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

Facility Number:	10856	
Facility Name:	Regional	Medical of San Jose
Address:	225 North	Jackson Avenue
City:	San Jose	
Hospital Owner/Lice	ensee:	San Jose Healthcsare System, LP
Year of Rep	oorting:	2013
Contact 1 e-mail Ac	ddress:	
Contact 2 e-mail Ac	ddress:	
Contact 3 e-mail Ad	dress::	
Name of Sub	omitter:	J. Paul Tucker
Submission	n Date:	10/31/2013 3:22:32 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	g Extension Date	Anticipated Completion Date
BLD- 02236	Main Tower and North	225 North Jackson Avenue	Rebuild	SPC5	01/01/2013	01/01/2015
BLD- 02237	South Wing	225 North Jackson Avenue	Retrofit	SPC2	01/01/2013	01/01/2015
BLD- 02238	Obstetrics Wing	225 North Jackson Avenue	Rebuild	SPC5	01/01/2013	01/01/2015

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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).

_ 44.119	No: BLD-0223	6	Main Tower and North Wing		Retrofit/F Project:	Replaceme	nt	Yes-Submitte	d
Facility Number	Project Sub Number Num		Scope	Date Plan in	Approved P Date	roj. Start F Date	Proj. Comple Date	eted Status	CEQA Review
10856	HS032305-0	0	HOSPITAL EXPANSION AND RENOVATION PROJECTS	10/7/2003 12:00:00 AM	9/19/2005 12:00:00 AM		5 05/01/20	10 FIEL	No
10856	IS102399-0	0	SEISMIC UPGRADE RENOVATION AND NEW ADDITION (TRANSFERRED FROM HS081309-43)	12/8/2010 12:00:00 AM		12/31/2010	0	ACTI	No
10856	SS100429-0	0	2ND FLOOR BUILD-OUT	3/16/2010 12:00:00 AM	10/26/2010 12:00:00 AM		0 02/01/20	12 PEND	No
Duilding									
Building	No: BLD-0223	7	South Wing		Retrofit/F	Replaceme	nt	Yes-Submitte	d
Facility Number	Project Sub	7	Scope Scope	Date Plan in	Project:		nt Proj. Comple Date		CEQA Review
Facility	Project Sub				Project: Approved P Date	roj. Start F Date 12/31/2010	Proj. Comple Date		CEQA
Facility Number	Project Sub Number Num HS032305-0		Scope HOSPITAL EXPANSION AND RENOVATION PROJECTS	in 10/7/2003 12:00:00	Project: Approved P Date 1/19/2005 12:00:00 AM	roj. Start F Date 12/31/2010 04/01/2012	Proj. Comple Date	eted Status	CEQA Review

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Building No: BLI	D-02238	Obste	etrics Wing			Retro Proje	fit/Replacen ct:	nent	Yes-S	ubmitte	d
Facility Project Number Number	Sub Num	Scope			Date Plan in	Approved Date	Proj. Start Date	, _	mpleted ate	Status	CEQA Review
10856 IS102399	-0 0		JPGRADE RENOVAT ITION (TRANSFERRI -43)	-	12/8/2010 12:00:00 AM		12/31/20	010		ACTI	No

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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-02236		Building Na	me:	Maii	n Tower and North Wing		
Type of Service Prov	<u>/ided</u>							
X Nursing	Inpatient Beds	129	Inpatient Days	27732		Surgical	X	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0	Inpatient Days	0		Anesthesia		Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	8	Inpatient Days	575		Clinical Lab		Emergency
Psychiatric Nursing	Inpatient Beds	0	Inpatient Days	s 0		Radiological/ Imaging		Nuclear Medicine
X Obstetrical Ante/Postprtum	Inpatient Beds	37	Inpatient Days	794		X Pharmaceutical X Dietetic		Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0	Inpatient Days	0		X Administration X Support		Renal Dialysis
Skilled Nursing	Inpatient Beds	0	Inpatient Days	0		X Support Services Obstetrical		Outpatient Surgery
		Total E Buildin	Beds this	174]	Cesarean/Deliv		Central 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-02237		Building Na	me:	Sout	h Wing	
Type of Service Prov	<u>rided</u>						
Nursing	Inpatient Beds	0	Inpatient Days	0		Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0	Inpatient Days	0		Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0	Inpatient Days	0		Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0	Inpatient Days	0		X Radiological/ Imaging	X Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0	Inpatient Days	0		Pharmaceutical Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0	Inpatient Days	0		Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0	Inpatient Days	0		X Support Services Obstetrical	Outpatient Surgery
		Total B Buildin	eds this	0		Cesarean/Deliv	X Central 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-02238	Building Name:	Obstetrics Wing	
Type of Service Prov	<u>ided</u>			_
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	X Obstetrical Recovery
X IntensiveCare	Inpatient Beds	6 Inpatient Days 139	X Anesthesia	X Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	X Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	X Administration	Renal Dialysis
Skilled Nursing	Inpatient Eds	0 Inpatient Days 0	X Support Services X Obstetrical Cesarean/Deliv	Outpatient Surgery
	Build		Gesalean/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-02236	Building Name:	Main Tower and North Wing		
Medical / Surgical (Include GYN)	Acute Respira	tory Care	Acute Psychiatric	
Inpatient 129 Bed	Inpatient 2773 Days 2	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 37 Bed	Inpatient 794 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nursery	Newborn	Intermediate Card	
Inpatient 8 Bed	Inpatient 575 Days	Inpatient Bed	0 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 (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 Bed	Inpatient 0 Days	174	174

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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	D-02237 Buildin	ig Name: Sout	th Wing		
Medical / Surgical (Include	de GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Inpat Bed Days		Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse Newb	orn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Inpat Bed Days		Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nev Nursery	wborn	Intermediate Card	
Inpatient 0 Inpat Bed Days		Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developn Disabled	nent
Inpatient 0 Inpati Bed 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 Inpati Bed Days		Inpatient 0 Bed	Inpatient 0 Days	0	0

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

Building Number:	BLD-02238	Building Name:	Obstetrics Wing		
Medical / Surgical (Include GYN)	Acute Respirat	tory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient (Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse I	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient (Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nursery	Newborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 6 Bed	Inpatient 117 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	6	6

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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-02236	Main Tower and North Wing	Rebuild
BLD-02237	South Wing	Retrofit
BLD-02238	Obstetrics Wing	Rebuild
BLD-02239	Emergency Department Building	Remain
BLD-02240	Lab Building	Remain
BLD-02241	Surgery Building	Remain
BLD-02242	ICU/CCU Building	Remain
BLD-02958	7A Outpatient Surgery Center	Remain

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

Building Number	Building Name	New Site	
N_1	Med-Tele Wing	X	_
N_2	New Four-Story Tower		

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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-0223	88	Obstetrics	s Wing		Removal Date:		01/01/2015	
	Planned Uses for the building to be removed from acute care service:								
Planned	use for building: Cli	nic		Jurisdiction:	OSHPD				
Inpatient	services currently del	ivered in the	e building:						
	Nursing		Surgical	X	Obstetrical Cesarean/Deliv		X	Rehabilitation Therapy	
X	IntensiveCare	X	Anesthesia						
	Pediatric/Adol escent		Clinical Lab	X	Obstetrical Recovery			Renal Dialysis	
	Psychiatric Nursing		Radiological/ Imaging	X	Newborn/ WellBaby			Outpatient Surgery	
	Obstetrical Ante/Postprtum		Pharmaceutical						
	Intermediate		Dietetic		Emergency		X	Central Plant	
Ш	Care		Dietetic		Niveleen			Common and	
	Skilled Nursing	X	Administration		Nuclear Medicine		X	Support Services	

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Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c) (2)(E)

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Building Name: Number: Will general acute care services and beds will be r		building?				
New Building	RetroFitted Building	Other SPC2-SPC5 Building				
N_2-New Four-Story Tower						
Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Pediatric Adolescent Relocated to new building						
Building Number: Will general acute care services and beds will be robstetrical Ante Postprtum BLD-02236 Building Name: Relocated to new building		building?				

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Building Number: Will general acu Pharmaceutical	BLD-02236 Building Nam te care services and beds will be Relocated to new build	pe relocated to a new, Existing or retrofitte	d building?	
Building Number: Will general acur Dietetic	BLD-02236 Building Nam te care services and beds will be Relocated to new build	pe relocated to a new, Existing or retrofitte	d building?	
Building Number: Will general acu Administration	BLD-02236 Building Nam te care services and beds will be Relocated to new build	pe relocated to a new, Existing or retrofitte	d building?	
Building Number: Will general acu Support Service:		pe relocated to a new, Existing or retrofitte	d building?	

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Building Number: Will general acu Obstetrical Reco	te care services and bed	g Name: Main Tower and North Wing ds will be relocated to a new, Existing or re w building	etrofitted building?	
Building Number: Will general acu Medical/Surgica (Include GYN)	te care services and bed	g Name: Main Tower and North Wing ds will be relocated to a new, Existing or re w building	etrofitted building?	
Building Number: Will general acu Perinatal (exclud Newborn / GYN)	te care services and bed	g Name: Main Tower and North Wing ds will be relocated to a new, Existing or re w building	etrofitted building?	
Building Number: Will general acu Pediatric		g Name: Main Tower and North Wing	etrofitted building?	

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Building Number: Will general acu Intensive Care		g Name: Obstetrics Wing ds will be relocated to a new, Existing or rew w building	etrofitted building?					
Building Number: Will general acu Anesthesia		g Name: Obstetrics Wing ds will be relocated to a new, Existing or re	etrofitted building?					
Building Number: Will general acu Administration	Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?							
Building Number: Will general acu Support Service	te care services and be	g Name: Obstetrics Wing ds will be relocated to a new, Existing or re	etrofitted building?					

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Building Number: Will general acu Obstetrical Cesarean/Deliv	BLD-02238 Building Name: te care services and beds will be	Obstetrics Wing relocated to a new, Existing or retrofitted	d building?				
Building Number: Will general acu Obstetrical Reco		Obstetrics Wing relocated to a new, Existing or retrofitted	d building?				
Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Newborn/Well Baby N/A							
Building Number: Will general acu Rehabilitation Therapy	BLD-02238 Building Name: te care services and beds will be	Obstetrics Wing relocated to a new, Existing or retrofitted	d building?				

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Number:	D-02238 Building Name: Obs	stetrics Wing ted to a new, Existing or retrofitte	d building?	
Intensive Care Newborn Nursery	Relocated to new building			

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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-02236 Buildin	ng Name: Main Tower and North	Wing						
Type of Service Provided									
		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy					
X	Nursing	Anesthesia							
	IntensiveCare		X Obstetrical Recovery	Renal Dialysis					
	Pediatric/Adol escent	Clinical Lab	Newborn/	Outpatient Surgery					
	Psychiatric	Radiological/ Imaging	WellBaby						
	Nursing	X Pharmaceutical	Emergency	Central Plant					
X	Obstetrical Ante/Postprtum	X Dietetic	Nuclear Medicine	X Support Services					
		Netetic							
	Intermediate Care	X Administration							
	Skilled Nursing								

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Report any general acute care hospital inpatient service that is provided in any genaral acute care hospital building that is rated SPC-1 per Section 130061(c)(4)

Building Number:	BLD-02237	Building Name:	South Wing						
Type of Servic	Type of Service Provided								
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	Nursing		Anesthesia						
	IntensiveCare			Obstetrical Recovery		Renal Dialysis			
	Pediatric/Adol	, [Clinical Lab			Outpatient			
		×	Radiological/ Imaging	Newborn/ WellBaby		Surgery			
	Psychiatric Nursing		Pharmaceutical	Emergency	Х	Central Plant			
	Obstetrical Ante/Postprtu	ım		X Nuclear	X	Support			
	Anten ostpitu	"" <u>[</u>	Dietetic	Medicine	لت	Services			
	Intermediate Care		¬						
			Administration						
	Skilled Nursin	ng							

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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-02238 Bu	uilding Name:	Obstetrics Wing						
Type of Service Provided									
			Surgical	X Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy			
	Nursing	X	Anesthesia	_					
X	IntensiveCare		_	X Obstetrical Recovery	Ш	Renal Dialysis			
	Pediatric/Adol escent		Clinical Lab	X Newborn/	П	Outpatient Surgery			
_			Radiological/ Imaging	WellBaby		Cargory			
	Psychiatric Nursing		Pharmaceutical	Emergency		Central Plant			
	Obstetrical Ante/Postprtum		_	Nuclear	X	Support			
	·		Dietetic	Medicine		Services			
	Intermediate Care		Administration						
	0.00								
	Skilled Nursing	I							

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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-02236	Building Na	me: Main Tower a	nd North Win	ng		
Configuration:	N/A						
Type of Servi	ice Provided						
X	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia	X	Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum	X	Pharmaceutical	П	Emergency		Central Plant
	Intermediate Care	X	Dietetic		Nuclear Medicine		Support
	Skilled Nursing	X	Administration		nuclear Medicine	[X]	Support Services

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

Building Numbe	r: BLD-02237	Building Na	me: South Wing						
Configuration:	Configuration: Retrofit Non-Conforming building to SPC 5 and 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	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	X	Central Plant		
	Intermediate		Dietetic						
	Care 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	er: BLD-02238	Building Na	me: Obstetrics Win	g			
Configuration:	N/A						
Type of Serv	vice Provided						
	Nursing		Surgical	X	Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
X	IntensiveCare	X	Anesthesia	X	Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging	X	Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant
	Intermediate		Dietetic				
	Care Skilled Nursing	X	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-02239 Building Name: Emergency Department Building										
Configuration:	Configuration: Retrofit Conforming building to NPC 4 or NPC 5									
Type of Service Provided										
N	ursing		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	X	Emergency		Central Plant			
	ntermediate		Dietetic			_	2			
	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-02240	Building Na	me: Lab Building			
Configuration:	N/A					
Type of Servi	ce Provided					
	Nursing		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical Page von	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	_	Lineigency	Contract land
	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-02241	Building Na	me: Surgery Build	ing			
Configuration:	N/A						
Type of Service	ce Provided						
	Nursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	ntensiveCare	X	Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent	X	Clinical Lab		Recovery		
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby	X	Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant
	ntermediate		Dietetic		Linergency		Central Flam
	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 Numbe	er: BLD-02242	Building Na	me: ICU/CCU Buil	lding			
Configuration	: N/A						
Type of Serv	vice Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	IntensiveCare		Anesthesia		Obstetrical Recovery		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	Ш	Emergency		Contrain land
	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 Numbe	er: BLD-02958	Building Na	me: 7A Outpatient	t Surgery Cer	nter		
Configuration:	N/A						
Type of Serv	rice Provided						
	Nursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare	X	Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby	X	Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant
	Intermediate		Dietetic		Emergency		Contrain
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services

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Building Number: BL	D-02239	Building N	Name: Emergency Departmen	nt Building	
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	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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Building Number: BL	D-02240	Building I	Name: Lab Building		
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	X 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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Building Number	: BLD-02241	Building N	Name: Surgery Building		
Type of Service	e Provided				
Nursing	Inpatient Beds	0	X Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveC	Care Inpatient Beds	0	X Anesthesia		
Pediatric/#	Adol Inpatient Beds	0	X Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	c Inpatient Beds	0	X Radiological/ Imaging	Newborn/ WellBaby	X Outpatient Surgery
Obstetrica Ante/Post	•	0	Pharmaceutical	Emergency	Central Plant
Intermedia Care	ate Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services
Skilled Nu	rsing Inpatient Beds	0	Administration		
Total Beds Building	s this	0			

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Buildir	ng Number: BLC	D-02242	Building N	Name: IC	U/CCU Building				
<u>Type</u>	of Service Prov	<u>ided</u>							
	Nursing	Inpatient Beds	0		Surgical		stetrical sarean/Deliv		Rehabilitation Therapy
X	IntensiveCare	Inpatient Beds	34		Anesthesia				
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab		stetrical covery		Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging		wborn/ ellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Em	nergency		Central Plant
	Intermediate Care	Inpatient Beds	0		Dietetic		clear dicine	X	Support Services
	Skilled Nursing	Inpatient Beds	0		Administration				
	Total Beds this Building		34						

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Buildi	ng Number: BLI	D-02958	Building I	Name: 7A	Outpatient Surgery	Center	
Туре	Type of Service Provided						
	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		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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Building Number:	BLD-02239	Building Name:	Emergency Department	Building	
Medical / Surgical (Include GYN)	Acute Respi	ratory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (Exclude l	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		Intensive Ca Nursery	re Newborn	Intermediate Care	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitatio Center	n	Int. Care / Developr Disabled	nentally
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	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 Unit	Service 0

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Building Number:	BLD-02240 B	uilding Name: Lab Building	
Medical / Surgical (I	nclude GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 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 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-02241 Buil	ding Name: Surgery Build	ling			
Medical / Surgical (In	nclude GYN)	Acute Respiratory Care	Acute	Psychiatric		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatie Bed Days	nt 0 Inpation Bed	ent 0 Inpatient 0 Days		
Perinatal (Exclude N	ewborn / GYN)	Burn	Skille	Skilled Nursing		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatie Bed Days	nt 0 Inpation Bed	ent 0 Inpatient 0 Days		
Pediatric		Intensive Care Newborn Nursery	Intern	nediate Care		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatie Bed Days	nt 0 Inpation	ent 0 Inpatient 0 Days		
Intensive Care		Rehabilitation Center	Int. Ca Disab	are / Developmentally lled		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatie Bed Days	nt 0 Inpation	ent 0 Inpatient 0 Days		
Coronary Care		Chemical Dependency		Beds this ing Per Building Per		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatie Bed Days	Unit	Service 0		

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Building Number:	BLD-02242	Building Name:	ICU/CCU Buildin	ng		
Medical / Surgical (I	nclude GYN)	Acute Resp	Acute Respiratory Care			
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days		Inpatient 0 Bed	Inpatient 0 Days
Perinatal (Exclude N	ewborn / GYN)	Burn	Burn			
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	1 "1	Inpatient 0	Inpatient 0 Days
Pediatric		Intensive C Nursery	are Newborn		Intermediate Care	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	· · · · · ·	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitati Center	on		Int. Care / Developr Disabled	nentally
Inpatient 34 Bed	Inpatient 111 Days	25 Inpatient Bed	0 Inpatient Days		Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical D	ependency		Total Beds this Building Per	Total Beds this Building Per
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days		Unit 34	Service 34

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Building Number:	BLD-02958 Build	ding Name: 7A 0	Outpatient Surgery 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 Inpati Bed Days	ent 0	
Perinatal (Exclude N	lewborn / GYN)	Burn		Skilled Nursing		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpati Bed Days	ent 0	
Pediatric		Intensive Care Ne Nursery	wborn	Intermediate Care		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpati Bed Days	ent 0	
Intensive Care		Rehabilitation Center		Int. Care / Developmental Disabled	ly	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0	Inpatient 0 Inpati Bed Days	ent 0	
Coronary Care		Chemical Depend	ency		tal Beds this	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	•	rvice 0	