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:	10677					
Facility Name:	Loma Li	nda University Medical Center				
Address:	11234 A	nderson St.				
City:	Loma Li	nda				
Hospital Owner/Licensee:		Loma Linda University Medical Center				
Year of Reporting:		2015				
Contact 1 e-mail Ac	ddress:	[Confidential data left blank intentionally.]				
Contact 2 e-mail Ac	ddress:	[Confidential data left blank intentionally.]				
Contact 3 e-mail Address::		[Confidential data left blank intentionally.]				
Name of Sub	omitter:	Loma Linda Unversity Medical Center				
Submission	n Date:	12/16/2015 4:47:48 PM				

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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- 01479	Main Hospital Tower - Area C	11234 Anderson St.	Rebuild	SPC5	01/01/2020	01/01/2020
BLD- 03023	Main Hospital Tower - Area A	11234 Anderson St.	Rebuild	SPC5	01/01/2020	01/01/2020
BLD- 03025	Original Plant	11234 Anderson St.	Retrofit	SPC5	01/01/2020	01/01/2020

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For each building which is planned for rebuild, retrofit or replacement, provide the project numbers, per Section 130061(c)(1)(C). The projected construction start date or dates and projected Completion date or dates per Section 130061(c)(1)(D) and the most recent project status and approvals per Section 130061(c)(1)(E).

Building	No: BLD-0	1479	Main Hospital Tower - Area C		Retrofit/Re	eplacement	Yes-Subr	nitted	
Facility Number	Project Number	Sub Num	Scope	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
10677	I150010-36- 00	0	PPR - Campus Transformation Project	5/12/2015		03/23/2016		ACTI	No
10677	S142915-36 -00	0	CTP Make Ready-FDC Relocation	12/17/201 4	2/25/2015 12:00:00 AM	09/24/2015		PEND	No
10677	S150833-36 -00	0	CTP - Site Make Ready	4/2/2015	8/13/2015 12:00:00 AM	09/24/2015		FIEL	No
10677	S152206-36 -00	0	CTP Site Make Ready 02	8/20/2015	10/27/2015 12:00:00 AM	02/15/2016		ACTI	No

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For each building which is planned for rebuild, retrofit or replacement, provide the project numbers, per Section 130061(c)(1)(C). The projected construction start date or dates and projected Completion date or dates per Section 130061(c)(1)(D) and the most recent project status and approvals per Section 130061(c)(1)(E).

Building No:

BLD-03023

Main Hospital Tower - Area A

Retrofit/Replacement Project:

Yes-Submitted

Facility Number	Project r Number	Sub Num	Scope	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
10677	I150010-36- 00	0	PPR - Campus Transformation Project	5/12/2015		03/23/2016		ACTI	No
10677	S142915-36 -00	0	CTP Make Ready-FDC Relocation	12/17/201 4	2/25/2015 12:00:00 AM	09/24/2015		PEND	No
10677	\$150833-36 -00	0	CTP - Site Make Ready	4/2/2015	8/13/2015 12:00:00 AM	09/24/2015		FIEL	No
10677	S152206-36 -00	0	CTP Site Make Ready 02	8/20/2015	10/27/2015 12:00:00 AM	02/15/2016		ACTI	No

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-03025

Original Plant

Retrofit/Replacement Project:

Yes-Submitted

Facility Number	Project Number	Sub Num	Scope	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
10677	I140008-36- 00	0	Loma Linda University Steam Plant Building, SPC 5 Seismic Improvements	11/4/2014		06/01/2016	04/01/2018	OPEN	No

Report Year: 2015 10677 Loma Linda University Medical Center Loma Linda Page:5 of 66 Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F) BLD-01479 Main Hospital Tower - Area C **Building Number: Building Name:** Type of Service Provided Obstetrical $|\mathsf{x}|$ Surgical Nursing 302 Inpatient 67564 Inpatient Recovery **Beds** Days Newborn/ 24775 IntensiveCare Inpatient Inpatient Days Anesthesia WellBaby Beds **Emergency** 73 Inpatient Days 16741 Clinical Lab X Pediatric/Adol Inpatient escent **Beds** Nuclear Radiological/ Medicine Imaging Inpatient Days **Psychiatric** 0 Inpatient Nursing **Beds Pharmaceutical** Rehabilitation 35 Obstetrical Inpatient Inpatient Days 5461 Dietetic Therapy Ante/Postprtum Beds Renal Dialysis Administration Inpatient Days 0 Intermediate Inpatient Care **Beds** X Support Outpatient Services Surgery Inpatient Days Skilled Nursing Inpatient 0 Beds Obstetrical Total Beds this 483 Cesarean/Deliv Central Plant Building

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Provide the number	of inpatient be	ds and patient days per type of service pe	er building per Section 130061	1(c)(1)(F)	
Building Number:		Building Name: Ma	ain Hospital Tower - Area A		
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery	
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	X Anesthesia	Newborn/ WellBaby	
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency	/
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	X Nuclear Medicine	
☐ Obstetrical	Inpatient	0 Inpatient Days 0	Pharmaceutical	X Rehabilitat	ion
Ante/Postprtur			Dietetic	☐ Therapy	
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dial	ysis
Skilled Nursing		0 Inpatient Days 0	X Support Services	Outpatient Surgery	
	Beds	Total Beds this Building	Obstetrical Cesarean/Deliv	Central Pla	ant

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Provide the number of	f inpatient bed	ds and patient days per type of service pe	er building per Section 13006	1(c)(1)(F)	
Building Number: BL Type of Service Prov		Building Name: Ori	iginal Plant		_
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery	
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby	
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency	
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine	
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy	
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis	
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services	Outpatient Surgery	
	Deas	Total Beds this Building	Obstetrical Cesarean/Deliv	X Central Plant	

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Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)							
Building Number:	BLD-01479	Building Name: Main	Hospital Tower - Area C				
Medical / Surgical ((Include GYN)	Acute Respiratory	Care	Acute Psychiatric			
Inpatient 302 Bed	Inpatient 6756 Days 4	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing			
Inpatient 35 Bed	Inpatient 5461 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Pediatric		intensive Care New Nursery	vborn	Intermediate Card			
Inpatient 73 Bed	Inpatient 1674 Days 1	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Intensive Care		Rehabilitation Center		Int. Care / developm Disabled	nent		
Inpatient 73 Bed	Inpatient 2477 Days 5	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	483	483		

Report Year: 2015 10677 Loma Linda University Medical Center Loma Linda Page:9 of 66 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) BLD-03023 Main Hospital Tower - Area A **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Bed Days Bed Days Perinatal (excluse Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Days Days Bed Bed **Pediatric** intensive Care Newborn **Intermediate Card** Nursery Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days **Intensive Care** Rehabilitation Int. Care / development **Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Bed Days Days Bed Days **Total Beds this Total Beds this Coronary Care** Chemical **Building Per Building Per** Dependency Unit Service Inpatient Inpatient 0 Inpatient Inpatient ol Days Days Bed Bed

Report Year: 2015 10677 Loma Linda University Medical Center Loma Linda Page:10 of 66 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) BLD-03025 **Original Plant Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Bed Days Bed Days Perinatal (excluse Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Days Days Bed Bed **Pediatric** intensive Care Newborn **Intermediate Card** Nursery Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Intensive Care** Rehabilitation Int. Care / development **Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Bed Days Days Bed Days **Total Beds this Total Beds this Coronary Care** Chemical **Building Per Building Per** Dependency Unit Service Inpatient Inpatient 0 Inpatient Inpatient ol Days Days Bed Bed

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

Building Number	Building Name	Building to be Removed / Replaced / Rebuilt
BLD-01479	Main Hospital Tower - Area C	Rebuild
BLD-01480	Main Hospital Tower - Area B	Rebuild
BLD-01481	Emergency Room Expansion - 1976	Rebuild
BLD-01482	Northeast Wing - Schuman Pavilion	Remain
BLD-01483	South Wing Phase 2	Remain
BLD-01485	South Wing Phase I	Remain
BLD-01486	Co-Generation Plant	Remain
BLD-02961	Chiller Facility	Remain
BLD-03021	South Wing Phase I	Remain
BLD-03022	South Wing Phase I	Remain
BLD-03023	Main Hospital Tower - Area A	Rebuild
BLD-03024	South Wing Phase 2	Remain
BLD-03025	Original Plant	Retrofit
BLD-05490	Emergency Generator	Remain

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List ALL prope	osed new buildings to be constructed at this or an	nother site.	
Building Number	Building Name	New Site	
N_1	New LLUMC Hospital Building		

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For the building or buildings to be replaced, rebuilt, removed from acute care service, provide the following: The projected date or dates the building will be removed from service per Section 130061 (c)(2)(A) and provide said date or dates for replaced or rebuild buildings as well. The planned uses of the building or buildings to be removed from acute care service per Section 130061(c)(2)(B) and provide said uses for replaced or rebuild buildings as well. The inpatient service currently delivered in the building or buildings per Section 130061(c)(2)(C)								
Building I	Building Number: BLD-01479 Main Hospital Tower - Area C Removal Date:							
Planned	Uses for the building to	be remo	ved from acute care service:					
Planned	use for building:							
Inpatient	services currently delive	ered in th	ne building:					
X	Nursing	X	Surgical	X	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	1	
X	IntensiveCare	X	Anesthesia	X	Obstetrical	V Beed Bid et		
X	Pediatric/Adol escent	X	Clinical Lab		Recovery	X Renal Dialysis	S	
	Psychiatric Nursing	Х	Radiological/ Imaging	X	Newborn/ WellBaby	X Outpatient Surgery		
X	Obstetrical Ante/Postprtum	X	Pharmaceutical	X	Emergency	X Central Plant		
	Intermediate Care	X	Dietetic		Emergency			
	Skilled Nursing	X	Administration	X	Nuclear Medicine	X Support Services		

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For the building or buildings to be replaced, rebuilt, removed from acute care service, provide the following: The projected date or dates the building will be removed from service per Section 130061 (c)(2)(A) and provide said date or dates for replaced or rebuild buildings as well. The planned uses of the building or buildings to be removed from acute care service per Section 130061(c)(2)(B) and provide said uses for replaced or rebuild buildings as well. The inpatient service currently delivered in the building or buildings per Section 130061(c)(2)(C)									
Building Number: BLD-03023 Main Hospital Tower - Area A Removal Date:									
Planned I	Uses for the building to b	be removed from acute care service:							
Planned	use for building:								
<u>Inpatient</u>	services currently delive	ered in the building:							
	Nursing	Surgical	Obstetrical Cesarean/I	X Rehabilitation Deliv Therapy	on				
	IntensiveCare	X Anesthesia	Obstetrical	□ Passal Biale					
	Pediatric/Adol escent	Clinical Lab	Recovery	Renal Dialy	SIS				
	Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery					
	Obstetrical Ante/Postprtum	Pharmaceutical	, 	Control Dio					
	Intermediate Care	Dietetic	☐ Emergency	, Central Pla	nt				
	Skilled Nursing	Administration	X Nuclear Medicine	X Support Services					

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Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c)(2)(E)						
Building Number: BLD-01480 Building Name: Main Hospital Tower - Area B						
Will general acute care services and beds will be relocated to a new, Existing or retrofitted	building?					
CentralPlant N/A]					
Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Re		responding				
Building Number: BLD-01481 Building Name: Emergency Room Expansion - 1976						
Will general acute care services and beds will be relocated to a new, Existing or retrofitted	building?					
Emergency N/A						
Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Rebuild" or "Rebuild".		responding				
Building Number: BLD-01479 Building Name: Main Hospital Tower - Area C						
Will general acute care services and beds will be relocated to a new, Existing or retrofitted	building?					
Nursing N/A]					

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Report whether the general acute care services and beds will be relocated to a new, exi building sites or project numbers for buildings with a Building Resolution of "Rebuild" or		
Building Name: Main Hospital Tower - Area C Number:		
Will general acute care services and beds will be relocated to a new, Existing or retrofitte	ed building?	
Intensive Care N/A		
Report whether the general acute care services and beds will be relocated to a new, exi building sites or project numbers for buildings with a Building Resolution of "Rebuild" or		
Building Number: BLD-01479 Building Name: Main Hospital Tower - Area C		
Will general acute care services and beds will be relocated to a new, Existing or retrofitte	ed building?	
Pediatric Adolescent N/A		
Report whether the general acute care services and beds will be relocated to a new, exi	sting or retrofitted building and any o	corresponding
building sites or project numbers for buildings with a Building Resolution of "Rebuild" or		
Building Name: Main Hospital Tower - Area C Number:		
Will general acute care services and beds will be relocated to a new, Existing or retrofitte	ed building?	
Obstetrical Ante Postprtum N/A		

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Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c)(2)(E)	
Building Number: BLD-01479 Building Name: Main Hospital Tower - Area C	
Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?	
Surgical N/A	
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 Name: Main Hospital Tower - Area C	
Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?	
Anesthesia N/A	
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 Name: Main Hospital Tower - Area C	
Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?	
ClinicalLab N/A	

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Report whether the general acute care services an building sites or project numbers for buildings with			
Building Number: Will general acute care services and beds will be represented by Radiological/Imaging N/A	Main Hospital Tower - Area C elocated to a new, Existing or retrofitted	building?	
Report whether the general acute care services an building sites or project numbers for buildings with			
Building Number: Will general acute care services and beds will be replaced by the property of the property o	Main Hospital Tower - Area C elocated to a new, Existing or retrofitted	building?	
Report whether the general acute care services an building sites or project numbers for buildings with			
Building Number: Will general acute care services and beds will be represented by the property of the propert	Main Hospital Tower - Area C elocated to a new, Existing or retrofitted	building?	

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Report whether the general acute care services and beds will be relocated to a new, e building sites or project numbers for buildings with a Building Resolution of "Rebuild" of the building sites or project numbers for buildings with a Building Resolution of "Rebuild" of the building sites or project numbers for buildings with a Building Resolution of "Rebuild" of the building sites or project numbers for buildings with a Building Resolution of "Rebuild" of the buildings with a Building Resolution of "Rebuild" of the buildings with a Building Resolution of "Rebuild" of the buildings with a Building Resolution of "Rebuild" of the buildings with a Building Resolution of "Rebuild" of the buildings with a Building Resolution of "Rebuild" of the buildings with a Building Resolution of "Rebuild" of the buildings with a Building Resolution of "Rebuild" of the buildings with a Building Resolution of "Rebuild" of the buildings with a Building Resolution of "Rebuild" of the buildings with a Building Resolution of "Rebuild" of the buildings with a Building Resolution of the building Resolution of the buildings with		
Building Number: BLD-01479 Building Name: Main Hospital Tower - Area C		
Will general acute care services and beds will be relocated to a new, Existing or retrof	fitted building?	
Administration N/A		
Report whether the general acute care services and beds will be relocated to a new, e building sites or project numbers for buildings with a Building Resolution of "Rebuild" of the building sites or project numbers for buildings with a Building Resolution of "Rebuild" of the building sites or project numbers for buildings with a Building Resolution of "Rebuild" of the building sites or project numbers for buildings with a Building Resolution of "Rebuild" of the buildings with a Building Resolution of "Rebuild" of the buildings with a Building Resolution of "Rebuild" of the buildings with a Building Resolution of "Rebuild" of the buildings with a Building Resolution of "Rebuild" of the buildings with a Building Resolution of "Rebuild" of the buildings with a Building Resolution of "Rebuild" of the buildings with a Building Resolution of "Rebuild" of the buildings with a Building Resolution of "Rebuild" of the buildings with a Building Resolution of "Rebuild" of the buildings with a Building Resolution of "Rebuild" of the buildings with a Building Resolution of the building Resolution of the building Resolu		
Building Number: BLD-01479 Building Name: Main Hospital Tower - Area C		
Will general acute care services and beds will be relocated to a new, Existing or retrof	fitted building?	
Support Services N/A		
Report whether the general acute care services and beds will be relocated to a new, e building sites or project numbers for buildings with a Building Resolution of "Rebuild" of		
Building Name: Main Hospital Tower - Area C Number:		
Will general acute care services and beds will be relocated to a new, Existing or retrof	fitted building?	
Obstetrical Cesarean/Deliv N/A		

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Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Re	ng or retrofitted building and any cor eplace" per Section 130061(c)(2)(E)	responding
Building Number: BLD-01479 Building Name: Main Hospital Tower - Area C		
Will general acute care services and beds will be relocated to a new, Existing or retrofitted	building?	
Obstetrical Recovery N/A		
Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Rebuild" or "Rebuild".		
Building Name: Main Hospital Tower - Area C Number:		
Will general acute care services and beds will be relocated to a new, Existing or retrofitted	building?	
Newborn/Well Baby N/A		
Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Rebuild" or "Rebuild".		
Building Name: Main Hospital Tower - Area C Number:		
Will general acute care services and beds will be relocated to a new, Existing or retrofitted	building?	
Emergency N/A		

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Report whether the general acute care services and beds will be relocated to a new, exis building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "		
Building Name: Main Hospital Tower - Area C Number:		
Will general acute care services and beds will be relocated to a new, Existing or retrofitte	d building?	
Nuclear Medicine N/A		
Report whether the general acute care services and beds will be relocated to a new, exis building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "		
Building Name: Main Hospital Tower - Area C Number:		
Will general acute care services and beds will be relocated to a new, Existing or retrofitte	d building?	
Renal Dialysis N/A		
Report whether the general acute care services and beds will be relocated to a new, exis building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "		
Building Name: Main Hospital Tower - Area C Number:		
Will general acute care services and beds will be relocated to a new, Existing or retrofitte	d building?	
OutpatientSurgery N/A		

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Report whether the general acute care services and beds will be relocated to a new building sites or project numbers for buildings with a Building Resolution of "Rebuild		
Building Number: BLD-01479 Building Name: Main Hospital Tower - Area C		
Will general acute care services and beds will be relocated to a new, Existing or retr	rofitted building?	
Medical/Surgical (Include GYN)		
Report whether the general acute care services and beds will be relocated to a new building sites or project numbers for buildings with a Building Resolution of "Rebuild		
Building BLD-01479 Building Name: Main Hospital Tower - Area C Number:		
Will general acute care services and beds will be relocated to a new, Existing or retr	rofitted building?	
Perinatal (exclude Newborn / GYN))		
Report whether the general acute care services and beds will be relocated to a new building sites or project numbers for buildings with a Building Resolution of "Rebuild		
Building Name: Main Hospital Tower - Area C Number:		
Will general acute care services and beds will be relocated to a new, Existing or retr	rofitted building?	
Pediatric N/A		

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Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c)(2)(E)	
Building Name: Main Hospital Tower - Area C	
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, 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 Name: Main Hospital Tower - Area A Number:	
Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?	
Anesthesia N/A	
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-03023 Building Name: Main Hospital Tower - Area A Number:	
Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?	
Support Services N/A	

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Report whether the general acute care services and beds will be relocated to a no building sites or project numbers for buildings with a Building Resolution of "Rebu		
Building Number: BLD-03023 Building Name: Main Hospital Tower - Area A	A	
Will general acute care services and beds will be relocated to a new, Existing or r	etrofitted building?	
Nuclear Medicine N/A		
Report whether the general acute care services and beds will be relocated to a not building sites or project numbers for buildings with a Building Resolution of "Rebu		
Building Number: BLD-03023 Building Name: Main Hospital Tower - Area A	4	
Will general acute care services and beds will be relocated to a new, Existing or r	etrofitted building?	
Rehabilitation N/A		
Therapy		

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Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per Section 130061(c)(4)								
Building Number:	BLD-01479 Buildir	g Name: M	ain Hospital Tower - /	Area C				
Type of Service	e Provided							
		X	Surgical	Х	Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
X	Nursing	X	Anesthesia					
X	IntensiveCare	_		Х	Obstetrical Recovery	X	Renal Dialysis	
X	Pediatric/Adol escent	X	Clinical Lab			Х	Outpatient	
		X	Radiological/ Imaging	Х	Newborn/ WellBaby		Surgery	
	Psychiatric Nursing	X	Pharmaceutical	X	Emergency		Central Plant	
X	Obstetrical							
	Ante/Postprtum	X	Dietetic	X	Nuclear Medicine	X	Support Services	
П	Intermediate							
_	Care	X	Administration					
	Skilled Nursing							

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Report any general per Section 130061	acute care hospital inpa	tient service tha	at is provided in any	general a	acute care hospital	building t	hat is rated SPC-1	
Building Number:	BLD-03023 Buildin	g Name: Ma	in Hospital Tower -	Area A				
Type of Service	Provided							
			Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy	
	Nursing	X	Anesthesia				Renal Dialysis	
	IntensiveCare		Clinical Lab		Obstetrical Recovery		Reliai Dialysis	
	Pediatric/Adol escent		Radiological/		Newborn/ WellBaby		Outpatient Surgery	
	Psychiatric Nursing		Imaging Pharmaceutical		Emergency		Central Plant	
	Obstetrical Ante/Postprtum		Dietetic	X	Nuclear Medicine	X	Support Services	
	Intermediate Care		Administration					
	Skilled Nursing							

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Report any general per Section 130061	acute care hospital inpa (c)(4)	tient service that is pro	vided in any general	acute care hospita	al building that	is rated SPC-1
Building Number:	BLD-03025 Buildin	g Name: Original Pl	ant			
Type of Service	e Provided					
		Surgica	al	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	Nursing	Anesthe	esia			Renal Dialysis
	IntensiveCare	Clinica	LLab	Obstetrical Recovery		enai Diaiysis
	Pediatric/Adol escent	Radiolo		Newborn/ WellBaby		Outpatient Gurgery
	Psychiatric Nursing	Imagin	g 	Emergency		Control Dloot
			aceutical	Linergency	X C	Central Plant
	Obstetrical Ante/Postprtum	Dietetid		Nuclear Medicine		Support Services
	Intermediate Care	Admini	stration			
	Skilled Nursing					

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Report the final configuration of all bui requirements whether by retrofit or by per Section 130061(c)(5)	Idings on the hospital campus show replacement and the type of service	ving how each building will comply verthat will be provided in each gener	vith the SPC-5/NPC-4 or 5 ral acute care hospital building
Building Number: BLD-01479	Building Name: Main Hospital To	ower - Area C	
Configuration: N/A			
Type of Service Provided			
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal Dialysis
Pediatric/Adol escent	Clinical Lab	Recovery	
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Plant
Intermediate	Dietetic	Emergency	Central Flant
Care	Administration	Nuclear Medicine	Support Services
Skilled Nursing	_		

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eport the final co equirements whe er Section 13006	ether by retrofit or by r	dings on the eplacement	hospital campus show and the type of service	ving how e e that will	each building will comply be provided in each gen	with the SF eral acute c	PC-5/NPC-4 or 5 are hospital building
uilding Number:	BLD-01480	Building Na	me: Main Hospital To	ower - Are	а В		
Configuration:	N/A						
Type of Service	ce Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Ir	ntensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant
☐ Ir	ntermediate		Dietetic		Lillergency		Oemai riant
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services

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Report the final con- requirements wheth per Section 130061	er by retrofit or by i	dings on the l eplacement a	nospital campus showing and the type of service the	g how ean	ach building will comply wo be provided in each gener	ith the SPC al acute car	-5/NPC-4 or 5 e hospital building
Building Number:	BLD-01481	Building Nan	ne: Emergency Room	Expansi	ion - 1976		
Configuration:	N/A						
Type of Service	Provided						
Nui	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Inte	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	diatric/Adol cent		Clinical Lab		Recovery		
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	stetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant
Inte Car	ermediate re		Dietetic		Nuclear Medicine		Support
Ski	lled Nursing		Administration				Services

eport Year:	2015 10677 L	oma Linda l	Jniversity Medical Cen	ter	Loma Linda		Page:34 of 66
Report the final co equirements whe er Section 13000	ether by retrofit or by re	dings on the eplacement	hospital campus show and the type of service	ving how e e that will	each building will comply be provided in each gen	with the SP eral acute c	C-5/NPC-4 or 5 are hospital building
uilding Number:	BLD-01482	Building Na	me: Northeast Wing	- Schuma	n Pavilion		
Configuration:	N/A						
Type of Service	ce Provided						·
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
lı	ntensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Dbstetrical Ante/Postprtum		Pharmaceutical		Emorgonov		Central Plant
lı	ntermediate		Dietetic	_	Emergency		Celliai Fiaili
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services

port the final configuration of all but in the final configuration of	uildings on the hospital campus shov by replacement and the type of servic	ving how each building will comply e that will be provided in each gen	with the SPC-5/NPC-4 or 5 eral acute care hospital building
Section 130061(c)(5)	, , , , , , , , , , , , , , , , , , , ,	, ,	
ilding Number: BLD-01483	Building Name: South Wing Pha	ase 2	
Configuration: N/A			
Type of Service Provided			
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal Dialysis
Pediatric/Adol escent	Clinical Lab	Recovery	
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Pharmaceutical	□ 	Central Plant
Intermediate	Dietetic	Emergency	Central Flant
Care Skilled Nursing	Administration	Nuclear Medicine	Support Services

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eport the final of equirements where Section 1300	ether by retrofit or by r	dings on the eplacement	and the type of servic	ving how e e that will	ach building will comply be provided in each gen	with the SF eral acute c	are hospital building
uilding Number	: BLD-01485	Building Na	me: South Wing Pha	ase I			
Configuration:	N/A						
Type of Servi	ce Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant
	Intermediate		Dietetic		<u> шинегу</u> епсу		Ochuai riani
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services

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Report the final con- requirements wheth per Section 130061	er by retrofit or by r	dings on the he placement a	nospital campus showin and the type of service t	g how e hat will t	ach building will comply w be provided in each gener	ith the SPC- al acute care	-5/NPC-4 or 5 e hospital building
Building Number:	BLD-01486	Building Nan	ne: Co-Generation Pla	ınt			
Configuration:	N/A						
Type of Service	Provided						
Nui	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Inte	ensiveCare		Anesthesia		Obstetrical Recovery	F	Renal Dialysis
	diatric/Adol cent		Clinical Lab		Recovery		
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Gurgery
	stetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant
Inte Car	ermediate re		Dietetic		Nuclear Medicine		Support
Ski	lled Nursing		Administration				Services

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Report the final config requirements whether per Section 130061(c)	by retrofit or by repla	s on the hospital ca cement and the typ	mpus showing how be of service that wil	each building will c be provided in eac	omply with the SPC-5/l ch general acute care h	NPC-4 or 5 ospital building
Building Number: B	LD-02961 Bui	ding Name: Chille	er Facility			
Configuration: N	/A					
Type of Service Pr	ovided					
Nursi	ng	Surgical		Obstetrical Cesarean/Deliv		habilitation erapy
Intens	siveCare	Anesthes	ia 🔲	Obstetrical Recovery	Rei	nal Dialysis
Pedia escen	tric/Adol nt	Clinical L	ab	Reservery		
Psych Nursii		Radiologi Imaging	cal/	Newborn/ WellBaby		tpatient gery
Obste Ante/l	etrical Postprtum	Pharmac	eutical	Emergency	Cer	ntral Plant
Intern Care	nediate	Dietetic		Nuclear Medicin	ne	ıpport
Skille	d Nursing	Administr	ration			rvices

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Report the final con requirements wheth per Section 130061	ner by retrofit or by r	dings on the eplacement	hospital campus showir and the type of service	ng how e that will t	ach building will comply woe provided in each gener	vith the SPC ral acute car	C-5/NPC-4 or 5 re hospital building
Building Number:	BLD-03021	Building Nar	ne: South Wing Phase	e I			
Configuration:	N/A						
Type of Service	Provided						
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Inte	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	diatric/Adol cent		Clinical Lab		Recovery		
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	stetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant
Inte	ermediate re		Dietetic		Nuclear Medicine		Support
Ski	illed Nursing		Administration				Services

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Report the final equirements who er Section 130	nether by retrofit or by	dings on the replacement	hospital campus show and the type of servic	ving how e e that will	each building will comply be provided in each gen	with the SF eral acute c	PC-5/NPC-4 or 5 are hospital building
Building Numbe	r: BLD-03022	Building Na	me: South Wing Pha	ıse I			
Configuration:	N/A						
Type of Serv	ice Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant
	Intermediate		Dietetic		Emergency		Central Flant
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services

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Report the final co equirements whe per Section 13000	ether by retrofit or by r	dings on the eplacement	hospital campus show and the type of service	ving how e e that will	ach building will comply be provided in each gen	with the SF eral acute c	PC-5/NPC-4 or 5 care hospital building
Building Number:	BLD-03023	Building Na	me: Main Hospital To	ower - Are	а А		
Configuration:	N/A						
Type of Service	ce Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
lı	ntensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant
	ntermediate		Dietetic		Emergency		Central Flain
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services

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eport the final or equirements wher Section 1300	nether by retrofit or by	ldings on the replacement	hospital campus show and the type of service	wing how e e that will	ach building will comply be provided in each gen	with the SF eral acute c	PC-5/NPC-4 or 5 are hospital building
uilding Numbe	r: BLD-03024	Building Na	me: South Wing Pha	ase 2			
Configuration:	N/A						
Type of Serv	ice Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant
	Intermediate		Dietetic		Emorgonoy		Contain fair
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services

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eport the final co equirements whet er Section 13006	ther by retrofit or by re	lings on the eplacement	hospital campus showi and the type of service	ng how e that will b	ach building will comply be provided in each gen	with the SPC eral acute ca	C-5/NPC-4 or 5 re hospital building
uilding Number:	BLD-03025	Building Na	me: Original Plant				
Configuration:	N/A						
Type of Service	e Provided						
N	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
In	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Recovery		
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	bstetrical nte/Postprtum		Pharmaceutical		.		Out to I Plant
	ıtermediate		Dietetic		Emergency		Central Plant
	are	П	Administration		Nuclear Medicine		Support Services
SI	killed Nursing						

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configuration of all buil nether by retrofit or by 061(c)(5)	dings on the replacement	hospital campus show and the type of service	ing how e that will	each building will comply be provided in each gen	with the SF eral acute c	PC-5/NPC-4 or 5 are hospital building
r: BLD-05490	Building Na	me: Emergency Gen	erator			
N/A						
ice Provided						
Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
Pediatric/Adol escent		Clinical Lab		Recovery		
Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
Obstetrical Ante/Postprtum		Pharmaceutical				Central Plant
Intermediate		Dietetic		Emergency	Ш	Central Plant
Care Skilled Nursing		Administration		Nuclear Medicine		Support Services
	configuration of all builtether by retrofit or by 061(c)(5) EBLD-05490 N/A Ice Provided Nursing IntensiveCare Pediatric/Adol escent Psychiatric Nursing Obstetrical Ante/Postprtum Intermediate	configuration of all buildings on the lether by retrofit or by replacement 061(c)(5) T: BLD-05490 Building Na N/A Ice Provided Nursing IntensiveCare Pediatric/Adol escent Psychiatric Nursing Obstetrical Ante/Postprtum Intermediate	configuration of all buildings on the hospital campus show either by retrofit or by replacement and the type of service 261(c)(5) T: BLD-05490	configuration of all buildings on the hospital campus showing how elether by retrofit or by replacement and the type of service that will 1061(c)(5) EBLD-05490 Building Name: Emergency Generator N/A Ice Provided Nursing IntensiveCare Pediatric/Adol escent Psychiatric Nursing Obstetrical Ante/Postprtum Intermediate Care Intermediate Care Dietetic	configuration of all buildings on the hospital campus showing how each building will comply either by retrofit or by replacement and the type of service that will be provided in each gen 161 (c) (5) EBLD-05490 Building Name: Emergency Generator N/A ICLIC Provided Nursing Surgical Obstetrical Cesarean/Deliv IntensiveCare Anesthesia Obstetrical Recovery Pediatric/Adol escent Clinical Lab Psychiatric Nursing Radiological/ Newborn/ WellBaby Obstetrical Ante/Postprtum Emergency Dietetic Intermediate Care Nuclear Medicine	configuration of all buildings on the hospital campus showing how each building will comply with the SF teither by retrofit or by replacement and the type of service that will be provided in each general acute of 201(c)(5) BLD-05490

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Include and S	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: BLI	D-01480	Building Na	ıme: Ma	in Hospital Tower - A	Area B					
Тур	e of Service Prov	<u>rided</u>									
	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 Nursing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency	X	Central Plant		
	Intermediate Care	Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services		
	Skilled Nursing	Inpatient Beds	0		Administration						
	Total Beds this Building		0								

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Include inforr and SPC-5 p			npatient beds by t	ype of S	Service provided by bui	lding	s that are classified as	SPC-2	, SPC-3, SPC-4,
Building Num	nber: BLD)-01481	Building Name	e: En	nergency Room Expans	sion ·	- 1976		
Type of Ser	vice Prov	ided							
Nursin	g	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Intensi	iveCare	Inpatient Beds	0		Anesthesia				
Pediat escent	ric/Adol	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery		Renal Dialysis
Psychi Nursin		Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
Obstet Ante/P	trical Postprtum	Inpatient Beds	0		Pharmaceutical	X	Emergency		Central Plant
Interm Care	ediate	Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services
Skilled	l Nursing	Inpatient Beds	0		Administration				
Total E Buildin	Beds this		0						

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Include information on and SPC-5 per Section		finpatient beds	by type of Se	ervice provided by	buildings th	at are classified a	s SPC-2,	SPC-3, SPC-4,
Building Number: BL	D-01482	Building N	ame: Nort	theast Wing - Schu	ıman Pavilio	on		
Type of Service Prov	vided							
Nursing	Inpatient Beds	0		Surgical		bstetrical esarean/Deliv		ehabilitation herapy
IntensiveCare	Inpatient Beds	0	X	Anesthesia				
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab		bstetrical ecovery	R	enal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	□ Ne W	ewborn/ /ellBaby		utpatient urgery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Er	mergency	С	entral Plant
Intermediate Care	Inpatient Beds	0		Dietetic		uclear edicine		upport ervices
Skilled Nursing	Inpatient Beds	0		Administration				
Total Beds this Building		0						

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Include information o and SPC-5 per Section		of inpatient beds	by type of \$	Service provided by	buildings that are classified a	s SPC-2, SP0	C-3, SPC-4,
Building Number: B	LD-01483	Building N	Name: Sc	outh Wing Phase 2			
Type of Service Pro	ovided						
Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv	Reha Thera	abilitation apy
X IntensiveCare	Inpatient Beds	78	X	Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0	X	Clinical Lab	X Obstetrical Recovery	Rena	al Dialysis
Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	X Newborn/ WellBaby	Outp Surg	atient ery
Obstetrical X Ante/Postprtur	Inpatient n Beds	36	X	Pharmaceutical	Emergency	Cent	ral Plant
Intermediate Care	Inpatient Beds	0	X	Dietetic	Nuclear Medicine	X Supp Servi	
Skilled Nursing	Inpatient Beds	0	X	Administration			
Total Beds this Building	5	114					

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)									
Building Number: BL	D-01485	Building N	ame: So	outh Wing Phase I					
Type of Service Provided									
Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv	Reha	abilitation rapy		
X IntensiveCare	Inpatient Beds	122	X	Anesthesia					
Pediatric/Adol escent	Inpatient Beds	0	X	Clinical Lab	X Obstetrical Recovery	Rena	al Dialysis		
Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	X Newborn/ WellBaby	X Outp Surg	patient Jery		
Obstetrical Ante/Postprtum	Inpatient Beds	0	X	Pharmaceutical	Emergency	Cen	tral Plant		
Intermediate Care	Inpatient Beds	0	X	Dietetic	Nuclear Medicine	X Supp Serv	oort ices		
Skilled Nursing	Inpatient Beds	0	X	Administration					
Total Beds this Building		122							

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)									
Building Number: Bl	_D-01486	Building Na	ime: Co	-Generation Plant					
Type of Service Pro	ovided								
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 Nursing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency	X	Central Plant	
Intermediate Care	Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services	
Skilled Nursing	Inpatient Beds	0		Administration					
Total Beds this Building		0							

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)									
Buildin	ng Number: BLD	D-02961	Building Name	: Ch	niller Facility				
<u>Type</u>	of Service Prov	ided							
	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 Nursing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency	X	Central Plant
	Intermediate Care	Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services
	Skilled Nursing	Inpatient Beds	0		Administration				
	Total Beds this Building		0						

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)									
Building Number:	BLD-03021	Building Na	me: So	uth Wing Phase I					
Type of Service	Provided								
Nursing	Inpatient Beds	0	X	Surgical		Obstetrical Cesarean/Deliv		ehabilitation nerapy	
IntensiveCa	are Inpatient Beds	0	X	Anesthesia					
Pediatric/Adescent	dol Inpatient Beds	0	X	Clinical Lab		Obstetrical Recovery	Re	enal Dialysis	
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		utpatient urgery	
Obstetrical Ante/Postpi	Inpatient rtum Beds	0		Pharmaceutical		Emergency	Ce	entral Plant	
Intermediat Care	e Inpatient Beds	0		Dietetic		Nuclear Medicine	X Su Se	upport ervices	
Skilled Nurs	sing Inpatient Beds	0		Administration					
Total Beds Building	this	0							

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)									
Building Numbe	er: BLD-03022	Building Name	e: So	outh Wing Phase I					
Type of Servi	ce Provided								
Nursing	Inpatient Beds	0	X	Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy	
Intensive	Care Inpatient Beds	0	X	Anesthesia					
Pediatric escent	/Adol Inpatient Beds	0	X	Clinical Lab		Obstetrical Recovery		Renal Dialysis	
Psychiate Nursing	ric Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
Obstetric Ante/Pos		0	X	Pharmaceutical		Emergency		Central Plant	
Intermed Care	iate Inpatient Beds	0		Dietetic		Nuclear Medicine	X	Support Services	
Skilled N	ursing Inpatient Beds	0		Administration					
Total Bed Building	ds this	0							

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)									
Building N	lumber: BLD	0-03024	Building Name	: So	outh Wing Phase 2				
Type of S	Service Prov	<u>ided</u>							
Nur	sing	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Inte	ensiveCare	Inpatient Beds	0		Anesthesia				
Ped esc	diatric/Adol ent	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery		Renal Dialysis
	rchiatric rsing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	stetrical e/Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency		Central Plant
Inte Car	ermediate re	Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services
Skil	lled Nursing	Inpatient Beds	0		Administration				
	al Beds this Iding		0						

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)									
Building N	lumber: BLD)- 05490	Building Name	: En	nergency Generator				
Type of S	Service Prov	ided							
Nur	rsing	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Inte	ensiveCare	Inpatient Beds	0		Anesthesia				
	diatric/Adol cent	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery		Renal Dialysis
	ychiatric rsing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	stetrical te/Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency	X	Central Plant
Inte	ermediate re	Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services
Skil	lled Nursing	Inpatient Beds	0		Administration				
	tal Beds this ilding		0						

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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e) BLD-01480 **Building Name:** Main Hospital Tower - Area B **Building Number:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 0 0 Days Bed Days Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Days Days Bed Bed Bed Days **Intensive Care Newborn Intermediate Care** Pediatric Nursery Inpatient Inpatient Inpatient 0 Inpatient 0 Inpatient Inpatient Bed Days Bed Davs Bed Davs Int. Care / Developmentally **Intensive Care** Rehabilitation Disabled Center Inpatient Inpatient Inpatient Inpatient Inpatient 0 Inpatient 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient 0 Inpatient 0 Davs Days Bed Bed 0 0

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