



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

525 WEST JEFFERSON ST. • SPRINGFIELD, ILLINOIS 62761 • (217) 782-3516 FAX: (217) 785-4111

| | | | |
|--|-----------------------|------------------------------|---------------------------------------|
| DOCKET NO: | BOARD MEETING: | PROJECT NO: 15-018 | PROJECT COST: Original: \$0 |
| FACILITY NAME: Gateway Regional Medical Center | | CITY: Granite City | |
| TYPE OF PROJECT: Substantive | | | HSA: XI |

DESCRIPTION: The applicants (Granite City Hospital Company, LLC, and Community Health Systems, Inc.) are requesting to discontinue their 5-bed Pediatrics (PEDS) category of service. There is no cost to this project. **The completion date is June 30, 2015.**

EXECUTIVE SUMMARY

PROJECT DESCRIPTION:

- The applicants (Granite City Hospital Company, LLC, and Community Health Systems, Inc.) are requesting to discontinue a 5-bed Pediatrics (PEDS) category of service, at its acute care hospital, in Granite City. There is no cost to this project. **The completion date is June 30, 2015.**

WHY THE PROJECT IS BEFORE THE STATE BOARD:

- The project is before the State Board because the project proposes to discontinue a category of service under the jurisdiction of the State Board.

PURPOSE OF THE PROJECT:

- The purpose of the proposed discontinuation stems from the lack of utilization for the last three years. Gateway Regional Medical Center does have an Obstetrics service, an Acute Mental Illness service that treats patients under 14 years of age, and pediatricians on staff. Regardless, the applicants report having no pediatric patients admitted in the last three years. The applicants state the existence of children's specialty hospitals in St. Louis (18 miles away), as the probable cause for the lack of pediatric admissions at the hospital. The vacated space will be used for expanded medical-surgical inpatient treatment, but no additional beds will added to the existing bed complement.

DISCONTINUATION:

- An applicant proposing to discontinue a category of service must provide:
 - The reason for the discontinuation;
 - The use of the physical plant and equipment after discontinuation occurs; and
 - The impact the proposed discontinuation will have on the facility's market area.
- The applicants are requesting approval to discontinue its 5-bed Pediatrics category of service given the complete lack of utilization over the past three years.
- The applicants note existing Children's specialty hospitals in the St. Louis area as the reason for the lack of utilization.
- The applicants will continue to care for children on an outpatient basis as necessary, and will occasionally admit patients under 15 years of age to its medical surgical unit for a limited stay, based on acuity levels.

COMPLIANCE:

- The applicants have had no adverse actions in the past three years and are in compliance with all of the State Board's reporting requirements.

PUBLIC HEARING/COMMENT

- A public hearing was offered on this project; however, no hearing was requested. State Board Staff have received no letters of opposition and no letters of support regarding this project.

FINANCIAL AND ECONOMIC FEASIBILITY:

- The proposed project will incur no costs.

CONCLUSION:

- There is a calculated excess of 468 medical/surgical/pediatrics beds in the F-01 planning area by CY 2015, and the proposed discontinuation will reduce this bed excess to 463. Given the current bed excess, and the lack of utilization of the pediatrics beds in the last three years, it would appear that the proposed discontinuation is justified.
- **The applicants have met the requirements of 77 IAC Part 1110.130 – Discontinuation**



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STATE BOARD STAFF REPORT
Gateway Regional Medical Center
PROJECT #15-018

| | |
|--|--|
| Applicants | Community Health Systems, Inc. Granite City Hospital Company d/b/a Gateway Regional Medical Center |
| Facility Name | Gateway Regional Medical Center |
| Location | Granite City |
| Application Received | March 19, 2015 |
| Application Deemed Complete | March 31, 2015 |
| Can Applicants Request Another Deferral? | Yes |

I. The Proposed Project

The applicants (Community Health Systems, Inc., and Granite City Hospital Company d/b/a Gateway Regional Medical Center) are requesting to discontinue their 5-bed Pediatrics category of service. There is no cost to this project. **The completion date is June 30, 2015.**

II. Summary of Findings

- A. The State Board Staff finds the proposed project appears to be in conformance with the provisions of Part 1110.**
- B. Part 1120 is not applicable.**

III. General Information

The applicants are Community Health Systems, Inc., and Granite City Hospital Company d/b/a Gateway Regional Medical Center. Gateway Regional Medical Center is located at 2100 Madison Avenue, Granite City, Illinois, in the HSA 11 Service Area and Planning Area F-01. The operating entity licensee and Site Owner is Granite City Hospital Company, LLC, d/b/a Gateway Regional Medical Center.

HSA XI consists of the Illinois Counties of Clinton, Madison, Monroe, and St. Clair.

There are ten hospitals located in the F-01 planning area: Alton Memorial Hospital, Alton, Anderson Hospital, Maryville, Gateway Regional Medical Center, Granite City, Memorial Hospital, Belleville, Memorial Hospital-East, Shiloh, Saint Anthony’s Hospital, Alton, St. Elizabeth’s Hospital, Belleville, St. Joseph’s Hospital, Highland, St. Joseph’s Hospital, Breese, and Touchette Regional Hospital, Centreville. Of the ten hospitals listed above, eight have pediatrics service. They are: Alton Memorial Hospital (4 beds), Gateway Regional medical

center, (5 beds), Memorial Hospital Belleville (14 beds), Saint Anthony’s Hospital (5 beds), St. Elizabeth’s Hospital (14beds), St. Joseph’s Breese (6 beds), and Touchette Regional Hospital (8 beds). The April 2015 Update to the Inventory of Health Care Facilities indicate a calculated excess of 468 medical/surgical/pediatrics beds in the F-01 planning area by CY 2015.

There is no land acquisition cost or start-up costs or operating deficit for this project. This is a substantive project subject to a Part 1110. Part 1120 review is not applicable because there is no cost to the project. Project obligation will occur after permit issuance

CY 2013 Hospital Profile information is attached at the end of this report.

IV. Support and Opposition Comments

A public hearing was offered on this project; however, no hearing was requested. The State Board Staff received no letters of opposition and no letters of support regarding this project.

V. Safety Net Impact Statement/Charity Care

A safety net impact statement was provided with a statement regarding the Charity Care/Medicaid services provided for the years 2011, 2012, and 2013. Its data is presented in Table One below

The applicant stated the following in regards to the safety net impact:

“The discontinuation of the Obstetrics beds should allow those facilities that provide this service, and are underutilized in this service, (there are many), an opportunity to fill more of their respective authorized obstetrics beds to assist in cross subsidizing services.”

The applicant provided Safety Net/Charity Care information for St. Mary’s Hospital, which is presented in Table One

| TABLE ONE | | | |
|--|---------------------|---------------------|----------------------|
| Safety Net Information per 96-0031 | | | |
| Gateway Regional Medical Center, Granite City | | | |
| | 2011 | 2012 | 2013 |
| Net Revenue | \$91,988,762 | \$89,195,659 | \$100,579,862 |
| Amount of Charity Care (Charges) | \$19,484,009 | \$27,137,241 | \$30,834,688 |
| Cost of Charity Care | \$2,078,944 | \$2,895,544 | \$3,290,061 |
| CHARITY CARE | | | |
| Charity (# of patients) | 2011 | 2012 | 2013 |
| Inpatient | 466 | 641 | 548 |
| Outpatient | 752 | 1,097 | 1,013 |
| Total | 1,218 | 1,738 | 1,561 |

| TABLE ONE | | | |
|--|---------------|---------------|---------------|
| Safety Net Information per 96-0031 | | | |
| Gateway Regional Medical Center, Granite City | | | |
| Charity (cost in dollars) | | | |
| Inpatient | \$1,597,918 | \$2,224,137 | \$2,483,972 |
| Outpatient | \$481,026 | \$671,406 | \$806,089 |
| Total | \$2,078,944 | \$2,895,544 | \$3,290,061 |
| MEDICAID | | | |
| Medicaid (# of patients) | 2011 | 2012 | 2013 |
| Inpatient | 2,104 | 1,999 | 1,633 |
| Outpatient | 20,587 | 20,476 | 19,623 |
| Total | 22,601 | 22,475 | 21,256 |
| Medicaid (revenue) | | | |
| Inpatient | \$89,905,111 | \$74,755,465 | \$100,032,066 |
| Outpatient | \$66,302,814 | \$47,681,091 | \$78,579,366 |
| Total | \$155,807,925 | \$122,436,556 | \$178,611,432 |

VI. Review Criterion 1110.130 - Discontinuation

The criterion states:

“a) The applicants must provide the following:

- 1) the reasons for the discontinuation;
- 2) the anticipated or actual date of discontinuation or the date the last person was or will be discharged or treated, as applicable;
- 3) the availability of other services or facilities in the planning area that are available and willing to assume the applicants’ workload without conditions, limitations, or discrimination;
- 4) a closure plan indicating the process used to provide alternative services or facilities for the patients prior to or upon discontinuation; and
- 5) the anticipated use of the physical plant and equipment after discontinuation has occurred and the anticipated date of such use.”

b) Each application for discontinuation will be analyzed to determine:

1. The applicant shall document that the discontinuation is justified by providing data that verifies that one or more of the following factors (and other factors, as applicable) exist with respect to each service being discontinued:

- 1) **Insufficient volume or demand for the service;**
- 2) **Lack of sufficient staff to adequately provide the service;**
- 3) **The facility or the service is not economically feasible, and continuation impairs the facility's financial viability;**
- 4) **The facility or the service is not in compliance with licensing or certification standards.**

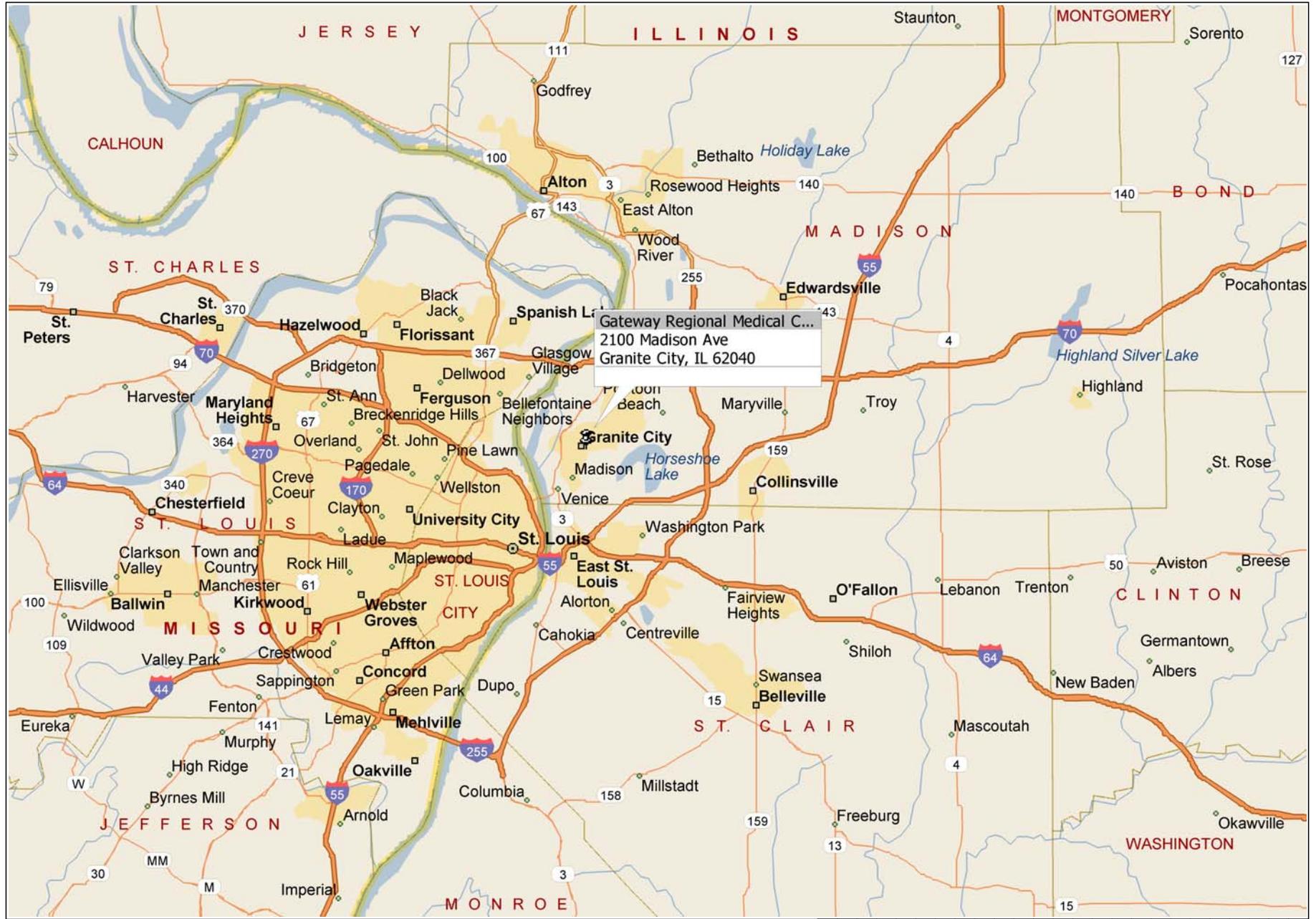
The applicants state the following in regards to this service

The applicants propose to discontinue the 5-bed pediatrics service located in Gateway Regional Medical Center, Granite City. The applicants note having served no pediatric inpatients in the last three years, and attributes this to the presence of Children's specialty hospitals located in the metro St. Louis area. Board staff notes there is an excess of 468 Medical/Surgical/Pediatric beds in Health Planning Area F-01. The applicants sent impact letters to eight acute care hospitals in the Medical/Surgical/Pediatrics service area, and received a letter from Community Memorial Hospital, in Staunton, inquiring if the discontinuation would affect the Kettler Adolescent Psych Unit. It appears that the discontinuation of this service will not have a negative impact on area facilities (see below).

| Facility | City | Minutes | Med/Surg/ Pediatrics Beds | Utilization | State Standard Met |
|--|-------------------|----------------|--|--------------------|-----------------------------------|
| Anderson Hospital | Maryville | 18 | 98/0 | 51.3% | No |
| Touchette Regional Hospital | East St. Louis | 21 | 66/8 | 21.1%/0.0% | No |
| St. Elizabeth's Hospital* (14-043) | O'Fallon | 23 | 100/0 | 0.0% | No |
| Memorial Hospital | Belleville | 24 | 175/14 | 89%/1.7% | No |
| Memorial Hospital-East* (11-017) | Shiloh | 25 | 72 | 0.0% | No |
| Alton Memorial Hospital | Alton | 25 | 117/4 | 48%/0.4% | No |
| Saint Anthony's Hospital | Alton | 28 | 101/5 | 24.2%/0.0% | No |
| St Elizabeth's Hospital | Belleville | 29 | 202/14 | 36.8%/0.0% | No |
| St. Joseph's Hospital^ | Highland | 34 | 25 | 34.2% | No |
| Community Memorial Hospital^ | Staunton | 42 | 21 | 5.8% | No |
| Utilization data taken from CY 2013 Hospital Profile | | | | | |
| *recently approved (see project number) No data reported | | | | | |
| ^Critical Access Hospital | | | | | |

THE STATE BOARD STAFF FINDS THE PROPOSED PROJECT APPEARS TO BE IN CONFORMANCE WITH THE DISCONTINUATION REVIEW CRITERION (77 IAC 1110.130).

15-018 Gateway Regional Medical Center - Granite City



| <u>Ownership, Management and General Information</u> | | <u>Patients by Race</u> | | <u>Patients by Ethnicity</u> | |
|--|------------------------------------|-------------------------|--------------|------------------------------|----------------|
| ADMINISTRATOR NAME: | Ronald W. Leazer | White | 81.2% | Hispanic or Latino: | 5.1% |
| ADMINSTRATOR PHONE | 618-798-3990 | Black | 16.8% | Not Hispanic or Latino: | 94.5% |
| OWNERSHIP: | Granite City Illinois Hospital Co. | American Indian | 0.0% | Unknown: | 0.4% |
| OPERATOR: | Granite City Illinois Hospital Co. | Asian | 0.2% | | |
| MANAGEMENT: | For Profit Corporation | Hawaiian/ Pacific | 0.3% | IDPH Number: | 5223 |
| CERTIFICATION: | | Unknown | 1.4% | HPA | F-01 |
| FACILITY DESIGNATION: | General Hospital | | | HSA | 11 |
| ADDRESS | 2100 Madison Avenue | CITY: | Granite City | COUNTY: | Madison County |

| <u>Facility Utilization Data by Category of Service</u> | | | | | | | | | | |
|---|---------------------------------------|------------------------------------|--------------------|-------------------|-----------------------|-------------------------|-------------------------------|-----------------------------|-----------------------------|-------------------------------------|
| <u>Clinical Service</u> | <u>Authorized CON Beds 12/31/2013</u> | <u>Peak Beds Setup and Staffed</u> | <u>Peak Census</u> | <u>Admissions</u> | <u>Inpatient Days</u> | <u>Observation Days</u> | <u>Average Length of Stay</u> | <u>Average Daily Census</u> | <u>CON Occupancy Rate %</u> | <u>Staffed Bed Occupancy Rate %</u> |
| Medical/Surgical | 166 | 164 | 60 | 3,218 | 13,403 | 1,061 | 4.5 | 39.6 | 23.9 | 24.2 |
| 0-14 Years | | | | 11 | 40 | | | | | |
| 15-44 Years | | | | 514 | 1,744 | | | | | |
| 45-64 Years | | | | 1,100 | 4,339 | | | | | |
| 65-74 Years | | | | 598 | 2,619 | | | | | |
| 75 Years + | | | | 995 | 4,661 | | | | | |
| Pediatric | 5 | 5 | 0 | 0 | 0 | 0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Intensive Care | 12 | 11 | 10 | 351 | 1,289 | 0 | 3.7 | 3.5 | 29.4 | 32.1 |
| Direct Admission | | | | 191 | 727 | | | | | |
| Transfers | | | | 160 | 562 | | | | | |
| Obstetric/Gynecology | 27 | 27 | 6 | 280 | 674 | 22 | 2.5 | 1.9 | 7.1 | 7.1 |
| Maternity | | | | 268 | 632 | | | | | |
| Clean Gynecology | | | | 12 | 42 | | | | | |
| Neonatal | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Long Term Care | 19 | 19 | 8 | 260 | 2,578 | 0 | 9.9 | 7.1 | 37.2 | 37.2 |
| Swing Beds | | | 0 | 0 | 0 | | 0.0 | 0.0 | | |
| Acute Mental Illness | 100 | 100 | 98 | 3,018 | 19,160 | 0 | 6.3 | 52.5 | 52.5 | 52.5 |
| Rehabilitation | 14 | 14 | 8 | 83 | 1,055 | 0 | 12.7 | 2.9 | 20.6 | 20.6 |
| Long-Term Acute Care | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Dedicated Observation | 0 | | | | | 0 | | | | |
| Facility Utilization | 343 | | | 7,050 | 38,159 | 1,083 | 5.6 | 107.5 | 31.3 | |

(Includes ICU Direct Admissions Only)

| <u>Inpatients and Outpatients Served by Payor Source</u> | | | | | | | |
|--|-----------------|-----------------|---------------------|--------------------------|--------------------|---------------------|---------------|
| | <u>Medicare</u> | <u>Medicaid</u> | <u>Other Public</u> | <u>Private Insurance</u> | <u>Private Pay</u> | <u>Charity Care</u> | <u>Totals</u> |
| Inpatients | 31.6% | 25.2% | 1.4% | 22.6% | 11.7% | 7.5% | |
| | 2408 | 1922 | 104 | 1726 | 890 | 574 | 7,624 |
| Outpatients | 22.5% | 27.3% | 2.2% | 31.8% | 14.8% | 1.4% | |
| | 16294 | 19806 | 1569 | 23092 | 10729 | 1037 | 72,527 |

| <u>Financial Year Reported:</u> | 1/1/2013 to | 12/31/2013 | <u>Inpatient and Outpatient Net Revenue by Payor Source</u> | | | | | <u>Charity Care Expense</u> | <u>Total Charity Care Expense</u> |
|----------------------------------|-----------------|-----------------|---|--------------------------|--------------------|---------------|-----------------------------|-----------------------------|-----------------------------------|
| | <u>Medicare</u> | <u>Medicaid</u> | <u>Other Public</u> | <u>Private Insurance</u> | <u>Private Pay</u> | <u>Totals</u> | <u>Charity Care Expense</u> | | |
| Inpatient Revenue (\$) | 24.7% | 37.8% | 0.7% | 26.9% | 9.9% | 100.0% | | 3,394,775 | |
| | 17,417,413 | 26,648,008 | 503,973 | 18,951,609 | 6,979,175 | 70,500,178 | 2,566,023 | | |
| Outpatient Revenue (\$) | 19.8% | 3.6% | 0.5% | 52.7% | 23.5% | 100.0% | | | |
| | 9,817,031 | 1,763,169 | 231,725 | 26,167,182 | 11,659,514 | 49,638,621 | 828,752 | 2.8% | |

| <u>Birthing Data</u> | | | <u>Newborn Nursery Utilization</u> | | | | <u>Organ Transplantation</u> | |
|---|-----|--|------------------------------------|----------|-----------|-------------|------------------------------|--|
| Number of Total Births: | 248 | | Level I | Level II | Level II+ | Kidney: | 0 | |
| Number of Live Births: | 248 | | Beds | 8 | 0 | Heart: | 0 | |
| Birthing Rooms: | 0 | | Patient Days | 551 | 0 | Lung: | 0 | |
| Labor Rooms: | 0 | | Total Newborn Patient Days | | 551 | Heart/Lung: | 0 | |
| Delivery Rooms: | 0 | | | | | Pancreas: | 0 | |
| Labor-Delivery-Recovery Rooms: | 0 | | | | | Liver: | 0 | |
| Labor-Delivery-Recovery-Postpartum Rooms: | 4 | | <u>Laboratory Studies</u> | | | Total: | 0 | |
| C-Section Rooms: | 0 | | Inpatient Studies | | 188,000 | | | |
| CSections Performed: | 94 | | Outpatient Studies | | 167,872 | | | |
| | | | Studies Performed Under Contract | | 13,191 | | | |

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 | 60 | 79 | 137 | 150 | 287 | 2.3 | 1.9 |
| Dermatology | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0.0 |
| General | 0 | 0 | 3 | 3 | 184 | 280 | 644 | 677 | 1321 | 3.5 | 2.4 |
| Gastroenterology | 0 | 0 | 3 | 3 | 408 | 1121 | 232 | 671 | 903 | 0.6 | 0.6 |
| Neurology | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0.0 |
| OB/Gynecology | 0 | 0 | 1 | 1 | 129 | 445 | 290 | 791 | 1081 | 2.2 | 1.8 |
| 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 | 2 | 2 | 357 | 273 | 1219 | 685 | 1904 | 3.4 | 2.5 |
| Otolaryngology | 0 | 0 | 0 | 0 | 0 | 291 | 0 | 295 | 295 | 0.0 | 1.0 |
| Plastic Surgery | 0 | 0 | 0 | 0 | 69 | 98 | 109 | 150 | 259 | 1.6 | 1.5 |
| 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 | 57 | 107 | 89 | 151 | 240 | 1.6 | 1.4 |
| Totals | 0 | 0 | 10 | 10 | 1264 | 2694 | 2720 | 3570 | 6290 | 2.2 | 1.3 |

| SURGICAL RECOVERY STATIONS | | Stage 1 Recovery Stations | 12 | Stage 2 Recovery Stations | 24 |
|----------------------------|--|---------------------------|----|---------------------------|----|
| | | | | | |

Dedicated and Non-Dedicated Procedure Room Utilization

| Procedure Type | Procedure Rooms | | | | Surgical Cases | | Surgical Hours | | | Hours per Case | |
|----------------------|-----------------|------------|----------|-------|----------------|------------|----------------|------------|-------------|----------------|------------|
| | Inpatient | Outpatient | Combined | Total | Inpatient | Outpatient | Inpatient | Outpatient | Total Hours | Inpatient | Outpatient |
| Gastrointestinal | 0 | 0 | 3 | 3 | 408 | 1121 | 232 | 671 | 903 | 0.6 | 0.6 |
| Laser Eye Procedures | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.0 | 0.0 |
| Pain Management | 0 | 1 | 0 | 1 | 0 | 71 | 0 | 46 | 46 | 0.0 | 0.6 |
| Cystoscopy | 0 | 0 | 1 | 1 | 57 | 106 | 89 | 151 | 240 | 1.6 | 1.4 |

Multipurpose Non-Dedicated Rooms

| | | | | | | | | | | | |
|--|---|---|---|---|---|---|---|---|---|-----|-----|
| | 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 |

Emergency/Trauma Care

| | |
|---|---------------------------|
| Certified Trauma Center | No |
| Level of Trauma Service | Level 1 (Not Answered) |
| Operating Rooms Dedicated for Trauma Care | Level 2 Not Answered |
| Number of Trauma Visits: | 0 |
| Patients Admitted from Trauma | 0 |
| Emergency Service Type: | Comprehensive |
| Number of Emergency Room Stations | 16 |
| Persons Treated by Emergency Services: | 26,688 |
| Patients Admitted from Emergency: | 4,725 |
| Total ED Visits (Emergency+Trauma): | 26,688 |

Free-Standing Emergency Center

| | |
|---|---|
| Beds in Free-Standing Centers | 0 |
| Patient Visits in Free-Standing Centers | 0 |
| Hospital Admissions from Free-Standing Center | 0 |

Outpatient Service Data

| | |
|--|--------|
| Total Outpatient Visits | 71,490 |
| Outpatient Visits at the Hospital/ Campus: | 71,490 |
| Outpatient Visits Offsite/off campus | 0 |

Cardiac Catheterization Labs

| | |
|--|---|
| Total Cath Labs (Dedicated+Nondedicated labs): | 1 |
| Cath Labs used for Angiography procedures | 1 |
| Dedicated Diagnostic Catheterization Lab | 0 |
| Dedicated Interventional Catheterization Labs | 0 |
| Dedicated EP Catheterization Labs | 0 |

Cardiac Catheterization Utilization

| | |
|---|-------|
| Total Cardiac Cath Procedures: | 1,159 |
| Diagnostic Catheterizations (0-14) | 0 |
| Diagnostic Catheterizations (15+) | 680 |
| Interventional Catheterizations (0-14): | 0 |
| Interventional Catheterization (15+) | 460 |
| EP Catheterizations (15+) | 19 |

Cardiac Surgery Data

| | |
|--|---|
| Total Cardiac Surgery Cases: | 0 |
| Pediatric (0 - 14 Years): | 0 |
| Adult (15 Years and Older): | 0 |
| Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases : | 0 |

Diagnostic/Interventional Equipment**Examinations****Therapeutic Equipment****Therapies/ Treatments**

| | Owned | | Contract | | | Owned | | Contract | | |
|-------------------------------------|-------|---|----------|--------|---|------------------------------|---|----------|---|---|
| | | | | | | | | | | |
| General Radiography/Fluoroscopy | 15 | 0 | 6,472 | 17,701 | 0 | Lithotripsy | 0 | 0 | 0 | 0 |
| Nuclear Medicine | 1 | 0 | 223 | 375 | 0 | Linear Accelerator | 0 | 0 | 0 | 0 |
| Mammography | 2 | 0 | 1 | 3,087 | 0 | Image Guided Rad Therapy | | | | 0 |
| Ultrasound | 3 | 0 | 683 | 3,754 | 0 | Intensity Modulated Rad Thrp | | | | 0 |
| Angiography | 1 | 0 | | | | High Dose Brachytherapy | 0 | 0 | 0 | 0 |
| Diagnostic Angiography | | | 93 | 123 | 0 | Proton Beam Therapy | 0 | 0 | 0 | 0 |
| Interventional Angiography | | | 0 | 0 | 0 | Gamma Knife | 0 | 0 | 0 | 0 |
| Positron Emission Tomography (PET) | 0 | 0 | 0 | 0 | 0 | Cyber knife | 0 | 0 | 0 | 0 |
| Computerized Axial Tomography (CAT) | 3 | 0 | 1,959 | 6,111 | 0 | | | | | |
| Magnetic Resonance Imaging | 2 | 0 | 217 | 1,716 | 0 | | | | | |