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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:	10190	
Facility Name:	El Centro Regional Medical Center	
Address:	1415 Ross Avenue	
City:	El Centro	
Hospital Owner/Lice	ensee: El Centro Regional Medical Center	
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	Iress:: [Confidential data left blank intentionally.]	
Name of Subr	mitter: Ryan Kelley	
Submission	Date: 12/7/2015 3:54:26 PM	

Report `	Year: 2015 10190	El Centro Regional Medical Cel	nter	El Centro		Page:2 of 93	
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- 00752	South Wing	1415 Ross Avenue	Rebuild	SPC5	01/01/2020	01/01/2020	
BLD- 00753	L/D Bldg	1415 Ross Avenue	Rebuild	SPC5	01/01/2020	01/01/2020	
BLD- 00754	Central Wing	1415 Ross Avenue	Rebuild	SPC5	01/01/2020	01/01/2020	
BLD- 00755	West Addition	1415 Ross Avenue	Rebuild	SPC5	01/01/2020	01/01/2020	
BLD- 00756	Central Plant	1415 Ross Avenue	Rebuild	SPC5	01/01/2020	01/01/2020	
BLD- 00757	North Wing	1415 Ross Avenue	Rebuild	SPC5	01/01/2020	01/01/2020	
BLD- 02688	Storage Building #1	1415 Ross Avenue	Rebuild	SPC5	01/01/2020	01/01/2020	
BLD- 02689	Storage Building #2	1415 Ross Avenue	Rebuild	SPC5	01/01/2020	01/01/2020	

Report Year: 2015 10190 El Centro Regional	gional Medical Center	El Centro	Page:3 o	f 93			
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-00752 South Wing		etrofit/Replacement oject:	Yes-Submitted]			
Facility Project Sub Number Number Num Scope		oproved Projected ate Start Date	Projected Completion Date Status	CEQA Review			
10190 H152019-13 0 Bed Expansion -00		2015 01/01/2017 10:00 AM	01/01/2020 OPEN	l No			
For each building which is planned for rebuild, retrof projected construction start date or dates and project status and approvals per Section 130061(c)(1)(E).	it or replacement, provide the project reted Completion date or dates per Sec	numbers, per Section ion 130061(c)(1)(D)	130061(c)(1)(C). The and the most recent projec	t			
Building No: BLD-00753 L/D Bldg		etrofit/Replacement oject:	Yes-Submitted]			
Facility Project Sub Number Number Num Scope		oproved Projected ate Start Date	Projected Completion Date Status	CEQA Review			
10190 H152019-13 0 Bed Expansion -00		2015 01/01/2017 00:00 AM	01/01/2020 OPEN	l No			
OSHPD FDD SB499 Report Data Last Update	e: 12/07/2015 Submission Da	te: 12/07/2015	Printed: 12/9/2015 6:25 AM	1			

Report Year: 2015 10190 El Centro Regional Medical Centro	enter	El Ce	ntro		Page:4 of	93
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-00754 Central Wing		Retrofit/Re Project:	eplacement	Yes-Sub	mitted	
Facility Project Sub Number Number Num Scope	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
10190 H132862-13 0 ECRMC Ancillary Services Building -00	12/19/201 3	12/23/2014 12:00:00 AM	05/31/2016	01/01/2020	PEND	No
For each building which is planned for rebuild, retrofit or replacement, projected construction start date or dates and projected Completion d status and approvals per Section $130061(c)(1)(E)$.						
Building No: BLD-00755 West Addition		Retrofit/Ro Project:	eplacement	Yes-Sub	mitted	
Facility Project Sub Number Number Num Scope	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
10190 H132862-13 0 ECRMC Ancillary Services Building -00	12/19/201 3	12/23/2014 12:00:00 AM	05/31/2016	01/01/2020	PEND	No
OSHPD FDD SB499 Report Data Last Update: 12/07/2015	Submi	ssion Date: 12/0	07/2015	Printed: 12/9/20	15 6:25 AM	

Report Year: 20	ort Year: 2015 10190 El Centro Regional Medical Center El Centro				Page:5 of	93		
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-	00756	Central Plant		Retro Proje	ofit/Replacement	Yes-Sub	mitted	
Facility Project Number Number	Sub Num	Scope	Date In	Plan Appro Date	oved Projected Start Date	Projected Completion Date	Status	CEQA Review
10190 P-2013- 00222	0	Central Utility Plant Upgrade	1/29/2013	4/9/201 12:00:0 A		01/01/2020	FIEL	No
projected constructions and approval	on start o		r replacement, provide the p Completion date or dates p	Retro	130061(c)(1)(D)		ent project	
Facility Project Number Number	Sub Num	Scope	Date In	Proje Plan Appro Date	oved Projected	Projected Completion Date	Status	CEQA Review
10190 H152019-13 -00	3 0	Bed Expansion	7/31/2015	11/9/201 12:00:C A		01/01/2020	OPEN	No
SHPD FDD SB499 F	Report	Data Last Update:	12/07/2015 Submis	ssion Date:	12/07/2015	Printed: 12/9/20	15 6:25 AM	

Report Year: 2015 10190 El Centro Regional Medical Centro	enter	El Cei	ntro		Page:6 of	93	
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-02688 Storage Building #1		Retrofit/Re Project:	eplacement	Yes-Sub	mitted		
Facility Project Sub Number Number Num Scope	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review	
10190 H132862-13 0 ECRMC Ancillary Services Building -00	12/19/201 3	12/23/2014 12:00:00 AM	05/31/2016	01/01/2020	PEND	No	
For each building which is planned for rebuild, retrofit or replacement projected construction start date or dates and projected Completion c status and approvals per Section $130061(c)(1)(E)$.							
Building No: BLD-02689 Storage Building #2		Retrofit/Re Project:	eplacement	Yes-Sub	mitted		
Facility Project Sub Number Number Num Scope	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review	
10190 H132862-13 0 ECRMC Ancillary Services Building -00	12/19/201 3	12/23/2014 12:00:00 AM	05/31/2016	01/01/2020	PEND	No	

Report Year: 2015 10190	El Centro Regional Medical Center	El Centro	Page:7 of 93				
Provide the number of inpatient	Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)						
Building Number: BLD-00752	Building Name: So	uth Wing					
Type of Service Provided							
X Nursing Inpatient Beds	30 Inpatient 410 Days	Surgical	Obstetrical Recovery				
IntensiveCare Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby				
Pediatric/Adol Inpatient escent Beds	0 Inpatient Days 0	Clinical Lab	Emergency				
Psychiatric Inpatient Nursing Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine				
Obstetrical Inpatient Ante/Postprtum Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy				
Intermediate Inpatient Care Beds	0 Inpatient Days 0	Administration	Renal Dialysis				
Skilled Nursing Inpatient Beds	0 Inpatient Days 0	Support Services	Outpatient Surgery				
	Total Beds this 30 Building	Obstetrical Cesarean/Deliv	Central Plant				
OSHPD FDD SB499 Report	Data Last Update: 12/07/2015 St	ubmission Date: 12/07/2015 F	Printed: 12/9/2015 6:25 AM				

Report Year: 2015	10190	El Centro Regional Medical Center	El Centro	Page:8 of 93			
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: BLD-00753 Building Name: L/D Bldg							
Type of Service Prov	rided		_				
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	X 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			
X Obstetrical Ante/Postprtum	Inpatient Beds	6 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			
	Doub	Total Beds this 6 Building	X Obstetrical Cesarean/Deliv	Central Plant			
OSHPD FDD SB499 Report	rt	Data Last Update: 12/07/2015 Su	bmission Date: 12/07/2015	Printed: 12/9/2015 6:25 AM			

Report Year: 2015	10190	El Centro Regional Medical Center	El Centro	Page:9 of 93			
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	D-00754	Building Name: Cer	ntral Wing				
Type of Service Provi	ided		_				
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	X Support Services	Outpatient Surgery			
	Deus	Total Beds this 0 Building	Obstetrical Cesarean/Deliv	Central Plant			
OSHPD FDD SB499 Report	t	Data Last Update: 12/07/2015 Sul	bmission Date: 12/07/2015	Printed: 12/9/2015 6:25 AM			

Report Year: 2015	10190	El Centro Regional Medical Center	El Centro	Page:10 of 93				
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: BL	D-00755	Building Name: Wes	st Addition					
Type of Service Prov	rided		_					
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	X Support Services	Outpatient Surgery				
	Doub	Total Beds this 0 Building	Obstetrical Cesarean/Deliv	Central Plant				
OSHPD FDD SB499 Repor	rt	Data Last Update: 12/07/2015 Sul	bmission Date: 12/07/2015	Printed: 12/9/2015 6:25 AM				

Report Year: 2015	10190	El Centro Regional Medical Center	El Centro	Page:11 of 93			
Provide the number of	inpatient b	eds and patient days per type of service pe	r building per Section 13006	1(c)(1)(F)			
Building Number: BL	Building Number: BLD-00756 Building Name: Central Plant						
Type of Service Prov	ided		_				
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		Renal Dialysis			
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services	Uutpatient Surgery			
		Total Beds this 0 Building	Cesarean/Deliv	X Central Plant			
OSHPD FDD SB499 Repor	ť	Data Last Update: 12/07/2015 Su	ubmission Date: 12/07/2015	Printed: 12/9/2015 6:25 AM			

Report Year: 2015	10190 EI 0	Centro Regional Medical Center	El Centro	Page:12 of 93	
Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)					
Building Number: BLD	-00757	Building Name: No	rth Wing		
Type of Service Provid	ded		_		
	Inpatient Beds	32 Inpatient 3395 Days	Surgical	Obstetrical Recovery	
	Inpatient Beds	8 Inpatient Days 0	Anesthesia	Newborn/ WellBaby	
	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency	
	Inpatient [0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine	
	Inpatient [Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy	
	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis	
	Inpatient [0 Inpatient Days 0	Services	Outpatient Surgery	
	То	tal Beds this 40 ilding	Obstetrical Cesarean/Deliv	Central Plant	
OSHPD FDD SB499 Report	Data	Last Update: 12/07/2015 St	ubmission Date: 12/07/2015	Printed: 12/9/2015 6:25 AM	

Report Year: 2015	10190	El Centro Regional Medical Center	El Centro	Page:13 of 93		
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: BL	.D-02688	Building Name: Sto	rage Building #1			
Type of Service Prov	vided					
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	X Support Services	Outpatient Surgery		
	Deus	Total Beds this 0 Building	Obstetrical Cesarean/Deliv	Central Plant		
OSHPD FDD SB499 Repo	rt	Data Last Update: 12/07/2015 Su	bmission Date: 12/07/2015	Printed: 12/9/2015 6:25 AM		

Report Year: 2015	10190	El Centro Regional Medical Center	El Centro	Page:14 of 93
Provide the number of i	inpatient be	eds and patient days per type of service pe	er building per Section 130061	(c)(1)(F)
Building Number: BLC	D-02689	Building Name: Sto	orage Building #2	
Type of Service Provi	<u>ded</u>			
	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	X Support Services	Outpatient Surgery
	2000	Total Beds this 0 Building	Obstetrical Cesarean/Deliv	Central Plant
OSHPD FDD SB499 Report		Data Last Update: 12/07/2015 S	ubmission Date: 12/07/2015	Printed: 12/9/2015 6:25 AM

Report Year: 2015 10190 El Cent	tro Regional Medical Center	El Centro	Page:15 of 93
Provide the number of Inpatient beds and pati	ent days per type of unit per building per Secti	ion 130061(c)(1)(F)	
Building Number: BLD-00752 Bu	ilding Name: South Wing		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 30 Inpatient 410 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	t 0
Perinatal (excluse Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	t 0
Pediatric	intensive Care Newborn Nursery	Intermediate Card	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0
Intensive Care	Rehabilitation Center	Int. Care / development Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0
Coronary Care	Chemical Dependency	Total Beds this Total Be Building Per Building Unit Service	g Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	30	30
OSHPD FDD SB499 Report Data Last	Update: 12/07/2015 Submission Date	e: 12/07/2015 Printed: 12/9/20	15 6:25 AM

Report Year: 2015 10190 El	Centro Regional Medical Center	El Centro	Page:16 of 93
Provide the number of Inpatient beds and	d patient days per type of unit per building per Sec	ction 130061(c)(1)(F)	
Building Number: BLD-00753	Building Name: L/D Bldg		
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 (excluse Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 6 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 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	t 0
Intensive Care	Rehabilitation Center	Int. Care / development Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	t 0
Coronary Care	Chemical Dependency	Total Beds this Total Be Building Per Building Unit Service	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	6	6

Report Year: 2015	10190 El Centro F	Regional Medical Cer	E	I Centro	Page:17 of 93
Provide the number of I	Inpatient beds and patient	days per type of unit	per building per Section	130061(c)(1)(F)	
Building Number:	BLD-00754 Buildin	ng Name: Cent	ral Wing		
Medical / Surgical (Inc	clude GYN)	Acute Respiratory Care		Acute Psychiatric	
	patient 0 ays	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse Nev	wborn / GYN)	Burn		Skilled Nursing	
	patient 0 ays	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care New Nursery	/born	Intermediate Card	
	patient 0 ays	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
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
		Inpatient 0 Bed	Inpatient 0 Days	0	0
<u> </u>					

Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)
Building Number: BLD-00755 Building Name: West Addition
Medical / Surgical (Include GYN) Acute Respiratory Care Acute Psychiatric
Inpatient 0 Inpati
Perinatal (excluse Newborn / GYN) Burn Skilled Nursing
Inpatient 0 Days
Pediatric intensive Care Newborn Intermediate Card Nursery
Inpatient0Inpatient
Intensive Care Rehabilitation Int. Care / development Center Disabled
Inpatient0Inpatient
Coronary CareChemical DependencyTotal Beds this Building Per UnitTotal Beds this
Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 0 0 0

Report Year:201510190El Cer	tro Regional Medical Center	El Centro	Page:19 of 93
Provide the number of Inpatient beds and pat	tient days per type of unit per building per Section	n 130061(c)(1)(F)	
Building Number: BLD-00756 Bu	uilding Name: Central Plant		
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	ent 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	ent 0
Coronary Care	Chemical Dependency		Beds this ing Per ce
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	0	0

Report Year: 2015 10190 El	Centro Regional Medical Center	El Centro Page:	20 of 93
Provide the number of Inpatient beds and	d patient days per type of unit per building per Se	ection 130061(c)(1)(F)	
Building Number: BLD-00757	Building Name: North Wing		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 32 Inpatient 3395 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0
Perinatal (excluse 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 Card	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	ס
Intensive Care	Rehabilitation Center	Int. Care / development Disabled	
Inpatient 8 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 thi Building Per Building Per Unit Service	S
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	40 40	

Report Year: 2015 10190 E	El Centro Regional Medical Center	El Centro	Page:21 of 93
Provide the number of Inpatient beds ar	nd patient days per type of unit per building per Se	ction 130061(c)(1)(F)	
Building Number: BLD-02688	Building Name: Storage Building #1		
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 (excluse Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t O
Pediatric	intensive Care Newborn Nursery	Intermediate Card	
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 / development Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	t 0
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	0	0

Report Year: 2015 10190 I	El Centro Regional Medical Center	El Centro Page:22 of 93
Provide the number of Inpatient beds a	nd patient days per type of unit per building per Se	ection 130061(c)(1)(F)
Building Number: BLD-02689	Building Name: Storage Building #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 (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	0 0

Report Year:	
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2015

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-00752	South Wing	Rebuild
BLD-00753	L/D Bldg	Rebuild
BLD-00754	Central Wing	Rebuild
BLD-00755	West Addition	Rebuild
BLD-00756	Central Plant	Rebuild
BLD-00757	North Wing	Rebuild
BLD-00759	Admin Bldg	Rebuild
BLD-00760	OB Building	Rebuild
BLD-00761	Radiology Building	Remain
BLD-00762	Rad Annex	Remain
BLD-00763	Lab Building	Remain
BLD-00764	Annex	Remain
BLD-02685	East Wing - South	Rebuild
BLD-02686	New Wing	Remain
BLD-02687	New Central Plant	Remain
BLD-02688	Storage Building #1	Rebuild
BLD-02689	Storage Building #2	Rebuild
BLD-02887	Admin Bldg Addition	Rebuild
BLD-02888	East Wing - North	Rebuild

Report Year:	2015	10190	El Centro Regional Medical Center	E	El Centro	Page:24 of 93

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

Report Y	′ear: 2015 1	0190 El Centro Regional Medical Ce	enter	El Centro	Page:25 of 93	
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-00	752 South Wing		Removal 01/01/2020 Date:		
Planned	Uses for the building	g to be removed from acute care service	:			
Planned	l use for building:					
		elivered in the building:		Rehabilita	tion	
X	Nursing	Surgical	Cesarean/D	eliv [—] Therapy		
	IntensiveCare Pediatric/Adol escent	Anesthesia	Obstetrical Recovery	Renal Dial	lysis	
	Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatien Surgery	t	
	Obstetrical Ante/Postprtum		Emergency	Central PI	ant	
	Intermediate Care	Dietetic				
	Skilled Nursing	Administration	Nuclear Medicine	Support Services		
OSHPD F	DD SB499 Report	Data Last Update: 12/07/2015	Submission Dat	e: 12/07/2015 Printed: 12/	/9/2015 6:25 AM	

Report Year: 2015	10190 El Centro Regional Medio	cal Center	El Centro	Page:26 of 93			
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-(D0753 L/D Bldg		Removal 01/01/2020 Date:				
Planned Uses for the build	ling to be removed from acute care se	rvice:					
Planned use for building:							
Inpatient services currently Nursing IntensiveCare Pediatric/Adol escent Psychiatric Nursing X Obstetrical Ante/Postprtum	Surgical Anesthesia Clinical Lab Radiological/ Imaging Pharmaceutical 	X Obstetrical Cesarean/Deli X Obstetrical Recovery Newborn/ WellBaby	iv Rehabilitati Therapy Renal Dialy Outpatient Surgery	/sis			
Intermediate Care	Dietetic	Emergency	X Central Pla	int			
Skilled Nursing	Administration	Nuclear Medicine	Support Services				
OSHPD FDD SB499 Report	Data Last Update: 12/07/2	015 Submission Date:	12/07/2015 Printed: 12/9	9/2015 6:25 AM			

Report Year: 2015 10	190 El Centro Regional Medical Ce	enter	El Centro	Page:27 of 93			
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-0075	54 Central Wing		Removal 01/01/2020 Date:				
Planned Uses for the building to be removed from acute care service: Planned use for building:							
Inpatient services currently del	livered in the building:	Obstetrical Cesarean/Deli	iv Rehabilitatio Therapy	n			
IntensiveCare Pediatric/Adol escent	Anesthesia	Obstetrical Recovery	Renal Dialys	is			
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery				
Obstetrical Ante/Postprtum	Pharmaceutical Dietetic	Emergency	Central Plan	t			
Skilled Nursing	Administration	Nuclear Medicine	X Support Services				
OSHPD FDD SB499 Report	Data Last Update: 12/07/2015	Submission Date:	12/07/2015 Printed: 12/9/2	2015 6:25 AM			

Report Year: 2015	10190 EI C	entro Regional Medical Ce	enter	E	El Centro		Page:28 of 93
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-	00755	West Addition			Removal Date:	01/01/2020]
Planned Uses for the build	ling to be remove	ed from acute care service:					
Planned use for building:							
Inpatient services currently Nursing IntensiveCare Pediatric/Adol escent Psychiatric Nursing Obstetrical Ante/Postprtum		building: Surgical Anesthesia Clinical Lab Radiological/ Imaging Pharmaceutical		Obstetrical Cesarean/Deli Obstetrical Recovery Newborn/ WellBaby Emergency	V	 Rehabilitation Therapy Renal Dialysis Outpatient Surgery Central Plant 	
Intermediate Care		Dietetic		Nuclear		X Support	
OSHPD FDD SB499 Report	·	Administration		Medicine Submission Date:	12/07/2015	Printed: 12/9/20	D15 6:25 AM

Report Year: 2015 101	190 El Centro Regional Medical	Center	El Centro	Page:29 of 93			
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-0075	6 Central Plant		Removal 01/01/2020 Date:				
Planned Uses for the building to be removed from acute care service: Planned use for building: Clinic Jurisdiction: OSHPD							
Inpatient services currently deli	ivered in the building:	Obstetrical Cesarean/De	liv Rehabilitati Therapy	on			
IntensiveCare Pediatric/Adol escent	Anesthesia	Obstetrical Recovery	Renal Dialy	vsis			
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				
OSHPD FDD SB499 Report	Data Last Update: 12/07/201	5 Submission Date	: 12/07/2015 Printed: 12/9)/2015 6:25 AM			

Report Year: 2015	10190 El Centro Regional Medica	I Center	El Centro	Page:30 of 93			
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-(North Wing		Removal 01/01/2020 Date:				
Planned Uses for the build	ling to be removed from acute care serv	vice:					
Planned use for building:							
Inpatient services currently X Nursing	<u>v delivered in the building:</u> Surgical	Obstetrical Cesarean/Del	iv Rehabilitat Therapy	ion			
X IntensiveCare Pediatric/Adol escent	Anesthesia	Obstetrical Recovery	Renal Dial	ysis			
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery				
Obstetrical Ante/Postprtum	Pharmaceutical Dietetic	Emergency	Central Pla	ant			
Skilled Nursing	Administration	Nuclear Medicine	Support Services				
OSHPD FDD SB499 Report	Data Last Update: 12/07/207	15 Submission Date:	12/07/2015 Printed: 12/	9/2015 6:25 AM			

Report Year: 2015 1	0190 El Centro Regional Medica	I Center E	El Centro	Page:31 of 93			
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-026	588 Storage Buildin	g #1	Removal 01/01/2020 Date:				
Planned Uses for the building	g to be removed from acute care serv	vice:					
Planned use for building:	Juri	sdiction:]				
Inpatient services currently d	elivered in the building:						
Nursing	Surgical	Obstetrical Cesarean/Deli	v Rehabilitation	on			
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal Dialy	sis			
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery				
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Pla	nt			
Intermediate Care	Dietetic						
Skilled Nursing	Administration	Nuclear Medicine	X Support Services				
OSHPD FDD SB499 Report	Data Last Update: 12/07/20 ⁷	15 Submission Date:	12/07/2015 Printed: 12/9/	/2015 6:25 AM			

Report Year: 2015 1	0190 El Centro Regional Medical	Center	El Centro	Page:32 of 93			
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-02	689 Storage Building	#2	Removal 01/01/2020 Date:				
Planned Uses for the buildin	g to be removed from acute care servic	e:					
Planned use for building:	Demolished Juris	diction:]				
Inpatient services currently o		Obstetrical		ion			
Nursing	Surgical	Cesarean/De	liv Therapy				
IntensiveCare Pediatric/Adol escent	Anesthesia	Obstetrical Recovery	Renal Dialy	ysis			
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery				
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Pla	ant			
Intermediate Care	Dietetic	Emorgonoy					
Skilled Nursing	Administration	Nuclear Medicine	X Support Services				
OSHPD FDD SB499 Report	Data Last Update: 12/07/2015	Submission Date:	: 12/07/2015 Printed: 12/9	9/2015 6:25 AM			

Report Year:	2015	10190	El Centro Regional Medical Center	El Centro	Page:33 of 93		
lo data reporte	o data reported for Section 130061(c)(2)(D).						

Report Year:	2015	10190	El Centro Regional Medical Center	El Centro	Page:34 of 93
lo data reporte	ed for Sectior	130061(c))(2)(D).		

Report Year: 2015 1019	El Centro Regional Medical Center		El Centro		Page:	35 of 93
	ute care services and beds will be relocated s for buildings with a Building Resolution o					ng
Building BLD-00756 Number:	Building Name: Central Plant					
Will general acute care service	s and beds will be relocated to a new, Exist	ting or retrofitted	building?			
CentralPlant Reloca	ted to new building					
Facility Project Sub Number Number Num S	соре	Date In	Plan Approved Date	Start Date	Project Complete d	Status
10190 P-2013- 0 C 00222	entral Utility Plant Upgrade	2013-01-29	2014-04-09	03/06/2015	06/09/2015	FIEL
Building sites or project number Building Number:	s for buildings with a Building Resolution o Building Name: Storage Building #1	f "Rebuild" or "Re	eplace" per Sect	ion 130061(c)(:	2)(E)	
Will general acute care service	s and beds will be relocated to a new, Exist	ting or retrofitted	building?			
Support Services Reloca	ted to new building					
OSHPD FDD SB499 Report	Data Last Update: 12/07/2015	Submission Date	e: 12/07/2015	Printed: 1	2/9/2015 6:25	AM

Report Year: 2015 10190 El Centro Regional Medical Center			er	El Centro		Page:	Page:36 of 93	
	general acute care services and ect numbers for buildings with a						ng	
Building E Number:	LD-02689 Building Name:	Storage Building #2						
Will general acute c	are services and beds will be relo	ocated to a new, Ex	isting or retrofitted b	ouilding?				
Support Services	Relocated to new building							
Facility Project Number Number	Sub Num Scope		Date In	Plan Approved Date	Start Date	Project Complete d	Status	
10190 H132862- 13-00	0 ECRMC Ancillary Service	es Building	2013-12-19	2014-12-23	12/24/2014	01/01/2020	PEND	
Number:		Admin Bldg						
-	are services and beds will be relo	ocated to a new, Ex	isting or retrofitted t	ouilding?				
Administration	Relocated to new building							
Facility Project Number Number	Sub Num Scope		Date In	Plan Approved Date	Start Date	Project Complete d	Status	
10190 H132862-	0 ECRMC Ancillary Service	es Building	2013-12-19	2014-12-23	12/24/2014	01/01/2020		
13-00							PEND	

Report Year: 2015 10	190 El Centro Regional Medical Center		El Centro		Page:3		
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-00760 Number:	0 Building Name: OB Building						
Will general acute care servic	es and beds will be relocated to a new, Existin	g or retrofitted	building?				
Obstetrical Ante Postprtum	cated to new building						
Facility Project Sub Number Number Num	Scope	Date In	Plan Approved Date	Start Date	Project Complete d	Status	
10190 H152019- 0 13-00	Bed Expansion	2015-07-31	2015-11-09	01/01/2017	01/01/2020	OPEN	
	cute care services and beds will be relocated to ers for buildings with a Building Resolution of " 0 Building Name: OB Building						
	es and beds will be relocated to a new, Existin	g or retrofitted	building?				
Perinatal (exclude Newborn / GYN))	cated to new building						
Facility Project Sub Number Number Num	Scope	Date In	Plan Approved Date	Start Date	Project Complete d	Status	
10190 H152019- 0 13-00	Bed Expansion	2015-07-31	2015-11-09	01/01/2017	01/01/2020	OPEN	
OSHPD FDD SB499 Report	Data Last Update: 12/07/2015	Submission Date	e: 12/07/2015	Printed: 1	2/9/2015 6:25		

Report Year: 2015 101	90 El Centro Regional Medical (Center	El Centro		Page:	38 of 93
	ute care services and beds will be re rs for buildings with a Building Resol					ng
Building BLD-02888 Number:	Building Name: East Wing - No	rth				
Will general acute care service	es and beds will be relocated to a new	w, Existing or retrofitted	building?			
Pediatric Adolescent N/A						
	ute care services and beds will be re rs for buildings with a Building Resol					ng
Building BLD-02888 Number:	Building Name: East Wing - No	orth				
Will general acute care service	es and beds will be relocated to a new	w, Existing or retrofitted	building?			
Pediatric Reloca	ated to new building					
Facility Project Sub Number Number Num S	Scope	Date In	Plan Approved Date	Start Date	Project Complete d	Status
10190 H152019- 0 E 13-00	Bed Expansion	2015-07-31	2015-11-09	12/24/2014	01/01/2020	OPEN
OSHPD FDD SB499 Report	Data Last Update: 12/07/2015	Submission Date	e: 12/07/2015	Printed: 1	2/9/2015 6:25	AM

Report Year: 2015 10190 El Centro Regional Medical Center		El Centro		Page:	Page:39 of 93		
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-02685 Building Name: East Wing - South Number:							
Will general acute care services and beds will be relocated to a new, Existing	ng or retrofitted	building?					
Radiological/Imaging Relocated to new building							
Facility Project Sub Number Numer Num Scope	Date In	Plan Approved Date	Start Date	Project Complete d	Status		
10190 H152019- 0 Bed Expansion 13-00	2015-07-31	2015-11-09	01/01/2017	01/01/2020	OPEN		
Report whether the general acute care services and beds will be relocated building sites or project numbers for buildings with a Building Resolution of Building Number:					ing		
Will general acute care services and beds will be relocated to a new, Existing	ng or retrofitted	building?					
Support Services Relocated to new building							
Report whether the general acute care services and beds will be relocated	to a new existin	a or retrofitted b	uilding and an	vcorrespond	ing		
building sites or project numbers for buildings with a Building Resolution of							
Building BLD-00752 Building Name: South Wing Number:							
Will general acute care services and beds will be relocated to a new, Existing	ng or retrofitted	building?					
Nursing N/A							

Report Year: 2015 10190	El Centro Regional Me	dical Center	El Centro	Page:40 of 93
Report whether the general acut building sites or project numbers				
Building Number:	Building Name: South Wi	<u> </u>		
Will general acute care services Medical/Surgical (Include GYN)	and beds will be relocated to	a new, Existing or retrofitted	I building?	
Report whether the general acut building sites or project numbers				
Building BLD-00754 Number:	Building Name: Central V	Ving		
Will general acute care services Support Services N/A	and beds will be relocated to	a new, Existing or retrofitted	l building?	
Report whether the general acut building sites or project numbers				
Building BLD-00755 Number:	Building Name: West Add	dition		
Will general acute care services Support Services N/A	and beds will be relocated to	a new, Existing or retrofitted	l building?	
OSHPD FDD SB499 Report	Data Last Update: 12/07	7/2015 Submission Da	te: 12/07/2015	Printed: 12/9/2015 6:25 AM

Report Year: 2015 10190 El Centro Regional	Medical Center	El Centro	Page:41 of 93
Report whether the general acute care services and beds building sites or project numbers for buildings with a Build			
Building BLD-00757 Building Name: North Number:	Wing		
Will general acute care services and beds will be relocate	d to a new, Existing or retrofitted	building?	
Nursing N/A			
Report whether the general acute care services and beds building sites or project numbers for buildings with a Build			
Building BLD-00757 Building Name: North Number:	Wing		
Will general acute care services and beds will be relocate	d to a new, Existing or retrofitted	building?	
Intensive Care N/A			
Report whether the general acute care services and beds building sites or project numbers for buildings with a Build			
Building BLD-00757 Building Name: North Number:	Wing		
Will general acute care services and beds will be relocate	d to a new, Existing or retrofitted	building?	
Medical/Surgical (Include GYN)]	
OSHPD FDD SB499 Report Data Last Update: 1	2/07/2015 Submission Date	e: 12/07/2015 Printed: 12/9/	2015 6:25 AM

Report Year: 2015 10190 El Centro Regional Medical Center	El Centro	Page:42 of 93
Report whether the general acute care services and beds will be relocated to a new, existi building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "R		
Building Number: BLD-00757 Building Name: North Wing		
Will general acute care services and beds will be relocated to a new, Existing or retrofitted	building?	
Intensive Care N/A]	
Report whether the general acute care services and beds will be relocated to a new, existi building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "R		
Building Number: BLD-00753 Building Name: L/D Bldg		
Will general acute care services and beds will be relocated to a new, Existing or retrofitted	building?	
Obstetrical Ante Postprtum N/A]	
Report whether the general acute care services and beds will be relocated to a new, existi building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "R		
Building BLD-00753 Building Name: L/D Bldg		
Will general acute care services and beds will be relocated to a new, Existing or retrofitted	building?	
Obstetrical Cesarean/Deliv N/A]	
OSHPD FDD SB499 Report Data Last Update: 12/07/2015 Submission Data	te: 12/07/2015 Printed: 12/9/2	2015 6:25 AM

Report Year: 2015 10190 El Centro Regional Medical C	enter EI C	entro	Page:43 of 93
Report whether the general acute care services and beds will be rele building sites or project numbers for buildings with a Building Resolu	ocated to a new, existing or r tion of "Rebuild" or "Replace	retrofitted building and any co e" per Section 130061(c)(2)(I	prresponding E)
Building BLD-00753 Building Name: L/D Bldg			
Will general acute care services and beds will be relocated to a new	, Existing or retrofitted buildin	ng?	
Obstetrical Recovery N/A			
Report whether the general acute care services and beds will be rele building sites or project numbers for buildings with a Building Resolu			
Building BLD-00753 Building Name: L/D Bldg			
Will general acute care services and beds will be relocated to a new	, Existing or retrofitted building	ng?	
Perinatal (exclude Newborn / GYN))			

Report Year:	2015	10190	El Centro Regional Medical Center	El Centro	Page:44 of 93
lo data reporte	d for Sectio	n 130061(c	:)(3).		

Report Year: 201	10190 El Cer	ntro Regional Medical Center	El Centro		Page:45 of 93		
Report any general per Section 130061	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-00752 Buildin	ng Name: South Wing					
Type of Service	e Provided						
		Surgical	Obstetrical Cesarean/Deliv	Rehabi Therap			
X	Nursing	Anesthesia		Banal (
	IntensiveCare	Clinical Lab	Obstetrical Recovery		Dialysis		
	Pediatric/Adol escent	Radiological/	Newborn/ WellBaby	Outpati Surger			
	Psychiatric Nursing	Imaging					
	Obstetrical	Pharmaceutical	Emergency				
	Ante/Postprtum	Dietetic	Medicine	Suppor Service	t 9S		
	Intermediate Care	Administration					
	Skilled Nursing						
OSHPD FDD SB499 Re	eport Data Las	st Update: 12/07/2015 Subm	ission Date: 12/07/2015	Printed: 12/9/2	2015 6:25 AM		

Report Year: 201	15 10190 El Cer	ntro Regional Medical Center	El Centro		Page:46 of 93			
	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-00753 Buildin	g Name: L/D Bldg						
Type of Service	e Provided							
		Surgical	X Obstetrical Cesarean/Deliv	Rehabil Therapy				
	Nursing	Anesthesia	_					
	IntensiveCare		X Obstetrical Recovery	Renal D	Dialysis			
	Pediatric/Adol escent	Clinical Lab	Newborn/	Outpation Surgery				
	Psychiatric	Radiological/ Imaging	WellBaby					
	Nursing	Pharmaceutical	Emergency	Central	Plant			
X	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	Support Service				
	Intermediate Care	Administration						
	Skilled Nursing							
OSHPD FDD SB499 R	eport Data Las	t Update: 12/07/2015 Subi	nission Date: 12/07/2015	Printed: 12/9/2	015 6:25 AM			

Report Year: 201	15 10190 El Cer	ntro Regional Medical Center	El Centro		Page:47 of 93			
	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-00754 Buildin	g Name: Central Wing						
Type of Service	e Provided							
		Surgical	Obstetrical Cesarean/Deliv	Rehabil Therapy				
	Nursing	Anesthesia	_		N-1 - 1-			
	IntensiveCare		Obstetrical Recovery	Renal D	Jiaiysis			
	Pediatric/Adol escent	Clinical Lab	Newborn/	Outpation Surgery	ent /			
	Psychiatric	Radiological/ Imaging	WellBaby					
	Nursing	Pharmaceutical	Emergency	Central	Plant			
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	X Support Service				
	Intermediate Care	Administration						
	Skilled Nursing							
OSHPD FDD SB499 R	eport Data Las	t Update: 12/07/2015 Subr	nission Date: 12/07/2015	Printed: 12/9/2	015 6:25 AM			

Report Year: 201	15 10190 El Cen	tro Regional Medical Center	El Centro		Page:48 of 93			
	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-00755 Building	g Name: West Addition						
Type of Service	e Provided							
		Surgical	Obstetrical Cesarean/Deliv	Rehabil Therapy				
	Nursing	Anesthesia	_		N-1 - 1-			
	IntensiveCare		Obstetrical Recovery	Renal D	Jiaiysis			
	Pediatric/Adol escent	Clinical Lab	Newborn/	Outpation Surgery	ent /			
	Psychiatric	Radiological/ Imaging	WellBaby					
	Nursing	Pharmaceutical	Emergency	Central	Plant			
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	X Support Service				
	Intermediate Care	Administration						
	Skilled Nursing							
OSHPD FDD SB499 R	eport Data Las	t Update: 12/07/2015 Subr	nission Date: 12/07/2015	Printed: 12/9/2	015 6:25 AM			

Report Year: 201	15 10190 El Cer	ntro Regional Medical Center	El Centro		Page:49 of 93				
	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-00756 Buildin	g Name: Central Plant							
Type of Service	e Provided								
		Surgical	Obstetrical Cesarean/Deliv	Rehabil Therap					
	Nursing	Anesthesia	_		N-1 - 1-				
	IntensiveCare		Obstetrical Recovery	Renal D	Jiaiysis				
	Pediatric/Adol escent	Clinical Lab	Newborn/	Outpation Surgery	ent /				
	Psychiatric	Radiological/ Imaging	WellBaby						
	Nursing	Pharmaceutical	Emergency	X Central	Plant				
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	Suppor Service					
	Intermediate Care	Administration							
	Skilled Nursing								
OSHPD FDD SB499 R	eport Data Las	t Update: 12/07/2015 Subr	nission Date: 12/07/2015	Printed: 12/9/2	015 6:25 AM				

Report Year: 201	15 10190 El Cer	tro Regional Medical Center	El Centro		Page:50 of 93			
	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-00757 Buildin	g Name: North Wing						
Type of Service	e Provided							
		Surgical	Obstetrical Cesarean/Deliv	Rehabil Therapy				
X	Nursing	Anesthesia						
X	IntensiveCare		Obstetrical Recovery	Renal D	Dialysis			
	Pediatric/Adol escent	Clinical Lab	Newborn/	Outpation Surgery	ent			
	Psychiatric	Radiological/ Imaging	WellBaby					
	Nursing	Pharmaceutical	Emergency	Central	Plant			
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	Support Service				
	Intermediate Care	Administration						
	Skilled Nursing							
OSHPD FDD SB499 Re	eport Data Las	t Update: 12/07/2015 Subr	nission Date: 12/07/2015	Printed: 12/9/2	015 6:25 AM			

Report Year: 201	15 10190 El Cer	ntro Regional Medical Center	El Centro		Page:51 of 93			
	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-02688 Buildin	g Name: Storage Building #1						
Type of Service	e Provided							
		Surgical	Obstetrical Cesarean/Deliv	Rehabil Therapy				
	Nursing							
	IntensiveCare	Anesthesia	Obstetrical Recovery	Renal D	Dialysis			
	Pediatric/Adol	Clinical Lab		Outpatio	ent			
	escent	Radiological/	Newborn/ WellBaby	Surgery	,			
	Psychiatric Nursing	Imaging Pharmaceutical	Emergency	Central	Plant			
	Obstetrical Ante/Postprtum		Nuclear Medicine	X Support Service	t			
	Intermediate Care	Administration						
	Skilled Nursing							
OSHPD FDD SB499 R	eport Data Las	t Update: 12/07/2015 Sub	mission Date: 12/07/2015	Printed: 12/9/2	015 6:25 AM			

Report Year: 20	15 10190 El Cen	tro Regional Medical Center	E	El Centro	Page:52 of 93			
	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-02689 Building	g Name: Storage Building #2						
Type of Service	e Provided							
		Surgical		ostetrical sarean/Deliv	Rehabili Therapy			
	Nursing	Anesthesia		_				
	IntensiveCare			ostetrical covery	Renal D	ialysis		
	Pediatric/Adol escent	Clinical Lab		wborn/	Outpatie Surgery			
	Psychiatric	Radiological/ Imaging	We	ellBaby				
	Nursing	Pharmaceutical	Em Em	nergency	Central	Plant		
	Obstetrical Ante/Postprtum	Dietetic		clear	X Support Services			
	Intermediate Care	Administration						
	Skilled Nursing							
OSHPD FDD SB499 R	eport Data Las	t Update: 12/07/2015 Sub	mission Date:	12/07/2015 I	Printed: 12/9/20	015 6:25 AM		

Report Year: 2015 10190	El Centro Regional Medical Center		El Centro		Page:53 of 93			
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-00752	Building Name: South Wing							
	n GAC service by 1/1/2020							
Type of Service Provided								
Nursing	Surgical	Obste Cesar	etrical rean/Deliv	Reh The	abilitation rapy			
IntensiveCare	Anesthesia	Obste		Ren	al Dialysis			
Pediatric/Adol escent	Clinical Lab		very					
Psychiatric Nursing	Radiological/ Imaging	Newb WellB		Outp Surg	patient Jery			
Obstetrical Ante/Postprtum	Pharmaceutical	Emer	gency	Cent	tral Plant			
Intermediate Care	Dietetic		ar Medicine		port			
Skilled Nursing	Administration				vices			
OSHPD FDD SB499 Report	Data Last Update: 12/07/2015	Submission Date	e: 12/07/2015	Printed: 12/9/	2015 6:25 AM			

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-00753 Building Name: L/D Bldg	
Configuration: Remove from GAC service by 1/1/2020	
Type of Service Provided	
Nursing Surgical Obstetrical Cesarean/Deliv Rehabilitation Therapy	
IntensiveCare Anesthesia Obstetrical Renal Dialysis Recovery	
Pediatric/Adol escent Clinical Lab	
Psychiatric Nursing Radiological/ Imaging Newborn/ WellBaby Outpatient Surgery	
Obstetrical Ante/Postprtum Pharmaceutical Central Plant	
Dietetic Care Support	
Skilled Nursing Administration Support	
OSHPD FDD SB499 Report Data Last Update: 12/07/2015 Submission Date: 12/07/2015 Printed: 12/9/2015 6:25 AM	

Report Year: 2015 101	0 El Centro Regional Medical Center		El Centro	P	age:55 of 93		
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-007	Building Name: Central Wing						
Configuration: Remove f	om GAC service by 1/1/2020						
Type of Service Provided							
Nursing	Surgical		etrical arean/Deliv	Rehabilit Therapy	ation		
IntensiveCare	Anesthesia		etrical	Renal Di	alysis		
Pediatric/Ado escent	Clinical Lab	Reco	overy				
Psychiatric Nursing	Radiological/ Imaging	Newl Well		Outpatier Surgery	nt		
Obstetrical Ante/Postprtu	Pharmaceutical	Eme	rgency	Central F	Plant		
Intermediate Care	Dietetic						
Skilled Nursir	Administration		ear Medicine	Support Services	5		
OSHPD FDD SB499 Report	Data Last Lindate: 12/07/2015	Submission Dat	e 12/07/2015 Printe	ad: 12/9/2015	6·25 AM		
OSHPD FDD SB499 Report	Data Last Update: 12/07/2015	Submission Dat	te: 12/07/2015 Printe	ed: 12/9/2015	6:25 AM		

Report Year: 20	10190	El Centro Re	gional Medical Center		El Centro		Page:56 of 93
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-00755	Building Na	me: West Addition				
Configuration:	Remove from GA	C service by	1/1/2020				
Type of Service	Provided						
Nu	irsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	ensiveCare		Anesthesia		Obstetrical Recovery	F	Renal Dialysis
	diatric/Adol cent		Clinical Lab		Recovery		
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Dutpatient Surgery
	ostetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant
Inte Ca	ermediate Ire		Dietetic		Nuclear Medicine		Support
Ski	illed Nursing		Administration				Services
OSHPD FDD SB499 R	Report Da	ata Last Updat	e: 12/07/2015	Submiss	ion Date: 12/07/2015	Printed: 1	2/9/2015 6:25 AM

Report Year: 20	10190	El Centro Reg	gional Medical Center		El Centro		Page:57 of 93
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-00756	Building Na	me: Central Plant				
Configuration:	Remove from G	AC service by	1/1/2020				
Type of Service	Provided						
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	diatric/Adol cent		Clinical Lab				
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	ostetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant
Inte Ca	ermediate Ire		Dietetic		Nuclear Medicine		Support
Sk	illed Nursing		Administration				Services
OSHPD FDD SB499 R	Report	Data Last Update	e: 12/07/2015	Submiss	ion Date: 12/07/2015	Printed:	12/9/2015 6:25 AM

Report Year: 2015 10190	El Centro Regional Medical Center	El Ce	entro	Page:58 of 93			
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-00757	Building Name: North Wing						
Configuration: Remove from (GAC service by 1/1/2020						
Type of Service Provided							
Nursing	Surgical	Obstetrical Cesarean/D		abilitation rapy			
IntensiveCare	Anesthesia	Obstetrical Recovery	Ren	al Dialysis			
Pediatric/Adol escent	Clinical Lab	Recovery					
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outp Surg	oatient gery			
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Cen'	tral Plant			
	Dietetic						
Care Skilled Nursing	Administration	Nuclear Me		oport vices			
OSHPD FDD SB499 Report	Data Last Update: 12/07/2015	Submission Date: 12/	07/2015 Printed: 12/9/	/2015 6:25 AM			

Report Year: 20)15 10190 E	El Centro Re	gional Medical Center		El Centro		Page:	59 of 93
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-00759	Building Na	me: Admin Bldg					
Configuration:	Remove from GAG	C service by	1/1/2020					
Type of Service	Provided							
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitatior Therapy	I
Inte	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysi	S
	ediatric/Adol cent		Clinical Lab					
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	ostetrical ite/Postprtum		Pharmaceutical		Emergency		Central Plant	
Inte Ca	ermediate are		Dietetic		Nuclear Medicine		Support	
Sk	illed Nursing		Administration				Services	
OSHPD FDD SB499 F	Report Da	ita Last Updat	e: 12/07/2015	Submiss	ion Date: 12/07/2015	Printed:	12/9/2015 6:25	AM

Report Year: 20	10190 E	El Centro Re	gional Medical Center		El Centro		Page:6	0 of 93
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-00760	Building Na	me: OB Building					
Configuration:	Remove from GAG	C service by	1/1/2020					
Type of Service	Provided							
Nu	irsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis	
	diatric/Adol cent		Clinical Lab					
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	ostetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant	
Inte Ca	ermediate Ire		Dietetic		Nuclear Medicine		Support	
Ski	illed Nursing		Administration				Services	
				Out			40/0/0045-0.05	
OSHPD FDD SB499 R	keport Da	ita Last Updat	e: 12/07/2015	Submiss	ion Date: 12/07/2015	Printed:	12/9/2015 6:25	- IVI

Report Year: 2015 10190	El Centro Regional Medical Center	El Centro		Page:61 of 93
	buildings on the hospital campus showir by replacement and the type of service			
Building Number: BLD-00761	Building Name: Radiology Building	g		
Configuration: Retrofit Conform	ning building to NPC 4 or NPC 5			
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	Receivery		
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge	
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Centr	al Plant
Intermediate Care	Dietetic			
Skilled Nursing	Administration	Nuclear Medicine	Supp Serv	
OSHPD FDD SB499 Report	Data Last Update: 12/07/2015	Submission Date: 12/07/2015	Printed: 12/9/2	.015 6:25 AM

Report Year: 2015 10190	El Centro Regional Medical Cente	r	El Centro		Page:62 of 93
	l buildings on the hospital campus sho r by replacement and the type of servi				
Building Number: BLD-00762	Building Name: Rad Annex				
Configuration: Retrofit Confo	orming building to NPC 4 or NPC 5				
Type of Service Provided					
Nursing	Surgical		etrical	Reha Thera	bilitation IPY
IntensiveCare	Anesthesia	Obste Reco	etrical	Rena	l Dialysis
Pediatric/Adol escent	Clinical Lab	1.000			
Psychiatric Nursing	Radiological/ Imaging	Newb WellE		Outpa Surge	
Obstetrical Ante/Postprtum	Pharmaceutical	Emer	gency	Centr	al Plant
Intermediate Care	Dietetic	Nucle	ear Medicine	Supp	ort
Skilled Nursing	Administration			Servi	
OSHPD FDD SB499 Report	Data Last Update: 12/07/2015	Submission Date	e: 12/07/2015 Prir	nted: 12/9/2	015 6:25 AM

Report Year: 2015 1019	El Centro Regional Medical Cente	er	El Centro	Page:63 o	f 93
	all buildings on the hospital campus sho or by replacement and the type of servi				9
Building Number: BLD-00763	Building Name: Lab Building				
Configuration: Retrofit Co	forming building to NPC 4 or NPC 5				
Type of Service Provided					
Nursing	Surgical		etrical	Rehabilitation Therapy	
IntensiveCare	Anesthesia	Obste Reco	etrical	Renal Dialysis	
Pediatric/Adol escent	Clinical Lab			_	
Psychiatric Nursing	Radiological/ Imaging	New! Well		Outpatient Surgery	
Obstetrical Ante/Postprtum	Pharmaceutical	Emei	rgency	Central Plant	
Intermediate Care	Dietetic	Nucle	ear Medicine	Support	
Skilled Nursing	Administration			Services	
OSHPD FDD SB499 Report	Data Last Update: 12/07/2015	Submission Dat	te: 12/07/2015 Print	ed: 12/9/2015 6:25 AM	

Report Year: 2015 10190	El Centro Regional Medical Center	EI	Centro	Page:64 of 93
	buildings on the hospital campus showi by replacement and the type of service			
Building Number: BLD-00764	Building Name: Annex			
Configuration: Retrofit Confo	rming building to NPC 4 or NPC 5			
Type of Service Provided				
Nursing	Surgical	Obstetric Cesarear		Rehabilitation Therapy
IntensiveCare	Anesthesia	Obstetric Recovery		Renal Dialysis
Pediatric/Adol escent	Clinical Lab	Recovery		
Psychiatric Nursing	Radiological/ Imaging	Newborn WellBaby		Outpatient Surgery
Obstetrical Ante/Postprtum	Pharmaceutical	Emergen	су	Central Plant
	Dietetic			
Care Skilled Nursing	Administration	Nuclear N	/ledicine	Support Services
OSHPD FDD SB499 Report	Data Last Update: 12/07/2015	Submission Date:	12/07/2015 Printed	I: 12/9/2015 6:25 AM

Report Year: 20	10190	El Centro Regi	onal Medical Center		El Centro		Page:65 of 93		
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-02685	Building Nam	e: East Wing - South						
Configuration:	Rebuild (Per SB	90 Definition for	Rebuild) with new SPC	5 and N	PC4 or NPC5 building.				
Type of Service	Provided								
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
Inte	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis		
	ediatric/Adol cent		Clinical Lab		Noorony				
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	ostetrical ite/Postprtum		Pharmaceutical		Emergency		Central Plant		
Inte Ca	ermediate are		Dietetic		Nuclear Medicine		Support		
Sk	illed Nursing		Administration				Services		
OSHPD FDD SB499 F	Report I	Data Last Update:	12/07/2015	Submiss	on Date: 12/07/2015	Printed:	12/9/2015 6:25 AM		

Report Year: 2015	10190 El Centro Re	gional Medical Center		El Centro		Page:66 of 93
Report the final configuration requirements whether by reper Section 130061(c)(5)						
Building Number: BLD-02	2686 Building Na	me: New Wing				
Configuration: Retrofi	t Conforming building to	NPC 4 or NPC 5				
Type of Service Provid	ed					
Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
IntensiveC	are	Anesthesia		Obstetrical Recovery		Renal Dialysis
Pediatric/A escent	dol	Clinical Lab		Recovery		
Psychiatric Nursing	,	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
Obstetrical Ante/Postp		Pharmaceutical		Emergency		Central Plant
Intermedia Care	te	Dietetic		Nuclear Marilian		Quant
Skilled Nu	rsing	Administration		Nuclear Medicine		Support Services
OSHPD FDD SB499 Report	Data Last Upda	te: 12/07/2015	Submissio	on Date: 12/07/2015	Printed:	12/9/2015 6:25 AM

Report Year: 2015 10190	El Centro Regional Medical Center	•	El Centro		Page:67 of 93
	l buildings on the hospital campus show r by replacement and the type of servic				
Building Number: BLD-02687	Building Name: New Central Pla	ant			
Configuration: Retrofit Confo	orming building to NPC 4 or NPC 5				
Type of Service Provided					
Nursing	Surgical		etrical [rean/Deliv	Rehal Thera	bilitation Py
IntensiveCare	Anesthesia	Obste Reco	etrical	Rena	Dialysis
Pediatric/Adol escent	Clinical Lab				
Psychiatric Nursing	Radiological/ Imaging	Newb WellE		Outpa Surge	
Obstetrical Ante/Postprtum	Pharmaceutical	Emer	gency	Centra	al Plant
Intermediate Care	Dietetic	Nucle	ear Medicine	Supp	ort
Skilled Nursing	Administration		L	Servi	
OSHPD FDD SB499 Report	Data Last Update: 12/07/2015	Submission Date	e: 12/07/2015 Pri	inted: 12/9/2	015 6:25 AM

Report Year: 2015 10190	El Centro Regional Medical Center		El Centro	Page:68 of 93						
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-02688	Building Name: Storage Building	g #1								
Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.										
Type of Service Provided										
Nursing	Surgical	Obste Cesa	etrical	Rehabilitation Therapy						
IntensiveCare	Anesthesia	Obste Reco		Renal Dialysis						
Pediatric/Adol escent	Clinical Lab		,							
Psychiatric Nursing	Radiological/ Imaging	Newb WellB		Outpatient Surgery						
Obstetrical Ante/Postprtum	Pharmaceutical	Emer	gency	Central Plant						
Intermediate Care	Dietetic		ear Medicine	Support						
Skilled Nursing	Administration			Services						
OSHPD FDD SB499 Report	Data Last Update: 12/07/2015	Submission Date	e: 12/07/2015 Printed	i: 12/9/2015 6:25 AM						

Report Year: 2015 10190	El Centro Regional Medical Center	r	El Centro	Page:69 of 93					
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-02689	Building Name: Storage Buildin	g #2							
Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.									
Type of Service Provided									
Nursing	Surgical	Obste Cesar	etrical	Rehabilitation Therapy					
IntensiveCare	Anesthesia	Obste Recov		Renal Dialysis					
Pediatric/Adol escent	Clinical Lab		, or y						
Psychiatric Nursing	Radiological/ Imaging	Newb WellB		Outpatient Surgery					
Obstetrical Ante/Postprtum	Pharmaceutical	Emerg	gency	Central Plant					
Intermediate Care	Dietetic								
Skilled Nursing	Administration		ar Medicine	Support Services					
OSHPD FDD SB499 Report	Data Last Update: 12/07/2015	Submission Date	e: 12/07/2015 Printed	I: 12/9/2015 6:25 AM					

Report Year: 2015 10190	El Centro Regional Medical Center	El Centro Regional Medical Center El Centro								
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-02887 Building Name: Admin Bldg Addition										
Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.										
Type of Service Provided										
Nursing	Surgical	Obstetrica Cesarean/		Rehabilitation Therapy						
IntensiveCare	Anesthesia	Obstetrica Recovery	ı 🗌	Renal Dialysis						
Pediatric/Adol escent	Clinical Lab	Receivery								
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby		Outpatient Surgery						
Obstetrical Ante/Postprtum	Pharmaceutical	Emergenc	y 🗍	Central Plant						
Intermediate Care	Dietetic									
Skilled Nursing	Administration	Nuclear M	edicine	Support Services						
OSHPD FDD SB499 Report	Data Last Update: 12/07/2015	Submission Date: 1	2/07/2015 Printed	: 12/9/2015 6:25 AM						

Report Year: 20	10190	El Centro Reg	ional Medical Center		El Centro		Page:71 of 93		
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-02888	Building Nan	ne: East Wing - North						
Configuration:	Rebuild (Per SB	90 Definition fo	r Rebuild) with new SP	C5 and N	IPC4 or NPC5 building.				
Type of Service	Provided								
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis		
	diatric/Adol cent		Clinical Lab						
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	ostetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant		
Inte Ca	ermediate ire		Dietetic		Nuclear Medicine		Support		
Sk	illed Nursing		Administration				Services		
OSHPD FDD SB499 R	Report E	Data Last Update	: 12/07/2015	Submiss	ion Date: 12/07/2015	Printed:	12/9/2015 6:25 AM		

Report	Year: 2015	10190	El Centro Regio	onal Medic	al Center	El Centro		Page:72 of 93		
	Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)									
Buildi	ng Number: BLE	D-00759	Building Na	ame: Ac	lmin Bldg					
Тур	e of Service Prov	<u>vided</u>								
	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	Centr	al Plant		
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Servi			
	Skilled Nursing	Inpatient Beds	0	X	Administration					
	Total Beds this Building		0							
) FDD SB499 Repo		Data Last Update:	12/07/20	015 Submissi	on Date: 12/07/2015	Printed: 12/9/2			

Report Year: 2015	10190	El Centro Regi	ional Medica	al Center		El Centro		Page:73 of 93
	Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)							
Building Number: BL	D-00760	Building N	lame: OB	Building				
Type of Service Pro	vided							
Nursing	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0		Anesthesia				
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery		Renal Dialysis
Psychiatric	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
Obstetrical X Ante/Postprtum	Inpatient Beds	13		Pharmaceutical		Emergency		Central Plant
Intermediate	Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services
Skilled Nursing	Inpatient Beds	0		Administration				
Total Beds this Building		13						
OSHPD FDD SB499 Repo	ort	Data Last Update:	12/07/20	15 Submiss	sion Date	e: 12/07/2015	Printed: 1	2/9/2015 6:25 AM

Report Year: 2015	10190	El Centro Regi	onal Medic	al Center	El Centro		Page:74 of 93
Include information on and SPC-5 per Sectio		of inpatient beds	by type of §	Service provided by	buildings that are classified a	as SPC-2, SPC	C-3, SPC-4,
Building Number: BL	.D-00761	Building N	ame: Ra	diology Building			
Type of Service Pro	vided						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha	abilitation apy
IntensiveCare	Inpatient Beds	0		Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	al Dialysis
Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby	Outp Surge	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					
OSHPD FDD SB499 Repo	ort	Data Last Update:	12/07/20)15 Submis	sion Date: 12/07/2015	Printed: 12/9/2	015 6:25 AM

Report Year: 2015	10190	El Centro Regi	ional Medic	al Center	El Centro		Page:75 of 93
Include information on and SPC-5 per Section		f inpatient beds	by type of §	Service provided by	buildings that are classified a	as SPC-2, SP	C-3, SPC-4,
Building Number: BLC	0-00762	Building N	lame: Ra	d Annex			
Type of Service Prov	rided						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha Ther	abilitation apy
IntensiveCare	Inpatient Beds	0		Anesthesia			
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	al Dialysis
Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby	Outp Surg	atient ery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Cent	ral Plant
Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Serv	port ices
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
OSHPD FDD SB499 Report	rt D	Data Last Update:	12/07/20)15 Submiss	ion Date: 12/07/2015	Printed: 12/9/2	2015 6:25 AM

Report Ye	ar: 2015	10190	El Centro Regi	onal Medic	al Center	El Centro		Page:76 of 93
	nformation on t C-5 per Section		inpatient beds	by type of §	Service provided by	buildings that are classified a	as SPC-2, SP	C-3, SPC-4,
Building	Number: BLD	0-00763	Building N	ame: La	b Building			
Type of	f Service Prov	ided						
	ursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha Ther	abilitation apy
Int	tensiveCare	Inpatient Beds	0		Anesthesia			
	ediatric/Adol scent	Inpatient Beds	0	X	Clinical Lab	Obstetrical Recovery	Rena	al Dialysis
	sychiatric ursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outp Surg	patient ery
	bstetrical nte/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Cent	ral Plant
	termediate are	Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Serv	port ices
Sk	killed Nursing	Inpatient Beds	0		Administration			
	otal Beds this uilding		0					
	DD SB499 Repor		Data Last Update:	12/07/20		sion Date: 12/07/2015	Printed: 12/9/2	

Report Yea	ar: 2015	10190	El Centro Reg	ional Medica	al Center	El Centro		Page:77 of 93
	formation on t 5 per Section		inpatient beds	by type of S	Service provided by	buildings that are classified	as SPC-2, SP	C-3, SPC-4,
Building N	Number: BLD	0-00764	Building N	lame: An	nex			
Type of	Service Prov	ided						
Nui	rsing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha Ther	abilitation apy
lnte	ensiveCare	Inpatient Beds	0		Anesthesia			
	diatric/Adol cent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	al Dialysis
	ychiatric rsing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outp Surg	atient ery
	stetrical te/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Cent	ral Plant
Inte	ermediate re	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Supp Serv	port ices
Ski	illed Nursing	Inpatient Beds	0		Administration			
	tal Beds this ilding		0					
OSHPD FDD	D SB499 Repor	t D	ata Last Update	: 12/07/20	15 Submise	sion Date: 12/07/2015	Printed: 12/9/2	015 6:25 AM

Report Year: 2	2015 10190	El Centro Regio	onal Medic	al Center	El Centro		Page:78 of 93
Include informatic and SPC-5 per Se		f inpatient beds t	by type of S	Service provided by	buildings that are classified	as SPC-2, SPC	C-3, SPC-4,
Building Number:	BLD-02685	Building Na	ame: Ea	st Wing - South			
Type of Service	Provided						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha	bilitation apy
IntensiveCa	are Inpatient Beds	0		Anesthesia			
Pediatric/A	dol Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	l Dialysis
Psychiatric	lnpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge	atient ery
Obstetrical Ante/Postp		0		Pharmaceutical	Emergency	Centi	al Plant
Intermediat	te Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Servi	
Skilled Nur	sing Inpatient Beds	0		Administration			
Total Beds Building	this	0					
OSHPD FDD SB499	Report	Data Last Update:	12/07/20)15 Submis	sion Date: 12/07/2015	Printed: 12/9/2	015 6:25 AM

Report Year: 20	015 10190	El Centro Reg	ional Medica	Il Center	El Centro		Page:79 of 93
Include information and SPC-5 per Se		of inpatient beds	by type of S	ervice provided by	buildings that are classified	as SPC-2, SPC	C-3, SPC-4,
Building Number:	BLD-02686	Building N	lame: Nev	w Wing			
Type of Service	Provided						
X Nursing	Inpatient Beds	48		Surgical	Obstetrical Cesarean/Deliv	Reha	bilitation apy
X IntensiveCa	re Inpatient Beds	12		Anesthesia			
Pediatric/Ad escent	lol Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	l Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outp Surge	atient ery
Obstetrical Ante/Postpr	Inpatient tum Beds	0		Pharmaceutical	Emergency	Cent	al Plant
Intermediate	e Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Servi	ort ces
Skilled Nurs	ing Inpatient Beds	0		Administration			
Total Beds t Building	his	60					
OSHPD FDD SB499 F	Report	Data Last Update	: 12/07/202	15 Submis	sion Date: 12/07/2015	Printed: 12/9/2	015 6:25 AM

Report Year: 2015	10190	El Centro Regi	onal Medic	al Center	El Centro		Page:80 of 93
Include information or and SPC-5 per Sectio		of inpatient beds	by type of \$	Service provided by	buildings that are classified a	as SPC-2, SPC	C-3, SPC-4,
Building Number: BL	D-02687	Building N	ame: Ne	ew Central Plant			
Type of Service Pro	vided						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha	bilitation apy
IntensiveCare	Inpatient Beds	0		Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	l Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outp Surge	atient ery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	X Centr	ral Plant
Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Servi	ort ces
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
OSHPD FDD SB499 Rep	ort	Data Last Update:	12/07/20	015 Submise	sion Date: 12/07/2015	Printed: 12/9/2	015 6:25 AM

Report Year:	2015 10190	El Centro Regio	onal Medical Center	El Centro	Page:81 of 93
	ation on the number or Section 130061(e)	of inpatient beds t	by type of Service provided b	y buildings that are classified	as SPC-2, SPC-3, SPC-4,
Building Num	ber: BLD-02887	Building Na	ame: Admin Bldg Addition		
Type of Serv	vice Provided				
Nursing	lnpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	veCare Inpatient Beds	0	Anesthesia		
Pediatr escent	ic/Adol Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychia Nursing		0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetr Ante/Po	ical Inpatient ostprtum Beds	0	Pharmaceutical	Emergency	Central Plant
Interme Care	ediate Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services
Skilled	Nursing Inpatient Beds	0	Administration		
Total B Building	eds this	0			
OSHPD FDD SB	499 Report	Data Last Update:	12/07/2015 Submis	ssion Date: 12/07/2015	Printed: 12/9/2015 6:25 AM

Report Year:	2015 10190	El Centro Regi	onal Medic	al Center	El Centro		Page:82 of 93	
	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 Numb	er: BLD-02888	Building N	ame: Ea	st Wing - North				
<u>Type of Serv</u>	ice Provided							
Nursing	Inpatient Beds	0		Surgical	Obstetrica Cesarear		abilitation rapy	
	eCare Inpatient Beds	0		Anesthesia				
Pediatric X escent	c/Adol Inpatient Beds	12		Clinical Lab	Obstetrica Recovery		al Dialysis	
Psychia Nursing	tric Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		patient gery	
Obstetri Ante/Po		0		Pharmaceutical	Emergen	cy 🗌 Cen	tral Plant	
Intermed Care	diate Inpatient Beds	0		Dietetic	Nuclear Medicine	Sup Serv	port vices	
Skilled N	Nursing Inpatient Beds	0		Administration				
Total Be Building		12						
OSHPD FDD SB4	199 Report	Data Last Update:	12/07/20)15 Submis	sion Date: 12/07/201	15 Printed: 12/9/	2015 6:25 AM	

Report Year: 2015	10190 El Centro	Regional Medical Center	El Centro	Page:83 of 93
Include information on the SPC-5 per Section 13006		eds by type of unit provided by buildings tha	at are classified as SPC-2, SPC-3,	SPC-4, and
Building Number: BL	D-00759 Build	Ing Name: Admin Bldg		
Medical / Surgical (Inclu	ude GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	ot O
Perinatal (Exclude New	born / GYN)	Burn	Skilled Nursing	
npatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt O
Pediatric		Intensive Care Newborn Nursery	Intermediate Care	
npatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt O
ntensive Care		Rehabilitation Center	Int. Care / Developmentally Disabled	
npatient 0 Bed	Inpatient 0 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 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv	
SHPD FDD SB499 Report	Data Last Up	date: 12/07/2015 Submission Date	: 12/07/2015 Printed: 12/9/2	2015 6:25 AM

Report Year:201510190El Cen	tro Regional Medical Center	El Centro Page:84 of 93
Include information on the number of inpatier SPC-5 per Section 130061(e)	nt beds by type of unit provided by buildings that	are classified as SPC-2, SPC-3, SPC-4, and
Building Number: BLD-00760 B	uilding Name: OB Building	
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 13 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 13 13
OSHPD FDD SB499 Report Data Las	t Update: 12/07/2015 Submission Date:	12/07/2015 Printed: 12/9/2015 6:25 AM

Report Year:201510190El Cen	tro Regional Medical Center	El Centro Page:85 of 93
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-00761 Bu	ilding Name: Radiology Building	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0
OSHPD FDD SB499 Report Data Last	Update: 12/07/2015 Submission Date:	12/07/2015 Printed: 12/9/2015 6:25 AM

Report Year: 2015 10190 El Cer	tro Regional Medical Center	El Centro Page:86 of 93
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-00762 B	uilding Name: Rad Annex	
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 Las	t Update: 12/07/2015 Submission Date:	12/07/2015 Printed: 12/9/2015 6:25 AM

Report Year:201510190El Cer	ntro Regional Medical Center	El Centro Page:87 of 93
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-00763 B	uilding Name: Lab Building	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds 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: 12/07/2015 Submission Date:	12/07/2015 Printed: 12/9/2015 6:25 AM

Report Year: 2015 10190 El Cent	ro Regional Medical Center	El Centro Page:88 of 93
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-00764 Bu	ilding Name: Annex	
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: 12/07/2015 Submission Date:	12/07/2015 Printed: 12/9/2015 6:25 AM

Report Year: 2015 10190 El Cent	ro Regional Medical Center	El Centro Page:89 of 93
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-02685 Bu	ilding Name: East Wing - South	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0
OSHPD FDD SB499 Report Data Last	Update: 12/07/2015 Submission Date:	12/07/2015 Printed: 12/9/2015 6:25 AM

Report Year: 2015 10190 El Centr	ro Regional Medical Center	El Centro Pa	age:90 of 93
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)			-4, and
Building Number: BLD-02686 Bui	Iding Name: New Wing		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 48 Inpatient 9861 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 12 Inpatient 3135 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0
Coronary Care	Chemical Dependency	Total Beds this Total Bed Building Per Building	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service	60
OSHPD FDD SB499 Report Data Last	Jpdate: 12/07/2015 Submission Date:	12/07/2015 Printed: 12/9/2015	6:25 AM

Report Year:201510190El Cen	tro Regional Medical Center	El Centro Page:91 of 93
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-02687 Bu	ilding Name: New Central Plant	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0
OSHPD FDD SB499 Report Data Last	Update: 12/07/2015 Submission Date:	12/07/2015 Printed: 12/9/2015 6:25 AM

Report Year: 2015 10190 El Cer	ntro Regional Medical Center	El Centro Page:92 of 93
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-02887 B	Admin Bldg 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
OSHPD FDD SB499 Report Data Las	st Update: 12/07/2015 Submission Date:	: 12/07/2015 Printed: 12/9/2015 6:25 AM

Report Year: 2015 10190 El Centr	o Regional Medical Center	El Centro Page:93 of 93	
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-02888 Bui	Iding Name: East Wing - North		
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 12 Inpatient 1325 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 12 12	
OSHPD FDD SB499 Report Data Last U	Jpdate: 12/07/2015 Submission Date:	12/07/2015 Printed: 12/9/2015 6:25 AM	