

**U. S. DEPARTMENT OF ENERGY
OFFICE OF SCIENCE -- CHICAGO OFFICE**

**NATIONAL ENVIRONMENTAL POLICY ACT (NEPA)
ENVIRONMENTAL EVALUATION NOTIFICATION FORM**

To be completed by "financial assistance award" organization receiving Federal funding. For assistance (including a point of contact), see "Instructions for Preparing SC-CH F-560, Environmental Evaluation Notification Form".

Solicitation/Award No. (if applicable): 04CH11192

Organization Name: Rush University Medical Center

Title of Proposed Project/Research: Advanced Emergency Medical Response Center

Total DOE Funding/Total Project Funding: \$2.171M/\$30M

I. Project Description (use additional pages as necessary):

A. Proposed Project/Action (delineate Federally funded/Non-Federally funded portions)

The new Emergency Department (ED) is but one aspect of the total hospital construction project, which has become a \$900M construction and renovation project. The project consists of building an advanced emergency department based upon the concept of a "Center for Advanced Emergency Response" that allows the ED to respond to and treat victims of chemical, biological, radiological, nuclear or explosive (CBRNE) events as well as functioning as a standard emergency on a day to day basis. This concept requires an overlap with the hospital design to install (both in the ED and the rest of the facility) the special physical, mechanical and equipment infrastructure to support the ED's response to these events and the surge capacity demands that will be placed upon the hospital to allow the flow of patients from the ED to the inpatient setting to increase the capacity of the ED to treat additional victims. The infrastructure involves special HVAC equipment to provide negative or positive pressure air flow, contaminated waste water runoff containment tanks, redundant utilities, and alternate treatment areas. Initial DOE funding was provided for design costs of the ED; remaining funds will be used toward construction costs.

B. Would the project proceed without Federal funding?

Yes No

If "yes", describe the impact to the scope:

The project would proceed in a much reduced capacity without federal funding. The emergency department would function more as a typical department and not be an advanced CBRNE response center. Without federal funding, certain additional design features could not be incorporated such as the 10,000 gallon contaminated water runoff or the expansive alternative treatment areas for surge capacity.

II. Description of Affected Environment:

The new facility that will house the Emergency Department is called the "East Tower" and will be a 14-floor building constructed on green space that was formerly used as tennis courts. The facility is located on the near west side of the city of Chicago in the Illinois Medical District (IMD) of the city. The tower is bordered on the north and south between Congress Parkway and Harrison Streets and on the east and west between Paulina and Ashland Avenues. The Emergency Room will make up approximately 40,000 square feet of space and will be located at the ground level of the building. See attached monthly progress report that contains up-to-date photos, description and sketches. Also attached are letters from Illinois Historic Preservation Agency and Illinois EPA, and a site investigation performed by URS Corporation.

III. Preliminary Questions:

- | | Yes | No |
|---|--------------------------|-------------------------------------|
| A. <u>Is the DOE-funded work <i>entirely</i> a "paper study"?</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

If "Yes", ensure that the description in Section I reflects this and go directly to Section V.

- | | | |
|---|--------------------------|-------------------------------------|
| B. <u>Will the work to be performed take place <i>entirely</i> in existing buildings?</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
|---|--------------------------|-------------------------------------|

And NOT:

- | | | |
|---|-------------------------------------|--------------------------|
| 1. Threaten a violation of applicable statutory, regulatory, or permit requirements for environment, safety, and health? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Require the siting, construction or major expansion of waste treatment, storage, or disposal facilities? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Disturb hazardous substances, pollutants, or contaminants preexisting in the environment? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. Adversely affect environmentally-sensitive resources identified in Section IV.A.? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5. Be connected to another existing/proposed activity that could potentially create a cumulatively significant impact? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. Have an inherent <i>possibility</i> for high consequence impacts to human health or the environment (e.g., Biosafety Level 3-4 laboratories, activities involving high levels of radiation)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

If "Yes" to Question III.B. and ALL six subsequent questions, ensure the descriptions in Sections I and II reflect this and go directly to Section V.

IV. Potential Environmental Effects:

Attach/insert an explanation for each "Yes" response.

- A. Sensitive Resources: Will the proposed action result in changes and/or disturbances to any of the following resources?

- | | Yes | No |
|--|--------------------------|-------------------------------------|
| 1. Threatened/Endangered Species and/or Critical Habitats | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. Other Protected Species (e.g., Burros, Migratory Birds) | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3. Sensitive Environments (e.g., Tundra/Coral Reefs/Rain Forests) | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 4. Archaeological/Historic Resources | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5. Important Farmland | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 6. Non-Attainment Areas for Ambient Air Quality Standards | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 7. Class I Air Quality Control Region | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 8. Special Sources of Groundwater (e.g. Sole Source Aquifer) | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 9. Navigable Air Space | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 10. Coastal Zones | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 11. Areas with Special National Designation (e.g. National Forests, Parks, Trails) | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 12. Floodplains and Wetlands | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

- B. Regulated Substances/Activities: Will the proposed action involve any of the following regulated items or activities?

- | | Yes | No |
|---|--------------------------|-------------------------------------|
| 13. Natural Resource Damage Assessments | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 14. Exotic Organisms | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 15. Noxious Weeds | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 16. Clearing or Excavation (indicate if greater than one acre) | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 17. Dredge or Fill (under Clean Water Act, Section 404, indicate if greater than ten acres) | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

B. Regulated Substances/Activities: Will the proposed action involve any of the following regulated Items or activities? (continued)

	Yes	No
18. Noise (in excess of regulations)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
19. Asbestos Removal	<input type="checkbox"/>	<input checked="" type="checkbox"/>
20. PCB's	<input type="checkbox"/>	<input checked="" type="checkbox"/>
21. Import, Manufacture, or Processing of Toxic Substances	<input type="checkbox"/>	<input checked="" type="checkbox"/>
22. Chemical Storage/Use	<input checked="" type="checkbox"/>	<input type="checkbox"/>
23. Pesticide Use	<input type="checkbox"/>	<input checked="" type="checkbox"/>
24. Hazardous, Toxic, or Criteria Pollutant Air Emissions	<input type="checkbox"/>	<input checked="" type="checkbox"/>
25. Liquid Effluents	<input type="checkbox"/>	<input checked="" type="checkbox"/>
26. Underground Injection	<input type="checkbox"/>	<input checked="" type="checkbox"/>
27. Hazardous Waste	<input checked="" type="checkbox"/>	<input type="checkbox"/>
28. Underground Storage Tanks	<input checked="" type="checkbox"/>	<input type="checkbox"/>
29. Radioactive Mixed Waste	<input type="checkbox"/>	<input checked="" type="checkbox"/>
30. Radioactive Waste	<input checked="" type="checkbox"/>	<input type="checkbox"/>
31. Radiation Exposure	<input checked="" type="checkbox"/>	<input type="checkbox"/>
32. Surface Water Protection	<input type="checkbox"/>	<input checked="" type="checkbox"/>
33. Pollution Prevention Act	<input type="checkbox"/>	<input checked="" type="checkbox"/>
34. Ozone Depleting Substances	<input type="checkbox"/>	<input checked="" type="checkbox"/>
35. Off-Road Vehicles	<input type="checkbox"/>	<input checked="" type="checkbox"/>
36. Biosafety Level 3-4 Laboratory	<input type="checkbox"/>	<input checked="" type="checkbox"/>

C. Other Relevant Information: Will the proposed action involve the following?

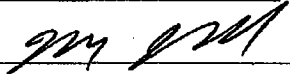
	Yes	No
37. Potential Violation of Environment, Safety, or Health Regulations/Permits	<input type="checkbox"/>	<input checked="" type="checkbox"/>
38. Siting/Construction/Major Modification of Waste Recovery, or Waste Treatment, Storage, or Disposal Facilities	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
39. Disturbance of Pre-existing Contamination	<input type="checkbox"/>	<input checked="" type="checkbox"/>
40. New or Modified Federal/State Permits	<input type="checkbox"/>	<input checked="" type="checkbox"/>
41. Public Controversy	<input type="checkbox"/>	<input checked="" type="checkbox"/>
42. Environmental Justice	<input type="checkbox"/>	<input checked="" type="checkbox"/>
43. Action/Involvement of Another Federal Agency (e.g. license, funding, approval)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
44. Action of a State Agency in a State with NEPA-type law. (Does the State Environmental Quality Review Act apply?)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
45. Public Utilities/Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>
46. Depletion of a Non-Renewable Resource	<input type="checkbox"/>	<input checked="" type="checkbox"/>
47. Extraordinary Circumstances	<input type="checkbox"/>	<input checked="" type="checkbox"/>
48. Connected Actions	<input type="checkbox"/>	<input checked="" type="checkbox"/>
49. Exclusively Bench-top Research	<input type="checkbox"/>	<input checked="" type="checkbox"/>
50. Only a Laboratory Setting	<input type="checkbox"/>	<input checked="" type="checkbox"/>

OUT

APR 17 11:19 / 10
SEE ATTACHED

V. Financial Assistance Award Organization Concurrence:

A. Organization Official (Name and Title): Mick P. Zdeblick, Vice President, Campus Transformation

Signature:  Date: 5/4/10

e-mail: mick_zdeblick@rush.edu Phone: 312.942.7881

B. Optional Concurrence (Name and Title): _____

Signature: _____ Date: _____

e-mail: _____ Phone: _____

Remainder to be completed by SC-CH

VI. SC-CH Concurrence/Recommendation/Determination:

A. SC-CH Office of Acquisition and Assistance or Office of Safety, Technical & Infrastructure Services:

Project Director or Contract Specialist (Name and Title): PATRICE BREWINGTON
Signature: [Signature] Date: 7/8/2010

B. SC-CH NEPA Team Review:

Is the project/activity appropriate for a determination or a recommendation to the Head of the Field Organization by the NEPA Compliance Officer (NCO) under Subpart D of the DOE NEPA Regulations?

Yes No

Specific class(es) of action from Appendices A-D to Subpart D (10 CFR 1021): B3.12

Name and Title: JAMES OPZEDEK
Signature: [Signature] Date: 7/19/2010

C. SC-CH Counsel (if necessary):

Name and Title: N/A
Signature: _____ Date: _____

D. SC-CH NEPA Compliance Officer:

The preceding pages are a record of documentation required under DOE Final NEPA Regulation, 10 CFR 1021.400.

- Action may be categorically excluded from further NEPA review. I have determined that the proposed action meets the requirements for Categorical Exclusion referenced above.
- Action requires approval by Head of the Field Organization. Recommend preparation of an Environmental Assessment.
- Action requires approval by Head of the Field Organization or a Secretarial Officer. Recommend preparation of an Environmental Impact Statement.

Comments/Limitations if necessary:

Signature: [Signature] Date: 7/21/2010
Peter R. Siebach
SC-CH NEPA Compliance Officer

Attachment

IV. Potential Environmental Effects: Additional Information for Potential Environmental Effects (IV-A., B., C.)

A. Sensitive Resources: Will the proposed action result in changes and/or disturbances to any of the following resources?

No 'Yes' answers.

B. Regulated Substances/Activities: Will the proposed action involve any of the following regulated items or activities?

- Question #22 – Chemical Storage Use
- Question #27 – Hazardous Waste
- Question #28 – Underground Storage Tanks
- Question #30 – Radioactive Waste
- Question #31 – Radiation Exposure

All as they pertain to the usual and customary operations in a medical facility.

C. Other Relevant Information: Will the proposed action involve the following?

- Question #38 – Siting/Construction/Major Modification of Waste Recovery, or Waste Treatment, Storage, or Disposal Facilities

As it pertains to the placement of decontamination shower water runoff tanks which act as holding tanks until a certified toxic waste removal company safely pumps out the contaminant to be properly disposed of per federal regulations.

Attachment to EENF for Rush University Medical Center

The grantee checked "yes" to question 38 of the EENF (Siting/Construction/Major Modification of Waste Recovery or Waste Treatment, Storage or Disposal Facilities). This block should not have been checked yes. As part of the medical center's ability to serve as an advanced emergency center in case of a chemical, biological, radiological, nuclear or explosive (CBRNE) event, a 10,000 gallon tank was installed underground during the construction of the emergency room. This tank will handle only contaminated waste water runoff in an emergency event. The tank will act as a holding tank for the shower water runoff until a certified toxic waste removal company safety pumps out the material and can properly dispose of it. The tank and its proposed usage do not fit the definition intended for "major modification of waste recovery".

In my opinion, Block 38 should not have been checked "yes". Therefore, a categorical exclusion under B3.12 is requested for this EENF.



Patrice Brewington

PSS-CH

July 16, 2010





**Illinois Historic
Preservation Agency**

FAX (217) 782-8161

1 Old State Capitol Plaza • Springfield, Illinois 62701-1512 • www.illinois-history.gov

Cook County
Chicago

Infrastructure for Center for Advanced Emergency Response, Rush University
Medical Center
1653 W. Congress Parkway
DCEO-GOV100020
IHPA Log #015040710

April 15, 2010

Mary Feagans
IL Department of Commerce and Economic Opportunity
620 East Adams
Springfield, IL 62701

Dear Ms. Feagans:

This letter is to inform you that we have reviewed the information provided concerning the referenced project.

Our review of the records indicates that no historic, architectural or archaeological sites exist within the project area.

Please retain this letter in your files as evidence of compliance with Section 4 of the Illinois State Agency Historic Resources Preservation Act (20 ILCS 3420/1 et. seq.). This clearance remains in effect for two years from date of issuance. It does not pertain to any discovery during construction, nor is it a clearance for purposes of the Illinois Human Skeletal Remains Protection Act (20 ILCS 3440).

If you have any further questions, please contact me at 217/785-5027.

Sincerely,

Anne E. Haaker
Deputy State Historic
Preservation Officer

c: Mick Zdeblick, Rush University Medical Center

July 9, 2010

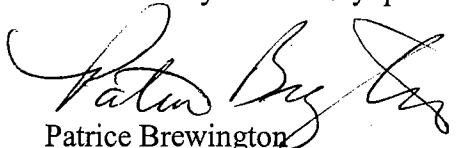
Mr. Jim Oprzedek, Environmental Engineer
Safety and Technical Services Group

**SUBJECT: REQUEST FOR REVIEW OF ENVIRONMENTAL EVALUATION
NOTIFICATION FORM (EENF) FOR FY2006 CONSTRUCTION GRANT PROJECT
AT RUSH UNIVERSITY MEDICAL CENTER, DOE NO. DE-FG02-06CH11192**

Attached for your review and consideration is an EENF for a construction grant project currently underway at Rush University Medical Center in Chicago, Illinois. Funding in the amount of \$2,171,000 has been provided by Congressional mandate over a period of three years. The project involves the construction of a new Emergency Department at the medical center that is part of a \$900M project.

I have reviewed the documentation provided by the medical center and believe this project qualifies as a Categorical Exclusion. Originally, a CX was received under A.9 because funds were being used for A/E design activity. Subsequently, the medical center requested that funding be utilized for construction, too. Therefore, a new EENF was prepared with supporting documentation, including a site investigation report, SHPO and Illinois EPA determinations. A recent project monthly progress report is provided that contains photographs of the on-going construction activity.

I would appreciate your review of this document. I would be happy to discuss this project further and provide any additional information you might need. I can be reached at 2-6623 if you have any questions regarding this submittal.



Patrice Brewington
Program Support Services (PSS)

Attachment:
As stated