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

Facility Number:	10526		
Facility Name:	Corona I	Regional Medical Center-Magnolia	
Address:	730 Old	Magnolia Avenue	
City:	Corona		
Hospital Owner/Lic	ensee:	Universal Health Services / 250000126	
Year of Rep	oorting:	2011	
Contact 1 e-mail Address:			
Contact 2 e-mail Ac	ddress:		
Contact 3 e-mail Ad	dress::		
Name of Sub	omitter:	Joseph La Brie, MakeltRight, Inc	
Submission	n Date:	1/29/2012 3:00:00 PM	

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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: 04 Building Name: Rehabilitation Hospital - Magnolia								
Type of Service Provided								
X Nursing	Inpatient Beds	10 Inpatient 1967 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				
X Psychiatric Nursing	Inpatient Beds	40 Inpatient Days 6736	Radiological/ Imaging Pharmaceutical	Nuclear Medicine				
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Dietetic	X Rehabilitation Therapy				
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis				
X Skilled Nursing	Inpatient Beds	30 Inpatient Days 9436	Support Services Obstetrical	Outpatient Surgery				
		Total Beds this 80 Building	Cesarean/Deliv	Central Plant				

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

Building Number:	04	Building Name:	Rehabilitation Hospital - N	Magnolia	
Medical / Surgical	(Include GYN)	Acute Respira	atory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 40 Bed	Inpatient 6736 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 30 Bed	Inpatient 9436 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 / developm Disabled	ent
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 1 Bed	0 Inpatient 1967 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	80	80

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

Buildir	_	Building	Building to
Numbe		Name	be Removed
04		Rehabilitation Hospital - Magnolia	

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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:	04	Building Name:	Rehabilitation Hosp	ital - Magnolia			
Type of Service Provided							
	Nursing		Surgical	Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy	
Х	Nuising		Anesthesia	Chatatrian!		Renal Dialysis	
	IntensiveCare		Clinical Lab	Obstetrical Recovery		Nenai Diaiysis	
	Pediatric/Adol escent		Clinical Lab	Newborn/		Outpatient Surgery	
X	Psychiatric		Radiological/ Imaging	WellBaby			
	Nursing		Pharmaceutical	Emergency		Central Plant	
	Obstetrical Ante/Postprtu	m _	¬	Nuclear Medicine		Support Services	
			Dietetic	Wedelife		Gervices	
	Intermediate Care		Administration				
X	Skilled Nursin	g					

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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 Name: Rehabilitation Hospital - Magnolia								
Configuration Remove from GAC service by 1/1/2013								
Type of Service Provided								
X	Nursing		Surgical		Obstetrical Cesarean/Deliv	X	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				Common fam	
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services	

Report Status: **Data Last Update**: 01/15/2012 **Submission Date**: 01/29/2012 **Print Date**: 1/30/2012 12:46 PM

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