ISDH 2006 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

Memorial Hospital of South Bend, Inc

City: South Bend County: St Joseph Year: 2006

I. Inpatient Care				
Hospital Service Description	**Number of Set Up Beds**	**Number of Discharges**	**Number of Patient Days**	**Annual Total Charges**
Burn Care				
Cardiac Intensive	6	21	1,015	$2,470,335
ICU Med/Surgical	17	244	4,008	$10,022,730
ICU Neonatal	36	411	8,701	$15,529,290
ICU Pediatric	9	267	1,600	$3,483,380
Medical/Surgical	100	7,161	26,770	$26,216,380
Neonatal Intermediate				
Obstetrics	51	3,621	10,003	$11,303,645
Pediatric	20	929	2,382	$2,926,785
Psychiatric				
Rehabilitation	20	324	3,717	$5,723,885
Substance Abuse				
Swing Beds	NA			
Other Services	91	5,215	24,826	NA
Acute Subtotal	350	18,193	83,022	NA
Normal Newborn	37	3,021	6,877	$3,060,225

II. Outpatient Visits			
Circulatory System	4,002	Digestive System	3,579
Endocrine System	1,326	All Injuries	5,915
Mental Disorder	2,160	Musculoskeletal	14,147
Neoplasms	7,188	Nervous	4,063
Respiratory	2,865	Urinary	6,429
Other/Unknown	85,834	Total Visits	146,225
Number of Visits to Emergency Department			48,236