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Office of Statewide Health Planning and Development
Facilities Development Division

Senate Bill 499 (SB 499) Hospital Report

As submitted to California's Office of Statewide Health Planning and Development in accordance with Senate Bill 499 (SB 499) requirement for all general acute care hospitals with Structural Performance Category 1 (SPC-1) buildings to report annually with seismic safety compliance status, beds and services.

Provide the Hospital Owner and Year of Report per Section 130061(e)

Facility Number:	11858	
Facility Name:	Methodist Hospital of Southern California]
Address:	300 W. Huntington Dr.]
City:	Arcadia]
Hospital Owner/Lice	ensee: METHODIST HOSPITAL OF SOUTHERN CALIFORNIA / 930000103]
Year of Rep	porting: 2018	
Contact 1 e-mail Ad	dress: [Confidential data left blank intentionally.]]
Contact 2 e-mail Ad	Idress: [Confidential data left blank intentionally.]]
Contact 3 e-mail Add	dress:: [Confidential data left blank intentionally.]]
Name of Sub	mitter: JOE LABRIE]
Submission	Date: 12/11/2018 9:27:32 AM]

Report \	/ear: 2018 1	Methodist Hospital of Souther	n California	Arcadia		Page:2 of 54	
For buildings For buildings which are planned for rebuild, retrofit or replacement this report shall identify; Whether the hospital owner intends to rebuild, retrofit or replace the building to SPC2, SPC3, SPC4, SPC4D or SPC5 per 130061(c)(1)(A). The deadline, as described in Section 130060 or 130061.5, for rebuild, retrofit or replacement of the building that the hospital owner intends to meet, and the applicable extension for which the hospital owner has been approved per Section 130061(c)(1)(B)							
Bldg. No.	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date	
3LD- 00359	East Wing	300 W. Huntington Dr.	Retrofit	SPC-4D	01/01/2020	01/01/2020	
3LD-)0362	West Wing	300 W. Huntington Dr.	Retrofit	SPC-4D	01/01/2020	01/01/2020	

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For each building which is planned for rebuild, retrofit or replacement, provide the project numbers, per Section $130061(c)(1)(C)$. The projected construction start date or dates and projected Completion date or dates per Section $130061(c)(1)(D)$ and the most recent project status and approvals per Section $130061(c)(1)(E)$.							
Building No: BLD-00359	East Wing		trofit/Replacement oject:	No-Planned			
Facility Project Sub Number Number Num So	cope	Plan Ap Date In Da	proved Projected te Start Date	Projected Completion Date St	CEQA atus Review		
11858 S142762-19 0 -00		11/26/201 10/8/2 4 12:00			OPEN No		
	ned for rebuild, retrofit or replacement, p e or dates and projected Completion date on 130061(c)(1)(E). West Wing	e or dates per Section					
Facility Project Sub Number Number Num So	cope	Plan Ap Date In Da		Projected Completion Date St	CEQA atus Review		
11858 S142763-19 0 -00		11/26/201 10/8/2 4 12:00			OPEN No		

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Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)								
Building Number: BLD-00359 Building Name: East	Building Number: BLD-00359 Building Name: East Wing							
Type of Service Provided								
Nursing Inpatient 0 Inpatient 0 Beds Days	Surgical Obstetr Recover							
IntensiveCare Inpatient 0 Inpatient Days 0 Beds	Anesthesia Newbol WellBa							
Pediatric/Adol Inpatient 0 Inpatient Days 0 escent Beds	Clinical Lab	ency						
Psychiatric Inpatient 0 Inpatient Days 0 Nursing Beds	Radiological/ Nuclear Imaging Pharmaceutical							
Obstetrical Inpatient 0 Inpatient Days 0 Ante/Postprtum Beds	Dietetic Rehabi							
Intermediate Inpatient 0 Inpatient Days 0 Care Beds	Administration Renal I							
Skilled Nursing Inpatient 0 Inpatient Days 0 Beds	Support Outpatie Services Surgery	ent /						
Total Beds this 0 Building	Cesarean/Deliv	Plant						

Report Year: 2018	11858	Methodist Hospital of Southern California	a Arcadia	Page:5 of 54
Provide the number of	f inpatient be	eds and patient days per type of service per	r building per Section 13006	i1(c)(1)(F)
Building Number: BL	D-00362	Building Name: We	st Wing	
Type of Service Prov	<u>/ided</u>			
X Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0		Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services	U Outpatient Surgery
		Total Beds this 0 Building	Cesarean/Deliv	Central Plant
OSHPD FDD SB499 Repo	rt	Data Last Update: 12/11/2018 Su	bmission Date: 12/11/2018	Printed: 12/13/2018 6:30 AM

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Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)									
Building Number: BLD-00359 Bui	Building Number: BLD-00359 Building Name: East Wing								
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric							
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days							
Perinatal (excluse Newborn / GYN)	Burn	Skilled Nursing							
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days							
Pediatric	intensive Care Newborn Nursery	Intermediate Card							
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days							
Intensive Care	Rehabilitation Center	Int. Care / development Disabled							
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days							
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per Unit Service							
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	0 0							
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Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)								
Building Number: BLD-00362 Building Name: West Wing								
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	ent 0					
Perinatal (excluse Newborn / GYN)	Burn	Skilled Nursing						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	ent 0					
Pediatric	intensive Care Newborn Nursery	Intermediate Card						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	ent 0					
Intensive Care	Rehabilitation Center	Int. Care / development Disabled						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	nt 0					
Coronary Care	Chemical Dependency		Beds this ng Per ce					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	0	0					

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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-00358	Main Hospital	Remain
BLD-00359	East Wing	Retrofit
BLD-00360	Utility Building / Central Plant	Remain
BLD-00362	West Wing	Retrofit
BLD-00365	Hoefflin Wing	Remain
BLD-00366	Surgical Wing	Remain
BLD-00367	Patient Tower	Remain
BLD-03711	Electrical Equipment Building	Remain
BLD-05461	North Tower	Remain
BLD-05514	Tower Lobby	Remain
BLD-05634	Generator Building	Remain
BLD-05635	Switchgear Building	Remain
BLD-05636	Switchgear Shed	Remain
BLD-05848	Berger Tower Patient Canopy	Remain

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List ALL proposed new buildings to be constructed at this or another site.							
Building Number	Building Name		New Site				
N_1	North Tower						
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lo data reported for Section 130061 (c)(2)(A), (B), or (C)							

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

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No data reported	d for Sectio	n 130061(c))(2)(D).		

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No data reporte	d for wheth	er the gene	eral acute care	services and bec	ds will be relocate uilding Resolutio	ed to a new, e	xisting or retrof	itted building a	ind any	
									(UUT(U)(Z)(L).	

No data reported for Section 130061(c)(3).	

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Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per Section 130061(c)(4)											
Building Number: BLD-00359 Building Name: East Wing											
Type of Service F	Provided										
		Surgical		Dbstetrical Cesarean/Deliv		Rehabilitation Therapy					
	Nursing	Anesthesia	— .		_	Ronal Dialysia					
	IntensiveCare	Clinical Lab		Obstetrical Recovery		Renal Dialysis					
	Pediatric/Adol escent	Radiological/		lewborn/ VellBaby		Outpatient Surgery					
	Psychiatric Nursing	Imaging Pharmaceutical		mergency		Central Plant					
	Obstetrical Ante/Postprtum		Ш П N	luclear ledicine		Support Services					
	Intermediate Care	Administration									
	Skilled Nursing										
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Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per Section 130061(c)(4)											
Building Number: BLD-00362 Building Name: West Wing											
Type of Service	e Provided										
		Surgical	Obstetrical Cesarean/Deliv	Rehabi Therap							
X	Nursing	Anesthesia	_		Dishusia						
	IntensiveCare		Obstetrical Recovery	Renal [Jiaiysis						
	Pediatric/Adol escent	Clinical Lab	Newborn/ WellBaby	Outpati Surgery							
	Psychiatric Nursing	Radiological/ Imaging		_							
	Obstateigal	Pharmaceutical	Emergency	Central	Plant						
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	Suppor Service							
	Intermediate Care	Administration									
	Skilled Nursing										
OSHPD FDD SB499 Re	eport Data Las	t Update: 12/11/2018 Sub	mission Date: 12/11/2018	Printed: 12/13/	 /2018 6:30 AM						

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)											
Building Number: BLD-00358 Building Name: Main Hospital Configuration: Retrofit Non-Conforming building to SPC 4D or SPC 5 and NPC 4 or NPC 5											
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 Care	Dietetic	Nuclear Medicine	Support								
Skilled Nursing	Administration		Services								
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)											
Building Number: BLD-00359 Building Name: East Wing											
Configuration: Retrofit Non-Conforming building to SPC 4D or SPC 5 and NPC 4 or NPC 5											
Type of Service Provided											
Nursing	Surgical		etrical arean/Deliv		Rehabilitation Therapy						
IntensiveCare	Anesthesia	Obst Reco	etrical	F	Renal Dialysis						
Pediatric/Adol escent	Clinical Lab	Nett	NGLY								
Psychiatric Nursing	Radiological/ Imaging	News Well			Dutpatient Surgery						
Obstetrical Ante/Postprtum	Pharmaceutical	Eme	rgency		Central Plant						
Intermediate Care	Dietetic		ear Medicine		Support						
Skilled Nursing	Administration				Services						
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)											
Building Number: BLD-00360 Building Name: Utility Building / Central Plant											
Configuration: Retrofit Conforming building to NPC 4 or NPC 5											
Type of Service Provided											
Nursing	Surgical		etrical rean/Deliv		abilitation rapy						
IntensiveCare	Anesthesia	Obste Reco	etrical	Rer	al Dialysis						
Pediatric/Adol escent	Clinical Lab	1000	voly								
Psychiatric Nursing	Radiological/ Imaging	Newb WellE		Out Sur	patient gery						
Obstetrical Ante/Postprtum	Pharmaceutical	Emer	gency	Cen	tral Plant						
Intermediate Care	Dietetic		ear Medicine		oport						
Skilled Nursing	Administration				vices						
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number: BLD-00362 Building Name: West Wing										
Configuration: Retrofit Non-Conforming building to SPC 4D or SPC 5 and NPC 4 or NPC 5										
Type of Service Provided										
Nursing	Surgical		etrical rean/Deliv		Rehabilitation Therapy					
IntensiveCare	Anesthesia	Obste Reco	etrical		Renal Dialysis					
Pediatric/Adol escent	Clinical Lab	Reco	very							
Psychiatric Nursing	Radiological/ Imaging	Newb WellE			Outpatient Surgery					
Obstetrical Ante/Postprtum	Pharmaceutical	Emer	gency		Central Plant					
	Dietetic									
Care Skilled Nursing	Administration		ear Medicine		Support Services					
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)											
Building Number: BLD-00365 Building Name: Hoefflin Wing											
Configuration: Retrofit Conforming building to NPC 4 or NPC 5											
Type of Service	Provided										
Nu	ırsing		Surgical		Obstetrical Cesarean/De	əliv		Rehabilitation Therapy			
	ensiveCare		Anesthesia		Obstetrical Recovery			Renal Dialysis			
	diatric/Adol cent		Clinical Lab								
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby			Outpatient Surgery			
	ostetrical te/Postprtum		Pharmaceutical		Emergency			Central Plant			
Inte Ca	ermediate		Dietetic		Nuclear Med	Vicin c		Queset			
	illed Nursing		Administration			licine		Support Services			
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)											
Building Number: BLD-00366 Building Name: Surgical Wing											
Configuration: Retrofit Conforming building to NPC 4 or NPC 5											
Type of Service	Provided										
Nu	ırsing		Surgical		Obstetrical Cesarean/E	Deliv		Rehabilitation Therapy			
	ensiveCare		Anesthesia		Obstetrical Recovery			Renal Dialysis			
	diatric/Adol cent		Clinical Lab								
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby			Outpatient Surgery			
	ostetrical te/Postprtum		Pharmaceutical		Emergency			Central Plant			
Inte Ca	ermediate Ire		Dietetic		Nuclear Me	dicipo		Support			
	illed Nursing		Administration		Nuclear me			Services			
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)											
Building Number:	BLD-00367	Building Na	me: Patient Tower								
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				
	ostetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant				
Inte Ca	ermediate re		Dietetic		Nuclear Medicine		Surrent				
	illed Nursing		Administration				Support Services				
OSHPD FDD SB499 R	Report Da	ta Last Updat	e: 12/11/2018	Submiss	ion Date: 12/11/2018	Printed:	12/13/2018 6:30 AM				

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number:	BLD-03711	Building Na	me: Electrical Equipme	ent Buildi	ng					
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5					L		
Type of Service	e Provided									
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Int	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	ediatric/Adol cent		Clinical Lab							
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	ostetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant			
Int Ca	ermediate are		Dietetic		Nuclear Medicir		Support			
Sk	illed Nursing		Administration				Services			
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)											
Building Number:	BLD-05461	Building Na	me: North Tower								
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5								
Type of Service	Provided										
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis				
	diatric/Adol cent		Clinical Lab		Receivery						
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
	ostetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant				
Inte Ca	ermediate Ire		Dietetic		Nuclear Medicine		Support				
	illed Nursing		Administration				Services				
OSHPD FDD SB499 R	Report Da	ita Last Updat	e: 12/11/2018	Submiss	ion Date: 12/11/2018	Printed:	12/13/2018 6:30 AM				

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)											
Building Number:	BLD-05514	Building Na	me: Tower Lobby								
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 Ca	ermediate re		Dietetic								
	illed Nursing		Administration		Nuclear Medicine		Support Services				
OSHPD FDD SB499 R	Report Da	ata Last Updat	e: 12/11/2018	Submiss	ion Date: 12/11/2018	Printed:	12/13/2018 6:30 AM				

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)											
Building Number:	BLD-05634	Building Na	me: Generator Building]							
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5								
Type of Service	Provided										
Nu	ırsing		Surgical		Obsteti Cesare	rical ean/Deliv		Rehabilitation Therapy			
	ensiveCare		Anesthesia		Obsteti Recove			Renal Dialysis			
	ediatric/Adol cent		Clinical Lab			,					
	ychiatric Irsing		Radiological/ Imaging		Newbo WellBa			Outpatient Surgery			
	ostetrical ite/Postprtum		Pharmaceutical		Emerge	ency		Central Plant			
Inte Ca	ermediate are		Dietetic		Nuclea	r Medicine		Support			
Sk	illed Nursing		Administration		, ruoroa			Services			
OSHPD FDD SB499 R	Report Da	ta Last Update	e: 12/11/2018	Submissi	ion Date:	12/11/2018	Printed:	12/13/2018 6:30 AM			

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)											
Building Number:	BLD-05635	Building Na	me: Switchgear Buildin	ıg							
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5								
Type of Service	Provided										
Nu	ırsing		Surgical		Obstetri Cesarea			Rehabilitation Therapy			
Int	ensiveCare		Anesthesia		Obstetri Recove			Renal Dialysis			
	diatric/Adol cent		Clinical Lab			· ,					
	ychiatric Irsing		Radiological/ Imaging		Newbor WellBat			Outpatient Surgery			
	ostetrical te/Postprtum		Pharmaceutical		Emerge	ency		Central Plant			
Int Ca	ermediate ire		Dietetic		Nuclear	Medicine		Support			
Sk	illed Nursing		Administration					Services			
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)											
Building Number:	BLD-05636	Building Na	me: Switchgear Shed]			
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5]			
Type of Service	e Provided										
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv	,	Rehabilitation Therapy				
Int	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis				
	ediatric/Adol cent		Clinical Lab		Receivery						
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
	ostetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant				
Int Ca	ermediate are		Dietetic		Nuclear Medici		Support				
Sk	illed Nursing		Administration				Services				
OSHPD FDD SB499 F	Report Da	ta Last Updat	e: 12/11/2018	Submiss	on Date: 12/11/2	2018 Printed	12/13/2018 6:30				

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)											
Building Number: BLD-05848 Building Name: Berger Tower Patient Canopy											
Configuration: Retrofit Conforming building to NPC 4 or NPC 5											
Type of Service Provided											
Nursing	Surgical		etrical rean/Deliv		Rehabilitation Therapy						
IntensiveCare	Anesthesia	Obste Reco	etrical		Renal Dialysis						
Pediatric/Adol escent	Clinical Lab	1000	vory								
Psychiatric Nursing	Radiological/ Imaging	Newb WellE			Outpatient Surgery						
Obstetrical Ante/Postprtum	Pharmaceutical	Emer	gency		Central Plant						
Intermediate Care	Dietetic										
Skilled Nursing	Administration		ear Medicine		Support Services						
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Include information on 4D and SPC-5 per Sec			by type of S	Service provided by bu	ildings that are classified a	IS SPC-2, SI	PC-3, SPC-4, SPC-
Building Number: BLI	D-00358	Building N	lame: Ma	in Hospital]
Type of Service Prov	<u>vided</u>						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		nabilitation erapy
X IntensiveCare	Inpatient Beds	9		Anesthesia			
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rei	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		patient gery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Cer	ntral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Sup Ser	oport vices
Skilled Nursing	Inpatient Beds	0	X	Administration			
Total Beds this Building		9					
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	Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)											
Building Number: BLI	D-00360	Building N	ame: Uti	ity Building / Central	Plant]					
Type of Service Prov	<u>vided</u>											
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy					
IntensiveCare	Inpatient Beds	0		Anesthesia								
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rei	nal Dialysis					
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		tpatient ·gery					
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	X Cer	ntral Plant					
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine		oport vices					
Skilled Nursing	Inpatient Beds	0		Administration								
Total Beds this Building		0										
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Include information on 4D and SPC-5 per Sec			by type of S	Service provided by I	buildings that are classified	as SPC-2, SI	PC-3, SPC-4, SPC-
Building Number: BLI	D-00365	Building N	Jame: Ho	efflin Wing]
Type of Service Prov	<u>/ided</u>						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		nabilitation erapy
X IntensiveCare	Inpatient Beds	20		Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0	X	Clinical Lab	Obstetrical Recovery	Rer	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby		patient gery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Cer	ntral Plant
Intermediate	Inpatient Beds	0		Dietetic	X Nuclear Medicine		oport vices
Skilled Nursing	Inpatient Beds	0	X	Administration			
Total Beds this Building		20					
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Include information on 4D and SPC-5 per Sec			by type of S	Service provided by b	uildings that are classified a	is SPC-2, S	PC-3, SPC-4, SPC-
Building Number: BL	D-00366	Building N	lame: Su	rgical Wing]
Type of Service Prov	vided						
Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
IntensiveCare	Inpatient Beds	0	X	Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		tpatient rgery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Ce	ntral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Su Se	pport rvices
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)											
Building Numb											
Type of Service Provided											
X Nursing	Inpatient Beds	108	Surgical	X Obstetrical Cesarean/Deliv	Rehabilitation Therapy						
X Intensive	eCare Inpatient Beds	17	Anesthesia								
Pediatric escent	c/Adol Inpatient Beds	0	Clinical Lab	X Obstetrical Recovery	X Renal Dialysis						
Psychiat	tric Inpatient Beds	0	Radiological/ Imaging	X Newborn/ WellBaby	Outpatient Surgery						
Obstetrio X Ante/Pos		24	Pharmaceutical	Emergency	Central Plant						
Intermed Care	diate Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services						
Skilled N X	lursing Inpatient Beds	30	X Administration								
Total Be Building		179									
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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4, AD and SPC-5 per Section 130061(e)												
Building Number: BLD-03711 Building Name: Electrical Equipment Building												
Type of Service Provided												
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy					
IntensiveCare	Inpatient Beds	0		Anesthesia								
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rei	nal Dialysis					
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		tpatient gery					
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	X Cer	ntral Plant					
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine		oport vices					
Skilled Nursing	Inpatient Beds	0		Administration								
Total Beds this Building		0										
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Include information on 4D and SPC-5 per Sec			by type of S	Service provided by I	buildings that are classified	l as SPC-2, Sl	PC-3, SPC-4, SPC-
Building Number: BLI	D-05461	Building N	Name: No	rth Tower]
Type of Service Prov	<u>vided</u>						
Nursing	Inpatient Beds	120		Surgical	Obstetrical Cesarean/Deliv		nabilitation erapy
IntensiveCare	Inpatient Beds	20		Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rei	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	X Newborn/ WellBaby		patient gery
Obstetrical Ante/Postprtum	Inpatient Beds	0	X	Pharmaceutical	X Emergency	Сег	ntral Plant
Intermediate	Inpatient Beds	0	X	Dietetic	Nuclear Medicine		oport vices
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		140					
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Include information on 4D and SPC-5 per Sec		npatient beds	by type of S	Service provided by I	buildings that are classifie	d as SPC-2, S	PC-3, SPC-4, SPC-
Building Number: BLI	D-05514	Building N	lame: To	wer Lobby]
Type of Service Prov	vided						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
IntensiveCare	Inpatient Beds	0		Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		tpatient rgery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Ce	ntral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Su Se	pport rvices
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
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Include information on 4D and SPC-5 per Sec			by type of Ser	vice provided by buil	ldings that are classified a	s SPC-2, S	PC-3, SPC-4, SPC-
Building Number: BLI	D-05634	Building N	lame: Gene	rator Building]
Type of Service Prov	<u>/ided</u>						
Nursing	Inpatient Beds	0	S	Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
IntensiveCare	Inpatient Beds	0	Α	nesthesia			
Pediatric/Adol escent	Inpatient Beds	0		linical Lab	Obstetrical Recovery	Rei	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0		adiological/ naging	Newborn/ WellBaby		tpatient gery
Obstetrical Ante/Postprtum	Inpatient Beds	0	∏ P	harmaceutical	Emergency	X Cer	ntral Plant
Intermediate	Inpatient Beds	0		ietetic	Nuclear Medicine		oport vices
Skilled Nursing	Inpatient Beds	0	A	dministration			
Total Beds this Building		0					
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Include information or 4D and SPC-5 per Se			y type of Service provided by t	puildings that are classified a	as SPC-2, SPC-3, SPC-4	, SPC-
Building Number: BL	-D-05635	Building Na	me: Switchgear Building			
Type of Service Pro	vided					
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
	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	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services	
Skilled Nursing	Inpatient Beds	0	Administration			
Total Beds this Building		0				
OSHPD FDD SB499 Report	t D	ata Last Update:	12/11/2018 Submission	Date: 12/11/2018 Pr	inted: 12/13/2018 6:30 AM	

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		the number c tion 130061(by type of S	Service provided by	buildings that are class	ified as SPC-2, S	SPC-3, SPC-4, SPC-
Building Nur	mber: BLC	D-05636	Building N	lame: Sw	itchgear Shed			
Type of Se	ervice Prov	rided						
Nursi	ng	Inpatient Beds	0		Surgical	Obstetrical Cesarean/De		ehabilitation lerapy
	siveCare	Inpatient Beds	0		Anesthesia			
Pedia escer	ntric/Adol nt	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re	enal Dialysis
Psych		Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		utpatient Irgery
Obste	etrical Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	X Ce	entral Plant
Intern Care	nediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	Su Se	ipport ervices
Skille	d Nursing	Inpatient Beds	0		Administration			
Total Buildi	Beds this ng		0					
OSHPD FDD SB	499 Report	Da	ata Last Update:	12/11/2018	3 Submissio	n Date: 12/11/2018	Printed: 12/13	/2018 6:30 AM

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Include information on 4D and SPC-5 per Sec			by type of S	Service provided by t	puildings that are classifi	ed as SPC-2, S	PC-3, SPC-4, SPC-
Building Number: BLI	D-05848	Building N	lame: Be	rger Tower Patient C	anopy]
Type of Service Prov	<u>/ided</u>						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
IntensiveCare	Inpatient Beds	0		Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		tpatient rgery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Ce	ntral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine		oport rvices
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
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Include information on the number of inpatient 4D and SPC-5 per Section 130061(e)	beds by type of unit provided by buildings that	are classified as SPC-2, SPC-3,	SPC-4, SPC-
Building Number: BLD-00358 Buil	ding Name: Main Hospital		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 9 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0
Coronary Care	Chemical Dependency		Beds this ling Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Servi	9
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	ent beds by type of unit provided by buildings that	Arcadia Page:44 of 54 t are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-00360 B	uilding Name: Utility Building / Central Pla	nt
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0
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Include information on the number of in 4D and SPC-5 per Section 130061(e)	patient beds by type of unit provided by buildings the	hat are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-00365	Building Name: Hoefflin Wing	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient Bed Days	0 Inpatient 10 Inpatient 2492 Bed Days	Inpatient 0 Inpatient 0 Bed
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
npatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 10 Inpatient 1 Bed Days	438 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per
Inpatient 0 Inpatient Bed Days	0 Inpatient 0 Inpatient 0 Bed Days	Unit Service 20 20
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Include information on the number of inpatier 4D and SPC-5 per Section 130061(e)	nt beds by type of unit provided by buildings tha	t are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-00366 Bu	uilding Name: Surgical Wing	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service
OSHPD FDD SB499 Report Data Las	t Update: 12/11/2018 Submission Date:	12/11/2018 Printed: 12/13/2018 6:30 AM

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Include information on the number of inpatient 4D and SPC-5 per Section 130061(e)	beds by type of unit provided by buildings that	t are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-00367 Buil	ding Name: Patient Tower	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 108 Inpatient 24965 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 24 Inpatient 4389 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 17 Inpatient 1115 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 30 Inpatient 6274 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 179 179
OSHPD FDD SB499 Report Data Last L	Jpdate: 12/11/2018 Submission Date:	12/11/2018 Printed: 12/13/2018 6:30 AM

uilding Number: BLD-0	03711 Buildin	g Name: Elect	rical Equipment Building		
edical / Surgical (Include	GYN)	Acute Respiratory	Care	Acute Psychiatric	
patient 0 Inp ed Da		Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatie Bed Days	ent 0
erinatal (Exclude Newbor	rn / GYN)	Burn		Skilled Nursing	
patient 0 Inp ed Da		Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatie Bed Days	ent 0
ediatric		Intensive Care New Nursery	vborn	Intermediate Care	
patient 0 Inp ed Da		Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatie Bed Days	ent 0
tensive Care		Rehabilitation Center		Int. Care / Developmental Disabled	ly
patient 0 Inp ed Da		Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatie Bed Days	ent 0
oronary Care		Chemical Depende	ncy		tal Beds this ilding Per
patient 0 Inp ed Da		Inpatient 0 Bed	Inpatient 0 Days	Unit Ser	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-05461	Building Name: North Tower		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 120 Inpatient 2773 Bed Days	Bed Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 10 Inpatient 143 Bed Days	8 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per	
Inpatient 10 Inpatient 276 Bed Days	8 Inpatient 0 Inpatient 0 Bed Days	Unit Service 140 140	
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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-05514 Building Number:	uilding Name: Tower Lobby		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0	
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Include information on the number of inpatient 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-05634 Building Number: BLD-05634	uilding Name: Generator Building		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Bed Days 0	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Coronary Care	Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0	
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Building Number: BLD-05635 Buildi	ng Name: Switchgear Building	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0

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Include information on the number of 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-05636 Bu	ilding Name: Switchgear Shed	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days 0	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days 0
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0
OSHPD FDD SB499 Report Data Last	Update: 12/11/2018 Submission Date:	: 12/11/2018 Printed: 12/13/2018 6:30 AM

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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)			
Building Number: BLD-05848 Building Number: BLD-05848	Berger Tower Patient Canop	ργ	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Bed Days 0	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Coronary Care	Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0	
OSHPD FDD SB499 Report Data Las	t Update: 12/11/2018 Submission Date:	12/11/2018 Printed: 12/13/2018 6:30 AM	