

# VETERINARY ECONOMICS<sup>®</sup>

Merit **winner** HOSPITAL DESIGN

## Building for business: TAKE TWO

Just four years after opening a large award-winning facility, these doctors at Upstate Veterinary Specialists in Greenville, S.C., built again—doubling their space. The reason? **It made great business sense.**

BY SARAH A. MOSER

**ASK MOST VETERINARIANS WHY THEY BUILD NEW facilities, and they generally say something like, “We’ve run out of space. We’re bursting at the seams. We need more exam rooms to function properly.” However, Dr. Dermot Jevens and his partner, Dr. Keith Allen, decided to build long before staff members started tripping over each other in the treatment room.**



Photos by David Dietrich, David Dietrich Photography



Specialty lobby: To maintain natural light—a feature the whole team loves—the design incorporates two towering atriums, one in the specialty area and one in oncology. Seven-foot-tall stone sculptures and water elements in each atrium provide a sense of calm.

The owners of Upstate Veterinary Specialists in Greenville, S.C., constructed a stunning 12,760-square-foot building in 2002 that earned them the 2003 *Veterinary Economics* Hospital of the Year award. A mere two years, three months, and seven days after opening that facility, Drs. Jevens and Allen placed a call to Mark Hafen, AIA, their architect, and asked him to double their space.

### Laying out the plan

This expansion grew from the doctors' wish to make cancer management a core part of their practice. "And to do it well," Dr. Jevens says, "we needed to dedicate space to our oncology patients."

The increased cancer case-load would demand expansion in the surgery suites, too. These doctors didn't want to wait until the practice was bursting at the seams. They wanted to build again as soon as it was financially feasible—and while the current space could still accommodate team members easily.

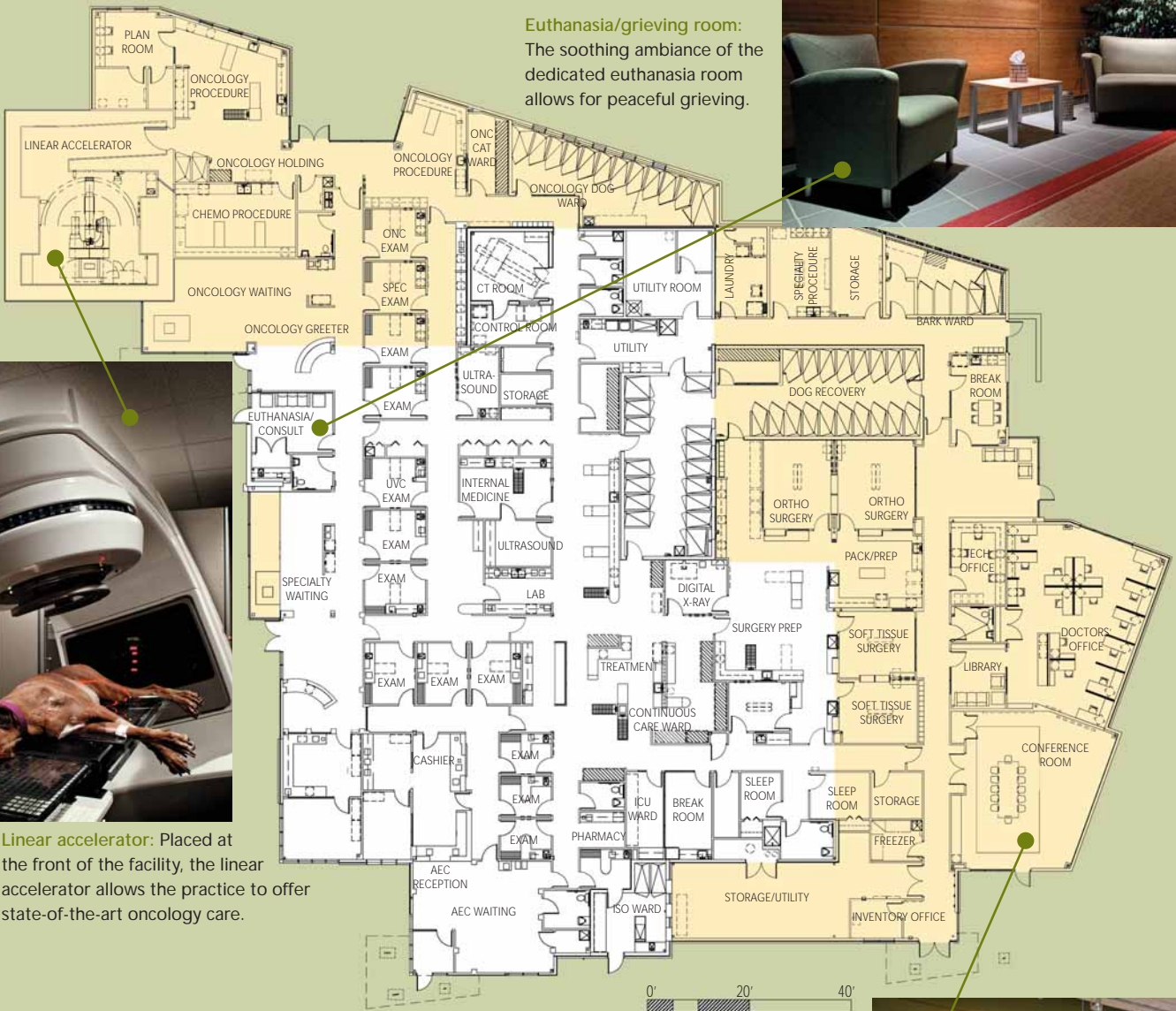
In the end, Drs. Jevens and Allen pulled off an expansion and a renovation less than four years after opening the doors of their original facility. Business is good, clients and team members are happy, and the bonus: The facility's design garnered them a second *Veterinary Economics* nod for excellence, this time with a Merit Award for best specialty practice in the 2007 Hospital Design Competition.



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Floor plan Upstate Veterinary Specialists/  
Animal Emergency Clinic

**Euthanasia/grieving room:**  
The soothing ambiance of the dedicated euthanasia room allows for peaceful grieving.



**Linear accelerator:** Placed at the front of the facility, the linear accelerator allows the practice to offer state-of-the-art oncology care.

**Conference room (right):** The multi-purpose design of the conference room is ideal for accommodating small group meetings as well as large practice-wide and CE meetings.

**Site plan (left):** The site plan shows the orientation of the facility and parking lot on the property.





**Oncology and specialty entrances:** Each entrance complements the practice and yet is unique and easily identifiable. Large atriums, lit at night, serve as landmarks and draw in clients. The linear accelerator is visible from this view.



**Endoscopy suite:** Technology is used extensively not only to help produce efficient work patterns in the practice, but also to help educate clients about the nature of their pets' problems.



### Take-away lesson

## Hire only the best

When Drs. Dermot Jevens and Keith Allen built their original facility in 2002, they made an effort to align themselves with hardworking, high-quality professionals. They wanted only the best working relationship with their architect, contractors, and advisors. And they realized the importance of setting up their project goals, then getting out of the way. (See "Two practices; one first-rate plan" in the March 2003 issue of *Veterinary Economics* or online at [HospitalDesign.net](http://HospitalDesign.net))

That thinking didn't change with their next project. If anything, Dr. Jevens says it was even more important to hire the best the second time around. "We spent a ton of time the first go-round interviewing architects and contractors to find the right fit for our group," Dr. Jevens says. "Luckily for us, all that work paid off with a smooth-running project and a great final product."

Because everything went well and the personalities clicked, Drs. Jevens and Allen assembled the same people to tackle the next phase of the project. In fact, they wanted the same team so strongly that they waited nine months for site supervisor Ken Horton, of SYS Constructors, to finish another job before starting on this facility.

The second project presented an even greater challenge for the building team than the first, Dr. Jevens says. After all, he says, it's harder to make an addition blend than to build a new space. At one point, architect Mark Hafen quipped, "You guys don't ask for much, do you?" But Dr. Jevens says Hafen and everyone else were up for the challenge.

## Wraparound building

"I challenge anyone to pick out where the old practice space ends and the new space starts," Dr. Jevens says. "It's impossible to tell." That's just how seamless he and Dr. Allen wanted the design to be. But it wasn't easy.

To make the new design work, the design team had to demolish 25 percent of the existing practice—which was only two years old at the time—and wrap 13,444 square feet of new design around two sides of the existing facility. "We didn't want it to look like a box attached to a box," Dr. Jevens says. And they wanted their team to be up and running every single day of the project.





**Orthopedic surgery, staff atrium:** The addition meant losing two glass walls that looked outside. In their place, the team designed orthopedic suites that face into a sunny staff atrium and beyond to a pocket park. The facility has three pocket parks, all of which were added with the addition. The team uses the pocket parks to exercise pets housed in various parts of the hospital instead of using one open exercise yard. The atrium is at the center of the lunch room, doctors' workspace and library, technicians' office, and conference room.



**Oncology atrium:** The use of multiple reception areas eases traffic flow and allows for high-quality interaction between clients and staff. To help the look of this area tie in with the addition, designers raised the ceiling height and added more color.

The practice owners worked with their contractors early to determine the project logistics, plotting out critical phases. Then they met with the contractor every two weeks and let team members know when and where they'd be

working while their new space was being built.

"We relied heavily on our team members during this time," Dr. Jevens says, "because they knew best how the changes would affect their areas and what steps we

should take to minimize distractions." The irony of the entire project is that the oncology department—which was the impetus for building—was finished first, but those team members moved in last because their space was being used for everything else while the rest of the project wrapped up.

But, oh, how it wrapped up: four additional exam rooms, 12 more treatment stations, two more surgery suites, a new internal medicine treatment area, an endoscopy suite, an oncology wing, and a new oncology waiting and reception area. The showpiece for this project is the linear accelerator used in oncology care. "While linear accelerators are big and expensive, they usually aren't pretty," says architect Mark Hafen,

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of Animal Arts in Boulder, Colo. The group decided that the best way to sell state-of-the-art oncology was to put the linear accelerator right up front where everybody could see it. They wrapped it in shining dark metal and lit it with floodlights at night. This element grounds the rest of the facility visually, Hafen says.

### No resting on their laurels

With two building projects completed in less than four years and a practice filling 26,000 square feet, the logical thing would be for these doctors to rest from their roller coaster ride. But resting isn't in the owners' repertoire. Now that they have the facility to support it, Drs. Jevens and Allen want to put the hospital's oncology practice on the map. "We're still tweaking our systems and figuring out the best way to deliver oncology care along with our other services," Dr. Jevens says.

After that the sky's the limit. And they won't rule out building again. "I don't know what we'll do or when we'll do it, but I do know that change is always ahead of us," says Dr. Jevens. "We're always up for a challenge and for doing something different. There's no point in doing something if you can't do it right and enjoy it—and we do." ■

Sarah A. Moser is a freelance writer and editor in Olathe, Kan. Please send questions or comments to [ve@advanstar.com](mailto:ve@advanstar.com).

### A look at the numbers VETERINARY ECONOMICS

Upstate Veterinary Specialists/Animal Emergency Clinic  
393 Woods Lake Road, Greenville, SC 29607  
Phone: (864) 233-7650 • Fax: (864) 233-7631  
[info@upstatevetspecialists.com](mailto:info@upstatevetspecialists.com) • [upstatevet.com](http://upstatevet.com)

Owners: Dermot Jevens, DVM, and Keith Allen, DVM

Associates, Upstate Veterinary Specialists: 9 full time  
Associates, Animal Emergency Clinic: 4 full time

Hospital team, Upstate Veterinary Specialists: 40 full time  
Hospital team, Animal Emergency Clinic: 20 full time, 18 part time

Practice type: Small animal specialty referral, emergency, and critical care

Building size: 26,204 square feet

Number of runs: 49 hospital indoor

Number of cages: 96

Number of parking spaces: 56

Construction cost: \$2.8 million (building only, excludes land purchase, landscaping, parking lot, etc.)

Site improvement fees: \$100,000

Professional fees: \$230,000

Equipment cost: \$200,000

Furnishing cost: \$30,000

Computer cost: \$25,000

Year built: 2006

#### Architect:

Mark R. Hafen, AIA, Animal Arts/Gates Hafen Cochrane  
735 Walnut St., Boulder, CO 80302  
Phone: (800) 332-4413 • Fax: (303) 444-1759  
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Library: A comfortable library provides a transition from workspace to the doctors' office space.