

Hospitals Database

This document is to be used in conjunction with the Hospitals database for the 2014 Hospital License Renewal Application.

The database contains 31 tables and the relationships are indicated in the pdf document titled 'hospitalrel'.

This data is in-process working data for the internal use of the Planning Branch and it may be changed or revised over time. The Planning Branch provides no assurance or representations as to its accuracy and any user of the data assumes the risk of errors or inaccuracy.

Table 1: tblAgeLevels

Field Name	Data Type	Definition
IngAgeLevelID	Number	Unique identifier for the different age levels
strAgeLevel	Text	The age levels

Table 2: tblBedsByService

Field Name	Data Type	Definition
IngBedsID	AutoNumber	Primary key
IngHospitalID	Number	Establishes table relationships
strCampusName	Text	Name of the campus
IngCampusType	Number	-1: Cumulative totals for a multi-campus hospital; 0: Hospital only has one campus; #>0: distinct campus numbers
IngICUBurnLic	Number	Intensive Care Units: Burn, number of licensed beds
IngICUBurnStaff	Number	Intensive Care Units: Burn, number of staffed beds
IngICUBurnIDOC	Number	Intensive Care Units: Burn, annual census, inpatient days of care
IngICUCardiacLic	Number	Intensive Care Units: Cardiac, number of licensed beds
IngICUCardiacStaff	Number	Intensive Care Units: Cardiac, number of staffed beds
IngICUCardiacIDOC	Number	Intensive Care Units: Cardiac, annual census, inpatient days of care
IngICUCVSLic	Number	Intensive Care Units: Cardiovascular Surgery, number of licensed beds
IngICUCVSStaff	Number	Intensive Care Units: Cardiovascular Surgery, number of staffed beds
IngICUCVSSIDOC	Number	Intensive Care Units: Cardiovascular Surgery, annual census, inpatient days of care
IngICUMedSurgLic	Number	Intensive Care Units: Medical/Surgical, number of licensed beds
IngICUMedSurgStaff	Number	Intensive Care Units: Medical/Surgical, number of staffed beds
IngICUMedSurgIDOC	Number	Intensive Care Units: Medical/Surgical, annual census, inpatient days of care

Field Name	Data Type	Definition
IngICUNeonatal4Lic	Number	Intensive Care Units: Neonatal Beds Level IV, number of licensed beds
IngICUNeonatal4Staff	Number	Intensive Care Units: Neonatal Beds Level IV, number of staffed beds
IngICUNeonatal4IDOC	Number	Intensive Care Units: Neonatal Beds Level IV, annual census, inpatient days of care
IngICUPedLic	Number	Intensive Care Units: Pediatric, number of licensed beds
IngICUPedStaff	Number	Intensive Care Units: Pediatric, number of staffed beds
IngICUPedIDOC	Number	Intensive Care Units: Pediatric, annual survey, inpatient days of care
IngICURespLic	Number	Intensive Care Units: Respiratory Pulmonary, number of licensed beds
IngICURespStaff	Number	Intensive Care Units: Respiratory Pulmonary, number of staffed beds
IngICURespIDOC	Number	Intensive Care Units: Respiratory Pulmonary, annual census, inpatient days of care
strICUOtherType	Text	Intensive Care Units: List other type of intensive care unit
IngICUOtherLic	Number	Intensive Care Units: Other, number of licensed beds
IngICUOtherStaff	Number	Intensive Care Units: Other, number of staffed beds
IngICUOtherIDOC	Number	Intensive Care Units: Other, annual census, inpatient days of care
IngUnitGynLic	Number	Units: Gynecology, number of licensed beds
IngUnitGynStaff	Number	Units: Gynecology, number of staffed beds
IngUnitGynIDOC	Number	Units: Gynecology, annual census, inpatient days of care
IngUnitMedSurgLic	Number	Units: Medical/Surgical, number of licensed beds
IngUnitMedSurgStaff	Number	Units: Medical/Surgical, number of staffed beds
IngUnitMedSurgIDOC	Number	Units: Medical/Surgical, annual census, inpatient days of care
IngUnitNeonatal3Lic	Number	Units: Neonatal Level III, number of licensed beds
IngUnitNeonatal3Staff	Number	Units: Neonatal Level III, number of staffed beds
IngUnitNeonatal3IDOC	Number	Units: Neonatal Level III, annual census, inpatient days of care
IngUnitNeonatal2Lic	Number	Units: Neonatal Level II, number of licensed beds
IngUnitNeonatal2Staff	Number	Units: Neonatal Level II, number of staffed beds
IngUnitNeonatal2IDOC	Number	Units: Neonatal Level II, annual census, inpatient days of care
IngUnitObsLic	Number	Units: Obstetric, number of licensed beds
IngUnitObsStaff	Number	Units: Obstetric, number of staffed beds
IngUnitObsIDOC	Number	Units: Obstetric, annual census, inpatient days of care
IngUnitOncLic	Number	Units: Oncology, number of licensed beds
IngUnitOncStaff	Number	Units: Oncology, number of staffed beds
IngUnitOncIDOC	Number	Units: Oncology, annual census, inpatient days of care
IngUnitOrthoLic	Number	Units: Orthopedics, number of licensed beds
IngUnitOrthoStaff	Number	Units: Orthopedics, number of staffed beds
IngUnitOrthoIDOC	Number	Units: Orthopedics, annual census, inpatient days of care
IngUnitPedLic	Number	Units: Pediatric, number of licensed beds
IngUnitPedStaff	Number	Units: Pediatric, number of staffed beds
IngUnitPedIDOC	Number	Units: Pediatric, annual census, inpatient days of care
strUnitOtherType	Text	Units: Other type of unit

Field Name	Data Type	Definition
IngUnitOtherLic	Number	Units: Other, number of licensed beds
IngUnitOtherStaff	Number	Units: Other, number of staffed beds
IngUnitOtherIDOC	Number	Units: Other, annual census, inpatient days of care
IngTotalAcuteCareBedsLic	Number	General Acute Care Beds: Total number of licensed beds
IngTotalAcuteCareBedsStaff	Number	General Acute Care Beds: Total number of staffed beds
IngTotalAcuteCareBedsIDOC	Number	General Acute Care Beds: Total days of care
IngCIPRLic	Number	Comprehensive In-Patient Rehabilitation: number of licensed beds
IngCIPRStaff	Number	Comprehensive In-Patient Rehabilitation: number of staffed beds`
IngCIPRIDOC	Number	Comprehensive In-Patient Rehabilitation: annual census, inpatient days of care
IngIHLic	Number	Inpatient Hospice: number of licensed beds
IngIHStaff	Number	Inpatient Hospice: number of staffed beds
IngIHDIC	Number	Inpatient Hospice: annual census, inpatient days of care
IngDetoxLic	Number	Detoxification: number of licensed beds
IngDetoxStaff	Number	Detoxification: number of staffed beds
IngDetoxIDOC	Number	Detoxification: annual census, inpatient days of care
IngSACDTLic	Number	Substance Abuse Treatment: number of licensed beds
IngSACDTStaff	Number	Substance Abuse Treatment: number of staffed beds
IngSACDTIDOC	Number	Substance Abuse Treatment: annual census, inpatient days of care
IngPsychLic	Number	Psychiatry: number of licensed beds
IngPsychStaff	Number	Psychiatry: number of staffed beds
IngPsychIDOC	Number	Psychiatry: annual census, inpatient days of care
IngNursingLic	Number	Nursing Facility: number of licensed beds
IngNursingStaff	Number	Nursing Facility: number of staffed beds
IngNursingIDOC	Number	Nursing Facility: annual census, inpatient days of care
IngAdultCareLic	Number	Adult Care Home: number of licensed beds
IngAdultCareStaff	Number	Adult Care Home: number of staffed beds
IngAdultCareIDOC	Number	Adult Care Home: annual census, inpatient days of care
IngOtherLic	Number	Other: number of licensed beds
IngOtherStaff	Number	Other: number of staffed beds
IngOtherIDOC	Number	Other: annual census, inpatient days of care
IngTotalLic	Number	Total: number of licensed beds
IngTotalStaff	Number	Total: number of staffed beds
IngTotalIDOC	Number	Total: annual census, inpatient days of care
IngSwingBeds	Number	Number of swing beds
IngSkilledNursing	Number	Number of skilled nursing days in swing beds
IngObservationBeds	Number	Number of unlicensed observation beds
IngServiceArea	Number	Identifies the service area where the beds are located; see tbServiceAreas

Table 3: tblCardiacServices

Field Name	Data Type	Definition
IngCardiacID	AutoNumber	Primary key
IngHospitalID	Number	Establishes table relationships
IngCampusType	Number	-1: Cumulative totals for a multi-campus hospital; 0: Hospital only has one campus; #>0: distinct campus numbers
strCampusName	Text	Name of the Campus
IngCCNumUnitsDCC	Number	Number of units of equipment: Diagnostic Cardiac Catheterization
IngCCNumUnitsICC	Number	Number of units of equipment: Interventional Cardiac Catheterization
IngCCNumUnitsEP	Number	Number of units of equipment: Electro-physiology
IngCCNumPatsUnder14DCC	Number	Number of patients age 14 and younger: Diagnostic Cardiac Catheterization
IngCCNumPatsUnder14ICC	Number	Number of patients age 14 and younger: Interventional Cardiac Catheterization
IngCCNumPatsUnder14EP	Number	Number of patients age 14 and younger: Electro-physiology
IngCCNumPats15DCC	Number	Number of patients age 15 and older: Diagnostic Cardiac Catheterization
IngCCNumPats15ICC	Number	Number of patients age 15 and older: Interventional Cardiac Catheterization
IngCCNumPats15EP	Number	Number of patients age 15 and older: Electro-physiology
IngCCNumPatsDCC	Number	Total number of patients: Diagnostic Cardiac Catheterization
IngCCNumPatsICC	Number	Total number of patients: Interventional Cardiac Catheterization
IngCCNumPatsEP	Number	Total number of patients: Electro-physiology
IngCCNumProcFixedUnder14DCC	Number	Number of procedures performed in fixed units on patients age 14 and younger: Diagnostic Cardiac Cath
IngCCNumProcFixedUnder14ICC	Number	Number of procedures performed in fixed units on patients age 14 and younger: Interventional Cardiac Cath
IngCCNumProcFixedUnder14EP	Number	Number of procedures performed in fixed units on patients age 14 and young: Electro-physiology
IngCCNumProcFixedDCC	Number	Number of procedures performed in fixed units: Diagnostic Cardiac Cath
IngCCNumProcFixedICC	Number	Number of procedures performed in fixed units: Interventional Cardiac Cath
IngCCNumProcFixedEP	Number	Number of procedures performed in fixed units: Electro-physiology
IngCCNumProcMobileDCC	Number	Number of procedures performed in mobile units: Diagnostic Cardiac Cath
IngCCNumProcMobileICC	Number	Number of procedures performed in mobile units: Interventional Cardiac Cath
IngCCNumProcMobileEP	Number	Number of procedures performed in mobile units: Electro-physiology
IngCCNumProcDCC	Number	Total number of procedures performed: Diagnostic Cardiac Cath
IngCCNumProcICC	Number	Total number of procedures performed: Interventional Cardiac Cath
IngCCNumProcEP	Number	Total number of procedures performed: Electro-physiology
strNameMobileVendor	Text	Name of mobile vendor
IngNumOpHoursPerWeek	Number	Number of 8-hour days per week the mobile unit is on-site

Table 4: tblCareTypes

Field Name	Data Type	Definition
IngCareTypeID	Number	Unique identifier for the different types of patient care
strTypesOfCare	Text	Identifies the different types

Table 5: tblCPTCodes

Field Name	Data Type	Definition
IngCPTCodeID	Number	Unique identifier of the CPTCodes table
strCPTCode	Text	The CPT code
strCPTDescript	Text	A description of the CPT code
ysnUsed	Yes/No	Is this code used in the forms?
IngEquipmentTypeID	Number	Equipment type to which the CPT code is related; see tbl EquipmentTypes
sngESTV	Number	ESTV values indicate if there is special consideration for the time required to perform special techniques

Table 6: tblCPTProcedures

Field Name	Data Type	Definition
IngCPTProcedureID	AutoNumber	Unique identifier for the CPT Procedures table
IngSiteDataID	Number	Identifies the site to which the data is related; see tblSiteData
IngCPTCodeID	Number	Identifies the CPT Code
IngCPTProcedures	Number	Number of procedures performed of a particular CPT code from a particular hospital

Table 7: tblCTData

Field Name	Data Type	Definition
IngCTDataID	AutoNumber	Primary key
IngSiteDataID	Number	Establishes table relationships
IngNumFixedCT	Number	How many fixed CT scanners does the hospital have?
ysnMobileCTContract	Yes/No	Does the hospital contract for mobile CT scanner services?
strMobileCTVendor	Text	Identify the mobile CT vendor
IngNumFixCTHeadWithout	Number	Number of head without contrast scans performed on a fixed CT scanner
IngNumFixCTHeadWith	Number	Number of head with contrast scans performed on a fixed CT scanner
IngNumFixCTHeadWithandWithout	Number	Number of head with and without contrast scans performed on a fixed CT scanner
IngNumFixCTBodyWithout	Number	Number of body without contrast scans performed on a fixed CT scanner
IngNumFixCTBodyWith	Number	Number of body with contrast scans performed on a fixed CT scanner

Field Name	Data Type	Definition
IngNumFixCTBodyWithandWithout	Number	Number of body with and without contrast scans performed on a fixed CT scanner
IngNumFixCTBiopsy	Number	Number of biopsy in addition to body scan with or without contrast on a fixed CT scanner
IngNumFixCTAbscess	Number	Number of abscess drainage in addition to body scan with or without contrast on a fixed CT scanner
sngHECTFixCTHeadWithout	Number	Number of HECT units for head without contrast scans performed on a fixed CT scanner
sngHECTFixCTHeadWith	Number	Number of HECT units for head with contrast scans performed on a fixed CT scanner
sngHECTFixCTHeadWithandWithout	Number	Number of HECT units for head with and without contrast scans performed on a fixed CT scanner
sngHECTFixCTBodyWithout	Number	Number of HECT units for body without contrast scans performed on a fixed CT scanner
sngHECTFixCTBodyWith	Number	Number of HECT units for body with contrast scans performed on a fixed CT scanner
sngHECTFixCTBodyWithandWithout	Number	Number of HECT units for body with and without contrast scans performed on a fixed CT scanner
sngHECTFixCTBiopsy	Number	Number of HECT units for biopsy in addition to body scan with or without contrast on a fixed CT scanner
sngHECTFixCTAbscess	Number	Number of HECT units for abscess drainage in addition to body scan with or without contrast on a fixed CT scanner
IngNumMobileCTHeadWithout	Number	Number of head without contrast scans performed on a Mobile CT scanner
IngNumMobileCTHeadWith	Number	Number of head with contrast scans performed on a Mobile CT scanner
IngNumMobileCTHeadWithandWithout	Number	Number of head with and without contrast scans performed on a Mobile CT scanner
IngNumMobileCTBodyWithout	Number	Number of body without contrast scans performed on a Mobile CT scanner
IngNumMobileCTBodyWith	Number	Number of body with contrast scans performed on a Mobile CT scanner
IngNumMobileCTBodyWithandWithout	Number	Number of body with and without contrast scans performed on a Mobile CT scanner
IngNumMobileCTBiopsy	Number	Number of biopsy in addition to body scan with or without contrast on a Mobile CT scanner
IngNumMobileCTAbscess	Number	Number of abscess drainage in addition to body scan with or without contrast on a Mobile CT scanner
sngHECTMobileCTHeadWithout	Number	Number of HECT units for head without contrast scans performed on a Mobile CT scanner
sngHECTMobileCTHeadWith	Number	Number of HECT units for head with contrast scans performed on a Mobile CT scanner

Field Name	Data Type	Definition
sngHECTMobileCTHeadWithandWithout	Number	Number of HECT units for head with and without contrast scans performed on a Mobile CT scanner
sngHECTMobileCTBodyWithout	Number	Number of HECT units for body without contrast scans performed on a Mobile CT scanner
sngHECTMobileCTBodyWith	Number	Number of HECT units for body with contrast scans performed on a Mobile CT scanner
sngHECTMobileCTBodyWithandWithout	Number	Number of HECT units for body with and without contrast scans performed on a Mobile CT scanner
sngHECTMobileCTBiopsy	Number	Number of HECT units for biopsy in addition to body scan with or without contrast on a Mobile CT scanner
sngHECTMobileCTAbscess	Number	Number of HECT units for abscess drainage in addition to body scan with or without contrast on a Mobile CT scanner

Table 8: tblDaysOfCare

Field Name	Data Type	Definition
IngDaysOfCareID	AutoNumber	Primary key
IngHospitalID	Number	Establishes table relationships
IngMentalHealthCareID	Number	Identifies the type of care received by the patient
IngAgeLevelID	Number	Identifies the age level
IngLocationID	Number	Identifies the location the patient was from
IngDaysOfCare	Number	The total number of days a patient from a particular location received specific mental health care from a particular hospital

Table 9: tblEquipmentProcedures

Field Name	Data Type	Definition
IngEquipmentProceduresID	AutoNumber	Primary key
IngSiteDataID	Number	Establishes table relationships
IngEquipmentSpecificID	Number	Identifies the type of equipment
IngDuplEntry	Number	If the entry is duplicate to other entries; No: 0 Yes: 1
IngUnits	Number	Number of units
IngInProcWithContrast	Number	Number of inpatient procedures with contrast
IngInProcWithout	Number	Number of inpatient procedures without contrast
IngInProcTotal	Number	Total number of inpatient procedures
IngOutProcWithContrast	Number	Number of outpatient procedures with contrast
IngOutProcWithout	Number	Number of outpatient procedures without contrast

Field Name	Data Type	Definition
IngOutProcTotal	Number	Total number of outpatient procedures
IngProcTotal	Number	Total number of procedures
strMobileProvider	Text	Name of the mobile provider
memNotes	Memo	Notes on the entry

Table 10: tblEquipmentSpecific

Field Name	Data Type	Definition
IngEquipmentSpecificID	AutoNumber	Unique identifier for the EquipmentSpecific table
strEquipmentSpecific	Text	Identifies the specific type of equipment
IngEquipmentTypeID	Number	Identifies the type of equipment; see tblEquipmentTypes

Table 11: tblEquipmentTypes

Field Name	Data Type	Definition
IngEquipmentTypeID	Number	Unique identifier for the Equipment Types table
strEquipmentType	Text	Identifies the different types of equipment

Table 12: tblFacilities

Field Name	Data Type	Definition
IngFacilityID	AutoNumber	Primary key
IngHospitalID	Number	Establishes table relationships
strFacilityName	Text	Name of the facility
strFacilityAddress	Text	Address of the facility
strFacilityType	Text	Type of Business/Service

Table 13: tblFacilityData

Field Name	Data Type	Definition
IngFacilityDataID	AutoNumber	Primary key
IngHospitalID	Number	Establishes table relationships
intLicAcCareBedsAdmissions	Number	Admissions to Licensed Acute Care Beds
intLicAcCareBedsDischarges	Number	Discharges from Licensed Acute Care Beds
sngAverageDailyCensus	Number	Average Daily Census
ysnLicensedBedChange	Yes/No	Was there a permanent change in the total number of licensed beds during the reporting period?
IngCurrentLicensedBeds	Number	What is the current number of licensed beds?
strReasonforChange	Text	Please state reason(s) which may have affected the change in bed complement
IngObservations	Number	Number of patients in observation status and not admitted as inpatients, excluding Emergency Department patients
ysnDesignatedTraumaCenter	Yes/No	Are you a designated trauma center?
IngTraumaLevel	Number	What is your trauma designation level?
ysnCriticalAccessHospital	Yes/No	Are you a critical access hospital (CAH)?
ysnLongTermCareHospital	Yes/No	Are you a long term care hospital (LTCH)?
strAccreditingBody1	Text	Specify the accrediting body
dtmAccreditingLastSurvey1	Date/Time	Date of the last survey by the accrediting body
strAccreditingBody2	Text	Specify the accrediting body
dtmAccreditingLastSurvey2	Date/Time	Date of the last survey by the accrediting body
ysnTJCAccredited	Yes/No	Is this facility TJC accredited?
dtmTJCExpirationDate	Date/Time	Expiration Date for TJC accreditation
ysnDNVAccredited	Yes/No	Is this facility DNV accredited?
dtmDNVExpirationDate	Date/Time	Expiration Date for DNV accreditation
ysnAOAAccredited	Yes/No	Is this facility AOA accredited?
dtmAOAExpirationDate	Date/Time	Expiration Date for AOA Accreditation
ysnMedicareProvider	Yes/No	Are you a Medicare deemed provider?

Table 14: tblHospiceData

Field Name	Data Type	Definition
IngHospiceDataID	AutoNumber	Primary key
IngHospitalID	Number	Establishes table relationships
IngLocationID	Number	Identifies the county of residence of the patients; see tblLocations
IngAge0-17	Number	Number of patients ages 0-17 from the county served
IngAge18-40	Number	Number of patients ages 18-40 from the county served
IngAge41-59	Number	Number of patients ages 41-59 from the county served
IngAge60-64	Number	Number of patients ages 60-64 from the county served
IngAge65-74	Number	Number of patients ages 65-74 from the county served
IngAge75-84	Number	Number of patients ages 75-84 from the county served
IngAge85+	Number	Number of patients ages 85+ from the county served
IngTotal	Number	Total number of patients from the county served
IngDaysOfCare	Number	Total days of care from the county served
IngDeaths	Number	Total number of deaths from the county served

Table 15: tblHospitals

Field Name	Data Type	Definition
IngHospitalID	AutoNumber	Unique identifier of the Hospitals
strLicenceNumber	Text	License number of the hospital
strLegalIdentity	Text	Full legal name of the corporation, partnership, individual, or other legal entity owning the enterprise or service.
strDBA	Text	Doing Business As
strPrimaryName	Text	Primary name of the legal entity
strOtherName1	Text	Optional other name for the legal entity
strOtherName2	Text	Optional other name for the legal entity
strAddMailStreet	Text	Facility's Mailing Street Address
strAddMailCity	Text	Facility's Mailing City
strAddMailST	Text	Facility's Mailing State
strAddMailZip	Text	Facility's Mailing Zip Code
strAddSiteStreet	Text	Facility's Site Street Address
strAddSiteCity	Text	Facility's Site City
strAddSiteST	Text	Facility's Site State
strAddSiteZip	Text	Facility's Site Zip Code
IngCounty	Number	Identifies the county by number; see tblLocations
strTelephone	Text	Facility's Telephone Number
strFax	Text	Facility's Fax Number
strDirectorName	Text	Facility's Director
strDirectorTitle	Text	Facility's Director's Title
strCEOName	Text	Designated agent responsible to the governing body for the management of the licensed facility
strCEOTitle	Text	Title of the CEO
strContactName	Text	Name of the person to contact for any questions regarding this form
strContactTelephone	Text	Telephone Number of the person to contact for any questions
strContactEmail	Text	Email address of the person to contact for any questions
strNPI	Text	Primary National Provider Identifier
strOtherNPI	Text	Additional NPI

Table 16: tblLocations

Field Name	Data Type	Definition
IngLocationID	Number	Unique identifier for each location
strLocation	Text	Location

Table 17: tblMentalHealth

Field Name	Data Type	Definition
IngMentalHealthID	AutoNumber	Primary key
IngHospitalID	Number	Establishes table relationships
strPsychiatricCareName	Text	Name of psychiatric care unit, if different from the hospital
strPsychiatricCareAddress	Text	Address of the psychiatric care unit
strPsychiatricCareDirector	Text	Director of the psychiatric care unit
strMHSA1100Location	Text	Location of services for partial hospitalization for individuals who are acutely mentally ill
strMHSA1200Location	Text	Location of services for psychosocial rehabilitation facilities
IngMHSA12000-12	Number	Number of beds for .1200 assigned to ages 0-12
IngMHSA120013-17	Number	Number of beds for .1200 assigned to ages 13-17
IngMHSA12000-17	Number	Number of beds for .1200 assigned to ages 0-17
IngMHSA120018+	Number	Number of beds for .1200 assigned to ages 18+
IngMHSA1200Total	Number	Total number of beds for .1200
strMHSA1300Location	Text	Location of residential treatment facilities for children
IngMHSA13000-12	Number	Number of beds for .1300 assigned to ages 0-12
IngMHSA130013-17	Number	Number of beds for .1300 assigned to ages 13-17
IngMHSA13000-17	Number	Number of beds for .1300 assigned to ages 0-17
IngMHSA1300Total	Number	Total number of beds for .1300
strMHSA1400Location	Text	Location of day treatment for children
strMHSA1500Location	Text	Location of intensive residential treatment facilities
IngMHSA15000-12	Number	Number of beds for .1500 assigned to ages 0-12
IngMHSA150013-17	Number	Number of beds for .1500 assigned to ages 13-17
IngMHSA15000-17	Number	Number of beds for .1500 assigned to ages 0-17
IngMHSA1500Total	Number	Total number of beds for .1500
strMHSA5000Location	Text	Location of services of facility based crisis center
IngMHSA50000-12	Number	Number of beds for .5000 assigned to ages 0-12
IngMHSA500013-17	Number	Number of beds for .5000 assigned to ages 13-17
IngMHSA50000-17	Number	Number of beds for .5000 assigned to ages 0-17
IngMHSA500018+	Number	Number of beds for .5000 assigned to ages 18+
IngMHSA5000Total	Number	Total number of beds for .5000
strMHSA5200Location	Text	Location of inpatient unit
IngMHSA52000-12	Number	Number of beds for .5200 assigned to ages 0-12
IngMHSA520013-17	Number	Number of beds for .5200 assigned to ages 13-17
IngMHSA52000-17	Number	Number of beds for .5200 assigned to ages 0-17
IngMHSA520018+	Number	Number of beds for .5200 assigned to ages 18+
IngMHSA5200Total	Number	Total number of beds for .5200

Field Name	Data Type	Definition
strMHSA3100Location	Text	Location of nonhospital medical detoxification
IngMHSA31000-12	Number	Number of beds for .3100 assigned to ages 0-12
IngMHSA310013-17	Number	Number of beds for .3100 assigned to ages 13-17
IngMHSA31000-17	Number	Number of beds for .3100 assigned to ages 0-17
IngMHSA310018+	Number	Number of beds for .3100 assigned to ages 18+
IngMHSA3100Total	Number	Total number of beds for .3100
strMHSA3200Location	Text	Location of social setting detoxification
IngMHSA32000-12	Number	Number of beds for .3200 assigned to ages 0-12
IngMHSA320013-17	Number	Number of beds for .3200 assigned to ages 13-17
IngMHSA32000-17	Number	Number of beds for .3200 assigned to ages 0-17
IngMHSA320018+	Number	Number of beds for .3200 assigned to ages 18+
IngMHSA3200Total	Number	Total number of beds for .3200
strMHSA3300Location	Text	Location of outpatient detoxification
strMHSA3400Location	Text	Location of residential treatment/rehabilitation for individuals with substance abuse disorders
IngMHSA34000-12	Number	Number of beds for .3400 assigned to ages 0-12
IngMHSA340013-17	Number	Number of beds for .3400 assigned to ages 13-17
IngMHSA34000-17	Number	Number of beds for .3400 assigned to ages 0-17
IngMHSA340018+	Number	Number of beds for .3400 assigned to ages 18+
IngMHSA3400Total	Number	Total number of beds for .3400
strMHSA3500Location	Text	Location of outpatient facilities with substance abuse disorders
strMHSA3600Location	Text	Location of outpatient narcotic addiction treatment
strMHSA3700Location	Text	Location of day treatment facilities for individuals with substance abuse disorders
strMHSA5200BLocation	Text	Location of inpatient hospital unit for individuals who have substance abuse disorders
IngMHSA5200BTreatmentBeds	Number	Number of treatment beds in the inpatient hospital unit
IngMHSA5200BDetoxBeds	Number	Number of medical detox beds in the inpatient hospital unit
IngMHSA5200B0-12	Number	Number of beds for .5200 assigned to ages 0-12
IngMHSA5200B13-17	Number	Number of beds for .5200 assigned to ages 13-17
IngMHSA5200B0-17	Number	Number of beds for .5200 assigned to ages 0-17
IngMHSA5200B18+	Number	Number of beds for .5200 assigned to ages 18+
IngMHSA5200BTotal	Number	Total number of beds for .5200

Table 18: tblMentalHealthCare

Field Name	Data Type	Definition
IngMentalHealthCareID	Number	Unique identifier for the types of mental health care
strTypeOfMentalHealthCare	Text	Identifies the type of mental health care received

Table 19: tblOtherServices

Field Name	Data Type	Definition
IngOtherServicesID	AutoNumber	Primary key
IngHospitalID	Number	Establishes table relationships
IngNumPatientsRadOnc	Number	Number of unduplicate patients who receive radiation oncology treatments
IngNumLinAcc	Number	Total number of linear accelerators
IngNumLinAccSR	Number	Number of linear accelerators configured for stereotactic radiosurgery
IngNumCyberKnife	Number	Number of CyberKnife Systems, Gamma Knife, or other specialized Linear Accelerators
strKnifeManufacturer	Text	Manufacturer of the equipment
ysnTelemedicine	Yes/No	Does your facility utilize telemedicine to have images read at another facility?
ysnReadTelemedicine	Yes/No	Does your facility read telemedicine images?
ysnCardiacRehabProgram	Yes/No	Does your facility have a cardiac rehab program (outpatient)?
ysnChemotherapy	Yes/No	Does your facility provide Chemotherapy?
ysnClinicalPsychologyServices	Yes/No	Does your facility provide Clinical Psychology Services?
ysnDentalServices	Yes/No	Does your facility provide dental services?
ysnRehabilitationOutpatientUnit	Yes/No	Does your facility have a rehabilitation outpatient unit?
ysnPodiatricServices	Yes/No	Does your facility provide podiatrics services?
ysnGeneticCounselingService	Yes/No	Does your facility provide genetic counseling services?
ysnAcuteDialysis	Yes/No	Does your facility have acute dialysis stations?
IngNumAcuteDialysisStations	Number	How many acute dialysis stations do you have?

Table 20: tblOwnership

Field Name	Data Type	Definition
IngOwnerID	AutoNumber	Primary key
IngHospitalID	Number	Establishes table relationships
strOwnerName	Text	Name of the legal entity with ownership responsibility and liability
strOwnerAdd	Text	Owner's Street Address
strOwnerCity	Text	Owner's City
strOwnerST	Text	Owner's State
strOwnerZip	Text	Owner's Zip Code
strOwnerTelephone	Text	Owner's Telephone
strOwnerFax	Text	Owner's Fax
strOwnerCEO	Text	Owner's CEO
ysnPartofHealthSystem	Yes/No	Is your facility part of a Health System?
strHealthSystemName	Text	Name of the Health System
strHealthSystemCEO	Text	CEO of the Health System
ysnForProfit	Yes/No	Is the legal entity for profit?
ysnCorporation	Yes/No	Is the legal entity a Corporation?
ysnProprietorship	Yes/No	Is the legal entity a Proprietorship?
ysnLLP	Yes/No	Is the legal entity a LLP?
ysnLLC	Yes/No	Is the legal entity a LLC?
ysnPartnership	Yes/No	Is the legal entity a Partnership?
ysnGovernmentUnit	Yes/No	Is the legal entity a government unit?
ysnLease	Yes/No	Does the legal entity lease the building from which services are offered?
strBuildingOwner	Text	Name of the building owner
ysnManagementContract	Yes/No	Is the business operated under a management contract?
strMgmtCompName	Text	Name of the management company
strMgmtCompAdd	Text	Street Address of the management company
strMgmtCompCity	Text	City of the management company
strMgmtCompST	Text	State of the management company
strMgmtCompZip	Text	Zip Code of the management company
strMgmtCompTelephone	Text	Telephone of the management company
strVPNursingPatientCare	Text	Vice President of Nursing and Patient Care Services
strDirectorofPlanning	Text	Director of Planning

Table 21: tblPatientOrigins

Field Name	Data Type	Definition
IngPatientOriginID	AutoNumber	Primary key
IngHospitalID	Number	Establishes table relationships
IngLocationID	Number	Identifies the location the patient was from that was treated
IngCareTypeID	Number	Identifies the type of treatment the patient received
IngNumberofPatients	Number	Identifies the number of patients treated by the same hospital, from the same location, with the same type of care

Table 22: tblReimbursementSource

Field Name	Data Type	Definition
IngReimburseID	AutoNumber	Primary key
IngHospitalID	Number	Establishes table relationships
strCampus	Text	Identify the campus if the information is provided
IngCampusType	Number	-1: Cumulative totals for a multi-campus hospital; 0: Hospital only has one campus; # > 0: distinct campus numbers
IngCharityCareIDC	Number	Self Pay/Indigent/Charity: Inpatient days of care
IngCharityCareEV	Number	Self Pay/Indigent/Charity: Emergency visits
IngCharityCareOV	Number	Self Pay/Indigent/Charity: Outpatient visits
IngCharityCareISC	Number	Self Pay/Indigent/Charity: Inpatient surgical cases
IngCharityCareASC	Number	Self Pay/Indigent/Charity: Ambulatory surgical cases
IngCommInsIDC	Number	Commercial Insurance: Inpatient days of care
IngCommInsEV	Number	Commercial Insurance: Emergency visits
IngCommInsOV	Number	Commercial Insurance: Outpatient visits
IngCommInsISC	Number	Commercial Insurance: Inpatient surgical cases
IngCommInsASC	Number	Commercial Insurance: Ambulatory surgical cases
IngMedicaidIDC	Number	Medicaid: Inpatient days of care
IngMedicaidEV	Number	Medicaid: Emergency visits
IngMedicaidOV	Number	Medicaid: Outpatient visits
IngMedicaidISC	Number	Medicaid: Inpatient surgical cases
IngMedicaidASC	Number	Medicaid: Ambulatory surgical cases
IngMedicareIDC	Number	Medicare & Medicare Managed Care: Inpatient days of care
IngMedicareEV	Number	Medicare & Medicare Managed Care: Emergency visits
IngMedicareOV	Number	Medicare & Medicare Managed Care: Outpatient visits
IngMedicareISC	Number	Medicare & Medicare Managed Care: Inpatient surgical cases
IngMedicareASC	Number	Medicare & Medicare Managed Care: Ambulatory surgical cases
IngManagedCareIDC	Number	Managed Care: Inpatient days of care
IngManagedCareEV	Number	Managed Care: Emergency visits

Field Name	Data Type	Definition
IngManagedCareOV	Number	Managed Care: Outpatient visits
IngManagedCareISC	Number	Managed Care: Inpatient surgical cases
IngManagedCareASC	Number	Managed Care: Ambulatory surgical cases
strOtherCare	Text	Other Reimbursement Source: please specify
IngOtherIDC	Number	Other: Inpatient days of care
IngOtherEV	Number	Other: Emergency visits
IngOtherOV	Number	Other: Outpatient visits
IngOtherISC	Number	Other: Inpatient surgical cases
IngOtherASC	Number	Other: Ambulatory surgical cases
IngTotalIDC	Number	Total: Inpatient days of care
IngTotalEV	Number	Total: Emergency visits
IngTotalOV	Number	Total: Outpatient visits
IngTotalISC	Number	Total: Inpatient surgical visits
IngTotalASC	Number	Total: Ambulatory surgical visits
curMedicaidCosts	Currency	Unreimbursed Medicaid Costs: amount
dblMedicaidCosts	Number	Unreimbursed Medicaid Costs: percent of total costs
curCharityCare	Currency	Unreimbursed Charity Care: amount
dblCharityCare	Number	Unreimbursed Charity Care: percent of total costs
dblCharityCareNetRev	Number	Unreimbursed Charity Care: percent of net revenues
curBadDebt	Currency	Bad Debt: amount
dblBadDebtNetRev	Number	Bad Debt: percent of net revenues

Table 23: tblServiceAreas

Field Name	Data Type	Definition
IngLocationID	Number	Unique identifier for the tblServiceAreas table
strServiceArea	Text	Service Area
IngBedsOrderView	Number	Numerical order that the service area should be presented; 999 is not included in the service area
IngORsOrderView	Number	Numerical order that the service area should be presented; 999 is not included in the service area

Table 24: tblServicesFacilities

Field Name	Data Type	Definition
IngServicesID	AutoNumber	Primary key
IngHospitalID	Number	Establishes table relationships
strCampus	Text	Identifies the campus; leave blank if cumulative information
IngCampusType	Number	-1: Cumulative totals for a multi-campus hospital; 0: Hospital only has one campus; #>0: distinct campus numbers
IngLiveBirthsVD	Number	Number of live births - vaginal deliveries
IngLiveBirthsCS	Number	Number of births by cesarean section
IngStillBirths	Number	Number of stillbirths
IngDeliveryRoomsDO	Number	Number of infants born in the delivery rooms - delivery only, not cesarean section
IngDeliveryRoomsLDR	Number	Number of infants born in the labor and delivery, recovery rooms
IngDeliveryRoomsLDRP	Number	Number of infants born in the delivery rooms - LDRP
IngBassinets	Number	Number of normal newborn bassinets (level 1 neonatal services)
IngAbortionProcsPerYear	Number	Number of abortion procedures performed during the year
IngNumEDRooms	Number	Number of emergency department exam rooms
IngNumTraumaRooms	Number	Number of emergency department trauma rooms
IngNumFastTrackRooms	Number	Number of emergency department fast track rooms
IngNumUrgentCareRooms	Number	Number of emergency department urgent care rooms
IngNumEDVisits	Number	Total number of ED visits for the reporting period
IngNumAdmitsFromED	Number	Total number of admits from the ED for the reporting period
IngNumUCVisits	Number	Total number of urgent care visits for the reporting period
ysnIsED247	Yes/No	Does the ED provide services 24 hours a day 7 days per week?
strEDHoursSunOpen	Text	What time does the ED open on Sunday?
strEDHoursSunClose	Text	What time does the ED close on Sunday?
strEDHoursMonOpen	Text	What time does the ED open on Monday?
strEDHoursMonClose	Text	What time does the ED close on Monday?
strEDHoursTuesOpen	Text	What time does the ED open on Tuesday?
strEDHoursTuesClose	Text	What time does the ED close on Tuesday?
strEDHoursWedOpen	Text	What time does the ED open on Wednesday?
strEDHoursWedClose	Text	What time does the ED close on Wednesday?
strEDHoursThurOpen	Text	What time does the ED open on Thursday?
strEDHoursThurClose	Text	What time does the ED close on Thursday?
strEDHoursFriOpen	Text	What time does the ED open on Friday?
strEDHoursFriClose	Text	What time does the ED close on Friday?
strEDHoursSatOpen	Text	What time does the ED open on Saturday?
strEDHoursSatClose	Text	What time does the ED close on Saturday?
ysnIsPhy247	Yes/No	Is a physician on duty in your ED 24 hours a day 7 days per week?

Field Name	Data Type	Definition
strPhyHoursSunOpen	Text	What time does the physician go on duty on Sunday?
strPhyHoursSunClose	Text	What time does the physician go off duty on Sunday?
strPhyHoursMonOpen	Text	What time does the physician go on duty on Monday?
strPhyHoursMonClose	Text	What time does the physician go off duty on Monday?
strPhyHoursTuesOpen	Text	What time does the physician go on duty on Tuesday?
strPhyHoursTuesClose	Text	What time does the physician go off duty on Tuesday?
strPhyHoursWedOpen	Text	What time does the physician go on duty on Wednesday?
strPhyHoursWedClose	Text	What time does the physician go off duty on Wednesday?
strPhyHoursThurOpen	Text	What time does the physician go on duty on Thursday?
strPhyHoursThurClose	Text	What time does the physician go off duty on Thursday?
strPhyHoursFriOpen	Text	What time does the physician go on duty on Friday?
strPhyHoursFriClose	Text	What time does the physician go off duty on Friday?
strPhyHoursSatOpen	Text	What time does the physician go on duty on Saturday?
strPhyHoursSatClose	Text	What time does the physician go off duty on Saturday?
ysnMedicalAirService	Yes/No	Does the facility operate an air ambulance service?
IngOwnedLeasedService	Number	Owned or leased air ambulance service? 1 = Owned, 2 = Leased
IngRotaryNum	Number	Number of rotary aircraft
IngRotaryOwned	Number	Number of rotary aircraft owned
IngRotaryLeased	Number	Number of rotary aircraft leased
IngRotaryTransports	Number	Number of transports
IngFixedWingNum	Number	Number of fixed wing aircraft
IngFixedWingOwned	Number	Number of fixed wing aircraft owned
IngFixedWingLeased	Number	Number of fixed wing aircraft leased
IngFixedWingTransports	Number	Number of fixed wing transports
ysnBloodBankTransfusion	Yes/No	Do you have blood bank and transfusion services?
ysnHistopathologyLab	Yes/No	Do you have a histopathology laboratory?
ysnHIVLab	Yes/No	Do you have HIV Laboratory testing?
IngHIVSerology	Number	Number of HIV Serology tests
IngHIVCulture	Number	Number of HIV Culture tests
ysnOrganBank	Yes/No	Do you have an organ bank?
ysnPapSmear	Yes/No	Do you have pap smear screening?
IngNumTransplantMarrowAll	Number	Number of bone marrow - allogeneic transplants
IngNumTransplantMarrowAuto	Number	Number of bone marrow - autologous transplants
IngNumTransplantCornea	Number	Number of cornea transplants
IngNumTransplantHeart	Number	Number of heart transplants
IngNumTransplantHeartLung	Number	Number of heart/lung transplants
IngNumTransplantKidneyLiver	Number	Number of kidney/liver transplants
IngNumTransplantLiver	Number	Number of liver transplants

Field Name	Data Type	Definition
IngNumTransplantHeartLiver	Number	Number of heart/liver transplants
IngNumTransplantHeartKidney	Number	Number of heart/kidney transplants
IngNumTransplantKidney	Number	Number of kidney transplants
IngNumTransplantLung	Number	Number of lung transplants
IngNumTransplantPancreas	Number	Number of pancreas transplants
IngNumTransplantPancreasKidney	Number	Number of pancreas/kidney transplants
IngNumTransplantPancreasLiver	Number	Number of pancreas/liver transplants.
IngNumTransplantOther	Number	Number of other transplants
ysnLivingDonorTransplants	Yes/No	Do you perform living donor transplants?

Table 25: tblSiteData

Field Name	Data Type	Definition
IngSiteDataID	AutoNumber	Primary key
IngHospitalID	Number	Establishes table relationships
IngCampusType	Number	-1: Cumulative totals for a multi-campus hospital; 0: Hospital only has one campus; #>0: distinct campus numbers
strName	Text	Name of the site
strSiteAddress	Text	Address of the site
strSiteCity	Text	City of the site
strSiteState	Text	State of the site
strSiteZipCode	Text	Zipcode of the site
IngCounty	Number	Identifies the county where the site is located; see tblLocation
IngMRIServiceSite	Number	Identifies the MRI service area; see tblLocation
IngPETServiceSite	Number	Identifies the PET service area; see tblLocation
IngLithoServiceSite	Number	Identifies the Lithotripsy service area; see tblLocation
IngLinacServiceSite	Number	Identifies the Linear Accelerator service area; see tblLocation
IngNumPatients	Number	Identifies the number of linear accelerator patients treated at the service site

Table 26: tblSurgical

Field Name	Data Type	Definition
IngSurgeryID	AutoNumber	Primary key
IngHospitalID	Number	Establishes table relationships
strCampusName	Text	Name of the campus
IngCampusType	Number	-1: Cumulative totals for a multi-campus hospital; 0: Hospital only has one campus; #>0: distinct campus numbers
IngOHSNumHLBypassMachines	Number	Number of Heart-Lung Bypass Machines
IngOHSNumHLBypassProcs	Number	Total annual number of open heart surgery procedures utilizing heart-lung bypass machine
IngOHSNumHLNoBypassProcs	Number	Total annual number of open heart surgery procedures done without utilizing a heart-lung bypass machine
IngOHSTotalOHProcs	Number	Total open heart surgery procedures
IngOHSNumHLBypassProcsUnder14	Number	Total number of procedures utilizing a heart-lung bypass machine on patients age 14 and under
IngOHSTotalOHProcsUnder14	Number	Total number of open heart surgeries that do not utilize a heart-lung bypass machine on patients age 14 and under

Table 27: tblSurgicalAvailability

Field Name	Data Type	Definition
IngSurgeryAvailabilityID	AutoNumber	Primary key
IngHospitalID	Number	Establishes table relationships
strCampusName	Text	Name of the campus
IngCampusType	Number	-1: Cumulative totals for a multi-campus hospital; 0: Hospital only has one campus; #>0: distinct campus numbers
dbIAvgHoursPerDay	Number	Average hours per day routinely scheduled for use
dbIAvgDaysPerYear	Number	Average number of days per year routinely scheduled for use
dbIAvgCaseTimeInpatient	Number	Average case time in minutes for inpatient cases
dbIAvgCaseTimeAmbulatory	Number	Average case time in minutes for ambulatory cases

Table 28: tblSurgicalCases

Field Name	Data Type	Definition
IngSurgeryCasesID	AutoNumber	Primary key
IngHospitalID	Number	Establishes table relationships
strCampusName	Text	Name of the campus
IngCampusType	Number	-1: Cumulative totals for a multi-campus hospital; 0: Hospital only has one campus; # >0: distinct campus numbers
IngCasesCardioInpatient	Number	Cardiothoracic: number of inpatient cases
IngCasesCardioAmbulatory	Number	Cardiothoracic: number of ambulatory cases.
IngCasesOpenHeartInpatient	Number	Open Heart Surgery: number of inpatient cases
IngCasesGeneralInpatient	Number	General Surgery: number of inpatient cases
IngCasesGeneralAmbulatory	Number	General Surgery: number of ambulatory cases
IngCasesNeuroInpatient	Number	Neurosurgery: number of inpatient cases
IngCasesNeuroAmbulatory	Number	Neurosurgery: number of ambulatory cases
IngCasesObGynInpatient	Number	Obstetrics and GYN: number of inpatient cases
IngCasesObGynAmbulatory	Number	Obstetrics and GYN: number of ambulatory cases
IngCasesOpthInpatient	Number	Ophthalmology: number of inpatient cases
IngCasesOpthAmbulatory	Number	Ophthalmology: number of ambulatory cases
IngCasesOralInpatient	Number	Oral Surgery: number of inpatient cases
IngCasesOralAmbulatory	Number	Oral Surgery: number of ambulatory cases
IngCasesOrthoInpatient	Number	Orthopedics: number of inpatient cases
IngCasesOrthoAmbulatory	Number	Orthopedics: number of ambulatory cases
IngCasesOtolaryInpatient	Number	Otolaryngology: number of inpatient cases
IngCasesOtolaryAmbulatory	Number	Otolaryngology: number of ambulatory cases
IngCasesPlasticInpatient	Number	Plastic Surgery: number of inpatient cases
IngCasesPlasticAmbulatory	Number	Plastic Surgery: number of ambulatory cases
IngCasesUrologyInpatient	Number	Urology: number of inpatient cases
IngCasesUrologyAmbulatory	Number	Urology: number of ambulatory cases
IngCasesVascularInpatient	Number	Vascular: number of inpatient cases
IngCasesVascularAmbulatory	Number	Vascular: number of ambulatory cases
strCasesOtherType	Text	Other Surgeries
IngCasesOtherInpatient	Number	Other: number of inpatient cases
IngCasesOtherAmbulatory	Number	Other: number of ambulatory cases
strCasesOtherType2	Text	Other Surgeries
IngCasesOtherInpatient2	Number	Other: number of inpatient cases
IngCasesOtherAmbulatory2	Number	Other: number of ambulatory cases
IngCSecsInCSecORInpatient	Number	Number of C-Section's performed in dedicated C-Section ORs
IngCSecsNotInCSecORInpatient	Number	Number of C-Section's performed in other ORs

Field Name	Data Type	Definition
IngCasesTotalInpatient	Number	Total number of inpatient cases
IngCasesTotalAmbulatory	Number	Total number of ambulatory cases
dblAvgHoursPerDay	Number	Not currently used
dblAvgDaysPerYear	Number	Not currently used
dblAvgCaseTimeInpatient	Number	Not currently used
dblAvgCaseTimeAmbulatory	Number	Not currently used

Table 29: tblSurgicalGIRooms

Field Name	Data Type	Definition
IngSurgicalGIRoomsID	AutoNumber	Primary key
IngHospitalID	Number	Establishes table relationships
IngCampusType	Number	-1: Cumulative totals for a multi-campus hospital; 0: Hospital only has one campus; #>0: distinct campus numbers
strCampusName	Text	Name of the campus
IngNumGIEndoRooms	Number	Number of gastrointestinal endoscopy rooms
IngNumGIEndoCases	Number	Number of gastrointestinal endoscopy cases
IngNumGIEndoInCases	Number	Number of inpatient gastrointestinal endoscopy cases
IngNumGIEndoOutCases	Number	Number of outpatient gastrointestinal endoscopy cases
IngNumNonGIEndoCases	Number	Number of non-gastrointestinal endoscopy cases
IngNumNonGIEndoInCases	Number	Number of inpatient non-gastrointestinal endoscopy cases
IngNumNonGIEndoOutCases	Number	Number of outpatient non-gastrointestinal endoscopy cases
IngTotalEndoCases	Number	Total number of endoscopy cases
IngTotalEndoInCases	Number	Total number of inpatient endoscopy cases
IngTotalEndoOutCases	Number	Total number of outpatient endoscopy cases
IngNumGIEndoProcs	Number	Number of gastrointestinal endoscopy procedures
IngNumGIEndoInProcs	Number	Number of inpatient gastrointestinal endoscopy procedures
IngNumGIEndoOutProcs	Number	Number of outpatient gastrointestinal endoscopy procedures
IngNumNonGIEndoProcs	Number	Number of non-gastrointestinal endoscopy procedures
IngNumNonGIEndoInProcs	Number	Number of inpatient non-gastrointestinal endoscopy procedures
IngNumNonGIEndoOutProcs	Number	Number of outpatient non-gastrointestinal endoscopy procedures
IngTotalEndoProcs	Number	Total number of endoscopy procedures
IngTotalEndoInProcs	Number	Total number of inpatient endoscopy procedures
IngTotalEndoOutProcs	Number	Total number of outpatient endoscopy procedures
ysnAppAddGIRoomsCertOfNeed	Yes/No	Does this facility have approval for additional GI Endoscopy rooms that are being developed pursuant to a Certificate of Need?
intNumAdditionalGIRoomsCertOfNeed	Number	Number of additional GI Endoscopy rooms
strCONProjectID	Text	CON Project ID Number
IngNumProcRooms	Number	Total number of procedure rooms

Table 30: tblSurgicalNonSurgCases

Field Name	Data Type	Definition
IngSurgicalNonSurgCasesID	AutoNumber	Primary key
IngHospitalID	Number	Establishes table relationships
IngCampusType	Number	-1: Cumulative totals for a multi-campus hospital; 0: Hospital only has one campus; #>0: distinct campus numbers
strCampusName	Text	Name of the campus
IngNumCasesPainManagementInpatient	Number	Number of pain management, inpatient cases
IngNumCasesPainManagementAmbulatory	Number	Number of pain management, ambulatory cases
IngNumCasesCystoscopyInpatient	Number	Number of cystoscopy, inpatient cases
IngNumCasesCystoscopyAmbulatory	Number	Number cystoscopy, ambulatory cases
IngNumCasesNonGIEndoInpatient	Number	Number of non-gastrointestinal endoscopies, inpatient cases
IngNumCasesNonGIEndoAmbulatory	Number	Number of non-gastrointestinal endoscopies, ambulatory cases
IngNumCasesGIEndoInpatient	Number	Number of gastrointestinal endoscopies, inpatient cases
IngNumCasesGIEndoAmbulatory	Number	Number of gastrointestinal endoscopies, ambulatory cases
IngNumCasesYAGLaserInpatient	Number	Number of YAG Laser, inpatient cases
IngNumCasesYAGLaserAmbulatory	Number	Number of YAG Laser, ambulatory cases
strNumCasesOther1Name	Text	Specify other type of procedure
IngNumCasesOther1Inpatient	Number	Number of other type, inpatient cases
IngNumCasesOther1Ambulatory	Number	Number of other type, ambulatory cases
strNumCasesOther2Name	Text	Specify other type of procedure
IngNumCasesOther2Inpatient	Number	Number of other type, inpatient cases
IngNumCasesOther2Ambulatory	Number	Number of other type, ambulatory cases
strNumCasesOther3Name	Text	Specify other type of procedure
IngNumCasesOther3Inpatient	Number	Number of other, inpatient cases
IngNumCasesOther3Ambulatory	Number	Number of other, ambulatory cases
IngTotalCasesNonSurgicalInpatient	Number	Total number of non-surgical, inpatient cases
IngTotalCasesNonSurgicalAmbulatory	Number	Total number of non-surgical, ambulatory cases

Table 31: tblSurgicalOperatingRooms

Field Name	Data Type	Definition
IngSurgeryID	AutoNumber	Primary key
IngHospitalID	Number	Establishes table relationships
strCampusName	Text	Name of the campus.
IngCampusType	Number	-1: Cumulative totals for a multi-campus hospital; 0: Hospital only has one campus; #>0: distinct campus numbers
IngOROpenHeart	Number	Number of rooms dedicated to open heart surgery.
IngORCSection	Number	Number of rooms dedicated to C-Section.
IngORInpatient	Number	Number of rooms dedicated to inpatient surgery.
IngORAmbulatory	Number	Number of rooms dedicated to ambulatory surgery.
IngORShared	Number	Number of rooms shared between inpatient and ambulatory surgery.
IngORTotal	Number	Total number of surgical rooms.
ysnAppForAddORCertOfNeed	Yes/No	Does this facility have approval for additional surgical operating rooms that are being developed pursuant to a Certificate of Need?
strCONProjectID	Text	Certificate of Need Project ID Number.
IngNumRoomsCertOfNeed	Number	Number of rooms that have approval for.