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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:	10180		
Facility Name:	The Ge	neral Hospital	
Address:	2200 Ha	arrison Ave	
City:	Eureka		
Hospital Owner/Lice	nsee:	St. Joseph Hospital / St. Joseph Health System	
Year of Repo	orting:	2015	
Contact 1 e-mail Ado	dress:	[Confidential data left blank intentionally.]	
Contact 2 e-mail Add	dress:	[Confidential data left blank intentionally.]	
Contact 3 e-mail Add	lress::	[Confidential data left blank intentionally.]	
Name of Subr	nitter:	Bill Eveloff	
Submission	Date:	12/11/2015 1:06:16 PM	

Report Y	'ear: 2015 10180	The General Hospital		Eureka		Page:2 of 53		
rebuild, r 130061.5	For buildings For buildings which are planned for rebuild, retrofit or replacement this report shall identify; Whether the hospital owner intends to rebuild, retrofit or replace the building to SPC2, SPC3, SPC4 or SPC5 per 130061(c)(1)(A). The deadline, as described in Section 130060 or 130061.5, for rebuild, retrofit or replacement of the building that the hospital owner intends to meet, and the applicable extension for which the hospital owner has been approved per Section 130061(c)(1)(B)							
Bldg. No.	Building Name	Alternate Building Address	Building Resolution	Final SPC Ratin If Required	ng Extension Date	Anticipated Completion Date		
BLD- 00523	Original Hospital Building	2200 Harrison Avenue	Replace	SPC2	01/01/2020	06/30/2019		
BLD- 00524	1950 Addition Building	2200 Harrison Avenue	Replace	SPC2	01/01/2020	06/30/2019		
BLD- 00525	1955 Addition Building	2200 Harrison Avenue	Replace	SPC2	01/01/2020	06/30/2019		
BLD- 00526	Center Building - 1957 Addition	2200 Harrison Avenue	Replace	SPC2	01/01/2020	06/30/2019		
BLD- 02651	West Side Building - 1957 Addition	2200 Harrison Avenue	Replace	SPC2	01/01/2020	06/30/2019		
		-						
	DD SB499 Report	Data Last Update: 12/11/2015	<b>.</b>	n Date: 12/11/2015		2/13/2015 6:25 AM		

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For each building which is planned for rebuild, retrofit or replacement, provide the project numbers, per Section $130061(c)(1)(C)$ . The projected construction start date or dates and projected Completion date or dates per Section $130061(c)(1)(D)$ and the most recent project status and approvals per Section $130061(c)(1)(E)$ .										
Building No:	BLD-00523		Original Hospital Buil	ding		Retrof Projec	it/Replacement t:	Yes-Subr	nitted	]
Facility Proje Number Num			ре		Date In	Plan Approv Date	ved Projected Start Date	Projected Completion Date	Status	CEQA Review
10183 H1425 -00	544-12	0 SB 9 Add	90 - Redwood Memorial ition&Rehab	Hosp	11/4/2014	10/20/2015 12:00:00 AN	)	12/31/2019	OPEN	No
SHPD FDD SE	3499 Report		Data Last Update:	12/11/2015	Submis	sion Date:	12/11/2015	Printed: 12/13/20	015 6:25 Al	M

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Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)						
Building Number: BLD-0	00523	Building Name:	Original Hospital Building			
Type of Service Provide	ed					
		npatient 0 Days	Surgical	Obstetrical Recovery		
	npatient 0 I eds	npatient Days 0	Anesthesia	Newborn/ WellBaby		
	npatient 0 eds	Inpatient Days 0	Clinical Lab	Emergency	,	
	npatient 0 eds	Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine		
	npatient 0 eds	Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitati Therapy	on	
	npatient 0 eds	Inpatient Days 0		Renal Dialy	vsis	
	npatient 0 eds	Inpatient Days 0	Support Services	Outpatient Surgery		
	Total Be Building	ds this 0	Obstetrical Cesarean/Deliv	Central Pla	nt	
OSHPD FDD SB499 Report	Data Last U	odate: 12/11/2015	Submission Date: 12/11/2015	Printed: 12/13/2	2015 6:25 AM	

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Provide the number of in	Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)						
Building Number: BLD		Building Name: 1	950 Addition Building				
	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery			
	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby			
	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency			
	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine			
	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical     Dietetic	Rehabilitation Therapy			
	Inpatient Beds	0 Inpatient Days 0		Renal Dialysis			
	Inpatient Beds	0 Inpatient Days 0	Support Services	Outpatient Surgery			
		Total Beds this <b>0</b> Building	Obstetrical Cesarean/Deliv	Central Plant			
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Provide the number of inp	patient beds and pat	ient days per type of service	e per building per Section 130061(	c)(1)(F)
Building Number: BLD-0		Building Name:	1955 Addition Building	
X Nursing In	npatient 15 leds	Inpatient 2534 Days	Surgical	Obstetrical Recovery
	npatient 0 leds	Inpatient Days 0	Anesthesia	Newborn/ WellBaby
	npatient 0 eds	Inpatient Days 0	Clinical Lab	Emergency
	npatient 0 eds	Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
	npatient 0 eds	Inpatient Days 0	Pharmaceutical	X Rehabilitation Therapy
	npatient 0 leds	Inpatient Days 0		Renal Dialysis
	npatient 0 eds	Inpatient Days 0	Support Services	Outpatient Surgery
	Total B Building		Obstetrical Cesarean/Deliv	X Central Plant
OSHPD FDD SB499 Report	Data Last l	Jpdate: 12/11/2015	Submission Date: 12/11/2015	Printed: 12/13/2015 6:25 AM

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Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)						
Building Number: BL		Building Name:	Center Building - 1957 Addition			
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery		
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby		
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency		
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine		
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical     Dietetic	Rehabilitation Therapy		
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis		
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services	Outpatient Surgery		
		Total Beds this <b>0</b> Building	Obstetrical Cesarean/Deliv	Central Plant		
OSHPD FDD SB499 Repor	t	Data Last Update: 12/11/2015	Submission Date: 12/11/2015	Printed: 12/13/2015 6:25 AM		

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Provide the number of	Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)						
Building Number: BLI		Building Name:	/est Side Building - 1957 Additi	ion			
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery			
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby			
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency			
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine			
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical     Dietetic	Rehabilitation Therapy			
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis			
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services	Outpatient Surgery			
		Total Beds this <b>0</b> Building	Obstetrical Cesarean/Deliv	Central Plant			
OSHPD FDD SB499 Report	t	Data Last Update: 12/11/2015	Submission Date: 12/11/2015	Printed: 12/13/2015 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-00523 Build	ling Name: Origin	nal Hospital Building			
Medical / Surgical	(Include GYN)	Acute Respiratory	Care	Acute Psychiatric		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Pediatric		intensive Care New Nursery	/born	Intermediate Card		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care		Rehabilitation Center		Int. Care / developn Disabled	nent	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0	
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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-00524 Building Name: 1950 Addition Building						
Medical / Surgical (Include GYN) Acute Respiratory Care Acute Psychiatric						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie 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 Inpatie 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 Inpatien 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 Inpatier Bed Days	nt 0			
Coronary Care	Chemical Dependency	Total Beds this Total E Building Per Buildin Unit Servic				
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	0	0			

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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-00525       Building Name:       1955 Addition Building											
Medical / Surgical (Include 0	GYN) Acute Respiratory	/ Care	Acute Psychiatric								
Inpatient 0 Inpatient Bed Days	t 0 Inpatient 0 Bed	Inpatient 0 Days		oatient 0 ays							
Perinatal (excluse Newborn	/GYN) Burn		Skilled Nursing								
Inpatient 0 Inpatient Bed Days	t 0 Inpatient 0 Bed	Inpatient 0 Days		ays							
Pediatric	intensive Care Ne Nursery	wborn	Intermediate Card								
Inpatient 0 Inpatient Bed Days	t 0 Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inp Bed Da	oatient 0 ays							
Intensive Care	Rehabilitation Center		Int. Care / developmen Disabled	t							
Inpatient 0 Inpatient Bed Days	0 Inpatient 15 Bed	Inpatient 2613 Days	Inpatient 0 Inp Bed Da	patient 0 ys							
Coronary Care	Chemical Dependency		Building Per Bu	otal Beds this uilding Per ervice							
Inpatient 0 Inpatient Bed Days	0 Inpatient 0 Bed	Inpatient 0 Days	15	15							
	0 Inpatient 0		Unit Se	ervice							

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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-00526 Building Name: Center Building - 1957 Addition											
Medical / Surgical (Include GYN) Acute Respiratory Care Acute Psychiatric											
Inpatient 0 Inpatient 0 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 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 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	0	0								

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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-02651       Building Name:       West Side Building - 1957 Addition											
Medical / Surgical (Include GYN) Acute Respiratory Care Acute Psychiatric											
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days						
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing							
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days						
Pediatric		intensive Care New Nursery	born	Intermediate Card							
Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days						
Intensive Care		Rehabilitation Center		Int. Care / developn Disabled	nent						
Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days						
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service						
Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days	0	0						

Building Number	Building Name	Building to be Removed / Replaced / Rebuilt	
BLD-00523	Original Hospital Building	Replace	
BLD-00524	1950 Addition Building	Replace	
BLD-00525	1955 Addition Building	Replace	
BLD-00526	Center Building - 1957 Addition	Replace	
BLD-02651	West Side Building - 1957 Addition	Replace	
BLD-02652	Stair #1	Remain	
BLD-02653	Nursery	Remain	
BLD-02654	Stair #2	Remain	
BLD-02655	Stair #3	Remain	
BLD-02656	Radiology Wing	Remain	
BLD-02657	Lobby	Remain	

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No proposed new buildings to be constructed at this or another site.

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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)(2)(C)											
Building Number:     BLD-00523     Original Hospital Building     Removal Date:     06/30/2019											
Planned Uses for the buildin Planned use for building:	ng to be removed from acute care service	Y:									
Inpatient services currently of Nursing	delivered in the building:	Obstetrical Cesarean/D	eliv Rehabilitati Therapy	on							
IntensiveCare Pediatric/Adol escent	Anesthesia	Obstetrical Recovery	Renal Dialy	sis							
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery								
Obstetrical Ante/Postprtum	Pharmaceutical Dietetic	Emergency	Central Pla	nt							
Care Skilled Nursing	Administration	Nuclear Medicine	Support Services								
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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)(2)(C)										
Building Number: BLD-	00524	1950 Addition Build	ling		Removal Date:	06/30/2019	]			
Planned Uses for the build	ling to be rem	noved from acute care service:								
Planned use for building:										
Inpatient services current	<u>/ delivered in</u>	<u>the building:</u> Surgical		Obstetrical Cesarean/De	liv	Rehabilitatior Therapy	I			
IntensiveCare Pediatric/Adol escent		Anesthesia Clinical Lab		Obstetrical Recovery		Renal Dialysi	S			
Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant				
Skilled Nursing		Administration		Nuclear Medicine		Support Services				
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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)(2)(C)										
Building Number: BL	D-00525	1955 Addition Build	ding	Removal Date:	06/30/2019					
Planned Uses for the b	uilding to be re	moved from acute care service:	:							
Planned use for buildin	g:									
Inpatient services curre	ntly delivered i	n the building:			Dehebilitation					
X Nursing		Surgical	Obstetrical Cesarean/D	eliv	Rehabilitation Therapy					
IntensiveCard Pediatric/Add escent		Anesthesia Clinical Lab	Obstetrical Recovery		Renal Dialysis					
Psychiatric Nursing		Radiological/ Imaging	Newborn/ WellBaby		Outpatient Surgery					
Obstetrical Ante/Postprtu	ım E	Pharmaceutical	Emergency		Central Plant					
Intermediate Care		Dietetic	5,							
Skilled Nursi	ng	Administration	Nuclear Medicine		Support Services					
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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)(2)(C)										
Building Number:     BLD-00526     Center Building - 1957 Addition     Removal Date:     06/30/2019										
Planned Uses for the build	ing to be ren	noved from acute care service:								
Planned use for building:										
Inpatient services currently	delivered in	<u>the building:</u> Surgical	Obstetric Cesarea		Rehabilitation Therapy	1				
IntensiveCare		Anesthesia Clinical Lab	Obstetric Recovery		Renal Dialysis	s				
Psychiatric Nursing		Radiological/ Imaging	Newborn WellBaby		Outpatient Surgery					
Obstetrical Ante/Postprtum		Pharmaceutical Dietetic	Emergen	су	Central Plant					
Care Care Skilled Nursing		Administration	Nuclear Medicine		Support Services					
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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)(2)(C)										
Building Number: BLD-	02651	West Side Building	- 1957 Additic	n	Removal Date:	06/30/2019				
Planned Uses for the build	ling to be ren	noved from acute care service:								
Planned use for building:										
Inpatient services current	/ delivered in	the building: Surgical		tetrical arean/Del	iv	Rehabilitation Therapy	n			
IntensiveCare Pediatric/Adol escent		Anesthesia Clinical Lab		tetrical overy		Renal Dialys	is			
Psychiatric Nursing		Radiological/ Imaging		/born/ Baby		Outpatient Surgery				
Obstetrical Ante/Postprtum		Pharmaceutical	Eme	ergency		Central Plant	t			
Skilled Nursing		Administration	Nucl Med			Support Services				
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No data reported	I for Section	n 130061(c)	(2)(D).		

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lo data reporte	d for Section	on 130061(c	)(2)(D).		

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	eneral acute care services ar ct numbers for buildings with					responding
Building BLI Number:	D-00525 Building Name:	1955 Addition Building				
Will general acute car	e services and beds will be r	elocated to a new, Existing	g or retrofitted	building?		
Nursing	N/A					
	eneral acute care services ar ct numbers for buildings with					responding
Number:	D-00525 Building Name:	1955 Addition Building				
	e services and beds will be r	elocated to a new, Existing	g or retrofitted	building?		
Rehabilitation Therapy	N/A					
	eneral acute care services ar ct numbers for buildings with					responding
Building BLI Number:	D-00525 Building Name:	1955 Addition Building				
Will general acute car	e services and beds will be r	elocated to a new, Existing	g or retrofitted	building?		
CentralPlant	N/A					
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Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c)(2)(E)								
Number:								
	and beds will be reloc	ated to a new, Exist	ing or retrofitted b	building?				
Rehabilitation Center								
			<b>•</b> • • • •					
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No data reporte	ed for Section	n 130061(c)	(3).		

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Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per Section 130061(c)(4)							
Building Number: BLD-00523 Building Name: Original Hospital Building							
Type of Service	e Provided						
		Surgical	Obstetrical Cesarean/Deliv	Rehabil Therap			
	Nursing	Anesthesia		Banal	Dielysia		
	IntensiveCare	Clinical Lab	Obstetrical Recovery	Renal D	ກີ່ແນ້ວເວ		
	Pediatric/Adol escent	Radiological/	Newborn/ WellBaby	Outpati Surgery	ent /		
	Psychiatric Nursing	Imaging Pharmaceutical	Emergency	Central	Plant		
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	Suppor Service	t		
	Intermediate Care	Administration					
	Skilled Nursing						
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Report any general per Section 130061		tient service that is provided in any g	eneral acute care hos	spital building that is rate	ed SPC-1
Building Number:	BLD-00524 Buildin	g Name: 1950 Addition Building			
Type of Service	e Provided				
		Surgical	Obstetrical Cesarean/De	eliv Rehabi Therap	
	Nursing	Anesthesia	_		<b></b>
	IntensiveCare		Obstetrical Recovery	Renal L	Dialysis
	Pediatric/Adol escent	Clinical Lab	Newborn/	Outpati Surgery	
	Psychiatric	Radiological/ Imaging	WellBaby		
	Nursing	Pharmaceutical	Emergency	Central	Plant
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	Suppor Service	
	Intermediate Care	Administration			
	Skilled Nursing				
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Report any general per Section 130061		tient service that is provided in any g	jeneral ac	ute care hospital b	uilding th	at is rated SPC-1
Building Number:	BLD-00525 Buildin	g Name: 1955 Addition Building				
Type of Service	e Provided					
		Surgical		) bstetrical cesarean/Deliv	Х	Rehabilitation Therapy
X	Nursing		C C			
	IntensiveCare	Anesthesia		)bstetrical Recovery		Renal Dialysis
	Pediatric/Adol	Clinical Lab				Outpatient
	escent	Radiological/		lewborn/ VellBaby		Outpatient Surgery
	Psychiatric	Imaging				
	Nursing	Pharmaceutical	E	mergency	Х	Central Plant
	Obstetrical Ante/Postprtum	Dietetic		luclear ledicine		Support Services
	Intermediate Care	Administration				
	Skilled Nursing					
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	Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per Section 130061(c)(4)							
Building Number: BLD-00526 Building Name: Center Building - 1957 Addition								
Type of Service	e Provided							
		Surgical		Dbstetrical Cesarean/Deliv		Rehabilitation Therapy		
	Nursing	Anesthesia						
	IntensiveCare			Obstetrical Recovery		Renal Dialysis		
	Pediatric/Adol	Clinical Lab				Outpatient		
	escent	Radiological/		Newborn/ VellBaby		Surgery		
	Psychiatric Nursing			Emergency		Operational Dispet		
		Pharmaceutical		Inergency		Central Plant		
	Obstetrical Ante/Postprtum	Dietetic		luclear Aedicine		Support Services		
	Intermediate Care	Administration						
	Skilled Nursing							
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Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per Section 130061(c)(4)							
Building Number: BLD-02651 Building Name: West Side Building - 1957 Addition							
Type of Service	e Provided						
		Surgical		Dbstetrical Cesarean/Deliv	Reha Ther	abilitation apy	
	Nursing	Anesthesia					
	IntensiveCare			Dbstetrical Recovery	Rena	al Dialysis	
	Pediatric/Adol escent	Clinical Lab	1	Newborn/	Outp Surg	patient Jery	
	Psychiatric	Radiological/ Imaging		VellBaby			
	Nursing	Pharmaceutical	E	Emergency	Cent	tral Plant	
	Obstetrical Ante/Postprtum	Dietetic		luclear Aedicine	Supp Serv		
	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 acute care hospital building per Section 130061(c)(5)								
Building Number: BLD-00523 Building Name: Original Hospital Building								
Configuration: N/A								
Type of Service Provided								
Nursing	Surgical	Obstetrical Cesarean/Deliv	Reha Thera	bilitation apy				
IntensiveCare	Anesthesia	Obstetrical Recovery	Rena	l Dialysis				
Pediatric/Adol escent	Clinical Lab	Noovoly						
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge					
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Centr	al Plant				
Intermediate Care	Dietetic	Nuclear Medicine						
Skilled Nursing	Administration		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 acute care hospital building per Section 130061(c)(5)									
Building Number: BLD-00524 Building Name: 1950 Addition Building								-	
Configuration: N/A									
Type of Service	e Provided								
Nu	ursing		Surgical		Obste Cesar	trical ean/Deliv		Rehabilitation Therapy	
Int	tensiveCare		Anesthesia		Obste Recov			Renal Dialysis	
	ediatric/Adol cent		Clinical Lab	_		5	_		
	sychiatric ursing		Radiological/ Imaging		Newb WellB			Outpatient Surgery	
	ostetrical hte/Postprtum		Pharmaceutical		Emer	gency		Central Plant	
	ermediate are		Dietetic		Nucle	ar Medicine		Support	
Sk	tilled Nursing		Administration					Services	
			40/44/0045	0.1	ing D (				
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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 acute care hospital building per Section 130061(c)(5)							
Building Number: BLD-00525	Building Name: 1955 Addition Bu	ilding					
Configuration: N/A							
Type of Service Provided							
Nursing	Surgical	Obste Cesa	etrical rean/Deliv		Rehabilitation Therapy		
IntensiveCare	Anesthesia	Obste Reco			Renal Dialysis		
Pediatric/Adol escent	Clinical Lab	1000	vory				
Psychiatric Nursing	Radiological/ Imaging	Newb WellE			Outpatient Surgery		
Obstetrical Ante/Postprtum	Pharmaceutical	Emer	gency		Central Plant		
Intermediate Care	Dietetic		<b>NA</b> 11 1		<b>a</b>		
Skilled Nursing	Administration		ear 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 acute care hospital building per Section 130061(c)(5)								
Building Number: BLD-00526 Building Name: Center Building - 1957 Addition								
Configuration: N/A								
Type of Service Provided								
Nursing	Surgical		etrical rean/Deliv	Reha	abilitation apy			
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	Pharmaceutical	Emer	gency	Cent	ral Plant			
Intermediate Care	Dietetic		ear Medicine		aart			
Skilled Nursing	Administration			Sup Ser	vices			
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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 acute care hospital building per Section 130061(c)(5)											
Building Number: BLD-02651 Building Name: West Side Building - 1957 Addition											
Configuration: N/A											
Type of Service	e Provided										
	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
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 are		Dietetic		Nuclear Medicine		Support				
	killed Nursing		Administration				Support Services				
				Cubasia-	on Data: 10/11/2015	Deinta-la	10/10/2015 C/25 AM				
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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 acute care hospital building per Section 130061(c)(5)											
Building Number:	BLD-02652	Building Na	me: Stair #1								
Configuration:	Configuration: N/A										
Type of Service	e Provided										
	ursing		Surgical		Obste Cesar	etrical rean/Deliv		Rehabilitation Therapy			
	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis				
	ediatric/Adol scent		Clinical Lab		Recovery						
	sychiatric ursing		Radiological/ Imaging		Newb WellB			Outpatient Surgery			
	bstetrical nte/Postprtum		Pharmaceutical		Emerg	gency		Central Plant			
	termediate are		Dietetic								
	killed Nursing	Administration			Nuclear Medicine		Support Services				
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	ther by retrofit or by		hospital campus showin and the type of service t					
Building Number:	BLD-02653	Building Nar	me: Nursery					
Configuration:	N/A							
Type of Service	e Provided							
	ursing		Surgical		Obste Cesar	etrical rean/Deliv		Rehabilitation Therapy
	tensiveCare		Anesthesia		Obste Recov			Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Recov	very		
	sychiatric ursing		Radiological/ Imaging		Newb WellB			Outpatient Surgery
	bstetrical nte/Postprtum		Pharmaceutical		Emerg	gency		Central Plant
	termediate are		Dietetic					
	killed Nursing		Administration		Nucle	ar Medicine		Support Services
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	ther by retrofit or by		hospital campus showin and the type of service t					
Building Number:	BLD-02654	Building Na	me: Stair #2					
Configuration:	N/A							
Type of Service	e Provided							
	ursing		Surgical		Obste Cesar	etrical rean/Deliv		Rehabilitation Therapy
	tensiveCare		Anesthesia		Obste Recov			Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Recor	very		
	sychiatric ursing		Radiological/ Imaging		Newb WellB			Outpatient Surgery
	bstetrical nte/Postprtum		Pharmaceutical		Emerg	gency		Central Plant
	termediate are		Dietetic					
	killed Nursing		Administration		Nucle	ar Medicine		Support Services
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	ther by retrofit or by		hospital campus showin and the type of service t					
Building Number:	BLD-02655	Building Na	me: Stair #3					
Configuration:	N/A							
Type of Service	e Provided							
	ursing		Surgical		Obste Cesar	etrical rean/Deliv		Rehabilitation Therapy
	tensiveCare		Anesthesia		Obste Recov			Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Recor	very		
	sychiatric ursing		Radiological/ Imaging		Newb WellB			Outpatient Surgery
	bstetrical nte/Postprtum		Pharmaceutical		Emerg	gency		Central Plant
	termediate are		Dietetic					
	killed Nursing		Administration		Nucle	ar Medicine		Support Services
OSHPD FDD SB499 I	Report D	ata Last Updat	e: 12/11/2015	Submissi	on Date	e: 12/11/2015	Printed:	12/13/2015 6:25 AM

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	f all buildings on the hospital campus sho it or by replacement and the type of servio			
Building Number: BLD-026	6 Building Name: Radiology Wing	]		
Configuration: N/A				
Type of Service Provided				
Nursing	Surgical	Obstetrical Cesarean/De		bilitation apy
	Anesthesia	Obstetrical Recovery	Rena	l Dialysis
Pediatric/Add escent	Clinical Lab			
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge	
Obstetrical Ante/Postprtu	n Pharmaceutical	Emergency	Centr	al Plant
Intermediate Care	Dietetic	Nuclear Medi	cine Supr	port
Skilled Nursir	Administration		Serv	
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	ther by retrofit or by		hospital campus showin and the type of service t					
Building Number:	BLD-02657	Building Na	me: Lobby					
Configuration:	N/A							
Type of Service	e Provided							
	ursing		Surgical		Obste Cesar	etrical rean/Deliv		Rehabilitation Therapy
	tensiveCare		Anesthesia		Obste Recov			Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Recov	very		
	sychiatric ursing		Radiological/ Imaging		Newb WellB			Outpatient Surgery
	bstetrical nte/Postprtum		Pharmaceutical		Emerg	gency		Central Plant
	termediate are		Dietetic					
	killed Nursing		Administration		Nucle	ar Medicine		Support Services
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Include information on and SPC-5 per Section		of inpatient beds b	by type of s	Service provided by	buildings that are classified	as SPC-2, SPC	C-3, SPC-4,
Building Number: BL	D-02652	Building Na	ame: Sta	air #1			
Type of Service Pro	vided						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha Thera	bilitation apy
IntensiveCare	Inpatient Beds	0		Anesthesia			
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena Rena	l Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge	
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Centr	al Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Servi	
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
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	ion on the number o Section 130061(e)	f inpatient beds	by type of \$	Service provided by	buildings that are classified	as SPC-2, SPC	D-3, SPC-4,
Building Numbe	r: BLD-02653	Building N	lame: Nu	irsery			
Type of Servic	e Provided						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha	bilitation apy
	Care Inpatient Beds	0		Anesthesia			
Pediatric/	Adol Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	al Dialysis
Psychiatri	ic Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outp Surge	atient ery
Obstetrica Ante/Post		0		Pharmaceutical	Emergency	Cent	ral Plant
Intermedi Care	ate Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Servi	ort ces
Skilled Nu	ursing Inpatient Beds	0		Administration			
Total Bed Building	ls this	0					
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Include information on and SPC-5 per Section		f inpatient beds	by type of \$	Service provided by b	puildings that are classified a	as SPC-2, SPC	C-3, SPC-4,
Building Number: BL	D-02654	Building N	ame: Sta	air #2			
Type of Service Pro	vided						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha Thera	bilitation apy
IntensiveCare	Inpatient Beds	0		Anesthesia			
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	l Dialysis
Psychiatric	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge	atient ery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Centi	al Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Servi	ort ces
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
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Include information o and SPC-5 per Section		of inpatient beds	by type of \$	Service provided by	buildings that are classified	as SPC-2, SPC	C-3, SPC-4,
Building Number: B	LD-02655	Building N	Name: <mark>St</mark>	air #3			
Type of Service Pre	ovided						
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	ıl Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outp Surg	atient ery
Obstetrical Ante/Postprtur	Inpatient n Beds	0		Pharmaceutical	Emergency	Cent	ral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Servi	oort ices
Skilled Nursing	) Inpatient Beds	0		Administration			
Total Beds this Building	3	0					
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Include information and SPC-5 per Se		of inpatient beds	by type of \$	Service provided by	buildings that are classified a	as SPC-2, SPC	C-3, SPC-4,
Building Number:	BLD-02656	Building N	ame: Ra	idiology Wing			
Type of Service	Provided						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha	bilitation apy
IntensiveCa	are Inpatient Beds	0		Anesthesia			
Pediatric/Ac	dol Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	l Dialysis
Psychiatric	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge	atient ery
Obstetrical Ante/Postpr	Inpatient tum Beds	0		Pharmaceutical	Emergency	Centi	al Plant
Intermediate	e Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Servi	
Skilled Nurs	sing Inpatient Beds	0		Administration			
Total Beds Building	this	0					
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	information on t C-5 per Section		f inpatient beds	by type of \$	Service provided by	buildings that a	e classified as SP	C-2, SP	C-3, SPC-4,
Building	g Number: BLD	0-02657	Building N	ame: Lo	bby				
Туре с	of Service Prov	ided							
N	Nursing	Inpatient Beds	0		Surgical	Obste Cesar	trical	Reha	abilitation apy
	ntensiveCare	Inpatient Beds	0		Anesthesia				
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obste Recov		] Rena	al Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newb WellB	orn/	Outp Surg	patient ery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emerg	gency	Cent	ral Plant
	ntermediate Care	Inpatient Beds	0		Dietetic	Nuclea Medic		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 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-02652 Bui	Iding Name: Stair #1		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	ot O
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	it 0
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	it 0
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	ıt 0
Coronary Care	Chemical Dependency		l Beds this ling Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv	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-02653 Build	ding Name: Nursery		
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	
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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-02654 Build	ding Name: Stair #2		
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-02655 Build	ding Name: Stair #3		
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	
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-02656 Build	ding Name: Radiology Wing	
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 thisTotal Beds thisBuilding PerBuilding 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-02657 Build	ding Name: Lobby	
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 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 Update: 12/11/2015 Submission Date: 12/11/2015 Printed: 12/13/2015 6:25 AM		