Hospital Profile - C	Y 2012	Salem To	wnship Hos	spital			Salen	n		Page 1	
Ownership, Ma	nagement and	gement and General Information				Patients by	Patients by Ethnicity				
ADMINISTRATOR NAM	ME: Stephar	nie Hilton-Sieber	t		W	hite	98	3.6% H	ispanic or Lating	o: 0.8%	
ADMINSTRATOR PHC	· ,	18-3194 Ext 825	7			Black			ot Hispanic or L		
OWNERSHIP:	Salem T	Fownship			An	American Indian		0.0% U	nknown:	0.0%	
OPERATOR:	Salem T	Fownship Hospit	al			Asian		0.1% —			
MANAGEMENT:	Townsh					Hawaiian/ Pacific		0.0%	IDPH Number		
CERTIFICATION:		Access Hospital			Ur	nknown	(0.0%	HPA	F-04	
FACILITY DESIGNATI		l Hospital		Y: Salem		COUNTY	. Morion	County	HSA	5	
ADDRESS	1201 Ki	1201 Ricker Drive CITY: Salem COUNTY: Marion County Facility Utilization Data by Category of Service									
										Staffed Bed	
Clinical Service	CON Bed 12/31/201	s Setup and	Peak Census	Admissions	Inpatient Days	Observation Days	Length of Stay	Daily Census	Occupancy Rate %	Occupancy Rate %	
Medical/Surgical	22	22	19	759	2,817	145	3.9	8.1	36.9	36.9	
0-14 Years				3	5						
15-44 Years				92	229						
45-64 Years				156	457						
65-74 Years				149	558						
75 Years +				359	1,568						
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0	
Intensive Care	3	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	-	-	-	0	0	-					
Clean Gynecology				0	0						
Neonatal	0	0	0	0	0		0.0	0.0	0.0	0.0	
Long Term Care	0	0	0	0	0		0.0 0.0		0.0	0.0	
Swing Beds				21	239		11.4	0.7			
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	0	0	0		0.0			
Long-Term Acute Care Dedcated Observation	e 0 0	0	0	0 0			0.0		0.0	0.0	
Facility Utilization	25			780	3,056	0 145	4.1	8.8	35.1		
Facility Otilization	25		(Includes ICI)		,		4.1	0.0	55.1		
			(Includes ICU I		-	? erved by Payo					
	Medicare	Medicaid	Other Public	Private Ins		Private Pay		Ch	arity Care	Totals	
	72.6%	8.3%	0.5%		14.5%	3.6%		Che	0.5%	TOLAIS	
Inpatients	566	6 5	0.5 %	1	14.3%	3.0 % 28			0.5 %	780	
										700	
Outpatients	35.4% 14663	20.4% 8440	1.1% 472		29.6% 12277	12.8% 5293			0.7% 290	41,435	
<u>Financial Year Reporte</u>	<u>d:</u> 4/1/2011	<i>to</i> 3/31/201	2 Inpatie	nt and Outpa	atient Net	Revenue by F	ayor Sour	rce		Total Charity Care Expense	
	Medicare	Medicaid	Other Public	Private In:	surance	Private Pay		Totals	Care	413,644	
Inpatient Revenue (\$)	80.8%	2.3%	0.2%		16.4%	0.3%	1	00.0%	Expense	Ta da li Oli a si da	
itevenue (ψ)	3,197,489	89,340	8,353	6	647,104	13,003	3,9	55,289	96,086	Total Charity Care as % of	
Outpatient	45.7%	5.4%	1.5%		46.9%	0.5%	1	00.0%		Net Revenue	
Revenue (\$)	8,538,211	1,008,857	271,516	8,7	63,286	97,392	18,67	79,262	317,558	1.8%	
Bi	irthing Data			Now	orn Nure	ery Utilization			Organ Transpl	antation	
ם Number of Total Birth	irthing Data		0 Lev	el 1 Patient l		ery ounzation	0	IZ:-	Organ Transpl ney:	<u>antation</u> 0	
Number of Live Births				el 2 Patient I			0	Hea	•	0	
Birthing Rooms:				el 2+ Patient	•		0	Lur		0	
Labor Rooms:				al Nursery Pa	•		Ő		art/Lung:	0	
Delivery Rooms:			0						ncreas:	0	
Labor-Delivery-Recov	ery Rooms:		0	<u>L</u>	aboratory	Studies		Live		0	
Labor-Delivery-Recov		Rooms:	0 Inpa	atient Studies	5		15,466	Tot	al:	0	
C-Section Rooms:				patient Studie			79,210	100		Ŭ	
CSections Performed:			0 Stud	dies Performe	ed Under (Contract	11,176				

Magnetic Resonance Imaging

Salem Township Hospital

Salem

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Hospital Profile -	CY 2012	Salem 7	ownsh	nip Hosp	bital			Salem			Page
			<u>Su</u>	rgery and	Operatii	ng Room Ut	<u>tilization</u>				
Surgical Specialty	<u>Operat</u>	ing Rooms		Surgical		<u>Cases</u>	Surgical Hours			Hours	per Case
	Inpatient Outpatie	ent Combine	d Total	Inp	atient (Outpatient	Inpatient C	Outpatient Total Hours		Inpatient	t Outpatien
Cardiovascular	0 (0 C	()	0	0	0	0	0	0.0	0.0
Dermatology	0 (0 C	()	0	0	0	0	0	0.0	0.0
General	0 0) 2	2	2	86	350	176	451	627	2.0	1.3
Gastroenterology	0 0	0 C	()	26	432	15	275	290	0.6	0.6
Neurology	0 0	0 C	()	0	0	0	0	0	0.0	0.0
OB/Gynecology	0 0	0 0	()	0	5	0	4	4	0.0	0.8
Oral/Maxillofacial	0 (0 C	()	0	0	0	0	0	0.0	0.0
Ophthalmology	0 (0 C	()	0	300	0	93	93	0.0	0.3
Orthopedic	-	0 0	(9	42	15	37	52	1.7	0.9
Otolaryngology	•	0 0	(0	0	0	0	0	0.0	0.0
Plastic Surgery	-	5 0 5 0	(0	0	0	0	0	0.0	0.0
	-	5 0 5 0	(0	0	0	0	0	0.0	0.0
Podiatry	-				-	-	-	-			
Thoracic		0 0	(0	0	0	0	0	0.0	0.0
Urology	0 0	0 0	()	0	0	0	0	0	0.0	0.0
Totals	0	0 2	2	2	121	1129	206	860	1066	1.7	0.8
SURGICAL RECOV	ERY STATIONS	St	age 1 Re	covery Sta	ations	2	Stage	2 Recovery St	ations	4	
		De	dicated a	and Non-D	Dedicated	Procedure	e Room Utilzat	on			
		Procedure F				cal Cases		urgical Hours		Hours	per Case
Procedure Type	Inpatient (Outpatient C	ombined	Total	Inpatient	Outpatier	nt Inpatient	Outpatient To	tal Hours	Inpatient	Outpatient
Gastrointestinal	0	0	0	0	0	0	0	0	0	0.0	0.0
aser Eye Procedures	s 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
			м	ultinurnor	so Non-D	edicated Ro	ooms				
	0	0	0	0	<u>0 0</u>	<u>euicaleu Ki</u> 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
	-	-	Ū	Ŭ	•		-	-	-		0.0
	nergency/Trauma	Care				- .		ac Catheteriza		ization	0
Certified Trauma Center Level of Trauma Service		Level 1			No Level 2		Total Cardiac Cath Procedures: Diagnostic Catheterizations (0-14) Diagnostic Catheterizations (15+)				
		(Not Answ	ered)	Not Answe			-	terizations (15-			0
Operating Rooms	uma Care			0		0					
Number of Trauma Visits:					0	In	0				
Patients Admitted	a from Trauma				0	E	P Catheterizati	ons (15+)			0
Emergency Servi			B	asic		Cardiac Surgery Data					
Number of Emerg				0	Tota	Total Cardiac Surgery Cases: Pediatric (0 - 14 Years):					
Persons Treated	vices:		7,6	679	P	0					
Patients Admitted			581			Adult (15 Years and Older):					
Total ED Visits (E	a):		7,6	679	С		Bypass Grafts (
							performed	of total Cardiac	Cases :		0
Ç	Dutpatient Service	Data						Cardiac Cathe	terizatio	n Labs	
- Total Outpatient	√isits			41,3	314	Tota		edicated+Nonde			0
	its at the Hospital/	Campus:		41,3				ed for Angiogra			0
	Outpatient Visits Offsite/off camp			,	0			agnostic Cathet			0
Supation 10					-			erventional Cat			0
								Catheterization			0
Diagnostic/Inter	ventional			Fr	aminatio	ons	Radiation	Equipment			Therapies
Equipment		Owned C	ontract			Contract			Owned	Contract	Treatmen
General Radiography	v/Fluoroscopv	4	0	733	9,951	0	Lithotripsy			0 0	(
Nuclear Medicine	,	4 0	1	0	0,001	430	Linear Acce	lerator		0 0	
		-	-								
Mammography		1	0	0	1,787	0	-	ided Rad Thera		0 0	
Ultrasound		2	0	92	1,461	0		Adulated Rad		0 0	
Angiography		0	0				-	rachytherapy		0 0	
Diagnostic Angiog				0	0	0	Proton Bear			0 0	
Interventional Ang	• • •			0	0	0	Gamma Kni	e		0 0	
Positron Emission To		0	0	0	0	0	Cyber knife			0 0	(
Computerized Axial	U , J ()	1	0	194	2,602	0					
Magnotic Posonance	n Impaina	0	1	26	564	0					

Source: 2012 Annual Hospital Questionnaire, Illinois Department of Public Health, Health Systems Development.

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