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Office of Statewide Health Planning and Development
Facilities Development Division

Senate Bill 499 (SB 499) Hospital Report

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

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

Facility Number:	11968	
Facility Name:	Presbyterian Intercommunity Hospital	
Address:	12401 Washington Blvd.	
City:	Whittier	
Hospital Owner/Lice	nsee: Interhealth Corp. / 930000129	—
Year of Repo	orting: 2014	
Contact 1 e-mail Ado	dress:	
Contact 2 e-mail Ado	dress:	
Contact 3 e-mail Add	lress::	
Name of Subr	nitter: Dave Klinger	
Submission	Date: 10/22/2014 5:08:49 PM	

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rebuild, 130061.	retrofit or replace the buildin 5,for rebuild, retrofit or repla	re planned for rebuild, retrofit or replanged ng to SPC2, SPC3, SPC4 or SPC5 p acement of the building that the hosp per Section 130061(c)(1)(B)	per 130061(c)(1	(A). The deadline, a	as described in S	Section 130060 or
Bldg. No.	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date
BLD- 01156	Original Building Patient Tower	12401 Washington Blvd.	Retrofit	SPC2	01/01/2016	12/31/2015
BLD- 01157	Original Building Service Core	12401 Washington Blvd.	Remove	N/A	01/01/2016	12/31/2015

Building	No: BLD-0	1156	Original Building Patient Tower	Retrofit/Re Project:	placement	Yes-Sut	Yes-Submitted		
	Project Number	Sub Num	Scope	Date In	Plan Approved Date	Start Date	Project Complete d	Status	CEQA Review
11968	H132596-19 -00	0	Voluntary Seismic Improvement (VSI) of Original Building (Bld-01156)	11/25/2013 12:00:00 AM	10/22/2014 12:00:00 AM	01/10/2015	04/01/2015	PEND	No

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Provide the number of inpatient	beds and patient days per type of service pe	r building per Section 130061(c)(1)(F)
Building Number: BLD-01156	Building Name: Original	ginal Building Patient Tower	
Type of Service Provided			
X Nursing Inpatien Beds	t 28 Inpatient 3506 Days	Surgical	Obstetrical Recovery
IntensiveCare Inpatien Beds	t 0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
Pediatric/Adol Inpatien escent Beds	t 0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Inpatien Nursing Beds	t 0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
Obstetrical Inpatien Ante/Postprtum Beds	t 0 Inpatient Days 0	Pharmaceutical	Rehabilitation Therapy
Intermediate Inpatien Care Beds	t 0 Inpatient Days 0	X Administration	Renal Dialysis
Skilled Nursing Inpatien Beds	t 0 Inpatient Days 0	X Support Services	X Outpatient Surgery
	Total Beds this 28 Building	Obstetrical Cesarean/Deliv	Central Plant
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Provide the number of	f inpatient be	eds and patient days per type of service per	r building per Section 130061	(c)(1)(F)
Building Number: BL	.D-01157	Building Name: Orig	ginal Building Service Core	
Type of Service Prov	<u>/ided</u>		_	
Nursing	Inpatient Beds	0 Inpatient 0 Days	X Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	X Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	X Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0		Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services	Outpatient Surgery
	Deus	Total Beds this 0 Building	Obstetrical Cesarean/Deliv	Central Plant
OSHPD FDD SB499 Repo	rt	Data Last Update: 10/22/2014 Su	bmission Date: 10/22/2014	Printed: 10/24/2014 6:25 AM

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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-01156 Bu	ilding Name: Original Building Patient Tow	er						
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric						
Inpatient 28 Inpatient 3506 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days						
Perinatal (excluse 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 Card						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days						
Intensive Care	Rehabilitation Center	Int. Care / development 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 Unit Service						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	28 28						
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Provide the number of Inpatient beds and patie	Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)								
Building Number: BLD-01157 Buil	ding Name: Original Building Service Core								
	Chginal Building Service Core								
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric							
Inpatient 28 Inpatient 3506 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	nt 0						
Perinatal (excluse Newborn / GYN)	Burn	Skilled Nursing							
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	nt 0						
Pediatric	intensive Care Newborn Nursery	Intermediate Card							
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier 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 Inpatien Bed Days	nt O						
Coronary Care	Chemical Dependency	Total Beds this Total B Building Per Buildin Unit Service							
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	28	0						

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For all buildings at the facility, indicate which ones are scheduled for general acute service removal.

Building Number Building Name		Building to be Removed / Replaced / Rebuilt
BLD-01156	Original Building Patient Tower	Retrofit
BLD-01157	Original Building Service Core	Remove
BLD-01158	Long Term Care	Remain
BLD-01160	Power Plant	Remain
BLD-01161	Radiation Therapy	Remain
BLD-01162	1992 Pavilion	Remain
BLD-03151	Health Center (North Building)	Remain
BLD-03152	Health Center (East Building)	Remain
BLD-03153	Health Center (South Building)	Remain
BLD-03272	ED Shannon Tower	Remain
BLD-03666	1968 Generator Building	Remain
BLD-03715	1992 Pavilion Bridge	Remain
BLD-05468	Central Plant Expansion	Remain

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List ALL proposed ne	ew buildings to	be constructed at	this or another site.				
Building Number	Building Name	9		New Site			
N_2	Plaza Tower						
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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)									
Building	Building Number: BLD-01157 Original Building Service Core Removal Date: 12/31/2015								
Planned	Uses for the building	to be removed from acute car	e service:						
	-	emolished	Jurisdiction:						
Inpatient	services currently de	livered in the building:							
	Nursing	X Surgical	Obstetri Cesarea		Rehabilitation Therapy				
	IntensiveCare Pediatric/Adol escent	X Anesthesia	Obstetri Recover		Renal Dialysis				
	Psychiatric Nursing	X Radiological/ Imaging	Newborn WellBab		Outpatient Surgery				
	Obstetrical Ante/Postprtum	Pharmaceutical	Emerge	ncy	Central Plant				
	Intermediate Care Skilled Nursing	Dietetic Administration	Nuclear Medicine	÷	Support Services				
OSHPD F	DD SB499 Report	Data Last Update: 10	/22/2014 Submission	Date: 10/22/2014	Printed: 10/24/2014 6:25 AM				

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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-01157 Building Name:	Original Building Service Core	Year of Information: 2011				
<u>Unit Type</u>		Information Current As Of:				
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric				
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds 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 0 Patient Beds Days	0			
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 Dis	abled			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0			
Coronary Care Inpatient 0 Patient 0 Beds Days	Chemical Dependency Inpatient 0 Patient 0 Beds Days	Total Beds this Building per Unit 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-01157 Building Name:	Original Building Service Core	Year of Information: 2012	2			
Unit Type		Information Current As Of:				
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric				
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds 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 0 Patient Beds Days	0			
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 Dis	abled			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0			
Coronary Care	Chemical Dependency	Total Beds this				
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Building per Unit	0			
Deus Days	Deus Days	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-01157 Building Name:	Original Building Service Core	Year of Information: 2013				
Unit Type		Information Current As Of:				
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric				
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds 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 0 Patient Beds Days	0			
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 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0			
Coronary Care	Chemical Dependency	Total Beds this				
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Building per Unit	0			
Deus Days	Deus Days	Total Beds this Building per Service	0			
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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-07	1157 Building Name:	Original Building Service	Core	Year of Information: 201	1	
<u>Type of Services</u> Provided				nformation Current As		
Nursing	Inpatient 0 Beds	Patient 0 Days	Surgical		Rehabilitation Therapy	
	Inpatient 0 Beds	Patient 0 Days	Anesthesia	Obstetrical	Renal Dialysis	
	Inpatient 0 Beds	Patient 0 Days	Clinical Lab	Recovery		
	Inpatient 0 Beds	Patient 0 Days	Radiological/ Imaging		Dutpatient Surgery	
	Inpatient 0 Beds	Patient 0 Days	Pharmaceutical	Emergency	Central Plant	
	Inpatient 0 Beds	Patient 0 Days	Dietetic	Nuclear dedicine	Support Services	
	Inpatient 0 Beds	Patient 0 Days	Administration			
Total Beds this Bu	uilding per service	0				
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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-(01157 Building Name:	Original Building Service	e Core Year of Information: 2012				
<u>Type of Services</u> Provided			Information Current As Of:				
Nursing	Inpatient 0 Beds	Patient 0 Days	X Surgical Obstetrical Rehabilitation Cesarean/Deliv Therapy				
IntensiveCare	Inpatient 0 Beds	Patient 0 Days	X Anesthesia				
Pediatric/Adol escent	Inpatient 0 Beds	Patient 0 Days	Clinical Lab				
Psychiatric Nursing	Inpatient 0 Beds	Patient 0 Days	X Radiological/ Newborn/ Outpatient Imaging WellBaby Surgery				
Obstetrical Ante/Postprtum	Inpatient 0 Beds	Patient 0 Days	Pharmaceutical Emergency Central Plant				
Intermediate Care	Inpatient 0 Beds	Patient 0 Days	Dietetic Nuclear Support Medicine Services				
Skilled Nursing	Inpatient 0 Beds	Patient 0 Days	Administration				
Total Beds this B	uilding per service	0					
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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-01157 Building Name:	Original Building Service	Ce Core Year of Information: 2013					
<u>Type of Services</u> <u>Provided</u>		Information Current As Of:					
Nursing Inpatient Beds	0 Patient 0 Days	X Surgical Obstetrical Rehabilitation Cesarean/Deliv Therapy					
IntensiveCare Inpatient Beds	0 Patient 0 Days	X Anesthesia					
Pediatric/Adol Inpatient escent Beds	0 Patient 0 Days	Clinical Lab					
Psychiatric Inpatient Nursing Beds	0 Patient 0 Days	X Radiological/ Newborn/ Outpatient Imaging WellBaby Surgery					
Obstetrical Inpatient Ante/Postprtum Beds	0 Patient 0 Days	Pharmaceutical Emergency Central Plant					
Intermediate Inpatient Care Beds	0 Patient 0 Days	Dietetic Nuclear Support Medicine Services					
Skilled Nursing Inpatient Beds	0 Patient 0 Days	Administration					
Total Beds this Building per service	0						
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No data reporte	ed for whethe	er the gener	al acute care service	es and beds will be re is with a Building Res	elocated to a new,	existing or retrofitte	d building a	nd any 061(c)(2)(E)
corresponding	building Site.		numbers for building					

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Each hospital owner shall also report for each f number of inpatient beds by type of unit and se		e removed from active care servic	e, any net change in the
Building BLD-01157 Building Nam Number:	e: Original Building Service Core		
Will general acute care services and beds will b	be relocated to a new, Existing or re	trofitted building?	
Surgical Removed from hospital	services		
Each hospital owner shall also report for each f number of inpatient beds by type of unit and se		e removed from active care servic	e, any net change in the
Building BLD-01157 Building Nam Number:	e: Original Building Service Core		
Will general acute care services and beds will b	be relocated to a new, Existing or re	trofitted building?	
Anesthesia N/A			
Each hospital owner shall also report for each f number of inpatient beds by type of unit and se		e removed from active care servic	e, any net change in the
Building BLD-01157 Building Nam Number:	e: Original Building Service Core		
Will general acute care services and beds will b	be relocated to a new, Existing or re	trofitted building?	
Radiological/Imaging N/A			
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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-011	156 Building Name: O	riginal Building Patient T	ower				
Type of Service Provided	d						
		Surgical)bstetrical Cesarean/Deliv		Rehabilitation Therapy	
X Nursing	° 🗌	Anesthesia	_		<u> </u>		
	veCare			Obstetrical Recovery		Renal Dialysis	
Pediatric escent	ic/Adol	Clinical Lab Radiological/		lewborn/ VellBaby		Outpatient Surgery	
Psychiat Nursing		Imaging Pharmaceutical		mergency		Central Plant	
Obstetric Ante/Pos		Dietetic		luclear ledicine		Support Services	
Intermed Care	ediate	Administration					
Skilled N	Nursing						
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Type of Service Provided X Surgical Obstetrical Cesarean/Deliv Rehabilitation Therapy Nursing X Anesthesia Renal Dialysis IntensiveCare Obstetrical Recovery Renal Dialysis Pediatric/Adol escent Clinical Lab Outpatient Surgery Psychiatric Nursing Pharmaceutical Emergency Central Plant Obstetrical Ante/Postprtum Dietetic Nuclear Medicine Support Services	ding Number: BLD-01157	Building Name: C	Driginal Building Servi	ce Core		
IntensiveCare IntensiveCare Obstetrical Recovery Renal Dialysis Pediatric/Adol escent Clinical Lab Outpatient Surgery Psychiatric Nursing Pharmaceutical Emergency Central Plant Obstetrical Ante/Postprtum Dietetic Nuclear Medicine Support Services			Surgical			
Pediatric/Adol escent Newborn/ Newborn/ WellBaby Psychiatric Nursing Pharmaceutical Mursing Pharmaceutical Emergency Central Plant Obstetrical Ante/Postprtum Dietetic Nuclear Medicine Support Support Services						Renal Dialysis
Psychiatric Pharmaceutical Emergency Central Plant Obstetrical Ante/Postprtum Dietetic Nuclear Support Intermediate Care Intermediate Support Services			Radiological/			
Ante/Postprtum					Emergency	Central Plant
		m 🗌	Dietetic			
			Administration			
Skilled Nursing	Skilled Nursir	g				

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)							
Building Number: BLD-01156 Configuration: N/A	Building Name: Original Building	Patient Tower					
Type of Service Provided							
X Nursing	Surgical	Obstetr Cesare		habilitation erapy			
IntensiveCare	Anesthesia	Obstetr Recove		nal Dialysis			
Pediatric/Adol escent	Clinical Lab	Noove	, y				
Psychiatric Nursing	Radiological/ Imaging	Newbor WellBal		tpatient rgery			
Obstetrical Ante/Postprtum	Pharmaceutical	Emerge	ency Ce	ntral Plant			
Intermediate Care	Dietetic						
Skilled Nursing	X Administration			apport 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-01157	Building Name: Original Building	Service Core					
Configuration: N/A							
Type of Service Provided							
Nursing	X Surgical	Obste Cesa	etrical rean/Deliv		Rehabilitation Therapy		
IntensiveCare	X Anesthesia	Obste Reco			Renal Dialysis		
Pediatric/Adol escent	Clinical Lab		,				
Psychiatric Nursing	X Radiological/ Imaging	Newb WellB			Outpatient Surgery		
Obstetrical Ante/Postprtum	Pharmaceutical	Emer	gency		Central Plant		
Intermediate Care	Dietetic		ou Madiaina		Quanat		
Skilled Nursing	Administration		ar Medicine		Support Services		
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Report the final configuration of a requirements whether by retrofit of per Section 130061(c)(5)	Il buildings on the hospital campus show or by replacement and the type of service	ing how each bu e that will be prov	ilding will comply with ided in each general a	the SPC-5/N ctue care ho	PC-4 or 5 spital building
Building Number: BLD-01158	Building Name: Long Term Care				
Configuration: N/A					
Type of Service Provided					
X Nursing	Surgical		etrical rean/Deliv	Reha	abilitation apy
X IntensiveCare	Anesthesia	Obste Reco	etrical verv	Rena	al Dialysis
Pediatric/Adol escent	Clinical Lab		,		
Psychiatric Nursing	Radiological/ Imaging	Newb WellE		Outp Surg	atient ery
Obstetrical Ante/Postprtum	X Pharmaceutical	Emer	gency	Cent	ral Plant
Intermediate Care	Dietetic		na Madiaina		
X Skilled Nursing	Administration		ear Medicine	Sup Serv	vices
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	her by retrofit or by		hospital campus showing and the type of service the type of servic					
Building Number:	BLD-01160	Building Nar	me: Power Plant					
Configuration:	N/A							
Type of Service	Provided							
Nu	irsing		Surgical		Obste Cesar	trical ean/Deliv		Rehabilitation Therapy
	ensiveCare		Anesthesia		Obste Recov			Renal Dialysis
	diatric/Adol cent		Clinical Lab					
	ychiatric Irsing		Radiological/ Imaging		Newb WellB			Outpatient Surgery
	ostetrical te/Postprtum		Pharmaceutical		Emerg	gency	X	Central Plant
Inte Ca	ermediate Ire		Dietetic		Nuclea	ar Medicine	X	Support
Ski	illed Nursing		Administration					Services
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	f all buildings on the hospital campus show it or by replacement and the type of servic			
Building Number: BLD-0116	Building Name: Radiation Thera	ару		
Configuration: N/A				
Type of Service Provided				
Nursing	Surgical		etrical	Rehabilitation Therapy
	Anesthesia	Obste Reco	etrical	Renal Dialysis
Pediatric/Ado escent	Clinical Lab			
Psychiatric Nursing	X Radiological/ Imaging	Newb WellE		Outpatient Surgery
Obstetrical Ante/Postprtu	Pharmaceutical	Emer	gency	Central Plant
Intermediate Care	Dietetic			
Skilled Nursin	Administration		ear Medicine	Support Services
OSHPD FDD SB499 Report	Data Last Update: 10/22/2014	Submission Date	e: 10/22/2014 Printed	: 10/24/2014 6:25 AM

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Report the final configuration of a requirements whether by retrofit of per Section 130061(c)(5)	Il buildings on the hospital campus show or by replacement and the type of service	ing how each bu e that will be prov	ilding will comply with the rided in each general actu	e SPC-5/NF ue care hos	'C-4 or 5 pital building
Building Number: BLD-01162	Building Name: 1992 Pavilion				
Configuration: N/A					
Type of Service Provided					
X Nursing	Surgical		etrical	Reha Thera	bilitation apy
X IntensiveCare	Anesthesia	Obste Reco	etrical	Rena	l Dialysis
X Pediatric/Adol escent	Clinical Lab		,		
Psychiatric Nursing	X Radiological/ Imaging	Newb WellE		Outpa Surge	
X Obstetrical Ante/Postprtum	Pharmaceutical	X Emer	rgency	Centr	al Plant
Intermediate Care	Dietetic	X Nucle	ear Medicine	_] Supp	ort
Skilled Nursing	Administration			Servi	
OSHPD FDD SB499 Report	Data Last Update: 10/22/2014	Submission Date	e: 10/22/2014 Prir	nted: 10/24/	2014 6:25 AM

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	I buildings on the hospital campus showi r by replacement and the type of service				
Building Number: BLD-03151	Building Name: Health Center (N	orth Building)			
Configuration: N/A					
Type of Service Provided					
Nursing	Surgical	Obste Cesa	etrical rean/Deliv	x	Rehabilitation Therapy
IntensiveCare	Anesthesia	Obste Reco			Renal Dialysis
Pediatric/Adol escent	Clinical Lab	Reco	very		
Psychiatric Nursing	Radiological/ Imaging	Newb WellE			Outpatient Surgery
Obstetrical Ante/Postprtum	Pharmaceutical	Emer	gency		Central Plant
Intermediate Care	Dietetic				
Skilled Nursing	X Administration		ear Medicine	X	Support Services
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	er by retrofit or by		hospital campus showin and the type of service t					
Building Number:	BLD-03152	Building Na	me: Health Center (East	st Buildir	ng)			
Configuration:	N/A							
Type of Service	Provided							
Nur	sing		Surgical		Obstetrica Cesarean/		X	Rehabilitation Therapy
	nsiveCare		Anesthesia		Obstetrica Recovery	I		Renal Dialysis
Ped	liatric/Adol ent		Clinical Lab		,			
	rchiatric sing		Radiological/ Imaging		Newborn/ WellBaby			Outpatient Surgery
	stetrical e/Postprtum		Pharmaceutical		Emergenc	у		Central Plant
Inte Car	ermediate		Dietetic					
	led Nursing	X	Administration		Nuclear M	edicine	X	Support Services
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	her by retrofit or by		hospital campus showin and the type of service t				
Building Number:	BLD-03153	Building Na	me: Health Center (So	uth Build	ling)		
Configuration:	N/A						
Type of Service	Provided						
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
Int	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	ediatric/Adol cent		Clinical Lab				
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	ostetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant
Int Ca	ermediate		Dietetic				
	illed Nursing	X	Administration		Nuclear Medicine	X	Support Services
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Report the final con requirements wheth per Section 130061	ner by retrofit or by	ildings on the replacement	hospital campus showin and the type of service th	g how ea hat will b	ach buil be provi	lding will comply with ded in each general	n the SP actue ca	C-5/NPC-4 or 5 are hospital building
Building Number:	BLD-03272	Building Na	me: ED Shannon Towe	er				
Configuration:	N/A							
Type of Service	Provided							
X Nu	rsing	X	Surgical		Obste Cesar	trical ean/Deliv		Rehabilitation Therapy
	ensiveCare	X	Anesthesia		Obste Recov			Renal Dialysis
	diatric/Adol cent	X	Clinical Lab					
	ychiatric rsing	X	Radiological/ Imaging		Newbo WellB			Outpatient Surgery
	stetrical te/Postprtum		Pharmaceutical		Emerg	gency		Central Plant
Inte Cal	ermediate re	X	Dietetic		Nucle	ar Medicine	X	Support
Ski	illed Nursing	X	Administration					Services
OSHPD FDD SB499 R	Report D	ata Last Updat	e: 10/22/2014	Submissi	ion Date	: 10/22/2014	Printed:	10/24/2014 6:25 AM

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	er by retrofit or by		hospital campus showing and the type of service the type of servic					
Building Number:	BLD-03666	Building Na	me: 1968 Generator Bu	uilding				
Configuration:	N/A							
Type of Service	Provided							
Nur	rsing		Surgical		Obsteti Cesare	rical ean/Deliv		Rehabilitation Therapy
	ensiveCare		Anesthesia		Obsteti Recove			Renal Dialysis
Pec esc	diatric/Adol cent		Clinical Lab					
	/chiatric rsing		Radiological/ Imaging		Newbo WellBa			Outpatient Surgery
	stetrical e/Postprtum		Pharmaceutical		Emerge	ency	X	Central Plant
Inte Car	ermediate		Dietetic					
	lled Nursing		Administration		Nuclea	r Medicine	X	Support Services
	anot D-		40/22/2044	Cubasia -	ion Data	10/00/0011	Drinted	40/04/0014 6:05 AM
OSHPD FDD SB499 R	eport Da	ta Last Update	e: 10/22/2014	SUDMISS	ion Date:	10/22/2014	Printed:	10/24/2014 6:25 AM

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	her by retrofit or by		hospital campus showin and the type of service t					
Building Number:	BLD-03715	Building Na	me: 1992 Pavilion Brid	ge				
Configuration:	N/A							
Type of Service	e Provided							
Nu	ursing		Surgical		Obstetr Cesare	ical an/Deliv		Rehabilitation Therapy
	tensiveCare		Anesthesia		Obstetr Recove			Renal Dialysis
	ediatric/Adol cent		Clinical Lab			.,		
	sychiatric ursing		Radiological/ Imaging		Newbo WellBa			Outpatient Surgery
	ostetrical hte/Postprtum		Pharmaceutical		Emerge	ency		Central Plant
Inte Ca	ermediate are		Dietetic		Nuclear	r Medicine	X	Support
Sk	illed Nursing		Administration					Services
			40/00/0044	<u> </u>		10/00/0011	D · / · ·	40/04/0044.005 AM
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	her by retrofit or by		hospital campus showin and the type of service th					
Building Number:	BLD-05468	Building Na	me: Central Plant Expa	ansion				
Configuration:	N/A							
Type of Service	Provided							
Nu	ırsing		Surgical		Obstetri Cesarea			Rehabilitation Therapy
	ensiveCare		Anesthesia		Obstetri Recover			Renal Dialysis
	ediatric/Adol cent		Clinical Lab			,		
	ychiatric Irsing		Radiological/ Imaging		Newbori WellBab			Outpatient Surgery
	ostetrical ite/Postprtum		Pharmaceutical		Emerge	ncy	X	Central Plant
Inte Ca	ermediate are		Dietetic		Nuclear	Medicine		Support
Sk	illed Nursing		Administration		Nuclear	Wedicine		Services
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	de information on SPC-5 per Section		of inpatient beds t	by type of \$	Service provided by I	building	s that are classified a	as SPC-2, SP	C-3, SPC-4,
Buildi	ng Number: BLC	D-01158	Building Na	ame: Lo	ng Term Care				
Туре	e of Service Prov	vided							
×	Nursing	Inpatient Beds	79		Surgical		Obstetrical Cesarean/Deliv	Reha Ther	abilitation apy
X	IntensiveCare	Inpatient Beds	24		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	
X	Skilled Nursing	Inpatient Beds	35		Administration				
	Total Beds this Building		138						
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Report \	Year: 2014	11968	Presbyterian I	ntercommur	nity Hospital	Whittier		Page:35 of 55					
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-01160 Building Name: Power Plant													
Type of Service Provided													
	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 Rena	Il Dialysis					
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outp Surge	atient ery					
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	X Centr	ral Plant					
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Supp Servi						
	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-01161 Building Name: Radiation Therapy													
Type of Service Provided													
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha Thera	abilitation apy						
IntensiveCar	re Inpatient Beds	0		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	Emergency	Cent	ral Plant						
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Servi							
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-01162	Building N	lame: 19	92 Pavilion]
Type of Service P	rovided							
X Nursing	Inpatient Beds	34		Surgical		Obstetrical Cesarean/Deliv		nabilitation erapy
X IntensiveCare	e Inpatient Beds	34		Anesthesia				
Pediatric/Ado	l Inpatient Beds	34		Clinical Lab		Dbstetrical Recovery	Rer	nal Dialysis
Psychiatric	Inpatient Beds	0	X	Radiological/ Imaging		Newborn/ WellBaby		patient gery
Obstetrical X Ante/Postprtu	Inpatient um Beds	32		Pharmaceutical	X	Emergency	Cer	ntral Plant
Intermediate	Inpatient Beds	0		Dietetic		Nuclear Aedicine		oport vices
Skilled Nursir	ng Inpatient Beds	0		Administration				
Total Beds th Building	is	134						
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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)							
Build	ing Number: BL	D-03151	Building N	lame: He	alth Center (North E	Building)		
Тур	e of Service Prov	rided						
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	X Reha Thera	ibilitation 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	X Supp Servi	ort ces
	Skilled Nursing	Inpatient Beds	0	X	Administration			
	Total Beds this Building		0					
OSHPE	FDD SB499 Repo	rt D	Data Last Update	: 10/22/20)14 Submiss	ion Date: 10/22/2014	Printed: 10/24/	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)							
Build	ing Number: BLI	D-03152	Building N	lame: He	ealth Center (East B	uilding)		
<u>Тур</u>	e of Service Prov	vided						
	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	Il 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	X Supp Servi	ort ces
	Skilled Nursing	Inpatient Beds	0	X	Administration			
	Total Beds this Building		0					
OSHP	D FDD SB499 Repo	rt D	Data Last Update	: 10/22/20	014 Submiss	ion Date: 10/22/2014	Printed: 10/24/	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)							
Buildi	ing Number: BL	D-03153	Building N	lame: He	ealth Center (South I	Building)		
<u>Typ</u>	e of Service Prov	vided						
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	X Reha Thera	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	X Supp Servi	port ices
	Skilled Nursing	Inpatient Beds	0	X	Administration			
	Total Beds this Building		0					
OSHPE	D FDD SB499 Repo	rt C	Data Last Update	: 10/22/20	014 Submiss	ion Date: 10/22/2014	Printed: 10/24/	/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:	3LD-03272	Building N	ame: E) Shannon Tower				
Type of Service Pi	rovided							
X Nursing	Inpatient Beds	144	X	Surgical	Obstetrical Cesarean/Deliv	Reha Thera	bilitation apy	
IntensiveCare	e Inpatient Beds	0	X	Anesthesia				
Pediatric/Adol	l Inpatient Beds	0	X	Clinical Lab	Obstetrical Recovery	Rena	l Dialysis	
Psychiatric	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby	Outp Surge	atient ery	
Obstetrical Ante/Postprtu	Inpatient m Beds	0		Pharmaceutical	Emergency	Cent	al Plant	
Intermediate	Inpatient Beds	0	X	Dietetic	Nuclear Medicine	X Supp Servi		
Skilled Nursin	g Inpatient Beds	0	X	Administration				
Total Beds thi Building	s	144						
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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	0-03666	Building N	Name: 19	68 Generator Building			
Туре	e of Service Prov	rided						
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha Thera	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	Outpa Surge	atient ery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	X Centr	al Plant
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Supp Servi	
	Skilled Nursing	Inpatient Beds	0		Administration			
	Total Beds this Building		0					
DSHPD	FDD SB499 Repor	rt D	ata Last Update	: 10/22/20	014 Submission	Date: 10/22/2014	Printed: 10/24/	2014 6:25 AM

Report	Year: 2014	11968	Presbyterian I	ntercommur	nity Hospital	Whittier		Page:43 of 55
	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)							C-3, SPC-4,
Buildi	ng Number: BLI	D-03715	Building N	lame: 19	92 Pavilion Bridge			
Туре	e 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	Outpa Surge	atient ery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Centi	al Plant
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Supp Servi	ort ces
	Skilled Nursing	Inpatient Beds	0		Administration			
	Total Beds this Building		0					
OSHPD	FDD SB499 Report	rt D	ata Last Update	: 10/22/20)14 Submiss	on Date: 10/22/2014	Printed: 10/24/	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)							
Build	ing Number: BLC	D-05468	Building N	lame: Ce	ntral Plant Expansio	n		
Тур	e of Service Prov	vided						
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha Thera	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	Outpa Surge	atient ery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	X Centr	al 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	D FDD SB499 Repo	rt D	Data Last Update	: 10/22/20)14 Submissi	on Date: 10/22/2014	Printed: 10/24/	2014 6:25 AM

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Include information on the number of inpatient to SPC-5 per Section 130061(e)	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-01158 Buil	ding Name: Long Term Care							
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric						
Inpatient 62 Inpatient 7763 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 35 Inpatient 6 Bed Days	5990					
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 24 Inpatient 1819 Bed Days	Inpatient 17 Inpatient 2873 Bed Days	Inpatient 0 Inpatient Bed Days	0					
Coronary Care	Chemical Dependency	Total Beds this Total Beds Building Per Building F						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service	138					
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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-01160 Bu	ilding Name: Power Plant						
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					
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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-01161 Bu	ilding Name: Radiation Therapy						
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					
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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-01162 Bui	Iding Name: 1992 Pavilion					
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric				
Inpatient 34 Inpatient 4257 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days				
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing				
Inpatient 32 Inpatient 9973 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days				
Pediatric	Intensive Care Newborn Nursery	Intermediate Care				
Inpatient 34 Inpatient 1236 Bed Days	Inpatient 34 Inpatient 6090 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 134 134				
OSHPD FDD SB499 Report Data Last U	Jpdate: 10/22/2014 Submission Date:	10/22/2014 Printed: 10/24/2014 6:25 AM				

Report Year: 2014 11968 Presb	yterian Intercommunity Hospital	Whittier Page:49 of 55	
Include information on the number of inpatie SPC-5 per Section 130061(e)	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-03151 B	uilding Name: Health Center (North Build	ing)	
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 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	
OSHPD FDD SB499 Report Data Las	st Update: 10/22/2014 Submission Date:	: 10/22/2014 Printed: 10/24/2014 6:25 AM	

Report Year:201411968Presby	terian Intercommunity Hospital	Whittier Page:50 of 55
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-03152 Bu	ilding Name: Health Center (East Building	g)
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: 10/22/2014 Submission Date:	10/22/2014 Printed: 10/24/2014 6:25 AM

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Include information on the number of inpatient SPC-5 per Section 130061(e)	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-03153 Bu	ilding Name: Health Center (South Build	ling)	
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 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 SPC-5 per Section 130061(e)	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-03272 Buil	ding Name: ED Shannon Tower		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 144 Inpatient 18029 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 144 144	
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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-03666	Building Name: 1968 Generator Building	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient Days	0 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 Days	0 Inpatient 0 Inpatient 0 Bed Days	Unit Service 0
OSHPD FDD SB499 Report Data	Last Update: 10/22/2014 Submission Date:	10/22/2014 Printed: 10/24/2014 6:25 AM

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Include information on the number of inpa SPC-5 per Section 130061(e)	tient beds by type of unit provided by buildings th	nat are classified as SPC-2, SPC-3, SPC-4, and
Building Number: BLD-03715	Building Name: 1992 Pavilion Bridge	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient Days	0 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 Days	0 Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0
DSHPD FDD SB499 Report Data I	_ast Update: 10/22/2014 Submission Date	e: 10/22/2014 Printed: 10/24/2014 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-05468 B	uilding Name: Central Plant Expansion	
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
OSHPD FDD SB499 Report Data Las	t Update: 10/22/2014 Submission Date:	10/22/2014 Printed: 10/24/2014 6:25 AM