Hospital Profile - 0	CY 2012	Presence	United Sam	naritans N	/ledical (	Center	Danv	ille		Page 1
ADMINISTRATOR NA ADMINSTRATOR PHO	ME: Michael  ONE 217-443				Bla	Patients by F White Black American Indian Asian Hawaiian/ Pacific Unknown		6.6% N	Patients by Efficients by Effi	o: 1.6% atino: 96.7%
OWNERSHIP: OPERATOR: MANAGEMENT: CERTIFICATION:	Presenc Church- (Not An	swered)			As Ha			0.1% U 0.2% <del>-</del> 0.0% 1.4%	Inknown:  IDPH Number  HPA	D-03
ADDRESS	FACILITY DESIGNATION: General I ADDRESS 812 North		CITY: Danville			COUNTY:		on County	HSA	4
			Facility Utiliza	tion Data by	/ Category	of Service				
Clinical Service	Authorize CON Bed 12/31/201	s 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 0-14 Years 15-44 Years 45-64 Years 65-74 Years 75 Years +	134	82	78	4,663 0 623 1,306 873 1,861	17,742 0 1,634 4,738 3,432 7,938	3,186	4.5	57.3	42.8	69.9
Pediatric	9	8	5	124	232	50	2.3	0.8	8.6	9.7
Intensive Care Direct Admission Transfers	14	12	12	1,021 737 284	1,971 1,423 548	31	2.0	5.5	39.2	45.7
Obstetric/Gynecology Maternity Clean Gynecology	17	15	11	859 754 105	1,430 1,222 208	53	1.7	4.1	23.9	27.1
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
Swing Beds	0	0	0	0	0	0	0.0	0.0		0.0
Acute Mental Illness	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
Long-Term Acute Car	<b>e</b> 0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedcated Observation	0					0				
Facility Utilization	174			6,383	21,375	•	3.9	67.7	38.9	
			(Includes ICU I				· Cauras			
	Medicare	Medicaid	Other Public	Private In		erved by Payor Private Pay	Source	Ch	arity Care	Totals
	56.2%	20.5%	2.1%	r iivate iii	16.4% Frivate Fay			Cii	2.3%	iotais
Inpatients	3586	1311	137		1050	155			144	6,383
Outpatients	27.1%	32.6%	0.9%		27.6% 10.1%				1.7%	
	53426	64255	1795		54308	19996			3304	197,084
Financial Year Reporte			·	<u>-</u>		Revenue by P			Charity	Total Charity Care Expense
Inpatient Revenue ( \$)	Medicare Medicaid 53.3% 16.4%		Other Public 1.8%	Private In	<b>23.0%</b> 080,681	<b>Private Pay</b> 5.5% 2,412,778	<i>Totals</i> <b>100.0%</b> 43,922,421		Care Expense 752,292	3,138,851  Total Charity
Outpatient Revenue ( \$)	23,408,156 <b>19.2%</b> 12,720,479	7,212,858 <b>12.7%</b> 8,389,689	<b>0.7%</b> 447,633	0.7%		12.8%		1 <b>00.0%</b> 70,773	2,386,559	Care as % of Net Revenue 2.8%
		0,309,009	447,033	•	229,608		00,2	10,113		
No made an of Total Digital		000 1			ery Utilization	000	IZ:-	Organ Transpl		
Number of Total Birth Number of Live Births			Level 1 Patient E Level 2 Patient E		•				dney: art:	0 0
Birthing Rooms:			0 Leve	el 2+ Patient	Day		0	Lui	ng:	0
Labor Rooms: Delivery Rooms:			0 Tota 0	al Nursery Pa	atientdays		1,042		art/Lung: ncreas:	0
Labor-Delivery-Recov	ery Rooms:		5	<u>L</u>	.aboratory	<u>Studies</u>		Liv		0
Labor-Delivery-Recov		Rooms:		tient Studies			482,126	To	tal:	0
C-Section Rooms: CSections Performed	l:			oatient Studi dies Perform		Contract	531,594 61,449			

Hospital Profile - (	CY 2012		Presenc				s Medical C		Danvill	e		Page 2		
0		0	D	<u>Su</u>	<u>ırgery an</u>	•		Room Utilization						
Surgical Specialty	Innotiont	Operation:	<b>g Rooms</b> t Combined	l Total	l le		I Cases Outpatient	S Inpatient	urgical Hours Outpatient T	Total Haura		oer Case Outpatient		
Cardiovascular	inpatient 0	Outpatien 0	omidinec 0		0	npatient 0	Outpatient 0	inpatient 0	Outpatient 1	0 Otal Hours	inpatient 0.0	0.0		
Dermatology	0	0	0		0	0	0	0	0	0	0.0	0.0		
General	0	0	4		4	615	703	835	790	1625	1.4	1.1		
Gastroenterology	0	0	2		2	105	56	107	43	150	1.0	0.8		
Neurology	0	0	0		0	0	0	0	0	0	0.0	0.0		
OB/Gynecology	0	0	0		0	189	173	454	197	651	2.4	1.1		
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	159	145	464	216	680	2.9	1.5		
•	0	0	0		0	3	202	5	236	241	1.7	1.2		
Otolaryngology	-	0	0		0	ა 11	13	28	30	58	2.5	2.3		
Plastic Surgery	0	0	-		0		13	_						
Podiatry	0	_	0			0		0	18	18	0.0	1.4		
Thoracic	0	0	0		0	0	0	0	0	0	0.0	0.0		
Urology	0	0	0	(	0	22	1	23	1	24	1.0	1.0		
Totals	0	0	6		6	1104	1306	1916	1531	3447	1.7	1.2		
SURGICAL RECOV	ERY STAT	IONS	Sta	ge 1 Re	covery S	tations	8	Sta	ge 2 Recovery	/ Stations	18			
					and Non		ed Procedure							
			ocedure Re				gical Cases		Surgical Hour	_	·	per Case		
rocedure Type	Inp	oatient Ou	itpatient Co	mbined	Total	Inpatier	nt Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient		
astrointestinal		0	0	2	2	268		155		477	0.6	0.5		
aser Eye Procedures		0	0	0	0		0	0		0	0.0	0.0		
ain Management		0	0	0	0		0	0		0	0.0	0.0		
ystoscopy		0	0	0	0	(	0	0	0	0	0.0	0.0		
				<u>M</u>	ultipurpo	ose Non-	Dedicated Ro	<u>oms</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	0.0	0.0		
En	nergency/	Trauma C	are					Cai	diac Catheter	rization Util	ization			
Certified Trauma	Center					No	Total	Cardiac Cat	th Procedures:			56		
Level of Trauma S			Level	1	Lev	vel 2			heterizations (			0		
			(Not Answe	red)	Not Ans	wered		•	heterizations (	` '		56		
Operating Rooms	Dedicated	for Traum	na Care	,		0		-	Catheterization	• •		0		
Number of Trauma Visits:						0	Int	erventional (	Catheterization	า (15+)		0		
Patients Admitted	from Trau	ıma				0	EP	Catheteriza	ations (15+)	, ,		0		
Emergency Service	ce Type:			C	omprehe	ensive			Cardiac Sur	gery Data				
		n Stations		Ū	ompromo	29	Total	Cardiac Sur	gery Cases:	gery Data		0		
Number of Emergency Room Stations Persons Treated by Emergency Service				39,756				Pediatric (0 - 14 Years):						
Patients Admitted from Emergency:						1,613		Adult (15 Years and Older):						
Total ED Visits (Emergency+Trauma):						7,756		`	ry Bypass Gra	fts (CABGs)		·		
`	0 ,	,				•			d of total Card			0		
O	utpatient	Service D	ata						Cardiac Car	theterizatio	n Labs			
Total Outpatient \	•		<del></del>		107	7.084	Total	Cath Labe /	Dedicated+No			1		
Outpatient Visits at the Hospital/ Can			ampus.			7,084	iotai	,	used for Angio		,	0		
Outpatient Visits at the Hospital/ Co					137	0			_			1		
Outpation viol		Ü				Dedicated Diagnostic Catheterization Lab Dedicated Interventional Catheterization Labs								
									EP Catheteriza			0 0		
Diagnostic/Interv	entional				E	xaminat	ions	Radiatio	n Equipment	_		Therapies		
Equipme			Owned Co	ntract	Inpatier	nt Outp	ot Contract			Owned	Contract	Treatment		
General Radiography	//Fluorosco	ру	12	0	8,497	20,49	0	Lithotripsy	′		0 0	0		
Nuclear Medicine			2	0	370	95	3 0	Linear Acc	celerator		1 0	10,326		
Mammography			1	0	10	4,16	0 0	Image (	Guided Rad Th	nerapy	0 0	C		
Ultrasound			2	0	786	5,14	4 0	_	y Modulated R		0 0	C		
Angiography			1	0		-			Brachytherap	•	0 0	(		
Diagnostic Angiog	raphy				0		4 0	_	am Therapy		0 0	0		
Interventional Ang					0		0 0	Gamma K			0 0	C		
Positron Emission To	•	(PET)	0	1	0		0 220	Cyber knit	fe .		0 0	C		
								-						
Computerized Axial 7	<sup>r</sup> omograph	ıy (CAT)	2	0	2,914	8,30	0 8							

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