Hospital Profile - C	Y 2012	Washing	ton County	Hospital			Nash	ville		Page 1
Ownership, Ma	nagement and	General Inform	nation			Patients by	Patients by Ethnicity			
ADMINISTRATOR NAM	ME: Nancy M	. Newby	WI	White 99.6%			% Hispanic or Latino: 0.4%			
ADMINSTRATOR PHO	NE 618-327-	2201			Bla	ack	0.0% Not Hisp		lot Hispanic or L	_atino: 99.6%
OWNERSHIP:	Washing	ton County Hos	spital District		An	nerican Indian	(0.0% U	Inknown:	0.0%
OPERATOR:	Washing	ton County Hos	spital District		As	ian	(0.0% -		
MANAGEMENT:	Hospital	District			Ha	waiian/ Pacific	(0.0%	IDPH Numbe	r: 2899
CERTIFICATION:		ccess Hospital			Un	known	(0.4%	HPA	F-04
FACILITY DESIGNATION									HSA	5
ADDRESS	705 Sout	h Grand Avenu	e CIT	Y: Nashville)	COUNTY:	Washin	igton Cour	nty	
			Facility Utiliza	tion Data by	Category	of Service				
Olivia al Camaia a	Authorized CON Beds				Inpatient	Observation	Average Length	Average Daily	CON Occupancy	Staffed Bed Occupancy
Clinical Service	12/31/2012		Census	Admissions	Days	Days	of Stay	Census	Rate %	Rate %
Medical/Surgical	22	22	10	155	491	56	3.5	1.5	6.8	6.8
0-14 Years				0	0					
15-44 Years				7	16					
45-64 Years				22	52					
65-74 Years				26	84					
75 Years +				100	339					
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				0	0					
Clean Gynecology				0	0					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	28	28	28	15	9,852	0	656.8	27.0	96.4	96.4
Swing Beds				106	1,563		14.7	4.3		
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	9 0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedcated Observation	0					0				
Facility Utilization	50			276	11,906	56	43.3	32.8	65.5	
			(Includes ICU I	Direct Admiss	sions Only)				
			<u>Inpatien</u>	ts and Outp	atients Se	erved by Payor	Source			
	Medicare	Medicaid	Other Public	Private Ins	surance	Private Pay		Ch	arity Care	Totals
	80.8%	0.4%	1.8%		8.7%	8.3%			0.0%	
Inpatients	223	1	5		24	23			0	276
	39.0%	13.0%	2.0%		36.0%	10.0%			0.1%	
Outpatients	12267	4088	629		11322	3145			38	31,489
Financial Year Reporte	<u>d:</u> 5/1/2011 i	to 4/30/201	2 Inpatie	nt and Outpa	atient Net	Revenue by P	ayor Soul	rce	Charity	Total Charity
	Medicare	Medicaid	Other Public	Private Ins	surance	Private Pay		Totals	Care	Care Expense
Inpatient	56.5%	0.3%	0.1%		2.9%	40.2%	1	00.0%	Expense	52,996
Revenue (\$)									0	Total Charity
-	1,620,797	9,945	4,054		81,804	1,151,958	2,8	68,558		Care as % of
Outpatient	39.8%	10.1%	0.5%		44.5%	5.1%	1	100.0%		Net Revenue
Revenue (\$)	3,670,354	928,324	43,880	4,1	02,434	470,277	9,2	15,269	52,996	0.4%
Bi	rthing Data			Newb	orn Nurs	ery Utilization			Organ Transp	lantation
Number of Total Births	S:		0 Leve	el 1 Patient [Days		0	Kic	lney:	0
Number of Live Births:	:			el 2 Patient [•		0		art:	0
Birthing Rooms:				el 2+ Patient	•		0	Lui		0
Labor Rooms:				al Nursery Pa	-		0		art/Lung:	0
Delivery Rooms:			0				J		ncreas:	0
Labor-Delivery-Recove	ery Rooms		0	1:	aboratory	Studies		га Liv		0
Labor-Delivery-Recove	-	Soome:		ىـــ tient Studies		<u> </u>	3,428			•
C-Section Rooms:	ory i ostpartuili i	COUITIO.	•	patient Studies			41,198	To	tal:	0
CSections Performed:				dies Performe		Contract	3,746			
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				<u>Surge</u>	ry and Opera	ting Room U	tilization				
Surgical Specialty		Operating	Rooms		<u>Surgica</u>	al Cases	9	Surgical Hou	Hours per Case		
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	2	0	4	0	4	2.0	0.0
Dermatology	0	0	0	0	1	22	1	18	19	1.0	0.8
General	0	0	1	1	0	42	0	80	80	0.0	1.9
Gastroenterology	0	0	0	0	2	376	3	158	161	1.5	0.4
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0
OB/Gynecology	0	0	0	0	0	4	0	4	4	0.0	1.0
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	64	0	25	25	0.0	0.4
Orthopedic	0	0	0	0	1	0	2	0	2	2.0	0.0
Otolaryngology	0	0	0	0	0	0	0	0	0	0.0	0.0
Plastic Surgery	0	0	0	0	0	0	0	0	0	0.0	0.0
Podiatry	0	0	0	0	0	9	0	10	10	0.0	1.1
Thoracic	0	0	0	0	0	0	0	0	0	0.0	0.0
Jrology	0	0	0	0	0	0	0	0	0	0.0	0.0
Totals	0	0	1	1	6	517	10	295	305	1.7	0.6
SURGICAL RECOV	/ERY STAT	IONS	Stag	e 1 Recov	ery Stations	1	Sta	age 2 Recove	ery Stations	0	

Dedicated and Non-Dedicated Procedure Room Utilzation												
	Procedure Rooms				Surgical 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>					
General	0	1	0	1	0	79	0	62	62	0.0	0.8	
	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:		Basic	Cardiac Surgery Data					
Number of Emergency Room Station	IS	6	Total Cardiac Surgery Cases:	0				
Persons Treated by Emergency Serv	rices:	3,097	Pediatric (0 - 14 Years):	0				
Patients Admitted from Emergency:		120	Adult (15 Years and Older):	0				
Total ED Visits (Emergency+Trauma):	3,097	Coronary Artery Bypass Grafts (CABGs)					
			performed of total Cardiac Cases :	0				
Outpatient Service	<u>Data</u>		Cardiac Catheterization Labs					
Total Outpatient Visits		31,451	Total Cath Labs (Dedicated+Nondedicated labs):	0				
Outpatient Visits at the Hospital/ (Campus:	31,451	Cath Labs used for Angiography procedures	0				
Outpatient Visits Offsite/off campu	ıs	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		Owned Contr		Contract	ct <u>Treatments</u>	
General Radiography/Fluoroscopy	4	0	160	3,585	0	Lithotripsy	0	0	0	
Nuclear Medicine	0	1	0	0	234	Linear Accelerator	0	0	0	
Mammography	1	0	0	658	0	Image Guided Rad Therapy	0	0	0	
Ultrasound	1	0	18	803	0	Intensity Modulated Rad Thr	р ()	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	15	1,349	0					
Magnetic Resonance Imaging	0	1	0	0	200					