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

Facility Number:	11417	
Facility Name:	Barlow Respiratory Hospital	
Address:	2000 Stadium Way	
City:	Los Angeles	
Hospital Owner/Lice	ensee: Barlow Respiratory Hospital	
Year of Rep	porting: 2012	
Contact 1 e-mail Ad	ddress:	
Contact 2 e-mail Ad	ddress:	
Contact 3 e-mail Add	ldress::	
Name of Sub	omitter: Barlow Respiratory Hospital	
Submission	n Date: 1/11/2013 9:33:04 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- 00731	Dining/Kitchen Building & Additions (1902)	2000 Stadium Way	Rebuild	SPC5	01/01/2017	01/01/2017
BLD- 00732	1927 Addition (Original Building)	2000 Stadium Way	Rebuild	SPC5	01/01/2017	01/01/2017
BLD- 00733	1974 Addition "A"	2000 Stadium Way	Rebuild	SPC5	01/01/2017	01/01/2017
BLD- 02707	1974 Addition "B"	2000 Stadium Way	Rebuild	SPC5	01/01/2017	01/01/2017
BLD- 02708	1974 Addition "C"	2000 Stadium Way	Rebuild	SPC5	01/01/2017	01/01/2017

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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-00731 Dining/Kitchen Building & Additions (1	902)	Retrofit/Replacement Yes-Submitted Project:		
Facility Project Sub Scope Number Num	Date Plan A	Approved Proj. Start Proj. Comple Date Date Date	eted Status CEQA Review	
11417 IL082954-0 0 SB 1661: NEW REPLACEMENT HOSPITAL	12/30/2008 12:00:00 AM	11/01/2011 12/31/20	014 ACTI No	
Building No: BLD-00732 1927 Addition (Original Building)		Retrofit/Replacement Project:	Yes-Submitted	
Facility Project Sub Scope Number Num	Date Plan A	Approved Proj. Start Proj. Compl Date Date Date	eted Status CEQA Review	
11417 IL082954-0 0 SB 1661: NEW REPLACEMENT HOSPITAL	12/30/2008 12:00:00 AM	11/01/2011	ACTI No	
Building No: BLD-00733 1974 Addition "A"		Retrofit/Replacement Project:	Yes-Submitted	
Facility Project Sub Scope Number Num	Date Plan A	Approved Proj. Start Proj. Compl Date Date Date	eted Status CEQA Review	
11417 IL082954-0 0 SB 1661: NEW REPLACEMENT HOSPITAL	12/30/2008 12:00:00 AM	11/01/2011	ACTI No	

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Building No: BLD-02707 1974 Addition "B"	Retrofit/Replacement Yes-S Project:	ubmitted
Facility Project Sub Scope Number Num	Date Plan Approved Proj. Start Proj. Completed in Date Date Date	Status CEQA Review
11417 IL082954-0 0 SB 1661: NEW REPLACEMENT HOSPITAL	12/30/2008 11/01/2011 12:00:00 AM	ACTI No
Building No: BLD-02708 1974 Addition "C"	Retrofit/Replacement Yes-S Project:	ubmitted
Building No: BLD-02708 1974 Addition "C"  Facility Project Sub Scope Number Num	· '	Status CEQA Review

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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-00731		Building Name:	Dining/Kitchen Building & Additions (1902)		
Type of Service Prov	<u>ided</u>				
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery	
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby	
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency	
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine	
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical   X Dietetic	Rehabilitation Therapy	
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis	
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	X Support Services Obstetrical	Outpatient Surgery	
		Total Beds this Building	Cesarean/Deliv	Central Plant	

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

Building Number: BL	.D-00732	Building Name:	1927 Addition (Original Building)	
Type of Service Prov	<u>ided</u>			
X Nursing	Inpatient Beds	43 Inpatient 11093 Days	Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	X Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0  Total Beds this 43	X Support Services Obstetrical Cesarean/Deliv	Outpatient Surgery
		Building 43	Gesaleal#Deliv	Central Plant

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

Building Number: BL	.D-00733	Building Name:	1974 Addition "A"	
Type of Service Prov	<u>rided</u>			_
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery
X IntensiveCare	Inpatient Beds	6 Inpatient Days 1434	Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	X Pharmaceutical Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	X Support Services  Obstetrical	Outpatient Surgery
		Total Beds this Building  6	Cesarean/Deliv	Central Plant

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

Building Number: BL	.D-02707	Building Name: 1	1974 Addition "B"	
Type of Service Prov	<u>rided</u>			_
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0  Total Beds this 0	X Support Services Obstetrical Cesarean/Deliv	Outpatient Surgery
		Building	Cesalean/Denv	Central Plant

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

Building Number: BL	D-02708	Building Name: 19	974 Addition "C"	
Type of Service Prov	<u>ided</u>			
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0  Total Beds this 0	X Support Services Obstetrical Cesarean/Deliv	Outpatient Surgery
		Building	Octobrically Bolly	Central Plant

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Building Number:	BLD-00731 <b>B</b> t	uilding Name:	Dining/Kitchen Building & Ad	ditions (1902)	
Medical / Surgical (	Include GYN)	Acute Respira	tory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient (	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	lewborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nursery	Newborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient (	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / develope Disabled	ment
	Inpatient 0 Days	Inpatient C Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
	Inpatient 0 Days	Inpatient C Bed	Inpatient 0 Days	0	0

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Building Number:	BLD-00732	Building Name: 1927	7 Addition (Original Buildi	ng)	
Medical / Surgical (	(Include GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 43 Bed	Inpatient 1109 Days 3	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 New 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 / developr Disabled	nent
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	43	43

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Building Number:	BLD-00733	Building Name: 1974	1 Addition "A"		
Medical / Surgical	(Include GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 6 Bed	Inpatient 1434 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nev Nursery	wborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developr 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	6	6

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Building Number:	BLD-02707	Building Name: 197	4 Addition "B"		
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 Ne Nursery	wborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developr Disabled	nent
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0

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Building Number: BLD-02708	Building Name: 19	74 Addition "C"		
Medical / Surgical (Include GYN)	Acute Respirato	ry Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric	intensive Care N Nursery	lewborn	Intermediate Card	
Inpatient 0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care	Rehabilitation Center		Int. Care / developi Disabled	ment
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care	Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed	Inpatient 0 Days	0	0

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For all buildings at the facility, indicate which ones are scheduled for general acute service removal.

Building Number	Building Name	Building to be Removed / Replaced / Rebuilt
BLD-00730	Outpatient Clinic & Lab Addition	Rebuild
BLD-00731	Dining/Kitchen Building & Additions (1902)	Rebuild
BLD-00732	1927 Addition (Original Building)	Rebuild
BLD-00733	1974 Addition "A"	Rebuild
BLD-02707	1974 Addition "B"	Rebuild
BLD-02708	1974 Addition "C"	Rebuild
BLD-03010	Outpatient Clinic & Lab Addition	Rebuild

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

Building Number	Building Name	New Site			
N_1	Barlow Replacement Hospital				

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Error: Subreport could not be shown.

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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-00731 Buildin	ng Name: Dining/Kitchen Building	& Additions (1902)	
Type of Servic	e Provided			
		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	Nursing	Anesthesia		
	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	X Dietetic	Nuclear Medicine	X Support Services
	Intermediate Care	Administration		
	Skilled Nursing			

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Building Number:	BLD-00732 Buil	lding Name:	1927 Addition (Origina	l Building)		
Type of Servic	e Provided					
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	Nursing		Anesthesia			
	IntensiveCare		_	Obstetrical Recovery		Renal Dialysis
П	Pediatric/Adol		Clinical Lab			Outpatient
_	escent	X	Radiological/ Imaging	Newborn/ WellBaby		Surgery
	Psychiatric Nursing		Pharmaceutical	Emergency		Central Plant
	Obstetrical					
	Ante/Postprtum		Dietetic	Nuclear Medicine	X	Support Services
	Intermediate					
	Care		Administration			
	Skilled Nursing					

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Building Number:	BLD-00733 Building	g Name: 1974 Addition "A"			
Type of Service	e Provided				
		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
	Nursing	Anesthesia			
X	IntensiveCare		Obstetrical Recovery	Re	nal Dialysis
	Pediatric/Adol escent	Clinical Lab	Newborn/	Ou Su	itpatient rgery
	Davahiatria	Radiological/ Imaging	WellBaby	- Cu	.90.)
	Psychiatric Nursing	X Pharmaceutical	Emergency	Ce	ntral Plant
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	X Su <sub>l</sub>	pport rvices
	Intermediate Care	Administration			
	Skilled Nursing				

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Building Number:	BLD-02707 Buildin	ng Name: 1974 Addition "B"			
Type of Service	e Provided				
		Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	Nursing	Anesthesia			
	IntensiveCare		Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol	Clinical Lab			Outpatient
	escent	Radiological/ Imaging	Newborn/ WellBaby		Surgery
	Psychiatric Nursing	Pharmaceutical	Emergency		Central Plant
	Obstetrical	T Harmacoulous			Comman name
	Ante/Postprtum	Dietetic	Nuclear Medicine	X	Support Services
П	Intermediate				
	Care	Administration			
	Skilled Nursing				

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Building Number:	BLD-02708 Buildin	g Name: 1974 Addition "C"			
Type of Servic	e Provided				
		Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	Nursing	Anesthesia			
	IntensiveCare	_	Obstetrical Recovery		Renal Dialysis
П	Pediatric/Adol escent	Clinical Lab	Newborn/		Outpatient Surgery
		Radiological/ Imaging	WellBaby		Ourgery
	Psychiatric Nursing	Pharmaceutical	Emergency		Central Plant
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	X	Support Services
	Intermediate Care	Administration			
П	Skilled Nursing				

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Building Number:	BLD-00730	Building Na	me: Outpatient Clin	ic & Lab Ad	dition		
Configuration:	Rebuild (Per SB90	Definition fo	or Rebuild) with new	SPC5 and N	NPC4 or NPC5 building.		
Type of Service	ce Provided						
1	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent	X	Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
I I	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant
	ntermediate		Dietetic				
	Care Skilled Nursing	X	Administration		Nuclear Medicine	X	Support Services

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Building Number:	BLD-00731	Building Na	me: Dining/Kitchen	Building & A	Additions (1902)		
Configuration:	Rebuild (Per SB90	Definition fo	or Rebuild) with new	SPC5 and N	IPC4 or NPC5 building.		
Type of Service Provided							
	lursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Ir	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Recovery		
	Psychiatric Iursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical ante/Postprtum		Pharmaceutical		Emergency		Central Plant
	ntermediate Care	X	Dietetic		Nuclear Medicine	X	Support
	Skilled Nursing		Administration		Nucleal Medicine		Support Services

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Building Numbe	r: BLD-00732	Building Na	me: 1927 Addition (	Original Bu	ilding)		
Configuration:	Rebuild (Per SB90	Definition for	or Rebuild) with new S	SPC5 and N	NPC4 or NPC5 building.		
Type of Serv	rice Provided						
X	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant
	Intermediate		Dietetic				osmar iam
	Care Skilled Nursing		Administration		Nuclear Medicine	X	Support Services

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Building Numbe	er: BLD-00733	Building Na	me: 1974 Addition ".	A"			
Configuration:	Rebuild (Per SB90	Definition for	or Rebuild) with new S	SPC5 and N	NPC4 or NPC5 building.		
Type of Serv	vice Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum	X	Pharmaceutical		Emergency		Central Plant
	Intermediate		Dietetic	_	Emorgonoy		Contain land
	Care Skilled Nursing		Administration		Nuclear Medicine	X	Support Services

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Building Numbe	r: BLD-02707	Building Na	me: 1974 Addition "E	3"					
Configuration:	Rebuild (Per SB90	Definition fo	Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.						
Type of Serv	ice Provided								
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis		
	Pediatric/Adol escent		Clinical Lab		Recovery				
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	Obstetrical Ante/Postprtum		Pharmaceutical	П	Emergency		Central Plant		
	Intermediate Care		Dietetic		Nuclear Medicine	  X	Support		
	Skilled Nursing		Administration		Nucleal Medicine		Support Services		

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Building Number:	BLD-02708	Building Na	me: 1974 Addition "C	<b>)</b> "			
Configuration:	Rebuild (Per SB90	Definition fo	or Rebuild) with new S	PC5 and N	NPC4 or NPC5 building.		
Type of Service	ce Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant
	ntermediate		Dietetic				
	Care Skilled Nursing		Administration		Nuclear Medicine	X	Support Services

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Building Number	: BLD-03010	Building Na	me: Outpatient Clini	c & Lab Ad	dition				
Configuration:	Rebuild (Per SB90	Definition for	Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.						
Type of Servi	ce 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		
1 1	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant		
	Intermediate		Dietetic				23.1141.11411		
	Care Skilled Nursing		Administration		Nuclear Medicine	X	Support Services		

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

Building Number:	uilding Number: BLD-00730 Building Name: Outpatient Clinic & Lab Addition								
Type of Service Pr	Type of Service Provided								
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy			
IntensiveCare	Inpatient Beds	0		Anesthesia					
Pediatric/Adol escent	Inpatient Beds	0	X	Clinical Lab	Obstetrical Recovery	Renal Dialysis			
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery			
Obstetrical Ante/Postprtur	Inpatient m Beds	0		Pharmaceutical	Emergency	Central Plant			
Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Support Services			
Skilled Nursing	g Inpatient Beds	0	X	Administration					
Total Beds this Building	S	0							

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

Buildi	Building Number: BLD-03010 Building Name: Outpatient Clinic & Lab Addition								
Тур	Type of Service Provided								
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
	IntensiveCare	Inpatient Beds	0		Anesthesia				
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis		
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery		
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Central Plant		
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Support Services		
	Skilled Nursing	Inpatient Beds	0		Administration				
	Total Beds this Building		0						

Report Status: Data Last Update: 01/08/2013 Submission Date: 01/11/2013 Print Date: 1/12/2013 6:25 AM

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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-00730	Building Name:	Outpatient Clinic & Lab Addi	ition
Medical / Surgical (	nclude GYN)	Acute Respira	ory Care	Acute Psychiatric
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Perinatal (excluse N	lewborn / GYN)	Burn		Skilled Nursing
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Pediatric		intensive Care Nursery	Newborn	Intermediate Card
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / development Disabled
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit 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-03010	<b>Building Name</b>	Outpa	atient Clinic	& Lab Addition	on	
Medical / Surgical (	Include GYN)	Acute R	Acute Respiratory Care				
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	t 0	Inpatient Days	0	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	lewborn / GYN)	Burn				Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0	Inpatient Days	0	Inpatient 0	Inpatient 0 Days
Pediatric		intensiv Nursery	e Care New	born		Intermediate Card	
Inpatient 0 Bed	Inpatient Days	0 Inpatient	t 0	Inpatient Days	0	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabil Center	itation			Int. Care / develop	nent
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	t 0	Inpatient Days	0	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemic Depend				Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient Days	0 Inpatien	t 0	Inpatient Days	0	0	0

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