



For Immediate Release  
November 23, 2007  
U.S. Army Corps of Engineers

## *USACE awards new surgical hospital in Maysan Province*

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Robin Parks, GRS project manager, and Maj. Stephen Herda, Maysan resident engineer, discuss the construction specifications of the Maysan Surgical Hospital with some Iraqi officials and GRS local engineers. (USACE photo by Mohammed Aliwi)

**TALLIL**, Iraq—A contract was awarded recently to build a new surgical hospital in Amarah, the capital of Maysan Province, at a cost of \$12.7 million.

Col. Steve Hill, commander of the Gulf Region South district of the U.S. Army Corps of Engineers, said work could start as early as February if everything goes smoothly. And, again assuming that eve-

rything goes smoothly, the project could be finished by the summer of 2009, Hill said.

Robin Parks, a USACE project manager, said the project is divided into two phases, with phase I featuring the construction of the main hospital building and phase II including the emergency department. Other elements of the initial phase are a

support building, a physician residence, a sewage treatment plant and a guard house, she said.

Parks said the main hospital building will house a surgery department, an obstetrics/gynecology department, a clinic and X-ray department, and ancillary support services.

An Iraqi engineer with GRS said the surgical department will have 10 surgical beds and that the OB/GYN department will have 18 beds and 4 incubators. Support services will include a pharmacy, laboratory, registration and medical records administration, food services and environmental services, the engineer said.

The support building will include morgue, laundry, materials management, engineering, external wall and medical gas storage. The physician residence building will house eight physicians. The phase I building is located on the site in such a manner that phase II work can be added without major interruption to phase I hospital services.

The Maysan hospital project has been the subject of several meetings over the last two months, including a meeting in October to discuss the quality control plan for the hospital and to explain to the Maysan engineers the processes and regulations followed by USACE and U.S. government contracts.

Participating in that meeting were people from GRS, the Maysan Provincial Reconstruction Team (PRT), three engineers from the Maysan Ministry of Health (MOH) and one engineer from the Maysan Governor's Office. More recently, officials from Maysan, including representatives of the provincial council, police and governors office, traveled to GRS headquarters at Tallil to discuss issues related to the hospital and other projects with GRS and PRT leaders.

According to Parks, phase II includes the emergency department, 50 additional medical patient beds, support services, and an additional 8-bed physician residence. The contract is for the structure only. The Maysan government has provided a "Letter of Sustainment" agreeing to provide for such things as the furniture, medical equipment, office equipment, medicines, staff, and maintenance.

Barry Stuard, USACE resident engineer for the project, said phase 1 is the only part of the project currently funded and that funding for phase 11 is awaited. Parks explained the Economic Support Fund program has not received its total budget for 2007 projects yet.

The plan allocates the anticipated building "footprints" of the medical facilities, the public roads, private access roads, and parking lots. The building footprints are projected forecasts based on assumptions of medical need and growth.

The quality assurance team for the project includes GRS project managers and professional engineers of Health Sector, and Maysan Joint Engineering Team (JET) made up of three Iraqi Ministry of Health engineers and three Governor's Office engineers, an Iraqi engineer said, explaining that the JET consists of two structural engineers, two electrical engineers and two mechanical engineers.

The engineer said the design intent of the master plan is to create a sense of place, to provide the users with a campus environment which allows for pedestrian access within the complex, to allow for interconnectedness amongst the buildings while considering growth and future expansion of the departments, and to provide a functional vehicular circulation path which considers both public and private access to the buildings.

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