

Status: Finalized

I. Hospital Information

Hospital	СТ	UNICENT	CADMEL	HOCDITAL
Name:	51.	VINCENT	CARMEL	HOSPITAL

Provider #: 150157

City: Carmel

County: Hamilton

Year: 2014

Person Completing the Report: Stephanie Spencer

Email Address: saspence@stvincent.org

LICENSURE, ACCREDITATION, OR DESIGNATED UNITS (check all that apply)

State Licensure: ✓ Acute License ☐ LTC Certification

Private Accreditation: ☑ JCAHO ☐ HFAP

CMS Specialized

alized CAH TLC Rehab

DRG Exempt: □Psych □Rehab □Swing Bed

Number of Total Hospital Full Time Equivalents 589

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	10	124	1053	\$4,914,755
ICU Neonatal	15	176	1956	\$9,965,249
ICU Pediatric	0	0	0	\$0
Medical/Surgical	60	3010	9402	\$23,647,731
Neonatal Intermediate	0	0	0	\$0
Normal Newborn	32	1362	3279	\$6,282,951
Obstetrics	36	1507	4257	\$32,792,332
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	153	6179	19947	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	275	HIV	0
Neoplasms	1227	Endocrine	767
Diseases of Blood	472	Mental Disorders	320
Nervous	1374	Circulatory	1255
Respiratory	1439	Digestive Diseases	4172
Genitourinary	4233	Pregnancy	1354
Skin	545	Musculoskeletal	4679
Congenital	103	Perinatal	107
All Injuries	4888		
Other/Known	20559	Total Encounters	47769

Total ED Visits	ED Injury Visits	ED Injury Admissions
14255	4454	428

Comments