



ISDH Hospital Service Report

State Form 49476 (R /7-02)

IC 16-21-6

I. Hospital Information

Hospital Name: ST. JOSEPH HOSPITAL (FORT WAYNE)

Provider #: 150047

City: Fort Wayne

County: Allen

Year: 2010

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 625.46

II. Hospital Service Utilization

Hospital Service Description	Number of Set-up Beds	Number of Discharges	Number of Patient Days	Annual Total Charges
Burn Care	12	305	2537	\$6,977,883
Cardiac Intensive	8	269	1263	\$2,879,098
ICU Medical/Surgical	12	251	2651	\$6,043,143
ICU Neonatal	8	87	1119	\$2,258,837
ICU Pediatric	0	0	0	\$0
Medical/Surgical	73	2493	9917	\$14,263,314
Neonatal Intermediate	0	0	0	\$0
Normal Newborn	20	432	1023	\$3,321,244
Obstetrics	18	532	1496	\$1,666,374
Pediatric	0	0	0	\$0
Psychiatric	39	1051	6487	\$10,686,345
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	190	5420	26493	NA

III. Nursing Facility Utilization

	Number of Licensed Beds	Number of Discharges	Number of Patient Days
Nursing Facility	21	455	5768

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	1259	HIV	143
Neoplasms	873	Endocrine	7253
Diseases of Blood	1334	Mental Disorders	2411
Nervous	2236	Circulatory	5587
Respiratory	3055	Digestive Diseases	2165
Genitourinary	4303	Pregnancy	1583
Skin	3917	Musculoskeletal	7757
Congenital	69	Perinatal	206
All Injuries	7911		
Other/Known	30019	Total Encounters	82081

Total ED Visits	ED Injury Visits	ED Injury Admissions
21632	4290	170

Comments

