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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:	10935		
Facility Name:	Santa C	lara Valley Medical Center	
Address:	751 Sou	th Bascom Avenue	
City:	San Jos	e	
Hospital Owner/Lice	ensee:	Santa Clara County Valley Medical Center	
Year of Repo	orting:	2016	
Contact 1 e-mail Add	dress:	[Confidential data left blank intentionally.]	
Contact 2 e-mail Add	dress:	[Confidential data left blank intentionally.]	
Contact 3 e-mail Add	Iress::	[Confidential data left blank intentionally.]	
Name of Subr	mitter:	Alex Gallego	
Submission	Date:	10/13/2016 11:43:02 AM	

Report `	Year: 2016 10935	Santa Clara Valley Medical Ce	nter	San Jose		Page:2 of 67	
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, SPC4D 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- 02547	Old Main Hospital C West (6001)	751 South Bascom Avenue	Rebuild	SPC5	01/01/2020	01/01/2020	
BLD- 02548	Old Main Hospital C East (6001)	751 South Bascom Avenue	Rebuild	SPC5	01/01/2020	01/01/2020	
BLD- 03860	Services Bldg N (Unit 5) (6002)	751 South Bascom Avenue	Retrofit	SPC2	01/01/2020	01/01/2020	
BLD- 03861	Services Bldg S (Unit 4) (6002)	751 South Bascom Avenue	Retrofit	SPC2	01/01/2020	01/01/2020	
BLD- 03869	Connecting Corridor	751 South Bascom Avenue	Retrofit	SPC2	01/01/2020	01/01/2020	

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	on start	date or dates a	ild, retrofit or replacement nd projected Completion c)(1)(E).						
Building No: BLD	02547	Old Main	Hospital C West (6001)		Retrofit/Re Project:	eplacement	Yes-Subr	nitted	
Facility Project Number Number	Sub Num	Scope		Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
10935 HS100053-	0 0		IOLITION & SEISMIC OLD MAIN, BLDG 'C'- S082439"	1/11/2010	5/27/2011 12:00:00 AM	01/11/2010	12/31/2012	FIEL	No
10935 IS080219-0	0	PPR - REPLA	CEMENT BED BUILDINGS	2/8/2008		01/01/2009	01/01/2013	ACTI	No
status and approva			nd projected Completion d	ale of uales p				in projeci	
status and approva		ction 130061(c			_	eplacement	Yes-Subr		
status and approva Building No: BLD Facility Project	s per <mark>Se</mark>	ction 130061(c)(1)(E).	Date In	Retrofit/Re			nitted	CEQA Review
status and approva Building No: BLD Facility Project Number Number	02548 Sub Num	Ction 130061(c Old Main Scope PARTIAL DEM	Hospital C East (6001) IOLITION & SEISMIC OLD MAIN, BLDG 'C'-		Retrofit/Re Project: Plan Approved	eplacement Projected	Yes-Subr Projected	nitted	CEQA Review
status and approva Building No: BLD Facility Project Number Number 10935 HS100053-	S per Se 02548 Sub Num	Ction 130061(c Old Main Scope PARTIAL DEM UPGRADE OF FORMERLY "I	Hospital C East (6001) IOLITION & SEISMIC OLD MAIN, BLDG 'C'-	Date In	Retrofit/Re Project: Plan Approved Date 5/27/2011 12:00:00	Projected Start Date	Yes-Subr Projected Completion Date	nitted	CEQA Review No
status and approva Building No: BLD Facility Project Number Number 10935 HS100053-	S per Se 02548 Sub Num	Ction 130061(c Old Main Scope PARTIAL DEM UPGRADE OF FORMERLY "I	Hospital C East (6001) IOLITION & SEISMIC OLD MAIN, BLDG 'C'- S082439"	Date In 1/11/2010	Retrofit/Re Project: Plan Approved Date 5/27/2011 12:00:00	Projected Start Date	Yes-Subr Projected Completion Date 12/31/2012	nitted Status FIEL	CEQA Review No
status and approva Building No: BLD Facility Project Number Number 10935 HS100053-	S per Se 02548 Sub Num	Ction 130061(c Old Main Scope PARTIAL DEM UPGRADE OF FORMERLY "I	Hospital C East (6001) IOLITION & SEISMIC OLD MAIN, BLDG 'C'- S082439"	Date In 1/11/2010	Retrofit/Re Project: Plan Approved Date 5/27/2011 12:00:00	Projected Start Date	Yes-Subr Projected Completion Date 12/31/2012	nitted Status FIEL	CEQA Review 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-03860 Services Bldg N (Unit 5) (6002)		Retrofit/Replacement Project:	Yes-Sub	mitted		
Facility Project Sub Number Number Num Scope	Date In	Plan Approved Projected Date Start Date	Projected Completion Date		CEQA Review	
10935 IS080219-0 0 PPR - REPLACEMENT BED BUILDINGS	2/8/2008	01/01/2009		ACTI	No	
For each building which is planned for rebuild, retrofit or replacement, projected construction start date or dates and projected Completion dates and approvals per Section $130061(c)(1)(E)$.						
Building No: BLD-03861 Services Bldg S (Unit 4) (6002)		Retrofit/Replacement Project:	Yes-Sub	mitted		
Facility Project Sub Number Number Num Scope	Date In	Plan Approved Projected Date Start Date	Projected Completion Date		CEQA Review	
10935 IS080219-0 0 PPR - REPLACEMENT BED BUILDINGS	2/8/2008	01/01/2009		ACTI	No	
For each building which is planned for rebuild, retrofit or replacement, projected construction start date or dates and projected Completion dates status and approvals per Section $130061(c)(1)(E)$.						
Building No: BLD-03869 Connecting Corridor		Retrofit/Replacement Project:	Yes-Sub	mitted		
Facility Project Sub Number Number Num Scope	Date In	Plan Approved Projected Date Start Date	Projected Completion Date		CEQA Review	
10935 HS100053-0 0 PARTIAL DEMOLITION & SEISMIC UPGRADE OF OLD MAIN, BLDG 'C'- FORMERLY "IS082439"	1/11/2010	5/27/2011 01/11/2010 12:00:00 AM	12/31/2012	FIEL	No	
OSHPD FDD SB499 Report Data Last Update: 10/13/2016	Submi	ssion Date: 10/13/2016	Printed: 10/15/2	016 6:30 AM		

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Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)						
Building Number: BL	D-02547	Building Name: Old	d Main Hospital C West (6001)			
Type of Service Prov	<u>vided</u>					
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	Rehabilitation Therapy		
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	X Administration	Renal Dialysis		
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	X Support Services	Outpatient Surgery		
	Deas	Total Beds this 0 Building	Obstetrical Cesarean/Deliv	Central Plant		
OSHPD FDD SB499 Repo	rt	Data Last Update: 10/13/2016 Su	ubmission Date: 10/13/2016	Printed: 10/15/2016 6:30 AM		

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Provide the number of inpatient	beds and patient days per type of service p	er building per Section 130061(c)(1)(F)	
Building Number: BLD-02548	Building Name: O	ld Main Hospital C East (6001)	
Type of Service Provided			
X Nursing Inpatien Beds	75 Inpatient 17609 Days		etrical overy
IntensiveCare Inpatien Beds	0 Inpatient Days 0		born/ Baby
Pediatric/Adol Inpatien escent Beds	0 Inpatient Days 0	Clinical Lab	rgency
Psychiatric Inpatien Nursing Beds	0 Inpatient Days 0	Radiological/ Nucl Imaging	
Obstetrical Inpatien Ante/Postprtum Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	abilitation apy
Intermediate Inpatien Care Beds	0 Inpatient Days 0		al Dialysis atient
Skilled Nursing Inpatien Beds	0 Inpatient Days 0	Services Surg	
	Total Beds this 75 Building	Cesarean/Deliv —	ral Plant
OSHPD FDD SB499 Report	Data Last Update: 10/13/2016	Submission Date: 10/13/2016 Printed:	10/15/2016 6:30 AM

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Provide the number of in	npatient be	eds and patient days per type of service p	per building per Section 130061(c)(1)(F)
Building Number: BLD- Type of Service Provid		Building Name: S	ervices Bldg N (Unit 5) (6002)	
	npatient 3eds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery
	npatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
	npatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
	npatient 3eds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
	npatient 3eds	0 Inpatient Days 0	Pharmaceutical	Rehabilitation Therapy
	npatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis
	npatient Beds	0 Inpatient Days 0	Services	Surgery
		Total Beds this 0 Building	Cesarean/Deliv	Central Plant
OSHPD FDD SB499 Report		Data Last Update: 10/13/2016	Submission Date: 10/13/2016	Printed: 10/15/2016 6:30 AM

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Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)						
Building Number: BLD-0		Building Name:	Services Bldg S (Unit 4) (6002)		_	
Nursing Ing	patient 0 eds	Inpatient 0 Days	Surgical	Obstetrical Recovery		
	patient 0 eds	Inpatient Days 0	Anesthesia	Newborn/ WellBaby		
	patient 0 eds	Inpatient Days 0	Clinical Lab	Emergency		
	patient 0 eds	Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine		
	patient 0 eds	Inpatient Days 0	Pharmaceutical X Dietetic	Rehabilitation Therapy		
	patient 0 eds	Inpatient Days 0	Administration	Renal Dialysis		
	patient 0 eds	Inpatient Days 0	Services	Surgery		
		eds this 0	Obstetrical Cesarean/Deliv	Central Plant		
OSHPD FDD SB499 Report	Data Last L	Jpdate: 10/13/2016	Submission Date: 10/13/2016	Printed: 10/15/2016 6:30 AM		

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Provide the number of inpatient t	peds and patient days per type of service p	er building per Section 130061(c)(1)(F)	
Building Number: BLD-03869	Building Name:	onnecting Corridor	
Type of Service Provided		_	
Nursing Inpatient Beds	0 Inpatient 0 Days		bstetrical ecovery
IntensiveCare Inpatient Beds	0 Inpatient Days 0		ewborn/ /ellBaby
Pediatric/Adol Inpatient escent Beds	0 Inpatient Days 0	Clinical Lab	mergency
Psychiatric Inpatient Nursing Beds	0 Inpatient Days 0		uclear edicine
Obstetrical Inpatient Ante/Postprtum Beds	0 Inpatient Days 0		ehabilitation herapy
Intermediate Inpatient Care Beds	0 Inpatient Days 0		enal Dialysis utpatient
Skilled Nursing Inpatient Beds	0 Inpatient Days 0		urgery
	Total Beds this 0 Building		entral Plant
OSHPD FDD SB499 Report	Data Last Update: 10/13/2016 S	Submission Date: 10/13/2016 Printe	d: 10/15/2016 6:30 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-02547 B	uilding Name: Old Main Hospital C West (6001)					
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	nt 0				
Perinatal (excluse Newborn / GYN)	Burn	Skilled Nursing					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	nt 0				
Pediatric	intensive Care Newborn Nursery	Intermediate Card					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0				
Intensive Care	Rehabilitation Center	Int. Care / development Disabled					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0				
Coronary Care	Chemical Dependency	Total Beds this Total B Building Per Buildin Unit Service					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	0	0				
OSHPD FDD SB499 Report Data Las	st Update: 10/13/2016 Submission Date:	10/13/2016 Printed: 10/15/2	2016 6:30 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-02548 Building Name: Old Main Hospital C East (6001)							
Medical / Surgical ((Include GYN)	Acute Respiratory	Care	Acute Psychiatric			
Inpatient 75 Bed	Inpatient 1760 Days 9	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Perinatal (excluse l	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 New Nursery	vborn	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 / developr 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	75	75		

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Provide the number of Inpatie	Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)							
Building Number: BLD-03860 Building Name: Services Bldg N (Unit 5) (6002)								
Medical / Surgical (Include	GYN) Acute Respirator	ry Care	Acute Psychiatric					
Inpatient 0 Inpatien Bed Days	nt 0 Inpatient 0 Bed	Inpatient 0 Days		oatient 0 ays				
Perinatal (excluse Newborn	n / GYN) Burn		Skilled Nursing					
Inpatient 0 Inpatien Bed Days	nt 0 Inpatient 0 Bed	Inpatient 0 Days		ays				
Pediatric	intensive Care No Nursery	ewborn	Intermediate Card					
Inpatient 0 Inpatient Bed Days	t 0 Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inp Bed Da	oatient 0 lys				
Intensive Care	Rehabilitation Center		Int. Care / developmen Disabled	t				
Inpatient 0 Inpatient Bed Days	t 0 Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inp Bed Da	patient 0 ys				
Coronary Care	Chemical Dependency		Building Per Bu	otal Beds this uilding Per ervice				
Inpatient 0 Inpatient Bed Days	t 0 Inpatient 0 Bed	Inpatient 0 Days	0	0				

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Provide the number of Inpatient beds and pa	Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)							
Building Number: BLD-03861 Building Name: Services Bldg S (Unit 4) (6002)								
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	nt 0					
Perinatal (excluse Newborn / GYN)	Burn	Skilled Nursing						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	nt 0					
Pediatric	intensive Care Newborn Nursery	Intermediate Card						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	nt 0					
Intensive Care	Rehabilitation Center	Int. Care / development Disabled						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	nt 0					
Coronary Care	Chemical Dependency	Total Beds this Total B Building Per Building Unit Servic						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	0	0					

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Provide the number of Inpatient beds ar	Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)							
Building Number: BLD-03869 Building Name: Connecting Corridor								
Medical / Surgical (Include GYN) Acute Respiratory Care Acute Psychiatric								
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days						
Perinatal (excluse Newborn / GYN)	Burn	Skilled Nursing						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days						
Pediatric	intensive Care Newborn Nursery	Intermediate Card						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days						
Intensive Care	Rehabilitation Center	Int. Care / development Disabled						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days						
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per Unit Service						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	0 0						

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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-02546	Ancillary B (6043)	Remain
BLD-02547	Old Main Hospital C West (6001)	Rebuild
BLD-02548	Old Main Hospital C East (6001)	Rebuild
BLD-02550	Rehabilitation Center Str B (6004)	Remain
BLD-02552	Rehabilitation Center Str C (6004)	Remain
BLD-02553	West Wing K Nursing (6006)	Remain
BLD-02554	Main Hospital M (6009)	Remain
BLD-02555	Energy Plant S1 - Boiler Room (6016)	Remain
BLD-02556	Energy Plant S2 - Addition (6016)	Remain
BLD-02557	Mech/Elec Bldg U (6017)	Remain
BLD-03654	M/E Chiller Addition	Remain
BLD-03860	Services Bldg N (Unit 5) (6002)	Retrofit
BLD-03861	Services Bldg S (Unit 4) (6002)	Retrofit
BLD-03869	Connecting Corridor	Retrofit
BLD-03907	Rehabilitation Center Str A (6004)	Remain
BLD-05677	West Wing K Nursing (6006) Air Intake	Remain

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List ALL proposed ne	List ALL proposed new buildings to be constructed at this or another site.							
Building Number	Building Name)		New Site				
N_1	Replacement	Bed 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 Number: BLD-0	Old Main Hospita	al C West (6001)	Removal 01/01/2020 Date:				
Planned Uses for the build	ing to be removed from acute care servi	ce:					
Planned use for building:	Other Juris	diction:					
Other Usage:	Connecting corridor/storage						
Inpatient services currently	delivered in the building:						
Nursing	Surgical	Obstetrical Cesarean/D	eliv Rehabilitatio	n			
IntensiveCare	Anesthesia						
Pediatric/Adol escent	Clinical Lab	Obstetrical Recovery	Renal Dialys	is			
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery				
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Plan	t			
Intermediate Care	Dietetic	Nuclear Medicine	X Support Services				
Skilled Nursing	X Administration						
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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-02548 Old Main Hospital C East (6001) Removal Date: 01/01/2020						
Planned Uses for the buil	ding to be removed from acute c	are service:				
Planned use for building:	Demolished	Jurisdiction:				
Inpatient services current	ly delivered in the building:					
X Nursing	Surgical	Obstetrical Cesarean/De		ation		
IntensiveCare	Anesthesia		eliv L Therapy			
Pediatric/Adol escent	Clinical Lab	Obstetrical Recovery	Renal Dia	alysis		
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatier Surgery	nt		
Obstetrical Ante/Postprtun	n Pharmaceutica	l Emergency	Central P	lant		
Intermediate Care	Dietetic	Nuclear Medicine	X Support Services			
Skilled Nursing	X Administration		Cervices			
		10/40/0040 0 thetherin D t				
OSHPD FDD SB499 Report	Data Last Update:	10/13/2016 Submission Date	e: 10/13/2016 Printed: 10	D/15/2016 6:30 AM		

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lo data reporte	o data reported for Section 130061(c)(2)(D).						

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lo data reporte	d for Sectio	n 130061(d	ɛ)(2)(D).			

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	ite care services and beds will be relocate s for buildings with a Building Resolution			
Building BLD-02547 Number:	Building Name: Old Main Hospital C	West (6001)		
Will general acute care services	s and beds will be relocated to a new, Exis	sting or retrofitted build	ding?	
Administration Relocat	ted to retrofitted building			
New Building	RetroFitted Buil	ding	Other SPC2-SPC5 Building	<u></u>
N_1-Replacement Bed Building				
	te care services and beds will be relocate s for buildings with a Building Resolution of			
Building BLD-02547 Number:	Building Name: Old Main Hospital C	West (6001)		
Will general acute care services	s and beds will be relocated to a new, Exis	sting or retrofitted build	ding?	
Support Services N/A				
New Building	RetroFitted Buil	ding	Other SPC2-SPC5 Building	<u></u>
		BLD	-03907-Rehabilitation Center Str A	(6004)
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	eral acute care services ar numbers for buildings with					
Building BLD Number:	-02548 Building Name:	Old Main Hospital C	East (6001)			
Will general acute care	services and beds will be r	elocated to a new, Exi	sting or retrofitted I	ouilding?		
Nursing	Relocated to other building]				
New Building		RetroFitted Bui	lding	Other SPC	2-SPC5 Building	<u> </u>
				BLD-03907-Rehabili	tation Center Str A	(6004)
building sites or project	eral acute care services ar numbers for buildings with -02548 Building Name:		of "Rebuild" or "Re			
	services and beds will be r	elocated to a new, Exi	sting or retrofitted I	ouilding?		
Administration	Relocated to other building	1				
New Building		RetroFitted Bui	lding	Other SPC	2-SPC5 Building	<u>, </u>
				BLD-03907-Rehabili	tation Center Str A	(6004)
OSHPD FDD SB499 Repo	rt Data Last Upda	ate: 10/13/2016	Submission Date	e: 10/13/2016	Printed: 10/15	2016 6:30 AM

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Report whether the general acut building sites or project numbers					
Building BLD-02548 Number:	Building Name: Old	d Main Hospital C E	ast (6001)		
Will general acute care services	and beds will be reloc	ated to a new, Exist	ing or retrofitted b	uilding?	
Support Services Relocate	ed to other & retrofitted	building			
New Building		RetroFitted Build	ling	Other SPC	2-SPC5 Building
			E	LD-02546-Ancillary	B (6043)
			E	BLD-02550-Rehabilit	ation Center Str B (6004)
			Е	BLD-02552-Rehabilit	ation Center Str C (6004)
			E	BLD-03907-Rehabilit	ation Center Str A (6004)
OSHPD FDD SB499 Report	Data Last Update:	10/13/2016	Submission Date:	10/13/2016	Printed: 10/15/2016 6:30 AM

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lo data reporte	d for Sectio	n 130061(c	c)(3).		

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Report any general acute car per Section 130061(c)(4)	re hospital inpatient service th	nat is provided in any ge	neral ac	ute care hospital bu	ilding th	nat is rated SPC-1	_
Building Number: BLD-025	547 Building Name: OI	d Main Hospital C West	(6001)				
Type of Service Provide	ed						
		Surgical		Dbstetrical Cesarean/Deliv		Rehabilitation Therapy	
Nursing		Anesthesia	— .		_	Danal Diakaia	
Intensiv	veCare	Clinical Lab		Dbstetrical Recovery		Renal Dialysis	
Pediatri escent		Radiological/		lewborn/ VellBaby		Outpatient Surgery	
Psychia Nursing		Imaging Pharmaceutical		mergency		Central Plant	
Obstetri Ante/Po	rical ostprtum	Dietetic		luclear ledicine	x	Support Services	
Interme Care	ediate	Administration					
Skilled I	Nursing						
OSHPD FDD SB499 Report	Data Last Update: 10	/13/2016 Submis	sion Date	e: 10/13/2016	Printeo	d: 10/15/2016 6:30 AM	

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Report any general per Section 130061		tient service that is provided in any	r general acute care hospital b	building that is rate	ed SPC-1
Building Number:	BLD-02548 Buildin	g Name: Old Main Hospital C Ea	ast (6001)		
Type of Service	e Provided				
		Surgical	Obstetrical Cesarean/Deliv	Rehabil Therapy	
X	Nursing				
	IntensiveCare	Anesthesia	Obstetrical	Renal D	Dialysis
		Clinical Lab	Recovery		
	Pediatric/Adol escent		Newborn/	Outpatie Surgery	
	Psychiatric	Radiological/ Imaging	WellBaby		
	Nursing	Pharmaceutical	Emergency	Central	Plant
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	X Support Service	
	Intermediate				
	Care	X Administration			
	Skilled Nursing				
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Report any general per Section 130061		tient service that is provided in any	general acute care hospital	building that is rate	ed SPC-1
Building Number:	BLD-03860 Buildin	g Name: Services Bldg N (Unit s	5) (6002)		
Type of Service	e Provided				
		Surgical	Obstetrical Cesarean/Deliv	Rehabil Therapy	
	Nursing				, ,
	IntensiveCare	Anesthesia	Obstetrical Recovery	Renal D	Dialysis
	Pediatric/Adol	Clinical Lab		Outpatie	
	escent	Radiological/	Newborn/ WellBaby	Surgery	1
	Psychiatric Nursing	Imaging Pharmaceutical	Emergency	Central	Plant
	Obstetrical Ante/Postprtum	X Dietetic	Nuclear Medicine	Support Service:	
	Intermediate Care	Administration			
	Skilled Nursing				
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Report any general acute care hospital inp per Section 130061(c)(4)	patient service that is provided in any	v general acute care hospital b	building that is rate	ed SPC-1
Building Number: BLD-03861 Build	ng Name: Services Bldg S (Unit 4	4) (6002)		
Type of Service Provided				
	Surgical	Obstetrical Cesarean/Deliv	Rehabil Therapy	
Nursing				
IntensiveCare	Anesthesia	Obstetrical	Renal D	ialysis
	Clinical Lab	Recovery		
Pediatric/Adol escent		Newborn/	Outpatie Surgery	
Develoitateia	Radiological/ Imaging	WellBaby		
Psychiatric Nursing	Pharmaceutical	Emergency	Central	Plant
Obstetrical Ante/Postprtum	X Dietetic	Nuclear Medicine	Support Service	
_				
L Intermediate Care	Administration			
Skilled Nursing				
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Report any generation 13006		pital inpatient service	that is provided in any	general a	cute care hospital l	building the	at is rated SPC-1	
Building Number:	BLD-03869	Building Name:	Connecting Corridor					
Type of Servi	ce Provided							
			Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
	Nursing		Anesthesia	_				
	IntensiveCare		on		Obstetrical Recovery		Renal Dialysis	
	Pediatric/Adol escent		Clinical Lab		Newborn/		Outpatient Surgery	
	Psychiatric		Radiological/ Imaging		WellBaby			
	Nursing		Pharmaceutical		Emergency		Central Plant	
	Obstetrical Ante/Postprtur	^m	Dietetic		Nuclear Medicine		Support Services	
	Intermediate Care		Administration					
	Skilled Nursing	g						
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	ether by retrofit or by				ach building will comply e provided in each gen					
Building Number:		Building Nam								
Configuration: Type of Servic	Configuration: Replace with existing SPC3, SPC4, SPC4D or SPC5 and NPC4 or NPC5 building. Type of Service Provided									
	lursing		Surgical		Obstetrical Cesarean/Deliv		habilitation erapy			
l Ir	ntensiveCare		Anesthesia		Obstetrical	Re	nal Dialysis			
	Pediatric/Adol escent		Clinical Lab		Recovery					
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		tpatient ·gery			
	Dbstetrical Ante/Postprtum		Pharmaceutical		Emergency	Ce	ntral Plant			
	ntermediate		Dietetic							
	Care Skilled Nursing		Administration		Nuclear Medicine		ipport rrvices			
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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-02547	Building Na	me: Old Main Hospital	C West	(6001)					
Configuration:	Remove from GA	C service by	1/1/2030							
Type of Service	Provided									
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Int	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	ediatric/Adol cent		Clinical Lab		Recovery					
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	ostetrical ite/Postprtum		Pharmaceutical		Emergency		Central Plant			
Int Ca	ermediate		Dietetic							
	illed Nursing		Administration		Nuclear Medicine		Support Services			
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	her by retrofit or by				ach building will comply wit be provided in each genera		
Building Number:	BLD-02548	Building Na	me: Old Main Hospital	C East (6001)		
Configuration:	Remove from GA	C service by	1/1/2030				
Type of Service	Provided						
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Int	ensiveCare		Anesthesia		Obstetrical Recovery	E F	Renal Dialysis
	ediatric/Adol cent		Clinical Lab		Recovery		
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Dutpatient Surgery
	ostetrical ite/Postprtum		Pharmaceutical		Emergency		Central Plant
Int Ca	ermediate		Dietetic				
	illed Nursing		Administration		Nuclear Medicine		Support Services
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	her by retrofit or by I				ach building will comply wit be provided in each general				
Building Number:	BLD-02550	Building Na	me: Rehabilitation Cen	ter Str E	3 (6004)				
Configuration:	Remove from GAC	Service by	1/1/2030						
Type of Service Provided									
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
Inte	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis		
-	ediatric/Adol cent		Clinical Lab						
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	ostetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant		
Inte Ca	ermediate are		Dietetic		Nuclear Medicine		Support		
Sk	illed Nursing		Administration				Services		
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	her by retrofit or by i				ach building will comply wit be provided in each genera				
Building Number:	BLD-02552	Building Na	me: Rehabilitation Cen	ter Str C	C (6004)				
Configuration:	Remove from GAC	C service by	1/1/2030						
Type of Service Provided									
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis		
-	diatric/Adol cent		Clinical Lab						
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	ostetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant		
Inte Ca	ermediate are		Dietetic		Nuclear Medicine		Support		
Sk	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-02553 Building Name: West Wing K Nursing (6006)												
Configuration: Retrofit Conforming building to NPC 4 or NPC 5												
Type of Service	Provided											
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy					
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis					
	ediatric/Adol cent		Clinical Lab									
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery					
	ostetrical ite/Postprtum		Pharmaceutical		Emergency		Central Plant					
Inte Ca	ermediate are		Dietetic		Nuclear Medicine		Support					
	illed Nursing		Administration				Support Services					
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Report Year: 2016	i 10935 S	Santa Clara \	/alley Medical Center		San Jose		Page:36 of 67					
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-02554 Building Name: Main Hospital M (6009)												
Configuration:	Configuration: Retrofit Conforming building to NPC 4 or NPC 5											
Type of Service P	rovided											
Nursi	ng		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy					
Intens	siveCare		Anesthesia		Obstetrical		Renal Dialysis					
Pedia	atric/Adol nt		Clinical Lab		Recovery							
Psycl Nursi	hiatric ng		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery					
	etrical Postprtum		Pharmaceutical		Emergency		Central Plant					
Interr Care	nediate		Dietetic		.							
	d 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-02555 Building Name: Energy Plant S1 - Boiler Room (6016)											
Configuration: Retrofit Conforming building to NPC 4 or NPC 5											
Type of Service	Provided										
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
Int	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis				
	ediatric/Adol cent		Clinical Lab		Recovery						
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
	ostetrical ite/Postprtum		Pharmaceutical		Emergency		Central Plant				
Int Ca	ermediate are		Dietetic		Nuclear Medicine		Support				
Sk	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-02556 Building Name: Energy Plant S2 - Addition (6016)											
Configuration: Retrofit Conforming building to NPC 4 or NPC 5											
Type of Service Provided											
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis				
	ediatric/Adol cent		Clinical Lab		,						
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
	ostetrical ite/Postprtum		Pharmaceutical		Emergency		Central Plant				
Int Ca	ermediate are		Dietetic		Nuclear Medicine		Support				
Sk	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-02557 Building Name: Mech/Elec Bldg U (6017)											
Configuration: Retrofit Conforming building to NPC 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				
Sk	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-03654 Building Name: M/E Chiller Addition											
Configuration: Retrofit Conforming building to NPC 4 or NPC 5											
Type of Service Provided											
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis				
	ediatric/Adol cent		Clinical Lab								
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
	ostetrical ite/Postprtum		Pharmaceutical		Emergency		Central Plant				
Inte Ca	ermediate are		Dietetic		Nuclear Medicine		Support				
Sk	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-03860 Building Name: Services Bldg N (Unit 5) (6002)											
Configuration: Retrofit Non-Conforming building to SPC 2 and NPC 3 and remove from service by 2030											
Type of Service	Provided										
Nu	irsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis				
	diatric/Adol cent		Clinical Lab		Recovery						
	ychiatric ırsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
	ostetrical ite/Postprtum		Pharmaceutical		Emergency		Central Plant				
Inte Ca	ermediate are		Dietetic		Nuclear Medicine		Support				
Sk	illed Nursing		Administration				Services				
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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-03861 Building Name: Services Bldg S (Unit 4) (6002)											
Configuration: Retrofit Non-Conforming building to SPC 2 and NPC 3 and remove from service by 2030											
Type of Service	Provided										
Nu	irsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis				
	diatric/Adol cent		Clinical Lab		Recovery						
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
	ostetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant				
Inte Ca	ermediate ire		Dietetic		Nuclear Medicine		Support				
Sk	illed Nursing		Administration				Services				
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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-03869 Building Name: Connecting Corridor											
Configuration: Retrofit Non-Conforming building to SPC 2 and NPC 3 and remove from service by 2030											
Type of Service	Provided										
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis				
	diatric/Adol cent		Clinical Lab								
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
	ostetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant				
Inte Ca	ermediate are		Dietetic		Nuclear Medicine		Support				
Sk	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-03907 Building Name: Rehabilitation Center Str A (6004)											
Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.											
Type of Service	Provided										
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis				
	diatric/Adol cent		Clinical Lab		Recovery						
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
	ostetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant				
Inte Ca	ermediate are		Dietetic		Nuclear Medicine		Support				
Sk	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-05677 Building Name: West Wing K Nursing (6006) Air Intake											
Configuration: Retrofit Conforming building to NPC 4 or NPC 5											
Type of Service	Provided										
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis				
	ediatric/Adol cent		Clinical Lab		Recovery						
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
	ostetrical nte/Postprtum		Pharmaceutical		Emergency		Central Plant				
Inte Ca	ermediate are		Dietetic		Nuclear Medicine		Support				
Sk	illed Nursing		Administration				Services				
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Include information on 4D and SPC-5 per Sec			by type of S	Service provided by b	uildings that are classified a	is SPC-2, S	PC-3, SPC-4, SPC-
Building Number: BLI	D-02546	Building N	lame: An	cillary B (6043)]
Type of Service Prov	<u>vided</u>						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
IntensiveCare	Inpatient Beds	0		Anesthesia			
Pediatric/Adol	Inpatient Beds	0	X	Clinical Lab	Obstetrical Recovery	X Re	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		tpatient rgery
Obstetrical	Inpatient Beds	11		Pharmaceutical	Emergency	Ce	ntral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Su Se	oport rvices
Skilled Nursing	Inpatient Beds	0	X	Administration			
Total Beds this Building		11					
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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, SPC-4D and SPC-5 per Section 130061(e)													
Building Number: BLI	Building Number: BLD-02550 Building Name: Rehabilitation Center Str B (6004)												
Type of Service Prov	/ided												
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy						
IntensiveCare	Inpatient Beds	0		Anesthesia									
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re	nal Dialysis						
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		tpatient rgery						
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Ce	ntral Plant						
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Su Se	pport rvices						
Skilled Nursing	Inpatient Beds	0	X	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, SPC-4D and SPC-5 per Section 130061(e)												
Building Number: BLI	D-02552	Building Na	ame: <mark>Re</mark>	habilitation Center St	r C (6004)]					
Type of Service Prov	<u>/ided</u>											
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy					
IntensiveCare	Inpatient Beds	0		Anesthesia								
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	C Re	nal Dialysis					
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		itpatient rgery					
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Ce	entral Plant					
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine		pport rvices					
Skilled Nursing	Inpatient Beds	0	X	Administration								
Total Beds this Building		0										
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	de information on nd SPC-5 per <mark>Sec</mark>			by type of S	Service provided by b	uilding	gs that are classified	as SPC-2	, SPC-3, SPC-4, SPC-
Buildi	ng Number: BLI	D-02553	Building N	Name: We	est Wing K Nursing (6	6006)			
Туре	e of Service Prov	rided							
X	Nursing	Inpatient Beds	38	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	IntensiveCare	Inpatient Beds	24		Anesthesia				
	Pediatric/Adol escent	Inpatient Beds	0	X	Clinical Lab	X	Obstetrical Recovery		Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	X	Newborn/ WellBaby		Outpatient Surgery
X	Obstetrical Ante/Postprtum	Inpatient Beds	33		Pharmaceutical	X	Emergency		Central Plant
	Intermediate Care	Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services
	Skilled Nursing	Inpatient Beds	0		Administration				
	Total Beds this Building		95						
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Inclue 4D ar	de information on and SPC-5 per <mark>Sec</mark>	the number tion 130061	of inpatient beds (e)	by type of \$	Service provided by b	uildings that are classified	l as SPC-2, S	PC-3, SPC-4, SPC-
Buildi	ng Number: BL	D-02554	Building N	lame: Ma	ain Hospital M (6009)]
Тур	e of Service Prov	<u>vided</u>						
X	Nursing	Inpatient Beds	41	X	Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
X	IntensiveCare	Inpatient Beds	68	X	Anesthesia			
X	Pediatric/Adol escent	Inpatient Beds	40		Clinical Lab	X Obstetrical Recovery	Re Re	nal Dialysis
	Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby		tpatient rgery
X	Obstetrical Ante/Postprtum	Inpatient Beds	8	X	Pharmaceutical	Emergency	Ce	ntral Plant
	Intermediate Care	Inpatient Beds	0		Dietetic	X Nuclear Medicine		pport rvices
	Skilled Nursing	Inpatient Beds	0	X	Administration			
	Total Beds this Building		157					
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Include information on 4D and SPC-5 per Sec	the number of tion 130061(e)	inpatient beds b	by type of §	Service provided by bu	uildings that are classifie	d as SPC-2, S	PC-3, SPC-4, SPC-
Building Number: BLI	D-02555	Building Na	ame: En	ergy Plant S1 - Boiler	Room (6016)]
Type of Service Prov	vided						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
IntensiveCare	Inpatient Beds	0		Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		tpatient rgery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	X Ce	ntral Plant
Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Su Su Se	pport rvices
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
OSHPD FDD SB499 Report	Dat	a Last Update:	10/13/2010	6 Submission I	Date: 10/13/2016	Printed: 10/15/	2016 6:30 AM

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	nformation on t SPC-5 per <mark>Sect</mark>		npatient beds	by type of S	ervice provided by build	lings that are classified as	SPC-2, 8	SPC-3, SPC-4, SPC-
Building	Number: BLD	0-02556	Building N	ame: Ene	ergy Plant S2 - Addition	(6016)		
Type of	f Service Prov	ided						
	ursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		ehabilitation nerapy
	tensiveCare	Inpatient Beds	0		Anesthesia			
	ediatric/Adol scent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re	enal Dialysis
	sychiatric ursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		utpatient urgery
	bstetrical nte/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	X Ce	entral Plant
	termediate are	Inpatient Beds	0		Dietetic	Nuclear Medicine		upport ervices
Sł	killed Nursing	Inpatient Beds	0		Administration			
	otal Beds this uilding		0					
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Include information on 4D and SPC-5 per Sec	the number of tion 130061(e	inpatient beds I)	by type of Service p	provided by buildi	ings that are classified	as SPC-2, S	PC-3, SPC-4, SPC-
Building Number: BLI	D-02557	Building N	ame: Mech/Elec	Bldg U (6017)]
Type of Service Prov	vided						
Nursing	Inpatient Beds	0	Surgic	al	Obstetrical Cesarean/Deliv		habilitation erapy
IntensiveCare	Inpatient Beds	0	Anesth	nesia			
Pediatric/Adol escent	Inpatient Beds	0	Clinica	l Lab	Obstetrical Recovery	Re	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiol Imagin		Newborn/ WellBaby		tpatient gery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharm	aceutical	Emergency	X Ce	ntral Plant
Intermediate	Inpatient Beds	0	Dieteti	с	Nuclear Medicine		oport vices
Skilled Nursing	Inpatient Beds	0	Admini	istration			
Total Beds this Building		0					
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Include information of 4D and SPC-5 per Se			by type of Service provided by	buildings that are classified a	as SPC-2, S	PC-3, SPC-4, SPC-
Building Number: B	_D-03654	Building N	lame: M/E Chiller Addition]
Type of Service Pro	ovided					
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
IntensiveCare	Inpatient Beds	0	Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Rei	nal Dialysis
Psychiatric	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby		tpatient rgery
Obstetrical Ante/Postprtun	Inpatient Beds	0	Pharmaceutical	Emergency	X Cer	ntral Plant
Intermediate	Inpatient Beds	0	Dietetic	Nuclear Medicine		oport rvices
Skilled Nursing	Inpatient Beds	0	Administration			
Total Beds this Building		0				
			40/42/2046	vo Doto: 40/42/2040	inted 40/45	2016 6:20 AM
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Include information on 4D and SPC-5 per Sec			by type of Service provide	d by buildings that are classified	d as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-03907	Building N	ame: Rehabilitation Cer	nter Str A (6004)	
Type of Service Prov	vided				
X Nursing	Inpatient Beds	186	X Surgical	Obstetrical Cesarean/Deliv	X Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia		
Pediatric/Adol	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	X Pharmaceutic	al Emergency	Central Plant
Intermediate	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration	1	
Total Beds this Building		186			
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Include information on 4D and SPC-5 per Sec	the number of tion 130061(e)	inpatient beds t	by type of Service provided	by buildings that are classified	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLI	D-05677	Building Na	ame: West Wing K Nursir	ng (6006) Air Intake	
Type of Service Prov	<u>vided</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	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 unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4, SPC-4 and SPC-5 per Section 130061(e) Euklding Number: BLD-02546 Building Name: Ancillary B (6043) Medical / Surgical (Include GYN) Acute Respiratory Care Acute Psychiatric Inpatient 0 Inpatient 0 Inpatient 0 Perinatal (Exclude Newborn / GYN) Burn Skilled Nursing Inpatient 11 Inpatient 1825 Inpatient 0 Inpatient 0 Inpatient 0 Perinatal (Exclude Newborn / GYN) Burn Skilled Nursing Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Days 0 Pediatric Intensive Care Newborn Intermediate Care Instruct Instruct Instruct Days 0 Inpatient 0	Report Year: 2016	10935 Santa Cla	ra Valley Medical Center	San Jose	Page:57 of 67
Medical / Surgical (Include GYN) Acute Respiratory Care Acute Psychiatric Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Bed 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Perinatal (Exclude Newborn / GYN) Burn Skilled Nursing Inpatient 11 Inpatient 1825 Inpatient 0 Inpatient 0 Inpatient 0 Bed 11 Inpatient 1825 Inpatient 0 Inpatient 0 Inpatient 0 Bed 11 Inpatient 1825 Inpatient 0 Inpatien			eds by type of unit provided by buildings	that are classified as SPC-2, SPC-3,	SPC-4, SPC-
npatient 0 Inpatient 0	Building Number: BL	.D-02546 Build	ing Name: Ancillary B (6043)		
Bed Days Bed Days Bed Days Perinatal (Exclude Newborn / GYN) Burn Skilled Nursing npatient 1 Inpatient 1825 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Bed 1 Inpatient 1825 Inpatient 0 Inpatient 0 Inpatient 0 Prediatric Intensive Care Newborn Intermediate Care npatient 0 Inpatient 0 Inpatient 0 Nursery Inpatient 0 Inpatient 0 Inpatient 0 Navery Institution Inpatient 0 Inpatient 0 Inpatient 0 Need 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Nursery Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Nursery Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Nursery Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0	/ledical / Surgical (Incl	ude GYN)	Acute Respiratory Care	Acute Psychiatric	
npatient 11 Inpatient 1825 Inpatient 0					t O
ed Days Bed Days Bed Oays Days ediatric Intensive Care Newborn Nursery Intermediate Care apatient 0 Inpatient 0 Inpatient 0 Inpatient 0 apatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 attensive Care Rehabilitation Center Rehabilitation Days Inpatient 0 Inpatient 0 Inpatient 0 apatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 apatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 apatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 apatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Early Per apatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Early Per	erinatal (Exclude New	born / GYN)	Burn	Skilled Nursing	
Nursery npatient 0 Inpatient 0					t O
Ned Days Bed Days Bed Days Intensive Care Rehabilitation Center Int. Care / Developmentally Disabled Inpatient 0 Inpatient 0 Inpatient 0	ediatric			Intermediate Care	
Intensive Care Rehabilitation Center Disabled Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Days Bed 0 Inpatient 0 Inpatient 0 coronary Care Chemical Dependency Total Beds this Building Per Unit Total Beds this Building Per Service Total Beds this Building Per Service					t 0
Days Bed Days Bed Days Coronary Care Chemical Dependency Total Beds this Building Per Unit Total Beds this Building Per Service	ntensive Care				
npatient 0 Inpatient 0 Inpatient 0 Inpatient 0					t O
npatient 0 Inpatient 0 Inpatient 0 Inpatient 0	Coronary Care		Chemical Dependency		
				Unit Serv	ice

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Include information on the number of inpatient 4D and SPC-5 per Section 130061(e)	beds by type of unit provided by buildings that	t are classified as SPC-2, SPC-3, SPC-4, SPC-	
Building Number: BLD-02550 Bui	Iding Name: Rehabilitation Center Str B	(6004)	
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 inpatien 4D and SPC-5 per Section 130061(e)	t beds by type of unit provided by buildings tha	t are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-02552 Bu	ilding Name: Rehabilitation Center Str C	(6004)
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
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Include information on the number of inpatie 4D and SPC-5 per Section 130061(e)	ent beds by type of unit provided by buildings the	at are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-02553 E	Building Name: West Wing K Nursing (600	6)
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 30 Inpatient 11656 Bed Days	Bed 0 Inpatient 0 Bed 0	Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 33 Inpatient 14126 Bed Days	Inpatient 8 Inpatient 2523 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
npatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
ntensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 24 Inpatient 4640 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 95 95
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Include information on the number of 4D and SPC-5 per Section 130061(e)	inpatient beds by type of unit provided by buildings th)	nat are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-02554	Building Name: Main Hospital M (6009)	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 41 Inpatient Bed Days	13217 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 8 Inpatient Bed Days	2385 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
npatient 40 Inpatient 3ed Days	5095Inpatient40Inpatient4648BedDays	Inpatient 0 Inpatient 0 Bed Days
ntensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
npatient 20 Inpatient 20 Bed	3626 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 8 Inpatient Bed Days	2433 Inpatient 0 Inpatient 0 Bed Days	Unit Service
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Include information on the number of inpatien 4D and SPC-5 per Section 130061(e)	nt beds by type of unit provided by buildings that	at are classified as SPC-2, SPC-3, SPC-4, SPC-	
Building Number: BLD-02555 Building Number:	Lilding Name: Energy Plant S1 - Boiler Ro	oom (6016)	
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 0	Unit Service 0	
OSHPD FDD SB499 Report Data Las	t Update: 10/13/2016 Submission Date	: 10/13/2016 Printed: 10/15/2016 6:30 AM	

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Include information on the number of inpatient B 4D and SPC-5 per Section 130061(e)	beds by type of unit provided by buildings that	are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-02556 Build	ding Name: Energy Plant S2 - Addition ((6016)
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0
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Include information on the number of inpatient 4D and SPC-5 per Section 130061(e)	beds by type of unit provided by buildings that	are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-02557 Buil	ding Name: Mech/Elec Bldg U (6017)	
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 L	Jpdate: 10/13/2016 Submission Date:	10/13/2016 Printed: 10/15/2016 6:30 AM

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Include information on the number of 4D and SPC-5 per Section 130061(e)	inpatient beds by type of unit provided by)	buildings that are classified as SPC-2,	SPC-3, SPC-4, SPC-
Building Number: BLD-03654	Building Name: M/E Chiller Ac	ldition	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient Bed Days	0 Inpatient 0 Inpatien Bed Days		Inpatient 0 Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient Bed Days	0 Inpatient 0 Inpatien Bed Days		Inpatient 0 Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient Bed Days	0 Inpatient 0 Inpatien Bed Days		Inpatient 0 Days
Intensive Care	Rehabilitation Center	Int. Care / Developm Disabled	entally
Inpatient 0 Inpatient Bed Days	0 Inpatient 0 Inpatien Bed Days		Inpatient 0 Days
Coronary Care	Chemical Dependency	Total Beds this Building Per	Total Beds this Building Per
Inpatient 0 Inpatient Bed Days	0 Inpatient 0 Inpatien Bed Days	it 0 Unit 0	Service 0
OSHPD FDD SB499 Report	Data Last Update: 10/13/2016 Sul	omission Date: 10/13/2016 Printe	d: 10/15/2016 6:30 AM

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Include information on the number of inpatient to 4D and SPC-5 per Section 130061(e)	beds by type of unit provided by buildings that	are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-03907 Build	ding Name: Rehabilitation Center Str A (6004)
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 116 Inpatient 27100 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 70 Inpatient 12269 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 186 186
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Include information on the number of inpatien 4D and SPC-5 per Section 130061(e)	nt beds by type of unit provided by buildings that	at are classified as SPC-2, SPC-3, SPC-4, SPC-	
Building Number: BLD-05677 Building Number:	uilding Name: West Wing K Nursing (600	06) Air Intake	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Bed Days 0	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0	
OSHPD FDD SB499 Report Data Las	t Update: 10/13/2016 Submission Date	: 10/13/2016 Printed: 10/15/2016 6:30 AM	