



ISDH Hospital Service Report

State Form 49476 (R /7-02)

IC 16-21-6

I. Hospital Information

Hospital Name: ST. MARY'S MEDICAL CENTER (HOBART)

Provider #: 15-0034

City: Hobart

County: Lake

Year: 2012

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 1168

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	12	305	3745	\$5,598,439
ICU Neonatal	0	0	0	\$0
ICU Pediatric	0	0	0	\$0
Medical/Surgical	141	9515	45294	\$38,771,883
Neonatal Intermediate	0	0	0	\$0
Normal Newborn	18	568	1112	\$1,331,641
Obstetrics	11	709	1567	\$2,186,591
Pediatric	6	296	660	\$384,292
Psychiatric	0	0	0	\$0
Rehabilitation	20	644	6661	\$4,432,395
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	208	12037	59039	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	1228	HIV	245
Neoplasms	4917	Endocrine	11971
Diseases of Blood	2162	Mental Disorders	1092
Nervous	4797	Circulatory	12227
Respiratory	6015	Digestive Diseases	5034
Genitourinary	10845	Pregnancy	2818
Skin	2661	Musculoskeletal	13604
Congenital	236	Perinatal	100
All Injuries	10235		
Other/Known	47622	Total Encounters	137809

Total ED Visits	ED Injury Visits	ED Injury Admissions
36520	7332	642

Comments

