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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:	12235		
Facility Name:	PIH Hos	spital - Downey	
Address:	11500 E	Brookshire Ave.	
City:	Downey	/	
Hospital Owner/Lice	ensee:	Downey Regional Medical Center Hospital, Inc	
Year of Repo	orting:	2015	
Contact 1 e-mail Ad	dress:	[Confidential data left blank intentionally.]	
Contact 2 e-mail Ad	dress:	[Confidential data left blank intentionally.]	
Contact 3 e-mail Add	dress::	[Confidential data left blank intentionally.]	
Name of Subr	mitter:	Downey Regional Medical Center	
Submission	Date:	12/24/2015 7:49:27 AM	

Year: 2015 12235	PIH Hospital - Downey			Downey		Page:2 of 52			
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)									
Building Name	Alternate Building Address	Building Resolution			Extension Date	Anticipated Completion Date			
Original Nursing Tower	11500 Brookshire Ave.	Retrofit	SPC	2	01/01/2020	12/31/2019			
Conference Room Addition	11500 Brookshire Ave.	Remove	N/A		01/01/2013	12/31/2019			
	Lings For buildings which a retrofit or replace the buildi 5,for rebuild, retrofit or repl owner has been approved Building Name Original Nursing Tower Conference Room	Lings For buildings which are planned for rebuild, retrofit or repretrofit or replace the building to SPC2, SPC3, SPC4 or SPC5 5, for rebuild, retrofit or replacement of the building that the hoowner has been approved per Section 130061(c)(1)(B) Building Name Alternate Building Address Original Nursing Tower 11500 Brookshire Ave. Conference Room 11500 Brookshire Ave.	Lings For buildings which are planned for rebuild, retrofit or replacement this restrofit or replace the building to SPC2, SPC3, SPC4 or SPC5 per 130061(c)(1) 5, for rebuild, retrofit or replacement of the building that the hospital owner interowner has been approved per Section 130061(c)(1)(B) Building Name Alternate Building Address Building Name 11500 Brookshire Ave. Retrofit Remove	Lings For buildings which are planned for rebuild, retrofit or replacement this report sloretrofit or replace the building to SPC2, SPC3, SPC4 or SPC5 per 130061(c)(1)(A). 5, for rebuild, retrofit or replacement of the building that the hospital owner intends to owner has been approved per Section 130061(c)(1)(B) Building Name Alternate Building Address Building Name 11500 Brookshire Ave. Retrofit SPC Conference Room 11500 Brookshire Ave.	Lings For buildings which are planned for rebuild, retrofit or replacement this report shall identify; Will retrofit or replace the building to SPC2, SPC3, SPC4 or SPC5 per 130061(c)(1)(A). The deadline, a 5, for rebuild, retrofit or replacement of the building that the hospital owner intends to meet, and the a owner has been approved per Section 130061(c)(1)(B) Building Name Alternate Building Address Building Resolution Final SPC Rating If Required Original Nursing Tower 11500 Brookshire Ave. Retrofit SPC2 Conference Room 11500 Brookshire Ave. Remove N/A	Lings For buildings which are planned for rebuild, retrofit or replacement this report shall identify; Whether the hospitation replace the building to SPC2, SPC3, SPC4 or SPC5 per 130061(c)(1)(A). The deadline, as described in S5, for rebuild, retrofit or replacement of the building that the hospital owner intends to meet, and the applicable extent owner has been approved per Section 130061(c)(1)(B) Building Name Alternate Building Address Building Resolution Final SPC Rating If Required Extension Date Original Nursing Tower 11500 Brookshire Ave. Retrofit SPC2 01/01/2020 Conference Room 11500 Brookshire Ave. Remove N/A 01/01/2013	Lings For buildings which are planned for rebuild, retrofit or replacement this report shall identify; Whether the hospital owner intends to replace the building to SPC2, SPC3, SPC4 or SPC5 per 130061(c)(1)(A). The deadline, as described in Section 130060 or 5, for rebuild, retrofit or replacement of the building that the hospital owner intends to meet, and the applicable extension for which the owner has been approved per Section 130061(c)(1)(B) Building Name Alternate Building Address Building Resolution Final SPC Rating If Required Extension Date Anticipated Completion Date Original Nursing Tower 11500 Brookshire Ave. Retrofit SPC2 01/01/2020 12/31/2019 Conference Room 11500 Brookshire Ave. Remove N/A 01/01/2013 12/31/2019		

Report Year: 2015	12235 PIH Hospital - Downey		Down	еу		Page:3 of	52		
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-02203	Original Nursing Tower		Retrofit/Re Project:	eplacement	Yes-Subr	nitted			
Facility Project Sub Number Number Num		F Date In	lan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review		
12235 IL082802-0	0 HAZUS 2010 VSI - BLDG 1/EXIST'G 1967 NURS'G TWR (FRMRLY SB1661)	12/18/200 8		12/01/2014	12/01/2017	PEND	No		
OSHPD FDD SB499 Report	Data Last Update: 12/24/2015	Submissi	on Date: 12/2	24/2015	Printed: 12/26/20)15 6:25 AN	I		

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Provide the number	er of inpatient be	eds and patient days per type of servic	e per building per Section 130061	(c)(1)(F)
Building Number:	BLD-02203	Building Name:	Original Nursing Tower	
Type of Service F	Provided			
X Nursing	Inpatient Beds	111 Inpatient 22167 Days	X Surgical	Obstetrical Recovery
X IntensiveCar	e Inpatient Beds	8 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
Pediatric/Add escent	ol Inpatient Beds	7 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postprt	Inpatient um Beds	0 Inpatient Days 0	Pharmaceutical X Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	X Administration	Renal Dialysis
Skilled Nursi	ng Inpatient Beds	0 Inpatient Days 0	Support Services	Outpatient Surgery
	2000	Total Beds this 126 Building	Obstetrical Cesarean/Deliv	Central Plant
OSHPD FDD SB499 R	eport	Data Last Update: 12/24/2015	Submission Date: 12/24/2015	Printed: 12/26/2015 6:25 AM

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Provide the number of inp	patient beds and	patient days per typ	e of service per	building per Section 130061	(c)(1)(F)	
Building Number: BLD-0		Building Nan	ne: Con	ference Room Addition		
	npatient	0 Inpatient Days	0	Surgical	Obstetrical Recovery	
	npatient deds	0 Inpatient Days	0	Anesthesia	Newborn/ WellBaby	
	npatient des	0 Inpatient Days	0	Clinical Lab	Emergency	,
	ipatient	0 Inpatient Days	0	Radiological/ Imaging	Nuclear Medicine	
	npatient	0 Inpatient Days	0	Pharmaceutical Dietetic	Rehabilitati Therapy	on
	eds	0 Inpatient Days	0	Administration	Renal Dialy	vsis
	npatient	0 Inpatient Days	0	Services	Outpatient Surgery	
	Tota	al Beds this	0	Obstetrical Cesarean/Deliv	Central Pla	nt
OSHPD FDD SB499 Report	Data La	ast Update: 12/24/2	015 Sul	omission Date: 12/24/2015	Printed: 12/26/2	2015 6:25 AM

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Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)									
Building Number:	BLD-02203 Build	ding Name: Orig	inal Nursing Tower						
Medical / Surgical	(Include GYN)	Acute Respiratory	Care	Acute Psychiatric					
Inpatient 111 Bed	Inpatient 2216 Days 7	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days				
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing					
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days				
Pediatric		intensive Care Net Nursery	wborn	Intermediate Card					
Inpatient 8 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days				
Intensive Care		Rehabilitation Center		Int. Care / developr Disabled	nent				
Inpatient 7 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days				
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service				
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	126	126				
OSHPD FDD SB499 I	Report Data Last U	pdate: 12/24/2015	Submission Dat	e: 12/24/2015 Printe	ed: 12/26/2015 6:25 AM				

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Provide the number	Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)								
Building Number: BLD-02205 Building Name: Conference Room Addition									
Medical / Surgical (Include GYN) Acute Respiratory Care Acute Psychiatric									
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days				
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing					
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days				
Pediatric		intensive Care Nev Nursery	wborn	Intermediate Card					
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days				
Intensive Care		Rehabilitation Center		Int. Care / developn Disabled	nent				
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days				
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service				
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0				

Building		Building to be	
Number	Building Name	Removed / Replaced / Rebuilt	
BLD-02203	Original Nursing Tower	Retrofit	
BLD-02204	Original Surgery and Lab Building	Remain	
BLD-02205	Conference Room Addition	Remove	
BLD-02208	ER/Surgery Addition	Remain	
BLD-02209	ICU/CCU	Remain	
BLD-02211	Cath Lab	Remain	
BLD-02212	36 Bed Addition	Remain	
BLD-02213	Building A, Mech. Equipment Bldg.	Remain	
BLD-02214	Building B	Remain	
BLD-02215	Building C	Remain	
BLD-02216	Radiology Addition	Remain	
BLD-02217	ER Addition	Remain	

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List ALL proposed new buildings to be constructed at this or another site.								
Building Number	Building Nam	ne		New Site				
N_1	New Hospita	l Tower						
OSHPD FDD SB499 Rep	port	Data Last Update:	12/24/2015	Submission Date	e: 12/24/2015	Printed: 12/26/2	2015 6:25 AM	

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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-02205 Conference Room Addition Removal Date: 12/31/2019									
Planned Uses for the building	to be removed from acute care service:								
Planned use for building:	emolished Jurisdic	xtion:							
Inpatient services currently de		Obstetrical	Rehabilitation	ı					
Nursing	Surgical	Cesarean/Deliv	Therapy						
IntensiveCare Pediatric/Adol escent	Anesthesia	Obstetrical Recovery	Renal Dialysi	S					
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery						
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Plant	t					
L Intermediate Care	Dietetic		Summert						
Skilled Nursing	Administration	Nuclear Medicine	X Support Services						
OSHPD FDD SB499 Report	Data Last Update: 12/24/2015	Submission Date: 12/24/20 ⁷	15 Printed: 12/26/	2015 6:25 AM					

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Provide the number of inpatient and patient days per unit for the three years prior to the reporting year for buildings to be removed from acute care services per Section 130061(c)(2)(D).						
Building Nbr: BLD-02205 Building Name:	Conference Room Addition	Year of Information: 2012	2			
<u>Unit Type</u>		Information Current As Of:				
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric				
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0			
Perinatal (exclude Neborn/GYN)	Burn	Skilled Nursing				
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0			
Pediatric	Intensive Care Newborn Nursery	Intermediate Care				
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0			
Intensive Care	Rehabilitation Center	Int. Care/Developmentally Dis	abled			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0			
Coronary Care	Chemical Dependency	. Total Beds this				
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days		0			
	Doub Dayo	Total Beds this Building per Service	0			
OSHPD FDD SB499 Report Data Last	Update: 12/24/2015 Submission Date	e: 12/24/2015 Printed: 12/26/	2015 6:25 AM			

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Provide the number of inpatient and patient days per unit for the three years prior to the reporting year for buildings to be removed from acute care services per Section 130061(c)(2)(D).						
Building Nbr: BLD-02205 Building Name:	Conference Room Addition	Year of Information: 2013	3			
Unit Type		Information Current As Of:				
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric				
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0			
Perinatal (exclude Neborn/GYN)	Burn	Skilled Nursing				
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0			
Pediatric	Intensive Care Newborn Nursery	Intermediate Care				
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0			
Intensive Care	Rehabilitation Center	Int. Care/Developmentally Dis	abled			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0			
Coronary Care	Chemical Dependency	Total Beds this	0			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Building per Unit				
	·	Total Beds this Building per Service	0			
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Provide the number of inpatient and patient days per unit for the three years prior to the reporting year for buildings to be removed from acute care services per Section 130061(c)(2)(D).						
Building Nbr: BLD-02205 Building Name:	Conference Room Addition	Year of Information: 2014	1			
Unit Type		Information Current As Of:				
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric				
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0			
Perinatal (exclude Neborn/GYN)	Burn	Skilled Nursing				
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0			
Pediatric	Intensive Care Newborn Nursery	Intermediate Care				
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0			
Intensive Care	Rehabilitation Center	Int. Care/Developmentally Dis	abled			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0			
Coronary Care Inpatient 0 Patient 0	Chemical Dependency Inpatient 0 Patient 0	Total Beds this Building per Unit	0			
Beds Days	Beds Days	Total Beds this				
		Building per Service	0			
OSHPD FDD SB499 Report Data Las	t Update: 12/24/2015 Submission Date:	: 12/24/2015 Printed: 12/26/	2015 6:25 AM			

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Provide the number of inpatient and patient days per type of service for the three years prior to the reporting year for buildings to be removed from acute care services per Section 130061(c)(2)(D).						
Building Nbr: BLD-0	02205 Building Name:	Conference Room Addition	on	Year of Information	2012	
<u>Type of Services</u> Provided	Humo.			Information Current As Of:	10/26/2015	
Nursing	Inpatient 0 Beds	Patient 0 Days	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
IntensiveCare	Inpatient 0 Beds	Patient 0 Days	Anesthesia	Obstetrical	Renal Dialysis	
Pediatric/Adol escent	Inpatient 0 Beds	Patient 0 Days	Clinical Lab	Recovery		
Psychiatric Nursing	Inpatient 0 Beds	Patient 0 Days	Radiological	/ Newborn/ WellBaby	Outpatient Surgery	
Obstetrical Ante/Postprtum	Inpatient 0 Beds	Patient 0 Days	Pharmaceuti	cal Emergency	Central Plant	
Intermediate Care	Inpatient 0 Beds	Patient 0 Days	Dietetic	Nuclear Medicine	X Support Services	
Skilled Nursing	Inpatient 0 Beds	Patient 0 Days	Administratio	on		
Total Beds this B	Building per service	0				
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Provide the number of inpatient and patient days per type of service for the three years prior to the reporting year for buildings to be removed from acute care services per Section 130061(c)(2)(D).							
Building Nbr: BLD-02205 Building Name:	Conference Room Addition	Year of Information:	2013				
<u>Type of Services</u> Provided		Information Current As Of:	10/26/2015				
Nursing Inpatient 0 Beds	Patient 0	Surgical Obstetrical Cesarean/Deliv	Rehabilitation Therapy				
IntensiveCare Inpatient 0 Beds	Patient 0	Anesthesia	Renal Dialysis				
Pediatric/Adol Inpatient 0 escent Beds	Patient 0 0 Days	Clinical Lab Recovery					
Psychiatric Inpatient 0 Nursing Beds		Radiological/ Newborn/ maging WellBaby	Outpatient Surgery				
Obstetrical Inpatient 0 Ante/Postprtum Beds	Patient 0 Days	Pharmaceutical Emergency	Central Plant				
Intermediate Inpatient 0 Care Beds	Patient 0 Days	Dietetic Nuclear Medicine	X Support Services				
Skilled Nursing Inpatient 0 Beds	Patient 0 Days	Administration					
Total Beds this Building per service	0						
OSHPD FDD SB499 Report Data Las	t Update: 12/24/2015 Sub	mission Date: 12/24/2015 Printed:	12/26/2015 6:25 AM				

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Provide the number of inpatient and patient days per type of service for the three years prior to the reporting year for buildings to be removed from acute care services per Section 130061(c)(2)(D).							
Building Nbr: BLD-02205 Building Name:	Year of Information: 2014	4					
Type of Services Information Current As 10/26/2015 Provided Of:							
Nursing Inpatient 0 Beds	Patient 0 Surgical Days		ehabilitation herapy				
X IntensiveCare Inpatient 8 Beds	Patient 0 Anesthesi Days		enal Dialysis				
X Pediatric/Adol Inpatient 7 escent Beds	Patient 0 Clinical La Days						
Psychiatric Inpatient 0 Nursing Beds	Patient 0 Radiologic Days Imaging		Outpatient urgery				
Obstetrical Inpatient 0 Ante/Postprtum Beds	Patient 0 Days Pharmace	eutical Emergency C	entral Plant				
Intermediate Inpatient 0 Care Beds	Patient 0 Days Dietetic		upport ervices				
Skilled Nursing Inpatient 0 Beds	Patient 0 Days Administra	ation					
Total Beds this Building per service	15						
OSHPD FDD SB499 Report Data Las	t Update: 12/24/2015 Submission D	ate: 12/24/2015 Printed: 12/26/	20045 0.05 AM				

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No data reported corresponding b	d for wheth uilding site	er the gene s or project	ral acute care services and beds numbers for buildings with a Bui	will be relocated to a Iding Resolution of "R	new, existing or retrofitted building ebuild" or "Replace" per Section 13	and any 30061(c)(2)(E).

Each hospital owner shall also report for each facility for which any buildings will be removed from active care service, any net change in the number of inpatient beds by type of unit and service per Section 130061(c)(3)						
Building Number: BLD-02205 Building Name: Conference Room Addition						
Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?						
Support Services Removed from hospital services						

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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-02203 Building	Name: Original Nursing Tower					
Type of Service	e Provided						
		X Surgical	Obstetrical Cesarean/Deliv	Rehabil Therap			
X	Nursing	Anesthesia		Renal [
X	IntensiveCare	Clinical Lab	Obstetrical Recovery		ກີ່ແກ້ລາວ		
	Pediatric/Adol escent	Radiological/	Newborn/ WellBaby	Outpati Surgery	ent /		
	Psychiatric Nursing	Imaging Pharmaceutical	Emergency	Central	Plant		
	Obstetrical Ante/Postprtum	X Dietetic	Nuclear Medicine	Suppor Service	t		
	Intermediate Care	X Administration					
	Skilled Nursing						
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Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per Section 130061(c)(4)						
Building Number:	BLD-02205 Buildin	g Name: Conference Room Add	ition			
Type of Service	e Provided					
		Surgical	Obstetrical Cesarean/Deliv	Rehabi Therap		
	Nursing	Anesthesia	_		Diekusia	
	IntensiveCare		Obstetrical Recovery	Renal [Jaiysis	
	Pediatric/Adol escent	Clinical Lab	Newborn/	Outpati Surgery		
	Psychiatric	Radiological/ Imaging	WellBaby			
	Nursing	Pharmaceutical	Emergency	Central	Plant	
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	X Suppor Service	t S	
	Intermediate Care	Administration				
	Skilled Nursing					
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)								
Building Number: BLD-02203	Building Number: BLD-02203 Building Name: Original Nursing Tower							
Configuration: Retrofit Non-Conforming building to SPC 5 and NPC 4 or NPC 5								
Type of Service Provided								
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehat Thera	bilitation py				
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal	Dialysis				
Pediatric/Adol escent	Clinical Lab	Recovery						
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge					
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Centra	al Plant				
Intermediate Care	Dietetic							
Skilled Nursing	Administration	Nuclear Medicine	Supp Servio					
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)							
Building Number: BLD-02204 Building Name: Original Surgery and Lab Building							
Configuration: Retrofit Non-Conforming building to SPC 5 and NPC 4 or NPC 5							
Type of Service Provid	led						
Nursing		Surgical		etrical arean/Deliv		habilitation erapy	
	Care	Anesthesia	Obst Reco	etrical	Re	nal Dialysis	
Pediatric/A escent	Adol	Clinical Lab		weiy			
Psychiatric Nursing	c 🗌	Radiological/ Imaging	Newl Well			tpatient rgery	
Obstetrica Ante/Post		Pharmaceutical	Eme	rgency	Ce	ntral Plant	
Intermedia Care	ate	Dietetic		ear Medicine	□ sı	ipport	
Skilled Nu	Irsing	Administration				prvices	
OSHPD FDD SB499 Report	Data Last Upda	e: 12/24/2015	Submission Dat	e: 12/24/2015 I	Printed: 12/2	26/2015 6:25 AM	

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)									
Building Number: BLD-02205	Building Name: Conference Roor	m Addition							
Configuration: Remove from	GAC service by 1/1/2020								
Type of Service Provided									
Nursing	Surgical	Obstetrical Cesarean/Deliv	Reha Thera	bilitation apy					
IntensiveCare	Anesthesia	Obstetrical Recovery	Rena	l Dialysis					
Pediatric/Adol escent	Clinical Lab								
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge						
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Centr	al Plant					
Intermediate Care	Dietetic								
Skilled Nursing	Administration	Nuclear Medicine	Supp Serv						
OSHPD FDD SB499 Report	Data Last Update: 12/24/2015	Submission Date: 12/24/2015	Printed: 12/26/	2015 6·25 AM					
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)									
Building Number: BLD-02208	Building Name: ER/Surgery Add	dition							
Configuration: Retrofit Non-Conforming building to SPC 5 and 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	Nuclear Medicine	Support						
Skilled Nursing	Administration		Services						
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)									
Building Number:	BLD-02209	Building Na	me: ICU/CCU						
Configuration:	Retrofit Non-Co	nforming buildi	ng to SPC 5 and NPC	4 or NPC	5				
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		
Ski	illed Nursing		Administration				Services		
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)									
Building Number:	BLD-02211	Building Na	me: Cath Lab						
Configuration:	Retrofit Non-Cor	nforming buildi	ng to SPC 5 and NPC	4 or NPC	5				
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 re		Dietetic		Nuclear Medicine		Support		
Ski	illed Nursing		Administration				Services		
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)									
Building Number: BLD-02212	Building Name: 36 Bed Addition								
Configuration: Retrofit Non-C	Conforming building to SPC 5 and NPC	4 or NPC 5							
Type of Service Provided									
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabilitat Therapy	ion					
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal Dial	/sis					
Pediatric/Adol escent	Clinical Lab	Recovery							
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery						
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Pla	nt					
	Dietetic								
Care Care Skilled Nursing	Administration	Nuclear Medicine	Support Services						
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)									
Building Number: BLD-02213 Building Name: Building A, Mech. Equipment Bldg.									
Configuration: Retrofit No	n-Conforming building to SPC 5 and 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	Newb WellE		Outpatient Surgery					
Obstetrical Ante/Postprtun	Pharmaceutical	Emer	gency	Central Plant					
Intermediate Care	Dietetic		ear Medicine	Support					
Skilled Nursing	Administration			Services					
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)									
Building Number: BLD-02214	Building Name: Building B								
Configuration: Retrofit Non-C	Conforming building to SPC 5 and 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						
	Dietetic								
Care Care Skilled Nursing	Administration	Nuclear Medicine	Support Services						
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)									
Building Number:	BLD-02215	Building Na	me: Building C						
Configuration:	Retrofit Non-Cor	nforming buildi	ng to SPC 5 and NPC	4 or NPC	5				
Type of Service	Provided								
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis		
	diatric/Adol cent		Clinical Lab						
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	stetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant		
Inte Ca	ermediate re		Dietetic		Nuclear Medicine		Support		
Ski	illed Nursing		Administration				Services		
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)									
Building Number: BLD-02216	Building Name: Radiology Addi	tion							
Configuration: Retrofit Non	Conforming building to SPC 5 and NPC	C 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	Nooroly							
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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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-02217	Building Na	me: ER Addition						
Configuration:	Retrofit Non-Cor	nforming buildi	ng to SPC 5 and NPC 4	4 or NPC	5				
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		
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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	9-02204	Building Na	me: Or	iginal Surgery and La	ab Build	ling]
Type of	f Service Prov	ided							
Nu	ursing	Inpatient Beds	0	X	Surgical		Obstetrical Cesarean/Deliv		nabilitation erapy
X Int	tensiveCare	Inpatient Beds	0	X	Anesthesia		_		
	ediatric/Adol scent	Inpatient Beds	0	X	Clinical Lab		Obstetrical Recovery	Rer	nal Dialysis
	sychiatric ursing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		patient gery
	bstetrical nte/Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency	Cer	ntral Plant
	termediate are	Inpatient Beds	0		Dietetic		Nuclear Medicine		oport vices
Sk	killed Nursing	Inpatient Beds	0		Administration				
	otal Beds this uilding		0						
	DD SB499 Repor		Data Last Update:	12/24/20	015 Submissi		: 12/24/2015		6/2015 6:25 AM

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)									
Building Number:	BLD-02208	Building N	ame: Ef	R/Surgery Addition					
Type of Service P	rovided								
Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv	Reha Ther	abilitation apy		
IntensiveCar	e Inpatient Beds	0	X	Anesthesia					
Pediatric/Adc	ol Inpatient Beds	0	X	Clinical Lab	Obstetrical Recovery	Rena	al Dialysis		
Psychiatric	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	X Outp Surg	patient jery		
Obstetrical Ante/Postprtu	Inpatient um Beds	0		Pharmaceutical	Emergency	Cent	tral Plant		
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Supp Serv	port vices		
Skilled Nursi	ng Inpatient Beds	0		Administration					
Total Beds th Building	nis	0							
OSHPD FDD SB499 R	eport	Data Last Update:	12/24/2	015 Submissi	on Date: 12/24/2015	Printed: 12/26	/2015 6:25 AM		

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)													
Building Number: BLD-02209 Building Name: ICU/CCU													
Type of Service Provided													
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha Thera	bilitation apy					
X	IntensiveCare	Inpatient Beds	18		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						
	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		Administration								
	Total Beds this Building		18										
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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-02211 Building Name: Cath Lab													
Type of Service Provided													
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha Thera	bilitation apy						
Intensive	eCare Inpatient Beds	0		Anesthesia									
Pediatric escent	:/Adol Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	l Dialysis						
Psychiat	ric Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge	atient ery						
Obstetric Ante/Pos		0		Pharmaceutical	Emergency	Centr	al Plant						
Intermed	liate Inpatient Beds	0		Dietetic	Nuclear Medicine	X Supp Servi							
Skilled N	lursing Inpatient Beds	0		Administration									
Total Be 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)								
Buildir	Building Number: BLD-02212 Building Name: 36 Bed Addition								
Туре	Type of Service Provided								
X	Nursing	Inpatient Beds	36	X	Surgical	X	Obstetrical Cesarean/Deliv		ehabilitation nerapy
X	IntensiveCare	Inpatient Beds	7	X	Anesthesia				
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	X	Obstetrical Recovery	R	enal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	X	Newborn/ WellBaby		utpatient urgery
	Obstetrical Ante/Postprtum	Inpatient Beds	20	X	Pharmaceutical		Emergency	Ce	entral Plant
	Intermediate Care	Inpatient Beds	0		Dietetic		Nuclear Medicine	X Su Se	upport ervices
	Skilled Nursing	Inpatient Beds	0		Administration				
	Total Beds this Building		63						
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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-02213 Building Name: Building A, Mech. Equipment Bldg.								
Type of Service Provided								
Nursing Inpatie Beds	nt O	Surgical		stetrical Reh sarean/Deliv The	abilitation rapy			
IntensiveCare Inpatie Beds	nt 0	Anesthe	sia					
Pediatric/Adol Inpatie	nt 0	Clinical L		stetrical Ren. covery	al Dialysis			
Psychiatric Inpatie	nt 0	Radiolog Imaging		wborn/ Outp IlBaby Surg	patient gery			
Obstetrical Inpatie	nt 0	Pharmac		ergency X Cen	tral Plant			
Intermediate Inpatie Care Beds	nt 0	Dietetic		clear X Sup dicine Serv	port ⁄ices			
Skilled Nursing Inpatie Beds	nt 0	Administ	ration					
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-02214 Building Name: Building B								
Type of Service Provided								
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha	abilitation apy	
	Care Inpatient Beds	0		Anesthesia				
Pediatric//	Adol Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	al Dialysis	
Psychiatri	c Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outp Surge	atient ery	
Obstetrica		0		Pharmaceutical	Emergency	X Cent	ral Plant	
Intermedia	ate Inpatient Beds	0		Dietetic	Nuclear Medicine	X Supp Servi		
Skilled Nu	ursing Inpatient Beds	0		Administration				
Total Bed Building	s 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 Number: BLD-02215 Building Name: Building C								
Type of Service Provided								
Nursing	g Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha	abilitation apy	
	veCare Inpatient Beds	0		Anesthesia				
Pediatr escent	ic/Adol Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	al Dialysis	
Psychia Nursing		0		Radiological/ Imaging	Newborn/ WellBaby	Outp Surge	atient ery	
Obstetr Ante/Po	ical Inpatient ostprtum Beds	0		Pharmaceutical	Emergency	X Cent	ral Plant	
Interme	ediate Inpatient Beds	0		Dietetic	Nuclear Medicine	X Supp Servi		
Skilled	Nursing Inpatient Beds	0		Administration				
Total B Building	eds 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 Number: BLD-02216 Building Name: Radiology Addition Type of Service Provided Image: Service Provided Image: Surgical inpatient is surgical inpatient is surgical intensiveCare is surgical inpatient is surgery in the surgery is surger
Type of Service Provided Nursing Inpatient 0 Surgical Obstetrical Cesarean/Deliv Rehabilitation Therapy IntensiveCare Inpatient 0 Anesthesia Renal Dialysis Pediatric/Adol Inpatient 0 Clinical Lab Obstetrical Recovery Renal Dialysis Pediatric/Adol Inpatient 0 Surgical/ Imaging Newborn/ WellBaby Outpatient Surgery Obstetrical Recovery Inpatient 0 Pharmaceutical Emergency Central Plant Obstetrical Rate/Postprtum Inpatient 0 Pharmaceutical Emergency Central Plant Intermediate Inpatient 0 Dietetic X Nuclear Medicine X Support Services
Nursing Inpatient Beds 0 Surgical Obstetrical Cesarean/Deliv Rehabilitation Therapy IntensiveCare Inpatient Beds 0 Anesthesia Renal Dialysis Pediatric/Adol escent Inpatient Beds 0 Clinical Lab Obstetrical Recovery Renal Dialysis Psychiatric Nursing Inpatient Beds 0 X Radiological/ Imaging Newborn/ WellBaby Outpatient Surgery Obstetrical Nursing Inpatient Beds 0 Pharmaceutical Emergency Central Plant Intermediate Inpatient Beds 0 Oitettic X Nuclear Medicine X Support Services
Intensive Care Inpatient Image: Construction of the construction
Beds Impatient
Pediatric/Adol Inpatient 0 Clinical Lab Recovery Psychiatric Inpatient 0 X Radiological/ Imaging Newborn/ WellBaby Outpatient Surgery Obstetrical Inpatient 0 Pharmaceutical Emergency Central Plant Intermediate Inpatient Beds 0 Oietetic X Nuclear Medicine X Support Services
Psychatric Inpatient 0 Imaging WellBaby Surgery Obstetrical Inpatient 0 Pharmaceutical Emergency Central Plant Intermediate Inpatient 0 Dietetic X Nuclear X Support Intermediate Inpatient 0 Imaging Administration Administration
Obstetrical Ante/Postprtum Inpatient Beds 0 Impatient Dietetic Emergency Central Plant Intermediate Care Inpatient Beds 0 Dietetic X Nuclear Medicine X Support Services
Intermediate Inpatient 0 Care Beds Services
Skilled Nursing Administration
Total Beds this 0 Building
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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-02217 Building Name: ER Addition									
Type of Service Provided									
Nursir		Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		ehabilitation erapy
Intens		Inpatient Beds	0		Anesthesia				
Pediat escen		Inpatient Beds	0		Clinical Lab		Obstetrical Recovery	Re Re	enal Dialysis
Psych		Inpatient Beds	0	X	Radiological/ Imaging		Newborn/ WellBaby		utpatient Irgery
Obste		Inpatient Beds	0		Pharmaceutical	X	Emergency	Ce	entral Plant
Interm Care		Inpatient Beds	0		Dietetic		Nuclear Medicine		ipport ervices
Skilled		Inpatient Beds	0		Administration				
Total I Buildir	Beds this ng		0						
OSHPD FDD S	B499 Report	D	ata Last Update:	12/24/20	15 Submiss	sion Date:	12/24/2015	Printed: 12/2	26/2015 6:25 AM

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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)							
Building Number: BLD-02204 Build	ding Name: Original Surgery and Lab	Building					
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric					
Inpatient 147 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0				
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing					
Inpatient 20 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0				
Pediatric	Intensive Care Newborn Nursery	Intermediate Care					
Inpatient 7 Inpatient 0 Bed Days	Inpatient 7 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0				
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled					
Inpatient 8 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0				
Coronary Care	Chemical Dependency		l Beds this ding Per				
Inpatient 10 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv					
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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)							
Building Number: BLD-02208 Build	ding Name: ER/Surgery Addition						
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days					
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days					
Pediatric	Intensive Care Newborn Nursery	Intermediate Care					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days					
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days					
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0					
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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)							
Building Number: BLD-02209 Build	ding Name: ICU/CCU						
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0				
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0				
Pediatric	Intensive Care Newborn Nursery	Intermediate Care					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0				
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled					
Inpatient 8 Inpatient 2327 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0				
Coronary Care	Chemical Dependency	Building Per Buildin					
Inpatient 10 Inpatient 2896 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service	18				
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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)							
Building Number: BLD-02211 Buil	ding Name: Cath Lab						
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 U	pdate: 12/24/2015 Submission Date:	: 12/24/2015 Printed: 12/26/2015 6:25 AM					

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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)							
Building Number: BLD-02212 Build	Seed Addition						
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric					
Inpatient 36 Inpatient 10878 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days					
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing					
Inpatient 20 Inpatient 2768 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 7 Inpatient 1162 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 63 63					
OSHPD FDD SB499 Report Data Last U	odate: 12/24/2015 Submission Date:	12/24/2015 Printed: 12/26/2015 6:25 AM					

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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)							
Building Number: BLD-02213 Build	ding Name: Building A, Mech. Equipme	ent Bldg.					
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0				
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0				
Pediatric	Intensive Care Newborn Nursery	Intermediate Care					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0				
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled					
Inpatient 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 Beds Building Per Building F					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service	0				
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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)				
Building Number: BLD-02214 Build	ding Name: Building B			
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	nt 0	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	,	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0	
Coronary Care	Chemical Dependency	Building Per Build	l Beds this ding Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv	0	
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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)				
Building Number: BLD-02215 Buil	ding Name: Building C			
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	t0	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t0	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0	
Coronary Care	Chemical Dependency	Building Per Build	Beds this ling Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv	0	
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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)				
Building Number: BLD-02216 Buil	ding Name: Radiology 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 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 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 Bed Building Per Building		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service	0	
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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)				
Building Number: BLD-02217 Buil	ding Name: ER Addition			
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 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		
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