

**DIVISION OF ENGINEERING SERVICES
CODES COMMITTEE
REVIEW SUMMARY**

REFERENCE: E-mail with Word attachments from Richard Wermers, 12/2/2003

ISSUE: Can the 1st and/or Ground floors be classified as an occupancy different from the 2nd - 4th floors since inpatients are routinely transported to the 1st and ground floors for treatment/diagnostics and then returned to their inpatient unit on the 2nd - 4th floors?

LOCATION: Gallup Indian Medical Center (GIMC), Gallup, NM

BACKGROUND: GIMC has four stories above ground (1st - 4th floors) with a lower level (ground floor) partially below ground (5 working levels). There is also an unoccupied level/penthouse above the 4th floor.

The facility is fully sprinklered. The 2nd - 4th floors are classified as "Healthcare" (inpatient units). The first and ground floors are classified as "Business" with the exception of the Emergency Room that is located on the 1st floor and is classified as "Ambulatory Healthcare".

The Emergency room is separated from the "Business" section of the 1st floor by a 1-hr rated smoke partition. The emergency room has one exterior "Exit" door and three additional doors, through the 1-hr rated smoke partition, that lead to the "Business" section of the 1st floor.

Each floor is separated from the other floors by a 2-hour rated floor assembly with vertical penetrations protected by 90-minute rated doors.

Each wing of the facility (South, East, & West) has an exterior stair tower that empties to the exterior of the building (South (1st - 4th) floors, East (1st - 4th) floors, & West (Ground - 4th) floors). The center/core area of the building has a stair tower that serves Ground - 4th floors. There is an exit enclosure that extends the central stairway to the exterior on the Ground floor.

A question involving "Mixed Occupancies" was raised during a recent LSC review conducted by Navajo Area personnel at the Gallup Indian Medical Center. The 2nd - 4th floors of the facility are classified as a "Healthcare" occupancy while the 1st and ground floors are classified as "Business" occupancies with the exception of the emergency room that is classified as an "Ambulatory Health Care" occupancy.

DISCUSSION: References from the 2003 edition of the NFPA Life Safety Code (LSC): 19.1.2 **Multiple Occupancies**; 19.1.2.1; A.19.1.2.1; 19.1.2.2; A.19.1.2.2 and 19.1.2.3

Discussion centered on the number and type of patients that went through and were in the business occupancy. The committee equated the NFPA terminology "inpatients that are litterborne" with "patients incapable of self-preservation." There was no definition found of litterborne in the LSC. The committee agreed that as long as there were not more than four or more patients incapable of self-preservation in the business occupancy, the hospital could have use of and maintain the mixed occupancies.

In later conversations with the facility manager at GIMC, Jonathan Flannery stated that there are only three radiology rooms and no waiting area. Consequently, there could not be access by more than three patients at any one time. Also, these inpatients would have hospital personnel with them at all time transiting them from their floor to the radiology and back.

Additionally, Mr. Flannery confirmed that exits from the Healthcare occupancy either:

- Stairwells with 2-hour firewalls and emptied outside the facility or
- Emptied into the business occupancy and had an exit corridor with a 2-hour firewall separation to the outside.

INTERPRETATION: Yes, the 1st and/or ground floors may be classified as other occupancies as long as:

1. There exists a two hour fire separation between the occupancies, and
2. These areas are not intended for simultaneous customary access by four or more inpatients.

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