



ISDH Hospital Service Report
State Form 49476 (R /7-02)
IC 16-21-6

Status: Finalized

I. Hospital Information

Hospital Name: ST. CATHERINE HOSPITAL, INC.

Provider #: 15-0008

City: East Chicago

County: Lake

Year: 2015

Person Completing the Report: St. Catherine Hospital

Email Address: bchocholek@comhs.org

LICENSURE, ACCREDITATION, OR DESIGNATED UNITS (check all that apply)

State Licensure: Acute License LTC Certification

Private Accreditation: JCAHO HFAP

CMS Specialized Hosp: CAH TLC Rehab

DRG Exempt: Psych Rehab Swing Bed

Number of Total Hospital Full Time Equivalent 884

II. Hospital Service Utilization

Hospital Service Description	Number of Set-up Beds	Number of Discharges	Number of Patient Days	Annual Total Charges
Burn Care	0	0	0	\$0
Cardiac Intensive	0	0	0	\$0
ICU Medical/Surgical	10	184	2463	\$4,361,760
ICU Neonatal	0	0	0	\$0
ICU Pediatric	0	0	0	\$0
Medical/Surgical	108	4631	18337	\$19,980,926
Neonatal Intermediate	0	0	0	\$0
Normal Newborn	9	595	1237	\$1,142,518
Obstetrics	10	487	1452	\$1,288,372
Pediatric	8	164	380	\$355,772
Psychiatric	23	1250	7299	\$19,974,735
Rehabilitation	30	842	9019	\$8,049,465

Substance Abuse	0	0	0	\$0
Swing Bed Program	NA	0	0	\$0
Extended Care	0	0	0	\$0
Observation Beds	0	0	0	\$0
All Other Services	0	0	0	NA
Total Acute	198	8153	40187	NA

III. Nursing Facility Utilization

	Number of Licensed Beds	Number of Discharges	Number of Patient Days
Nursing Facility	0	0	0

IV. Number of Outpatient Encounters By Diagnostic Group

Please identify the number of outpatient encounters for your hospital by ICD-9-CM Diagnostic Categories

Diagnostic Categories	Number of Encounters	Diagnostic Categories	Number of Encounters
Infectious Disease	1736	HIV	77
Neoplasms	1417	Endocrine	7764
Diseases of Blood	2048	Mental Disorders	2493
Nervous	3294	Circulatory	7403
Respiratory	5978	Digestive Diseases	3450
Genitourinary	6784	Pregnancy	3253
Skin	1775	Musculoskeletal	7761
Congenital	105	Perinatal	48
All Injuries	6835		
Other/Known	36024	Total Encounters	98245

V. Number of Outpatient Encounters By Diagnostic Group

Please identify the number of outpatient encounters for your hospital by ICD-10-CM Diagnostic Categories

Diagnostic Categories	Number of Encounters	Diagnostic Categories	Number of Encounters
Certain infectious and parasitic diseases	0	HIV	0
Neoplasms	0	Endocrine, nutritional and metabolic diseases	0
Diseases of blood and blood-forming organs and certain disorders involving the immune mechanism	0	Mental, Behavioral and Neurodevelopmental disorders	0
Diseases of the nervous	0	Diseases of the circulatory	0

system		system	
Diseases of the respiratory system	0	Diseases of the digestive Diseases	0
Diseases of the genitourinary system	0	Pregnancy, childbirth and teh puerperium	0
Diseases of the skin and subcutaneous tissue	0	Diseases of the musculoskeletal system and connective tissue	0
Congenital malfomations, deformations and chromosomal abnormalities	0	Certain conditions originating in the perinatal period	0
Injury, poisoning and certain other consequences of external causes	0		
Other/Known	0	Total Encounters	0

Total ED Visits	ED Injury Visits	ED Injury Admissions
32128	28270	3858

Comments

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