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

Facility Number:	12112	
Facility Name:	Temple Community Hospital	
Address:	235 N. Hoover St.	
City:	Los Angeles	
		_
Hospital Owner/Lic	rensee: Temple Community Hospital/Herbert Needman	
Year of Rep	porting: 2013	
Contact 1 e-mail Ac	ddress:	
Contact 2 e-mail Ac	ddress:	
Contact 3 e-mail Ad	ldress::	
Name of Sub	omitter: Russel Tyner	
Submission	n Date: 12/19/2013 4:06:09 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	g Extension Date	Anticipated Completion Date
BLD- 02152	Acute Care I	235 N. Hoover St.	Retrofit	SPC2	01/01/2016	10/01/2015
BLD- 02153	Acute Care II	235 N. Hoover St.	Retrofit	SPC2	01/01/2020	09/01/2019
BLD- 05506	Lobby	235 N. Hoover St.	Retrofit	SPC2	01/01/2017	03/01/2016

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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-02152	Building Name:	Acute Care I			
Type of Service Prov	<u>rided</u>			_		
X Nursing	Inpatient Beds	72 Inpatient 6873 Days	X Surgical	Obstetrical Recovery		
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	X Anesthesia	Newborn/ WellBaby		
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	X Clinical Lab	Emergency		
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine		
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	X Pharmaceutical Dietetic	Rehabilitation Therapy		
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration X Support	Renal Dialysis		
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Services Obstetrical	Outpatient Surgery		
		Total Beds this Building 72	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-02153	Building Name:	Acute Care II			
Type of Service Prov	ided			_		
X Nursing	Inpatient 6 Beds	6 Inpatient 4944 Days	X Surgical	Obstetrical Recovery		
X IntensiveCare	Inpatient 1 Beds	2 Inpatient Days 1088	Anesthesia	Newborn/ WellBaby		
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	X Clinical Lab	Emergency		
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	X Radiological/ Imaging	Nuclear Medicine		
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical X Dietetic	Rehabilitation Therapy		
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis		
X Skilled Nursing	Beds	0 Inpatient Days 3301	X Support Services Obstetrical	Outpatient Surgery		
	Tota Build	Beds this 98	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-05506	Building Name:	Lobby	
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	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 Beds this Building	Cesarean/Deliv	Central Plant

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

Building Number:	BLD-02152	Building Name: Acu	te Care I		
Medical / Surgical ((Include GYN)	Acute Respiratory	∕ Care	Acute Psychiatric	
Inpatient 72 Bed	Inpatient 6873 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse l	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 Ne 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	72	72

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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-02153	Building Name: Acut	e Care II		
Medical / Surgical (I	nclude GYN)	Acute Respiratory	Care	Acute Psychiatric	
	Inpatient 4944 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	lewborn / GYN)	Burn		Skilled Nursing	
	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 20 Bed	Inpatient 3301 Days
Pediatric		intensive Care Nev Nursery	wborn	Intermediate Card	
	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 544 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 544 Days	Inpatient 0 Bed	Inpatient 0 Days	98	98

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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)

Medical / Surgical (Include GYN) Acute Respiratory Care Acute Psychiatric Inpatient	Building Number:	BLD-05506 B	uilding Name: Lobb	ру		
Perinatal (excluse Newborn / GYN) Burn Skilled Nursing	Medical / Surgical	(Include GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Inpatient In					•	
Bed Days Bed Days Pediatric intensive Care Newborn Nursery Intermediate Card Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Days Intensive Care Rehabilitation Center Int. Care / development Disabled Inpatient 0 Inpatient 0 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 0 0	Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 0 0 0 0 0 0 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 0 0 0 0 0 0 0 0						
Intensive Care Rehabilitation Center Inpatient O Inpatient O Days Days Bed Days Days Days Days Int. Care / development O Inpatient O Inpatient O Inpatient O Days O Days O Days O O O O O O O O O	Pediatric			vborn	Intermediate Card	
Center Disabled						
Coronary Care Chemical Dependency Total Beds this Building Per Service Service	Intensive Care					nent
Dependency Building Per Unit Building Per Service Inpatient 0 Inpatient 0 Inpatient 0 0 0 0						
Inpatient 0 Inpatient 0 Inpatient 0 0 0	Coronary Care				Building Per	Building Per
					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-02152	Acute Care I	Retrofit
BLD-02153	Acute Care II	Retrofit
BLD-02154	Administrative	Retrofit
BLD-05506	Lobby	Retrofit
BLD-05507	Entry Canopy / Porte Cochere	Remain

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port Year: 20	013 12112	Temple C	Community Ho	ospital	L	os Angeles		Page:15 of 26
	eral acute care h ion 130061(c)(4)	ospital in	patient servi	ce that is provided	in any g	enaral acute care h	ospital bu	ilding that is rated
Building Number	r: BLD-02152	Building	Name: Ad	cute Care I				
Type of Serv	vice Provided							
			X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	Nursing		X	Anesthesia				
	IntensiveCar	e				Obstetrical Recovery		Renal Dialysis
Г	Pediatric/Add	ol	X	Clinical Lab				Outpatient
L.	escent			Radiological/		Newborn/ WellBaby		Surgery
	Psychiatric Nursing		X	Imaging Pharmaceutical		Emergency	X	Central Plant
Г	Obstetrical			Thaimaceutical			<u></u>	
_	Ante/Postprtu	um		Dietetic		Nuclear Medicine		Support Services
	Intermediate Care			Administration				
Г	Skilled Nursii	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-02153	Building Name:	Acute Care II								
Type of Service Provided											
		×	Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy					
X	Nursing		Anesthesia								
X	IntensiveCare	_	_	Obstetrical Recovery		Renal Dialysis					
	Pediatric/Ado	ı E	Clinical Lab			Outpatient					
		×	Radiological/ Imaging	Newborn/ WellBaby		Surgery					
	Psychiatric Nursing		Pharmaceutical	Emergency	X	Central Plant					
	Obstetrical Ante/Postprtu	m		Nuclear	Х	Support					
	o, r cospita	··· ×	Dietetic	Medicine		Services					
	Intermediate Care		Administration								
Γχ	Skilled Nursin	a	Administration								
X	Skilled Nursin	g									

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

Building Number:	BLD-05506	Building Name:	Lobby			
Type of Service	e Provided					
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	Nursing		Anesthesia			
	IntensiveCare			Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol		Clinical Lab			Outpatient
	escent		Radiological/	Newborn/ WellBaby	Ш	Surgery
	Psychiatric Nursing		Imaging Pharmaceutical	Emergency		Central Plant
	Obstetrical	L	Pharmaceutical	Lineigency		Central Plant
	Ante/Postprtur	m [Dietetic	Nuclear Medicine	X	Support Services
	Intermediate		_			
Ш	Care		Administration			
	Skilled Nursing	g				

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

Building Numbe	er: BLD-02152	Building Na	me: Acute Care I			
Configuration	: N/A					
Type of Service Provided						
X	Nursing	X	Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare	X	Anesthesia	Obstetrical		Renal Dialysis
	Pediatric/Adol escent	X	Clinical Lab	Recovery		
	Psychiatric Nursing		Radiological/ Imaging	Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum	X	Pharmaceutical	Emergency	X	Central Plant
	Intermediate		Dietetic	Emergency		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 Number:	BLD-02153	Building Na	me: Acute Care II				
Configuration:	N/A						
Type of Service	ce Provided						
X	Nursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X I	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent	X	Clinical Lab		Recovery		
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical	П	Emergency	X	Central Plant
	ntermediate Care	X	Dietetic				0
	Skilled Nursing		Administration		Nuclear Medicine	X	Support Services

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

Building Number:	BLD-02154	Building Na	me: Administrative			
Configuration:	N/A					
Type of Service	e Provided					
N	ursing		Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
In	tensiveCare		Anesthesia	Obstetrical		Renal Dialysis
	ediatric/Adol scent	X	Clinical Lab	Recovery		
	sychiatric ursing		Radiological/ Imaging	Newborn/ WellBaby		Outpatient Surgery
	bstetrical nte/Postprtum		Pharmaceutical	Emergency		Central Plant
	termediate are		Dietetic			
	killed 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-05506	Building Na	me: Lobby				
Configuration:	N/A						
Type of Service	e Provided						
	lursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Ir	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol scent		Clinical Lab		Recovery		
	Psychiatric Jursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical ante/Postprtum		Pharmaceutical	П	Emergency	П	Central Plant
	ntermediate Care		Dietetic				
	Skilled Nursing		Administration		Nuclear Medicine	X	Support Services

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

Building Number:	Building Number: BLD-05507 Building Name: Entry Canopy / Porte Cochere									
Configuration:	N/A									
Type of Service	ce Provided									
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
I	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis			
1 1	Pediatric/Adol escent		Recovery Clinical Lab							
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant			
	ntermediate		Dietetic		e.gee,		ooman riam			
	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)

Building Number: BL	D-02154	Building N	Name: Administrative		
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	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	X Support Services
Skilled Nursing	Inpatient Beds	0	X Administration		
Total Beds this Building		0			

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

Building	g Number: BLD	D-05507	Building Nam	ne: Er	ntry Canopy / Porte Co	chere	
Type o	of Service Prov	<u>ided</u>					
	lursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
Ir	ntensiveCare	Inpatient Beds	0		Anesthesia		
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
_	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Central Plant
	ntermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Support Services
S	Skilled Nursing	Inpatient Beds	0		Administration		
	otal Beds this Building		0				

Report Status: **Data Last Update**: 12/19/2013 **Submission Date**: 12/19/2013 **Print Date**: 12/21/2013 1:50 PM

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

Building Number:	BLD-02154	Building Name:	Administrative		
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	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	on	Int. Care / Developr Disabled	mentally
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical De	ependency	Total Beds this Building Per	Total Beds this Building Per
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	¬ Unit	Service 0

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

Building Number:	BLD-05507	Building Name:	Entry Canopy /	Porte Cochere		
Medical / Surgical (Include GYN)		Acute Re	Acute Respiratory Care		Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days		npatient 0	Inpatient 0 Days
Perinatal (Exclude N	lewborn / GYN)	Burn		S	Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days		npatient 0	Inpatient 0 Days
Pediatric		Intensive Nursery	Intensive Care Newborn Nursery		Intermediate Care	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days		npatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilita Center	ation		nt. Care / Developr Disabled	nentally
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days		npatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical	Chemical Dependency		Total Beds this Building Per	Total Beds this Building Per
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days		Unit 0	Service 0