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

Facility Number:	10694	
Facility Name:	St. Berr	ardine Medical Center
Address:	2101 No	orth Waterman Avenue
City:	San Be	rnardino
Hospital Owner/Lice		St Bernardine Medical Center
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:	Robert Omens
Submission	Date:	1/8/2013 8:31:16 AM

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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.	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date
BLD- 01814	Main Hospital	2101 North Waterman Avenue	Remove	N/A	01/01/2020	11/30/2019
BLD- 01815	South Wing	2101 North Waterman Avenue	Remove	N/A	01/01/2015	11/30/2014
BLD- 01817	Central Tower	2101 North Waterman Avenue	Retrofit	SPC2	01/01/2020	07/31/2019

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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-01817 Central Tower	Retrofit Project	/Replacement	Yes-Submitted
Facility Project Sub Scope <u>Number Number Num</u>	Date Plan Approved in Date	Proj. Start Proj. Comple Date Date	
10694 IL082842-0 0 PPR- CENTRAL TOWER - PATIENT TOWER SEISMIC UPGRADE	12/23/2008 12:00:00 AM	04/06/2012 01/02/20	14 ACTI No

Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F) Building Number: **BLD-01814** Main Hospital **Building Name:** Type of Service Provided **Obstetrical** Surgical Inpatient Inpatient Nursing 0 0 Recovery Days Beds Newborn/ IntensiveCare Inpatient Days Inpatient 0 0 Anesthesia WellBaby Beds Emergency **Clinical Lab** Inpatient Days 0 Pediatric/Adol Inpatient 0 escent Beds Nuclear Radiological/ Medicine Imaging Psychiatric Inpatient Days 0 Inpatient 0 Nursing Beds Pharmaceutical Rehabilitation Obstetrical Inpatient **Inpatient Days** 0 0 Dietetic Therapy Ante/Postprtum Beds **Renal Dialysis** Administration Inpatient **Inpatient Days** 0 Intermediate 0 Care Beds Support Outpatient Services Surgery Inpatient Days Skilled Nursing Inpatient 0 0 Beds Obstetrical Total Beds this 0 Cesarean/Deliv **Central Plant** Building

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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: **BLD-01815** South Wing **Building Name: Type of Service Provided Obstetrical** X Surgical 85 0 Nursing Inpatient Inpatient Recovery Beds Days Newborn/ IntensiveCare Inpatient 0 **Inpatient Days** 0 Anesthesia WellBaby Beds Emergency **Clinical Lab** Inpatient Days 0 Pediatric/Adol Inpatient 0 escent Beds Nuclear Radiological/ Medicine Imaging 36 Inpatient Days 0 Psychiatric Inpatient Х Nursing Beds Pharmaceutical Rehabilitation Inpatient Days 0 Inpatient Obstetrical 0 Dietetic Therapy Ante/Postprtum Beds **Renal Dialysis** Administration Intermediate Inpatient Days Inpatient 0 0 Care Beds Outpatient Support Services Surgery Skilled Nursing Inpatient 0 Inpatient Days 0 Beds Obstetrical Total Beds this 121 Cesarean/Deliv Central Plant Building

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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: **BLD-01817 Central Tower Building Name: Type of Service Provided Obstetrical** X Surgical 105 Inpatient 16351 Nursing Inpatient Recovery Beds Days Newborn/ X IntensiveCare Inpatient 27 **Inpatient Days** 6648 X Anesthesia WellBaby Beds Emergency **Clinical Lab** 20 Inpatient Days 786 Pediatric/Adol Inpatient escent Beds Nuclear Radiological/ Medicine Imaging Inpatient Days 0 Psychiatric Inpatient 0 Nursing Beds Pharmaceutical Rehabilitation Inpatient Days 4644 Inpatient 32 Х Obstetrical Dietetic Therapy Ante/Postprtum Beds **Renal Dialysis** Administration Iх Intermediate Inpatient Days Inpatient 0 0 Care Beds Support Outpatient Services Surgery Skilled Nursing Inpatient 0 Inpatient Days 0 Beds Obstetrical Total Beds this 184 Cesarean/Deliv Central Plant Building

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

Building Number:	BLD-01814	Building Name: Mair	n Hospital		
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	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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Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)						
Building Number: BLD-01815 Bui	Iding Name: South Wing					
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric				
Inpatient 85 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 36 Inpatient 0 Bed Days				

Inpatient

Inpatient

Inpatient

Days

Days

0

0

0

intensive Care Newborn

0

0

0

Pediatric

0

Inpatient

Inpatient

. Days

0

0

0

Inpatient	0	Inpatient
Bed		Days

Intensive Care

Inpatient	ſ
Bed	L

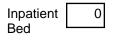
Inpatient

Bed

Days

0

Coronary Care



Inpatient 0 . Days

Inpatient Bed



Chemical Dependency

Inpatient

Nursery

Inpatient

Rehabilitation

Bed

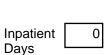
Center

Inpatient

Bed

Bed

0



Inpatient Inpatient 0 Bed Days **Intermediate Card**

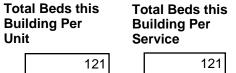
0

Inpatient	0	Inpatient	0
Bed		Days	

Int. Care / development Disabled

Unit

Inpatient Bed	0	Inpatient	0
Deu		Days	



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

Building Number:	BLD-01817	Building Name:	Central Tower		
Medical / Surgical	(Include GYN)	Acute Respirat	tory Care	Acute Psychiatric	
Inpatient 105 Bed	Inpatient 1635 Days 1	Inpatient 6	D Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 32 Bed	Inpatient 4644 Days	Inpatient 6	D Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nursery	Newborn	Intermediate Card	
Inpatient 20 Bed	Inpatient 786 Days	Inpatient 0 Bed) Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / develop Disabled	ment
Inpatient 27 Bed	Inpatient 8227 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	184	184

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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-01814	Main Hospital	Remove
BLD-01815	South Wing	Remove
BLD-01816	Emergency Building	Remain
BLD-01817	Central Tower	Retrofit
BLD-01818	North Tower	Remain
BLD-01819	Service Building	Remain
BLD-01820	Ancillary Building	Remain

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Provide the number of inpaient beds and patient days per type of service for the year of 2009, 2010 and 2011 for buildings to be removed from acute care services per Section 130061(c)(2)(D)					
Building Nrbr: BLD-018	14 Building Name:	Main Hosp	ital	Year of Information	n: 2009
	Humo.			Information Current As Of:	09/10/2012
<u>Type of Services</u> Provided					
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
	Total Beds this Building	0			

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Provide the number of inpaient beds and patient days per type of service for the year of 2009, 2010 and 2011 for buildings to be removed from acute care services per Section 130061(c)(2)(D)						
Building Nrbr: BLD-01814 Building Nrbr: Main Hospital Year of Information: 2010 Name: Main Hospital Year of Information: 2010						
				Information Current As	s 09/10/2012	
<u>Type of Services</u> <u>Provided</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 Total Beds this Building	0	Administration			

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Provide the number of inpaient beds and patient days per type of service for the year of 2009, 2010 and 2011 for buildings to be removed from acute care services per Section 130061(c)(2)(D)						
Building Nrbr: BLD-01814 Building Name: Main Hospital Year of Information: 2011						
				Information Current A Of:	s	
<u>Type of Services</u> <u>Provided</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 Total Beds this		Administration			
	Total Beds this Building					

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Provide the number of inpaient beds and patient days per type of service for the year of 2009, 2010 and 2011 for buildings to be removed from acute care services per Section 130061(c)(2)(D)						
Building Nrbr: BLD-018	15 Building Name:	South Wing	g	Year of Informat	ion: 2010	
				Information Current As Of:	09/10/2012	
<u>Type of Services</u> <u>Provided</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 X Nursing	Inpatient Beds	36	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 Total Beds this	0 36	Administration			
	Building	30				

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Provide the number of inpaient beds and patient days per type of service for the year of 2009, 2010 and 2011 for buildings to be removed from acute care services per Section 130061(c)(2)(D)						
Building Nrbr: BLD-018	15 Building Name:	South Wing	3	Year of Informat	tion: 2009	
				Information Current As Of:	09/10/2012	
<u>Type of Services</u> <u>Provided</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	
X Psychiatric Nursing	Inpatient Beds	36	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	s 36				

Provide the number of inpaient beds and patient days per type of service for the year of 2009, 2010 and 2011 for buildings to be removed from acute care services per Section 130061(c)(2)(D)									
Building Nrbr: BLD-01815 Building Niger South Wing Year of Information: 2011 Name: Year of Information: Year of Information: 2011									
Type of Services	Name.				nformation Current As				
Provided									
X Nursing	Inpatient Beds	85	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
IntensiveCare	Inpatient Beds	0	Anesthesia						
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab		Obstetrical Recovery		Renal Dialysis		
A Psychiatric X Nursing	Inpatient Beds	36	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	121	I						

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Each hospital owner shall alsop report for each facility for which any buildings will be removed from active care service, any net change in the number of inpatient beds by type of unit and service per Section 130061(c)(3)

Building Number: BLD-01815 Building Name: South Wing Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building? Nursing N/A
Building BLD-01815 Building Name: South Wing Number: Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building? Psychiatric Nursing N/A
Building Number: BLD-01815 Building Name: South Wing Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building? Medical/Surgical (Include GYN) N/A
Building BLD-01815 Building Name: South Wing Number: Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building? Acute Psychiatric N/A

10694

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:	BLD-01814 Building	g Name: Ma	ain Hospital						
Type of Service Provided									
_	N		Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	Nursing		Anesthesia			Popel Dichreig			
	IntensiveCare			Obstetrical Recovery		Renal Dialysis			
	Pediatric/Adol escent		Clinical Lab	Newborn/		Outpatient Surgery			
	Psychiatric		Radiological/ Imaging	WellBaby					
	Nursing		Pharmaceutical	Emergency		Central Plant			
	Obstetrical Ante/Postprtum		Dietetic	Nuclear Medicine		Support Services			
	Intermediate Care		Administration						
	Skilled Nursing								

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

Building Number:	BLD-01815 Buildir	ng Name: South Wing							
Type of Service Provided									
_	Numerie	Surgical	Obstetrical Cesarean/Deliv		nabilitation erapy				
X	Nursing	Anesthesia	Obstetrical	C Rei	nal Dialysis				
	IntensiveCare	Clinical Lab	Recovery						
	Pediatric/Adol escent	Radiological/	Newborn/ WellBaby	Out Sur	tpatient gery				
X	Psychiatric Nursing	Imaging		_					
	Obstetrical	Pharmaceutical	Emergency	Cer	ntral Plant				
	Ante/Postprtum	Dietetic	Nuclear Medicine	Sup Ser	oport vices				
	Intermediate Care	Administration							
	Skilled Nursing								

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

Building Number:	BLD-01817 Buildi	ng Name: Central Tower							
Type of Service Provided Surgical Obstetrical Rehabilitation									
X	Nursing		Cesarean/Deliv	Therapy					
X	IntensiveCare		Obstetrical Recovery	Renal Dialysis					
	Pediatric/Adol escent	Clinical Lab	X Newborn/ WellBaby	Outpatient Surgery					
	Psychiatric Nursing	Imaging Pharmaceutical		Central Plant					
X	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	Support Services					
	Intermediate Care	X Administration							
	Skilled Nursing								

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Building Numbe	er: BLD-01814	Building Na	me: Main Hospital		
Configuration:	Remove from GAC	c service by	1/1/2020		
Type of Serv	vice Provided				
	Nursing		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare		Anesthesia	Obstetrical Recovery	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab	Recovery	
	Psychiatric Nursing		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
			Pharmaceutical		
	Obstetrical Ante/Postprtum			Emergency	Central Plant
	Intermediate Care		Dietetic	Nucleon Medicine	Quantat
	Curo			Nuclear Medicine	Support Services
	Skilled Nursing		Administration		

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Building Numbe	er: BLD-01815	Building Na	me: South Wing				
Configuration: Remove from GAC service by 1/1/2015							
Type of Serv	vice Provided						
X	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
X	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical		Pharmaceutical				
	Ante/Postprtum				Emergency		Central Plant
	Intermediate		Dietetic	_		_	
	Care				Nuclear Medicine		Support Services
	Skilled Nursing		Administration				

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Building Numbe	er: BLD-01816	Building Na	me: Emergency Buildi	ng					
Configuration:	Retrofit Conformin	g building to NPC 4 or NPC 5							
Type of Serv	vice Provided								
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
	IntensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis		
	Pediatric/Adol escent		Clinical Lab		Recovery				
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	Obstetrical		Pharmaceutical						
	Ante/Postprtum			X	Emergency		Central Plant		
	Intermediate Care		Dietetic						
	Care				Nuclear Medicine		Support Services		
	Skilled Nursing		Administration						

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Building Numbe	er: BLD-01817	Building Na	me: Central Tower					
Configuration	Remove from GAC	C service by 1/1/2030						
Type of Serv	vice Provided							
X	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
X	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis	
	Pediatric/Adol escent		Clinical Lab		Recovery			
	Psychiatric Nursing		Radiological/ Imaging	X	Newborn/ WellBaby		Outpatient Surgery	
X	Obstetrical		Pharmaceutical					
	Ante/Postprtum				Emergency		Central Plant	
	Intermediate		Dietetic	_				
	Care				Nuclear Medicine		Support Services	
	Skilled Nursing	X	Administration					

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Building Numbe	er: BLD-01818	Building Na	me: North Tower					
Configuration:	Retrofit Conformin	g building to NPC 4 or NPC 5						
Type of Serv	vice Provided							
X	Nursing		Surgical	X	Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
X	IntensiveCare		Anesthesia		Obstetrical	Х	Renal Dialysis	
	Pediatric/Adol escent		Clinical Lab		Recovery			
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	Obstetrical		Pharmaceutical					
X	Ante/Postprtum				Emergency		Central Plant	
	Intermediate	X	Dietetic					
	Care				Nuclear Medicine		Support Services	
	Skilled Nursing		Administration					

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Building Numbe	er: BLD-01819	Building Na	me: Service Building			
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5			
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		Pharmaceutical			
	Ante/Postprtum			Emergency	Х	Central Plant
	Intermediate		Dietetic			
	Care			Nuclear Medicine		Support Services
	Skilled Nursing		Administration			

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Building Numbe	er: BLD-01820	Building Na	me: Ancillary Building	g			
Configuration	: Remove from GAC	Service by	1/1/2030				
Type of Ser	vice Provided						
	Nursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare	X	Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent	X	Clinical Lab		Recovery		
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical	X	Pharmaceutical				
	Ante/Postprtum				Emergency		Central Plant
	Intermediate		Dietetic				
	Care			X	Nuclear Medicine	Х	Support Services
	Skilled Nursing		Administration				

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Buildi	ng Number: BLI	D-01816	Building I	Name: Er	nergency Building		
Туре	e of Service Prov	ided					
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare	Inpatient Beds	0		Anesthesia		
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	X 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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Buildi	ng Number: BLI	D-01818	Building I	Name: No	orth Tower				
Type of Service Provided									
X	Nursing	Inpatient Beds	104		Surgical	X Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
X	IntensiveCare	Inpatient Beds	40		Anesthesia				
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	X Renal Dialysis		
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery		
X	Obstetrical Ante/Postprtum	Inpatient Beds	14		Pharmaceutical	Emergency	Central Plant		
	Intermediate Care	Inpatient Beds	0	X	Dietetic	Nuclear Medicine	Support Services		
	Skilled Nursing	Inpatient Beds	0		Administration				
	Total Beds this Building		158						

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Buildi	ng Number: BLI	D-01819	Building I	Name: <mark>Se</mark>	rvice Building				
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	Support Services		
	Skilled Nursing	Inpatient Beds	0		Administration				
	Total Beds this Building		0						

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Buildi	ng Number: BLI	D-01820	Building I	Name: An	cillary Building				
Туре	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	X	Clinical Lab	Obstetrical Recovery	Renal Dialysis		
	Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery		
	Obstetrical Ante/Postprtum	Inpatient Beds	0	X	Pharmaceutical	Emergency	Central Plant		
	Intermediate Care	Inpatient Beds	0		Dietetic	X Nuclear Medicine	X Support Services		
	Skilled Nursing	Inpatient Beds	0		Administration				
	Total Beds this Building		0						

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Building Number:	BLD-01816	Building Name:	Emergency Building				
Medical / Surgical (Include GYN)	Acute Respira	tory Care	Acute Psychiatric	Acute Psychiatric		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Perinatal (excluse N	Newborn / GYN)	Burn		Skilled Nursing	Skilled Nursing		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Pediatric		intensive Care Nursery	Newborn	Intermediate Card			
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Intensive Care		Rehabilitation Center		Int. Care / develop Disabled	ment		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	0	0		

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

Building Number:	BLD-01818 Buil	ding Name: North Tower	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 104 Bed	Inpatient 30642 Days	Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days
Perinatal (excluse N	lewborn / GYN)	Burn	Skilled Nursing
Inpatient 14 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Bed Days	0 Inpatient 0 Inpatient 0 Bed Days
Pediatric		intensive Care Newborn Nursery	Intermediate Card
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 20 Inpatient 448 Bed Days	Bed Inpatient 0 Inpatient 0 Bed Days
Intensive Care		Rehabilitation Center	Int. Care / development Disabled
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days
Coronary Care		Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding PerUnitService
Inpatient 20 Bed	Inpatient 5698 Days	Inpatient 0 Inpatient Days	0 158 158

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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:	BLD-01819	Buildir	ng Name: Servi	ice Building			
Medical / Surgical (Include GYN)		Acute Respiratory	Care	Acute Psychiatric		
Inpatient 0 Bed	Inpatient Days	0	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Perinatal (excluse N	Newborn / GYN)		Burn		Skilled Nursing		
Inpatient 0 Bed	Inpatient Days	0	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Pediatric			intensive Care Nev Nursery	vborn	Intermediate Card		
Inpatient 0 Bed	Inpatient Days	0	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care			Rehabilitation Center		Int. Care / develop Disabled	ment	
Inpatient 0 Bed	Inpatient Days	0	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Coronary Care			Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service	
Inpatient 0 Bed	Inpatient Days	0	Inpatient 0 Bed	Inpatient 0 Days	0	0	

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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:	BLD-01820	Building	g Name: Ancill	lary Building		
Medical / Surgical (Include GYN)		A	Acute Respiratory Care		Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days		npatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse Newborn / GYN)			Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient Days		npatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric			ntensive Care New Nursery	vborn	Intermediate Card	
Inpatient 0 Bed	Inpatient Days		npatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care			Rehabilitation Center		Int. Care / develop Disabled	ment
Inpatient 0 Bed	Inpatient Days		npatient 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		npatient 0 Bed	Inpatient 0 Days	0	0

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