



## ISDH Hospital Service Report

State Form 49476 (R /7-02)

IC 16-21-6

### I. Hospital Information

*Hospital Name:* ST. VINCENT MERCY HOSPITAL, INC.

*Provider #:* 151308

*City:* Elwood

*County:* Madison

*Year:* 2007

#### 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 Equivalents 221.4

### 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	3	47	159	\$233,375
ICU Neonatal	0	0	0	\$0
ICU Pediatric	0	0	0	\$0
Medical/Surgical	25	696	2617	\$1,909,829
Neonatal Intermediate	0	0	0	\$0
Normal Newborn	0	0	0	\$0
Obstetrics	0	0	0	\$0
Pediatric	0	0	0	\$0
Psychiatric	0	0	0	\$0
Rehabilitation	0	0	0	\$0
Substance Abuse	0	0	0	\$0
Swing Bed Program	NA	174	1644	\$441,730
Extended Care	0	0	0	\$0

Observation Beds	0	0	284	\$225,774
All Other Services	0	0	0	NA
Total Acute	28	917	4704	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	175	HIV	3
Neoplasms	793	Endocrine	1201
Diseases of Blood	384	Mental Disorders	1634
Nervous	848	Circulatory	1443
Respiratory	998	Digestive Diseases	603
Genitourinary	1159	Pregnancy	81
Skin	243	Musculoskeletal	2666
Congenital	43	Perinatal	15
All Injuries	123		
Other/Known	11890	Total Encounters	24302

Total ED Visits	ED Injury Visits	ED Injury Admissions
8090	2522	138

### Comments

