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: Facility Name:	11731 Good Samaritan Hospital							
Address: City:	1225 Wi	eles						
Hospital Owner/Lic	ensee:	Good Samaritan Hospital / 930000071						
Year of Reporting:		2018						
Contact 1 e-mail Ad	ddress:	[Confidential data left blank intentionally.]						
Contact 2 e-mail Ad	ddress:	[Confidential data left blank intentionally.]						
Contact 3 e-mail Ad	ldress::	[Confidential data left blank intentionally.]						
Name of Sub	omitter:	Angel Rodriguez						
Submission	n Date:	12/11/2018 4:38:25 PM						

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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- 01997	1927 Building	1225 Wilshire Blvd	Replace	SPC2	01/01/2020	09/01/2019
BLD- 01998	1953 Building	1225 Wilshire Blvd	Replace	SPC2	01/01/2020	09/01/2019

Report Year: 11731 Good Samaritan Hospital Los Angeles Page:3 of 32 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: 1927 Building Retrofit/Replacement BLD-01997 No Project: Facility Project CEQA Plan Approved Projected Projected Sub Completion Date Status Number Number Date Start Date Review Num Scope Date In 0 11731 1140014-19-12/17/201 07/12/2016 ACTI No 00 4 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-01998 1953 Building Retrofit/Replacement Project: CEQA Facility Project Sub Plan Approved Projected Projected Completion Date Status Date Start Date Review Number Number Num Scope Date In 11731 1140014-19-0 12/17/201 07/12/2016 ACTI No 00 4

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Provide the number of	Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)							
Building Number: BLD-01997 Building Name: 1927 Building								
Type of Service Prov	<u>rided</u>							
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery				
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby				
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency	/			
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine				
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical X Dietetic	Rehabilitati Therapy	ion			
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialy	ysis			
Skilled Nursing	Inpatient	0 Inpatient Days 0	X Support Services	Outpatient Surgery				
	Beds	Total Beds this Building	Obstetrical Cesarean/Deliv	Central Pla	nnt			

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Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)										
_	umber: BLD-			Building N	lame:	1953 Building				
Nursi	ng I E	npatient 3eds	0	Inpatient Days	0	Surg	ical		Obstetrical Recovery	
Intens		npatient Beds	0	Inpatient Days	s 0	Anes	thesia		Newborn/ WellBaby	
Pedia escer		npatient 3eds	0	Inpatient Day	ys 0	Clinic	cal Lab		Emergency	1
Psych	hiatric I ng E	npatient Beds	0	Inpatient Day	ys 0	Radio Imag	ological/ ing		Nuclear Medicine	
		npatient Beds	0	Inpatient Day	ys 0	Phari	maceutical		Rehabilitati Therapy	ion
Intern Care		npatient Beds	0	Inpatient Day	ys 0		nistration		Renal Dialy	/sis
Skille		npatient 3eds	0	Inpatient Day	ys 0	X Supp Servi	ces	Ш	Outpatient Surgery	
	-	5005	Total Be Building		0		etrical rean/Deliv		Central Pla	nt

Report Year: 2018 11731 Good Samaritan Hospital Los Angeles Page:6 of 32 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) BLD-01997 **Building Number: Building Name:** 1927 Building 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 0 Inpatient 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 11731 Good Samaritan Hospital Los Angeles Page:7 of 32 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) BLD-01998 1953 Building **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 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 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

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

Building Number	Building Name	Building to be Removed / Replaced / Rebuilt
BLD-01993	Main Hospital	Remain
BLD-01994	ICU / CCU Addition	Remain
BLD-01995	Mechanical Plant	Remain
BLD-01996	MRI Addition	Remain
BLD-01997	1927 Building	Replace
BLD-01998	1953 Building	Replace

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

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The proje replaced of The plant replaced of	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-01997 1927 Building Removal Date: 09/01/2019								
Planned l	Jses for the building to	be remov	ved from acute care service:						
Planned	use for building:								
Inpatient s	services currently deliv	<u>ered in th</u>	e building:						
	Nursing IntensiveCare		Surgical Anesthesia		Obstetrical Cesarean/Deliv	Rehabilitatio Therapy	n		
	Pediatric/Adol escent		Clinical Lab		Obstetrical Recovery	Renal Dialys	sis		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery			
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	Central Plan	t		
	Intermediate Care	X	Dietetic		Nuclear Medicine	X Support Services			
	Skilled Nursing		Administration			23000			

Report Ye	ear: 2018	11731	Good Samaritan Hospital		L	os Angeles		Page:11 of 32	
The project replaced of The plann replaced of the plann replaced of the the plann replaced of the project of the project of the project of the project of the plann replaced of	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 eplaced 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 eplaced 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-01998 1953 Building Removal Date: 09/01/2019								
Planned L	Jses for the build	ing to be rer	noved from acute care service:						
Planned	use for building:								
Inpatient s	services currently	delivered ir	_						
	Nursing		Surgical		Obstetrical Cesarean/Deliv	/	Rehabilitation Therapy	1	
	IntensiveCare Pediatric/Adol escent		Anesthesia Clinical Lab		Obstetrical Recovery		Renal Dialysi	s	
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant		
	Intermediate Care		Dietetic		Nuclear Medicine		X Support Services		
	Skilled Nursing	X	Administration				Convices		

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

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

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Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Rebuild" or "Rebuild".		responding
Building Number: BLD-01997 Building Name: 1927 Building Will general acute care services and beds will be relocated to a new, Existing or retrofitted	building?	
Dietetic N/A		
Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Resolution of "Resolution of "Rebuild" or "Resolution of "Resolution o		responding
Building Number: BLD-01997 Building Name: 1927 Building		
Will general acute care services and beds will be relocated to a new, Existing or retrofitted Support Services N/A	building?	
Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Rebuild" or "Rebuild".		responding
Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted Administration N/A	building?	
	-	

Report Year: 2018	11731	Good Samaritan Hospit	al	Los Angeles		Page:15 of 32		
Report 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)								
Building Number: BLD-01998 Building Name: 1953 Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?								
	N/A		5]				

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No data reporte	d for Section	n 130061(c)	(3).		

ding Number:	BLD-01997 Buildin	ng Name: 19	927 Building				
Type of Service	e Provided		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	Nursing		Anesthesia				
	IntensiveCare		Clinical Lab	Ш	Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		Radiological/		Newborn/ WellBaby		Outpatient Surgery
	Psychiatric Nursing		Imaging		·		Control Blood
	Obstetrical		Pharmaceutical		Emergency		Central Plant
	Ante/Postprtum	X	Dietetic		Nuclear Medicine	X	Support Services
	Intermediate Care		Administration				
	Skilled Nursing						

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Report any gene per Section 1300		ital inpatient service th	nat is provided in any	y general a	acute care hospital	building t	hat is rated SPC-1	
Building Number	: BLD-01998	Building Name: 19	953 Building					
Type of Serv	rice Provided							
			Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
	Nursing		Anesthesia				Devel Districts	
	IntensiveCare				Obstetrical Recovery		Renal Dialysis	
	Pediatric/Adol escent		Clinical Lab		Newborn/		Outpatient Surgery	
Г	Psychiatric		Radiological/ Imaging		WellBaby			
_	□ Nursing		Pharmaceutical		Emergency		Central Plant	
	Obstetrical Ante/Postprtun	m \square	Dietetic		Nuclear Medicine	X	Support Services	
	Intermediate Care	X	Administration					
	Skilled Nursing	,						

uirements when Section 13006	ther by retrofit or by re	eplacement	and the type of service	that will t	ach building will comply be provided in each gene	eral acute c	are hospital building
lding Number:	BLD-01993	Building Nar	me: Main Hospital				
onfiguration:	Retrofit Conforming	building to	NPC 4 or NPC 5				
Type of Service	e Provided						
X N	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X In	itensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Receivery		
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	bstetrical		Pharmaceutical	_			
Al	nte/Postprtum				Emergency		Central Plant
	itermediate are		Dietetic		Nuclear Medicine		Support
S	killed Nursing		Administration	Ш			Services

Report Year: 2	2018 11731	Good Samari	tan Hospital		Los Angeles	Page:20 of 32
	ther by retrofit or by				ach building will comply woe provided in each gener	
Building Number:	BLD-01994	Building Na	me: ICU / CCU Additio	n		
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5			
Type of Servic	e Provided					
X N	lursing		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X In	ntensiveCare		Anesthesia		Obstetrical Recovery	Renal Dialysis
	rediatric/Adol scent		Clinical Lab		recovery	
	sychiatric lursing		Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
	Obstetrical .nte/Postprtum		Pharmaceutical		Emergency	Central Plant
	ntermediate care		Dietetic		Nuclear Medicine	Support
s	killed Nursing		Administration			Services

Report Year: 20	18 11731	Good Samari	tan Hospital	Los Angeles		Page:21 of 32
	ner by retrofit or by			ach building will comply woe provided in each gener		
Building Number:	BLD-01995	Building Na	me: Mechanical Plant			
Configuration:	Retrofit Conformir	g building to	NPC 4 or NPC 5			
Type of Service	Provided					
Nu	rsing		Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Inte	ensiveCare		Anesthesia	Obstetrical Recovery		Renal Dialysis
	diatric/Adol cent		Clinical Lab	recovery		
	ychiatric rsing		Radiological/ Imaging	Newborn/ WellBaby		Outpatient Surgery
	stetrical te/Postprtum		Pharmaceutical	Emergency		Central Plant
Inte Cal	ermediate re		Dietetic	Nuclear Medicine	П	Support
Ski	illed Nursing		Administration		_	Services

Report Year: 20	18 11731	Good Samari	tan Hospital	Los Angeles	Page:22 of 32
	ner by retrofit or by			ach building will comply voe provided in each gene	
Building Number:	BLD-01996	Building Nar	me: MRI Addition		
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5		
Type of Service	Provided				
Nu	rsing		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
Inte	ensiveCare		Anesthesia	Obstetrical Recovery	Renal Dialysis
	diatric/Adol cent		Clinical Lab	Recovery	
	ychiatric rsing		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
	stetrical te/Postprtum		Pharmaceutical	Emergency	Central Plant
Inte	ermediate re		Dietetic	Nuclear Medicine	Support
Ski	illed Nursing		Administration		 Services

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	whether by retrofit or by			ach building will comply be provided in each gen		
Building Numb	per: BLD-01997	Building Na	me: 1927 Building			
Configuration	n: Remove from GA	C service by	1/1/2020			
Type of Se	rvice Provided					
	Nursing		Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia	Obstetrical Recovery	F	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab	Recovery		
	Psychiatric Nursing		Radiological/ Imaging	Newborn/ WellBaby		Outpatient Gurgery
	Obstetrical		Pharmaceutical			
	Ante/Postprtum	l _		Emergency		Central Plant
	Intermediate Care		Dietetic	Nuclear Medicine		Support
	Skilled Nursing		Administration			Services

eport Year:	2018 11731	Good Samar	tan Hospital	Los Angeles	Page:24 of 32
	ether by retrofit or by			ach building will comply be provided in each gen	
suilding Number	": BLD-01998	Building Na	me: 1953 Building		
Configuration:	Remove from GAG	C service by	1/1/2020		
Type of Servi	ice 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		
•	Ante/Fostpitum		5	Emergency	Central Plant
	Intermediate Care		Dietetic	Nuclear Medicine	Support
	Skilled Nursing		Administration		Services

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Include 4D and	information on t SPC-5 per Sect	he number o ion 130061(e	f inpatient beds	by type of S	ervice provided by t	ouildir	ngs that are classified a	s SPC-2	2, SPC-3, SPC-4, SPC-
Building	Number: BLD	-01993	Building N	ame: Ma	in Hospital				
Type o	of Service Provi	ided							
X N	lursing	Inpatient Beds	258	X	Surgical	[Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X In	ntensiveCare	Inpatient Beds	33	X	Anesthesia				
	ediatric/Adol scent	Inpatient Beds	0	X	Clinical Lab		X Obstetrical Recovery	X	Renal Dialysis
	Psychiatric Iursing	Inpatient Beds	0	X	Radiological/ Imaging	[X Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Inte/Postprtum	Inpatient Beds	31	X	Pharmaceutical		X Emergency		Central Plant
	ntermediate Care	Inpatient Beds	0	X	Dietetic	[X Nuclear Medicine	X	Support Services
×	Skilled Nursing	Inpatient Beds	28	X	Administration				
	otal Beds this Building		350						

oort Year:	2018	11731	Good Samaritan	Hospital			Los Angeles		Page:26 of 32
Include inform 4D and SPC				by type of Se	rvice provided by I	buildi	ngs that are classified a	s SPC-2	, SPC-3, SPC-4, SPC-
Building Nun	nber: BLD	-01994	Building Na	ame: ICU	/ CCU Addition				
Type of Se	rvice Provi	<u>ded</u>							
Nursin	ng	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X Intens	iveCare	Inpatient Beds	58		Anesthesia				
Pediat escen	tric/Adol t	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery	X	Renal Dialysis
Psych Nursir	iatric ng	Inpatient Beds	0		Radiological/ maging		Newborn/ WellBaby		Outpatient Surgery
Obste Ante/F		Inpatient Beds	0	<u></u> '	Pharmaceutical		Emergency		Central Plant
Interm Care	nediate	Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services
Skilled	d Nursing	Inpatient Beds	0	/	Administration				
Total I Buildir	Beds this ng		58						

oort Year: 2018	11731	Good Samaritan F	lospital	Los Angeles	Page:27 of 32
Include information or 4D and SPC-5 per Se			y type of Service provided by	buildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	_D-01995	Building Na	me: Mechanical Plant		
Type of Service Pro	vided				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia	_	_
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	X Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

eport Year: 2018	11731	Good Samaritan H	ospital	Los Angeles	Page:28 of 32
Include information on 4D and SPC-5 per Sec			type of Service provided by	buildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-01996	Building Nar	me: MRI Addition		
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	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

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Include information on the number of inpatient beds by type of 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-01993 Buildin		ng Name: Main Hospital							
Medical / Surgical (Include GYN)			te Respiratory	Care	Acute Psychiatric					
Inpatient 235 Bed	Inpatient 3 Days	8117 Inpa Bed	atient 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days				
Perinatal (Exclude Newborn / GYN)			n		Skilled Nursing					
Inpatient 31 Bed	Inpatient Days	6663 Inpa Bed	atient 0	Inpatient 0 Days	Inpatient 28 Bed	Inpatient 0 Days				
Pediatric			nsive Care Nev sery	wborn	Intermediate Care					
Inpatient 0 Bed	Inpatient Days	0 Inpa Bed	atient 23	Inpatient 4523 Days	Inpatient 0 Bed	Inpatient 0 Days				
Intensive Care		Reh Cen	abilitation ter		Int. Care / Developn Disabled	nentally				
Inpatient 0 Bed	Inpatient Days	0 Inpa Bed	atient 23	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days				
Coronary Care			mical Depende	ency	Total Beds this Building Per	Total Beds this Building Per				
Inpatient 10 Bed	Inpatient Days	0 Inpa Bed	atient 0	Inpatient 0 Days	Unit 350	Service 350				

Los Angeles Report Year: 2018 11731 Good Samaritan Hospital Page:30 of 32 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-01994 ICU / CCU 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 9295 Inpatient 58 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 Bed Days Bed Days 58 58

Los Angeles Report Year: 2018 11731 Good Samaritan Hospital Page:31 of 32 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-01995 Mechanical Plant **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 11731 Good Samaritan Hospital Page:32 of 32 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-01996 MRI 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