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Office of Statewide Health Planning and Development	-
Facilities Development Division	

Senate Bill 499 (SB 499) Hospital Report

As submitted to California's Office of Statewide Health Planning and Development in accordance with Senate Bill 499 (SB 499) requirement for all general acute care hospitals with Structural Performance Category 1 (SPC-1) buildings to report annually with seismic safety compliance status, beds and services.

Provide the Hospital Owner and Year of Report per Section 130061(e)

Facility Number:	10048	
Facility Name:	John Muir Medical Center-Concord Campus]
Address:	2540 East Street]
City:	Concord]
Hospital Owner/Lice	ensee: John Muir Health	
Year of Rep	orting: 2018	
Contact 1 e-mail Ad	dress: [Confidential data left blank intentionally.]]
Contact 2 e-mail Ad	dress: [Confidential data left blank intentionally.]]
Contact 3 e-mail Add	dress:: [Confidential data left blank intentionally.]]
Name of Subi	mitter: Steve Hoffman]
Submission	Date: 12/6/2018 1:14:00 PM]

Report	/ear: 2018 10048	John Muir Medical Center-Cond	cord Campus	Concord		Page:2 of 67
For buildings For buildings which are planned for rebuild, retrofit or replacement this report shall identify; Whether the hospital owner intends to rebuild, retrofit or replace the building to SPC2, SPC3, SPC4, SPC4D or SPC5 per 130061(c)(1)(A). The deadline, as described in Section 130060 or 130061.5, for rebuild, retrofit or replacement of the building that the hospital owner intends to meet, and the applicable extension for which the hospital owner has been approved per Section 130061(c)(1)(B)						
Bldg. No.	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date
BLD- 02472	Original Hospital	2540 East Street	Rebuild	SPC5	01/01/2020	07/01/2019
BLD- 02476	D Wing	2540 East Street	Rebuild	SPC5	01/01/2020	07/01/2019
/						

Building I	No: BLD-02	2472	Oriç	ginal Hospital		Retrofit/Re Project:	eplacement	Yes-Subr	nitted	
Facility Number	Project Number	Sub Num	Scope		Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
10048	HS050491-0	0		RUCTION OF NEW TOWER AND EL WORK	3/3/2005	2/26/2008 12:00:00 AM	02/07/2008	11/30/2010	CLOS	No
		0	Master -	Elevator Tower Retrofit	3/8/2012		02/03/2014	01/09/2017	ACTI	No
For each projected status an	d construction nd approvals	n start o per <mark>Se</mark>	lanned for date or da ction 1300	r rebuild, retrofit or replacement, ates and projected Completion da 061(c)(1)(E).		per Section 1300	D61(c)(1)(D) a	and the most rece	ent project	
For each projected status an	00005 building whi construction d approvals	n start o per <mark>Se</mark>	lanned for date or da ction 1300	ates and projected Completion da		per Section 1300			ent project	
For each projectec status an Building I Facility	00005 building whi d construction d approvals No: BLD-02	n start o per <mark>Se</mark>	lanned for date or da ction 1300	ates and projected Completion da 061(c)(1)(E).		Retrofit/Re	D61(c)(1)(D) a	and the most rece	ent project	CEQA Review
For each projectec status an Building I Facility Number	00005 building whi d construction d approvals No: BLD-02 Project	start oper Se 2476 Sub Num	lanned for date or da ction 1300 D W Scope CONSTR	ates and projected Completion da 061(c)(1)(E).	ate or dates j	Retrofit/Re Project: Plan Approved	o61(c)(1)(D) a eplacement Projected	Yes-Subr Projected	ent project	CEQA Review

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Provide the number of inpatient	Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)							
Building Number: BLD-02472	Building Name: Ori	iginal Hospital						
Type of Service Provided								
Nursing Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery					
IntensiveCare Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby					
Pediatric/Adol Inpatient escent Beds	0 Inpatient Days 0	Clinical Lab	Emergency					
Psychiatric Inpatient Nursing Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine					
Obstetrical Inpatient Ante/Postprtum Beds	0 Inpatient Days 0		Rehabilitation Therapy					
Intermediate Inpatient Care Beds	0 Inpatient Days 0	X Administration	Renal Dialysis Outpatient					
Skilled Nursing Inpatient Beds	0 Inpatient Days 0	Services	Surgery					
	Total Beds this 0 Building	Obstetrical Cesarean/Deliv	Central Plant					
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Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)							
Building Number: BL	D-02476	Building Name: D W	Ving				
Type of Service Prov	<u>/ided</u>						
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery			
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby			
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency			
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	X Radiological/ Imaging	X Nuclear Medicine			
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy			
Intermediate Care	Inpatient Beds	0 Inpatient Days 0		Renal Dialysis			
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services	Outpatient Surgery			
		Total Beds this 0 Building	Obstetrical Cesarean/Deliv	Central Plant			
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Provide the number of Inpatie	ent beds and patient days per type of un	it per building per Section 1	130061(c)(1)(F)	
Building Number: BLD-02	2472 Building Name: Orig	ginal Hospital		
Medical / Surgical (Include	GYN) Acute Respiratory	y Care	Acute Psychiatric	
Inpatient 0 Inpatien Bed Days	nt 0 Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpa Bed Day	tient 0 s
Perinatal (excluse Newborr	n / GYN) Burn		Skilled Nursing	
Inpatient 0 Inpatien Bed Days	nt 0 Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpa Bed Day	tient 0 s
Pediatric	intensive Care Ne Nursery	wborn	Intermediate Card	
Inpatient 0 Inpatien Bed Days	nt 0 Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpa Bed Day	tient 0
Intensive Care	Rehabilitation Center		Int. Care / development Disabled	
Inpatient 0 Inpatien Bed Days	t 0 Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpa Bed Days	
Coronary Care	Chemical Dependency			al Beds this ding Per <i>v</i> ice
Inpatient 0 Inpatien Bed Days	nt 0 Inpatient 0 Bed	Inpatient 0 Days	0	0
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Provide the number	r of Inpatient beds and patier	nt days per type of uni	t per building per Section	on 130061(c)(1)(F)	
Building Number:	BLD-02476 Build	ling Name: D W	ing		
Medical / Surgical	(Include GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nev Nursery	wborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developr Disabled	nent
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0

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John Muir Medical Center-Concord Campus

Concord

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For all buildings at the facility, indicate which ones are scheduled for general acute service removal.

Building Number	Building Name	Building to be Removed / Replaced / Rebuilt
BLD-02472	Original Hospital	Rebuild
BLD-02473	C Wing	Remain
BLD-02476	D Wing	Rebuild
BLD-02478	C Wing Addition	Remain
BLD-02479	Linear Accelerator	Remain
BLD-02480	B Wing / Surgery Equipment Room	Remain
BLD-02482	Cancer Center	Remain
BLD-02483	Emergency Room	Remain
BLD-02485	A Wing	Remain
BLD-02486	Linear Accelerator	Remain
BLD-02487	Central Plant	Remain
BLD-02488	Boiler Plant	Remain
BLD-02939	Canopy 1	Remain
BLD-02940	Ambulance Canopy	Remain
BLD-02941	Canopy 2	Remain
BLD-02946	Canopy 3	Remain
BLD-05223	E Tower	Remain
BLD-05921	E-1	Remain

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No proposed new buildings	to be constr	ucted at this or another s	ite.		

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For the building or buildings to be replaced, rebuilt, removed from acute care service, provide the following: The projected date or dates the building will be removed from service per Section 130061 (c)(2)(A) and provide said date or dates for replaced or rebuild buildings as well. The planned uses of the building or buildings to be removed from acute care service per Section 130061(c)(2)(B) and provide said uses for replaced or rebuild buildings as well. The inpatient service currently delivered in the building or buildings per Section 130061(c)(2)(C)							
Building Number: BLD-	02472 Original He	ospital	Removal 07/01/2019 Date:				
Planned Uses for the build	ling to be removed from acute care	e service:					
Planned use for building:	-	Jurisdiction:					
Other Usage:	Most of building demolished, elev care buildings.	ator being rebuilt to allow for eq	gress from other acute				
Inpatient services current	y delivered in the building:						
Nursing	Surgical	Obstetrical Cesarean/De	eliv Rehabilitatio	on			
Pediatric/Adol escent	Anesthesia Clinical Lab	Obstetrical Recovery	Renal Dialys	sis			
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery				
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Plar	nt			
Intermediate Care	Dietetic	Nuclear Medicine	Support Services				
Skilled Nursing	X Administration						
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For the building or buildings to be replaced, rebuilt, removed from acute care service, provide the following: The projected date or dates the building will be removed from service per Section 130061 (c)(2)(A) and provide said date or dates for replaced or rebuild buildings as well. The planned uses of the building or buildings to be removed from acute care service per Section 130061(c)(2)(B) and provide said uses for replaced or rebuild buildings as well. The inpatient service currently delivered in the building or buildings per Section 130061(c)(2)(C)										
Building Number: BLD-0247	76 D Wing		Removal 07/01/2019 Date:							
Planned Uses for the building	to be removed from acute care s	ervice:								
Planned use for building:	edical Office Building	Jurisdiction: OSHPD]							
Inpatient services currently de	livered in the building:									
Nursing	Surgical	Obstetrical Cesarean/Deli	iv Rehabilitatio	n						
IntensiveCare	Anesthesia									
Pediatric/Adol escent	Clinical Lab	Obstetrical Recovery	Renal Dialys	sis						
Psychiatric Nursing	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery							
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Plan	t						
Intermediate Care	Dietetic	X Nuclear Medicine	Support Services							
Skilled Nursing	Administration									
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lo data reporte	d for Sectio	n 130061(d	c)(2)(D).		

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No data reported	d for Section	on 130061(c	c)(2)(D).		

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Report whether the general acute care services and beds will be relocated to a building sites or project numbers for buildings with a Building Resolution of "Ret	
Building BLD-02472 Building Name: Original Hospital Number:	
Will general acute care services and beds will be relocated to a new, Existing or	r retrofitted building?
Administration N/A	
Report whether the general acute care services and beds will be relocated to a building sites or project numbers for buildings with a Building Resolution of "Ret	
Building BLD-02476 Building Name: D Wing Number:	
Will general acute care services and beds will be relocated to a new, Existing or	r retrofitted building?
Radiological/Imaging N/A	
Report whether the general acute care services and beds will be relocated to a building sites or project numbers for buildings with a Building Resolution of "Ret	
Building BLD-02476 Building Name: D Wing Number:	
Will general acute care services and beds will be relocated to a new, Existing or	r retrofitted building?
Nuclear Medicine N/A	
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No data reporte	d for Section	on 130061(c)(3).		

port Year: 201 eport any general er Section 130061 uilding Number:	acute care hospital inpa (c)(4)	Muir Medical Center-Concord Campu itient service that is provided in any g Name: Original Hospital		are hospital building	that is rated SPC-1
Type of Service	Provided				
		Surgical	Obstet Cesare	rical an/Deliv	Rehabilitation Therapy
	Nursing	Anesthesia			
	IntensiveCare		Obstet Recov		Renal Dialysis
	Pediatric/Adol escent	Clinical Lab	Newbo		Outpatient Surgery
	Psychiatric	Radiological/ Imaging	WellBa		
	Nursing	Pharmaceutical	Emerg	ency	Central Plant
	Obstetrical Ante/Postprtum	Dietetic	Nuclea Medici		Support Services
	Intermediate Care	X Administration			
	Skilled Nursing				

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Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per Section 130061(c)(4)										
Building Number:	BLD-02476 Building	g Name: D Wing								
Type of Service	e Provided									
		Surgical	Obstetrical Cesarean/Deliv	Rehabil Therap						
	Nursing	Anesthesia			Nichroig					
	IntensiveCare		Obstetrical Recovery	Renal [Jaiysis					
	Pediatric/Adol escent	Clinical Lab	Newborn/ WellBaby	Outpation Surgery						
	Psychiatric Nursing	Imaging	,							
		Pharmaceutical	Emergency	Central	Plant					
	Obstetrical Ante/Postprtum	Dietetic	X Nuclear Medicine	Suppor Service						
	Intermediate Care	Administration								
	Skilled Nursing									
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number: BLD-02472 Building Name: Original Hospital Configuration: Remove from GAC service by 1/1/2030										
Type of Service Provided										
Nursing	Surgical	Obstetrical Cesarean/Deliv	Reha Thera	bilitation apy						
IntensiveCare	Anesthesia	Obstetrical Recovery	Rena	l Dialysis						
Pediatric/Adol escent	Clinical Lab	Recovery								
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge							
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Centr	al Plant						
Intermediate Care	Dietetic	Nuclear Medicine	Supp	oort						
Skilled Nursing	X Administration		Servi							
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	her by retrofit or by				ach building will comply w be provided in each genera					
Building Number:	BLD-02473	Building Na	me: C Wing							
Configuration: Remove from GAC service by 1/1/2030										
Type of Service	e Provided									
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Int	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	ediatric/Adol scent		Clinical Lab							
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Dutpatient Surgery			
	ostetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant			
	termediate are		Dietetic		Nuclear Medicine	X	Support			
Sk	killed Nursing	X	Administration				Services			
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	her by retrofit or by				ach building will comply wit be provided in each genera			
Building Number:	BLD-02476	Building Na	me: D Wing					
Configuration:	Remove from GA	C service by	1/1/2020					
Type of Service	Provided							
Nu	irsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis	
	diatric/Adol cent		Clinical Lab					
	ychiatric ırsing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	ostetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant	
Inte Ca	ermediate Ire		Dietetic	X	Nuclear Medicine		Support	
Sk	illed Nursing		Administration				Services	
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	her by retrofit or by				ach building will comply wi be provided in each genera					
Building Number:	BLD-02478	Building Na	me: C Wing Addition							
Configuration: Remove from GAC service by 1/1/2030										
Type of Service	e Provided									
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Int	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	ediatric/Adol scent		Clinical Lab							
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Dutpatient Surgery			
	bstetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant			
	termediate are		Dietetic		Nuclear Medicine	X	Support			
Sk	killed Nursing	X	Administration				Services			
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)									
Building Number:	BLD-02479	Building Na	me: Linear Accelerator	,					
Configuration:	Remove from GA	C service by	1/1/2030						
Type of Service	Provided								
Nui	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis		
	diatric/Adol cent		Clinical Lab		·····,				
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	stetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant		
	ermediate		Dietetic						
	lled Nursing	X	Administration	X	Nuclear Medicine	X	Support Services		
OSHPD FDD SB499 R	eport Da	ata Last Updat	e: 12/06/2018	Submiss	ion Date: 12/06/2018	Printed:	12/8/2018 6:30 AM		

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	uildings on the hospital campus show by replacement and the type of service										
Building Number: BLD-02480 Building Name: B Wing / Surgery Equipment Room											
Configuration: Remove from G	AC service by 1/1/2030										
Type of Service Provided											
X Nursing	X Surgical		tetrical [Rehal Thera	pilitation py						
X IntensiveCare	X Anesthesia		tetrical	Renal	Dialysis						
Pediatric/Adol escent	X Clinical Lab		Svery								
Psychiatric Nursing	X Radiological/ Imaging		born/ > Baby	C Outpa Surge							
Obstetrical Ante/Postprtum	X Pharmaceutical	Eme	rgency	Centra	al Plant						
	X Dietetic			_							
Care Skilled Nursing	X Administration	Nucl	ear Medicine	X Supp Servi							
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number: BLD-02482 Building Name: Cancer Center										
Configuration: Remove from (GAC service by 1/1/2030									
Type of Service Provided										
Nursing	Surgical	Obstetrical Cesarean/Deliv	Reha Thera	ibilitation apy						
IntensiveCare	Anesthesia	Obstetrical Recovery	Rena	l Dialysis						
Pediatric/Adol escent	Clinical Lab	Recovery								
Psychiatric Nursing	X Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge							
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Centr	ral Plant						
	Dietetic									
Care Skilled Nursing	Administration	Nuclear Medicine	X Supp Serv							
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number: BLD-02483 Building Name: Emergency Room										
Configuration: Remove from GAC service by 1/1/2030										
Type of Service	Provided									
Nur	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Inte	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	diatric/Adol cent		Clinical Lab							
	/chiatric rsing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	stetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant			
	ermediate re		Dietetic		Nuclear Medicine		Support			
Ski	lled Nursing	X	Administration				Services			
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number: BLD-02485 Building Name: A Wing										
Configuration: Retrofit Non-C	Conforming building to SPC 4D or SPC 5	5 and NPC 4 or N	IPC 5							
Type of Service Provided										
X Nursing	Surgical	Obste Cesa	etrical rean/Deliv	Rehab Theraj	bilitation by					
IntensiveCare	Anesthesia	Obste Reco		Renal	Dialysis					
Pediatric/Adol escent	Clinical Lab	Reco	very							
Psychiatric Nursing	Radiological/ Imaging	Newb WellB		Outpat Surgei						
Obstetrical Ante/Postprtum	Pharmaceutical	Emer	gency	Centra	al Plant					
	Dietetic									
Care Skilled Nursing	X Administration	Nucle	ear Medicine X	Suppo Servio						
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number: BLD-02486 Building Name: Linear Accelerator										
Configuration: Remove from GAC service by 1/1/2030										
Type of Service F	Provided									
Nurs	sing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Inter	nsiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
Pedi esce	iatric/Adol ent		Clinical Lab							
Psyc Nurs	chiatric sing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	tetrical e/Postprtum		Pharmaceutical		Emergency		Central Plant			
Inter Care	rmediate		Dietetic				-			
	ed Nursing		Administration	X	Nuclear Medicine	X	Support Services			
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number: BLD-02487 Building Name: Central Plant										
Configuration: Remove from GAC service by 1/1/2030										
Type of Service	Provided									
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Int	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	ediatric/Adol cent		Clinical Lab							
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	ostetrical hte/Postprtum		Pharmaceutical		Emergency	X	Central Plant			
Int Ca	ermediate are		Dietetic		Nuclear Medicine	X	Support			
Sk	illed Nursing		Administration				Services			
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number: BLD-02488 Building Name: Boiler Plant										
Configuration: Remove from GAC service by 1/1/2030										
Type of Service	Provided									
Nu	irsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	diatric/Adol cent		Clinical Lab							
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	ostetrical te/Postprtum		Pharmaceutical		Emergency	X	Central Plant			
Inte Ca	ermediate Ire		Dietetic		Nuclear Medicine	x	Support			
Sk	illed Nursing	X	Administration				Services			
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number: BLD-02939 Building Name: Canopy 1										
Configuration: Retrofit Conforming building to NPC 4 or NPC 5										
Type of Service Provided										
Nursing	Surgical	Obstetrica Cesarean/		Rehabilitation Therapy						
IntensiveCare	Anesthesia	Obstetrica Recovery	ı 🗌	Renal Dialysis						
Pediatric/Adol escent	Clinical Lab	Recovery								
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby		Outpatient Surgery						
Obstetrical Ante/Postprtum	Pharmaceutical	Emergenc	y 🗍	Central Plant						
Intermediate Care	Dietetic									
Skilled Nursing	Administration	Nuclear M	edicine	Support Services						
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Report Year: 2018 10048	John Muir Medical Center-Concord C	Campus Concord		Page:31 of 67						
Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number: BLD-02940 Building Name: Ambulance Canopy										
Configuration: Retrofit Confor	ming building to NPC 4 or NPC 5									
Type of Service Provided										
Nursing	Surgical	Obstetrical Cesarean/Deliv	Reha Thera	bilitation apy						
IntensiveCare	Anesthesia	Obstetrical Recovery	Rena	l Dialysis						
Pediatric/Adol escent	Clinical Lab	Recovery								
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge							
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Centr	al Plant						
Intermediate Care	Dietetic									
Skilled Nursing	Administration	Nuclear Medicine	Supp Servi							
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Report Year: 20	10048	John Muir Me	edical Center-Concord Ca	ampus	Cor	ncord	Page:32 of 67			
Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number: BLD-02941 Building Name: Canopy 2										
Configuration: Retrofit Conforming building to NPC 4 or NPC 5										
Type of Service	Provided									
Nu	ırsing		Surgical		Obstetrica Cesarean/			Rehabilitation Therapy		
	ensiveCare		Anesthesia		Obstetrica Recovery	I		Renal Dialysis		
	diatric/Adol cent		Clinical Lab		licectory					
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby			Outpatient Surgery		
	ostetrical te/Postprtum		Pharmaceutical		Emergenc	у		Central Plant		
Inte Ca	ermediate are		Dietetic		Nuclear M	edicine		Support		
Sk	illed Nursing		Administration					Services		
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number: BLD-02946 Building Name: Canopy 3										
Configuration: Retrofit Conforming building to NPC 4 or NPC 5										
Type of Service	Provided									
Nu	ursing		Surgical		Obstetrical Cesarean/De	eliv [ehabilitation herapy		
Int	ensiveCare		Anesthesia		Obstetrical Recovery	[R	enal Dialysis		
	ediatric/Adol cent		Clinical Lab							
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby	[utpatient Irgery		
	ostetrical nte/Postprtum		Pharmaceutical		Emergency	[Ce	entral Plant		
Int Ca	ermediate are		Dietetic		Nuclear Mec	licine		upport		
Sk	illed Nursing		Administration					ervices		
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Report Year: 20	018 10048 .	John Muir Me	edical Center-Concord Ca	ampus	Concord	Concord					
Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)											
Building Number: BLD-05223 Building Name: E Tower											
Configuration: Retrofit Conforming building to NPC 4 or NPC 5											
Type of Service	e Provided										
X N	ursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
X In	tensiveCare	X	Anesthesia		Obstetrical Recovery		Renal Dialysis				
	ediatric/Adol scent		Clinical Lab								
	sychiatric ursing	X	Radiological/ Imaging		Newborn/ WellBaby	X	Outpatient Surgery				
	bstetrical nte/Postprtum		Pharmaceutical	X	Emergency		Central Plant				
	termediate are		Dietetic		Nuclear Medicine	x	Support				
Sł	killed Nursing	X	Administration				Services				
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)									
Building Number: BLD-059	Building Name: E-1								
Configuration: Retrofit C	forming building to NPC	ning building to NPC 4 or NPC 5							
Type of Service Provided									
Nursing	Surg	gical	Obstetrical Cesarean/Deliv	Reha Thera	abilitation apy				
	Ane	sthesia	Obstetrical Recovery	Rena	al Dialysis				
Pediatric/Add escent	Clin	ical Lab							
Psychiatric Nursing		liological/	Newborn/ WellBaby	Outp Surge	atient ery				
Obstetrical Ante/Postprtu		Irmaceutical	Emergency	Cent	ral Plant				
Intermediate Care	Diet	tetic	Nuclear Medicine		port				
Skilled Nursir	Adm	ninistration			Support Services				
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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)										
Building Number: BLD-02473 Building Name: C Wing										
Type of Service Provided										
Nursing	Inpatient 0 Beds	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy						
IntensiveCare	Inpatient 0 Beds	Anesthesia								
Pediatric/Adol	Inpatient 0 Beds	Clinical Lab	Obstetrical Recovery	Renal Dialysis						
Psychiatric Nursing	Inpatient 0 Beds	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery						
Obstetrical Ante/Postprtum	Inpatient 0 Beds	Pharmaceutical	Emergency	Central Plant						
Intermediate	Inpatient 0 Beds	Dietetic	Nuclear Medicine	X Support Services						
Skilled Nursing	Inpatient 0 Beds	X Administration								
Total Beds this Building	0									
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Report Year: 2018	10048 Jo	hn Muir Medica	al Center-C	oncord Campus	Concord		Page:37 of 67			
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	Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4, AD and SPC-5 per Section 130061(e)									
Building Number: BLI	D-02478	Building N	ame: C	Wing Addition]			
Type of Service Prov	vided									
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy			
IntensiveCare	Inpatient Beds	0		Anesthesia						
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re	nal Dialysis			
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		tpatient gery			
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency		ntral Plant			
Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Suj Sei	oport vices			
Skilled Nursing	Inpatient Beds	0	X	Administration						
Total Beds this Building		0								
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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)										
Building Number: BLD-02479 Building Name: Linear Accelerator										
Type of Service Prov	<u>vided</u>									
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		nabilitation erapy			
IntensiveCare	Inpatient Beds	0		Anesthesia						
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rei	nal Dialysis			
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		patient gery			
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Cer	ntral Plant			
Intermediate	Inpatient Beds	0		Dietetic	X Nuclear Medicine		oport vices			
Skilled Nursing	Inpatient Beds	0	X	Administration						
Total Beds this Building		0								
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Report Year: 2018	10048	John Muir Medic	cal Center-C	Concord Campus		Concord		Page:39 of 67		
Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)										
Building Number: BLD-02480 Building Name: B Wing / Surgery Equipment Room										
Type of Service Provided										
X Nursing	Inpatient Beds	96	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
X IntensiveCare	Inpatient Beds	25	X	Anesthesia						
Pediatric/Adol	Inpatient Beds	0	X	Clinical Lab		Obstetrical Recovery		Renal Dialysis		
Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging		Newborn/ WellBaby	X	Outpatient Surgery		
Obstetrical Ante/Postprtum	Inpatient Beds	0	X	Pharmaceutical		Emergency		Central Plant		
Intermediate	Inpatient Beds	0	X	Dietetic		Nuclear Medicine	X	Support Services		
Skilled Nursing	Inpatient Beds	0	X	Administration						
Total Beds this Building		121								
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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)									
Building	Number: BLD	-02482	Building Nam	ne: Car	ncer Center]	
<u>Type o</u>	of Service Provi	ided							
N []	lursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy	
l lr	ntensiveCare	Inpatient Beds	0		Anesthesia				
	Pediatric/Adol scent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re	nal Dialysis	
	Psychiatric Iursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby		tpatient rgery	
	Dbstetrical Inte/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Ce	ntral Plant	
	ntermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine		pport rvices	
s S	killed Nursing	Inpatient Beds	0		Administration				
	otal Beds this Building		0						
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	Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)									
Building Number: BLD-02483 Building Name: Emergency Room										
Type of Service Prov	vided									
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		nabilitation erapy			
IntensiveCare	Inpatient Beds	0		Anesthesia						
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rei	nal Dialysis			
Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby		patient gery			
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Cer	ntral Plant			
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	Sup Ser	oport vices			
Skilled Nursing	Inpatient Beds	0	X	Administration						
Total Beds this Building		0								
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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)									
Building Number: BLD-02485 Building Name: A Wing									
Type of Service Prov	vided								
X Nursing	Inpatient Beds	63		Surgical	Obstetrical Cesarean/Deliv		nabilitation erapy		
IntensiveCare	Inpatient Beds	0		Anesthesia					
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rei	nal Dialysis		
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		patient gery		
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Cer	ntral Plant		
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine		oport vices		
Skilled Nursing	Inpatient Beds	0	X	Administration					
Total Beds this Building		63							
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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)									
Building Number:	BLD-02486	Building Na	ame: Linear Accelerator						
Type of Service	Provided								
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy				
IntensiveCa	re Inpatient Beds	0	Anesthesia						
Pediatric/Ad escent	dol Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis				
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery				
Obstetrical Ante/Postpr	Inpatient tum Beds	0	Pharmaceutical	Emergency	Central Plant				
Intermediate	e Inpatient Beds	0	Dietetic	X Nuclear Medicine	X Support Services				
Skilled Nurs	sing Inpatient Beds	0	Administration						
Total Beds t Building	this	0							
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Include information on 4D and SPC-5 per Sec			by type of Service provided by I	ouildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-02487	Building N	ame: Central Plant		
Type of Service Pro	vided				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	X Central Plant
Intermediate	Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			
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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)									
Building Number: BL	D-02488	Building N	lame: Boile	er Plant					
Type of Service Pro	vided								
Nursing	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
IntensiveCare	Inpatient Beds	0		Anesthesia					
Pediatric/Adol	Inpatient Beds	0		Clinical Lab		Dbstetrical Recovery		Renal Dialysis	
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	[] E	Emergency	X	Central Plant	
Intermediate	Inpatient Beds	0		Dietetic		Nuclear Aedicine	X	Support Services	
Skilled Nursing	Inpatient Beds	0	X	Administration					
Total Beds this Building		0							
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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)											
Building Nur	Building Number: BLD-02939 Building Name: Canopy 1										
Type of Se	ervice Prov	vided									
Nursi	ng	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy			
	siveCare	Inpatient Beds	0		Anesthesia	_					
Pedia escer	ntric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re	nal Dialysis			
Psych		Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		tpatient rgery			
Obste	etrical Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Ce	ntral Plant			
Intern Care	nediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	Su Se	pport rvices			
Skille	d Nursing	Inpatient Beds	0		Administration						
Total Buildi	Beds this ng		0								
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Include information on 4D and SPC-5 per Sec			by type of Service provided by b	buildings that are classified a	as SPC-2, SPC-3, SPC-4, SF	°C-
Building Number: BL	D-02940	Building Na	ame: Ambulance Canopy			
Type of Service Pro	vided					
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
IntensiveCare	Inpatient Beds	0	Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis	
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery	
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	Central Plant	
Intermediate	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services	
Skilled Nursing	Inpatient Beds	0	Administration			
Total Beds this Building		0				
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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)									
Building Numbe	er: BLD-02941	Building Na	me: Canopy 2						
Type of Servic	ce Provided								
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy				
Intensive	Care Inpatient Beds	0	Anesthesia	_					
Pediatric/ escent	Adol Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis				
Psychiatr Nursing	ic Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery				
Obstetrica Ante/Pos		0	Pharmaceutical	Emergency	Central Plant				
Intermedi Care	iate Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services				
Skilled No	ursing Inpatient Beds	0	Administration						
Total Bed Building	ds this	0							
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		the number o tion 130061(e		by type of S	Service provided by b	uildings that are classified a	as SPC-2, S	PC-3, SPC-4, SPC-
Building Nu	mber: BLI	D-02946	Building N	ame: Ca	nopy 3]
Type of Se	ervice Prov	vided						
Nursi	ing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
Inten	siveCare	Inpatient Beds	0		Anesthesia	_		
Pedia escer	atric/Adol nt	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re	nal Dialysis
Psycl	hiatric ing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		tpatient rgery
	etrical /Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Ce	ntral Plant
Interr Care	nediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	Su Se	pport rvices
Skille	ed Nursing	Inpatient Beds	0		Administration			
Total Buildi	Beds this ing		0					
OSHPD FDD SB	499 Report	Da	ata Last Update:	12/06/2018	3 Submission	Date: 12/06/2018 Pr	inted: 12/8/2	018 6:30 AM

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Include information on 4D and SPC-5 per Sec			by type of S	Service provided by bu	uildings that are classified	as SPC-2, S	PC-3, SPC-4, SPC-
Building Number: BLI	D-05223	Building N	lame: E	Fower]
Type of Service Prov	<u>/ided</u>						
X Nursing	Inpatient Beds	49	X	Surgical	Obstetrical Cesarean/Deliv		nabilitation erapy
X IntensiveCare	Inpatient Beds	12	X	Anesthesia			
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rei	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby		tpatient gery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	X Emergency		ntral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine		oport vices
Skilled Nursing	Inpatient Beds	0	X	Administration			
Total Beds this Building		61					
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	e information on d SPC-5 per <mark>Sec</mark>			by type of S	Service provided by b	uildings that are classified a	s SPC-2, S	PC-3, SPC-4, SPC-
Buildir	ng Number: BLC	D-05921	Building N	lame: E-	1]
Туре	of Service Prov	rided						
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		nabilitation erapy
	IntensiveCare	Inpatient Beds	0		Anesthesia			
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rei	nal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		tpatient gery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Cer	ntral Plant
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Sup Sei	oport vices
	Skilled Nursing	Inpatient Beds	0		Administration			
	Total Beds this Building		0					
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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC- 4D and SPC-5 per Section 130061(e)					
Building Number: BLD-02473 Build	ding Name: C Wing				
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0		
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0		
Pediatric	Intensive Care Newborn Nursery	Intermediate Care			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0		
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0		
Coronary Care	Chemical Dependency	Total Beds this Total Be Building Per Building			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days 0	Unit Service	0		
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Include information on the number of inpatier 4D and SPC-5 per Section 130061(e)	It beds by type of unit provided by buildings that	are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-02478 Bu	ilding Name: C Wing Addition	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0
OSHPD FDD SB499 Report Data Las	Update: 12/06/2018 Submission Date:	12/06/2018 Printed: 12/8/2018 6:30 AM

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Include information on the number of inpatien 4D and SPC-5 per Section 130061(e)	t beds by type of unit provided by buildings that	are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-02479 Bu	ilding Name: Linear Accelerator	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service
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Include information on the number of inpati 4D and SPC-5 per Section 130061(e)	ent beds by type of unit provided by buildings t	hat are classified as SPC-2, SPC-3,	, SPC-4, SPC-
Building Number: BLD-02480	B Wing / Surgery Equip	nent Room	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 96 Inpatient 17680 Bed Days	Bed 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
npatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0
ntensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
npatient 25 Inpatient 8666 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0
Coronary Care	Chemical Dependency	Building Per Build	ll Beds this ding Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv 121	121
OSHPD FDD SB499 Report Data La	ast Update: 12/06/2018 Submission Da	te: 12/06/2018 Printed: 12/8/	

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Include information on the number of inpatien 4D and SPC-5 per Section 130061(e)	It beds by type of unit provided by buildings that	are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-02482 Bu	ilding Name: Cancer Center	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
npatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
ntensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
npatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0
OSHPD FDD SB499 Report Data Las	Update: 12/06/2018 Submission Date:	12/06/2018 Printed: 12/8/2018 6:30 AM

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Include information on the number of inpatien 4D and SPC-5 per Section 130061(e)	t beds by type of unit provided by buildings that	are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-02483 Bu	ilding Name: Emergency Room	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service
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Include information on the number of inpatient 4D and SPC-5 per Section 130061(e)	beds by type of unit provided by buildings that	are classified as SPC-2, SPC-3, SPC-4, SPC-	
Building Number: BLD-02485 Buil	ding Name: A Wing		-
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 63 Inpatient 11603 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Coronary Care	Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 63 63	
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Include information on the number of inpatien 4D and SPC-5 per Section 130061(e)	It beds by type of unit provided by buildings that	are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-02486 Bu	Linear Accelerator	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days 0	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0
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Include information on the number of inpatien 4D and SPC-5 per Section 130061(e)	t beds by type of unit provided by buildings that	are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-02487 Bu	ilding Name: Central Plant	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0
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Include information on the number of inpatient 4D and SPC-5 per Section 130061(e)	t beds by type of unit provided by buildings that	are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-02488 Bu	ilding Name: Boiler Plant	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0
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Include information on the number of inpatier 4D and SPC-5 per Section 130061(e)	nt beds by type of unit provided by buildings that	t are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-02939 Bu	ilding Name: Canopy 1	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days 0	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service
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Include information on the number of inpatien 4D and SPC-5 per Section 130061(e)	t beds by type of unit provided by buildings that	are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-02940 Bu	ilding Name: Ambulance Canopy	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0
OSHPD FDD SB499 Report Data Last	Update: 12/06/2018 Submission Date:	12/06/2018 Printed: 12/8/2018 6:30 AM

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Include information on the number of inpatien 4D and SPC-5 per Section 130061(e)	nt beds by type of unit provided by buildings that	at are classified as SPC-2, SPC-3, SPC	-4, SPC-
Building Number: BLD-02941 Building Number:	uilding Name: Canopy 2		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
npatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0
Coronary Care	Chemical Dependency	Total Beds this Total Bed Building Per Building F	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service	0
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Include information on the number of inpatient 4D and SPC-5 per Section 130061(e)	nt beds by type of unit provided by buildings that	tt are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-02946 B	uilding Name: Canopy 3	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days 0
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days 0
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0
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Include information on the number of inpatier 4D and SPC-5 per Section 130061(e)	nt beds by type of unit provided by buildings that	t are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-05223 Bu	uilding Name: E Tower	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 49 Inpatient 9024 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 12 Inpatient 4159 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 61 61
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D and SPC-5 per Section 130061(e) uilding Number: BLD-05921 Build	ding Name: E-1		-
edical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
ed Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
rinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
ed Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days	
diatric	Intensive Care Newborn Nursery	Intermediate Care	
oatient 0 Inpatient 0 od Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
ensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
oatient 0 Inpatient 0 od Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
oronary Care	Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding Per	
ad Inpatient 0 Days 0	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0	