Daniel Alexander | CM | Dr. Messner



Thesis Final Report

Doctors Community Hospital | Lanham, MD





PROJECT TEAM

-Owner: Doctors Community Hospital

-CM: GILBANE BUILDING COMPANY -Architect: CR Goodman Associates

-STRUCTURAL: MINCIN-PATEL-MILAND

-Mech & Electrical: Leach

WALLACE ASSOCIATES

STRUCTURE

 Steel columns and beams built up on existing steel construction
Concrete footers with grade beams (~50% existing, 50% new)
Lightweight concrete on metal

DECK TO FORM COMPOSITE SLAB -Non-load bearing brick on metal stud facade

Mechanical

-ROOF MOUNTED MECHANICAL PLANT -90,000 CFM AIR HANDLER FEEDING VAV BOXES

-425 TON CHILLER

-DRAW THROUGH 425 TON

COOLING TOWER

-(3) 2,678 MBH DUEL FUEL

BOILERS

-Medical Gas and Vacuum tubes feed each patient room - Cost: \$42 Million - Delivery: Design-Bid-Build with a GMP from a CM@Risk - Occupant: Doctors Community Hospital - Dates: Nov '07- March'10

FUNCTION: MEDICAL HOSPITAL

SIZE: 270,000 SF EXPANSION

Δ

N

Н

A

M

 \mathbf{N}

PROJECT OVERVIEW

ELECTRICAL/LIGHTING

- 1,200 Amp switchgear –(2) 2,500 Amp switchboards
- 1,250 KVA Emergency Generator fed by 5,000 gal

FUEL TANK Power fed vertically through

STACKED ELECTRICAL ROOMS WITH MULTIPLE TRANSFORMERS IN EACH -LIGHTING TYPICALLY CONSISTS OF RECESSED 2x4 FLUORESCENT

Special Considerations

CONSTRUCTION IS OCCURING DIRECTLY ABOVE AND ADJACENT TO AN OPERA-TIONAL HOSPITAL. OUTAGES MUST BE COORDIANTED WITH OWNER, AND SPE-CIAL DUST AND DEBRIS CONTROL IS NEEDED IN RENOVATION PORTIONS

ARCHITECTURE

LIGHTS

- Patient rooms arranged on the outside with support areas in the center

BRICK FACADE WITH SPLIT-FACE CMU BANDING AND CAST STONE WINDOW LINTELS

-Roof: Built up Styrene-Bitumen-Styrene system on 3"

POLYSTYRENE FOAM

Daniel Alexander

CONSTRUCTION MANGEMENT

IST FL - EL

HTTP://www.engr.psu.edu/ae/thesis/portfolios/2009/dra5002/

CONTENTS

Abstract	ii
Table of Figures	iv
Acknowledgements	vi
Executive Summary	vii
Introduction	1
Project Overview	2
Client Information	2
Project Delivery Method	2
Gilbane Project Team	3
Design and Construction Overview	5
Local Conditions	8
Existing Site Conditions	8
Site Layout Planning	11
Project Logistics	12
Schedule	12
Project Cost Summary	12
General Conditions Estimate Summary	13
Detailed Structural System Estimate Summary	14
Analysis 1 Implementing BIM	15
Background	15
Goal	15
Business Process Modeling Notation	16
3D MEP Coordination Process Map	17
DCH (2D) Coordination Process and Comparison to 3D	22
Implementing 3D Coordination at DCH	24
Analysis 2 Prefabricated façade	29
Background	29
Goal	29
System Selection Criteria	30

Daniel Alexander | CM | Dr. Messner Doctors Community Hospital | Lanham, MD April 7, 2009

Schedule Analysis
Cost Analysis
Structural Impact
Mechanical impact
Conclusions and Recommendations4
nalysis 3 Site Logistics4
Background4
Goal4
Effects of Site Congestion4
Schedule and Cost Impact4
Conclusions and Recommendations4
ppendix I Site Layout Plans4
ppendix II CPM Schedule
ppendix III Detailed Estimate Breakdowns5
ppendix IV Process Model
ppendix V Take-off Data62
Appendix VI Detailed Structural Calculations63

TABLE OF FIGURES

Figure 1-Contractual Arrangements for the DCH Expansion	ŀ
rigare 2 Stanning Flath for Subaric Danaling Somparty on Dort	5
Figure 3-Crane Location for Steel Erection	÷
Figure 4-DCH Site Plan)
Figure 5-Section 1 of the 3D MEP Coordination Process	3
Figure 6-Section 2 of the 3D MEP Coordination process)
Figure 7-Comparison of Linear and Concurrent Modeling Practices (Courtesty of BBC)21	J
Figure 8-Definition of Levels of Detail for MPS25	5
Figure 9-Examples of LOD Based on the MPS	3
Figure 10-Weekly Process Model for Coordination Cycle (Courtesy of BBC)27	,
Figure 11-Excerpt from CPM showing Facade construction on Critcal Path	
Figure 12-CPM Excerpt Showing New Dates with Precast Facade)
Figure 13-Typical Panel to Column Connection Detail (Courtesy of Highconcrete.com)	5
Figure 14-Tributary Area for Typical Edge Beam	;

Daniel Alexander | CM | Dr. Messner Doctors Community Hospital | Lanham, MD April 7, 2009

Figure 15-Tributary area for Exterior column	
Figure 16-Typical Exterior Column Tower	
Figure 17-DCH Site Plan Excerpt	43
Figure 18-Ground level perspective of Ductbank Location	44
Figure 19-Crane placement	
Table 1-Building Systems Overview	5
Table 2-Cost Breakdown for DCH	13
Table 3-Summary of General Conditions Estimate	13
Table 4-SUmmary of Detailed Estimate	14
Table 5-Explanation of BMPN Symbols	16
Table 6-Participants Important to 3D Coordination	24
Table 7-CarbonCast vs. Nitterhouse vs. Brick	30
Table 8-Comparison of Durations	31
Table 9-Cost Comparison of Brick and CarbonCast	33
Table 10-General Conditions Savings	
Table 11-Summary of Financial Impact	34
Table 12-R-Value Calculation for Brick façade (Old System)	39
Table 13-R-Value Calculation for CarbonCast (New System)	40
Table 14-Temperature Design Considerations	40
Table 15-Summer Heat Gain Calculations	41
Table 16-Winter Heat Loss Calculations	
Table 17-Analysis of Savings and payback period	41
Table 18-Responses to Schedule and Cost Impacts	47
Table 19-Overall Cost Savings Possible from improved Site Logistics	
Table 20-Detailed Breakdown of General Conditions estimate	55
Table 21-Detailed Structural Estimate	57
Table 22-Explanation of tasks as defined in Process Model	
Table 23-Explanation of Events as defined in Process Model	61
Table 24-Revit take off of exterior Wall area	62

ACKNOWLEDGEMENTS

I would like to extend my deepest appreciation to the following people for their assistance, insight, and time throughout the past year:

• Gilbane Building Company

- Benjamin Alexander, Assistant Project Manager
- o Ben Miller, Project Engineer
- o Brian Horn, 3D Design Coordinator, DSL

• Doctors Community Hospital

- Jerry Dyer, Director of Plant Operations
- Thomas Crowley, Executive Vice President
- o Lynn Woodell, Asst to Mr. Dyer
- o Regina Robinson, Asst to Mr. Crowley

• DCH Construction Team

• Penn State Faculty

- o Dr. John Messner
- o Professor Kevin Parfitt
- Professor Robert Holland

• Industry Professionals

- Jason Reece, Balfour Beatty
- Kurt Maldovan, Jacobs

• Fellow AE Students, especially

- o Lindsay Hagemann
- o Craig Dubler
- o Shane Goodman
- o Chitwan Saluja

EXECUTIVE SUMMARY

This document is a comprehensive technical analysis of the construction of the Doctors Community Hospital (DCH) expansion currently underway in Lanham, MD. An overview of the project, including a look at the project team, the client, the current design and construction methods was performed. Other important information such as site plans, current schedules, and project costs were also outlined.

Three areas of analysis were performed and address different aspects of the construction industry. Value engineering, schedule reduction, constructability, and a critical industry issue were four items addressed in these analyses.

The first analysis focused on a critical industry issue: BIM Implementation. BIM is growing in popularity and has much of the industry interested in its capabilities. This analysis focused specifically on 3D MEP coordination and a generalized process for performing this task. The goal was to generate a process that could tie into ongoing research at Penn State with the Computer Integrated Construction group. A process map based on input from several experience industry members was developed. The application of this process to the DCH project was also analyzed and a plan for implementation was created.

Analysis Two focuses on using a precast façade in place of the current system, hand laid brick façade. Positive gains in the schedule, decreasing it 6 weeks, were realized by using the new system. Structural calculations were performed to ensure that the heavier system was still able to be supported without a redesign of the steel superstructure. Mechanical calculations showed that there was improved energy efficiency which translated into operations savings of roughly \$2,700 per year. Initial costs were significantly higher, and as such, this alternative system was deemed unfeasible.

The final analysis looked at the current site logistics, specifically the site congestion, and how it affected the constructability of the project. Interviews with subcontractors were performed to assess the effects of the congested site on their respective trades. This information was synthesized and an overall cost and schedule impact was generated based on their input. Property adjacent to the site that DCH contemplated purchasing was looked at from a cost/benefit standpoint based on this new information. Had the owner moved to purchase the land 2-3 years ago at the original offer price of \$500,000, it would have been a good investment. The current asking price of \$2 million is too high for it to be a viable move at this time.