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

Facility Number: 12348

Facility Name: Paradise Valley Hospital

Address: 2400 East Fourth Street

City: National City

Hospital Owner/Licensee: Prime Healthcare Paradise Valley, LLC

Year of Reporting: 2011

Contact 1 e-mail Address:

Contact 2 e-mail Address:

Contact 3 e-mail Address::

Name of Submitter: Pat Silvestri

Submission Date: 1/29/2012 3:00:00 PM

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
10	Storage Building	2400 East Fourth Street	Replace	SPC5	01/01/2013	12/01/2012

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

Building Number: **10**   Building Name: **Storage Building**

Type of Service Provided

☐ Nursing	Inpatient Beds	0	Inpatient Days	0	☐ Surgical
☐ IntensiveCare	Inpatient Beds	0	Inpatient Days	0	☐ Anesthesia
☐ Pediatric/Adolescent	Inpatient Beds	0	Inpatient Days	0	☐ Clinical Lab
☐ Psychiatric Nursing	Inpatient Beds	0	Inpatient Days	0	☐ Radiological/Imaging
☐ Obstetrical Ante/Postprtum	Inpatient Beds	0	Inpatient Days	0	☐ Pharmaceutical
☐ Intermediate Care	Inpatient Beds	0	Inpatient Days	0	☐ Dietetic
☐ Skilled Nursing	Inpatient Beds	0	Inpatient Days	0	☐ Administration

☐ Surgical
☐ Anesthesia
☐ Clinical Lab
☐ Radiological/Imaging
☐ Pharmaceutical
☐ Dietetic
☐ Administration
[X] Support Services
☐ Obstetrical Cesarean/Deliv

☐ Obstetrical Recovery
☐ Newborn/WellBaby
☐ Emergency
☐ Nuclear Medicine
☐ Rehabilitation Therapy
☐ Renal Dialysis
☐ Outpatient Surgery
☐ Central Plant

Total Beds this Building: 0

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

Building Number: 10   **Building Name:** Storage Building

Medical / Surgical (Include GYN)

Inpatient Bed `0`   Inpatient Days `0`

Acute Respiratory Care

Inpatient Bed `0`   Inpatient Days `0`

Acute Psychiatric

Inpatient Bed `0`   Inpatient Days `0`

Perinatal (exclude Newborn / GYN)

Inpatient Bed `0`   Inpatient Days `0`

Burn

Inpatient Bed `0`   Inpatient Days `0`

Skilled Nursing

Inpatient Bed `0`   Inpatient Days `0`

Pediatric

Inpatient Bed `0`   Inpatient Days `0`

intensive Care Newborn Nursery

Inpatient Bed `0`   Inpatient Days `0`

Intermediate Card

Inpatient Bed `0`   Inpatient Days `0`

Intensive Care

Inpatient Bed `0`   Inpatient Days `0`

Rehabilitation Center

Inpatient Bed `0`   Inpatient Days `0`

Int. Care / development Disabled

Inpatient Bed `0`   Inpatient Days `0`

Coronary Care

Inpatient Bed `0`   Inpatient Days `0`

Chemical Dependency

Inpatient Bed `0`   Inpatient Days `0`

Total Beds this Building Per Unit

`0`

Total Beds this Building Per Service

`0`

Report Status: **Data Last Update:** 01/12/2012   **Submission Date:** 01/29/2012   **Print Date:** 1/30/2012 12:45 PM

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	Main Tower	
02	West Wing	
03	East Wing	
04	ER Expansion	
05	Boiler Building	
06	Pediatrics Wing	
07	Chiller Building	
08	Generator Building	
09	Medical Office Building	
10	Storage Building	

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: 10   Building Name: Storage Building

Type of Service Provided

☐ Nursing

☐ IntensiveCare

☐ Pediatric/Adolescent

☐ Psychiatric Nursing

☐ Obstetrical Ante/Postprtum

☐ Intermediate Care

☐ Skilled Nursing

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/ Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical Cesarean/Deliv

☐ Obstetrical Recovery

☐ Newborn/ WellBaby

☐ Emergency

☐ Nuclear Medicine

☐ Rehabilitation Therapy

☐ Renal Dialysis

☐ Outpatient Surgery

☐ Central Plant

☒ Support Services

Report Status: **Data Last Update:** 01/12/2012   **Submission Date:** 01/29/2012   **Print Date:** 1/30/2012 12:45 PM

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: Main Tower

Configuration: Retrofit Non-Conforming building to SPC 5 and NPC 4 or NPC 5

Type of Service Provided

[X] Nursing	[X] Surgical	[X] Obstetrical Cesarean/Deliv	[ ] Rehabilitation Therapy
[X] IntensiveCare	[X] Anesthesia	[X] Obstetrical Recovery	[X] Renal Dialysis
[ ] Pediatric/Adolescent	[X] Clinical Lab		
[ ] Psychiatric Nursing	[X] Radiological/Imaging	[X] Newborn/WellBaby	[X] Outpatient Surgery
[X] Obstetrical Ante/Postprtum	[X] Pharmaceutical	[ ] Emergency	[ ] Central Plant
[ ] Intermediate Care	[X] Dietetic	[X] Nuclear Medicine	[X] Support Services
[ ] Skilled Nursing	[ ] Administration		

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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: 02   Building Name: West Wing

Configuration: Retrofit Non-Conforming building to SPC 5 and NPC 4 or NPC 5

Type of Service Provided

[X] Nursing	[ ] Surgical	[ ] Obstetrical Cesarean/Deliv	[X] Rehabilitation Therapy
[X] IntensiveCare	[ ] Anesthesia	[ ] Obstetrical Recovery	[ ] Renal Dialysis
[ ] Pediatric/Adolescent	[ ] Clinical Lab		
[ ] Psychiatric Nursing	[ ] Radiological/Imaging	[ ] Newborn/WellBaby	[ ] Outpatient Surgery
[ ] Obstetrical Ante/Postprtum	[ ] Pharmaceutical		
		[ ] Emergency	[ ] Central Plant
[ ] Intermediate Care	[ ] Dietetic		
		[ ] Nuclear Medicine	[X] Support Services
[ ] Skilled Nursing	[ ] Administration		

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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 Name: East Wing

Configuration: Retrofit Conforming building to NPC 4 or NPC 5

Type of Service Provided

☐ Nursing	☐ Surgical	☐ Obstetrical Cesarean/Deliv	☐ Rehabilitation Therapy
☐ IntensiveCare	☐ Anesthesia	☐ Obstetrical Recovery	☐ Renal Dialysis
☐ Pediatric/Adolescent	☐ Clinical Lab		
☒ Psychiatric Nursing	☐ Radiological/Imaging	☐ Newborn/WellBaby	☐ Outpatient Surgery
☐ Obstetrical Ante/Postprtum	☐ Pharmaceutical		
☐ Intermediate Care	☐ Dietetic	☐ Emergency	☐ Central Plant
☐ 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: 04   Building Name: ER Expansion

Configuration: Retrofit Conforming building to NPC 4 or NPC 5

Type of Service Provided

☐ Nursing	☐ Surgical	☐ Obstetrical Cesarean/Deliv	☐ Rehabilitation Therapy
☐ IntensiveCare	☐ Anesthesia	☐ Obstetrical Recovery	☐ Renal Dialysis
☐ Pediatric/Adolescent	☐ Clinical Lab		
☐ Psychiatric Nursing	☐ Radiological/Imaging	☐ Newborn/WellBaby	☐ Outpatient Surgery
☐ Obstetrical Ante/Postprtum	☐ Pharmaceutical	☒ Emergency	☐ Central Plant
☐ Intermediate Care	☐ Dietetic	☐ Nuclear Medicine	☒ Support Services
☐ Skilled Nursing	☐ Administration		

Report Status: **Data Last Update:** 01/12/2012   **Submission Date:** 01/29/2012   **Print Date:** 1/30/2012 12:45 PM

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   Building Name: Boiler Building

Configuration : Retrofit Conforming building to NPC 4 or NPC 5

Type of Service Provided

☐ Nursing	☐ Surgical	☐ Obstetrical Cesarean/Deliv	☐ Rehabilitation Therapy
☐ IntensiveCare	☐ Anesthesia	☐ Obstetrical Recovery	☐ Renal Dialysis
☐ Pediatric/Adolescent	☐ Clinical Lab		
☐ Psychiatric Nursing	☐ Radiological/ Imaging	☐ Newborn/ WellBaby	☐ Outpatient Surgery
☐ Obstetrical Ante/Postprtum	☐ Pharmaceutical	☐ Emergency	☒ Central Plant
☐ Intermediate Care	☐ Dietetic	☐ Nuclear Medicine	☒ Support Services
☐ Skilled Nursing	☐ Administration		

Report Status: **Data Last Update:** 01/12/2012   **Submission Date:** 01/29/2012   **Print Date:** 1/30/2012 12:45 PM

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: 06   Building Name: Pediatrics Wing

Configuration: Retrofit Non-Conforming building to SPC 5 and NPC 4 or NPC 5

Type of Service Provided

☐ Nursing	☐ Surgical	☐ Obstetrical Cesarean/Deliv	☐ Rehabilitation Therapy
☐ IntensiveCare	☐ Anesthesia	☐ Obstetrical Recovery	☐ Renal Dialysis
☒ Pediatric/Adolescent	☐ Clinical Lab		
☐ Psychiatric Nursing	☐ Radiological/Imaging	☐ Newborn/WellBaby	☐ Outpatient Surgery
☐ Obstetrical Ante/Postprtum	☐ Pharmaceutical	☐ Emergency	☐ Central Plant
☐ Intermediate Care	☐ Dietetic	☐ Nuclear Medicine	☒ Support Services
☐ Skilled Nursing	☐ Administration		

Report Status: **Data Last Update:** 01/12/2012   **Submission Date:** 01/29/2012   **Print Date:** 1/30/2012 12:45 PM

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: 07   Building Name: Chiller Building

Configuration : Retrofit Non-Conforming building to SPC 5 and NPC 4 or NPC 5

Type of Service Provided

☐ Nursing	☐ Surgical	☐ Obstetrical Cesarean/Deliv	☐ Rehabilitation Therapy
☐ IntensiveCare	☐ Anesthesia	☐ Obstetrical Recovery	☐ Renal Dialysis
☐ Pediatric/Adolescent	☐ Clinical Lab		
☐ 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 Number: 08   Building Name: Generator Building

Configuration: Retrofit Non-Conforming building to SPC 5 and NPC 4 or NPC 5

Type of Service Provided

☐ Nursing	☐ Surgical
☐ IntensiveCare	☐ Anesthesia
☐ Pediatric/Adolescent	☐ Clinical Lab
☐ Psychiatric Nursing	☐ Radiological/Imaging
☐ Obstetrical Ante/Postprtum	☐ Pharmaceutical
☐ Intermediate Care	☐ Dietetic
☐ Skilled Nursing	☐ Administration

☐ Obstetrical Cesarean/Deliv   ☐ Rehabilitation Therapy

☐ Obstetrical Recovery   ☐ Renal Dialysis

☐ Newborn/WellBaby   ☐ Outpatient Surgery

☐ Emergency   ☒ Central Plant

☐ Nuclear Medicine   ☒ Support Services

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: 09   Building Name: Medical Office Building

Configuration : Retrofit Non-Conforming building to SPC 5 and NPC 4 or NPC 5

Type of Service Provided

☐ Nursing	☐ Surgical	☐ Obstetrical Cesarean/Deliv	☐ Rehabilitation Therapy
☐ IntensiveCare	☐ Anesthesia	☐ Obstetrical Recovery	☐ Renal Dialysis
☐ Pediatric/Adol escent	☐ Clinical Lab		
☐ 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

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: 10   Building Name: Storage Building

Configuration: Remove from GAC service by 1/1/2013

Type of Service Provided

☐ Nursing	☐ Surgical
☐ IntensiveCare	☐ Anesthesia
☐ Pediatric/Adolescent	☐ Clinical Lab
☐ Psychiatric Nursing	☐ Radiological/Imaging
☐ Obstetrical Ante/Postprtum	☐ Pharmaceutical
☐ Intermediate Care	☐ Dietetic
☐ Skilled Nursing	☐ Administration

☐ Obstetrical Cesarean/Deliv   ☐ Rehabilitation Therapy

☐ Obstetrical Recovery   ☐ Renal Dialysis

☐ Newborn/WellBaby   ☐ Outpatient Surgery

☐ Emergency   ☐ Central Plant

☐ Nuclear Medicine   ☒ Support Services

Report Status: **Data Last Update:** 01/12/2012   **Submission Date:** 01/29/2012   **Print Date:** 1/30/2012 12:45 PM

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: **01**   Building Name: **Main Tower**

Type of Service Provided

[X] Nursing	Inpatient Beds	118	
[X] IntensiveCare	Inpatient Beds	10	
[ ] Pediatric/Adolescent	Inpatient Beds	0	
[ ] Psychiatric Nursing	Inpatient Beds	0	
[X] Obstetrical Ante/Postprtum	Inpatient Beds	23	
[ ] Intermediate Care	Inpatient Beds	0	
[ ] Skilled Nursing	Inpatient Beds	0	

Total Beds this Building   151

[X] Surgical

[X] Anesthesia

[X] Clinical Lab

[X] Radiological/ Imaging

[X] Pharmaceutical

[X] Dietetic

[ ] Administration

[X] Obstetrical Cesarean/Deliv

[X] Obstetrical Recovery

[X] Newborn/ WellBaby

[ ] Emergency

[X] Nuclear Medicine

[ ] Rehabilitation Therapy

[X] Renal Dialysis

[X] Outpatient Surgery

[ ] Central Plant

[X] Support Services

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

Building Number: **02**   Building Name: **West Wing**

Type of Service Provided

[X] Nursing	Inpatient Beds	22	
[X] IntensiveCare	Inpatient Beds	15	
[ ] Pediatric/Adolescent	Inpatient Beds	0	
[ ] Psychiatric Nursing	Inpatient Beds	0	
[ ] Obstetrical Ante/Postprtum	Inpatient Beds	0	
[ ] Intermediate Care	Inpatient Beds	0	
[ ] Skilled Nursing	Inpatient Beds	0	

[ ] Surgical

[ ] Anesthesia

[ ] Clinical Lab

[ ] Radiological/ Imaging

[ ] Pharmaceutical

[ ] Dietetic

[ ] Administration

[ ] Obstetrical Cesarean/Deliv

[ ] Obstetrical Recovery

[ ] Newborn/ WellBaby

[ ] Emergency

[ ] Nuclear Medicine

[X] Rehabilitation Therapy

[ ] Renal Dialysis

[ ] Outpatient Surgery

[ ] Central Plant

[X] Support Services

Total Beds this Building   37

Report Status: **Data Last Update:** 01/12/2012   **Submission Date:** 01/29/2012   **Print Date:** 1/30/2012 12:45 PM

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: **03**   Building Name: **East Wing**

Type of Service Provided

☐ Nursing	Inpatient Beds	0
☐ IntensiveCare	Inpatient Beds	0
☐ Pediatric/Adolescent	Inpatient Beds	0
☒ Psychiatric Nursing	Inpatient Beds	39
☐ Obstetrical Ante/Postprtum	Inpatient Beds	0
☐ Intermediate Care	Inpatient Beds	0
☐ Skilled Nursing	Inpatient Beds	0

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical Cesarean/Deliv

☐ Obstetrical Recovery

☐ Newborn/WellBaby

☐ Emergency

☐ Nuclear Medicine

☐ Rehabilitation Therapy

☐ Renal Dialysis

☐ Outpatient Surgery

☐ Central Plant

☒ Support Services

Total Beds this Building   39

Report Status: **Data Last Update:** 01/12/2012   **Submission Date:** 01/29/2012   **Print Date:** 1/30/2012 12:45 PM

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: **04**   Building Name: **ER Expansion**

Type of Service Provided

☐ Nursing	Inpatient Beds	0
☐ IntensiveCare	Inpatient Beds	0
☐ Pediatric/Adolescent	Inpatient Beds	0
☐ Psychiatric Nursing	Inpatient Beds	0
☐ Obstetrical Ante/Postprtum	Inpatient Beds	0
☐ Intermediate Care	Inpatient Beds	0
☐ Skilled Nursing	Inpatient Beds	0

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/ Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical Cesarean/Deliv

☐ Obstetrical Recovery

☐ Newborn/ WellBaby

[X] Emergency

☐ Nuclear Medicine

☐ Rehabilitation Therapy

☐ Renal Dialysis

☐ Outpatient Surgery

☐ Central Plant

[X] Support Services

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: **05**   Building Name: **Boiler Building**

Type of Service Provided

☐ Nursing	Inpatient Beds	0
☐ IntensiveCare	Inpatient Beds	0
☐ Pediatric/Adolescent	Inpatient Beds	0
☐ Psychiatric Nursing	Inpatient Beds	0
☐ Obstetrical Ante/Postprtum	Inpatient Beds	0
☐ Intermediate Care	Inpatient Beds	0
☐ Skilled Nursing	Inpatient Beds	0
Total Beds this Building		0

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/ Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical Cesarean/Deliv

☐ Obstetrical Recovery

☐ Newborn/ WellBaby

☐ Emergency

☐ Nuclear Medicine

☐ Rehabilitation Therapy

☐ Renal Dialysis

☐ Outpatient Surgery

[X] Central Plant

[X] Support Services

Report Status: **Data Last Update:** 01/12/2012   **Submission Date:** 01/29/2012   **Print Date:** 1/30/2012 12:45 PM

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: **Pediatrics Wing**

Type of Service Provided

☐ Nursing	Inpatient Beds	0	
☐ IntensiveCare	Inpatient Beds	0	
☒ Pediatric/Adolescent	Inpatient Beds	10	
☐ Psychiatric Nursing	Inpatient Beds	0	
☐ Obstetrical Ante/Postprtum	Inpatient Beds	0	
☐ Intermediate Care	Inpatient Beds	0	
☐ Skilled Nursing	Inpatient Beds	0	

☐ Surgical
☐ Anesthesia
☐ Clinical Lab
☐ Radiological/ Imaging
☐ Pharmaceutical
☐ Dietetic
☐ Administration

☐ Obstetrical Cesarean/Deliv
☐ Obstetrical Recovery
☐ Newborn/ WellBaby
☐ Emergency
☐ Nuclear Medicine

☐ Rehabilitation Therapy
☐ Renal Dialysis
☐ Outpatient Surgery
☐ Central Plant
☒ Support Services

Total Beds this Building | 10

Report Status: **Data Last Update:** 01/12/2012   **Submission Date:** 01/29/2012   **Print Date:** 1/30/2012 12:45 PM

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: **Chiller Building**

Type of Service Provided

☐ Nursing	Inpatient Beds	0
☐ IntensiveCare	Inpatient Beds	0
☐ Pediatric/Adolescent	Inpatient Beds	0
☐ Psychiatric Nursing	Inpatient Beds	0
☐ Obstetrical Ante/Postprtum	Inpatient Beds	0
☐ Intermediate Care	Inpatient Beds	0
☐ Skilled Nursing	Inpatient Beds	0
Total Beds this Building		0

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/ Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical Cesarean/Deliv

☐ Obstetrical Recovery

☐ Newborn/ WellBaby

☐ Emergency

☐ Nuclear Medicine

☐ Rehabilitation Therapy

☐ Renal Dialysis

☐ Outpatient Surgery

☒ Central Plant

☒ Support Services

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: **Generator Building**

Type of Service Provided

☐ Nursing	Inpatient Beds	0
☐ IntensiveCare	Inpatient Beds	0
☐ Pediatric/Adolescent	Inpatient Beds	0
☐ Psychiatric Nursing	Inpatient Beds	0
☐ Obstetrical Ante/Postprtum	Inpatient Beds	0
☐ Intermediate Care	Inpatient Beds	0
☐ Skilled Nursing	Inpatient Beds	0

Total Beds this Building   0

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/ Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical Cesarean/Deliv

☐ Obstetrical Recovery

☐ Newborn/ WellBaby

☐ Emergency

☐ Nuclear Medicine

☐ Rehabilitation Therapy

☐ Renal Dialysis

☐ Outpatient Surgery

☒ Central Plant

☒ 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)

Building Number: **09** Building Name: **Medical Office Building**

Type of Service Provided

☐ Nursing	Inpatient Beds	0	
☐ IntensiveCare	Inpatient Beds	0	
☐ Pediatric/Adolescent	Inpatient Beds	0	
☐ Psychiatric Nursing	Inpatient Beds	0	
☐ Obstetrical Ante/Postprtum	Inpatient Beds	0	
☐ Intermediate Care	Inpatient Beds	0	
☐ Skilled Nursing	Inpatient Beds	0	

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/ Imaging

☐ Pharmaceutical

☐ Dietetic

☒ Administration

☐ Obstetrical Cesarean/Deliv

☐ Obstetrical Recovery

☐ Newborn/ WellBaby

☐ Emergency

☐ Nuclear Medicine

☐ Rehabilitation Therapy

☐ Renal Dialysis

☐ Outpatient Surgery

☐ Central Plant

☒ Support Services

Total Beds this Building: 0

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: 01   **Building Name:** Main Tower

Medical / Surgical (Include GYN)

Inpatient Bed: 118   Inpatient Days: 16314

Acute Respiratory Care

Inpatient Bed: 0   Inpatient Days: 0

Acute Psychiatric

Inpatient Bed: 0   Inpatient Days: 0

Perinatal (exclude Newborn / GYN)

Inpatient Bed: 23   Inpatient Days: 2673

Burn

Inpatient Bed: 0   Inpatient Days: 0

Skilled Nursing

Inpatient Bed: 0   Inpatient Days: 0

Pediatric

Inpatient Bed: 0   Inpatient Days: 0

intensive Care Newborn Nursery

Inpatient Bed: 10   Inpatient Days: 0

Intermediate Card

Inpatient Bed: 0   Inpatient Days: 0

Intensive Care

Inpatient Bed: 0   Inpatient Days: 0

Rehabilitation Center

Inpatient Bed: 0   Inpatient Days: 0

Int. Care / development Disabled

Inpatient Bed: 0   Inpatient Days: 0

Coronary Care

Inpatient Bed: 0   Inpatient Days: 0

Chemical Dependency

Inpatient Bed: 0   Inpatient Days: 0

Total Beds this Building Per Unit

151

Total Beds this Building Per Service

151

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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: 02   **Building Name:** West Wing

Medical / Surgical (Include GYN)

Inpatient Bed: 0   Inpatient Days: 0

Acute Respiratory Care

Inpatient Bed: 0   Inpatient Days: 0

Acute Psychiatric

Inpatient Bed: 0   Inpatient Days: 0

Perinatal (exclude Newborn / GYN)

Inpatient Bed: 0   Inpatient Days: 0

Burn

Inpatient Bed: 0   Inpatient Days: 0

Skilled Nursing

Inpatient Bed: 0   Inpatient Days: 0

Pediatric

Inpatient Bed: 0   Inpatient Days: 0

intensive Care Newborn Nursery

Inpatient Bed: 0   Inpatient Days: 0

Intermediate Card

Inpatient Bed: 0   Inpatient Days: 0

Intensive Care

Inpatient Bed: 10   Inpatient Days: 2348

Rehabilitation Center

Inpatient Bed: 22   Inpatient Days: 3016

Int. Care / development Disabled

Inpatient Bed: 0   Inpatient Days: 0

Coronary Care

Inpatient Bed: 5   Inpatient Days: 0

Chemical Dependency

Inpatient Bed: 0   Inpatient Days: 0

Total Beds this Building Per Unit

37

Total Beds this Building Per Service

37

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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: 03   **Building Name:** East Wing

Medical / Surgical (Include GYN)

Inpatient Bed: 0   Inpatient Days: 0

Acute Respiratory Care

Inpatient Bed: 0   Inpatient Days: 0

Acute Psychiatric

Inpatient Bed: 39   Inpatient Days: 10317

Perinatal (exclude Newborn / GYN)

Inpatient Bed: 0   Inpatient Days: 0

Burn

Inpatient Bed: 0   Inpatient Days: 0

Skilled Nursing

Inpatient Bed: 0   Inpatient Days: 0

Pediatric

Inpatient Bed: 0   Inpatient Days: 0

intensive Care Newborn Nursery

Inpatient Bed: 0   Inpatient Days: 0

Intermediate Card

Inpatient Bed: 0   Inpatient Days: 0

Intensive Care

Inpatient Bed: 0   Inpatient Days: 0

Rehabilitation Center

Inpatient Bed: 0   Inpatient Days: 0

Int. Care / development Disabled

Inpatient Bed: 0   Inpatient Days: 0

Coronary Care

Inpatient Bed: 0   Inpatient Days: 0

Chemical Dependency

Inpatient Bed: 0   Inpatient Days: 0

Total Beds this Building Per Unit

39

Total Beds this Building Per Service

39

Report Status: **Data Last Update:** 01/12/2012   **Submission Date:** 01/29/2012   **Print Date:** 1/30/2012 12:45 PM

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: 04   **Building Name:** ER Expansion

Medical / Surgical (Include GYN)

Inpatient Bed [0]   Inpatient Days [0]

Acute Respiratory Care

Inpatient Bed [0]   Inpatient Days [0]

Acute Psychiatric

Inpatient Bed [0]   Inpatient Days [0]

Perinatal (exclude Newborn / GYN)

Inpatient Bed [0]   Inpatient Days [0]

Burn

Inpatient Bed [0]   Inpatient Days [0]

Skilled Nursing

Inpatient Bed [0]   Inpatient Days [0]

Pediatric

Inpatient Bed [0]   Inpatient Days [0]

intensive Care Newborn Nursery

Inpatient Bed [0]   Inpatient Days [0]

Intermediate Card

Inpatient Bed [0]   Inpatient Days [0]

Intensive Care

Inpatient Bed [0]   Inpatient Days [0]

Rehabilitation Center

Inpatient Bed [0]   Inpatient Days [0]

Int. Care / development Disabled

Inpatient Bed [0]   Inpatient Days [0]

Coronary Care

Inpatient Bed [0]   Inpatient Days [0]

Chemical Dependency

Inpatient Bed [0]   Inpatient Days [0]

Total Beds this Building Per Unit

[0]

Total Beds this Building Per Service

[0]

Report Status: **Data Last Update:** 01/12/2012   **Submission Date:** 01/29/2012   **Print Date:** 1/30/2012 12:45 PM

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: 05   **Building Name:** Boiler Building

Medical / Surgical (Include GYN)

Inpatient Bed: 0   Inpatient Days: 0

Acute Respiratory Care

Inpatient Bed: 0   Inpatient Days: 0

Acute Psychiatric

Inpatient Bed: 0   Inpatient Days: 0

Perinatal (exclude Newborn / GYN)

Inpatient Bed: 0   Inpatient Days: 0

Burn

Inpatient Bed: 0   Inpatient Days: 0

Skilled Nursing

Inpatient Bed: 0   Inpatient Days: 0

Pediatric

Inpatient Bed: 0   Inpatient Days: 0

intensive Care Newborn Nursery

Inpatient Bed: 0   Inpatient Days: 0

Intermediate Card

Inpatient Bed: 0   Inpatient Days: 0

Intensive Care

Inpatient Bed: 0   Inpatient Days: 0

Rehabilitation Center

Inpatient Bed: 0   Inpatient Days: 0

Int. Care / development Disabled

Inpatient Bed: 0   Inpatient Days: 0

Coronary Care

Inpatient Bed: 0   Inpatient Days: 0

Chemical Dependency

Inpatient Bed: 0   Inpatient Days: 0

Total Beds this Building Per Unit

0

Total Beds this Building Per Service

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   **Building Name:** Pediatrics Wing

Medical / Surgical (Include GYN)

Inpatient Bed: 0   Inpatient Days: 0

Acute Respiratory Care

Inpatient Bed: 0   Inpatient Days: 0

Acute Psychiatric

Inpatient Bed: 0   Inpatient Days: 0

Perinatal (exclude Newborn / GYN)

Inpatient Bed: 0   Inpatient Days: 0

Burn

Inpatient Bed: 0   Inpatient Days: 0

Skilled Nursing

Inpatient Bed: 0   Inpatient Days: 0

Pediatric

Inpatient Bed: 10   Inpatient Days: 0

intensive Care Newborn Nursery

Inpatient Bed: 0   Inpatient Days: 0

Intermediate Card

Inpatient Bed: 0   Inpatient Days: 0

Intensive Care

Inpatient Bed: 0   Inpatient Days: 0

Rehabilitation Center

Inpatient Bed: 0   Inpatient Days: 0

Int. Care / development Disabled

Inpatient Bed: 0   Inpatient Days: 0

Coronary Care

Inpatient Bed: 0   Inpatient Days: 0

Chemical Dependency

Inpatient Bed: 0   Inpatient Days: 0

Total Beds this Building Per Unit

10

Total Beds this Building Per Service

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: 07   **Building Name:** Chiller Building

Medical / Surgical (Include GYN)

Inpatient Bed	0	Inpatient Days	0

Acute Respiratory Care

Inpatient Bed	0	Inpatient Days	0

Acute Psychiatric

Inpatient Bed	0	Inpatient Days	0

Perinatal (exclude Newborn / GYN)

Inpatient Bed	0	Inpatient Days	0

Burn

Inpatient Bed	0	Inpatient Days	0

Skilled Nursing

Inpatient Bed	0	Inpatient Days	0

Pediatric

Inpatient Bed	0	Inpatient Days	0

intensive Care Newborn Nursery

Inpatient Bed	0	Inpatient Days	0

Intermediate Card

Inpatient Bed	0	Inpatient Days	0

Intensive Care

Inpatient Bed	0	Inpatient Days	0

Rehabilitation Center

Inpatient Bed	0	Inpatient Days	0

Int. Care / development Disabled

Inpatient Bed	0	Inpatient Days	0

Coronary Care

Inpatient Bed	0	Inpatient Days	0

Chemical Dependency

Inpatient Bed	0	Inpatient Days	0

Total Beds this Building Per Unit

0

Total Beds this Building Per Service

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: 08   **Building Name:** Generator Building

Medical / Surgical (Include GYN)

Inpatient Bed	0	Inpatient Days	0

Acute Respiratory Care

Inpatient Bed	0	Inpatient Days	0

Acute Psychiatric

Inpatient Bed	0	Inpatient Days	0

Perinatal (exclude Newborn / GYN)

Inpatient Bed	0	Inpatient Days	0

Burn

Inpatient Bed	0	Inpatient Days	0

Skilled Nursing

Inpatient Bed	0	Inpatient Days	0

Pediatric

Inpatient Bed	0	Inpatient Days	0

intensive Care Newborn Nursery

Inpatient Bed	0	Inpatient Days	0

Intermediate Card

Inpatient Bed	0	Inpatient Days	0

Intensive Care

Inpatient Bed	0	Inpatient Days	0

Rehabilitation Center

Inpatient Bed	0	Inpatient Days	0

Int. Care / development Disabled

Inpatient Bed	0	Inpatient Days	0

Coronary Care

Inpatient Bed	0	Inpatient Days	0

Chemical Dependency

Inpatient Bed	0	Inpatient Days	0

Total Beds this Building Per Unit 0

Total Beds this Building Per Service 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   **Building Name:** Medical Office Building

Medical / Surgical (Include GYN)

Inpatient Bed: 0   Inpatient Days: 0

Acute Respiratory Care

Inpatient Bed: 0   Inpatient Days: 0

Acute Psychiatric

Inpatient Bed: 0   Inpatient Days: 0

Perinatal (exclude Newborn / GYN)

Inpatient Bed: 0   Inpatient Days: 0

Burn

Inpatient Bed: 0   Inpatient Days: 0

Skilled Nursing

Inpatient Bed: 0   Inpatient Days: 0

Pediatric

Inpatient Bed: 0   Inpatient Days: 0

intensive Care Newborn Nursery

Inpatient Bed: 0   Inpatient Days: 0

Intermediate Card

Inpatient Bed: 0   Inpatient Days: 0

Intensive Care

Inpatient Bed: 0   Inpatient Days: 0

Rehabilitation Center

Inpatient Bed: 0   Inpatient Days: 0

Int. Care / development Disabled

Inpatient Bed: 0   Inpatient Days: 0

Coronary Care

Inpatient Bed: 0   Inpatient Days: 0

Chemical Dependency

Inpatient Bed: 0   Inpatient Days: 0

Total Beds this Building Per Unit

0

Total Beds this Building Per Service

0

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