



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

Status: Finalized

I. Hospital Information

Hospital Name: DEKALB MEMORIAL HOSPITAL, INC.

Provider #: 15-0045

City: Auburn

County: DeKalb

Year: 2013

Person Completing the Report: Christa Pomeroy

Email Address: cpomeroy@dekalbhealth.com

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 0

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	513	1429	\$0
ICU Neonatal	0	0	0	\$0
ICU Pediatric	0	0	0	\$0
Medical/Surgical	31	957	3187	\$0
Neonatal Intermediate	0	0	0	\$0
Normal Newborn	10	472	937	\$0
Obstetrics	10	479	1090	\$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	0	0	\$0
Extended Care	0	0	0	\$0
Observation Beds	0	0	0	\$0
All Other Services	0	0	0	NA
Total Acute	57	2421	6643	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	598	HIV	10
Neoplasms	1328	Endocrine	7544
Diseases of Blood	576	Mental Disorders	743
Nervous	1673	Circulatory	4509
Respiratory	3398	Digestive Diseases	2458
Genitourinary	3493	Pregnancy	1814
Skin	1156	Musculoskeletal	8074
Congenital	76	Perinatal	69
All Injuries	4678		
Other/Known	10048	Total Encounters	52245

Total ED Visits	ED Injury Visits	ED Injury Admissions
18197	3031	64

Comments



