Report Year:	201
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11760

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

Facility Number:	11760
Facility Name:	Kaiser Foundation Hospital - Sunset
Address:	4867 Sunset Blvd.
City:	Los Angeles
Hospital Owner/Lice	nsee: Kaiser Foundation Hospital - Sunset 930000077
Year of Rep	rting: 2011
Contact 1 e-mail Ad	ress:
Contact 2 e-mail Ad	ress:
Contact 3 e-mail Ado	ess::
Name of Sub	nitter: James Fung
Submission	Date: 1/29/2012 3:00:00 PM

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For buildings which are planned for retrofit or replacement the report shall identify: Whether the hospital owner intends to retrofit or replace the building to SPC 2 or SPC 5 per section 130061(c)(1)(A). The deadline, as described in Section 130060 or 130061.5, for retrofit or replacement of the building 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	4867 Sunset Central Wing	4867 Sunset Blvd.	Replace	SPC5	01/01/2013	08/03/2009
02	1510 Edgemont	4867 Sunset Blvd.	Replace	SPC5	01/01/2013	08/03/2009
04	4867 Sunset East Wing	4867 Sunset Blvd.	Replace	SPC5	01/01/2013	08/03/2009
05	4867 Sunset North Wing	4867 Sunset Blvd.	Replace	SPC5	01/01/2013	08/03/2009
07	NICU Building	4867 Sunset Blvd.	Replace	SPC5	01/01/2013	08/03/2009
08	Cardiac Catheterization Laboratory	4867 Sunset Blvd.	Replace	SPC5	01/01/2013	08/03/2009

Report Year: 201	11 11760 Kaiser Foundation Hospita	II - Sunset	Los Angeles	Page:3 of 39
projected construct	which is planned for retrofitting or replacement tion start date or dates and projected Complet approvals per Section 130061(c)(1)(E).	nt, provide the proje etion date or dates	ect numbers, per Section 1300 per Section 130061(c)(1)(D) a	061(c)(1)(C). The and the most recent
Building No: 01	4867 Sunset Central Wing		Retrofit/Replacement Project:	Yes-Submitted
Facility Project Sub Number Number Num	Scope		proved Proj. Start Proj. Comp ate Date Date	
1760 HL000492	0 A8525 REBUILD LAMC SUNSET	05/04/2000 08	/25/2003 10/20/2003 08/03/20	009 OPEN No
Building No: 02	1510 Edgemont		Retrofit/Replacement Project:	Yes-Submitted
Facility Project Sub Number Number Num	Scope	Date Plan App in Date	•	
1760 HL000492	0 A8525 REBUILD LAMC SUNSET	05/04/2000 08	25/2003 10/20/2003 08/03/20	009 OPEN No
Building No: 04	4867 Sunset East Wing		Retrofit/Replacement Project:	Yes-Submitted
Facility Project Sub Number Number Num	Scope	Date Plan App in Date	•	
1760 HL000492	0 A8525 REBUILD LAMC SUNSET	05/04/2000 08	/25/2003 10/20/2003 08/03/20	009 OPEN No
Building No: 05	4867 Sunset North Wing		Retrofit/Replacement Project:	Yes-Submitted
Facility Project Sub Number Number Num	Scope	Date Plan App in Date	•	
1760 HL000492	0 A8525 REBUILD LAMC SUNSET	05/04/2000 08	6/25/2003 10/20/2003 08/03/20	009 OPEN No

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Building No: 07	NICU Building		Retrofit/Replacement Project:	Yes-Submitted
Facility Project Sub <u>Number Number Num</u>	Scope	Date Plan / in	Approved Proj. Start Proj. Comp Date Date Date	
11760 HL000492	0 A8525 REBUILD LAMC SUNSET	05/04/2000	08/25/2003 10/20/2003 08/03/20	009 OPEN No
Building No: 08	Cardiac Catheterization Laboratory		Retrofit/Replacement Project:	Yes-Submitted
Facility Project Sub <u>Number Number Num</u>	Scope	Date Plan / in	Approved Proj. Start Proj. Comp Date Date Date	
11700		0= 10 4 10 0 0 0		
11760 HL000492	0 A8525 REBUILD LAMC SUNSET	05/04/2000	08/25/2003 10/20/2003 08/03/2	009 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:** 4867 Sunset Central Wing Type of Service Provided Surgical **Obstetrical** Inpatient Inpatient 0 Nursing 0 Recovery Days Beds Newborn/ IntensiveCare Inpatient Days Inpatient 0 0 Anesthesia WellBaby Beds Emergency **Clinical Lab** Inpatient Days Inpatient 0 Pediatric/Adol 0 escent Beds Nuclear Radiological/ Medicine Imaging Psychiatric Inpatient Days 0 Inpatient 0 Nursing Beds Pharmaceutical Rehabilitation Obstetrical Inpatient **Inpatient Days** 0 0 Dietetic Therapy Ante/Postprtum Beds **Renal Dialysis** Administration Inpatient **Inpatient Days** 0 Intermediate 0 Care Beds Support Outpatient Services Surgery **Inpatient Days** Skilled Nursing Inpatient 0 0 Beds Obstetrical Total Beds this 0 Cesarean/Deliv **Central Plant** Building

Report Year:	
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Building Number: 02	Buildir	ng Name: 1510 Edgemont		
Type of Service Prov	rided			
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 Obstetrical Cesarean/Deliv	Outpatient Surgery
		Building		Central Plant

Report Year:	
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Building Number: 04	Buildi	ng Name: 4867 Sunset East Wing		
Type of Service Prov	vided			
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	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services	U Outpatient Surgery
		Total Beds this 0 Building	Cesarean/Deliv	Central Plant

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Building Number: 05 Building Name: 4867 Sunset North Wing					
Type of Service Prov	rided				
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	Rehabilitation Therapy	
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis	
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services Obstetrical Cesarean/Deliv	Outpatient Surgery	
		Building		Central Plant	

Report	Year:	
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Building Number: 07 Building Name: NICU Building				
Type of Service Prov	vided			
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	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services Obstetrical Cesarean/Deliv	Outpatient Surgery
		Building		Central Plant

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Building Number: 08	Buildi	ing Name: Cardiac Catheterization La	boratory	
Type of Service Prov	/ided			
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	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0		Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0 Total Beds this 0	Support Services Obstetrical Cesarean/Deliv	Outpatient Surgery
		Building	Cesarean/Denv	Central Plant

Building Number:	01	Building Name: 48	367 Sunset Central Wing			
Medical / Surgical	(Include GYN)	Acute Respirato	ory Care	Acute Psychiatric	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Pediatric		intensive Care N Nursery	lewborn	Intermediate Card		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care		Rehabilitation Center		Int. Care / 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:	02	Building Name: 151	0 Edgemont		
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		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:	04 B	Building Name: 486	7 Sunset East Wing		
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 Net 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:	05	Building Name: 4867	7 Sunset North Wing		
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	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 / developi Disabled	nent
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0

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Building Number:	07	Building Name: NIC	CU Building		
Medical / Surgical	(Include GYN)	Acute Respirator	y 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	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 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:	08	Building Name:	ardiac Catheterization La	aboratory	
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	lewborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / 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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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	4867 Sunset Central Wing	
02	1510 Edgemont	
04	4867 Sunset East Wing	
05	4867 Sunset North Wing	
06	Centrex Building	
07	NICU Building	
08	Cardiac Catheterization Laboratory	
09	LAMC Hospital - Phase I	
10	Central Utility Plant - 1550 Edgemo	

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Submission Date: 01/29/2012

Print Date: 1/30/2012 12:46 PM

Report Status: Data Last Update: 12/14/2011

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	g Name: 48	67 Sunset Central V	Ving			
Type of Service	Provided	. —		_		_	
			Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	Nursing		Anesthesia	_			
	IntensiveCare				Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab				Outpatient
	Psychiatric		Radiological/ Imaging		Newborn/ WellBaby		Surgery
	Nursing		Pharmaceutical		Emergency		Central Plant
	Obstetrical Ante/Postprtum		Dietetic		Nuclear Medicine		Support Services
	Intermediate Care		Administration				
	Skilled Nursing						

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Los Angeles

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:	15	10 Edgemont		
Type of Servic	e Provided	[Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	Nursing IntensiveCare	, ,		Anesthesia	Obstetrical Recovery	Renal Dialysis
	Pediatric/Adol escent			Clinical Lab Radiological/	Newborn/ WellBaby	Outpatient Surgery
	Psychiatric Nursing			Pharmaceutical	Emergency	Central Plant
	Obstetrical Ante/Postprtu	im [Dietetic	Nuclear Medicine	Support Services
	Intermediate Care			Administration		
	Skilled Nursin	ng				

Report Status: Data Last Update: 12/14/2011

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

Building Number:	04	Building Name:	486	67 Sunset East Wing		
Type of Servic	e Provided	[Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	Nursing IntensiveCare	, [[Anesthesia	Obstetrical Recovery	Renal Dialysis
	Pediatric/Ado escent	, [r		Clinical Lab Radiological/	Newborn/ WellBaby	Outpatient Surgery
	Psychiatric Nursing			Pharmaceutical	Emergency	Central Plant
	Obstetrical Ante/Postprtu	m [Dietetic	Nuclear Medicine	Support Services
	Intermediate Care			Administration		
	Skilled Nursin	ng				

Report Status: Data Last Update: 12/14/2011

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:	48	67 Sunset North Wing		
Type of Servic	e Provided	[Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	Nursing IntensiveCare	, [Anesthesia	Obstetrical Recovery	Renal Dialysis
	Pediatric/Adol escent			Clinical Lab Radiological/	Newborn/ WellBaby	Outpatient Surgery
	Psychiatric Nursing			Imaging Pharmaceutical	Emergency	Central Plant
	Obstetrical Ante/Postprtu	m [Dietetic	Nuclear Medicine	Support Services
	Intermediate Care			Administration		
	Skilled Nursin	ig I				

Report Status: Data Last Update: 12/14/2011

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:	07 E	Building Name:	NICU Building		
Type of Servic	e Provided		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	Nursing IntensiveCare		Anesthesia	Obstetrical Recovery	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab	Newborn/ WellBaby	Outpatient Surgery
	Psychiatric Nursing		Imaging Pharmaceutical	Emergency	Central Plant
	Obstetrical Ante/Postprtum		Dietetic	Nuclear Medicine	Support Services
	Intermediate Care		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:	08 Buildir	ng Name:	Ca	rdiac Catheterizatio	on Labora	tory	
Type of Service	e Provided	[Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	Nursing			Anesthesia		Obstetrical	Renal Dialysis
	Pediatric/Adol escent			Clinical Lab		Recovery	Outpatient Surgery
	Psychiatric Nursing			Radiological/ Imaging Pharmaceutical		WellBaby Emergency	Central Plant
	Obstetrical Ante/Postprtum			Dietetic		Nuclear Medicine	Support Services
	Intermediate Care			Administration			
	Skilled Nursing						

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Building Numbe	er: 01	Building Na	me: 4867 Sunset Cer	ntral Wing				
Configuration	Replace with new	SPC 5 and NPC 4 or NPC 5 building						
Type of Serv	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		Emergency		Central Plant	
	Intermediate		Dietetic		Linergeney	<u> </u>	Contrair faint	
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services	

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Building Numbe	er: 02	Building Na	me: 1510 Edgemont			
Configuration	Replace with new	SPC 5 and I	NPC 4 or NPC 5 buildin	g		
Type of Serv	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		Emergency	Central Plant
	Intermediate		Dietetic			
	Care Skilled Nursing		Administration		Nuclear Medicine	Support Services

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Building Numb	er: 04	Building Na	me: 4867 Sunset Eas	t Wing		
Configuration	Replace with new	SPC 5 and I	NPC 4 or NPC 5 buildin	g		
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		Emergency	Central Plant
	Intermediate		Dietetic			
	Care Skilled Nursing		Administration		Nuclear Medicine	Support Services

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Building Number: 05	Building Name: 4867 Sur	nset North Wing	
Configuration Replace with new	SPC 5 and NPC 4 or NPC 5	5 building	
Type of Service Provided			
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Anesthesia	Obstetrical	Renal Dialysis
Pediatric/Adol escent	Clinical Lab	Recovery	
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Pharmaceutic	cal	Central Plant
Intermediate	Dietetic		
Care Care Skilled Nursing	Administratior	Nuclear Medicine	Support Services

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Building Number: 06	Building Na	me: Centrex Buildir	ng			
Configuration N/A						
Type of Service Provided						
Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
Pediatric/Adol escent		Clinical Lab		Recovery		
Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
Obstetrical Ante/Postprtum		Pharmaceutical		_		
		Dietetic		Emergency		Central Plant
Care		Administration		Nuclear Medicine	X	Support Services
Skilled Nursing		Administration				

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Building Number	: 07	Building Na	me: NICU Building				
Configuration	Replace with new	SPC 5 and I	NPC 4 or NPC 5 building	g			
Type of Servi	ce 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	_		_	
,			Distatio		Emergency		Central Plant
	Intermediate Care		Dietetic		Nuclear Medicine		Support
	Skilled Nursing		Administration				Services

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Building Numbe	r: 08	Building Name: Cardiac Catheterization Laboratory						
Configuration	Replace with new	SPC 5 and N	NPC 4 or NPC 5 buildin	g				
Type of Serv	ice Provided							
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis	
	Pediatric/Adol escent		Clinical Lab		Recovery			
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant	
	Intermediate Care		Dietetic					
_	Skilled Nursing		Administration		Nuclear Medicine		Support Services	

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Building Numb	er: 09	Building Na	me: LAMC Hospital -	Phase I		
Configuration	N/A					
Type of Ser	vice Provided					
X	Nursing		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X	IntensiveCare		Anesthesia		Obstetrical	Renal Dialysis
X	Pediatric/Adol escent		Clinical Lab		Recovery	
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
X	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	Central Plant
X	Intermediate Care		Dietetic			
	Skilled Nursing		Administration		Nuclear Medicine	Support Services

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Building Numb	Building Number: 10 Building Name: Central Utility Plant - 1550 Edgemo						
Configuration	n N/A						
Type of Se	rvice Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical Recovery		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 Care		Dietetic		Nuclear Medicine		Support
	Skilled Nursing		Administration				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: 06 Building Name: Centrex Building							
Тур	e of Service Prov	ided					
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare	Inpatient Beds	0		Anesthesia		
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Central Plant
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Support Services
	Skilled Nursing	Inpatient Beds	0		Administration		
	Total Beds this Building		0				

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

Building Number: 09 Building Name: LAMC Hospital - Phase I							
Туре	e of Service Prov	<u>ided</u>					
X	Nursing	Inpatient Beds	128		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X	IntensiveCare	Inpatient Beds	137		Anesthesia		
×	Pediatric/Adol escent	Inpatient Beds	32		Clinical Lab	Obstetrical Recovery	Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
X	Obstetrical Ante/Postprtum	Inpatient Beds	35		Pharmaceutical	Emergency	Central Plant
X	Intermediate Care	Inpatient Beds	64		Dietetic	Nuclear Medicine	Support Services
	Skilled Nursing	Inpatient Beds	0		Administration		
	Total Beds this Building		396				

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Include information on the number of innationt bade by type of Service provided by buildings that are classified as SPC-2, SPC-3					

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: 10	Buildi	ng Name: Ce	entral Utility	Plant - 1550 Edgemo		
Type of Service Pro	ovided					
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	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 unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Number:	06	Build	ing Name: Ce	entrex Building		
Medical / Surgical (I	nclude GYN)		Acute Respirato	ry Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0	Inpatient (Bed) Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	lewborn / GYN)		Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0	Inpatient (Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric			intensive Care N Nursery	ewborn	Intermediate Card	
Inpatient 0 Bed	Inpatient Days	0	Inpatient (Bed) Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care			Rehabilitation Center		Int. Care / develop Disabled	oment
Inpatient 0 Bed	Inpatient Days	0	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 Days	0	Inpatient () 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:	09 Bui	Iding Name:	IC Hospital - Phase I		
Medical / Surgical (I	Include GYN)	Acute Respiratory	v Care	Acute Psychiatric	
Inpatient 176 Bed	Inpatient 64240 Days	Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days
Perinatal (excluse N	lewborn / GYN)	Burn		Skilled Nursing	
Inpatient 43 Bed	Inpatient 15695 Days	Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days
Pediatric		intensive Care Ne Nursery	wborn	Intermediate Card	
Inpatient 32 Bed	Inpatient 11680 Days	Inpatient 33 Bed	Inpatient 12045 Days		Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developm Disabled	ent
Inpatient 80 Bed	Inpatient 29200 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 32 Bed	Inpatient 11680 Days	Inpatient 0 Bed	Inpatient 0 Days	396	396

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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:	10 Build	ling Name: Central Utility Plant - 1550 E	dgemo
Medical / Surgical (I	nclude GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (excluse N	lewborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric		intensive Care Newborn Nursery	Intermediate Card
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care		Rehabilitation Center	Int. Care / development Disabled
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care		Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding PerUnitService
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	0 0