

County: Beaufort

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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BEAUFORT MEMORIAL HOSPITAL 955 RIBAUT RD BEAUFORT, SC 29902-5454 FAC.#:843-522-5200 PH#:	Beaufort / County 955 RIBAUT RD BEAUFORT, SC 29902-5454 BEAUFORT COUNTY MEMORIAL HOSPITAL HTL-0026 / 11/30/2018	197
Facility Email: ASOBIECH@BMHSC.ORG Licensed Beds: General: 169 Psychiatric: 14 Rehab: 14 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 5		

Certifications: Perinatal Level II, JCAHO Accredited

HILTON HEAD HOSPITAL 25 HOSPITAL CENTER BLVD HILTON HEAD ISLAND, SC 29926-2738 FAC.#:843-689-8206 CLARK JEREMY PH#: 843-689-8206	Beaufort / Limited Liability Limited Beaufort HOSPITAL CENTER BLVD HILTON HEAD ISLAND, SC 29926-2738 HILTON HEAD HEALTH SYSTEM LP HTL-0646 / 10/31/2018	93
Facility Email: HHH-CEO@TENETHEALTH.COM Licensed Beds: General: 93 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications: Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type: <u>Hospital or Institutional General Infirmary</u>	
Number of Activities/Facilities licensed: _____ 2	Number Licensed Units: _____ 290

Number of Activities/Facilities licensed in county of : <u>Beaufort</u> # Lics: _____ 2
Number Licensed Units : _____ 290

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
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#: 843-416-6210 Facility Email: PATRICK.DOWNES@TENETHEALTH.COM	Charleston / Corporation 2000 HOSPITAL DR MOUNT PLEASANT, SC 29464-3764 EAST COOPER COMMUNITY HOSPITAL INC HTL-0447 / 03/31/2019	130
Licensed Beds: General: 130 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 10		

Certifications: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 / 12/31/2018	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
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 PORTER STEPHEN PH#: 843-724-2000 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 / 04/30/2019	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>	
Number of Activities/Facilities licensed in county of : <u>Charleston</u> # Lics: <u>11</u>		
Number Licensed Units : <u>2,089</u>		

County: Colleton

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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COLLETON MEDICAL CENTER 501 ROBERTSON BLVD WALTERBORO, SC 29488-5714 FAC.#:843-782-2000 HIOTT JAMES PH#: 843-782-2000 Facility Email: MARILYN.FRYAR@HCAHEALTHCARE.COM	Colleton / Corporation 501 ROBERTSON BLVD WALTERBORO, SC 29488-5714 WALTERBORO COMMUNITY HOSPITAL INC HTL-0405 / 03/31/2019	135
Licensed Beds: General: 116 Psychiatric: 19 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications: Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type: <u>Hospital or Institutional General Infirmary</u>	
Number of Activities/Facilities licensed: <u>1</u>	Number Licensed Units: <u>135</u>

Number of Activities/Facilities licensed in county of :	<u>Colleton</u>	# Lics: <u>1</u>
	Number Licensed Units :	<u>135</u>

County: Dorchester

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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LIEBER CORRECTIONAL INSTITUTION INFIRMARY 136 WILBORN AVE RIDGEVILLE, SC 29472-6351 FAC.#:803-896-3702 MAUNEY LUANNE PH#: 803-896-3702 Facility Email: ARDIS.JENNY@DOC.STATE.SC.US	Dorchester / State PO BOX 210382 COLUMBIA, SC 29221-0382 SC DEPT OF CORRECTIONS HTL-0874 / 04/30/2019	10
Licensed Beds: General: 10 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:None

SUMMERVILLE MEDICAL CENTER 295 MIDLAND PKWY SUMMERVILLE, SC 29485-8104 FAC.#:843-970-5101 VALENTINE LISA R PH#: 843-970-5101 Facility Email: LISA.VALENTINE1@HCAHEALTHCARE.COM	Dorchester / 295 MIDLAND PKWY SUMMERVILLE, SC 29485-8104 TRIDENT MEDICAL CENTER LLC HTL-0780 / 04/30/2019	94
Licensed Beds: General: 94 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 4		

Certifications:Abortions, Perinatal Level II, JCAHO Accredited

Totals For Facility/License Type: <u>Hospital or Institutional General Infirmary</u>	
Number of Activities/Facilities licensed: <u>2</u>	Number Licensed Units: <u>104</u>

Number of Activities/Facilities licensed in county of : <u>Dorchester</u>	# Lics: <u>2</u>
	Number Licensed Units : <u>104</u>

County: Georgetown

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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TIDELANDS GEORGETOWN MEMORIAL HOSPITAL 606 BLACK RIVER RD GEORGETOWN, SC 29440-3368 FAC.#:843-527-7200 MAXWELL PAMELA PH#: 843-527-7200 Facility Email: PMAXWELL@TIDELANDSHEALTH.ORG	Georgetown / Non-Profit Corporation PO BOX 421718 GEORGETOWN, SC 29442-4203 TIDELANDS GEORGETOWN MEMORIAL HOSPITAL HTL-0007 / 08/31/2018	131
Licensed Beds: General: 131 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 5		

Certifications: Perinatal Level II, JCAHO Accredited

TIDELANDS WACCAMAW COMMUNITY HOSPITAL 4070 HWY 17 BYPASS MURRELLS INLET, SC 29576-5033 FAC.#:843-652-1001 LAROCHELLE JOHN PH#: 843-652-1001 Facility Email: JLAROCHELLE@TIDELANDSHEALTH.ORG	Georgetown / Non-Profit Corporation 4070 HWY 17 BYPASS MURRELLS INLET, SC 29576-5033 WACCAMAW COMMUNITY HOSPITAL (INC) HTL-0834 / 10/31/2018	150
Licensed Beds: General: 124 Psychiatric: 0 Rehab: 26 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 2		

Certifications: Perinatal Level II, JCAHO Accredited

Totals For Facility/License Type: Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed: 2 Number Licensed Units: 281

Number of Activities/Facilities licensed in county of : Georgetown # Lics: 2

Number Licensed Units : 281

County: Horry

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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CONWAY HOSPITAL 300 SINGLETON RIDGE RD CONWAY, SC 29526-9142 FAC.#:843-347-7111 PH#:	Horry / Non-Profit Corporation PO BOX 829 CONWAY, SC 29528-0829 CONWAY HOSPITAL INC HTL-0083 / 05/31/2018	210
Facility Email: PCLAYTON@CMC-SC.COM		
Licensed Beds: General: 210 Psychiatric: 0 Rehab: 0 Substance Abuse: 0		
Other Beds : NICU: 0 Neonatal Special Care: 6		

Certifications:Trauma Center Level III, Perinatal Level II

GRAND STRAND MEDICAL CENTER 809 82ND PKWY MYRTLE BEACH, SC 29572-4611 FAC.#:843-692-1000 SIMS MARK PH#: 813-692-1000	Horry / Ltd. Liability 809 82ND PKWY MYRTLE BEACH, SC 29572-4611 GRAND STRAND REGIONAL MEDICAL CENTER LLC HTL-0770 / 04/30/2019	345
Facility Email: SHERRI.MOUNTAIN@HCAHEALTHCARE.COM		
Licensed Beds: General: 325 Psychiatric: 20 Rehab: 0 Substance Abuse: 0		
Other Beds : NICU: 0 Neonatal Special Care: 2		

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

LIGHTHOUSE BEHAVIORAL HEALTH HOSPITAL 152 WACCAMAW MEDICAL PARK DR CONWAY, SC 29526-8901 FAC.#:843-347-8871 RYBA TOM PH#: 843-347-8871	Horry / Corporation 152 WACCAMAW MEDICAL PARK DR CONWAY, SC 29526-8901 HHC SOUTH CAROLINA INC HTL-0898 / 01/31/2019	96
Facility Email: TOM.RYBA@UHSINC.COM		
Licensed Beds: General: 0 Psychiatric: 69 Rehab: 0 Substance Abuse: 27		
Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

MCLEOD LORIS 3655 MITCHELL ST LORIS, SC 29569-2844 FAC.#:843-716-7000 VEHIGE MONICA PH#: 843-716-7000	Horry / Non-Profit Corporation PO BOX 690001 LORIS, SC 29569-9601 MCLEOD LORIS SEACOAST HOSPITAL HTL-0033 / 01/31/2018 (Renewal Pending)	105
Facility Email: MVEHIGE@MCLEODHEALTH.ORG		
Licensed Beds: General: 105 Psychiatric: 0 Rehab: 0 Substance Abuse: 0		
Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:Perinatal Level I, JCAHO Accredited

MCLEOD SEACOAST 4000 HWY 9 E LITTLE RIVER, SC 29566-7833 FAC.#:843-390-8100 VEHIGE MONICA PH#: 843-390-8100	Horry / Non-Profit Corporation PO BOX 690001 LORIS, SC 29569-9601 MCLEOD LORIS SEACOAST HOSPITAL HTL-0910 / 01/31/2018 (Renewal Pending)	50
Facility Email: MVEHIGE@MCLEODHEALTH.ORG		
Licensed Beds: General: 50 Psychiatric: 0 Rehab: 0 Substance Abuse: 0		
Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

County: Horry

Facility Type: Hospital or Institutional General Infirmary

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: <u>Hospital or Institutional General Infirmary</u>	
Number of Activities/Facilities licensed: <u>5</u>	Number Licensed Units: <u>806</u>

Number of Activities/Facilities licensed in county of : <u>Horry</u>	# Lics: <u>5</u>
	Number Licensed Units : <u>806</u>

County: Jasper

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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COASTAL CAROLINA HOSPITAL 1000 MEDICAL CENTER DR HARDEEVILLE, SC 29927-3446 FAC.#:843-784-8000 TAYLOR JOEL C PH#: 843-784-8181 Facility Email: JANE.BENNETT@TENETHEALTH.COM	Jasper / Corporation 1000 MEDICAL CENTER DR HARDEEVILLE, SC 29927-3446 COASTAL CAROLINA MEDICAL CENTER INC HTL-0902 / 06/30/2018	41
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Licensed Beds: General: 41 Psychiatric: 0 Rehab: 0 Substance Abuse: 0
Other Beds : NICU: 0 Neonatal Special Care: 0

Certifications: Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type: <u>Hospital or Institutional General Infirmary</u>	
Number of Activities/Facilities licensed: <u>1</u>	Number Licensed Units: <u>41</u>

Number of Activities/Facilities licensed in county of : <u>Jasper</u>	# Lics: <u>1</u>
	Number Licensed Units : <u>41</u>

Report Totals

Total Number of Activities/Facilities licensed: 24 Total Number Licensed Units: 3,746