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Senate Bill 499 (SB 499) Hospital Report

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

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

Facility Number:	10184		
Facility Name:	St. Jose	ph Hospital	
Address:	2700 Do	blbeer Street	
City:	Eureka		
Hospital Owner/Lice Year of Rep		St. Joseph Hospital / St. Joseph Health System	
Contact 1 e-mail Ad	ldress:	[Confidential data left blank intentionally.]]
Contact 2 e-mail Ad	ldress:	[Confidential data left blank intentionally.]	
Contact 3 e-mail Add	dress::	[Confidential data left blank intentionally.]	
Name of Sub	mitter:	Bill Eveloff	
Submission	Date:	10/7/2015 5:24:38 PM	

Report Y	'ear: 2015 10184	St. Joseph Hospital		Eureka		Page:2 of 45	
For buildings For buildings which are planned for rebuild, retrofit or replacement this report shall identify; Whether the hospital owner intends to rebuild, retrofit or replace the building to SPC2, SPC3, SPC4 or SPC5 per 130061(c)(1)(A). The deadline, as described in Section 130060 or 130061.5, for rebuild, retrofit or replacement of the building that the hospital owner intends to meet, and the applicable extension for which the hospital owner has been approved per Section 130061(c)(1)(B)							
Bldg. No.	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date	
BLD- 00535	Original Hospital and Central Plant	2700 Dolbeer Street	Rebuild	SPC5	01/01/2020	06/30/2019	

Building	No: BLD-0	0535	Original Hospital and Central Plan	t	Retrofit/Re Project:	eplacement	Yes-Subr	nitted	
acility Number	Project Number	Sub Num	Scope	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
	H140064-12 -00	0	Basement and 1st Floor Exiting & Utility Rerouting	1/15/2014	7/10/2015 12:00:00 AM	01/15/2014	07/01/2019	OPEN	No
0184	HS050197-0	0	NORTHEAST BUILDING ADDITION	1/24/2005	3/19/2008 12:00:00 AM	10/12/2007	12/31/2011	FIEL	No

Report Year: 2015	10184	St. Joseph Hospital	Eureka	Page:4 of 45
Provide the number of ir	npatient be	eds and patient days per type of service	per building per Section 130061(c)(1)(F	-
Building Number: BLD	-00535	Building Name:	Original Hospital and Central Plant	
Type of Service Provid	ded			
	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 X Dietetic	Rehabilitation Therapy
	Inpatient Beds	0 Inpatient Days 0	X Administration	Renal Dialysis
	Inpatient Beds	0 Inpatient Days 0	X Support X Services	Outpatient Surgery
	2000	Total Beds this 0 Building	Obstetrical Cesarean/Deliv	Central Plant
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Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)							
Building Number: BLD-00535 Building Name: Original Hospital and Central Plant							
Medical / Surgical (Inclu	ude GYN)	Acute Respiratory	Care	Acute Psychiatric			
Inpatient 0 Inpa Bed Day	atient 0 ys	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Perinatal (excluse Newl	born / GYN)	Burn		Skilled Nursing			
Inpatient 0 Inpa Bed Day	atient 0 ys	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Pediatric		intensive Care New Nursery	born	Intermediate Card			
Inpatient 0 Inpa Bed Day	atient 0 /s	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Intensive Care		Rehabilitation Center		Int. Care / developn Disabled	nent		
Inpatient 0 Inpa Bed Day		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 Inpa Bed Day		Inpatient 0 Bed	Inpatient 0 Days	0	0		
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Building Number	Building Name	Building to be Removed / Replaced / Rebuilt	
BLD-00535	Original Hospital and Central Plant	Rebuild	
BLD-00536	Linear Accelerator (Phase II)	Remain	
BLD-00537	Phase III Addition Building	Remain	
3LD-00538	Emergency Entrance Vestibule	Remain	
BLD-00539	Radiation Oncology Addition	Remain	
3LD-00540	Heart Center	Remain	
BLD-00541	East Wing	Remain	
BLD-00542	Emergency Entrance Vestibule Addition	Remain	
BLD-02735	Emergency Generator #1 CMU Building	Remain	
BLD-02736	Emergency Generator #2 Enclosure Shed	Remain	
BLD-03625	Northeast Building	Remain	

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List ALL proposed ne	ew buildings to be constructed at t	his or another site.				
Building Number	Building Name		New Site			
N_1	Northeast 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)(2)(C)						
Building Number: BLD-00535 Original Hospital and Central Plant Removal Date: 06/30/2019						
Planned Uses for the build	ling to be removed from acute care service	:				
Planned use for building:	Other Jurisdi	ction:				
Other Usage:	Re-purpose for non-code required admini	strative and outpatient services				
Inpatient services current	y delivered in the building:		_			
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	1		
IntensiveCare Pediatric/Adol	Anesthesia	Obstetrical Recovery	Renal Dialysi	S		
escent Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	X Outpatient Surgery			
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Plant	i -		
Intermediate Care	X Dietetic					
Skilled Nursing	X Administration	Nuclear Medicine	X Support Services			
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No data reported for Section	on 130061(c)	(2)(D).		

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No data reported for Section	on 130061(c))(2)(D).		

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Report whether the general acute care services and beds will be relocated to a new, exist building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "R	
Building BLD-00535 Building Name: Original Hospital and Central Plant Number:	
Will general acute care services and beds will be relocated to a new, Existing or retrofitted Dietetic N/A	I building?
Report whether the general acute care services and beds will be relocated to a new, exist building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "R	ing or retrofitted building and any corresponding Replace" per Section 130061(c)(2)(E)
Building BLD-00535 Building Name: Original Hospital and Central Plant	
Will general acute care services and beds will be relocated to a new, Existing or retrofitted Administration N/A	I building?
Report whether the general acute care services and beds will be relocated to a new, exist building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "R	
Building BLD-00535 Building Name: Original Hospital and Central Plant Number:	
Will general acute care services and beds will be relocated to a new, Existing or retrofitted	1 building?
Support Services 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)						
Building BLD-00535 E Number:	Building Name: Original Hos	spital and Central Plant				
Will general acute care services a	nd beds will be relocated to a	new, Existing or retrofitted I	building?			
OutpatientSurgery N/A						
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No data reported	for Sectio	n 130061(c))(3).		

	seph Hospital	Eureka	Page:14 of 45			
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)						
uilding Number: BLD-00535 Buildin	ng Name: Original Hospital and C	Central Plant				
Type of Service Provided						
	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy			
Nursing	Anesthesia		Renal Dialysis			
IntensiveCare	Clinical Lab	Obstetrical Recovery				
Pediatric/Adol escent	Radiological/	Newborn/ WellBaby	X Outpatient Surgery			
Psychiatric Nursing	Imaging					
	Pharmaceutical	Emergency	Central Plant			
Obstetrical Ante/Postprtum	X Dietetic	Nuclear Medicine	X Support Services			
Intermediate Care	X 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-00535	Building Name: Original Hospita	al and Central Plant				
Configuration: N/A						
Type of Service Provided						
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehal Thera	bilitation apy		
	Anesthesia	Obstetrical Recovery	Rena	l Dialysis		
Pediatric/Adol escent	Clinical Lab	,				
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge			
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Centr	al Plant		
Intermediate Care	Dietetic	Nuclear Medicine	Supp	oort		
Skilled Nursing	Administration		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-00536 Building Name: Linear Accelerator (Phase II)						
Configuration: N/A						
Type of Service Provided						
Nursing	Surgical	Obstetrical Cesarean/E	Deliv	Rehabilitation Therapy		
IntensiveCare	Anesthesia	Obstetrical Recovery		Renal Dialysis		
Pediatric/Adol escent	Clinical Lab					
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby		Outpatient Surgery		
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency		Central Plant		
Intermediate Care	Dietetic	Nuclear Me	dicipo	Support		
Skilled Nursing	Administration			Services		
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)						
Building Number: BLD-00537	Building Name: Phase III Addition	on Building				
Configuration: N/A						
Type of Service Provided						
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabi Therap			
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal [Dialysis		
Pediatric/Adol escent	Clinical Lab					
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpati Surgery			
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central	Plant		
Intermediate	Dietetic					
Care Care Skilled Nursing	Administration	Nuclear Medicine	Support			
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)							
Building Number: BLD-00538 Building Name: Emergency Entrance Vestibule							
Configuration:	N/A						
Type of Service	Provided						
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Int	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	ediatric/Adol cent		Clinical Lab		,		
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	ostetrical ite/Postprtum		Pharmaceutical		Emergency		Central Plant
Int Ca	ermediate are		Dietetic		Nuclear Medicine		Support
	illed Nursing		Administration				Services
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)							
Building Number:	BLD-00539	Building Na	me: Radiation Onco	logy Additi	on		
Configuration:	N/A						
Type of Service	e Provided						
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Int	tensiveCare		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
	termediate		Dietetic				
Ca	are killed Nursing		Administration		Nuclear Medicine		Support Services
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)						
Building Number: BLD-00540	Building Name: Heart Center					
Configuration: N/A						
Type of Service Provided						
Nursing	Surgical	Obsteti Cesare	rical an/Deliv	Rehabilitation Therapy		
IntensiveCare	Anesthesia	Obsteti Recove		Renal Dialysis		
Pediatric/Adol escent	Clinical Lab	Nobove	, y			
Psychiatric Nursing	Radiological/ Imaging	Newbo WellBa		Outpatient Surgery		
Obstetrical Ante/Postprtum	Pharmaceutical	Emerge	ency	Central Plant		
Intermediate Care	Dietetic					
Skilled Nursing	Administration	Nuclea	r 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-00541	Building Name: East Wing					
Configuration: N/A						
Type of Service Provided						
Nursing	Surgical	Obstetr Cesarea	ical	Rehabilitation Therapy		
IntensiveCare	Anesthesia	Obstetr Recove		Renal Dialysis		
Pediatric/Adol escent	Clinical Lab	Keeve	'y			
Psychiatric Nursing	Radiological/ Imaging	Newbor WellBal		Outpatient Surgery		
Obstetrical Ante/Postprtum	Pharmaceutical	Emerge	ency	Central Plant		
Intermediate Care	Dietetic		· Medicine	Quanat		
Skilled Nursing	Administration			Support Services		
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)						
Building Number: BLD-00542 Building Name: Emergency Entrance Vestibule Addition						
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					
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge			
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Centr	al Plant		
Intermediate Care	Dietetic	Nuclear Medicin	le Supp	~~**		
Skilled Nursing	Administration		Servi			
	Data Last Lindata: 10/04/2015	Pubmission Data: 40/07/0	015 Drintodi 40/0/0	045 C:05 AM		
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	uildings on the hospital campus showin a replacement and the type of service			
Building Number: BLD-02735	Building Name: Emergency Gene	rator #1 CMU Bu	uilding	
Configuration: N/A				
Type of Service Provided				
Nursing	Surgical	Obste Cesar	etrical rean/Deliv	Rehabilitation Therapy
IntensiveCare	Anesthesia	Obste Recov		Renal Dialysis
Pediatric/Adol escent	Clinical Lab			
Psychiatric Nursing	Radiological/ Imaging	Newb WellB		Outpatient Surgery
Obstetrical Ante/Postprtum	Pharmaceutical	Emerg	gency	Central Plant
Intermediate Care	Dietetic		ar Medicine	Support
Skilled Nursing	Administration			Services
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Report the final configuration of all burrequirements whether by retrofit or by per Section 130061(c)(5)				
Building Number: BLD-02736	Building Name: Emergency Gene	rator #2 Enclosur	re Shed	
Configuration: N/A				
Type of Service Provided				
Nursing	Surgical	Obstet Cesare	rical	Rehabilitation Therapy
IntensiveCare	Anesthesia	Obstet Recove		Renal Dialysis
Pediatric/Adol escent	Clinical Lab			
Psychiatric Nursing	Radiological/ Imaging	Newbo WellBa		Outpatient Surgery
Obstetrical Ante/Postprtum	Pharmaceutical	Emerg	ency	Central Plant
Intermediate Care	Dietetic		ar Medicine	Support
Skilled Nursing	Administration			Support Services
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	buildings on the hospital campus showir by replacement and the type of service				
Building Number: BLD-03625	Building Name: Northeast Building]			
Configuration: N/A					
Type of Service Provided					
Nursing	Surgical	Obste Cesa	etrical rean/Deliv	Rehal	bilitation Ipy
	Anesthesia	Obste Reco		Rena	l Dialysis
Pediatric/Adol escent	Clinical Lab				
Psychiatric Nursing	Radiological/ Imaging	Newb WellB		Outpa Surge	
Obstetrical Ante/Postprtum	Pharmaceutical	Emer	gency	Centra	al Plant
Intermediate Care	Dietetic				
Skilled Nursing	Administration		ear Medicine	Supp Servi	
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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-00536 Building Name: Linear Accelerator (Phase II) Type of Service Provided Imaginal inpatient inpatient inpatient inpatient intervention Imaginal inpatient intervention Rehabilitation inpatient intervention IntensiveCare Inpatient inpatient inpatient inpatient inpatient inpatient intervention Imaginal inpatient	Report Year: 2015 10	0184 St. Joseph Hospital		Eureka	Page:26 of 45						
Type of Service Provided Nursing Inpatient 0 Surgical Obstetrical Cesarean/Deliv Rehabilitation Therapy IntensiveCare Inpatient Beds 0 Anesthesia Pediatric/Adol Inpatient Beds 0 Clinical Lab Obstetrical Recovery Renal Dialysis Psychiatric Inpatient Beds 0 X Radiological/ Imaging Newborn/ WellBaby Outpatient Surgery											
Nursing Inpatient Beds 0 Surgical Obstetrical Cesarean/Deliv Rehabilitation Therapy IntensiveCare Inpatient Beds 0 Anesthesia Renal Dialysis Pediatric/Adol escent Inpatient Beds 0 Clinical Lab Obstetrical Recovery Renal Dialysis Psychiatric Nursing Inpatient Beds 0 X Radiological/ Imaging Newborn/ WellBaby Outpatient Surgery	Building Number: BLD-00536 Building Name: Linear Accelerator (Phase II)										
Intensities in patient Beds IntensiveCare Inpatient Beds IntensiveCare Inpatient Beds Inpatient Beds Imaging Imagi	Type of Service Provided	<u>1</u>									
Beds Imaging Beds Imaging Beds Renal Dialysis Pediatric/Adol Inpatient Imaging Clinical Lab Dobstetrical Recovery Renal Dialysis Psychiatric Inpatient Imaging Newborn/ WellBaby Outpatient Surgery Pharmaceutical Pharmaceutical Pharmaceutical			Surgical								
Pediatric/Adol Inpatient 0 Clinical Lab Recovery Psychiatric Inpatient 0 X Radiological/ Imaging Newborn/ WellBaby Outpatient Surgery			Anesthesia								
Psychiatric Inpatient 0 Imaging WellBaby Surgery Nursing Beds Imaging Pharmaceutical			Clinical Lab		al Dialysis						
		atient 0 –									
Ante/Postprtum Beds		batient 0 ds	Pharmaceutical	Emergency Cent	tral Plant						
Intermediate Inpatient 0 Care Beds 0 Dietetic 0 Nuclear Support Services			Dietetic								
Skilled Nursing Administration	Inpa		Administration								
Total Beds this 0 Building		0									
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	information on t C-5 per Section		npatient beds t	by type of S	Service provided by t	building	s that are classified a	IS SPC-2, S	SPC-3, SPC-4,
Building	Number: BLC	0-00537	Building Na	ame: Ph	ase III Addition Build	ding			
<u>Type o</u>	of Service Prov	ided							
<u> </u>	lursing	Inpatient Beds	0	X	Surgical		Obstetrical Cesarean/Deliv		ehabilitation herapy
X Ir	ntensiveCare	Inpatient Beds	8	X	Anesthesia				
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery	R	enal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		utpatient urgery
	Dbstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	X	Emergency	X Ce	entral Plant
	ntermediate Care	Inpatient Beds	0		Dietetic		Nuclear Medicine	Su Su	upport ervices
□ ^s	Skilled Nursing	Inpatient Beds	0		Administration				
	otal Beds this Building		8						
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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-00538 Building Name: Emergency Entrance Vestibule											
<u>Type of</u>	f Service Prov	ided									
	ursing	Inpatient Beds	0		Surgical	Obstet Cesare	rical	Rehabilitation Therapy			
Int	tensiveCare	Inpatient Beds	0		Anesthesia						
	ediatric/Adol scent	Inpatient Beds	0		Clinical Lab	Obstet Recov		Renal Dialysis			
	sychiatric ursing	Inpatient Beds	0		Radiological/ Imaging	Newbo WellBa		Outpatient Surgery			
	bstetrical nte/Postprtum	Inpatient Beds	0		Pharmaceutical	X Emerg	ency	Central Plant			
	termediate are	Inpatient Beds	0		Dietetic	Nuclea Medici		Support Services			
Sk	killed Nursing	Inpatient Beds	0		Administration						
	otal Beds this uilding		0								
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	e information on PC-5 per Section		inpatient beds	by type of S	Service provided by	building	gs that are classified a	as SPC-2, S	SPC-3, SPC-4,
Buildir	ng Number: BLI	D-00539	Building N	ame: Ra	diation Oncology A	ddition			
Туре	of Service Prov	<u>vided</u>							
	Nursing	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		ehabilitation herapy
	IntensiveCare	Inpatient Beds	0		Anesthesia				
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery	Re	enal Dialysis
	Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging		Newborn/ WellBaby		utpatient urgery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Γ	Emergency		entral Plant
	Intermediate Care	Inpatient Beds	0		Dietetic		Nuclear Medicine	Su Su	upport ervices
	Skilled Nursing	Inpatient Beds	0		Administration				
	Total Beds this Building		0						
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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)											
Building Number: BLD-00540 Building Name: Heart Center											
Type of Service Pro	vided										
Nursing	Inpatient Beds	0	Х	Surgical	Obstetrical Cesarean/Deliv	Reha	abilitation apy				
IntensiveCare	Inpatient Beds	0	X	Anesthesia							
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	al Dialysis				
Psychiatric	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outp Surg	atient ery				
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Cent	ral Plant				
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Servi	port ices				
Skilled Nursing	Inpatient Beds	0		Administration							
Total Beds this Building		0									
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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)									
Building Number: BLD-	00541	Building Name	e: Ea	st Wing					
Type of Service Provid	ded								
	Inpatient Beds	62		Surgical	X	Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
	Inpatient Beds	5		Anesthesia					
	Inpatient Beds	0		Clinical Lab	X	Obstetrical Recovery		Renal Dialysis	
	Inpatient Beds	0		Radiological/ Imaging	X	Newborn/ WellBaby		Outpatient Surgery	
	Inpatient Beds	11	X	Pharmaceutical		Emergency	X	Central Plant	
	Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services	
	Inpatient Beds	0		Administration					
Total Beds this Building		78							
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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-00542 Building Name: Emergency Entrance Vestibule Addition											
Туре	of Service Prov	rided									
	Nursing	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		abilitation rapy		
	IntensiveCare	Inpatient Beds	0		Anesthesia						
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery	Rer	al Dialysis		
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		patient gery		
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	×	Emergency	Cer	tral Plant		
	Intermediate Care	Inpatient Beds	0		Dietetic		Nuclear Medicine	Sup Sup Ser	port vices		
	Skilled Nursing	Inpatient Beds	0		Administration						
	Total Beds this Building		0								
OSHPD	FDD SB499 Repor	rt D	Data Last Update:	10/04/20	15 Submise	sion Date	e: 10/07/2015	Printed: 10/9/	2015 6:25 AM		

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)										
Building Number: BLD-02735 Building Name: Emergency Generator #1 CMU Building										
Type of Servi	ce Provided									
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha Ther	abilitation apy			
Intensive	Care Inpatient Beds	0		Anesthesia						
Pediatric escent	/Adol Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	al Dialysis			
Psychiate Nursing	ric Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outp Surg	atient ery			
Obstetric Ante/Pos		0		Pharmaceutical	Emergency	X Cent	ral Plant			
Intermed Care	iate Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Serv	port ices			
Skilled N	ursing Inpatient Beds	0		Administration						
Total Beo Building	ds this	0								
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Include information o and SPC-5 per Section		f inpatient beds	by type of \$	Service provided by	building	s that are classified	as SPC-2, S	PC-3, SPC-4,			
Building Number: BLD-02736 Building Name: Emergency Generator #2 Enclosure Shed											
Type of Service Pro	ovided										
Nursing	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		habilitation erapy			
IntensiveCare	Inpatient Beds	0		Anesthesia							
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery	Re	nal Dialysis			
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		tpatient rgery			
Obstetrical Ante/Postprtur	Inpatient n Beds	0		Pharmaceutical		Emergency	X Ce	ntral Plant			
Intermediate	Inpatient Beds	0		Dietetic		Nuclear Medicine	Su Su Se	oport rvices			
Skilled Nursing) Inpatient Beds	0		Administration							
Total Beds this Building	3	0									
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Include information on and SPC-5 per Section		of inpatient beds b	by type of a	Service provided by I	ouildings that are classified a	as SPC-2, SP	C-3, SPC-4,
Building Number: BLD-03625 Building Name: Northeast Building							
Type of Service Pro	vided						
X Nursing	Inpatient Beds	40	X	Surgical	Obstetrical Cesarean/Deliv	Reha Ther	abilitation apy
X IntensiveCare	Inpatient Beds	12		Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0	X	Clinical Lab	Obstetrical Recovery	Rena	al Dialysis
Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby	X Outp Surg	patient ery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	X Emergency	Cent	ral Plant
Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Serv	
Skilled Nursing	Inpatient Beds	0	X	Administration			
Total Beds this Building		52					
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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-00536 Build	Linear Accelerator (Phase I	II)		
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	nt 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	nt0	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt O	
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	nt O	
Coronary Care	Chemical Dependency		l Beds this ding 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-00537 Build	ding Name: Phase III 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 Inpatient Bed Days	0	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled		
Inpatient 4 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0	
Coronary Care	Chemical Dependency	Building Per Build	Beds this ing Per	
Inpatient 4 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Servio	8	
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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-00538 Build	ding Name: Emergency Entrance Vestib	ule	-	
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-00539 Building Name: Radiation Oncology Addition				
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days		
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days		
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days		
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days		
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0		
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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-00540 Build	Building Number: BLD-00540 Building Name: Heart Center				
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 b 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-00541 Build	ding Name: East Wing				
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 62 Inpatient 13789 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	ıt 0		
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing			
Inpatient 11 Inpatient 1314 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	ıt 0		
Pediatric	Intensive Care Newborn Nursery	Intermediate Care			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 5 Inpatient 528 Bed Days	Inpatient 0 Inpatien 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 Inpatien Bed Days	ıt 0		
Coronary Care	Chemical Dependency	Building Per Build	l Beds this ding Per		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv	78		
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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-00542 Build	ding Name: Emergency Entrance Vestib	ule Addition		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0	
Coronary Care	Chemical Dependency	Building Per Build	Beds this ing Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Servi	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-02735 Build	ding Name: Emergency Generator #1 C	MU Building		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t O	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t O	
Coronary Care	Chemical Dependency	Building Per Build	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-02736 Build	ding Name: Emergency Generator #2 E	nclosure Shed			
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	ıt 0		
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	ıt 0		
Pediatric	Intensive Care Newborn Nursery	Intermediate Care			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	it 0		
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t O		
Coronary Care	Chemical Dependency	Building Per Build	l Beds this ding 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-03625 Build	ding Name: Northeast Building			
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 40 Inpatient 11930 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 <u>0</u> Inpatient Bed Days	0	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled		
Inpatient 12 Inpatient 1656 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0	
Coronary Care	Chemical Dependency	Total Beds this Total B Building Per Buildin	eds this g Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service	52	
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