



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

Status: Finalized

I. Hospital Information

Hospital Name: SCOTT COUNTY MEMORIAL HOSPITAL

Provider #: 151334
 City: SCOTTSBURG
 County: SCOTT
 Year: 2014

Person Completing the Report: Joyce Holder
 Email Address: joyce.holder@smh1.org

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	5	111	368	\$362,112
ICU Neonatal	0	0	0	\$0
ICU Pediatric	0	0	0	\$0
Medical/Surgical	20	273	2718	\$1,233,972
Neonatal Intermediate	0	0	0	\$0
Normal Newborn	12	127	287	\$87,620
Obstetrics	8	130	275	\$189,475
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	788	775	\$434,117
All Other Services	0	0	0	NA
Total Acute	45	1429	4423	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	914	HIV	1
Neoplasms	566	Endocrine	2689
Diseases of Blood	1687	Mental Disorders	669
Nervous	1452	Circulatory	2488
Respiratory	2943	Digestive Diseases	1699
Genitourinary	2849	Pregnancy	1062
Skin	1240	Musculoskeletal	3133
Congenital	56	Perinatal	64
All Injuries	0		
Other/Known	10554	Total Encounters	34066

Total ED Visits	ED Injury Visits	ED Injury Admissions
14139	0	0

Comments