Hospital Profile - CY	<b>2012</b>	Linden O	aks Hospita	al			Nape	rville		Page 1	
Ownership, Man	agement and (	General Inform	nation			Patients by	Race		Patients by Et	hnicity	
ADMINISTRATOR NAMI	E: Mary Lou	Mastro			W	nite	83	8.0% Hi	Hispanic or Latino: 6.7%		
ADMINSTRATOR PHON	E 630-305-	5001			Bla	ack	5	5.2% No	atino: 89.2%		
OWNERSHIP:	Naperville	Psvchiatric Ve	enture -Linden (	Daks Hospit	American Indian			).2% Ur	4.1%		
OPERATOR:		-	enture -Linden (			ian		.6%			
MANAGEMENT:	•	For Profit (spe				waiian/ Pacific		0 <i>%</i> ).0%	IDPH Number	5058	
CERTIFICATION:	(Not Ansy	· ·				iknown		0.0%	HPA	A-05	
FACILITY DESIGNATION		ic Hospital			01	IKHOWH		HSA	7		
ADDRESS	,	Washington S	Street CI	Y: Naperville	<u>.</u>	COUNTY	: DuPage		HIGA	1	
ADDITEOU	001 0000	r washington e		· ·			. Dui uge	obunty			
	Authorized	Peak Beds	Facility Utiliza	ition Data by	Category	of Service	Average	Average	CON	Staffed Bed	
Clinical Service	CON Beds 12/31/2012	Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Length of Stay	Daily Census	Occupancy Rate %	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				0	0						
45-64 Years				0	0						
65-74 Years				0	0						
75 Years +				0	0						
	^	^	0	-		<u>^</u>	0.0	0.0	0.0	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	101	101	101	4,324	30,707	0	7.1	84.1	83.3	83.3	
Rehabilitation	0	0	0	-,324	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	101			4,324	30,707	0	7.1	84.1	83.3		
			(Includes ICU			2					
			Inpatier	nts and Outpa	atients Se	erved by Payo	<u>r Source</u>				
	Medicare	Medicaid	Other Public	Private Ins	urance	Private Pay		Cha	arity Care	Totals	
	12.2%	6.5%	0.3%	,	69.0%	5.6%			6.3%		
Inpatients	528	283	13		2984	242			274	4,324	
	0.3%	6.5%	0.1%	\$	38.6%	1.8%			2.8%	·	
Outpatients	15	344	3	•	4686	93			148	5,289	
Financial Year Reported:				nt and Outna	tient Net	Revenue by F	avor Sour	rce .		Total Charity	
<u>i muncui i cui Reporteu.</u>									Charity	Care Expense	
•	Medicare	Medicaid	Other Public	Private Ins	urance	Private Pay		Totals	Care	455,022	
Inpatient	18.9%	4.1%	0.2%		75.1%	1.7%	1	00.0%	Expense		
Revenue ( \$)	4,497,099	984,477	40,674	17,8	34,257	396,254	23,7	52,761	406,650	Total Charity Care as % of	
Outpatient	0.0%	2.0%	0.0%		97.5%	0.4%	1	00.0%		Net Revenue	
Revenue ( \$)	2,368	295,734	0	14,2	10,792	65,234		4,128	48,372	1.2%	
				-					-		
	hing Data					ursery Utilization			Organ Transplanta		
Number of Total Births:				el 1 Patient D			0		ney:	0	
Number of Live Births:			0 Lev	el 2 Patient D	Days		0	Hea	art:	0	
Birthing Rooms:			0 Lev	el 2+ Patient l	Day		0	Lun	g:	0	
Labor Rooms:			0 Tota	al Nursery Pat	tientdays		0	Hea	art/Lung:	0	
Delivery Rooms:			0	-	-				creas:	0	
Labor-Delivery-Recover	y Rooms:		0	La	aboratory	<b>Studies</b>		Live	er:	0	
Labor-Delivery-Recover		looms:	-	atient Studies			0			-	
C-Section Rooms:	,			patient Studie	s		0	Tota	dı.	0	
CSections Performed:				dies Performe		Contract	38,076				
							-,				

Hospital Profile - CY 2012

Linden Oaks Hospital

Naperville

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Hospital Profile - 0	CY 2012		Linden C	aks F	lospita	al				Napervi	lle		Page 2	
				Surgery and Operating					-					
Surgical Specialty	Law effect	Operating	-	<b>T</b>			Il Cases	. I		ical Hours			ber Case	
Cardiovacaular	•	•	t Combined 0	Total	l Ir O	npatient	Outpatient 0	i In	patient O 0	utpatient To 0		Inpatient 0.0	Outpatient 0.0	
Cardiovascular Dermatology	0	0 0	0		0	0 0	0		0	0	0	0.0	0.0	
0,	0 0	0				0	0			0	0			
General	-	0	0		0				0	-	0	0.0	0.0	
Gastroenterology Neurology	0	0	0 0		0 0	0 0	0		0 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	
, 0,	-	0	0		0	0	0		-	0	0		0.0	
Oral/Maxillofacial Ophthalmology	0 0	0	0		0	0	0		0 0	0	0	0.0 0.0	0.0	
1 07	0	0	0		0	0	0		0	0	0	0.0	0.0	
Orthopedic Otology and any	-	0	0		0	-	0		0	0	-			
Otolaryngology	0 0	0	0		0	0 0	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			
Thoracic	-	0	-		-	-	-		0	-	-	0.0	0.0	
Urology	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 RECOV	ERY STAT	IONS	Sta	ge 1 Re	ecovery S	Stations		0	Stage	2 Recovery	Stations	0		
		<b>D</b> -			and Non				om Utilzati		_			
Procedure Type	Inc		rocedure Ro atpatient Co		I Total	<u>Sur</u> Inpatie	gical Cases	-		urgical Hours	-		per Case Outpatient	
	inp		•			•	•		•	•		•	•	
Bastrointestinal		0	0	0	0		0	0	0	0	0	0.0	0.0	
aser Eye Procedures Pain Management		0 0	0 0	0 0	0 0		D D	0 0	0 0	0 0	0 0	0.0 0.0	0.0 0.0	
Systoscopy		0	0	0	0		0	0	0	0	0	0.0	0.0	
yotooopy		0	0	-	-			-	-	Ū	0	0.0	0.0	
		0	0	0	unipurp 0		-Dedicated	0	<u>15</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	
En	nergency/	Frauma C	aro						Cardi	ac Catheteri	zation I Iti	lization		
Certified Trauma						No	т	atal Ca	rdiac Cath I		2011011 011	<u>Inzation</u>	0	
Level of Trauma S	· -		Level	1	Le	vel 2	I C			terizations (C	)-14)		0	
Lovor of Fridama (	0011100		(Not Answe		Not Ans			0		terizations (1	,		0	
Operating Rooms	Dedicated		<b>`</b>	ou)		0		-		theterizations	,		0 0	
Number of Traum						0				theterization			0	
Patients Admitted	from Trau	ma				0			atheterizatio				0	
Emergency Servio	ce Type:				Sta	nd-By			<i>.</i>	Cardiac Surg	norv Data			
Number of Emerg		n Stations			Old	0	Т	otal Ca	rdiac Surge		<u>jery Data</u>		0	
Persons Treated I				-				Pediatric (0 - 14 Years):						
Patients Admitted from Emergency:						0			(15 Years a	,			0	
Total ED Visits (E						0			•	Bypass Graft	s (CABGs	)		
·	• •	,								f total Cardia			0	
<u>0</u>	Outpatient	Service D	ata						9	Cardiac Catl	heterizatio	on Labs		
Total Outpatient \					46	6,720	Та	otal Ca	_	dicated+Nor			0	
Outpatient Visits at the Hospital/ Car			ampus:			5,423				ed for Angiog		,	0	
Outpatient Visi						),297				ignostic Cath			0	
·								De	edicated Inte	erventional C	atheteriza	tion Labs	0	
								De	edicated EP	Catheterizat	tion Labs		0	
Diagnostic/Interventional			Examination									Therapies		
<u>Equipme</u>			Owned Col		-	nt Out					Owned	d Contract	Treatmen	
General Radiography	//Fluorosco	ру	0	0	0		0 0		ithotripsy			0 0		
Nuclear Medicine			0	0	0		0 0		inear Accel			0 0		
Mammography			0	0	0		0 0		-	ded Rad The		0 0		
Ultrasound			0	0	0		0 0		-	Iodulated Ra		0 0		
Angiography			0	0					-	rachytherapy	/	0 0		
Diagnostic Angiog					0		0 0		Proton Beam			0 0		
Interventional Ang		(55-)	-	-	0		0 0		Gamma Knif	е		0 0		
Positron Emission To			0	0	0		0 0		Cyber knife			0 0	(	
Computerized Axial 7		у (CAT)	0	0	0		0 0							
Magnetic Resonance	; imaging		0	0	0		0 0							

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