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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:	10856		
Facility Name:	Region	al Medical Center of San Jose	
Address:	225 N J	lackson Ave	
City:	San Jos	Se	
Hospital Owner/Lice	ensee:	San Jose Healthcare System, LP	
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 Submitter:		Cheryl Moses	
Submission Date:		1/10/2018 12:18:54 PM	

Report	Year: 2017 10856	Regional Medical Center of Sa	in Jose	San Jose		Page:2 of 45
rebuild, 130060	retrofit or replace the build or 130061.5, for rebuild, re-	are planned for rebuild, retrofit or rep ing to SPC2, SPC3, SPC4, SPC4D trofit or replacement of the building approved per Section 130061(c)(1	or SPC5 per 130 that the hospital of	061(c)(1)(A). The de	eadline, as desc	ribed in Section
Bldg. No.	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date
3LD-)2236	Main Tower and North Wing	225 N Jackson Ave	Rebuild	SPC5	09/01/2015	12/31/2015
BLD- 02237	South Wing	225 N Jackson Ave	Rebuild	SPC5	09/01/2015	05/01/2015
BLD- 02238	Obstetrics Wing	225 N Jackson Ave	Rebuild	SPC5	09/01/2015	05/01/2015

Report Year: 2017	10856	Regional Medical Center	r of San Jose	San J	lose		Page:3 of	45
	start date or o	or rebuild, retrofit or replace dates and projected Comple 0061(c)(1)(E).						
Building No: BLD-022	236 M	ain Tower and North Wing		Retrofit/R Project:	eplacement	No		
	lum Scope		Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
10856 HS032305-0	0		10/7/2003	9/19/2005 12:00:00 AM	10/17/2005	05/01/2010	FIEL	No
10856 IS102399-0	0		12/8/2010		12/31/2010	09/01/2014	ACTI	No
10856 SS100429-0	0		3/16/2010	10/26/2010 12:00:00 AM	12/01/2010	02/01/2012	CLOS	No
	start date or o er Section 13	or rebuild, retrofit or replace dates and projected Comple 0061(c)(1)(E).		er Section 130				
	Sub Ium Scope		Date In	Project: Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
10856 HS022599-0	0		10/4/2002	3/24/2003 12:00:00 AM	06/27/2003	09/23/2003	CLOS	No
10856 IS102399-0	0		12/8/2010		12/30/2010	05/30/2015	ACTI	No
OSHPD FDD SB499 Repo	ort	Data Last Update: 01/10/2	2018 Submis	ssion Date: 01/	10/2018	Printed: 1/12/201	18 6:30 AM	

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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-02238	Obstetrics Wing		Retrofit/Re Project:	placement	No		
Facility Project Sub Number Number Num Scop	be	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
10856 IS102399-0 0		12/8/2010		12/30/2010	12/31/2013	ACTI	No
OSHPD FDD SB499 Report	Data Last Update: 01/10/201	8 Submis	sion Date: 01/1	0/2018	Printed: 1/12/207	8 6:30 AM	

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Provide the number of inpat	Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)					
Building Number: BLD-02	Building Name: Mair	Tower and North Wing				
Type of Service Provided	1					
X Nursing Inpa Bed	atient 30 Inpatient 17181 ds Days		tetrical overy			
IntensiveCare Inpa Bed	atient 0 Inpatient Days 0		/born/ Baby			
Pediatric/Adol Inpa escent Bed	atient 0 Inpatient Days 0	Clinical Lab	ergency			
Psychiatric Inpa Nursing Bed	atient 0 Inpatient Days 0	Radiological/ Nuc Imaging	lear licine			
Obstetrical Inpa Ante/Postprtum Bed	atient 0 Inpatient Days 0 ds		abilitation rapy			
Intermediate Inpa Care Bed	atient 0 Inpatient Days 0		al Dialysis			
Skilled Nursing Inpa Bed	atient 0 Inpatient Days 0	Services Surg	patient Jery			
	Total Beds this 30 Building	Obstetrical Cesarean/Deliv	tral Plant			
OSHPD FDD SB499 Report	Data Last Update: 01/10/2018 Sub	omission Date: 01/10/2018 Printed:	1/12/2018 6:30 AM			

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Provide the number of	Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)						
Building Number: BLD-02237 Building Name: South Wing							
Type of Service Provi	ided						
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery			
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby			
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency			
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	X Radiological/ Imaging	Nuclear Medicine			
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy			
Intermediate Care	Inpatient Beds	0 Inpatient Days 0		Renal Dialysis			
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services	Utpatient Surgery			
		Total Beds this 0 Building	Cesarean/Deliv	Central Plant			
OSHPD FDD SB499 Report	t	Data Last Update: 01/10/2018 Su	Ibmission Date: 01/10/2018	Printed: 1/12/2018 6:30 AM			

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Provide the number of	Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)						
Building Number: BL	D-02238	Building Name: Ob	stetrics Wing				
Type of Service Provi	ded		_				
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery			
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby			
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency			
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine			
	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy			
Intermediate Care	Inpatient Beds	0 Inpatient Days 0		Renal Dialysis			
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	X Support Services	U Outpatient Surgery			
		Total Beds this 0 Building	Cesarean/Deliv	Central Plant			
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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-02236 Bu	ilding Name: Main Tower and North Wing						
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric					
Inpatient 30 Inpatient 7700 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days					
Perinatal (excluse Newborn / GYN)	Burn	Skilled Nursing					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days					
Pediatric	intensive Care Newborn Nursery	Intermediate Card					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days					
Intensive Care	Rehabilitation Center	Int. Care / development Disabled					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days					
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per Unit Service					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	30 30					
OSHPD FDD SB499 Report Data Last	Update: 01/10/2018 Submission Date:	01/10/2018 Printed: 1/12/2018 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-02237	Building Name: South Wing						
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0				
Perinatal (excluse 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 Card					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0				
Intensive Care	Rehabilitation Center	Int. Care / development 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 Beds th Building Per Building Per Unit Service	is				
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	0	0				

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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-02238 Build	ding Name: Obst	tetrics Wing					
Medical / Surgical	(Include GYN)	Acute Respiratory	Care	Acute Psychiatric				
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days			
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing				
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days			
Pediatric		intensive Care Nev Nursery	vborn	Intermediate Card				
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days			
Intensive Care		Rehabilitation Center		Int. Care / developn Disabled	nent			
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days			
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service			
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0			

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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-02236	Main Tower and North Wing	Rebuild
BLD-02237	South Wing	Rebuild
BLD-02238	Obstetrics Wing	Rebuild
BLD-02239	Emergency Department Building	Remain
BLD-02240	Lab Building	Remain
BLD-02241	Surgery Building	Remain
BLD-02242	ICU/CCU Building	Remain
BLD-02958	7A Outpatient Surgery Center	Remain
BLD-03391	Emergency Department Addition	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	Med-Tele Wing	X						
N_2	New Four-Story Tower							
N_3	Central Utility Plant							

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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-02236 Main Tower and North Wing Removal Date: 12/31/2015											
Planned Us	es for the building to	o be remov	ved from acute c	are service:							
Planned us	se for building:]							
Inpatient se	ervices currently deli	vered in th	e building:	-							
XN	Nursing		Surgical			Obstetrical		X	Rehabilitation	I	
<u> </u>	ntensiveCare		Anesthesia			Cesarean/Deli	V		Therapy		
	Pediatric/Adol escent		Clinical Lab			Obstetrical Recovery			Renal Dialysi	S	
	Psychiatric Nursing		Radiological/ Imaging			Newborn/ WellBaby			Outpatient Surgery		
	Dbstetrical Ante/Postprtum		Pharmaceutica	al		Emergency		X	Central Plant		
	ntermediate Care		Dietetic			Nuclear Medicine		X	Support Services		
	Skilled Nursing	X	Administration								
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For the building or buildings to be replaced, rebuilt, removed from acute care service, provide the following: The projected date or dates the building will be removed from service per Section 130061 (c)(2)(A) and provide said date or dates for replaced or rebuild buildings as well. The planned uses of the building or buildings to be removed from acute care service per Section 130061(c)(2)(B) and provide said uses for replaced or rebuild buildings as well. The inpatient service currently delivered in the building or buildings per Section 130061(c)(2)(C)								
Building Number: BLD-022	37 South Wing		Removal 05/01/2015 Date:					
Planned Uses for the building	to be removed from acute care ser	vice:						
Planned use for building:								
Inpatient services currently de	livered in the building:							
Nursing	Surgical	Obstetrical Cesarean/Del	iv Rehabilitat Therapy	ion				
IntensiveCare	Anesthesia							
Pediatric/Adol escent	Clinical Lab	Obstetrical Recovery	Renal Dial	ysis				
Psychiatric Nursing	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery					
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Pla	ant				
Intermediate Care	Dietetic	Nuclear Medicine	Support Services					
Skilled Nursing	Administration							
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For the building or buildings to be replaced, rebuilt, removed from acute care service, provide the following: The projected date or dates the building will be removed from service per Section 130061 (c)(2)(A) and provide said date or dates for replaced or rebuild buildings as well. The planned uses of the building or buildings to be removed from acute care service per Section 130061(c)(2)(B) and provide said uses for replaced or rebuild buildings as well. The inpatient service currently delivered in the building or buildings per Section 130061(c)(2)(C)								
Building Number: BLD-0223	Obstetrics Wing	g	Removal 05/01/201 Date:	5				
Planned Uses for the building Planned use for building:	to be removed from acute care serv	<i>v</i> ice:						
Nursing	Surgical Anesthesia	Obstetrical Cesarean/De	eliv Rehabilit Therapy	ation				
Pediatric/Adol escent	Clinical Lab	Obstetrical Recovery	Renal Dia	alysis				
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatien Surgery	nt				
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central F	Plant				
Intermediate Care	Dietetic	Nuclear Medicine	X Support Services					
Skilled Nursing	Administration							
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eport Year:	2017	10856	Regional Medical Cer	nter of San Jose	San Jose	Page:16 of 45
o data reporte	d for Sectio	n 130061(c)(2)(D).			

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

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Report whether the general acu building sites or project number					
Building BLD-02236 Number:	Building Name:	Main Tower and No	rth Wing		
Will general acute care services	s and beds will be r	elocated to a new, Ex	tisting or retrofitted	building?	
Nursing N/A]	
Report whether the general acu building sites or project number					
Building BLD-02236 Number:	Building Name:	Main Tower and No	rth Wing		
Will general acute care services	s and beds will be r	elocated to a new, Ex	sisting or retrofitted	building?	
Administration N/A]	
Report whether the general acu building sites or project number					
Building BLD-02236 Number:	Building Name:	Main Tower and No	rth Wing		
Will general acute care services	s and beds will be r	elocated to a new, Ex	sisting or retrofitted	building?	
Support Services N/A]	
OSHPD FDD SB499 Report	Data Last Upda	te: 01/10/2018	Submission Dat	e: 01/10/2018	Printed: 1/12/2018 6:30 AM

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Report whether the general acute care services a building sites or project numbers for buildings wit			
Building BLD-02236 Building Name:			
Will general acute care services and beds will be	relocated to a new, Existing or retrofitted	l building? -	
Rehabilitation N/A Therapy			
Report whether the general acute care services a building sites or project numbers for buildings wit			
Building BLD-02236 Building Name:	Main Tower and North Wing		
Will general acute care services and beds will be	relocated to a new, Existing or retrofitted	l building?	
CentralPlant N/A			
Report whether the general acute care services a building sites or project numbers for buildings wit			
Building BLD-02236 Building Name:	Main Tower and North Wing		
Will general acute care services and beds will be	relocated to a new, Existing or retrofitted	l building?	
Medical/Surgical N/A (Include GYN)]	
OSHPD FDD SB499 Report Data Last Up	date: 01/10/2018 Submission Da	te: 01/10/2018 Printed: 1/12	/2018 6:30 AM

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Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Re	ng or retrofitted building and any cor eplace" per Section 130061(c)(2)(E)	responding
Building BLD-02237 Building Name: South Wing Number:		
Will general acute care services and beds will be relocated to a new, Existing or retrofitted	building?	
Radiological/Imaging N/A]	
Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Re		
Building BLD-02238 Building Name: Obstetrics Wing Number:		
Will general acute care services and beds will be relocated to a new, Existing or retrofitted	building?	
Support Services N/A]	
	-	

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No data reporte	ed for Sectio	n 130061(c	e)(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-02236 Building Name: Main Tower and North Wing									
Type of Service Provided									
		Surgical		bstetrical esarean/Deliv		ehabilitation herapy			
X Nursing	g 🗌	Anesthesia							
	veCare	Clinical Lab		bstetrical ecovery		enal Dialysis			
Pediatr escent	ric/Adol	Radiological/		ewborn/ /ellBaby		utpatient urgery			
Psychia Nursing		Imaging		mergency	X C	entral Plant			
Obstetr Ante/Po	rical Postprtum	Dietetic		uclear edicine	x s	upport ervices			
Interme Care	ediate	Administration							
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-02237 Buildin	g Name: South Wing									
Type of Servic	e Provided										
		Surgical	Obstetrical Cesarean/Deliv	Rehabi Therap							
	Nursing	Anesthesia		Renal I	Dialysis						
	IntensiveCare		Obstetrical Recovery		Jiaiysis						
	Pediatric/Adol escent	Clinical Lab	Newborn/	Outpati Surger	ent y						
	Psychiatric	X Radiological/ Imaging	WellBaby								
	Nursing	Pharmaceutical	Emergency	Central	Plant						
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	Suppor Service	t es						
	Intermediate Care	Administration									
	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-02238 Buildin	g Name: Obstetrics Wing									
Type of Service	e Provided										
		Surgical	Obstetrical Cesarean/Deliv	Rehabi Therap							
	Nursing	Anesthesia									
	IntensiveCare		Obstetrical Recovery	Renal [Jaiysis						
	Pediatric/Adol escent	Clinical Lab	Newborn/ WellBaby	Outpati Surgery	ent /						
	Psychiatric Nursing	Imaging Pharmaceutical	Emergency	Central	Plant						
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	X Suppor 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-02236 Building Name: Main Tower and North Wing										
Configuration: Remove from GAC service by 1/1/2020										
Type of Service Provided										
Nursing	Surgical	Obstetric Cesarear		Rehabilitation Therapy						
IntensiveCare	Anesthesia	Obstetric Recovery		Renal Dialysis						
Pediatric/Adol escent	Clinical Lab	Recovery								
Psychiatric Nursing	Radiological/ Imaging	Newborn WellBaby		Outpatient Surgery						
Obstetrical Ante/Postprtum	Pharmaceutical	Emergen	cv 🗌	Central Plant						
	Dietetic									
Care Skilled Nursing	Administration	Nuclear I	Medicine	Support Services						
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number: BLD-02237 Building Name: South Wing										
Configuration: Retrofit Non-Conforming building to SPC 4D or SPC 5 and NPC 4 or NPC 5										
Type of Service	Provided									
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	diatric/Adol cent		Clinical Lab							
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	ostetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant			
Inte Ca	ermediate Ire		Dietetic		Nuclear Medicine		Support			
	illed Nursing		Administration				Services			
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number: BLD-02238 Building Name: Obstetrics Wing										
Configuration: Retrofit Non-Conforming building to SPC 4D or SPC 5 and NPC 4 or NPC 5										
Type of Service Provided										
Nursing	Surgical	Obstetri Cesarea		Rehabilitation Therapy						
IntensiveCare	Anesthesia	Obstetri Recove		Renal Dialysis						
Pediatric/Adol escent	Clinical Lab	Recove	y							
Psychiatric Nursing	Radiological/ Imaging	Newbor WellBat		Outpatient Surgery						
Obstetrical Ante/Postprtum	Pharmaceutical	Emerge	ncv 🗌	Central Plant						
	Dietetic									
Care Skilled Nursing	Administration	Nuclear	Medicine	Support Services						
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number: BLD-02239 Building Name: Emergency Department Building										
Configuration: Retrofit Conforming building to NPC 4 or NPC 5										
Type of Service Provided										
Nursing	Surgical		etrical rean/Deliv		Rehabilitation Therapy					
IntensiveCare	Anesthesia	Obste Reco	etrical		Renal Dialysis					
Pediatric/Adol escent	Clinical Lab	Reco	very							
Psychiatric Nursing	Radiological/ Imaging	News WellE			Outpatient Surgery					
Obstetrical Ante/Postprtum	Pharmaceutical	Emer	gency		Central Plant					
Intermediate Care	Dietetic									
Skilled Nursing	Administration		ear Medicine		Support Services					
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number: BLD-02240 Building Name: Lab Building										
Configuration: Retrofit Non-Conforming building to SPC 4D or SPC 5 and NPC 4 or NPC 5										
Type of Service Provided										
Nursing	Surgical		tetrical arean/Deliv		Rehabilitation Therapy					
IntensiveCare	Anesthesia		tetrical overy		Renal Dialysis					
Pediatric/Adol escent	Clinical Lab		Svery							
Psychiatric Nursing	Radiological/ Imaging		born/ Baby		Outpatient Surgery					
Obstetrical Ante/Postprtum	Pharmaceutical	Eme	rgency		Central Plant					
Intermediate Care	Dietetic									
Skilled Nursing	Administration		ear Medicine		Support Services					
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Report the final con requirements whet per Section 13006	ther by retrofit or by	ildings on the replacement	hospital campus showin and the type of service t	ig how e hat will l	ach building will comply w be provided in each genera	ith the SP al acute c	C-5/NPC-4 or 5 are hospital building
Building Number:	BLD-02241	Building Na	me: Surgery Building				
Configuration:	N/A						
Type of Service	e Provided						
	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	ediatric/Adol scent		Clinical Lab				
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	bstetrical nte/Postprtum		Pharmaceutical		Emergency		Central Plant
	termediate are		Dietetic				
	killed Nursing		Administration		Nuclear Medicine		Support Services
OSHPD FDD SB499 I	Report r	oata Last Updat	e: 01/10/2018	Submiss	ion Date: 01/10/2018	Printed	1/12/2018 6:30 AM
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Report Year: 20	10856	Regional Mee	dical Center of San Jose		San Jose		Page:31 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-02242	Building Na	me: ICU/CCU Building					-	
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		Dietetic						
	illed Nursing		Administration		Nuclear Medicine		Support Services		
OSHPD FDD SB499 F	Report D	ata Last Updat	e: 01/10/2018	Submiss	ion Date: 01/10/2018	Printed:	1/12/2018 6:30 AM		

Report Year: 20)17 10856 I	Regional Med	dical Center of San Jose		San Jose		Page:32 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-02958 Building Name: 7A Outpatient Surgery Center										
Configuration:	N/A									
Type of Service	e Provided									
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Int	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	ediatric/Adol cent		Clinical Lab							
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	ostetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant			
Int Ca	termediate		Dietetic		Nuclear Medicine		Quanant			
	killed Nursing		Administration				Support Services			
			04/40/0010	<u> </u>						
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Report Year: 20)17 10856 I	Regional Mec	lical Center of San Jose		San Jose		Page:33 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-03391 Building Name: Emergency Department Addition										
Configuration: N/A										
Type of Service	e Provided									
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Int	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	ediatric/Adol cent		Clinical Lab		,					
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	ostetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant			
Int Ca	ermediate are		Dietetic		Nuclear Medicine		Support			
Sk	tilled Nursing		Administration				Services			
OSHPD FDD SB499 F	Report Da	ata Last Update	e: 01/10/2018	Submiss	ion Date: 01/10/2018	Printed:	1/12/2018 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, SPC-4D and SPC-5 per Section 130061(e)									
Building Number: BLD-02239 Building Name: Emergency Department Building									
Type of Service Prov	<u>vided</u>								
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	Rer	nal Dialysis		
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		patient gery		
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	X Emergency	Cer	ntral Plant		
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	Sup Sup Ser	pport vices		
Skilled Nursing	Inpatient Beds	0		Administration					
Total Beds this Building		0							
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Include information of 4D and SPC-5 per Se			by type of Service provided by	buildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number:	LD-02240	Building Na	ame: Lab Building		
Type of Service Pro	ovided				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	X Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtun	Inpatient n Beds	0	Pharmaceutical	Emergency	Central Plant
Intermediate	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing) Inpatient Beds	0	Administration		
Total Beds this Building	3	0			
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Include information on 4D and SPC-5 per Sec			by type of S	Service provided by bui	Idings that are classified a	IS SPC-2, S	PC-3, SPC-4, SPC-
Building Number: BLI	D-02241	Building N	ame: Su	rgery Building]
Type of Service Prov	rided						
Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
IntensiveCare	Inpatient Beds	0	X	Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0	X	Clinical Lab	Obstetrical Recovery	Re	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby		tpatient rgery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency		ntral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine		pport rvices
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 o tion 130061	of inpatient beds (e)	by type of Service p	rovided by building	gs that are classified a	as SPC-2, S	PC-3, SPC-4, SPC-
Building Number: BLI	D-02242	Building N	lame: ICU/CCU B	uilding]
Type of Service Prov	<u>vided</u>						
Nursing	Inpatient Beds	0	Surgica	al	Obstetrical Cesarean/Deliv		habilitation erapy
X IntensiveCare	Inpatient Beds	34	Anesth	esia			
Pediatric/Adol escent	Inpatient Beds	0	Clinical	Lab	Obstetrical Recovery	Re	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiolo Imaginę		Newborn/ WellBaby		tpatient rgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharma	aceutical	Emergency	Ce	ntral Plant
Intermediate	Inpatient Beds	0	Dietetic	;	Nuclear Medicine	X Su Se	pport rvices
Skilled Nursing	Inpatient Beds	0	Adminis	stration			
Total Beds this Building		34					
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Include information on 4D and SPC-5 per Sec			by type of S	Service provided by	' buildin	gs that are classified	as SPC-2,	SPC-3, SPC-4, SPC-
Building Number: BLI	D-02958	Building N	ame: 7A	Outpatient Surgery	y Center	r		
Type of Service Prov	<u>/ided</u>							
Nursing	Inpatient Beds	0	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	X	Anesthesia				
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Ľ	Obstetrical Recovery	F	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Γ	Newborn/ WellBaby		Dutpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency		Central Plant
Intermediate	Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services
Skilled Nursing	Inpatient Beds	0		Administration				
Total Beds this Building		0						
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	e information on t d SPC-5 per <mark>Sec</mark>			by type of S	Service provided by bui	ildings that are classified a	s SPC-2, SI	PC-3, SPC-4, SPC-
Buildir	ng Number: BLC	0-03391	Building Na	ame: Em	nergency Department A	Addition]
<u>Type</u>	of Service Prov	rided						
	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	Rer	nal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		patient gery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Cer	ntral Plant
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Sup Sup Ser	oport vices
	Skilled Nursing	Inpatient Beds	0		Administration			
	Total Beds this Building		0					
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Include information on the number of inpatient 4D and SPC-5 per Section 130061(e)	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-02239 Buil	ding Name: Emergency Department Build	ding			
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 0 Inpatient 3503 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days			
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days			
Pediatric	Intensive Care Newborn Nursery	Intermediate Care			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days			
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days			
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0			
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Include information on the number of inpatien 4D and SPC-5 per Section 130061(e)	t beds by type of unit provided by buildings that	t are classified as SPC-2, SPC-3, SPC-4, SPC	C-
Building Number: BLD-02240 Bu	ilding Name: Lab 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	
OSHPD FDD SB499 Report Data Last	Update: 01/10/2018 Submission Date:	01/10/2018 Printed: 1/12/2018 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-02241 Bu	ilding Name: Surgery Building			
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Inpatient 41 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days		
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days		
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days		
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days		
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days 0	Unit Service 0 0		
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Include information on the number of inpatient k 4D and SPC-5 per Section 130061(e)	beds by type of unit provided by buildings that	t are classified as SPC-2, SPC-3, SPC-4	, SPC-
Building Number: BLD-02242 Build	ling Name: ICU/CCU Building		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Bed Days 0	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Days	0
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Days	0
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 34 Inpatient 11178 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 Pe	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 34	34
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Include information on the number of inpat 4D and SPC-5 per Section 130061(e)	ient beds by type of unit provided by buildings that	are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-02958	Building Name: 7A Outpatient Surgery Cent	ter
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient Days	D 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	D 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	D 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	D Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care	Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding Per
Inpatient 0 Inpatient 0 Bed Days	D Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0
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Include information on the number of inpa 4D and SPC-5 per Section 130061(e)	atient beds by type of unit provided by buildings tha	at are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-03391	Building Name: Emergency Department Ad	ddition
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 0 Inpatient Bed Days	0 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 Days	0 Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0
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