Hospital Profile - C	Y 2012	Morrison	Community	Hospital			Morri	son		Page 1	
Ownership, Ma				•	Patients by Race Patients by Ethn						
ADMINISTRATOR NAM	IE: Pam Pfis	ter			WI	nite	100).0% Hi	spanic or Latino	o: 2.4%	
ADMINSTRATOR PHO	NE (815) 772	2-5530			Bla	ack	(0.0% No	ot Hispanic or L	atino: 97.6%	
OWNERSHIP:	Morrison	Community Ho	spital District		An	nerican Indian	().0% Ur	nknown:	0.0%	
OPERATOR:	Morrison	Community Ho	spital District		As	Asian).0% 			
MANAGEMENT:	Hospital	District			Ha	waiian/ Pacific	(0.0%	IDPH Number	: 1636	
CERTIFICATION:	Critical A	ccess Hospital			Un	known	(0.0%	HPA	B-03	
FACILITY DESIGNATION	ON: General	Hospital							HSA	1	
ADDRESS	303 Nortl	n Jackson Stree	t CIT	Y: Morrison	l	COUNTY:	: Whitesi	de County			
			Facility Utilizat	tion Data by	/ Category	of Service					
Clinical Service	Authorized CON Beds 12/31/2012	Setup and	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %	
Medical/Surgical	25	25	17	231	2,448	82	11.0	6.9	27.7	27.7	
0-14 Years				4	7						
15-44 Years				19	38						
45-64 Years				31	186						
65-74 Years				36	459						
75 Years +				141	1,758						
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0	
Intensive Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0	
Direct Admission				0	0						
Transfers				0	0						
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0	
Maternity	O	O	O	0	0	O	0.0	0.0	0.0	0.0	
Clean Gynecology				0	0						
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0	
	38	35	29	23	9,989	0	434.3	27.4	72.0	78.2	
Long Term Care	36	აა	29	0	9,969	U	0.0	0.0	72.0	76.2	
Swing Beds									0.0	0.0	
Acute Mental Illness	0	0	0	0	0	0	0.0	0.0	0.0	0.0	
Rehabilitation	0	0	0	0	0	0	0.0	0.0	0.0	0.0	
Long-Term Acute Care		0	0	0	0	0	0.0	0.0	0.0	0.0	
Dedcated Observation	0			054	40.407	0	40.0	040	F4.4		
Facility Utilization	63			254	12,437	82	49.3	34.3	54.4		
			(Includes ICU I		<u> </u>		r Course				
	Medicare	Medicaid	Other Public	_	atients Served by Payor Sou surance Private Pay			Cha	rity Cara	Totals	
				Private in		•		Cria	rity Care	Totals	
Inpatients	70.1%	8.7%	0.0%		11.0%	10.2%			0.0%		
	178	22	0		28	26			0	254	
Outpatients	15.0%	28.1%	0.0%		46.1%	10.2%			0.5%		
	3133	5865	0		9620	2135			95	20,848	
Financial Year Reported	<u>d:</u> 7/1/2011	to 6/30/201	2 <u>Inpatier</u>	t and Outpa	atient Net	Revenue by P	ayor Soul	ce		Total Charity Care Expense	
	Medicare	Medicaid	Other Public	Private In:	surance	Private Pay		Totals	Care	36,098	
Inpatient	59.4%	14.3%	0.0%		11.4%	14.8%	1	00.0%	Expense	•	
Revenue (\$)	2,791,474	672,726	0	!	535,840	696,651	4.6	96,691	0	Total Charity	
0	* *	•								Care as % of Net Revenue	
Outpatient Revenue (\$)	24.9%	16.9%	0.0%	2.5	38.9%	19.3%		00.0%	26 008		
πονοπασ (ψ)	1,655,509	1,120,067	0	2,5	586,141	1,284,502	6,64	16,219	36,098	0.3%	
<u>Bi</u>	rthing Data			Newl	orn Nurs	ery Utilization			Organ Transp	antation	
Number of Total Births	S:			el 1 Patient			0	Kidr	ney:	0	
Number of Live Births:	:			el 2 Patient l	•		0	Hea		0	
Birthing Rooms:				el 2+ Patient	•		0	Lun	•	0	
Labor Rooms:				l Nursery Pa	atientdays		0		art/Lung:	0	
Delivery Rooms:	_		0		-l	C4			icreas:	0	
Labor-Delivery-Recove	-		0		aboratory	<u>stuaies</u>		Live	er:	0	
Labor-Delivery-Recove	ery-Postpartum I	Kooms:	•	tient Studies			843	Tota	al:	0	
C-Section Rooms: CSections Performed:				atient Studio		Contract	7,119 784				
COECHOIS FEHOIMED:			0 5100	11011II	eu onder (JUHLIAUL	704				

Surgical Specialty

Cardiovascular

Dermatology

General Gastroenterology

Neurology OB/Gynecology

Oral/Maxillofacial

Ophthalmology

Otolaryngology

Plastic Surgery

Orthopedic

Podiatry

Thoracic

Urology

Totals

CY 2012	? N	Morrison	Commu	nity Hosp	ital		Morri		Page 2		
	Operating	Rooms		Surgica	I Cases	<u>s</u>	urgical Hou	Hours per Case			
Inpatient	ient Outpatient Combined Total		Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient		
0	0	0	0	0	0	0	0	0	0.0	0.0	
0	0	0	0	0	0	0	0	0	0.0	0.0	
0	1	0	1	0	3	0	3	3	0.0	1.0	
0	1	0	1	0	77	0	54	54	0.0	0.7	
0	0	0	0	0	0	0	0	0	0.0	0.0	
0	0	0	0	0	0	0	0	0	0.0	0.0	
0	0	0	0	0	0	0	0	0	0.0	0.0	
0	1	0	1	0	55	0	29	29	0.0	0.5	
0	0	0	0	0	0	0	0	0	0.0	0.0	
0	1	0	1	0	15	0	8	8	0.0	0.5	
0	0	0	0	0	0	0	0	0	0.0	0.0	

0.0

0.0

0.0

0.0

1.0

0.0

0.0

0.6

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations Stage 2 Recovery Stations

Dedicated and Non-Dedicated Procedure Room Utilzation											
	Procedure Rooms				<u>Surgical</u>	al Cases	Surgical Hours			Hours per Case	
Procedure Type	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	0	0	0	0	0	0	0	0.0	0.0
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
			<u>Mu</u>	ultipurp	ose Non-De	dicated Rooi	<u>ms</u>				
minor procedures	0	1	0	1	0	39	0	17	17	0.0	0.4
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma	<u>Care</u>		Cardiac Catheterization Utilization	
Certified Trauma Center		No	Total Cardiac Cath Procedures:	0
Level of Trauma Service	Level 1	Level 2	Diagnostic Catheterizations (0-14)	0
	(Not Answered)	Not Answered	Diagnostic Catheterizations (15+)	0
Operating Rooms Dedicated for Trau	ıma Care	0	Interventional Catheterizations (0-14):	0
Number of Trauma Visits:		0	Interventional Catheterization (15+)	0
Patients Admitted from Trauma		0	EP Catheterizations (15+)	0
Emergency Service Type:		Comprehensive	Cardiac Surgery Data	
Number of Emergency Room Station	IS	3	Total Cardiac Surgery Cases:	0
Persons Treated by Emergency Serv	vices:	1,504	Pediatric (0 - 14 Years):	0
Patients Admitted from Emergency:		97	Adult (15 Years and Older):	0
Total ED Visits (Emergency+Trauma):	1,504	Coronary Artery Bypass Grafts (CABGs)	
			performed of total Cardiac Cases:	0
Outpatient Service	<u>Data</u>		Cardiac Catheterization Labs	
Total Outpatient Visits		20,848	Total Cath Labs (Dedicated+Nondedicated labs):	0
Outpatient Visits at the Hospital/ (Campus:	20,848	Cath Labs used for Angiography procedures	0
Outpatient Visits Offsite/off campu	JS	0	Dedicated Diagnostic Catheterization Lab	0
			Dedicated Interventional Catheterization Labs	0
			Dedicated EP Catheterization Labs	0

Diagnostic/Interventional			Examinations Radiation Equipment					Therapies/	
<u>Equipment</u>	Owned Contract		Inpatient	Outpt	Contract	Own		Contract	<u>Treatments</u>
General Radiography/Fluoroscopy	1	0	38	1,303	0	Lithotripsy	0	0	0
Nuclear Medicine	0	0	0	0	0	Linear Accelerator	0	0	0
Mammography	1	0	0	291	0	Image Guided Rad Therapy	0	0	0
Ultrasound	1	0	7	230	0	Intensity Modulated Rad Thr	p 0	0	0
Angiography	0	0				High Dose Brachytherapy	0	0	0
Diagnostic Angiography			0	0	0	Proton Beam Therapy	0	0	0
Interventional Angiography			0	0	0	Gamma Knife	0	0	0
Positron Emission Tomography (PET)	0	0	0	0	0	Cyber knife	0	0	0
Computerized Axial Tomography (CAT)	1	0	19	481	0				
Magnetic Resonance Imaging	0	0	0	0	0				