KTAG REQUIREMENTS FOR EXISTING HEALTHCARE FACILITIES
May 20, 2014

	Indicates that a code change may be needed in 2015-2016 cycle.
	General Work Group
	MOE Work Group
	Fire Safety Work Group

K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
CONSTRUCTION				
K11	19.1.1.4.1, 19.1.1.4.2	The common wall is a fire barrier having at least a two hour fire resistance rating constructed of materials as required for the addition. Communicating openings occur only in corridors and shall be protected by approved self-closing fire doors.	19.1.1.4.1, 19.1.1.4.1.1 (same text as 2000)	**IBC Section 508.3.1 (or 508.3.1.1) needs potential language for non-separated that full compliance with I-2 requirements is required – otherwise separate in accordance with Table 508.4. Use high rise language to get full I-2 requirements in nonseparated use.**
K12	19.1.6.2, 19.1.6.3, 19.1.6.4, 19.3.5.1	Building construction type and height meets one of the following: *(Table not included…)*	19.1.6.1, 19.1.6.7; 19.3.5.3	**1105.2 Construction.** Group I-2 Condition 2 shall not be located on a floor level higher than the floor level limitation in Table 1105.2 based on the type of construction. *(Table not included…)*

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K103	19.1.6.3	Interior walls and partitions in buildings of Type I or Type II construction shall be noncombustible or limited-combustible materials.	(same text as 2000) 19.1.6.4, 19.1.6.5 (2012 = Interior nonloadbearing walls)	**1105.4 Corridor construction.** In Group I-2, in areas housing patient sleeping or care rooms, *corridor* walls and the opening protectives therein shall provide a barrier designed to resist the passage of smoke in accordance with Sections 1105.4.1 through 1105.4.7. **1105.4.1 Materials.** The walls shall be of materials permitted by the building type of construction. **IBC TEXT:** **IBC 602.2 Types I and II.** Types I and II construction are those types of construction in which the building elements listed in Table 601 are of noncombustible materials, except as permitted in Section 603 and elsewhere in this code. **1105.6.2 Smoke barriers.** Smoke barriers shall be constructed in accordance with Section 709 of the *International Building Code*. **Exceptions:** 1. Existing smoke barriers are permitted to remain where the existing smoke barrier has a minimum fire-resistance rating of 1/2 hour. 2. Smoke barriers shall be permitted to terminate at an atrium enclosure in accordance with Section 404.6 of the *International Building Code*.
INTERIOR FINISH				
K14	19.3.3.1, 19.3.3.2	Interior finish for corridors and exitways, including exposed interior surfaces of buildings such as fixed or movable walls, partitions, columns, and ceilings has a flame spread rating of Class A or Class B.	(same text as 2000) 19.3.3.1, 19.3.3.2	**803.3 Interior finish requirements based on occupancy.** Interior wall and ceiling finish shall have a flame spread index not greater than that specified in Table 803.3 for the group and location designated. *(Table not included…)*

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K15	19.3.3.1, 19.3.3.2	Interior finish for rooms and spaces not used for corridors or exitways, including exposed interior surfaces of buildings such as fixed or movable walls, partitions, columns, and ceilings has a flame spread rating of Class A or Class B. (In fully-sprinklered buildings, flame spread rating of Class A, Class B, or Class C may be continued in use within rooms separated in accordance with 19.3.6 from the access corridors.)	(same text as 2000) 19.3.3.1, 19.3.3.2	**803.3 Interior finish requirements based on occupancy.** Interior wall and ceiling finish shall have a flame spread index not greater than that specified in Table 803.3 for the group and location designated. *(Table not included…)*
K16	19.3.3.3	Newly installed interior floor finish complying with 10.2.7 shall be permitted in corridors and exits if Class I. In smoke compartments protected throughout by an approved, supervised automatic sprinkler system in accordance with 19.3.5.2, no interior floor finish requirements shall apply.	No such text found 19.3.3.3 No restrictions on floor finish.	**804.3.3.2 Minimum critical radiant flux.** In all occupancies, new interior floor finish and floor covering materials in enclosures for *stairways* and *ramps*, *exit passageways*, *corridors* and rooms or spaces not separated from *corridors* by full-height partitions extending from the floor to the underside of the ceiling shall withstand a minimum critical radiant flux. The minimum critical radiant flux shall be not less than Class I in Groups I-1, I-2 and I-3 and not less than Class II in Groups A, B, E, H, I-4, M, R-1, R-2 and S. **Exception:** Where a building is equipped throughout with an *automatic sprinkler system* in accordance with Section 903.3.1.1 or 903.3.1.2, Class II materials shall be permitted in any area where Class I materials are required and materials complying with DOC FF-1 "pill test" (CPSC 16 CFR Part 1630) or with ASTM D 2859 shall be permitted in any area where Class II materials are required.
CORRIDOR WALLS AND DOORS				
K17	19.3.6.1, 19.3.6.2.1, 19.3.6.5	Corridors are separated from use areas by walls constructed with at least 1/2 hour fire resistance rating. In fully sprinklered smoke compartments, partitions are only required to resist the passage of smoke.	19.3.6.2.2, 19.3.6.2.3	**IFC/2015 §1105.4.2 (F239-13 AS)** (Sprinklers required in IFC §1103.5.2)

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K17		In non-sprinklered buildings, walls properly extend above the ceiling. (Corridor walls may terminate at the underside of ceilings where specifically permitted by Code. Charting and clerical stations, waiting areas, dining rooms, and activity spaces may be open to corridor under certain conditions specified in the Code. Gift shops may be separated from corridors by non-fire rated walls if the gift shop is fully sprinklered.)	19.3.6.1, 19.3.6.2.1,	**1103.5.3 Group I-2 Condition 2.** In addition to the requirements of Section 1103.5.2, existing buildings of Group I-2 Condition 2 occupancy shall be equipped throughout with an *approved automatic sprinkler system* in accordance with Section 903.3.1.1. The *automatic sprinkler system* shall be installed as established by the adopting ordinance. **1105.8 Group I-2 automatic sprinkler system.** An *automatic sprinkler system* installed in accordance with Section 903.3.1.1 shall be provided throughout existing Group I-2 fire areas. The sprinkler system shall be provided throughout the floor where the Group I-2 occupancy is located, and in all floors between the Group I-2 occupancy and the *level of exit discharge*. No change needed. Sprinklers required in IFC §1103.5.2, so it does not apply. **SEE CODE CHANGE FS42-13 (D)**
K18	19.3.6.3	Doors protecting corridor openings in other than required enclosures of vertical openings, exits, or hazardous areas shall be substantial doors, such as those constructed of 1.75 inch sold-bonded core wood, or capable of resisting fire for at least 20 minutes. Doors in fully sprinklered smoke compartments are only required to resist the passage of smoke.	19.3.6.3.1	**1105.4.4.2.2 Corridor doors.** Doors in *corridor* walls shall limit the transfer of smoke by complying with the following: 1. Doors shall be constructed of not less than 13/4 inch-thick (44 mm) solid bonded core wood or capable of resisting fire not less than 1/3 hour. **Exception:** Corridor doors in buildings equipped throughout with an automatic sprinkler system. (Sprinklers required in IFC §1103.5.2)
		There is no impediment to the closing of the doors.	19.3.6.3.10	**1105.4.4.2.4 Self- or automatic-closing doors.** Where self- or automatic-closing doors are required, closers shall be maintained in operational condition. Need change to IFC §1031 or 1104 ?
		Doors shall be provided with a means suitable for keeping the door closed.	Same as 2000 19.3.6.3.5	**1105.4.4.2.2 Corridor doors.** Doors in *corridor* walls shall limit the transfer of smoke by complying with the following: 5. Doors shall be positive latching with devices that resist not less than 5 pounds (22.2 N). Roller latches are prohibited.

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		Dutch doors meeting 19.3.6.3.3 are permitted.	Same as 2000 19.3.6.3.13	**1105.4.4.2.3 Dutch doors.** Where provided, dutch doors shall comply with Section 1105.4.4.2.2. In addition, dutch doors shall be equipped with latching devices on either the top or bottom leaf to allow leaves to latch together. The space between the leaves shall be protected with devices such as astragals to limit the passage of smoke.
		Roller latches are prohibited by CMS regulations in all health care facilities.	Same as 2000 19.3.6.3.5	**1105.4.4.2.2 Corridor doors.** Doors in *corridor* walls shall limit the transfer of smoke by complying with the following: 5. Doors shall be positive latching with devices that resist not less than 5 pounds (22.2 N). **Roller latches are prohibited.**
K19	19.3.6.2.3, 19.3.6.3.8, 19.3.6.5	Vision panels in corridor walls or doors shall be fixed window assemblies approved frames. (In fully sprinklered buildings, there are no restrictions in the area and fire resistance of glass and frames.)	Same as 2000 19.3.6.3.16, 19.3.6.2.17	No change needed. Sprinklers required in IFC §1103.5.2, so it does not apply. Adhoc position is that the building being retroactively sprinklered in all fire compartments containing Group I-2 and a retroactive requirement for sprinklering throughout is an acceptable alternative to allow for no restrictions on area and rating of glass in corridor walls and doors. **Check back in August to see if CMS has given final date for retroactive sprinkler requirement.**
K22	7.10.1.4	Access to exits shall be marked by approved, readily visible signs in all cases where the exit or way to reach exit is not readily apparent to occupants.	Same as 2000 7.10.1.5.1	Need text to require signs in either IFC §1104 or 1105.5 **Covered in Section 1013 Exit Signs** **1104.3 Exit sign illumination.** Exit signs shall be internally or externally illuminated. The face of an exit sign illuminated from an external source shall have an intensity of not less than 5 footcandles (54 lux). Internally illuminated signs shall provide equivalent luminance and be *listed* for the purpose. **Exception:** *Approved* self-luminous signs that provide evenly illuminated letters shall have a minimum luminance of 0.06 foot-lamberts (0.21 cd/m^2).
VERTICAL OPENINGS				

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K20	19.3.1.1	Stairways, elevator shafts, light and ventilation shafts, chutes, and other vertical openings between floors are enclosed with construction having a fire resistance rating of at least one hour.	Same as 2000 19.3.1.1	**1103.4.1 Group I-2 and I-3 occupancies.** In Group I-2 and I-3 occupancies, interior vertical openings connecting two or more stories shall be protected with 1-hour fire-resistance-rated construction.
		An atrium may be used in accordance with 8.2.5.6	8.6.7	**1103.4.1 Group I-2 and I-3 occupancies.** **Exceptions:** 2. In Group I-2, atriums connecting three or more stories shall not require a 1-hour fire-resistance-rated construction where the building is equipped throughout with an automatic sprinkler system installed in accordance with Section 903.3, and all of the following conditions are met: *(Detail not included…)*
K21	19.2.2.2.6, 7.2.1.8.2	Any door in an exit passageway, stairway enclosure, horizontal exit, smoke barrier or hazardous area enclosure shall be permitted to be held open only by devices arranged to automatically close all such doors by zone or throughout the facility upon activation of: (a) The required manual fire alarm system and (b) Local smoke detectors designed to detect smoke passing through the opening or a required smoke detection system and (c) The automatic sprinkler system, if installed	(Same as 2000) 19.2.2.2.7, 7.2.1.8.2	Change needed to § 1104 or 1105. Is IFC 704.2 adequate? Proposal for new IBC 407.9, 716.5.9.5, and IFC 7703.2.4 See requirements in 716.5.9.3
K33	8.2.5.2, 19.3.1.1	Exit components (such as stairways) are enclosed with construction having a fire resistance rating of at least one hour, are arranged to provide a continuous path of escape, and provide protection against fire or smoke from other parts of the building.	19.3.1.1 8.6.5 (Same as 2000)	**1103.4.1 Group I-2 and I-3 occupancies.** In Group I-2 and I-3 occupancies, interior vertical openings connecting two or more stories shall be protected with 1-hour fire-resistance-rated construction. *(Exceptions not included…)* Covered far more in-depth in IFC via 1103.4.1 than in 19.3.1.1 – no additional change needed
SMOKE COMPARTMENTATION AND CONTROL				

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
K23	19.3.7.1, 19.3.7.2	Smoke barriers shall be provided to form at least two smoke compartments on every sleeping room floor for more than 30 patients.	19.3.7.1 (Same as 2000)	**1105.6.1 Design.** Smoke barriers shall be provided to subdivide each story used for patients sleeping with an occupant load of more than 30 patients into not fewer than two smoke compartments.
K24	19.3.7.1	The smoke compartments shall not exceed 22,500 square feet and the travel distance to and from any point to reach a door in the required smoke barrier shall not exceed 200 feet.	19.3.7.1 (Same as 2000)	See K23 – Adhoc's position is that we cover smoke compartmentation and size. While different, the travel distance is the driver.
K25	19.3.7.3, 19.3.7.5, 19.1.6.3, 19.1.6.4	Smoke barriers shall be constructed to provide at least a one-half hour fire resistance rating and constructed in accordance with 8.3.	19.3.7.3, (Same as 2000 except reference is Section 8.5) 19.1.6.4 (19.1.6.3 revised and expanded from 2000) Expanded Fire retardant treated wood enclosed in 2 hour walls versus 1 hour. Clarifies that fire retardant wood can be used for installation of fixtures or equipment when behind sheathing.	**IFC/2015 §1105.6.2 Ex. 1 (F241 – 13 AM)** **1105.6.2 Smoke barriers.** Smoke barriers shall be constructed in accordance with Section 709 of the *International Building Code.* **Exceptions:** 1. Existing smoke barriers are permitted to remainwhere the existing smoke barrier has a minimum fire-resistance rating of 1/2 hour. 2. Smoke barriers shall be permitted to terminate at an atrium enclosure in accordance with Section 404.6 of the *International Building Code.*
		Smoke barriers shall be permitted to terminate at an atrium wall.	19.3.7.3, (Same as 2000 except reference is 8.6.7(1)(c))	**IFC/2015 §1105.6.2 Ex. 2 (F241-13 AM)** **1105.6.2 Smoke barriers.** Smoke barriers shall be constructed in accordance with Section 709 of the *International Building Code.* **Exceptions:** 1. Existing smoke barriers are permitted to remainwhere the existing smoke barrier has a minimum fire-resistance rating of 1/2 hour. 2. Smoke barriers shall be permitted to terminate at an atrium enclosure in accordance with Section 404.6 of the *International Building Code.*

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		Windows shall be protected by fire-rated glazing or by wired glass panels and steel frames.	(Same as 2000) 19.3.7.6	**IFC/2015 §1105.6.3 (F241 – 13 AM)** **1105.6.3 Opening protectives.** Openings in smoke barriers shall be protected in accordance with Section 716 of the *International Building Code*. Opening protectives shall have a minimum fire-protection-rating of 1/3 hour. **Exception:** Existing wired glass vision panels in doors shall be permitted to remain.
		A minimum of two separate compartments shall be provided on each floor.	19.3.7.3. This separation I believe is related to the Atrium allowance and is the same in 2000	**IFC/2015 §1105.6.1 (F241 – 13 AM)** **1105.6.1 Design.** Smoke barriers shall be provided to subdivide each story used for patients sleeping with an occupant load of more than 30 patients into not fewer than two smoke compartments.
		Dampers shall not be required in duct penetrations of fully ducted heating, ventilating, and air conditioning systems.	19.3.7.3, (Same as 2000)	**IFC/2015 §1105.6.6 (F241 – 13 AM)** **1105.6.6 Duct and air transfer openings.** Penetrations in a smoke barrier by duct and air transfer openings shall comply with Section 717 of the *International Building Code*. **Exception:** Where existing duct and air transfer openings in smoke barriers exist without smoke dampers, they shall be permitted to remain. Any changes to existing smoke dampers shall be submitted for review and approved in accordance with Section 717 of the *International Building Code*.

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K26	19.3.7.4	Space shall be provided on each side of smoke barriers to adequately accommodate those occupants served.	(same as 2000) 19.3.7.5 19.3.7.5.1 19.3.7.5.2	**IFC/2015 §1105.6.1.1 (F241 – 13 AM)** **1105.6.1.1 Refuge areas.** Refuge areas shall be provided within each smoke compartment. The size of the refuge area shall accommodate the occupants and care recipients from the adjoining smoke compartment. Where a smoke compartment is adjoined by two or more smoke compartments, the minimum area of the refuge area shall accommodate the largest occupant load of the adjoining compartments. The size of the refuge area shall provide the following: 1. Not less than 30 net square feet (2.8 m2) for each care recipient confined to a bed or stretcher. 2. Not less than 15 square feet (1.4 m2) for each resident in a Group I-2 using mobility assistance devices. 3. Not less than 6 square feet (0.56 m2) for each occupant not addressed in Items 1 and 2. Areas of spaces permitted to be included in the calculation of the refuge area are *corridors*, sleeping areas, treatment rooms, lounge or dining areas and other low hazard areas.
K27	19.3.7.5, 19.3.7.6, 19.3.7.7	Door openings in smoke barriers have at least a 20 minute fire protection rating or are at least 1.75 inch thick solid bonded core wood.	(same as 2000) 19.3.7.6	**IFC/2015 §1105.6.3 (F241 – 13 AM)** **1105.6.3 Opening protectives.** Openings in smoke barriers shall be protected in accordance with Section 716 of the *International Building Code*. Opening protectives shall have a minimum fire-protection-rating of 1/3 hour. **Exception:** Existing wired glass vision panels in doors shall be permitted to remain.

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		Non-rated protective plates that do not exceed 48 inches from the bottom of the door are permitted.	19.3.7.6.1- now unlimited in height.	Need code change to IFC/2015 1105.6.3 & possibly IBC 716. This is specific to smoke barrier doors. Needs to state that the doors are permitted to remain with non rated plates- this appears ok for all doors whether listed or not based upon NFPA 80 requirements. NPFA 80 - 6.4.5 (IFC section 703.2) – more restrictive. Language being drafted for code change for IBC (709.5) and IFC (1105.6.3) 8/12/2014
		Horizontal sliding doors comply with 7.2.1.14.	(Same as 2000) 19.3.7.9	Need IFC/2015 1010.1.4.3 reference in IFC Chapter 11- Suggested that language in Section 1030 is more appropriate – special purpose or accordion door is more appropriate. NO change necessary. Section 1010.1.4.3 addresses the same requirements as NFPA 101.
		Doors shall be self-closing or automatic-closing in accordance with 19.2.2.2.6.	(Same as 2000) 19.3.7.8 (reference is 19.2.2.7 – same requirements)	**1105.6.3 Opening protectives.** Openings in smoke barriers shall be protected in accordance with Section 716 of the *International Building Code*. Opening protectives shall have a minimum fire-protection-rating of 1/3 hour. **Exception:** Existing wired glass vision panels in doors shall be permitted to remain.

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		Swinging doors are not required to swing with egress and positive latching is not required.	(Same as 2000) 19.3.7.8	No change needed. See 1105.5.3 and IBC 716.5.3. **716.5.3 Door assemblies in corridors and smoke barriers.** *Fire door* assemblies required to have a minimum *fire protection rating* of 20 minutes where located in *corridor*walls or *smoke barrier* walls having a *fire-resistance rating* in accordance with Table 716.5 shall be tested in accordance with NFPA 252 or UL 10C without the hose stream test. **Exceptions:** 1. Viewports that require a hole not larger than 1 inch (25 mm) in diameter through the door, have not less than a 0.25-inch-thick (6.4 mm) glass disc and the holder is of metal that will not melt out where subject to temperatures of 1,700°F (927°C). 2. *Corridor* door assemblies in occupancies of Group I-2 shall be in accordance with Section 407.3.1. 3. Unprotected openings shall be permitted for *corridors* in multi-theater complexes where each motion picture auditorium has not fewer than one-half of its required *exit* or *exit access doorways* opening directly to the exterior or into an *exit* passageway. 4. Horizontal sliding doors in *smoke barriers* that comply with Sections 408.6 and 408.8.4 in occupancies in Group I-3. **1105.5.3 Size of door.** Means of egress doors used for the movement of patients in beds shall provide a minimum clear width of 411/2 inches (1054 mm). The height of the door opening shall be not less than 80 inches (2032 mm). **Exceptions:** 1. Door closers and door stops shall be permitted to be 78 inches (1981 mm) minimum above the floor. 2. In Group I-2 Condition 1, existing means of egress doors used for the movement of patients in beds that provide a minimum clear width of 32 inches (813 mm) shall be permitted to remain.

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K28	19.3.7.5, 19.3.7.7	Door openings in smoke barriers shall provide a minimum clear width of 32 inches (81 cm) for swinging or horizontal doors.	(same as 2000 just slightly reformatted) 19.3.7.9	Section 1010.1.1 provides minimum 32 inches. IFC 1104.7 provides min 28 inch width which links to the NFPA allowance of 34 inch door in Section 19.3.7.9 of the LSC. Essentially the same width is required with the same exception. This Ktag appears to be addressed but simply in a different manner than 101.
		Vision panels are of fire-rated glazing or wired glass panels and steel frames.	(same as 2000 just slightly reformatted) 19.3.7.6	**1105.6.3 Opening protectives.** Openings in smoke barriers shall be protected in accordance with Section 716 of the *International Building Code*. Opening protectives shall have a minimum fire-protection-rating of 1/3 hour. **Exception:** Existing wired glass vision panels in doors shall be permitted to remain.
K104		Penetrations of smoke barriers by ducts are protected in accordance with 8.3.6.		**IFC/2015 §1105.6.6 (F241 – 13 AMPC2)** **1105.6.6 Duct and air transfer openings.** Penetrations in a smoke barrier by duct and air transfer openings shall comply with Section 717 of the *International Building Code*. **Exception:** Where existing duct and air transfer openings in smoke barriers exist without smoke dampers, they shall be permitted to remain. Any changes to existing smoke dampers shall be submitted for review and approved in accordance with Section 717 of the *International Building Code*.
HAZARDOUS AREA				

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K29	19.3.2.1	One hour fire rated construction (with ¾ hour fire-rated doors) or an approved automatic fire extinguishing system in accordance with 8.4.1 and/or 19.3.5.4 protects hazardous areas. When the approved automatic fire extinguishing system option is used, the areas shall be separated from other spaces by smoke resisting partitions and doors. Doors shall be self-closing and non-rated or field-applied protective plates that do not exceed 48 inches from the bottom of the door are permitted.	(same as 2000 primarily reformat) 19.3.2.1 19.3.2.1.1 19.3.2.1.2 19.3.2.1.3 19.3.2.1.4 19.3.2.1.5 provides the list of hazardous areas note that soiled linen and collected trash is limed to 64 gallons in volume.	No change needed. See IFC §1103.5.2 & 1105.3 incidental uses. **1103.5.2 Group I-2.** In Group I-2, an *automatic sprinkler system* shall be provided in accordance with Section 1105.8. **1105.3 Incidental uses in existing Group I-2.** Incidental uses associated with and located within existing single-occupancy or mixed-occupancy Group I-2 buildings and that generally pose a greater level of risk to such occupancies shall comply with the provisions of Sections 1105.3.1 through 1105.3.3.2.1. Incidental uses in Group I-2 occupancies are limited to those listed in Table 1105.3. **1105.3.1 Occupancy classification.** Incidental uses shall not be individually classified in accordance with Section 302.1 of the *International Building Code*. Incidental uses shall be included in the building occupancies within which they are located. **1105.3.2 Area limitations.** Incidental uses shall not occupy more than 10 percent of the building area of the story in which they are located. **1105.3.3 Separation and protection.** The incidental uses listed in Table 1105.3 shall be separated from the remainder of the building or equipped with an *automatic sprinkler system*, or both, in accordance with the provisions of that table. **1105.3.3.1 Separation.** Where Table 1105.3 specifies a fire-resistance-rated separation, the incidental uses shall be separated from the remainder of the building in accordance with Section 509.4.1 of the *International Building Code*. **1105.3.3.2 Protection.** Where Table 1105.3 permits an *automatic sprinkler system* without a fire-resistance-accordance with Section 509.4.2 of the *International Building Code*. **1105.3.3.2.1 Protection limitation.** Except as otherwise specified in Table 1105.2 for certain incidental

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K30	19.3.2.5	Gift shops shall be protected as hazardous areas when used for storage or display of combustibles in quantities considered hazardous. Non-rated walls may separate gift shops that are not considered hazardous, have separate protected storage and that are completely sprinkled. Gift shops may be open to the corridor if they are not considered hazardous, have separate protected storage, are completely sprinklered and do not exceed 500 square feet.	19.3.6.1 item 4 now limited to 500 sq feet. Storage needs to be separate when in a building not equipped throughout with sprinklers	No change needed (no longer addressed in other codes; eliminated from I-Codes in 2009 cycle)
K211	**NOT IN 2000 LSC** 19.3.2.7, CFR 403.744, 418.100, 460.72, 482.41, 483.70, 483.623, 485.623	Where Alcohol Based Hand Rub (ABHR) dispensers are installed: 19.3.2.6		
		The corridor is at least 6 feet wide	19.3.2.6(1)	**5705.5.1 Corridor installations.** 4. The minimum *corridor* width shall be 72 inches.
		The maximum individual fluid dispenser capacity shall be 1.2 liters (2 liters in suites of rooms)	19.3.2.6 (2)	**5705.5 Alcohol-based hand rubs classified as Class I or II liquids.** The use of wall-mounted dispensers containing alcohol-based hand rubs classified as Class I or II liquids shall be in accordance with all of the following: 1. The maximum capacity of each dispenser shall be 68 ounces (2 L).
		The dispensers shall have a minimum spacing 4 ft from each other	19.3.2.6 (4)	**5705.5 Alcohol-based hand rubs classified as Class I or II liquids.** 2. The minimum separation between dispensers shall be 48 inches.
		Not more than 10 gallons are used in a single smoke compartment outside a storage cabinet	19.3.2.6 (5)	**5705.5.1 Corridor installations.** 3. The maximum quantity allowed in a *corridor* within a *control area* shall be 10 gallons (37.85 L) of Class I or II liquids or 1135 ounces (32.2 kg) of Level 1 aerosols, or a combination of Class I or II liquids and Level 1 aerosols not to exceed, in total, the equivalent of 10 gallons (37.85 L) or 1,135 ounces (32.2 kg) such that the sum of the ratios of the liquid and aerosol quantities divided by the allowable quantity of liquids and aerosols, respectively, shall not exceed one.

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
		Dispensers are not installed over or adjacent to an ignition source.	19.3.2.6 (8)	**5705.5 Alcohol-based hand rubs classified as Class I or II liquids.** 3. The dispensers shall not be installed above, below, or closer than 1 inch (25.4 mm) to an electrical receptacle, switch, appliance, device or other ignition source. The wall space between the dispenser and the floor or intervening counter top shall be free of electrical receptacles, switches, appliances, devices, or other ignition sources.
		If the floor is carpeted, the building is fully sprinklered.	19.3.2.6 (9)	**5705.5 Alcohol-based hand rubs classified as Class I or II liquids.** 7. Dispensers installed in occupancies with carpeted floors shall only be allowed in smoke compartments or *fire areas* equipped throughout with an *approved* automatic sprinkler system in accordance with Section 903.3.1.1 or 903.3.1.2.
EXIT AND EXIT ACCESS				

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
K32	19.2.4.1, 19.2.4.2	Not less than two exits, remote from each other, are provided for each floor or fire section of the building. Only one of these two exits may be a horizontal exit.	19.2.4.1, 19.2.4.2; 7.4.1.1	Change needed to IFC/2015 1105.5 – ~~verify for existing IFC 1104~~ – **COVERED** **1006.2** **1006.2 Egress from spaces.** Rooms, areas or spaces, including *mezzanines*, within a *story* or *basement* shall be provided with the number of *exits* or access to *exits* in accordance with this section. **1006.2.1 Egress based on occupant load and common path of egress travel distance.** Two *exits* or *exit access doorways* from any space shall be provided where the design *occupant load* or the *common path of egress travel* distance exceeds the values listed in Table 1006.2.1. **Exceptions:** 1. In Group R-2 and R-3 occupancies, one *means of egress* is permitted within and from individual *dwelling units* with a maximum *occupant load* of 20 where the *dwelling unit* is equipped throughout with an *automatic sprinkler* system in accordance with Section 903.3.1.1 or 903.3.1.2 and the *common path of egress travel* does not exceed 125 feet (38 100 mm). 2. *Care suites* in Group I-2 occupancies complying with Section 407.4.
EXITS AND EGRESS				

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
K34	19.2.2.3, 19.2.2.4	Stairways and smokeproof towers used as exits are in accordance with 7.2.	19.2.2.3, 19.2.2.4	~~Verify~~ – **COVERED** **1023** **1023.1 General.** *Interior exit stairways* and *ramps* serving as an *exit* component in a *means of egress* system shall comply with the requirements of this section. *Interior exit stairways* and *ramps* shall be enclosed and lead directly to the exterior of the building or shall be extended to the exterior of the building with an *exit passageway* conforming to the requirements of Section 1024, except as permitted in Section 1028.1. An *interior exit stairway* or *ramp* shall not be used for any purpose other than as a *means of egress* and a circulation path.
K35	19.2.3.1	Capacity of exits in number of persons per unit of exit width is in accordance with 7.3.	19.2.3.1	~~Change needed to IFC 1104 and/or 1105 to reference appropriate § in Chapter 10 (?)~~ – Covered 1005.3.1 & 3.2 – **COVERED** **1005** **1005.1 General.** All portions of the *means of egress* system shall be sized in accordance with this section. **Exception:** *Aisles* and *aisle accessways* in rooms or spaces used for assembly purposes complying with Section 1029.

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
K36	19.2.6	Travel distance (exit access) to exits are in accordance with 7.6.	19.2.6.1	~~Change needed to IFC 1104 and/or 1105 to reference appropriate § in Chapter 10~~ (?) – **COVERED** **1017** **1017.1 General.** Travel distance within the *exit access* portion of the *means of egress* system shall be in accordance with this section.
K37	19.2.5.10	Existing dead end corridor shall be permitted to be continued to be used if it is impractical and unfeasible to alter them so that exits are accessible in not less than two different directions from all points in aisles, passageways, and corridors.	**COVERED**	**1104.18 Dead end corridors.** Where more than one *exit* or *exit access* doorway is required, the *exit access* shall be arranged such that dead ends do not exceed the limits specified in Table 1104.18. In Group I-2, in smoke compartments containing patient sleeping rooms and treatment rooms, dead end *corridors* shall be in accordance with Section 1105.5.6. **Exception:** A dead-end passageway or *corridor* shall not be limited in length where the length of the dead-end passageway or *corridor* is less than 2.5 times the least width of the dead-end passageway or *corridor*.
K38	19.2.1	Exit access is so arranged that exits are readily accessible at all times in accordance with 7.1.	19.2.1 **COVERED**	~~No change needed?~~ **1031.2 Reliability.** Required *exit accesses*, *exits* and *exit discharges* shall be continuously maintained free from obstructions or impediments to full instant use in the case of fire or other emergency where the building area served by the *means of egress* is occupied. An *exit* or *exit passageway* shall not be used for any purpose that interferes with a *means of egress*. **1031.3 Obstructions.** A *means of egress* shall be free from obstructions that would prevent its use, including the accumulation of snow and ice.

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
K39	19.2.3.3	Width of aisles or corridors (clear and unobstructed) serving as exit access shall be at least 4 feet.	19.2.3.4 **COVERED**	**1031.3.1 Group I-2.** In Group I-2, the required clear width for *aisles*, *corridors* and *ramps* that are part of the required *means of egress* shall comply with Section 1020.2. The facility shall have a plan to maintain the required clear width during emergency situations. **Exception:** In areas required for bed movement, equipment shall be permitted in the required width where all the following provisions are met: 1. The equipment is low hazard and wheeled. 2. The equipment does not reduce the effective clear width for the *means of egress* to less than 5 feet (1525 mm). 3. The equipment is limited to: 3.1 Equipment and carts in use. 3.2 Medical emergency equipment. 3.3 Infection control carts. 3.4 Patient lift and transportation equipment. 4. Medical emergency equipment and patient lift and transportation equipment, when not in use, is required to be located on one side of the corridor. 5. The equipment is limited in number to a maximum of one per patient sleeping room or patient care room within each smoke compartment. **1020.2 Width and capacity.** The required capacity of *corridors* shall be determined as specified in Section 1005.1, but the minimum width shall be not less than that specified in Table 1020.2. **Exception:** In Group I-2 occupancies, *corridors* are not required to have a clear width of 96 inches (2438 mm) in areas where there will not be stretcher or bed movement for access to care or as part of the defend in place strategy.

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
K40	19.2.3.5	Exit access doors and exit doors used by health care occupants are of the swinging type and are at least 32 inches in clear width.	**Proposal to increase door size in 1104.7** 19.2.3.6	**1104.7 Size of doors.** The minimum width of each door opening shall be sufficient for the *occupant load* thereof and shall provide a clear width of not less than 28 inches (711 mm). Where this section requires a minimum clear width of 28 inches (711 mm) and a door opening includes two door leaves without a mullion, one leaf shall provide a clear opening width of 28 inches (711 mm). In ambulatory care facilities, doors serving as *means of egress* from patient treatment rooms or patient sleeping rooms shall provide a clear width of not less than 32 inches (813 mm). In Group I-2, *means of egress* doors where used for the movement of beds shall provide a clear width not less than 41.5 inches (1054 mmThe maximum width of a swinging door leaf shall be 48 inches (1219 mm) nominal. The height of doors openings shall be not less than 80 inches (2032 mm). **Exceptions:** (N/A to Healthcare.) Note: move Group I-2 and ambulatory care text to new sections

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
K41	19.2.5.1, 19.2.5.9	All sleeping rooms have a door leading to a corridor providing access to an exit or have a door leading directly to grade. One room may intervene.	?	Verify reference 407.4.1, 407.4.4 **407.4.1 Direct access to a corridor.** Habitable rooms in Group I-2 occupancies shall have an *exit access* door leading directly to a *corridor*. **Exceptions:** 1. Rooms with *exit* doors opening directly to the outside at ground level. 2. Rooms arranged as *care suites* complying with Section 407.4.3 **407.4.4.3 Access to corridor.** Movement from habitable rooms shall not require passage through more than three doors and 100 feet (30 480 mm) distance of travel within the suite. **Exception:** The distance of travel shall be permitted to be increased to 125 feet (38 100 mm) where an automatic smoke detection system is provided throughout the *care suite* and installed in accordance with NFPA 72.

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
K42	19.2.5.2	Any room or suite of rooms of more than 1,000 sq. ft. has at least 2 exit access doors remote from each other.	19.2.5.5.1	Pending status of Group A change. Consider change to IFC 1030, or Chapter 11 change. **COVERED** 407.4.4, 1006.2.1 (1) & 1105.7 **1105.5.7 Separation of exit access doors.** Patient sleeping rooms, or any suite that includes patient sleeping rooms, of more than 1,000 square feet (92.9 m_2) shall have not less than two exit access doors placed a distance apart equal to not less than one-third of the length of the maximum overall diagonal dimension of the patient sleeping room or suite to be served, measured in a straight line between exit access doors.
K43	19.2.2.2.2	Patient room doors are arranged such that the patients can open the door from inside without using a key. Special door locking arrangements are permitted in certain facilities in accordance with 18.2.2.2.4, 18.2.2.2.5.	19.2.2.2.2, 19.2.2.2.4, 19.2.2.2.5	Need change to 1104 or 1105 to reference Chapter 10. Covered in 1010.1.9 1010.1.9.6 Code changes E63-, E66-, E67-, E69-, E70-, E72-, E73-, E74-, E77-, E78-, E80-, E81-, E82-12 **[BE] 1010.1.9 Door operations.** Except as specifically permitted by this section, egress doors shall be readily openable from the egress side without the use of a key or special knowledge or effort. **[BE] 1010.1.9.6 Controlled egress doors in Groups I-1 and I-2……**

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
K44	19.2.2.5	Horizontal exits, if used, are in accordance with 7.2.4.	19.2.2.5 – **Possible conflict with 1026.4.1 (2) LSC allows 3 NSF based on 7.2.4.2.4 and 19.2.2.5.1.1. but IFC requires 15 SF per above**	Need code change to 1104 or 1105. See proposed change to IEBC 805.10 EB39 **1026.4.1 Capacity.** The capacity of the refuge area shall be computed based on a *net floor area* allowance of 3 square feet (0.2787 m^2) for each occupant to be accommodated therein. **Exceptions:** The *net floor area* allowable per occupant shall be as follows for the indicated occupancies: 1. Six square feet (0.6 m^2) per occupant for occupancies in Group I-3. 2. For Group I-2, refuge areas serving patient treatment and sleeping areas, provide Fifteen square feet (1.4 m^2) per ~~occupant for~~ ambulatory patient ~~occupancies in Group I-2~~. 3. For Group I-2, refuge areas serving patient treatment and sleeping areas, provide Thirty square feet (2.8 m^2) per ~~occupant for~~ nonambulatory patient ~~occupancies~~ ~~in Group I-2~~. 4. For Group I-2, refuge areas shall comply with the following: 4.1 Fifteen square feet per ambulatory patients for areas serving patient ~~treatment or~~ sleeping rooms (Group I-2, Condition 1). 4.2 Thirty square feet for patients being moved in bed (Condition I-2, Condition 2) for areas serving sleeping ~~and treatment~~ rooms. 4.3 Six square feet per occupant for areas not serving sleeping ~~or treatment~~ rooms. *Note: No clear solution – consider nursing homes and hospital.*

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
EGRESS ILLUMINATION AND EMERGENCY POWER				
K45 Tim	19.2.8, 7.8	Illumination of means of egress, including exit discharge, is arranged so that failure of any single lighting fixture (bulb) will not leave the area in darkness.	19.2.8; 7.8	Need code change specific to single-fixture failure language. E29-, E33-, E34-, E35-12 were D **[BE] 1008.2.2 Exit discharge.** In Group I-2 occupancies where two or more *exits* are required, on the exterior landings required by Section 1010.6.1, means of egress illumination levels for the *exit discharge* shall be provided such that failure of any single lighting unit shall not reduce the illumination level at the landing to less than 1 footcandle (11 lux).
K46	19.2.9.1	Emergency lighting of at least 1.5 hour duration is provided in accordance with 7.9.	19.2.9.1	**1104.5.1 Emergency power duration and installation.** Emergency power for *means of egress* illumination shall be provided in accordance with Section 604. In other than Group I-2, emergency power shall be provided for not less than 60 minutes for systems requiring emergency power. In Group I-2, essential electrical systems shall comply with Sections 1105.5.1 and 1105.5.2.

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
K47 Tim	19.2.10.1	Exit and directional signs are displayed in accordance with 7.10 with continuous illumination also served by the emergency lighting system.	19.2.10.1	Code change needed to 1104 or 1105 to ref. IFC 1013. **[BE] 1013.6.3 Power source.** Exit signs shall be illuminated at all times. To ensure continued illumination for a duration of not less than 90 minutes in case of primary power loss, the sign illumination means shall be connected to an emergency power system provided from storage batteries, unit equipment or an on-site generator. The installation of the emergency power system shall be in accordance with Section 604. **Exceptions:** 1. *Approved* exit sign illumination means that provide continuous illumination independent of external power sources for a duration of not less than 90 minutes, in case of primary power loss, are not required to be connected to an emergency electrical system. 2. Group I-2 Condition 2 exit sign illumination shall not be provided by unit equipment battery only.
EMERGENCY PLAN AND FIRE DRILLS				

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
K48	19.7.1.1	There is a written plan for the protection of all patients and for their evacuation in the event of an emergency.	19.7.1.1	**403.8 Group I occupancies.** An *approved* fire safety and evacuation plan in accordance with Section 404 shall be prepared and maintained for Group I occupancies. Group I occupancies shall comply with Sections 403.8.1 through 403.8.3. **403.8.2 Group I-2 occupancies.** Group I-2 occupancies shall comply with Sections 403.8.2.1 through 403.8.2.3 as well as 401 and 404 through 406. **403.8.2.1 Fire evacuation plans.** The fire safety and evacuation plans required by Section 404 shall include a description of special staff *actions*. Plans shall include all of the following in addition to the requirements of Section 404. 1. Procedures for evacuation for patients with needs for containment or restraint and post-evacuation containment, where present. 2. A written plan for maintenance of the means of egress. 3. Procedure for a defend-in-place strategy. 4. Procedures for a full-floor or building evacuation, where necessary. **403.8.2.2 Fire safety plans.** A copy of the plan shall be maintained at the facility at all times. Plans shall include all of the following in addition to the requirements of Section 404: 1. Location and number of any patient sleeping rooms and operating rooms. 2. Location of adjacent smoke compartments or refuge areas. 3. Path of travel to adjacent smoke compartments. 4. Location of any special locking, delayed egress or access control arrangements. 5. Location of elevators utilized for patient movement in accordance with the fire safety plan, where provided.

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
K50	19.7.1.2	Fire drills are held at unexpected times under varying conditions, at least quarterly on each shift.	19.7.1.6	**405.4 Time.** Drills shall be held at unexpected times and under varying conditions to simulate the unusual conditions that occur in case of fire. **405.2 Frequency.** Required emergency evacuation drills shall be held at the intervals specified in Table 405.2 or more frequently where necessary to familiarize all occupants with the drill procedure. (Table 405.2 = Group I-2 Quarterly.)
		The staff is familiar with procedures and is aware that drills are part of established routine.		**406.1 General.** Where fire safety and evacuation plans are required by Section 403, employees shall be trained in fire emergency procedures based on plans prepared in accordance with Section 404.
		Responsibility for planning and conducting drills is assigned only to competent persons who are qualified to exercise leadership.		**405.3 Leadership.** Responsibility for the planning and conduct of drills shall be assigned to competent persons designated to exercise leadership.
		Where drills are conducted between 9:00 PM and 6:00 AM a coded announcement may be used instead of audible alarms.	19.7.1.7	**403.8.2.3 Emergency evacuation drills.** Emergency evacuation drills shall comply with Section 405. **Exceptions:** 1. The movement of patients to safe areas or to the exterior of the building is not required. 2. Where emergency evacuation drills are conducted after visiting hours or where patients or residents are expected to be asleep, a coded announcement shall be an acceptable alternative to audible alarms.
FIRE ALARM SYSTEMS				

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
K51	19.3.4, 9.6.2.3(2)	A fire alarm system with approved component, devices or equipment installed according to NFPA 72 to provide effective warning of fire in any part of the building.		**1103.7.3 Group I-2. In Group I-2,** an automatic fire alarm system shall be installed in accordance with Section 1105.9. **1105.9 Group I-2 automatic fire alarm system.** An automatic fire alarm system shall be installed in existing Group I-2 occupancies in accordance with Section 907.2.6.2. **Exception:** Manual fire alarm boxes in patient sleeping areas shall not be required at *exits* if located at all nurses' control stations or other constantly attended staff locations, provided such stations are visible and continuously accessible and that travel distances required in Section 907.5.2.1 are not exceeded.
		Activation of the complete fire alarm system shall be by manual fire alarm initiation, automatic detection or extinguishing system operation.		See above
		Pull stations in patient sleeping areas, may be omitted provided that manual pull stations are within 200 ft of nurse's stations.		See above Exception. See also 907.4.2.1 below for 200" TD.
		Pull stations are located in the path of egress or within 60" of exits.	9.6.2.3(2)	**907.4.2.1 Location.** Manual fire alarm boxes shall be located not more than 5 feet (1524 mm) from the entrance to each *exit*. In buildings not protected by an *automatic sprinkler system* in accordance with Section 903.3.1.1 or 903.3.1.2, additional manual fire alarm boxes shall be located so that the *exit access* travel distance to the nearest box does not exceed 200 feet (60 960 mm).
		Electronic or written records of tests shall be available.		**907.8.5 Inspection, testing and maintenance.** The building *owner* shall be responsible to maintain the fire and life safety systems in an operable condition at all times. Service personnel shall meet the qualification requirements of NFPA 72 for inspection, testing and maintenance of such systems. Records of inspection, testing and maintenance shall be maintained.
		A reliable second source of power must be provided.		**907.6.2 Power supply.** The primary and secondary power supply for the fire alarm system shall be provided in accordance with NFPA 72.
		Fire alarm systems shall be maintained periodically and records of maintenance kept readily available.		See IFC §907.8.5 above

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
		There shall be annunciation of the fire alarm system to an approved central station.		**907.6.6 Monitoring.** Fire alarm systems required by this chapter or by the *International Building Code* shall be monitored by an *approved* supervising station in accordance with NFPA 72.
K52	9.6.1.4	A fire alarm system required for life safety shall be installed, tested, and maintained in accordance with NFPA 70 and 72.	9.6.1.3	**901.6.1 Standards.** *Fire protection systems* shall be inspected, tested and maintained in accordance with the referenced standards *listed* in Table 901.6.1. (Fire alarms = NFPA 72)
		The system shall have an approved maintenance and testing program complying with applicable requirement of NFPA 70 and 72.	9.6.1.5	**901.6.1 Standards.** *Fire protection systems* shall be inspected, tested and maintained in accordance with the referenced standards *listed* in Table 901.6.1. **Need change for NFPA 70 reference?**
K155	9.6.1.8	Where a required fire alarm system is out of service for more than 4 hours in a 24-hour period, the authority having jurisdiction shall be notified, and the building shall be evacuated or an approved fire watch shall be provided for all parties left unprotected by the shutdown until the fire alarm system has been returned to service.	9.6.1.6	**901.7 Systems out of service.** Where a required *fire protection system* is out of service, the fire department and the *fire code official* shall be notified immediately and, where required by the *fire code official*, the building shall be either evacuated or an *approved* fire watch shall be provided for all occupants left unprotected by the shutdown until the *fire protection system* has been returned to service. Where utilized, fire watches shall be provided with not less than one *approved* means for notification of the fire department and their only duty shall be to perform constant patrols of the protected premises and keep watch for fires.
K54	9.6.1.3	All required smoke detectors, including those activating door hold-open devices, are approved, maintained, inspected and tested in accordance with the manufacturer's specifications.	?	**907.8.5 Inspection, testing and maintenance.** The building *owner* shall be responsible to maintain the fire and life safety systems in an operable condition at all times. Service personnel shall meet the qualification requirements of NFPA 72 for inspection, testing and maintenance of such systems. Records of inspection, testing and maintenance shall be maintained.

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
K55	19.3.8	Every patient sleeping room shall have an outside window or outside door. Except for newborn nurseries and rooms intended for occupancy for less than 24 hours.		~~No change needed. See IFC 1029.1 –~~ not an emergency escape opening issue in sprinklered buildings, ventilation or lighting issue – this K-tag is gone in 2012 1203.5 or 1030 – not clear if this is ventilation of emergency escape Due to the current state of unknown with CMS adoption and the 2012 edition of LSC I recommend that we hold on this and not propose any change at this time.
AUTOMATIC SPRINKLER SYSTEMS				
K56	19.3.5, NFPA 13	Where required by section 19.1.6, Health care facilities shall be protected throughout by an approved, supervised automatic sprinkler system in accordance with section 9.7.	19.3.5.3	**1105.8 Group I-2 automatic sprinkler system.** An *automatic sprinkler system* installed in accordance with Section 903.3.1 shall be provided throughout existing Group I-2 fire areas. The sprinkler system shall be provided throughout the floor where the Group I-2 occupancy is located, and in all floors between the Group I-2 occupancy and the *level of exit discharge*.
		Required sprinkler systems are equipped with water flow and tamper switches which are electrically interconnected to the building fire alarm.	9.7.2.1	**903.4 Sprinkler system supervision and alarms.** Valves controlling the water supply for *automatic sprinkler systems*, pumps, tanks, water levels and temperatures, critical air pressures and waterflow switches on all sprinkler systems shall be electrically supervised by a *listed* fire alarm control unit.

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K154	9.7.6.1	Where a required automatic sprinkler system is out of service for more than 4 hours in a 24-hour period, the authority having jurisdiction shall be notified, and the building shall be evacuated or an approved fire watch system be provided for all parties left unprotected by the shutdown until the sprinkler system has been returned to service.	9.7.6; NFPA 25 §5.1.2 and Ch. 14	**901.7 Systems out of service.** Where a required *fire protection system* is out of service, the fire department and the *fire code official* shall be notified immediately and, where required by the *fire code official*, the building shall be either evacuated or an *approved* fire watch shall be provided for all occupants left unprotected by the shutdown until the *fire protection system* has been returned to service. Where utilized, fire watches shall be provided with not less than one *approved* means for notification of the fire department and their only duty shall be to perform constant patrols of the protected premises and keep watch for fires. **901.7.1 Impairment coordinator.** The building *owner* shall assign an impairment coordinator to comply with the requirements of this section. In the absence of a specific designee, the *owner* shall be considered the impairment coordinator. **901.7.2 Tag required.** A tag shall be used to indicate that a system, or portion thereof, has been removed from service. **901.7.3 Placement of tag.** The tag shall be posted at each fire department connection, system control valve, fire alarm control unit, fire alarm annunciator and *fire command center*, indicating which system, or part thereof, has been removed from service. The *fire code official* shall specify where the tag is to be placed. **901.7.4 Preplanned impairment programs.** Preplanned impairments shall be authorized by the impairment coordinator. Before authorization is given, a designated individual shall be responsible for verifying that all of the following procedures have been implemented: 1. The extent and expected duration of the impairment have been determined. 2. The areas or buildings involved have been inspected and the increased risks determined. 3. Recommendations have been submitted to management or the building *owner*/manager. 4. The fire department has been notified. 5. The insurance carrier, the alarm company, the building *owner*/manager and other authorities having jurisdiction have been notified. (6,7,8 not shown) 6. The supervisors in the areas to be affected have been notified. 7. A tag impairment system has been

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K60	19.3.4.2, 9.6.2.1	Initiation of the required fire alarm systems shall be by manual means in accordance with 9.6.2 and by means of any required sprinkler system waterflow alarms, detection devices, or detection systems.	19.3.4.2, 9.6.2.1	**907.5 Occupant notification systems.** A fire alarm system shall annunciate at the fire alarm control unit and shall initiate occupant notification upon activation, in accordance with Sections 907.5.1 through 907.5.2.3.3. Where a fire alarm system is required by another section of this code, it shall be activated by: 1. Automatic fire detectors. 2. Automatic sprinkler system waterflow devices. 3. Manual fire alarm boxes. 4. Automatic fire-extinguishing systems. **Exception:** Where notification systems are allowed elsewhere in Section 907 to annunciate at a constantly attended location.
K61	9.7.2.1, NFPA 72	Required automatic sprinkler systems shall have valves supervised so that at least a local alarm will sound when the valves are closed.	9.7.2.1 (allows on-premises or remote transmission)	**903.4 Sprinkler system supervision and alarms.** Valves controlling the water supply for *automatic sprinkler systems*, pumps, tanks, water levels and temperatures, critical air pressures and waterflow switches on all sprinkler systems shall be electrically supervised by a *listed* fire alarm control unit.
K62	19.7.6, 4.6.12, NFPA 13, NFPA 25, 9.7.5	Required automatic sprinkler systems are continuously maintained in reliable operating condition and are inspected and tested periodically.	19.7.6, 4.6.12, 9.7.5, NFPA 13, NFPA 25,	**903.5 Testing and maintenance.** Sprinkler systems shall be tested and maintained in accordance with Section 901. **901.6 Inspection, testing and maintenance.** Fire detection, alarm, and extinguishing systems, mechanical smoke exhaust systems, and smoke and heat vents shall be maintained in an operative condition at all times, and shall be replaced or repaired where defective. Nonrequired *fire protection systems* and equipment shall be inspected, tested and maintained or removed. **901.6.1 Standards.** *Fire protection systems* shall be inspected, tested and maintained in accordance with the referenced standards *listed* in Table 901.6.1**. [NFPA 25]**

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K63	9.7.1.1, NFPA 13	Required automatic sprinkler systems have an adequate and reliable water supply which provides continuous and automatic pressure.	9.7.1.1 references NFPA 13	**903.3.5 Water supplies.** Water supplies for *automatic sprinkler systems* shall comply with this section and the standards referenced in Section 903.3.1. The potable water supply shall be protected against backflow in accordance with the requirements of this section and the *International Plumbing Code*. For connections to public waterworks systems, the water supply test used for design of fire protection systems shall be adjusted to account for seasonal and daily pressure fluctuations based on information from the water supply authority and as approved by the *fire code official*.
K64	19.3.5.6	Portable fire extinguishers shall be provided in all health care occupancies in accordance with 9.7.4.1, NFPA 10.	19.3.5.12, 9.7.4	**906.1 Where required.** Portable fire extinguishers shall be installed in all of the following locations: 1. In new and existing Group A, B, E, F, H, I, M, R-1, R-2, R-4 and S occupancies. **Exception:** In Group R-2 occupancies, portable fire extinguishers shall be required only in locations specified in Items 2 through 6 where each *dwelling unit* is provided with a portable fire extinguisher having a minimum rating of 1-A:10-B:C. 2. Within 30 feet (9144 mm) of commercial cooking equipment. 3. In areas where flammable or *combustible liquids* are stored, used or dispensed. 4. On each floor of structures under construction, except Group R-3 occupancies, in accordance with Section 3315.1. 5. Where required by the sections indicated in Table 906.1. 6. Special-hazard areas, including but not limited to laboratories, computer rooms and generator rooms, where required by the *fire code official*. **906.2 General requirements.** Portable fire extinguishers shall be selected, installed and maintained in accordance with this section and NFPA 10.
SMOKING REGULATIONS				
K66	19.7.4		Smoking regulations shall be adopted and shall include not less than the following provisions:	

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		(1)	Smoking shall be prohibited in any room, ward, or compartment where flammable liquids, combustible gases, or oxygen is used or stored in any other hazardous location, and such area shall be posted with signs that read NO SMOKING or shall be posted with the international symbol for no smoking.	19.7.4(1), (2)	**310.2 Prohibited areas.** Smoking shall be prohibited where conditions are such as to make smoking a hazard, and in spaces where flammable or combustible materials are stored or handled. **310.3.1 Group I-2.** In Group I-2 occupancies where smoking is prohibited, "No Smoking" signs are not required in interior locations of the facility where signs are displayed at all major entrances into the facility.
		(2)	Smoking by patients classified as not responsible shall be prohibited, except when under direct supervision.	19.7.4(3)	I-2 required to be non-smoking. Not applicable?
		(3)	Ashtrays of noncombustible material and safe design shall be provided in all areas where smoking is permitted.	19.7.4(5)	**310.6 Ash trays.** Where smoking is permitted, suitable noncombustible ash trays or match receivers shall be provided on each table and at other appropriate locations.
		(4)	Metal containers with self-closing cover devices into which ashtrays can be emptied shall be readily available to all areas where smoking is permitted.	19.7.4(6)	I-2 required to be non-smoking. Not applicable?
BUILDING SERVICE EQUIPMENT					
K67	19.5.2.1, 9.2, NFPA 90A, 19.6.2.2		Heating, ventilating, and air conditioning shall comply with 9.2 and shall be installed in accordance with the manufacturer's specifications.	19.5.2.1, 9.2	**603.1 Installation.** The installation of nonportable fuel gas appliances and systems shall comply with the *International Fuel Gas Code*. The installation of all other fuel-fired appliances, other than internal combustion engines, oil lamps and portable devices such as blow torches, melting pots and weed burners, shall comply with this section and the *International Mechanical Code*. **603.1.1 Manufacturer's instructions.** The installation shall be made in accordance with the manufacturer's instructions and applicable federal, state and local rules and regulations. Where it becomes necessary to change, modify or alter a manufacturer's instructions in any way, written approval shall first be obtained from the manufacturer.

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K68	19.5.2.2	Combustion and ventilation air for boiler, incinerator and heater rooms is taken from and discharged to the outside air.	19.5.2 19.5.2.1 19.5.2.2 19.5.2.3 (this section varies and more detail.Item sustpended heater the same comply with 19.5.2.2(2) Item 2 added Deals with direct vent (NFPA 54) permitted in patient sleeping smoke compartment but not rooms, 9.2.2, sprinklers (quick response or residential) Controls locked CO in accordance with 9.8 Item 3 Solid fueled	**603.1.2 Approval.** The design, construction and installation of fuel-fired appliances shall be in accordance with the *International Fuel Gas Code* and the *International Mechanical Code*.

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K69	19.3.2.6, NFPA 96	Cooking facilities shall be protected in accordance with 9.2.3.	19.3.2.5 (Residential allowance added here 19.3.2.5.2, 19.3.2.5.3 and 19.3.2.5.4)	**407.2.6 Nursing home cooking facilities.** In Group I-2, Condition 1, occupancies, rooms or spaces that contain a cooking facility with domestic cooking appliances shall be permitted to be open to the corridor where all of the following criteria are met: 1. The number of care recipients housed in the smoke compartment is not greater than 30. 2. The number of care recipients served by the cooking facility is not greater than 30. 3. Only one cooking facility area is permitted in a smoke compartment. 4. The types of domestic cooking appliances permitted are limited to ovens, cooktops, ranges, warmers and microwaves. 5. The corridor is a clearly identified space delineated by construction or floor pattern, material or color. 6. The space containing the domestic cooking facility shall be arranged so as not to obstruct access to the required exit. 7. A domestic cooking hood installed and constructed in accordance with Section 505 of the*International Mechanical Code* is provided over the cooktop or range. 8. The domestic cooking hood provided over the cooktop or range shall be equipped with an automatic fire-extinguishing system of a type recognized for protection of domestic cooking equipment. Preengineered automatic extinguishing systems shall be tested in accordance with UL 300A and *listed* and *labeled* for the intended application. The system shall be installed in accordance with this code, its listing and the manufacturer's instructions. 9. A manual actuation device for the hood suppression system shall be installed in accordance with Sections 904.12.1 and 904.12.2. 10. An interlock device shall be provided such that upon activation of the hood suppression system, the power or fuel supply to the cooktop or range will be turned off. 11. A shut-off for the fuel and electrical power supply

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K70	19.7.8		Portable space heating devices shall be prohibited in all health care occupancies. Except it shall be permitted to be used in non-sleeping staff and employee areas where the heating elements of such devices do not exceed 212oF (100oC).	19.7.8	**605.10 Portable, electric space heaters.** Where not prohibited by other sections of this code, portable, electric space heaters shall be permitted to be used in all occupancies other than Group I-2 and in accordance with Sections 605.10.1 through 605.10.4. **Exception:** The use of portable, electric space heaters in which the heating element cannot exceed a temperature of 212°F (100°C) shall be permitted in nonsleeping staff and employee areas in Group I-2 occupancies.
K71	19.5.4, 9.5, 8.4, NFPA 82		Rubbish Chutes, Incinerators and Laundry Chutes		
		(1)	Any existing linen and trash chute, including pneumatic rubbish and linen systems, that opens directly onto any corridor shall be sealed by fire resistive construction to prevent further use or shall be provided with a fire door assembly having a fire protection rating of 1 hour. All new chutes shall comply with 9.5.	9.5	**1103.4.9.2.1 Chute intake direct from corridor.** Where intake to chutes is direct from a corridor, the intake opening shall be equipped with a chute-intake door in accordance with Section 716 of the *International Building Code* and having a fire protection rating of not less than1 hour.
		(2)	Any rubbish chute or linen chute, including pneumatic rubbish and linen systems, shall be provided with automatic extinguishing protection in accordance with 9.7.		**1103.4.9.3 Automatic sprinkler system.** Chutes shall be equipped with an *approved automatic sprinkler system* in accordance with Section 903.2.11.2.
		(3)	Any trash chute shall discharge into a trash collection room used for no other purpose and protected in accordance with 8.4.		**1103.4.9.4 Chute discharge rooms.** Chutes shall terminate in a dedicated chute discharge room. Such rooms shall be separated from the remainder of the building by not less than 1-hour fire-resistance-rated construction. Opening protectives shall be in accordance with Section 716 of the *International Building Code* and have a fire protection rating of not less than 1 hour.
		(4)	Existing flue-fed incinerators shall be sealed by fire resistive construction to prevent further use.		**1103.4.10 Flue-fed incinerators.** Existing flue-fed incinerator rooms and associated flue shafts shall be protected with 1-hour fire-resistance-rated construction and shall not have other vertical openings connected with the space other than the associated flue. Opening protectives shall be in accordance with Section 716 of the *International Building Code* and have a fire protection rating of not less than 1 hour.

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K160	19.5.3, 9.4.3.2	All existing elevators, having a travel distance of 25 ft or more above or below the level that best serves the needs of emergency personnel for firefighting purposes, conform with Firefighter's Service Requirements of ASME/ ANSI A17.3. ANSI A17.1 states 25 ft or more above or below the designated level and defines "designated level" as the main floor or other floor level that best serves the needs of emergency personnel for firefighting purposes or rescue purposes identified by the building code or fire authority. Depending on floor slab thickness and heights this would generally apply to a three-story building, and almost certainly to a four-story building.	19.5.3, 9.4.3.2	**1103.3.2 Elevator emergency operation.** Existing elevators with a travel distance of 25 feet (7620 mm) or more above or below the main floor or other level of a building and intended to serve the needs of emergency personnel for fire-fighting or rescue purposes shall be provided with emergency operation in accordance with ASME A17.3.
		Includes firefighters service **phase I** key recall and smoke detector automatic recall, firefighters service **phase II** emergency in-car key operation, machine room smoke detectors, and elevator lobby smoke detectors.	19.5.3, 9.4.3.2	See above.
K161	19.5.3, 9.4.2.2	All existing escalators, dumbwaiters, and moving walks conform to the requirements of ASME/ ANSI A17.3, *Safety Code for Existing Elevators and Escalators*.	19.5.3, 9.4.2.2	**1103.3.1 Elevators, escalators and moving walks.** Existing elevators, escalators and moving walks in Group I-2 Condition 2 occupancies shall comply with ASME A17.3.
		Includes escalator emergency stop buttons and automatic skirt obstruction stop.		
		For power dumbwaiters includes hoistway door locking to keep doors closed except for floor where car is being loaded or unloaded.		
FURNISHINGS AND DECORATIONS				

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K72		Means of egress shall be continuously maintained free of all obstructions or impediments to full instant use in the case of fire or other emergency.		**1031.2 Reliability.** Required *exit accesses*, *exits* and *exit discharges* shall be continuously maintained free from obstructions or impediments to full instant use in the case of fire or other emergency where the building area served by the *means of egress* is occupied. An *exit* or *exit passageway* shall not be used for any purpose that interferes with a *means of egress*. Add new section from 1030 for Group I-2?
		No furnishings, decorations, or other objects shall obstruct exits, access thereto, egress there from, or visibility thereof and shall be in accordance with 7.1.10.		**1031.6 Finishes, furnishings and decorations.** Means of egress doors shall be maintained in such a manner as to be distinguishable from the adjacent construction and finishes such that the doors are easily recognizable as doors. **Furnishings, decorations or other objects shall not be placed so as to obstruct *exits*, access thereto, egress therefrom, or visibility thereof.** Hangings and draperies shall not be placed over exit doors or otherwise be located to conceal or obstruct an *exit*. Mirrors shall not be placed on *exit* doors. Mirrors shall not be placed in or adjacent to any *exit* in such a manner as to confuse the direction of exit.
K73	19.7.5.2, 19.7.5.3, 19.7.5.4	No furnishings or decorations of highly flammable character shall be used.	19.7.5.6(1), (2), (3); 10.3.5	**807.2 Limitations.** The following requirements shall apply to all occupancies: 1. **Furnishings or decorative materials of an explosive or highly flammable character shall not be used.** 2. Fire-retardant coatings in existing buildings shall be maintained so as to retain the effectiveness of the treatment under service conditions encountered in actual use. 3. Furnishings or other objects shall not be placed to obstruct exits, access thereto, egress therefrom or visibility thereof. 4. The permissible amount of noncombustible decorative materials shall not be limited.

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K74	19.7.5.3	Draperies, curtains, including cubicle curtains, and other loosely hanging fabrics and films serving as furnishings or decorations in health care occupancies shall be in accordance with provisions of 10.3.1 and NFPA 13. Except shower curtains shall be in accordance with NFPA 701.	19.7.5.1, 10.3.1	**807.3 Combustible decorative materials.** In other than Group I-3, **curtains, draperies, fabric hangings and other similar combustible decorative materials suspended from walls or ceilings shall comply with Section 807.4** and shall not exceed 10 percent of the specific wall or ceiling area to which they are attached. Fixed or movable walls and partitions, paneling, wall pads and crash pads applied structurally or for decoration, acoustical correction, surface insulation or other purposes shall be considered *interior finish*, shall comply with Section 803 and shall not be considered *decorative materials* or furnishings.

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY		References in 2012 LSC	2015 IFC/IBC SECTION
		1)	Newly introduced upholstered furniture shall meet the criteria specified when tested in accordance with the methods cited in 10.3.2 (2) and 10.3.3. 18.7.5.1, 19.7.5.1, NFPA 13 Newly introduced upholstered furniture and mattresses means purchased since March, 2003.	19,7,5,2, 10.3.2.1, 10.3.2.3	**805.2 Group I-2, nursing homes and hospitals.** The requirements in Sections 805.2.1 through 805.2.2 shall apply to nursing homes and hospitals classified in Group I-2. **805.2.1 Upholstered furniture.** Newly introduced upholstered furniture shall meet the requirements of Sections 805.2.1.1 through 805.2.1.3. **805.2.1.1 Ignition by cigarettes.** Newly introduced upholstered furniture shall be shown to resist ignition by cigarettes as determined by tests conducted in accordance with one of the following: (a) mocked-up composites of the upholstered furniture shall have a char length not exceeding 1.5 inches (38 mm) when tested in accordance with NFPA 261 or (b) the components of the upholstered furniture shall meet the requirements for Class I when tested in accordance with NFPA 260. **Exception:** Upholstered furniture belonging to the patients in sleeping rooms of nursing homes (Group I-2), provided that a smoke detector is installed in such rooms. Battery-powered, single-station smoke alarms shall be allowed. **805.2.1.2 Heat release rate.** Newly introduced upholstered furniture shall have limited rates of heat release when tested in accordance with ASTM E 1537 or California Technical Bulletin 133, as follows: 1. The peak rate of heat release for the single upholstered furniture item shall not exceed 80 kW. **Exception:** Upholstered furniture in rooms or spaces protected by an *approved automatic sprinkler system* installed in accordance with Section 903.3.1.1. 2. The total energy released by the single upholstered furniture item during the first 10 minutes of the test shall not exceed 25 MJ. **Exception:** Upholstered furniture in rooms or spaces protected by an *approved automatic sprinkler system* installed in accordance with Section 903.3.1.1. **805.2.1.3 Identification.** Upholstered furniture shall bear the label of an *approved* agency, confirming compliance with the requirements of Sections 805.2.1.1 and 805.2.1.2.

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		2)	Newly introduced mattresses shall meet the criteria specified when tested in accordance with the method cited in 10.3.2 (3) and 10.3.4. Newly introduced upholstered furniture and mattresses means purchased since March, 2003.	19.7.5.4, 10.3.2.2, 10.3.4	**805.2 Group I-2, nursing homes and hospitals.** The requirements in Sections 805.2.1 through 805.2.2 shall apply to nursing homes and hospitals classified in Group I-2. **805.2.2 Mattresses.** Newly introduced mattresses shall meet the requirements of Sections 805.2.2.1 through 805.2.2.3. **805.2.2.1 Ignition by cigarettes.** Newly introduced mattresses shall be shown to resist ignition by cigarettes as determined by tests conducted in accordance with DOC 16 CFR Part 1632 and shall have a char length not exceeding 2 inches (51 mm). **805.2.2.2 Heat release rate.** Newly introduced mattresses shall have limited rates of heat release when tested in accordance with ASTM E 1590 or California Technical Bulletin 129, as follows: 1. The peak rate of heat release for the single mattress shall not exceed 100 kW. **Exception:** Mattresses in rooms or spaces protected by an *approved automatic sprinkler system* installed in accordance with Section 903.3.1.1. 2. The total energy released by the single mattress during the first 10 minutes of the test shall not exceed 25 MJ. **Exception:** Mattresses in rooms or spaces protected by an *approved automatic sprinkler system* installed in accordance with Section 903.3.1.1. **805.2.2.3 Identification.** Mattresses shall bear the label of an *approved* agency, confirming compliance with the requirements of Sections 805.2.2.1 and 805.2.2.2.
K75	19.7.5.5	Soiled linen or trash collection receptacles shall not exceed 32 gal (121 L) in capacity.		19.7.5.7.1	**No comparable IFC text.**
		The average density of container capacity in a room or space shall not exceed .5 gal/ft^2 (20.4 L/m^2).		19.7.5.7.1(1)	
		A capacity of 32 gal (121 L) shall not be exceeded within any 64-ft^2 (5.9-m^2) area.		19.7.5.7.1(2)	

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
		Mobile soiled linen or trash collection receptacles with capacities greater than 32 gal (121 L) shall be located in a room protected as a hazardous area when not attended.	19.7.5.7.1(3)	**808.1 Wastebaskets and linen containers in Group I-1, I-2 and I-3 occupancies. W**astebaskets, linen containers and other waste containers, including their lids, located in Group I-1, I-2 and I-3 occupancies shall be constructed of noncombustible materials or of materials that meet a peak rate of heat release not exceeding 300 kW/m2 when tested in accordance with ASTM E 1354 at an incident heat flux of 50 kW/m2 in the horizontal orientation. Metal wastebaskets and other metal waste containers with a capacity of 20 gallons (75.7 L) or more shall be *listed* in accordance with UL 1315 and shall be provided with a noncombustible lid. **Portable containers exceeding 32 gallons (121 L) shall be stored in an area classified as a waste and linen collection room and constructed in accordance with Table 509 of the *International Building Code*.** **Need change to ref 1105.3, not IBC T509. Also need "unattended" to describe portable containers.**
LABORATORIES				
K31	10.5.1	Laboratories employing quantities of flammable, combustible, or hazardous materials that are considered a severe hazard shall be protected in accordance with NFPA 99. (Laboratories that are not considered to be severe hazard shall meet the provision of K29.) Laboratories in Health Care occupancies and medical and dental offices shall be in accordance with NFPA 99.	19.3.2.2 references NFPA 99 also Section 8.7. Applicable to "administration, maintenance and testing" 8.7 is special hazards protection. Various separation requirements etc. NFPA 99 believe equivalent section 15.4	No change needed? See IFC §5003.8.3 **5003.8.3 Control areas.** *Control areas* shall comply with Sections 5003.8.3.1 through 5003.8.3.5. (SUBSECTIONS NOT SHOWN)
K136	10.2.1.3.1, 19.3.2.1	Procedures for laboratory emergencies shall be developed. Such procedures shall include alarm actuation, evacuation, and equipment shutdown procedures, and provisions for control.	NFPA 45 and 99 Chapter 12 seems closest reference 19.3.2.1 does not mention in 2000 or 2012	No change needed. See IFC §5003.9.1 **5003.9.1 Personnel training and written procedures.** Persons responsible for the operation of areas in which hazardous materials are stored, dispensed, handled or used shall be familiar with the chemical nature of the materials and the appropriate mitigating actions necessary in the event of fire, leak or spill.

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
K131	10.2.1.3.2	Emergency procedures shall be established for controlling chemical spills in accordance with NFPA 99.	NFPA 45 and 99 Chapter 12 seems closest reference	No change needed. See IFC §5003.9.1 **5003.9.1 Personnel training and written procedures.** Persons responsible for the operation of areas in which hazardous materials are stored, dispensed, handled or used shall be familiar with the chemical nature of the materials and the appropriate mitigating actions necessary in the event of fire, leak or spill.
K132	10.2.1.4.2	Continuing safety education and supervision shall be provided, incidents shall be reviewed monthly, and procedures reviewed annually shall be in accordance with NFPA 99.	NFPA 45 and 99 Chapter 12 seems closest reference	No change needed.

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
K133	5.4.3, 5.6.2	Fume hoods shall be in accordance with NFPA 99.	NFPA 45 chapter 8 via reference from 99 9.3.1.2	Need to take a look see if already covered by IMC maintenance. Also see how NFPA 99 addresses in terms of specific references. Need a specific reference to NFPA 45. 4/1/2014 John W note: The 2012 version of NFPA 99 cites a direct reference to NFPA 45 for ALL laboratories. This section deals with all HVAC requirements. NFPA 99, Section 9.3.1.2 "Laboratories shall comply with NFPA 45…" I see the point now – The ICC codes don't specifically reference NFPA 45. We need to add this reference. Determined that this issue is addressed by Section 510 of the IMC. Also the IMC requires maintenance in accordance with Section 102.3. It should also be noted that laboratories were addressed specifically beginning I the 2006 edition within Section 510 of the IMC. 8/12/2014
K134	10.6	Emergency Shower:		
		Where the eyes or body of any person can be exposed to injurious corrosive materials, suitable fixed facilities for quick drenching or flushing of the eyes and body shall be provided within the work area for immediate emergency use.	Was only for laboratories cannot find in 99 or 45 specifically in newest editions	F295-13 was Disapproved. Need to clean up and work on justification and education on the issue. Still need to determine if this is to be pursued. Concern with feedback at hearings regarding OSHA.

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
		Fixed eye baths designed and installed to avoid injurious water pressure shall be in accordance with NFPA 99.		SECTION 411 EMERGENCY SHOWERS AND EYEWASH STATIONS 411.1 Approval. Emergency showers and eyewash stations shall conform to ISEA Z358.1. 411.2 Waste connection. Waste connections shall not be required for emergency showers and eyewash stations.
K135	NFPA 99, 4.3, 10.7.2.1	Flammable and combustible liquids shall be used from and stored in approved containers in accordance with NFPA 30, and NFPA 45.	2.2 NFPA 99 references both 30 and 45 9.2.3.3 NFPA 45 2011	**5704.3.1 Design, construction and capacity of containers and portable tanks.** The design, construction and capacity of containers for the storage of Class I, II and IIIA liquids shall be in accordance with this section and Section 9.4 of NFPA 30.

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
		Storage cabinets for flammable and combustible liquids shall be constructed in accordance with NFPA 30.		**5704.3.2.1 Design and construction of storage cabinets.** Design and construction of liquid storage cabinets shall be in accordance with Sections 5704.3.2.1.1 through 5704.3.2.1.4. **5704.3.2.1.1 Materials.** Cabinets shall be *listed* in accordance with UL 1275, or constructed of *approved* wood or metal in accordance with the following: 1. Unlisted metal cabinets shall be constructed of steel having a thickness of not less than 0.044 inch (1.12 mm) (18 gage). The cabinet, including the door, shall be double walled with 11/2-inch (38 mm) airspace between the walls. Joints shall be riveted or welded and shall be tight fitting. 2. Unlisted wooden cabinets, including doors, shall be constructed of not less than 1-inch (25 mm) exterior grade plywood. Joints shall be rabbeted and shall be fastened in two directions with wood screws. Door hinges shall be of steel or brass. Cabinets shall be painted with an intumescent-type paint. **5704.3.2.1.2 Labeling.** Cabinets shall be provided with a conspicuous label in red letters on contrasting background that reads: FLAMMABLE—KEEP FIRE AWAY. **5704.3.2.1.3 Doors.** Doors shall be well fitted, self-closing and equipped with a three-point latch. **5704.3.2.1.4 Bottom.** The bottom of the cabinet shall be liquid tight to a height of not less than 2 inches (51 mm). **5704.3.2.2 Capacity.** The combined total quantity of liquids in a cabinet shall not exceed 120 gallons (454 L). Need to compare to NFPA 30 § 9.5
MEDICAL GASES AND ANESTHETIZING AREAS				

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY		References in 2012 LSC	2015 IFC/IBC SECTION
K76	4.3.1.1.2, 19.3.2.4	Medical gas storage and administration areas shall be protected in accordance with NFPA 99.			**5306.5 Medical gas systems.** Medical gas systems including, but not limited to, distribution piping, supply manifolds, connections, pressure regulators and relief devices and valves, shall be installed in accordance with NFPA 99 and the general provisions of this chapter. Existing medical gas systems shall be maintained in accordance with the maintenance, inspection and testing provisions of NFPA 99 for medical gas systems.
		(a)	Oxygen storage locations of greater than 3,000 cu.ft. are enclosed by a one-hour separation.		**5306.2 Interior supply location.** Medical gases shall be stored in areas dedicated to the storage of such gases without other storage or uses. Where containers of medical gases in quantities greater than the permit amount [O_2 = 504 ft^3] are located inside buildings, they shall be in a 1-hour exterior room, a 1-hour interior room or a gas cabinet in accordance with Section 5306.2.1, 5306.2.2 or 5306.2.3, respectively. Rooms or areas where medical gases are stored or used in quantities exceeding the *maximum allowable quantity per control area* as set forth in Section 5003.1 [O_2 = 1,500 ft^3] shall be in accordance with the *International Building Code* for high-hazard Group H occupancies.

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		(b)	Locations for supply systems of greater than 3,000 cu.ft. are vented to the outside. NFPA 99, 4.3.1.1.2.		**5306.2.1 One-hour exterior rooms.** A 1-hour exterior room shall be a room or enclosure separated from the remainder of the building by *fire barriers* constructed in accordance with Section 707 of the *International Building Code* or horizontal assemblies constructed in accordance with Section 711 of the *International Building Code*, or both, with a *fire-resistance rating* of not less than 1 hour. Openings between the room or enclosure and interior spaces shall be self-closing smoke- and draft-control assemblies having a *fire protection rating* of not less than 1 hour. Rooms shall have not less than one exterior wall that is provided with not less than two nonclosable louvered vents. Each vent shall have a minimum free opening area of 24 square inches (155 cm2) for each 1,000 cubic feet (28 m3) at normal temperature and pressure (NTP) of gas stored in the room and shall be not less than 72 square inches (465 cm2) in aggregate free opening area. One vent shall be within 6 inches (152 mm) of the floor and one shall be within 6 inches (152 mm) of the ceiling. Rooms shall be provided with not less than one automatic sprinkler to provide container cooling in case of fire. **5306.2.2 One-hour interior room.** Where an exterior wall cannot be provided for the room, automatic sprinklers shall be installed within the room. The room shall be exhausted through a duct to the exterior. Supply and exhaust ducts shall be enclosed in a 1-hour-rated shaft enclosure from the room to the exterior. *Approved* mechanical ventilation shall comply with the I*nternational Mechanical Code* and be provided at a minimum rate of 1 cubic foot per minute per square foot [0.00508 $m^3/(s \cdot m^2)$] of the area of the room.

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
K77		Piped in medical gas systems comply with NFPA 99, Chapter 4.		Change needed.? See IFC §5306.4, check editions of referenced standards **5306.5 Medical gas systems.** Medical gas systems including, but not limited to, distribution piping, supply manifolds, connections, pressure regulators and relief devices and valves, shall be installed in accordance with NFPA 99 and the general provisions of this chapter. Existing medical gas systems shall be maintained in accordance with the maintenance, inspection and testing provisions of NFPA 99 for medical gas systems.
K78	NFPA 99 5.4.1.1, 19.3.2.3	Anesthetizing locations shall be protected in accordance with NFPA 99.	19.3.2.3; 8.7	**5306.5 Medical gas systems.** Medical gas systems including, but not limited to, distribution piping, supply manifolds, connections, pressure regulators and relief devices and valves, shall be installed in accordance with NFPA 99 and the general provisions of this chapter. Existing medical gas systems shall be maintained in accordance with the maintenance, inspection and testing provisions of NFPA 99 for medical gas systems. **Need change to be anesthetizing-specific?** **John W. Note: I think the section cited above covers the scope of the original KTAG. The IFC requirement to send people to NFPA 99 for the medical gas system covers all of the requirements below.** **No revision necessary to I-Codes 8/12/2014**

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY		References in 2012 LSC	2015 IFC/IBC SECTION
		(a)	Shutoff valves are located outside each anesthetizing location and arranged so that shutting off one room or location will not affect others.		Reference to NFPA 99. How to handle when reference document changes, in existing condition? - Need to look at where this is administered. Storage is already addressed by K143. Check valve requirements (a) and (b) to see if retroactive in 101 and 99. Take a look at incidental uses in IBC 509 and Chapter 11. Check NFPA 45 as well to see what they require. – same reference should make this okay **John W. Note: This requirements deals with valving of medical gas distribution systems. This is a sub-component of the larger set "distribution piping" listed in IFC 5306.5. The broader reference covers the this. NFPA 99, 2012 section : 5.1.4 Valves, specifically section 5.1.4.8.7** **No revision necessary to I-Codes 8/12/2014**

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY		References in 2012 LSC	2015 IFC/IBC SECTION
		(b)	Relative humidity is maintained equal to or great than 35%	No longer addressed by NFPA 99.	See above. No longer addressed in NFPA 99. No further action necessary. John W. Note: Specific humidity requirements specific to anesthetizing locations were deleted out of NFPA 99. General HVAC requirements refer to ASHRAE 170, NFPA 2012 section 9.3.1.1. **No revision necessary to I-Codes 8/12/2014**
K140		(a)	Master alarm panels are in two separate locations and have audible and visible signals.		No change required. NFPA 99 referenced in IFC 5306.5
		(b)	There are high/low alarms for +/- 20% operating pressure. This section shall be in accordance with NFPA 99. 4.3.1.2.2.		No change required. NFPA 99 referenced in IFC 5306.5
		(c)	Where a level 2 gas system is used, one alarm panel that complies with 4.3.1.2.2(b) 3.a, b, c and d and with 4.3.1.2.2(c)2 and 5 shall be permitted. (4.4.1 Exception No. 4).		No change required. NFPA 99 referenced in IFC 3006.4

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
K141	8.6.4.2	Non-smoking and no smoking signs in areas where oxygen is used or stored shall be in accordance with NFPA 99.	11.5.3.2 (NFPA 99)	No change needed. See IFC §6303.1.3, §5003.7 **6303.1.3 Ignition source control.** Ignition sources in areas containing oxidizing gases shall be controlled in accordance with Section 5003.7. **5003.7.1 Smoking.** Smoking shall be prohibited and "No Smoking" signs provided as follows: 1. In rooms or areas where hazardous materials are stored or dispensed or used in *open systems* in amounts requiring a permit in accordance with Section 5001.5. 2. Within 25 feet (7620 mm) of outdoor storage, dispensing or open use areas. 3. Facilities or areas within facilities that have been designated as totally "no smoking" shall have "No Smoking" signs placed at all entrances to the facility or area. Designated areas within such facilities where smoking is permitted either permanently or temporarily, shall be identified with signs designating that smoking is permitted in these areas only. 4. In rooms or areas where flammable or combustible hazardous materials are stored, dispensed or used. Signs required by this section shall be in English as a primary language or in symbols allowed by this code and shall comply with Section 310.
K142		All occupancies containing hyperbaric facilities shall comply with NFPA 99, Chapter 19.	Chapter 14 in 2012 99	**611.1 General.** Hyperbaric facilities shall be inspected, tested and maintained in accordance with NFPA 99. **IBC 425.1 Hyperbaric facilities.** Hyperbaric facilities shall meet the requirements contained in Chapter 20 of NFPA 99.
K143	8.6.2.5.2		Transferring of oxygen shall be:	

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		(a)	separated from any portion of a facility wherein patients are housed, examined, or treated by a separation of a fire barrier of 1-hour fire-resistive construction; and	11.5.2.3.1	F306-13 AS and F308-13 AS addressed **5306.2.1 One-hour exterior rooms.** A 1-hour exterior room shall be a room or enclosure separated from the remainder of the building by *fire barriers* constructed in accordance with Section 707 of the *International Building Code* or horizontal assemblies constructed in accordance with Section 711 of the *International Building Code*, or both, with a *fire-resistance rating* of not less than 1 hour. Openings between the room or enclosure and interior spaces shall be self-closing smoke- and draft-control assemblies having a *fire protection rating* of not less than 1 hour. Rooms shall have not less than one exterior wall that is provided with not less than two nonclosable louvered vents. Each vent shall have a minimum free opening area of 24 square inches (155 cm2) for each 1,000 cubic feet (28 m3) at normal temperature and pressure (NTP) of gas stored in the room and shall be not less than 72 square inches (465 cm2) in aggregate free opening area. One vent shall be within 6 inches (152 mm) of the floor and one shall be within 6 inches (152 mm) of the ceiling. Rooms shall be provided with not less than one automatic sprinkler to provide container cooling in case of fire. **5306.2.2 One-hour interior room.** Where an exterior wall cannot be provided for the room, automatic sprinklers shall be installed within the room. The room shall be exhausted through a duct to the exterior. Supply and exhaust ducts shall be enclosed in a 1-hour-rated shaft enclosure from the room to the exterior. *Approved* mechanical ventilation shall comply with the *International Mechanical Code* and be provided at a minimum rate of 1 cubic foot per minute per square foot [0.00508 m3/(s · m2)] of the area of the room.
		(b)	the area that is mechanically ventilated, sprinklered, and has ceramic or concrete flooring; and	11.5.2.3.1	F306-13 AS and F308-13 AS addressed 5306.2.1

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		(c)	in an area that is posted with signs indicating that transferring is occurring, and that smoking in the immediate area is not permitted in accordance with NFPA 99 and Compressed Gas Association.	11.5.2.3.1	F306-13 AS and F308-13 AS addressed **6303.1.3 Ignition source control.** Ignition sources in areas containing oxidizing gases shall be controlled in accordance with Section 5003.7. **5003.7.1 Smoking.** Smoking shall be prohibited and "No Smoking" signs provided as follows: 1. In rooms or areas where hazardous materials are stored or dispensed or used in *open systems* in amounts requiring a permit in accordance with Section 5001.5. 2. Within 25 feet (7620 mm) of outdoor storage, dispensing or open use areas. 3. Facilities or areas within facilities that have been designated as totally "no smoking" shall have "No Smoking" signs placed at all entrances to the facility or area. Designated areas within such facilities where smoking is permitted either permanently or temporarily, shall be identified with signs designating that smoking is permitted in these areas only. 4. In rooms or areas where flammable or combustible hazardous materials are stored, dispensed or used. Signs required by this section shall be in English as a primary language or in symbols allowed by this code and shall comply with Section 310.
ELECTRICAL					

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
K106	3.4.2.2, 3.4.2.1.4	The hospital with life support equipment has a Type I Essential Electrical System powered by a generator with a transfer switch and separate power supply. The EES is in accordance with NFPA 99.	Covered via reference from IFC 604.2.6 which refers to IBC 407.10 which requires design and construction per NFPA 99	Change noted for IFC/2012 section 604.1.2 Group I-2 Occupancies on matrix. However, no code change proposed.- check to see if there is reference to NFPA 99 – IFC 604.1, and 1105.10 **604.1.2 Installation.** Emergency power systems and standby power systems shall be installed in accordance with the *International Building Code*, NFPA 70, NFPA 110 and NFPA 111. **604.2.6 Group I-2 Occupancies.** Essential electrical systems for Group I-2 occupancies shall be in accordance with Section 407.10 of the *International Building Code*. **IBC 407.10 Electrical systems.** In Group I-2 occupancies, the essential electrical system for electrical components, equipment and systems shall be designed and constructed in accordance with the provisions of Chapter 27 and **NFPA 99**. **1105.10 Essential electrical systems. E**ssential electrical systems in Group I-2 Condition 2 occupancies shall be in accordance with Sections 1105.10.1 and 1105.10.2. **1105.10.1 Where required.** In Group I-2 Condition 2 occupancies where life support is being provided, an essential electrical system shall be provided in accordance with NFPA 99. **1105.10.2 Installation and duration.** In Group I-2, Condition 2, occupancies, the installation and duration of operation of existing essential electrical systems shall be based on a hazard vulnerability analysis conducted in accordance with NFPA 99.

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
K144	3.4.4.1, NFPA 110, 8.4.2	Generators are inspected weekly and exercised under load for 30 minutes per month and shall be in accordance with NFPA 99.	604.4.1 Group I-2 Condition 2. In Group 1-2 Condition 2, Emergency and standby power systems shall also be maintained in accordance with NFPA 99.	**604.4 Maintenance.** Emergency and standby power systems shall be maintained in accordance with NFPA 110 and NFPA 111 such that the system is capable of supplying service within the time specified for the type and duration required. **604.4.1 Group I-2 Condition 2.** In Group I-2 Condition 2, Emergency and standby power systems shall also be maintained in accordance with NFPA 99. **604.5 Operational inspection and testing.** Emergency power systems, including all appurtenant components shall be inspected and tested under load in accordance with NFPA 110 and NFPA 111. **604.5.1 Group I-2 Condition 2.** In Group I-2 Condition 2, Emergency and standby power systems shall also be inspected and tested under load in accordance with NFPA 99.
K145	3.4.2.2.2	The Type I EES is divided into the critical branch, life safety branch and the emergency system and shall be in accordance with NFPA 99.	6.4.2.2.1.1 **Covered via reference from IFC 1105.10.1 which requires system per NFPA 99**	**1105.10.1 Where required.** In Group I-2 Condition 2 occupancies where life support is being provided, an essential electrical system shall be provided in accordance with NFPA 99.

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K-ID & WORK GRP	CMS Reference 2000 LSC	BUILDING PROVISION SUMMARY	References in 2012 LSC	2015 IFC/IBC SECTION
K147	9.1.2	Electrical wiring and equipment shall be in accordance with NFPA 70, National Electrical Code.	9.1.2 **Reference for IFC 605.1 - Abatement of electrical hazards - not required**	**1105.10.1 Where required.** In Group I-2 Condition 2 occupancies where life support is being provided, an essential electrical system shall be provided in accordance with NFPA 99. **604.1.2 Installation.** Emergency power systems and standby power systems shall be installed in accordance with the *International Building Code*, NFPA 70, NFPA 110 and NFPA 111. **IBC 2701.1 Scope.** This chapter governs the electrical components, equipment and systems used in buildings and structures covered by this code. Electrical components, equipment and systems shall be designed and constructed in accordance with the provisions of NFPA 70. ~~possible reference to NFPA 70 needed in IFC 605.1?~~