



## Executive Director's Recommendation

Commission Meeting: March 4, 2021

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<b>PROJECT</b> <b>Surgery, Radiology and Lab Medicine Building Addition</b> National Institutes of Health, Bethesda Campus 9000 Rockville Pike Bethesda, Maryland	<b>NCPC FILE NUMBER</b> 8235
<b>SUBMITTED BY</b> United States Department of Health and Human Services National Institutes of Health	<b>NCPC MAP FILE NUMBER</b> 3101.20(38.00)45272
<b>REVIEW AUTHORITY</b> Federal Projects in the Environs per 40 U.S.C. § 8722(b)(1)	<b>APPLICANT'S REQUEST</b> Approval of final site and building plans
	<b>PROPOSED ACTION</b> Approve final site and building plans with comments
	<b>ACTION ITEM TYPE</b> Staff Presentation

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### PROJECT SUMMARY

The United States Department of Health and Human Services (DHHS) has submitted site and building plans for a new addition to the existing Clinical Research Center (CRC) – known as the Surgery Radiology Laboratory Medicine (SRLM) addition. The project is designed with nine levels above grade (with interstitial floors and a roof penthouse) and two levels below grade, totaling 547,290 gross square feet (GSF). The addition will house new space to accommodate the relocation of the General Radiology and Imaging Services, Department of Perioperative Medicine, Department of Laboratory Medicine, National Cancer Institute, and other medical departments. The project would also renovate 82,150 GSF of the adjacent CRC building. The new construction is designed as a modern, visually prominent building addition at the end of Center Drive, which serves as a primary vehicular campus entrance from Old Georgetown Road.

Other proposed site improvements would include a new relocated playground; pedestrian tunnel between the CRC and MLP-15 Garage; new bio-retention areas; sidewalks; landscaping; and new perimeter security retaining wall around the site. In addition, NIH would realign a section of Center Drive along the northside of the CRC building and project site – transforming Center Drive into a narrower 2-lane cross-section, with a separate access roadway for drop-off/pick-up traffic. The roadway reconfiguration is needed to accommodate the proposed SRLM addition footprint and necessary on-site stormwater treatment area. No parking is proposed as part of the project.

At its December 2020 meeting, the Commission approved the preliminary design with comments related to reducing the project's visual presence through strategies that emphasize horizontality over height. The applicant worked with NCPC staff and evaluated several approaches and design changes. Several design changes are proposed as part of the final design to address the Commission's comments.

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## KEY INFORMATION

- The project is consistent with many of the 2013 NIH Master Plan's guiding principles including: its designated 250-foot-wide landscaped perimeter buffer; the campus's building height limit; and emphasis on clustered development.
- NCPC previously approved an amendment to the Master Plan (Project # MP02) that reflects the new SLRM addition. The proposal is consistent with the master plan amendment.
- The NCPC parking ratio for the NIH Bethesda Campus is 1:3 due to its proximity to Metrorail service (Medical Center Station). The SLRM addition is reflected in a detailed campus-wide parking reduction plan that shows how NIH will attain the goal by 2033. No parking is proposed as part of the project.
- NIH designed the new addition to reflect other nearby buildings including the large Clinical Center Complex, which is a modern-style red brick building that is highly visible throughout the campus and off-campus with its fourteen-story, 3.14 million square foot size.
- NIH selected the project site based on a multi-year study that considered different development scenarios (with various department relocations between one or more existing buildings on-campus) and other locations adjacent to the CRC. The proposed site is needed to continue CRC operations as efficiently as possible.
- At its December 2020 meeting, the Commission approved the preliminary design with comments related to reducing the project's visual presence through strategies that emphasize horizontality over height. The applicant has explored several approaches to address these comments, which are described in the analysis section below.

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## RECOMMENDATION

The Commission:

**Approves** the final building and site development plans for the new Surgery Radiology Laboratory Medicine addition on the NIH campus on Bethesda, Maryland.

**Notes** that NIH selected the proposed addition location based on the requirement to connect new expansion space to existing clinical, laboratory, and interstitial space within the adjacent Clinical Research Center building. NIH selected the location of the project after considering multiple different Clinical Center-adjacent sites.

**Notes** that the project programming remains unchanged from the preliminary submission, based on the need for adequate space to allow the Clinical Research Center to continue to operate as a premier, world-class research facility.

**Notes** that NIH has made the following design changes based on previous Commission comments to reduce the scale and visual presence of the project:

- Lowering the heights of the stair towers and west-wing parapet wall;

- Reconfiguring seven vertical (rectangular) punched windows into three more horizontal (square) punched windows on the top level of the addition's three north-facing wings; and
- Replacing a section of metal panel cladding on the top level of the east stair tower with a glass curtainwall.

**Notes** that NCPC staff encouraged the applicant to explore reducing the height of the top-level punched windows to further reduce the vertical look of the building; however, the applicant elected to maintain the façade height (above the rooftop) as a design feature.

**Notes** that NIH has submitted additional information related to landscaping, lighting, and updated renderings as previously requested by the Commission during its Preliminary review.

## PROJECT REVIEW TIMELINE

<b>Previous actions</b>	<b>December 2020</b> – Preliminary site and building plan approval
<b>Remaining actions</b> (anticipated)	None

## PROJECT ANALYSIS

### Executive Summary

The new Surgery Radiology and Lab Medicine (SRLM) addition will enable continued use of the NIH Clinical Center Complex as a premier, world-class research facility. NIH designed the project to be architecturally compatible with the adjacent red-brick Clinical Research Center, with a contemporary look and adequate programming space to enable future medical research. The Commission commented during preliminary review that the new addition appeared out-of-scale to the project site, recommending that NIH continue to refine the design. NIH has since redesigned the addition to address the issue of scale through various material, height, and embellishment changes after exploring multiple design alternatives. These changes are highlighted in more detail in the analysis section of this report. After reviewing the final submission, staff find that NIH has made sufficient design changes to lessen the scale of the project in a manner that responds to previous Commission comments. Therefore, staff recommends that the Commission **approve the final building and site development plans for the new Surgery Radiology Laboratory Medicine addition on the NIH campus on Bethesda, Maryland.**

### Background

NIH proposes to construct a new 11-level, 547,290 square foot addition (Surgery, Radiology and Laboratory Medicine addition) at the northwest corner of the Clinical Research Center (CRC) building, with an additional 82,150 square foot renovation of existing CRC space. The addition would provide new space for several department relocations including the General Radiology and

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Imaging Services, Department of Perioperative Medicine, Department of Laboratory Medicine, and National Cancer Institute.

NIH selected the project location and configuration of the new addition based on the need to connect new expansion space to existing similar space within the Clinical Research Center. For example, existing interstitial (utility) and laboratory space must seamlessly connect to new expansion space to optimize efficiency and functionality. NIH provided conceptual floorplans and a building section to illustrate this point in the Preliminary and Final submissions. The proposed location for the SLRM addition is based on a multi-year study that evaluated alternative development locations adjacent to the northwest and west sides of the Clinical Center, previously presented to the Commission during its December meeting. Staff recommends that the Commission **note that NIH selected the proposed addition location based on the requirement to connect new expansion space to existing clinical, laboratory, and interstitial space within the adjacent Clinical Research Center building. NIH selected the location of the project after considering multiple different Clinical Center-adjacent sites.**

Nine levels (of eleven) within the addition will be above ground and two levels will be constructed below ground. NIH developed the project programming, which remains unchanged from the preliminary submission, based on the need for adequate space to allow the Clinical Research Center to continue to operate as a premier, world-class research facility. Staff recommends that the Commission **note that the project programming remains unchanged from the preliminary submission, based on the need for adequate space to allow the Clinical Research Center to continue to operate as a premier, world-class research facility.**

Proposed site improvements include a realigned section of Center Drive; new (relocated) children's playground; new pedestrian tunnel between the SLRM addition and new MLP-15 Garage; new raised landscaped bio-retention areas; new sidewalks; landscaping; and relocation of a utility tunnel section along the westside of project site. Most of the project site would include a series of new elevated landscaped bio-retention areas (designed as outdoor gardens) to meet State stormwater requirements. Total land disturbance area would encompass approximately 112,000 square feet (2.57 acres), with a proposed 74% increase in impervious area from 50,530 to 87,990 square feet. The bioretention areas would be enclosed with retaining walls, with the largest treatment area wrapping around the new relocated playground area. The new elevated playground (above the adjacent bioretention area) would be enclosed by a six-foot high decorative perimeter fence, replacing an existing play area used by children of Clinical Center visitors and patients. These proposed site improvements remain the same as in the preliminary submission.

The final landscape plans include a future mix of native and deer/drought tolerant shrubs and grasses that would be appropriate for stormwater retention area use. The project would remove a total of 86 evergreen and ornamental trees on the project site with trees replaced at 1:1, 1:4, or 1:8 ratios depending upon their size and condition. Plans show a 68 total (13 Evergreen, 36 Shade, 19 Street) replacement trees to be planted within the Limits of Disturbance and additional new trees off-site to the northwest of NIH's Child Development Center. Overall, the project would increase the overall number of trees on-campus.

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## Analysis

The project is designed to be compatible with the modern red-brick architecture of the adjacent CRC building, with more contemporary design features to accentuate the new construction. The SLRM addition's stepped configuration reflects the constrained nature of the site with a curved edge along a realigned Center Drive that somewhat reduces the perceived project scale. Other notable features continue to include a series of exterior plazas and glass facades to strengthen the connection between indoor and outdoor spaces, brick facades and punched windows that extend above the roofline, and a series of stacked glass cubes on the building corner closest to the Center/Convent Drive intersection. NIH describes the intent of the oversized punched windows as diminishing the mass of the building and designed "to celebrate how the building meets the sky." The stacked cubes (with vision glass) would define a prominent corner of the largest outdoor plaza and house meeting room spaces, expressing internal collaboration and research within the new SLRM addition. The building's two mechanical towers (on the east and south sides) are designed with patterned terra cotta rainscreens to break-up their large sides, resulting in ever-changing shadow patterns (with complementary lighting) during day and night-time hours. NIH has retained each of these key development features from the preliminary project submission reviewed by NCPC this past December.

NIH has submitted a modified building design that attempts to de-emphasize the addition's vertical appearance in response to previous NCPC comments to refine the massing and design of the new addition. Since December, NIH has worked with staff on different design alternatives. Initially NIH proposed greater use of metal and glass cladding; modified stacked glass corner cubes; and horizontally oriented glass along the building corners. Staff did not find these alternatives to improve the initial design so per staff direction, NIH produced the current proposal which draws on the materials/design elements of the initial design. Updated plans and project renderings show several notable changes that include lowering the heights of the stair towers and west-wing parapet wall; reconfigured punched windows; and a new glass curtainwall section. NIH intends these changes to reduce the perceived scale of the project, and to help achieve a more defined building top relative to its middle and base sections.

The applicant was able to reduce the height of the stair towers by five feet as well as the west-wing upper parapet wall (above the stacked cubes) by three feet. Overall, staff believes that lowering the height of the tall narrow stair tower elements and parapet wall has an impact on the perceived height of the building. In addition, the seven rectangular punched windows located along the top floor have been consolidated into three larger windows on each north-facing building wing. All of the punched windows (on both the north and west building facades) would continue to extend above the plane of the roof as a design expression from the preliminary submission. Finally, the building's east stair tower (near the CRC) is designed with a glass curtainwall instead of metal cladding, intended to reflect the sky and visually dematerialize the top floor. All of these changes are visible through updated project renderings and elevations included in the project submission. Staff recommends that the Commission **note that NIH has made the following design changes based on previous Commission comments to reduce the scale and visual presence of the project:**

- **Lowering the heights of the stair towers and west-wing parapet wall;**
- **Reconfiguring seven vertical (rectangular) punched windows into three more horizontal (square) punched windows on the top level of the addition's three north-facing wings; and**
- **Replacing a section of metal panel cladding on the top level of the east stair tower with a glass curtainwall.**

Staff believe that these changes successfully reduce the overall vertical look and scale of the project for greater site compatibility as recommended by the Commission at its December meeting. In particular, the consolidated punched windows read as a more horizontal expression that gives the impression of a lower building compared to the previous design. The new glass curtainwall on the top of the east stair tower eliminates the starker appearance of previous metal cladding against the background sky, which also helps to de-emphasize the building height. Finally, the lower parapet wall and stair towers are noticeable, contributing to the overall reduced visual presence of the building compared to its earlier preliminary design.

The SLRM addition design does maintain one design feature from the preliminary submission, which NCPC staff believes could help further reduce the vertical appearance (and larger site presence) of the building. During several project consultations after the Commission's December review, staff encouraged the applicant to consider lowering the height of the solid frame at the upper story windows. However, NIH elected to maintain the architectural frame heights (above the rooftop) as an important design expression. Therefore, staff recommends that the Commission **note that NCPC staff encouraged the applicant to explore reducing the height of the top-level punched windows to further reduce the vertical look of the building; however, the applicant elected to maintain the façade height (above the rooftop) as a design feature.**

One last notable design change relates to the stacked cubes located on the corner of the new SLRM addition closest to the Center Drive/Convent Drive intersection. The previous design shows the cubes comprised of a mix of clear and translucent glass, whereas the new design shows the cubes constructed of all vision glass with ceramic frit. Though the change does not diminish the overall scale of the project, NIH did modify the cube glass based on comments made by the Commission during its December review.

The final submission includes additional information related to landscaping, lighting, and updated renderings as previously requested by the Commission during its Preliminary review. In particular, refined landscape plans show 68 new replacement trees on the project site with additional new trees planted nearby (across the street), which would result in an overall net increase in on-campus trees. This is consistent with NCPC's applicable tree policy (FE.G.2) for the project. NIH also provided additional lighting details in the final submission with a statement that all new lighting would comply with International Dark Sky Association (ISDA) standards per the project's Design-Build contract. In light of the additional information provided by NIH in the project submission, staff recommends that the Commission **note that NIH has submitted additional information related to landscaping, lighting, and updated renderings as previously requested by the Commission during its Preliminary review.**

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## **CONFORMANCE TO EXISTING PLANS, POLICIES AND RELATED GUIDANCE**

### **Comprehensive Plan for the National Capital**

The proposed new SLRM addition is generally consistent with NCPC Comprehensive Plan policies from the Federal Environment and Transportation Elements. NIH previously submitted a parking plan that demonstrates how the campus would attain a 1:3 goal by 2033, and the new SLRM addition is reflected in the plan.

### **National Historic Preservation Act**

NIH has determined that the proposed new SRLM addition would have No Adverse Effect on historic properties and the Maryland Historic Trust officially concurred with the NIH finding by letter dated November 6, 2020. NCPC does not have a formal Section 106 responsibility for the project, with its location outside of the District of Columbia.

### **National Environmental Policy Act**

The NIH analyzed the proposed project (in conjunction with the new MLP-15 Garage/Utility Vault) through an Environmental Impact Statement (EIS), with release of a draft EIS for public comment from July 10th - August 10th. NIH issued a signed Record of Decision (ROD) for the project on August 24, 2020. For projects in the Environs, outside of the District of Columbia, NCPC does not have a formal review responsibility under NEPA.

## **CONSULTATION**

NCPC previously referred out the project (in conjunction with the new MLP-15 Garage/Utility Vault) to the Maryland Department of Planning (MDP) clearinghouse in September 2019. In turn, MDP forwarded the submission to the following agencies for review and comment: Maryland Department of Natural Resources, Maryland Department of Transportation, Maryland Department of the Environment, Maryland Department of Planning, and Maryland Historical Trust. Each of the review agencies found the project to be generally consistent with their plans, programs, and objectives. In addition, the NIH consulted with various State and local agencies during the on-going NEPA review for the projects.

The NIH presented the new addition project to their Community Liaison Committee (CLC) in June 2019. The CLC group is a neighborhood outreach group that NIH hosts quarterly to present future projects for community feedback and address local community concerns with campus operations. The CLC is made up of representatives from 16 local citizen associations. NIH reports that the CLC did not raise any serious concerns with the project.

## **ONLINE REFERENCE**

The following supporting documents for this project are available online at [www.ncpc.gov](http://www.ncpc.gov):

- Submission Letter

- Project Narrative
- NCPC Staff PowerPoint Summary Presentation

Prepared by Michael Weil  
02/26/2021

**POWERPOINT (ATTACHED)**

# National Institutes of Health Surgery Radiology Laboratory Medicine Addition

9000 Rockville Pike, Bethesda, Maryland

Approval of Final Site and Building Plans

United States Department of Health and Human Services, NIH

# Project Summary



**Commission Meeting Date:** March 4, 2020

**NCPC Review Authority:** Federal Projects in the Environs per 40 U.S.C. § 8722(b)(1)

**Applicant Request:** Approval of final site and building plans

**Session:** Open Session

**NCPC Review Officer:** Michael Weil

**NCPC File Number:** 8235

## Project Summary:

The United States Department of Health and Human Services (DHHS) has submitted site and building plans for preliminary and final review by NCPC. The project consists of a new addition to the existing Clinical Research Center (CRC) – known as the Surgery Radiology Laboratory Medicine (SRLM) addition – with new space for multiple important research programs. The addition is designed with nine levels above grade (including interstitial floors and a roof penthouse) and two levels below grade. The project includes 629,440 total gross square feet (GSF), with 547,290 GSF of new construction (to the CRC west wing) and an 82,150 GSF renovation to the existing building. The project is designed as a modern, visually-prominent focal point on the campus and at the end of Center Drive, which is a heavily-used employee and visitor entrance from Old Georgetown Road.

The project would also remove/redesign a section of roadway along the northside of the building – transforming Convent Drive from a 4-lane “parkway”-like roadway into a narrower 2-lane road. The relocated roadway would increase the area for the new building addition to the northwest corner of the CRC and create a separate access road for employees, visitors, and patients adjacent to the new addition and existing main entrance to the CRC building. The project would also relocate a portion of an existing campus utility tunnel, reconstruct a new children’s playground (to replace an existing playground on the site), and construct a new pedestrian tunnel to link the CRC to the new MLP-15 garage across the street. The proposed site design includes multiple new terraced bio-retention areas with a new bridged walkway (with an Ipe wood deck) and stairs to a new staff-only entrance into the new addition. The new landscaped bio-retention areas would be bordered by a new continual anti-ram perimeter security wall.

# Project Summary (*continued*)

In response to NCPC's previous comments, NIH has changed the building addition design to reduce its visual scale through the following key strategies:

- Reducing the heights of the stair towers and west-wing parapet wall;
- Replacing seven, more vertical (rectangular) punched windows with three larger punched windows at the top of the building's three north-facing wings; and
- Changing the metal panel cladding on the top level of the east stair tower to a glass curtainwall.

However, the programming of the new addition remains unchanged from the preliminary project submission and the number of above-grade levels remains the same given the complexity of the clinical program and the need to make key connections to the existing Clinical Research Center.

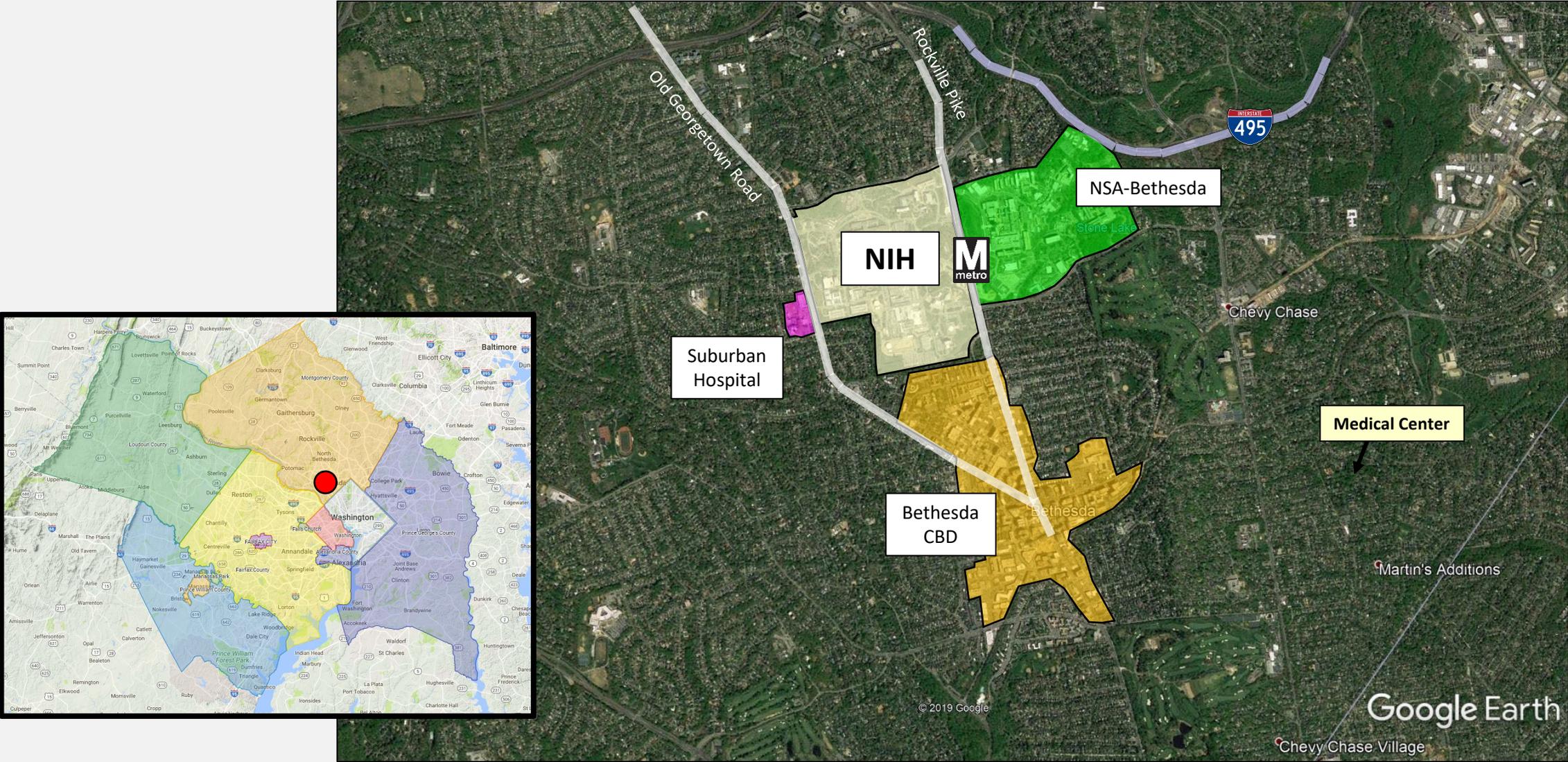
## Landscaping

NIH has submitted final landscape plans that include an inventory of all existing trees to be removed (locations/species/condition) and specific locations/species information for all future tree plantings, both on and off-site. Plans show a total of 86 existing trees to be removed on-site, with 68 new trees planted within the Limits of Disturbance and additional new trees to be planted to the northwest of the site (off-site), behind the Child Development Center. Total tree replacement would result in a net increase of trees on the NIH Campus. The project would comply with NCPC's 2016 tree replacement policy (FE.G.2), which requires replacement to prevent a net tree loss and NIH's tree policy, which requires replacement ratios of 1:1, 1:4, and 1:8 based on the size and condition of the trees to be removed.

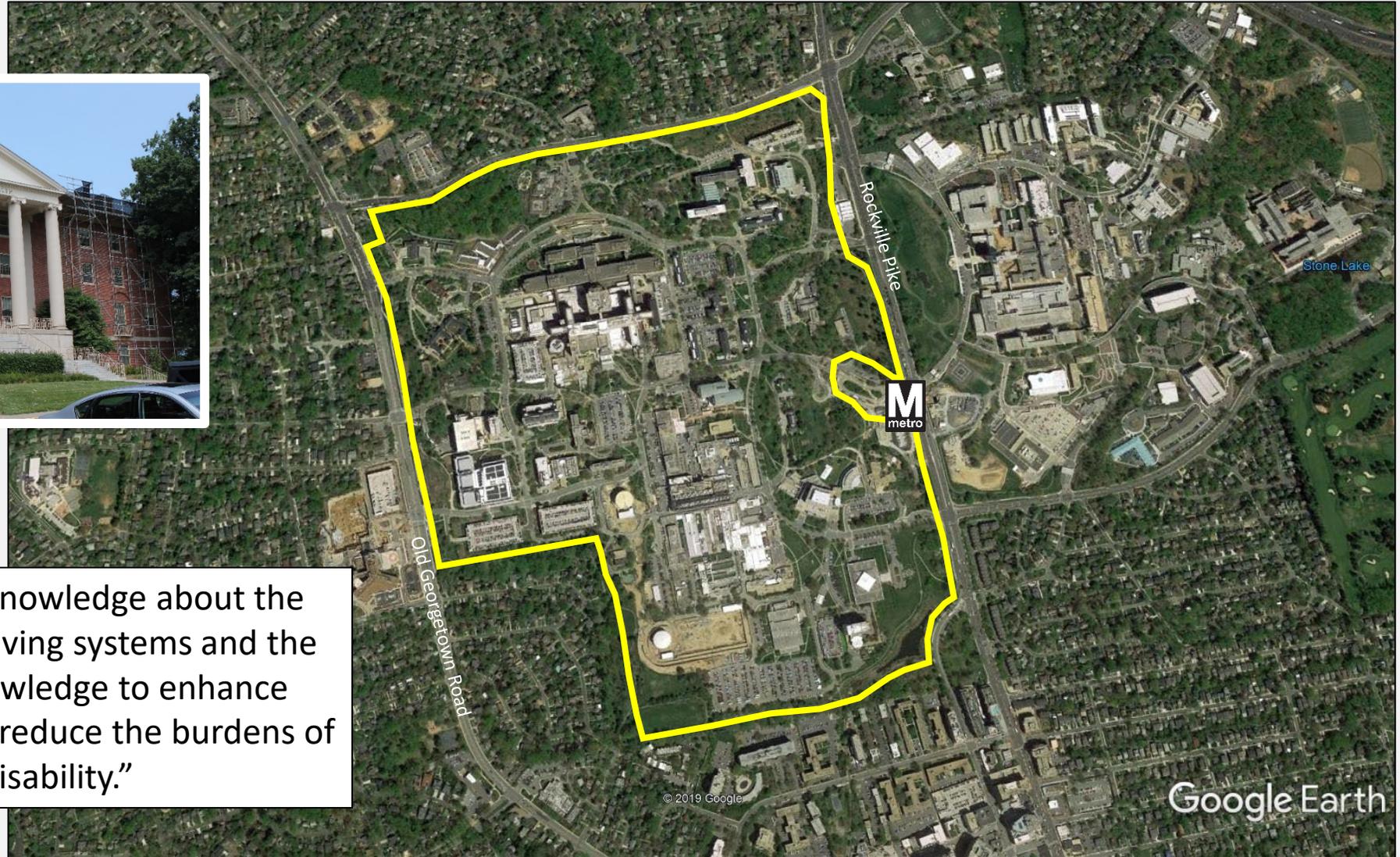
## Lighting

The Design-Build Contractor will be contractually responsible to finalize the lighting plan to comply with International Dark-Sky Association (IDSA) standards.

# Project Location



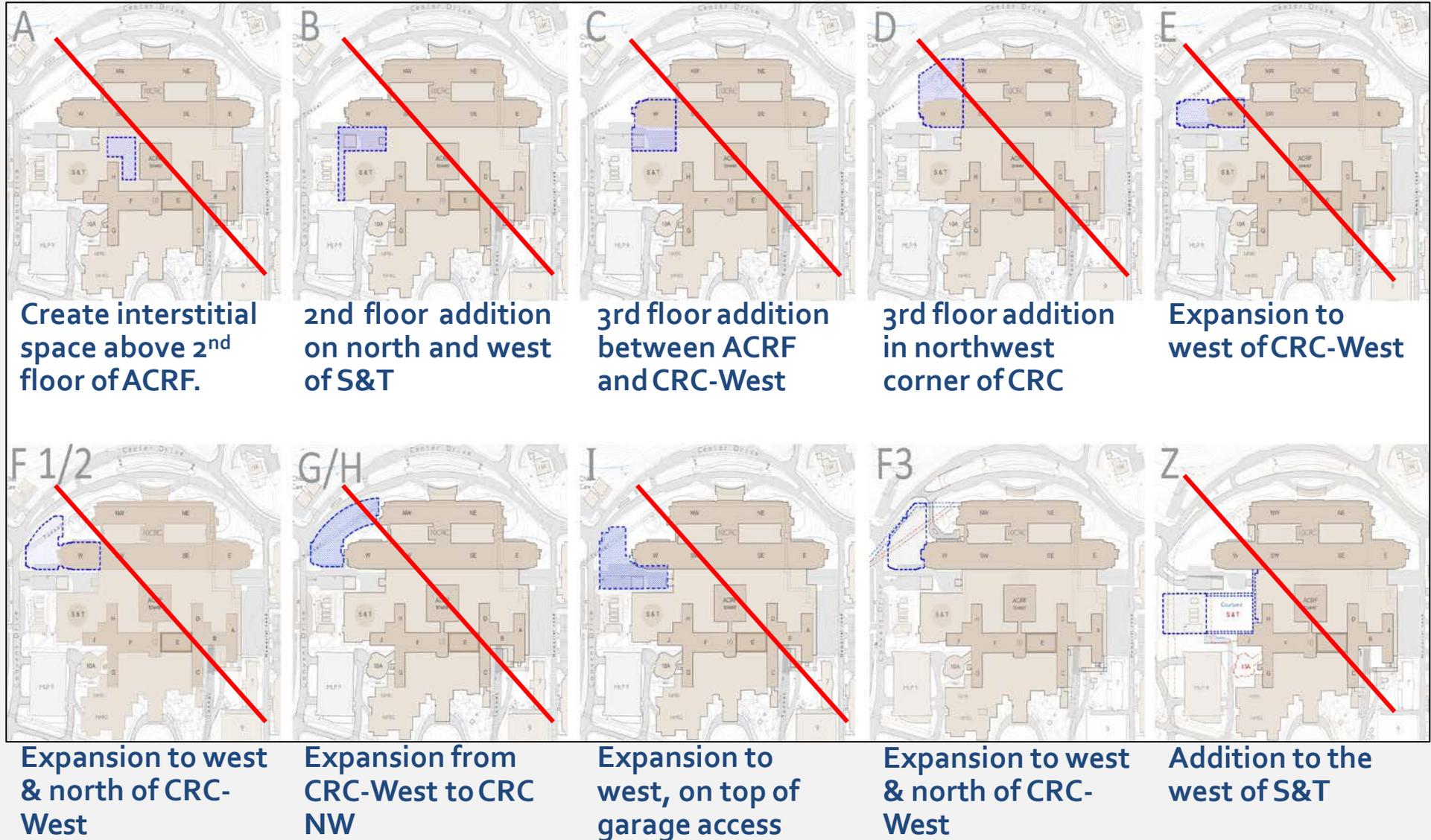
# NIH Campus



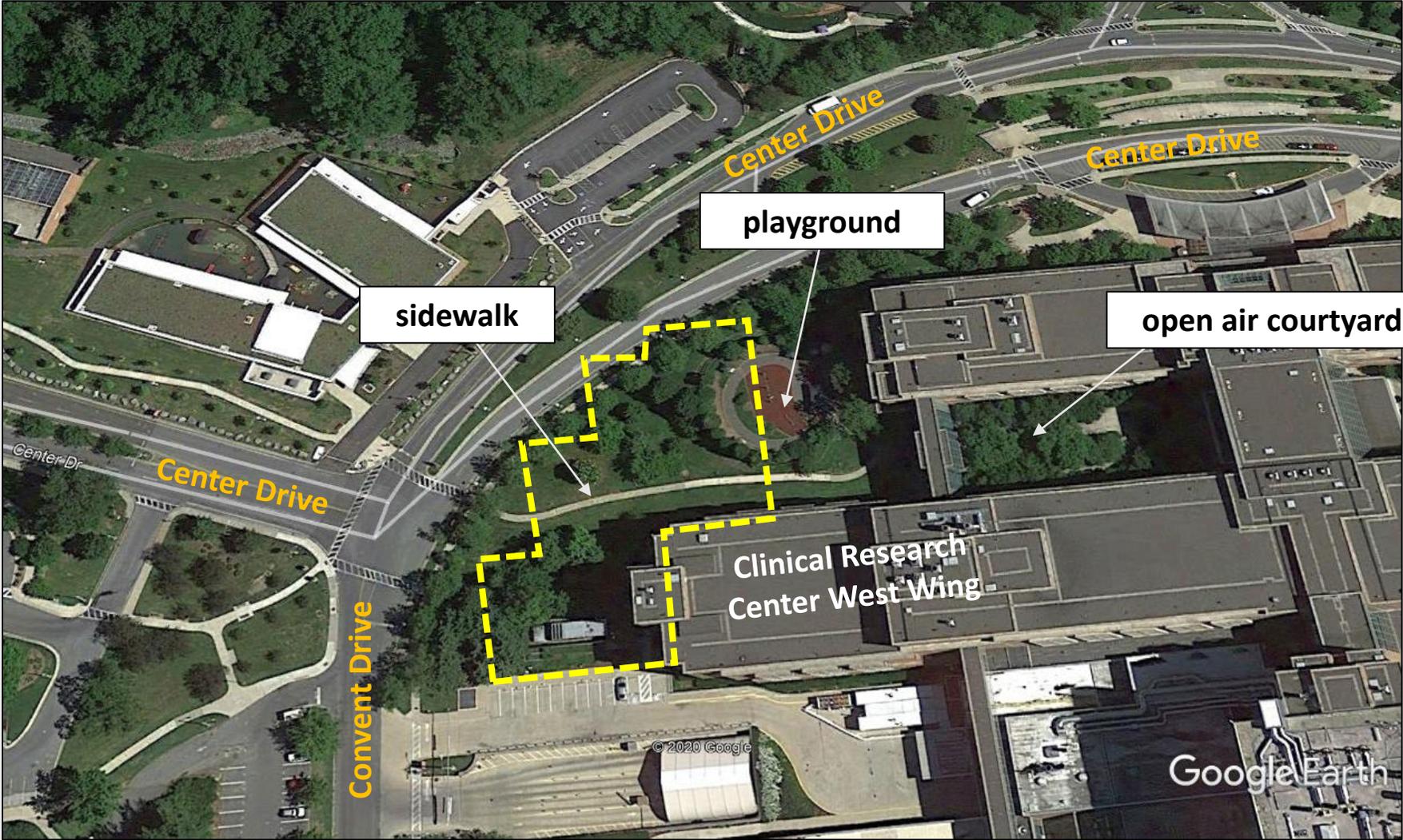
## NIH MISSION:

“To seek fundamental knowledge about the nature and behavior of living systems and the application of that knowledge to enhance health, lengthen life, and reduce the burdens of illness and disability.”

# Previous Concepts



# Existing Site



# Existing Site



# Existing Site



Photo B

# Existing Site



Photo C

# Existing Site



# December 2020 Preliminary Design

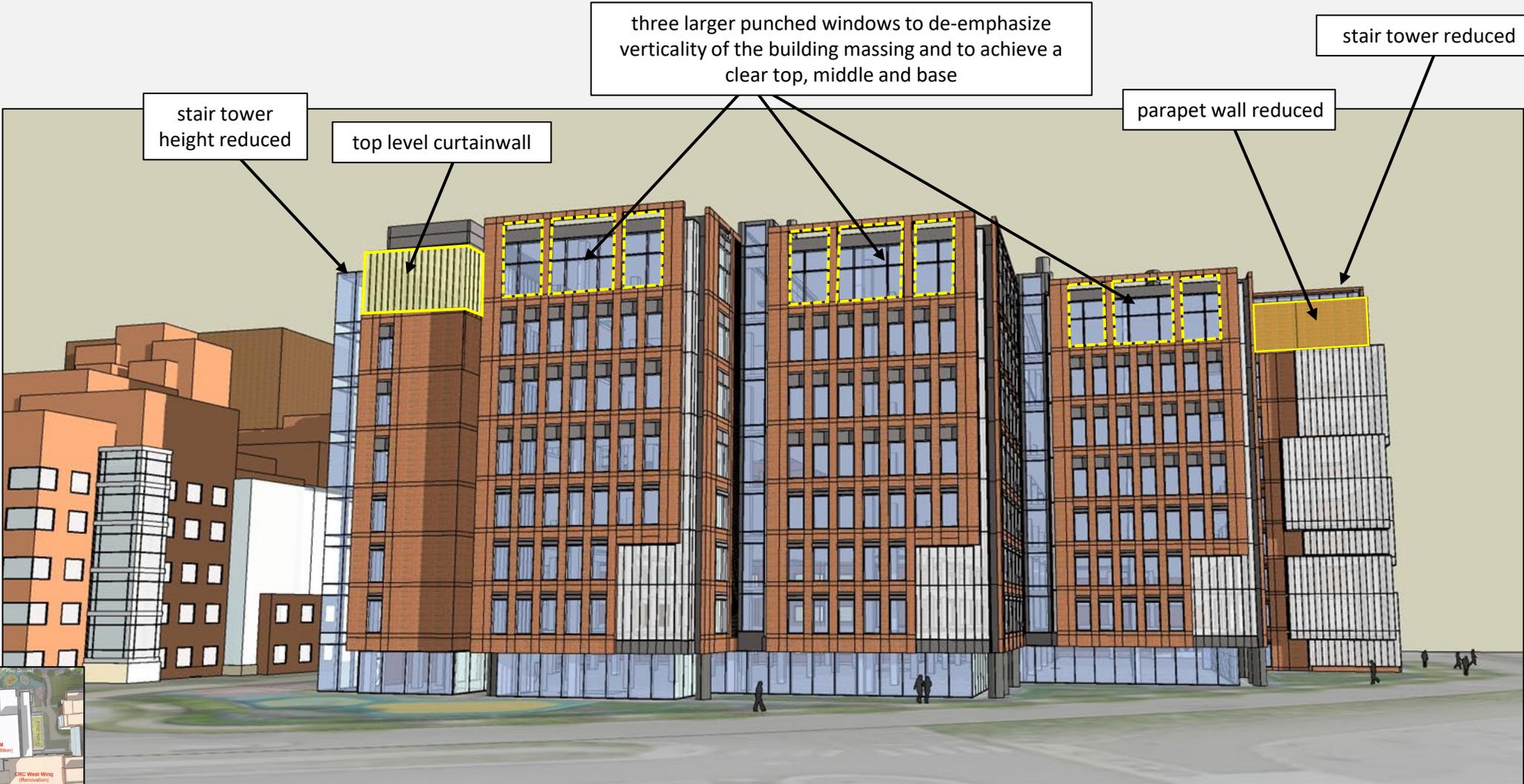


# January 2021 Interim Design *(considered, but not used)*



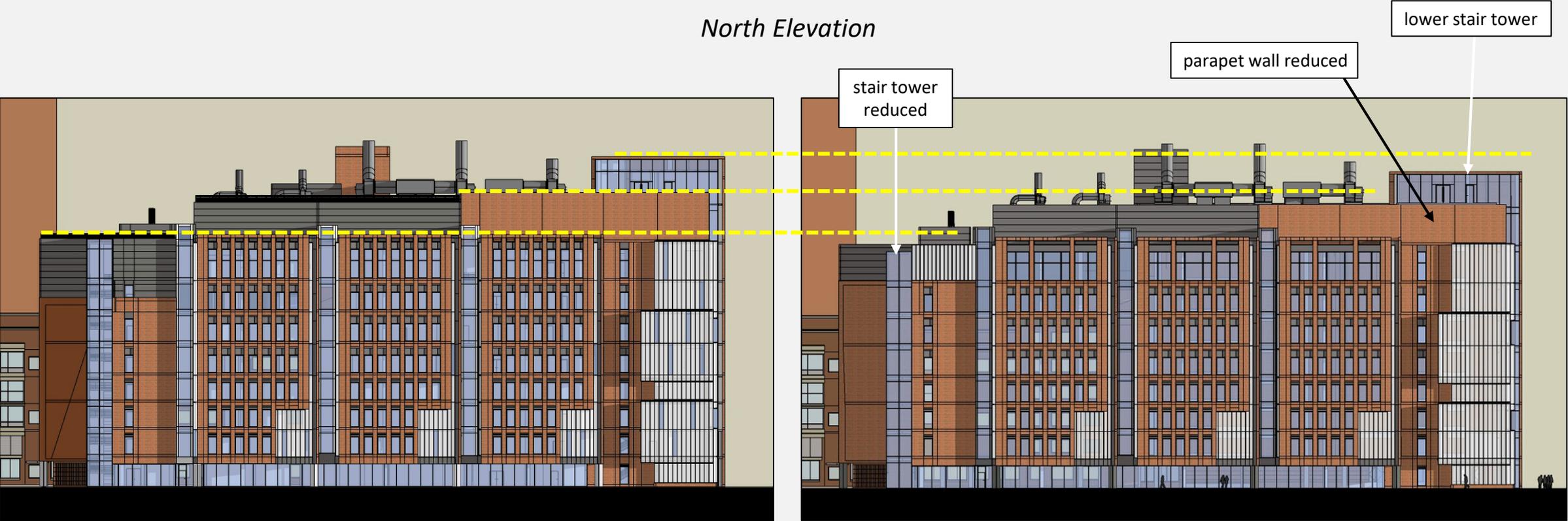
- More expansive top-level glass paneling did not relate to the rest of the building as well.
- New glass top complicated building design unnecessarily.

# March 2021 Final Design



# Final Building Design

North Elevation



December 2020 Design

March 2021 Design

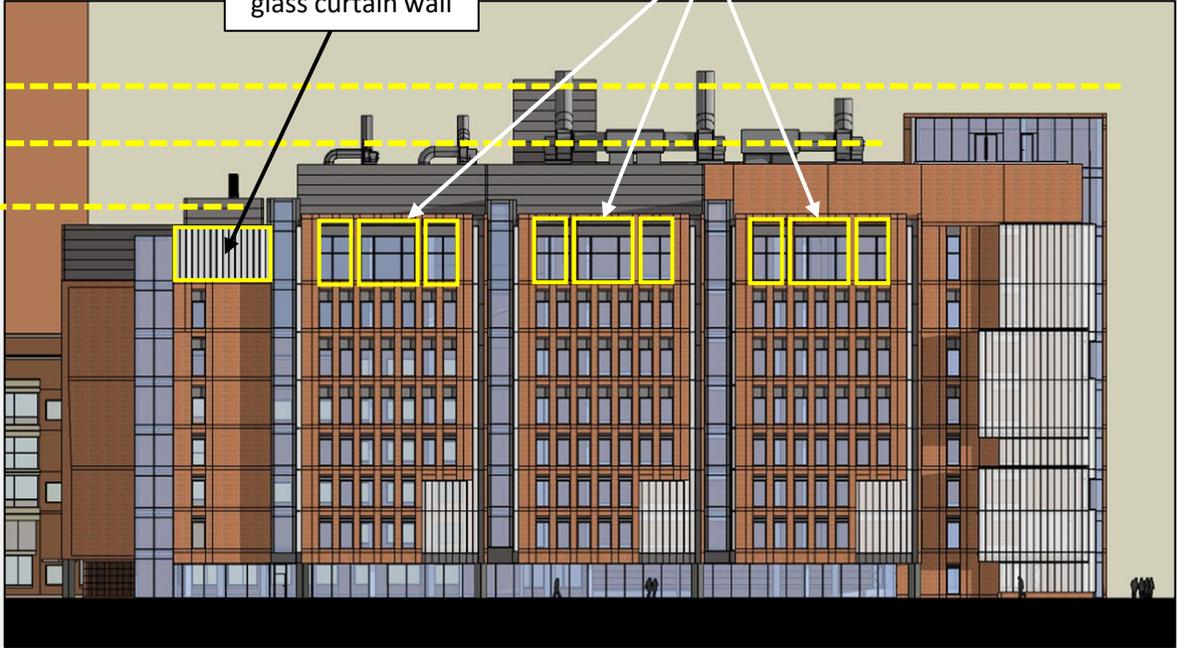


# Final Building Design

North Elevation



December 2020 Design



March 2021 Design

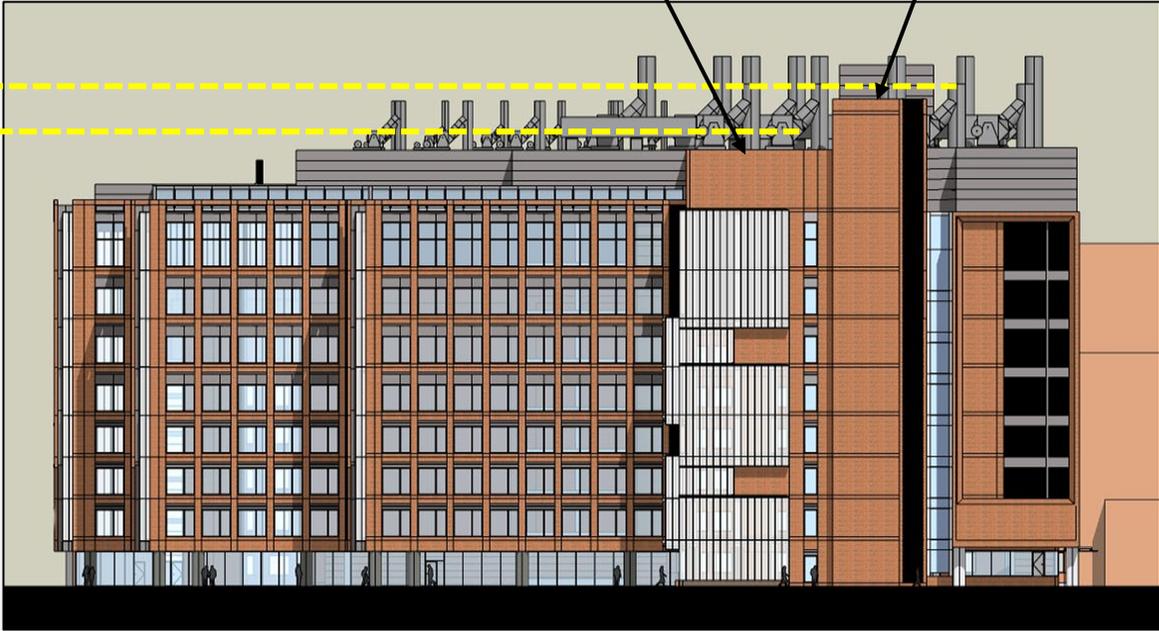


# Final Building Design

West Elevation



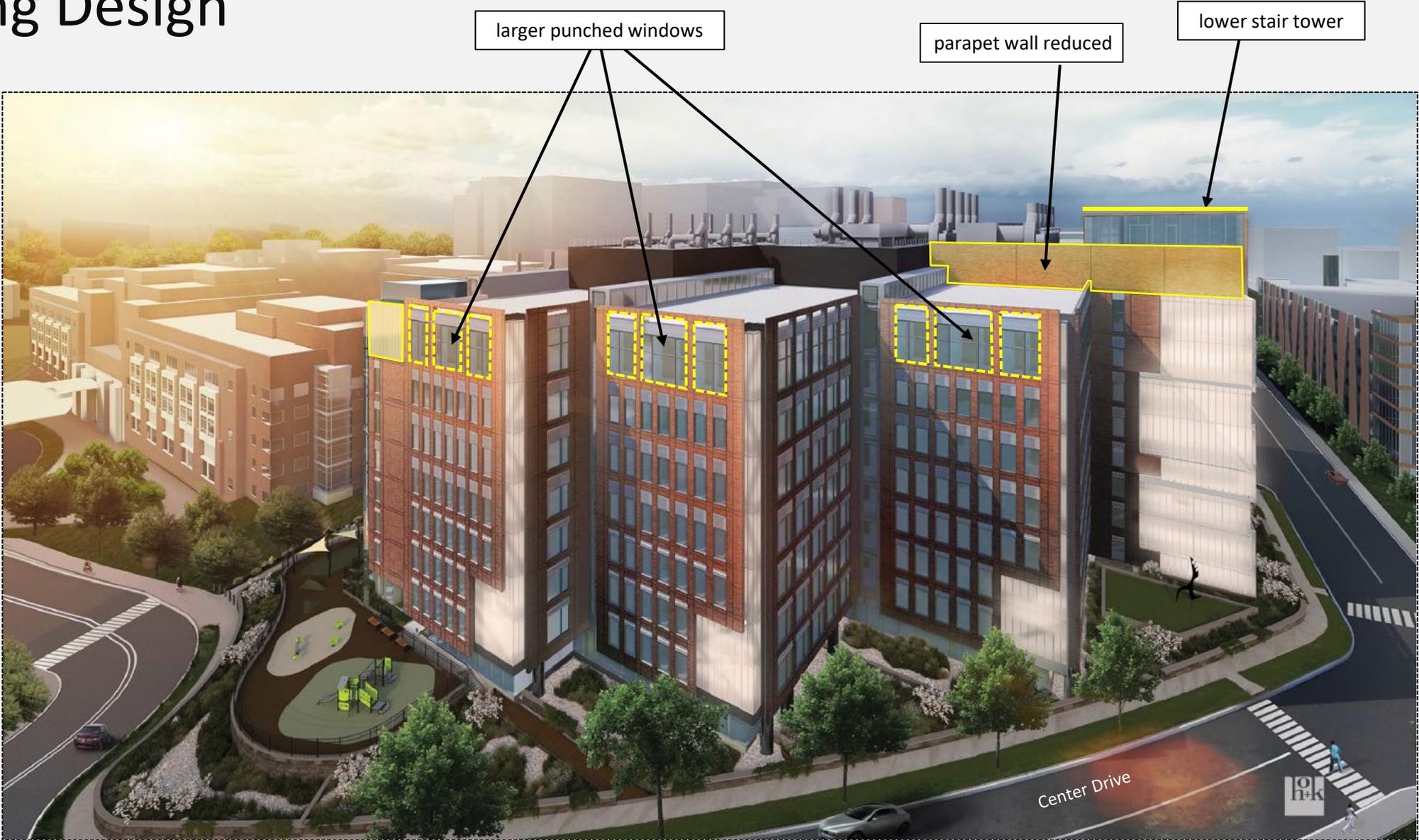
December 2020 Design



March 2021 Design



# Final Building Design



# Final Building Design



# Final Building Design



**December 2020 Design**



**March 2021 Design**

# Final Building Design

reduced stair tower height provides stronger relationship to existing CRC stair tower to the east

top level metal panel changed to glass curtainwall to reflect the sky - to visually de-materialize top floor

three larger punched windows on each wing



# Final Building Design



**December 2020 Design**



**March 2021 Design**

# Final Building Design

parapet wall lowered

stair tower reduced



# Final Building Design



# Final Building Design

**NOTE: west façade does not change.**  
1) punched window dimensions remain the same and 2) window heights remain the same



# Final Building Design



**December 2020 Design**



**March 2021 Design**

# Final Site Plan

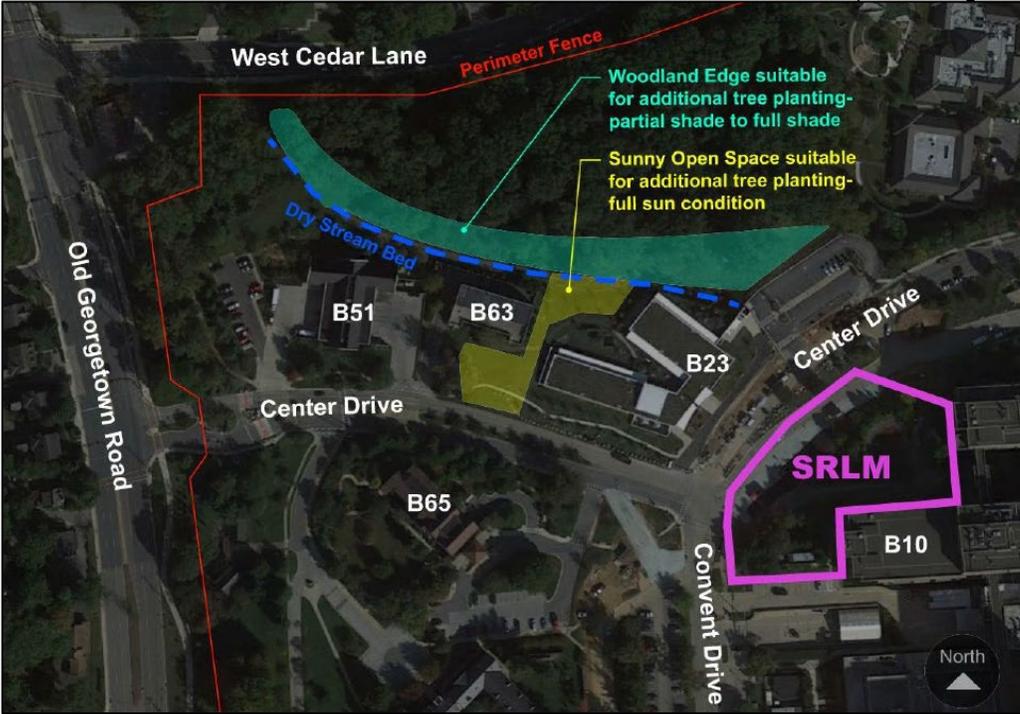


relocated playground

retaining wall

bio-retention gardens

# Final Landscape Plan



Tree Count	
Evergreen Trees	13
Shade Trees	36
Street Trees	19
<b>Total</b>	<b>68</b>

