Report Year: 2011 10048 John Muir Medical Center, Concord Campus Concord Page:1 of 72

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

Facility Number:	10048	
Facility Name:	John Muir Medical Center, Concord Campus	
Address:	2540 East Street	
City:	Concord	
		_
Hospital Owner/Lice	ensee: John Muir Health	
Year of Rep	orting: 2011	
Contact 1 e-mail Ad	ldress:	
Contact 2 e-mail Ad	ldress:	
Contact 3 e-mail Add	dress::	
Name of Sub	mitter: Jack Haupt	
Submission	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.	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date
01	Original Hospital	2540 East Street	Remove	N/A	01/01/2013	01/01/2013
02.1	Elevator/Stair Tower	2540 East Street	Retrofit	SPC2	01/01/2013	01/01/2013
02.2	C Wing-East Wing- North West Element	2540 East Street	Remove	N/A	01/01/2013	01/01/2013
03	D Wing	2540 East Street	Remove	N/A	01/01/2013	01/01/2013

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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 **Building Name: Original Hospital** Type of Service Provided Obstetrical Surgical Inpatient Inpatient 0 Nursing Recovery Days Beds Newborn/ IntensiveCare Inpatient Days Inpatient 0 Anesthesia WellBaby **Beds Emergency** Clinical Lab Inpatient Days Inpatient 0 Pediatric/Adol escent **Beds** Nuclear Radiological/ Medicine Imaging **Psychiatric** Inpatient Days Inpatient 0 Nursing Beds Pharmaceutical Rehabilitation Obstetrical Inpatient Inpatient Days Dietetic Therapy Ante/Postprtum Beds Renal Dialysis Administration Inpatient Inpatient Days 0 Intermediate 0 Care **Beds** |X|Support Outpatient Services Surgery

Obstetrical

Cesarean/Deliv

Central Plant

Report Status: **Data Last Update:** 01/04/2012 **Submission Date:** 01/29/2012 **Print Date:** 2/1/2012 1:39 PM

0

Inpatient Days

Total Beds this

Building

Skilled Nursing

Inpatient Beds Report Year: 2011 10048 John Muir Medical Center, Concord Campus Concord Page:5 of 72

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

Building Number: 02	.1 Buildir	ng Name: Elevator/Stair Tower		
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 Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	X Support Services Obstetrical	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: 02.2 Building Name: C Wing-East Wing-North West Element				
Type of Service Prov	<u>vided</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 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	X Support Services Obstetrical Cesarean/Deliv	Outpatient Surgery
		Building		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: 03	Buildi	ng Name: D Wing		
Type of Service Prov	<u>rided</u>			
X Nursing	Inpatient Beds	42 Inpatient 399 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	X Radiological/ Imaging	X Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	X Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0 Total Beds this 42	X Support Services Obstetrical Cesarean/Deliv	Outpatient Surgery
		Building	5000.00.1,50	Central Plant

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Building Number:	01	Building Name: Origi	inal Hospital		
Medical / Surgical	(Include 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	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 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 / developr 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:	02.1	Building Name:	Elevator/Stair Tower		
Medical / Surgical ((Include GYN)	Acute Respir	atory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse	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 Car Nursery	e Newborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitatior Center	1	Int. Care / developn Disabled	nent
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 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	0 Inpatient 0 Days	0	0

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Building Number:	02.2	Building Name: C	Wing-East Wing-North W	Vest Element	
Medical / Surgical	(Include GYN)	Acute Respirato	ry 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 N Nursery	lewborn	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	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:	03 B	Building Name:	D Wing		
Medical / Surgical (Include GYN)	Acute Respira	atory Care	Acute Psychiatric	
Inpatient 42 Bed	Inpatient 399 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	lewborn / 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	e 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 / developr Disabled	nent
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 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	0 Inpatient 0 Days	42	42

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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	X		
02	C Wing			
02.1	Elevator/Stair Tower			
02.2	C Wing-East Wing-North West Element			
03	D Wing			
04	C Wing Addition			
05	Linear Accelerator			
06	B Wing / Surgery Equipment Room			
08.1	Cancer Center			
08.2	Emergency Room			
08.3	Canopy			
09	A Wing			
11	Linear Accelerator			
12	Central Plant			
13	Boiler Plant			

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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	E Tower	

Report Year: 2011 10048 John Muir Medical Center, Concord Campus Concord Page:14 of 72 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Original Hospital 2008 01 Year of Building Building Information: Number: Name: 09/01/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby **Imaging** Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Nuclear Support Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds

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0

Total Beds this

Report Year: 2011 10048 John Muir Medical Center, Concord Campus Concord Page:15 of 72 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Original Hospital 2009 01 Year of Building Building Information: Number: Name: 09/01/2010 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby **Imaging** Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Nuclear Support Inpatient Intermediate 0 Medicine Services Care Beds

Administration

Report Status: **Data Last Update:** 01/04/2012 **Submission Date:** 01/29/2012 **Print Date:** 2/1/2012 1:39 PM

0

0

Skilled Nursing

Inpatient

Building

Total Beds this

Beds

Report Year: 2011 10048 John Muir Medical Center, Concord Campus Concord Page:16 of 72 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Original Hospital 2010 01 Year of Building Building Information: Number: Name: 12/31/2011 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby **Imaging** Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Nuclear Support Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds

Report Status: **Data Last Update:** 01/04/2012 **Submission Date:** 01/29/2012 **Print Date:** 2/1/2012 1:39 PM

0

Total Beds this

Report Year: 2011 10048 John Muir Medical Center, Concord Campus Concord Page:17 of 72 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) Original Hospital 2011 01 Year of Building Building Information: Number: Name: Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Support Nuclear Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/04/2012 **Submission Date:** 01/29/2012 **Print Date:** 2/1/2012 1:39 PM

Report Year: 2011 10048 John Muir Medical Center, Concord Campus Concord Page:18 of 72 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) C Wing-East Wing-North West Element 2008 02.2 Year of Building Building Information: Number: Name: 12/31/2011 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby **Imaging** Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Nuclear Support Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/04/2012 **Submission Date:** 01/29/2012 **Print Date:** 2/1/2012 1:39 PM

Report Year: 2011 10048 John Muir Medical Center, Concord Campus Concord Page:19 of 72 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) C Wing-East Wing-North West Element 2009 02.2 Year of Building Building Information: Number: Name: 12/31/2011 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby **Imaging** Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Nuclear Support Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/04/2012 **Submission Date:** 01/29/2012 **Print Date:** 2/1/2012 1:39 PM

Report Year: 2011 10048 John Muir Medical Center, Concord Campus Concord Page:20 of 72 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) C Wing-East Wing-North West Element 2010 02.2 Year of Building Building Information: Number: Name: 12/31/2011 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby **Imaging** Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Nuclear Support Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0

Report Status: **Data Last Update:** 01/04/2012 **Submission Date:** 01/29/2012 **Print Date:** 2/1/2012 1:39 PM

Report Year: 2011 10048 John Muir Medical Center, Concord Campus Concord Page:21 of 72 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) C Wing-East Wing-North West Element 2011 02.2 Year of Building Building Information: Number: Name: Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby **Imaging** Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Nuclear Support Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0 Building

Report Year: 2011 10048 John Muir Medical Center, Concord Campus Concord Page:22 of 72 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) D Wing 2008 03 Year of Building Building Information: Number: Name: 12/31/2011 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation 42 Nursing Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Nuclear Support Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds

Report Status: **Data Last Update:** 01/04/2012 **Submission Date:** 01/29/2012 **Print Date:** 2/1/2012 1:39 PM

42

Total Beds this

Report Year: 2011 10048 John Muir Medical Center, Concord Campus Concord Page:23 of 72 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) D Wing 2009 03 Year of Building Building Information: Number: Name: 12/31/2011 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation 42 Nursing Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Nuclear Support Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds

Report Status: **Data Last Update:** 01/04/2012 **Submission Date:** 01/29/2012 **Print Date:** 2/1/2012 1:39 PM

42

Total Beds this

Report Year: 2011 10048 John Muir Medical Center, Concord Campus Concord Page:24 of 72 Provide the number of inpaient beds and patient days per type of service for the year of 2008, 2009 and 2010 for buildings to be removed from acute care services per Section 130061(c)(2)(D) D Wing 2010 03 Year of Building Building Information: Number: Name: 12/31/2011 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation 42 Nursing Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby Imaging Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Nuclear Support Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds

Report Status: **Data Last Update:** 01/04/2012 **Submission Date:** 01/29/2012 **Print Date:** 2/1/2012 1:39 PM

42

Total Beds this

Report Year:	2011	10048	John Muir Medical Center, Concord Campus	Concord	Page:25 of 72
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Provide the number of inform acute care services			type of service for the year of 20	008, 2009 and 2010 for build	lings to be removed
Building 03 Number:	Building Name:	D Wing		Year of Information:	2011
				Information Current As Of:	
Type of Services Provided					
X Nursing	Inpatient Beds	42	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia		
Pediatric/Adol	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	X Nuclear Medicine	X Support Services
Skilled Nursing	Inpatient Beds Total Beds this	0 42	X Administration		
	Building				

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For the building or buildings to be 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) The planned uses of the building or buildings to be removed from acute care service per Section 130061(c)(2)(B) The inpatient service currently delivered in the building or buildings per Section 130061(c)(20(C)

Building I	Number: 02	C Wing				Removal Date:		01/01/2030	
Planned	Planned Uses for the building to be removed from acute care service:								
Planned	Planned use for building: Medical Office Building Jurisdiction: OSHPD								
Inpatient	services currently of	elivered in the	e building:						
X	Nursing		Surgical		Obstetrical Cesarean/Deliv		Ш	Rehabilitation Therapy	
	IntensiveCare		Anesthesia				_		
	Pediatric/Adol escent		Clinical Lab		Obstetrical Recovery		Ш	Renal Dialysis	
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby			Outpatient Surgery	
	Obstetrical Ante/Postprtum		Pharmaceutical	П	·			Control Diggs	
	Intermediate Care		Dietetic		Emergency			Central Plant	
	Skilled Nursing	X	Administration		Nuclear Medicine		X	Support Services	

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For the building or buildings to be 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) The planned uses of the building or buildings to be removed from acute care service per Section 130061(c)(2)(B) The inpatient service currently delivered in the building or buildings per Section 130061(c)(20(C)

Building N	Number: 02.2	C Wing-Ea	ast Wing-North We	est Element		Removal Date:		01/01/2013	
	Planned Uses for the building to be removed from acute care service: Planned use for building: Medical Office Building Jurisdiction: OSHPD								
<u>Inpatient</u>	services currently deli	ivered in the	e building:						
	Nursing		Surgical	Ш	Obstetrical Cesarean/Deliv		Ш	Rehabilitation Therapy	
	IntensiveCare		Anesthesia						
	Pediatric/Adol escent		Clinical Lab		Obstetrical Recovery			Renal Dialysis	
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby			Outpatient Surgery	
	Obstetrical Ante/Postprtum		Pharmaceutical						
	Intermediate Care		Dietetic		Emergency		Ш	Central Plant	
	Skilled Nursing		Administration		Nuclear Medicine		X	Support Services	

Report Year:	2011	10048		John Muir Medical Center, Concord Campus		Concord	Page:28 of 72
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For the building or buildings to be 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)

The planned uses of the building or buildings to be removed from acute care service per Section 130061(c)(2)(B)

The inpatient service currently delivered in the building or buildings per Section 130061(c)(20(C)

Building I	Number: 03	D Wing				Removal Date:		01/01/2013	
Planned	Planned Uses for the building to be removed from acute care service:								
Planned	Planned use for building: Medical Office Building Jurisdiction: OSHPD								
Inpatient	services currently de	elivered in th	e building:					D. I. 1999 4	
X	Nursing		Surgical	Ш	Obstetrical Cesarean/Deliv		Ш	Rehabilitation Therapy	
	IntensiveCare		Anesthesia		Obstation				
	Pediatric/Adol escent		Clinical Lab	Ш	Obstetrical Recovery			Renal Dialysis	
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby			Outpatient Surgery	
	Obstetrical Ante/Postprtum		Pharmaceutical		·			Occurred Blood	
	Intermediate Care		Dietetic		Emergency			Central Plant	
	Skilled Nursing	X	Administration	X	Nuclear Medicine		X	Support Services	

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Report whether the general acute care services and beds will be relocated to a new or retrofittrd building and any corresponding building sites or project numbers per Section 130061(c)(2)(E)

Building Number: Original Hospital	
Will general acutr care services and beds will be relocated to a new or retrofittrd building?	
Administration N/A	
Building Number: Original Hospital	
Will general acutr care services and beds will be relocated to a new or retrofittrd building?	
Support Services Relocated to new building	
New Building Bed Count RetroFitted Building Bed Count Other SPC2-SPC5 Building	Bed Count
N_1-E Tower	
Building Number: C Wing-East Wing-North West Element	
Will general acutr care services and beds will be relocated to a new or retrofittrd building?	
Support Services Relocated to other building	
New Building Bed Count RetroFitted Building Bed Count Other SPC2-SPC5 Building	Bed Count
02-C Wing	

Report Year: 2	2011 10048 Jol	nn Muir Medical Center, Co	ncord Campus	Concord	Page:30 of 72
Building 03 Number: Will general acutr car		ame: D Wing	etrofittrd building	ŋ?	
Nursing	Relocated to new bu	uilding			
New Building	Bed Count	RetroFitted Building	Bed Count	Other SPC2-SPC5 Building	Bed Count
N_1-E Tower	42				
Building 03 Number: Will general acutr car		ame: D Wing	etrofittrd building	9?	
Radiological/Imaging	Relocated to new &	other Building			
New Building	Bed Count	RetroFitted Building	Bed Count	Other SPC2-SPC5 Building	Bed Count
N_1-E Tower				02-C Wing	
Building 03 Number:	Building N	ame: D Wing			
Will general acutr car	e services and beds w	Il be relocated to a new or i	etrofittrd building	j?	
Administration	Relocated to other b	puilding			
New Building	Bed Count	RetroFitted Building	Bed Count	Other SPC2-SPC5 Building	Bed Count
				02-C Wing	

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Building Number: Will general acut Support Services New Building N_1-E Tower		will be relocated to a new or	retrofittrd building	other SPC2-SPC5 Br	uilding Bed Count
N_I-E TOWER					
Building Number: Will general acut Nuclear Medicine New Building N_1-E Tower		will be relocated to a new or	retrofittrd building Bed Count	? Other SPC2-SPC5 Bi	uilding Bed Count
Building Number: Will general acut Medical/Surgical (Include GYN)		Name: D Wing will be relocated to a new or	retrofittrd building	j?	

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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	Building Name:	Original Ho	ospital				
Type of Service Provided								
			Surgica	ıl		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	Nursing		Anesthe	esia				
	IntensiveCare	·	_			Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol	, L	Clinical	l Lab				Outpatient
			Radiolo		Ш	Newborn/ WellBaby		Surgery
Ш	Psychiatric Nursing		_	aceutical		Emergency		Central Plant
	Obstetrical Ante/Postprtu	m			П	Nuclear	X	Support
	, and, outpite		Dietetio			Medicine		Services
	Intermediate Care	X	Adminis	stration				
П	Skilled Nursin	lg						

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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:	02.1	Building Name:	Elevator/Stair Tower					
Type of Service Provided								
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
	Nursing		Anesthesia					
	IntensiveCare		_	Obstetrical Recovery		Renal Dialysis		
П	Pediatric/Ado escent	, [Clinical Lab			Outpatient		
	escent		Radiological/ Imaging	Newborn/ WellBaby	Ш	Surgery		
	Psychiatric Nursing		Pharmaceutical	Emergency		Central Plant		
	Obstetrical		_					
Ш	Ante/Postprtu		Dietetic	Nuclear Medicine	X	Support Services		
	Intermediate	_	_					
_	Care		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:	02.2	Building Name:	C	Wing-East Wing-Nortl	h West	Element			
Type of Service Provided Surgical Obstetrical Rehabilitation									
	Nursing			Surgical		Obstetrical Cesarean/Deliv		Therapy	
	_			Anesthesia		Obstetrical		Renal Dialysis	
	IntensiveCare			Clinical Lab		Recovery			
	Pediatric/Adol escent	' ⁻	_ _	Radiological/		Newborn/ WellBaby		Outpatient Surgery	
	Psychiatric Nursing			Imaging		·			
	_			Pharmaceutical		Emergency		Central Plant	
	Obstetrical Ante/Postprtu	m [Dietetic		Nuclear Medicine	X	Support Services	
	Intermediate Care			Administration					
	Skilled Nursin	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:	03 Buildi	ng Name: D Wing							
Type of Service Provided									
		Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
X	Nursing	Anesthesia							
	IntensiveCare	74100410014	Obstetrical Recovery		Renal Dialysis				
	Pediatric/Adol	Clinical Lab	_		Outpatient				
Ш	escent	X Radiological/	Newborn/ WellBaby		Surgery				
	Psychiatric Nursing	Imaging							
	<u> </u>	Pharmaceutical	Emergency		Central Plant				
	Obstetrical Ante/Postprtum	Dietetic	X Nuclear Medicine	X	Support Services				
	Intermediate Care	X Administration							
	Skilled Nursing								

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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: 01 Building Name: Original Hospital									
Configuration : Remove from GAC service by 1/1/2013									
Type of Service Provided									
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
Inte	ensiveCare		Anesthesia		Obstetrical		Renal Dialysis		
	diatric/Adol cent		Clinical Lab		Recovery				
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	ostetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant		
Into	ermediate		Dietetic		Lineigency		Contrain lant		
— Ca	illed Nursing	X	Administration		Nuclear Medicine	X	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	: 02	Building Na	me: C Wing							
Configuration :	Configuration Remove from GAC service by 1/1/2030									
Type of Service Provided										
X I	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				Community in the control of the cont			
	Care Skilled Nursing	X	Administration		Nuclear Medicine	X	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:	02.1	Building Na	me: Elevator/Stair 1	Tower							
Configuration :	Retrofit Non-Confo	orming buildi	ng to SPC 2 and NPC	C 3 and rem	ove from service by 2030						
Type of Servic	Type of Service Provided										
N	lursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
Ir	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis				
	ediatric/Adol scent		Clinical Lab		Recovery						
	sychiatric Iursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
1 1	Obstetrical .nte/Postprtum		Pharmaceutical		F		Ocatori Blast				
	ntermediate		Dietetic		Emergency		Central Plant				
	Care				Nuclear Medicine	X	Support Services				
S	killed Nursing		Administration				23333				

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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:	02.2	Building Na	me: C Wing-East W	/ing-North V	Vest Element		
Configuration:	Remove from GAC	service by	1/1/2013				
Type of Servic	e Provided						
N	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Ir	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Recovery		
	sychiatric lursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	bstetrical nte/Postprtum		Pharmaceutical		Emergency		Central Plant
	ntermediate		Dietetic				
	are killed Nursing		Administration		Nuclear Medicine	X	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:	03	Building Na	me: D Wing							
Configuration :	Remove from GAC	Service by	1/1/2013							
Type of Service Provided										
X 1	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis			
	Pediatric/Adol escent		Clinical Lab		Recovery					
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant			
	ntermediate Care		Dietetic	X	Nuclear Medicine	X	Support			
	Skilled Nursing	X	Administration		Nucleal Medicifie		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:	04	Building Na	me: C Wing Addition	n			
Configuration:	Remove from GAC	Service by	1/1/2030				
Type of Service	e Provided						
N	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
In	tensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Recovery		
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
1 1 -	bstetrical nte/Postprtum		Pharmaceutical		Emergency		Central Plant
	itermediate		Dietetic		Emergency		Ochida i lant
— с	are	x	Administration		Nuclear Medicine	X	Support Services
S	killed Nursing		Auministration				

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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:	05	Building Na	me: Linear Acceler	rator							
Configuration :	Configuration : Retrofit Conforming building to NPC 4 or NPC 5										
Type of Service Provided											
n	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis				
	Pediatric/Adol escent		Clinical Lab		Recovery						
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
I I	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant				
	ntermediate		Dietetic		Linergency		Contrary land				
	Care Skilled Nursing	X	Administration		Nuclear Medicine	X	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: 06	Building Name: B Wing / Surgery Equipment Room									
Configuration .	Remove from GAC	service by	1/1/2030								
Type of Serv	rice Provided										
X	Nursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
X	IntensiveCare	X	Anesthesia		Obstetrical		Renal Dialysis				
	Pediatric/Adol escent	X	Clinical Lab		Recovery						
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby	X	Outpatient Surgery				
	Obstetrical Ante/Postprtum	X	Pharmaceutical	П	Emergency		Central Plant				
	Intermediate	X	Dietetic								
	Care Skilled Nursing	X	Administration		Nuclear Medicine	X	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: 08.1	Building Nar	me: Cancer Center							
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			
	Pediatric/Adol escent		Clinical Lab		Recovery					
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant			
	Intermediate Care		Dietetic							
	Skilled Nursing		Administration		Nuclear Medicine	X	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:	08.2	Building Nar	me: Emergency Roo	om						
Configuration :	Configuration : Retrofit Conforming building to NPC 4 or NPC 5									
Type of Service	e Provided									
	lursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Ir	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis			
	ediatric/Adol scent		Clinical Lab		Recovery					
	Psychiatric Iursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	Dbstetrical Inte/Postprtum		Pharmaceutical		Emergency		Central Plant			
	ntermediate		Dietetic							
	Care Skilled Nursing	X	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:	08.3	Building Na	me: Canopy						
Configuration .	Retrofit Conformin	g building to	NPC 4 or NPC 5						
Type of Service Provided									
N	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
Ir	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis		
	ediatric/Adol scent		Clinical Lab		Recovery				
	sychiatric lursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	obstetrical nte/Postprtum		Pharmaceutical		Emergency		Central Plant		
	ntermediate		Dietetic						
	are killed 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:	09	Building Na	me: A Wing							
Configuration :	Retrofit Conformin	g building to	NPC 4 or NPC 5							
Type of Service	Type of Service Provided									
X N	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
In	tensiveCare		Anesthesia		Obstetrical		Renal Dialysis			
	ediatric/Adol scent		Clinical Lab		Recovery					
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
1 1 -	bstetrical nte/Postprtum		Pharmaceutical	П	Emergency	П	Central Plant			
	termediate		Dietetic							
	are killed Nursing	X	Administration		Nuclear Medicine	X	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:	11	Building Na	me: Linear Acceler	ator					
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5						
Type of Service Provided									
N	lursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
Ir	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis		
	ediatric/Adol scent		Clinical Lab		Recovery				
	sychiatric lursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	Obstetrical nte/Postprtum		Pharmaceutical		Emergency		Central Plant		
	ntermediate		Dietetic		Line.geney		Commun Tan		
	are killed Nursing		Administration		Nuclear Medicine	X	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:	12	Building Na	me: Central Plant				
Configuration :	Retrofit Conformin	g building to	NPC 4 or NPC 5				
Type of Servic	e Provided						
	lursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Ir	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
l I	rediatric/Adol scent		Clinical Lab		Recovery		
	sychiatric Iursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical .nte/Postprtum		Pharmaceutical		Emergency	X	Central Plant
	ntermediate		Dietetic	_	Lineigonoy		Comman Tam
	care skilled Nursing		Administration		Nuclear Medicine	X	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: 13	Building Na	me: Boiler Plant				
Configuration :	Retrofit Conformin	g building to	NPC 4 or NPC 5				
Type of Serv	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	X	Central Plant
	Intermediate		Dietetic	_	Lineigency		Central Flam
	Care Skilled Nursing	X	Administration		Nuclear Medicine	X	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)

Buildi	ng Number: 02						
Тур							
X	Nursing	Inpatient Beds	22		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	X Support Services
	Skilled Nursing	Inpatient Beds	0	X	Administration		
	Total Beds this Building		22				

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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)

Build	ing Number: 04									
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	X Support Services			
	Skilled Nursing	Inpatient Beds	0	X	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)

Buildin	g Number: 05									
Type (Type of Service Provided									
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy			
	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	X Support Services			
	Skilled Nursing	Inpatient Beds	0	X	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)

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Building Number: 06 Building Name: B Wing / Surgery Equipment Room										
Тур	Type of Service Provided									
X	Nursing	Inpatient Beds	107	X	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy			
X	IntensiveCare	Inpatient Beds	15	X	Anesthesia					
	Pediatric/Adol escent	Inpatient Beds	0	X	Clinical Lab	Obstetrical Recovery	Renal Dialysis			
	Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby	X Outpatient Surgery			
	Obstetrical Ante/Postprtum	Inpatient Beds	0	X	Pharmaceutical	Emergency	Central Plant			
	Intermediate Care	Inpatient Beds	0	X	Dietetic	Nuclear Medicine	X Support Services			
	Skilled Nursing	Inpatient Beds	0	X	Administration					
	Total Beds this Building		122							

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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: 08					
Type of Service Pro					
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	X 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)

Build										
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	X	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: 0									
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/Postprtur	Inpatient n Beds	0	Pharmaceutical	Emergency	Central Plant				
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services				
Skilled Nursing	g Inpatient Beds	0	Administration						
Total Beds this Building	S	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]								
Type of Service Provided									
X Nursing	Inpatient Beds	68		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy			
IntensiveC	Care Inpatient Beds	0		Anesthesia					
Pediatric// escent	Adol Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis			
Psychiatric Nursing	c Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery			
Obstetrica Ante/Post	•	0		Pharmaceutical	Emergency	Central Plant			
Intermedia Care	ate Inpatient Beds	0		Dietetic	Nuclear Medicine	X Support Services			
Skilled Nu	rsing Inpatient Beds	0	X	Administration					
Total Beds Building	s this	68							

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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)

Build	ing Number: 11									
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	X 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 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	X Central Plant					
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	X 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)

Buildi	Building Number: 13 Building Name: Boiler Plant						
Туре	of Service Prov	<u>rided</u>					
	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	X Support Services
	Skilled Nursing	Inpatient Beds	0	X	Administration		
	Total Beds this Building		0				

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Building Number:	2 Build	ing Name: C Wi	ing		
Medical / Surgical (Inc	clude GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 22 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	Inpatient 0 Days
Pediatric		intensive Care New 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	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	22	0

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Building Number:	04	Building Name: C Wi	ing Addition		
Medical / Surgical (I	nclude GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Perinatal (excluse N	ewborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Pediatric		intensive Care New Nursery	vborn	Intermediate Card	
Inpatient 0 Bed	Inpatient Days	0 Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Intensive Care		Rehabilitation Center		Int. Care / development Disabled	
Inpatient 0 Bed	Inpatient Days	0 Inpatient 0 Bed	Inpatient 0	Inpatient 0 Inpatient 0 Days	
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit Total Beds this Building Per Service	
Inpatient 0 Bed	Inpatient Days	0 Inpatient 0 Bed	Inpatient 0 Days	0 0	

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Building Number:	5 Build	ing Name: Linea	ar Accelerator		
Medical / Surgical (Inc	lude 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 Nev	vborn / 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 Nev 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	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:	6 Build	ing Name: B Wir	ng / Surgery Equipment F	Room	
Medical / Surgical (Inc	lude GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 107 Bed	Inpatient 24500 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0	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 New Nursery	vborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / develop	ment
Inpatient 15 Bed	Inpatient 7058 Days	Inpatient 0	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	122	0

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Building Number:	8.1 Build	ing Name: Cand	cer Center		
Medical / Surgical (Inc	lude 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 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 New 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	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:	8.2 Build	ing Name: Emer	rgency Room		
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 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 New Nursery	vborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / develop	ment
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0	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:	08.3 Bui	ding Name: Canopy	
Medical / Surgical (In	clude GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Days
Perinatal (excluse Ne	wborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Days
Pediatric		intensive Care Newborn Nursery	Intermediate Card
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Days
Intensive Care		Rehabilitation Center	Int. Care / development Disabled
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Days
Coronary Care		Chemical Dependency	Total Beds this Building Per Unit Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0 0

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Building Number:	9 Build	ing Name: A Wi	ng		
Medical / Surgical (Inc	lude GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 58 Bed	Inpatient 12250 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 0 Bed	Inpatient 0 Days	Inpatient 0	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 10 Bed	Inpatient 3554 Days	Inpatient 0 Bed	Inpatient 0 Days	68	0

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Building Number: 11	Buildi	ing Name: Linea	ar Accelerator		
Medical / Surgical (Incl	ude GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0	Inpatient 0 Days
Perinatal (excluse New	born / 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	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	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	Inpatient 0 Days	0	0

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Building Number:	Build	ling Name: Cent	ral Plant		
Medical / Surgical (In	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 Nev 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:	Build	ing Name: Boile	er Plant		
Medical / Surgical (Inc	clude GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		patient 0 ays
Perinatal (excluse Ne	wborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		patient 0
Pediatric		intensive Care New Nursery	vborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		patient 0
Intensive Care		Rehabilitation Center		Int. Care / developmen Disabled	nt
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0		patient 0
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