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| | Initial Visit Registration Form | | Washroom |
| | Reception | | Wheelchair Accessible Washroom |
| | Payment Calculation Desk | | Care Bed |
| | Prescription FAX Station | | Ostomate Toilet |
| | Self-Service Payment Kiosks | | Baby Holder |
| | Elevator | | Diaper Changing Station |
| | Vending Machines | | Breastfeeding Room |
| | Public Phone | | ATM |

- 6 Payment
- 5 Medical Certificate
- 3 Calculation
- 2 Return Visit
- 1 Initial Visit