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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:	10180						
Facility Name:	The Ge	The General Hospital					
Address:	2200 Ha	arrison Ave					
City:	Eureka						
Hospital Owner/Lice	ensee:	St. Joseph Hospital / St. Joseph Health Northenr California, LLC					
Year of Rep	orting:	2018					
Contact 1 e-mail Ad	ldress:	[Confidential data left blank intentionally.]					
Contact 2 e-mail Ad	ldress:	[Confidential data left blank intentionally.]					
Contact 3 e-mail Add	dress::	[Confidential data left blank intentionally.]					
Name of Sub	mitter:	Bill Eveloff					
Submission	Date:	12/5/2018 3:43:23 PM					

Report Y	'ear: 2018 10180	The General Hospital		Eure	ka		Page:2 of 54
rebuild, re 130060 c	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		C Rating Juired	Extension Date	Anticipated Completion Date
BLD- 00523	Original Hospital Building	2200 Harrison Ave	Replace	SPC2	01	1/01/2020	12/01/2019
BLD- 00524	1950 Addition Building	2200 Harrison Ave	Replace	SPC2	01	1/01/2020	12/01/2019
BLD- 00525	1955 Addition Building	2200 Harrison Ave	Replace	SPC2	01	1/01/2020	12/01/2019
BLD- 00526	Center Building - 1957 Addition	2200 Harrison Ave	Replace	SPC2	01	1/01/2020	12/01/2019
BLD- 02651	West Side Building - 1957 Addition	2200 Harrison Ave	Replace	SPC2	01	1/01/2020	12/01/2019
J		J					

Leport Year: 2018 10180 The General Hospital		Eurek	а		Page:3 of	54
For each building which is planned for rebuild, retrofit or replacement, provide the project numbers, per Section $130061(c)(1)(C)$. The projected construction start date or dates and projected Completion date or dates per Section $130061(c)(1)(D)$ and the most recent project status and approvals per Section $130061(c)(1)(E)$.						
Building No: BLD-00523 Original Hospital Building		Retrofit/Re Project:	eplacement	Yes-Subr	nitted	
Facility Project Sub Number Number Num Scope	F Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
0183 H142544-12 0 SB 90 - Redwood Memorial Hosp -00 Addition&Rehab	11/4/2014	12/9/2016 12:00:00 AM	07/01/2018	12/31/2019	FIEL	No
For each building which is planned for rebuild, retrofit or replace projected construction start date or dates and projected Completatus and approvals per Section 130061(c)(1)(E). Building No: BLD-00524 1950 Addition Building		r Section 1300			ent project	
acility Project Sub Iumber Num Scope	F Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
0183 H142544-12 0 SB 90 - Redwood Memorial Hosp -00 Addition&Rehab	11/4/2014	12/9/2016 12:00:00 AM	07/01/2018	12/31/2019	FIEL	No

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For each building which is planned for rebuild, retrofit or replacement, provide the project numbers, per Section $130061(c)(1)(C)$. The projected construction start date or dates and projected Completion date or dates per Section $130061(c)(1)(D)$ and the most recent project status and approvals per Section $130061(c)(1)(E)$.							
Building No: BLD-00525	1955 Addition Building		Retrofit/Re Project:	eplacement	Yes-Sub	mitted]
Facility Project Sub Number Number Num	Scope	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
10183 H142544-12 0 -00	SB 90 - Redwood Memorial Hosp Addition&Rehab	11/4/2014	12/9/2016 12:00:00 AM	07/01/2018	12/31/2019	FIEL	No
	anned for rebuild, retrofit or replacement, plate or dates and projected Completion dates $130061(c)(1)(E)$.						
Building No: BLD-00526	Center Building - 1957 Addition		Retrofit/Re Project:	eplacement	Yes-Sub	mitted]
Facility Project Sub Number Number Num	Scope	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
10183 H142544-12 0 -00	SB 90 - Redwood Memorial Hosp Addition&Rehab	11/4/2014	12/9/2016 12:00:00 AM	07/01/2018	12/31/2019	FIEL	No
OSHPD FDD SB499 Report	Data Last Update: 12/05/2018	Submis	ssion Date: 12/0	05/2018	Printed: 12/7/20	18 6:30 AM	

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projected construction start date	For each building which is planned for rebuild, retrofit or replacement, provide the project numbers, per Section 130061(c)(1)(C). The projected construction start date or dates and projected Completion date or dates per Section 130061(c)(1)(D) and the most recent project status and approvals per Section 130061(c)(1)(E).						
Building No: BLD-02651	West Side Building - 1957 Addition		Retrofit/Re Project:	placement	Yes-Sub	mitted	
Facility Project Sub Number Number Num So	соре	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
	B 90 - Redwood Memorial Hosp ddition&Rehab	11/4/2014	12/9/2016 12:00:00 AM	07/01/2018	12/31/2019	FIEL	No
OSHPD FDD SB499 Report	Data Last Update: 12/05/2018	Submis	sion Date: 12/0	5/2018	Printed: 12/7/20	18 6:30 AM	

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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-00523	Building Name: Original	ginal Hospital Building			
<u>Type of Service Prov</u>	<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	Radiological/ Imaging	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		
	Deus	Total Beds this 0 Building	Obstetrical Cesarean/Deliv	Central Plant		
OSHPD FDD SB499 Repor	t	Data Last Update: 12/05/2018 Su	Ibmission Date: 12/05/2018	Printed: 12/7/2018 6:30 AM		

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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-00524	Building Name: 19	50 Addition Building				
Type of Service Provided		I				
Nursing Inpatien Beds	t 0 Inpatient 0 Days	Surgical	Obstetrical Recovery			
IntensiveCare Inpatien Beds	t 0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby			
Pediatric/Adol Inpatien escent Beds	t 0 Inpatient Days 0	Clinical Lab	Emergency			
Psychiatric Inpatien Nursing Beds	t 0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine			
Obstetrical Inpatien Ante/Postprtum Beds	t 0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy			
Intermediate Inpatien Care Beds	t 0 Inpatient Days 0		Renal Dialysis			
Skilled Nursing Inpatien Beds	t 0 Inpatient Days 0 Total Beds this 0	Support Services Obstetrical Cesarean/Deliv	Outpatient Surgery			
	Building		Central Plant			
OSHPD FDD SB499 Report	Data Last Update: 12/05/2018 S	ubmission Date: 12/05/2018	Printed: 12/7/2018 6:30 AM			

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Provide the number of inpatier	Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)					
Building Number: BLD-0052	5 Building Name: 199	55 Addition Building				
X Nursing Inpatie Beds	ent 15 Inpatient 2479 Days	Surgical	Obstetrical Recovery			
IntensiveCare Inpatie Beds	ent 0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby			
Pediatric/Adol Inpatie escent Beds	ent 0 Inpatient Days 0	Clinical Lab	Emergency			
Psychiatric Inpatie Nursing Beds	ent 0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine			
Obstetrical Inpatie Ante/Postprtum Beds	ent 0 Inpatient Days 0	Pharmaceutical Dietetic	X Rehabilitation Therapy			
Intermediate Inpatie Care Beds	ent 0 Inpatient Days 0	Administration	Renal Dialysis			
Skilled Nursing Inpatie Beds	ent 0 Inpatient Days 0	Services	Surgery			
	Total Beds this 15 Building	Obstetrical Cesarean/Deliv	X 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-00526	Building Name:	enter Building - 1957 Addition		
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	Radiological/ Imaging	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 Total Beds this 0	Support Services Obstetrical Cesarean/Deliv	Outpatient Surgery	
		Total Beds this 0 Building		Central Plant	
OSHPD FDD SB499 Repor	t	Data Last Update: 12/05/2018 S	ubmission Date: 12/05/2018	Printed: 12/7/2018 6:30 AM	

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Provide the number of	Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)						
Building Number: BLI		Building Name:	/est Side Building - 1957 Additi	on			
<u>Type of Service Prov</u>	ided		1				
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	Radiological/ Imaging	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 Total Beds this 0	Support Services Obstetrical Cesarean/Deliv	Outpatient Surgery			
		Building		Central Plant			
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Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)								
Building Number: BLD-00523 Building Name: Original Hospital Building								
Medical / Surgical (Include GYN) Acute Respiratory Care Acute Psychiatric								
Inpatient 0 Inpati Bed Days			Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days			
Perinatal (excluse Newbo	orn / GYN) Bu	ırn		Skilled Nursing				
Inpatient 0 Inpati Bed Days			Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days			
Pediatric		ensive Care Newl Irsery	born	Intermediate Card				
Inpatient 0 Inpatie Bed Days			Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days			
Intensive Care		habilitation nter		Int. Care / developn Disabled	nent			
Inpatient 0 Inpatie Bed Days	ent 0 Inp Bec		Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days			
Coronary Care		emical pendency		Total Beds this Building Per Unit	Total Beds this Building Per Service			
Inpatient 0 Inpatie Bed Days	ent 0 Inp Bec		Inpatient 0 Days	0	0			
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Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)							
Building Number: BLD-00524 Building Name: 1950 Addition Building							
Medical / Surgical (Include GYN) Acute Respiratory Care Acute Psychiatric							
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	nt 0				
Perinatal (excluse Newborn / GYN)	Burn	Skilled Nursing					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	nt 0				
Pediatric	intensive Care Newborn Nursery	Intermediate Card					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	nt 0				
Intensive Care	Rehabilitation Center	Int. Care / development Disabled					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	nt 0				
Coronary Care	Chemical Dependency		Beds this ng Per e				
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	0	0				

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Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)							
Building Number: BLD-00525 Building Name: 1955 Addition Building							
Medical / Surgical (Include GYN) Acute Respiratory Care Acute Psychiatric							
Inpatient 0 Inpatient Bed Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days					
Perinatal (excluse Newborn / GY	N) Burn	Skilled Nursing					
Inpatient 0 Inpatient Bed Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days					
Pediatric	intensive Care Newborn Nursery	Intermediate Card					
Inpatient 0 Inpatient Bed Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days					
Intensive Care	Rehabilitation Center	Int. Care / development Disabled					
Inpatient 0 Inpatient Bed Days	0 Inpatient 15 Inpatient 2479 Bed Days	Inpatient 0 Inpatient 0 Bed Days					
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per Unit Service					
Inpatient 0 Inpatient Bed Days	0 Inpatient 0 Inpatient 0 Bed Days						

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Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)							
Building Number: BLD-00526 Building Name: Center Building - 1957 Addition							
Medical / Surgical (Include GYN) Acute Respiratory Care Acute Psychiatric							
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	ent 0				
Perinatal (excluse Newborn / GYN)	Burn	Skilled Nursing					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	ent 0				
Pediatric	intensive Care Newborn Nursery	Intermediate Card					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	ent 0				
Intensive Care	Rehabilitation Center	Int. Care / development Disabled					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	nt 0				
Coronary Care	Chemical Dependency		Beds this ng Per ce				
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	0	0				

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Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)							
Building Number: BLD-02651 Building Name: West Side Building - 1957 Addition							
Medical / Surgical (Include GYN) Acute Respiratory Care Acute Psychiatric							
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	ent 0				
Perinatal (excluse Newborn / GYN)	Burn	Skilled Nursing					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	ent 0				
Pediatric	intensive Care Newborn Nursery	Intermediate Card					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	ent 0				
Intensive Care	Rehabilitation Center	Int. Care / development Disabled					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	nt 0				
Coronary Care	Chemical Dependency		Beds this ng Per ce				
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	0	0				

Building Number	Building Name	Building to be Removed / Replaced / Rebuilt	
BLD-00523	Original Hospital Building	Replace	
BLD-00524	1950 Addition Building	Replace	
3LD-00525	1955 Addition Building	Replace	
BLD-00526	Center Building - 1957 Addition	Replace	
BLD-02651	West Side Building - 1957 Addition	Replace	
BLD-02652	Stair #1	Remain	
BLD-02653	Nursery	Remain	
BLD-02654	Stair #2	Remain	
BLD-02655	Stair #3	Remain	
BLD-02656	Radiology Wing	Remain	
BLD-02657	Lobby	Remain	

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No proposed new buildings to be constructed at this or another site.

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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-00523 Original Hospital Building Removal Date: 12/01/2019						
Planned Uses for the buildir	ng to be removed from acute care service:					
Planned use for building:	Other Jurisdic	tion:				
Other Usage:	Non code required administrative					
Inpatient services currently	delivered in the building:					
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabilitatior Therapy	1		
IntensiveCare	Anesthesia					
Pediatric/Adol escent	Clinical Lab	Obstetrical Recovery	Renal Dialysi	S		
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery			
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Plant			
Intermediate Care	Dietetic	Nuclear Medicine	Support Services			
Skilled Nursing	Administration					
OSHPD FDD SB499 Report	Data Last Update: 12/05/2018	Submission Date: 12	2/05/2018 Printed: 12/7/2	018 6:30 AM		

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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-	00524	1950 Addi	tion Building		Removal Date:	12/01/2019]
Planned Uses for the build	ling to be rer	moved from acute care	e service:				
Planned use for building:	Other		Jurisdiction:]		
Other Usage:	Non code r	equired administrative	1				
Inpatient services currently	y delivered ir	<u>n the building:</u>					
Nursing		Surgical		Obstetrical Cesarean/Deliv	v [Rehabilitation Therapy	I.
IntensiveCare		Anesthesia					
Pediatric/Adol escent		Clinical Lab		Obstetrical Recovery		Renal Dialysis	5
Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant	
Intermediate Care		Dietetic		Nuclear Medicine] Support Services	
Skilled Nursing		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-(00525	1955 Addition Bu	uilding		Removal Date:	12/01/2019]
Planned Uses for the build	ing to be removed	from acute care servio	ce:				
Planned use for building:	Other	Juris	diction:				
Other Usage:	Non code require	ed administrative					
Inpatient services currently	delivered in the b	building:					
X Nursing	s s	urgical		Obstetrical Cesarean/Deliv	<i>,</i> [X Rehabilitation	
IntensiveCare	A	nesthesia					
Pediatric/Adol escent	c	linical Lab		Obstetrical Recovery	[Renal Dialysis	3
Psychiatric Nursing		adiological/ naging		Newborn/ WellBaby	[Outpatient Surgery	
Obstetrical Ante/Postprtum	PI	harmaceutical		Emergency	[X Central Plant	
Intermediate Care		ietetic		Nuclear Medicine	[Support	
Skilled Nursing		dministration				Services	
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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-(00526 Center B	uilding - 1957 Addition	Removal <u>12/01/2019</u> Date:			
Planned Uses for the build	ling to be removed from acute car	e service:				
Planned use for building:	Other	Jurisdiction:]			
Other Usage:	Non code required administrativ	e				
Inpatient services currently	delivered in the building:					
Nursing	Surgical	Obstetrical Cesarean/Deliv	v Rehabilitation	ı		
IntensiveCare	Anesthesia					
Pediatric/Adol escent	Clinical Lab	Obstetrical Recovery	Renal Dialys	S		
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery			
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Plant			
Intermediate Care	Dietetic	Nuclear Medicine	Support			
Skilled Nursing	Administration		Services			
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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-	02651 West Si	de Building - 1957 Addition	Removal 12/01/2019 Date:			
Planned Uses for the build	ding to be removed from acute c	are service:				
Planned use for building:	Other	Jurisdiction:]			
Other Usage:	Non code required administrat	ive				
Inpatient services currentl	y delivered in the building:					
Nursing	Surgical	Obstetrical Cesarean/Deli	v Rehabilitatio	n		
IntensiveCare	Anesthesia					
Pediatric/Adol escent	Clinical Lab	Obstetrical Recovery	Renal Dialys	is		
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery			
Obstetrical Ante/Postprtum	Pharmaceutica	Emergency	Central Plan	t		
Intermediate Care	Dietetic	Nuclear Medicine	Support Services			
Skilled Nursing	Administration		Geivices			
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No data reported for Sect	tion 130061(c)(2)(D).			

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lo data reported for S	Section 130061(c)(2)(D).		

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Report whether the general acute care services and beds will be relocated to a new, exis building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "	
Building BLD-00525 Building Name: 1955 Addition Building Number:	
Will general acute care services and beds will be relocated to a new, Existing or retrofitte	ed building?
Nursing N/A	
Report whether the general acute care services and beds will be relocated to a new, exis building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "	sting or retrofitted building and any corresponding 'Replace" per Section 130061(c)(2)(E)
Building BLD-00525 Building Name: 1955 Addition Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted	ed building?
Rehabilitation Therapy N/A	
Report whether the general acute care services and beds will be relocated to a new, exis building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "	
Building BLD-00525 Building Name: 1955 Addition Building Number:	
Will general acute care services and beds will be relocated to a new, Existing or retrofitte	ed building?
CentralPlant N/A	
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No data reported for Section 130061(c)(3).							

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Report any general as per Section 130061(c	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-00523 Building Name: Original Hospital Building								
Type of Service I	Provided							
		Surgical	Obstetrical Cesarean/I		ilitation 9y			
	Nursing	Anesthesia			Dialysis			
	IntensiveCare	Clinical Lab	Obstetrical Recovery		Dialysis			
	Pediatric/Adol escent	Radiological/	Newborn/ WellBaby	Outpat Surger				
	Psychiatric Nursing	Imaging Pharmaceutical	Emergency	/ Centra	l Plant			
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	Suppo Service	rt es			
	Intermediate Care	Administration						
	Skilled Nursing							
OSHPD FDD SB499 Rep	oort Data Last I	Jpdate: 12/05/2018 Subm	nission Date: 12/05/2	2018 Printed: 12/7/2	2018 6:30 AM			

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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-00524 Buildin	g Name: 1950 Addition Building					
Type of Service	e Provided						
		Surgical		bstetrical esarean/Deliv		Rehabilitation Therapy	
	Nursing		0				
	IntensiveCare	Anesthesia		bstetrical	F	Renal Dialysis	
		Clinical Lab	R	ecovery			
	Pediatric/Adol escent			ewborn/		Dutpatient Surgery	
	Psychiatric	Radiological/ Imaging	<u> </u>	/ellBaby			
	Nursing	Pharmaceutical	E E	mergency		Central Plant	
	Obstetrical Ante/Postprtum	Dietetic		uclear edicine		Support Services	
	Intermediate Care	Administration					
	Skilled Nursing						
OSHPD FDD SB499 R	eport Data Las	t Update: 12/05/2018 Subm	ission Date	: 12/05/2018	Printed:	12/7/2018 6:30 AM	

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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-00525 Buildin	g Name: 1955 Addition Building					
Type of Service	e Provided						
		Surgical		Dbstetrical Cesarean/Deliv	Х	Rehabilitation Therapy	
X	Nursing		C				
	IntensiveCare	Anesthesia		Dbstetrical Recovery		Renal Dialysis	
	Pediatric/Adol	Clinical Lab				Outpatient	
	escent	Radiological/		lewborn/ VellBaby		Surgery	
	Psychiatric Nursing	Imaging					
		Pharmaceutical	E	mergency	Х	Central Plant	
	Obstetrical Ante/Postprtum	Dietetic		luclear Iedicine		Support Services	
	Intermediate Care	Administration					
	Skilled Nursing						
OSHPD FDD SB499 Re	eport Data Las	t Update: 12/05/2018 Subm	ission Date	e: 12/05/2018	Printe	d: 12/7/2018 6:30 AM	

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Report any general per Section 130061		atient service that is provided in any	general ad	cute care hospital l	ouilding that is ra	ted SPC-1
Building Number:	BLD-00526 Buildi	ng Name: Center Building - 1957	Addition			
Type of Service	e Provided					
		Surgical		Obstetrical Cesarean/Deliv	Rehat Thera	pilitation py
	Nursing					· ·
	IntensiveCare	Anesthesia		Obstetrical Recovery	Renal	Dialysis
	Pediatric/Adol escent	Clinical Lab	_	·		
		Radiological/ Imaging		Newborn/ WellBaby	L Surge	ry
	Psychiatric Nursing	Pharmaceutical		Emergency	Centra	al Plant
	Obstetrical Ante/Postprtum	Dietetic		Nuclear Medicine	Suppo Servic	
	Intermediate Care	Administration				
	Skilled Nursing					
OSHPD FDD SB499 R	eport Data La	st Update: 12/05/2018 Sub	mission Dat	te: 12/05/2018	Printed: 12/7	/2018 6:30 AM

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Report any general per Section 130061		atient service that is provided in any	general ac	cute care hospital b	ouilding that is ra	ated SPC-1
Building Number:	BLD-02651 Buildin	ng Name: West Side Building - 19	957 Additio	n		
Type of Service	Provided					
		Surgical		Dbstetrical Cesarean/Deliv	Rehal Thera	pilitation pv
	Nursing					.,
	IntensiveCare	Anesthesia		Dbstetrical Recovery	Rena	Dialysis
	Pediatric/Adol escent	Clinical Lab	_			
		Radiological/ Imaging		lewborn/ VellBaby	L Surge	ry
	Psychiatric Nursing	Pharmaceutical	E	Emergency	Centr	al Plant
	Obstetrical Ante/Postprtum	Dietetic		luclear Iedicine	Suppo Servio	
	Intermediate Care	Administration				
	Skilled Nursing					
OSHPD FDD SB499 Re	eport Data La	st Update: 12/05/2018 Sub	mission Dat	e: 12/05/2018	Printed: 12/7	/2018 6:30 AM

Report Year: 2018 10180	The General Hospital	Eureka		Page:32 of 54				
	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-00523	Building Name: Original Hospita	al Building						
Configuration: Remove from	GAC service by 1/1/2020							
Type of Service Provided								
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehal Thera	pilitation Py				
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal	Dialysis				
Pediatric/Adol escent	Clinical Lab	Receivery						
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge					
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Centra	al Plant				
	Dietetic							
Care Skilled Nursing	Administration	Nuclear Medicine	Supp Servi					
OSHPD FDD SB499 Report	Data Last Update: 12/05/2018	Submission Date: 12/05/2018	Printed: 12/7/20	018 6:30 AM				

Report Year: 2018 10180	The General Hospital	Eurek	а	Page:33 of 54			
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-00524	Building Name: 1950 Addition Bu	ilding					
Configuration: Remove from	n GAC service by 1/1/2020						
Type of Service Provided							
Nursing	Surgical	Obstetrical Cesarean/De		abilitation rapy			
IntensiveCare	Anesthesia	Obstetrical Recovery	Ren	al Dialysis			
Pediatric/Adol escent	Clinical Lab						
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outp Surg	patient gery			
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Cent	tral Plant			
Intermediate Care	Dietetic	Nuclear Med		oport			
Skilled Nursing	Administration			vices			
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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-00525	Building Name: 1955 Addition Bu	ilding					
Configuration: Remove from	GAC service by 1/1/2020						
Type of Service Provided							
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabi Therap				
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal [Dialysis			
Pediatric/Adol escent	Clinical Lab	,					
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpati Surgery				
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central	Plant			
Intermediate Care	Dietetic	Nuclear Medicine	Support	rt			
Skilled Nursing	Administration		Service				
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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-00526 Building Name: Center Building - 1957 Addition											
Configuration:	guration: Remove from GAC service by 1/1/2020										
Type of Service Provided											
Nu	ursing		Surgical		Obstetr Cesare	ical an/Deliv		Rehabilitation Therapy			
	ensiveCare	Anesthesia			Obstetrical Recovery		Renal Dialysis				
	ediatric/Adol cent		Clinical Lab								
	sychiatric Irsing		Radiological/ Imaging		Newboi WellBal			Outpatient Surgery			
	ostetrical nte/Postprtum		Pharmaceutical		Emerge	ency		Central Plant			
Int Ca	ermediate are		Dietetic		Nuclear	r Medicine		Support			
Sk	illed Nursing		Administration					Services			
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Report Year: 20	Hospital			Eureka	Page:36 of	54					
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-02651 Building Name: West Side Building - 1957 Addition											
Configuration:	figuration: Remove from GAC service by 1/1/2020										
Type of Service Provided											
	ursing		Surgical		Obste Cesar	trical ean/Deliv		Rehabilitation Therapy			
Int	tensiveCare		Anesthesia		Obste			Renal Dialysis			
	ediatric/Adol cent		Clinical Lab		Recovery						
	sychiatric ursing		Radiological/ Imaging		Newb WellB			Outpatient Surgery			
	ostetrical hte/Postprtum		Pharmaceutical		Emerç	gency		Central Plant			
	ermediate are		Dietetic		Nucle	ar Medicine		Support			
Sk	illed Nursing		Administration					Services			
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Report Year: 20	ear: 2018 10180 The General Hospital					Eureka		Page:37 of 54	
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-02652 Building Name: Stair #1									
Configuration: Remove from GAC service by 1/1/2020									
Type of Service	e Provided								
	ursing		Surgical		Obste Cesar	trical ean/Deliv		Rehabilitation Therapy	
Int	tensiveCare		Anesthesia		Obste Recov			Renal Dialysis	
	ediatric/Adol scent		Clinical Lab						
	sychiatric ursing		Radiological/ Imaging		Newb WellB			Outpatient Surgery	
	bstetrical hte/Postprtum		Pharmaceutical		Emerç	gency		Central Plant	
	termediate are		Dietetic		Nucle	ar Medicine		Support	
Sk	killed 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-02653 Building Name: Nursery									
Configuration: Remove from GAC service by 1/1/2020									
Type of Service Provided									
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabilit Therapy	ation					
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal Di	alysis					
Pediatric/Adol escent	Clinical Lab								
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatier Surgery	nt					
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central F	Plant					
Intermediate Care	Dietetic	Nuclear Medicine	Support						
Skilled Nursing	Administration		Services						
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Report Year: 20	018 10180 ⁻	The General Hospital			Eureka	Eureka			
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-02654	Building Na	me: Stair #2						
Configuration: Remove from GAC service by 1/1/2020									
Type of Service	e Provided								
	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
Int	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis		
	ediatric/Adol scent		Clinical Lab		Necevery				
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	ostetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant		
	termediate are		Dietetic		Nuclear Medicine		Support		
	killed Nursing		Administration				Services		
OSHPD FDD SB499 F	Report Da	ata Last Updat	e: 12/05/2018	Submissi	on Date: 12/05/2018	Printed:	12/7/2018 6:30 AM		

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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-02655 Building Name: Stair #3									
Configuration: Remove from GAC service by 1/1/2020									
Type of Service	Provided								
Nu	ursing		Surgical		Obstet Cesare	trical ean/Deliv		Rehabilitation Therapy	
Int	tensiveCare		Anesthesia		Obstet Recov			Renal Dialysis	
	ediatric/Adol cent		Clinical Lab						
	sychiatric ursing		Radiological/ Imaging		Newbo WellBa	orn/ aby		Outpatient Surgery	
	ostetrical hte/Postprtum		Pharmaceutical		Emerg	jency		Central Plant	
Int Ca	ermediate are		Dietetic		Nuclea	ar Medicine		Support	
Sk	tilled 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-02656 Building Name: Radiology Wing									
Configuration: Remove from GAC service by 1/1/2020									
Type of Service Provided									
Nursing	Surgical	Obstetr Cesare	rical	Rehabilitation Therapy					
IntensiveCare	Anesthesia	Obstetr Recove		Renal Dialysis					
Pediatric/Adol escent	Clinical Lab		· 						
Psychiatric Nursing	Radiological/ Imaging	Newbo WellBa		Outpatient Surgery					
Obstetrical Ante/Postprtum	Pharmaceutical	Emerge	ency	Central Plant					
Intermediate Care	Dietetic	Nuclea	r Medicine	Support					
Skilled 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-02657 Building Name: Lobby									
Configuration: Remove from GAC service by 1/1/2020									
Type of Service Provided									
Nursing	Surgical	Obstet Cesare	rical	Rehabilitation Therapy					
IntensiveCare	Anesthesia	Obstet Recove		Renal Dialysis					
Pediatric/Adol escent	Clinical Lab								
Psychiatric Nursing	Radiological/ Imaging	Newbo WellBa	orn/	Outpatient Surgery					
Obstetrical Ante/Postprtum	Pharmaceutical	Emerg	ency	Central Plant					
Intermediate Care	Dietetic	Nuclea	ar Medicine	Support					
Skilled Nursing	Administration			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-4, AD and SPC-5 per Section 130061(e)										
Building Number: BL	Building Number: BLD-02652 Building Name: Stair #1									
Type of Service Provided										
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		nabilitation erapy			
IntensiveCare	Inpatient Beds	0		Anesthesia						
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rer	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		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-02653	Building N	lame: Nursery						
Type of Service P	rovided								
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy				
IntensiveCare	e Inpatient Beds	0	Anesthesia						
Pediatric/Ado escent	l Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis				
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery				
Obstetrical Ante/Postprtu	Inpatient m Beds	0	Pharmaceutica	Emergency	Central Plant				
Intermediate	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services				
Skilled Nursin	g Inpatient Beds	0	Administration						
Total Beds th Building	s	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-02654	Building N	lame: Stair #2						
Type of Service P	rovided								
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy				
IntensiveCar	e Inpatient Beds	0	Anesthesia						
Pediatric/Add escent	ol Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis				
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery				
Obstetrical Ante/Postprtu	Inpatient um Beds	0	Pharmaceutica	Emergency	Central Plant				
Intermediate	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services				
Skilled Nursi	ng Inpatient Beds	0	Administration						
Total Beds th Building	nis	0							
OSHPD FDD SB499 Rep	ort Di	ata Last Update:	12/05/2018 Submi	ssion Date: 12/05/2018	Printed: 12/7/2018 6:30 AM				
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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-02655	Building N	lame: Stair #3						
Type of Service F	Provided								
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy				
IntensiveCar	e Inpatient Beds	0	Anesthesia						
Pediatric/Add escent	ol Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis				
Psychiatric	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery				
Obstetrical Ante/Postprt	Inpatient um Beds	0	Pharmaceutica	Emergency	Central Plant				
Intermediate	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services				
Skilled Nursi	ng Inpatient Beds	0	Administration						
Total Beds th Building	nis	0							
OSHPD FDD SB499 Rep	oort D	ata Last Update:	12/05/2018 Submi	ssion Date: 12/05/2018	Printed: 12/7/2018 6:30 AM				
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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-02656 Building Name: Radiology Wing									
Type of Service Provided									
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy				
IntensiveCare	Inpatient Beds	0	Anesthesia						
Pediatric/Adol	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis				
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery				
Obstetrical Ante/Postprtu	Inpatient m Beds	0	Pharmaceutical	Emergency	Central Plant				
Intermediate	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services				
Skilled Nursing	g Inpatient Beds	0	Administration						
Total Beds this Building	6	0							
OSHPD FDD SB499 Repo	rt Di	ata Last Update:	12/05/2018 Submissic	on Date: 12/05/2018 Pr					
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Report Year: 2018 10180 The General Hospital					Eureka	Eureka			
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-02657	Building N	lame: Lobby	,					
Type of Service	Provided								
Nursing	Inpatient Beds	0	S S	urgical	Obstetrical Cesarean/Deliv		ehabilitation nerapy		
IntensiveCa	are Inpatient Beds	0	AI	nesthesia					
Pediatric/Adescent	dol Inpatient Beds	0		linical Lab	Obstetrical Recovery		enal Dialysis		
Psychiatric Nursing	Inpatient Beds	0		adiological/ naging	Newborn/ WellBaby		utpatient urgery		
Obstetrical Ante/Postp	Inpatient rtum Beds	0	PI	harmaceutical	Emergency		entral Plant		
Intermediat	e Inpatient Beds	0		ietetic	Nuclear Medicine		upport ervices		
Skilled Nurs	sing Inpatient Beds	0		dministration					
Total Beds Building	this	0							
OSHPD FDD SB499 Re	eport D	ata Last Update:	12/05/2018	Submission	Date: 12/05/2018	Printed: 12/7/	2018 6·30 AM		
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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-02652 Building Name: Stair #1 Medical / Surgical (Include GYN) Acute Respiratory Care Acute Psychiatric Inpatient 0 Inpatient 0 Inpatient 0 Bed 0 Inpatient 0 Inpatient 0 Inpatient 0 Bed 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Perinatal (Exclude Newborn / GYN) Burn Skilled Nursing Inpatient 0 Inpatient	Report Year: 2018 10180 The Gene	eral Hospital	ureka	Page:49 of 54	
Medical / Surgical (Include GYN) Acute Respiratory Care Acute Psychiatric Inpatient 0 Inpatient 0 Inpatient 0 Bed 0 Inpatient 0 Inpatient 0 Inpatient 0 Perinatal (Exclude Newborn / GYN) Burn Skilled Nursing Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Bed 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient					
Inpatient 0 Inpatient 0 <td< td=""><td>Building Number: BLD-02652 Build</td><td>ling Name: Stair #1</td><td></td><td></td></td<>	Building Number: BLD-02652 Build	ling Name: Stair #1			
Bed Days Bed Days Bed Days Perinatal (Exclude Newborn / GYN) Burn Skilled Nursing Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Bed 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Bed 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Pediatric Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Bed 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Bed 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Intensive Care Rehabilitation Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient <td>Medical / Surgical (Include GYN)</td> <td>Acute Respiratory Care</td> <td>Acute Psychiatric</td> <td></td>	Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Bed 0 Jays 0 Inpatient 0 Inpatient 0 Inpatient 0 Pediatric Intensive Care Newborn Intermediate Care Intermediate Care Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Bed 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Bed 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Bed 0 Inpatient 0				it 0	
Bed Days Bed Days Bed Days Pediatric Intensive Care Newborn Nursery Intermediate Care Inpatient 0 Inpatient 0 Inpatient 0 Bed 0 Inpatient 0 Inpatient 0 Intensive Care Rehabilitation Center Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Bed 0 Inpatient 0 Inpatient 0 Inpatient 0 Bed 0 Inpatient 0 Inpatient 0 Inpatient 0 Bed 0 Days 0 Inpatient 0 Inpatient 0 Bed 0 Days 0 Inpatient 0 Inpatient 0 Bed 0 Days 0 Inpatient 0 Inpatient 0 Coronary Care Chemical Dependency Total Beds this Building P	Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Nursery Inpatient 0 Inpatient 0 <td< td=""><td></td><td></td><td></td><td>ıt0</td></td<>				ıt0	
Bed Days Bed Days Bed Days Intensive Care Rehabilitation Center Int. Care / Developmentally Disabled Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Bed 0 Inpatient 0 Inpatient 0 Inpatient 0 Bed 0 Days 0 Coronary Care Chemical Dependency Total Beds this Building Per Unit Total Beds this Building Per	Pediatric		Intermediate Care		
Intensive Care Rehabilitation Center Disabled Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Bed 0 Inpatient 0 Inpatient 0 Inpatient 0 Coronary Care Chemical Dependency Total Beds this Building Per Unit Total Beds this Building Per Service				it O	
Bed Days Bed Days Days Days Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per Building Per	Intensive Care				
Building Per Building Per Building Per				t 0	
Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0	Coronary Care	Chemical Dependency	Building Per Build	ling Per	
Bed Days Bed Days 0 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-02653 B	uilding Name: Nursery			
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0	
Coronary Care	Chemical Dependency	Building Per Build	Beds this ling Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Servi	0	
OSHPD FDD SB499 Report Data Las	t Update: 12/05/2018 Submission Date	e: 12/05/2018 Printed: 12/7/2	2018 6:30 AM	

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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-02654 Buil	ding Name: Stair #2			
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 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		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	nt 0	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0	
Coronary Care	Chemical Dependency	Building Per Build	l Beds this ding Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv	0	
OSHPD FDD SB499 Report Data Last U	pdate: 12/05/2018 Submission Date	e: 12/05/2018 Printed: 12/7/	2018 6:30 AM	

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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-02655 Build	Stair #3			
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 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		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	,	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt O	
Coronary Care	Chemical Dependency	Building Per Build	l Beds this ding Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv	0	
OSHPD FDD SB499 Report Data Last Up	odate: 12/05/2018 Submission Date	: 12/05/2018 Printed: 12/7/	2018 6:20 AM	

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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-02656 Build	ding Name: Radiology Wing			
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	ıt 0	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	ıt 0	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	nt 0	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t O	
Coronary Care	Chemical Dependency	Building Per Build	l Beds this ding Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv	0	
OSHPD FDD SB499 Report Data Last U	pdate: 12/05/2018 Submission Date:	12/05/2018 Printed: 12/7/2	2018 6:30 AM	

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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-02657 B	uilding Name: Lobby			
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	Building Per Building		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service	0	
OSHPD FDD SB499 Report Data Las	t Update: 12/05/2018 Submission Date	: 12/05/2018 Printed: 12/7/201	8 6:30 AM	