

COPYRIGHT 1988  
AMERICAN HOSPITAL ASSOCIATION  
840 NORTH LAKE SHORE DRIVE  
CHICAGO ILLINOIS 60611  
(ALL RIGHTS RESERVED)

\*\*\*\*\*  
\*\*\*\*\*

HH	HDDDDDDDD	CCCCC	
HH	HDDDDDDDDDD	CCCCCCCCC	
HH	HDD	DDCCC	CC
HHHHHHHDD	DDCC		
HHHHHHHDD	DDCC		
HHHH	HDD	DDCC	CC
HHHH	HDD	DDCCC	CC
HHHH	HDDDDDDDD	CCCCCCCCC	
HHHH	HDDDDDDDD	CCCCC	

\*\*\*\*\*  
\*\*\*\*\* HOSPITAL DATA CENTER \*\*\*\*\*  
\*\*\*\*\*

EXPANDED  
  
1987

## 1987 ANNUAL SURVEY OF HOSPITALS

RECORD LENGTH = 2010  
 BLOCK SIZE = 8040  
 RECORD KEY = ID

ITEM NUMBER	ITEM NAME	(TYPE)	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
HOSPITAL IDENTIFICATION ...							
1	ID	(A)	NA	7	1	7	A.H.A. IDENTIFICATION NUMBER
	REG	(A)	NA	1	2	2	REGION CODE (*)
	STCD	(A)	NA	2	2	3	STATE CODE (*)
	HOSPNO	(A)	NA	4	4	7	HOSPITAL NUMBER (#)
REPORTING PERIOD AND FISCAL YEAR ...							
2	DTBEG		N	6	8	13	BEGINNING OF REPORTING PERIOD
	DBEGM		N	2	8	9	BEGINNING MONTH (@)
	DBEGD		N	2	10	11	BEGINNING DAY (@)
	DBEGY		N	2	12	13	BEGINNING YEAR (@)
3	DTEND		N	6	14	19	END OF REPORTING PERIOD
	DENDM		N	2	14	15	END MONTH (@)
	DENDD		N	2	16	17	END DAY (@)
	DENDY		N	2	18	19	END YEAR (@)
4	DCOV		NA	3	20	22	DAYS IN REPORTING PERIOD ( '000' FOR NON-REPORTERS)
5	FYR		N	1	23	23	HOSPITAL IN OPERATION A FULL YEAR (1=YES 2=NO) (@)
6	FISYR		N	6	24	29	BEGINNING DATE OF FISCAL YEAR
	FISM		N	2	24	25	BEGINNING MONTH (@)
	FISD		N	2	26	27	BEGINNING DAY (@)
	FISY		N	2	28	29	BEGINNING YEAR (@)

(\*) SEE PAGE 39.

(#) THE LAST DIGIT MAY BE NON-NUMERIC ('A', 'B', 'C' ... ).

(@) THESE ITEMS WILL BE BLANK IF A HOSPITAL DID NOT RESPOND TO THE SURVEY.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
----------------	--------------	-------------	--------	-------------------	-----	------------------

## HOSPITAL CLASSIFICATION ...

7	CNTRL	NA	2	30	31	CONTROL CODE - TYPE OF AUTHORITY RESPONSIBLE FOR ESTABLISHING POLICY CONCERNING OVERALL OPERATION OF THE HOSPITAL:
---	-------	----	---	----	----	---

## GOVERNMENT, NONFEDERAL

12 = STATE  
13 = COUNTY  
14 = CITY  
15 = CITY/COUNTY  
16 = HOSPITAL DISTRICT/  
HOSPITAL AUTHORITY

## NONGOVERNMENT, NOT-FOR-PROFIT

21 = CHURCH-OPERATED  
23 = OTHER NOT-FOR-PROFIT

## NONGOVERNMENT, FOR-PROFIT

31 = INDIVIDUAL  
32 = PARTNERSHIP  
33 = CORPORATION

## GOVERNMENT, FEDERAL

41 = AIR FORCE  
42 = ARMY  
43 = NAVY  
44 = PUBLIC HEALTH SERVICE  
OTHER THAN 47  
45 = VETERANS ADMINISTRATION  
46 = FEDERAL OTHER THAN 41,42,  
43,44,45,47 OR 48  
47 = PUBLIC HEALTH SERVICE  
INDIAN SERVICE  
48 = DEPARTMENT OF JUSTICE

1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME (TYPE)	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
----------------	---------------------	-------------	--------	-------------------	-----	------------------

HOSPITAL CLASSIFICATION  
(CONTINUED) ...

8	SERV	NA	2	32	33	SERVICE CODE:
---	------	----	---	----	----	---------------

10 = GENERAL MEDICAL AND  
SURGICAL

11 = HOSPITAL UNIT OF AN  
INSTITUTION

12 = HOSPITAL UNIT OF AN  
INSTITUTION FOR THE  
MENTALLY RETARDED

22 = PSYCHIATRIC

33 = TUBERCULOSIS AND OTHER  
RESPIRATORY DISEASES

44 = OBSTETRICS AND GYNECOLOGY

45 = EYE, EAR, NOSE AND THROAT

46 = REHABILITATION

47 = ORTHOPEDIC

48 = CHRONIC DISEASE

49 = OTHER SPECIALTY

62 = INSTITUTION FOR THE  
MENTALLY RETARDED

82 = ALCOHOLISM AND OTHER  
CHEMICAL DEPENDENCY

50 = CHILDREN'S GENERAL MEDICAL  
AND SURGICAL

51 = CHILDREN'S HOSPITAL UNIT  
OF AN INSTITUTION

52 = CHILDREN'S PSYCHIATRIC

53 = CHILDREN'S TUBERCULOSIS  
AND OTHER RESPIRATORY  
DISEASES

55 = CHILDREN'S EYE, EAR, NOSE  
AND THROAT

56 = CHILDREN'S REHABILITATION

57 = CHILDREN'S ORTHOPEDIC

58 = CHILDREN'S CHRONIC DISEASE

59 = CHILDREN'S OTHER SPECIALTY

9	SERVOTH (A)	N	30	34	63	SPECIAL-SERVICE DESCRIPTION
---	-------------	---	----	----	----	-----------------------------

(IF SERVICE IS 49 OR 59)

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START END		ITEM DESCRIPTION
HOSPITAL CLASSIFICATION (CONTINUED) ... (*)						
10	RADMCH1	N	1	64	64	DOES THE HOSPITAL RESTRICT ADMISSIONS PRIMARILY TO CHILDREN? (1=YES 2=NO)
11	HMO	N	1	65	65	DOES THE HOSPITAL PROVIDE TREATMENT TO HMO MEMBERS ON ANY BASIS OTHER THAN EMERGENCY OR OUT-OF-AREA CARE? (1=YES 2=NO)
12	PPD	N	1	66	66	DOES THE HOSPITAL PROVIDE TREATMENT TO PPO MEMBERS ON ANY BASIS OTHER THAN EMERGENCY OR OUT-OF-AREA CARE? (1=YES 2=NO)

(\*) THESE ITEMS WILL BE BLANK IF A HOSPITAL DID NOT RESPOND TO THE SURVEY.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME (TYPE)	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
HOSPITAL CLASSIFICATION (CONTINUED) ... (*)						
13	MHSMEMB	N	1	67	67	IS THE HOSPITAL A MEMBER OF A MULTIHOSPITAL SYSTEM? (1=YES 2=NO)
14	SYSID (A)	NA	4	68	71	MULTIHOSPITAL-SYSTEM ID
15	MHSNAME (A)	N	30	72	101	MULTIHOSPITAL-SYSTEM NAME
MULTIHOSPITAL-SYSTEM LOCATION						
16	MHSCITY (A)	N	20	102	121	CITY
17	MHSST (A)	N	2	122	123	STATE (#)
18	HOLDCOMP	N	1	124	124	IS THE HOSPITAL A DIVISION OR SUBSIDIARY OF A HOLDING COMPANY? (1=YES 2=NO)
19	SUBS	N	1	125	125	DOES THE HOSPITAL ITSELF OPERATE SUBSIDIARY CORPORATIONS? (1=YES 2=NO)
20	MNGT	N	1	126	126	IS THE HOSPITAL CONTRACT- MANAGED? (1=YES 2=NO)
21	MNGTNM (A)	N	30	127	156	MANAGEMENT-ORGANIZATION NAME
MANAGEMENT-ORGANIZATION LOCATION						
22	MNGTCITY(A)	N	20	157	176	CITY
23	MNGTST (A)	N	2	177	178	STATE (#)
24	ALLIANCE	N	1	179	179	IS THE HOSPITAL A MEMBER OF AN ALLIANCE? (1=YES 2=NO)
25	ALLINM (A)	N	30	180	209	ALLIANCE NAME
ALLIANCE LOCATION						
26	ALLCITY(A)	N	20	210	229	CITY
27	ALLIST (A)	N	2	230	231	STATE (#)

(\*) THESE ITEMS WILL BE BLANK IF A HOSPITAL DID NOT RESPOND  
TO THE SURVEY.

(#) SEE PAGE 39.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
DIAGNOSTIC AND TREATMENT SERVICES: (*)						
1 = HOSPITAL-BASED 3 = PROVIDED BY ANOTHER HOSPITAL OR PROVIDER 4 = SERVICE IS NOT AVAILABLE						
28	AIDS86	N	1	232 <sup>✓</sup>	232	ACQUIRED IMMUNE-DEFICIENCY SYNDROME (AIDS) SERVICES
29	BROOM85	N	1	233 <sup>✓</sup>	233	BIRTHING ROOM
30	COPD82	N	1	234 <sup>✓</sup>	234	CHRONIC OBSTRUCTIVE PULMONARY DISEASE SERVICES
31	DAYHOSP82	N	1	235 <sup>✓</sup>	235	DAY HOSPITAL
32	ESWL85	N	1	236 <sup>✓</sup>	236	EXTRACORPOREAL SHOCK-WAVE LITHOTRIPTER
33	GERISV82	N	1	237 <sup>✓</sup>	237	COMPREHENSIVE GERIATRIC ASSESSMENT
34	GERACU86	N	1	238 <sup>✓</sup>	238	GERIATRIC ACUTE-CARE UNIT
35	GERSAT86	N	1	239 <sup>✓</sup>	239	SATELLITE GERIATRIC CLINICS
36	RESPIT86	N	1	240 <sup>✓</sup>	240	RESPITE CARE
37	ADULTDCR86	N	1	241 <sup>✓</sup>	241	ADULT DAY CARE
38	HEMDLYS82	N	1	242 <sup>✓</sup>	242	HEMODIALYSIS
39	HISTOLAB82	N	1	243 <sup>✓</sup>	243	HISTOPATHOLOGY LABORATORY
40	BLDBK82	N	1	244 <sup>✓</sup>	244	BLOOD BANK
41	PSYCHLD87	N	1	245 <sup>✓</sup>	245	CHILD/ADOLESCENT PSYCHIATRIC SERVICES
42	PSYGER87	N	1	246 <sup>✓</sup>	246	GERIATRIC PSYCHIATRIC SERVICES
43	PSYEM82	N	1	247 <sup>✓</sup>	247	PSYCHIATRIC EMERGENCY SERVICES
44	PSYED87	N	1	248 <sup>✓</sup>	248	PSYCHIATRIC EDUCATION

(\*) THESE ITEMS WILL BE BLANK IF A HOSPITAL DID NOT RESPOND TO THE SURVEY.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
DIAGNOSTIC AND TREATMENT SERVICES (CONTINUED) ... (*)						
45	PSYLS87	N	1	249✓	249	PSYCHIATRIC CONSULTATION/LIAISON SERVICES
46	PSYPH82	N	1	250✓	250	PSYCHIATRIC PARTIAL HOSPITALIZATION PROGRAM
47	PSYOP82	N	1	251✓	251	PSYCHIATRIC OUTPATIENT SERVICES
48	CTSCAN82	N	1	252✓	252	COMPUTED-TOMOGRAPHY SCANNER (HEAD OR WHOLE-BODY)
49	DRADISO82	N	1	253✓	253	DIAGNOSTIC RADIOISOTOPE FACILITY
50	DXRAY85	N	1	254✓	254	DIAGNOSTIC X-RAY FACILITY
51	NMR83	N	1	255✓	255	NUCLEAR MAGNETIC RESONANCE IMAGING FACILITY
52	ULTSND82	N	1	256✓	256	ULTRASOUND FACILITY
53	MRADT82	N	1	257✓	257	MEGAVOLTAGE RADIATION THERAPY
54	RADIMP82	N	1	258✓	258	RADIOACTIVE IMPLANTS
55	TRADISO82	N	1	259✓	259	THERAPEUTIC RADIOISOTOPE FACILITY
56	XRADT82	N	1	260✓	260	X-RAY RADIATION THERAPY
57	ASURG82	N	1	261✓	261	AMBULATORY SURGERY
58	CCLAB82	N	1	262✓	262	CARDIAC CATHETERIZATION LABORATORY
59	OTRANS86	N	1	263✓	263	ORGAN TRANSPLANT CAPABILITY (INCLUDING KIDNEY)
60	OHSURG82	N	1	264✓	264	OPEN-HEART SURGERY

(\*) THESE ITEMS WILL BE BLANK IF A HOSPITAL DID NOT RESPOND  
TO THE SURVEY.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
DIAGNOSTIC AND TREATMENT SERVICES (CONTINUED) ... (*)						
61	OT82	N	1	265✓	265	OCCUPATIONAL THERAPY
62	PT82	N	1	266✓	266	PHYSICAL THERAPY
63	RECT82	N	1	267✓	267	RECREATIONAL THERAPY
64	RESPT82	N	1	268✓	268	RESPIRATORY THERAPY
65	SPATH82	N	1	269✓	269	SPEECH THERAPY
AMBULATORY AND OUTREACH SERVICES: (*)						
1 = HOSPITAL-BASED 3 = PROVIDED BY ANOTHER HOSPITAL OR PROVIDER 4 = SERVICE IS NOT AVAILABLE						
66	OPD82	N	1	270✓	270	ORGANIZED OUTPATIENT SERVICES
67	EMDEPT82	N	1	271✓	271	EMERGENCY DEPARTMENT
68	TRAUMA84	N	1	272✓	272	TRAUMA CENTER
69	ALCHOP82	N	1	273✓	273	ALCOHOLISM/CHEMICAL DEPENDENCY OUTPATIENT SERVICES
70	CONCAR86	N	1	274✓	274	CONTINUING CARE CASE MANAGEMENT
71	FITCEN86	N	1	275✓	275	FITNESS CENTER
72	GENTC82	N	1	276✓	276	GENETIC COUNSELING
73	GENSCRN86	N	1	277✓	277	GENETIC SCREENING
74	PATED86	N	1	278✓	278	PATIENT EDUCATION

(\*) THESE ITEMS WILL BE BLANK IF A HOSPITAL DID NOT RESPOND TO THE SURVEY.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
AMBULATORY AND OUTREACH SERVICES (CONTINUED) ... (*)						
75	COMHLTH86	N	1	279✓	279	COMMUNITY HEALTH PROMOTION
76	WRKHLTH86	N	1	280✓	280	WORKSITE HEALTH PROMOTION
77	HOMCR82	N	1	281✓	281	HOME CARE PROGRAM
78	HOSP82	N	1	282✓	282	HOSPICE PROGRAM
79	OCCHLTH86	N	1	283✓	283	OCCUPATIONAL HEALTH SERVICES
80	REHABOP82	N	1	284✓	284	REHABILITATION OUTPATIENT SERVICES
81	CONTRA86	N	1	285✓	285	CONTRACEPTIVE CARE
82	FERTIL86	N	1	286✓	286	FERTILITY COUNSELING
83	STERIL86	N	1	287✓	287	STERILIZATION
84	SPRTMD86	N	1	288✓	288	SPORTS MEDICINE CLINIC/SERVICE
85	WOMCEN86	N	1	289✓	289	WOMEN'S CENTER
86	AUXIL79	N	1	290✓	290	HOSPITAL AUXILIARY
87	PATREP79	N	1	291✓	291	PATIENT REPRESENTATIVE
88	VOLSV79	N	1	292✓	292	VOLUNTEER SERVICES

(\*) THESE ITEMS WILL BE BLANK IF A HOSPITAL DID NOT RESPOND  
TO THE SURVEY.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
						INPATIENT SERVICE UNIT BEDS AND UTILIZATION ... (*)
						ACUTE CARE UNITS ...
						GENERAL MEDICAL AND SURGICAL CARE
89	GENBD	N	4	293✓	296	BEDS SET UP (ADULT)
90	GENIPD	N	7	297✓	303	INPATIENT DAYS (ADULT)
91	PEDBD	N	4	304✓	307	BEDS SET UP (PEDIATRIC)
92	PEDIPD	N	7	308✓	314	INPATIENT DAYS (PEDIATRIC)
93	OBLEV	N	1	315✓	315	OBSTETRICS UNIT SERVICE LEVEL (#)
						1 = PROVIDES SERVICES FOR UNCOMPLICATED MATERNITY AND NEWBORN CASES
						2 = PROVIDES SERVICES FOR ALL UNCOMPLICATED AND MOST COMPLICATED CASES AND SPECIAL NEONATAL SERVICES
						3 = PROVIDES SERVICES FOR ALL SERIOUS ILLNESSES AND ABNORMALITIES
						OBSTETRIC CARE
94	OBBD	N	4	316✓	319	BEDS SET UP
95	OBIPD	N	7	320✓	326	INPATIENT DAYS
						PSYCHIATRIC ACUTE CARE
96	PSYACBD	N	4	327✓	330	BEDS SET UP
97	PSYACIPD	N	7	331✓	337	INPATIENT DAYS
						ALCOHOL/CHEMICAL DEPENDENCY ACUTE CARE
98	ALCHACBD	N	4	338✓	341	BEDS SET UP
99	ALCHACIPD	N	7	342✓	348	INPATIENT DAYS
						OTHER ACUTE CARE
100	OTHACBD	N	4	349✓	352	BEDS SET UP
101	OTHACIPD	N	7	353✓	359	INPATIENT DAYS

(\*) THESE ITEMS WILL BE BLANK IF A HOSPITAL DID NOT RESPOND TO THE SURVEY.

(#) THIS ITEM WILL BE BLANK IF A HOSPITAL DID NOT RESPOND TO THE SURVEY OR COULD NOT REPORT ACCURATELY.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
INPATIENT SERVICE UNIT BEDS AND UTILIZATION (CONTINUED) ... (*)						
INTENSIVE CARE UNITS ...						
MEDICAL/SURGICAL INTENSIVE CARE						
102	MSICBD	N	4	360	363	BEDS SET UP
103	MSICIPD	N	7	364	370	INPATIENT DAYS
CARDIAC INTENSIVE CARE						
104	CICBD	N	4	371	374	BEDS SET UP
105	CICIPD	N	7	375	381	INPATIENT DAYS
NEONATAL INTENSIVE CARE						
106	NICBD	N	4	382	385	BEDS SET UP
107	NICIPD	N	7	386	392	INPATIENT DAYS
NEONATAL INTERMEDIATE CARE						
108	NINTBD	N	4	393	396	BEDS SET UP
109	NINTIPD	N	7	397	403	INPATIENT DAYS
PEDIATRIC INTENSIVE CARE						
110	PEDICBD	N	4	404	407	BEDS SET UP
111	PEDICIPD	N	7	408	414	INPATIENT DAYS
BURN CARE						
112	BRNBD	N	4	415	418	BEDS SET UP
113	BRNIPD	N	7	419	425	INPATIENT DAYS
OTHER SPECIAL CARE						
114	SPCICBD	N	4	426	429	BEDS SET UP
115	SPCICIPD	N	7	430	436	INPATIENT DAYS
OTHER INTENSIVE CARE						
116	OTHICBD	N	4	437	440	BEDS SET UP
117	OTHICIPD	N	7	441	447	INPATIENT DAYS

(\*) THESE ITEMS WILL BE BLANK IF A HOSPITAL DID NOT RESPOND TO THE SURVEY.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
INPATIENT SERVICE UNIT BEDS AND UTILIZATION (CONTINUED) ... (*)						
OTHER UNITS ...						
REHABILITATION CARE						
118	REHABBD	N	4	448✓	451	BEDS SET UP
119	REHABIPD	N	7	452✓	458	INPATIENT DAYS
CHRONIC DISEASE CARE						
120	CDBD	N	4	459✓	462	BEDS SET UP
121	CDIPD	N	7	463✓	469	INPATIENT DAYS
HOSPICE CARE						
122	HSPEBD	N	4	470✓	473	BEDS SET UP
123	HSPEIPD	N	7	474✓	480	INPATIENT DAYS
SKILLED NURSING LONG-TERM CARE						
124	SNLTBD	N	4	481✓	484	BEDS SET UP
125	SNLTIPD	N	7	485✓	491	INPATIENT DAYS
PSYCHIATRIC LONG-TERM CARE						
126	PSYLTBD	N	4	492✓	495	BEDS SET UP
127	PSYLTIPD	N	7	496✓	502	INPATIENT DAYS
ALCOHOL/CHEMICAL DEPENDENCY SUBACUTE CARE						
128	ALCHSUBBD	N	4	503✓	506	BEDS SET UP
129	ALCHSUBIPD	N	7	507✓	513	INPATIENT DAYS
OTHER LONG-TERM/INTERMEDIATE CARE						
130	OTHLTBDB6	N	4	514✓	517	BEDS SET UP
131	OTHLTIPD86	N	7	518✓	524	INPATIENT DAYS
MENTAL RETARDATION CARE						
132	MRBD	N	4	525✓	528	BEDS SET UP
133	MRIPD	N	7	529✓	535	INPATIENT DAYS
SHELTERED CARE						
134	SHLBD	N	4	536✓	539	BEDS SET UP
135	SHLIPD	N	7	540✓	546	INPATIENT DAYS

(\*) THESE ITEMS WILL BE BLANK IF A HOSPITAL DID NOT RESPOND TO THE SURVEY.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
INPATIENT SERVICE UNIT BEDS AND UTILIZATION (CONTINUED) ... (*)						
OTHER UNITS (CONTINUED) ...						
SELF CARE						
136	SLFBD	N	4	547✓	550	BEDS SET UP
137	SLFIPD	N	7	551✓	557	INPATIENT DAYS
OTHER TYPE OF CARE						
138	OTHBD86	N	4	558✓	561	BEDS SET UP
139	OTHIPD86	N	7	562✓	568	INPATIENT DAYS
TOTAL FACILITY INPATIENT UNITS						
140	HOSPBD	N	4	569✓	572	BEDS SET UP
141	IPDNOSW	N	7	573✓	579	INPATIENT DAYS (EXCLUDING SWING-BED UTILIZATION)
SWING BEDS ... (*)						
142	SWINGMCR	N	1	580✓	580	IS THE HOSPITAL CERTIFIED BY MEDICARE TO PROVIDE SWING-BED SERVICES? (1=YES 2=NO)
143	SWINGBD	N	4	581✓	584	NUMBER OF ACUTE-CARE BEDS DESIGNATED AS SWING BEDS (#)
SWING-BED ADMISSIONS (#)						
144	SWSNADM	N	5	585✓	589	SKILLED NURSING CARE
145	SWINTADM	N	5	590✓	594	INTERMEDIATE CARE
SWING-BED INPATIENT DAYS (#)						
146	SWSNIPD	N	7	595✓	601	SKILLED NURSING CARE
147	SWINTIPD	N	7	602✓	608	INTERMEDIATE CARE
148	HOSPIPD	N	7	609✓	615	TOTAL FACILITY INPATIENT-DAY TOTAL (INCLUDING SWING-BED UTILIZATION)

(\*) THESE ITEMS WILL BE BLANK IF A HOSPITAL DID NOT RESPOND TO THE SURVEY.

(#) THESE ITEMS WILL BE BLANK IF A HOSPITAL DID NOT RESPOND TO THE SURVEY OR REPORTED NO MEDICARE SWING-BED CERTIFICATION.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
TOTAL FACILITY BEDS AND UTILIZATION ...						
149	LBDCAP	N	4	616	619	LICENSED BED CAPACITY - MAXIMUM NUMBER AUTHORIZED BY STATE (*)
BED CHANGES ... (#)						
150	BDCHNG	N	1	620	620	WAS THERE A CHANGE IN THE NUMBER OF BEDS? (1=YES 2=NO)
151	BDDIF1	N	4	621	624	FIRST NUMBER OF BEDS CHANGED (+ OR -)
152	BDDT1	N	6	625	630	DATE OF FIRST BED CHANGE
	BDDT1M	N	2	625	626	MONTH OF FIRST BED CHANGE
	BDDT1D	N	2	627	628	DAY OF FIRST BED CHANGE
	BDDT1Y	N	2	629	630	YEAR OF FIRST BED CHANGE
153	BDDIF2	N	4	631	634	SECOND NUMBER OF BEDS CHANGED (+ OR -)
154	BDDT2	N	6	635	640	DATE OF SECOND BED CHANGE
	BDDT2M	N	2	635	636	MONTH OF SECOND BED CHANGE
	BDDT2D	N	2	637	638	DAY OF SECOND BED CHANGE
	BDDT2Y	N	2	639	640	YEAR OF SECOND BED CHANGE

(\*) LICENSED CAPACITY MAY BE ZERO IF THE STATE DOES NOT REGULATE THE NUMBER OF BEDS; IT MAY BE BLANK IF A HOSPITAL DID NOT RESPOND TO THE SURVEY OR DID NOT REPORT THE ITEM.

(#) THESE ITEMS ARE USED IN THE CALCULATION OF STATISTICAL BEDS. IF MORE THAN TWO CHANGES WERE REPORTED, A SPECIAL CALCULATION IS MADE AND A SINGLE CHANGE IS SHOWN FOR THE FIRST DAY OF THE REPORTING PERIOD. IF A HOSPITAL CAN REPORT ONLY THE MONTH OF THE CHANGE, THE DAY IS ARBITRARILY TAKEN TO BE THE FIFTEENTH OF THE MONTH. THESE ITEMS WILL BE BLANK IF A HOSPITAL DID NOT RESPOND TO THE SURVEY.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
TOTAL FACILITY BEDS AND UTILIZATION (CONTINUED) ...						
155	SUNITS	N	1	641✓	641	DOES THE HOSPITAL MAINTAIN A SEPARATE NURSING-HOME TYPE OF LONG-TERM CARE UNIT? (1=YES 2=NO) (*)
TOTAL FACILITY BEDS SET UP AND STAFFED AT END OF REPORTING PERIOD						
156	BDTOT	NA	4	642✓	645	
157	ADMTOT	Y	5	646✓	650	ADMISSIONS
158	IPDTOT	Y	7	651✓	657	INPATIENT DAYS
159	DCTOT	Y	5	658✓	662	DISCHARGES
160	DCDTOT	Y	7	663✓	669	DISCHARGE DAYS
161	CENSUS	N	4	670✓	673	CENSUS ON THE LAST DAY OF THE REPORTING PERIOD (*)
HOSPITAL UNIT (#)						
162	BDH	N	4	674✓	677	BEDS
163	ADMH	N	5	678✓	682	ADMISSIONS
164	IPDH	N	7	683✓	689	INPATIENT DAYS
165	DCH	N	5	690✓	694	DISCHARGES
166	DCDH	N	7	695✓	701	DISCHARGE DAYS
167	CENH	N	4	702✓	705	CENSUS
LONG-TERM (NURSING-HOME) UNIT (#)						
168	BDLT	N	4	706✓	709	BEDS
169	ADMLT	N	5	710✓	714	ADMISSIONS
170	IPDLT	N	7	715✓	721	INPATIENT DAYS
171	DCLT	N	5	722✓	726	DISCHARGES
172	DCDLT	N	7	727✓	733	DISCHARGE DAYS
173	CENLT	N	4	734✓	737	CENSUS

(\*) THESE ITEMS WILL BE BLANK IF A HOSPITAL DID NOT RESPOND TO THE SURVEY.

(#) THESE ITEMS WILL BE PRESENT IF A HOSPITAL REPORTED A SEPARATE UNIT; THEY WILL BE BLANK IF A HOSPITAL DID NOT REPORT A SEPARATE UNIT OR DID NOT RESPOND TO THE SURVEY.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
TOTAL FACILITY BEDS AND UTILIZATION (CONTINUED) ...						
MEDICARE/MEDICAID UTILIZATION ...						
TOTAL FACILITY MEDICARE						
174	MCRDC	Y	5	738✓	742	INPATIENT DISCHARGES
175	MCRIPD	Y	7	743✓	749	INPATIENT DAYS
MEDICAID						
176	MCDDC	Y	5	750✓	754	INPATIENT DISCHARGES
177	MCDIPD	Y	7	755✓	761	INPATIENT DAYS
HOSPITAL UNIT (*)						
MEDICARE						
178	MCRDCH	N	5	762✓	766	INPATIENT DISCHARGES
179	MCRIPDH	N	7	767✓	773	INPATIENT DAYS
MEDICAID						
180	MCDDCH	N	5	774✓	778	INPATIENT DISCHARGES
181	MCDIPDH	N	7	779✓	785	INPATIENT DAYS
LONG-TERM (NURSING HOME) UNIT (*)						
MEDICARE						
182	MCRDCLT	N	5	786✓	790	INPATIENT DISCHARGES
183	MCRIPDLT	N	7	791✓	797	INPATIENT DAYS
MEDICAID						
184	MCDDCLT	N	5	798✓	802	INPATIENT DISCHARGES
185	MCDIPDLT	N	7	803✓	809	INPATIENT DAYS

(\*) THESE ITEMS WILL BE PRESENT IF A HOSPITAL REPORTED A SEPARATE UNIT; THEY WILL BE BLANK IF A HOSPITAL DID NOT REPORT A SEPARATE UNIT OR DID NOT RESPOND TO THE SURVEY.

1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	ESTABLISHED	LENGTH	POSITION START	POSITION END	ITEM DESCRIPTION
TOTAL FACILITY BEDS AND UTILIZATION (CONTINUED) ...						
NEWBORN NURSERY						
186	BASSIN	NA	4	810 ✓	813	BASSINETS
187	BIRTHS	Y	6	814 ✓	819	BIRTHS
188	NBDAYS	Y	6	820 ✓	825	NEWBORN DAYS
SURGICAL OPERATIONS						
189	SUROPIP	Y	6	826 ✓	831	INPATIENT
190	SUROPAMB	Y	6	832 ✓	837	AMBULATORY
191	SUROPTOT	Y	6	838 ✓	843	TOTAL
OUTPATIENT VISITS						
192	VEM	Y	7	844 ✓	850	EMERGENCY
193	VOTH	Y	7	851 ✓	857	CLINIC/OTHER
194	VTOT	Y	7	858 ✓	864	TOTAL

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
TOTAL-FACILITY EXPENSES ...						
PAYROLL EXPENSES						
195	PAYRES86	Y	9	865✓	873	MEDICAL AND DENTAL RESIDENTS AND INTERNS, AND OTHER TRAINEES
196	PAYOTH86	Y	9	874✓	882	ALL OTHER PERSONNEL
197	PAYTOT	Y	9	883✓	891	TOTAL PAYROLL EXPENSES
NONPAYROLL EXPENSES						
198	NPAYBEN	Y	9	892✓	900	EMPLOYEE BENEFITS
199	NPAYFEE	Y	9	901✓	909	PROFESSIONAL FEES
200	NPAYDPR	Y	9	910✓	918	DEPRECIATION
201	NPAYINT	Y	9	919✓	927	INTEREST
202	NPAYOTH86	Y	9	928✓	936	ALL OTHER NONPAYROLL EXPENSES
203	NPAYTOT	Y	9	937✓	945	TOTAL NONPAYROLL EXPENSES
204	EXPTOT	Y	9	946✓	954	TOTAL EXPENSES (PAYROLL PLUS NONPAYROLL)

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
HOSPITAL-UNIT EXPENSES ... (*)						
PAYROLL EXPENSES						
205	PAYRESH86	N	9	955✓	963	MEDICAL AND DENTAL RESIDENTS AND INTERNS, AND OTHER TRAINEES
206	PAYOTHH86	N	9	964✓	972	ALL OTHER PERSONNEL
207	PAYTOTH	Y	9	973✓	981	TOTAL PAYROLL EXPENSES
NONPAYROLL EXPENSES						
208	NPAYBENH	N	9	982✓	990	EMPLOYEE BENEFITS
209	NPAYFEEH	N	9	991✓	999	PROFESSIONAL FEES
210	NPAYDPRH	N	9	1000✓	1008	DEPRECIATION
211	NPAYINTH	N	9	1009✓	1017	INTEREST
212	NPAYOTHH86	N	9	1018✓	1026	ALL OTHER NONPAYROLL EXPENSES
213	NPAYTOTH	Y	9	1027✓	1035	TOTAL NONPAYROLL EXPENSES
214	EXPTOTH	Y	9	1036✓	1044	TOTAL EXPENSES (PAYROLL PLUS NONPAYROLL)
LONG-TERM (NURSING-HOME) UNIT EXPENSES ... (*)						
215	PAYTOTLT	Y	9	1045✓	1053	TOTAL PAYROLL EXPENSES
216	NPAYTOTLT	Y	9	1054✓	1062	TOTAL NONPAYROLL EXPENSES
217	EXPTOTLT	Y	9	1063✓	1071	TOTAL EXPENSES (PAYROLL PLUS NONPAYROLL)

(\*) ESTIMATED ITEMS WILL BE PRESENT IF A HOSPITAL REPORTED A SEPARATE UNIT; NON-ESTIMATED ITEMS WILL BE BLANK IF A HOSPITAL DID NOT REPORT A SEPARATE UNIT OR DID NOT RESPOND TO THE SURVEY.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
FULL-TIME HOSPITAL PERSONNEL (AS OF 9/30/87) ... (*)						
218	FTADM81	Y	4	1072	1075	ADMINISTRATORS AND ASSISTANT ADMINISTRATORS
219	FTMD80	Y	4	1076	1079	PHYSICIANS
220	FTMRES	Y	4	1080	1083	MEDICAL RESIDENTS
221	FTDD	Y	4	1084	1087	DENTISTS
222	FTDRES	Y	4	1088	1091	DENTAL RESIDENTS
223	FTRN82	Y	4	1092	1095	REGISTERED NURSES
224	FTLPN	Y	4	1096	1099	LICENSED PRACTICAL OR VOCATIONAL NURSES
225	FTANRS	Y	4	1100	1103	ANCILLARY NURSING PERSONNEL
226	FTPHYAST	Y	4	1104	1107	PHYSICIAN ASSISTANTS
227	FTPRACN	Y	4	1108	1111	NURSE PRACTITIONERS
228	FTMRA	Y	4	1112	1115	MEDICAL RECORD ADMINISTRATORS
229	FTMRT	Y	4	1116	1119	MEDICAL RECORD TECHNICIANS
230	FTPHAR	Y	4	1120	1123	LICENSED PHARMACISTS
231	FTPHART	Y	4	1124	1127	PHARMACY TECHNICIANS
232	FTMEDT	Y	4	1128	1131	MEDICAL TECHNOLOGISTS
233	FTLAB	Y	4	1132	1135	OTHER LABORATORY PERSONNEL
234	FTDIET	Y	4	1136	1139	DIETITIANS
235	FTDIETT	Y	4	1140	1143	DIETETIC TECHNICIANS
236	FTRADGR	Y	4	1144	1147	RADIOGRAPHERS OR RADIOLOGIC TECHNOLOGISTS
237	FTRADTT	Y	4	1148	1151	RADIATION THERAPY TECHNOLOGISTS
238	FTNMT	Y	4	1152	1155	NUCLEAR MEDICINE TECHNOLOGISTS
239	FTOTHRAD	Y	4	1156	1159	OTHER RADIOLOGIC PERSONNEL
240	FTOT	Y	4	1160	1163	OCCUPATIONAL THERAPISTS
241	FTOTA	Y	4	1164	1167	OCCUPATIONAL THERAPY ASSISTANTS AND AIDES
242	FTPT	Y	4	1168	1171	PHYSICAL THERAPISTS
243	FTPIA	Y	4	1172	1175	PHYSICAL THERAPY ASSISTANTS AND AIDES
244	FTRECT	Y	4	1176	1179	RECREATIONAL THERAPISTS

(\*) NURSING-HOME PERSONNEL ARE NOT INCLUDED.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
FULL-TIME HOSPITAL PERSONNEL (CONTINUED) ... (*)						
245	FTSP	Y	4	1180	1183	SPEECH PATHOLOGISTS
246	FTAUDIO	Y	4	1184	1187	AUDIOLOGISTS
247	FTRESPT	Y	4	1188	1191	RESPIRATORY THERAPISTS
248	FTRESPTT	Y	4	1192	1195	RESPIRATORY THERAPY TECHNICIANS
249	FTPSYCH	Y	4	1196	1199	PSYCHOLOGISTS
250	FTMSW	Y	4	1200	1203	MEDICAL SOCIAL WORKERS
251	FTOTHPRO84	Y	4	1204	1207	ALL OTHER HEALTH PROFESSIONAL AND TECHNICAL PERSONNEL
252	FTOTHALL	Y	4	1208	1211	ALL OTHER PERSONNEL
253	FTTOTH	Y	4	1212	1215	TOTAL HOSPITAL PERSONNEL
PART-TIME HOSPITAL PERSONNEL (AS OF 9/30/87) ... (*)						
254	PTADM81	Y	4	1216	1219	ADMINISTRATORS AND ASSISTANT ADMINISTRATORS
255	PTMD80	Y	4	1220	1223	PHYSICIANS
256	PTMRES	Y	4	1224	1227	MEDICAL RESIDENTS
257	PTDD	Y	4	1228	1231	DENTISTS
258	PTDRES	Y	4	1232	1235	DENTAL RESIDENTS
259	PTRN82	Y	4	1236	1239	REGISTERED NURSES
260	PTLPN	Y	4	1240	1243	LICENSED PRACTICAL OR VOCATIONAL NURSES
261	PTANRS	Y	4	1244	1247	ANCILLARY NURSING PERSONNEL
262	PTPHYAST	Y	4	1248	1251	PHYSICIAN ASSISTANTS
263	PTPRACN	Y	4	1252	1255	NURSE PRACTITIONERS
264	PTMRA	Y	4	1256	1259	MEDICAL RECORD ADMINISTRATORS
265	PTMRT	Y	4	1260	1263	MEDICAL RECORD TECHNICIANS
266	PTPHAR	Y	4	1264	1267	LICENSED PHARMACISTS
267	PTPHART	Y	4	1268	1271	PHARMACY TECHNICIANS

(\*) NURSING-HOME PERSONNEL ARE NOT INCLUDED.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION		ITEM DESCRIPTION
				START	END	
PART-TIME HOSPITAL PERSONNEL (CONTINUED) ... (*)						
268	PTMEDT	Y	4	1272	1275	MEDICAL TECHNOLOGISTS
269	PTLAB	Y	4	1276	1279	OTHER LABORATORY PERSONNEL
270	PTDIET	Y	4	1280	1283	DIETITIANS
271	PTDIETT	Y	4	1284	1287	DIETETIC TECHNICIANS
272	PTRADGR	Y	4	1288	1291	RADIOGRAPHERS OR RADIOLOGIC TECHNOLOGISTS
273	PTRADTT	Y	4	1292	1295	RADIATION THERAPY TECHNOLOGISTS
274	PTNMT	Y	4	1296	1299	NUCLEAR MEDICINE TECHNOLOGISTS
275	PTOTHRAD	Y	4	1300	1303	OTHER RADIOLOGIC PERSONNEL
276	PTOT	Y	4	1304	1307	OCCUPATIONAL THERAPISTS
277	PTOTA	Y	4	1308	1311	OCCUPATIONAL THERAPY ASSISTANTS AND AIDES
278	PTPT	Y	4	1312	1315	PHYSICAL THERAPISTS
279	PTPTA	Y	4	1316	1319	PHYSICAL THERAPY ASSISTANTS AND AIDES
280	PTRECT	Y	4	1320	1323	RECREATIONAL THERAPISTS
281	PTSP	Y	4	1324	1327	SPEECH PATHOLOGISTS
282	PTAUDIO	Y	4	1328	1331	AUDIOLOGISTS
283	PTRESPT	Y	4	1332	1335	RESPIRATORY THERAPISTS
284	PTRESPTT	Y	4	1336	1339	RESPIRATORY THERAPY TECHNICIANS
285	PTPSYCH	Y	4	1340	1343	PSYCHOLOGISTS
286	PTMSW	Y	4	1344	1347	MEDICAL SOCIAL WORKERS
287	PTOTHPRO84	Y	4	1348	1351	ALL OTHER HEALTH PROFESSIONAL AND TECHNICAL PERSONNEL
288	PTOTHALL	Y	4	1352	1355	ALL OTHER PERSONNEL
289	PTTOTH	Y	4	1356	1359	TOTAL HOSPITAL PERSONNEL

(\*) NURSING-HOME PERSONNEL ARE NOT INCLUDED.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
						OTHER PERSONNEL ...
						OTHER TRAINEES (*)
290	FTTRAN	Y	4	1360	1363	TOTAL FULL-TIME
291	PTTRAN	Y	4	1364	1367	TOTAL PART-TIME
						NURSING-HOME PERSONNEL
292	FTLTTOT	Y	4	1368	1371	TOTAL FULL-TIME
293	PTLTTOT	Y	4	1372	1375	TOTAL PART-TIME
						TOTAL-FACILITY PERSONNEL
294	FTTOT	Y	4	1376	1379	TOTAL FULL-TIME
295	PTTOT	Y	4	1380	1383	TOTAL PART-TIME

(\*) THESE ARE TRAINEES OTHER THAN MEDICAL AND DENTAL RESIDENTS AND INTERNS. NURSING-HOME PERSONNEL ARE NOT INCLUDED.

(#) THESE ITEMS WILL BE BLANK IF A HOSPITAL DID NOT RESPOND TO THE SURVEY.

1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	EST	LENGTH	POSITION START	POSITION END	ITEM DESCRIPTION
MEDICAL STAFF ... (*)						
ACTIVE AND ASSOCIATE, TOTAL						
296	GENMS	Y	4	1384	1387	GENERAL AND FAMILY PRACTICE
297	INTMS	Y	4	1388	1391	GENERAL INTERNAL MEDICINE
298	PEDMS	Y	4	1392	1395	PEDIATRICS
299	OTHMMS	Y	4	1396	1399	OTHER MEDICAL SPECIALTIES
300	OBMS	Y	4	1400	1403	OBSTETRICS AND GYNECOLOGY
301	OPHMS	Y	4	1404	1407	OPHTHALMOLOGY
302	ORTHMS	Y	4	1408	1411	ORTHOPEDIC SURGERY
303	PLASMS	Y	4	1412	1415	PLASTIC SURGERY
304	SURGMS	Y	4	1416	1419	GENERAL SURGERY
305	THORMS	Y	4	1420	1423	THORACIC SURGERY
306	OTHSMS86	Y	4	1424	1427	OTHER SURGICAL SPECIALTIES
307	ANTMS	Y	4	1428	1431	ANESTHESIOLOGY
308	DERMMS	Y	4	1432	1435	DERMATOLOGY
309	EMERMS	Y	4	1436	1439	EMERGENCY MEDICINE
310	NUCMS	Y	4	1440	1443	NUCLEAR MEDICINE
311	PATHMS	Y	4	1444	1447	PATHOLOGY
312	PSYMS	Y	4	1448	1451	PSYCHIATRY
313	RADMS	Y	4	1452	1455	RADIOLOGY
314	OTHMS86	Y	4	1456	1459	OTHER SPECIALTIES
315	TOTMS	Y	4	1460	1463	TOTAL
ACTIVE AND ASSOCIATE, BOARD-CERTIFIED						
316	GENBC	Y	4	1464	1467	GENERAL AND FAMILY PRACTICE
317	INTBC	Y	4	1468	1471	GENERAL INTERNAL MEDICINE
318	PEDBC	Y	4	1472	1475	PEDIATRICS
319	OTHMBC	Y	4	1476	1479	OTHER MEDICAL SPECIALTIES
320	OBBC	Y	4	1480	1483	OBSTETRICS AND GYNECOLOGY
321	OPHBC	Y	4	1484	1487	OPHTHALMOLOGY
322	ORTHBC	Y	4	1488	1491	ORTHOPEDIC SURGERY
323	PLASBC	Y	4	1492	1495	PLASTIC SURGERY
324	SURGBC	Y	4	1496	1499	GENERAL SURGERY
325	THORBC	Y	4	1500	1503	THORACIC SURGERY
326	OTHSBC86	Y	4	1504	1507	OTHER SURGICAL SPECIALTIES
327	ANTBC	Y	4	1508	1511	ANESTHESIOLOGY
328	DERMBC	Y	4	1512	1515	DERMATOLOGY
329	EMERBC	Y	4	1516	1519	EMERGENCY MEDICINE
330	NUCBC	Y	4	1520	1523	NUCLEAR MEDICINE
331	PATHBC	Y	4	1524	1527	PATHOLOGY
332	PSYBC	Y	4	1528	1531	PSYCHIATRY
333	RADBC	Y	4	1532	1535	RADIOLOGY
334	OTHBC86	Y	4	1536	1539	OTHER SPECIALTIES
335	TOTBC	Y	4	1540	1543	TOTAL

(\*) NURSING-HOME PERSONNEL CAN BE INCLUDED.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME (TYPE)	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
MEDICAL STAFF (CONTINUED) ...						
336	CONPHY	N	1	1544	1544	DOES THE HOSPITAL HAVE A CONTRACTUAL ARRANGEMENT WITH A PHYSICIAN WHO SERVES IN A PAID CAPACITY AS LIAISON BETWEEN HOSPITAL MANAGEMENT AND THE MEDICAL STAFF? (1=YES 2=NO) (*)
MEMBERSHIP CLASSIFICATION ...						
337	MTYPE (A)	NA	2	1545	1546	MEMBERSHIP TYPE CODE:  01 = REGISTERED, SHORT-TERM, A.H.A. MEMBER 03 = REGISTERED, LONG-TERM, A.H.A. MEMBER 50 = REGISTERED, NON-A.H.A. MEMBER 53 = NONREGISTERED, NON-A.H.A. MEMBER 0M = NONREGISTERED OSTEOPATHIC, MEMBER OF A.O.H.A. ON = NONREGISTERED OSTEOPATHIC, NONMEMBER OF A.O.H.A. 25 = NONREGISTERED, PROVISIONAL A.H.A. MEMBER
338	MLOS	NA	1	1547	1547	MEMBERSHIP LENGTH OF STAY (1=SHORT-TERM 2=LONG-TERM) (#)
339	MCNTRL	NA	2	1548	1549	MEMBERSHIP CONTROL CODE (#)
340	MSERV	NA	2	1550	1551	MEMBERSHIP SERVICE CODE (#)

(\*) THESE ITEMS WILL BE BLANK IF A HOSPITAL DID NOT RESPOND TO THE SURVEY.

(#) THESE ITEMS ARE TAKEN FROM THE A.H.A. MEMBERSHIP FILES AND ARE USUALLY THE REPORTS FROM THE PREVIOUS YEAR'S ANNUAL SURVEY.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME (TYPE)	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
MAILING INFORMATION ...						
341	MNAME (A)	NA	30	1552	1581	NAME OF HOSPITAL
342	MLOCAD1 (A)	NA	30	1582	1611	ADMINISTRATOR'S NAME
343	MLOCAD2 (A)	NA	30	1612	1641	STREET ADDRESS
344	MLOCCTY (A)	NA	20	1642	1661	CITY
345	MLOCSTA (A)	NA	2	1662	1663	STATE CODE (*)
346	MLOCZIP (A)	NA	5	1664	1668	ZIP CODE
TELEPHONE ...						
347	AREA (A)	NA	3	1669	1671	AREA CODE
348	TELNO (A)	NA	7	1672	1678	LOCAL NUMBER
HOSPITAL CLASSIFICATION ...						
349	RESP	NA	1	1679 ✓	1679	RESPONSE CODE (1=YES 2=NO)
350	CHC	NA	1	1680 ✓	1680	COMMUNITY HOSPITAL CODE (*)
351	BSC	NA	1	1681 ✓	1681	BED SIZE CODE: 1 = 6 - 24 BEDS 2 = 25 - 49 BEDS 3 = 50 - 99 BEDS 4 = 100 - 199 BEDS 5 = 200 - 299 BEDS 6 = 300 - 399 BEDS 7 = 400 - 499 BEDS 8 = 500 OR MORE BEDS
352	LOS	NA	1	1682 ✓	1682	LENGTH OF STAY (*) (1=SHORT-TERM 2=LONG-TERM)

(\*) SEE PAGES 39 (MLOCSTA), 43 (CHC) AND 44 (LOS).

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
CALCULATED FIELDS ...						
TOTAL-FACILITY BEDS AND UTILIZATION (*)						
353	STATBD	NA	4	1683✓	1686	STATISTICAL BEDS
354	ADC	NA	4	1687✓	1690	AVERAGE DAILY CENSUS
355	OCC	NA	4	1691✓	1694	OCCUPANCY RATE (NEAREST 0.1%)
356	ADJADM	NA	6	1695✓	1700	ADJUSTED ADMISSIONS
357	ADJPD	NA	8	1701✓	1708	ADJUSTED PATIENT DAYS
358	ADJADC	NA	4	1709✓	1712	ADJUSTED AVERAGE DAILY CENSUS
359	QPPE	NA	6	1713✓	1718	PUBLISHED PAYROLL EXPENSES (IN THOUSANDS) (#)
FULL-TIME-EQUIVALENT PERSONNEL (ⓐ)						
360	FTEMD	NA	4	1719✓	1722	PHYSICIANS AND DENTISTS
361	FTERN	NA	4	1723✓	1726	REGISTERED NURSES
362	FTELPN	NA	4	1727✓	1730	LICENSED PRACTICAL AND VOCATIONAL NURSES
363	FTERES	NA	4	1731✓	1734	MEDICAL AND DENTAL RESIDENTS
364	FTETRN	NA	4	1735✓	1738	OTHER TRAINEES
365	FTETTRN	NA	4	1739✓	1742	TOTAL TRAINEES
366	FTEOTH	NA	4	1743✓	1746	OTHER PERSONNEL (HOSPITAL)
367	FTEH	NA	4	1747✓	1750	TOTAL PERSONNEL (HOSPITAL)
368	FTENH	NA	4	1751✓	1754	TOTAL PERSONNEL (NURSING-HOME)
369	FTEOTH	NA	4	1755✓	1758	TOTAL OTHER PERSONNEL (OTHER HOSPITAL PLUS NURSING-HOME)
370	FTE	NA	4	1759✓	1762	TOTAL PERSONNEL (#) (HOSPITAL PLUS NURSING-HOME)

(\*) SEE PAGES 43 AND 44.

(#) PUBLISHED PAYROLL EXPENSES AND TOTAL FULL-TIME EQUIVALENT PERSONNEL DO NOT INCLUDE SALARIES OR COUNTS OF RESIDENTS, INTERNS, STUDENT NURSES OR OTHER TRAINEES.

(ⓐ) FULL-TIME EQUIVALENTS ARE CALCULATED BY ADDING THE NUMBER OF FULL-TIME PERSONNEL TO ONE-HALF THE NUMBER OF PART-TIME PERSONNEL.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	(TYPE)	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
GEOGRAPHIC CODES ...							
371	HSA	(A)	NA	5	1763	✓ 1767	HEALTH SERVICE AREA CODE (*)
372	MCSANM	(A)	NA	2	1768	✓ 1769	CONSOLIDATED METROPOLITAN STATISTICAL AREA CODE (#)
373	MMSANM	(A)	NA	4	1770	✓ 1773	METROPOLITAN STATISTICAL AREA CODE (#)
374	MCCOUNTY	(A)	NA	3	1774	✓ 1776	MODIFIED F.I.P.S. COUNTY CODE (*)
375	CITYRK		NA	3	1777	✓ 1779	RANKING OF 100 LARGEST CITIES (BASED ON 1980 CENSUS) (*)
376	MMSAS		NA	1	1780	✓ 1780	METROPOLITAN STATISTICAL AREA SIZE:

0 = NON-METROPOLITAN AREA  
 1 = UNDER 100,000 POPULATION  
 2 = 100,000 TO 250,000  
 3 = 250,000 TO 500,000  
 4 = 500,000 TO 1,000,000  
 5 = 1,000,000 TO 2,500,000  
 6 = OVER 2,500,000

(\*) SEE PAGES 40 AND 41.

(#) REFER TO OMB PUBLIC AFFAIRS RELEASE OMB-83-20, OFFICE OF  
 MANAGEMENT AND BUDGET, WASHINGTON, JUNE 27, 1983.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION		ITEM DESCRIPTION
				START	END	
APPROVALS (1=YES 2=NO) ...						
377	MAPP1	NA	1	1781	1781	J.C.A.H. ACCREDITATION (ANY)
378	MAPP2	NA	1	1782	1782	CANCER PROGRAM
379	MAPP3	NA	1	1783	1783	RESIDENCY (APPROVED BY A.M.A.)
380	MAPP4	NA	1	1784	1784	(NO LONGER IN USE)
381	MAPP5	NA	1	1785	1785	MEDICAL SCHOOL AFFILIATION
382	MAPP6	NA	1	1786	1786	PROFESSIONAL NURSING SCHOOL
383	MAPP7	NA	1	1787	1787	ACCREDITATION BY COMMISSION ON ACCREDITATION OF REHABILITATION FACILITIES
384	MAPP8	NA	1	1788	1788	MEMBER, COUNCIL OF TEACHING HOSPITALS
385	MAPP9	NA	1	1789	1789	BLUE CROSS CONTRACTING OR PARTICIPATING
386	MAPP10	NA	1	1790	1790	MEDICARE CERTIFICATION (H.E.W.)
387	MAPP11	NA	1	1791	1791	A.O.H.A. ACCREDITATION
388	MAPP12	NA	1	1792	1792	A.O.H.A. OSTEOPATHIC INTERNSHIP
389	MAPP13	NA	1	1793	1793	A.O.H.A. OSTEOPATHIC RESIDENCY
390	MAPP14	NA	1	1794	1794	REGISTERED OSTEOPATHIC HOSPITAL (MEMBER OF A.O.H.A.)
391	MAPP15	NA	1	1795	1795	REGISTERED OSTEOPATHIC HOSPITAL (NON-MEMBER OF A.O.H.A.)
392	MAPP16	NA	1	1796	1796	CATHOLIC CHURCH OPERATED
393	MAPP17	NA	1	1797	1797	MEMBER, FEDERATION OF AMERICAN HOSPITALS
394	MAPP18	NA	1	1798	1798	(NO LONGER IN USE)
395	MAPP19	NA	1	1799	1799	(NO LONGER IN USE)
396	MAPP20	NA	1	1800	1800	(NO LONGER IN USE)

1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	EST	LENGTH	POSITION START	POSITION END	ITEM DESCRIPTION
ESTIMATION CODES (0=NO 1=YES 2=EXPANDED) ...						
UNIT INPATIENT DAYS (*)						
397	EGENIPD	NA	1	1801	1801	GENERAL MEDICAL/SURGICAL CARE (ADULT)
398	EPEDIPD	NA	1	1802	1802	GENERAL MEDICAL/SURGICAL CARE (PEDIATRIC)
399	EOBIPD	NA	1	1803	1803	OBSTETRIC CARE
400	EPSYACIPD	NA	1	1804	1804	PSYCHIATRIC ACUTE CARE
401	EALCHACIPD	NA	1	1805	1805	ALCOHOL/CHEMICAL DEPENDENCY ACUTE CARE
402	EOTHACIPD	NA	1	1806	1806	OTHER ACUTE CARE
403	EMSICIPD	NA	1	1807	1807	MEDICAL/SURGICAL INTENSIVE CARE
404	ECICIPD	NA	1	1808	1808	CARDIAC INTENSIVE CARE
405	ENICIPD	NA	1	1809	1809	NEONATAL INTENSIVE CARE
406	ENINTIPD	NA	1	1810	1810	NEONATAL INTERMEDIATE CARE
407	EPEDICIPD	NA	1	1811	1811	PEDIATRIC INTENSIVE CARE
408	EBRNIPD	NA	1	1812	1812	BURN CARE
409	ESPCICIPD	NA	1	1813	1813	OTHER SPECIAL CARE
410	EOTHICIPD	NA	1	1814	1814	OTHER INTENSIVE CARE
411	EREHABIPD	NA	1	1815	1815	REHABILITATION CARE PULMONARY DISEASE CARE
412	ECDIPD	NA	1	1816	1816	CHRONIC DISEASE CARE
413	EHSPEIPD	NA	1	1817	1817	HOSPICE CARE
414	ESNLTIPD	NA	1	1818	1818	SKILLED NURSING LONG-TERM CARE
415	EPSYLTIPD	NA	1	1819	1819	PSYCHIATRIC LONG-TERM CARE
416	EALCHSUBIPD	NA	1	1820	1820	ALCOHOL/CHEMICAL DEPENDENCY SUBACUTE CARE
417	EOTHLTIPD86	NA	1	1821	1821	OTHER LONG-TERM CARE
418	EMRIPD	NA	1	1822	1822	MENTAL RETARDATION CARE
419	ESHLIPD	NA	1	1823	1823	SHELTERED CARE
420	ESLFIPD	NA	1	1824	1824	SELF CARE
421	EOTHIPD86	NA	1	1825	1825	OTHER SUBACUTE CARE
422	EIPDNOSW	NA	1	1826	1826	TOTAL FACILITY INPATIENT UNITS

(\*) THESE ITEMS WERE EXPANDED IF NECESSARY, BUT WERE NOT ESTIMATED.

1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	EST	LENGTH	POSITION START	POSITION END	ITEM DESCRIPTION
ESTIMATION CODES (CONTINUED) ...						
SWING-BED UTILIZATION (*)						
423	ESWSNADM	NA	1	1827	1827	ADMISSIONS SKILLED NURSING CARE
424	ESWINTADM	NA	1	1828	1828	INTERMEDIATE CARE INPATIENT DAYS
425	ESWSNIPD	NA	1	1829	1829	SKILLED NURSING CARE
426	ESWINTIPD	NA	1	1830	1830	INTERMEDIATE CARE
427	EHOSPIPD	NA	1	1831	1831	TOTAL FACILITY INPATIENT-DAY TOTAL (*)
TOTAL-FACILITY UTILIZATION						
428	EADMTOT	NA	1	1832	1832	ADMISSIONS
429	EIPDTOT	NA	1	1833	1833	INPATIENT DAYS
430	EDCTOT	NA	1	1834	1834	DISCHARGES
431	EDCDTOT	NA	1	1835	1835	DISCHARGE DAYS
HOSPITAL-UNIT UTILIZATION (*)						
432	EADMH	NA	1	1836	1836	ADMISSIONS
433	EIPDH	NA	1	1837	1837	INPATIENT DAYS
434	EDCH	NA	1	1838	1838	DISCHARGES
435	EDCDH	NA	1	1839	1839	DISCHARGE DAYS
NURSING-HOME-UNIT UTILIZATION (*)						
436	EADMLT	NA	1	1840	1840	ADMISSIONS
437	EIPDLT	NA	1	1841	1841	INPATIENT DAYS
438	EDCLT	NA	1	1842	1842	DISCHARGES
439	EDCDLT	NA	1	1843	1843	DISCHARGE DAYS

(\*) THESE ITEMS WERE EXPANDED IF NECESSARY, BUT WERE NOT ESTIMATED.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
ESTIMATION CODES (CONTINUED) ...						
MEDICARE/MEDICAID UTILIZATION						
TOTAL FACILITY						
MEDICARE						
440	EMCRDC	NA	1	1844	1844	INPATIENT DISCHARGES
441	EMCRIPD	NA	1	1845	1845	INPATIENT DAYS
MEDICAID						
442	EMCDDC	NA	1	1846	1846	INPATIENT DISCHARGES
443	EMCDIPD	NA	1	1847	1847	INPATIENT DAYS
HOSPITAL UNIT (*)						
MEDICARE						
444	EMCRDCH	NA	1	1848	1848	INPATIENT DISCHARGES
445	EMCRIPDH	NA	1	1849	1849	INPATIENT DAYS
MEDICAID						
446	EMCDDCH	NA	1	1850	1850	INPATIENT DISCHARGES
447	EMCDIPDH	NA	1	1851	1851	INPATIENT DAYS
LONG-TERM (NURSING-HOME) UNIT (*)						
MEDICARE						
448	EMCRDCLT	NA	1	1852	1852	INPATIENT DISCHARGES
449	EMCRIPDLT	NA	1	1853	1853	INPATIENT DAYS
MEDICAID						
450	EMCDDCLT	NA	1	1854	1854	INPATIENT DISCHARGES
451	EMCDIPDLT	NA	1	1855	1855	INPATIENT DAYS
NEWBORN NURSERY						
452	EBIRTHS	NA	1	1856	1856	BIRTHS
453	ENBDAYS	NA	1	1857	1857	NEWBORN DAYS
SURGICAL OPERATIONS						
454	ESUROPIP	NA	1	1858	1858	INPATIENT
455	ESUROPAMB	NA	1	1859	1859	AMBULATORY
456	ESUROPTOT	NA	1	1860	1860	TOTAL
OUTPATIENT VISITS						
457	EVEM	NA	1	1861	1861	EMERGENCY
458	EVOTH	NA	1	1862	1862	CLINIC/OTHER
459	EVTOT	NA	1	1863	1863	TOTAL

(\*) THESE ITEMS WERE EXPANDED IF NECESSARY, BUT WERE NOT ESTIMATED.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
ESTIMATION CODES (CONTINUED) ...						
TOTAL-FACILITY EXPENSES						
PAYROLL EXPENSES						
460	EPAYRES86	NA	1	1864	1864	MEDICAL AND DENTAL RESIDENTS AND INTERNS, AND OTHER TRAINEES
461	EPAYOTH86	NA	1	1865	1865	ALL OTHER PERSONNEL
462	EPAYTOT	NA	1	1866	1866	TOTAL PAYROLL EXPENSES
NONPAYROLL EXPENSES						
463	ENPAYBEN	NA	1	1867	1867	EMPLOYEE BENEFITS
464	ENPAYFEE	NA	1	1868	1868	PROFESSIONAL FEES
465	ENPAYDPR	NA	1	1869	1869	DEPRECIATION
466	ENPAYINT	NA	1	1870	1870	INTEREST
467	ENPAYOTH86	NA	1	1871	1871	ALL OTHER NONPAYROLL EXPENSES
468	ENPAYTOT	NA	1	1872	1872	TOTAL NONPAYROLL EXPENSES
469	EEXPTOT	NA	1	1873	1873	TOTAL EXPENSES (PAYROLL PLUS NONPAYROLL)

1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	EST	LENGTH	POSITION START	POSITION END	ITEM DESCRIPTION
ESTIMATION CODES (CONTINUED) ...						
HOSPITAL-UNIT EXPENSES (*)						
470	EPAYRESH86	NA	1	1874	1874	PAYROLL EXPENSES MEDICAL AND DENTAL RESIDENTS AND INTERNS, AND OTHER TRAINEES
471	EPAYOTHH86	NA	1	1875	1875	ALL OTHER PERSONNEL
472	EPAYTOTH	NA	1	1876	1876	TOTAL PAYROLL EXPENSES (#)
NONPAYROLL EXPENSES						
473	ENPAYBENH	NA	1	1877	1877	EMPLOYEE BENEFITS
474	ENPAYFEEH	NA	1	1878	1878	PROFESSIONAL FEES
475	ENPAYDPRH	NA	1	1879	1879	DEPRECIATION
476	ENPAYINTH	NA	1	1880	1880	INTEREST
477	ENPAYOTHH86	NA	1	1881	1881	ALL OTHER NONPAYROLL EXPENSES
478	ENPAYTOTH	NA	1	1882	1882	TOTAL NONPAYROLL EXPENSES (#)
479	EEXPTOTH	NA	1	1883	1883	TOTAL EXPENSES (PAYROLL PLUS NONPAYROLL) (#)
LONG-TERM (NURSING-HOME) UNIT EXPENSES (#)						
480	EPAYTOTLT	NA	1	1884	1884	TOTAL PAYROLL
481	ENPAYTOTLT	NA	1	1885	1885	TOTAL NONPAYROLL
482	EEXPTOTLT	NA	1	1886	1886	TOTAL EXPENSES (PAYROLL PLUS NONPAYROLL)

- (\*) WITH EXCEPTIONS AS NOTED, THESE ITEMS WERE EXPANDED IF NECESSARY, BUT WERE NOT ESTIMATED.
- (#) THESE ITEMS WERE ESTIMATED ONLY IF A HOSPITAL REPORTED A SEPARATE UNIT.

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
ESTIMATION CODES (CONTINUED) ...						
483	EFTADM81	NA	1	1887	1887	FULL-TIME HOSPITAL PERSONNEL ADMINISTRATORS AND ASSISTANT ADMINISTRATORS
484	EFTMD80	NA	1	1888	1888	PHYSICIANS
485	EFTMRES	NA	1	1889	1889	MEDICAL RESIDENTS
486	EFTDD	NA	1	1890	1890	DENTISTS
487	EFTDRES	NA	1	1891	1891	DENTAL RESIDENTS
488	EFTRN82	NA	1	1892	1892	REGISTERED NURSES
489	EFTLPN	NA	1	1893	1893	LICENSED PRACTICAL OR VOCATIONAL NURSES
490	EFTANRS	NA	1	1894	1894	ANCILLARY NURSING PERSONNEL
491	EFTPHYAST	NA	1	1895	1895	PHYSICIAN ASSISTANTS
492	EFTPRACN	NA	1	1896	1896	NURSE PRACTITIONER
493	EFTMRA	NA	1	1897	1897	MEDICAL RECORD ADMINISTRATORS
494	EFTMRT	NA	1	1898	1898	MEDICAL RECORD TECHNICIANS
495	EFTPHAR	NA	1	1899	1899	LICENSED PHARMACISTS
496	EFTPHART	NA	1	1900	1900	PHARMACY TECHNICIANS
497	EFTMEDT	NA	1	1901	1901	MEDICAL TECHNOLOGISTS
498	EFTLAB	NA	1	1902	1902	OTHER LABORATORY PERSONNEL
499	EFTDIET	NA	1	1903	1903	DIETITIANS
500	EFTDIETT	NA	1	1904	1904	DIETETIC TECHNICIANS
501	EFTRADGR	NA	1	1905	1905	RADIOGRAPHERS OR RADIOLOGIC TECHNOLOGISTS
502	EFTRADTT	NA	1	1906	1906	RADIATION THERAPY TECHNOLOGISTS
503	EFTNMT	NA	1	1907	1907	NUCLEAR MEDICINE TECHNOLOGISTS
504	EFTOHRAD	NA	1	1908	1908	OTHER RADIOLOGIC PERSONNEL
505	EFTOT	NA	1	1909	1909	OCCUPATIONAL THERAPISTS
506	EFTOTA	NA	1	1910	1910	OCCUPATIONAL THERAPY ASSISTANTS AND AIDES
507	EFTPT	NA	1	1911	1911	PHYSICAL THERAPISTS
508	EFTPTA	NA	1	1912	1912	PHYSICAL THERAPY ASSISTANTS AND AIDES
509	EFTRECT	NA	1	1913	1913	RECREATIONAL THERAPISTS
510	EFTSP	NA	1	1914	1914	SPEECH PATHOLOGISTS
511	EFTAUDIO	NA	1	1915	1915	AUDIOLOGISTS
512	EFTRESPT	NA	1	1916	1916	RESPIRATORY THERAPISTS
513	EFTRESPTT	NA	1	1917	1917	RESPIRATORY THERAPY TECHNICIANS
514	EFTPSYCH	NA	1	1918	1918	PSYCHOLOGISTS
515	EFTMSW	NA	1	1919	1919	MEDICAL SOCIAL WORKERS
516	EFTOTHPRO84	NA	1	1920	1920	ALL OTHER HEALTH PROFESSIONAL AND TECHNICAL PERSONNEL
517	EFTOTHALL	NA	1	1921	1921	ALL OTHER PERSONNEL
518	EFTTOTH	NA	1	1922	1922	TOTAL HOSPITAL PERSONNEL

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
ESTIMATION CODES (CONTINUED) ...						
519	EPTADM81	NA	1	1923	1923	PART-TIME HOSPITAL PERSONNEL ADMINISTRATORS AND ASSISTANT ADMINISTRATORS
520	EPTM80	NA	1	1924	1924	PHYSICIANS
521	EPTMRES	NA	1	1925	1925	MEDICAL RESIDENTS
522	EPTDD	NA	1	1926	1926	DENTISTS
523	EPTDRES	NA	1	1927	1927	DENTAL RESIDENTS
524	EPTRN82	NA	1	1928	1928	REGISTERED NURSES
525	EPTLPN	NA	1	1929	1929	LICENSED PRACTICAL OR VOCATIONAL NURSES
526	EPTANRS	NA	1	1930	1930	ANCILLARY NURSING PERSONNEL
527	EPTPHYAST	NA	1	1931	1931	PHYSICIAN ASSISTANTS
528	EPTPRACN	NA	1	1932	1932	NURSE PRACTITIONERS
529	EPTMRA	NA	1	1933	1933	MEDICAL RECORD ADMINISTRATORS
530	EPTMRT	NA	1	1934	1934	MEDICAL RECORD TECHNICIANS
531	EPTPHAR	NA	1	1935	1935	LICENSED PHARMACISTS
532	EPTPHART	NA	1	1936	1936	PHARMACY TECHNICIANS
533	EPTMEDT	NA	1	1937	1937	MEDICAL TECHNOLOGISTS
534	EPTLAB	NA	1	1938	1938	OTHER LABORATORY PERSONNEL
535	EPTDIET	NA	1	1939	1939	DIETITIANS
536	EPTDIETT	NA	1	1940	1940	DIETETIC TECHNICIANS
537	EPTRADGR	NA	1	1941	1941	RADIOGRAPHERS OR RADIOLOGIC TECHNOLOGISTS
538	EPTRADTT	NA	1	1942	1942	RADIATION THERAPY TECHNOLOGISTS
539	EPTNMT	NA	1	1943	1943	NUCLEAR MEDICINE TECHNOLOGISTS
540	EPTOTHRAD	NA	1	1944	1944	OTHER RADIOLOGIC PERSONNEL
541	EPTOT	NA	1	1945	1945	OCCUPATIONAL THERAPISTS
542	EPTOTA	NA	1	1946	1946	OCCUPATIONAL THERAPY ASSISTANTS AND AIDES
543	EPTPT	NA	1	1947	1947	PHYSICAL THERAPISTS
544	EPTPTA	NA	1	1948	1948	PHYSICAL THERAPY ASSISTANTS AND AIDES
545	EPTRECT	NA	1	1949	1949	RECREATIONAL THERAPISTS
546	EPTSP	NA	1	1950	1950	SPEECH PATHOLOGISTS
547	EPTAUDIO	NA	1	1951	1951	AUDIOLOGISTS
548	EPTRESPT	NA	1	1952	1952	RESPIRATORY THERAPISTS
549	EPTRESPTT	NA	1	1953	1953	RESPIRATORY THERAPY TECHNICIANS
550	EPTPSYCH	NA	1	1954	1954	PSYCHOLOGISTS
551	EPTMSW	NA	1	1955	1955	MEDICAL SOCIAL WORKERS
552	EPTOTHPRQ84	NA	1	1956	1956	ALL OTHER HEALTH PROFESSIONAL AND TECHNICAL PERSONNEL
553	EPTOTHALL	NA	1	1957	1957	ALL OTHER PERSONNEL
554	EPTTOTH	NA	1	1958	1958	TOTAL HOSPITAL PERSONNEL

## 1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	E S T	LENGTH	POSITION START	END	ITEM DESCRIPTION
ESTIMATION CODES (CONTINUED) ...						
OTHER TRAINEES (EXCLUDING MEDICAL AND DENTAL RESIDENTS AND INTERNS)						
555	EFTTRAN	NA	1	1959	1959	TOTAL FULL-TIME
556	EPTTRAN	NA	1	1960	1960	TOTAL PART-TIME
NURSING-HOME PERSONNEL						
557	EFTLTOT	NA	1	1961	1961	TOTAL FULL-TIME
558	EPTLTOT	NA	1	1962	1962	TOTAL PART-TIME
TOTAL-FACILITY PERSONNEL						
559	EFTTOT	NA	1	1963	1963	TOTAL FULL-TIME
560	EPTTOT	NA	1	1964	1964	TOTAL PART-TIME
MEDICAL STAFF						
ACTIVE AND ASSOCIATE, TOTAL						
561	EGENMS	NA	1	1965	1965	GENERAL AND FAMILY PRACTICE
562	EINTMS	NA	1	1966	1966	GENERAL INTERNAL MEDICINE
563	EPEDMS	NA	1	1967	1967	PEDIATRICS
564	EOTHMS	NA	1	1968	1968	OTHER MEDICAL SPECIALTIES
565	EOBMS	NA	1	1969	1969	OBSTETRICS AND GYNECOLOGY
566	EOPHMS	NA	1	1970	1970	OPHTHALMOLOGY
567	EORTHMS	NA	1	1971	1971	ORTHOPEDIC SURGERY
568	EPLASMS	NA	1	1972	1972	PLASTIC SURGERY
569	ESURGMS	NA	1	1973	1973	GENERAL SURGERY
570	ETHORMS	NA	1	1974	1974	THORACIC SURGERY
571	EOTHMS86	NA	1	1975	1975	OTHER SURGICAL SPECIALTIES
572	EANTMS	NA	1	1976	1976	ANESTHESIOLOGY
573	EDERMMS	NA	1	1977	1977	DERMATOLOGY
574	EEMERMS	NA	1	1978	1978	EMERGENCY MEDICINE
575	ENUCMS	NA	1	1979	1979	NUCLEAR MEDICINE
576	EPATHMS	NA	1	1980	1980	PATHOLOGY
577	EPSYMS	NA	1	1981	1981	PSYCHIATRY
578	ERADMS	NA	1	1982	1982	RADIOLOGY
579	EOTHMS86	NA	1	1983	1983	OTHER SPECIALTIES
580	ETOTMS	NA	1	1984	1984	TOTAL

1987 ANNUAL SURVEY OF HOSPITALS

ITEM NUMBER	ITEM NAME	EST	LENGTH	POSITION START	POSITION END	ITEM DESCRIPTION
ESTIMATION CODES (CONTINUED) ...						
MEDICAL STAFF (CONTINUED) ...						
ACTIVE AND ASSOCIATE, BOARD-CERTIFIED						
581	EGENBC	NA	1	1985	1985	GENERAL AND FAMILY PRACTICE
582	EINTBC	NA	1	1986	1986	GENERAL INTERNAL MEDICINE
583	EPEDBC	NA	1	1987	1987	PEDIATRICS
584	EOTHMBC	NA	1	1988	1988	OTHER MEDICAL SPECIALTIES
585	EOBBC	NA	1	1989	1989	OBSTETRICS AND GYNECOLOGY
586	EOPHBC	NA	1	1990	1990	OPHTHALMOLOGY
587	EORTHBC	NA	1	1991	1991	ORTHOPEDIC SURGERY
588	EPLASBC	NA	1	1992	1992	PLASTIC SURGERY
589	ESURGBC	NA	1	1993	1993	GENERAL SURGERY
590	ETHORBC	NA	1	1994	1994	THORACIC SURGERY
591	EOTHSBC86	NA	1	1995	1995	OTHER SURGICAL SPECIALTIES
592	EANTBC	NA	1	1996	1996	ANESTHESIOLOGY
593	EDERMBC	NA	1	1997	1997	DERMATOLOGY
594	EEMERBC	NA	1	1998	1998	EMERGENCY MEDICINE
595	ENUCBC	NA	1	1999	1999	NUCLEAR MEDICINE
596	EPATHBC	NA	1	2000	2000	PATHOLOGY
597	EPSYBC	NA	1	2001	2001	PSYCHIATRY
598	ERADBC	NA	1	2002	2002	RADIOLOGY
599	EOTHBC86	NA	1	2003	2003	OTHER SPECIALTIES
600	ETOTBC	NA	1	2004	2004	TOTAL
FILLER		NA	6	2005	2010	BLANK

## STATE AND REGION CODES

REGION 1 (NEW ENGLAND)	REGION 4 (EAST NORTH CENTRAL)	REGION 8 (MOUNTAIN)
11 MAINE 12 NEW HAMPSHIRE 13 VERMONT 14 MASSACHUSETTS 15 RHODE ISLAND 16 CONNECTICUT	41 OHIO 42 INDIANA 43 ILLINOIS 44 MICHIGAN 45 WISCONSIN	81 MONTANA 82 IDAHO 83 WYOMING 84 COLORADO 85 NEW MEXICO 86 ARIZONA 87 UTAH 88 NEVADA
REGION 2 (MID ATLANTIC)	REGION 5 (EAST SOUTH CENTRAL)	REGION 9 (PACIFIC)
21 NEW YORK 22 NEW JERSEY 23 PENNSYLVANIA	51 KENTUCKY 52 TENNESSEE 53 ALABAMA 54 MISSISSIPPI	91 WASHINGTON 92 OREGON 93 CALIFORNIA 94 ALASKA 95 HAWAII
REGION 3 (SOUTH ATLANTIC)	REGION 6 (WEST NORTH CENTRAL)	REGION 0 (ASSOCIATED AREAS)
31 DELAWARE 32 MARYLAND 33 DIST. OF COLUMBIA 34 VIRGINIA 35 WEST VIRGINIA 36 NORTH CAROLINA 37 SOUTH CAROLINA 38 GEORGIA 39 FLORIDA	61 MINNESOTA 62 IOWA 63 MISSOURI 64 NORTH DAKOTA 65 SOUTH DAKOTA 66 NEBRASKA 67 KANSAS	03 MARSHALL ISLANDS 04 PUERTO RICO 05 VIRGIN ISLANDS 06 GUAM 07 AMERICAN SAMOA
	REGION 7 (WEST SOUTH CENTRAL)	
	71 ARKANSAS 72 LOUISIANA 73 OKLAHOMA 74 TEXAS	

CITY RANK CODE	CITY NAME	CITY RANK CODE	CITY NAME
001	NEW YORK, NY	051	WICHITA, KS
002	CHICAGO, IL	052	SACRAMENTO, CA
003	LOS ANGELES, CA	053	TAMPA, FL
004	PHILADELPHIA, PA	054	ST. PAUL, MN
005	HOUSTON, TX	055	NORFOLK, VA
006	DETROIT, MI	056	VIRGINIA BEACH, VA
007	DALLAS, TX	057	ROCHESTER, NY
008	SAN DIEGO, CA	058	AKRON, OH
009	PHOENIX, AZ	059	ST. PETERSBURG, FL
010	BALTIMORE, MD	060	CORPUS CHRISTI, TX
011	SAN ANTONIO, TX	061	JERSEY CITY, NJ
012	INDIANAPOLIS, IN	062	ANAHEIM, CA
013	SAN FRANCISCO, CA	063	BATON ROUGE, LA
014	MEMPHIS, TN	064	RICHMOND, VA
015	WASHINGTON, DC	065	FRESNO, CA
016	SAN JOSE, CA	066	COLORADO SPRINGS, CO
017	MILWAUKEE, WI	067	SHREVEPORT, LA
018	CLEVELAND, OH	068	LEXINGTON-FAYETTE, KY
019	COLUMBUS, OH	069	SANTA ANA, CA
020	BOSTON, MA	070	DAYTON, OH
021	NEW ORLEANS, LA	071	JACKSON, MS
022	JACKSONVILLE, FL	072	MOBILE, AL
023	SEATTLE, WA	073	YONKERS, NY
024	DENVER, CO	074	DES MOINES, IA
025	NASHVILLE-DAVIDSON, TN	075	KNOXVILLE, TN
026	ST. LOUIS, MO	076	GRAND RAPIDS, MI
027	KANSAS CITY, MO	077	MONTGOMERY, AL
028	EL PASO, TX	078	LUBBOCK, TX
029	ATLANTA, GA	079	ANCHORAGE, AK
030	PITTSBURGH, PA	080	FORT WAYNE, IN
031	OKLAHOMA CITY, OK	081	LINCOLN, NE
032	CINCINNATI, OH	082	SPOKANE, WA
033	FORT WORTH, TX	083	RIVERSIDE, CA
034	MINNEAPOLIS, MN	084	MADISON, WI
035	PORTLAND, OR	085	HUNTINGTON BEACH, CA
036	HONOLULU, HI	086	SYRACUSE, NY
037	LONG BEACH, CA	087	CHATTANOOGA, TN
038	TULSA, OK	088	COLUMBUS, GA
039	BUFFALO, NY	089	LAS VEGAS, NV
040	TOLEDO, OH	090	SALT LAKE CITY, UT
041	MIAMI, FL	091	WORCESTER, MA
042	AUSTIN, TX	092	WARREN, MI
043	OAKLAND, CA	093	KANSAS CITY, KS
044	ALBUQUERQUE, NM	094	ARLINGTON, TX
045	TUCSON, AZ	095	FLINT, MI
046	NEWARK, NJ	096	AURORA, CO
047	CHARLOTTE, NC	097	TACOMA, WA
048	OMAHA, NE	098	LITTLE ROCK, AR
049	LOUISVILLE, KY	099	PROVIDENCE, RI
050	BIRMINGHAM, AL	100	GREENSBORO, NC

HEALTH SERVICE AREA CODE (HSA)  
-----

THE FIRST TWO DIGITS ARE THE A.H.A. STATE CODE. THE THIRD AND FOURTH DIGITS ARE THE ASSIGNED FEDERAL HSA NUMBER. THE FIFTH DIGIT IS ZERO (TO ALLOW FOR FUTURE SPLITTING OF AREAS). WHEN TWO OR MORE STATES ARE WITHIN A SINGLE AREA, THE ENTIRE AREA IS ASSIGNED TO THE STATE WITH THE MOST POPULOUS PORTION. THUS, FOR EXAMPLE, ST. LOUIS-AREA HOSPITALS IN ILLINOIS HSA 11 ARE ASSIGNED TO MISSOURI HSA 3.

COUNTY CODE (MCOUNTY)  
-----

COUNTY CODES ARE ODD NUMBERS ASSIGNED TO AN ALPHABETICAL LISTING OF THE COUNTIES WITHIN A STATE. EXCEPTIONS ARE NEWPORT NEWS, VIRGINIA (128); MENOMINEE, WISCONSIN (078); CIBOLA, NEW MEXICO (006); LOS ALAMOS, NEW MEXICO (028); AND LA PAZ, ARIZONA (012).

BALTIMORE CITY IS INCLUDED IN BALTIMORE COUNTY, ST. LOUIS CITY IS INCLUDED IN ST. LOUIS COUNTY, AND THE INDEPENDENT CITIES IN VIRGINIA ARE EACH INCLUDED IN THE CONTIGUOUS COUNTIES. KALAWAO COUNTY, HAWAII IS INCLUDED IN MAUI COUNTY.

THE FOUR ALASKA JUDICIAL DIVISIONS WERE USED AS COUNTIES.

CURRENT FILES OF COUNTY NAMES AND MSA NAMES HAVE BEEN APPENDED TO THE 1987 ANNUAL SURVEY DATA TAPES. THE LAYOUT OF EACH OF THESE FILES IS AS FOLLOWS:

## MSA FILE

ITEM	LENGTH	START	END	ITEM DESCRIPTION
1	4	2	5	MSA CODE
2	2	7	8	A.H.A. STATE CODE (*) (#)
3	2	10	11	STATE POSTAL ABBREVIATION (#)
4	43	13	55	MSA NAME
5	4	58	61	AREA TYPE
6	1	63	63	MSA SIZE GROUP (@)
7	2	65	66	CMSA CODE
(8)	2	(68)	(69)	SECOND-STATE POSTAL ABBREVIATION
(9)	2	(71)	(72)	THIRD-STATE POSTAL ABBREVIATION
(10)	2	(74)	(75)	FOURTH-STATE POSTAL ABBREVIATION

## COUNTY FILE

ITEM	LENGTH	START	END	ITEM DESCRIPTION
1	2	2	3	A.H.A. STATE CODE (*)
2	3	4	6	COUNTY CODE
3	2	8	9	STATE POSTAL ABBREVIATION
4	20	11	30	STATE NAME
5	25	32	56	COUNTY NAME

(\*) SEE PAGE 39.

(#) FOR THE FIRST-NAMED CITY.

(@) A: 1,000,000 OR MORE  
 B: 250,000 - 1,000,000  
 C: 100,000 - 250,000  
 D: UNDER 100,000

COMMUNITY HOSPITAL CODE  
-----

CODE 1 DENOTES A COMMUNITY HOSPITAL (I.E., A NONFEDERAL SHORT-TERM GENERAL OR OTHER SPECIAL HOSPITAL WHICH IS NOT A HOSPITAL UNIT OF AN INSTITUTION).

CODE 2 DENOTES A NON-COMMUNITY HOSPITAL.

STATISTICAL BEDS  
-----

THE AVERAGE NUMBER OF BEDS SET UP AND STAFFED FOR USE DURING THE REPORTING PERIOD.

AVERAGE DAILY CENSUS  
-----

THE RATIO OF INPATIENT DAYS TO THE NUMBER OF DAYS IN THE REPORTING PERIOD.

OCCUPANCY (%)  
-----

THE RATIO OF AVERAGE DAILY CENSUS TO STATISTICAL BEDS, COMPUTED TO THE NEAREST ONE-TENTH OF A PERCENT.

ADJUSTED INPATIENT DAYS  
-----

THE SUM OF INPATIENT DAYS AND EQUIVALENT PATIENT DAYS ATTRIBUTED TO OUTPATIENT SERVICES.

THE NUMBER OF EQUIVALENT PATIENT DAYS ATTRIBUTED TO OUTPATIENT SERVICES IS DERIVED BY MULTIPLYING INPATIENT DAYS BY THE RATIO OF OUTPATIENT REVENUE TO INPATIENT REVENUE.

ADJUSTED AVERAGE DAILY CENSUS  
-----

THE RATIO OF ADJUSTED INPATIENT DAYS TO THE NUMBER OF DAYS IN THE REPORTING PERIOD.

ADJUSTED ADMISSIONS  
-----

THE SUM OF ADMISSIONS AND EQUIVALENT ADMISSIONS ATTRIBUTED TO OUTPATIENT SERVICES.

THE NUMBER OF EQUIVALENT ADMISSIONS ATTRIBUTED TO OUTPATIENT SERVICES IS DERIVED BY MULTIPLYING ADMISSIONS BY THE RATIO OF OUTPATIENT REVENUE TO INPATIENT REVENUE.

LENGTH OF STAY (LOS)  
-----

IF SEPARATE SHORT-TERM AND LONG-TERM UNITS ARE REPORTED AND SHORT-TERM ADMISSIONS ARE GREATER THAN LONG-TERM ADMISSIONS, THEN LOS IS 1; IF LONG-TERM ADMISSIONS ARE GREATER THAN SHORT-TERM ADMISSIONS, THEN LOS IS 2.

IF SEPARATE UNITS ARE NOT REPORTED AND THE RATIO OF DISCHARGE DAYS TO DISCHARGES IS LESS THAN 30, THEN LOS IS 1; IF THE RATIO OF DISCHARGE DAYS TO DISCHARGES IS 30 OR GREATER, THEN LOS IS 2.

IF SEPARATE UNITS, DISCHARGES AND DISCHARGE DAYS ARE NOT REPORTED AND THE RATIO OF INPATIENT DAYS TO ADMISSIONS IS LESS THAN 30, THEN LOS IS 1; IF THE RATIO OF INPATIENT DAYS TO ADMISSIONS IS 30 OR GREATER, THEN LOS IS 2.

ESTIMATION CODES  
-----

CODE 0 DENOTES THE PRESENCE IN THE CORRESPONDING FIELD OF THE VALUE REPORTED BY THE HOSPITAL.

CODE 1 DENOTES THE PRESENCE IN THE CORRESPONDING FIELD OF A VALUE WHICH WAS ESTIMATED, SINCE NO VALUE WAS REPORTED BY THE HOSPITAL.

ESTIMATIONS OF NON-REPORTED DATA ARE BASED ON REPORTED BEDS OR BASSINETS, USING A MODELLING TECHNIQUE WHICH CONSIDERS DEMOGRAPHIC INFORMATION ABOUT THE HOSPITAL'S SURROUNDING AREA.

CODE 2 DENOTES THE PRESENCE IN THE CORRESPONDING FIELD OF A VALUE WHICH HAS BEEN EXPANDED, SINCE THE REPORTED VALUE IS TO BE ASSOCIATED WITH A HOSPITAL REPORTING PERIOD OF LESS THAN A FULL YEAR.

EXPANSIONS OF SUCH DATA ARE ACHIEVED BY MULTIPLYING EACH VALUE BY THE RATIO OF 365 DAYS TO THE NUMBER OF DAYS IN THE HOSPITAL'S REPORTING PERIOD.

IF A HOSPITAL DID NOT RESPOND TO THE SURVEY (RESP=2), THE FOLLOWING FIELDS WERE OBTAINED FROM PREVIOUSLY REPORTED DATA:

ID	MNAME	AREA	MAPP1	MAPP8	MAPP15
MTYPE	MLOCAD1	TELNO	MAPP2	MAPP9	MAPP16
MLOS	MLOCAD2	MSMSANM	MAPP3	MAPP10	MAPP17
MCNTRL	MLOCCTY	MSMSAS	MAPP4	MAPP11	MAPP18
MSERV	MLOCSTA	CITYRK	MAPP5	MAPP12	MAPP19
BDTOT	MLOCZIP	HSA	MAPP6	MAPP13	MAPP20
BASSIN	MCCOUNTY	MSCSANM	MAPP7	MAPP14	

ALL FIELDS WITH LISTED ESTIMATION CODES WERE ESTIMATED OR EXPANDED; OTHER FIELDS, SUCH AS FACILITIES AND SERVICES, ARE BLANK.

IF THE SEPARATE UNITS (SUNITS) CODE IS 2, ALL SHORT-TERM AND LONG-TERM DATA FIELDS ARE BLANK.

-----  
 COMPARISON WITH 1979 ANNUAL SURVEY ITEMS  
 -----

THE CODING OF 1987 SURVEY RESPONSES DIFFERS FROM THAT OF THE 1979 SURVEY IN SEVERAL SECTIONS. TO MAKE 1979/1987 COMPARISONS, THE FOLLOWING TRANSLATIONS SHOULD BE MADE.

FACILITIES AND SERVICES  
 -----

THE 1979 'YES/NO' ('1'/'2') RESPONSES FOR EQUIVALENT ITEMS IN THE 1987 SECTION HEADED 'GENERAL MEDICAL, SURGICAL AND ANCILLARY SERVICES' WERE GENERALLY TRANSLATED BY SETTING A 1987 '1' EQUAL TO '1', AND A 1987 '3' OR '4' EQUAL TO '2'.

PATIENT SERVICE UNITS  
 -----

'YES/NO' RESPONSES FOR THE UNITS IN THE SECTION HEADED 'INPATIENT SERVICE UNIT BEDS AND UTILIZATION' WERE SET BY TESTING FOR NON-ZERO 'BEDS SET UP', WITH THE EXCEPTION OF THOSE CASES FOR WHICH THE HOSPITAL SERVICE CODE DICTATES AN OVERRIDING OF THE CORRESPONDING UNIT; I.E.,

WHEN SERVICE IS '46' OR '56', REHABIP IS SET TO '2',  
 WHEN SERVICE IS '82', ALCHIP IS SET TO '2',  
 WHEN SERVICE IS '33', '53', '48' OR '58', OTHIP IS SET TO '2',  
 WHEN SERVICE IS '50', PEDIP IS SET TO '2',  
 WHEN SERVICE IS '22' OR '52', PSYIP IS SET TO '2'.

FOR FIVE 1979 UNITS, MORE THAN ONE 1987 UNIT WAS TESTED FOR NON-ZERO 'BEDS SET UP'; I.E.,

1987 MSICBD, OTHICBD AND SPECBD FOR 1979 ICU,  
 1987 PSYACBD AND PSYLTBD FOR 1979 PSYIP,  
 1987 SNLTBD, OTHLTBD, SHLBD AND OTHSUBBD FOR 1979 SNU,  
 1987 HSPEBD, COBD AND OTHACBD FOR 1979 OTHIP,  
 1987 ALCHACBD AND ALCHSUBBD FOR 1979 ALCHIP.

COMPARISON WITH 1979 ANNUAL SURVEY ITEMS (CONTINUED)  
-----BEDS AND UTILIZATION BY UNIT  
-----

A GREATER NUMBER OF MORE FINELY DEFINED INPATIENT SERVICE UNITS ARE INCLUDED ON THE 1987 SURVEY. THE CALCULATION OF BEDS AND INPATIENT DAYS FOR THE 1979 UNITS WHICH COMPRISE SEVERAL 1987 UNITS IS DONE AS FOLLOWS;

THE 1979 'MIXED OR OTHER INTENSIVE CARE UNIT' ITEMS ARE TAKEN TO BE THE SUMS OF 1987 MEDICAL/SURGICAL-INTENSIVE-CARE-, OTHER-SPECIAL-CARE, AND OTHER-INTENSIVE-CARE-UNIT ITEMS;

THE 1979 'PSYCHIATRIC INPATIENT UNIT' ITEMS ARE TAKEN TO BE THE SUMS OF 1987 PSYCHIATRIC-ACUTE-CARE-, AND PSYCHIATRIC-LONG-TERM-UNIT ITEMS.

THE 1979 'OTHER INPATIENT UNIT' ITEMS ARE TAKEN TO BE THE SUM OF 1987 HOSPICE-CARE-, CHRONIC-DISEASE-CARE- AND OTHER-ACUTE-CARE-UNIT ITEMS.

THE 1979 'OTHER LONG-TERM UNIT' ITEMS ARE TAKEN TO BE THE SUMS OF 1987 OTHER-LONG-TERM-, SHELTERED-CARE-, AND OTHER-SUBACUTE-CARE-UNIT ITEMS.

THE 1979 'ALCOHOL/CHEMICAL DEPENDENCY UNIT' ITEMS ARE TAKEN TO BE THE SUMS OF 1987 ALCOHOL/CHEMICAL-DEPENDENCY-ACUTE-CARE- AND ALCOHOL/CHEMICAL-DEPENDENCY-SUBACUTE-CARE-UNIT ITEMS.

-----  
 COMPARISON WITH 1979 ANNUAL SURVEY ITEMS (CONTINUED)  
 -----

PERSONNEL  
 -----

THE 1987 PERSONNEL CATEGORIES ARE DETAILED FOR HOSPITAL-UNIT PERSONNEL; NURSING-HOME-UNIT PERSONNEL IS GIVEN IN TOTAL ONLY. THUS THERE ARE COMPLICATIONS IN THE PRESENTATION OF 'OTHER PERSONNEL' FIGURES FOR 1979.

THE 1979 PERSONNEL CATEGORIES WHICH CANNOT BE DIRECTLY TRANSFERRED FROM THE 1987 FILE ARE CALCULATED AS FOLLOWS;

FTMD79 FROM 1987 FTMD AND FTDD,  
 PTMD79 FROM 1987 PTMD AND PTDD,

FTRES79 FROM 1987 FTMRES AND FTDRES,  
 PTRES79 FROM 1987 PTMRES AND PTDRES,

FTRN79 FROM 1987 FTRN AND FTPRACN,  
 PTRN79 FROM 1987 PTRN AND PTRACN,

FTOTH79 FROM 1987 FTOTHH AND FTNHTOT,  
 PTOTH79 FROM 1987 PTOTHH AND PTNHTOT,

WHERE (1987)

FTOTHH = FTOT - FTMD - FTDD - FTMRES - FTDRES - FTRN - FTPRACN - FTLPN  
 - FTTRAN,

AND (1987)

PTOTHH = PTOT - PTMD - PTDD - PTMRES - PTDRES - PTRN - PTRACN - PTLPN  
 - PTTRAN.