



ISDH Hospital Service Report

State Form 49476 (R /7-02)

IC 16-21-6

I. Hospital Information

Hospital Name: ST. MARGARET MERCY HEALTHCARE CENTERS (NORTH CAMPUS)

Provider #: 15-0004

City: Hammond

County: Lake

Year: 2011

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 1125.32

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	20	239	3817	\$7,384,719
ICU Neonatal	0	0	0	\$0
ICU Pediatric	0	0	0	\$0
Medical/Surgical	149	7349	33043	\$35,612,564
Neonatal Intermediate	0	0	0	\$0
Normal Newborn	10	329	1028	\$736,432
Obstetrics	10	403	915	\$1,432,308
Pediatric	0	0	0	\$0
Psychiatric	46	2198	9123	\$12,124,198
Rehabilitation	0	0	0	\$0
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	235	10518	47926	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	1450	HIV	25
Neoplasms	3519	Endocrine	5046
Diseases of Blood	1113	Mental Disorders	1517
Nervous	3046	Circulatory	5081
Respiratory	5536	Digestive Diseases	3015
Genitourinary	5036	Pregnancy	1802
Skin	1780	Musculoskeletal	5221
Congenital	66	Perinatal	100
All Injuries	11071		
Other/Known	27901	Total Encounters	82325

Total ED Visits	ED Injury Visits	ED Injury Admissions
42306	10281	11372

Comments

