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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:	10856		-
Facility Name:	Regiona	al Medical Center of San Jose	
Address:	225 N J	ackson Ave	
City:	San Jos	e	
			-
Hospital Owner/Lice	ensee:	San Jose Healthcare System, LP	
Year of Rep	orting:	2018	
Contact 1 e-mail Address:		[Confidential data left blank intentionally.]	
Contact 2 e-mail Address:		[Confidential data left blank intentionally.]	
Contact 3 e-mail Address::		[Confidential data left blank intentionally.]	
Name of Sub	mitter:	Cheryl Moses	
Submission	Date:	10/15/2018 4:27:00 PM	

Report	Year: 2018 10856	Regional Medical Center of Sa	n Jose	San Jose		Page:2 of 54	
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- 02236	Main Tower and North Wing	225 N Jackson Ave	Rebuild	SPC5	09/01/2015	12/31/2015	
3LD-)2237	South Wing	225 N Jackson Ave	Rebuild	SPC5	09/01/2015	05/01/2015	
BLD- 02238	Obstetrics Wing	225 N Jackson Ave	Rebuild	SPC5	09/01/2015	05/01/2015	

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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-	02236	Mai	n Tower and North	n Wing		Retrofit/Re Project:	eplacement	No		
Facility Project Number Number	Sub Num	Scope		Date		n Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
10856 HS032305-0) C)		10/7/2		(19/2005 12:00:00 AM	10/17/2005	05/01/2010	CLOS	No
10856 IS102399-0	C	1		12/8/2	010		12/31/2010	09/01/2014	PEND	No
10856 SS100429-0) C)		3/16/2		/26/2010 12:00:00 AM	12/01/2010	02/01/2012	CLOS	No
projected construction status and approvals	on start	date or da	ates and projected	replacement, provide Completion date or da		Section 1300				
Facility Project Number Number	Sub Num	Scope		Date		n Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
10856 HS022599-0) C)		10/4/2		/24/2003 12:00:00 AM	06/27/2003	09/23/2003	CLOS	No
10856 IS102399-0	C	,		12/8/2	010		12/30/2010	05/30/2015	PEND	No
OSHPD FDD SB499 R	Report	[Data Last Update:	10/15/2018 S	ubmission	Date: 10/1	15/2018	Printed: 10/17/20)18 6:30 AN	1

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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-02238	Obstetrics Wing		Retrofit/Re Project:	eplacement	No		
Facility Project Sub Number Number Num Scop	De	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
10856 IS102399-0 0		12/8/2010		12/30/2010	12/31/2013	PEND	No
OSHPD FDD SB499 Report	Data Last Update: 10/15/2018	Submis	sion Date: 10/1	15/2018	Printed: 10/17/20	018 6:30 AN	Л

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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: BLD-02236	Building Number: BLD-02236 Building Name: Main Tower and North Wing							
Type of Service Provided								
X Nursing Inpatient Beds	t 30 Inpatient 25111 Days		Obstetrical Recovery					
IntensiveCare Inpatien Beds	t 0 Inpatient Days 0		Newborn/ WellBaby					
Pediatric/Adol Inpatient escent Beds	t 0 Inpatient Days 0	Clinical Lab	Emergency					
Psychiatric Inpatien Nursing Beds	t 0 Inpatient Days 0	Imaging	Nuclear Medicine					
Obstetrical Inpatien Ante/Postprtum Beds	t 0 Inpatient Days 0		Rehabilitation Therapy					
Intermediate Inpatien Care Beds	t 0 Inpatient Days 0		Renal Dialysis					
Skilled Nursing Inpatien Beds	t 0 Inpatient Days 0		Dutpatient Surgery					
	Total Beds this 30 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: BLD-02237 Building Name: South Wing							
Type of Service Provided	<u>d</u>						
Nursing Inp Bec	eds Days 0	Surgical	Obstetrical Recovery				
IntensiveCare Inp	oatient 0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby				
Pediatric/Adol Inp escent Bed	oatient 0 Inpatient Days 0 eds	Clinical Lab	Emergency				
Psychiatric Inp Nursing Bed	patient 0 Inpatient Days 0	X Radiological/	Nuclear Medicine				
Obstetrical Inp Ante/Postprtum Be	oatient 0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy				
Intermediate Inp Care Bed	patient 0 Inpatient Days 0 eds	Administration	Renal Dialysis				
Skilled Nursing Inp	patient 0 Inpatient Days 0	Support Services	Outpatient Surgery				
	Total Beds this 0 Building	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-02238	Building Name: Obs	stetrics Wing				
Type of Service Provi	ded		_				
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			
	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	X Support Services	U Outpatient Surgery			
		Total Beds this 0 Building	Cesarean/Deliv	Central Plant			
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Provide the number of Inpation	ent beds and patient days per type of ur	nit per building per Section 1	30061(c)(1)(F)	
Building Number: BLD-0	2236 Building Name: Ma	in Tower and North Wing		
Medical / Surgical (Include	GYN) Acute Respirator	y Care	Acute Psychiatric	
Inpatient 30 Inpatien Bed Days	nt 9411 Inpatient 0 Bed	Inpatient 0 Days		patient 0 ays
Perinatal (excluse Newborr	n / GYN) Burn		Skilled Nursing	
Inpatient 0 Inpatier Bed Days	nt 0 Inpatient 0 Bed	Inpatient 0 Days		patient 0 ays
Pediatric	intensive Care No Nursery	ewborn	Intermediate Card	
Inpatient 0 Inpatien Bed Days	nt 0 Inpatient 0 Bed	Inpatient 0 Days		patient 0 ays
Intensive Care	Rehabilitation Center		Int. Care / developmer Disabled	it
Inpatient 0 Inpatien Bed Days	nt 1266 Inpatient 0 Bed	Inpatient 0 Days		ays
Coronary Care	Chemical Dependency		Building Per B	otal Beds this uilding Per ervice
Inpatient 0 Inpatien Bed Days	nt 0 Inpatient 0 Bed	Inpatient 0 Days	30	30
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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: BLI	D-02237 Buildir	ng Name: South	n Wing				
Medical / Surgical (Inclu	ude GYN)	Acute Respiratory	Care	Acute Psychiatric			
Inpatient 0 Inpa Bed Day		Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Perinatal (excluse Newb	oorn / GYN)	Burn		Skilled Nursing			
Inpatient 0 Inpa Bed Day		Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Pediatric		intensive Care New Nursery	vborn	Intermediate Card			
Inpatient 0 Inpa Bed Days		Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Intensive Care		Rehabilitation Center		Int. Care / developn Disabled	nent		
Inpatient 0 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 Inpatient 0 Days		Inpatient 0 Bed	Inpatient 0 Days	0	0		

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Provide the numbe	r of Inpatient beds and patie	nt days per type of uni	t per building per Sectio	n 130061(c)(1)(F)	
Building Number:	BLD-02238 Build	ding Name: Obs	tetrics Wing		
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 Net 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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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-02236	Main Tower and North Wing	Rebuild
BLD-02237	South Wing	Rebuild
BLD-02238	Obstetrics Wing	Rebuild
BLD-02239	Emergency Department Building	Remain
BLD-02240	Lab Building	Remain
BLD-02241	Surgery Building	Remain
BLD-02242	ICU/CCU Building	Remain
BLD-02958	7A Outpatient Surgery Center	Remain
BLD-03387	East Patient Wing	Remain
BLD-03388	ICU Expansion	Remain
BLD-03391	Emergency Department Addition	Remain
BLD-03639	Central Plant	Remain
		*

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List ALL propose	d new buildings to be constructed at this or a	nother site.	
Building Number	Building Name	New Site	
N_1	Med-Tele Wing	X	
N_2	New Four-Story Tower		
N_3	Central Utility Plant		

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The projected date or dates the replaced or rebuild buildings as The planned uses of the building replaced or rebuild buildings as	g or buildings to be removed from ac	ce per Section 130061 (c	ction 130061(c)(2)(B) and provide said da	
Building Number: BLD-02236	Main Tower and M	North Wing	Removal 12/31/2 Date:	2015
Planned Uses for the building to Planned use for building:	be removed from acute care servic	e:		
Inpatient services currently deliv	vered in the building:			
X Nursing	Surgical Anesthesia	Obstetrical Cesarean/De		pilitation py
Pediatric/Adol escent	Clinical Lab	Obstetrical Recovery	Renal	Dialysis
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge	
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	X Centra	al Plant
Intermediate Care		Nuclear Medicine	X Suppo Servio	
Skilled Nursing	X Administration			
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The projected date or dates the replaced or rebuild buildings a The planned uses of the build replaced or rebuild buildings a	ing or buildings to be removed from	vice per Section 130061 (c)(acute care service per Secti	2)(A) and provide said date o on 130061(c)(2)(B) and provid	
Building Number: BLD-022	37 South Wing		Removal 05/01/2015 Date:	5
Planned Uses for the building	to be removed from acute care service	vice:		
Planned use for building:				
Inpatient services currently de	livered in the building:			
Nursing	Surgical		Rehabilita	ation
IntensiveCare	Anesthesia	Cesarean/Deliv	v Therapy	
Pediatric/Adol escent	Clinical Lab	Obstetrical Recovery	Renal Dia	alysis
Psychiatric Nursing	X Radiological/ Imaging	Newborn/ WellBaby	Outpatien Surgery	ıt
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central P	lant
Intermediate Care	Dietetic	Nuclear Medicine	Support Services	
Skilled Nursing	Administration			
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The projected date or dates the replaced or rebuild buildings as The planned uses of the building replaced or rebuild buildings as	ng or buildings to be removed from a	ice per Section 130061 (c acute care service per Sec	ction 130061(c)(2)(B) and provide said date c	
Building Number: BLD-0223	Obstetrics Wing		Removal 05/01/201 Date:	5
Planned Uses for the building to Planned use for building:	to be removed from acute care servi	ce:		
Nursing	Surgical Anesthesia	Obstetrical Cesarean/De	eliv Rehabilit Therapy	ation
Pediatric/Adol escent	Clinical Lab	Obstetrical Recovery	Renal Dia	alysis
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatier Surgery	nt
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central F	Plant
Intermediate Care	Dietetic	Nuclear Medicine	X Support Services	
Skilled Nursing	Administration			
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lo data reported	for Sectior	n 130061(c)(2)(D).			

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

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Report whether the general ac building sites or project number					
Building BLD-02237 Number:	Building Name:	South Wing			
Will general acute care service	es and beds will be r	elocated to a new, E	xisting or retrofitted	building?	
Radiological/Imaging N/A]	
Report whether the general ac building sites or project numbe					
Building BLD-02236 Number:	Building Name:	Main Tower and No	orth Wing		
Will general acute care service	es and beds will be r	elocated to a new, E	xisting or retrofitted	building?	
Nursing N/A]	
Report whether the general ac building sites or project numbe					
Building BLD-02236 Number:	Building Name:	Main Tower and No	orth Wing		
Will general acute care service	es and beds will be r	elocated to a new, E	xisting or retrofitted	building?	
Administration N/A]	
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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 Number: BLD-02236 Building Name: Main Tower and North Wing		
Will general acute care services and beds will be relocated to a new, Existing or retrofitte	d building?	
Support Services 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-02236 Building Name: Main Tower and North Wing Number:		
Will general acute care services and beds will be relocated to a new, Existing or retrofitte	d building?	
Rehabilitation Therapy		
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-02236 Building Name: Main Tower and North Wing Number:		
Will general acute care services and beds will be relocated to a new, Existing or retrofitte	d building?	
CentralPlant N/A		
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Report whether the general acute building sites or project numbers for					esponding
Building BLD-02238 E Number:	Building Name: Obste	trics Wing]	
Will general acute care services an	nd beds will be relocated	d to a new, Existing or retro	fitted building?		
Support Services N/A					
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No data reporte	ed for Sectio	on 130061(c)(3).		

port Year: 2018 10856 Regio	onal Medical Center of San Jose	San Jose		Page:22 of 54
eport any general acute care hospital inp er Section 130061(c)(4)	atient service that is provided in any	general acute care hospital	building that is rate	ed SPC-1
uilding Number: BLD-02236 Buildin	ng Name: Main Tower and North	Wing		
Type of Service Provided				
	Surgical	Obstetrical Cesarean/Deliv	X Rehabi Therap	
X Nursing	Anesthesia	_		.
IntensiveCare		Obstetrical Recovery	Renal [Jiaiysis
Pediatric/Adol escent	Clinical Lab	Newborn/	Outpati Surgery	
Psychiatric	Radiological/ Imaging	WellBaby		
Nursing	Pharmaceutical	Emergency	X Central	Plant
Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	X Suppor Service	
Intermediate Care	X Administration			
Skilled Nursing				

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Report any general per Section 130061		tient service that is provided in any	general acute care hospital	building that is rate	ed SPC-1
Building Number:	BLD-02237 Buildin	g Name: South Wing			
Type of Service	e Provided				
		Surgical	Obstetrical Cesarean/Deliv	Rehabil Therap	
	Nursing	Anesthesia	_		Nicksia
	IntensiveCare		Obstetrical Recovery	Renal I	Jaiysis
	Pediatric/Adol escent	Clinical Lab	Newborn/ WellBaby	Outpati Surgery	ent ′
	Psychiatric Nursing	Imaging Pharmaceutical	Emergency	Central	Plant
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	Suppor Service	
	Intermediate Care	Administration			
	Skilled Nursing				
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Report any general per Section 130061		tient service that is provided in any	general acute care hospital b	ouilding that is rate	ed SPC-1
Building Number:	BLD-02238 Buildin	g Name: Obstetrics Wing			
Type of Service	e Provided				
		Surgical	Obstetrical Cesarean/Deliv	Rehabil Therapy	
	Nursing				
	IntensiveCare	Anesthesia	Obstetrical Recovery	Renal D	Dialysis
	Pediatric/Adol	Clinical Lab	Receively	Outpatio	ent
	escent	Radiological/	Newborn/ WellBaby	Surgery	
	Psychiatric Nursing	Imaging Pharmaceutical	Emergency	Central	Dient
			Linergency		Flant
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	X Support 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-02236 Building Name: Main Tower and North Wing Configuration: N/A										
Type of Service Provided										
Nursing	Surgical	Obstetrical Cesarean/D		abilitation rapy						
IntensiveCare	Anesthesia	Obstetrical Recovery	Rena	al Dialysis						
Pediatric/Adol escent	Clinical Lab	Recovery								
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outp Surg	patient Jery						
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Cent	tral Plant						
Intermediate Care	Dietetic	Nuclear Med		port						
Skilled Nursing	Administration			vices						
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Report the final cor requirements wheth per Section 130061	her by retrofit or by	ildings on the replacement	hospital campus showir and the type of service	ng how e that will t	ach building will comply wi be provided in each genera	ith the SP al acute c	C-5/NPC-4 or 5 are hospital building	
Building Number:	BLD-02237	Building Na	me: South Wing					
Configuration:	N/A							
Type of Service	Provided							
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
Int	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis	
	ediatric/Adol cent		Clinical Lab					
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	ostetrical ite/Postprtum		Pharmaceutical		Emergency		Central Plant	
Int Ca	ermediate		Dietetic					
	illed Nursing		Administration		Nuclear Medicine		Support Services	
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	her by retrofit or by				ach building will comply w be provided in each gener			
Building Number:	BLD-02238	Building Na	me: Obstetrics Wing					
Configuration:	N/A							
Type of Service	Provided							
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis	
	ediatric/Adol cent		Clinical Lab		,			
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	ostetrical ite/Postprtum		Pharmaceutical		Emergency		Central Plant	
Int Ca	ermediate		Dietetic					
	illed Nursing		Administration		Nuclear Medicine		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-02239 Building Name: Emergency Department Building										
Configuration: N/A										
Type of Service	Provided									
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Int	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	ediatric/Adol cent		Clinical Lab		,					
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	ostetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant			
Int Ca	ermediate are		Dietetic		Nuclear Medicine		Support			
Sk	tilled Nursing		Administration				Services			
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Report the final con requirements wheth per Section 130061	her by retrofit or by	ildings on the replacement	hospital campus showin and the type of service t	ig how e hat will t	ach building will comply wi be provided in each genera	th the SP al acute ca	C-5/NPC-4 or 5 are hospital building
Building Number:	BLD-02240	Building Na	me: Lab Building				
Configuration:	N/A						
Type of Service	Provided						
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	ediatric/Adol cent		Clinical Lab				
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	ostetrical ite/Postprtum		Pharmaceutical		Emergency		Central Plant
	ermediate		Dietetic				
	illed Nursing		Administration		Nuclear Medicine		Support Services
OSHPD FDD SB499 R	Report D	ata Last Undat	e: 10/15/2018	Submiss	ion Date: 10/15/2018	Printed.	10/17/2018 6:30 AM
	are illed Nursing	ata Last Updat		Submiss	Nuclear Medicine	Printed:	Support Services 10/17/2018 6:30 AM

Report Year: 20	018 10856	Regional Me	dical Center of San Jose	San Jose	San Jose		
	her by retrofit or by				ach building will comply wi be provided in each genera		
Building Number:	BLD-02241	Building Na	me: Surgery Building				
Configuration:	N/A						
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		Outpatient Surgery
	ostetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant
	termediate are		Dietetic				
	killed Nursing		Administration		Nuclear Medicine		Support Services
			10/15/0010	<u> </u>			
OSHPD FDD SB499 F	Report D	ata Last Updat	e: 10/15/2018	Submiss	ion Date: 10/15/2018	Printed:	10/17/2018 6:30 AM

Report Year: 20	10856	Regional Mee	egional Medical Center of San Jose			San Jose			
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-02242	Building Na	me: ICU/CCU Building						
Configuration:	N/A								
Type of Service	Provided								
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis		
-	ediatric/Adol cent		Clinical Lab						
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	ostetrical ite/Postprtum		Pharmaceutical		Emergency		Central Plant		
Inte Ca	ermediate		Dietetic						
	illed Nursing		Administration		Nuclear Medicine		Support Services		
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Report Year: 2018 10856	Regional Medical Center of San Jos	ie S	an Jose	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-02958 Building Name: 7A Outpatient Surgery Center										
Configuration: N/A										
Type of Service Provided										
Nursing	Surgical	Obstetri Cesarea		Rehabilitation Therapy						
IntensiveCare	Anesthesia	Obstetri Recover		Renal Dialysis						
Pediatric/Adol escent	Clinical Lab		<i>y</i>							
Psychiatric Nursing	Radiological/ Imaging	Newbor WellBab		Outpatient Surgery						
Obstetrical Ante/Postprtum	Pharmaceutical	Emerge	ncy	Central Plant						
Intermediate Care	Dietetic	Nuclear	Medicine	Support						
Skilled Nursing	Administration			Services						
OSHPD FDD SB499 Report	Data Last Update: 10/15/2018	Submission Date:	10/15/2018 Printed	: 10/17/2018 6:30 AM						
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Report Year: 20	018 10856	Regional Med	dical Center of San Jose	San Jose	San Jose				
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-03387	Building Na	me: East Patient Wing						
Configuration:	N/A								
Type of Service	e Provided								
	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis		
	ediatric/Adol scent		Clinical Lab						
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	bstetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant		
	termediate are		Dietetic						
	killed Nursing		Administration		Nuclear Medicine		Support Services		
	Poport D	ata Last Updat	e: 10/15/2018	Submiss	ion Date: 10/15/2018	Drintad	10/17/2019 6:20 AM		
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Report the final cor requirements wheth per Section 130061	her by retrofit or by	ildings on the replacement	hospital campus showin and the type of service t	g how e hat will l	ach building will comply v be provided in each gene	vith the SP ral acute ca	C-5/NPC-4 or 5 are hospital building					
Building Number:	BLD-03388	Building Na	me: ICU Expansion									
Configuration:	N/A	A										
Type of Service	Provided											
Nu	ırsing		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 ite/Postprtum		Pharmaceutical		Emergency		Central Plant					
Inte Ca	ermediate are		Dietetic		Nuclear Medicine		Support					
	illed Nursing		Administration				Services					
OSHPD FDD SB499 F	Report D	ata Last Updat	e: 10/15/2018	Submiss	ion Date: 10/15/2018	Printed:	10/17/2018 6:30 AM					

Report Year: 20)18 10856 I	Regional Mec	lical Center of San Jose		San Jose		Page:35 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:	uilding Number: BLD-03391 Building Name: Emergency Department Addition											
Configuration:	N/A											
Type of Service	e Provided											
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy					
Int	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis					
	ediatric/Adol cent		Clinical Lab									
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery					
	ostetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant					
Int Ca	ermediate are		Dietetic		Nuclear 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-03639	Building Na	me: Central Plant								
Configuration:	N/A	I/A									
Type of Service	Provided										
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis				
-	diatric/Adol cent		Clinical Lab		Recovery						
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
	ostetrical ite/Postprtum		Pharmaceutical		Emergency		Central Plant				
Inte Ca	ermediate are		Dietetic		Nuclear Medicine		Support				
	illed Nursing	Administration					Services				
OSHPD FDD SB499 Report Data Last Update: 10/15/2018 Submission Date: 10/15/2018 Printed: 10/17/2018 6:30 AM						10/17/2018 6:30 AM					

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Include information on 4D and SPC-5 per Sec			by type of S	Service provided by b	uildings that are classified a	as SPC-2, SI	PC-3, SPC-4, SPC-
Building Number: BLI	D-02239	Building N	lame: En	nergency Department	Building]
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	Rer	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		patient gery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	X 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 or 4D and SPC-5 per Se			by type of Service provided by	buildings that are classified a	as SPC-2, SF	PC-3, SPC-4, SPC-
Building Number: BL	D-02240	Building N	lame: Lab Building			
Type of Service Pro	vided					
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv		abilitation rapy
IntensiveCare	Inpatient Beds	0	Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0	X Clinical Lab	Obstetrical Recovery	Rer	al Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby		patient gery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	Cer	tral Plant
Intermediate	Inpatient Beds	0	Dietetic	Nuclear Medicine		port vices
Skilled Nursing	Inpatient Beds	0	Administration			
Total Beds this Building		0				
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Include information on 4D and SPC-5 per Sec			by type of S	Service provided by bui	ldings that are classified a	as SPC-2, S	PC-3, SPC-4, SPC-
Building Number: BLI	D-02241	Building N	lame: <mark>Su</mark>	rgery Building]
Type of Service Prov	vided						
Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
IntensiveCare	Inpatient Beds	0	X	Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0	X	Clinical Lab	Obstetrical Recovery	Re	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby		tpatient rgery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Ce	ntral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine		pport rvices
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
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Include information on 4D and SPC-5 per Sec	the number ction 130061	of inpatient beds (e)	by type of Service provided by	buildings that are classified	as SPC-2, SI	PC-3, SPC-4, SPC-
Building Number: BL	D-02242	Building N	ame: ICU/CCU Building]
Type of Service Prov	vided					
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv		nabilitation erapy
X IntensiveCare	Inpatient Beds	34	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	X Sup Ser	oport vices
Skilled Nursing	Inpatient Beds	0	Administration			
Total Beds this Building		34				
OSHPD FDD SB499 Report	C	Data Last Update:	10/15/2018 Submissio	on Date: 10/15/2018 Pi	rinted: 10/17/2	2018 6:30 AM

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Include information on 4D and SPC-5 per Sec			by type of S	Service provided by	ouildings that are cla	ssified as SPC-2, S	PC-3, SPC-4, SPC-
Building Number: BLI	D-02958	Building N	lame: 7A	Outpatient Surgery	Center]
Type of Service Prov	<u>vided</u>						
Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/I		habilitation erapy
IntensiveCare	Inpatient Beds	0	X	Anesthesia			
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		itpatient rgery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	, 🗌 Ce	ntral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine		pport rvices
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
OSHPD FDD SB499 Report	Da	ta Last Update:	10/15/2018	8 Submissior	Date: 10/15/2018	Printed: 10/17	/2018 6:30 AM

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Include inform 4D and SPC-5	ation on the nu 5 per <mark>Section 1</mark>	umber of inp 130061(e)	atient beds I	by type of S	ervice provided by bui	Idings that are classified as	s SPC-2, S	SPC-3, SPC-4, SPC-
Building Numb	ber: BLD-033	887	Building Na	ame: Eas	t Patient Wing			
Type of Serv	vice Provided							
Nursing	g Inpa Bed	atient [0		Surgical	Obstetrical Cesarean/Deliv		ehabilitation nerapy
Intensiv	veCare Inpa Bed	atient [Is	0		Anesthesia			
Pediatri escent	ic/Adol Inpa Bed	atient [0		Clinical Lab	Obstetrical Recovery	Re	enal Dialysis
Psychia		atient [Is	0		Radiological/ Imaging	Newborn/ WellBaby		utpatient urgery
Obstetr Ante/Po	ical Inpa ostprtum Bed	atient [ds	0		Pharmaceutical	Emergency	Ce	entral Plant
Interme Care	ediate Inpa Bed	atient [0		Dietetic	Nuclear Medicine		upport ervices
Skilled	Nursing Inpa Bed	atient [0		Administration			
Total Bo Building		0						
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Include information on 4D and SPC-5 per Sec			by type of Service provided by	buildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-03388	Building Na	ame: ICU Expansion		
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 4D and SPC-5 per Sec			by type of Service provic	led by buildings that are classified	d as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLI	D-03391	Building N	lame: Emergency Dep	artment Addition	
Type of Service Prov	<u>/ided</u>				
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	Radiologica Imaging	I/ Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceut	ical Emergency	Central Plant
Intermediate	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administrati	on	
Total Beds this Building		0			
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Include information on 4D and SPC-5 per Sec			by type of Service provided	by buildings that are classified	as SPC-2, SP	PC-3, SPC-4, SPC-
Building Number: BLI	D-03639	Building N	ame: Central Plant			
Type of Service Prov	<u>vided</u>					
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv		abilitation rapy
IntensiveCare	Inpatient Beds	0	Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Ren	al Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Out Sur	patient gery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutica	Emergency	Cen	tral Plant
Intermediate	Inpatient Beds	0	Dietetic	Nuclear Medicine	Sup Serv	port ⁄ices
Skilled Nursing	Inpatient Beds	0	Administration			
Total Beds this Building		0				
OSHPD FDD SB499 Report	Da	ata Last Update:	10/15/2018 Submis	sion Date: 10/15/2018	Printed: 10/17/2	018 6:30 AM

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Include information on the number of inpatient b 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-02239 Build	ling Name: Emergency Department Build	ding	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient 3503 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 B 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-02240 Build	ding Name: Lab Building	
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 inpatien 4D and SPC-5 per Section 130061(e)	t beds by type of unit provided by buildings that	at are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-02241 Bu	ilding Name: Surgery Building	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 41 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: 10/15/2018 Submission Date	: 10/15/2018 Printed: 10/17/2018 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-02242 Buil	ding Name: ICU/CCU Building		
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 34 Inpatient 11178 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 34 34	
OSHPD FDD SB499 Report Data Last L	Jpdate: 10/15/2018 Submission Date:	10/15/2018 Printed: 10/17/2018 6:30 AM	

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Include information on the number of inpatie 4D and SPC-5 per Section 130061(e)	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-02958 B	uilding Name: 7A Outpatient Surgery Cent	ter	
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 Las	t Update: 10/15/2018 Submission Date:	10/15/2018 Printed: 10/17/2018 6:30 AM	

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Include information on the number of inpatient 4D and SPC-5 per Section 130061(e)	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-03387 Bui	Iding Name: East Patient 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	Building Per Build	Beds this ing Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Servi	0
OSHPD FDD SB499 Report Data Last	Update: 10/15/2018 Submission Date	e: 10/15/2018 Printed: 10/17/	2018 6:30 AM

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Include information on the number of inpatient 4D and SPC-5 per Section 130061(e)	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-03388 Bui	Iding Name: ICU Expansion			
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	t0	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t0	
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 Last U	Jpdate: 10/15/2018 Submission Date	: 10/15/2018 Printed: 10/17	/2018 6:30 AM	

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Include information on the number of inpatien 4D and SPC-5 per Section 130061(e)	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-03391 B	Lilding Name: Emergency Department Ad	ldition	
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 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	t Update: 10/15/2018 Submission Date:	10/15/2018 Printed: 10/17/2018 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-03639 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 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 Last	Update: 10/15/2018 Submission Date:	10/15/2018 Printed: 10/17/2018 6:30 AM