Stillwater Medical Center

THIRD FLOOR
Renovation
Stillwater, OK

REES ASSOCIATES INC
ARCHITECTURE PLANNING INTERIORS
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01808

Abbreviations

ACOUS.	ACOUSTICAL
AFF	ABOVE FINISHED FLOOR
A.D.	AREA DRAIN
ADJ.	ADJUSTABLE
ADMIN.	ADMINISTRATIVE
ALUM.	ALUMINUM
ALT.	ALTERNATE
ANCIL.	ANCILLARY
APPROX.	APPROXIMATE
ARCH.	ARCHITECT (URAL)
BD.	BOARD
BLDG.	BUILDING
BLK.	BLOCK
BLKG.	BLOCKING
BM.	BEAM
BOT.	BOTTOM
BRG.	BEARING
CAB.	CABINET
CEM.	CEMENT
CER.	CERAMIC
CFCI	CONTRACTOR FURNISHED CONTRACTOR INSTALLED
C.I.P.	CAST IN PLACE
C.J.	CONTROL JOINT
CLG.	CEILING
CLO.	CLOSET
CLR.	CLEAR
C.M.U.	CONCRETE MASONRY UNIT
COL.	COLUMN
COMP.	COMPOSITION
CONC.	CONCRETE
CONT.	CONTINUOUS
CORR.	CORRIDOR
CTSK.	COUNTERSUNK
CNTR.	COUNTER
CTR.	CENTER
CU. FT.	CUBIC FOOT
CU. YD.	CUBIC YARD
D.B. SINK	DOUBLE SINK
DBL.	DOUBLE
DEPT.	DEPARTMENT
D.F.	DRINKING FOUNTAIN
DET.	DETAIL
DIA.	DIAMETER
DIM.	DIMENSION
DISP.	DISPENSER
DN.	DOWN
DR.	DOOR
DWR.	DRAWER
DWG.	DRAWING
D.W.	DUMB WAITER
E.	EAST
EA.	EACH
E.J.	EXPANSION JOINT
ELAST.	ELASTOMERIC
EL.	ELEVATION
ELEC.	ELECTRICAL
ELEV.	ELEVATOR
EMER.	EMERGENCY
ENCL.	ENCLOSURE
EQ.	EQUAL
EQPT.	EQUIPMENT
ES	EXPOSED STRUCTURE
E.W.C.	ELECTRIC WATER COOLER
EXST.	EXISTING
EXPO.	EXPOSED
EXP.	EXPANSION
EXT.	EXTERIOR
F.A.	FIRE ALARM
F.D.	FLOOR DRAIN
F.F.	FINISH FLOOR
FDN.	FOUNDATION
F.E.	FIRE EXTINGUISHER
F.E.C.	FIRE EXTINGUISHER CABINET
FIN.	FINISH
FL.	FLOOR

FLASH.	FLASHING
FLEX.	FLEXIBLE
FT.	FOOT OR FEET
FTG.	FOOTING
FURR.	FURRING
F.R.	FIRE RATED
F.V.	FIELD VERIFY
GA.	GAGE
GALV.	GALVANIZED
G.B.	GRAB BAR
GL.	GLASS
GLAZ.	GLAZING
GND.	GROUND
GR.	GRADE
GYP.	GYPSUM
H.C.	HOLLOW CORE
H.C. PRIVATE	HANDICAPPED PRIVATE
HDWD.	HARDWOOD
H.E.W.C.	HANDICAP ELECTRIC WATER COOLER
H.M.	HOLLOW METAL
HORIZ.	HORIZONTAL
HT.	HEIGHT
H.V.A.C.	HEATING/VENTILATION/AIR CONDITIONING
I.D.	INSIDE DIAMETER
INSUL.	INSULATION
INT.	INTERIOR
JAN.	JANITOR
JST.	JOISTS
JT.	JOINTS
LAB.	LABORATORY
LAM.	LAMINATE
LAV.	LAVATORY
LEV.	LEVEL
LT.	LIGHT
L.S.D.	LIQUID SOAP DISPENSER
MACH.	MACHINE
MAX.	MAXIMUM
MECH.	MECHANICAL
MED. PREP.	MEDIAN PREPARATION
MEMB.	MEMBRANE
MET.	METAL
MFR.	MANUFACTURER
MH.	MANHOLE
MIN.	MINIMUM
MIR.	MIRROR
MISC.	MISCELLANEOUS
MTD.	MOUNTED
MUL.	MULLION
M.R.	MOISTURE RESISTANT
N.	NORTH
N.I.C.	NOT IN CONTRACT
NO. OR #	NUMBER
N.T.S.	NOT TO SCALE
OFCI	OWNER FURNISHED CONTRACTOR INSTALLED
OFOI	OWNER FURNISHED OWNER INSTALLED
O.T.O.	OUT TO OUT
O.C.	ON CENTER
O.D.	OUTSIDE DIAMETER
OFF.	OFFICE
OPER.	OPERABLE
OPNG.	OPENING
OPP.	OPPOSITE
PAT.	PATIENT
PL.	PLATE
P. LAM.	PLASTIC LAMINATE

PLAS.	PLASTER
PLYWD.	PLYWOOD
PR.	PAIR
P.T.D.	PAPER TOWEL DISPENSER
P.T.D./R.	COMBINATION PAPER TOWEL DISPENSER AND RECEPTACLE
PTN.	PARTITION
Q.T.	QUARRY TILE
R.	RISER
RAD.	RADIUS
R.D.	ROOF DRAIN
REF.	REFERENCE
RESIST.	RESISTANT
REV.	REVISION
REFR.	REFRIGERATOR
REINF.	REINFORCED/REINFORCING
REQ.	REQUIRED
RESIL.	RESILIENT
RM.	ROOM
R.O.	ROUGH OPENING
R.J.	RUSTICATION JOINT
S.	SOUTH
S.C.	SOLID CORE
SCHED.	SCHEDULE
S.D.	SOAP DISPENSER
SECT.	SECTION
SH.	SHELF
SHR.	SHOWER
SHT.	SHEET
SIM.	SIMILAR
S.N.D.	SANITARY NAPKIN DISPENSER
S.N.R.	SANITARY NAPKIN RECEPTACLE
SP.	SPACES
SPEC.	SPECIFICATION
SQ.	SQUARE
S/S	STAINLESS STEEL
S.SK.	SERVICE SINK
STA.	STATION
STD.	STANDARD
STL.	STEEL
STOR.	STORAGE
STR.	STRUCTURAL
SUPER.	SUPERINTENDANT
SUSP.	SUSPENDED
SYM.	SYMMETRICAL
T.	TOILET
T.B.	TOWEL BAR
T.C.	TOP OF CURB
TEL.	TELEPHONE
TEMP.	TEMPERED
TER.	TERRAZZO
T.& G.	TONGUE AND GROOVE
THK.	THICK
T.P.	TOP OF PAVEMENT
T.P.D.	TOILET PAPER DISPENSER
T.W.	TOP OF WALL
TYP.	TYPICAL
T.O.C.	TOP OF CONCRETE
T.O.P.	TOP OF PARAPET
T.O.S.	TOP OF STEEL
T/S	TOILET/SHOWER
UNF.	UNFINISHED
U.O.N.	UNLESS OTHERWISE NOTED
UR.	URINAL
VERT.	VERTICAL
VEST.	VESTIBULE
W.	WEST
W/	WITH
W.C.	WATER CLOSET
WD.	WOOD
W/O	WITHOUT
WSCT.	WAINSCOT
WT.	WEIGHT

Add-Alternates

ADD-ALT. #	DESCRIPTION
#1	REPLACE FAN COIL UNIT MOTORS ONLY WITH VARIABLE SPEED DRIVES
#2	REPLACE ENTIRE FAN COIL UNIT AND CONTROLS
#3	REPLACE FAN COIL UNITS IN ISOLATION ROOMS ON FLOORS 2, 4, AND 5 AND EXTEND PARTITIONS TO DECK IN ISOLATION ROOMS TO MATCH WHAT IS SHOWN ON THE THIRD FLOOR DRAWINGS
#4	REPLACE THIRD FLOOR STOREFRONT GLAZING WHERE INDICATED ON PLANS

Symbol Legend

REES SYMBOL	REES	IBC 2003	LIFE SAFETY 2000 NFPA 101
C C C C	SMOKE CONTROL PARTITION	407.3 SMOKE PARTITION, LIMITS TRANSFER OF SMOKE	12-3.6.2. SMOKE PARTITION, LIMITS TRANSFER OF SMOKE
1 1 1 1	1-HOUR WALL	708.0 & 715.5.4 FIRE PARTITION, 1-HOUR RATED	7-2.1 & NFPA 90A FIRE BARRIER, 1-HOUR RATED
2 2 2 2	2-HOUR WALL	708.0 FIRE PARTITION, 2-HOUR RATED	7-2.1 & NFPA 90A FIRE BARRIER, 2-HOUR RATED
S S S S	SMOKE PARTITION	302.1.1.1 SMOKE PARTITION, NON-RATED	6-4 SMOKE PARTITION, RESISTS PASSAGE OF SMOKE, NON-RATED
1S 1S 1S	1-HOUR SMOKE BARRIER	709.0 SMOKE BARRIER, 1-HOUR RATED	6-3 SMOKE BARRIER, 1-HOUR RATED
2S 2S 2S	2-HOUR WALL AND A SMOKE BARRIER	709.0 SMOKE BARRIER, 2-HOUR RATED AND 706.0 A FIRE PARTITION, 2-HOUR RATED	6-3 SMOKE BARRIER, 2-HOUR RATED AND 7-2.1 A FIRE BARRIER, 2-HOUR RATED
2F 2F 2F	2-HOUR FIRE WALL	705.0 FIRE WALL, 2-HOUR RATED	7-2.1 FIRE BARRIER, 2-HOUR RATED
2FS 2FS 2FS	2-HOUR FIRE WALL AND SMOKE BARRIER	705.0 FIRE WALL, 2-HOUR RATED AND A SMOKE 709.0 BARRIER, 2-HOUR RATED	7-2.1 FIRE BARRIER, 2-HOUR RATED AND 6-3 A SMOKE BARRIER, 2-HOUR RATED

Project Info.

APPLICABLE CODES

BUILDING CODE	INTERNATIONAL BUILDING CODE	2003 EDITION
LIFE SAFETY	NFPA 101	2003 EDITION
ACCESSIBILITY	ADA TITLE II & ICC/ANSI A117.1	1998 EDITION
MECHANICAL CODE	INTERNATIONAL MECHANICAL CODE	2003 EDITION
PLUMBING CODE	INTERNATIONAL PLUMBING CODE	2003 EDITION
ELECTRICAL CODE	NATIONAL ELECTRICAL CODE NFPA 70	2008 EDITION
FIRE CODE	NATIONAL FIRE CODE	2003 EDITION
SPRINKLER CODE	NFPA 13	2002 EDITION

OCCUPANCY CLASSIFICATION & BUILDING TYPE

BUILDING CODE
USE GROUP: I-2 INSTITUTIONAL

FIRE PROTECTION - FULLY SPRINKLED

BUILDING SQUARE FOOTAGES: RENOVATION - 14,000 G.S.F.

LIFE SAFETY
USE GROUP: HEALTH CARE OCCUPANCY, HOSPITAL

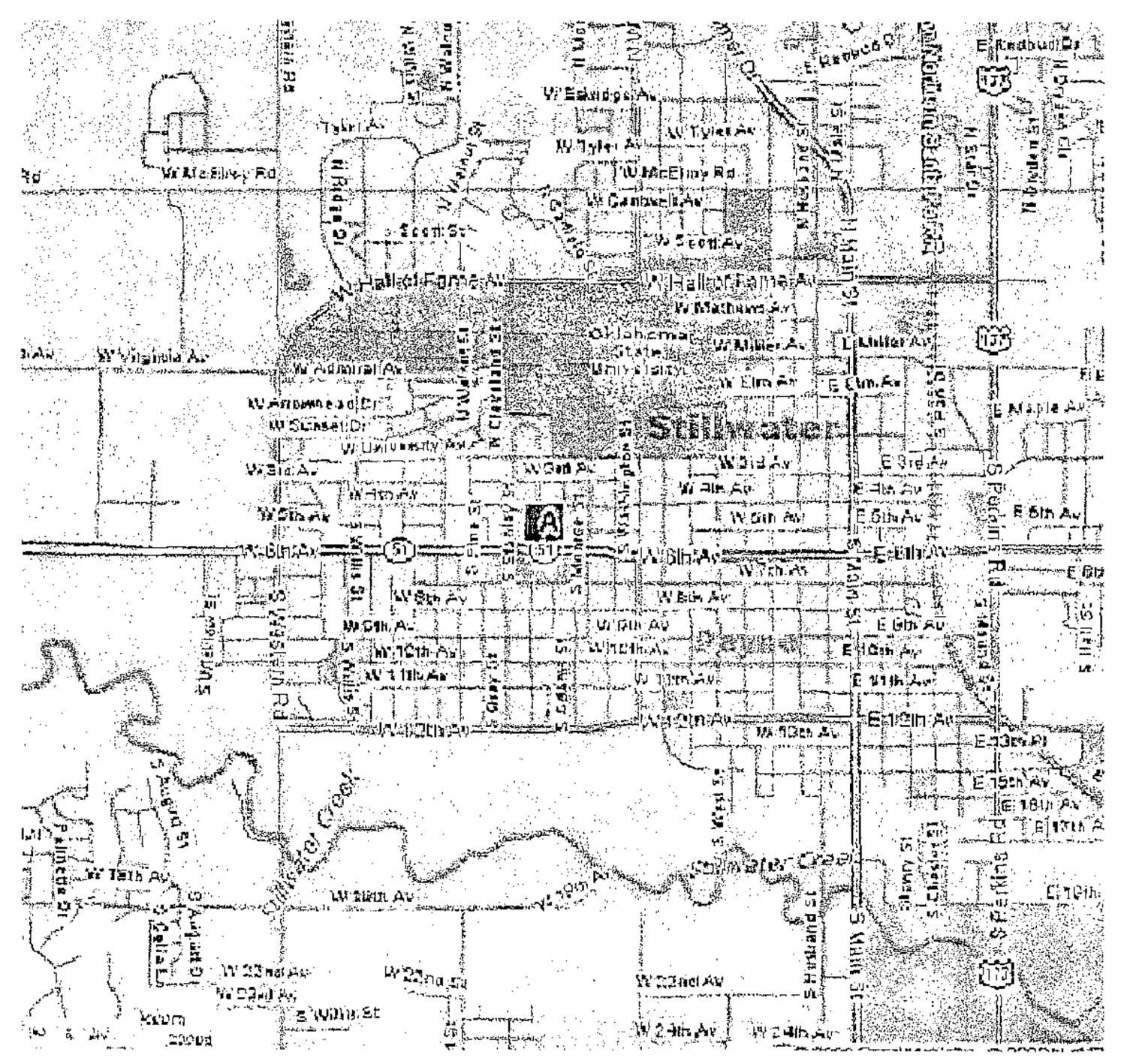
CONSTRUCTION TYPE

IBC - TYPE IB
NFPA 101 - TYPE I (000)
FULLY SPRINKLERED

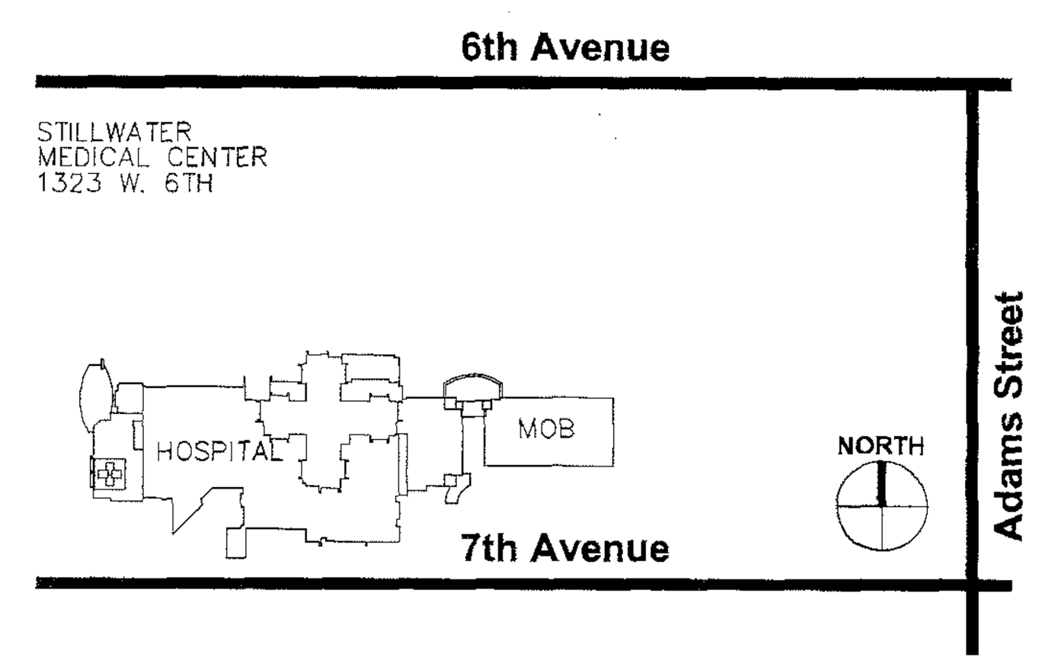
PARKING REQUIREMENTS

NO NEW PARKING REQUIRED.

Vicinity Map



Enlarged Map



Section/Detail Mark

- DIRECTION OF VIEW
- SECTION NUMBER
- SHT. NO. ON WHICH SECTION IS DETAILED
- PLAN, ELEVATION, OR DETAIL NUMBER
- SHT. NO. WHERE DETAIL IS REFERENCED FROM
- DETAIL NUMBER

NUMBERING SYSTEM FOR DETAILS

100's - ARCHITECTURAL SITE WORK & LANDSCAPE DETAILS
200's - WALL SECTION DETAILS
300's - PLAN DETAILS
400's - WINDOW & EXTERIOR LOUVER DETAILS
500's - DOOR DETAILS
600's - BORROWED LIGHT DETAILS
700's - STAIR, LADDER, ELEVATOR & ROOF DETAILS
800's - REFLECTED CEILING DETAILS
900's - MILLWORK SECTIONS/DETAILS & INTERIOR FINISHES DETAILS
1000's - EQUIPMENT & MISC. DETAILS

Material Legend

EARTH
SAND
CONCRETE
STEEL
GYP. BOARD
WOOD
WOOD BLOCKING
PLYWOOD
GYP. SHEATHING
BATT INSUL.
PLASTER
ACOUSTICAL TILE
RIGID INSUL.
GRAVEL
BRICK UNITS
MOLDED PLASTIC
CONC. MASONRY

Symbol Legend

00	WINDOW TYPE
101A	DOOR NUMBER
101	ROOM NUMBER
900	MILLWORK ELEVATION
T00	TOILET ACCESSORIES
1000	EQUIPMENT NUMBER
00	PARTITION TYPE
	ELEVATION
	TEST BORING
	CEILING DETAIL

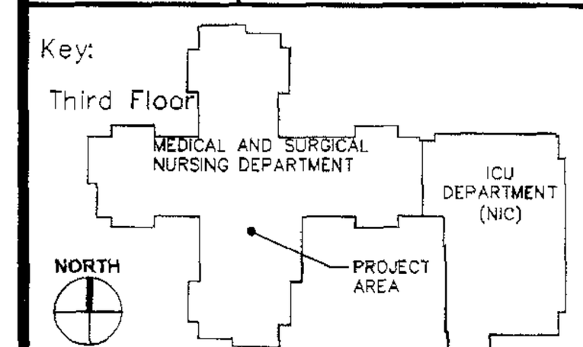
Sheet Index

STILLWATER MEDICAL CENTER
Stillwater, Oklahoma
3rd FLOOR RENOVATION

No. | Date
Revisions

Project No. 10724.00
Drawn TAR BSL
Checked MLC KWP
Approved MLC

STATE OF OKLAHOMA Melanie Compton a388 Oklahoma City Oklahoma LICENSED ARCHITECT
Melanie Compton 2.3.11
Architect
Engineer

Key:


CONSTRUCTION DOCUMENTS

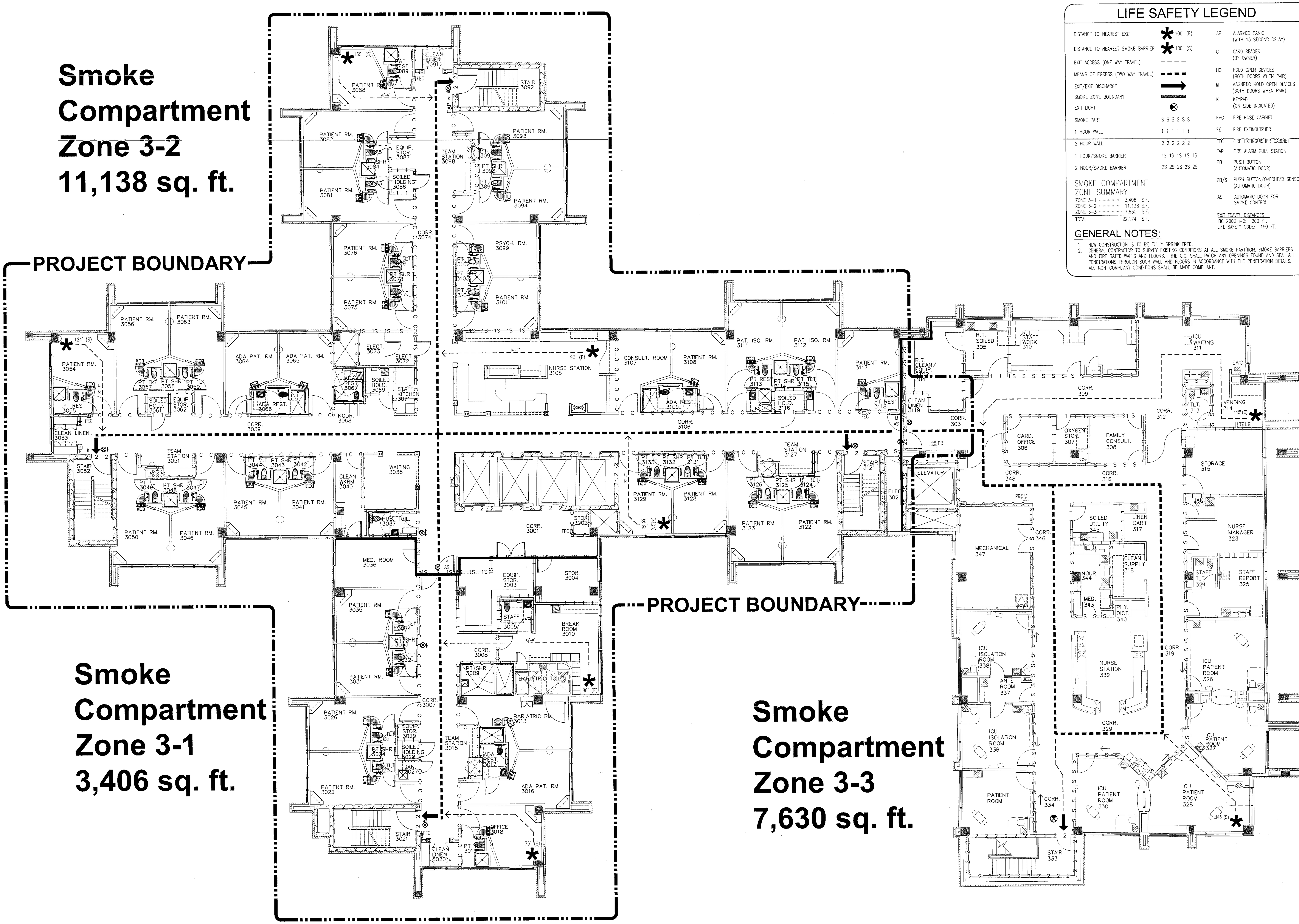
Title:
SHEET INDEX - LEGENDS - SYMBOLS - ABBREVIATIONS

Scale: As Noted on Sheet

Drawing No.
G-001

Issue Date
02-03-2011

4



1 THIRD FLOOR LIFE-SAFETY PLAN
1/8" = 1'-0"

LIFE SAFETY LEGEND

DISTANCE TO NEAREST EXIT	* 100' (E)	AP	ALARMED PANIC (WITH 15 SECOND DELAY)
DISTANCE TO NEAREST SMOKE BARRIER	* 100' (S)	C	CARD READER (BY OWNER)
EXIT ACCESS (ONE WAY TRAVEL)	- - - -	HO	HOLD OPEN DEVICES (BOTH DOORS WHEN PAIR)
MEANS OF EGRESS (TWO WAY TRAVEL)	■ ■ ■ ■	M	MAGNETIC HOLD OPEN DEVICES (BOTH DOORS WHEN PAIR)
EXIT/EXIT DISCHARGE	➡	K	KEYPAD (ON SIDE INDICATED)
SMOKE ZONE BOUNDARY	▨	FHC	FIRE HOSE CABINET
EXIT LIGHT	⊗	FE	FIRE EXTINGUISHER
SMOKE PART	S S S S S S	FEC	FIRE EXTINGUISHER CABINET
1 HOUR WALL	1 1 1 1 1 1	FAP	FIRE ALARM PULL STATION
2 HOUR WALL	2 2 2 2 2 2	PB	PUSH BUTTON (AUTOMATIC DOOR)
1 HOUR/SMOKE BARRIER	1S 1S 1S 1S 1S	PB/S	PUSH BUTTON/OVERHEAD SENSOR (AUTOMATIC DOOR)
2 HOUR/SMOKE BARRIER	2S 2S 2S 2S 2S	AS	AUTOMATIC DOOR FOR SMOKE CONTROL

SMOKE COMPARTMENT ZONE SUMMARY

ZONE 3-1	3,406 S.F.
ZONE 3-2	11,138 S.F.
ZONE 3-3	7,630 S.F.
TOTAL	22,174 S.F.

EXIT TRAVEL DISTANCES
IBC 2003 I-2: 200 FT.
LIFE SAFETY CODE: 150 FT.

GENERAL NOTES:

1. NEW CONSTRUCTION IS TO BE FULLY SPRINKLERED.
2. GENERAL CONTRACTOR TO SURVEY EXISTING CONDITIONS AT ALL SMOKE PARTITION, SMOKE BARRIERS AND FIRE RATED WALLS AND FLOORS. THE G.C. SHALL PATCH ANY OPENINGS FOUND AND SEAL ALL PENETRATIONS THROUGH SUCH WALL AND FLOORS IN ACCORDANCE WITH THE PENETRATION DETAILS. ALL NON-COMPLIANT CONDITIONS SHALL BE MADE COMPLIANT.

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Stillwater, Oklahoma
3rd FLOOR RENOVATION

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STATE OF OKLAHOMA Melanie Compton a388 Oklahoma City Oklahoma LICENSED ARCHITECT
[illegible] 2.3.11
Architect
Checked MLC [illegible]
Approved MLC
Engineer

Key:
Third Floor
MEDICAL AND SURGICAL NURSING DEPARTMENT
ICU DEPARTMENT (NIC)
NORTH
PROJECT AREA

CONSTRUCTION DOCUMENTS

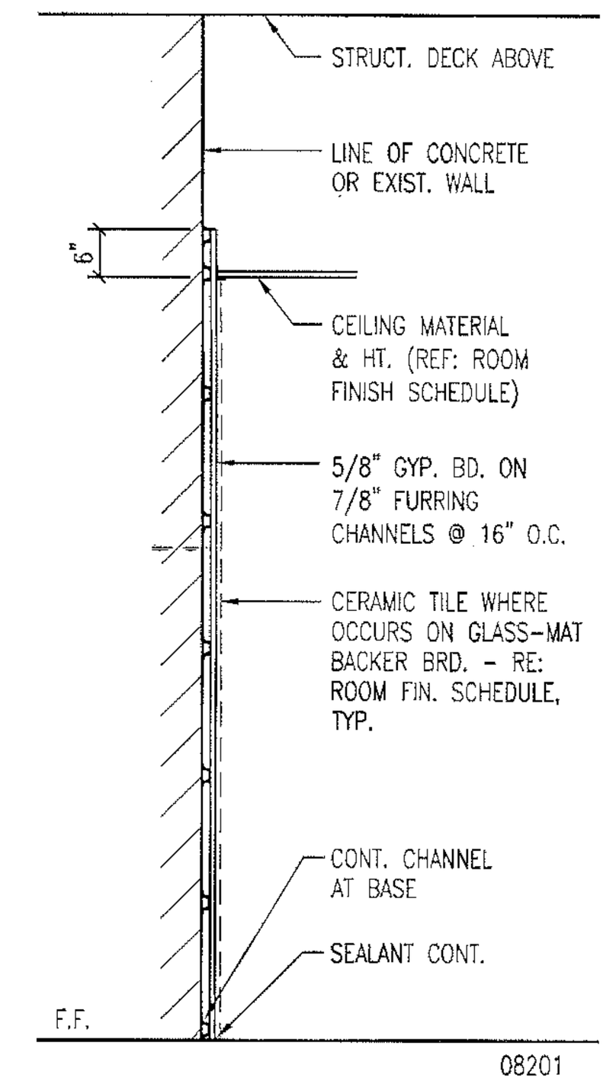
Title:
THIRD FLOOR LIFE-SAFETY & REFERENCE PLAN

Scale: As Noted on Sheet

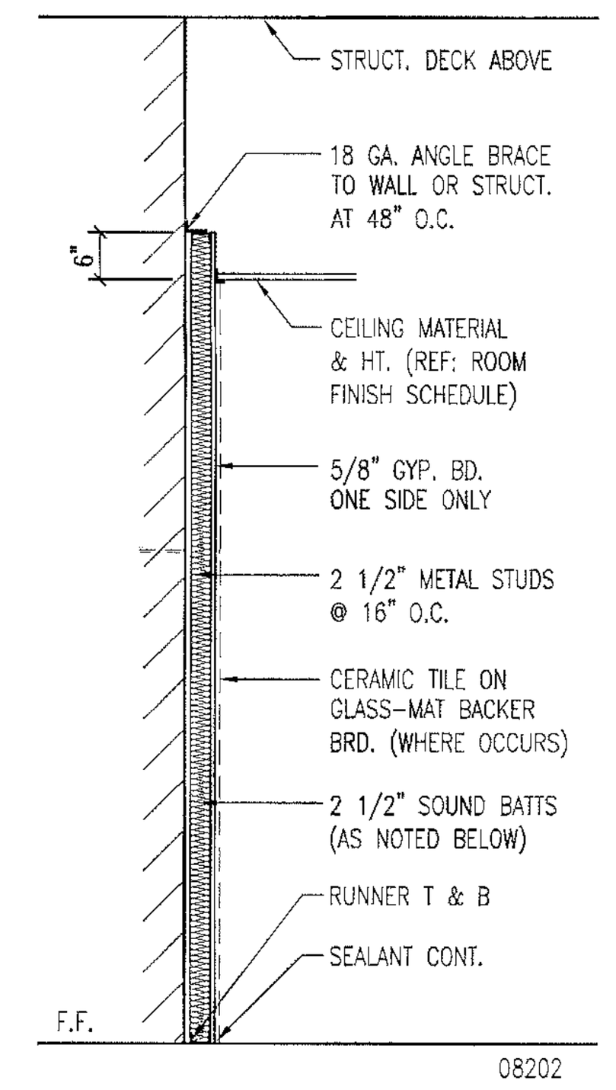
Drawing No.
G-002

Issue Date
02-03-2011

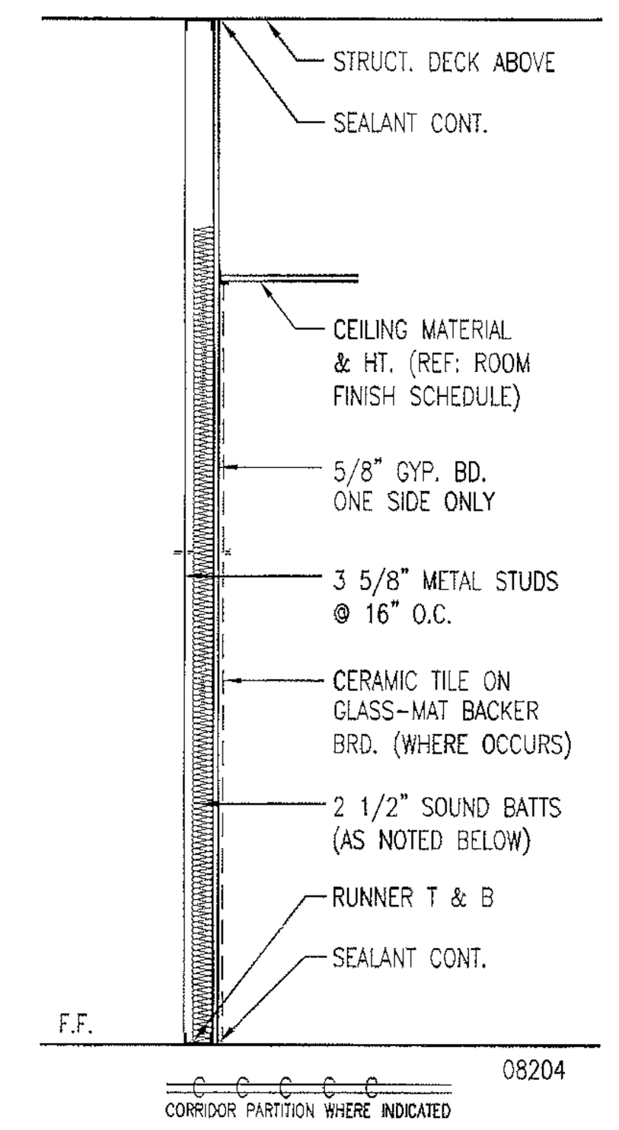
PARTITION TYPES



A 7/8" FURRING CHANNEL OR CORRIDOR PARTITION

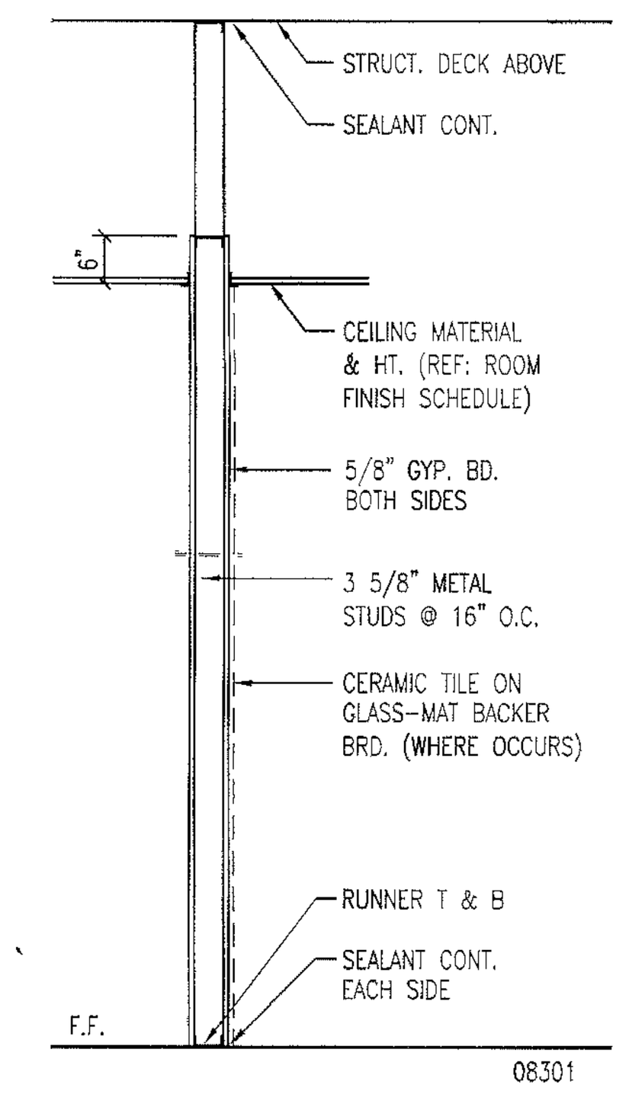


B 2 1/2" METAL STUD FURRED OR CORRIDOR PART. WITH SOUND BATTS TO 6" ABOVE CEILING

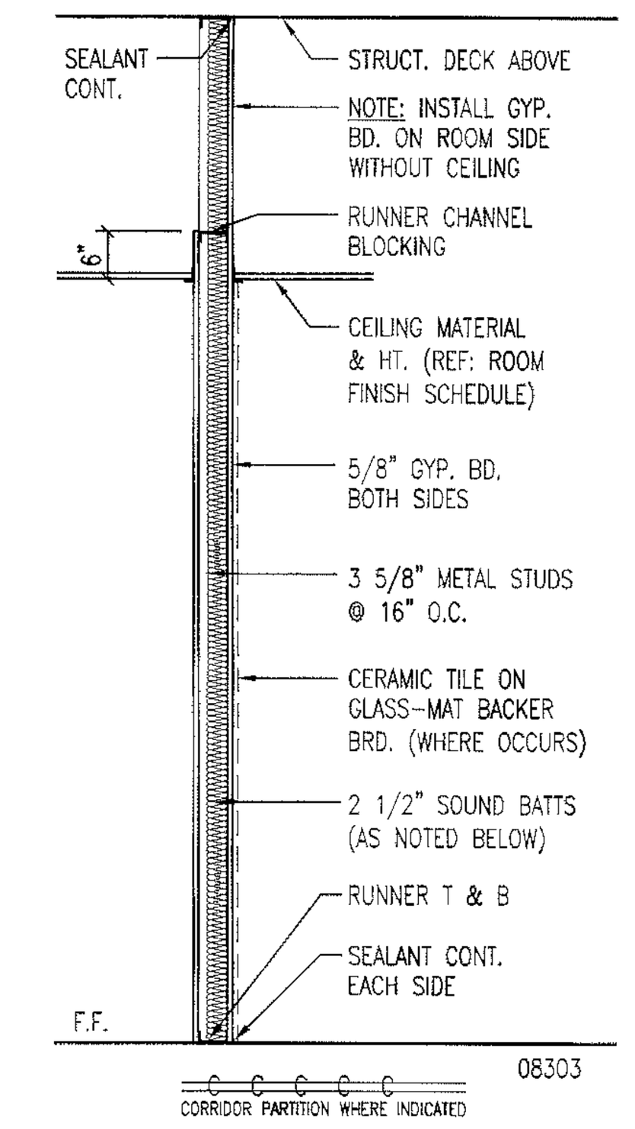


C 3 5/8" METAL STUD FURRED, CORRIDOR OR SMOKE PART. WITHOUT SOUND BATTS

C1 SAME AS C EXCEPT WITH SOUND BATTS TO 6" ABOVE CEILING



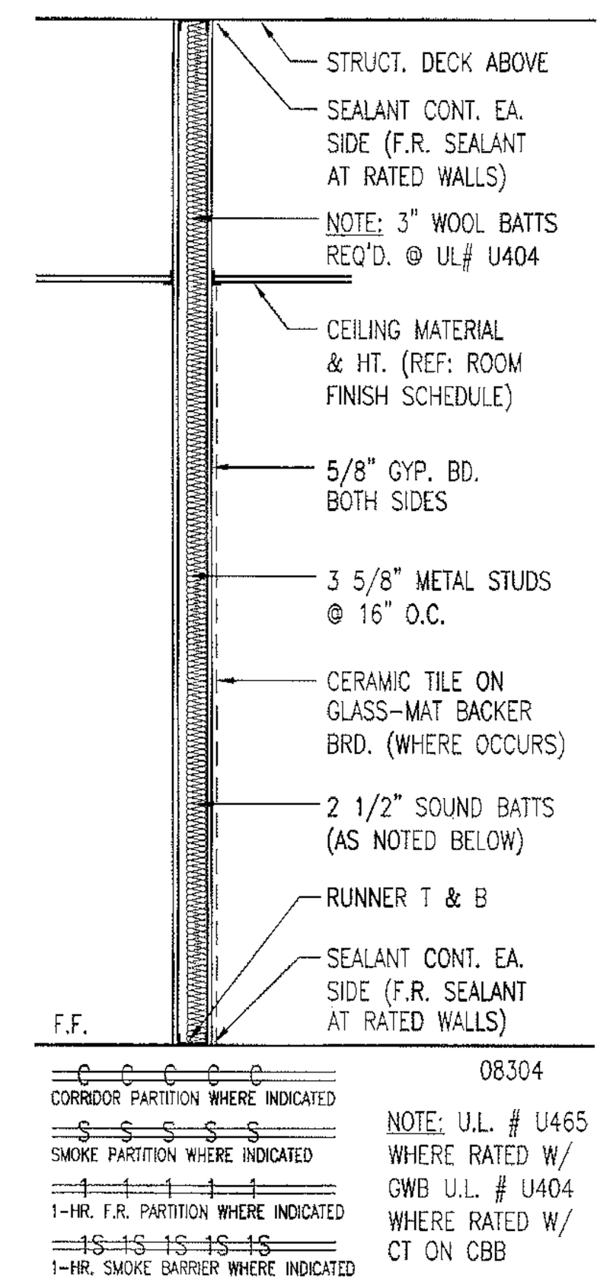
D 3 5/8" METAL STUD OR CORRIDOR PARTITION WITHOUT SOUND BATTS



E 3 5/8" METAL STUD, SOUND, CORRIDOR OR SMOKE PART. WITHOUT SOUND BATTS

E1 SAME AS E EXCEPT WITH SOUND BATTS TO 6" ABOVE CEILING

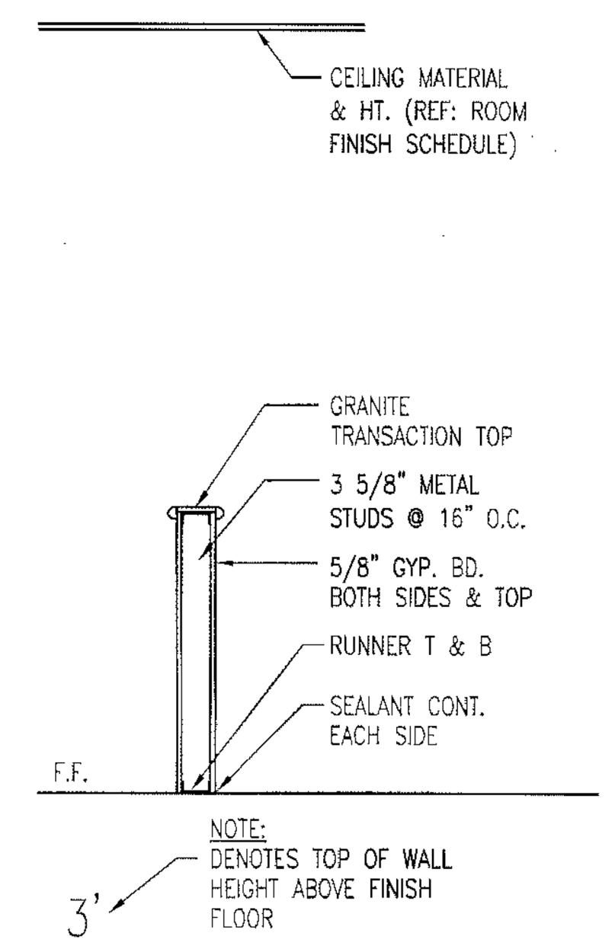
E2 SAME AS E EXCEPT WITH SOUND BATTS FULL HEIGHT



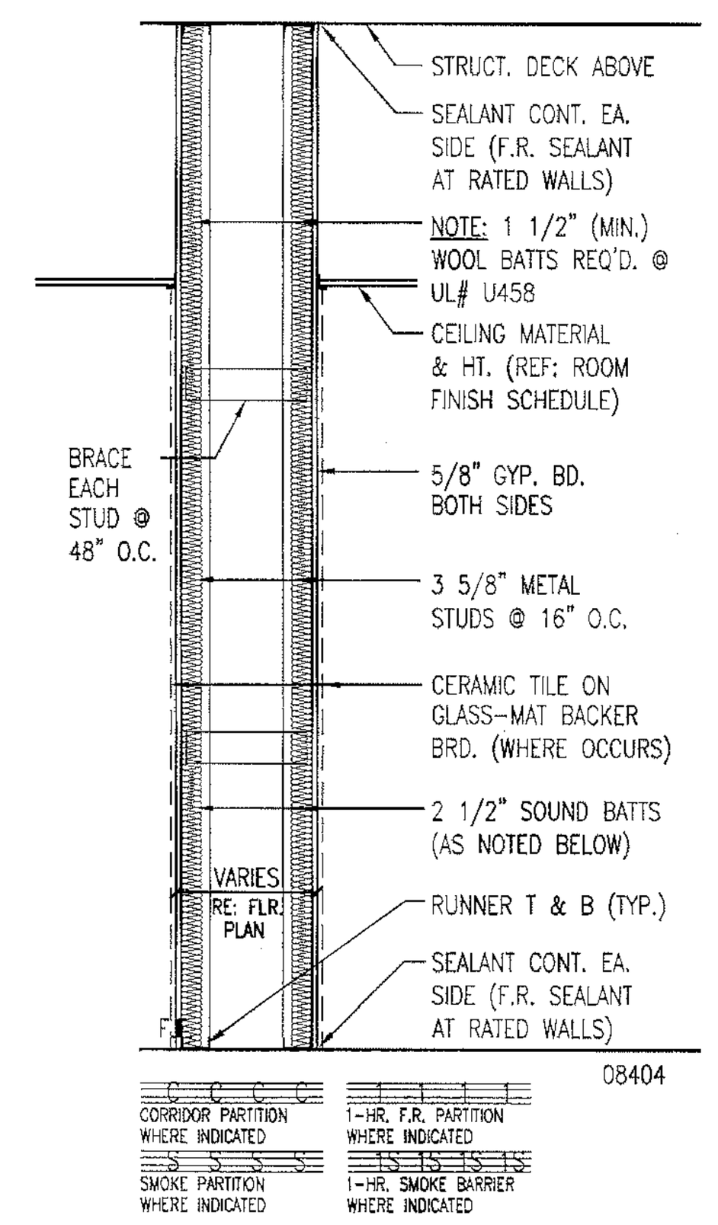
F 3 5/8" METAL STUD, SOUND, CORR., SMOKE OR 1-HR. RATED PARTITION WITHOUT SOUND BATTS

F1 SAME AS F EXCEPT WITH SOUND BATTS TO 6" ABOVE CEILING

F2 SAME AS F EXCEPT WITH SOUND OR WOOL BATTS FULL HEIGHT



G 3 5/8" METAL STUD WITHOUT SOUND BATTS

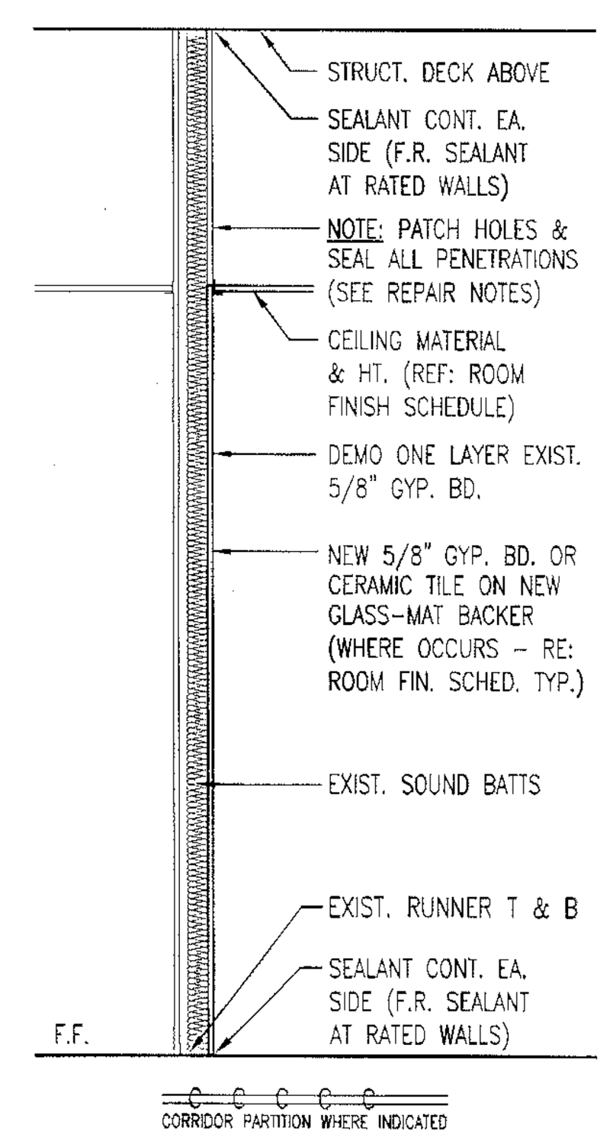


H TOILET, CORRIDOR, SMOKE OR 1-HR. RATED PARTITION WITHOUT SOUND BATTS

H1 SAME AS M EXCEPT WITH SOUND BATTS TO 6" ABOVE CEILING

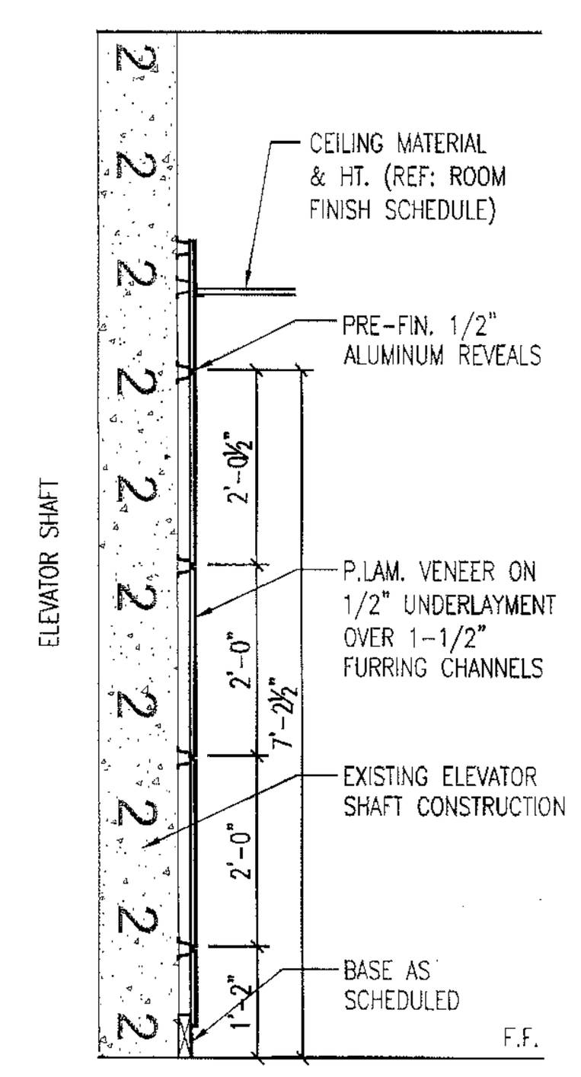
H2 SAME AS M EXCEPT WITH SOUND OR WOOL BATTS FULL HEIGHT

NOTE: U.L. # U420 WHERE RATED W/ GWB
U.L. # U458 WHERE RATED W/ CT ON CBB

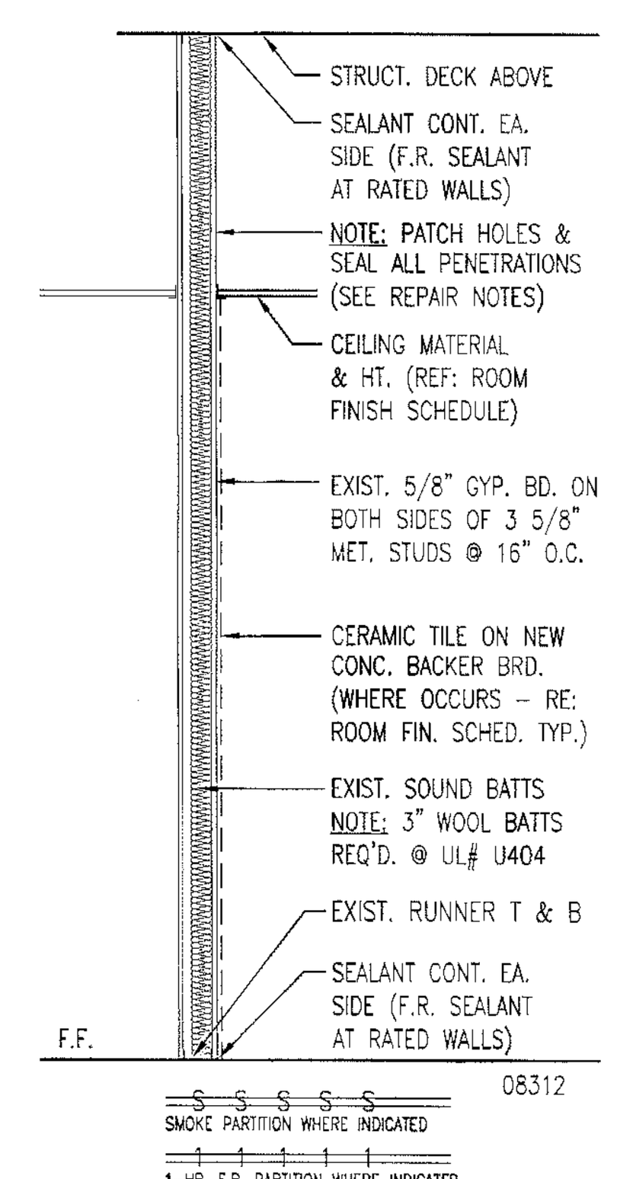


J EXISTING METAL STUD PARTITION - REVISE AS REQUIRED (SEE REVISION NOTES). REMOVE ROOM SIDE LAYER OF GYP. BD. AND REPLACE AS NOTED.

J1 SAME AS J EXCEPT EXTEND PARTITION TO DECK AS SHOWN ABOVE



K EXISTING METAL STUD SHAFT PARTITION WITH SURFACE TREATMENT



R EXISTING METAL STUD, SOUND, CORR., SMOKE OR 1-HOUR RATED PARTITION - REPAIR AS REQUIRED. (SEE REPAIR NOTES).

R1 EXISTING METAL STUD, SOUND, CORR., SMOKE OR 1-HOUR RATED PARTITION - EXTEND TO DECK.

NOTE: U.L. # U465 WHERE RATED W/ GWB
U.L. # U404 WHERE RATED W/ CT ON CBB

GENERAL NOTES:

1. PARTITION TYPES ARE STANDARD AND NOT ALL MAY BE USED FOR THIS PROJECT.
2. REFER FLOOR PLANS FOR WHERE CORRIDOR, SMOKE, 1-HOUR, 2-HOUR & RATED SMOKE BARRIER PARTITION TYPES ARE INDICATED.
3. CONSTRUCT CORRIDOR PARTITIONS SO THAT COMBINATION OF CORRIDOR WALLS AND CORR. CEILING LIMITS THE TRANSFER OF SMOKE. CONSTRUCT SMOKE PARTITIONS SO THAT WALLS ONLY LIMIT THE TRANSFER OF SMOKE.
4. ALL GYP. BOARD TO BE FIRE-RATED. CONSTRUCT FIRE-RATED PARTITIONS IN FULL ACCORDANCE W/ U.L. NUMBERS INDICATED.
5. REMOVE EXISTING ROOF INSULATION BELOW ROOF DECK AS REQUIRED FOR INSTALLATION OF NEW WALLS TO STRUCTURE. REPAIR AND REPLACE INSULATION AS NECESSARY TO PREVENT THERMAL LEAKAGE.

REPAIR NOTES:

1. CONTRACTOR TO FIELD VERIFY EXISTING CONDITIONS & UPGRADE EXISTING PARTITION AS REQ'D. TO ACHIEVE FIRE-RATED, SMOKE-TIGHT, OR SOUND- TIGHT WALL CONSTRUCTION AS INDICATED. PATCH ALL HOLES IN GYP. BD., SEAL ALL PENETRATIONS & MEET ALL OTHER U.L. REQUIREMENTS.
2. CONTRACTOR MAY UTILIZE EXISTING STUDS AT FIRE-RATED PARTITIONS ONLY IF STUDS ARE CONT. FROM FLOOR TO DECK.
3. CONTRACTOR TO REMOVE & REPLACE ADJACENT CEILING(S) AS REQUIRED FOR INSPECTION & INSTALLATION OF PARTITION.

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3rd FLOOR RENOVATION

No.		Date

Revisions

Project No. 10724.00

Drawn DAN BSL

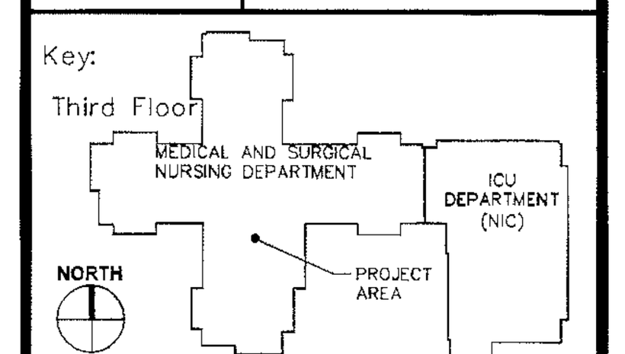
STATE OF OKLAHOMA Melanie Compton Oklahoma City Oklahoma LICENSED ARCHITECT
Melanie Compton 2.3.11
Architect

Checked MLC KWP

Approved MLC

Engineer

Key:
Third Floor



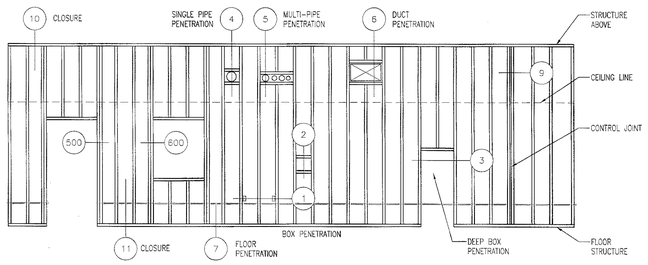
CONSTRUCTION DOCUMENTS

Title:
PARTITION TYPES

Scale: As Noted on Sheet

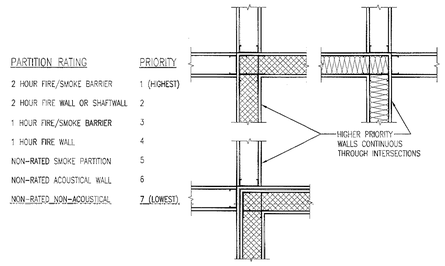
Drawing No.
G-003

Issue Date
02-03-2011



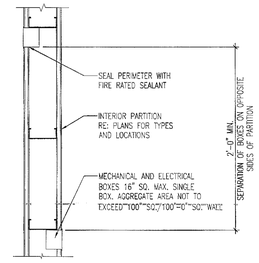
FIRE RATED PARTITION DETAIL REFERENCE ELEVATION

1/4" = 1'-0"



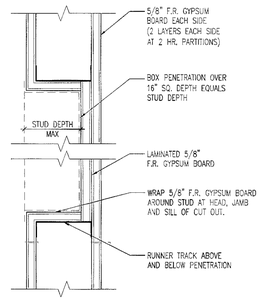
TYPICAL WALL PRIORITIES LEGEND

1" = 1'-0"



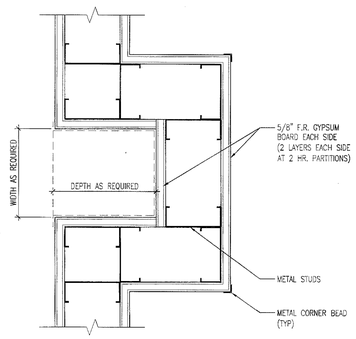
1 BOX PENETRATION DETAIL

1 1/2" = 1'-0" UL# - U425



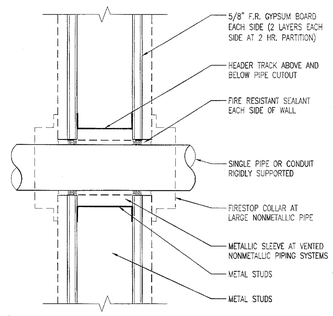
2 SHALLOW BOX PENETRATION

3" = 1'-0" UL# - U425



3 DEEP BOX PENETRATION

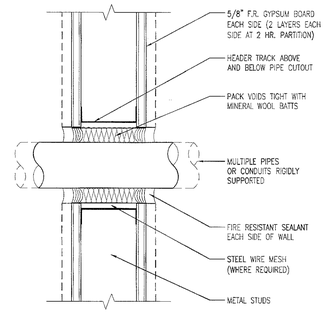
3" = 1'-0" UL# - U425



UL# - WL2128
UL# - WL2078
UL# - WL1085
UL# - WL2098

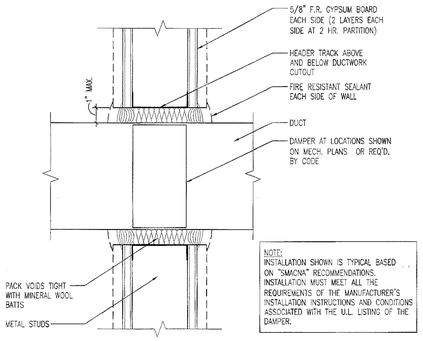
4 SINGLE PIPE PENETRATION

3" = 1'-0"



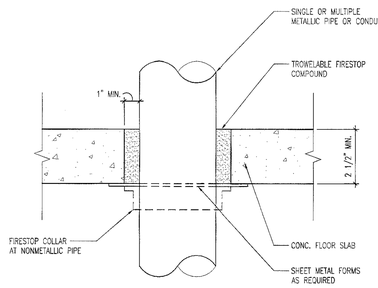
5 MULTIPLE PIPE PENETRATION

3" = 1'-0" UL# - WL8004
UL# - WL1057



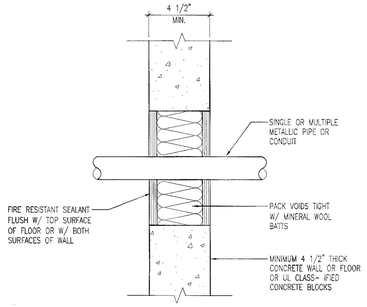
6 DUCT PENETRATION DETAIL

3" = 1'-0" UL# - WL7007



7 PIPE PENETRATION DETAIL

3" = 1'-0" UL# - CAJ1140
UL# - FA2025



8 PIPE PENETRATION DETAIL

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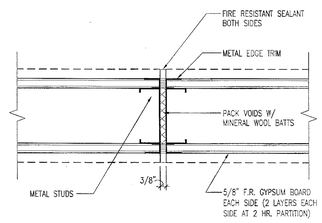
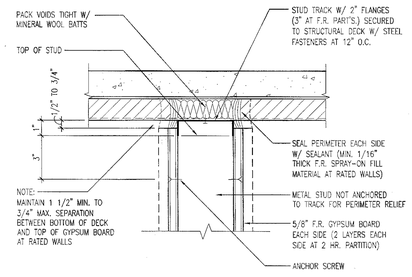
UL# - CAJ8041



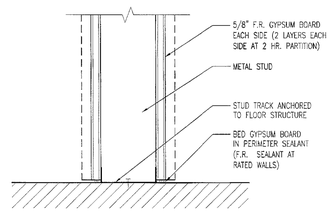
9 WALL CONTROL JOINT

3" = 1'-0" UL# - WWS0003



10 CLOSURE DETAIL

3" = 1'-0" UL# - HWD0101



11 CLOSURE DETAIL

3" = 1'-0" 1-HR.-UL# - U425
2-HR.-UL# - U411

NOTE:

1. PENETRATION DETAILS 1 THROUGH 9 ARE FOR CONDUIT, PIPE, DUCT, ETC. PENETRATIONS THROUGH FIRE RATED PARTITIONS AND ARE GENERIC IN NATURE. THE CONTRACTOR IS REQUIRED TO SUBMIT FOR APPROVAL, TO THE ARCHITECT, DETAILS SPECIFIC TO THE SEALANT AND FIRE-PROOFING MATERIAL MANUFACTURER'S TESTED AND APPROVED SYSTEMS INCLUDING SPECIFIC TEST DATA.
2. CLOSURE DETAILS 10 AND 11 ARE TYPICAL FOR ALL FULL-HEIGHT RATED AND NON-RATED PARTITIONS (REFER PARTITION TYPES).
3. DETAILS AND U.L. DESIGN NUMBERS SHOWN ARE REPRESENTATIVE OF THE MOST TYPICAL CONDITIONS ONLY AND OTHER ASSEMBLIES MAY BE REQUIRED. IT SHALL BE THE CONTRACTOR'S RESPONSIBILITY TO SELECT, SUBMIT AND INSTALL U.L. DESIGNS THAT ARE APPROPRIATE FOR ANY GIVEN CONDITION TO ACHIEVE THE REQUIRED FIRE-RESISTANCE RATING.

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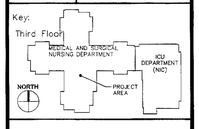
STILLWATER MEDICAL CENTER
Stillwater, Oklahoma
3rd FLOOR RENOVATION

No. | Date
Revisions

Project No. 10724.00
Drawn DAR BSL
Checked MLC KWP
Approved MLC
Architect
Engineer

Key:
Third Floor



CONSTRUCTION DOCUMENTS

Title:
PENETRATION DETAILS

Scale: As Noted on Sheet

Drawing No.
G-004

Issue Date
02-03-2011

Construction and Renovation Plan

ICRA and ILSM Requirements

Note: Upon completion of and approval of this document by the ICRA team, Contractor shall remove from drawings and post at the primary entrance(s) to the Construction environment.

REES ASSOCIATES INC
ARCHITECTURE PLANNING INTERIORS
REES PLAZA AT EAST WHARF
9211 LAKE HEFNER PARKWAY, SUITE 300
OKLAHOMA CITY, OKLAHOMA 73120
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Infection Control Risk Assessment Matrix of Precautions for Construction & Renovation

Project Name: **3rd Floor**

Step One:

Using the following, *identify* the Type of Construction Project Activity (Type A-D)
TYPE A Inspection and Non-Invasive Activities.
Includes, but is not limited to:
- removal of ceiling tiles for visual inspection limited to 1 tile per 50 square feet
- painting (but not sanding)
- wall covering, electrical trim work, minor plumbing, and activities which do not generate dust or require cutting of walls or access to ceilings other than for visual inspection.

TYPE B Small scale, short duration activities which create minimal dust
Includes, but is not limited to:
- installation of telephone and computer cabling
- access to chase spaces
- cutting of walls or ceiling where dust migration can be controlled.

TYPE C Work that generates a moderate to high level of dust or requires demolition or removal of any fixed building components or assemblies
Includes, but is not limited to:
- sanding of walls for painting or wall covering
- removal of floor coverings, ceiling tiles and casework
- new wall construction
- minor duct work or electrical work above ceilings
- major cabling activities
- any activity which cannot be completed within a single workshift.

TYPE D Major demolition and construction projects
Includes, but is not limited to:
- activities which require consecutive work shifts
- requires heavy demolition or removal of a complete cabling system
- new construction.

STEP 1: **Type D**

Step Two:

Using the following, identify the Patient Risk Groups that will be affected.
If more than one risk group will be affected, select the higher risk group:
Low Risk Medium Risk High Risk Highest Risk
- Office areas

Medium Risk
- Echocardiography
- Endoscopy
- Nuclear Medicine
- Physical Therapy
- Radiology/MRI
- Respiratory Therapy

High Risk
- Emergency Room
- Labor & Delivery
- Laboratories
- Newborn Nursery
- Outpatient Surgery
- 3rd Floor Medical/Pediatrics
- Pharmacy
- Post Anesthesia Care Unit
- 5th Floor Surgical
- SNF/Rehab Care

Highest Risk
- Any area caring for immunocompromised patients
- Cardiac Cath Lab
- Central Sterile Supply
- Intensive Care Units
- Isolation rooms
- Operating rooms including C-section rooms

Step 2: **High Risk**

Step Three:

***Match* the Patient Risk Group (*Low, Medium, High, Highest*)** with the planned Construction Project Type (*A, B, C, D*) on the following matrix, to find the …
Class of Precautions (*I, II, III or IV*) or level of infection control activities required.

Construction Project Type

Patient Risk Group	Type A	Type B	Type C	Type D
Low Risk	I	II	II	III/IV
Medium Risk	I	II	III	IV
High Risk	I	II	III/IV	IV
Highest Risk	II	III/IV	III/IV	IV

Step 3: **IV**

Description of Required Infection Control Precautions by Class

	During Construction Project	Upon Completion of Project
CLASS I	1. Execute work by methods to minimize raising dust from construction operations 2. Immediately replace all ceiling tile displaced for visual inspection	
CLASS II	1. Provide active means to prevent airborne dust from dispersing into atmosphere. 2. Water mist work surfaces to control dust while cutting. 3. Seal unused doors with duct tape. 4. Block off and seal air vents. 5. Place dust mat at entrance and exit of work area. 6. Contain construction waste before transport in tightly covered containers.	1. Wipe work surfaces with disinfectant. 2. Wet mop and/or vacuum with HEPA filtered vacuum before leaving work area. 3. Remove isolation of HVAC system in areas where work is being performed.
CLASS III	1. Obtain infection control permit before construction begins. 2. Remove or Isolate HVAC system in area where work is being done to prevent contamination of duct system. 3. Complete all critical barriers i.e. sheet rock, plywood, plastic, to seal area from non work before construction begins. 4. Maintain negative air pressure within work site utilizing HEPA equipped air filtration units. 5. Contain construction waste before transport in tightly covered containers. 6. Place dust mat at entrance and exit of work area.	1. Do not remove barriers from work area until completed project is inspected by the Safety Department and Infection Control Department and thoroughly cleaned Environmental Services Dept. 2. Remove barrier materials carefully to minimize spreading of dirt and debris associated with construction. 3. Vacuum work area with HEPA filtered vacuums. 4. Wet mop area with disinfectant. 5. Remove isolation of HVAC system in areas where work is being performed.
CLASS IV	1. Obtain infection control permit before construction begins. 2. Isolate HVAC system in area where work is being done to prevent contamination of duct system. 3. Complete all critical barriers i.e. sheet rock, plywood, plastic, to seal area from non work before construction begins. 4. Maintain negative air pressure within work site utilizing HEPA equipped air filtration units. 5. Seal holes, pipes, conduits, and punctures appropriately. 6. Construct anteroom with dust mats and require all personnel to pass through this room. One dust mat should be wetted and the other dry. Require all personnel to wipe shoes on mats before leaving anteroom. Or they can wear cloth or paper coveralls that are removed each time they leave the work site. 7. Contain construction waste before transport in tightly covered containers	1. Do not remove barriers from work area until completed project is inspected by the Safety Department and Infection Control Department and thoroughly cleaned by Environmental Services Dept. 2. Remove barrier material carefully to minimize spreading of dirt and debris associated with construction. 3. Vacuum work area with HEPA filtered vacuums. 4. Wet mop area with disinfectant. 5. Remove isolation of HVAC system in areas where work is being performed.

Step Four: Identify the areas surrounding the project area, assessing the potential impact.

Unit Below	Unit Above	Lateral	Lateral	Behind	Front
Offices, Post-Partum	Rehab	ICU	NA	NA	NA
Risk Group-High	Risk Group-High	Risk Group-Highest	Risk Group	Risk Group	Risk Group

Will have minimal impact on offices, post-partum and Rehab. Greatest impact will be on ICU in that access to ICU will have to be via elevator. Access from 3rd floor area will be closed during remodel of 3rd floor east wing .

Step Five: Identify specific site of activity, e.g. Patient rooms, medication room, etc.

All areas on medical/surgical unit to include patient rooms, bathrooms, nurse stations, clean utility, soiled utility and other staff support areas.

Step Six: Identify issues related to: ventilation, plumbing, electrical in terms of probably outages.

Each wing will be isolated during remodel of that specific wing which will provide complete isolation of that wing from other occupied areas. Therefore ventilation, plumbing electrical, etc., issues will be minimal to other areas.

Step Seven: Identify containment measure, using prior assessment. What types of barriers? Will HEPA filtration be required?

HVAC system will be isolated in area where work is being performed. Negative pressure within work site utilizing HEPA air filtration units. Constructing of anteroom with dust mats at entrance. Construct smoke, dust tight barriers between area under construction and occupied spaces.

Step Eight: Consider potential risk of water damage. Is there a risk due to compromising structural integrity?

Minimal water damage risk. No structural integrity risk.

Step Nine: Works hours: Can or will the work be done during non-patient care hours?

Most of the work will be performed during normal working hours.

Step Ten: Do plans allow for adequate number of isolation/negative airflow rooms?

Yes.

Step Eleven: Do the plans allow for the required number & type of hand washing sinks?

Yes.

Step Twelve: Complete Infection Control Construction Permit that designates type of control measures required.

Completed.

Completed by

Steven Taylor 8/16/07
Safety Officer Date

Necia Kimber 8/16/07
Infection Control Nurse Date

Infection Control Construction Permit

Location of Project: Third Floor Renovation			Project Start Date		
Project Manager:			Estimated Duration:		
Yes	No	Construction Activity	Yes	No	Infection Control Group
		Type A: Inspection, non-invasive activity			Group 1: Low Risk
		Type B: Small scale, short duration, moderate to high levels			Group 2: Medium Risk
		Type C: Activity generates moderate to high levels of dust, requires greater than 1 work shift for completion.	X		Group 3: High Risk
X		Type D: Major duration and construction activities requiring consecutive work shifts.			Group 4: Highest Risk

Class of Precautions Required for this Project: Class IV
See below for class details.

	During Construction Project	Upon Completion of Project
CLASS I	1. Execute work by methods to minimize raising dust from construction operations 2. Immediately replace all ceiling tile displaced for visual inspection	
CLASS II	1. Provide active means to prevent airborne dust from dispersing into atmosphere. 2. Water mist work surfaces to control dust while cutting. 3. Seal unused doors with duct tape. 4. Block off and seal air vents. 5. Place dust mat at entrance and exit of work area. 6. Contain construction waste before transport in tightly covered containers.	1. Wipe work surfaces with disinfectant. 2. Wet mop and/or vacuum with HEPA filtered vacuum before leaving work area. 3. Remove isolation of HVAC system in areas where work is being performed.
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Additional Requirements:	
Exceptions/Additions to this Permit:	
Safety Officer Approval: Steven Taylor	Date:
Infection Control Approval: Necia Kimber	Date:

CONTRACTOR SAFETY AND HEALTH REQUIREMENTS

This policy has been prepared for the purpose of communicating safe work practices to contractor personnel working on Stillwater Medical Center properties. Stillwater Medical Center believes that accidents are preventable and an accident free environment is achievable. The contractor is responsible for conveying this and pertinent safety information to their employees.

INTERIM LIFE SAFETY MEASURES

Interim Life Safety Measures will be initiated and documented during all construction projects and all other times when a situation exists which creates a deficiency in our existing Life Safety Codes and procedures. All contractors are responsible for complying with Interim Life Safety Measures. Interim Life Safety Measures are as follows:

1. Ensure exits remain free and unobstructed in and around the construction site. Temporary exit signs in place as needed.
2. Ensure access to the Emergency Department remains free and unobstructed.
3. Ensure fire alarm, detection and supervision systems are not impaired. A temporary and equivalent system must be provided when any fire system is impaired. The temporary system must be inspected and tested monthly.
   - A. The contractor will notify the Stillwater Medical Center Director of Facilities Management or Safety Officer when an existing fire detection or fire suppression system must be disconnected or disabled, relocated or extended. The contractor must notify the Stillwater Medical Center Safety Officer at least 48 hours in advance of requiring any fire detection or fire suppression system to be taken out of service.
   - B. No fire detection or fire suppression equipment may be taken out of service until all Interim Life Safety Measures are in place and the proper notifications are made in accordance with Stillwater Medical Center policy.
4. Ensure temporary construction partitions are smoke tight and built of non-combustible materials. The contractor shall construct a wall made of metal two by fours with 5/8" gypsum wall board.
5. Provide additional fire fighting equipment and training in use of the equipment for all construction personnel. Additional fire fighting equipment shall be inspected on a daily basis. The contractor shall furnish their own fire extinguishers and/or other fire extinguishment systems suitable for the fire hazards to be anticipated.
6. Enforce no smoking policy in all construction areas and all areas adjacent to the construction site. Placement of signs at entrances to the construction site may be required. The Stillwater Medical Center is a smoke free facility. No smoking is allowed inside the facility or in any construction area on Stillwater Medical Center property.
7. Ensure storage, housekeeping and debris removal procedure is in place to reduce the flammable and combustible fire load to the lowest possible levels. Flammable liquids will not be stored inside the Medical Center without the prior approval of the Director of Facilities Management or Safety Officer. Flammable /combustible liquids will only be kept in approved containers according to NFPA Std 30. Flammable/ combustible liquid containers will be properly identified as to the contents.
8. Conduct a minimum of two (2) fire drills per shift per quarter.
9. Increase hazard surveillance of facility, grounds and equipment with special regard to construction areas, construction storage, field offices and excavations.
10. Ensure additional training and awareness for hospital staff and construction workers when structural or compartmentation features of fire safety are compromised.
11. Work with staff development to ensure that all personnel working in areas where life safety code deficiencies, construction hazards, or other hazards exist are educated about and aware of these hazards.

INFECTION CONTROL

The Stillwater Medical Center is very concerned about the spread of infections and diseases. There is a certain amount of inherent risk associated with working in and around a hospital. The contractor must practice good hygiene while working in and around the hospital and observe following items to help in preventing the spread of infectious diseases. A proactive risk assessment shall be conducted for all demolition, construction or renovation projects to identify hazards that could potentially compromise patient care in occupied areas of the facility. This assessment will address the impact these activities have on air quality, infection control, noise, vibration, utility requirements and emergency procedures. An infection control permit will be issued outlining step to follow based on the type of construction. The contractor shall also comply with all pertinent OSHA and state laws regarding potential infectious disease transmission.

1. The contractor shall be aware of the potential of infection if they come in contact with blood or body fluids of another person. The contractor shall not come in contact with anything that may contain blood or other body fluids
2. All blood or body fluid containing items are to be deposited in an approved container that is clearly labeled "biohazard".
3. The contractor shall practice good hand washing and other sanitary precautions to help prevent the spread of infectious disease and viruses.
4. No contractor will enter an occupied patient room or patient service area without clearance from the Safety Officer or Infection Control Nurse. This is for the safety of our patients and the contractor and also will preserve patient privacy.
5. If at anytime you feel you have a concern about coming into contact with infectious disease or viruses you should notify the Safety Officer or Infection Control Practitioner Nurse immediately.

HOT WORK PERMIT

1. A hot work permit must be obtained from the Facilities Management office anytime hot work is being performed. To obtain the permit the contractor supervisor must first inspect the area to determine if all combustibles within 35 feet have been removed and/or protected. The supervisor must also ensure that the atmosphere is safe for the anticipated operation. The permit will be valid for a specified area and for a specified time period. The time period will normally be one day, unless other arrangements are made in advance with the Facilities Management office. The welder, or designated fire watch, will standby for a period of 30 minutes after the completion of work to ensure that embers will not start any fires.
2. The contractor is responsible at all times for complying with any special criteria or conditions that are determined by the Facilities Director or Safety Officer to be needed to safely do the hot work.

PENETRATIONS, SMOKE AND FIRE WALLS

1. The Life Safety Code, NFPA 101, requires that all smoke and fire partitions penetrations in healthcare occupancies are properly sealed. Therefore, contractors working in any building of Stillwater Medical Center are responsible for sealing every penetration they must make.
2. Contractors must notify the Facilities Management Department about where they are working and the nature of their work. Prior to replacing ceiling tile, the contractor must contact Facilities Management for an above the ceiling inspection of penetrations before leaving the job.
3. Contractors must use only sealing materials approved by NFPA and Stillwater Medical Center.

CONFIRMATION OF COMPLIANCE WITH CONTRACT SAFETY AND HEALTH REQUIREMENTS

I am fully aware of the above requirements and my responsibilities. I authorize the Stillwater Medical Center Director of Facilities Management and/or Safety Officer access to the job site to ensure that we are following all required infection control, fire and safety policies. They are also authorized to stop any operation, which may jeopardize life or property.

Contractor Signature Date

Director of Facilities or Safety Officer Date

Mechanical, Electrical, Plumbing Engineer
EDA
2202 E. 49TH, Suite 100
Tulsa, Ok 74105
P: 918-743-4419 F: 918-743-4469

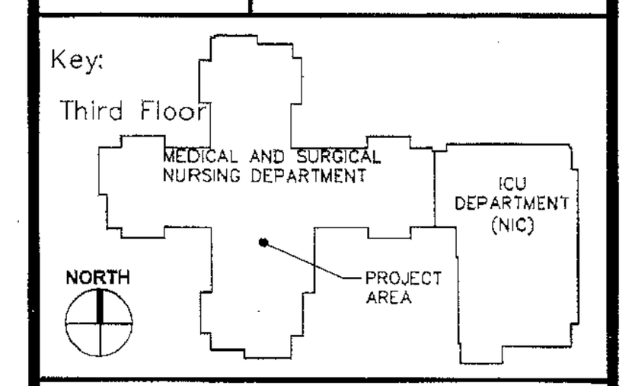
STILLWATER MEDICAL CENTER
Stillwater , Oklahoma
3rd FLOOR RENOVATION

No. | Date
Revisions

Project No. 10724.00
Drawn DAP BSL
Checked MLC KWP
Approved MLC

STATE OF OKLAHOMA Melanie Compton Oklahoma City Oklahoma LICENSED ARCHITECT
[illegible] 2-3-11
Architect

Engineer



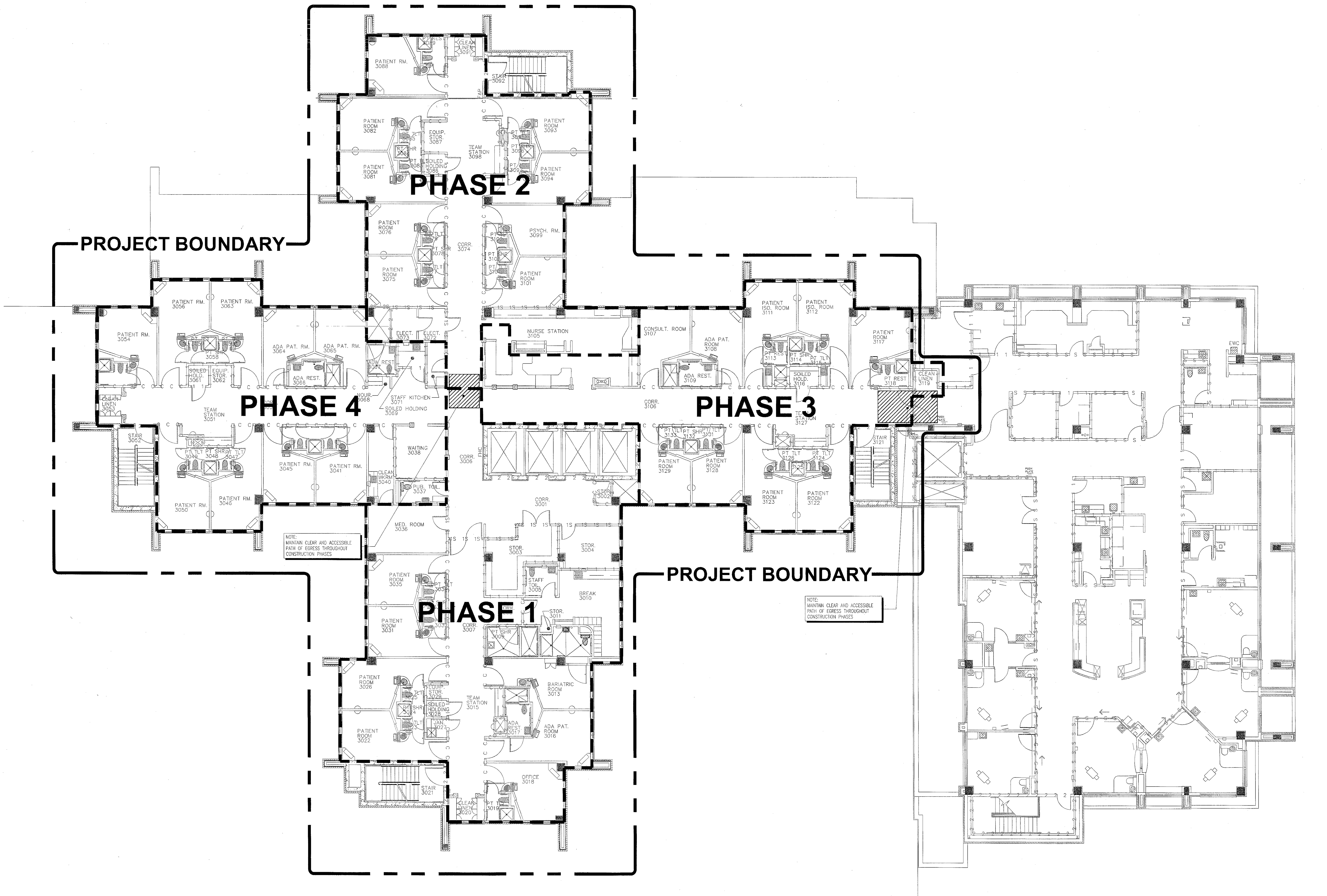
CONSTRUCTION DOCUMENTS

Title:
ICRA & ILSM REQUIREMENTS

Scale: As Noted on Sheet

Drawing No.
G-005

Issue Date
02-03-2011



1 THIRD FLOOR LIFE-SAFETY PLAN
1/8" = 1'-0"

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STILLWATER MEDICAL CENTER

Stillwater , Oklahoma
3rd FLOOR RENOVATION

No.	Date
Revisions	

Project No. 10724.00

STATE OF OKLAHOMA Melanie Compton a3885 Oklahoma City Oklahoma LICENSED ARCHITECT
[illegible] 2.3.11
Architect

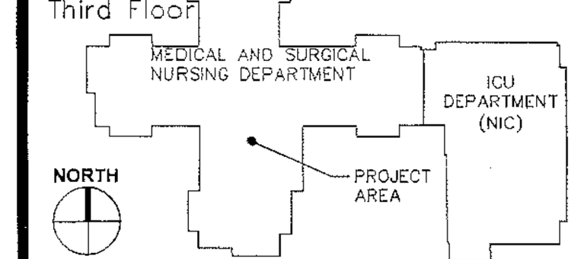
Drawn DAR BSL

Checked MLC KWP

Approved MLC

Engineer

Key:
Third Floor



CONSTRUCTION DOCUMENTS

Title:
CONSTRUCTION PHASING PLAN

Scale: As Noted on Sheet

Drawing No.
G-006

Issue Date
02-03-2011