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

Facility Number:	12012
Facility Name:	St. Mary Medical Center
Address:	1050 Linden Ave.
City:	Long Beach
Hospital Owner/Lice	ensee: St. Mary's Medical Center
Year of Rep	orting: 2012
Contact 1 e-mail Ad	dress:
Contact 2 e-mail Ad	dress:
Contact 3 e-mail Add	dress::
Name of Sub	mitter: Robert Omens
Submission	Date: 1/8/2013 8:18:56 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- 01207	West Wing	1050 Linden Ave.	Remove	N/A	01/01/2015	11/30/2014
BLD- 01209	South Wing	1050 Linden Ave.	Remove	N/A	01/01/2015	11/30/2014

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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: BLD-01207	Building Name:	West Wing
Type of Service Provided		
Nursing Inpatient Beds	0 Inpatient 0 Days	Surgical Obstetrical Recovery
IntensiveCare Inpatient Beds	0 Inpatient Days 0	Anesthesia Newborn/ WellBaby
Pediatric/Adol Inpatient escent Beds	0 Inpatient Days 0	Clinical Lab Emergency
Psychiatric Inpatient Nursing Beds	0 Inpatient Days 0	Radiological/ Imaging Nuclear Medicine
Obstetrical Inpatient Ante/Postprtum Beds	0 Inpatient Days 0	Pharmaceutical Dietetic Rehabilitation Therapy
Intermediate Inpatient Care Beds	0 Inpatient Days 0	Administration Renal Dialysis
Skilled Nursing Inpatient	0 Inpatient Days 0	Support X Outpatient Services 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-01209	Building Name: S	South Wing	
Type of Service Prov	<u>ided</u>			
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical Obste	etrical very
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia Newb	
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab Emer	gency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Nucle Medic	
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic X Reha Thera	ibilitation apy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration X Rena Support Outpa	Il Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0 Total Beds this 0	Services Surge Obstetrical Cesarean/Deliv	ery
		Building	Centr	ral 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-01207	Building Name: Wes	t Wing		
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	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	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

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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-01209	Building Name: S	outh Wing		
Medical / Surgical	(Include GYN)	Acute Respirate	ory 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 I 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		Int. Care / developi 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

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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-01205	Bauer Wing	Retrofit
BLD-01206	MRI Building	Remain
BLD-01207	West Wing	Remove
BLD-01208	East Wing	Remain
BLD-01209	South Wing	Remove
BLD-01210	Emergency / Generator Building	Remain

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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-012	07 Building Name:	West Wing		Year of Information:	2009	
	ranio.			Information Current As Of:	09/10/2012	
Type of Services 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	Support Services	
Skilled Nursing	Inpatient Beds Total Beds this Building	0	Administration			

Report Year: 2012 12012 St. Mary Medical Center Long Beach Page:10 of 32 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) West Wing 2010 Building Nrbr: BLD-01207 Year of Information: Building Name: 09/10/2012 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby **Imaging** Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Nuclear Support Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0 Building

Report Year: 2012 12012 St. Mary Medical Center Long Beach Page:11 of 32 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) West Wing 2011 Building Nrbr: BLD-01207 Year of Information: Building Name: Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby **Imaging** Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Nuclear Support Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0 Building

Report Year: 2012 12012 St. Mary Medical Center Long Beach Page:12 of 32 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) South Wing 2009 Building Nrbr: BLD-01209 Year of Information: Building Name: 09/10/2012 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Х Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby **Imaging** Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Nuclear Support Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0 Building

Report Year: 2012 12012 St. Mary Medical Center Long Beach Page:13 of 32 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) South Wing 2010 Building Nrbr: BLD-01209 Year of Information: Building Name: 09/10/2012 Information Current As Of: Type of Services **Provided** Surgical Obstetrical Rehabilitation Nursing 0 Inpatient Cesarean/Deliv Therapy Beds Anesthesia IntensiveCare Inpatient 0 Beds Obstetrical Х Renal Dialysis Recovery Clinical Lab Pediatric/Adol Inpatient 0 escent Beds Outpatient Newborn/ Radiological/ **Psychiatric** Inpatient 0 Surgery WellBaby **Imaging** Nursing Beds Central Plant Pharmaceutical Inpatient Obstetrical 0 **Emergency** Ante/Postprtum **Beds** Dietetic Nuclear Support Inpatient Intermediate 0 Medicine Services Care Beds Administration Skilled Nursing Inpatient 0 Beds Total Beds this 0 Building

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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-0120	Building Nrbr: BLD-01209 Building Name: South Wing Year of Information: 2011						
	rame.			Inf Of	ormation Current As		
Type of Services Provided							
Nursing	Inpatient Beds	0	Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	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	0					

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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: West Wing Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building? OutpatientSurgery N/A
Building Number: Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building? Rehabilitation Therapy Rehabilitation Therapy
Building Number: Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building? Renal Dialysis N/A

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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-01207 Buildi	ng Name:	Vest Wing]
Type of Servic	e Provided						
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
	Nursing		Anesthesia				
	IntensiveCare			Obstetrical Recovery		Renal Dialysis	
П	Pediatric/Adol		Clinical Lab		Х	Outpatient	
Ш	escent		Radiological/ Imaging	Newborn/ WellBaby		Surgery	
	Psychiatric Nursing		Pharmaceutical	Emergency		Central Plant	
	Obstetrical		Tharmaceatical			ochtrar i ant	
Ш	Ante/Postprtum		Dietetic	Nuclear Medicine		Support Services	
П	Intermediate						
	Care		Administration				
	Skilled Nursing						

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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-01209 Buildin	g Name: South Wing			
Type of Servic	e Provided				
		Surgical	Obstetrical Cesarean/Deliv	X Rehabilitation Therapy	
	Nursing	Anesthesia			
	IntensiveCare		Obstetrical Recovery	X Renal Dialysis	
	Pediatric/Adol escent	Clinical Lab		Outpatient	
		Radiological/ Imaging	Newborn/ WellBaby	L Surgery	
	Psychiatric Nursing	Pharmaceutical	Emergency	Central Plant	
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	Support Services	
	Intermediate Care	Administration			
	Skilled Nursing				

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Building Numbe	Building Number: BLD-01205 Building Name: Bauer Wing								
Configuration:	Remove from GAC	C service by	1/1/2030						
Type of Serv	vice Provided								
X	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
X	IntensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis		
X	Pediatric/Adol escent	X	Clinical Lab		Recovery				
	Psychiatric Nursing	X	Radiological/ Imaging	X	Newborn/ WellBaby		Outpatient Surgery		
X	Obstetrical Ante/Postprtum	X	Pharmaceutical	X	Emergency	X	Central Plant		
	Intermediate		Dietetic						
	Care Skilled Nursing		Administration	X	Nuclear Medicine	X	Support Services		

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Building Numbe	r: BLD-01206	Building Na	me: MRI Building			
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5			
Type of Serv	rice Provided					
	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	П	Emergency	Central Plant
	Intermediate Care		Dietetic			Comment
	Skilled Nursing		Administration		Nuclear Medicine	Support Services

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Building Number:	BLD-01207	Building Na	me: West Wing]		
Configuration:	Remove from GAC	C service by	service by 1/1/2015							
Type of Service Provided								•		
N	lursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Ir	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis			
	ediatric/Adol scent		Clinical Lab		Recovery					
	sychiatric lursing		Radiological/ Imaging		Newborn/ WellBaby	X	Outpatient Surgery			
	Obstetrical nte/Postprtum		Pharmaceutical		Emergency		Central Plant			
	ntermediate		Dietetic	<u></u>	5,go.10,	_	Somal Fant			
	are killed 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 Numbe	r: BLD-01208	Building Na	me: East Wing				
Configuration:	Remove from GAC	Service by	1/1/2030				
Type of Serv	rice Provided						
X	Nursing	X	Surgical	X	Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
X	IntensiveCare	X	Anesthesia	X	Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby	X	Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant
	Intermediate	X	Dietetic				2
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services

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Building Number:	BLD-01209	Building Na	me: South Wing				
Configuration:	Remove from GAC	Service by	1/1/2015				
Type of Servi	ce Provided						
1	Nursing		Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
	ntensiveCare		Anesthesia		Obstetrical	Х	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical	П	Emergency		Central Plant
	ntermediate Care		Dietetic		Nuclear Medicine		Support
	Skilled Nursing		Administration	Ш			Services

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Building Number	: BLD-01210	Building Na	uilding Name: Emergency / Generator Building						
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		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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Buildin	g Number: BI	LD-01205	Building N	Building Name: Bauer Wing					
<u>Type</u>	Type of Service Provided								
X	Nursing	Inpatient Beds	218		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
X	IntensiveCare	Inpatient Beds	62		Anesthesia				
1571	Pediatric/Adol escent	Inpatient Beds	28	X	Clinical Lab	Obstetrical Recovery	Renal Dialysis		
	Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	X Newborn/ WellBaby	Outpatient Surgery		
_	Obstetrical Ante/Postprtum	Inpatient n Beds	25	X	Pharmaceutical	X Emergency	X Central Plant		
	Intermediate Care	Inpatient Beds	0		Dietetic	X Nuclear Medicine	X Support Services		
	Skilled Nursing	Inpatient Beds	0		Administration				
	Total Beds this Building		333						

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Building Number: BL	Building Number: BLD-01206 Building Name: MRI Building							
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	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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Buildi	uilding Number: BLD-01208 Building Name: East Wing							
Туре	Type of Service Provided							
X	Nursing	Inpatient Beds	46	X	Surgical	X Obstetrical Cesarean/Deliv	X Rehabilitation Therapy	
X	IntensiveCare	Inpatient Beds	10	X	Anesthesia			
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	X Obstetrical Recovery	Renal Dialysis	
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	X Outpatient Surgery	
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Central Plant	
	Intermediate Care	Inpatient Beds	0	X	Dietetic	Nuclear Medicine	Support Services	
	Skilled Nursing	Inpatient Beds	0		Administration			
	Total Beds this Building		56					

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Buildi	Building Number: BLD-01210 Building Name: Emergency / Generator Building							
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	Support Services	
	Skilled Nursing	Inpatient Beds	0		Administration			
	Total Beds this Building		0					

Report Status: **Data Last Update:** 01/03/2013 **Submission Date:** 01/08/2013 **Print Date:** 1/9/2013 6:25 AM

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Building Number:	BLD-01205 Build	ing Name: Baue	er Wing			
Medical / Surgical (Inc	lude GYN)	Acute Respiratory	Care	Acute Psychiatric		
Inpatient 218 Bed	Inpatient 27789 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days		
Perinatal (excluse Nev	wborn / GYN)	Burn		Skilled Nursing		
Inpatient 25 Bed	Inpatient 9807 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days		
Pediatric		intensive Care New Nursery	vborn	Intermediate Card		
Inpatient 28 Bed	Inpatient 1358 Days	Inpatient 15 Bed	Inpatient 3315 Days	Inpatient 0 Inpatient 0 Days		
Intensive Care		Rehabilitation Center		Int. Care / development Disabled		
Inpatient 39 Bed	Inpatient 6108 Days	Inpatient 0 Bed	Inpatient 0	Inpatient 0 Inpatient 0 Days		
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit Building Per Service		
Inpatient 8 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	333 333		

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Building Number:	BLD-01206 Build	ing Name: MRI Building				
Medical / Surgical (Inc	lude GYN)	Acute Respiratory Care	Ac	cute Psychiatric		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatien Bed Days	t 0 Inp	patient 0 Inpatient 0 Days		
Perinatal (excluse Nev	wborn / GYN)	Burn	Sk	Skilled Nursing		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatien Bed Days	t 0 Inp	patient 0 Inpatient 0 Days		
Pediatric		intensive Care Newborn Nursery	Int	termediate Card		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	t 0 Inp	patient 0 Inpatient 0 Days		
Intensive Care		Rehabilitation Center		t. Care / development sabled		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatien Bed Days	t 0 Inp	patient 0 Inpatient 0 Days		
Coronary Care		Chemical Dependency		otal Beds this Total Beds this uilding Per Building Per nit Service		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatien Days	t 0	0 0		

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Building Number:	BLD-01208	Building Name:	East Wing			
Medical / Surgical (Include GYN)		Acute Resp	Acute Respiratory Care		Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0	Inpatient 0	Inpatient 0 Days	
Perinatal (excluse N	ewborn / GYN)	Burn		Skilled Nursing		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0	Inpatient 0	Inpatient 0 Days	
Pediatric		intensive C Nursery	are Newborn	Intermediate Card		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	10 Inpatient 153	Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care		Rehabilitati Center	on	Int. Care / develop Disabled	nent	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	46 Inpatient 7280	Inpatient 0 Bed	Inpatient 0 Days	
Coronary Care		Chemical Dependenc	y	Total Beds this Building Per Unit	Total Beds this Building Per Service	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0	56	56	

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Building Number:	uilding Number: BLD-01210 Building Name: Emergency / Generator Building				
Medical / Surgical (Inc	clude GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Days		
Perinatal (excluse Nev	wborn / GYN)	Burn	Skilled Nursing		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Days		
Pediatric		intensive Care Newborn Nursery	Intermediate Card		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Days		
Intensive Care		Rehabilitation Center	Int. Care / development Disabled		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0 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 Days	0 0		

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