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## Najaf Teaching Hospital Nears Completion

By Betsy Weiner

NAJAF, Iraq -- The Najaf Teaching Hospital, a project worth over \$10 million, will open in early 2007 featuring a seven-story building capable of housing 420 patients and containing 13 operating rooms.

The hospital development, which has survived gun battles, the termination of its primary contractor, as well as technical and serious security issues, first came to the attention of the Iraq Reconstruction Management Office (IRMO) in September 2004.

During that month, the flooded basement, containing debris and human remains, was cleaned and repaired, as were outpatient emergency services.

After assessing the damage, IRMO decided to refurbish the entire hospital in December 2004.

Parsons Corp., the design-build contractor for the project completed the emergency repairs in February 2005, but pulled out of the project soon thereafter.

A local contractor finished the outpatient facilities and completed all the immediate emergency repairs by April 2005.

"We awarded the final 370-day design build contract to a local Najaf contractor in July 2005," said Jim Lockard, health care program manager for the Project Contracting Office (PCO) and Gulf Region South District (GRS).

"Renovation features that were included in this phase of the renovation were to renovate the industrial kitchen, laundry and morgue rooms, repair the second through the seventh floors, refurbish the doctors' residences, the morgue, the sewer treatment plant and other buildings on the hospital campus."

Lockard said bids were taken for the work that remained from the original contract, the hospital director was consulted and the



*The new hospital facility of the Najaf Teaching Hospital has seven floors, it can house over 450 patients, and has 13 operating rooms. [ARMY PHOTO]*

made to a local company.

“We selected an Iraqi engineer Kal (not identified for security concerns) to be the project manager and he has been a great force on the project for the past 18 months.”

Najaf is a holy city to Shiite Muslims, not only because of the shrine of Al Iman Ali, son-in-law to the prophet Mohammed, who while praying in Al Kufa Mosque, but also because of the Valley of Peace, a gargantuan graveyard in which the Shiite prefer to Many Islamic religious institutions, called the Al Hawza Al Ilmia, or scientific schools, for clerical candidates, are also located in adding to the mystique of the city.

Because of its importance to the Shiite faith, millions of people visit the city, placing extra demand on the hospital, Kal said, and that the facility also serves the entire Najaf province as well as adjacent provinces for certain medical specialties such as oncology and kidney dialysis.

“Many physicians who worked at the hospital but left when it closed are now returning to work,” he said. “Sixty-five specialists and general physicians work here now.”

He added that the hospital will employ about 1,250 people; that 100 physicians will reside on the hospital grounds; and that 200 and 50 pharmaceutical students will train at the facility.



*A view of the Najaf Teaching Hospital campus, when the facility opens later in 2007 it will accommodate 200 medical and 50 pharmaceutical students. [ARMY PHOTO]*

The Gulf Region Division, IRMO and the Japanese government are supplying the campus.

The GRD and IRMO will provide the accessories and enough equipment for the operating rooms.

“Getting the equipment here – that was a security challenge,” Kal said. “A lot of roads were closed or there was a curfew because it was unsafe. But we faced problems with some of our technicians. The contractor he had to house these people until the job was completed.”

Kal emphasized the fact that, because of a different kind of construction, a hospital requires technical people capable of building complicated systems a hospital requires. It is not easy to find, and that this put an extra burden on the contractor, as well as on the people doing the actual building.

Systems such as the mechanical, electrical, and plumbing – all demanded that they

work closely with the construction company to ensure quality work.

“In the medical field, it is necessary to always have back-up systems because the hospital cannot adequately treat people if the systems fail,” he said. “So we spent extra time with the contractor to make sure he understood the scope of work.”

Security issues in Najaf itself cost the project five months time, but were overcome by the dedication of the team and the tenacious Iraqi engineers who worked the project.

“The GRS team could not always make it out to the site because of the danger,” he said. “And sometimes the hospital staff tried to get the contractor to perform their agenda. But after many meetings with them, we were able to convince the staff to work with us to finish the job.”

At one point, Kal said, the hospital was sending “disappointing reports to the health ministry, but now they come with us every day to inspect the systems and accept them. And because of this big change, the end production is good and the project is running smoothly.”

But the project experienced a severe loss when the hospital director, Dr. Safaah Al Ameer, was murdered in September 2001.

“It was a very sad day,” Kal said. “But the only impact his assassination had on the project itself was the coordination between the hospital’s engineers. It took us two weeks, but we got back on schedule. And he would have wanted that.”

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