

County: Charleston

Facility Type: Abortion Clinic

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
CHARLESTON WOMEN'S MEDICAL CENTER 1312 ASHLEY RIVER RD CHARLESTON, SC 29407-5365 FAC.#:843-571-5161 BOYLE LEISA PH#: 843-571-5161 Facility Email: JANICECWMC@AIM.COM	Charleston / Ltd. Liability 1312 ASHLEY RIVER RD CHARLESTON, SC 29407-5365 SC WOMEN'S CENTER LLC AB-0005 / 07/31/2018	1

Totals For Facility/License Type: Abortion Clinic

Number of Activities/Facilities licensed: 1 Number Licensed Units: 1

County: Charleston

Facility Type: Adult Day Care

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
ACTIVE DAY OF CHARLESTON 1954 ASHLEY RIVER RD STE K CHARLESTON, SC 29407 FAC.#:843-762-5291 STROUD LYNN PH#: Facility Email: CHARLESTON@ACTIVEDAY.COM	Charleston / Corporation 6 NESHAMINY INTERPLEX STE 401 FEASTERVILLE TREVOLVE, PA 19053-6964 ACTIVE SC ONE INC ADC-0130 / 10/31/2018	68
Number of Participants: 68		
ADULT DAYCARE 41 1572 HWY 41 MOUNT PLEASANT, SC 29466 FAC.#:843-856-4203 HABERSHAM CAROLINE C PH#: 843-708-3002 Facility Email: ADULTDAYCARE41@ATT.NET	Charleston / Limited Liability 1572 HWY 41 MOUNT PLEASANT, SC 29466 ADULT DAY CARE 41 LLC ADC-0301 / 03/31/2018	21
Number of Participants: 21		
CLUB HORIZONS OF CHARLESTON 8088 RIVERS AVE NORTH CHARLESTON, SC 29406 FAC.#:843-343-4865 BELISSARY ANN PH#: 843-343-4865 Facility Email: ANN@NEWGENERATIONSADC.COM	Charleston / Limited Liability 2111 W JODY RD FLORENCE, SC 29501-2031 CLUB HORIZONS OF CHARLESTON LLC ADC-0418 / 06/30/2018	151
Number of Participants: 151		
EAST COOPER SENIOR DAY CARE 999 LAKE HUNTER CIR STE C MOUNT PLEASANT, SC 29464-5427 FAC.#:843-216-1070 JENKINS MARTHA E PH#: 843-216-1070 Facility Email: MARTHA.JENKINS77@YAHOO.COM	Charleston / Ltd. Liability 999 LAKE HUNTER CIR STE C MOUNT PLEASANT, SC 29464-5427 MARTHA E AND JOSIE JENKINS JR LLC ADC-0280 / 12/31/2017	24
Number of Participants: 24		
SEA ISLAND ADULT DAY CENTER 3627 MAYBANK HWY JOHNS ISLAND, SC 29455-4836 FAC.#:843-559-5502 KIRKLAND MURIEL L PH#: 843-559-4137 Facility Email: TRR@SICHCC.ORG	Charleston / Non-Profit Corporation 3627 MAYBANK HWY JOHNS ISLAND, SC 29455-4836 SEA ISLAND COMPREHENSIVE HEALTH CARE CORPORATION ADC-0286 / 11/30/2018	31
Number of Participants: 31		
TRUCARE ADULT DAY CENTER 9225 UNIVERSITY BLVD STE E-1A NORTH CHARLESTON, SC 29406-9149 FAC.#:843-569-7200 YOUNG VALERIE D PH#: 843-569-7200 Facility Email: TRUCAREADULTDAYC@BELLSOUTH.NET	Charleston / Corporation PO BOX 325 LADSON, SC 29456-0325 TRUCARE HEALTH SERVICES INC ADC-0225 / 07/31/2018	35
Number of Participants: 35		

Totals For Facility/License Type: <u>Adult Day Care</u>	
Number of Activities/Facilities licensed: _____	Number Licensed Units: _____
6	330

County: Charleston

Facility Type: Ambulatory Surgery

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
CHARLESTON ENDOSCOPY CENTER 1962 CHARLIE HALL BLVD CHARLESTON, SC 29414-5837 FAC.#:843-722-8000 PUNTENY WANDA M PH#: 843-722-8000 Facility Email: KIM.OWEN@CHARLESTONGI.COM	Charleston / Limited Liability 1962 CHARLIE HALL BLVD CHARLESTON, SC 29414-5837 CHARLESTON ENDOSCOPY CENTER LLC ASF-0079 / 01/31/2018	5
Operating Rooms: 0 Procedure Rooms: 0 Endoscopy Rooms: 5		
CHARLESTON SURGERY CENTER 2690 LAKE PARK DR NORTH CHARLESTON, SC 29406-9108 FAC.#:843-764-0992 MEDLEY HELENE PH#: 843-764-0992 Facility Email: HELENE.MEDLEY@SCASURGERY.COM	Charleston / Limited Liability Limited Partnership 2690 LAKE PARK DR NORTH CHARLESTON, SC 29406-9108 CHARLESTON SURGERY CENTER LP ASF-0011 / 03/31/2018	6
Operating Rooms: 4 Procedure Rooms: 1 Endoscopy Rooms: 1		
COLORECTAL ENDOSURGERY INSTITUTE OF THE CAROLINAS 1439 STUART ENGALS BLVD UNIT 100 MOUNT PLEASANT, SC 29464-3686 FAC.#:843-531-6615 FENN CHRISTIE PH#: Facility Email: CFENN@COLONSURGEONSOFCARLESTON.COM	Charleston / Limited Liability 1439 STUART ENGALS BLVD UNIT 100 MOUNT PLEASANT, SC 29464-3686 COLORECTAL ENDOSURGERY INSTITUTE OF THE CAROLINAS LLC ASF-0116 / 10/31/2018	2
Operating Rooms: 0 Procedure Rooms: 0 Endoscopy Rooms: 2		
ELMS ENDOSCOPY CENTER 2671 ELMS PLANTATION BLVD NORTH CHARLESTON, SC 29406-9165 FAC.#:843-797-6800 JOHNSON NANCY PH#: 843-797-6800 Facility Email: LANDC@AMSURG.COM	Charleston / Ltd. Liability 1A BURTON HILLS BLVD NASHVILLE, TN 37215-6187 ELMS ENDOSCOPY CENTER LLC ASF-0098 / 03/31/2018	3
Operating Rooms: 0 Procedure Rooms: 0 Endoscopy Rooms: 3		
LOWCOUNTRY AMBULATORY CENTER 1844 WALLACE SCHOOL RD CHARLESTON, SC 29407-4822 FAC.#:843-556-2545 NELSON PAIGE PH#: 843-556-2545 Facility Email: PNELSON.LAC@GMAIL.COM	Charleston / Limited Liability 1844 WALLACE SCHOOL RD CHARLESTON, SC 29407-4822 LOWCOUNTRY AMBULATORY CENTER LLC ASF-0118 / 02/28/2018	3
Operating Rooms: 2 Procedure Rooms: 1 Endoscopy Rooms: 0		
PALMETTO ENDOSCOPY CENTER 2073 CHARLIE HALL BLVD CHARLESTON, SC 29414-5834 FAC.#:843-571-0643 BRISSON RICHARD PH#: 843-571-0643 Facility Email: RBRISSON@PALMETTODIGESTIVE.COM	Charleston / Limited Liability 2073 CHARLIE HALL BLVD CHARLESTON, SC 29414-5834 PALMETTO ENDOSCOPY CENTER LLC ASF-0084 / 02/28/2018	2
Operating Rooms: 0 Procedure Rooms: 0 Endoscopy Rooms: 2		

County: Charleston

Facility Type: Ambulatory Surgery

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
PHYSICIANS EYE SURGERY CENTER 2060 CHARLIE HALL BLVD STE 301 CHARLESTON, SC 29414-6066 FAC.#:843-571-4800 BLANTON JENNIFER PH#: 843-571-4800 Facility Email: SBULIG@AMSURG.COM	Charleston / Limited Liability 1A BURTON HILLS BLVD NASHVILLE, TN 37215-6187 PHYSICIANS EYE SURGERY CENTER LLC ASF-0097 / 12/31/2017	5
Operating Rooms: 4 Procedure Rooms: 1 Endoscopy Rooms: 0		
ROPER HOSPITAL AMBULATORY SURGERY & PAIN MANAGEMENT JAMES ISLAND 325 FOLLY RD STE 200 CHARLESTON, SC 29412-2507 FAC.#:843-789-1550 GETSINGER ROBYN PH#: 843-789-1550 Facility Email: ROBYN.GETSINGER@RSFH.COM	Charleston / Non-Profit Corporation 325 FOLLY RD STE 200 CHARLESTON, SC 29412-2507 ROPER HOSPITAL INC ASF-0114 / 01/31/2018	6
Operating Rooms: 4 Procedure Rooms: 2 Endoscopy Rooms: 0		
ROPER ST FRANCIS EYE CENTER 18 FARMFIELD AVE CHARLESTON, SC 29407-7700 FAC.#:843-958-2625 STEPHENS MICHELLE PH#: 843-958-2625 Facility Email: MICHELLE.STEPHENS@RSFH.COM	Charleston / Limited Liability 18 FARMFIELD AVE CHARLESTON, SC 29407-7700 LOWCOUNTRY SURGERY CENTER LLC ASF-0049 / 10/31/2018	4
Operating Rooms: 3 Procedure Rooms: 1 Endoscopy Rooms: 0		
SOUTHEASTERN SPINE INSTITUTE AMBULATORY SURGERY CENTER 1106 CHUCK DAWLEY BLVD STE 100 MOUNT PLEASANT, SC 29464-4195 FAC.#:843-849-1551 EDDINGS ELIZABETH A PH#: 843-849-1551 Facility Email: ELIZABETH.EDDINGS@SOUTHEASTERNSPINE.COM	Charleston / Limited Liability 1106 CHUCK DAWLEY BLVD STE 100 MOUNT PLEASANT, SC 29464-4195 SOUTHEASTERN SPINE INSTITUTE AMBULATORY SURGERY CENTER LLC ASF-0112 / 11/30/2017	3
Operating Rooms: 2 Procedure Rooms: 1 Endoscopy Rooms: 0		
SURGERY CENTER OF CHARLESTON 1849 SAVAGE RD CHARLESTON, SC 29407-4726 FAC.#:843-576-2600 HAWKINS AMANDA PH#: 843-576-2617 Facility Email: AHAWKINS@CHARLESTONENT.COM	Charleston / Limited Liability 1849 SAVAGE RD CHARLESTON, SC 29407-4726 CHARLESTON ENT ASSOCIATES LLC ASF-0117 / 04/30/2018	4
Operating Rooms: 4 Procedure Rooms: 0 Endoscopy Rooms: 0		
TRIDENT AMBULATORY SURGERY CENTER 9313 MEDICAL PLAZA DR STE 102 CHARLESTON, SC 29406-9153 FAC.#:843-797-8992 FISK JOYCE PH#: 843-797-8992 Facility Email: KATHY.SULC@HCAHEALTHCARE.COM	Charleston / Limited Liability 9313 MEDICAL PLAZA DR STE 102 CHARLESTON, SC 29406-9153 TRIDENT AMBULATORY SURGERY CENTER LP ASF-0024 / 05/31/2018	6
Operating Rooms: 6 Procedure Rooms: 0 Endoscopy Rooms: 0		

Totals For Facility/License Type: Ambulatory SurgeryNumber of Activities/Facilities licensed: 12 Number Licensed Units: 49

County: Charleston

Facility Type: Birth Center

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
CHARLESTON BIRTH PLACE 9133 TIMBER ST STE 101 NORTH CHARLESTON, SC 29406-9075 FAC.#:843-818-1123 RATHBUN LESLEY PH#: 843-818-1123 Facility Email: LESLEY@CHARLESTONBIRTHPLACE.COM	Charleston / Corporation 9133 TIMBER ST STE 101 NORTH CHARLESTON, SC 29406-9075 CHARLESTON BIRTH PLACE BC-0007 / 01/31/2018	2

Totals For Facility/License Type: Birth Center

Number of Activities/Facilities licensed: 1 Number Licensed Units: 2

County: Charleston

Facility Type: Body Piercing

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
EXOTIC IMPRESSIONS 8780 RIVERS AVE STE 316 NORTH CHARLESTON, SC 29406-9283 FAC.#:843-797-2280 FINCH MATTHEW D PH#: 843-797-2280 Facility Email: EXOTICIMPRESSIONSSC@GMAIL.COM	Charleston / Ltd. Liability 8780 RIVERS AVE STE 316 NORTH CHARLESTON, SC 29406-9283 EXOTIC IMPRESSIONS LLC BP-0194 / 02/28/2018	1
MUSEUM OF LIVING ARTS 1734 SAVANNAH HWY CHARLESTON, SC 29407-6255 FAC.#:843-225-7127 DAVIS LAURA M PH#: 843-442-9575 Facility Email: MUSEUMOFLIVINGARTS@GMAIL.COM	Charleston / Limited Liability 1734 SAVANNAH HWY CHARLESTON, SC 29407-6255 MUSEUM OF LIVING ARTS LLC BP-0192 / 04/30/2018	1
MUSEUM OF LIVING ARTS SPRING ST 47 SPRING ST UNIT A CHARLESTON, SC 29403-5416 FAC.#:843-937-5300 DAVIS LAURA M PH#: 843-442-9575 Facility Email: MUSEUMOFLIVINGARTS@GMAIL.COM	Charleston / Limited Liability 1734 SAVANNAH HWY STE A CHARLESTON, SC 29407-6255 PANCHO AND LEFTY LLC BP-0242 / 12/31/2018	1
PIERCING PERFECTION OF NORTH CHARLESTON II 3025 ASHLEY PHOSPHATE RD STE A3 NORTH CHARLESTON, SC 29418-8447 FAC.#:843-793-1708 DUNN JAMES A PH#: 843-793-1708 Facility Email: PIERCINGPERFECTION@YAHOO.COM	Charleston / Sole Proprietorship 3025 ASHLEY PHOSPHATE RD STE A3 NORTH CHARLESTON, SC 29418-8447 DUNN JAMES A BP-0271 / 12/31/2017	1

Totals For Facility/License Type: Body PiercingNumber of Activities/Facilities licensed: 4 Number Licensed Units: 4

County: Charleston

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
ASHLEY GARDENS ALZHEIMER'S SPECIAL CARE CENTER 2290 HENRY TECKLENBURG DR CHARLESTON, SC 29414 FAC.#:843-556-4100 CARLETON KELLY JEAN PH#: 843-556-4100 Facility Email: KELLYCARLETON@JEASENIORLIVING.COM	Charleston / Limited Liability PO BOX 820528 VANCOUVER, WA 98682-0011 CHARLESTON CARE GROUP LLC CRC-1595 / 06/30/2018	66
Alzheimer Care:Yes Max # Resident:66	Alzheimer Unit: Yes Max # Beds: 66	
Certifications:None		
ASHLEY LANDING ASSISTED LIVING 4550 GREAT OAK DR NORTH CHARLESTON, SC 29418-5001 FAC.#:843-760-0831 BAKER GEORGE M PH#: 843-760-0831 Facility Email: GMBAKER@AGAPESENIOR.COM	Charleston / Ltd. Liability 4550 GREAT OAK DR NORTH CHARLESTON, SC 29418-5001 AGAPE ASSISTED LIVING OF NORTH CHARLESTON LLC CRC-1288 / 02/28/2018	100
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
ASHLEY RIVER PLANTATION 2333 ASHLEY RIVER RD CHARLESTON, SC 29414-4755 FAC.#:843-766-9898 DAVIS SEAN C PH#: 843-766-9898 Facility Email: LICENSING@5SSL.COM	Charleston / Limited Liability 400 CENTRE ST NEWTON, MA 02458-2094 SNH SE ASHLEY RIVER TENANT LLC CRC-1376 / 06/30/2018	123
Alzheimer Care:Yes Max # Resident:51	Alzheimer Unit: Yes Max # Beds: 51	
Certifications:None		
BELL'S PROFESSIONAL RESIDENTIAL HOME CARE 1910 DALTON ST CHARLESTON, SC 29406-3961 FAC.#:843-744-1765 BELL TROY A PH#: 843-744-1765 Facility Email: BELLTRY7@AOL.COM	Charleston / Ltd. Liability PO BOX 72034 NORTH CHARLESTON, SC 29415-2034 BELL'S PROFESSIONAL RESIDENTIAL HOME CARE LLC CRC-1209 / 05/31/2018	20
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
BISHOP GADSDEN EPISCOPAL RETIREMENT COMMUNITY 1 BISHOP GADSDEN WAY CHARLESTON, SC 29412-3500 FAC.#:843-762-3300 TIPTON SARAH E H PH#: 843-762-3300 Facility Email: SARAH.TIPTON@BISHOPGADSDEN.ORG	Charleston / Non-Profit Corporation 1 GADSDEN WAY CHARLESTON, SC 29412 BISHOP GADSDEN EPISCOPAL RETIREMENT COMMUNITY CRC-0451 / 11/30/2018	112
Alzheimer Care:Yes Max # Resident:20	Alzheimer Unit: Yes Max # Beds: 20	
Certifications:None		

County: Charleston

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
BOWLES COMMUNITY CARE HOME 9270 N HWY 17 MC CLELLANVILLE, SC 29458-9422 FAC.#:843-887-4180 BOWLES BENJAMIN PH#: 843-887-4180 Facility Email: BBOWCARE@AOL.COM	Charleston / Sole Proprietorship 9270 N HWY 17 MC CLELLANVILLE, SC 29458-9422 BENJAMIN BOWLES CRC-0090 / 09/30/2018	16
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
BOWLES COMMUNITY CARE HOME 2 9274 N HWY 17 MCCLELLANVILLE, SC 29458-9422 FAC.#:843-887-4180 BOWLES BENJAMIN PH#: 843-887-4180 Facility Email: BBOWCARE@AOL.COM	Charleston / Sole Proprietorship 9274 N HWY 17 MCCLELLANVILLE, SC 29458-9422 BOWLES BENJAMIN CRC-1497 / 11/30/2018	5
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
BRIDGE ASSISTED LIVING AT LIFE CARE CENTER OF CHARLESTON 2590 ELMS PLANTATION BLVD NORTH CHARLESTON, SC 29406-8105 FAC.#:843-553-6342 NELSON MICHELLE M PH#: 843-553-6342 Facility Email: MNELSON@CENTURYPA.COM	Charleston / Ltd. Liability 3570 KEITH ST NW CLEVELAND, TN 37312-4309 CHARLESTON RETIREMENT INVESTORS LLC CRC-1064 / 10/31/2018	100
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
BROOKDALE CHARLESTON 2030 CHARLIE HALL BLVD CHARLESTON, SC 29414-5830 FAC.#:843-763-4055 ROBINSON TERRI L PH#: 843-763-4055 Facility Email: TROBINSON1@BROOKDALE.COM	Charleston / Limited Liability 2030 CHARLIE HALL BLVD CHARLESTON, SC 29414-5830 HBP LEASECO LLC CRC-1291 / 09/30/2018	100
Alzheimer Care:Yes Max # Resident:29	Alzheimer Unit: Yes Max # Beds: 33	
Certifications:None		
CABADING HOMES #1 3431 RIVERS AVE NORTH CHARLESTON, SC 29405-7760 FAC.#:843-747-3050 CABADING LOLITA B PH#: 843-745-9182 Facility Email: CABOOTY105@AOL.COM	Charleston / Corporation 3431 RIVERS AVE NORTH CHARLESTON, SC 29405-7760 CABADING HOMES INC CRC-0394 / 07/31/2018	18
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		

County: Charleston

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
CABADING HOMES #2 3435 RIVERS AVE NORTH CHARLESTON, SC 29405-7760 FAC.#:843-745-9182 CABADING LOLITA B PH#: 843-745-9182 Facility Email: CABOOTY105@AOL.COM	Charleston / Corporation 2149 DORCHESTER RD NORTH CHARLESTON, SC 29405-7763 CABADING HOMES INC CRC-0571 / 02/28/2018	15
Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0		
Certifications:None		
CABADING HOMES #3 2149 DORCHESTER RD NORTH CHARLESTON, SC 29405-7763 FAC.#:843-745-9182 CABADING ALLAN M PH#: 843-745-9182 Facility Email: CABOOTY105@AOL.COM	Charleston / CABADING HOMES INC CRC-0825 / 07/31/2018	25
Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0		
Certifications:None		
CAMP COMMUNITY RESIDENCE 1251 CAMP RD JAMES ISLAND, SC 29412-9212 FAC.#:843-795-6983 SIMMONS CYNTHIA Y PH#: 843-795-6983 Facility Email: ETURNER@DSNCC.COM	Charleston / State PO BOX 22708 CHARLESTON, SC 29413-2708 DISABILITIES BOARD OF CHARLESTON COUNTY CRC-1371 / 01/31/2018	8
Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0		
Certifications:None		
CARE WITH LOVE 3408 LENAPE ST NORTH CHARLESTON, SC 29405-7777 FAC.#:843-744-0313 DORSCHER-MCCORMACK DEBORAH PH#: 843-744-0313 Facility Email: CAREWITHLOVE@GMAIL.COM	Charleston / Sole Proprietorship 2240 DOVER ST NORTH CHARLESTON, SC 29405-7939 NELSON TIFFANY CRC-1499 / 11/30/2018	5
Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0		
Certifications:None		
CARE WITH LOVE II 2109 COMMANDER RD NORTH CHARLESTON, SC 29405-7704 FAC.#:843-718-3034 MCCORMACK DEBORAH D PH#: 843-718-3034 Facility Email: SHEILAPNELSON@GMAIL.COM	Charleston / Sole Proprietorship 2109 COMMANDER RD NORTH CHARLESTON, SC 29405-7704 NELSON TIFFANY CRC-1523 / 08/31/2018	5
Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0		
Certifications:None		

County: Charleston

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
CARTER-MAY HOME 1660 INGRAM RD CHARLESTON, SC 29407-4242 FAC.#:843-556-8314 BAUDER JANINE NEWELL PH#: 843-556-8314 Facility Email: JANINE@CATHOLIC-DOC.ORG	Charleston / Corporation 1660 INGRAM RD CHARLESTON, SC 29407-4242 CATHOLIC CHARITIES OF THE DIOCESE OF CHARLESTON INC CRC-0064 / 04/30/2018	25
Alzheimer Care:Yes Max # Resident:1	Alzheimer Unit: No	Max # Beds: 0
Certifications:None		
COOPER HALL AT THE PALMS OF MT PLEASANT 937 BOWMAN RD OFC MOUNT PLEASANT, SC 29464-3222 FAC.#:843-884-6949 WOODWARD GREGORY M PH#: 843-884-6949 Facility Email: LICENSING@5SSL.COM	Charleston / 400 CENTRE ST NEWTON, MA 02458-2094 SNH SE SG TENANT LLC CRC-1432 / 06/30/2018	44
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No	Max # Beds: 0
Certifications:None		
CUMMINGS COMMUNITY RESIDENTIAL CARE HOME 2606 STARK LN NORTH CHARLESTON, SC 29405-5537 FAC.#:843-747-7088 CUMMINGS OLYMPIA W PH#: 843-747-7088 Facility Email: OCUMMINGS03@COMCAST.NET	Charleston / Sole Proprietorship P O BOX 7 GOOSE CREEK, SC 29445-0007 CUMMINGS OLYMPIA W CRC-0891 / 10/31/2018	8
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No	Max # Beds: 0
Certifications:None		
CURAMENG RESIDENTIAL HOME CARE 2021 COSGROVE AVE NORTH CHARLESTON, SC 29405-7710 FAC.#:843-566-1266 REYES MILAGROS L PH#: 843-566-1266 Facility Email: CURAMENGHOMECARE@YAHOO.COM	Charleston / Corporation 2021 COSGROVE AVE NORTH CHARLESTON, SC 29405-7710 JFJ INC CRC-1187 / 11/30/2018	8
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No	Max # Beds: 0
Certifications:None		
DAYSPRING ASSISTED LIVING 5146 TOWLES RD HOLLYWOOD, SC 29449-6119 FAC.#:843-889-9757 PH#: Facility Email: DAYSPRINGSC@YAHOO.COM	Charleston / Ltd. Liability 5146 TOWLES RD HOLLYWOOD, SC 29449-6119 DAYSPRING ASSISTED LIVING LLC CRC-1385 / 04/30/2018	16
Alzheimer Care:Yes Max # Resident:16	Alzheimer Unit: No	Max # Beds: 0
Certifications:None		

County: Charleston

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
DAYSPRING OF JOHNS ISLAND 3455 BOHICKET RD JOHNS ISLAND, SC 29455-7222 FAC.#:843-768-5335 MARSHALL YASSAMIN B PH#: 843-768-5335 Facility Email: DAYSPRINGSC@YAHOO.COM	Charleston / Corporation 3455 BOHICKET RD JOHNS ISLAND, SC 29455-7222 DAYSPRING OF JOHNS ISLAND INC CRC-1915 / 03/31/2018	24
Alzheimer Care:Yes Max # Resident:6	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
DORCAS RESIDENTIAL CARE I 1131 BEXLEY ST NORTH CHARLESTON, SC 29405-4726 FAC.#:843-746-9800 RELLORA WILHELMINA C PH#: 843-747-4800 Facility Email: Not on File	Charleston / Partnership PO BOX 61870 NORTH CHARLESTON, SC 29419-1870 JESUS N AND WILHELMINA C RELLORA CRC-1251 / 11/30/2017	5
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
DORCAS RESIDENTIAL CARE II 1133 BEXLEY ST NORTH CHARLESTON, SC 29405-4726 FAC.#:843-747-4800 RELLORA WILHELMINA C PH#: 843-747-4800 Facility Email: Not on File	Charleston / Partnership PO BOX 61870 NORTH CHARLESTON, SC 29419-1870 JESUS N AND WILHELMINA C RELLORA CRC-1252 / 11/30/2017	5
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
EVERGREEN RESIDENTIAL CARE INC I 1612 EVERGREEN ST CHARLESTON, SC 29407-6263 FAC.#:843-402-6860 PH#: Facility Email: PATCH29311@HOTMAIL.COM	Charleston / Corporation PO BOX 31774 CHARLESTON, SC 29417-1774 EVERGREEN RESIDENTIAL CARE INC CRC-0026 / 03/31/2018	8
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
FARMINGTON COMMUNITY RESIDENCE 1269 CAMP RD JAMES ISLAND, SC 29412-9212 FAC.#:843-795-0766 CAPERS MADLYN PH#: 843-795-0766 Facility Email: ETURNER@DSNCC.COM	Charleston / State PO BOX 22708 CHARLESTON, SC 29413-2708 DISABILITIES BOARD OF CHARLESTON COUNTY CRC-1370 / 01/31/2018	8
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		

County: Charleston

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
FIRST CHOICE HOME CARE FACILITY 2003 COSGROVE AVE NORTH CHARLESTON, SC 29405-5702 FAC.#:843-225-0637 SANDERS JUANITA PH#: 843-225-0637 Facility Email: EMMACRELLORA@GMAIL.COM	Charleston / Partnership 2003 COSGROVE AVE NORTH CHARLESTON, SC 29405-5702 DQR CAMBA/NM CAMBA/GT MARTINEZ/P MARTINEZ/P PAJOTA CRC-0742 / 10/31/2018	8
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
FRANKE HOME 1885 RIFLE RANGE RD MOUNT PLEASANT, SC 29464-9440 FAC.#:843-856-4700 STOLL SANDRA A PH#: 843-856-4700 Facility Email: SSTOLL@FRANKEATSEASIDE.ORG	Charleston / Non-Profit Corporation 300 MINISTRY DR IRMO, SC 29063-2366 LUTHERAN HOMES OF SOUTH CAROLINA INC (NPC) CRC-1082 / 09/30/2018	86
Alzheimer Care:Yes Max # Resident:22	Alzheimer Unit: Yes Max # Beds: 22	
Certifications:None		
GUARDIAN ANGELS RESIDENTIAL CARE 2126 SUCCESS ST NORTH CHARLESTON, SC 29405-7992 FAC.#:843-744-0448 JANKE BONIFACIA E PH#: 843-744-0448 Facility Email: GUARDIANANGELSRCF@YAHOO.COM	Charleston / Corporation 2126 SUCCESS ST NORTH CHARLESTON, SC 29405-7992 GUARDIAN ANGELS ASSISTED LIVING INC CRC-1049 / 11/30/2018	18
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
IVORY'S LOVING CARE RESIDENTIAL FACILITY 2827 SPRUILL AVE NORTH CHARLESTON, SC 29405-8050 FAC.#:843-745-2339 SANDERS JUANITA PH#: 843-745-2339 Facility Email: SISTERSANDERS@COMCAST.NET	Charleston / Partnership 2827 SPRUILL AVE NORTH CHARLESTON, SC 29405-8050 JUANITA SANDERS & GENEVA NELSON CRC-1383 / 04/30/2018	7
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
LADSON'S RESIDENTIAL HOME CARE 1116 CAMP RD CHARLESTON, SC 29412-8831 FAC.#:843-762-6443 LADSON PAULINE M PH#: 843-762-6443 Facility Email: PAULINELADSON@ATT.NET	Charleston / Sole Proprietorship 1116 CAMP RD CHARLESTON, SC 29412-8831 PAULINE LADSON CRC-1256 / 09/30/2018	5
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		

County: Charleston

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
LAMBS ROAD COMMUNITY RESIDENCE 4788 LAMBS RD NORTH CHARLESTON, SC 29418-3521 FAC.#:843-767-1066 SIMMONS CYNTHIA PH#: 843-767-1066 Facility Email: CSIMMONS@DSNCC.COM	Charleston / State PO BOX 22708 CHARLESTON, SC 29413-2708 DISABILITIES BOARD OF CHARLESTON COUNTY CRC-0690 / 09/30/2018	8
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
LANGIT'S ASSISTED LIVING FACILITY 1273 REMOUNT RD NORTH CHARLESTON, SC 29406-3439 FAC.#:843-554-1671 LANGIT CRESENCIA B PH#: 843-554-1671 Facility Email: LANGITSASSISTEDLIVING@COMCAST.NET	Charleston / Private 1273 REMOUNT RD NORTH CHARLESTON, SC 29406-3439 LANGIT'S RESIDENTIAL HOME CARE INC CRC-0861 / 03/31/2018	70
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
LENEVAR COMMUNITY RESIDENCE 1435 W LENEVAR DR CHARLESTON, SC 29407-5118 FAC.#:843-766-3061 COLEMAN SHARON PH#: 843-766-3061 Facility Email: ETURNER@DSNCC.COM	Charleston / State PO BOX 22708, DISABILITIES BOARD OF CHARLESTON COUNTY CHARLESTON, SC 29413-2708 DISABILITIES BOARD OF CHARLESTON COUNTY CRC-0943 / 07/31/2018	8
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
MARIA'S PRIORITY CARE RESIDENTIAL HOME I 3117 MEETING STREET RD NORTH CHARLESTON, SC 29405-7980 FAC.#:843-554-8890 PARANAL ROGERIA R PH#: 843-554-8890 Facility Email: RRPARANAL@GMAIL.COM	Charleston / Sole Proprietorship 3117 MEETING STREET RD NORTH CHARLESTON, SC 29405-7980 PARANAL ROGERIA R CRC-0937 / 07/31/2018	7
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
MARIA'S PRIORITY CARE RESIDENTIAL HOME II-B 4583 DURANT AVE, B NORTH CHARLESTON, SC 29405-5212 FAC.#:843-566-0460 RELLORA JESUS N PH#: Facility Email: JNRELLORA4SUS@GMAIL.COM	Charleston / Partnership PO BOX 61870 NORTH CHARLESTON, SC 29419-1870 JESUS N AND WILHELMINA C RELLOA CRC-0772 / 06/30/2018	7
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		

County: Charleston

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
MARIA'S PRIORITY CARE RESIDENTIAL HOME II-F 4583 DURANT AVE, F NORTH CHARLESTON, SC 29405-5212 FAC.#:843-566-0460 RELLORA JESUS N PH#: JNRELLORA4SUS@GMAIL.COM Facility Email: JNRELLORA4SUS@GMAIL.COM	Charleston / Partnership PO BOX 61870 NORTH CHARLESTON, SC 29419-1870 JESUS N AND WILHELMINA C RELORA CRC-0774 / 06/30/2018	5
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
MARIA'S PRIORITY CARE RESIDENTIAL HOME III 3115 MEETING STREET RD NORTH CHARLESTON, SC 29405-7980 FAC.#:843-554-0064 PARANAL ROGERIA R PH#: 843-554-0064 Facility Email: RRRPARANAL@GMAIL.COM	Charleston / Sole Proprietorship 3115 MEETING STREET RD NORTH CHARLESTON, SC 29405-7980 PARANAL ROGERIA R CRC-0938 / 07/31/2018	7
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
MCLEOD MANOR 1707 MCLEOD AVE CHARLESTON, SC 29412-2922 FAC.#:843-795-8780 ALSTON MARTHA S PH#: 843-795-8780 Facility Email: CHVINC@COMCAST.NET	Charleston / Corporation 1707 MCLEOD AVE CHARLESTON, SC 29412-2922 MCLEOD MANOR INC CRC-0425 / 03/31/2018	16
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
MIDLAND PARK RESIDENTIAL HOME CARE 2712 MIDLAND PARK RD NORTH CHARLESTON, SC 29406-4551 FAC.#:843-569-0025 SINGIAN ROGELIO C PH#: 843-569-0025 Facility Email: MIDLANDPARK@BELLSOUTH.NET	Charleston / Corporation 2712 MIDLAND PARK RD NORTH CHARLESTON, SC 29406-4551 MIDLAND PARK ENTERPRISES INC CRC-0905 / 01/31/2018	52
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
MY FATHER'S HOUSE 22 LARNES ST CHARLESTON, SC 29403-2636 FAC.#:843-723-7889 STENT JOSEPHINE I PH#: 843-723-7889 Facility Email: JSTENT@BELLSOUTH.NET	Charleston / Partnership PO BOX 1647, MY FATHER'S HOUSE CHARLESTON, SC 29402-1647 JOSEPHINE STENT & ELOISE CHESTNUT CRC-0459 / 02/28/2018	10
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		

County: Charleston

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
NICHOLS RESIDENTIAL CARE FACILITY 702 E RAILROAD AVE LINCOLNVILLE, SC 29485-7228 FAC.#:843-821-9608 NICHOLS LAVERNE PH#: 843-821-9608 Facility Email: NICHOLSRESIDENT@AOL.COM	Charleston / Partnership 702 E RAILROAD AVE SUMMERVILLE, SC 29485-7228 ALONZO NICHOLS AND LAVERNE NICHOLS CRC-0973 / 12/31/2017	5
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
NORTH HAVEN RESIDENTIAL CARE HOME 4326 LESLIE ST NORTH CHARLESTON, SC 29418-5441 FAC.#:843-767-2541 LANGIT LEONORA D PH#: 843-767-2541 Facility Email: NORAALFLLC@YAHOO.COM	Charleston / Corporation 4326 LESLIE ST NORTH CHARLESTON, SC 29418-5441 NORTH HAVEN RESIDENTIAL CARE HOME INC CRC-0877 / 08/31/2018	16
Alzheimer Care:Yes Max # Resident:2	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
PALMETTO RESIDENTIAL CARE OF NORTH CHARLESTON 2834 SPRUILL AVE NORTH CHARLESTON, SC 29405-8051 FAC.#:843-566-1509 LESESNE CLARA P PH#: 843-566-1509 Facility Email: PATCH29311@HOTMAIL.COM	Charleston / Corporation PO BOX 31774 CHARLESTON, SC 29417-1774 EVERGREEN RESIDENTIAL CARE INC CRC-1322 / 08/31/2018	12
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
PALMETTOS OF CHARLESTON 1900 ASHLEY CROSSING DR CHARLESTON, SC 29414-5751 FAC.#:843-852-0505 MARTIN MEGAN W PH#: 843-852-0505 Facility Email: MMARTIN@PALMETTOSOFCHARLESTON.COM	Charleston / Limited Liability 1900 ASHLEY CROSSING DR CHARLESTON, SC 29414-5751 NHC PLACE-CHARLESTON LLC CRC-1263 / 07/31/2018	60
Alzheimer Care:Yes Max # Resident:15	Alzheimer Unit: Yes Max # Beds: 15	
Certifications:None		
PETTIS ANGELS RESIDENTIAL CARE 2614 MADDEN DR NORTH CHARLESTON, SC 29405-5529 FAC.#:843-308-9413 PETTIS ETHEL S PH#: 843-308-9413 Facility Email: SPETTIS@KNOLOGY.NET	Charleston / Sole Proprietorship 3879 WALNUT ST CHARLESTON, SC 29405-7050 ETHEL S PETTIS CRC-0850 / 01/31/2018	5
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		

County: Charleston

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
SANDPIPER COURTYARD ASSISTED LIVING 1047 ANNA KNAPP BLVD MOUNT PLEASANT, SC 29464-3133 FAC.#:843-884-7977 ATKINSON ANGELA G PH#: 843-884-7977 Facility Email: HCRIBB@SANDPIPERCENTER.COM	Charleston / Limited Liability 1047 ANNA KNAPP BLVD MOUNT PLEASANT, SC 29464-3133 SANDPIPER INDEPENDENT AND ASSISTED LIVING- DELAWARE LLC CRC-1325 / 09/30/2018	64
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No	Max # Beds: 0
Certifications:None		
SAVANNAH HALL ASSISTED LIVING 1010 LAKE HUNTER CIR MOUNT PLEASANT, SC 29464-5417 FAC.#:843-388-2030 WOODWARD GREGORY M PH#: 843-388-2030 Facility Email: LICENSING@5SSL.COM	Charleston / 400 CENTRE ST NEWTON, MA 02458-2094 SNH SE SG TENANT LLC CRC-1431 / 06/30/2018	16
Alzheimer Care:Yes Max # Resident:16	Alzheimer Unit: Yes	Max # Beds: 16
Certifications:None		
SAVANNAH PLACE 1501 SECESSIONVILLE RD CHARLESTON, SC 29412-8236 FAC.#:843-762-1396 MIKELL TYLER G PH#: 843-762-1396 Facility Email: TMIKELL@ENLIVANT.COM	Charleston / 330 N WABASH AVE STE 3700 CHICAGO, IL 60611-7605 SAVANNAH AID OPCO LLC CRC-1410 / 11/30/2017	44
Alzheimer Care:No Max # Resident:1	Alzheimer Unit: No	Max # Beds: 0
Certifications:None		
SECESSIONVILLE COMMUNITY RESIDENCE 1217 SECESSIONVILLE RD CHARLESTON, SC 29412-9749 FAC.#:843-762-2134 CAPERS MADLYN PH#: 843-795-0766 Facility Email: MCAPEERS@DNSCC.COM	Charleston / State PO BOX 22708, DISABILITIES BOARD OF CHARLESTON COUNTY CHARLESTON, SC 29413-2708 DISABILITIES BOARD OF CHARLESTON COUNTY CRC-1287 / 12/31/2017	8
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No	Max # Beds: 0
Certifications:None		
SERENITY MANOR 4018 S RHETT AVE NORTH CHARLESTON, SC 29405-7163 FAC.#:843-554-0733 FIELDS HATTIE B PH#: 843-554-0733 Facility Email: SERENITY_MANOR@BELLSOUTH.NET	Charleston / Sole Proprietorship PO BOX 21934 CHARLESTON, SC 29413-1934 FIELDS HATTIE B CRC-1472 / 02/28/2018	10
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No	Max # Beds: 0
Certifications:None		

County: Charleston

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
SOMERBY OF MOUNT PLEASANT 3100 TRADITION CIR MOUNT PLEASANT, SC 29466-7153 FAC.#:843-849-3096 THARP CHRIS PH#: 843-849-3096 Facility Email: CTHARP@SOMERBYLIVING.COM	Charleston / Ltd. Liability 1200 CORPORATE DR STE 225 BIRMINGHAM, AL 35242-5421 DOMINION SENIOR LIVING OF MT PLEASANT LLC CRC-1481 / 09/30/2018	118
Alzheimer Care:Yes Max # Resident:35	Alzheimer Unit: Yes	Max # Beds: 38
Certifications:None		
SWEETGRASS COURT SENIOR LIVING COMMUNITY 1010 ANNA KNAPP BLVD MOUNT PLEASANT, SC 29464-5400 FAC.#:843-971-7756 DENSON TRA'ASHIA PH#: 843-971-7756 Facility Email: LICENSING@5SSL.COM	Charleston / 400 CENTRE ST, FIVE STAR QUALITY CARE-OBX OPERATOR LLC NEWTON, MA 02458-2094 FIVE STAR QUALITY CARE-OBX OPERATOR LLC CRC-1428 / 12/31/2017	38
Alzheimer Care:Yes Max # Resident:38	Alzheimer Unit: Yes	Max # Beds: 38
Certifications:None		
SWEETGRASS VILLAGE ASSISTED LIVING COMMUNITY 601 MATHIS FERRY RD MOUNT PLEASANT, SC 29464-2623 FAC.#:843-884-8812 MCLEOD LISA DICKEY PH#: 843-881-9809 Facility Email: LICENSING@5SSL.COM	Charleston / Limited Liability 601 MATHIS FERRY RD MOUNT PLEASANT, SC 29464-2623 SWEETGRASS COURT SENIOR LIVING COMMUNITY CRC-1427 / 12/31/2017	85
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No	Max # Beds: 0
Certifications:None		
TRICOUNTY CRISIS STABILIZATION CENTER 5 CHARLESTON CENTER DR STE 246 CHARLESTON, SC 29401-1162 FAC.#:843-414-2350 OLIVER RICHARD H PH#: 843-958-3300 Facility Email: MELISSA.CAMP@SCDMH.ORG	Charleston / Corporation 2100 CHARLIE HALL BLVD CHARLESTON, SC 29414 CHARLESTON DORCHESTER MENTAL HEALTH CENTER CRC-1956 / 06/30/2018	10
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No	Max # Beds: 0
Certifications:None		
VANWYEVEER RESIDENTIAL CARE FACILITY 2009 COSGROVE AVE NORTH CHARLESTON, SC 29405-5702 FAC.#:843-744-6065 PETTIS ETHEL S PH#: 843-744-6065 Facility Email: VANWYEVEER1@AOL.COM	Charleston / Sole Proprietorship 2009 COSGROVE AVE NORTH CHARLESTON, SC 29405-5702 AYESHA T WASHINGTON ESQUIRE AS SPECIAL ADMINISTRATOR OF THE ESTATE RHODELLE W FULTON CRC-0638 / 09/30/2018	10
Alzheimer Care:Yes Max # Resident:0	Alzheimer Unit: No	Max # Beds: 0
Certifications:None		

County: Charleston

Facility Type: Community Residential Care Facility

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

Totals For Facility/License Type: Community Residential Care Facility

Number of Activities/Facilities licensed: 55 Number Licensed Units: 1,684

County: Charleston

Facility Type: Habilitation R15

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
DILLS BLUFF COMMUNITY RESIDENCE 936 DILLS BLUFF RD CHARLESTON, SC 29412-5316 FAC.#:843-805-5800 TURNER EVELYN ASH PH#: 843-805-5800 Facility Email: ETURNER@DSNCC.COM	Charleston / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0131 / 10/31/2018	8

Totals For Facility/License Type: Habilitation R15

Number of Activities/Facilities licensed: 1 Number Licensed Units: 8

County: Charleston

Facility Type: Home Health

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
AMEDISYS HOME HEALTH OF CHARLESTON 2675 LAKE PARK DR NORTH CHARLESTON, SC 29406-9100 FAC.#:843-553-1263 CRAVEN KAREN L PH#: Facility Email: 2203@AMEDISYS.COM	Charleston / Limited Liability 2675 LAKE PARK DR NORTH CHARLESTON, SC 29406-9100 AMEDISYS HOME HEALTH OF SOUTH CAROLINA LLC HHA-0172 / 09/30/2018	3
Counties Served: Berkeley, Charleston, Dorchester		
License Restrictions:		
Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment: N		
Other:		
AMEDISYS HOME HEALTH OF CHARLESTON EAST 1027 PHYSICIANS DR STE 210 CHARLESTON, SC 29414-5352 FAC.#:843-556-0200 BARBER MELISSA BLANTON PH#: Facility Email: MELISSA.BARBER@AMEDISYS.COM	Charleston / Ltd. Liability 1027 PHYSICIANS DR STE 210 CHARLESTON, SC 29414-5352 AMEDISYS SC LLC HHA-0191 / 01/31/2018	5
Counties Served: Berkeley, Charleston, Colleton, Dorchester, Hampton		
License Restrictions:		
Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment: N		
Other:		
BRIGHTSTAR CARE OF CHARLESTON 4130 FABER PL DR STE 108 NORTH CHARLESTON, SC 29405-8502 FAC.#:843-300-3008 JAMES KRISTIN H PH#: Facility Email: C.APPLEGATE@BRIGHTSTARCARE.COM	Charleston / Limited Liability 4130 FABER PL DR STE 108 NORTH CHARLESTON, SC 29405-8502 TOWNES HOLDINGS LLC HHA-0229 / 06/30/2018	1
Counties Served: Charleston		
License Restrictions:		
Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment: N		
Other: IV-IG INFUSION		
INTERIM HEALTHCARE 4995 LACROSS RD STE 1300 N CHARLESTON, SC 29406 FAC.#:843-569-5510 BAKER DAWN M PH#: 843-569-5510 Facility Email: DABAKER@INTERIMHEALTHCARE.COM	Charleston / Limited Liability 4995 LACROSS RD STE 1300 N CHARLESTON, SC 29418 LOWCOUNTRY NURSING GROUP LLC HHA-0208 / 03/31/2018	4
Counties Served: Beaufort, Berkeley, Charleston, Dorchester		
License Restrictions:		
Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment: N		
Other: BEAUFORT IS RESTRICTED TO PEDIATRIC HOME HEALTH 0-18 YOA ONLY		

County: Charleston

Facility Type: Home Health

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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INTREPID USA HEALTHCARE SERVICES 2694 LAKE PARK DR 1ST FLOOR NORTH CHARLESTON, SC 29406-9826 FAC.#:843-569-3516 MYERS ELIZABETH A PH#: 843-569-3516 Facility Email: RAMONA.GOODMAN@INTREPIDUSA.COM	Charleston / Corporation 4055 VALLEY VIEW LN STE 500 DALLAS, TX 75244-5048 FC OF SOUTH CAROLINA INC HHA-0180 / 06/30/2018	6
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Counties Served: Allendale, Berkeley, Charleston, Colleton, Dorchester, Georgetown

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y
Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment: N

Other:

KINDRED AT HOME-CHARLESTON 4975 LACROSS RD STE 354 CHARLESTON, SC 29406-6525 FAC.#:843-744-1191 HENNING ALISON PH#: 843-744-1191 Facility Email: JANET.COMBS@GENTIVA.COM	Charleston / Corporation LICENSING & CERTIFICATION DEPT., 12900 FOSTER ST STE 400 OVERLAND PARK, KS 66213-2696 GENTIVA CERTIFIED HEALTHCARE CORPORATION HHA-0051 / 08/31/2018	3
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Counties Served: Berkeley, Charleston, Dorchester

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y
Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment: N

Other:

MUSC HEALTH AT HOME BY BAYADA-CHARLESTON 176 CROGHAN SPUR RD STE 102 CHARLESTON, SC 29407 FAC.#:843-576-5378 MICHAEL RYAN PH#: 843-576-5378 Facility Email: RMICHAEL@BAYADA.COM	Charleston / Limited Liability 176 CROGHAN SPUR RD STE 102 CHARLESTON, SC 29407 SCHHA LLC HHA-0324 / 12/31/2017	3
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Counties Served: Berkeley, Charleston, Dorchester

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y
Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment: N

Other:

NHC HOMECARE-LOW COUNTRY 2070 NORTHBROOK BLVD STE B1 NORTH CHARLESTON, SC 29406 FAC.#:843-851-0999 FLYNN WILLIAM R PH#: 843-851-0999 Facility Email: NHC@NHCHOMECARELOWCOUNTRY.COM	Charleston / Limited Liability 2070 NORTHBROOK BLVD SUITE B1 NORTH CHARLESTON, SC 29406 NHC HOMECARE-SOUTH CAROLINA LLC HHA-0138 / 04/30/2018	6
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Counties Served: Bamberg, Berkeley, Charleston, Clarendon, Dorchester, Williamsburg

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y
Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment: N

Other: DIETARY CONSULTATION

County: Charleston

Facility Type: Home Health

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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PHC HOME HEALTH 408 FOLLY RD CHARLESTON, SC 29412-2625 FAC.#:843-762-3601 DURRENCE HUGH D PH#: 843-762-3601 Facility Email: SARAHWILBANKS@PHCHEALTH.COM Counties Served: Berkeley, Charleston, Dorchester License Restrictions: Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment: N Other:	Charleston / Corporation 1923-D MAYBANK HWY CHARLESTON, SC 29412-2115 HEDGEMARK BRENTWOOD MEDICAL SERVICES INC HHA-0084 / 04/30/2018	3
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ROPER-ST FRANCIS HOME HEALTH CARE 1483 TOBIAS GADSON BLVD STE 208 CHARLESTON, SC 29407-4796 FAC.#:843-402-7000 MELLO BONNIE C PH#: 843-402-7000 Facility Email: BONNIE.MELLO@RSFH.COM Counties Served: Berkeley, Charleston, Dorchester License Restrictions: Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment: N Other: REGISTERED DIETITIAN/CDE; CERTIFIED WOUND AND OSTOMY NURSES; TELEMONITORING	Charleston / Non-Profit Corporation 1483 TOBIAS GADSON BLVD STE 208 CHARLESTON, SC 29407-4796 ROPER HOSPITAL INC HHA-0062 / 12/31/2018	3
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SEA ISLAND HOME HEALTH 3627 MAYBANK HWY JOHNS ISLAND, SC 29455-4836 FAC.#:843-559-9925 CLOUSE TAMMY PH#: 843-559-4137 Facility Email: HFIELDS@SICHCC.ORG Counties Served: Charleston, Colleton License Restrictions: Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment: N Other: SKILLED NURSING	Charleston / Non-Profit Corporation PO BOX 689 JOHNS ISLAND, SC 29455 SEA ISLAND COMPREHENSIVE HEALTH CARE CORPORATION HHA-0025 / 04/30/2018	2
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Totals For Facility/License Type: <u>Home Health</u>	
Number of Activities/Facilities licensed: <u>11</u>	Number Licensed Units: <u>39</u>

County: Charleston

Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
HOSPICE CENTER OF HOSPICE OF CHARLESTON 676 WANDO PARK BLVD MOUNT PLEASANT, SC 29464-7936 FAC. #: 843-654-5755 TOZIER MARY E PH#:	Charleston / Ltd. Liability 12900 FOSTER ST STE 400 OVERLAND PARK, KS 66213-2696 WIREGRASS HOSPICE OF SOUTH CAROLINA LLC	20
Facility Email: JANET.COMBS@GENTIVA.COM	HPF-0005 / 08/31/2018	

Totals For Facility/License Type: <u>Hospice Facility</u>	
Number of Activities/Facilities licensed: <u>1</u>	Number Licensed Units: <u>20</u>

County: Charleston

Facility Type: Hospice Program

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
AGAPE HOSPICE OF THE LOW COUNTRY 2680 ELMS PLANTATION BLVD STE 101 NORTH CHARLESTON, SC 29406-7101 FAC.#:843-533-7122 WHITEHEAD MATTHEW PH#: 843-553-7122 Facility Email: MWHITEHEAD@AGAPESENIOR.COM	Charleston / Corporation 2680 ELMS PLANTATION BLVD STE 101 NORTH CHARLESTON, SC 29406-7101 AGAPE HOSPICE OF THE LOW COUNTRY INC HPC-0124 / 06/30/2018	27
Counties Served: Allendale, Bamberg, Barnwell, Beaufort, Berkeley, Calhoun, Charleston, Chesterfield, Clarendon, Colleton, Darlington, Dillon, Dorchester, Florence, Georgetown, Hampton, Horry, Jasper, Kershaw, Lancaster, Lee, Marion, Marlboro, Orangeburg, Richland, Sumter, Williamsburg		
HEARTLAND HOSPICE SERVICES-CHARLESTON 1470 TOBIAS GADSON BLVD STE 203 CHARLESTON, SC 29407-4370 FAC.#:843-766-7646 DAVILA CHRISTINE PH#: 843-766-7646 Facility Email: 4662ADMIN@HCR-MANORCARE.COM	Charleston / Limited Liability 333 N SUMMIT ST 16TH FL TOLEDO, OH 43604-1531 HEARTLAND HOSPICE SERVICES LLC HPC-0136 / 12/31/2018	12
Counties Served: Bamberg, Beaufort, Berkeley, Charleston, Clarendon, Colleton, Dorchester, Georgetown, Hampton, Jasper, Orangeburg, Williamsburg		
HOMESTEAD HOSPICE OF CHARLESTON 7410 NORTHSIDE DR STE 101 NORTH CHARLESTON, SC 29420-4200 FAC.#:843-266-1100 TILLEY BARBARA JEAN PH#: 843-266-1100 Facility Email: MWAFFORD@HOMESTEADHOSPICE.NET	Charleston / Limited Liability 10888 CRABAPPLE RD ROSWELL, GA 30075-5850 HOMESTEAD HOSPICE OF CHARLESTON LLC HPC-0190 / 09/30/2018	46
Counties Served: Abbeville, Aiken, Allendale, Anderson, Bamberg, Barnwell, Beaufort, Berkeley, Calhoun, Charleston, Cherokee, Chester, Chesterfield, Clarendon, Colleton, Darlington, Dillon, Dorchester, Edgefield, Fairfield, Florence, Georgetown, Greenville, Greenwood, Hampton, Horry, Jasper, Kershaw, Lancaster, Laurens, Lee, Lexington, Marion, Marlboro, McCormick, Newberry, Oconee, Orangeburg, Pickens, Richland, Saluda, Spartanburg, Sumter, Union, Williamsburg, York		
HOSPICE OF CHARLESTON 4975 LACROSS RD STE 200 CHARLESTON, SC 29406-6531 FAC.#:843-529-3100 TOZIER MARY E PH#: Facility Email: JANET.COMBS@GENTIVA.COM	Charleston / Ltd. Liability 12900 FOSTER ST STE 400 OVERLAND PARK, KS 66213-2696 WIREGRASS HOSPICE OF SOUTH CAROLINA LLC HPC-0007 / 08/31/2018	15
Counties Served: Beaufort, Berkeley, Charleston, Clarendon, Colleton, Darlington, Dillon, Dorchester, Florence, Georgetown, Horry, Marion, Marlboro, Orangeburg, Williamsburg		
INTREPID USA HOSPICE-LOW COUNTRY 2694 LAKE PARK DR 2ND FLOOR NORTH CHARLESTON, SC 29406-9826 FAC.#:843-553-2503 SMITH GEORGIA L PH#: 843-553-2503 Facility Email: GEORGIA.SMITH@INTREPIDUSA.COM	Charleston / Corporation 4055 VALLEY VIEW LN 5TH FLOOR DALLAS, TX 75244-5048 FC OF SOUTH CAROLINA INC HPC-0166 / 12/31/2018	10
Counties Served: Allendale, Bamberg, Berkeley, Calhoun, Charleston, Colleton, Dorchester, Georgetown, Hampton, Orangeburg		

County: Charleston

Facility Type: Hospice Program

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
ROPER HOSPICE 1483 TOBIAS GADSON BLVD STE 208A CHARLESTON, SC 29407-4796 FAC.#:843-402-3260 MELLO BONNIE C PH#: 843-402-7000 Facility Email: BONNIE.MELLO@RSFH.COM	Charleston / Non-Profit Corporation 1483 TOBIAS GADSON BLVD STE 208 CHARLESTON, SC 29407-4796 ROPER HOSPITAL INC HPC-0164 / 01/31/2018	8
Counties Served: Beaufort, Berkeley, Charleston, Colleton, Dorchester, Georgetown, Hampton, Jasper		
SEA ISLAND COMPREHENSIVE HOSPICE CARE 3627 MAYBANK HWY JOHNS ISLAND, SC 29455 FAC.#:843-559-4137 RUCKER TUMIKO PH#: 843-559-4137 Facility Email: TRR@SICHCC.ORG	Charleston / Corporation SEA ISLAND COMPREHENSIVE HEALTHCARE CORPORATION HPC-0214 / 02/28/2018	4
Counties Served: Berkeley, Charleston, Colleton, Dorchester		

Totals For Facility/License Type: <u>Hospice Program</u>	
Number of Activities/Facilities licensed: _____ 7	Number Licensed Units: _____ 122

County: Charleston

Facility Type: Hospital or Institutional General Infirmery

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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BON SECOURS-ST FRANCIS XAVIER HOSPITAL 2095 HENRY TECKLENBURG DR CHARLESTON, SC 29414-5734 FAC.#:843-402-1000 JACKSON ANTHONY PH#: 843-402-1006 Facility Email: MATT.SEVERANCE@RSFH.COM	Charleston / Non-Profit Corporation 2095 HENRY TECKLENBURG DR CHARLESTON, SC 29414-5734 BON SECOURS-ST FRANCIS XAVIER HOSPITAL INC HTL-0750 / 07/31/2018	204
Licensed Beds: General: 204 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 11		

Certifications:Perinatal Level II, JCAHO Accredited

CITADEL INFIRMARY 171 MOULTRIE ST CHARLESTON, SC 29409-0001 FAC.#:843-953-6847 CAPELL CAREY M PH#: 843-953-6847 Facility Email: CAREY.CAPELL@CITADEL.EDU	Charleston / State 171 MOULTRIE ST CHARLESTON, SC 29409-0001 BOARD OF VISITORS THE CITADEL HTL-0035 / 05/31/2018	38
Licensed Beds: General: 38 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:None

EAST COOPER MEDICAL CENTER 2000 HOSPITAL DR MOUNT PLEASANT, SC 29464-3764 FAC.#:843-416-6210 DOWNES PATRICK PH#: 843-881-0100 Facility Email: RAMONA.PICKENS@TENETHEALTH.COM	Charleston / Corporation 2000 HOSPITAL DR MOUNT PLEASANT, SC 29464-3764 EAST COOPER COMMUNITY HOSPITAL INC HTL-0447 / 03/31/2018	130
Licensed Beds: General: 130 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 10		

Certifications:Abortions, Trauma Center Level III, Perinatal Level II, JCAHO Accredited

HEALTHSOUTH REHABILITATION HOSPITAL OF CHARLESTON 9181 MEDCOM ST CHARLESTON, SC 29406-9184 FAC.#:843-820-7777 PH#: Facility Email: BECKYE.LARIVIERE@HEALTHSOUTH.COM	Charleston / Limited Liability Company (multiple member) 9181 MEDCOM ST CHARLESTON, SC 29406-9184 HEALTHSOUTH REHABILITATION HOSPITAL OF CHARLESTON LLC HTL-0648 / 12/31/2017	49
Licensed Beds: General: 0 Psychiatric: 0 Rehab: 49 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

County: Charleston

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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MOUNT PLEASANT HOSPITAL 3500 N HWY 17 MOUNT PLEASANT, SC 29466-9123 FAC.#:843-724-2954 JACKSON ANTHONY PH#: 843-402-1005 Facility Email: MELISSA.AMICK@RSFH.COM	Charleston / Non-Profit Corporation 3510 HWY 17 N STE 200 MOUNT PLEASANT, SC 29466-8229 ROPER ST FRANCIS MOUNT PLEASANT HOSPITAL HTL-0909 / 10/31/2018	85
Licensed Beds: General: 85 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications: Perinatal Level I, JCAHO Accredited

MUSC MEDICAL CENTER 169 ASHLEY AVE CHARLESTON, SC 29425-8905 FAC.#:843-792-4000 CAWLEY MD PATRICK J PH#: 843-792-4000 Facility Email: ELLIST@MUSC.EDU	Charleston / District 169 ASHLEY AVE, MUSC HEALTH ROOM H241A MAIN HOSPITAL CHARLESTON, SC 29425-8905 MEDICAL UNIVERSITY HOSPITAL AUTHORITY HTL-0811 / 11/30/2018	713
Licensed Beds: General: 608 Psychiatric: 82 Rehab: 0 Substance Abuse: 23 Other Beds : NICU: 16 Neonatal Special Care: 50		

Certifications: Abortions, Trauma Center Level I, Perinatal Level III Regional, JCAHO Accredited

PALMETTO LOWCOUNTRY BEHAVIORAL HEALTH 2777 SPEISSEGGER DR NORTH CHARLESTON, SC 29405-8229 FAC.#:843-747-5830 HAUGER CLINT D PH#: 843-747-5830 Facility Email: CLINT.HAUGER@UHSINC.COM	Charleston / Limited Liability 2777 SPEISSEGGER DR NORTH CHARLESTON, SC 29405-8229 PALMETTO LOWCOUNTRY BEHAVIORAL HEALTH LLC HTL-0729 / 08/31/2018	108
Licensed Beds: General: 0 Psychiatric: 92 Rehab: 0 Substance Abuse: 16 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications: JCAHO Accredited

ROPER HOSPITAL 316 CALHOUN ST CHARLESTON, SC 29401-1125 FAC.#:843-724-2000 SEVERANCE MATTHEW J PH#: 843-724-2901 Facility Email: DEE.MULLISON@RSFH.COM	Charleston / Non-Profit Corporation 316 CALHOUN ST CHARLESTON, SC 29401-1125 ROPER HOSPITAL INC HTL-0063 / 10/31/2018	368
Licensed Beds: General: 316 Psychiatric: 0 Rehab: 52 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications: JCAHO Accredited

County: Charleston

Facility Type: Hospital or Institutional General Infirmery

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
SHERIFF AL CANNON DETENTION CENTER 3841 LEEDS AVE N CHARLESTON, SC 29405-7469 FAC.#:843-529-7300 BEATTY WILLIS L PH#:	Charleston / County 3841 LEEDS AVE NORTH CHARLESTON, SC 29405 CHARLESTON COUNTY SHERIFF'S OFFICE HTL-0908 / 06/30/2018	22
Facility Email: WBEATTY@CHARLESTONCOUNTY.ORG Licensed Beds: General: 22 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:None

TRIDENT MEDICAL CENTER 9330 MEDICAL PLAZA DR N CHARLESTON, SC 29406-9104 FAC.#:843-847-4100 GALLATI TODD PH#: 843-847-4100	Charleston / Ltd. Liability 9330 MEDICAL PLAZA DR N CHARLESTON, SC 29406-9104 TRIDENT MEDICAL CENTER LLC HTL-0777 / 04/30/2018	313
Facility Email: TODD.GALLATI@HCAHEALTHCARE.COM Licensed Beds: General: 296 Psychiatric: 17 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 10		

Certifications:Abortions, Trauma Center Level II, Perinatal Level II, JCAHO Accredited

VIBRA HOSPITAL OF CHARLESTON 1200 HOSPITAL DR MOUNT PLEASANT, SC 29464-3251 FAC.#:843-375-4000 DUNMEYER DANIEL C PH#: 843-375-4000	Charleston / Limited Liability 1200 HOSPITAL DR MOUNT PLEASANT, SC 29464-3251 VIBRA HOSPITALOF CHARLESTON LLC HTL-0764 / 08/31/2018	59
Facility Email: DDUNMYER@VHCHARLESTON.COM Licensed Beds: General: 59 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

Totals For Facility/License Type: <u>Hospital or Institutional General Infirmery</u>	
Number of Activities/Facilities licensed: <u>11</u>	Number Licensed Units: <u>2,089</u>

County: Charleston

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
A BETTER CHOICE HOME CARE 1514 MATHIS FERRY RD STE204 MT PLEASANT, SC 29464 FAC.#:843-884-6456 ROSSINO MATTHEW L PH#: 843-6456 Facility Email: INFO@ABCHOMECARE-SC.COM	Charleston / Ltd. Liability 1514 MATHIS FERRY RD STE204 MT PLEASANT, SC 29464 A BETTER CHOICE HOME CARE LLC IHCP-0061 / 02/28/2018	- 1
A GREAT CHOICE FOR IN-HOME CARE 1240 WINNOWER WAY SITE 102 MOUNT PLEASANT, SC 29466 FAC.#:910-689-7658 PH#: Facility Email: DINEZBAKER@GMAIL.COM	Charleston / Corporation 1240 WINNOWER WAY SITE 102 MOUNT PLEASANT, SC 29466 A GREAT CHOICE FOR HOME CARE INC IHCP-0336 / 08/31/2018	- 1
ACCESS HEALTH CARE SERVICES OF CHARLESTON 2171 ASHLEY PHOSPHATE RD STE C NORTH CHARLESTON, SC 29406-4156 FAC.#:843-724-9581 SWYGERT MARILYN PH#: 803-509-8206 Facility Email: MSWYGERT@CAREGIVERSONDEMAND.COM	Charleston / Corporation ACCESS HEALTH CARE SERVICES INC IHCP-0603 / 08/31/2018	- 1
ADDUS HOME CARE - N CHARLESTON 3294-C ASHLEY PHOSPHATE RD N CHARLESTON, SC 29418 FAC.#:843-569-0033 PH#: Facility Email: JTHORNTON@ADDUS.COM	Charleston / Corporation 2300 WARRENVILLE RD STE 100 DOWNERS GROVE, IL 60515-1700 ADDUS HEALTHCARE (SOUTH CAROLINA) INC DBA ADDUS HOME CARE IHCP-0196 / 06/30/2018	- 1
ALREADY HOMECARE - CHARLESTON 1180 SAM RITTENBERG BLVD STE 240 CHARLESTON, SC 29407-3388 FAC.#:843-371-1419 CAMAREN MICHELLE PH#: 843-371-1419 Facility Email: DEREK@ALREADYHOMECARE.COM	Charleston / Limited Liability 1180 SAM RITTENBERG BLVD STE 240 CHARLESTON, SC 29407-3388 ALREADY HOMECARE OF SOUTH CAROLINA LLC IHCP-0027 / 10/31/2017 (Renewal Pending)	- 1
AMADA SENIOR CARE SC COASTAL 1156 BOWMAN RD STE 200 MOUNT PLEASANT, SC 29464 FAC.#:843-433-0436 PH#: Facility Email: DAVID.L@AMADASENIORCARE.COM	Charleston / Limited Liability 1156 BOWMAN RD STE 200 MOUNT PLEASANT, SC 29464 E&L COLONIAL LLC IHCP-0695 / 03/31/2018	- 1
ANGELS OF GRACE 1625 REMOUNT RD STE B NORTH CHARLESTON, SC 29406 FAC.#:843-554-9413 TYLER-SIMMONS CONSTANCE PH#: 843-554-9413 Facility Email: Not on File	Charleston / Limited Liability 1625 REMOUNT RD STE B NORTH CHARLESTON, SC 29406 ANGELS OF GRACE LLC IHCP-0701 / 09/30/2018	- 1
ANGELS SITTE SERVICE LLC 1041 WOODSIDE DR CHARLESTON, SC 29412-9359 FAC.#:843-212-6320 PH#: Facility Email: FLORENCE.VANN@GMAIL.COM	Charleston / Limited Liability 1041 WOODSIDE DR CHARLESTON, SC 29412-9359 ANGELS SITTE SERVICE LLC IHCP-0493 / 12/31/2017	- 1

County: Charleston

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
ASSURANCE PERSONAL CARE 1818 NORWOOD ST NORTH CHARLESTON, SC 29405-8006 FAC.#:843-747-5798 PH#:	Charleston / Limited Liability PO BOX 31774 CHARLESTON, SC 29417-1774 ASSURANCE PERSONAL CARE IHCP-0358 / 12/31/2017	- 1
Facility Email: PATCH29311@HOTMAIL.COM		
BAYADA HOME CARE - MOUNT PLEASANT 505 BELLE HALL PKWY STE 201 MOUNT PLEASANT, SC 29464-8326 FAC.#:843-856-3100 LUGO NICOLE PH#: 843-856-3100	Charleston / Corporation 505 BELLE HALL PKWY STE 201 MOUNT PLEASANT, SC 29464-8326 BAYADA HOME HEALTH CARE INC IHCP-0261 / 09/30/2018	- 1
Facility Email: NLUGO@BAYADA.COM		
BG CONNECTIONS 1 BISHOP GADSDEN WAY CHARLESTON, SC 29412-3577 FAC.#:843-762-3300 TIPTON SARAH E H PH#: 843-762-3300	Charleston / Corporation 1 BISHOP GADSDEN WAY CHARLESTON, SC 29412-3577 BISHOP GADSDEN EPISCOPAL RETIREMENT COMMUNITY IHCP-0250 / 07/31/2018	- 1
Facility Email: SARAH.TIPTON@BISHOPGADSDEN.ORG		
BRIGHTSTAR OF CHARLESTON 1064 GARDNER RD STE 301 CHARLESTON, SC 29407-5746 FAC.#:843-300-3008 JAMES CHARLES A PH#: 843-300-3008	Charleston / Limited Liability 1064 GARDNER RD STE 301 CHARLESTON, SC 29407-5746 TOWNS HOLDINGS DBA BRIGHTSTAR OF CHARLESTON IHCP-0075 / 03/31/2018	- 1
Facility Email: CHARLES.JAMES@BRIGHTSTARCARE.COM		
CARE FOR LIFE INC 1064 GARDNER RD STE 316 CHARLESTON, SC 29407 FAC.#:843-852-9090 JANSE SHEENA M PH#: 843-852-9090	Charleston / Corporation 1064 GARDNER RD STE 316 CHARLESTON, SC 29407 CARE FOR LIFE INC IHCP-0039 / 12/31/2018	- 1
Facility Email: SJANSE@CAREFORLIFECARLESTON.COM		
CARING SENIOR SERVICE OF CHARLESTON SC 3294 ASHLEY PHOSPHATE RD STE 1B NORTH CHARLESTON, SC 29418 FAC.#:850-345-5300 DUKE CHRISTOPHER PH#: 850-345-5300	Charleston / Corporation DUKE MILESTONE INVESTMENTS INC IHCP-0655 / 02/28/2018	- 1
Facility Email: CDUKE@CARINGINC.COM		
CAROLINA HEALTH FORCE 3527 MARY ADER AVE CHARLESTON, SC 29414 FAC.#:843-556-2784 PH#:	Charleston / Corporation 3527 MARY ADER AVE CHARLESTON, SC 29414 MUMFORD INC IHCP-0470 / 05/31/2018	- 1
Facility Email: AEMUMRN@AOL.COM		
CAROLINA HOME CARE OF CHARLESTON 6650 RIVERS AVE CHARLESTON, SC 29406 FAC.#:843-566-2887 PH#:	Charleston / Corporation CAROLINA HOME CARE INC IHCP-0481 / 12/31/2016 (Renewal Pending)	- 1
Facility Email: PHIL@CAROLINA-HOMECARE.COM		

County: Charleston

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
CAROLINA PERSONAL TOUCH 6296 RIVERS AVE STE 303 NORTH CHARLESTON, SC 29406 FAC.#:843-203-3473 PH#: Facility Email: CAROLINAPERSONALTOUCH@GMAIL.COM	Charleston / Partnership 6296 RIVERS AVE STE 203 NORTH CHARLESTON, SC 29406 CAROLINA PERSONAL TOUCH LLC IHCP-0748 / 08/31/2018	- 1
CHOICE HOME CARE 1101 LANDFALL WAY #5 SEABROOK ISLAND, SC 29455 FAC.#:404-402-7833 PH#: Facility Email: MARY@SOUTHERNCRESCENTCARE.COM	Charleston / Limited Liability 119 ROCK QUARRY RD STOCKBRIDGE, GA 30281 SOUTHERN CRESCENT CARE LLC IHCP-0539 / 05/31/2018	- 1
CMK HOME CARE OF CHARLESTON LLC 1054 JOHNNIE DODDS BLVD STE A MOUNT PLEASANT, SC 29464-3153 FAC.#:843-849-5454 PH#: Facility Email: PAM.CHAMBERS@CMKHomecare.com	Charleston / Limited Liability 1054 JOHNNIE DODDS BLVD STE A MOUNT PLEASANT, SC 29464-3153 CMK HOME CARE OF CHARLESTON LLC IHCP-0266 / 07/31/2018	- 1
COMFORCARE HOME CARE-CHARLESTON 3 DANIEL ST CHARLESTON, SC 29407-7303 FAC.#:843-225-2067 PH#: Facility Email: CHARLESTONSC@COMFORCARE.COM	Charleston / Limited Liability 3489 OLD POND RD JOHNS ISLAND, SC 29455-3209 TUPELO POND LLC IHCP-0282 / 07/31/2018	- 1
COMFORT KEEPERS OF GREATER CHARLESTON 3108 WOSLEY CT MOUNT PLEASANT, SC 29466-9066 FAC.#:843-574-7474 PH#: Facility Email: CHARLESTON@COMFORTKEEPERS.COM	Charleston / Corporation 3108 WOSLEY CT MOUNT PLEASANT, SC 29466-9066 FAMILY CARE INC IHCP-0381 / 09/30/2018	- 1
COMMONWEALTH CARE GROUP 1155 FORT LAMAR RD CHARLESTON, SC 29412 FAC.#:804-814-1588 EVANS KATHERINE F PH#: 804-814-1588 Facility Email: KATEFEVANS@GMAIL.COM	Charleston / Limited Liability COMMONWEALTH CARE GROUP LLC IHCP-0757 / 10/31/2018	- 1
CORPORATE CARE LLC CHARLESTON 3620 ASHLEY PHOSPHATE RD STE 18 NORTH CHARLESTON, SC 29418 FAC.#:843-793-4253 PH#: Facility Email: RR500@CORPORATE-SERVICESSC.COM	Charleston / Limited Liability PO BOX 16148 GREENVILLE, SC 29606-7148 CORPORATE CARE LLC IHCP-0275 / 08/31/2018	- 1
GRACEFUL LIVING HOMECARE 3236 LANDMARK DR STE 124 NORTH CHARLESTON, SC 29418 FAC.#:843-576-5392 PH#: Facility Email: INFO@GRACEFULLIVINGHC.COM	Charleston / Ltd. Liability 3236 LNDMARK DR STE 124 NORTH CHARLESTON, SC 29418 GRACEFUL LIVING HOMECARE LLC IHCP-0044 / 01/31/2018	- 1

County: Charleston

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
HEALING HANDS COMPANIONS 6650 RIVERS AVE NORTH CHARLESTON, SC 29406 FAC.#:843-576-1446 PH#: Facility Email: DARLENESANDERS72@GMAIL.COM	Charleston / Limited Liability 6650 RIVERS AVE NORTH CHARLESTON, SC 29406 HEALING HANDS COMPANIONS LLC IHCP-0704 / 05/31/2018	- 1
HOME CARE ASSISTANCE OF THE LOW COUNTRY 1662 SAVANNAH HWY STE 225 CHARLESTON, SC 29407 FAC.#:843-216-9915 PH#: Facility Email: CHEN@HOMECAREASSISTANCE.COM	Charleston / Limited Liability 1255 OAKMEAD PKWY SUNNYVALE, CA 94085 HOME CARE ASSISTANCE CHARLESTON LLC IHCP-0737 / 05/31/2018	- 1
HOME CARE PLUS LLC 2040 EWALL ST MOUNT PLEASANT, SC 29464 FAC.#:843-628-3642 GAIDUSEK LINDA PH#: 843-628-3642 Facility Email: TKUPPENS@HOME-CARE-PLUS.COM	Charleston / Limited Liability 2040 EWALL ST MOUNT PLEASANT, SC 29464 HOME CARE PLUS LLC IHCP-0337 / 08/31/2018	- 1
HOME INSTEAD SENIOR CARE OF CHARLESTON 11 GAMECOCK AVE STE 1105 CHARLESTON, SC 29407 FAC.#:843-571-3000 TAYLOR KENZIE PH#: 843-571-3000 Facility Email: SHANNON.CARITHERS@HOMEINSTEAD.COM	Charleston / Ltd. Liability 29 GAMECOCK AVE STE 101 CHARLESTON, SC 29407 COMPANION MANAGEMENT LLC IHCP-0033 / 11/30/2018	- 1
INTERIM HEALTHCARE-CHARLESTON 3870 LEEDS AVE STE 104 NORTH CHARLESTON, SC 29405-7493 FAC.#:843-569-5510 PH#: Facility Email: CYONCE@INTERIMHEALTHCARE.COM	Charleston / Limited Liability 3870 LEEDS AVE STE 104 NORTH CHARLESTON, SC 29405-7493 LOWCOUNTRY NURSING GROUP LLC IHCP-0082 / 03/31/2018	- 1
LOVING CARE GIVERS SERVICE INC 1072 KING ST STE D CHARLESTON, SC 29403 FAC.#:843-478-1820 PH#: Facility Email: JEANETTE@LOVINGCG.COM	Charleston / Corporation LOVING CARE GIVERS SERVICE INC IHCP-0580 / 01/31/2018	- 1
LOW COUNTRY BE WELL HOME SERVICES 1885 RIFLE RANGE RD MOUNT PLEASANT, SC 29464-9440 FAC.#:843-377-4663 JONES THOMAS PH#: 843-377-4663 Facility Email: TJONES@BEWELLSHOMESERVICES.ORG	Charleston / Private 1885 RIFLE RANGE RD MOUNT PLEASANT, SC 29464-9440 LUTHERAN HOMES OF SOUTH CAROLINA INC IHCP-0045 / 01/31/2018	- 1
LOWCOUNTRY COMPANIONS LLC 1459 STUART ENGALS BLVD UNIT 203 MOUNT PLEASANT, SC 29464-3600 FAC.#:843-856-2582 PH#: Facility Email: INFO@LOWCOUNTRYCOMPANIONS.COM	Charleston / Limited Liability 1459 STUART ENGALS BLVD UNIT 203 MOUNT PLEASANT, SC 29464-3600 LOWCOUNTRY COMPANIONS LLC IHCP-0184 / 06/30/2018	- 1

County: Charleston

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
LOWCOUNTRY FAMILY SUPPORT SERVICES HOMECARE 4138 MEETING STREET RD NORTH CHARLESTON, SC 29405 FAC. #: 843-934-2197 PH#: Facility Email: EVONBROWNS57@GMAIL.COM	Charleston / Limited Liability 4138 MEETING STREET RD NORTH CHARLESTON, SC 29405 LOWCOUNTRY FAMILY SUPPORT SERVICES LLC IHCP-0735 / 10/31/2018	- 1
LUVLY ANGELS 1527 SAM RITTENBERG BLVD UNIT 202 B CHARLESTON, SC 29407 FAC. #: 843-940-5154 PH#: Facility Email: LUVLYANGELSCHARLESTON@GMAIL.COM	Charleston / Limited Liability LUVLY ANGELS LLC IHCP-0718 / 04/30/2018	- 1
MANDALA HEALTH 1 WALL ST CHARLESTON, SC 29401-1539 FAC. #: 760-419-0534 PH#: Facility Email: MANDALAHEALTH1@GMAIL.COM	Charleston / Limited Liability 1 WALL ST CHARLESTON, SC 29401-1539 MANDALA HEALTH LLC IHCP-0296 / 02/28/2018	- 1
MAXIM HEALTHCARE SERVICES - CHARLESTON 4055 FABER PL DR STE 302 CHARLESTON, SC 29405 FAC. #: 706-619-2058 BARRY BENNETT PH#: 706-619-2058 Facility Email: LICENSING@MAXHEALTH.COM	Charleston / Corporation 7227 LEE DEFOREST DR COLUMBIA, MD 21046-3236 MAXIM HEALTHCARE SERVICES INC IHCP-0409 / 09/30/2018	- 1
MURCO ELDERCARE LLC 1590 W ROBINHOOD DR CHARLESTON, SC 29407-5827 FAC. #: 843-814-0321 PH#: Facility Email: JMURRY@MURCOELDERCARE.COM	Charleston / Limited Liability PO BOX 32372 CHARLESTON, SC 29417-2372 MURCO ELDERCARE LLC IHCP-0344 / 09/30/2018	- 1
PALMETTO FAMILY HOMECARE LLC 4000 FABER PL DR STE 300 NORTH CHARLESTON, SC 29405-8587 FAC. #: 843-323-4270 PH#: Facility Email: INFO@PALMETTOFAMILYHOMECARE.COM	Charleston / Limited Liability 4000 FABER PL DR STE 300 NORTH CHARLESTON, SC 29405-8587 PALMETTO FAMILY HOMECARE LLC IHCP-0060 / 02/28/2018	- 1
RESCARE HOMECARE CHARLESTON 1420 ASHLEY RIVER RD CHARLESTON, SC 29407 FAC. #: 843-556-1191 PH#: Facility Email: SHAWN.KEITH@RESCARE.COM	Charleston / Corporation 1420 ASHLEY RIVER RD CHARLESTON, SC 29407 SOUTHERN HOME CARE SERVICES INC DBA RESCARE HOMECARE IHCP-0013 / 05/31/2018	- 1
RIGHT AT HOME - CHARLESTON 658 RUTLEDGE AVE STE B CHARLESTON, SC 29403-4147 FAC. #: 843-580-5120 PH#: Facility Email: MATTHEW.MINOTTI@RAHCHARLESTON.COM	Charleston / Limited Liability 658 RUTLEDGE AVE STE B CHARLESTON, SC 29403-4147 CHARLESTON HOME HEALTH CARE LLC IHCP-0106 / 04/30/2018	- 1

County: Charleston

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
ROBERTS IN-HOME CARE 3605 MEETING STREET RD STE B1 NORTH CHARLESTON, SC 29405-8095 FAC.#:843-552-8165 PH#: Facility Email: ROBERTS4CARE@YAHOO.COM	Charleston / Limited Liability 3605 MEETING STREET RD NORTH CHARLESTON, SC 29418 ROBERTS IN-HOME NURSING SERVICES LLC IHCP-0240 / 07/31/2018	- 1
SEA ISLAND COMPREHENSIVE HEALTHCARE 3627 MAYBANK HWY JOHNS ISLAND, SC 29455 FAC.#:843-559-4137 RUCKER TUMIKO PH#: 843-559-4137 Facility Email: TRR@SICHCC.ORG	Charleston / Corporation 3627 MAYBANK HWY JOHNS ISLAND, SC 29455 SEA ISLAND COMPREHENSIVE HEALTHCARE CORPORATION IHCP-0638 / 11/30/2017	- 1
TENDER LOVING CARE HOMECARE SERVICES LLC 3262 LANDMARK DR STE 127 NORTH CHARLESTON, SC 29420 FAC.#:843-552-0035 PH#: Facility Email: TLCHSERVICESLLC@GMAIL.COM	Charleston / Sole Proprietorship 185 CYPRESS FOREST DR MONCKS CORNER, SC 29461-8442 PAULETTE C JENKINS IHCP-0301 / 08/31/2018	- 1
UTOPIA HOME CARE INC 1124 SAM RITTENBERG BLVD STE 8 CHARLESTON, SC 29407-3362 FAC.#:843-553-6060 MARTINEZ DAVID PH#: 843-553-6060 Facility Email: SNEUMANN@UTOPIAHOMECARE.COM	Charleston / Corporation 1124 SAM RITTENBERG BLVD STE 8 CHARLESTON, SC 29407-3362 UTOPIA HOME CARE INC IHCP-0460 / 01/31/2018	- 1
VISITING ANGELS 1041 JOHNNIE DODDS BLVD STE 4C MOUNT PLEASANT, SC 29464-6156 FAC.#:843-884-2828 BAGADONAS DENISE PH#: 843-884-2828 Facility Email: RDESALLE@VISITINGANGELS.COM	Charleston / Limited Liability 1041 JOHNNIE DODDS BLVD STE 4C MOUNT PLEASANT, SC 29464-6156 GENUINE HOME CARE LLC IHCP-0629 / 07/31/2018	- 1
WE CARE HOME CARE LLC 7301 RIVERS AVE #190 NORTH CHARLESTON, SC 29406 FAC.#:843-789-3003 NORMAN JAMES PH#: 843-789-3003 Facility Email: DEEANNAENFINGER@WECAREHC.COM	Charleston / Limited Liability 7301 RIVERS AVE #190 NORTH CHARLESTON, SC 29406 WE CARE HOME CARE LLC IHCP-0333 / 02/28/2018	- 1

Totals For Facility/License Type: Inhome Care ProviderNumber of Activities/Facilities licensed: 46 Number Licensed Units: - 46

County: Charleston

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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BISHOP GADSDEN EPISCOPAL HEALTH CARE CENTER 3 BISHOP GADSDEN WAY CHARLESTON, SC 29412-3500 FAC.#:843-762-3300 TRAWICK C WILLIAM PH#: 843-762-3300 Facility Email: SARAH.TIPTON@BISHOPGADSDEN.ORG	Charleston / Non-Profit Corporation BISHOP GADSDEN EPISCOPAL RETIREMENT COMMUNITY NCF-0577 / 04/30/2018	50
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Licensed Beds: Nursing Home: 41 Institutional Nursing Home: 9

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

FRANKE HEALTH CARE CENTER 1885 RIFLE RANGE RD MOUNT PLEASANT, SC 29464-9440 FAC.#:843-856-4700 STOLL SANDRA A PH#: 843-856-4700 Facility Email: SSTOLL@FRANKEATSEASIDE.ORG	Charleston / Non-Profit Corporation 1885 RIFLE RANGE RD MOUNT PLEASANT, SC 29464-9440 LUTHERAN HOMES OF SOUTH CAROLINA INC (NPC) NCF-0800 / 07/31/2018	44
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Licensed Beds: Nursing Home: 44 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

HEARTLAND OF WEST ASHLEY REHABILITATION AND NURSING CENTER 1137 SAM RITTENBERG BLVD CHARLESTON, SC 29407-3370 FAC.#:843-763-0233 SMELSER THERESA PH#: 843-763-0233 Facility Email: 531ADMIN@HCR-MANORCARE.COM	Charleston / Limited Liability 333 N SUMMIT ST, LEGAL DEPARTMENT TOLEDO, OH 43604-1531 WEST ASHLEY REHABILITATION AND NURSING CENTER - CHARLESTON SC LLC NCF-0413 / 12/31/2018	125
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Licensed Beds: Nursing Home: 125 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

JOHNS ISLAND REHABILITATION AND HEALTHCARE CENTER 3647 MAYBANK HWY JOHNS ISLAND, SC 29455-4825 FAC.#:843-559-5888 ANDERSON LINDSAY PH#: 843-559-5888 Facility Email: LANDERSON@ORIANNA.COM	Charleston / Limited Liability 3647 MAYBANK HWY JOHNS ISLAND, SC 29455-4825 JOHNS ISLAND REHABILITATION AND HEALTHCARE CENTER LLC NCF-0911 / 11/30/2018	132
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Licensed Beds: Nursing Home: 132 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

County: Charleston

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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LIFE CARE CENTER OF CHARLESTON 2600 ELMS PLANTATION BLVD NORTH CHARLESTON, SC 29406-9180 FAC.#:843-764-3500 CLIETT BETH A PH#: 843-764-3500 Facility Email: BETH_CLIETT@LCCA.COM	Charleston / Ltd. Liability 2600 ELMS PLANTATION BLVD NORTH CHARLESTON, SC 29406-9180 CHARLESTON MEDICAL INVESTORS LLC NCF-0878 / 11/30/2018	148
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Licensed Beds: Nursing Home: 148 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

MOUNT PLEASANT MANOR 921 BOWMAN RD MOUNT PLEASANT, SC 29464-3234 FAC.#:843-884-8903 WHITE BRUCE L PH#: 843-884-8903 Facility Email: BWHITE@MOUNTPLEASANTMANOR.COM	Charleston / Ltd. Liability 921 BOWMAN RD MOUNT PLEASANT, SC 29464-3234 MOUNT PLEASANT MANOR LLC NCF-0896 / 05/31/2018	132
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Licensed Beds: Nursing Home: 132 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

NHC HEALTHCARE CHARLESTON 2230 ASHLEY CROSSING DR CHARLESTON, SC 29414-5700 FAC.#:843-766-5228 BARTLETT GREGORY PH#: 843-766-5228 Facility Email: TBARTLETT@NHCCHARLESTONHEALTHCARE.COM	Charleston / Limited Liability 2230 ASHLEY CROSSING DR CHARLESTON, SC 29414-5700 NHC HEALTHCARE-CHARLESTON LLC NCF-0871 / 09/30/2018	132
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Licensed Beds: Nursing Home: 132 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

RIVERSIDE HEALTH AND REHAB 2375 BAKER HOSPITAL BLVD NORTH CHARLESTON, SC 29405-8291 FAC.#:843-744-2750 MONTGOMERY-SMALL JERROLYN PH#: 843-744-2750 Facility Email: RUSTY.FLATHMANN@FUNDLTC.COM	Charleston / Ltd. Liability 2375 BAKER HOSPITAL BLVD NORTH CHARLESTON, SC 29405-8291 THI OF SOUTH CAROLINA AT CHARLESTON LLC NCF-0870 / 08/31/2018	160
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Licensed Beds: Nursing Home: 160 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

County: Charleston

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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SANDPIPER REHAB & NURSING 1049 ANNA KNAPP BLVD MOUNT PLEASANT, SC 29464-3133 FAC.#:843-881-3210 WALROND JAMES J PH#: Facility Email: REFER@SANDPIPERCENTER.COM	Charleston / Limited Liability 1049 ANNA KNAPP BLVD MOUNT PLEASANT, SC 29464-3133 SANDPIPER REHAB & NURSING-DELAWARE LLC NCF-0876 / 10/31/2018	176
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Licensed Beds: Nursing Home: 176 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

SAVANNAH GRACE AT THE PALMS OF MT PLEASANT 1010 LAKE HUNTER CIR MOUNT PLEASANT, SC 29464-5417 FAC.#:843-388-2030 BURNS RICHARD M PH#: 843-388-2030 Facility Email: LICENSING@5SSL.COM	Charleston / 400 CENTRE ST NEWTON, MA 02458-2094 SNH SE SG TENANT LLC NCF-0926 / 06/30/2018	48
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Licensed Beds: Nursing Home: 48 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

VIBRA HOSPITAL OF CHARLESTON-TCU 1200 HOSPITAL DR MOUNT PLEASANT, SC 29464-3251 FAC.#:843-375-4220 CARR JOSEPH PH#: 843-375-4000 Facility Email: JCARR@VHCHARLESTON.COM	Charleston / Limited Liability 1200 HOSPITAL DR MOUNT PLEASANT, SC 29464-3251 VIBRA HOSPITALOF CHARLESTON LLC NCF-0960 / 08/31/2018	35
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Licensed Beds: Nursing Home: 35 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

WHITE OAK MANOR CHARLESTON INC 9285 MEDICAL PLAZA DR N CHARLESTON, SC 29406-9126 FAC.#:843-797-8282 WALKER RUTH P PH#: 843-797-8282 Facility Email: RWALKER@WHITEOAKMANOR.COM	Charleston / Corporation 9285 MEDICAL PLAZA DR N CHARLESTON, SC 29406-9126 WHITE OAK MANOR CHARLESTON INC NCF-0892 / 12/31/2017	176
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Licensed Beds: Nursing Home: 176 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

Totals For Facility/License Type: <u>Nursing Home</u>	
Number of Activities/Facilities licensed: <u>12</u>	Number Licensed Units: <u>1,358</u>

County: Charleston

Facility Type: PSAD Inpatient

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
CHARLESTON CENTER NEW LIFE UNIT 5 CHARLESTON CENTER DR CHARLESTON, SC 29401-1162 FAC.#:843-958-3480 OLIVER RICHARD H PH#: 843-958-3300 Facility Email: ROLIVER@CHARLESTONCOUNTY.ORG	Charleston / County 5 CHARLESTON CENTER DR CHARLESTON, SC 29401-1162 CHARLESTON COUNTY COUNCIL ITP-0020 / 05/31/2018	16
Licensed Beds: Medical Detox: 0 Social Detox: 0 Res. Treatment Program: 16		
CHARLESTON CENTER SUBACUTE DETOXIFICATION PROGRAM 5 CHARLESTON CENTER DR CHARLESTON, SC 29401-1162 FAC.#:843-958-3480 OLIVER RICHARD H PH#: 843-958-3300 Facility Email: ROLIVER@CHARLESTONCOUNTY.ORG	Charleston / County 5 CHARLESTON CENTER DR CHARLESTON, SC 29401-1162 CHARLESTON COUNTY COUNCIL ITP-0018 / 05/31/2018	16
Licensed Beds: Medical Detox: 16 Social Detox: 0 Res. Treatment Program: 0		
CHARLESTON CENTER TRANSITIONAL CARE UNIT 5 CHARLESTON CENTER DR CHARLESTON, SC 29401-1162 FAC.#:843-958-3480 OLIVER RICHARD H PH#: 843-958-3300 Facility Email: ROLIVER@CHARLESTONCOUNTY.ORG	Charleston / County 5 CHARLESTON CENTER DR CHARLESTON, SC 29401-1162 CHARLESTON COUNTY COUNCIL ITP-0019 / 05/31/2018	12
Licensed Beds: Medical Detox: 0 Social Detox: 0 Res. Treatment Program: 12		

Totals For Facility/License Type: <u>PSAD Inpatient</u>	
Number of Activities/Facilities licensed: <u>3</u>	Number Licensed Units: <u>44</u>

County: Charleston

Facility Type: PSAD Outpatient

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
ALTERNATIVES LIFE IMPROVEMENT CENTER 2114 COSGROVE AVE NORTH CHARLESTON, SC 29405-7755 FAC.#:843-767-4477 HARRINGTON HEATHER A PH#: 843-767-4477 Facility Email: ALTERNATIVESLIFE@GMAIL.COM	Charleston / Corporation 2114 COSGROVE AVE NORTH CHARLESTON, SC 29405-7755 ALTERNATIVES LIFE IMPROVEMENT CENTER INC OTP-0098 / 11/30/2017	1
Certifications:None		
CENTER FOR BEHAVIORAL HEALTH SOUTH CAROLINA 2301 COSGROVE AVE STE F NORTH CHARLESTON, SC 29405-7663 FAC.#:843-529-0700 PH#: Facility Email: CHRISTINE.MART@CENTERFORBEHAVIORALHEA LTH	Charleston / Corporation PO BOX 897 BOISE, ID 83701 CENTER FOR BEHAVIORAL HEALTH SOUTH CAROLINA INC OTPN-0054 / 04/30/2018	1
Certifications:Narcotics Treatment Program, Methodone Treatment Program		
CENTER FOR BEHAVIORAL HEALTH SPECIAL SERVICES 2301 COSGROVE AVE STE F NORTH CHARLESTON, SC 29405-7663 FAC.#:843-529-0700 MARTIN CHRISTINE PH#: 843-529-0700 Facility Email: BRANT.MASSMAN@CENTERFORBEHAVIORALHEAL TH.	Charleston / Corporation PO BOX 897 BOISE, ID 83701 CENTER FOR BEHAVIORAL HEALTH SOUTH CAROLINA INC OTP-0069 / 02/28/2018	1
Certifications:None		
CHARLESTON CENTER 5 CHARLESTON CENTER DR CHARLESTON, SC 29401-1162 FAC.#:843-958-3300 OLIVER RICHARD H PH#: 843-958-3300 Facility Email: ROLIVER@CHARLESTONCOUNTY.ORG	Charleston / County 5 CHARLESTON CENTER DR CHARLESTON, SC 29401-1162 CHARLESTON COUNTY COUNCIL OTPN-0047 / 02/28/2018	1
Certifications:Narcotics Treatment Program, Methodone Treatment Program		
CROSSROADS TREATMENT CENTERS OF CHARLESTON 2470 MALL DR STE C & D NORTH CHARLESTON, SC 29406-6514 FAC.#:843-244-0967 DEAL KIM PH#: 843-244-0967 Facility Email: KDEAL@CROSSROADSTREATMENTCENTERS.COM	Charleston / Corporation 105 N SPRING ST STE 109 GREENVILLE, SC 29601-2859 CROSSROADS TREATMENT CENTER OF CHARLESTON PC OTPN-0134 / 10/31/2018	1
Certifications:Narcotics Treatment Program, Methodone Treatment Program		
NEW DIRECTION BEHAVIORAL HEALTH 9241 UNIVERSITY BLVD STE B2 NORTH CHARLESTON, SC 29406-8101 FAC.#:843-442-7484 KEY HELENE J PH#: 843-442-7484 Facility Email: HELENE.KEY@COMCAST.NET	Charleston / Limited Liability 9225 UNIVERSITY BLVD STE E2C NORTH CHARLESTON, SC 29406-9149 NEW DIRECTION BEHAVIORAL HEALTH LLC OTP-0103 / 11/30/2017	1
Certifications:None		

County: Charleston

Facility Type: PSAD Outpatient

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
POSITIVE FEEDBACK PROFESSIONAL COUNSELING ASSOCIATES 1497 REMOUNT RD NORTH CHARLESTON, SC 29406 FAC.#:843-744-1447 CHALK STAUNTON G PH#: 843-744-1447 Facility Email: CHALKG@COMCAST.NET	Charleston / Limited Liability 1497 REMOUNT RD NORTH CHARLESTON, SC 29406 POSITIVE FEEDBACK PROFESSIONAL COUNSELING ASSOCIATES LLC OTP-0063 / 08/31/2018	1

Certifications:None

TAKING A POSITIVE STEP 6650 RIVERS AVE STE 406 NORTH CHARLESTON, SC 29406-4828 FAC.#:843-576-1406 ALLEN CAROLYN PH#: 843-487-5140 Facility Email: TAKINGAPOSITIVESTEP@YAHOO.COM	Charleston / 6650 RIVERS AVE STE 406 NORTH CHARLESTON, SC 29406-4828 TAKING A POSITVE STEP INC OTP-0168 / 12/30/2017	1
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Certifications:None

Totals For Facility/License Type: <u>PSAD Outpatient</u>	
Number of Activities/Facilities licensed: _____ 8	Number Licensed Units: _____ 8

County: Charleston

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
CHARLES TOWNE DIALYSIS 1964 ASHLEY RIVER RD STE D-3 CHARLESTON, SC 29407 FAC.#:843-852-3537 TURBEVILLE LEIGH PH#: Facility Email: STEPHANIE.KING1@DAVITA.COM	Charleston / Limited Liability 5200 VIRGINIA WAY, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 POINTE DIALYSIS LLC ERD-0198 / 03/31/2018	20
Licensed Stations: Hemodialysis: 20 Peritoneal: 0		
CHARLES TOWNE HOME PROGRAM 1964 ASHLEY RIVER RD STE D-2 CHARLESTON, SC 29407-4782 FAC.#:843-573-8767 MYERS LUCRETIA PH#: Facility Email: STEPHANIE.KING1@DAVITA.COM	Charleston / Limited Liability 5200 VIRGINIA WAY, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 COAST DIALYSIS LLC ERD-0197 / 03/31/2018	4
Licensed Stations: Hemodialysis: 0 Peritoneal: 4		
DCI AZALEA PLACE 2270 TECHNICAL PKWY NORTH CHARLESTON, SC 29406-4930 FAC.#:843-863-8974 SMITH ROCHELLE PH#: Facility Email: SUSAN.WATTS@DCIINC.ORG	Charleston / Non-Profit Corporation 1411 KING ST CHARLESTON, SC 29403-3008 DIALYSIS CLINIC INC ERD-0006 / 08/31/2018	20
Licensed Stations: Hemodialysis: 20 Peritoneal: 0		
DCI EAST OF THE COOPER 1088 JOHNNIE DODDS BLVD MOUNT PLEASANT, SC 29464-3142 FAC.#:843-881-8344 LEGETTE MARY PH#: 843-881-8344 Facility Email: SUSAN.WATTS@DCIINC.ORG	Charleston / Non-Profit Corporation 1411 KING ST CHARLESTON, SC 29403-3008 DIALYSIS CLINIC INC ERD-0043 / 07/31/2018	17
Licensed Stations: Hemodialysis: 16 Peritoneal: 1		
DCI JAMES ISLAND 959 FOLLY RD CHARLESTON, SC 29412-3919 FAC.#:843-795-8386 HENRY JENNIFER PH#: 843-795-8386 Facility Email: SUSAN.WATTS@DCIINC.ORG	Charleston / Non-Profit Corporation 1411 KING ST CHARLESTON, SC 29403-3008 DIALYSIS CLINIC INC ERD-0094 / 02/28/2018	16
Licensed Stations: Hemodialysis: 16 Peritoneal: 0		
DCI MAGNOLIA COURT 1427 KING ST CHARLESTON, SC 29403-3008 FAC.#:843-853-3399 FULLER KYRIN PH#: Facility Email: SUSAN.WATTS@DCIINC.ORG	Charleston / Non-Profit Corporation 1411 KING ST CHARLESTON, SC 29403-3008 DIALYSIS CLINIC INC ERD-0074 / 11/30/2018	17
Licensed Stations: Hemodialysis: 17 Peritoneal: 0		

County: Charleston

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
DCI WEST OF THE ASHLEY 46 MARKFIELD DR STE B CHARLESTON, SC 29407-6982 FAC.#:843-766-2317 GRIFFIN APRIL PH#: 843-766-2317 Facility Email: SUSAN.WATTS@DCIINC.ORG	Charleston / Non-Profit Corporation 1411 KING ST CHARLESTON, SC 29403-3008 DIALYSIS CLINIC INC ERD-0008 / 08/31/2018	23
Licensed Stations: Hemodialysis: 23 Peritoneal: 0		
FABER PLACE DIALYSIS 3801 FABER PL DR NORTH CHARLESTON, SC 29405-8533 FAC.#:843-377-1566 MUKHOPADHYAY SONALI PH#: 843-377-1566 Facility Email: CHERYL.SINGLETERARY@DAVITA.COM	Charleston / Corporation 5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 TOTAL RENAL CARE INC ERD-0166 / 09/30/2018	16
Licensed Stations: Hemodialysis: 16 Peritoneal: 0		
FMC NORTH CHARLESTON 2450 ELMS CENTER RD NORTH CHARLESTON, SC 29406-9858 FAC.#:843-553-4742 JONES ROBERT PH#: 843-553-4742 Facility Email: ROBERT.JONES@FMC-NA.COM	Charleston / Limited Liability 2450 ELMS CENTER RD NORTH CHARLESTON, SC 29406-9858 RAI CARE CENTERS OF SOUTH CAROLINA I LLC ERD-0154 / 05/31/2018	23
Licensed Stations: Hemodialysis: 21 Peritoneal: 2		
FRESENIUS MEDICAL CARE CHARLESTON COUNTY 901 VON KOLNITZ RD STE 102 MOUNT PLEASANT, SC 29464-3772 FAC.#:843-881-4842 ZADROZINSKI MICHELLE PH#: 843-881-4842 Facility Email: DEVIN.DEICH@FMC-NA.COM	Charleston / Corporation 901 VON KOLNITZ RD STE 102 MOUNT PLEASANT, SC 29464-3772 BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC ERD-0193 / 11/30/2017	12
Licensed Stations: Hemodialysis: 11 Peritoneal: 2		
FRESENIUS MEDICAL CARE MOUNT PLEASANT 1028 EWALL ST MOUNT PLEASANT, SC 29464-3046 FAC.#:843-884-3115 GREEN VICTORIA PH#: 843-884-3115 Facility Email: DEVIN.DEICH@FMC-NA.COM	Charleston / Limited Liability 1028 EWALL ST MOUNT PLEASANT, SC 29464-3046 NRA-MT PLEASANT SOUTH CAROLINA LLC ERD-0148 / 11/30/2017	16
Licensed Stations: Hemodialysis: 16 Peritoneal: 0		
FRESENIUS MEDICAL CARE WEST ASHLEY 2080 CHARLIE HALL BLVD CHARLESTON, SC 29414-5830 FAC.#:843-766-4655 FRYAR LINDA PH#: 843-766-4655 Facility Email: LINDA.FRYAR@FMC-NA.COM	Charleston / Limited Liability 2080 CHARLIE HALL BLVD CHARLESTON, SC 29414-5830 RAI CARE CENTERS OF SOUTH CAROLINA I LLC ERD-0155 / 11/30/2017	29
Licensed Stations: Hemodialysis: 26 Peritoneal: 4		

County: Charleston

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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HOLLYWOOD RAVENEL DIALYSIS CLINIC 5953 JACOBS POINT BLVD RAVENEL, SC 29470-5643 FAC.#:843-571-4025 RICHARDS STEPHANIE L PH#: 843-766-4655 Facility Email: STEPHANIE.RICHARDS@FMC-NA.COM	Charleston / Limited Liability PO BOX 487 RAVENEL, SC 29470 NRA-HOLLYWOOD SOUTH CAROLINA LLC ERD-0157 / 03/31/2018	16
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Licensed Stations: Hemodialysis: 16 Peritoneal: 0

NORTH CHARLESTON DIALYSIS 5900 RIVERS AVE UNIT E NORTH CHARLESTON, SC 29406-6082 FAC.#:843-747-3447 MEREDITH MATTHEW PH#: 843-747-3447 Facility Email: LASHUNDRA.IVERY@DAVITA.COM	Charleston / Corporation 5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 TOTAL RENAL CARE INC ERD-0165 / 08/31/2018	17
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Licensed Stations: Hemodialysis: 17 Peritoneal: 2

NXSTAGE KIDNEY CARE CHARLESTON 2270 ASHLEY CROSSING DR STE 130A CHARLESTON, SC 29414-5702 FAC.#:843-213-3660 PAYTON JENNIFER PH#: 843-213-3660 Facility Email: JPAYTON@NXSTAGE.COM	Charleston / 2270 ASHLEY CROSSING DR STE 130A CHARLESTON, SC 29414-5702 NKC CHARLESTON LLC ERD-0231 / 05/31/2018	6
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Licensed Stations: Hemodialysis: 4 Peritoneal: 1

Totals For Facility/License Type: Renal Dialysis

Number of Activities/Facilities licensed: 15 Number Licensed Units: 252

County: Charleston

Facility Type: Residential Treatment for Children & Adolescents

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	
RIVERSIDE BEHAVIORAL HEALTH SERVICES AT WINDWOOD FARM	Charleston / Non-Profit Corporation	12
4857 WINDWOOD FARM RD	4857 WINDWOOD FARM RD	
AWENDAW, SC 29429-5951 FAC.#:843-884-5342	AWENDAW, SC 29429-5951	
MCKELVEY DEBORAH D PH#: 843-884-5342	WINDWOOD FARM HOME FOR CHILDREN INC	
Facility Email: MCKELVEY@WINDWOODFARM.ORG	RTF-0025 / 03/31/2018	

Totals For Facility/License Type: <u>Residential Treatment for Children & Adolescents</u>	
Number of Activities/Facilities licensed: <u>1</u>	Number Licensed Units: <u>12</u>

County: Charleston

Facility Type: Tattoo Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
BLU GORILLA TATTOO 1409 KING ST EXT CHARLESTON, SC 29403 FAC.#:843-805-8071 DENNIS TIMOTHY A PH#: 843-789-2244 Facility Email: BLUGORILLA.ALYX@GMAIL.COM	Charleston / Corporation 1409 KING ST EXT CHARLESTON, SC 29403 BLU GORILLA TATTOO INC TF-0033 / 01/31/2018	4
BREAKTHROUGH TATTOO 3025 ASHLEY PHOSPHATE RD STE B-1 NORTH CHARLESTON, SC 29418 FAC.#:843-592-9939 BROWN TIMOTHY PH#: 843-592-9939 Facility Email: TIMDEANBROWN@GMAIL.COM	Charleston / Sole Proprietorship 3025 ASHLEY PHOSPHATE RD STE B-1 NORTH CHARLESTON, SC 29418 BROWN TIMOTHY TF-0273 / 08/31/2018	4
BROKEN LANTERN TATTOO STUDIO 1931 BELGRADE AVE CHARLESTON, SC 29407 FAC.#:843-637-4999 COLLINS GLENN R PH#: 843-637-4999 Facility Email: BROKENLANTERNSTATTOO@GMAIL.COM	Charleston / Limited Liability 1931 BELGRADE AVE CHARLESTON, SC 29407 BROKEN LANTERN TATTOO STUDIO LLC TF-0263 / 02/28/2018	5
CHARLESTON TATTOO COMPANY INC 792 FOLLY RD STE E CHARLESTON, SC 29412-3477 FAC.#:843-641-7250 CHESTON JONATHAN E PH#: 803-782-0753 Facility Email: JECHESTON@YAHOO.COM	Charleston / Partnership PO BOX 32404 CHARLESTON, SC 29417-2404 DEVINE STREET TATTOO INC TF-0136 / 06/30/2017 (Renewal Pending)	4
HOLY CITY TATTOOING COLLECTIVE 1916 SAVANNAH HWY CHARLESTON, SC 29407-6251 FAC.#:843-202-0950 EISENBERG JASON R PH#: 843-805-8000 Facility Email: HOLYCITYTAT2@YAHOO.COM	Charleston / Limited Liability 1916 SAVANNAH HWY CHARLESTON, SC 29407-6251 HOLY MOUNTAIN LLC TF-0046 / 08/31/2018	5
IRON LOTUS STUDIOS 1921 SAVANNAH HWY CHARLESTON, SC 29407-6250 FAC.#:843-225-1304 MARCOTTE DAVID S PH#: 843-225-1304 Facility Email: SOCAL@IRONLOTUSSTUDIOS.COM	Charleston / Ltd. Liability 1921 SAVANNAH HWY CHARLESTON, SC 29407-6250 LUCKY 7'S TATTOO STUDIO LLC TF-0102 / 05/31/2018	6
PEPPER SHADE 1436 N MEETING ST CHARLESTON, SC 29403 FAC.#:843-789-2244 DENNIS TIMOTHY A PH#: 843-789-2244 Facility Email: BLUGORILLA.ALYX@GMAIL.COM	Charleston / Corporation 1409 KING ST EXT CHARLESTON, SC 29403 BLU GORILLA TATTOO INC TF-0118 / 02/28/2018	4
ROSES AND RUINS TATTOO-CHARLESTON 1669 MEETING STREET RD STE A NORTH CHARLESTON, SC 29405-9408 FAC.#:843-202-0922 ZEALY LAWRENCE CHRISTOPHER PH#: 843-442-4033 Facility Email: CHRISZEALY@YAHOO.COM	Charleston / Limited Liability 1669 MEETING STREET RD NORTH CHARLESTON, SC 29405-9408 ROSES AND RUINS TATTOO LLC TF-0158 / 08/31/2018	5

County: Charleston

Facility Type: Tattoo Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
THE GILDED MERMAID 4213-B SAVANNAH HWY RAVENEL, SC 29470 FAC. #: 843-697-9995 PH#:	Charleston / Sole Proprietorship PO BOX 624 RAVENEL, SC 29470 OSBORN JULIE A TF-0278 / 09/30/2018	4
UPPER HAND TATTOO STUDIO 1869 SAM RITTENBERG BLVD CHARLESTON, SC 29407-4870 FAC. #: 843-225-8602 PH#:	Charleston / 1869 SAM RITTENBERG BLVD CHARLESTON, SC 29407-4870 UPPER HAND TATTOO STUDIO LLC TF-0266 / 02/28/2018	5

Totals For Facility/License Type: <u>Tattoo Facility</u>	
Number of Activities/Facilities licensed: <u>10</u>	Number Licensed Units: <u>46</u>

Number of Activities/Facilities licensed in county of : <u>Charleston</u>	# Lics: <u>205</u>
	Number Licensed Units : <u>6,022</u>

Report Totals

Total Number of Activities/Facilities licensed: 205 Total Number Licensed Units: 6,022