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 (Provide the Hospital Owner and Year of Report per Section 130061(e)								
Facility Number:	11858								
Facility Name:	Methodis	et Hospital of Southern California							
Address:	300 W. H	luntington Dr.							
City:	Arcadia								
Hospital Owner/Licensee:		METHODIST HOSPITAL OF SOUTHERN CALIFORNIA / 930000103							
Year of Reporting:		2017							
Contact 1 e-mail Ad	dress:	[Confidential data left blank intentionally.]							
Contact 2 e-mail Ad	dress:	[Confidential data left blank intentionally.]							
Contact 3 e-mail Ado	dress::	[Confidential data left blank intentionally.]							
Name of Subr	mitter:	JOE LABRIE							
Submission	Date:	10/16/2017 7:16:27 AM							

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

Bldg. No.	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date
BLD- 00359	East Wing	300 W. Huntington Dr.	Rebuild	SPC5	01/01/2019	12/31/2018
BLD- 00362	West Wing	300 W. Huntington Dr.	Rebuild	SPC5	01/01/2019	12/31/2018
BLD- 00364	Pavilion East & West	300 W. Huntington Dr.	Replace	SPC2	01/01/2019	12/31/2018

Report Year: 11858 Methodist Hospital of Southern California Page:3 of 61 2017 Arcadia 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: **East Wing** Retrofit/Replacement BLD-00359 No Project: Facility Project CEQA Sub Plan Approved Projected Projected Completion Date Status Number Number Date Start Date Review Num Scope Date In 0 OPEN No 11858 S142762-19 11/26/201 10/8/2015 12/01/2014 -00 12:00:00 4 AM 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-00362 West Wing No Retrofit/Replacement Project: Facility Project Plan Approved Projected Projected CEQA Sub Completion Date Status Number Number Num Scope Date Start Date Review Date In 0 OPEN No 11858 S142763-19 11/26/201 10/8/2015 12/01/2014 -00 12:00:00 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).

-00

BLD-00364 Pavilion East & West No Building No: Retrofit/Replacement Project: Facility Project Plan Approved Projected CEQA Projected Sub Completion Date Status Number Number Num Scope Date Start Date Review Date In 11858 S142816-19 0 12/4/2014 10/12/2015 06/01/2015 12/31/2015 PEND No

> 12:00:00 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: BL	.D-00359	Building Name: Ea	ast Wing					
Type of Service Prov	<u>rided</u>							
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery				
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby				
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency				
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine				
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy				
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis				
Skilled Nursing	Inpatient	0 Inpatient Days 0	Support Services	Outpatient Surgery				
	Beds	Total Beds this Building	Obstetrical Cesarean/Deliv	Central Plant				

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Provid	le the number of	inpatient bed	s and patient days per ty	pe of service p	er building per	Section 130061	(c)(1)(F)	
	ng Number: BL		Building Na	me: W	est Wing			
_			O langtiont		│	ical	☐ Obstetrica	I
1 <u>X</u>	Nursing	Inpatient Beds	0 Inpatient Days	0		icai	Recovery	
I	ntensiveCare	Inpatient Beds	0 Inpatient Days	0	Anest	thesia	Newborn/ WellBaby	
	Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days	0	Clinic	al Lab	Emergeno	у
	Psychiatric	Inpatient	0 Inpatient Days	s 0	Radio Imagi	ological/ ing	Nuclear Medicine	
r	Nursing	Beds			Pharm	maceutical		
	Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days	0	Diete	tic	Rehabilita Therapy	lion
	ntermediate Care	Inpatient Beds	0 Inpatient Days	s 0	Admir	nistration	Renal Dial	
	Skilled Nursing	Inpatient Beds	0 Inpatient Days	s 0	Servi	ces	Surgery	
			Total Beds this Building	0		rean/Deliv	Central Pla	ant

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Provide the number of	inpatient bed	s and patient days per type of service pe	er building per Section 130061((c)(1)(F)	
Building Number: BLI Type of Service Provi	D-00364	Building Name: Pa	vilion East & West		
			I 🗆	□ Obatatriaal	
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	
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitati Therapy	on
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration X Support	Renal Dialy Outpatient	rsis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Services	Surgery	
		Total Beds this Building	Obstetrical Cesarean/Deliv	Central Pla	nt

Report Year: 2017 11858 Methodist Hospital of Southern California Arcadia Page:8 of 61 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) BLD-00359 **Building Number: Building Name:** East Wing Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Bed Days Bed Days Perinatal (excluse Newborn / GYN) **Skilled Nursing** Burn Inpatient 0 Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Pediatric** intensive Care Newborn **Intermediate Card** Nursery Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Days Bed Days Bed **Intensive Care** Rehabilitation Int. Care / development Center **Disabled** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Days Days Days Bed Bed Bed **Total Beds this** Total Beds this **Coronary Care** Chemical **Building Per Building Per** Dependency Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Days Bed

Report Year: 2017 11858 Methodist Hospital of Southern California Arcadia Page:9 of 61 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) BLD-00362 West Wing **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Bed Days Bed Days Perinatal (excluse Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Days Days Bed Bed **Pediatric** intensive Care Newborn **Intermediate Card Nursery** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Intensive Care** Rehabilitation Int. Care / development **Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Bed Days Days Bed Days **Total Beds this Total Beds this Coronary Care** Chemical **Building Per Building Per** Dependency Unit Service Inpatient Inpatient 0 Inpatient Inpatient ol Days Days Bed Bed

Report Year: 2017 11858 Methodist Hospital of Southern California Arcadia Page:10 of 61 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) BLD-00364 **Building Number: Building Name:** Pavilion East & West Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Bed Days Bed Days Perinatal (excluse Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Days Days Bed Bed **Pediatric** intensive Care Newborn **Intermediate Card Nursery** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days **Intensive Care** Rehabilitation Int. Care / development **Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Bed Days Days Bed Days **Total Beds this Total Beds this Coronary Care** Chemical **Building Per Building Per** Dependency Unit Service Inpatient Inpatient 0 Inpatient Inpatient ol Days Days Bed Bed

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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-00358	Main Hospital	Remain
BLD-00359	East Wing	Rebuild
BLD-00360	Utility Building / Central Plant	Remain
BLD-00362	West Wing	Rebuild
BLD-00364	Pavilion East & West	Replace
BLD-00365	Hoefflin Wing	Remain
BLD-00366	Surgical Wing	Remain
BLD-00367	Patient Tower	Remain
BLD-03711	Electrical Equipment Building	Remain
BLD-05461	North Tower	Remain
BLD-05514	Tower Lobby	Remain
BLD-05634	Generator Building	Remain
BLD-05635	Switchgear Building	Remain
BLD-05636	Switchgear Shed	Remain
BLD-05848	Berger Tower Patient Canopy	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	North 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-00359 East Wing Removal Date:									
Planned Uses for the build	ing to be removed from acute care	e service:							
Planned use for building:	Medical Office Building	Jurisdiction: OSHPD							
Inpatient services currently	v delivered in the building:								
Nursing IntensiveCare	Surgical Anesthesia	Obstetrical Cesarean/De		bilitation apy					
Pediatric/Adol escent	Clinical Lab	Obstetrical Recovery	Rena	l Dialysis					
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge						
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Centr	ral Plant					
Intermediate Care	Dietetic	Nuclear Medicine	Suppo Servio						
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 N	Number: BLD-00	0362	West Wing	9		Removal Date:	12/31/2018		
Planned l	Jses for the buildin	ng to be remov	ved from acute care	e service:					
Planned	use for building:	Medical Office	Building	Jurisdiction:	OSHPD				
X	Nursing IntensiveCare Pediatric/Adol escent Psychiatric Nursing	delivered in th	Surgical Anesthesia Clinical Lab Radiological/ Imaging		Obstetrical Cesarean/Deliv Obstetrical Recovery Newborn/ WellBaby	,	Rehabilitation Therapy Renal Dialysis Outpatient Surgery	3	
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant		
	Intermediate Care		Dietetic		Nuclear Medicine		Support Services		
	Skilled Nursing	ı 🗆	Administration						

Report Ye	ear: 2017 118	58 Me	thodist Hospital o	of Southern Califor	nia	Arcadia		Page:15 of 61	
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 N	lumber: BLD-0036	4	Pavilion	East & West		Removal Date:	12/31/2018		
Planned U	Jses for the building to	o be remov	ed from acute ca	re service:					
Planned	use for building: Med	dical Office	Building	Jurisdiction:	OSHPD]			
Inpatient :	services currently deli	vered in th	e building:						
	Nursing IntensiveCare		Surgical Anesthesia		Obstetrical Cesarean/Deli	v	Rehabilitation Therapy		
	Pediatric/Adol escent		Clinical Lab		Obstetrical Recovery		Renal Dialysis	3	
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant		
	Intermediate Care		Dietetic		Nuclear Medicine		X Support Services		
	Skilled Nursing		Administration						

Report Year: Methodist Hospital of Southern California 2017 11858 Arcadia Page:16 of 61 No data reported for Section 130061(c)(2)(D).

Report Year: Methodist Hospital of Southern California 2017 11858 Arcadia Page:17 of 61 No data reported for Section 130061(c)(2)(D).

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Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c)(2)(E)									
Building Number: BLD-00362 Building Name: West Wing									
Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?									
Nursing N/A									
Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c)(2)(E)									
Building Number: BLD-00364 Building Name: Pavilion East & West									
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	No data reported for Section 130061(c)(3).								

Type of Service P	rovided				
		Surgical		Obstetrical	Rehabilitation
	Nursing	-		Cesarean/Deliv	Therapy
☐ Ir	ntensiveCare	Anesthesia		Obstetrical Recovery	Renal Dialysis
	Pediatric/Adol escent	Clinical Lab	П	Newborn/	Outpatient Surgery
	Psychiatric Nursing	Radiological/ Imaging		WellBaby	
	-	Pharmaceutical		Emergency	Central Plant
	Obstetrical Ante/Postprtum	Dietetic		Nuclear Medicine	Support Services
	ntermediate Care	Administration			
	Skilled Nursing				

eport Year: 201 eport any general er Section 130061	acute care hospital		f Southern California nat is provided in any		Arcadia acute care hospital	building t	Page:21 of 6	31	
Building Number: BLD-00362 Building Name: West Wing									
Type of Service	Provided								
			Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
X	Nursing		Anesthesia						
	IntensiveCare				Obstetrical Recovery		Renal Dialysis		
	Pediatric/Adol		Clinical Lab				Outpatient		
	escent		Radiological/ Imaging		Newborn/ WellBaby		Surgery		
	Psychiatric Nursing		Pharmaceutical		Emergency		Central Plant		
	Obstetrical		Thamadodida						
	Ante/Postprtum		Dietetic		Nuclear Medicine		Support Services		
	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-00364 E	Building Name: Pa	avilion East & West						
Type of Servic	e Provided								
			Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
	Nursing		Anesthesia				Danal Diahaia		
	IntensiveCare		0		Obstetrical Recovery		Renal Dialysis		
	Pediatric/Adol escent		Clinical Lab		Newborn/		Outpatient Surgery		
	Psychiatric		Radiological/ Imaging		WellBaby				
_	Nursing		Pharmaceutical		Emergency		Central Plant		
	Obstetrical Ante/Postprtum		Dietetic		Nuclear Medicine	X	Support Services		
	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-00358	Building Number: BLD-00358 Building Name: Main Hospital									
Configuration: Retrofit Non-Conforming building to SPC 4D or SPC 5 and NPC 4 or NPC 5										
Type of Service Provided										
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy							
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal Dialysis							
Pediatric/Adol escent	Clinical Lab	Recovery								
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery							
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Plant							
Intermediate Care	Dietetic	Nuclear Medicine	Support							
Skilled 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:	Building Number: BLD-00359 Building Name: East Wing									
Configuration:	Configuration: Remove from GAC service by 1/1/2020									
Type of Service	Provided									
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Int	ensiveCare		Anesthesia		Obstetrical Recovery	F	Renal Dialysis			
	ediatric/Adol cent		Clinical Lab		recovery					
	ychiatric ırsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Gurgery			
	ostetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant			
Int Ca	ermediate ire		Dietetic		Nuclear Medicine		Support			
Sk	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-00	360 Building N	ame: Utility Building / C	entral Pla	ant					
Configuration: N/A									
Type of Service Provide	d								
Nursing		Surgical		Obstetrical Cesarean/Deliv		habilitation erapy			
IntensiveCa	are	Anesthesia		Obstetrical Recovery	Re	nal Dialysis			
Pediatric/Ac escent	dol	Clinical Lab		Recovery					
Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		tpatient rgery			
Obstetrical Ante/Postpr	tum	Pharmaceutical		Emergency	П с	ntral Plant			
Intermediate	e \Box	Dietetic		Emergency		Titlai Fiant			
Care Skilled Nurs	sing	Administration		Nuclear Medicine		upport ervices			
_	1								

Report Year: 20	11858 N	/lethodist Ho	spital of Southern Calif	ornia	Arcadia		Page:26 of 61			
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:	uilding Number: BLD-00362 Building Name: West Wing									
Configuration:	Configuration: Remove from GAC service by 1/1/2020									
Type of Service	Provided									
☐ Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		ehabilitation herapy			
Int	tensiveCare		Anesthesia		Obstetrical Recovery	R	enal Dialysis			
	ediatric/Adol cent		Clinical Lab		Receivery					
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		utpatient urgery			
	ostetrical nte/Postprtum		Pharmaceutical		Emergency	c	entral Plant			
	termediate are		Dietetic		Nuclear Medicine	□ s	Support			
Sk	xilled 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:	Building Number: BLD-00364 Building Name: Pavilion East & West									
Configuration:	Configuration: Remove from GAC service by 1/1/2020									
Type of Service	e Provided									
N	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
In	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	ediatric/Adol scent		Clinical Lab		Recovery					
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	bstetrical nte/Postprtum		Pharmaceutical		Emergency		Central Plant			
	termediate are		Dietetic		Nuclear Medicine		Support			
SI	killed Nursing		Administration			_	Services			

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Report the final or equirements wh er Section 1300	ether by retrofit or by r	dings on the replacement	hospital campus show and the type of service	ring how e e that will	ach building will comply be provided in each gen	with the SF eral acute o	PC-5/NPC-4 or 5 care hospital building		
uilding Number	:: BLD-00365	Building Na	me: Hoefflin Wing						
Configuration: N/A									
Type of Servi	ice Provided								
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
	IntensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis		
	Pediatric/Adol escent		Clinical Lab		Recovery				
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	Obstetrical Ante/Postprtum		Pharmaceutical		Emorgonov		Central Plant		
	Intermediate		Dietetic		Emergency		Central Plant		
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services		

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Report the fin requirements per Section 1	whether by retrofit or by	ildings on the hospital campus sho replacement and the type of serv	owing how each bu ice that will be prov	ilding will comply with ided in each general	n the SPC-5/N acute care ho	PC-4 or 5 spital building
Building Num	ber: BLD-00366	Building Name: Surgical Wing				
Configuration	on: N/A					
Type of Se	ervice Provided					
	Nursing	Surgical	Obste Cesa	etrical rean/Deliv	Reh	abilitation apy
	IntensiveCare	Anesthesia	Obste		Ren	al Dialysis
	Pediatric/Adol escent	Clinical Lab	11000	voly		
	Psychiatric Nursing	Radiological/ Imaging	Newb WellE		Outp Surg	atient ery
	Obstetrical Ante/Postprtum	Pharmaceutical				and Discot
	Intermediate	Dietetic	Emer	gency	Cent	ral Plant
	Care		Nucle	ear Medicine		port vices
	Skilled Nursing	Administration				

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Report the fir requirements per Section 1	whether by retrofit or by	ildings on the hospital campus so replacement and the type of se	showing how each buervice that will be prov	uilding will comply vided in each gene	with the SPC-5/Neral acute care h	NPC-4 or 5 ospital building
Building Num	ber: BLD-00367	Building Name: Patient Tow	ver			
Configuration	on: N/A	<u> </u>				
Type of Se	ervice Provided					
	Nursing	Surgical		etrical arean/Deliv		nabilitation erapy
	IntensiveCare	Anesthesia		etrical overy	Rer	nal Dialysis
	Pediatric/Adol escent	Clinical Lab	Rece	very		
	Psychiatric Nursing	Radiological/ Imaging		born/ Baby		patient gery
	Obstetrical Ante/Postprtum	Pharmaceutical	☐ Emo	rgency	☐ Cor	itral Plant
	Intermediate	Dietetic		rgency	□ cei	шаггаш
	Care	Administration	Nucl	ear Medicine		pport rvices
	Skilled Nursing	Autilistration				

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	all buildings on the hospital campus sho or by replacement and the type of servic								
Building Number: BLD-03711	Building Name: Electrical Equip	oment Building							
Configuration: N/A									
Type of Service Provided									
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy						
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal Dialysis						
Pediatric/Adol escent	Clinical Lab	Recovery							
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery						
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Plant						
Intermediate	Dietetic	Emergency	Central Flant						
Care	Administration	Nuclear Medicine	Support Services						
Skilled Nursing									

Report Year: 20	11858	Methodist Ho	spital of Southern Califo	ornia	Arcadia		Page:32 of 61
Report the final cor requirements whetl per Section 13006	her by retrofit or by	dings on the replacement	hospital campus showi and the type of service	ng how e that will l	ach building will comply on provided in each gene	with the SPC- ral acute care	5/NPC-4 or 5 hospital building
Building Number:	BLD-05461	Building Na	me: North Tower				
Configuration:	N/A						
Type of Service	Provided						
☐ Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Int	tensiveCare		Anesthesia		Obstetrical Recovery	F	Renal Dialysis
	ediatric/Adol cent		Clinical Lab		Recovery		
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Gurgery
	ostetrical nte/Postprtum		Pharmaceutical		Emergency		Central Plant
	termediate are		Dietetic		Nuclear Medicine		Support
Sk	cilled Nursing		Administration			<u> </u>	Services

eport Year: 2017 1188	Methodist Hosp	oital of Southern Californ	nia	Arcadia		Page:33 of 61
Report the final configuration of equirements whether by retrofuler Section 130061(c)(5)	f all buildings on the ho it or by replacement ar	ospital campus showing and the type of service th	how ea at will be	ch building will comply e provided in each gene	with the SPC- eral acute care	5/NPC-4 or 5 e hospital building
uilding Number: BLD-0551	4 Building Name	e: Tower Lobby				
Configuration: N/A						
Type of Service Provided						
Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
IntensiveCare		Anesthesia		Obstetrical	F	Renal Dialysis
Pediatric/Adol escent		Clinical Lab		Recovery		
Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
Obstetrical Ante/Postprtur		Pharmaceutical		-		Destart Disease
Intermediate		Dietetic		Emergency		Central Plant
Care				Nuclear Medicine		Support Services
Skilled Nursing		Administration				

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Report the final con requirements wheth per Section 130061	ner by retrofit or by re	lings on the eplacement	hospital campus showin and the type of service t	g how e hat will t	ach building will comply w be provided in each gener	ith the SPC- al acute care	5/NPC-4 or 5 hospital building
Building Number:	BLD-05634	Building Nar	me: Generator Building)			
Configuration:	N/A						
Type of Service	Provided						
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Inte	ensiveCare		Anesthesia		Obstetrical Recovery	F	Renal Dialysis
	diatric/Adol cent		Clinical Lab		Recovery		
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Gurgery
	stetrical te/Postprtum		Pharmaceutical		Emergency	По	Central Plant
	ermediate		Dietetic				
Car Ski	re illed Nursing		Administration	Ш	Nuclear Medicine		Support Services
	I						

Report Year: 20	11858	Methodist Hos	pital of Southern Califo	rnia	Arcadia		Page:35 of 61
Report the final cor requirements wheth per Section 130061	ner by retrofit or by	dings on the he	nospital campus showin and the type of service t	g how e hat will b	ach building will comply wo be provided in each gener	rith the SPC al acute car	-5/NPC-4 or 5 e hospital building
Building Number:	BLD-05635	Building Nan	ne: Switchgear Buildir	ıg			
Configuration:	N/A						
Type of Service	Provided						
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Int	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	diatric/Adol cent		Clinical Lab		Recovery		
	ychiatric ırsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	ostetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant
Int Ca	ermediate ire		Dietetic		Nuclear Medicine	П	Support
Sk	illed Nursing		Administration	_			Services

	2017 11858	Methodist Ho	spital of Southern Cal	ifornia	Arcadia		Page:36 of 61
Report the final or equirements who er Section 1300	ether by retrofit or by i	dings on the replacement	hospital campus shov and the type of servic	ving how e e that will l	ach building will comply be provided in each gen	with the SF eral acute o	PC-5/NPC-4 or 5 care hospital building
uilding Number	r: BLD-05636	Building Na	me: Switchgear She	d			
Configuration:	N/A						
Type of Servi	ice Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant
	Intermediate		Dietetic				COMMIT IGHT
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services

Report Year: 2017	11858 Meth	odist Hospital of	Southern Californ	nia	Arcadia		Page:37 of 61		
Report the final configurequirements whether per Section 130061(c)	by retrofit or by repla								
Building Number: BI	LD-05848 Bui	Iding Name: Be	erger Tower Patie	nt Cano	ру				
Configuration: N	Configuration: N/A								
Type of Service Pr	ovided								
Nursir	ng	Surgica	al		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
Intens	siveCare	Anesth	nesia		Obstetrical Recovery		Renal Dialysis		
Pedia escen	tric/Adol t	Clinica	al Lab		Recovery				
Psych Nursir		Radiol Imagin	logical/ ng		Newborn/ WellBaby		Outpatient Surgery		
Obste Ante/l	etrical Postprtum	Pharm	naceutical		Emergency		Central Plant		
	nediate	Dieteti	ic		- '				
Care Skilled	d Nursing	Admin	istration		Nuclear Medicine		Support Services		
	'								

eport Year: 2017	11858 M	Methodist Hospita	al of Southern California	Arcadia	Page:38 of 61
Include information on 4D and SPC-5 per Sec	the number of tion 130061(e	inpatient beds b	by type of Service provided by b	ouildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLC	D-00358	Building Na	ame: Main Hospital		
Type of Service Prov	rided				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X IntensiveCare	Inpatient Beds	9	Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services
Skilled Nursing	Inpatient Beds	0	X Administration		
Total Beds this Building		9			

eport Year: 2017	11858	Methodist Hospital	of Southern California	Arcadia	Page:39 of 61
Include information on 4D and SPC-5 per Sec			type of Service provided by	buildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-00360	Building Nar	me: Utility Building / Centr	al Plant	
Type of Service Prov	vided				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	X Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

eport Year: 2017	11858	Methodist Hospital	of Southern California	Arcadia	Page:40 of 61
Include information or 4D and SPC-5 per Se			y type of Service provided by	buildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-00365	Building Na	me: Hoefflin Wing		
Type of Service Pro	vided				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X IntensiveCare	Inpatient Beds	20	Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	X Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	X Nuclear Medicine	X Support Services
Skilled Nursing	Inpatient Beds	0	X Administration		
Total Beds this Building		20			

port Year: 2017	11858	Methodist Hospital	of Southern California	Arcadia	Page:41 of 61
Include information on 4D and SPC-5 per Sec			type of Service provided by I	ouildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-00366	Building Nar	me: Surgical Wing		
Type of Service Pro	<u>vided</u>				
Nursing	Inpatient Beds	0	X Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	X Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	X Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

Report Yea	ar: 2017	11858	Methodist Hospi	tal of South	ern California		Arcadia		Page:42 of 61
	information on t SPC-5 per Sect			by type of S	Service provided by l	ouildir	ngs that are classified a	s SPC-2	c, SPC-3, SPC-4, SPC-
Building	g Number: BLD	0-00367	Building N	lame: Pa	tient Tower				
Type o	of Service Prov	ided							
X	Nursing	Inpatient Beds	108		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X I	ntensiveCare	Inpatient Beds	17		Anesthesia	_	_		
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab		X Obstetrical Recovery	X	Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging		X Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum	Inpatient Beds	24		Pharmaceutical	[Emergency		Central Plant
	ntermediate Care	Inpatient Beds	0		Dietetic	[Nuclear Medicine	X	Support Services
X	Skilled Nursing	Inpatient Beds	30	X	Administration				
	Fotal Beds this Building		179						

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Include information on 4D and SPC-5 per Sec			type of Service provided by	buildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-03711	Building Nar	me: Electrical Equipment	Building	
Type of Service Prov	vided				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	X Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

port Year: 2017	11858	Methodist Hospita	of Southern California	Arcadia	Page:44 of 61
Include information on 4D and SPC-5 per Se			type of Service provided b	y buildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-05461	Building Na	me: North Tower		
Type of Service Pro	vided				
Nursing	Inpatient Beds	120	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	20	Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	X Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	X Pharmaceutical	X Emergency	Central Plant
Intermediate Care	Inpatient Beds	0	X Dietetic	Nuclear Medicine	X Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		140			

port Year: 2017	11858	Methodist Hospital	of Southern California	Arcadia	Page:45 of 61
Include information on 4D and SPC-5 per Sec			type of Service provided by b	ouildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-05514	Building Nar	me: Tower Lobby		
Type of Service Pro	vided				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

port Year: 2017	11858	Methodist Hospital	of Southern California	Arcadia	Page:46 of 61
Include information on 4D and SPC-5 per Sec			type of Service provided by	buildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-05634	Building Nar	me: Generator Building		
Type of Service Pro	<u>vided</u>				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	X Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

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Include information on 4D and SPC-5 per Sec			type of Service provided by b	ouildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-05635	Building Na	me: Switchgear Building		
Type of Service Pro	vided				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia	_	_
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	X Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

port Year: 2017	11858	Methodist Hospital	of Southern California	Arcadia	Page:48 of 61
Include information on 4D and SPC-5 per Sec			type of Service provided by b	ouildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-05636	Building Nar	me: Switchgear Shed		
Type of Service Prov	vided				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia	_	
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	X Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

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Include information on 4D and SPC-5 per Sec			type of Service provided by	buildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-05848	Building Nar	me: Berger Tower Patient	Canopy	
Type of Service Prov	vided				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

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Building Number: BLD-00358	Building Name: Main Hospital		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 9 Inpatient Days	0 Inpatient 0 Inpatient 0 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 Days	Unit Service 9	

Report Year: 2017 11858 Methodist Hospital of Southern California Arcadia Page:51 of 61 Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e) BLD-00360 Utility Building / Central Plant **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Days Bed Days Bed Bed Perinatal (Exclude Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Bed Bed Days Bed Days **Intensive Care Newborn Pediatric Intermediate Care** Nursery Inpatient 0 Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care** Disabled Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Days Bed Days Bed ol 0

Report Year: 2017 11858 Methodist Hospital of Southern California Arcadia Page:52 of 61 Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e) BLD-00365 Hoefflin Wing **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 10l 2260 0 Days Days Bed Days Bed Bed Perinatal (Exclude Newborn / GYN) Burn **Skilled Nursing** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Bed Bed Days Bed Days **Intensive Care Newborn Pediatric Intermediate Care** Nursery Inpatient 0 Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care** Disabled Center Inpatient 10 Inpatient 1425 Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Days Bed Days Bed 20 20

Report Year: 2017 11858 Methodist Hospital of Southern California Arcadia Page:53 of 61 Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e) BLD-00366 Surgical Wing **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Days Bed Days Bed Bed Perinatal (Exclude Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Bed Bed Days Bed Days **Intensive Care Newborn Pediatric Intermediate Care** Nursery Inpatient 0 Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care** Disabled Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Days Bed Days Bed ol 0

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

4D and SPC-5 per Section 130061(e)					
Building Number: BLD-00367 Build	ng Name: Patient Tower				
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 108 Inpatient 24877 Bed Days	Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days			
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing			
Inpatient 24 Inpatient 4889 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Days			
Pediatric	Intensive Care Newborn Nursery	Intermediate Care			
Inpatient 0 Inpatient 0 Days	Inpatient 17 Inpatient 764 Bed Days	Inpatient 0 Inpatient 0 Days			
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled			
Inpatient 0 Inpatient 0 Days	Inpatient 30 Inpatient 6331 Bed Days	Inpatient 0 Inpatient 0 Days			
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per			
Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	Unit Service			
Days	Deu — Days —	179 179			

Report Year: 2017 11858 Methodist Hospital of Southern California Arcadia Page:55 of 61 Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e) BLD-03711 Electrical Equipment Building **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Days Bed Days Bed Bed Perinatal (Exclude Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Bed Bed Days Bed Days **Intensive Care Newborn Pediatric Intermediate Care** Nursery Inpatient 0 Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care** Disabled Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Days Bed Days Bed ol 0

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

4D and SPC-5 per Section 130061(e)						
Building Number: BLD-05461 Build	ng Name: North Tower					
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric				
Inpatient 120 Inpatient 27641 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days				
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing				
Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days				
Pediatric	Intensive Care Newborn Nursery	Intermediate Care				
Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Days				
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled				
Inpatient 10 Inpatient 1425 Bed Days	Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days				
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per				
Inpatient 10 Inpatient 2667 Bed Days	Inpatient 0 Inpatient 0 Days	Unit Service				
Days	Deu —— Days ———	140 140				

Report Year: 2017 11858 Methodist Hospital of Southern California Arcadia Page:57 of 61 Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e) BLD-05514 Tower Lobby **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Days Bed Days Bed Bed Perinatal (Exclude Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Bed Bed Days Bed Days **Intensive Care Newborn Pediatric Intermediate Care** Nursery Inpatient 0 Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care** Disabled Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Days Bed Days Bed ol 0

Report Year: 2017 11858 Methodist Hospital of Southern California Arcadia Page:58 of 61 Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e) BLD-05634 Generator Building **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Days Bed Days Bed Bed Perinatal (Exclude Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Bed Bed Days Bed Days **Intensive Care Newborn Pediatric Intermediate Care** Nursery Inpatient 0 Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care** Disabled Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Days Bed Days Bed ol 0

Report Year: 2017 11858 Methodist Hospital of Southern California Arcadia Page:59 of 61 Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e) BLD-05635 Switchgear Building **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Days Bed Days Bed Bed Perinatal (Exclude Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Bed Bed Days Bed Days **Intensive Care Newborn Pediatric Intermediate Care** Nursery Inpatient 0 Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care** Disabled Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Days Bed Days Bed ol 0

Report Year: 2017 11858 Methodist Hospital of Southern California Arcadia Page:60 of 61 Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e) BLD-05636 Switchgear Shed **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Days Bed Days Bed Bed Perinatal (Exclude Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Bed Bed Days Bed Days **Intensive Care Newborn Pediatric Intermediate Care** Nursery Inpatient Inpatient 0 Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care** Disabled Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Days Bed Days Bed ol 0

Report Year: 2017 11858 Methodist Hospital of Southern California Arcadia Page:61 of 61 Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e) BLD-05848 Berger Tower Patient Canopy **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Days Bed Days Bed Bed Perinatal (Exclude Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Bed Bed Days Bed Days **Intensive Care Newborn Pediatric Intermediate Care** Nursery Inpatient 0 Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care** Disabled Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Days Bed Days Bed ol 0