

# Ambulatory Surgical Centers (ASCs) & End-Stage Renal Disease Facilities (ESRDs)

2000 Tag #	2000 Language	2012 Tag #	2012 Language	Added	Deleted	Converted
NA	NA	K100	General Requirements – Other List in the REMARKS section, any LSC Section 20.1 and 20.1 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 on Form CMS-2567.	X		
NA	NA	K111	Building Rehabilitation Repair, Renovation, Modification, or Reconstruction Any building undergoing repair, renovation, modification, or reconstruction complies with both of the following: • Requirements of Chapter 21 • Requirements of the applicable Sections 43.3, 43.4, 43.5, and 43.6 20.1.1.4.3, 21.1.1.4.3, 4.6.7, 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 20.1.1.4.2 or 21.1.1.4.2 20.1.1.4.2, 21.1.1.4.2, 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. 20.1.1.4.1, 21.1.1.4.1, 4.6.5, 4.6.7, 43.1.2.3 (43.8)	X		
K114	Ambulatory health care occupancies are separated from other tenants and occupancies by fire barriers with at least a 1 hour fire resistance rating. Doors in such barriers are solid bonded core wood of 1 3/4 inches or equivalent and are equipped with a positive latch and closing device. Vision panels, if provided in fire barriers or doors shall be of fixed fire window assemblies in accordance with 8.2.3.2.2, 20.3.7.1, 21.3.7.1	K131	Multiple Occupancies – Sections of Ambulatory Health Care Facilities Multiple occupancies shall be in accordance with 6.1.14. Sections of ambulatory health care facilities shall be permitted to be classified as other occupancies, provided they meet both of the following: • The occupancy is not intended to serve ambulatory health care occupants for treatment or customary access • They are separated from the ambulatory health care occupancy by a 1-hour fire resistance rating Ambulatory health care facilities shall be separated from other tenants and occupancies and shall meet all of the following: • Walls have not less than 1-hour fire resistance rating and extend from floor slab to roof slab • Doors are constructed of not less than 1 1/2 in. thick, solid-bonded wood core or equivalent and is equipped with positive latches. • Doors are self-closing and are kept in the closed position, except when in use. • Windows in the barriers are of fixed fire window assemblies per 8.3. Per regulation, ASCs are classified as Ambulatory Health Care Occupancies, regardless of the number of patients served. 20.1.3.2, 21.1.3.3, 20.3.7.1, 21.3.7.1, 42 CFR 416.44			X
K12, K13	K12: Buildings two or more stories in height and of Type II(000), III (200), V (000) construction are equipped throughout with a supervised approved automatic sprinkler system in accordance with section 9.7, 20.1.6.3, 21.1.6.3 Number of stories in the building _____  K13: Construction Type _____	K161	Building Construction Type and Height Building construction type and stories meet Table 20.1.6.1 or Table 21.1.6.1, respectively Construction Type 1. I (442), I (332), II (222), III (111), III (211), IV (2HH), V (111) - Any number of stories, non-sprinklered or sprinklered 2. II (000), III (200), V (000) - One story non-sprinklered, any number of stories sprinklered Any level below the level of exit discharge shall be separated by Type II (111), Type III (211), or Type V (111) construction unless both of the following are met: 1. Such levels are under the control of the ambulatory health care occupancy. 2. Hazardous spaces are protected per section 8.7. Sprinklered stories must be sprinklered throughout by an approved, supervised automatic system in accordance with section 9.7. (See 20.3.5 or 21.3.5, respectively Give a brief description, in) e REMARKS: of the construction, the number of stories, including basements, floors on which patients are located, location of smoke or fire barriers and dates of approval. Complete sketch or attach small floor plan of the building as appropriate. 20.1.6.1, 20.1.6.2, 21.1.6.1, 21.1.6.2			X
NA	NA	K163	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. 20.1.6.3, 20.1.6.4, 21.1.6.3, 21.1.6.4	X		
NA	NA	K200	Means of Egress Requirements – Other List in the REMARKS section any LSC Section 20.2 and 21.2 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 on Form CMS-2567. 20.2, 21.2	X		
K72	Means of egress shall be continuously maintained free of all obstructions or impediments to full instant use in the case of fire or other emergency. No furnishing, decorations, or other objects shall obstruct exits, assess thereto, egress there from, or visibility thereof in accordance with 7.7.2, 38.2.7, 39.2.7, 21.1.2.7, 20.1.2.7.	K211	Means of Egress – General Aisles, passageways, corridors, exit discharges, exit locations, and accesses are in accordance with Chapter 7, and the means of egress is continuously maintained free of all obstructions to full instant use in case of emergency, unless modified by 20/21.2.2 through 20/21.2.11. 20.2.1, 21.2.1, 7.1.10.1			X
NA	NA	K222	Egress Doors Special locking arrangements are in accordance with section 7.2.1.6 DELAYED-EGRESS LOCKING ARRANGEMENTS Approved, listed delayed-egress locking systems installed in accordance with 7.2.1.6.1 shall be permitted on door assemblies serving low and ordinary hazard contents in buildings protected throughout by an approved, supervised automatic fire detection system or an approved, supervised automatic sprinkler system. ACCESS-CONTROLLED EGRESS LOCKING ARRANGEMENTS Access-Controlled Egress Door assemblies installed in accordance with 7.2.1.6.2 shall be permitted. ELEVATOR LOBBY EXIT ACCESS LOCKING ARRANGEMENTS Elevator lobby exit access door locking in accordance with 7.2.1.6.3 shall be permitted on door assemblies in buildings protected throughout by an approved, supervised automatic fire detection system and an approved, supervised automatic sprinkler system. 20.2.2.2, 21.2.2.2, 7.2.1.6.1 through 7.2.1.6.3	X		
NA	NA	K223	Doors with Self-Closing Devices Doors required to be self-closing are permitted to be held open by a release device complying with 7.2.1.8.2 that automatically closes all such doors throughout the smoke compartment, entire facility, and all stair enclosure doors upon activation of: • Required manual fire alarm system, and • Local smoke detectors designed to detect smoke passing through the opening or a required smoke detection system; and • Automatic sprinkler system, if installed; and • Loss of power 20.2.2.4, 20.2.2.5, 21.2.2.4, 21.2.2.5	X		

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K40, K43	3	K40: Exit access doors and exit doors used by health care occupants are of the swinging type and are at least 32-inches in clear width. An exception is provided for existing 34-inch doors in existing occupancies. 20.2.3.3, 21.2.3.3  K43: Special locking arrangements on exterior doors comply with 7.2.1.6. 20.2.2.2, 21.2.2.2	K231	6	Means of Egress Capacity The capacity of required means of egress is in accordance with 7.3. 20.2.3.1, 21.2.3.1, 38.2.3, 39.2.3			X
K39	4	Corridors for exit access are at least 44 inches wide. 20.2.3.2, 21.2.3.2	K232	6	Aisle, Corridor or Ramp Width The clear width of any corridor or passageway required for egress shall be not less than 44 inches wide. Where a corridor is 6 feet wide, projections of not more than 6 inches from the corridor wall above the handrail height are permitted for alcohol-based hand rub dispensers. 20.2.3.2, 20.2.3.3, 21.2.3.2, 21.2.3.3			X
NA	NA	NA	K233	6	Clear Width of Exit and Exit Access Doors 2012 EXISTING Doors in the means of egress from diagnostic or treatment areas, such as x-ray, surgical, or physical therapy, shall provide a clear width of not less than 32", unless the doors are existing 34" wide doors. 21.2.3.4	X		
NA	NA	NA	K233	6	Clear Width of Exit and Exit Access Doors 2012 NEW Doors in the means of egress from diagnostic or treatment areas, such as x-ray, surgical, or physical therapy, shall provide a clear width of not less than 32". 20.2.3.4,	X		
K32, K42	2	K32: At least two exits, located remote from each other are provided for each floor or fire section of the building. 20.2.4.1, 21.2.4.1, 7.5.1.4  K42: Rooms or suites of rooms of more than 2,500 sq. ft. have at least two exit access doors located remote from each other. 20.2.4.2, 21.2.4.2	K241	7	Number of Exits – Story and Compartment 2012 EXISTING Single means of egress is allowed from a mezzanine or balcony if one of the following exist: 1. Common path of travel is under 100 ft. if in a sprinklered building 2. Common path of travel 75 ft. if in a non-sprinklered building 3. Common path of travel is not limited if occupant load is under 30 Not less than 2 exits, as described in 38.2.2, are remotely located for each fire section or patient care area of the building and are accessible from each smoke compartment. Patient care suites larger than 2500 square feet have 2 exits remotely located from each other. Egress from smoke compartments, if installed, shall be permitted through adjacent compartments provided the egress does not return through the compartment of fire origin. 21.2.3.1 through 21.2.3.5, 7.4.1.1, 7.4.1.3 through 7.4.1.6			X
K32, K42	2	K32: At least two exits, located remote from each other are provided for each floor or fire section of the building. 20.2.4.1, 21.2.4.1, 7.5.1.4  K42: Rooms or suites of rooms of more than 2,500 sq. ft. have at least two exit access doors located remote from each other. 20.2.4.2, 21.2.4.2	K241	7	Number of Exits – Story and Compartment 2012 NEW Meets the requirements of section 7.4. Not less than 2 exits, as described in 38.2.2, are remotely located for each fire section or patient care area of the building and are accessible from each smoke compartment. Patient care suites larger than 2500 square feet have 2 exits remotely located from each other. Egress from smoke compartments, if installed, shall be permitted through adjacent compartments provided the egress does not return through the compartment of fire origin. 20.2.4.1 through 20.2.4.5, 7.4			X
K37	2	Dead-end corridors in existing occupancies do not exceed 50 ft. Dead-end corridors in new occupancies do not exceed 20 ft. In new occupancies with an approved automatic sprinkler system, dead-end corridors may increase to 50 ft. 20.2.5, 21.2.5, 38.2.5, 39.2.5.	K251	7	Dead-End Corridors and Common Path of Travel 2012 EXISTING Dead end corridors shall not exceed 50 feet. Common path of travel is no more 75 feet, and no more than 100 feet on a sprinklered story. Common path of travel is not limited in single tenant space with an occupant load not exceeding 30 persons. 21.2.5, 39.2.5.2			X
K37	2	Dead-end corridors in existing occupancies do not exceed 50 ft. Dead-end corridors in new occupancies do not exceed 20 ft. In new occupancies with an approved automatic sprinkler system, dead-end corridors may increase to 50 ft. 20.2.5, 21.2.5, 38.2.5, 39.2.5.	K251	8	Dead-End Corridors and Common Path of Travel 2012 NEW Dead-end corridors are no more than 50 feet in sprinklered buildings, and no more than 20 feet in non-sprinklered buildings. Common path of travel is no more 75 feet, and no more than 100 feet in sprinklered buildings or single tenant space with an occupant load not exceeding 30 persons. 20.2.5, 38.2.5.2, 38.2.5.3			X
K36	2	Travel distance between any room door required as exit access and an exit does not exceed 100 ft. The travel distance between any point in a room and an exit does not exceed 150 ft. (Note: In approved automatic sprinklered buildings, the travel distances may be increased by 50 ft.). 20.2.6.2, 21.2.6.2	K261	8	Travel Distance to Exits Travel distance between any point in a room and an exit is not more than 150 feet or 200 feet in sprinklered buildings. 20.2.6, 21.2.6			X
K112	2	At least 50 percent of the required exit capacity from upper floors discharges directly to the exterior of the building in accordance with section 7.7.2, 38.2.7, 39.2.7, 20.1.2.7, 21.1.2.7	K271	8	Discharge from Exits Exit discharge is arranged in accordance with 7.7, provides a level walking surface meeting the provisions of 7.1.7 with respect to changes in elevation and shall be maintained free of obstructions. Additionally, the exit discharge shall be a hard packed all-weather travel surface in accordance with CMS Survey and Certification Letter 05-38. 20.2.7, 21.2.7, 38.2.7, 39.2.7, 7.7			X
K113	2	Exit access, exits, and exit discharges are provided with illumination in accordance with section 7.8. 20.2.8, 21.2.8.	K281	8	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. 20.2.8, 21.2.8, 7.8			X
K46	2	Emergency illumination of at least 1½ hour duration is provided in accordance with section 7.9. 20.2.9.1, 21.2.9.1	K291	8	Emergency Lighting Emergency lighting of at least 1½-hour duration is provided automatically in accordance with 7.9. 20.2.9.1, 21.2.9.1, 7.9			X

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K105	6	Where general anesthesia or life support equipment is used, an essential electric system is provided in accordance with NFPA 99. 20.2.9.2, 21.2.9.2 Indicate type _____	K292	8	Life Support Means of Egress 2012 NEW (INDICATE N/A FOR EXISTING) Where general anesthesia or life-support equipment is used, each ambulatory health care facility shall be provided with an essential electric system in accordance with NFPA 99. (Indicate N/A if life support equipment is for emergency purposes only.) 20.2.9.2			X
K47	3	Exit and directional signs are displayed in marked in accordance with section 7.10 with continuous illumination served by the emergency lighting system. 20.2.10, 21.2.10	K293	9	Exit Signage Exit and directional signs are displayed in accordance with 7.10 with continuous illumination also served by the emergency lighting system. 20.2.10, 21.2.10, 7.10			X
NA	NA	NA	K300	9	Protection – Other List in the REMARKS section any LSC Section 20.3 and 21.3 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 on Form CMS-2567.	X		
K20, K21	4	K20: Vertical openings such as stairways, elevator shaftways, escalators, and building service shaftways are enclosed in accordance with section 8.2.5. (Note: Some exceptions are permitted in 38.3.1.) 8.2.5.2, 38.3.1, 39.3.1 20.3.1, 21.2.1 K21 : Any door with a required fire protection rating, such as stairways, exit passageways, horizontal exits, smoke barriers, or hazardous areas enclosures, if held open, is arranged to close automatically all such doors throughout the smoke compartment or entire facility by the actuation of the fire alarm system or automatic sprinkler system. 7.2.1.8.2, 20.2.2.3, 21.2.2.3	K311	10	Vertical Openings – Enclosure 2012 EXISTING Vertical openings shall be enclosed or protected per 8.6, unless one of the following conditions exist: 1. Unenclosed vertical openings per 8.6.9.1 are permitted 2. Unenclosed openings which do not serve as a required means of egress are permitted 3. Exit access stairs may be unenclosed if they meet the following conditions: a. <del>Doors are protected</del> throughout by a supervised sprinkler system per 9.7.1.1(1) b. Total travel distance to outside does not exceed 100 feet. 4. <del>Openings on</del> <del>top</del> story does not exceed 15 people b. Building is sprinkler protected throughout per 9.7.1.1(1) c. Building contains an automatic smoke detection system per 9.6 d. Activation of the sprinkler system or smoke detection system notifies all occupants of the building e. Total travel distance to outside does not exceed 100 feet. Floors that are below the street level and are used for storage or any use other than a business occupancy, shall not have any unprotected openings to the business occupancy floors. 21.3.1, 39.3.1.1, 39.3.1.2			X
K20, K21	4	K20: Vertical openings such as stairways, elevator shaftways, escalators, and building service shaftways are enclosed in accordance with section 8.2.5. (Note: Some exceptions are permitted in 38.3.1.) 8.2.5.2, 38.3.1, 39.3.1 20.3.1, 21.2.1 K21 : Any door with a required fire protection rating, such as stairways, exit passageways, horizontal exits, smoke barriers, or hazardous areas enclosures, if held open, is arranged to close automatically all such doors throughout the smoke compartment or entire facility by the actuation of the fire alarm system or automatic sprinkler system. 7.2.1.8.2, 20.2.2.3, 21.2.2.3	K311	11	Vertical Openings – Enclosure 2012 NEW Vertical openings shall be enclosed or protected per 8.6, unless one of the following conditions exist: 1. Unenclosed vertical openings per 8.6.9.1 are permitted 2. Exit access stairs may be unenclosed if they meet the 2 conditions a. Building is sprinkler protected throughout b. Total travel distance to outside does not exceed 100 feet. Floors that are below the street level and are used for storage or any use other than a business occupancy, shall not have any unprotected openings to the business occupancy floors. 20.3.1, 38.3.1.1, 38.3.1.2			X
K29	4	Hazardous areas separated from other parts of the building by fire barriers have at least one hour fire resistance rating or such areas are enclosed with smoke partitions and doors and the area is provided with an automatic sprinkler system. High hazard areas are provided with both fire barriers and sprinkler systems. 8.4, 38.3.2, 39.3.2	K321	11	Hazardous Areas – Enclosure Hazardous areas must meet one of the following: - Contain 1 hour rated enclosure when non-sprinklered - Sprinkler protected with smoke resistive separation - Severe Hazard locations contain sprinkler protection and 1-hour separation with 3/4 hour rated self-closing doors 20.3.2, 21.3.2, 38.3.2, 38.3.2.2, 39.3.2.1, 39.3.2.2, 8.7			X
K31, K131, K132, K133, K134, K135, K136	3	K31: Laboratories employing quantities of flammable, combustible, or hazardous materials that are considered a severe hazard shall be protected in accordance with NFPA 99. (Laboratories that are not considered to be a severe hazard shall meet the provision of K29. 101, 20.3.2.1, 21.3.2.1, Chapter 10 (NFPA 99) K131: Emergency procedures established for controlling chemical spills shall be in accordance with NFPA 99. 10-2.1.3.2 (NFPA 99) K132: Continuing safety education and supervision shall be provided, incidents shall be reviewed monthly, and procedures reviewed annually shall be in accordance with NFPA 99. 10-2.1.4.2 (NFPA 99) K133: Fume hoods shall be in accordance with NFPA 99. 5-4.3, 5-6.2 (NFPA 99) K134: Emergency Shower: Where the eyes or body of any person can be exposed to injurious corrosive materials, suitable fixed facilities for quick drenching or flushing of the eyes and body shall be provided within the work area for immediate emergency use. Fixed eye baths shall be designed and installed to avoid injurious water pressure shall be in accordance with NFPA 99. 10-6 (NFPA99) K135: Flammable and combustible liquids used from and stored in approved containers shall be in accordance with NFPA 30, Flammable and Combustible Liquids Code, and NFPA 45, Standard on Fire Protection for Laboratories Using Chemicals. Storage cabinets for flammable and combustible liquids shall be constructed in accordance with NFPA 30, Flammable and Combustible Liquids Code. 4-3.10.7.2.1 (NFPA 99)	K322	11	Laboratories Laboratories employing quantities of flammable, combustible, or hazardous materials that are considered a severe hazard are protected by 1-hour fire resistance- rated separation, automatic sprinkler system, and are in accordance with 8.7 and with NFPA 99. Laboratories not considered a severe hazard are protected as hazardous areas (see K321). Laboratories using chemicals are in accordance with NFPA 45. Gas appliances are of appropriate design and installed in accordance with NFPA 54. Shutoff valves are marked to identify material they control. Devices requiring medical grade oxygen from the piped distribution system meet the requirements under 11.4.2.2 (NFPA 99). 20.3.2.2, 21.3.2.2 9.3.1.2, 11.4.3.2, 15.4 (NFPA 99)			X
K78	5	Anesthetizing locations shall be protected in accordance with NFPA 99, Standard for Health Care Facilities and NFPA 101. (a) Shutoff valves are located outside each anesthetizing location and arranged so that shutting off one room or location will not affect others. (b) Relative humidity is maintained equal to or greater than 35%. 4-3.1.2.3(n) and 5-4.1.1 (NFPA 99), 20.3.2.2, 21.3.2.2	K323	12	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 indicated, d 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 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, per S&C 13-58. 20.3.2.3, 21.3.2.3, NFPA 99 5.1.4.8.7, 5.1.4.8.7.2, 5.1.9.3.4, 6.4.2.2.4.2			X

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NA	NA	NA	K324	12	Cooking Facilities Commercial cooking equipment shall be installed per NFPA 96 unless used for food warming or limited cooking. 20.3.2.4, 20.3.2.5, 21.3.2.4, 21.3.2.5, 9.2.3	X		
K211	5	Where Alcohol Based Hand Rub (ABHR) dispensers are installed: The corridor is at least 6 feet wide The maximum individual fluid dispenser capacity shall be 1.2 liters (2 liters in suites of rooms) The dispensers shall have a minimum spacing of 4 ft. from each other Not more than 10 gallons are used in a single smoke compartment outside a storage cabinet. Dispensers are not installed over or adjacent to an ignition source. If the floor is carpeted, the building is fully sprinklered. 18.3.2.7, CFR 416.44, 19.3.2.7	K325	13	Alcohol Based Hand Rub Dispenser (ABHR) ABHRs are protected in accordance with 8.7.3.1, unless all conditions are met: • Corridor is at least 6 feet wide • Maximum individual dispenser capacity is 0.32 gal. (0.53 gal. in suites) of fluid and 18 oz. of Level 1 aerosols • Dispensers shall have a minimum of 4-foot horizontal spacing • Not more than an aggregate of 10 gallons of fluid or 135 oz. aerosol are used in a single smoke compartment outside a storage cabinet, excluding one individual dispenser per room • Storage in a single smoke compartment greater than 5 gallons complies with NFPA 30 • Dispensers are not installed within 1 inch of an ignition source • If floor is carpeted, the building is fully sprinkler protected • ABHR does not exceed 95% alcohol • Operation of the dispenser shall comply with Section 18.3.2.6(11) or 19.3.2.6(11) • ABHR is protected against inappropriate access 20.3.2.6, 21.3.2.6, 8.7.3.1, CFR 416.44			X
K14	7	Interior finish on walls and ceilings of exits and enclosed exit access corridors have a flame spread rating of Class A or B. Offices have Class A, B or C. Interior finishes existing before December 17, 2010 that are applied directly to wall and ceilings with a thickness of less than 1/28 inch shall be permitted to remain in use without flame spread rating documentation. 10.2.3, 38.3.3.2, 39.3.3.2, NFPA TIA 00-2	K331	13	Interior Wall and Ceiling Finish Interior wall and ceiling finishes in exits and exit access corridors shall have a flame spread rating of Class A or Class B. The reduction in class of interior finish for sprinkler system as prescribed in 10.2.8.1 is permitted. All other areas may be class C rated material. Indicate flame spread rating(s) walls. _____ 20.3.3, 21.3.3, 38.3.3, 39.3.3, 10.2			X
NA	NA	NA	K332	13	Interior Floor Finish 2012 NEW (Indicate N/A for 2012 EXISTING) Interior floor finish in exit enclosures must meet 10.2 and be Class I or Class II. All other areas must meet 10.2.7.1 or 10.2.7.2. Indicate rating(s) for floors _____ 20.3.3, 21.3.3, 38.3.3, 39.3.3, 10.2	X		
K51	7	A manual fire alarm system, not a pre-signal type, is provided in accordance with 9.6 to automatically warn the building occupants. Fire alarm system has initiation, notification and control functions. The fire alarm system is arranged to automatically transmit an alarm to summon the fire department. 20.3.4.1, 21.3.4.1	K341	14	Fire Alarm - Installation A fire alarm system is installed with systems and components approved for the purpose in accordance with NFPA 70, National Electric Code, and NFPA 72, National Fire Alarm Code to provide effective warning of fire in any part of the building. In areas not continuously occupied, detection is installed at each fire alarm control unit. In new occupancy, detection is also installed at notification appliance circuit power extenders, and supervising station transmitting equipment. Fire alarm system wiring or other transmission paths are monitored for integrity. 20.3.4.2.1, 21.3.4.1, 9.6			X
NA	NA	NA	K342	14	Fire Alarm - Initiation Initiation of the fire alarm system is by manual means and by any required sprinkler system alarm, detection device, or detection system. Manual alarm boxes are provided in the path of egress near each required exit and 200' travel distance is not exceeded. 20.3.4.2, 21.3.4.2, 9.6.2	X		
NA	NA	NA	K343	14	Fire Alarm – Notification 2012 EXISTING A positive alarm sequence in accordance with 9.6.3.4 is permitted. Occupant notification is provided automatically, without delay, in accordance with 9.6.3. Fire department notification is accomplished automatically per 9.6.4. Smoke detection devices or systems equipped with reconfirmation features shall not be required to automatically notify the fire department, unless the alarm condition is reconfirmed within 120 seconds (2 minutes) 21.3.4.3 through 21.3.4.3.2.2, 9.6.3, 9.6.4	X		
NA	NA	NA	K343	14	Fire Alarm – Notification 2012 NEW A positive alarm sequence in accordance with 9.6.3.4 is permitted. Occupant notification is provided automatically, without delay, in accordance with 9.6.3. Fire department notification is accomplished automatically per 9.6.4. 20.3.4.3 through 20.3.4.3.2.1, 9.6.3, 9.6.4	X		
NA	NA	NA	K344	14	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. 20.3.4.4, 21.3.4.4	X		
NA	NA	NA	K345	15	Fire Alarm Systems – Testing and Maintenance A fire alarm system is tested and maintained in accordance with an approved program complying with the requirements of NFPA 70, National Electric Code, and NFPA 72, National Fire Alarm and Signaling Code. Records of system acceptance, maintenance and testing are readily available. 9.6.1.3, 9.6.1.5	X		
NA	NA	NA	K346	15	Fire Alarm – Out of Service Fire alarms that are out of service for 4 -hours in a 24-hour period, the authority having jurisdiction shall be notified, and the building shall be evacuated or an approved fire watch shall be provided for all parties left unprotected by the shutdown until the fire alarm system has been returned to service. 9.6.1.6	X		

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NA	NA	NA	K351	15	Sprinkler System – Installation Sprinkler systems (if installed) are installed per NFPA 13. Where more than 2 sprinklers are installed in a single area for protection, waterflow devices shall be provided to sound the building fire alarm system or to notify a constantly attended location such as a PBX, security office, or emergency room. 20.3.5.1, 20.3.5.2, 21.3.5.1, 21.3.5.2, 9.7.1.2, 9.7, NFPA 13	X		
NA	NA	NA	K353	15	Sprinkler System – Maintenance and Testing Automatic sprinkler and standpipe systems are inspected, tested, and maintained in accordance with NFPA 25, Standard for the Inspection, Testing, and Maintaining of Water-based Fire Protection Systems. Records of system design, maintenance, inspection and testing are maintained in a secure location and readily available. a) Date sprinkler system last checked _____ b) Who provided system test _____ c) Water system supply source _____ Provide in REMARKS information on coverage for any non-required or partial automatic sprinkler system. 9.7.5, 9.7.7, 9.7.8, and NFPA 25	X		
NA	NA	NA	K354	16	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 building or portion of the building affected are evacuated or an approved fire watch is provided until the sprinkler system has been returned to service. 9.7.5, 15.5.2 (NFPA 25)	X		
K64	8	Portable fire extinguishers are provided. 20.3.5.2, 21.3.5.2	K355	16	Portable Fire Extinguishers Portable fire extinguishers are selected, installed, inspected, and maintained in accordance with NFPA 10, Standard for Portable Fire Extinguishers. 20.3.5.3, 21.3.5.3, 9.7.4.1, NFPA 10			X
K17	8	Corridors in new occupancies used for exit access are separated from use areas by partitions with a fire resistance rating of at least one hour. Doors have at least one 20 minute fire protection rating and are equipped with a positive latch and closing device. Vision panels, if provided, in partitions or doors therein are not to exceed 20 inches and install at or below half distance from floor to room ceiling. 8.2.3, 20.3.6, 38.3.6 (Indicate N/A for existing occupancies, open floor areas with available exits, corridors in a space occupied by a single tenant, and buildings provided with complete automatic sprinkler systems.)	K362	16	Corridors – Construction of Corridor Walls 2012 NEW (Indicate N/A for 2013 EXISTING) Where access to exits is provided by corridors, such corridors shall be separated from use areas by a minimum 1-hour fire barrier constructed per section 8.3, unless one of the following exists: 1. Where exits are available from an open floor area 2. Where the entire space is a single tenant 3. Where the building is protected throughout by an approved automatic sprinkler system installed per 9.7.1.1(1) If the walls have a fire resistance rating, give the rating _____ 20.3.6.1, 38.3.6.1, 38.3.6.2			X
NA	NA	NA	K364	17	Corridor – Openings 2012 NEW (Indicate N/A for 2012 EXISTING) Miscellaneous openings, such as mail slots, pharmacy/laboratory/cashier pass-through windows, shall be permitted to be installed in vision panels or doors without special protection provided that they meet both of the following: 1) The aggregate opening does not exceed 20 square feet 2) The aggregate opening does not exceed 20 square feet If the room is protected throughout by an automatic sprinkler system. The aggregate opening shall not exceed 80 sq. in. 20.3.6.2.1, 20.3.6.2.2	X		
K115	8	Ambulatory health care facilities are divided into at least two smoke compartments with smoke barriers having at least 1 hour fire resistance rating. Doors in smoke barriers are equipped with positive latches. Doors shall be constructed of not less than 1 3/4 inch thick solid bonded core wood or equivalent. Vision panels are provided and are of fixed wire glass limited to 1,296 sq. inch per panel. (Indicate N/A for facilities of less than 5,000 sq. ft. with an approved smoke detection system, and less than 10,000 sq. ft. with an approved supervised sprinkler system in accordance with 9.7.) 20.3.7.2, 20.3.7.3, 20.3.7.4, 20.3.7.6, 21.3.7.3, 21.3.7.2, 21.3.7.4, 21.3.7.6	K371	17	Subdivision of Building Spaces - Smoke Compartments Smoke compartments do not exceed 25,000 square feet in size. Every story shall be divided into not less than 2 smoke compartments unless one of the following conditions occur: - Facility is less than 5,000 square feet protected by an approved smoke detection system - Facility is less than 10,000 square feet protected by an approved, supervised sprinkler system per 9.7 - Adjoining occupancy is used as a smoke compartment if all of the following are met: a. Separating wall is 1-hour fire resistive rated b. Doors in the 1 hour rated wall at 1 3/4" thick c. Doors in the 1 hour rated wall are self-closing d. Windows in the 1 hour rated wall are fixed fire window assemblies per 8.3 e. The ambulatory health care facility is less than 22,500 square feet f. Access from the ambulatory health care facility is unrestricted to another occupancy 20.3.7.2, 21.3.7.2			X
NA	NA	NA	K372	18	Subdivision of Building Spaces – Smoke Barrier Construction 2012 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. 21.3.7.5, 21.3.7.6, 8.5	X		

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NA	NA	NA	K372	18	Subdivision of Building Spaces – Smoke Barrier Construction 2012 NEW Smoke barriers shall be constructed to provide at least a 1-hour fire resistance rating and constructed in accordance with 8.5. Smoke barriers shall be permitted to terminate at an atrium wall. Smoke dampers are not required in duct penetrations of fully ducted HVAC systems 20.3.7.5, 20.3.7.6, 8.5	X		
NA	NA	NA	K374	18	Subdivision of Building Spaces – Smoke Barrier Doors 2012 EXISTING Smoke barrier doors shall be a minimum of 1 3/4" thick, solid-bonded wood core or equivalent with self-closing or automatic-closing devices in accordance with 21.2.2.4. Latching hardware is not required. Doors are not required to swing in the direction of egress travel 21.3.7.9, 21.3.7.10	X		
NA	NA	NA	K374	18	Subdivision of Building Spaces – Smoke Barrier Doors 2012 NEW Smoke barrier doors shall be a minimum of 1 3/4" thick, solid-bonded wood core or equivalent with self-closing or automatic-closing devices in accordance with 21.2.2.4. Latching hardware is not required. Doors are required to swing in the direction of egress travel. Rabbits, bevels, or astragals are at meeting edges, and stops are at the head and sides of door frames. Center mullions are prohibited in smoke barrier door openings 20.3.7.9, 20.3.7.10, 20.3.7.13, 20.3.7.14	X		
NA	NA	NA	K379	19	Smoke Barrier Door Glazing 2012 NEW (Indicate N/A for 2012 EXISTING) Cross-corridor swinging doors or cross corridor horizontal-sliding doors, contain a vision panel consisting of fire-rated glazing in approved frames in each door. Vision panels in any other door in the smoke barrier, if provided, shall be fire-rated glazing in approved frames. 20.3.7.11, 20.3.7.12, 21.3.7.7, 8.3	X		
NA	NA	NA	K400	19	Special Provisions – Other List in the REMARKS section any LSC Section 20.4 and 21.4 Special Provisions 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 on Form CMS-2567.	X		
K116	8	Buildings over 75 ft. in height housing ambulatory health care facilities are provided with a complete approved automatic sprinkler system shall be in accordance with 11.8.2.	K421	19	High-Rise Buildings 2012 EXISTING High-rise buildings are protected throughout by an approved, supervised automatic sprinkler system in accordance with Section 9.7.1.1(1), or an engineered life safety system complying with 39.4.2.1(2). 21.4, 39.4.2			X
K116	8	Buildings over 75 ft. in height housing ambulatory health care facilities are provided with a complete approved automatic sprinkler system shall be in accordance with 11.8.2.	K421	19	High-Rise Buildings 2012 NEW High-rise buildings comply with section 11.8. 20.4, 38.4.2			X
NA	NA	NA	K500	19	Building Services – Other List in the REMARKS section any LSC Section 20.5 and 21.5 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 on Form CMS-2567.	X		
K117	9	Utilities shall comply with section 9.1. (See K147 for electrical wiring and equipment requirements) 20.5.1, 21.5.1, 9.1	K511	19	Utilities – Gas and Electric Equipment using gas or related gas piping complies with NFPA 54, National Fuel Gas Code, electrical wiring and equipment complies with NFPA 70, National Electric Code. Existing installations can continue in service provided no hazard to life. 20.5.1, 21.5.1, 21.5.1.2, 9.1.1, 9.1.2			X
K67	9	Heating, ventilating, and air-conditioning shall comply with the manufacturer's specifications and section 9.2. 20.5.2.1, 21.5.2.1	K521	20	HVAC Heating, ventilation, and air conditioning shall comply with 9.2 and shall be installed in accordance with the manufacturer's specifications. 20.5.2.1, 21.5.2.1, 9.2			X
NA	NA	NA	K522	20	HVAC – Any Heating Device Any heating device, other than a central heating plant, is designed and installed so combustible materials cannot be ignited by device, and has a safety features to stop fuel and shut down equipment if there is excessive temperature or ignition failure. If fuel fired, the device also: • is chimney or vent connected • takes air for combustion from outside • combustion system separate from occupied area atmosphere 20.5.2.2, 20.5.2.2.1, 21.5.2.2, 21.5.2.2.1	X		
NA	NA	NA	K523	20	HVAC – Suspended Unit Heaters Suspended unit heaters are permitted provided the following are met: • Not located in means of egress or in patient rooms • Located high enough to be out of reach of people in the area • Has the safety features to stop fuel and shut down equipment if there is excessive temperature or ignition failure 20.5.2.2.2, 21.5.2.2.2	X		
K118	9	Elevators, dumbwaiters, and vertical conveyors shall comply with section 9.4. 20.5.3, 21.5.3	K531	20	Elevators 2012 EXISTING Elevators comply with the provision of 9.4. Elevators are inspected and tested as specified in ASME A17.1, Safety Code for Elevators and Escalators. Firefighter's Service is operated monthly with a written record. Existing elevators conform to ASME/ANSI A17.3, Safety Code for Existing Elevators and Escalators. All existing elevators, having a travel distance of 25 ft. or more above or below the level that best serves the needs of emergency personnel for firefighting purposes, conform with Firefighter's Service Requirements of ASME/ANSI A17.3. (Includes firefighter's service Phase I key recall and smoke detector automatic recall, firefighter's service Phase II emergency in-car key operation, machine room smoke detectors, and elevator lobby smoke detectors.) 21.5.3, 9.4.2, 9.4.3			X

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K118	9	Elevators, dumbwaiters, and vertical conveyors shall comply with section 9.4. 20.5.3, 21.5.3	K531	21	Elevators 2012 NEW Elevators comply with the provision of 9.4. Elevators are inspected and tested as specified in ASME A17.1, Safety Code for Elevators and Escalators. Firefighter's Service is operated monthly with a written record. New elevators conform to ASME/ANSI A17.1, Safety Code for Elevators and Escalators, including Firefighter's Service Requirements. (Includes firefighter's Phase key recall and smoke detector automatic recall, firefighter's service Phase II emergency in-car key operation, machine room smoke detectors, and elevator lobby smoke detectors.) 20.5.3, 9.4.2, 9.4.3			X
K118	9	Elevators, dumbwaiters, and vertical conveyors shall comply with section 9.4. 20.5.3, 21.5.3	K532	21	Escalators, Dumbwaiters, and Moving Walks Escalators, dumbwaiters, and moving walks comply with the provisions of 9.4. All existing escalators, dumbwaiters, and moving walks conform to the requirements of ASME/ANSI A17.3, Safety Code for Existing Elevators and Escalators. (Includes escalator emergency stop buttons and automatic skirt obstruction stop. For power dumbwaiters, includes hoistway door locking to keep doors closed except for floor where car is being loaded or unloaded.) 20.5.3, 21.5.3, 9.4			X
K71	9	Rubbish chutes, incinerators, and laundry chutes shall comply with section 9.5. 20.5.4, 21.5.4	K541	22	Rubbish Chutes, Incinerators, and Laundry Chutes 2012 EXISTING Rubbish chutes are installed per section 9.5 - Walls, partitions, and inlet openings meet the requirements of 8.3 - Doors of chutes open to a room designed exclusively for accessing the chute opening - Room used for accessing the chute opening(s) are separated from other spaces per 8.7 - Chutes shall be permitted to open into rooms not exceeding 400 cubic feet in size if the room is sprinkler protected and the room is not used for storage. OR Existing installations having properly enclosed and maintained chute openings shall be permitted to have inlets open to a corridor or normally occupied space 21.5.4, 9.5, NFPA82			X
K71	9	Rubbish chutes, incinerators, and laundry chutes shall comply with section 9.5. 20.5.4, 21.5.4	K541	22	Rubbish Chutes, Incinerators, and Laundry Chutes 2012 NEW Rubbish chutes are installed per section 9.5 - Walls, partitions, and inlet openings meet the requirements of 8.3 - Doors of chutes open to a room designed exclusively for accessing the chute opening - Room used for accessing the chute opening(s) are separated from other spaces per 8.7 - Chutes shall be permitted to open into rooms not exceeding 400 cubic feet in size if the room is sprinkler protected and the room is not used for storage. - Maintenance and installation are per NFPA 82 20.5.4, 9.5, NFPA82			X
NA	NA	NA	K700	23	Operating Features – Other List in the REMARKS section any LSC Section 20.7 and 21.7 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 in Form CMS-2567.	X		
K48	9	There is a written plan for the protection of all patients and for their evacuation in the event of an emergency. 20.7.1.1, 21.7.1.1	K711	23	Evacuation and Relocation Plan There is a written plan for the protection of all patients and for their evacuation in the event of an emergency. Employees are periodically instructed and kept informed with their duties under the plan, and a copy of the plan is readily available with telephone operator or with security. The plan addresses the basic response required of staff per 20/21.7.2.1.2 and provides for all of the fire safety plan components per 20/21.7.2.2. 20.7.1.1 through 20.7.1.3, 20.7.1.8 through 20.7.2.3.3 21.7.1.1 through 20.7.1.3, 21.7.1.8 through 20.7.2.3.3			X
K50	9	Fire drills are held at unexpected times under varying conditions, at least quarterly on each shift. The staff is familiar with procedures and is aware that drills are part of established routine. 20.7.1.2, 21.7.1.2	K712	23	Fire Drills Fire drills include the transmission of a fire alarm signal and simulation of emergency fire conditions. Fire drills are held at unexpected times under varying condition at least quarterly on each shift. The staff is familiar with procedures and is aware that drills are part of established routine. Responsibility for planning and conducting drills is assigned only to competent persons who are qualified to exercise leadership. Where drills are conducted between 9:00 PM and 6:00 AM, a coded announcement may be used instead of audible alarms. 20.7.1.4 through 20.7.14.7			X
K66	9	Smoking regulations are adopted, and include the posting of "NO SMOKING" signs or with the international symbol for no smoking in any room, ward, or compartment where flammable liquids, combustible gases or oxygen are used or stored, and in any other hazardous location. 20.7.4, 21.7.4	K741	24	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. (3) Smoking by patients classified as not responsible shall be prohibited. (4) The requirement of 18.7.4(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 20.7.4, 21.7.4			X
K74	N/A	N/A	K751	24	Draperies, Curtains, and Loosely Hanging Fabrics Draperies, curtains including cubicle curtains and loosely hanging fabric or films shall be in accordance with 10.3.1. Excluding curtains and draperies: at showers and baths; on windows in patient sleeping room located in sprinklered compartments; and in non-patient sleeping rooms in sprinklered compartments where individual drapery or curtain panels do not exceed 48 square feet or total area does not exceed 20% of the wall. 20.7.5.1 through 20.7.5.3, 21.7.5.1 through 21.7.5.3			X

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NA	NA	NA	K752	25	Upholstered Furniture and Mattresses Newly introduced upholstered furniture meets Class I or char length, and heat release criteria in accordance with 10.3.2.1 and 10.3.3, unless the building is fully sprinklered. Newly introduced mattresses shall meet char length and heat release criteria in accordance with 10.3.2.2 and 10.3.4, unless the building is fully sprinklered. Upholstered furniture and mattresses belonging to nursing home residents do not have to meet these requirements as all nursing homes are required to be fully sprinklered. Newly introduced upholstered furniture and mattresses means purchased on or after the LSC final rule effective date. 20.7.5.2, 20.7.5.3, 21.7.5.2, 21.7.5.3	X		
K73	N/A	K73: Combustible decorations shall be prohibited unless they are flame-retardant or in such limited quantity that hazard of fire development or spread is not present. 20.7.7.4, 21.7.5.4	K753	25	Combustible Decorations Combustible decorations shall be prohibited unless one of the following is met: • Flame retardant or treated with approved fire-retardant coating that is listed and labeled for product. • Decorations meet NFPA701 • Decorations exhibit heat release less than 100 kilowatts in accordance with NFPA 289. • Decorations, such as photographs, paintings and other art are attached to the walls, ceilings and non-fire-rated doors in accordance with 18.7.5.6 or 19.7.5.6. • The decorations in existing occupancies are in such limited quantities that a hazard of fire is not present. 20.7.5.4, 21.7.5.4			X
K75	N/A	N/A	K754	25	Soiled Linen and Trash Containers Soiled linen or trash collection receptacles shall not exceed 32 gallons in capacity. The average density of container capacity in a room or space shall not exceed 0.5 gallons/square feet. A total container capacity of 32 gallons shall not be exceeded within any 64 square feet area. Mobile soiled linen or trash collection receptacles with capacities greater than 32 gallons shall be located in a room protected as a hazardous area when not attended. 20.7.5.5, 21.7.5.5	X		
NA	NA	NA	K771	26	Engineered Smoke Control Systems When installed, engineered smoke control systems are tested in accordance with established engineering principles. Test documentation is maintained on the premises 20.7.7.1 through 20.7.7.3, 21.7.7.1 through 21.7.7.3	X		
K70	9	Portable space heating devices are prohibited except portable space heating devices shall be permitted to be used in nonsleeping staff and employee areas where the heating elements of such devices do not exceed 2120 F (1000C). 20.7.8, 21.7.8	K781	26	Portable Space Heaters Portable space heating devices shall be prohibited in all health care occupancies. Except, when used in nonsleeping staff and employee areas where the heating elements do not exceed 212 degrees Fahrenheit (100 degrees Celsius) 20.7.8, 21.7.8			X
NA	NA	NA	K791	26	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 20.7.9.1, 20.7.9.2, 21.7.9.1, 21.7.9.2	X		
NA	NA	NA	K900	26	Health Care Facilities Code - Other List in the REMARKS section, any NFPA 99 requirements (excluding Chapter 7, 8, 12, and 13) 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 on Form CMS-2567.	X		
K145	25	The Type I EES is divided into the critical branch, life safety branch and the emergency system and Type II EES is divided into the emergency and critical systems in accordance with 3-4.2.2.2, 3-5.2.2 (NFPA 99)	K901	26	Fundamentals – Building System Categories Building systems are designed to meet Category 1 through 4 requirements as detailed in NFPA 99. Categories are determined by a formal and documented risk assessment procedure performed by qualified personnel. Chapter 4 (NFPA 99)			X
K130	N/A	N/A	K902	26	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 on Form CMS-2567. Chapter 5 (NFPA 99)			X
NA	NA	NA	K903	27	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 minor injury to patients are designated Category 2. Systems in which failure is not likely to cause injury, but can cause discomfort is designated Category 3. Deep sedation and general anesthesia are not administered when using a Category 3 medical gas system. 5.1.1.1, 5.2.1, 5.3.1.1, 5.3.1.5 (NFPA 99)	X		
K140	24	Medical gas warning systems shall be in accordance with NFPA 99, Standard for Health Care Facilities. (a) Master alarm panels are in two separate locations and have audible and visible signals. (b) There are high/low alarms for +/- 20% operating pressure. This section shall be in accordance with NFPA 99, 4-3.1.2.2 (c) Where a level 2 gas system is used, one alarm panel that complies with 4-3.1.2.2(b)3a,b,c,d and with 4-3.1.2.2(c)2,5 shall be permitted. 4-4.1 (NFPA 99) exception No. 4. 4-3.1.2.2 (NFPA 99)	K904	27	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, 5.3.6.2.2 (NFPA 99)			X
NA	NA	NA	K905	27	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 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, 5.3.10 (NFPA 99)	X		



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K77	5	Piped in medical gas systems comply with NFPA 99.	K906	28	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 cylinders are in use. Cylinders are not stored in tightly closed spaces. Cylinders in use and storage are prevented from exceeding 130°F, and nitrous oxide and carbon dioxide cylinders are prevented from reaching temperatures lower than manufacturer recommendations or 20°F. 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 headers. 5.1.3.2, 5.1.3.3.17, 5.1.3.3.1.8, 5.1.3.3.4, 5.2.3.2, 5.2.3.3, 5.3.6.20.4, 5.6.20.5, 5.3.6.20.7, 5.3.6.20.8, 5.3.6.20.9 (NFPA 99)			X
NA	NA	NA	K907	28	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)	X		
NA	NA	NA	K908	28	Gas and Vacuum Piped Systems – Inspection and Testing Operations The gas and vacuum systems are inspected and tested as part of a maintenance program and include the required elements. Records of the inspections and testing are maintained as required. 5.1.14.2.3, B.5.2, 5.2.13, 5.3.13, 5.3.13.4 (NFPA 99)	X		
K141	24	Medical gas storage areas shall have a precautionary sign, readable from a distance of 5 ft., that is conspicuously displayed on each door or gate of the storage room or enclosure. The sign shall include the following wording as a minimum: CAUTION, OXIDIZING GAS(ES) STORED WITHIN, NO SMOKING. 18.3.2.4, 19.3.2.4, 8-3.1.11.3 (NFPA 99)	K909	29	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 ft., are in every room, at both sides of wall penetrations, and on every story traversed by riser. Piping is 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. 5.1.14.3, 5.1.11.1, 5.1.11.2, 5.2.11, 5.3.13.3, 5.3.11 (NFPA 99)			X
NA	NA	NA	K910	29	Gas and Vacuum Piped Systems – Modifications Whenever modifications are made that breach the pipeline, any necessary installer and verification test specified in 5.1.2 is conducted on the downstream portion of the medical gas piping system. Permanent records of all tests required by system verification tests are maintained. 5.1.14.4.1, 5.1.14.4.6, 5.2.13, 5.3.13.4.3 (NFPA 99)	X		
K147	7	Electrical wiring and equipment shall be in accordance with NFPA 70, National Electrical Code. 9-1.2 (NFPA 99), 20.5.1, 21.5.1	K911	29	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 citation, should be included on Form CMS-2567. Chapter 6 (NFPA 99)			X
NA	NA	NA	K912	29	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, play rooms, 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. 6.3.2.2.6.2 (F), 6.3.2.4.2 (NFPA 99)	X		
NA	NA	NA	K913	30	Electrical Systems – Wet Procedure Locations Operating rooms are considered wet procedure locations, unless otherwise determined by a risk assessment conducted by the facility governing body. Operating rooms defined as wet locations are protected by either isolated power or ground-fault circuit interrupters. A written record of the risk assessment is maintained and available for inspection. 6.3.2.2.8.4, 6.3.2.2.8.7, 6.4.4.2	X		
K144	25	Generators inspected weekly and exercised under load for 30 minutes per month and shall be in accordance with NFPA 99 and NFPA 110. 3-4.4.1 and 8-4.2 (NFPA 99), Chapter 6 (NFPA 110)	K914	30	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 servicing, or additional 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 1 month by actuating the LIM test switch per 6.3.2.6.3.6, which activates both visual and audible alarm. For LIM circuits with automated self-testing, this manual test is performed at intervals of 12 months. LIM circuits are tested per 6.3.3.3.2 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. 6.3.4 (NFPA 99)			X
K106, K146	25, 26	K106: Hospitals and inpatient hospices with life support equipment have a Type I Essential Electric System, and nursing homes have a Type II ESS that are powered by a generator with a transfer switch and separate power supply in accordance with NFPA 99. 12-3.3.2, 13-3.3.2.1, 16-3.3.2 (NFPA 99)  K146: The nursing home/hospice with no life support equipment shall have an alternate source of power separate and independent from the normal source that will be effective for minimum of 1 1/2 hour after loss of the normal source 3-6. (NFPA 99)	K915	30	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 power that will be effective for 1 1/2 hours. 3.3.138, 6.3.2.2.10, 6.6.2.2.2, 6.6.3.1.1 (NFPA 99), TIA 12-3			X
NA	NA	NA	K916	31	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 no to be substituted for the alarm annunciator. 6.4.1.1.17, 6.4.1.1.17.5 (NFPA 99)	X		
NA	NA	NA	K917	31	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. 6.4.2.2.6, 6.5.2.2.4.2, 6.6.2.2.3.2 (NFPA 99)	X		

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NA	NA	NA	K918	31	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. 6.4.4, 6.5.4, 6.6.4 (NFPA 99), NFPA 110, NFPA 111, 700.10 (NFPA 70)	X		
NA	NA	NA	K919	32	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 on Form CMS-2567. Chapter 10 (NFPA 99)	X		
NA	NA	NA	K920	32	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) assemblies 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 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 (NFPA 99), 10.2.4 (NFPA 99), 400-8 (NFPA 70), 590.3(D) (NFPA 70), TIA 12-5	X		
NA	NA	NA	K921	33	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 10.3.5.5 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 manufacture 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 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 continuing training. 10.3, 10.5.2.1, 10.5.2.1.2, 10.5.2.5, 10.5.3, 10.5.6, 10.5.8	X		
NA	NA	NA	K922	33	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 on Form CMS-2567. Chapter 11 (NFPA 99)	X		
K76	24	K76: Medical gas storage and administration areas shall be protected in accordance with NFPA 99, Standard for Health Care Facilities. (a) Oxygen storage locations of greater than 3,000 cu. ft., are enclosed by a one-hour separation. (b) Locations for supply systems of greater than 3,000 cu. ft., are vented to the outside. 4-3.1.1.2 (NFPA 99), 8-3.1.11.1 (NFPA 99), 18.3.2.4, 19.3.2.4	K923	34	Gas Equipment – Cylinder and Container Storage ≥ 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. > 300 but <3,000 cubic feet 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. ≤ 300 cubic feet In a single smoke compartment, individual cylinders available for immediate use in patient care areas with an aggregate volume of 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			X
NA	NA	NA	K924	34	Gas Equipment – Testing and Maintenance Requirements 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. 11.4.1.3, 11.5.1.3, 11.6.2.5, 11.6.2.6 (NFPA 99)	X		
NA	NA	NA	K925	35	Gas Equipment – Respiratory Therapy Sources of Ignition Smoking materials 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 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 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, TIA 12-6 (NFPA 99)	X		
NA	NA	NA	K926	35	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)	X		

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K143	25	Transferring of liquid oxygen from one container to another shall be accomplished at a location specifically designated for the transferring that is as follows: (a) separated from any portion of a facility wherein patients are housed, examined, or treated by a separation of a fire barrier of hour fire-resistive construction; and (b) the area that is mechanically ventilated, sprinklered, and has ceramic or concrete flooring; and (c) in an area that is posted with signs indicating that transferring is occurring, and that smoking in the immediate area is not permitted in accordance with NFPA 99 and Compressed Gas Association. 8-6.2.5.2 (NFPA 99)	K927	35	Gas Equipment – Transfilling Cylinders Transfilling of oxygen from one cylinder to another is in accordance with 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)			X
NA	NA	NA	K928	36	Gas Equipment – Labeling Equipment and Cylinders 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 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)	X		
NA	NA	NA	K929	36	Gas Equipment – Precautions for Handling Oxygen Cylinders and Manifolds Handling of oxygen cylinders and manifolds is based on 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)	X		
NA	NA	NA	K930	36	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)	X		
K142	25	All occupancies containing hyperbaric facilities shall comply with NFPA 99, Standard for Health Care Facilities, Chapter 19.	K931	36	Hyperbaric Facilities All occupancies containing hyperbaric facilities comply with construction, equipment, administration, and maintenance requirements of NFPA 99. Chapter 14 (NFPA 99)			X
NA	NA	NA	K932	36	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 on Form CMS-2567. Chapter 15 (NFPA 99)	X		
NA	NA	NA	K933	37	Features of Fire Protection – Fire Loss Prevention in Operating Rooms Periodic evaluations are made of hazards that could be encountered during surgical procedures, and fire prevention procedures are established. When flammable germicides or antiseptics are employed during surgeries utilizing electrosurgery, cautery or lasers: • packaging is non-flammable • applicators are in unit doses • Preoperative "time-out" is conducted prior the initiation of any surgical procedure to verify: o application site is dry prior to draping and use of surgical equipment o pooling of solution has not occurred or has been corrected o solution-soaked materials have been removed from the OR prior to draping and use of surgical devices o policies and procedures are established outlining safety precautions related to the use of flammable germicide or antiseptic use. Procedures are established for operating room emergencies including alarm activation, evacuation, equipment shutdown, and control operations. Emergency procedures include the control of chemical spills, and extinguishment of drapery, clothing and equipment fires. Training is provided to new OR personnel (including surgeons), continuing education is provided, incidents are reviewed monthly, and procedures are reviewed annually. 15.13 (NFPA 99)	X		
K130	NA	NA	N/A	N/A	Previous miscellaneous "catch all" tag, which was replaced by topic specific miscellaneous tags		X	