



ISDH Hospital Service Report
 State Form 49476 (R /7-02)
 IC 16-21-6

Status: Finalized

I. Hospital Information

Hospital Name: DEKALB MEMORIAL HOSPITAL, INC.

Provider #: 15-0045

City: Auburn

County: DeKalb

Year: 2014

Person Completing the Report: Christa Pomeroy

Email Address: cpomeroy@dekalbhealth.com

LICENSURE, ACCREDITATION, OR DESIGNATED UNITS (check all that apply)

State Licensure: Acute License LTC Certification

Private Accreditation: JCAHO HFAP

CMS Specialized Hosp: CAH TLC Rehab

DRG Exempt: Psych Rehab Swing Bed

Number of Total Hospital Full Time Equivalents 475

II. Hospital Service Utilization

Hospital Service Description	Number of Set-up Beds	Number of Discharges	Number of Patient Days	Annual Total Charges
Burn Care	0	0	0	\$0
Cardiac Intensive	0	0	0	\$0
ICU Medical/Surgical	8	433	1286	\$0
ICU Neonatal	0	0	0	\$0
ICU Pediatric	0	0	0	\$0
Medical/Surgical	27	1098	3697	\$0
Neonatal Intermediate	0	0	0	\$0
Normal Newborn	9	483	996	\$0
Obstetrics	9	483	1155	\$0
Pediatric	0	0	0	\$0

Psychiatric	0	0	0	\$0
Rehabilitation	0	0	0	\$0
Substance Abuse	0	0	0	\$0
Swing Bed Program	NA	0	0	\$0
Extended Care	0	0	0	\$0
Observation Beds	0	0	0	\$0
All Other Services	0	0	0	NA
Total Acute	53	2497	7134	NA

III. Nursing Facility Utilization

	Number of Licensed Beds	Number of Discharges	Number of Patient Days
Nursing Facility	0	0	0

IV. Number of Outpatient Encounters By Diagnostic Group

Please identify the number of outpatient encounters for your hospital by ICD-9-CM Diagnostic Categories

Diagnostic Categories	Number of Encounters	Diagnostic Categories	Number of Encounters
Infectious Disease	757	HIV	10
Neoplasms	1429	Endocrine	7534
Diseases of Blood	817	Mental Disorders	856
Nervous	1874	Circulatory	5711
Respiratory	3308	Digestive Diseases	2419
Genitourinary	3423	Pregnancy	1813
Skin	1156	Musculoskeletal	9000
Congenital	95	Perinatal	125
All Injuries	5476		
Other/Known	10607	Total Encounters	56410

Total ED Visits	ED Injury Visits	ED Injury Admissions
16294	3716	62

Comments

