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

Facility Number:	10750
Facility Name:	St. Joseph's Medical Center of Stockton
Address:	1800 North California Street
City:	Stockton
Hospital Owner/Lice	ensee: St. Joseph's Medical Center
Year of Rep	orting: 2013
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: 10/1/2013 2:32:26 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-	Main Wing	1800 North California Street	Remove	N/A	01/01/2015	12/31/2014
01898 BLD- 01901	West Wing	1800 North California Street	Retrofit	SPC2	01/01/2015	12/31/2014

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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-01901 West Wing	Retrofit/Replacement Yes-Submitted Project:
Facility Project Sub Scope Number Number Num	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
10750 IS090033-0 0 SEISMIC UPGRADES FOR BUILDING WEST WING (PREV PPR)	4, 12/25/2008 01/03/2012 07/01/2013 PEND No 12:00:00 AM

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

Building Number: BL	.D-01898		Building Nar	me:	Main	Wing]
Type of Service Prov	<u>rided</u>							_
X Nursing	Inpatient Beds	27	Inpatient Days	4850		Surgical	Obstetric Recovery	
IntensiveCare	Inpatient Beds	0	Inpatient Days	0		Anesthesia	Newborn WellBaby	
Pediatric/Adol escent	Inpatient Beds	0	Inpatient Days	0		Clinical Lab	Emergen	су
Psychiatric Nursing	Inpatient Beds	0	Inpatient Days	0		Radiological/ Imaging	Nuclear Medicine	;
Obstetrical Ante/Postprtum	Inpatient Beds	0	Inpatient Days	0		Pharmaceutical Dietetic	Rehabilit Therapy	ation
Intermediate Care	Inpatient Beds	0	Inpatient Days	0		Administration	X Renal Dia	•
Skilled Nursing	Inpatient Beds	0	Inpatient Days	0		Support Services Obstetrical	Outpatier Surgery	π
		Total E Buildin	Beds this	27		Cesarean/Deliv	Central F	Plant

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

Building Number: BL	.D-01901		Building Na	me:	Wes	st Wing	
Type of Service Prov	<u>rided</u>						
X Nursing	Inpatient Beds	87	Inpatient Days	15627		Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0	Inpatient Days	0		Anesthesia	Newborn/ WellBaby
X Pediatric/Adol escent	Inpatient Beds	13	Inpatient Days	1307		Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0	Inpatient Days	. 0		Radiological/ Imaging X Pharmaceutical	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0	Inpatient Days	0		X Pharmaceutical Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0	Inpatient Days	0		X Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0	Inpatient Days	0		Support Services Obstetrical	Outpatient Surgery
		Total E Buildin	Beds this	100]	Cesarean/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-01898	Building Name: Mair	n Wing		
Medical / Surgical (Include GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 27 Bed	Inpatient 4850 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 New Nursery	wborn	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	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	27	27

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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-01901	Building Name: Wes	t Wing		
Medical / Surgical	(Include GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 87 Bed	Inpatient 1562 Days 7	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 New Nursery	vborn	Intermediate Card	
Inpatient 13 Bed	Inpatient 1307 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	100	100

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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-01898	Main Wing	Remove
BLD-01899	North Wing	Remain
BLD-01900	South Wing	Remain
BLD-01901	West Wing	Retrofit
BLD-01902	East Wing	Remain
BLD-01903	Administrative Wing	Remain
BLD-01904	Southeast Wing	Remain
BLD-01905	Cafeteria	Remain
BLD-01906	Heart Center	Remain
BLD-01907	Outpatient Surgery Building	Remain
BLD-01908	Cancer Center	Remain
BLD-01909	Hospital Main Entrance	Remain
BLD-01910	Emergency Generator Room	Remain
BLD-03367	Women & Children's Pavilion Building	Remain
BLD-03370	New Generator Building	Remain
BLD-03492	Elevator Addition	Remain
BLD-03493	Kitchen Remodel 1	Remain
BLD-03494	Kitchen Remodel 2	Remain

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BLD-03495 Material Management Building Remain

BLD-03496 Utility Plant Remain

BLD-03575 Generator Enclosure for Women and Children's Pavil Remain

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Provide the number of inpatient beds and patient days per unit for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)					
Building Nrbr: BLD-01898 Building Name:	Main Wing	Year of Information: 2010			
Unit Type	- In	nformation Current As Of:			
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 27 Patient 4850 Days	Inpatient 0 Patient 0 Days	Inpatient 0 Patient 0 Beds Days			
Perinatal (exclude Neborn/GYN)	Burn	Skilled Nursing			
Inpatient 0 Patient 0 Days	Inpatient 0 Patient 0 Days	Inpatient 0 Patient 0 Beds Days			
Pediatric	Intensive Care Newborn Nursery	Intermediate Care			
Inpatient 0 Patient 0 Days	Inpatient 0 Patient 0 Days	Inpatient 0 Patient 0 Beds Days			
Intensive Care	Rehabilitation Center	Int. Care/Developmentally Disabled			
Inpatient 0 Patient 0 Days	Inpatient 0 Patient 0 Days	Inpatient 0 Patient 0 Beds Days			
Coronary Care	Chemical Dependency	Total Beds this			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Building per Unit			
Days	Days	Total Beds this Building per Service 27			

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Provide the number of inpatient beds and patient days per unit for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)					
Building Nrbr: BLD-01898 Building Name:	Main Wing	Year of Information: 2011			
Unit Type	Ir	oformation Current As Of:			
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 6 Patient 1550 Beds Days	Inpatient 0 Patient 0 Days	Inpatient 0 Patient 0 Beds Days			
Perinatal (exclude Neborn/GYN) Burn Skilled Nursing					
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 21 Patient 2987 Beds Days			
Pediatric	Intensive Care Newborn Nursery	Intermediate Care			
Inpatient 0 Patient 0 Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Days			
Intensive Care	Rehabilitation Center	Int. Care/Developmentally Disabled			
Inpatient 0 Patient 0 Days	Inpatient 0 Patient 0 Days	Inpatient 0 Patient 0 Days			
Coronary Care	Chemical Dependency	Total Beds this			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Building per Unit			
·	, 	Total Beds this Building per Service			

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Provide the number of inpatient beds and patient days per unit for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)					
Building Nrbr: BLD-01898 Building Name:	Main Wing	Year of Information: 2012			
Unit Type	In	formation Current As Of:			
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 6 Patient 1230 Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Days			
Perinatal (exclude Neborn/GYN)	Burn	Skilled Nursing			
Inpatient 0 Patient 0	Inpatient 0 Patient 0	Inpatient 21 Patient 2987			
Beds Days	Beds Days	Beds Days			
Pediatric	Intensive Care Newborn Nursery	Intermediate Care			
Inpatient 0 Patient 0	Inpatient 0 Patient 0	Inpatient 0 Patient 0			
Beds Days	Beds Days	Beds Days			
Intensive Care	Rehabilitation Center	Int. Care/Developmentally Disabled			
Inpatient 0 Patient 0	Inpatient 0 Patient 0	Inpatient 0 Patient 0			
Beds Days	Beds Days	Beds Days			
Coronary Care	Chemical Dependency	Total Beds this			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Days	Building per Unit			
Days	Days	Total Beds this			
		Building per Service			

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Provide the number of inpatient beds and patient days per type of service for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)						
Building Nrbr: BLD-01898 Building Name:	Main Wing		Year of Information:	2010		
Type of Services Provided		Info Of:	rmation Current As	09/17/2013		
X Nursing Inpatient 0 Beds	Patient 0 Days	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
IntensiveCare Inpatient 0 Beds	Patient 0 Days	Anesthesia	Obstetrical	X Renal Dialysis		
Pediatric/Adol Inpatient 0 escent Beds	Patient 0 Days	Clinical Lab	Recovery			
Psychiatric Inpatient 0 Nursing Beds	Patient 0 Days	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery		
Obstetrical Inpatient 0 Ante/Postprtum Beds	Patient 0 Days	Pharmaceutical	Emergency	Central Plant		
Intermediate Inpatient 0 Care Beds	Patient 0 Days	Dietetic	Nuclear Medicine	Support Services		
X Skilled Nursing Inpatient 21 Beds	Patient 1550 Days	Administration				
Total Beds this Building per service	21					

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Provide the ne from acute ca					r type of service	for th	ne year of 2	010, 201	1 and 2012 for build	dings	to be removed
Building Nrbr:	BLD-0189	8 Building Name:		Main Wing)				Year of Information	n: 20	11
Type of Servi	ces							Inforr Of:	mation Current As	09	/17/2013
X Nursing	Inp Be	atient ds	6	Patient Days	0		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Intensive(Care Inp	atient ds	0	Patient Days	0		Anesthesia	Г	Obstetrical		Renal Dialysis
Pediatric/escent	Adol Inp Be	atient ds	0	Patient Days	0		Clinical Lab	<u>L</u>	Recovery		Reliai Diaiysis
Psychiatri Nursing	ic Inp Be	atient ds	0	Patient Days	0		Radiologica Imaging	al/	Newborn/ WellBaby		Outpatient Surgery
Obstetrica Ante/Post		atient ds	0	Patient [Days	0		Pharmaceu	tical	Emergency		Central Plant
Intermedi Care	ate Inp Be	atient ds	0	Patient Days	0		Dietetic		Nuclear Medicine		Support Services
X Skilled Nu	ursing Inp Be	atient ds	21	Patient [Days	2897		Administrat	ion			
Total Bed	ls this Buildi	ng per service	e [27							

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	of inpatient beds and pati ices per Section 130061		e for the year of	2010, 2011 and 2012 for bui	ldings to be removed
Building Nrbr: BLD-0	01898 Building Name:	Main Wing		Year of Informatio	n: 2012
Type of Services Provided				Information Current As Of:	09/17/2013
X Nursing	Inpatient 27 Beds	Patient 4850 Days	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient 0 Beds	Patient 0 Days	Anesthes	ia Obstetrical	X Renal Dialysis
Pediatric/Adol escent	Inpatient 0 Beds	Patient 0 Days	Clinical L	L Bosovery	X Kenai Diaiysis
Psychiatric Nursing	Inpatient 0 Beds	Patient 0 Days	Radiologi Imaging	cal/ Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient 0 Beds	Patient 0 Days	Pharmac	eutical Emergency	Central Plant
Intermediate Care	Inpatient 0 Beds	Patient 0 Days	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient 0 Beds	Patient 0 Days	Administr	ation	
Total Beds this B	Building per service	27			

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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: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Nursing Removed from hospital services
Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Renal Dialysis Removed from hospital services
Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Medical/Surgical (Include GYN) Removed from hospital services

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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-01898	Building Name:	Main Wing			
Type of Service	e Provided					
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	Nursing		Anesthesia			
	IntensiveCare			Obstetrical Recovery	X	Renal Dialysis
_	Pediatric/Adol		Clinical Lab	_		Outpatient
	escent		Radiological/	Newborn/ WellBaby		Surgery
	Psychiatric Nursing		Imaging	- Emarganov		0 1 171 1
			Pharmaceutical	Emergency	Ш	Central Plant
Ш	Obstetrical Ante/Postprtu	m _	Dietetic	Nuclear Medicine		Support Services
	Intermediate					
Ш	Care		Administration			
	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-01901	Building Name:	West Wing		
Type of Service	e Provided				
			Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X	Nursing		Anesthesia		
	IntensiveCare	_	_	Obstetrical Recovery	Renal Dialysis
X	Pediatric/Adol escent		Clinical Lab		Outpatient
	escent		Radiological/	Newborn/ WellBaby	Surgery
	Psychiatric Nursing	×	_	Emergency	Central Plant
	Obstetrical			Nuclear	Support
	Ante/Postprtu		Dietetic	Medicine	Services
	Intermediate		_		
	Care	<u> </u>	Administration		
	Skilled Nursin	g			

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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-01898	Building Na	me: Main Wing			
Configuration:	Remove from GAC	Service by	1/1/2015			
Type of Serv	vice Provided					
X	Nursing		Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	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-01899	Building Na	me: North Wing			
Configuration:	Remove from GAC	Service by	1/1/2030			
Type of Servi	ice Provided					
X	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 Care	X	Dietetic	Nuclear Medicine	×	Support
	Skilled Nursing		Administration	Nucleal Medicille	^_	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-01900 Building Name: South Wing										
Configuration	Remove from GAC	Service by	1/1/2030							
Type of Ser	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		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant			
	Intermediate		Dietetic	_			Community in the control of the cont			
	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 Numbe	er: BLD-01901	Building Na	me: West Wing		
Configuration:	Remove from GAC	Service by	1/1/2030		
Type of Serv	vice Provided				_
X	Nursing		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare		Anesthesia	Obstetrical	Renal Dialysis
X	Pediatric/Adol escent		Clinical Lab	Recovery	
	Psychiatric Nursing		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum	X	Pharmaceutical	Emergency	Central Plant
	Intermediate Care		Dietetic	Nuclear Medicine	Support
	Skilled Nursing	X	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-01902	Building Na	me: East Wing				
Configuration:	Remove from GAC	Service by	1/1/2030				
Type of Serv	rice Provided						
X	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	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				
	Skilled Nursing		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 Numbe	r: BLD-01903	Building Na	me: Administrative	Wing		
Configuration:	Remove from GAC	Service by	1/1/2030			
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 Care		Dietetic		Nuclear Medicine	Support
	Skilled Nursing	X	Administration		Nucleal 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-01904	Building Na	me: Southeast Wing)			
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5				
Type of Service	e Provided						
	lursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X Ir	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	'ediatric/Adol scent		Clinical Lab		Recovery		
	Psychiatric Jursing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical .nte/Postprtum		Pharmaceutical	X	Emergency		Central Plant
	ntermediate Care		Dietetic				2
	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 Number:	BLD-01905	Building Na	me: Cafeteria						
Configuration: Retrofit Conforming building to NPC 4 or NPC 5									
Type of Service	e Provided								
N	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
In	tensiveCare		Anesthesia		Obstetrical		Renal Dialysis		
	ediatric/Adol scent		Clinical Lab		Recovery				
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	bstetrical nte/Postprtum		Pharmaceutical	П	Emergency	П	Central Plant		
	termediate are	X	Dietetic		Nuclear Medicine		Support		
	killed Nursing		Administration		radical inculone		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-01906	Building Na	me: Heart Center							
Configuration:	Configuration: Retrofit Conforming building to NPC 4 or NPC 5									
Type of Service	e Provided									
	lursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Ir	ntensiveCare	X	Anesthesia		Obstetrical		Renal Dialysis			
	ediatric/Adol scent		Clinical Lab		Recovery					
	sychiatric Iursing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	Obstetrical .nte/Postprtum		Pharmaceutical	X	Emergency		Central Plant			
	ntermediate Care		Dietetic		Nuclear Medicine		Support			
	killed Nursing		Administration		inuclear 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	r: BLD-01907	Building Na	me: Outpatient Su	rgery Buildin	g		
Configuration:	N/A						
Type of Serv	ice Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical Page Vent		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		Dietetic	<u></u>	Lineigonoy		Contract Tark
	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 Numb	er: BLD-01908	Building Na	me: Cancer Center						
Configuration: Retrofit Conforming building to NPC 4 or NPC 5									
Type of Ser	vice Provided								
	Nursing		Surgical		Obstetrical Cesarean/Deliv	X	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				ooman an		
	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-01909	Building Na	me: Hospital Main I	Entrance					
Configuration: Retrofit Conforming building to NPC 4 or NPC 5									
Type of Servi	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 Care		Dietetic				Comment		
	Skilled Nursing	X	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-01910 Building Name: Emergency Generator Room									
Configuration: Remove from GAC service by 1/1/2013									
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	X	Central Plant		
	Intermediate Care		Dietetic		Nuclear Medicine		Support		
	Skilled Nursing		Administration		Nucleal Medicine		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-03367 Building Name: Women & Children's Pavilion Building									
Configuration: Retrofit Conforming building to NPC 4 or NPC 5									
Type of Serv	rice Provided								
X	Nursing		Surgical	X	Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
X	IntensiveCare		Anesthesia	X	Obstetrical		Renal Dialysis		
	Pediatric/Adol escent		Clinical Lab		Recovery				
	Psychiatric Nursing		Radiological/ Imaging	X	Newborn/ WellBaby		Outpatient Surgery		
X	Obstetrical Ante/Postprtum		Pharmaceutical	П	Emergency	X	Central Plant		
	Intermediate Care		Dietetic		Nuclear Medicine		Support		
	Skilled Nursing		Administration		Nucleal Medicille		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-03370 Building Name: New Generator Building									
Configuration:	Configuration: Retrofit Conforming building to NPC 4 or NPC 5									
Type of Service	e Provided									
N	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
In	tensiveCare		Anesthesia		Obstetrical		Renal Dialysis			
	ediatric/Adol scent		Clinical Lab		Recovery					
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
I I	bstetrical nte/Postprtum		Pharmaceutical		Emergency	X	Central Plant			
	itermediate		Dietetic		Lineigency		Ochtiai Flant			
	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 Number:	BLD-03492	Building Na	me: Elevator Addit	ion					
Configuration:	Configuration: Remove from GAC service by 1/1/2030								
Type of Service	e Provided								
	lursing		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	П	Emergency		Central Plant		
	ntermediate Care		Dietetic		Nuclear Medicine		Support		
	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 Number:	Building Number: BLD-03493 Building Name: Kitchen Remodel 1								
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5						
Type of Service	e Provided								
	lursing		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 care	X	Dietetic		Nuclear Medicine		Support		
	killed Nursing		Administration		Nucleal Medicile		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:	Building Number: BLD-03494 Building Name: Kitchen Remodel 2								
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5						
Type of Servic	e Provided								
N	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
Ir	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis		
	ediatric/Adol scent		Clinical Lab		Recovery				
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	bstetrical nte/Postprtum		Pharmaceutical	П	Emergency		Central Plant		
	ntermediate are	X	Dietetic		Nuclear Medicine		Support		
	killed Nursing		Administration		Nucleal Medicille		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	uilding Number: BLD-03495 Building Name: Material Management Building								
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5						
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				_		
	Care 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 Number	: BLD-03496	Building Na	me: Utility Plant			
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5			
Type of Servi	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	X	Central Plant
	Intermediate Care		Dietetic			Surnert
	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-03575	Building Name: Generator Enclosure for Women and Children's Pavil							
Configuration:	Retrofit Conforming	g building to	NPC 4 or NPC 5						
Type of Servic	e Provided								
	lursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
Ir	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis		
	ediatric/Adol scent		Clinical Lab		Recovery				
	sychiatric Jursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	bstetrical nte/Postprtum		Pharmaceutical	П	Emergency	X	Central Plant		
	ntermediate care		Dietetic						
	killed Nursing		Administration		Nuclear Medicine		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 Nu	Building Number: BLD-01899 Building Name: North Wing								
Type of Se	ervice Prov	<u>ided</u>							
X Nurs	ing	Inpatient Beds	62		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
Inten	siveCare	Inpatient Beds	0		Anesthesia				
Pedia esce	atric/Adol nt	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis		
Psyc Nurs	hiatric ing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery		
	etrical /Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Central Plant		
Interi Care	mediate	Inpatient Beds	0	X	Dietetic	Nuclear Medicine	X Support Services		
Skille	ed Nursing	Inpatient Beds	0		Administration				
Total Build	Beds this		62						

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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-01900	Building I	Name: South W	/ing		
Type of Servic	e Provided					
Nursing	Inpatient Beds	0	X Surg	gical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
Intensive(Care Inpatient Beds	0	X Anes	sthesia		
Pediatric/	Adol Inpatient Beds	0	X Clini	cal Lab	Obstetrical Recovery	Renal Dialysis
Psychiatri Nursing	c Inpatient Beds	0	Radi Imag	ological/ jing	Newborn/ WellBaby	Outpatient Surgery
Obstetrica Ante/Post	•	0	Phar	maceutical	Emergency	Central Plant
Intermedia Care	ate Inpatient Beds	0	Diete	etic	Nuclear Medicine	Support Services
Skilled Nu	ırsing Inpatient Beds	0	Adm	inistration		
Total Bed Building	s this	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-01902	Building N	Name: Eas	st Wing		
Тур	e of Service Prov	<u>ided</u>					
X	Nursing	Inpatient Beds	79		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X	IntensiveCare	Inpatient Beds	9		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	X Nuclear Medicine	X Support Services
	Skilled Nursing	Inpatient Beds	0		Administration		
	Total Beds this Building		88				

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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:	LD-01903	Building N	Name: Administrative Wing		
Type of Service Pro	ovided_				
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/Postprtun	Inpatient n 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			

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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: BLE	D-01904	Building I	Name: Sc	outheast Wing		
Тур	e of Service Prov	<u>ided</u>					
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X	IntensiveCare	Inpatient Beds	10		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	X Emergency	Central Plant
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Support Services
	Skilled Nursing	Inpatient Beds	0		Administration		
	Total Beds this Building		10				

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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-01905	Building N	Name: Cafeteria		
Type of Service Prov	<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	Radiological/ Imaging	Newborn/ WellBaby	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		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-01906	Building N	Name: Heart Center		
Type of Service Prov	<u>vided</u>				
Nursing	Inpatient Beds	0	X Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	X 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	X 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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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-01907	Building N	Name: Outpatient Surgery Bui	ilding				
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	X 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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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 Numbe	r: BLD-01908	Building N	Name: Cancer Center						
Type of Service	Type of Service Provided								
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	X Rehabilitation Therapy				
Intensive(Care Inpatient Beds	0	Anesthesia						
Pediatric/	Adol Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis				
Psychiatri Nursing	ic Inpatient Beds	0	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery				
Obstetrica Ante/Post	•	0	Pharmaceutical	Emergency	Central Plant				
Intermedi Care	ate Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services				
Skilled Nu	ursing Inpatient Beds	0	Administration						
Total Bed Building	s this	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-01909	Building N	Name: Ho	ospital Main Entrance		
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		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				

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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	-01910	Building Nar	ne: Er	nergency Generator R	oom			
Type of	Type of Service Provided								
☐ No	ursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
Int	tensiveCare	Inpatient Beds	0		Anesthesia				
	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	X Central Plant		
	termediate are	Inpatient Beds	0		Dietetic	Nuclear Medicine	Support Services		
Sk	killed Nursing	Inpatient Beds	0		Administration				
	otal Beds this uilding		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-03367 Building Name: Women & Children's Pavilion Building								
Тур	Type of Service Provided								
X	Nursing	Inpatient Beds	20		Surgical	X Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
X	IntensiveCare	Inpatient Beds	32		Anesthesia				
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	X Obstetrical Recovery	Renal Dialysis		
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	X Newborn/ WellBaby	Outpatient Surgery		
X	Obstetrical Ante/Postprtum	Inpatient Beds	27		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		79						

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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	g Number: BLD	0-03370	Building Na	me: Ne	w Generator Building				
Туре с	Type of Service Provided								
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
II	ntensiveCare	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		
	ntermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Support Services		
	Skilled Nursing	Inpatient Beds	0		Administration				
	Fotal 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)

Buildin	ng Number: BLI	D-03492	Building N	Name: Ele	evator Addition				
<u>Type</u>	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						

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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-03493	Building N	Name: Kitchen Remodel 1						
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	X 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-03494	Building N	Name: Kitchen Remodel 2						
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	X 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: BLD	0-03495	Building Na	me: Ma	terial Management Bu	ilding			
Type of	Type of Service Provided								
No.	ursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
_ In	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	X Support Services		
SI	killed Nursing	Inpatient Beds	0		Administration				
	otal Beds this uilding		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-03496	Building N	lame: Utility Plant						
Type of Service Provided									
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy				
IntensiveCare	Inpatient Beds	0	Anesthesia						
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis				
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery				
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	X Central Plant				
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	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)

Buildin	g Number: BLE	D-03575	Building Nam	ne: G	enerator Enclosure for	Women and Children's P	avil
<u>Type</u>	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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Building Number:	BLD-01899 Build	ing Name: Nor	th Wing		
Medical / Surgical (In	clude GYN)	Acute Respiratory	y Care	Acute Psychiatric	
Inpatient 62 Bed	Inpatient 11137 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0
Perinatal (Exclude Newborn / GYN)		Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0
Pediatric		Intensive Care Ne Nursery	ewborn	Intermediate Care	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0
Intensive Care		Rehabilitation Center		Int. Care / Developmentally Disabled	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0
Coronary Care		Chemical Depend	lency	Total Beds this Total Beds the Building Per Building Per	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Unit Service	62

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Building Number:	BLD-01900 Buil	ding Name: South Wing	
Medical / Surgical (I	nclude GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Days
Perinatal (Exclude N	lewborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 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
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	Unit Service 0

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Building Number:	LD-01902 Buildi	ng Name: East	Wing		
Medical / Surgical (Incl	lude GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 69 Bed	Inpatient 12395 Days	Inpatient 10 Bed	Inpatient 2415 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (Exclude Nev	vborn / 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 New Nursery	wborn	Intermediate Care	
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	mentally
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Depende	ency	Total Beds this Building Per	Total Beds this Building Per
Inpatient 9 Bed	Inpatient 2244 Days	Inpatient 0 Bed	Inpatient 0 Days	Unit 88	Service 88

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Building Number:	BLD-01903	Building Name: Adm	ninistrative Wing		
Medical / Surgical (I	nclude GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient C 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	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	Inpatient 0 Inpatient 0 Days	
Coronary Care		Chemical Dependent	ency	Total Beds this Building Per Total Beds this Building Per	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0	Inpatient 0 Days	Unit Service 0	

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Building Number:	BLD-01904 Buil	ding Name: Southeas	st Wing		
Medical / Surgical (In	nclude GYN)	Acute Respiratory Care	е	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inp		Inpatient 0	Inpatient 0 Days
Perinatal (Exclude Newborn / GYN)		Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inp	ı • 1	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		Intensive Care Newbor Nursery	rn	Intermediate Care	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inp		Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / Developr Disabled	nentally
Inpatient 10 Bed	Inpatient 2619 Days	Inpatient 0 Inp		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 10	Service 10

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Building Number:	BLD-01905	Building Name: Cafeteria	a .		
Medical / Surgical (I	nclude GYN)	Acute Respiratory Car	e Acute Psychiatric		
Inpatient 0 Bed	Inpatient O		patient 0 Inpatient 0	Inpatient 0 Days	
Perinatal (Exclude I	lewborn / GYN)	Burn	Skilled Nursing	Skilled Nursing	
Inpatient 0 Bed	Inpatient Days		patient 0 Inpatient 0	Inpatient 0 Days	
Pediatric		Intensive Care Newbor Nursery	rn Intermediate Care		
Inpatient 0 Bed	Inpatient Days		patient 0 Inpatient 0	Inpatient 0 Days	
Intensive Care		Rehabilitation Center	Int. Care / Develo Disabled	omentally	
Inpatient 0 Bed	Inpatient C Days		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 C Days		patient 0 Unit 0	Service 0	

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Building Number:	BLD-01906 Bu	uilding Name: Hear	rt Center		
Medical / Surgical (I	nclude GYN)	Acute Respiratory	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 New 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 Depende	ency	Total Beds this Building Per Total Beds this Building Per	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Unit Service 0	

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Building Number:	BLD-01907	Building Name:	Outpatient Surgery Building	
Medical / Surgical (I	nclude GYN)	Acute Respira	atory Care	Acute Psychiatric
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Perinatal (Exclude N	lewborn / GYN)	Burn		Skilled Nursing
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Pediatric		Intensive Car Nursery	e Newborn	Intermediate Care
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Intensive Care		Rehabilitatior Center	1	Int. Care / Developmentally Disabled
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0	Inpatient 0 Inpatient 0 Days
Coronary Care		Chemical Dep	endency	Total Beds this Building Per Building Per
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Unit Service 0

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Building Number:	BLD-01908 Buil	ding Name: Can	cer Center		
Medical / Surgical (I	nclude GYN)	Acute Respiratory	/ Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Perinatal (Exclude Newborn / 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 Total Beds this Building Per	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Unit Service 0	

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Building Number:	BLD-01909	Building l	Name: Hosp	ital Main Entrance		
Medical / Surgical (nclude GYN)	Ac	cute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inp Be	patient 0	Inpatient 0 Days	Inpatient 0	Inpatient 0 Days
Perinatal (Exclude I	Newborn / GYN)	Ви	ırn		Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inp Be	patient 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0
Pediatric			ensive Care Nev Irsery	vborn	Intermediate Care	
Inpatient 0 Bed	Inpatient Days	0 Inp	patient 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care			ehabilitation enter		Int. Care / Develop Disabled	mentally
Inpatient 0 Bed	Inpatient Days	0 Inp	patient 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Ch	nemical Depende	ency	Total Beds this Building Per	Total Beds this Building Per
Inpatient 0 Bed	Inpatient Days	0 Inp Be	patient 0	Inpatient 0 Days	Unit 0	Service 0

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Building Number:	BLD-01910 Bu	ilding Name: Emerge	ency Generator Room		
Medical / Surgical (I	nclude GYN)	Acute Respiratory Ca	are	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days		npatient 0 Days	Inpatient 0	Inpatient 0 Days
Perinatal (Exclude N	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days		npatient 0 Days	Inpatient 0	Inpatient 0 Days
Pediatric		Intensive Care Newbo Nursery	orn	Intermediate Care	
Inpatient 0 Bed	Inpatient 0 Days		npatient 0	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / Develope Disabled	mentally
Inpatient 0 Bed	Inpatient 0 Days		npatient 0	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependenc	су	Total Beds this Building Per	Total Beds this Building Per
Inpatient 0 Bed	Inpatient 0 Days		npatient 0	Unit 0	Service 0

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Building Number:	BLD-03367	Building Name:	Women & Children's Pavili	ion Building	
Medical / Surgical (I	nclude GYN)	Acute Respira	tory Care	Acute Psychiatric	
Inpatient 20 Bed	Inpatient 3592 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (Exclude Newborn / GYN)		Burn	Burn		
Inpatient 27 Bed	Inpatient 7124 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0
Pediatric		Intensive Care Nursery	e Newborn	Intermediate Care	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	22 Inpatient 5334 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / Developr Disabled	nentally
Inpatient 10 Bed	Inpatient 2619 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dep	endency	Total Beds this Building Per	Total Beds this Building Per
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Unit 79	Service 79

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Building Number:	BLD-03370	Building Name:	New Generator Building		
Medical / Surgical (Include GYN)		Acute Respir	atory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient C Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Perinatal (Exclude N	ewborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Pediatric		Intensive Car Nursery	e Newborn	Intermediate Care	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Intensive Care		Rehabilitatio Center	า	Int. Care / Developmentally Disabled	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Coronary Care		Chemical De	pendency	Total Beds this Building Per Total Beds this Building Per	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Unit Service 0	

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Building Number:	BLD-03492 Build	ling Name: Elevator Addi	tion		
Medical / Surgical (Include GYN)		Acute Respiratory Care		Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatier Bed Days	nt 0	Inpatient 0 Inpa	atient 0
Perinatal (Exclude Newborn / GYN)		Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatier Bed Days	nt 0	Inpatient 0 Inpa	atient 0
Pediatric		Intensive Care Newborn Nursery		Intermediate Care	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatier Days	nt 0	Inpatient 0 Inpa	atient 0
Intensive Care		Rehabilitation Center		Int. Care / Development Disabled	ally
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatier Bed Days	nt 0	Inpatient 0 Inpa	atient 0
Coronary Care		Chemical Dependency			otal Beds this Building Per
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatier Bed Days	nt 0	•	Service 0

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Building Number:	BLD-03493	Building Name: Kito	then Remodel 1		
Medical / Surgical (Include GYN)		Acute Respirator	y Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient (Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Perinatal (Exclude I	lewborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient (Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Pediatric		Intensive Care Ne Nursery	ewborn	Intermediate Care	
Inpatient 0 Bed	Inpatient Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Intensive Care		Rehabilitation Center		Int. Care / Developmentally Disabled	
Inpatient 0 Bed	Inpatient 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 Days	Inpatient 0 Bed	Inpatient 0 Days	Unit Service	

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Building Number:	BLD-03494	Building Name: Kitch	nen Remodel 2		
Medical / Surgical (Include GYN)		Acute Respiratory	['] Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient C Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Perinatal (Exclude Newborn / 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 C 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 Dependent	ency	Total Beds this Building Per Total Beds this Building Per	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0	Inpatient 0 Days	Unit Service 0	

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Building Number:	BLD-03495	Building Name: Ma	terial Management Buildin	g	
Medical / Surgical (Include GYN)		Acute Respirator	y Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Perinatal (Exclude Newborn / GYN)		Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	Inpatient 0	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Pediatric		Intensive Care No Nursery	ewborn	Intermediate Care	
Inpatient 0 Bed	Inpatient Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Intensive Care		Rehabilitation Center		Int. Care / Developmentally Disabled	
Inpatient 0 Bed	Inpatient Days	Inpatient 0	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Coronary Care		Chemical Depend	dency	Total Beds this Building Per Building Per	
Inpatient 0 Bed	Inpatient Days	Inpatient 0 Bed	Inpatient 0 Days	Unit Service 0	

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Building Number:	BLD-03496	Building Name	: Utility Plant			
Medical / Surgical (Include GYN)		Acute R	Acute Respiratory Care		Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	t 0 Inpatie Days	nt 0	Inpatient 0	Inpatient 0 Days
Perinatal (Exclude Newborn / GYN)					Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	t 0 Inpatie Days	nt 0	Inpatient 0	Inpatient 0 Days
Pediatric		Intensiv Nursery	e Care Newborn		Intermediate Care	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	t 0 Inpatie Days	nt 0	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabil Center	itation		Int. Care / Develop Disabled	nentally
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	t 0 Inpatie Days	nt 0	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemic	al Dependency		Total Beds this Building Per	Total Beds this Building Per
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	t 0 Inpatie Days	nt 0	Unit 0	Service 0

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Building Number:	BLD-03575	Building Name:	Generator Enclosure for Wo	omen and Children's Pavil
Medical / Surgical (I	nclude GYN)	Acute Respir	atory Care	Acute Psychiatric
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Perinatal (Exclude I	Newborn / GYN)	Burn		Skilled Nursing
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Pediatric		Intensive Car Nursery	e Newborn	Intermediate Care
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Intensive Care		Rehabilitation Center	1	Int. Care / Developmentally Disabled
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Coronary Care		Chemical De	pendency	Total Beds this Building Per Total Beds this Building Per
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Unit Service 0