is to be occupied by a VIP, one of the beds is removed and a telephone and two lounge chairs located in the chief nurse's office are put in. Hospital officials said the room is not reserved exclusively for VIPs but, if a VIP was admitted to the hospital and the room was occupied, the patient(s) would be moved to other room(s). The chief nurse told us the room was seldom occupied but she could make no estimate of its occupancy. The ward on which the room is located had an occupancy rate of 42 percent during July 1 through September 30, 1973.

There are 12 private rooms which can be used by VIP patients. Each has 145 square feet (115 net square feet) and contains the same furnishings as other patient areas. Hospital officials said these rooms are not reserved for VIP patients.

Occupancy records for the 13 rooms were not maintained. However, on the day of our tour in November 1973, the semiprivate room was vacant and the 12 private rooms were occupied as follows.

<u>Nursing unit</u>	<u>Category of patient</u>
Male patient	Enlisted man two rooms vacant
Major care	Retired officer Wife of officer one room vacant
Female patient	Wife of retired officer Wife of enlisted man Wife of retired enlisted man
Obstetrics	Wife of officer Wife of enlisted man Wife of enlisted man

NAVAL REGIONAL MEDICAL CENTER  
CAMP LEJEUNE, JACKSONVILLE, NORTH CAROLINA

The hospital has a VIP room consisting of a bedroom, private bath, and closet, totaling 259 square feet (200 net square feet). Throughout the rest of the hospital, officer and enlisted patient nursing units average 148 and 81 net square feet per bed, respectively.

Furnishings in the VIP room cost \$1,054. Typical furnishings provided officers cost \$907 per bed and typical furnishings provided enlisted patients cost \$303 and \$648 per bed in an open bay and quiet room, respectively. (See app. IV, p. 93 and app VI, p 101.)

The VIP room does not have its own nursing station. It is served by the station in the officer and female dependent nursing units. The hospital does not maintain occupancy records for the VIP room. A hospital official believed the room had only been occupied three times during the past 2 years.

NATIONAL NAVAL MEDICAL CENTER  
BETHESDA, MARYLAND

Although the hospital reported having only a Presidential suite, our review showed it also had a female officer nursing unit containing 10 private and 2 semiprivate rooms where VIPs were normally treated. Hospital officials said the space was not reported because it was not reserved exclusively for VIPs. Hospital admission records show the unit was to be used by active duty female officers and by Congressmen, Senators, Flag officers, and foreign dignitaries.

The rooms in the unit average 172 square feet (150 net square feet) per bed, whereas the officer and enlisted nursing units average 97 and 84 net square feet per bed, respectively.

Furnishings for the unit cost \$1,275 for a private room and \$1,559 for a semiprivate room (about \$780 per bed). Furnishings provided officers cost \$707 for a typical private room and \$929 for a typical semiprivate room (about \$465 per bed). Typical furnishings provided enlisted personnel cost \$270 per bed. (See app. IV, p 93 and app VI, p. 98.)

APPENDIX III

From August 1 through September 30, 1973, the occupancy rate for the nursing unit where VIPs were normally treated was 36 percent. The nursing station which serves the unit is also responsible for another unit. The ratio of nursing service to patients for the station was high when compared with the rest of the hospital as follows:<sup>1</sup>

Nursing staff to patient ratios  
for VIP nursing station

	<u>Day</u>	<u>Evening</u>	<u>Night</u>
Nurses	1 to 2.7	1 to 10	1 to 12.5
Aids	1 to .8	1 to 2.5	1 to 2.5

Nursing staff to patient ratios  
for the officer nursing units

Nurses	1 to 14	1 to 30.7	1 to 45.8
Aids	1 to 4.2	1 to 7.2	1 to 9.0

Nursing staff to patient ratios  
for the enlisted nursing units

Nurses	1 to 29.1	1 to 47.8	1 to 99.5
Aids	1 to 6.8	1 to 15.8	1 to 15.1

The hospital does not maintain historical records on the category of patients occupying the various nursing units. However, on March 28, 1974, the patients occupying the nursing unit where VIP patients would normally be placed and their length of stay to that date were as follows

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<sup>1</sup>The ratios were computed for 1 representative day each month for the 2-month period.

<u>Category</u>	<u>Length of stay</u>
<u>Females</u>	
Lieutenant Commander	40
Lieutenant junior grade	25
Lieutenant junior grade	4
Ensign	31
Ensign	31
<u>Males</u>	
Retired Admiral	10
Rear Admiral	13
Captain	49
Captain	42

FURNISHINGS IN OTHER VIP ACCOMMODATIONS  
AND TYPICAL FURNISHINGS PROVIDED OTHER  
PATIENTS--THEIR COST OR SOURCE

MALCOLM GROW MEDICAL CENTER, ANDREWS AIR FORCE BASE  
 CAMP SPRINGS, MARYLAND

Typical VIP room

	<u>Private room</u>		<u>Two-room suite</u>		<u>Three-room suite</u>	
Purchased with appropriated funds	<u>Quan- tity</u>	<u>Total cost</u>	<u>Quan- tity</u>	<u>Total cost</u>	<u>Quan- tity</u>	<u>Total cost</u>
Bed	1	\$ 472.00	1	\$ 472.00	1	\$ 472.00
TV, color	1	436 00	1	436.00	2	872.00
Pullman unit (sink-refrigerator)	-	-	1	900.00	1	900 00
Dresser	-	-	1	271.00	1	271.00
Lamps	2	42.40	5	106 00	6	127.20
Vanity	1	178.00	1	178 00	1	178.00
Sofa	1	135.00	1	275 00	2	410 00
Chair	1	<sup>a</sup> 63.00	3	<sup>b</sup> 282 30	7	480.50
Drapes	1 pair	84 50	2 pairs	169.00	3 pairs	253.50
Chandelier	1	41.20	2	82 40	2	82 40
Mirror	1	18 25	1	18 25	1	18 25
Tables	-	-	2	104.00	3	175.00
Commode, formica top	1	128 00	1	128.00	1	128.00
Carpet	24.7 sq yds	296.40	39.9 sq yds.	478.80	78.1 sq yds.	937.20
<b>Total</b>		<u>\$1,894.75</u>		<u>\$3,900.75</u>		<u>\$5,305.05</u>

<sup>a</sup>Average for the four rooms. Three of the rooms contained chairs which cost \$67 and one room contained a chair which cost \$51

<sup>b</sup>Average for the four two-room suites. Each suite contained two chairs which cost a total of \$219.30 In addition, three suites contained chairs which cost \$67, and one suite contained a chair which cost \$51.

## Typical Furnishings Provided Other Patients

<u>Purchased with appropriated funds</u>	<u>Quantity</u>	<u>Total cost</u>
Bed	1	\$334.68
Bedside chest	1	74.00
Dresser	1	85 00
Ottoman	1	84 00
TV, color	1	<sup>a</sup> <u>60 00</u>
Total		<u>\$637 68</u>

<sup>a</sup>Rental fee per year One for a private and semiprivate room; one for every four or five patients in open bay.



APPENDIX IV

U.S. AIR FORCE HOSPITAL  
 LANGLEY AIR FORCE BASE, HAMPTON, VIRGINIA

VIP room

<u>Purchased with appropriated funds</u>	<u>Quantity</u>	<u>Total cost</u>
Bed, electric	1	\$ 613 00
Bedside chest	1	165 00
Bedside cabinet	1	118.00
Small desk	1	287.00
End table	1	94 00
Lamp, table	1	56.00
Lamp, floor	1	75 00
Chair, without arms	1	58 00
Chair, with arms, cushion	2	280.00
Carpet	-	250.00
Television, color	1	<u>450 00</u>
Total		<u><u>\$2,446 00</u></u>

Typical Room For Other Patients

<u>Purchased with appropriated funds</u>	<u>Quantity</u>	<u>Total cost</u>
Bed, manual	1	\$ 170.00
Bedside cabinet, lamp attached	1	80 00
Chair, without arms	2	108 00
Overbed table	1	84 00
Television, black and white	1	<u>165 00</u>
Total		<u><u>\$ 607.00</u></u>

WALTER REED ARMY MEDICAL CENTER  
WASHINGTON, D.C.

VIP room 1 (Pershing Suite)

<u>Purchased with appropriated funds</u>	<u>Quantity</u>	<u>Total cost</u>
Refrigerator, electric	1	\$ 210 00
Bedrails	1 pair	31 20
Dehumidifier	1	69 85
Lamps, various	6	501.80
Bedboard, slatted	3	63.40
Buffet base, server	1	110.00
Bedside cabinet	1	323.02
Mirror, wall, gold frame	1	47 00
Commode, fruitwood	1	127.50
Chairs, various	12	1,396.10
Tables, various	7	508.73
TV, color, wall mounted	1	<sup>a</sup> 54.78
Table, overbed	1	61.75
Sofa, fruitwood	1	511.00
Dresser, wood	1	85 10
Bed, adjustable, with innerspring mattress	1	253.00
Fold-a-bed	1	51 70
Mattress, foam	1	31 00
Light, hospital, wall-mounted	1	88.41
Desk	1	125 00
Rugs		1,063.62
Drapes		1,600.00
Carpet		480.00
Bedsread, quilted		140 00
TV, black and white	1	<u>137.00</u>
Total		<u><u>\$8,070 96</u></u>

<sup>a</sup>Yearly rental

APPENDIX IV

Purchased with  
appropriated funds (cost not available)      Quantity

Chair, straight	1
Table, card, folding	2
Scale, bathroom	1
Receptacle, trash	1

Purchased with  
appropriated funds (on loan from post)      Quantity

TV, color, floor model	1
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## VIP room 2

<u>Purchased with appropriated funds</u>	<u>Quantity</u>	<u>Total cost</u>
Lamps	2	\$ 75.09
TV, color, remote, wall mounted	1	<sup>a</sup> 54 00
Curtains, fiberglass	1	40 00
Draperies, lined	2	200 00
Light, hospital bed, wall	1	88 41
Carpet		85 00
Chairs, various	5	424 00
Bed	1	574.55
Table, overbed	1	61.25
Cabinets, bedside	2	343.02
Mirror, gold frame	1	55.00
Tables	2	121.00
Dresser, wood	1	82.10
Bedspread	1	<u>112 50</u>
Total		<u>\$2,315.92</u>

a  
Yearly rental.

<u>Purchased with appropriated funds</u> (cost not available)	<u>Quantity</u>
Scale, bathroom	1
Mirror, wall	1
Hamper, linen	1
Lamp, table	1
Receptacles, trash	3

APPENDIX IV

VIP room 3

<u>Purchased with appropriated funds</u>	<u>Quantity</u>	<u>Total cost</u>
Table, overbed	1	\$ 61.75
Cabinets, bedside	2	343.02
Lamps	2	90.09
Mirror, gold frame	1	58.00
Pictures, Keystone	1	15.75
Chest, three-drawer	1	125.00
Tables, various	3	95.00
Stand, telephone	1	120.00
Chairs, various	4	342.20
Ottoman	1	38.00
Draperies	2	90.00
Carpet with rubber cushion	40 sq. yds.	1,600.00
TV, color, remote, wall mounted	1	<sup>a</sup> 54 78
TV, color	1	390 75
Light, hospital bed, wall mounted	1	88 41
Bed	1	<u>574 55</u>
Total		<u>\$4,087 30</u>

<sup>a</sup>Yearly rental.

<u>Purchased with appropriated funds</u> (cost not available)	<u>Quantity</u>
Lamp, table	1
Scale, bathroom	1
Mirror, wall	1
Receptacles, trash	3
Hamper, linen	1

## VIP room 5

<u>Purchased with appropriated funds</u>	<u>Quantity</u>	<u>Total cost</u>
Table, overbed	1	\$ 61 75
Cabinets, bedside	2	343.02
Bedspréad	1	107.50
Draperies, lined	1	100.00
Ottoman, French Provincial	1	53.45
Bed, electric, French Provincial	1	758.00
Chest, desk, French Provincial	1	268.65
Chairs, French Provincial	2	198.00
Dresser, base, French Provincial	1	242 70
Mirror, walnut frame	1	46 65
Lamps, table	2	60 00
TV, color, remote, wall mounted	1	<sup>a</sup> 54.78
Curtains, fiberglass	1	30.00
Light, hospital bed, wall mounted	1	<u>88.41</u>
Total		<u>\$2,413.41</u>

<sup>a</sup>Yearly rental.

<u>Purchased with appropriated funds</u> (cost not available)	<u>Quantity</u>
Scale, bath	1
Mirror, wall	1
Receptacles, trash	2
Hamper, linen	1

## APPENDIX IV

## VIP room 4

<u>Purchased with appropriated funds</u>	<u>Quantity</u>	<u>Total cost</u>
Table, overbed	1	\$ 61.75
Cabinets, bedside	2	343.02
Bedspread	1	107.50
Draperies, lined	1	100.00
Ottoman, French Provincial	1	53.45
Bed, electric, French Provincial	1	758.00
Chairs, French Provincial	2	198.00
Chest, desk, French Provincial	1	286.65
Dresser base, French Provincial	1	242.00
Mirror, walnut frame	1	46 65
Lamps, table	2	100.00
TV, color, remote, wall mounted	1	<sup>a</sup> 54 78
Curtains, fiberglass	1	<u>30.00</u>
 Total		 <u>\$2,381.80</u>

<sup>a</sup>Yearly rental.

<u>Purchased with appropriated funds</u> (cost not available)	<u>Quantity</u>
Scale, bath	1
Mirror, wall	1
Receptacles, trash	2
Hamper, linen	1

## Typical Furnishings Provided Other Patients

## Private room

<u>Purchased with appropriated funds</u>	<u>Quantity</u>	<u>Total cost</u>
Bed	1	\$ 537.00
Wardrobe	1	37.50
Overbed table	1	42.80
Chair	3	295.65
Bedside cabinet	1	134.85
Dresser	1	115.20
Mirror	1	27.28
TV, black and white	1	<u>322.52</u>
Total		<u>\$1,512.80</u>

## Semiprivate room

<u>Purchased with appropriated funds</u>	<u>Quantity</u>	<u>Total cost</u>
Bed	2	\$1,060.00
Night stand	2	63.40
Trash can	2	5.00
Wall locker	2	77.20
Chair	4	251.70
Overbed table	2	85.60
TV, black and white	1	<u>80.00</u>
Total		<u>\$1,622.90</u>

(\$811.45 per patient)



APPENDIX IV

Open bay

<u>Purchased with appropriated funds</u>	<u>Quantity per patient (note a)</u>	<u>Total cost</u>
Bed	1	\$ 530.00
Night stand	1	31.70
Overbed table	1	42.80
Chair	1	<u>38.90</u>
Total		<u>\$ 643.40</u>

<sup>a</sup> Portable TVs costing \$80 available when requested--usually one TV for two or more patients

BROOKE ARMY MEDICAL CENTER, FORT SAM HOUSTON  
SAN ANTONIO, TEXAS

## VIP suite

<u>Purchased with</u> <u>appropriated funds</u>	<u>Quantity</u>	<u>Total</u> <u>cost</u>
Bed, electric, Simmons	1	\$ 555.00
Mattress, bed, hospital	1	24.80
TV, black and white, portable	2	253.54
Chairs, various	5	432.15
Stand, night, mahogany	1	72.95
Desk, let-down front, mahogany	1	<sup>a</sup> 110.00
Bedsread	1	<sup>a</sup> 10.00
Throw rug	2	<sup>a</sup> 8.00
Chair, wheel	1	25.00
Desk, stained oak	1	129.95
Lights, various	3	182.98
Sofa, three cushions	1	399.00
Tables, various	4	359.80
Ashtrays	2	<sup>a</sup> 6.00
Pictures, various	-	<sup>a</sup> 135.00
Lamp, standing	1	<sup>a</sup> 60.00
Carpeting, wall-to-wall	-	329.28
Wardrobe, walnut	1	<u>360.00</u>
Total		<u>\$3,453.45</u>

<sup>a</sup> Estimated cost.

APPENDIX IV

Typical furnishings provided other patients

<u>Purchased with appropriated funds</u>	<u>Quantity</u>	<u>Total cost</u>
Bed	1	\$ 153.80
Bedside cabinet	1	43.20
Overbed table	1	53.00
Bed lamp	1	18.90
Chair	1	20 00
TV, black and white	1	<sup>a</sup> 92.00
 Total		 <u>\$ 380.90</u>

<sup>a</sup>One TV in semiprivate room and one for every four or five patients in an open bay.

NATIONAL NAVAL MEDICAL CENTER  
BETHESDA, MARYLAND

<u>Purchased with appropriated funds</u>	<u>VIP--private room</u>		<u>VIP--semiprivate room</u>	
	<u>Quantity</u>	<u>Total cost</u>	<u>Quantity</u>	<u>Total cost</u>
Bed, electric	1	\$ 460.00	2	\$ 920 00
Bedside cabinet	1	43.00	2	86.00
Chair	2	92.00	2	92.00
Dresser	1	120.00	1	120.00
Overbed table	1	60.00	2	120.00
TV, color (note a)	1	349.00	-	-
TV, black and white	-	-	1	120.00
Drapes	1 pair	26.00	1 pair	26.00
Lamp	2	65 00	1	30.00
Ottoman	1	35.00	-	-
Picture	1	25.00	1	25.00
Table	-	-	1	20.00
Total		<u>\$1,275.00</u>		<u>\$1,559 00</u>

<sup>a</sup>Not one for every room.

GAO note: For information concerning furnishings provided other patients see page 98

NAVAL REGIONAL MEDICAL CENTER, CAMP LEJEUNE  
JACKSONVILLE, NORTH CAROLINA

VIP room in officer nursing unit

<u>Purchased with appropriated funds</u>	<u>Quantity</u>	<u>Total cost</u>
Dresser	1	\$ 98.42
Desk	1	97.47
Lamp	1	30.82
Bedside table	1	74.32
Bed, manual	1	271 71
Chair	3	85.65
Overbed table	1	93.29
Drapes	1 pair	43.20
Air conditioner, window unit	1	193.97

APPENDIX IV

VIP room in officer nursing unit

<u>Purchased with appropriated funds</u>	<u>Quantity</u>	<u>Total cost</u>
Telephone	1	50.00
Linen	1	<u>15.43</u>
Total		<u>\$1,054.28</u>

GAO note: For information concerning furnishings provided other patients see page 101.

SEPARATION OF OFFICERS FROM ENLISTED  
PERSONNEL IN TWO NAVY HOSPITALS

NAVAL REGIONAL MEDICAL CENTER  
CAMP PENDLETON, OCEANSIDE, CALIFORNIA

Camp Pendleton maintained separate officer and enlisted personnel nursing units until September 1973 when the officer nursing unit was closed because of low occupancy. Subsequently, officers were assigned to rooms in the female surgical nursing unit which contained 4 private and 13 semi-private rooms. The rooms averaged 137 net square feet each or about 78 net square feet per patient.

The former officer nursing unit was reopened for enlisted patients. It contained 30 beds and totaled 2,329 net square feet or 78 net square feet per bed. Enlisted personnel, however, are treated primarily in eight units with an open bay configuration. The 8 open bay units contain 266 beds and totaled 17,432 net square feet or 66 net square feet per bed. Total space for enlisted personnel averages 67 net square feet per bed.

Furnishings for a typical officer and typical enlisted patient cost about \$246 and \$205 per bed, respectively. The cost of furnishings in the officer and a typical enlisted lounge was \$386 and \$113, respectively. (See app. VI, p 100.)

From July 1 through August 31, 1973, the occupancy rate for the officer unit averaged 35 percent, whereas the occupancy rate for the enlisted units averaged 61 percent. The ratio of nursing staff to officer patients was higher than the ratio to enlisted patients as follows:<sup>1</sup>

Nursing staff to patient ratios  
for the officer nursing unit

	<u>Day</u>	<u>Evening</u>	<u>Night</u>
Nurses	1 to 15	1 to 26.2	1 to 35
Aids	1 to 3.5	1 to 5.2	1 to 10.5

<sup>1</sup>

The ratios were computed for 1 representative day each month for the 2-month period.

APPENDIX V

Nursing staff to patient ratios  
for the enlisted nursing units

	<u>Day</u>	<u>Evening</u>	<u>Night</u>
Nurses	1 to 29	1 to 68	1 to 68
Aids	1 to 6.8	1 to 10.2	1 to 15.7

Hospital officials told us separate nursing units will not be established in the new hospital which is scheduled for occupancy in the summer of 1974. The officials said patients will be assigned to nursing units on the basis of their medical need and not their military rank or sex.

NAVAL REGIONAL MEDICAL CENTER  
PORTSMOUTH, VIRGINIA

The hospital maintains 3 officer nursing units, each consisting of 2 private and 10 semiprivate rooms and a visitors lounge. The rooms range in size from 207 to 230 net square feet and average 116 net square feet per patient. The hospital also maintains 11 nursing units for enlisted personnel. Each nursing unit consists primarily of an open bay and averages 3,061 net square feet and 33 beds or about 93 net square feet per patient. Each enlisted unit has one to three quiet rooms used by patients who need them most.

With the exception of one officer unit that was refurbished in 1972 for the returning prisoners of war, the furnishings for a typical officer and enlisted bed were identical and cost \$238. Typical furnishings in the officer unit that was refurbished cost \$900 per bed. (See app. VI, p 102.)

From August 1 through September 30, 1973, the occupancy rate for the officer and enlisted units averaged 68 and 73 percent, respectively. The ratio of nursing staff to patients for the officer and enlisted units is shown below:<sup>1</sup>

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<sup>1</sup>The ratios were computed for 1 representative day each month for the 2-month period

Nursing staff to patient ratios  
for the officer nursing units

	<u>Day</u>	<u>Evening</u>	<u>Night</u>
Nurses	1 to 9	1 to 45	1 to 90
Aids	1 to 5	1 to 7.5	1 to 15

Nursing staff to patient ratios  
for the enlisted nursing units

Nurses	1 to 12.4	1 to 36.3	1 to 46.2
Aids	1 to 6.4	1 to 7.8	1 to 19.5



APPENDIX VI

FURNISHINGS PROVIDED OFFICER AND  
ENLISTED PERSONNEL PATIENTS AND THEIR COST

NATIONAL NAVAL MEDICAL CENTER  
BETHESDA, MARYLAND

Officer

<u>Purchased with appropriated funds</u>	<u>Typical private room</u>		<u>Typical semiprivate room</u>	
	<u>Quantity</u>	<u>Total cost</u>	<u>Quantity</u>	<u>Total cost</u>
Bed, manual	1	\$125 00	2	\$250.00
Bedside cabinet	1	43 00	2	86.00
Chair	2	92.00	2	92.00
Dresser	1	120 00	1	120.00
Overbed table	1	60 00	2	120.00
TV, black and white	1	120 00	1	120 00
Drapes	2 pairs	52.00	1 pair	26.00
Lamp	1	35.00	2	70.00
Ottoman	1	35.00	-	-
Picture	1	25.00	1	25.00
Table	-	-	1	<u>20 00</u>
 Total		<u>\$707 00</u>		<u>\$929.00</u>
				(\$464 50 per patient)



APPENDIX VI

NAVAL REGIONAL MEDICAL CENTER  
CAMP PENDLETON, OCEANSIDE, CALIFORNIA

Purchased with appropriated funds	Female depen- dent and of- ficer nursing unit		<u>Enlisted</u>			
	<u>Typical bed</u>		Typical bed in former officer nursing unit		Typical bed in nursing unit	
	Quan- tity	Total cost (note a)	Quan- tity	Total cost (note a)	Quan- tity	Total cost (note a)
Bed	1	\$102.64	1	\$102 64	1	\$102.64
Bedside cabinet	1	43.00	1	43 00	1	43.00
Overbed table	1	37.00	1	37 00	1	37.00
Fan	1	17 00	1	17 00	-	-
Chair	1	22 00	3	26 00	1	22.00
Footstool	1	23.00	1	23 00	-	-
Wastebasket	1	<u>1 30</u>	-	<u>-</u>	-	<u>-</u>
<b>Total</b>		<u>\$245.94</u>		<u>\$248.64</u>		<u>\$204.64</u>

Lounge Area

Purchased with appropriated funds	Female dependent and officer nursing unit		<u>Typical enlisted</u>	
	Quantity	Total cost (note a)	Quantity	Total cost (note a)
Chair	7	\$140 00	2	\$ 32 00
Couch	4	80 00	2	50.00
Table	4	100 00	1	20 00
Picture	1	15 00	-	-
Wastebasket	1	1.30	1	1.30
Bookshelf	-	-	1	10 00
Drapes	1 set	<u>50 00</u>	-	<u>-</u>
<b>Total</b>		<u>\$386 30</u>		<u>\$113.30</u>

<sup>a</sup>Costs estimated.

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APPENDIX VI

NAVAL REGIONAL MEDICAL CENTER  
PORTSMOUTH, VIRGINIA

<u>Purchased with appropriated funds</u>	<u>Officer</u>		<u>Enlisted</u>	
	Typical bed in nursing unit 12 (note a)	Typical bed in nursing unit 9 and 10	Typical quiet room	Typical bed in open bay
Bed, hospital	\$ -	\$129	\$129	\$129
Bed, hospital (h1-10)	350	-	-	-
Cabinet, bedside	110	43	43	43
Table, overbed	83	35	35	35
Chair, straight	-	31	31	31
Chair, stuffed	90	-	-	-
Chest, desk	175	-	-	-
Ottoman	42	-	-	-
Pictures	50	-	-	-
<b>Total</b>	<b><u>\$900</u></b>	<b><u>\$238</u></b>	<b><u>\$238</u></b>	<b><u>\$238</u></b>

<sup>a</sup>This nursing unit was refurbished to receive returning prisoners of war from Southeast Asia.