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

Facility Number:	10919	
Facility Name:	O'Conno	r Hospital - San Jose
Address:	2105 Fo	rest Avenue
City:	San Jose	
Hospital Owner/Lice	ensee:	Daughters of Charity Health System
Year of Rep	oorting:	2011
Contact 1 e-mail Ac	ddress:	
Contact 2 e-mail Ac	ddress:	
Contact 3 e-mail Ad	dress::	
Name of Sub	omitter:	Kathy Roth
Submission	n Date:	1/29/2012 3:00:00 PM

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For buildings which are planned for retrofit or replacement the report shall identify: Whether the hospital owner intends to retrofit or replace the building to SPC 2 or SPC 5 per section 130061(c)(1)(A). The deadline, as described in Section 130060 or 130061.5, for retrofit or replacement of the bulding that the hospital owner intends to meet, and the applicable extension for which the hospital owner has been approved per Section 130061(c)(1)(B)

Bldg. No.	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date
01	1953 Building	2105 Forest Avenue	Retrofit	SPC2	01/01/2013	12/31/2012
02	1953 Boiler House /	2105 Forest Avenue	Retrofit	SPC2	01/01/2013	12/31/2012

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For each building which is planned for retrofitting or replacement, provide the project numbers, per Section 130061(c)(1)(C). The projected construction start date or dates and projected Completion date or dates per Section 130061(c)(1)(D) and the most recent project status and approvals per Section 130061(c)(1)(E).

Building No: 01	1953 Building	Retrofit/Replacement Y Project:	es-Submitted
Facility Project Sub <u>Number Number Num</u>	Scope	Date Plan Approved Proj. Start Proj. Complete in Date Date Date	d Status CEQA Review
10919 IS110669	0 PPR UPGRADE OF 1953 BUILDING/MAIN BUILDING SEISMIC UPGRADE	04/11/2011 05/01/2012 12/31/2012	OPEN No
Building No: 02	1953 Boiler House / Laundry	Retrofit/Replacement Y	es-Submitted
Facility Project Sub Number Number Num	Scope	Date Plan Approved Proj. Start Proj. Complete in Date Date Date	d Status CEQA Review
10919 IS110665	0 PPR UGRADE OF 1953 CENTRAL PLANT	04/11/2011 03/01/2012 12/31/2012	OPEN No
10919 IS110665	0 PPR UGRADE OF 1953 CENTRAL PLANT	04/11/2011 09/01/2012 04/01/2013	OPEN No

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

Building Number: 01 Building Name: 1953 Building				
Type of Service Prov	<u>/ided</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	X 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	Buildi	ng Name: 1953 Boiler House / Laund	ry	
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	Support Services Obstetrical Cesarean/Deliv	Outpatient Surgery
		Total Beds this Building	Cesaleall/Deliv	X 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: 1953	B Building			
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 / development Disabled	
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:	02	Building Name: 1953	B Boiler House / Laundry		
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	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	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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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	1953 Building	
02	1953 Boiler House / Laundry	
03	1969 Addition	
04	Replacement Facility	
05	Replacement Boiler House	
06	2005 Emergency Expansion	

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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	2005 Emergency Expansion (HS-013393-43) completed	

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

Building Number:	01 Buildin	g Name: 1953 Building						
Type of Service Provided								
		Surgical	Obstetrical Cesarean/Deliv	Rehabilitatior Therapy	n			
	Nursing	Anesthesia						
	IntensiveCare		Obstetrical Recovery	Renal Dialysi	IS			
	Pediatric/Adol escent	Clinical Lab	Newborn/	Outpatient Surgery				
П	Psychiatric	Radiological/ Imaging	WellBaby					
	Nursing	Pharmaceutical	Emergency	Central Plant	t			
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	X Support Services				
	Intermediate Care	X Administration						
	Skilled Nursing							

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

Building Number:	02	Building Name:	1953 Boiler House /	Laundry		
Type of Service Provided						
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	Nursing		Anesthesia			
	IntensiveCare			Obstetrical Recovery		Renal Dialysis
П	Pediatric/Ado	, [Clinical Lab			Outpatient
			Radiological/ Imaging	Newborn/ WellBaby		Surgery
	Psychiatric Nursing		Pharmaceutical	Emergency	X	Central Plant
	Obstetrical Ante/Postprtu			Nuclear		Support
	Ante/i ostpitu	"" [Dietetic	Medicine		Services
	Intermediate Care		A desirate desagner			
			Administration			
	Skilled Nursin	g l				

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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: 1953 Building									
Configuration .	Retrofit Non-Confo	orming buildi	ng to SPC 2 and NPC 3	and rem	ove from service by 2030					
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		Central Plant			
	ntermediate		Dietetic		Linergency		Cential Flant			
	care	x	Administration		Nuclear Medicine	X	Support Services			
s	killed Nursing		, tall miletration							

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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: 02	Building Na	me: 1953 Boiler House	/ Laund	dry		
Configuration :	Retrofit Non-Confo	rming buildi	ng to SPC 2 and NPC 3	and rem	ove from service by 2030		
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		Emergency	X	Central Plant
	Intermediate		Dietetic				23
	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:	03	Building Na	me: 1969 Addition				
Configuration :	Replace with new	SPC 5 and N	NPC 4 or NPC 5 buildin	ıg			
Type of Service	e Provided						
	lursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Ir	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol scent		Clinical Lab		Recovery		
	Psychiatric Jursing	X	Radiological/ Imaging		Newborn/ WellBaby	X	Outpatient Surgery
	Obstetrical Inte/Postprtum		Pharmaceutical	X	Emergency		Central Plant
	ntermediate		Dietetic		Linergency	Ш	Ochilai Fiant
	Care	X	Administration	X	Nuclear Medicine	X	Support Services
S	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:	04	Building Na	me: Replacement	Facility			
Configuration :	Retrofit Conformin	g building to	NPC 4 or NPC 5				
Type of Service	e Provided						
X	lursing	X	Surgical	X	Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
X Ir	ntensiveCare	X	Anesthesia	X	Obstetrical	X	Renal Dialysis
	ediatric/Adol scent	X	Clinical Lab		Recovery		
	Psychiatric Jursing	X	Radiological/ Imaging	X	Newborn/ WellBaby	X	Outpatient Surgery
1, 1	Dbstetrical Inte/Postprtum	X	Pharmaceutical		Emergency		Central Plant
	ntermediate	X	Dietetic		Linergency		Ochiliai Fiant
	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:	05	05 Building Name: Replacement Boiler House									
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				
	obstetrical nte/Postprtum		Pharmaceutical		Emergency	$\overline{\mathbf{x}}$	Central Plant				
	ntermediate		Dietetic	_		<u> </u>	ooa.r.a				
	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 Numb	er: 06	Building Na	me: 2005 Emergency	Expansi	on		
Configuratior :	n N/A						
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		Dietetic				
	Care Skilled 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)

Buildi	ng Number: 03										
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	X	Radiological/ Imaging	Newborn/ WellBaby	X Outpatient Surgery				
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	X Emergency	Central Plant				
	Intermediate Care	Inpatient Beds	0		Dietetic	X 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)

Buildi	I										
Туре	Type of Service Provided										
X	Nursing	Inpatient Beds	210	X	Surgical	X Obstetrical Cesarean/Deliv	X Rehabilitation Therapy				
X	IntensiveCare	Inpatient Beds	32	X	Anesthesia						
X	Pediatric/Adol escent	Inpatient Beds	27	X	Clinical Lab	X Obstetrical Recovery	X Renal Dialysis				
	Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	X Newborn/ WellBaby	X Outpatient Surgery				
X	Obstetrical Ante/Postprtum	Inpatient Beds	65	X	Pharmaceutical	Emergency	Central Plant				
	Intermediate Care	Inpatient Beds	0	X	Dietetic	Nuclear Medicine	X Support Services				
X	Skilled Nursing	Inpatient Beds	24	X	Administration						
	Total Beds this Building		358								

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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: 05 Building Name: Replacement Boiler House								
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	Ц	Dietetic	Nuclear Medicine	Support Services	
	Skilled Nursing	Inpatient Beds	0		Administration			
	Total Beds this Building		0					

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

Building Number: 06 Building Name: 2005 Emergency Expansion								
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	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**: 01/12/2012 **Submission Date**: 01/29/2012 **Print Date**: 1/30/2012 12:45 PM

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Building Number:	03 Buil	ding Name: 1969	9 Addition			
Medical / Surgical (In	nclude 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 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 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 / developm Disabled	nent	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		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:	4 Build	ing Name: Rep	placement Facility		
Medical / Surgical (Inc	lude GYN)	Acute Respiratory Care		Acute Psychiatric	
Inpatient 210 Bed	Inpatient 30060 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse Nev	vborn / GYN)	Burn		Skilled Nursing	
Inpatient 65 Bed	Inpatient 8492 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 24 Bed	Inpatient 5896 Days
Pediatric		intensive Care Ne Nursery	ewborn	Intermediate Card	
Inpatient 27 Bed	Inpatient 1468 Days	Inpatient 10 Bed	Inpatient 2026 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / develop	ment
Inpatient 14 Bed	Inpatient 4270 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 8 Bed	Inpatient 399 Days	Inpatient 0	Inpatient 0 Days	358	358

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Building Number:	05 Build	ling Name: Rep	placement Boiler House			
Medical / Surgical (I	nclude GYN)	Acute Respiratory	y Care	Acute Psychiatric		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Perinatal (excluse N	ewborn / GYN)	Burn		Skilled Nursing		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Pediatric		intensive Care Ne Nursery	wborn	Intermediate Card		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care		Rehabilitation Center		Int. Care / develop Disabled	ment	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0	

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Building Number:	06 Build	ling Name: 2005	Emergency Expansion			
Medical / Surgical (I	nclude 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 N	ewborn / GYN)	Burn		Skilled Nursing		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Pediatric		intensive Care 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	