

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS

FORM

SV-8098

1997 ECONOMIC CENSUS SHORT FORM

OMB No. 0607-0827: Approval Expires 10/31/99

DUE DATE	FEBRUARY	12, 1998	
This form is being sent in lieu of the regular economic census form in order to minimize reporting burden. Please answer the questions on this form and return it in the enclosed envelope to:			
BUREAU OF THE CENSUS 1201 East 10th Street Jeffersonville, IN 47134-0001			
Census use			

SV-8098

(Please correct any errors in name, address, and ZIP Code.)

YOUR RESPONSE IS REQUIRED BY LAW. Title 13, United States Code, requires businesses and other organizations that receive this questionnaire to answer the questions and return the report to the Census Bureau. By the same law, YOUR CENSUS REPORT IS CONFIDENTIAL. It may be seen only by Census Bureau employees and may be used only for statistical purposes. Further, copies retained in respondents' files are immune from legal process.

Item 1. PHYSICAL LOCATION	Item 2. KIND OF PRACTICE OR FACILITY
 a. Is this establishment's physical location the same as the address shown in the label? (P.O. box and rural route addresses are not physical locations) 1 Yes No - Report physical location below 	Mark (X) the ONE box which best describes the PRINCIPAL business or activity of this establishment in 1997. Physicians (having M.D. degree) Physician(s), except mental health specialists
Number and street	(practitioner(s) having M.D. degree and engaged in the practice of general or specialized medicine and/or surgery)
City, town, village, etc. State ZIP Code	Psychiatrist(s) or other mental health physician(s) having M.D. degree
	Osteopathic physicians (having D.O. degree)
b. Is this establishment physically located inside the legal boundaries of the city, town, village, etc.? 1 Yes 2 No 3 No legal boundaries 4 Do not know	Physician(s), except mental health specialists (practitioner(s) having D.O. degree and engaged in the practice of general or specialized medicine and/or surgery)
c. In what type of municipality is this establishment physically located? 1 City, village, or borough 2 Town or township 3 Other - Specify 4 Do not know d. In what county (e.g., Dade County) is this establishment physically located?	Dentist(s) or other specialty dental practitioner(s) having D.M.D., D.D.S., or D.D.Sc. degree (including orthodontists, endodontists, oral and maxillofacial surgeons, etc.) 802100 8 Chiropractor(s) 804100 6 Podiatrist(s) 804300 2 Optometrist(s) 804200 4
	ITEM 2 CONTINUED ON PAGE 2

Item 2. KIND OF PRACTICE OR FACILITY – Continued		Item 2. KIND OF PRACTICE OR FACILITY – Continued	
Other health practitioners – Continued		Home health and other activities and facilities	
Mental health practitioner(s) (including psychiatric social workers, clinical psychologists, and psychotherapists NOT having M.D. or D.O. degree)	804910 8	associated with health care - Continued 070 Home health care agency (including visiting nurse association)	
Physical or occupational therapist(s)	804920 7	Home hospice care	
Sports therapist(s) (NOT having M.D. or D.O. degree)	804920 7	Nursing or residential care facility – <i>Describe</i>	
Speech therapist(s) and/or audiologist(s)	804930 6		
Other health practitioner(s) (including dental hygienists, denturists, dieticians, hypnotists, midwives, nurses, paramedics, etc.)	804940 5	Ambulance service, except air ambulance	
Outpatient care facilities		Mobile x-ray, mammography, MRI (magnetic	
HMO medical clinic (operated by the provider of a prepaid medical plan)	801103 3	resonance imaging), CT-scan (computer tomography), and/or ultrasound service	
Ambulatory surgical center	801104 1	Dental laboratory	
Emergency or urgent care center	801104 1	Mobile lithotripter service	
Community health clinic	809330 4	Optical goods store	
Diagnostic imaging center (providing a variety of imaging services such as x-ray, sonogram, and magnetic resonance imaging)	807120 1	Other kind of activity or operation – Describe	
Medical laboratory (providing professional analytic or diagnostic services to the medical profession, or to the patient on prescription of a physician)	807110 2		
Family planning (including abortion), prenatal, or pregnancy counseling clinic	809310 6	REMARKS – Please use this space for any explanations that may be essential in understanding your reported data.	
Mental health clinic (except alcohol and substance abuse treatment)	809320 5		
Alcohol and/or substance abuse treatment clinic	809320 5		
Kidney dialysis center	809200 9		
Outpatient care facility (except office/practice of health practitioners, HMO medical clinic, community health clinic, diagnostic imaging center, medical laboratory, family planning clinic, mental health clinic, alcohol/substance abuse clinic, or kidney dialysis center)	809330 4		
Hospital and medical service plans and other arrangers of medical services			
Management office of a health insurer or health maintenance organization engaged in arranging for hospital, medical, and other health services in return for a fixed periodic premium from subscribers	632401 6		
Administrative intermediary managing contractual arrangements and payments between physicians and sponsors of medical insurance and prepaid health plans	☐ 641192 0		
Other arranger of physician services – Describe			
		It as a CERTIFICATION TO	
		Item 3. CERTIFICATION – This report is substantially accurate and has been prepared in accordance with instructions.	
Home health and other activities and facilities associated with health care		Name of person to contact regarding this report – Print or type	
Nursing agency primarily providing nursing and nursing assistant services to patients in their homes	808200 0	Title	
Nursing agency primarily providing nurses and other employees on a temporary basis to	000200 0	Telephone Area code Number Extension	
hospitals, doctor's offices, and other health care providers	736310 4	Signature of authorized person Date	