

County: Orangeburg

Facility Type: Adult Day Care

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
COOK CENTER ADULT DAYCARE PROGRAM 937 COOK RD ORANGEBURG, SC 29118-2123 FAC.#:803-536-5100 ETHERIDGE, SUSAN PH#: 803-536-5100 Facility Email: DDIANBROW@AOL.COM	Orangeburg / Corporation 937 COOK RD ORANGEBURG, SC 29118-2123 BROWN PRODUCTIONS INC ADC-0204 / 05/31/2010	40
Number of Participants		40
OAKS PACE 153 FOUNDERS CT ORANGEBURG, SC 29118-2087 FAC.#:803-268-5300 PH#: Facility Email: ETILL@THEOAKSSC.COM	Orangeburg / Corporation 153 FOUNDERS CT ORANGEBURG, SC 29118-2087 METHODIST OAKS INC ADC-0279 / 09/30/2010	90
Number of Participants		90
ORANGEBURG ADULT DAY CARE 1110 WHITMAN ST ORANGEBURG, SC 29115-6151 FAC.#:803-531-6388 DYCHES, VERNETTE D PH#: 803-531-6388 Facility Email: ORBGADULTDAYCARE@PEOPLEPC.COM	Orangeburg / Corporation 1110 WHITMAN ST ORANGEBURG, SC 29115-6151 ORANGEBURG ADULT DAY CARE INC ADC-0151 / 11/30/2009	25
Number of Participants		25
SANTEE ADULT DAYCARE 1580 BASS DR SANTEE, SC 29142 FAC.#:803-854-2401 SEABROOKS, JUDY D PH#: 803-854-2401 Facility Email: SANTEEADULTCARE@YAHOO.COM	Orangeburg / Ltd. Liability PO BOX 947 SANTEE, SC 29142-0947 SANTEE ADULT DAY CARE LLC ADC-0269 / 03/31/2010	21
Number of Participants		21
TOTAL COMFORT ADULT DAY CARE 1706 CAMDEN RD HOLLY HILL, SC 29059-8937 FAC.#:803-469-1076 SINGLETON, ROBERSINE PH#: 803-496-1076 Facility Email: JAZZ1967@EMBARKMAIL.COM	Orangeburg / Limited Liability 1706 CAMDEN RD HOLLY HILL, SC 29059-8937 TOTAL COMFORT ADULT DAY CARE LLC ADC-0205 / 07/31/2010	18
Number of Participants		18

Totals For Facility/License Type Adult Day Care

Number of Activities/Facilities licensed:	5	Number Licensed Units	194
---	---	-----------------------	-----

County: Orangeburg

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
ALDERSGATE AT THE OAKS 921 METHODIST OAKS DR ORANGEBURG, SC 29115-1814 FAC.#:803-534-1212 JOHNSON, PATRICIA W PH#: 803-534-1212 Facility Email: RLOFTS@OCDSNB.ROG	Orangeburg / Non-Profit Corporation PO BOX 1812 ORANGEBURG, SC 29116-1812 ALDERSGATE SPECIAL NEEDS MINISTRY CRC-1488 / 02/28/2010	6
Certifications:None		
ALEXANDER'S GOLDEN STARR COMMUNITY CARE HOME 218 GOLDEN STARR RD SANTEE, SC 29142-9363 FAC.#:803-854-2496 OUTLAW-THOMAS, DONNA S PH#: 803-854-3731 Facility Email: SHILANEDOF@AOL.COM	Orangeburg / Sole Proprietorship PO BOX 405 SANTEE, SC 29142-0405 DONNA S OUTLAW-THOMAS CRC-0171 / 08/31/2010	8
Certifications:None		
BACKHOME CARE FACILITY 140 CHECKERBERRY LN, EUTAWVILLE CROSS, SC 29436-3599 FAC.#:843-753-3899 LEE, NEOMIA B PH#: 843-753-3899 Facility Email: NCCBUTLERLEE@AOL.COM	Orangeburg / Corporation 650 COUNTY LINE RD CROSS, SC 29436-9003 BACKHOME CARE FACILITY INC CRC-0567 / 01/31/2010	10
Certifications:None		
BRIAN'S RESIDENTIAL CARE 1115 WHITMAN ST ORANGEBURG, SC 29115-6150 FAC.#:803-533-1588 STOKES, ALBERT O PH#: 803-533-1588 Facility Email: No Facility Email on Record	Orangeburg / Partnership 1027 BERKELEY DR ORANGEBURG, SC 29118-8356 ALBERT STOKES AND DELAURA STOKES CRC-0418 / 02/28/2010	7
Certifications:None		
BRIAN'S RESIDENTIAL CARE II 4003 CALHOUN ST BRANCHVILLE, SC 29432-2243 FAC.#:803-274-8051 STOKES, DELAURA J PH#: 803-274-8051 Facility Email: DSTOKES30@SC.RR.COM	Orangeburg / Partnership 1027 BERKELEY DR ORANGEBURG, SC 29118-8356 ALBERT STOKES AND DELAURA STOKES CRC-0947 / 09/30/2010	20
Certifications:Alzheimer Care		
CATHERINE'S MANOR I 376 TUCKER ST ORANGEBURG, SC 29115-6821 FAC.#:803-531-2088 CARR JR, GUSS PH#: 803-531-2088 Facility Email: No Facility Email on Record	Orangeburg / Sole Proprietorship 261 SUMMERS AVE ORANGEBURG, SC 29115-5421 CATHERINE CARR CRC-0087 / 06/30/2010	5
Certifications:Alzheimer Care		

County: Orangeburg

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
CATHERINE'S MANOR II		
261 SUMMERS AVE ORANGEBURG, SC 29115-5421 FAC.#:803-539-0899 CARR JR, GUSS PH#: 803-539-0899 Facility Email: No Facility Email on Record	Orangeburg / Sole Proprietorship 261 SUMMERS AVE ORANGEBURG, SC 29115-5421 CATHERINE CARR CRC-1033 / 08/31/2010	5
Certifications:Alzheimer Care		
DALTONS CMC RESIDENTIAL CARE FACILITY		
1231 EUTAW ST ORANGEBURG, SC 29115-3529 FAC.#:803-531-6534 CALDWELL, DENNIS PH#: 803-531-6534 Facility Email: DALTONANDDALTONENTERPRISE@YAHOO.COM	Orangeburg / Sole Proprietorship 1231 EUTAW ST ORANGEBURG, SC 29115-3529 CHERYL GIBSON-DALTON CRC-1447 / 07/31/2010	5
Certifications:None		
DIANA AND CLARENCE BROWN'S HOME		
1591 AMELIA ST, NE ORANGEBURG, SC 29115-6076 FAC.#:803-539-0608 BROWN, DIANA L PH#: 803-539-0608 Facility Email: DDIANBROW@AOL.COM	Orangeburg / Corporation 1591 AMELIA ST, NE ORANGEBURG, SC 29115-6076 BROWN PRODUCTIONS INC CRC-0693 / 11/30/2009	23
Certifications:None		
DREAMLAND RESIDENTIAL CARE		
6941 NORTH RD NORTH, SC 29112-8832 FAC.#:803-533-7492 WRIGHT, DELORES M PH#: 803-533-7492 Facility Email: MCFRANKLIN@EXCITECOM	Orangeburg / Sole Proprietorship 6941 NORTH RD NORTH, SC 29112-8832 DELORES M WRIGHT CRC-0795 / 12/31/2009	5
Certifications:None		
ELLIOTT'S RESIDENTIAL CARE HOME		
2432 LANDSDOWNE RD BOWMAN, SC 29018-9583 FAC.#:803-829-3348 LEVINS, DEBORAH Y PH#: 803-829-3348 Facility Email: No Facility Email on Record	Orangeburg / Corporation PO BOX 265 BOWMAN, SC 29018-0265 ELLIOTT'S RESIDENTIAL CARE HOME INC CRC-0272 / 10/31/2010	7
Certifications:None		
GOLDEN YEARS		
139 SEMINOLE DR ORANGEBURG, SC 29115-7619 FAC.#:803-536-0060 SMITH, JIMI LYN PH#: 803-531-4386 Facility Email: JOLLYRESTMORE@AOL.COM	Orangeburg / Sole Proprietorship PO BOX 1465 ORANGEBURG, SC 29116-1465 LYNN P SMITH CRC-0333 / 11/30/2009	15
Certifications:None		

Division of Health Licensing

County: Orangeburg

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
J J RESIDENTIAL CARE 748 GREEN ST ORANGEBURG, SC 29115-4805 FAC.#:803-539-2604 IRICK-BRUNSON, BARBARA W PH#: 803-539-2604 Facility Email: No Facility Email on Record	Orangeburg / Sole Proprietorship PO BOX 204 ORANGEBURG, SC 29116-0204 BARBARA W IRICK-BRUNSON CRC-0831 / 09/30/2010	10
Certifications:None		
JOLLY REST MORE 1488 GLOVER ST ORANGEBURG, SC 29115-6095 FAC.#:803-531-4386 SMITH, JIMI LYN PH#: 803-531-4386 Facility Email: JOLLYRESTMORE@AOL.COM	Orangeburg / Sole Proprietorship PO BOX 1465 ORANGEBURG, SC 29116-1465 LYNN P SMITH CRC-0332 / 11/30/2009	10
Certifications:None		
JONES ELDERLY CARE 4197 ROWESVILLE RD ROWESVILLE, SC 29133-9556 FAC.#:803-531-6220 JONES, VERTELL PH#: 803-531-6220 Facility Email: No Facility Email on Record	Orangeburg / Sole Proprietorship 124 SADDLEBROOK DR ORANGEBURG, SC 29118-8507 VERTELL JONES CRC-0618 / 01/31/2010	5
Certifications:None		
KATURA SPRINGS ASSISTED LIVING 12488 OLD NUMBER SIX HWY EUTAWVILLE, SC 29048-9167 FAC.#:803-492-9080 LEE-HODGES, DANIELLE R PH#: 843-569-2520 Facility Email: No Facility Email on Record	Orangeburg / Corporation 12488 OLD NUMBER SIX HWY EUTAWVILLE, SC 29048-9167 KATURA SPRINGS ASSISTED LIVING INC CRC-1301 / 05/31/2010	48
Certifications:Alzheimer Care		
LONGWOOD PLANTATION 1687 LONGWOOD DR ORANGEBURG, SC 29118-2307 FAC.#:803-535-0250 HOOKER, JEAN C PH#: 803-535-0250 Facility Email: JHOOKER1@SC.RR.COM	Orangeburg / Corporation SOUTHERNCARE INC CRC-0797 / 12/31/2009	42
Certifications:Alzheimer Unit, Alzheimers Care		
MAGNOLIAS OF SANTEE 118 BRITAIN ST SANTEE, SC 29142-8922 FAC.#:803-854-2020 WILLIS, TAMMY S PH#: 803-854-2020 Facility Email: MAGNOLIAS.OFSANTEE@NTINET.COM	Orangeburg / Ltd. Liability 118 BRITAIN ST SANTEE, SC 29142-8922 CAROLINA RETIREMENT SERVICES OF SANTEE LLC CRC-1416 / 05/31/2010	44
Certifications:Alzheimer Unit, Alzheimers Care		

Division of Health Licensing

County: Orangeburg

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
METHODIST OAKS RESIDENTIAL CARE FACILITY		
1000 METHODIST OAKS DR, METHODIST OAKS ORANGEBURG, SC 29115-1813 FAC.#:803-534-1212 JOHNSON, PATRICIA W PH#: 803-534-1212	Orangeburg / Corporation PO BOX 327 ORANGEBURG, SC 29116-0327 METHODIST OAKS INC	40
Facility Email: No Facility Email on Record	CRC-0910 / 05/31/2010	
Certifications:None		
MORNINGSIDE OF ORANGEBURG		
2306 RIVERBANK DR ORANGEBURG, SC 29118-4046 FAC.#:803-539-2911 JOHNSON, JERRI S PH#: 803-539-2911	Orangeburg / Ltd. Liability 2306 RIVERBANK DR ORANGEBURG, SC 29118-4046 MORNINGSIDE OF ORANGEBURG LLC	49
Facility Email: JSJOHNSON@5SQC.COM	CRC-1261 / 02/28/2010	
Certifications:Alzheimer Care		
PHAIRE'S CARE		
167 BENTHOMP RD ORANGEBURG, SC 29115-9478 FAC.#:803-539-5054 PHAIRE, LONELL PH#: 803-536-5002	Orangeburg / Sole Proprietorship 167 BENTHOMP RD ORANGEBURG, SC 29115-9478 LONELL PHAIRE	5
Facility Email: No Facility Email on Record	CRC-1459 / 12/31/2009	
Certifications:None		
STOKES RESIDENTIAL CARE		
2525 SAINT MATTHEWS RD ORANGEBURG, SC 29118-1319 FAC.#:803-533-0070 STOKES, ALBERT O PH#: 803-533-0070	Orangeburg / Partnership 1027 BERKELEY DR ORANGEBURG, SC 29118-8356 ALBERT STOKES AND DELAURA STOKES	17
Facility Email: No Facility Email on Record	CRC-0570 / 02/28/2010	
Certifications:Alzheimer Care		
TYLER RESTMORE HOME		
1681 BROUGHTON ST ORANGEBURG, SC 29115-4873 FAC.#:803-536-0740 BLACK, EMILY T PH#: 803-536-0740	Orangeburg / Sole Proprietorship 1681 BROUGHTON ST ORANGEBURG, SC 29115-4873 EMILY T BLACK	10
Facility Email: No Facility Email on Record	CRC-0841 / 09/30/2010	
Certifications:None		
TYLER RESTMORE HOME #2		
195 SELLERS AVE ORANGEBURG, SC 29115-6724 FAC.#:803-531-2074 BLACK, EMILY T PH#: 803-531-2074	Orangeburg / Sole Proprietorship 195 SELLERS AVE ORANGEBURG, SC 29115-6724 EMILY T BLACK	9
Facility Email: No Facility Email on Record	CRC-0889 / 10/31/2010	
Certifications:Alzheimer Care		

County: Orangeburg

Facility Type: Community Residential Care Facility

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

Totals For Facility/License Type Community Residential Care Facility	
Number of Activities/Facilities licensed:	24 Number Licensed Units 405

County: Orangeburg

Facility Type: Habilitation R15

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
KINGS COMMUNITY RESIDENCE 611 KINGS RD ORANGEBURG, SC 29118-1812 FAC.#:803-534-0682 KEITT, AGNES PH#: 803-534-0682 Facility Email: No Facility Email on Record	Orangeburg / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0152 / 02/28/2010	8
NANCE COMMUNITY RESIDENCE 980 NANCE ST ORANGEBURG, SC 29115-3070 FAC.#:803-531-8703 KEITT, AGNES PH#: 803-536-1170 Facility Email: No Facility Email on Record	Orangeburg / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0153 / 02/28/2010	8
SIFLY COMMUNITY RESIDENCE 171 WANNAMAKER ST ORANGEBURG, SC 29115-5073 FAC.#:803-531-8708 ALLEN, AUDREY E PH#: 803-531-8708 Facility Email: No Facility Email on Record	Orangeburg / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0219 / 06/30/2010	8
WANNAMAKER STREET COMMUNITY RESIDENCE 250 WANNAMAKER ST ORANGEBURG, SC 29115-5067 FAC.#:803-533-0803 ALLEN, AUDREY E PH#: 803-533-0803 Facility Email: No Facility Email on Record	Orangeburg / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0223 / 06/30/2010	8

Totals For Facility/License Type Habilitation R15

Number of Activities/Facilities licensed:	<input type="text" value="4"/>	Number Licensed Units	<input type="text" value="32"/>
---	--------------------------------	-----------------------	---------------------------------

County: Orangeburg

Facility Type: Home Health

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
DHEC REGION 5 HOME HEALTH SERVICES 1550 CAROLINA AVE ORANGEBURG, SC 29115-4944 FAC.#:803-536-9117 MCLELLAN, BRENDA PH#: 803-536-9117 Facility Email: MCLELLBH@DHEC.SC.GOV	Orangeburg / State PO BOX 1126 ORANGEBURG, SC 29116-1126 SC DEPT OF HEALTH & ENVIRONMENTAL CONTROL HHA-0008 / 10/31/2010	6
Counties Served Aiken, Allendale, Bamberg, Barnwell, Calhoun, Orangeburg 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:		
HOMECARE OF THE REGIONAL MEDICAL CENTER 1895 SAINT MATTHEWS RD ORANGEBURG, SC 29118-2403 FAC.#:803-395-2600 POON, ANN MARIE PH#: 803-395-2600 Facility Email: AMPOON@REGMED.COM	Orangeburg / Non-Profit Corporation PO BOX 2352 ORANGEBURG, SC 29116-2352 REGIONAL MEDICAL CENTER OF ORANGEBURG & CALHOUN COUNTIES INC HHA-0122 / 01/31/2010	2
Counties Served Calhoun, Orangeburg 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:		
METHODIST OAKS CAMPUS HOME HEALTH 1000 METHODIST OAKS DR, METHODIST OAKS ORANGEBURG, SC 29115-1813 FAC.#:803-534-1212 JOHNSON, PATRICIA D PH#: 803-534-1212 Facility Email: DIANE@THEOAKSSC.COM	Orangeburg / Corporation PO BOX 327 ORANGEBURG, SC 29116-0327 METHODIST OAKS INC HHA-0200 / 01/31/2010	1
Counties Served Orangeburg, Special Note - SERVING CAMPUS RESIDENTS ONLY License Restrictions SERVING CAMPUS RESIDENTS ONLY Physical Therapy Y Speech Therapy:Y Occupational Therapy Y Med. Social Services N Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment N Other:		

Totals For Facility/License Type Home Health

Number of Activities/Facilities licensed: Number Licensed Units

County: Orangeburg

Facility Type: Hospice Program

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
HOSPICE OF THE REGIONAL MEDICAL CENTER		
1895 SAINT MATTHEWS RD ORANGEBURG, SC 29118-2403 FAC.#:803-395-2600 POON, ANN MARIE PH#: 803-395-2600 Facility Email: AMPOON@REGMED.COM	Orangeburg / Non-Profit Corporation PO BOX 2352 ORANGEBURG, SC 29116-2352 REGIONAL MEDICAL CENTER OF ORANGEBURG & CALHOUN COUNTIES INC HPC-0037 / 04/30/2010	7
Counties Served Allendale, Bamberg, Calhoun, Dorchester, Lexington, Orangeburg, Richland		
UNITED HOSPICE OF THE MIDLANDS		
1055 SAINT MATTHEWS RD ORANGEBURG, SC 29115-3415 FAC.#:803-268-9780 HARE, DEBBIE PH#: 803-268-9780 Facility Email: DHARE@UHS-PRUITT.COM	Orangeburg / Corporation 1055 SAINT MATTHEWS RD ORANGEBURG, SC 29115-3415 UNITED HOSPICE INC HPC-0114 / 11/30/2009	14
Counties Served Aiken, Allendale, Bamberg, Barnwell, Berkeley, Calhoun, Charleston, Colleton, Dorchester, Edgefield, Lexington, McCormick, Orangeburg, Richland		

Totals For Facility/License Type Hospice Program	
Number of Activities/Facilities licensed: <input type="text" value="2"/>	Number Licensed Units <input type="text" value="21"/>

County: Orangeburg

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	
REGIONAL MEDICAL CENTER OF ORANGEBURG & CALHOUN COUNTIES	Orangeburg / Non-Profit Corporation	286
3000 SAINT MATTHEWS RD	3000 SAINT MATTHEWS RD	
ORANGEBURG, SC 29118-1496 FAC.#:803-395-2461	ORANGEBURG, SC 29118-1496	
DANDRIDGE JR, THOMAS C PH#: 803-395-2200	REGIONAL MEDICAL CENTER OF ORANGEBURG & CALHOUN COUNTIES INC	
Facility Email: BLWILLIAMS@REGMED.COM	HTL-0046 / 05/31/2010	
Licensed Beds: General: 247	Psychiatric: 15	Rehab: 24
		Substance Abuse 0
Other Beds	NICU: 0	Neonatal Special Care 10

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

WILLIAM J MCCORD ADOLESCENT TREATMENT FACILITY	Orangeburg / County	15
910 COOK RD	PO BOX 1166	
ORANGEBURG, SC 29118-2124 FAC.#:803-536-4900	ORANGEBURG, SC 29116-1166	
FOWLER, RICHARD S PH#: 803-534-2328	TRI-COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE- BOARD	
Facility Email: SBETHUNE@TCCADA.STATESC.US	HTL-0619 / 10/31/2010	
Licensed Beds: General: 0	Psychiatric: 0	Rehab: 0
		Substance Abuse 15
Other Beds	NICU: 0	Neonatal Special Care 0

Certifications:None

Totals For Facility/License Type Hospital or Institutional General Infirmary	
Number of Activities/Facilities licensed:	2
Number Licensed Units	301

County: Orangeburg

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
JOLLEY ACRES HEALTHCARE CENTER 1180 WOLFE TRL ORANGEBURG, SC 29115-7339 FAC.#:803-534-1001 HOUSER, DEANA PH#: 803-534-1001 Facility Email: ADMIN.JO.SC@PALMETTOLTC.COM	Orangeburg / Ltd. Liability 1180 WOLFE TRL ORANGEBURG, SC 29115-7339 PALMETTO JOLLEY ACRES OPERATING LLC NCF-0929 / 09/30/2010	60
Licensed Beds Nursing Home 60 Institutional Nursing Home 0		

Certifications:None

LAUREL BAYE HEALTHCARE OF ORANGEBURG 575 STONEWALL JACKSON BLVD ORANGEBURG, SC 29115-7250 FAC.#:803-534-7771 GILSTRAP, DEBRA L PH#: Facility Email: No Facility Email on Record	Orangeburg / Ltd. Liability 575 STONEWALL JACKSON BLVD ORANGEBURG, SC 29115-7250 LAUREL BAYE HEALTHCARE OF ORANGEBURG LLC NCF-0858 / 10/31/2010	113
Licensed Beds Nursing Home 113 Institutional Nursing Home 0		

Certifications:None

METHODIST OAKS 1000 METHODIST OAKS DR, METHODIST OAKS ORANGEBURG, SC 29115-1813 FAC.#:803-534-1212 JOHNSON, PATRICIA W PH#: 803-534-1212 Facility Email: No Facility Email on Record	Orangeburg / Corporation PO BOX 327 ORANGEBURG, SC 29116-0327 METHODIST OAKS INC NCF-0735 / 11/30/2009	132
Licensed Beds Nursing Home 132 Institutional Nursing Home 0		

Certifications:None

UNIHEALTH POST ACUTE CARE-ORANGEBURG 755 WHITMAN ST SE ORANGEBURG, SC 29115-6163 FAC.#:803-534-7036 MARTIN, THEODOCIA R PH#: 803-534-7036 Facility Email: No Facility Email on Record	Orangeburg / Limited Liability 755 WHITMAN ST SE ORANGEBURG, SC 29115-6163 UNIHEALTH POST ACUTE CARE-ORANGEBURG LLC NCF-0617 / 09/30/2010	88
Licensed Beds Nursing Home 88 Institutional Nursing Home 0		

Certifications:None

Totals For Facility/License Type Nursing Home

Number of Activities/Facilities licensed:	4	Number Licensed Units	393
---	---	-----------------------	-----

County: Orangeburg

Facility Type: PSAD Outpatient

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
TRI-COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE 910 COOK RD ORANGEBURG, SC 29118-2124 FAC.#:803-536-4900 FOWLER, RICHARD S PH#: 803-534-2328 Facility Email: SBETHUNE@TCCADA.STATE.SC.US	Orangeburg / County PO BOX 1166 ORANGEBURG, SC 29116-1166 TRI-COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE- BOARD OTP-0027 / 09/30/2010	3

Certifications:None

Totals For Facility/License Type PSAD Outpatient	
Number of Activities/Facilities licensed:	Number Licensed Units
1	3

County: Orangeburg

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
HOLLY HILL DIALYSIS CLINIC 8532 OLD STATE RD HOLLY HILL, SC 29059-8379 FAC.#:803-496-2800 GOODWIN, SABRINA PH#: 803-496-2800 Facility Email: BEN.DELP@RENALADVANTAGE.COM	Orangeburg / Limited Liability 115 EASTPARK DR STE 300, RENAL ADVANTAGE-LEGAL DEPT BRENTWOOD, TN 37027-2311 NRA-HOLLY HILL SOUTH CAROLINA LLC ERD-0137 / 09/30/2010	16
Licensed Stations: Hemodialysis: 16 Peritoneal: 0		
NORTH ORANGEBURG DIALYSIS 124 FIRE TOWER RD ORANGEBURG, SC 29118-1401 FAC.#:803-533-1550 BRADLEY, DEANNA A PH#: 803-533-1550 Facility Email: No Facility Email on Record	Orangeburg / Corporation 5200 VIRGINIA WAY STE 400, DAVITA-LICENSURE & CERTIFICATION BRENTWOOD, TN 37027-7569 DVA HEALTHCARE RENAL CARE INC ERD-0023 / 11/30/2009	21
Licensed Stations: Hemodialysis: 20 Peritoneal: 0		
ORANGEBURG DIALYSIS CLINIC 1184 ORANGEBURG MALL CIR ORANGEBURG, SC 29115-0000 FAC.#:803-531-7501 BASS RN, SUSAN MURDEN PH#: 803-535-9137 Facility Email: BEN.DELP@RENALADVANTAGE.COM	Orangeburg / Limited Liability 115 EASTPARK DR STE 300, RENAL ADVANTAGE-LEGAL DEPT BRENTWOOD, TN 37027-2311 NRA-ORANGEBURG SOUTH CAROLINA LLC ERD-0131 / 05/31/2010	16
Licensed Stations: Hemodialysis: 16 Peritoneal: 1		
SANTEE DIALYSIS 228 BRADFORD BLVD SANTEE, SC 29142-8677 FAC.#:803-854-3133 CARSON, BETSY C PH#: Facility Email: No Facility Email on Record	Orangeburg / Corporation 5200 VIRGINIA WAY STE 400, DAVITA-LICENSURE & CERTIFICATION BRENTWOOD, TN 37027-7569 DVA HEALTHCARE RENAL CARE INC ERD-0121 / 03/31/2010	24
Licensed Stations: Hemodialysis: 24 Peritoneal: 0		
SOUTH ORANGEBURG DIALYSIS 1080 SUMMERS AVE ORANGEBURG, SC 29115-4920 FAC.#:803-539-0084 HOLEMAN, JENNIFER PH#: 803-539-0084 Facility Email: No Facility Email on Record	Orangeburg / Corporation 5200 VIRGINIA WAY STE 400, DAVITA-LICENSURE & CERTIFICATION BRENTWOOD, TN 37027-7569 DVA HEALTHCARE RENAL CARE INC ERD-0083 / 03/31/2010	21
Licensed Stations: Hemodialysis: 21 Peritoneal: 1		

Totals For Facility/License Type Renal Dialysis

Number of Activities/Facilities licensed: Number Licensed Units

County: Orangeburg

Facility Type: Tattoo Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
5 DIAMONDS CUSTOM TATTOO 222 RODRIGUEZ RD ORANGEBURG, SC 29115 FAC.#:803-534-7101 HUDGINS, STAN R PH#: 803-331-4848 Facility Email: LENACRAFTDA@YAHOO.COM	Orangeburg / Sole Proprietorship 222 RODRIGUEZ RD ORANGEBURG, SC 29118-2550 HUDGINS, STAN R TF-0060 / 12/31/2009	3
SOPHISTICATED INK 110 RODRIGUEZ RD ORANGEBURG, SC 29118-2548 FAC.#:803-378-0373 MARCHANT III, JULIAN L PH#: 803-378-0373 Facility Email: No Facility Email on Record	Orangeburg / Sole Proprietorship 110 RODRIGUEZ RD ORANGEBURG, SC 29118-2548 MARCHANT III, JULIAN L TF-0080 / 12/31/2009	2

Totals For Facility/License Type Tattoo Facility	
Number of Activities/Facilities licensed: <input type="text" value="2"/>	Number Licensed Units <input type="text" value="5"/>

Number of Activities/Facilities licensed in county of Orangeburg	# Lics	52
	Number Licensed Units :	1,461

Report Total

Total Number of Activities/Facilities licensed 52 Total Number Licensed Units 1,461