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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)

Facility Number:	11906
Facility Name:	Northridge Hospital Medical Center
Address:	18300 Roscoe Blvd.
City:	Northridge
Hospital Owner/Lice	nsee: Northridge Hospital Medical Center
Year of Repo	orting: 2014
Contact 1 e-mail Add	Iress:
Contact 2 e-mail Add	Iress:
Contact 3 e-mail Add	ress::
Name of Subr	nitter: Robert Omens
Submission	Date: 12/10/2014 11:52:05 AM

Report Y	Year: 2014 1	1906 Northridge Hospi	tal Medical Center	Northridge		Page:2 of 53		
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	Building Address Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date		
BLD- 00394	F Tower - Main Tov	wer 18300 Roscoe Blvd	Retrofit	SPC2	01/01/2015	12/31/2014		
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Building	No: BLD-(0394	F Tower - Main Tower		Retrofit/Re Project:	eplacement	Yes-Su	bmitted]
	Project Number	Sub Num	Scope	Date In	Plan Approved Date	Start Date	Project Complete d	Status	CEQA Review
11906	IL082960-0	0	PPR - SB1661: VSI - BLDG 08A/'F' TOWER (FRMRLY SB1661/PPR: REPLCMNT TWR)	12/31/2008 12:00:00 AM		01/12/2012	04/02/2014	ACTI	No

Report Year: 2014 1190	6 Northridge Hospital Medical Center	Northridge	Page:4 of 53					
Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)								
Building Number: BLD-00394 Building Name: F Tower - Main Tower								
Type of Service Provided								
X Nursing Inpatie Beds	nt 90 Inpatient 4644 Days	Surgical	Obstetrical Recovery					
X IntensiveCare Inpatie Beds	nt 22 Inpatient Days 2529	Anesthesia	Newborn/ WellBaby					
X Pediatric/Adol Inpatie escent Beds	nt 12 Inpatient Days 888	Clinical Lab	Emergency					
Psychiatric Inpatie Nursing Beds	nt 0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine					
Obstetrical Inpatie Ante/Postprtum Beds	nt 0 Inpatient Days 0	Pharmaceutical X Dietetic	Rehabilitation Therapy					
Intermediate Inpatie Care Beds	nt 0 Inpatient Days 0	Administration	Renal Dialysis					
Skilled Nursing Inpatie Beds	nt 0 Inpatient Days 0		Surgery					
	Total Beds this 124 Building	Obstetrical Cesarean/Deliv	Central Plant					
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Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)								
Building Number: BLD-00394 Buil	ding Name: F Tower - Main Tower							
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric						
Inpatient 90 Inpatient 4644 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	ent 0					
Perinatal (excluse Newborn / GYN)	Burn	Skilled Nursing						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	ent 0					
Pediatric	intensive Care Newborn Nursery	Intermediate Card						
Inpatient 12 Inpatient 888 Bed Days	Inpatient 22 Inpatient 2529 Bed Days	Inpatient 0 Inpatie Bed Days	nt 0					
Intensive Care	Rehabilitation Center	Int. Care / development Disabled						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	nt 0					
Coronary Care	Chemical Dependency		Beds this ng Per :e					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	124	124					
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Report Y	ear:
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2014

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-00388	Farr Tower	Remain
BLD-00389	D&T Building	Remain
BLD-00390	Support Services Building	Remain
BLD-00391	IFL Building	Remain
BLD-00392	Therapy Pool Building	Remain
BLD-00393	Clinical Laboratory Bldg Expansion	Remain
BLD-00394	F Tower - Main Tower	Retrofit
BLD-00395	G Tower	Remain
BLD-00396	Cancer Center	Remain
BLD-03094	Linear Accelerator	Remain
BLD-03095	Emergency Room Addition	Remain
BLD-03136	Quiet/Dining	Remain
BLD-03645	Electrical Equipment Room	Remain
BLD-05464	Clinical Laboratory Building (D&T Addition)	Remain
	•	

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No proposed ne	w buildings	to be constr	ructed at this or another site.		

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No data reporte	d for Sectio	n 130061 (c)(2)(A) , (B), or (C)			

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lo data reporte	ed for Section	n 130061(c))(2)(D).		

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lo data reporte	d for Sectio	n 130061(c)(2)(D.			

Report Year:	2014	11906	Northridge Hosp	oital Medical Center		Northridge		Page:11 of 53
No data reported	d for wheth	er the gener	al acute care ser	vices and beds will	be relocated to a	new, existing or	retrofitted building ace" per Section 13	and any
		s or project		ings with a building				0001(0)(2)(E).

Report Year:	2014	11906	Northridge Hospital Medical Center	Northridge	Page:12 of 53
No data reporte	ed for Section	on 130061(c)(3).		

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Report any general acute care hospital inpatient service that is provided in any genaral acute care hospital building that is rated SPC-1 per Section 130061(c)(4)											
Building Number:	BLD-00394 Building	g Name: F Tower - Main Tower									
Type of Service	e Provided										
		Surgical		stetrical arean/Deliv	Rehabilitation Therapy						
X	Nursing	Anesthesia			Renal Dialysis						
X	IntensiveCare	Clinical Lab		stetrical	Kenai Dialysis						
X	Pediatric/Adol escent	Radiological/		vborn/	Outpatient Surgery						
	Psychiatric Nursing	Imaging Pharmaceutical	Eme	ergency	Central Plant						
	Obstetrical Ante/Postprtum	X Dietetic	Nuc Med	lear	Support Services						
	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-00388 Building Name: Farr Tower											
Configuration	: Retrofit Co	nforming building to	NPC 4 or NPC 5								
Type of Ser	vice Provided										
X	Nursing		Surgical	X	Obstetrical Cesarean/Deliv		habilitation erapy				
X	IntensiveCare		Anesthesia	X	Obstetrical Recovery	Re	nal Dialysis				
	Pediatric/Adol escent	X	Clinical Lab		Recovery						
	Psychiatric Nursing		Radiological/ Imaging	X	Newborn/ WellBaby		tpatient rgery				
X	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	Ce	ntral Plant				
	Intermediate Care		Dietetic		Nuclear Madician						
	Skilled Nursing		Administration		Nuclear Medicine		upport 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-00389	Building Na	me: D&T Building							
Configuration: Retrofit Conforming building to NPC 4 or NPC 5										
Type of Service	e Provided									
Nu	ursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Int	tensiveCare	X	Anesthesia		Obstetrical Recovery		Renal Dialysis			
	ediatric/Adol scent		Clinical Lab		,					
	sychiatric ursing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	ostetrical hte/Postprtum	X	Pharmaceutical	X	Emergency		Central Plant			
	termediate are		Dietetic							
	killed Nursing		Administration	X	Nuclear Medicine	X	Support Services			
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)										
Building Number:	BLD-00390	Building Na	me: Support Services E	Building				-		
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5							
Type of Service	Provided									
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Int	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	ediatric/Adol cent		Clinical Lab		Recovery					
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	ostetrical hte/Postprtum		Pharmaceutical		Emergency	X	Central Plant			
Int Ca	ermediate		Dietetic		Nuclear Medicine		Support			
	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-00391	Building Na	me: IFL Building							
Configuration: Retrofit Conforming building to NPC 4 or NPC 5										
Type of Service	Provided									
X Nu	irsing		Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy			
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	diatric/Adol cent		Clinical Lab							
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	ostetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant			
Inte Ca	ermediate		Dietetic							
	illed Nursing		Administration		Nuclear Medicine		Support Services			
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)										
Building Number:	BLD-00392	Building Na	me: Therapy Pool Buil	ding						
Configuration:	N/A									
Type of Service	Provided									
Nu	irsing		Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy			
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	diatric/Adol cent		Clinical Lab		,					
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	ostetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant			
Inte Ca	ermediate Ire		Dietetic		Nuclear Medicine		Support			
	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-00393	Building Na	me: Clinical Laboratory	BIdg E	pansion			_			
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5								
Type of Service	Provided										
Nur	sing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
Inte	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis				
Pedesc	liatric/Adol ent		Clinical Lab		Recovery						
	rchiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
	stetrical e/Postprtum		Pharmaceutical		Emergency		Central Plant				
Inte Car	ermediate		Dietetic								
	led Nursing	X	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-00394	Building Na	me: F Tower - Main To	wer						
Configuration: Remove from GAC service by 1/1/2030										
Type of Service	e Provided									
X Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
X Int	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	ediatric/Adol scent		Clinical Lab							
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	ostetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant			
	termediate	X	Dietetic							
	are killed Nursing		Administration		Nuclear Medicine		Support Services			
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)											
Building Number: BLD-00395 Building Name: G Tower											
Configuration: Remove from GAC service by 1/1/2030											
Type of Service	Provided										
X Nu	rsing		Surgical	X	Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
X Inte	ensiveCare		Anesthesia	X	Obstetrical Recovery	X	Renal Dialysis				
	diatric/Adol cent		Clinical Lab		Recovery						
	ychiatric rsing		Radiological/ Imaging	X	Newborn/ WellBaby		Outpatient Surgery				
	stetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant				
Inte Ca	ermediate		Dietetic				_				
	illed Nursing		Administration		Nuclear Medicine	e	Support Services				
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	buildings on the hospital campus showin by replacement and the type of service			
Building Number: BLD-00396	Building Name: Cancer Center			
Configuration: Retrofit Confo	rming building to NPC 4 or NPC 5			
Type of Service Provided				
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehat Thera	bilitation Ipy
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal	l Dialysis
Pediatric/Adol escent	Clinical Lab	Recovery		
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge	
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Centra	al Plant
Intermediate Care	Dietetic			
Skilled Nursing	Administration	Nuclear Medicine	e Supp Servi	
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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-03094	Building Na	me: Linear Accelerator]			
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5								
Type of Service I	Provided										
Nur	sing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
Inte	nsiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis				
Ped	liatric/Adol ent		Clinical Lab		Necovery						
Psy Nur	chiatric sing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
	stetrical e/Postprtum		Pharmaceutical		Emergency		Central Plant				
Inte Care	rmediate		Dietetic								
	e led Nursing		Administration		Nuclear Medicine		Support Services				
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)											
Building Number:	BLD-03095	Building Nar	me: Emergency Room	Addition							
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5								
Type of Service	Provided										
Nu	ursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis				
	ediatric/Adol cent		Clinical Lab								
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
	ostetrical nte/Postprtum		Pharmaceutical	X	Emergency		Central Plant				
Int Ca	ermediate are		Dietetic		Nuclear Medicine		Support				
Sk	illed Nursing		Administration				Services				
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	her by retrofit or by				ach building will comply wi be provided in each genera			
Building Number:	BLD-03136	Building Na	me: Quiet/Dining					
Configuration:	Retrofit Conformir	ng building to	NPC 4 or NPC 5					
Type of Service	Provided							
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
Int	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis	
	diatric/Adol cent		Clinical Lab					
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	ostetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant	
Inte Ca	ermediate are	X	Dietetic		Nuclear Medicine		Support	
	illed Nursing		Administration				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-0364	Building Name: Electrical Equipr	ment Room									
Configuration: Retrofit Co	forming building to NPC 4 or NPC 5										
Type of Service Provided											
Nursing	Surgical		etrical	Rehabilitation Therapy							
IntensiveCare	Anesthesia		etrical	Renal Dialysis							
Pediatric/Adol escent	Clinical Lab										
Psychiatric Nursing	Radiological/ Imaging	Newb WellE		Outpatient Surgery							
Obstetrical Ante/Postprtur	Pharmaceutical	Emer	gency X	Central Plant							
Intermediate Care	Dietetic			Support							
Skilled Nursing	Administration			Services							
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Pediatric/Adol escent Psychiatric Nursing Obstetrical Ante/Postprtui	Clinical Lab Clinical Lab Radiological/ Imaging Pharmaceutical Dietetic	Reco	very	Outpatient Surgery Central Plant Support							

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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-05464	Building Na	me: Clinical Laboratory	/ Building	g (D&T Addition)						
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5								
Type of Service	Provided										
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
Int	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis				
	ediatric/Adol cent		Clinical Lab		Recovery						
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
	ostetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant				
Int Ca	ermediate		Dietetic		Nuclear Medicine		Support				
	illed Nursing		Administration				Support Services				
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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)											
Building Nun	nber: BLD	-00388	Building N	ame: Fa	rr Tower]		
Type of Se	rvice Provi	<u>ded</u>									
X Nursir	ng	Inpatient Beds	64		Surgical	X	Obstetrical Cesarean/Deliv		habilitation erapy		
X Intens	iveCare	Inpatient Beds	24		Anesthesia						
Pedia escen	tric/Adol t	Inpatient Beds	0	X	Clinical Lab	X	Obstetrical Recovery	Re	nal Dialysis		
Psych		Inpatient Beds	0		Radiological/ Imaging	X	Newborn/ WellBaby		tpatient rgery		
Obste X Ante/F		Inpatient Beds	19		Pharmaceutical		Emergency	Ce	ntral Plant		
Interm Care	nediate	Inpatient Beds	0		Dietetic		Nuclear Medicine		pport rvices		
Skilled	d Nursing	Inpatient Beds	0		Administration						
Total Buildir	Beds this ng		107								
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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-00389	Building N	ame: D8	T Building							
Type of Service F	Provided										
Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv	Reha Ther	abilitation apy				
IntensiveCar	re Inpatient Beds	0	X	Anesthesia							
Pediatric/Add escent	ol Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	al Dialysis				
Psychiatric	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby	Outp Surg	atient ery				
Obstetrical Ante/Postprt	Inpatient um Beds	0	×	Pharmaceutical	X Emergency	Cent	ral Plant				
Intermediate	Inpatient Beds	0		Dietetic	X Nuclear Medicine	X Supp Serv	port ices				
Skilled Nursi	ing Inpatient Beds	0		Administration							
Total Beds th Building	his	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-00390	Building N	ame: <mark>Su</mark>	pport Services Build	ding]			
Type of Service	Provided										
Nursing	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		nabilitation erapy			
IntensiveC	are Inpatient Beds	0		Anesthesia							
Pediatric/A escent	dol Inpatient Beds	0		Clinical Lab		Obstetrical Recovery	Rer	nal Dialysis			
Psychiatric Nursing	c Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		patient gery			
Obstetrical Ante/Postp		0		Pharmaceutical	Ľ	Emergency	X Cer	ntral Plant			
Intermedia	te Inpatient Beds	0		Dietetic		Nuclear Medicine	Sup Sup Ser	oport vices			
Skilled Nu	rsing Inpatient Beds	0		Administration							
Total Beds Building	s this	0									
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Report Year: 2014	11906	Northridge Ho	spital Medic	cal Center	Northridge		Page:31 of 53				
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-00391	Building N	lame: IFI	L Building							
Type of Service Pro	vided										
X Nursing	Inpatient Beds	36		Surgical	Obstetrical Cesarean/Deliv	X Reha	abilitation apy				
IntensiveCare	Inpatient Beds	0		Anesthesia							
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	al Dialysis				
Psychiatric X Nursing	Inpatient Beds	40		Radiological/ Imaging	Newborn/ WellBaby	Outp Surg	patient Jery				
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Cent	ral Plant				
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Serv	port ices				
Skilled Nursing	Inpatient Beds	0		Administration							
Total Beds this Building		76									
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	Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)											
Buildi	ng Number: BLE	0-00392	Building N	Name: Th	erapy Pool Building							
Туре	e of Service Prov	rided										
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	X Reha Thera	bilitation apy				
	IntensiveCare	Inpatient Beds	0		Anesthesia							
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	ıl Dialysis				
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outp Surg	atient ery				
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Cent	ral Plant				
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Servi	oort ces				
	Skilled Nursing	Inpatient Beds	0		Administration							
	Total Beds this Building		0									
OSHPD	FDD SB499 Report	rt	Data Last Update	: 12/10/20	014 Submissi	on Date: 12/10/2014	Printed: 12/12/	2014 6:25 AM				

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	e information on t PC-5 per Section		inpatient beds	by type of \$	Service provided by	buildings that are classified a	as SPC-2, SPC	C-3, SPC-4,
Buildin	g Number: BLC	0-00393	Building N	Name: Cli	nical Laboratory Blo	lg Expansion		
Туре	of Service Prov	rided						
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha	bilitation apy
	IntensiveCare	Inpatient Beds	0		Anesthesia			
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	l Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outp Surge	atient ery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Cent	ral Plant
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Servi	ort ces
	Skilled Nursing	Inpatient Beds	0	X	Administration			
	Total Beds this Building		0					
OSHPD I	FDD SB499 Repor	rt D	ata Last Update	e: 12/10/20	014 Submise	sion Date: 12/10/2014	Printed: 12/12/	2014 6:25 AM

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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-00395 Building Name: G Tower										
Type of Service Provided										
X	Nursing	Inpatient Beds	64		Surgical	\triangleright	Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
X	IntensiveCare	Inpatient Beds	22		Anesthesia					
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Þ	Obstetrical Recovery	X F	Renal Dialysis	
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Þ	Newborn/ WellBaby		Dutpatient Surgery	
X	Obstetrical Ante/Postprtum	Inpatient Beds	16		Pharmaceutical	Ľ	Emergency		Central Plant	
	Intermediate Care	Inpatient Beds	0		Dietetic	Ľ	Nuclear Medicine		Support Services	
	Skilled Nursing	Inpatient Beds	0		Administration					
	Total Beds this Building		102							
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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-00396 Building Name: Cancer Center										
Type of Service Provided										
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/D		abilitation apy		
	IntensiveCare	Inpatient Beds	0		Anesthesia		_			
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	al Dialysis		
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outp Surg	atient ery		
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Cent	ral Plant		
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Serv	port ices		
	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-03094 Building Name: Linear Accelerator										
Type of Service Provided										
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha Thera	abilitation apy			
IntensiveCare	e Inpatient Beds	0		Anesthesia						
Pediatric/Ado escent	l Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena Rena	al Dialysis			
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outp Surg	atient ery			
Obstetrical Ante/Postprtu	Inpatient m Beds	0		Pharmaceutical	Emergency	Cent	ral Plant			
Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Servi	oort ices			
Skilled Nursin	g Inpatient Beds	0		Administration						
Total Beds thi Building	s	0								
OSHPD FDD SB499 Re	port	Data Last Update	: 12/10/20	014 Submiss	sion Date: 12/10/2014	Printed: 12/12/	2014 6:25 AM			

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	le information on PC-5 per Section		inpatient beds	by type of S	Service provided by	buildings that are classified	as SPC-2, SP	C-3, SPC-4,
Buildi	ng Number: BLI	D-03095	Building N	lame: En	nergency Room Add	ition		
Туре	e of Service Prov	rided						
	Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv	Reha	abilitation apy
	IntensiveCare	Inpatient Beds	0		Anesthesia			
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	al Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outp Surg	atient ery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	X Emergency	Cent	ral Plant
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Serv	
	Skilled Nursing	Inpatient Beds	0		Administration			
	Total Beds this Building		0					
OSHPE	FDD SB499 Repo	rt D	oata Last Update	: 12/10/20)14 Submiss	ion Date: 12/10/2014	Printed: 12/12	/2014 6:25 AM

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	ation on the number or r Section 130061(e)	of inpatient beds	by type of \$	Service provided by	buildings that are classified	as SPC-2, SPC	C-3, SPC-4,
Building Numb	per: BLD-03136	Building N	ame: Qu	iiet/Dining			
Type of Serv	rice Provided						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha	bilitation apy
Intensiv	eCare Inpatient Beds	0		Anesthesia			
Pediatri escent	c/Adol Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	Il Dialysis
Psychia Nursing		0		Radiological/ Imaging	Newborn/ WellBaby	Outp Surge	atient ery
Obstetri Ante/Po		0		Pharmaceutical	Emergency	Cent	ral Plant
Interme Care	diate Inpatient Beds	0	X	Dietetic	Nuclear Medicine	Supp Servi	ort ces
Skilled I	Nursing Inpatient Beds	0		Administration			
Total Be Building		0					
OSHPD FDD SB4	499 Report	Data Last Update:	12/10/20)14 Submiss	sion Date: 12/10/2014	Printed: 12/12/	2014 6:25 AM

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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 and SPC-5 per Section 130061(e)	C-3, SPC-4,
Building Number: BLD-03645 Building Name: Electrical Equipment Room	
Type of Service Provided	
NursingInpatient Beds0SurgicalObstetrical Cesarean/DelivRehal Thera	bilitation apy
IntensiveCare Inpatient 0 Anesthesia Beds	
Pediatric/Adol Inpatient 0 Clinical Lab Destetrical Renained Recovery	l Dialysis
Psychiatric Inpatient 0 Radiological/ Nursing Beds Outpatient 0 Unpatient 0 Un	
Obstetrical Inpatient 0 Pharmaceutical Emergency X Centr	ral Plant
Intermediate Inpatient 0 Care Beds	ort ces
Skilled Nursing Administration	
Total Beds this 0 Building	
OSHPD FDD SB499 Report Data Last Update: 12/10/2014 Submission Date: 12/10/2014 Printed: 12/12/2	

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	e information on t PC-5 per <mark>Section</mark>		inpatient beds	by type of \$	Service provided by	buildings that are classified	as SPC-2, SPC	C-3, SPC-4,
Buildin	ng Number: BLE	0-05464	Building N	Name: Cli	nical Laboratory Bu	ilding (D&T Addition)		
Туре	of Service Prov	rided						
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha	bilitation apy
	IntensiveCare	Inpatient Beds	0		Anesthesia	_		
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	l Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outp Surge	atient ery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Cent	ral Plant
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Servi	ort ces
	Skilled Nursing	Inpatient Beds	0		Administration			
	Total Beds this Building		0					
OSHPD	FDD SB499 Repor	rt D	Data Last Update	e: 12/10/20	014 Submise	sion Date: 12/10/2014	Printed: 12/12/	2014 6:25 AM

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Include information on the number of inpatient SPC-5 per Section 130061(e)	beds by type of unit provided by buildings th	at are classified as SPC-2, SPC-3	SPC-4, and
Building Number: BLD-00388 Bu	ilding Name: Farr Tower		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 64 Inpatient 17085 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	nt 0
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 19 Inpatient 460 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	nt 0
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	nt 0
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	,
Inpatient 10 Inpatient 2498 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	nt 0
Coronary Care	Chemical Dependency		l Beds this ding Per
Inpatient 14 Inpatient 3496 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv	
SHPD FDD SB499 Report Data Last	Update: 12/10/2014 Submission Date	e: 12/10/2014 Printed: 12/12	2/2014 6:25 AM

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Include information on the number of inpatient to SPC-5 per Section 130061(e)	peds by type of unit provided by buildings that	t are classified as SPC-2, SPC-3, SPC-4, and	I
Building Number: BLD-00389 Build	ding Name: D&T Building		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Coronary Care	Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0	
OSHPD FDD SB499 Report Data Last U	pdate: 12/10/2014 Submission Date:	12/10/2014 Printed: 12/12/2014 6:25 A	M

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Include information on the number of inpatient to SPC-5 per Section 130061(e)	peds by type of unit provided by buildings that	are classified as SPC-2, SPC-3, SPC-4, and
Building Number: BLD-00390 Build	ding Name: Support Services Building	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service
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Include information on the number of inpatient SPC-5 per Section 130061(e)	beds by type of unit provided by buildings that	t are classified as SPC-2, SPC-3, SPC-4, and
Building Number: BLD-00391 Bui	Iding Name: IFL Building	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 40 Inpatient 9229 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 36 Inpatient 4501 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 76 76
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Include information on the number of inpatien SPC-5 per Section 130061(e)	t beds by type of unit provided by buildings that	t are classified as SPC-2, SPC-3, SPC-4, a	nd
Building Number: BLD-00392 Bu	ilding Name: Therapy Pool Building]
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days)]
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days)
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	\mathcal{D}
Coronary Care	Chemical Dependency	Total Beds this Total Beds thi Building Per Building Per	S
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service)
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Include information on the number of inpatien SPC-5 per Section 130061(e)	t beds by type of unit provided by buildings that	are classified as SPC-2, SPC-3, SPC-4, and
Building Number: BLD-00393 Bu	Ilding Name: Clinical Laboratory Bldg Explored	pansion
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days 0
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0
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Include information on the number of inpatient SPC-5 per Section 130061(e)	beds by type of unit provided by buildings that	are classified as SPC-2, SPC-3, SPC-4, and
Building Number: BLD-00395 Bu	ilding Name: G Tower	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 64 Inpatient 15330 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 16 Inpatient 4336 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 14 Inpatient 2183 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per
Inpatient 8 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 102 102
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Include information on the number of inpatien SPC-5 per Section 130061(e)	beds by type of unit provided by buildings that	t are classified as SPC-2, SPC-3, SPC-4, ar	nd
Building Number: BLD-00396 Bu	ilding Name: Cancer Center		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days]
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days]
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days]
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days]
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per	S
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service]
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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-03094 Bu	Linear Accelerator	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days 0	Unit Service 0 0
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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)			'C-4, and
Building Number: BLD-03095 Buil	ding Name: Emergency Room Addition		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0
Coronary Care	Chemical Dependency	Total Beds this Total B Building Per Buildin	eds this g Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service	0
OSHPD FDD SB499 Report Data Last L	Jpdate: 12/10/2014 Submission Date:	12/10/2014 Printed: 12/12/20	 14 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-03136 Build	ding Name: Quiet/Dining	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0
OSHPD FDD SB499 Report Data Last U	pdate: 12/10/2014 Submission Date:	12/10/2014 Printed: 12/12/2014 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-03645 Bui	Iding Name: Electrical Equipment Room	ו
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days 0
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0
OSHPD FDD SB499 Report Data Last U	Jpdate: 12/10/2014 Submission Date:	: 12/10/2014 Printed: 12/12/2014 6:25 AM

Report Year: 2014 11906 Northrid	dge Hospital Medical Center	Northridge Page:53 of 53
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-05464 Bu	ilding Name: Clinical Laboratory Building	(D&T Addition)
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0
OSHPD FDD SB499 Report Data Last	Update: 12/10/2014 Submission Date:	12/10/2014 Printed: 12/12/2014 6:25 AM