Office of Statewide Health Planning and Development Facilities Development Division

Senate Bill 499 (SB 499) Hospital Report

As submitted to California's Office of Statewide Health Planning and Development in accordance with Senate Bill 499 (SB 499) requirement for all general acute care hospitals with Structural Performance Category 1 (SPC-1) buildings to report annually with seismic safety compliance status, beds and services.

Provide the Hospital	Owner and Year of Report per Section 130061(e)
1 Tovide the Hospital	
Facility Number:	10619
Facility Name:	University of California Davis Medical Center
Address:	2315 Stockton Boulevard
City:	Sacramento
Hospital Owner/Lic	censee: 030000086 / Regents of the University of California
Year of Re	porting: 2014
Contact 1 e-mail A	ddress:
Contact 2 e-mail A	ddress:
Contact 3 e-mail Ad	ddress::
Name of Sub	bmitter: Doug Austin
Submission	n Date: 12/16/2014 3:56:58 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- 01434	North/South Wing	2315 Stockton Boulevard	Replace	SPC4	01/01/2020	01/01/2020

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

Building No: BLD-01434 North/South Wing			Retrofit/Rep Project:	placement	Yes-Su				
Facility Numbe	Project r Number	Sub Num	Scope	Date In	Plan Approved Date	Start Date	Project Complete d	Status	CEQA Review
10619	HS022883-0	0	9550900 SURGERY & EMERGENCY SERVICES PAVILION	10/29/2002 12:00:00 AM	10/4/2005 12:00:00 AM	10/04/2005		CLOS	No

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Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)								
Building Number: BLD-01434 Building Name: North/South Wing								
Type of Service Provi	<u>ided</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	Rehabilitat Therapy	ion			
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	X Administration	X Renal Dial	ysis			
Skilled Nursing	Inpatient	0 Inpatient Days 0	X Support Services	Outpatient Surgery				
	Beds	Total Beds this Building	'	Central Pla	ant			

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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-01434	North/South Wing	Replace
BLD-01436	East Wing (Tower)	Remain
BLD-01437	East Wing (Radiology)	Remain
BLD-01438	East Wing (Laundry)	Remain
BLD-01439	University Tower	Remain
BLD-01440	MRI	Remain
BLD-01441	Satellite Surgery Center	Remain
BLD-01442	Trauma Nursing Unit	Remain
BLD-01443	Emergency Room Expansion	Remain
BLD-01444	Central Plant	Remain
BLD-01445	Davis Tower	Remain
BLD-02841	Surgery and Emergency Services Pavilion	Remain
BLD-05213	Bulk Gas Canopy	Remain

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No proposed n	ew buildings	s to be const	ructed at this or another site.		

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The project replaced The plans replaced	ected date or dates or rebuild buildings ned uses of the buil or rebuild buildings	the building sas well. Ilding or build sas well.	ed, rebuilt, removed from will be removed from servelings to be removed from in the building or building	vice per Sect acute care s	ion 130061 (c)(2)(ervice per Section	A) and provide s		
Building I	Number: BLD-01	1434	North/South Wi	ng		Removal (01/01/2020	
Planned	Uses for the buildir	ng to be remo	oved from acute care serv	vice:				
Planned	use for building:							
Inpatient	Nursing IntensiveCare Pediatric/Adol escent Psychiatric Nursing Obstetrical Ante/Postprtum Intermediate Care Skilled Nursing	delivered in the	he building: Surgical Anesthesia Clinical Lab Radiological/ Imaging Pharmaceutical Dietetic Administration		Obstetrical Cesarean/Deliv Obstetrical Recovery Newborn/ WellBaby Emergency Nuclear Medicine	X	Rehabilitation Therapy Renal Dialysis Outpatient Surgery Central Plant Support Services	

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No data reporte	ed for Secti	on 130061(c))(2)(D).		

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No data reporte	d for Section	n 130061(c))(2)(D.		

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Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Re	ng or retrofitted building and any corr eplace" per Section 130061(c)(2)(E)	esponding
Building Number: BLD-01434 Building Name: North/South Wing Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted	huilding?	
Administration N/A		
Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Re		esponding
Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted Support Services N/A	building?	
Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Re		esponding
Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted Renal Dialysis N/A	building?	

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No data reporte	ed for Section	n 130061(c)	(3).		

ng Number:	BLD-01434 Buildi	ng Name: N	orth/South Wing			
pe of Servic	e Provided	ΙΠ	Surgical	Obstetrical		Rehabilitation
	Nursing			Cesarean/Deliv		Therapy
	IntensiveCare		Anesthesia	Obstetrical Recovery	X	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab	·		Outpatient
			Radiological/ Imaging	Newborn/ WellBaby		Surgery
Ш	Psychiatric Nursing		Pharmaceutical	Emergency		Central Plant
	Obstetrical Ante/Postprtum		Dietetic	Nuclear Medicine	X	Support Services
	Intermediate Care	X	Administration			
	Skilled Nursing					

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Report the final configuration of all bui requirements whether by retrofit or by per Section 130061(c)(5)	ldings on the hospital campus show replacement and the type of service	ring how each building will comply we that will be provided in each gene	with the SPC-5/NPC-4 or 5 ral actue care hospital building
Building Number: BLD-01434	Building Name: North/South Win	g	
Configuration: N/A			
Type of Service Provided			
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Anesthesia	Obstetrical Recovery	X Renal Dialysis
Pediatric/Adol escent	Clinical Lab	Recovery	
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Plant
Intermediate Care	Dietetic	□ Notes Maline	
Skilled Nursing	X Administration	Nuclear Medicine	X Support Services

				ach building will comply be provided in each geno		
: BLD-01436	Building Na	me: East Wing (Tow	er)			
N/A						
ce Provided						
Nursing	X	Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
ntensiveCare	X	Anesthesia		Obstetrical		Renal Dialysis
Pediatric/Adol escent		Clinical Lab		Recovery		
Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
Obstetrical Ante/Postprtum		Pharmaceutical		F		Control Blant
ntermediate		Dietetic		⊏mergency		Central Plant
Care Skilled Nursing		Administration		Nuclear Medicine	X	Support Services
	BLD-01436 N/A Ce Provided Nursing IntensiveCare Pediatric/Adol escent Psychiatric Nursing Dbstetrical Ante/Postprtum Intermediate Care	BLD-01436 Building Na N/A Ce Provided Aursing Aursing Pediatric/Adol escent Psychiatric Nursing Obstetrical Ante/Postprtum Intermediate Care	BLD-01436 Building Name: East Wing (Tow N/A N/A	BLD-01436 Building Name: East Wing (Tower) N/A The Provided X Surgical	BLD-01436 Building Name: East Wing (Tower) N/A Description Nursing X Surgical Obstetrical Cesarean/Deliv Anesthesia Obstetrical Recovery Pediatric/Adol Poscent Radiological/ Imaging Newborn/ WellBaby Description Description Description Administration Administration	BLD-01436 Building Name: East Wing (Tower) N/A

	ner by retrofit or by re				ach building will comply be provided in each geno		
ilding Number:	BLD-01437 B	uilding Na	me: East Wing (Radi	ology)			
Configuration:	N/A						
Type of Service	Provided						_
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
Inte	ensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	diatric/Adol cent		Clinical Lab		Recovery		
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	stetrical te/Postprtum		Pharmaceutical		F		Control Plant
Inte	ermediate		Dietetic		Emergency		Central Plant
Ca Ski	re illed Nursing	X	Administration		Nuclear Medicine	X	Support Services

port the final c	onfiguration of all buil	dings on the		ving how e	Sacramento ach building will comply be provided in each gen		
Section 1300		геріасеттеті	and the type of servic	e mat wiii i	be provided in each gen	erar actue c	are nospital building
ilding Number:	BLD-01438	Building Na	me: East Wing (Lau	ndry)			
Configuration:	N/A						
Type of Service	ce Provided						
	Nursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
lı	ntensiveCare	X	Anesthesia		Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Resorvery		
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		_		
	ntermediate		Dietetic		Emergency		Central Plant
	Care				Nuclear Medicine	X	Support Services
	Skilled Nursing		Administration				00.1.000

	2014 10619 al configuration of all buwhether by retrofit or by	ildings on the		wing how e			
Section 13		теріасетіеті	and the type of service	e mai wiii i	e provided in each gen	ierai actue d	are nospital building
ilding Numb	per: BLD-01439	Building Na	me: University Towe	er			
Configuration	n: N/A						
Type of Se	rvice Provided						
X	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	IntensiveCare		Anesthesia	X	Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		recovery		
	Psychiatric Nursing		Radiological/ Imaging	X	Newborn/ WellBaby		Outpatient Surgery
X	Obstetrical		Pharmaceutical				
	Ante/Postprtum				Emergency		Central Plant
	Intermediate Care		Dietetic		Nuclear Medicine	X	Support
	Skilled Nursing		Administration				Services

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port the final configuration of all build uirements whether by retrofit or by resection 130061(c)(5)			
Iding Number: BLD-01440	Building Name: MRI		
onfiguration: N/A	<u> </u>		
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	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Plant
Intermediate	Dietetic	Emergency	Central Flant
Care Skilled Nursing	Administration	Nuclear Medicine	Support Services
	Administration	Nuclear Medicine	

uirements whethe Section 130061(c		placement and th	ne type of service th	at will b	e provided in each gene	ral actue c	are hospital building
uilding Number:	BLD-01441 B	uilding Name:	Satellite Surgery Co	enter			
Configuration:	N/A						
Type of Service P	Provided						
Nurs	ing	Surg	jical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Inter	nsiveCare	Anes	sthesia		Obstetrical		Renal Dialysis
Pedi esce	atric/Adol ent	Clin	ical Lab		Recovery		
Psyc Nurs	chiatric ing	Rad Ima	iological/ ging		Newborn/ WellBaby		Outpatient Surgery
	eetrical /Postprtum	Pha	rmaceutical		Emergency		Central Plant
Inter	mediate	Diet	etic				
Care Skille	ed Nursing	Adm	ninistration	Ш	Nuclear Medicine		Support Services

ilding Number: BLD-01442 Building Name: Trauma Nursing Unit Configuration: N/A		uildings on the hospital campus show replacement and the type of service		
Type of Service Provided Nursing Surgical Obstetrical Rehabilitation Therapy IntensiveCare Anesthesia Obstetrical Recovery Pediatric/Adol Recovery Renal Dialysis Pediatric/Adol Clinical Lab Psychiatric Nursing Newborn/ WellBaby Outpatient Surgery Pharmaceutical Recovery Central Plant Intermediate Care Nuclear Medicine Support Services	3ection 130001(c)(3)			
Type of Service Provided Nursing Surgical Obstetrical Rehabilitation Therapy IntensiveCare Anesthesia Obstetrical Recovery Pediatric/Adol Recovery Renal Dialysis Pediatric/Adol Recovery Outpatient Surgery Psychiatric Nursing Radiological/ Imaging Newborn/ WellBaby Outpatient Surgery Pharmaceutical Recovery Central Plant Intermediate Care Nuclear Medicine Support Services	lding Number: BLD-01442	Building Name: Trauma Nursing	Unit	
Nursing Surgical Obstetrical Rehabilitation Therapy IntensiveCare Anesthesia Obstetrical Recovery Pediatric/Adol Recovery Renal Dialysis Pediatric/Adol Clinical Lab Radiological/ Imaging Newborn/ WellBaby Outpatient Surgery Pharmaceutical Emergency Central Plant Intermediate Care Nuclear Medicine Support Services	configuration: N/A			
IntensiveCare	Type of Service Provided			
Pediatric/Adol escent	Nursing	Surgical		
Pediatric/Adol escent	IntensiveCare	Anesthesia		Renal Dialysis
Psychiatric Nursing		Clinical Lab	Recovery	
Obstetrical Ante/Postprtum Intermediate Care Dietetic Nuclear Medicine Support Services				
Intermediate Care Dietetic Support Services		Pharmaceutical		Control Blood
Care Nuclear Medicine Support Services		Dietetic	Emergency	Central Plant
			Nuclear Medicine	
	Skilled Nursing	Administration		

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Report the final con requirements wheth per Section 130061	ner by retrofit or by r	dings on the l eplacement a	nospital campus showin and the type of service t	g how e hat will t	ach building will comply wo be provided in each gener	rith the SPC al actue car	-5/NPC-4 or 5 e hospital building
Building Number:	BLD-01443	Building Nan	ne: Emergency Room	Expans	ion		
Configuration:	N/A						
Type of Service	Provided						
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Inte	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	diatric/Adol cent		Clinical Lab		Recovery		
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	stetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant
Inte Ca	ermediate re		Dietetic		Nuclear Medicine		Support
Ski	illed Nursing		Administration				Services

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	ther by retrofit or by re			ach building will comply be provided in each gen		
uilding Number:	BLD-01444	Building Na	me: Central Plant			
Configuration:	N/A					
Type of Service	e Provided					
N	ursing		Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
In	itensiveCare		Anesthesia	Obstetrical Recovery		Renal Dialysis
	ediatric/Adol scent		Clinical Lab	Recovery		
	sychiatric ursing		Radiological/ Imaging	Newborn/ WellBaby		Outpatient Surgery
	bstetrical nte/Postprtum		Pharmaceutical	_	₩.	0 1 18
	itermediate		Dietetic	Emergency	X	Central Plant
	are			Nuclear Medicine		Support Services
S	killed Nursing		Administration			

uirements w	hether by retrofit or by				ach building will comply be provided in each gen		
Section 130	0061(c)(5)						
lding Numbe	er: BLD-01445	Building Na	me: Davis Tower				
onfiguration	: N/A						
Type of Serv	vice Provided						_
X	Nursing		Surgical	X	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	IntensiveCare		Anesthesia	X	Obstetrical Recovery		Renal Dialysis
X	Pediatric/Adol escent		Clinical Lab		. iosoro. y		
	Psychiatric Nursing	X	Radiological/ Imaging	X	Newborn/ WellBaby		Outpatient Surgery
X	Obstetrical Ante/Postprtum	X	Pharmaceutical				Central Plant
	Intermediate		Dietetic		Emergency		Central Plant
	Care			X	Nuclear Medicine	X	Support Services
	Skilled Nursing		Administration				

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	whether by retrofit or by				ach building will comply be provided in each geno		
Building Num	ber: BLD-02841	Building Na	me: Surgery and Eme	ergency S	Services Pavilion		
Configuration	on: N/A						
Type of Se	ervice Provided						
X	Nursing	X	Surgical		Obstetrical Cesarean/Deliv		ehabilitation nerapy
X	IntensiveCare	X	Anesthesia		Obstetrical Recovery	R	enal Dialysis
	Pediatric/Adol escent	X	Clinical Lab		Receivery		
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby		utpatient urgery
	Obstetrical Ante/Postprtum	X	Pharmaceutical	X	Emergency	c	entral Plant
	Intermediate Care	X	Dietetic		Nuclear Medicine	x s	Support
	Skilled Nursing	X	Administration		Tudosal medicine	Š	Services

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	ether by retrofit or by re				each building will comply be provided in each gen	
uilding Number:	BLD-05213	Building Na	me: Bulk Gas Canop	У		
Configuration:	N/A					
Type of Service	ce Provided					
	lursing		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
Ir	ntensiveCare		Anesthesia		Obstetrical Recovery	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery	
	Psychiatric Jursing		Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	Central Plant
	ntermediate		Dietetic			Contrain failt
	Care Skilled Nursing		Administration		Nuclear Medicine	Support Services

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Includ and S	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: BLC	D-01436	Building Na	me: Eas	st Wing (Tower)					
Туре	of Service Prov	<u>ided</u>								
X	Nursing	Inpatient Beds	117	X	Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy	
X	IntensiveCare	Inpatient Beds	10	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		127							

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Include information on and SPC-5 per Section		inpatient beds t	by type of Service provided by	buildings that are classified a	as SPC-2, SPC-3, SPC-4,
Building Number: BLI	D-01437	Building Na	ame: East Wing (Radiology)	
Type of Service Prov	<u>vided</u>				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	X 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			

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Include information of and SPC-5 per Sect		inpatient beds by	type of S	Service provided by b	uildin	gs that are classified a	s SPC-2	, SPC-3, SPC-4,
Building Number:	3LD-01438	Building Nan	ne: Ea	st Wing (Laundry)				
Type of Service P	rovided							
Nursing	Inpatient Beds	0	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
IntensiveCare	e Inpatient Beds	0	X	Anesthesia				
Pediatric/Ado escent	l Inpatient Beds	0		Clinical Lab		Obstetrical Recovery		Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
Obstetrical Ante/Postprtu	Inpatient m Beds	0		Pharmaceutical		Emergency		Central Plant
Intermediate Care	Inpatient Beds	0		Dietetic		Nuclear Medicine	X	Support Services
Skilled Nursin	ng Inpatient Beds	0		Administration				
Total Beds the Building	is	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	0-01439	Building N	ame: Un	niversity Tower							
Type o	Type of Service Provided											
X	Nursing	Inpatient Beds	64		Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
X II	ntensiveCare	Inpatient Beds	76		Anesthesia							
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	X Obstetrical Recovery		Renal Dialysis				
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	X Newborn/ WellBaby		Outpatient Surgery				
	Obstetrical Ante/Postprtum	Inpatient Beds	17		Pharmaceutical	Emergency		Central Plant				
	ntermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X	Support Services				
	Skilled Nursing	Inpatient Beds	0		Administration							
	Fotal Beds this Building		157									

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Include informa and SPC-5 per	ation on the number of Section 130061(e)	f inpatient beds b	y type of S	Service provided by	building	gs that are classified a	s SPC-2,	SPC-3, SPC-4,
Building Numb	er: BLD-01440	Building Na	ame: MF	RI				
Type of Serv	ice Provided							
Nursing	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		ehabilitation herapy
Intensive	eCare Inpatient Beds	0		Anesthesia				
Pediatric escent	c/Adol Inpatient Beds	0		Clinical Lab		Obstetrical Recovery	R	enal Dialysis
Psychia Nursing	tric Inpatient Beds	0	X	Radiological/ Imaging		Newborn/ WellBaby		outpatient urgery
Obstetri Ante/Po		0		Pharmaceutical		Emergency		entral Plant
Intermed Care	diate Inpatient Beds	0		Dietetic		Nuclear Medicine		upport ervices
Skilled N	Nursing Inpatient Beds	0		Administration				
Total Be 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	umber: BLE	D-01441	Building Name	e: Sa	tellite Surgery Center				
Type of S	Service Prov	ided							
Nurs	sing	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Inte	nsiveCare	Inpatient Beds	0		Anesthesia				
Ped esce	liatric/Adol ent	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery		Renal Dialysis
Psyc Nurs	chiatric sing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	stetrical e/Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency		Central Plant
Inte	rmediate e	Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services
Skill	led Nursing	Inpatient Beds	0		Administration				
Tota Build	al Beds this ding		0						

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	e information on t PC-5 per Section		npatient beds by ty	pe of S	Service provided by buil	ding	s that are classified as	SPC-2	, SPC-3, SPC-4,
Buildin	g Number: BLD)-01442	Building Name	: Tra	auma Nursing Unit				
Type	of Service Prov	ided							
	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		Support Services
	Skilled Nursing	Inpatient Beds	0		Administration				
	Total Beds this Building		0						

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Include information on and SPC-5 per Section		f inpatient beds	by type of Service provided by be	uildings that are classified a	as SPC-2, SPC-3, SPC-4,
Building Number: BLI	D-01443	Building N	lame: Emergency Room Expa	nsion	
Type of Service Prov	vided				
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	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

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	e information on t PC-5 per Section		npatient beds by ty	pe of S	Service provided by buil	ding	s that are classified as	SPC-	2, SPC-3, SPC-4,
Buildin	g Number: BLD	D-01444	Building Name	: Ce	entral Plant				
<u>Type</u>	of Service Prov	ided							
	Nursing	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare	Inpatient Beds	0		Anesthesia				
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery		Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency	X	Central Plant
	Intermediate Care	Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services
	Skilled Nursing	Inpatient Beds	0		Administration				
	Total Beds this Building		0						

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Include information on and SPC-5 per Section		of inpatient beds	by type of Service provided by b	uildings that are classified a	s SPC-2, SPC-3, SPC-4,
Building Number: BL	D-01445	Building N	lame: Davis Tower		
Type of Service Prov	vided				
X Nursing	Inpatient Beds	179	Surgical	X Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X IntensiveCare	Inpatient Beds	73	Anesthesia		
Pediatric/Adol escent	Inpatient Beds	36	Clinical Lab	X Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	X Radiological/ Imaging	X Newborn/ WellBaby	Outpatient Surgery
Obstetrical X Ante/Postprtum	Inpatient Beds	15	X Pharmaceutical	Emergency	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	X Nuclear Medicine	X Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		303			

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)								
Building Number: BLD-02841 Building Name: Surgery and Emergency Services Pavilion								
Type of Service Provided								
X Nursing	Inpatient Beds	12	X	Surgical	Obstetrical Cesarean/Deliv		abilitation rapy	
X IntensiveCare	Inpatient Beds	20	X	Anesthesia				
Pediatric/Adol escent	Inpatient Beds	0	X	Clinical Lab	Obstetrical Recovery	Ren	al Dialysis	
Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby		patient gery	
Obstetrical Ante/Postprtum	Inpatient Beds	0	×	Pharmaceutical	X Emergency	Cer	tral Plant	
Intermediate Care	Inpatient Beds	0	X	Dietetic	Nuclear Medicine	X Sup Ser	port vices	
Skilled Nursing	Inpatient Beds	0	X	Administration				
Total Beds this Building		32						

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)								
Building Number: BLD-05213 Building Name: Bulk Gas Canopy								
Type of Service Provided								
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy			
IntensiveCa	re Inpatient Beds	0	Anesthesia					
Pediatric/Adescent	ol Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis			
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery			
Obstetrical Ante/Postprt	Inpatient tum Beds	0	Pharmaceutical	Emergency	Central Plant			
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services			
Skilled Nursi	ing Inpatient Beds	0	Administration					
Total Beds t Building	his	0						

OSHPD FDD SB499 Report Data Last Update: 12/16/2014 Submission Date: 12/16/2014 Printed: 12/18/2014 6:25 AM

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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-01436 Building Name: East Wing (Tower)								
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric						
Inpatient 98 Inpatient 29098 Bed	Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days						
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing						
Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days						
Pediatric	Intensive Care Newborn Nursery	Intermediate Care						
Inpatient 4 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days						
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled						
Inpatient 6 Inpatient 0 Days	Inpatient 19 Inpatient 5213 Bed Days	Inpatient 0 Inpatient 0 Days						
Coronary Care	Chemical Dependency	Total Beds this Building Per Building Per						
Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	Unit Service 127 127						

Report Year: 2014 10619 University of California Davis Medical Center Page:40 of 50 Sacramento 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) BLD-01437 East Wing (Radiology) **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient Days Bed Days Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 Days Days Bed Bed Days Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days 0 0

Report Year: 2014 10619 University of California Davis Medical Center Page:41 of 50 Sacramento 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) BLD-01438 East Wing (Laundry) **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient Days Bed Days Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 Days Days Bed Bed Days Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days 0 0

Report Year: 2014 10619 University of California Davis Medical Center Page:42 of 50 Sacramento 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) BLD-01439 **University Tower Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient 64 Inpatient Inpatient 0 Inpatient Inpatient 16610 Days Days Bed Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient 4525 Inpatient 17 Inpatient Inpatient Inpatient Inpatient 0 0 Days Days Bed Bed Days Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient Inpatient 0 Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care Disabled** Center Inpatient 68 Inpatient 13834 Inpatient Inpatient Inpatient Inpatient 0 0 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days 157 157

Report Year: 2014 10619 University of California Davis Medical Center Page:43 of 50 Sacramento 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) BLD-01440 MRI **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient Days Bed Days Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 Days Days Bed Bed Days Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days 0 0

Report Year: 2014 10619 University of California Davis Medical Center Page:44 of 50 Sacramento 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) BLD-01441 Satellite Surgery Center **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient Days Bed Days Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 Days Days Bed Bed Days Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days 0 0

Report Year: 2014 10619 University of California Davis Medical Center Page:45 of 50 Sacramento 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) BLD-01442 Trauma Nursing Unit **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient Days Bed Days Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 Days Days Bed Bed Days Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days 0 0

Report Year: 2014 10619 University of California Davis Medical Center Page:46 of 50 Sacramento 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) BLD-01443 **Emergency Room Expansion Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient Days Bed Days Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 Days Days Bed Bed Days Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days 0 0

Report Year: 2014 10619 University of California Davis Medical Center Page:47 of 50 Sacramento 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) BLD-01444 Central Plant **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient Days Bed Days Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 Days Days Bed Bed Days Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days 0 0

Report Year: 2014 10619 University of California Davis Medical Center Page:48 of 50 Sacramento 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) BLD-01445 **Davis Tower Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient 179 Inpatient Inpatient 0 Inpatient Inpatient 61014 Days Days Bed Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient 15 2715 Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 Days Days Bed Bed Days Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient 12173 0 Inpatient 36 Inpatient 49 Inpatient Inpatient Inpatient 12172 Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care Disabled** Center Inpatient Inpatient 7332 Inpatient Inpatient Inpatient 24 Inpatient 0 0 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service

Inpatient

Days

0

303

303

0

Inpatient

Bed

Inpatient

Bed

Inpatient

Days

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Report Year: 2014 10619 University of California Davis Medical Center Page:50 of 50 Sacramento 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) BLD-05213 **Bulk Gas Canopy Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient Days Bed Days Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 Days Days Bed Bed Days Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days 0 0