## 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:	11242				
Facility Name:	Children	's Hospital & Research Center Oakland			
Address:	747 52n	d St.			
City:	Oakland				
Hospital Owner/Lice	ensee:	Childrens Hosp Med Ctr of No California			
Year of Rep	porting:	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 Ad	ldress::	[Confidential data left blank intentionally.]			
Name of Sub	omitter:	Doug Nelson			
Submission	n Date:	12/15/2015 10:36:30 AM			

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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- 01298	B/C Wing	747 52nd St.	Replace	SPC2	01/01/2020	07/01/2019
BLD- 01299	A/B Wing	747 52nd St.	Replace	SPC2	01/01/2020	06/30/2019

Report Year: 11242 Children's Hospital & Research Center Oakland Oakland Page:3 of 41 2015 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: B/C Wing Retrofit/Replacement Yes-Submitted BLD-01298 Project: Facility Project CEQA Plan Approved Projected Projected Sub Completion Date Status Number Number Date Start Date Review Num Scope Date In 11242 IS110643-0 0 BC HAZUS 2010 PROJECTS 4/6/2011 05/28/2017 05/31/2019 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). A/B Wing **Building No:** BLD-01299 Retrofit/Replacement Hazus-Submitted Project: Facility Project Sub Plan Approved Projected Projected CEQA Completion Date Status Date Start Date Review Number Number Num Scope Date In 0 ACTI No 11242 IS110643-0 4/6/2011 05/08/2017 05/31/2019

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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	_D-01298	Building Name: B/0	C Wing	
Type of Service Prov	<u>/ided</u>			
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
X Pediatric/Adol escent	Inpatient Beds	9 Inpatient Days 2481	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	X Pharmaceutical Dietetic	X 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
	beus	Total Beds this Building	Obstetrical Cesarean/Deliv	Central Plant

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Prov	ide the number of	f inpatient bed	ds and patient days per type of service pe	er building per Section 130061	(c)(1)(F)
	ling Number: BL		Building Name: A/E	B Wing	
<u>1 y pe</u>	e of Service Prov	<u>/Idea</u>		1 —	
Ш	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  X Support	Renal Dialysis
	Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Services	Outpatient Surgery
		2000	Total Beds this Building	Obstetrical Cesarean/Deliv	Central Plant

Report Year: 2015 11242 Children's Hospital & Research Center Oakland Oakland Page:6 of 41 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) BLD-01298 **B/C** Wing **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 0 Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Pediatric** intensive Care Newborn **Intermediate Card Nursery** Inpatient 2481 Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Days Bed Days Bed **Intensive Care** Rehabilitation Int. Care / development Center **Disabled** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Days Days Days Bed Bed Bed **Total Beds this** Total Beds this **Coronary Care** Chemical **Building Per Building Per** Dependency Unit Service Inpatient Inpatient Inpatient Inpatient 9 9 Bed Days Days Bed

Report Year: 2015 11242 Children's Hospital & Research Center Oakland Oakland Page:7 of 41 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) A/B Wing **Building Number:** BLD-01299 **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 0 Inpatient 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-01293	Cardiac Cath Lab - MPOE	Remain
BLD-01294	Patient Tower	Remain
BLD-01295	West Site Plant	Remain
BLD-01296	Cafeteria Addition	Remain
BLD-01297	Diagnostic & Treatment Building	Remain
BLD-01298	B/C Wing	Replace
BLD-01299	A/B Wing	Replace
BLD-03121	Loading Dock	Remain
BLD-05214	Western Expansion Building	Remain

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No proposed ne	ew buildings	to be const	ructed at this or another site.		

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The project replaced The plans replaced	ected date or date or rebuild building ned uses of the b or rebuild building	s the building gs as well. uilding or buil gs as well.	ced, rebuilt, removed frog will be removed from so dings to be removed from d in the building or building	ervice per Sect m acute care s	ion 130061 (c)( ervice per Sect	2)(A) and provide ion 130061(c)(2)(B)		
Building I	Number: BLD-(	01298	B/C Wing			Removal Date:	07/01/2019	
Planned	Uses for the build	ling to be rem	oved from acute care se	ervice:				
Planned	use for building:							
Inpatient  X  IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	Nursing IntensiveCare Pediatric/Adol escent Psychiatric Nursing Obstetrical Ante/Postprtum Intermediate Care Skilled Nursing		the building: Surgical Anesthesia Clinical Lab Radiological/ Imaging Pharmaceutical Dietetic Administration		Obstetrical Cesarean/Deli Obstetrical Recovery Newborn/ WellBaby Emergency Nuclear Medicine	x	Rehabilitation Therapy  Renal Dialysis  Outpatient Surgery  Central Plant  Support Services	

Report Y	ear: 2015 112	Children's Hospital & Research	Center Oakland	Oakland ————————————————————————————————————	Page:11 of 41
The project replaced The placed replaced	ected date or dates the or rebuild buildings as ned uses of the buildin or rebuild buildings as	ng or buildings to be removed from acu	per Section 130061 (c)( te care service per Sect	(2)(A) and provide said date or c tion 130061(c)(2)(B) and provide	
Building I	Number: BLD-0129	A/B Wing		Removal 06/30/2019 Date:	
Planned	Uses for the building t	to be removed from acute care service:			
Planned	use for building:	edical Office Building Jurisdic	etion: OSHPD	]	
<u>Inpatient</u>	services currently del	livered in the building:		<u></u>	
	Nursing	Surgical	Obstetrical Cesarean/Deli	Rehabilitation Therapy	on
	IntensiveCare	Anesthesia	Obstetrical	□ Barrel Birky	
	Pediatric/Adol escent	Clinical Lab	Recovery	Renal Dialy	SIS
	Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery	
	Obstetrical Ante/Postprtum	Pharmaceutical		Control Plan	
	Intermediate Care	Dietetic	☐ Emergency	Central Plan	ıt
	Skilled Nursing	Administration	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 obuilding sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c)(2)	
Building Number:  BLD-01299 Building Name: A/B Wing  Number:  Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?	
Support Services N/A	
Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any obuilding sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c)(2)	
Building Number:  BLD-01298 Building Name: B/C Wing  Number:  Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?	
Pediatric Adolescent N/A	
Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any obuilding sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c)(2)	corresponding (E)
Building Number:  Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?  Pharmaceutical  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 corr building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c)(2)(E)	esponding
Building Number:  BLD-01298  Building Name:  B/C Wing  Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?	
Rehabilitation Therapy  N/A	
Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corr building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c)(2)(E)	esponding
Building Number: BLD-01298 Building Name: B/C Wing	
Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?	
Pediatric N/A	

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No data reporte	d for Section	n 130061(c)	(3).		

ding Number:	BLD-01298 Buildi	ng Name: B	/C Wing			
Гуре of Service	e Provided		Surgical	Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
	Nursing		Anesthesia	Obstetrical		Renal Dialysis
∐  X	IntensiveCare Pediatric/Adol		Clinical Lab	Recovery		Outpatient
	escent Psychiatric		Radiological/ Imaging	Newborn/ WellBaby	Ц	Surgery
	Nursing	X	Pharmaceutical	Emergency		Central Plant
	Obstetrical Ante/Postprtum		Dietetic	Nuclear Medicine		Support Services
	Intermediate Care		Administration			
	Skilled Nursing					

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Report any general per Section 130061	acute care hospital inpa	tient service that is prov	rided in any general a	acute care hospital	building th	at is rated SPC-1
Building Number:	BLD-01299 Buildin	g Name: A/B Wing				
Type of Service	Provided					
		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	Nursing	Anesthe	esia			Panal Dialysis
	IntensiveCare	Clinical	Lob	Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent			Newborn/		Outpatient Surgery
	Psychiatric Nursing	Radiolo Imaging		WellBaby		
	-	Pharma	ceutical	Emergency		Central Plant
	Obstetrical Ante/Postprtum	Dietetic		Nuclear Medicine	X	Support Services
	Intermediate Care	Adminis	stration			
	Skilled Nursing					

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Report the final configuration of all bu requirements whether by retrofit or by per Section 130061(c)(5)	ildings on the hospital campus show replacement and the type of service	ving how each building will comply verthat will be provided in each gene	vith the SPC-5/NPC-4 or 5 ral acute care hospital building
Building Number: BLD-01293	Building Name: Cardiac Cath La	b - MPOE	
Configuration: Retrofit Conformi	ng building to NPC 4 or NPC 5		
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 Care	Dietetic		
Skilled Nursing	Administration	Nuclear Medicine	Support Services

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	ther by retrofit or by				ach building will comply voe provided in each gene	
Building Number:	BLD-01294	Building Nar	ne: Patient Tower			
Configuration:	Retrofit Conformir	ng building to	NPC 4 or NPC 5			
Type of Service	e Provided					
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
Int	tensiveCare		Anesthesia		Obstetrical Recovery	Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Recovery	
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
	bstetrical nte/Postprtum		Pharmaceutical		Emergency	Central Plant
	termediate		Dietetic		Lineigency	
	are killed Nursing		Administration		Nuclear Medicine	Support Services
ш *		I				

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	ner by retrofit or by				ach building will comply woe provided in each gener								
Building Number:	BLD-01295	Building Nar	ne: West Site Plant										
Configuration:	Configuration: Retrofit Conforming building to NPC 4 or NPC 5												
Type of Service	Provided												
Nu	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						
	ermediate		Dietetic										
Ca	re illed Nursing		Administration	Ш	Nuclear Medicine		Support Services						
		•											

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	ner by retrofit or by				ach building will comply on provided in each gene								
Building Number:	Building Number: BLD-01296 Building Name: Cafeteria Addition												
Configuration:	Configuration: Retrofit Conforming building to NPC 4 or NPC 5												
Type of Service	Provided												
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		ehabilitation herapy						
Inte	ensiveCare		Anesthesia		Obstetrical Recovery	R	enal Dialysis						
	diatric/Adol cent		Clinical Lab		Receivery								
	ychiatric ırsing		Radiological/ Imaging		Newborn/ WellBaby		utpatient urgery						
	ostetrical te/Postprtum		Pharmaceutical		Emergency	Пс	entral Plant						
	ermediate		Dietetic		- ,								
Ca	ire illed Nursing		Administration		Nuclear Medicine		Support Services						
		•											

Report Year:	2015 11242	Children's Ho	spital & Research Cent	er Oakla	Oakland		Page:23 of 41						
Report the final requirements w per Section 130	hether by retrofit or by	dings on the replacement	hospital campus showir and the type of service	ng how e that will l	ach building will comply be provided in each ger	with the SPC-5/ neral acute care h	NPC-4 or 5 ospital building						
Building Number	Building Number: BLD-01297 Building Name: Diagnostic & Treatment Building												
Configuration	Configuration: Retrofit Conforming building to NPC 4 or NPC 5												
Type of Serv	vice Provided												
	Nursing		Surgical		Obstetrical Cesarean/Deliv		habilitation erapy						
	IntensiveCare		Anesthesia		Obstetrical Recovery	Re	nal Dialysis						
	Pediatric/Adol escent		Clinical Lab		receivery								
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		tpatient gery						
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	☐ Cei	ntral Plant						
	Intermediate		Dietetic										
	Care Skilled Nursing		Administration		Nuclear Medicine		pport rvices						
		1											

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	ther by retrofit or by				ach building will comply wi be provided in each genera								
Building Number:	Building Number: BLD-01298 Building Name: B/C Wing												
Configuration:	Configuration: Replace with existing SPC3, SPC4 or SPC5 and NPC4 or NPC5 building.												
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				Control Diont						
	termediate		Dietetic		Emergency		Central Plant						
	are killed Nursing		Administration		Nuclear Medicine		Support Services						
	ŭ	I											

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Report the final configuration requirements whether by reper Section 130061(c)(5)													
Building Number: BLD-0	Building Number: BLD-01299 Building Name: A/B Wing												
Configuration: Replace	Configuration: Replace with existing SPC3, SPC4 or SPC5 and NPC4 or NPC5 building.												
Type of Service Provid	ed												
Nursing		Surgical		Obstetrical Cesarean/Deliv		ehabilitation nerapy							
IntensiveC	Care	Anesthesia		Obstetrical Recovery	R	enal Dialysis							
Pediatric/A escent	Adol	Clinical Lab		recovery									
Psychiatric Nursing	.   🗆	Radiological/ Imaging		Newborn/ WellBaby		utpatient urgery							
Obstetrica Ante/Postp		Pharmaceutical		Emergency		entral Plant							
Intermedia	nte	Dietetic		Emergency		antan lant							
Care Skilled Nu	rsing	Administration		Nuclear Medicine		upport ervices							
	I												

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Report the fir requirements per Section 1	nal configuration of all bui whether by retrofit or by 30061(c)(5)	dings on the hospita replacement and the	al campus showing e type of service tha	how ea	ach building will comply e provided in each gen	with the SPC- neral acute care	5/NPC-4 or 5 hospital building
Building Num	ber: BLD-03121	Building Name: L	oading Dock				
Configuration	n: Retrofit Conformir	ng building to NPC 4	or NPC 5				
Type of Se	ervice Provided						
	Nursing	Surgio	cal		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare	Anest	hesia		Obstetrical Recovery	F	Renal Dialysis
	Pediatric/Adol escent	Clinic	al Lab		Recovery		
	Psychiatric Nursing	Radic Imagi	ological/ ng		Newborn/ WellBaby		Outpatient Gurgery
	Obstetrical Ante/Postprtum	Pharr	maceutical		Emergency		Central Plant
	Intermediate	Dieter	tic		Emergency		ontai i lain
	Care Skilled Nursing	Admir	nistration		Nuclear Medicine		Support Services
	· ·	I					

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	ner by retrofit or by				ach building will comply voe provided in each gene								
Building Number:	Building Number: BLD-05214 Building Name: Western Expansion Building												
Configuration:	onfiguration: Retrofit Conforming building to NPC 4 or NPC 5												
Type of Service	Provided												
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		ehabilitation nerapy						
Inte	ensiveCare		Anesthesia		Obstetrical Recovery	R	enal Dialysis						
	diatric/Adol cent		Clinical Lab		recovery								
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		utpatient urgery						
	estetrical te/Postprtum		Pharmaceutical		Emergency		entral Plant						
	ermediate		Dietetic		g,								
Ca	re illed Nursing		Administration	Ш	Nuclear Medicine		Support Services						
		•											

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Include info and SPC-5	ormation on per Section	the number of in 130061(e)	npatient beds l	by type of S	Service provided by buil	dings that are classified as	SPC-2, SPC	C-3, SPC-4,
Building Nu	ımber: BLI	D-01293	Building N	ame: Ca	rdiac Cath Lab - MPOE			
Type of S	ervice Prov	<u>rided</u>						
Nurs	ing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha	bilitation apy
Inten	siveCare	Inpatient Beds	0	X	Anesthesia			
Pedia esce	atric/Adol nt	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	l Dialysis
Psyc Nurs	hiatric ing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge	atient ery
	etrical /Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Centi	al Plant
Interi Care	mediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Servi	
Skille	ed Nursing	Inpatient Beds	0		Administration			
Total Build	l Beds this ling		0					

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	ation on the number o r Section 130061(e)	f inpatient beds	by type of	Service provided by	buildings that are classified	as SPC-2, SPC	C-3, SPC-4,
Building Numb	Der: BLD-01294	Building N	ame: Pa	atient Tower			
Type of Serv	vice Provided						
Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv	X Reha Thera	bilitation apy
X Intensiv	reCare Inpatient Beds	24	X	Anesthesia			
X Pediatri	c/Adol Inpatient Beds	94		Clinical Lab	Obstetrical Recovery	Rena	l Dialysis
Psychia Nursing		0	X	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge	atient ery
Obstetri Ante/Po	ical Inpatient estprtum Beds	0	X	Pharmaceutical	X Emergency	Centr	ral Plant
Interme Care	diate Inpatient Beds	0		Dietetic	X Nuclear Medicine	X Supp Servi	ort ces
Skilled I	Nursing Inpatient Beds	0		Administration			
Total Be Building		118					

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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-01295	Building Na	me: We	est Site Plant				
Type of Service Pr	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/Postprtu	Inpatient m Beds	0		Pharmaceutical		Emergency	X	Central Plant
Intermediate Care	Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services
Skilled Nursin	g Inpatient Beds	0		Administration				
Total Beds thi Building	s	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)							
Buildi	ng Number: BLE	D-01296	Building Nam	ne: Ca	afeteria Addition		
Туре	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	Central Plant
	Intermediate Care	Inpatient Beds	0	X	Dietetic	Nuclear Medicine	Support Services
	Skilled Nursing	Inpatient Beds	0		Administration		
	Total Beds this Building		0				

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Include information on and SPC-5 per Section	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-01297 Building Name: Diagnostic & Treatment Building							
Type of Service Provided							
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	X Rehabilitation Therapy		
X IntensiveCare	Inpatient Beds	43	Anesthesia				
Pediatric/Adol escent	Inpatient Beds	0	X 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	Central Plant		
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services		
Skilled Nursing	Inpatient Beds	0	X Administration				
Total Beds this Building		43					

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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 Nu	ımber: BLE	D-03121	Building Name	e: Lo	ading Dock			
Type of S	Service Prov	ided						
Nurs	sing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Inter	nsiveCare	Inpatient Beds	0		Anesthesia			
Pedi esce	iatric/Adol ent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery		Renal Dialysis
Psyc Nurs	chiatric sing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		Outpatient Surgery
	tetrical e/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency		Central Plant
Inter Care	rmediate e	Inpatient Beds	0		Dietetic	Nuclear Medicine	X	Support Services
Skille	ed Nursing	Inpatient Beds	0		Administration			
Tota Build	I Beds this ding		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-05214 Building Name: Western Expansion Building							
Type of Service Provided							
Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
IntensiveCare	Inpatient Beds	0	X	Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis	
Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery	
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	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 to SPC-5 per Section 130061(e)	peds by type of unit provided by buildings that a	re classified as SPC-2, SPC-3, SPC-4, and
Building Number: BLD-01293 Building Number:	ding Name: Cardiac Cath Lab - MPOE	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per
Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	Unit Service 0

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