Report Year:	2012
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2 11510

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

Facility Number:	11510
Facility Name:	Centinela Hospital Medical Center
Address:	555 E. Hardy St.
City:	Inglewood
Hospital Owner/Lice Year of Rep Contact 1 e-mail Ad Contact 2 e-mail Ad Contact 3 e-mail Ad Name of Sub	orting: 2012 dress: dress: mitter: Puchlik Design Associates
Sumission	Date. 1/11/2013 3:27:14 PM

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For buildings For buildings which are planned for rebuild, retrofit or replacement this report shall identify; Whether the hospital owner intends to rebuild, retrofit or replace the building to SPC2, SPC3, SPC4 or SPC5 per 130061(c)(1)(A). The deadline, as described in Section 130060 or 130061.5, for rebuild, retrofit or replacement of the building that the hospital owner intends to meet, and the applicable extension for which the hospital owner has been approved per Section 130061(c)(1)(B)

Bldg. No.	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date
BLD- 00637	West Tower	555 E. Hardy St.	Retrofit	SPC2	01/01/2017	12/01/2014
BLD- 00641	Nursery Addition	555 E. Hardy St.	Retrofit	SPC2	01/01/2017	12/01/2014
BLD- 00642	Laundry Building	555 E. Hardy St.	Remove	N/A	01/01/2013	12/01/2014

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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-00637	Vest Tower Retrofit/Replacement Project:	Yes-Submitted
Facility <u>Number</u>	Project Sub Number Num	Date Plan Approved Proj. Start Proj. in Date Date	Completed Status CEQA Date Review
11510	IL101404-0	99: VSI - BUILDING 5/WEST TOWER 6/23/2010 06/23/2010 07 DING 12:00:00 AM	1/01/2015 ACTI No
11510	IL101404-0- GEO	99: VSI - BUILDING 5/WEST TOWER 6/23/2010 3/14/2012 06/23/2010 03 DING 12:00:00 12:00:00 AM AM	3/14/2012 APPR No
11510	IL101404-1	99: VSI - BUILDING 5, MATERIAL 6/25/2010 12/7/2011 02/02/2012 17 ING PROGRAM 12:00:00 12:00:00 AM AM	1/01/2012 PEND No
11510	IL101404-2	99: VSI - BUILDING 5, VOLUNTARY 6/25/2010 7/3/2012 07/13/2012 12 MIC UPGRADE 12:00:00 12:00:00 AM AM	2/01/2013 PEND No
11510	IL101404-3	99: VSI - BUILDING 5, TESTING OF 6/30/2010 3/4/2011 06/06/2011 1 EX PILES 12:00:00 12:00:00 AM AM	1/01/2012 PEND No
11510	IL101404-4	99: VSI - BUILDING 5, LOBBY / ADMIN 6/30/2010 5/23/2011 06/01/2013 0 ODEL 12:00:00 12:00:00 AM AM	1/01/2015 ACTI No
11510	IL101404-5	Ready Demolition and Temporary 6/30/2010 2/21/2012 02/29/2012 10 py 12:00:00 12:00:00 AM AM	0/01/2013 PEND No

Report Year: 2012 11510 Centinela Hospital Medical C	Center Inglewood	Page:4 of 42
Building No: BLD-00641 Nursery Addition	Retrofit/Replacement Yes-Sul Project:	omitted
Facility Project Sub Scope Number Number Num	Date Plan Approved Proj. Start Proj. Completed in Date Date Date	Status CEQA Review
11510 IL101406-0 0 SB 499: VSI - BUILDING 9/NURSERY ADDITION	6/23/2010 06/23/2010 01/01/2015 A 12:00:00 AM	ACTI No
11510 IL101406-0- 0 SB 499: VSI - BUILDING 9/NURSERY GEO ADDITION	6/23/2010 3/14/2012 06/23/2010 03/14/2012 A 12:00:00 12:00:00 AM AM	PPR No
11510 IL101406-1 0 SB 499: VSI - BUILDING 9, MATERIAL TESTING PROGRAM	6/25/2010 12/7/2011 02/02/2012 11/01/2012 PI 12:00:00 12:00:00 AM AM	END No
11510 IL101406-2 0 SB 499: VSI - BUILDING 9, VOLUNTARY SEISMIC UPGRADE	6/25/2010 7/12/2012 06/01/2013 12/01/2013 PI 12:00:00 12:00:00 AM AM	END No

Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F) **BLD-00637** West Tower **Building Name:** Building Number: **Type of Service Provided** X Х Obstetrical Surgical X Inpatient 140 Inpatient 25389 Nursing Recovery Days Beds Newborn/ Inpatient Days IntensiveCare Inpatient 0 0 Anesthesia X WellBaby Beds Emergency **Clinical Lab** Х Inpatient Days 0 Pediatric/Adol Inpatient 0 escent Beds Nuclear Radiological/ Medicine Imaging Psychiatric Inpatient Days Inpatient 0 0 Nursing Beds Pharmaceutical Rehabilitation X Obstetrical Inpatient **Inpatient Days** 0 0 Dietetic Therapy Ante/Postprtum Beds **Renal Dialysis** Administration X Inpatient **Inpatient Days** 0 Intermediate 0 Care Beds X Support Outpatient X Services Surgery X 24 **Inpatient Days** Skilled Nursing Inpatient 0 Beds Х Obstetrical Total Beds this 164 Cesarean/Deliv **Central Plant** Building

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Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F) Building Number: BLD-00641 **Nursery Addition Building Name: Type of Service Provided Obstetrical** Surgical 0 Nursing Inpatient 0 Inpatient Recovery Beds Days Newborn/ X IntensiveCare Inpatient 9 **Inpatient Days** 2052 X Anesthesia WellBaby Beds **Clinical Lab** Emergency Inpatient Days Х 0 Pediatric/Adol Inpatient 0 escent Beds Nuclear Radiological/ Medicine Imaging Inpatient Days 0 Psychiatric Inpatient 0 Nursing Beds Pharmaceutical Rehabilitation Inpatient Days 0 Inpatient Obstetrical 0 Dietetic Therapy Ante/Postprtum Beds **Renal Dialysis** Administration Intermediate Inpatient Days Inpatient 0 0 Care Beds Outpatient X Support Services Surgery Skilled Nursing Inpatient 0 Inpatient Days 0 Beds Obstetrical Total Beds this 9 Cesarean/Deliv Central Plant Building

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Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F) Building Number: **BLD-00642 Building Name:** Laundry Building **Type of Service Provided Obstetrical** Surgical Nursing 0 Inpatient 0 Inpatient Recovery Beds Days Newborn/ IntensiveCare Inpatient 0 **Inpatient Days** 0 Anesthesia WellBaby Beds Emergency **Clinical Lab** Inpatient Days 0 Pediatric/Adol Inpatient 0 escent Beds Nuclear Radiological/ Medicine Imaging Inpatient Days 0 Psychiatric Inpatient 0 Nursing Beds Pharmaceutical Rehabilitation Inpatient Days 0 Inpatient Obstetrical 0 Dietetic Therapy Ante/Postprtum Beds **Renal Dialysis** Administration Intermediate Inpatient Days Inpatient 0 0 Care Beds Outpatient X Support Services Surgery Skilled Nursing Inpatient 0 Inpatient Days 0 Beds Obstetrical Total Beds this 0 Cesarean/Deliv Central Plant Building

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

Building Number:	BLD-00637	Building Name: Wes	t Tower			
Medical / Surgical (Include GYN)		Acute Respiratory Care		Acute Psychiatric	Acute Psychiatric	
Inpatient 108 Bed	Inpatient 2538 Days 9	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 24 Bed	Inpatient 0 Days	
Pediatric		intensive Care Newborn Nursery		Intermediate Card		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care		Rehabilitation Center		Int. Care / develop Disabled	ment	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 32 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	164	164	

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Inglewood

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

Building Number:	BLD-00641	Building Name: Nur	sery Addition			
Medical / Surgical (Include GYN)		Acute Respiratory Care		Acute Psychiatric	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 9 Bed	Inpatient 2052 Days	Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care		Rehabilitation Center		Int. Care / develop Disabled	ment	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	9	9	

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Inglewood

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

Building Number:	BLD-00642	Building Name:	undry Building		
Medical / Surgical	(Include GYN)	Acute Respirato	ry 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 N Nursery	ewborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / develop Disabled	ment
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0

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-00633	West Wing/ER Addition	Remain
BLD-00634	North Wing/Day Surgery	Remain
BLD-00635	Dietary Storage	Remain
BLD-00636	East Tower	Remain
BLD-00637	West Tower	Retrofit
BLD-00638	Engineering	Remain
BLD-00639	East Wing	Remain
BLD-00640	Central Plant Addition	Remain
BLD-00641	Nursery Addition	Retrofit
BLD-00642	Laundry Building	Remove

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Provide the number of inpaient beds and patient days per type of service for the year of 2009, 2010 and 2011 for buildings to be removed from acute care services per Section 130061(c)(2)(D)							
Building Nrbr: BLD-006	42 Building Name:	Laundry Bu	uilding	Year of Informat	ion: 2011		
	Nume.			Information Current As Of:	3		
<u>Type of Services</u> Provided							
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
IntensiveCare	Inpatient Beds	0	Anesthesia				
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis		
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery		
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	Central Plant		
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services		
Skilled Nursing	Inpatient Beds Total Beds this Building	0	Administration				

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

Building Number:	BLD-00642 Building	g Name: Laundry Building		
Will general acutr	r care services and beds	s will be relocated to a new, Exist	ing or retrofittrd building?	
Support Services	N/A			

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Inglewood

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-00637	Building Name:	W	est Tower				
Type of Service	e Provided		x	Surgical	X	Obstetrical	X	Rehabilitation
X	Nursing	[x	Anesthesia		Cesarean/Deliv		Therapy
	IntensiveCare				X	Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		×	Clinical Lab		Newborn/	X	Outpatient Surgery
	Psychiatric			Radiological/ Imaging		WellBaby		
	Nursing			Pharmaceutical		Emergency		Central Plant
	Obstetrical Ante/Postprtu	^m [Dietetic		Nuclear Medicine	X	Support Services
	Intermediate Care		x	Administration				
X	Skilled Nursing	g						

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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)

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Building Number:	BLD-00641	Building Name:	Nu	ursery Addition				
Type of Service Provided								
	Nursing			Anesthesia		Cesarean/Deliv		Therapy
X	IntensiveCare	9				Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		<	Clinical Lab	X	Newborn/ WellBaby		Outpatient Surgery
	Psychiatric Nursing			Radiological/ Imaging	_		_	
_	Obstatrias			Pharmaceutical		Emergency		Central Plant
	Obstetrical Ante/Postprtu	m [Dietetic		Nuclear Medicine	X	Support Services
	Intermediate Care			Administration				
	Skilled Nursin	ig I						

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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-00642 Build	ing Name: Laundry Building			
Type of Servic	e Provided	Surgical	Obstetrical	Rehabilitation	
	Nursing	Anesthesia	Cesarean/Deliv	Therapy	
	IntensiveCare	Clinical Lab	Obstetrical Recovery	Renal Dialysis	
	Pediatric/Adol escent	Radiological/ Imaging	Newborn/ WellBaby	Outpatient 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 Numbe	er: BLD-00633	Building Na	me: West Wing/ER Ac	dition			
Configuration:	N/A						
Type of Serv	vice Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical		Pharmaceutical				
	Ante/Postprtum			X	Emergency		Central Plant
	Intermediate		Dietetic	_			
	Care				Nuclear Medicine	Х	Support Services
	Skilled Nursing		Administration				

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Building Numbe	er: BLD-00634	Building Na	me: North Wing/Day S	Surgery			
Configuration:	N/A						
Type of Serv	vice Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical		Pharmaceutical				
	Ante/Postprtum				Emergency		Central Plant
	Intermediate		Dietetic				
	Care				Nuclear Medicine	Х	Support Services
	Skilled Nursing		Administration				

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Building Numbe	er: BLD-00635	Building Na	me: Dietary Storage			
Configuration	: N/A					
Type of Serv	vice Provided					
	Nursing		Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia	Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab	Recovery		
	Psychiatric Nursing		Radiological/ Imaging	Newborn/ WellBaby		Outpatient Surgery
	Obstetrical		Pharmaceutical			
	Ante/Postprtum			Emergency		Central Plant
	Intermediate	X	Dietetic			
	Care			Nuclear Medicine	X	Support Services
	Skilled Nursing		Administration			00111000

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Building Numb	er: BLD-00636	Building Na	me: East Tower				
Configuration	: N/A						
Type of Ser	vice Provided						
X	Nursing	X	Surgical		Obstetrical Cesarean/Deliv	Х	Rehabilitation Therapy
X	IntensiveCare	X	Anesthesia		Obstetrical	Х	Renal Dialysis
X	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby	X	Outpatient Surgery
	Obstetrical		Pharmaceutical				
	Ante/Postprtum				Emergency	Х	Central Plant
	Intermediate		Dietetic	_			
	Care				Nuclear Medicine	Х	Support Services
	Skilled Nursing		Administration				

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Building Numbe	er: BLD-00637	Building Na	me: West Tower				
Configuration	: N/A						
Type of Ser	vice Provided						
X	Nursing	X	Surgical	X	Obstetrical Cesarean/Deliv	Х	Rehabilitation Therapy
	IntensiveCare	X	Anesthesia	X	Obstetrical		Renal Dialysis
	Pediatric/Adol escent	X	Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby	X	Outpatient Surgery
	Obstetrical		Pharmaceutical				
	Ante/Postprtum				Emergency		Central Plant
	Intermediate		Dietetic				
	Care				Nuclear Medicine	Х	Support Services
X	Skilled Nursing	X	Administration				

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Building Numbe	er: BLD-00638	Building Na	me: Engineering				
Configuration	: N/A						
Type of Serv	vice Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical		Pharmaceutical				
	Ante/Postprtum				Emergency	Х	Central Plant
	Intermediate		Dietetic	_			
	Care				Nuclear Medicine	X	Support Services
	Skilled Nursing		Administration				

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Building Numbe	er: BLD-00639	Building Na	me: East Wing			
Configuration	: N/A					
Type of Ser	vice Provided					
	Nursing		Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	IntensiveCare		Anesthesia	Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab	Recovery		
	Psychiatric Nursing	X	Radiological/ Imaging	Newborn/ WellBaby		Outpatient Surgery
	Obstetrical	X	Pharmaceutical			
	Ante/Postprtum			Emergency		Central Plant
	Intermediate	X	Dietetic			
	Care			Nuclear Medicine	Х	Support Services
	Skilled Nursing		Administration			20.1000

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Building Number	er: BLD-00640	Building Na	me: Central Plant Add	lition			
Configuration	: N/A						
Type of Ser	vice Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical		Pharmaceutical				
	Ante/Postprtum				Emergency	X	Central Plant
	Intermediate		Dietetic	_			
	Care				Nuclear Medicine	X	Support Services
	Skilled Nursing		Administration				

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Building Number	: BLD-00641	Building Na	me: Nursery Addition				
Configuration:	N/A						
Type of Servi	ce Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent	x	Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging	X	Newborn/ WellBaby		Outpatient Surgery
	Obstetrical		Pharmaceutical				
	Ante/Postprtum				Emergency		Central Plant
	Intermediate		Dietetic				
	Care				Nuclear Medicine	Х	Support Services
	Skilled Nursing		Administration				

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Building Numbe	er: BLD-00642	Building Na	me: Laundry Building				
Configuration	N/A						
Type of Serv	vice Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical		Pharmaceutical				
	Ante/Postprtum				Emergency		Central Plant
	Intermediate		Dietetic	_			
	Care				Nuclear Medicine	x	Support Services
	Skilled Nursing		Administration				

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Inglewood

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	ng Number: BLI	D-00633	Building N	lame: We	est Wing/ER Addition		
Туре	of Service Prov	ided					
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare	Inpatient Beds	0		Anesthesia		
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	X Emergency	Central Plant
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Support Services
	Skilled Nursing	Inpatient Beds	0		Administration		
	Total Beds this Building		0				

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Inglewood

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	ng Number: BLI	D-00634	Building N	lame: No	orth Wing/Day Surgery	/	
Туре	e of Service Prov	ided					
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare	Inpatient Beds	0		Anesthesia		
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Central Plant
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Support Services
	Skilled Nursing	Inpatient Beds	0		Administration		
	Total Beds this Building		0				

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Centinela Hospital Medical Center

Inglewood

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	ng Number: BLI	D-00635	Building N	Name: Die	etary Storage		
Туре	e of Service Prov	ided					
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare	Inpatient Beds	0		Anesthesia		
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Central Plant
П	Intermediate Care	Inpatient Beds	0	X	Dietetic	Nuclear Medicine	X Support Services
	Skilled Nursing	Inpatient Beds	0		Administration		
	Total Beds this Building		0				

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Submission Date: 01/11/2013

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Inglewood

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	ng Number: BL	D-00636	Building N	Name: Eas	st Tower				
<u>Туре</u>	Type of Service Provided								
Х	Nursing	Inpatient Beds	136	X	Surgical	Obstetrical Cesarean/Deliv	X Rehabilitation Therapy		
X	IntensiveCare	Inpatient Beds	12	X	Anesthesia				
X	Pediatric/Adol escent	Inpatient Beds	29		Clinical Lab	Obstetrical Recovery	X Renal Dialysis		
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	X Outpatient Surgery		
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	X Central Plant		
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Support Services		
	Skilled Nursing	Inpatient Beds	0		Administration				
	Total Beds this Building		177						

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Inglewood

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	ng Number: BLI	D-00638	Building I	Name: En	gineering			
Туре	Type of Service Provided							
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
	IntensiveCare	Inpatient Beds	0		Anesthesia			
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis	
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery	
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	X Central Plant	
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Support Services	
	Skilled Nursing	Inpatient Beds	0		Administration			
	Total Beds this Building		0					

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Inglewood

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	ng Number: BLI	D-00639	Building N	Name: Ea	st Wing		
Туре	e of Service Prov	<u>ided</u>					
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
Х	IntensiveCare	Inpatient Beds	19		Anesthesia		
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum	Inpatient Beds	0	X	Pharmaceutical	Emergency	Central Plant
	Intermediate Care	Inpatient Beds	0	X	Dietetic	Nuclear Medicine	X Support Services
	Skilled Nursing	Inpatient Beds	0		Administration		
	Total Beds this Building		19				

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Inglewood

Building Numbe	er: BLD-00640	Building Na	ame: Ce	entral Plant Addition		
Type of Servi	ce Provided					
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
Intensive	Care Inpatient Beds	0		Anesthesia		
Pediatric escent	/Adol Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiati Nursing	ric Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetric Ante/Pos		0		Pharmaceutical	Emergency	X Central Plant
Intermed	iate Inpatient Beds	0		Dietetic	Nuclear Medicine	X Support Services
Skilled N	ursing Inpatient Beds	0		Administration		
Total Beo Building	ds this	0				
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Inglewood

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-00633	Building Name:	West Wing/ER Addition		
Medical / Surgical (Include GYN)	Acute Respir	atory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse I	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Car Nursery	e Newborn	Intermediate Card	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center	ı	Int. Care / develop Disabled	ment
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	0	0

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Centinela Hospital Medical Center

Inglewood

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-00634	Buildi	ng Name:	North	Wing/Day Surger	у		
Medical / Surgical (Include GYN)		Acute Respira	atory (Care		Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0	Inpatient Bed	0	Inpatient(Days	0	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse I	Newborn / GYN)		Burn				Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0	Inpatient Bed	0	Inpatient (Days	0	Inpatient 0 Bed	Inpatient 0 Days
Pediatric			intensive Care Nursery	e New	born		Intermediate Card	
Inpatient 0 Bed	Inpatient Days	0	Inpatient	0	Inpatient (Days	0	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care			Rehabilitation Center	า			Int. Care / develop Disabled	nent
Inpatient 0 Bed	Inpatient Days	0	Inpatient Bed	0	Inpatient (Days	0	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care			Chemical Dependency				Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient Days	0	Inpatient Bed	0	Inpatient (0	0	0

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Centinela Hospital Medical Center

Inglewood

Building Number:	BLD-00635	Buildir	ng Name: Dieta	ry Storage		
Medical / Surgical (Include GYN)		Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse I	Newborn / GYN)		Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric			intensive Care Nev Nursery	vborn	Intermediate Card	
Inpatient 0 Bed	Inpatient Days	0	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care			Rehabilitation Center		Int. Care / develop Disabled	ment
Inpatient 0 Bed	Inpatient Days	0	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care			Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient Days	0	Inpatient 0 Bed	Inpatient 0 Days	0	0

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Building Number:	BLD-00636 Build	ding Name: East Tower	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 136 Bed	Inpatient 31972 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (excluse N	lewborn / GYN)	Burn	Skilled Nursing
Inpatient 29 Bed	Inpatient 2052 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric		intensive Care Newborn Nursery	Intermediate Card
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care		Rehabilitation Center	Int. Care / development Disabled
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care		Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding PerUnitService
Inpatient 12 Bed	Inpatient 3697 Days	Inpatient 0 Inpatient 0 Bed Days	177 177

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Inglewood

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Building Number:	BLD-00638	Building	g Name: Engir	neering		
Medical / Surgical (nclude GYN)		Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days		Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	lewborn / GYN)	E	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 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 Days		Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care			Rehabilitation Center		Int. Care / develop Disabled	ment
Inpatient 0 Bed	Inpatient Days		Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care			Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient Days		Inpatient 0 Bed	Inpatient 0 Days	0	0

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Centinela Hospital Medical Center

Inglewood

Building Number:	BLD-00639 Buil	ding Name: East Wing	
Medical / Surgical (I	nclude GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (excluse N	ewborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days
Pediatric		intensive Care Newborn Nursery	Intermediate Card
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care		Rehabilitation Center	Int. Care / development Disabled
Inpatient 19 Bed	Inpatient 5046 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care		Chemical Dependency	Total Beds this Total Beds this Building Per Building Per Unit Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	19 19

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Inglewood

Building Number:	BLD-00640	Building I	Name: Centr	ral Plant Addition		
Medical / Surgical (I	nclude GYN)	Ac	cute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inp Be	oatient 0 ed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	lewborn / GYN)	Bu	ırn		Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inp Be	oatient 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric			tensive Care New ursery	vborn	Intermediate Card	
Inpatient 0 Bed	Inpatient Days	0 Inp Be	oatient 0 ed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		-	ehabilitation enter		Int. Care / develop Disabled	ment
Inpatient 0 Bed	Inpatient Days	0 Inp Be	oatient 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		-	nemical ependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient Days	0 Inp Be	oatient 0	Inpatient 0 Days	0	0

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