Hospital Profile - CY	2012	Midwest	Medical Cer	nter			Galer	na		Page 1	
Ownership, Mana	gement and	<b>General Inform</b>	nation			Patients by	Race		Patients by E	Ethnicity	
ADMINISTRATOR NAME	: Tracy Ba	auer	W	-			0.0% Hispanic or Latino:				
ADMINSTRATOR PHONE	E 815-776	-7266			Bla	ack	(	0.0% N	lot Hispanic or	Latino: 0.0%	
OWNERSHIP:	Midwest	Medical Center			An	nerican Indian	(	0.0% L	Jnknown:	100.0%	
OPERATOR:	Midwest	Medical Center			As	ian	(	0.0% –			
MANAGEMENT:	Not for F	Profit Corporatio	n (Not Church-F	र	Ha	waiian/ Pacific	0.0%		IDPH Numbe	er: 5488	
CERTIFICATION:	Critical A	Access Hospital			Ur	Iknown	100.0%		HPA	B-02	
FACILITY DESIGNATION	I: General	Hospital							HSA	1	
ADDRESS	One Med	lical Center Dr.	CII	Y: Galena		COUNTY:	Jo Davi	ess Coun	ty		
		Facility Utilization Data by Category of Service									
Clinical Service	Authorize CON Beds	s Setup and	Peak			Observation	Average Length	Average Daily	CON Occupancy	Staffed Bed Occupancy	
	12/31/201		Census	Admissions	Days	Days	of Stay	Census	Rate %	Rate %	
Medical/Surgical	25	25	6	186	480	162	3.5	1.8	7.0	7.0	
0-14 Years				0	0						
15-44 Years				9	15						
45-64 Years 65-74 Years				28 38	72 96						
75 Years +				38 111	90 297						
-		-					~ ~ ~				
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	0	0	0	0	0.0	0.0	0.0	0.0	
Clean Gynecology				0	0						
	0	0	0	0	0	0	0.0	0.0	0.0	0.0	
Neonatal	-			-	-	-	0.0	0.0		0.0	
Long Term Care	0	57	54	56	17,949	0	320.5	49.2		86.3	
Swing Beds				98	1,329		13.6	3.6			
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					0					
Facility Utilization	25			340	19,758	162	58.6	54.6	218.3		
			(Includes ICU								
			Inpatier	nts and Outp	patients Se	erved by Payor	Source				
Ι	Medicare	Medicaid	Other Public Private Ins		surance	urance Private Pay		Ch	arity Care	Totals	
	84.7%	4.1%	0.0%		9.1%	1.8%			0.3%		
Inpatients	288	14	0		31	6			1	340	
	41.5%	12.9%	0.0%		40.7%	4.6%			0.3%		
Outpatients	5204	1618	0		5102	578			37	12,539	
Financial Year Reported:	10/1/2011	to 9/30/201	2 Innatie	nt and Outp	atient Net	Revenue by P	avor Sou	rce		Total Charity	
			-	-		-	-		Charity	Care Expense	
	Medicare	Medicaid	Other Public	Private In	surance	Private Pay		Totals	Care Expense	86,000	
Inpatient Revenue ( \$)	40.0%	20.0%	0.0%		30.0%	10.0%	1	00.0%	Expense	Total Charity	
2	,540,400	1,270,200	0	1,9	905,300	635,101	6,3	51,001	8,873	Total Charity Care as % of	
Outpatient	40.0%	20.0%	0.0%		30.0%	10.0%	1	00.0%		Net Revenue	
	295,984	2,147,992	0	3,2	221,988	1,073,996		39,960	77,127	0.5%	
									-		
Birthing Data						ery Utilization			Organ Trans	<u>plantation</u>	
Number of Total Births:				el 1 Patient			0		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	atientdays		0		art/Lung:	0	
Delivery Rooms:	_		0	-	- <b>b</b> - <b>c</b> - <b>c</b>	0			ncreas:	0	
Labor-Delivery-Recovery	Rooms:		0		.aboratory	Studies		Liv	er:	0	
Labor-Delivery-Recovery	-Postpartum	Rooms:	•	atient Studies			1,176	To	tal:	0	
Labor-Delivery-Recovery C-Section Rooms: CSections Performed:	Postpartum	Rooms:	0 Out	atient Studies patient Studi dies Perform	es		1,176 7,731 0	То	tal:	0	

Hospital Profile - C	Y 2012	Midwest	Medica	I Cen	ter			Galena			Page 2
			Surg	-	-	ig Room Uti					
Surgical Specialty		ting Rooms	Surgical Ca			Cases	<u>Sı</u>	urgical Hours		Hours	per Case
	Inpatient Outpati			In	•	Outpatient	•	Outpatient T		•	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 2	2		0	39	0	895	895	0.0	22.9
Gastroenterology	-	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
OB/Gynecology	-	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
Ophthalmology	-	0 0	0		0	0	0	0	0	0.0	0.0
Orthopedic	-	0 2	2		0	9	0	215	215	0.0	23.9
Otolaryngology	-	0 0	0		0	0	0	0	0	0.0	0.0
Plastic Surgery	-	0 2	2		0	16	0	358	358	0.0	22.4
Podiatry	-	0 2	2		0	14	0	322	322	0.0	23.0
Thoracic	-	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 8	8		0	78	0	1790	1790	0.0	22.9
SURGICAL RECOVE	RY STATIONS	Sta	ge 1 Reco	very St	ations	0	Sta	ge 2 Recovery	Stations	0	
		Ded	icated and	d Non-l	Dedicated	Procedure	Room Utilza	ation			
		Procedure Ro				al Cases		Surgical Hour	_		per Case
Procedure Type	Inpatient	Outpatient Co	mbined T	otal	Inpatient	Outpatient	t Inpatient	Outpatient	Total Hour	s Inpatient	Outpatient
Gastrointestinal	0	2	0	2	0	220	0	3324	3324	0.0	15.1
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
						edicated Ro					
	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
	ergency/Trauma	Care						diac Catheter	ization Uti	lization	-
Certified Trauma Center			No Level 1 Level 2				0				
Level of Trauma S	ervice						0	neterizations (	,		0
Operating Rooms	(Not Answe			ed) Not Answered 0 0			Diagnostic Catheterizations (15+) Interventional Catheterizations (0-14):				
Operating Rooms Dedicated for Trauma Care Number of Trauma Visits:							Interventional Catheterizations (0-14).				
Patients Admitted			0				EP Catheterizations (15+)				
				-			Gametenza	Cardiac Sur			Ū
Emergency Service Number of Emerge		200			Basic 0	Total	Cardiac Sur	0			
-			3,716				Total Cardiac Surgery Cases: Pediatric (0 - 14 Years):				0
Persons Treated by Emergency Services: Patients Admitted from Emergency:				100			dult (15 Years		0		
Total ED Visits (En				,716			y Bypass Graf	ts (CABGs	)	Ũ	
		u).		•,	,			of total Cardi			0
Ou	utpatient Service	e Data						Cardiac Cat	heterizatio	on Labs	č
Total Outpatient Vi	•			24	,580	Total	Cath Labs (I				0
Outpatient Visits at the Hospital/ Campus:				24,580			otal Cath Labs (Dedicated+Nondedicated labs): Cath Labs used for Angiography procedures				
Outpatient Visit				Dedicated Diagnostic Catheterization Lab					0		
								nterventional C			0
							Dedicated E	P Catheteriza	tion Labs		0
Diagnostic/Interve		Owned Contract		<b>Examination</b>		<u>ns</u>	s Radiation Equipm		- Owned Contract		Therapies/
<u>Equipmen</u>	_			• •		Contract	t				Treatments
General Radiography/	/Fluoroscopy	2	0	127	2,814	0	Lithotripsy			0 0	0
Nuclear Medicine		0	0	0	0	0	Linear Acc			0 0	0
Mammography		1	0	0	1,080	0	-	Buided Rad Th		0 0	0
Ultrasound		1	0	10	337	0		Modulated Ra	•	0 0	0
Angiography		0	0					Brachytherap	y	0 0	0
Diagnostic Angiogra				0	0	0		am Therapy		0 0	0
Interventional Angio	• • •			0	0	0	Gamma Kı			0 0	0
Positron Emission Tor		0	0	0	0	0	Cyber knife	9		0 0	0
Computerized Axial To	omography (CAT)	) 1	0	40	1,284	0					

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

Computerized Axial Tomography (CAT) Magnetic Resonance Imaging