

The MetroHealth System
Main Campus Legacy Buildings Demolition & Transformation
Master Construction Manager at Risk RFQ

Main Campus Legacy Buildings Demolition & Transformation

Master Construction Manager at Risk

Request for Qualifications

October 26, 2026

<u>Project Owner:</u>	The MetroHealth System
<u>Project Name:</u>	Main Campus Legacy Buildings Demolition & Transformation
<u>Project Location:</u>	2500 MetroHealth Drive, Cleveland Ohio 44109
<u>Delivery Method:</u>	Master Construction Manager at Risk (MCMaR)
<u>RFQ Response Deadline:</u>	2:00 PM, November 13 th , 2026 (Trimble Unity Construct & hard copy)
<u>Questions Deadline:</u>	5:00 PM, October 30, 2026
<u>Notice of Intent to Respond:</u>	5:00 PM, October 30, 2026

MetroHealth is seeking statements of qualifications for a Master Construction Manager at Risk for services as identified herein. This Request for Qualifications “RFQ” provides the instruction for submitting information to provide services for consideration by The MetroHealth System, “MetroHealth”. This RFQ outlines the procedures and criteria by which the firms will be selected. MetroHealth reserves the right, at its sole discretion, to modify these procedures, criteria, and/or terms, as well as the scope of the project and related services.

This qualifications-based selection process will result in the hiring of Master Construction Manager at Risk (“MCMAR”) and for the projects described herein. The MCMAR shall submit its qualifications as the Master candidate firm.

The issuing office of this RFQ is:

The MetroHealth System
Planning Design & Construction Department / The Center for Campus Transformation
2500 MetroHealth Drive
Cleveland, OH 44109-1998
Phone: 216-778-5340

MetroHealth currently intends to complete the submittal evaluations, short list candidate submissions and interview process, scope and fee negotiations in early 2027.

All candidates are to submit their electronic (PDF) transmitted qualifications through the online Trimble Unity Construct (formerly e-Builder) Bidder Portal. Trimble Unity Construct is the

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internet-based project management solution used by the MetroHealth Construction Management Department. All candidates are required to submit their qualifications as a recognized Bidder by registering for a Trimble Unity Construct username and password.

The Trimble Unity Construct Bidder Portal can be accessed by the following link:

<https://gateway.app.e-builder.net/app/bidders/landing?accountid=441ecee5-1661-403e-9fcd-ba78a8aac5a1&projectid=5f01a26a-b347-42f5-8dcf-73e3b7e43cb8&bidpackageid=6d9febb4-6dc2-4f39-932d-36a771d2c553>

Instruction for Trimble Unity Construct use will be provided once registered.

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I. History and Background of The MetroHealth System

The MetroHealth System (“MetroHealth” or “Owner”) is one of the largest, most comprehensive health care providers in Northeast Ohio, serving the medical needs of the Greater Cleveland community since 1837. Affiliated with Case Western Reserve University (CWRU) School of Medicine since 1914, MetroHealth is a center for medical research and education, with all active staff physicians holding CWRU faculty appointments.

The System also includes multiple health centers conveniently located throughout Cuyahoga and Medina Counties providing a wide range of primary care and specialty services. The MetroHealth System is a County Hospital system, organized and operated under Chapter 339 of the Ohio Revised Code.

II. Project Overview

MetroHealth’s “Campus Transformation” initiative began in 2013 with the planning for a new

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inpatient facility, resulting in the opening of The Glick Center in November 2022. These efforts continued with the opening of the new Outpatient Health Center in July 2026. With both facilities now operational, MetroHealth is advancing the next phase of its Campus Transformation initiative to further modernize and reimagine the System.

In 2026, MetroHealth independently engaged a Master Planning Architect (“MAEOR” - Perspectus-CBLH) to assess, evaluate, program, and master plan a new campus for The MetroHealth System. The resulting deliverables will guide the next phase of campus redevelopment and establish a framework for completing MetroHealth’s broader Campus Transformation vision. As part of the MAEOR’s efforts, Perspectus-CBLH will provide oversight and strategic direction for a multi-phase project focused on modernizing existing facilities, enhancing building utility serviceability, reliability, and resiliency, and coordinating the planned demolition of designated buildings without adversely impacting the operation of the hospital.

The selected MCMAR will be responsible for implementing the MAEOR’s vision and plans, including the management and oversight of preconstruction coordination and construction activities necessary for project completion and activation. The MCMAR will coordinate with Perspectus-CBLH, the Master Planning Architect, who will lead schematic design, design development, construction documents, construction administration, and project closeout across all related projects.

The Work associated with these efforts is subject to affect multiple “Legacy Buildings” (buildings built between 1912-1990) throughout Main Campus. The anticipated scope of work for these buildings is outlined below and remains subject to revision based on the MAEOR’s ongoing efforts and the Owner’s discretion:

Legacy Buildings subject to utility / infrastructure improvements: Outpatient Plaza (OPP), Rammelkamp, Bell Greve, Towers, Core, Hamann, Gannon, & South

Legacy Buildings subject to light and/or heavy renovation: Outpatient Plaza (OPP), Rammelkamp, Bell Greve, Hamann, Gannon, & South

Legacy Buildings subject to demolition: Core A, Tower B, Tower C, Business Services Complex, Laundry, the P6 Parking Garage, Hamann, Gannon, South, & the Powerhouse

Legacy Buildings subject to recladding: Rammelkamp, Bell Greve, Hamann, & the Critical Care Pavilion

The current schedule is for campus renovation and demolition efforts associated with this project to commence early 2027 and to be completed prior to 2030.

Upon final negotiations of scope, fee, and reimbursable expenses, the MCMAR and designated sub-consultants, shall execute a modified AIA Agreement provided by the Owner.

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It is essential to the success of this project, and the on-going operations of The MetroHealth System, that all functions of the existing hospital shall remain functional during the course of the project phasing and construction. The MetroHealth leadership and its various departments will rely heavily on the ability of the MCMAR and its team to prevent disruption to utilities and hospital operations at its main campus during the execution of this project.

The MetroHealth System has established a main campus co-location office (the “Big Room”) within the Center for Campus Transformation (“CCT”). The MCMAR, its project team, the MAEOR, members of the Executive Team, and other applicable consultants shall plan for their core project staff to work in this co-location environment until such time as the space is affected by future demolition activities. At that time, project staff shall relocate to the new CCT facility once it has been established and is available for occupancy.

A. Current State of Main Campus

Current State of Main Campus:

MetroHealth’s Main Campus includes a diverse mix of recently completed, in-progress, and aging facilities, each playing a distinct role in the overall healthcare delivery system. Key components include:

The Glick Center (Bed Tower, Diagnostics & Treatment): 697,883 SF built in 2022

Central Utility Plant (CUP): 56,944 SF built in 2022

Critical Care Pavilion (CCP) (ED, OR, L&D, Neonatal): 218,227 SF built in 2004 with a 101,800 SF vertical expansion completed in 2016

Outpatient Health Center (OPHC): 310,000 SF built in 2026

Current Plan (subject to change):

Renovations:

A-D Pavilions (aka Outpatient Plaza (OPP)): 266,550 SF built in 1990

Bell Greve: 194,571 SF built in 1957

Old Research Building: 59,060 SF built in 1952

Rammelkamp (Research): 160,985 SF built in 1995

Demolition Phase I:

Business Services Complex: 100,934 SF (5 buildings) built between 1912 - 1964

Core: 200,097 SF built in 1977

Towers: 326,970 SF built in 1970

Demolition Phase II:

Gannon: 98,212 SF built in 1998

Hamann: 181,865 SF built in 1922

South: 151,085 SF built in 1966

III. Other Legacy Buildings: Totaling 67,952 SF built between 1912-1977 Scope of Services

MetroHealth is seeking statements of qualifications for construction management services as identified herein. MCMAR services for the Project will include, but not be limited to, design review and pre-construction services, participation in developing the budget and updated construction cost

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estimates, participation in preparing the construction schedule (including identification of significant milestones for completion of the Work), prequalification of subcontractors to perform the required Work, construction, and close-out phases of the Project. The MCMAR will provide construction management services under the terms and conditions of the contract based on *AIA Document A133-2019 Standard Form of Agreement Between Owner and Construction Manager as Constructor where the basis of payment is the Cost of the Work Plus a Fee with a Guaranteed Maximum Price as modified* and the *AIA Document A201-2017, General Conditions of the Contract for Construction, as modified*. MetroHealth anticipates that a copy of the contract that will be used for the project will be issued to the short-list candidate firms and included with the Request for Proposals for the project.

A. Preconstruction Phase Services

The MCMAR will provide preconstruction phase services for the Project. The MCMAR will assign a team to the Project who will be the same team that will be assigned during the construction phase to work cooperatively with the Owner and MAEOR team. The MCMAR team will be responsible for performing the following duties including, but not limited to, design-assist services, real-time cost estimating and budgeting, support for target value design, constructability review, scheduling, and preconstruction planning throughout the preconstruction phase. The MCMAR shall provide recommendations with regard to accelerated or fast-track scheduling, procurement, and phased construction.

It is anticipated that the owner, MAEOR and MCMAR will jointly determine and agree to the requirements of the drawings, specifications, and narratives to be sufficiently completed documents that will be provided to the MCMAR in order to develop their proposed Guaranteed Maximum Price (GMP) and its qualifications and assumptions based upon the documents. Due to the size, complexity, scope, and anticipated phasing of the Project, the Owner may elect to divide the Work into multiple subprojects, bid packages, phases, or other defined portions of the Work, each of which may be assigned a separate GMP. Accordingly, the Project may be delivered through multiple GMPs, which may be developed, reviewed, negotiated, approved, and incorporated into the MCMAR Agreement through one or more amendments at different stages of the Project. The GMP(s) shall not exceed the Owner's budget for construction for the applicable subproject, bid package, phase, or other defined portion of the Work covered by such GMP. The Owner, MAEOR, and MCMAR shall meet to reconcile any questions, discrepancies, or disagreements relating to each GMP and the qualifications and assumptions. For each GMP, the MCMAR shall then submit to the Owner, for approval, the MCMAR's proposed final GMP based upon the documents including the approved qualifications and assumptions. Contingent upon the Owner's approval of the final GMP, the parties anticipate executing an amendment to the MCMAR agreement establishing the GMP for the applicable subproject, phase, or portion of the Work.

The establishment and approval of any GMP shall not obligate the Owner to authorize or proceed

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with any other or subsequent subproject, bid package, phase, or portion of the Work unless and until separately authorized by the Owner. The Owner may, in its discretion, establish GMPs in such sequence and at such times as are appropriate to support the Project schedule, procurement requirements, funding, design development, and phased construction.

B. Construction Phase Services

The MCMAR shall construct the Project pursuant to the construction documents and in accordance with the schedule requirements. The MCMAR shall hold all subcontracts and shall be fully responsible for the means and methods of construction, project safety, project completion within the schedule agreed upon in the preconstruction phase, equal employment, prevailing wage requirements, safety, and the submission of monthly reports of these activities to the Owner.

This project will be “open-book”, including, but not limited to, bids on all trade packages, general conditions, and fees.

IV. Anticipated Schedule*

RFQ Issued	October 23, 2026
RFQ Questions Due	October 30, 2026
MHS Responses to Questions	November 6, 2026
RFQ Responses Due	November 13, 2026
Shortlisted Candidate Firms Notified	November 20, 2026

V. Anticipated Total Construction Cost

The estimate of total probable project cost is TBD.

VI. Community Business Enterprises Participation

Not Used.

VII. Project Labor Agreement

Not Used.

VIII. Qualifications Content

To facilitate the review of the anticipated responses, each candidate firm shall submit its information in one bound volume divided into two tabbed sections.

Volume One shall include the firm’s information submitted on State of Ohio “Statement of

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Qualifications” form F110-330, in accordance with the stated requirements. All references within form F110-330 to State projects or experiences shall herein be redefined to include “all projects and clients”. Form F110- 330 is available in a Microsoft Word version at <https://ofcc.ohio.gov/project-resources/documents/forms/100-procurement-forms>, selecting the link titled “Statement of Qualifications”.

All contents included in Tab One shall be standard letter size, 8½”x11”. All content pages shall be consecutively numbered. The submittal response shall address the following specific criteria and present the information in the order identified within F110-330:

Please note: Candidate firms are **required** to provide complete response to the following:

Part I, Section A, Line 1 thru Section H, Line 34a.

Part I, Section I, Lines 35 thru 37

*The following portions of the Form are **NOT required**:*

Part I, Section H, Lines 34b thru 34e.

Part II – General Qualifications, in its entirety

Section A – Contact Information

Section B – Firm Point of Contact

Section C – Proposed Team

Section D – Organizational Chart of Proposed Team

Section E – Resumes of Key Personnel Proposed for This Contract

Be sure to check the box if the identified relevant project work was completed while employed by the candidate firm.

Section F – Example Projects Which Best Illustrate Proposed Team’s Qualifications for This Contract

1. Relevant Experience – Provide a minimum of two (2) project examples of similar size, scope, and complexity, with no more than one (1) in progress. Examples should demonstrate experience with the following: construction on or adjacent to an occupied, operating healthcare campus while maintaining continuous operations, demolition and utility coordination, including utility reconfiguration, cutover, and temporary systems, extensive building renovation and envelope re-cladding, and delivery as a MCMAR or by an integrated or similar collaborative delivery approach.
For each project, state the delivery method, the firm's role, the final or current construction cost, the schedule (planned versus actual), the owner's contact, and the names of the proposed key personnel who worked on it.
2. Provide project narrative overviews and statements regarding the relevance of each project to the proposed program
3. References for the Candidate firm providing information on:
 - a. Control of costs (to the extent not addressed above) and Contingency Management Plans
 - b. Quality of Work performed
 - c. Dispute Resolution (dealing with subcontractor and supplier issues)

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- d. Administration of subcontractors and suppliers
- e. Meeting deadlines and maintaining the project schedule (to the extent not addressed above)

The ability to maintain utilities and hospital operations while reconfiguring utilities and demolishing selected sections of the campus (to the extent not addressed above)

Section G – Key Personnel Participation in Example Projects

Section H – Additional Information - Please respond to each of the following:

1. Describe how the proposed MCMAR team has successfully worked in an integrated or collaborative project delivery processes and environments that include the alliance of people, systems, business structures and practices into a process that harnesses the talents and insights of all participants to optimize project results, increase value to the owner, reduce waste, and maximize efficiency through all phases of design, fabrication, and construction. It is recommended that stated examples be taken from the representative projects from which the proposed personnel have actively participated.
2. What is your experience with Lean processes as employed through the design and construction processes for a project of this size and complexity?
3. Describe the arrangement, organization, process and actions you propose to use for the use of Building Information Modeling (BIM), and Design Assist, and the firm's recent successful experience(s) using these tools and methods. Refer to the example projects in this submittal where appropriate.
4. What is your specific experience with publicly owned Healthcare systems? What are the organizational challenges with this type of Ownership and Administration?
5. Judgments: Provide a list of all convictions or fines assessed against the Candidate firm or any of its officers or directors for violations of State or Federal Law.
6. Demonstrate Candidate firm's bonding capacity as evidenced by a recently dated letter from the Candidate firm's surety agent listing current available bonding capacity, as well as total maximum bonding capacity. The letter should also state the surety agent's commitment to provide the required payment and performance bonds in accordance with OAC 153:1-4-02, if the Candidate firm is determined to be the firm that will provide the best value for the Project.

Section I – Authorized Representative

Volume Two (optional) shall include supplemental information not already provided in Tab One which is conducive to highlighting the firm's expertise relevant to the proposed work with MetroHealth. The contents included in Tab Two may be of any page size not to exceed ledger size, 11"x17". All content pages shall be consecutively numbered and shall not exceed twenty-five (25) pages.

IX. Selection Criteria

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The following criteria will be used by the Owner to evaluate each Candidate:

1. Responsiveness to this RFQ. Completeness of qualifications in responding to the information requested and in the designated format.
2. Current and past experiences of the proposed firm and its identified personnel on projects of similar size, scope and complexity including but not limited to, experience with deployment and implementation of "open space system" technology and sustainable initiatives.
3. Competence to perform the required management services as indicated by the technical training, education, and general experience of the CMR's personnel, especially the technical training, education, and experience of the CMR's employees and consultants who will be assigned to the Project. Qualifications (including technical training and education) and relevant experience of the key personnel.
4. Demonstrated ability of the team to orchestrate complex utility and selective demolition work without disruption to hospital operations.
5. Ability of the firm in terms of its workload and the availability of qualified personnel, company resources, and facilities to perform the required services competently and expeditiously. This includes the availability of the key personnel to commence active engagement on the project.
6. Demonstrated knowledge of the firm's ability to manage the project schedule and team activities in a timely manner.
7. The firm's understanding of the strategies to complete the project's objectives as completely and effectively as possible.
8. Relevant project and client references and evidence of successfully executing similar projects for the firm and designated project personnel, including sub consultants, for projects of a similar nature. Past performance as reflected by the evaluation of previous clients with respect to factors such as control of costs, quality of work, dispute resolution, administration of subcontracts, meeting deadlines.
9. Financial responsibility including evidence of the capability to provide the payment and performance bonds in accordance with OAC 153:1-4-02.
10. Any other relevant criteria as determined by the Owner.

Evaluation Scoring Criteria (100 pts)

- Project team member and leadership experience – 30 pts
- Project team organization (roles) – 20 pts
- Examples of relevant projects – 20 pts
- Response to questions 1- 6, Section H – 30 pts

This RFQ sets forth the intent of MetroHealth as to the procedure and criteria by which the MCMAR firm will be selected and the proposed terms of the agreement between MetroHealth and the successful Candidate. Except as required by statute, MetroHealth reserves the right, in its sole discretion, to modify this procedure and criteria until an agreement between MetroHealth and a successful Construction Manager is executed.

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Based on the identified criteria, MetroHealth will issue a Request for Proposal to the top ranked MCMAR candidates in the form of a pricing and technical proposal.

Any attempt to influence any member of MetroHealth with regard to this RFQ prior to the selection/decision will be grounds for disqualification.

MetroHealth will do business only with firms which provide for Equal Employment Opportunity pursuant to Section 153.59 of the Ohio Revised Code.

X. Submission Instructions

Submit one (1) electronic copy via Trimble Unity Construct bidding module for the project prior to deadline stated. Electronic submittals should be combined into one PDF file. The file name shall include the project number listed on the RFQ and the Candidate firm's name.

<https://gateway.app.e-builder.net/app/bidders/landing?accountid=441ecce5-1661-403e-9fcd-ba78a8aac5a1&projectid=5f01a26a-b347-42f5-8dcf-73e3b7e43cb8&bidpackageid=6d9febb4-6dc2-4f39-932d-36a771d2c553>

Submit two (2) hard copies directly to:

The MetroHealth System
Planning Design & Construction Department / Center for Campus Transformation
2500 MetroHealth Drive
Cleveland, OH 44109-1998
Phone: 216-778-5340

Plainly marked on the outside of the package shall be:

“Main Campus Legacy Buildings Demolition and Transformation”
“Master Construction Manager at Risk – Statement of Qualifications”
“Firm Name”

Facsimile or e-mailed copies of the submittal will not be accepted.

Each candidate is individually responsible to ensure that its submittal meets the delivery requirements to the designated delivery destination at the designated time. Candidates shall *not* rely upon the use of FedEx, UPS, or any other package or mail delivery service that will only provide a drop service at the loading dock or mail room.

X. Other Instructions

Upon receipt, review and consideration of this RFQ, each candidate intending to submit an RFQ response shall indicate “Will Bid” in the Trimble Unity Construct bidding module.

Candidate firms are not to rely on any oral instructions or answers.

Oral responses affecting the information provided by the Candidate firm in its submittal will

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not be binding on MetroHealth, its employees, agents, or representatives.

1. Public access to the site is permitted.
2. Visits will be allowed.
3. All submittals and subsequent proposals received in response to the procurement documents will become the property of MetroHealth and will not be returned.
4. Note that all information submitted in response to this RFQ and to any subsequent RFP for CMR services is a public record, which will be made available for inspection as required by ORC149.43 upon request at the conclusion of the selection process.
5. Candidate firms recognize and agree that MetroHealth will not be responsible or liable in any way for any losses that the Candidate firm may suffer from the disclosure of information or materials to third parties.

XI. Rights of the Owner

The issuance of this RFQ constitutes only an invitation to present qualifications. The rights reserved by the Owner, which shall be exercised in its sole and absolute discretion, include without limitation the right to:

1. Require additional information from one or more Candidate firms to supplement or clarify the submittals submitted.
2. Conduct investigations with respect to the qualifications and experience of each Candidate firm.
3. Visit and examine any of the facilities referenced in the submittals and to observe and inspect the operations at such facilities.
4. Waive any defect or technicality in any submittal received.
5. Determine which Candidate firms are qualified to be short-listed to receive the RFP and submit Proposals in response to the RFP.
6. Eliminate any Candidate firm that submits an incomplete or inadequate submittal or is not responsive to the requirements of this RFQ.
7. Supplement, amend, or otherwise modify this RFQ, prior to the date of submission of the submittals.
8. Issue one or more amendments to this RFQ extending the due date for the submittals.
9. Receive questions concerning this RFQ from Candidate firms and to provide such questions, and the Owner's responses, to all Candidate firms.
10. Cancel this RFQ in whole or in part with or without substitution of another RFQ if determined to be in the best interest of the Owner.
11. Take any action affecting the RFQ process, the RFP process, or the Project that would be in the best interest of the Owner.
12. Make public any and all documents associated with the Project, including documents submitted to the Owner by Candidate firms.
13. MetroHealth reserves the right to reject any or all RFQ responses, to select any response as the basis for negotiation of a contract, and to exercise its discretion and apply its

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judgment with respect to any aspect of this request, the evaluation of responses, and the negotiation and award of any contract.

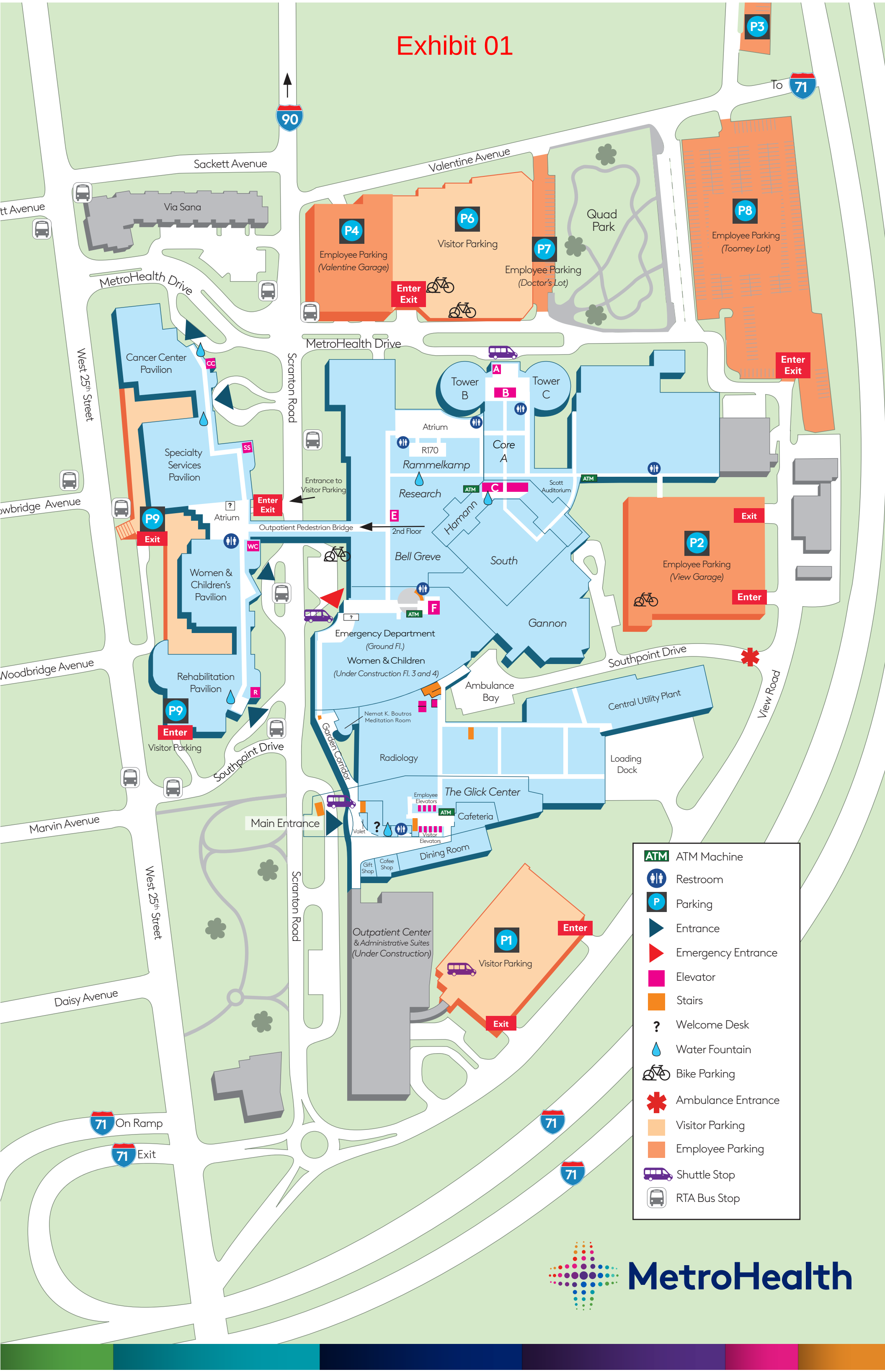
14. MetroHealth reserves the right to reject any, part of any, or all submittals received and to waive informality in any submittal. The candidate firms whose submittals are not accepted will be notified after a binding contractual agreement between MetroHealth and the successful construction management firm exists, or if MetroHealth rejects all submittals.
15. By submission of a RFQ response, Candidate firm agrees to preserve the confidentiality of information of the Owner used by the Candidate firm or to which it shall be granted access for purposes of preparing the response or in performance of work pursuant to any contract resulting from the response. Such information regarding the Owner shall be protected from disclosure by the Candidate firm and access thereto, limited to the Candidate firm or those having a need therefore in performance of services to the Owner. Such information may not be disclosed to any other persons, or entities whatsoever without prior written consent of the Owner or unless such information shall have become otherwise generally available, without fault of the Candidate firm.
16. MetroHealth assumes no responsibility, and no liability, for costs incurred in the preparation or submission of any RFQ response.
17. MetroHealth reserves the right, in its sole discretion, to have any Candidate firm clarify or supplement its submittal, including making such request through direct contact with the Candidate firm.
18. MetroHealth may hold discussions with individual firms to explore further the firm's statement of qualifications.
19. If provided by the Owner, any provided documents are for reference only. They are provided for use in preparing a response for the requested service only. MetroHealth cannot guarantee their accuracy.

XII. EXHIBITS

1. **Map/Directions to CCT**
2. **Main Campus Map**

End of Document

Exhibit 01



MetroHealth Medical Center Map

Department/Clinic/Unit Name	Elevator	Floor(s)	Building	Entrance
Acute Care for Elders Unit “3 East”	Visitor	3	Glick	Glick
Admitting/Registration		Lobby Level	Glick	Glick
Aamoth Family Pediatric Wellness Center		1	OPP-Atrium	OPP
Anticoagulation Clinic	C	3	Hamann	ED
Allergy/Immunology Clinic	E	4	Bell	ED
Bleeding Drawing/Lab- Outpatient	Specialty Services	2	OPP	OPP
Burn Center- Inpatient “BICU” and Outpatient “3 West”	Visitor	3	Glick	Glick
Cafeteria - MetroEats		Ground	Glick	Glick
Cancer Center		1	OPP-Cancer Center	OPP
Cardiac Intensive Care Unit “7 West CICU”	Visitor	7	Glick	Glick
Cardiac Step-Down Unit “7 East”	Visitor	7	Glick	Glick
Case Management/Social Work		1	Res	ED
Child/Adolescent Psychiatry	E	4	Bell	ED
Coffee Shop/Café - Park Side Café		Lobby Level	Glick	Glick
Conference Center	Visitor	2	Glick	Glick
Oral Surgery		1	Bell	ED
Dermatology	Specialty Services	2	OPP	OPP
Durable Medical Equipment - Hastings/Discount Drug Mart		1	Bell	ED
Emergency Department		Ground	ED	ED
Endoscopy Services	Visitor	1	Glick	Glick
Ear, Nose and Throat “ENT”	Specialty Services	2	OPP	OPP
Family Resource Center	Visitor	2	Glick	Glick
Fetal Diagnostics Center	Women & Children’s	2	OPP	OPP
Geauga Vision		1	OPP-Atrium	OPP
General Medicine- Inpatient “4 East,” “8 East” and “9 East and West”	Visitor	4,8, and 9	Glick	Glick
General Surgery- Inpatient “4 East”	Visitor	4	Glick	Glick
Gift Shop - Nurture Gift Shop		Lobby Level	Glick	Glick
Heart & Vascular Center- Outpatient	C	3	Ham	ED
Information/Welcome Desk - Emergency Department		Ground	ED	ED
Information/Welcome Desk - The Glick Center		Lobby Level	Glick	Glick
Information/Welcome Desk - Outpatient Plaza		1	OPP-Atrium	OPP
Internal Medicine	Rehabilitation	2	OPP	OPP
Labor & Delivery	C	2	Ham	ED
Medical Intensive Care Unit “8 West MICU”	Visitor	8	Glick	Glick
Medical Records		1	Bell	ED
Medical Specialties	Specialty Services	2	OPP	OPP
Medical Stepdown Unit “7 West”	Visitor	7	Glick	Glick
MetroHealth Police Department	B	Ground	Tow	ED
Mother Baby/Postpartum Unit “2B/C”	C	2	Tow	ED
Nemat K. Boutros Meditation Room		Lobby Level	Glick	Glick
Neurocritical Care Unit “6 West NCCU”	Visitor	6	Glick	Glick
Neurology and Pain Management	Rehabilitation	2	OPP	OPP

BUILDINGS KEY: Bellgreve= Bell; Core= Core; ED=Emergency Department; Glick= Glick; Hamann= Ham; OPP= Outpatient Plaza; Ram= Rammelkamp; Res= Research; Tow=Towers

Department/Clinic/Unit Name	Elevator	Floor(s)	Building	Entrance
Neurology - Inpatient “6 East”	Visitor	6	Glick	Glick
Nursery/Neonatal Intensive Care Unit “2A NICU”	C	2	Tow	ED
Nutrition Clinic	Specialty Services	2	OPP	OPP
Occupational Therapy/Speech Therapy/Vocational Services/Rehab Psychology/Physical Therapy		1	OPP- Rehabilitation	OPP
OB/GYN	Women & Children’s	2	OPP	OPP
Office of Patient Experience		1	Core	ED
Oncology- Inpatient “3 East”	Visitor	3	Glick	Glick
Ophthalmology	Specialty Services	3	OPP	OPP
Orthopedics- Outpatient		1	OPP- Specialty Services	OPP
Orthopaedics/Surgery “6 East”	Visitor	6	Glick	Glick
Patient Financial Services		1	Tow	Tow
Pediatric Clinics 1, 2 and 3		1	OPP- Women & Children's	OPP
Pediatric- Inpatient “4 West”	Visitor	4	Glick	Glick
Pediatric Intensive Care Unit “4 West PICU”	Visitor	4	Glick	Glick
Pediatric Rapid Access Clinic		1	OPP- Women & Children's	OPP
Pediatric Specialties Clinic		1	OPP- Women & Children's	OPP
Pediatric Therapies		1	OPP- Women & Children's	OPP
Pharmacy- Outpatient		1	OPP- Atrium	OPP
Physical Medicine & Rehabilitation (PM & R)- Includes WorkLink	Rehabilitation	2	OPP	OPP
Post-Procedure Care - Inpatient “5 East”	Visitor	5	Glick	Glick
Presurgical Evaluation “PSE”		1	OPP- Atrium	OPP
Psychiatry/Behavioral Health Services - Outpatient	C	8	Ham	ED
Pulmonology Medicine	C	3	Ham	ED
Radiology (CT, MRI, Nuclear Medicine, Interventional Radiology)		Ground	Glick	Glick
Radiology (X-Ray, Mammography, Ultrasound)		1	OPP- Atrium	OPP
The Alfred F. Connors, Jr., MD Learning Center- R170		1	Ramm	ED
Rheumatology	Specialty Services	2	OPP	OPP
Ronald McDonald Family Room	Visitor	4	Glick	Glick
Sleep Medicine	C	3	Ham	ED
Stroke- Inpatient “6 West”	Visitor	6	Glick	Glick
Surgery/Procedural Waiting Room	Visitor	1	Glick	Glick
Surgical Intensive Care Unit “5 West SICU”	Visitor	5	Glick	Glick
Surgical Stepdown “5 West SSD”	Visitor	5	Glick	Glick
Surgery Specialties- Outpatient		1	OPP- Specialty Services	OPP
Trauma Intensive Care Unit “5 West TICU”	Visitor	5	Glick	Glick
Trauma- Inpatient “5 East”	Visitor	5	Glick	Glick
Trauma Recovery Center	E	Ground	Bell	ED
Tuberculosis Clinic	E	Ground	Bell	ED
Volunteer Services	Visitor	2	Glick	Glick
Women, Infant and Children,”WIC”	Women & Children's	2	OPP	OPP

PLEASE NOTE: Elevators in the main facility are labeled as A, B, C, E, F, and Visitor Elevators in the Outpatient Plaza are labeled as Cancer Center, Specialty Services, Women & Children's, Rehabilitation. Visitors can enter the Outpatient Pavilion directly from Scranton Road or West 25th Street.

Deliveries to the MetroHealth **Campus Transformation** offices:

In-person deliveries can be made from 8:30 am to 4:30 pm weekdays

Please call Mirol Wells at (216) 778 - 5688 if any difficulties

1. At the Metrohealth campus,
follow the sign directions for:

Ambulances

2. At the Ambulance drive, turn
right at **POLICE PARKING:**

(Vehicle can be parked there
while delivery is dropped off)



3. Bring drop-off to **Door 25:**
Ring doorbell for access

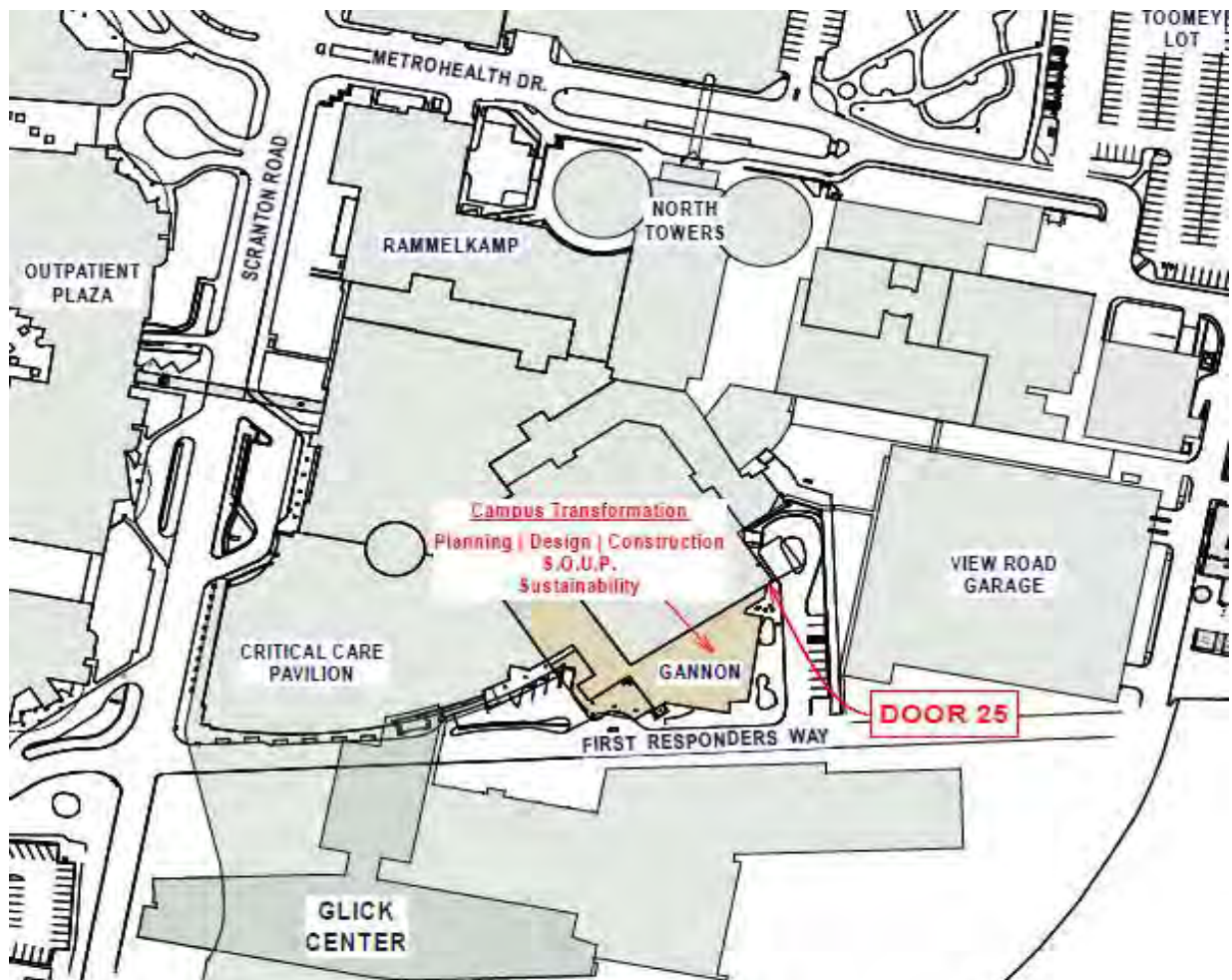


Exhibit 02

