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

Facility Number:	11731	
Facility Name:	Good Samaritan Hospital - Los Angeles	
Address:	1225 Wilshire Blvd.	
City:	Los Angeles	
Hospital Owner/Lice	ensee: Good Samaritan Hospital / 930000071	
Year of Rep	orting: 2012	
Contact 1 e-mail Ad	ldress:	
Contact 2 e-mail Ad	ldress:	
Contact 3 e-mail Add	dress::	
Name of Sub	mitter: Dan McLaughlin	
Submission	Date: 10/24/2012 4:32:10 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- 01997	1927 Building	1225 Wilshire Blvd.	Replace	SPC4	01/01/2015	09/01/2014
BLD- 01998	1953 Building	1225 Wilshire Blvd.	Replace	SPC4	01/01/2015	09/01/2014

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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-01997	Building Name: 19	Building Name: 1927 Building		
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  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-01998	Building Name: 1	1953 Building	
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	Cesaleal // Deliv	Central Plant

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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-01997	Building Name: 19	927 Building			
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 N	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 Nursery	Newborn	Intermediate Card		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care		Rehabilitation Center			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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#### Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number:	BLD-01998	Building Name: 1953	3 Building				
Medical / Surgical	(Include GYN)	Acute Respiratory	Care	Acute Psychiatric			
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing			
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Pediatric		intensive Care Nev Nursery	wborn	Intermediate Card	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	Int. Care / development Disabled		
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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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-01993	Main Hospital	Remain
BLD-01994	ICU / CCU Addition	Remain
BLD-01995	Mechanical Plant	Remain
BLD-01996	MRI Addition	Remain
BLD-01997	1927 Building	Replace
BLD-01998	1953 Building	Replace

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For the building or buildings to be replaced, rebuilt, removed from acute care service, provide the following:

The projected date or dates the building will be removed from service per Section 130061 (c)(2)(A) and provide said date or dates for replaced or rebuild buildings as well.

The planned uses of the building or buildings to be removed from acute care service per Section 130061(c)(2)(B) and provide said uses for replaced or rebuild buildings as well.

The inpatient service currently delivered in the building or buildings per Section 130061(c)(20(C)

Building I	Number: BLD-0199	7	1927 Build	ding		Removal Date:		09/01/2014
Planned	Uses for the building t	o be remov	ed from acute care	e service:				
Planned	use for building: Clir	nic		Jurisdiction:	OSHPD			
<u>Inpatient</u>	services currently deli	ivered in the	e building:					
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Ш	Rehabilitation Therapy
	IntensiveCare		Anesthesia				_	
	Pediatric/Adol escent		Clinical Lab		Obstetrical Recovery			Renal Dialysis
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby			Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical	П	·			Central Plant
	Intermediate Care	X	Dietetic		Emergency			OSHI A FIGHT
	Skilled Nursing		Administration		Nuclear Medicine		X	Support Services

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For the building or buildings to be replaced, rebuilt, removed from acute care service, provide the following: The projected date or dates the building will be removed from service per Section 130061 (c)(2)(A) and provide said date or dates for replaced or rebuild buildings as well.

The planned uses of the building or buildings to be removed from acute care service per Section 130061(c)(2)(B) and provide said uses for replaced or rebuild buildings as well.

The inpatient service currently delivered in the building or buildings per Section 130061(c)(20(C)

Building N	Number: BLD-0199	8	1953 Build	ding		Removal Date:		09/01/2014
Planned	Uses for the building t	o be remov	ed from acute care	e service:				
Planned	use for building: Clir	nic		Jurisdiction:	OSHPD			
Inpatient	services currently del	ivered in the	e building:		Obstatuisal			Dahahilitatian
	Nursing		Surgical		Obstetrical Cesarean/Deliv			Rehabilitation Therapy
	IntensiveCare		Anesthesia				_	
	Pediatric/Adol escent		Clinical Lab		Obstetrical Recovery		Ш	Renal Dialysis
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby			Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical	П	_			Central Plant
	Intermediate Care		Dietetic		Emergency			OSHI GITTA
	Skilled Nursing		Administration		Nuclear Medicine		X	Support Services

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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:  Will general acutr care services and beds will be reducted by the services are services and beds will be reducted by the services are services and beds will be reducted by the services are services and beds will be reducted by the services are services and beds will be reducted by the services are services and beds will be reducted by the services are services and beds will be reducted by the services are services and beds will be reducted by the services are services and beds will be reducted by the services are services and beds will be reducted by the services are services and beds will be reducted by the services are services and	1927 Building elocated to a new, Existing or retrofi	ittrd building?							
Building Number:  Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?  Support Services  Relocated to other building									
New Building	RetroFitted Building	Other SPC2-SPC5 Building							
BLD-01993-Main Hospital									
Building BLD-01998 Building Name:	1953 Building								
Will general acutr care services and beds will be re	elocated to a new, Existing or retrof	ittrd building?							
Support Services Relocated to other building									
New Building	RetroFitted Building	Other SPC2-SPC5 Building							
		BLD-01993-Main Hospital							

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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-01997	Building Name:	1927 Building					
Type of Service Provided								
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
	Nursing		Anesthesia					
	IntensiveCare			Obstetrical Recovery		Renal Dialysis		
_	Pediatric/Ado	,   [	Clinical Lab	_		Outpatient		
	escent		Radiological/	Newborn/ WellBaby		Surgery		
	Psychiatric Nursing		Imaging			0 / 151 /		
			Pharmaceutical	Emergency		Central Plant		
	Obstetrical Ante/Postprtu	m >	X Dietetic	Nuclear Medicine	X	Support Services		
	Intermediate Care		Administration					
П	Skilled Nursin	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)

Building Number:	BLD-01998	Building Name:	1953 Building				
Type of Service	e Provided						
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
	Nursing		Anesthesia				
	IntensiveCare	•		Obstetrical Recovery		Renal Dialysis	
	Pediatric/Ado	,   [	Clinical Lab			Outpatient	
	escent		Radiological/	Newborn/ WellBaby	Ш	Surgery	
Ш	Psychiatric Nursing		Pharmaceutical	Emergency		Central Plant	
	Obstetrical		_	Nuclear		Support	
Ante/Postprtum		Dietetic	Medicine	X	Services		
	Intermediate	_	_				
	Care		Administration				
	Skilled Nursin	ıg					

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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-01993	Building Na	me: Main Hospital				
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5				
Type of Servi	ce Provided						
X	Nursing	X	Surgical	X	Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
X	ntensiveCare	X	Anesthesia	X	Obstetrical	X	Renal Dialysis
1 1	Pediatric/Adol escent	X	Clinical Lab		Recovery		
	Psychiatric Nursing	X	Radiological/ Imaging	X	Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum	X	Pharmaceutical	X	Emergency	X	Central Plant
	ntermediate	X	Dietetic	_	Line.geney	<u>~</u>	osman am
	Care Skilled Nursing	X	Administration	X	Nuclear Medicine	X	Support Services

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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-01994 Building Name: ICU / CCU Addition							
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5				
Type of Serv	ice Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	IntensiveCare		Anesthesia		Obstetrical	X	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant
	Intermediate		Dietetic				
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services

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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-01995 Building Name: Mechanical Plant							
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5				
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	X	Central Plant
	ntermediate		Dietetic				
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services

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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-01996 Building Name: MRI Addition							
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5				
Type of Service	ce Provided						
	lursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical	П	Emergency		Central Plant
	ntermediate		Dietetic				
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services

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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-01997 Building Name: 1927 Building							
Configuration:	Remove from GAC	Service by	1/1/2015				
Type of Service	ce Provided						
	lursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
lı	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Jursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical ante/Postprtum		Pharmaceutical	П	Emergency		Central Plant
	ntermediate Care	X	Dietetic				<b>9</b>
	Skilled Nursing		Administration		Nuclear Medicine	X	Support Services

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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 Numbe	er: BLD-01998	Building Na	me: 1953 Building				
Configuration	Remove from GAC	Service by	1/1/2015				
Type of Serv	vice Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical	П	Emergency	П	Central Plant
	Intermediate Care		Dietetic				
	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: BL	.D-01993	Building I	Name: Main Hospital		
Type of Service Pro	<u>vided</u>		_		
X Nursing	Inpatient Beds	258	X Surgical	X Obstetrical Cesarean/Deliv	X Rehabilitation Therapy
X IntensiveCare	Inpatient Beds	33	X Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	X Clinical Lab	X Obstetrical Recovery	X Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	X Radiological/ Imaging	X Newborn/ WellBaby	Outpatient Surgery
Obstetrical  X Ante/Postprtum	Inpatient Beds	31	X Pharmaceutical	X Emergency	X Central Plant
Intermediate Care	Inpatient Beds	0	X Dietetic	X Nuclear Medicine	X Support Services
Skilled Nursing	Inpatient Beds	28	X Administration		
Total Beds this Building		350			

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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	Building Number: BLD-01994 Building Name: ICU / CCU Addition							
Type of Service Pro	<u>vided</u>							
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
X IntensiveCare	Inpatient Beds	58		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		58						

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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-01995	Building N	Name: Me	echanical Plant		
Type of Service Prov	<u>/ided</u>					
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0		Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	X Central Plant
Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0		Administration		
Total Beds this Building		0				

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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-01996	Building N	Name: MRI Addition		
Type of Service Pro	<u>vided</u>				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

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Building Number:	BLD-01993 Build	ing Name: Main	Hospital		
Medical / Surgical (Inc	clude GYN)	Acute Respiratory (	Care	Acute Psychiatric	
Inpatient 235 Bed	Inpatient 85775 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Perinatal (excluse Nev	wborn / GYN)	Burn		Skilled Nursing	
Inpatient 31 Bed	Inpatient 11315 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 28 Inpatient 10220 Days	
Pediatric		intensive Care New Nursery	/born	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 23 Bed	Inpatient 8395 Days	Inpatient 0 Inpatient 0 Days	
Intensive Care		Rehabilitation Center		Int. Care / development Disabled	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 23 Bed	Inpatient 8395 Days	Inpatient 0 Inpatient 0 Days	
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit Total Beds this Building Per Service	
Inpatient 10 Bed	Inpatient 3650 Days	Inpatient 0	Inpatient 0 Days	350 350	

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Building Number:	BLD-01994	Building Name:	ICU / CCU Addition			
Medical / Surgical (Include GYN)		Acute Respirate	Acute Respiratory Care		Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Perinatal (excluse No	ewborn / GYN)	Burn		Skilled Nursing		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Pediatric		intensive Care I Nursery	intensive Care Newborn Nursery		Intermediate Card	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care		Rehabilitation Center		Int. Care / develop Disabled	ment	
Inpatient 58 Bed	Inpatient 211 Days	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	58	58	

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Building Number:	BLD-01995	<b>Building Name</b>	: Mecha	anical Plant			
Medical / Surgical (Include GYN)		Acute R	Acute Respiratory Care		Acute Psychiatric	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed		Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Perinatal (excluse N	Burn			Skilled Nursing	Skilled Nursing		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed		Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Pediatric		intensive Care Newborn Nursery		Intermediate Card	Intermediate Card		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed		Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care		Rehabil Center	itation		Int. Care / develop Disabled	ment	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed		Inpatient 0 Days	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 Inpatient Bed		Inpatient 0 Days	0	0	

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Building Number:	BLD-01996	Building Name:	MRI Addition			
Medical / Surgical (Include GYN)		Acute Resp	iratory Care	Acute Psychiatric	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Perinatal (excluse N	lewborn / GYN)	Burn	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Pediatric		intensive Ca Nursery	intensive Care Newborn Nursery		Intermediate Card	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care		Rehabilitatio Center	on	Int. Care / develop	ment	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0	Inpatient 0 Bed	Inpatient 0 Days	
Coronary Care		Chemical Dependency	<i>'</i>	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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