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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:	10184		
Facility Name:	St. Jose	eph Hospital	
Address:	2700 D	olbeer St	
City:	Eureka		
Hospital Owner/Lice	ensee:	St. Joseph Hospital / St. Joseph Health System]
Year of Reporting:		2017	
Contact 1 e-mail Address:		[Confidential data left blank intentionally.]	
Contact 2 e-mail Address:		[Confidential data left blank intentionally.]	
Contact 3 e-mail Address::		[Confidential data left blank intentionally.]	
Name of Sub	mitter:	Bill Eveloff]
Submission Date:		10/16/2017 10:02:56 AM	

Report Y	ear: 2017 10184	St. Joseph Hospital		Eureka		Page:2 of 45
ebuild, re 30060 o	etrofit or replace the buildin r 130061.5,for rebuild, retr	re planned for rebuild, retrofit or rep ng to SPC2, SPC3, SPC4, SPC4D rofit or replacement of the building t approved per Section 130061(c)(1	or SPC5 per 130 hat the hospital o	061(c)(1)(A). The de	adline, as desc	ribed in Section
ldg. o.	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date
_D-)535	Original Hospital and Central Plant	2700 Dolbeer St	Rebuild	SPC5	01/01/2020	01/01/2020

Facility Project Sub Sumber Number Num Scope		per Section 130		And the most rece Yes-Subr Projected	ent project	
Facility Project Sub		Project:	Projected	Proiected	mitted	
				Projected		
	1/24/2005			Completion Date	Status	CEQA Review
0184 HS050197-0 0 NORTHEAST BUILDING ADDITION		3/19/2008 12:00:00 AM	03/19/2008	02/08/2019	FIEL	No
SHPD FDD SB499 Report Data Last Update: 10/10/2017		ssion Date: 10/ [,]	16/2017	Printed: 10/18/20		

Report Yea	ar: 2017	10184	St. Joseph Hospital	Eureka	Page:4 of 45
Provide	the number of	inpatient be	ds and patient days per type of service pe	er building per Section 130061(c)(1)(F)	
Building	g Number: BLI	D-00535	Building Name: Or	iginal Hospital and Central Plant	
<u>Type of</u>	f Service Provi	ided			
	ursing	Inpatient Beds	0 Inpatient 0 Days		Destetrical Lecovery
Int	tensiveCare	Inpatient Beds	0 Inpatient Days 0		lewborn/ VellBaby
	ediatric/Adol scent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	mergency
	sychiatric ursing	Inpatient Beds	0 Inpatient Days 0		luclear 1edicine
	bstetrical hte/Postprtum	Inpatient Beds	0 Inpatient Days 0		ehabilitation herapy
	termediate are	Inpatient Beds	0 Inpatient Days 0		enal Dialysis
Sk	killed Nursing	Inpatient Beds	0 Inpatient Days 0	Services S	utpatient urgery
		Deus	Total Beds this 0 Building	Obstetrical Cesarean/Deliv	Central Plant
OSHPD FD	DD SB499 Report		Data Last Update: 10/10/2017 St	ubmission Date: 10/16/2017 Printe	ed: 10/18/2017 6:30 AM

Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) Building Number: BLD-00535 Building Name: Original Hospital and Central Plant
Building Number: BLD-00535 Building Name: Original Hospital and Central Plant
Medical / Surgical (Include GYN) Acute Respiratory Care Acute Psychiatric
Inpatient0Inpatient0Inpatient0Inpatient0Inpatient0Inpatient0Inpatient0BedDays </td
Perinatal (excluse Newborn / GYN) Burn Skilled Nursing
Inpatient0Inpatient0Inpatient0Inpatient0Inpatient0BedDaysDaysDaysDaysDaysDaysDays
Pediatric intensive Care Newborn Intermediate Card Nursery
Inpatient0Inpatient
Intensive Care Rehabilitation Int. Care / development Center Disabled
Inpatient0Inpatient
Coronary CareChemicalTotal Beds thisTotal Beds thisDependencyBuilding PerBuilding PerUnitService
Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 0 0 0
OSHPD FDD SB499 Report Data Last Update: 10/10/2017 Submission Date: 10/16/2017 Printed: 10/18/2017 6:30 AM

Building Number	Building Name	Building to be Removed / Replaced / Rebuilt	
BLD-00535	Original Hospital and Central Plant	Rebuild	
BLD-00536	Linear Accelerator (Phase II)	Remain	
BLD-00537	Phase III Addition Building	Remain	
BLD-00538	Emergency Entrance Vestibule	Remain	
BLD-00539	Radiation Oncology Addition	Remain	
BLD-00540	Heart Center	Remain	
BLD-00541	East Wing	Remain	
BLD-00542	Emergency Entrance Vestibule Addition	Remain	
BLD-02735	Emergency Generator #1 CMU Building	Remain	
BLD-02736	Emergency Generator #2 Enclosure Shed	Remain	
BLD-03625	Northeast Building	Remain	

Report Year: 2017	7 10184 St. Joseph Hospit	al		Eureka		Page:7 of 45
List ALL proposed ne	ew buildings to be constructed at th	is or another site.				
Building Number	Building Name		New Site			
N_1	Northeast Tower					
		10/10/2017 Sub	nion Data	. 10/16/2017	Drintod: 10/10/2	017 6:20 AM
OSHPD FDD SB499 Rep	port Data Last Update:	10/10/2017 Submi	ssion Date	e: 10/16/2017	Printed: 10/18/2	017 6:30 AM

Report Year: 2017	10184 St. Joseph Hospital		Eureka	Page:8 of 45				
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-00535 Original Hospital and Central Plant Removal Date: 01/01/2020								
Planned Uses for the build	ing to be removed from acute care service	:						
Planned use for building:	Other Jurisdi	ction:						
Other Usage:	Non-code required administrative support	and outpatient space						
Inpatient services currently	delivered in the building:							
Nursing	Surgical	Obstetrical Cesarean/De	eliv Rehabilitat Therapy	ion				
IntensiveCare	Anesthesia							
Pediatric/Adol escent	Clinical Lab	Obstetrical Recovery	Renal Dial	ysis				
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	X Outpatient Surgery					
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Pla	ant				
Intermediate Care	X Dietetic	Nuclear Medicine	X Support Services					
Skilled Nursing	X Administration							
OSHPD FDD SB499 Report	Data Last Update: 10/10/2017	Submission Date	e: 10/16/2017 Printed: 10/	18/2017 6:30 AM				

Report Year:	2017	10184	St. Joseph Hospital	Eureka	Page:9 of 45
No data reported	d for Sectio	on 130061(c	:)(2)(D).		

Report Year: 2017	10184	St. Joseph Hospital	Eureka	Page:10 of 45
No data reported for Sec	tion 130061(c)(2)(D).		

Report Year: 2017	7 10184 St. Joseph H	lospital		Eureka		Page:11 of 45
		d beds will be relocated to a a Building Resolution of "Reb				esponding
Building BL Number:	D-00535 Building Name:	Original Hospital and Centra	al Plant			
Will general acute car	re services and beds will be r	elocated to a new, Existing or	r retrofitted l	building?		
Dietetic	Relocated to other building]				
		d beds will be relocated to a a Building Resolution of "Reb				esponding
Number:	D-00535 Building Name:	Original Hospital and Centra		building?		
				building?		
Administration	Relocated to other building					
		nd beds will be relocated to a a Building Resolution of "Reb				esponding
Building BL Number:	D-00535 Building Name:	Original Hospital and Centra	al Plant			
Will general acute car	re services and beds will be r	elocated to a new, Existing or	r retrofitted l	building?		
Support Services	Relocated to other building]				
OSHPD FDD SB499 Rep	port Data Last Upda	ate: 10/10/2017 Sub	mission Date	e: 10/16/2017	Printed: 10/18/2	2017 6:30 AM

Report Year: 2017 10184 St. Joseph Hospital	Eureka	Page:12 of 45
Report whether the general acute care services and beds will be relocated to a ner building sites or project numbers for buildings with a Building Resolution of "Rebuil	w, existing or retrofitted building d" or "Replace" per Section 13	g and any corresponding 0061(c)(2)(E)
Building BLD-00535 Building Name: Original Hospital and Central F Number:	Plant	
Will general acute care services and beds will be relocated to a new, Existing or re	trofitted building?	
OutpatientSurgery Relocated to other building		

Report Year: 2017	10184	St. Joseph Hospital	Eureka	Page:13 of 45
No data reported for Section	on 130061(c	;)(3).		

er Section 130061(c)(4)	atient service that is provided in any ng Name: Original Hospital and C	general acute care hospital	building that is rate	d SPC-1							
uilding Number: BLD-00535 Buildin	ng Name: Original Hospital and C			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)							
		Central Plant									
Type of Service Provided											
	Surgical	Obstetrical Cesarean/Deliv	Rehabilit Therapy								
Nursing	Anesthesia		Renal Di	ialveie							
IntensiveCare	Clinical Lab	Obstetrical Recovery		αιγοιο							
Pediatric/Adol escent	Radiological/	Newborn/ WellBaby	X Outpatie Surgery	nt							
Psychiatric Nursing	Imaging										
_	Pharmaceutical	Emergency	Central F	Plant							
Obstetrical Ante/Postprtum	X Dietetic	Nuclear Medicine	X Support Services	i							
Intermediate Care	X Administration										
Skilled Nursing											
HPD FDD SB499 Report Data Las	st Update: 10/10/2017 Sub	omission Date: 10/16/2017	Printed: 10/18/2								

Report Year: 2017 10184	St. Joseph Hospital	Eureka		Page:15 of 45			
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-00535 Building Name: Original Hospital and Central Plant							
Configuration: N/A							
Type of Service Provided							
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehal Thera	bilitation apy			
IntensiveCare	Anesthesia	Obstetrical Recovery	Rena	l Dialysis			
Pediatric/Adol escent	Clinical Lab	receively					
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge				
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Centr	al Plant			
Intermediate Care	Dietetic	Nuclear Medicine		ort			
Skilled Nursing	Administration		Supp Servi				
OSHPD FDD SB499 Report	Data Last Update: 10/10/2017	Submission Date: 10/16/2017	Printed: 10/18/2	2017 6:30 AM			

Report Year: 20	10184	St. Joseph H	ospital		Eureka		Page:16 of 45	
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-00536 Building Name: Linear Accelerator (Phase II)								
Configuration:	N/A							
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 ite/Postprtum		Pharmaceutical		Emergency		Central Plant	
	ermediate		Dietetic					
	illed Nursing		Administration		Nuclear Medicine		Support Services	
	Poport		40/40/2047	Qub	ion Doto: 10/40/0047	Deinto	40/40/2017 0:20 AM	
Ca	illed Nursing	Data Last Updat	Administration	Submiss	Nuclear Medicine	Printed:	Support Services 10/18/2017 6:30 AM	

Report Year: 2017	10184	St. Joseph Ho	ospital		Eureka		Page:17 of 45
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: B	LD-00537	Building Nar	ne: Phase III Addition	Building			
Configuration:	I/A						
Type of Service P	rovided						
Nursi	ng		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	siveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
Pedia	atric/Adol nt		Clinical Lab		,		
Psycl Nursi	hiatric ng		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	etrical Postprtum		Pharmaceutical		Emergency		Central Plant
Interr Care	nediate		Dietetic				Quantat
	d Nursing		Administration		Nuclear Medicine		Support Services
OSHPD FDD SB499 Rep	oort r	Data Last Update	e: 10/10/2017	Submissi	on Date: 10/16/2017	Printed:	10/18/2017 6:30 AM

Report Year: 20	017 10184	St. Joseph H	ospital		Eureka		Page:18 of 45
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-00538 Building Name: Emergency Entrance Vestibule							
Configuration: N/A							
Type of Service	e Provided						
	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Int	tensiveCare		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
Int Ca	ermediate are		Dietetic		Nuclear Medicine		Support
Sk	killed Nursing		Administration				Services
OSHPD FDD SB499 F	Report	Data Last Update	e: 10/10/2017	Submiss	ion Date: 10/16/2017	Printed:	10/18/2017 6:30 AM

Report Year: 20	017 10184	St. Joseph H	ospital		Eureka		Page:19 of 45
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-00539 Building Name: Radiation Oncology Addition							
Configuration: N/A							
Type of Service	e Provided						
	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Int	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	ediatric/Adol scent		Clinical Lab				
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	bstetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant
	termediate are		Dietetic		Nuclear Medicine		Support
Sk	killed Nursing		Administration				Services
	_						
OSHPD FDD SB499 F	Report	Data Last Updat	te: 10/10/2017	Submiss	ion Date: 10/16/2017	Printed:	10/18/2017 6:30 AM

Report Year: 2017 10184	St. Joseph Hospital	Eureka		Page:20 of 45				
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-00540	Building Name: Heart Center							
Configuration: N/A								
Type of Service Provided								
Nursing	Surgical	Obstetrical Cesarean/Deliv	Reha Thera	abilitation apy				
IntensiveCare	Anesthesia	Obstetrical Recovery	Rena	al Dialysis				
Pediatric/Adol escent	Clinical Lab							
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge	atient ery				
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Centr	ral Plant				
Intermediate Care	Dietetic							
Skilled Nursing	Administration	Nuclear Medicin	ne Supp Serv					
OSHPD FDD SB499 Report	Data Last Update: 10/10/2017	Submission Date: 10/16/2	017 Printed: 10/18/	/2017 6:30 AM				

Report Year: 20	017 10184	St. Joseph Hos	pital			Eureka		Page:21 of 45
	her by retrofit or by		ospital campus showing ad the type of service th					
Building Number:	BLD-00541	Building Name	e: East Wing					
Configuration:	N/A							
Type of Service	e Provided							
	ursing	s 🗌	Surgical		Obstet Cesare	rical ean/Deliv		Rehabilitation Therapy
Int	tensiveCare	A	nesthesia		Obstet Recove			Renal Dialysis
	ediatric/Adol scent		Clinical Lab		110001			
	sychiatric ursing		Radiological/ maging		Newbo WellBa			Outpatient Surgery
	ostetrical hte/Postprtum	F	Pharmaceutical		Emerg	ency		Central Plant
	termediate are		Dietetic		Nuclea	ar Medicine		Current
	killed Nursing		Administration		INUCIER			Support Services
OSHPD FDD SB499 F	Report Da	ata Last Update:	10/10/2017	Submissio	on Date:	10/16/2017	Printed:	10/18/2017 6:30 AM

Report Year: 20	17 10184	St. Joseph H	ospital		Eureka		Page:22 of 45
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-00542 Building Name: Emergency Entrance Vestibule Addition							
Configuration: N/A							
Type of Service	Provided						
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	diatric/Adol cent		Clinical Lab				
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	stetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant
	ermediate re		Dietetic				Quantat
	illed Nursing		Administration		Nuclear Medicine		Support Services
OSHPD FDD SB499 R	leport	Data Last Updat	e: 10/10/2017	Submiss	on Date: 10/16/2017	Printed:	10/18/2017 6:30 AM

Report Year: 2017 10184	St. Joseph Hospital		Eureka	Page:23 of 45							
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-02735	Building Name: Emergency Ge	enerator #1 CMU Bu	uilding								
Configuration: N/A											
Type of Service Provided											
Nursing	Surgical	Obste Cesar	trical ean/Deliv	Rehabilitation Therapy							
IntensiveCare	Anesthesia	Obste Recov		Renal Dialysis							
Pediatric/Adol escent	Clinical Lab										
Psychiatric Nursing	Radiological/ Imaging	Newbo WellBa		Outpatient Surgery							
Obstetrical Ante/Postprtum	Pharmaceutical	Emerg	gency	Central Plant							
Intermediate Care	Dietetic										
Skilled Nursing	Administration		ar Medicine	Support Services							
OSHPD FDD SB499 Report	Data Last Update: 10/10/2017	Submission Date	: 10/16/2017 Print	ed: 10/18/2017 6:30 AM							

Report Year: 2017 10184	St. Joseph Hospital		Eureka	Page:24 of 45								
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-02736	Building Name: Emergency Ge	enerator #2 Enclosu	ure Shed									
Configuration: N/A												
Type of Service Provided												
Nursing	Surgical	Obste Cesar	etrical rean/Deliv	Reha Thera	bilitation Ipy							
IntensiveCare	Anesthesia	Obste Recov		Rena	l Dialysis							
Pediatric/Adol escent	Clinical Lab											
Psychiatric Nursing	Radiological/ Imaging	Newb WellB		Outpa Surge								
Obstetrical Ante/Postprtum	Pharmaceutical	Emerg	gency	Centr	al Plant							
Intermediate Care	Dietetic				ant							
Skilled Nursing	Administration		ar Medicine	Supp Servi								
OSHPD FDD SB499 Report	Data Last Update: 10/10/2017	Submission Date	e: 10/16/2017 P	rinted: 10/18/	2017 6:30 AM							

Report Year: 20)17 10184	St. Joseph H	ospital		Eureka	Eureka		
	her by retrofit or		hospital campus show and the type of service					
Building Number:	BLD-03625	Building Na	me: Northeast Buildin	ng				
Configuration:	N/A							
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	
OSHPD FDD SB499 F	Report	Data Last Updat	te: 10/10/2017	Submiss	ion Date: 10/16/2017	Printed:	10/18/2017 6:30 AM	

Report Year: 2017	10184 St	t. Joseph Hosp	oital		Eureka		Page:26 of 45					
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: BLI	Building Number: BLD-00536 Building Name: Linear Accelerator (Phase II)											
Type of Service Prov	<u>/ided</u>											
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		nabilitation erapy					
IntensiveCare	Inpatient Beds	0		Anesthesia								
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rer	nal Dialysis					
Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby		patient gery					
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Cer	ntral Plant					
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine		oport vices					
Skilled Nursing	Inpatient Beds	0		Administration								
Total Beds this Building		0										
OSHPD FDD SB499 Report	Data	a Last Update:	10/10/2017	7 Submission I	Date: 10/16/2017 Pr	inted: 10/18/2	2017 6:30 AM					

Report Year: 2017	10184	St. Joseph Hosp	pital		Eureka	Page:27 of 45		
Include information or 4D and SPC-5 per Se			by type of Sei	rvice provided by bu	uildi	ngs that are classified a	as SPC-:	2, SPC-3, SPC-4, SPC-
Building Number: Bl	_D-00537	Building N	Name: Phas	e III Addition Buildi	ing			
Type of Service Pro	vided							
Nursing	Inpatient Beds	0	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X IntensiveCare	Inpatient Beds	8	X A	Anesthesia				
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery		Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ maging		Newborn/ WellBaby		Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	F	Pharmaceutical		X Emergency	X	Central Plant
Intermediate	Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services
Skilled Nursing	Inpatient Beds	0	A []	Administration				
Total Beds this Building		8						
OSHPD FDD SB499 Repor	; Γι:	ata ast Indate:	10/10/2017	Submission I	Date	· 10/16/2017 Pr	inted [.] 10	0/18/2017 6:30 AM
Skilled Nursing	Inpatient Beds		D A	Administration Submission I	Date	: 10/16/2017 Pr	inted: 10	0/18/2017 6:30 AM

Report Year: 2017	10184 St	t. Joseph Hospi	tal		Eureka	Page:28 of 45							
	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-00538 Building Name: Emergency Entrance Vestibule												
Type of Service Pro	vided												
Nursing	Inpatient Beds	0	Surg	jical	Obstetrical Cesarean/Deliv		habilitation erapy						
IntensiveCare	Inpatient Beds	0	Anes	sthesia									
Pediatric/Adol escent	Inpatient Beds	0	Clinic	cal Lab	Obstetrical Recovery	Re	nal Dialysis						
Psychiatric Nursing	Inpatient Beds	0	Radi Imag	ological/ ing	Newborn/ WellBaby		tpatient rgery						
Obstetrical Ante/Postprtum	Inpatient Beds	0	Phar	maceutical	X Emergency		ntral Plant						
Intermediate	Inpatient Beds	0	L Diete	etic	Nuclear Medicine	Su Su	pport rvices						
Skilled Nursing	Inpatient Beds	0	Adm	inistration									
Total Beds this Building		0											
OSHPD FDD SB499 Report	Date	a Last Update:	10/10/2017	Submission Da	te: 10/16/2017 Pr	inted: 10/18	/2017 6:30 AM						
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Report Year: 2017	10184 St. Jos	seph Hospital			Eureka	Page:29 of 45						
	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: BLI	D-00539	Building Name:	Ra	diation Oncology Additic	on							
Type of Service Prov	<u>/ided</u>											
Nursing	Inpatient [Beds	0		Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy					
IntensiveCare	Inpatient Beds	0		Anesthesia								
Pediatric/Adol escent	Inpatient Eeds	0		Clinical Lab	Obstetrical Recovery		Renal Dialysis					
Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby		Outpatient Surgery					
Obstetrical Ante/Postprtum	Inpatient Eeds	0		Pharmaceutical	Emergency		Central Plant					
Intermediate	Inpatient [0		Dietetic	Nuclear Medicine		Support Services					
Skilled Nursing	Inpatient Eeds	0		Administration								
Total Beds this Building	0											
OSHPD FDD SB499 Report	Data Las	st Update: 10/1	10/2017	7 Submission Dat	e: 10/16/2017 Print	ed: 10/	/18/2017 6:30 AM					
		st Update: 10/1	10/2017	7 Submission Dat	e: 10/16/2017 Print	ed: 10/	/18/2017 6:30 AM					

Report Year: 2017	10184	St. Joseph Hosp	Eureka	Page:30 of 45	
Include information 4D and SPC-5 per	on the number of Section 130061(of inpatient beds e)	by type of Service provided	l by buildings that are classified	d as SPC-2, SPC-3, SPC-4, SPC-
Building Number:	BLD-00540	Building N	ame: Heart Center		
Type of Service F	Provided				
Nursing	Inpatient Beds	0	X Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCar	e Inpatient Beds	0	X Anesthesia		
Pediatric/Ad	ol Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprt	Inpatient um Beds	0	Pharmaceutica	Emergency	Central Plant
Intermediate	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursi	ng Inpatient Beds	0	Administration		
Total Beds th Building	nis	0			
OSHPD FDD SB499 Rep	port D:	ata Last Update:	10/10/2017 Submi	ssion Date: 10/16/2017	Printed: 10/18/2017 6:30 AM
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Report Y	'ear: 2017	10184	St. Joseph Hosp	Eureka		Page:31 of 45		
	de information on nd SPC-5 per <mark>Sec</mark>			by type of S	Service provided by b	uildings that are classified	as SPC-2, S	SPC-3, SPC-4, SPC-
Build	ing Number: BLI	D-00541	Building N	Name: Ea	st Wing			
Тур	e of Service Prov	<u>vided</u>						
X	Nursing	Inpatient Beds	62		Surgical	X Obstetrical Cesarean/Deliv		ehabilitation herapy
X	IntensiveCare	Inpatient Beds	5		Anesthesia			
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	X Obstetrical Recovery	R	enal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	X Newborn/ WellBaby		utpatient urgery
X	Obstetrical Ante/Postprtum	Inpatient Beds	11	X	Pharmaceutical	Emergency	X C	entral Plant
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Se Se	upport ervices
	Skilled Nursing	Inpatient Beds	0		Administration			
	Total Beds this Building		78					
	DD SB499 Report	ں	ata Last Update:	10/10/2017	7 Submission	Date: 10/16/2017 F	Printed: 10/19	3/2017 6:30 AM
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Report Year: 2017	10184	St. Joseph Hosp	ital		Eureka	Page:32 of 45						
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-00542 Building Name: Emergency Entrance Vestibule Addition												
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	<u> </u>	Renal Dialysis				
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		Dutpatient Surgery				
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical		X Emergency		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	Da	ata Last Update:	10/10/2017	7 Submission I	Date	: 10/16/2017 Pi	rinted: 10/	18/2017 6:30 AM				

Report Year: 2017	10184 S	St. Joseph Hosp	ital			Eureka	Page:33 of 45					
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 4D and SPC-5 per Section 130061(e)												
Building Number: BLD-02735 Building Name: Emergency Generator #1 CMU Building												
Type of Service Prov	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 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	Da	ta Last Update:	10/10/2017	Z Submission E	Date:	: 10/16/2017 Pr	inted: 10	/18/2017 6:30 AM				

Report Year: 2017	10184 S	St. Joseph Hosp	oital			Eureka	Page:34 of 45					
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 4D and SPC-5 per Section 130061(e)												
Building Number: BLD-02736 Building Name: Emergency Generator #2 Enclosure Shed												
Type of Service Prov	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 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	Da	ta Last Update:	10/10/2017	Z Submission	Date	: 10/16/2017 Pr	inted: 10	/18/2017 6:30 AM				

Report Year: 2017	10184	St. Joseph Hosp	pital		Eureka		Page:35 of 45
Include information on 4D and SPC-5 per Sec			by type of Se	ervice provided by I	buildings that are classifie	ed as SPC-2, S	PC-3, SPC-4, SPC-
Building Number: BL	D-03625	Building N	lame: Nor	theast Building]
Type of Service Pro	vided						
X Nursing	Inpatient Beds	40	X	Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
X IntensiveCare	Inpatient Beds	12		Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0	X	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	X Emergency	Ce	ntral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	Sul Se	oport rvices
Skilled Nursing	Inpatient Beds	0	X	Administration			
Total Beds this Building		52					
OSHPD FDD SB499 Report	D	ata Last Update:	10/10/2017	Submissior	Date: 10/16/2017	Printed: 10/18/	2017 6:30 AM

Report Year: 2017 10184 St. Josep	bh Hospital	Eureka	Page:36 of 45	
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-00536 Build	ding Name: Linear Accelerator (Phase II)		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0	
Coronary Care	Chemical Dependency	Building Per Buildi		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Servic	e 0	
OSHPD FDD SB499 Report Data Last U	pdate: 10/10/2017 Submission Date:	10/16/2017 Printed: 10/18/2	017 6:30 AM	

Report Year:201710184St. Jose	eph Hospital	Eureka Pa	ge:37 of 45	
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-00537 Bu	ilding Name: Phase III Addition Building			
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled		
Inpatient 4 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0	
Coronary Care	Chemical Dependency	Total Beds this Total Beds Building Per Building F		
Inpatient 4 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service	8	
OSHPD FDD SB499 Report Data Last	Update: 10/10/2017 Submission Date:	10/16/2017 Printed: 10/18/2017	6:30 AM	

Report Year: 2017 10184 St. Josep	h Hospital	Eureka	Page:38 of 45	
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-00538 Build	ding Name: Emergency Entrance Vestib	pule		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt O	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt O	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt O	
Coronary Care	Chemical Dependency	Building Per Build	l Beds this ding Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv	0	
OSHPD FDD SB499 Report Data Last U	pdate: 10/10/2017 Submission Date:	10/16/2017 Printed: 10/18	3/2017 6:30 AM	

Report Year: 2017 10184 St. Jos	eph Hospital	Eureka	Page:39 of 45	
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-00539 Bu	ilding Name: Radiation Oncology Additi	on		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t0	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t0	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0	
Coronary Care	Chemical Dependency	Building Per Build	Beds this ling Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Servi	0	
OSHPD FDD SB499 Report Data Last	Update: 10/10/2017 Submission Date	e: 10/16/2017 Printed: 10/18/	/2017 6:30 AM	

Report Year: 2017 10184 St. Josep	oh Hospital	Eureka	Page:40 of 45		
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-00540 Build	ding Name: Heart Center				
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	ut 0		
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	it 0		
Pediatric	Intensive Care Newborn Nursery	Intermediate Care			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0		
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0		
Coronary Care	Chemical Dependency	Building Per Build	l Beds this ding Per		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days 0	Unit Serv	0		
OSHPD FDD SB499 Report Data Last U	pdate: 10/10/2017 Submission Date:	10/16/2017 Printed: 10/18	2017 6:30 AM		

Report Year: 2017 10184 St. Josep	bh Hospital	Eureka	Page:41 of 45	
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-00541 Build	ding Name: East Wing			
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 62 Inpatient 13828 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Inpatient 11 Inpatient 1395 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient <u>0</u> Inpatien Bed Days	t 0	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 5 Inpatient 864 Bed Days	Inpatient 0 Inpatien Bed Days	t 0	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0	
Coronary Care	Chemical Dependency	Building Per Build	Beds this ing Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Servi	ce 78	
OSHPD FDD SB499 Report Data Last U	pdate: 10/10/2017 Submission Date:	10/16/2017 Printed: 10/18	/2017 6:30 AM	

Report Year: 2017 10184 St. Josep	h Hospital	Eureka	Page:42 of 45	
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-00542 Build	ling Name: Emergency Entrance Vestib	oule Addition		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt O	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt O	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	nt O	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt O	
Coronary Care	Chemical Dependency	Building Per Build	l Beds this ling Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv	0	
OSHPD FDD SB499 Report Data Last U	pdate: 10/10/2017 Submission Date:	10/16/2017 Printed: 10/18	8/2017 6:30 AM	

Report Year: 2017 10184 St. Josep	h Hospital	Eureka	Page:43 of 45		
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-02735 Build	ding Name: Emergency Generator #1	CMU Building			
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0		
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient <u>0</u> Inpatier Bed Days	nt 0		
Pediatric	Intensive Care Newborn Nursery	Intermediate Care			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0		
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt O		
Coronary Care	Chemical Dependency	Building Per Build	l Beds this ding Per		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv	0		
OSHPD FDD SB499 Report Data Last U	pdate: 10/10/2017 Submission Date	: 10/16/2017 Printed: 10/18	3/2017 6:30 AM		

Report Year: 2017 10184 St. Josep	h Hospital	Eureka	Page:44 of 45		
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-02736 Build	ding Name: Emergency Generator #2 E	Enclosure Shed			
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient <u>0</u> Inpatier Bed Days	nt 0		
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0		
Pediatric	Intensive Care Newborn Nursery	Intermediate Care			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	nt 0		
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	,		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0		
Coronary Care	Chemical Dependency	Building Per Build	l Beds this ding Per		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv	0		
OSHPD FDD SB499 Report Data Last U	pdate: 10/10/2017 Submission Date:	: 10/16/2017 Printed: 10/18	3/2017 6:30 AM		

Report Year: 2017 10184 St. J	oseph Hospital	Eureka	Page:45 of 45		
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-03625	Building Name: Northeast Building				
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 40 Inpatient 12419 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 <u>0</u> 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 12 Inpatient 3125 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0		
Coronary Care	Chemical Dependency	Building Per Build	Beds this ling Per		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv	52		
OSHPD FDD SB499 Report Data La	st Update: 10/10/2017 Submission Date	e: 10/16/2017 Printed: 10/18	/2017 6:30 AM		