Report Year: 2013 12140 Valley Presbyterian Hospital Van Nuys Page:1 of 40

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

		_
Facility Number:	12140	
Facility Name:	Valley Presbyterian Hospital	
Address:	15107 Vanowen St.	
City:	Van Nuys	
Hospital Owner/Lic	ensee: Valley Presbyterian Hospital	
Year of Rep	porting: 2013	
Contact 1 e-mail Ac	ldress:	
Contact 2 e-mail Ac	ldress:	
Contact 3 e-mail Ad	dress::	
Name of Sub	omitter: Gayathri S Jith	
Submission	Date: 10/30/2013 9:25:59 AM	

Report Year: 2013 12140 Valley Presbyterian Hospital Van Nuys Page:2 of 40

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- 02169	Base Building (Main Hospital)	15107 Vanowen St.	Retrofit	SPC2	01/01/2015	10/17/2014
BLD- 05197	South Tower	15107 Vanowen St.	Retrofit	SPC2	01/01/2015	04/28/2014

2013

12140

Valley Presbyterian Hospital

Van Nuys

Page:3 of 40

For each building which is planned for rebuild, retrofit or replacement, provide the project numbers, per Section 130061(c)(1)(C). The projected construction start date or dates and projected Completion date or dates per Section 130061(c)(1)(D) and the most recent project status and approvals per Section 130061(c)(1)(E).

Building No: BLD-02169	Base Building (Main Hospital)		Retrofit/Replacer Project:	nent Haz	us-Submi	tted
Facility Project Sub <u>Number Number Num</u>	Scope	Date Plan <i>i</i>	Approved Proj. Start Date Date	Proj. Completed Date	Status	CEQA Review
12140 P-2011- 0 00551		11/3/2011 12:00:00 AM	12/14/2012 12:00:00 AM		FIEL	No
12140 P-2012- 0 01321		6/25/2012 12:00:00 AM	9/7/2012 12:00:00 AM		PEND	No
Building No: BLD-05197	South Tower		Retrofit/Replacer Project:	nent Haz	us-Submi	tted
Building No: BLD-05197 Facility Project Sub Number Number Num	South Tower Scope	Date Plan in	Project:	<u> </u>		CEQA Review
Facility Project Sub			Project: Approved Proj. Start	Proj. Completed		 CEQA

Report Year: 2013 12140 Valley Presbyterian Hospital Van Nuys Page:4 of 40

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-02169		Building Na	me:	Bas	e Building (Main Hospital)		
Type of Service Prov	<u>rided</u>							
X Nursing	Inpatient Beds	86	Inpatient Days	10819		X Surgical		Obstetrical Recovery
IntensiveCare	Inpatient Beds	0	Inpatient Days	0		X Anesthesia		Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0	Inpatient Days	0		Clinical Lab	X	Emergency
Psychiatric Nursing	Inpatient Beds	0	Inpatient Days	. 0		Radiological/ Imaging		Nuclear Medicine
X Obstetrical Ante/Postprtum	Inpatient Beds	8	Inpatient Days	3000		X Pharmaceutical X 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	X	Outpatient Surgery
		Total E Buildin	Beds this	94		Cesarean/Deliv		Central Plant

Report Year: 2013 12140 Valley Presbyterian Hospital Van Nuys Page:5 of 40

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-05197	Building Name:	South Tower	
Type of Service Prov	<u>ided</u>			
X Nursing	Inpatient Beds	23 Inpatient 4005 Days	Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
X Pediatric/Adol escent	Inpatient Beds	25 Inpatient Days 3328	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	Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0 Otal Beds this 48	X Support Services Obstetrical Cesarean/Deliv	Outpatient Surgery
		Building	0000.00.1120.11	Central Plant

2013

12140

Valley Presbyterian Hospital

Van Nuys

Page:6 of 40

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

Building Number:	BLD-02169	Building Name:	Base Building (Main Hospital)		
Medical / Surgical (Include GYN)	Acute Respira	atory Care	Acute Psychiatric	
Inpatient 86 Bed	Inpatient 1081 Days 9	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 8 Bed	Inpatient 3000 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		Int. Care / developm 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	94	94

2013

12140

Valley Presbyterian Hospital

Van Nuys

Page:7 of 40

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

Building Number: BLD	0-05197 Buildin	g Name: Sou	th Tower		
Medical / Surgical (Include	de GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 6 Inpat Bed Days		Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse Newbo	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 Ne Nursery	wborn	Intermediate Card	
Inpatient 25 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 17 Bed	Inpatient 4005 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	48	48

Report Year: 2013 12140 Valley Presbyterian Hospital

Van Nuys

Page:8 of 40

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-02169	Base Building (Main Hospital)	Retrofit
BLD-02170	Service Building	Remain
BLD-02171	Administrative Expansion	Remain
BLD-02172	Ancillary Inpatient East	Remain
BLD-02174	Elevator Lobby East	Remain
BLD-02175	Elevator Lobby West	Remain
BLD-02638	Ancillary Inpatient West	Remain
BLD-02789	Inpatient Tower	Remain
BLD-03124	Administrative Expansion (North)	Remain
BLD-05197	South Tower	Retrofit

Report Year: 2013 12140 Valley Presbyterian Hospital Van Nuys

Page:9 of 40

2013

12140

Valley Presbyterian Hospital

Van Nuys

Page:10 of 40

2013

12140

Valley Presbyterian Hospital

Van Nuys

Page:11 of 40

12140

Valley Presbyterian Hospital

Van Nuys

Page:12 of 40

port Year: 201	12140 Valley	Presbyterian Hospital	Van Nuys	Page:13 of 40
Report any gene SPC-1 per Section		inpatient service that is provid	ed in any genaral acute care	hospital building that is rated
Building Number:	BLD-02169 Buildi	ing Name: Base Building (Mai	n Hospital)	
Type of Servi	ce Provided			
		X Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X	Nursing	X Anesthesia		
	IntensiveCare		Obstetrical Recovery	Renal Dialysis
	Pediatric/Adol escent	Clinical Lab	Newborn/	X Outpatient Surgery
	Psychiatric	Radiological/ Imaging	WellBaby	
	Nursing	X Pharmaceutical	X Emergency	Central Plant
X	Obstetrical Ante/Postprtum	X Dietetic	Nuclear Medicine	X Support Services
	Intermediate Care	Administration		
	Skilled Nursing			

Report Year:	2013	12140		Valley Presbyterian Hospital		Van Nuys	Page:14 of 40
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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-05197 Build	ling Name: South	h Tower				
Type of Service	e Provided	. –					
		Si	urgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
X	Nursing	Al Al	nesthesia				
	IntensiveCare			Ш	Obstetrical Recovery		Renal Dialysis
X	Pediatric/Adol escent		Clinical Lab		Newborn/		Outpatient Surgery
	Dovahiatria		Radiological/ maging		WellBaby		ou.go.y
	Psychiatric Nursing		Pharmaceutical		Emergency		Central Plant
	Obstetrical Ante/Postprtum				Nuclear	X	Support
			Dietetic		Medicine		Services
	Intermediate Care		dministration				
			aministration				
	Skilled Nursing	I					

Report Year: 2013 12140 Valley Presbyterian Hospital Van Nuys Page:15 of 40

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-02169 Building Name: Base Building (Main Hospital)								
Configuration	: N /A							
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	X	Outpatient Surgery	
X	Obstetrical Ante/Postprtum	X	Pharmaceutical	X	Emergency		Central Plant	
П	Intermediate	X	Dietetic		Linergency		Ochtiai Flant	
	Care Skilled Nursing		Administration		Nuclear Medicine	X	Support Services	

Report Year:	2013	12140	Valley Presbyterian Hospital	Van Nuys	Page:16 of 40
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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-02170	Building Na	me: Service Buildin	g			
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		Linergency		Contrain lant
	Care Skilled Nursing		Administration	X	Nuclear Medicine		Support Services

Report Year: 2013 12140 Valley Presbyterian Hospital Van Nuys Page:17 of 40

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-02171	Building Na	me: Administrative	Expansion		
Configuration	: N/A					
Type of Service Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	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	_		Constant land
	Care Skilled Nursing	X	Administration		Nuclear Medicine	Support Services

Report Year: 2013 12140 Valley Presbyterian Hospital Van Nuys Page:18 of 40

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-02172	Building Na	me: Ancillary Inpa	tient East			
Configuration:	N/A						
Type of Service Provided							
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing	Х	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
X	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant
	Intermediate		Dietetic		Lineigency		Contrair lant
	Care Skilled Nursing		Administration		Nuclear Medicine	X	Support Services

Report Year:	2013	12140	Valley Presbyterian Hospital	Van Nuys	Page:19 of 40
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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-02174	Building Nar	me: Elevator Lobby	East			
Configuration:	N/A						
Type of Servic	e Provided						
N	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Ir	ntensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Recovery		
	sychiatric lursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	bstetrical nte/Postprtum		Pharmaceutical		Emergency		Central Plant
	ntermediate		Dietetic		Lineigency		Comman Ham
	are killed Nursing		Administration		Nuclear Medicine	X	Support Services

Report Year: 2013 12140 Valley Presbyterian Hospital Van Nuys Page:20 of 40

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-02175	Building Na	me: Elevator Lobb	y West			
Configuration:	N/A						
Type of Service Provided							
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	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		Emergency		Contrain land
	Care Skilled Nursing		Administration		Nuclear Medicine	X	Support Services

Report Year: 2013 12140 Valley Presbyterian Hospital Van Nuys Page:21 of 40

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

Building Number	r: BLD-02638	Building Na	me: Ancillary Inpat	tient West			
Configuration:	N/A						
Type of Serv	ice Provided						
	Nursing		Surgical	X	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia	X	Obstetrical		Renal Dialysis
	Pediatric/Adol escent	X	Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical	П	Emergency	П	Central Plant
	Intermediate		Dietetic				
	Care Skilled Nursing		Administration		Nuclear Medicine	X	Support Services

Report Year:	2013	12140	Valley Presbyterian Hospital	Van Nuys	Page:22 of 40
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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-02789	Building Na	me: Inpatient Towe	er		
Configuration:	N/A					
Type of Service	e Provided					
X N	ursing		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X In	tensiveCare	X	Anesthesia	X	Obstetrical Recovery	Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Recovery	
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
	bstetrical nte/Postprtum		Pharmaceutical		Emergency	Central Plant
	termediate		Dietetic		Lineigeney	Contract Tall
	are killed Nursing		Administration		Nuclear Medicine	Support Services

Report Year: 2013 12140 Valley Presbyterian Hospital Van Nuys Page:23 of 40

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-03124 Building Name: Administrative Expansion (North)									
Configuration:	N/A									
Type of Servi	ice Provided									
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis			
	Pediatric/Adol escent		Clinical Lab		Recovery					
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant			
	Intermediate		Dietetic							
	Care Skilled Nursing	X	Administration	Ш	Nuclear Medicine	X	Support Services			

Report Year: 2013 12140 Valley Presbyterian Hospital Van Nuys Page:24 of 40

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-05197	Building Na	me: South Tower			
Configuration	: N /A					
Type of Serv	vice Provided					
X	Nursing		Surgical	Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
	IntensiveCare		Anesthesia	Obstetrical		Renal Dialysis
X	Pediatric/Adol escent		Clinical Lab	Recovery		
	Psychiatric Nursing		Radiological/ Imaging	Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical	Emergency		Central Plant
	Intermediate		Dietetic	Linergency		Contrain lant
	Care Skilled Nursing		Administration	Nuclear Medicine	X	Support Services

Report Year: 2013 12140 Valley Presbyterian Hospital Van Nuys Page 12140	Page:25 of 40
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Building Number: BL	D-02170	Building N	Name: Service Building				
Type of Service Provided							
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
IntensiveCare	Inpatient Beds	0	Anesthesia				
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis		
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery		
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	X Central Plant		
Intermediate Care	Inpatient Beds	0	Dietetic	X Nuclear Medicine	Support Services		
Skilled Nursing	Inpatient Beds	0	Administration				
Total Beds this Building		0					

Report Year: 2013 12140 Valley Presbyterian Hospital Van Nuys Page 12140 Page	Page:26 of 40
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Building	Number: BLD	-02171	Building Na	me: Ad	Iministrative Expansio	on	
Type of Service Provided							
N	lursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
☐ Ir	ntensiveCare	Inpatient Beds	0		Anesthesia		
1 1	ediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis
	sychiatric Iursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Inte/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Central Plant
	ntermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Support Services
s	killed Nursing	Inpatient Beds	0	X	Administration		
	otal Beds this building		0				

Report Year:	2013 12140	Valley Presbyterian Hospital	Van Nuys	Page:27 of 40
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Building	g Number: BLD	D-02172	Building N	lame: A	ncillary Inpatient East		
Type o	of Service Provi	<u>ided</u>					
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
II	ntensiveCare	Inpatient Beds	0		Anesthesia		
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum	Inpatient Beds	20		Pharmaceutical	Emergency	Central Plant
	ntermediate Care	Inpatient Beds	0	Ц	Dietetic	Nuclear Medicine	X Support Services
	Skilled Nursing	Inpatient Beds	0		Administration		
	Fotal Beds this Building		20				

Report Year: 2013 12140 Valley Presbyterian Hospital Van Nuys I	Page:28 of 40
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Building Number: BL	.D-02174	Building N	Name: Elevator Lobby East		
Type of Service Pro	<u>vided</u>				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

Report Year:	2013	12140	Valley Presbyterian Hospital	Van Nuys	Page:29 of 40
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Building Number: BL	D-02175	Building N	Name: Elevator Lobby West		
Type of Service Pro	<u>vided</u>				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

Report Year: 2013 12140 Valley Presbyterian Hospital Van Nuys Page:30 of 40

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

Buildi	ng Number: BLE	D-02638	Building I	Name: Ar	ncillary Inpatient Wes	t	
Type of Service Provided							
	Nursing	Inpatient Beds	0		Surgical	X Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare	Inpatient Beds	0		Anesthesia		
	Pediatric/Adol escent	Inpatient Beds	0	X	Clinical Lab	X 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		0				

Report Year:	2013	12140		Valley Presbyterian Hospital		Van Nuys	Page:31 of 40
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Buildi	Building Number: BLD-02789 Building Name: Inpatient Tower							
Туре	Type of Service Provided							
X	Nursing	Inpatient Beds	96		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
X	IntensiveCare	Inpatient Beds	62	X	Anesthesia			
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	X Obstetrical Recovery	Renal Dialysis	
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery	
X	Obstetrical Ante/Postprtum	Inpatient Beds	30		Pharmaceutical	Emergency	Central Plant	
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Support Services	
	Skilled Nursing	Inpatient Beds	0		Administration			
	Total Beds this Building		188					

Report Year:	2013	12140		Valley Presbyterian Hospital		Van Nuys	Page:32 of 40
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Building Number: BLD-03124 Building Name: Administrative Expansion (North)							
<u>Type</u>	of Service Prov	<u>ided</u>					
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare	Inpatient Beds	0		Anesthesia		
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
_	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	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				

Report Status: **Data Last Update:** 10/30/2013 **Submission Date:** 10/30/2013 **Print Date:** 10/31/2013 1:50 PM

2013

12140

Valley Presbyterian Hospital

Van Nuys

Page:33 of 40

Building Number:	BLD-02170 Buil	ding Name:	vice Building		
Medical / Surgical (In	clude GYN)	Acute Respirator	y Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	
Perinatal (Exclude No	ewborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	
Pediatric		Intensive Care No Nursery	ewborn	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 Days	Inpatient 0 Inpatient 0 Days	
Coronary Care		Chemical Depend	lency	Total Beds this Total Beds this Building Per Building Per	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Unit Service 0	

2013

12140

Valley Presbyterian Hospital

Van Nuys

Page:34 of 40

Building Number:	BLD-02171	Building	g Name: Admi	nistrative Expansion		
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 Newborn / GYN)			Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient Days		Inpatient 0 Bed	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	ncy	Total Beds this Building Per	Total Beds this Building Per
Inpatient 0 Bed	Inpatient Days	I	Inpatient 0	Inpatient 0 Days	Unit 0	Service 0

2013

12140

Valley Presbyterian Hospital

Van Nuys

Page:35 of 40

Building Number:	BLD-02172	Building Name:	Ancillary Inpatient	East		
Medical / Surgical (I	nclude GYN)	Acute Resp	ratory Care	Acute Psychiatr	ic	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	
Perinatal (Exclude I	Newborn / GYN)	Burn		Skilled Nursing	Skilled Nursing	
Inpatient 20 Bed	Inpatient 24 Days	Inpatient Bed	0 Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	
Pediatric		Intensive Ca Nursery	are Newborn	Intermediate Ca	re	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	
Intensive Care		Rehabilitatio Center	on	Int. Care / Devel Disabled	opmentally	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatient 0	Inpatient 0 Days	
Coronary Care		Chemical Do	ependency	Total Beds this Building Per	Total Beds this Building Per	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Unit 20	Service 20	

2013

12140

Valley Presbyterian Hospital

Van Nuys

Page:36 of 40

Building Number:	BLD-02174 Build	ing Name: Elevator Lobby East	
Medical / Surgical (I	nclude GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Days
Perinatal (Exclude N	lewborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Days
Pediatric		Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Days
Intensive Care		Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Days
Coronary Care		Chemical Dependency	Total Beds this Building Per Building Per
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0

2013

12140

Valley Presbyterian Hospital

Van Nuys

Page:37 of 40

Building Number:	BLD-02175	Building Name:	Elevator Lobby \	West		
Medical / Surgical (nclude GYN)	Acute Resp	oiratory Care	Ad	cute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inj Be	patient 0	Inpatient 0 Days
Perinatal (Exclude I	Newborn / GYN)	Burn		Sk	Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inp	patient 0	Inpatient 0 Days
Pediatric		Intensive C Nursery	are Newborn	In	termediate Care	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inp	patient 0	Inpatient 0 Days
Intensive Care		Rehabilitat Center	ion		t. Care / Developn isabled	nentally
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inp	patient 0	Inpatient 0 Days
Coronary Care		Chemical E	Dependency		otal Beds this uilding Per	Total Beds this Building Per
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days		nit 0	Service 0

2013

12140

Valley Presbyterian Hospital

Van Nuys

Page:38 of 40

Building Number:	BLD-02638 Bu	ilding Name: Anc	illary Inpatient West		
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 Depend	ency	Total Beds this Building Per Total Beds this Building Per	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Unit Service 0	

2013

12140

Valley Presbyterian Hospital

Van Nuys

Page:39 of 40

Building Number:	BLD-02789 Build	ing Name: Inpar	tient Tower		
Medical / Surgical (Inc	clude GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 96 Bed	Inpatient 25538 Days	Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days
Perinatal (Exclude Ne	wborn / GYN)	Burn		Skilled Nursing	
Inpatient 30 Bed	Inpatient 7785 Days	Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days
Pediatric		Intensive Care Nev Nursery	wborn	Intermediate Care	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 32 Bed	Inpatient 6662 Days		Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / Developm Disabled	nentally
Inpatient 30 Bed	Inpatient 5653 Days	Inpatient 0 Bed	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	Inpatient 0 Days	Unit 188	Service 188

2013

12140

Valley Presbyterian Hospital

Van Nuys

Page:40 of 40

Building Number:	BLD-03124 Build	ding Name: Admin	nistrative Expansion (Nor	th)	
Medical / Surgical (I	nclude GYN)	Acute Respiratory C	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Perinatal (Exclude N	lewborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Pediatric		Intensive Care Newl Nursery	born	Intermediate Care	
Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Intensive Care		Rehabilitation Center		Int. Care / Developmentally Disabled	
Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Coronary Care		Chemical Dependen	псу	Total Beds this Building Per Total Beds this Building Per	
Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days	Unit Service 0	