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

Facility Number:	10529	
Facility Name:	Corona Regional Medical Center-Main	
Address:	800 South Main Street	
City:	Corona	
Hospital Owner/Lice	see: Universal Health Services / 2500	00126
Year of Rep	ting: 2011	
Contact 1 e-mail Ad	ess:	
Contact 2 e-mail Ad	ess:	
Contact 3 e-mail Add	ess::	
Name of Sub	tter: Kevan Metcalfe	
Submission	Pate: 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	: 01 Build	ing Name: Original Hospital - Main		
Type of Service	Provided			_
X Nursing	Inpatient Beds	133 Inpatient 27535 Days	X Surgical	Obstetrical Recovery
X IntensiveCa	are Inpatient Beds	4 Inpatient Days 907	X Anesthesia	Newborn/ WellBaby
X Pediatric/Adescent	dol Inpatient Beds	5 Inpatient Days 1108	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postpl	Inpatient rtum Beds	0 Inpatient Days 0	X Pharmaceutical Dietetic	Rehabilitation Therapy
Intermediat Care	e Inpatient Beds	0 Inpatient Days 0	X Administration	Renal Dialysis
Skilled Nurs	sing Inpatient Beds	0 Inpatient Days 0	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: 10	0 Buildir	ng Name: Old Church (Business Adn	ninistration	
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 Total Beds this	X Support Services Obstetrical Cesarean/Deliv	Outpatient Surgery
		Total Beds this Building	Cesaleal/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: 10	1 Buildi	ng Name: MRI		
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	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	Outpatient Surgery
		Total Beds this 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:	01	Building Name:	Original Hospital - Main		
Medical / Surgical (I	nclude GYN)	Acute Respirat	ory Care	Acute Psychiatric	
• •	Inpatient Days 2395	Inpatient C Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	lewborn / GYN)	Burn		Skilled Nursing	
	Inpatient 3582 Days	Inpatient C Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nursery	Newborn	Intermediate Card	
•	Inpatient 1108 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developr Disabled	nent
	Inpatient 907 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 Days	Inpatient 0 Bed	Inpatient 0 Days	142	142

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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:	100	Building Name:	old Church (Business Adm	inistration	
Medical / Surgical	(Include GYN)	Acute Respirato	ory 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	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 / 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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Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number:	101	Building Name: MF	रा		
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	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 / 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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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 - Main	
02	Ancillary - Main	
02A	Generator Building	
03	Surgery & Delivery - Main	
100	Old Church (Business Administration	
101	MRI	

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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 Hospital - Mair	า		
Type of Servic	e Provided					
			Surgical	Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
X	Nursing	X	Anesthesia			Renal Dialysis
X	IntensiveCare		Clinical Lab	X Obstetrical Recovery		iteliai Diaiysis
X	Pediatric/Adol escent		_	X Newborn/ WellBaby		Outpatient Surgery
	Psychiatric Nursing		Radiological/ Imaging	wellbaby		
	-	X	Pharmaceutical	X Emergency		Central Plant
	Obstetrical Ante/Postprtui		Dietetic	X Nuclear Medicine		Support Services
	Intermediate Care	X	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:	100	Building Name:	Old Church (Business	Administration				
Type of Service Provided								
			Surgical	Obstetrical Cesarean/Deliv	Ш	Rehabilitation Therapy		
	Nursing		Anesthesia					
	IntensiveCare		_	Obstetrical Recovery	Ш	Renal Dialysis		
П	Pediatric/Ado escent	, _	Clinical Lab	Newborn/		Outpatient Surgery		
			Radiological/ Imaging	WellBaby		Surgery		
	Psychiatric Nursing		Pharmaceutical	Emergency		Central Plant		
	Obstetrical Ante/Postprtu	ım _	_	Nuclear	Х	Support		
	·		Dietetic	Medicine		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:	101	Building Name:	MRI		
Type of Service	e Provided				
] [Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	Nursing	[Anesthesia		
	IntensiveCare		_	Obstetrical Recovery	Renal Dialysis
П	Pediatric/Adol		Clinical Lab		Outpatient
	escent		X Radiological/	Newborn/ WellBaby	Surgery
	Psychiatric Nursing		Imaging Pharmaceutical	Emergency	Central Plant
	Obstatuisal		Filalillaceutical		Central Flant
	Obstetrical Ante/Postprtu	m [Dietetic	Nuclear Medicine	Support Services
	Intermediate				
	Care		Administration		
	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 Numbe	Building Number: 01 Building Name: Original Hospital - Main						
Configuration:	Retrofit Non-Confo	orming buildi	ng to SPC 2 and NPC 3	3 and rem	ove from service by 2030		
Type of Serv	vice Provided						
X	Nursing	X	Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
X	IntensiveCare	X	Anesthesia	X	Obstetrical		Renal Dialysis
X	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging	X	Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum	X	Pharmaceutical	X	Emergency		Central Plant
	Intermediate		Dietetic				
	Care Skilled Nursing	X	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:	02	Building Na	me: Ancillary - Main		
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5		
Type of Servic	e Provided				
N	ursing		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
Ir	ntensiveCare		Anesthesia	Obstetrical	Renal Dialysis
	ediatric/Adol scent	X	Clinical Lab	Recovery	
	sychiatric ursing	X	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
	bstetrical nte/Postprtum		Pharmaceutical	Emergency	Central Plant
☐ Ir	ntermediate	X	Dietetic	Linergency	Contract faint
	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:	02A	Building Na	me: Generator Bu	ilding			
Configuration :	Retrofit Conformin	g 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 Jursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
1 1 -	Obstetrical Inte/Postprtum		Pharmaceutical		Emergency	X	Central Plant
	ntermediate		Dietetic	_	51951159		Consider faint
	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:	Building Number: 03 Building Name: Surgery & Delivery - Main							
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5					
Type of Service	ce Provided							
	lursing	X	Surgical	X	Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
X II	ntensiveCare	X	Anesthesia	X	Obstetrical		Renal Dialysis	
	Pediatric/Adol escent		Clinical Lab		Recovery			
	Psychiatric Jursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	Obstetrical Inte/Postprtum		Pharmaceutical	П	Emergency		Central Plant	
	ntermediate Care		Dietetic					
	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:	100	Building Na	me: Old Church (B	usiness Adm	ninistration		
Configuration:	Remove from GAC	Service by	1/1/2013				
Type of Servi	ce Provided						
	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
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant
	ntermediate		Dietetic				
	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:	101	Building Nar	me: MRI			
Configuration :	Remove from GAC	service by	1/1/2013			
Type of Service	e Provided					
Nu	ursing		Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Int	tensiveCare		Anesthesia	Obstetrical		Renal Dialysis
1 1	ediatric/Adol scent		Clinical Lab	Recovery		
	sychiatric ursing	X	Radiological/ Imaging	Newborn/ WellBaby		Outpatient Surgery
	ostetrical nte/Postprtum		Pharmaceutical	Emergency		Central Plant
	termediate		Dietetic	Emergency	_	Contract land
	are killed Nursing		Administration	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: 02									
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	X 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	X 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)

Buildi	ng Number: 02A									
Туре	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	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	ng Number: 03						
Тур	e of Service Prov	<u>rided</u>					
	Nursing	Inpatient Beds	0	X	Surgical	X Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X	IntensiveCare	Inpatient Beds	18	X	Anesthesia		
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	X 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		18				

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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Number:	02 Build	ding Name: Anci	llary - Main		
Medical / Surgical (In	clude GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0
Perinatal (excluse Ne	ewborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0
Pediatric		intensive Care Nev Nursery	wborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0
Intensive Care		Rehabilitation Center		Int. Care / development Disabled	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit Total B Building Buildin Service	•
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0

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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Number:	02A Buil	ding Name: Generato	or Building	
Medical / Surgical (In	clude GYN)	Acute Respiratory Care	re	Acute Psychiatric
Inpatient 0 Bed	Inpatient 0 Days			Inpatient 0 Inpatient 0 Days
Perinatal (excluse Ne	ewborn / GYN)	Burn		Skilled Nursing
Inpatient 0 Bed	Inpatient 0 Days		' ' '	Inpatient 0 Inpatient 0 Days
Pediatric		intensive Care Newbor Nursery	rn	Intermediate Card
Inpatient 0 Bed	Inpatient 0 Days			Inpatient 0 Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / development Disabled
Inpatient 0 Bed	Inpatient 0 Days			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 0 Days		patient 0	0 0

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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Number:	03 Build	ling Name: Surgery	ry & Delivery - Main		
Medical / Surgical (Include GYN)		Acute Respiratory Care		Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days	Inpatient 0	Inpatient 0 Days
Perinatal (excluse Newborn / GYN)		Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days	Inpatient 0	Inpatient 0 Days
Pediatric		intensive Care Newborn Nursery		Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / development Disabled	
Inpatient 14 Bed	Inpatient 3173 Days		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 4 Bed	Inpatient 0 Days		Inpatient 0 Days	18	18