



## ISDH Hospital Service Report

State Form 49476 (R /7-02)

IC 16-21-6

### I. Hospital Information

*Hospital Name:* ST. CLARE MEDICAL CENTER

*Provider #:* 150022

*City:* Crawfordsville

*County:* Montgomery

*Year:* 2008

#### 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 274

### 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	6	109	477	\$660,696
ICU Neonatal	0	0	0	\$0
ICU Pediatric	0	0	0	\$0
Medical/Surgical	33	1459	4591	\$3,181,233
Neonatal Intermediate	0	0	0	\$0
Normal Newborn	11	324	753	\$370,755
Obstetrics	9	363	909	\$653,025
Pediatric	0	0	0	\$0
Psychiatric	11	200	2331	\$2,475,907
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	70	2455	9061	NA

### III. Nursing Facility Utilization

	Number of Licensed Beds	Number of Discharges	Number of Patient Days
Nursing Facility	17	280	4136

### 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	700	HIV	0
Neoplasms	3264	Endocrine	3623
Diseases of Blood	1341	Mental Disorders	763
Nervous	2159	Circulatory	7202
Respiratory	3425	Digestive Diseases	2570
Genitourinary	3845	Pregnancy	1557
Skin	1105	Musculoskeletal	7121
Congenital	65	Perinatal	131
All Injuries	6259		
Other/Known	29043	Total Encounters	74173

Total ED Visits	ED Injury Visits	ED Injury Admissions
19744	10233	1147

### Comments

