Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:1 of 44

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

| Facility Number: | 10677 |
|----------------------|--|
| Facility Name: | Loma Linda University Medical Center |
| Address: | 11234 Anderson Street |
| City: | Loma Linda |
| Hospital Owner/Lice | ensee: Loma Linda University Medical Center |
| Year of Rep | porting: 2011 |
| Contact 1 e-mail Ad | ddress: |
| Contact 2 e-mail Ad | ddress: |
| Contact 3 e-mail Add | dress:: |
| Name of Sub | Domitter: Loma Linda University Medical Center |
| Submission | n Date: 1/29/2012 3:00:00 PM |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:2 of 44

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 |
|--------------|---------------------------------|----------------------------|------------------------|---------------------------------|-------------------|-----------------------------|
| | 0 | | | [0005 | | |
| 01 | Original Plant | 11234 Anderson Street | Retrofit | SPC5 | 01/01/2013 | 01/01/2020 |
| 03 | Main Hospital Tower - Area A | 11234 Anderson Street | Replace | SPC5 | 01/01/2013 | 01/01/2020 |
| 05 | Main Hospital Tower - Area C | 11234 Anderson Street | Replace | SPC5 | 01/01/2013 | 01/01/2020 |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda

oma Linda Page:3 of 44

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:4 of 44

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

| Building Number: 01 | Buildi | ng Name: Original Plant | | |
|----------------------------|-------------------|--------------------------|----------------------------|------------------------|
| 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 | Support Services | Outpatient Surgery |
| | | Total Beds this Building | Obstetrical Cesarean/Deliv | Central Plant |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:5 of 44

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

| Building Number: 03 Building Name: Main Hospital Tower - Area A | | | | | |
|---|-------------------|--------------------------------------|---|------------------------|--|
| 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 0 | Support Services Obstetrical Cesarean/Deliv | Outpatient Surgery | |
| | | Building | JOSAI GAI II DOIIV | Central Plant | |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:6 of 44

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

| Building Number: 05 Building Name: Main Hospital Tower - Area C | | | | | |
|---|-------------------|--------------------------|-----------------------------|----------------------------|--|
| Type of Service Prov | <u>vided</u> | | | | |
| Nursing | Inpatient Beds | 0 Inpatient 0 Days | X Surgical | Obstetrical Recovery | |
| X IntensiveCare | Inpatient Beds | 73 Inpatient Days 20159 | X Anesthesia | Newborn/ WellBaby | |
| X Pediatric/Adol escent | Inpatient Beds | 73 Inpatient Days 18045 | 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 | X Pharmaceutical X Dietetic | Rehabilitation Therapy | |
| Intermediate Care | Inpatient Beds | 0 Inpatient Days 0 | X Administration X Support | Renal Dialysis Outpatient | |
| Skilled Nursing | Inpatient Beds | 0 Inpatient Days 0 | Services Obstetrical | Surgery | |
| | | Total Beds this Building | Cesarean/Deliv | Central Plant | |

2011

10677

Loma Linda University Medical Center

Loma Linda

Page:7 of 44

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: Origi | inal Plant | | |
|--------------------|---------------------|-------------------------------|---------------------|---|--|
| 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 Nev 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 |

2011

10677

Loma Linda University Medical Center

Loma Linda

Page:8 of 44

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

| Building Number: | 03 | Building Name: | lain Hospital Tower - Area A | | |
|----------------------|---------------------|-----------------------------|------------------------------|---|--|
| 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 N | 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 | 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 |

2011

10677

Loma Linda University Medical Center

Loma Linda

Page:9 of 44

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

| Building Number: | 05 | Building Name: | Main Hospital Tower - Area C | | |
|----------------------|--------------------------|---------------------------|------------------------------|---|--|
| Medical / Surgical | (Include GYN) | Acute Respira | tory Care | Acute Psychiatric | |
| Inpatient 302 Bed | Inpatient 7245 Days 9 | Inpatient Bed | 0 Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Perinatal (excluse | Newborn / GYN) | Burn | | Skilled Nursing | |
| Inpatient 35 Bed | Inpatient 5457 Days | Inpatient Bed | 0 Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Pediatric | | intensive Care Nursery | Newborn | Intermediate Card | |
| Inpatient 73 Bed | Inpatient 1804 Days 5 | Inpatient Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Intensive Care | | Rehabilitation Center | | Int. Care / developr Disabled | ment |
| Inpatient 73 Bed | Inpatient 2015 Days 9 | Inpatient (| Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Coronary Care | | Chemical Dependency | | Total Beds this Building Per Unit | Total Beds this Building Per Service |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient (| Inpatient 0 Days | 483 | 146 |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:10 of 44

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 Plant | <u> </u> |
| 02 | Co-Generation Plant | |
| 02A | Chiller Facility | Ī |
| 03 | Main Hospital Tower - Area A | Ī |
| 05 | Main Hospital Tower - Area C | Ī |
| 06 | Northeast Wing - Schuman Pavilion | ĪĪ |
| 07A | South Wing Phase I | Ī |
| 07B | South Wing Phase I | Ī |
| 07C | South Wing Phase I | ĪĪ |
| 08 | South Wing Phase 2 | Ī |
| 08A | South Wing Phase 2 | ĪĪ |
| 09 | Emergency Room Expansion - 1976 | ĪĪ |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:11 of 44

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:12 of 44

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

| Building Number: | 01 Buildin | g Name: O | riginal Plant | | | | |
|--------------------------|------------------------|-----------|--------------------------|---|-------------------------------|---|---------------------------|
| Type of Service Provided | | | | | | | |
| | | | Surgical | | Obstetrical Cesarean/Deliv | | Rehabilitation Therapy |
| | Nursing | | Anesthesia | | | | |
| | IntensiveCare | | | | Obstetrical Recovery | | Renal Dialysis |
| | Pediatric/Adol escent | | Clinical Lab | | | П | Outpatient |
| | escent | | Radiological/ Imaging | Ш | Newborn/ WellBaby | | Surgery |
| | Psychiatric Nursing | | Pharmaceutical | | Emergency | | Central Plant |
| | Obstetrical | | | | | | |
| | Ante/Postprtum | | Dietetic | Ш | Nuclear Medicine | Ш | Support Services |
| | Intermediate | | | | | | |
| _ | Care | | Administration | | | | |
| | Skilled Nursing | | | | | | |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:13 of 44

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 | Building Name: | Main Hospital To | wer - Area A | | | | |
|------------------|------------------------------|----------------|--------------------------|------------------------------|----------------|-------------------|--|--|
| Type of Service | Type of Service Provided | | | | | | | |
| | | | Surgical | Obstetrical Cesarean/Deli | | bilitation apy | | |
| | Nursing | | Anesthesia | | _ | | | |
| | IntensiveCare | | _ | Obstetrical Recovery | Rena | l Dialysis | | |
| П | Pediatric/Ado | . | Clinical Lab | □ Nautaur/ | Outpa Surge | | | |
| | | | Radiological/ Imaging | Newborn/ WellBaby | Surge | zi y | | |
| Ш | Psychiatric Nursing | | Pharmaceutic | al Emergency | Centr | al Plant | | |
| | Obstetrical Ante/Postprtu | ım | _ | Nuclear | Suppo | ort | | |
| | Ante/Fostphu | "" [| Dietetic | Medicine | Servio | ces | | |
| | Intermediate Care | | ¬ | | | | | |
| | - 5 5 | | Administration | 1 | | | | |
| | Skilled Nursin | ng | | | | | | |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:14 of 44

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

| Building Number: | 05 | Building Name: | Main Hospital Tower | - Area C | |
|------------------|------------------------------|------------------|--------------------------|-------------------------------|------------------------|
| Type of Servic | e Provided | _ | | | _ |
| | | | Surgical | Obstetrical Cesarean/Deliv | Rehabilitation Therapy |
| | Nursing | | X Anesthesia | | |
| X | IntensiveCare | , | | Obstetrical Recovery | Renal Dialysis |
| X | Pediatric/Ado escent | , ^L | Clinical Lab | Newborn/ | Outpatient Surgery |
| | Psychiatric | | Radiological/ Imaging | WellBaby | 3 7 |
| Ш | Nursing | | X Pharmaceutical | Emergency | Central Plant |
| | Obstetrical Ante/Postprtu | m _ | _ | Nuclear | X Support |
| | · | | X Dietetic | Medicine | Services |
| | Intermediate Care | | X Administration | | |
| | Skilled Nursin | ıg | | | |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:15 of 44

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 Na | me: Original Plant | | | |
|------------------|-----------------------------|---------------|--------------------------|----------|-------------------------------|---------------------------|
| Configuration : | Retrofit Non-Confo | orming buildi | ng to SPC 5 and NPC | 4 or NPC | 5 | |
| Type of Service | e Provided | | | | | |
| N | ursing | | Surgical | | Obstetrical Cesarean/Deliv | Rehabilitation Therapy |
| In | tensiveCare | | Anesthesia | | Obstetrical | Renal Dialysis |
| l I | ediatric/Adol scent | | Clinical Lab | | Recovery | |
| | sychiatric ursing | | Radiological/ Imaging | | Newborn/ WellBaby | Outpatient Surgery |
| | bstetrical nte/Postprtum | | Pharmaceutical | | _ | 0 |
| | termediate | | Dietetic | | Emergency | Central Plant |
| | are | | | | Nuclear Medicine | Support Services |
| Sk | killed Nursing | | Administration | | | 23000 |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:16 of 44

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: Co-Generation | n Plant | | | |
|------------------|-----------------------------|---------------|--------------------------|---------|-------------------------------|---|---------------------------|
| Configuration : | Retrofit Conformin | g building to | NPC 4 or NPC 5 | | | | |
| Type of Servic | e Provided | | | | | | |
| N | ursing | | Surgical | | Obstetrical Cesarean/Deliv | | Rehabilitation Therapy |
| In | ntensiveCare | | Anesthesia | | Obstetrical | | Renal Dialysis |
| | ediatric/Adol scent | | Clinical Lab | | Recovery | | |
| | sychiatric ursing | | Radiological/ Imaging | | Newborn/ WellBaby | | Outpatient Surgery |
| | bstetrical nte/Postprtum | | Pharmaceutical | | Emergency | | Central Plant |
| | ntermediate | | Dietetic | | Lineigoney | _ | Contract tank |
| | are killed Nursing | | Administration | | Nuclear Medicine | | Support Services |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:17 of 44

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: 02A | Building Na | me: Chiller Facility | | | |
|-----------------|-------------------------------|---------------|--------------------------|---|-------------------------------|---------------------------|
| Configuration : | Retrofit Conformin | g building to | NPC 4 or NPC 5 | | | |
| Type of Serv | rice 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 | П | Emergency | Central Plant |
| | Intermediate Care | | Dietetic | | | |
| | Skilled Nursing | | Administration | | Nuclear Medicine | Support Services |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:18 of 44

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 Nar | me: Main Hospital To | ower - Area | а А | |
|------------------|-----------------------------|--------------|--------------------------|-------------|-------------------------------|---------------------------|
| Configuration : | Replace with new | SPC 5 and N | IPC 4 or NPC 5 buildir | ng | | |
| Type of Service | Provided | | | | | |
| Nu | ırsing | | Surgical | | Obstetrical Cesarean/Deliv | Rehabilitation Therapy |
| Int | ensiveCare | | Anesthesia | | Obstetrical | Renal Dialysis |
| I I | ediatric/Adol cent | | Clinical Lab | | Recovery | |
| | ychiatric ırsing | | Radiological/ Imaging | | Newborn/ WellBaby | Outpatient Surgery |
| | ostetrical ite/Postprtum | | Pharmaceutical | | Emergency | Central Plant |
| | ermediate | | Dietetic | | Linergency | Ochilai Fiant |
| ☐ Ca | illed Nursing | | Administration | | Nuclear Medicine | Support Services |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:19 of 44

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 | 05 Building Name: Main Hospital Tower - Area C | | | | | | | | | |
|-----------------|-------------------------------|--|--------------------------|----|-------------------------------|---|---------------------------|--|--|--|--|
| Configuration : | Replace with new | SPC 5 and N | NPC 4 or NPC 5 buildi | ng | | | | | | | |
| Type of Servi | ce Provided | | | | | | | | | | |
| | Nursing | X | Surgical | | Obstetrical Cesarean/Deliv | | Rehabilitation Therapy | | | | |
| X I | ntensiveCare | X | Anesthesia | | Obstetrical | | Renal Dialysis | | | | |
| l I | Pediatric/Adol escent | | Clinical Lab | | Recovery | | | | | | |
| | Psychiatric Nursing | X | Radiological/ Imaging | | Newborn/ WellBaby | | Outpatient Surgery | | | | |
| | Obstetrical Ante/Postprtum | X | Pharmaceutical | | Emergency | | Central Plant | | | | |
| | ntermediate | X | Dietetic | | | | | | | | |
| | Care Skilled Nursing | X | Administration | | Nuclear Medicine | X | Support Services | | | | |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:20 of 44

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: | Number: 06 Building Name: Northeast Wing - Schuman Pavilion | | | | | | | | | |
|------------------|---|---------------|--------------------------|---|-------------------------------|---|---------------------------|--|--|--|
| 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 | | | |
| l I | ediatric/Adol scent | | Clinical Lab | | Recovery | | | | | |
| | sychiatric ursing | X | Radiological/ Imaging | | Newborn/ WellBaby | X | Outpatient Surgery | | | |
| | bstetrical nte/Postprtum | | Pharmaceutical | | Emergency | | Central Plant | | | |
| | ntermediate | | Dietetic | _ | Emergency | _ | OSMALI IAM | | | |
| | are killed Nursing | | Administration | | Nuclear Medicine | | Support Services | | | |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:21 of 44

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: | 07A | Building Na | me: South Wing Pha | se I | | | |
|------------------|-------------------------------|---------------|--------------------------|------|-------------------------------|---|---------------------------|
| Configuration . | Retrofit Conformin | g building to | NPC 4 or NPC 5 | | | | |
| Type of Service | e Provided | | | | | | |
| | lursing | X | Surgical | | Obstetrical Cesarean/Deliv | | Rehabilitation Therapy |
| X Ir | ntensiveCare | X | Anesthesia | X | Obstetrical | | Renal Dialysis |
| | Pediatric/Adol scent | X | Clinical Lab | | Recovery | | |
| | Psychiatric Jursing | X | Radiological/ Imaging | X | Newborn/ WellBaby | | Outpatient Surgery |
| 1 1 - | Obstetrical Inte/Postprtum | X | Pharmaceutical | | Emergency | | Central Plant |
| | ntermediate Care | X | Dietetic | | | | |
| | Skilled Nursing | X | Administration | | Nuclear Medicine | X | Support Services |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:22 of 44

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 | : 07B | Building Name: South Wing Phase I | | | | | | | | | |
|-----------------|-------------------------------|-----------------------------------|--------------------------|---|-------------------------------|---|---------------------------|--|--|--|--|
| Configuration . | Retrofit Conformin | g building to | NPC 4 or NPC 5 | | | | | | | | |
| Type of Servi | ce Provided | | | | | | | | | | |
| | Nursing | X | Surgical | | Obstetrical Cesarean/Deliv | | Rehabilitation Therapy | | | | |
| X | IntensiveCare | X | Anesthesia | X | Obstetrical | | Renal Dialysis | | | | |
| | Pediatric/Adol escent | X | Clinical Lab | | Recovery | | | | | | |
| | Psychiatric Nursing | X | Radiological/ Imaging | X | Newborn/ WellBaby | | Outpatient Surgery | | | | |
| 1 1 | Obstetrical Ante/Postprtum | X | Pharmaceutical | | Emergency | | Central Plant | | | | |
| | Intermediate | X | Dietetic | _ | Linergency | _ | Contain land | | | | |
| | Care Skilled Nursing | X | Administration | | Nuclear Medicine | X | Support Services | | | | |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:23 of 44

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: | 07C Building Name: South Wing Phase I | | | | | | | | | |
|------------------|---------------------------------------|---------------|--------------------------|---|-------------------------------|----------|---------------------------|--|--|--|
| Configuration . | Retrofit Conformin | g building to | NPC 4 or NPC 5 | | | | | | | |
| Type of Service | Provided | | | | | | | | | |
| ☐ Nu | ursing | X | Surgical | | Obstetrical Cesarean/Deliv | | Rehabilitation Therapy | | | |
| X Int | tensiveCare | X | Anesthesia | X | Obstetrical | | Renal Dialysis | | | |
| 1 1 | ediatric/Adol cent | X | Clinical Lab | | Recovery | | | | | |
| | sychiatric ursing | X | Radiological/ Imaging | X | Newborn/ WellBaby | | Outpatient Surgery | | | |
| | ostetrical nte/Postprtum | X | Pharmaceutical | | Emergency | | Central Plant | | | |
| | termediate | X | Dietetic | | Lineigeney | <u> </u> | OSHITATI TAIR | | | |
| | are killed Nursing | X | Administration | | Nuclear Medicine | X | Support Services | | | |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:24 of 44

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

| Building Number | : 08 | Building Na | me: South Wing Pha | ase 2 | | | |
|-----------------|-------------------------------|---------------|--------------------------|-------|-------------------------------|--------|---------------------------|
| Configuration : | Retrofit Conformin | g building to | NPC 4 or NPC 5 | | | | |
| Type of Servi | ce Provided | | | | | | |
| | Nursing | X | Surgical | | Obstetrical Cesarean/Deliv | | Rehabilitation Therapy |
| X | IntensiveCare | X | Anesthesia | X | Obstetrical | | Renal Dialysis |
| | Pediatric/Adol escent | X | Clinical Lab | | Recovery | | |
| | Psychiatric Nursing | X | Radiological/ Imaging | X | Newborn/ WellBaby | | Outpatient Surgery |
| 1, , 1 | Obstetrical Ante/Postprtum | X | Pharmaceutical | | Emergency | | Central Plant |
| | Intermediate Care | X | Dietetic | | Nuclear Medicine | X | Support |
| | Skilled Nursing | X | Administration | | | ۳ | Services |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:25 of 44

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: | 08A | Building Na | me: South Wing P | hase 2 | | | |
|------------------|-------------------------------|---------------|--------------------------|--------|-------------------------------|---|---------------------------|
| Configuration : | Retrofit Conformin | g building to | NPC 4 or NPC 5 | | | | |
| Type of Servic | e Provided | | | | | | |
| | lursing | X | Surgical | | Obstetrical Cesarean/Deliv | | Rehabilitation Therapy |
| X Ir | ntensiveCare | | Anesthesia | | Obstetrical | | Renal Dialysis |
| | rediatric/Adol scent | X | Clinical Lab | | Recovery | | |
| | sychiatric Iursing | | Radiological/ Imaging | X | Newborn/ WellBaby | | Outpatient Surgery |
| 1/1 | Obstetrical .nte/Postprtum | | Pharmaceutical | | Emergency | | Central Plant |
| | ntermediate | | Dietetic | | Emergency | | Ochtiai Flant |
| <u> </u> | Care | | | | Nuclear Medicine | X | Support Services |
| S | killed Nursing | X | Administration | | | | |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:26 of 44

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: 09 | Building Nai | me: Emergency Room | Expans | ion - 1976 | |
|-----------------|-------------------------------|---------------|--------------------------|--------|-------------------------------|---------------------------|
| Configuration : | Retrofit Conformin | g building to | NPC 4 or NPC 5 | | | |
| Type of Ser | vice Provided | | | | | |
| | Nursing | | Surgical | | Obstetrical Cesarean/Deliv | Rehabilitation Therapy |
| | IntensiveCare | | Anesthesia | | Obstetrical | Renal Dialysis |
| | Pediatric/Adol escent | | Clinical Lab | | Recovery | |
| | Psychiatric Nursing | | Radiological/ Imaging | | Newborn/ WellBaby | Outpatient Surgery |
| | Obstetrical Ante/Postprtum | | Pharmaceutical | X | Emergency | Central Plant |
| | Intermediate Care | | Dietetic | | Nuclear Medicine | Support |
| | Skilled Nursing | | Administration | | Nuclear Medicine | Support Services |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:27 of 44

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 | Building Number: 02 Building Name: Co-Generation Plant | | | | | | |
|-----------------------------|--|---|--------------------------|----------------------------|------------------------|--|--|
| Type of Service Prov | <u>/ided</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 | Central Plant | | |
| Intermediate Care | Inpatient Beds | 0 | Dietetic | Nuclear Medicine | Support Services | | |
| Skilled Nursing | Inpatient Beds | 0 | Administration | | | | |
| Total Beds this Building | | 0 | | | | | |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:28 of 44

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 | Building Number: 02A Building Name: Chiller Facility | | | | | | | |
|-----------------------|--|---|-----|--------------------------|----------------------------|------------------------|--|--|
| Type of Servic | <u>e Provided</u> | | | | | | | |
| Nursing | Inpatient Beds | 0 | | Surgical | Obstetrical Cesarean/Deliv | Rehabilitation Therapy | | |
| Intensive(| Care Inpatient Beds | 0 | | Anesthesia | | | | |
| Pediatric// | Adol Inpatient Beds | 0 | | Clinical Lab | Obstetrical Recovery | Renal Dialysis | | |
| Psychiatri Nursing | c Inpatient Beds | 0 | | Radiological/ Imaging | Newborn/ WellBaby | Outpatient Surgery | | |
| Obstetrica Ante/Post | • | 0 | _ F | Pharmaceutical | Emergency | Central Plant | | |
| Intermedia Care | ate Inpatient Beds | 0 | | Dietetic | Nuclear Medicine | Support Services | | |
| Skilled Nu | ırsing Inpatient Beds | 0 | | Administration | | | | |
| Total Bed Building | s this | 0 | | | | | | |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:29 of 44

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 | | | | | | | |
|--------|-------------------------------|-------------------|---|---|--------------------------|----------------------------|-------------------------|
| Тур | e 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 | X | Radiological/ Imaging | Newborn/ WellBaby | X Outpatient Surgery |
| | Obstetrical Ante/Postprtum | Inpatient Beds | 0 | | Pharmaceutical | Emergency | Central Plant |
| | Intermediate Care | Inpatient Beds | 0 | | Dietetic | Nuclear Medicine | Support Services |
| | Skilled Nursing | Inpatient Beds | 0 | | Administration | | |
| | Total Beds this Building | | 0 | | | | |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:30 of 44

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 | ing Number: 07A | | | | | | |
|--------|-------------------------------|-------------------|----|---|--------------------------|----------------------------|------------------------|
| Тур | e of Service Prov | <u>rided</u> | | | | | |
| | Nursing | Inpatient Beds | 0 | X | Surgical | Obstetrical Cesarean/Deliv | Rehabilitation Therapy |
| X | IntensiveCare | Inpatient Beds | 40 | X | Anesthesia | | |
| | Pediatric/Adol escent | Inpatient Beds | 0 | X | Clinical Lab | X Obstetrical Recovery | Renal Dialysis |
| | Psychiatric Nursing | Inpatient Beds | 0 | X | Radiological/ Imaging | X Newborn/ WellBaby | 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 | | 40 | | | | |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:31 of 44

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: 07B | | | | | | |
|-------|-------------------------------|-------------------|----|---|--------------------------|----------------------------|------------------------|
| Тур | e of Service Prov | <u>rided</u> | | | | | |
| | Nursing | Inpatient Beds | 0 | X | Surgical | Obstetrical Cesarean/Deliv | Rehabilitation Therapy |
| X | IntensiveCare | Inpatient Beds | 41 | X | Anesthesia | | |
| | Pediatric/Adol escent | Inpatient Beds | 0 | X | Clinical Lab | X Obstetrical Recovery | Renal Dialysis |
| | Psychiatric Nursing | Inpatient Beds | 0 | X | Radiological/ Imaging | X Newborn/ WellBaby | 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 | | 41 | | | | |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:32 of 44

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: 070 | | | | | | |
|-------|-------------------------------|-------------------|----|---|--------------------------|----------------------------|------------------------|
| Тур | e of Service Prov | <u>rided</u> | | | | | |
| | Nursing | Inpatient Beds | 0 | X | Surgical | Obstetrical Cesarean/Deliv | Rehabilitation Therapy |
| X | IntensiveCare | Inpatient Beds | 41 | X | Anesthesia | | |
| | Pediatric/Adol escent | Inpatient Beds | 0 | X | Clinical Lab | X Obstetrical Recovery | Renal Dialysis |
| | Psychiatric Nursing | Inpatient Beds | 0 | X | Radiological/ Imaging | X Newborn/ WellBaby | 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 | | 41 | | | | |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:33 of 44

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: 08 | | | | | | |
|--------|-------------------------------|-------------------|----|---|--------------------------|----------------------------|------------------------|
| Тур | e of Service Prov | <u>rided</u> | | | | | |
| | Nursing | Inpatient Beds | 0 | X | Surgical | Obstetrical Cesarean/Deliv | Rehabilitation Therapy |
| X | IntensiveCare | Inpatient Beds | 39 | X | Anesthesia | | |
| | Pediatric/Adol escent | Inpatient Beds | 0 | X | Clinical Lab | X Obstetrical Recovery | Renal Dialysis |
| | Psychiatric Nursing | Inpatient Beds | 0 | X | Radiological/ Imaging | X Newborn/ WellBaby | Outpatient Surgery |
| X | Obstetrical Ante/Postprtum | Inpatient Beds | 18 | 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 | | 57 | | | | |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:34 of 44

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 | ing Number: 08A | | | | | | |
|--------|-------------------------------|-------------------|----|---|--------------------------|----------------------------|------------------------|
| Тур | e of Service Prov | <u>rided</u> | | | | | |
| | Nursing | Inpatient Beds | 0 | X | Surgical | Obstetrical Cesarean/Deliv | Rehabilitation Therapy |
| X | IntensiveCare | Inpatient Beds | 39 | | Anesthesia | | |
| | Pediatric/Adol escent | Inpatient Beds | 0 | X | Clinical Lab | Obstetrical Recovery | Renal Dialysis |
| | Psychiatric Nursing | Inpatient Beds | 0 | | Radiological/ Imaging | X Newborn/ WellBaby | Outpatient Surgery |
| X | Obstetrical Ante/Postprtum | Inpatient Beds | 18 | | 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 | | 57 | | | | |

Report Year: 2011 10677 Loma Linda University Medical Center Loma Linda Page:35 of 44

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: 09 | | | | | |
|--------|-------------------------------|-------------------|---|--------------------------|-------------------------------|------------------------|
| Тур | e of Service Prov | <u>ided</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 | X Emergency | Central Plant |
| | Intermediate Care | Inpatient Beds | 0 | Dietetic | Nuclear Medicine | Support Services |
| | Skilled Nursing | Inpatient Beds | 0 | Administration | | |
| | Total Beds this Building | | 0 | | | |

Report Status: Data Last Update: 01/10/2012 Submission Date: 01/29/2012 Print Date: 2/1/2012 3:16 PM

2011

10677

Loma Linda University Medical Center

Loma Linda

Page:36 of 44

| Building Number: | 02 Build | ing Name: Co-G | Generation 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 | ewborn / GYN) | Burn | | Skilled Nursing | | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 | 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 | |

2011

10677

Loma Linda University Medical Center

Loma Linda

Page:37 of 44

| Building Number: | D2A Build | ling Name: Chill | er Facility | | | |
|-------------------------|---------------------|-------------------------------|---------------------|---|--|--|
| Medical / Surgical (Inc | clude 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 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 | 0 | 0 | |

2011

10677

Loma Linda University Medical Center

Loma Linda

Page:38 of 44

| Building Number: | 06 Build | ling Name: Nort | heast Wing - Schuman P | avilion | | |
|-----------------------|---------------------|-------------------------------|------------------------|---|--|--|
| Medical / Surgical (I | nclude GYN) | Acute Respiratory | Care | Acute Psychiatric | Acute Psychiatric | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 | Inpatient 0 Days | |
| Perinatal (excluse N | ewborn / 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 | 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 | 0 | 0 | |

2011

10677

Loma Linda University Medical Center

Loma Linda

Page:39 of 44

| Building Number: | 7A Build | ing Name: Sout | h Wing Phase I | | |
|-----------------------------------|------------------------|-------------------------------|---------------------|---|--|
| 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 | Inpatient 0 Days |
| Pediatric | | intensive Care New Nursery | vborn | Intermediate Card | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 24 Bed | Inpatient 8076 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Intensive Care | | Rehabilitation Center | | Int. Care / develop Disabled | nent |
| Inpatient 16 Bed | Inpatient 5562 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 | 40 | 40 |

2011

10677

Loma Linda University Medical Center

Loma Linda

Page:40 of 44

| Building Number: | 7B Build | ing Name: Sou | th Wing Phase I | | |
|-----------------------------------|---------------------|------------------------------|------------------------|---|--|
| 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 Ne Nursery | wborn | Intermediate Card | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 24 Bed | Inpatient 8076 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Intensive Care | | Rehabilitation Center | | Int. Care / develop Disabled | ment |
| Inpatient 17 Bed | Inpatient 5618 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 | 41 | 41 |

2011

10677

Loma Linda University Medical Center

Loma Linda

Page:41 of 44

| Building Number: | 7C Build | ing Name: Sou | th Wing Phase I | | |
|-----------------------------------|---------------------|------------------------------|---------------------|---|--|
| 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 Ne Nursery | wborn | Intermediate Card | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 24 Bed | Inpatient 8076 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Intensive Care | | Rehabilitation Center | | Int. Care / develop Disabled | ment |
| Inpatient 17 Bed | Inpatient 5674 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 | 41 | 41 |

2011

10677

Loma Linda University Medical Center

Loma Linda

Page:42 of 44

| Building Number: | 8 Build | ing Name: Sou | th Wing Phase 2 | | |
|-----------------------------------|-------------------------|------------------------------|----------------------------------|---|--|
| Medical / Surgical (Include 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 Newborn / GYN) | | Burn | | Skilled Nursing | |
| Inpatient 13 Bed | Inpatient 2725 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Pediatric | | intensive Care Ne Nursery | wborn | Intermediate Card | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 6 Bed | Inpatient 1846 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Intensive Care | | Rehabilitation Center | Int. Care / development Disabled | | ment |
| Inpatient 33 Bed | Inpatient 10829 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 | Inpatient 0 Days | 52 | 33 |

2011

10677

Loma Linda University Medical Center

Loma Linda

Page:43 of 44

| Building Number: | 08A Build | ing Name: Sout | h Wing Phase 2 | | |
|-----------------------------------|-------------------------|-------------------------------|---------------------|---|--|
| 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 13 Bed | Inpatient 2726 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Pediatric | | intensive Care Nev Nursery | vborn | Intermediate Card | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 6 Bed | Inpatient 1847 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Intensive Care | | Rehabilitation Center | | Int. Care / development Disabled | |
| Inpatient 33 Bed | Inpatient 10830 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 | 52 | 33 |

2011

10677

Loma Linda University Medical Center

Loma Linda

Page:44 of 44

| Building Number: | 9 Building Name: | | Emergency Room Expansion - 1976 | | |
|-----------------------------------|---------------------|------------------------------|---|---|--|
| 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 Ne Nursery | wborn | Intermediate Card | |
| Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days | Inpatient 0 Bed | Inpatient 0 Days |
| Intensive Care | | Rehabilitation Center | ion Int. Care / development 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 |