## 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:	11722						
Facility Name:	Hollywo	od Presbyterian Medical Center					
Address:	1300 N.	Vermont Ave.					
City:	Los Ang	eles					
Hospital Owner/Lice	ensee:	Cha Hollywood Presbyterian Medical Center, LP					
Year of Rep	porting:	2018					
Contact 1 e-mail Ac	ddress:	[Confidential data left blank intentionally.]					
Contact 2 e-mail Ac	ddress:	[Confidential data left blank intentionally.]					
Contact 3 e-mail Ad	dress::	[Confidential data left blank intentionally.]					
Name of Sub	omitter:	Hollywood Presbyterian Medical Center					
Submission	n Date:	12/13/2018 8:10:17 AM					

Report Year: 2018 11722 Hollywood Presbyterian Medical Center Los Angeles Page:2 of 37

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- 01977	North Wing	1300 N. Vermont Ave.	Rebuild	SPC5	01/01/2020	07/31/2019
BLD- 01978	South Wing	1300 N. Vermont Ave.	Retrofit	SPC2	01/01/2019	01/01/2020
BLD- 01979	D & T Tower	1300 N. Vermont Ave.	Retrofit	SPC2	01/01/2019	01/01/2020
BLD- 01981	Kitchen Addition	1300 N. Vermont Ave.	Rebuild	SPC5	01/01/2020	07/01/2019

Report Year: 11722 Hollywood Presbyterian Medical Center Los Angeles Page:3 of 37 2018 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: North Wing Retrofit/Replacement BLD-01977 No Project: Facility Project CEQA Sub Plan Approved Projected Projected Completion Date Status Number Number Date Start Date Review Num Scope Date In 0 CLOS No 11722 H162727-19 10/27/201 11/29/2016 06/15/2017 07/01/2019 -00 6 12:00:00 AM 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-01978 South Wing No Retrofit/Replacement Project: Facility Project Plan Approved Projected Projected CEQA Sub Completion Date Status Number Number Date Start Date Review Num Scope Date In 0 11/29/2016 FIEL No 11722 HL101502-0 6/30/2010 12:00:00 AM

Los Angeles Report Year: 2018 11722 Hollywood Presbyterian Medical Center Page:4 of 37 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). No **Building No:** BLD-01979 D & T Tower Retrofit/Replacement Project: Facility Project Plan Approved Projected Projected **CEQA** Sub Completion Date Status Date Start Date Review Number Number Num Scope Date In 11722 HL101498-0 0 6/30/2010 12/6/2016 FIEL No 12:00:00 AM 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). No **Building No:** BLD-01981 Kitchen Addition Retrofit/Replacement Project: Facility Project Projected CEQA Sub Plan Approved Projected Completion Date Status Date Start Date Review Number Number Num Scope Date In H162727-19 0 CLOS No 11722 10/27/201 11/29/2016 06/15/2017 07/01/2019 -00 6 12:00:00 AM

Report Year: 2018	11722	Hollywood Presbyterian Medical Center	Los Angeles		Page:5 of 37			
Provide the number of	Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)							
Building Number: BL	Building Number: BLD-01977 Building Name: North Wing							
Type of Service Prov	<u>/ided</u>							
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery				
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby				
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	X Emergency				
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine				
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical  X Dietetic	Rehabilitati Therapy	on			
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialy	sis			
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services	Outpatient Surgery				
	beus	Total Beds this Building	Obstetrical Cesarean/Deliv	Central Pla	nt			

Report Yea	ır: 2018	11722	Hollywood Presbyteria	n Medical Cent	ter	Los Angeles		Page:6 of 37	
Provide tl	Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)								
Building I	Number: BLI	D-01978	Building N	Name:	South Wing				
Type of S	Service Provi	<u>ided</u>							
X Nur	rsing	Inpatient Beds	65 Inpatient Days	4570	X Surg	jical	Obstetrica Recovery		
Inte	ensiveCare	Inpatient Beds	0 Inpatient Day	s 0	Anes	sthesia	Newborn/ WellBaby		
Pec esc	diatric/Adol ent	Inpatient Beds	0 Inpatient Da	ys 0	Clinic	cal Lab	Emergend	СУ	
	/chiatric rsing	Inpatient Beds	0 Inpatient Da	ys 0	X Radi Imag	ological/ jing	Nuclear Medicine		
	stetrical e/Postprtum	Inpatient Beds	0 Inpatient Da	ys 0	Phari	maceutical	Rehabilita Therapy	ition	
Inte Car	ermediate re	Inpatient Beds	0 Inpatient Da	ys 0		inistration	Renal Dia		
Skil	lled Nursing	Inpatient Beds	0 Inpatient Da	ys 0	Supp Servi	ices	Surgery	ı	
		2000	Total Beds this Building	65		tetrical arean/Deliv	Central P	ant	

Report	Year: 2018	11722	Hollywood Presbyterian Medical Center	Los Angeles	Page:7 of 37			
Prov	Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)							
Build	ling Number: BL	.D-01979	Building Name: D 8	& T Tower				
Type	e of Service Prov	<u>rided</u>						
X	Nursing	Inpatient Beds	28 Inpatient 494 Days	Surgical	Obstetrical Recovery			
X	IntensiveCare	Inpatient Beds	8 Inpatient Days 0	Anesthesia	Newborn/ WellBaby			
	Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	X Clinical Lab	Emergency			
	Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	X Nuclear Medicine			
	Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	X Rehabilitation Therapy			
	Intermediate Care	Inpatient Beds	0 Inpatient Days 0	X Administration	Renal Dialysis			
	Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services	X Outpatient Surgery			
			Total Beds this Building	Obstetrical Cesarean/Deliv	X Central Plant			

Report Year: 20	18 11722	Hollywood Presbyterian Medical Cente	Los Angeles	Page:8 of 37
Provide the number	er of inpatient be	ds and patient days per type of service p	er building per Section 13006	31(c)(1)(F)
Building Number:  Type of Service F		Building Name: Ki	itchen Addition	
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery
IntensiveCar	e Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
Pediatric/Add	ol Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postprt	Inpatient um Beds	0 Inpatient Days 0	Pharmaceutical  X Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration Support	Renal Dialysis
Skilled Nursi	ng Inpatient Beds	0 Inpatient Days 0	Services	Outpatient Surgery
	2000	Total Beds this Building	Obstetrical Cesarean/Deliv	Central Plant

Report Year: 2018 11722 Hollywood Presbyterian Medical Center Los Angeles Page:9 of 37 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) BLD-01977 **North Wing Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Bed Days Bed Days Perinatal (excluse Newborn / GYN) **Skilled Nursing** Burn Inpatient 0 Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Pediatric** intensive Care Newborn **Intermediate Card Nursery** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Days Bed Days Bed **Intensive Care** Rehabilitation Int. Care / development Center **Disabled** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Days Days Days Bed Bed Bed **Total Beds this** Total Beds this **Coronary Care** Chemical **Building Per Building Per** Dependency Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Days Bed

Report Year: 2018 11722 Hollywood Presbyterian Medical Center Los Angeles Page:10 of 37 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) BLD-01978 South Wing **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient 37 Inpatient 81 Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Bed Days Bed Days Perinatal (excluse Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Days Days Bed Bed **Pediatric** intensive Care Newborn **Intermediate Card** Nursery Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Intensive Care** Rehabilitation Int. Care / development **Disabled** Center 4489 28 Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Bed Days Days Bed Days **Total Beds this Total Beds this Coronary Care** Chemical **Building Per Building Per** Dependency Unit Service 65 Inpatient 65 Inpatient Inpatient Inpatient Days Days Bed Bed

Report Year: 2018 11722 Hollywood Presbyterian Medical Center Los Angeles Page:11 of 37 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) D & T Tower **Building Number:** BLD-01979 **Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** 494 Inpatient 28 Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Bed Days Bed Days Perinatal (excluse Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Days Days Bed Bed **Pediatric** intensive Care Newborn **Intermediate Card** Nursery Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Intensive Care** Rehabilitation Int. Care / development **Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Bed Days Days Bed Days **Total Beds this Total Beds this Coronary Care** Chemical **Building Per Building Per** Dependency Unit Service Inpatient 36 Inpatient Inpatient Inpatient 36 Days Days Bed Bed

Report Year: 2018 11722 Hollywood Presbyterian Medical Center Los Angeles Page:12 of 37 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) Kitchen Addition **Building Number:** BLD-01981 **Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Bed Days Bed Days Perinatal (excluse Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Days Days Bed Bed **Pediatric** intensive Care Newborn **Intermediate Card** Nursery Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Intensive Care** Rehabilitation Int. Care / development **Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Bed Days Days Bed Days **Total Beds this Total Beds this Coronary Care** Chemical **Building Per Building Per** Dependency Unit Service Inpatient Inpatient 0 Inpatient Inpatient ol Days Days Bed Bed

Report Year: 2018 11722 Hollywood Presbyterian Medical Center Los Angeles Page:13 of 37

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-01977	North Wing	Rebuild
BLD-01978	South Wing	Retrofit
BLD-01979	D & T Tower	Retrofit
BLD-01980	Patient Tower	Remain
BLD-01981	Kitchen Addition	Rebuild
BLD-01982	Emergency Addition	Remain
BLD-01983	Linear Accelerator Addition	Remain

Report Year:	2018 11722 Hollywood Presbyterian Medical Center	Los Angele	Page:14 of 37							
List ALL proposed new buildings to be constructed at this or another site.										
Building Number	Building Name	New Site								
N_1	Replacement Hospital									

Report Ye	ear: 2018 11722	Но	Ilywood Presbyterian Medica	l Cente	Los Angeles		Page:15 of 37		
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 N	Building Number: BLD-01977 North Wing Removal Date:								
Planned U	Jses for the building to b	e remov	ved from acute care service:						
Planned	use for building:								
Inpatient s	services currently delive	red in th	e building:						
	Nursing IntensiveCare		Surgical  Anesthesia		Obstetrical Cesarean/Deliv	Rehabilitation Therapy			
	Pediatric/Adol escent		Clinical Lab		Obstetrical Recovery	Renal Dialysis	5		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery			
	Obstetrical Ante/Postprtum		Pharmaceutical	X	Emergency	Central Plant			
	Intermediate Care	X	Dietetic		Nuclear Medicine	Support Services			
	Skilled Nursing		Administration						

Report Ye	ear: 2018	11722 H	ollywood Presbyterian Med	ical Cente	er L	os Angeles		Page:16 of 37	
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 N	Building Number: BLD-01981 Kitchen Addition Removal Date:								
Planned L	Jses for the buildir	ng to be remo	oved from acute care service	e:					
Planned u	use for building:								
Inpatient s	services currently	delivered in t	he building:						
	Nursing		Surgical		Obstetrical Cesarean/Deliv	, [	Rehabilitation Therapy		
	IntensiveCare		Anesthesia				,		
	Pediatric/Adol escent		Clinical Lab		Obstetrical Recovery		Renal Dialysis	3	
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	Obstetrical Ante/Postprtum		Pharmaceutical	П	Emergency	Г	Central Plant		
	Intermediate Care	X	Dietetic		Nuclear Medicine		Support Services		
	Skilled Nursing		Administration				301 VI303		

Report Year:	2018	11722	Hollywood Presbyterian Medical Center	Los Angeles	Page:17 of 37				
No data reported for Section 130061(c)(2)(D).									

Report Year:	2018	11722	Hollywood Presbyterian Medical Center	Los Angeles	Page:18 of 37				
No data reported for Section 130061(c)(2)(D).									

Report Year: 2018 Hollywood Presbyterian Medical Center	Los Angeles	Page:19 of 37
Report whether the general acute care services and beds will be relocated to a new, exi building sites or project numbers for buildings with a Building Resolution of "Rebuild" or		responding
Building Number:  Will general acute care services and beds will be relocated to a new, Existing or retrofitte  Dietetic  N/A		
Report whether the general acute care services and beds will be relocated to a new, exi building sites or project numbers for buildings with a Building Resolution of "Rebuild" or		responding
Building Number:  Will general acute care services and beds will be relocated to a new, Existing or retrofitt  Emergency  North Wing  North Wing  North Wing  North Wing	ed building?	
Report whether the general acute care services and beds will be relocated to a new, exi building sites or project numbers for buildings with a Building Resolution of "Rebuild" or		responding
Building Number:  Will general acute care services and beds will be relocated to a new, Existing or retrofitt  Dietetic  N/A	ed building?	

Report Year:	2018	11722	Hollywood Presbyterian Medical Center	Los Angeles	Page:20 of 37
No data reporte	d for Section	n 130061(c)	(3).		

ding Number:	BLD-01977 Buildi	ng Name: N	orth Wing			
Type of Service	e Provided	I 🗆	Surgical		Obstetrical	Rehabilitation
	Nursing		Cargical		Cesarean/Deliv	Therapy
	IntensiveCare		Anesthesia		Obstetrical Recovery	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab			Outpatient
			Radiological/ Imaging	Ш	Newborn/ WellBaby	Surgery
	Psychiatric Nursing		Pharmaceutical	X	Emergency	Central Plant
	Obstetrical Ante/Postprtum	X	Dietetic		Nuclear Medicine	Support Services
	Intermediate Care		Administration			
	Skilled Nursing					

Report Year: 201	8 11722 Hollyw	rood Presbyterian Medica	al Center	Los Angeles		Page:22 of 37
Report any general per Section 130061		tient service that is provi	ded in any general a	cute care hospital bu	uilding that is r	ated SPC-1
Building Number:	BLD-01978 Buildin	g Name: South Wing				
Type of Service	Provided					
		X Surgical		Obstetrical Cesarean/Deliv	Reha Thera	abilitation apy
X	Nursing	Anesthes		<b>.</b>	□ Pons	al Dialysis
	IntensiveCare	Clinical L		Obstetrical Recovery	IVene	ii Diaiysis
	Pediatric/Adol escent	X Radiolog		Newborn/ WellBaby	Outp Surg	atient ery
	Psychiatric Nursing	Imaging Pharmac	_	Emergency	Cent	ral Plant
	Obstetrical Ante/Postprtum	Dietetic		Nuclear Medicine	Supp Servi	
	Intermediate Care	Administ	ration			
	Skilled Nursing					

ype of Service P	Provided						
		I 🗆	Surgical		Obstetrical	X	Rehabilitation
X 1	Nursing				Cesarean/Deliv		Therapy
X I	ntensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent	X	Clinical Lab			X	Outpatient Surgery
	Psychiatric		Radiological/ Imaging		Newborn/ WellBaby		Surgery
	Nursing		Pharmaceutical		Emergency	X	Central Plant
	Obstetrical Ante/Postprtum		Dietetic	Х	Nuclear Medicine		Support Services
	ntermediate Care	X	Administration				
	Skilled Nursing						

Report Year: 201	11722 Hollyw	ood Presbyterian N	Medical Center		Los Angeles		Page	:24 of 37
Report any general per Section 130061	acute care hospital inpa	tient service that is	provided in any ge	neral ac	ute care hospital b	uilding t	hat is rated SPC	:-1
Building Number:	BLD-01981 Buildin	g Name: Kitcher	n Addition					
Type of Service	e Provided							
		Sur	gical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
	Nursing	☐ Ane	esthesia				Renal Dialysis	
	IntensiveCare		nical Lab		Obstetrical Recovery	Ш	Keliai Diaiysis	
	Pediatric/Adol escent		diological/		lewborn/ VellBaby		Outpatient Surgery	
	Psychiatric Nursing	Ima	aging armaceutical		mergency		Central Plant	
			aimaceuticai		mergency		Central Flant	
	Obstetrical Ante/Postprtum	X Die	etetic		luclear ledicine		Support Services	
	Intermediate Care	Adı	ministration					
	Skilled Nursing							

ding Number: BLD-01977	Building Name: North Wing		
onfiguration: Remove from	GAC service by 1/1/2020		
Type of Service Provided			
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal Dialysis
Pediatric/Adol escent	Clinical Lab	recovery	
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Plant
Intermediate	Dietetic	Linergency	U Gential Flant
Care Skilled Nursing	Administration	Nuclear Medicine	Support Services

port Year: 2	2018 11722 F	lollywood Pr	esbyterian Medical Ce	nter	Los Angeles	Page:26 of 37
	ther by retrofit or by r				ach building will comply be provided in each geno	
uilding Number:	BLD-01978	Building Na	me: South Wing			
Configuration:	Remove from GAC	service by	1/1/2030			
Type of Servic	e Provided					
N	lursing		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
Ir	ntensiveCare		Anesthesia		Obstetrical	Renal Dialysis
	Pediatric/Adol scent		Clinical Lab		Recovery	
	Psychiatric Iursing		Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Inte/Postprtum		Pharmaceutical		Emorgonov	Central Plant
	ntermediate		Dietetic		Emergency	Central Plant
	Care		Administration		Nuclear Medicine	Support Services
S	skilled Nursing					

Report Year: 20	11722 H	lollywood Pr	esbyterian Medical Cen	ter	Los Angeles		Page:27 of 37
Report the final cor requirements wheth per Section 130061	her by retrofit or by r	dings on the eplacement	hospital campus showir and the type of service	ng how e that will t	ach building will comply voe provided in each gene	vith the SPC ral acute ca	c-5/NPC-4 or 5 re hospital building
Building Number:	BLD-01979	Building Na	me: D & T Tower				
Configuration:	Remove from GAC	service by	1/1/2030				
Type of Service	Provided						
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Int	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	ediatric/Adol cent		Clinical Lab		Recovery		
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	ostetrical nte/Postprtum		Pharmaceutical		Emergency		Central Plant
Int Ca	rermediate are		Dietetic		Nuclear Medicine		Support
Sk	illed Nursing		Administration				Services

eport Year: 201	18 11722 H	ollywood Pr	esbyterian Medical Cen	ter	Los Angeles	Page:28 of 37
	er by retrofit or by re				ach building will comply on provided in each gene	
uilding Number:	BLD-01980	Building Nar	me: Patient Tower			
Configuration:	Retrofit Conforming	g building to	NPC 4 or NPC 5			
Type of Service	Provided					
Nur	rsing		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
Inte	ensiveCare		Anesthesia		Obstetrical Recovery	Renal Dialysis
Pec esc	diatric/Adol cent		Clinical Lab		Recovery	
	/chiatric rsing		Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
	stetrical :e/Postprtum		Pharmaceutical		_	0.1.15
	ermediate		Dietetic		Emergency	Central Plant
Car					Nuclear Medicine	Support Services
Skil	lled Nursing		Administration			

Report Year: 20	018 11722 H	Hollywood Pr	esbyterian Medical Cent	er	Los Angeles		Page:29 of 37
Report the final cor requirements wheth per Section 130061	her by retrofit or by r	dings on the eplacement	hospital campus showin and the type of service t	g how e nat will t	ach building will comply w be provided in each gener	ith the SPC al acute car	c-5/NPC-4 or 5 re hospital building
Building Number:	BLD-01981	Building Nar	ne: Kitchen Addition				
Configuration:	Remove from GAC	service by	1/1/2020				
Type of Service	Provided						
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Int	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	ediatric/Adol cent		Clinical Lab		recovery		
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	ostetrical nte/Postprtum		Pharmaceutical		Emergency		Central Plant
	termediate are		Dietetic		Nuclear Medicine		Support
Sk	killed Nursing		Administration			_	Services

	2018 11722 H	Hollywood P	resbyterian Medical Ce	enter	Los Angeles		Page:30 of 37
	hether by retrofit or by i				ach building will comply be provided in each gen		
uilding Numbe	er: BLD-01982	Building Na	me: Emergency Add	lition			
Configuration:	Remove from GAC	C service by	1/1/2020				
Type of Serv	vice Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant
	Intermediate		Dietetic		Emergency	<u></u>	Contract fairt
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services

Report Year: 20	018 11722 F	lollywood Pr	esbyterian Medical Cent	er	Los Angeles		Page:31 of 37		
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-01983 Building Name: Linear Accelerator Addition									
Configuration:	Configuration: Remove from GAC service by 1/1/2020								
Type of Service	Type of Service Provided								
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
Int	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis		
	ediatric/Adol cent		Clinical Lab		Recovery				
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	ostetrical nte/Postprtum		Pharmaceutical		Emergency		Central Plant		
	termediate are		Dietetic		Nuclear Medicine		Support		
Sk	xilled Nursing		Administration			_	Services		

Report Y	ear: 2018	11722	Hollywood Presb	yterian Med	dical Center		Los Angeles		Page:32 of 37
Includ 4D an	Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)								
Buildi	Building Number: BLD-01980 Building Name: Patient Tower								
Туре	Type of Service Provided								
X	Nursing	Inpatient Beds	156		Surgical		X Obstetrical Cesarean/Deliv		ehabilitation erapy
X	IntensiveCare	Inpatient Beds	43		Anesthesia				
X	Pediatric/Adol escent	Inpatient Beds	11	X	Clinical Lab		X Obstetrical Recovery	Re	enal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging		X Newborn/ WellBaby		utpatient ırgery
X	Obstetrical Ante/Postprtum	Inpatient Beds	34	X	Pharmaceutical		Emergency	☐ Ce	entral Plant
	Intermediate Care	Inpatient Beds	0	X	Dietetic		Nuclear Medicine		ipport ervices
	Skilled Nursing	Inpatient Beds	0		Administration				
	Total Beds this Building		244						

port Year:	2018	11722	Hollywood Presby	terian Me	dical Center		Los Angeles		Page:33 of 37
Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)									
Building Nur	mber: BLE	D-01982	Building Na	me: En	nergency Addition				
Type of Se	rvice Prov	ided							
Nursi	ng	Inpatient Beds	0		Surgical	[	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Intens	siveCare	Inpatient Beds	0		Anesthesia				
Pedia escen	tric/Adol it	Inpatient Beds	0		Clinical Lab	[	Obstetrical Recovery	F	Renal Dialysis
Psych Nursir	niatric ng	Inpatient Beds	0		Radiological/ Imaging	[	Newborn/ WellBaby		Outpatient Surgery
Obste	etrical Postprtum	Inpatient Beds	0		Pharmaceutical	[	X Emergency		Central Plant
Interm Care	nediate	Inpatient Beds	0		Dietetic	[	Nuclear Medicine		Support Services
Skilled	d Nursing	Inpatient Beds	0		Administration				
Total Buildi	Beds this ng		0						

port Year: 2018	11722	Hollywood Presby	terian Medical Center	Los Angeles	Page:34 of 37			
Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)								
Building Number: BL	D-01983	Building Na	me: Linear Accelerator Add	lition				
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 Care	Inpatient Beds	0	Dietetic	X Nuclear Medicine	Support Services			
Skilled Nursing	Inpatient Beds	0	Administration					
Total Beds this Building		0						

Report Year:

2018

11722

Hollywood Presbyterian Medical Center

Los Angeles

Page:35 of 37

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-01980	Building Name:	Patient Tower				
Medical / Surgical (I	nclude GYN)	Acute Res	spiratory Care	Acute Psychiatric			
Inpatient 156 Bed	Inpatient Days	Inpatient Bed	0 Inpatient Days	0 Inpatient 0 Inpatient 0 Days			
Perinatal (Exclude N	Newborn / GYN)	Burn		Skilled Nursing			
Inpatient 34 Bed	Inpatient 1 Days	0708 Inpatient Bed	0 Inpatient Days	0 Inpatient 0 Inpatient 0 Days			
Pediatric		Intensive Nursery	Care Newborn	Intermediate Care			
Inpatient 11 Bed	Inpatient Days	1126 Inpatient Bed	15 Inpatient 44 Days	Inpatient 0 Inpatient 0 Days			
Intensive Care		Rehabilita Center	ntion	Int. Care / Developmentally Disabled			
Inpatient 28 Bed	Inpatient Days	6091 Inpatient Bed	0 Inpatient Days	0 Inpatient 0 Inpatient 0 Days			
<b>Coronary Care</b>		Chemical	Dependency	Total Beds this  Building Per  Building Per			
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	Unit Service 244			

Los Angeles Report Year: 2018 11722 Hollywood Presbyterian Medical Center Page:36 of 37 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) BLD-01982 **Emergency Addition Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Days Bed Days Bed Bed Perinatal (Exclude Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Bed Bed Days Bed Days **Intensive Care Newborn Pediatric Intermediate Care** Nursery Inpatient 0 Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care** Disabled Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Days Bed Days Bed ol 0

Los Angeles Report Year: 2018 11722 Hollywood Presbyterian Medical Center Page:37 of 37 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) BLD-01983 Linear Accelerator Addition **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Days Bed Days Bed Bed Perinatal (Exclude Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Bed Bed Days Bed Days **Intensive Care Newborn Pediatric Intermediate Care** Nursery Inpatient 0 Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care** Disabled Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Days Bed Days Bed ol 0