



**State of Tennessee
Health Facilities Commission**

502 Deaderick Street, Andrew Jackson Building, 9th Floor, Nashville, TN 37243
www.tn.gov/hfc Phone: 615-741-2364 hsda.staff@tn.gov

**INITIAL APPLICATION FOR LICENSE OF SERVICES
FOR HOSPITAL OR OUTPATIENT DIAGNOSTIC CENTER**

1. NAME AND PHYSICAL ADDRESS OF FACILITY OF SERVICE

Provider Type (Check One): Hospital Outpatient Diagnostic Center (ODC)

Tristar Summit Medical Center

Name

5655 Frist Blvd

Address

Hermitage

TN

37076

City

State

ZIP

0000033

License Number:

2. CEO/ADMINISTRATOR OF PROVIDER

Cindy Bergmeier

CEO

Name

Title

Cindy.bergmeier@hcahealthcare.com

Email Address

Tristar Summit Medical Center

Company Name

5655 Frist Blvd

Address

TN

37076

Hermitage

City

State

ZIP

615-316-4905

Phone Number

3. BILLING INFORMATION FOR FACILITY

Cory Crigger Controller
Name Title

SummDLAccounting@hcahealthcare.com
Email Address

Tristar Summit Medical Center
Company Name

5655 Frist Blvd
Address

Hermitage Tennessee 37076
City State ZIP

615-316-3541
Phone Number

On the following items, check all appropriate services to be licensed.

Have any of the following services been changed since the last occupancy approval or have had a Plans Review related to that service since the last approval? Yes No

If yes, what were the changes and date of changes?:

ESTABLISHMENT OF A BURN UNIT:

Physical Address of Service: _____

Number of Beds _____

What Age Group Will Be Served/Licensed?: Pediatric Adult Both

Will the Burn Unit be Verified by ABA?: Yes No (Please attach documentation of verification.)

If no, why:

ESTABLISHING MRI UNIT/SERVICE: *(If more than one unit, use ATTACHMENT – A.)*

Physical Address of Service: 5655 Frist Blvd, Hermitage, TN 37076

Name Brand of Unit GE Artist

Tesla 1.5

Type (i.e. Close, Short Bore, etc.) Wide bore

Unit's Serial Number PW151397E

Will the MRI Unit be Accredited?: Yes No

If MRI Unit will be Accredited, is it PENDING ACCREDITED

If ACCREDITED, What Organization? ACR

(Attach certificate or proof of accreditation.)

If no, why:

The MRI unit will be registered with the Health Facilities Commission. Yes No

ESTABLISHING PET UNIT/SERVICE: *(If more than one unit, use ATTACHMENT – A.)*

Physical Address of Service: 5655 Frist Blvd, Hermitage, TN 37076

Name Brand of Unit Siemens McT

Type (i.e. PET Only, PET/CT, PET/MRI) PET/CT

Unit's Serial Number 1010

Will the PET Unit be Accredited?: Yes No

If PET Unit will be Accredited, is it PENDING ACCREDITED

If ACCREDITED, What Organization? The Joint Commission

(Attach certificate or proof of accreditation.)

If no, why:

The PET unit will be registered with the Health Facilities Commission. Yes No

~~X~~ **ESTABLISHING NEONATAL INTENSIVE CARE UNIT (NICU):**

Physical Address of Service: 5655 Frist Blvd, Hermitage, TN 37076

Choose Designation Type: ~~X~~ First Time Self Designation/Initial NICU License

Designation at Different Level

What is the Current License
Level of Care? _____

What is the Requested Level? _____

Ownership/Physical Location Change

Number of Beds by Each Level

Level II	<u>10</u>
Level III	_____
Level III with Surgery	_____
Level IV	_____

Have you been evaluated by AAP?: Yes ~~X~~ No
If yes, please provide documentation.

Designate Expiration Date: _____

Neonatal Program Manager

Frances Hampton

Director Women's Services

Name

Title

Frances.hampton@hcahealthcare.com

Email Address

615-316-4250

Phone Number

Neonatal Medical Director

Dr. Hadeer Karmo

Neonatal Medical Director

Name

Title

Hadeer.karmo@hcahealthcare.com

Email Address

615-414-1729

Phone Number

Pursuant to Tennessee Rule of Civil Procedure 72, I hereby declare under perjury that the information provided in this application is true and correct. Signee for this application certifies that he or she is of responsible character and able to comply with the minimum standards and regulations established by Tennessee pertaining to the type of facility or services for which application for licensure is made and with the rules promulgated under Tennessee Code Annotated §68-11-201 and Rules 0720-.14, 0720-36, and 0720-47 adopted by the Commission effective December 1, 2025. Signee also certifies that a policy has been implemented to inform all employees of their obligation under TCA §71-6-103 to report incidents of abuse or neglect.



Signature

11/25/25

Date

Aleece Baker

Printed Name

DMS Health Technologies
West Fargo, ND

DMS Health Technologies

West Fargo, ND

has been Accredited by




The Joint Commission


Which has surveyed this organization and found it to meet the requirements for the
Ambulatory Health Care Accreditation Program

March 11, 2023

Accreditation is customarily valid for up to 36 months.


Jane Englebright, PhD, RN, CENP, FAAN
Chair, Board of Commissioners

ID #484420
Print/Reprint Date: 06/05/2023


Jonathan B. Perlin, MD, PhD, MSHA, MACP, FACMI
President and Chief Executive Officer

The Joint Commission is an independent, not-for-profit national body that oversees the safety and quality of health care and other services provided in accredited organizations. Information about accredited organizations may be provided directly to The Joint Commission at 1-800-994-6610. Information regarding accreditation and the accreditation performance of individual organizations can be obtained through The Joint Commission's web site at www.jointcommission.org.





Summit Medical Center

5655 Frist Boulevard
Hermitage, Tennessee 37076

was surveyed by the
ACR Committee on MRI Accreditation
of the Commission on Quality and Safety

The following magnet was approved

General Electric Co. (GE Medical Systems) Signa Artist 2021

For

Body, Head, MRA, MSK, Spine

Accredited from:

February 28, 2024 through February 22, 2027

CHAIR, COMMITTEE ON MRI ACCREDITATION

PRESIDENT, AMERICAN COLLEGE OF RADIOLOGY



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February 22, 2024 through February 22, 2027

CHAIR, COMMITTEE ON MRI ACCREDITATION

PRESIDENT, AMERICAN COLLEGE OF RADIOLOGY

AMERICAN COLLEGE OF RADIOLOGY®

Certificate of Accreditation



TRISTAR SUMMIT OUTPATIENT IMAGING

3901 CENTRAL PIKE
SUITE 154 - MRI
Hermitage, Tennessee 37076

was surveyed by the ACR® Committee on MRI
Accreditation of the Commission on Quality and Safety

The following magnet was approved

**General Electric Co. (GE Medical Systems)
Signa Artist 2023**

for

Breast, Head, MSK, Spine

**Accredited from
November 18, 2025 through November 18, 2028**

A stylized, cursive signature in black ink, appearing to be a signature of a representative from the MRI Accreditation Committee.

Chair, Committee ON
MRI Accreditation

A cursive signature in black ink that reads "David B. Johnson".

Chair, Commission on
Quality and Safety



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