



JOHN BEL EDWARDS
GOVERNOR

LOUISIANA DEPARTMENT OF PUBLIC SAFETY & CORRECTIONS
PUBLIC SAFETY SERVICES

OFFICE OF STATE FIRE MARSHAL




H. "BUTCH" BROWNING, JR.
STATE FIRE MARSHAL

**INTERPRETIVE MEMORANDUM
2017 – 01**

To: Licensed Healthcare Facility Managers
OSFM Staff

From: Joe Delaune, Chief Architect/Plan Review, OSFM

Approved by: Chief Butch Browning, State Fire Marshal 

Date: December 11, 2017

**RE: Labels on Fire Door Assemblies in
Existing Health Care Facilities**

Health Care facilities that are licensed by the Department of Health & Human Services, Centers for Medicare & Medicaid Services (CMS) are to be inspected annually for compliance with the 2012 edition of the NFPA 101 Life Safety Code. CMS has postponed verification of compliance with the fire door inspection requirements until January 1, 2018, per memorandum S&C 17-38-LSC issued by CMS on July 28, 2017. Interpretation contained therein indicates that inspection and testing of required fire door assemblies shall occur not less than annually in accordance with the provisions of the 2010 edition of NFPA 80, per NFPA 101:8.3.3.1.

The purpose of this memo is to address those existing fire door installations in Louisiana where the labels are not readily apparent or are missing. Only those fire doors that are required to have a fire protection rating by the 2012 edition of the NFPA 101 Life Safety Code are addressed by this memo.

NFPA 101 Section 8.3.3 calls for openings that are required to have

a fire protection rating to be protected by approved listed and labeled assemblies. Compliance with the requirements of NFPA 80 is referenced, except as otherwise specified by NFPA 101. NFPA 101 Sections 8.3.3.2.2 and 8.3.3.2.3 further specify that fire door assemblies shall bear an approved label and that they shall be maintained in a legible condition.

NFPA 101 Section 4.6.5 provides for modifications to the code requirements for existing buildings where it is evident to the AHJ (this office) that a reasonable degree of safety is provided and where it is impractical to apply the new requirements.

In accordance with the Louisiana Administrative Code, Title 55, Part V:301.B, buildings are required to be maintained in accordance with the edition of the code in effect at the time of initial construction or latest renovation plan approval by this office. The provisions for fire door assembly labeling and maintenance first appeared in the 2003 edition of NFPA 101 which was adopted for use in Louisiana on July 1, 2004.

This office recognizes that in some situations it may be impractical to replace existing fire doors or fire door assemblies solely due to missing or illegible labels. Therefore, fire doors in existing health care facilities that were initially approved for construction, renovation, or rehabilitation prior to July 1, 2004, and that do not bear an approved label, or that has a label not in a legible condition, may remain in use if the following conditions are met:

1. Door assembly shall have no visual evidence of modifications since the initial installation and approval.
2. Door shall be of substantial solid core construction
3. Door shall have been properly maintained in good working condition.

Health Care facilities that were constructed, renovated, or otherwise rehabilitated on or after July 1, 2004 shall have labels properly placed and maintained on all required fire door assemblies.

Specific installations or situations that are not addressed by this memo may be submitted to this office for review as a proposed equivalency to code. Submittals shall be made through the OSFM-IMS online portal as a plan review equivalency proposal with completed application and review fee for consideration.



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MEMORANDUM

To: Licensed Healthcare Facility Managers
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From: Joe Delaune, Chief Architect/Plan Review, OSFM

Approved by: Chief Butch Browning, State Fire Marshal 

Date: December 11, 2017

**RE: Inspection of Fire Door Assemblies in
Existing Health Care Facilities**

Code Edition: NFPA 101, 2012 Edition

The purpose of this memorandum is to outline the minimum inspection requirements for existing fire door installations in existing Health Care facilities that are licensed by the Department of Health & Human Services, Centers for Medicare & Medicaid Services (CMS).

CMS requires licensed facilities to be inspected annually for compliance with the 2012 edition of the NFPA 101 Life Safety Code. Beginning January 1, 2018, verification of fire door assembly inspections is to be included, per memorandum S&C 17-38-LSC issued by CMS on July 28, 2017. Interpretation contained therein indicates that inspection and testing of required fire door assemblies shall occur not less than annually in accordance with the provisions of the 2010 edition of NFPA 80, per NFPA 101:8.3.3.1.

Only those fire doors that are required to have a fire protection rating by the 2012 edition of the NFPA 101 Life Safety Code are addressed herein.

NFPA 80:5.2.3.1 requires functional testing of fire door and window

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assemblies to be performed by individuals with knowledge and understanding of the operating components of the type of door being subject to testing. As such, this office will accept health care facility maintenance personnel or a third party inspector to perform these inspections. Written records of the inspections shall be signed, dated, and made available for review by this office upon request.

The following minimum requirements are derived from the 2012 Edition of NFPA 101, Life Safety Code, the 2010 Edition of NFPA 80, Standard for Fire Doors and Other Opening Protectives, and the July 23, 2004 ADA-ABA (AKA 2010 Guidelines). Refer to those documents for detailed information or clarifications.

All Doors

- Before testing, a visual inspection shall be performed on both sides of the door to assess the overall condition of the assembly and identify any damaged or missing parts that can create a hazard during testing or affect operation or resetting.
(101:7.2.1.15.6, 80:5.2.3.2, 80:5.2.4.1, 80:5.2.5.1)

Items to Verify for Swinging Doors with Fire Door Hardware (80:5.2.4)

- No open holes or breaks exist in surfaces of either the door or frame.
- Glazing, vision light frames, and glazing beads are intact and securely fastened in place, if so equipped.
- The door, frame, hinges, hardware, and noncombustible threshold are secured, aligned, and in working order with no visible signs of damage.
- No parts are missing or broken.
- Door clearances do not exceed clearances listed in 80:4.8.4 and 80:6.3.1.7.
 - 3/4" between bottom of door and floor or threshold
 - Hollow metal door -1/8" (+/- 1/16"), door to frame and at meeting stiles of pairs
 - Wood door - 1/8" maximum, door to frame and at meeting stiles of pairs
- The self-closing device is operational; that is, the active door completely closes when operated from the full open position.
- If a coordinator is installed, the inactive leaf closes before the active leaf.
- Latching hardware operates and secures the door when it is in the closed position.
- Auxiliary hardware items that interfere or prohibit operation are not installed on the door or frame.
- No field modifications to the door assembly have been

performed that void the label.

- Gasketing and edge seals, where required, are inspected to verify their presence and integrity.

Items to Verify for Horizontally Sliding, Vertically Sliding, and Rolling Doors (80:5.2.5 and 80:5.2.14)

- No open holes or breaks exist in surfaces of either the door or frame.
- Slats, endlocks, bottom bar, guide assembly, curtain entry hood, and flame baffle are correctly installed and intact.
- Glazing, vision light frames, and glazing beads are intact and securely fastened in place, if so equipped.
- Curtain, barrel, and guides are aligned, level, plumb, and true.
- Expansion clearance is maintained in accordance with manufacturer's listing.
- Drop release arms and weights are not blocked or wedged.
- Mounting and assembly bolts are intact and secured.
- Attachments to jambs are with bolts, expansion anchors, or as otherwise required by the listing.
- Smoke detectors, if equipped, are installed and operational.
- No parts are missing or broken.
- Fusible links, if equipped, are in the location; chain/cable, s-hooks, eyes, and so forth, are in good condition (i.e., no kinked or pinched cable, no twisted or inflexible chain); and links are not painted or coated with dust or grease.
- Auxiliary hardware items that interfere or prohibit operation are not installed on the door or frame.
- No field modifications to the door assembly have been performed that void the label.
- Horizontal or vertical sliding and rolling fire doors shall be inspected and tested to check for proper operation and full closure.
- Resetting of the automatic-closing device shall be done in accordance with the manufacturer's instructions.
- When the annual test for proper operation and full closure is conducted, rolling steel fire doors shall be drop tested twice.
- The first test shall be to check for proper operation and full closure.
- A second test shall be done to verify that the automatic-closing device has been reset correctly.
- Fusible links or other heat-actuated devices and release devices shall not be painted.
- Paint shall be prevented from accumulating on any movable part.

Additional Items to Verify (80:5.2.6 and 101:7.2.1.15.7)

- Inspection shall include an operational test for automatic-closing doors and windows to verify that the assembly will close under fire conditions.
- Assembly shall be reset after a successful test.

- Resetting of the release mechanism shall be done in accordance with manufacturer's instructions.
- Hardware shall be examined, and inoperative hardware, parts, or other defects shall be replaced without delay.
- Tin-clad and kalamein doors shall be inspected for dryrot of the wood core.
- Chains or cables employed shall be inspected for excessive wear and stretching.
- Door leaves of paired openings are installed in accordance with [101:7.2.1.5.11](#).
- Projection of door leaves into the path of egress does not exceed the encroachment permitted by [101:7.2.1.4.3](#).
- Signage required by [101:7.2.1.4.1\(3\)](#), [7.2.1.5.5](#), [7.2.1.6](#), and [7.2.1.9](#) is intact and legible.

Latching and Locking Devices (101:7.2.1.15.7)

- Latching and locking devices comply with [101:7.2.1.5](#).
- Releasing hardware devices are installed in accordance with [101:7.2.1.5.10.1](#).
- Powered door openings operate in accordance with [101:7.2.1.9](#).
- Door openings with special locking arrangements function in accordance with [101:7.2.1.6](#) or with the applicable OSFM Interpretive Memorandum.
- Security devices that impede egress are not installed on openings, as required by [101:7.2.1.5.12](#).

Lubrication and Adjustments (80:5.2.12)

- Guides and bearings shall be kept well lubricated to facilitate operation.
- Chains or cables on biparting, counterbalanced doors shall be checked, and adjustments shall be made, to ensure latching and to keep the doors in proper relation to the opening.

Prevention of Door Blockage (80:5.2.13 and 101:7.2.1.15.7(1))

- Door openings and the surrounding areas shall be kept clear of anything that could obstruct or interfere with the free operation of the door.
- Where necessary, a barrier shall be built to prevent the piling of material against sliding doors.
- Blocking or wedging of doors in the open position shall be prohibited.

Maintenance of Closing Mechanisms (80:5.2.14, 101:7.2.1.15.7(2) and (6), and ADA-ABA 404.2.8 and 404.2.9)

- Self-closing devices shall be kept in working condition at all times.
- Forces required to set door leaves in motion and move to the

fully open position do not exceed the requirements in [101:7.2.1.4.5](#).

- Door closers are adjusted properly to control the closing speed of door leaves in accordance with ADA-ABA requirements.
- Swinging doors normally held in the open position and equipped with automatic-closing devices shall be operated at frequent intervals to ensure operation.

Repair of Fire Doors and Windows (80:5.2.15)

- Damaged glazing material shall be replaced with labeled glazing.
- Replacement glazing materials shall be installed in accordance with their individual listing.
- Any breaks in the face covering of doors shall be repaired immediately.
- Where a fire door, frame, or any part of its appurtenances is damaged to the extent that it could impair the door's proper emergency function, the following actions shall be performed:
 - The fire door, frame, door assembly, or any part of its appurtenances shall be repaired with labeled parts or parts obtained from the original manufacturer.
 - The door shall be tested to ensure emergency operation and closing upon completion of the repairs.
- If repairs cannot be made with labeled components or parts obtained from the original manufacturer or retrofitted in accordance with Section 5.3, the fire door frame, fire door assembly, or appurtenances shall be replaced.
- When holes are left in a door or frame due to changes or removal of hardware or plant-ons, the holes shall be repaired by the following methods:
 - Install steel fasteners that completely fill the holes
 - Fill the screw or bolt holes with the same material as the door or frame