



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:	<input type="text" value="11285"/>
Facility Name:	<input type="text" value="Alta Bates Summit Medical Center - Herrick Campus"/>
Address:	<input type="text" value="2001 Dwight Way"/>
City:	<input type="text" value="Berkeley"/>

Hospital Owner/Licensee:	<input type="text" value="Sutter East Bay Hospitals"/>
Year of Reporting:	<input type="text" value="2014"/>
Contact 1 e-mail Address:	<input type="text"/>
Contact 2 e-mail Address:	<input type="text"/>
Contact 3 e-mail Address::	<input type="text"/>
Name of Submitter:	<input type="text" value="Carl Scheuerman"/>
Submission Date:	<input type="text" value="9/17/2014 4:57:28 PM"/>

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 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-03855	East Building	2001 Dwight Way	Remove	N/A	01/01/2015	12/15/2014
BLD-03856	Central Building	2001 Dwight Way	Remove	N/A	01/01/2015	12/15/2014
BLD-03857	South Building	2001 Dwight Way	Remove	N/A	01/01/2015	12/15/2014
BLD-03858	West Building	2001 Dwight Way	Remove	N/A	01/01/2015	12/15/2014

Report Year:

2014

11285

Alta Bates Summit Medical Center - Herrick
Campus

Berkeley

Page:3 of 61

No data reported for Section 130061(c)(1)(C).

Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)

Building Number: BLD-03855

Building Name: East Building

Type of Service Provided

<input type="checkbox"/> Nursing	Inpatient Beds	<input type="text" value="0"/>	Inpatient Days	<input type="text" value="0"/>
<input type="checkbox"/> IntensiveCare	Inpatient Beds	<input type="text" value="0"/>	Inpatient Days	<input type="text" value="0"/>
<input type="checkbox"/> Pediatric/Adol escent	Inpatient Beds	<input type="text" value="0"/>	Inpatient Days	<input type="text" value="0"/>
<input type="checkbox"/> Psychiatric Nursing	Inpatient Beds	<input type="text" value="0"/>	Inpatient Days	<input type="text" value="0"/>
<input type="checkbox"/> Obstetrical Ante/Postprtum	Inpatient Beds	<input type="text" value="0"/>	Inpatient Days	<input type="text" value="0"/>
<input type="checkbox"/> Intermediate Care	Inpatient Beds	<input type="text" value="0"/>	Inpatient Days	<input type="text" value="0"/>
<input type="checkbox"/> Skilled Nursing	Inpatient Beds	<input type="text" value="0"/>	Inpatient Days	<input type="text" value="0"/>

Total Beds this Building

<input type="checkbox"/> Surgical	<input type="checkbox"/> Obstetrical Recovery
<input type="checkbox"/> Anesthesia	<input type="checkbox"/> Newborn/ WellBaby
<input type="checkbox"/> Clinical Lab	<input type="checkbox"/> Emergency
<input type="checkbox"/> Radiological/ Imaging	<input type="checkbox"/> Nuclear Medicine
<input type="checkbox"/> Pharmaceutical	<input checked="" type="checkbox"/> Rehabilitation Therapy
<input type="checkbox"/> Dietetic	<input type="checkbox"/> Renal Dialysis
<input type="checkbox"/> Administration	<input type="checkbox"/> Outpatient Surgery
<input type="checkbox"/> Support Services	<input type="checkbox"/> Central Plant
<input type="checkbox"/> Obstetrical Cesarean/Deliv	

Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)

Building Number: BLD-03856

Building Name: Central Building

Type of Service Provided

Nursing Inpatient Beds Inpatient Days

IntensiveCare Inpatient Beds Inpatient Days

Pediatric/Adol escent Inpatient Beds Inpatient Days

Psychiatric Nursing Inpatient Beds Inpatient Days

Obstetrical Ante/Postprtum Inpatient Beds Inpatient Days

Intermediate Care Inpatient Beds Inpatient Days

Skilled Nursing Inpatient Beds Inpatient Days

Total Beds this Building

Surgical Obstetrical Recovery

Anesthesia Newborn/ WellBaby

Clinical Lab Emergency

Radiological/ Imaging Nuclear Medicine

Pharmaceutical

Dietetic Rehabilitation Therapy

Administration Renal Dialysis

Support Services Outpatient Surgery

Obstetrical Cesarean/Deliv Central Plant

Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)

Building Number: BLD-03857

Building Name: South Building

Type of Service Provided

Nursing Inpatient Beds Inpatient Days

IntensiveCare Inpatient Beds Inpatient Days

Pediatric/Adol escent Inpatient Beds Inpatient Days

Psychiatric Nursing Inpatient Beds Inpatient Days

Obstetrical Ante/Postprtum Inpatient Beds Inpatient Days

Intermediate Care Inpatient Beds Inpatient Days

Skilled Nursing Inpatient Beds Inpatient Days

Total Beds this Building

Surgical Obstetrical Recovery

Anesthesia Newborn/ WellBaby

Clinical Lab Emergency

Radiological/ Imaging Nuclear Medicine

Pharmaceutical

Dietetic Rehabilitation Therapy

Administration Renal Dialysis

Support Services Outpatient Surgery

Obstetrical Cesarean/Deliv Central Plant

Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)

Building Number: BLD-03858

Building Name: West Building

Type of Service Provided

Nursing Inpatient Beds Inpatient Days

IntensiveCare Inpatient Beds Inpatient Days

Pediatric/Adol escent Inpatient Beds Inpatient Days

Psychiatric Nursing Inpatient Beds Inpatient Days

Obstetrical Ante/Postprtum Inpatient Beds Inpatient Days

Intermediate Care Inpatient Beds Inpatient Days

Skilled Nursing Inpatient Beds Inpatient Days

Total Beds this Building

Surgical Obstetrical Recovery

Anesthesia Newborn/ WellBaby

Clinical Lab Emergency

Radiological/ Imaging Nuclear Medicine

Pharmaceutical

Dietetic Rehabilitation Therapy

Administration Renal Dialysis

Support Services Outpatient Surgery

Obstetrical Cesarean/Deliv Central Plant

Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number: BLD-03855

Building Name: East Building

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

intensive Care Newborn Nursery

Inpatient Bed Inpatient Days

Intermediate Card

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

Rehabilitation Center

Inpatient Bed Inpatient Days

Int. Care / development Disabled

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

Total Beds this Building Per Unit

Total Beds this Building Per Service

Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number: BLD-03856

Building Name: Central Building

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

intensive Care Newborn Nursery

Inpatient Bed Inpatient Days

Intermediate Card

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

Rehabilitation Center

Inpatient Bed Inpatient Days

Int. Care / development Disabled

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

Total Beds this Building Per Unit

Total Beds this Building Per Service

Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number: BLD-03857

Building Name: South Building

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

intensive Care Newborn Nursery

Inpatient Bed Inpatient Days

Intermediate Card

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

Rehabilitation Center

Inpatient Bed Inpatient Days

Int. Care / development Disabled

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

Total Beds this Building Per Unit

Total Beds this Building Per Service

Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number: BLD-03858

Building Name: West Building

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

intensive Care Newborn Nursery

Inpatient Bed Inpatient Days

Intermediate Card

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

Rehabilitation Center

Inpatient Bed Inpatient Days

Int. Care / development Disabled

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

Total Beds this Building Per Unit

Total Beds this Building Per Service

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-01313	Patient Care Wing	Remain
BLD-01314	Cancer Center-Linear Accelerator	Remain
BLD-03166	Link Building (Elevator Lobby)	Remain
BLD-03855	East Building	Remove
BLD-03856	Central Building	Remove
BLD-03857	South Building	Remove
BLD-03858	West Building	Remove

List ALL proposed new buildings to be constructed at this or another site.

Building Number	Building Name	New Site
N_1	Patient Care Pavilion	X

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\(c\)\(20\)\(C\)](#)

Building Number: BLD-03855

East Building

Removal
Date:

12/15/2014

Planned Uses for the building to be removed from acute care service:

Planned use for building: Clinic

Jurisdiction: OSHPD

Inpatient services currently delivered in the building:

 Nursing IntensiveCare Pediatric/Adol
escent Psychiatric
Nursing Obstetrical
Ante/Postprtum Intermediate
Care Skilled Nursing Surgical Anesthesia Clinical Lab Radiological/
Imaging Pharmaceutical Dietetic Administration Obstetrical
Cesarean/Deliv Obstetrical
Recovery Newborn/
WellBaby Emergency Nuclear
Medicine Rehabilitation
Therapy Renal Dialysis Outpatient
Surgery Central Plant Support
Services

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-03856

Central Building

Removal
Date:

12/15/2014

Planned Uses for the building to be removed from acute care service:

Planned use for building:

Clinic

Jurisdiction:

OSHPD

Inpatient services currently delivered in the building:

 Nursing IntensiveCare Pediatric/Adol
escent Psychiatric
Nursing Obstetrical
Ante/Postprtum Intermediate
Care Skilled Nursing Surgical Anesthesia Clinical Lab Radiological/
Imaging Pharmaceutical Dietetic Administration Obstetrical
Cesarean/Deliv Obstetrical
Recovery Newborn/
WellBaby Emergency Nuclear
Medicine Rehabilitation
Therapy Renal Dialysis Outpatient
Surgery Central Plant Support
Services

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-03857

South Building

Removal
Date:

12/15/2014

Planned Uses for the building to be removed from acute care service:

Planned use for building: Clinic

Jurisdiction: OSHPD

Inpatient services currently delivered in the building:

 Nursing IntensiveCare Pediatric/Adol
escent Psychiatric
Nursing Obstetrical
Ante/Postprtum Intermediate
Care Skilled Nursing Surgical Anesthesia Clinical Lab Radiological/
Imaging Pharmaceutical Dietetic Administration Obstetrical
Cesarean/Deliv Obstetrical
Recovery Newborn/
WellBaby Emergency Nuclear
Medicine Rehabilitation
Therapy Renal Dialysis Outpatient
Surgery Central Plant Support
Services

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-03858

West Building

Removal Date: 12/15/2014

Planned Uses for the building to be removed from acute care service:

Planned use for building: Clinic

Jurisdiction: OSHPD

Inpatient services currently delivered in the building:

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> Nursing | <input type="checkbox"/> Surgical | <input type="checkbox"/> Obstetrical Cesarean/Deliv | <input type="checkbox"/> Rehabilitation Therapy |
| <input type="checkbox"/> IntensiveCare | <input type="checkbox"/> Anesthesia | <input type="checkbox"/> Obstetrical Recovery | <input type="checkbox"/> Renal Dialysis |
| <input type="checkbox"/> Pediatric/Adol escent | <input type="checkbox"/> Clinical Lab | <input type="checkbox"/> Newborn/ WellBaby | <input type="checkbox"/> Outpatient Surgery |
| <input type="checkbox"/> Psychiatric Nursing | <input type="checkbox"/> Radiological/ Imaging | <input type="checkbox"/> Emergency | <input type="checkbox"/> Central Plant |
| <input type="checkbox"/> Obstetrical Ante/Postprtum | <input type="checkbox"/> Pharmaceutical | <input type="checkbox"/> Nuclear Medicine | <input type="checkbox"/> Support Services |
| <input type="checkbox"/> Intermediate Care | <input type="checkbox"/> Dietetic | | |
| <input type="checkbox"/> Skilled Nursing | <input type="checkbox"/> Administration | | |

Provide the number of inpatient beds and patient days per unit for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)

Building Nbr: BLD-03855 Building Name: East Building Year of Information: 2011

Unit Type

Information Current As Of:

Medical/Surgical (include GYN)

Inpatient Beds Patient Days

Acute Respiratory Care

Inpatient Beds Patient Days

Acute Psychiatric

Inpatient Beds Patient Days

Perinatal (exclude Neborn/GYN)

Inpatient Beds Patient Days

Burn

Inpatient Beds Patient Days

Skilled Nursing

Inpatient Beds Patient Days

Pediatric

Inpatient Beds Patient Days

Intensive Care Newborn Nursery

Inpatient Beds Patient Days

Intermediate Care

Inpatient Beds Patient Days

Intensive Care

Inpatient Beds Patient Days

Rehabilitation Center

Inpatient Beds Patient Days

Int. Care/Developmentally Disabled

Inpatient Beds Patient Days

Coronary Care

Inpatient Beds Patient Days

Chemical Dependency

Inpatient Beds Patient Days

Total Beds this Building per Unit

Total Beds this Building per Service

Provide the number of inpatient beds and patient days per unit for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building Nbr: BLD-03855 Building Name: East Building Year of Information: 2012

Unit Type

Information Current As Of:

Medical/Surgical (include GYN)

Inpatient Beds Patient Days

Acute Respiratory Care

Inpatient Beds Patient Days

Acute Psychiatric

Inpatient Beds Patient Days

Perinatal (exclude Neborn/GYN)

Inpatient Beds Patient Days

Burn

Inpatient Beds Patient Days

Skilled Nursing

Inpatient Beds Patient Days

Pediatric

Inpatient Beds Patient Days

Intensive Care Newborn Nursery

Inpatient Beds Patient Days

Intermediate Care

Inpatient Beds Patient Days

Intensive Care

Inpatient Beds Patient Days

Rehabilitation Center

Inpatient Beds Patient Days

Int. Care/Developmentally Disabled

Inpatient Beds Patient Days

Coronary Care

Inpatient Beds Patient Days

Chemical Dependency

Inpatient Beds Patient Days

Total Beds this Building per Unit

Total Beds this Building per Service

Provide the number of inpatient beds and patient days per unit for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)

Building Nbr: BLD-03855 Building Name: East Building Year of Information: 2013

Unit Type

Information Current As Of:

Medical/Surgical (include GYN)

Inpatient Beds Patient Days

Acute Respiratory Care

Inpatient Beds Patient Days

Acute Psychiatric

Inpatient Beds Patient Days

Perinatal (exclude Neborn/GYN)

Inpatient Beds Patient Days

Burn

Inpatient Beds Patient Days

Skilled Nursing

Inpatient Beds Patient Days

Pediatric

Inpatient Beds Patient Days

Intensive Care Newborn Nursery

Inpatient Beds Patient Days

Intermediate Care

Inpatient Beds Patient Days

Intensive Care

Inpatient Beds Patient Days

Rehabilitation Center

Inpatient Beds Patient Days

Int. Care/Developmentally Disabled

Inpatient Beds Patient Days

Coronary Care

Inpatient Beds Patient Days

Chemical Dependency

Inpatient Beds Patient Days

Total Beds this Building per Unit

Total Beds this Building per Service

Provide the number of inpatient beds and patient days per unit for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building Nbr: BLD-03856 Building Name: Central Building Year of Information: 2011
 Unit Type Information Current As Of:

Medical/Surgical (include GYN)

Inpatient Beds Patient Days

Acute Respiratory Care

Inpatient Beds Patient Days

Acute Psychiatric

Inpatient Beds Patient Days

Perinatal (exclude Neborn/GYN)

Inpatient Beds Patient Days

Burn

Inpatient Beds Patient Days

Skilled Nursing

Inpatient Beds Patient Days

Pediatric

Inpatient Beds Patient Days

Intensive Care Newborn Nursery

Inpatient Beds Patient Days

Intermediate Care

Inpatient Beds Patient Days

Intensive Care

Inpatient Beds Patient Days

Rehabilitation Center

Inpatient Beds Patient Days

Int. Care/Developmentally Disabled

Inpatient Beds Patient Days

Coronary Care

Inpatient Beds Patient Days

Chemical Dependency

Inpatient Beds Patient Days

Total Beds this Building per Unit

Total Beds this Building per Service

Provide the number of inpatient beds and patient days per unit for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building Nbr: BLD-03856 Building Name: Central Building Year of Information: 2012
 Unit Type Information Current As Of:

Medical/Surgical (include GYN)

Inpatient Beds Patient Days

Acute Respiratory Care

Inpatient Beds Patient Days

Acute Psychiatric

Inpatient Beds Patient Days

Perinatal (exclude Neborn/GYN)

Inpatient Beds Patient Days

Burn

Inpatient Beds Patient Days

Skilled Nursing

Inpatient Beds Patient Days

Pediatric

Inpatient Beds Patient Days

Intensive Care Newborn Nursery

Inpatient Beds Patient Days

Intermediate Care

Inpatient Beds Patient Days

Intensive Care

Inpatient Beds Patient Days

Rehabilitation Center

Inpatient Beds Patient Days

Int. Care/Developmentally Disabled

Inpatient Beds Patient Days

Coronary Care

Inpatient Beds Patient Days

Chemical Dependency

Inpatient Beds Patient Days

Total Beds this Building per Unit

Total Beds this Building per Service

Provide the number of inpatient beds and patient days per unit for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building Nbr: BLD-03856 Building Name: Central Building Year of Information: 2013
 Unit Type Information Current As Of:

Medical/Surgical (include GYN)

Inpatient Beds Patient Days

Acute Respiratory Care

Inpatient Beds Patient Days

Acute Psychiatric

Inpatient Beds Patient Days

Perinatal (exclude Neborn/GYN)

Inpatient Beds Patient Days

Burn

Inpatient Beds Patient Days

Skilled Nursing

Inpatient Beds Patient Days

Pediatric

Inpatient Beds Patient Days

Intensive Care Newborn Nursery

Inpatient Beds Patient Days

Intermediate Care

Inpatient Beds Patient Days

Intensive Care

Inpatient Beds Patient Days

Rehabilitation Center

Inpatient Beds Patient Days

Int. Care/Developmentally Disabled

Inpatient Beds Patient Days

Coronary Care

Inpatient Beds Patient Days

Chemical Dependency

Inpatient Beds Patient Days

Total Beds this Building per Unit

Total Beds this Building per Service

Provide the number of inpatient beds and patient days per unit for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building Nbr: BLD-03857 Building Name: South Building Year of Information: 2011

Unit Type

Information Current As Of:

Medical/Surgical (include GYN)

Inpatient Beds Patient Days

Acute Respiratory Care

Inpatient Beds Patient Days

Acute Psychiatric

Inpatient Beds Patient Days

Perinatal (exclude Neborn/GYN)

Inpatient Beds Patient Days

Burn

Inpatient Beds Patient Days

Skilled Nursing

Inpatient Beds Patient Days

Pediatric

Inpatient Beds Patient Days

Intensive Care Newborn Nursery

Inpatient Beds Patient Days

Intermediate Care

Inpatient Beds Patient Days

Intensive Care

Inpatient Beds Patient Days

Rehabilitation Center

Inpatient Beds Patient Days

Int. Care/Developmentally Disabled

Inpatient Beds Patient Days

Coronary Care

Inpatient Beds Patient Days

Chemical Dependency

Inpatient Beds Patient Days

Total Beds this Building per Unit

Total Beds this Building per Service

Provide the number of inpatient beds and patient days per unit for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building Nbr: BLD-03857 Building Name: South Building Year of Information: 2012

Unit Type

Information Current As Of:

Medical/Surgical (include GYN)

Inpatient Beds Patient Days

Acute Respiratory Care

Inpatient Beds Patient Days

Acute Psychiatric

Inpatient Beds Patient Days

Perinatal (exclude Neborn/GYN)

Inpatient Beds Patient Days

Burn

Inpatient Beds Patient Days

Skilled Nursing

Inpatient Beds Patient Days

Pediatric

Inpatient Beds Patient Days

Intensive Care Newborn Nursery

Inpatient Beds Patient Days

Intermediate Care

Inpatient Beds Patient Days

Intensive Care

Inpatient Beds Patient Days

Rehabilitation Center

Inpatient Beds Patient Days

Int. Care/Developmentally Disabled

Inpatient Beds Patient Days

Coronary Care

Inpatient Beds Patient Days

Chemical Dependency

Inpatient Beds Patient Days

Total Beds this Building per Unit

Total Beds this Building per Service

Provide the number of inpatient beds and patient days per unit for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building Nbr: BLD-03857 Building Name: South Building Year of Information: 2013
 Unit Type Information Current As Of:

Medical/Surgical (include GYN)

Inpatient Beds Patient Days

Acute Respiratory Care

Inpatient Beds Patient Days

Acute Psychiatric

Inpatient Beds Patient Days

Perinatal (exclude Neborn/GYN)

Inpatient Beds Patient Days

Burn

Inpatient Beds Patient Days

Skilled Nursing

Inpatient Beds Patient Days

Pediatric

Inpatient Beds Patient Days

Intensive Care Newborn Nursery

Inpatient Beds Patient Days

Intermediate Care

Inpatient Beds Patient Days

Intensive Care

Inpatient Beds Patient Days

Rehabilitation Center

Inpatient Beds Patient Days

Int. Care/Developmentally Disabled

Inpatient Beds Patient Days

Coronary Care

Inpatient Beds Patient Days

Chemical Dependency

Inpatient Beds Patient Days

Total Beds this Building per Unit

Total Beds this Building per Service

Provide the number of inpatient beds and patient days per unit for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building Nbr: BLD-03858 Building Name: West Building Year of Information: 2011

Unit Type

Information Current As Of:

Medical/Surgical (include GYN)

Inpatient Beds Patient Days

Acute Respiratory Care

Inpatient Beds Patient Days

Acute Psychiatric

Inpatient Beds Patient Days

Perinatal (exclude Neborn/GYN)

Inpatient Beds Patient Days

Burn

Inpatient Beds Patient Days

Skilled Nursing

Inpatient Beds Patient Days

Pediatric

Inpatient Beds Patient Days

Intensive Care Newborn Nursery

Inpatient Beds Patient Days

Intermediate Care

Inpatient Beds Patient Days

Intensive Care

Inpatient Beds Patient Days

Rehabilitation Center

Inpatient Beds Patient Days

Int. Care/Developmentally Disabled

Inpatient Beds Patient Days

Coronary Care

Inpatient Beds Patient Days

Chemical Dependency

Inpatient Beds Patient Days

Total Beds this Building per Unit

Total Beds this Building per Service

Provide the number of inpatient beds and patient days per unit for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)

Building Nbr: BLD-03858 Building Name: West Building Year of Information: 2012

Unit Type

Information Current As Of:

Medical/Surgical (include GYN)

Acute Respiratory Care

Acute Psychiatric

Inpatient Beds Patient Days

Inpatient Beds Patient Days

Inpatient Beds Patient Days

Perinatal (exclude Neborn/GYN)

Burn

Skilled Nursing

Inpatient Beds Patient Days

Inpatient Beds Patient Days

Inpatient Beds Patient Days

Pediatric

Intensive Care Newborn Nursery

Intermediate Care

Inpatient Beds Patient Days

Inpatient Beds Patient Days

Inpatient Beds Patient Days

Intensive Care

Rehabilitation Center

Int. Care/Developmentally Disabled

Inpatient Beds Patient Days

Inpatient Beds Patient Days

Inpatient Beds Patient Days

Coronary Care

Chemical Dependency

Inpatient Beds Patient Days

Inpatient Beds Patient Days

Total Beds this Building per Unit

Total Beds this Building per Service

Provide the number of inpatient beds and patient days per unit for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)

Building Nbr: BLD-03858 Building Name: West Building Year of Information: 2013

Unit Type

Information Current As Of:

Medical/Surgical (include GYN)

Inpatient Beds Patient Days

Acute Respiratory Care

Inpatient Beds Patient Days

Acute Psychiatric

Inpatient Beds Patient Days

Perinatal (exclude Neborn/GYN)

Inpatient Beds Patient Days

Burn

Inpatient Beds Patient Days

Skilled Nursing

Inpatient Beds Patient Days

Pediatric

Inpatient Beds Patient Days

Intensive Care Newborn Nursery

Inpatient Beds Patient Days

Intermediate Care

Inpatient Beds Patient Days

Intensive Care

Inpatient Beds Patient Days

Rehabilitation Center

Inpatient Beds Patient Days

Int. Care/Developmentally Disabled

Inpatient Beds Patient Days

Coronary Care

Inpatient Beds Patient Days

Chemical Dependency

Inpatient Beds Patient Days

Total Beds this Building per Unit

Total Beds this Building per Service

Provide the number of inpatient beds and patient days per type of service for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)

Building Nbr: BLD-03855 Building Name: East Building Year of Information: 2011

Information Current As Of:

Type of Services Provided

<input type="checkbox"/> Nursing	Inpatient Beds	<input type="text" value="0"/>	Patient Days	<input type="text" value="0"/>
<input type="checkbox"/> IntensiveCare	Inpatient Beds	<input type="text" value="0"/>	Patient Days	<input type="text" value="0"/>
<input type="checkbox"/> Pediatric/Adolescent	Inpatient Beds	<input type="text" value="0"/>	Patient Days	<input type="text" value="0"/>
<input type="checkbox"/> Psychiatric Nursing	Inpatient Beds	<input type="text" value="0"/>	Patient Days	<input type="text" value="0"/>
<input type="checkbox"/> Obstetrical Ante/Postpartum	Inpatient Beds	<input type="text" value="0"/>	Patient Days	<input type="text" value="0"/>
<input type="checkbox"/> Intermediate Care	Inpatient Beds	<input type="text" value="0"/>	Patient Days	<input type="text" value="0"/>
<input type="checkbox"/> Skilled Nursing	Inpatient Beds	<input type="text" value="0"/>	Patient Days	<input type="text" value="0"/>

Total Beds this Building per service

<input type="checkbox"/> Surgical	<input type="checkbox"/> Obstetrical Cesarean/Deliv	<input checked="" type="checkbox"/> Rehabilitation Therapy
<input type="checkbox"/> Anesthesia	<input type="checkbox"/> Obstetrical Recovery	<input type="checkbox"/> Renal Dialysis
<input type="checkbox"/> Clinical Lab	<input type="checkbox"/> Newborn/WellBaby	<input type="checkbox"/> Outpatient Surgery
<input type="checkbox"/> Radiological/Imaging	<input type="checkbox"/> Emergency	<input type="checkbox"/> Central Plant
<input type="checkbox"/> Pharmaceutical	<input type="checkbox"/> Nuclear Medicine	<input type="checkbox"/> Support Services
<input type="checkbox"/> Dietetic		
<input checked="" type="checkbox"/> Administration		

Provide the number of inpatient beds and patient days per type of service for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)

Building Nbr: BLD-03855 Building Name: East Building Year of Information: 2012

Information Current As Of: []

Type of Services Provided

- Nursing Inpatient Beds [0] Patient Days [0]
- IntensiveCare Inpatient Beds [0] Patient Days [0]
- Pediatric/Adolescent Inpatient Beds [0] Patient Days [0]
- Psychiatric Nursing Inpatient Beds [0] Patient Days [0]
- Obstetrical Ante/Postpartum Inpatient Beds [0] Patient Days [0]
- Intermediate Care Inpatient Beds [0] Patient Days [0]
- Skilled Nursing Inpatient Beds [0] Patient Days [0]

- Surgical Obstetrical Cesarean/Deliv Rehabilitation Therapy
- Anesthesia Renal Dialysis
- Clinical Lab Obstetrical Recovery
- Radiological/Imaging Newborn/WellBaby Outpatient Surgery
- Pharmaceutical Emergency Central Plant
- Dietetic Nuclear Medicine Support Services
- Administration

Total Beds this Building per service [0]

Provide the number of inpatient beds and patient days per type of service for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)

Building Nbr: BLD-03855 Building Name: East Building Year of Information: 2013

Information Current As Of: 12/30/2013

Type of Services Provided

- Nursing Inpatient Beds Patient Days
- IntensiveCare Inpatient Beds Patient Days
- Pediatric/Adolescent Inpatient Beds Patient Days
- Psychiatric Nursing Inpatient Beds Patient Days
- Obstetrical Ante/Postpartum Inpatient Beds Patient Days
- Intermediate Care Inpatient Beds Patient Days
- Skilled Nursing Inpatient Beds Patient Days

- Surgical Obstetrical Cesarean/Deliv Rehabilitation Therapy
- Anesthesia Renal Dialysis
- Clinical Lab Obstetrical Recovery
- Radiological/Imaging Newborn/WellBaby Outpatient Surgery
- Pharmaceutical Emergency Central Plant
- Dietetic Nuclear Medicine Support Services
- Administration

Total Beds this Building per service

Provide the number of inpatient beds and patient days per type of service for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)

Building Nbr: BLD-03856 Building Name: Central Building Year of Information: 2011

Information Current As Of:

Type of Services Provided

- Nursing Inpatient Beds Patient Days
- IntensiveCare Inpatient Beds Patient Days
- Pediatric/Adolescent Inpatient Beds Patient Days
- Psychiatric Nursing Inpatient Beds Patient Days
- Obstetrical Ante/Postpartum Inpatient Beds Patient Days
- Intermediate Care Inpatient Beds Patient Days
- Skilled Nursing Inpatient Beds Patient Days

- Surgical Obstetrical Cesarean/Deliv Rehabilitation Therapy
- Anesthesia Obstetrical Recovery Renal Dialysis
- Clinical Lab Newborn/WellBaby Outpatient Surgery
- Radiological/Imaging Emergency Central Plant
- Dietetic Nuclear Medicine Support Services
- Administration

Total Beds this Building per service

Provide the number of inpatient beds and patient days per type of service for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per [Section 130061\(c\)\(2\)\(D\)](#)

Building Nbr: Building Name: Year of Information:

Information Current As Of:

Type of Services Provided

- Nursing Inpatient Beds Patient Days
- IntensiveCare Inpatient Beds Patient Days
- Pediatric/Adolescent Inpatient Beds Patient Days
- Psychiatric Nursing Inpatient Beds Patient Days
- Obstetrical Ante/Postpartum Inpatient Beds Patient Days
- Intermediate Care Inpatient Beds Patient Days
- Skilled Nursing Inpatient Beds Patient Days

- Surgical Obstetrical Cesarean/Deliv Rehabilitation Therapy
- Anesthesia Obstetrical Recovery Renal Dialysis
- Clinical Lab Newborn/WellBaby Outpatient Surgery
- Radiological/Imaging Emergency Central Plant
- Dietetic Nuclear Medicine Support Services
- Administration

Total Beds this Building per service

Provide the number of inpatient beds and patient days per type of service for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)

Building Nbr: BLD-03856 Building Name: Central Building Year of Information: 2013

Information Current As Of: 12/30/2013

Type of Services Provided

- Nursing Inpatient Beds Patient Days
- IntensiveCare Inpatient Beds Patient Days
- Pediatric/Adolescent Inpatient Beds Patient Days
- Psychiatric Nursing Inpatient Beds Patient Days
- Obstetrical Ante/Postpartum Inpatient Beds Patient Days
- Intermediate Care Inpatient Beds Patient Days
- Skilled Nursing Inpatient Beds Patient Days

- Surgical Obstetrical Cesarean/Deliv Rehabilitation Therapy
- Anesthesia Renal Dialysis
- Clinical Lab Obstetrical Recovery
- Radiological/Imaging Newborn/WellBaby Outpatient Surgery
- Pharmaceutical Emergency Central Plant
- Dietetic Nuclear Medicine Support Services
- Administration

Total Beds this Building per service

Provide the number of inpatient beds and patient days per type of service for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)

Building Nbr: BLD-03857 Building Name: South Building Year of Information: 2011

Information Current As Of:

Type of Services Provided

<input type="checkbox"/> Nursing	Inpatient Beds	<input type="text" value="0"/>	Patient Days	<input type="text" value="0"/>
<input type="checkbox"/> IntensiveCare	Inpatient Beds	<input type="text" value="0"/>	Patient Days	<input type="text" value="0"/>
<input type="checkbox"/> Pediatric/Adolescent	Inpatient Beds	<input type="text" value="0"/>	Patient Days	<input type="text" value="0"/>
<input type="checkbox"/> Psychiatric Nursing	Inpatient Beds	<input type="text" value="0"/>	Patient Days	<input type="text" value="0"/>
<input type="checkbox"/> Obstetrical Ante/Postpartum	Inpatient Beds	<input type="text" value="0"/>	Patient Days	<input type="text" value="0"/>
<input type="checkbox"/> Intermediate Care	Inpatient Beds	<input type="text" value="0"/>	Patient Days	<input type="text" value="0"/>
<input checked="" type="checkbox"/> Skilled Nursing	Inpatient Beds	<input type="text" value="33"/>	Patient Days	<input type="text" value="8160"/>

<input type="checkbox"/> Surgical	<input type="checkbox"/> Obstetrical Cesarean/Deliv	<input type="checkbox"/> Rehabilitation Therapy
<input type="checkbox"/> Anesthesia	<input type="checkbox"/> Obstetrical Recovery	<input type="checkbox"/> Renal Dialysis
<input type="checkbox"/> Clinical Lab	<input type="checkbox"/> Newborn/WellBaby	<input type="checkbox"/> Outpatient Surgery
<input type="checkbox"/> Radiological/Imaging	<input type="checkbox"/> Emergency	<input checked="" type="checkbox"/> Central Plant
<input checked="" type="checkbox"/> Pharmaceutical	<input type="checkbox"/> Nuclear Medicine	<input type="checkbox"/> Support Services
<input checked="" type="checkbox"/> Dietetic		
<input type="checkbox"/> Administration		

Total Beds this Building per service

Provide the number of inpatient beds and patient days per type of service for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)

Building Nbr: BLD-03857 Building Name: South Building Year of Information: 2012

Information Current As Of:

Type of Services Provided

- Nursing Inpatient Beds Patient Days
- IntensiveCare Inpatient Beds Patient Days
- Pediatric/Adolescent Inpatient Beds Patient Days
- Psychiatric Nursing Inpatient Beds Patient Days
- Obstetrical Ante/Postpartum Inpatient Beds Patient Days
- Intermediate Care Inpatient Beds Patient Days
- Skilled Nursing Inpatient Beds Patient Days

- Surgical Obstetrical Cesarean/Deliv Rehabilitation Therapy
- Anesthesia Renal Dialysis
- Clinical Lab Obstetrical Recovery
- Radiological/Imaging Newborn/WellBaby Outpatient Surgery
- Pharmaceutical Emergency Central Plant
- Dietetic Nuclear Medicine Support Services
- Administration

Total Beds this Building per service

Provide the number of inpatient beds and patient days per type of service for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)

Building Nbr: BLD-03857 Building Name: South Building Year of Information: 2013

Information Current As Of: 12/30/2013

Type of Services Provided

- Nursing Inpatient Beds Patient Days
- IntensiveCare Inpatient Beds Patient Days
- Pediatric/Adolescent Inpatient Beds Patient Days
- Psychiatric Nursing Inpatient Beds Patient Days
- Obstetrical Ante/Postpartum Inpatient Beds Patient Days
- Intermediate Care Inpatient Beds Patient Days
- Skilled Nursing Inpatient Beds Patient Days

- Surgical Obstetrical Cesarean/Deliv Rehabilitation Therapy
- Anesthesia Renal Dialysis
- Clinical Lab Obstetrical Recovery
- Radiological/Imaging Newborn/WellBaby Outpatient Surgery
- Pharmaceutical Emergency Central Plant
- Dietetic Nuclear Medicine Support Services
- Administration

Total Beds this Building per service

Provide the number of inpatient beds and patient days per type of service for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)

Building Nbr: BLD-03858 Building Name: West Building Year of Information: 2011

Information Current As Of:

Type of Services Provided

- Nursing Inpatient Beds 0 Patient Days 0
- IntensiveCare Inpatient Beds 0 Patient Days 0
- Pediatric/Adolescent Inpatient Beds 0 Patient Days 0
- Psychiatric Nursing Inpatient Beds 0 Patient Days 0
- Obstetrical Ante/Postpartum Inpatient Beds 0 Patient Days 0
- Intermediate Care Inpatient Beds 0 Patient Days 0
- Skilled Nursing Inpatient Beds 0 Patient Days 0

- Surgical Obstetrical Cesarean/Deliv Rehabilitation Therapy
- Anesthesia Renal Dialysis
- Clinical Lab Obstetrical Recovery
- Radiological/Imaging Newborn/WellBaby Outpatient Surgery
- Pharmaceutical Emergency Central Plant
- Dietetic Nuclear Medicine Support Services
- Administration

Total Beds this Building per service 0

Provide the number of inpatient beds and patient days per type of service for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)

Building Nbr: BLD-03858 Building Name: West Building Year of Information: 2012

Information Current As Of:

Type of Services Provided

- Nursing Inpatient Beds Patient Days
- IntensiveCare Inpatient Beds Patient Days
- Pediatric/Adolescent Inpatient Beds Patient Days
- Psychiatric Nursing Inpatient Beds Patient Days
- Obstetrical Ante/Postpartum Inpatient Beds Patient Days
- Intermediate Care Inpatient Beds Patient Days
- Skilled Nursing Inpatient Beds Patient Days

- Surgical Obstetrical Cesarean/Deliv Rehabilitation Therapy
- Anesthesia Renal Dialysis
- Clinical Lab Obstetrical Recovery
- Radiological/Imaging Newborn/WellBaby Outpatient Surgery
- Pharmaceutical Emergency Central Plant
- Dietetic Nuclear Medicine Support Services
- Administration

Total Beds this Building per service

Provide the number of inpatient beds and patient days per type of service for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)

Building Nbr: BLD-03858 Building Name: West Building Year of Information: 2013

Information Current As Of: 12/30/2013

Type of Services Provided

- Nursing Inpatient Beds Patient Days
- IntensiveCare Inpatient Beds Patient Days
- Pediatric/Adolescent Inpatient Beds Patient Days
- Psychiatric Nursing Inpatient Beds Patient Days
- Obstetrical Ante/Postpartum Inpatient Beds Patient Days
- Intermediate Care Inpatient Beds Patient Days
- Skilled Nursing Inpatient Beds Patient Days

- Surgical Obstetrical Cesarean/Deliv Rehabilitation Therapy
- Anesthesia Renal Dialysis
- Clinical Lab Obstetrical Recovery
- Radiological/Imaging Newborn/WellBaby Outpatient Surgery
- Pharmaceutical Emergency Central Plant
- Dietetic Nuclear Medicine Support Services
- Administration

Total Beds this Building per service

No data reported for whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c)(2)(E).

Each hospital owner shall also report for each facility for which any buildings will be removed from active care service, any net change in the number of inpatient beds by type of unit and service per [Section 130061\(c\)\(3\)](#)

Building
Number:

BLD-03855

Building Name: East Building

Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?

Rehabilitation
Therapy

Removed from hospital services

Each hospital owner shall also report for each facility for which any buildings will be removed from active care service, any net change in the number of inpatient beds by type of unit and service per [Section 130061\(c\)\(3\)](#)

Building
Number:

BLD-03857

Building Name: South Building

Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?

Pharmaceutical

Removed from hospital services

Each hospital owner shall also report for each facility for which any buildings will be removed from active care service, any net change in the number of inpatient beds by type of unit and service per [Section 130061\(c\)\(3\)](#)

Building
Number:

BLD-03857

Building Name: South Building

Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?

CentralPlant

Removed from hospital services

Each hospital owner shall also report for each facility for which any buildings will be removed from active care service, any net change in the number of inpatient beds by type of unit and service per [Section 130061\(c\)\(3\)](#)

Building Number: BLD-03856 Building Name: Central Building

Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?

Dietetic Removed from hospital services

Each hospital owner shall also report for each facility for which any buildings will be removed from active care service, any net change in the number of inpatient beds by type of unit and service per [Section 130061\(c\)\(3\)](#)

Building Number: BLD-03858 Building Name: West Building

Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?

CentralPlant Removed from hospital services

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-03855

Building Name: East Building

Type of Service Provided

<input type="checkbox"/> Nursing	<input type="checkbox"/> Surgical	<input type="checkbox"/> Obstetrical Cesarean/Deliv	<input checked="" type="checkbox"/> Rehabilitation Therapy
<input type="checkbox"/> IntensiveCare	<input type="checkbox"/> Anesthesia	<input type="checkbox"/> Obstetrical Recovery	<input type="checkbox"/> Renal Dialysis
<input type="checkbox"/> Pediatric/Adol escent	<input type="checkbox"/> Clinical Lab	<input type="checkbox"/> Newborn/ WellBaby	<input type="checkbox"/> Outpatient Surgery
<input type="checkbox"/> Psychiatric Nursing	<input type="checkbox"/> Radiological/ Imaging	<input type="checkbox"/> Emergency	<input type="checkbox"/> Central Plant
<input type="checkbox"/> Obstetrical Ante/Postprtum	<input type="checkbox"/> Pharmaceutical	<input type="checkbox"/> Nuclear Medicine	<input type="checkbox"/> Support Services
<input type="checkbox"/> Intermediate Care	<input type="checkbox"/> Dietetic		
<input type="checkbox"/> Skilled Nursing	<input type="checkbox"/> Administration		

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-03856

Building Name: Central Building

Type of Service Provided

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Nursing | <input type="checkbox"/> Surgical | <input type="checkbox"/> Obstetrical
Cesarean/Deliv | <input type="checkbox"/> Rehabilitation
Therapy |
| <input type="checkbox"/> IntensiveCare | <input type="checkbox"/> Anesthesia | <input type="checkbox"/> Obstetrical
Recovery | <input type="checkbox"/> Renal Dialysis |
| <input type="checkbox"/> Pediatric/Adol
escent | <input type="checkbox"/> Clinical Lab | <input type="checkbox"/> Newborn/
WellBaby | <input type="checkbox"/> Outpatient
Surgery |
| <input type="checkbox"/> Psychiatric
Nursing | <input type="checkbox"/> Radiological/
Imaging | <input type="checkbox"/> Emergency | <input type="checkbox"/> Central Plant |
| <input type="checkbox"/> Obstetrical
Ante/Postprtum | <input type="checkbox"/> Pharmaceutical | <input type="checkbox"/> Nuclear
Medicine | <input type="checkbox"/> Support
Services |
| <input type="checkbox"/> Intermediate
Care | <input checked="" type="checkbox"/> Dietetic | <input type="checkbox"/> Administration | |
| <input type="checkbox"/> Skilled Nursing | | | |

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-03857

Building Name: South Building

Type of Service Provided

<input type="checkbox"/> Nursing	<input type="checkbox"/> Surgical	<input type="checkbox"/> Obstetrical Cesarean/Deliv	<input type="checkbox"/> Rehabilitation Therapy
<input type="checkbox"/> IntensiveCare	<input type="checkbox"/> Anesthesia	<input type="checkbox"/> Obstetrical Recovery	<input type="checkbox"/> Renal Dialysis
<input type="checkbox"/> Pediatric/Adol escent	<input type="checkbox"/> Clinical Lab	<input type="checkbox"/> Newborn/ WellBaby	<input type="checkbox"/> Outpatient Surgery
<input type="checkbox"/> Psychiatric Nursing	<input type="checkbox"/> Radiological/ Imaging	<input type="checkbox"/> Emergency	<input checked="" type="checkbox"/> Central Plant
<input type="checkbox"/> Obstetrical Ante/Postprtum	<input checked="" type="checkbox"/> Pharmaceutical	<input type="checkbox"/> Nuclear Medicine	<input type="checkbox"/> Support Services
<input type="checkbox"/> Intermediate Care	<input type="checkbox"/> Dietetic	<input type="checkbox"/> Administration	
<input type="checkbox"/> Skilled Nursing			

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-03858

Building Name: West Building

Type of Service Provided

<input type="checkbox"/> Nursing	<input type="checkbox"/> Surgical	<input type="checkbox"/> Obstetrical Cesarean/Deliv	<input type="checkbox"/> Rehabilitation Therapy
<input type="checkbox"/> IntensiveCare	<input type="checkbox"/> Anesthesia	<input type="checkbox"/> Obstetrical Recovery	<input type="checkbox"/> Renal Dialysis
<input type="checkbox"/> Pediatric/Adol escent	<input type="checkbox"/> Clinical Lab	<input type="checkbox"/> Newborn/ WellBaby	<input type="checkbox"/> Outpatient Surgery
<input type="checkbox"/> Psychiatric Nursing	<input type="checkbox"/> Radiological/ Imaging	<input type="checkbox"/> Emergency	<input checked="" type="checkbox"/> Central Plant
<input type="checkbox"/> Obstetrical Ante/Postprtum	<input type="checkbox"/> Pharmaceutical	<input type="checkbox"/> Nuclear Medicine	<input type="checkbox"/> Support Services
<input type="checkbox"/> Intermediate Care	<input type="checkbox"/> Dietetic		
<input type="checkbox"/> Skilled Nursing	<input type="checkbox"/> Administration		

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 actue care hospital building per Section 130061(c)(5)

Building Number: BLD-01313 Building Name: Patient Care Wing

Configuration: Remove from GAC service by 1/1/2015

Type of Service Provided

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Nursing | <input type="checkbox"/> Surgical | <input type="checkbox"/> Obstetrical
Cesarean/Deliv | <input checked="" type="checkbox"/> Rehabilitation
Therapy |
| <input type="checkbox"/> IntensiveCare | <input type="checkbox"/> Anesthesia | <input type="checkbox"/> Obstetrical
Recovery | <input type="checkbox"/> Renal Dialysis |
| <input type="checkbox"/> Pediatric/Adol
escent | <input type="checkbox"/> Clinical Lab | <input type="checkbox"/> Newborn/
WellBaby | <input type="checkbox"/> Outpatient
Surgery |
| <input checked="" type="checkbox"/> Psychiatric
Nursing | <input type="checkbox"/> Radiological/
Imaging | <input type="checkbox"/> Emergency | <input checked="" type="checkbox"/> Central Plant |
| <input type="checkbox"/> Obstetrical
Ante/Postprtum | <input type="checkbox"/> Pharmaceutical | <input type="checkbox"/> Nuclear Medicine | <input type="checkbox"/> Support
Services |
| <input type="checkbox"/> Intermediate
Care | <input type="checkbox"/> Dietetic | | |
| <input type="checkbox"/> Skilled Nursing | <input type="checkbox"/> Administration | | |

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 actue care hospital building per Section 130061(c)(5)

Building Number: BLD-01314

Building Name: Cancer Center-Linear Accelerator

Configuration: Remove from GAC service by 1/1/2015

Type of Service Provided

- Nursing
- IntensiveCare
- Pediatric/Adol escent
- Psychiatric Nursing
- Obstetrical Ante/Postprtum
- Intermediate Care
- Skilled Nursing

- Surgical
- Anesthesia
- Clinical Lab
- Radiological/ Imaging
- Pharmaceutical
- Dietetic
- Administration

- Obstetrical Cesarean/Deliv
- Obstetrical Recovery
- Newborn/ WellBaby
- Emergency
- Nuclear Medicine

- Rehabilitation Therapy
- Renal Dialysis
- Outpatient Surgery
- Central Plant
- Support Services

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 actue care hospital building per Section 130061(c)(5)

Building Number: BLD-03166

Building Name: Link Building (Elevator Lobby)

Configuration: Remove from GAC service by 1/1/2015

Type of Service Provided

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Nursing | <input type="checkbox"/> Surgical | <input type="checkbox"/> Obstetrical
Cesarean/Deliv | <input type="checkbox"/> Rehabilitation
Therapy |
| <input type="checkbox"/> IntensiveCare | <input type="checkbox"/> Anesthesia | <input type="checkbox"/> Obstetrical
Recovery | <input type="checkbox"/> Renal Dialysis |
| <input type="checkbox"/> Pediatric/Adol
escent | <input type="checkbox"/> Clinical Lab | <input type="checkbox"/> Newborn/
WellBaby | <input type="checkbox"/> Outpatient
Surgery |
| <input type="checkbox"/> Psychiatric
Nursing | <input type="checkbox"/> Radiological/
Imaging | <input type="checkbox"/> Emergency | <input type="checkbox"/> Central Plant |
| <input type="checkbox"/> Obstetrical
Ante/Postprtum | <input type="checkbox"/> Pharmaceutical | <input type="checkbox"/> Nuclear Medicine | <input checked="" type="checkbox"/> Support
Services |
| <input type="checkbox"/> Intermediate
Care | <input type="checkbox"/> Dietetic | | |
| <input type="checkbox"/> Skilled Nursing | <input type="checkbox"/> Administration | | |

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 actue care hospital building per Section 130061(c)(5)

Building Number: BLD-03855

Building Name: East Building

Configuration: Remove from GAC service by 1/1/2015

Type of Service Provided

Nursing

IntensiveCare

Pediatric/Adol
escent

Psychiatric
Nursing

Obstetrical
Ante/Postprtum

Intermediate
Care

Skilled Nursing

Surgical

Anesthesia

Clinical Lab

Radiological/
Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical
Cesarean/Deliv

Obstetrical
Recovery

Newborn/
WellBaby

Emergency

Nuclear Medicine

Rehabilitation
Therapy

Renal Dialysis

Outpatient
Surgery

Central Plant

Support
Services

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-03856

Building Name:

Central Building

Configuration:

Remove from GAC service by 1/1/2015

Type of Service Provided

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Nursing | <input type="checkbox"/> Surgical | <input type="checkbox"/> Obstetrical
Cesarean/Deliv | <input type="checkbox"/> Rehabilitation
Therapy |
| <input type="checkbox"/> IntensiveCare | <input type="checkbox"/> Anesthesia | <input type="checkbox"/> Obstetrical
Recovery | <input type="checkbox"/> Renal Dialysis |
| <input type="checkbox"/> Pediatric/Adol
escent | <input type="checkbox"/> Clinical Lab | <input type="checkbox"/> Newborn/
WellBaby | <input type="checkbox"/> Outpatient
Surgery |
| <input type="checkbox"/> Psychiatric
Nursing | <input type="checkbox"/> Radiological/
Imaging | <input type="checkbox"/> Emergency | <input type="checkbox"/> Central Plant |
| <input type="checkbox"/> Obstetrical
Ante/Postprtum | <input type="checkbox"/> Pharmaceutical | <input type="checkbox"/> Nuclear Medicine | <input type="checkbox"/> Support
Services |
| <input type="checkbox"/> Intermediate
Care | <input checked="" type="checkbox"/> Dietetic | <input type="checkbox"/> Administration | |
| <input type="checkbox"/> Skilled Nursing | | | |

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-03857

Building Name: South Building

Configuration: Remove from GAC service by 1/1/2015

Type of Service Provided

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Nursing | <input type="checkbox"/> Surgical | <input type="checkbox"/> Obstetrical
Cesarean/Deliv | <input type="checkbox"/> Rehabilitation
Therapy |
| <input type="checkbox"/> IntensiveCare | <input type="checkbox"/> Anesthesia | <input type="checkbox"/> Obstetrical
Recovery | <input type="checkbox"/> Renal Dialysis |
| <input type="checkbox"/> Pediatric/Adol
escent | <input type="checkbox"/> Clinical Lab | <input type="checkbox"/> Newborn/
WellBaby | <input type="checkbox"/> Outpatient
Surgery |
| <input type="checkbox"/> Psychiatric
Nursing | <input type="checkbox"/> Radiological/
Imaging | <input type="checkbox"/> Emergency | <input checked="" type="checkbox"/> Central Plant |
| <input type="checkbox"/> Obstetrical
Ante/Postprtum | <input checked="" type="checkbox"/> Pharmaceutical | <input type="checkbox"/> Nuclear Medicine | <input type="checkbox"/> Support
Services |
| <input type="checkbox"/> Intermediate
Care | <input type="checkbox"/> Dietetic | | |
| <input type="checkbox"/> Skilled Nursing | <input type="checkbox"/> Administration | | |

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 actue care hospital building per Section 130061(c)(5)

Building Number: BLD-03858

Building Name: West Building

Configuration: Remove from GAC service by 1/1/2015

Type of Service Provided

Nursing

IntensiveCare

Pediatric/Adol
escent

Psychiatric
Nursing

Obstetrical
Ante/Postprtum

Intermediate
Care

Skilled Nursing

Surgical

Anesthesia

Clinical Lab

Radiological/
Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical
Cesarean/Deliv

Obstetrical
Recovery

Newborn/
WellBaby

Emergency

Nuclear Medicine

Rehabilitation
Therapy

Renal Dialysis

Outpatient
Surgery

Central Plant

Support
Services

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, and SPC-5 per Section 130061(e)

Building Number: BLD-01313

Building Name: Patient Care Wing

Type of Service Provided

<input type="checkbox"/>	Nursing	Inpatient Beds	<input type="text" value="42"/>
<input type="checkbox"/>	IntensiveCare	Inpatient Beds	<input type="text" value="0"/>
<input type="checkbox"/>	Pediatric/Adol escent	Inpatient Beds	<input type="text" value="0"/>
<input checked="" type="checkbox"/>	Psychiatric Nursing	Inpatient Beds	<input type="text" value="69"/>
<input type="checkbox"/>	Obstetrical Ante/Postprtum	Inpatient Beds	<input type="text" value="0"/>
<input type="checkbox"/>	Intermediate Care	Inpatient Beds	<input type="text" value="0"/>
<input type="checkbox"/>	Skilled Nursing	Inpatient Beds	<input type="text" value="0"/>

<input type="checkbox"/>	Surgical	<input type="checkbox"/>	Obstetrical Cesarean/Deliv	<input checked="" type="checkbox"/>	Rehabilitation Therapy
<input type="checkbox"/>	Anesthesia	<input type="checkbox"/>	Obstetrical Recovery	<input type="checkbox"/>	Renal Dialysis
<input type="checkbox"/>	Clinical Lab	<input type="checkbox"/>	Newborn/ WellBaby	<input type="checkbox"/>	Outpatient Surgery
<input type="checkbox"/>	Radiological/ Imaging	<input type="checkbox"/>	Emergency	<input checked="" type="checkbox"/>	Central Plant
<input type="checkbox"/>	Pharmaceutia	<input type="checkbox"/>	Nuclear Medicine	<input type="checkbox"/>	Support Services
<input type="checkbox"/>	Dietetic	<input type="checkbox"/>	Administration		

Total Beds this Building

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, and SPC-5 per Section 130061(e)

Building Number: BLD-01314

Building Name: Cancer Center-Linear Accelerator

Type of Service Provided

Nursing Inpatient Beds 0

IntensiveCare Inpatient Beds 0

Pediatric/Adol escent Inpatient Beds 0

Psychiatric Nursing Inpatient Beds 0

Obstetrical Ante/Postprtum Inpatient Beds 0

Intermediate Care Inpatient Beds 0

Skilled Nursing Inpatient Beds 0

Total Beds this Building 0

Surgical

Anesthesia

Clinical Lab

Radiological/ Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical Cesarean/Deliv

Obstetrical Recovery

Newborn/ WellBaby

Emergency

Nuclear Medicine

Rehabilitation Therapy

Renal Dialysis

Outpatient Surgery

Central Plant

Support Services

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, and SPC-5 per Section 130061(e)

Building Number: BLD-03166

Building Name: Link Building (Elevator Lobby)

Type of Service Provided

Nursing Inpatient Beds 0

IntensiveCare Inpatient Beds 0

Pediatric/Adol escent Inpatient Beds 0

Psychiatric Nursing Inpatient Beds 0

Obstetrical Ante/Postprtum Inpatient Beds 0

Intermediate Care Inpatient Beds 0

Skilled Nursing Inpatient Beds 0

Total Beds this Building 0

Surgical

Anesthesia

Clinical Lab

Radiological/ Imaging

Pharmaceutical

Dietetic

Administration

Obstetrical Cesarean/Deliv

Obstetrical Recovery

Newborn/ WellBaby

Emergency

Nuclear Medicine

Rehabilitation Therapy

Renal Dialysis

Outpatient Surgery

Central Plant

Support Services

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, and SPC-5 per Section 130061(e)

Building Number: BLD-01313 Building Name: Patient Care Wing

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (Exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

Intensive Care Newborn Nursery

Inpatient Bed Inpatient Days

Intermediate Care

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

Rehabilitation Center

Inpatient Bed Inpatient Days

Int. Care / Developmentally Disabled

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

Total Beds this Building Per Unit

Total Beds this Building Per Service

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, and SPC-5 per Section 130061(e)

Building Number: BLD-01314 Building Name: Cancer Center-Linear Accelerator

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (Exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

**Intensive Care Newborn
Nursery**

Inpatient Bed Inpatient Days

Intermediate Care

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

**Rehabilitation
Center**

Inpatient Bed Inpatient Days

**Int. Care / Developmentally
Disabled**

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

**Total Beds this
Building Per
Unit****Total Beds this
Building Per
Service**

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, and SPC-5 per Section 130061(e)

Building Number: BLD-03166 Building Name: Link Building (Elevator Lobby)

Medical / Surgical (Include GYN)

Inpatient Bed Inpatient Days

Acute Respiratory Care

Inpatient Bed Inpatient Days

Acute Psychiatric

Inpatient Bed Inpatient Days

Perinatal (Exclude Newborn / GYN)

Inpatient Bed Inpatient Days

Burn

Inpatient Bed Inpatient Days

Skilled Nursing

Inpatient Bed Inpatient Days

Pediatric

Inpatient Bed Inpatient Days

**Intensive Care Newborn
Nursery**

Inpatient Bed Inpatient Days

Intermediate Care

Inpatient Bed Inpatient Days

Intensive Care

Inpatient Bed Inpatient Days

**Rehabilitation
Center**

Inpatient Bed Inpatient Days

**Int. Care / Developmentally
Disabled**

Inpatient Bed Inpatient Days

Coronary Care

Inpatient Bed Inpatient Days

Chemical Dependency

Inpatient Bed Inpatient Days

**Total Beds this
Building Per
Unit****Total Beds this
Building Per
Service**