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:	10677		
Facility Name:	Loma L	inda University Medical Center	
Address:	11234 A	Anderson St.	
City:	Loma L	inda	
Hospital Owner/Lic	ensee:	Loma Linda University Medical Center	
Year of Rep	porting:	2015	
Contact 1 e-mail Ac	ddress:	[Confidential data left blank intentionally.]]
Contact 2 e-mail Ac	ddress:	[Confidential data left blank intentionally.]]
Contact 3 e-mail Ad	ldress::	[Confidential data left blank intentionally.]]
Name of Submitter:		Loma Linda Unversity Medical Center]
Submission	n Date:	12/16/2015 4:47:48 PM	

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For buildings For buildings which are planned for rebuild, retrofit or replacement this report shall identify; Whether the hospital owner intends to rebuild, retrofit or replace the building to SPC2, SPC3, SPC4 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 Final SPC Rating Resolution If Required		Extension Date	Anticipated Completion Date
BLD- 01479	Main Hospital Tower - Area C	11234 Anderson St.	Rebuild	SPC5	01/01/2020	01/01/2020
BLD- 03023	Main Hospital Tower - Area A	11234 Anderson St.	Rebuild	SPC5	01/01/2020	01/01/2020
BLD- 03025	Original Plant	11234 Anderson St.	Retrofit	SPC5	01/01/2020	01/01/2020

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For each building which is planned for rebuild, retrofit or replacement, provide the project numbers, per Section 130061(c)(1)(C). The projected construction start date or dates and projected Completion date or dates per Section 130061(c)(1)(D) and the most recent project status and approvals per Section 130061(c)(1)(E).

Building No:

BLD-01479

Main Hospital Tower - Area C

Retrofit/Replacement Project:

Yes-Submitted

Facility Number	Project Number	Sub Num	Scope	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
10677	I150010-36- 00	0	PPR - Campus Transformation Project	5/12/2015		03/23/2016		ACTI	No
10677	S142915-36 -00	0	CTP Make Ready-FDC Relocation	12/17/201 4	2/25/2015 12:00:00 AM	09/24/2015		PEND	No
10677	S150833-36 -00	0	CTP - Site Make Ready	4/2/2015	8/13/2015 12:00:00 AM	09/24/2015		FIEL	No
10677	S152206-36 -00	0	CTP Site Make Ready 02	8/20/2015	10/27/2015 12:00:00 AM	02/15/2016		ACTI	No

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For each building which is planned for rebuild, retrofit or replacement, provide the project numbers, per Section 130061(c)(1)(C). The projected construction start date or dates and projected Completion date or dates per Section 130061(c)(1)(D) and the most recent project status and approvals per Section 130061(c)(1)(E).

Building No:

BLD-03023

Main Hospital Tower - Area A

Retrofit/Replacement Project:

Yes-Submitted

Facility Number	Project Number	Sub Num	Scope	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
10677	I150010-36- 00	0	PPR - Campus Transformation Project	5/12/2015		03/23/2016		ACTI	No
10677	\$142915-36 -00	0	CTP Make Ready-FDC Relocation	12/17/201 4	2/25/2015 12:00:00 AM	09/24/2015		PEND	No
10677	S150833-36 -00	0	CTP - Site Make Ready	4/2/2015	8/13/2015 12:00:00 AM	09/24/2015		FIEL	No
10677	S152206-36 -00	0	CTP Site Make Ready 02	8/20/2015	10/27/2015 12:00:00 AM	02/15/2016		ACTI	No

For each building which is planned for rebuild, retrofit or replacement, provide the project numbers, per Section 130061(c)(1)(C). The projected construction start date or dates and projected Completion date or dates per Section 130061(c)(1)(D) and the most recent project status and approvals per Section 130061(c)(1)(E).

Building No:

BLD-03025

Original Plant

Retrofit/Replacement Project:

Yes-Submitted

Facility Number	Project Number	Sub Num	Scope	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
10677	1140008-36- 00	0	Loma Linda University Steam Plant Building, SPC 5 Seismic Improvements	11/4/2014		06/01/2016	04/01/2018	OPEN	No

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Provid	de the number of	inpatient bed	s and par	tient days per typ	oe of servic	e per buildin	g per	Section 130061(c)(1)(F	=)	
Buildir	ng Number: BLI	D-01479		Building Na	me:	Main Hospi	ital Tc	ower - Area C			
Type	of Service Prov	ided									
1 X	Nursing	Inpatient Beds	302	Inpatient Days	67564	X	Surgi	cal	X	Obstetrical Recovery	
Χı	IntensiveCare	Inpatient Beds	73	Inpatient Days	24775	X.	Anest	hesia	X	Newborn/ WellBaby	
1 1/1	Pediatric/Adol escent	Inpatient Beds	73	Inpatient Days	16741	X	Clinica	al Lab	X	Emergency	′
	Psychiatric Nursing	Inpatient Beds	0	Inpatient Days	0		Imagii		X	Nuclear Medicine	
	Obstetrical Ante/Postprtum	Inpatient Beds	35	Inpatient Days	5461		Pharm Dietet	naceutical		Rehabilitati Therapy	ion
	Intermediate Care	Inpatient Beds	0	Inpatient Days	0			nistration	X	Renal Dialy	ysis
	Skilled Nursing	Inpatient	0	Inpatient Days	0		Suppo Servic	ort ces	X	Outpatient Surgery	
		Beds	Total B	eds this	483		Obste Cesar	etrical rean/Deliv		Central Pla	ınt

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Prov	ide the number of	inpatient bed	ls and patient days per type of service p	er building per Section 130061(c)(1)(F)	
	_	D-03023	Building Name: Ma	ain Hospital Tower - Area A		
Туре	e of Service Prov	<u>rided</u>		1		
	Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery	
	IntensiveCare	Inpatient Beds	0 Inpatient Days 0	X Anesthesia	Newborn/ WellBaby	
	Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency	1
	Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	X Nuclear Medicine	
	Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	X Rehabilitat Therapy	ion
	Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialy	/sis
	Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	X Support Services	Outpatient Surgery	
			Total Beds this Building	Obstetrical Cesarean/Deliv	Central Pla	nt

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Provide the r	number of inpatient bed	ds and patient days per type of service	per building per Section 130061	(c)(1)(F)
Building Num		Building Name:	Original Plant	
Type of Serv	vice Provided		ı	
Nursing	g Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery
Intensiv	veCare Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
Pediatr escent	ic/Adol Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychia Nursing		0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
Obstetr	rical Inpatient ostprtum Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy
Interme Care	ediate Inpatient Beds	0 Inpatient Days 0	Administration Support	Renal Dialysis Outpatient
Skilled	Nursing Inpatient Beds	0 Inpatient Days 0	Services	Surgery
		Total Beds this Building	Obstetrical Cesarean/Deliv	X Central Plant

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Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

	•		t por ballaring por bookorr	,,,,,		
Building Number:	BLD-01479	Building Name: Mair	n Hospital Tower - Area C			
Medical / Surgical ((Include GYN)	Acute Respiratory	Care	Acute Psychiatric		
Inpatient 302 Bed	Inpatient 6756 Days 4	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Perinatal (excluse I	Newborn / GYN)	Burn		Skilled Nursing		
Inpatient 35 Bed	Inpatient 5461 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Pediatric		intensive Care Nev Nursery	wborn	Intermediate Card		
Inpatient 73 Bed	Inpatient 1674 Days 1	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care		Rehabilitation Center		Int. Care / develope Disabled	ment	
Inpatient 73 Bed	Inpatient 2477 Days 5	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	483	483	

Report Year: 2015 10677 Loma Linda University Medical Center Loma Linda Page:9 of 66 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) Main Hospital Tower - Area A **Building Number:** BLD-03023 **Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Bed Days Bed Days Perinatal (excluse Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Days Days Bed Bed **Pediatric** intensive Care Newborn **Intermediate Card** Nursery Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Intensive Care** Rehabilitation Int. Care / development **Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Bed Days Days Bed Days **Total Beds this Total Beds this Coronary Care** Chemical **Building Per Building Per** Dependency Unit Service 0 Inpatient Inpatient Inpatient Inpatient ol Days Days Bed Bed

Report Year: 2015 10677 Loma Linda University Medical Center Loma Linda Page:10 of 66 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) **Original Plant Building Number:** BLD-03025 **Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Bed Days Bed Days Perinatal (excluse Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Days Days Bed Bed **Pediatric** intensive Care Newborn **Intermediate Card** Nursery Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient ol Bed Days Bed Days Bed Days **Intensive Care** Rehabilitation Int. Care / development **Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Bed Days Days Bed Days **Total Beds this Total Beds this Coronary Care** Chemical **Building Per Building Per** Dependency Unit Service 0 Inpatient Inpatient Inpatient Inpatient ol Days Days Bed Bed

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For all buildings at the facility, indicate which ones are scheduled for general acute service removal.

Building Number	Building Name	Building to be Removed / Replaced / Rebuilt		
BLD-01479	Main Hospital Tower - Area C	Rebuild		
BLD-01480	Main Hospital Tower - Area B	Rebuild		
BLD-01481	Emergency Room Expansion - 1976	Rebuild		
BLD-01482	Northeast Wing - Schuman Pavilion	Remain		
BLD-01483	South Wing Phase 2	Remain		
BLD-01485	South Wing Phase I	Remain		
BLD-01486	Co-Generation Plant	Remain		
BLD-02961	Chiller Facility	Remain		
BLD-03021	South Wing Phase I	Remain		
BLD-03022	South Wing Phase I	Remain		
BLD-03023	Main Hospital Tower - Area A	Rebuild		
BLD-03024	South Wing Phase 2	Remain		
BLD-03025	Original Plant	Retrofit		
BLD-05490	Emergency Generator	Remain		

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List ALL prop	osed new buildings to be constructed at this or another site.			
Building Number	Building Name	New Site		
N_1	New LLUMC Hospital Building			

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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-01479 Main Hospital Tower - Area C Removal Date:									
Planned	Uses for the buildin	g to be remo	ved from acute car	e service:					
Planned	use for building:								
Inpatient	services currently c	lelivered in th	e building:					٦	
X	Nursing	X	Surgical	X	Obstetrical Cesarean/De	eliv	Rehabilitation Therapy		
X	IntensiveCare	X	Anesthesia						
X	Pediatric/Adol escent	X	Clinical Lab	X	Obstetrical Recovery		X Renal Dialysi	s	
	Psychiatric Nursing	X	Radiological/ Imaging	X	Newborn/ WellBaby		X Outpatient Surgery		
X	Obstetrical Ante/Postprtum	X	Pharmaceutical	X			X Central Plant	1	
	Intermediate Care	X	Dietetic		Emergency		X Central Plant		
	Skilled Nursing	X	Administration	X	Nuclear Medicine		X Support Services		

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The projected date or dates the replaced or rebuild buildings a The planned uses of the buildings a replaced or rebuild buildings a	ng or buildings to be removed from acut	per Section 130061 (c)(2)(A) and e care service per Section 13006	d provide said date or da	
Building Number: BLD-0302	Main Hospital Towe	r - Area A Remov	al 01/01/2020	
Planned Uses for the building Planned use for building:	to be removed from acute care service:			
Inpatient services currently de Nursing	Surgical	Obstetrical Cesarean/Deliv	X Rehabilitation Therapy	1
IntensiveCare Pediatric/Adol escent	X Anesthesia Clinical Lab	Obstetrical Recovery	Renal Dialysi	S
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery	
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Plant	
Intermediate Care Skilled Nursing	Dietetic Administration	X Nuclear Medicine	X Support Services	
	,		30333	





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		nd beds will be relocated to a new, existi a Building Resolution of "Rebuild" or "R		
Number:	D-01480 Building Name:	Main Hospital Tower - Area B		
Will general acute ca	re services and beds will be	relocated to a new, Existing or retrofitted	building?	
Report whether the g building sites or proje	eneral acute care services a ect numbers for buildings with	nd beds will be relocated to a new, existing a Building Resolution of "Rebuild" or "R	ng or retrofitted building and any ceplace" per Section 130061(c)(2)	corresponding (E)
Building BL Number:	_D-01481 Building Name:	Emergency Room Expansion - 1976		
Will general acute ca	re services and beds will be	relocated to a new, Existing or retrofitted	building?	
		nd beds will be relocated to a new, existi a a Building Resolution of "Rebuild" or "R		
Building BL Number:	_D-01479 Building Name:	Main Hospital Tower - Area C		
Will general acute ca	re services and beds will be	relocated to a new, Existing or retrofitted	building?	
Nursing	N/A]	

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Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c)(2)(E)	
Building Number: Main Hospital Tower - Area C Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?	
Intensive Care N/A	
Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c)(2)(E)	
Building BLD-01479 Building Name: Main Hospital Tower - Area C Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?	
Pediatric Adolescent N/A	
Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c)(2)(E)	
Building BLD-01479 Building Name: Main Hospital Tower - Area C Number:	
Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Obstetrical Ante N/A	
Postprtum	

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Report whether the general acute care services and beds will be relocated to a nebuilding sites or project numbers for buildings with a Building Resolution of "Rebuilding Reb		
Building Number: BLD-01479 Building Name: Main Hospital Tower - Area C Will general acute care services and beds will be relocated to a new, Existing or re		
Surgical N/A		
Report whether the general acute care services and beds will be relocated to a ne building sites or project numbers for buildings with a Building Resolution of "Rebuilding Re		
Building Number: BLD-01479 Building Name: Main Hospital Tower - Area C	;	
Will general acute care services and beds will be relocated to a new, Existing or real Anesthesia N/A	etrofitted building?	
Report whether the general acute care services and beds will be relocated to a nebuilding sites or project numbers for buildings with a Building Resolution of "Rebuilding Res		
Building Number: Will general acute care services and beds will be relocated to a new, Existing or re ClinicalLab N/A		

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Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Re		responding
Building Number: BLD-01479 Building Name: Main Hospital Tower - Area C Will general acute care services and beds will be relocated to a new, Existing or retrofitted	huilding?	
Radiological/Imaging N/A	bulluling:	
Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Resolution of "Resolution of "Rebuild" or "Resolution or "Rebuild"		responding
Building Name: Main Hospital Tower - Area C Number:		
Will general acute care services and beds will be relocated to a new, Existing or retrofitted	building?	
Pharmaceutical N/A		
Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Re		responding
Building Name: Main Hospital Tower - Area C Number:		
Will general acute care services and beds will be relocated to a new, Existing or retrofitted	building?	
Dietetic N/A		

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Report whether the general building sites or project no	ral acute care services arumbers for buildings with	nd beds will be relocated to a new, exist a Building Resolution of "Rebuild" or "F	ting or retrofitted building and any concept per Section 130061(c)(2)(E	orresponding E)
		Main Hospital Tower - Area C relocated to a new, Existing or retrofitted	d building?	
		nd beds will be relocated to a new, exist a a Building Resolution of "Rebuild" or "F		
Support Services N Report whether the gener	ervices and beds will be	Main Hospital Tower - Area C relocated to a new, Existing or retrofitted and beds will be relocated to a new, exist a Building Resolution of "Rebuild" or "F	ting or retrofitted building and any co	
Building BLD-0 Number: Will general acute care se	1479 Building Name:	Main Hospital Tower - Area C relocated to a new, Existing or retrofitted		

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Report whether the general acute care services a building sites or project numbers for buildings with			
Building Number: BLD-01479 Building Name:	Main Hospital Tower - Area C		
Will general acute care services and beds will be	relocated to a new, Existing or retrofitte	d building?	
Obstetrical Recovery N/A			
Report whether the general acute care services a building sites or project numbers for buildings with			
Building Number: BLD-01479 Building Name:	Main Hospital Tower - Area C		
Will general acute care services and beds will be	relocated to a new, Existing or retrofitte	d building?	
Newborn/Well Baby N/A			
Report whether the general acute care services a building sites or project numbers for buildings with			
Building BLD-01479 Building Name: Number:	Main Hospital Tower - Area C		
Will general acute care services and beds will be	relocated to a new, Existing or retrofitte	d building?	
Emergency N/A			

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Report whether the general acute care services and beds will be relocated to a new, existir building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Re		responding
Building Number: Building Name: Main Hospital Tower - Area C Will general acute care services and beds will be relocated to a new, Existing or retrofitted	building?	
Nuclear Medicine N/A]	
Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Resolution of "Resolution of "Rebuild" or "Resolution of "Resolution o		responding
Building Number: BLD-01479 Building Name: Main Hospital Tower - Area C		
Will general acute care services and beds will be relocated to a new, Existing or retrofitted	building?	
Renal Dialysis N/A		
Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Resolution of "Resolution of "Rebuild" or "Resolution of "Resolution o		responding
Building Number: BLD-01479 Building Name: Main Hospital Tower - Area C		
Will general acute care services and beds will be relocated to a new, Existing or retrofitted	building?	
OutpatientSurgery N/A		

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Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Rebuild" or "Rebuild".		esponding
Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted [N/A] Medical/Surgical (Include GYN)	building?	
Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Rebuild" or "Rebuild".		esponding
Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted Perinatal (exclude Newborn / GYN)) Main Hospital Tower - Area C Main Hospital Tower - Area C Main Hospital Tower - Area C	building?	
Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Re		esponding
Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted Pediatric N/A	building?	

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Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Rebuild" or "Rebuild".		
Building Number: Building Name: Main Hospital Tower - Area C Will general acute care services and beds will be relocated to a new, Existing or retrofitted	building?	
Intensive Care N/A		
Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Rebuild" or "Rebuild".		
Building Number: BLD-03023 Building Name: Main Hospital Tower - Area A		
Will general acute care services and beds will be relocated to a new, Existing or retrofitted	building?	
Anesthesia N/A		
Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Rebuild" or "Rebuild".		
Building Number: BLD-03023 Building Name: Main Hospital Tower - Area A		
Will general acute care services and beds will be relocated to a new, Existing or retrofitted	building?	
Support Services N/A		

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Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c)(2)(E)
Building Number: BLD-03023 Building Name: Main Hospital Tower - Area A
Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?
Nuclear Medicine N/A
Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c)(2)(E)
Building Number: BLD-03023 Building Name: Main Hospital Tower - Area A
Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?
Rehabilitation Therapy N/A

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Type of Service Provided X Surgical X Obstetrical Cesarean/Deliv Therapy X Nursing X Anesthesia X Obstetrical Rehabilitation Therapy X IntensiveCare X Obstetrical X Renal Dialysis X Pediatric/Adol escent X Newborn/ X Surgery X Radiological/ Imaging X Pharmaceutical X Emergency Central Plant X Obstetrical X Nuclear X Support X Nuclear X Support Services Intermediate Care X Administration X Administration X Obstetrical X Support Services X Nuclear X Support Services X Administration X Obstetrical Obstetrical X Obstetrical X Obstetrical Obstetrical	Section 130061(c)(4	te care hospital inpatient D-01479 Building Na	service that is provided in any me: Main Hospital Tower - A		building that is rated SPC-1	1
X Surgical X Obstetrical Cesarean/Deliv Rehabilitation Therapy	_					J
X	Type of Service Pro	ovided	X Surgical			
X	X Nu	ursing	X Anesthesia	V o www.	Ranal Dialysis	
Pediatric/Adol escent X Newborn/ WellBaby Psychiatric Nursing X Pharmaceutical X Dietetic X Newborn/ WellBaby X Emergency X Support Surgery X Support Services	X Int	ensiveCare		Recovery	X Renal Dialysis	
Psychiatric Nursing Maging Imaging X Pharmaceutical X Emergency Central Plant X Obstetrical X Ante/Postprtum X Dietetic X Nuclear X Support Services X Services						
X Pharmaceutical X Emergency Central Plant X Obstetrical X Nuclear X Support Services Intermediate Care Care						
Ante/Postprtum X Nuclear X Support Services Intermediate	140	715111g	X Pharmaceutical	X Emergency	Central Plant	
☐ Care			X Dietetic	X Nuclear Medicine		
			X Administration			
Skilled Nursing	Sk	illed Nursing				

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Report any general acute care hospital inpersection 130061(c)(4)	atient service that is provided in any	y general acute care hospital	building that is rated SPC-1		
Building Number: BLD-03023 Buildin	ng Name: Main Hospital Tower -	Area A			
Type of Service Provided					
	Surgical	Obstetrical Cesarean/Deliv	X Rehabilitation Therapy		
Nursing	X Anesthesia		Renal Dialysis		
IntensiveCare	Clinical Lab	Obstetrical Recovery	Meliai Diaiysis		
Pediatric/Adol escent	Radiological/	Newborn/ WellBaby	Outpatient Surgery		
Psychiatric Nursing	Imaging	Emergency	Central Plant		
	Pharmaceutical	Linergency	Central Plant		
Obstetrical Ante/Postprtum	Dietetic	X Nuclear Medicine	X Support Services		
Intermediate Care	Administration				
Skilled Nursing					

Report any general acute care hospital inpatier per Section 130061(c)(4) Building Number: BLD-03025 Building N	Name: Original Plant	general acute care hospit	al building that is rat	ted SPC-1
Towns of Country Burning Is I				
Type of Service Provided				
	Surgical	Obstetrical Cesarean/Deliv	Rehab Therap	ilitation Dy
Nursing	Anesthesia		□ Popal	Dialysis
IntensiveCare	Clinical Lab	Obstetrical Recovery	L. Kellal	Diaiyoio
Pediatric/Adol escent	Radiological/	Newborn/ WellBaby	Outpat Surger	
Psychiatric Nursing	Imaging	,		
	Pharmaceutical	Emergency	X Centra	I Plant
Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	Suppo Service	rt es
Intermediate Care	Administration			
Skilled Nursing				

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Report the final configuration of all bui requirements whether by retrofit or by per Section 130061(c)(5)	Idings on the hospital campus shown replacement and the type of service	wing how each building will comply to that will be provided in each gene	with the SPC-5/NPC-4 or 5 eral acute care hospital building
Building Number: BLD-01479	Building Name: Main Hospital T	ower - Area C	
Configuration: N/A			
Type of Service Provided			
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal Dialysis
Pediatric/Adol escent	Clinical Lab	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Plant
Intermediate	Dietetic	Emergency	Central Flant
Care Skilled Nursing	Administration	Nuclear Medicine	Support Services
	1		

Report Year: 20	015 10677 L	oma Linda L	Iniversity Medical Center	•		Loma Linda		Page:32 of 66
Report the final cor requirements whetl per Section 13006	her by retrofit or by re	lings on the eplacement	hospital campus showing and the type of service the	g how e nat will t	ach buil oe provid	ding will comply witl ded in each general	n the SPC- acute care	5/NPC-4 or 5 hospital building
Building Number:	BLD-01480	Building Nar	me: Main Hospital Tow	er - Are	а В			
Configuration:	N/A							
Type of Service	Provided							
Nu	ursing		Surgical		Obstet Cesare	trical ean/Deliv		Rehabilitation Therapy
Int	tensiveCare		Anesthesia		Obstet Recov		F	Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Kecov	өгу		
	sychiatric ursing		Radiological/ Imaging		Newbo WellBa			Outpatient Gurgery
	bstetrical nte/Postprtum		Pharmaceutical		Emerg	ency		Central Plant
	termediate are		Dietetic		Nuclos	ar Medicine		Support
	xilled Nursing		Administration		INUCIEC	ai iviculuite	LJ ;	Services

Report Year: 20	015 10677 L	.oma Linda U	Iniversity Medical Center		L	oma Linda		Page:33 of 66
Report the final cor requirements whetl per Section 130061	her by retrofit or by r	dings on the leeplacement a	hospital campus showing and the type of service the	g how e nat will t	ach build be provid	ing will comply witl ed in each general	h the SPC- acute care	5/NPC-4 or 5 hospital building
Building Number:	BLD-01481	Building Nar	ne: Emergency Room	Expans	ion - 197	6		
Configuration:	N/A							
Type of Service	Provided							
Nu	ursing		Surgical		Obstetr Cesare	ical an/Deliv		Rehabilitation Therapy
Int	tensiveCare		Anesthesia		Obstetr Recove		F	Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Recove	яу		
	sychiatric ursing		Radiological/ Imaging		Newbo WellBa			Outpatient Gurgery
	bstetrical nte/Postprtum		Pharmaceutical		Emerge	ency		Central Plant
	termediate are		Dietetic		Nuclea	r Medicine		Support
Sk	killed Nursing		Administration		radioal	. Wedicine		Services

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Report the final cor requirements whetl per Section 13006	ther by retrofit or by r	dings on the eplacement a	hospital campus showing and the type of service the	g how e nat will t	ach build be provid	ding will comply wit ded in each general	h the SPC- l acute care	5/NPC-4 or 5 hospital building
Building Number:	BLD-01482	Building Nar	ne: Northeast Wing - S	Schumar	n Pavilio	n		
Configuration:	N/A							
Type of Service	Provided							
Nu	ursing		Surgical		Obstet Cesare	rical ean/Deliv		Rehabilitation Therapy
Int	tensiveCare		Anesthesia		Obstet Recove		F	Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Necovi	ы		
	sychiatric ursing		Radiological/ Imaging		Newbo WellBa			Outpatient Gurgery
	bstetrical nte/Postprtum		Pharmaceutical		Emerg	ency		Central Plant
	termediate are		Dietetic		Nuclea	ar Medicine		Support
Sk	killed Nursing		Administration		Tuoice	i wedienie		Services

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	er by retrofit or by re				ach building will comply voe provided in each gene		
Building Number:	BLD-01483	Building Na	me: South Wing Phase	2			
Configuration:	N/A						
Type of Service	Provided						
Nur	rsing		Surgical		Obstetrical Cesarean/Deliv		ehabilitation nerapy
Inte	ensiveCare		Anesthesia		Obstetrical Recovery	Re	enal Dialysis
Pec esc	diatric/Adol ent		Clinical Lab		Recovery		
	vchiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		utpatient urgery
	stetrical e/Postprtum		Pharmaceutical		Emergency	□ Ce	entral Plant
	ermediate		Dietetic		,		
Car	re Iled Nursing		Administration		Nuclear Medicine		upport ervices
	·						

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	ther by retrofit or by re				ach building will comply w be provided in each genera		
Building Number:	BLD-01485	Building Na	me: South Wing Phase	e l			
Configuration:	N/A						
Type of Service	e Provided						
N	ursing		Surgical		Obstetrical Cesarean/Deliv		habilitation erapy
In	tensiveCare		Anesthesia		Obstetrical Recovery	Re	nal Dialysis
	ediatric/Adol scent		Clinical Lab		Recovery		
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		tpatient rgery
	bstetrical nte/Postprtum		Pharmaceutical		Emergency	☐ Ce	ntral Plant
	termediate		Dietetic				
	are killed Nursing		Administration		Nuclear Medicine		ipport ervices

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	her by retrofit or by re				ach building will comply we provided in each gener		
Building Number:	BLD-01486	Building Nan	ne: Co-Generation Pla	nt			
Configuration:	N/A						
Type of Service	Provided						
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		ehabilitation herapy
Int	tensiveCare		Anesthesia		Obstetrical Recovery	R	enal Dialysis
	ediatric/Adol cent		Clinical Lab		Noovery		
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		utpatient urgery
	ostetrical nte/Postprtum		Pharmaceutical		Emergency	c	entral Plant
	termediate are		Dietetic		Nuclear Medicine		Support
Sk	xilled Nursing		Administration		Tradical inicalsc	L s	Services
	·						

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Report the final conf requirements whether per Section 130061	er by retrofit or by re	lings on the heplacement a	nospital campus showing and the type of service the	g how ea	ach building will comply we provided in each gener	ith the SPC-5 al acute care	/NPC-4 or 5 hospital building
Building Number:	BLD-02961	Building Nam	ne: Chiller Facility				
Configuration:	N/A						
Type of Service	Provided						
Nur	rsing		Surgical		Obstetrical Cesarean/Deliv		ehabilitation nerapy
Inte	ensiveCare		Anesthesia		Obstetrical Recovery	R	enal Dialysis
Pec esc	diatric/Adol cent		Clinical Lab		Recovery		
	/chiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		utpatient urgery
	stetrical re/Postprtum		Pharmaceutical		Emergency	c.	entral Plant
Inte Car	ermediate re		Dietetic		Nuclear Medicine	_ 	Support
Skil	lled Nursing		Administration	Ш	Nuclear Medicine	□ s	Services
	•						

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Report the final con equirements wheth er Section 130061	her by retrofit or by re	ings on the eplacement	hospital campus showir and the type of service	ng how e that will l	ach building will comply voe provided in each gene	with the SP eral acute ca	C-5/NPC-4 or 5 are hospital building
suilding Number:	BLD-03021	Building Na	me: South Wing Phase	e I			
Configuration:	N/A						
Type of Service	Provided						
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Into	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Recovery		
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	ostetrical nte/Postprtum		Pharmaceutical		Emergency		Central Plant
Into Ca	termediate		Dietetic				
	killed Nursing		Administration		Nuclear Medicine		Support Services

Report Year: 20	10677 L	oma Linda L	Jniversity Medical Cente	r		Loma Linda		Page:40 of 66
Report the final cor requirements wheth per Section 130061	her by retrofit or by r	dings on the eplacement	hospital campus showing and the type of service the	g how e nat will t	ach build be provid	ding will comply w ded in each gener	ith the SP0 al acute ca	2-5/NPC-4 or 5 re hospital building
Building Number:	BLD-03022	Building Nar	me: South Wing Phase	1				
Configuration:	N/A							
Type of Service	Provided							
☐ Nu	ursing		Surgical		Obstet Cesare	rical ean/Deliv		Rehabilitation Therapy
Int	tensiveCare		Anesthesia		Obstet Recov			Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Necov	ы		
	sychiatric ursing		Radiological/ Imaging		Newbo WellBa			Outpatient Surgery
	ostetrical nte/Postprtum		Pharmaceutical		Emerg	ency		Central Plant
Int Ca	termediate are		Dietetic		Nuclos	ar Medicine		Support
	killed Nursing		Administration		Nuclea	ar ivieuicirie		Services
	•							

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	her by retrofit or by re		hospital campus showing and the type of service the					
Building Number:	BLD-03023	Building Nar	me: Main Hospital Tow	er - Area	a A			
Configuration:	N/A							
Type of Service	Provided							
Nu	ursing		Surgical		Obste Cesar	trical ean/Deliv		Rehabilitation Therapy
Inte	tensiveCare		Anesthesia		Obste Recov		F	Renal Dialysis
	ediatric/Adol cent		Clinical Lab		Recov	i Gi y		
	sychiatric ursing		Radiological/ Imaging		Newbo WellB			Outpatient Gurgery
	ostetrical nte/Postprtum		Pharmaceutical		Emerç	gency		Central Plant
Into Ca	termediate		Dietetic		NI ala	au Mai Patan		2
	xilled Nursing		Administration		Nucle	ar Medicine		Support Services

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	ther by retrofit or by re				ach building will comply wi be provided in each genera		
Building Number:	BLD-03024	Building Nar	me: South Wing Phase	2			
Configuration:	N/A						
Type of Service	e Provided						
N	ursing		Surgical		Obstetrical Cesarean/Deliv		habilitation erapy
In	tensiveCare		Anesthesia		Obstetrical Recovery	Re	nal Dialysis
	ediatric/Adol scent		Clinical Lab		Recovery		
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		tpatient gery
	bstetrical nte/Postprtum		Pharmaceutical		Emergency	☐ Ce	ntral Plant
	termediate are		Dietetic				
	killed Nursing		Administration		Nuclear Medicine		pport rvices

ding Number: BLD-03	Building Na	ame: Original Plant		
Configuration: N/A				
Type of Service Provide	ed			
Nursing		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCa	are	Anesthesia	Obstetrical Recovery	Renal Dialysis
Pediatric/A escent	dol	Clinical Lab	Recovery	
Psychiatric Nursing		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postp	rtum	Pharmaceutical	Emergency	Central Plant
Intermediat	е	Dietetic		
Care Skilled Nur	sing	Administration	Nuclear Medicine	Support Services

Report Year: 20	015 10677 L	oma Linda U	Iniversity Medical Center			Loma Linda		Page:44 of 66
Report the final cor requirements wheth per Section 130061	her by retrofit or by re	lings on the leplacement a	hospital campus showing and the type of service the	g how e nat will b	ach build De provid	ding will comply with ded in each general	n the SPC- acute care	5/NPC-4 or 5 hospital building
Building Number:	BLD-05490	Building Nan	ne: Emergency Genera	ator				
Configuration:	N/A							
Type of Service	Provided							
Nu	ursing		Surgical		Obstet Cesare	rical ean/Deliv		ehabilitation herapy
Int	tensiveCare		Anesthesia		Obstet Recov		R	enal Dialysis
	ediatric/Adol scent		Clinical Lab		Recov	егу		
	sychiatric ursing		Radiological/ Imaging		Newbo WellBa			outpatient urgery
	bstetrical nte/Postprtum		Pharmaceutical		Emerg	ency		entral Plant
	termediate are		Dietetic		Nuclos	ar Medicine		Support
	xilled Nursing		Administration		INUCIEC	i iviculuirie		Services

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 and SPC-5 per Section 130061(e)	Report Year: 2015	10677	Loma Linda Unive	ersity Medical Center	Loma Linda		Page:45 of 66
Type of Service Provided Nursing Inpatient Beds	Include information on and SPC-5 per Section	the number of in 130061(e)	inpatient beds by t	type of Service provided by b	uildings that are classified a	is SPC-2, SPC	C-3, SPC-4,
Nursing Inpatient Beds	Building Number: BLI	D-01480	Building Name	ne: Main Hospital Tower - A	rea B		
IntensiveCare Inpatient Beds Beds Beds Beds Cesarean/Deliv Therapy Therapy	Type of Service Prov	vided					
Beds Pediatric/Adol Inpatient escent Beds Psychiatric Nursing Inpatient Beds Obstetrical Recovery Radiological/ Imaging Newborn/ WellBaby Obstetrical Ante/Postprtum Beds Pharmaceutical Intermediate Inpatient Beds Skilled Nursing Renal Dialysis Recovery Pharmaceutical Surgery Dietetic Nuclear Medicine Administration	Nursing		0	Surgical			
Pediatric/Adol Inpatient Beds Psychiatric Inpatient Beds Obstetrical Ante/Postprtum Beds Intermediate Inpatient Care Beds Skilled Nursing Clinical Lab Recovery Radiological/ Imaging Newborn/ WellBaby Pharmaceutical Emergency Intermediate Inpatient Beds Administration Clinical Lab Recovery Radiological/ Imaging Newborn/ WellBaby Dietetic Nuclear Medicine Support Support Support Services	IntensiveCare		0	Anesthesia			
Psychiatric Inpatient Beds Imaging Imaging WellBaby Obstetrical Inpatient Beds Pharmaceutical Intermediate Inpatient Care Beds Skilled Nursing Imaging Imaging WellBaby Imaging WellBaby Imaging Imaging Imaging Surpery Imaging Imaging Imaging Imaging Surpery Imaging Ima			0	Clinical Lab		Rena	l Dialysis
Obstetrical Inpatient Ante/Postprtum Beds Intermediate Inpatient Care Beds Skilled Nursing Dietetic Emergency X Central Plant Nuclear Medicine Support Services Administration			0				
Intermediate Inpatient 0 Medicine Services Skilled Nursing Administration			0	Pharmaceutical	Emergency	X Centr	ral Plant
Skilled Nursing			0	Dietetic			
Beds Inpatient U U	Skilled Nursing	Inpatient Beds	0	Administration			
Total Beds this Building			0				

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	PC-5 per Section		inpatient beds	by type of Service provided by b	uildings that are classified a	as SPC-2, SPC-3, SPC-4,
Buildii	ng Number: BLD	D-01481	Building N	lame: Emergency Room Expa	nsion - 1976	
Туре	of Service Prov	ided				
	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	X Emergency	Central Plant
	Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
	Skilled Nursing	Inpatient Beds	0	Administration		
	Total Beds this Building		0			

SPC-5 per Section	D-01482	Duilding N	lame: Northeast Wing - Schum	on Devillion	
uilding Number: BLE	J-U146Z	Building N	lame. Inortheast Wing - Schum	an Pavillon	
Type of Service Prov	ided				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	X Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	X Radiological/ Imaging	Newborn/ WellBaby	X Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

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	le information on t SPC-5 per Section		f inpatient beds	by type of S	Service provided by	buildings that are classified a	s SPC-2, SPC)-3, SPC-4,
Buildi	ng Number: BLE	D-01483	Building N	lame: So	uth Wing Phase 2			
Туре	e of Service Prov	<u>rided</u>						
	Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv	Reha	abilitation apy
X	IntensiveCare	Inpatient Beds	78	X	Anesthesia			
	Pediatric/Adol escent	Inpatient Beds	0	X	Clinical Lab	X Obstetrical Recovery	Rena	ıl Dialysis
	Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	X Newborn/ WellBaby	Outpa Surge	atient ery
X	Obstetrical Ante/Postprtum	Inpatient Beds	36	X	Pharmaceutical	Emergency	Centr	ral Plant
	Intermediate Care	Inpatient Beds	0	X	Dietetic	Nuclear Medicine	X Supp Servi	ort ces
	Skilled Nursing	Inpatient Beds	0	X	Administration			
	Total Beds this Building		114					

Report	Year: 2015	10677	Loma Linda Univ	versity Me	dical Center	Loma Linda		Page:49 of 66	
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, and SPC-5 per Section 130061(e)									
Building Number: BLD-01485 Building Name: South Wing Phase I									
Type of Service Provided									
	Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv	Reha Thera	bilitation apy	
X	IntensiveCare	Inpatient Beds	122	X	Anesthesia				
	Pediatric/Adol escent	Inpatient Beds	0	X	Clinical Lab	X Obstetrical Recovery	Rena	l Dialysis	
	Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	X Newborn/ WellBaby	X Outpa Surge		
	Obstetrical Ante/Postprtum	Inpatient Beds	0	X	Pharmaceutical	Emergency	Centr	ral Plant	
	Intermediate Care	Inpatient Beds	0	X	Dietetic	Nuclear Medicine	X Supp Servi	ort ces	
	Skilled Nursing	Inpatient Beds	0	X	Administration				
	Total Beds this Building		122						

eport Year: 2015	10677		by type of Service provided by be	Loma Linda	Page:50 of 66
and SPC-5 per Section		i inpatient beds i	by type of Service provided by bi	ulidings that are classified a	18 3PC-2, 3PC-3, 3PC-4,
Building Number: BLI	D-01486	Building Na	ame: Co-Generation Plant		
Type of Service Prov	vided				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	X Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

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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, and SPC-5 per Section 130061(e)								
Building Number: BLD-02961 Building Name: Chiller Facility								
Type of Service Provided								
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy			
IntensiveCa	re Inpatient Beds	0	Anesthesia					
Pediatric/Adescent	ol Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis			
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery			
Obstetrical Ante/Postprt	Inpatient tum Beds	0	Pharmaceutical	Emergency	X Central Plant			
Intermediate Care	e Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services			
Skilled Nursi	ing Inpatient Beds	0	Administration					
Total Beds to Building	his	0						

Report	Year: 2015	10677 L	oma Linda Unive	ersity Me	edical Center	Loma Linda		Page:52 of 66
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, and SPC-5 per Section 130061(e)								
Building Number: BLD-03021 Building Name: South Wing Phase I								
Type of Service Provided								
	Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv	Reha Ther	abilitation rapy
	IntensiveCare	Inpatient Beds	0	X	Anesthesia			
	Pediatric/Adol escent	Inpatient Beds	0	X	Clinical Lab	Obstetrical Recovery	Rena	al Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outp Surg	patient gery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Cent	tral Plant
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Supp Serv	
	Skilled Nursing	Inpatient Beds	0		Administration			
	Total Beds this Building		0					

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	ection 130061(e)	f inpatient beds t	by type of Service provided by bu	uildings that are classified a	as SPC-2, SPC-3, SPC-4,			
	<u> </u>							
Building Number:	BLD-03022	Building Na	ame: South Wing Phase I					
<u> </u>								
Type of Service	Provided							
Nursing	Inpatient Beds	0	X Surgical	Obstetrical Cesarean/Deliv	X Rehabilitation Therapy			
IntensiveCa	are Inpatient Beds	0	X Anesthesia					
			Clinical Lab	Obstetrical Recovery	Renal Dialysis			
Pediatric/A escent	dol Inpatient Beds	0	X Cillical Lab	Recovery				
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery			
Obstetrical		0	X Pharmaceutical	Emergency	Central Plant			
Ante/Postp	rtum Beds							
Intermediat	te Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services			
			Administration					
Skilled Nul	Inpatient Beds	0						
Total Beds Building	this	0						
	Inpatient Beds		Administration					

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iclud nd S	e information on t PC-5 per Section	the number of	inpatient beds	by type of Service provided by bu	uildings that are classified a	as SPC-2, SPC-3, SPC-4,			
	. с с ре. сосион								
Buildii	ng Number: BLD	D-03024	Building N	lame: South Wing Phase 2					
Type of Service Provided									
	Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy			
	IntensiveCare	Inpatient Beds	0	Anesthesia					
	Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis			
	Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery			
	Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	Central Plant			
	Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services			
	Skilled Nursing	Inpatient Beds	0	Administration					
	Total Beds this Building		0						

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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, and SPC-5 per Section 130061(e)									
Building Number: BLD-05490 Building Name: Emergency Generator									
Type of Service Provided									
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy				
IntensiveCare	e Inpatient Beds	0	Anesthesia						
Pediatric/Ado escent	l Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis				
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery				
Obstetrical Ante/Postprtu	Inpatient m Beds	0	Pharmaceutical	Emergency	X Central Plant				
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services				
Skilled Nursin	ng Inpatient Beds	0	Administration						
Total Beds thi Building	s	0							

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