



Checklist medical practices

Please keep in mind, the carbon footprint is calculated for **one year**.

If you cannot find all the data, average values can also be used for various questions. The questions for which average values are given are marked in the following list with: (∅ **available**).

We are aware that a lot of data must first be compiled. However, in order to be able to determine the most accurate CO₂ value of the practice, it is important that as many questions as possible are answered. If no data is found, a field can be skipped if necessary.

Helpful documents:

- Accounting documents
- Service charge settlement for electricity, heating and water
- Calculation of the drug turnover, if applicable

The following categories are queried in the calculator:

- Electricity
- Heat
- Water
- Office supplies
- Practice material
- IT & communication
- Waste
- Cleaning
- Catering
- Commute
- Business trips
- Basic inventory
- medical devices
- Medication/patient mobility (explicitly optional), if applicable



General

Number of employees : _____

Number of working days (∅ available) : _____

Size practice area : _____

Average number of patients **per quarter** : _____

Average number of visits per patient **per year** : _____

(Note: possible estimation based on GOP 03000 and 03221 plus patients from GP-centered care and private patients or estimation with appointment calendar)

Electricity (annual statement from the electricity provider)

Yearly consumption: _____ kWh

Energy source :

- | | |
|---|----------------------------------|
| <input checked="" type="radio"/> STROMMIX | <input type="radio"/> ECO-POWER |
| <input type="radio"/> HYDRO-POWER | <input type="radio"/> SOLARSTROM |
| <input type="radio"/> WIND POWER | <input type="radio"/> UNKNOWN |

If there is an own generation of electricity:

Amount of electricity generated (in kwh): Solar power : _____ kWh

Wind power : _____ kWh

Heat (service charge settlement)

Yearly consumption: _____ kWh

Energy source :

- | | |
|---|--|
| <input type="radio"/> NATURAL GAS | <input type="radio"/> DISTRICT HEATING |
| <input type="radio"/> FOSSIL OIL | <input type="radio"/> ELECTRICITY |
| <input type="radio"/> RENEWABLE ENERGIES
wood pellets, geothermal heating... | <input type="radio"/> UNKNOWN |

If there is self-generation of heat by means of solar thermal:

generated heat: _____ kWh



Water (service charge settlement)

Water consumption: _____ m³ (∅ available)

Office supplies

Copying paper purchased in kg (∅ available) : _____ kg

(Copy paper (500 sheets) - 2.5 kg)

Purchased tissue paper in kg (∅ available) : _____ kg

(package of toilet paper (8 rolls) - ca. 1 kg; package of paper towels

(160 sheets) - ca. 0,6kg)

Paper rolls for patient couches (roll 0,5x5m - 1 kg) : _____ kg

Other paper (∅ available) : _____ kg

(recipe pads (500 pages - 0.7 kg), envelopes (1000 pcs. - 1.8 kg)

Number of printer cartridges used : _____

Number of magazines/month (and are they secondhand?) : _____

Practice material

Purchased quantity last year from...

Sets of uniforms : _____

Packs examination gloves : _____

(Surgical) instruments : _____

Anesthetics (in ml) : _____ ml

Bandage : _____

Disinfectant (in l) : _____ l

Blood samples per week : _____

IT and communication

sent and received Letters per week : _____

Emails sent and received per week : _____



Waste

Sizes of the following waste garbage bins:

- | | | | |
|-----------|-------------------------------------|-----------------|-------------------------------------|
| Plastic : | <input type="checkbox"/> 90l bag | Residual waste: | <input type="checkbox"/> 120 l ton |
| | <input type="checkbox"/> 240l ton | | <input type="checkbox"/> 240 l ton |
| | <input type="checkbox"/> 1100l ton | | <input type="checkbox"/> 1100 l ton |
| Paper: | <input type="checkbox"/> 120 l ton | Organic waste: | <input type="checkbox"/> 120 l ton |
| | <input type="checkbox"/> 240 l ton | | <input type="checkbox"/> 240 l ton |
| | <input type="checkbox"/> 1100 l ton | | |

Number of respective waste garbage cans:

Plastic: _____ Residual waste: _____ Paper: _____ Organic waste: _____

Empties per month:

Plastic: _____ Residual waste: _____ Paper: _____ Organic waste: _____

Percentage of plastic waste recycled or returned to manufacturers (in %) : _____

Cleaning

If necessary, the distance to be covered by the cleaning staff : _____ km

Catering: (∅ available)

We assume one lunch and coffee and water consumption per person, but give the option to leave a different specification in the detail request:

therefore if necessary:

Number of those eating lunch (∅ available) : _____

of which share of meat-based, vegetarian, vegan dishes in %

: _____% : _____% : _____%

Number of meal deliveries (in the whole year) : _____

Hot drinks consumed per day (in l) (∅ available) : _____ l

Cold drinks consumed per day (in l) (∅ available) : _____ l

(without tap water)



Commute:

What is the sum of distances of one-way commute per day and mode of transport? (∅ available - 16.5 km one-way)

Electric Car : _____ km Bicycle : _____ km

Bus/Train : _____ km Car : _____ km

Business trips (e.g. also home visits and meetings):

In each case, distances traveled by each mode of transport.

E-Bike : _____ km Bicycle : _____ km

Bus/Train : _____ km Car : _____ km

How many nights in a hotel? : _____

(Note: All appointments outside the usual work environment count as business travel).

Basic inventory

Number:

Kitchen : _____

Furniture : _____ (includes all cabinets, chairs, tables etc.)

Workplaces : _____ (includes desktop, screen, mouse, keyboard, phone)

Printer/copier : _____

Laptops : _____

Tablets : _____

Smartphones : _____

Television : _____

Medical Devices:

Number:



small devices (< 30 kg) (e.g. 20l sterilizer device) : _____

medium devices (around 100 kg) (e.g. ultrasonic device) : _____

large devices (around 1000 kg) (e.g. CT device) : _____

CO2 options patient and medications:

(It is up to you whether you want to take responsibility for these categories or not).

Patient Mobility:

Radius (in km) from which the majority of patients come (∅ available)

Radius : _____ km

Distribution of patients according to the means of transport they use (in %)

Bus/Train : _____% Car : _____%

Bicycle : _____% By Foot : _____%

(-> To answer this query, a sample survey can be done, for example).

Medication:

Prescription volume for drugs **per quarter**: _____ €