Equipment & Supplies Startup Guide

Cash-Pay Primary Care and Pediatric Practices

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How to Use This Guide

A new practice does not need to look like a ten-year-old practice on opening day.

The goal is to purchase what is needed to provide excellent care, create a professional patient experience, and operate efficiently. Many items can be added after the practice develops actual patient volume and demand.

Every purchase should answer three questions:
1. Is this needed to see patients when we open?
2. Will this improve patient care or workflow?
3. Does the benefit justify using startup cash?

1. Startup Purchasing Philosophy

Lean Startup Approach

Best for physicians who want to preserve cash and add services as demand develops.
Characteristics:
• Fewer exam rooms
• Shared equipment where practical
• Limited inventory
• Outsourced services when appropriate
• Delayed purchases until demand is proven

More Built-Out Startup

May make sense when:
• Patient volume is expected quickly
• The practice has secured funding
• The services require additional equipment
• The physician is entering an established market with demand already validated

2. Core Adult Primary Care Setup

Exam Room Equipment

Opening Essentials

Exam tables 1 per exam room
Provider stools 1 per exam room
Patient chairs 1–2 per room
Stethoscopes 1 per provider, plus shared spares
Blood pressure equipment 1 adult cuff set per room, including a bariatric cuff
Pulse oximeters 1 per room or shared
Thermometers 1 per room or shared
Otoscope/ophthalmoscope 1 per room or shared
Penlights 1 per provider
Reflex hammers 1 per room or shared
Exam room task lighting 1 per room, if not already built in
Scale 1–2 depending on layout
Height measurement equipment 1
Sharps containers 1 per clinical area
Medical waste containers At least one in each area where regulated medical waste is generated
Height-adjustable, ADA-accessible exam table and scale At least 1 of each, to meet accessibility requirements from opening

Consider Later

- Additional exam tables
- Dedicated equipment in every room
- Specialty diagnostic equipment
- Procedure equipment
- Additional monitoring equipment

3. Pediatric Practice Additions

Pediatrics requires additional equipment because of the age range and size variation of patients.

Opening Essentials

Infant scale 1
Pediatric blood pressure cuffs Multiple sizes
Infant length board 1
Pediatric pulse oximeter capability 1 per clinical area or workflow-dependent
Pediatric otoscope equipment 1 per room or shared
Growth measurement tools 1 set
Diaper-changing table or station 1 per exam room, or as workflow requires

Consider Later

- Vision screening equipment
- Hearing screening equipment
- Additional pediatric procedure equipment
- Specialty pediatric equipment

4. Clinical Supplies

Opening Essentials

Purchase enough for the first several months, not years.
Examples:
• Gloves
• Masks
• Eye protection or face shields
• Alcohol prep pads
• Gauze
• Bandages
• Tape
• Cotton swabs
• Tongue depressors
• Lubricant
• Syringes
• Needles
• Specimen containers
• Labels
• Sharps supplies
• Cleaning supplies
• Disinfectants
• Blood and body fluid spill kit
• Exam table paper
• Disposable covers
• Patient exam gowns and drapes
• Hand sanitizer dispensers — 1 per exam room and waiting area
• Emesis basins
• Adhesive remover

Starter Inventory Planning

Estimate:
Expected patients during first 90 days: _____
Estimated supply cost per patient: $_____
Initial supply purchase: $_____
Expected monthly supply expense: $_____
Adjust after you know your actual utilization.

Waste and Housekeeping

• Medical waste disposal service, if needed
• Sharps disposal service
• Cleaning and janitorial supplies or service
• Laundry or linen plan, if reusable linens are used

5. Phlebotomy and Specimen Collection

You do not need every item on this list for every practice, but the category itself should not be skipped.

Opening Essentials

- Blood draw chair
- Tourniquets
- Blood collection tubes
- Needles and butterfly sets
- Tube holders
- Specimen bags
- Urine cups
- Labels
- Centrifuge, if required by your lab arrangement
- Specimen refrigerator, if required
- Lab pickup or transport supplies
- Eyewash station or eyewash bottles, for bloodborne pathogen exposure risk

6. Procedures and Wound Care, if Offered

These items apply only if the practice offers in-office procedures or wound care.

Opening Essentials

- Suture removal kits
- Scalpels
- Forceps
- Scissors
- Sterile gloves
- Sterile drapes
- Local anesthetic supplies
- Wound irrigation supplies
- Dressing supplies
- Biopsy or specimen containers
- Cryotherapy equipment, if offered

Reusable Instruments

If the practice uses reusable instruments, decide before opening how they will be cleaned, disinfected, sterilized, or processed by an outside service. If everything used is disposable, this does not apply. If choosing in-house processing, typical equipment includes an autoclave (steam sterilizer), an ultrasonic cleaner, sterilization pouches and biological indicators, and a dedicated clean workspace separate from patient care areas.

7. Vaccines and Medication Storage

Only purchase vaccine-related equipment if vaccines are part of the opening model.

Opening Essentials

• Appropriate storage equipment
• Temperature monitoring
• Temperature logs
• Storage procedures
• Inventory tracking
• Backup power or continuous temperature alarm for vaccine refrigeration
• Epinephrine and airway equipment for anaphylaxis — must be immediately available wherever vaccines are administered

Before purchasing significant vaccine inventory, understand:
• Expected patient demand
• Ordering process
• Storage requirements
• Expiration risk
• Payment model

Medication Administration

• Medication storage
• Lockable storage where appropriate
• Syringes and needles
• Medication administration supplies
• Medication inventory tracking
• Refrigerator, if required for non-vaccine medications

8. Point-of-Care Testing

Testing decisions should be based on patient need, workflow, cost, and regulatory requirements.
Possible testing:

- Urinalysis
- Pregnancy testing
- Glucose testing
- Rapid infectious disease testing
- Other specialty-specific testing

Before purchasing testing equipment:
- Confirm regulatory requirements
- Estimate supply costs
- Determine staff workflow
- Determine whether it improves patient care or practice economics

Additional Diagnostic Equipment (Depending on Services Offered)

- ECG
- Spirometry
- Nebulizer
- Glucometer
- Vision screening
- Hearing screening
- Peak flow meter

9. Emergency Equipment

Emergency equipment needs depend on:
• Patient population
• Services offered
• Procedures performed
• Clinical setting

Discuss appropriate emergency preparedness with your clinical team and advisors.
Possible items:
• Emergency medications
• Emergency supplies
• Oxygen equipment
• AED
• Emergency response equipment
• Pediatric-sized emergency equipment and a weight-based dosing reference (e.g., Broselow tape), if seeing pediatric patients

10. Office Furniture

Opening Essentials

• Reception desk and check-in counter — 1
• Reception/front-desk seating — 1 per front-desk staff member
• Waiting-room seating — 6–10 seats for a solo-provider practice; add 2–3 per additional provider
• Provider desk and chair — 1 per provider
• Staff workstations — 1 per staff member on duty at a time
• Filing or storage cabinets — 1–2 to start, based on paper record volume
• Supply storage shelving — 1 unit per exam room or one central supply closet

Consider Later

• Higher-end furniture upgrades
• Additional waiting-room features
• Decorative improvements
The patient experience matters, but early startup dollars should prioritize items that affect care delivery and operations.

11. Technology and Payment Systems

Hardware

• Computers — 1 per exam room, plus 1–2 for front-desk/admin use
• Monitors — 1 per computer; provider workstations may use 2
• Keyboard/mouse equipment — 1 set per computer
• Network equipment (router, switch, Wi-Fi access point) — 1 set sized to the office footprint
• Internet service — business-grade connection with enough bandwidth for EHR use and telehealth if offered
• Phone hardware — 1 line per front-desk staff member, plus provider extensions as needed
• Printer/scanner — 1 shared unit is usually enough to start; add a second if volume requires
• Backup systems — external drive or cloud backup sized to your EHR and practice management data
• Webcam, headset or microphone, and adequate lighting — if offering telehealth visits

Payment Processing

• Credit/debit card terminal or reader — 1 per checkout station
• Payment processing service — choose a processor with cash-pay-friendly rates before opening
• Receipt printer or digital receipt system — 1 per checkout station
• Cash drawer — 1, if accepting cash payments
• Online payment portal — for patients paying membership fees or invoices remotely

EHR / Practice Management Software

• Electronic health record (EHR) system — select based on your specialty, cash-pay workflow, and budget
• Practice management and scheduling software — often bundled with the EHR
• Patient portal — for scheduling, messaging, and payment
• E-prescribing capability — typically built into the EHR
• Billing and invoicing tool — even cash-pay practices need receipts and superbills for patients seeking insurance reimbursement

12. Signage, Security, and Safety

Signage

Opening Essentials

- Exterior building or suite sign — confirm requirements with your landlord and local signage ordinances
- Interior wayfinding signage — reception, restrooms, exam rooms
- Required postings — licenses, notices, and emergency information as required by your state and specialty

Consider Later

- Illuminated or upgraded exterior signage
- Branded interior graphics

Security and Safety

Opening Essentials

- Door locks for exterior entry and any medication storage areas
- Locked, DEA-compliant safe or cabinet for controlled substances, if any are prescribed or stored on site
- Alarm system — especially important if vaccines or controlled substances are stored on site
- Fire extinguisher — placed per local fire code
- Staff first-aid kit
- Required safety postings — evacuation routes, emergency contacts

Consider Later

- Security cameras
- Access control systems for multi-provider practices

Privacy and Document Security

- Locking storage where needed
- Secure shredding containers or a shredding service
- Privacy screens, if monitors are visible to patients
- Secure storage for paper records containing PHI
- Printer placement that limits exposure of printed patient information

13. General Office and Administrative Supplies

This is separate from the clinical supplies covered in Section 4 — these are the everyday items that keep the front desk and back office running.

Opening Essentials

• Pens, notepads, and general office supplies
• Appointment reminder cards or system
• Patient intake and consent forms
• Envelopes and mailing supplies
• Filing supplies and folders for any physical records
• Staples, tape, and basic desk supplies
• Interpreter phone line or device, if serving non-English-speaking patients

14. Buy, Outsource, New, or Used

Some equipment decisions are not about whether to buy, but how — in-house or outsourced, new or used, and when it is time to expand.

Laboratory Testing

Options:
• Perform testing in-house
• Send testing to outside laboratories
Questions:
• How often will it actually be used?
• What equipment and compliance requirements are involved?
• Does the volume justify ownership?

Imaging or Specialty Services

Consider:
• Purchase equipment
• Refer externally
• Partner with existing services

Procedures

Consider:
• Expected volume
• Revenue potential
• Supply costs
• Training requirements
• Space requirements
Owning equipment only makes sense when the clinical and financial case supports it.

When to Expand

• Additional exam rooms — when daily patient volume regularly exceeds current room capacity
• Additional diagnostic or testing equipment — when referring out costs more than performing in-house would, or demand for a specific test is consistent
• Specialty procedure equipment — when procedure volume and reimbursement or cash-pay pricing justify the cost
• Additional vaccine capacity, technology, or furniture — when patient volume or staff growth requires it

New vs. Used Equipment

Used equipment can reduce startup costs, but evaluate carefully.
Often reasonable to consider used: exam tables, furniture, certain durable equipment.
Use more caution with: technology, equipment requiring calibration or manufacturer service, equipment with limited replacement parts.
Before purchasing used equipment, review: age, condition, warranty, service availability, replacement costs, installation requirements.

15. Vendors and GPOs

Potential Sources

- Medical equipment distributors
- Manufacturer-direct purchasing
- Group purchasing organizations
- Local suppliers
- Used equipment marketplaces

What to Compare

- Purchase price
- Warranty
- Service
- Shipping
- Installation
- Training
- Replacement parts
- Return policies

The lowest purchase price is not always the lowest total cost.

Group Purchasing Organizations (GPOs)

GPOs may provide discounted pricing for supplies, equipment, and services. Before joining, review: membership requirements, contract commitments, pricing, product restrictions, minimum purchases, and actual expected savings. The savings should justify the commitment.

16. What Can Wait

Avoid purchasing based on what the practice might become someday.
Delay purchases when:
• Patient demand is not proven
• The service is not part of the opening model
• The item does not improve workflow or care
• The purchase consumes significant startup cash
Examples:
• Extra equipment without patient volume
• Specialty equipment for future services
• Large inventory purchases
• Expensive technology features you will not use

17. Final Equipment Review

Before opening:
□ Equipment matches the services being offered
□ Equipment fits the physical space
□ Delivery dates are confirmed
□ Staff know how to use required equipment
□ Maintenance requirements are understood
□ Supplies are stocked
□ Storage areas are organized
□ Expiration dates are reviewed
□ Backup plans exist for critical equipment
□ First-year purchasing needs have been estimated

Cash-Pay Practice Reminder

The goal is not to build the most expensive practice possible — it is to build the right practice for the patients you serve, the services you provide, and the financial model you created.

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