Report Year:	2012
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11548 5

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

Facility Number:	11548
Facility Name:	San Gabriel Valley Medical Center
Address:	438 W. Las Tunas Dr.
City:	San Gabriel
Hospital Owner/Lice	ensee: AHMC San Gabriel Valley Medical Center
Year of Rep	porting: 2012
Contact 1 e-mail Ad	ldress:
Contact 2 e-mail Ad	ldress:
Contact 3 e-mail Ado	dress::
Name of Sub	omitter: San Gabriel Valley Medical Center
Submission	n Date: 1/10/2013 5:43:36 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			Anticipated Completion Date
BLD- 00662	Pavilion Building	438 W. Las Tunas Dr.	Retrofit	SPC2	01/01/2015	03/28/2014

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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-00662 Pavilion Building	Retrofit/Replacement Yes-Submitted
Facility Project Sub Scope Number Number Num	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Date Review
11548 IL101496-1 0 SB 499: VSI - BLDG 1/PAVILION BLDG, OUT OF PLANE WALL ANCHORAGE	6/30/2010 3/2/2011 08/20/2012 03/28/2014 PEND No 12:00:00 12:00:00 AM AM

Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F) **BLD-00662 Pavilion Building Building Name:** Building Number: **Type of Service Provided** Obstetrical Х 745 Surgical X Inpatient 16 Nursing Inpatient Recovery Days Beds Newborn/ X 23 Inpatient Days IntensiveCare Inpatient 4872 X Anesthesia WellBaby Beds Emergency Clinical Lab Inpatient Days 0 Pediatric/Adol Inpatient 0 escent Beds Nuclear Radiological/ Medicine Imaging Psychiatric Inpatient Days Х Inpatient 7782 42 Nursing Beds Pharmaceutical Rehabilitation X Obstetrical Inpatient Inpatient Days 1552 7 Х X Dietetic Therapy Ante/Postprtum Beds Iх **Renal Dialysis** Administration Inpatient **Inpatient Days** 0 Intermediate 0 Care Beds X Support Outpatient Services Surgery X Inpatient Days 10599 Skilled Nursing Inpatient 41 Beds Х Obstetrical Total Beds this 129 Cesarean/Deliv X **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-00662 Bu	uilding Name: Pavil	ion Building			
Medical / Surgical (Include GYN) Acute Respiratory Care Acute Psychiatric						
Inpatient 16 Bed	Inpatient 745 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 42 Bed	Inpatient 7782 Days	
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing		
Inpatient 7 Bed	Inpatient 1552 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 41 Bed	Inpatient 1059 Days 9	
Pediatric		intensive Care New Nursery	vborn	Intermediate Card		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 12 Bed	Inpatient 2125 Days	Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care		Rehabilitation Center			Int. Care / development Disabled	
Inpatient 11 Bed	Inpatient 2747 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	129	129	

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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-00662	Pavilion Building	Retrofit
BLD-00664	Radiology and Surgery Addition	Remain
BLD-00666	Emergency Addition	Remain
BLD-00667	CCU Building	Remain
BLD-00668	Patient Tower	Remain

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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-00662 Bui	ding Name:	Pa	vilion Building				
Type of Service Provided								
				Surgical	X	Obstetrical Cesarean/Deliv	Х	Rehabilitation Therapy
X	Nursing	Б	ĸ	Anesthesia				
X	IntensiveCare		<u> </u>	Anestnesia	X	Obstetrical Recovery	X	Renal Dialysis
	Pediatric/Adol			Clinical Lab	_			Outpatient
	escent			Radiological/		Newborn/ WellBaby		Surgery
X	Psychiatric Nursing			Imaging	_	_	_	
	C C			Pharmaceutical		Emergency	Х	Central Plant
X	Obstetrical Ante/Postprtum	Þ	K	Dietetic		Nuclear Medicine	X	Support Services
	Intermediate							
	Care			Administration				
X	Skilled Nursing							

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number:	: BLD-00662	Building Na	me: Pavilion Building						
Configuration: Retrofit Non-Conforming building to SPC 2 and NPC 3 and remove from service by 2030									
Type of Servi	ce Provided								
1 X	Nursing		Surgical	X	Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy		
X I	ntensiveCare	X	Anesthesia	X	Obstetrical	X	Renal Dialysis		
	Pediatric/Adol escent		Clinical Lab		Recovery				
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
1/1	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	X	Central Plant		
	ntermediate Care	X	Dietetic		Nuclear Medicine		Support		
_	Skilled Nursing		Administration			X	Support Services		

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Building Number	: BLD-00664	Building Nar	me: Radiology and Sur	gery Ad	dition		
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5				
Type of Servi	ce Provided						
	Nursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare	X	Anesthesia		Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby	X	Outpatient Surgery
	Obstetrical		Pharmaceutical				
	Ante/Postprtum				Emergency		Central Plant
	Intermediate Care		Dietetic				
,	Cale			X	Nuclear Medicine		Support Services
	Skilled Nursing		Administration				

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Building Number	:: BLD-00666	Building Na	me: Emergency Addition	on		
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5			
Type of Servi	ce 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	Support Services
	Skilled Nursing		Administration			

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Building Number:	BLD-00667	Building Nar	me: CCU Building			
Configuration:	Retrofit Conforming	g building to	NPC 4 or NPC 5			
Type of Servic	e Provided					
N	lursing		Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X Ir	ntensiveCare		Anesthesia	Obstetrical	X	Renal Dialysis
	Pediatric/Adol scent		Clinical Lab	Recovery		
	Psychiatric Iursing		Radiological/ Imaging	Newborn/ WellBaby		Outpatient Surgery
	Obstetrical		Pharmaceutical			
	Inte/Postprtum			Emergency		Central Plant
	ntermediate		Dietetic			
C	Care			Nuclear Medicine		Support Services
s s	Skilled Nursing		Administration			

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Building Numbe	er: BLD-00668	Building Na	me: Patient Tower				
Configuration	: Retrofit Conformin	g building to	NPC 4 or NPC 5				
Type of Serv	vice Provided						
X	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical Recovery	X	Renal Dialysis
	Pediatric/Adol escent	x	Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging	X	Newborn/ WellBaby		Outpatient Surgery
	Obstetrical	Х	Pharmaceutical				
X	Ante/Postprtum				Emergency		Central Plant
	Intermediate Care		Dietetic				0
	Gale				Nuclear Medicine		Support Services
	Skilled Nursing	X	Administration				

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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:	BLD-00664	Building N	Name: Ra	diology and Surge	ry Addition	
Type of Service I	Provided					
Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCa	re Inpatient Beds	0	X	Anesthesia		
Pediatric/Ad escent	ol Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby	X Outpatient Surgery
Obstetrical Ante/Postpri	Inpatient tum Beds	0		Pharmaceutical	Emergency	Central Plant
Intermediate	e Inpatient Beds	0		Dietetic	X Nuclear Medicine	Support Services
Skilled Nurs	ing Inpatient Beds	0		Administration		
Total Beds t Building	his	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	ng Number: BLI	D-00666	Building N	Name: En	nergency Addition		
Туре	e of Service Prov	ided					
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare	Inpatient Beds	0		Anesthesia		
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	X Emergency	Central Plant
Π	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Support Services
	Skilled Nursing	Inpatient Beds	0		Administration		
	Total Beds this Building		0				

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

Buildi	Building Number: BLD-00667 Building Name: CCU Building							
Туре	Type of Service Provided							
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
X	IntensiveCare	Inpatient Beds	8		Anesthesia			
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	X Renal Dialysis	
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery	
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Central Plant	
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Support Services	
	Skilled Nursing	Inpatient Beds	0		Administration			
	Total Beds this Building		8					

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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: BL	-D-00668	Building N	ame: Pa	tient Tower		
Type of Service Pro	vided					
X Nursing	Inpatient Beds	114		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0		Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	X	Clinical Lab	Obstetrical Recovery	X Renal Dialy
Psychiatric	Inpatient Beds	0		Radiological/ Imaging	X Newborn/ WellBaby	Outpatient Surgery
Obstetrical X Ante/Postprtum	Inpatient Beds	22	X	Pharmaceutical	Emergency	Central Pla
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	X	Administration		
Total Beds this Building		136				

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		on the numb er Section 13		nt beds by ty	be of u	nit provided by bu	ildings tha	t are classified as	sPC-2, SPC-3,
Building N	umber:	BLD-00664	Build	ling Name:	Radi	ology and Surgery /	Addition		
Medical / S	Surgical (In	clude GYN)		Acute Resp	iratory	Care	Acu	te Psychiatric	
Inpatient Bed	0	Inpatient Days	0	Inpatient Bed	0	Inpatient (Days	lnpa Bed		npatient (Days

Perinatal (excluse New	born / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days		ays	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Newbo Nursery	orn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days		ays	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developn Disabled	nent
Inpatient 0 Bed	Inpatient 0 Days		ays	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		ays	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-00666	Building Nam	e: Eme	rgency Addition				
Medical / Surgical (Include GYN)	Acute	Respiratory	Care	Acute Ps	ychiatric		
Inpatient 0 Bed	Inpatient Days	0 Inpatie Bed	nt 0	Inpatient 0 Days	Inpatient Bed	0	Inpatient 0 Days	
Perinatal (excluse N	Newborn / GYN)	Burn			Skilled N	Skilled Nursing		
Inpatient 0 Bed	Inpatient Days	0 Inpatie Bed	nt 0	Inpatient 0 Days	Inpatient Bed	0	Inpatient 0 Days	
Pediatric		intensi Nurser	ve Care Nev y	vborn	Intermed	iate Card		
Inpatient 0 Bed	Inpatient Days	0 Inpatie Bed	nt 0	Inpatient 0 Days	Inpatient Bed	0	Inpatient 0 Days	
Intensive Care		Rehab Center	ilitation		Int. Care Disabled	/ developr	nent	
Inpatient 0 Bed	Inpatient Days	0 Inpatie Bed	nt 0	Inpatient 0 Days	Inpatient Bed	0	Inpatient 0 Days	
Coronary Care		Chemi Depen			Total Bee Building Unit		Total Beds this Building Per Service	
Inpatient 0 Bed	Inpatient Days	0 Inpatie Bed	nt 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-00667	Building Name:	CCU Building		
Medical / Surgical (Include GYN)	Acute Resp	biratory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	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 C Nursery	are Newborn	Intermediate Card	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitat Center	ion	Int. Care / develop Disabled	ment
Inpatient 8 Bed	Inpatient 12 Days	252 Inpatient Bed	0 Inpatient Days	0 Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependenc	су.	Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 8	8

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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-00668 Buil	ding Name: Patient Tower		
Medical / Surgical (Include GYN)		Acute Respiratory Care	Acute Psychiatric	
Inpatient 114 Bed	Inpatient 22721 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Perinatal (excluse Newborn / GYN)		Burn	Skilled Nursing	
Inpatient 22 Bed	Inpatient 5803 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 this Total Beds this Building Per Building Per Unit Service	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	136 136	

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