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TEST PRACTICE GREENHEALTH - HEALTHCARE FACILITY
WITH BEDS AND ORS — no.1682810

Greening the OR - 2016: Profile

Facility Profile Information

You may submit **either** a Partner Recognition or a Partner for Change application, **not both**. If you are having trouble deciding which application is more appropriate for your facility, please contact the **Awards Team**, or contact your PGH Facility Engagement Liaison.

1. Please indicate your facility type:

- acute care hospital (beds and ORs)
- outpatient medical center (no beds, ORs)

1.a What type of hospital are you?

General Acute Care

Reference: [Joint Commission](#).

1.a.b Is the organization a designated Trauma Center?

- Yes
- No

Reference: [American Trauma Society](#).

1.a.b.a Please indicate which level and for which category. Choose all that apply:

- Level I-Adult
- Level I-Pediatric
- Level II-Adult
- Level II-Pediatric
- Level III-Adult
- Level III-Pediatric
- Level IV-Adult
- Level IV-Pediatric
- Level V-Adult

Reference: [American Trauma Society](#).

1.b Is the facility a **Critical Access Hospital (CAH)**?

- Yes
- No

CAHs are rural community hospitals that receive cost-based reimbursement and meet defined criteria outlined in the Conditions of Participation 42DFR485. Learn more [here](#)" target=" blank".

1.c Is the facility an academic medical center/teaching hospital

- Yes
- No

Reference: [AAMC Teaching Hospitals and Health Systems](#)

2. Number of **Operating Rooms**:

3. Number of Surgical Procedures performed annually in these **ORs** (total, not average):

4. Please provide any comments or clarifications