Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:1 of 47

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

Facility Number:	10009	
Facility Name:	Enloe Medical Center - Cohasset Campus	
Address:	560 Cohasset Road	
City:	Chico	
Hospital Owner/Lic	rensee: Mike Wiltermood	
Year of Rep	porting: 2013	
Contact 1 e-mail Ac	ddress:	
Contact 2 e-mail Ac	ddress:	
Contact 3 e-mail Ad	dress::	
Name of Sub	omitter: Stephen A Gonsalves	
Submission	n Date: 10/22/2013 9:22:18 AM	

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:2 of 47

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- 00101	Original Hospital and Additions	560 Cohasset Road	Rebuild	SPC5	01/01/2013	08/31/2014

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico

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).

Page:3 of 47

Building	No: BLD-00101		Original Hospital and Additions		Retrofit/F Project:	Replaceme	nt Ye	s-Submitte	d
Facility Number	Project Sub Number Num		Scope	Date Plan in	Approved P Date	roj. Start F Date	Proj. Completed Date	Status	CEQA Review
10013	HS041907-0	0	FOUNDATIONS, SPREAD FOOTINGS & DRILLED PIERS/RE HS042981-04	8/16/2004 12:00:00 AM	8/31/2006 12:00:00 AM		6 06/01/2012	CLOS	No
10013	HS042981-0	0	SITEWORK, UTIL, ARCH, PRIMARY STRUCTURE,MECH & PLUMBING/RE HS041907-04	12/17/2004 12:00:00 AM	2/20/2007 12:00:00 AM	03/06/2007	7 08/31/2014	FIEL	No

2013

10009

Enloe Medical Center - Cohasset Campus

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Page:4 of 47

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

Building Number: BLD-0	00101	Building Name:	Original Hospital and Additions	
Type of Service Provide	<u>ed</u>			
1 1 0 1	patient 0 eds	Inpatient 0 Days	X Surgical	Obstetrical Recovery
	patient 0	Inpatient Days 0	X Anesthesia	Newborn/ WellBaby
	patient 0	Inpatient Days 0	X Clinical Lab	Emergency
	patient 0 eds	Inpatient Days 0	X Radiological/ Imaging	Nuclear Medicine
	patient 0	Inpatient Days 0	X Pharmaceutical X Dietetic	Rehabilitation Therapy
	patient 0 eds	Inpatient Days 0	Administration	Renal Dialysis
	patient 0	Inpatient Days 0	Support Services Obstetrical	Outpatient Surgery
	Total E Buildin	Beds this 0	1 🗀	X Central Plant

2013

10009

Enloe Medical Center - Cohasset Campus

Chico

Page:5 of 47

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

Building Number:	BLD-00101	Building Name:	Original Hospital and Additions			
Medical / Surgical (	Include GYN)	Acute Respira	atory Care	Acute Psychiatric		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Perinatal (excluse N	Newborn / GYN)	Burn		Skilled Nursing		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Pediatric		intensive Care Nursery	e Newborn	Intermediate Card		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days		Inpatient 0 Days	
Intensive Care		Rehabilitation Center		Int. Care / developm Disabled	ent	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 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 Bed	0 Inpatient 0 Days	0	0	

2013

10009

Enloe Medical Center - Cohasset Campus

Chico

Page:6 of 47

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-00101	Original Hospital and Additions	Rebuild
BLD-00102	Radiology Addition	Remain
BLD-00103	Behavioral Health & Administration	Remain
BLD-00104	Radiology Addition	Remain
BLD-00105	Central Stores	Remain
BLD-00106	Cardiac Cath Lab	Remain
BLD-00107	Administration	Remain
BLD-00108	Surgery Addition	Remain

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:7 of 47

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

Building Number	Building Name	New Site	
N_1	Magnolia Tower	X	

Report Year:	2013	10009		Enloe Medical Center - Cohasset Campus		Chico	Page:8 of 47
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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	Number: BLD-0010	)1	Original H	Hospital and Addit	ions	Removal Date:	[	08/31/2014			
	Planned Uses for the building to be removed from acute care service:										
Planned	l use for building: Me	edical Office	Building	Jurisdiction:	Local Authority						
Inpatient	services currently de	livered in th	e building:		Obatatriaal			Dala al-Martina			
	Nursing	X	Surgical	Ш	Obstetrical Cesarean/Deliv		Ш	Rehabilitation Therapy			
	IntensiveCare	X	Anesthesia								
	Pediatric/Adol escent	X	Clinical Lab		Obstetrical Recovery		Ш	Renal Dialysis			
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby			Outpatient Surgery			
	Obstetrical Ante/Postprtum	X	Pharmaceutical		·						
	Intermediate Care	X	Dietetic		Emergency			Central Plant			
	Skilled Nursing		Administration		Nuclear Medicine			Support Services			

2013

10009

Enloe Medical Center - Cohasset Campus

Chico

Page:9 of 47

Report Year: 2013 100

10009

Enloe Medical Center - Cohasset Campus

Chico

Page:10 of 47

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:11 of 47

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:  Original Hospital and Additions  Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?										
Surgical	Reloc	cated to new building								
	New Building	RetroFitted Buildin	ng	Other SF	C2-SPC5 Bu	ilding				
N_1-Mag	gnolia Tower									
Facility Status	Project Sub	Scope	Date Plan	Approved Pr	oj. Start Proj	. Completed				
	Number Num		in	Date	Date	Date				
_										
10013	HS041907-0	0 FOUNDATIONS, SPREAD FOOTINGS & DR PIERS/RE HS042981-04	RILLED 2004-08-16	2006-08-31	09/19/2006	06/01/2012	CLOS			
l	HS042981-0	0 SITEWORK, UTIL, ARCH, PRIMARY	2004-12-17	2007-02-20	03/06/2007	08/31/2014	FIEL			

2013

10009

Enloe Medical Center - Cohasset Campus

Chico

Page:12 of 47

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:13 of 47 BLD-00101 **Building Name:** Original Hospital and Additions Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Anesthesia Relocated to new building **New Building RetroFitted Building** Other SPC2-SPC5 Building N\_1-Magnolia Tower Facility Project Sub Scope Date Plan Approved Proj. Start Proj. Completed Status Number Number Num Date Date Date in 0 FOUNDATIONS, SPREAD FOOTINGS & DRILLED 2004-08-16 2006-08-31 HS041907-0 09/19/2006 10013 06/01/2012 CLOS PIERS/RE HS042981-04 HS042981-0 2004-12-17 2007-02-20 03/06/2007 10013 0 SITEWORK, UTIL, ARCH, PRIMARY 08/31/2014 FIEL STRUCTURE.MECH & PLUMBING/RE HS041907-

2013

10009

Enloe Medical Center - Cohasset Campus

Chico

Page:14 of 47

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:15 of 47 BLD-00101 **Building Name:** Original Hospital and Additions Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? ClinicalLab Relocated to new building **New Building RetroFitted Building** Other SPC2-SPC5 Building N\_1-Magnolia Tower Facility Project Sub Scope Date Plan Approved Proj. Start Proj. Completed Status Number Number Num Date Date Date in 0 FOUNDATIONS, SPREAD FOOTINGS & DRILLED 2004-08-16 2006-08-31 HS041907-0 09/19/2006 10013 06/01/2012 CLOS PIERS/RE HS042981-04 HS042981-0 2004-12-17 2007-02-20 03/06/2007 10013 0 SITEWORK, UTIL, ARCH, PRIMARY 08/31/2014 FIEL STRUCTURE.MECH & PLUMBING/RE HS041907-

2013

10009

Enloe Medical Center - Cohasset Campus

Chico

Page:16 of 47

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:17 of 47 BLD-00101 **Building Name:** Original Hospital and Additions Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Radiological/Imaging Relocated to new building **New Building** RetroFitted Building Other SPC2-SPC5 Building N\_1-Magnolia Tower Facility Project Sub Scope Date Plan Approved Proj. Start Proj. Completed Status Number Number Num Date Date Date in HS041907-0 10013 0 FOUNDATIONS, SPREAD FOOTINGS & DRILLED 2004-08-16 2006-08-31 09/19/2006 06/01/2012 CLOS PIERS/RE HS042981-04 HS042981-0 2004-12-17 2007-02-20 03/06/2007 10013 0 SITEWORK, UTIL, ARCH, PRIMARY 08/31/2014 FIEL STRUCTURE.MECH & PLUMBING/RE HS041907-

2013

10009

Enloe Medical Center - Cohasset Campus

Chico

Page:18 of 47

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:19 of 47 BLD-00101 **Building Name:** Original Hospital and Additions Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Pharmaceutical Relocated to new building **New Building RetroFitted Building** Other SPC2-SPC5 Building N\_1-Magnolia Tower Facility Project Sub Scope Date Plan Approved Proj. Start Proj. Completed Status Number Number Num Date Date Date in 0 FOUNDATIONS, SPREAD FOOTINGS & DRILLED 2004-08-16 2006-08-31 HS041907-0 09/19/2006 10013 06/01/2012 CLOS PIERS/RE HS042981-04 HS042981-0 2004-12-17 2007-02-20 03/06/2007 10013 0 SITEWORK, UTIL, ARCH, PRIMARY 08/31/2014 FIEL STRUCTURE.MECH & PLUMBING/RE HS041907-

2013

10009

Enloe Medical Center - Cohasset Campus

Chico

Page:20 of 47

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:21 of 47 BLD-00101 **Building Name:** Original Hospital and Additions Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Dietetic Relocated to new building **New Building RetroFitted Building** Other SPC2-SPC5 Building N\_1-Magnolia Tower Facility Project Sub Scope Date Plan Approved Proj. Start Proj. Completed Status Number Number Num Date Date Date in 0 FOUNDATIONS, SPREAD FOOTINGS & DRILLED 2004-08-16 2006-08-31 HS041907-0 09/19/2006 10013 06/01/2012 CLOS PIERS/RE HS042981-04 HS042981-0 2004-12-17 2007-02-20 03/06/2007 10013 0 SITEWORK, UTIL, ARCH, PRIMARY 08/31/2014 FIEL STRUCTURE.MECH & PLUMBING/RE HS041907-

2013

10009

Enloe Medical Center - Cohasset Campus

Chico

Page:22 of 47

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:23 of 47 BLD-00101 **Building Name:** Original Hospital and Additions Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? CentralPlant Relocated to new building **New Building RetroFitted Building** Other SPC2-SPC5 Building N\_1-Magnolia Tower Facility Project Sub Scope Date Plan Approved Proj. Start Proj. Completed Status Number Number Num Date Date Date in 0 FOUNDATIONS, SPREAD FOOTINGS & DRILLED 2004-08-16 2006-08-31 HS041907-0 09/19/2006 10013 06/01/2012 CLOS PIERS/RE HS042981-04 HS042981-0 2004-12-17 2007-02-20 03/06/2007 10013 0 SITEWORK, UTIL, ARCH, PRIMARY 08/31/2014 FIEL STRUCTURE, MECH & PLUMBING/RE HS041907-

2013

10009

Enloe Medical Center - Cohasset Campus

Chico

Page:24 of 47

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:25 of 47

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-00101	Building Name:	Original Hospital and	Additions						
Type of Service Provided										
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
	Nursing	[×	Anesthesia							
	IntensiveCare	·	_	Obstetrical Recovery		Renal Dialysis				
	Pediatric/Ado escent	ı   <u> </u>	Clinical Lab			Outpatient				
		<u> </u>	Radiological/ Imaging	Newborn/ WellBaby		Surgery				
Ш	Psychiatric Nursing		_	Emergency	Х	Central Plant				
	Obstetrical Ante/Postprtu	m _	<b>¬</b>	Nuclear		Support				
			Dietetic	Medicine		Services				
	Intermediate Care		Administration							
	Skilled Nursin	ng								

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:26 of 47

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-00101	Building Na	me: Original Hospi	ital and Addi	tions		
Configuration:	Rebuild (Per SB90	Definition fo	or Rebuild) with new	SPC5 and N	IPC4 or NPC5 building.		
Type of Serv	vice Provided						
	Nursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare	X	Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent	X	Clinical Lab		Recovery		
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum	X	Pharmaceutical		Emergency	X	Central Plant
	Intermediate	X	Dietetic		Line/geney	_	Contrar Flam
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:27 of 47

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-00102	Building Na	me: Radiology Add	ition		
Configuration:	Rebuild (Per SB90	Definition for	or Rebuild) with new	SPC5 and N	IPC4 or NPC5 building.	
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		Emergency	Central Plant
	Intermediate		Dietetic		Emergency	Contract
	Care Skilled Nursing		Administration		Nuclear Medicine	Support Services

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:28 of 47

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-00103	Building Na	me: Behavioral Healt	h & Admir	nistration		
Configuration:	Rebuild (Per SB90	Definition for	or Rebuild) with new SI	PC5 and N	NPC4 or NPC5 building.		
Type of Servi	ce Provided						
1	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	П	Emergency	П	Central Plant
	ntermediate Care		Dietetic		Nuclear Medicine		Support
	Skilled Nursing		Administration		Nucleal Medicine	Ш	Support Services

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:29 of 47

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	r: BLD-00104	Building Na	me: Radiology Additi	ion		
Configuration:	Rebuild (Per SB90	Definition fo	or Rebuild) with new S	PC5 and N	NPC4 or NPC5 building.	
Type of Serv	ice Provided					
	Nursing		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery	
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	Central Plant
	Intermediate		Dietetic		- ,	
	Care Skilled Nursing		Administration		Nuclear Medicine	Support Services

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:30 of 47

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 Numb	er: BLD-00105	Building Na	me: Central Stores			
Configuration	n: Rebuild (Per SB90	Definition fo	or Rebuild) with new	SPC5 and N	IPC4 or NPC5 building.	
Type of Ser	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	Central Plant
	Intermediate Care		Dietetic			0
	Skilled Nursing		Administration		Nuclear Medicine	Support Services

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:31 of 47

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-00106	Building Na	me: Cardiac Cath L	.ab			
Configuration:	Rebuild (Per SB90	Definition for	or Rebuild) with new	SPC5 and N	IPC4 or NPC5 building.		
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 Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	П	Central Plant
	ntermediate Care		Dietetic				Curanant
	Skilled Nursing		Administration		Nuclear Medicine		Support Services

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:32 of 47

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	r: BLD-00107	Building Na	me: Administration			
Configuration:	Rebuild (Per SB90	Definition for	or Rebuild) with new S	PC5 and N	NPC4 or NPC5 building.	
Type of Serv	ice Provided					
	Nursing		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery	
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	Central Plant
	Intermediate		Dietetic		e.gee,	
	Care Skilled Nursing	X	Administration		Nuclear Medicine	Support Services

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:33 of 47

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-00108	Building Name: Surgery Addition									
Configuration:	Rebuild (Per SB90	Definition fo	or Rebuild) with new S	SPC5 and N	IPC4 or NPC5 building.						
Type of Service	e Provided										
	lursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
Ir	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis				
	ediatric/Adol scent		Clinical Lab		Recovery						
	sychiatric Iursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
	Obstetrical .nte/Postprtum		Pharmaceutical		Emergency		Central Plant				
	ntermediate		Dietetic								
	care skilled Nursing		Administration		Nuclear Medicine		Support Services				

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:34 of 47

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 Num	ber: BLD-00102	Building I	Name: Ra	diology Addition		
Type of Ser	vice Provided					
Nursin	g Inpatient Beds	0		Surgical	Obstetrical Cesarean/E	Rehabilitation Deliv Therapy
Intensi	veCare Inpatient Beds	0		Anesthesia		
Pediati escent	ric/Adol Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychi Nursin		0	X	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstet Ante/P	rical Inpatient ostprtum Beds	0		Pharmaceutical	Emergency	Central Plant
Interme Care	ediate Inpatient Beds	0		Dietetic	Nuclear Medicine	Support Services
Skilled	Nursing Inpatient Beds	0		Administration		
Total B Buildin	eds this	0				

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:35 of 47

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)

Buildii	ng Number: BLC	D-00103	Building N	Name: Be	havioral Health & A	dministration	
Туре	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
X	Psychiatric Nursing	Inpatient Beds	30		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		30				

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:36 of 47

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-00104	Building N	lame: Radiology 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			

Report Year:	2013	10009	Enloe Medical Center - Cohasset Campus		Chico	Page:37 of 47
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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: BLI	D-00105	Building N	lame: Central Stores		
Type of Service Prov	<u>rided</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	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:38 of 47

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	0-00106	Building Na	ıme: Ca	rdiac Cath Lab			
Type of	Type of Service Provided							
☐ No	ursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
Int	tensiveCare	Inpatient Beds	0		Anesthesia			
1 1	ediatric/Adol scent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis	
	sychiatric ursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery	
	bstetrical nte/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Central Plant	
	termediate are	Inpatient Beds	0		Dietetic	Nuclear Medicine	Support Services	
Sk	killed Nursing	Inpatient Beds	0		Administration			
	otal Beds this uilding		0					

Report Year: 2013 10009 Enloe Medical Center - Cohasset Campus Chico Page:39 of 47

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-00107	Building N	Name: Administration		
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	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	X Administration		
Total Beds this Building		0			

Report Year:	2013	10009		Enloe Medical Center - Cohasset Campus		Chico	Page:40 of 47
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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)

Buildin	g Number: BLE	D-00108	Building N	Name: Su	rgery Addition		
<u>Type</u>	of Service Prov	<u>ided</u>					
	Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare	Inpatient Beds	0		Anesthesia		
1 1	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:** 10/22/2013 **Submission Date:** 10/22/2013 **Print Date:** 10/23/2013 1:50 PM

2013

10009

Enloe Medical Center - Cohasset Campus

Chico

Page:41 of 47

Building Number:	BLD-00102 <b>Bui</b>	Iding Name:	adiology Addition		
Medical / Surgical (In	clude GYN)	Acute Respirato	ory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient Days	0
Perinatal (Exclude Ne	ewborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient Days	0
Pediatric		Intensive Care N Nursery	Newborn	Intermediate Care	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient Days	0
Intensive Care		Rehabilitation Center		Int. Care / Developmentally Disabled	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient Days	0
Coronary Care		Chemical Deper	ndency	Total Beds this Total Be Building Per Building	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Unit Service	

2013

10009

Enloe Medical Center - Cohasset Campus

Chico

Page:42 of 47

Building Number:	BLD-00103	Building Name: Ber	navioral Health & Administ	tration
Medical / Surgical (I	nclude GYN)	Acute Respirator	y Care	Acute Psychiatric
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 30 Inpatient 3037 Days
Perinatal (Exclude N	lewborn / GYN)	Burn		Skilled Nursing
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Pediatric		Intensive Care Ne Nursery	ewborn	Intermediate Care
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / Developmentally Disabled
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Coronary Care		Chemical Depend	lency	Total Beds this Building Per Building Per
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Unit Service 30

2013

10009

Enloe Medical Center - Cohasset Campus

Chico

Page:43 of 47

Building Number:	BLD-00104 Build	ding Name: Radiology	y Addition		
Medical / Surgical (I	nclude GYN)	Acute Respiratory Care	e	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inp		Inpatient 0	Inpatient 0 Days
Perinatal (Exclude N	lewborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inp	patient 0	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		Intensive Care Newbor Nursery	'n	Intermediate Care	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inp	patient 0	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / Developr Disabled	nentally
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inp	patient 0	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per	Total Beds this Building Per
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inp	patient 0	Unit 0	Service 0

2013

10009

Enloe Medical Center - Cohasset Campus

Chico

Page:44 of 47

Building Number:	BLD-00105 Build	ding Name: Cen	tral Stores	
Medical / Surgical (I	nclude GYN)	Acute Respiratory	<sup>'</sup> Care	Acute Psychiatric
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Perinatal (Exclude N	lewborn / GYN)	Burn		Skilled Nursing
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Pediatric		Intensive Care Ne Nursery	wborn	Intermediate Care
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / Developmentally Disabled
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0	Inpatient 0 Inpatient 0 Days
Coronary Care		Chemical Depend	ency	Total Beds this Building Per Building Per Building Per
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Unit Service 0

2013

10009

Enloe Medical Center - Cohasset Campus

Chico

Page:45 of 47

Building Number:	BLD-00106	Building	g Name: Card	iac Cath Lab		
Medical / Surgical (I	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 (Exclude I	Newborn / GYN)	i	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	<b>I</b>	Inpatient 0	Inpatient 0 Days	Inpatient 0	Inpatient 0
Pediatric			Intensive Care New Nursery	vborn	Intermediate Care	
Inpatient 0 Bed	Inpatient Days		Inpatient 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care			Rehabilitation Center		Int. Care / Develop Disabled	mentally
Inpatient 0 Bed	Inpatient Days		Inpatient 0 Bed	Inpatient 0	Inpatient 0 Bed	Inpatient 0 Days
<b>Coronary Care</b>		(	Chemical Depende	ency	Total Beds this Building Per	Total Beds this Building Per
Inpatient 0 Bed	Inpatient Days		Inpatient 0	Inpatient 0 Days	Unit 0	Service 0

2013

10009

Enloe Medical Center - Cohasset Campus

Chico

Page:46 of 47

Building Number:	BLD-00107	Buildi	ng Name: Adm	inistration		
Medical / Surgical (	nclude 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 (Exclude I	Newborn / GYN)		Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0	Inpatient 0
Pediatric			Intensive Care New Nursery	vborn	Intermediate Care	
Inpatient 0 Bed	Inpatient Days	0	Inpatient 0	Inpatient 0	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care			Rehabilitation Center		Int. Care / Develop Disabled	nentally
Inpatient 0 Bed	Inpatient Days	0	Inpatient 0	Inpatient 0	Inpatient 0 Bed	Inpatient 0 Days
<b>Coronary Care</b>			Chemical Depende	ency	Total Beds this Building Per	Total Beds this Building Per
Inpatient 0 Bed	Inpatient Days	0	Inpatient 0 Bed	Inpatient 0 Days	Unit 0	Service 0

2013

10009

Enloe Medical Center - Cohasset Campus

Chico

Page:47 of 47

Building Number:	BLD-00108 Build	ding Name: Surgery Addition	
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 Days
Perinatal (Exclude N	lewborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Days
Pediatric		Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Intensive Care		Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Coronary Care		Chemical Dependency	Total Beds this Building Per Building Per Building Per
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	Unit Service 0