Hospital Profile - C	Y 2012	OSF Holy	Family Med	dical Cent	er		Monn	nouth		Page 1
		d General Inform			ter Monmouth Patients by Race Patients by					
ADMINISTRATOR NAM	_				White 99.2%				lispanic or Latin	-
ADMINSTRATOR PHO	•					ack			lot Hispanic or L	
OWNERSHIP:		ealthcare System	ı			nerican Indian			Jnknown:	0.0%
OPERATOR:		ealthcare System			As	ian	().4% -		
MANAGEMENT:	Church	-Related			Ha	waiian/ Pacific	(0.0%	IDPH Numbe	r: 5439
CERTIFICATION:		Access Hospital			Ur	known	(0.0%	HPA	C-03
FACILITY DESIGNATION	•	nswered)						_	HSA	2
ADDRESS	1000 W	est Harlem Ave		Y: Monmou		COUNTY:	Warren	County		
			Facility Utiliza	tion Data by	/ Category	of Service			0011	04.55
Clinical Service	Authoriz CON Bed 12/31/20	ds 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	23	23	8	395	1,215	267	3.8	4.1	17.7	17.7
0-14 Years				3	6					
15-44 Years				35	72					
45-64 Years				83	222					
65-74 Years 75 Years +				79 195	257 658					
						0	0.0	0.0	0.0	0.0
Pediatric	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				82	707		8.6	1.9		
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	. 0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedcated Observation	0	<u> </u>		U	0	0	0.0	0.0	0.0	0.0
Facility Utilization	23			477	1,922		4.6	6.0	26.1	
· · · · · · · · · · · · · · · · · · ·			(Includes ICU I		•		-			
			,			rved by Payor	Source			
	Medicare	Medicaid	Other Public	Private In		Private Pay		Ch	arity Care	Totals
	79.2%	5.2%	0.0%		9.2%	1.3%			5.0%	
Inpatients	378	25	0		44	6			24	477
-	36.9%	19.5%	0.0%		34.1%	4.3%			5.2%	
Outpatients	10791	5684	0.0 %		9948	1260			1522	29,205
Financial Year Reported			2 Innatier	nt and Outn	atient Net	Revenue by P	avor Sou	rce		Total Charity
<u>r manetat 1 ear Keporteo</u>			<u> </u>	<u>-</u>		-	<u>-</u>		Charity	Care Expense
Inpatient	Medicare	Medicaid	Other Public	Private In		Private Pay		Totals	Care Expense	1,544,964
Revenue (\$)	82.0%	2.2%	0.0%		15.5%	0.3%		00.0%	-	Total Charity
	2,947,024	78,811	0	;	556,595	11,028	3,5	93,458	242,674	Care as % of
Outpatient	23.1%	12.2%	0.0%		60.2%	4.5%	1	00.0%		Net Revenue
Revenue (\$)	4,151,951	2,180,462	0	10,8	306,791	806,136	17,94	45,339	1,302,289	7.2%
Ric	rthing Data			Nowl	horn Nure	ery Utilization			Organ Transp	lantation
Number of Total Births			0 Leve	el 1 Patient		<u>cry Otmzation</u>	0	Kir	dney:	0
Number of Live Births:				el 2 Patient	•		0		art:	0
Birthing Rooms:				el 2+ Patient	•		0		ng:	0
Labor Rooms:				al Nursery Pa	•		0		art/Lung:	0
Delivery Rooms:			0				·		ncreas:	0
Labor-Delivery-Recove	ery Rooms:		0	<u>L</u>	.aboratory	Studies			er:	0
Labor-Delivery-Recove	-	n Rooms:	0 Inpa	tient Studies	6		8,460	Τo	tal:	0
C-Section Rooms:				oatient Studi			82,747	10		Ü
CSections Performed:			0 Stud	dies Perform	ed Under (Contract	5,943			

SURGICAL RECOVERY STATIONS

Outpatient Visits Offsite/off campus

0

3

3

Stage 1 Recovery Stations

Totals

Hospital Profile -	CY 2012	2 (OSF Holy	Family	Medical C	enter		Monn	nouth		Page 2		
Surgery and Operating Room Utilization													
Surgical Specialty	Operating Rooms				Surgical Cases			Surgical Hours			Hours per 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	2	2	67	642	154	622	776	2.3	1.0		
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	1	1	0	0	0	0	0	0.0	0.0		

Dedicated and Non-Dedicated Procedure Room Utilization 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 1 0 0 0 0 0 0.0 0.0 **Multipurpose Non-Dedicated Rooms**

67

Emergen	cv/Trauma	Care			•		Cardiac	Catheteriz	ation Utilizat	ion	•
	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

642

1

154

622

Stage 2 Recovery Stations

Dedicated Diagnostic Catheterization Lab

Dedicated EP Catheterization Labs

Dedicated Interventional Catheterization Labs

776

2.3

1

1.0

0

0

0

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:		Basic	Cardiac Surgery Data	
Number of Emergency Room Sta	tions	0	Total Cardiac Surgery Cases:	0
Persons Treated by Emergency S	Services:	6,489	Pediatric (0 - 14 Years):	0
Patients Admitted from Emergence	cy:	272	Adult (15 Years and Older):	0
Total ED Visits (Emergency+Trau	ima):	6,489	Coronary Artery Bypass Grafts (CABGs)	
, , ,			performed of total Cardiac Cases:	0
Outpatient Serv	ice Data		Cardiac Catheterization Labs	
Total Outpatient Visits		29,205	Total Cath Labs (Dedicated+Nondedicated labs):	0
Outpatient Visits at the Hospita	al/ Campus:	29,205	Cath Labs used for Angiography procedures	0
Outpatient Visits at the Hospital/ Campus:				

Diagnostic/Interventional	Examinations Radiation Equipment							Therapies/		
<u>Equipment</u>	Owned Contract		Inpatient	Outpt Contract		Own		Contract	<u>Treatments</u>	
General Radiography/Fluoroscopy	4	0	285	6,936	0	Lithotripsy	0	0	0	
Nuclear Medicine	1	0	8	169	0	Linear Accelerator	0	0	0	
Mammography	1	0	0	2,305	0	Image Guided Rad Therapy	0	0	0	
Ultrasound	2	0	17	767	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)	1	0	79	1,815	0					
Magnetic Resonance Imaging	0	1	0	0	517					

0