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

Facility Number:	11748	
Facility Name:	Citrus Va	Illey Medical Center - IC Campus
Address:	210 W. S	an Bernardino Rd.
City:	Covina	
Hospital Owner/Lice	ensee:	Citrus Valley Health Partneers
Year of Rep	orting:	2013
Contact 1 e-mail Ad	ldress:	
Contact 2 e-mail Ad	ldress:	
Contact 3 e-mail Add	dress::	
Name of Sub	mitter:	Ed Gharibans
Submission	n Date:	12/17/2013 4:26:29 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- 02020	East Wing Addition	210 W. San Bernardino Rd.	Retrofit	SPC2	01/01/2020	12/31/2019
BLD- 02021	West Wing Addition	210 W. San Bernardino Rd.	Retrofit	SPC2	01/01/2016	04/21/2015
BLD- 02024	Generator Building	210 W. San Bernardino Rd.	Retrofit	SPC2	01/01/2015	10/24/2014

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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-02020		Building Name:	Eas	st Wing Addition	
Type of Service Prov	<u>rided</u>					
X Nursing	Inpatient Beds	61	Inpatient 14415 Days		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	]	Radiological/ Imaging  Pharmaceutical	X Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0	Inpatient Days 0	]	Dietetic	X Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0	Inpatient Days 0	]	Administration  X Support	Renal Dialysis  Outpatient
X Skilled Nursing	Inpatient Beds	25	Inpatient Days 4467	]	X Support Services Obstetrical	Surgery
		Total E Buildir		36	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-02021		Building Nar	me:	Wes	t Wing Addition	
Type of Service Prov	<u>rided</u>						_
X Nursing	Inpatient Beds		Inpatient Days	2834		Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 1	npatient 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 Pharmaceutical	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0	Inpatient Days	0		X Dietetic	X Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0	Inpatient Days	0		<ul><li>X Administration</li><li>X Support</li></ul>	Renal Dialysis  Outpatient
Skilled Nursing	Inpatient Beds	0	Inpatient Days	0		Services  Obstetrical	Surgery
		Total Bed Building	ds this	12		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-02024	Building Name:	Generator Building	
Type of Service Prov	<u>rided</u>			
Nursing	Inpatient Beds	0 Inpatient 0 Days	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	Radiological/ Imaging  Pharmaceutical	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration  X Support	Renal Dialysis  Outpatient
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	X Support Services Obstetrical	Surgery
		Total Beds this Building	Cesarean/Deliv	X 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-02020	Building Name: East	Wing Addition		
Medical / Surgical (	Include GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 61 Bed	Inpatient 1441 Days 5	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	lewborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 25 Bed	Inpatient 4467 Days
Pediatric		intensive Care Nev 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 / developn 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	86	86

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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-02021	Building Name: Wes	t Wing Addition		
Medical / Surgical	(Include GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 12 Bed	Inpatient 2834 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nev Nursery	vborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developr Disabled	ment
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	12	12

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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-02024	Building Name:	Generator Building		
Medical / Surgical (	Include GYN)	Acute Respira	atory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse I	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nursery	e Newborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center	ı	Int. Care / developn Disabled	nent
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 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	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.

Building Number	Building Name	Building to be Removed / Replaced / Rebuilt
BLD-02019	Original Building	Remain
BLD-02020	East Wing Addition	Retrofit
BLD-02021	West Wing Addition	Retrofit
BLD-02022	Psychiatric Wing Addition	Remain
BLD-02023	Lobby Addition	Remain
BLD-02024	Generator Building	Retrofit
BLD-02025	Power Plant	Remain
BLD-02026	Radiology Addition	Remain
BLD-02027	Conference Room Addition	Remain
BLD-02028	Surgery Wing Addition	Remain
BLD-05422	CCU Addition	Remain
BLD-05423	Canopy Addition	Remain

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SPC-1 per Section		npatient service that is provide	d in any genaral acute care h	ospital building that is ra
uilding Number:	BLD-02020 Buildin	ng Name: East Wing Addition		
Type of Servic	e Provided			
		Surgical	Obstetrical Cesarean/Deliv	X Rehabilitation Therapy
X	Nursing	Anesthesia		
	IntensiveCare		Obstetrical Recovery	Renal Dialysis
	Pediatric/Adol	Clinical Lab		Outpatient
Ш	escent	Radiological/	Newborn/ WellBaby	Surgery
	Psychiatric Nursing	Imaging	Emergency	Control Blant
	Obstatical	Pharmaceutical	Lineigency	Central Plant
	Obstetrical Ante/Postprtum	Dietetic	X Nuclear Medicine	X Support Services

Report Status: **Data Last Update:** 12/17/2013 **Submission Date:** 12/17/2013 **Print Date:** 12/19/2013 1:50 PM

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-02021	Building Name:	West Wing Addition			
Type of Service	e Provided					
			Surgical	Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
X	Nursing		Anesthesia			
	IntensiveCare		_	Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab	Novebour /		Outpatient Surgery
		X	Radiological/ Imaging	Newborn/ WellBaby		Surgery
	Psychiatric Nursing	×	_	Emergency		Central Plant
	Obstetrical Ante/Postprtui	m _	_	Nuclear	Х	Support
	•	<u> </u>	X Dietetic	Medicine		Services
	Intermediate Care	×	X Administration			
	Skilled Nursing	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-02024	Building Name:	Generator Building			
Type of Servic	e Provided					
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	Nursing		Anesthesia			
	IntensiveCare		_	Obstetrical Recovery		Renal Dialysis
	Pediatric/Ado escent	ı	Clinical Lab	Newborn/		Outpatient Surgery
	Dovobiotrio		Radiological/ Imaging	WellBaby		Sangery
	Psychiatric Nursing		Pharmaceutical	Emergency	X	Central Plant
	Obstetrical Ante/Postprtu	ım		Nuclear	Х	Support
	:		Dietetic	Medicine Medicine	Ш	Services
	Intermediate Care		Administration			
			Administration			
	Skilled Nursin	ng <b>l</b>				

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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-02019	Building Na	me: Original Building	9			
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
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical	X	Emergency	X	Central Plant
	Intermediate Care		Dietetic		Nuclear Medicine		Cumpart
	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-02020	Building Na	me: East Wing Addit	ion			
Configuration	: Retrofit Non-Confo	orming buildi	ng to SPC 2 and NPC	3 and rem	ove from service by 2030		
Type of Serv	vice Provided						
X	Nursing		Surgical		Obstetrical Cesarean/Deliv	X	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		o.gooy		Contract
X	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	r: BLD-02021	BLD-02021 Building Name: West Wing Addition									
Configuration:	Retrofit Non-Confo	rming buildi	ng to SPC 2 and NPC	C 3 and rem	ove from service by 2030						
Type of Serv	ice Provided										
X	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	X	Pharmaceutical		Emergency		Central Plant				
	Intermediate	X	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 Numb	er: BLD-02022	Building Na	me: Psychiatric W	/ing Addition			
Configuration	n: Remove from GAC	Service by	1/1/2030				
Type of Ser	vice Provided						
	Nursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
X	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical	П	Emergency		Central Plant
	Intermediate		Dietetic				
	Care Skilled Nursing		Administration	Ш	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-02023	Building Na	me: Lobby Additio	n		
Configuration	: Remove from GAC	Service by	1/1/2030			
Type of Ser	vice Provided					
	Nursing		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery	
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical	X	Emergency	Central Plant
П	Intermediate		Dietetic		Lineigency	Ochila i lant
	Care		Administration		Nuclear Medicine	Support Services
	Skilled Nursing		Administration			

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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-02024	BLD-02024 Building Name: Generator Building										
Configuration:	Retrofit Non-Confo	rming buildi	ng to SPC 2 and NP	C 3 and rem	ove from service by 2030							
Type of Service	Provided											
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy					
Inte	ensiveCare		Anesthesia		Obstetrical		Renal Dialysis					
	diatric/Adol cent		Clinical Lab		Recovery							
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery					
	estetrical te/Postprtum		Pharmaceutical		Emergency	X	Central Plant					
	ermediate		Dietetic		Lineigency		Ochiliai Fianil					
Ca □ Ski	re illed 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-02025	Building Na	me: Power Plant				
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	X	Central Plant
	itermediate are		Dietetic				Sunnart
	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-02026	Building Na	me: Radiology Ad	ldition			
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 Recovery		Renal Dialysis
	ediatric/Adol scent	X	Clinical Lab		Recovery		
	sychiatric lursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	bstetrical nte/Postprtum		Pharmaceutical		_		
A	ino, i ootpitum		Distatis		Emergency		Central Plant
	ntermediate are		Dietetic		Nuclear Medicine	X	Support
s	killed 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 Number	: BLD-02027	Building Na	me: Conference R	oom Additior	1		
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		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 Numb	er: BLD-02028	Building Na	me: Surgery Wing	Addition			
Configuration	n: Retrofit Conformin	g building to	NPC 4 or NPC 5				
Type of Ser	vice Provided						
X	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		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 Numb	er: BLD-05422	Building Na	me: CCU Addition		
Configuration	n: 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		Clinical Lab	Recovery	
	Psychiatric Nursing		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical	Emergency	Central Plant
	Intermediate Care		Dietetic		
	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-05423	Building Na	me: Canopy Addition	on					
Configuration:	Retrofit Conformin	g building to	building to NPC 4 or NPC 5						
Type of Service	ce Provided								
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
I	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 Care		Dietetic						
	Skilled 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)

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Buildi	ng Number: BLI	D-02019	Building N	Name: Ori	ginal Building				
Тур	Type of Service Provided								
X	Nursing	Inpatient Beds	43		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
	IntensiveCare	Inpatient Beds	0		Anesthesia				
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis		
	Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery		
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	X Emergency	X Central Plant		
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Support Services		
	Skilled Nursing	Inpatient Beds	0		Administration				
	Total Beds this Building		43						

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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)

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Buildi	uilding Number: BLD-02022 Building Name: Psychiatric Wing Addition								
Туре	e of Service Prov	<u>ided</u>							
	Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
X	IntensiveCare	Inpatient Beds	8		Anesthesia				
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis		
X	Psychiatric Nursing	Inpatient Beds	30		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery		
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Central Plant		
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Support Services		
	Skilled Nursing	Inpatient Beds	0		Administration				
	Total Beds this Building		38						

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

Building Number: BLI	D-02023	Building N	lame: Lobby Addition		
Type of Service Prov	<u>rided</u>				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	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 N	Number: BLI	D-02025	Building N	lame: Po	wer Plant		
Type of	Service Prov	<u>ided</u>					
Nu	ursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
Into	ensiveCare	Inpatient Beds	0		Anesthesia		
1 1 -	ediatric/Adol cent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis
	sychiatric ursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
	ostetrical nte/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	X Central Plant
Into	ermediate are	Inpatient Beds	0		Dietetic	Nuclear Medicine	Support Services
Sk	tilled 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 N	lumber: BLD	D-02026	Building N	lame: Ra	diology Addition		
Type of \$	Service Provi	<u>ided</u>					
Nur	rsing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
Inte	ensiveCare	Inpatient Beds	0		Anesthesia		
Pec esc	diatric/Adol cent	Inpatient Beds	0	X	Clinical Lab	Obstetrical Recovery	Renal Dialysis
	/chiatric rsing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
	stetrical e/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Central Plant
Inte	ermediate re	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Support Services
Skil	lled Nursing	Inpatient Beds	0	X	Administration		
	al Beds this Iding		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 N	lumber: BLD	)-02027	Building N	Name: Co	nference Room Add	dition	
Type of S	Service Provi	<u>ided</u>					
Nur	rsing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
Inte	ensiveCare	Inpatient Beds	0		Anesthesia		
1 1	diatric/Adol cent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis
	/chiatric rsing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
_	stetrical e/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	X Central Plant
Inte	ermediate re	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Support Services
Skil	lled Nursing	Inpatient Beds	0		Administration		
	al Beds this Iding		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-02028	Building I	Name: Su	rgery Wing Addition		
Тур	e of Service Prov	<u>rided</u>					
X	Nursing	Inpatient Beds	14	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	Outpatient Surgery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Central Plant
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Support Services
	Skilled Nursing	Inpatient Beds	0		Administration		
	Total Beds this Building		14				

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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 Num	Building Number: BLD-05422 Building Name: CCU Addition								
Type of Ser	vice Provided								
Nursin	g Inpatient Beds	0	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
Intensi	veCare Inpatient Beds	0	X	Anesthesia					
Pediati escent	ric/Adol Inpatient Beds	0		Clinical Lab		Obstetrical Recovery		Renal Dialysis	
Psychi Nursin		0		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
Obstet Ante/P	rical Inpatient ostprtum Beds	0		Pharmaceutical		Emergency		Central Plant	
Interme Care	ediate Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services	
Skilled	Nursing Inpatient Beds	0		Administration					
Total B Buildin	eds this	0							

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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)

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Building	Building Number: BLD-05423 Building Name: Canopy Addition								
Type o	f Service Prov	<u>ided</u>							
N	ursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
In	ntensiveCare	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	Central Plant		
	ntermediate are	Inpatient Beds	0		Dietetic	Nuclear Medicine	Support Services		
S	killed Nursing	Inpatient Beds	0		Administration				
	otal Beds this uilding		0						

Report Status: **Data Last Update:** 12/17/2013 **Submission Date:** 12/17/2013 **Print Date:** 12/19/2013 1:50 PM

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<b>Building Number:</b>	BLD-02019 Build	ing Name: Origi	nal Building		
Medical / Surgical (In	nclude GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 43 Bed	Inpatient 10161 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpat Bed Days	
Perinatal (Exclude N	ewborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpat Days	
Pediatric		Intensive Care Nev Nursery	wborn	Intermediate Care	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpat Bed Days	
Intensive Care		Rehabilitation Center		Int. Care / Developmenta Disabled	lly
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0	Inpatient 0 Inpat Bed Days	
Coronary Care		Chemical Depende	ency		otal Beds this uilding Per
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		ervice 43

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Building Number:	BLD-02022	Building Name:	ychiatric Wing Addition		
Medical / Surgical (I	nclude GYN)	Acute Respirato	ry Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient 6	Inpatient 0 Days	Inpatient 30 Inpatient 59 Bed Days	960
Perinatal (Exclude N	lewborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inpatient (	Inpatient 0 Days	Inpatient 0 Inpatient Days	0
Pediatric		Intensive Care N Nursery	lewborn	Intermediate Care	
Inpatient 0 Bed	Inpatient Days	0 Inpatient (	Inpatient 0 Days	Inpatient 0 Inpatient Days	0
Intensive Care		Rehabilitation Center		Int. Care / Developmentally Disabled	
Inpatient 8 Bed	Inpatient 21 Days	58 Inpatient (	Inpatient 0 Days	Inpatient 0 Inpatient Days	0
Coronary Care		Chemical Depen	dency	Total Beds this Total Beds Building Per Building Pe	
Inpatient 0 Bed	Inpatient Days	0 Inpatient 6	Inpatient 0 Days	Unit Service	38

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Building Number:	BLD-02023	Building Name:	Lobby Addition			
Medical / Surgical (I	nclude GYN)	Acute Re	espiratory Care		Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient	0	Inpatient 0	Inpatient 0 Days
Perinatal (Exclude N	lewborn / GYN)	Burn			Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient		Inpatient 0	Inpatient 0 Days
Pediatric		Intensive Nursery	e Care Newborn		Intermediate Care	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilit Center	ation		Int. Care / Develope Disabled	mentally
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient	0	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemica	l Dependency		Total Beds this Building Per	Total Beds this Building Per
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient	t 0	Unit 0	Service 0

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Building Number:	BLD-02025	Building Nam	e: Powe	r Plant		
Medical / Surgical (	Include GYN)	Acute	Respiratory (	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatier Bed	nt 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (Exclude I	Newborn / GYN)	Burn			Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inpatier Bed	nt 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		Intensi Nurser	ve Care New y	born	Intermediate Care	
Inpatient 0 Bed	Inpatient Days	0 Inpatier Bed	nt 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabi Center	litation		Int. Care / Develop Disabled	mentally
Inpatient 0 Bed	Inpatient Days	0 Inpatier Bed	nt 0	Inpatient 0	Inpatient 0 Bed	Inpatient 0 Days
<b>Coronary Care</b>		Chemic	cal Depender	ncy	Total Beds this Building Per	Total Beds this Building Per
Inpatient 0 Bed	Inpatient Days	0 Inpatier Bed	nt 0	Inpatient 0 Days	₁ Unit	Service 0

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Building Number:	BLD-02026	Building Name	e: Radio	logy Addition		
Medical / Surgical (	Include GYN)	Acute I	Respiratory C	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatier Bed	nt 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (Exclude I	Newborn / GYN)	Burn			Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inpatier Bed	nt 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		Intensi Nurser	ve Care Newl y	born	Intermediate Care	
Inpatient 0 Bed	Inpatient Days	0 Inpatier Bed	nt 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabi Center	litation		Int. Care / Develop Disabled	mentally
Inpatient 0 Bed	Inpatient Days	0 Inpatier Bed	nt 0	Inpatient 0	Inpatient 0 Bed	Inpatient 0 Days
<b>Coronary Care</b>		Chemic	cal Depender	псу	Total Beds this Building Per	Total Beds this Building Per
Inpatient 0 Bed	Inpatient Days	0 Inpatier Bed	nt 0	Inpatient 0	Unit 0	Service 0

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Building Number:	BLD-02027	Buildin	ng Name: Conf	erence Room Addition		
Medical / Surgical (	Include GYN)		Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days		Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (Exclude I	Newborn / GYN)		Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient Days		Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0
Pediatric			Intensive Care Nev Nursery	wborn	Intermediate Care	
Inpatient 0 Bed	Inpatient Days		Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care			Rehabilitation Center		Int. Care / Develop Disabled	mentally
Inpatient 0 Bed	Inpatient Days		Inpatient 0 Bed	Inpatient 0	Inpatient 0 Bed	Inpatient 0 Days
<b>Coronary Care</b>			Chemical Depende	ency	Total Beds this Building Per	Total Beds this Building Per
Inpatient 0 Bed	Inpatient Days	<b>I</b>	Inpatient 0 Bed	Inpatient 0 Days	Unit 0	Service 0

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Building Number:	BLD-02028	Building Name:	Surgery Wing Addition		
Medical / Surgical (I	nclude 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 N	lewborn / 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 / Develop Disabled	mentally
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 14 Bed	Inpatient 27 Days	Inpatient Bed	0 Inpatient 0 Days	Unit 14	Service 14

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Building Number:	BLD-05422	Buildin	g Name: CCU	Addition		
Medical / Surgical (I	nclude GYN)		Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days		Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (Exclude N	lewborn / GYN)	I	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	II	Inpatient 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric			Intensive Care New Nursery	vborn	Intermediate Care	
Inpatient 0 Bed	Inpatient Days		Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care			Rehabilitation Center		Int. Care / Develop Disabled	mentally
Inpatient 0 Bed	Inpatient Days		Inpatient 0 Bed	Inpatient 0	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		(	Chemical Depende	ency	Total Beds this Building Per	Total Beds this Building Per
Inpatient 0 Bed	Inpatient Days		Inpatient 0 Bed	Inpatient 0 Days	Unit 0	Service 0

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Building Number:	BLD-05423 Buildi	ing Name: Cand	ppy Addition	
Medical / Surgical (Inc	lude 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 Ne	wborn / 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	vborn	Intermediate Care
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0	Inpatient 0 Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / Developmentally Disabled
Inpatient 0	Inpatient 0 Days	Inpatient 0	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