Hospital Profile - CY	2012	Streamwo	ood Behavio	ral Healt	h Systei	ms	Strea	mwood		Page 1
Ownership, Manage ADMINISTRATOR NAME: ADMINISTRATOR PHONE OWNERSHIP: OPERATOR:	ation s tal, Inc.		BI Ar	Patients by hite ack merican Indian sian	65 27	7.2% N	Patients by E ispanic or Latin ot Hispanic or I nknown:	13.9%		
MANAGEMENT: CERTIFICATION: FACILITY DESIGNATION:	For Prof (Not Ans	it Corporation	·			awaiian/ Pacific nknown		0.0% 6.9%	IDPH Numbe HPA HSA	r: 4762 A-07 7
ADDRESS	- ,	Irving Park Road	d CIT	Y: Streamv	vood	COUNTY	: Suburb	an Cook C		<u> </u>
			Facility Utilizat	ion Data by	y Category	of Service				
Clinical Service	Authorize CON Beds 12/31/201	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	0	0	0	0	0	0	0.0	0.0	0.0	0.0
0-14 Years				0	0					
15-44 Years 45-64 Years				0 0	0					
65-74 Years				0	0					
75 Years +				0	0					
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	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Swing Beds				0	0		0.0	0.0		
Acute Mental Illness	162	162	142	2,657	38,817	0	14.6	106.3	65.6	65.6
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	0.0
Dedcated Observation	0					0				
Facility Utilization	162			2,657	38,817	0	14.6	106.3	65.6	
			(Includes ICU E							
				-		erved by Payor	r Source			
M	ledicare	Medicaid	Other Public	Private In		Private Pay		Cha	arity Care	Totals
Inpatients	0.0%	80.0% 2125	0.0% 0		18.0% 478	2.0% 54			0.0% 0	0.057
	0									2,657
Outpatients	0.0% 0	91.0% 22936	0.0% 0		8.0% 2016	1.0% 252			0.0% 0	25,204
Financial Year Reported:	1/1/2012			t and Outn		Revenue by P	avor Sou	'CB		Total Charity
-	Medicare	Medicaid	Other Public	Private In		Private Pay	-	oo Totals	Charity Care	Care Expense
Inpatient	0.0%	80.8%	0.0%	Filvate III	17.4%	1.8%		00.0%	Expense	0
Revenue (\$)		25,555,682	0.0%	5	502,350	571,994		30,026	0	Total Charity
Outpotions				J,	-	<u> </u>		-		Care as % of Net Revenue
Outpatient Revenue (\$)	0.0% 0	91.0% 1,765,521	0.0% 0	,	8.0% 155,211	1.0% 19,401		00.0% 40,133	0	0.0%
		1,700,021	•			· · · · · · · · · · · · · · · · · · ·	•	•	<u> </u>	
	ing Data					ery Utilization			Organ Transp	
Number of Total Births: Number of Live Births:				el 1 Patient el 2 Patient	•		0	Kid Hea	ney:	0
Birthing Rooms:				el 2 + Patient	•		0	Lur		0
Labor Rooms:				l Nursery Pa	-		0		art/Lung:	0
Delivery Rooms:	_		0	_		O. II			ncreas:	0
Labor-Delivery-Recovery		Dooms:	0	_	<u>aboratory</u>	<u>Studies</u>	^	Live		0
Labor-Delivery-Recovery- C-Section Rooms:	-rostpartum	KUOMS:	•	tient Studies atient Studi			0	Tot	al:	0
CSections Performed:				lies Perform		Contract	0			

Streamwood

Surgery and Operating Room Utilization											
Surgical Specialty	Operating Rooms		Rooms		<u>Surgica</u>	al Cases	9	Surgical Hour	Hours p	er Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	0	0	0	0	0	0.0	0.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	0	0	0	0	0	0	0	0.0	0.0
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0
OB/Gynecology	0	0	0	0	0	0	0	0	0	0.0	0.0
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	0	0	0	0	0.0	0.0
Orthopedic	0	0	0	0	0	0	0	0	0	0.0	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	0	0	0	0	0.0	0.0
Thoracic	0	0	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	0	0	0	0	0	0	0	0.0	0.0
SURGICAL RECOVERY STATIONS Stage			age 1 Recovery Stations 0				Stage 2 Recovery Stations				

<u>Dedicated and Non-Dedicated Procedure Room Utilzation</u>											
	Procedure Rooms				<u>Surgic</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
Multipurpose Non-Dedicated Rooms											
	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
Emergency/Trauma Care							Card	liac Cathete	rization Utiliz	ation	

Emergency/Traun	<u>na 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 T	rauma 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:		Stand-By	Cardiac Surgery Data	
Number of Emergency Room Stat	ions	0	Total Cardiac Surgery Cases:	0
Persons Treated by Emergency S	ervices:	0	Pediatric (0 - 14 Years):	0
Patients Admitted from Emergence	y:	0	Adult (15 Years and Older):	0
Total ED Visits (Emergency+Trau	ma):	0	Coronary Artery Bypass Grafts (CABGs)	
			performed of total Cardiac Cases :	0
Outpatient Servi	ce Data		Cardiac Catheterization Labs	
Total Outpatient Visits		25,204	Total Cath Labs (Dedicated+Nondedicated labs):	0
Outpatient Visits at the Hospita	l/ Campus:	25,204	Cath Labs used for Angiography procedures	0
Outpatient Visits Offsite/off can	npus	0	Dedicated Diagnostic Catheterization Lab	0
			Dedicated Interventional Catheterization Labs	0
			Dedicated EP Catheterization Labs	0
•				

<u>Diagnostic/Interventional</u>	Examinations Radiation Equipment							Therapies/	
<u>Equipment</u>	Owned Contract		Inpatient	Outpt Contract		Owne		Contract	<u>Treatments</u>
General Radiography/Fluoroscopy	0	0	0	0	0	Lithotripsy	0	0	0
Nuclear Medicine	0	0	0	0	0	Linear Accelerator	0	0	0
Mammography	0	0	0	0	0	Image Guided Rad Therapy	0	0	0
Ultrasound	0	0	0	0	0	Intensity Modulated Rad Thrp	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)	0	0	0	0	0				
Magnetic Resonance Imaging	0	0	0	0	0				