Hospital Profile - C	Y 2012	Abraham	Lincoln Me	morial Ho	spital		Linco	ıln		Page 1
Ownership, Ma	nagement and	General Inform	nation		-	Patients by	Race		Patients by E	thnicity
ADMINISTRATOR NAM	VIE : Dolan D	alpoas			White			3.5% H	ispanic or Latin	o: 0.3%
ADMINSTRATOR PHO	ONE 217-655	5-5004			Bl	ack	•	1.3% N	ot Hispanic or L	_atino: 99.7%
OWNERSHIP:	Abrahar	m Lincoln Memo	rial Hospital		Ar	merican Indian	(0.0% U	nknown:	0.0%
OPERATOR:	Abrahar	m Lincoln Memo	rial Hospital		Asian		().2% -		
MANAGEMENT:		ot For Profit (spe	,			Hawaiian/ Pacific		0.0%	IDPH Numbe	
CERTIFICATION:		Access Hospital			Unknown		(0.0%	HPA	E-01
FACILITY DESIGNATION ADDRESS		l Hospital hlhut Drive	CIT	TV. Linaaln		COUNTY		Country	HSA	3
ADDRESS 200 Stahlhut Drive CITY: Lincoln COUNTY: Logan County Facility Utilization Data by Category of Service										
	Authorize	ed Peak Beds		ition Data by	<u>y Category</u>	/ of Service	Average	Average	CON	Staffed Bed
Clinical Service	CON Bed 12/31/201	ls Setup and		Admissions	Inpatient Days	Observation Days	Length of Stay	Daily Census	Occupancy Rate %	Occupancy Rate %
Medical/Surgical	22	22	22	892	3,148	69	3.6	8.8	40.1	40.1
0-14 Years				6	8					
15-44 Years				96	273					
45-64 Years				184	530					
65-74 Years				154	570					
75 Years +				452	1,767					
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	3	3	3	239	608	0	2.5	1.7	55.5	55.5
Maternity				239	608					
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				159	903		5.7	2.5		
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	9 0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedcated Observation	0					0				
Facility Utilization	25			1,290	4,659	69	3.7	13.0	51.8	
			(Includes ICU	Direct Admis	sions Only	<i>(</i>)				
			<u>Inpatier</u>	nts and Outp	oatients S	erved by Payor	r Source			
	Medicare	Medicaid	Other Public	Private In	surance	Private Pay	Charity Care Tota			Totals
	61.8%	17.0%	0.0%	1	6.4%	3.4%			11.5%	
Inpatients	797	219	0		82	44			148	1,290
	32.8%	19.0%	0.0%		23.5%	9.7%			15.0%	
Outpatients	19196	11091	0		13760	5692			8771	58,510
Financial Year Reporte	d: 10/1/2011	to 9/30/201	2 Inpatie	nt and Outp	atient Net	Revenue by P	ayor Sou	rce	O	Total Charity
	Medicare	Medicaid	Other Public	Private In		Private Pay	<u>-</u>	— Totals	Charity Care	Care Expense
Inpatient	66.6%	3.5%	0.0%	vate III	29.9%	0.1%		00.0%	Expense	1,914,000
Revenue (\$)				_					•	Total Charity
	5,994,488	314,699	0	2,	689,579	4,836	9,0	03,602	313,539	Care as % of
Outpatient	37.6%	9.1%	0.0%		53.1%	0.3%	1	00.0%		Net Revenue
Revenue (\$)	9,829,237	7 2,368,848 0 13,8		90,242 73,323		26,10	61,650	1,600,461	5.4%	
Bi	irthing Data			New	born Nurs	ery Utilization			Organ Transp	lantation
Number of Total Births	_		217 Lev	el 1 Patient		- -	0		ney:	0
Number of Live Births	:			evel 2 Patient Days		0	Hea	•	0	
Birthing Rooms:				el 2+ Patient			0	Lur	ng:	0
Labor Rooms:			0 Tota	al Nursery Pa	atientdays		0	Hea	art/Lung:	0
Delivery Rooms:			0			- · ·			ncreas:	0
Labor-Delivery-Recov	-	_	3	_	<u>aboratory</u>	<u> Studies</u>		Live	er:	0
Labor-Delivery-Recov	ery-Postpartum	Rooms:		atient Studies			23,482	Tot	al:	0
C-Section Rooms:				patient Studi		Contro -t	103,895			
CSections Performed:			59 Stu	dies Perform	ea Under (Contract	0			

Magnetic Resonance Imaging

Hospital Profile -	CY 2012	Abrah	nam Linc	oln Men	norial H	lospital		Lincoln			Page 2
			<u>Sı</u>	irgery and	l Operatii	ng Room U	tilization				
Surgical Specialty	<u>Opera</u>	Operating Rooms			Surgical (<u>Cases</u>	<u>Տ</u> ւ	urgical Hours	Hours	per Case	
	Inpatient Outpat	ient Comb	ined Tota	l Inp	atient (Outpatient	Inpatient	Outpatient To	otal 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		3	1	99	4	99	103	4.0	1.0
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	142	182	312	382	694	2.2	2.1
Oral/Maxillofacial	0	0		0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	132	0	95	95	0.0	0.7
Orthopedic	0	0	0	0	96	186	349	475	824	3.6	2.6
Otolaryngology	0	0	0	0	0	7	0	7	7	0.0	1.0
Plastic Surgery	0	0	0	0	0	9	0	9	9	0.0	1.0
Podiatry	0	0	0	0	0	9	0	13	13	0.0	1.4
Thoracic	0	0	0	0	0	0	0	0	0	0.0	0.0
Urology	0	0	0	0	3	45	5	64	69	1.7	1.4
Totals	0	0	3	3	242	669	670	1144	1814	2.8	1.7
SURGICAL RECOV						0				0	
SURGICAL RECOV	ERT STATIONS		Stage 1 Re	ecovery Sta	ations	0	ડાત્	ge 2 Recovery	Stations	U	
				and Non-[Room Utilza				_
	_	Procedur	•			cal Cases		Surgical Hour	_		per Case
Procedure Type	Inpatient	Outpatien	t Combined	d Total	Inpatient	Outpatier	nt Inpatient	Outpatient	Total Hour	s Inpatient	Outpatient
Gastrointestinal	0	0	1	1	1	432		357	358	1.0	0.8
Laser Eye Procedures	s 0	0	0	0	0	0		0	0	0.0	0.0
Pain Management	0	0	1	1	1	194		100	101	1.0	0.5
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
			M	lultipurpo	se Non-D	edicated R	<u>ooms</u>				
	0	0	0	0	0	C	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
Eı	mergency/Trauma	a Care					Car	diac Catheter	ization Uti	lization	
Certified Trauma					No	Tota		n Procedures:			0
Level of Trauma Service		L	evel 1	Leve		Diagnostic Catheterizations (0-14)					0
		(Not An	swered)	Not Answ	ered		-	neterizations (0
Operating Rooms	s Dedicated for Tra	•	,	0		Ir		0			
Number of Traum			0 Interventional Catheterization (15+)							0	
Patients Admitted		0				EP Catheterizations (15+)					
Emergency Servi			C	Comprehen	sive			Cardiac Sur	nery Data		
Number of Emerg	ons		ompronon	0	Tota	Total Cardiac Surgery Cases:					
Persons Treated			17,		Р	0 0					
	d from Emergency			-	672	А	0				
Total ED Visits (E			17,	17,269		•	y Bypass Graf	ts (CABGs)			
·	,	,						of total Cardi			0
<u>(</u>	Outpatient Service	e Data						Cardiac Cat	heterizatio	n Labs	
Total Outpatient	Visits			49,	739	Tota	ıl Cath Labs (I	Dedicated+No	ndedicated	labs):	0
•	sits at the Hospital/	Campus:		49,			,	sed for Angio		,	0
	its Offsite/off cam			,	0			Diagnostic Catl			0
•	·	•				Dedicated Interventional Catheterization Labs					0
							Dedicated E	P Catheteriza	tion Labs		0
Diagnostic/Inter	ventional			<u>E</u> x	caminatio	ns	<u>Radiati</u> oı	n Equipment			Therapies/
Equipme		Owned	Contract	Inpatient		 Contract			Owned	d Contract	Treatments
General Radiograph	y/Fluoroscopy	3	0	1,035	7,939	0	Lithotripsy			0 0	0
Nuclear Medicine		1	0	27	362		Linear Acc			0 0	0
Mammography		1	0	0	2,027	0		Suided Rad Th	erapv	0 0	0
Ultrasound		2	0	163	2,826	0	_	Modulated Ra		0 0	0
Angiography		0	0	. 50	_,525	v		Brachytherapy		0 0	0
Diagnostic Angiog	graphy	3	· ·	0	0	0		am Therapy	,	0 0	0
Interventional Ang				0	0	0	Gamma Kı			0 0	0
Positron Emission T		0	0	0	0	0	Cyber knife			0 0	0
Computerized Axial			0	262	4,131	0	Cybor Milli	-		5	3
Magnetic Resonance		/ I	0	86	1.586	0					

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

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0

86

1,586

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