NIH Policy Manual

1212 - Room Numbering Policy

Issuing Office: OD/OM/ORFDO/DFS **Phone:** (301) 594-1746

Release Date: 8/11/2022 ?

Transmittal Notice

1. **Explanation of Material Transmitted:** This chapter establishes the National Institutes of Health's (NIH) policy and guidelines for identifying, reviewing, and approving room numbering systems in NIH owned and leased facilities.
2. **Filing Instructions:**

   Insert: NIH Policy Manual, Chapter 1212, dated 08/11/2022

PLEASE NOTE: For information on:

- Content of this chapter, contact the issuing office listed above.
- NIH Policy Manual, contact the Division of Management Support, OMA on 301-496-4606, or enter this URL: https://oma.od.nih.gov/DMS/Pages/Manual-Chapters.aspx.

A. Purpose

This chapter establishes the policy, procedures, and guidelines for establishing room numbers in NIH owned and leased facilities.

B. Scope

This chapter is applicable to all NIH owned (i.e., new, and existing), operated, and leased facilities. It does not apply to hospital space in the NIH Clinical Center Complex (CCC) on the NIH Bethesda campus, or buildings that constitute the Research Triangle Park, North Carolina, Rocky Mountain Laboratories, Hamilton, Montana, and the Frederick National Cancer Research Center, Frederick, Maryland campuses.

C. Background

The Office of Research Facilities Development and Operations (ORFDO) is responsible for providing, managing, and maintaining NIH real property assets. This includes establishing room numbering guidelines to enhance wayfinding within NIH buildings, addressing functional relationships between organizations, ensuring spaces are used for the intended purpose, and for effective building operations and maintenance activities.

NIH occupies over two-hundred (200) owned buildings in six (6) locations and eighty (80) leased buildings nation-wide in three (3) locations. Approximately 50,000 rooms exist in NIH owned buildings and 27,000 in the leased facilities inventory.

This vast portfolio of rooms requires a comprehensive, uniform, yet flexible numbering system to satisfy operations in NIH's facilities.

D. Policy

It is the policy of NIH for ICO's to comply with ORFDO's requirements for establishing, reviewing, and approving room numbers using the management and internal controls established herein.

The room numbering requirements as outlined in Appendix 1, apply to all newly constructed facilities, as well as partial renovations of existing facilities. Partial renovations require that any new room numbers integrate as seamlessly as possible with the existing room numbering scheme and sequencing in adjacent areas, in order to maintain optimal wayfinding. Every effort should be made to assign room numbers that maintain the overall flow and sequencing of numbers with the entire floor, without the need to change room numbers outside of the limits-of-work area of a renovation.

ORFDO reserves the right to approve all new room numbers. Any deviations to this policy must be requested in writing for ORFDOs approval.

E. Responsibilities

1. **The NIH Institutes, Centers and Offices (ICOs)** are responsible for:

    a. Submitting an ORF Construction Request to obtain design and engineering services necessary to support facility needs.
    b. Providing a point of contact to be responsible for identifying project requirements (i.e., scope of work).
    c. Working with ORFDO to obtain NIH and/or HHS project approvals, when necessary.
    d. Approving project documents developed by ORFDO including the room numbering system.
    e. Providing funds to support projects earmarked and approved to be ICO funded.

2. **The NIH Office of Research Facilities Development and Operations (ORFDO)** is responsible for:

    a. Providing design and construction services to support ICO facility requirements.
    b. Providing funding guidance on the use of ICO Operating Funds for construction activities, when applicable.
    c. Providing a Project Officer (PO) to manage projects.
    d. Assigning a Contracting Officer Representative (COR) for projects.

e. Utilizing ORFDO's Project Management Desk Guide for life cycle management of projects.
f. Adhering to ORFDO's project Permit Review Process to ensure fire, life safety, security, emergency management, phone and communication system reviews are conducted.
g. Adhering to the NIH Design Requirements Manual (DRM) and Appendix - 1 - **Room Numbering Standards**.
h. Determining room numbers for all spaces, except in the NIH Clinical Center Complex (CCC) or in facilities on the Research Triangle Park, North Carolina, Hamilton, Montana and the Frederick National Cancer Research Center, Frederick, Maryland campuses.
i. Coordinating room number designations and changes with ICO's and other stakeholders, as necessary.
j. Obtaining the ICO's approval of document(s) developed to meet project requirements prior to advertising for a construction contract.
k. Providing contracting acquisition services for design and construction projects.

3. **The NIH Clinical Center (CC), Hospital Engineering and Facility Services (HEFS)** is responsible for reviewing projects in clinical spaces for compliance with hospital guidelines.
4. **The NIH Center for Information Technology (CIT)** is responsible for addressing phone numbers in each room and/or module.
5. **The NIH Office of Research Services (ORS)**:

    a. **The Division of the Fire Marshal (DFM), ORS** is responsible for:

        1. Reviewing and inspecting projects on NIH-owned properties for compliance with NIH Policy Manual 1370-Fire and Life Safety Building Permit Process; and
        2. Identifying Interim Life Safety Measures (ILSM) for projects that take place in the NIH Bethesda Campus Clinical Center Complex (CCC).

    b. **The Division of Physical Security Management (DPSM), ORS** is responsible for:

        1. Performing security assessment for proposed projects; and
        2. Reviewing and inspecting projects in NIH-owned and leased facilities properties for compliance with NIH Policy Manual 1381-Physical Security Requirements for NIH-owned and Leased Facilities and the Interagency Security Committee requirements

    c. **The Division of Police (DP), ORS** is responsible for identifying requirements to support and coordinate personnel protection requirements.
    d. **The Division of Emergency Management (DEM), ORS** is responsible for:

        1. Addressing emergency preparedness requirements; and

2. Coordinating updates to the emergency response alert and notification systems for rooms with CIT, Facilities Infrastructure Support Services (FISS).

e. **The Division of Fire and Rescue Services (DFRS), ORS** is responsible for identifying fire, emergency medical, hazardous materials, and rescue service requirements.
f. **The Division of Occupational Health and Safety (DOHS), ORS** is responsible for:

1. Reviewing contractor safety deliverables for compliance with the applicable Occupational Safety and Health Administration (OSHA) regulations; and
2. Verifying compliance with the U.S. Army Corps of Engineers Safety and Health Manual 385-1-1 (EM- 385-1-1).

g. **The Program and Employee Services (PES)/Medical Arts Branch (MAB), ORS** is responsible for the design of signage (i.e., includes room names and numbers) in the NIH CCC.

F. Procedures

1. **The ICO**:

a. Submits a ORF Construction Request to obtain design and engineering services necessary to support facility needs.
b. Provides a point of contact to be responsible for identifying project requirements (i.e., scope of work).
c. Reviews the room numbering system established by ORFDO at the earliest possible design phase.
d. Provides approval of the final (100%) documents including the room numbering system prepared by ORFDO to satisfy project requirements.
e. Provide funds to support the project when applicable.

2. **The ORFDO**:

a. **The Division of Design and Construction Management (DDCM), ORFDO:**

1. Assigns a PO to manage the ICO's submitted Construction Services Request.
2. The PO and/or COR meets with the ICO representative(s) to:

i. Verify the scope of the project.
ii. Address modifications and/or updates to industrial controls systems (i.e., Building Automation System (BAS), Fire Alarm System (FAS), Mass Notification System (MNS) and Lighting Control Systems

(LCS), when applicable) associated with room number changes.
iii. Discuss ORFDO's project Permit Review Process requirements.
iv. Discuss ORFDO's **Room Numbering Standards, Appendix 1**.
v. Support development of the Architect/Engineering (A/E) contract scope of work.
vi. Support development of the project budget, schedule, and acquisition strategy.

3. The PO/COR**:**

i. Manages the project in compliance with ORFDO Project Management Desk Guide.
ii. Ensures that the A/E contract scope of work (SOW) includes reference to room numbering requirements.
iii. Complies with ORFDO's Permit Review Process and ensures all required stakeholders are included in the review process to include the necessary divisions within the ORS and the NIH/CIT.
iv. Coordinates room numbering requirements with ORFDO/Division of Facilities Stewardship (DFS)/Portfolio Assessment and Reporting Branch (PARB).
v. Coordinates room numbering including changes with ORS and CIT.
vi. Coordinates room numbers and names for clinical spaces with the Clinical Center (CC) Hospital Engineering and Facility Support Services (HEFS).
vii. Ensures continuous communication with the ICO and obtains the ICO's approval of the room numbering strategy at the earliest possible design phase.
viii. Obtains the ICO's approval and funding to advertise the project for construction based on the final design (i.e., including the room numbering system).

b. **The Office of Acquisitions (OA), ORFDO:**

1. Assigns a Contracting Officer Representation (COR) to manage the technical administration of A/E and construction contracts.
2. Provides contracting solutions to secure required architectural, engineering, and construction support services to satisfy project requirements, unless otherwise authorized.
3. Awards contracts for design and construction services.

c. **The Division of Facilities Stewardship (DFS)/Portfolio Assessment and Reporting Branch (PARB), ORFDO:**

1. Participates in the DTR Permit Review process, and reviews design and construction documents to designate and assign room numbers in compliance with **Exhibit 1-Room Numbering Standards.**

2. Approves room and space number changes.
3. Coordinates room numbering with the PO/COR.
4. Reviews record drawings to verify room numbers comply with program guidance.

d. **The Division of Technical Resources (DTR), ORFDO:**

1. Provides design guidance and technical consultation to support projects.
2. Reviews design and construction documents for compliance with the NIH DRM and other applicable, building codes, standards, and guidelines.
3. Ensures the building infrastructure supports the programmatic and specific operating requirements of each room.
4. Ensures contract documents address fire alarm and emergency communication system update requirements to reflect room changes.

e. **The Office of Hospital Physical Environment (OHPE), ORFDO:**

1. Reviews each project in the NIH Clinical Center Complex (CCC) and provides Construction Risk Assessment (CRA) and Construction Above-Ceiling Work Permit guidance and inspections for all projects proposed in the NIH CCC to ensure compliance with The Joint Commission hospital accreditation standards.

3. **The NIH CC/HEFS** reviews projects in clinical areas of the CCC for compliance with hospital operational and accreditation guidelines, and for room naming and numbering requirements.
4. **The ORS**:

a. **The DFM, ORS** reviews each Construction Request to:

1. Verify compliance with NIH Policy Manual 1370-Fire and Life Safety Building Permit Process.
2. Identify Interim Life Safety Measures (ILSM) for projects that take place in the NIH Bethesda Campus CCC.
3. Note whether inspection of the work will be required.

b. **The DPSM, ORS** reviews each Construction Request to:

1. Perform a security assessment for the proposed project.
2. Verify compliance with NIH Policy Manual 1381- Physical Security Requirements for NIH-owned and Leased Facilities and the Interagency Security Committee requirements.
3. Note whether inspection of the work will be required.

c. **The Division of Police (DP), ORS** provides guidance when necessary to support and coordinate personnel protection requirements.

d. **The Division of Emergency Management (DEM), ORS** reviews projects in collaboration with NIH/CIT/Facility Infrastructure Support Services (FISS) to update emergency response alert and notification system changes generated by room number changes.
e. **The Division of Fire and Rescue Services (DFRS), ORS** provides guidance when requested to address fire, emergency medical, hazardous materials, and rescue service requirements associated with rooms.
f. **The Division of Occupational Health and Safety (DOHS), ORS** reviews each Construction Request and IC Self-Performance/Handyman Services Request when applicable for:

    1. Compliance with OSHA regulations.
    2. Adherence to the U.S. Army Corps of Engineers Safety and Health Manual 385-1-1.

g. **The PES/MAB, ORS** works with the PO/COR in designating the design for room numbers and names in the CCC and to ensure compliance with wayfinding applications.

5. **The NIH CIT** works with ORFDO PARB and ORS DEM to ensure phone numbers and work area outlets for network connectivity are coordinated to satisfy all requirements.

G. References

1. NIH Policy Manual 1743- Managing Federal Records
2. NIH Policy Manual 1370-Fire Protection and Life Safety Building Permit Process
3. NIH Policy Manual 1381-Physical Security Project Requirements for NIH Owned and Leased Facilities
4. NIH Design Requirements Manual
5. NIH Facilities Development Manual (FDM) Section 3-10-Clinical Center Complex (CCC) Interim Life Safety Measures (ILSM) and Construction Risk Assessments (CRA) for Construction and Related Activities
6. ORF's Construction Request

Appendix 1 – Room Numbering Standards

Room Numbering Strategy

Floor plans vary greatly in size and complexity, and this impacts the ideal numbering schema, but in order to provide for maximum flexibility throughout the lifecycle of a building, the following concepts should be considered**:**

Mandatory room number formatting rules:

- Each room number must be unique for a given building. No duplicate room numbers within the same building or facility are allowed.
- Do not use the letters “I” or “O” in any room number, as this can be easily confused for the digits “1” or “0”.

Room Numbering diagram. Example room number format displayed starting with the first identifier being the floor number, second letter referencing Building Area / Wing, third identifier referencing Building Grid / Zone, forth being Suite / Room Number, and final identifier being Inner Room / Space.

General format of numbers:

- **Assignable spaces:**
    - Floor Designator: 1-2 characters (mandatory).
        - For non-interstitial floors 01 and above, use floor level, (without leading zero)
        - For purely mechanical interstitial floors, use the interstitial level indicator, which is the floor level immediately below the interstitial floor, with an “I” character (e.g., “1I”, “2I”, “GI”, “BI”, etc.)
        - For floors designated as “Ground Floor” use “G”. For levels designated as “Basement Level X”, use the corresponding basement level indicator. (e. g. “B1”, “B2”, etc.)

- **Building Area/ Wing:** (single alpha character): depends on size of floor plate. If relatively small, use “A” or omit. Also used for major additions, using the next sequential alpha character not in current use.
- **Building Grid**: an ordering device, based on column grid, or approx.10’ (represents practical min. dimension of an average-sized office. This grid represents the first digit in the room number, i.e., **1**0, **2**0, **3**0, etc.
- **Suite / Room Number**:
    - Generally, 2 digits, (sometimes 3 if the number of rooms warrants), including the “building grid” designator (see above). Generally, these should follow a natural sequencing that reflects the order of rooms as an occupant moves through the building. Suite / room numbers, shall sequence in a clockwise direction (sequencing of numbers through the wing or building grid/zone)
    - Odd / even numbers on opposite sides of corridor (or building) Preference is for rooms on the North or West side of a major corridor to be odd, E and S = even.
    - “Skip” numbers to account for and provide flexibility for future renovations, and further dividing of space.

- **Circulation spaces:**

- **Non-assignable** Circulation spaces shall have text string prefixes:
  Examples:

  - Corridor = CORR
  - Elevator = ELEV

  and shall be assigned a General format number following the standard TEXT Prefix:
  Examples:

  - CORR3B22, (if on Floor 3, wing B, "grid 22"
  - LOBBY1A10, if on Floor 1, wing A, "grid 10"

- **Assignable** circulation spaces, such as controlled access corridors, are assigned a number with the same formatting as other assignable rooms (no text string prefix). Additionally, circulation areas in open office rooms are considered part of the main room and is not assigned a separate number.

- **Mandatory vertical consistency** – Stairs / Elevators / Shafts
  Examples:

  - STAIR1A01, STAIR2A01, STAIR3A01, etc.
  - ELEV1C20, ELEV2C20, ELEV3C20, etc.

- **"Interior-accessed" rooms that comprise a "suite":** (Rooms with full-height walls and lockable doors), that are considered as part of a "suite" shall be assigned the main room or suite number, and given a unique, sequential (clockwise) alpha character suffix:

  - Example: 3B41A, 3B41B, etc. if in suite 3B41

- **Cubicles and workstations within suites** (with partial-height walls, or phantom walls, such as cubicles, workstations, etc.) shall use a dash followed by 2 digits.

  - Example: 4C26-01, 4C26-02, etc. if in suite 4C26.

- NIH standard practice is to number all cubicle and workstations individually. Please note that additionally, some lab bench spaces are segregated in this manner, but not all, and generally, lab benches are only assigned separate numbers (by PARB) on a case-by-case basis, at the request of the IC occupying the particular laboratory space.