## 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	al Owner and Year of Report per Section 130061(e)
Facility Number:	10750
Facility Name:	St. Joseph's Medical Center of Stockton
Address:	1800 North California Street
City:	Stockton
Hospital Owner/Lic	icensee: St. Joseph's Medical Center
Year of Re	eporting: 2014
Contact 1 e-mail A	Address:
Contact 2 e-mail A	Address:
Contact 3 e-mail Ac	ddress::
Name of Sul	ubmitter: Robert Omens
Submissio	on Date: 12/11/2014 10:17:14 AM

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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- 01898	Main Wing	1800 North California Street	Remove	N/A	01/01/2015	12/31/2014

Report Year: St. Joseph's Medical Center of Stockton 2014 10750 Stockton Page:3 of 79 No data reported for Section 130061(c)(1)(C).

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Provide the number of	Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)							
Building Number: BLI	Building Number: BLD-01898 Building Name: Main Wing							
Type of Service Prov	<u>ided</u>							
X Nursing	Inpatient Beds	27 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	X Renal Dialysis				
Skilled Nursing	Inpatient	0 Inpatient Days 0	Support Services	Outpatient Surgery				
	Beds	Total Beds this Building 27	Obstetrical Cesarean/Deliv	Central Plant				

Report Year: 2014 10750 St. Joseph's Medical Center of Stockton Stockton Page:5 of 79 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) Main Wing **Building Number: Building Name:** BLD-01898 Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient 27 Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Bed Days Bed Days Perinatal (excluse Newborn / GYN) **Skilled Nursing** Burn 0 Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Pediatric** intensive Care Newborn **Intermediate Card Nursery** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Days Bed Days Bed **Intensive Care** Rehabilitation Int. Care / development Center **Disabled** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Days Days Days Bed Bed Bed **Total Beds this** Total Beds this **Coronary Care** Chemical **Building Per Building Per** Dependency Unit Service Inpatient 27 27 Inpatient Inpatient Inpatient Bed Days Days Bed

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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-01898	Main Wing	Remove
BLD-01899	North Wing	Remain
BLD-01900	South Wing	Remain
BLD-01901	West Wing	Remain
BLD-01902	East Wing	Remain
BLD-01903	Administrative Wing	Remain
BLD-01904	Southeast Wing	Remain
BLD-01905	Cafeteria	Remain
BLD-01906	Heart Center	Remain
BLD-01907	Outpatient Surgery Building	Remain
BLD-01908	Cancer Center	Remain
BLD-01909	Hospital Main Entrance	Remain
BLD-01910	Emergency Generator Room	Remain
BLD-03367	Women & Children's Pavilion Building	Remain
BLD-03370	New Generator Building	Remain
BLD-03371	Pedestrian Corridor	Remain
BLD-03492	Elevator Addition	Remain
BLD-03493	Kitchen Remodel 1	Remain
BLD-03494	Kitchen Remodel 2	Remain
BLD-03495	Material Management Building	Remain

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	BLD-03496	Utilit	ty Plant		Remain	
		,				

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No proposed no	ew buildings	to be constr	ructed at this or another site.		

For the building or buildings to be replaced, rebuilt, removed from acute care service, provide the following: The projected date or dates the building will be removed from service per Section 130061 (c)(2)(A) and provide said date or dates for replaced or rebuild buildings as well. The planned uses of the building or buildings to be removed from acute care service per Section 130061(c)(2)(B) and provide said uses for replaced or rebuild buildings as well. The inpatient service currently delivered in the building or buildings per Section 130061(c)(20(C)							

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Provide the number of inpatient beds and patient days per unit for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)							
Building Nbr: BLD-01898 Building Name:	Main Wing	Year of Information: 2011					
Unit Type	lı .	nformation Current As Of:					
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric					
Inpatient 6 Patient 1550 Beds Days	Inpatient 0 Patient 0 Days	Inpatient 0 Patient Beds Days	0				
Perinatal (exclude Neborn/GYN)	Burn	Skilled Nursing					
Inpatient 0 Patient 0 Days	Inpatient 0 Patient 0 Days	Inpatient 21 Patient Beds Days	2987				
Pediatric	Intensive Care Newborn Nursery	Intermediate Care					
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Days	Inpatient 0 Patient Beds Days	0				
Intensive Care	Rehabilitation Center	Int. Care/Developmentally Dis	abled				
Inpatient 0 Patient 0 Days	Inpatient 0 Patient 0 Days	Inpatient 0 Patient Days	0				
Coronary Care	Chemical Dependency	Total Beds this					
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Days	Building per Unit	27				
Days	Day3	Total Beds this Building per Service	0				

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Provide the number of inpatient beds and patient days per unit for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)							
Building Nbr: BLD-01898 Building Name:	Main Wing	Year of Information: 2012					
Unit Type		Information Current As Of:					
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric					
Inpatient 6 Patient 1230 Days	Inpatient 0 Patient 0 Days	Inpatient 0 Patient Beds Days	0				
Perinatal (exclude Neborn/GYN)	Burn	Skilled Nursing					
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 21 Patient Beds Days	2987				
Pediatric	Intensive Care Newborn Nursery	Intermediate Care					
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0				
Intensive Care	Rehabilitation Center	Int. Care/Developmentally Disa	abled				
Inpatient 0 Patient 0 Days	Inpatient 0 Patient 0 Days	Inpatient 0 Patient Beds Days	0				
Coronary Care	Chemical Dependency	Total Beds this	27				
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Building per Unit	21				
·	•	Total Beds this Building per Service	27				

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Provide the number of inpatient beds and patient days per unit for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)							
Building Nbr: BLD-01898 Building Name:	Main Wing	Year of Information: 2013					
Unit Type	ı	Information Current As Of:					
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric					
Inpatient 27 Patient 4850 Days	Inpatient 0 Patient 0 Days	Inpatient 0 Patient Days	0				
Perinatal (exclude Neborn/GYN)	Burn	Skilled Nursing					
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0				
Pediatric	Intensive Care Newborn Nursery	Intermediate Care					
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Days	Inpatient 0 Patient Days	0				
Intensive Care	Rehabilitation Center	Int. Care/Developmentally Disa	abled				
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Days	Inpatient 0 Patient Days	0				
Coronary Care Inpatient 0 Patient 0	Chemical Dependency Inpatient 0 Patient 0	Total Beds this Building per Unit	27				
Beds Days	Beds Days	Total Beds this	27				
		Building per Service					

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Provide the number of inpatient beds and patient days per type of service for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)						
Building Nbr: BLD-01898 Building Name: Main Wing Year of Information: 2011						
Type of Services Provided				Information Current As Of:		
X Nursing	Inpatient 6 Beds	Patient 1550 Days	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
IntensiveCare	Inpatient 0 Beds	Patient 0 Days	Anesthesia	Obstetrical	X Renal Dialysis	
Pediatric/Adol escent	Inpatient 0 Beds	Patient 0 Days	Clinical Lab	Recovery		
Psychiatric Nursing	Inpatient 0 Beds	Patient 0 Days	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery	
Obstetrical Ante/Postprtum	Inpatient 0 Beds	Patient 0 Days	Pharmaceutical	Emergency [	Central Plant	
Intermediate Care	Inpatient 0 Beds	Patient 0 Days	Dietetic	Nuclear [ Medicine	Support Services	
X Skilled Nursing	Inpatient 21 Beds	Patient 2897 Days	Administration	.woulding	33.11.555	
Total Beds this B	Building per service	27				

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Prov	Provide the number of inpatient beds and patient days per type of service for the year of 2010, 2011 and 2012 for buildings to be removed from acute care services per Section 130061(c)(2)(D)						
Buil	ding Nbr: BLD-0	D1898 Building Name:	Year of Information:	2012			
Type of Services Of:							
X	Nursing	Inpatient 6 Beds	Patient 1230 Days	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
	IntensiveCare	Inpatient 0 Beds	Patient 0 Days	Anesthesia	Obstetrical	X Renal Dialysis	
	Pediatric/Adol escent	Inpatient 0 Beds	Patient 0 Days	Clinical Lab	Recovery	A Renal Dialysis	
	Psychiatric Nursing	Inpatient 0 Beds	Patient 0 Days	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery	
	Obstetrical Ante/Postprtum	Inpatient 0 Beds	Patient 0 Days	Pharmaceutic	cal Emergency	Central Plant	
	Intermediate Care	Inpatient 0 Beds	Patient 0 Days	Dietetic	Nuclear Medicine	Support Services	
X	Skilled Nursing	Inpatient 21 Beds	Patient 2897 Days	Administration			
	Total Beds this Bเ	uilding per service	27				

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	of inpatient beds and par vices per Section 130061	ient days per type of servic (c)(2)(D)	e for the year of 2010,	, 2011 and 2012 for buildin	gs to be removed
Building Nbr: BLD	-01898 Building Name:	Main Wing		Year of Information:	2013
Type of Services Provided	. Tallie			Information Current As Of:	
X Nursing	Inpatient 27 Beds	Patient 4850 Days	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient 0 Beds	Patient 0 Days	Anesthesia	Obstetrical	X Renal Dialysis
Pediatric/Adol escent	Inpatient 0 Beds	Patient 0 Days	Clinical Lab	Recovery	_ ^
Psychiatric Nursing	Inpatient 0 Beds	Patient 0 Days	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient 0 Beds	Patient 0 Days	Pharmaceutical	Emergency	Central Plant
Intermediate Care	Inpatient 0 Beds	Patient 0 Days	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient 0 Beds	Patient 0 Days	Administration		
Total Beds this	Building per service	27			

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No data reporte	d for whethe	er the genera	al acute care servi	ces and beds will	be relocated to a	new, existing o	retrofitted building a ace" per Section 130	and any
corresponding b	Juliuling Sites	or project i	idifibers for buildir	igs with a building	TRESOLUTION IN	ebalia of Repl	ace per decilon 130	001(c)(2)(L).

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Each hospital owner shall also report for each fact number of inpatient beds by type of unit and service.		ed from active care service, any net	change in the
Building Number: BLD-01898 Building Name:	Main Wing		
Will general acute care services and beds will be	relocated to a new, Existing or retrofitted	building?	
Nursing N/A			
Each hospital owner shall also report for each fact number of inpatient beds by type of unit and serving		ed from active care service, any net	change in the
Building Number: BLD-01898 Building Name:	Main Wing		
Will general acute care services and beds will be	relocated to a new, Existing or retrofitted	building?	
Renal Dialysis N/A		]	
Each hospital owner shall also report for each fact number of inpatient beds by type of unit and servi		ed from active care service, any net	change in the
Building Number: BLD-01898 Building Name:	Main Wing		
Will general acute care services and beds will be	relocated to a new, Existing or retrofitted	building?	
Medical/Surgical (Include GYN)		]	

eport any general	acute care hospital inpa		I Center of Stockton	genaral	Stockton acute care hospital	building t	Page:18 of 79
er Section 130061	(c)(4)		Tat to provided in any	gonara			
uilding Number:	BLD-01898 Buildir	g Name: M	ain Wing				
Type of Service	e Provided	. —					
			Surgical	Ш	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	Nursing		Anesthesia				
	IntensiveCare		, wiedwiedia		Obstetrical Recovery	X	Renal Dialysis
	Pediatric/Adol		Clinical Lab				Outpatient
	escent		Radiological/ Imaging		Newborn/ WellBaby		Surgery
	Psychiatric Nursing		Pharmaceutical		Emergency		Central Plant
	Obstetrical Ante/Postprtum		Dietetic		Nuclear Medicine		Support Services
			Dietetic				
	Intermediate Care		Administration				
	Skilled Nursing						

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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-01898	Building Name: Main Wing								
Configuration: Remove from GAC service by 1/1/2015									
Type of Service Provided									
X 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	Nuclear Medicine	Support						
Skilled Nursing	Administration	Nuclear Medicine	Services						

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	ner by retrofit or by r				ach building will comply voe provided in each gene				
Building Number:	BLD-01899	Building Nar	ne: North Wing						
Configuration: Remove from GAC service by 1/1/2030									
Type of Service	Provided								
X Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
Inte	ensiveCare		Anesthesia		Obstetrical Recovery	F	Renal Dialysis		
	diatric/Adol cent		Clinical Lab		Receivery				
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		Dutpatient Gurgery		
	estetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant		
Inte	ermediate re	X	Dietetic		Nuclear Medicine	X	Support		
Ski	illed Nursing		Administration				Services		

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Report the final cor requirements wheth per Section 130061	her by retrofit or by re	ngs on the placement	hospital campus showin and the type of service t	g how e hat will t	ach building will comply voe provided in each gene	vith the SPC-5/ ral actue care h	NPC-4 or 5 nospital building
Building Number:	BLD-01900 E	Building Nai	me: South Wing				
Configuration:	Remove from GAC	service by	1/1/2030				
Type of Service	Provided						
Nu	ursing	X	Surgical		Obstetrical Cesarean/Deliv		habilitation erapy
Int	tensiveCare	X	Anesthesia		Obstetrical Recovery	Re	nal Dialysis
	ediatric/Adol cent	X	Clinical Lab		receivery		
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		tpatient rgery
	ostetrical nte/Postprtum		Pharmaceutical		Emergency	□ Ce	ntral Plant
	termediate		Dietetic		Linergency		mar ran
Ca	are killed Nursing		Administration		Nuclear Medicine		upport ervices

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	er by retrofit or by rep				ach building will comply wit be provided in each genera				
Building Number:	BLD-01901 B	uilding Nar	ne: West Wing						
Configuration: Remove from GAC service by 1/1/2030									
Type of Service F	Provided								
X Nurs	sing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
Inter	nsiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis		
X Pedi esce	iatric/Adol ent		Clinical Lab		receivery				
Psyc Nurs	chiatric sing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	tetrical e/Postprtum	X	Pharmaceutical		Emergency		Central Plant		
Inter Care	rmediate e		Dietetic		Nuclear Medicine		Support		
Skill	ed Nursing	X	Administration				Services		

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)									
Building Number:	BLD-01902	Building Nar	ne: East Wing						
Configuration: Remove from GAC service by 1/1/2030									
Type of Service	Provided								
X Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
X Inte	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis		
	diatric/Adol cent		Clinical Lab		recovery				
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	estetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant		
Inte	ermediate ire		Dietetic	X	Nuclear Medicine	X	Support		
Ski	illed Nursing		Administration				Services		

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)									
Building Number: BLD-01903	Building Name: Administrative \	Wing							
Configuration: Remove from GAC service by 1/1/2030									
Type of Service Provided									
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy						
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal Dialysis						
Pediatric/Adol escent	Clinical Lab	reservery							
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery						
Obstetrical	Pharmaceutical								
Ante/Postprtum		Emergency	Central Plant						
Intermediate Care	Dietetic	Nuclear Medicine	Support						
Skilled Nursing	X Administration		Services						

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	er by retrofit or by r				ach building will comply wi be provided in each genera				
Building Number:	BLD-01904	Building Nar	me: Southeast Wing						
Configuration: Retrofit Conforming building to NPC 4 or NPC 5									
Type of Service	Provided								
Nur	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
X Inte	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis		
Peo	diatric/Adol ent		Clinical Lab		Recovery				
	vchiatric rsing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	stetrical e/Postprtum		Pharmaceutical	Х	Emergency		Central Plant		
Inte Car	ermediate e		Dietetic		Nuclear Medicine	X	Support		
Skil	lled Nursing		Administration				Services		

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)										
Building Number:	BLD-01905	Building Nar	ne: Cafeteria							
Configuration: Retrofit Conforming building to NPC 4 or NPC 5										
Type of Service	Provided									
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		ehabilitation herapy			
Inte	ensiveCare		Anesthesia		Obstetrical Recovery	R	enal Dialysis			
	diatric/Adol cent		Clinical Lab		recovery					
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		utpatient urgery			
	estetrical		Pharmaceutical							
An	te/Postprtum				Emergency	С	entral Plant			
Inte Ca	ermediate re	X	Dietetic		Nuclear Medicine		Support			
Ski	illed Nursing		Administration				Services			

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	ner by retrofit or by r				ach building will comply wi be provided in each genera				
Building Number:	BLD-01906	Building Nar	ne: Heart Center						
Configuration: Retrofit Conforming building to NPC 4 or NPC 5									
Type of Service	Provided								
Nui	rsing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
Inte	ensiveCare	X	Anesthesia		Obstetrical Recovery		Renal Dialysis		
	diatric/Adol cent		Clinical Lab		receivery				
	ychiatric rsing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	stetrical te/Postprtum		Pharmaceutical	Х	Emergency		Central Plant		
Inte	ermediate re		Dietetic		Nuclear Medicine		Support		
Ski	illed Nursing		Administration				Services		

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requirements wheth	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-01907	Building Nar	ne: Outpatient Surger	y Buildin	g				
Configuration: Retrofit Conforming building to NPC 4 or NPC 5									
Type of Service	Provided								
Nui	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
Inte	ensiveCare		Anesthesia		Obstetrical Recovery	R	Renal Dialysis		
	diatric/Adol cent		Clinical Lab		Recovery				
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	stetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant		
	ermediate		Dietetic		Lineigency		onidi i idili		
Car Ski	re lled Nursing		Administration		Nuclear Medicine		Support Services		
		l							

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	ner by retrofit or by r				ach building will comply woe provided in each gener				
Building Number:	BLD-01908	Building Nar	ne: Cancer Center						
Configuration: Retrofit Conforming building to NPC 4 or NPC 5									
Type of Service	Provided								
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy		
Inte	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis		
	diatric/Adol cent		Clinical Lab		Recovery				
	ychiatric rsing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	stetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant		
Inte	ermediate re		Dietetic		Nuclear Medicine		Support		
Ski	illed Nursing		Administration				Services		

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)									
Building Number:	BLD-01909	Building Nar	ne: Hospital Main Enti	rance					
Configuration: Retrofit Conforming building to NPC 4 or NPC 5									
Type of Service	Provided								
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		ehabilitation nerapy		
Inte	ensiveCare		Anesthesia		Obstetrical Recovery	R	enal Dialysis		
	diatric/Adol cent		Clinical Lab		Recovery				
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		utpatient urgery		
	ostetrical te/Postprtum		Pharmaceutical						
All	te/F Ostpitum		District		Emergency	C	entral Plant		
Into Ca	ermediate ire		Dietetic		Nuclear Medicine		Support Services		
Ski	illed Nursing	X	Administration				ervices		

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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-01910	Building Name	Emergency Genera	itor Roo	m				
Configuration: Retrofit Conforming building to NPC 4 or NPC 5									
Type of Service	Provided								
Nu	ırsing	s	urgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
Inte	ensiveCare	A	nesthesia		Obstetrical Recovery	i	Renal Dialysis		
	diatric/Adol cent		Clinical Lab						
	ychiatric Irsing		Radiological/ maging		Newborn/ WellBaby		Outpatient Surgery		
	ostetrical te/Postprtum	☐ F	Pharmaceutical		Emergency	X (	Central Plant		
	ermediate		Dietetic						
Ca	illed Nursing	A	Administration		Nuclear Medicine		Support Services		
		•							

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)									
Building Number:	BLD-03367	Building Nar	me: Women & Children	n's Pavil	on Building				
Configuration: N/A									
Type of Service	e Provided								
X Nu	ursing		Surgical	X	Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
X In	tensiveCare		Anesthesia	X	Obstetrical Recovery		Renal Dialysis		
	ediatric/Adol scent		Clinical Lab		Resorvery				
Ps No	sychiatric ursing		Radiological/ Imaging	X	Newborn/ WellBaby		Outpatient Surgery		
	bstetrical nte/Postprtum		Pharmaceutical		Emergency	X	Central Plant		
	termediate are		Dietetic		Nuclear Medicine		Support		
SH	killed Nursing		Administration				Services		

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Report the final configurequirements whether to per Section 130061(c)(	by retrofit or by replacer	the hospital campus showing nent and the type of service th	g how each bu nat will be prov	ilding will comply with t vided in each general ad	he SPC-5/NF ctue care hos	PC-4 or 5 spital building
Building Number: BL	D-03370 Building	g Name: New Generator Bu	ilding			
Configuration: N//	Ą					
Type of Service Pro	ovided					
Nursin	g E	Surgical		etrical ırean/Deliv	Reha Thera	bilitation apy
Intensi	veCare	Anesthesia	Obst	etrical	Rena	l Dialysis
Pediati escent	ric/Adol	Clinical Lab	11000	,		
Psychi Nursin		Radiological/ Imaging	Newl Welli		Outpa Surge	
Obstet Ante/P	rical rostprtum	Pharmaceutical	☐ Emo	rgency	X Centr	al Plant
Interm	·	Dietetic		gency		ai Fiaiit
Care Skilled	Nursing	Administration	Nucle	ear Medicine	Supp Serv	
	ı					

			Medical Center of Stoo		Stockton	:u u 05	Page:34 of 79
	ther by retrofit or by re				each building will comply be provided in each gene		
uilding Number:	BLD-03371	Building Na	me: Pedestrian Corri	dor			
Configuration:	N/A						
Type of Service	e Provided						
N	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
In	tensiveCare		Anesthesia		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				
	are killed Nursing		Administration		Nuclear Medicine		Support Services

Report Year: 20	14 10750 S	St. Joseph's M	Medical Center of Stockt	ton	Stockton		Page:35 of 79		
Report the final con requirements wheth per Section 130061	ner by retrofit or by r	dings on the eplacement	hospital campus showin and the type of service t	g how e hat will t	ach building will comply woe provided in each gener	vith the SPC al actue ca	C-5/NPC-4 or 5 re hospital building		
Building Number:	BLD-03492	Building Nar	me: Elevator Addition						
Configuration: Remove from GAC service by 1/1/2030									
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	ermediate re		Dietetic		Nuclear Medicine		Support		
Ski	illed Nursing		Administration				Services		

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	er by retrofit or by re				ach building will comply wo be provided in each gener		
Building Number:	BLD-03493	Building Nar	ne: Kitchen Remodel	1			
Configuration:	Retrofit Conforming	building to	NPC 4 or NPC 5				
Type of Service F	Provided						
Nurs	sing		Surgical		Obstetrical Cesarean/Deliv		ehabilitation herapy
Inter	nsiveCare		Anesthesia		Obstetrical Recovery	R	enal Dialysis
Ped esce	iatric/Adol ent		Clinical Lab		Reserveity		
Psyd Nurs	chiatric sing		Radiological/ Imaging		Newborn/ WellBaby		utpatient urgery
	tetrical e/Postprtum		Pharmaceutical		Emergency		entral Plant
	rmediate	X	Dietetic		Linergency		entiai riait
Care Skill	e led Nursing		Administration		Nuclear Medicine		Support Services
	ı						

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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-03494	Building Nan	ne: Kitchen Remodel	2							
Configuration:	Retrofit Conformir	ng building to I	NPC 4 or NPC 5								
Type of Service	e Provided										
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		ehabilitation herapy				
Int	tensiveCare		Anesthesia		Obstetrical Recovery	R	enal Dialysis				
	ediatric/Adol scent		Clinical Lab		Recovery						
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		utpatient urgery				
	bstetrical hte/Postprtum		Pharmaceutical		Emergency		entral Plant				
	termediate	X	Dietetic		Linergency		entrarriant				
	are killed Nursing		Administration		Nuclear Medicine		Support Services				
	-	I									

Report Year: 20	10750	St. Joseph's M	Medical Center of Stockt	on	Stockton		Page:38 of 79				
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-03495	Building Nar	me: Material Managem	nent Buil	ding						
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5								
Type of Service	Provided										
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		ehabilitation nerapy				
Inte	ensiveCare		Anesthesia		Obstetrical Recovery	R	enal Dialysis				
	diatric/Adol cent		Clinical Lab		receivery						
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		utpatient urgery				
	estetrical		Pharmaceutical								
An	te/Postprtum				Emergency	L Ce	entral Plant				
Inte	ermediate re		Dietetic		Nuclear Medicine		upport				
Ski	illed Nursing		Administration			5	ervices				

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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-03496	Building Na	ne: Utility Plant								
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5								
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	X	Central Plant				
Inte	ermediate re		Dietetic		Nuclear Medicine		Support				
Ski	illed Nursing		Administration				Services				

Report	Year: 2014	10750	St. Joseph's Me	edical Cent	er of Stockton		Stockton		Page:40 of 79		
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	Building Number: BLD-01899 Building Name: North Wing										
Туре	e of Service Prov	<u>rided</u>									
X	Nursing	Inpatient Beds	62		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	X	Dietetic		Nuclear Medicine	X	Support Services		
	Skilled Nursing	Inpatient Beds	0		Administration						
	Total Beds this Building		62								

Report Yea	ar: 2014	10750 S	t. Joseph's Medica	al Cen	ter of Stockton		Stockton		Page:41 of 79	
	Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)									
Building N	Number: BLD	)-01900	Building Name	: So	outh Wing					
Type of	Service Prov	ided								
Nu	ırsing	Inpatient Beds	0	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
Inte	ensiveCare	Inpatient Beds	0	X	Anesthesia					
	diatric/Adol cent	Inpatient Beds	0	X	Clinical Lab		Obstetrical Recovery		Renal Dialysis	
	ychiatric Irsing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	ostetrical te/Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency		Central Plant	
Inte	ermediate ire	Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services	
Ski	illed Nursing	Inpatient Beds	0		Administration					
	tal Beds this ilding		0							

Report	Year: 2014	10750	St. Joseph's M	edical Center of Stock	Stockton	Page:42 of 79
	le information on t SPC-5 per Section		of inpatient beds	by type of Service pro	vided by buildings that are classified	as SPC-2, SPC-3, SPC-4,
Buildi	ng Number: BLE	D-01901	Building N	ame: West Wing		
Туре	e of Service Prov	rided				
X	Nursing	Inpatient Beds	87	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare	Inpatient Beds	0	Anesthes	ia	
X	Pediatric/Adol escent	Inpatient Beds	13	Clinical L	Obstetrical Recovery	Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0	Radiologi Imaging	cal/ Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum	Inpatient Beds	0	X Pharmace	eutical Emergency	Central Plant
	Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
	Skilled Nursing	Inpatient Beds	0	X Administr	ation	
	Total Beds this Building		100			

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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-01902	Building Na	ame: East Wing							
Type of Service Pro	vided									
X Nursing	Inpatient Beds	79	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy					
X IntensiveCare	Inpatient Beds	9	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	X Nuclear Medicine	X Support Services					
Skilled Nursing	Inpatient Beds	0	Administration							
Total Beds this Building		88								

Report Year: 201	4 10750	St. Joseph's Me	edical Cente	er of Stockton		Stockton		Page:44 of 79		
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:	3LD-01903	Building Na	ame: Adn	ninistrative Wing						
Type of Service P	rovided									
Nursing	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		ehabilitation nerapy		
IntensiveCare	Inpatient Beds	0		Anesthesia						
Pediatric/Ado	I Inpatient Beds	0		Clinical Lab		Obstetrical Recovery	Re	enal Dialysis		
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		utpatient urgery		
Obstetrical Ante/Postprtu	Inpatient m Beds	0		Pharmaceutical		Emergency	Ce	entral Plant		
Intermediate Care	Inpatient Beds	0	Ц	Dietetic		Nuclear Medicine		upport ervices		
Skilled Nursin	ng Inpatient Beds	0	X	Administration						
Total Beds th Building	is	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	as SPC-2, SPC-3, SPC-4,
Building Number: BL	D-01904	Building N	ame: Southeast Wing		
Type of Service Prov	vided				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X IntensiveCare	Inpatient Beds	10	Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	X Emergency	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		10			

Report Ye	ear: 2014	10750 S	St. Joseph's Medi	cal Cen	ter of Stockton		Stockton		Page:46 of 79		
	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	D-01905	Building Nam	e: Ca	afeteria						
Type of	f Service Prov	ided									
☐ Nu	ursing	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
Int	tensiveCare	Inpatient Beds	0		Anesthesia						
	ediatric/Adol scent	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery		Renal Dialysis		
	sychiatric ursing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	bstetrical nte/Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency		Central Plant		
	itermediate are	Inpatient Beds	0	X	Dietetic		Nuclear Medicine		Support Services		
SH	killed Nursing	Inpatient Beds	0		Administration						
	otal Beds this uilding		0								

Report	Year: 2014	10750	St. Joseph's Medic	al Cen	ter of Stockton		Stockton		Page:47 of 79	
	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-01906	Building Name	: He	eart Center					
Туре	e of Service Prov	ided								
	Nursing	Inpatient Beds	0	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
	IntensiveCare	Inpatient Beds	0	X	Anesthesia		_			
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery		Renal Dialysis	
	Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	X	Emergency		Central Plant	
	Intermediate Care	Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services	
	Skilled Nursing	Inpatient Beds	0		Administration					
	Total Beds this Building		0							

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	le information on SPC-5 per Section		inpatient beds by	type of S	Service provided by I	ouilding	gs that are classified a	s SPC-2, S	SPC-3, SPC-4,
Buildi	ng Number: BLI	D-01907	Building Nar	me: Ou	utpatient Surgery Bui	lding			
Туре	e of Service Prov	<u>rided</u>							
	Nursing	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		ehabilitation nerapy
	IntensiveCare	Inpatient Beds	0		Anesthesia				
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery	R	enal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby	X O	utpatient urgery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency	C	entral Plant
	Intermediate Care	Inpatient Beds	0		Dietetic		Nuclear Medicine	So So	upport ervices
	Skilled Nursing	Inpatient Beds	0		Administration				
	Total Beds this Building		0						

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	Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)							
Building Number:	BLD-01908	Building Na	ame: Ca	ncer Center				
Type of Service F	Provided							
Nursing	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
IntensiveCar	re Inpatient Beds	0		Anesthesia				
Pediatric/Add	ol Inpatient Beds	0		Clinical Lab		Obstetrical Recovery		Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
Obstetrical Ante/Postprt	Inpatient um Beds	0		Pharmaceutical		Emergency		Central Plant
Intermediate Care	Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services
Skilled Nursi	ng Inpatient Beds	0		Administration				
Total Beds the Building	nis	0						

Report Ye	ear: 2014	10750 S	t. Joseph's Medica	al Cent	ter of Stockton		Stockton		Page:50 of 79
	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 I	Number: BLD	0-01909	Building Name	Ho	ospital Main Entrance				
Type of	f Service Prov	<u>ided</u>							
☐ Nu	ursing	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Int	tensiveCare	Inpatient Beds	0		Anesthesia				
	ediatric/Adol scent	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery		Renal Dialysis
	sychiatric ursing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	bstetrical nte/Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency		Central Plant
	termediate are	Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services
Sk	killed Nursing	Inpatient Beds	0	X	Administration				
	otal Beds this uilding		0						

Report Ye	ear: 2014	10750 S	t. Joseph's Medic	al Cen	ter of Stockton		Stockton		Page:51 of 79
	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	0-01910	Building Name	: En	nergency Generator Ro	om			
Type of	f Service Prov	<u>ided</u>							
☐ Ni	ursing	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
☐ In	tensiveCare	Inpatient Beds	0		Anesthesia				
	ediatric/Adol scent	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery		Renal Dialysis
	sychiatric ursing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	bstetrical nte/Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency	X	Central Plant
	itermediate are	Inpatient Beds	0	Ш	Dietetic		Nuclear Medicine		Support Services
SI	killed Nursing	Inpatient Beds	0		Administration				
	otal Beds this uilding		0						

Report Year: 2014	10750	St. Joseph's M	edical Center of Stockton	Stockton	Page:52 of 79
Include information on and SPC-5 per Section		f inpatient beds	by type of Service provided by b	uildings that are classified a	as SPC-2, SPC-3, SPC-4,
Building Number: BL	D-03367	Building N	ame: Women & Children's Pa	vilion Building	
Type of Service Prov	vided				
X Nursing	Inpatient Beds	20	Surgical	X Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X IntensiveCare	Inpatient Beds	32	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  X Ante/Postprtum	Inpatient Beds	27	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		79			

Report Year:	2014	10750	St. Joseph's Me	edical Cent	er of Stockton		Stockton		Page:53 of 79
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 Nur	mber: BLI	D-03370	Building Na	ime: Ne	w Generator Building				
Type of Se	ervice Prov	<u>rided</u>							
Nursi	ng	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Intens	siveCare	Inpatient Beds	0		Anesthesia				
Pedia escer	atric/Adol nt	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery		Renal Dialysis
Psych Nursi	niatric ng	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
Obste	etrical Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency	X	Central Plant
Intern Care	nediate	Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services
Skille	d Nursing	Inpatient Beds	0		Administration				
Total Buildi	Beds this		0						

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	Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)						
Building Number: BL	.D-03371	Building Nan	me: Pedestrian Corridor				
Type of Service Pro	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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	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-03492	Building Nam	ne: Elevator Addition				
Type of Service	Provided						
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
IntensiveC	are Inpatient Beds	0	Anesthesia				
Pediatric/A	dol Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis		
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery		
Obstetrica Ante/Postp		0	Pharmaceutical	Emergency	Central Plant		
Intermedia Care	te Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services		
Skilled Nu	rsing Inpatient Beds	0	Administration				
Total Beds Building	this	0					

Report Year: 2014	10750	St. Joseph's Med	dical Center of Stockton	Stockton	Page:56 of 79	
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	LD-03493	Building Nar	me: Kitchen Remodel 1			
Type of Service Pro	ovided					
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/Postprtun	Inpatient n Beds	0	Pharmaceutical	Emergency	Central Plant	
Intermediate Care	Inpatient Beds	0	X Dietetic	Nuclear Medicine	Support Services	
Skilled Nursing	l Inpatient Beds	0	Administration			
Total Beds this Building		0				

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)							
Building Number: B	LD-03494	Building Nar	me: Kitchen Remodel 2				
Type of Service Pro	ovided						
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/Postprtun	Inpatient n Beds	0	Pharmaceutical	Emergency	Central Plant		
Intermediate Care	Inpatient Beds	0	X Dietetic	Nuclear Medicine	Support Services		
Skilled Nursing	Inpatient Beds	0	Administration				
Total Beds this Building		0					

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)							
Building Number: BLD-03495 Building Name: Material Management Building							
Type of Service Prov	<u>vided</u>						
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
IntensiveCare	Inpatient Beds	0	Anesthesia				
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis		
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery		
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	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:	2014 10750	St. Joseph's Medi	cal Center of Stockto	Stockton	Page:59 of 79		
	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 Numbe	er: BLD-03496	Building Nam	e: Utility Plant				
Type of Servi	ce Provided						
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Del	Rehabilitation liv Therapy		
Intensive	eCare Inpatient Beds	0	Anesthesia	a			
Pediatric escent	/Adol Inpatient Beds	0	Clinical Lal	Dobstetrical Recovery	Renal Dialysis		
Psychiat Nursing	ric Inpatient Beds	0	Radiologic Imaging	al/ Newborn/ WellBaby	Outpatient Surgery		
Obstetrio		0	Pharmace	utical Emergency	X Central Plant		
Intermed Care	liate Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services		
Skilled N	lursing Inpatient Beds	0	Administra	tion			
Total Be Building	ds this	0					

Report Year: 2014 10750 St. Joseph's Medical Center of Stockton Stockton Page:60 of 79 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-01899 **Building Name:** North Wing **Building Number:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient 62 Inpatient Inpatient Inpatient Inpatient Inpatient 14847 0 0 0 0 Days Bed Days Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Days Days Bed Bed Bed Days **Intensive Care Newborn Intermediate Care** Pediatric Nursery Inpatient Inpatient Inpatient 0 Inpatient 0 Inpatient Inpatient Bed Days Bed Davs Bed Davs Int. Care / Developmentally **Intensive Care** Rehabilitation Disabled Center Inpatient Inpatient Inpatient Inpatient Inpatient 0 Inpatient 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 0 Inpatient 0 Davs Days Bed Bed 62 62

Report Year: 2014 10750 St. Joseph's Medical Center of Stockton Stockton Page:61 of 79 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-01900 South Wing **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 10750 St. Joseph's Medical Center of Stockton Stockton Page:62 of 79 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-01901 West Wing **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient 87 Inpatient Inpatient 0 Inpatient Inpatient Inpatient 14018 Days Days Bed Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 Days Days Bed Days Bed Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient 1512 Inpatient 0 Inpatient Inpatient Inpatient Inpatient 13 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 100 100

Report Year: 2014 10750 St. Joseph's Medical Center of Stockton Stockton Page:63 of 79 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-01902 **East Wing Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient 69 Inpatient Inpatient 10 Inpatient Inpatient Inpatient 2129 11109 Days Days Bed Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 Days Days Bed Days Bed 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 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 2103 0 0 Bed Days Bed Days 88 88

Report Year: 2014 10750 St. Joseph's Medical Center of Stockton Stockton Page:64 of 79 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-01903 Administrative Wing **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 10750 St. Joseph's Medical Center of Stockton Stockton Page:65 of 79 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-01904 Southeast Wing **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 10 Inpatient 2820 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 10 10

Report Year: 2014 10750 St. Joseph's Medical Center of Stockton Stockton Page:66 of 79 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-01905 Cafeteria **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 10750 St. Joseph's Medical Center of Stockton Stockton Page:67 of 79 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-01906 **Heart Center 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 10750 St. Joseph's Medical Center of Stockton Stockton Page:68 of 79 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-01907 **Outpatient Surgery Building 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 0 Inpatient 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 10750 St. Joseph's Medical Center of Stockton Stockton Page:69 of 79 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-01908 **Cancer Center 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 10750 St. Joseph's Medical Center of Stockton Stockton Page:70 of 79 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-01909 Hospital Main Entrance **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 10750 St. Joseph's Medical Center of Stockton Stockton Page:71 of 79 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-01910 **Emergency Generator Room 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 0 Inpatient 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 10750 St. Joseph's Medical Center of Stockton Stockton Page:72 of 79 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-03367 Women & Children's Pavilion Building **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** 20 Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 6258 Days Days Days Bed Bed Bed Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient 27 Inpatient Inpatient 6768 Inpatient Inpatient Inpatient 0 0 Days Days Bed Bed Days Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient 0 Inpatient Inpatient 22 Inpatient 6136 Inpatient Inpatient Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care Disabled** Center Inpatient 10 Inpatient 2155 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 79 79

Report Year: 2014 10750 St. Joseph's Medical Center of Stockton Stockton Page:73 of 79 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-03370 New Generator Building **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 10750 St. Joseph's Medical Center of Stockton Stockton Page:74 of 79 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-03371 Pedestrian Corridor **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 10750 St. Joseph's Medical Center of Stockton Stockton Page:75 of 79 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-03492 **Elevator Addition 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 10750 St. Joseph's Medical Center of Stockton Stockton Page:76 of 79 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-03493 Kitchen Remodel 1 **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 10750 St. Joseph's Medical Center of Stockton Stockton Page:77 of 79 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-03494 Kitchen Remodel 2 **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 10750 St. Joseph's Medical Center of Stockton Stockton Page:78 of 79 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-03495 Material Management Building **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 0 Inpatient 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 10750 St. Joseph's Medical Center of Stockton Stockton Page:79 of 79 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-03496 **Utility 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