Report Year:	2011
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11846 Lor

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

Facility Number:	11846
Facility Name:	Long Beach Memorial Medical Center
Address:	2801 Atlantic Ave.
City:	Long Beach
Hospital Owner/Lice Year of Repo	
Contact 1 e-mail Ado	dress:
Contact 2 e-mail Ado	dress:
Contact 3 e-mail Add	lress::
Name of Subr	mitter: Mark Shuck
Submission	Date: 1/29/2012 3:00:00 PM

Report Year:	2011 11846	Long Beach Memorial Medical Center	Long Beach	Page:2 of 40
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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	1A -1K Main Tower & Additions	2801 Atlantic Ave.	Retrofit	SPC2	01/01/2013	01/01/2013
01A	2A-2C- Central Plant & Additions	2801 Atlantic Ave.	Retrofit	SPC2	01/01/2013	11/30/2011
04	03 - Memorial West - Nursing Unit	2801 Atlantic Ave.	Retrofit	SPC2	01/01/2013	11/30/2011
05	4A 4B- Memorial West - Rehab Unit	2801 Atlantic Ave.	Retrofit	SPC2	01/01/2013	06/01/2012

		Page:3 of 40
For each building which is planned for retrofitting projected construction start date or dates and pro project status and approvals per Section 130061	or replacement, provide the project numbers, per Section $130061(c)(1)(C)$ bjected Completion date or dates per Section $130061(c)(1)(D)$ and the mo (c)(1)(E).	C). The ost recent
Building No: 01 1A -1K Main Tower	& Additions Retrofit/Replacement Yes-Plan Project:	nned
Facility Project Sub Scope <u>Number Num</u>	Date Plan Approved Proj. Start Proj. Completed S in Date Date Date	Status CEQA Review
11846 HL090658 0	04/01/2009 07/29/2010 OP	PEN No
Building No: 01A 2A-2C- Central Plan	t & Additions Retrofit/Replacement Hazus-S Project:	Submitted
Facility Project Sub Scope <u>Number Num</u>	Date Plan Approved Proj. Start Proj. Completed S in Date Date Date	Status CEQA Review
11846 SL090302 0	02/11/2009 03/10/2009 03/24/2009 CL	WC No
Building No: 04 03 - Memorial West	- Nursing Unit Retrofit/Replacement Hazus-S Project:	Submitted
Facility Project Sub Scope <u>Number Number Num</u>	Date Plan Approved Proj. Start Proj. Completed S in Date Date Date Date	Status CEQA Review
11846 SL090660 0	04/01/2009 04/01/2009 CL	SD No
Building No: 05 4A 4B- Memorial We	est - Rehab Unit Retrofit/Replacement Hazus-S Project:	Submitted
Facility Project Sub Scope <u>Number Num</u>	Date Plan Approved Proj. Start Proj. Completed S in Date Date Date	Status CEQA Review
11846 HL090658 0	04/01/2009 07/29/2010 OP	PEN No
11846 SL090302 0	02/11/2009 03/10/2009 CL	WC No
11846 SL090660 0	04/01/2009 04/01/2009 CL	SD No

Report Status: Data Last Update: 10/31/2011

Submission Date: 01/29/2012

1/30/2012 12:45 PM Print Date:

Report Year:	2011 11846	Long Beach Memorial Medical Center	Long Beach	Page:4 of 40
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Report Status: Data Last Update: 10/31/2011 Submission Date: 01/29/2012 Print Date: 1/30/2012 12:45 PM

Report Year:	- 2
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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	Buildi	ng Name: 1A -1K Main Tower & Addit	tions	
Type of Service Prov	<u>vided</u>			
X Nursing	Inpatient Beds	341Inpatient13016Days7	X Surgical	X Obstetrical Recovery
X IntensiveCare	Inpatient Beds	73 Inpatient Days 30171	X Anesthesia	X Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	X Radiological/ Imaging	X Nuclear Medicine
X Obstetrical Ante/Postprtum	Inpatient Beds	59 Inpatient Days 29063	X Pharmaceutical	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	Outpatient Surgery
	Deus	Total Beds this 473 Building	X Obstetrical Cesarean/Deliv	X Central Plant

Report Year:	
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Care

Skilled Nursing

Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F) Building Number: 01A **Building Name:** 2A-2C- Central Plant & Additions **Type of Service Provided Obstetrical** Surgical 0 Nursing Inpatient 0 Inpatient Recovery Beds Days Newborn/ IntensiveCare Inpatient 0 **Inpatient Days** 0 Anesthesia WellBaby Beds Emergency **Clinical Lab** Inpatient Days 0 Pediatric/Adol Inpatient 0 escent Beds Nuclear Radiological/ Medicine Imaging Inpatient Days 0 Psychiatric Inpatient 0 Nursing Beds Pharmaceutical Rehabilitation Inpatient Days 0 Inpatient Obstetrical 0 Dietetic Therapy Ante/Postprtum Beds **Renal Dialysis** Administration Intermediate Inpatient Days Inpatient 0 0

Report Status: Data Last Update: 10/31/2011 Submis

Beds

Beds

Inpatient

0

Building

Total Beds this

Inpatient Days

Submission Date: 01/29/2012

0

0

X

Support Services

Obstetrical

Cesarean/Deliv

X

Outpatient

Central Plant

Surgery

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

Building Number: 04	Buildi	ng Name: 03 - Memorial West - Nursi	ng Unit	
Type of Service Prov	<u>rided</u>			
X Nursing	Inpatient Beds	42 Inpatient 3657 Days	Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
X Pediatric/Adol escent	Inpatient Beds	54 Inpatient Days 23980	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	X Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	X Administration	Renal Dialysis
X Skilled Nursing	Inpatient Beds	42 Inpatient Days 12215	X Support Services	Outpatient Surgery
		Total Beds this 138 Building	Cesarean/Deliv	Central Plant

Report Year:	
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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: 05 **Building Name:** 4A 4B- Memorial West - Rehab Unit **Type of Service Provided Obstetrical** Surgical Inpatient 0 Nursing Inpatient 0 Recovery Beds Days Newborn/ IntensiveCare Inpatient 0 **Inpatient Days** 0 Anesthesia WellBaby Beds Emergency **Clinical Lab** Inpatient Days 0 Pediatric/Adol Inpatient 0 escent Beds Nuclear Radiological/ Medicine Imaging Inpatient Days 0 Psychiatric Inpatient 0 Nursing Beds Pharmaceutical Rehabilitation X Inpatient Days 0 Inpatient Obstetrical 0 Dietetic Therapy Ante/Postprtum Beds **Renal Dialysis** Administration Intermediate Inpatient Days Inpatient 0 0 Care Beds Outpatient X Support Services Surgery Skilled Nursing Inpatient 0 Inpatient Days 0 Beds Obstetrical Total Beds this 0 Cesarean/Deliv Central Plant Building

Report Status: Data Last Update: 10/31/2011

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: 1A	-1K Main Tower & Addition	ns			
Medical / Surgical ((Include GYN)	Acute Respirator	y Care	Acute Psychiatric	Acute Psychiatric		
Inpatient 341 Bed	Inpatient 1301 Days 67	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing			
Inpatient 59 Bed	Inpatient 2906 Days 3	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 12 Bed	Inpatient 4509 Days	Inpatient 0 Bed	Inpatient 0 Days		
Intensive Care		Rehabilitation Center		Int. Care / development Disabled			
Inpatient 61 Bed	Inpatient 2566 Days 2	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	473	461		

Report Year:	20
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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:	01A	Building Name:	2A-2C- Central Plant & Ad	ditions			
Medical / Surgical	(Include GYN)	Acute Respir	atory Care	Acute Psychiatric	Acute Psychiatric		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing			
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Pediatric		intensive Car Nursery	e Newborn	Intermediate Card			
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Intensive Care		Rehabilitation Center		Int. Care / develop Disabled	Int. Care / development Disabled		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 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 Bed	0 Inpatient 0 Days	0	0		

Report Status: Data Last Update: 10/31/2011

Report Year:	2
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Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number:	04 Buil	ding Name: 03 -	Memorial West - Nursing I	Jnit	
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 N	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 42 Bed	Inpatient 1221 Days 5
Pediatric		intensive Care Ne Nursery	wborn	Intermediate Card	
Inpatient 54 Bed	Inpatient 2398 Days 0	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / develop Disabled	nent
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 42 Bed	Inpatient 3657 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	138	138

Report Status: Data Last Update: 10/31/2011

Report Year:	20
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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:	05	Building Name:	A 4B- Memorial West - R	Rehab Unit	
Medical / Surgical	(Include GYN)	Acute Respirat	ory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	D Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient C Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care 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 / 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

Report Year:	
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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	1A -1K Main Tower & Additions	
01A	2A-2C- Central Plant & Additions	\Box
04	03 - Memorial West - Nursing Unit	\Box
05	4A 4B- Memorial West - Rehab Unit	\Box
07	5 - X-Ray Addition	\Box
08	6A-6C - Surgery & Addition	$\prod_{i=1}^{n}$
11	7A-7B - Outpatient Surgery	$\prod_{i=1}^{n}$
12	8 - Cancer Prevention Center	\Box
13	10 - Emergency Power Area	
14	9 - ER Addition & Remodel	

Report Year:	2011 11846	Long Beach Memorial Medical Center	Long Beach	Page:14 of 40

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 B	uilding Name:	1A -1K	Main Tower &	Additions			
Type of Service Provided								
		X	Su	rgical	X	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	Nursing	X] And	esthesia				
X	IntensiveCare				X	Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol] Cli	nical Lab				Outpatient
	escent	X	X Radiological		X	X Newborn/ WellBaby		Surgery
	Psychiatric Nursing		-	aging	_	_	_	
_	-	X] Ph	armaceutical		Emergency	X	Central Plant
X	Obstetrical Ante/Postprtum	X] Die	etetic	X	Nuclear Medicine	X	Support Services
	Intermediate Care	X] Ad	ministration				
	Skilled Nursing							

Report Status: Data Last Update: 10/31/2011

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:	01A	Building Name:	2A	A-2C- Central Plant &	Addition	IS		
Type of Servic	e Provided			Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	Nursing			Anesthesia	_		_	
	IntensiveCare		_			Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent			Clinical Lab Radiological/		Newborn/ WellBaby		Outpatient Surgery
	Psychiatric Nursing			Imaging Pharmaceutical		Emergency	X	Central Plant
	Obstetrical Ante/Postprtu	^m [Dietetic		Nuclear Medicine	x	Support Services
	Intermediate Care			Administration				
	Skilled Nursin	g						

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

Report Status: Data Last Update: 10/31/2011

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 Buildi	ing Name:	4A	4B- Memorial Wes	t - Rehab	Unit		
Type of Service	e Provided	I		Surgical		Obstetrical	X	Rehabilitation
	Nursing			Anesthesia		Cesarean/Deliv		Therapy
	IntensiveCare					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	X	Support Services
	Intermediate Care			Administration				
	Skilled Nursing							

Report Status: Data Last Update: 10/31/2011

Report Year:	2011 11846	Long Beach Memorial Medical Center		Long Beach	Page:19 of 40
--------------	------------	------------------------------------	--	------------	---------------

Building Numbe	er: 01	Building Na	me: 1A -1K Main Towe	er & Add	itions		
Configuration	Retrofit Non-Confc	orming buildi	ng to SPC 2 and NPC 3	and rem	ove from service by 2030		
Type of Serv	vice Provided						
X	Nursing	X	Surgical	X	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	IntensiveCare	X	Anesthesia	X	Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing	X	Radiological/ Imaging	Х	Newborn/ WellBaby		Outpatient Surgery
X	Obstetrical Ante/Postprtum	X	Pharmaceutical	_		_	
	Anterrostprum				Emergency	Х	Central Plant
	Intermediate Care	X	Dietetic	X	Nuclear Medicine	X	Support
	Skilled Nursing	Х	Administration				Services

Report Status: Data Last Update: 10/31/2011

Report Year:	2011 11846	Long Beach Memorial Medical Center	Long Beach	Page:20 of 40
--------------	------------	------------------------------------	------------	---------------

Building Numbe	r: 01A	Building Na	me: 2A-2C- Central P	lant & Ad	ditions				
Configuration	Retrofit Non-Confo	orming building to SPC 2 and NPC 3 and remove from service by 2030							
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	X	Central Plant		
	Intermediate		Dietetic		Linergency				
	Care Skilled Nursing		Administration		Nuclear Medicine	X	Support Services		

Report Status: Data Last Update: 10/31/2011

Report Year:	2011	11846	Long Beach Memorial Medical Center	Long Beach	Page:21 of 40
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Building Number	r: 04	Building Na	me: 03 - Memorial We	st - Nurs	ing Unit		
Configuration	Retrofit Non-Confc	orming buildi	ng to SPC 2 and NPC 3	and rem	ove from service by 2030		
Type of Servi	ice Provided						
X	Nursing		Surgical		Obstetrical Cesarean/Deliv	Х	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	X	Administration		Nuclear Medicine	X	Support Services

Report Status: Data Last Update: 10/31/2011

Report Year:	2011	11846	Long Beach Memorial Medical Center	Long Beach	Page:22 of 40
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Building Numbe	er: 05	Building Na	me: 4A 4B- Memorial	West - R	ehab Unit		
Configuration	Retrofit Non-Confo	orming buildi	ng to SPC 2 and NPC 3	3 and rem	ove from service by 2030		
Type of Serv	vice Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery	y y	
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant
	Intermediate		Dietetic				-
	Care Skilled Nursing		Administration		Nuclear Medicine	X	Support Services

Report Status: Data Last Update: 10/31/2011

Report Year:	2011 11846	Long Beach Memorial Medical Center		Long Beach	Page:23 of 40
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Building Number: 07	Building Na	ime: 5 - X-Ray Add	dition			
Configuration N/A						
Type of Service Provided						
Nursing	X	Surgical	x	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
IntensiveCare	X	Anesthesia		Obstetrical		Renal Dialysis
Pediatric/Adol escent		Clinical Lab		Recovery		
Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
Obstetrical Ante/Postprtum		Pharmaceutical		Emorgonov		Central Plant
Intermediate		Dietetic		Emergency		Central Flant
Care Care Skilled Nursing	X	Administration		Nuclear Medicine	X	Support Services

Report Status: Data Last Update: 10/31/2011

Report Year:	2011	11846		Long Beach Memorial Medical Center		Long Beach	Page:24 of 40
--------------	------	-------	--	------------------------------------	--	------------	---------------

Building Numb	Building Number: 08 Building Name: 6A-6C - Surgery & Addition									
Configuration	N/A									
Type of Ser	vice Provided									
	Nursing	X	Surgical	X	Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	IntensiveCare	X	Anesthesia	X	Obstetrical		Renal Dialysis			
	Pediatric/Adol escent		Clinical Lab		Recovery					
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	Obstetrical		Pharmaceutical							
	Ante/Postprtum				Emergency		Central Plant			
	Intermediate Care	x	Dietetic		Nuclear Martician		Querrant			
	Skilled Nursing	x	Administration		Nuclear Medicine	X	Support Services			

Report Status: Data Last Update: 10/31/2011

Report Year:	2011 11846	Long Beach Memorial Medical Center	Long Beach	Page:25 of 40
--------------	------------	------------------------------------	------------	---------------

Building Numb	er: 11	Building Na	me: 7A-7B - Outpat	tient Surger	у		
Configuration	N/A						
Type of Ser	vice Provided						
	Nursing	X	Surgical	X	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare	X	Anesthesia	X	Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby	Х	Outpatient Surgery
	Obstetrical		Pharmaceutical	_		_	
	Ante/Postprtum				Emergency	Х	Central Plant
	Intermediate Care		Dietetic		Nuclear Medicine		Support
	Skilled Nursing	x	Administration			X	Support Services

Report Status: Data Last Update: 10/31/2011

Report Year:	2011	11846		Long Beach Memorial Medical Center		Long Beach	Page:26 of 40
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Building Numb	er: 12	Building Na	me: 8 - Cancer Prev	vention Cen	ter		
Configuration	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	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical	_			
	Anten ostphum				Emergency		Central Plant
	Intermediate Care		Dietetic				Ourses and
	Skilled Nursing	X	Administration		Nuclear Medicine	X	Support Services

Report Status: Data Last Update: 10/31/2011

Report Year:	2011	11846	Long Beach Memorial Medical Center	Long Beach	Page:27 of 40
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Building Number:	Building Number: 13 Building Name: 10 - Emergency Power Area								
Configuration	N/A								
Type of Service Provided									
1	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		Emorgonav		Central Plant		
_	Intermediate		Dietetic		Emergency	X	Central Plant		
	Care		Administration		Nuclear Medicine		Support Services		
	Skilled Nursing		Administration						

Report Status: Data Last Update: 10/31/2011

Report Year:	2011	11846	Long Beach Memorial Medical Center		Long Beach	Page:28 of 40
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Building Numb	per: 14	Building Na	me: 9 - ER Additior	n & Remode	I	
Configuration	n <mark>N/A</mark>					
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	X	Emergency	Central Plant
	Intermediate Care		Dietetic		Nuclear Medicine	Support
	Skilled Nursing		Administration			Services

Report Status: Data Last Update: 10/31/2011

Report Year:	2011		11846
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Long Beach

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: 07 Building Name: 5 - X-Ray Addition								
Туре	Type of Service Provided							
	Nursing	Inpatient Beds	0	X	Surgical	X Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
	IntensiveCare	Inpatient Beds	0	X	Anesthesia			
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis	
	Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery	
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Central Plant	
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Support Services	
	Skilled Nursing	Inpatient Beds	0	X	Administration			
	Total Beds this Building		0					

Report Status: Data Last Update: 10/31/2011

Report Year:	2011	11846
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Long Beach

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: 08 Building Name: 6A-6C - Surgery & Addition									
Туре	Type of Service Provided								
	Nursing	Inpatient Beds	0	X	Surgical	X Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
	IntensiveCare	Inpatient Beds	0	X	Anesthesia				
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	X Obstetrical Recovery	Renal Dialysis		
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery		
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Central Plant		
П	Intermediate Care	Inpatient Beds	0	X	Dietetic	Nuclear Medicine	X Support Services		
	Skilled Nursing	Inpatient Beds	0	X	Administration				
	Total Beds this Building		0						

Report Status: Data Last Update: 10/31/2011

Report Year:	2011		1
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Long Beach

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: 11	Building	Name: 7A	-7B - Outpa	tient Surgery		
Туре	e of Service Prov	ided					
	Nursing	Inpatient Beds	0	X	Surgical	X Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare	Inpatient Beds	0	X	Anesthesia		
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	X 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	X Central Plant
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Support Services
	Skilled Nursing	Inpatient Beds	0	X	Administration		
	Total Beds this Building		0				

Report Year:	2011 11846	Long Beach Memorial Medical Center	Long Beach	Page:32 of 40
	ormation on the numb SPC-5 per Section 13	per of inpatient beds by type of Service provide 30061(e)	d by buildings that are classified a	is SPC-2, SPC-3,

Building Number: 12 Building Name: 8 - Cancer Prevention Center]		
<u>Type o</u>	of Service Provi	<u>ded</u>						
N	lursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
🗌 Ir	ntensiveCare	Inpatient Beds	0		Anesthesia			
	Pediatric/Adol scent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery		Renal Dialysis
	Psychiatric Iursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby		Outpatient Surgery
	Dbstetrical Inte/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency		Central Plant
	ntermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X	Support Services
□ s	killed Nursing	Inpatient Beds	0	X	Administration			
	otal Beds this Building		0					

Report Status: Data Last Update: 10/31/2011

Report Year:	2011 11846	Long Beach Memorial Medical Center	Long Beach	Page:33 of 40
	ormation on the numb SPC-5 per Section 13	per of inpatient beds by type of Service provide 30061(e)	d by buildings that are classified a	as SPC-2, SPC-3,

Buildi	ng Number: 13	Building	Name: 10	- Emergenc	y Power Area			
Туре	e of Service Prov	<u>ided</u>						
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha Ther	abilitation apy
	IntensiveCare	Inpatient Beds	0		Anesthesia			
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	al Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outp Surg	patient Jery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	X Cent	tral Plant
Π	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Serv	oort ices
	Skilled Nursing	Inpatient Beds	0		Administration			
	Total Beds this Building		0					

Report Year: 2011	11846	Long Beach M	lemorial Me	dical Center	Long Beach	Page:34 of 40		
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: 14 Building Name: 9 - ER Addition & Remodel								
Type of Service Pro	<u>vided</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	Inpatient Beds	0		Dietetic	Nuclear Medicine	Support Services		
Skilled Nursing	Inpatient Beds	0		Administration				

Report Status: Data Last Update: 10/31/2011

Total Beds this Building

Submission Date: 01/29/2012

0

Print Date: 1/30/2012 12:45 PM

11846

Long Beach Memorial Medical Center

Long Beach

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:)7 B	uilding Name: 5 - >	-Ray Addition			
Medical / Surgical (Include GYN)		Acute Respiratory	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	wborn / 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	

Report Status: Data Last Update: 10/31/2011

Long Beach

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:	08	Build	ing Name: 6/	A-6C - Surgery &	Addition		
Medical / Surgical (Include GYN)			Acute Respiratory Care			Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0	Inpatient Bed	0 Inpatient Days	0	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	lewborn / GYN)		Burn			Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0	Inpatient	D Inpatient Days	0	Inpatient 0 Bed	Inpatient 0 Days
Pediatric			intensive Care I Nursery	lewborn		Intermediate Card	
Inpatient 0 Bed	Inpatient Days	0	Inpatient Bed	0 Inpatient Days	0	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care			Rehabilitation Center			Int. Care / developi Disabled	nent
Inpatient 0 Bed	Inpatient Days	0	Inpatient Bed	0 Inpatient Days	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 Days	0	Inpatient Bed	0 Inpatient Days	0	0	0

Report Status: Data Last Update: 10/31/2011

11846

Long Beach

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:	11	Buildin	ng Name: 7A-7	B - Outpatient Surgery		
Medical / Surgical (Include GYN)			Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	v 1	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse Ne	ewborn / GYN)		Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 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 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 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 Days		Inpatient 0 Bed	Inpatient 0 Days	0	0

Report Year:	201
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Long Beach

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:	12	Building Name:	8 - Cancer Prevention C	Center		
Medical / Surgical (I			iratory Care	Acute Psychiatric		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient (Days) Inpatient 0 Bed	Inpatient 0 Days	
Perinatal (excluse N	ewborn / GYN)	Burn		Skilled Nursing	Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient (Days) Inpatient 0 Bed	Inpatient 0 Days	
Pediatric		intensive Ca Nursery	are Newborn	Intermediate Card		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient (Days) Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care		Rehabilitati Center	on	Int. Care / develop Disabled	ment	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient (Days) Inpatient 0 Bed	Inpatient 0 Days	
Coronary Care		Chemical Dependenc	y	Total Beds this Building Per Unit	Total Beds this Building Per Service	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient (Days	0	0	

Report Status: Data Last Update: 10/31/2011

Long Beach

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:	13	Buildi	ng Name: 10	- Emergency Power Area			
Medical / Surgical (I	nclude GYN)		Acute Respirator	y Care	Acute Psychiatric		
Inpatient 0 Bed	Inpatient Days	0	Inpatient C Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Perinatal (excluse N	ewborn / GYN)		Burn		Skilled Nursing	Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0	Inpatient 0 Bed	Days	Inpatient 0 Bed	Inpatient 0 Days	
Pediatric			intensive Care N Nursery	ewborn	Intermediate Card		
Inpatient 0 Bed	Inpatient Days	0	Inpatient C Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care			Rehabilitation Center		Int. Care / develop Disabled	ment	
Inpatient 0 Bed	Inpatient Days	0	Inpatient C 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 Days	0	Inpatient C Bed	Inpatient 0 Days	0	0	

Report Status: Data Last Update: 10/31/2011

Report Year:	2011
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11846

Long Beach Memorial Medical Center

Long Beach

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:	14	Buildi	ng Name: 9 - E	R Addition & Remodel		
Medical / Surgical (Include GYN)			Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0	Inpatient 0 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 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric			intensive Care Nev Nursery	vborn	Intermediate Card	
Inpatient 0 Bed	Inpatient Days	0	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 Days	0	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 Days	0	Inpatient 0 Bed	Inpatient 0 Days	0	0