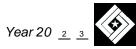
OSHA's Form 300A (Rev. 01/2004)

NW, Washington, DC, 20210. Do not send the completed forms to this office.

Summary of Work-Related Injuries and Illnesses

comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue,



U.S. Department of Labor Occupational Safety and Health Administration

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						Form approved OMB r
All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary. Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0." Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms. Number of Cases Total number of					ne Log. If you	Establishment Information Your establishment NV013 LAS VEGAS-2450 W CHARLESTON BL Street 2450 W CHARLESTON BLVD City LAS VEGAS State NV Zip 89102 Industry description (e.g., Manufacture of motor truck trailers) Freestanding Ambulatory Surgical and Emergency Center Standard Industrial Classification (SIC), if known (e.g., SIC 3715) OR
Total number of dayaway from work 0 (K) Injury and Illne Total number of	job —	tal number of days of transfer or restriction 0 (L)				North American Industrial Classification (NAICS), if known (e.g., 336212) 6 2 1 4 9 3 Employment Information (If you don't have these figures, see the Worksheet on back of this page to continue) Annual average number of employees 94
(M) Injuries	0	(4) Poisonings (5) Hearing Loss	0			Total hours worked by Ill employees last year 144,872.18 Sign here
Skin disorders Respiratory conditi		(6) All other illness				Knowingly falsifying this document may result in a fine.
Public reporting burden for	r this collection of information	on is estimated to average 50 minut	es per response, including time	e year covered by the form. to review the instructions, search and gathuless it displays a currently valid OMB con		I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete. Sarah Warch Company executive VP, Environmental, Occupational Health

(952) 936-1176