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: Facility Name: Address: City:	University of California Davis Medical Center 2315 Stockton Boulevard Sacramento			
Hospital Owner/Lice		03000086 / Regents of the University of California		
Year of Rep	_	2017 [Confidential data left blank intentionally.]		
Contact 2 e-mail Ac		[Confidential data left blank intentionally.]		
Contact 3 e-mail Add		[Confidential data left blank intentionally.] Doug Austin		
Submission	n Date:	10/16/2017 10:27:05 AM		

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For buildings For buildings which are planned for rebuild, retrofit or replacement this report shall identify; Whether the hospital owner intends to rebuild, retrofit or replace the building to SPC2, SPC3, SPC4, SPC4D or SPC5 per 130061(c)(1)(A). The deadline, as described in Section 130060 or 130061.5, for rebuild, retrofit or replacement of the building that the hospital owner intends to meet, and the applicable extension for which the hospital owner has been approved per Section 130061(c)(1)(B)

Bldg. No.	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date
BLD- 01434	North/South Wing	2315 Stockton Boulevard	Replace	SPC5	01/01/2020	01/01/2020

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Retrofit/Replacement

Yes-Submitted

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).

North/South Wing

Building No: BLD-01434

					— Project:				
Facility Number	Project Number	Sub Num	Scope	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
10619	HS022883-0	0	9550900 SURGERY & EMERGENCY SERVICES PAVILION	10/29/200 2	10/4/2005 12:00:00 AM	10/04/2005		CLOS	No

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Provide the number of	f inpatient bed	ds and patient days per type of service pe	er building per Section 130061	(c)(1)(F)	
Building Number: BL	.D-01434	Building Name: No	orth/South Wing		_
Type of Service Prov	<u>/ided</u>				
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery	
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby	
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	X 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	Rehabilitati Therapy	on
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	X Administration	X Renal Dialy	vsis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services	Outpatient Surgery	
	beas	Total Beds this Building	Obstetrical Cesarean/Deliv	Central Pla	nt

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For all buildings at the facility, indicate which ones are scheduled for general acute service removal.

Building Number	Building Name	Building to be Removed / Replaced / Rebuilt
BLD-01434	North/South Wing	Replace
BLD-01436	East Wing (Tower)	Remain
BLD-01437	East Wing (Radiology)	Remain
BLD-01438	East Wing (Laundry)	Remain
BLD-01439	University Tower	Remain
BLD-01440	MRI	Remain
BLD-01443	Emergency Room Expansion	Remain
BLD-01444	Central Plant	Remain
BLD-01445	Davis Tower	Remain
BLD-02841	Surgery and Emergency Services Pavilion	Remain
BLD-05815	CT Scan Building	Remain

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

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The projector replaced or The planned replaced or	ed date or dates rebuild building d uses of the bu rebuild building	s the building v s as well. ilding or buildi s as well.	ed, rebuilt, removed vill be removed fror ngs to be removed n the building or bu	m service per Sec from acute care s	tion 130061 (c)(2 service per Section	2)(A) and provide on 130061(c)(2)(B		
Building Nu	mber: BLD-0	1434	North/Sou	ith Wing		Removal Date:	01/01/2020]
Planned Us	es for the buildi	ng to be remo	ved from acute care	e service:				
		Demolished		Jurisdiction:				
Ir P e C A	rvices currently Jursing IntensiveCare Pediatric/Adolescent Psychiatric Jursing Dbstetrical Ante/Postprtum Intermediate Care Skilled Nursing	delivered in the	Surgical Anesthesia Clinical Lab Radiological/Imaging Pharmaceutical Dietetic Administration		Obstetrical Cesarean/Deliv Obstetrical Recovery Newborn/ WellBaby Emergency Nuclear Medicine		Rehabilitation Therapy Renal Dialysis Outpatient Surgery Central Plant Support Services	

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No data reporte	d for Section	n 130061(c)	(2)(D).		

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No data reporte	ed for Section	on 130061(c))(2)(D).		

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Report whether the general acute care services and beds will be relocated to a new, ex building sites or project numbers for buildings with a Building Resolution of "Rebuild" or		responding
Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofit ClinicalLab N/A	ted building?	
Report whether the general acute care services and beds will be relocated to a new, exbuilding sites or project numbers for buildings with a Building Resolution of "Rebuild" or		responding
Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofit Administration N/A	ted building?	
Report whether the general acute care services and beds will be relocated to a new, ex building sites or project numbers for buildings with a Building Resolution of "Rebuild" or		responding
Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofit Renal Dialysis N/A	ted building?	

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No data reporte	ed for Sectio	n 130061(c))(3).		

ding Number:	BLD-01434 Buildi	ng Name: N	orth/South Wing			
Type of Service	e Provided		Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	Nursing		Anesthesia			
	IntensiveCare	X	Clinical Lab	Obstetrical Recovery	X	Renal Dialysis
	Pediatric/Adol escent		Radiological/	Newborn/ WellBaby		Outpatient Surgery
	Psychiatric Nursing		Imaging Pharmaceutical	Emergency		Central Plant
	Obstetrical Ante/Postprtum			Nuclear		Support
	late and a dieta		Dietetic	Medicine		Services
	Intermediate Care	X	Administration			
	Skilled Nursing					

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Report the final configuration of all buil requirements whether by retrofit or by per Section 130061(c)(5)	Idings on the hospital campus show replacement and the type of service	ring how each building will comply verthat will be provided in each gene	vith the SPC-5/NPC-4 or 5 ral acute care hospital building
Building Number: BLD-01434	Building Name: North/South Win	g	
Configuration: N/A			
Type of Service Provided			
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal Dialysis
Pediatric/Adol escent	Clinical Lab	Recovery	
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Plant
Intermediate	Dietetic	Lineigency	Central Flant
Care	Administration	Nuclear Medicine	Support Services
Skilled Nursing			

	ner by retrofit or by re				ach building will comply be provided in each gene	
ilding Number:	BLD-01436 E	Building Na	me: East Wing (Towe	er)		
Configuration:	N/A					
Type of Service	Provided					
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
Into	ensiveCare		Anesthesia		Obstetrical	Renal Dialysis
	diatric/Adol cent		Clinical Lab		Recovery	
	ychiatric ırsing		Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
	ostetrical te/Postprtum		Pharmaceutical		Emergency	Central Plant
	ermediate		Dietetic			Comman Tam
Ca Sk	illed Nursing		Administration		Nuclear Medicine	Support Services

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Report the final con requirements wheth per Section 130061	ner by retrofit or by repl	gs on the h acement a	nospital campus showing and the type of service the	g how ea	ach building will compl be provided in each ge	y with the SPC-5/I neral acute care h	NPC-4 or 5 ospital building
Building Number:	BLD-01437 Bu	ilding Nam	ne: East Wing (Radiolo	gy)			
Configuration:	N/A						
Type of Service	Provided						
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		nabilitation erapy
Inte	ensiveCare		Anesthesia		Obstetrical Recovery	Rei	nal Dialysis
	diatric/Adol cent		Clinical Lab		recovery		
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		tpatient gery
	estetrical		Pharmaceutical				
Ani	te/Postprtum				Emergency	Cer	ntral Plant
Inte	ermediate re		Dietetic	П	Nuclear Medicine		pport
Ski	illed Nursing		Administration	<u> </u>		— Se	rvices
	·						

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Report the final or requirements wh per Section 1300	ether by retrofit or by re	ngs on the placement	hospital campus showin and the type of service t	g how e hat will t	ach building will comply voe provided in each gene	vith the SPC-5/l ral acute care h	NPC-4 or 5 ospital building
Building Number	:: BLD-01438 E	Building Nar	me: East Wing (Laundi	-y)			
Configuration:	N/A						
Type of Servi	ice Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		nabilitation erapy
	IntensiveCare		Anesthesia		Obstetrical Recovery	Rei	nal Dialysis
	Pediatric/Adol escent		Clinical Lab		recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		patient gery
	Obstetrical Ante/Postprtum		Pharmaceutical		-		atral Diagra
	Intermediate		Dietetic		Emergency	Cei	ntral Plant
	Care				Nuclear Medicine		pport rvices
	Skilled Nursing		Administration				

ort Year: 2017 10619 L ort the final configuration of all build b		ving how each building will comply	
Section 130061(c)(5)	opiacement and the type of service	e triat will be provided in each gen	oral acate care hospital ballang
ding Number: BLD-01439	Building Name: University Towe	er	
onfiguration: N/A			
ype of Service Provided			
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal Dialysis
Pediatric/Adol escent	Clinical Lab	Recovery	
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Pharmaceutical	□ -	O A A SA PROMI
Intermediate	Dietetic	Emergency	Central Plant
Care	Administration	Nuclear Medicine	Support Services
Skilled Nursing			

Configuration: N/A					ach building will comply be provided in each gen	
Type of Service Provided Nursing Surgical Obstetrical Cesarean/Deliv Rehabilitation Therapy IntensiveCare Anesthesia Obstetrical Recovery Pediatric/Adol escent Clinical Lab Psychiatric Nursing Radiological/ Imaging Newborn/ WellBaby Outpatient Surgery Pharmaceutical Emergency Central Plant Intermediate Care Nuclear Medicine Support Services	r Section 130061(d	c)(5)				
Type of Service Provided Nursing Surgical Obstetrical Rehabilitation Therapy IntensiveCare Anesthesia Obstetrical Recovery Pediatric/Adol Recovery Pediatric/Adol Sescent Octionical Lab Psychiatric Nursing Newborn/ WellBaby Outpatient Surgery Pharmaceutical Emergency Central Plant Intermediate Care Nuclear Medicine Support Services	ilding Number:	BLD-01440 B	uilding Nar	me: MRI		
Nursing Surgical Obstetrical Rehabilitation Therapy IntensiveCare Anesthesia Obstetrical Recovery Pediatric/Adol escent Clinical Lab Psychiatric Nursing Pharmaceutical Newborn/ WellBaby Outpatient Surgery Pharmaceutical Emergency Central Plant Intermediate Care Nuclear Medicine Support Services	Configuration:	N/A				
IntensiveCare	Type of Service P	Provided				
Pediatric/Adol escent	Nurs	ing		Surgical		
Pediatric/Adol escent	Inter	nsiveCare		Anesthesia		Renal Dialysis
Psychiatric Nursing				Clinical Lab	Recovery	
Obstetrical Ante/Postprtum Intermediate Care Dietetic Nuclear Medicine Support Services						
Intermediate Care Dietetic Support Services				Pharmaceutical	-	Control Plant
Care Nuclear Medicine Support Services				Dietetic	Emergency	Central Plant
					Nuclear Medicine	
	Skille	ed Nursing		Administration		

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	r by retrofit or by repla				ding will comply with the sled in each general acute	
Building Number:	BLD-01443 Bui	Iding Name: Emer	gency Room Exp	oansion		
Configuration:	N/A					
Type of Service P	Provided					
Nurs	sing	Surgical		Obstet Cesare	rical ean/Deliv	Rehabilitation Therapy
Inter	nsiveCare	Anesthesi	a	Obstet Recove		Renal Dialysis
Pedi esce	atric/Adol ent	Clinical La	ab	1,000	51,9	
Psyc Nurs	chiatric sing	Radiologi Imaging	cal/	Newbo WellBa		Outpatient Surgery
	tetrical /Postprtum	Pharmace	eutical Г	Emerg	ency	Central Plant
	mediate	Dietetic	_			
Care Skille	ed Nursing	Administr	ation	Nuclea	r Medicine	Support Services
	ı					

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Report the final corequirements whe per Section 13006	ther by retrofit or by rep	gs on the lacement	hospital campus showin and the type of service t	g how e hat will b	ach building will comply wo be provided in each gener	vith the SPC-5/ ral acute care h	NPC-4 or 5 ospital building
Building Number:	BLD-01444 B	uilding Na	me: Central Plant				
Configuration:	N/A						
Type of Servic	e Provided						
N	lursing		Surgical		Obstetrical Cesarean/Deliv		habilitation erapy
In	ntensiveCare		Anesthesia		Obstetrical Recovery	Re	nal Dialysis
	rediatric/Adol scent		Clinical Lab		recovery		
	sychiatric lursing		Radiological/ Imaging		Newborn/ WellBaby		tpatient gery
	Obstetrical Inte/Postprtum		Pharmaceutical		Emergency		ntral Plant
	ntermediate		Dietetic		Emergency		illiai Fiant
	are				Nuclear Medicine		ipport ervices
S	killed Nursing		Administration				

Building Name: Davis Tower		
Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
Anesthesia	Obstetrical	Renal Dialysis
Clinical Lab	Recovery	
Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Pharmaceutical		Control Blant
Dietetic	Emergency	Central Plant
Administration	Nuclear Medicine	Support Services
	Anesthesia Clinical Lab Radiological/ Imaging Pharmaceutical Dietetic	Cesarean/Deliv Anesthesia Obstetrical Recovery Clinical Lab Radiological/ Newborn/ WellBaby Pharmaceutical Emergency Dietetic Nuclear Medicine

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	by retrofit or by replacen	the hospital campus showing nent and the type of service the			
Building Number: BL	D-02841 Building	g Name: Surgery and Emer	gency Services	s Pavilion	
Configuration: N/A	A				
Type of Service Pro	ovided				
Nursin	g	Surgical	Obste Cesa	etrical rean/Deliv	Rehabilitation Therapy
Intensi	veCare	Anesthesia	Obste		Renal Dialysis
Pediati escent	ric/Adol	Clinical Lab	11000	voly	
Psychi Nursin		Radiological/ Imaging	Newb WellB		Outpatient Surgery
Obstet Ante/P	rical ostprtum	Pharmaceutical	☐ Fmer	gency	Central Plant
Interme	ediate	Dietetic			
Care	Nursing	Administration	Nucle	ear Medicine	Support Services
	ı				

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Report the final configuration of all buil requirements whether by retrofit or by per Section 130061(c)(5)	dings on the hospital campus show replacement and the type of service	ring how each building will comply verthat will be provided in each gene	with the SPC-5/NPC-4 or 5 ral acute care hospital building
Building Number: BLD-05815	Building Name: CT Scan Building	9	
Configuration: N/A			
Type of Service Provided			
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal Dialysis
Pediatric/Adol escent	Clinical Lab	recovery	
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Pharmaceutical		
7 WHO T COLPITATIO	Dietetic	Emergency	Central Plant
Intermediate Care	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Administration		Gervices

Report Ye	ear: 2017	10619	University of Cali	ifornia Davi	s Medical Center		Sacramento		Page:25 of 44	
Include 4D and	e information on t d SPC-5 per Sect	the number o	of inpatient beds	by type of S	Service provided by	buildi	ngs that are classified a	ıs SPC-2,	SPC-3, SPC-4, SPC-	
Buildir	Building Number: BLD-01436 Building Name: East Wing (Tower)									
<u>Type</u>	Type of Service Provided									
X	Nursing	Inpatient Beds	125	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
X	IntensiveCare	Inpatient Beds	6	X	Anesthesia					
	Pediatric/Adol escent	Inpatient Beds	4		Clinical Lab	ſ	Obstetrical Recovery	F	Renal Dialysis	
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Gurgery	
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency		Central Plant	
	Intermediate Care	Inpatient Beds	0		Dietetic	[Nuclear Medicine	X s	Support Services	
	Skilled Nursing	Inpatient Beds	0		Administration					
	Total Beds this Building		135							

port Year: 2017	10619	University of Califo	rnia Davis Medical Center	Sacramento	Page:26 of 44
Include information on 4D and SPC-5 per Sec			type of Service provided by l	buildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-01437	Building Nar	me: East Wing (Radiology)		
Type of Service Pro	<u>vided</u>				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	X Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services
Skilled Nursing	Inpatient Beds	0	X Administration		
Total Beds this Building		0			

port Year: 2017	10619 l	Jniversity of Califo	rnia Davis Medical Center	Sacramento	Page:27 of 44
Include information on 4D and SPC-5 per Sec			type of Service provided by	/ buildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-01438	Building Nar	me: East Wing (Laundry)		
Type of Service Prov	vided				
Nursing	Inpatient Beds	0	X Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	X Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

port Year:	2017	10619	University of Cali	fornia Davi	s Medical Center		Sacramento		Page:28 of 44
	rmation on t C-5 per Sect			by type of S	Service provided by	buildir	ngs that are classified a	s SPC-2	e, SPC-3, SPC-4, SPC-
Building Nu	mber: BLD)-01439	Building N	ame: Un	iversity Tower				
Type of Se	ervice Prov	ided							
X Nurs	ing	Inpatient Beds	64		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X Inten	siveCare	Inpatient Beds	76		Anesthesia	_			
Pedia esce	atric/Adol nt	Inpatient Beds	0		Clinical Lab		X Obstetrical Recovery		Renal Dialysis
Psyc Nurs	hiatric ing	Inpatient Beds	0		Radiological/ Imaging	[X Newborn/ WellBaby		Outpatient Surgery
	etrical /Postprtum	Inpatient Beds	17		Pharmaceutical	[Emergency		Central Plant
Interi Care	mediate	Inpatient Beds	0		Dietetic	[Nuclear Medicine	X	Support Services
Skille	ed Nursing	Inpatient Beds	0		Administration				
Total Build	Beds this ling		157						

port Year: 2017	10619	University of Califo	ornia Davis Medical Center	Sacramento	Page:29 of 44
Include information o 4D and SPC-5 per S			y type of Service provided by	buildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number:	LD-01440	Building Na	me: MRI		
Type of Service Pr	ovided				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia	_	_
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtur	Inpatient n Beds	0	Pharmaceutical	Emergency	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building	6	0			

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Include information on 4D and SPC-5 per Sec			type of Service provided by	buildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-01443	Building Nar	ne: Emergency Room Exp	pansion	
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	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

port Year: 2017	10619	University of Califo	rnia Davis Medical Center	Sacramento	Page:31 of 44
Include information on 4D and SPC-5 per Sec			type of Service provided by b	ouildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-01444	Building Na	me: Central Plant		
Type of Service Pro	<u>vided</u>				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	X Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

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	le information on to d SPC-5 per Sec			by type of S	Service provided by	buildi	ngs tl	hat are classified a	s SPC-2	2, SPC-3, SPC-4, SPC-
Buildi	ng Number: BLD	D-01445	Building Na	ame: Da	vis Tower					
Туре	of Service Prov	<u>ided</u>								
X	Nursing	Inpatient Beds	179		Surgical			Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	IntensiveCare	Inpatient Beds	73		Anesthesia					
X	Pediatric/Adol escent	Inpatient Beds	36		Clinical Lab			Obstetrical Recovery		Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging		X N	Newborn/ WellBaby		Outpatient Surgery
X	Obstetrical Ante/Postprtum	Inpatient Beds	15	X	Pharmaceutical		E	Emergency		Central Plant
	Intermediate Care	Inpatient Beds	0		Dietetic			Nuclear Medicine	X	Support Services
	Skilled Nursing	Inpatient Beds	0		Administration					
	Total Beds this Building		303							

ort Year:	2017	10619	University of Califo	ornia Davi	s Medical Center		Sacramento		Page:33 of 44
	ormation on t PC-5 per Sect			y type of S	Service provided by b	ouildii	ngs that are classified a	s SPC-	2, SPC-3, SPC-4, SPC-
Building N	umber: BLD	-02841	Building Na	me: Su	rgery and Emergend	y Se	rvices Pavilion		
Type of S	Service Provi	ided							
X Nurs	sing	Inpatient Beds	12	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X Inte	nsiveCare	Inpatient Beds	20	X	Anesthesia				
Ped esce	iatric/Adol ent	Inpatient Beds	0	X	Clinical Lab		Obstetrical Recovery		Renal Dialysis
Psy Nurs	chiatric sing	Inpatient Beds	0	X	Radiological/ Imaging		Newborn/ WellBaby	X	Outpatient Surgery
	tetrical e/Postprtum	Inpatient Beds	0	X	Pharmaceutical		X Emergency		Central Plant
Inte	rmediate e	Inpatient Beds	0	X	Dietetic		Nuclear Medicine	X	Support Services
Skill	ed Nursing	Inpatient Beds	0	X	Administration				
	al Beds this ding		32						

port Year: 2017	10619	Jniversity of Califo	rnia Davis Medical Center	Sacramento	Page:34 of 44
Include information on 4D and SPC-5 per Sec			type of Service provided by b	uildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-05815	Building Nar	me: CT Scan 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	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-

4D and SPC-5 per Sect		mon soud by type of a	ini provided by ballalinge in	
Building Number: B	LD-01436	Building Name:	East Wing (Tower)	
Medical / Surgical (Inc	lude GYN)	Acute Respir	atory Care	Acute Psychiatric
Inpatient 106 Bed	Inpatient 3228 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Perinatal (Exclude New	wborn / GYN)	Burn		Skilled Nursing
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Pediatric		Intensive Car Nursery	e Newborn	Intermediate Care
Inpatient 4 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Intensive Care		Rehabilitation Center	1	Int. Care / Developmentally Disabled
Inpatient 6 Bed	Inpatient 165 Days	Inpatient Bed	19 Inpatient 5235 Days	Inpatient 0 Inpatient 0 Days
Coronary Care		Chemical Dep	pendency	Total Beds this Building Per Total Beds this Building Per
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Unit Service 135 135

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Report Year: 2017 10619 University of California Davis Medical Center Page:37 of 44 Sacramento 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) BLD-01438 East Wing (Laundry) **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Days Bed Days Bed Bed Perinatal (Exclude Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Bed Bed Days Bed Days **Intensive Care Newborn Pediatric Intermediate Care** Nursery Inpatient 0 Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care** Disabled Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 Days Bed Days Bed ol 0

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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

4D and SPC-5 per Section 130061(e)								
Building Number:	BLD-01439 Buile	ding Name:	niversity Tower					
Medical / Surgical (I	nclude GYN)	Acute Respirato	ry Care	Acute Psychiatric				
Inpatient 64 Bed	Inpatient 15644 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days				
Perinatal (Exclude N	lewborn / GYN)	Burn		Skilled Nursing				
Inpatient 17 Bed	Inpatient 1802 Days	Inpatient Bed	Days 0	Inpatient 0 Inpatient 0 Days				
Pediatric		Intensive Care N Nursery	lewborn	Intermediate Care				
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days				
Intensive Care		Rehabilitation Center		Int. Care / Developmentally Disabled				
Inpatient 68 Bed	Inpatient 15780 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days				
Coronary Care		Chemical Deper	ndency	Total Beds this Building Per Building Per Building Per				
Inpatient 8 Bed	Inpatient 2882 Days	Inpatient Bed	0 Inpatient 0 Days	Unit Service 157 157				

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Report Year: 2017 10619 University of California Davis Medical Center Page:40 of 44 Sacramento 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) BLD-01443 **Emergency Room Expansion Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Days Bed Days Bed Bed Perinatal (Exclude Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Bed Bed Days Bed Days **Intensive Care Newborn Pediatric Intermediate Care** Nursery Inpatient 0 Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care** Disabled Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 Days Bed Days Bed ol 0

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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)

4D and SPC-5 per Section	n 130061(e)	4D and SPC-5 per Section 130061(e)								
Building Number: BLD	0-01445 Buildir	ng Name: Dav	is Tower							
Medical / Surgical (Includ	de GYN)	Acute Respiratory	<i>r</i> Care	Acute Psychiatric						
	npatient 62613 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days					
Perinatal (Exclude Newb	orn / GYN)	Burn		Skilled Nursing						
	npatient 1802 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days					
Pediatric		Intensive Care Ne Nursery	wborn	Intermediate Care						
	npatient 11998 Days	Inpatient 49 Bed	Inpatient 13883 Days	Inpatient 0 Bed	Inpatient 0 Days					
Intensive Care		Rehabilitation Center		Int. Care / Developr Disabled	nentally					
	npatient 7687 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days					
Coronary Care		Chemical Depend	ency	Total Beds this Building Per	Total Beds this Building Per					
		Inpatient 0 Bed	Inpatient 0 Days	Unit 303	Service 303					

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4D and SPC-5 per Section 130061(e)				
Building Number:	LD-02841 Buildi	ing Name: Surg	Surgery and Emergency Services Pavilion	
Medical / Surgical (Inc	lude GYN)	Acute Respiratory Care		Acute Psychiatric
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Perinatal (Exclude Newborn / GYN)		Burn		Skilled Nursing
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 12 Bed	Inpatient 4283 Days	Inpatient 0 Inpatient 0 Days
Pediatric		Intensive Care Newborn Nursery		Intermediate Care
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / Developmentally Disabled
Inpatient 20 Bed	Inpatient 6717 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Building Per
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0	Inpatient 0 Days	Unit Service 32

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