



STATE OF ILLINOIS  
HEALTH FACILITIES AND SERVICES REVIEW BOARD

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

<b>DOCKET NO:</b> H-04	<b>BOARD MEETING:</b> December 14, 2021	<b>PROJECT NO:</b> 21-025	<b>PROJECT COST:</b>  Original: \$0
<b>FACILITY NAME:</b> Greater Chicago Center for Advanced Surgery, LLC		<b>CITY:</b> Des Plaines	
<b>TYPE OF PROJECT:</b> Non-Substantive			<b>HSA: VII</b>

**DESCRIPTION:** The Applicants [Greater Chicago Center for Advanced Surgery, LLC and Solomon Holdings, LLC] are asking the State Board to approve the addition of podiatry and neurosurgical surgical services at this ASTC. There is no cost to this project and expected completion date is June 30, 2022.

The purpose of the Illinois Health Facilities Planning Act is to establish a procedure (1) which requires a person establishing, constructing or modifying a health care facility, as herein defined, to have the qualifications, background, character and financial resources to adequately provide a proper service for the community; (2) that promotes the orderly and economic development of health care facilities in the State of Illinois that avoids unnecessary duplication of such facilities; and (3) that promotes planning for and development of health care facilities needed for comprehensive health care especially in areas where the health planning process has identified unmet needs. Cost containment and support for safety net services must continue to be central tenets of the Certificate of Need process. (20 ILCS 3960/2)

The Certificate of Need process required under this Act is designed to restrain rising health care costs by preventing unnecessary construction or modification of health care facilities. The Board must assure that the establishment, construction, or modification of a health care facility or the acquisition of major medical equipment is consistent with the public interest and that the proposed project is consistent with the orderly and economic development or acquisition of those facilities and equipment and is in accord with the standards, criteria, or plans of need adopted and approved by the Board. Board decisions regarding the construction of health care facilities must consider capacity, quality, value, and equity.

Information received by the State Board regarding this project can be found at this address:  
<https://www2.illinois.gov/sites/hfsrb/Projects/Pages/Greater-Chicago-Center-for-Advanced-Surgery,-Des-Plaines---21-025.aspx>

## **EXECUTIVE SUMMARY**

### **PROJECT DESCRIPTION:**

- The Applicants [Greater Chicago Center for Advanced Surgery, LLC and Solomon Holdings, LLC] are asking the State Board to approve the addition of podiatry and neurosurgical surgical services at this ASTC. There is no cost to this project and the expected completion date is June 30, 2022.
- On December 10, 2019, the State Board approved Permit#19-032 for the establishment of an ambulatory surgical treatment center in Des Plaines, Illinois. The ASTC included two Class C operating rooms, one procedure room, nine recovery stations, and all ancillary and support areas required by licensure and accreditation. Orthopedic surgery and pain management services were approved to be provided at the ASTC. The project has been obligated with an expected completion date of July 30, 2022. The anticipated cost of the project is \$8,041,380.

### **WHY THE PROJECT IS BEFORE THE STATE BOARD:**

- The Applicants state the purpose of this project is to provide podiatry and neurosurgery to improve the health care and well-being of the market area population that consists of the far northwestern portion of Chicago and the suburban communities surrounding the ASTC's Des Plaines location.

### **SUMMARY**

- Under current State Board rules to add a surgical specialty to an approved ASTC requires approval of the State Board. Greater Chicago Center for Advanced Surgery has not been licensed and is still under development and are requesting to add two surgical procedures [neurosurgery and podiatry] to the two surgical specialties previously approved [orthopedic and pain management].
- There are 11 ASTCs in the 10-mile GSA including the Applicants' ASTC. Two of the ASTCs are not operational [Greater Chicago Center for Surgery and North Suburban Pain & Spine Institute] and two ASTCs provide gastro procedures only [Northwest Endoscopy Center and Presence Lakeshore Gastroenterology].
- Four ASTCs are currently approved to provide podiatry surgical services in this 10-mile GSA [Golf Surgical Center, NW Community Day Surgery Center, NW Community Foot and Ankle Center, and Northwest Surgicare] all are currently underutilized. Two ASTCs have been approved to provide neurosurgery surgical services in the 10-mile GSA [Northwest Surgicare and North Suburban Pain and Spine Institute]. Northwest Surgicare is underutilized, and North Suburban Pain and Spine is not operational. There are five hospitals in the 10-mile GSA four of the five hospitals are not at target occupancy.

<b>Criteria</b>	<b>Reasons for Non-Compliance</b>
77 ILAC 1110.235 (2) – Service to Planning Area Residents	The Applicants are required to document that the primary purpose of the project will be to provide necessary health care to the residents of the geographic service area (GSA) in which the proposed project will be physically located. The Applicants were not able to do that. [See Pages 6 and 7 of this report]
77 ILAC 1110.235 (6) – Service Accessibility	The Applicants are to provide documentation that the service accessibility will be improved with the approval of podiatry neurosurgery surgical specialties. The Applicants were not able to meet one of the four conditions of this criteria. There are ASTCs and Hospitals in the 10-mile GSA providing the surgical specialties being proposed to be added to Greater Chicago Center for Advance Surgery that are currently

Criteria	Reasons for Non-Compliance
	underutilized. It does not appear service accessibility will not be improved. [See Pages 8 and 9 of this report]
77 ILAC 1110.235 (7) – Unnecessary Duplication/Maldistribution	There are existing ASTC providing podiatry and neurosurgery that have sufficient capacity to accommodate the demand identified by the proposed project. The Applicants are proposing to redirect podiatry surgical services from NW Foot and Ankle Center to the Greater Chicago Center for Surgery and neurosurgery from two hospitals in Chicago to the ASTC. The proposed movement will impact an ASTC in the 10-mile GSA. [See Pages 9 thru 11 of this report]



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**STATE BOARD STAFF REPORT**

**Project #21-025**

**Greater Chicago Center for Advanced Surgery**

<b>APPLICATION/CHRONOLOGY/SUMMARY</b>	
Applicants	Greater Chicago Center for Advanced Surgery, LLC, Solomon Holdings, LLC
Facility Name	Greater Chicago Center for Advanced Surgery, LLC
Location	999 East Touhy Avenue 3 <sup>rd</sup> Floor, Des Plaines, Illinois
Permit Holder	Greater Chicago Center for Advanced Surgery, LLC, Solomon Holdings, LLC
Operating Entity/Licensee	Greater Chicago Center for Advanced Surgery, LLC.
Owner of Site	DPM7, LLC and ALM7, LLC
Total GSF	10,048 Total GSF
Application Received	August 18, 2021
Application Deemed Complete	August 19, 2021
Review Period Ends	October 18, 2021
Financial Commitment Date	December 14, 2021
Project Completion Date	June 30, 2022
Review Period Extended by the State Board Staff?	No
Can the Applicants request a deferral?	Yes
Expedited Review?	No

**I. Project Description**

The Applicants (Greater Chicago Center for Advanced Surgery, LLC and Solomon Holdings, LLC) propose to add podiatry and neurosurgery surgical services. There is no cost to the project. The expected completion date June 30, 2022.

**II. Summary of Findings**

A. State Board Staff finds the proposed project appears **not** to be in conformance with the provisions of 77 ILAC 1110 (Part 1110).

B. 77 ILAC 1120 (Part 1120) is not applicable to this project.

**III. General Information**

The Applicants are Greater Chicago Center for Advanced Surgery, LLC and Solomon Holdings, LLC. Greater Chicago Center for Advanced Surgery, LLC is a new Illinois Limited Liability Corporation and Solomon Holdings, LLC is a Delaware Limited Liability Corporation formed on January 28, 2013. Financial commitment will occur at the time of permit issuance. The project is considered a non-substantive project subject to a Part 1110 review only.

#### **IV. Health Service Area**

The ASTC is in the HSA VII Health Service Area. The HSA VII Health Service Area contains the Illinois Counties of DuPage and Suburban Cook County. The geographical service area for this project is a 10-mile radius for a facility located in DuPage and Cook County. There are approximately 68 zip codes and 1.5 million residents in this 10-mile GSA. The Applicants defined the geographic service area for the ASTC as generally including those portions of Cook County and northeastern DuPage County located south of the Cook County/Lake County line, north of 1-290/1-88, west of Western Avenue in Chicago, and east of Schaumburg. The Applicants have identified 11 ASTCs and 5 Hospitals within the 10-mile Geographical Service Area (“GSA”) [See Table Three at the end of this report].

#### **V. Background of the Applicants, Purpose of Project, Safety Net Impact Statement, and Alternatives**

##### **A) Criterion 1110.110 (a) – Background of the Applicants**

The Applicants are Greater Chicago Center for Advanced Surgery, LLC and Solomon Holdings, LLC. Greater Chicago Center for Advanced Surgery, LLC is owned, in its entirety, by Solomon Holdings, LLC. Solomon Holdings, LLC is owned equally by Anna Dvinsky and Benjamin Domb, MD. The Applicants attest that no adverse action has been taken against the Greater Chicago Center for Advanced Surgery, LLC and have granted the State Board and the Illinois Department of Public Health access to any documents necessary to verify information in the Application for Permit. The site of the ASTC is in compliance with the Illinois Executive Order #2006-5, *"Construction Activities in Special Flood Hazard Area"*<sup>1</sup> and with the Illinois State Agency Historic Resources Preservation Act (20 ILCS 3420)

##### **B) Criterion 1110.110 (b) – Purpose of the Project**

According to the Applicants’ the purpose is to provide neurosurgery and podiatry in the low-cost setting of an ASTC. According to the Applicants the problem to be resolved by this Application is to improve access in the 10-mile GSA radius. The Applicants are proposing to redirect podiatry surgical services from NW Foot and Ankle Center to the Greater Chicago Center for Surgery and neurosurgery from two hospitals in Chicago to the ASTC.

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<sup>1</sup> Illinois Executive Order #2006-5 requires State Agencies responsible for regulating or permitting development within Special Flood Hazard Areas shall take all steps within their authority to ensure that such development meets the requirements of Executive Order #2006-5.

**C) Criterion 1110.110 (c) – Safety Net Impact <sup>2</sup>**

The proposed project is considered a non-substantive project a safety net impact statement is not required.

**D) Criterion 1110.110(c) – Alternatives to the Proposed Project**

The Applicants considered one alternative to the proposed project to add an operating room to accommodate the surgical specialties being added. This alternative was rejected because the ASTC is in leased space in an office building without the ability to expand physically.

**VI. Project Scope and Size, Utilization and Assurance**

**A) Criterion 1110.120 (a) - Size of Project**

The Applicants are not adding additional gross square footage to the ASTC. This criterion is not applicable.

**B) Criterion 1110.120 (b) – Projected Utilization**

The Applicants are estimating adding 501 hours to the ASTC within two years after project completion which is estimated to be June 2024.

**In response to this criterion the Applicants stated:**

*“The specialty-specific time per case data from the Health Services Area was used to convert the number of referrals to hours of operating room time. Based on the previously documented hours plus the hours projected from the two physician letters included in this CON application, a total of 1,771 hours of needed operating room time are projected for the second year of the ASTC's operation, therein "justifying" the two Class C operating rooms approved as part of Permit 19-032.”*

The Applicants have sufficient capacity to accommodate the 501 additional hours proposed by this project.

**VII. Non-Hospital Based Ambulatory Surgical Treatment Center Services**

**A) Criterion 1110.235 (b) (2) (A) (B) – Planning Area Need**

There is no need formula for ASTCs or the number of surgical/treatment rooms in a GSA.

**B) Criterion 1110.235 (c) (2) (B) Service to Geographic Service Area Residents**

*The applicant shall document that the primary purpose of the project will be to provide necessary health care to the residents of the geographic service area (GSA) in which the proposed project will be physically located.*

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<sup>2</sup> Health Safety Net Services have been defined as services provided to patients who are low-income and otherwise vulnerable, including those uninsured and covered by Medicaid. (Agency for Healthcare Research and Quality, Public Health Services. U.S. Department of Health and Human Services, "The Safety Net Monitoring Initiative," AHRQ Pub. No. 03-P011, August 2003) (Application for Permit 18-031)

The Geographic Service Area for this project is a 10-mile radius. There are 68 zip codes within this 10-mile GSA with a population of approximately 1,465,729. The Applicants are required to document that the primary purpose of the project will be to provide necessary health care to the residents of the geographic service area (GSA) in which the proposed project will be physically located. The Applicants were unable to do that. The Applicants have not met the requirements of this criterion.

In response to the criterion the Applicants stated, *“the expectation that patients will come from a wider area than that experienced by most ASTCs, is viewed as a positive by the applicant, rather than a negative, because residents of a wider geographic area be able to take advantage of the surgical procedures heretofore not provided in the HFSRB-defined GSA.”*

**B) Criterion 1110.235 (c) (3) - Service Demand – Establishment of an ASTC Facility or Additional ASTC Service**

The Applicants provided two referral letters from Doctor Weil and Doctor Lichtenbaum documenting their historical referrals to licensed health care facilities for a 24-month period. Doctor Weil is proposing to refer 275 patients for podiatry surgical services to the ASTC and Doctor Lichtenbaum is proposing to refer 50 patients for neurosurgery surgical services to the ASTC.

<b>TABLE ONE</b> Historical Referrals		
<b>Weil</b>	<b>7/1/2019- 6/30/2020</b>	<b>7/1/2020- 6/30/2021</b>
Northwest Community Foot and Ankle	179	235
Hawthorne Surgery Center	0	10
Northwest Community Hospital	0	5
Northwest Community Day Surgery Center	0	25
Total	179	275
<b>Lichtenbaum</b>	<b>7/1/2019- 6/30/2020</b>	<b>7/1/2020- 6/30/2021</b>
Presence St. Joseph Hospital	97	111
Presence St. Mary and Elizabeth Hospital	24	28
Total	121	139

**Applicants’ response to this criterion.**

*“Sufficient demand, as discussed below, is present to support the proposed project, which is limited to the addition of podiatric surgery and neurosurgery as specialties to be provided at the ASTC, and to provide an accessible site for the two surgeons (and potentially additional surgeons) providing referral letters to provide outpatient surgery in the low-cost environment provided by an ASTC. The proposed*

*project does not involve the addition of capacity (additional operating rooms or procedure rooms) to the ASTC or to the service area.” Last, it should be noted that all procedures performed in the ASTC will be elective, and scheduled in advance, and that follow-up care is provided in the physicians' offices rather than the ASTC, therein limiting a patient's travel to the ASTC to a single occurrence. As a result, the desirability of having ASTC services located within a patient's GSA, differs from that of a hospital, and is relatively irrelevant for the ASTC setting.”*

**C) Criterion 1110.235 (c) (5) - Treatment Room Need Assessment**

The Applicants are not proposing to add operating or procedure rooms as part of this Application for Permit. The Applicants are estimating 1.48 hours for podiatry surgery and 1.89 hours for neurosurgery. The Applicants are estimating adding a total of 501 hours within two years after project completion.

<b>TABLE TWO</b>			
Time per Proposed Referrals			
Specialty	Proposed Referrals	Est. Hours	Total Hours
Podiatry	275	1.48	407
Neurosurgery	50	1.89	94.5
Total			501

**D) Criterion 1110.235 (6) - Service Accessibility**

*The proposed ASTC services being established or added are necessary to improve access for residents of the GSA. The applicant shall document that at least one of the following conditions exists in the GSA:*

- A) There are no other IDPH-licensed ASTCs within the identified GSA of the proposed project.*
- B) The other IDPH-licensed ASTC and hospital surgical/treatment rooms used for those ASTC services proposed by the project within the identified GSA are utilized at or above the utilization level specified in 77 Ill. Adm. Code 1100.*
- C) The ASTC services or specific types of procedures or operations that are components of an ASTC service are not currently available in the GSA or that existing underutilized services in the GSA have restrictive admission policies.*
- D) The proposed project is a cooperative venture sponsored by 2 or more persons, at least one of which operates an existing hospital. Documentation shall provide evidence that:*

- A) There are existing ASTCs within the 10-mile GSA.
- B) Not all the ASTCs and Hospital's operating/procedure rooms are utilized at the target occupancy of 1,500 hours per operating/procedure room in the 10-mile GSA.
- C) The project is not a joint venture with a hospital.
- D) There are five hospitals within this 10-mile GSA. Four of the five hospitals have the capacity to accommodate the procedures being proposed by this project.

The Applicants have not met the requirements of this criterion.

**Applicants' response to this Criterion.**

*“The applicants cannot meet the requirements of this review criterion. Those requirements, as they apply to this project are:*



1. *there are no IDPH-licensed ASTCs within 10 miles of the site.*
2. *all existing hospital and ASTC-based operating rooms located within 10 miles of the site are operating at the HFSRB's target utilization level.*
3. *the procedures to be provided in the ASTC are not being provided at a hospital or ASTC within 10 miles of the site, or that the providing facility has restrictive admissions policies; or*
4. *the project is a cooperative venture with a hospital that has sufficient utilization to "justify" its operating rooms as well as those of the ASTC."*

**E) Criterion 1110.235 (7) - Unnecessary Duplication/Maldistribution**

- A) *The applicant shall document that the project will not result in an unnecessary duplication. The applicant shall provide the following information for the proposed GSA zip code areas identified in subsection (c)(2)(B)(i):*
- B) *The applicant shall document that the project will not result in maldistribution of services. Maldistribution exists when the GSA has an excess supply of facilities and ASTC services characterized by such factors as, but not limited to:*
- C) *The applicant shall document that, within 24 months after project completion, the proposed project:*
  - i) *will not lower the utilization of other area providers below the utilization standards specified in 77 Ill. Adm. Code 1100; and*
  - ii) *will not lower, to a further extent, the utilization of other GSA facilities that are currently (during the latest 12-month period) operating below the utilization standard*

**1. Maldistribution**

There is a total of 138 operating/procedure rooms in the 10-mile GSA. There are approximately 1,465,729 residents in the 10-mile GSA. The ratio of operating/procedure rooms per 1,000 population is .0955 within this GSA [ $140 \text{ operating/procedure rooms} \div (1,465,729 / 1,000 \text{ or } 1465.7) = .0955$ ].

The State of Illinois population is 12,812,508 (2020) and 2,501 operating procedure rooms (2020 data). The ratio of operating/procedure rooms per 1,000 population in the State of Illinois is .1925. To have a surplus of operating/procedure rooms within the 10-mile GSA the ratio of population to operating/procedure rooms must be 1.5 times the State of Illinois ratio or .2887 per 1,000 population. There is not a surplus of operating/ procedure rooms in the 10-mile GSA.

**2. Unnecessary Duplication of Service**

There are 11 ASTCs in the 10-mile GSA including the Applicants ASTC. Two of the ASTCs are not operational [Greater Chicago Center for Surgery and North Suburban Pain & Spine Institute] and two ASTCs provide gastro procedures only [Northwest Endoscopy Center, Presence Lakeshore Gastroenterology].

Four ASTCs currently provide podiatry surgical services in this GSA [Golf Surgical Center, NW Community Day Surgery Center, NW Community Foot and Ankle Center, and Northwest Surgicare]. All are currently underutilized.

Two ASTCs have been approved to provide neurosurgery surgical services [Northwest Surgicare and North Suburban Pain and Spine Institute]. Northwest Surgicare is underutilized, and North Suburban Pain and Spine Institute is not operational.

There are five hospitals in the 10-mile GSA four of the five hospitals are not at target occupancy.

#### **Applicants' response to this criterion.**

*"There are ten ASTCs, five of which are approved to provide either or both of the surgical specialties addressed in this CON application. Those five facilities, and their podiatric and neurosurgical 2019 volumes are presented below.*

<u>ASTC</u>	<u>Podiatric</u>	<u>Neurosurgery</u>
<i>LGH Golf Surgical Center</i>	<i>Approved</i>	<i>1<sup>3</sup></i>
<i>N. Suburban Pain &amp; Spine Inst.*</i>	<i>N/A</i>	<i>N/A</i>
<i>Northwest Comm. Day Surgery</i>	<i>191</i>	<i>Not Approved</i>
<i>NW Comm. Foot &amp; Ankle Ctr.</i>	<i>563</i>	<i>Not Approved</i>
<i>NW Surgicare HealthSouth</i>	<i>1</i>	<i>16</i>
<i>*not operational in 2019</i>		

*It should be noted that only three [two]<sup>4</sup> ASTCs in the GSA are approved for the provision of neurosurgical procedures, with a total of only seventeen such procedures being performed during 2019. One of those ASTCs was not operational in 2019, and the volume of neurosurgical procedures to be performed in that facility is not known. A second ASTC performed only one neurosurgical procedure in 2019 and the third ASTC performed only sixteen procedures that year. In addition to the five ASTCs identified above, five hospitals providing surgical services are also located in the GSA. Those hospitals, along with their 2019 outpatient surgical volumes for podiatric surgery and neurosurgery are identified in the table below."*

<u>Hospital</u>	<u>Podiatric</u>	<u>Neurosurgery</u>
<i>Advocate Luth. General Hosp.</i>	<i>309</i>	<i>146</i>
<i>Alexian Bros. Med. Center</i>	<i>436</i>	<i>163</i>
<i>Holy Family Medical Center</i>	<i>33</i>	<i>0</i>
<i>Resurrection Medical Center</i>	<i>135</i>	<i>193</i>
<i>Northwest Community Hosp.</i>	<i>204</i>	<i>280</i>

### **3. Impact on Other Health Facilities**

<sup>3</sup> Golf Surgical Center per Correspondence received July 3, 2014 have not been approved to provide neurosurgery but have been approved to provide podiatry surgical services.

<sup>4</sup> Correction made by Board Staff to reflect correct surgical services approved by the State Board.

The Applicants propose to redirect podiatry surgical services from one ASTC [NW Foot and Ankle Center-Des Plaines] to another and move neurosurgery services from a hospital in Chicago to an ASTC. The redirection from one ASTC in the GSA to another ASTC in the GSA will impact the NW Foot and Ankle Center-Des Plaines.

**Applicants' response to this criterion:**

*"Due to the limited nature of the proposed project, and because of where the referring surgeons are currently performing their cases, the impact on area providers will be negligible. Currently, there are four ASTCs in the HFSRB-determined geographic service area ("GSA") that provide either podiatric surgery or neurosurgery (one of which was not operational in 2019), and one ASTC that is approved to provide both specialties. During 2019, cumulatively, the utilization of these five ASTCs was 16,235 hours. In addition, there are five hospitals (one of which is certified as a long-term acute care hospital), providing 107,339 hours of operating room utilization; resulting in a total of 123,574 hours of operating room utilization in the GSA during 2019." Through the proposed project, and as documented, 1,771 hours of operating room time are to be relocated to the Greater Chicago Center for Advanced Surgery, or 1.4% of the volume of both the hospitals and the ASTCs located in the GSA. As a result, the impact on area providers is negligible."*

**F) Criterion 1110.235 (8) - Staffing**

The Medical Director of the proposed ASTC will be Ajay C. Lall, MD, MS, and a copy of his CV has been provided by the Applicants. According to the Applicants' staffing will be consistent with applicable licensure and accreditation standards. Staff will be recruited through a combination of word-of-mouth, newspaper advertisements, and if necessary, professional publications.

**G) Criterion 1110.235 (9) - Charge Commitment**

The Applicants provided the required statement at page 64 of the Application for Permit and a list of charges at pages 65-67 of the Application.

**H) Criterion 1110.235 (10) - Assurances**

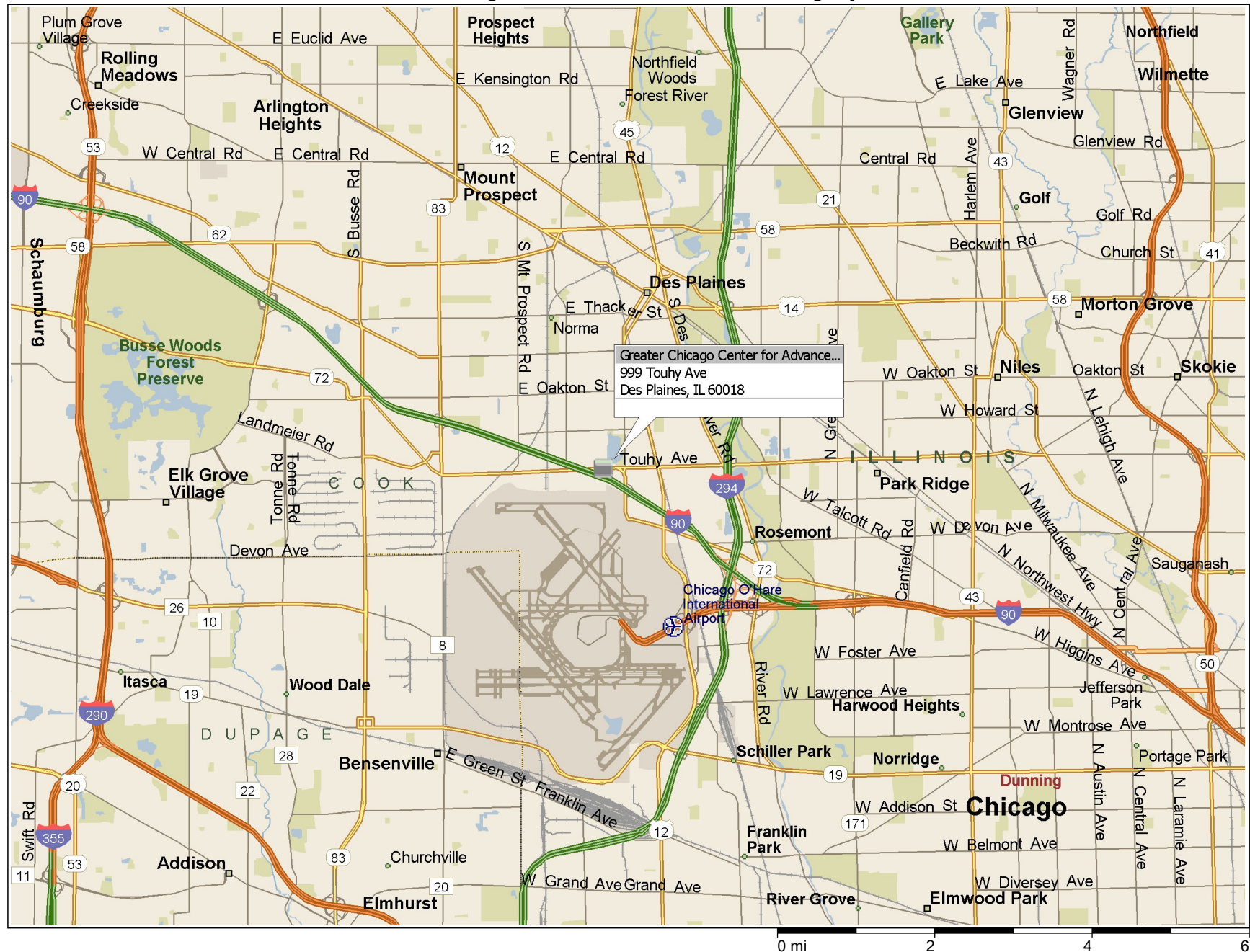
The Applicants responded to this criterion by stating

*“With the signatures on the Certification pages of this Certificate of Need application, the applicants attest that a peer review program will be implemented at the proposed ASTC that evaluates whether patient outcomes are consistent with quality standards established by professional organizations for ASTC services, and if outcomes do not meet or exceed those standards, that a quality improvement plan will be initiated. Further, the applicants anticipate that in the second year of operation, the annual utilization of the operating rooms will meet or exceed the utilization standard specified in 77 Ill. Adm. Code 1100. This anticipation is based on the applicant's knowledge of the practices of the physicians anticipated to refer patients to the proposed ASTC.”*

**TABLE THREE**  
ASTCs in the 10-mile GSA <sup>(1)</sup>

TABLE FOUR Hospitals in the 10-Mile GSA <sup>(1)</sup>					
Facility	City		Operating/Procedure Rooms	2020 Hours	Met Standard
Advocate Lutheran General Hospital	Park Ridge		35	46,874	No
Alexian Brothers Medical Center <sup>(1)</sup>	Elk Grove		22	22,263	No
Northwest Community Hospital	Arlington Heights		13	26,404	Yes
Presence Holy Family Hospital	Des Plaines		8	236	No
Presence Resurrection Medical Center	Chicago		18	11,854	No
1. Operating Procedure Hours from 2020 Hospital Profiles					

## 21-025 Greater Chicago Center for Advanced Surgery - Des Plaines



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