

DIGIRAD CORP  
Form SC 13G  
February 14, 2006

OMB APPROVAL  
OMB Number: 3235-0145  
Expires: February 28, 2006  
Estimated average burden  
hours per response...11

**UNITED STATES  
SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549**

**SCHEDULE 13G**

**Under the Securities Exchange Act of 1934  
(Amendment No. )\***

Digirad Corporation  
(Name of Issuer)  
Common Stock (\$0.0001 par value)  
(Title of Class of Securities)  
253827109  
(CUSIP Number)  
December 31, 2005  
(Date of Event Which Requires Filing of this Statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

- Rule 13d-1(b)
- Rule 13d-1(c)
- Rule 13d-1(d)

\* The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be filed for the purpose of Section 18 of the Securities Exchange Act of 1934 ( Act ) or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

**Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.**

CUSIP No. 253827109

Page 2 of 9

NAMES OF REPORTING PERSONS:

1

HCA Inc.

I.R.S. IDENTIFICATION NOS. OF ABOVE PERSONS (ENTITIES ONLY):

75-2497104

CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (SEE INSTRUCTIONS):

2

Not Applicable

(a)

(b)

SEC USE ONLY:

3

CITIZENSHIP OR PLACE OF ORGANIZATION:

4

Delaware

SOLE VOTING POWER:

5

NUMBER OF 0

SHARED VOTING POWER:

SHARES BENEFICIALLY OWNED BY 6

1,211,809

SOLE DISPOSITIVE POWER:

EACH REPORTING PERSON 7

0

SHARED DISPOSITIVE POWER:

WITH: 8

1,211,809

AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON:

9

1,211,809

**10** CHECK IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (SEE INSTRUCTIONS):

o

**11** PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9):

6.5%

**12** TYPE OF REPORTING PERSON (SEE INSTRUCTIONS):

CO

---

CUSIP No. 253827109

Page 3 of 9

**1** NAMES OF REPORTING PERSONS:

Health Care Indemnity, Inc.

I.R.S. IDENTIFICATION NOS. OF ABOVE PERSONS (ENTITIES ONLY):

61-0904881

**2** CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (SEE INSTRUCTIONS):

Not Applicable

(a)

(b)

**3** SEC USE ONLY:

**4** CITIZENSHIP OR PLACE OF ORGANIZATION:

Colorado

SOLE VOTING POWER:

**5**

NUMBER OF 657,082

SHARED VOTING POWER:

**6**

SHARES BENEFICIALLY OWNED BY 0

SOLE DISPOSITIVE POWER:

**7**

EACH REPORTING PERSON 657,082

SHARED DISPOSITIVE POWER:

**8**

WITH: 0

**9** AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON:

657,082

**10** CHECK IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (SEE INSTRUCTIONS):

o

**11** PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9):

3.5%

**12** TYPE OF REPORTING PERSON (SEE INSTRUCTIONS):

CO

---

CUSIP No. 253827109

Page 4 of 9

**1** NAMES OF REPORTING PERSONS:

Western Plains Capital, Inc.

I.R.S. IDENTIFICATION NOS. OF ABOVE PERSONS (ENTITIES ONLY):

62-1727347

**2** CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (SEE INSTRUCTIONS):

Not Applicable

(a)

(b)

**3** SEC USE ONLY:

**4** CITIZENSHIP OR PLACE OF ORGANIZATION:

Nevada

SOLE VOTING POWER:

**5**

NUMBER OF 280,030

SHARED VOTING POWER:

**6**

SHARES BENEFICIALLY OWNED BY 0

SOLE DISPOSITIVE POWER:

**7**

EACH REPORTING PERSON 280,030

SHARED DISPOSITIVE POWER:

**8**

0

**9** AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON:

280,030

**10** CHECK IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (SEE INSTRUCTIONS):

o

**11** PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9):

1.5%

**12** TYPE OF REPORTING PERSON (SEE INSTRUCTIONS):

CO

---



CUSIP No. 253827109

Page 5 of 9

NAMES OF REPORTING PERSONS:

1

The HCA Foundation

I.R.S. IDENTIFICATION NOS. OF ABOVE PERSONS (ENTITIES ONLY):

61-1230563

CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (SEE INSTRUCTIONS):

2

Not Applicable

(a)

(b)

SEC USE ONLY:

3

CITIZENSHIP OR PLACE OF ORGANIZATION:

4

Tennessee

SOLE VOTING POWER:

5

NUMBER OF 274,697

SHARED VOTING POWER:

SHARES BENEFICIALLY OWNED BY 6 0

SOLE DISPOSITIVE POWER:

EACH REPORTING PERSON 7 274,697

SHARED DISPOSITIVE POWER:

WITH: 8 0

0

AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON:

9

274,697

**10** CHECK IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (SEE INSTRUCTIONS):

o

**11** PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9):

1.5%

**12** TYPE OF REPORTING PERSON (SEE INSTRUCTIONS):

CO

---

**Item 1.**

**(a) Name of Issuer:**

Digirad Corporation

**(b) Address of Issuer's Principal Executive Offices**

13950 Stowe Drive  
Poway, California 92064

**Item 2.**

**(a) Name of Person Filing**

HCA Inc.  
Health Care Indemnity, Inc.  
Western Plains Capital, Inc.  
The HCA Foundation

**(b) Address of Principal Business Office or, if none, Residence**

The address of the principal business office of each of HCA Inc., Health Care Indemnity, Inc., Western Plains Capital, Inc., and The HCA Foundation is One Park Plaza, Nashville, Tennessee 37203.

**(c) Citizenship**

HCA Inc. is a Delaware corporation.  
Health Care Indemnity Inc. is a Colorado corporation.  
Western Plains Capital, Inc. is a Nevada corporation.  
The HCA Foundation is a Tennessee not for profit corporation.

**(d) Title of Class of Securities**

Common Stock, \$.0001 par value per share

**(e) CUSIP Number**

253827109

**Item 3. If this statement is filed pursuant to §240.13d-1(b), or §240.13d-2(b) or (c), Check Whether the Person Filing is a:**

Not applicable.

**Item 4. Ownership**

---

(a) Amount beneficially owned as of December 31, 2005:

HCA Inc. ( HCA ) indirectly owns and may be deemed the beneficial owner of 1,211,809 shares of the Common Stock, par value \$0.0001 per share, of Digirad Corporation, as to which 657,082 shares are directly owned by Health Care Indemnity, Inc., a subsidiary of HCA; as to which 280,030 shares are directly owned by Western Plains Capital, Inc., a subsidiary of HCA; and as to which 274,697 shares are directly owned by The HCA Foundation, a subsidiary of HCA. HCA disclaims beneficial ownership of any shares of the Common Stock of Digirad Corporation owned of record by Health Care Indemnity, Inc., Western Plains Capital, Inc. or The HCA Foundation. Each of Health Care Indemnity, Inc., Western Plains Capital, Inc. and The HCA Foundation disclaims beneficial ownership of any shares of the Common Stock of Digirad Corporation owned of record by the other.

(b) Percent of Class:

See Item 11 of Cover Pages.

(c) Number of shares as to which such person has:

(i) sole power to vote or to direct the vote:

See Item 5 of Cover Pages.

(ii) shared power to vote or to direct the vote:

See Item 6 of Cover Pages.

(iii) sole power to dispose or to direct the disposition of:

See Item 7 of Cover Pages.

(iv) shared power to dispose or to direct the disposition of:

See Item 8 of Cover Pages.

**Item 5. Ownership of Five Percent or Less of a Class**

If this statement is being filed to report the fact that as of the date hereof the reporting person has ceased to be the beneficial owner of more than five percent of the class of securities, check the following o.

**Item 6. Ownership of More than Five Percent on Behalf of Another Person**

---

Not applicable.

**Item 7. Identification and Classification of the Subsidiary Which Acquired the Security Being Reported by the Parent Holding Company**

Not applicable.

**Item 8. Identification and Classification of Members of the Group**

Not applicable. The reporting persons expressly disclaim membership in a group as used in Rule 13d-1.

**Item 9. Notice of Dissolution of Group**

Not applicable.

**Item 10. Certifications**

Not applicable.

---

**SIGNATURE**

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: February 14, 2006

**HCA INC.**

By: /s/ R. Milton Johnson  
Name: R. Milton Johnson  
Title: Executive Vice President and Chief  
Financial Officer

**HEALTH CARE INDEMNITY, INC.**

By: /s/ David G. Anderson  
Name: David G. Anderson  
Title: Vice President and Treasurer

**WESTERN PLAINS CAPITAL, INC.**

By: /s/ John M. Franck II  
Name: John M. Franck II  
Title: Vice President and Assistant  
Secretary

**THE HCA FOUNDATION**

By: /s/ David G. Anderson  
Name: David G. Anderson  
Title: Treasurer