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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:	10801					
Facility Name:	Name: Seton Medical Center					
Address:	1900 S	ullivan Ave				
City:	Daly Cit	ty				
Hospital Owner/Lice	ensee:	Seton Medical Center				
Year of Reporting:		2017				
Contact 1 e-mail Address:		[Confidential data left blank intentionally.]				
Contact 2 e-mail Ad	ldress:	[Confidential data left blank intentionally.]				
Contact 3 e-mail Address::		[Confidential data left blank intentionally.]				
Name of Sub	mitter:	Thomas Holliday				
Submission	Date:	10/24/2017 6:04:36 PM				

Report \	Year: 2017 1	0801	Seton Medical Center		Daly City		Page:2 of 36		
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		
LD- 0846	1963 Tower	1	900 Sullivan Ave	Retrofit	SPC2	01/01/2020	07/01/2019		
LD- 0847	Front Wing	1	900 Sullivan Ave	Replace	SPC2	01/01/2020	07/01/2019		

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For each building which is planned for rebuild, retrofit or replacement, provide the project numbers, per Section $130061(c)(1)(C)$. The projected construction start date or dates and projected Completion date or dates per Section $130061(c)(1)(D)$ and the most recent project status and approvals per Section $130061(c)(1)(E)$.										
Building No: BLD-00846 1963 Tower		Retrofit/Replacemen Project:	t Yes-Subr	mitted						
Facility Project Sub Number Number Num Scope	Date In	Plan Approved Projected Date Start Date	Projected Completion Date	Cl Status Re	EQA eview					
10801 I160019-41- 0 Voluntary Seismic Improvement 00	10/5/2016	05/01/20	07/01/2019	ACTI N	lo					
For each building which is planned for rebuild, retrofit or replacemen projected construction start date or dates and projected Completion status and approvals per Section 130061(c)(1)(E).		r Section 130061(c)(1)(E) and the most rece	ent project						
Building No: BLD-00847 Front Wing		Retrofit/Replacemen Project:	t Yes-Subr	nitted						
Facility Project Sub Number Numer Num Scope	Date In	Plan Approved Projected Date Start Date	Projected Completion Date		EQA eview					
10801 I160020-41- 0 Voluntary Seismic Improvement 00	10/6/2016	05/01/201	17	ACTI N	lo					
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Provide the number of inpatient	beds and patient days per type of service p	er building per Section 130061(c)	(1)(F)
Building Number: BLD-00846	Building Name: 19	963 Tower	
Type of Service Provided			
X Nursing Inpatien Beds	t 201 Inpatient 26454 Days	X Surgical	X Obstetrical Recovery
X IntensiveCare Inpatien Beds	t 3 Inpatient Days 0	X Anesthesia	X Newborn/ WellBaby
Pediatric/Adol Inpatier escent Beds	t 0 Inpatient Days 0	Clinical Lab	X Emergency
X Psychiatric Inpatier Nursing Beds	t 24 Inpatient Days 0	X Radiological/ Imaging	X Nuclear Medicine
X Obstetrical Inpatier Ante/Postprtum Beds	t 18 Inpatient Days 0	X Dietetic	Rehabilitation Therapy
Intermediate Inpatier Care Beds	t 0 Inpatient Days 0	Administration	X Renal Dialysis
X Skilled Nursing Inpatier Beds	t 83 Inpatient Days 0	Services	Surgery
	Total Beds this 329 Building	X Obstetrical Cesarean/Deliv	Central Plant
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Provide the number of inpatier	Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)								
Building Number: BLD-0084	7 Building Name: Fro	ont Wing							
Nursing Inpatie Beds	ent 0 Inpatient 0 Days	Surgical	Obstetrical Recovery						
IntensiveCare Inpatie Beds	ent 0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby						
Pediatric/Adol Inpatie escent Beds	ent 0 Inpatient Days 0	Clinical Lab	Emergency						
Psychiatric Inpatie Nursing Beds	ent 0 Inpatient Days 0	X Radiological/ Imaging	Nuclear Medicine						
Obstetrical Inpatie Ante/Postprtum Beds	ent 0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy						
Intermediate Inpatie Care Beds	ent 0 Inpatient Days 0	Administration	Renal Dialysis						
Skilled Nursing Inpatie Beds	ent 0 Inpatient Days 0	X Support Services	Outpatient Surgery						
	Total Beds this 0 Building	Cesarean/Deliv	Central Plant						
OSHPD FDD SB499 Report	Data Last Update: 10/24/2017 St	ubmission Date: 10/24/2017	Printed: 10/26/2017 6:30 AM						

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Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)									
Building Number: BLD-00846 Building Name: 1963 Tower									
Medical / Surgical (Include GYN) Acute Respiratory Care Acute Psychiatric									
Inpatient 201 Bed	Inpatient 2645 Days 4	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 24 Bed	Inpatient 0 Days				
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing					
Inpatient 18 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 83 Bed	Inpatient 0 Days				
Pediatric		intensive Care Nev Nursery	wborn	Intermediate Card					
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 3 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days				
Intensive Care		Rehabilitation Center		Int. Care / developm 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	329	329				
OSHPD FDD SB499 R	Report Data Last U	odate: 10/24/2017	Submission Date:	: 10/24/2017 Printed	d: 10/26/2017 6:30 AM				

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Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)								
Building Number: BLD-00847 Building Name: Front Wing								
Medical / Surgical	Medical / Surgical (Include GYN) Acute Respiratory Care Acute Psychiatric							
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatier Bed Days	nt 0 Inp Be	oatient 0 Inpat ed Days				
Perinatal (excluse	Newborn / GYN)	Burn	Sk	killed Nursing				
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatier Bed Days	nt 0 Inp Be	oatient 0 Inpat ed Days				
Pediatric		intensive Care Newborn Nursery	Inte	ermediate Card				
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatien Bed Days	t 0 Inp Bee	oatient 0 Inpat d Days				
Intensive Care		Rehabilitation Center		. Care / development sabled				
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatien Bed Days	t 0 Inpa Bec	atient 0 Inpati d Days	ent 0			
Coronary Care		Chemical Dependency		ilding Per Build	l Beds this ling Per ice			
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatien Bed Days	t 0	0	0			
Bed Coronary Care Inpatient 0	Days	Inpatient 0 Inpatien Bed Days Chemical Dependency Inpatient 0 Inpatien	t 0 Inpa Bec Tot Bui Uni	sabled patient 0 Inpati d Days tal Beds this Tota hilding Per Build it Serv	l Beds this ling Per ice			

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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-00846	1963 Tower	Retrofit
BLD-00847	Front Wing	Replace
BLD-00848	Area A & B	Remain
BLD-00849	Area C	Remain
BLD-00850	Area D	Remain
BLD-00851	Center Pod	Remain
BLD-00852	South Pod	Remain
BLD-00853	Utilities Service Building	Remain

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List ALL proposed new buildings to be constructed at this or another site.							
Building Number	Building Name		New Site				
N_1	2020 Tower						
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For the building or buildings to be replaced, rebuilt, removed from acute care service, provide the following: The projected date or dates the building will be removed from service per Section 130061 (c)(2)(A) and provide said date or dates for replaced or rebuild buildings as well. The planned uses of the building or buildings to be removed from acute care service per Section 130061(c)(2)(B) and provide said uses for replaced or rebuild buildings as well. The inpatient service currently delivered in the building or buildings per Section 130061(c)(2)(C)							
Building Number: BLD-00	Front Wing	Removal Date:	07/01/2019				
Planned Uses for the buildin	g to be removed from acute care service	e:					
Planned use for building:	Other Jurisd	liction:					
Other Usage:	Chapel						
Inpatient services currently of	delivered in the building:						
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabilitatior	1			
IntensiveCare	Anesthesia						
Pediatric/Adol escent	Clinical Lab	Obstetrical Recovery	Renal Dialysi	S			
Psychiatric Nursing	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery				
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Plant				
Intermediate Care	Dietetic	Nuclear Medicine	X Support Services				
Skilled Nursing	Administration						
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lo data reported for Section 130061(c)(2)(D).	Report Year: 2017	10801 Seton Medical Center	Daly City	Page:11 of 36
	No data reported for Sectio	on 130061(c)(2)(D).		

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

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		nd beds will be relocated to a new, existi a Building Resolution of "Rebuild" or "R		
Building BL Number:	D-00847 Building Name:	Front Wing		
Will general acute car	re services and beds will be	relocated to a new, Existing or retrofitted	building?	
Radiological/Imaging	Relocated to retrofitted bu	uilding]	
Report whether the group building sites or proje	eneral acute care services a ect numbers for buildings with	nd beds will be relocated to a new, existing a Building Resolution of "Rebuild" or "R	ng or retrofitted building and eplace" per Section 130061	d any corresponding (c)(2)(E)
Building BL Number:	D-00847 Building Name:	Front Wing		
Will general acute car	re services and beds will be	relocated to a new, Existing or retrofitted	building?	
Support Services	Relocated to retrofitted bu	uilding]	

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No data reported	for Sectio	n 130061(c)(3).		

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Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per Section 130061(c)(4)						
Building Number:	BLD-00846 Buildir	ng Name: 1963 Tower				
Type of Service	e Provided					
		X Surgical	X Obstetrical Cesarean/Deliv	Rehab Therap		
X	Nursing	X Anesthesia				
X	IntensiveCare	Allesthesia	X Obstetrical Recovery	X Renal	Dialysis	
	Pediatric/Adol	Clinical Lab	Recovery	Outpat	iont	
	escent	X Radiological/	X Newborn/ WellBaby	Surger		
X	Psychiatric	Imaging				
	Nursing	Pharmaceutical	X Emergency	Centra	l Plant	
X	Obstetrical Ante/Postprtum	X Dietetic	X Nuclear Medicine	X Support		
_	Latera Pate					
	Intermediate Care	Administration				
X	Skilled Nursing					
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Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per Section 130061(c)(4)							
Building Number:	BLD-00847 Build	ding Name: Front Wing					
Type of Service	e Provided						
		Surgical	Obstetrical Cesarean/Deliv	Rehabil Therapy			
	Nursing	Anesthesia	_		Netreia		
	IntensiveCare		Obstetrical Recovery	Renal D	naiysis		
	Pediatric/Adol escent		Newborn/	Outpation Surgery	ent ′		
	Psychiatric Nursing	X Radiological/ Imaging	WellBaby				
	literenig	Pharmaceutical	Emergency	Central	Plant		
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	X Support Service	t S		
	Intermediate Care	Administration					
	Skilled Nursing						
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)								
Building Number:	BLD-00846	Building Nam	ne: 1963 Tower					
Configuration:	Retrofit Non-Cor	nforming buildin	g to SPC 4D or SPC 5	and NPC	4 or NPC 5			
Type of Service	Provided							
X Nu	ırsing	X	Surgical	X	Obstetrical Cesarean/Deliv		ehabilitation lerapy	
X Inte	ensiveCare	X	Anesthesia	X	Obstetrical Recovery	X Re	enal Dialysis	
	diatric/Adol cent		Clinical Lab					
	ychiatric Irsing	X	Radiological/ Imaging	X	Newborn/ WellBaby		utpatient Irgery	
	ostetrical te/Postprtum		Pharmaceutical		Emergency	Ce	entral Plant	
Inte Ca	ermediate Ire	X	Dietetic	x	Nuclear Medicine	x s	upport	
X Ski	illed Nursing		Administration				ervices	
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)							
Building Number:	BLD-00847	Building Na	me: Front Wing				
Configuration:	Replace with exist	ing SPC2 an	d NPC3 building and rei	move fro	m service in 2030.		
Type of Service	Provided						
Nu Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Int	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	ediatric/Adol cent		Clinical Lab		Receivery		
	sychiatric Irsing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	ostetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant
Int Ca	ermediate are		Dietetic		Nuclear Medicine	X	Support
	illed Nursing		Administration				Services
OSHPD FDD SB499 F	Report Da	ata Last Updat	e: 10/24/2017	Submiss	ion Date: 10/24/2017	Printed:	10/26/2017 6:30 AM

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	by retrofit or by				ach building will comply w e provided in each genera		
Building Number: Bl	LD-00848	Building Na	me: Area A & B				
Configuration:	etrofit Conformir	ng building to	NPC 4 or NPC 5				
Type of Service Pr	ovided						
Nursir	ng	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X Intens	siveCare	X	Anesthesia		Obstetrical Recovery		Renal Dialysis
Pedia escen	tric/Adol t	X	Clinical Lab				
Psych Nursir		X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
Obste Ante/F	etrical Postprtum		Pharmaceutical		Emergency	X	Central Plant
Interm Care	nediate		Dietetic		Nuclear Medicine	X	Support
Skilled	d Nursing		Administration			<u> </u>	Services
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	by retrofit or by rep				ach building will comply with be provided in each general		
Building Number: BL	.D-00849 B	uilding Nar	me: Area C				
Configuration:	etrofit Conforming	building to	NPC 4 or NPC 5				
Type of Service Pro	ovided						
Nursin	g	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	iveCare	X	Anesthesia		Obstetrical Recovery		Renal Dialysis
Pediat escent	ric/Adol		Clinical Lab				
Psychi Nursin			Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
Obstet Ante/P	trical Postprtum		Pharmaceutical		Emergency		Central Plant
Interm Care	ediate		Dietetic				Quantat
	Nursing		Administration		Nuclear Medicine	X	Support Services
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	buildings on the hospital campus show by replacement and the type of service			
Building Number: BLD-00850	Building Name: Area D			
Configuration: Retrofit Confo	ming building to NPC 4 or NPC 5			
Type of Service Provided				
Nursing	Surgical	Obstetrica Cesarean		Rehabilitation Therapy
IntensiveCare	Anesthesia	Obstetrica Recovery	u 🗌	Renal Dialysis
Pediatric/Adol escent	Clinical Lab	,		
Psychiatric Nursing	X Radiological/ Imaging	Newborn/ WellBaby		Outpatient Surgery
Obstetrical Ante/Postprtum	X Pharmaceutical	Emergenc	xy 🗌	Central Plant
Intermediate Care	X Dietetic	X Nuclear M	ledicine X	Support
Skilled Nursing	Administration			Services
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	her by retrofit or by				ach building will comply wit be provided in each general		
Building Number:	BLD-00851	Building Na	me: Center Pod				
Configuration:	Retrofit Conformir	ng building to	NPC 4 or NPC 5				
Type of Service	Provided						
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Int	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	ediatric/Adol cent		Clinical Lab		,		
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	ostetrical ite/Postprtum		Pharmaceutical		Emergency		Central Plant
Int Ca	ermediate		Dietetic				Quarant
	illed Nursing		Administration		Nuclear Medicine	X	Support Services
OSHPD FDD SB499 F	Report Da	ata Last Updat	e: 10/24/2017	Submiss	ion Date: 10/24/2017	Printed:	10/26/2017 6:30 AM

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	buildings on the hospital campus showi by replacement and the type of service			
Building Number: BLD-00852	Building Name: South Pod			
Configuration: Retrofit Confor	ming building to NPC 4 or NPC 5			
Type of Service Provided				
Nursing	Surgical	Obstetrical Cesarean/Deliv	X Rehabi Therap	
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal [Dialysis
Pediatric/Adol escent	Clinical Lab			
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpati Surgery	
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central	l Plant
Intermediate Care	Dietetic	Nuclear Medicine	X Suppo	ort
Skilled Nursing	X Administration		Service	
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	er by retrofit or by				ach building will comply wit be provided in each genera		
Building Number:	BLD-00853	Building Na	me: Utilities Service Bu	uilding			
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5				
Type of Service	Provided						
Nur	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Inte	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
Peo	diatric/Adol cent		Clinical Lab		,		
	/chiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	stetrical e/Postprtum		Pharmaceutical		Emergency	X	Central Plant
Inte Car	ermediate		Dietetic				
	lled Nursing		Administration		Nuclear Medicine		Support Services
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Include information on 4D and SPC-5 per Sec			by type of \$	Service provided by I	buildings that are classified	as SPC-2, S	PC-3, SPC-4, SPC-
Building Number: BL	D-00848	Building N	Name: Ar	ea A & B]
Type of Service Prov	vided						
Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
X IntensiveCare	Inpatient Beds	28	X	Anesthesia			
Pediatric/Adol	Inpatient Beds	0	X	Clinical Lab	Obstetrical Recovery	Re	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		itpatient rgery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	X Emergency	X Ce	entral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Su Se	pport rvices
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		28					
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Include information or 4D and SPC-5 per Se	the number of ction 130061(e	f inpatient beds	by type of \$	Service provided by b	uildings that are classified a	as SPC-2, S	SPC-3, SPC-4, SPC-
Building Number: BL	D-00849	Building N	lame: Ar	ea C]
Type of Service Pro	vided						
Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
IntensiveCare	Inpatient Beds	0	X	Anesthesia			
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re Re	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		utpatient Irgery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Ce	entral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Su Se	pport rvices
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
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	Da	0 ta Last Update:	10/24/201	7 Submission	Date: 10/24/2017 Pr	inted: 10/26	/2017 6:30 AM

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Include information on 4D and SPC-5 per Sec			by type of Service provided b	y buildings that are classified a	as SPC-2, SI	PC-3, SPC-4, SPC-
Building Number: BL	D-00850	Building N	ame: Area D]
Type of Service Pro	vided					
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv		nabilitation erapy
IntensiveCare	Inpatient Beds	0	Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Rei	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0	X Radiological/ Imaging	Newborn/ WellBaby		patient gery
Obstetrical Ante/Postprtum	Inpatient Beds	0	X Pharmaceutical	Emergency	Cer	ntral Plant
Intermediate	Inpatient Beds	0	L Dietetic	X Nuclear Medicine	X Sup Ser	oport vices
Skilled Nursing	Inpatient Beds	0	Administration			
Total Beds this Building		0				
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Include information on 4D and SPC-5 per Sec	the number of i tion 130061(e)	npatient beds	by type of S	Service provided by b	uildings that are classified a	s SPC-2, S	SPC-3, SPC-4, SPC-
Building Number: BL	D-00851	Building N	ame: Ce	nter Pod]
Type of Service Prov	<u>vided</u>						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
IntensiveCare	Inpatient Beds	0		Anesthesia			
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	C Re	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		utpatient Irgery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Ce	entral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Su Se	ipport rvices
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
OSHPD FDD SB499 Report	Data	Last Update:	10/24/2017	7 Submission	Date: 10/24/2017 Pri	nted: 10/26	/2017 6:30 AM
OSHPD FDD SB499 Report	Data	Last Update:	10/24/2017	7 Submission	Date: 10/24/2017 Pri	nted: 10/26	/2017 6:30 AM

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Include information on 4D and SPC-5 per Sec			by type of S	Service provided by b	ouildings that are classified	as SPC-2, S	PC-3, SPC-4, SPC-
Building Number: BLI	D-00852	Building N	lame: So	uth Pod]
Type of Service Prov	vided						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
IntensiveCare	Inpatient Beds	0		Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		tpatient rgery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Ce	ntral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Su Se	pport rvices
Skilled Nursing	Inpatient Beds	0	X	Administration			
Total Beds this Building		0					
OSHPD FDD SB499 Report	Data	a Last Update:	10/24/2017	7 Submission	Date: 10/24/2017 F	Printed: 10/26/	2017 6:30 AM

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, 4D and SPC-5 per Section 130061(e)	SPC-
Building Number: BLD-00853 Building Name: Utilities Service Building	
Type of Service Provided	
NursingInpatient0SurgicalObstetrical Cesarean/DelivRehabilitation Therapy	
IntensiveCare Inpatient 0 Anesthesia Beds	
Pediatric/Adol Inpatient 0 Clinical Lab Clinical Lab Recovery Recovery	
Psychiatric Inpatient 0 Radiological/ Outpatient Nursing Beds Outpatient Surgery	
Obstetrical Inpatient 0 Ante/Postprtum Beds	
Intermediate Inpatient 0 Care Beds Dietetic Nuclear Support Services	
Skilled Nursing Administration	
Total Beds this 0 Building	
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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)							
Building Number: BLD-00848 Building Number:	Area A & B						
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 O				
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien 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 Inpatien Bed Days	t 0				
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled					
Inpatient 14 Inpatient 3371 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0				
Coronary Care	Chemical Dependency		l Beds this ling Per				
Inpatient 14 Inpatient 27 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv					
OSHPD FDD SB499 Report Data Las	t Update: 10/24/2017 Submission Date	e: 10/24/2017 Printed: 10/26	/2017 6:30 AM				

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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)								
Building Number: BLD-00849 Bu	ilding Name: Area C							
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	ס					
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	D					
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	D					
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	\mathbf{D}					
Coronary Care	Chemical Dependency	Total Beds this Total Beds th Building Per Building Per	is					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service	2					
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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)								
Building Number: BLD-00850 Bui	Iding Name: Area D							
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	nt 0					
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	nt 0					
Pediatric	Intensive Care Newborn Nursery	Intermediate 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 Inpatien Bed Days	nt 0					
Coronary Care	Chemical Dependency	Building Per Buil	l Beds this ding Per					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv	0					
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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)				
Building Number: BLD-00851 Bu	ilding Name: Center Pod			
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0	
Coronary Care	Chemical Dependency	Total Beds this Total Be Building Per Building		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service	0	
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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)				
Building Number: BLD-00852 Bu	ilding Name: South Pod			
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0	
Coronary Care	Chemical Dependency	Total Beds this Total Be Building Per Building		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service	0	
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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)				
Building Number: BLD-00853 Build	ling Name: Utilities Service 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 0 Bed Days		
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days		
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days		
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days		
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0		
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