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

Facility Number:	11731		
Facility Name:	Good S	amaritan Hospital - Los Angeles	
Address:	1225 W	ilshire Blvd.	$\equiv$
City:	Los An	geles	
Hospital Owner/Lic	censee:	Good Samaritan Hospital / 930000071	
Year of Re	porting:	2013	
Contact 1 e-mail A	ddress:		
Contact 2 e-mail A	ddress:		
Contact 3 e-mail Ad	ddress::		
Name of Su	bmitter:	Dan McLaughlin	
Submissio	on Date:	10/15/2013 10:00:57 A	٨M

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For buildings For buildings which are planned for rebuild, retrofit or replacement this report shall identify; Whether the hospital owner intends to rebuild, retrofit or replace the building to SPC2, SPC3, SPC4 or SPC5 per 130061(c)(1)(A). The deadline, as described in Section 130060 or 130061.5, for rebuild, retrofit or replacement of the building that the hospital owner intends to meet, and the applicable extension for which the hospital owner has been approved per Section 130061(c)(1)(B)

Bldg. No.	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date
BLD- 01997	1927 Building	1225 Wilshire Blvd.	Replace	SPC4	01/01/2015	10/01/2015
BLD- 01998	1953 Building	1225 Wilshire Blvd.	Replace	SPC4	01/01/2015	10/01/2015

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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-01997		Building Nan	ne:	1927	Building	
Type of Service Prov	<u>rided</u>	_					
Nursing	Inpatient Beds		patient ays	0		Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 Inp	oatient Days	0		Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 In	npatient Days	0		Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 In	npatient Days	0		Radiological/ Imaging  Pharmaceutical	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 In	npatient Days	0		X Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 In	npatient Days	0		Administration  X Support	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 In	npatient Days	0		X Support Services  Obstetrical	Outpatient Surgery
		Total Beds Building	s this	0		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: BLD-01998	Building Name:	1953 Building	
Type of Service Provided			
Nursing Inpatient Beds	0 Inpatient 0 Days	Surgical Obstetrical Recovery	
IntensiveCare Inpatient Beds	0 Inpatient Days 0	Anesthesia Newborn/ WellBaby	
Pediatric/Adol Inpatient escent Beds	0 Inpatient Days 0	Clinical Lab Emergency	
Psychiatric Inpatient Nursing Beds	0 Inpatient Days 0	Radiological/ Nuclear Medicine	
Obstetrical Inpatient Ante/Postprtum Beds	0 Inpatient Days 0	Pharmaceutical  Dietetic  Rehabilitation Therapy	n
Intermediate Inpatient Care Beds	0 Inpatient Days 0	Administration Renal Dialys	is
Skilled Nursing Inpatient Beds	0 Inpatient Days 0	X Support Outpatient Services Surgery	
	Total Beds this Building 0	Cesarean/Deliv Central Plant	t

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

Building Number:	BLD-01997	Building Name: 1927	' Building					
Medical / Surgical (	Include GYN)	Acute Respiratory	Care	Acute Psychiatric	Acute Psychiatric			
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days			
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing				
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days			
Pediatric		intensive Care New Nursery	vborn	Intermediate Card				
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days			
Intensive Care		Rehabilitation Center		Int. Care / develop Disabled	ment			
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days			
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service			
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0			

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

Building Number: BLD-01998	Building Name: 1953 Building	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Days
Perinatal (excluse Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Days
Pediatric	intensive Care Newborn Nursery	Intermediate Card
Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Intensive Care	Rehabilitation Center	Int. Care / development Disabled
Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Coronary Care	Chemical Dependency	Total Beds this Building Per Unit  Total Beds this Building Per Service
Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	0 0

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For all buildings at the facility, indicate which ones are scheduled for general acute service removal.

be ed / Rebuilt

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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 l	Number: BLD-0199	7	1927 Buil	ding		Removal Date:	[	10/01/2015
Planned	Uses for the building t	o be remov	ed from acute car	e service:				
Planned	use for building: Clir	nic		Jurisdiction:	OSHPD			
Inpatient	services currently del	ivered in the	e building:					
	Nursing		Surgical		Obstetrical Cesarean/Deliv			Rehabilitation Therapy
	IntensiveCare		Anesthesia					
	Pediatric/Adol escent		Clinical Lab		Obstetrical Recovery		Ш	Renal Dialysis
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby			Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical	П	·			Central Plant
	Intermediate Care	X	Dietetic		Emergency			Ochilai Flant
	Skilled Nursing		Administration		Nuclear Medicine		X	Support Services

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

dates for replaced or rebuild buildings as well.

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

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

Building	Number: BLD-0199	8	1953 Bui	ilding			Removal Date:	[	10/01/2015
Planned Uses for the building to be removed from acute care service:  Planned use for building: Clinic Jurisdiction: OSHPD									
Inpatient	services currently del	ivered in th	e building: Surgical			Obstetrical Cesarean/Deliv			Rehabilitation Therapy
	IntensiveCare		Anesthesia	Γ	1	Obstetrical			Renal Dialysis
Ш	Pediatric/Adol escent		Clinical Lab			Recovery		Ш	Teriai Diaiysis
	Psychiatric Nursing		Radiological/ Imaging			Newborn/ WellBaby			Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical			Emergency			Central Plant
	Intermediate Care		Dietetic						
	Skilled Nursing		Administration			Nuclear Medicine		X	Support Services

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

Building Number:  Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?  Dietetic Relocated to other building
Building Number:  Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?  Support Services  Relocated to other building
Building Number:  Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?
Support Services Relocated to other 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-01997	Building Name:	1927 Building							
Type of Service Provided										
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
	Nursing		Anesthesia							
	IntensiveCare			Obstetrical Recovery		Renal Dialysis				
	Pediatric/Adol	,   [	Clinical Lab			Outpatient				
	escent		Radiological/ Imaging	Newborn/ WellBaby		Surgery				
	Psychiatric Nursing		Pharmaceutical	Emergency		Central Plant				
	Obstetrical Ante/Postprtu	ım 5		Nuclear Medicine	X	Support Services				
		<u> </u>	X Dietetic	Wedelife		Corvices				
	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-01998	Building Name:	1953 Building			
Type of Servic	e Provided					
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	Nursing	Г	Anesthesia			
П	IntensiveCare	,	_	Obstetrical Recovery		Renal Dialysis
_	Pediatric/Ado	,   [	Clinical Lab			Outpatient
Ш	escent		Radiological/	Newborn/ WellBaby		Surgery
	Psychiatric Nursing		Imaging	- Fmorganov		0 1 151 1
			Pharmaceutical	Emergency		Central Plant
	Obstetrical Ante/Postprtu	m [	Dietetic	Nuclear Medicine	X	Support Services
	Intermediate Care		$\neg$			
	24.0		Administration			
	Skilled Nursin	ıg				

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

Building Numbe	er: BLD-01993	Building Na	me: Main Hospital				
Configuration:	N/A						
Type of Serv	vice Provided						
X	Nursing	X	Surgical	X	Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
X	IntensiveCare	X	Anesthesia	X	Obstetrical	X	Renal Dialysis
	Pediatric/Adol escent	X	Clinical Lab		Recovery		
	Psychiatric Nursing	X	Radiological/ Imaging	X	Newborn/ WellBaby		Outpatient Surgery
X	Obstetrical Ante/Postprtum	X	Pharmaceutical				
	Ante/i Ostpitum			X	Emergency	X	Central Plant
	Intermediate Care	×	Dietetic	X	Nuclear Medicine	X	Support
X	Skilled Nursing	X	Administration				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-01994	Building Na	me: ICU / CCU Ad	dition			
Configuration:	N/A						
Type of Serv	vice Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	IntensiveCare		Anesthesia		Obstetrical Recovery	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		Linesgoney	<u></u>	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 Number	: BLD-01995	Building Na	me: Mechanical Pla	ant			
Configuration:	N/A						
Type of Servi	ce Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	X	Central Plant
	Intermediate		Dietetic		Lineigency	^_	Contrair lant
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services

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

Building Number:	BLD-01996	Building Na	me: MRI Addition			
Configuration:	N/A					
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	X	Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
	Obstetrical .nte/Postprtum		Pharmaceutical	П	Emergency	Central Plant
	ntermediate Care		Dietetic			
	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-01997	Building Na	me: 1927 Building			
Configuration:	N/A					
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 Iursing		Radiological/ Imaging	Newborn/ WellBaby		Outpatient Surgery
	Obstetrical .nte/Postprtum		Pharmaceutical	Emergency		Central Plant
	ntermediate Care	X	Dietetic	Nuclear Medicine	X	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:	BLD-01998	Building Na	me: 1953 Building				
Configuration:	N/A						
Type of Service	ce Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant
	ntermediate		Dietetic	_	Emergency		Contract
	Care Skilled Nursing		Administration		Nuclear Medicine	X	Support Services

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Buildi	ng Number: BLI	D-01993	Building	Name: Ma	in Hospital		
Туре	e of Service Prov	<u>ided</u>					
X	Nursing	Inpatient Beds	258	X	Surgical	X Obstetrical Cesarean/	
X	IntensiveCare	Inpatient Beds	33	X	Anesthesia		
	Pediatric/Adol escent	Inpatient Beds	0	X	Clinical Lab	X Obstetrical Recovery	X Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	X Newborn/ WellBaby	Outpatient Surgery
X	Obstetrical Ante/Postprtum	Inpatient Beds	31	X	Pharmaceutical	X Emergency	y Central Plant
	Intermediate Care	Inpatient Beds	0	X	Dietetic	X Nuclear Medicine	X Support Services
X	Skilled Nursing	Inpatient Beds	28	X	Administration		
	Total Beds this Building		350				

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Number:	BLD-01994	Building N	Name: ICU / CCU Addition		
Type of Service F	<u>Provided</u>				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X IntensiveCar	e Inpatient Beds	58	Anesthesia		
Pediatric/Add	ol Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	X Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprt	Inpatient um Beds	0	Pharmaceutical	Emergency	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursi	ng Inpatient Beds	0	Administration		
Total Beds th Building	nis	58			

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Number: BL	D-01995	Building N	Name: Mechanical Plant		
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	X Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Numb	uilding Number: BLD-01996 Building Name: MRI Addition									
Type of Serv	rice Provided									
Nursing	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv	1 1	Rehabilitation Therapy		
Intensiv	eCare Inpatient Beds	0		Anesthesia						
Pediatri escent	c/Adol Inpatient Beds	0		Clinical Lab		Obstetrical Recovery	F	Renal Dialysis		
Psychia Nursing		0	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
Obstetr Ante/Po	ical Inpatient ostprtum Beds	0		Pharmaceutical	E	Emergency		Central Plant		
Interme Care	diate Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services		
Skilled	Nursing Inpatient Beds	0		Administration						
Total Bo Building	•	0								

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Building Number:	BLD-01993 Build	ing Name: Mair	n Hospital			
Medical / Surgical (Inc	clude GYN)	Acute Respiratory	Care	Acute Psychiatric		
Inpatient 235 Bed	Inpatient 85775 Days	Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days	
Perinatal (Exclude Ne	wborn / GYN)	Burn		Skilled Nursing		
Inpatient 31 Bed	Inpatient 11315 Days	Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days	
Pediatric		Intensive Care Ne Nursery	wborn	Intermediate Care		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 23 Bed	Inpatient 8395 Days		Inpatient 0 Days	
Intensive Care		Rehabilitation Center		Int. Care / Developm Disabled	entally	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 23 Bed	Inpatient 0 Days		Inpatient 0 Days	
<b>Coronary Care</b>		Chemical Depend	ency	Total Beds this Building Per	Total Beds this Building Per	
Inpatient 10 Bed	Inpatient 3650 Days	Inpatient 0	Inpatient 0 Days	<b>Unit</b> 350	Service 350	

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Building Number:	BLD-01994 <b>Bu</b>	ilding Name:	/ CCU Addition		
Medical / Surgical (Ir	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	ewborn / 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 58 Bed	Inpatient 21170 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 58	

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Building Number:	BLD-01995	Building	Name: Mech	nanical Plant		
Medical / Surgical (Include GYN)			Acute Respiratory Care		Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days		patient 0 ed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (Exclude Newborn / GYN)			urn		Skilled Nursing	
Inpatient 0 Bed	Inpatient Days		patient 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric			itensive Care New ursery	vborn	Intermediate Care	
Inpatient 0 Bed	Inpatient Days		patient 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care			ehabilitation enter		Int. Care / Develop Disabled	nentally
Inpatient 0 Bed	Inpatient Days		patient 0	Inpatient 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 Days	<b>I</b>	patient 0	Inpatient 0 Days	Unit 0	Service 0

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Building Number:	BLD-01996 <b>B</b> t	uilding Name: MRI	Addition		
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 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 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	