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

Facility Number:	10013	
Facility Name:	Enloe Medical Center - Esplanade Campus	
Address:	1531 Esplanade	
City:	Chico	
		_
Hospital Owner/Lice	censee: Mike Wiltermood	
Year of Rep	porting: 2011	
Contact 1 e-mail Ac	ddress:	
Contact 2 e-mail Ac	ddress:	
Contact 3 e-mail Ad	ldress::	
Name of Sub	bmitter: William Seguine	
Submission	n Date: 1/29/2012 3:00:00 PM	

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For buildings which are planned for retrofit or replacement the report shall identify: Whether the hospital owner intends to retrofit or replace the building to SPC 2 or SPC 5 per section 130061(c)(1)(A). The deadline, as described in Section 130060 or 130061.5, for retrofit or replacement of the bulding 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.	<b>Building Name</b>	Alternate Building Address	Building Resolution	Final SPC Rating If Required	g Extension Date	Anticipated Completion Date
01	Original Hospital	1531 Esplanade	Replace	SPC5	01/01/2013	06/01/2012
05	Surgery Wing	1531 Esplanade	Retrofit	SPC2	01/01/2013	06/01/2012
06	Corridor No. 1	1531 Esplanade	Replace	SPC5	01/01/2013	06/01/2012
08	Pharmacy	1531 Esplanade	Replace	SPC5	01/01/2013	06/01/2012
09	Trauma	1531 Esplanade	Replace	SPC5	01/01/2013	06/01/2012

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For each building which is planned for retrofitting 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: 01	Original Hospital	Retrofit/Replacement Yes-Submitted Project:
Facility Project Sub Number Number Num	Scope	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
10013 HS041907	0 FOUNDATIONS, SPREAD FOOTINGS & DRILLED PIERS/RE HS042981-04	08/16/2004 08/31/2006 09/19/2006 06/01/2012 CLSD No
10013 HS042981	0 SITEWORK, UTIL, ARCH, PRIMARY STRUCTURE,MECH & PLUMBING/RE HS041907-04	12/17/2004 02/20/2007 03/06/2007 06/01/2012 OPEN No
Building No: 05	Surgery Wing	Retrofit/Replacement Yes-Submitted Project:
Facility Project Sub Number Number Num	Scope	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
10013 HS052693	0 SEISMIC RETROFIT OF EXISTING SURGERY WING STRUCTURE FROM SPC -1 TO SPC-2	11/15/2005 04/01/2008 11/19/2008 06/01/2012 OPEN No
Building No: 08	Pharmacy	Retrofit/Replacement Yes-Submitted Project:
Facility Project Sub Number Number Num	Scope	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
10013 HS041907	0 FOUNDATIONS, SPREAD FOOTINGS & DRILLED PIERS/RE HS042981-04	08/16/2004 08/31/2006 09/19/2006 06/01/2012 CLSD No
10013 HS042981	0 SITEWORK, UTIL, ARCH, PRIMARY STRUCTURE, MECH & PLUMBING/RE HS041907-04	12/17/2004 02/20/2007 03/06/2007 06/01/2012 OPEN No

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Building No: 09 Trauma Retrofit/Replacement Project:					Submitte	d		
Facility Project Number Number	Sub Num	Scope	Date Plan Ap in D	oproved Property	roj. Start Pr Date	oj. Completed Date	Status	CEQA Review
10013 HS04190	7 0	FOUNDATIONS, SPREAD FOOTINGS & DRILLED PIERS/RE HS042981-04	08/16/2004 0	08/31/2006	09/19/2006	06/01/2012	CLSD	No
10013 HS04298	1 0	SITEWORK, UTIL, ARCH, PRIMARY STRUCTURE,MECH & PLUMBING/RE HS041907-04	12/17/2004 0	)2/20/2007	03/06/2007	06/01/2012	OPEN	No

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

Building Number: 01	Buildi	ing Name: Original Hospital					
Type of Service Provided							
X Nursing	Inpatient Beds	42 Inpatient 13159 Days	Surgical	X Obstetrical Recovery			
X IntensiveCare	Inpatient Beds	4 Inpatient Days 103	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			
X Obstetrical Ante/Postprtum	Inpatient Beds	18 Inpatient Days 3289	Pharmaceutical Dietetic	Rehabilitation Therapy			
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis			
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services  Obstetrical	Outpatient Surgery			
		Total Beds this Building 64	Cesarean/Deliv	Central Plant			

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

Building Number: 05	Buildi	ng Name: Surgery Wing		
Type of Service Prov	<u>rided</u>			
Nursing	Inpatient Beds	0 Inpatient 0 Days	X Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	X Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	X 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	Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services Obstetrical	X Outpatient Surgery
		Total Beds this Building	Cesarean/Deliv	X Central Plant

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

Building Number: 06 Building Name: Corridor No. 1								
Type of Service Prov	Type of Service Provided							
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	Administration	Renal Dialysis				
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0  Total Beds this 0	Support Services  Obstetrical Cesarean/Deliv	Outpatient Surgery				
		Total Beds this Building	Cesaleall/Deliv	Central Plant				

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

Building Number: 08	Buildi	ng Name: Pharmacy		
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	X Pharmaceutical Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services Obstetrical Cesarean/Deliv	Outpatient Surgery
		Total Beds this Building	Cesarean/Deliv	Central Plant

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

Building Number: 09 Building Name: Trauma					
Type of Service Prov	<u>/ided</u>				
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery	
X IntensiveCare	Inpatient Beds	8 Inpatient Days 1998	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	Administration	Renal Dialysis	
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0 Total Beds this 8	Support Services  Obstetrical Cesarean/Deliv	Outpatient Surgery	
		Building	Josai Gai / Doil v	Central Plant	

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Building Number:	01	Building Name:	Original Hospital		
Medical / Surgical	(Include GYN)	Acute Respira	tory Care	Acute Psychiatric	
Inpatient 42 Bed	Inpatient Days 1315	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 18 Bed	Inpatient 3289 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nursery	Newborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	Inpatient 103 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developn Disabled	nent
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	Inpatient 0 Days	64	64

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Building Number:	05	Building Name: Sur	gery Wing		
Medical / Surgical	(Include GYN)	Acute Respirator	y Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Ne Nursery	wborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developr Disabled	ment
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0

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Building Number:	06	Building Name:	Corridor No. 1			
Medical / Surgical (	Include GYN)	Acute Respira	tory Care	Acute Psychiatric		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Perinatal (excluse I	Newborn / GYN)	Burn		Skilled Nursing		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Pediatric		intensive Care Nursery	Newborn	Intermediate Card		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care		Rehabilitation Center			Int. Care / development Disabled	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient (	Inpatient 0 Days	0	0	

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Building Number:	08	Building Name:	Pharmacy		
Medical / Surgical	(Include GYN)	Acute Respirat	ory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient C Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient C Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nursery	Newborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developn Disabled	nent
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0

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Building Number:	09	Building Name: Tra	uma		
Medical / Surgical	(Include GYN)	Acute Respirator	y Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Ne Nursery	ewborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developm Disabled	nent
Inpatient 8 Bed	Inpatient 1998 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	8	8

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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
01	Original Hospital	
05	Surgery Wing	Ī
06	Corridor No. 1	Ī
08	Pharmacy	ī Ī
09	Trauma	Ī
10	Tower	Ī
11	Cath Lab No. 1	Ī Ī
12	Radiology - Oncology	ĪĪ
13	Cath Lab No. 2	ī Ī
14	Surgery Addition	ī Ī
15	Waiting Area/Corridor No. 2	ī Ī

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

Building Number	Building Name	New Site	
N_1	Magnolia Tower		

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Report any general acute care hospital inpatient service that is provided in any genaral acute care hospital building that is rated SPC-1 per Section 130061(c)(4)

Building Number:	01 Buildin	ng Name: Origin	nal Hospital			
Type of Service	e Provided					
		Su Su	urgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X	Nursing	An	nesthesia			
X	IntensiveCare		icomicola	X	Obstetrical Recovery	Renal Dialysis
П	Pediatric/Adol escent	CI	linical Lab		Name and	Outpatient Surgery
			adiological/ naging	Ш	Newborn/ WellBaby	Surgery
Ш	Psychiatric Nursing		harmaceutical		Emergency	Central Plant
X	Obstetrical Ante/Postprtum	_			Nuclear	Support
		Di	ietetic		Medicine	Services
	Intermediate Care	Ac	dministration			
	Skilled Nursing					

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Report any general acute care hospital inpatient service that is provided in any genaral acute care hospital building that is rated SPC-1 per Section 130061(c)(4)

Building Number:	05	Building Name:	Surgery Wing				
Type of Service	e Provided						
			Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	Nursing	x	Anesthesia				
	IntensiveCare				Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab			X	Outpatient
		×	Radiological	,	Newborn/ WellBaby		Surgery
	Psychiatric Nursing		Pharmaceut	ical	Emergency	X	Central Plant
	Obstetrical Ante/Postprtur	m			Nuclear		Support
	, and a coopital	"   [	Dietetic		Medicine	Ш	Services
	Intermediate Care		$\neg$				
	23.0		Administration	on			
	Skilled Nursing	g					

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Report any general acute care hospital inpatient service that is provided in any genaral acute care hospital building that is rated SPC-1 per Section 130061(c)(4)

Building Number:	06	Building Name:	Corridor No. 1			
Type of Service	e Provided					
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	Nursing		Anesthesia			
	IntensiveCare			Obstetrical Recovery		Renal Dialysis
П	Pediatric/Adolescent	,   [	Clinical Lab	<b>—</b>		Outpatient
	escent		Radiological/ Imaging	Newborn/ WellBaby		Surgery
	Psychiatric Nursing		Pharmaceutical	Emergency		Central Plant
	Obstetrical			Nuclear		Support
	Ante/Postprtu	""   [	Dietetic	Medicine	Ш	Services
	Intermediate Care		_			
	Jaio		Administration			
	Skilled Nursin	ng				

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Report any general acute care hospital inpatient service that is provided in any genaral acute care hospital building that is rated SPC-1 per Section 130061(c)(4)

Building Number:	08	Building Name:	Pha	rmacy			
Type of Service	e Provided						
			] §	Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	Nursing		] ,	Anesthesia			
	IntensiveCare		_			Obstetrical Recovery	Renal Dialysis
	Pediatric/Adol	,   L	(	Clinical Lab			Outpatient
	escent			Radiological/ maging	Ш	Newborn/ WellBaby	Surgery
	Psychiatric Nursing	  x	_	Pharmaceutical		Emergency	Central Plant
	0		」 '	Haimaceuticai	Ш	e.geney	Central Flant
Ш	Obstetrical Ante/Postprtu	m [	] (	Dietetic		Nuclear Medicine	Support Services
	Intermediate Care		7	A destatate de			
			/	Administration			
	Skilled Nursin	g <b> </b>					

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Report any general acute care hospital inpatient service that is provided in any genaral acute care hospital building that is rated SPC-1 per Section 130061(c)(4)

Building Number:	09	Building Name:	Trauma		
Type of Service	e Provided				
			Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	Nursing	1 ,	Anesthesia		
X	IntensiveCare	; -		Obstetrical Recovery	Renal Dialysis
	Pediatric/Ado	,   L	Clinical Lab		Outpatient
	escent Psychiatric		Radiological/ Imaging	Newborn/ WellBaby	Surgery
Ш	Nursing		Pharmaceutical	Emergency	Central Plant
	Obstetrical Ante/Postprtu	ım [	Dietetic	Nuclear Medicine	Support Services
	Intermediate Care		Administration		
	Skilled Nursin	ng			

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

Building Numbe	ilding Number: 01 Building Name: Original Hospital									
Configuration :	Remove from GAC	Service by	1/1/2013							
Type of Serv	rice Provided									
X	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
X	IntensiveCare		Anesthesia	X	Obstetrical		Renal Dialysis			
	Pediatric/Adol escent		Clinical Lab		Recovery					
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
X	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant			
	Intermediate		Dietetic	_		_	Contract land			
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services			

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number	er: 05	Building Na	me: Surgery Wing				
Configuration :	Retrofit Non-Confo	orming buildir	ng to SPC 2 and NPC 3	and rem	ove from service by 2030		
Type of Serv	vice Provided						
	Nursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare	X	Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab	_	Recovery		
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby	X	Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	X	Central Plant
	Intermediate Care		Dietetic				
	Skilled Nursing		Administration		Nuclear Medicine		Support Services

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number:	06	Building Na	me: Corridor No. 1		
Configuration :	Remove from GAC	Service by	1/1/2013		
Type of Service	e Provided				
	lursing		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
Ir	ntensiveCare		Anesthesia	Obstetrical	Renal Dialysis
	Pediatric/Adol scent		Clinical Lab	Recovery	
	Psychiatric Jursing		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
	Obstetrical .nte/Postprtum		Pharmaceutical	Emergency	Central Plant
	ntermediate		Dietetic	,	22
	care skilled Nursing		Administration	Nuclear Medicine	Support Services

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number:	08	Building Nar	me: Pharmacy		
Configuration :	Remove from GAC	service by	1/1/2013		
Type of Service	Provided				
Nu	ursing		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
Int	tensiveCare		Anesthesia	Obstetrical	Renal Dialysis
I I	ediatric/Adol cent		Clinical Lab	Recovery	
	sychiatric ursing		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
	ostetrical nte/Postprtum	X	Pharmaceutical	Emergency	Central Plant
	ermediate are		Dietetic	Nuclear Medicine	Support
	tilled Nursing		Administration	Nucleal 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 actue care hospital building per Section 130061(c)(5)

Building Number:	09	Building Na	me: Trauma				
Configuration :	Remove from GAC	service by	1/1/2013				
Type of Service	ce Provided						
	lursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X II	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Jursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant
	ntermediate		Dietetic	_		_	ooar ram
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number	r: [10	Building Na	me: Tower				
Configuration .	Retrofit Conformin	g building to	NPC 4 or NPC 5				
Type of Servi	ice Provided						
X	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent	X	Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical	X	Emergency	X	Central Plant
	Intermediate	X	Dietetic				
	Care Skilled Nursing		Administration	[X]	Nuclear Medicine		Support Services

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number	r: 11	Building Na	me: Cath Lab No. 1		
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5		
Type of Servi	ice 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		
	Care Skilled Nursing		Administration	Nuclear Medicine	Support Services

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Numbe	er: 12	Building Na	me: Radiology - Oncol	ogy							
Configuration :	Retrofit Conforming	g building to	NPC 4 or NPC 5								
Type of Serv	Type of Service 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								
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services				

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number	: [13	Building Na	me: Cath Lab No. 2		
Configuration :	Retrofit Conformin	g building to	NPC 4 or NPC 5		
Type of Servi	ce Provided				
	Nursing		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare		Anesthesia	Obstetrical	Renal Dialysis
I I	Pediatric/Adol escent		Clinical Lab	Recovery	
	Psychiatric Nursing		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
I I	Obstetrical Ante/Postprtum		Pharmaceutical	Emergency	Central Plant
	Intermediate		Dietetic		Contract tank
	Care Skilled Nursing		Administration	Nuclear Medicine	Support Services

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number	: [14	Building Na	me: Surgery Addition	on						
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5							
Type of Service Provided										
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis			
1 1	Pediatric/Adol escent		Clinical Lab		Recovery					
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	Obstetrical Ante/Postprtum		Pharmaceutical		_		0 / 151 /			
	·		Dietetic		Emergency		Central Plant			
	Intermediate Care				Nuclear Medicine		Support Services			
	Skilled Nursing		Administration				23.77000			

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

Building Numb	er: 15	Building Na	me: Waiting Area/C	orridor No.	2	
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5			
Type of Ser	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			
	Care Skilled Nursing		Administration	Ш	Nuclear Medicine	Support Services

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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, and SPC-5 per Section 130061(e)

Building Number: 10 Building Name: Tower								
Type o	Type of Service Provided							
X	Nursing	Inpatient Beds	107		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
X Ir	ntensiveCare	Inpatient Beds	25		Anesthesia			
1571	Pediatric/Adol escent	Inpatient Beds	4	X	Clinical Lab	Obstetrical Recovery	Renal Dialysis	
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery	
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	X Emergency	X Central Plant	
	ntermediate Care	Inpatient Beds	0	X	Dietetic	X Nuclear Medicine	Support Services	
S	Skilled Nursing	Inpatient Beds	0		Administration			
	Total Beds this Building	1	36					

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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, and SPC-5 per Section 130061(e)

Building Number: 11 Building Name: Cath Lab No. 1								
Тур	Type of Service Provided							
	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	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 Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Number: 12								
Type of Service Prov	Type of Service Provided							
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	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 Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Number: 13								
Type of Service Pro	Type of Service Provided							
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	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 Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Number: 14 Building Name: Surgery Addition							
Type (	Type of Service Provided						
<u> </u>	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
I	ntensiveCare	Inpatient Beds	0		Anesthesia		
	Pediatric/Adol	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
	ntermediate 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 Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Buildir	Building Number:   Building Name:   Waiting Area/Corridor No. 2							
<u>Type</u>	Type of Service Provided							
	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	Nuclear Medicine	Support Services	
	Skilled Nursing	Inpatient Beds	0		Administration			
	Total Beds this Building		0					

Report Status: **Data Last Update**: 01/06/2012 **Submission Date**: 01/29/2012 **Print Date**: 1/30/2012 12:46 PM

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Building Number: 10	0 Build	ing Name: Towe	er		
Medical / Surgical (Inc	lude GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 107 Bed	Inpatient 33523 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0	Inpatient 0 Days
Perinatal (excluse New	vborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0	Inpatient 0 Days
Pediatric		intensive Care New Nursery	wborn	Intermediate Card	
Inpatient 4 Bed	Inpatient 198 Days	Inpatient 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / develop Disabled	ment
Inpatient 10	Inpatient 2497 Days	Inpatient 0 Bed	Inpatient 0	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 15 Bed	Inpatient 1952 Days	Inpatient 0 Bed	Inpatient 0 Days	136	136

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Building Number: 1	1 Build	ing Name: Cath	n Lab No. 1		
Medical / Surgical (Inc	lude GYN)	Acute Respiratory	<sup>'</sup> Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse Nev	wborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Ne Nursery	wborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / develop Disabled	ment
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0

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Building Number: 1	2 Build	ing Name: Radi	ology - Oncology		
Medical / Surgical (Inc	clude GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse Ne	wborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care New Nursery	vborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / develop Disabled	nent
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0

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Building Number: 1	3 Build	ing Name: Cath Lab No	No. 2		
Medical / Surgical (Inc	lude GYN)	Acute Respiratory Care		Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpati Bed Days		Inpatient 0	Inpatient 0 Days
Perinatal (excluse Nev	wborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpati Bed Days		Inpatient 0	Inpatient 0 Days
Pediatric		intensive Care Newborn Nursery		Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpati Bed Days		Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developr Disabled	nent
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpati Bed Days		Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpati Bed Days		0	0

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Building Number:	14 Buil	ding Name: Surgery Addition			
Medical / Surgical (Ir	nclude GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Bed Days	0 Inpatient 0 Bed	Inpatient 0 Days	
Perinatal (excluse No	ewborn / GYN)	Burn	Skilled Nursing	Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0 Inpatient 0 Bed	Inpatient 0 Days	
Pediatric		intensive Care Newborn Nursery	Intermediate Card		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0 Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care		Rehabilitation Center	Int. Care / developn Disabled	nent	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0 Inpatient 0 Bed	Inpatient 0 Days	
Coronary Care		Chemical Dependency	Total Beds this Building Per Unit	Total Beds this Building Per Service	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0 0	0	

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Building Number:	15 Build	ling Name: Wai	ting Area/Corridor No. 2			
Medical / Surgical (In	clude GYN)	Acute Respiratory	/ Care	Acute Psychiatric	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Perinatal (excluse Ne	ewborn / GYN)	Burn		Skilled Nursing		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Pediatric		intensive Care Ne Nursery	wborn	Intermediate Card		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care		Rehabilitation Center		Int. Care / develop Disabled	ment	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0	