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### ST - K0000 - INITIAL COMMENTS

Title INITIAL COMMENTS

Type Standard

**Regulation Definition** 

**Interpretive Guideline** 

## ST - K0100 - General Requirements - Other

Title General Requirements - Other

Type Standard

NFPA 101

**Regulation Definition** 

**Interpretive Guideline** 

General Requirements - Other List in the REMARKS section any LSC Section 18.1 and 19.1 General Requirements that are not addressed by the provided K-tags, but are deficient. This information, along with the applicable Life Safety Code or NFPA standard citation, should be included.

## ST - K0111 - Building Rehabilitation

Title Building Rehabilitation

Type Standard

NFPA 101

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#### **Regulation Definition**

Building Rehabilitation Repair, Renovation, Modification, or Reconstruction Any building undergoing repair, renovation, modification, or reconstruction complies with both of the following:

- \* Requirements of Chapter 18 and 19
- \* Requirements of the applicable Sections 43.3, 43.4, 43.5, and 43.6

18.1.1.4.3, 19.1.1.4.3, 43.1.2.1

Change of Use or Change of Occupancy Any building undergoing change of use or change of occupancy classification complies with the requirements of Section 43.7, unless permitted by 18.1.1.4.2 or 19.1.1.4.2 18.1.1.4.2 (4.6.7 and 4.6.11), 19.1.1.4.2 (4.6.7 and 4.6.11), 43.1.2.2 (43.7)

#### Additions

Any building undergoing an addition shall comply with the requirements of Section 43.8. If the building has a common wall with a nonconforming building, the common wall is a fire barrier having at least a 2-hour fire resistance rating constructed of materials as required for the addition.

Communicating openings occur only in corridors and are protected by approved self-closing fire doors with at least a 1-1/2-hour fire resistance rating. Additions comply with the requirements of Section 43.8.

18.1.1.4.1 (4.6.7 and 4.6.11), 18.1.1.4.1.1 (8.3), 18.1.1.4.1.2, 18.1.1.4.1.3, 19.1.1.4.1 (4.6.7 and 4.6.11), 19.1.1.4.1.1 (8.3), 19.1.1.4.1.2, 19.1.1.4.1.3, 43.1.2.3(43.8)

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## Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

## ST - K0112 - Sprinkler Requirements for Major Rehabilitati

Title Sprinkler Requirements for Major Rehabilitati

Type Standard

**NFPA 101** 

#### **Regulation Definition**

**Interpretive Guideline** 

Sprinkler Requirements for Major Rehabilitation Where major rehabilitation is done in a non-sprinklered smoke compartment, the automatic sprinkler requirements of 18.3.5 shall apply to the smoke compartment undergoing the rehabilitation, and, in cases where the building is not protected throughout by an approved automatic sprinkler system, the requirements of 18.4.5.2, 18.4.5.3, and 18.4.5.8 shall also apply.

18.1.1.4.3.3, 19.1.1.4.3.3

## ST - K0131 - Multiple Occupancies

Title Multiple Occupancies

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Multiple Occupancies - Sections of Health Care Facilities Sections of health care facilities shall be permitted to be classified as other occupancies, provided that they meet both of the following conditions:

(1) They are not intended to provide services simultaneously for four or more inpatients for purposes of housing, treatment, or customary access by inpatients incapable of self-preservation.

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(2) They are separated from areas of health care occupancies by construction having a minimum 2-hour fire resistance rating in accordance with Chapter 8.

Ambulatory care facilities, medical clinics, and similar facilities that are contiguous to health care occupancies shall be permitted to be used for diagnostic and treatment services of inpatients who are capable of self-preservation.

18.1.3.3, 18.1.3.4, 18.1.3.5.2, 19.1.3.3, 19.1.3.4, 19.1.3.5.2

## ST - K0132 - Multiple Occupancies - Contiguous Non-Health

Title Multiple Occupancies - Contiguous Non-Health

Type Standard

**NFPA 101** 

### **Regulation Definition**

Multiple Occupancies - Contiguous Non-Health Care Occupancies

Ambulatory care facilities, medical clinics, and similar facilities that are contiguous to health care occupancies, but are primarily intended to provide outpatient services, shall be permitted to be classified as business occupancies or ambulatory health care facilities, provided that the facilities are separated from the health care occupancy by construction having a minimum 2-hour fire resistance rating, and the facility is not intended to provide services simultaneously for four or more in-patients who are incapable of self-preservation.

18.1.3.5.1, 19.1.3.5.1

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## ST - K0133 - Multiple Occupancies - Construction Type

Title Multiple Occupancies - Construction Type

Type Standard

**NFPA 101** 

#### **Regulation Definition**

Multiple Occupancies - Construction Type Where separated occupancies provisions are used in accordance with either 18/19.1.3.4 or 18/19.1.3.5, the most stringent construction type shall be provided throughout the building, unless a 2-hour separation is provided in accordance with 8.2.1.3, in which case the construction type shall be determined as follows:

- (1) The construction type and supporting construction of the health care occupancy shall be based on the story on which it is located in the building in accordance with the provisions of 19.1.6 and Table 19.1.6.1.
- (2) The construction type of the areas of the building enclosing the other occupancies shall be based on the applicable occupancy chapters of this Code. 18.1.3.6, 19.1.3.6, 8.2.1.3

## ST - K0161 - Building Construction Type and Height

Title Building Construction Type and Height

Type Standard

**NFPA 101** 

### **Regulation Definition**

**Interpretive Guideline** 

Building Construction Type and Height 2021 EXISTING

**Interpretive Guideline** 

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Health care occupancies shall be limited to the building construction types specified in Table 19.1.6.1, unless otherwise permitted by 19.1.6.2 through 19.1.6.7. (See 8.2.1.)

The total number of stories of the building is required to be determined as follows:

- (1) The total number of stories is to be counted starting with the level of exit discharge and ending with the highest occupiable story of the building.
- (2) Stories below the level of exit discharge are not counted as stories.
- (3) Interstitial spaces used solely for building or process systems directly related to the level above or below are not considered a separate story.
- (4) A mezzanine in accordance with 8.6.10 is not counted as a story.
- +Sprinklered throughout by an approved, supervised automatic sprinkler system in accordance with Section 9.7. (See 19.3.5.)
- ++Basements are not counted as stories.

Building Construction Type and Height 2021 NEW

Health care occupancies shall be limited to the building construction types specified in Table 18.1.6.1, unless otherwise permitted by 18.1.6.2 through 18.1.6.6. (See 8.2.1.)

The total number of stories of the building is required to be determined as follows:

(1) The total number of stories is to be counted starting with the level of exit discharge and ending with the highest occupiable story of the building.

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- (2) Stories below the level of exit discharge are not counted as stories.
- (3) Interstitial spaces used solely for building or process systems directly related to the level above or below are not considered a separate story.
- (4) A mezzanine in accordance with 8.6.9 is not counted as a story.
- +Sprinklered throughout by an approved, supervised automatic sprinkler system in accordance with Section 9.7. (See 18.3.5.)
- ++Basements are not counted as stories.

18.1.6.1, 19.1.6.1

## ST - K0162 - Roofing Systems Involving Combustibles

Title Roofing Systems Involving Combustibles

Type Standard

NFPA 101

**Regulation Definition** 

**Interpretive Guideline** 

Roofing Systems Involving Combustibles

#### 2021 NEW / EXISTING

Any building of Type I (442), Type I (332), Type II (222), or Type II (111) construction shall be permitted to include roofing systems involving combustible supports, decking, or roofing, provided that all of the following criteria are met:

- (1) The roof covering shall meet Class A requirements in accordance with ASTM E108, Standard Test Methods for Fire Tests of Roof Coverings, or UL 790, Test Methods for Fire Tests of Roof Coverings.
- (2) The roof/ceiling assembly shall be constructed with fire-retardant-treated wood meeting the requirements of NFPA 220.

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(3) The roof/ceiling assembly shall have the required fire resistance rating for the type of construction.

18.1.6.3, 19.1.6.3

## ST - K0163 - Interior Nonbearing Wall Construction

Title Interior Nonbearing Wall Construction

Type Standard

NFPA 101

## **Regulation Definition**

**Interpretive Guideline** 

Interior Nonbearing Wall Construction

Interior nonbearing walls in Type I or II construction are constructed of noncombustible or limited-combustible materials. Interior nonbearing walls required to have a minimum 2-hour fire resistance rating are fire-retardant-treated wood enclosed within noncombustible or limited-combustible materials, provided they are not used as shaft enclosures.

18.1.6.4, 18.1.6.5, 19.1.6.4, 19.1.6.5

## ST - K0200 - Means of Egress Requirements - Other

Title Means of Egress Requirements - Other

Type Standard

**NFPA 101** 

#### **Regulation Definition**

**Interpretive Guideline** 

Means of Egress Requirements - Other

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List in the REMARKS section any LSC Section 18.2 and 19.2 Means of Egress requirements that are not addressed by the provided K-tags, but are deficient. This information, along with the applicable Life Safety Code or NFPA standard citation, should be included.

18.2, 19.2

## ST - K0211 - Means of Egress - General

Title Means of Egress - General

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Means of Egress - General Every aisle, passageway, corridor, exit discharge, exit location, and access shall be in accordance with Chapter 7, unless otherwise modified by 18/19.2.2 through 18/19.2.11. 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. 18.2.1, 19.2.1, 7.1.10.1

## ST - K0221 - Patient Sleeping Room Doors

Title Patient Sleeping Room Doors

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Patient Sleeping Room Doors
Locks shall not be permitted on patient sleeping room doors,

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unless otherwise permitted by one of the following:

- (1) Locking devices that restrict access to the room from the corridor and that are operable by staff from the corridor side shall be permitted, provided that such devices do not restrict egress from the room.
- (2) Locks complying with 18/19.2.2.2.5 shall be permitted. 18.2.2.2.2, 19.2.2.2.2

## ST - K0222 - Egress Doors

Title Egress Doors

Type Standard

NFPA 101

#### **Regulation Definition**

Egress Doors Doors within a required means of egress shall not be equipped with a latch or lock that requires the use of a tool or key from the egress side, unless otherwise permitted by one of the following:

- (1) Locks complying with 18/19.2.2.2.5 shall be permitted.
- (2) Delayed-egress electrical locking systems complying with 7.2.1.6.1 shall be permitted.
- (3) Sensor-release of electrical locking systems complying with 7.2.1.6.2 shall be permitted.
- (4) Elevator lobby exit access door locking in accordance with 7.2.1.6.4 shall be permitted.
- (5) Approved existing door-locking installations shall be

18.2.2.2.4 through 18.2.2.2.7, 19.2.2.2.4 through 19.2.2.2.7

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## Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

## ST - K0223 - Doors with Self-Closing Devices

Title Doors with Self-Closing Devices

Type Standard

**NFPA 101** 

#### **Regulation Definition**

Doors with Self-Closing Devices
Any door in an exit passageway, stairway enclosure, horizontal exit, smoke barrier, or hazardous area enclosure (except boiler rooms, heater rooms, and mechanical equipment rooms) shall be permitted to be held open only by an automatic release device that complies with 7.2.1.8.2. The automatic sprinkler system and the fire alarm system, and the systems required by 7.2.1.8.2, shall be arranged to initiate the closing action of all such doors throughout the smoke compartment or throughout the entire facility.

18.2.2.2.8, 19.2.2.2.8, 7.2.1.8.2

#### **Interpretive Guideline**

## ST - K0224 - Horizontal Sliding Doors

Title Horizontal Sliding Doors

Type Standard

NFPA 101

**Regulation Definition** 

**Interpretive Guideline** 

Horizontal-Sliding Doors

Horizontal-sliding doors permitted by 7.2.1.13 that are not automatic-closing are limited to a single leaf and shall have a latch or other mechanism to ensure the door will not rebound. Horizontal-sliding doors serving an occupant load fewer than

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10 shall be permitted, providing all of the following criteria are met:

- \* Area served by the door has no hazards.
- \* Door is operable from either side without special knowledge or effort.
- \* Force required to operate the door in the direction of travel is less than or equal to 30 lbf to set the door in motion and less than or equal to 15 lbf to close or open to the required width.
- \* Assembly is appropriately fire rated, and where rated, is self-or automatic closing by smoke detection per 7.2.1.8 and installed per NFPA 80.
- \* Where required to latch, the door has a latch or other mechanism to ensure the door will not rebound. 18.2.2.2.11, 19.2.2.2.11

## ST - K0225 - Stairways and Smokeproof Enclosures

Title Stairways and Smokeproof Enclosures

Type Standard

NFPA 101

#### **Regulation Definition**

Stairways and Smokeproof Enclosures

Stairways and Smokeproof enclosures used as exits are in accordance with 7.2.

18.2.2.3, 18.2.2.4, 19.2.2.3, 19.2.2.4, 7.2

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## Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

### ST - K0226 - Horizontal Exits

Title Horizontal Exits

Type Standard

NFPA 101

### **Regulation Definition**

**Interpretive Guideline** 

Horizontal Exits
Horizontal exits, if used, are in accordance with 7.2.4 and the provisions of 18.2.2.5.1 through 18.2.2.5.7, or 19.2.2.5.1 through 19.2.2.5.4.
18.2.2.5, 19.2.2.5

## ST - K0227 - Ramps and Other Exits

Title Ramps and Other Exits

Type Standard

NFPA 101

### **Regulation Definition**

**Interpretive Guideline** 

Ramps and Other Exits

Ramps, exit passageways, fire and slide escapes, alternating tread devices, and areas of refuge are in accordance with the provisions 7.2.5 through 7.2.12.

18.2.2.6 to 18.2.2.10 or 19.2.2.6 to 19.2.2.10

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## ST - K0231 - Means of Egress Capacity

Title Means of Egress Capacity

Type Standard

**NFPA 101** 

## **Regulation Definition**

**Interpretive Guideline** 

Means of Egress Capacity

The capacity of required means of egress is in accordance with 7.3.

18.2.3.1, 19.2.3.1

## ST - K0232 - Aisle, Corridor, or Ramp Width

Title Aisle, Corridor, or Ramp Width

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Aisle, Corridor or Ramp Width

#### 2021 EXISTING

Any required aisle, corridor, or ramp required for exit access shall be not less than 48 in. (1220 mm) in clear width where serving as means of egress from patient sleeping rooms, unless otherwise permitted by one of the following:

" (1) Aisles, corridors, and ramps in adjunct areas not intended for the housing, treatment, or use of inpatients shall be not less than 44 in. (1120 mm) in clear and unobstructed width.

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- " (2) Where corridor width is at least 6 ft (1830 mm), projections from the corridor wall shall be permitted by one of the following:
- o (a) Noncontinuous projections not more than 4 in. (100 mm) from the corridor wall, positioned above handrail height, are permitted.
- o (b) Noncontinuous projections of more than 4 in. (100 mm) but not more than 6 in. (150 mm) from the corridor wall are permitted provided that both of the following are met:
- " (a) The projecting item is positioned above handrail height.
- " (b) A vertical extension is provided below the projection such that the extension has a leading edge that is within 4 in. (100 mm) of the leading edge of the projection at a point that is 27 in. (685 mm) maximum above the floor.
- " (3) Exit access within a room or suite of rooms complying with the requirements of 19.2.5 shall be permitted.
- " (4) Projections into the required width shall be permitted for wheeled equipment, provided that all of the following conditions are met:
- o (a) The wheeled equipment does not reduce the clear, unobstructed corridor width to less than 60 in. (1525 mm).
- o (b) The health care occupancy fire safety plan and training program address the relocation of the wheeled equipment during a fire or similar emergency.
- o (c) The wheeled equipment is limited to the following:
- " i. Equipment in use and carts in use
- " ii. Medical emergency equipment not in use
- " iii. Patient lift and transport equipment
- " (5) Where the corridor width is at least 8 ft (2440 mm), projections into the required width shall be permitted for fixed furniture, provided that all of the following conditions are met:
- o (a) The fixed furniture is securely attached to the floor or to the wall.
- o (b) The fixed furniture does not reduce the clear,

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unobstructed corridor width to less than 6 ft (1830 mm), except as permitted by 19.2.3.4(2).

- o (c) The fixed furniture is located only on one side of the corridor.
- o (d) The fixed furniture is grouped such that each grouping does not exceed an area of 50 ft2 (4.6 m2).
- o (e) The fixed furniture groupings addressed in 19.2.3.4(5) (d) are separated from each other by a distance of at least 10 ft (3050 mm).
- o (f) The fixed furniture is located so as to not obstruct access to building service and fire protection equipment.
- o (g) Corridors throughout the smoke compartment are protected by an electrically supervised automatic smoke detection system in accordance with 19.3.4, or the fixed furniture spaces are arranged and located to allow direct supervision by the facility staff from a nurses' station or similar space.
- o (h) The smoke compartment is protected throughout by an approved, supervised automatic sprinkler system in accordance with 19.3.5.8.
- " (6) Where the corridor width is at least 8 ft (2440 mm), projections into the required width shall be permitted for emergency stair travel devices, provided that all of the following conditions are met:
- o (a) These devices do not reduce the clear, unobstructed corridor width to less than 72 in. (1830 mm).
- o (b) These devices are secured to the wall.
- o (c) Where furniture is placed in the corridor in accordance with 19.2.3.4(5), the emergency stair travel devices are placed on the same side of the corridor as the furniture.
- o (d) These devices are located so as to not obstruct access to building service and fire protection equipment.
- o (e) These devices are grouped such that each grouping does not exceed a projected floor area of 12 ft2 (3.7 m2).
- o (f) The groupings addressed in 19.2.3.4(6)(e) are

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separated from each other by a distance of at least  $10 \, \text{ft} \, (3050 \, \text{mm})$ .

- o (g) The smoke compartment is protected throughout by an approved, supervised automatic sprinkler system in accordance with 19.3.5.8.
- " (7) Where the corridor width is at least 8 ft (2440 mm), self-retracting seats fixed to the wall shall be permitted provided all of the following are met:
- o (a) The seats comply with ASTM F851, Standard Test Method for Self-Rising Seat Mechanisms.
- o (b) The seats automatically return to their normally retracted position, at which time the seat projection into the means of egress complies with 7.3.2.2 and does not interfere with the means of egress.
- o (c) The self-retracting seats are normally in the retracted position and project not more than 4 in. (100 mm) from the wall.
- (d) Exposed upholstery components, where provided, meet the requirements for Class I when tested in accordance with NFPA 260.

19.2.3.4

#### 2021 NEW

Aisles, corridors, and ramps required for exit access in a hospital or nursing home shall be not less than 8 ft (2440 mm) in clear and unobstructed width, unless otherwise permitted by one of the following:

- " (1) Aisles, corridors, and ramps in adjunct areas not intended for the housing, treatment, or use of inpatients shall be not less than 44 in. (1120 mm) in clear and unobstructed width.
- " (2) Projections from the corridor wall shall be permitted by one of the following:
- o (a) Noncontinuous projections not more than 4 in. (100 mm) from the corridor wall, positioned not less than 38 in.

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(965 mm) above the floor, shall be permitted.

- o (b) Noncontinuous projections of more than 4 in. (100 mm) but not more than 6 in. (150 mm) from the corridor wall shall be permitted provided that both of the following are met:
- " i. The projecting item is positioned not less than 38 in. (965 mm) above the floor.
- " ii. A vertical extension is provided below the projection such that the extension has a leading edge that is within 4 in. (100 mm) of the leading edge of the projection at a point that is 27 in. (685 mm) maximum above the floor.
- " (3) Exit access within a room or suite of rooms complying with the requirements of 18.2.5 shall be permitted.
- " (4) Projections into the required width shall be permitted for wheeled equipment, provided that all of the following conditions are met:
- o (a) The wheeled equipment does not reduce the clear and unobstructed corridor width to less than 60 in. (1525 mm).
- o (b) The health care occupancy fire safety plan and training program address the relocation of the wheeled equipment during a fire or similar emergency.
- o (c) The wheeled equipment is limited to the following:
- " i. Equipment in use and carts in use
- " ii. Medical emergency equipment not in use
- " iii. Patient lift and transport equipment
- " (5) Where the corridor width is at least 8 ft (2440 mm), projections into the required width shall be permitted for fixed furniture, provided that all of the following conditions are met:
- o (a) The fixed furniture is securely attached to the floor or to the wall.
- o (b) The fixed furniture does not reduce the clear and unobstructed corridor width to less than 6 ft (1830 mm), except as permitted by 18.2.3.4(2).
- o (c) The fixed furniture is located only on one side of the corridor.
- o (d) The fixed furniture is grouped such that each grouping

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does not exceed an area of 50 ft2 (4.6 m2).

- o (e) The fixed furniture groupings addressed in 18.2.3.4(5) (d) are separated from each other by a distance of at least 10 ft (3050 mm).
- o (f) The fixed furniture is located so as to not obstruct access to building service and fire protection equipment.
- o (g) Corridors throughout the smoke compartment are protected by an electrically supervised automatic smoke detection system in accordance with 18.3.4, or the fixed furniture spaces are arranged and located to allow direct supervision by the facility staff from a nurses' station or similar space.
- " (6) Cross-corridor door openings in corridors with a required minimum width of 8 ft (2440 mm) shall have a clear width of not less than 6 ft 11 in. (2110 mm) for pairs of doors or a clear width of not less than 411?2 in. (1055 mm) for a single door.
- " (7) Nursing home corridors shall be permitted to be not less than 6 ft (1830 mm) wide in smoke compartments housing not more than 30 patients.
- " (8) Cross-corridor door openings in corridors with a required minimum width of 6 ft (1830 mm) shall have a clear width of not less than 64 in. (1625 mm) for pairs of doors or a clear width of not less than 411?2 in. (1055 mm) for a single door.
- " (9) Where the corridor width is at least 8 ft (2440 mm), projections into the required width shall be permitted for emergency stair travel devices, provided that all of the following conditions are met:
- o (a) These devices do not reduce the clear and unobstructed corridor width to less than 72 in. (1830 mm).
- o (b) These devices are secured to the wall.
- o (c) Where furniture is placed in the corridor in accordance with 18.2.3.4(5), the emergency stair travel devices are placed on the same side of the corridor as the furniture.

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- (d) These devices are located so as to not obstruct access to building service and fire protection equipment.
- (e) These devices are grouped such that each grouping does not exceed a projected floor area of 12 ft2 (3.7 m2).
- (f) The groupings addressed in 18.2.3.4(9)(e) are separated from each other by a distance of at least 10 ft (3050 mm).
- (10) Self-retracting seats fixed to the wall shall be permitted provided all of the following are met:
- (1) The seats comply with ASTM F851, Standard Test Method for Self-Rising Seat Mechanisms.
- (2) The seats automatically return to their normally retracted position, at which time the seat projection into the means of egress complies with 7.3.2.2 and does not interfere with the means of egress.
- (3) The self-retracting seats are normally in the retracted position and project not more than 4 in. (100 mm) from the wall.
- (4) Exposed upholstery components, where provided, meet the requirements for Class I when tested in accordance with NFPA 260.

18.2.3.4

#### ST - K0233 - Clear Width of Exit and Exit Access Doors

Title Clear Width of Exit and Exit Access Doors

Type Standard

**NFPA 101** 

#### **Regulation Definition**

**Interpretive Guideline** 

Clear Width of Exit and Exit Access Doors

2021 EXISTING

Exit access doors and exit doors are of the swinging type and are at least 32 inches in clear width. The requirement of

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- 19.2.3.6 shall not apply where otherwise permitted by the following:
- (1) Existing 34 in. (865 mm) doors shall be permitted.
- (2) Existing 28 in. (710 mm) corridor doors in facilities where the fire plans do not require evacuation by bed, gurney, or wheelchair shall be permitted.

19.2.3.6, 19.2.3.7

#### 2021 NEW

The minimum clear width for doors in the means of egress from sleeping rooms; diagnostic and treatment areas, such as x-ray, surgery, or physical therapy; and nursery rooms shall be as follows:

- (1) Hospitals and nursing homes 41 ½ in. (1055 mm)
- (2) Psychiatric hospitals and limited care facilities- 32 in. (810 mm)

The requirements of 18.2.3.6 shall not apply where otherwise permitted by one of the following:

- (1) Doors that are located so as not to be subject to use by any health care occupant shall be not less than 32 in. (810 mm) in clear width.
- (2) Doors in exit stair enclosures shall be not less than 32 in. (810 mm) in clear width.
- (3) Doors serving newborn nurseries shall be not less than 32 in. (810 mm) in clear width.
- (4) Where a pair of doors is provided, all of the following criteria shall be met:
- (a) Not less than one of the doors shall provide not less than a 32 in. (810 mm) clear width opening.
- (b) A rabbet, bevel, or astragal shall be provided at the meeting edge.
- (c) The inactive door leaf shall have an automatic flush bolt to provide positive latching.

18.2.3.6, 18.2.3.7

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## Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

## ST - K0241 - Number of Exits - Story and Compartment

Title Number of Exits - Story and Compartment

Type Standard

**NFPA 101** 

## **Regulation Definition**

**Interpretive Guideline** 

Number of Exits - Story and Compartment

Not less than two exits, remote from each other, and accessible from every part of every story are provided for each story. Each smoke compartment shall likewise be provided with two distinct egress paths to exits that do not require the entry into the same adjacent smoke compartment.

18.2.4.1-18.2.4.4, 19.2.4.1-19.2.4.4

## ST - K0244 - Fire Alarm - Control Functions

Title Fire Alarm - Control Functions

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Fire Alarm - Control Functions

The fire alarm automatically activates required control functions and is provided with an alternative power supply in accordance with NFPA 72.

18.3.4.4, 19.3.4.4, 9.6.1, 9.6.5, NFPA 72

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## Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

### ST - K0251 - Dead-End Corridors and Common Path of Travel

Title Dead-End Corridors and Common Path of Travel

Type Standard

NFPA 101

## **Regulation Definition**

**Interpretive Guideline** 

Dead-End Corridors and Common Path of Travel

2021 EXISTING

Dead-end corridors shall not exceed 30 feet. Existing dead-end corridors greater than 30 feet shall be permitted to be continued to be used if it is impractical and unfeasible to alter them.

19.2.5.3

2021 NEW

Dead-end corridors shall not exceed 30 feet. Common path of travel shall not exceed 100 feet. 18.2.5.2, 18.2.5.3

## ST - K0252 - Number of Exits - Corridors

Title Number of Exits - Corridors

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Number of Exits - Corridors

Every corridor shall provide access to not less than two approved exits in accordance with Sections 7.4 and 7.5

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without passing through any intervening rooms or spaces other than corridors or lobbies.

18.2.5.4, 19.2.5.4

## ST - K0253 - Number of Exits - Patient Sleeping and Non-Sl

Title Number of Exits - Patient Sleeping and Non-Sl

Type Standard

NFPA 101

### **Regulation Definition**

Number of Exits - Patient Sleeping and Non-Sleeping Rooms Sleeping rooms of more than 1000 ft2 (93 m2) gross shall have not less than two exit access doors remotely located from each other.

Nonsleeping rooms of more than 2500 ft2 (230 m2) gross shall have not less than two exit access doors remotely located from each other.

18.2.5.5.1, 18.2.5.5.2, 18.2.5.6.3, 18.2.5.6.4, 19.2.5.5.1, 19.2.5.5.2,19.2.5.6.3

#### ST - K0254 - Corridor Access

Title Corridor Access

Type Standard

NFPA 101

#### **Regulation Definition**

### **Interpretive Guideline**

Corridor Access

Every habitable room shall have an exit access door leading directly to an exit access corridor, unless otherwise provided in 18.2.5.6.2, 18.2.5.6.3, and 18.2.5.6.4.

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## Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

18.2.5.6, 19.2.5.6

## ST - K0255 - Suite Separation, Hazardous Content & Subdiv

Title Suite Separation, Hazardous Content & Subdiv

Type Standard

NFPA 101

### **Regulation Definition**

Suite Separation, Hazardous Content, and Subdivision Suites shall be separated from the remainder of the building, and from other suites, by one of the following:

- (1) Walls and doors meeting the requirements of 18/19.3.6.2 through 18/19.3.6.5
- (2) Existing approved barriers and doors that limit the transfer of smoke
- (A) Intervening rooms shall not be hazardous areas as defined by 19.3.2.
- (B) Hazardous areas within a suite shall be separated from the remainder of the suite in accordance with 19.3.2.1, unless otherwise provided in 19.2.5.7.1.3(C) or 19.2.5.7.1.3(D).
- (C) Hazardous areas within a suite shall not be required to be separated from the remainder of the suite where complying with both of the following:
- (1) The suite is primarily a hazardous area.
- (2) The suite is separated from the rest of the health care facility as required for a hazardous area by 19.3.2.1.
- (D) Spaces containing sterile surgical materials limited to a one-day supply in operating suites or similar spaces that are sprinklered in accordance with 19.3.5.7 shall be permitted to be open to the remainder of the suite without separation. 18.2.5.7.1.2 through 18.2.5.7.1.4, 19.2.5.7.1.2, through 19.2.5.7.1.4

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## ST - K0256 - Sleeping Suites

Title Sleeping Suites

Type Standard

**NFPA 101** 

## **Regulation Definition**

**Interpretive Guideline** 

Sleeping Suites

Occupants shall have exit access to a corridor or direct access to a horizontal exit. Where greater than or equal to 2 exits are required, one exit access door may be to a stairway, passageway or to the exterior. Suites shall be provided with constant staff supervision. Staff shall have direct visual supervision of patient sleeping rooms, from a constantly attended location or the room shall be provided with an automatic smoke detection system.

Suites more than 1,000 square feet shall have 2 or more remote exits. One means of egress from the suite shall be to a corridor and one may be into an adjacent suite separated in accordance with corridor requirements. Suites shall not exceed the following size limitations:

- \* 5,000 square feet if the suite is not fully smoke detected or fully sprinklered
- \* 7,500 square feet if the suite is either fully smoke detected or fully sprinklered
- \* 10,000 square feet if the suite is both fully smoke detected and fully sprinklered and the sleeping rooms have direct supervision from a constantly attended location Travel distance between any point in a suite to exit access shall not exceed 100 feet and distance to an exit shall not exceed 150 feet (200 feet if building is fully sprinklered).

18.2.5.7.2.3, 19.2.5.7.2.3

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## Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

## ST - K0257 - Non-Sleeping Suites

Title Non-Sleeping Suites

Type Standard

**NFPA 101** 

#### **Regulation Definition**

**Interpretive Guideline** 

Non-Sleeping Suites

Nonsleeping suites shall be in accordance with the following:

- (1) Nonsleeping suites for patient care shall comply with the provisions of 19.2.5.7.3.1 through 19.2.5.7.3.3.
- (2) Nonsleeping suites not for patient care shall comply with the provisions of 19.2.5.7.4.

Patient Care Nonsleeping Suite Means of Egress.

- (A) Patient care nonsleeping suites shall have exit access to a corridor complying with 19.3.6 or to a horizontal exit, directly from the suite.
- (B) Patient care nonsleeping suites of more than 2500 ft2 (230 m2) gross floor area shall have not less than two exit access doors remotely located from each other.
- (C) For suites requiring two exit access doors, one of the exit access doors shall be permitted to be to one of the following:
- (1) An exit stair
- (2) An exit passageway
- (3) An exit door to the exterior
- (4) Another suite, provided that the separation between the suites complies with the corridor requirements of 19.3.6.2 through 19.3.6.5

Patient Care Nonsleeping Suite Maximum Size. Patient care nonsleeping suites shall not exceed 10,000 ft2 (930 m2) gross floor area, unless otherwise provided in 19.2.5.7.3.2(A) or 19.2.5.7.3.2(B).

(A) Patient care nonsleeping suites greater than 10,000 ft2 (930 m2) gross floor area and not exceeding 12,500 ft2 (1161

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m2) gross floor area shall be permitted where the smoke compartment is protected throughout by one of the following:

- (1) Approved electrically supervised sprinkler system in accordance with 19.3.5.7 and total (complete) coverage automatic smoke detection in accordance with 9.6.2.9 and 19.3.4
- (2) Approved electrically supervised sprinkler system protection complying with 19.3.5.8
- (B) Patient care nonsleeping suites greater than 12,500 ft2
- (1161 m2) gross floor area and not exceeding 15,000 ft2
- (1394 m2) gross floor area shall be permitted where both of the following are provided in the suite:
- (1) Total (complete) coverage automatic smoke detection in accordance with 9.6.2.9 and 19.3.4
- (2) Approved electrically supervised sprinkler system protection complying with 19.3.5.8.

18.2.5.7.3 through 18.2.5.7.3.2, 19.2.5.7.3 through

19.2.5.7.3.2

#### ST - K0261 - Travel Distance to Exits

Title Travel Distance to Exits

Type Standard

NFPA 101

## **Regulation Definition**

Travel Distance to Exits

Travel distance (excluding suites) to exits are measured in accordance with 7.6.

Travel distance shall comply with 19.2.6.2.1 through 19.2.6.2.4.

The travel distance between any point in a room and an exit shall not exceed 150 ft (46 m), unless otherwise permitted by 19.2.6.2.2.

The maximum travel distance specified in 19.2.6.2.1 shall be

**Interpretive Guideline** 

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permitted to be increased by 50 ft (15 m) in buildings protected throughout by an approved, supervised automatic sprinkler system in accordance with 19.3.5.7.

The travel distance between any point in a health care sleeping room and an exit access door in that room shall not exceed 50 ft (15 m).

The travel distance within suites shall be in accordance with 19.2.5.7.

18.2.6 through 18.2.6.2.4, 19.2.6 through 19.2.6.2.4

## ST - K0271 - Discharge from Exits

Title Discharge from Exits

Type Standard

NFPA 101

## **Regulation Definition**

**Interpretive Guideline** 

Discharge from Exits

Exit discharge is arranged in accordance with 7.7, Exits shall terminate directly, at a public way or at an exterior exit discharge, unless otherwise provided in 7.7.1.2 through 7.7.1.4. The exit discharge shall be arranged and marked to make clear the direction of egress travel from the exit discharge to a public way.

18.2.7, 19.2.7

## ST - K0281 - Illumination of Means of Egress

Title Illumination of Means of Egress

Type Standard

NFPA 101

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## Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

Regulation Definition Interpretive Guideline

Illumination of Means of Egress

Illumination of means of egress, including exit discharge, is arranged in accordance with 7.8 and shall be either continuously in operation or capable of automatic operation without manual intervention.

18.2.8, 19.2.8

## ST - K0291 - Emergency Lighting

Title Emergency Lighting

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

**Emergency Lighting** 

Emergency lighting of at least 1-1/2-hour duration is provided automatically in accordance with 7.9.

18.2.9.1, 19.2.9.1

## ST - K0293 - Exit Signage

Title Exit Signage

Type Standard

NFPA 101

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Regulation Definition Interpretive Guideline

Marking of Means of Egress

#### 2021 EXISTING

Means of egress shall have signs in accordance with Section 7.10, unless otherwise permitted by 19.2.10.3, or 19.2.10.4. Where the path of egress travel is obvious, signs shall not be required at gates in outside secured areas. 19.2.10

2021 NEW

Means of egress shall have signs in accordance with Section 7.10, unless otherwise permitted by 18.2.10.3 or 18.2.10.4. 18.2.10

#### ST - K0300 - Protection - Other

Title Protection - Other

Type Standard

**NFPA 101** 

#### **Regulation Definition**

Protection - Other

List in the REMARKS section any LSC Section 18.3 and 19.3 Protection requirements that are not addressed by the provided K-tags, but are deficient. This information, along with the applicable Life Safety Code or NFPA standard citation, should be included.

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## Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

## ST - K0311 - Vertical Openings - Enclosure

Title Vertical Openings - Enclosure

Type Standard

**NFPA 101** 

#### **Regulation Definition**

**Interpretive Guideline** 

Vertical Openings - Enclosure

2021 EXISTING

Any vertical opening shall be enclosed or protected in accordance with Section 8.6, unless otherwise modified by 19.3.1.1 through 19.3.1.9.

2021 NEW

Any vertical opening shall be enclosed or protected in accordance with Section 8.6, unless otherwise modified by 18.3.1.1 through 18.3.1.9.

### ST - K0321 - Hazardous Areas - Enclosure

Title Hazardous Areas - Enclosure

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Hazardous Areas - Enclosure

2021 EXISTING

Any hazardous areas shall be safeguarded by a fire barrier having a 1-hour fire resistance rating or shall be provided with an automatic extinguishing system in accordance with 8.7.1. An automatic extinguishing system, where used in hazardous

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areas, shall be permitted to be in accordance with 19.3.5.9. Where the sprinkler option of 19.3.2.1 is used, the areas shall be separated from other spaces by smoke partitions in accordance with Section 8.4.

The doors shall be self-closing or automatic closing. Doors in rated enclosures shall be permitted to have nonrated, factory- or field-applied protective plates extending not more than 48 in. (1220 mm) above the bottom of the door. Hazardous areas shall include, but shall not be restricted to, the following:

- (1) Boiler and fuel-fired heater rooms.
- (2) Central/bulk laundries larger than 100 ft2 (9.3 m2).
- (3) Paint shops.
- (4) Repair shops.
- (5) Rooms with soiled linen in volume exceeding 64 gal (242 L).
- (6) Rooms with collected trash in volume exceeding 64 gal (242 L).
- (7) Rooms or spaces larger than 50 ft2 (4.6 m2), including repair shops, used for storage of combustible supplies and equipment in quantities deemed hazardous by the authority having jurisdiction.
- (8) Laboratories employing flammable or combustible materials in quantities less than those that would be considered a severe hazard.

#### 19.3.2.1 through 19.3.2.1.5

#### 2021 NEW

Any hazardous areas shall be protected in accordance with Section 8.7, and the areas addressed in 18.3.2.1.2 and 18.3.2.1.3 shall be protected as indicated.

The following areas shall be considered hazardous areas and shall be protected by fire barriers having a minimum 1-hour

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fire resistance rating in accordance with Section 8.3:

- (1) Boiler and fuel-fired heater rooms
- (2) Central/bulk laundries larger than 100 ft2 (9.3 m2)
- (3) Paint shops employing hazardous substances and materials in quantities less than those that would be classified as a severe hazard
- (4) Physical plant maintenance shops
- (5) Rooms with soiled linen in volume exceeding 64 gal (242)

L)

- (6) Rooms with collected trash in volume exceeding 64 gal (242 L)
- (7) Storage rooms larger than 100 ft2 (9.3 m2) and storing combustible material.

The following areas shall be considered hazardous areas and shall be protected by smoke partitions in accordance with Section 8.4:

- (1) Laboratories employing flammable or combustible materials in quantities less than those that would be considered a severe hazard.
- (2) Storage rooms larger than 50 ft2 (4.6 m2) but not exceeding 100 ft2 (9.3 m2) and storing combustible material.

18.3.2.1 through 18.3.2.1.3

## ST - K0322 - Laboratories

Title Laboratories

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Laboratories

2021 New and Existing

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## Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

Laboratories in which chemicals are handled or stored shall comply with the operational requirements of NFPA 45, Standard on Fire Protection for Laboratories Using Chemicals.

Laboratories employing quantities of flammable, combustible, or hazardous materials that are considered a severe hazard shall be protected in accordance with 8.7.1.1.

18.3.2.2.1, 18.3.2.2.2, 19.3.2.2.1, 19.3.2.2.2, 8.7.1.1 9.3.1.2, 11.4.3.2 (NFPA 99), NFPA 45

## ST - K0323 - Anesthetizing Locations

Title Anesthetizing Locations

Type Standard

**NFPA 101** 

#### Regulation Definition

**Interpretive Guideline** 

Anesthetizing Locations

**Anesthetizing Locations** 

Areas designated for administration of general anesthesia (i.e., inhalation anesthetics) are in accordance with 8.7 and NFPA 99.

Zone valves are: located immediately outside each anesthetizing location for medical gas or vacuum; readily accessible in an emergency; and arranged so shutting off any one anesthetizing location will not affect others.

Area alarm panels are provided to monitor all medical gas, medical-surgical vacuum, and piped WAGD systems. Panels are at locations that provide for surveillance, indicate medical gas pressure decreases of 20% and vacuum decreases of 12 in. gauge HgV, and provide visual and audible indication. Alarm sensors are installed either on the source side of individual room zone valve box assemblies or on the patient/use side of

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each of the individual zone box valve assemblies. The EES critical branch supplies power for task illumination, fixed equipment, select receptacles, and select power circuits, and EES equipment system supplies power to ventilation system.

Heating, cooling, and ventilation are in accordance with ASHRAE 170. Medical supply and equipment manufacturer's instructions for use are considered before reducing humidity levels to those allowed by ASHRAE.

18.3.2.4, 19.3.2.4 (LSC) 5.1.4.6.1, 5.1.4.6.2, 5.1.9.2, 5.1.9.2.1, 6.4.2, 6.7.1.2.6, 6.7.6 (NFPA 99)

## ST - K0324 - Cooking Facilities

Title Cooking Facilities

Type Standard

NFPA 101

### **Regulation Definition**

Cooking Facilities

Cooking facilities shall be protected in accordance with 9.2.3, unless otherwise permitted by 19.3.2.5.2, 19.3.2.5.3, or 19.3.2.5.4.

Commercial cooking operations shall be protected in accordance with NFPA 96 unless such installations are approved existing installations, which shall be permitted to be continued in service.

18.3.2.5.1 through 18.3.2.5.5, 19.3.2.5.1 through 19.3.2.5.5, 9.2.3

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### Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

### ST - K0325 - Alcohol Based Hand Rub Dispenser (ABHR)

Title Alcohol Based Hand Rub Dispenser (ABHR)

Type Standard

**NFPA 101** 

#### **Regulation Definition**

Alcohol Based Hand Rub Dispenser (ABHR)

Alcohol-based hand-rub dispensers shall be protected in accordance with 8.7.3.1, unless all of the following conditions are met:

- (1) Where dispensers are installed in a corridor, the corridor shall have a minimum width of 6 ft (1830 mm).
- (2) The maximum individual dispenser fluid capacity shall be as follows:
- o (a) 0.32 gal (1.2 L) for dispensers in rooms, corridors, and areas open to corridors
- o (b) 0.53 gal (2.0 L) for dispensers in suites of rooms
- (3) Where aerosol containers are used, the maximum capacity of the aerosol dispenser shall be 18 oz (0.51 kg) and shall be limited to Level 1 aerosols as defined in NFPA 30B.
- (4) Dispensers shall be separated from each other by horizontal spacing of not less than 48 in. (1220 mm).
- (5) Not more than an aggregate 10 gal (37.8 L) of alcohol-based hand-rub solution or 1135 oz (32.2 kg) of Level 1 aerosols, or a combination of liquids and Level 1 aerosols not to exceed, in total, the equivalent of 10 gal (37.8 L) or 1135 oz (32.2 kg), shall be in use outside of a storage cabinet in a single smoke compartment, except as otherwise provided in 18/19.4.4(6).
- (6) One dispenser complying with 18.4.4(2) or 18.4.4(3) per room and located in that room shall not be included in the aggregated quantity addressed in 19.4.4(5).

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- (7) Storage of quantities greater than 5 gal (18.9 L) in a single smoke compartment shall meet the requirements of NFPA 30.
- (8) Dispensers shall not be installed in the following locations:
- (a) Above an ignition source within a 1 in. (25 mm) horizontal distance from each side of the ignition source
- (b) To the side of an ignition source within a 1 in. (25 mm) horizontal distance from the ignition source
- (c) Beneath an ignition source within a 1 in. (25 mm) vertical distance from the ignition source
- (9) Dispensers installed directly over carpeted floors shall be permitted only in sprinklered smoke compartments.
- (10) The alcohol-based hand-rub solution shall not exceed 95 percent alcohol content by volume.
- (11) Operation of the dispenser shall comply with the following criteria:
- (a) The dispenser shall not release its contents except when the dispenser is activated, either manually or automatically by touch-free activation.
- (b) Any activation of the dispenser shall occur only when an object is placed within 4 in. (100 mm) of the sensing device.
- (c) An object placed within the activation zone and left in place shall not cause more than one activation.
- (d) The dispenser shall not dispense more solution than the amount required for hand hygiene consistent with label instructions.
- (e) The dispenser shall be designed, constructed, and operated in a manner that ensures that accidental or malicious activation of the dispensing device is minimized.

18.4.4, 19.4.4, 8.7.3.3

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### Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

## ST - K0331 - Interior Wall and Ceiling Finish

Title Interior Wall and Ceiling Finish

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Interior Wall and Ceiling Finish

#### 2021 EXISTING

Existing interior wall and ceiling finish materials complying with Section 10.2 shall be permitted to be Class A or Class B. 19.3.3.1, 19.3.3.2, 10.2

#### 2021 NEW

Interior wall and ceiling finish materials complying with Section 10.2 shall be permitted throughout if Class A, except as indicated in 18.3.3.2.1 or 18.3.3.2.2.

Walls and ceilings shall be permitted to have Class A or Class B interior finish in individual rooms having a capacity not exceeding four persons.

Corridor wall finish not exceeding 48 in. (1220 mm) in height that is restricted to the lower half of the wall shall be permitted to be Class A or Class B.

18.3.3.1, 18.3.3.2, 10.2

## ST - K0341 - Fire Alarm System - Installation

Title Fire Alarm System - Installation

Type Standard

NFPA 101

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### Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

#### Regulation Definition

**Interpretive Guideline** 

Fire Alarm System - Installation

Health care occupancies shall be provided with a fire alarm system in accordance with Section 9.6.

Fire detection, alarm, and communications systems installed to make use of an alternative permitted by this Code shall be considered required systems and shall meet the provisions of this Code applicable to required systems. Fire alarm systems required by this Code shall be installed, tested, and maintained in accordance with the applicable requirements of NFPA70 and NFPA72 unless otherwise permitted by 9.6.1.4. 18.3.4.1, 19.3.4.1, 9.6, 9.6.1, 450.3.16 (FBC)

### ST - K0342 - Fire Alarm System - Initiation

Title Fire Alarm System - Initiation

Type Standard

NFPA 101

### **Regulation Definition**

Fire Alarm System - Initiation

New & Existing

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, unless otherwise permitted by 18/19.3.4.2.2 and 18/19.3.4.2.3.

Manual fire alarm boxes in patient sleeping areas shall not be required at exits if located at all nurses' control stations or other continuously attended staff location, provided that both of the following criteria are met:

(1) Such manual fire alarm boxes are visible and continuously accessible.

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(2) Travel distances required by 9.6.2.5 are not exceeded. The system smoke detector installed in accordance with 18/19.3.2.5.3(13) shall not be required to initiate the fire alarm system.

18.3.4.2, 19.3.4.2, 9.6.2

### ST - K0343 - Fire Alarm System - Notification

Title Fire Alarm System - Notification

Type Standard

NFPA 101

### **Regulation Definition**

**Interpretive Guideline** 

Fire Alarm - Notification

#### 2021 EXISTING

Positive alarm sequence in accordance with 9.6.3.5 shall be permitted in health care occupancies protected throughout by an approved, supervised automatic sprinkler system in accordance with 9.7.1.1(1).

Occupant notification shall be accomplished automatically in accordance with 9.6.3, unless otherwise modified by the following:

- (1) In lieu of audible alarm signals, visible alarm-indicating appliances shall be permitted to be used in critical care areas.
- (2) Where visual devices have been installed in patient sleeping areas in place of an audible alarm, they shall be permitted where approved by the authority having jurisdiction.
- (3) The provision of 19.3.2.5.3(13)(c) shall be permitted to be used.
- (4) Where the private operating mode in accordance with NFPA 72 is used, alarm notification appliances shall not be required in patient care spaces where alarm notification adversely affects patient care.

19.3.4.3 through 19.3.4.3.2.2, 9.6.3

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#### 2021 NEW

Positive alarm sequence in accordance with 9.6.3.5 shall be permitted.

Occupant notification shall be accomplished automatically in accordance with 9.6.3, unless otherwise modified by the following:

- (1) Paragraph 9.6.3.2.3 shall not be permitted to be used.
- (2) Where the private operating mode in accordance with NFPA 72 is used, alarm notification appliances shall not be required in patient care spaces where alarm notification adversely affects patient care.
- (3) The provision of 18.3.2.5.3(13)(c) shall be permitted to be used.

Annunciation and annunciation zoning shall be provided in accordance with 9.6.8, unless otherwise permitted by 18.3.4.3.3.2 or 18.3.4.3.3.3.

18.3.4.3 through 18.3.4.3.3, 9.6.3

#### ST - K0344 - Fire Alarm - Control Functions

Title Fire Alarm - Control Functions

Type Standard

NFPA 101

#### **Regulation Definition**

Fire Alarm - Control Functions

Operation of any activating device in the required fire alarm system shall be arranged to accomplish automatically any control functions to be performed by that device. (See 9.6.6.) Emergency control functions shall be installed in accordance with the requirements of NFPA 72.

Where required by another section of this Code, the following functions shall be actuated:

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- (1) Release of hold-open devices for doors or other opening protectives
- (2) Stairwell or elevator shaft pressurization
- (3) Smoke management or smoke control systems
- (4) Unlocking of doors
- (5) Elevator recall and shutdown
- (6) HVAC shutdown

Operator controls, alarm indicators, and manual communications capability shall be installed at a convenient location acceptable to the authority having jurisdiction. 18.3.4.4, 19.3.4.4, 9.6.6, NFPA 72

### ST - K0345 - Fire Alarm System - Testing and Maintenance

Title Fire Alarm System - Testing and Maintenance

Type Standard

**NFPA 101** 

#### **Regulation Definition**

Fire Alarm System - Testing and Maintenance Detection systems, where required, shall be in accordance with Section 9.6. Fire alarm systems required by this Code shall be installed, tested, and maintained in accordance with the applicable requirements of NFPA70 and NFPA72 unless otherwise permitted by 9.6.1.4. 18.3.4.1, 19.3.4.1, 9.6, and NFPA 70, and NFPA 72

## ST - K0346 - Fire Alarm System - Out of Service

Title Fire Alarm System - Out of Service

Type Standard

**NFPA 101** 

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### Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

Regulation Definition Interpretive Guideline

Fire Alarm - Out of Service

Where required fire alarm system is out of services for more than 8 hours, the authority having jurisdiction shall be notified. Where required by the authority having jurisdiction, mitigating measures shall be implemented for the period that the system is impaired.

9.6.1.6 (LSC), and 14.2.2.2.1, 10.21.4, 10.21.5 (NFPA 72)

#### ST - K0347 - Smoke Detection

Title Smoke Detection

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Smoke Detection

#### 2021 EXISTING

An approved automatic smoke detection system in accordance with Section 9.6 shall be installed in all corridors of limited care facilities, unless otherwise permitted by one of the following:

- (1) Where each patient sleeping room is protected by an approved smoke detection system, and a smoke detector is provided at smoke barriers and horizontal exits in accordance with Section 9.6, the corridor smoke detection system shall not be required on the patient sleeping room floors.
- (2) Smoke compartments protected throughout by an approved, supervised automatic sprinkler system in accordance with 19.3.5.7 shall be permitted. Detection in spaces open to corridors, see 19.3.6.1 19.3.4.5, 19.3.6.1, 9.6

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#### 2021 NEW

An approved automatic smoke detection system shall be installed in corridors throughout smoke compartments containing patient sleeping rooms and in spaces open to corridors as permitted in nursing homes by 18.3.6.1, unless otherwise permitted by one of the following:

- (1) Corridor systems shall not be required where each patient sleeping room is protected by an approved smoke detection system.
- (2) Corridor systems shall not be required where patient room doors are equipped with automatic door-closing devices with integral smoke detectors on the room side installed in accordance with their listing, provided that the integral detectors provide occupant notification.

18.3.4.5 through 18.3.4.5.3, 9.6

## ST - K0351 - Sprinkler System - Installation

Title Sprinkler System - Installation

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Sprinkler System - Installation

#### 2021 EXISTING

Buildings containing nursing homes shall be protected throughout by an approved, supervised automatic sprinkler system in accordance with Section 9.7, unless otherwise permitted by 19.3.5.5.

In Type I and II construction, alternative protection measures are permitted to be substituted for sprinkler protection in specific areas where state or local regulations prohibit sprinklers.

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19.3.5 through 19.3.5.11, 9.7, 9.7.1.1(1)

2021 NEW

Buildings containing health care occupancies shall be protected throughout by an approved, supervised automatic sprinkler system in accordance with Section 9.7, unless otherwise permitted by 18.3.5.5. The sprinkler system required by 18.3.5.1 shall be installed in accordance with 9.7.1.1(1). In Type I and Type II construction, alternative protection measures shall be permitted to be substituted for sprinkler protection without causing a building to be classified as non-sprinklered in specified areas where the authority having jurisdiction has prohibited sprinklers.

Listed quick-response or listed residential sprinklers shall be used throughout smoke compartments containing patient sleeping rooms.

Sprinklers shall not be required in clothes closets of patient sleeping rooms in hospitals where the area of the closet does not exceed 6 ft2 (0.55 m2), provided that the distance from the sprinkler in the patient sleeping room to the back wall of the closet does not exceed the maximum distance permitted by NFPA 13.

18.3.5.1, through 18.3.5.11, 9.7, 9.7.1.1(1), and NFPA 13

## ST - K0352 - Sprinkler System - Supervisory Signals

Title Sprinkler System - Supervisory Signals

Type Standard

**NFPA 101** 

#### **Regulation Definition**

**Interpretive Guideline** 

Sprinkler System - Supervisory Signals
New and Existing
Buildings containing nursing homes shall be protected
throughout by an approved, supervised automatic sprinkler

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system in accordance with Section 9.7, unless otherwise permitted by 18/19.3.5.5.

Where supervised automatic sprinkler systems are required by another section of this Code, supervisory attachments shall be installed and monitored for integrity in accordance with NFPA 72 and a distinctive supervisory signal shall be provided to indicate a condition that would impair the satisfactory operation of the sprinkler system.

 $18.3.5.1,\,19.3.5.1,\,9.7.2\;through\;9.7.2.2.2,\;and\;NFPA\;72$ 

## ST - K0353 - Sprinkler System - Maintenance and Testing

Title Sprinkler System - Maintenance and Testing

Type Standard

NFPA 101

#### **Regulation Definition**

Sprinkler System - Maintenance and Testing
Automatic sprinkler and standpipe systems are inspected,
tested, and maintained in accordance with NFPA 25. All
required documentation regarding the design of the fire
protection system and the procedures for maintenance,
inspection, and testing of the fire protection system shall be
maintained at an approved, secured location for the life of the
fire protection system.

19.7.6, 4.6.12, 4.6.12.1, 9.11 through 9.11.3.2, and NFPA 25

## ST - K0354 - Sprinkler System - Out of Service

Title Sprinkler System - Out of Service

Type Standard

**NFPA 101** 

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### Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

Regulation Definition <u>Interpretive Guideline</u>

Sprinkler System - Out of Service

Where the sprinkler system is impaired, the extent and duration of the impairment has been determined, areas or buildings involved are inspected and risks are determined, recommendations are submitted to management or designated representative, and the fire department and other authorities having jurisdiction have been notified. Where the sprinkler system is out of service for more than 10 hours in a 24-hour period, the impairment coordinator shall arrange for one of the following:

- (a) Evacuation of the building or portion of the building affected by the system out of service.
- (b) An approved fire watch.
- (c) Establishment of a temporary water supply.
- (d) Establishment and implementation of an approved program to eliminate potential ignition sources and limit the amount of fuel available to the fire.

18.7.6, 19.7.6, 4.6.12, 4.6.12.1, 9.11.2, and 15.1 through 15.6.2 (NFPA 25) FAC 59A-4.130 (3)

## ST - K0355 - Portable Fire Extinguishers

Title Portable Fire Extinguishers

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Portable Fire Extinguishers

Portable fire extinguishers are selected, installed, inspected, and maintained in accordance with NFPA 10, Standard for Portable Fire Extinguishers.

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#### Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

18.3.5.12, 19.3.5.12, 9.9, and NFPA 10

## ST - K0361 - Corridors - Areas Open to Corridor

Title Corridors - Areas Open to Corridor

Type Standard

NFPA 101

#### **Regulation Definition**

Corridors - Areas Open to Corridor Corridors shall be separated from all other areas by partitions complying with 18/19.3.6.2 through 18/19.3.6.5(see also 19.2.5.4), unless otherwise permitted by one of the following:

- (1) Smoke compartments protected throughout by an approved, supervised automatic sprinkler system in accordance with 19.3.5.8 shall be permitted to have spaces that are unlimited in size and open to the corridor, provided that all of the following criteria are met:
- (a) The spaces are not used for patient sleeping rooms, treatment rooms, or hazardous areas.
- (b) The corridors onto which the spaces open in the same smoke compartment are protected by an electrically supervised automatic smoke detection system in accordance with 19.3.4, or the smoke compartment in which the space is located is protected throughout by quick-response sprinklers.
- (c) The open space is protected by an electrically supervised automatic smoke detection system in accordance with 19.3.4, or the entire space is arranged and located to allow direct supervision by the facility staff from a nurses' station or similar space.
- (d) The space does not obstruct access to required exits.
- " (2) In smoke compartments protected throughout by an approved, supervised automatic sprinkler system in accordance with 19.3.5.8, waiting areas shall be permitted to be open to the corridor, provided that all of the following

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#### criteria are met:

- (a) The aggregate waiting area in each smoke compartment does not exceed 600 ft2 (55.7 m2).
- (b) Each area is protected by an electrically supervised automatic smoke detection system in accordance with 19.3.4, or each area is arranged and located to allow direct supervision by the facility staff from a nursing station or similar space.
- (c) The area does not obstruct access to required exits.
- (3) This requirement shall not apply to spaces for nurses' stations.
- (4) Gift shops not exceeding 500 ft2 (46.4 m2) shall be permitted to be open to the corridor or lobby, provided that one of the following criteria is met:
- (a) The building is protected throughout by an approved automatic sprinkler system in accordance with Section 9.7.
- (b) The gift shop is protected throughout by an approved automatic sprinkler system in accordance with Section 9.7, and storage is separately protected.
- (5) Limited care facilities in smoke compartments protected throughout by an approved, supervised automatic sprinkler system in accordance with 19.3.5.8 shall be permitted to have group meeting or multipurpose therapeutic spaces open to the corridor, provided that all of the following criteria are met:
- (a) The space is not a hazardous area.
- (b) The space is protected by an electrically supervised automatic smoke detection system in accordance with 19.3.4, or the space is arranged and located to allow direct supervision by the facility staff from the nurses' station or similar location.
- (c) The space does not obstruct access to required exits.
- (6) Cooking facilities in accordance with 19.3.2.5.3 shall be permitted to be open to the corridor.
- (7) Spaces, other than patient sleeping rooms, treatment rooms, and hazardous areas, shall be permitted to be open to

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the corridor and unlimited in area, provided that all of the following criteria are met:

- (a) The space and the corridors onto which it opens, where located in the same smoke compartment, are protected by an electrically supervised automatic smoke detection system in accordance with 19.3.4.
- (b) Each space is protected by automatic sprinklers, or the furnishings and furniture, in combination with all other combustibles within the area, are of such minimum quantity and arrangement that a fully developed fire is unlikely to occur.
- (c) The space does not obstruct access to required exits.
- (8) Waiting areas shall be permitted to be open to the corridor, provided that all of the following criteria are met:
- (a) Each area does not exceed 600 ft2 (55.7 m2).
- (b) The area is equipped with an electrically supervised automatic smoke detection system in accordance with 19.3.4.
- (c) The area does not obstruct any access to required exits.
- (9) Group meeting or multipurpose therapeutic spaces, other than hazardous areas, that are under continuous supervision by facility staff shall be permitted to be open to the corridor, provided that all of the following criteria are met:
- (a) Each area does not exceed 1500 ft2 (139 m2).
- (b) Not more than one such space is permitted per smoke compartment.
- (c) The area is equipped with an electrically supervised automatic smoke detection system in accordance with 19.3.4.
- (d) The area does not obstruct access to required exits.

18.3.6.1, 19.3.6.1

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### Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

#### ST - K0362 - Corridors - Construction of Walls

Title Corridors - Construction of Walls

Type Standard

NFPA 101

#### **Regulation Definition**

Corridors - Construction of Walls 2021 EXISTING

Corridor walls shall be continuous from the floor to the underside of the floor or roof deck above; through any concealed spaces, such as those above suspended ceilings; and through interstitial structural and mechanical spaces, unless otherwise permitted by 19.3.6.2.4 through 19.3.6.2.8. Corridor walls shall have a minimum 1?2-hour fire resistance rating. 19.3.6.2 through 19.3.6.2.8

#### 2021 NEW

Corridor walls shall be permitted to terminate at or above the ceiling but shall not be required to extend to the deck above, where the ceiling is constructed to limit the transfer of smoke. Corridor walls shall form a barrier to limit the transfer of smoke.

18.3.6.2 through 18.3.6.2.3

#### ST - K0363 - Corridor - Doors

Title Corridor - Doors

Type Standard

NFPA 101

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#### **Regulation Definition**

**Interpretive Guideline** 

Corridor - Doors

#### 2021 EXISTING

Doors, including doors or panels to nurse servers and pass-through openings, protecting corridor openings in other than required enclosures of vertical openings, exits, or hazardous areas shall be doors constructed to resist the passage of smoke and shall be constructed of materials such as the following:

- (1)1 3/4 in. thick, solid-bonded wood core
- (2) Material that resists fire for a minimum of 20 minutes.
- 19.3.6.3 through 19.3.6.4.2

#### 2021 NEW

Doors, including doors or panels to nurse servers and pass-through openings, protecting corridor openings shall be constructed to resist the passage of smoke, and the following also shall apply:

- (1) Compliance with NFPA 80 shall not be required.
- (2) For other than doors protecting pass-through openings, a clearance between the bottom of the door and the floor covering not exceeding 1 in. (25 mm) shall be permitted.
- (3) For doors protecting pass-through openings, a clearance between the bottom of the door and the sill not exceeding 1/8 in. (3 mm) shall be permitted.
- (4) Doors to toilet rooms, bathrooms, shower rooms, sink closets, and similar auxiliary spaces that do not contain flammable or combustible material shall not be required to be constructed to resist the passage of smoke.

18.3.6.3 through 18.3.6.3.8

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### ST - K0364 - Corridor - Openings

Title Corridor - Openings

Type Standard

**NFPA 101** 

#### **Regulation Definition**

Corridor - Openings 2021 EXISTING

Transfer grilles shall not be used in corridor walls or doors, unless otherwise permitted by 19.3.6.4.2.

Miscellaneous openings, such as mail slots, pharmacy pass-through windows, laboratory pass-through windows, and cashier pass-through windows, shall be permitted to be installed in vision panels or doors without special protection, provided that both of the following criteria are met:

- (1) The aggregate area of openings per room does not exceed 20 in.2 (0.015 m2).
- (2) The openings are installed at or below half the distance from the floor to the room ceiling.

19.3.6.4 through 19.3.6.5.2, 19.3.6.5.2, 8.3

#### 2021 NEW

Transfer grilles shall not be used in corridor walls or doors, unless otherwise permitted by 18.3.6.4.2. In other than smoke compartments containing patient bedrooms, miscellaneous openings, such as mail slots, pharmacy pass-through windows, laboratory pass-through windows, and cashier pass-through windows, shall be permitted to be installed in vision panels or doors without special protection, provided that both of the following criteria are met:

(1) The aggregate area of openings per room does not exceed 80 in.2 (0.05 m2).

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(2) The openings are installed at or below half the distance from the floor to the room ceiling.

18.3.6.4 through 18.3.6.5.1, 8.3

### ST - K0371 - Subdivision of Building Spaces - Smoke Compar

Title Subdivision of Building Spaces - Smoke Compar

Type Standard

**NFPA 101** 

#### **Regulation Definition**

Subdivision of Building Spaces - Smoke Compartments

#### 2021 EXISTING

Smoke barriers shall be provided to divide every story used for sleeping rooms for more than 30 patients into not less than two smoke compartments (see 19.2.4.4), and the following also shall apply:

- (1) The size of any such smoke compartment shall comply with one of the following:
- (a) Smoke compartments shall not exceed 22,500 ft2 (2100 m2) gross floor area.
- (b) Where the building is sprinklered in accordance with 19.3.5.8, hospital smoke compartments shall not exceed 40,000 ft2 (3720 m2) gross floor area where all sleeping rooms are configured for only one patient. Suites in accordance with 19.2.5.7 shall be permitted where every occupiable sleeping room within the suite is configured for only one patient.
- (c) Where the building is sprinklered in accordance with 19.3.5.8, hospital smoke compartments shall not exceed 40,000 ft2 (3720 m2) gross floor area where the smoke compartment contains no patient sleeping rooms.
- (2) The travel distance from any point to reach a door in the

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required smoke barrier shall not exceed 200 ft (61 m).

- (3) Where neither the length nor width of the smoke compartment exceeds 150 ft (46 m), the travel distance to reach the smoke barrier door shall not be limited.
- (4) The area of an atrium separated in accordance with 19.3.7.3 shall not be limited in size.

19.3.7.1, 19.3.7.2

#### 2021 NEW

Buildings containing health care facilities shall be subdivided by smoke barriers (see 18.2.4.3), unless otherwise permitted by 18.3.7.2 and 18.3.7.3, as follows:

- (1) To divide every story used by inpatients for sleeping or treatment into not less than two smoke compartments
- (2) To divide every story having an occupant load of 50 or more persons, regardless of use, into not less than two smoke compartments
- (3) To limit the size of each smoke compartment required by 18.3.7.1(1) and 18.3.7.1(2) to an area not exceeding one of the following:
- (a) 22,500 ft2 (2100 m2) gross floor area in hospital smoke compartments where any patient sleeping room is configured for two or more patients
- (b) 40,000 ft2 (3720 m2) gross floor area in hospital smoke compartments where all patient sleeping rooms are configured for only one patient, in which case suites in accordance with 18.2.5.7 shall be permitted where every occupiable sleeping room within the suite is configured for only one patient (c) 40,000 ft2 (3720 m2) gross floor area in hospital smoke
- (c) 40,000 ft2 (3720 m2) gross floor area in hospital smoke compartments that contain no patient sleeping rooms
- (d) 22,500 ft2 (2100 m2) gross floor area in nursing homes and limited care facilities
- (4) To separate atriums in accordance with 18.3.7.3, in which case no limitation in the atrium size is required

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(5) To limit the travel distance from any point to reach a door in the required smoke barrier to a distance not exceeding 200 ft (61 m)

18.3.7.1, through 18.3.7.3, 9.7

#### ST - K0372 - Subdivision of Building Spaces - Smoke Barrie

Title Subdivision of Building Spaces - Smoke Barrie

Type Standard

**NFPA 101** 

#### **Regulation Definition**

Subdivision of Building Spaces - Smoke Barrier Construction

#### 2021 EXISTING

Smoke barriers shall be constructed to a 1/2-hour fire resistance rating per 8.5. Smoke barriers shall be permitted to terminate at an atrium wall. Smoke dampers are not required in duct penetrations in fully ducted HVAC systems where an approved sprinkler system is installed for smoke compartments adjacent to the smoke barrier. 19.3.7.3 through 19.3.7.5.2, 8.5

#### 2021 NEW

Any required smoke barrier shall be constructed in accordance with Section 8.5 and shall have a minimum 1-hour fire resistance rating, unless otherwise permitted by one of the following:

- (1) This requirement shall not apply where an atrium is used, in which case both of the following criteria also shall apply:
- (a) Smoke barriers shall be permitted to terminate at an atrium wall constructed in accordance with 8.6.7(1)(c).
- (b) Not less than two separate smoke compartments shall be provided on each floor.
- (2) Smoke dampers shall not be required in duct penetrations

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of smoke barriers in fully ducted heating, ventilating, and air-conditioning systems.

(3) The provisions of 8.5.6.5 and 8.5.7.2 shall not apply.

18.3.7.3 through 18.8.7.5.2, 8.5

For other than existing assemblies, where there is an accessible concealed floor, floor/ceiling, or attic space, fire barriers, smoke barriers, and smoke partitions shall be permanently identified with signs or stenciling in the concealed space and shall comply with all of the following:

- (1) Be located in accessible concealed floor, floor/ceiling, or attic spaces.
- (2) Be located within 15 ft (4572 mm) of the end of each wall and at intervals not exceeding 30 ft (9144 mm) measured horizontally along the wall or partition.
- (3) Include lettering not less than 3 in. (76 mm) in height with a minimum 3?8 in. (9.5 mm) stroke in a contrasting color.
- (4) Identify the wall type and its fire resistance rating, as applicable.

8.2.2.5

## ST - K0373 - Subdivision of Building Spaces - Accumulation

Title Subdivision of Building Spaces - Accumulation

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Subdivision of Building Spaces - Accumulation Space

Space shall be provided on each side of smoke barriers to adequately accommodate the total number of occupants in adjoining compartments.

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18.3.7.5.1, 18.3.7.5.2, 19.3.7.5.1, 19.3.7.5.2

## ST - K0374 - Subdivision of Building Spaces - Smoke Barrie

Title Subdivision of Building Spaces - Smoke Barrie

Type Standard

NFPA 101

#### **Regulation Definition**

Subdivision of Building Spaces - Smoke Barrier Doors

#### 2021 EXISTING

Doors in smoke barriers are 1 ¾ inch thick solid bonded wood-core doors or of construction that resists fire for 20 minutes. Nonrated protective plates of unlimited height are permitted. Doors are permitted to have fixed fire window assemblies per 8.5. Doors are self-closing or automatic closing, do not require latching, and are not required to swing in the direction of egress travel. Door opening provides a minimum clear width of 32 inches for swinging or horizontal doors.

19.3.7.6, 19.3.7.8, 19.3.7.9

#### 2021 NEW

Doors in smoke barriers shall be substantial doors, such as nonrated 1?3?4 in. (44 mm) thick, solid-bonded wood-core doors, or shall be of construction that resists fire for a minimum of 20 minutes, and shall meet the following requirements:

- (1) Nonrated factory- or field-applied protective plates, unlimited in height, shall be permitted.
- (2) Cross-corridor openings in smoke barriers shall be protected by a pair of swinging doors or a special-purpose horizontally sliding accordion or folding door assembly

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complying with 7.2.1.13, unless otherwise permitted by 18.3.7.7.

- (3) The swinging doors addressed by 18.3.7.6(2) shall be arranged so that each door swings in a direction opposite from the other.
- (4) The minimum clear width of swinging doors shall be as follows:
- (a) Where the corridor is required to be a minimum of 8 ft (2440 mm) wide 411?2 in. (1055 mm)
- (b) Where the corridor is required to be a minimum of 6 ft (1830 mm) wide 32 in. (810 mm)
- (5) The minimum clear width opening for horizontal sliding doors shall be as follows:
- (a) Where the corridor is required to be a minimum of 8 ft (2440 mm) wide 6 ft 11 in. (2110 mm)
- (b) Where the corridor is required to be a minimum of 6 ft (1830 mm) wide 64 in. (1625 mm)
- (6) The clearance under the bottom of smoke barrier doors shall not exceed 3?4 in. (19 mm).

Doors in smoke barriers shall comply with 8.5.4 and all of the following:

- " (1) The doors shall be self-closing or automatic closing in accordance with 18.2.2.2.7.
- " (2) Latching hardware shall not be required.
- " (3) Stops shall be required at the head and sides of door frames.
- " (4) Rabbets, bevels, or astragals shall be required at the meeting edges of pairs of doors.
- " (5) Center mullions shall be prohibited. 18.3.7.6, 18.3.7.7, 18.3.7.8

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#### Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

### ST - K0379 - Smoke Barrier Door Glazing

Title Smoke Barrier Door Glazing

Type Standard

**NFPA 101** 

#### **Regulation Definition**

Smoke Barrier Door Glazing 2021 EXISTING

Openings in smoke barriers shall be protected using one of the following methods:

- (1) Fire-rated glazing
- (2) Existing wired glass panels in steel frames
- (3) Doors, such as 13?4 in. (44 mm) thick, solid-bonded wood-core doors
- (4) Construction that resists fire for a minimum of 20 minutes

Vision panels, if provided, in doors shall be protected using one of the following methods:

- " (1) Fixed fire window assemblies in accordance with Section 8.5
- " (2) Existing wired glass panels in steel frames 19.3.7.6, 19.3.7.6.2, 8.5

#### 2021 NEW.

Vision panels consisting of fire-rated glazing in approved frames shall be provided in each cross-corridor swinging door and at each cross-corridor horizontal-sliding door in a smoke barrier.

The bottom of at least one vision panel in each leaf shall be not more than 43 in. (1090 mm) above the finished floor. Vision panels in doors in smoke barriers, if provided, shall be of fire-rated glazing in approved frames.

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#### Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

18.3.7.9, 18.3.7.9.1, 18.3.7.10

#### ST - K0381 - Sleeping Room Outside Windows and Doors

Title Sleeping Room Outside Windows and Doors

Type Standard

NFPA 101

#### **Regulation Definition**

Doors

Sleeping Room Outside Windows and Doors
Every patient sleeping room has an outside window or outside
door. In new occupancies, sill height does not exceed 36
inches above the floor. Windows in atrium walls are
considered outside windows. Newborn nurseries and rooms
intended for occupancy less than 24 hours have no outside
window or door requirements. Window sills in special nursing
care areas (e.g., ICU, CCU, hemodialysis, neonatal) do not
exceed 60 inches above the floor.

42 CFR 403, 418, 460, 482, 483, and 485

### ST - K0400 - Special Provisions - Other

Title Special Provisions - Other

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Special Provisions - Other

List in the REMARKS section any LSC Section 18.4 and 19.4 Special Provisions requirements that are not addressed by the provided K-tags, but are deficient. This information, along

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with the applicable Life Safety Code or NFPA standard citation, should be included.

### ST - K0421 - High-Rise Buildings

Title High-Rise Buildings

Type Standard

NFPA 101

### **Regulation Definition**

**Interpretive Guideline** 

High-Rise Buildings 2021 EXISTING

All high-rise buildings containing health care occupancies shall be protected throughout by an approved, supervised automatic sprinkler system installed in accordance with Section 9.7 within 12 years of the adoption of this Code, except as otherwise provided in 19.4.3.3, 19.4.3.4, or 19.4.3.4. 19.4.3.1

2021 NEW

High-rise buildings comply with section 11.8. 18.4.3

### ST - K0500 - Building Services - Other

Title Building Services - Other

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Building Services - Other

List in the REMARKS section any LSC Section 18.5 and 19.5

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#### Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

Building Services requirements that are not addressed by the provided K-tags, but are deficient. This information, along with the applicable Life Safety Code or NFPA standard citation, should be included.

## ST - K0511 - Utilities - Gas and Electric

Title Utilities - Gas and Electric

Type Standard

NFPA 101

### **Regulation Definition**

**Interpretive Guideline** 

Utilities - Gas and Electric
Utilities shall comply with the provisions of Section 9.1.
Power for alarms, emergency communications systems, and illumination of generator set locations shall be in accordance with the essential electrical system requirements of NFPA 99.
Design, installation, testing, and maintenance of essential electrical systems shall be in accordance with NFPA 99.
18.5.1 through 18.5.1.4, 19.5.1 through 19.5.1.3, 9.1 through 9.1.5

#### ST - K0521 - HVAC

Title HVAC

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

HVAC Heating, Ventilation, and Air Conditioning Heating, ventilating, and air-conditioning shall comply with the provisions of Section 9.2 and shall be installed in accordance with the manufacturer's specifications, unless

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otherwise modified by 19.5.2.2. 18.5.2.1, 19.5.2.1, 9.2

## ST - K0522 - HVAC - Any Heating Device

Title HVAC - Any Heating Device

HVAC - Any Heating Device

Type Standard

NFPA 101

### **Regulation Definition**

Any heating device, other than a central heating plant, shall be designed and installed so that combustible material cannot be ignited by the device or its appurtenances, and the following requirements shall also apply:

- (1) If fuel-fired, such heating devices shall comply with the following:
- (a) They shall be chimney connected or vent connected.
- (b) They shall take air for combustion directly from outside.
- (c) They shall be designed and installed to provide for complete separation of the combustion system from the atmosphere of the occupied area.
- (2) Any heating device shall have safety features to immediately stop the flow of fuel and shut down the equipment in case of either excessive temperatures or ignition failure.

18.5.2.2, 19.5.2.2

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## ST - K0523 - HVAC - Suspended Unit Heaters

Title HVAC - Suspended Unit Heaters

Type Standard

**NFPA 101** 

#### **Regulation Definition**

**Interpretive Guideline** 

Suspended Unit Heaters

Approved, suspended unit heaters shall be permitted in locations other than means of egress and patient sleeping areas, provided that both of the following criteria are met:

- (a) Such heaters are located high enough to be out of the reach of persons using the area.
- (b) Such heaters are equipped with the safety features required by 19.5.2.2(2).

18.5.2.3(1), 19.5.2.3(1)

## ST - K0524 - HVAC - Direct-Vent Gas Fireplaces

Title HVAC - Direct-Vent Gas Fireplaces

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Direct-Vent Gas Fireplaces

Direct-vent gas fireplaces, as defined in NFPA 54 shall be permitted inside of smoke compartments containing patient sleeping areas, provided that all of the following criteria are met:

(a) All such devices shall be installed, maintained, and used in accordance with 9.2.2.

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- (b) No such device shall be located inside of a patient sleeping room.
- (c) The smoke compartment in which the direct-vent gas fireplace is located shall be protected throughout by an approved, supervised automatic sprinkler system in accordance with 9.7.1.1(1) with listed quick-response or listed residential sprinklers.
- (d) The direct-vent fireplace shall include a sealed glass front with a wire mesh panel or screen.
- (e) The controls for the direct-vent gas fireplace shall be locked or located in a restricted location.
- (f) Electrically supervised carbon monoxide detection in accordance with Section 9.12 shall be provided in the room where the fireplace is located.

18.5.2.3(2), 19.5.2.3(2), 9.2.2, and NFPA 54

## ST - K0525 - HVAC - Solid Fuel-Burning Fireplaces

Title HVAC - Solid Fuel-Burning Fireplaces

Type Standard

NFPA 101

**Regulation Definition** 

HVAC - Solid Fuel-Burning Fireplaces Solid-fuel-burning fireplaces shall be permitted and used only in areas other than patient sleeping areas, provided that all of the following criteria are met:

- (a) Such areas are separated from patient sleeping spaces by construction having not less than a 1-hour fire resistance rating.
- (b) The fireplace complies with the provisions of 9.2.2.
- (c) The fireplace is equipped with a fireplace enclosure guaranteed against breakage up to a temperature of 650°F (343°C) and constructed of heat-tempered glass or other

**Interpretive Guideline** 

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approved material.

(d) Electrically supervised carbon monoxide detection in accordance with Section 9.12 is provided in the room where the fireplace is located.

18.5.2.3(3) and 19.5.2.3(3), 9.2.2, 9.12

#### ST - K0531 - Elevators

Title Elevators

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Elevators

2021 EXISTING

Elevators, escalators, and conveyors shall comply with the provisions of Section 9.4. 19.5.3, 9.4 through 9.4.7

2021 NEW

Elevators, escalators, and conveyors shall comply with the provisions of Section 9.4. 18.5.3, 9.4 through 9.4.7

## ST - K0541 - Rubbish Chutes, Incinerators, and Laundry Chu

Title Rubbish Chutes, Incinerators, and Laundry Chu

Type Standard

NFPA 101

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#### **Regulation Definition**

Rubbish Chutes, Incinerators, and Laundry Chutes

**Interpretive Guideline** 

2021 EXISTING

Existing chutes or linen chutes, including pneumatic waste and linen systems, that open 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 minimum 1-hour fire protection rating. All new chutes shall comply with Section 9.5.

Any waste chute or linen chute, including pneumatic waste and linen systems, shall be provided with automatic extinguishing protection in accordance with Section 9.7. (See Section 9.5.)

Any chute shall discharge into a chute discharge room used for no other purpose and shall be protected in accordance with Section 8.7 unless otherwise provided in 19.5.4.5.

Existing laundry chutes shall be permitted to discharge into the same room as rubbish discharge chutes, provided that the room is protected by automatic sprinklers in accordance with 19.3.5.9 or 19.3.5.7.

Existing flue-fed incinerators shall be sealed by fire-resistive construction to prevent further use.

Waste chutes, laundry chutes, and incinerators shall be installed and maintained in accordance with NFPA 82 unless such installations are approved existing installations, which shall be permitted to be continued in service.

19.5.4 through 19.5.4.6, 8.7, 9.5, 9.5.2, 9.7, NFPA 82

#### 2021 NEW

Waste chutes, incinerators, and laundry chutes shall comply with the provisions of Section 9.5, unless otherwise specified in 18.5.4.2.

The fire resistance rating of chute service opening rooms shall not be required to exceed 1 hour.

Any waste chute or linen chute, including pneumatic waste

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and linen systems, shall be provided with automatic extinguishing protection in accordance with Section 9.7. (See Section 9.5.)

Any chute shall discharge into a chute discharge room used for no other purpose and shall be protected in accordance with Section 8.7 and Section 9.5.

Incinerators shall not be directly flue-fed, nor shall any floor-charging chute directly connect with the combustion chamber.

Waste chutes, laundry chutes, and incinerators shall be installed and maintained in accordance with NFPA 82 unless such installations are approved existing installations, which shall be permitted to be continued in service.

18.5.4 through 18.5.4.6, 8.7, 9.5, 9.5.2, 9.7, NFPA 82

## ST - K0700 - Operating Features - Other

Title Operating Features - Other

Type Standard

NFPA 101

#### **Regulation Definition**

Interpretive Guideline

Operating Features - Other List in the REMARKS section any LSC Section 18.7 and 19.7 Operating Features requirements that are not addressed by the provided K-tags, but are deficient. This information, along with the applicable Life Safety Code or NFPA standard citation, should be included.

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#### ST - K0711 - Evacuation and Relocation Plan

Title Evacuation and Relocation Plan

Type Standard

**NFPA 101** 

#### **Regulation Definition**

**Interpretive Guideline** 

Evacuation and Relocation Plan

The administration of every health care occupancy shall have, in effect and available to all supervisory personnel, written copies of a plan for the protection of all persons in the event of fire, for their evacuation to areas of refuge, and for their evacuation from the building when necessary. All employees shall be periodically instructed and kept informed with respect to their duties under the plan required by 18/19.7.1.1.

A copy of the plan required by 18/19.7.1.1 shall be readily available at all times in the telephone operator's location or at the security center.

18.7 through 18.7.1.3, 19.7 through 19.7.1.3

#### ST - K0712 - Fire Drills

Title Fire Drills

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Fire Drills

Fire drills in health care occupancies shall include the simulation of emergency fire conditions and, except as indicated in 18/19.7.1.7, include activation of the fire alarm

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system notification appliances.

Infirm or bedridden patients shall not be required to be moved during drills to safe areas or to the exterior of the building. Drills shall be conducted quarterly on each shift to familiarize facility personnel (nurses, interns, maintenance engineers, and administrative staff) with the signals and emergency action required under varied conditions.

When drills are conducted between 9:00 p.m. and 6:00 a.m. (2100 hours and 0600 hours), a coded announcement shall be permitted to be used instead of activating the fire alarm system notification appliances.

Employees of health care occupancies shall be instructed in life safety procedures and devices.

18.7.1.4 through 18.7.1.8, 19.7.1.4 through 19.7.1.8

## ST - K0741 - Smoking Regulations

Title Smoking Regulations

Type Standard

NFPA 101

### **Regulation Definition**

**Smoking Regulations** 

Smoking regulations shall be adopted and shall include not less than the following provisions:

- (1) Smoking shall be prohibited in any room, ward, or compartment where flammable liquids, combustible gases, or oxygen is used or stored and 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.
- (2) In health care occupancies where smoking is prohibited and signs are prominently placed at all major entrances, secondary signs with language that prohibits smoking shall not be required.

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- (3) Smoking by patients classified as not responsible shall be prohibited.
- (4) The requirement of 18/19.7.4(3) shall not apply where the patient is under direct supervision.
- (5) Ashtrays of noncombustible material and safe design shall be provided in all areas where smoking is permitted.
- (6) Metal containers with self-closing cover devices into which ashtrays can be emptied shall be readily available to all areas where smoking is permitted.

18.7.4, 19.7.4

(Note smoking tower disposal receptacles are not ashtrays)

### ST - K0751 - Draperies, Curtains, & Loosely Hanging Fabics

Title Draperies, Curtains, & Loosely Hanging Fabics

Type Standard

**NFPA 101** 

#### **Regulation Definition**

Draperies, Curtains, and Loosely Hanging Fabrics
Draperies, Curtains, and Loosely Hanging Fabric
Draperies, curtains, and other loosely hanging fabrics and
films serving as furnishings or decorations in health care
occupancies shall be in accordance with the provisions of
10.3.1(see 18/19.3.5.11), and the following also shall apply:

- (1) Such curtains shall include cubicle curtains.
- (2) Such curtains shall not include curtains at showers and baths.
- (3) Such draperies and curtains shall not include draperies and curtains at windows in patient sleeping rooms in smoke compartments sprinklered in accordance with 19.3.5.
- (4) Such draperies and curtains shall not include draperies and curtains in other rooms or areas where the draperies and curtains comply with all of the following:
- (a) Individual drapery or curtain panel area does not exceed

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48 ft2 (4.5 m2).

- (b) Total area of drapery and curtain panels per room or area does not exceed 20 percent of the aggregate area of the wall on which they are located.
- (c) Smoke compartment in which draperies or curtains are located is sprinklered in accordance with 19.3.5.

18.7.5.1, 18.3.5.11, 19.7.5.1, 19.3.5.11, 10.3.1

# ST - K0752 - Upholstered Furniture and Mattresses

Title Upholstered Furniture and Mattresses

Type Standard

**NFPA 101** 

#### **Regulation Definition**

Upholstered Furniture and Mattresses Newly introduced upholstered furniture within health care occupancies shall comply with one of the following provisions:

- (1) The furniture shall meet the criteria specified in 10.3.2.1 and 10.3.2.2.
- (2) The furniture shall be in a building protected throughout by an approved, supervised automatic sprinkler system in accordance with 9.7.1.1(1).

Newly introduced mattresses within health care occupancies shall comply with one of the following provisions:

- (1) The mattresses shall meet the criteria specified in 10.3.3 and 10.3.3.2.
- (2) The mattresses shall be in a building protected throughout by an approved, supervised automatic sprinkler system in accordance with 9.7.1.1(1).

18.7.5.2, 18.7.5.3, 19.7.5.2, 19.7.5.4, 10.3, 10.3.2.1, 10.3.2.2, 10.3.3.2, 9.7.1.1(1)

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# Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

#### ST - K0753 - Combustible Decorations

**Title** Combustible Decorations

Type Standard

**NFPA 101** 

## **Regulation Definition**

Combustible Decorations

Combustible decorations shall be prohibited in any health care occupancy, unless one of the following criteria is met:

- (1) They are flame-retardant or are treated with approved fire-retardant coating that is listed and labeled for application to the material to which it is applied.
- (2) The decorations meet the flame propagation performance criteria contained in Test Method 1 or Test Method 2, as appropriate, of NFPA 701.
- (3) The decorations exhibit a heat release rate not exceeding 100 kW when tested in accordance with NFPA 289 using the 20-kW ignition source.
- (4) The decorations, such as photographs, paintings, and other art, are attached directly to the walls, ceiling, and non-fire-rated doors in accordance with the following:
- (a) Decorations on non-fire-rated doors do not interfere with the operation or any required latching of the door and do not exceed the area limitations of 18/19.7.5.6(4)(b), 18/19.7.5.6(4)(c), or 18/19.7.5.6(4)(d).
- (b) Decorations do not exceed 20 percent of the wall, ceiling, and door areas inside any room or space of a smoke compartment that is not protected throughout by an approved automatic sprinkler system in accordance with Section 9.7.
- (c) Decorations do not exceed 30 percent of the wall, ceiling, and door areas inside any room or space of a smoke compartment that is protected throughout by an approved supervised automatic sprinkler system in accordance with

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Section 9.7.

(d) Decorations do not exceed 50 percent of the wall, ceiling, and door areas inside patient sleeping rooms having a capacity not exceeding four persons, in a smoke compartment that is protected throughout by an approved, supervised automatic sprinkler system in accordance with Section 9.7. 18.7.5.6, 19.7.5.6

#### ST - K0754 - Soiled Linen and Trash Containers

Title Soiled Linen and Trash Containers

Type Standard

NFPA 101

#### **Regulation Definition**

Soiled Linen and Trash Containers

Soiled linen or trash collection receptacles with capacities greater than 64 gal (242 L) shall be located in a hazardous area when not attended.

Containers greater than 64 gal (242 L) used solely for recycling clean waste or for patient records awaiting destruction shall be permitted to be excluded from the requirements of 18/19.7.5.7.1 where all the following conditions are met:

- (1) Each container shall be limited to a maximum capacity of 96 gal (363 L).
- (2) Containers for combustibles shall be labeled and listed as meeting the requirements of FM Approval 6921, Approval Standard for Containers for Combustible Waste; however, such testing, listing, and labeling shall not be limited to FM Approvals.

The provisions of 10.3.8, applicable to containers for waste or linen, shall not apply.

18.7.5.7, 19.7.5.7

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# Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

# ST - K0761 - Maintenance Inspection & Testing - Doors

Title Maintenance Inspection & Testing - Doors

Type Rule

**NFPA 101** 

#### **Regulation Definition**

Maintenance Inspection & Testing - Doors
Fire door assemblies shall be installed, inspected, tested, and
maintained in accordance with NFPA 80.

All fire door assemblies shall be labeled.

Labels on fire door assemblies shall be maintained in a legible condition. In existing installations, steel door frames without a label shall be permitted where approved by the authority having jurisdiction. Unless otherwise specified, fire doors shall be self-closing or automatic closing.

Doors, other than those listed in 8.2.2.4 and 8.3.3.3.1, that are required to be self-closing or automatic closing shall comply with all of the following:

- (1) Door assemblies shall be inspected annually.
- (2) Doors shall be operated to confirm full closure.
- (3) Parts found to be damaged or inoperative shall be replaced.
- (4) Door openings and the surrounding areas shall be kept clear of anything that could obstruct or interfere with the free operation of the door.
- (5) Blocking or wedging of doors in the open position shall be prohibited.
- (6) Self-closing and automatic-closing devices shall be kept in working condition at all times.

Written records of inspection and testing are maintained and are available for review.

19.7.6, 4.6.12.1, 8.3.3.3 through 8.3.3.3.5, 8.5.4.3, 8.5.4,

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8.7.1.3, 8.8 (NFPA 101) 5.2, 5.2.3 (NFPA 80)

# ST - K0771 - Engineer Smoke Control Systems

Title Engineer Smoke Control Systems

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Engineer Smoke Control Systems

#### 2021 EXISTING

Existing engineered smoke control systems, unless specifically exempted by the authority having jurisdiction, shall be tested in accordance with established engineering principles. Systems not meeting the performance requirements of the testing specified in 19.7.7.1 shall be continued in operation only with the specific approval of the authority having jurisdiction.

19.7.7 through 19.7.7.2

#### 2021 NEW

New engineered smoke control systems shall be designed, installed, tested, and maintained in accordance with Section 9.3.

Test documentation shall be maintained on the premises at all times.

18.7.7 through 18.7.7.2, 9.3

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# ST - K0781 - Portable Space Heaters

Title Portable Space Heaters

Type Standard

NFPA 101

## Regulation Definition

**Interpretive Guideline** 

Portable Space Heaters

Portable space-heating devices shall be prohibited in all health care occupancies, unless both of the following criteria are met:

- (1) Such devices are permitted to be used only in nonsleeping staff and employee areas.
- (2) Such devices are listed and labeled for use as a freestanding, movable heater in accordance with UL 1278, Movable and Wall- or Ceiling-Hung Electric Room Heaters.

18.7.8, 19.7.8

# ST - K0791 - Construction, Repair, and Improvement Operati

Title Construction, Repair, and Improvement Operati

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Construction, Repair, and Improvement Operations

Construction, repair, and improvement operations shall comply with 4.6.10. Any means of egress in any area undergoing construction, repair, or improvements shall be inspected daily to ensure its ability to be used instantly in case of emergency and compliance with NFPA 241.

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18.7.9, 19.7.9, 4.6.10, 7.1.10.1

#### ST - K0900 - Health Care Facilities Code - Other

Title Health Care Facilities Code - Other

Type Standard

NFPA 101

#### Regulation Definition

**Interpretive Guideline** 

Health Care Facilities Code - Other

List in the REMARKS section any NFPA 99 requirements that are not addressed by the provided K-Tags, but are deficient. This information, along with the applicable Health Care Facilities Code or NFPA standard citation, should be included.

# ST - K0901 - Fundamentals - Building System Categories

Title Fundamentals - Building System Categories

Type Standard

NFPA 101

### **Regulation Definition**

**Interpretive Guideline** 

Fundamentals - Building System Categories

Activities, systems or equipment shall be designed to meet Category 1 through 4 requirements as detailed in this code.

Chapter 4 (NFPA 99)

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# ST - K0902 - Gas and Vacuum Piped Systems - Other

Title Gas and Vacuum Piped Systems - Other

Type Standard

NFPA 101

## **Regulation Definition**

**Interpretive Guideline** 

Gas and Vacuum Piped Systems - Other

List in the REMARKS section any NFPA 99 Chapter 5 Gas and Vacuum Systems requirements that are not addressed by the provided K-Tags, but are deficient. This information, along with the applicable Life Safety Code or NFPA standard citation, should be included.

Chapter 5 (NFPA 99)

# ST - K0903 - Gas and Vacuum Piped Systems - Categories

Title Gas and Vacuum Piped Systems - Categories

Type Standard

NFPA 101

#### **Regulation Definition**

Interpretive Guideline

Gas and Vacuum Piped Systems - Categories Medical gas, medical air, surgical vacuum, WAGD, and air supply systems in which failure is likely to cause major injury or death are designated:

\*Category 1. Systems in which failure is likely to cause major injury or death.

\*Category 2. Systems in which failure is likely to cause minor injury.

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\*Category 3. Systems in which failure is not likely to cause injury but can cause discomfort. Deep sedation and general anesthesia are not to be administered using a Category 3 medical gas system.

5.1.1, 5.2.1, 5.3.1 (NFPA 99)

# ST - K0904 - Gas and Vacuum Piped Systems - Warning System

Title Gas and Vacuum Piped Systems - Warning System

Type Standard

NFPA 101

# **Regulation Definition**

**Interpretive Guideline** 

Gas and Vacuum Piped Systems - Warning Systems

All master, area, and local alarm systems used for medical gas and vacuum systems comply with appropriate Category warning system requirements, as applicable.

5.1.9, 5.2.9, 5.3.9 (NFPA 99)

# ST - K0905 - Gas and Vacuum Piped Systems - Central Supply

Title Gas and Vacuum Piped Systems - Central Supply

Type Standard

NFPA 101

#### **Regulation Definition**

#### **Interpretive Guideline**

Gas and Vacuum Piped Systems - Central Supply System

Identification and Labeling Containers, cylinders and tanks are designed, fabricated, tested, and marked in accordance with 5.1.3.1.1 through 5.1.3.1.7. Locations containing only oxygen

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or medical air have doors labeled with "Medical Gases, NO Smoking or Open Flame." Locations containing other gases have doors labeled "Positive Pressure Gases, NO Smoking or Open Flame, Room May Have Insufficient Oxygen, Open Door and Allow Room to Ventilate Before Opening."

5.1.3.1, 5.2.3.1, 5.3.11 (NFPA 99)

## ST - K0906 - Gas and Vacuum Piped Systems - Central Supply

Title Gas and Vacuum Piped Systems - Central Supply

Type Standard

NFPA 101

#### **Regulation Definition**

Gas and Vacuum Piped Systems - Central Supply System Operations

Adaptors or conversion fittings are prohibited. Cylinders are handled in accordance with 11.6.2. Only cylinders, reusable shipping containers, and their accessories are stored in rooms containing central supply systems or cylinders. No flammable materials are stored with cylinders. Cryogenic liquid storage units intended to supply the facility are not used to transfill. Cylinders are kept away from sources of heat. Valve protection caps are secured in place, if supplied, unless cylinder is in use. Cylinders are not stored in tightly closed spaces. Cylinders in use and storage are prevented from exceeding 125 degrees Fahrenheit, and nitrous oxide and carbon dioxide cylinders are prevented from reaching temperatures lower than manufacture recommendations or 20 degrees Fahrenheit. Full or empty cylinders, when not connected, are stored in locations complying with 5.1.3.3.2 through 5.1.3.3.3, and are not stored in enclosures containing motor-driven machinery, unless for instrument air reserve

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headers.

5.1.3.2, 5.1.3.3.1.7, 5.1.3.3.1.8, 5.1.3.3.4, 5.2.3.2, 5.2.3.3 (NFPA 99)

# ST - K0907 - Gas and Vacuum Piped Systems - Maintenance Pr

Title Gas and Vacuum Piped Systems - Maintenance Pr

Type Standard

NFPA 101

# **Regulation Definition**

Gas and Vacuum Piped Systems - Maintenance Program

Medical gas, vacuum, WAGD, or support gas systems have documented maintenance programs. The program includes an inventory of all source systems, control valves, alarms, manufactured assemblies, and outlets. Inspection and maintenance schedules are established through risk assessment considering manufacturer recommendations. Inspection procedures and testing methods are established through risk assessment. Persons maintaining systems are qualified as demonstrated by training and certification or credentialing to the requirements of AASE 6030 or 6040.

5.1.14.2.1, 5.1.14.2.2, 5.1.15, 5.2.14, 5.3.13.4.2 (NFPA 99)

# ST - K0908 - Gas and Vacuum Piped Systems - Inspection and

Title Gas and Vacuum Piped Systems - Inspection and

Type Standard

NFPA 101

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#### Regulation Definition

**Interpretive Guideline** 

as and Vacuum Piped Systems - Inspection and Testing Operations

A maintenance program should be developed and implemented to ensure that the medical gas and vacuum system (MGVS) continues to operate as designed and intended. Some of the key elements of an MGVS maintenance program are as follows:

Evaluate equipment status.

Develop policy and procedures.

Develop schedules for work.

Document and evaluate results.

Educate all personnel that will work on and use the MGVS.

This testing and inspection does not replace the installer and verification testing that must be conducted following any new construction or modification.

5.1.14.4.3, 5.1.14.7, 5.2.13, 5.3.13 (NFPA 99)

# ST - K0909 - Gas and Vacuum Piped Systems - Information an

Title Gas and Vacuum Piped Systems - Information an

Type Standard

**NFPA 101** 

# **Regulation Definition**

**Interpretive Guideline** 

Gas and Vacuum Piped Systems - Information and Warning Signs

Piping is labeled by stencil or adhesive markers identifying the gas or vacuum system, including the name of system or chemical symbol, color code (Table 5.1.11), and operating pressure if other than standard. Labels are at intervals not more than 20 feet, are in every room, at both sides of wall penetrations, and on every story traversed by riser. Piping is

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not painted. Shutoff valves are identified with the name or chemical symbol of the gas or vacuum system, room or area served, and caution to not use the valve except in emergency.

5.1.11.1 through 5.1.11.1.6, 5.2.11, 5.3.11 (NFPA 99)

# ST - K0910 - Gas and Vacuum Piped Systems - Modifications

Title Gas and Vacuum Piped Systems - Modifications

Type Standard

NFPA 101

#### Regulation Definition

Interpretive Guideline

Gas and Vacuum Piped Systems - Modifications Whenever modifications are made that breach the pipeline, any necessary installer and verification test specified in 5.1.12 shall be conducted on the downstream portions of the medical gas piping system.5.1.14.7.6 through 5.1.14.7.9, 5.2.14, 5.3.14 (NFPA 99)

# ST - K0911 - Electrical Systems - Other

Title Electrical Systems - Other

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Electrical Systems - Other

List in the REMARKS section any NFPA 99 Chapter 6 Electrical Systems requirements that are not addressed by the provided K-Tags, but are deficient. This information, along with the applicable Life Safety Code or NFPA standard

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citation, should be included.

Chapter 6 (NFPA 99)

# ST - K0912 - Electrical Systems - Receptacles

Title Electrical Systems - Receptacles

Type Standard

**NFPA 101** 

# **Regulation Definition**

Electrical Systems - Receptacles

Power receptacles have at least one, separate, highly dependable grounding pole capable of maintaining low-contact resistance with its mating plug. In pediatric locations, receptacles in patient rooms, bathrooms, playrooms, and activity rooms, other than nurseries, are listed tamper-resistant or employ a listed cover.

If used in patient care room, ground-fault circuit interrupters (GFCI) are listed.

# ST - K0914 - Electrical Systems - Maintenance and Testing

Title Electrical Systems - Maintenance and Testing

6.3.2.2 through 6.3.2.2.4 (NFPA 99)

Type Standard

NFPA 101

## **Regulation Definition**

Electrical Systems - Maintenance and Testing Hospital-grade receptacles at patient bed locations and where deep sedation or general anesthesia is administered, are tested after initial installation, replacement, or servicing. Additional **Interpretive Guideline** 

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testing is performed at intervals defined by documented performance data. Receptacles not listed as hospital-grade at these locations are tested at intervals not exceeding 12 months. Line isolation monitors (LIM), if installed, are tested at intervals of less than or equal to 1 month by actuating the LIM test switch per 6.3.3.3.2, which activates both visual and audible alarm (see 6.3.2.9.3.2). For LIM circuits with automated self-testing, this manual test is performed at intervals less than or equal to 12 months. LIM circuits are tested per 6.3.3.3.3 after any repair or renovation to the electric distribution system. Records are maintained of required tests and associated repairs or modifications, containing date, room or area tested, and results. 6.3.3.2 (NFPA 99)

# ST - K0915 - Electrical Systems - Essential Electric Syste

Title Electrical Systems - Essential Electric Syste

Type Standard

NFPA 101

#### **Regulation Definition**

Electrical Systems - Essential Electric System Categories

\*Critical care rooms (Category 1) in which electrical system failure is likely to cause major injury or death of patients, including all rooms where electric life support equipment is required, are served by a Type 1 EES.

\*General care rooms (Category 2) in which electrical system failure is likely to cause minor injury to patients (Category 2) are served by a Type 1 or Type 2 EES.

\*Basic care rooms (Category 3) in which electrical system failure is not likely to cause injury to patients and rooms other than patient care rooms are not required to be served by an EES. Type 3 EES life safety branch has an alternate source of

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power that will be effective for 1-1/2 hours. 6.4.1 through 6.6.1 (NFPA 99)

# ST - K0916 - Electrical Systems - Essential Electric Syste

Title Electrical Systems - Essential Electric Syste

Type Standard

NFPA 101

#### **Regulation Definition**

<u>Interpretive Guideline</u>

Electrical Systems - Essential Electric System Alarm Annunciator

A remote annunciator that is storage battery powered is provided to operate outside of the generating room in a location readily observed by operating personnel. The annunciator is hard-wired to indicate alarm conditions of the emergency power source. A centralized computer system (e.g., building information system) is not to be substituted for the alarm annunciator.

6.7.1.2.7 (NFPA 99)

# ST - K0917 - Electrical Systems - Essential Electric Syste

Title Electrical Systems - Essential Electric Syste

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Electrical Systems - Essential Electric System Receptacles Electrical receptacles or cover plates supplied from the life safety and critical branches have a distinctive color or marking.

6.7.6.3.2 (NFPA 99)

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## ST - K0918 - Electrical Systems - Essential Electric Syste

Title Electrical Systems - Essential Electric Syste

Type Standard

**NFPA 101** 

#### **Regulation Definition**

Electrical Systems - Essential Electric System Maintenance and Testing

The generator or other alternate power source and associated equipment is capable of supplying service within 10 seconds. If the 10-second criterion is not met during the monthly test, a process shall be provided to annually confirm this capability for the life safety and critical branches. Maintenance and testing of the generator and transfer switches are performed in accordance with NFPA 110. Generator sets are inspected weekly, exercised under load 30 minutes 12 times a year in 20-40 day intervals, and exercised once every 36 months for 4 continuous hours. Scheduled test under load conditions include a complete simulated cold start and automatic or manual transfer of all EES loads, and are conducted by competent personnel. Maintenance and testing of stored energy power sources (Type 3 EES) are in accordance with NFPA 111. Main and feeder circuit breakers are inspected annually, and a program for periodically exercising the components is established according to manufacturer requirements. Written records of maintenance and testing are maintained and readily available. EES electrical panels and circuits are marked and readily identifiable. Minimizing the possibility of damage of the emergency power source is a design consideration for new installations. 6.9.1, 6.9.2, 6.9.3, 6.9.4, 6.10.18, 6.11 through 6.11.4.4 (NFPA 99), NFPA 110, NFPA 111, NFPA 70

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### Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

# ST - K0919 - Electrical Equipment - Other

Title Electrical Equipment - Other

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Electrical Equipment - Other

List in the REMARKS section any NFPA 99 Chapter 10, Electrical Equipment, requirements that are not addressed by the provided K-Tags, but are deficient. This information, along with the applicable Life Safety Code or NFPA standard citation, should be included.

Chapter 10 (NFPA 99)

# ST - K0920 - $Electrical\ Equipment$ - Power Cords and Extens

Title Electrical Equipment - Power Cords and Extens

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Electrical Equipment - Power Cords and Extension Cords

Power strips in a patient care vicinity are only used for components of movable patient-care-related electrical equipment (PCREE) assembles that have been assembled by qualified personnel and meet the conditions of 10.2.3.6. Power strips in the patient care vicinity may not be used for non-PCREE (e.g., personal electronics), except in long-term

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care resident rooms that do not use PCREE. Power strips for PCREE meet UL 1363A or UL 60601-1. Power strips for non-PCREE in the patient care rooms (outside of vicinity) meet UL 1363. In non-patient care rooms, power strips meet other UL standards. All power strips are used with general precautions. Extension cords are not used as a substitute for fixed wiring of a structure. Extension cords used temporarily are removed immediately upon completion of the purpose for which it was installed and meets the conditions of 10.2.4. 10.2.3.6, 10.2.4, 10.5.2.3 (NFPA 99), NFPA 70

### ST - K0921 - Electrical Equipment - Testing and Maintenanc

Title Electrical Equipment - Testing and Maintenanc

Type Standard

**NFPA 101** 

#### **Regulation Definition**

Electrical Equipment - Testing and Maintenance Requirements

The physical integrity, resistance, leakage current, and touch current tests for fixed and portable patient-care related electrical equipment (PCREE) is performed as required in 10.3. Testing intervals are established with policies and protocols. All PCREE used in patient care rooms is tested in accordance with 10.3.5.4 or 10.3.6 before being put into service and after any repair or modification. Any system consisting of several electrical appliances demonstrates compliance with NFPA 99 as a complete system. Service manuals, instructions, and procedures provided by the manufacturer include information as required by 10.5.3.1.1 and are considered in the development of a program for electrical equipment maintenance. Electrical equipment instructions and maintenance manuals are readily available, and safety labels and condensed operating instructions on the

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appliance are legible. A record of electrical equipment tests, repairs, and modifications is maintained for a period of time to demonstrate compliance in accordance with the facility's policy. Personnel responsible for the testing, maintenance and use of electrical appliances receive continuous training.

10.3, 10.4, 10.5.2.1, 10.5.2.1.2, 10.5.2.5, 10.5.3, 10.5.6, 10.5.8

# ST - K0922 - Gas Equipment - Other

Title Gas Equipment - Other

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Gas Equipment - Other

List in the REMARKS section any NFPA 99 Chapter 11 Gas Equipment requirements that are not addressed by the provided K-Tags, but are deficient. This information, along with the applicable Life Safety Code or NFPA standard citation, should be included.

Chapter 11 (NFPA 99)

# ST - K0923 - Gas Equipment - Cylinder & Container Storage

Title Gas Equipment - Cylinder & Container Storage

Type Standard

NFPA 101

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#### **Regulation Definition**

Interpretive Guideline

Gas Equipment - Cylinder and Container Storage

Greater than or equal to 3,000 cubic feet Storage locations are designed, constructed, and ventilated in accordance with 5.1.3.3.2 and 5.1.3.3.3.

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Storage locations are outdoors in an enclosure or within an enclosed interior space of non- or limited- combustible construction, with door (or gates outdoors) that can be secured. Oxidizing gases are not stored with flammables and are separated from combustibles by 20 feet (5 feet if sprinklered) or enclosed in a cabinet of noncombustible construction having a minimum 1/2 hr. fire protection rating. Less than or equal to 300 cubic feet In a single smoke compartment, individual cylinders available for immediate use in patient care areas with an aggregate volume of less than or equal to 300 cubic feet are not required to be stored in an enclosure. Cylinders must be handled with precautions as specified in 11.6.2.

A precautionary sign readable from 5 feet is on each door or gate of a cylinder storage room, where the sign includes the wording as a minimum "CAUTION: OXIDIZING GAS(ES) STORED WITHIN NO SMOKING."

Storage is planned so cylinders are used in order of which they are received from the supplier. Empty cylinders are segregated from full cylinders. When facility employs cylinders with integral pressure gauge, a threshold pressure considered empty is established. Empty cylinders are marked to avoid confusion. Cylinders stored in the open are protected from weather. 11.3, 11.3.5 through 11.3.12.5, 11.6.5 (NFPA 99)

**Interpretive Guideline** 

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# ST - K0924 - Gas Equipment - Testing and Maintenance Requi

Title Gas Equipment - Testing and Maintenance Requi

Type Standard

**NFPA 101** 

## **Regulation Definition**

Anesthesia apparatus are tested at the final path to patient after any adjustment, modification or repair. Before the apparatus is returned to service, each connection is checked to verify proper gas and an oxygen analyzer is used to verify oxygen concentration. Defective equipment is immediately removed from service. Areas designated for servicing of oxygen equipment are clean and free of oil, grease, or other flammables. Manufacturer service manuals are used to maintain equipment and a scheduled maintenance program is followed.

Gas Equipment - Testing and Maintenance Requirements

11.5.1.3, 11.6.2.5, 11.6.2.6 (NFPA 99)

# ST - K0925 - Gas Equipment - Respiratory Therapy Sources

Title Gas Equipment - Respiratory Therapy Sources

Type Standard

**NFPA 101** 

#### **Regulation Definition**

**Interpretive Guideline** 

Gas Equipment - Respiratory Therapy Sources of Ignition

Smoking materials (e.g., matches, cigarettes, lighters, lighter

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fluid, tobacco in any form) are removed from patients receiving respiratory therapy. When a nasal cannula is delivering oxygen outside of a patient's room, no sources of ignition are within in the site of intentional expulsion (1-foot). When other oxygen deliver equipment is used or oxygen is delivered inside a patient's room, no sources of ignition are within the area are of administration (15-feet). Solid fuel-burning appliances is not in the area of administration. Nonmedical appliances with hot surfaces or sparking mechanisms are not within oxygen-delivery equipment or site of intentional expulsion.

11.5.1.1 NFPA 99)

# ST - K0926 - Gas Equipment - Qualifications and Training

Title Gas Equipment - Qualifications and Training

Type Standard

**NFPA 101** 

#### **Regulation Definition**

Gas Equipment - Qualifications and Training of Personnel

Personnel concerned with the application, maintenance and handling of medical gases and cylinders are trained on the risk. Facilities provide continuing education, including safety guidelines and usage requirements. Equipment is serviced only by personnel trained in the maintenance and operation of equipment.

11.5.2.1 (NFPA 99)

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### Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

# ST - K0927 - Gas Equipment - Transfilling Cylinders

Title Gas Equipment - Transfilling Cylinders

Type Standard

NFPA 101

#### **Regulation Definition**

Gas Equipment - Transfilling Cylinders

Mixing of compressed gases in cylinders shall be prohibited. Transfilling of oxygen from one cylinder to another is in accordance with the mandatory requirements of CGA P-2.5, Transfilling of High Pressure Gaseous Oxygen Used for Respiration. Transfilling of any gas from one cylinder to another is prohibited in patient care rooms. Transfilling to liquid oxygen containers or to portable containers over 50 psi comply with conditions under 11.5.2.3.1 (NFPA 99). Transfilling to liquid oxygen containers or to portable containers under 50 psi comply with conditions under 11.5.2.3.2 (NFPA 99).

11.5.2.2 (NFPA 99)

# ST - K0928 - Gas Equipment - Labeling Equipment and Cylind

Title Gas Equipment - Labeling Equipment and Cylind

Type Standard

NFPA 101

### **Regulation Definition**

**Interpretive Guideline** 

**Interpretive Guideline** 

Gas Equipment - Labeling Equipment and Cylinders

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Equipment listed for use in oxygen-enriched atmospheres are so labeled. Oxygen metering equipment and pressure reducing regulators are labeled "OXYGEN-USE NO OIL."

Flowmeters, pressure reducing regulators, and oxygen-dispensing apparatus are clearly and permanently labeled designating the gases for which they are intended. Oxygen-metering equipment, pressure reducing regulators, humidifiers, and nebulizers are labeled with name of manufacturer or supplier. Cylinders and containers are labeled in accordance with the mandatory requirements of CGA C-7. Color coding is not utilized as the primary method of determining cylinder or container contents. All labeling is durable and withstands cleaning or disinfecting.

11.5.3.1 (NFPA 99)

# ST - K0929 - Gas Equipment - Precautions for Handling Oxyg

Title Gas Equipment - Precautions for Handling Oxyg

Type Standard

NFPA 101

#### **Regulation Definition**

Gas Equipment - Special Precautions for Handling Oxygen Cylinders and Manifolds

Handling of oxygen cylinders and manifolds is based on the mandatory requirements of CGA G-4, Oxygen. Oxygen cylinders, containers, and associated equipment are protected from contact with oil and grease, from contamination, protected from damage, and handled with care in accordance with precautions provided under 11.6.2.1 through 11.6.2.4 (NFPA 99)

11.6.2 (NFPA 99)

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# Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

# ST - K0930 - Gas Equipment - Liquid Oxygen Equipment

Title Gas Equipment - Liquid Oxygen Equipment

Type Standard

NFPA 101

## **Regulation Definition**

**Interpretive Guideline** 

Gas Equipment - Liquid Oxygen Equipment

The storage and use of liquid oxygen in base reservoir containers and portable containers comply with sections 11.7.2 through 11.7.4 (NFPA 99).

11.7 (NFPA 99)

### ST - K0932 - Features of Fire Protection - Other

Title Features of Fire Protection - Other

Type Standard

NFPA 101

#### **Regulation Definition**

**Interpretive Guideline** 

Features of Fire Protection - Other

List in the REMARKS section any NFPA 99 Chapter 15 Features of Fire Protection requirements that are not addressed by the provided K-Tags but are deficient. This information, along with the applicable Life Safety Code or NFPA standard citation, should be included.

Chapter 16 (NFPA 99)

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# Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

# ST - K1001 - Awareness of the Egress System

Title Awareness of the Egress System

Type Standard

NFPA 101 (2021)

# **Regulation Definition**

**Interpretive Guideline** 

Every exit shall be clearly visible, or the route to reach every exit shall be conspicuously indicated. Each means of egress, in its entirety, shall be arranged or marked so that the way to a place of safety is indicated in a clear manner.

NFPA 101 (2021) 4.5.3.3

# ST - K1002 - Existing Life Safety Features

Title Existing Life Safety Features

Type Standard

NFPA 101 (2021)

#### **Regulation Definition**

**Interpretive Guideline** 

No existing life safety feature shall be removed or reduced where such feature is a requirement for new construction. Existing life safety features obvious to the public, if not required by the Code, shall be either maintained or removed.

NFPA 101 (2021) 4.6.12.2 & 4.6.12.3.

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### Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

#### ST - K1003 - Features Maintained

Title Features Maintained

Type Standard

NFPA 101 (2021)

#### **Regulation Definition**

Whenever or wherever any device, equipment, system, condition, arrangement, level of protection, fire resistive construction, or any other feature is required for compliance with the provisions of the Life Safety Code, such device, equipment, system, condition, arrangement, level of protection, fire resistive construction, or other feature shall thereafter be continuously maintained in accordance with applicable NFPA requirements or as directed by the authority having jurisdiction.

NFPA 101 (2021) 4.6.12.1

### ST - K1004 - Maintenance Personnel

Title Maintenance Personnel

Type Standard

NFPA 101 (2021)

#### **Regulation Definition**

Maintenance, inspection, and testing shall be under the supervision of a responsible person who shall ensure that testing, inspecting, and maintenance are made at specified intervals in accordance with applicable NFPA standards or as directed by the authority having jurisdiction.

**Interpretive Guideline** 

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### Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

NFPA 101 (2021) 4.6.12.6

## ST - K1005 - General Equipment Testing & Maintenance

Title General Equipment Testing & Maintenance

Type Standard

NFPA 101 (2021)

**Regulation Definition** 

**Interpretive Guideline** 

Any device, equipment, system, condition, arrangement, level of protection, fire-resistive construction, or any other feature requiring periodic testing, inspection, or operation to ensure its maintenance shall be tested, inspected, or operated as specified elsewhere in this Code or as directed by the authority having jurisdiction.

NFPA 101 (2021) 4.6.12.4

#### ST - K1006 - Considerations not Related to Fire

Title Considerations not Related to Fire

Type Standard

NFPA 101 (2021)

#### **Regulation Definition**

**Interpretive Guideline** 

The Code also addresses other considerations that, while important in fire conditions, provide an ongoing benefit in other conditions of use, including non-fire emergencies.

NFPA 101 (2021) 1.1.5.

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### Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

# ST - K1007 - Interim Life Safety Measures

Title Interim Life Safety Measures

Type Standard

NFPA 101 (2021)

#### **Regulation Definition**

protection features are in place and continuously maintained for the portion occupied or where alternative life safety measures acceptable to the authority having jurisdiction are in

Buildings, or portions of buildings, shall be permitted to be occupied during construction, repair, alterations, or additions only where required means of egress and required fire

NFPA 101 (2021) 4.6.10.

# ST - K1008 - Firestop Systems & Devices

Title Firestop Systems & Devices

Type Standard

place.

NFPA 101 (2021)

#### **Regulation Definition**

Penetrations for cables, cable trays, conduits, pipes, tubes, combustion vents and exhaust vents, wires, and similar items to accommodate electrical, mechanical, plumbing, and communications systems that pass through a wall, floor, or floor/ceiling assembly constructed as a fire barrier shall be protected by a firestop system or device. The firestop system or device shall be tested in accordance with ASTM E 814, Standard Test Method for Fire Tests of Through Penetration

**Interpretive Guideline** 

**Interpretive Guideline** 

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Fire Stops, or ANSI/UL 1479, Standard for Fire Tests of Through- Penetration Firestops, at a minimum positive pressure differential of 0.01 in. water column (2.5 N/m2) between the exposed and the unexposed surface of the test assembly.

NFPA 101 (2021) 8.3.4.

#### ST - K1009 - Joint Penetrations

Title Joint Penetrations

Type Standard

NFPA 101 (2021)

#### **Regulation Definition**

Joints made within or between fire resistance-rated assemblies shall be protected with a joint system that is designed and tested to prevent the spread of fire for a time period equal to that of the assembly in which the joint is located. Such materials, systems, or devices shall be tested as part of the assembly in accordance with the requirements of ASTM E 1966, Standard Test Method for Fire-Resistive Joint Systems, or ANSI/UL 2079, Standard for Tests for Fire Resistance of Building Joint Systems.

NFPA 101 (2021) 8.3.5.2.

# ST - K1010 - Other Automatic Extinguishing Equipment

Title Other Automatic Extinguishing Equipment

Type Standard

NFPA 101 (2021)

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# Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

#### **Regulation Definition**

In any occupancy where the character of the fuel for fire is such that extinguishment or control of fire is accomplished by a type of automatic extinguishing system in lieu of an automatic sprinkler system, such extinguishing system shall be installed in accordance with the applicable standard referenced

NFPA 101 (2021) 9.8.1

#### ST - K1011 - Fire Doors

Title Fire Doors

in Table 9.8.1.

Type Standard

NFPA 101 (2021)

#### **Regulation Definition**

Communicating openings in dividing fire barriers required by 18.1.1.4.1 shall be permitted only in corridors and shall be protected by approved self-closing fire door assemblies. (See also Section 8.3.)

Doors in barriers required by 18.1.1.4.1 shall normally be kept closed, unless otherwise permitted by 18.1.1.4.1.3.

Doors shall be permitted to be held open if they meet the requirements of 18.2.2.2.7.

NFPA 101 (2021) 18.1.1.4.1.1 through 18.1.1.4.1.3, 19.1.1.4.1.1 through 19.1.1.4.1.3, 8.3.

# ST - K1012 - Flammable Storage - General

Title Flammable Storage - General

Type Standard

NFPA 101 (2021)

**Interpretive Guideline** 

**Interpretive Guideline** 

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#### **Regulation Definition**

The storage and handling of flammable liquids or gases shall be in accordance with the following applicable standards: (1) NFPA 30, Flammable and Combustible Liquids Code (2) NFPA 54, National Fuel Gas Code (3) NFPA 58, Liquefied Petroleum Gas Code

No storage or handling of flammable liquids or gases shall be permitted in any location where such storage would jeopardize egress from the structure, unless otherwise permitted by 8.7.3.1.

NFPA 101 (2021) 18.3.2.1 & 19.3.2.1, 8.7.3.1, 8.7.3.2, NFPA 30 (2018), NFPA 54 (2017), NFPA 58 (2018).

# ST - K1053 - Emergency Management Plan

Title Emergency Management Plan

Type Rule

59A-38.018(1) FAC

# **Regulation Definition**

(1) Pursuant to section 400.610(1)(b), F.S., each hospice shall prepare and maintain a comprehensive emergency management plan, hereinafter referred to as "the plan," in accordance with the "Comprehensive Emergency Management Plan (CEMP) Format for Hospices," DOEA Form H-001, March 2007, which is incorporated by reference. This document is available from the Agency for Health Care Administration, Licensed Home Health Programs Unit, 2727 Mahan Drive, Mail Stop 34, Tallahassee, Florida 32308 or the agency Web site at http://elderaffairs.state.fl.us/doea/ruleforms/DOEA-Form-H-0 01.pdf, and shall be included as part of the hospice's comprehensive emergency management plan.

**Interpretive Guideline** 

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# Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

Florida Administrative Code 59A-38.018

#### ST - K1054 - Licensure Procedure

Title Licensure Procedure

Type Rule

59A-38.003(1) & (3)(b) FAC

#### **Regulation Definition**

- (1) Licenses issued by the AHCA to operate a hospice shall be based upon the results of a survey conducted by the AHCA to determine compliance with the requirements of chapter 400, part IV, F.S., and with these rules. A license shall be issued to any not-for-profit public or private agency who meets all federal, state and local requirements.
- (3) In addition to the information required in section 400.606(1), F.S., the following information is required for the licensure application:
- (b) For initial licensure only, the Certificate of Need and certificates of occupancy signed by local authorized zoning, building and electrical officials shall be attached to the application. For initial licensure, where there are no municipal, county or electrical building codes, the applicant shall provide a written statement of compliance with these regulations from a registered architect or professional engineer who shall substitute for the authorities specified above. A separate survey for fire safety and physical plant requirements of residential and freestanding inpatient facilities operated by the hospice shall be made by the AHCA prior to the opening of the facilities and on a periodic basis.

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### Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

# ST - K1055 - Physical Plant Requirements

Title Physical Plant Requirements

Type Rule

59A-38.017 FAC; 400.6051(1) FS

#### **Regulation Definition**

59A-38.017 Physical Plant Requirements (Inpatient Facility and Unit).

- (1) As used in this rule, "inpatient facility and unit" means the location where inpatient services are provided to hospice patients.
- (2) All new inpatient facilities and units, and additions or renovations to existing facilities and units shall be in compliance with the requirements of section 400.6051, F.S.

400.6051 Construction and renovation; requirements.-

(1) The requirements for the construction and the renovation of a hospice residential or inpatient facility or unit must comply with the provisions of chapter 553 which pertain to building construction standards, including plumbing, electrical code, glass, manufactured buildings, accessibility for persons with disabilities, and the state minimum building codes. The Agency for Health Care Administration shall provide technical assistance to the Florida Building Commission in updating the construction standards of the Florida Building Code which govern hospice facilities.

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# Aspen State Regulation Set: K 4.03 Life Safety Code for Hosp

# ST - K1150 - Security Management

Title Security Management

Type Rule

NFPA 99 (2021 edition)

### **Regulation Definition**

This chapter shall apply to new and existing health care facilities. A health care facility shall have a security management plan. The scope, objectives, performance, and effectiveness of the security plan shall be tested at a frequency shown to be necessary by review of the security vulnerability assessment (SVA) in accordance with Section 13.3.