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

Facility Number:	12033	
Facility Name:	Santa M	lonica - UCLA Medical Center
Address:	1250 16	th St.
City:	Santa M	lonica
Hospital Owner/Lice	ensee:	Regents of the University of California
Year of Rep	orting:	2011
Contact 1 e-mail Ad	ddress:	
Contact 2 e-mail Ad	ddress:	
Contact 3 e-mail Add	dress::	
Name of Sub	omitter:	Richard Azar
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
02	Lobby/Hospital Entrance	1250 16th St.	Replace	SPC5	01/01/2013	07/01/2007
03	Emergency Building	1250 16th St.	Replace	SPC5	01/01/2013	07/01/2007
04	Hospital Tower	1250 16th St.	Replace	SPC5	01/01/2013	02/01/2012
05	Old Central Plant	1250 16th St.	Replace	SPC5	01/01/2013	07/01/2007

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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: 04	Hospital Tower		Retrofi Projec	it/Replacen t:	nent Ye	es-Submitte	d
Facility <u>Number</u>	Project Sub Number Num	Scope	Date Plan in	Approved Date	Proj. Start Date	Proj. Completed Date	Status	CEQA Review
12033	HL990946	0 SM/OHRP-REPLACEMENT HOSPITAL	07/14/1999	06/04/200)1		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: 02	Buildi	ng Name: Lobby/Hospital Entrance		
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	Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services Obstetrical	Outpatient Surgery
		Total Beds this Building	Cesarean/Deliv	Central Plant

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

Building Number: 03	Buildi	ng Name: Emergency Building		
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	Ocsardan/Denv	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: 04	Buildi	ng Name: Hospital Tower		
Type of Service Prov	<u>rided</u>			
X Nursing	Inpatient Beds	152 Inpatient 36499 Days	Surgical	Obstetrical Recovery
X IntensiveCare	Inpatient Beds	26 Inpatient Days 6862	X Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	X Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	X Pharmaceutical Dietetic	X 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	X 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: 05	Buildi	ng Name: Old Central 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 Obstetrical	Outpatient Surgery
		Total Beds this Building	Cesarean/Deliv	Central Plant

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Building Number:	02	Building Name:	Lobby/Hospital Entrance		
Medical / Surgical (Include GYN)		Acute Respira	atory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse I	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 Care Nursery	• 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 / developn Disabled	nent
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

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Building Number:	03 Bui	Iding Name: Eme	rgency Building			
Medical / Surgical (I	nclude GYN)	Acute Respiratory	Care	Acute Psychiatric		
	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Perinatal (excluse N	lewborn / GYN)	Burn		Skilled Nursing		
	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Pediatric		intensive Care Nev Nursery	intensive Care Newborn Nursery		Intermediate Card	
	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 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service	
	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0	

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Building Number:	04	Building Name: Hos	spital Tower			
Medical / Surgical	(Include GYN)	Acute Respirator	y Care	Acute Psychiatric		
Inpatient 152 Bed	Inpatient 3649 Days 9	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	intensive Care Newborn Nursery		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 26 Bed	Inpatient 6862 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	178	159	

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Building Number:	05 E	Building Name: Old (Central 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 l	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	intensive Care Newborn Nursery		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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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	Merle Norman Pavilion	
02	Lobby/Hospital Entrance	
03	Emergency Building	
04	Hospital Tower	
05	Old Central Plant	
06	New Central Plant	

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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	Orthopaedic Wing of SM/OH		
N_2	SouthWest Wing of SM/OH		
N_3	Central Wing of SM/OH		
N_4	North Wing of SM/OH		

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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:	Lo	bby/Hospital Entrance				
		l						_
Type of Service	e Provided							
				Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
	Nursing			Anesthesia				
	IntensiveCare				Ш	Obstetrical Recovery	Renal Dialysis	
	Pediatric/Adol escent			Clinical Lab		Newborn/	Outpatient Surgery	
	Psychiatric			Radiological/ Imaging		WellBaby		
Ш	Nursing			Pharmaceutical		Emergency	Central Plant	
	Obstetrical Ante/Postprtui	m [Dietetic		Nuclear Medicine	Support Services	
	Intermediate Care			Administration				
	Skilled Nursing	g						

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

Building Number:	03	Building Name:	Emergen	cy Building]
Type of Service	e Provided							
			Surgio	cal		Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
	Nursing		Anest	hesia				
	IntensiveCare		_			Obstetrical Recovery	Renal Dialysis	
	Pediatric/Ado	, [Clinic	al Lab			Outpatient	
_	escent		Radio	ological/		Newborn/ WellBaby	Surgery	
	Psychiatric Nursing		_	maceutical		Emergency	Central Plant	
	Obstetrical		_			Nuclear	Support	
_	Ante/Postprtu	m [Dietet	tic	Ш	Medicine	Services	
	Intermediate		_					
	Care		Admir	nistration				
	Skilled Nursin	g						

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

Building Number:	04	Building Name:	Hosp	oital Tower					
Type of Service	e Provided	_	_						
] s	Surgical		Obstetrical Cesarean/Deliv	Х	Rehabilitation Therapy	
X	Nursing	X	A	nesthesia					
X	IntensiveCare					Obstetrical Recovery		Renal Dialysis	
	Pediatric/Adol	, [] (Clinical Lab			X	Outpatient	
	escent	X		Radiological/	Ш	Newborn/ WellBaby		Surgery	
	Psychiatric Nursing	Į	_	maging Pharmaceutical		Emergency		Central Plant	
	Obstetrical		_] 「	Tiamiaceuticai				Central Flant	
	Ante/Postprtu	m _] [Dietetic		Nuclear Medicine	Χ	Support Services	
	Intermediate		_						
	Care	X	A	Administration					
	Skilled Nursin	g							

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

Building Number:	05 Build	ing Name:	Old Central Plant		
Type of Servic	e Provided	_	_		
			Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	Nursing		Anesthesia		
	IntensiveCare		_ Allestriesia	Obstetrical Recovery	Renal Dialysis
	Pediatric/Adol		Clinical Lab		Outpatient
	escent Psychiatric		Radiological/ Imaging	Newborn/ WellBaby	Surgery
	Nursing		Pharmaceutical	Emergency	Central Plant
	Obstetrical Ante/Postprtum		Dietetic	Nuclear Medicine	Support Services
	Intermediate Care		Administration		
П	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 Numb	er: 01	Building Na	me: Merle Norman Pa	avilion							
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5								
Type of Service Provided											
X	Nursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
	IntensiveCare	X	Anesthesia	X	Obstetrical		Renal Dialysis				
X	Pediatric/Adol escent		Clinical Lab		Recovery						
	Psychiatric Nursing	X	Radiological/ Imaging	X	Newborn/ WellBaby	X	Outpatient Surgery				
X	Obstetrical Ante/Postprtum	X	Pharmaceutical		Emergency		Central Plant				
	Intermediate Care		Dietetic								
	Skilled Nursing	X	Administration	X	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 Numb	er: 02	Building Na	me: Lobby/Hospital E	ntrance							
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		Emergency		Central Plant				
	Intermediate		Dietetic				22				
	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: Emergency Bu	ilding						
Configuration:	N/A									
Type of Service Provided										
N	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
In	tensiveCare		Anesthesia		Obstetrical		Renal Dialysis			
I I	ediatric/Adol scent		Clinical Lab		Recovery					
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	bstetrical nte/Postprtum		Pharmaceutical		Emergency		Central Plant			
	termediate		Dietetic		Emergency		Central Flam			
	are		Administration		Nuclear Medicine		Support Services			
	killed 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 Numb	er: 04	Building Na	me: Hospital Tower								
Configuration:	Replace with new	SPC 5 and N	NPC 4 or NPC 5 building	9							
Type of Service Provided											
X	Nursing		Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy				
X	IntensiveCare	X	Anesthesia		Obstetrical		Renal Dialysis				
	Pediatric/Adol escent		Clinical Lab		Recovery	<u> </u>					
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby	X	Outpatient Surgery				
	Obstetrical Ante/Postprtum	X	Pharmaceutical	П	Emergency		Central Plant				
	Intermediate Care		Dietetic				0				
	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 Numb	er: 05	Building Na	me: Old Central Plant	t							
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		Emergency		Central Plant				
	Intermediate Care		Dietetic								
	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 Numb	er: 06	Building Na	me: New Central Pla	nt		
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		Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	Central Plant
	Intermediate Care		Dietetic			0
	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)

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Building Number: 01 Building Name: Merle Norman Pavilion									
Туре	Type of Service Provided								
X	Nursing	Inpatient Beds	51] X	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
	IntensiveCare	Inpatient Beds	0] X	Anesthesia				
X	Pediatric/Adol escent	Inpatient Beds	15		Clinical Lab	X Obstetrical Recovery	Renal Dialysis		
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	X Newborn/ WellBaby	X Outpatient Surgery		
X	Obstetrical Ante/Postprtum	Inpatient Beds	26		Pharmaceutical	Emergency	Central Plant		
	Intermediate Care	Inpatient Beds	0		Dietetic	X Nuclear Medicine	X Support Services		
	Skilled Nursing	Inpatient Beds	0		Administration				
	Total Beds this Building		92						

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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: New Central Plant								
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	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**: 1/30/2012 12:45 PM

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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:	D1 Build	ing Name: Merlo	e Norman Pavilion			
Medical / Surgical (In	clude GYN)	Acute Respiratory	Care	Acute Psychiatric		
Inpatient 51 Bed	Inpatient 12246 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Perinatal (excluse Ne	wborn / GYN)	Burn		Skilled Nursing		
Inpatient 26 Bed	Inpatient 5658 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Pediatric		intensive Care Nev Nursery	wborn	Intermediate Card		
Inpatient 15 Bed	Inpatient 3270 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care		Rehabilitation Center		Int. Care / developr Disabled	ment	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0	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	92	92	

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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	Building Name:	New Central Plan	nt			
Medical / Surgical (Ir	nclude GYN)	Acute Resp	oiratory Care	Acute F	Acute Psychiatric		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatier Bed	ot 0	Inpatient 0 Days	
Perinatal (excluse No	ewborn / GYN)	Burn		Skilled	Skilled Nursing		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatier Bed	nt O	Inpatient 0 Days	
Pediatric		intensive C Nursery	are Newborn	Interme	ediate Card		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatier Bed	nt 0	Inpatient 0 Days	
Intensive Care		Rehabilitati Center	ion	Int. Car Disable	e / developm	nent	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatier Bed	nt 0	Inpatient 0 Days	
Coronary Care		Chemical Dependenc	;y	Total B Buildin Unit	eds this g Per	Total Beds this Building Per Service	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0	0	0	