Hospital Profile - C	Y 2012	Touchet	te Regional I	Hospital			Centr	eville		Page 1
Ownership, Mai	_		<u>nation</u>			Patients by Et	-			
ADMINISTRATOR NAM		as Mikkelson				White			ispanic or Latino	
ADMINSTRATOR PHO		32-5400 HETTE REGION	AL HOSDITAL I	NC		ack nerican Indian			ot Hispanic or L nknown:	atino: 97.6% 2.1%
OWNERSHIP: OPERATOR:		HETTE REGION	*			ian).1% -	TIKHOWH.	2.170
MANAGEMENT:		Profit Corporation				awaiian/ Pacific	0.1%		IDPH Number	: 4523
CERTIFICATION:		nswered)	(. 101 0	tot Ondron it			2.9%		HPA	F-01
FACILITY DESIGNATION	N: Gener	al Hospital							HSA	11
ADDRESS	5900 E	Bond Avenue	CIT	Y: Centrev	ille	COUNTY	St. Clai	r County		
			Facility Utiliza	tion Data b	y Category	of Service				
Clinical Service	Authori CON Be	eds Setup and	l Peak		•	Observation	Average Length	Average Daily	CON Occupancy	Staffed Bed Occupancy
·	12/31/20		Census	Admissions	Days	Days	of Stay	Census	Rate %	Rate %
Medical/Surgical 0-14 Years	66	3 25	25	1,510	5,634	339	4.0	16.4	24.8	65.5
0-14 Years 15-44 Years				0 637	0 1,809					
45-64 Years				571	2,260					
65-74 Years				137	625					
75 Years +				165	940					
Pediatric	8	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	8	3 7	7	188	876	0	4.7	2.4	30.0	34.3
Direct Admission				163	766					
Transfers				25	110					
Obstetric/Gynecology	33	3 12	8	353	904	128	2.9	2.8	8.6	23.6
Maternity				329	825					
Clean Gynecology				24	79					
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				0	0		0.0	0.0		
Acute Mental Illness	12	12	12	582	2,808	0	4.8	7.7	64.1	64.1
Rehabilitation	(0	0	0	0	0	0.0	0.0	0.0	0.0
Long-Term Acute Care	C	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedcated Observation	C)				0				
Facility Utilization	12	7		2,608	10,222	-	4.1	29.3	23.1	
			(Includes ICU I							
			· 			erved by Payor	r Source			
	Medicare	Medicaid	Other Public Private Ins			•		Cha	arity Care	Totals
Inpatients	23.0%	47.4%	0.4%		10.4%	11.1%			7.7%	
	601	1235	11		272	289			200	2,608
Outpatients	14.1% 6502	50.8% 23501	1.9% 896		16.0% 7385	9.2% 4273			8.0% 3707	46,264
TI 1177 D				-41 04			C			Total Charity
<u>Financial Year Reported</u>	_		<u> </u>	<u>-</u>		Revenue by P			Charity	Total Charity Care Expense
Inpatient	Medicare	Medicaid	Other Public	Private In		Private Pay		Totals	Care Expense	4,335,144
Revenue (\$)	24.7%	51.1%	0.4%		15.3%	8.5%	1	00.0%	•	Total Charity
	5,407,611	11,178,811	89,141	3,	,334,331	1,849,541	21,8	59,435	1,131,473	Care as % of
Outpatient	6.6%	57.1%	1.1%		21.9%	13.3%	1	00.0%		Net Revenue
Revenue (\$)	2,840,650	24,491,007	467,820	9,4	402,787	5,689,526	42,89	91,790	3,203,671	6.7%
<u>Bir</u>	thing Data			<u>New</u>	born Nurs	ery Utilization			Organ Transp	antation
Number of Total Births	:			el 1 Patient	•		639	Kid	lney:	0
Number of Live Births:				el 2 Patient	•		47		art:	0
Birthing Rooms:				el 2+ Patient	-		0	Lur	-	0
Labor Rooms:				al Nursery Pa	atientdays		686		art/Lung:	0 0
Delivery Rooms: Labor-Delivery-Recove	ery Rooms:		4 2	ı	_aboratory	Studies		Pai Liv	ncreas: er:	0
Labor-Delivery-Recove	-	m Rooms:		ء :tient Studie			2,296			
C-Section Rooms:	,		•	patient Stud			24,477	Tot	lal.	0
CSections Performed:			94 Stud	dies Perform	ned Under (Contract	12,227			

Hospital Profile - 0	CY 2012	Τοι	chette	Reg	jional H	Hospital			Centre	ville		Page 2	
				Su	rgery an	d Operati	ng Room U	tilization					
Surgical Specialty	Operating Rooms			_				<u>s</u>	-	per Case			
	Inpatient Outp			Total		•	Outpatient	Inpatient	Outpatient		•	Outpatient	
Cardiovascular	0	0	0)	0	0	0	0	0	0.0	0.0	
Dermatology	0	0	0)	0	0	0	0	0	0.0	0.0	
General	0	0	4		4	77	143	156	133	289	2.0	0.9	
Gastroenterology	0	0	2		2	121	412	104	275	379	0.9	0.7	
Neurology	0	0	0)	0	0	0	0	0	0.0	0.0	
OB/Gynecology	0	0	1		1	170	93	260	78	338	1.5	8.0	
Oral/Maxillofacial	0	0	0)	0	119	0	172	172	0.0	1.4	
Ophthalmology	0	0	0)	0	64	0	55	55	0.0	0.9	
Orthopedic	0	0	0)	22	94	45	116	161	2.0	1.2	
Otolaryngology	0	0	0)	14	78	21	73	94	1.5	0.9	
Plastic Surgery	0	0	0)	0	0	0	0	0	0.0	0.0	
Podiatry	0	0	0)	1	24	1	22	23	1.0	0.9	
Thoracic	0	0	0)	0	0	0	0	0	0.0	0.0	
Urology	0	0	0	()	19	143	18	82	100	0.9	0.6	
Totals	0	0	7	7	7	424	1170	605	1006	1611	1.4	0.9	
SURGICAL RECOV	ERY STATION	S	Stage	e 1 Re	covery S	tations	5	Sta	ige 2 Recover	y Stations	0		
			Dedic	ated a	and Non-	-Dedicate	d Procedure	e Room Utilz	ation				
		Proced	lure Roc				ical Cases		Surgical Hou	<u>ırs</u>	<u>Hours</u>	per Case	
Procedure Type	Inpatier	nt Outpati	ent Com	bined	Total	Inpatient	Outpatie	nt Inpatient	Outpatient	Total Hou	s Inpatient	Outpatient	
Gastrointestinal	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	
Pain Management	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	
				м	ultipurp	ose Non-D	Dedicated R	ooms					
	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	
Fn	nergency/Trau	ma Care						Ca	rdiac Cathete	rization Ut	ilization		
Certified Trauma						No	Tota		th Procedures		<u></u>	0	
Level of Trauma S		Level 1 Level 2					0						
	(Not				Not Answered		Diagnostic Catheterizations (0-14) Diagnostic Catheterizations (15+)						
Operating Rooms Dedicated for Trauma				/				Interventional Catheterizations (0-14):					
Number of Trauma Visits:						0	Ir	nterventional	0				
Patients Admitted	from Trauma					0	E	P Catheteriza	0				
Emergency Service	e Tyne:					Basic			Cardiac Su	rnery Data			
Number of Emergency Room Stations				11				Total Cardiac Surgery Cases:					
Persons Treated by Emergency Servi					17	,306		Pediatric (0 - 1				0 0	
Patients Admitted from Emergency:						,510		•	rs and Older):			0	
Total ED Visits (E	-				,306		`	ry Bypass Gra	afts (CABGs	s)			
·	0 ,	,							d of total Card			0	
0	utpatient Serv	ice Data							Cardiac Ca	theterizatio	on Labs		
Total Outpatient V	•				10	,348	Tota	al Cath I ahe i	·			0	
Outpatient Visits at the Hospital/ Campus:				36,139			1016	Total Cath Labs (Dedicated+Nondedicated labs): Cath Labs used for Angiography procedures					
	Outpatient Visits Offsite/off campus					,209			Diagnostic Ca	•		0 0	
o aspationi vio						,_00			Interventional			0	
-								Dedicated	EP Catheteriz	ation Labs		0	
Diagnostic/Interv	<u>entional</u>				<u> </u>	xaminatio	<u>ons</u>	Radiatio	n Equipment	<u>t</u>		Therapies/	
<u>Equipme</u>	<u>nt</u>	Own	ed Con	ract	Inpatier	t Outpt	Contract			Owne	d Contract	Treatments	
General Radiography	/Fluoroscopy		7	0	2,156	10,577		Lithotripsy	/		0 1	13	
Nuclear Medicine	.,		1	0	104	166		Linear Ac			0 0	0	
Mammography			1	0	0	2,032	2 0	Image (Guided Rad T	herapy	0 0	0	
Ultrasound			2	0	388	3,294		-	y Modulated F		0 0	0	
Angiography			0	0		,	-		Brachythera	•	0 0	0	
Diagnostic Angiogi	raphy			-	0	C	0	_	am Therapy	. ,	0 0	0	
Interventional Angiography					0	Ö	_	Gamma K			0 0	0	
Positron Emission To	•	T)	0	0	0	0	_	Cyber kni			0 0	0	
Computerized Axial 7			1	0	479	2,970		•					
Magnetic Resonance			0	1	0	. 0	513						