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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:	11322	
Facility Name:	Alta Bates Summit Medical Center	
Address:	350 Hawthorne Ave	
City:	Oakland	
Hospital Owner/Lice	ensee: Sutter East Bay Hospitals	
Year of Repo	porting: 2016	
Contact 1 e-mail Add	dress: [Confidential data left blank intentionally.]	
Contact 2 e-mail Add	Idress: [Confidential data left blank intentionally.]	
Contact 3 e-mail Add	dress:: [Confidential data left blank intentionally.]	
Name of Subr	mitter: Carl Scheuerman	
Submission	Date: 8/26/2016 10:38:10 AM	

Report \	/ear: 2016 11322	Alta Bates Summit Medical Ce	enter	Oakland		Page:2 of 60
rebuild, r 130060 (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 Ratin If Required	g Extension Date	Anticipated Completion Date
BLD- 00698	East Wing	350 Hawthorne Ave	Retrofit	SPC2	01/01/2017	09/01/2016
BLD- 00699	Original West Wing	350 Hawthorne Ave	Retrofit	SPC2	01/01/2020	07/01/2019
BLD- 00700	West Service Wing - Building 1	350 Hawthorne Ave	Retrofit	SPC2	01/01/2020	07/01/2019
BLD- 03433	West Service Wing - Building 2	350 Hawthorne Ave	Retrofit	SPC2	01/01/2020	07/01/2019

Report Y	'ear: 20	0 16 1	1322	Alta Bates Sun	nmit Medical Cen	ter		Oakla	nd		Page:3 of	60
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-	00698		East Wing				trofit/Re bject:	eplacement	Yes-Subr	nitted	
Facility Number	Project Number	Sub Num	Sco	ре		Date In	Plan Ap Da		Projected Start Date	Projected Completion Date	Status	CEQA Review
11322	1140016-01- 00	- 0	East	t Wing Voluntary Seisn	nic Improvements	12/19/201 4			12/19/2014	09/01/2016	PEND	No
projected	d constructi	on start	date o	d for rebuild, retrofit or dates and projecte 130061(c)(1)(E).								
Building	No: BLD-	00699		Original West Wing				trofit/Re bject:	eplacement	Yes-Subr	nitted	
Facility Number	Project Number	Sub Num	Sco	ре		Date In	Plan Ap Da		Projected Start Date	Projected Completion Date	Status	CEQA Review
	I140015-01- 00	- 0	Wes	st Wing Voluntary Seis	mic Improvements	12/18/201 4			12/19/2014	07/01/2019	ACTI	No
OSHPD F	DD SB499 F	Report		Data Last Update:	08/26/2016	Submi	ssion Date	e: 08/2	26/2016	Printed: 10/6/20	16 1:36 PM	

Report Year: 2016 11322 Alta Bates Summit Medical Cen	ter	Oakla	nd		Page:4 of	60
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-00700 West Service Wing - Building 1		Retrofit/Re Project:	eplacement	Yes-Subr	mitted	
Facility Project Sub Number Number Num Scope	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
11322 I140015-01- 0 West Wing Voluntary Seismic Improvements 00	12/18/201 4		12/19/2014	07/01/2019	ACTI	No
For each building which is planned for rebuild, retrofit or replacement, p projected construction start date or dates and projected Completion da status and approvals per Section 130061(c)(1)(E).						
Building No: BLD-03433 West Service Wing - Building 2		Retrofit/Re Project:	eplacement	Yes-Subr	mitted	
Facility Project Sub Number Number Num Scope	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
11322 I140015-01- 0 West Wing Voluntary Seismic Improvements 00	12/18/201 4		12/19/2014	07/01/2019	ACTI	No

Report Year: 2016 11322	Alta Bates Summit Medical Center	Oakland	Page:5 of 60
Provide the number of inpatient	beds and patient days per type of service pe	er building per Section 130061(c)(1)(F)
Building Number: BLD-00698	Building Name: Ea	st Wing	
Type of Service Provided			
X Nursing Inpatient Beds	t 40 Inpatient 6313 Days	Surgical	Obstetrical Recovery
IntensiveCare Inpatient Beds	t 0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
Pediatric/Adol Inpatient escent Beds	t 0 Inpatient Days 0	X Clinical Lab	Emergency
Psychiatric Inpatient Nursing Beds	t 0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
Obstetrical Inpatient Ante/Postprtum Beds	t 0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy
Intermediate Inpatient Care Beds	t 0 Inpatient Days 0	Administration	Renal Dialysis
Skilled Nursing Inpatient	t 0 Inpatient Days 0		Outpatient Surgery
	Total Beds this 40 Building	Obstetrical Cesarean/Deliv	Central Plant
OSHPD FDD SB499 Report	Data Last Update: 08/26/2016 Su	ubmission Date: 08/26/2016 Pi	rinted: 10/6/2016 1:36 PM

Report Year: 2016 1133	22 Alta Bates Summit Medical Center	Oakland	Page:6 of 60
Provide the number of inpatie	ent beds and patient days per type of service pe	er building per Section 130061(c)	(1)(F)
Building Number: BLD-0069	99 Building Name: Ori	iginal West Wing	
Type of Service Provided			
Nursing Inpati Beds		Surgical	Obstetrical Recovery
IntensiveCare Inpati Beds		Anesthesia	Newborn/ WellBaby
Pediatric/Adol Inpati escent Beds		Clinical Lab	Emergency
Psychiatric Inpati Nursing Beds		Radiological/ Imaging	Nuclear Medicine
Obstetrical Inpati Ante/Postprtum Beds		PharmaceuticalX Dietetic	Rehabilitation Therapy
Intermediate Inpati Care Beds			Renal Dialysis
Skilled Nursing Inpati Beds		X Support Services	Outpatient Surgery
	Total Beds this 0 Building	Cesarean/Deliv	X Central Plant
OSHPD FDD SB499 Report	Data Last Update: 08/26/2016 St	ubmission Date: 08/26/2016	Printed: 10/6/2016 1:36 PM

Report Year: 2016	11322	Alta Bates Summit Medical Center	Oakland	Page:7 of 60
Provide the number of	inpatient be	eds and patient days per type of service pe	er building per Section 130061(c)(1)(F)
Building Number: BL	D-00700	Building Name: We	est Service Wing - Building 1	
Type of Service Prov	ided			
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical X Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0		Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	X Support Services	Outpatient Surgery
		Total Beds this 0 Building	Cesarean/Deliv	X Central Plant
OSHPD FDD SB499 Repor	t	Data Last Update: 08/26/2016 Si	ubmission Date: 08/26/2016	Printed: 10/6/2016 1:36 PM

Report Year: 2016	11322	Alta Bates Summit Medical Center	Oakland	Page:8 of 60
Provide the number of	inpatient be	eds and patient days per type of service pe	er building per Section 130061(c)(1)(F)
Building Number: BLI	D-03433	Building Name: We	est Service Wing - Building 2	
Type of Service Prov	ided			
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0		Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	X Support Services	Outpatient Surgery
		Total Beds this 0 Building	Cesarean/Deliv	Central Plant
OSHPD FDD SB499 Report	t	Data Last Update: 08/26/2016 Se	ubmission Date: 08/26/2016	Printed: 10/6/2016 1:36 PM

Report Year: 2016	11322 Alta Bates	Summit Medical Cen	oter	akland	Page:9 of 60
Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)					
Building Number:	BLD-00698 Buildi	ng Name: East	Wing		
Medical / Surgical (Ind	clude GYN)	Acute Respiratory	Care	Acute Psychiatric	
	hpatient 6313 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse Ne	ewborn / GYN)	Burn		Skilled Nursing	
	npatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care New Nursery	vborn	Intermediate Card	
	npatient 0 lays	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developr Disabled	nent
	ays	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
	ays	Inpatient 0 Bed	Inpatient 0 Days	40	40
OSHPD FDD SB499 Rep	ort Data Last Up	date: 08/26/2016	Submission Date:	08/26/2016 Printe	d: 10/6/2016 1:36 PM

Report Year: 2016 11322 A	Ita Bates Summit Medical Center	Oakland Page:10 of 60			
Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)					
Building Number: BLD-00699	Building Name: Original West Wing				
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days			
Perinatal (excluse Newborn / GYN)	Burn	Skilled Nursing			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days			
Pediatric	intensive Care Newborn Nursery	Intermediate Card			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days			
Intensive Care	Rehabilitation Center	Int. Care / development Disabled			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days			
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per Unit Service			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	0 0			

Report Year: 2	016 11322 Alta Bate	es Summit Medical Ce	nter Oa	kland	Page:11 of 60			
Provide the numbe	Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)							
Building Number:	BLD-00700 Buil	ding Name: Wes	st Service Wing - Building	1				
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	e 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 Ne 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			

Report Year: 20	11322 Alta Bate	s Summit Medical Ce	nter Oa	akland	Page:12 of 60		
Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)							
Building Number:	BLD-03433 Build	ing Name: Wes	t Service Wing - Building	2]		
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 Net 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 / developm Disabled	ent		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		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		

Report Year:

11322

2016

Alta Bates Summit Medical Center

Oakland

Page:13 of 60

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-00695	Ehman Building	Remain
BLD-00696	North Wing	Remain
BLD-00698	East Wing	Retrofit
BLD-00699	Original West Wing	Retrofit
BLD-00700	West Service Wing - Building 1	Retrofit
BLD-00701	Physio-Therapy Building	Remain
BLD-00702	Original Emergency Wing	Remain
BLD-00703	Special Procedures Addition	Remain
BLD-00704	Emergency Department Expansion	Remain
BLD-00705	Cogeneration Building	Remain
BLD-00706	Emergency Generator Building	Remain
BLD-00707	Transformer Building	Remain
BLD-03431	South Wing - Phase 2	Remain
BLD-03433	West Service Wing - Building 2	Retrofit
BLD-05300	Patient Care Pavilion	Remain
	η	R

Report Year: 2016	δ 11322 Alta Ba	ates Summit Med	ical Center		Oakland		Page:14 of 60	
List ALL proposed new buildings to be constructed at this or another site.								
Building Number	Building Name			New Site				
N_1	Patient Care Pavilion							
OSHPD FDD SB499 Rep	port Data Last	t Update: 08/26/	/2016 Sub	mission Date	e: 08/26/2016	Printed: 10/6/20	16 1:36 PM	

Report Year:	2016	11322	Alta Bates Summit Medical Center	Oakland	Page:15 of 60			
No data reported	o data reported for Section 130061 (c)(2)(A), (B), or (C)							

Report Year:	2016	11322	Alta Bates Summit Medica	I Center	Oakland	Page:16 of 60
lo data reporte	ed for Sectio	n 130061(c	e)(2)(D).			

Report Year:	2016	11322	Alta Bates Summit Medical C	enter	Oakland	Page:17 of 60
lo data reporte	ed for Sectio	n 130061(c	e)(2)(D).			

Report Year:	2016	11322	Alta Bates Summit	Medical Center		Oakland		Page:18 of 60
No data reported	l for wheth	er the gener	al acute care service	es and beds will be s with a Building Re	relocated to a	new, existing or re ebuild" or "Replac	etrofitted building a e" per Section 130	and any 0061(c)(2)(E).

Report Year:	2016	11322	Alta Bates Summit Medical Center	Oakland	Page:19 of 60
No data reported	d for Sectio	n 130061(c)(3).		

Report Year: 2016	6 11322 Alta Ba	ates Summit Medical Center	Oakland		Page:20 of 60		
Report any general a per Section 130061(Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per Section 130061(c)(4)						
Building Number: BLD-00698 Building Name: East Wing							
Type of Service	Provided						
		Surgical	Obstetrical Cesarean/Deliv	Rehabi Therap			
X	Nursing	Anesthesia	_		Die kurzie		
	IntensiveCare		Obstetrical Recovery	Renal [JiaiySiS		
	Pediatric/Adol escent	X Clinical Lab	Newborn/	X Outpati Surger			
	Psychiatric Nursing	Radiological/ Imaging	WellBaby				
	0	Pharmaceutical	Emergency	Central	Plant		
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	Suppor Service	t Is		
	Intermediate Care	Administration					
	Skilled Nursing						
OSHPD FDD SB499 Report Data Last Update: 08/26/2016 Submission Date: 08/26/2016 Printed: 10/6/2016 1:36 PM							

Report Year: 20	16 11322 Alta B	ates Summit Medical Center	Oakland		Page:21 of 60		
	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-00699 Buildin	g Name: Original West Wing					
Type of Servic	e Provided						
		Surgical	Obstetrical Cesarean/Deliv	Rehabi Therap			
	Nursing	Anesthesia	_				
	IntensiveCare		Obstetrical Recovery	Renal I	Jialysis		
	Pediatric/Adol escent	Clinical Lab	Newborn/	Outpati Surgery	ent ⁄		
	Psychiatric Nursing	Radiological/ Imaging	WellBaby				
	INUISIIIG	Pharmaceutical	Emergency	X Central	Plant		
	Obstetrical Ante/Postprtum	X Dietetic	Nuclear Medicine	X Suppor Service	t ¦S		
	Intermediate Care	Administration					
	Skilled Nursing						
OSHPD FDD SB499 R	eport Data Las	t Update: 08/26/2016 Subm	nission Date: 08/26/2016	Printed: 10/6/2	 2016 1:36 PM		

Report Year: 201	16 11322 Alta B	ates Summit Medical Center	Oaklan	d	Page:22 of 60		
	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-00700 Buildin	g Name: West Service Wing - B	uilding 1				
Type of Service	e Provided						
		Surgical	Obstetrica Cesarear		ilitation		
	Nursing		Cocarda	12011			
	IntensiveCare	Anesthesia	Obstetrica Recovery		Dialysis		
	Pediatric/Adol escent	Clinical Lab		Outpat			
	Psychiatric	Radiological/ Imaging	Newborn/ WellBaby		у		
	Nursing	Pharmaceutical	Emergen	cy X Centra	I Plant		
	Obstetrical Ante/Postprtum	X Dietetic	Nuclear Medicine	X Suppo Service			
	Intermediate Care	Administration					
	Skilled Nursing						
OSHPD FDD SB499 R	eport Data Las	t Update: 08/26/2016 Sub	mission Date: 08/26	6/2016 Printed: 10/6/	2016 1:36 PM		

Report Year: 201	16 11322 Alta B	ates Summit Medical Center	Oakland		Page:23 of 60
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-03433 Buildin	g Name: West Service Wing - B	uilding 2		
Type of Service	e Provided				
		Surgical	Obstetrical Cesarean/Deliv	Rehabil Therapy	
	Nursing				
	IntensiveCare	Anesthesia	Obstetrical Recovery	Renal D	Dialysis
	Pediatric/Adol escent	Clinical Lab			
		Radiological/ Imaging	Newborn/ WellBaby	Surgery	
	Psychiatric Nursing	Pharmaceutical	Emergency	Central	Plant
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	X Support Service	
	Intermediate Care	Administration			
	Skilled Nursing				
OSHPD FDD SB499 R	eport Data Las	t Update: 08/26/2016 Sub	omission Date: 08/26/2016	Printed: 10/6/2	016 1:36 PM

Report Year: 2016	11322	Alta Bates Sun	nmit Medical Center		Oakland		Page:24 of 60			
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-00695 Building Name: Ehman Building Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.										
Type of Service Pro			Rebuild) with new SPC							
Nursin	g		Surgical		Obstetrical Cesarean/Deliv		ehabilitation herapy			
Intensi	veCare		Anesthesia		Obstetrical Recovery	Re	enal Dialysis			
Pediat escent	ric/Adol	X	Clinical Lab		Recovery					
Psychi Nursin			Radiological/ Imaging		Newborn/ WellBaby		utpatient Irgery			
Obstet Ante/P	rical ostprtum		Pharmaceutical		Emergency	Ce	entral Plant			
Interm Care	ediate		Dietetic		Nuclear Medicine		upport			
	Nursing		Administration				upport ervices			
OSHPD FDD SB499 Repo	rt Da	ta Last Update:	08/26/2016	Submissio	on Date: 08/26/2016	Printed: 10	/6/2016 1:36 PM			

Report Year: 20)16 11322 /	Alta Bates Su	ummit Medical Center		Oakland		Page:25 of 60)			
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-00696 Building Name: North Wing											
Configuration:	nfiguration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.										
Type of Service	Type of Service Provided										
X Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
Inte	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis				
	ediatric/Adol cent		Clinical Lab								
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
	ostetrical ite/Postprtum		Pharmaceutical	X	Emergency		Central Plant				
	ermediate		Dietetic								
Ca	illed Nursing		Administration		Nuclear Medicine		Support Services				
OSHPD FDD SB499 F	Report Da	ata Last Updat	e: 08/26/2016	Submiss	ion Date: 08/26/2016	Printed:	10/6/2016 1:36 PM				

Report Year: 20	016 11322	Alta Bates Su	ummit Medical Center		Oakland		Page:26 of 60				
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:	Building Number: BLD-00698 Building Name: East Wing										
Configuration:	on: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.										
Type of Service	Provided										
X Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
Int	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis				
	ediatric/Adol cent	X	Clinical Lab		Recovery						
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby	Х	Outpatient Surgery				
	ostetrical ite/Postprtum		Pharmaceutical		Emergency		Central Plant				
	ermediate		Dietetic		Lineigeney						
Ca	are illed Nursing		Administration		Nuclear Medicine		Support Services				
OSHPD FDD SB499 F	Report Da	ata Last Updat	e: 08/26/2016	Submiss	ion Date: 08/26/2016	Printed:	10/6/2016 1:36 PM				

Report Year: 20	16 11322 /	Alta Bates Su	Immit Medical Center		Oakland		Page:27 of 60			
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-00699	Building Na	me: Original West Wing	g						
Configuration:	Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.									
Type of Service	Provided									
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	diatric/Adol cent		Clinical Lab		Recovery					
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	ostetrical te/Postprtum		Pharmaceutical		Emergency	X	Central Plant			
Inte Ca	ermediate re	X	Dietetic		Nuclear Medicine	x	Support			
	illed Nursing		Administration				Services			
OSHPD FDD SB499 R	Report Da	ata Last Updat	e: 08/26/2016	Submiss	ion Date: 08/26/2016	Printed:	10/6/2016 1:36 PM			

Report Year: 20	16 11322 /	Alta Bates Su	Immit Medical Center		Oakland		Page:28 of 60			
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-00700	Building Na	me: West Service Wing	g - Buildi	ng 1					
Configuration:	Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.									
Type of Service	Provided									
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	diatric/Adol cent		Clinical Lab		Recovery					
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	stetrical te/Postprtum		Pharmaceutical		Emergency	X	Central Plant			
	ermediate	X	Dietetic							
	illed Nursing		Administration		Nuclear Medicine	X	Support Services			
OSHPD FDD SB499 R	Report Da	ata Last Updat	e: 08/26/2016	Submiss	ion Date: 08/26/2016	Printed:	10/6/2016 1:36 PM			

Report Year: 201	16 11322 <i>/</i>	Alta Bates Su	Immit Medical Center		Oakland		Page:29 of 60			
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-00701	Building Na	me: Physio-Therapy Bu	uilding						
Configuration:	Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.									
Type of Service I	Provided									
Nur	sing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Inte	nsiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
Ped	liatric/Adol ent		Clinical Lab		Recovery					
	chiatric sing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	stetrical e/Postprtum		Pharmaceutical		Emergency		Central Plant			
Inte Car	rmediate		Dietetic							
	e led Nursing		Administration		Nuclear Medicine	X	Support Services			
OSHPD FDD SB499 Re	eport Da	ta Last Updat	e: 08/26/2016	Submiss	ion Date: 08/26/2016	Printed:	10/6/2016 1:36 PM			

Report Year: 201	16 11322 /	Alta Bates Su	Immit Medical Center		Oakland		Page:30 of 60			
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-00702	Building Na	me: Original Emergenc	y Wing						
Configuration:	Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.									
Type of Service	Provided									
Nur	sing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Inte	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
Pec esc	diatric/Adol ent		Clinical Lab		Recovery					
	rchiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	stetrical e/Postprtum		Pharmaceutical	X	Emergency		Central Plant			
Inte Car	ermediate		Dietetic							
	led Nursing		Administration		Nuclear Medicine		Support Services			
OSHPD FDD SB499 Re	eport Da	ata Last Updat	e: 08/26/2016	Submiss	ion Date: 08/26/2016	Printed:	10/6/2016 1:36 PM			

Report Year: 20)16 11322	Alta Bates Su	Immit Medical Center		Oakland		Page:31 of 60			
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-00703	Building Na	me: Special Procedure	s Additio	on					
Configuration:	Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.									
Type of Service	Provided									
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	ediatric/Adol cent		Clinical Lab		Recovery					
	sychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	ostetrical nte/Postprtum		Pharmaceutical	X	Emergency		Central Plant			
Inte Ca	ermediate are		Dietetic		Nuclear Medicine		Support			
Sk	illed Nursing		Administration				Services			
OSHPD FDD SB499 F	Report Da	ata Last Updat	e: 08/26/2016	Submiss	ion Date: 08/26/2016	Printed:	10/6/2016 1:36 PM			

Report Year: 2016 11322	Alta Bates Summit Medical Center		Oakland		Page:32 of 60					
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-00704 Building Name: Emergency Department Expansion										
Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.										
Type of Service Provided										
Nursing	Surgical		etrical irean/Deliv		Rehabilitation Therapy					
IntensiveCare	Anesthesia	Obst Reco	etrical		Renal Dialysis					
Pediatric/Adol escent	Clinical Lab	Rece	wery							
Psychiatric Nursing	Radiological/ Imaging	News Well			Outpatient Surgery					
Obstetrical Ante/Postprtum	Pharmaceutical	X Eme	rgency		Central Plant					
Intermediate Care	Dietetic		ear Medicine		Support					
Skilled Nursing	Administration				Services					
OSHPD FDD SB499 Report	Data Last Update: 08/26/2016	Submission Dat	e: 08/26/2016	Printed: 7	10/6/2016 1:36 PM					

Report Year: 20)16 11322 <i>A</i>	Alta Bates Su	Immit Medical Center		Oakland		Page:33 o	f 60		
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-00705 Building Name: Cogeneration Building										
Configuration:	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			
	diatric/Adol cent		Clinical Lab							
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	ostetrical te/Postprtum		Pharmaceutical		Emergency	X	Central Plant			
Inte Ca	ermediate Ire		Dietetic		Nuclear Medicine		Support			
	illed Nursing		Administration				Services			
OSHPD FDD SB499 R	Report Da	ta Last Updat	e: 08/26/2016	Submiss	on Date: 08/26/2016	Printed:	10/6/2016 1:36 PM			

Report Year: 20)16 11322 /	Alta Bates Su	Immit Medical Center		Oakland		Page:34 of 60			
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-00706 Building Name: Emergency Generator Building										
Configuration:	Retrofit Conforming building to NPC 4 or NPC 5									
Type of Service	e Provided									
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Int	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	ediatric/Adol cent		Clinical Lab		Recovery					
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	ostetrical hte/Postprtum		Pharmaceutical		Emergency	X	Central Plant			
Int Ca	ermediate are		Dietetic		Nuclear Medicine		Support			
Sk	tilled Nursing		Administration				Services			
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Report Year: 201	16 11322 /	Alta Bates Summit Medical Center			Oakland	Oakland					
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-00707 Building Name: Transformer Building											
Configuration:	Rebuild (Per SB90) Definition fo	or Rebuild) with new SPC	C5 and N	IPC4 or NPC5 building.						
Type of Service	Provided										
Nur	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
Inte	ensiveCare		Anesthesia Obstetrical	Obstetrical Recovery		Renal Dialysis					
Pec esc	diatric/Adol cent		Clinical Lab		Recovery						
	vchiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
	stetrical e/Postprtum		Pharmaceutical		Emergency	X	Central Plant				
Inte Car	ermediate		Dietetic		Nuclear Medicine		Support Services				
	lled Nursing		Administration								
OSHPD FDD SB499 Re	eport Da	ta Last Updat	e: 08/26/2016	Submiss	ion Date: 08/26/2016	Printed:	10/6/2016 1:36 PM				

Report Year: 2016 1	1322 Alta Bates S	Alta Bates Summit Medical Center			Oakland						
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-03431 Building Name: South Wing - Phase 2											
Configuration: Retrofit Conforming building to NPC 4 or NPC 5											
Type of Service Provide	ed										
Nursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy					
IntensiveCa	are X	Anesthesia		Obstetrical Recovery		Renal Dialysis	Dialysis				
Pediatric/Au escent	dol	Clinical Lab		Recovery							
Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery					
Obstetrical Ante/Postp	rtum	Pharmaceutical		Emergency	X	Central Plant					
Intermediat Care	ie 🗌	Dietetic		Nuclear Medicine		Support					
Skilled Nur	sing	Administration				Services					
OSHPD FDD SB499 Report	Data Last Upda	nte: 08/26/2016	Submisei	on Date: 08/26/2016	Printed	10/6/2016 1:36 PM					
USHPD FDD SB499 Report	Data Last Upda	ate: 08/26/2016	Submissi	on Date: 08/26/2016	Printed:	10/6/2016 1:36 PM					

Report Year: 20	11322	Alta Bates Su	ummit Medical Center		Oakland	Oakland				
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-03433 Building Name: West Service Wing - Building 2										
Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.										
Type of Service	Provided									
Nu	Irsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Inte	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		Dietetic							
	illed Nursing		Administration		Nuclear Medicine	X	Support Services			
OSHPD FDD SB499 R	Report Da	ata Last Updat	e: 08/26/2016	Submiss	ion Date: 08/26/2016	Printed:	10/6/2016 1:36 PM			

Report Year: 2016	Alta Bates St	ummit Medical Center		Oakland	Oakland					
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-0	5300 Building Na	me: Patient Care Pavili	on							
Configuration: Retrofit Conforming building to NPC 4 or NPC 5										
Type of Service Provid	led									
X Nursing		Surgical		Dbstetrical Cesarean/Deliv	X Reh The	abilitation rapy				
IntensiveC	Care	Anesthesia		Destetrical Recovery	Ren	al Dialysis				
Pediatric/A escent	Adol	Clinical Lab								
Psychiatric Nursing	c 🗌	Radiological/ Imaging		lewborn/ VellBaby	Outr Surç	patient gery				
Obstetrica Ante/Postp		Pharmaceutical	Пе	mergency	Cen	tral Plant				
	ate	Dietetic								
Care Skilled Nu	rsing	Administration		luclear Medicine		oport vices				
OSHPD FDD SB499 Report	Data Last Updat	e: 08/26/2016	Submission	Date: 08/26/2016	Printed: 10/6/	2016 1:36 PM				

Report Year: 2016	11322 Alta Bates Sun	nmit Medical Center	Oakland	Page:39 of 60					
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-4, AD and SPC-5 per Section 130061(e)									
Building Number: BLD-00695 Building Name: Ehman Building									
Type of Service Provided									
Nursing	Inpatient 0 Beds	Surgical	Obstetrical Cesarean/Deliv	X Rehabilitation Therapy					
IntensiveCare	Inpatient 0 Beds	Anesthesia	_						
Pediatric/Adol escent	Inpatient 0 Beds	X Clinical Lab	Obstetrical Recovery	Renal Dialysis					
Psychiatric Nursing	Inpatient 0 Beds	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery					
Obstetrical Ante/Postprtum	Inpatient 0 Beds	Pharmaceutical	Emergency	Central Plant					
Intermediate	Inpatient 0 Beds	Dietetic	X Nuclear Medicine	Support Services					
Skilled Nursing	Inpatient 0 Beds	Administration							
Total Beds this Building	0								
OSHPD FDD SB499 Report	Data Last Update:	08/26/2016 Submission	Date: 08/26/2016 Prin	nted: 10/6/2016 1:36 PM					

Report Year: 2016	11322	Alta Bates Sumr	nit Medical Center	Oakland	Page:40 of 60					
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: BLD-00696 Building Name: North Wing										
Type of Service Provided										
X Nursing	Inpatient Beds	54	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy					
IntensiveCare	Inpatient Beds	0	Anesthesia	_						
Pediatric/Adol	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	X Renal Dialysis					
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery					
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutic	al X Emergency	Central Plant					
Intermediate	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services					
Skilled Nursing	Inpatient Beds	0	Administration							
Total Beds this Building		54								
OSHPD FDD SB499 Report	C	Data Last Update:	08/26/2016 Subm	ission Date: 08/26/2016	Printed: 10/6/2016 1:36 PM					

Report Year:	2016 11322	Alta Bates Summ	it Medical Center	Oakland	Page:41 of 60				
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: BLD-00701 Building Name: Physio-Therapy Building									
Type of Serv	ice Provided								
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy				
Intensive	eCare Inpatient Beds	0	Anesthesia						
Pediatric escent	c/Adol Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis				
Psychia Nursing		0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery				
Obstetrio Ante/Po		0	Pharmaceutical	Emergency	Central Plant				
Intermed Care	diate Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services				
Skilled N	Nursing Inpatient Beds	0	Administration						
Total Be Building		0							
OSHPD FDD SB499	9 Report D	Data Last Update:	08/26/2016 Submission	n Date: 08/26/2016 Pi	inted: 10/6/2016 1:36 PM				

Report Year:	2016	11322	Alta Bates Sumr	mit Medical (Center	Oakland		Page:42 of 60	
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: BLD-00702 Building Name: Original Emergency Wing									
Type of Service Provided									
Nurs	ing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy	
Inten	siveCare	Inpatient Beds	0		Anesthesia				
Pedia esce	atric/Adol nt	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re	nal Dialysis	
Psyc	hiatric ing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		tpatient rgery	
	etrical /Postprtum	Inpatient Beds	0		Pharmaceutical	X Emergency	Ce	ntral Plant	
Intern Care	mediate	Inpatient Beds	0		Dietetic	Nuclear Medicine		pport rvices	
Skille	ed Nursing	Inpatient Beds	0		Administration				
Total Build	Beds this ing		0						
OSHPD FDD SE	3499 Report	Da	ata Last Update:	08/26/2016	S Submission Da	te: 08/26/2016 Prir	nted: 10/6/2	2016 1:36 PM	

Report Year: 201	11322	Alta Bates Summ	it Medical Center	Oakland	Page:43 of 60					
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: BLD-00703 Building Name: Special Procedures Addition										
Type of Service Provided										
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy					
IntensiveCa	are Inpatient Beds	0	Anesthesia							
Pediatric/A	dol Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis					
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery					
Obstetrical Ante/Postp	Inpatient rtum Beds	0	Pharmaceutical	X Emergency	Central Plant					
Intermediat	e Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services					
Skilled Nurs	sing Inpatient Beds	0	Administration							
Total Beds Building	this	0								
OSHPD FDD SB499 Re	eport Da	ata Last Update:	08/26/2016 Submissio	n Date: 08/26/2016 Pr	inted: 10/6/2016 1:36 PM					

Report Year: 2016	11322	Alta Bates Sumn	nit Medical Center	Oakland	Page:44 of 60				
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: BLD-00704 Building Name: Emergency Department Expansion									
Type of Service Provided									
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	Pharmaceutic	al X Emergency	Central Plant				
Intermediate	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services				
Skilled Nursing	Inpatient Beds	0	Administratio	n					
Total Beds this Building		0							
OSHPD FDD SB499 Report	Da	ata Last Update:	08/26/2016 Subr	nission Date: 08/26/2016	Printed: 10/6/2016 1:36 PM				

Report Year: 2016	11322	Alta Bates Summ	it Medical Center	Oakland	Page:45 of 60				
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: BLD-00705 Building Name: Cogeneration Building									
Type of Service Prov	vided								
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	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	Pharmaceutical	Emergency	X Central Plant				
Intermediate	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services				
Skilled Nursing	Inpatient Beds	0	Administration						
Total Beds this Building		0							
OSHPD FDD SB499 Report	D	vata Last Update:	08/26/2016 Submission	n Date: 08/26/2016 Pr					

Report Ye	ear: 2016	11322 A	Ita Bates Summ	nit Medical (Center	Oakland		Page:46 of 60		
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: BLD-00706 Building Name: Emergency Generator Building										
Type of Service Provided										
	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 Re	nal Dialysis		
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		itpatient rgery		
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	X Ce	entral Plant		
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Su Su	pport rvices		
	Skilled Nursing	Inpatient Beds	0		Administration					
	Total Beds this Building		0							
OSHPD FI	DD SB499 Report	Dat	a Last Update:	08/26/2016	S Submission	Date: 08/26/2016 Pr	inted: 10/6/2	2016 1:36 PM		

Report Year: 2016	11322	Alta Bates Summ	it Medical Center	Oakland	Page:47 of 60				
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: BLD-00707 Building Name: Transformer Building									
Type of Service Pro	vided								
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy				
IntensiveCare	Inpatient Beds	0	Anesthesia						
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis				
Psychiatric	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery				
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	X 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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OSHPD FDD SB499 Report	C	Data Last Update:	08/26/2016 Submission	n Date: 08/26/2016 Pr	rinted: 10/6/2016 1:36 PM				

Report Year: 2016	11322	Alta Bates Sumr	mit Medical (Center	Oakland	Oakland			
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: BLD-03431 Building Name: South Wing - Phase 2									
Type of Service Pro	vided								
X Nursing	Inpatient Beds	35	X	Surgical	Obstetrical Cesarean/Deliv		habilitation erapy		
X IntensiveCare	Inpatient Beds	36	X	Anesthesia					
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re	nal Dialysis		
Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby		tpatient rgery		
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	X Ce	ntral Plant		
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	Su Su Se	pport rvices		
Skilled Nursing	Inpatient Beds	0	X	Administration					
Total Beds this Building		71							
OSHPD FDD SB499 Report	D	ata Last Update:	08/26/2016	S Submission	Date: 08/26/2016	Printed: 10/6/2	2016 1:36 PM		

Report Year: 2016	11322	Alta Bates Sum	mit Medical Ce	nter	Oakland		Page:49 of 60
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: BL	Building Number: BLD-05300 Building Name: Patient Care Pavilion						
Type of Service Pro	vided						
X Nursing	Inpatient Beds	238	s s	Surgical	Obstetrical Cesarean/Deliv		nabilitation erapy
IntensiveCare	Inpatient Beds	0	A	nesthesia			
Pediatric/Adol escent	Inpatient Beds	0		linical Lab	Obstetrical Recovery	Rei	nal Dialysis
Psychiatric	Inpatient Beds	0		adiological/ naging	Newborn/ WellBaby		patient gery
Obstetrical Ante/Postprtum	Inpatient Beds	0	P	harmaceutical	Emergency	Cer	ntral Plant
Intermediate	Inpatient Beds	0		ietetic	Nuclear Medicine		oport vices
Skilled Nursing	Inpatient Beds	0	A	dministration			
Total Beds this Building		238					
OSHPD FDD SB499 Report	[Data Last Update:	08/26/2016	Submission I	Date: 08/26/2016 P	rinted: 10/6/2	016 1:36 PM

Report Year: 2016 11322 Alta Base	ates Summit Medical Center	Oakland	Page:50 of 60	
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, AD and SPC-5 per Section 130061(e)				
Building Number: BLD-00695 Building Number: BLD-00695	uilding Name: Ehman Building			
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 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	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		Beds this ling Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv	0	
OSHPD FDD SB499 Report Data Las	t Update: 08/26/2016 Submission Date:	: 08/26/2016 Printed: 10/6/2	2016 1:36 PM	

Report Year: 2016 11322 Alta Bat	es Summit Medical Center	Oakland Page:51 d	of 60		
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-4D and SPC-5 per Section 130061(e)					
Building Number: BLD-00696 Building	Iding Name: North Wing				
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 54 Inpatient 8522 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days			
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days			
Pediatric	Intensive Care Newborn Nursery	Intermediate Care			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days			
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days			
Coronary Care	Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding Per			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 54 54			
OSHPD FDD SB499 Report Data Last	Update: 08/26/2016 Submission Date:	08/26/2016 Printed: 10/6/2016 1:36 PM			

Report Year: 2016 11322 Alta	Bates Summit Medical Center	Oakland Page:5	2 of 60		
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-4D and SPC-5 per Section 130061(e)					
Building Number: BLD-00701	Building Name: Physio-Therapy Building]		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 0 Inpatient 0 Bed Days	Bed 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days			
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing			
Inpatient 0 Inpatient 0 Bed Days	Bed 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days			
Pediatric	Intensive Care Newborn Nursery	Intermediate Care			
Inpatient 0 Inpatient 0 Bed Days	Bed 0 Inpatient 0 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 thi Building Per Building Per	S		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service)		
OSHPD FDD SB499 Report Data L	ast Update: 08/26/2016 Submission Date	e: 08/26/2016 Printed: 10/6/2016 1:36 F	PM		

Report Year: 2016 11322 Alta Bat	es Summit Medical Center	Oakland	Page:53 of 60	
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-4D and SPC-5 per Section 130061(e)				
Building Number: BLD-00702 Bui	Iding Name: Original Emergency Wing			
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 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	Building Per Build	Beds this ing Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Servi	0	
OSHPD FDD SB499 Report Data Last	Update: 08/26/2016 Submission Date:	: 08/26/2016 Printed: 10/6/2	016 1:36 PM	

Report Year: 2016 11322 Alta B	ates Summit Medical Center	Oakland Page:54 of 60		
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-4D and SPC-5 per Section 130061(e)				
Building Number: BLD-00703 B	uilding Name: Special Procedures Additio	ท		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days 0		
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days		
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 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: 08/26/2016 Submission Date:	: 08/26/2016 Printed: 10/6/2016 1:36 PM		

Report Year: 2016	11322 Alta Bates	Summit Medical Center	Oakland	Page:55 of 60
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-4D and SPC-5 per Section 130061(e)				
Building Number: BLD	-00704 Buildir	ng Name: Emergency Department Ex	pansion	
Medical / Surgical (Includ	le GYN)	Acute Respiratory Care	Acute Psychiatric	
	ays	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	it 0
Perinatal (Exclude Newbo	orn / GYN)	Burn	Skilled Nursing	
	npatient 0 lays	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	it 0
Pediatric		Intensive Care Newborn Nursery	Intermediate Care	
	ays	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t
Intensive Care		Rehabilitation Center	Int. Care / Developmentally Disabled	
	npatient 0 Pays	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t O
Coronary Care		Chemical Dependency	Building Per Build	l Beds this ling Per
	ays	Inpatient 0 Inpatient 0 Bed Days 0	Unit Servi	0
OSHPD FDD SB499 Report	Data Last Upd	ate: 08/26/2016 Submission Date	: 08/26/2016 Printed: 10/6/2	 2016 1:36 PM

Report Year: 2016 11322 Alta Ba	tes Summit Medical Center	Oakland Page:56 of 60		
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-4D and SPC-5 per Section 130061(e)				
Building Number: BLD-00705 Bu	ilding Name: Cogeneration Building			
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 Last	Update: 08/26/2016 Submission Date:	08/26/2016 Printed: 10/6/2016 1:36 PM		

Report Year: 2016 11322 Alta Bat	es Summit Medical Center	Oakland Page:57 of 6	60	
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-4D and SPC-5 per Section 130061(e)				
Building Number: BLD-00706 Bui	Iding Name: Emergency Generator Buil	ding	-	
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 Inpatient 0 Bed Days		
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days		
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days		
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0		
OSHPD FDD SB499 Report Data Last	Update: 08/26/2016 Submission Date	: 08/26/2016 Printed: 10/6/2016 1:36 PM		

Report Year: 2016 11322 Alta Ba	tes Summit Medical Center	Oakland Page:58 of 60		
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-4D and SPC-5 per Section 130061(e)				
Building Number: BLD-00707 Bu	ilding Name: Transformer Building			
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days 0		
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 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 0 Bed Days		
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days		
Coronary Care	Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding Per		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0		
OSHPD FDD SB499 Report Data Last	Update: 08/26/2016 Submission Date:	: 08/26/2016 Printed: 10/6/2016 1:36 PM		

Report Year: 2016 11322 Alta Bate	es Summit Medical Center	Dakland Page:59 of 60			
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-4D and SPC-5 per Section 130061(e)					
Building Number: BLD-03431 Build	ding Name: South Wing - Phase 2				
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 35 Inpatient 5524 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 30 Inpatient 5219 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 6 Inpatient 1268 Bed Days	Inpatient 0 Inpatient 0 Bed Days	UnitService7171			
OSHPD FDD SB499 Report Data Last U	pdate: 08/26/2016 Submission Date:	08/26/2016 Printed: 10/6/2016 1:36 PM			

Report Year: 2016 11322 Alta Bate	s Summit Medical Center	Dakland Pag	e:60 of 60		
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-4D and SPC-5 per Section 130061(e)					
Building Number: BLD-05300 Build	ding Name: Patient Care Pavilion				
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 180 Inpatient 28407 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 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 58 Inpatient 16013 Bed Days	Inpatient 0 Inpatient Bed Days	0		
Coronary Care	Chemical Dependency	Total Beds this Total Beds Building Per Building Pe			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service	238		
OSHPD FDD SB499 Report Data Last U	pdate: 08/26/2016 Submission Date:	08/26/2016 Printed: 10/6/2016 1:	36 PM		