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

Facility Number: 10843

Facility Name: Santa Barbara Cottage Hospital

Address: 400 West Pueblo Street

City: Santa Barbara

Hospital Owner/Licensee: Cottage Health System; Sole Corporate Member

Year of Reporting: 2012

Contact 1 e-mail Address:

Contact 2 e-mail Address:

Contact 3 e-mail Address::

Name of Submitter: Brooks Larson

Submission Date: 1/10/2013 6:58:55 PM

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-00899 | Central Wing (Building B) | 400 West Pueblo Street | Rebuild | SPC5 | 01/01/2015 | 09/23/2014 |
| BLD-00900 | Reeves Wing (Building C) | 400 West Pueblo Street | Rebuild | SPC5 | 01/01/2015 | 09/23/2014 |
| BLD-00901 | South Wing (Building D) | 400 West Pueblo Street | Retrofit | SPC2 | 01/01/2015 | 12/31/2012 |
| BLD-00903 | North Wing (Building F) | 400 West Pueblo Street | Rebuild | SPC5 | 01/01/2015 | 09/29/2011 |

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-00899 | Central Wing (Building B) | Retrofit/Replacement Project: | Yes-Submitted |

| Facility Number | Project Number | Sub Num | Scope | Date Plan in | Approved Date | Proj. Start Date | Proj. Completed Date | Status | CEQA Review |
|---|---|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 11/5/2004 12:00:00 AM | 10/17/2007 12:00:00 AM | 11/09/2007 | 09/29/2011 | FIEL | No |
| 10843 | P-2012-02429 | 0 | RRU-SAC-New 1 East Office Spaces | 11/13/2012 12:00:00 AM | 12/17/2012 12:00:00 AM | 08/16/2013 | 01/02/2014 | OPEN | No |
| 10843 | SS100329-0 | 0 | REMODEL CLINICAL LABORATORY ON 3RD FLOOR, BUILDING E | 2/25/2010 12:00:00 AM | 1/10/2011 12:00:00 AM | 01/10/2011 | 04/13/2013 | PEND | No |
| 10843 | SS102475-0 | 0 | REMODEL EXISTING 3400 SQ. FT. INTO PHYSICAL THERAPY | 12/16/2010 12:00:00 AM | 2/1/2012 12:00:00 AM | 05/29/2012 | 05/12/2014 | PEND | No |
| 10843 | SS111491-0 | 0 | VOLUNTARY SEISMIC IMPROVEMENTS | 7/26/2011 12:00:00 AM | 5/15/2012 12:00:00 AM | 05/24/2012 | 01/16/2013 | PEND | No |

| Building No: | BLD-00900 | | Reeves Wing (Building C) | Retrofit/Replacement Project: | Yes-Submitted |
|---|---|---|---|---|---|

| Facility Number | Project Number | Sub Num | Scope | Date Plan in | Approved Date | Proj. Start Date | Proj. Completed Date | Status | CEQA Review |
|---|---|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 11/5/2004 12:00:00 AM | 10/17/2007 12:00:00 AM | 11/09/2007 | 09/29/2011 | FIEL | No |
| 10843 | P-2012-02429 | 0 | RRU-SAC-New 1 East Office Spaces | 11/13/2012 12:00:00 AM | 12/17/2012 12:00:00 AM | 08/16/2012 | 01/02/2014 | OPEN | No |
| 10843 | SS100329-0 | 0 | REMODEL CLINICAL LABORATORY ON 3RD FLOOR, BUILDING E | 2/25/2010 12:00:00 AM | 1/10/2011 12:00:00 AM | 01/10/2011 | 04/13/2013 | PEND | No |
| 10843 | SS102481-0 | 0 | REMODEL EXISTING 2,570 SQ. FT. INTO NON-INVASIVE CARDIOVASCULAR | 12/16/2010 12:00:00 AM | 2/29/2012 12:00:00 AM | 03/05/2012 | 05/12/2014 | PEND | No |

| Building No: | BLD-00901 | | South Wing (Building D) | Retrofit/Replacement Project: | Yes-Submitted |
|---|---|---|---|---|---|

| Facility Number | Project Number | Sub Num | Scope | Date Plan in | Approved Date | Proj. Start Date | Proj. Completed Date | Status | CEQA Review |
|---|---|---|---|---|---|---|---|---|---|
| 10843 | SS111491-0 | 0 | VOLUNTARY SEISMIC IMPROVEMENTS | 7/26/2011 12:00:00 AM | 5/15/2012 12:00:00 AM | 03/01/2012 | 12/31/2012 | PEND | No |

| Building No: | BLD-00903 | | North Wing (Building F) | Retrofit/Replacement Project: | Yes-Submitted |
|---|---|---|---|---|---|

| Facility Number | Project Number | Sub Num | Scope | Date Plan in | Approved Date | Proj. Start Date | Proj. Completed Date | Status | CEQA Review |
|---|---|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 11/5/2004 12:00:00 AM | 10/17/2007 12:00:00 AM | 11/09/2007 | 09/29/2011 | FIEL | 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-00899**     Building Name: **Central Wing (Building B)**

**Type of Service Provided**

| | | | | |
|---|---|---|---|---|
| [X] Nursing | Inpatient Beds | 90 | Inpatient Days | 21953 |
| [ ] IntensiveCare | Inpatient Beds | 0 | Inpatient Days | 0 |
| [ ] Pediatric/Adolescent | Inpatient Beds | 0 | Inpatient Days | 0 |
| [ ] Psychiatric Nursing | Inpatient Beds | 0 | Inpatient Days | 0 |
| [X] Obstetrical Ante/Postprtum | Inpatient Beds | 27 | Inpatient Days | 6499 |
| [ ] Intermediate Care | Inpatient Beds | 0 | Inpatient Days | 0 |
| [ ] Skilled Nursing | Inpatient Beds | 0 | Inpatient Days | 0 |

Total Beds this Building: **117**

| | |
|---|---|
| [ ] Surgical | [X] Obstetrical Recovery |
| [ ] Anesthesia | [X] Newborn/WellBaby |
| [X] Clinical Lab | [ ] Emergency |
| [X] Radiological/Imaging | [ ] Nuclear Medicine |
| [ ] Pharmaceutical | [X] Rehabilitation Therapy |
| [X] Dietetic | [ ] Renal Dialysis |
| [X] Administration | [ ] Outpatient Surgery |
| [X] Support Services | |
| [ ] Obstetrical Cesarean/Deliv | [ ] Central Plant |

Report Status:  **Data Last Update:** 01/10/2013     **Submission Date:** 01/10/2013     **Print Date:** 1/11/2013 6:25 AM

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

Building Number: **BLD-00900**   Building Name: **Reeves Wing (Building C)**

**Type of Service Provided**

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

Total Beds this Building: **0**

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

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

Report Status: **Data Last Update:** 01/10/2013   **Submission Date:** 01/10/2013   **Print Date:** 1/11/2013 6:25 AM

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

Building Number: **BLD-00901**    Building Name: **South Wing (Building D)**

## Type of Service Provided

| | | | | |
|---|---|---|---|---|
| [X] | Nursing | Inpatient Beds | 60 | Inpatient Days | 14325 |
| [X] | IntensiveCare | Inpatient Beds | 22 | Inpatient Days | 4468 |
| [ ] | Pediatric/Adolescent | Inpatient Beds | 0 | Inpatient Days | 0 |
| [ ] | Psychiatric Nursing | Inpatient Beds | 0 | Inpatient Days | 0 |
| [ ] | Obstetrical Ante/Postprtum | Inpatient Beds | 0 | Inpatient Days | 0 |
| [ ] | Intermediate Care | Inpatient Beds | 0 | Inpatient Days | 0 |
| [ ] | Skilled Nursing | Inpatient Beds | 0 | Inpatient Days | 0 |

Total Beds this Building    82

| | |
|---|---|
| [ ] Surgical | [ ] Obstetrical Recovery |
| [ ] Anesthesia | [ ] Newborn/WellBaby |
| [ ] Clinical Lab | [ ] Emergency |
| [ ] Radiological/Imaging | [ ] Nuclear Medicine |
| [ ] Pharmaceutical | |
| [X] Dietetic | [ ] Rehabilitation Therapy |
| [X] Administration | [X] Renal Dialysis |
| [X] Support Services | [ ] Outpatient Surgery |
| [ ] Obstetrical Cesarean/Deliv | [ ] Central Plant |

Report Status:    **Data Last Update:** 01/10/2013    **Submission Date:** 01/10/2013    **Print Date:** 1/11/2013 6:25 AM

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

Building Number: **BLD-00903**     Building Name: **North Wing (Building F)**

**Type of Service Provided**

| | | | | | |
|---|---|---|---|---|---|
| [X] Nursing | Inpatient Beds | 30 | Inpatient Days | 0 | [ ] Surgical |
| [ ] IntensiveCare | Inpatient Beds | 0 | Inpatient Days | 0 | [ ] Anesthesia |
| [ ] Pediatric/Adolescent | Inpatient Beds | 0 | Inpatient Days | 0 | [X] Clinical Lab |
| [ ] Psychiatric Nursing | Inpatient Beds | 0 | Inpatient Days | 0 | [ ] Radiological/Imaging |
| [X] Obstetrical Ante/Postprtum | Inpatient Beds | 16 | Inpatient Days | 873 | [ ] Pharmaceutical |
| [ ] Intermediate Care | Inpatient Beds | 0 | Inpatient Days | 0 | [ ] Dietetic |
| [ ] Skilled Nursing | Inpatient Beds | 0 | Inpatient Days | 0 | [X] Administration |

Total Beds this Building: **46**

- [X] Obstetrical Recovery
- [ ] Newborn/WellBaby
- [ ] Emergency
- [ ] Nuclear Medicine
- [ ] Rehabilitation Therapy
- [ ] Renal Dialysis
- [X] Support Services
- [ ] Outpatient Surgery
- [ ] Obstetrical Cesarean/Deliv
- [ ] Central Plant

Report Status:     **Data Last Update:** 01/10/2013     **Submission Date:** 01/10/2013     **Print Date:** 1/11/2013 6:25 AM

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

**Building Number:** BLD-00899    **Building Name:** Central Wing (Building B)

**Medical / Surgical (Include GYN)**

Inpatient Bed: 90    Inpatient Days: 2195 3

**Acute Respiratory Care**

Inpatient Bed: 0    Inpatient Days: 0

**Acute Psychiatric**

Inpatient Bed: 0    Inpatient Days: 0

**Perinatal (exclude Newborn / GYN)**

Inpatient Bed: 27    Inpatient Days: 6499

**Burn**

Inpatient Bed: 0    Inpatient Days: 0

**Skilled Nursing**

Inpatient Bed: 0    Inpatient Days: 0

**Pediatric**

Inpatient Bed: 0    Inpatient Days: 0

**intensive Care Newborn Nursery**

Inpatient Bed: 0    Inpatient Days: 0

**Intermediate Card**

Inpatient Bed: 0    Inpatient Days: 0

**Intensive Care**

Inpatient Bed: 0    Inpatient Days: 0

**Rehabilitation Center**

Inpatient Bed: 0    Inpatient Days: 0

**Int. Care / development Disabled**

Inpatient Bed: 0    Inpatient Days: 0

**Coronary Care**

Inpatient Bed: 0    Inpatient Days: 0

**Chemical Dependency**

Inpatient Bed: 0    Inpatient Days: 0

**Total Beds this Building Per Unit**

117

**Total Beds this Building Per Service**

117

Report Status:    **Data Last Update:** 01/10/2013    **Submission Date:** 01/10/2013    **Print Date:** 1/11/2013 6:25 AM

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

**Building Number:** BLD-00900    **Building Name:** Reeves Wing (Building C)

---

**Medical / Surgical (Include GYN)**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Acute Respiratory Care**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Acute Psychiatric**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Perinatal (exclude Newborn / GYN)**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Burn**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Skilled Nursing**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Pediatric**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**intensive Care Newborn Nursery**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Intermediate Card**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Intensive Care**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Rehabilitation Center**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Int. Care / development Disabled**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Coronary Care**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Chemical Dependency**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Total Beds this Building Per Unit**

| 0 |

**Total Beds this Building Per Service**

| 0 |

---

Report Status:    **Data Last Update:** 01/10/2013    **Submission Date:** 01/10/2013    **Print Date:** 1/11/2013 6:25 AM

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

**Building Number:** BLD-00901     **Building Name:** South Wing (Building D)

**Medical / Surgical (Include GYN)**

Inpatient Bed: 60     Inpatient Days: 14325

**Acute Respiratory Care**

Inpatient Bed: 0     Inpatient Days: 0

**Acute Psychiatric**

Inpatient Bed: 0     Inpatient Days: 0

**Perinatal (exclude Newborn / GYN)**

Inpatient Bed: 0     Inpatient Days: 0

**Burn**

Inpatient Bed: 0     Inpatient Days: 0

**Skilled Nursing**

Inpatient Bed: 0     Inpatient Days: 0

**Pediatric**

Inpatient Bed: 0     Inpatient Days: 0

**intensive Care Newborn Nursery**

Inpatient Bed: 22     Inpatient Days: 4468

**Intermediate Card**

Inpatient Bed: 0     Inpatient Days: 0

**Intensive Care**

Inpatient Bed: 0     Inpatient Days: 0

**Rehabilitation Center**

Inpatient Bed: 0     Inpatient Days: 0

**Int. Care / development Disabled**

Inpatient Bed: 0     Inpatient Days: 0

**Coronary Care**

Inpatient Bed: 0     Inpatient Days: 0

**Chemical Dependency**

Inpatient Bed: 0     Inpatient Days: 0

**Total Beds this Building Per Unit**

82

**Total Beds this Building Per Service**

82

Report Status:     **Data Last Update:** 01/10/2013     **Submission Date:** 01/10/2013     **Print Date:** 1/11/2013 6:25 AM

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

**Building Number:** BLD-00903    **Building Name:** North Wing (Building F)

### Medical / Surgical (Include GYN)

Inpatient Bed | 30 | Inpatient Days | 0

### Acute Respiratory Care

Inpatient Bed | 0 | Inpatient Days | 0

### Acute Psychiatric

Inpatient Bed | 0 | Inpatient Days | 0

### Perinatal (exclude Newborn / GYN)

Inpatient Bed | 16 | Inpatient Days | 873

### Burn

Inpatient Bed | 0 | Inpatient Days | 0

### Skilled Nursing

Inpatient Bed | 0 | Inpatient Days | 0

### Pediatric

Inpatient Bed | 0 | Inpatient Days | 0

### intensive Care Newborn Nursery

Inpatient Bed | 0 | Inpatient Days | 0

### Intermediate Card

Inpatient Bed | 0 | Inpatient Days | 0

### Intensive Care

Inpatient Bed | 0 | Inpatient Days | 0

### Rehabilitation Center

Inpatient Bed | 0 | Inpatient Days | 0

### Int. Care / development Disabled

Inpatient Bed | 0 | Inpatient Days | 0

### Coronary Care

Inpatient Bed | 0 | Inpatient Days | 0

### Chemical Dependency

Inpatient Bed | 0 | Inpatient Days | 0

### Total Beds this Building Per Unit

46

### Total Beds this Building Per Service

46

Report Status:    **Data Last Update:** 01/10/2013    **Submission Date:** 01/10/2013    **Print Date:** 1/11/2013 6:25 AM

**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-00898 | West Wing (Building A) | Rebuild |
| BLD-00899 | Central Wing (Building B) | Rebuild |
| BLD-00900 | Reeves Wing (Building C) | Rebuild |
| BLD-00901 | South Wing (Building D) | Retrofit |
| BLD-00902 | East Wing (Building E) | Remain |
| BLD-00903 | North Wing (Building F) | Rebuild |
| BLD-00904 | Surgery Wing (Building G) | Remain |
| BLD-00906 | Centennial Wing (Building I) | Remain |
| BLD-00907 | Cancer Center (Building K) | Remain |
| BLD-05289 | New Central Plant | Remain |

Report Status:  **Data Last Update:** 01/10/2013      **Submission Date:** 01/10/2013      **Print Date:** 1/11/2013 6:25 AM

**List ALL proposed new buildings to be constructd at this or another site.**

| Building Number | Building Name | New Site |
|---|---|---|
| N_1 | Diagnostic and Treatment (D&T A1-A4; B1-B4) | ☐ |
| N_2 | Patient Pavilion (E1-E3) | ☐ |
| N_3 | Patient Pavilion (F1-F3) | ☐ |
| N_4 | Patient Pavilion (D1-D3) | ☐ |
| N_5 | Infill Building (C1-C3) | ☐ |
| N_6 | Link Building (C4) | ☐ |
| N_7 | Energy Center | ☐ |

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: BLD-00898    Building Name: West Wing (Building A)

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_3-Patient Pavilion (F1-F3)

| Facility Status Number | Project Number | Sub Num | Scope | Date Plan in | Approved Date | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 2004-11-05 | 2007-10-17 | 11/09/2007 | 09/29/2011 | FIEL |

Building Number: **BLD-00898**   Building Name: West Wing (Building A)

Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?

| Dietetic | Relocated to new building |

New Building                RetroFitted Building                Other SPC2-SPC5 Building

N_1-Diagnostic and Treatment (D&T A1-A4; B1-B4)

| Facility Status Number | Project Number | Sub Num | Scope | Date in | Plan Approved Date | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 2004-11-05 | 2007-10-17 | 11/09/2007 | 09/29/2011 | FIEL |

Building Number: **BLD-00898**   Building Name: West Wing (Building A)

Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?

| Administration | Relocated to new building |

New Building                RetroFitted Building                Other SPC2-SPC5 Building

N_1-Diagnostic and Treatment (D&T A1-A4; B1-B4)

| Facility Status Number | Project Number | Sub Num | Scope | Date in | Plan Approved Date | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 2004-11-05 | 2007-10-17 | 11/09/2007 | 09/29/2011 | FIEL |

Building Number: **BLD-00898**  Building Name: West Wing (Building A)

Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?

Support Services | Relocated to new building

New Building          RetroFitted Building          Other SPC2-SPC5 Building

N_1-Diagnostic and Treatment (D&T A1-A4; B1-B4)

| Facility Status Number | Project Number | Sub Num | Scope | Date Plan in | Plan Approved Date | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 2004-11-05 | 2007-10-17 | 11/09/2007 | 09/29/2011 | FIEL |

Building Number: **BLD-00898**  Building Name: West Wing (Building A)

Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?

Intensive Care | Relocated to new building

| Facility Status Number | Project Number | Sub Num | Scope | Date Plan in | Plan Approved Date | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 2004-11-05 | 2007-10-17 | 11/09/2007 | 09/29/2011 | FIEL |

Report Status:  **Data Last Update:** 01/10/2013     **Submission Date:** 01/10/2013     **Print Date:** 1/11/2013 6:25 AM

Building Number: BLD-00899   Building Name: Central Wing (Building B)

Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?

Nursing          N/A

---

Building Number: BLD-00899   Building Name: Central Wing (Building B)

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-Diagnostic and Treatment (D&T A1-A4; B1-B4)

| Facility Status Number | Project Number | Sub Num | Scope | Date Plan Approved in | Plan Approved Date | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 2004-11-05 | 2007-10-17 | 11/09/2007 | 09/29/2011 | FIEL |

---

Report Status:   **Data Last Update:** 01/10/2013      **Submission Date:** 01/10/2013      **Print Date:** 1/11/2013 6:25 AM

Building Number: BLD-00899    Building Name: Central Wing (Building B)

Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?

ClinicalLab    Relocated to other building

New Building                    RetroFitted Building            Other SPC2-SPC5 Building

BLD-00902-East Wing (Building E)

| Facility Status Number | Project Number | Sub Num | Scope | Date Plan Approved in | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|
| 10843 | SS100329-0 | 0 | REMODEL CLINICAL LABORATORY ON 3RD FLOOR, BUILDING E | 2010-02-25 | 2011-01-10 | 04/04/2011 | 04/13/2011 | PEND |

Building Number: BLD-00899    Building Name: Central Wing (Building B)

Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?

Radiological/Imaging    Relocated to new building

New Building                    RetroFitted Building            Other SPC2-SPC5 Building

N_1-Diagnostic and Treatment (D&T A1-A4; B1-B4)

| Facility Status Number | Project Number | Sub Num | Scope | Date Plan Approved in | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 2004-11-05 | 2007-10-17 | 11/09/2007 | 09/29/2011 | FIEL |

Building Number: BLD-00899    Building Name: Central Wing (Building B)

Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?

Dietetic    Relocated to new building

New Building                RetroFitted Building                Other SPC2-SPC5 Building

N_1-Diagnostic and Treatment (D&T A1-A4; B1-B4)

| Facility Status Number | Project Number | Sub Num | Scope | Date in | Plan Approved Date | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 2004-11-05 | 2007-10-17 | 11/09/2007 | 09/29/2011 | FIEL |

Building Number: BLD-00899    Building Name: Central Wing (Building B)

Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?

Administration    Relocated to new building

New Building                RetroFitted Building                Other SPC2-SPC5 Building

N_1-Diagnostic and Treatment (D&T A1-A4; B1-B4)

| Facility Status Number | Project Number | Sub Num | Scope | Date in | Plan Approved Date | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 2004-11-05 | 2007-10-17 | 11/09/2007 | 09/29/2011 | FIEL |

Report Status:    **Data Last Update:** 01/10/2013    **Submission Date:** 01/10/2013    **Print Date:** 1/11/2013 6:25 AM

Building Number: BLD-00899  Building Name: Central Wing (Building B)

Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?

Support Services    Relocated to new building

New Building                          RetroFitted Building                    Other SPC2-SPC5 Building

N_1-Diagnostic and Treatment (D&T A1-A4; B1-B4)

| Facility Status Number | Project Number | Sub Num | Scope | Date Plan in | Approved Date | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 2004-11-05 | 2007-10-17 | 11/09/2007 | 09/29/2011 | FIEL |

Building Number: BLD-00899  Building Name: Central Wing (Building B)

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-Diagnostic and Treatment (D&T A1-A4; B1-B4)

| Facility Status Number | Project Number | Sub Num | Scope | Date Plan in | Approved Date | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 2004-11-05 | 2007-10-17 | 11/09/2007 | 09/29/2011 | FIEL |

Building Number: **BLD-00899**  Building Name: Central Wing (Building B)

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-Diagnostic and Treatment (D&T A1-A4; B1-B4)

| Facility Status Number | Project Number | Sub Num | Scope | Date Plan in | Approved Date | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 2004-11-05 | 2007-10-17 | 11/09/2007 | 09/29/2011 | FIEL |

Building Number: **BLD-00899**  Building Name: Central Wing (Building B)

Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?

Rehabilitation Therapy | Relocated to other building

New Building          RetroFitted Building          Other SPC2-SPC5 Building

BLD-00902-East Wing (Building E)

| Facility Status Number | Project Number | Sub Num | Scope | Date Plan in | Approved Date | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|---|
| 10843 | SS102475-0 | 0 | REMODEL EXISTING 3400 SQ. FT. INTO PHYSICAL THERAPY | 2010-12-16 | 2012-02-01 | 05/29/2012 | 05/12/2014 | PEND |

Building Number: | BLD-00899 | Building Name: | Central Wing (Building B)

Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?

Medical/Surgical (Include GYN) | Relocated to new building

New Building     RetroFitted Building     Other SPC2-SPC5 Building

N_2-Patient Pavilion (E1-E3)

| Facility Status Number | Project Number | Sub Num | Scope | Date Plan Approved in | Plan Approved Date | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 2004-11-05 | 2007-10-17 | 11/09/2007 | 09/29/2011 | FIEL |

Building Number: | BLD-00899 | Building Name: | Central Wing (Building B)

Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?

Perinatal (exclude Newborn / GYN)) | Relocated to new building

New Building     RetroFitted Building     Other SPC2-SPC5 Building

N_1-Diagnostic and Treatment (D&T A1-A4; B1-B4)

| Facility Status Number | Project Number | Sub Num | Scope | Date Plan Approved in | Plan Approved Date | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 2004-11-05 | 2007-10-17 | 11/09/2007 | 09/29/2011 | FIEL |

**Building Number:** BLD-00900    **Building Name:** Reeves Wing (Building C)

Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?

| ClinicalLab | Relocated to other building |

New Building                    RetroFitted Building                    Other SPC2-SPC5 Building

BLD-00902-East Wing (Building E)

| Facility Status Number | Project Number | Sub Num | Scope | Date Plan Approved in | Plan Approved Date | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|---|
| 10843 | SS100329-0 | 0 | REMODEL CLINICAL LABORATORY ON 3RD FLOOR, BUILDING E | 2010-02-25 | 2011-01-10 | 04/04/2011 | 04/13/2013 | PEND |

**Building Number:** BLD-00900    **Building Name:** Reeves Wing (Building C)

Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?

| Radiological/Imaging | Relocated to other building |

| Facility Status Number | Project Number | Sub Num | Scope | Date Plan Approved in | Plan Approved Date | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|---|
| 10843 | P-2012-00198 | 0 | CATH LAB PROJECT | 2012-01-31 | 2012-03-23 | 06/04/2012 | 10/15/2013 | PEND |

Report Status:    **Data Last Update:** 01/10/2013    **Submission Date:** 01/10/2013    **Print Date:** 1/11/2013 6:25 AM

Building Number: **BLD-00900**   Building Name: **Reeves Wing (Building C)**

Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?

**Administration**   **Relocated to other building**

New Building                    RetroFitted Building                    Other SPC2-SPC5 Building

BLD-00902-East Wing (Building E)

| Facility Status Number | Project Number | Sub Num | Scope | Date Plan Approved in | Plan Approved Date | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|---|
| 10843 | P-2012-00408 | 0 | Sage Library and Administration Expansino Project | 2012-02-24 | 2012-05-02 | 11/09/2007 | 09/08/2016 | PEND |

---

Building Number: **BLD-00900**   Building Name: **Reeves Wing (Building C)**

Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?

**Support Services**   **Relocated to new building**

New Building                    RetroFitted Building                    Other SPC2-SPC5 Building

N_1-Diagnostic and Treatment (D&T A1-A4; B1-B4)

| Facility Status Number | Project Number | Sub Num | Scope | Date Plan Approved in | Plan Approved Date | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 2004-11-05 | 2007-10-17 | 11/09/2007 | 09/29/2011 | FIEL |

Report Status:   **Data Last Update:** 01/10/2013    **Submission Date:** 01/10/2013    **Print Date:** 1/11/2013 6:25 AM

Building Number: **BLD-00903**   Building Name: **North Wing (Building F)**

Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?

**Nursing**    **Relocated to new building**

| New Building | RetroFitted Building | Other SPC2-SPC5 Building |

N_3-Patient Pavilion (F1-F3)

| Facility Status Number | Project Number | Sub Num | Scope | Date Plan Approved in | Plan Approved Date | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 2004-11-05 | 2007-10-17 | 11/09/2007 | 09/29/2011 | FIEL |

Building Number: **BLD-00903**   Building Name: **North Wing (Building F)**

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-Diagnostic and Treatment (D&T A1-A4; B1-B4)

| Facility Status Number | Project Number | Sub Num | Scope | Date Plan Approved in | Plan Approved Date | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 2004-11-05 | 2007-10-17 | 11/09/2007 | 09/29/2011 | FIEL |

Building Number: BLD-00903    Building Name: North Wing (Building F)

Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?

ClinicalLab    Relocated to other building

New Building                    RetroFitted Building                    Other SPC2-SPC5 Building

BLD-00902-East Wing (Building E)

| Facility Status Number | Project Number | Sub Num | Scope | Date Plan Approved in | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|
| 10843 | SS100329-0 | 0 | REMODEL CLINICAL LABORATORY ON 3RD FLOOR, BUILDING E | 2010-02-25 | 2011-01-10 | 04/04/2011 | 04/13/2013 | PEND |

Building Number: BLD-00903    Building Name: North Wing (Building F)

Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?

Administration    Relocated to other building

New Building                    RetroFitted Building                    Other SPC2-SPC5 Building

BLD-00902-East Wing (Building E)

| Facility Status Number | Project Number | Sub Num | Scope | Date Plan Approved in | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|
| 10843 | P-2012-02429 | 0 | RRU-SAC-New 1 East Office Spaces | 2012-11-13 | 2012-12-17 | 02/01/2013 | 01/02/2014 | OPEN |

Report Status:    **Data Last Update:** 01/10/2013    **Submission Date:** 01/10/2013    **Print Date:** 1/11/2013 6:25 AM

Building Number: **BLD-00903**  Building Name: **North Wing (Building F)**

Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?

**Support Services**   **Relocated to new building**

New Building                    RetroFitted Building                    Other SPC2-SPC5 Building

N_1-Diagnostic and Treatment (D&T A1-A4; B1-B4)

| Facility Status Number | Project Number | Sub Num | Scope | Date in | Plan Approved Date | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 2004-11-05 | 2007-10-17 | 11/09/2007 | 09/29/2011 | FIEL |

Building Number: **BLD-00903**  Building Name: **North Wing (Building F)**

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-Diagnostic and Treatment (D&T A1-A4; B1-B4)

| Facility Status Number | Project Number | Sub Num | Scope | Date in | Plan Approved Date | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 2004-11-05 | 2007-10-17 | 11/09/2007 | 09/29/2011 | FIEL |

Building Number: BLD-00903    Building Name: North Wing (Building F)

Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?

Medical/Surgical (Include GYN)    Relocated to new building

New Building                    RetroFitted Building              Other SPC2-SPC5 Building

N_3-Patient Pavilion (F1-F3)

| Facility Status Number | Project Number | Sub Num | Scope | Date Plan Approved in | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 2004-11-05 | 2007-10-17 | 11/09/2007 | 09/29/2011 FIEL |

Building Number: BLD-00903    Building Name: North Wing (Building F)

Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?

Perinatal (exclude Newborn / GYN))    Relocated to new building

New Building                    RetroFitted Building              Other SPC2-SPC5 Building

N_1-Diagnostic and Treatment (D&T A1-A4; B1-B4)

| Facility Status Number | Project Number | Sub Num | Scope | Date Plan Approved in | Proj. Start Date | Proj. Completed Date | |
|---|---|---|---|---|---|---|---|
| 10843 | IS042307-2 | 0 | THREE NEW NURSING PAVILIONS, D&T BLDG., ETC | 2004-11-05 | 2007-10-17 | 11/09/2007 | 09/29/2011 FIEL |

**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-00899    Building Name: Central Wing (Building B)

**Type of Service Provided**

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

Report Status:   **Data Last Update:** 01/10/2013      **Submission Date:** 01/10/2013      **Print Date:** 1/11/2013 6:25 AM

**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-00900     Building Name: Reeves Wing (Building C)

**Type of Service Provided**

- ☐ Nursing
- ☐ IntensiveCare
- ☐ Pediatric/Adolescent
- ☐ Psychiatric Nursing
- ☐ Obstetrical Ante/Postprtum
- ☐ Intermediate Care
- ☐ Skilled Nursing

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

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

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

Report Status:     **Data Last Update:** 01/10/2013     **Submission Date:** 01/10/2013     **Print Date:** 1/11/2013 6:25 AM

**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-00901    Building Name: South Wing (Building D)

**Type of Service Provided**

[X] Nursing

[X] IntensiveCare

[ ] Pediatric/Adolescent

[ ] Psychiatric Nursing

[ ] Obstetrical Ante/Postprtum

[ ] Intermediate Care

[ ] Skilled Nursing

[ ] Surgical

[ ] Anesthesia

[ ] Clinical Lab

[ ] Radiological/Imaging

[ ] Pharmaceutical

[X] Dietetic

[X] Administration

[ ] Obstetrical Cesarean/Deliv

[ ] Obstetrical Recovery

[ ] Newborn/WellBaby

[ ] Emergency

[ ] Nuclear Medicine

[ ] Rehabilitation Therapy

[X] Renal Dialysis

[ ] Outpatient Surgery

[ ] Central Plant

[X] Support Services

Report Status:   **Data Last Update:** 01/10/2013     **Submission Date:** 01/10/2013     **Print Date:** 1/11/2013 6:25 AM

**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-00903    Building Name: North Wing (Building F)

**Type of Service Provided**

| | |
|---|---|
| [ ] | Surgical |
| [X] | Nursing |
| [ ] | Anesthesia |
| [ ] | IntensiveCare |
| [X] | Obstetrical Recovery |
| [ ] | Pediatric/Adolescent |
| [X] | Clinical Lab |
| [ ] | Psychiatric Nursing |
| [ ] | Newborn/WellBaby |
| [ ] | Radiological/Imaging |
| [X] | Obstetrical Ante/Postprtum |
| [ ] | Pharmaceutical |
| [ ] | Emergency |
| [ ] | Intermediate Care |
| [ ] | Nuclear Medicine |
| [ ] | Dietetic |
| [ ] | Skilled Nursing |
| [X] | Administration |

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

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-00898    Building Name: West Wing (Building A)

Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.

**Type of Service Provided**

☐ Nursing

☒ IntensiveCare

☐ Pediatric/Adolescent

☐ Psychiatric Nursing

☐ Obstetrical Ante/Postprtum

☐ Intermediate Care

☐ Skilled Nursing

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/Imaging

☐ Pharmaceutical

☒ Dietetic

☒ Administration

☐ Obstetrical Cesarean/Deliv

☐ Obstetrical Recovery

☐ Newborn/WellBaby

☐ Emergency

☐ Nuclear Medicine

☐ Rehabilitation Therapy

☐ Renal Dialysis

☐ Outpatient Surgery

☐ Central Plant

☒ Support Services

Report Status:  **Data Last Update:** 01/10/2013    **Submission Date:** 01/10/2013    **Print Date:** 1/11/2013 6:25 AM

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-00899    Building Name: Central Wing (Building B)

Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.

**Type of Service Provided**

| | |
|---|---|
| [X] | Nursing |
| [ ] | IntensiveCare |
| [ ] | Pediatric/Adolescent |
| [ ] | Psychiatric Nursing |
| [X] | Obstetrical Ante/Postprtum |
| [ ] | Intermediate Care |
| [ ] | Skilled Nursing |

| | |
|---|---|
| [ ] | Surgical |
| [ ] | Anesthesia |
| [X] | Clinical Lab |
| [X] | Radiological/Imaging |
| [ ] | Pharmaceutical |
| [X] | Dietetic |
| [X] | Administration |

| | |
|---|---|
| [ ] | Obstetrical Cesarean/Deliv |
| [X] | Obstetrical Recovery |
| [X] | Newborn/WellBaby |
| [ ] | Emergency |
| [ ] | Nuclear Medicine |

| | |
|---|---|
| [X] | Rehabilitation Therapy |
| [ ] | Renal Dialysis |
| [ ] | Outpatient Surgery |
| [ ] | Central Plant |
| [X] | Support Services |

Report Status:    **Data Last Update:** 01/10/2013    **Submission Date:** 01/10/2013    **Print Date:** 1/11/2013 6:25 AM

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-00900**    Building Name: **Reeves Wing (Building C)**

Configuration: **Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.**

## Type of Service Provided

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

Report Status:    **Data Last Update:** 01/10/2013    **Submission Date:** 01/10/2013    **Print Date:** 1/11/2013 6:25 AM

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-00901    Building Name: South Wing (Building D)

Configuration: Retrofit Non-Conforming building to SPC 2 and NPC 3 and remove from service by 2030

**Type of Service Provided**

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

Report Status:    **Data Last Update:** 01/10/2013    **Submission Date:** 01/10/2013    **Print Date:** 1/11/2013 6:25 AM

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-00902**    Building Name: **East Wing (Building E)**

Configuration: **Retrofit Non-Conforming building to SPC 2 and NPC 3 and remove from service by 2030**

**Type of Service Provided**

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

Report Status:    **Data Last Update:** 01/10/2013    **Submission Date:** 01/10/2013    **Print Date:** 1/11/2013 6:25 AM

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-00903   Building Name: North Wing (Building F)

Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.

**Type of Service Provided**

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

Report Status:  **Data Last Update:** 01/10/2013   **Submission Date:** 01/10/2013   **Print Date:** 1/11/2013 6:25 AM

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-00904**    Building Name: **Surgery Wing (Building G)**

Configuration: **Retrofit Conforming building to NPC 4 or NPC 5**

## Type of Service Provided

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

☐ Obstetrical Cesarean/Deliv    ☐ Rehabilitation Therapy

☐ Obstetrical Recovery    ☐ Renal Dialysis

☐ Newborn/WellBaby    ☐ Outpatient Surgery

☐ Emergency    ☐ Central Plant

☐ Nuclear Medicine    ☒ Support Services

Report Status:    **Data Last Update:** 01/10/2013    **Submission Date:** 01/10/2013    **Print Date:** 1/11/2013 6:25 AM

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-00906**    Building Name: **Centennial Wing (Building I)**

Configuration: Retrofit Conforming building to NPC 4 or NPC 5

### Type of Service Provided

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

Report Status:   **Data Last Update:** 01/10/2013    **Submission Date:** 01/10/2013    **Print Date:** 1/11/2013 6:25 AM

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-00907    Building Name: Cancer Center (Building K)

Configuration: Retrofit Conforming building to NPC 4 or NPC 5

**Type of Service Provided**

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

Report Status:   **Data Last Update:** 01/10/2013    **Submission Date:** 01/10/2013    **Print Date:** 1/11/2013 6:25 AM

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-05289**      Building Name: **New Central Plant**

Configuration: **N/A**

### Type of Service Provided

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

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

Building Number: **BLD-00898**      Building Name: **West Wing (Building A)**

**Type of Service Provided**

| | | | | |
|---|---|---|---|---|
| ☐ Nursing | Inpatient Beds | 0 | ☐ Surgical | ☐ Obstetrical Cesarean/Deliv |
| ☒ IntensiveCare | Inpatient Beds | 20 | ☐ Anesthesia | |

☐ Nursing — Inpatient Beds — 0

☒ IntensiveCare — Inpatient Beds — 20

☐ Pediatric/Adolescent — Inpatient Beds — 0

☐ Psychiatric Nursing — Inpatient Beds — 0

☐ Obstetrical Ante/Postprtum — Inpatient Beds — 0

☐ Intermediate Care — Inpatient Beds — 0

☐ Skilled Nursing — Inpatient Beds — 0

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/Imaging

☐ Pharmaceutical

☒ Dietetic

☒ Administration

☐ Obstetrical Cesarean/Deliv

☐ Obstetrical Recovery

☐ Newborn/WellBaby

☐ Emergency

☐ Nuclear Medicine

☐ Rehabilitation Therapy

☐ Renal Dialysis

☐ Outpatient Surgery

☐ Central Plant

☒ Support Services

Total Beds this Building: 20

Report Status:  **Data Last Update:** 01/10/2013      **Submission Date:** 01/10/2013      **Print Date:** 1/11/2013 6:25 AM

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

Building Number: **BLD-00902** Building Name: **East Wing (Building E)**

## Type of Service Provided

| | | | |
|---|---|---|---|
| ☐ Nursing | Inpatient Beds | 50 | |
| ☐ IntensiveCare | Inpatient Beds | 0 | |
| ☒ Pediatric/Adolescent | Inpatient Beds | 17 | |
| ☒ Psychiatric Nursing | Inpatient Beds | 20 | |
| ☐ Obstetrical Ante/Postprtum | Inpatient Beds | 0 | |
| ☐ Intermediate Care | Inpatient Beds | 0 | |
| ☒ Skilled Nursing | Inpatient Beds | 0 | |
| Total Beds this Building | | 87 | |

☐ Surgical

☐ Anesthesia

☒ Clinical Lab

☐ Radiological/Imaging

☐ Pharmaceutical

☐ Dietetic

☒ Administration

☐ Obstetrical Cesarean/Deliv

☐ Obstetrical Recovery

☐ Newborn/WellBaby

☐ Emergency

☐ Nuclear Medicine

☒ Rehabilitation Therapy

☐ Renal Dialysis

☐ Outpatient Surgery

☐ Central Plant

☒ Support Services

Report Status: **Data Last Update:** 01/10/2013    **Submission Date:** 01/10/2013    **Print Date:** 1/11/2013 6:25 AM

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

Building Number: **BLD-00904**     Building Name: **Surgery Wing (Building G)**

**Type of Service Provided**

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

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/ Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical Cesarean/Deliv

☐ Obstetrical Recovery

☐ Newborn/ WellBaby

☐ Emergency

☐ Nuclear Medicine

☐ Rehabilitation Therapy

☐ Renal Dialysis

☐ Outpatient Surgery

☐ Central Plant

☒ Support Services

Report Status:  **Data Last Update:** 01/10/2013     **Submission Date:** 01/10/2013     **Print Date:** 1/11/2013 6:25 AM

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

Building Number: **BLD-00906**   Building Name: **Centennial Wing (Building I)**

### Type of Service Provided

| | | | |
|---|---|---|---|
| ☐ Nursing | Inpatient Beds | 0 | |
| ☒ IntensiveCare | Inpatient Beds | 18 | |
| ☐ Pediatric/Adolescent | Inpatient Beds | 0 | |
| ☐ Psychiatric Nursing | Inpatient Beds | 0 | |
| ☐ Obstetrical Ante/Postprtum | Inpatient Beds | 0 | |
| ☐ Intermediate Care | Inpatient Beds | 0 | |
| ☐ Skilled Nursing | Inpatient Beds | 0 | |

Total Beds this Building   18

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☒ Radiological/Imaging

☒ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical Cesarean/Deliv

☐ Obstetrical Recovery

☐ Newborn/WellBaby

☒ Emergency

☐ Nuclear Medicine

☐ Rehabilitation Therapy

☐ Renal Dialysis

☐ Outpatient Surgery

☐ Central Plant

☒ Support Services

Report Status:   **Data Last Update:** 01/10/2013   **Submission Date:** 01/10/2013   **Print Date:** 1/11/2013 6:25 AM

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

Building Number: **BLD-00907**     Building Name: **Cancer Center (Building K)**

## Type of Service Provided

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

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

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

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

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

Building Number: **BLD-05289**     Building Name: **New Central Plant**

**Type of Service Provided**

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

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/ Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical Cesarean/Deliv

☐ Obstetrical Recovery

☐ Newborn/ WellBaby

☐ Emergency

☐ Nuclear Medicine

☐ Rehabilitation Therapy

☐ Renal Dialysis

☐ Outpatient Surgery

☒ Central Plant

☐ Support Services

Total Beds this Building     0

Report Status:   **Data Last Update:** 01/10/2013     **Submission Date:** 01/10/2013     **Print Date:** 1/11/2013 6:25 AM

**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-00898     **Building Name:** West Wing (Building A)

**Medical / Surgical (Include GYN)**

Inpatient Bed: 0     Inpatient Days: 0

**Acute Respiratory Care**

Inpatient Bed: 0     Inpatient Days: 0

**Acute Psychiatric**

Inpatient Bed: 0     Inpatient Days: 0

**Perinatal (exclude Newborn / GYN)**

Inpatient Bed: 0     Inpatient Days: 0

**Burn**

Inpatient Bed: 0     Inpatient Days: 0

**Skilled Nursing**

Inpatient Bed: 0     Inpatient Days: 0

**Pediatric**

Inpatient Bed: 0     Inpatient Days: 0

**intensive Care Newborn Nursery**

Inpatient Bed: 0     Inpatient Days: 0

**Intermediate Card**

Inpatient Bed: 0     Inpatient Days: 0

**Intensive Care**

Inpatient Bed: 20     Inpatient Days: 5787

**Rehabilitation Center**

Inpatient Bed: 0     Inpatient Days: 0

**Int. Care / development Disabled**

Inpatient Bed: 0     Inpatient Days: 0

**Coronary Care**

Inpatient Bed: 0     Inpatient Days: 0

**Chemical Dependency**

Inpatient Bed: 0     Inpatient Days: 0

**Total Beds this Building Per Unit**

20

**Total Beds this Building Per Service**

20

Report Status:     **Data Last Update:** 01/10/2013     **Submission Date:** 01/10/2013     **Print Date:** 1/11/2013 6:25 AM

**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-00902     **Building Name:** East Wing (Building E)

**Medical / Surgical (Include GYN)**

| Inpatient Bed | 50 | Inpatient Days | 8586 |

**Acute Respiratory Care**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Acute Psychiatric**

| Inpatient Bed | 20 | Inpatient Days | 5664 |

**Perinatal (exclude Newborn / GYN)**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Burn**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Skilled Nursing**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Pediatric**

| Inpatient Bed | 17 | Inpatient Days | 2910 |

**intensive Care Newborn Nursery**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Intermediate Card**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Intensive Care**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Rehabilitation Center**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Int. Care / development Disabled**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Coronary Care**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Chemical Dependency**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Total Beds this Building Per Unit**

| 87 |

**Total Beds this Building Per Service**

| 87 |

Report Status:     **Data Last Update:** 01/10/2013     **Submission Date:** 01/10/2013     **Print Date:** 1/11/2013 6:25 AM

**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-00904   **Building Name:** Surgery Wing (Building G)

**Medical / Surgical (Include GYN)**

| Inpatient Bed | 0 | Inpatient Days | 0 |
|---|---|---|---|

**Acute Respiratory Care**

| Inpatient Bed | 0 | Inpatient Days | 0 |
|---|---|---|---|

**Acute Psychiatric**

| Inpatient Bed | 0 | Inpatient Days | 0 |
|---|---|---|---|

**Perinatal (exclude Newborn / GYN)**

| Inpatient Bed | 0 | Inpatient Days | 0 |
|---|---|---|---|

**Burn**

| Inpatient Bed | 0 | Inpatient Days | 0 |
|---|---|---|---|

**Skilled Nursing**

| Inpatient Bed | 0 | Inpatient Days | 0 |
|---|---|---|---|

**Pediatric**

| Inpatient Bed | 0 | Inpatient Days | 0 |
|---|---|---|---|

**intensive Care Newborn Nursery**

| Inpatient Bed | 0 | Inpatient Days | 0 |
|---|---|---|---|

**Intermediate Card**

| Inpatient Bed | 0 | Inpatient Days | 0 |
|---|---|---|---|

**Intensive Care**

| Inpatient Bed | 0 | Inpatient Days | 0 |
|---|---|---|---|

**Rehabilitation Center**

| Inpatient Bed | 0 | Inpatient Days | 0 |
|---|---|---|---|

**Int. Care / development Disabled**

| Inpatient Bed | 0 | Inpatient Days | 0 |
|---|---|---|---|

**Coronary Care**

| Inpatient Bed | 0 | Inpatient Days | 0 |
|---|---|---|---|

**Chemical Dependency**

| Inpatient Bed | 0 | Inpatient Days | 0 |
|---|---|---|---|

**Total Beds this Building Per Unit**

| 0 |
|---|

**Total Beds this Building Per Service**

| 0 |
|---|

Report Status:   **Data Last Update:** 01/10/2013   **Submission Date:** 01/10/2013   **Print Date:** 1/11/2013 6:25 AM

**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-00906    **Building Name:** Centennial Wing (Building I)

**Medical / Surgical (Include GYN)**

Inpatient Bed: 0    Inpatient Days: 0

**Acute Respiratory Care**

Inpatient Bed: 0    Inpatient Days: 0

**Acute Psychiatric**

Inpatient Bed: 0    Inpatient Days: 0

**Perinatal (exclude Newborn / GYN)**

Inpatient Bed: 0    Inpatient Days: 0

**Burn**

Inpatient Bed: 0    Inpatient Days: 0

**Skilled Nursing**

Inpatient Bed: 0    Inpatient Days: 0

**Pediatric**

Inpatient Bed: 0    Inpatient Days: 0

**intensive Care Newborn Nursery**

Inpatient Bed: 0    Inpatient Days: 0

**Intermediate Card**

Inpatient Bed: 0    Inpatient Days: 0

**Intensive Care**

Inpatient Bed: 0    Inpatient Days: 0

**Rehabilitation Center**

Inpatient Bed: 0    Inpatient Days: 0

**Int. Care / development Disabled**

Inpatient Bed: 0    Inpatient Days: 0

**Coronary Care**

Inpatient Bed: 18    Inpatient Days: 5295

**Chemical Dependency**

Inpatient Bed: 0    Inpatient Days: 0

**Total Beds this Building Per Unit:** 18

**Total Beds this Building Per Service:** 18

---

Report Status:    **Data Last Update:** 01/10/2013    **Submission Date:** 01/10/2013    **Print Date:** 1/11/2013 6:25 AM

**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-00907     Building Name: Cancer Center (Building K)

**Medical / Surgical (Include GYN)**

Inpatient Bed: 0     Inpatient Days: 0

**Acute Respiratory Care**

Inpatient Bed: 0     Inpatient Days: 0

**Acute Psychiatric**

Inpatient Bed: 0     Inpatient Days: 0

**Perinatal (exclude Newborn / GYN)**

Inpatient Bed: 0     Inpatient Days: 0

**Burn**

Inpatient Bed: 0     Inpatient Days: 0

**Skilled Nursing**

Inpatient Bed: 0     Inpatient Days: 0

**Pediatric**

Inpatient Bed: 0     Inpatient Days: 0

**intensive Care Newborn Nursery**

Inpatient Bed: 0     Inpatient Days: 0

**Intermediate Card**

Inpatient Bed: 0     Inpatient Days: 0

**Intensive Care**

Inpatient Bed: 0     Inpatient Days: 0

**Rehabilitation Center**

Inpatient Bed: 0     Inpatient Days: 0

**Int. Care / development Disabled**

Inpatient Bed: 0     Inpatient Days: 0

**Coronary Care**

Inpatient Bed: 0     Inpatient Days: 0

**Chemical Dependency**

Inpatient Bed: 0     Inpatient Days: 0

**Total Beds this Building Per Unit**

0

**Total Beds this Building Per Service**

0

Report Status:   **Data Last Update:** 01/10/2013     **Submission Date:** 01/10/2013     **Print Date:** 1/11/2013 6:25 AM

**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-05289 **Building Name:** New Central Plant

**Medical / Surgical (Include GYN)**

Inpatient Bed | 0 | Inpatient Days | 0

**Acute Respiratory Care**

Inpatient Bed | 0 | Inpatient Days | 0

**Acute Psychiatric**

Inpatient Bed | 0 | Inpatient Days | 0

**Perinatal (exclude Newborn / GYN)**

Inpatient Bed | 0 | Inpatient Days | 0

**Burn**

Inpatient Bed | 0 | Inpatient Days | 0

**Skilled Nursing**

Inpatient Bed | 0 | Inpatient Days | 0

**Pediatric**

Inpatient Bed | 0 | Inpatient Days | 0

**intensive Care Newborn Nursery**

Inpatient Bed | 0 | Inpatient Days | 0

**Intermediate Card**

Inpatient Bed | 0 | Inpatient Days | 0

**Intensive Care**

Inpatient Bed | 0 | Inpatient Days | 0

**Rehabilitation Center**

Inpatient Bed | 0 | Inpatient Days | 0

**Int. Care / development Disabled**

Inpatient Bed | 0 | Inpatient Days | 0

**Coronary Care**

Inpatient Bed | 0 | Inpatient Days | 0

**Chemical Dependency**

Inpatient Bed | 0 | Inpatient Days | 0

**Total Beds this Building Per Unit**

0

**Total Beds this Building Per Service**

0

Report Status: **Data Last Update:** 01/10/2013  **Submission Date:** 01/10/2013  **Print Date:** 1/11/2013 6:25 AM