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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:	11966		
Facility Name:	Pomona	a Valley Hospital Medical Center	
Address:	1798 N	. Garey Ave.	
City:	Pomona	a	
Hospital Owner/Lice	ensee:	Pomona Valley Hospital Medical Center	
Year of Repo	orting:	2017	
Contact 1 e-mail Add	dress:	[Confidential data left blank intentionally.]	
Contact 2 e-mail Add	dress:	[Confidential data left blank intentionally.]	
Contact 3 e-mail Add	lress::	[Confidential data left blank intentionally.]	
Name of Subr	mitter:	Richard Kuyper	
Submission	Date:	1/4/2018 4:24:56 PM	

Report Y	'ear: 2017 11966	Pomona Valley Hospital Medica	I Center	Pomona		Page:2 of 91	
rebuild, r 130060 c	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- 00414	1913 Building	1798 N. Garey Ave.	Remove	N/A	01/01/2020	07/01/2019	
BLD- 00415	1928 Building	1798 N. Garey Ave.	Remove	N/A	01/01/2020	07/01/2019	
BLD- 05176	1958 Lobby Addition	1798 N. Garey Ave.	Remove	N/A	01/01/2020	07/01/2019	
BLD- 05202	1958 Building (Emergency Wing)	1798 N. Garey Ave.	Remove	N/A	01/01/2020	07/01/2019	

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No data reported	I for Sectio	on 130061(c)(1)(C).		

Report Year: 2017 11966	Pomona Valley Hospital Medical Center	Pomona	Page:4 of 91			
Provide the number of inpatient	Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)					
Building Number: BLD-00414	Building Name: 197	13 Building				
Type of Service Provided						
Nursing Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery			
IntensiveCare Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby			
Pediatric/Adol Inpatient escent Beds	0 Inpatient Days 0	Clinical Lab	Emergency			
Psychiatric Inpatient Nursing Beds	0 Inpatient Days 0	Radiological/	Nuclear Medicine			
Obstetrical Inpatient Ante/Postprtum Beds	0 Inpatient Days 0	Dietetic	Rehabilitation Therapy			
Intermediate Inpatient Care Beds	0 Inpatient Days 0	Administration	Renal Dialysis			
Skilled Nursing Inpatient Beds	0 Inpatient Days 0	Services	Outpatient Surgery			
	Total Beds this 0 Building	Obstetrical Cesarean/Deliv	Central Plant			
OSHPD FDD SB499 Report	Data Last Update: 01/04/2018 Su	ubmission Date: 01/04/2018 Pri	nted: 1/6/2018 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-00415	Building Name: 192	8 Building			
Type of Service Provi	ided					
Nursing	Inpatient Beds	0 Inpatient 0 Days	X 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	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	X Outpatient Surgery		
	Deus	Total Beds this 0 Building	Obstetrical Cesarean/Deliv	Central Plant		
OSHPD FDD SB499 Report	t	Data Last Update: 01/04/2018 Sul	bmission Date: 01/04/2018	Printed: 1/6/2018 6:30 AM		

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Provide the number of i	inpatient be	eds and patient days per type of service pe	r building per Section 13006	1(c)(1)(F)		
Building Number: BLD-05176 Building Name: 1958 Lobby Addition						
Type of Service Provi	<u>ded</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		
	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy		
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis		
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	X Support Services	Outpatient Surgery		
		Total Beds this 0 Building	Cesarean/Deliv	Central Plant		
OSHPD FDD SB499 Report		Data Last Update: 01/04/2018 Su	bmission Date: 01/04/2018	Printed: 1/6/2018 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-05202	Building Name: 198	58 Building (Emergency Wing)		
Type of Service Prov	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	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	X Administration	Renal Dialysis		
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services	Outpatient Surgery		
		Total Beds this 0 Building	Cesarean/Deliv	Central Plant		
OSHPD FDD SB499 Repor	t	Data Last Update: 01/04/2018 Su	ubmission Date: 01/04/2018	Printed: 1/6/2018 6:30 AM		

Report Year: 201	7 11966 Pomona \	/alley Hospital Medica	al Center P	omona	Page:8 of 91
Provide the number o	of Inpatient beds and patien	t days per type of unit	t per building per Sectior	n 130061(c)(1)(F)	
Building Number:	BLD-00414 Build	ing Name: 1913	3 Building		
Medical / Surgical (I	nclude GYN)	Acute Respiratory	Care	Acute Psychiatric	
	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	lewborn / GYN)	Burn		Skilled Nursing	
	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 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developn Disabled	nent
	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 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0
OSHPD FDD SB499 Re	eport Data Last Up	odate: 01/04/2018	Submission Date:	01/04/2018 Printed	d: 1/6/2018 6:30 AM

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Provide the number of Inpatient beds and	d patient days per type of unit per building per Sec	ction 130061(c)(1)(F)	
Building Number: BLD-00415	Building Name: 1928 Building		
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 (excluse 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 Card	
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 / development Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	nt 0
Coronary Care	Chemical Dependency		Beds this ng Per e
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	0	0

Report Year: 20	017 11966 Pomona	Valley Hospital Medic	al Center	Pomona	Page:10 of 91
Provide the number	r of Inpatient beds and patier	t days per type of uni	t per building per Secti	on 130061(c)(1)(F)	
Building Number:	BLD-05176 Build	ling Name: 1958	3 Lobby Addition		
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	wborn	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 / developm Disabled	nent
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0

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Provide the number of Inpatient beds ar	Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)					
Building Number: BLD-05202 Building Name: 1958 Building (Emergency Wing)						
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 (excluse 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 Card				
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	ont 0			
Intensive Care	Rehabilitation Center	Int. Care / development Disabled				
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	nt 0			
Coronary Care	Chemical Dependency		Beds this ng Per ce			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	0	0			

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Pomona Valley Hospital Medical Center

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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-00411	1972 Building - ICU/Emergency	Remain
BLD-00412	D&T Addition	Remain
BLD-00413	Women's Center	Remain
BLD-00414	1913 Building	Remove
BLD-00415	1928 Building	Remove
BLD-00416	1953 Building	Remain
BLD-00417	1961 Building	Remain
BLD-00418	1963 Building - Cafeteria	Remain
BLD-02838	Building 01A	Remain
BLD-02839	Building 01B Canopy	Remain
BLD-03850	Boiler Building	Remain
BLD-03877	1961 Dining Building	Remain
BLD-05176	1958 Lobby Addition	Remove
BLD-05202	1958 Building (Emergency Wing)	Remove
BLD-05669	2013 Vestibule	Remain
BLD-05670	2013 Low Canopy	Remain
BLD-05671	2013 High Canopy	Remain

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proposed new buildir	ngs to be cor	structed at this or another site.		

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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-00414	1913 Building		Removal 07/01/	2019	
Planned Uses for the building to	be removed from acute care ser	vice:			
Planned use for building: N/A	Jur	isdiction:			
Inpatient services currently deliv	rered in the building:				
Nursing	Surgical	Obstetrical Cesarean/D		bilitation apy	
IntensiveCare	Anesthesia		_		
Pediatric/Adol escent	Clinical Lab	Obstetrical Recovery	Rena	l Dialysis	
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	X Outpa Surge		
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Centr	al Plant	
Intermediate Care	Dietetic	Nuclear Medicine	Supp Servi		
Skilled Nursing	Administration		Geivi		
OSHPD FDD SB499 Report	Data Last Update: 01/04/20	18 Submission Date	e: 01/04/2018 Printed	I: 1/6/2018 6:30 AM	

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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-0041	5 1928 Building		Removal 07/01/2019 Date:		
Planned Uses for the building t	o be removed from acute care serv	vice:			
Planned use for building: N/A	Juri	isdiction:]		
Inpatient services currently deli	vered in the building:				
Nursing	X Surgical	Obstetrical Cesarean/Del	iv Rehabilitatio	n	
IntensiveCare	Anesthesia		По Погару		
Pediatric/Adol escent	Clinical Lab	Obstetrical Recovery	Renal Dialys	is	
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	X Outpatient Surgery		
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Plan	t	
Intermediate Care	Dietetic	Nuclear Medicine	Support Services		
Skilled Nursing	Administration		Genvices		
OSHPD FDD SB499 Report	Data Last Update: 01/04/20	18 Submission Date:	01/04/2018 Printed: 1/6/20	018 6:30 AM	

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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-05176	1958 Lobby Add	dition	Removal 07/01/2019 Date:		
Planned Uses for the building to	be removed from acute care serv	ice:			
Planned use for building: N/A	Juri	sdiction:]		
Inpatient services currently delive	vered in the building:				
Nursing	Surgical	Obstetrical Cesarean/Del	iv Rehabilitati Therapy	on	
IntensiveCare	Anesthesia				
Pediatric/Adol escent	Clinical Lab	Obstetrical Recovery	Renal Dialy	vsis	
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery		
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Pla	nt	
Intermediate Care	Dietetic	Nuclear Medicine	X Support		
Skilled Nursing	Administration		<u> </u>		
OSHPD FDD SB499 Report	Data Last Update: 01/04/201	8 Submission Date:	01/04/2018 Printed: 1/6/2	2018 6:30 AM	

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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-05202	1958 Building	(Emergency Wing)	Removal 07/01/2019 Date:)	
Planned Uses for the building to be	e removed from acute care se	rvice:			
Planned use for building: N/A	Jı	urisdiction:			
Inpatient services currently deliver	ed in the building:				
Nursing	Surgical		Rehabilita	ition	
IntensiveCare	Anesthesia	Cesarean/De	eliv L Therapy		
Pediatric/Adol escent	Clinical Lab	Obstetrical Recovery	Renal Dia	lysis	
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatien Surgery	t	
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Pl	ant	
Intermediate Care	Dietetic	Nuclear Medicine	Support Services		
Skilled Nursing	X Administration				
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Provide the number of inpatient beds and patient days per unit for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).				
Building Nbr: BLD-00414 Building Name:	1913 Building	Year of Information: 2014		
Unit Type		Information Current As Of:		
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0	
Perinatal (exclude Neborn/GYN)	Burn	Skilled Nursing		
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0	
Intensive Care	Rehabilitation Center	Int. Care/Developmentally Dis	abled	
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0	
Coronary Care	Chemical Dependency	Total Beds this		
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Building per Unit	0	
	2000 20,0	Total Beds this Building per Service	0	
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Provide the number of inpatient beds and patient days per unit for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).					
Building Nbr: BLD-00414 Building Name:	1913 Building	Year of Information: 2015	5		
Unit Type		Information Current As Of:			
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Perinatal (exclude Neborn/GYN)	Burn	Skilled Nursing			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Pediatric	Intensive Care Newborn Nursery	Intermediate Care			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Intensive Care	Rehabilitation Center	Int. Care/Developmentally Dis	abled		
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Coronary Care Inpatient 0 Patient 0 Beds Days	Chemical Dependency Inpatient 0 Patient 0 Beds Days	Total Beds this Building per Unit Total Beds this Building per Service	0		
OSHPD FDD SB499 Report Data Last	: Update: 01/04/2018 Submission Date	: 01/04/2018 Printed: 1/6/20	19 6:20 AM		

Report Year: 2017 11966 Pomon	a Valley Hospital Medical Center	Pomona	Page:20 of 91		
Provide the number of inpatient beds and patient days per unit for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).					
Building Nbr: BLD-00414 Building Name:	1913 Building	Year of Information: 2016	3		
Unit Type		Information Current As Of:			
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Perinatal (exclude Neborn/GYN)	Burn	Skilled Nursing			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Pediatric	Intensive Care Newborn Nursery	Intermediate Care			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Intensive Care	Rehabilitation Center	Int. Care/Developmentally Dis	abled		
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Coronary Care Inpatient 0 Patient 0	Chemical Dependency Inpatient 0 Patient 0	Total Beds this Building per Unit	0		
Beds Days	Beds Days	Total Beds this			
		Building per Service	0		
OSHPD FDD SB499 Report Data Last	Update: 01/04/2018 Submission Date:	: 01/04/2018 Printed: 1/6/20	18 6:30 AM		

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Provide the number of inpatient beds and patient days per unit for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).					
Building Nbr: BLD-00415 Building Name:	1928 Building	Year of Information: 2014	L .		
Unit Type		Information Current As Of:			
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Perinatal (exclude Neborn/GYN)	Burn	Skilled Nursing			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Pediatric	Intensive Care Newborn Nursery	Intermediate Care			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Intensive Care	Rehabilitation Center	Int. Care/Developmentally Dis	abled		
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Coronary Care Inpatient 0 Patient 0 Beds Days	Chemical DependencyInpatient0Patient0BedsDays		0		
		Total Beds this Building per Service	0		
OSHPD FDD SB499 Report Data Last	Update: 01/04/2018 Submission Date	: 01/04/2018 Printed: 1/6/20	18 6:30 AM		

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Provide the number of inpatient beds and patient days per unit for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).					
Building Nbr: BLD-00415 Building Name:	1928 Building	Year of Information: 2015	i l		
Unit Type		Information Current As Of:			
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Perinatal (exclude Neborn/GYN)	Burn	Skilled Nursing			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Pediatric	Intensive Care Newborn Nursery	Intermediate Care			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Intensive Care	Rehabilitation Center	Int. Care/Developmentally Dis	abled		
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Coronary Care Inpatient 0 Patient 0 Beds Days	Chemical Dependency Inpatient 0 Patient 0 Beds Days	Total Beds this Building per Unit	0		
Duyo	Dayo	Total Beds this Building per Service	0		
OSHPD FDD SB499 Report Data Last	Update: 01/04/2018 Submission Date:	01/04/2018 Printed: 1/6/20	18 6:30 AM		

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Provide the number of inpatient beds and patient days per unit for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).						
Building Nbr: BLD-00415 Building Name:	1928 Building	Year of Information: 2016	3			
Unit Type		Information Current As Of:				
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric				
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0			
Perinatal (exclude Neborn/GYN)	Burn	Skilled Nursing				
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0			
Pediatric	Intensive Care Newborn Nursery	Intermediate Care				
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0			
Intensive Care	Rehabilitation Center	Int. Care/Developmentally Dis	abled			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0			
Coronary Care Inpatient 0 Patient 0	Chemical Dependency Inpatient 0 Patient 0	Total Beds this Building per Unit	0			
Beds Days	Beds Days	Total Beds this Building per Service	0			
OSHPD FDD SB499 Report Data Last	Update: 01/04/2018 Submission Date	: 01/04/2018 Printed: 1/6/20	18 6:30 AM			

Report Year: 2017 11966 Pomo	na Valley Hospital Medical Center	Pomona	Page:24 of 91		
Provide the number of inpatient beds and patient days per unit for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).					
Building Nbr: BLD-05176 Building Name:	1958 Lobby Addition	Year of Information: 2014	1		
Unit Type		Information Current As Of:			
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Perinatal (exclude Neborn/GYN)	Burn	Skilled Nursing			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Pediatric	Intensive Care Newborn Nursery	Intermediate Care			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Intensive Care	Rehabilitation Center	Int. Care/Developmentally Dis	abled		
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Coronary Care Inpatient 0 Patient 0 Beds Days	Chemical Dependency Inpatient 0 Patient 0 Beds Days	Total Beds this Building per Unit Total Beds this Building per Service	0		
OSHPD FDD SB499 Report Data Las	t Update: 01/04/2018 Submission Date	e: 01/04/2018 Printed: 1/6/20			

care services per Section 130061(c)(2)(D). Building Nbr: BLD-05176 Building Nbr: BLD-05176 Building Name: 1958 Lobby Addition Year of Information: 2015 Unit Type Information Current As Of: Medical/Surgical (include GYN) Acute Respiratory Care						
Unit Type Information Current As Of: Medical/Surgical (include GYN) Acute Respiratory Care Acute Psychiatric	Provide the number of inpatient beds and patient days per unit for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).					
Medical/Surgical (include GYN) Acute Respiratory Care Acute Psychiatric						
Inpatient 0 Patient 0 Inpatient 0 Patient 0 Patient 0 Beds Days Beds Days Beds Days Days						
Perinatal (exclude Neborn/GYN) Burn Skilled Nursing						
Inpatient0Patient0Inpatient0Patient0Inpatient0Patient0BedsDaysDaysDaysDaysBedsDaysDaysDays						
Pediatric Intensive Care Newborn Nursery Intermediate Care						
Inpatient0Patient0Inpatient0Patient0Inpatient0Patient0BedsDaysBedsDaysBedsDaysBedsDaysDays						
Intensive Care Rehabilitation Center Int. Care/Developmentally Disabled						
Inpatient0Patient0Inpatient0Patient0Inpatient0Patient0BedsDaysDaysDaysDaysDaysDaysDaysDaysDays						
Coronary Care Chemical Dependency Total Beds this 0 Inpatient 0 Patient 0 Patient 0 Beds Days Beds Days Total Beds this 0 Total Beds this 0 Days 0 0	J ¬					
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Provide the number of inpatient beds and patient days per unit for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).					
Building Nbr: BLD-05176 Building Name:	1958 Lobby Addition	Year of Information: 2016	;		
Unit Type		Information Current As Of:			
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Perinatal (exclude Neborn/GYN)	Burn	Skilled Nursing			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Pediatric	Intensive Care Newborn Nursery	Intermediate Care			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Intensive Care	Rehabilitation Center	Int. Care/Developmentally Dis	abled		
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Coronary Care Inpatient 0 Patient 0 Beds Days	Chemical Dependency Inpatient 0 Patient 0 Beds Days	Total Beds this Building per Unit Total Beds this Building per Service	0		
OSHPD FDD SB499 Report Data Lasi	: Update: 01/04/2018 Submission Date:	: 01/04/2018 Printed: 1/6/20			

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Provide the number of inpatient beds and patient days per unit for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).					
Building Nbr: BLD-05202 Building Name:	1958 Building (Emergency Wing)	Year of Information: 2014			
Unit Type		Information Current As Of:			
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Perinatal (exclude Neborn/GYN)	Burn	Skilled Nursing			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Pediatric	Intensive Care Newborn Nursery	Intermediate Care			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Intensive Care	Rehabilitation Center	Int. Care/Developmentally Dis	abled		
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Coronary Care Inpatient 0 Patient 0 Beds Days	Chemical Dependency Inpatient 0 Patient 0 Beds Days	Total Beds this Building per Unit	0		
Deus Days	Deus Days	Total Beds this Building per Service	0		
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Provide the number of inpatient beds and patient days per unit for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).					
Building Nbr: BLD-05202 Building Name:	1958 Building (Emergency Wing)	Year of Information: 2015	5		
Unit Type		Information Current As Of:			
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Perinatal (exclude Neborn/GYN)	Burn	Skilled Nursing			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Pediatric	Intensive Care Newborn Nursery	Intermediate Care			
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Intensive Care	Rehabilitation Center	Int. Care/Developmentally Dis	abled		
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0		
Coronary Care Inpatient 0 Patient 0 Beds Days	Chemical Dependency Inpatient 0 Patient 0 Beds Days	Total Beds this Building per Unit	0		
Deus Days	Deus Days	Total Beds this Building per Service	0		
OSHPD FDD SB499 Report Data Last	Update: 01/04/2018 Submission Date:	01/04/2018 Printed: 1/6/20	18 6:30 AM		

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Provide the number of inpatient beds and pa care services per Section 130061(c)(2)(D).	tient days per unit for the year of 2013, 2014,	and 2015 for buildings to be remo	oved from acute
Building Nbr: BLD-05202 Building Name:	1958 Building (Emergency Wing)	Year of Information: 2016	3
Unit Type		Information Current As Of:	
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0
Perinatal (exclude Neborn/GYN)	Burn	Skilled Nursing	
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0
Intensive Care	Rehabilitation Center	Int. Care/Developmentally Dis	abled
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0
Coronary Care	Chemical Dependency	Total Beds this	
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Building per Unit	0
	Doub Dayo	Total Beds this Building per Service	0
OSHPD FDD SB499 Report Data Las	t Update: 01/04/2018 Submission Date:	: 01/04/2018 Printed: 1/6/20	18 6:30 AM

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Provide the number of inpatient beds and patient days per type of service for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).					
Building Nbr: BLD-00414 Building Name:	1913 Building		Year of Information:	2014	
<u>Type of Services</u> Provided			Information Current As	10/20/2017	
Nursing Inpatient 0 Beds	Patient 0 Days	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
IntensiveCare Inpatient 0 Beds	Patient 0 Days	Anesthesia	Obstetrical	Renal Dialysis	
Pediatric/Adol Inpatient 0 escent Beds	Patient 0 Days	Clinical Lab	Recovery		
PsychiatricInpatient0NursingBeds	Patient 0 Days	Radiological/ Imaging	Newborn/ X WellBaby	Outpatient Surgery	
Obstetrical Inpatient 0 Ante/Postprtum Beds	Patient 0 Days	Pharmaceutic	al Emergency	Central Plant	
Intermediate Inpatient 0 Care Beds	Patient 0 Days	Dietetic	Nuclear Medicine] Support Services	
Skilled Nursing Inpatient 0 Beds	Patient 0 Days	Administration	1		
Total Beds this Building per service	0				
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-	Provide the number of inpatient beds and patient days per type of service for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).					
	Building 191 Name:	3 Building		Year of Information	: 2015	
<u>Type of Services</u> <u>Provided</u>				Information Current As Of:	10/20/2017	
Nursing Inpatien Beds	nt 0 Pat Day	ient 0 /s	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
IntensiveCare Inpatier Beds	nt 0 Pat Day	ient 0 /s	Anesthesia	Obstetrical	Renal Dialysis	
Pediatric/Adol Inpatier escent Beds	nt 0 Pat Day	ient 0 /s	Clinical Lab	Recovery		
Psychiatric Inpatier Nursing Beds	nt 0 Pati Day		Radiological Imaging	Newborn/ WellBaby	X Outpatient Surgery	
Obstetrical Inpatien Ante/Postprtum Beds	nt 0 Pati Day		Pharmaceuti	cal Emergency	Central Plant	
Intermediate Inpatier Care Beds	nt 0 Pati Day		Dietetic	Nuclear Medicine	Support Services	
Skilled Nursing Inpatien Beds	nt 0 Pati Day		Administratio	n		
Total Beds this Building p	er service	0				
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-	Provide the number of inpatient beds and patient days per type of service for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).					
Building Nbr: BLD-00414	Building 19 Name:	013 Building		Year of Information:	2016	
<u>Type of Services</u> <u>Provided</u>				Information Current As Of:	10/20/2017	
Nursing Inpatie Beds		atient 0 ays	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
IntensiveCare Inpatie Beds		atient 0 ays	Anesthesia	Obstetrical	Renal Dialysis	
Pediatric/Adol Inpatie escent Beds		atient 0 ays	Clinical Lab	Recovery		
Psychiatric Inpatie Nursing Beds		atient 0 ays	Radiological/ Imaging	Newborn/ WellBaby	X Outpatient Surgery	
Obstetrical Inpatie Ante/Postprtum Beds		atient 0 ays	Pharmaceutica	Emergency	Central Plant	
Intermediate Inpatie Care Beds		atient 0 ays	Dietetic	Nuclear Medicine	Support Services	
Skilled Nursing Inpatie Beds		atient 0 ays	Administration			
Total Beds this Building	per service	0				
OSHPD FDD SB499 Report	Data Last Upc	date: 01/04/2018	Submission Date:	01/04/2018 Printed:	1/6/2018 6:30 AM	

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Provide the number of inpatient beds and parent removed from acute care services per Section		ce for the year of 201	13, 2014, and 2015 for buildi	ings to be
Building Nbr: BLD-00415 Building Name:	1928 Building		Year of Information:	2014
<u>Type of Services</u> <u>Provided</u>			Information Current As	10/20/2017
Nursing Inpatient 0 Beds	Patient 0 Days	X Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare Inpatient 0 Beds	Patient 0 Days	Anesthesia	Obstetrical	Renal Dialysis
Pediatric/Adol Inpatient 0 escent Beds	Patient 0 Days	Clinical Lab	Recovery	
Psychiatric Inpatient 0 Nursing Beds	Patient 0 Days	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Inpatient 0 Ante/Postprtum Beds	Patient 0 Days	Pharmaceutica	I Emergency	Central Plant
Intermediate Inpatient 0 Care Beds	Patient 0 Days	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing Inpatient 0 Beds	Patient 0 Days	Administration		
Total Beds this Building per service	0			
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Report Year: 2017 11966 Por	ona Valley Hospital Medical	Center Pomona	Page:34 of 91			
	Provide the number of inpatient beds and patient days per type of service for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).					
Building Nbr: BLD-00415 Building Name:	1928 Building	Year of Information:	2015			
<u>Type of Services</u> <u>Provided</u>		Information Current As Of:	10/20/2017			
Nursing Inpatient Beds	Patient 0 Days	X Surgical Obstetrical Cesarean/Deliv	Rehabilitation Therapy			
IntensiveCare Inpatient Beds	Patient 0 Days	Anesthesia	Renal Dialysis			
Pediatric/Adol Inpatient content	Patient 0 Days	Clinical Lab				
Psychiatric Inpatient Unstigent	Patient 0 Days	Radiological/ Newborn/ Imaging WellBaby	X Outpatient Surgery			
Obstetrical Inpatient Ante/Postprtum Beds	Patient 0 Days	Pharmaceutical Emergency	Central Plant			
Intermediate Inpatient Care Beds	Patient 0 Days	Dietetic Nuclear Medicine	Support Services			
Skilled Nursing Inpatient G Beds	Patient 0 Days	Administration				
Total Beds this Building per service	0					
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Report Year: 2017 11	966 Pomona V	/alley Hospital Medical C	Center	omona	Page:35 of 91			
Provide the number of inpatient beds and patient days per type of service for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).								
Building Nbr: BLD-00415 Building Name: 1928 Building				Year of Information:	2016			
<u>Type of Services</u> <u>Provided</u>				Information Current As Of:	10/20/2017			
Nursing Inpatien Beds		Patient 0 Days	X Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy			
IntensiveCare Inpatien Beds		Patient 0 Days	Anesthesia	Obstetrical	Renal Dialysis			
Pediatric/Adol Inpatie escent Beds		Patient 0 Days	Clinical Lab	Recovery				
Psychiatric Inpatier Nursing Beds		Patient 0 Days	Radiological/ Imaging	Newborn/ WellBaby	X Outpatient Surgery			
Obstetrical Inpatien Ante/Postprtum Beds		Patient 0 Days	Pharmaceutica	Emergency	Central Plant			
Intermediate Inpatie Care Beds		Patient 0 Days	Dietetic	Nuclear [Medicine	Support Services			
Skilled Nursing Inpatien Beds		Patient 0 Days	Administration					
Total Beds this Building per service 0								
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Provide the number of inpatient beds and patient days per type of service for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).								
Building Nbr: BLD-05176 Building Nbr: 1958 Lobby Addition			Year of Information:	2014				
<u>Type of Services</u> Provided				Information Current As Of:	10/20/2017			
Nursing	Inpatient 0 Beds	Patient 0 Days	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy			
IntensiveCare	Inpatient 0 Beds	Patient 0 Days	Anesthesia	Obstetrical	Renal Dialysis			
Pediatric/Adol escent	Inpatient 0 Beds	Patient 0 Days	Clinical Lab	Recovery				
Psychiatric Nursing	Inpatient 0 Beds	Patient 0 Days	Radiological Imaging	/ Newborn/ [WellBaby	Outpatient Surgery			
Obstetrical Ante/Postprtum	Inpatient 0 Beds	Patient 0 Days	Pharmaceut	ical Emergency [Central Plant			
Intermediate Care	Inpatient 0 Beds	Patient 0 Days	Dietetic	Nuclear Medicine	X Support Services			
Skilled Nursing	Inpatient 0 Beds	Patient 0 Days	Administrati	on				
Total Beds this Building per service 0								
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Provide the number of inpatient beds and patient days per type of service for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).						
Building Nbr: BLD-	05176 Building Name:	1958 Lobby Addition		Year of Information:	2015	
<u>Type of Services</u> <u>Provided</u>				Information Current As Of:	10/11/2017	
Nursing	Inpatient 0 Beds	Patient 0 Days	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
IntensiveCare	Inpatient 0 Beds	Patient 0 Days	Anesthesia	Obstetrical	Renal Dialysis	
Pediatric/Adol escent	Inpatient 0 Beds	Patient 0 Days	Clinical Lab			
Psychiatric Nursing	Inpatient 0 Beds	Patient 0 Days	Radiologica Imaging	I/ Newborn/ [WellBaby	Outpatient Surgery	
Obstetrical Ante/Postprtum	Inpatient 0 Beds	Patient 0 Days	Pharmaceu	tical Emergency	Central Plant	
Intermediate Care	Inpatient 0 Beds	Patient 0 Days	Dietetic	Nuclear [Medicine	X Support Services	
Skilled Nursing	Inpatient 0 Beds	Patient 0 Days	Administrati	ion		
Total Beds this B	Building per service	0				
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	Provide the number of inpatient beds and patient days per type of service for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section $130061(c)(2)(D)$.						
<u>Type of Services</u> Provided	Type of Services Of: 10/20/2017						
Nursing	Inpatient 0 Beds	Patient 0 Days	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
IntensiveCare	Inpatient 0 Beds	Patient 0 Days	Anesthesia	Obstetrical	Renal Dialysis		
Pediatric/Adol escent	Inpatient 0 Beds	Patient 0 Days	Clinical Lab		Renai Dialysis		
Psychiatric Nursing	Inpatient 0 Beds	Patient 0 Days	Radiologica Imaging	I/ Newborn/ WellBaby	Outpatient Surgery		
Obstetrical Ante/Postprtum	Inpatient 0 Beds	Patient 0 Days	Pharmaceu	tical Emergency	Central Plant		
Intermediate Care	Inpatient 0 Beds	Patient 0 Days	Dietetic	Nuclear X Medicine	Support Services		
Skilled Nursing	Inpatient 0 Beds	Patient 0 Days	Administrati	on			
Total Beds this Bu	uilding per service	0					
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	Provide the number of inpatient beds and patient days per type of service for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).							
Building Nbr: BLD-0	Building Nbr: BLD-05202 Building Name: 1958 Building (Emergency Wing) Year of Information: 2014							
<u>Type of Services</u> Provided				Information Current As	10/20/2017			
Nursing	Inpatient 0 Beds	Patient 0 Days	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy			
IntensiveCare	Inpatient 0 Beds	Patient 0 Days	Anesthesia	Obstetrical				
Pediatric/Adol escent	Inpatient 0 Beds	Patient 0 Days	Clinical Lab	Recovery	Renal Dialysis			
Psychiatric Nursing	Inpatient 0 Beds	Patient 0 Days	Radiological Imaging	/ Newborn/ WellBaby	Outpatient Surgery			
Obstetrical Ante/Postprtum	Inpatient 0 Beds	Patient 0 Days	Pharmaceut	ical Emergency	Central Plant			
Intermediate Care	Inpatient 0 Beds	Patient 0 Days	Dietetic	Nuclear Medicine	Support Services			
Skilled Nursing	Inpatient 0 Beds	Patient 0 Days	X Administratio	on				
Total Beds this B	Building per service	0						
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	Provide the number of inpatient beds and patient days per type of service for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).						
Building Nbr: BLD-0	Building Nbr: BLD-05202 Building Mame: 1958 Building (Emergency Wing) Year of Information: 2015						
<u>Type of Services</u> <u>Provided</u>				Information Current As Of:	10/20/2017		
Nursing	Inpatient 0 Beds	Patient 0 Days	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
IntensiveCare	Inpatient 0 Beds	Patient 0 Days	Anesthesia	Obstetrical	Renal Dialysis		
Pediatric/Adol escent	Inpatient 0 Beds	Patient 0 Days	Clinical Lab				
Psychiatric Nursing	Inpatient 0 Beds	Patient 0 Days	Radiologica Imaging	I/ Newborn/ WellBaby	Outpatient Surgery		
Obstetrical Ante/Postprtum	Inpatient 0 Beds	Patient 0 Days	Pharmaceu	tical Emergency	Central Plant		
Intermediate Care	Inpatient 0 Beds	Patient 0 Days	Dietetic	Nuclear Medicine	Support Services		
Skilled Nursing	Inpatient 0 Beds	Patient 0 Days	X Administrati	on			
Total Beds this B	uilding per service	0					
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	Provide the number of inpatient beds and patient days per type of service for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).						
Building Nbr: BLD-0	05202 Building Name:	1958 Building (Emergend	cy Wing)	Year of Information: 201	6		
<u>Type of Services</u> <u>Provided</u>				Information Current As 10/2 Of:	20/2017		
Nursing	Inpatient 0 Beds	Patient 0 Days	Surgical		Rehabilitation Therapy		
IntensiveCare	Inpatient 0 Beds	Patient 0 Days	Anesthesia				
Pediatric/Adol escent	Inpatient 0 Beds	Patient 0 Days	Clinical Lab		Renal Dialysis		
Psychiatric Nursing	Inpatient 0 Beds	Patient 0 Days	Radiologica Imaging		Dutpatient Gurgery		
Obstetrical Ante/Postprtum	Inpatient 0 Beds	Patient 0 Days	Pharmaceu	tical Emergency C	Central Plant		
Intermediate Care	Inpatient 0 Beds	Patient 0 Days	Dietetic		Support Services		
Skilled Nursing	Inpatient 0 Beds	Patient 0 Days	X Administrati	on			
Total Beds this B	uilding per service	0					
OSHPD FDD SB499 Re	eport Data Last	Update: 01/04/2018	Submission Date	e: 01/04/2018 Printed: 1/6/20			

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No data reported corresponding b	d for wheth	er the gene	eral acute care	services and b	eds will be relo	cated to a	new, existing	or retrofitted l	building an	d any 61(c)(2)(E)	
				Juliulings with a	Duliding Resold			place per de			

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	eport for each facility for which any buil of unit and service per Section 13006		ed from active care service, a	any net change in the
Building BLD-00414 Number:	Building Name: 1913 Building			
Will general acute care services	and beds will be relocated to a new, E	xisting or retrofitted	building?	
OutpatientSurgery N/A				
	eport for each facility for which any buil of unit and service per Section 13006		ed from active care service, a	any net change in the
Building Number: BLD-00415	Building Name: 1928 Building			
Will general acute care services	and beds will be relocated to a new, E	xisting or retrofitted	building?	
Surgical N/A				
	eport for each facility for which any buil of unit and service per Section 13006		ed from active care service, a	any net change in the
Building BLD-00415 Number:	Building Name: 1928 Building			
Will general acute care services	and beds will be relocated to a new, E	xisting or retrofitted	building?	
OutpatientSurgery N/A				
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Each hospital owner shall also report for each facility for which any buildings will be removed from active care service, any net change in the number of inpatient beds by type of unit and service per Section 130061(c)(3)						
Number:	-05176 Building Name:	1958 Lobby Addition				
Will general acute care Support Services	N/A	elocated to a new, Existing or retrofitted	building?			
	all also report for each facili ds by type of unit and service	ty for which any buildings will be remove e per Section 130061(c)(3)	ed from active care service, any net	change in the		
Building BLD Number:	-05202 Building Name:	1958 Building (Emergency Wing)				
Will general acute care	services and beds will be re	elocated to a new, Existing or retrofitted	building?			
Administration	N/A					

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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-00414 Buildir	ng Name: 1913 Building				
Type of Service	e Provided					
		Surgical		Dbstetrical Cesarean/Deliv		Rehabilitation Therapy
	Nursing	Anesthesia			_	Ronal Dialyzia
	IntensiveCare	Clinical Lab		Dbstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent	Radiological/		Vewborn/ VellBaby	X	Outpatient Surgery
	Psychiatric Nursing	Imaging Pharmaceutical		Emergency		Central Plant
	Obstetrical			luclear		Support
	Ante/Postprtum	Dietetic		Aedicine		Services
	Intermediate Care	Administration				
	Skilled Nursing					
SHPD FDD SB499 Re	eport Data La	st Update: 01/04/2018 Subm	ission Dat	e: 01/04/2018	Printe	ed: 1/6/2018 6:30 AM

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Report any general per Section 130061		tient service that is provided in any g	general acute care hospital b	ouilding that is rate	ed SPC-1
Building Number:	BLD-00415 Building	g Name: 1928 Building			
Type of Service	e Provided				
		X Surgical	Obstetrical Cesarean/Deliv	Rehabi Therap	
	Nursing	Anesthesia		Renal [Dialveis
	IntensiveCare	Clinical Lab	Obstetrical Recovery		21019010
	Pediatric/Adol escent	Radiological/	Newborn/ WellBaby	X Outpati Surgery	
	Psychiatric Nursing	Imaging Pharmaceutical	Emergency	Central	Plant
	Obstetrical Ante/Postprtum		Nuclear Medicine	Suppor Service	t
	Intermediate Care	Administration			
	Skilled Nursing				
OSHPD FDD SB499 R	eport Data Las	t Update: 01/04/2018 Subn	nission Date: 01/04/2018	Printed: 1/6/20	 018 6:30 AM

eport any general acute care hospital inpati r Section 130061(c)(4)		general acute care hospital	building that is rate	ed SPC-1
uilding Number: BLD-05176 Building	Name: 1958 Lobby Addition			
Type of Service Provided				
	Surgical	Obstetrical Cesarean/Deliv	Rehabili Therapy	
Nursing				
IntensiveCare	Anesthesia	Obstetrical	Renal D	vialysis
	Clinical Lab	Recovery		
Pediatric/Adol escent		Newborn/	Outpatie Surgery	
	Radiological/ Imaging	WellBaby		
Psychiatric Nursing	Pharmaceutical	Emergency	Central	Plant
Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	X Support Services	
Intermediate Care	Administration			
Skilled Nursing				

Report Year: 201	17 11966 Pomc	ona Valley Hospital Medical Center	Р	omona	Page:48 of 91	
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-05202 Buildir	ng Name: 1958 Building (Emerge	ency Wing)			
Type of Service	e Provided					
		Surgical		stetrical	Rehabilitation Therapy	
	Nursing					
	IntensiveCare	Anesthesia		stetrical	Renal Dialysis	
	Pediatric/Adol escent	Clinical Lab	_		Outpatient Surgery	
	Psychiatric	Radiological/ Imaging		wborn/ L IIBaby	Surgery	
	Nursing	Pharmaceutical	Eme	ergency	Central Plant	
	Obstetrical Ante/Postprtum	Dietetic	Nuc Med	clear	Support Services	
	Intermediate Care	X Administration				
	Skilled Nursing					
OSHPD FDD SB499 R	eport Data La	st Update: 01/04/2018 Sub	mission Date:	01/04/2018 Printe	ed: 1/6/2018 6:30 AM	

Report Year: 2017	11966 F	Pomona Valley H	Hospital Medical Cent	ter	Pomona		Page:49 of 91
Report the final configuration requirements whether by per Section 130061(c)(5	retrofit or by r						
Building Number: BLD	0-00411	Building Name:	1972 Building - ICl	U/Emerg	ency		
Configuration: Ren	nove from GAC	Service by 1/1/	/2030				
Type of Service Prov	vided						
X Nursing		Su Su	urgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
X Intensiv	eCare	Ar Ar	nesthesia		Obstetrical Recovery		Renal Dialysis
X Pediatrie escent	c/Adol	X C	linical Lab		Receivery		
Psychia Nursing			adiological/ naging		Newborn/ WellBaby		Outpatient Surgery
Obstetri Ante/Po		PI	harmaceutical	X	Emergency	X	Central Plant
	diate		ietetic				
Care	Nursing	A0	dministration		Nuclear Medicine	X	Support Services
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Report Year: 20	11966	Pomona Valle	ey Hospital Medical Ce	enter	Pomona		Page:50 of 91	
	ner by retrofit or l				ach building will comply w be provided in each gener			
Building Number:	BLD-00412	Building Na	me: D&T Addition					
Configuration:	Retrofit Conform	ning building to	NPC 4 or NPC 5					
Type of Service	Provided							
Nu	irsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis	
	diatric/Adol cent		Clinical Lab		,			
	ychiatric Irsing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	ostetrical te/Postprtum	X	Pharmaceutical		Emergency		Central Plant	
Inte Ca	ermediate Ire		Dietetic		Nuclear Medicine	X	Support	
Ski	illed Nursing		Administration				Services	
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Report Year: 2017	11966 Pomona Vall	ey Hospital Medical Cent	er	Pomona		Page:51 of 91
Report the final configurati requirements whether by reper Section 130061(c)(5)						
Building Number: BLD-0	00413 Building Na	me: Women's Center				
Configuration: Retrof	fit Conforming building to	NPC 4 or NPC 5				
Type of Service Provid	ded					
X Nursing		Surgical		bstetrical esarean/Deliv		habilitation erapy
X IntensiveC	Care	Anesthesia		bstetrical ecovery	Re	nal Dialysis
X Pediatric// escent	Adol	Clinical Lab				
Psychiatric Nursing	ic 🗌	Radiological/ Imaging		ewborn/ /ellBaby		tpatient 'gery
X Obstetrica Ante/Post		Pharmaceutical	Er	mergency	X Ce	ntral Plant
Intermedia Care	ate	Dietetic		uclear Medicine	X Su	ipport
Skilled Nu	ursing	Administration				pport prvices
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Report the final cor requirements wheth per Section 130067	her by retrofit or by	dings on the replacement	hospital campus showin and the type of service the	g how e hat will t	ach building will comply wit be provided in each genera	h the SP l acute ca	C-5/NPC-4 or 5 are hospital building]
Building Number:	BLD-00414	Building Na	me: 1913 Building					
Configuration:	Remove from GA	C service by	1/1/2020					
Type of Service	e Provided							
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
Int	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis	
	ediatric/Adol scent		Clinical Lab					
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby	X	Outpatient Surgery	
	ostetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant	
	termediate are		Dietetic		Nuclear Medicine		Support	
Sk	killed Nursing		Administration				Services	
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Report Year: 20	017 11966	Pomona Vall	ey Hospital Medical Cent	er	Pomona		Page:53 o	f 91
Report the final cor requirements wheth per Section 130061	her by retrofit or by	ldings on the replacement	hospital campus showing and the type of service the	g how e hat will t	ach building will comply wit be provided in each genera	h the SP I acute ca	C-5/NPC-4 or 5 are hospital building)
Building Number:	BLD-00415	Building Na	me: 1928 Building					
Configuration:	Remove from GA	C service by	1/1/2020					
Type of Service	e Provided							
Nu	ursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
Int	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis	
	ediatric/Adol scent		Clinical Lab					
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby	X	Outpatient Surgery	
	ostetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant	
	termediate are		Dietetic		Nuclear Medicine		Support	
Sk	killed Nursing		Administration				Services	
				0		Drinte	4/0/0040 0:00 114	
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	her by retrofit or by I				ach building will comply w be provided in each genera			
Building Number:	BLD-00416	Building Na	me: 1953 Building					
Configuration:	Remove from GAC	Service by	1/1/2030					
Type of Service	Provided							
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitatio Therapy	n
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialys	is
	ediatric/Adol cent	X	Clinical Lab					
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	ostetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plan	t
Inte Ca	ermediate are		Dietetic		Nuclear Medicine	x	Support	
Sk	illed Nursing	X	Administration				Services	
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	ther by retrofit or by				ach building will comply wi be provided in each genera			
Building Number:	BLD-00417	Building Na	me: 1961 Building					
Configuration:	Remove from GA	C service by	1/1/2030					
Type of Service	e Provided							
X Nu	ursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	١
X In	tensiveCare	X	Anesthesia	X	Obstetrical Recovery		Renal Dialys	IS
	ediatric/Adol scent		Clinical Lab					
	sychiatric ursing	X	Radiological/ Imaging	Х	Newborn/ WellBaby	X	Outpatient Surgery	
	bstetrical nte/Postprtum		Pharmaceutical		Emergency		Central Plant	
	termediate		Dietetic					
	are killed Nursing		Administration		Nuclear Medicine	X	Support Services	
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	ner by retrofit or by i				ach building will comply wi be provided in each genera			
Building Number:	BLD-00418	Building Na	me: 1963 Building - Ca	feteria				
Configuration:	Remove from GAC	C service by	1/1/2030					
Type of Service	Provided							
Nu	irsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitat Therapy	ion
X Inte	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dial	/sis
	diatric/Adol cent		Clinical Lab					
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	ostetrical te/Postprtum		Pharmaceutical		Emergency		Central Pla	nt
Inte Ca	ermediate	X	Dietetic					
	illed Nursing		Administration		Nuclear Medicine		Support Services	
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	ner by retrofit or b				ach building will comply w be provided in each gener			
Building Number:	BLD-02838	Building Na	me: Building 01A					
Configuration:	Retrofit Conform	ning building to	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	
Ski	illed Nursing		Administration				Services	
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Report Year: 20	17 11966	Pomona Valle	y Hospital Medical Cen	ter	Pomona		Page:58 of 91
	ner by retrofit or by				ach building will comply w be provided in each genera		
Building Number:	BLD-02839	Building Nam	ne: Building 01B Cano	ру			
Configuration:	Retrofit Conform	ing building to N	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 rsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	stetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant
Inte Ca	ermediate re		Dietetic		Nuclear Medicine		Support
Ski	illed Nursing		Administration				Services
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	ner by retrofit or b				ach building will comply wi be provided in each genera		
Building Number:	BLD-03850	Building Nar	ne: Boiler Building				
Configuration:	Remove from G	AC service by 1	/1/2030				
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	X	Central Plant
Inte Ca	ermediate Ire		Dietetic		Nuclear Medicine		Support
Ski	illed Nursing		Administration				Services
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	ner by retrofit or b				ach building will comply w be provided in each gener			_
Building Number:	BLD-03877	Building Nar	me: 1961 Dining Build	ding				
Configuration:	Remove from G	AC service by 7	1/1/2030					
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	x	Support	
Ski	illed Nursing		Administration				Services	
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	ner by retrofit or b				ach building will comply w be provided in each gener							
Building Number:	BLD-05176	Building Na	me: 1958 Lobby Addi	tion								
Configuration: Remove from GAC service by 1/1/2020												
Type of Service	Provided											
Nu	Irsing		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	X	Support					
Ski	illed Nursing		Administration				Services					
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Report Year: 2017 11966	Pomona Valley Hospital Medical Cer	nter Pomo	na	Page:62 of 91								
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-05202	Building Name: 1958 Building (Er	mergency Wing)										
Configuration: Remove from (GAC service by 1/1/2020											
Type of Service Provided												
Nursing	Surgical	Obstetrical Cesarean/De		abilitation apy								
IntensiveCare	Anesthesia	Obstetrical Recovery	Rena	al Dialysis								
Pediatric/Adol escent	Clinical Lab	Recovery										
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge	atient ery								
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Cent	ral Plant								
	Dietetic											
Care Skilled Nursing	X Administration	Nuclear Mec	licine Supț Serv									
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Report Year: 20	11966	Pomona Vall	ey Hospital Medical Ce	enter	Pomona		Page:63 of 91	
Report the final con requirements wheth per Section 130061	ner by retrofit or l	buildings on the by replacement	hospital campus show and the type of service	ing how e e that will l	ach building will comply v be provided in each gene	vith the SP ral acute ca	C-5/NPC-4 or 5 are hospital building	_
Building Number:	BLD-05669	Building Na	me: 2013 Vestibule					
Configuration:	Remove from G	GAC service by	1/1/2030					
Type of Service	Provided							
Nu	irsing		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	X	Support	
Ski	illed Nursing		Administration				Services	
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Report Year: 20	17 11966	Pomona Vall	ey Hospital Medical Ce	enter	Pomona		Page:64 of 91					
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-05670	Building Na	me: 2013 Low Canop	у								
Configuration:	Remove from GA	AC service by	1/1/2030									
Type of Service	Provided											
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy					
Inte	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis					
	diatric/Adol cent		Clinical Lab									
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery					
	stetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant					
Inte Ca	ermediate re		Dietetic		Nuclear Medicine	X	Support					
Ski	illed Nursing		Administration				Services					
OSHPD FDD SB499 R	Report [Data Last Updat	e: 01/04/2018	Submiss	ion Date: 01/04/2018	Printed:	1/6/2018 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-05671 Building Name: 2013	High Canopy										
Configuration: Remove from GAC service by 1/1/2030											
Type of Service Provided											
Nursing Surgical			Rehabilitation Therapy								
IntensiveCare Anesthesi			Renal Dialysis								
Pediatric/Adol Clinical La	ab	, 									
Psychiatric Radiologi Nursing Imaging	cal/ Newb WellE		Outpatient Surgery								
Obstetrical Pharmace Ante/Postprtum	_	rgency	Central Plant								
Intermediate Care Dietetic	Nucle	ear Medicine	Support								
Skilled Nursing	ation		Services								
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Report Year: 2017	11966 Po	omona Valley H	Hospital Me	dical Center	Pomona		Page:66 of 91					
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: BLD-00411 Building Name: 1972 Building - ICU/Emergency												
Type of Service Prov	<u>vided</u>											
X Nursing	Inpatient Beds	85		Surgical	Obstetrical Cesarean/Deliv		nabilitation erapy					
X IntensiveCare	Inpatient Beds	50		Anesthesia								
Pediatric/Adol	Inpatient Beds	0	X	Clinical Lab	Obstetrical Recovery	Rer	nal Dialysis					
Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby		patient gery					
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	X Emergency	X Cer	ntral Plant					
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Sup Ser	oport vices					
Skilled Nursing	Inpatient Beds	0		Administration								
Total Beds this Building		135										
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Include information of 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: B	_D-00412	Building Na	me: D&T Addition		
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	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtun	Inpatient Beds	0	X Pharmaceutical	Emergency	Central Plant
Intermediate	Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			
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Report Y	ear: 2017	11966	Pomona Valley	Hospital Me	dical Center	Pom	ona		Page:68 of 91		
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)											
Buildi	ng Number: BLC	D-00413	Building N	Name: Wo	omen's Center						
Туре	e of Service Prov	rided									
×	Nursing	Inpatient Beds	0		Surgical		Dbstetrical Cesarean/Deliv		Rehabilitation Therapy		
X	IntensiveCare	Inpatient Beds	47		Anesthesia						
X	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab		Dbstetrical Recovery	F	Renal Dialysis		
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	XN	Vewborn/ VellBaby		Dutpatient Surgery		
X	Obstetrical Ante/Postprtum	Inpatient Beds	66		Pharmaceutical	E	Emergency	X	Central Plant		
	Intermediate Care	Inpatient Beds	0		Dietetic		luclear Iedicine		Support Services		
	Skilled Nursing	Inpatient Beds	0		Administration						
	Total Beds this Building		113								
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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-00416 Building Name: 1953 Building												
Type of Service Prov	vided											
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy					
IntensiveCare	Inpatient Beds	0		Anesthesia								
Pediatric/Adol X escent	Inpatient Beds	0	X	Clinical Lab	Obstetrical Recovery	C Re	nal Dialysis					
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		tpatient rgery					
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency		ntral Plant					
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Su Se	pport rvices					
Skilled Nursing	Inpatient Beds	0	X	Administration								
Total Beds this Building		0										
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Include info 4D and SP	ormation on t C-5 per <mark>Sec</mark> t	the number of tion 130061(of inpatient beds e)	by type of §	Service provided by	buildings that are cla	assified as SPC-2, S	SPC-3, SPC-4, SPC-				
Building Number: BLD-00417 Building Name: 1961 Building												
Type of S	Service Prov	ided										
X Nurs	sing	Inpatient Beds	82	X	Surgical	Obstetrica Cesarean/		ehabilitation nerapy				
X Inter	nsiveCare	Inpatient Beds	6	X	Anesthesia							
Ped esce	iatric/Adol ent	Inpatient Beds	0		Clinical Lab	X Obstetrica Recovery	I 🗌 R(enal Dialysis				
Psyc	chiatric sing	Inpatient Beds	0	X	Radiological/ Imaging	X Newborn/ WellBaby		utpatient urgery				
	tetrical e/Postprtum	Inpatient Beds	18		Pharmaceutical	Emergenc	y C	entral Plant				
Inter Care	rmediate e	Inpatient Beds	0		Dietetic	Nuclear Medicine		upport ervices				
Skill	ed Nursing	Inpatient Beds	38		Administration							
Tota Build	al Beds this ding		144									
OSHPD FDD S	B499 Report	Da	ata Last Update:	01/04/2018	8 Submissior	Date: 01/04/2018	Printed: 1/6/2	018 6:30 AM				

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	le information on t nd SPC-5 per <mark>Sec</mark>			by type of S	Service provided by buil	dings that are classified a	s SPC-2, SI	PC-3, SPC-4, SPC-
Buildi	ng Number: BLE	0-00418	Building N	ame: 190	63 Building - Cafeteria]
Туре	e of Service Prov	rided						
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		nabilitation erapy
X	IntensiveCare	Inpatient Beds	0		Anesthesia			
X	Pediatric/Adol escent	Inpatient Beds	34		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	X	Dietetic	Nuclear Medicine		oport vices
	Skilled Nursing	Inpatient Beds	0		Administration			
	Total Beds this Building		34					
OSHPD F	DD SB499 Report	Da	ata Last Update:	01/04/2018	3 Submission Da	ate: 01/04/2018 Pri	nted: 1/6/20	18 6:30 AM

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Include information on 4D and SPC-5 per Sec			by type of S	Service provided by bu	uildings that are classified a	as SPC-2, S	PC-3, SPC-4, SPC-
Building Number: BLI	D-02838	Building N	ame: Bu	ilding 01A]
Type 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	Rei	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	Inpatient Beds	0		Dietetic	Nuclear Medicine		oport vices
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
OSHPD FDD SB499 Report	Dat	a Last Update:	01/04/2018	3 Submission I	Date: 01/04/2018 Pr	inted: 1/6/20	18 6:30 AM

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	e information on d SPC-5 per <mark>Sec</mark>			by type of S	Service provided by bu	ildings that are classified a	s SPC-2, S	PC-3, SPC-4, SPC-
Buildir	ng Number: BLE	0-02839	Building N	ame: Bu	ilding 01B Canopy]
Туре	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	Re	nal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		tpatient gery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency		ntral Plant
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Sul Sei	oport vices
	Skilled Nursing	Inpatient Beds	0		Administration			
	Total Beds this Building		0					
OSHPD FI	DD SB499 Report	Dat	a Last Update:	01/04/2018	3 Submission D	Date: 01/04/2018 Pri	nted: 1/6/20	18 6:30 AM

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Include information on 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: BL	D-03850	Building N	ame: Boiler 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	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			
		ata Last Lindata.	01/04/2018 Submissio	n Date: 01/04/2018 P	inted: 1/6/2018 6:30 AM
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Include information on 4D and SPC-5 per Sec	the number of tion 130061(e)	inpatient beds l	by type of S	Service provided by buil	dings that are classified a	s SPC-2, S	PC-3, SPC-4, SPC-
Building Number: BL	D-03877	Building Na	ame: 19	61 Dining Building]
Type of Service Prov	rided						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
IntensiveCare	Inpatient Beds	0		Anesthesia	_		
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		itpatient rgery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Ce	ntral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Su Se	pport rvices
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
OSHPD FDD SB499 Report	Data	a Last Update:	01/04/2018	3 Submission Da	ate: 01/04/2018 Pri	nted: 1/6/20	018 6:30 AM

Report Year: 2017	11966 P	omona Valley H	Hospital Me	dical Center	Pomona		Page:76 of 91
Include information on 4D and SPC-5 per Sec	the number of tion 130061(e)	inpatient beds	by type of S	Service provided by b	uildings that are classified	as SPC-2, S	PC-3, SPC-4, SPC-
Building Number: BLI	D-05669	Building N	ame: 20	13 Vestibule]
Type of Service Prov	rided						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
IntensiveCare	Inpatient Beds	0		Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		tpatient rgery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Ce	ntral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine		oport rvices
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
OSHPD FDD SB499 Report	Dat	a Last Update:	01/04/2018	3 Submission	Date: 01/04/2018 Pi	rinted: 1/6/20	18 6:30 AM

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Include information on 4D and SPC-5 per Sec			by type of Servi	ce provided by b	uildings that are classified a	as SPC-2, S	SPC-3, SPC-4, SPC-
Building Number: BLI	D-05670	Building N	lame: 2013 L	ow Canopy]
Type of Service Prov	/ided						
Nursing	Inpatient Beds	0	Su	rgical	Obstetrical Cesarean/Deliv		ehabilitation erapy
IntensiveCare	Inpatient Beds	0	An	esthesia			
Pediatric/Adol escent	Inpatient Beds	0		nical Lab	Obstetrical Recovery	Re Re	enal Dialysis
Psychiatric Nursing	Inpatient Beds	0		diological/ aging	Newborn/ WellBaby		utpatient Irgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Ph	armaceutical	Emergency	Ce	entral Plant
Intermediate	Inpatient Beds	0	Die	etetic	Nuclear Medicine	X Su Se	ipport ervices
Skilled Nursing	Inpatient Beds	0	Adı	ministration			
Total Beds this Building		0					
OSHPD FDD SB499 Report	Da	ta Last Update:	01/04/2018	Submission	Date: 01/04/2018 Pr	inted: 1/6/20	018 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-05671 Building Name: 2013 High Canopy Type of Service Provided Nursing Inpatient 0 Surgical Obstetrical Rehabilitation IntensiveCare Inpatient 0 Anesthesia Renal Dialysis Pediatric/Adol Inpatient 0 Clinical Lab Obstetrical Renal Dialysis Pediatric/Adol Inpatient 0 Radiological/ Newborn/ Outpatient Nursing Inpatient 0 Radiological/ Newborn/ Outpatient Obstetrical Inpatient 0 Pharmaceutical Central Plant Obstetrical Intermediate Inpatient 0 Dietetic Nuclear Intermediate Inpatient 0 Intermediate Support
Type of Service Provided Nursing Inpatient 0 Surgical Obstetrical Rehabilitation IntensiveCare Inpatient 0 Anesthesia Renal Dialysis Pediatric/Adol Inpatient 0 Clinical Lab Obstetrical Renal Dialysis Pediatric/Adol Inpatient 0 Radiological/ Newborn/ Outpatient Psychiatric Inpatient 0 Radiological/ Newborn/ Outpatient Obstetrical Inpatient 0 Readiological/ Newborn/ Outpatient Obstetrical Inpatient 0 Emergency Central Plant Obstetrical Inpatient 0 Dietetic Nuclear X Support
Nursing Inpatient Beds 0 Surgical Obstetrical Cesarean/Deliv Rehabilitation Therapy IntensiveCare Inpatient Beds 0 Anesthesia Renal Dialysis 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
Intensive Care Inpatient Image: Construct of the construction of
Beds Impatient
Pediatric/Adol escent Inpatient Beds 0 Clinical Lab Recovery Psychiatric Nursing Inpatient Beds 0 Radiological/ Imaging Newborn/ WellBaby Outpatient Surgery Obstetrical Ante/Postprtum Inpatient Beds 0 Pharmaceutical Emergency Central Plant Dietetic Nuclear X Support
Psychiatric Inpatient 0 Imaging New Bolt Nursing Beds 0 Pharmaceutical Obstetrical Inpatient 0 Ante/Postprtum Beds 0 Dietetic Nuclear X Support
Obstetrical Ante/Postprtum Inpatient Beds 0 Impatient Beds 0 <th0< th=""> 0 <th0< th=""></th0<></th0<>
Care Beds
Skilled Nursing Administration Inpatient 0 Beds Inpatient
Total Beds this 0 Building
OSHPD FDD SB499 Report Data Last Update: 01/04/2018 Submission Date: 01/04/2018 Printed: 1/6/2018 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-4, AD and SPC-5 per Section 130061(e)					
Building Number: BLD-00411 Build	ding Name: 1972 Building - ICU/Emerger	ncy			
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 85 Inpatient 27030 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 38 Inpatient 8089 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 12 Inpatient 3016 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 135 135			
OSHPD FDD SB499 Report Data Last U	pdate: 01/04/2018 Submission Date:	01/04/2018 Printed: 1/6/2018 6:30 AM			

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Include information on the number of inpatie 4D and SPC-5 per Section 130061(e)	nt beds by type of unit provided by buildings that	t are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-00412 B	uilding Name: D&T Addition	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days 0
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 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 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 thisTotal Beds thisBuilding PerBuilding Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0
OSHPD FDD SB499 Report Data Las	t Update: 01/04/2018 Submission Date:	01/04/2018 Printed: 1/6/2018 6:30 AM

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Include information on the number of inpatient I 4D and SPC-5 per Section 130061(e)	beds by type of unit provided by buildings that	are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-00413 Build	ding Name: Women's Center	
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 66 Inpatient 13846 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days 0
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 0 Inpatient 0 Bed Days	Inpatient 47 Inpatient 11341 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 113 113
OSHPD FDD SB499 Report Data Last U	lpdate: 01/04/2018 Submission Date:	01/04/2018 Printed: 1/6/2018 6:30 AM

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Include information on the number of inpatier 4D and SPC-5 per Section 130061(e)	nt beds by type of unit provided by buildings that	t are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-00416 Bu	ilding Name: 1953 Building	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	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
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 Las	t Update: 01/04/2018 Submission Date:	01/04/2018 Printed: 1/6/2018 6:30 AM

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Include information on the number of inpatient 4D and SPC-5 per Section 130061(e)	beds by type of unit provided by buildings that	are classified as SPC-2, SPC-3, SPC-4, SPC-	-
Building Number: BLD-00417 Building	ding Name: 1961 Building		-
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 82 Inpatient 15961 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 18 Inpatient 6391 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 38 Inpatient 0 Bed Days	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 6 Inpatient 1448 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 thisTotal Beds thisBuilding PerBuilding Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 144 144	
OSHPD FDD SB499 Report Data Last U	lpdate: 01/04/2018 Submission Date:	01/04/2018 Printed: 1/6/2018 6:30 AM	

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Include information on the number of inp 4D and SPC-5 per Section 130061(e)	patient beds by type of unit provided by buildings	that are classified as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLD-00418	Building Name: 1963 Building - Cafeteria	a
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient (Bed Days	0 Inpatient 0 Inpatient 0 Bed Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient (Bed Days	0 Inpatient 0 Inpatient 0 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 34 Inpatient 29 Bed Days	972 Inpatient 0 Inpatient 0 Bed Days	0 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	0 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	0 Unit Service 34 34
OSHPD FDD SB499 Report Dat	a Last Update: 01/04/2018 Submission Da	Date: 01/04/2018 Printed: 1/6/2018 6:30 AM

Report Year: 2017 11966 Pomo	na Valley Hospital Medical Center	Pomona Page:85 of 91	
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-02838 B	uilding Name: Building 01A		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days 0	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	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 thisTotal Beds thisBuilding PerBuilding Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0	
OSHPD FDD SB499 Report Data Las	st Update: 01/04/2018 Submission Date:	01/04/2018 Printed: 1/6/2018 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-02839 Building Number:	ilding Name: Building 01B Canopy			
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 thisTotal Beds thisBuilding PerBuilding Per		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0		
OSHPD FDD SB499 Report Data Last	Update: 01/04/2018 Submission Date:	01/04/2018 Printed: 1/6/2018 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-03850 Bui	Iding Name: Boiler 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		
OSHPD FDD SB499 Report Data Last	Update: 01/04/2018 Submission Date:	01/04/2018 Printed: 1/6/2018 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-03877 Bu	ilding Name: 1961 Dining 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 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 Days	0
Coronary Care	Chemical Dependency	Total Beds this Total Beds th 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: 01/04/2018 Submission Date:	01/04/2018 Printed: 1/6/2018 6:30	۹M

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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)				-3, SPC-4, SPC-	
Building Number:	BLD-05669 Bu	ilding Name: 201	3 Vestibule		
Medical / Surgical (I	nclude GYN)	Acute Respirator	y Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpat Bed Days	
Perinatal (Exclude N	lewborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpat Bed Days	
Pediatric		Intensive Care Ne Nursery	ewborn	Intermediate Care	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpat Bed Days	
Intensive Care		Rehabilitation Center		Int. Care / Developmenta Disabled	lly
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpat Bed Days	
Coronary Care		Chemical Depend	dency	Building Per Building Per	otal Beds this uilding Per
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Unit Se	ervice 0
OSHPD FDD SB499 Re	port Data Las	Update: 01/04/2018	Submission Date	e: 01/04/2018 Printed: 1/0	6/2018 6:30 AM

Report Year: 2017 11966 Pomo	na Valley Hospital Medical Center	Pomona Page:90 of 91	
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-05670 B	uilding Name: 2013 Low Canopy		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days 0	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	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 thisTotal Beds thisBuilding PerBuilding Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service	
DSHPD FDD SB499 Report Data Las	t Update: 01/04/2018 Submission Date:	01/04/2018 Printed: 1/6/2018 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-05671 Bu	ilding Name: 2013 High Canopy		
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	
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	
OSHPD FDD SB499 Report Data Las	t Update: 01/04/2018 Submission Date:	01/04/2018 Printed: 1/6/2018 6:30 AM	