

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

Status: Finalized

I. Hospital Information

Hospital
Name:ST. VINCENT WILLIAMSPORT HOSPITALProvider #:151307City:WilliamsportCounty:WarrenYear:2014Person Completing the Report:Sunday Spong
Email Address:Sbspong@stvincent.orgSunday SpongLICENSURE, ACCREDITATION, OR DESIGNATED UNITS (check all that apply)

State Licensure: ☑ Acute License □LTC Certification

Private Accreditation: I JCAHO HFAP

CMS Specialized Hosp: ☑CAH □TLC □Rehab

DRG Exempt: □Psych □Rehab ☑ Swing Bed

Number of Total Hospital Full Time Equivalents 168.23

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	0	0	0	\$0
ICU Neonatal	0	0	0	\$0
ICU Pediatric	0	0	0	\$0
Medical/Surgical	16	554	1809	\$7,493,884
Neonatal Intermediate	0	0	0	\$0
Normal Newborn	0	0	0	\$0
Obstetrics	0	0	0	\$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	112	766	\$372,155
Extended Care	0	0	0	\$0
Observation Beds	0	0	0	\$0
All Other Services	0	0	0	NA
Total Acute	16	666	2575	NA

III. Nursing Facility Utilization

	Number of	Number of	Number of
	Licensed Beds	Discharges	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	228	HIV	0
Neoplasms	533	Endocrine	2674
Diseases of Blood	888	Mental Disorders	210
Nervous	848	Circulatory	3682
Respiratory	1541	Digestive Diseases	776
Genitourinary	1982	Pregnancy	121
Skin	778	Musculoskeletal	2860
Congenital	20	Perinatal	18
All Injuries	2721		
Other/Known	14638	Total Encounters	34518

Total ED Visits	ED Injury Visits	ED Injury Admissions
9185	2559	55

Comments