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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:	11658		
Facility Name:	Garfield	Medical Center	
Address:	525 N.	Garfield Ave.	
City:	Monter	ey Park	
Hospital Owner/Lice	ensee:	AHMC Healthcare, Inc	
Year of Reporting:		2017	
Contact 1 e-mail Ac	ddress:	[Confidential data left blank intentionally.]	
Contact 2 e-mail Ac	ddress:	[Confidential data left blank intentionally.]	
Contact 3 e-mail Ad	dress::	[Confidential data left blank intentionally.]	
Name of Submitter:		Martin Rodriguez	
Submission	n Date:	8/23/2017 9:16:45 AM	

eport Y	'ear: 2017 11658	Garfield Medical Center		Monterey Park	(Page:2 of 38
ouild, re 0060 c	etrofit or replace the buildir or 130061.5,for rebuild, retr	re planned for rebuild, retrofit or rep ng to SPC2, SPC3, SPC4, SPC4D rofit or replacement of the building t approved per <u>Section 130061(c)(1</u>	or SPC5 per 130 hat the hospital c	061(c)(1)(A). The de	eadline, as desc	ribed in Section
dg.).	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date
D- 934	Main Hospital	525 N. Garfield Ave.	Retrofit	SPC2	01/01/2019	12/31/2018
HPD F	DD SB499 Report	Data Last Update: 08/23/2017	Submissior	Date: 08/23/2017	Printed: 8/	25/2017 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-01934	Main Hospital		Retrofit/Replacement Project:	Yes-Planned						
Facility Project Sub Number Number Num Sc	cope	Date In	Plan Approved Projected Date Start Date	Projected Completion Date Status	CEQA Review					
11658 IL101610-0 0		6/30/2010	06/30/2010) A	CTI No					
OSHPD FDD SB499 Report	Data Last Update:	08/23/2017 Submi	ssion Date: 08/23/2017	Printed: 8/25/2017 6:30	AM					

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Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)								
Building Number: BLD-01934	Building Name:	lain Hospital						
Type of Service Provided								
X Nursing Inpatie Beds	nt 134 Inpatient 47949 Days		stetrical covery					
X IntensiveCare Inpatie Beds	nt 22 Inpatient Days 9333		wborn/ ellBaby					
Pediatric/Adol Inpatie escent Beds	nt 0 Inpatient Days 0	X Clinical Lab X En	nergency					
Psychiatric Inpatie Nursing Beds	nt 0 Inpatient Days 0		clear edicine					
X Obstetrical Inpatie Ante/Postprtum Beds	nt 0 Inpatient Days 0		habilitation erapy					
Intermediate Inpatie Care Beds	nt 0 Inpatient Days 0		nal Dialysis					
Skilled Nursing Inpatie Beds	nt 0 Inpatient Days 0	Services Su	tpatient rgery					
Deus	Total Beds this 156 Building	X Obstetrical Cesarean/Deliv X Ce	ntral Plant					
OSHPD FDD SB499 Report	Data Last Update: 08/23/2017 S	Submission Date: 08/23/2017 Printed	I: 8/25/2017 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-01934 Building Name: Main Hospital									
Bunning Number.	BLD-01934 Build		Ποσμιαί						
Medical / Surgical	(Include GYN)	Acute Respiratory	Care	Acute Psychiatric					
Inpatient 106 Bed	Inpatient 3293 Days 1	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 14 Bed	Inpatient 3710 Days	Inpatient 28 Bed	Inpatient 6948 Days	Inpatient 0 Bed	Inpatient 0 Days				
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service				
Inpatient 8 Bed	Inpatient 2196 Days	Inpatient 0 Bed	Inpatient 0 Days	156	156				
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ort Year: 2	017 11658 Garfield Medical Center	Monterey Park	Page:6 of 38	
all buildings a	t the facility, indicate which ones are scheduled for gener	al acute service removal.		
Building Number	Building Name	Building to be Removed / Replaced / Rebuilt		
BLD-01934	Main Hospital	Retrofit		
BLD-01935	Nursery/Post Partum	Remain		
BLD-01936	Emergency Wing	mergency Wing Remain		
BLD-01937	O.B. Pavilion	Pavilion Remain		
BLD-01938	O.B. Addition	Remain		
BLD-01939	Cath Lab	Remain		
BLD-03427	ER Addition	Remain		
3LD-03428	Extended Service Canopy	Remain		
BLD-03429	Service Canopy	Remain		

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No proposed new buildings to be constructed at this or another site.

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No data reported for	Section 1	30061 (c)	(2)(A) , (B), or (C)		

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

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No data reported	ל for Sectioו	n 130061(c))(2)(D).					

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No data reported corresponding b	d for wheth uilding site	er the gene s or projec	eral acute care service t numbers for building	es and beds will be s with a Building Re	relocated to a esolution of "R	new, existing or ret ebuild" or "Replace	rofitted building a " per Section 130	and any 0061(c)(2)(E).

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No data reported	for Section	on 130061(c	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-01934 Building Name: Main Hospital												
Type of Service	Provided											
		X Surgical	X Obstetrical Cesarean/I		pilitation py							
X	Nursing	X Anesthesia		Ly Ronal	Dialycia							
X	IntensiveCare	X Clinical Lab	Obstetrical Recovery	X Renal	Dialysis							
	Pediatric/Adol escent	X Radiological/	X Newborn/ WellBaby	X Outpa Surge								
	Psychiatric Nursing	Imaging X Pharmaceutical	X Emergency	/ X Centra	al Plant							
X	Obstetrical Ante/Postprtum	X Dietetic	X Nuclear Medicine	X Suppo Servio								
	Intermediate Care	X Administration										
	Skilled Nursing											
OSHPD FDD SB499 Re	port Data Last	t Update: 08/23/2017 Subn	nission Date: 08/23/2	2017 Printed: 8/25	/2017 6:30 AM							

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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-01934	Building Name: Main Hospital											
Configuration: N/A												
Type of Service Provided												
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehal Thera	pilitation Py								
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal	Dialysis								
Pediatric/Adol escent	Clinical Lab	Recovery										
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge									
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Centra	al Plant								
Intermediate	Dietetic											
Care Skilled Nursing	Administration	Nuclear Medicine	Supp Servi									
OSHPD FDD SB499 Report	Data Last Update: 08/23/2017	Submission Date: 08/23/2017	Printed: 8/25/20	017 6:30 AM								

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	her by retrofit or		e hospital campus show and the type of service					
Building Number:	BLD-01935	Building Na	ime: Nursery/Post P	artum				
Configuration:	N/A							
Type of Service	Provided							
Nu	ırsing		Surgical		Obstetrical Cesarean/De	eliv	Rehabilitation Therapy	
Int ^a	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 are		Dietetic		Nuclear Med	icine	Support	
Sk	illed Nursing		Administration				Services	
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	her by retrofit or l		e hospital campus show and the type of service					
Building Number:	BLD-01936	Building Na	me: Emergency Win	g				
Configuration:	N/A							
Type of Service	Provided							
Nu	ırsing		Surgical		Obste Cesar	trical ean/Deliv		Rehabilitation Therapy
	ensiveCare		Anesthesia		Obste			Renal Dialysis
	diatric/Adol cent		Clinical Lab		Recov	'ery		
	ychiatric Irsing		Radiological/ Imaging		Newbo WellBa			Outpatient Surgery
	ostetrical ite/Postprtum		Pharmaceutical		Emerg	gency		Central Plant
Inte Ca	ermediate are		Dietetic		Nuclea	ar Medicine		Support
	illed Nursing		Administration		Nuclea			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-01937	Building Na	me: O.B. Pavilion							
Configuration:	N/A									
Type of Service	e Provided									
	ursing		Surgical		Obste Cesar	etrical rean/Deliv		Rehabilitation Therapy		
Int	tensiveCare		Anesthesia		Obste Recov			Renal Dialysis		
	ediatric/Adol scent		Clinical Lab		Recor	very				
	sychiatric ursing		Radiological/ Imaging		Newb WellB			Outpatient Surgery		
	ostetrical hte/Postprtum		Pharmaceutical		Emerg	gency		Central Plant		
	termediate		Dietetic							
	are killed Nursing		Administration		Nucle	ar Medicine		Support Services		
OSHPD FDD SB499 F	Report D	Data Last Update	e: 08/23/2017	Submissi	ion Date	e: 08/23/2017	Printed:	8/25/2017 6:30 AM		

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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-01938	Building Na	me: O.B. Addition							
Configuration:	N/A									
Type of Service	e Provided									
	ursing		Surgical		Obste Cesar	etrical rean/Deliv		Rehabilitation Therapy		
Int	tensiveCare		Anesthesia		Obste Recov			Renal Dialysis		
	ediatric/Adol scent		Clinical Lab		Record	very				
	sychiatric ursing		Radiological/ Imaging		Newb WellB			Outpatient Surgery		
	ostetrical hte/Postprtum		Pharmaceutical		Emerg	gency		Central Plant		
	termediate are		Dietetic							
	killed Nursing		Administration		Nucle	ar 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-01939	Building Nar	me: Cath Lab							
Configuration:	N/A									
Type of Service	e Provided									
Nu	ursing		Surgical		Obste Cesar	etrical rean/Deliv		Rehabilitation Therapy		
	tensiveCare		Anesthesia		Obste Recov			Renal Dialysis		
	ediatric/Adol scent		Clinical Lab		Recov	very				
	sychiatric ursing		Radiological/ Imaging		Newb WellB			Outpatient Surgery		
	bstetrical nte/Postprtum		Pharmaceutical		Emerg	gency		Central Plant		
	termediate are		Dietetic							
	killed Nursing		Administration		Nucle	ar 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-03427	Building Nar	me: ER Addition							
Configuration:	N/A									
Type of Service	e Provided									
Nu	ursing		Surgical		Obste Cesar	trical ean/Deliv		Rehabilitation Therapy		
Int	tensiveCare		Anesthesia		Obste Recov			Renal Dialysis		
	ediatric/Adol scent		Clinical Lab		Recor					
	sychiatric ursing		Radiological/ Imaging		Newb WellB			Outpatient Surgery		
	ostetrical hte/Postprtum		Pharmaceutical		Emerg	gency		Central Plant		
	termediate are		Dietetic							
	killed Nursing		Administration		NUCIE	ar Medicine		Support Services		
OSHPD FDD SB499 F	Report D	Data Last Update	e: 08/23/2017	Submissio	on Date	e: 08/23/2017	Printed:	8/25/2017 6:30 AM		

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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-03428	Building Na	me: Extended Serv	ice Canopy							
Configuration:	N/A										
Type of Service	Provided										
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
Inte	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis				
	diatric/Adol cent		Clinical Lab		Recovery						
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
	stetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant				
	ermediate		Dietetic								
Ca	re illed Nursing		Administration		Nuclear Medicine		Support Services				
OSHPD FDD SB499 R	Penort	Data Last Updat	e: 08/23/2017	Submice	on Date: 08/23/2017	Printad	8/25/2017 6:30 AM				

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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-03429	Building Nar	me: Service Canopy							
Configuration:	N/A									
Type of Service	e Provided									
	ursing		Surgical		Obste Cesar	trical ean/Deliv		Rehabilitation Therapy		
Int	tensiveCare		Anesthesia		Obste Recov			Renal Dialysis		
	ediatric/Adol scent		Clinical Lab		Recov	, ei y				
	sychiatric ursing		Radiological/ Imaging		Newb WellB			Outpatient Surgery		
	ostetrical hte/Postprtum		Pharmaceutical		Emerg	gency		Central Plant		
	termediate are		Dietetic							
	killed Nursing		Administration		Nucle	ar Medicine		Support Services		
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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-4, AD and SPC-5 per Section 130061(e)								
Building Number: BLI	D-01935	Building N	Name: Nu	rsery/Post Partum]	
Type of Service Prov	<u>/ided</u>							
Nursing	Inpatient Beds	0	X	Surgical	X Obstetrical Cesarean/Deliv		habilitation erapy	
X IntensiveCare	Inpatient Beds	20	X	Anesthesia				
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	X Obstetrical Recovery	Re	nal Dialysis	
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	X Newborn/ WellBaby		tpatient rgery	
Obstetrical	Inpatient Beds	34		Pharmaceutical	Emergency	X Ce	ntral Plant	
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	Su Se	pport rvices	
Skilled Nursing	Inpatient Beds	0		Administration				
Total Beds this Building		54						
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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: BL	D-01936	Building N	ame: Emo	ergency Wing				
Type of Service Prov	<u>vided</u>							
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		ehabilitation herapy	
IntensiveCare	Inpatient Beds	0		Anesthesia				
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	R	enal Dialysis	
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		Putpatient urgery	
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	x c	entral Plant	
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	X s s	upport ervices	
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 Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)								
Building Number: BL	D-01937	Building Na	ame: O.B	B. Pavilion]	
Type of Service Prov	<u>vided</u>							
Nursing	Inpatient Beds	0		Surgical	X Obstetrical Cesarean/Deliv		habilitation erapy	
IntensiveCare	Inpatient Beds	0		Anesthesia				
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	X Obstetrical Recovery	C Re	enal 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	X	Dietetic	Nuclear Medicine	Su Su	ipport rvices	
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 Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)								
Building Number: BL	D-01938	Building N	ame: O.B.	. Addition				
Type of Service Pro	vided							
Nursing	Inpatient Beds	0		Surgical	X Obstetrical Cesarean/Deliv		ehabilitation lerapy	
IntensiveCare	Inpatient Beds	0		Anesthesia				
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	X Obstetrical Recovery	Re	enal Dialysis	
Psychiatric	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		utpatient Irgery	
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Ce	entral Plant	
Intermediate	Inpatient Beds	0	X	Dietetic	Nuclear Medicine	St St	ipport ervices	
Skilled Nursing	Inpatient Beds	0		Administration				
Total Beds this Building		0						
OSHPD FDD SB499 Report		ta Last Update:	08/23/2017	Submission I	Date: 08/23/2017 Pri	inted: 8/25/		
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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)								
Buildir	ng Number: BLI	D-01939	Building N	lame: Ca	th Lab				
Туре	of Service Prov	rided							
X	Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv		ehabilitation herapy	
	IntensiveCare	Inpatient Beds	0		Anesthesia				
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	R	enal Dialysis	
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		Dutpatient 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						
	DD SB499 Report		ata Last Update:	08/23/2017	7 Submission	Date: 08/23/2017 Pr	inted: 8/25	/2017 6:30 AM	
	CO OD433 Report	Da	ala Lasi Opuale.	00/23/2011	300111351011	Date. 00/25/2017 FI	niteu. 0/20	2017 0.30 AW	

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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: B	LD-03427	Building N	Jame: ER Addition					
Type of Service Pr	ovided							
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy			
IntensiveCare	Inpatient Beds	0	Anesthesia					
Pediatric/Adol	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis			
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery			
Obstetrical Ante/Postprtur	Inpatient m Beds	0	Pharmaceutical	Emergency	Central Plant			
Intermediate	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services			
Skilled Nursing	g Inpatient Beds	0	Administration					
Total Beds this Building	6	0						
			09/00/2017	on Data: 09/02/2017	inted: 8/2E/2017.0.20 ANA			
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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: BLI	D-03428	Building N	lame: Ex	tended Service Can	ру]	
Type of Service Prov	<u>vided</u>							
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	enal Dialysis	
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		itpatient irgery	
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Ce	entral Plant	
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	Su Su	pport rvices	
Skilled Nursing	Inpatient Beds	0		Administration				
Total Beds this Building		0						
OSHPD FDD SB499 Report	Data	Last Update:	08/23/2017	7 Submission	Date: 08/23/2017	Printed: 8/25/2	2017 6:30 AM	

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-03429 Building Name: Service Canopy Type of Service Provided Image: Service Canopy Surgical Obstetrical Cesarean/Deliv Rehabilitation Therapy IntensiveCare Inpatient Beds Image: Obstetrical Cesarean/Deliv Rehabilitation Therapy Image: Obstetrical Beds Image: Obstetrical Cesarean/Deliv Renal Dialysis
Type of Service Provided Nursing Inpatient 0 Surgical Obstetrical Rehabilitation IntensiveCare Inpatient 0 Anesthesia
Nursing Inpatient Beds 0 Surgical Obstetrical Cesarean/Deliv Rehabilitation Therapy IntensiveCare Inpatient Beds 0 Anesthesia Inpatient Beds 0 Inpatient Beds Inpatient Beds
Beds Cesarean/Deliv Therapy Cesarean/Deliv Therapy Anesthesia
Beds
Obstatrical Renal Dialysis
Pediatric/Adol Inpatient 0 Clinical Lab Recovery
Psychiatric Inpatient 0 Radiological/ Nursing Beds Outpatient Surgery
Obstetrical Inpatient 0 Pharmaceutical Central Plant Central Plant
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-01935 Building Name: Nursery/Post Partum								
Medical / Surgical (Include GYN) Acute Respiratory Care Acute Psychiatric								
Inpatient 0 Inpatient 0 Bed Days 0	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0					
Perinatal (Exclude Newborn / GYN) Burn Skilled Nursing								
Inpatient 34 Inpatient 8070 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0					
Pediatric	Intensive Care Newborn Nursery	Intermediate Care						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 20 Inpatient 7300 Bed Days	Inpatient 0 Inpatien Bed Days	t 0					
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0					
Coronary Care	Chemical Dependency		Beds this ling Per					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Servi	54					
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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-01936 Building Name: Emergency Wing									
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric							
Inpatient 0 Inpatient 0 Bed Days 0	Inpatient 0 Inpatient 0 Bed Days	Inpatient <u>0</u> 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 <u>0</u> 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	ll Beds this ding Per						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv	/ice 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-01937 Buil	ding Name: O.B. Pavilion							
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0					
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0					
Pediatric	Intensive Care Newborn Nursery	Intermediate Care						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0					
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0					
Coronary Care	Chemical Dependency	Building Per Buildi	Beds this ing Per					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Servio	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-01938 Build	ding Name: O.B. Addition							
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	ent 0					
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	ent 0					
Pediatric	Intensive Care Newborn Nursery	Intermediate Care						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	ent 0					
Intensive Care	Rehabilitation Center	Int. Care / Developmentall Disabled	у					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	ent 0					
Coronary Care	Chemical Dependency	Building Per Bui	al Beds this Iding Per					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Ser	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-01939 Build	ding Name: Cath Lab				
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0		
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 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 Inpatier Bed Days	nt 0		
Coronary Care	Chemical Dependency	Building Per Build	l Beds this ding Per		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv	0		
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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-03427 Build	ding Name: ER Addition				
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie 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 Inpatie 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 Inpatie Bed Days	nt 0		
Intensive Care	Rehabilitation Center	Int. Care / Developmentall Disabled	y		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	nt 0		
Coronary Care	Chemical Dependency	Building Per Bui	al Beds this Iding Per		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Ser	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-03428 Build	ling Name: Extended Service Canopy				
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	ll 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-03429 Build	ling Name: Service Canopy				
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0		
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0		
Pediatric	Intensive Care Newborn Nursery	Intermediate Care			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0		
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0		
Coronary Care	Chemical Dependency	Building Per Build	Beds this ling Per		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv	0		
OSHPD FDD SB499 Report Data Last Update: 08/23/2017 Submission Date: 08/23/2017 Printed: 8/25/2017 6:30 AM					