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

Facility Number:	10670	
Facility Name:	Kaiser Fou	Indation Hospital - Fontana
Address:	9961 Sierr	a Avenue
City:	Fontana	
Hospital Owner/Lice	ensee:	Kaiser Foundation Hospitals/#240000159
Year of Rep	orting:	2012
Contact 1 e-mail Ad	dress:	
Contact 2 e-mail Ad	dress:	
Contact 3 e-mail Add	dress::	
Name of Sub	mitter:	Heidi Davis
Submission	Date:	1/10/2013 4:31:00 PM

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For buildings For buildings which are planned for rebuild, retrofit or replacement this report shall identify; Whether the hospital owner intends to rebuild, retrofit or replace the building to SPC2, SPC3, SPC4 or SPC5 per 130061(c)(1)(A). The deadline, as described in Section 130060 or 130061.5, for rebuild, 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.	<b>Building Name</b>	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date
BLD- 01487	Phase 1A Original / Wing B Building	9961 Sierra Avenue	Rebuild	SPC5	01/01/2015	01/01/2015
BLD- 01488	Wing A	9961 Sierra Avenue	Rebuild	SPC5	01/01/2015	01/01/2015
BLD- 01489	Phase 1A North	9961 Sierra Avenue	Rebuild	SPC5	01/01/2015	01/01/2015
BLD- 01490	Wing E	9961 Sierra Avenue	Rebuild	SPC5	01/01/2015	01/01/2015
BLD- 01492	Phase 1B South	9961 Sierra Avenue	Rebuild	SPC5	01/01/2015	01/01/2015
BLD- 01493	Wing A Addition	9961 Sierra Avenue	Rebuild	SPC5	01/01/2015	01/01/2015
BLD- 01495	Phase 1A3	9961 Sierra Avenue	Rebuild	SPC5	01/01/2015	01/01/2015
BLD- 05512	Phase 3	9961 Sierra Avenue	Rebuild	SPC5	01/01/2015	01/01/2015

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For each building which is planned for rebuild, retrofit 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: BLD-01487 Phase 1A Original / Wing B Building	Retrofit/Replacement Yes-Submitted Project:
Facility Project Sub Scope Number Num	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
10670 IL080368-0 0 PPR REPLACEMENT HOSPITAL B417116- 0230-151-00	2/27/2008 02/27/2008 01/01/2015 ACTI No 12:00:00 AM
Building No: BLD-01488 Wing A	Retrofit/Replacement Yes-Submitted Project:
Facility Project Sub Scope Number Num	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
10670 IL080368-0 0 PPR REPLACEMENT HOSPITAL B417116- 0230-151-00	2/27/2008 02/27/2008 01/01/2015 ACTI No 12:00:00 AM
Building No: BLD-01489 Phase 1A North	Retrofit/Replacement Yes-Submitted Project:
Facility Project Sub Scope Number Num	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
10670 IL080368-0 0 PPR REPLACEMENT HOSPITAL B417116- 0230-151-00	2/27/2008 02/27/2008 01/01/2015 ACTI No 12:00:00 AM

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Building No: BLD-01490 Wing E	Retrofit/Replacement Yes-Submitted Project:
Facility Project Sub Scope Number Number Num	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
10670 IL080368-0 0 PPR REPLACEMENT HOSPITAL B417116- 0230-151-00	2/27/2008 02/27/2008 01/01/2015 ACTI No 12:00:00 AM
Building No: BLD-01492 Phase 1B South	Retrofit/Replacement Yes-Submitted Project:
Facility Project Sub Scope Number Number Num	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
10670 IL080368-0 0 PPR REPLACEMENT HOSPITAL B417116- 0230-151-00	2/27/2008 02/27/2008 01/01/2015 ACTI No 12:00:00 AM
Building No: BLD-01493 Wing A Addition	Retrofit/Replacement Yes-Submitted Project:
Facility Project Sub Scope Number Number Num	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
10670 IL080368-0 0 PPR REPLACEMENT HOSPITAL B417116- 0230-151-00	2/27/2008 02/27/2008 01/01/2015 ACTI No 12:00:00 AM
Building No: BLD-01495 Phase 1A3	Retrofit/Replacement Yes-Submitted Project:
Facility Project Sub Scope Number Number Num	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
10670 IL080368-0 0 PPR REPLACEMENT HOSPITAL B417116- 0230-151-00	2/27/2008 02/27/2008 01/01/2015 ACTI No 12:00:00 AM

Kaiser Foundation Hospital - Fontana Report Year: 2012 10670 Fontana Page:5 of 80 Phase 3 Building No: BLD-05512 Retrofit/Replacement Yes-Submitted Project: Facility Project Sub Number Number Num Status CEQA Scope Date Plan Approved Proj. Start Proj. Completed Date Ďate Date Review 0 PPR REPLACEMENT HOSPITAL B417116-No 10670 IL080368-0 2/27/2008 02/27/2008 01/01/2015 **ACTI** 0230-151-00 12:00:00 AM

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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: BL	.D-01487	Building Name:	Phase 1A Original / Wing B Building	J
Type of Service Prov	<u>rided</u>			_
X Nursing	Inpatient Beds	32 Inpatient 9649 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	<b>-1</b>	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: BL	D-01488	Building Name:	Wing A	
Type of Service Prov	<u>rided</u>			
X Nursing	Inpatient Beds	12 Inpatient 3708 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 Emergence	у
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Nuclear Medicine	
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	X Pharmaceutical  Dietetic Rehabilitat Therapy	tion
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration Renal Dial	-
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Outpatient Surgery  Obstetrical	[
		Total Beds this Building	Central Pla	ant

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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: BL	D-01489	Building Name:	hase 1A North	
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	X 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  X Support	X Renal Dialysis  Outpatient
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0  Total Beds this 0	Services  Obstetrical Cesarean/Deliv	Surgery
		Building	0000100111120111	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: BL	_D-01490	Building Name:	Wing E	
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
X Pediatric/Adol escent	Inpatient Beds	40 Inpatient Days 4602	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	X 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 40	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: BL	.D-01492	Building Name: Pho	ase 1B South	
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	X Clinical Lab	X Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	X Pharmaceutical  Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	X Support Services  Obstetrical	Outpatient Surgery
		Total Beds this Building	Cesarean/Deliv	Central Plant

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

Building Number: BL	_D-01493	Building Name:	Wing A Addition	
Type of Service Prov	<u>/ided</u>	·		
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery
X IntensiveCare	Inpatient Beds	10 Inpatient Days 3236	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	X 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: BL	.D-01495	Building Name: Pr	hase 1A3	
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	X 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	X Support Services Obstetrical Cesarean/Deliv	Outpatient Surgery
		Building		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: BL	_D-05512	Building Name: Pr	hase 3	
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	X 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:	BLD-01487	Building Name:	Phase 1A Original / Wing B E	Building	
Medical / Surgical (	Include GYN)	Acute Respira	atory Care	Acute Psychiatric	
Inpatient 32 Bed	Inpatient 9649 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	lewborn / 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	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 / developr Disabled	nent
	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 Days	Inpatient Bed	0 Inpatient 0 Days	32	32

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Building Number: BLD-014	88 Building Name:	Wing A		
Medical / Surgical (Include G	YN) Acute Re	espiratory Care	Acute I	Psychiatric
Inpatient 12 Inpatient Days	3708 Inpatient Bed	0 Inpatient Days	0 Inpatier Bed	nt 0 Inpatient 0 Days
Perinatal (excluse Newborn /	GYN) Burn		Skilled	Nursing
Inpatient 0 Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatier Bed	nt 0 Inpatient 0 Days
Pediatric	intensive Nursery	e Care Newborn	Interme	ediate Card
Inpatient 0 Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatier Bed	nt 0 Inpatient 0 Days
Intensive Care	Rehabilit Center	ation	Int. Car Disable	e / development ed
Inpatient 0 Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatien Bed	ot 0 Inpatient 0 Days
Coronary Care	Chemica Depende		Total B Buildin Unit	eds this Total Beds this g Per Building Per Service
Inpatient 0 Inpatient Bed Days	0 Inpatient Bed	0 Inpatient Days	0	12 12

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Building Number:	BLD-01489	Building Name:	Phase 1A North		
Medical / Surgical	(Include GYN)	Acute Respirat	tory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient (	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient (	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nursery	Newborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient C Bed	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 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0

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Building Number: BLD-01490	Building Name: Wing	g E		
Medical / Surgical (Include GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric	intensive Care Nev Nursery	wborn	Intermediate Card	
Inpatient 40 Inpatient 4602 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care	Rehabilitation Center		Int. Care / developn Disabled	nent
Inpatient 0 Inpatient 0 Bed 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 Inpatient 0 Bed Days	Inpatient 0 Bed	Inpatient 0 Days	40	40

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Building Number:	BLD-01492	Building Name:	Phase 1B South		
Medical / Surgical	(Include GYN)	Acute Respira	tory Care	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 Care Nursery	Newborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	O Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developi Disabled	ment
Inpatient 0 Bed	Inpatient 0 Days	Inpatient (	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient (	Inpatient 0 Days	0	0

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Building Number:	BLD-01493	Building Name: Wing	g A Addition		
Medical / Surgical	(Include GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nev Nursery	wborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developn Disabled	nent
Inpatient 10 Bed	Inpatient 3236 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	10	10

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Building Number:	BLD-01495	Building Name: Phas	se 1A3		
Medical / Surgical	(Include GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nev Nursery	wborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developn Disabled	nent
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0

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Building Number: BLD-05512	Building Name:	Phase 3		
Medical / Surgical (Include GYN)	Acute Respirate	ory Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric	intensive Care I Nursery	Newborn	Intermediate Card	
Inpatient 0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care	Rehabilitation Center		Int. Care / develop	ment
Inpatient 0 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 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 / Replaced / Rebuilt
BLD-01487	Phase 1A Original / Wing B Building	Rebuild
BLD-01488	Wing A	Rebuild
BLD-01489	Phase 1A North	Rebuild
BLD-01490	Wing E	Rebuild
BLD-01492	Phase 1B South	Rebuild
BLD-01493	Wing A Addition	Rebuild
BLD-01494	Phase 2	Rebuild
BLD-01495	Phase 1A3	Rebuild
BLD-01496	Central Plant	Rebuild
BLD-01497	Phase 1B North	Replace
BLD-01498	Phase 4 Building	Rebuild
BLD-01499	Phase 5 Building	Remain
BLD-01500	MRI Addition	Remain
BLD-01501	Telecom Addition	Remain
BLD-03053	Parking Structure	Remain
BLD-05512	Phase 3	Rebuild

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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	Fontana Replacement Hosp	
N_2	Phase 3	

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Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c) (2)(E)

Building Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Nursing  Relocated to new building	
Building Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Medical/Surgical (Include GYN)  RetroFitted Building  Other SPC2-SPC5 Building	
N_1-Fontana Replacement Hosp  Building BLD-01488 Building Name: Wing A	
Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Nursing  Relocated to new building	

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Building Number:	BLD-01488 Buildii	ng Name: Wing A				
Will general acut	tr care services and be	ds will be relocated to a new, Existing or ret	rofittrd building?			
Pharmaceutical	Relocated to ne	w building				
New B	Building	RetroFitted Building	Other SP	C2-SPC5 Building		
N_1-Fontana Rep	lacement Hosp					
Building Number:	BLD-01488 Buildin	ng Name: Wing A		]		
Will general acut	tr care services and be	ds will be relocated to a new, Existing or ret	rofittrd building?			
Medical/Surgical (Include GYN)	Relocated to ne	w building				
New B	Building	RetroFitted Building	Other SP	C2-SPC5 Building		
N_1-Fontana Rep	lacement Hosp					
Building Number:	BLD-01489 Buildin	ng Name: Phase 1A North		]		
Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?						
Radiological/Imaging Relocated to new building						
New B	Building	RetroFitted Building	Other SP	C2-SPC5 Building		
N_1-Fontana Rep	lacement Hosp					

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Building Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?							
Support Services	Relocated to new build	ding					
New Bui	lding	RetroFitted Building	Other SPC2-S	SPC5 Building			
N_1-Fontana Replac	ement Hosp						
Building Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Renal Dialysis  Relocated to new building  New Building  RetroFitted Building  Other SPC2-SPC5 Building							
N_1-Fontana Replacement Hosp							
Building Number:	BLD-01490 Building Nan	ne: Wing E					
Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?							
Pediatric Adolesce	Relocated to new & ot	her Building					

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Number:	D-01490 Building Name:	Wing E elocated to a new, Existing or retrofittrd	building?			
Pharmaceutical	Relocated to new building					
New Buildin	g	RetroFitted Building	Other SPC2-SPC5 Buildi	ng		
N_1-Fontana Replaceme	ent Hosp					
Building BLI Number:	D-01490 Building Name:	Wing E				
Will general acutr care	e services and beds will be re	elocated to a new, Existing or retrofittrd	building?			
Pediatric	Relocated to new & other	Building				
New Buildin	g	RetroFitted Building	Other SPC2-SPC5 Buildi	ng		
N_1-Fontana Replaceme	ent Hosp					
Building Number:	D-01492 Building Name:	Phase 1B South				
Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?						
ClinicalLab	Relocated to new building					
New Buildin	g	RetroFitted Building	Other SPC2-SPC5 Buildi	ng		
N_1-Fontana Replaceme	ent Hosp					

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Building Number:  BLD-01492 Building Name: Phase 1B South  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?							
			building?				
Pharmaceutical	Relocated to new building						
New Buildir	ng	RetroFitted Building	Other SPC2-SPC5 Build	<u>ng</u>			
N_1-Fontana Replacem	ent Hosp						
Building BL Number:	D-01492 Building Name:	Phase 1B South					
Will general acutr car	e services and beds will be r	elocated to a new, Existing or retrofittrd	building?				
Support Services	Relocated to new building		7				
New Buildir	na	RetroFitted Building	Other SPC2-SPC5 Build	na			
N_1-Fontana Replacem		•					
Building BL Number:	D-01492 Building Name:	Phase 1B South					
Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?							
Emergency	Relocated to new building						
New Buildir	ng	RetroFitted Building	Other SPC2-SPC5 Build	<u>ng</u>			
N_1-Fontana Replacem	N_1-Fontana Replacement Hosp						

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Building Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Intensive Care  Relocated to new building						
Pharmaceutical  New B  N_1-Fontana Repl  Building Number:  Will general acut  Intensive Care	Relocated to resulting Building BLD-01493 Build Building Relocated to resulting	RetroFitted Building  ling Name: Wing A Addition  eds will be relocated to a new, Existing or re	Other SP0	C2-SPC5 Building  C2-SPC5 Building		
Building Number: Will general acut Nursing		ling Name: Phase 2 eds will be relocated to a new, Existing or re	etrofittrd building?			

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Building Name: Phase 2 Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?							
Intensive Care Relocated to new building							
New Building RetroFitted Building Other SPC2-SPC5 Building							
N_1-Fontana Replacement Hosp							
Building BLD-01494 Building Name: Phase 2 Number:							
Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?							
Obstetrical Ante Postprtum Relocated to new building							
New Building RetroFitted Building Other SPC2-SPC5 Building							
N_1-Fontana Replacement Hosp							
Building Number: BLD-01494 Building Name: Phase 2							
Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?							
Surgical Relocated to new building							
New Building RetroFitted Building Other SPC2-SPC5 Building							
N_1-Fontana Replacement Hosp							

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Building Name: Phase 2 Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?							
Anesthesia	Relocated to new bui	lding					
New Buildi	ng	RetroFitted Building	Other SPC2-SPC5 E	Building			
N_1-Fontana Replacer	nent Hosp						
Building Number:	_D-01494 Building Na	me: Phase 2					
Will general acutr ca	re services and beds will	be relocated to a new, Existing or retrofi	ttrd building?				
Pharmaceutical	Relocated to new bui	lding					
New Buildi	ng	RetroFitted Building	Other SPC2-SPC5 E	Building			
N_1-Fontana Replacer	nent Hosp						
Building BI Number:	LD-01494 Building Na	me: Phase 2					
Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?							
Support Services	Relocated to new bui	lding					
New Buildi	ng	RetroFitted Building	Other SPC2-SPC5 E	Building			
N_1-Fontana Replacement Hosp							

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Building Number:  Phase 2  Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?						
Obstetrical Relocated to new building Cesarean/Deliv						
New Building RetroFitted Building Other SPC2-SPC5 Building  N_1-Fontana Replacement Hosp						
Building Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Obstetrical Recovery Relocated to new building						
New Building RetroFitted Building Other SPC2-SPC5 Building  N_1-Fontana Replacement Hosp						
Building Name: Phase 2 Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Newborn/Well Baby Relocated to new building						
New Building RetroFitted Building Other SPC2-SPC5 Building  N_1-Fontana Replacement Hosp	<u> </u>					

Building Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Medical/Surgical (Include GYN)  New Building Relocated to new building  N_1-Fontana Replacement Hosp  Building Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Building Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Perinatal (exclude Newborn / GYN))  New Building Relocated to new building Name: Phase 2  N_1-Fontana Replacement Hosp  Building Name: Phase 2  Building N_1-Fontana Replacement Hosp  Building Name: Phase 2  Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  RetroFitted Building Other SPC2-SPC5 Building  N_1-Fontana Replacement Hosp  Relocated to new building  RetroFitted Building Other SPC2-SPC5 Building?  RetroFitted Building Other SPC2-SPC5 Building  N_1-Fontana Replacement Hosp	Report Year: 2	2012 10670 Kaiser F	oundation Hospital - Fontana	Fontana	Page:33 of 80		
Medical/Surgical (Include GYN)  New Building RetroFitted Building Other SPC2-SPC5 Building  N_1-Fontana Replacement Hosp  Building BLD-01494 Building Name: Phase 2 Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Perinatal (exclude Newborn / GYN))  New Building RetroFitted Building Other SPC2-SPC5 Building  N_1-Fontana Replacement Hosp  Building BLD-01494 Building Name: Phase 2  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  N_1-Fontana Replacement Hosp  Building BLD-01494 Building Name: Phase 2  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Intensive Care Relocated to new building  New Building RetroFitted Building Other SPC2-SPC5 Building	Number:						
New Building RetroFitted Building Other SPC2-SPC5 Building  N_1-Fontana Replacement Hosp  Building Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Perinatal (exclude Newborn / GYN))  New Building RetroFitted Building Other SPC2-SPC5 Building  N_1-Fontana Replacement Hosp  Building Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  New Building Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Intensive Care Relocated to new building  New Building RetroFitted Building Other SPC2-SPC5 Building  New Building RetroFitted Building Other SPC2-SPC5 Building	Will general acutr car	e services and beds will be r	elocated to a new, Existing or retrofittrd	building?			
Building Name: Phase 2 Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Perinatal (exclude Newborn / GYN))  New Building RetroFitted Building Other SPC2-SPC5 Building  BLD-01494 Building Name: Phase 2 Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  BLD-01494 Building Name: Phase 2 Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Intensive Care Relocated to new building  New Building NetroFitted Building Other SPC2-SPC5 Building		Relocated to new building					
Building Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Perinatal (exclude Newborn / GYN))  New Building RetroFitted Building Other SPC2-SPC5 Building  BLD-01494 Building Name: Phase 2  Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  BLD-01494 Building Name: Phase 2  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Intensive Care Relocated to new building  New Building NetroFitted Building Other SPC2-SPC5 Building	New Buildir	ng	RetroFitted Building	Other SPC	22-SPC5 Building		
Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Perinatal (exclude Newborn / GYN))  New Building  RetroFitted Building  N_1-Fontana Replacement Hosp  Building  Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  RetroFitted Building  New Building  RetroFitted Building  Other SPC2-SPC5 Building  New Building  Other SPC2-SPC5 Building	N_1-Fontana Replacem	nent Hosp					
Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Perinatal (exclude Newborn / GYN))  New Building  RetroFitted Building  N_1-Fontana Replacement Hosp  Building  Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  RetroFitted Building  New Building  RetroFitted Building  Other SPC2-SPC5 Building  New Building  Other SPC2-SPC5 Building							
Perinatal (exclude Newborn / GYN))  New Building  RetroFitted Building  N_1-Fontana Replacement Hosp  Building Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Intensive Care  Relocated to new building  RetroFitted Building  RetroFitted Building  Other SPC2-SPC5 Building  Other SPC2-SPC5 Building  New Building  RetroFitted Building  Other SPC2-SPC5 Building		.D-01494 Building Name:	Phase 2				
New Building RetroFitted Building Other SPC2-SPC5 Building  N_1-Fontana Replacement Hosp  Building Name: Phase 2 Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Intensive Care Relocated to new building  New Building RetroFitted Building Other SPC2-SPC5 Building	Will general acutr car	e services and beds will be r	elocated to a new, Existing or retrofittrd	building?			
Building Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Intensive Care Relocated to new building  New Building RetroFitted Building Other SPC2-SPC5 Building		Relocated to new building					
Building Name: Phase 2  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Intensive Care Relocated to new building  New Building RetroFitted Building Other SPC2-SPC5 Building	New Buildir	ng	RetroFitted Building	Other SPC	22-SPC5 Building		
Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Intensive Care  Relocated to new building  New Building  RetroFitted Building  Other SPC2-SPC5 Building	N_1-Fontana Replacem	nent Hosp					
Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Intensive Care  Relocated to new building  New Building  RetroFitted Building  Other SPC2-SPC5 Building							
Intensive Care Relocated to new building  New Building RetroFitted Building Other SPC2-SPC5 Building		.D-01494 Building Name:	Phase 2				
New Building RetroFitted Building Other SPC2-SPC5 Building	Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?						
	Intensive Care	Relocated to new building					
N_1-Fontana Replacement Hosp	New Buildir	ng	RetroFitted Building	Other SPC	22-SPC5 Building		
	N_1-Fontana Replacem	nent Hosp					

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Building Name: Phase 2 Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Intensive Care Newborn Nursery  Relocated to new building					
Building Number: Will general acut	BLD-01495 Building Name: Phase 1A3  r care services and beds will be relocated to a new, Existing or retro	ofittrd building?			
New B		Other SPC2-SPC5 Buildi	na		
N_1-Fontana Repl		Other of 02 of 03 Buildi	<u>ng</u>		
N_1-Fontaria Repi	асетен поѕр				
Facility Project	Sub Scope [	Date Plan Approved Proj. Start Proj. C	ompleted		
Status Number Number	Num	in Date Date	Date		
10670 IL08	0368-0 0 PPR REPLACEMENT HOSPITAL B417116-0230- 2 151-00	2008-02-27 05/11/2009 0	1/01/2015 ACTI		
Building Number:	BLD-01495 Building Name: Phase 1A3				
Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?					
Support Services Relocated to new building					
		Other SPC2-SPC5 Buildi	<u>ny</u>		
N_1-Fontana Repl	acement Hosp				

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Building Number:  Central Plant Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?							
Support Services	Relocated to new & retrofi	tted Buildina	7				
New Building		RetroFitted Building	Other SPC2-SPC5	Building			
N_1-Fontana Replaceme		rtonor mod Bunding	<u> </u>	Danamg			
n_11 omana replaceme	житоор						
Building BLC Number:	0-01496 Building Name:	Central Plant					
Will general acutr care	services and beds will be r	elocated to a new, Existing or retrofittrd	building?				
CentralPlant	Relocated to new & retrofi	tted Building					
New Building	<u> </u>	RetroFitted Building	Other SPC2-SPC5	Building			
N_1-Fontana Replaceme	ent Hosp						
Building BLC Number:	D-01497 Building Name:	Phase 1B North					
Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?							
Pharmaceutical	Relocated to new building		]				
New Building		RetroFitted Building	Other SPC2-SPC5	Building			
N_1-Fontana Replacement Hosp							

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Building Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Nursing Relocated to new building							
Building Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Obstetrical Ante Postprtum  New Building  RetroFitted Building  N_1-Fontana Replacement Hosp							
Building Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Paleocted to new building							
Surgical Relocated to new building  New Building  N_1-Fontana Replacement Hosp	RetroFitted Building	Uther SPC2-SPC5 Building	<u>g</u>				

Report Year: 2012 10670 Kaiser Foundation Hospital - Fontana Fontana Page:37 of 80 BLD-01498 **Building Name:** Phase 4 Building Building Number: Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building? Relocated to new & retrofitted Building Pharmaceutical **New Building** RetroFitted Building Other SPC2-SPC5 Building N\_1-Fontana Replacement Hosp BLD-01498 **Building Name:** Phase 4 Building Building Number: Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building? Relocated to new & retrofitted Building Administration **New Building** RetroFitted Building Other SPC2-SPC5 Building N\_1-Fontana Replacement Hosp BLD-01498 **Building Name:** Phase 4 Building Buildina Number: Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building? Support Services Relocated to new & retrofitted Building **New Building** Other SPC2-SPC5 Building RetroFitted Building N\_1-Fontana Replacement Hosp

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Building BL Number:	D-01498 Building Name:	Phase 4 Building					
Will general acutr car	e services and beds will be r	elocated to a new, Existing or retrofittrd	building?				
Obstetrical Recovery	Relocated to new building		7				
New Buildin	ng	RetroFitted Building	Other SPC2-	SPC5 Building			
N_1-Fontana Replacen	nent Hosp	-					
Building Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Medical/Surgical (Include GYN)  New Building RetroFitted Building Other SPC2-SPC5 Building  N_1-Fontana Replacement Hosp							
Number:	D-01498 Building Name: e services and beds will be r	Phase 4 Building elocated to a new, Existing or retrofittrd	building?				

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Building Number:  BLD-05512 Building Name: Phase 3  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?	
Administration N/A	

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Building Number:	BLD-01487 Buildin	ng Name: Phase 1A Original / W	/ing B Building	
Type of Service	e Provided			
		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X	Nursing	Anesthesia		
	IntensiveCare		Obstetrical Recovery	Renal Dialysis
	Pediatric/Adol	Clinical Lab		Outpatient
Ш	escent	Radiological/	Newborn/ WellBaby	□ Surgery
	Psychiatric Nursing	Imaging  Pharmaceutical	Emergency	Central Plant
	Obstetrical	Pharmaceutical	Lineigency	Central Plant
	Ante/Postprtum	Dietetic	Nuclear Medicine	Support Services
	Intermediate			
	Care	Administration		
П	Skilled Nursing			

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Building Number:	BLD-01488 Buildin	g Name: Wing A		
Type of Service	e Provided			
		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X	Nursing	Anesthesia		
	IntensiveCare		Obstetrical Recovery	Renal Dialysis
	Pediatric/Adol	Clinical Lab		Outpatient
	escent	Radiological/ Imaging	Newborn/ WellBaby	L Surgery
	Psychiatric Nursing	X Pharmaceutical	Emergency	Central Plant
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	Support Services
	Intermediate Care	Administration		
П	Skilled Nursing			

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Building Number:	BLD-01489	Building Name:	Phase 1A North						
Type of Servic	Type of Service Provided								
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	Nursing		Anesthesia						
	IntensiveCare			Obstetrical Recovery	X	Renal Dialysis			
	Pediatric/Adol escent		Clinical Lab			Outpatient			
			X Radiological/ Imaging	Newborn/ WellBaby		Surgery			
	Psychiatric Nursing		Pharmaceutical	Emergency		Central Plant			
	Obstetrical Ante/Postprtur	m   [	Dietetic	Nuclear Medicine	X	Support Services			
	Intermediate Care		Administration						
	Skilled Nursing	g							

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Building Number:	BLD-01490 Buildin	g Name: Wing E		
Type of Service	e Provided			
		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	Nursing	Anesthesia		
	IntensiveCare		Obstetrical Recovery	Renal Dialysis
X	Pediatric/Adol	Clinical Lab		Outpatient
	escent Psychiatric	Radiological/ Imaging	Newborn/ WellBaby	□ Surgery
	Nursing	X Pharmaceutical	Emergency	Central Plant
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	Support Services
	Intermediate Care	Administration		
П	Skilled Nursing			

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Building Number:	BLD-01492	Building Name:	Phase 1B South					
Type of Service Provided								
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
	Nursing		Anesthesia					
	IntensiveCare	_		Obstetrical Recovery		Renal Dialysis		
П	Pediatric/Adol		X Clinical Lab			Outpatient		
			Radiological/ Imaging	Newborn/ WellBaby		Surgery		
	Psychiatric Nursing		X Pharmaceutical	X Emergency		Central Plant		
	Obstetrical Ante/Postprtu	m   [	Dietetic	Nuclear Medicine	X	Support Services		
	Intermediate Care		Administration					
	Skilled Nursin	g						

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Building Number:	BLD-01493 Buildin	g Name: Wing A Addition		
Type of Servic	e Provided			
		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	Nursing	Anesthesia		
X	IntensiveCare		Obstetrical Recovery	Renal Dialysis
	Pediatric/Adol	Clinical Lab		Outpatient
	escent	Radiological/ Imaging	Newborn/ WellBaby	□ Surgery
	Psychiatric Nursing	X Pharmaceutical	Emergency	Central Plant
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	Support Services
	Intermediate Care	Administration		
П	Skilled Nursing			

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Building Number:	BLD-01495	Building Name:	Phase 1A3				
Type of Service	e Provided						
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
	Nursing		Anesthesia				
	IntensiveCare			Obstetrical Recovery		Renal Dialysis	
П	Pediatric/Adol		Clinical Lab			Outpatient	
	escent	X		Newborn/ WellBaby	ш	Surgery	
	Psychiatric Nursing		Imaging  Pharmaceutical	Emergency		Central Plant	
	Obstetrical		Thamaccuscar			Ochtrar Flant	
Ш	Ante/Postprtur	m _	Dietetic	Nuclear Medicine	Х	Support Services	
П	Intermediate						
	Care		Administration				
	Skilled Nursing	,					

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Building Number:	BLD-05512 Buildin	g Name: Phase 3		
Type of Service	e Provided			
		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	Nursing	Anesthesia		
	IntensiveCare		Obstetrical Recovery	Renal Dialysis
П	Pediatric/Adol escent	Clinical Lab	Newborn/	Outpatient Surgery
		Radiological/ Imaging	WellBaby	Guigery
	Psychiatric Nursing	Pharmaceutical	Emergency	Central Plant
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	Support Services
	Intermediate Care	X Administration		
	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 Numbe	er: BLD-01487	Building Na	me: Phase 1A Orig	inal / Wing I	3 Building	
Configuration:	Rebuild (Per SB90	Definition fo	or Rebuild) with new	SPC5 and N	IPC4 or NPC5 building.	
Type of Serv	vice Provided					
X	Nursing		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery	
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	Central Plant
	Intermediate		Dietetic			
	Care Skilled Nursing		Administration		Nuclear Medicine	Support Services

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Building Number: BLD-01488		Building Na	me: Wing A			
Configuration:	Rebuild (Per SB90	Definition for	or Rebuild) with new	SPC5 and N	NPC4 or NPC5 building.	
Type of Service Provided						
X	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	X	Pharmaceutical		Emergency	Central Plant
	Intermediate		Dietetic			23.110.110.11
	Care Skilled Nursing		Administration		Nuclear Medicine	Support Services

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Building Number:	BLD-01489	Building Na	me: Phase 1A North				
Configuration:	Rebuild (Per SB90	Definition fo	or Rebuild) with new SF	PC5 and N	NPC4 or NPC5 building.		
Type of Servic	e Provided						
N	lursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Ir	ntensiveCare		Anesthesia		Obstetrical	X	Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Recovery		
	sychiatric lursing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical nte/Postprtum		Pharmaceutical	П	Emergency		Central Plant
	ntermediate		Dietetic				
	are killed Nursing		Administration		Nuclear Medicine	X	Support Services

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Building Number	r: BLD-01490	Building Na	me: Wing E				
Configuration:	Rebuild (Per SB90	Definition for	or Rebuild) with new	SPC5 and N	NPC4 or NPC5 building.		
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	X	Pharmaceutical		Emergency		Central Plant
	Intermediate		Dietetic		Linergency	Ш	Johna Flant
	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	: BLD-01492	Building Na	me: Phase 1B South				
Configuration:	Rebuild (Per SB90	Definition fo	or Rebuild) with new SP	C5 and N	NPC4 or NPC5 building.		
Type of Servi	ce Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent	X	Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum	X	Pharmaceutical	X	Emergency		Central Plant
	ntermediate Care		Dietetic		Nuclear Medicine	_  X	Support
	Skilled Nursing		Administration		Nuclear Medicine		Services

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Building Numbe	er: BLD-01493	Building Na	me: Wing A Addition	n		
Configuration	Rebuild (Per SB90	Definition fo	or Rebuild) with new	SPC5 and N	IPC4 or NPC5 building.	
Type of Serv	vice Provided					
	Nursing		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X	IntensiveCare		Anesthesia		Obstetrical	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery	
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum	X	Pharmaceutical		Emergency	Central Plant
	Intermediate		Dietetic			
	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	Building Number: BLD-01494 Building Name: Phase 2								
Configuration:	Replace with exist	ing SPC2 ar	nd NPC3 building and r	emove fro	om service in 2030.				
Type of Servi	ice 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		Radiological/ Imaging	X	Newborn/ WellBaby		Outpatient Surgery		
1' ' 1	Obstetrical Ante/Postprtum	X	Pharmaceutical		Emergency		Central Plant		
	Intermediate		Dietetic						
	Care Skilled Nursing		Administration		Nuclear Medicine	X	Support Services		

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Building Number	r: BLD-01495	Building Na	me: Phase 1A3				
Configuration:	Rebuild (Per SB90	Definition for	or Rebuild) with new S	SPC5 and N	IPC4 or NPC5 building.		
Type of Servi	ice 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		Emergency		Central Plant
	Intermediate		Dietetic				
	Care Skilled Nursing		Administration		Nuclear Medicine	X	Support Services

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Building Number:	BLD-01496	Building Na	me: Central Plant				
Configuration:	Rebuild (Per SB90	Definition fo	or Rebuild) with new	SPC5 and N	NPC4 or NPC5 building.		
Type of Service	e Provided						
	lursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Ir	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	rediatric/Adol scent		Clinical Lab		Recovery		
	sychiatric lursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical .nte/Postprtum		Pharmaceutical	П	Emergency	X	Central Plant
	ntermediate care		Dietetic				0
	killed Nursing		Administration		Nuclear Medicine	X	Support Services

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Building Numbe	er: BLD-01497	Building Na	me: Phase 1B North	1		
Configuration	Replace with exist	ing SPC3, S	SPC4 or SPC5 and NP	C4 or NPC	5 building.	
Type of Serv	vice Provided					
	Nursing		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery	
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum	X	Pharmaceutical		Emergency	Central Plant
	Intermediate Care		Dietetic			0
	Skilled Nursing		Administration		Nuclear Medicine	Support Services

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Building Number:	uilding Number: BLD-01498 Building Name: Phase 4 Building							
Configuration:	Rebuild (Per SB90	Definition fo	or Rebuild) with new S	SPC5 and N	NPC4 or NPC5 building.			
Type of Service	ce Provided							
X N	Nursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
	ntensiveCare		Anesthesia	X	Obstetrical		Renal Dialysis	
1 1	Pediatric/Adol escent		Clinical Lab		Recovery			
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	Obstetrical Ante/Postprtum	X	Pharmaceutical		Emergency		Central Plant	
	ntermediate Care		Dietetic		- ,			
	Skilled Nursing	X	Administration		Nuclear Medicine	X	Support Services	

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Building Numbe	er: BLD-01499	Building Na	me: Phase 5 Build	ing			
Configuration: N/A							
Type of Serv	vice Provided						
	Nursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare	X	Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby	X	Outpatient Surgery
	Obstetrical Ante/Postprtum	X	Pharmaceutical		Emergency		Central Plant
	Intermediate		Dietetic				
	Care Skilled Nursing		Administration		Nuclear Medicine	X	Support Services

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						_
Building Number:	BLD-01500	Building Na	me: MRI Addition			
Configuration:	N/A					]
Type of Service Provided						•
Nu	ursing		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
In	tensiveCare		Anesthesia	Obstetrical	Renal Dialysis	
	ediatric/Adol scent		Clinical Lab	Recovery		
	sychiatric ursing	X	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery	
	ostetrical nte/Postprtum		Pharmaceutical	Emergency	Central Plant	
	termediate		Dietetic		22	
	are killed Nursing		Administration	Nuclear Medicine	Support Services	

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Building Number:	BLD-01501	Building Na	me: Telecom Addition	on			
Configuration: N/A							
Type of Service	e Provided						
N	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
In	tensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Recovery		
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	bstetrical nte/Postprtum		Pharmaceutical		Emergency		Central Plant
	termediate are		Dietetic				
	killed Nursing		Administration		Nuclear Medicine	X	Support Services

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Building Number: BLD-03053		Building Na	me: Parking Struct	ure		
Configuration:	N/A					
Type of Service Provided						_
N	ursing		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
Ir	ntensiveCare		Anesthesia		Obstetrical	Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Recovery	
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
	bstetrical nte/Postprtum		Pharmaceutical		Emergency	Central Plant
	ntermediate		Dietetic			
	are killed Nursing		Administration		Nuclear Medicine	Support Services

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Building Number:	BLD-05512	Building Na	me: Phase 3				]
Configuration:	N/A						]
Type of Service Provided							-
Nu	ursing		Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
Int	tensiveCare		Anesthesia	Obstetrical		Renal Dialysis	
	ediatric/Adol scent		Clinical Lab	Recovery			
	sychiatric ursing		Radiological/ Imaging	Newborn/ WellBaby		Outpatient Surgery	
	ostetrical nte/Postprtum		Pharmaceutical	Emergency		Central Plant	
	termediate		Dietetic	31931139	_	contain tail	
	are killed Nursing	X	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)

Building	g Number: BL	D-01494	Building I	Name: Ph	ase 2		
Type c	of Service Prov	<u>vided</u>					
X	lursing	Inpatient Beds	68	X	Surgical	X Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X Ir	ntensiveCare	Inpatient Beds	60	X	Anesthesia		
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	X Obstetrical Recovery	Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	X Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum	Inpatient Beds	20	X	Pharmaceutical	Emergency	Central Plant
	ntermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Support Services
s	Skilled Nursing	Inpatient Beds	0		Administration		
	otal Beds this Building		148				

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Building Number: BL	Building Number: BLD-01496 Building Name: Central Plant										
Type of Service Pro	Type of Service Provided										
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy						
IntensiveCare	Inpatient Beds	0	Anesthesia								
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis						
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery						
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	X Central Plant						
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services						
Skilled Nursing	Inpatient Beds	0	Administration								
Total Beds this Building		0									

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Buildin	Building Number: BLD-01497 Building Name: Phase 1B North									
<u>Type</u>	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	X	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							

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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 N	Number: BLD	-01498	Building N	Name: Ph	ase 4 Building						
Type of	Type of Service Provided										
X Nu	rsing	Inpatient Beds	73	X	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy				
Inte	ensiveCare	Inpatient Beds	0		Anesthesia						
1 1	diatric/Adol cent	Inpatient Beds	0		Clinical Lab	X Obstetrical Recovery	Renal Dialysis				
	ychiatric Irsing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery				
	estetrical te/Postprtum	Inpatient Beds	18	X	Pharmaceutical	Emergency	Central Plant				
Inte	ermediate ire	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Support Services				
Ski	illed Nursing	Inpatient Beds	0	X	Administration						
_	tal Beds this ilding		91								

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Building Number: BL	D-01499	Building N	Name: Phase 5 Building	9							
Type of Service Prov	Type of Service Provided										
Nursing	Inpatient Beds	0	X Surgical	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	X Outpatient Surgery						
Obstetrical Ante/Postprtum	Inpatient Beds	0	X Pharmaceutic	Emergency	Central Plant						
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services						
Skilled Nursing	Inpatient Beds	0	Administration	1							
Total Beds this Building		0									

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Building Number:	uilding Number: BLD-01500 Building Name: MRI Addition											
Type of Service Pr	Type of Service Provided											
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy							
IntensiveCare	Inpatient Beds	0	Anesthesia									
Pediatric/Adol	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis							
Psychiatric Nursing	Inpatient Beds	0	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery							
Obstetrical Ante/Postprtu	Inpatient m Beds	0	Pharmaceutical	Emergency	Central Plant							
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services							
Skilled Nursin	g Inpatient Beds	0	Administration									
Total Beds this	s	0										

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Building Number: BLI	D-01501	Building N	Name: Telecom Addition		
Type of Service Prov	<u>/ided</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	Emergency	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

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Buildi	Building Number: BLD-03053 Building Name: Parking Structure						
Туре	e of Service Prov	<u>ided</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	Emergency	Central Plant
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Support Services
	Skilled Nursing	Inpatient Beds	0		Administration		
	Total Beds this Building		0				

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Building Number:	BLD-01494 Build	ing Name: Phase 2			
Medical / Surgical (Inc	lude GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 68 Bed	Inpatient 21748 Days	Inpatient 0 Inpatient Days	0 Inpatient 0 Bed	Inpatient 0 Days	
Perinatal (excluse Nev	wborn / GYN)	Burn	Skilled Nursing	Skilled Nursing	
Inpatient 20 Bed	Inpatient 5989 Days	Inpatient 0 Inpatient Days	0 Inpatient 0 Bed	Inpatient 0 Days	
Pediatric		intensive Care Newborn Nursery	Intermediate Card		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 36 Inpatient Days	7453 Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care		Rehabilitation Center	Int. Care / developn Disabled	nent	
Inpatient 24 Bed	Inpatient 7616 Days	Inpatient 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 0 Days	Inpatient 0 Inpatient Days	0 148	148	

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Building Number:	BLD-01496	Building Name:	Central Plant			
Medical / Surgical (I	nclude GYN)	Acute Res	spiratory Care	Ac	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inp Be	patient 0	Inpatient 0 Days
Perinatal (excluse N	lewborn / GYN)	Burn		Sk	Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inp	patient 0	Inpatient 0 Days
Pediatric		intensive Nursery	Care Newborn	Int	ermediate Card	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inp	patient 0	Inpatient 0 Days
Intensive Care		Rehabilita Center	ition		Care / developr sabled	ment
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inp	patient 0	Inpatient 0 Days
Coronary Care		Chemical Dependen	осу		otal Beds this uilding Per nit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0	0	0

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Building Number:	BLD-01497	Building Name:	Phase 1B Nort	า		
Medical / Surgical (I	nclude GYN)	Acute Re	spiratory Care		Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	1 - 7 1	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	Burn			Skilled Nursing		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days		Inpatient 0	Inpatient 0 Days
Pediatric		intensive Nursery	Care Newborn		Intermediate Card	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	1 - 7 1	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilit Center	ation		Int. Care / developr Disabled	nent
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days		Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Depende			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

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Building Number:	BLD-01498 Build	ing Name: Phas	se 4 Building		
Medical / Surgical (I	nclude GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 73 Bed	Inpatient 21834 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	
Perinatal (excluse N	lewborn / GYN)	Burn		Skilled Nursing	
Inpatient 18 Bed	Inpatient 4245 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	1
Pediatric		intensive Care New Nursery	vborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	
Intensive Care		Rehabilitation Center		Int. Care / development Disabled	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0	Inpatient 0 Inpatient Days	
Coronary Care		Chemical Dependency		Building Per Building	otal Beds this uilding Per ervice
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	91	91

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Building Number:	BLD-01499	Building Name:	Phase 5 Bui	lding		
Medical / Surgical (I	nclude GYN)	Acute Re	spiratory Care		Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpati Days	ent 0	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	Burn			Skilled Nursing		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpati Days	ent 0	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Nursery	Care Newborn		Intermediate Card	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpati Days	ent 0	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilit Center	ation		Int. Care / develop Disabled	ment
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpati Days	ent 0	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemica Depende			Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpati Days	ent 0	0	0

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Building Number:	BLD-01500 Build	ing Name: MRI	Addition		
Medical / Surgical (Inc	clude 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 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 Nev Nursery	vborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / develop Disabled	ment
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0

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Building Number:	BLD-01501	Building Name: Tele	ecom Addition			
Medical / Surgical (I	nclude GYN)	Acute Respiratory	/ Care	Acute Psychiatric		
Inpatient 0 Bed	Inpatient Days	O Inpatient 0 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	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0	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 / develop	ment	
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	Inpatient 0 Days	0	0	

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Building Number:	BLD-03053	Building Name:	Parking Stru	cture		
Medical / Surgical (	nclude GYN)	Acute Re	espiratory Care		Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatie Days	ent 0	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	Burn			Skilled Nursing	Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatie Days	ent 0	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Nursery	e Care Newborn		Intermediate Card	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatie Days	ent 0	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilit Center	tation		Int. Care / develop Disabled	ment
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatie Days	ent 0	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemica Depende			Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatie Days	ent 0	0	0

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